



Monthly Update the work of **healthwatch**
Kent

This report gives examples of the things we have achieved in October 2017

Section 1: How we made a difference

We have had **521** contacts this month via telephone, email and face to face visits.

Issue	Who did it involve	What did Healthwatch Kent do?	What Happened ?
The Accessible Information Standard	Ashford CCG	We produced a report highlighting the progress being made across the county in implementing the standard according to providers	Lay member at Ashford CCG used our report to talk to PPG chairs about the standard and increase their understanding and awareness.
Membership of the Dartford and Gravesham Patient Experience Group	Dartford and Gravesham NHS Trust	One of our volunteers made some suggestion about organisations who could join the Dartford and Gravesham Patient Experience Group	Ellenor Hospice have been invited to join the group.
We heard that Woodchurch Surgery in Ashford has requested to change its boundary.	Woodchurch surgery and Ashford PPG	We reminded the practice that as part of the process we should be informed of their intention. We asked some of our volunteers to give a view on the proposals.	The proposed boundary change has been paused.

Section 2: How we influenced and worked with others

How we influenced the key strategies across Kent:

The CEO attended the Kent & Medway Sustainability & Transformation Partnership Programme Board, representing the Patient & Public Advisory Group, where we discussed progress on how local care is being implemented.

We attended the Programme Board for the South Kent Coast Integrated Accountable Care Organisation that is implementing the Kent & Medway Sustainability & Transformation Partnership Local Care Model in that area. We talked about engagement and communication with the public and agreed to undertake an engagement healthcheck with them

We attended the Kent Surrey & Sussex Local Dental Network where there was a discussion about the needs of bariatric patients and how we could contribute to research on their access to dentistry

We attended the Hospital Workstream of the Kent & Medway Sustainability & Transformation Partnership on behalf of the Patient & Public Advisory Group. The themes from the public in the recent listening events were discussed and agreed a formal response to concerns.

Our Kent County Council 'People's Panel' had a discussion with the lead for carers services about an upcoming consultation to update the carers strategy.

How we worked with and influenced providers and commissioners (stakeholders):

We met the Medway Ethnic Minority Forum to raise awareness of the Sustainability & Transformation Partnership.

We met with Thanet Clinical Commissioning Group (CCG) to discuss how our volunteers can visit seldom heard groups and get feedback for the CCG to use in their service planning. We will be working with their ESTHER programme to talk to the public.

We met with the mental health community Trust and shared the feedback we had received from service users. We share the detail with the patient experience team so they can ensure people have gone through the complaints process if necessary. We talked about undertaking an engagement healthcheck and doing enter & views to community teams. To arrange discussions about the detail of this.

Section 3: How we reach out to the public, listen to them and work with volunteers

This month we had 521 contacts with the public.

We have a programme of engaging with the public and hard to reach groups face to face. In October we visited:

06 October 2017	Coffee Caravan	High Halden, Ashford,
10 October 2017	World Mental Health Day	Sessions House, County Hall, Maidstone
10 October 2017	Fusion HLC Café	Maidstone
13 October 2017	Coffee Caravan	Hoo
19 October 2017	Gurkha / Nepalese Toolkit Development	Ashford International Hotel
23 October 2017	Information Stand	Sittingbourne Memorial Hospital
25 October 2017	RBLI - Older veterans' info event	Brands Hatch
25 October 2017	Medway Community Health Dental Services	Lordswood
27 October 2017	Snodland Pensioner's Advice & Information Fair	Snodland
27 October 2017	Coffee Caravan	Adisham, Canterbury

Section 4: How we use public and stakeholder views

We shared intelligence with the Care Quality Commission, including our draft report on Discharge in West Kent to help inform their inspection of Maidstone and Tunbridge Wells.

Reading

Healthwatch Kent Intelligence Gathering Group

At the Intelligence Gathering Meeting we were joined by volunteers to help decide what actions we should be taking. We talked about

- The possible difference between KMPT and Carers agencies in carrying out carers assessments
- A volunteer had read the West Kent Governing Body Papers and highlighted IVF and G4S as topics we should monitor.
- The number of unregistered carers and if GPs are successfully flagging these individuals.
- Hilton Nurses
- Some GPs not flagging serving & x service personnel
- It was decided to pull together what feedback we have on Equipment Services.
- EKHUFT and how they are meeting the Equality and Diversity Standard 2

Project Update

Kent wide

We publicised our press release after gaining our 'Investors in Volunteers' award.

