Performance Report

1st June 2021 -31st July 2021

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Chair's report-1st June-31st July 2021

We have continued to attend and contribute to meetings held during June and July. The principal meetings have been the One System Board and associated workshops, children's services, and the development of the Locality Plan.

We had a useful session with the managers of the Trafford School Nursing Service and Health Visiting Service which are currently under review. We had concerns about the consistency of advice given to parents across the board, and this concern was echoed at a subsequent children's workshop. The managers of both services outlined the steps they take to ensure consistency across these two services, and we look forward to seeing the final report which is due at the end of August. Encouragingly, there appeared to be some innovative ideas which were under review.

We were concerned to see that phlebotomy was under review by the Quality, Finance and Performance Committee. We visited seven of the eight blood clinic locations and received the views of over 320 people, from which we produced a report in 2018 (The Phlebruary Report, July 2018). 67% of respondents said that they would prefer to book an appointment with their GP rather than turn up on the day at a clinic and wait. One third of people complained about waiting times many had to wait more than an hour for a blood test with one in 25 having to wait for more than three hours and some people having to return another day. The expense of having to travel was cited as a barrier, as was access for people with disabilities. At that time there were no blood clinics functioning outside working hours, which resulted in people having to take leave or suffer loss of earnings. We made six recommendations, some of which were implemented. We understand that during the pandemic, changes were made to these services, however we have received further complaints and comments about phlebotomy whilst undertaking our recent inequalities study (yet to be published). We wholly recognise the need to make efficiency savings but would question why phlebotomy was selected for this when the majority of respondents quite clearly told us that they wanted to have their bloods taken at their GP surgery. We know that there is a substantial waiting list of patients requiring surgery or diagnostic testing which is likely to increase over the next two or three years. We also understand that data on phlebotomy tests is wanting so there appears to be a lack of certainty about whether hospitals could cope with current and future demand. Following a meeting with the CCG this month we were assured that they will only proceed with this scheme if an Equality Impact Assessment can provide the necessary mitigation and assurance.

Towards the end of July, we met with Sarah Price, Interim Chief Officer of the Greater Manchester Health and Social Care Partnership (GMHSCP); Warren Heppolette, Executive Lead for strategy and system development; and Mark Carroll, the new head of governance. This followed on from the proposal that Trafford put forward about the future role of Healthwatch in the new Integrated Care System (ICS) architecture on behalf of the ten Healthwatch in Greater

Manchester. It was a productive meeting where key actions were agreed over the coming months.

I attended a Healthwatch England webcast. Imelda Redmond, National Director of Healthwatch England, has resigned but will stay on until November for the national conference unless an appointment is made in the interim. I hope to attend a meeting with the senior management of the Partnership and both Imelda and Sir Robert Francis, Healthwatch England Chair, towards the end of September. We were also given a presentation by Public Health England about the creation of ICS.

Prior to the pandemic Greater Manchester Healthwatch (GMHW) received around 100 enquiries regarding NHS dentistry. This figure rose to 650 during lockdown. GMHW have produced a report collating the findings relating to dentistry from all ten local Healthwatch. The release was delayed to allow the Local Dental Committees and the GMHSCP time to issue any statements on the report. Publication was then scheduled for August. This was produced in parallel to a report by Healthwatch England (released May 2021) as part of a wider look into the challenges faced during the pandemic. The findings of this GMHW report were predominately positive in terms of cleanliness of practices and the compassion and professionalism of dental staff. However, these views were overshadowed by the six-fold increase in enquiries from patients unable to access NHS dentistry, their experiences of being in pain and needing treatment, the cost of private dental care, and their feelings when unable to access dental assessments prior to commencement of cancer treatment.

The GMHW report echoes Healthwatch England's recommendations about a rapid and radical reform of the way dentistry is commissioned and provided; using such a review to improve accessibility and affordability; and providing greater clarity about information and looking at dentistry as a means of improving people's general health.

Our Youthwatch volunteers continue their good work. They, too, have commented upon the important of providing of good, clear information as this can lead to a lack of understanding and clarity about which services are being stood down or recommenced. There were many comments about Children and Adolescent Mental Health Services. They felt that children should be seen earlier before problems become entrenched. They felt there was some negativity amongst staff but equally recognised that they were understaffed. However, it was not all doom and gloom! One volunteer had undertaken work experience with the Trafford Council Children's Rights Officer and found this rewarding.

