

REPORT TO:	Health and Wellbeing Board 20 October 2021
SUBJECT:	Healthwatch Croydon Annual Report 2020/21
BOARD SPONSOR:	Edwina Morris, Healthwatch Croydon
PUBLIC/EXEMPT:	Public

SUMMARY OF REPORT

Our annual report presents the work we have achieved between 1 April 2020 and 31 March 2021.

BOARD PRIORITY/POLICY CONTEXT:

Local Healthwatch are independent, corporate bodies set up by the Health and Social Care Act 2012, the legislation that also brought the Health and Wellbeing Board into being. Local Healthwatch organisations have a seat on their Health and Wellbeing Board and contribute to ensuring the voices of local people are heard.

FINANCIAL IMPACT:

This report does not have any financial implications. It is a report of a service delivered and does not contain direct proposals.

RECOMMENDATIONS:

The Board is asked to note the report.

2. EXECUTIVE SUMMARY

- 2.1. The Healthwatch Croydon contract was awarded to Help & Care in April 2018 following a competitive tendering process. This report sets out a summary of what has been achieved between 1 April 2020 and 31 March 2021

3. BACKGROUND & CONTEXT

- 3.1 Healthwatch Croydon works to get the best out of local health and social care services by ensuring the people who use health and care services can influence the way they are delivered. From improving services today to helping shape better ones for tomorrow, we listen to local people's views and experiences and then influence decision-making.

3.2 Help & Care are a charity based on the south coast and are one of the largest providers of Healthwatch services in England. As an organisation, we have been involved in patient and public involvement in health for over 20 years and our work on Healthwatch has enabled us to build on and share our skills and experience as well as offer considerable economies of scale. We strongly believe that enabling people to shape health and care will support the creation of better services that meet needs more effectively. With so much change taking place in health and care services currently, the need to engage effectively with people has never been so important.

3.3 We have several legal functions, under the 2012 Health and Social Care Act.

These are:



4. KEY ACTIVITIES 2020-21

4.1. Some key statistics for our year: We heard from 1,588 people this year about their experiences of health and social care. We published 8 reports about the improvements people would like to see to health and social care services. From this, we made 44 recommendations. Most have been acted upon either by the point where we reviewed progress or are identified as actions included in plans. We had 22 volunteers helped us to carry out our work. In total, they contributed 813 hours equalling nearly 116 days all without meeting face-to-face due to restrictions.

- 4.2. We began the year responding to the challenge of COVID-19. For an organisation where core work focused on meeting people face-to-face in community locations such as hospitals, GP surgeries and libraries and with local community groups and organisations, this posed a significant challenge. However, our board and team worked hard to maintain and develop the service, within the limits of lockdown, and while we were all working at home.
- 4.3. In March 2020, along with all other Healthwatch organisations, we received a letter from Sir Robert Francis, Chair of Healthwatch England. He asked us to prioritise our work of providing good quality information and advice, and of asking people for their views on their needs and experiences in relation to the coronavirus outbreak. We responded by working closely with local partners to ensure good information and advice was produced and shared and working with other community organisations to ensure consistent and accurate information.
- 4.4. Bearing in mind the limitations, we proposed to begin a COVID lockdown survey. This aimed to get early insight of people's experience of lockdown so that stakeholders could be informed of how people were affected in a way that those who were delivering services could respond. This was an online survey, promoted through wide channels and was live by 3 April 2020 just a few days after full lockdown. The strict limitations on safety meant we could only work effectively online. We worked with our network of stakeholders to ensure our survey got promoted well including Croydon Voluntary Actions, BME Forum and Asian Resource Centre as well as our NHS and social care partners within Croydon Council to promote this to all areas of the community. We shared COVID lockdown reports with key stakeholders while the survey was still running on 30 April and 22 May, which timed well for Croydon Health and Social Care Scrutiny Committee (26 May) and NHS Health Board (27 May) meetings in public. We raised the profile of the mental health impact of lockdown to services, due to the effects of living in one place, but also loss of jobs, income and other situations that could negatively affect mental health. See pages 25-26.
- 4.5. This work in many ways set the agenda for the work we undertook later in the year. As a response to swift reporting of issues. We were invited to work on two projects of significance to NHS and social care services - Shielding and Care Homes.
- 4.6. The shielding survey was to gain retrospective response to how Croydon Council and the NHS had supported shielders, to inform development of service, if there was a second shielding period. We worked directly with Croydon Council, who sent a link to survey through their email contacts, and we collected the responses. We were able to share initial data within weeks of closing the survey in early October in time for the announcement of the

second period of shielding at the end of October 2020. We raised the need for better communication of support services including mental health to people shielding. This was reflected in the planning of provision of services when shielding was relaunched, which is detailed in the report. See pages 11-12.

