

# **Combining Opinions to Generate Solutions (COGS) Board Meeting**

Community Interest Company no. 8484607

(COGS carries out the statutory duties of **Healthwatch Enfield (EHW)** and all items on this agenda relate to **Healthwatch Enfield**)

## **Agenda**

Meeting no. 32: Thursday, 7<sup>th</sup> November 2019 1:00pm, to be held in public

Location: Community House, 311 Fore Street, Edmonton N9 0PZ

## **MINUTES**

1. Minutes of August's Board meeting
2. Action points from previous meetings

## **PUBLIC QUESTIONS**

3. Any questions from the public about items on the agenda for this meeting

## **ITEMS FOR DECISION**

4. Audited accounts
5. Review of risk register

## **ITEMS FOR DISCUSSION**

6. Future agenda items
7. Young people's project

## **UPDATES AND OTHER ITEMS FOR INFORMATION**

8. Chief Executive's report
9. Resources and risk

10. Stakeholder relationships

11. External factors

12. Statutory duties update

- 12.1. Helping you find the answers
- 12.2. Your views on health and care
- 12.3. Listening to local people's views
- 12.4. Making a difference together

13. Volunteering update

14. AOB

Close

**Meeting no.31: Thursday 1<sup>st</sup> August 2019 at 10am (held in Room 8, Community House, 311, Fore Street, London, N9 0PZ)**

**Healthwatch Enfield (EHW) is run by Combining Opinions to Generate Solutions (COGS)**

**Present:**

Parin Bahl, Chair (PB)

Noelle Skivington (NS)

Deborah Fowler (DF)

Valerie Dinsmore (VD)

**In attendance:**

Patricia Mecinska, Chief Executive (PM)

Michelle Malwah, Information & Signposting Officer (MM)

Nigel Rawcliffe, Member of the public

**MINUTES AND UPDATES**

**Welcome and apologies**

The chair welcomed all present. Apologies were received from Audrey Lucas.

**1. Minutes of the previous meeting**

Agreed as an accurate record.

**2. Action points from previous meeting**

The Board reviewed actions points and agreed:

- Item 1 'To visit the office ensure we remain compliant with GDPR and that all necessary actions have been completed' has been allocated to Valerie as the Board lead
- Item 2 'To continue monitoring Healthwatch Enfield's feedback centre offer and benefits' will be closed and monitored through the project plan as per the suggestion made
- Item 4 'To review all organisational policies' - the new deadline has been agreed by the Board
- Item 7 'To meet with interested Board members to discuss potential further developments around presentation of intelligence data' - the Board agreed to close the action
- Item 9 'To communicate dates for '100 hours volunteering awards' ceremonies where Healthwatch Enfield volunteers are attending' - the Board agreed to close the action

**3. Questions from the public**

There were no questions from the public.

## ITEMS FOR DECISION

### 4. Draft Budget for the Coming Year

Confirmation of funding for the Healthwatch Enfield contract was received from Enfield Council at £180,000 for the financial year 1st April 2019 to 31st March 2020; a reduction of £25,000.

A draft budget reflecting the level of funding was presented and discussed by the Board.

The Board expressed their disappointment in the reduction of funding. Should further reduction in funding be applied for 2020/2021, consideration will need to be given to limit the scope of provision of the contract.

The budget was agreed on the basis that additional funding sources will be explored and pursued. The Board also **agreed to consider the financial position at the Board meeting in October.**

### 5. Review of risk register

The Board welcomed and reviewed the paper.

The Board were advised that no changes to the ratings were proposed.

The Board agreed the risk register

## ITEMS FOR DISCUSSION

### 6. Future Agenda Items

Future agenda items were discussed with the Board. It was **agreed that Patricia and Parin further consider highlight reporting during their supervision meetings.**

## UPDATES AND OTHER ITEMS FOR INFORMATION

### 7. Chief Executive's report

The Board welcomed and reviewed the paper.

Progress against priority areas and KPIs was discussed with the Board. The Board **asked for a briefing around young people work and risks associated with that.**

Revised timescales for working with IWE were considered and agreed by the Board.

### 8. Stakeholder Relationships

The Board welcomed and reviewed the paper.

### 9. External Factors

The Board welcomed and reviewed the paper.

The Board were particularly interested in the CQC's findings in regard to oral health in care homes. It was also noted that the Parliamentary Health and Social care committee were holding an inquiry into dental services nationally.

The Board asked the Chief Executive to thank the volunteer, who prepares the paper, for their input and hard work.

## **10. Statutory Duties Update**

### **10.1 Helping to find the answer**

The Board welcomed and reviewed the paper. Patricia highlighted performance around social media and website presence.

### **10.2 Your views on health and care**

The Board welcomed and reviewed the paper. Patricia noted that the team had exceeded expectations.

**It was agreed, that for the future reports, analysis is not carried out below a set number of items of feedback**

### **10.3 Listening to local people's views**

The Board welcomed and reviewed the paper. Patricia advised the Board that the number of people engaged with excludes work commissioned outside the Healthwatch Enfield contract.

### **10.4 Making a Difference together**

The Board welcomed and reviewed the paper.

## **11. Volunteering Update**

The Board welcomed and reviewed the paper. The progress around recruitment of volunteers was recognised by the Board.

Patricia advised the Board that our progress with recruiting volunteers has been highlighted as best practice by the local commissioners.

## **12. AOB**

**Noelle asked that Michelle follows up the response to the written questions submitted to the Board at the Royal Free London NHS Foundation Trust.**

**CLOSE**

## Agenda item 2 - August 2019 Action points

No.	Meeting date	Agenda item no.	Action	Who	By when	Status	Note
1	24/10/2018	5	To visit the office ensure we remain compliant with GDPR and that all necessary actions have been completed	PM, VD		In progress	
2	24/10/2018	10.2	To consider how information provided to the Board can be communicated to volunteers	MM		In progress	
3	01/03/2019	2	To review all organisational policies	PM	31/03/20	In progress	
4	09/05/2019	5	To add 'Recruitment of Board members' as an agenda item for the Board meeting in October	PB		Completed	
5	01/08/2019	4	To consider the financial position at the Board meeting in October	Board, PM		Ongoing	
6	01/08/2019	6	To further consider highlight reporting during supervision meetings	PM, PB		Ongoing	
7	01/08/2019	7	To prepare a briefing around young people work and risks associated with that	FA		Completed	Please refer to agenda item 7
8	01/08/2019	10.2	To review the paper so that analysis is not carried out below a set number of items of feedback	EF		Completed	
9	01/08/2019	12	To follow up the response to the written questions submitted to the Board at the Royal Free London NHS Foundation Trust	MM		Completed	

PM - Patricia Mecinska, Chief Executive  
PB - Parin Bahl, Chair  
VD - Valerie Dinsmore, Treasurer  
NS - Noelle Skivington, Vice - chair  
AL - Audrey Lucas, Board member

DF - Deborah Fowler, Board member  
FA - Fazilla Amide, Healthwatch Enfield staff member  
EF - Emma Friddin, Healthwatch Enfield staff member  
MM - Michelle Malwah, Healthwatch Enfield staff member

<b>Board Report Title</b>	Risk register review
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda Item 5
<b>Author</b>	Patricia Mecinska
<b>Purpose</b> (for information, decision or consultation)	For discussion
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

Risk Register is Healthwatch Enfield’s principle document facilitating the identification, recording and assessment of risks detailing all significant risks that threaten Healthwatch Enfield.

**KEY**

L - Likelihood =the chance that the risk may occur, with 1= remote and 5= highly probable

I - Impact = the impact or effect that will result if the risk occurs, with 1= insignificant and 5= extreme / catastrophic

Score: Likelihood X Impact

All risks scores within this register have been RAG-rated, as per the following:

Red - major or extreme/catastrophic risks

Amber - moderate or major risks

Blue or green - minor or insignificant risks

Impact	Extreme / catastrophic	5	5	10	15	20	25
	Major	4	4	8	12	16	20
	Moderate	3	3	6	9	12	15
	Minor	2	2	4	6	8	10
	Insignificant	1	1	2	3	4	5
			1	2	3	4	5
			Remote	Unlikely	Possible	Probable	Highly probable
Likelihood							

This report reviews all activities completed within quarter two of the year 2019/2020 against key areas of risk.

As agreed in October 2018, all risks rated as ‘red’ are discussed at each Board meeting to consider re-grading whilst also giving the Board assurance that appropriate activities are undertaken to mitigate the risks.

Key Risk	L	I	Score	Mitigating actions completed within the period	Control measures agreed by the Board
Employment issues					
1.1.1 Loss of staff capacity (illness etc.)	3	4	12	<ul style="list-style-type: none"> <li>Number of activities decreased</li> <li>Prioritisation of tasks and activities has been put in place, is reviewed on a weekly basis and reported to the Board on bi-weekly basis</li> </ul>	<ul style="list-style-type: none"> <li>Staff job descriptions are flexible enough to allow for cover. Healthwatch Enfield fosters a culture in which staff are flexible and willing to pick up additional tasks</li> <li>Numerous staff members have been trained to deliver core functions of Healthwatch Enfield</li> <li>Healthwatch Enfield offers flexible working arrangements to preserve staff wellbeing and to minimise the risk of long-term absence</li> </ul>
1.1.2 Loss of experienced staff	3	4	12	<ul style="list-style-type: none"> <li>None completed; review of the current employment offer to be completed in Q1 of 2019/2020</li> </ul>	<ul style="list-style-type: none"> <li>Healthwatch Enfield to review its current employment offer</li> </ul>
2. Financial risks					
2.1 Dependency on income source	3	4	12	<ul style="list-style-type: none"> <li>A commissioned piece of work secured and delivered</li> </ul>	<ul style="list-style-type: none"> <li>Sources of income are monitored and considered by the Board</li> <li>Healthwatch Enfield is considering diversifying its income streams through tendering and developing products</li> <li>Business Development Strategy is being developed</li> </ul>

Due to the upcoming staffing changes, the Board are asked to:

- increase the risk score for 2.4.2 “Loss of staff capability” to 20 (L=5, I=4)
- increase the risk score for 2.4.3 “Loss of experienced staff to 20 (L=5, I=4)

In order to mitigate the above, in addition to recruitment activities currently underway, it is proposed that Job Descriptions are reviewed and that a succession planning strategy is developed by 31<sup>st</sup> March 2020



<b>Board Report Title</b>	<b>Future agenda items</b>
<b>Governance framework component</b>	N/A
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda Item 6
<b>Author</b>	Patricia Mecinska
<b>Purpose</b> (for information, decision or consultation)	For discussion
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

As discussed with the Board, the following outlines the proposed agenda items for the current financial year.

Any additions to the agenda can be discussed and agreed with the Board at each public meeting.

<b>Agenda items for discussion and information</b>	<b>Agenda items for decision</b>
<p>May</p> <ul style="list-style-type: none"> <li>▪ Risk register review</li> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Healthwatch Enfield budget</li> <li>▪ Project plans for major pieces of work</li> <li>▪ Appointment of an auditor</li> <li>▪ Future agenda items</li> </ul>
<p>August</p> <ul style="list-style-type: none"> <li>▪ Chief Executive’s report</li> <li>▪ Resources and risk</li> <li>▪ Stakeholder relationships</li> <li>▪ External factors</li> <li>▪ Listening to local people’s views</li> <li>▪ Quality of health and care in Enfield</li> <li>▪ Helping you find the answers</li> <li>▪ Making a difference together</li> <li>▪ Volunteering update</li> </ul>	<ul style="list-style-type: none"> <li>▪ Review of risk register</li> <li>▪ Future agenda items</li> </ul>

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<p>November</p> <ul style="list-style-type: none"><li>▪ Risk register review</li><li>▪ Chief Executive’s report</li><li>▪ Resources and risk</li><li>▪ Stakeholder relationships</li><li>▪ External factors</li><li>▪ Listening to local people’s views</li><li>▪ Quality of health and care in Enfield</li><li>▪ Helping you find the answers</li><li>▪ Making a difference together</li><li>▪ Volunteering update</li></ul>	<ul style="list-style-type: none"><li>▪ Audited accounts</li><li>▪ Future agenda items</li></ul>
<p>February</p> <ul style="list-style-type: none"><li>▪ Risk register review</li><li>▪ Chief Executive’s report</li><li>▪ Resources and risk</li><li>▪ Stakeholder relationships</li><li>▪ External factors</li><li>▪ Listening to local people’s views</li><li>▪ Quality of health and care in Enfield</li><li>▪ Helping you find the answers</li><li>▪ Making a difference together</li><li>▪ Volunteering update</li></ul>	<ul style="list-style-type: none"><li>▪ Strategic priorities for the coming year</li><li>▪ Future agenda items</li></ul>

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<b>Board Report Title</b>	Young Healthwatch
<b>Governance framework component</b>	Volunteering
<b>Date and agenda item</b>	7 <sup>th</sup> November 2019, Agenda Item 7
<b>Author</b>	Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For discussion
<b>Key Recommendations</b> (where applicable)	<p>The Board are asked:</p> <ul style="list-style-type: none"> <li>to consider the work conducted to date, the risks and mitigating actions</li> </ul>
<b>Attachments</b>	None

### Background

Healthwatch Enfield continually seeks to ensure we listen to local residents and amplify their voices. We strive to reach all sections of the community and to that end, are looking to set up a “Young Healthwatch” to better represent the views of this particular age group.

