

<b>Committee:</b> Health and Wellbeing Board	<b>Dated:</b> <b>17 November 2021</b>
<b>Subject:</b> Healthwatch City of London Progress Report	<b>Public</b>
<b>Report author:</b> Paul Coles, General Manager	<b>For Information</b>

## **Summary**

The purpose of this report is to update the Health and Wellbeing Board on progress against contractual targets and the work of Healthwatch City of London (HWCoL) with reference to Quarter Two 2021/22.

## **Recommendation**

Members are asked to note the report.

## **Main Report**

### **Background**

Healthwatch is a governmental statutory mechanism intended to strengthen the collective voice of users of health and social care services and members of the public, both nationally and locally. It came into being in April 2013 as part of the Health and Social Care Act of 2012.

The City of London Corporation has funded a Healthwatch service for the City of London since 2013. The current contract for Healthwatch came into being in September 2019 and was awarded to a new charity Healthwatch City of London (HWCoL). HWCoL was entered on the Charities Commission register of charities in August 2019 as a Foundation Model Charity Incorporated Organisation and is Licenced by Healthwatch England (HWE) to use the Healthwatch brand.

HWCoL's vision is for a Health and Social Care system truly responsive to the needs of the City. HWCoL's mission is to be an independent and trusted body, known for its impartiality and integrity, which acts in the best interests of those who live and work in the City.

### **1.Current Position**

During Quarter 2 HWCoL continued to successfully deliver its contracted activities. Staff have maintained a presence in the City at the Golden Lane Community Centre and latterly the Sir Ralph Perrin Centre.

This report includes an update on the delivery of HWCoL's Business Plan with an emphasis on the seven local objectives.

In September, the Health and Wellbeing Board were informed of HWCoL's application for a Healthwatch Network award. The winners of the awards were announced during the recent Healthwatch week. HWCoL were not successful in the individual category

however, the eight North East London Healthwatches collectively were successful, receiving a network award for our work with North East London Integrated Care System on providing community insight. As an award applicant HWCoL were recognised for giving a voice to seldom held groups.

During Q2, HWCoL investigated whether the Neaman Practice was able to refer patients to St Bartholomew's Hospital and the Royal London for non-invasive cardiac tests and consultant opinion and met members of Barts Heart Centre to discuss. Barts Heart Centre confirmed that they do not offer open access and diagnostics to primary care. Open access diagnostics is available at University College London, Homerton and Royal London Hospitals via Choose and Book.

HWCoL and Healthwatch Hackney submitted a joint funding bid to the City and Hackney Estates Enabler Group for a project worker to support Healthwatch with resident engagement regarding the redevelopment of St Leonard's Hospital.

## **2. Q2 Performance Framework return (Appendix 1)**

There has been no significant change in performance as measured by the Key Performance Indicators (KPI's), between Q1 and Q2. Of the 25 KPI's in the Performance Framework, 20 have been achieved or exceeded.

The number of areas of underperformance remains at four and includes Enter and View activities and recruitment of volunteers and Board Associates; remediation is addressed below.

Attendance at Board meetings in Public has dipped recently and this will need to be addressed. The team have already begun to implement a series of bespoke sessions that may prove to be of more interest to the public. From January 2022 HWCoL plan to return to face to face Board meetings. Attendance at Board meetings in Public will be prioritised during Q4 with additional marketing activity including the use of posters and leaflets.

HWCoL has one area of significant underperformance: the training of Enter and View volunteers. The restrictions to Enter and View activities resulting from the Covid-19 pandemic present a challenge to achieve this target. Training is being sourced and a volunteer campaign will be launched in the new year to recruit a team of Enter and View volunteers. A Virtual Enter and View at St Leonard's Hospital is planned for next year.

## **3. Delivery of the Business Plan-local objectives. (Appendix 2)**

The 2021/2022 plan identifies seven local objectives that will make a difference to City residents' experience of Health and Social Care. This section describes progress against these objectives.

