

# HEALTHWATCH CAMBRIDGESHIRE AND PETERBOROUGH

## Work programme 2018/19

### Summary of activity

<b>QUALITY STATEMENT 1</b>		
<b>Strategic context and relationships</b>		
Having a strong understanding of the strengths and weaknesses of the local health and social care system is critical to the success of local Healthwatch.		
<b>Activity</b>	<b>Lead</b>	<b>Achievements</b>
1.1 The work of Healthwatch Cambridgeshire and Peterborough is informed by reported experiences and concerns of local people and set out clearly in the organisation's Strategic Priorities and the Work Programme	SS	The Healthwatch Cambridgeshire and Peterborough Strategy was approved by the Board of Directors at their meeting in May 2018. The strategic priorities are set out in the strategy. These were developed using the intelligence provided to us by local people over the previous year. Progress against these priorities is set out in the main body of the CEO report for 2018/19.
1.2 Work strategically to raise the profile of engagement and voice in the planning and governance processes with commissioners and providers	SS	Healthwatch Cambridgeshire and Peterborough are represented at a wide range of key strategic and transformation health and care meetings. Attendance is coordinated and lists circulated. Feedback from meetings is recorded, shared and actioned as required.
1.3 Use soft intelligence to inform commissioners, regulators and providers of local experiences through formal and partnership structures and direct reporting.	SS	Intelligence is compiled on a bi-monthly basis and shared with providers, commissioners and regulators. Directors and staff receive this summarised intelligence to inform discussions at strategic meetings.

<b>QUALITY STATEMENT 2</b>		
<p><b>Community voice and influence</b> Local Healthwatch enables local people to have their views, ideas and concerns represented as part of the commissioning, delivery, design and scrutiny of health and social care services.</p>		
<p>2.1 Undertake a range of communications activities that raises awareness of the work of Healthwatch Cambridgeshire and Peterborough in wide range of formats</p>	AR	<p>Communications activity and reach is reported to the Board annually. The bi-monthly CEO Report contains more frequent updates. Communications data for the last quarter of this year shows greatly increased levels of responses.</p>
<p>2.2 Develop and deliver a range of community engagement activities, some of which will be led by Healthwatch Cambridgeshire and Peterborough and some working with partners</p>	CTJ	<p>Engagement activity is reported to the Board annually. The bi-monthly CEO Report contains more detail and breakdown of numbers of people we have spoken to. During 2018/19 two Community Forums were established: one in Fenland and one in Huntingdonshire.</p>
<p>2.3 Engage a wide range of people from different backgrounds and communities, particularly inclusive of those people whose voices are less heard, to work with Healthwatch Cambridgeshire and Peterborough working with existing networks and groups</p>	CTJ	<p>Proactive engagement work is focussed in Fenland and Peterborough, the areas where there are more seldom hard and excluded groups of people. Links have been established with a good number of groups and organisations working with these communities across the whole of Cambridgeshire and Peterborough.</p>
<p>2.4 Promote opportunities for participation and giving feedback</p>	AR	<p>All partners are encouraged to advertise their opportunities for participation and feedback on the Healthwatch Cambridgeshire and Peterborough websites. These opportunities are also featured in newsletters and handed out in hard copy at engagement events. XXX opportunities were promoted in 2018/19.</p>
<p>2.6 Work in partnership with the voluntary, statutory and independent sector to facilitate</p>	CTJ	<p>The Engagement Team have well established links with a wide range of voluntary and community sector groups and organisations, including Carers' Trust, Age UK,</p>

