



Healthwatch Portsmouth Board Meeting 17th December 2020 Report from Project Manager

Coronavirus

Further to my report to the September Board meeting Healthwatch Portsmouth (HWP) has been striving to provide information to the public about available services and support and to gather feedback on people's experiences of health and social care during this unprecedented period of COVID-19. We have been taking part in online strategic level meetings, being the 'voice of the patient' in discussions and decision making. It has been an extremely challenging period and while there is now a vaccine against COVID-19 the need for social distancing will continue for some time into 2021. We had to move out of the Healthwatch Portsmouth offices in Southsea because the building is being sold; it has not caused us problems during the autumn because all our communication is digital at present and will be until April 2021. Portsmouth City Council will have by April '21 confirmed their awarding of a contract to a successful host organisation for Healthwatch Portsmouth at which point offices for the forthcoming activity year. I have provided a report (below) of the activities we have undertaken and initiatives we have been involved with between September and December much of which relates to the updated annual workplan for Healthwatch Portsmouth (July 2020 to March 2021).

UPDATED DEC HWP workplan 2020-21 July-March

NHS services have continued to experience seismic changes since September as the virus transition increased dramatically. HWP has continued to challenge the NHS Trusts providing care and commissioners of services to patients in Portsmouth to ensure that information on the availability of services and how it is provided is kept up to date since so much of what the public were trying to find out was only accessible via websites and social media. Our recently published report on HWP's review of GP surgery websites indicates that there is a huge variation in the amount of information that patients can obtain from different GP surgeries across the city. We are in touch with Portsmouth Clinical Commissioning Group (PCCG) to ask them to encourage GP surgery website improvement to help patients during this difficult time to access information. There follow some reports of feedback gathered both locally and across the region on the impact of COVID.

Portsmouth City Council Coronavirus survey results feedback

In July and August, Portsmouth City Council asked its residents to provide their feedback on the impact that COVID-19 was having on their lives. A total of 2,800 residents

responded to survey questions about their health and wellbeing, trust and confidence in local services, their economic situation, spending habits and lifestyle. Here are the headline issues people raised:

- the vast majority are following coronavirus rules and most are confident in the way local public services are handling the pandemic.
- people's biggest worries are friends or family catching coronavirus and others not following the rules, the national and local economy, the government's response to the pandemic and how long measures will go on for
- nearly a third of those responding said household finances have been negatively impacted, especially households with young children and low income households.
- Others reported some **positive changes** to their lifestyle:
 - less time spent travelling and
 - using technology more to keep in touch with loved ones

SCAS learning from COVID - [South Central Ambulance Service Learning from COVID-19 \(Sept 20\)](#)

[Healthwatch England COVID-19 Intelligence Update Oct 20](#)

Portsmouth City Council winter preparedness plans

<https://www.gov.uk/government/publications/adult-social-care-coronavirus-covid-19-winter-plan-2020-to-2021/adult-social-care-our-covid-19-winter-plan-2020-to-2021>

Shielding for people considered to be clinically extremely vulnerable to COVID-19

In early October the Healthwatch Portsmouth Board was very concerned about the lack of government advice on shielding for those people who had previously been written to by NHS England and advised how to protect themselves in the early weeks of the pandemic. With rising transmission and infection rates in September and Government plans being discussed for introducing regional or tiered approaches to bring in additional measures to reduce the rapid rate of spread of the virus in communities concern was raised on the vacuum of information about shielding. Those who had previously been shielding between April and July had received communication from NHS England. Healthwatch Portsmouth felt there was a clear need for additional guidance to be issued to those same people from August onwards. We contacted Healthwatch England to push the message to NHS England to ask for such. Initially the response was that it would be down to local authorities (Directors of Public Health) to issue local guidance rather than link further guidance on shielding to the national policy of the three-tier approach on area's risk factors of infection. A few days later national guidance was issued:

[updated guidance on shielding and protecting extremely vulnerable persons from Covid-19](#)

I am sure we can't take entire credit for having influenced the Government but our HWP voice along with others in health and care will have had an impact on the Government.

Additionally an online Coronavirus Shielding Support Service has been set up which is encouraging people who have been identified as clinically extremely vulnerable to infection from COVID-19 to register where they can update their details should they wish

and request access to a priority supermarket online delivery slot if they do not already have one.

Current cases of COVID-19 in early December IN Portsmouth :299

Breaking news today at lunchtime: Portsmouth will go into Tier 3 on Saturday.
(An infographic of what this will mean for people in the city will be on our website)

Portsmouth based vaccination from 8.12.20: we issued an update

NHS England have said that people aged 80 and over as well as care home workers will be first to receive the jab, along with NHS workers who are at higher risk.

The launch of the local programme of high priority vaccinations started at QA Hospital.

There are 50 hubs in the first wave. We were delighted to hear that Portsmouth Hospitals University Trust, was included in this to offer COVID-19 vaccinations. Patients aged 80 and above who are already attending hospital as an outpatient, and those who are being discharged home after a hospital stay, will be among the first to receive the life-saving jab.

Any appointments not used for the over 80s or care home workers will be used for hospital healthcare workers who are at highest risk of serious illness from COVID-19.

NHS staff will be trying to overcome the significant challenge to vaccinate care home residents as soon as possible. GPs and other primary care staff are also being put on standby to start delivering the jab to patients in the priority groups. A small number of GP-led primary care networks will begin doing so during the following week (week beginning 14 December) with more practices in more parts of the country joining in on a phased basis during December and in the coming months.

Vaccination centres treating large numbers of patients in sporting venues and conference centres will be set up soon to administer to more people once further supplies of vaccine become available.

All people vaccinated will need a booster jab 21 days later. Current research states that a further week is required after this second jab of the vaccine until full immunity to COVID-19 is achieved. Scientists are working out if immunity starts sooner than this and will provide an update as soon as possible.

HWP received today news that 'Together in Hive Portsmouth' were approaching their registered volunteers to provide transport and support to housebound 80 year olds to enable them to attend their COVID-19 vaccination appointments. We raised concerns about extremely late notice given which prevented any mitigation of the potential risks generated of The Hive having approached the volunteers who have usually been able to help with dog walking and collection or prescription collection. We raised the matter with Portsmouth City Council and have been informed that Solent NHS Trust will vaccinate housebound residents who are 80 years old and that the matter would be looked into. We were pleased that swift action was taken.

