

Monthly Update on our work from Healthwatch Kent

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

Section 1: How we made a difference

Issue	Organisation	District	Action	Outcome
Care for pressure sores	Virgin Care	North Kent	Raised with organisation	Virgin have flagged the numbers of pressure sore patients that they are receiving from hospitals. In their view the numbers are clinically too high. They have asked Clinical Commissioning Group to do some investigations
Long assessments, having to buy incontinence goods when patient is entitled to them for free.	Virgin Care	North Kent	Raised with organisation	Inherited a large waiting list which they have now got down to zero Changed process to ensure patients not having to buy their own materials while they await an assessment Changing the quality of provider too - will now be SCA
Concerns raised about a nursing home in Hythe			Raised with Kent County Council safeguarding and Care Quality Commission	Care Quality Commission made unannounced visit, their report found that they required improvement on many of the issues that the client had raised with Healthwatch including food and hydration and medicine management. Improvement plan in place.

We have had contact with 256 people this month via telephone, email, texts, Your Comment Counts Forms and face to face visits.

Client feedback: 34 clients who used our Information & Signposting service were invited to comment, 24 responded and were very satisfied with the service they received.

Following 2 Enter & View visits to A&E - QEQM we made the following recommendations:

<p>Continue to work with the staff on the culture change programme, ensuring monthly meetings with staff are fully supported and the staff involvement in the day to day service being provided in A&E continues to increase.</p>	<p>From December 2016 Care Quality Commission (CQC) report</p> <p>The culture of the organisation had changed considerably since our first CQC inspection in 2014. At our last inspection we reported improvement and a reinvigorated cultural change programme.</p> <p>The trust had further developed a programme of cultural change under the banner of 'a great place to work'. This included executive development, a 'respecting each other campaign' and the introduction of values based appraisals. • More importantly interviews with staff and those attending focus groups corroborated the impact of these initiatives and reported significant improvements in incidents of bullying and harassment and the overall culture of the organisation.</p> <p>However, the trust must maintain vigilance as we did receive reports from some individuals who still felt bullied.</p> <p>Our interviews and focus groups indicated that staff were largely positive and of good morale. There was a recognition that all staff had a role to play in delivering improvement and change.</p>
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Section 2: How we use public views and influenced stakeholders

How we influenced the key strategies across Kent:

Strategy	Update
Kent & Medway Sustainability & Transformation Plan (STP)	We have been in discussions regarding setting up a Kent & Medway Patient & Public Advisory Group and asked to be interim chair. We have reviewed the terms of reference and invites for attendees.
STP East Kent	We attend the East Kent Patient & Public Engagement Group where we had an update on local care in Thanet and the progress of work across Kent & Medway. We raised concerns about how people with complex needs that are not just health or care, but perhaps housing, substance misuse or financial would be met. This would be part of the care navigation services.
STP West Kent	We met with West Kent Clinical Commissioning Group to discuss their plan - they do not have a plan nor a mechanism for developing one. They agreed they needed to do this as soon as possible.
Kent Health & Wellbeing Board Workplan	We met with Public Health to discuss our ongoing input into the Joint Strategic Needs Assessment. We also met with other stakeholders to begin drafting the new Health & Wellbeing Strategy

County Wide

Kent Physical Disability Forum - At the last meeting of the new Forum, it was agreed to draft a job role for the Chair and Vice Chair of the forum. These have been drafted and sent to the wider forum for nominees to both roles. We have also drafted a support officer job description, which will support the forum going forward in the new financial year. The next full forum meeting will take place on 28th February from 11.00 to 15.00 at the Julie Rose Stadium, Ashford. On the agenda are the results of the election to appoint a Chair and Vice Chair, priorities going forward and the Wheelchair service update.