Heather Fairfield

Chair

HEALTHWATCH TRAFFORD

Appendix 1.1- Workplan 2020-21

Project	Time	Detail	Outcome
Inequalities in Health and Care in North Trafford	November 2020 - June 2021	Review existing data to identify current inequalities between North Trafford and the rest of the Borough.	Identification of key barriers to accessing health and care services in the identified area.
		Engage with representative sample of the population in North Trafford.	Identify areas of best/good practice.
		Identify barriers to health and care services.	Produce public report.
		Identify areas of good practice.	Report discussed with commissioners and providers of services.
		raction y areas or good practice.	Work with providers and commissioners on any service redesign or development to facilitate positive change.
Learning disability project	July 2021 -	Local authority are interested in understanding the experience of those accessing Learning Disability support services in the area.	
HW100 - Priorities	April-July 2021	Conducted a HW100 on people's priorities for the coming year, we asked about service areas and how they should be prioritised.	There will be a report and a short summary report.
HW100 - Long Covid	July-August 2021	There will be a HW100 on long covid.	There will be a report, further formats TBD.
Covid 19 Survey 2	Feb-July 2021	A second follow-up survey on continued experiences during the pandemic.	This builds on the original survey and incorporates new questions around the vaccine. Data gathered will be fed back into the Covid Engagement Groups.
<u> </u>	F 1 2001		There will be a report.
GP website review	February 2021 - April 2021	During this time while face to face information is hard to access, our volunteers will undertake a mystery shop of GP Practice websites in Trafford to review the availability and clarity of information available.	We will work with the Local Medical Committee and their members across the five Primary Care Networks in Trafford to address any findings and to champion good practice identified.

Appendix 1.2- Additional activities

Income Generation

Focus of Work:

- Raising the profile of HW Trafford.
- Development of contacts
- Creating a portfolio of work to illustrate available functions that can be commissioned.

Desired Outcomes:

- A portfolio that can be used to pitch for external research and report writing work by the end of the financial year.
- Work commissioned by external providers.

Commissioned Work:

- Personal Health Budgets Information Service (CCG funded): HWT is the first point of contact for enquiries around PHBs. We ensure that enquiries are signposted effectively so that both the public and professionals can access the information they need.
- HW England Work: Smart Survey we are working with HW England on developing a pilot system for local HW across the GM region. There will be 7 GM HW taking part. The work should begin July 2021 and ends August 2021.
- External training: We delivered a web-based training session on 'Designing surveys' and 'Analysing Qualitative Data' for Healthwatch England. As of April, we have signed up to deliver 6x more sessions until the end of the year 2021. The 2x July sessions took place and went well.
- We have agreed to work with the CQC on two composite profiles of local people and how they use and access health services. The work is also to a view on whether people are aware of the CQC itself and what could be done to improve engagement their side. The work will be based on two workshops held with about 5 local people each time.

Core Activities

Communications, Information and Signposting

- Ongoing audit of digital 'How-To' guides with a view to improving our digital and physical resources
- Ongoing website maintenance and development
- Ongoing performance, Impact, and Annual reporting
- Ongoing work to make our information more consistent and accessible.
- Promotion of our surveys and reports to increase engagement and response rates.
- Sharing content concerning stakeholders and partners to support public health campaigns.
- Ongoing signposting and informing via social media.

Engagement

- Ongoing relationship building with HSC partners across Trafford: Social Prescribers, local
 political leaders, MFT Patient Experience team, and Trafford Care Navigators.
- In July we held an engagement session with young people at a local LGBT support group for the first part of our work with the CQC. The session went well.
- We installed a banner displaying our details at a local vaccine clinic, now that we can do more face-to-face engagement this was to promote the office more.
- In support of our Long COVID HW100 survey extra leafleting was done in July in the North Trafford area. We wanted to increase representation by residents in North Trafford in response to our work in this area last year.

