

# Championing what matters to you

Annual Report 2021-22



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"During 2021-22, Healthwatch Kingston continued to demonstrate that they have the strong leadership and expertise needed to work effectively with partners and stakeholders locally. The team is skilled in ensuring the involvement of residents in the monitoring, commissioning and provision of local health and social care services and this is evident in the positive work carried out by the team this year. This includes the production of a key report 'Living with Long Covid in the Royal Borough of Kingston upon Thames', 'Pulse Check Report: Services for People with Diabetes', having a key focus on mental health as well as co-ordinating the All Age Learning Disabilities Partnership and work with Youth Out Loud. A big thank you to your staff and volunteers!"

Sarah Brown, Service Development & Commissioning Lead, Public Health Services, Royal Borough of Kingston upon Thames

### **Message from our Chair**

Like last year, the period reported on here has been dominated by the Covid pandemic, but due to the vaccination programme the outlook has been more cheerful despite the setback of the Omicron variant in late 2021 which meant that again we were unable to meet up with our volunteers at Christmas.

At Healthwatch Kingston upon Thames (HW Kingston) we have been working in a hybrid way; staff initially returned to our offices (16 September 2021) which felt like a major milestone, and now work partly at home and partly in the office.



Dr Liz Meerabeau, Chair, HW Kingston



The NHS has started to address the challenge of the waiting lists which have built up during the pandemic - at HW Kingston we are aware of the pressures on both health and social care and HW Kingston has been involved in discussions about the reshaping of services, particularly emergency care. Importantly, it has been recognised that any changes must be readily understandable to people using the service. It is also hoped that the Proactive Anticipatory Care service set up in primary care will help people with complex needs and avoid Emergency Department attendances. In these discussions about reshaping care we are mindful that digital solutions can be effective for many service users, but that people who are not comfortable with using digital should not be disenfranchised.

It was anticipated that the NHS reforms would come into effect on 1 April 2022, when the South West London Clinical Commissioning Group would be succeeded by the Integrated Care System (ICS). However, the passage of the <u>Health</u> <u>and Care Act 2022</u> through Parliament was delayed, and the new structures will not take effect until 1 July 2022.

The ICS has four aims: to improve outcomes in population health and healthcare, to tackle inequalities, to enhance productivity and value for money, and to help the NHS support broader social and economic development. The new ICS will have a duty to consult the public and service users and will be assessed on this annually by NHS England. The Board must include at least one member jointly nominated by the local authorities, and the wider Integrated Care Partnership will be co-chaired by a local authority nominee. At place (i.e. borough) level there must be local community representation, and the primary care networks of GPs should be resourced to work with their local communities. Both the ICS and places (boroughs) will be required to have a quality group which includes lay people with lived experience. So each local Healthwatch will be part of a network of public and patient involvement, although it is not yet clear which meetings will take place in public.

The King's Fund recently concluded that the new system 'relies on people in systems and places continuing to learn how to work together, and that will need support, endurance and commitment long after the ink is dry on this Health and Care Act'.



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www.england.nhs.uk/integratedcare



Several senior leaders have roles in the new structures so there is some continuity, and the six South West London Healthwatch organisations have been working together since the Clinical Commissioning Group (CCG) merged in 2020. This trend is set to continue although it is recognised that local Healthwatch is independent and addresses the issues within its own borough. The new guidance, Working in Partnership, states that 'ICSs should consider how they can invest in these partnerships in order that each Healthwatch has the resource to take on their roles effectively'. Funding has been found by the CCG/ICS to support a 'SWL ICS Healthwatch Executive Officer' role, and it is currently being decided which Healthwatch in SWL will be the host.

HW Kingston has continued to work effectively with many local partners, for example at the Health Overview Panel where a HW Kingston report on local diabetes services, coproduced by one of our Trustees and staff with the help of the local branch of the British Diabetic Association, was well received. We have also continued to strengthen our relationship with Kingston Voluntary Action, the local infrastructure organisation for the voluntary sector. HW Kingston also participated actively in the refresh of the borough Health and Care Plan, which focusses on carers, action on inequalities, obesity, and mental health and resilience.

In April 2022 we were delighted to welcome the new National Director of Healthwatch England, Louise Ansari; HW Kingston was the first Healthwatch that she visited 'face to face'. We will be sorry to see the departure of <u>Sir Robert Francis</u>, the Healthwatch England chair, in the autumn, and hope that his successor will continue to press for the funding which local Healthwatch organisations require to do their work. We rely on our volunteers to support the extensive work we do, and we are particularly pleased to recruit three new Trustees to our Board. We will however be very sorry to lose two of our founders in the autumn, Nigel Spalding and Grahame Snelling, and William Ostrom also stepped down during the year.



