

# Board Update - Projects and Thematic Priorities

# April 2020

# Immediate pre-Covid workstream:

## Two live projects

- NHS Admin commissioned project with the Kings Fund and Healthwatch England
- o Hospital Discharge have you heard what we've heard?

## Two projects in planning

- Mental Health
  - Refining three possible projects for final selection ASAP
- Care at Home
  - Working with SCC to assess possible changes to tender process with service users

## Where are we now?

## NHS Admin - project complete (for now) and delivered

- Undertook a small number of interviews before shutdown
- Proactively chose not to continue asking for experiences as Covid-19 escalated
- In agreement with KF and HWE harvested experiences from our existing database to add to the interviews already carried out
- Provided 39 experiences in total along with a high-level analysis against an original agreement of 15 targeted interviews and no analysis
- KF have project on hold; potential for further work post Covid

Our local analysis showed this could be an area worth returning to. The consequences of poor admin that we heard about were significant:

- Wasted NHS resources: missed appointments, unnecessary GP presentations, unnecessary work by NHS admin staff
- Compromised health outcomes: Delays to treatment and followup, or inappropriate treatment

## Hospital Discharge - complete and posted on our website but not publicised

- Refocus for Discharge priority; opportunity to open conversations and build relationships with local Acute trusts
- Review of What We've Heard about hospital discharge over the past 2 years
- Report on 150 experiences gathered over the past 2 years: report posted on our website
- Under current circumstances unlikely to gain an audience, and inappropriate to publicise: will review this in the autumn
- Key findings
  - Nearly half the experiences related to clinical security, quality and safety of the discharge - lack of information, signposting or referrals, early readmission to hospital, or general lack of confidence in the discharge
  - Around 3/10 were about the discharge process timing, disorganisation, poor communication
  - Around 2/10 related to arrangements made at the hospital for onward social care - lack of assessment, no help finding onward care, discharge to inappropriate care homes

# **Projects in Planning**

## Progress on all projects in planning has halted

## - Mental health

- Physical health checks for Serious Mental Illness this is a GP led service and will need GP services to stabilise again before it can be progressed
- o Peer support for Perinatal Health on hold for the foreseeable future
- The experience of dementia diagnosis not possible to complete without active engagement; experiences likely to be heavily impacted by current situation

#### - Care at Home

Retender very likely to be pushed back to 2021

The Covid-19 crisis has provoked a seismic change in health and care service delivery: we need to respond to people's experiences as they unfold in the recovery phase. It is very likely we will need to completely revisit our project plans for the rest of 2020/2021.

## **Current Workstream**

## **Strategic review of Thematic Priorities**

In Q1 we review our current priorities, generally working to replace a priority that has been running for a number of years with a new priority.

This year the review will go a little further, asking three questions

- Do we need thematic priorities? What is their value and how can we maximise this?
- What is a 'good' theme? Are all themes equal? How do we ensure our themes are a powerful startpoint for influential projects?
- How should we select our themes? Who or what should influence our choice?

## As a startpoint we have

- Reviewed past approaches
- Mined the memories of our Greybeards!
- Reviewed other local Healthwatch approaches
- Reviewed past themes and projects

We are convening a Priorities Advisory Group which will meet mid May, with a Board and team workshop (subject to logistics) on the 16<sup>th</sup> June 2020.

## What have we learned from Advocacy?

While the Coronavirus crisis is preventing fresh engagement we have the opportunity to focus on existing knowledge. This quarter we will review and report on what we can learn from the cases we help with Advocacy. This will start with a review of the experiences shared from Advocacy and discussions with our advocacy partners. We aim to report late this quarter or early in Q2.