

Healthwatch Portsmouth Service Planning – for 2016-17

Aims:

- To be an independent voice to improve the quality of and access to health and social care services in Portsmouth.

Objectives - Statutory functions:

1. Promote / support local people in commissioning, provision and scrutiny of local services.
2. Enabling people to monitor standards and inform improvements
3. Obtaining local views and making these known.
4. Producing reports / recommendations for service improvements to commissioners / providers.
5. Provide information and advice re access to services so choices can be made.
6. Forming views on standards – sharing this with Healthwatch England.
7. Making recommendations to Healthwatch England to advise CQC to make special reviews.
8. Provide intelligence to Healthwatch England.

Proposed priorities for 2016-17:

Based on feedback from the wide variety of sources the service links in with, this document confirms the key priorities agreed with the Healthwatch Portsmouth Board for the service to March 2017. Some are in-house process related and some are an on-going focus to gain intelligence about what is good and what needs improvement across the sector. There are also more specific pieces of work - some 'bite-size' assignments and others which require a more in-depth and concerted effort to achieve their outcomes.

All priorities will need us to work closely with partner agencies to identify themes and gain acceptance of any recommendations we put forward to improve patient / user experience.

No.	Item.	Source	Meeting of HW Statutory Functions	Key themes	Lead Responsibility
<u>In-house processes (the review and improvement of HWP tools / mechanisms / processes):</u>					
1.	Advocacy service - promotion / learning / capacity building – follow up on agreed actions to confirm carried out and impact, promote more widely, expand enabling role to coach individuals and organisations to tackle complaints themselves, look into social care advocacy and enhance links with PALS services.	Internal – queries re role of advocacy service and referrals.	1,2,3,5,8	Information, service improvement	Staff (FC)
2.	Recruitment and support of volunteers – confirming role profiles, induction and support processes - to ensure opportunities for meaningful involvement.	Internal – to build capacity in service and widen reach of influence.	1,2,3,4,6,8.	Research, service design / improvement	Staff (AN)
3.	Enhancement of HWP website inc online app for public to search providers and feedback	Internal from own review of	1,5	Information, service	Staff (AN) & volunteers

	on experiences, how to complain / appeal against outcomes / decisions, accessible information portal	site and areas for improvement, along with PCC requests		improvement	(inc Board Member/s)
4.	Healthwatch Portsmouth quality – roll out of planned internal audits of processes, confirmation of impact through meaningful KPIs and case studies, implementation of HW CRM system.	Internal from own review of processes and awareness of external parties as to effectiveness of service.	3,4,6,8.	Information, service improvement	Staff (PF) & Board Member/s
5.	Business development – seek out opportunities to develop the role of HWP in training, mentoring and capacity building across the city.	Internal from own review of strengths and opportunities to add value to city and partners.	1-8	Research, service design / improvement, engagement, capacity building.	Staff (PF) & Board Member/s
<u>Engagement plan (the collecting of feedback and sharing of information through patient/user engagement to highlight good practice and recommend improvements to services):</u>					
1.	Main health venues – St Mary’s Foyer, St Mary’s Treatment Centre, QA Hospital Foyer – utilise opportunities to talk with members of the public at these locations.	Internal -building on work already done to engage with the public.	1,2,3,5,6,8.	Research, service design / improvement	Staff (AN) & volunteers
2.	Visit and collect data on experiences of the public via ‘enter and view’ program and other community research techniques, inc feedback from carers at following:	Focus on key ‘outlets’ where people seek and receive health	1,2,3,4,6,7,8.	Research, service design / improvement	Staff (AN/FC) & volunteers (inc Board Member/s).