### Aim

By the end of March 2020, we will have developed a small, “Young Healthwatch” team of volunteers aged between 16 to 25, to conduct outreach activities to support our organisation to ascertain young peoples’ views

The benefits of establishing ‘Young Healthwatch’ are:

- we ensure we fully represent the views of this age group who often feel isolated and disaffected
- we gain credibility in providing expertise in any co-design work with services for this cohort

To date, we:

- completed research amongst other Healthwatch which established ‘Young Healthwatch’
- reviewed legislation to ensure compliance
- recruited 5 young people who are helping to co-design our approach
- developed and collected parental consent forms for those who are between 16 and 18
- held 2 set up meetings to discuss our ways of working and governance

### Risks:

There are a number of risks associated with the project:

Risk identified	Description of Risk	Mitigation of Risk
Losing “Leadership” momentum	With the lead officer leaving, extra effort will be required to maintain the momentum developed to date	Operations Co-ordinator has been working alongside the lead officer and will take on the workload on an interim basis

Maintaining the team's focus	Need to ensure we are continually motivating and keeping the team's focus on the project	A schedule of meetings has been established, including "virtual" catch-ups on a bi-weekly basis to ensure the team are regularly connecting and developing how they work together
Resources	We do not have any additional funding	We'll be exploring the options carefully to ensure much of, for example, the initial materials/leaflets etc. to advertise and engage, can be funded through our existing budget. As we develop further, we may need to consider alternative funding opportunities
Safeguarding	In working with young people we need to ensure they, as well as our staff are not at risk	As part of policy development are proposing that: <ul style="list-style-type: none"> <li>• Parental consent is obtained for those aged 16 -18</li> <li>• All meetings, events and activities involve at least 1 member of Healthwatch Enfield team</li> <li>• Attendance of 2 members of Healthwatch Enfield teams is required for one-to-one interactions with young people</li> <li>• Staff do not offer lifts to any of the young volunteers</li> <li>• Team attend children's safeguarding training and other training as appropriate</li> </ul>
Branding	The team consider Young Healthwatch requires a different look and feel to our current Healthwatch Enfield branding	Remaining within the Healthwatch England branding guidelines, we are currently working on a brand appropriate flyer & logo

### Recommendation

The Board are asked to consider the work conducted to date, the risks and mitigating actions

<b>Board Report Title</b>	Chief Executive's report
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda Item 8
<b>Author</b>	Patricia Mecinska
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

### Reports

In quarter two of 2019/2020 we published one report, 'What local people think about the proposals to reduce the opening times of the Urgent Care Centre at Chase Farm Hospital'. The [report](#) outlines our findings, following engagement with 372 local residents, in response to the proposal to reduce the opening hours of the Urgent Care Centre at Chase Farm from 10:00pm to 9:00pm.

### Healthwatch Enfield strategy implementation progress

Healthwatch Enfield's team members continue to work to deliver Key Performance Indicators (KPIs) of the overall Healthwatch Enfield's strategy alongside undertaking activities associated with priority areas of work. Performance against each area is outlined below:

#### (1) Involve

Key Performance Indicator	Status
12 hospital pop-ups attended	Not achieved as 11 pop-ups were attended
3 community hub pop-ups attended	Exceeded with 5 pop-ups attended
1 Civic Centre pop-up attended	Achieved
Middlesex University Fresher's Fair attended	Achieved
Enfield College Fresher's Fair attended	Achieved
6 new volunteers recruited	Exceeded with 12 volunteers recruited

#### (2) Inform

None of the Key Performance Indicators were scheduled for completion in quarter one of the current year.

#### (3) Improve

None of the Key Performance Indicators were scheduled for completion in quarter one of the current year however progress has been made against priority areas of work that seek to improve local health and care services

### Priority areas of work

As suggested by local people and agreed by the Board, Healthwatch Enfield's key areas of work include:

Priorities	Follow-up work
Working with young people	Access to appointments within Primary Care

Increasing the utilisation of the feedback centre	Supporting the development of a Quality Assurance framework for Adult Social Care
	Working with NCL STP

In quarter two, resources were committed to carrying out work against:

(1) Working with young people

Within the reporting period resources were committed to:

- complete research amongst other Healthwatch which established ‘Young Healthwatch’
- review legislation to ensure compliance
- recruit 5 young people who are helping to co-design our approach
- develop and collect parental consent forms for those who are between 16 and 18
- hold 2 set up meetings to discuss our ways of working and governance

Progress against the project plan is outlined below:

	Task	Assigned To	Start	End	Dur	%	2019											
							May	Jun	Jul	Aug	Sep	Oct	Nov	Dec				
	Working with young people		31/5/19	20/12/19	145	36												
1	To map all services working with young people aged 16-25 in Enfield	MM, YS	3/6/19	28/6/19	20	80												
2	To draft Healthwatch Enfields' offer to organisations working with young people aged 16-25 in Enfield	FA	12/6/19	28/6/19	13	80												
3	To establish a Young Healthwatch function		3/6/19	16/12/19	140	63												
3.1	To review current offer and opportunities available in the borough that give local young people an opportunity to have their voices heard	MM, YS	3/6/19	28/6/19	20	80												
3.2	To review approaches adopted by other Healthwatch organisation to work with young people aged 16-25	FA, YS	28/6/19	19/7/19	16	100												
3.3	To engage with organisations working with young people to discuss our offer and involve them in co-design	FA, YS	22/7/19	18/10/19	64	70												
3.4	To engage with young people to co-design the Young Healthwatch function	FA, YS	14/10/19	12/12/19	44	30												
3.5	Young Healthwatch function is in place		16/12/19	16/12/19														
4	To undertake work with young people using mental health services		3/6/19	20/12/19	144													
4.1	To map existing evidence base	EF	3/6/19	28/6/19	20	0												
4.2	To engage with NHS Enfield Clinical Commissioning Group and Barnet Enfield and Haringey Mental Health NHS Trust to understand their drivers and initiatives currently in development	PM, FA	1/7/19	31/7/19	23	0												
4.3	To engage with young people to inform developments or quality improvement initiatives	FA, YS	19/8/19	20/12/19	89	0												
5	To undertake work with young people who have Learning Disabilities, Autism, have special educational needs or are looked after		31/5/19	4/7/19	25	34												
5.1	To review findings of our engagement undertaken as part of Healthwatch England's commission on the NHS Long Term Plan	EF, FA	31/5/19	21/6/19	16	30												
5.2	To agree next steps and potential interventions that could deliver outcomes	PM, FA, the Board	4/7/19	4/7/19	1	100												

With the upcoming staffing changes, the Board are asked to consider and agree revised timescales for delivery against the priority area:

	Task	Assigned To	Start	End	Dur	%	2019			2020		
							Q2	Q3	Q4	Q1	Q2	Q3
	Working with young people		3/6/19	30/3/20	212	49						
1	To map all services working with young people aged 16-25 in Enfield	MM, YS	3/6/19	28/6/19	20	80						
2	To draft Healthwatch Enfields' offer to organisations working with young people aged 16-25 in Enfield and develop a small Young Healthwatch function		3/6/19	31/12/19	149	80						
2.1	To review current offer and opportunities available in the borough that give local young people an opportunity to have their voices heard	MM, YS	3/6/19	28/6/19	20	100						
2.2	To review approaches adopted by other Healthwatch organisation to work with young people aged 16-25	FA, YS, CF	28/6/19	15/8/19	35	100						
2.3	To engage with organisations working with young people with LD to discuss our offer and involve them in co-design	FA, YS	22/7/19	19/11/19	86	80						
2.4	To engage with young people to co-design the Young Healthwatch function	FA, YS, CF	14/10/19	31/12/19	55	70						
2.5	Young Healthwatch function is in place		14/10/19	31/12/19	55	70						
3	Establish priorities for 2020	Engagement Lead	26/11/19	30/3/20	87							
3.1	Co-design methodology for identifying young peoples priorities in Health and Social Care	YP,CF, EF	26/11/19	31/12/19	24	0						
3.2	Engage with young people to inform development or quality improvement initiatives	Engagement Lead	4/1/20	28/2/20	40	0						
3.3	Analysis of findings	EF	1/3/20	15/3/20	10							
3.4	Agree next steps and set priorities	FA, Engagement Lead	15/3/20	30/3/20	11							
4	To undertake work with organisations and young people who have Learning Disabilities, Autism, have special educational needs or are looked after	FA, Engagement Lead	15/11/19	15/12/19	21	30						
5	To review findings of our engagement undertaken as part of Healthwatch England's commission on the NHS Long Term Plan with the CCG		16/3/20	30/3/20	11							
5.1	To agree next steps and potential interventions that could deliver outcomes		16/3/20	30/3/20	11							

It is also proposed that focus on mental health services is reviewed once further engagement with young people to inform priority areas of work for 2020/2021.

## (2) Increasing the utilisation of the feedback centre

Analysis of data collected from 111 local people to understand local people's perceptions of review websites has been completed.

The newly recruited Operations Coordinator has been allocated the work on the feedback centre and has completed work to:

- understand opportunities and limitations of the feedback centre based on road map as existing with the EKKO Group (the company providing us the platform)
- learn from other Healthwatch using the feedback centre to inform our approach
- review the data analysis and inform our approaches to increasing utilisation

We have re-drafted communication materials, based on behavioural insights, and are in the process of designing these for roll out in quarter three of 2019/2020 to monitor impact throughout quarter four of the current financial year.

Progress against the project plan is outlined below alongside proposed changes to timing:

	Task	Assigned To	Start	End	Dur	%	2019				2020		
							Q1	Q2	Q3	Q4	Q1	Q2	Q3
	Increasing utilisation of the Feedback Centre		15/3/19	15/3/20	253	26							
1	To involve local people in conversations about the Feedback Centre		9/5/19	15/3/20	217	45							
1.1	To develop a survey that enables us to capture local people's views on the Feedback Centre and starts the process of co-design	EF, PM, DF	9/5/19	23/5/19	11	100							
1.2	To engage with local people through online channels and face-to-face engagement	EF, YS	3/6/19	20/6/19	14	100							
1.3	To review findings and use these to develop some proposed solutions	EF, PM, FA, CF	20/6/19	30/11/19	116	70							
1.4	To test the solutions with local people	FA, CF	1/11/19	15/3/20	93	0							
2	To involve other stakeholders in conversations about the Feedback Centre	FA, CF	1/12/19	15/3/20	72	0							
3	To deploy co-designed solutions	FA, CF	1/12/19	15/3/20	72	0							
4	To assess the effectiveness of co-designed solutions on the uptake of the Feedback Centre	FA, CF	15/3/19	1/4/19	12	0							



**(3) Supporting the development of a Quality Assurance framework for Adult Social Care**  
**As agreed with the Board, the progress against the revised timescales is outlined below:**

	Task	Assigned To	Start	End	Dur	%	2019												2020			
							May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr				
	Working with Independence and Wellbeing Enfield		9/5/19	31/3/20	229	60																
1	To develop an evaluation framework	EF	9/5/19	21/6/19	31	90																
2	To enroll a service to involve service users in co-designing solutions to recommendations made		9/5/19	17/10/19	114	93																
2.1	To articulate Healthwatch Enfield offer	FA	9/5/19	24/5/19	12	60																
2.2	To arrange a meeting with the leadership of Independence and Wellbeing Enfield	FA	22/7/19	27/9/19	49	100																
2.3	To disseminate the 'offer' to all services and arrange follow-up meetings	FA	27/9/19	17/10/19	15	95																
2.4	Participating service is recruited		17/10/19	17/10/19																		
3	To work with the service to involve service users in co-designing solutions to recommendations made		17/10/19	2/1/20	53	14																
3.1	To review findings and co-design a way forward	EF, FA	17/10/19	6/11/19	15	50																
3.2	To deploy the co-designed approach	FA, YS	6/11/19	2/1/20	39																	
4	To review the effectiveness of Healthwatch Enfield's intervention		10/2/20	31/3/20	37																	
4.1	To engage with service users of the service	FA, YS	10/2/20	6/3/20	20																	
4.2	To review findings when compared to existing baseline	EF	9/3/20	20/3/20	10																	
4.3	To prepare an evaluation report	EF, FA	20/3/20	31/3/20	8																	

At this stage, the pilot service has not been identified but we have been in conversations with the provider and agreed the deadline of November, 14<sup>th</sup> 2019. Progress against this will be monitored through the regular meetings with the Chair and options are in place if co-design stage does not commence.

**(4) Access to appointments within Primary Care**

With the upcoming staffing changes, the Board are asked to consider and agree revised timescales for delivery against the priority area:

	Task	Assigned To	Start	End	Dur	%	2019												2020							
							May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug				
	Working with primary care		9/5/19	8/8/20	318	43																				
1	To publish and disseminate Healthwatch Enfield's report on local people's experiences of booking GP appointments to individual practices	EF	9/5/19	31/10/19	124	100																				
2	To enroll up to 5 GP practices to improve patients' experiences of booking a GP appointment and articulate Healthwatch Enfield's offer	EF, FA	1/12/19	22/1/20	35	60																				
2.1	Disseminate the offer to participating practices and arrange follow up meetings	EF, FA	1/12/19	22/1/20	35	60																				
3	Redevelop baseline measures for up to 5 GP practices	EF	1/12/19	15/12/19	10																					
4	Analysis of baseline measures and development of info graphic	EF	6/12/19	15/1/20	26																					
5	Work with pilot group of GP to improve patient experiences of booking a GP appointment	EF, FA	16/1/20	31/3/20	54																					
5.1	To review findings and co-design a way forward with each practice	EF, FA	16/1/20	31/3/20	54																					
5.2	To deploy the co-designed approach	FA	16/1/20	31/3/20	54																					
6	Develop an evaluation framework	EF	1/4/20	15/4/20	9																					
7	Review the effectiveness of Healthwatch Enfield intervention	EF, FA	17/4/20	17/6/20	42																					
7.1	Engage with patients at each of the participating practices	EF, FA	17/4/20	17/6/20	42																					
8	Review findings compared to existing baseline	EF	18/6/20	7/7/20	14																					
9	Prepare evaluation report	EF	8/7/20	8/8/20	23																					

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**Escalations to Healthwatch England**

In quarter two we did not escalate any issues to Healthwatch England.

**Escalations to CQC**

In quarter two we did escalate safeguarding incidents to the Care Quality Commission.