We have done some research on complaints carried out by other Healthwatch's and given our findings to the Chair of the Kent and Medway Complaints managers meeting and looking to go ahead with a focus group to find out what members of the public deem to be a 'good complaint'

Working with East Kent Mencap staff and volunteers we have carried out two enter & view visits to see if the Standard is being upheld in East Kent, with one further visit due on 14th November

Over the summer we were approached by 4 young people from Queen Elizabeth Grammar School, Faversham who were interested in Volunteering, as they are hoping to pursue careers in medicine. They would like to organise a poll, to find out the health and social care issues of their peers. We also hoping to work with the school to train the young people so that they can do enter and view visits to

health and/or social care providers to find out the experiences of people using those services. We are looking to repeat this with other schools across the county over the coming months

Our Managing Director held a review of the care assessment project, speaking to KCC and the care agencies involved in the initial project. This has been turned into a lesson's learnt report has been shared with all parties involved.

The Physical Disability full forum will meet in February 2018 with an earlier meeting in the planning stages

The volunteer timeline which was drafted as an outcome of the volunteer survey, continues to be monitored at monthly team meetings.

Our 'help cards' continue to fly off the shelf with over 1500 delivered to date. All but one CCG have signed up to our pledge.

We continue to assess what Neurological services provide, these services straddle different services, so care is needed to pinpoint exactly what we will be looking at in terms of project outcomes. A project plan will be drafted later in the autumn as this project will not start until the New Year

West Kent

We have finished drafting the outcomes of the West Kent Delayed Discharge project. We are still awaiting comments from Maidstone and Tunbridge Wells Trust, as they currently have an inspection underway from the CQC, this has been delayed

East Kent

Following the publication of our GP appointments and Thanet GP closures, we sent a copy of the report and a letter to all GP surgeries in the South Kent Coast area to find out what they had progressed since our preliminary work, we are currently drafting an impact report to reflect what change has happened since our report was published

We started to carry out Enter and View visits in East Kent as part of our Discharge from hospital project to the William Harvey Hospital and QEQM

November activity planned

Kent wide

We are still trying to speak to G4S - we have raised the lack of communication with the CCG about the lack of response

The Steering Group has agreed our most recent project plan using the indicators from the Independent Age. We have identified the care homes to visit and over the next few weeks we will be checking with KCC, CCG's and the CQC to see if they have any planned visits to these homes to avoid duplication. We are also asking volunteers for their availability during January to carry out Enter & Views

Our Big Red Bus replacement is currently being planned by our trading arm company 'Engage'. This will not now take place until the Spring of 2018.

We will start to plan how we will do further Accessible Information Standard visits to the North, West and KCC to test progress against the Standard

The Physical Disability Forum will meet on 23rd November with speakers attending to talk about the Direct Payments system in Kent

West Kent

We are asking up to 1000 members of the public a series of questions about how they find the right service for them, is information readily available? what do they do if they are unsure? and how is the best way to communicate with them? We will also be asking the providers and commissioner how they communicate with the public. This is live, but only in the North and West of the county due to the high level of Enter and Views taking place in the East this month.

We plan to publish our West Kent discharge report at the end of the month

East Kent

Our East Kent delayed discharge project started last month with an online survey going live. Further enter and view visits are being planned into community hospital settings. We have a meeting on Monday 13th with KCC to discuss

Following our interim update on access to health and social care focusing on the Eastern European population in Thanet, we met with Thanet CCG in August and agreed to alter the draft report slightly to give it a more balanced view. This will be published in November

We will do our final visit to East Kent Hospitals on the 14th November to test the Accessible Information Standard with our volunteers from East Kent Mencap. Following this a report will be drafted and sent to EKHUFT for comments. We will plan a meeting with them to discuss our findings

North Kent

Our Virgin Healthcare project is now live, with 700 packs delivered to the Isle of Sheppey which will be distributed by healthcare staff to ask patients for feedback on their care at home

