

## **CEO Report March 2017 (January and February 2017)**

### **Purpose**

1. This report sets out Healthwatch Cambridgeshire's Key Performance Indicators for January and February 2017 and gives highlights and progress over those months.

### **Key issues**

2. Sections 5 - 21 describes highlights and progress.
3. Sections 12 - 22 reports on the Key Performance Indicators.

### **Action required by the Board**

4. The Board is asked to:
  - Note the report.

### **Author**

Sandie Smith, CEO

15<sup>th</sup> March 2017

## Highlights and Progress

### *Enter and View*

5. Two Enter and View visits to Addenbrookes Emergency Department (A&E) were carried out in December. The report was published on 28<sup>th</sup> February 2017. The Trust has been very supportive of this work and have supplied a response which sets out how it has taken action as a result of our findings. The full report is on the Healthwatch Cambridgeshire website<sup>1</sup>.
6. The visits showed that people were very happy with the care they received and were seen within the four-hour target and many within two hours. Recommendations and consequent action includes:
  - Reminding staff about the importance of ensuring people's privacy and dignity, after we told them about patients not being adequately covered up whilst they were waiting on trolleys in the X-ray department.
  - Ordering safety covers for plug sockets in the emergency department after we spotted some open sockets in the children's waiting area.
  - Initiating extra cleaning checks at busy times of day after we spotted some areas where cleaning needed to be improved.
  - Asking staff to update waiting screen times every hour, so people know how long their wait is likely to be. They are also investigating adding another screen in the main waiting room.

### *Regional Conference*

7. We have been the Lead Healthwatch organising the first ever Regional Healthwatch Conference. The idea came from the Healthwatch Cambridgeshire staff team and organised and paid for by the five Eastern County Healthwatch. The conference was held on 6<sup>th</sup> March. Verbal feedback will be given at the board meeting.

### *Maternity Voices*

8. Healthwatch Cambridgeshire have been listening to local women regarding the way in which The Rosie engages with them about maternity services. Staff have been able to facilitate conversations and are supporting the new Maternity Voices Group as it is set up by The Rosie. We have also liaised with Sustainable Transformation Programme (STP) colleagues and have facilitated patient and public representation on the Maternity Development Project Group.

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<sup>1</sup> <http://www.healthwatchcambridgeshire.co.uk/news/good-care-addenbrookes-emergency-department-despite-pressures>

*Accessible Information Project*

9. The project to gather feedback from people about how well services are meeting the standards set out in the NHS Accessible Information Standard, is now underway. Staff have linked in with local groups to develop a survey and are now going to speak to people to find out if they are being offered information in a way that is accessible for them. Work is also being undertaken by Healthwatch Peterborough on this standard, although this has a different approach, staff are linking up where helpful.

*CCG Out of Hours base consultation*

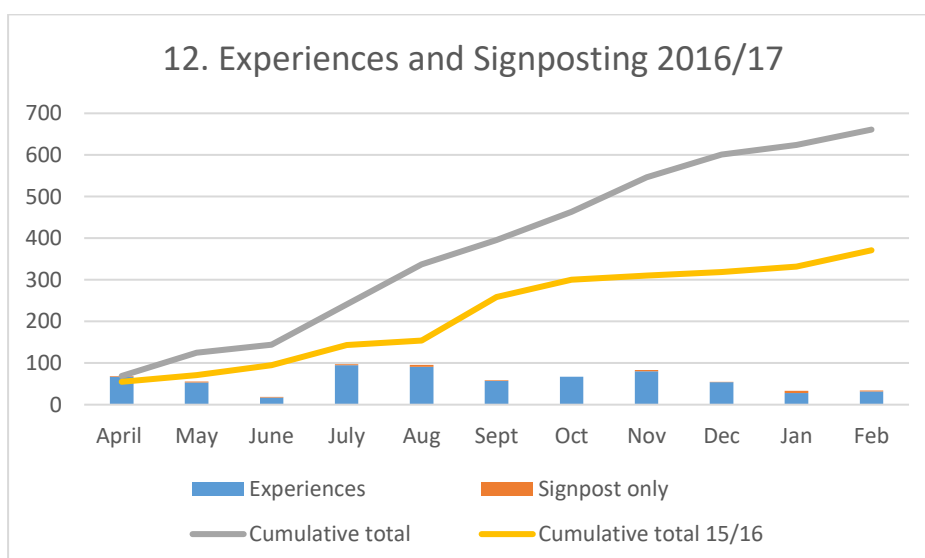
10. Healthwatch Cambridgeshire staff and Non-Executive Directors (NEDs) have been attending the Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) consultation on moving the Out of Hours base from Chesterton to Addenbrookes. We are submitting a response based on the views of local people and what we know about the Urgent Care System.