# **About Healthwatch Kingston**

### Your health and social care champion

HW Kingston upon Thames is your local health and social care champion. From Coombe Hill to Chessington South & Malden Rushett and everywhere in between, we make sure NHS and social care leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



### **Our vision**

A world where we can all get the health and care we need.



### **Our mission**

To make sure people's experiences help make health and care better.



### **Our values**

Listening to people and making sure their voices are heard.

Including everyone in the conversation – especially those who don't always have their voice heard.

Analysing different people's experiences to learn how to improve care.

Acting on feedback and driving change.

Partnering with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

"The Covid-19 pandemic has thrown long-standing health inequalities into stark relief. With NHS and social care facing even longer backlogs, the unequal outcomes exposed by the pandemic are at risk of becoming worse. Local Healthwatch play an important role in helping to overcome these adversities and are uniquely placed to make a positive difference in their communities."

# **Our year in review**

### Find out how we have engaged and supported people.

### **Reaching out**



We heard from **5,087** people who engaged with us through our projects and outreach in 2021-22. That's a **20%** increase on our previous year. People shared\* **28,196** experiences, views and concerns about health and social care to inform our work. We provided information and advice **23,065** times to people this year. \* People often share more than one experience, view or concern.

### Making a difference to health and social care



We published **16** reports about the improvements people would like to see to care services. From this we made **33** recommendations for improvements. We published **11** surveys and **7** e-newsletters and we increased our subscribers by **150** in 2021-22. **297** social media posts reached **134,524** people.

### Health and care that works for you

We are lucky to have **50** outstanding volunteers, who contributed **2,758 hours** - that's **(394 days)**.



We are core funded by our local authority. In 2021-22 we received: **£129,000** – which is the **Same** as the previous year. (See page 31 for additional income information).

We employed **4.2 FTE staff** during 2021-22 (6 employees) who help us carry out our work.

The **Same** staffing level as the previous year, although different staff members, as we passed on the coordination of Time to Change and the Time to Change Champion volunteers to Mind in Kingston.

### How we've made a difference throughout the year

These are a selection of our biggest projects we worked on from April 2021 to March 2022 (some are part of a wider set of activities that Healthwatch England engaged upon).



We improved the way we gather experiences of care and how we signpost people to the services they need. (See page 27).



We launched our **Pulse Check Kingston** community engagement programme with an initial focus on services for neurodiverse adults.





We published 'A year with Covid-19: **Experiences of NHS and social** services in Kingston before and during come forward nationally to tell Healthwatch the pandemic' in accessible mini reports.

We supported the #BecauseWeAllCare campaign which saw 54,000 people England about issues they faced with services.



We ran a community mental health audit and published a report to inform the 'South London Listens' Mental Ill-health Prevention Action Plan. (See page 20).



Our local data supported Healthwatch England to urge the Government to act after reporting a 452% increase in people struggling to see an NHS dentist.



We supported Youth Out Loud! and Kingston and Richmond Youth Council to create a new podcast on young people's Mental Health. This was then distributed to all schools within RBK. (See page 21).



Our 'Living with Long Covid' report was welcomed upon publication. It has influenced both south west London and national Post Covid service developments and research. (See page 12).

### We worked with you on these areas in 2021-22

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#### 1. Response to and recovery from the coronavirus pandemic:

a. Continue to gather views and experiences of NHS and social care services during and after the coronavirus pandemic, to ensure commissioners, providers and other system leaders respond appropriately to the health and care needs of local people.

#### 2. NHS and Social Care transformation:

a. Monitor the commissioning, provision and transformation of health and care in Kingston, in particular the introduction of the south west London Integrated Care System.

#### 3. Learning Disability:

- a. Support meaningful engagement with local people with a learning disability in the work of HW Kingston, including Enter and View training.
- b. Provide chair and administrative support for the 'Kingston All Ages Learning Disability Partnership Board' (2018-22 Strategy Year 4).

#### 4. Mental Health:

- a. Provide chair and administrative support for the 'Kingston Communities Taskforce Mental Health and Wellbeing Subgroup' (with the work of the subgroup incorporating the refresh of the 'Thrive Kingston' Mental Health and Wellbeing Strategy).
- b. Continue to monitor progress of and engagement with specialist service provision to people with Emotionally Unstable Personality Disorder (EUPD).

