

Healthwatch Committee meeting
14 December 2017
Project updates - paper 1
Presented by: Steph Edusei

Members of the Committee are asked to:

- Note the contents of the report

Quality statement: 1, 6, 7, 12, 13, 14, 15, 22

1. Project Highlight Report

Project Board: Healthwatch

Project Name:	Intermediate Care	Reporting Period:	Oct 2017
Project Sponsor:		Project Manager	Lyndsay Yarde
Author:	Lyndsay Yarde	Date Report Approved:	

Project Overview	<p>Healthwatch Newcastle chose Intermediate Care as one of our priority areas for 2017/18 for the following reasons:</p> <ol style="list-style-type: none"> 1. Intermediate Care is an rapidly emerging area of service provision set to become an increasingly significant component of the overall offer, it is therefore crucial that service users voices are heard. 2. We believe our research in this area will complement and add to information already gathered by NUTH, the CQC and Newcastle City Council and the Intermediate Care Steering group. 3. It will provide an opportunity to contribute to the current service review of Intermediate Care 4. Our key remit is to ensure that service users and the public are involved in the ongoing development of health and care services <p>Following consultation with these partner organisations and with the Intermediate Care Steering Group, we have decided to focus on:</p> <ol style="list-style-type: none"> 1. How service users experience the various elements of the Intermediate Care offer, in particular: <ul style="list-style-type: none"> • Residential provision • Re-ablement services • Community services 2. Whether they feel that the services provided have had a positive impact on their wellbeing and have enabled them to get to where they want to be. 3. Their ideas about how services might be improved <p>We will gather this information through a combination of structured interviews and surveys.</p> <p>We plan to carry out 20 home visits to people who have recently received reablement services and also visit residential homes providing intermediate care services</p>
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1. Progress against key project milestones				
Milestone	Completion Date	Progress or Slippage	Variance	Explanation
Project Plan Complete	Jun 17	Complete		
Consult with residential units NCC & NUTH IC service leads	Jun17	Complete		
Recruit & Train Volunteers	Jun 17	Complete		Current Position: Volunteers recruited (3)
Design Surveys	Jun 17	Complete		

Source Participants	Jun 17	Complete		
Arrange visits	Jul 17	Complete		
Carry out visits	Jul & Aug 17	Complete		
Analyse Results	Sept 17	Complete		Analysis for interim report undertaken. More detailed analyses for final report to take place in October
Write & present interim report	Sept 17	Complete		Interim report presented to IC Steering Group on 27 th Sept and well received.
Write final report	Sept 17	Complete		Due to delays in sourcing participants visits continued into September meaning we were only able to produce an interim report for the IC Steering Group meeting on 27 th Sept. Final report to be written in October

2. Key expectations in next reporting period

Describe against plan the high level milestones to be completed next month

Final editing of report
Report consultation, publicity and distribution

3. Risk Report

Risk Rating

4. Changes in reporting period

(A change request pro-forma should be attached as an appendix for all changes)

See change request template

Project highlight report

Project board: Healthwatch Newcastle

Project name	Screening and vaccinations	Reporting period	Nov 2017
Project sponsor		Project Manager	Rachel Wilkins
Author	Rachel Wilkins	Date report approved	
Project overview	<p>Public Health shared information with Newcastle Health Scrutiny about the variability, and in some cases very low uptake, of cancer screening (breast, cervical and bowel). Discussions with the CCG and others following this showed that it was of concern across Newcastle and Gateshead. Research in this area is needed to find out why people in low uptake areas think uptake is low, what they think the barriers are to attending and how these barriers could be overcome.</p> <p>We plan to engage with those communities in Newcastle where uptake of screening is low. Through engagement, we aim to identify what the barriers are to attending appointments and ways to overcome them.</p> <p>This research will take place in Newcastle first and then possibly be repeated in Gateshead.</p>		

RAG ratings

	Project actions on track
	Project actions slippage – monitor situation
	Project actions slippage - action required
	Project actions complete

4. Progress against key project milestones

Milestone	Planned completion date	Progress or slippage	Variance	Explanation
Project plan approved	Jun 2017	Completed		Current position: Done
Partnerships made with selected GP Practices	June 2017	Completed		Current position: Done
Focus groups designed	July 2017	Completed		Current position: Done
Funding sought for running one to one interviews with non - attenders	July 2017	Completed		Current position: Done
One to one invite letter shared with GP practices involved in the work	July 2017	In progress		Current position: Letter complete and will be provided to practices on 28 Nov, to be sent on 29 Nov.
Focus groups and one to one interviews held	August to October 2017	In progress		Current position: 8 focus groups have been completed and there are 5 (potentially 6) left to run. No one to one interviews booked in at present. People have until 13 Dec to book in a one to one interview and we will be interviewing up until 12 January
Data analysis	November 2017 to January 2018	Not started		Current position: Will start Focus group and survey analysis after 8 Dec (new survey deadline). Will analyse one to one interviews after 12 Jan
Report writing	January 2018 to February 2018			
Report written for comment by stakeholders	5 March 2018			
Report published	31 March 2018			