Section 5: Providing Information & Signposting

<p>Number of Contacts This month: 521 Another Record month!</p> <p>Accumulative Year 5 To month end: 6330</p> <p>Total accumulative: 10,732</p>	<p>Public Enquiries: Telephone: 49 E-Mail: 9</p> <p>Public Voice contacts to Helpline: Telephone: 81 Email: 24 Texts: 0 Forms: 84 Webform: 2 HWK General Contacts: 173</p>	<p>Provide A Quality Service Accessible to All:</p>	<p>Route to the Helpline (Chart attached)</p>
<p>Public contacts response rates:</p>	<p>Telephone: Same Day: 44 1 day : 4 2 day+: 1 Email: Same Day: 9 1 day : 81 2 day+: 24</p>	<p>Public Voice:</p>	<p>Your Comment Counts Forms (incl. Web): 86 Events/visits Attended: 8 Total number of individual feedback contacts collated: 204 (Incl. Letters/Tel/Email/Texts/Feedback from External visits and YCC Forms)</p>
<p>Signpost and advise the public to assist navigate the health & social care services in Kent.</p>	<p>Enquiry Themes (Multiple topics can arise per contact) A: Local Health/Social Care Services: 23 B: Rights/responsibilities: 2 C: Complaints: 3 D: Complaints Advocacy: 36</p>	<p>First point of contact service activity:</p>	<p>HWK General: 173 (volunteers/engagement/invitations/info-sharing by external organisations):</p> <p>Admin Tel & Email: 88 (internal signposting/info sharing)</p>

<p>Provide a quality service that meets range of needs using a variety of formats.</p> <p>Satisfaction 😊</p>	<p>1: Provision of contact info: 10 2: Research information: 18 3: Referral: 36</p> <p>: Out of 49 clients who were invited to comment 46 responded and were very satisfied with the service they received.</p> <p>:Case Study: Access to Hospital Treatment</p>	<p>First point of contact service activity:</p>	<p>HWK General: 173 (volunteers/engagement/invitations/info-sharing by external organisations):</p> <p>Admin Tel & Email: 88 (internal signposting/info sharing)</p>
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Client Story : Access to Treatment and Surgery

Client is White British, Female, Age 25-34

Client contacted Healthwatch Kent by telephone for assistance as she has been trying to contact the PALS team at her local hospital unable to get through nor successful when local CAB tried to assist her, again unable to get through.

Client is an ongoing patient with the Gynaecology department at Tunbridge Wells Hospital and has been for 5 years. She stated that her consultant is amazing and that the consultant has performed other surgical procedures on her.

In June 2017, the Consultant informed her that the next course of action was to have her left ovary removed. Consultant allowed her time to discuss the options with her husband and come back with a decision. Client decided to go ahead with the operation and let the consultant know.

Client said she was informed that the waiting list was very long around 9 months. She requested to be put on the cancellation list as her condition is affecting her everyday life and she stated she would be able to attend an operation at short notice.