We Said - You Did :

Between September and December here are the key changes we achieved in service delivery or service planning as a result of patient and user feedback and our escalation:

(A full report of the impact we have had in this area is being produced for Portsmouth City Council as part of contract reporting, to be forwarded to HWP Board.)

September:

Portsmouth Hospital University Trust patient questionnaires x 2:

- changes made to 86% of our recommendations for patients offered ED appt via 111
- Changes made to 67% of our recommendations for patients arriving at ED front door

Portsmouth Hospital University Trust patient pathway and admin procedures - cancer:

- changes made to admin coding and shared clinic patient pathway for outpatient cancer appointments after patient feedback on excessive delays due to admin
- Staff to *proactively* ask if patients have Qs rather than wait for patient ask Qs

COVID testing in Portsmouth:

- HWP voice included in media coverage supporting Portsmouth Councillors' campaign for more COVID tests to be made available. We are seen as an important local voice.

October:

Make Every Contact Count (MECC) training for frontline health and care staff:

- Further to HWP Board mtg (Sept) Portsmouth City Council arranged for HWP to receive free online MECC training course and committed to broadening take-up.

Shielding Advice during 3 Tier System:

- HWP Board meeting raised concern about lack of shielding advice for clinically extremely vulnerable in absence of Government guidance during 3 Tier System. Gov had issued advice in first lockdown and advised about un-shielding in Aug. HW England raised on our behalf with NHS Eng; shortly after guidance was issued.

November:

111 First patient pathway and public communications plan on new way to access A&E:

- HWP achieved a policy change by NHS England on patient pathway for initial assessment when patients present for non life-threatening urgent care in A&E
- HWP feedback influenced NHS Dorset to delay their launch of '111 First' until 3 months of public communications had elapsed to help achieve behaviour change.

Regular COVID-19 testing for people living in Supported Living and Extra Care facilities:

- HWP raised concern with HWE of Government plans for one-off COVID-19 testing for people with learning disabilities in Supported Living and Extra Care (SL EC). We cited a health inequality. Care home residents were to be tested regularly. Dept Health & Soc Care asked for extra funding for regular testing in SL EC homes

GP surgery website information for patients on flu vaccination programme:

- HWP contacted local GP surgery to find out what patients had not been invited to receive flu vaccinations despite their being in a high priority age group and should have received it earlier in autumn. GP surgery gave us good info and agreed to upload this on to their website to inform their (992) patients on the waiting list.

December:

Urgent and Emergency Care Standards - NHSE pilot to gather patient experience:

- HWP undertook community-based research on patient experience of the pilot NHS Urgent and Emergency Care Standards (trialled last October). NHSE in response to the Healthwatch England report (using HWP gathered feedback) and HWE produced recommendations have been **used as a yard stick of the public's wishes and national policy has been shaped around these preferences.**

**NHS England are consulting on the proposed changes as set out in the Report .
The consultation started on 15th December and runs until 12th Feb 2021.**

Strategic matters

Healthwatch Portsmouth Board members and I have been busy representing the views of patients and the public of Portsmouth in a wide range of strategic level meetings across the city during this COVID-19 period, participating in online hosted meetings and calls. We have made an impact with the Portsmouth University Hospitals Trust and in particular on the Trust's Shared Assurance Improvement Programme. Healthwatch has also made significant contributions at a strategic level in the following groups and committees: Mental Health Military Alliance, COVID-19 Mental Health Alliance and its Community Engagement Sub Group, Positive Minds steering group, the Learning Disability Partnership Board, Portsmouth Adults Safeguarding Board, Portsmouth University's graduate health and social care recruitment programme, the University's Patient and Service User Forum, Portsmouth City Council's Health and Wellbeing Board, Portsmouth City Councils' Local Resilience Forum Health Protection Board's Local Engagement Board Portsmouth Clinical Commissioning Group's Primary Care Commissioning Committee, Solent NHS Trusts' Community Engagement Committee and the Patient Family Carer Collaborative (PHUT).

We challenged in 'mid November Solent NHS Trust to explain what the value added to mental health services in Portsmouth would be from the bringing together of statutory agencies and the voluntary sector in Portsmouth and South East Hampshire. We are keen to find out about the psychological

Await Anthony's critique of David Noye's response 19.11.20 - received, add in here

We challenged Portsmouth Hospitals University Trust on the decisions taken as an Early Mover in the 111 First initiative that was being trialled in a handful of locations. There

is more detail below on the 111 First initiative but we are concerned at the recent decision by the Trust to continue to re-direct patients to contact 111 if they arrive at the door of the Emergency Department having initially been assessed on arrival if they present with a life-threatening urgent care need. Portsmouth University Hospitals Trust decided not to change their patient pathway despite the changes made at the end of November to the national roll-out of 111 First which was based on feedback they had received from Portsmouth. HWP has since asked how many patients on a daily basis are continuing to arrive at QA Hospital's A&E department and being directed to call 111 for their urgent health care need further to an initial assessment on site. We asked to see patient feedback responses to a questionnaire PHUT is issued to patients who experience this local pathway. To date we are still waiting for a response to our requests (24th Sept and 1st Dec).

Health and Wellbeing Board (HWB) meeting 25.11.20

I attended as the representative for Healthwatch Portsmouth and raised the following in relation to the Portsmouth Blueprint- refresh 2020 that the HWB was asked to consider:

What was the reason for setting the target at 67% for Annual Healthchecks for people with Learning Disabilities

We promoted our carers survey to find out the experiences of Portsmouth's unpaid carers during COVID <https://www.healthwatchportsmouth.co.uk/whatmattersmost/>

We were concerned about the proposal for changing the remit for Positive Minds from the original principle of supporting people with low level stress and anxiety to supporting people presenting with serious mental illnesses (SMIs). We will be raising these issues along with other issues at a meeting of the Positive Minds Board.