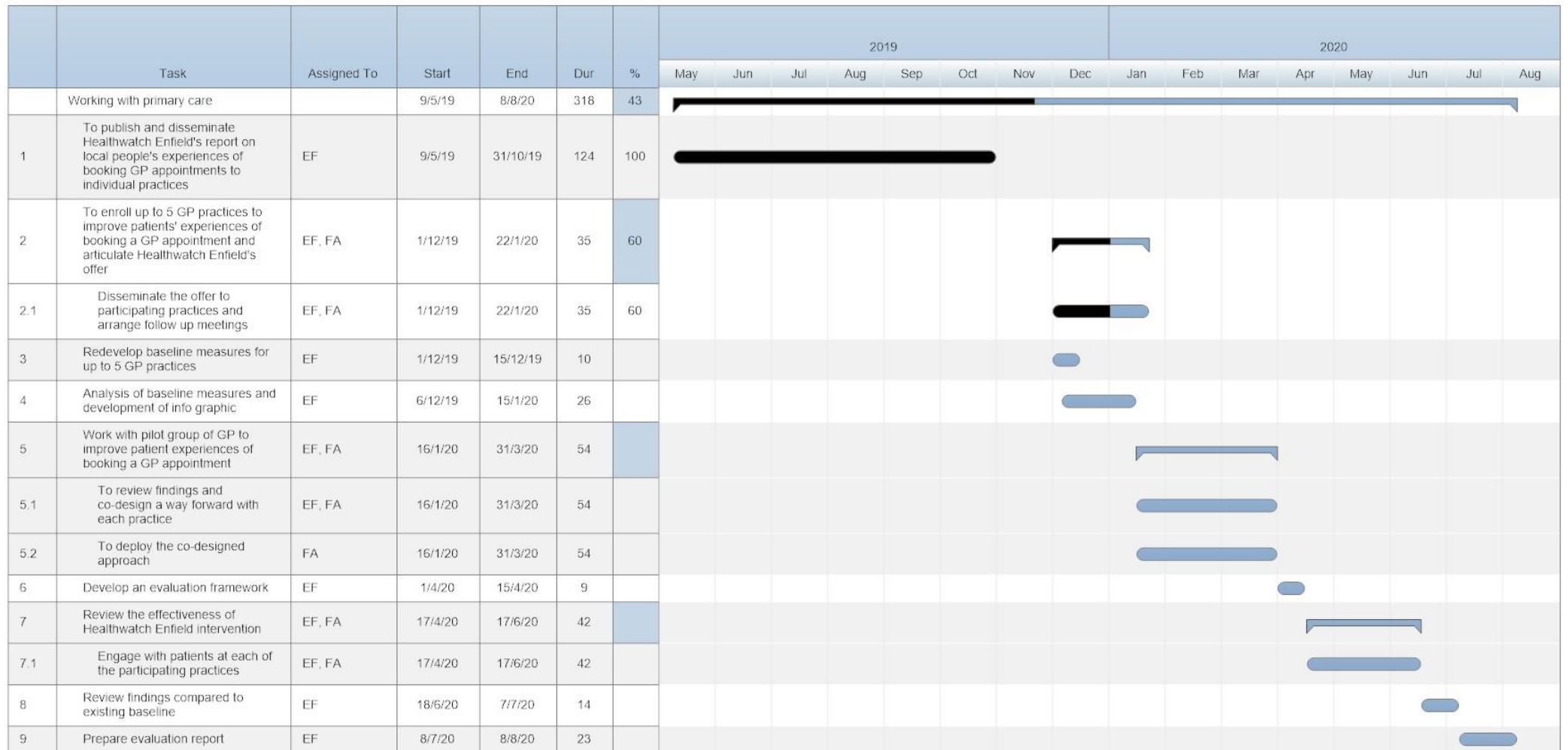


Figure 1. Proposed timescales for GP access priority area of work

	Task	Assigned To	Start	End	Dur	%	2019							2020						
							May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr		
	Working with Independence and Wellbeing Enfield		9/5/19	31/3/20	229	60														
1	To develop an evaluation framework	EF	9/5/19	21/6/19	31	90														
2	To enroll a service to involve service users in co-designing solutions to recommendations made		9/5/19	17/10/19	114	93														
2.1	To articulate Healthwatch Enfield offer	FA	9/5/19	24/5/19	12	60														
2.2	To arrange a meeting with the leadership of Independence and Wellbeing Enfield	FA	22/7/19	27/9/19	49	100														
2.3	To disseminate the 'offer' to all services and arrange follow-up meetings	FA	27/9/19	17/10/19	15	95														
2.4	Participating service is recruited		17/10/19	17/10/19																
3	To work with the service to involve service users in co-designing solutions to recommendations made		17/10/19	2/1/20	53	14														
3.1	To review findings and co-design a way forward	EF, FA	17/10/19	6/11/19	15	50														
3.2	To deploy the co-designed approach	FA, YS	6/11/19	2/1/20	39															
4	To review the effectiveness of Healthwatch Enfield's intervention		10/2/20	31/3/20	37															
4.1	To engage with service users of the service	FA, YS	10/2/20	6/3/20	20															
4.2	To review findings when compared to existing baseline	EF	9/3/20	20/3/20	10															
4.3	To prepare an evaluation report	EF, FA	20/3/20	31/3/20	8															

Figure 2. Progress against the project plan for developing a QA framework

<b>Board Report Title</b>	Finance and staffing report
<b>Governance framework component</b>	Resources and risk
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda item 9
<b>Author</b>	Patricia Mecinska in consultation with Valerie Dinsmore
<b>Purpose</b> (for information, decision or consultation)	Information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

### Staffing

Successful recruitment for the post of an Operations Coordinator was completed and the new post holder commenced their employment on 12<sup>th</sup> August 2019.

### Finance

Healthwatch Enfield's income and expenditure for the period 1<sup>st</sup> April 2019 - 30<sup>th</sup> September 2019 is in line with the anticipated spending trends for majority of expenditure lines; any significant variations have been addressed in the notes (Figure 1).

Cashflow forecast (Figure 2) anticipates year end position of £10,233.36 deficit against the budgeted deficit of £18,009.77. This is mainly due to staffing changes and savings made on an audit and payroll costs.

Figure 1. YTD budget vs actual figures (below)

	<u>Apr - Sep 19</u>	<u>Budget</u>	<u>£ Over Budget</u>	<u>% of Budget</u>	<u>Notes</u>
<b>Income</b>					
Contracts	8,400.00	8,400.00	0.00	100.0%	
Underspend carried forward	3,000.00				
Grants	<u>90,000.00</u>	<u>90,000.00</u>	<u>0.00</u>	<u>100.0%</u>	
<b>Total Income</b>	101,400.00	98,400.00	3,000.00	103.05%	As per board agreement underspend from previous year is carried forward
<b>Expense</b>					
Accommodation	2,196.88	2,372.90	-176.02	92.58%	
<b>Co-Design Workshops</b>					
Catering	0.00	0.00	0.00	0.0%	
Resources	0.00	0.00	0.00	0.0%	
Venue Hire	0.00	0.00	0.00	0.0%	
Co-Design Workshops - Other	<u>1,000.00</u>				Part of delivery costs for Long Term Plan, commissioned by Healthwatch England
<b>Total Co-Design Workshops</b>	1,000.00	0.00	1,000.00	100.0%	
<b>Communications &amp; Marketing</b>					
Advertising	120.00	750.00	-630.00	16.0%	delay on developing promotional materials following engagement with local people
Leaflets & Posters	<u>329.75</u>	<u>750.00</u>	<u>-420.25</u>	<u>43.97%</u>	delay on developing promotional materials following engagement with local people
<b>Total Communications &amp; Marketing</b>	449.75	1,500.00	-1,050.25	29.98%	
<b>Community Engagement &amp; Outreach</b>					

<b>Booking Fees</b>	490.00	500.00	-10.00	98.0%	
<b>BSL Interpreters</b>	0.00	0.00	0.00	0.0%	
<b>Resources</b>	<u>520.80</u>	<u>750.00</u>	<u>-229.20</u>	<u>69.44%</u>	delay on developing promotional materials following engagement with local people
<b>Total Community Engagement &amp; Outreach</b>	1,010.80	1,250.00	-239.20	80.86%	
<b>Governance Costs</b>	4,319.23	5,135.40	-816.17	84.11%	underspend due to tax code changes
<b>IT</b>					
<b>software</b>	387.35	437.88	-50.53	88.46%	underspend due to reduction in number of subscription
<b>Support</b>	<u>532.50</u>	<u>637.50</u>	<u>-105.00</u>	<u>83.53%</u>	awaiting Sept invoice
<b>Total IT</b>	919.85	1,075.38	-155.53	85.54%	
<b>Office Costs</b>					
<b>Internet &amp; Hosting</b>	5,222.39	5,255.96	-33.57	99.36%	
<b>Photocopying</b>	35.49	60.00	-24.51	59.15%	savings made by improving paperless policy
<b>Stationery</b>	247.79	249.96	-2.17	99.13%	
<b>Telephone-Mobile</b>	<u>423.98</u>	<u>495.78</u>	<u>-71.80</u>	<u>85.52%</u>	underspend as Healthwatch is no longer being charged for office calls
<b>Total Office Costs</b>	5,929.65	6,061.70	-132.05	97.82%	
<b>Professional Fees</b>					
<b>Accounting</b>	0.00	0.00	0.00	0.0%	
<b>Insurance</b>	832.35	1,062.50	-230.15	78.34%	savings made through negotiating better insurance deal
<b>Payroll</b>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>0.0%</u>	
<b>Total Professional Fees</b>	832.35	1,062.50	-230.15	78.34%	
<b>Staff Costs</b>					
<b>Pension Contributions</b>	5,875.24	6,261.00	-385.76	93.84%	
<b>Salaries &amp; On-costs</b>	<u>66,990.15</u>	<u>70,749.30</u>	<u>-3,759.15</u>	<u>94.69%</u>	

<b>Total Staff Costs</b>	72,865.39	77,010.30	-4,144.91	94.62%	
<b>Staffing Costs</b>					
<b>Subsistence</b>	161.26	249.96	-88.70	64.51%	savings made through efficiencies
<b>Training</b>	327.00	350.00	-23.00	93.43%	
<b>Travel</b>	<u>722.95</u>	<u>750.00</u>	<u>-27.05</u>	<u>96.39%</u>	
<b>Total Staffing Costs</b>	<u>1,211.21</u>	<u>1,349.96</u>	<u>-138.75</u>	<u>89.72%</u>	
<b>Subscriptions</b>	1,200.00	1,200.00	0.00	100.0%	
<b>Volunteer Costs</b>					
<b>Badges</b>	10.80	10.80	0.00	100.0%	
<b>Subsistence</b>	663.03	700.00	-36.97	94.72%	
<b>Training</b>	210.00	220.00	-10.00	95.46%	
<b>Travel</b>	<u>145.49</u>	<u>150.00</u>	<u>-4.51</u>	<u>96.99%</u>	
<b>Total Volunteer Costs</b>	<u>1,029.32</u>	<u>1,080.80</u>	<u>-51.48</u>	<u>95.24%</u>	
<b>Total Expense</b>	<u>92,964.43</u>	<u>99,098.94</u>	<u>-6,134.51</u>	<u>93.81%</u>	
<b>Surplus for the year</b>	<u><u>8,435.57</u></u>	<u><u>-698.94</u></u>	<u><u>9,134.51</u></u>	<u><u>-1,206.91%</u></u>	