Patient Participation Groups (PPGs) - Healthwatch Kent are looking at how volunteers could assist some PPGs who are struggling to achieve their aims. We have produced a framework for our volunteers to use to assess how PPGs are progressing. We have asked all the Clinical Commissioning Groups to identify practices that may benefit from a visit from Healthwatch volunteers, to date we have not had any put forward.

Our Carers Assessment report will be published shortly

Accessible Information Standard - From 31 July 2016, all organisations that provide NHS care or adult social care were legally required to follow the Accessible Information Standard. The standard aims to make sure that people who have a disability, impairment or sensory loss are provided with information that they can easily read or understand with support, so they can communicate effectively with health and social care services. Healthwatch Kent are currently chasing those Trusts that have yet to respond to our request for information. A briefing will follow once all the information has been received.

Autistic Spectrum Disorder - Our project which looked at Children and Adolescent Mental Health in Kent noted some references to the difficulty facing parents when trying to get a diagnosis for children who were thought to be on the Autistic Spectrum Disorder. We are currently carrying out some background research into the issues. We have recently found out that Kent County Council have been doing an audit on all such services (for children and adults) since July / August 2016. They have used focus groups and surveys to gather feedback on the current services, this is culminating in a pathway document which is due to be put out for consultation at the end of February. Rather than duplicate this area of work, we will wait for the publication to see if there are any gaps that Healthwatch Kent could assist with.

Following the increase in applications for a Deprivation of Liberty assessments, Healthwatch Kent are currently drafting a statement which identifies some of the issues that have caused this increase in applications

We are currently mapping all the Forum activity that takes place around Kent, with a view to ensuring Healthwatch Kent has visited all the relevant forums to raise our profile.

East Kent

Healthwatch Kent heard that In the South Kent Coast CCG area, the CCG had decided that they no longer wanted pharmacists to be able to order repeat prescriptions on behalf of their patients. They have worked with GP surgeries on this and about two thirds have elected to withdraw the ability of pharmacists to order repeat prescriptions from their surgery. Most patients must now order their repeat prescriptions from their GP directly instead. We undertook some enter and view visits to 6 pharmacies to gather the publics views about this change.

We met with East Kent Hospitals re patient experience and discussed concerns re management of complaints; we said it was key to keep complainants informed when timescales change, very low compliment and complaints at Buckland and Royal Vic might need to be looked at and that actions in response to complaint themes were communicated with the public.

North Kent

We have completed our report on discharge from Darent Valley Hospital and we are awaiting a response from the hospital. We had our first formal meeting with Virgin Healthcare to establish a working relationship. Conversations focused around their plans to involve patients in the development of their services.

We met with the Primary Care Quality lead to further our offer of support to PPGs. We have reminded all CCGs of our recommendations surrounding their support to PPGs and our offer to provide face to face tailored support to individual groups. So far, no CCG has taken up that offer.

West Kent

We have informed the health and care system in West Kent that we will be turning our attention to discharge in West Kent. We have already this month arranged to meet KCC Care Home commissioners, Practice Managers, West Kent CCG and MTW to talk to them about the issues and challenges they face. We are now organising 10 Enter & View visits to talk to patients which will take place during March.

Published Outpatients report for Maidstone & Tunbridge Wells NHS Trust following visits to both hospital Outpatient departments. Our recommendations have been warmly received.

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

We have had contact with 256 people this month via telephone, email, texts, Your Comment Forms and face to face visits.

Facebook 971 likes

Twitter 1,193 followers

Newsletter 875 subscribers

We work with lots of organisations and groups who are our 'Community Champions' that let us know about concerns in health and social care. You can see some examples of what they raise and how we respond in the next section. We currently have 301 Community Champions across Kent.

We also have a programme of engagement visits which ensures we connect with a diverse range of communities face to face. In addition, planned visits involving volunteers happen in different districts in Kent every month. We use a range of public venues including libraries, hospital foyers and have a stall at public events organised by other organisations.