Regarding plans to provide mental health support for Children and Young People; we asked what does the word 'seen' actually mean? Is it the time frame describing from when the phonecall is made by the patient to being registered, only to be put on a waiting list for future treatment? Or does it mean the time between contacting CAMHS and receiving treatment?

Regarding adult care workstreams we welcomed the HWB's support and promoting the uptake of the training course Make Every Count (MECC) suggesting it is used for council staff training. We recommended MECC to be offered to as many frontline health and care staff as possible locally.

With regard to support to be provided for bereaved families and loved ones Healthwatch Portsmouth offered the guide for Healthwatch Hub staff who answer our landline calls to as a means of support when the public phones Healthwatch. Here is a link to the page on our website that introduces the guide: [support for people dealing with death and dying](#)

Operational matters

Healthwatch Portsmouth Operating Framework 2020

It has not been possible to make progress since the first Task and Finish Group meeting in January 2020 with regard to reviewing what Healthwatch Portsmouth does well and could improve upon due to the change in activities that we find ourselves doing during the Coronavirus outbreak. We will resume early in the New Year our work on responding to Healthwatch England's Operating Framework.

Investing in Volunteers - Help and Care's application for approved status

Help and Care have applied for the Investing in Volunteers (IiV) , a quality charter mark that voluntary sector organisations strive for. During 2020 our host organisation has been progressing through the stages of assessment. They are now at the stage of being asked to provide evidence from those people they involve as volunteers in readiness for the assessment week in 'mid October. A group of 3 Healthwatch Portsmouth volunteers, including a HWP Board member spoke to the assessor during an online meeting about their volunteering experience with Healthwatch.

Healthwatch Portsmouth Volunteers

Have been gathering feedback from their networks and providing intelligence on what is happening locally and the impact that COVID-19 is having on patients' access to local health and care services. In 'mid August a group of our volunteers completed their 'desk based review' of GP Surgery websites in Portsmouth to find out how easy they were to find out key information for patients as well keeping well during COVID. The results are published here now [GP surgery website review: HWP report FINAL Nov 20](#) The collated data appears [Data Table 1](#)

Healthwatch Portsmouth held its online volunteer drop-in events in October, November and yesterday. We will continue to offer an online meeting until we can meet face to face in 2021.

Volunteer recruitment has continued through our Eyes and Ears campaign during this period as we offer online activities to people who wish to support our work.

HWP was proud to have published the community research that was co-produced by the Healthwatch Portsmouth volunteers and staff team on patient awareness in GP surgeries of the new Extended Access Service at Lake Road offering additional GP appointments.

[Extended Access Service research FINAL](#) [Table 1 graph](#) [Table 2 results](#)

Healthwatch Portsmouth's digital reach during COVID-19 pandemic 2020

Month	Mar	April	May	Jun	July	Aug	Sep	Oct	Nov	Totals
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Facebook Page views of our page	251	229	173	89	91	136	229	161	165	1524
Facebook New followers (liked page)	27	10	11	11	3	13	33	20	18	146
Facebook Post reach (People see our posts)	3192	246	556	832	469	1299	907	2613	4296	14,410
Facebook post engagement: people who interact with post	507	372	631	760	448	518	424	2693	1279	7632
Twitter Impressions (People see our posts)	4988	4014	7397	3941	7007	9307	2554	4146	8866	52,220
New Twitter followers	0	+6	+4	+2	+9	+3	+15	+1	+82	122
Twitter Retweets (shared our posts)	11	16	8	11	11	3	5	16	13	81
Twitter HW page visits	106	106	63	66	40	22	110	110	483	1106
Our social media presence March – Nov 2020	9082	4999	8843	5712	8078	11301	4277	9760	15202	77,254

The Facebook post that received the single highest reach (779 views) in the autumn was an info graphic post on mental health

“A mental health guide to coping with lockdown in the winter”

The Twitter posting that received the most views (368) related to our Carers survey ‘What Matters Most to unpaid carers’ healthwatchportsmouth.co.uk/whatmattersmos... [#COVID19 #WhatMattersMost pic.twitter.com/AUwVaXPGV5](https://twitter.com/AUwVaXPGV5).

Independent NHS Complaints Advocacy Service

Local Resolution Meetings – digital or face to face

With the re-start in July of the NHS Complaints Handling services at both Solent and Portsmouth Hospitals University Trusts the staff teams were working out how to offer Local Resolution Meetings for clients. The offer of digitally hosted meetings was not automatically offered, with the Independent NHS Complaints Advocacy Service taking the initiative to undertake individual risk assessments prior to making decisions about

whether it was safe for the staff member and indeed the client who had made the NHS complaint to attend a meeting that was organised face to face by the Trust. We encouraged one Trust to understand the needs of the person making the complaint and the advocate who had been asked to accompany their client to the meetings. We stated that further to undertaking a risk assessment it was not deemed safe for the face to face meeting to go ahead. A digitally based meeting was offered. For the other Trust we held our ground in the face of a digital solution not being offered and say that we would not be attending any face to face meetings but that support could be offered by the advocate via video conferencing if the person making the complaint wished to meet with the Trust face to face but that a digital option should be offered automatically for any Local Resolution Meeting during the current COVID-19 pandemic.

Mental Health

COVID-19 Mental Health Alliance for Portsmouth and South East Hampshire

We have continued to engage with the Mental Health Alliance through the autumn, asking that the principles of Make Every Contact Count is included in the strategic plan and that the work of Healthwatch Portsmouth and Forgotten Veterans UK is acknowledged in the list of partner organisations currently supporting the Alliance. We questioned what were the tangible outcomes from the Alliance for people with long term mental health conditions in the city. We also wanted to find out about psychological scenarios that had been developed in working through how the Alliance could help. We continue to contribute ideas from a lived experience perspective in the hope that the challenges we make encourage more rigorous testing before roll-out.

Positive Minds

The Positive Minds drop-in service re-opened in Portsmouth in September but in the autumn was the subject of a review of its purpose. HWP has raised concerns about the apparent change in support offered from low level stress and anxiety to the centre offering support for people with Severe Mental Illness including personality disorder. We are concerned that there will not be a drop-in facility for people facing low level anxiety and they will need to seek a GP appointment which we know at present is challenging in terms of the availability of appointment slots. We are raising our concerns the project board reviewing the 'terms of reference' of Positive Minds.

