



healthwatch

Healthwatch Windsor & Maidenhead
Implementation Report
April - September 2017



This report is about the work we have done from April 2017 to September 2017



This report is broken down into the key areas of service delivery and operations



This report identifies challenges faced



This report summarises work to date



This report provides details of the next steps

Contract and monitoring



- Delays in provision of contract
- Smooth transition of service
- Lead commissioner change



The previous agreement with the local Healthwatch provider was in the form of a grant. The agreed format with The Ark Trust Ltd is a contract and was a co-commissioning agreement with Bracknell Forest Council for both Local Healthwatch and SIGNAL (carers support service). In addition RBWM also changed their legal services arrangements; this caused delays in providing a final contract, signed by both parties. This was finalised on 28/09/17.

We worked with commissioners and the previous provider for a smooth transition of service. There were additional complications as the previous provider also used the local Healthwatch identity as the name of their charitable entity. They also did not utilise the Healthwatch England 'website in a box' but gave permission for their web developer to work with us after the transfer of service date to migrate the domain name etc. Before the start of the contract it was agreed that TUPE did not apply to the previous provider's staff but one member of staff applied, and was successful, for a job within our organisation.

The lead commissioner responsible for the service left RBWM 3 months into the contract. We have met with the new commissioner who started in September and discussed future monitoring arrangements.



- To provide RBWM with a quarterly update which can be circulated and published
- To ask RBWM to liaise with previous provider to establish closure and de-registration of Healthwatch WAM charity and transfer of all assets as agreed.

Project Support Board



- Contract delays leading to reluctance from The Ark Trust Ltd to commit to MOU's with organisations
- Representation from individual members of the public



The Ark Trust Ltd has developed a consortium approach to the overview of local Healthwatch in Bracknell Forest. It agreed to deliver a similar approach in Windsor & Maidenhead. Although delays in provision of a contract delayed formal agreements developing with local community and voluntary sector groups we have identified suitable groups and had some initial discussions.

Ideally, joining representatives from local groups, would be up to 3 members of the public. Trustees from the previous provider were asked if they wished to take on this role in the implementation period however none agreed.

- In the next 6 months enter into MOU's with up to 6 local community and voluntary sector organisations and develop a project support board charter
- Promote opportunity to public from January 2018



Data transfer and management



- All data prior to the start of contract was the property of the previous provider; there was no formal agreement between them and RBWM about transfer of this.
- Minimal data available from Healthwatch England



The previous provider wrote to all contacts and asked for permission to transfer data to us. This resulted in 40 contacts.

We have worked with RBWM to agree data sharing; contacts to be provided to any future provider and anonymised overview of feedback and case history to be shared with partners and Healthwatch England to identify trends and issues in local health and social care provision.

We have an established CRM system that provides remote, secure back-up of data and allows anonymised reports to be generated and, at the end of the contract, contact data to be transferred.



- To regularly review the organisation's data protection policy and keep updated with changes in legislation.

Website



- Transfer of domain name
- No transfer of content
- Links from external organisations out of date



Work to obtain transfer of the domain name started 2 months before the start of the contract and was finally completed in late April.

Basic permanent content has been published and the news section has started to be regularly updated.

When people come to the site through an old link the following message is displayed to them;

“Sorry! This page has been deleted or moved. In April 2017 the provider of the Healthwatch Windsor, Ascot and Maidenhead service changed, you can read more about this in the about us section of this website. The content of the old website was not provided to us and therefore if you have come to this site through a link created before April 2017 you will reach this page.

You can use the navigation above to continue exploring our site.”

There are no website statistics available for the first 3 months but from July-September 167 people visited the website creating 193 sessions. The most popular pages were the home page, about us, reports, get involved and news. The most popular news stories were about local memory walks and Men’s Matters.



- Publish further website content
- Identify organisations and sites using old links and provide update.

Publicity and promotional materials



- No publicity or promotional resources from the previous provider could be utilised (due to the inclusion of charity number and/or contact details)
- Old posters/leaflets in circulation



New posters, leaflets and banners designed and printed. Different colours from the available Healthwatch palette used to show distinction from previous provider and Healthwatch Bracknell Forest.

Posters and leaflets distributed to local authority, GPs and hospitals. Handed out at community events attended and at community locations.

Cost of the NHS poster sent to all GPs.

Co-produced one Healthwatch poster for all acute units across the Frimley STP footprint.



- Identify further community locations to distribute materials and replace old posters and leaflets as made aware of them.

Community Engagement



- New area of delivery for this service (for The Ark Trust Ltd)
- Resistance to change from some members of the local community
 - No permanent premises in RBWM
 - Low awareness of previous service
 - Loss of member of community engagement staff



Although we have not provided local Healthwatch in RBWM before, our work providing the SIGNAL service in the year before had developed links with the local community which we have utilised. The co-commissioning agreement has allowed us, where appropriate, to promote both services at events.