	Apr-Sep 19	October	November	December	January	February	March	Total	Budget	Difference	NOTES
<b>Income</b>											
Contracts	8,400.00	0.00	0.00	0.00	0.00	0.00	0.00	8,400.00	8,400.00	0.00	
Underspend carried forward	3,000.00	0.00	0.00	0.00	0.00	0.00	0.00	3,000.00		3,000.00	
Grants	90,000.00	0.00	0.00	45,000.00	0.00	0.00	45,000.00	180,000.00	180,000.00	0.00	
<b>Total Income</b>	<b>101,400.00</b>	<b>0.00</b>	<b>0.00</b>	<b>45,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>45,000.00</b>	<b>191,400.00</b>	<b>188,400.00</b>	<b>3,000.00</b>	
<b>Expense</b>											
Accommodation	2,196.88	1,150.44	100.00	49.36	1,150.44	49.36	49.36	4,745.83	4,745.83	-0.00	
Co-Design Workshops											
Catering	0.00	0.00	0.00	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
Resources	0.00	0.00	0.00	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
Venue Hire	0.00	0.00	0.00	0.00	0.00	0.00	200.00	200.00	200.00	0.00	
<b>Total Co-Design Workshops</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,200.00</b>	<b>1,200.00</b>	<b>1,200.00</b>	<b>0.00</b>	
Communications & Marketing											
Advertising	120.00	0.00	0.00	380.00	500.00	500.00	0.00	1,500.00	1,500.00	0.00	
Leaflets & Posters	329.75	0.00	51.20	1,119.05	0.00	0.00	0.00	1,500.00	1,500.00	0.00	
<b>Total Communications &amp; Marketing</b>	<b>449.75</b>	<b>0.00</b>	<b>51.20</b>	<b>1,499.05</b>	<b>500.00</b>	<b>500.00</b>	<b>0.00</b>	<b>3,000.00</b>	<b>3,000.00</b>	<b>0.00</b>	
Community Engagement & Outreach											
Booking Fees	490.00	0.00	0.00	0.00	0.00	0.00	0.00	490.00	500.00	-10.00	anticipated underspend
BSL Interpreters	0.00	0.00	0.00	0.00	0.00	0.00	500.00	500.00	500.00	0.00	
Resources	520.80	0.00	0.00	800.00	0.00	179.20	0.00	1,500.00	1,500.00	0.00	
<b>Total Community Engagement &amp; Outreach</b>	<b>1,010.80</b>	<b>0.00</b>	<b>0.00</b>	<b>800.00</b>	<b>0.00</b>	<b>179.20</b>	<b>500.00</b>	<b>2,490.00</b>	<b>2,500.00</b>	<b>-10.00</b>	
Governance Costs	4,319.23	719.87	719.87	719.87	719.87	719.87	719.87	8,638.46	10,270.83	-1,632.37	anticipated underspend due to changes in tax codes
IT											
software	423.14	94.16	94.16	94.16	94.16	94.16	94.16	988.10	875.84	112.26	anticipated overspend for board and staff changes and doodle poll
Support	532.50	106.50	106.50	106.50	106.50	106.50	106.50	1,171.50	1,275.00	-103.50	anticipated underspend
<b>Total IT</b>	<b>955.64</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>2,159.60</b>	<b>2,150.84</b>	<b>8.76</b>	
Office Costs											
Internet & Hosting	5,222.39	50.40	50.40	50.40	50.40	50.40	50.40	5,524.79	5,760.00	-235.21	anticipated underspend as domain costs remain unchanged
Photocopying	35.49	14.00	14.00	14.00	14.00	14.00	14.51	120.00	120.00	0.00	
Stationery	247.79	42.04	42.04	42.04	42.04	42.04	42.04	500.00	500.00	0.00	
Telephone-Mobile	423.98	46.33	46.33	46.33	46.33	46.33	46.33	701.96	991.67	-289.71	anticipated underspend due to no longer being charged for telephone
<b>Total Office Costs</b>	<b>5,929.65</b>	<b>152.77</b>	<b>152.77</b>	<b>152.77</b>	<b>152.77</b>	<b>152.77</b>	<b>153.28</b>	<b>6,846.75</b>	<b>7,371.67</b>	<b>-524.92</b>	
Professional Fees											
Accounting	0.00	0.00	0.00	0.00	1,416.67	0.00	0.00	1,416.67	1,416.67	0.00	
Insurance	832.35	0.00	0.00	0.00	0.00	0.00	0.00	832.35	1,062.50	-230.15	negotiated a better insurance deal
Legal	0.00	0.00	0.00	0.00	212.50	0.00	0.00	212.50	212.50	0.00	
Payroll	0.00	0.00	0.00	0.00	350.00	0.00	0.00	350.00	708.33	-358.33	anticipated underspend as payroll costs negotiated at same rate
Other	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	
<b>Total Professional Fees</b>	<b>832.35</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>1,979.17</b>	<b>0.00</b>	<b>0.00</b>	<b>2,811.52</b>	<b>3,400.00</b>	<b>-588.48</b>	
Staff Costs											
Pension Contributions	5,875.24	1,043.50	1,065.39	1,065.39	1,065.39	1,065.39	1,065.39	12,245.68	12,522.00	-276.32	
Salaries & Oncosts	66,990.15	12,038.89	12,038.89	12,038.89	12,038.89	12,038.89	12,038.89	139,223.52	141,498.60	-2,275.08	anticipated underspend due to secondment and staffing changes
<b>Total Staff Costs</b>	<b>72,865.39</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>151,469.20</b>	<b>154,020.60</b>	<b>-2,551.40</b>	
Staffing Costs											
Recruitment	0.00	522.00	0.00	0.00	0.00	0.00	0.00	522.00	0.00	522.00	confirmed overspend for staffing changes
Subsistence	161.26	56.46	56.46	56.46	56.46	56.46	56.46	500.00	500.00	0.00	
Training	327.00	28.83	28.83	28.83	28.83	28.83	28.83	500.00	500.00	0.00	
Travel	722.95	129.51	129.51	129.51	129.51	129.51	129.51	1,500.00	1,500.00	0.00	
<b>Total Staffing Costs</b>	<b>1,211.21</b>	<b>736.80</b>	<b>214.80</b>	<b>214.80</b>	<b>214.80</b>	<b>214.80</b>	<b>214.80</b>	<b>3,022.00</b>	<b>2,500.00</b>	<b>522.00</b>	
Subscriptions	1,200.00	0.00	0.00	0.00	0.00	0.00	0.00	1,200.00	1,200.00	0.00	
Volunteer Costs											
Subsistence	663.03	222.83	222.83	222.83	222.83	222.83	222.83	2,000.00	2,000.00	0.00	
Training	210.00	90.00	90.00	90.00	90.00	90.00	90.00	750.00	750.00	0.00	
Travel	145.49	309.09	309.09	309.09	309.09	309.09	309.09	2,000.00	2,000.00	0.00	
Badges	10.80	0.00	0.00	289.20	0.00	0.00	0.00	300.00	300.00	0.00	
<b>Total Volunteer Costs</b>	<b>1,029.32</b>	<b>621.91</b>	<b>621.91</b>	<b>911.11</b>	<b>621.91</b>	<b>621.91</b>	<b>621.91</b>	<b>5,050.00</b>	<b>5,050.00</b>	<b>0.00</b>	
Contract management fee	0.00	0.00	0.00	0.00	0.00	0.00	9,000.00	9,000.00	9,000.00	0.00	
<b>Total Expense</b>	<b>92,000.22</b>	<b>3,381.79</b>	<b>1,860.55</b>	<b>4,346.95</b>	<b>5,338.96</b>	<b>2,437.90</b>	<b>12,459.21</b>	<b>201,633.36</b>	<b>206,409.77</b>	<b>-4,776.41</b>	
<b>Surplus for the year</b>	<b>9,399.78</b>	<b>-3,381.79</b>	<b>-1,860.55</b>	<b>40,653.05</b>	<b>-5,338.96</b>	<b>-2,437.90</b>	<b>32,540.79</b>	<b>-10,233.36</b>	<b>-18,009.77</b>	<b>7,776.41</b>	

Figure 2. Cashflow forecast

Board Report Title	Relationships with stakeholders
Governance framework component	Working with stakeholders
Date and Agenda Item	7 <sup>th</sup> November 2019, Agenda item 10
Author	Patricia Mecinska and Parin Bahl
Purpose (for information, decision or consultation)	Information
Key Recommendations (where applicable)	N/A
Attachments	N/A

## Local relationships

### **Barnet Enfield and Haringey Mental Health NHS Trust**

We continue our involvement with the Board at Barnet Enfield and Haringey Mental Health NHS Trust.

For 2019/2020, we established a schedule of regular pop-ups at the mental health units at Chase Farm hospital site. This aligns with our key priority areas and was put in place to diversify feedback sources, enhancing the evidence base.

On 25<sup>th</sup> September 2019, the Care Quality Commission announced that the Trust has been rated Good overall. Previously it was rated Requires Improvement. The trust was rated Good for being effective, responsive, caring and well-led. It was rated Requires Improvement for being safe, following the inspection in June and July 2019.

### **Chase Farm Hospital, part of Royal Free London NHS Foundation Trust**

We continue our involvement with the Board at the Royal Free London NHS Foundation Trust alongside a regular schedule of visits to Chase Farm hospital.

### **North Middlesex University Hospital NHS Trust**

We continue our involvement with the Patient Experience Group, Clinical Quality and Patient Safety Committee and Patient Experience Strategy Development sub-group.

Parin, Noelle and I continue to regularly meet with Maria Kane, Chief Executive at North Middlesex University Hospital NHS Trust.

Fazilla was invited to support the Trust with judging entries for the ‘Staff Awards’ in ‘Improving Patient Experience’ category whilst I received a nomination for an award in the ‘Working within our community category’.

### **NHS Enfield Clinical Commissioning Group (CCG)**

We continue our involvement with the Primary Care Transformation sub-group, Community Education Providers Network, Voluntary Sector Stakeholder Reference

Group, Patient and Public Involvement Committee and, through Parin, the Governing Body.

### **London Borough of Enfield**

We continue our involvement with the Dignity in Care panel, a sub-section of the Quality Checkers programme, Older People's Partnership Board, Mental Health Partnership Board and Health Scrutiny. Parin continues to attend the Safeguarding Adults Board and the Health and Wellbeing Board.

We have been invited to join the Voluntary Sector Prevention and Early Intervention Steering Group to bring the voices of local communities as service developments are considered.

I was invited to present Healthwatch Enfield's evidence base at the meeting of Enfield's Poverty and Inequality Commission.

### **Engaging with local voluntary and community sector organisations**

We continue to maintain relationships with our voluntary and community sector partners. Throughout the period, we attended meetings with Enfield Vision, Edmonton Diabetes Support Group and Maternity Voices partnership.

### **Report on Meetings attended by Healthwatch Enfield's Board Members**

Healthwatch Enfield's Board members attend a range of strategic and operational meetings in Enfield, across North Central London area (covering Camden, Islington, Haringey, Enfield, Barnet) and London-wide.

These meetings give us opportunities to ensure that key messages from our wide range of engagement activities are fed back to key decision-makers. We also attend Trust Board meetings as observers and at a number of these we have an opportunity offer challenge to and support for, the work of local Trusts. An oral update on key contribution will be provided at the Board meeting.

A summary of this activity is provided below for information:

- Local
    - Health and Wellbeing Board meeting
    - NHS Enfield Clinical Commissioning Group Governing Body meeting
    - NHS Enfield Clinical Commissioning Group's Quality and Risk meeting
    - North Middlesex University Hospital NHS Trust's Clinical Quality and Risk Committee
    - Barnet, Enfield, Haringey Mental Health Trust Board meeting as an observer
    - North Middlesex University Hospital NHS Trust Board meeting as an observer
    - Royal Free London NHS Foundation Trust Board meeting as an observer
-

- North Central London (Healthwatch Enfield representative is one of two who attend these meetings on behalf of Healthwatch organisations in Barnet, Camden, Enfield, Haringey and Islington)
    - North London Partners in Health and Care meetings, including:
      - Primary Care Development Group
      - Health and Care Closer to Home Board
      - Social prescribing
      - Engagement advisory board
      - Clinical Senate for elective orthopaedics review
    - Primary Care Committee in Common
    - Joint Clinical Commissioning Group meetings
    - Joint Health Overview and Scrutiny Committee
    - Enfield Locality Planning Workshop
  
  - London-wide
    - Healthwatch London Region meeting
-

Board Report Title	External factors
Governance framework component	External communications
Date and agenda item	7 <sup>th</sup> November 2019, Agenda Item 11
Author	Emma Friddin
Purpose (for information, decision or consultation)	For information
Key Recommendations (where applicable)	N/A
Attachments	None

### New ways of working to free up doctors as part of the NHS Long Term Plan

Patients are set to get longer appointments with their family doctor thanks to new ways of working [announced by NHS England](#). Practices large and small will work to support each other and deliver a wider range of specialist care services for patients from a range of skilled health professionals. Around 7,000 practices across England - more than 99% - have come together to form more than 1,200 Primary Care Networks. GPs will recruit multi-disciplinary teams, including pharmacists, physiotherapists, paramedics, physician associates and social prescribing support workers, freeing up family doctors to focus on the sickest patients.

### NHS rolls out staff retention scheme as part of the Long Term Plan

[A scheme](#) that has helped keep more than 1,000 nurses, midwives and other clinicians in the NHS will be rolled out to cover staff working in general practice as well as hospitals. A 'transfer window' lets staff move within the NHS between areas while developing new skills. Rewards from local businesses like discount gym membership and targeted mentoring for new joiners are among the incentives used to keep them.

### NHS survey says nine out of 10 patients have 'confidence and trust' in their GP

Nine out of 10 patients have "confidence and trust" in their family doctor as well as other general practice staff such as nurses and pharmacists, according to [new research](#). Patients rate their overall experience of their family doctor highly, with four out of five saying their GP treats them with "care and concern" and provides them with enough time to listen to their needs.

### Almost two-thirds of people don't feel like they have a say in their social care services

A new [survey](#) finds that almost two-thirds of people who access social care and support services, or care for those who do, feel that they don't get a say in how these services work. This comes as part of a report launched in National Co-production Week by the Social Care Institute for Excellence (SCIE), which gives a picture of attitudes in the social care sector towards co-production. Co-production is about developing more equal partnerships between people who use services, carers and professionals. Most people who responded to the survey say that co-production is not happening for them - despite many wishing it would.

### CQC publishes annual report and accounts for 2018/19

The Care Quality Commission (CQC) [annual report](#), reflects both their achievements in 2018/19 as well as highlighting areas for improvement. The CQC say 'we have made good progress in strengthening the way we regulate health and care services but acknowledge that there is more to do'

### Digital diabetes prevention rolled out as part of NHS Long Term Plan

Thousands of people who are at risk of Type 2 diabetes will receive [digital support](#) to prevent them developing the condition as part of the NHS Long Term Plan. In pilot schemes, offering

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convenient, 24/7 access to online advice significantly boosted the numbers taking up the flagship Diabetes Prevention Programme (DPP).

### **Improved NHS care for Parkinson's, Multiple Sclerosis and Motor Neurone Disease to save 2,500 hospital trips**

People living with brain and nerve conditions like Parkinson's could [benefit from quicker diagnosis](#) and better coordinated care as part of a new NHS initiative, which is also set to free up millions of pounds to reinvest in patient care. NHS experts have joined forces with seven leading charities to produce a toolkit that will help local health groups improve services for people with conditions including Multiple Sclerosis (MS), Motor Neurone Disease (MND) and Parkinson's, including rolling out fast-tracked blood tests and consultant appointments over Skype for those who want them.

### **Update on the Care Quality Commission phase two of our thematic review of restraint, seclusion and segregation**

The CQC are [reviewing](#) the use of restraint, seclusion and segregation in places that provide care for people with a learning disability and/or autism and mental health problems. Phase one looked at how segregation is used in child and adolescent mental health services and hospitals for people with learning disability and/or autism. We are now in phase two of the review which is looking at restrictive interventions in adult social care services, mental health rehabilitation and low secure hospitals, and some children's residential services.

### **Hundreds of lives saved through new tech to spot sepsis**

The NHS has saved hundreds of people from sepsis thanks to better use of digital technology in hospitals. In a major nationwide push to tackle the condition, including a one hour identification and treatment ambition, [new 'alert and action' technology](#) is being introduced which uses algorithms to read patients' vital signs and alert medics to worsening conditions that are a warning sign of sepsis.