Gypsy and Traveller Community Visit	Aylesham, Dover	09/01/2017
Darent Valley Hospital - Information Stand	andartford	18/01/2017
Buckland Hospital - Information Stand	Dover	24/01/2017
Gypsy and Traveller Community Visit	Canterbury	26/01/2017

Volunteers

We have 75 Volunteers across the county who have been helping to improve health and social care services by ensuring that the public is involved in shaping decisions.

Six volunteers met with providers or commissioners including the Chief Nurse at Darent Valley Hospital, the Self Care management group of West Kent CCG and Adult Strategic Partnership groups. Two volunteers talked to a Patient Participation Group about how Healthwatch Kent can help engaging with patients.

34 Volunteers took part in Area Team meetings to discuss ways they could improve local services.

We have continued with our monthly information stands at Darent Valley and Queen Elizabeth the Queen Mother hospitals and have started one at Buckland Hospital Dover. These have significantly increased what we are hearing from the public about hospital services, GPs as well as other services.

5 volunteers have been running these sessions this month.

7 Volunteers took part in internal meetings

3 volunteers helped with background research and reading including reviewing the Equality and Diversity templates for West Kent Commissioning group and background information for our project on Autistic Spectrum Disorder (ASD) service for children.

We interviewed 3 potential new volunteers 2 of whom decided that they would like to volunteer with Healthwatch Kent and one volunteer left because of family and work commitments

2 volunteers and a member of staff attended Induction and Equality, Diversity and Inclusion(EDI) training. Two other volunteers came along to update their EDI.

7 volunteers provided key support for project planning the ASD project as well as collating evidence for our application for the Investing in Volunteers quality standard.

Section 4: Providing Information & Signposting

<p>Number of Contacts This month: 256</p> <p>Accumulative Year 4 To month end: 2790</p> <p>Total accumulative: 7162</p>	<p>Public Enquiries: Telephone: 19 E-Mail: 15</p> <p>Public Voice contacts to Helpline: Telephone:1 Email: 11 Texts: 3 Forms: 25</p> <p>HWK General Contacts: 133</p>
<p>Public contacts response rates:</p>	<p>Telephone: Same Day: 19 1 day : 0 2 days : 0 3 days+:0</p> <p>Email: Same Day: 11 1 day : 3 2 days : 1 3 days+:0</p>

Signpost and advise the public to assist navigate the health & social care services in Kent.	Enquiry Themes (Multiple topics can arise per contact) A: Local Health/Social Care Services: 2 B: Rights/responsibilities: 3 C: Complaints: 1 D: Complaints Advocacy: 19
Provide a quality service that meets range of needs using a variety of formats.	1: Provision of contact info: 1 2: Research information: 4 3: Referral: 20 Case Study: Aftercare Post Surgery Client feedback: Out of 34 clients who were invited to comment 24 responded and were very satisfied with the service they received.
Provide A Quality Service Accessible to All:	Route to the Helpline (Chart attached)
Public Voice:	Your Comment Counts Forms: 25 Events Attended: 3 Total number of individual feedback contacts collated: 48 (Incl. Letters/Tel/Email/Texts/Feedback from External visits and YCC Forms)
First point of contact service activity:	HWK General (volunteers/engagement/invitations/info-sharing by external organisations): Tel & Email: 133 Admin (internal signposting/info sharing) Tel & Email: 54

Case Study: Aftercare following surgery

Client is a pensioner mid 70's who lives alone, he suffers from Dupuytren's contracture (fingers contract into palm) He had surgery 5-6 years ago to straighten finger, but condition has returned. He has been referred twice earlier in year for surgery, he saw physio at QEQM who referred him for surgery there when he had been told that he would have to go to K & C.

Clients first operation was scheduled for June 2016, while he was on the ward waiting for surgery he asked if he would be able to use his thumb & finger after surgery as this was the case last time. He was told no not this time he would not be able to for 2 week's following surgery. As no bed was available for his planned overnight stay the operation was cancelled.