Reports Published:

- COVID-19 in Greater Manchester published June 2021
- Annual Report 2020-2021 Published June 2021
- Performance Report April-May 2021 Published July 2021

Volunteering

 Youthwatch completed their mystery shop of the Kooth website. Kooth provide online mental health support for young people and are commissioned by Trafford Council. The Council had invited Youthwatch to undertake the exercise to help them assess the effectiveness of the service. In June they



finished their exercise, assembled a presentation, and then presented the results and recommendations to representatives from Kooth and Trafford Council. They were met with a really positive audience - Kooth will reply in due course with their response to the recommendations.

- Two further Youthwatch volunteers have undertaken Bee Counted young health inspector training with Youth Focus North West and are keen to help the existing trained volunteers on the next batch of inspections to take place from August/September. Bee Counted inspections assess the young people friendliness of a health service.
- In June we held a virtual get-together to celebrate Volunteers' Week with a quiz derived from the Trafford Heritage online resource, and an engaging presentation from NWAS Ambulance Service.
- A Business Support volunteer has pulled together a summary of our GP website review, identifying the good practice applicable to all GP practices which we are sharing with the Local Medical Committee.
- Our website audit is underway with the help of a business support volunteer. This task involves reviewing and editing our How To guides, starting with the crucial how to complain section.
- Our Volunteers' Readers' panel has been kept busy with the HW100 Priorities and North Trafford reports.

- And many of our volunteers helped with the flyering around North Trafford for the Long Covid HW100 survey.
- Specific tasks as per the current year's Volunteer Strategy.
- Recruitment (advertising, interviews, references)
- DBS checks where appropriate
- Inductions; training
- Supervision
- Virtual get-togethers (in accordance with COVID safety measures)
- Bulletins
- Maintenance of documentation
- The volunteer readers' panel continue to assist with the production of our reports, including our publicly available performance reports

Governance

- Schedule regular board meetings, minutes, and action logs
- Produce Annual Report and other performance and monitoring reports
- Maintain contract monitoring and relationships with external stakeholders
- Review organisational handbook and policies/procedures
- Submit all statutory returns
- Ensure subscriptions are maintained
- Continuing review of our GDPR policies and procedures as per the results of an audit to ensure we are compliant with regulations.



Appendix 2-Public engagement

	2020-21 Totals	2021-22 to date	A 24	M 24	L 24	ll. 24	A 24	C 24	0-6-24	N 24	D = - 24	I 22	F-1- 22	W 22
	Totals	to date	Apr-21	May-21	Jun-21		Aug-21	Sep-21	OCT-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Engagement activities -total	23	9	2	1	-	6								
Locality 1	2	4	-	-	-	4								
Locality 2	2	-	-	-	-									
Locality 3	1	1	-	-	-	1								
Locality 4[1]	1	-	-	-	-	-								
Outside Trafford (e.g., Manchester)	-	-		-	-	-								
All Trafford	1	2	-	1	-	1								
Number of public contacts [2]	2,699	677	10	58	-	609								
			F	EEDBA	CK & SU	RVEYS								
Number of feedbacks received via website	71	11	3	2	5	1								
Number of enquiries/feedbacks recorded	81	32	11	8	4	9								
Number of signposting activities	155	80	24	27	15	14								
Healthwatch 100: # of NEW people	191	51	RESET	44	2	5								
Healthwatch 100: # of surveys conducted	2	2	-	1	-	1								
Healthwatch 100: # of survey responses	331	90	-	26	4	60								
				VOI	UNTEE	RS								
Number of new volunteers (total)	10	5	-	-	5	0								

	2020-21	2021-22												
	Totals	to date	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Number of volunteer hours	465	174	40	31	65	36								
Business support	59	31	-	-	16	15								
Engagement/ Outreach	16	28	20	-	-	8								
Research	125	28	3	7	11	7								
Strategic	92	51	12	23	16	-								
Vol management / training	173	34	5	1	22	6								
				W	EBSITE									
Unique page views	162,265	33,420	6,137	6,766	10,176	10,341								
Youthwatch unique page views	4,205	1,314	393	574	322	730								
Reports published														
(Minus performance reports)	8	3	1	1	1	-								
				SOCI	AL MED	IA								
Twitter					I			ı	ı	ı	I			
New followers		26	9	7	1	9								
Impressions		23,641	3,004	3,889	13,300	3,448								
Youthwatch new followers		4	2	-3	2	3								
Youthwatch impressions		1,801	269	123	474	935								
Facebook														
Page likes		231	-	-	-	7								
Facebook posts		13	-	1	6	6								
Reach		N/A	1,698	2,261	299	13,269								
Youthwatch page likes		30	-	-	-	-								
Youthwatch posts		3	-	-	-	3								
Youthwatch reach		N/A	1	-	2	10								
Instagram														
Posts		12	1	2	4	5								