Community

Portsmouth CCG MCP Board update:

Further to the update I provided in September we again met the facilitator of the Multi-speciality Community Provider (MCP) project Board earlier this week. Due to the ongoing COVID-19 pandemic lots of the projects that had been anticipated to start later in the year have had to be postponed and will be reviewed again in the New Year for priority. The Long Term Hub which had been supporting people with respiratory and diabetes conditions is to be re-organised with a holistic 'symptom-based approach' to be used.

Learning Disabilities

Healthwatch Portsmouth have raised a concern with Healthwatch England in early November that we received intel on locally, that may be occurring elsewhere in England but hadn't been reported by other local Healthwatch.

One of our Board members who chairs the Health Inequalities Sub Group of the Portsmouth City Council Learning Disability Partnership Board reported that a representative of Shared Lives raised a concern at the sub group's meeting in October. The Shared Lives representative said there were plans for a single *one-off* COVID test to be organised in late October to be given to residents in Supported Living facilities in Portsmouth compared to planned *frequent* testing for residents in care homes in Portsmouth. A GP, representing Portsmouth CCG at the meeting raised concern too.

Healthwatch Portsmouth felt that this national policy represented an imbalance of care and possible health inequality for people with learning disabilities who are residents in the Supported Living facilities in the city. Healthwatch Portsmouth's Chairperson, Roger Batterbury, will be raising this matter at this month's Health and Wellbeing Board on which we have a seat.

Healthwatch England raised the matter with the Department for Health and Social Care. Resources are being requested to be able to provide residents of Supported Living and Extra Care facilities to be included in the plan for regular testing for COVID in care homes plan. In addition, the care staff who provide support to people in their homes, 'domiciliary care staff', will also now be able to access weekly tests for COVID from 1st December. Really great news.

Accessing Eye care across Hampshire and Isle of Wight for people with learning disabilities and/or autism

Wessex Voices has published a new report today, [Improving Eye Care Across Wessex](#), see attached. The report highlights findings and recommendations from 120 people with learning disabilities and/or autism living in Dorset, Hampshire and the Isle of Wight, about their experiences and barriers to accessing sight tests. Our engagement was done pre-Covid (from Dec 2019 to Feb 2020.)

NHSEI South East will be looking in Spring 2021 at how the recommendations can be implemented.

Evaluating Wessex Cancer Alliance services across Hampshire and Isle of Wight - An opportunity to get involved

The Wessex Cancer Alliance are committed to providing personalised cancer services that respond to the needs and experiences of everyone diagnosed with cancer. It is important that we evaluate these services, to assess their impact and understand whether they have met their desired outcomes. We have therefore commissioned the Macmillan Survivorship Research Group (MSRG), University of Southampton, to design and deliver these evaluations. The Alliance was seeking involvement in a User Reference Group from October which we promoted through our social media platforms.

Meeting up to three times a year over the next two years (Meetings will take place on Teams or Zoom)

- Reading documents in preparation for URG meetings and participating in discussion

It was anticipated that the User Reference Group will provide an opportunity to get involved in all stages of the evaluation, including:

- Evaluation design, shaping evaluation delivery, interpreting emerging evaluation findings, shaping recommendations for practice, advising and contributing to outputs from the evaluations

In addition, Wessex Cancer Alliance is inviting patients, carers and members of the public, to join their Involvement Network. If you have been affected by cancer and wish to share your experiences or would like to help shape the future of cancer services in Hampshire and the Isle of Wight, then please see the poster attached or click on the link below, to find out more about how to join the Network and ways you can get involved:

<https://wessexcanceralliance.nhs.uk/get-involved/>

Here is a link to the [Wessex Cancer Alliance bulletin November 20](#) in which there are messages of support being aired on local radio to help listeners keep well this winter during COVID-19. There is a report on the impact of Covid-19 on Cancer care

[forgotten c: impact of covid-19 on cancer care](#)

Dental Services in Portsmouth

October update on re-commissioned general dental contracts in Portsmouth, Tadley and Alton

Healthwatch Portsmouth is sharing information provided by the Wessex Area Dental Committee of NHS England to the Portsmouth Health Overview and Scrutiny Panel meeting at the end of November regarding NHS dental appointments availability in the city from next April:

As we previously updated, the original contract commencement date was paused due to COVID-19 restrictions which impacted on the completion of the procurement process. As you know we have been working with the preferred bidders in the **two areas in Portsmouth** to mobilise the contracts at the earliest possible date. We have now carried out additional due diligence and can confirm the **Portsmouth South** lot was awarded to Smile Dental Care Ltd on 29 October 2020. The premises at 2 Hanway Road, Portsmouth, PO1 4ND will not require D1 planning consent as the building is already being used as a medical practice. The successful bidder anticipates that building refurbishment will commence during November 2020 and complete early March 2021. Recruitment of the dental practice staff should complete during February 2021. Providing that the CQC are able to carry out a practice inspection as soon as the refurbishment is complete, it is anticipated that the practice will open on 1 April 2021 with a capacity to offer 20,000 NHS appointments. Whilst this may seem a lengthy time for refurbishment to take place, it is necessary to ensure that contractors and associated staff involved in the refurbishment are working within strict COVID-19 guidance and social distancing measures; it is not anticipated the current lockdown will impact on the refurbishment due to the guidance the contractors are following. However, we would point out at this time that if there are further lockdowns or key personnel are unwell, or must self-isolate, this position may change.

Regarding the **Portsmouth North** procurement was completed in early November and a formal contract awarded on 10 November to Cosham Dental Surgery to provide NHS dental services starting 01.04.21 providing an additional 10,000 units of dental activity. An extension is being built to the existing premises that has been providing only private dental treatment. Additional space is being built to provide for health promotion and training.