### **New NHS plan to help patients avoid long hospital stays**

Action to help tens of thousands more people avoid lengthy spells in hospital is being [rolled out nationwide](#) as part of the NHS Long Term Plan. NHS doctors, nurses and other staff are being encouraged to ask themselves 'Why not home? Why not today?' when planning care for patients recovering from an operation or illness, as part of a campaign - called 'Where Best Next?' - which aims to see around 140,000 people every year spared a hospital stay of three weeks or more.

### **Care Quality Commission appoints Dr Kevin Cleary as new Deputy Chief Inspector of Hospitals and lead for mental health**

The Care Quality Commission (CQC) has [appointed Kevin Cleary](#) as Deputy Chief Inspector of Hospitals and lead for mental health. Dr Cleary's most recent post has been Deputy Director of Mental Health and Quality Improvement Lead for Mental Health at New Zealand's largest District Health Board, Waitemata District Health Board. He will join CQC in September where he will report to the Chief Inspector of Hospitals, Professor Ted Baker. Kevin will take up the post following Dr Paul Lelliott's departure from CQC. Kevin's appointment was made following open competition.

### **NHS cuts medicines costs by three quarters of a billion pounds**

The NHS has [saved more than £700 million](#) from the annual medicines bill to reinvest in new treatments as part of the Long Term Plan. An NHS-wide campaign has supported patients and doctors to maximise the use of 'generic' and best value 'biologic' treatments to treat conditions including arthritis and cancer.

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### **High street heart checks on the NHS**

Pharmacists are set to offer [rapid detection and help for killer conditions](#) like heart disease as part of a major revamp of high street pharmacy services. The high street heart checks are part of an ambitious target the NHS in England has set itself as part of its Long Term Plan to prevent tens of thousands of strokes and heart attacks over the next ten years.

### **‘NHS Passports’ to help staff work flexibly and cut admin costs**

Health service staff in England will be [able to move seamlessly between sites](#) in a bid to make it easier to take on new roles, plug gaps in staffing and improve patients’ care. Following successful pilot projects, all hospitals in England are being urged to sign-up to passporting agreements, which will cut the need for up to two-day inductions and other admin when staff move between organisations.

### **NHS ramps up support for survivors of female genital mutilation (FGM)**

Hundreds of survivors of female genital mutilation (FGM) will be able to [access expert care](#), support and treatment earlier thanks to a new network of NHS ‘one stop shop’ clinics being launched today. More than 1,300 women over 18 are expected to benefit from the highly specialised FGM support being rolled out to eight new centres across England as part of the NHS Long Term Plan.

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<b>Board Report Title</b>	Helping you find the answers
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda Item 12.1
<b>Author</b>	Emma Friddin
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

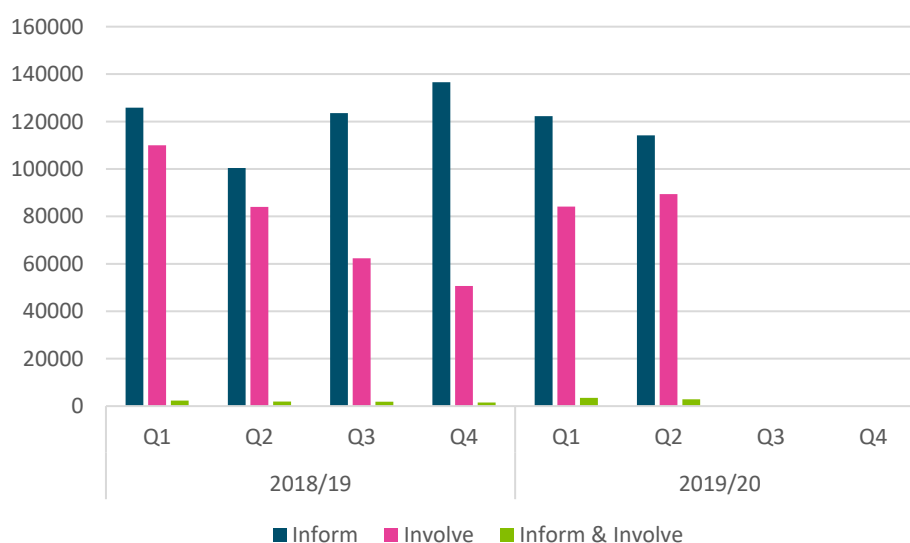
Between 1<sup>st</sup> July 2019 and 30<sup>th</sup> September 2019 (Q2 2019/20), we:

- provided information about health and care services to 144,166 individuals (inform)
- promoted opportunities for involvement reaching 89,387 individuals (involve)

Inform	Q1 2019/20	Q2 2019/20
Signposting service	45	75
Website	5,231	6,099
Social media	116,963	107,992
<b>Total</b>	<b>122,239</b>	<b>114,166</b>

Involve	Q1 2019/20	Q2 2019/20
Website	354	176
Social media	83,806	89,211
<b>Total</b>	<b>84,160</b>	<b>89,387</b>

Inform & Involve	Q1 2019/20	Q2 2019/20
E-newsletter	3,454	2,896
<b>Total</b>	<b>3,454</b>	<b>2,896</b>

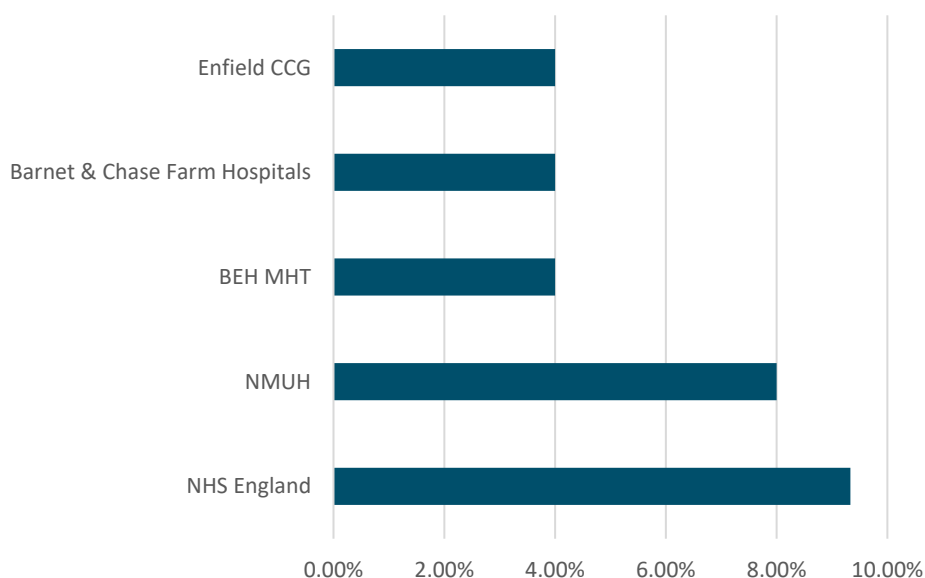




## Helping you find information via our signposting service

### Inform

During Q2 2019/20 we signposted 75 individuals to help them find the information they need. The organisations we signposted to most frequently include NHS England, the North Middlesex University Hospital (NMUH), Barnet, Enfield and Haringey Mental Health Trust (BEH-MHT), Barnet and Chase Farm Hospitals and Enfield Clinical Commissioning Group (CCG).



We also signposted individuals to: Primary Care Services England, Crossroads Care, Enfield national Autistic Society, One-to-One Enfield, Disability Law Service, Out of hours GP service, Admiral Nursing, Housing Ombudsmen Service, The Dental Complaints Service, Office of Judicial Complaints, ECHO Silver Point Sexual Health Clinic, Enfield Council Adult Social Care, Enable Drug and Alcohol Service, PoWhere, Information Governance and Protection Department, Healthwatch Haringey, Royal National Institute of Blind People, Enfield Disability Action and Mothercare.

### Helping you find information via our e-newsletter

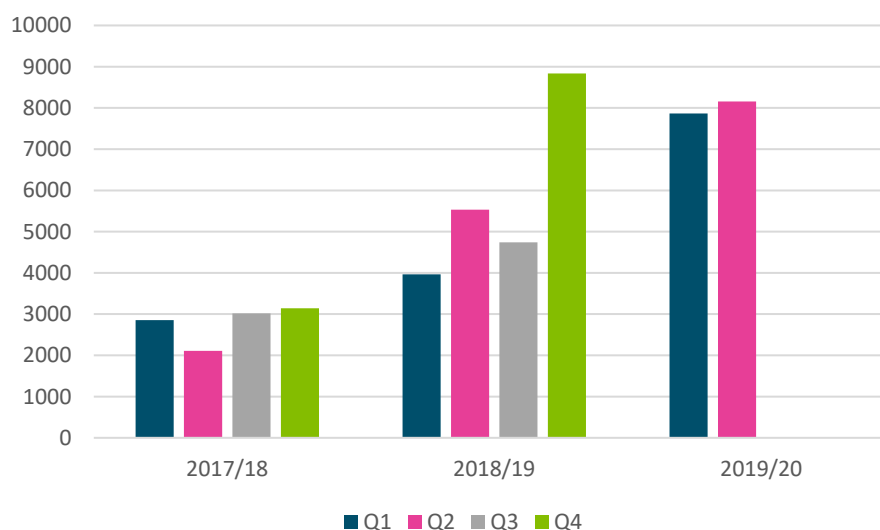
During Q2 2019/20, individuals had opportunities to obtain information via opening our newsletter 2,896 times. We sent 3 e-newsletters during this period:

Newsletter	Opens	'Inform' content	'Involve' content
July 2019	975	<p>Changes to how you book an appointment at the Enfield evening and weekend GP service</p> <p>Care Quality Commission's latest annual survey of people who stayed as an inpatient in hospital published</p>	<p>Share your views on the proposed changes to the opening times of the Chase Farm Hospital Urgent Care Centre</p> <p>Join our event to grade local services</p> <p>Tell us your experiences of NHS Continuing Healthcare and/or Personal Health budgets</p>

			<p>Become a patient representative on the Royal Free London NHS Foundation Trust Clinical Quality Review Group</p> <p>Tell NHS England what you think about their proposed changes to Children's Cancer Services and Teenager and Young Adult Cancer Services</p>
August 2019	983	<p>Asking Enfield Clinical Commissioning Group to keep the Urgent Care Centre at Chase Farm open until 10pm</p> <p>Healthwatch Enfield Annual Report 2018/19</p> <p>New road leading to Chase Farm Hospital main entrance</p> <p>Relocation of Moorfields Health Centre in Enfield</p> <p>Changes to how you book an appointment at the Enfield evening and weekend GP service</p>	<p>What changes do people want to make to local services in Enfield?</p> <p>Report reveals people in North Central London believe access to health services need to be improved</p>
September 2019	938	<p>Changes to GP 'walk-in' services during the weekends and public holidays</p> <p>Do you know how to book non-emergency patient transport for hospital appointments?</p> <p>Barnet, Enfield and Haringey Mental Health NHS Trust rated 'Good' by the Care Quality Commission</p> <p>Patients in North Central London to benefit from joined up health records</p>	<p>Join us for our or our Macmillan coffee and cake afternoon and information about our Talk Cancer workshops</p> <p>Tell us your experiences of NHS Continuing Healthcare and/or Personal Health budgets</p>

## Helping you find information via our website

During Q2 2019/20, 8,158 people used our website.



The most popular webpages include:

### Inform

Webpage	Number of visitors
Information about parking at NMUH	1233
Information about Enfield Sexual Health Clinics	1022
Information about Enfield drugs and alcohol service Clavering	694
Information about booking a blood test online at NMUH	368
Information about Enfield drugs and alcohol service Vincent House	274
Information about Chase Farm Hospital mental health services	252
New wellbeing hub opens in Enfield Town	172
Changes to 'walk in' services at the Enfield evening and weekend GP service	168
Changes to how you book an appointment at the Enfield evening and weekend GP service	131
Information about the crisis resolution home treatment team	129
Information about district nursing team Rowan Court	116
Healthwatch Enfield asks Enfield CCG to keep the Urgent Care Centre at Chase Farm Open until 10pm	115
Information about Complex Care Team	102
Information about Bay Tree House Enfield	98
Information about St Ann's Hospital	89
About health services	87
Information about In Health North London Diagnostics Centre	87
Information about Enfield Memory Service	86

Information about health visiting team Rowan Court	86
Information about the Arc personality service Enfield	81
Information about the looked after children's team	78
Information about the Magnolia Unit Enfield	78
Information about the Oaks Ward Enfield	72
Service directory - GP practices	65
Service directory - mental health services	62
Information about the health visiting team, Forest Road	55
Changes to patient transport at Chase Farm Hospital	54
Service directory - hospitals	53
Service directory - community services	51
Information about Dorset Ward	51
Do you have left over medical equipment?	45
Healthwatch Enfield Annual Report 2018/19	45
<b>Total</b>	<b>6099</b>

### Involve

Webpage	Number of visitors
Have your say on the proposed changes to the opening times of Chase Farm Hospital Urgent Care Centre	176
<b>Total</b>	<b>176</b>

### Other

Webpage	Number of visitors
Contact us	259
About us	221
News	176
Our reports	158
Get involved - jobs	111
Volunteer with us	88
Services	81
Events	80
Our work	56
<b>Total</b>	<b>1230</b>

## Helping you find information via Social Media

### ○ Twitter

During Q2 2019/20, the information we posted on Twitter reached a total of 158,398 users.

	2019/20	2018/19	2017/18
Q1	158,398	236,700	83,700
Q2	156,805	149,548	126,400
Q3		158,130	150,300
Q4		132,676	191,700
<b>Total</b>	<b>315,203</b>	<b>677,054</b>	<b>552,100</b>

The information we posted on Twitter (inform) reached a total of 88,090 users. The opportunities for involvement we posted on Twitter (involve) reached a total of 68,715 users.

○ **Facebook**

During Q2 2019/20, the information we posted on Facebook reached a total of 40,398 users.

	2019/20	2018/19	2017/18
Q1	42,371	23,117	5,046
Q2	40,398	31,847	15,527
Q3		33,799	4,861
Q4		46,847	7,231
<b>Total</b>	<b>82,769</b>	<b>135,610</b>	<b>32,665</b>

The information we posted on Facebook (inform) reached a total of 19,902 users. The opportunities for involvement we posted on Twitter (involve) reached a total of 20,496 users.