### **3.1 Reflect the diversity of the population of the City of London to ensure that every voice is heard.**

To ensure that HWCOL reflects the diversity of the City of London population HWCOL business plan includes targeted recruitment of volunteers, trustees, and board associate.

Although recruitment of volunteers, trustees, and associates is part of the ongoing work for HWCOL, a volunteer recruitment campaign was launched in November with adverts on the website, social media and posters.

The campaign is focused on the recruitment of local residents however, this campaign is the latest in a number of different and competing campaigns seeking to recruit local volunteers and this could impact on success. HWCOL will review the success of the campaign during December identifying any lessons learned for future volunteer recruitment activity.

### **3.2 Encourage our GP and primary care services to deliver good care in their practices, the services they commission, and those commissioned by their primary care network.**

As previously reported to the Health and Wellbeing Board, HWCOL raised several with the Neaman Practice following concerns raised by residents. The Neaman Practice responded by producing an action plan to address the issues and are monitoring the delivery of the action plan remains an agenda item. There is an excellent working relationship between HWCOL and the practice which has enabled feedback and additional intelligence about patient satisfaction.

Following recent resident feedback, the HWCOL team were able to raise with the Neaman Practice concerns about the number of calls required to make an appointment. Residents reported making 60 plus calls before successfully getting through. The matter was raised immediately, and the practice were unaware of the problem. They have instigated some mystery shopping to test their systems but there is an ongoing problem with the telephone system, which they are trying to resolve and hope to have a solution in place soon.

Members of the HWCOL team attended the opening of the new Goodman's Field Health Centre. Following discussions with Healthwatch Tower Hamlets (HWTH), HWCOL will be discussing arrangements with the Health Centre for ongoing engagement with both Healthwatches.

### **3.3 Campaign for the 'new normal' in health services including community health to be responsive to the requirements of residents, students, and workers.**

HWCOL are working with the Neaman Practice, City and Hackney Integrated Care Partnership (C&H ICP) and Barts Health Trust to establish the pathways to access for cardiac services. Residents were concerned that the Neaman Practice had been instructed by City and Hackney Clinical Commissioning Group to refer patients for cardiac tests and opinion to either Homerton University Hospital (HUH) or University College London Hospitals (UCLH). HWCOL wrote to the Director of Transformation for C&H ICP to establish the referral instructions and are awaiting response.

HWCOL met members of Barts Heart Centre and they confirmed that Barts Heart Centre does not offer open access diagnostics to primary care (diagnostics that can be requested directly by GPs) at St Bartholomew's Hospital. Open access diagnostics

are available at UCLH, The Homerton and The Royal London Hospitals. Referrals for a cardiac opinion are through Choose and Book and are available at all three of the above hospitals. The consultant body at all Trusts are part of the consultant team at Barts Heart Centre and onward referral is made through this route.

The Neaman Practice confirmed that current indicative waiting times for general cardiology clinics at Barts Health is 200 days, Homerton 165 days and UCLH have not published the waiting times and are asking for referrals to be sent for triaging by cardiologists. HWCoL have requested a meeting with the Divisional Manager for Cardiac Services to discuss Barts Health's action plan to reduce the waiting times and the on-going management of patients on the waiting lists, including understanding how Barts Health are monitoring the health of those patients on the waiting list and the actions that are in place to support those patients.

Both Tracy Fletcher, CEO Homerton NHS Foundations Trust, and Professor Charles Knight CEO St Bartholomew's Hospital will be attending HWCoL's Public meeting and will discuss waiting list management.

### **3.4 Ensure City residents' needs remain at the heart of the new Shoreditch Park and City Neighbourhood.**

The Primary Care Network project which included identifying the services patients require from their General Practices and the health priorities of those using services. is still awaiting sign off and will be available via HWCoL website once completed. The PCN will develop an action plan to implement the recommendations and an update will be provided to the Board on activities that need to be put in place for City residents.