Update on contracting for Special Care and Paediatric Dentistry (Hants & Isle of Wight)

NHS England and NHS Improvement, South East Region has contacted Healthwatch Portsmouth to update us about the issuing of new contracts to provide NHS Special Care and Paediatric Dentistry services* for people living anywhere in Hampshire and the Isle of Wight area. The existing contracts for these services were due to come to an end in March 2021 and a process for re-commissioning these services had been under way but needed to be paused due to COVID-19. We have been told that the re-commissioning process is now re-starting and that all newly commissioned services should start from 1 April 2022. We are told that the existing contracts for these dental services have been extended until the end of March 2022 to allow for the services to continue and for the full re-commissioning process to take place.

**Special Care and Paediatric Dentistry services (sometimes known as Community Dental Services) include a wide range of services provided for both children and adults who unable to attend general dental services due to additional needs, such as physical or learning disabilities, or need extra support to receive treatment. The Special Care and Paediatric Dentistry service supports patients needing dental care in their own homes as well as children in the care of social services or with complex social problems.*

NHS England and NHS Improvement worked with Public Health England to carry out a dental needs assessment to find out where the greatest need was for these services in order to decide on contract values for the services across the area.

NHS England and NHS Improvement wanted to hear from Community Dental Service staff, dentists working in the area, people with disabilities, the public by using a survey which Healthwatch Portsmouth (through Wessex Voices) promoted as well as the views of existing patients of Community Dental Service.

We were pleased to read that NHS England and NHS Improvement have reviewed the feedback they received and added the following things they want contract bidders to show in their applications:

- how they will communicate with patients with different needs
- what adjustments they will make to ensure that they provide a welcoming environment for patients (such as having music and toys in their waiting rooms)
- the premises they use are fully accessible and comply with the Equality Act 2010
- information on patient parking and for travel by public transport to the premises is included.

When we receive a further update from NHS England & NHS Improvement we will publicise it.

Wheelchair service

Healthwatch Portsmouth is a member of the Wheelchair Service User Group - we have attended 2 meetings since April with AJM Healthcare which is now running the service. In November Healthwatch Portsmouth helped with the review of what information would be useful for patients to receive as new users of the service and new services being introduced.

We will promote the wheelchair service in our forthcoming newsletter, they in turn will promote us and ask 3 of their Portsmouth based clients if they want to join the HWP mailing list.

I suggested that the Wheelchair service looked at our HWP Service Directory to link with Portsmouth based disability service user groups to raise awareness and invite them to take part in their service user forums.

There is a service user guide (when a wheelchair is received) that we will feed in to the updated version of.

Primary Care

Hanway Road Surgery - now merged with Portsdown Group Practice - patient feedback

Board members may recall that in the spring an application was made by Hanway Road Surgery to merge with the Portsdown Group Practice. There were high hopes set (from the statements made by the practice) that patient services and access to treatments would be improved with the merger. We have learnt from feedback provided by a patient of the newly merged practice group that they are frustrated with lack of advance patient information regarding access to flu jabs and difficulty in getting through to their surgery (now Portsdown Group Practice).

In April you will recall that there was an agreement by the PCCG PCCC to approve of the merger and a patient letter (which at the time Healthwatch Portsmouth praised for its clear and helpful information about what patients could expect with the proposed merger) had been prepared to support the process. There was mention in the patient information letter, that we received a copy of in the spring, that Hanway patients would transfer at the end of October to PGP (but it would appear that this has already happened at the start of the month) which may have been unsettling for Hanway registered patients if they did not receive prior warning of the earlier transfer.

In addition, information regarding flu jabs that had been sent out previously to Hanway patients does not appear to have been sent out to PGP patients, who were understandably anxious during the early autumn period regarding access arrangements for flu jabs.

The patient appears also to be struggling to reach PGP by phone. The patient letter in the spring took great pains to describe the workings of the new Contact Centre - which was going to improve the patient experience, does not appear to be fully operational.

This patient feedback on how the recently merged Hanway/PGP is operating is disappointing in view of the ‘high bar’ set in April.

COVID-19 testing and vaccination programme for primary care staff

This week’s update from the NHS England’s Primary Care team: Lateral flow antigen testing will now be rolled out to asymptomatic patient-facing staff delivering NHS services in England.

Lateral flow antigen testing, in conjunction with PCR testing, aims to reduce further transmission and enhance the resilience of NHS services, by improving virus detection.

Patient-facing staff will be asked to test twice-weekly using self-administered nasal swabbing and report their results through an online platform. Any positive lateral flow antigen tests will need to be followed up by a confirmatory PCR test.

Secondary Care (and community based care)

Carers

October update

The Carers Centre re-opened in early November to enable small groups and individuals to access the centre by appointment. Phone support continued to be offered. More detailed information will be provided during the update to this Board meeting from the Carers Centre.

HWP Carers project : ‘What Matters Most to unpaid carers’

<https://www.healthwatchportsmouth.co.uk/whatmattersmost/>

We launched on 16th November our flagship carers feedback gathering project to find out what has been the experience of Portsmouth residents, who due to COVI-19 had to become carers overnight, what they need and what needs to change. Headline results are being prepared at the moment and will be made available at the end of the year. The full report will be available in February after have close the survey ‘mid January.

Providers

NHS England Health Infrastructure Programme

The Government announced in early October their Health Infrastructure Plan which involves a range of measures to improve hospital facilities in England. There are plans for 40 new hospital projects to be conducted over the next 10 years covering

many parts of the country, the closest project to Portsmouth being work based on making extra provision for Hampshire Hospitals Foundation Trust (Basingstoke).

Care Quality Commission - update on inspection activity

“How we will regulate during the next phase of the coronavirus (COVID-19) pandemic. From 6 October, we will begin to roll out our transitional regulatory approach, starting with adult social care and dental services.

Throughout the pandemic, our regulatory role did not change. Our core purpose of keeping people safe was always driving our decisions. However, as the risks from the pandemic change, we’re evolving our approach in a way that is both sensitive to the changing circumstances of providers, and that also puts people who use services at the centre of what we do.

Our transitional regulatory approach is flexible and builds on what we learned during the height of the pandemic. The key components are:

- A strengthened approach to monitoring, with clear areas of focus based on existing Key Lines of Enquiry (KLOEs), to enable us to continually monitor risk in a service
- Use of technology and our local relationships to have better direct contact with people who are using services, their families and staff in services
- Inspection activity that is more targeted and focused on where we have concerns, without returning to a routine programme of planned inspections.