**Helping you find information via local media outlets**

During Q2 2019/20 we had 16 mentions in local media outlets and had our work referenced in two national publications, the British Medical Journal (BMJ) and One London:

Date	Title	Media outlet
01/07/2019	Making NHS services more accessible	Enfield Dispatch
04/07/2019	Urgent Care Centre in Enfield plans to close one hour earlier	This is local London
04/07/2019	Urgent Care Centre in Enfield plans to close one hour earlier	Enfield Independent
11/07/2019	Consultation: Reducing opening hours at Chase Farm urgent care centre	Palmers Green Community
11/07/2019	Changes in how you book an appointment at the Enfield evening and weekend GP service	Palmers Green Community
18/07/2019	Have your say on the proposed changes to the opening hours of the Urgent Care Centre at Chase Farm Hospital	Palmers Green Community
22/07/2019	Patients find GP online services “cumbersome,” survey finds	British Medical Journal
30/07/2019	Understanding public expectations of the use of health and care data	One London
01/08/2019	What we've achieved this year	Enfield Dispatch
14/08/2019	Local health watchdog urges no reduction in opening hours of Chase Farm urgent care centre	Palmers Green Community
20/08/2019	Healthwatch Enfield asks Enfield Clinical Commissioning Group to keep the Urgent Care Centre at Chase Farm open until 10pm	Parikiaki Press
23/08/2019	NHS bosses approve plan to move doctor's surgery three miles - despite opposition from MP, Rabbis, and 1,000 patients	Ham and High
01/09/2019	Urgently seeking answers	Enfield Dispatch
11/09/2019	Enfield residents raise concerns over GP shortage	Enfield Independent

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11/09/2019	Getting a GP appointment 'could get even worse' in this part of Enfield	My London
19/09/2019	Share your views on Personal Health Budgets	AccessAble

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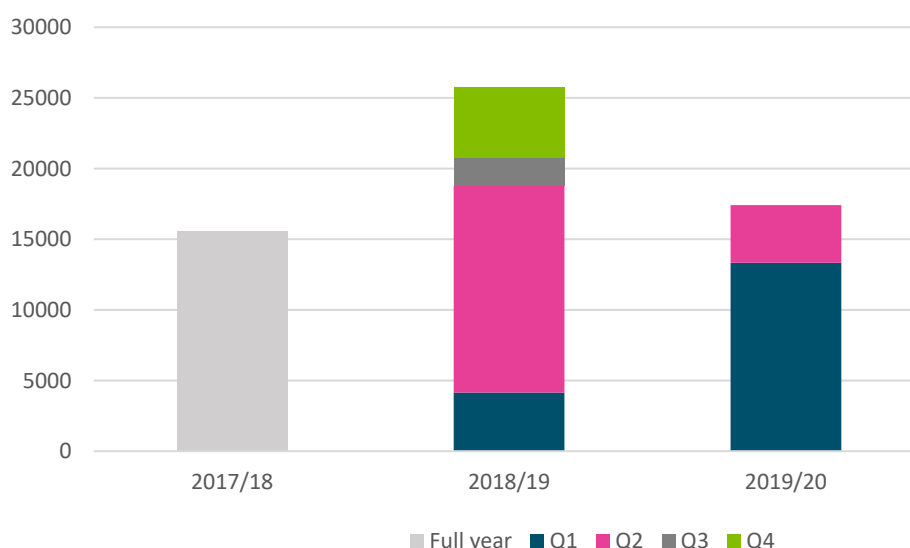
<b>Board Report Title</b>	<b>Your views on health and care</b>
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda item 12.2
<b>Author</b>	Emma Friddin
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

**Please note:** As requested, analysis has only been conducted when number of items of feedback collected exceeds 30, in line with the Care Quality Commission’s methodology for their reporting of surveys<sup>1</sup>.

Please also note that there has been an increase in the number of items of feedback for activities and a decrease in the number of items of feedback on the online feedback centre as anticipated within the project plans.

During Q2 2019/20, we have collected 4,079 items of feedback about local services through:

- Surveys - 3,322 items of feedback
- Enter & View visits - 448 items of feedback
- Activities - 274 items of feedback
- Online Feedback Centre - 35 items of feedback



<sup>1</sup> [https://www.cqc.org.uk/sites/default/files/20190620\\_ip18\\_qualitymethodology.pdf](https://www.cqc.org.uk/sites/default/files/20190620_ip18_qualitymethodology.pdf) p11.

## Feedback from surveys (3,322 items of feedback)

Survey name	Impact of survey	Responses	Items of feedback
Understanding how you share your views and opinions	To inform our online feedback centre development	33	313
Share your views on Continuous Healthcare/ Personal Budgets	To develop an evidence base for our work around Continuous Healthcare/ Personal Budgets	21	373
Proposed changes to the opening times of the urgent care centre at Chase Farm Hospital	To develop a report to Enfield CCG highlighting Enfield residents views on the proposals	372	2636
<b>Total</b>		<b>426</b>	<b>3322</b>

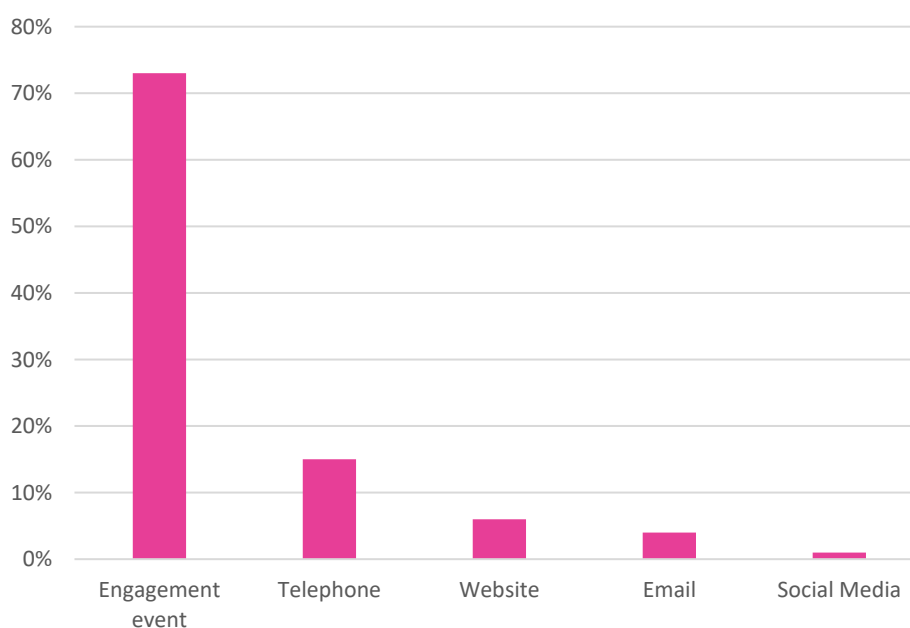
## Feedback from Enter & View visits (448 items of feedback)

Visit	Responses	Items of feedback
Azalea House	34	448
<b>Total</b>	<b>34</b>	<b>448</b>

## Feedback from activities (274 items of feedback)

55% of the people we have heard from through our activities have told us about a negative experience of using services in Enfield. 33% have told us about a positive experience. A further 9% got in touch with us with a request for information. 3% expressed their point of view.

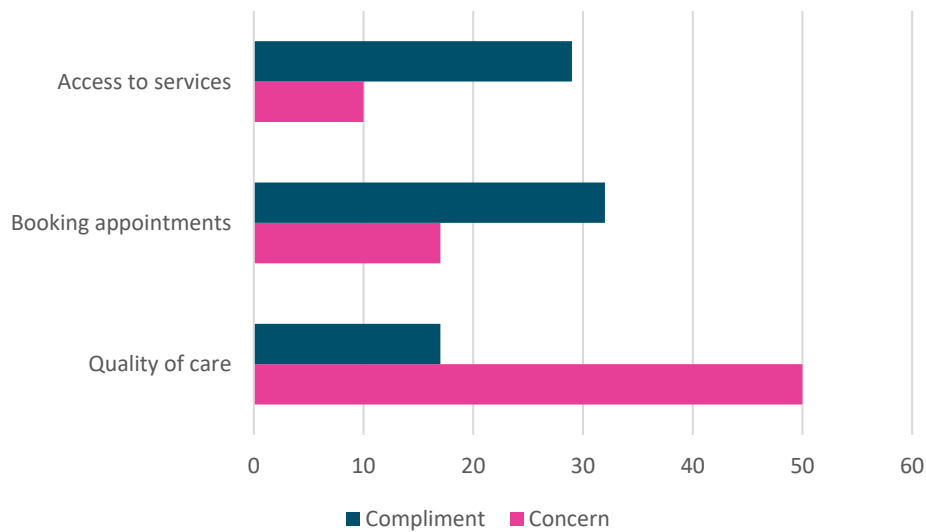
73% of feedback has been collected at engagement events, 15% has been collected via the telephone, 6% has been collected via our website and 4% has been collected via emails. Individuals have also passed on their feedback via social media (1%).





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The main themes arising from feedback include quality of care, booking appointments, and access to services.

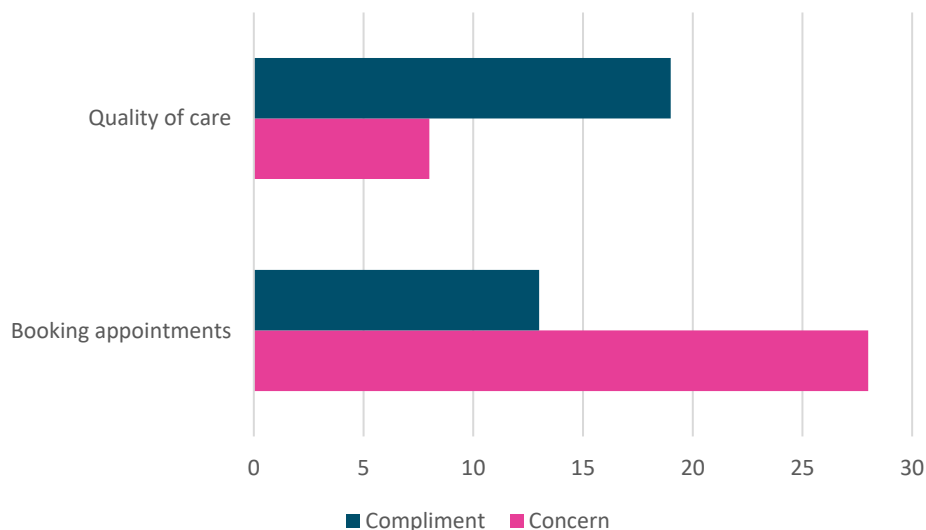


### Feedback on and quality of services in Enfield

The following sections provide a breakdown (by service or provider) of feedback received by Healthwatch Enfield through its activities and online feedback centre alongside any recently published Care Quality Commission's reports on health and care provision in Enfield.

#### 1. GPs in Enfield

97 individuals have shared their experiences with us of using GP services in Enfield through our engagement and signposting activities. This included 59 concerns (61%), 34 compliments (35%) and 4 requests for information (4%). The main themes from intelligence gathered include booking appointments and quality of care.



16 reviews have been written on the Healthwatch Enfield feedback centre about GP practices in Enfield.

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## Care Quality Commission reports

The CQC has published 1 report relating to Enfield GP practices during this time period.

GP practice	Date of publications	Current rating	Previous rating	Previous publication
Palmers Green Clinic	14.08.2019	Good	Rating not given	May 2018

### 2. Dental practices in Enfield

4 individuals have shared their experiences with us of using dental services in Enfield through our engagement and signposting activities.

2 reviews have been written on the Healthwatch Enfield feedback centre about dental practices in Enfield.

## Care Quality Commission reports

The CQC has not published any reports relating to Enfield dental practices during this time period.

### 3. Pharmacy services in Enfield

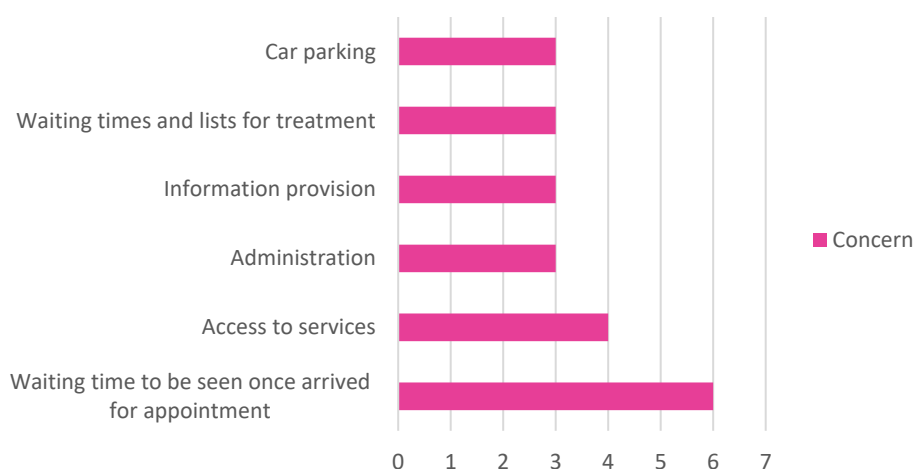
1 individual has shared their experiences with us of using pharmacy services in Enfield through our engagement and signposting activities.

3 reviews have been written on the Healthwatch Enfield feedback centre about pharmacy services in Enfield.

### 4. Hospitals in Enfield

#### 4.1 North Middlesex Hospital University Hospital NHS Trust (NMUH)

50 individuals have shared their experiences with us of services at NMUH through our activities. 30 were relating to concerns (61%), 17 were compliments (35%) and 3 were requests for information (4%). The main themes from intelligence gathered include waiting times to be seen once arrived for appointment, access to services, administration, information provision, waiting times and lists for treatment and car parking.

