
Meeting	Health and Well-Being Board
Date	23rd January 2014
Subject	Healthwatch Barnet Update
Report of	Healthwatch Barnet
Summary of item and decision being sought	This paper provides the Board with an update on Healthwatch Barnet's key actions and activities.

Officer Contributors	Selina Rodrigues, Head of Healthwatch Barnet Julie Pal, Chief Executive Community Barnet
Reason for Report	<p>This report provides the Health and Well-Being Board with:</p> <ul style="list-style-type: none"> • Information about the key actions to be undertaken by Healthwatch Barnet and where it requests input from statutory organisations. • An update on priority activities for Healthwatch Barnet • A summary of Barnet resident responses on health and social care <p>Barnet Mencap, one of Healthwatch Barnet charity partners, will provide a verbal summary of the research to date with people with learning disabilities.</p>
Partnership flexibility being exercised	N/A
Wards Affected	All
Status (public or exempt)	Public
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1. RECOMMENDATION

- 1.1 That the Health and Well-Being Board notes this update report and provides comments on its content.**

2. RELEVANT PREVIOUS DISCUSSIONS AND WHERE HELD

- 2.1 At its meeting of 25 April 2013, the Health and Well-Being Board noted a paper from Healthwatch Barnet on its establishment and initial activity. At its meeting on 26 June 2013, the Health and Well-Being Board noted a paper from Healthwatch Barnet on its activities and priority future actions.

3. LINK AND IMPLICATIONS FOR STRATEGIC PARTNERSHIP-WIDE GOALS (SUSTAINABLE COMMUNITY STRATEGY; HEALTH AND WELL-BEING STRATEGY; COMMISSIONING STRATEGIES)

- 3.1 Through its representation on statutory bodies and its ongoing relationship with health and social care fora and residents, Healthwatch Barnet will contribute to the development and delivery of the Health and Well-Being Strategy and other relevant strategies and initiatives.

4 NEEDS ASSESSMENT AND EQUALITIES IMPLICATIONS

- 4.1 One of the core aims of Healthwatch Barnet is to ensure the views and experiences are heard and represented of those group with protected characteristics under the Equality Act, and with under-represented communities and individuals. Healthwatch Barnet runs targeted activities with people from protected groups (as defined in the Equality Act 2010) and its work is further enriched by our developing engagement programme with children and young people and older adults.

5. RISK MANAGEMENT

- 5.1 A risk register was submitted as part of the tender documents and issues are identified through Healthwatch Barnet's monthly work plan reviews.

6. LEGAL POWERS AND IMPLICATIONS

- 6.1 Section 182 to 184 of the Health and Social Care Act, 2012 and regulations subsequently issued under these sections, govern the establishment of Healthwatch, its functions and the responsibility of local authorities to commission a local Healthwatch.

7. USE OF RESOURCES IMPLICATIONS- FINANCE, STAFFING, IT ETC

- 7.1 Healthwatch Barnet has been allocated funding of £197,361 per annum.

8. COMMUNICATION AND ENGAGEMENT WITH USERS AND STAKEHOLDERS

- 8.1 Healthwatch Barnet has distributed its Communications Strategy, which is also publicly available on the Healthwatch Barnet website.

9. ENGAGEMENT AND INVOLVEMENT WITH PROVIDERS

- 9.1 Healthwatch Barnet has distributed its Engagement Strategy, which is also publicly available on its website.
- 9.2 Healthwatch Barnet is meeting its contractual targets for engaging with a wide range of diverse communities.

10. DETAILS

10.1 INTRODUCTION

10.2 Healthwatch Barnet management and operational structure

- 10.3 Healthwatch Barnet is part of a new national network, led by Healthwatch England. It was established by the Health and Social Care Act 2012 and aims to give users of health and social care services a powerful voice locally and nationally. Healthwatch Barnet is the independent voice for residents of Barnet on health and social care.