Second operation was due July 2016. When he attended the pre-op assessment no surgeon was present only a nurse who could not answer his questions. One hour before operation he was told that he would stay overnight as bed was available. While he was being wheeled to theatre he asked surgeon about use of hand after wards and again was told 2 weeks of no use. He refused to have the operation as he had no care plan in place and would be 'bed blocking' if had to stay in hospital for the 2 weeks. Pressure was put on him

to go ahead, even told that if he did not have operation that he his finger would need amputation.

Client made a complaint to PALS, considers insufficient information given to patients and lack of aftercare available. He has been dealing with a senior officer who in his words "Has not done a thing". His situation has deteriorated and needs treatment as soon as possible.

January: Update received from client

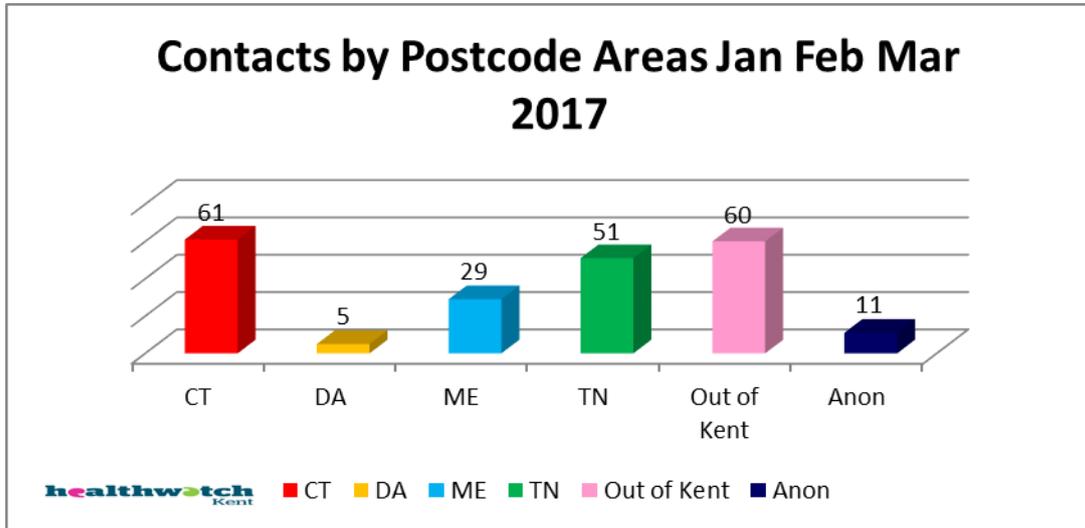
Client received letter from Chief Nurse & Director of Quality re his complaint:

" XXX has advised that it is standard practice that the patients themselves arrange any aftercare that is required following their hand surgery. She also confirmed that within your notes there was nothing to indicate that your hand would be completely out of action so unfortunately this did not highlight any possible concerns to them at the time of your pre-assessment. Additionally, the information leaflet for aftercare following surgery explains that the patients hand will be heavily bandaged and must be kept dry for 48 hours; however, she feels that it should updated to ensure patients who live on their own are fully aware that support may be required following surgery. This would give them the opportunity to arrange the appropriate support and also contact their GP to see what help is available, so that they can make a fully formed decision. I can confirm that this has been fed back to Mr. XXX for reflection and learning, and to prevent this from happening in the future. The leaflet information will be re-assessed and updated".

Above is an extract from EKHUFT's letter to client.

Action for Healthwatch Kent: Client agreed for experience to be shared at internal Intelligence Gathering Group, also share with EKHUFT.

Areas of Activity and/or Engaging with Healthwatch Kent in January



Section 5: Working with Healthwatch England and other local Healthwatch

The six South East Healthwatches met in Jan. Discussions centred around the STP across the South East, our collective support to the South East Ambulance Service and how we as a group will approach Quality Accounts this year.