<p>opportunities to participate and promote engagement</p> <p>2.7 Maintain an active and informed volunteer base</p> <p>2.8 Actively encourage the public to attend Healthwatch Cambridgeshire and Peterborough Board meetings have a regular item for Public Questions</p> <p>2.9 Involve local stakeholders in strategic planning and priority setting.</p>	<p>CTJ</p> <p>AR</p> <p>SS</p>	<p>Care Network and MIND. Healthwatch Cambridgeshire and Peterborough are members of all local CVS.</p> <p>Volunteer numbers and activity is reported to the Board in the CEO Report. At the end of 2018/19 there were 41 volunteers. 12 new volunteers recruited during the past year. Almost 800 volunteer hours were contributed to Healthwatch activities.</p> <p>Board meetings are publicised in newsletters, on our websites and on social media. The agenda has a standing item for Public Questions.</p> <p>Plans are in place to involve all local stakeholders in the strategic planning process. The new strategy will be informed by a stakeholder perception survey and priorities tested with local people at community meetings.</p>
<p><b>QUALITY STATEMENT 3</b></p> <p><b>Making a difference locally</b>                  A local Healthwatch needs to formulate views on the standard of health and social care provision and identify where services could be improved by collecting the views and experiences of the members of the public who use them.</p>		

3.1 Develop and implement one experience collecting, recording and reporting system	JMN	Completed. The Healthwatch England Customer Relationship Management system is now used to record all feedback. Briefings and feedback is sent to key partners on a regular basis.
3.2 Deliver a programme of Enter and View visits and maintain a group of trained and DBS checked Authorised Representatives	CTJ	The NHS dental services project used Enter and View as a methodology to gather feedback from local people. There is a pool of appropriate Authorised Representatives in place.
3.3 Develop and deliver project work as indicated by intelligence gathered from local people, with resulting recommendations for change fed through to commissioning and decision-making bodies.	SS	During 2018/19 an internal escalation process has been put in place. This sets out levels of concern, action that can be taken, how it is recorded and the appropriate authority to escalate to the next level. Projects are developed and delivered in line with this process and therefore evidence-led. All escalations are reported to Board in the CEO report. See the CEO Annual Report 2018/19 for detail of these.
<p><b>QUALITY STATEMENT 4</b>  <b>Informing people</b>  A core part of the role of local Healthwatch is to provide advice about local health and social care services to the public.</p>		
4.1 Deliver a health and social care Information & Signposting Service that collects experiences as well as directing people to suitable services	JMN	Details of the Information and Signposting Service activity is reported to the Board annually. The bi-monthly CEO Report contains more frequent updates.
4.2 Collect data to inform trends of usage and referrals	JMN	These reports analyse trends and referrals.
4.3 Maintain relationships with other Information & Signposting Service providers to minimise duplication and ensure easier navigation of the system for local people	JMN	There is a range of other health and care information providers, active relationships are maintained with the key services, particularly the PALS service for each provider. There is an increasing range of online information systems, these are being tracked and arguments made to have these working more coherently together.

<p>4.4 Gather intelligence on the implementation of the NHS Accessible Information Standard and feedback to commissioners, regulators and providers.</p>	JMN	<p>Since the publication of the Accessible Information Standard report in November 2017, Healthwatch Cambridgeshire and Peterborough has monitored progress of the larger providers. NWAFT have made particularly good progress and are now being promoted as an example of good practice. In response to our request the CCG is now including discussions about AIS compliance in its contract meetings with GPs. The CEO has presented the findings of the project to NHS England's East of England Patient Experience Forum.</p>
--	-----	---

<p><b>QUALITY STATEMENT 5</b>  <b>Relationship with Healthwatch England</b>                  Local Healthwatch works with Healthwatch England to enable people’s concerns to influence national commissioning, delivery, and the redesign of health and social care services.</p>		
<p>5.1 Sharing project-based and routinely gathered intelligence with Healthwatch England</p>	<p>JMN</p>	<p>All published reports are shared with Healthwatch England. Healthwatch England also receive all routinely gathered intelligence via their CRM.</p>
<p>5.2 Escalation of concerns that cannot be resolved locally</p>	<p>SS</p>	<p>There is no longer a formal escalation process to Healthwatch England. However key points of contact at Healthwatch England are kept fully briefed of our local concerns and projects.</p>
<p>5.3 Supporting and contributing to regional and national Healthwatch projects and strategic development.</p>	<p>SS</p>	<p>Healthwatch Cambridgeshire and Peterborough actively support national Healthwatch work, responding promptly to requests for information and contributing to projects where appropriate. As the largest Healthwatch in the East of England, Healthwatch Cambridgeshire and Peterborough takes a lead role in regional activities, including co-organising the regional East of England conference.</p>