

Healthwatch Shropshire Forward Work Programme 2019-20

1. Purpose

This document sets out how and why Healthwatch Shropshire has chosen its priorities for this year.

2. Introduction

Healthwatch Shropshire (HWS) was established in April 2013 as one of a network of Local Healthwatch organisations across England. It is a registered charity and company limited by guarantee.

Local Healthwatch were established under the **Health and Social Care Act 2012** requiring them to undertake a range of **statutory activities**:

1. Promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services;
2. Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved;
3. Obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known;
4. Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England;
5. Providing information about access to local care services so choices can be made about local care services;
6. Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England;
7. Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues;

8. Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

2.1 The role of Healthwatch Shropshire

Healthwatch Shropshire has used the statutory obligations and HWE guidance to inform its own vision statement:

Through Healthwatch Shropshire the people of Shropshire know that they have a powerful voice and can make a difference

Building on this vision statement it was agreed that the following best encapsulated HWS's purpose:

To be the recognised independent voice of the people of Shropshire in seeking to improve their experience of Health and Social Care services

The strap line to accompany and reinforce this statement is: **Your voice counts**

Healthwatch England's Strategy 2018 - 2023 sets out three key aims for the network:

1. To support the public to have their say on health and care services
2. To provide a high quality service
3. To ensure the public's views help improve health and care services

The statutory obligations and guidance for local Healthwatch have been distilled into a number of areas to reflect the day-to-day work of HWS:

1. Profile Raising and access to HWS
2. Information services (including signposting)
3. Community Engagement
4. Enter & View
5. Volunteering
6. Partnerships and networking
7. IHCAS

As of 31st March 2019 HWS had 9 Board members, a staff team of five (4 WTE), an IHCAS Advocate and 10 active volunteers.

2.2 The role of The Independent Health Complaints Advocacy Service (IHCAS)

Shropshire IHCAS can:

- Provide enough information and advice so people can pursue a formal NHS complaint themselves
- Offer the support of an Independent Health Complaints Advocate who can help them to make their complaint and support them through the NHS complaints process
- Listen to the concerns and help to collect together all the relevant issues and facts needed to highlight the concerns
- Monitor the progress of the complaint with the organisation responsible and keep them updated
- Signpost to the right organisation if Healthwatch Shropshire is not the right organisation

IHCAS cannot make or process a complaint for someone (they have to do it themselves - it is their complaint) and cannot provide support for someone to make a complaint about a social care service.

2.3 Healthwatch Shropshire priorities for 2018-19

HWS priorities for 2018-19 were:

1. Young People's Emotional Health and Wellbeing Service
2. To build on initial work on Social care, particularly domiciliary care, discharge and complaints
3. 'Communication' including health literacy, awareness/understanding of services covering both social care and health
4. Involvement in local transformation programmes and consultations
5. Engaging with the local initiatives on prevention including social prescribing.

See:

[Appendix 1](#) for how projects and marketing we did last year reflected these priorities. [Appendix 2](#) shows continuing progress against 2017-18 priorities.

3. Identifying priorities for 2019-20

Appendix 3 shows the sources of information that feed into HWS decision making around priority setting, including:

- Analysis of comments received by Healthwatch Shropshire
- Signposting call topics
- Staff and Board views
- The priorities of other local Healthwatch
- The Shropshire, Telford & Wrekin Sustainability and Transformation Partnership priorities
- Shropshire Clinical Commissioning Group priorities
- Shropshire Health and Wellbeing Board priorities
- NHS Long Term Plan

The Forward Work Programme has also taken into account the resources available both financial and in terms of capacity. Healthwatch Shropshire will continue to be a four days per week service to reflect the reduced income levels in the new contract (from 1st April 2018).

The major challenges in looking forward are to ensure there is capacity available and to build in flexibility so that HWS has the ability to respond in a timely and appropriate manner to feedback as it is received and to local circumstances as they develop during the year.

4. Priorities 2019-20

The staff and Board of Healthwatch Shropshire have agreed the following priorities for 2019-20:

1. Mental health and well-being, e.g. 0-25 services, quality of dementia care in care homes
2. Adult Social Care, e.g. partnership work around discharge and care at home
3. Primary Care, e.g. access, technology and shared care records, out-of-hours
4. Prevention and Social Prescribing, e.g. community resilience