We will continue to adapt our transitional regulatory approach, and remain responsive as the situation changes. We’ll also be considering longer-term changes to how we regulate, which we’ll explore through engagement on our future strategy.

Developing our monitoring approach

In response to the pandemic, we developed the Emergency Support Framework (ESF) as an additional monitoring tool to support structured and consistent conversations with providers. Combined with other sources of information, the ESF helped us to understand where there were risks of unsafe care, prioritise our support to address this, and share learning from providers that were using innovative ways to manage.”

State of Care report 2019 -2020: Care Quality Commission

Care Quality Commission issued their annual review [Care Quality Commission's State Of Care 1920 -full report](#)

The CQC issue a press release on 15th October with some stark headlines:

- Pre-COVID-19, care was generally good, but with little overall improvement and some specific areas of concern. Since the arrival of COVID-19, this remains true, but so much else has changed. In order to learn lessons for the future, there are elements to build on - and elements to reassess.
- **Progress in changing the way care is delivered, expected to take years, has been achieved almost overnight**

- COVID-19 has magnified inequalities across the health and care system
- The need for health and care services to be designed around people's needs is even more critical
- In Social care COVID-19 has not only exposed but exacerbated existing problems
- There will be extra pressure across the system this winter

Reporting of Serious Incidents (SI) during early COVID-19

Healthwatch Portsmouth asked both Solent NHS Trust and Portsmouth Hospitals University Trust (PHU) about the reporting of Serious Incidents (SI) during the early period of the COVID-19 pandemic due to anecdotal evidence of a drop in numbers reported.

PHU reported back to Healthwatch Portsmouth that they were monitoring this carefully to see if there were any specifically COVID-19 related SIs during the early period of the pandemic. Findings were insignificant and pointed to a general weekly total of 8 or 9. The recurrent theme was the transfer of patients to an appropriate space but these were very small numbers of the total number of SIs reported. The Trust reported that, in general the number of SIs between March and June went down due to fewer patients being in hospital but the ratio of SIs to patients in the hospital remained constant. The weekly number of SIs is now increasing to the pre-COVID levels with the theme being of a timely transfer of either red (COVID-19 infected) or green (COVID-19 free) patients. It was found that some patients with COVID-19 did experience pressure ulcers and this is going to be researched. Initial thoughts were that COVID-19 infected patients were more susceptible to developing pressure ulcers but the Trust will check on the cases.

Solent NHS Trust reported that in total 43 SIs were raised in 2019/20. In Quarter 1 of 2020/21 (April - June) there have been only 2 SIs declared. Solent say that this is largely due to their reduced activity and bed stock during the step-up period. Many of their services stopped operating and some of them moved to a virtual model which generated fewer incidents and fewer SIs. Solent confirmed that they had not changed their decision making processes to classify SIs. Incidents were still reviewed and validated, incident review meetings held to discuss those that may require additional investigation and the NHS England SI Framework (2015) remains the process for decision making.

Quality Accounts 2019 - 20 from Solent NHS Trust and Portsmouth Hospital University Trust - HWP comments

Healthwatch Portsmouth was asked to provide comments on the draft Quality Account documents that were produced by Solent and Portsmouth Trusts.

We provided comments on a wide range of topics focussing on user engagement. The final versions of the Quality Account will be published later this month in line with the amended deadline that NHS England set for Trusts to comply with this year.

Solent

The **Veteran's Mental Health High Intensity Service (HIS)** launched 16th November 2020 for the Hampshire and Isle of Wight area

A 111 Crisis (phoneline) Service was also launched covering the South East Region

The High Intensity Service (HIS) has been developed using feedback and input by veterans and their families, as well as the NHS England and NHS Improvement Armed Forces Patient and Public Voice Group.

HIS will provide care and treatment for veterans who are struggling with their mental health and wellbeing, are in a mental health crisis and / or need urgent and emergency care and treatment.

The new service will provide:

crisis care, therapeutic inpatient support, help with co-ordinating care across organisations, support and care for family members and carers where appropriate.

Solent NHS Trust is providing the service for the South East region of England

Access to the High Intensity Service is through a patient's GP surgery, community mental health services and the 111 service. Access to HIS is also available via the Veterans' Mental Health Transition, Intervention and Liaison Service (TILS) Veteran's Mental Health Complex Treatment Service (CTS). Veterans families are to be contacted to inform them about the new service. Further information on the above services can be found [here](#)

We have asked Solent NHS Trust for more detail about the psychological scenarios that the High Intensity Service team have run and the role of the Community Response Team (CRT). We want to know if supporting a veteran with mental health challenges by providing a veteran-friendly team could be any more effective than current provision? We want to see proposed outcomes and targets and whether they are likely to help the veteran overcoming secondary issues (alcohol /substance misuse).

We would like to see there being a veteran's mental health centre based at a physical site, supporting veterans through a 3-6 month rehabilitation mental health programme to support the often complex mental health veteran issues.

Healthwatch Portsmouth attended the inaugural meeting of the HIOW Military Mental Health Alliance - Veteran Community Pathways meeting in early December.

The meeting appeared to raise more questions than it delivered answers to Healthwatch Portsmouth's previous concerns whether there would be tangible outcomes for veterans and their families from this new service. A small number of veterans' support groups are now involved with the initiative being delivered by Solent NHS including Forgotten Veterans UK and Veteran Outreach Support to provide better co-ordination and support of currently available services. We will be watching during the next 2 years for tangible outcomes.

‘Gathering Feedback From Patients’ workshop - what really matters to patients

Solent NHS Trust hosted a patient feedback gathering workshop to find out from a range of community partners how to go about gathering feedback from patients to find out what really matters to patients, how to ask that question and when to ask it. While Healthwatch Portsmouth welcomes the holding of any patient feedback gathering best practice discovery event we asked during the meeting on 20th November how this feedback gathering learning event related to other initiatives to learn techniques on feedback gathering best practice from the Community Partners engagement network that Solent have up and running and how both streams will combine to improve Solent’s organisational knowledge in this area. Key feedback from the day can be accessed via this link [Solent patient feedback gathering event 20.11.20](#)

We have opted to take part in the follow-up focus group to direct the ‘next steps for the Trust’ entitled ‘Feedback opportunities should be provided at every step of the way not just at the end of the journey’ which tends to be our speciality area of work.