Lack of trained and DBS checked volunteers in the implementation period has meant staff have had to carry out the majority of the community engagement work and attendance at events. The loss of a member of staff employed in this area has had an impact on delivery. Recruitment for a replacement should be completed in October.

15 Community engagement events have been attended including carers support groups, Daily Living Made Easy event (Windsor) SWAM 17 all day events in both Windsor and Maidenhead, patient groups, Autism event held in Maidenhead by The Autism Group and Carers Week events.

We have also recently purchased a mobile information vehicle and since July have been undergoing the HGV

operators (restricted) licence application process and recruiting a volunteer driver. This will allow us to provide access to the service across the borough.



- Finalise recruitment and training of new Community Engagement Worker
- Identify events in the community to attend
- Identify locations that can accommodate the Mobile Information Vehicle and seek permission to park. Develop a regular schedule that can be published on the website and promoted
- Explore possibility of providing a drop in service at library

Social Media



- New engagement channel for the service
- Lack of awareness in the community of the service



The service now has both a Twitter and Facebook account.

We have tweeted 32 times and have retweeted other organisation's tweets and messages (CCG, health campaigns etc.) 4064 people have seen these tweets.

Most popular tweet in Qtr. 1 was about the Local Healthwatch Hospital Discharge Report. Most popular tweet in Qtr. 2 was about a survey being carried out by Diabetes UK.

We currently have 196 followers.

The Healthwatch WAM page only has 6 likes. We will need to consider paid for targeting advertising to increase this as we believe organic growth will take a long time.



- To undertake a social media engagement campaign and encourage active dialogue with members of the public on health and social care matters using this channel

Volunteers



- Limited information available on previous volunteers
- Due to Safeguarding policies, each volunteer must undergo the organisation's application process, DBS checks and training (regardless of status with previous organisation)



All contacts were invited to a meeting on 27/07/17 to promote volunteering opportunities within Healthwatch WAM. 9 people attended and only 4 have expressed interest in the future.

Volunteer opportunities are promoted at all community engagement events



- Training programme for volunteers to be undertaken in Qtr. 3
- Register opportunity with WAM Get Involved and Do-It website

Enter and View



- Lack of volunteers



We have been involved in the planning of a pan-Berkshire Enter & View programme of Prospect Park in October.



- Recruit volunteers and provide Enter & View training
- Plan GP Enter & View Schedule

Representing patients & public



- Limited direct feedback to Healthwatch WAM since April 2017
- No previous data on trends and issues in health and social care



Although there has been limited direct feedback to the service from individuals to date, feedback from SIGNAL, feedback from attendance at community groups, partnership boards, involvement with patient groups, social media chatter and knowledge of regional issues has informed Healthwatch WAM representation of patients and the public at meetings attended.

70 such meetings have been attended in this 6 month period. These include Primary Care Operational Group (CCG), Patient Involvement Group (Frimley Health), Mental Health Partnership Board (RBWM), Community Nursing Review (Berkshire Healthcare Foundation), CQC and Community Partnership Forum.

Due to the co-commissioning arrangement this amount of meetings is possible as the resource burden is shared, (Often representing both local Healthwatch services or Healthwatch and SIGNAL) This has been a concept that others have not always been able to grasp.

Representing 2 East Berkshire Healthwatch services means we are often asked to represent or lead on East Berkshire strands of work. We share information with Slough and, where relevant, other local Healthwatch services to allow this. This arrangement is reciprocated, for example Healthwatch Slough are leading on a piece of work with South Central Ambulance Service.

In addition to these meetings and community engagement events we have also attended 14 meetings to develop working relationships e.g. with GPs and elected members.

We are also involved with the communication work stream around people with learning disabilities with Berkshire Healthcare Foundation following their CQC inspection.

We have attended 2 days of pilot training session for GP receptionist (WAM CCG) to provide patient input to develop the training before it is rolled out to all.

We participated in the PLACE assessments at Prospect Park and St Marks and will be following up some issues with the food assessment at St Marks.

We sometimes need to send patient identifiable information to other health and social care professionals so Berkshire

Healthcare have arranged for us to have an NHS.net email address for these purpose.

We have attended 3 weekly MDT meetings of the Community Team for People with Learning Disabilities to raise social care professionals awareness of Healthwatch (they had previously no knowledge). They are planning on creating a health sub group and have asked us to join.



- To work with the CCG about communication, engagement and involvement of the public about all the upcoming changes
- To collect more feedback to better inform representation
- Ensure that meeting minutes record what services are being represented correctly (e.g. both Healthwatch services)
- To discuss with commissioners of both areas of local Healthwatch delivery priorities to inform attendance at meeting.

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