Appendix 1: Progress against 2018-19 priorities

Priority	Aims	Work completed / outcomes
Young People's Emotional Health and Wellbeing Service	<ul style="list-style-type: none"> To engage with the Child and Adolescent Mental Health Service in Shropshire To understand better the experiences of young people using (or not using) these services To work with local schools Project lead: Community Engagement Officer Time frame: September to March 	<ul style="list-style-type: none"> Hot Topic Perinatal Mental Health (September 2018) - findings shared with Local Maternity System (LMS) Hot Topic 0-25 Emotional Health and Wellbeing Service (October - December 2018) HWS report to be published April 2019 Engagement to inform Healthwatch England's research into Perinatal Mental Health Services (January - March 2019) HWS report to be published April 2019
Build on initial work on Social care, particularly domiciliary care, discharge and complaints	<ul style="list-style-type: none"> To develop a methodology for gathering feedback on domiciliary care To encourage greater feedback on social care services Project Lead: Enter & View Officer Timeframe: throughout year 	<ul style="list-style-type: none"> Enter & View Officer and Chief Officer met with Service Manager (Commissioning and Governance) for Shropshire Council to discuss approach to gathering feedback on domiciliary care. Ongoing
'Communication' including health literacy, awareness/understanding of services covering both social care and health.	<ul style="list-style-type: none"> Developing the communication and information services by HWS Working with the local health economy to ensure that communications are readily understood Project Lead: Information Officer Timeframe: throughout year 	<ul style="list-style-type: none"> Throughout the year HWS have offered to proof read and comment on public facing documents for the local health and social care economy, e.g. regarding Non-emergency Patient Transport (SCCG), Ophthalmology (SaTH). Ongoing

Priority	Aims	Work completed / outcomes
Involvement in local transformation programmes and consultations	<ul style="list-style-type: none"> • Continue to fully engage with the NHS Future Fit programme consultation • Participate in the Local Maternity System and chair the Maternity Voices Partnership (MVP) • Participate fully in other transformation programmes at all levels • Project Lead: Chief Officer • Timeframe: throughout year 	<ul style="list-style-type: none"> • Engagement Officer attended six Future Fit consultation events in 2018 to support people to have their voice heard. • Chief Officer, HWS Board members and volunteers have continued to attend meetings regarding Future Fit including the Programme Board and Assurance work streams. We continue to be part of the Stakeholder Group and hope this continues as work transfers to the STP. Ongoing • Chief Officer and Engagement Officer continue to attend Midwifery Led Unit Service Review Programme Board and the MVP. Chair of the MVP has transferred to the Maternity Voices Development Co-ordinator in preparation for this being a service user in line with the national MVP Term of Reference and as a response to HWSs limited capacity.
Engage with the local initiatives on prevention including social prescribing.	<p>HWS has been asked to undertake an engagement project to provide: “assurance that the development of Healthy Lives is informed by the health and wellbeing needs articulated by the Shropshire public and service users, particularly where these needs are not currently met or where they place significant demands on health and care services”</p> <ul style="list-style-type: none"> • Develop an approach to the engagement, particularly involving “the quieter voices” • Project Lead: Chief Officer • Timeframe: September to March 	<ul style="list-style-type: none"> • October 2018 - March 2019 HWS conducted engagement activities to gather people’s views on Social Prescribing. The final report ‘Social Prescribing: Exploring Barriers’ has been shared. HWS report to be published April 2019.

Appendix 2: Update on progress against 2017-18 priorities

During 2017-18 there was a challenge to HWS's capacity as considerable activity was focussed on the recommissioning process and then, following award of the new contract, the implementation of the new contract.

Priority	2018-19 progress	Update
Exploring people's understanding of how to raise concerns and complaints (and share compliments)	<ul style="list-style-type: none"> • Keele Final Year Medical students undertook a project on this. Report is published on the HWS web site. • Information continues to be gathered and is continually fed back to providers. 	<ul style="list-style-type: none"> • This is the day-to-day work of HWS and central to the role of the IHCAS. Ongoing. • In April 2018 the Chief Officer and IHCAS Coordinator met with Feedback and Insight Team Leader for Shropshire Council to discuss contact options for the public to complain about Council services. Website amended. • IHCAS self-help pack is shared with people who wish to make a complaint about social care as the information is the same. They are told that if they are not satisfied they should go to Local Government and Social Care Ombudsman and given the contact details. Ongoing
Explore the application of the NHS Accessible Information Standards across the county	This piece of work was undertaken through Enter & Views to a number of GP practices. Individual reports have been published and an overarching report will be published in 2018-19	<ul style="list-style-type: none"> • The NHS Accessible Information Standard in GP Practices Enter & View Summary Report - Published October 2018
Support the local population to better understand how the local health and care system works	This work will continue as part of the health literacy programme.	<ul style="list-style-type: none"> • On-going

Priority	2018-19 progress	Update
Continue to develop and implement the approach for understanding quality of care delivered in people's homes	This will continue into 2018-19 as there was a lack of feedback received during 2017-18. Gathering the feedback on domiciliary care is dependent on the co-operation of partners.	<ul style="list-style-type: none"> This remains a priority for 2019-20 - Ongoing
Expand the discharge project to other providers	This has not been undertaken but feedback is collected and shared with providers.	<ul style="list-style-type: none"> Feedback continues to be shared - Ongoing
Contribute to delivering the Carers' Voice project locally	HWS holds the budget for the continuing activity and is involved in the partner meetings	<ul style="list-style-type: none"> Early 2019 HWS are working with HWT&W to complete engagement for Healthwatch England and NHS England to inform the local STP Five Year Plan. We have chosen to include a focus on the needs of carers - Report due June 2019
Working with partners on the implementation of Dementia strategy and delivering on DAA commitments	HWS has proactively followed up progress on implementation by the Shropshire CCG and will be covered by the Care Closer to Home programme across Shropshire	<ul style="list-style-type: none"> Early 2019 HWS are working with HWT&W to complete engagement for Healthwatch England and NHS England to inform the local STP Five Year Plan. We have chosen a focus on mental health which includes Dementia and Learning Disability - Report due June 2019
Continue to engage in the local transformation work programmes including the Sustainability and Transformation Plan.	This work continues. HWS provides insight from the people's perspective and challenges when necessary, also providing support to the communications and engagement plans	<ul style="list-style-type: none"> Early 2019 HWS are working with HWT&W to complete engagement for Healthwatch England and NHS England to inform the local STP Five Year Plan - Report due June 2019