Parking charges at St Mary’s Hospital for patients and visitors - re-started 7th Dec

We have been notified that Solent NHS Trust is re-starting car park charges for patients and visitors from 7th December 2020 following a Trust Board decision in November. Additional cycle parking facilities have been introduced at the site, together with a covered walkway (with night lighting) which will connect the available parking at Fratton Park football club with St Mary’s site.

Portsmouth (University) Hospitals Trust

Care Quality Commission Medicines Management review July 2020

HWP challenged PHUT to explain what plans it had in place on Medicines and discharge:

Healthwatch Portsmouth congratulated the Trust on the content of the report issued end September the Care Quality Commission (CQC) regarding its visit in July to review the Trust’s Medicines Management procedures. We noted a series of recommendations made by the CQC and that the Trust had stated in its Stakeholder letter that ‘we already have plans in place to address the areas for improvement highlighted in the report and drive further improvement for the benefit of patients in the communities we serve.’

In November, Healthwatch Portsmouth asked the Trust about its plans to address its ‘inconsistent approach across the Trust relating to medicines and the discharge process’. It is something that we highlighted in our 2019 report ‘HWP Third Walkthrough of QA Hospital Emergency Department’ in which we identified apparent delays in the system to support patients to both receive their appropriate medication and to be discharged in a timely fashion. Healthwatch Portsmouth wondered if the new Electronic Prescribing and Medicines Administration Programme (ePMA) would have a place to play in the Trust’s wider improvement plan on medicines and patient discharge? We await a response.

Real Time Feedback

The Trust have recently introduced real time feedback from patients on the wards. There were 2 collections of feedback in November with comments seen by staff very quickly so that they can pick up any plaudits or rectify any concerns. The overall aggregate satisfaction score was 8.4 out of 10. The question of compassion was rated 9.3 out of 10 showing a high level of compassion.

Portsmouth Hospitals Trust Emergency Department (ED) Transformation Plan - update on progress

I reported to the September Board meeting that Healthwatch Portsmouth will resume involvement in the development of the ED Transformation project, inputting patient family and carer perspective, once the current pressures due to the Coronavirus pandemic for QA Hospital have eased and the trial phase for the NHS 111 First service has been completed. (see below). The enduring pandemic has delayed further the resumption of meetings with Healthwatch about the Building Better Emergency Care (BBEC) project. HWP has recently been invited to discuss the organising of a virtual Walk-Through of ED in January with the Head of Quality and Patient Experience Ward Accreditation, together with a discussion about how we can resume patient engagement activity on the Building Better Emergency Care transformation project at QA.

NHS111 First: Early Mover site Portsmouth (University) Hospitals Trust

Further to the update I provided at the September Board meeting on the progress of the trial of '111 First' we have continued to be involved in very detailed discussions with the Chief Nurse about the way in which the service is being developed, working with the 111 call handlers and how the access arrangements for A&E is being communicated to the local population. We have been specific about our concerns for a potentially negative patient experience as the trial transitions into a full operating system and communications campaign is launched in the patient catchment area for PHUT.

Working with PHUT we provided input on a couple of patient questionnaires that the Trust had developed.

For the survey on which patients were asked if they'd been given a slot to attend A&E we achieved 86% (or 12 out of 14) of our recommendations acknowledged and changes made. For the survey for patients who had not been given a slot (and turned up to A&E to access urgent care) the **success rate for HWP recommendations to be adopted the by Trust was 67% (10 out of 15).**

We have been concerned though how those patients (who may be unaware of the new A&E access system) and are waiting for a call back from 111 and staying on site having

contacted 111 from the 'info pods' as directed to by the hospital's Clinical Arrivals Team now stationed outside A&E entrance and how have they been accommodated in a socially distanced way. With the second spike in COVID-19 hospital admittance there is even more pressure on access to the A&E department at this time with ambulances reportedly queueing outside the hospital due to difficulties with the flow of patients through the various urgent and emergency care departments.

Healthwatch Portsmouth has been raising its concerns about the impact on the patient of this new system of accessing A&E services and escalating these to Healthwatch England which has been seeking meetings with NHS England programme director for NHS 111 First. We met with NHS England in late November had heard that **NHS England has taken the feedback provided from Healthwatch Portsmouth and changed the way in which the national roll-out of the 111 First access to A&E services is introduced.**

1) There will no longer be an assessment on site if a patient presents at A&E, to then be told to phone 111 (and to have to be assessed again, the double triage aspect) which so concerned us.

2) Other trial site launch dates were postponed by 3 months to enable communications in the local area to be issued around 3 months in advance of the changes being made. This now gives people time to hear/read about the changes and adapt their behaviour and the choices they will make when deciding how to access urgent care. We have reiterated the need for the local NHS to engage with patients in a timely manner in advance of their proposing major service change to find out potential impact and adapt the proposed service changes accordingly if it was likely that negative patient outcomes would result.

We were disappointed to hear though that Portsmouth University Hospitals Trust have decided **not** to change their local patient pathway despite the changes made to national roll-out of 111 First. HWP has asked how many patients on a daily basis are continuing to arrive at QA Hospital's A&E department and being directed to call 111 for their urgent health care need having been initially assessed on site. We asked to see patient feedback responses to a questionnaire PHUT has issued to patients who experience this local pathway. We await a response to our requests (24th Sept and 1st Dec) for such. A national tv advert was launched on 1st December to inform the public about contacting **111 First** to coincide with the national roll out of the new way of accessing A&E care.

Healthwatch England has issued a national **survey** to find out people's views of 111 and A&E services - not directly asking about people's experiences of the trialled '111 First'.

Separate to NHS England's new A&E access route initiative the Care Quality Commission introduced in October a standard called 'Patient First'

'FIRST' stands for :

F = Flow

I = Infection control, including social distancing

R = Reduced patients in emergency departments

S = Staffing

T = Treatment in the emergency department

This document details a number of **standards to be assessed in all areas providing urgent and emergency care**. They will have to provide evidence of how they are met. This is a key piece of work which we will be looking at the implementation of in 2021. It has not yet been clarified though how the CQC will they will measure the standards set.