- 10.4 Community Barnet is the organisation contracted to deliver Healthwatch Barnet. However, Healthwatch Barnet has its own distinct identity, strategic and operational plans, staff and volunteers and dedicated stand-alone communication and marketing materials. Healthwatch Barnet is a consortium of charity partners which ensures a broad reach to Barnet's diverse communities. The partners are Citizens Advice Bureau (which operates the information, advice and signposting service for residents), Advocacy in Barnet, Age UK, Barnet Carers Centre, Barnet Mencap, Community Barnet's Children and Young People Team and Parenting Consortium, Barnet Centre for Independent Living, Home-Start Barnet, Jewish Care and Mind in Barnet.

- 10.5 Healthwatch Barnet staff team consists of the full-time Head of Healthwatch, the Volunteer and Projects Officer, Communications Officer and Engagement Officer (all part-time). The post of part-time Policy and Research Officer is currently being recruited.

10.6 HEALTHWATCH BARNET'S VISION, AIMS AND OBJECTIVES

- 10.7 Healthwatch Barnet's vision is for a thriving, active community of residents, patients, volunteers and organisations that contribute to the development of quality health services in the Borough. Healthwatch Barnet will:

- have a powerful relationship with Barnet residents, volunteers and service-users to gather and represent their views and experiences and capture and present the voices of under-represented communities;
- promote and support the involvement of people in the monitoring, commissioning and provision of local care services;
- signpost individuals to advice and information to help them make informed choices about their health and social care.

10.8 Healthwatch Barnet delivers a range of projects which are both determined by its statutory responsibilities or developed in direct response to national or local evidence and need.

10.9 Healthwatch Barnet has a seat on the Health and Well-Being Board and Barnet CCG Board, through which it reports on experience and evidence of local residents on the quality and delivery of health and social care.