Appendix 3: Sources of information that feed into HWS decision making around priority setting 2019-2020

Priority areas from analysis of comments received by HWS January to December 2018:

1. Child & adult mental health services
2. GP practices / Primary care
3. Maternity services
4. Accident and emergency

Signposting calls to HWS top five topics to March 2019:

1. Health service complaints and concerns (e.g. IHCAS, PALS)
2. Information on NHS Hospital Services
3. Maternity review
4. Social Care concerns and complaints
5. Support (e.g. patient and carer support groups)

Staff and Board views:

1. Adult social care (including complaints, residential care homes and care at home)
2. Care closer to home (including digital technology and discharge from hospital)
3. Mental health (including young people, Perinatal Mental Health, prevention, hospital discharge)
4. Prevention and self-care (including obesity, diabetes, Care Closer to Home, Social Prescribing, cardiac, stroke)
5. Maternity services (including local reconfiguration of services)

Priorities of other local Healthwatch:

1. Primary care (including access to GPs) - 64 local HW
2. Children and young people - 57 local HW
3. Mental health - 50 local HW
4. Services working better together - 49 local HW
5. Adult social care (including residential care homes or care at home) - 41 local HW

Shropshire, Telford & Wrekin Sustainability and Transformation Partnership priorities:

1. Urgent and emergency care
2. Mental health (including learning disability and autism)
3. Out of hospital care in the community

Shropshire Clinical Commissioning Group priorities:

1. Self-care
2. Mental health (perinatal)
3. 111 / out of hours

Shropshire Health and Wellbeing Board priorities:

Shropshire Health & Wellbeing Strategy 2016-2021 - The Shropshire Joint Strategic Needs Assessment (JSNA) tells us that the key health issues in Shropshire include:

- Mental health, including dementia
- Rising obesity
- Child poverty
- Ageing population

Shropshire Health and Wellbeing partners will work to the following outcomes (based on the Public Health Outcomes Framework) and principles:

1. Reduce health inequalities
2. Increase healthy life expectancy (including quality of life), ensuring we live well at all stages of life - start well, live well, age well

Priorities:

1. Prevention - health promotion and resilience
2. Sustainability - promoting independence at home
3. Promoting easy to access and joined up care (continuity of care, integration of services)

Three exemplar / development projects informing the Health and Wellbeing Board Action Plan:

1. Healthy weight and diabetes prevention
2. Carers
3. Mental health

<http://www.shropshiretogether.org.uk/wp-content/uploads/2016/05/FINAL-HWBB-Strategy-2016.pdf>

NHS Long Term Plan

Areas of work:

- Ageing well
- Cancer
- Digital transformation
- Learning disability and autism
- Mental health
- Personalised care

- Prevention
- Primary care
- Starting well
- Stroke
- Workforce

<https://www.longtermplan.nhs.uk/areas-of-work/>

NHS Long Term Plan Summary:

<p>Making sure everyone gets the best start in life</p>	<ul style="list-style-type: none"> • reducing stillbirths and mother and child deaths during birth by 50% • ensuring most women can benefit from continuity of carer through and beyond their pregnancy, targeted towards those who will benefit most • providing extra support for expectant mothers at risk of premature birth • expanding support for perinatal mental health conditions • taking further action on childhood obesity • increasing funding for children and young people's mental health • bringing down waiting times for autism assessments • providing the right care for children with a learning disability • delivering the best treatments available for children with cancer, including CAR-T and proton beam therapy.
<p>Delivering world-class care for major health problems</p>	<ul style="list-style-type: none"> • preventing 150,000 heart attacks, strokes and dementia cases • providing education and exercise programmes to tens of thousands more patients with heart problems, preventing up to 14,000 premature deaths • saving 55,000 more lives a year by diagnosing more cancers early • investing in spotting and treating lung conditions early to prevent 80,000 stays in hospital • spending at least £2.3bn more a year on mental health care • helping 380,000 more people get therapy for depression and anxiety by 2023/24 • delivering community-based physical and mental care for 370,000 people with severe mental illness a year by 2023/24.
<p>Supporting people to age well</p>	<ul style="list-style-type: none"> • increasing funding for primary and community care by at least £4.5bn • bringing together different professionals to coordinate care better • helping more people to live independently at home for longer • developing more rapid community response teams to prevent unnecessary hospital spells, and speed up discharges home. • upgrading NHS staff support to people living in care homes. • improving the recognition of carers and support they receive • making further progress on care for people with dementia • giving more people more say about the care they receive and where they receive it, particularly towards the end of their lives.

<https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/the-nhs-long-term-plan-summary.pdf>