5. Key expectations in next reporting period

- One to ones booked in and some completed
- Focus groups finished and data analysis started/finished
- Survey data analysis started/finished
- Some report writing started

6. Risk report

Risk rating

4. Changes in reporting period

(A change request pro-forma should be attached as an appendix for all changes)

Project Highlight Report

Project Board: Healthwatch

Project Name:	Continuing Healthcare	Reporting Period:	November 2017
Project Sponsor:		Project Manager	Kim Newton
Author:	Kim Newton	Date Report Approved:	November 2017

Project Overview

Healthwatch Gateshead chose Continuing Healthcare (CHC) across Newcastle and Gateshead as one of our priority areas for 2017/18 for the following reasons:

We are aware across both areas that there are issues around:

- Delays in funding
- Decisions not to fund care
- Delays to hospital discharge due to the decision-making process
- Relatives feeling excluded for the process

Project objectives

To identify service user, relative and carer experiences of the local CHC assessment and decision process

One Collective Voice Event

This gave more depth to the initial issues and it was agreed to focus on 3 areas of work:

Information

National Audit report recommendations

Patient experience - process

To influence Newcastle Gateshead CCG around best practice in communication and information on CHC.

Enabled City CHC Video, to adopt and embed the information onto NGCCG website

Initially this work started, through the NGCCG engagement lead. This work is now being incorporated into the CHC Strategy group and working with the Patient Experience lead.

We held a CHC Information session with HW Champions on 09/11/17 on the value of the information and this will be shared with NGCCG Communications lead.

National Audit report

We are aware of the recent "Investigation into NHS CHC funding" (July 17) by National audit office which makes recommendations for improvement.

To influence the local implementation of the recommendations from the National Audit report

This will be addressed in the CHC Strategy Group

	<p>Patient Experience To determine if the national NHS Decision Support Toolkit is applied consistently and to make recommendations where required. Ongoing (We need to know if nursing assessors are compliant with the (“Coughlan case”) Already highlighted - continuity of nursing assessors and quality of information.</p>
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RAG Ratings	
	Project actions on track
	Project actions slippage – monitor situation
	Project actions slippage - action required
	Project actions complete

7. Progress against key project milestones				
Milestone	Planned Completion Date	Progress or Slippage	Variance	Explanation
Stakeholder Engagement	End August	Ongoing dialogue		Made significant progress with Local Authority leads in both Gateshead and Newcastle
NGCCG engagement		Started November 2017		<p>Task group involvement around comms for CHC . await info from Alison Thompson</p> <p>The first meeting with NGCCG Patient Experience lead on the 14th November 2017, where we will develop an action plan to discuss the all areas of work and how HWG can add evidence to patient experience.</p>

One collective voice event	August 17	Achieved		Good response rate
Design Surveys	August/September	Achieved		<p>A survey has been produced, with both Newcastle and Gateshead LA and NGCCG given opportunities to input. We received comments from Gateshead LA and NGCCG which were included in the survey. This went live in October this was circulated to all our contacts and promoted on HWG website, social media. As of 09/11/17 we have received 28 responses.</p> <p>We were heavily reliant on adult social care in Newcastle and Gateshead, as well as NGCCG to help us reach patients and their Carers as this. This has not happened as the GCCG have said that they do not have the resources to make this happen, they also cited data protection issues.</p>
Source Participants		Achieved		Observe family through CHC decision making process.
CHC Strategy Group	November 17	On target		<p>HWG is part of the CHC Strategy group attended by partners from NGCCG. NUTH GNHS Newcastle and Gateshead LA leads. We will be looking at an action plan to address CHC across the board.</p>

8. Key expectations in next reporting period

Plan to be developed with patient experience lead to feed into the strategy group.

Find out about the audit report from Joe Corrigan NGCCG (raised at the PP and Carer Engagement Forum).

Have details of the volume of people assessed from 1 April to 30 September 2017.

Survey complete.

9. Risk Report

**Risk
Rating**

Survey numbers low

Red

Time to engage across both areas

Amber

4. Changes in reporting period

(A change request pro-forma should be attached as an appendix for all changes)