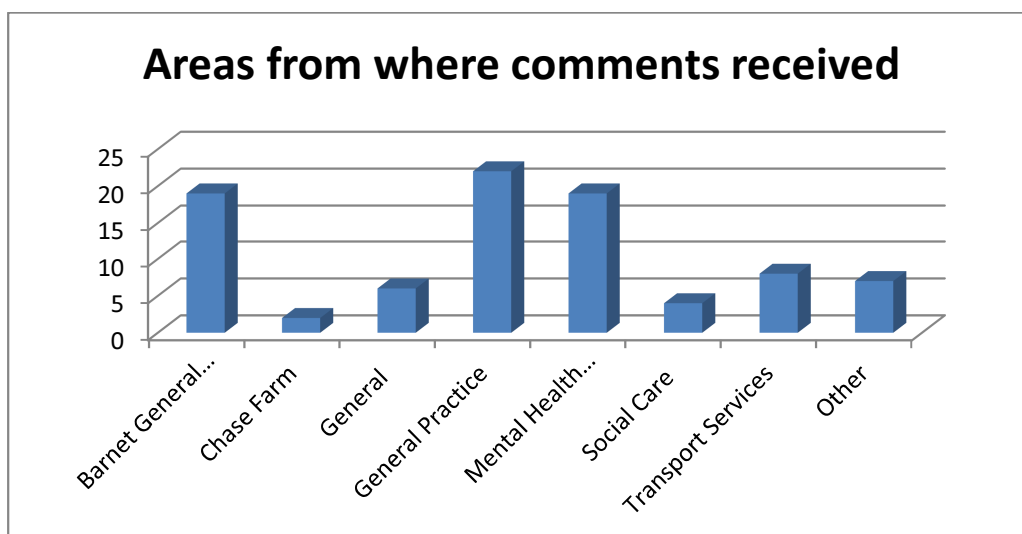
10.10 REPRESENTATION OF USER VOICE AND EXPERIENCES

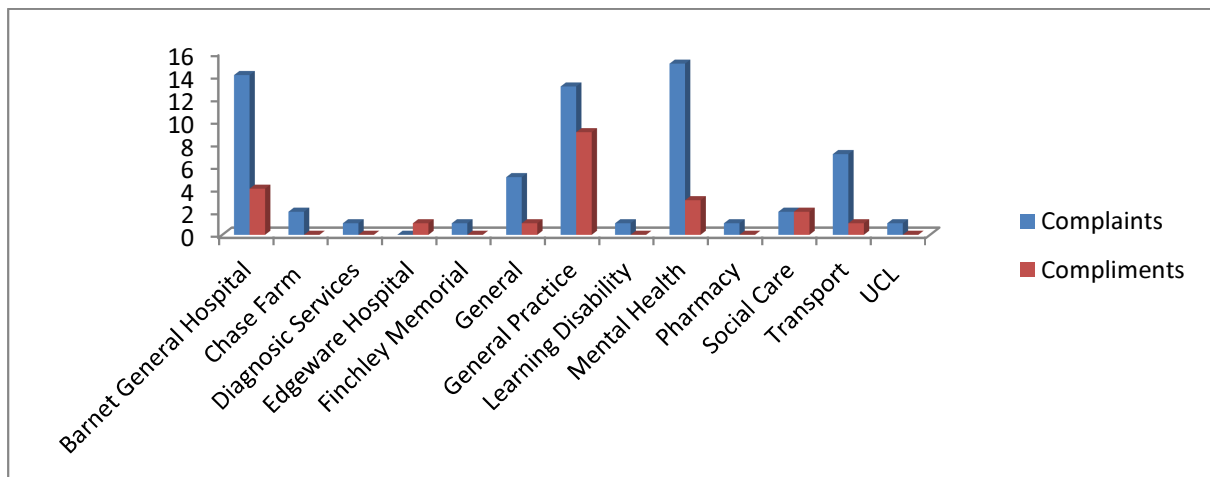
10.11 Healthwatch Barnet Reach and Engagement (On-going)

10.12 To date, Healthwatch Barnet, supported by the extensive reach of its partner organisations have reached 23,383 contacts, providing information and updates about Healthwatch. Staff have met with or attended the events, including internal business meetings and public community meetings, of 63 charity and community organisations, (757 contacts), to present information, and receive feedback on Healthwatch Barnet activity to date and to gather residents' experiences of health and social care. From January, Healthwatch Barnet ambassadors are available to meet with community groups to gather experiences of health and social care.

10.13 Data summary

10.14 Healthwatch Barnet has received 86 comments, compliments or complaints about health and social care services. A summary of this feedback is presented below.





10.15 The initial feedback predominantly relates to health rather than social care. Respondents highlighted concerns about access to GP appointments; noise on wards and support to patients using ward facilities; concern about attitudes of staff to different communities; translation services and GP expertise on mental health; hospital transport. The compliments primarily related to the quality of staff liaison with patients.

10.16 It is important to emphasise that this initial feedback is anecdotal. Healthwatch Barnet aims to increase the volume and range of feedback on services through a number of communication tools and will present further detailed data in due course.

10.17 **Action:** Although the feedback is not conclusive at this stage, action is underway in these areas. The Healthwatch Barnet GP Project focuses on the appointment system; Healthwatch Barnet is liaising with the CCG on key communities with which to consult on its Equality Strategy; and the CCG is focusing on GP expertise on mental health. Healthwatch Barnet is keen to receive any further guidance from statutory bodies on how it can input into effective hospital transport.

10.18 The Healthwatch Barnet Engagement Group (on-going)

10.19 This is an advisory forum, comprising of ten volunteer residents, who represent a range of Barnet's communities. Its role is to provide expertise, feedback and informed opinions on Healthwatch Barnet's priorities and projects and members contribute to projects, events and activities. It has positively contributed by identifying and developing work with older adults and the hospital enter and view visits and in developing the scope of Healthwatch Barnet's public meeting in November. The volunteers also represent Healthwatch Barnet on a range of statutory committees, including the Partnership Boards, hospital patient forums and CCG strategy groups.