*Volunteer Recruitment*

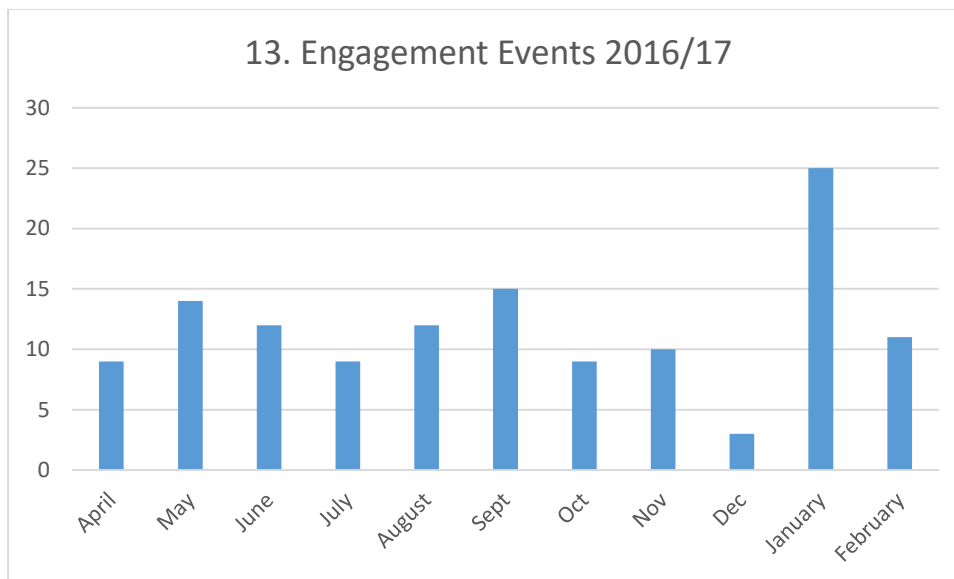
11. A volunteer recruitment campaign has now started and has already resulted in four potential new volunteers. The campaign was an excellent opportunity to raise the profile of volunteering and capture some of our volunteers' stories<sup>2</sup>.

**Key Performance Indicators**

*Collecting Experiences*



<sup>2</sup> <http://www.healthwatchcambridgeshire.co.uk/volunteering>

*Engagement Activity*

14. Staff and volunteers delivered a range of engagement activities during January and February. They spoke to over 1,300 people from many different communities at a range of events including:

- Arbury 'Eat and Meet' Group
- 'Hidden Voices' event organised by Cambridgeshire Alliance for Independent Living
- Talk to Black and Minority Ethnic (BME) women's lunch group
- Talk to Headway Team
- Pinpoint Annual Conference

15. During these two months over 110 hours were contributed by volunteers on engagement activities. This does not include hours contributed by Non-Executive Directors.

*Influencing Opportunities and Activity*

16. Healthwatch Cambridgeshire has responded to the following consultations and requests for input:

- STP Dementia Business case
- STP Falls Business Case
- GP 5 Year Forward View
- CQC - Our next phase of regulation
- National Audit Office Focus Group on the role of the CQC

## 17. Submissions have been made to two Parliamentary Select Committees:

- Women's and Equalities Committee submission on the health experiences of Gypsy, Romany and Travellers<sup>3</sup>
- Health Committee submission on the role of education in children and young people's mental health. (Published as evidence<sup>4</sup>)

Issue	Action	Impact
18. Provider and CCG literature stating that: 'if you live in Cambridgeshire or Peterborough' you can access a service. This is incorrect it should state: 'if you are registered with a Cambridgeshire or Peterborough GP'	Raised with CCG	CCG now check all their literature and providers' literature to ensure it says 'if you are registered with a Cambridgeshire or Peterborough GP'.
19. Pharmaceutical Needs Assessment consultation	Advised on draft questions	Questions in the consultation changed
20. Complainants lack of confidence in the handling of a complaint	Healthwatch Cambridgeshire requested Cambridgeshire University Hospitals (CUH) to supply Complainant with a copy of the Action Plan to meet Duty of Candour	Complainant received report and are reassured. Asked CUH to supply as a matter of course with all complaints that result in an Action Plan. CCG welcome this suggestion and will progress through the contract.

<sup>3</sup> <http://www.parliament.uk/business/committees/committees-a-z/commons-select/women-and-equalities-committee/inquiries/parliament-2015/inequalities-faced-by-gypsy-roma-and-traveller-communities-16-17/>

<sup>4</sup> <http://data.parliament.uk/writtenevidence/committeeevidence.svc/evidencedocument/health-committee/children-and-young-peoples-mental-healththe-role-of-education/written/45363.html>

21. A wide of range of influencing opportunities have been realised through the Chair, NEDs and CEO being members of health and care decision-making groups. The CEO is a member of:

- Primary Care Co-Commissioning Joint Committee
- Healthwatch England Leadership Group
- Health & Wellbeing Officer Group
- Cambridgeshire Adult Safeguarding Board
- Cambridgeshire Local Safeguarding Children Board
- Quality Surveillance Group
- CCG Quality, Outcomes & Performance Committee
- STP Area Exec Partnership Hunts and Fens
- STP Urgent and Emergency Care Delivery Group

### *Communications*

22. Communications features as a specific item at the March meeting with in-depth analysis of the effectiveness and reach of our communications routes and methods.