	2020-21 Totals	2021-22 to date	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22
Reach		N/A	137	143	157	164								
Followers		867	-	-	-	11								
Youthwatch posts		3	-	1	1	1								
Youthwatch reach		N/A	-	-	-	42								
Youthwatch followers		195	-	-	-	-								

Appendix 4 - Healthwatch 100

Health and Social Care Service Priority Areas

Status of information	Output	Key findings
Survey closed, report and infographic in draft	Report and infographic	 When asked about priority areas, the most popular response was for all service areas to receive attention. Below this, three priority areas were identified: GPs, community mental health services, and hospital outpatient services. Respondents highlighted a need for more clinical staff and improved access relating to the location of services. The comments we received showed a desire for health and care services to quickly return to pre-pandemic levels of operation. Comments also showed support for improvements to services based on convenience for patients, good quality care, well-funded services, and access for all.

Long COVID

Status of information	Output	Key findings
Survey launched 19/07/2021, open	Report and infographic	• TBD

Appendix 5 - Feedback and Signposting from CIVI CRM

Enquiry detail summary

We received 25 enquiry and signposting cases that were significant in this report.

District nursing

There was one call related to district nursing. The caller was seeking contact details as they could not find working information.

COVID 19

There were three calls related to COVID-19. We were able to signpost them to information about the support they needed.

Mental health

We had one call related to mental health services, however it was for an out of area user, so they were signposted onwards.

Dental

There were 15 calls related to dentistry and this represented most issues we dealt with in this period. One call concerned access to dentistry for an asylum seeker. The rest of the calls related to access for people and families in the local area, with the lack of NHS dental provision being key.

Care home

There were two calls about care homes: one from a worker that wished to highlight a drop in standards, and another related to hospital discharge and the care home funding that would apply.

Care charges

We had a caller wanting to know more about the cap on assets before care charging began. They were signposted on.

Complaints

A caller wished to make a complaint regarding services on behalf of their client.

Hospital in-patient

We received a call describing how a family member's extra needs were not met during a stay in hospital. Ultimately the experience meant a young adult was placed in the wrong ward, of concern to the parent. The young adult was moved back due to parent's request.

Appendix 6 - Website analytics

The top 5 most visited Healthwatch website pages and areas (not including the home page):

Page type	Page	Link
News item	NHS test and trace service & the new 119 telephone number	https://healthwatchtrafford.co.uk/news/nhs- test-and-trace-service-the-new-119-telephone- number/
Coronavirus information page	COVID-19 Vaccination	https://healthwatchtrafford.co.uk/covid-19- vaccination/
Resources and How-To	NHS 111 Call-first Frequently Asked Questions (FAQs)	https://healthwatchtrafford.co.uk/resources/nhs- 111-call-first-faqs/
Resources and How-To	How to Get seen by a doctor	https://healthwatchtrafford.co.uk/how-to/how-to-get-seen-by-a-doctor/
News item	New heart disease drug to be made available for NHS patients	https://healthwatchtrafford.co.uk/news/new- heart-disease-drug-to-be-made-available-for-nhs- patients/

The top 5 most visited Youthwatch website pages and areas (not including the home page):

Page type	Page	Link
Resources and How-To	Your questions: At what age can I visit the doctor alone	http://youthwatchtrafford.co.uk/your- questions/at-what-age-can-i-visit-the-doctor- alone/
Resources and How-To	Mental health	http://youthwatchtrafford.co.uk/health- hub/mental-health/
Resources and How-To	Young parents	http://youthwatchtrafford.co.uk/health-hub/young-parenting/
Resources and How-To	About Youthwatch Trafford	http://youthwatchtrafford.co.uk/about/about-youthwatch-trafford/
Resources and How-To	Healthy Living: Self-harm, drugs, and alcohol	http://youthwatchtrafford.co.uk/health- hub/healthy-living-self-harm-drugs-and- alcohol/