	<ul style="list-style-type: none"> • GP surgeries • Dental practices • Residential & nursing care • Domiciliary care providers • Pharmacies • Young persons' groups • User-led groups – inc PPGs • Community groups / venues 	<p>and social care services - leading to themes to review that determined locally.</p> <p>Follow up CQC and other regulatory reports.</p>			<p>Student summer placements.</p> <p>Public Health Community Fellowship volunteers</p>
Assignments (bite-size pieces of work based on priorities identified via engagement with public & local stakeholders):					
1.	Involvement in development of Blueprint for Portsmouth (integrated health and social care vision) – advice on consultation and engagement plans/activities	HWP Board Advisors, CCG & Senior Executive leads	1,3,4	Commissioning, service design / improvement	Staff (PF) & Board Member/s
2.	Guildhall Walk - walk in centre service changes. On-going feedback on process and concerns raised by public.	HWP Board, CCG, public concerns	3,4,8	Service change / design	Staff (PF) & Board Member/s
3.	GP access/ID – follow up to mystery shopping findings – accessibility with same day appointments, standard hours of opening, information for patients, adherence to ID requirement guidance.	Theme from feedback at public engagement events.	3,4,5,6,8.	Information, service improvement	Staff (AN) & volunteers CCG?
4.	Development of public role in commissioning (Wessex Community Voices) <ul style="list-style-type: none"> • Building on current work with other HW in area and NHS England. 	Current assignment with NHS England – develop further	1,2,3,6	Commissioning, service design / improvement	Staff (PF) & volunteers (inc Board Member/s)

	<ul style="list-style-type: none"> Integrated personal commissioning - involvement of HWP and public in development of service specifications for personal assistants (under personal health budget commissioning). 	with CCG/PCC PCC request			NHS England Local Healthwatch
5.	Autism awareness – good patient/user customer service through improving knowledge and skills of commissioners and providers to work with residents with autism.	Theme from HWP NHS complaints advocacy role.	3,4,5,6	Information, service improvement	Staff (FC) & Board Member/s Autism charity?
6.	Well-Being Teams – joint work with volunteers re enabling roles / community research.	Well-Being Service focus / blueprint priority	1,2,3,4,8	Research, service design / improvement, engagement, capacity building.	Staff (AN) & volunteers
7.	Discharges from hospital: <ul style="list-style-type: none"> Good pathway into and from A&E / good and timely discharges – what does this look like? How achieved? Better self-care / non-A&E routes for health care? Learning for Portsmouth? Links between health and housing as a determinant of health (possible focus on quality of discharges from hospital, access to adaptations / re-ablement options or focus ideas to reduce those experiencing poor unsafe housing options). Link with Better Care Fund. 	Public Health / JSNA work stream of healthy environment Current ‘flow’ blockages at QAH. Ambulances turned away.	1,2,3,4,6,8	Research, service design / improvement	Staff (PF/AN) & Board Member/s

Projects (specific more extensive research to inform good practice and decision making):					
1.	Solutions to barriers to cancer screening (following on from current cancer project researching links between deprivation and access to screening).	Building on current project – to confirm barriers to screening and potential solutions.	2,3,4,5,8	Research, service improvement	Staff (PF) & students via University of Portsmouth
2.	Facilitation of patient/user engagement best practice (building on current mapping project) via mapping of patient and user engagement networks – production of directories, resources, forums, volunteer bank, sharing good practice / research / outcomes – aim of building engagement capacity across the city.	Building on current project – develop joint resources with commissioners / providers - building further capacity in city for involvement /engagement / influence by public.	1,2,6	Research, capacity building, engagement.	Staff (PF/AN) & external organisations (inc CCG, PCC, Solent, PHT)
3.	People with learning disabilities – poorer mortality rates / health outcomes? How involved in service design / production? What is the range of accessible information to help make informed choices re health and well-being? What is position in Portsmouth? Link in with Jennie Brent (Beneficial Foundation).	National research and data (eg Winterbourne View / Southern Health), Accessible Information Standards	2,3,4,6,7,8.	Research, service design and improvement	Staff (FC) & volunteers University of Portsmouth Beneficial Foundation?

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Source of information – priorities have been determined from discussions with stakeholders, review of advocacy cases, feedback into HWP and from Board.

Resources – to achieve the above priorities, leads for each activity will be allocated within the team and support sought from volunteers and researchers from external partner agencies, including the University of Portsmouth and Public Health Community Fellowship.