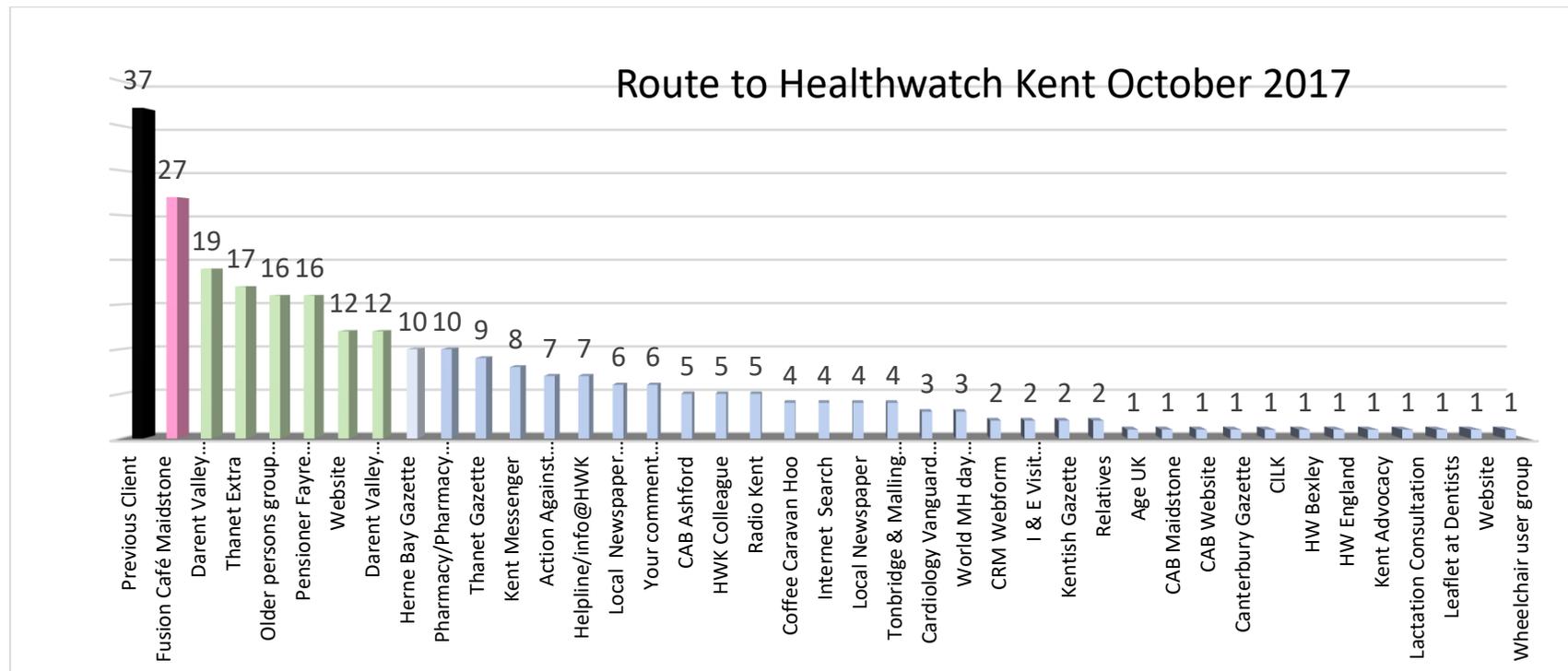
Client stated in August she had an emergency admission due to an ovarian torsion. She stated that the hospital did an internal examination but nothing else and that she did not have a scan or further investigation before being discharged. Before being discharged she was informed that they would not operate due to her health conditions and that she would have to discuss with her consultant.

Client stated she then had a further emergency admission where again they would not operate. She discussed this with her consultant who informed her that they should have operated.

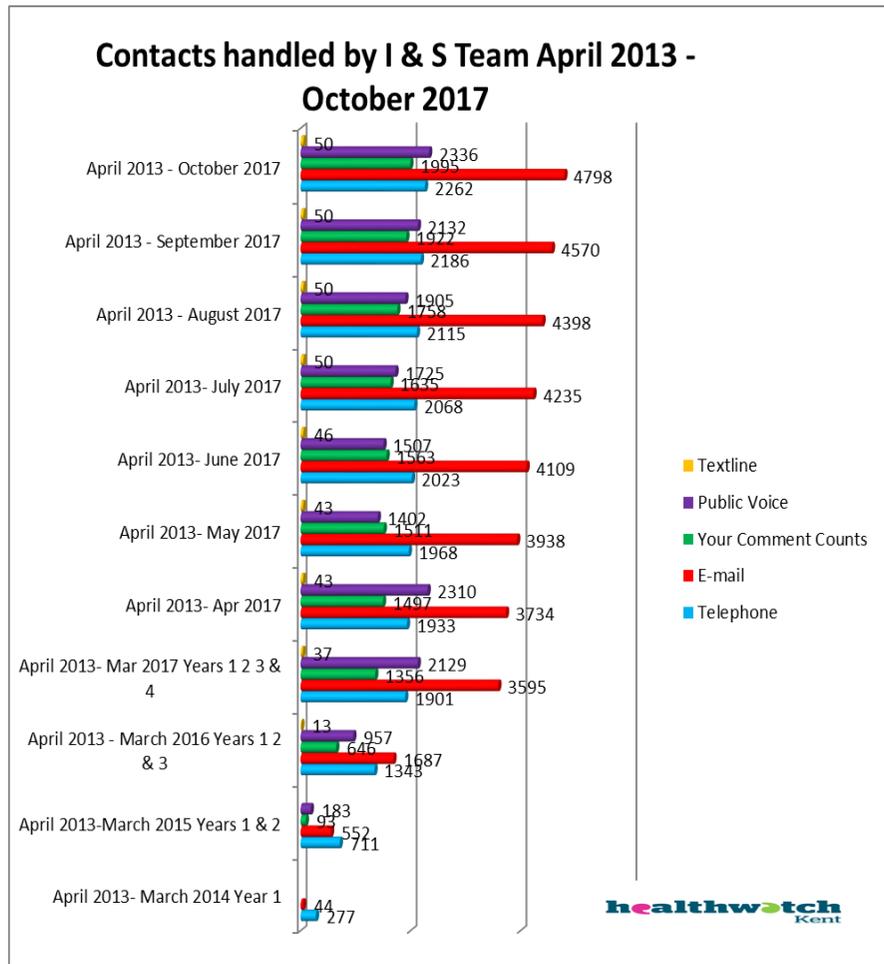
Client stated that this condition was affecting her quality of life and that due to the amount of time off from work because of the symptoms it caused she had a disciplinary and was at risk of losing her job. Client also stated that she was in a great deal of pain as a result of the condition.