- 4.7. The Care Home surveys were aimed to gather experience of care home residents, staff and friends and family to provide insight for further support by commissioners and ensure an improved service. We worked with the Care Homes Strategy and Information Groups and directly with Care Homes to promote this work. We shared our data on improvements that could be made for residents, friends, and family and most significantly staff, which is detailed in the report. We have continued to contribute to these discussions as this moved forward. See page 13-14.
- 4.8. Despite the limitations, we kept our commitment to take on 3 T-level (technical-level) students from Croydon College, not anticipating when we agreed earlier in the year that we would need to close the office. The students chose a subject, devised the methodology, piloted, and ran the survey, collected the results, and prepared an analysis of their findings before completing their time with us in August 2020. The Healthwatch Croydon team led by the Volunteer Lead supported them in their work. We continued to work with them virtually over the course of the next four months, via regular meetings on Zoom, telephone calls and emails. The result was a project on a theme they chose, looking at the mental health impact of COVID-19 which is detailed in the report. See page 27-28.
- 4.9. Sometimes we must wait a while to see the impact of our reports. In 2019, we undertook three pieces of insight work relating to Croydon University Hospital. Our work looked at patient experience of the A&E pathway while they were waiting to be seen (335 patients). We also received surveys from 79 patients just after they had left A&E to find out their experience of being there. In response to questions raised at the Trust Board meeting over signage, we ran a mystery shopping exercise using examples of real letters sent to patients to see how easy it was to navigate the hospital using the information within it. In this report you can see on page 16 how we have influenced change.
- 4.10. Likewise, we back in 2019, we published a report based on a mystery shopper calling every one of the then 58 GP practices, three times over a three-week period and measured their helpfulness, friendliness, and most importantly accuracy. Details of our findings and what has changed as a result are presented on page 18.
- 4.11. We have also been actively working with the One Croydon Alliance providing insight on two key areas: 2019 Health and Care Plan feedback, and the

development of the new Integrated Care Networks (ICN) covering six areas also known as localities. On page 20 you can see the detail of the work we have done particularly with seldom heard and hard to reach people in this area and have made suggestions how this can be better communicated. We continue to have discussions on the development of services in this area and more recently the refresh of the Croydon Health and Care Plan. More details are presented on page 20.

- 4.12. We also focused on seeing the impact on seldom heard groups following up on previous reports on dementia care support and homeless support. This enabled to see the impact of the recommendations we made being turned in to practical actions. You can see more detail on pages 23-24.
- 4.13. In addition to meeting regularly with Croydon Council colleagues and attending the Health and Wellbeing Board, we have attended a wide range of strategic meetings. These include the NHS Health Board (where we sit as an official observer) and the Croydon Health and Social Care Scrutiny Committee as a co-opted non-voting member. We also attend a range of other meetings including the Shadow Health and Care Board, Senior Executive Board, Proactive and Preventative Health Board, the ICN+ Project Development Group, Croydon Health and Social Care Communications Meeting, Care Homes Strategy Group and two Mental Health Programme Boards and Safeguarding Adult Board. We also attend South London and Maudsley Local Healthwatch Meetings and other network meetings to ensure good relationships are built and maintained.
- 4.14. Our information, advice and signposting helpline is taking increasing numbers of calls as more people are becoming aware of what we can offer. The calls we receive are often complex with average call times in Croydon for the past quarter of 31 minutes including research time.

5. LOCAL LEADERSHIP

- 5.1 Our Croydon Local Leadership Board has been working since April 2019. Board members are all closely connected to Croydon and provide strategic direction to the delivery of our services. All board members take an active role and many also represent Healthwatch Croydon on several boards and meetings.

6. WHAT WE ARE WORKING ON 2021-22

- 6.1 We are working on projects concerning access to dentistry, peoples' experiences of using the Urgent and Emergency Care pathway to Croydon University Hospital, and those who used the Personal Independence Coordinators. We also currently running surveys on the impact of Long Covid.

7. SERVICE INTEGRATION

7.1 Healthwatch Croydon works across the health and social care system.

8. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

8.1 This report does not have any financial implications. It is a report of a service delivered and does not contain direct proposals.

8.2 Approved by: Mirella Peters, Head of Finance (Health, Wellbeing & Adults).

9. LEGAL CONSIDERATIONS

9.1 The Head of Litigation and Corporate Law comments on behalf of the Director of Law and Governance that the Health and Wellbeing Board are being requested to note the contents of this report. The Council has a statutory responsibility to commission an independent Healthwatch service for the Borough. All statutory partners who sit on the Health and Wellbeing Board have legal duties to engage and consult on their services.

9.2 Approved by: Sandra Herbert, Head of Litigation and Corporate Law on behalf of the Director of Law and Governance and Deputy Monitoring Officer.

10. EQUALITIES IMPACT

10.1 Healthwatch Croydon has regard to health inequalities throughout its work and will continue to seek out and amplify the voices of people who experience the greatest health inequalities including people with protected characteristics. This is reflected in our prioritisation tool and emerging governance documents attached to this paper.

10.2 Healthwatch Croydon should be encouraged to sign any forthcoming Race/Equality Pledges and standards

10.3 Approved by: Denise McCausland, Equality Programme Manager.

6. DATA PROTECTION IMPLICATIONS

6.1. **WILL THE SUBJECT OF THE REPORT INVOLVE THE PROCESSING OF 'PERSONAL DATA'?**

NO

6.2. **HAS A DATA PROTECTION IMPACT ASSESSMENT (DPIA) BEEN COMPLETED?**

NO

6.3 Approved by: Rachel Flowers on behalf of the Director of Public Health

CONTACT OFFICER:

Gordon Kay, Healthwatch Croydon Manager, gordon.Kay@healthwatchcroydon.co.uk

APPENDICES TO THIS REPORT:

Appendix 1 - On Equal Terms: Healthwatch Croydon Annual Report 2020-21

BACKGROUND DOCUMENTS:

None.