10.20 The Engagement Group plan to deliver a formal response to Healthwatch England's national consultation on rights and responsibilities.

10.21 Healthwatch Barnet Engagement Group is keen that Healthwatch operates as an effective, active organisation that contributes to real change in services, and does not merely listen to and report on residents' views.

10.22 Healthwatch Barnet Public Meeting, Listening and Responding

10.23 The aims of this event, outlined by Councillor Hart, were to update residents on our activities as part of Healthwatch Barnet's commitment to represent and be accountable to local people and for residents to be informed of health developments, including Barnet Council Public Health review of the Joint Strategic Needs Assessment and Barnet CCG's work to monitor the quality of services in the Borough. A member of the Engagement Group also spoke passionately about user-voice and why residents should get involved. In addition to a question and answer session, participants could booked one-to-one sessions with Healthwatch and Barnet Citizens Advice Bureau to relate their experiences of health and social care and to receive specific advice from the CAB. Participants could also get information and guidance from organisations such as Jewish Care, Barnet Mencap, Barnet Carers Centre, and Voiceability and from HWB Enter and View and GP Groups. Evaluation forms, completed by a third of participants, were uniformly positive, with a third of respondents taking further action as a result of the event.

10.24 Enter and View (On-going)

10.25 Healthwatch Enter and View (E+V) representatives have statutory powers to enter health and social care premises to observe and assess the nature and quality of services and obtain the views of the people using those services. Healthwatch Barnet review care homes for older people and services for people with mental health conditions and will be commencing E+V visits to hospital wards in January 2014. The reports are sent to the manager of the facility. In addition, for residential care, reports are then sent to Barnet Council Safeguarding Overview and Scrutiny Committee and to senior social care and safeguarding officers of the Council. Reports on health services are sent to the Health Overview and Safeguarding Committee and senior CCG staff. All reports are sent to the Care Quality Commission and the Care Quality and Safeguarding Teams in Barnet Council, with whom Healthwatch Barnet meet quarterly. All reports are published on the Healthwatch Barnet website.

10.26 The Enter and View Group is chaired by a volunteer and volunteers actively develop the priorities and activities for the programme. To date we have undertaken twenty-one E+V visits to different locations.

10.27 Residential care homes

10.28 Two-thirds of the care homes Healthwatch Barnet have visited have made changes as a result of recommendations from the E+V visit. Urgent issues of concern have been highlighted directly to the Council's Care Quality Team.

- 10.29 Two care homes did not respond to recommendations to check that residents can summon staff quickly and easily. Of these, one home was subsequently inspected by the CQC and one was re-visited by the Enter and View team.
- 10.30 Residents and staff have commented that it is difficult to arrange dentist or doctor visits when treatment is needed for one resident.
- 10.31 Residents expressed concerns about food in three settings, with only one care home confirming the issue would be rectified. There were a number of comments about activities, including the need to provide activities, particularly regular physical exercise. Five out of the nine providers said they would follow this up.
- 10.32 As there are emerging trends regarding visits from dentists and doctors, food and activities, the Enter and View Team will explore and follow this up in more detail, with guidance from the CQC. Residents and staff from three care homes wished to note that the new online parking ticket system was not considered user-friendly especially for older people who were visiting their relatives. Healthwatch Barnet has raised the outstanding issues with Barnet Council Care Quality Team and will follow this up at the next quarterly meeting.