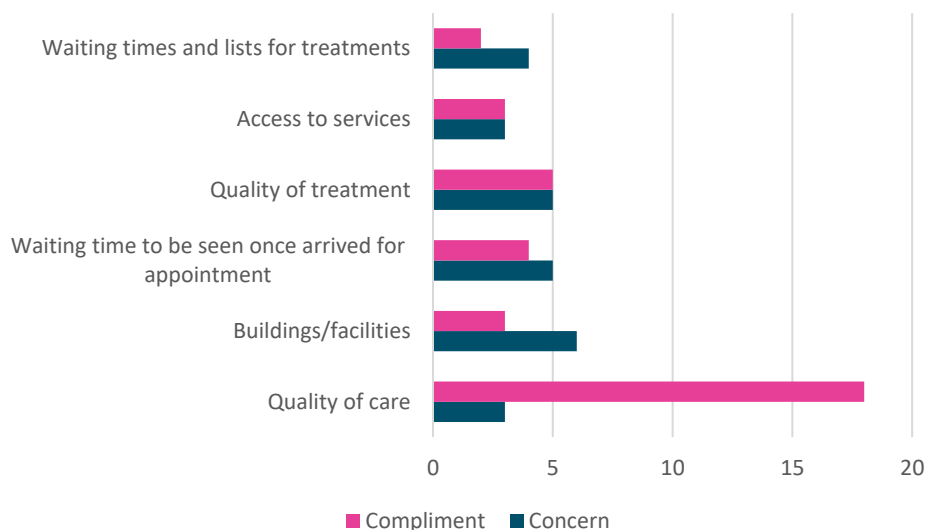


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2 reviews have been written on the Healthwatch Enfield feedback centre about NMUH.

## 4.2 Chase Farm Hospital, part of the Royal Free London NHS Foundation Trust

59 individuals have shared their experience with us of services at Chase Farm Hospital through our engagement and signposting activities. 26 were concerns (44%), 32 were compliments (54%) and 1 was a request for information (2%). The main themes from intelligence gathered include quality of care, building/facilities, waiting time to be seen once arrived for appointment, quality of treatment, access to services and waiting times and lists for treatments.



1 review has been written by patients on the Healthwatch Enfield online feedback centre about Chase Farm Hospital.

### Care Quality Commission reports

The CQC has not published any reports relating to hospitals serving Enfield patients during this time period.

## 5. Mental health services in Enfield

11 individuals have shared their experiences with us about mental health services in Enfield through our engagement and signposting activities

5 reviews have been written on the Healthwatch Enfield online feedback centre about local mental health services during this period.

### Care Quality Commission reports

The CQC has published 1 report relating to mental health services serving Enfield patients during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
Barnet, Enfield and Haringey Mental Health Trust	25.09.2019	Good	Requires improvement	January 2018

## 6. Community services in Enfield

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5 individuals have shared their experiences with us about community services in Enfield through our engagement and signposting activities.

1 review has been written on the Healthwatch Enfield online feedback centre about community services in Enfield during this period.

#### Care Quality Commission reports

The CQC has not published any reports relating to community services during this time period.

#### 7. Care and nursing homes in Enfield

2 individuals have shared their experiences with us about care and nursing homes in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about care and nursing homes in Enfield during this period.

#### Enter and View update

Unfortunately, the Barnet, Enfield and Haringey Mental Health Trust visit was postponed to the spring of 2020.

On the 24th July we visited a Care and Nursing Home, Azalea Court. We engaged with 14 residents, 12 relatives and 9 staff.

The Owner has responded to our draft with a number of actions being taken on board. We aim to publish the full and final report by the end of October.

We also conducted a follow up meeting with the Paediatric team at the North Middlesex University Hospital Trust. We were pleased to note that 80% of our recommendations were in their action plan to be implemented.

In particular, we noted that the Teenager's Room had been changed from more of a storage room into a useable Teenage room with working equipment, which teenage patients were accessing.

#### Care Quality Commission reports

The CQC has published 8 reports relating to care and nursing homes in Enfield during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
Parkside residential home	03.07.2019	Good	Requires improvement	May 2018
Devon House	24.08.2019	Inadequate	Good	July 2018
Arnold House - Care Home Physical Disabilities	04.07.2019	Requires improvement	Requires improvement	November 2018
The Lime Trees	16.07.2019	Not rated	Not rated	December 2018
Elizabeth Lodge	17.07.2019	Requires improvement	Good	December 2016
Station Road	19.07.2019	Good	Good	January 2018
Henran Lodge	16.08.2019	Good	Good	March 2017
Amberley House	28.08.2019	Inadequate	Good	March 2017

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## 8. Supported living services in Enfield

2 individuals have shared their experiences with us about supported living services in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about supportive living services during this period.

### Care Quality Commission reports

The CQC has not published any reports relating to supported living services in Enfield during this time period.

## 9. Home care in Enfield

1 individual has shared their experiences with us about home care in Enfield through our engagement and signposting activities.

No reviews have been written on the Healthwatch Enfield online feedback centre about homecare during this period.

### Care Quality Commission reports

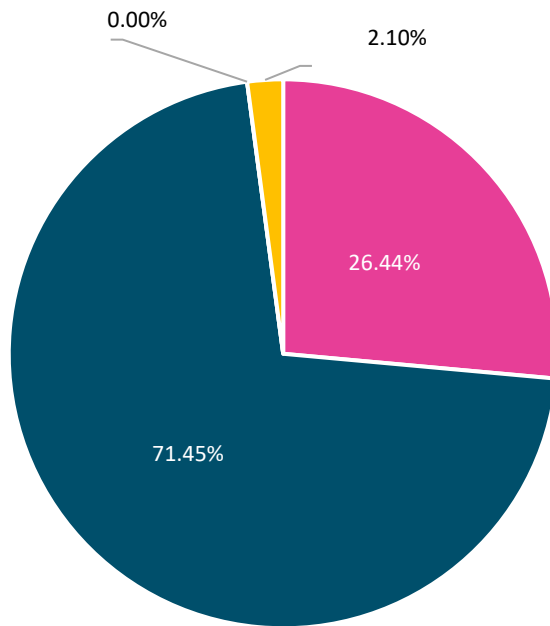
The CQC has published 5 reports relating to homecare services in Enfield during this time period.

Provider	Date of publications	Current rating	Previous rating	Previous publication
St Michaels Support & Care	05.07.2019	Good	No previous inspection	
I-Care Recruitment Services	17.07.2019	Good	No previous inspection	
Care 4 U Ltd	19.07.2019	Good	Good	December 2016
Jays Homecare Limited	16.08.2019	Good	Good	January 2017
Alpha Care Specialists Ltd	30.08.2019	Good	Good	October 2016

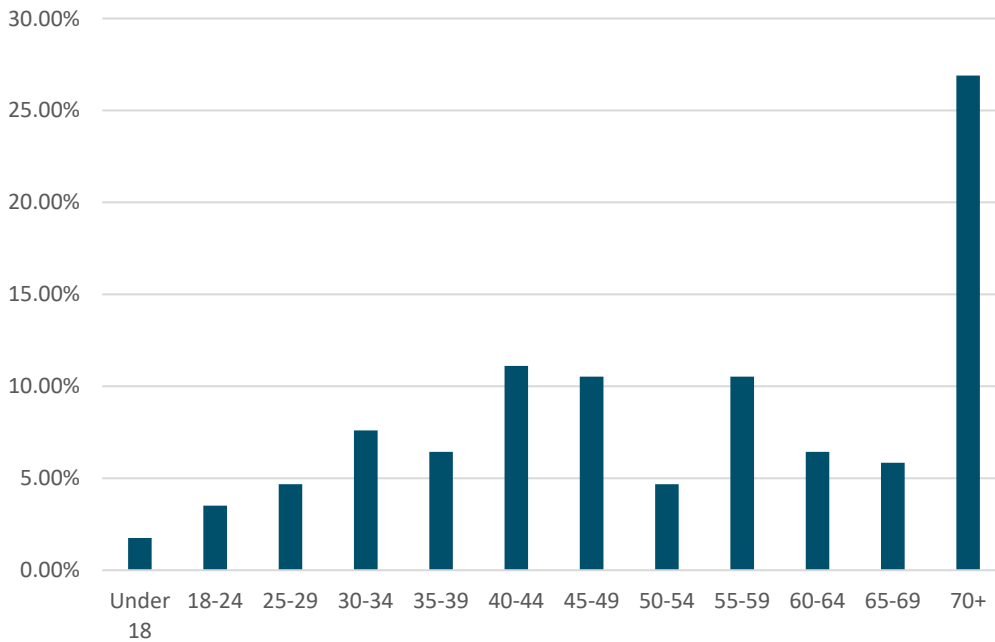
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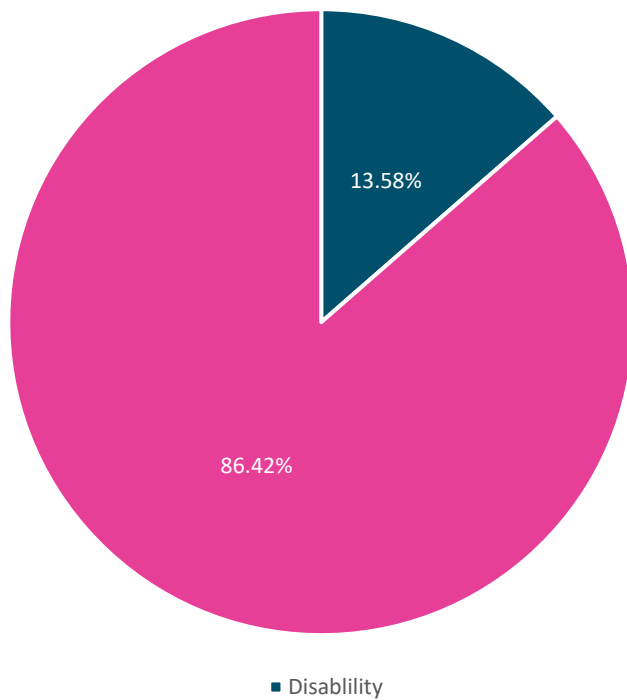
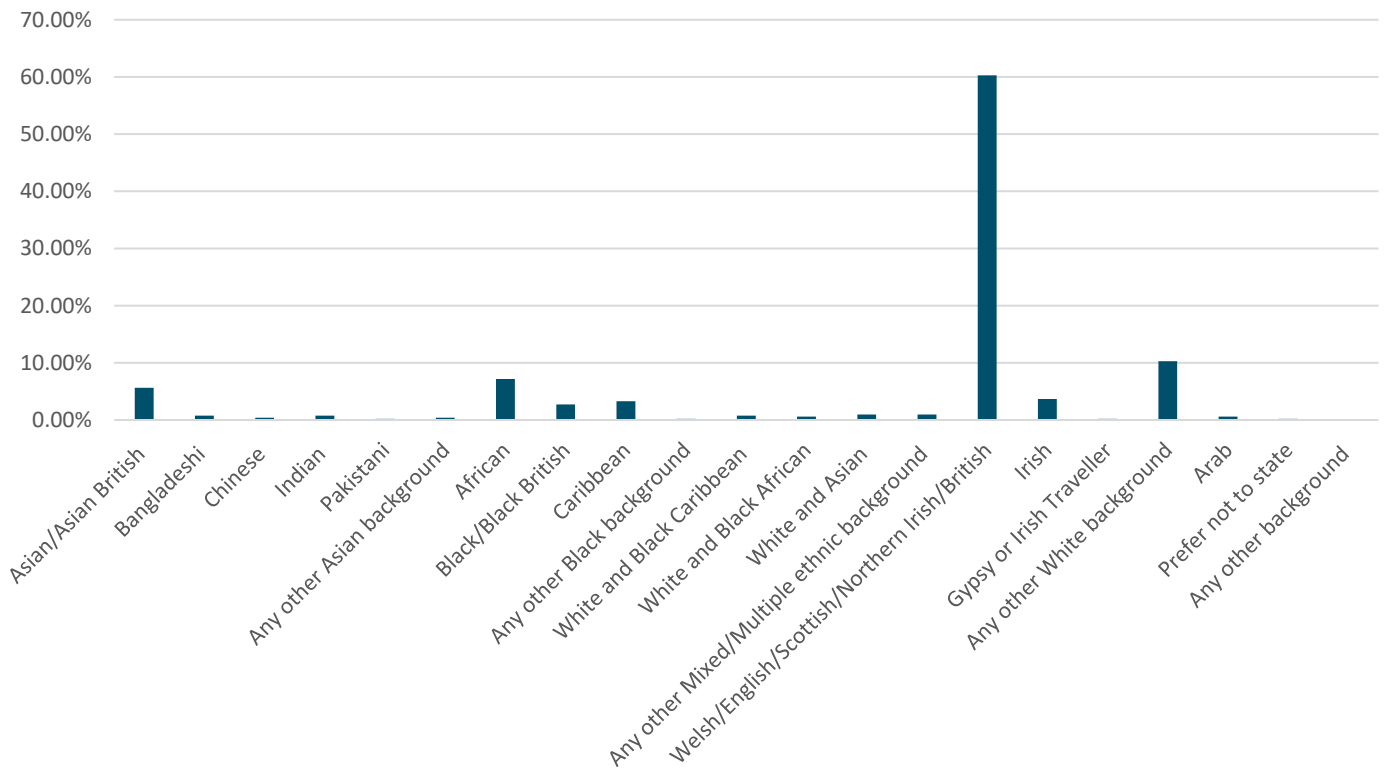
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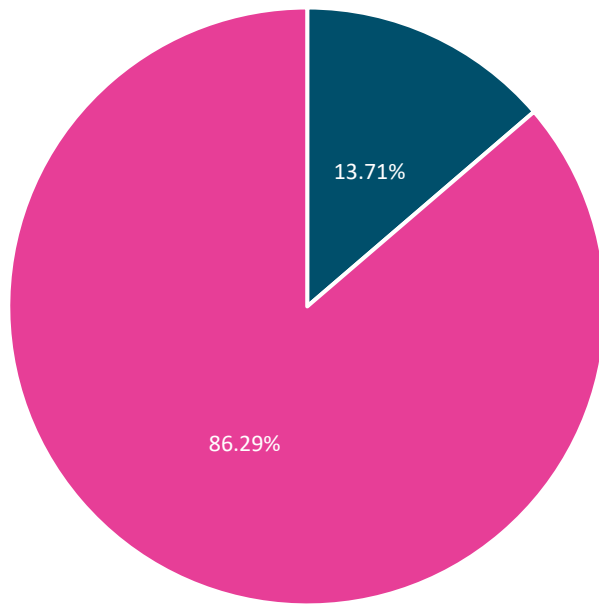
## The demographics of the people we heard from