More information is available on the CQC website www.cqc.org.uk/publications/themes-care/project-reset-emergency-medicine-patient-first

Outcome from Urgent and Emergency Care Standards in A&E: HWP community research October 2019

As mentioned in the strategic section NHS England are recommending replacing the current 4 hour wait target for accessing A&E with measures which include:

- 15 min target to initial assessment for all patients - which must be a meaningful clinical assessment
- A 1 hour target for treating the most sick patients - i.e. heart attacks, strokes, sepsis etc
- Separating out the average waiting times for admitted and non-admitted patients so people have a better idea of how long they may have to individually wait.
- A guarantee that waits of 12 hours or more won't be tolerated (these have been rising steadily in recent years).

These proposed national targets match up with the things that people said mattered to them, a direct result of community based feedback gathering in Portsmouth along with 5 other localities influencing national policy. The national [consultation](#) closes 12th Feb.

Portsmouth City Council

Portsmouth City Council has been responding to the Coronavirus outbreak with a dedicated team to support the city's needs, spearheaded by the Local Resilience Forum. Here is link to the information page that is regularly updated:

<https://www.portsmouth.gov.uk/ext/coronavirus-covid-19/coronavirus-covid-19> Details of which services have been suspended and those that continue appear here.

Portsmouth Health and Care Update: October

During the summer Portsmouth CCG undertook thorough consultation and engagement with staff, member practices and city partners, as well as colleagues from the wider Hampshire and Isle Of Wight Integrated Care System (ICS), about the next steps in developing our Health and Care Portsmouth Commissioning Operating Model. Thank you to everyone that contributed to this.

Our NHS Portsmouth CCG Governing Board met in public on Wednesday 21st October to consider the proposals and the feedback received as part of that consultation. I wanted to inform you of the decisions made by the board.

The Governing Board reconfirmed its commitment to further integrated working with Portsmouth City Council under the executive leadership of the council's Chief Executive, and alongside the elected leadership of the council and clinical leadership of the CCG. As part of this we will support the further integration of key roles across our two organisations. This is an essential part of making sure we can continue to work together to deliver joined up, person-centred and high quality health and social care services in Portsmouth.

The Governing Board also reconfirmed that NHS Portsmouth CCG will continue to operate as a legal statutory entity.

However, the Governing Board **suspended decision making about the remaining recommendations to move to a managerial Accountable Officer role**; the proposed model would have seen NHS Portsmouth CCG sharing an **Accountable Officer role with other CCGs across Hampshire and the Isle of Wight, with this same Accountable Officer also fulfilling the role of the chief officer of the ICS**. The decision was made that the Clinical Chair of the Governing Board, would write to NHS England to ask for clarification about why the CCG's previous proposals - including to have a shared accountable officer between Portsmouth CCG and Portsmouth City Council - were deemed not appropriate. The CCG cited examples in other parts of the country where shared roles like this have been approved. Healthwatch Portsmouth awaits an update.

Visiting care homes : new guidance from Government 4th November

New guidance to support safe care home visits during lockdown

Portsmouth CC will be advising care homes in the city to follow the national guidelines rather than issuing any additional local guidance.

With regard to communications for residents or patients in 'step down' facilities, such as at Jubilee House, with friends and relatives, we reported to Solent NHS Trust that the patient's line to receive and make calls on had been out of service for some time. We have been informed that Jubilee House had been temporarily closed due to a COVID-19 outbreak including patients and staff, that it would need a deep clean and should open again this week. Patients have been sent to Spinnaker ward amongst other local units. Healthwatch has been assured that the patient phone will be fixed by the time Jubilee House re-opens.

COVID testing for people living in Support Living Accomodation and care home residents

Healthwatch Portsmouth has questioned the decision in Portsmouth for a single test for COVID-19 to be conducted for people living in Supported Living Accommodation while frequent testing is being planned for residents and staff in care homes. We pursued Portsmouth City Council's Director of Quality and the Chief Clinical Officer of Portsmouth Clinical Commissioning Group with our concerns who explained that it was a national policy decision rather than a local decision. We took our concerns to Healthwatch England who raised these with the Department for Health and Social Care (DHSC), citing an apparent health inequality likely to be experienced by people with learning disabilities who are reported to be 6 times more likely to die from COVID-19.

DHSC took notice of the concern raised by Healthwatch Portsmouth which was escalated to the national level and has requested that additional funding is provided to enable regular testing for COVID-19 for people in Supported Living and Extra Care homes.

IT equipment offer for care homes

Social Care Coronavirus Update newsletter on 7th Oct from Dept H&Soc Care. There was a feature (below) and I just wondered if PCC were going to apply to receive some iPads to improve communications for residents and their loved ones, as well as their being available for remote consultations? PCC have communicated this to all 39 care homes and encouraged them to apply.

Hampshire and Isle of Wight Sustainability and Transformation Partnership - transition proposal to become an Integrated Care System

As local systems gear up to transitioning from Sustainability and Transformation Partnerships (STPs), ours covers Hampshire and the Isle of Wight area, to Integrated Care Systems, which again will cover the same footprint the Government has issued a discussion document. [Integrating Care - Next steps for integrated care systems](#) sets out the next steps to building strong and effective integrated care systems. There is a consultation available until 8th January to get involved with. Here is the [survey](#)

The discussion paper is of interest to Healthwatch because the proposals call for the removal of barriers to integration across health and social care bodies, foster collaboration and more formally join up local leadership. In relation to governance and decision making there are proposals that

for governance: ICSs should involve all system partners in the development of service change proposals, and in consulting and engaging with local people

for decision making: every ICS should work to develop systematic arrangements to involve lay and resident voices and the voluntary sector in its governance structures, building on the collective expertise of partners and making use of pre-existing assets and forums such as **Healthwatch** and citizen's panels.

Ends

17th December 2020

Siobhain McCurrach, Healthwatch Portsmouth Manager.
www.healthwatchportsmouth.co.uk