HWCoL has completed the City Outreach project which explored creating greater engagement from City residents and City of London VCSE organisations with the new Shoreditch Park and City Neighbourhood forum and will share the report's recommendations and action plans at a future Health and Wellbeing Board.

### **3.5 Scrutinise the development of a single North East London Integrated Care System (NEL ICS) for primary care.**

HWCoL's focus is on influencing the development of the engagement practices for NEL ICS. In Q2 joined the NEL Working Group: Embedding people engagement across NEL.

The increasing number of meetings requiring input from Healthwatches at both a North East London and a local Integrated Care System level is stretching the capacity of HWCoL, as well as partner Healthwatches.

The Community Insights project, impact of Covid-19 on disabled members of the community, with the eight Healthwatches across North East London, previously reported to the Health and Wellbeing Board in September, demonstrated that the Healthwatches can work together successfully. Continuing meaningful engagement with the NEL ICS governance meetings and working groups will require the eight Healthwatches to delegate to individual Healthwatches to act as the lead for the Healthwatches.

Healthwatch England recognise the need for Healthwatches in ICS patches to work collaboratively and are encouraging Healthwatches to discuss entering into formal arrangements. Entering into formal arrangements with our NEL Healthwatch partners in itself represents a risk of marginalising the role of HWCofL and diluting the voice of City residents.

### **3.6 Ensure services currently provided by St Leonard's Hospital remain within easy reach of City of London residents.**

HWCofL continue to work with Healthwatch Hackney to ensure that development plans for the site are co-produced with City and Hackney residents. A joint funding bid has been submitted to the City and Hackney Estates Enabler Group for a project worker to support resident engagement. No decisions on the future of the site have been made.

### **3.7 Act as a critical friend to the City of London, participate in public health campaigns and any decision-making on health and social care issues.**

HWCofL have been working with Ian Jarman (Commissioner for CoL) on the Homecare tender. His attendance at the Carer's form has been helpful to Ina and reassuring to the those with caring responsibilities, who felt assured that the CoL are listening and addressing concerns.

## **4 Other Activities**

HWCofL hosted a successful webinar showcasing the work of the East London Cardiovascular Disease Prevention (ELoPE). A Barts Heart Centre programme to deliver an ambitious strategy for reducing premature Cardiovascular Disease (CVD) mortality and health inequality in East London working in partnership with the British Heart Foundation.

The HWCofL team will continue to work with ELoPE to both support and promote their work

## **5. Planned Activities in Quarter 4 2021/22**

- A Webinar in January with Dr. David Collier, Joint Clinical Director at the William Harvey Research Institute. Dr Collier will talk about the remit of the Institute, how it links with Barts and the London School of Medicine and Dentistry, the current projects being undertaken and the current research projects.
- Pop up events around the City of London seeking feedback from residents on health and social care services.
- Developing HWCofL's presence in the new Portsoken Community centre as a contact point, managing access and producing a programme of events in the centre.
- Review of the information on the HWCofL website including:
  - More information on how to make a complaint about services in Health and Social care
  - Increased information on accessing Health and Social Care services.

## **6. Risks**

Trustees review the Risks and Issues Log at Board meetings. The Risk Log identifies data security, non-compliance General Data Protection regulations as key risks. Following a review of the Risks identified in the log further GDPR training was

upgraded to mandatory for all Staff, Trustees and Associate Board Members in the staff training matrix. Training has been sourced and will be provided for those members of Staff, Trustees and Associate Board Members who require training or an update to their knowledge in this area.

## **7. Conclusion**

During Q2 HWCoL made good progress in delivering the seven local objectives in the Business Plan. HWCoL continues to build good relationships with local health providers, health and social care partners, and has worked with partner Healthwatches to ensure the voice of users is heard in the forming Integrated Care Partnership.

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