10.33 Mental health

- 10.34 The E+V teams have visited the Ken Porter, Barnet General and Thames ward within the Denis Scott unit in Edgware Hospital and also received feedback from three people after the visit. Patients and relatives commented positively on individual staff and observed that activity had improved for patients in Ken Porter ward. However concern was expressed about the lack of physical and other stimulating activity for patients, the quality of food and it was noted that all complaints and compliments should be recorded, including oral feedback from patients and relatives. This was reported to the Health Overview and Scrutiny Committee in December 2013. The Head of Healthwatch Barnet and Community Barnet Chief Executive Officer are due to meet with representatives from Barnet, Enfield and Haringey Mental Health Trust.
- 10.35 Healthwatch Barnet is very concerned about the Care Quality Commission reports on mental health wards at Chase Farm hospital and has asked the Health Overview and Scrutiny Committee to indicate if there are further areas it would be useful for Healthwatch Barnet to research or about which to gather service-users' feedback
- 10.36 **GP Group (On-going)**
- 10.38 The Healthwatch GP Group was established in response to residents' concerns about the GP appointment system. It is chaired by volunteers who are actively involved in developing the priorities and activities for the group.

- 10.39 Its first report, *Patient Access to GP Appointments* examined patients' experience of the appointment system was launched at a joint LINK/CCG public meeting in November 2012. The second report, *The GP Appointment System, The Way Forward* presented the staff viewpoint and identified the improved systems and communications that some practices had implemented, to positive effect. It also highlighted concerns about physical access into and in the buildings. This was presented to the informal CCG Board meeting, to the Practice Managers Forum and the Local Medical Committee in the autumn. A representative from the LMC commented the report "was a breath of fresh air". Through the winter, HealthwatchBarnet will meet with practice managers to encourage appropriate access and communication for people with physical and learning disabilities (in partnership with Sense and the Physical and Sensory Impairment Partnership Board) and to help develop communication plans to inform patients on how to use the GP service appropriately, maximising access to appointments.
- 10.40 Healthwatch Barnet recognises that the volume of patient need and appointment times are a challenge to the NHS nationally. Barnet CCG has supported the GP Groups' aims and activities to date. Healthwatch Barnet requests NHS England London region and Barnet CCG's continued support in encouraging GPs to implement simple and low-cost and no-cost changes that will produce a better quality experience for patients.
- 10.41 People with learning disabilities (Oct 2013 – Feb 2014)**
- 10.42 Barnet Mencap has carried out focus groups, individual sessions and surveys with people with learning disabilities, their families and carers. A verbal report will be presented by the Chief Executive of Barnet Mencap to the HWBB meeting and a full written report will be presented to Health and Well-Being Board members, Barnet CCG and Lead Commissioners in early February 2014.
- 10.43 Healthwatch Barnet and Barnet Mencap will then request a formal response from relevant statutory partners or providers to their report with details of how the recommendations will be followed up, alternatives suggested or explanations as to why changes cannot be implemented.
- 10.44 Older Adults (Jan to Mar 2014)**
- 10.45 Healthwatch Barnet is at the project planning stage for its consultation and engagement with older adults. The projected growth of Barnet's older adults population means that we need to establish mechanisms of engagement now so that we can reach the current cohort but also those who are projected to enter this cohort over the next 10 years. Healthwatch Barnet is liaising with Barnet Council's Later Life Lead Commissioner to identify specific feedback that would be helpful, to inform future development or commissioning.
- 10.46 Community Barnet Children and Young People (Jan to Apr 2014)**