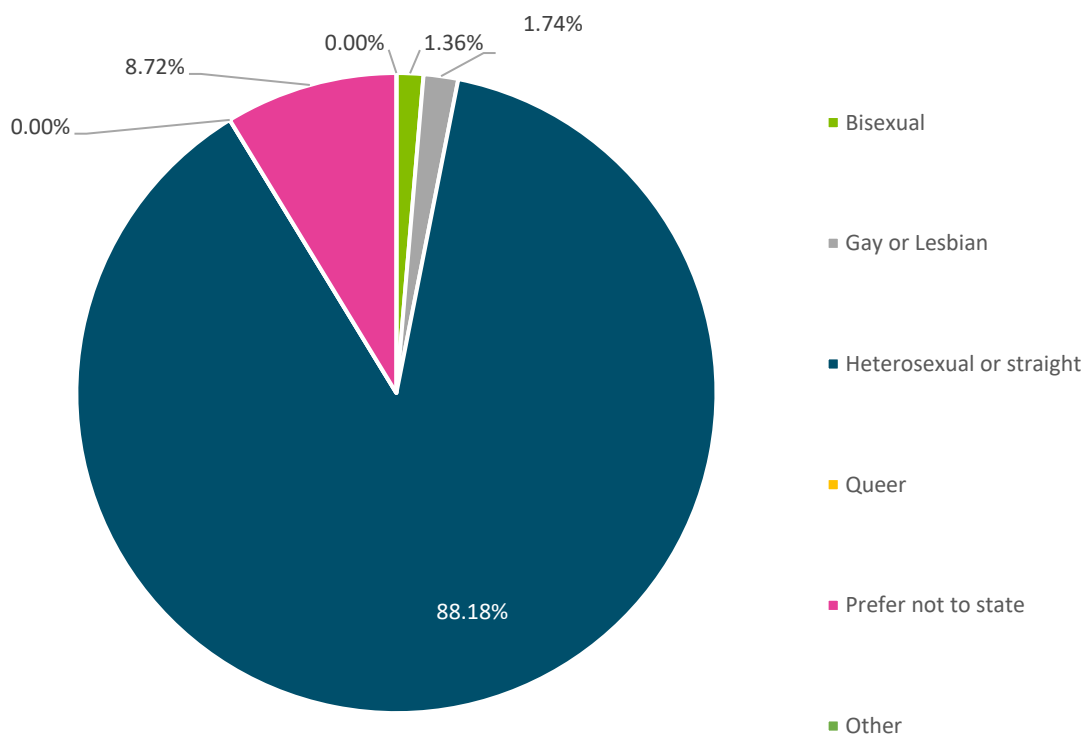
■ Male ■ Female ■ Transgender ■ Prefer not to say





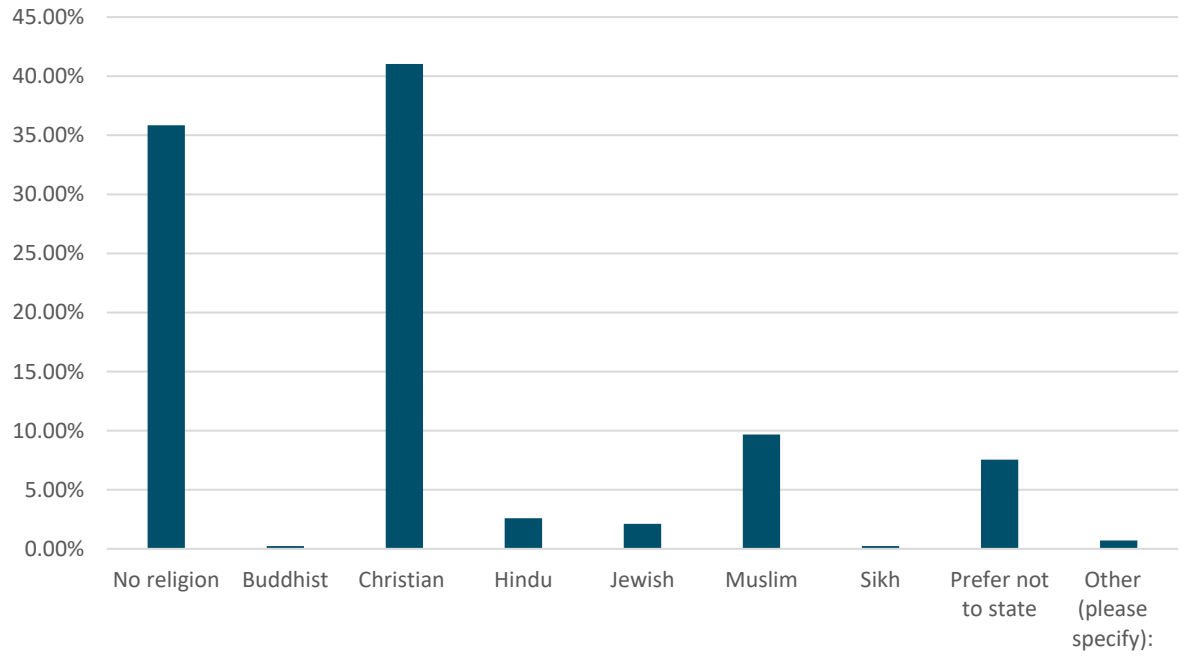


■ Carer



- Bisexual
  - Gay or Lesbian
  - Heterosexual or straight
  - Queer
  - Prefer not to state
  - Other
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<b>Board Report Title</b>	Listening to local people's views
<b>Governance framework component</b>	Statutory duties
<b>Date and agenda item</b>	7 <sup>th</sup> November 2019 Agenda item 12.3
<b>Author</b>	Yvonne Sandzi /Fazilla Amide
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	None

Between 1<sup>st</sup> July 2019 to 30<sup>th</sup> September 2019, the team at Healthwatch Enfield attended 31 events including the Enfield College and Middlesex University fresher's fairs. We also held a Macmillan Coffee Afternoon where we raised £150.00.

During this period our focus for surveys and conversations with local people were around the Chase Farm Urgent Care Centre, Continuing Health Care and their experiences of using Health and Social Care services in Enfield in general.

Please note: numbers in this report exclude commissioned work.

Number of events:

	Q1	Q2	Q3	Q4	Total number of events.
2018/2019	34	49	36	35	154
2019/2020	50	31			

Number of people engaged with:

	Q1	Q2	Q3	Q4	Total number of people engaged with.
2018/2019	1,033	1,119	514	969	3,635
2019/2020	1,117	865			

Our engagement activities in Q2 included:

- 11 hospital pop up stalls reaching 242 people.
- 4 visits to our local voluntary community sector reaching 85 residents.
- 16 other engagement activities including Primary Care Centres, Civic Centre, Library pop ups, Ward Forums, the Enfield College and Middlesex University Fresher's Fairs and Healthwatch Enfield Macmillan Coffee afternoon reaching 538 people.

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<b>Hospital</b>	<b>Date</b>	<b>Number of people engaged with</b>
Chase Farm Hospital pop up	10/07/2019	33
Chase Farm pop Hospital up- Chase Building	07/08/2019	11
Chase Farm Hospital pop up	21/08/2019	29
Chase Farm Hospital pop up	04/09/2019	28
Chase Farm Hospital pop up- Chase Building	18/09/2019	13
Chase Farm Hospital pop up	23/09/2019	30
North Middlesex Hospital pop up	12/07/2019	15
North Middlesex Hospital Pop Up	15/08/2019	25
North Middlesex Hospital Pop Up	29/08/2019	24
North Middlesex Hospital Pop Up	12/09/2019	18
North Middlesex Hospital Pop up	26/09/2019	16

<b>Engagement Activity</b>	<b>Date</b>	<b>Number of people engaged with</b>
Bowes Ward Forum	09/09/2019	15
Cancer Awareness Workshop	06/08/2019	24
Carlton House Hub visit	02/09/2019	20
Civic centre pop up	16/07/2019	15
Dugdale Centre Pop Up	09/07/2019	22
Dugdale Centre Pop Up	05/08/2019	20
Dugdale Centre Pop Up	06/09/2019	18
Edmonton Diabetes Support Group	08/08/2019	7
Enfield College Fresher's Fair	11/09/2019	50
Enfield Town Library Pop up	08/07/2019	15
Enfield Vision Focus Day	19/09/2019	40
Evergreen Hub Visit	03/07/2019	14
Health Awareness Day	17/09/2019	80
Inflatables Day - Bury Lodge Park	27/08/2019	30
Job Centre North London Disability Employment Advisor meeting	17/07/2019	25
John Jackson Library Pop Up	30/08/2019	10
Macmillan Coffee Afternoon	27/09/2019	20
Maternity Voice Partnership meeting	13/09/2019	8
Middlesex University Fresher's Fair	25/09/2019	120
NHS Expo	04/09/2019	70

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<b>Board Report Title</b>	<b>Making a difference together - Q2 2019/20</b>
<b>Governance framework component</b>	Statutory duties
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, Agenda Item 12.4
<b>Author</b>	Patricia Mecinska
<b>Purpose</b> (for information, decision or consultation)	For information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

As defined by Healthwatch statutory duties, Healthwatch Enfield is required to demonstrate:

- examples where you have used a collaborative approach with service providers, commissioners, regulators and other partners to bring about change
- how we have promoted or supported the involvement of local people in the commissioning, provision and management of local health and care services
- how we have involved volunteers and other local people to help you carry out your statutory activities

This paper provides a summary of key activities carried out between 1<sup>st</sup> July 2019 and 30<sup>th</sup> September 2019 to ensure compliance.

Volunteers have been helping us carry out our statutory duties by taking part in Enter and View visits; undertaking community outreach; and collecting patient experiences.

We have promoted the involvement of local people in the commissioning, provision and management of local health and care services through promoting 6 consultations from local, pan London and national organisations such as the Royal Free London NHS Foundation Trust, NHS England, NCL Cancer Prevention Group, Department of Health and NHS X. These consultations covered a wide range of topics including (but not limited to): joining the Royal Free London Clinical Quality Review Group, joining the NCL Cancer Prevention, Awareness and Screening Steering Group, becoming NHS England patient and public voice members and information sharing on health and care.

The focus of our activities to support the involvement of local people in health and care services involved:

- improving Continuing Healthcare

Having been made aware of some concerns around Continuing Healthcare and having collected feedback from local people who are supported through the Continuing Healthcare budget, we prepared and disseminated a ‘Case for further investigation’. The document has been shared with NHS Enfield Clinical Commissioning Group which is considering options for joint working.

- improving inpatient services for young people at North Middlesex University Hospital NHS Trust

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Following our Enter and View visit to paediatric wards in April 2019, the Trust created a 'teenage room' with comfortable seating, video games and entertainment for young people to relax, unwind and engage in meaningful activities.

The Trust has also piloted 'young patients and parents forum' to establish means of continuously seeking feedback to inform improvement initiatives.

- keeping the Urgent Care Centre at Chase Farm Hospital open until 10pm

Throughout the quarter we actively sought local people's views on the proposals to reduce the opening hours of the Urgent Care Centre at Chase Farm Hospital from 10pm to 9pm.

We engaged with 372 Enfield residents with 84% of them telling Healthwatch Enfield that they did not agree with the proposals.

Using the views and experiences, we published a report in August, 'What local people think about the proposals to reduce the opening times of the Urgent Care Centre at Chase Farm Hospital'. We also wrote to NHS Enfield Clinical Commissioning Group, asking them to consider local people's views as the decision about the opening hours was being made.

In September 2019, NHS Enfield Clinical Commissioning Group agreed to keep the Urgent Care Centre at Chase Farm open until 10pm.

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<b>Board Report Title</b>	<b>Volunteering update</b>
<b>Governance framework component</b>	Volunteering
<b>Date and Agenda Item</b>	7 <sup>th</sup> November 2019, agenda item 13
<b>Author</b>	Michelle Malwah
<b>Purpose</b> (for information, decision or consultation)	Information
<b>Key Recommendations</b> (where applicable)	N/A
<b>Attachments</b>	N/A

### Volunteers supporting Healthwatch Enfield

The following provides a summary of efforts to recruit and retain Healthwatch Enfield’s volunteers’ base in quarter two of 2019/2020:

	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20	Q2 19/20
No. of application packs sent	24	20	22	20	26	31
No. of volunteers recruited	5	11	6	6	10	12
No. of volunteers to leave	3	4	0	9	3	7
Total no. of active volunteers	25	33	36	32	39	44

### Volunteer Recruitment/Retention

In Q2, we recruited two community engagement volunteers (who are both interested in becoming Enter & View assessors), an office assistant and a communication’s assistant.

Four volunteers terminated their placement with Healthwatch Enfield. Two of the volunteers secured employment, one moved out of area and one is focussing on starting a family.

### Student placements

We had eight student placements from local colleges and overseas; three of these returned to Healthwatch Enfield following their placement with us in the past.

The students have been helping us with community outreach and young Healthwatch project by carrying out research.

Three of the placements terminated within the quarter as these were short-term.

### Development

This quarter we gave our volunteer to attend a number of training courses. A few of our volunteers took the opportunity to attend PLACE assessment training to carry out an inspection at Barnet Enfield and Haringey Mental Health NHS Trust. Some also attended the Five to Thrive workshop provided by Enfield Council’s People’s services department.