

<b>MEETING</b>	<b>PUBLIC BOARD MEETING 15 November 2017</b>
<b>Agenda item and Paper Number</b>	<b>7 CM/11/17/07</b>
<b>Agenda Title</b>	<b>Healthwatch England update</b>
<b>Sponsor</b>	<b>Jane Mordue – Chair of Healthwatch England and Non-Executive Board Member</b>
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**PURPOSE OF PAPER:**

Actions required by the Board:

- For the Board to **NOTE** the update from Healthwatch England

1. This report provides an update on the following:

- Annual report to Parliament, 2016-17
- Strategy development
- Committee recruitment
- Children's and young people's mental health
- Healthwatch network
- Gathering local Healthwatch evidence
- NHS England Mandate and Secretary of State's assessment of NHS England performance
- Social care reports
- Discharge report and readmissions analysis
- Mental health

**2. Annual report to Parliament, 2016-17**

Healthwatch England presented its fifth annual report to Parliament on 2 November. The report provides a summary of what people have told local Healthwatch about primary care, hospitals, mental health and social care services. The publication also sets out how we have used this insight to inform national decisions about health and social care. Over the last year, the Healthwatch network has heard from over 340,000 people about their experiences of health and social care. These views have been shared with services, leading to positive changes and enabling professionals to monitor how they are performing in the current climate.

The collective feedback people have provided to local Healthwatch paints a mixed picture of good care with some variation in quality and access. Mental health is the area that stands out with a majority of people's comments reflecting a negative experience.

With many services under pressure, there has been concerted effort from the NHS, government and local councils to introduce changes to the way care is delivered. Yet the experiences we hear suggest many of these changes are yet to translate into tangible differences for people. Our report reminds professionals that the Healthwatch network is here to help drive improvement.

### **3. Strategy development**

The first phase of engagement on our future strategy started in June 2017 and ended in September 2017, having asked for views on a number of broad questions, including:

- What would the world look like for users of health and social care services if we were successful?
- What the primary role of Healthwatch England and local Healthwatch should be?
- The biggest challenges we face and the opportunities we can take advantage of?
- How the Healthwatch network could work differently to have a greater impact?
- The issues we should focus on to help make health and care services work better for people?

Drawing upon the clear messages we heard during the engagement phase, the Healthwatch England Committee has now launched the final stage of consultation, until December 2017. Board members will have seen the consultation document in advance of the Board meeting and it is available online at <http://www.healthwatch.co.uk/yoursay>.

The proposed future aims focus on empowering more people to have their say, providing a high quality Healthwatch service and ensuring people's views help improve health and social care. We are seeking views on (a) what changes people would expect to see if we achieved these aims and (b) the potential activities we could focus on to realise these aims.

An equalities impact assessment will be conducted as part of the second phase of engagement and we aim to have completed this by December 2017 to enable us to ensure we build equality, diversity and human rights into the business planning that will underpin the strategy. We aim to publish the strategy in February 2018 and will continue to update the Board on its development.

### **4. Committee recruitment**

We received almost 400 applications for the vacancies on our Committee and are pleased to report that we have been able to put together a high-quality shortlist.

### **5. Children's and young people's mental health**

The CQC's report at the end of the first stage of its review was an important step in getting our young people the mental health and wellbeing support they tell Healthwatch they want and need. Through our involvement in the external advisory group for the review, we were able to feed in our network's insight that the biggest concerns for children, young people, their families and carers are a lack of early intervention, problems getting access to and moving between services, and not enough engagement with, or support for, parents and

carers. We look forward to continuing to work with the CQC team and others in the second stage of the review.

## **6. Healthwatch network**

Our network conference brought 360 attendees together in Nottingham on 6<sup>th</sup> and 7<sup>th</sup> July to celebrate the achievements of the network in 2016/17, to understand best practice across England, to identify future opportunities for collaboration and to hear from experts from across health and social care. This year's event enabled us to begin intensive discussions with the network on our developing strategy.

We were pleased that Sir David Behan was able to speak and present at our network awards ceremony during the conference. Information on the wide range of projects that won awards is available at <http://www.healthwatch.co.uk/resource/making-your-voice-count-2017>.

We are finalising our annual analysis of the network's resources and this will also inform our forward planning.

## **7. Gathering local Healthwatch evidence**

We are continuing to increase the number of local Healthwatch consistently sharing intelligence with us. In Quarter 2 we analysed 223 Healthwatch reports using our new intelligence approach. We also received and processed over 2,000 individual experiences of health and social care. An increasing number of local Healthwatch are making use of our research helpdesk.

## **8. NHS England Mandate and Secretary of State's assessment of NHS England performance**

During Quarter 2 we started our annual engagement, as a statutory consultee, with the Department of Health on its refresh of the Mandate to NHS England. This process informs decisions on the deliverables for NHS England for 2018/19. We will continue to make the case for the Mandate to:

- Strengthen public involvement in major service change initiatives;
- Encourage greater use of people's experiences as a way of measuring the extent to which services are providing integrated care;
- Set clear expectations around the NHS demonstrating how it is learning from feedback and complaints.

New areas we will focus on this year will be:

- Mental health and the need for greater evaluation of service improvements to ensure they are having the impact people want;
- Reviewing how the Mandate sets expectations to deliver against current NHS targets and how this compares to what matters most to people.

The Department of Health is now also making use of our insight to inform its review of NHS England's performance against the Mandate. We were pleased to see substantial

use made of our information in the Secretary of State's assessment for 2016/17, in which he also welcomed the joint working between Healthwatch England, NHS England and local Healthwatch.

## 9. Social care reports

During August we published two well-received social care reports: [What's it like to live in a care home? Findings from the Healthwatch network](#) and [Home care services: What people told Healthwatch about their experiences](#).

These reports form part of a sequence of activities intended to respond to the rise of social care in our network's priority list, in the context of our involvement in the Quality Matters coalition. They follow the launch in July of our social care complaints toolkit. Our objectives throughout this series of activities are to ensure that professionals and public alike understand the Healthwatch role in social care and to position Healthwatch England and local Healthwatch firmly at the heart of future social care discussions and decisions.

## 10. Discharge report and readmissions analysis

During October we published a follow-up to our 2015 Safely Home report on poor and unsafe discharge. This report – [What happens when people leave hospital and other care settings?](#) – reflects the experiences of more than 2,000 people and also identifies where national and local Healthwatch work with partners is achieving improvement.

We also published our [findings](#) from analysing hospital trusts' data on emergency readmissions, which raised important questions for trusts and for everyone seeking to understand and deal with this challenge. We will continue to work with our partners to make progress in this vital area.

## 11. Mental health

As a result of the pre-eminence of mental health in the intelligence we presented to Parliament in our annual report, the Committee has agreed to the establishment of a programme to explore this issue in greater breadth and depth. Initially we will work with the Healthwatch network and stakeholders to identify which areas of mental health we should prioritise within the programme. We will focus on areas where Healthwatch insight will add new evidence to the conversation about what is working for people and what users want and need to see done differently. In 2018/19 the project will move into its operational phase, with a mix of broad nationwide research by the network and targeted, deep dive activity to test out findings. We will produce interim update reports throughout the project to share insight as we go, rather than waiting until the end of the programme. However, we will also produce an end-of-programme report by the end of 2018/19.

## 12. Conclusion

The board is invited to **DISCUSS** and to **NOTE** the items above.

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Date: 2 November, 2017