- 10.47 A Healthwatch project team, which includes young people, will deliver a mini road show to approximately one hundred and fifty young people, to gather their views on health issues and social care issues, visiting key fora, such as the Youth Board, young carers, sixth form colleges, sports clubs and faith youth groups and young people with disabilities and who use mental health services. An online survey has also been developed. It is anticipated that the findings will be presented at an event led by young people in late March/early April 2014. A dedicated Healthwatch Barnet web-page for children and young people will be created.
- 10.48 **Community Barnet Children and Young People/Gypsy, Roma, Traveller/Munya (Jan to Mar 2014)**
- 10.49 Healthwatch Barnet has met with the Gypsy Roma Traveller community, which meets in High Barnet and Munya, the Irish Traveller group, based in Collingwood. We are encouraging CCG and hospital leads to engage with the High Barnet group. In partnership with Healthwatch Barnet and the Royal Free Hospital, Munya will devise a community event to raise awareness of diabetes.
- 10.50 **Home-Start Barnet consultation (Feb – Mar 2014)**
- 10.51 Home-Start Barnet support families with young children. It will carry out focus groups with parents in Barnfield, Canada Villa and Grahame Park, to include questions about maternity services, presenting to and referral by GPs to maternity services, caesarean sections, induced labour, post-natal care and the promotion and take-up of birthing centres. These areas have been developed in consultation with Barnet CCG commissioning lead for maternity and children services.
- 10.52 **Barnet Centre for Independent Living (Feb-Mar 2014)**
- 10.53 BCIL will undertake community research into residents' experience of the complaints process in Barnet, Enfield and Haringey Mental Health Trust during 2014. This is in response to comments about the effectiveness of the service. It will align with Healthwatch Barnet's overall review of and report on complaints systems in the Borough (see below).
- 10.54 The outcome and recommendations from these consultations will be taken up with relevant providers and statutory partners.
- 10.55 **Communications (On-going)**
- 10.56 Healthwatch Barnet has a fully functioning website, which is updated weekly, and charity partners also promote events, activities and consultations. Regular Twitter messaging takes place weekly. Coverage of Healthwatch Barnet has appeared in Barnet First, Your Life and Barnet Times. The Enter and View Programme is also featured in Barnet Council's Social Care Connect portal. Publicity about Healthwatch Barnet has been disseminated to GPs, hospitals, pharmacists and dentists and through the Community Barnet CYP network.

10.57 Healthwatch Barnet aims to increase its local and regional profile through concerted marketing and promotional initiatives in the next months.

10.58 INVOLVEMENT OF LOCAL PEOPLE IN COMMISSIONING, MONITORING AND PROVISION OF SERVICES

10.59 Healthwatch Barnet liaison with statutory services

10.60 Healthwatch Barnet staff have communicated these priorities and activities through meetings, its newsletter and website to statutory sector partners (including Barnet CCG, Barnet Council and health and social care providers) to charity sector organisations and residents.

10.61 Although a key role for Healthwatch Barnet is to question and challenge service providers and commissioners, we are also keen to work in partnership with statutory commissioners and providers to develop and deliver high-quality, effective patient engagement.

10.62 To support this, Healthwatch Barnet request that the Barnet CCG and Barnet Council share their commissioning and engagement plans during their developmental stage so that we could dovetail these activities with our own engagement plans. By taking this approach we would hope to reduce the risk of engagement/consultation fatigue for service users and patients.

10.63 Barnet Health and Social Care Integration (HSCI) Programme

10.64 Healthwatch Barnet is working in partnership with the Health and Social Care Integration Programme. Healthwatch Barnet has delivered two focus groups to date; there are plans for the HSCI Programme to utilise Healthwatch Barnet's networks to further consult on key project proposals, systems and operations.

10.65 HSCI Focus Group: Branding Identity Focus Group (Nov 2013)

10.66 Healthwatch Barnet organised eight resident volunteers to participate in this focus group, led by Barnet Council. Barnet Council asked Healthwatch volunteers for their feedback on new branding; the group created a new strapline, which they recommended the Council uses.

10.67 HSCI Focus Group: Frail elderly and long-term conditions (Dec 2013)

10.68 Healthwatch Barnet organised nine volunteer residents to participate in this focus group, led by Ernst and Young on behalf of Barnet Council and Barnet CCG. The consultants noted that the group was representative of Barnet communities and the input "very valuable in providing insight into the experiences of service users and patients". Key recommendations from the focus group included:

- Carer or service-users' input is an integral part of the development of services. It's important that this engagement is meaningful and not lip service and as such, regular feedback to the participants on the development of services is important.
- Dedicated, named key contacts are essential to patients/service-users being supported and informed on services. In addition, accessible high-street locations are vital to ensure good awareness and take-up of health and social care. Transport is key to communities accessing services, particularly those less active and residents with lower incomes. Support services and effective communication are essential to ensure diverse communities understand the availability of services.
- IT and other processes and systems must be joined up between health and social care.
- The charity sector provides a range of wellbeing and prevention services so should be consulted and involved in the development of future health and social care integration.
- Budget-holders safeguard their budgets. People are referred to other services, only to be told there is no funding or they are not entitled to medical or social care.