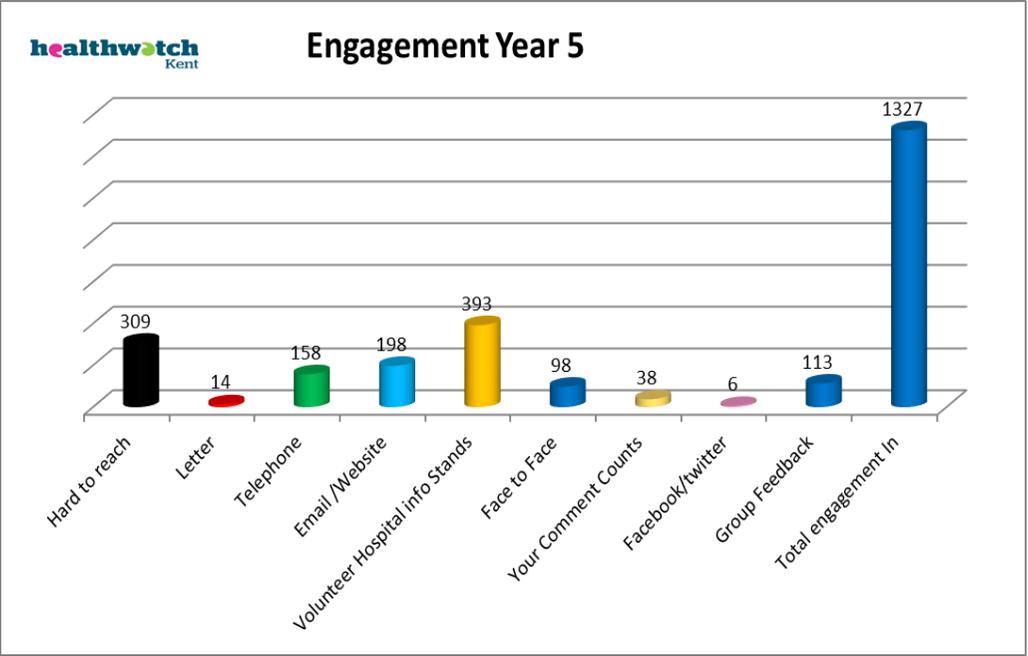
Client stated she was also informed that her consultant is taking phased retirement which is impacting on waiting times.

Client felt she had no other option than to pay privately for this operation with her consultant which she stated cost her more than £4,000. She stated that this was not a choice as she was at the point where she could no longer function day to day life. The waiting times for some types of NHS treatment are becoming a real problem, many people would not have been in a position to raise the money needed to get the treatment so badly needed.



CHARTS TO ACCOMPANY OCTOBER PERFORMANCE REPORT





Section 6: Working with Healthwatch England and other local Healthwatch

Healthwatch England presented at the Kent & Medway Sustainability Partnership 'One Year On' Conference about what good engagement looks like, as well as taking part in an engagement workshop.

We have shared our GP Closure Good Practice checklist with other South East Local Healthwatch so we have a shared approach to our involvement in GP closures.