

## **Paper 4: Report from HWR Manager - Tracey Allan-Jones June 2018**

With the immediate contract change behind us, I am pleased to submit this report to the first meeting of the new Board of Healthwatch Rutland, on 12<sup>th</sup> July 2018.

The focus in these early weeks has been three-fold:

- 1) To support the ongoing reorganisation of HWR to position us to deliver our statutory obligations, strategy and workplans.
- 2) To deliver on short-term priorities where there are known issues or up-coming changes to services, e.g. changes to urgent care services, non-emergency patient transport issues, GDPR requirements and Gerodontology challenges.
- 3) Ongoing activities: to maintain communication channels, regain further visibility through newsletter, updates and social media, and to identify and attend commissioner and provider meetings as necessary.

### **1) Reorganisation**

HWR is currently advertising for a substantive Chair through local voluntary channels e.g. Citizen's Advice Bureau, Voluntary Action Rutland and U3A, as well as the HWR website and social media.

Recruitment advertisements have also been posted for a part-time Healthwatch Officer (HWO) to take the lead on gathering and reporting the health and care service-user experiences of local people, offering signposting advice, providing support to our volunteers, and developing projects such as Young Healthwatch Rutland.

Until the HWO post is filled Esther Stimpson has been seconded from HW Northamptonshire for 2 days per week, starting 2<sup>nd</sup> July.

For the new Board, induction training has been organised for 23<sup>rd</sup> July and existing volunteers have been invited to attend for a refresher. Enter and View training and safeguarding training (along with any other training needs identified) will be organised following induction.

### **2) Short term priorities**

#### **Proposals to change Urgent Care Services**

East Leicestershire and Rutland CCG announced their proposals to make changes to out-of-hours services (also known as urgent care services) w/c 25/7/18. Previous to this HWR had given input to the ELRCCG communications plan and public survey and is now helping to publicise the proposals through the website, newsletter and social media, to encourage Rutland residents to participate in the information event that ELRCCG is running on Thurs 12<sup>th</sup> July.

#### **Non-emergency patient transport service (TASL)**

Thames Ambulance Service took over the contract for Leicester, Leicestershire and Rutland (LLR) on 1/10/17 and the service has had considerable problems from the start. HWR (along with neighbouring HW) have been working with regulators to ensure that

patient feedback is fed into the work to improve the service. This has continued after the contract change with our representation at the Quality Surveillance Group's Risk Reviews on TASL. Remedial actions specified at the risk reviews appear to be improving the service slowly.

HWR has received no calls of complaint from the public since the end of April.

HWR has given feedback to the June risk review; firstly that publicity about the service is needed to inform the Rutland public about the service, and secondly, that a formal escalation process should be put in place so that clients who are refused transport on grounds of eligibility can ask for a review of the operator's decision.

Prior to this in May, HWR urged the CCG to clarify two important points on eligibility for Rutland service-users:

- 1) East Rutland residents registered with Lincs GP practices in Stamford were initially deemed ineligible for TASL transport because their registered GP was outside of Rutland (even though TASL also run the contract for Lincs.)
- 2) Patients attending out of area hospital appointments were initially being refused onward transport when subsequently referred further out of area - e.g. Oakham resident attended NWAFT clinic in Peterborough and was then referred to Cambridge.

TASL eligibility criteria have now been updated to address these problems.

### **GDPR (General Data Protection Regulation)**

A new Information Asset Database and Privacy Policy was implemented in preparation for the 25<sup>th</sup> May deadline. Next steps are to audit current policies and procedures to ensure compliance with new records retention and data capture guidelines.

The change of contract and new GDPR regulations required us to ask the HWR distribution list members to 'opt-in' for continued communications for updates and newsletters. As expected by such an exercise the list has reduced in size, but we are assured that the newly opted-in members are fully engaged in the health and care conversation, and we will work to grow it going forward.

### **Gerodontology**

The Local Dental Network, supported by the Special Care Managed Clinical Network has been putting together a business case to get outreach dental services to Care Homes commissioned in the area. This follows feedback to the LDN from Rutland, Lincs and Leicester/Leicestershire that care homes find it extremely difficult to get even basic dental services for their non-ambulatory residents (evidenced last year through HWR's Enter and View programme to Care Homes). HWR involvement is now on hold while the NHS England bid is resubmitted.

## **3) Ongoing activities**

### **Communications**

Our newsletter distribution list has remained static since the 'opt-in' change in May.

Twitter followers are on the increase (1308 in early May up to 1336 at the end of June) and Facebook followers are static.

Next steps will be to increase HWR visibility via traditional media channels such as local radio and local newspapers as proposed in the HWR Ops and Planning Group meeting in May. Next steps with social media specifically, will include engaging with more youth-friendly channels including Snapchat and Instagram as part of our Young Healthwatch Rutland project.

### **Governance**

HWR is in the process of reviewing and updating current policies and procedures. The policies relevant to volunteering and board activities will be finalised in preparation for the volunteer induction training in July.

### **Volunteers**

HWR volunteers are very keen that the Enter and View programme should continue. Following forthcoming training a steering group will plan and implement an E&V schedule to visit GP surgeries in the second half of the financial year.

### **Engagement**

HWR participation at the Health Action Day in May and the Rutland County Show in June had to be cancelled. However, Carer's week in June saw Jacqui Darlington flying the HWR flag at the GP surgery and Late Night Pharmacy stands throughout that week.

### **IT**

The implementation of the 'widget' to allow linking from the HWR website to the Rutland Information Service is in and working well. Next steps for the website are to develop and publicise the 'Find-a-service' feature, to remove the 'join our membership' option which is no longer required, and to update the 'Quick Poll' functionality to enable us to run polls direct from the website.

### **Meetings**

The following meetings were attended during June:

RCC Health and Wellbeing Board, 26/6/18 (CT CEO)

TASL Risk Review, 11/6/18 (HWR Mgr)

ELRCCG Extended Primary Care Procurement Group, 20/6/18 (HWR Mgr)

Carer's Delivery Group, 19/6/18 (Volunteer - J Darlington)

Special Care Managed Clinical Network / Gerodontology Group, 12/6/18 (HWR Mgr)

Rutland One Project Estate Stakeholder Meeting, 6/6/18 (HWR Mgr)

RCC Adult Health and Scrutiny Board, 28/6/18 (CT CEO)

STP Event at De Montfort University, 15/6/18 (Chair)