10.69 Public Health Health Checks Review (Nov 2013)

10.70 Healthwatch Barnet organised seven volunteer residents to participate in this focus group, to identify the barriers to and ways to increase the take-up of Health Checks. The consultant commented that the Healthwatch Barnet has a "strong well-established network of people from various backgrounds who are able to engage intelligently and assertively in discussions around health."

10.71 Barnet CCG Equality Strategy

10.72 Healthwatch Barnet has identified and will provide some of the networking and consultation links for the CCG Equality staff. To date, Barnet CCG has confirmed meetings with the new Barnet Migrant and Refugee Forum and the Supplementary Schools Forum (both supported by Community Barnet). We are also recommending that the CCG engages with Munya (the Irish Traveller movement) and the Gypsy, Roma Traveller project, the Parenting Consortium and the children and young people's network, to ensure there are responses from a range of Barnet communities.

10.73 As part of the essential good practice in engagement, Healthwatch Barnet requests that the HSCI programme and commissioners provide timely feedback to the focus groups details of how the recommendations will be followed up, alternatives suggested or explanations as to why changes cannot be implemented

10.74 Complaints and patient feedback

10.75 The Healthwatch England Annual Report 2012/13 stated that three out of five people don't know how to give feedback on services. As reported to the

Health and Well-Being Board in July 2013, Barnet residents are confused about the new NHS structures, including the new processes for providing compliments, comments and complaints to health service providers. The Government review of the complaints process, "Putting Patients Back in the Picture" published in October 2013, highlighted similar issues.

- 10.76 Healthwatch Barnet undertook a mystery shopping exercise at GP surgeries to see how easy it is for patients to give comments/compliments/complaints. We visited eleven practices (which is 15% of those in Barnet). Of these, seven had no information about how to give feedback or make complaints; six provided leaflets that they handed out when asked and two asked for the contact details of the enquirer before they would give any information (we think this is bad practice).
- 10.77 Healthwatch Barnet will be contacting these surgeries to recommend that feedback systems are implemented and publicised and will carry out follow-up visits. The CCG will be requested to provide a reminder about complaints and feedback systems through the GP e-bulletin.
- 10.78 Healthwatch England is leading a national project to improve the complaints process. To support this Healthwatch Barnet will therefore produce a short report on patient experiences, including succinct case studies, to be presented to providers for their response. Healthwatch Barnet will also then circulate the report to Healthwatch England, NHS England (London region), the CQC, CCG Board and staff and the Health and Well-Being Board.
- 10.79 Healthwatch Barnet is currently recruiting a new Policy and Research Officer. This post will be central to our monitoring of local providers performance and will also support our community research function.

10.80 Statutory sector engagement

- 10.81 Healthwatch Barnet has met with patient engagement leads within the CCG, Barnet and Chase Farm Hospital and The Royal Free Hospital.
- 10.82 Healthwatch Barnet will liaise with Barnet CCG and providers to understand, support and respond to their developing engagement plans.

10.83 SIGNPOSTING INDIVIDUALS TO ADVICE AND INFORMATION

- 10.84 This service is provided by Barnet Citizens Advice Bureau. The rate of usage of this service is in line with other providers nationally. A communications group has been established across the consortium to further push the 'Healthwatch' brand – this is also a key priority for Healthwatch England. The key themes that have emerged through this service include enquiries about NHS charges, prescription charges and low income subsidies. Requests for the location of health and social care services has been lower than expected. Due to a system change at the CAB, updated details of the service can't be included in the paper, but a verbal update will be provided at the meeting.

11 BACKGROUND PAPERS

11.1 None