#### 5. Young People:

- a. Support Youth Out Loud! (YOL!) to review health and care services (we did this in partnership with HW Richmond).
- b. Support delivery (with other partners including HW Richmond) of the Digital Youth Project (year 3) to complete a series of short health and care films and podcasts by young people for young people.
- c. Support YOL! to develop its online and social media.

#### 6. Safeguarding:

- a. Continue membership of the Kingston Safeguarding Adults Board.
- b. Continue to deliver the Kingston Making Safeguarding Personal pilot (Year 2).
- c. Continue support for the London Safeguarding Adults Board, Safeguarding VOICES and Conference Planning Groups (Year 3) to ensure people with lived experience of safeguarding are integral to safeguarding systems and processes across London.

# Listening to your experiences informs all of our work

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feedback to services to help them improve



# **1. Response to and Recovery from the Coronavirus Pandemic**

### Our 2021-22 coronavirus pandemic work areas were:

a) Continue to gather views and experiences of NHS and social care services during and after the coronavirus pandemic, to ensure commissioners, providers and other system leaders respond appropriately to the health and care needs of local people.

### A bumper year!

In 2021-22 HW Kingston worked to publish **16** reports **more than ever before** (one report was then divided into a series of **seven** mini reports that focused on different areas of NHS and social care services). Most of our reports relate to this work area, as our collaborative community engagement about NHS and social care services either took place during or referenced a period of the pandemic. We highlight three of our reports in the next pages, but here are links to a further selection to find out more:

'A year with COVID-19: Experiences of NHS and social care services in Kingston before and during the Coronavirus pandemic report' (Published 30 July 2021).

'Test and Trace: What you thought report' (Published 15 September 2021).

'Community mental health: What people said report' (Published 21 January 2022).

'Pulse check Kingston: Diabetes services report' (Published 6 February 2022).

'iCope Kingston service user review report: update' (Published 7 March 2022).

'Pulse check Kingston: MS services report' (Published 9 March 2022).

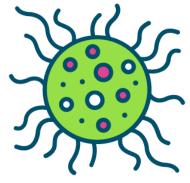
'Covid-19 vaccination: What you thought report' (Published 24 March 2022).

'Pulse check Kingston: Services for Neurodiverse adults report' (Published 24 March 2022).



# **Living with Long Covid**

"We would like to congratulate Healthwatch Kingston on a comprehensive and professional report looking at the impact of Long Covid on Kingston residents. The report provides data and insights which the Kingston and Richmond Post-Covid Steering Group will be able to use to inform the Aims of the Steering Group and the further development of local Long Covid Services. We look forward to continuing to work closely with HW Kingston in this area."



### Dr Annette Pautz and Denise Madden,

on behalf of the Kingston and Richmond Post-Covid Steering Group.

Between July and September 2021, HW Kingston gathered the views of residents experiencing symptoms associated with Long Covid. Here are a few examples of what people said:



"It feels like Long Covid has taken all the joy out of my life. I am trying to adapt and find new interests and hobbies, but I am not able to be the person I was before. It has robbed me of my social life, my independence, my purpose, my career, my creativity."



"With no treatments being available from the outset, experiencing the tidal wave of frightening and unexplainable symptoms, alongside not being able to breathe properly, or function normally, and having relentless chest pains was traumatising. With blood tests that kept coming back normal, PCR tests not being available in the community and by the time anti-body tests became available I was already 4 months into Long Covid so received a negative result. All of this made validation impossible, and discrimination became an issue because the early Long Covid clinics required proof of a positive PCR test."



"My work life has become more demanding, due to its nature, but I struggle to remember things, I have to keep notes all the time which I didn't before, it was within my ability to recall procedures."

The key findings from our survey concentrated on the respondents' lived experience of Long Covid, including diagnosis, symptoms, effects on livelihoods, relationships, family, and friendships, and includes their views on clinical and community support needs (met and unmet), and mental health challenges. The detrimental effects on both physical and mental health, everyday activities and lives were recurring themes shared, as was the overwhelming need for improved, more seamless provision across clinical and other support services.

**Our local and national impact: Long Covid** In addition to influencing development of local services, our work has informed the <u>Healthwatch England What people told us about Long Covid report</u> and <u>LISTEN, a 2-year project funded by the National Institute of Health Research (NIHR)</u> that will evaluate a package of self-management support.

Read our report and recommendations to find out more:

Living with Long Covid in the Royal Borough of Kingston upon Thames | Healthwatch Kingston (Published 28 February 2022).

### **Residential care during the pandemic**

Between January 2021 and April 2021, HW Kingston ran two surveys about the experience of residents and their family members and friends of residents of Care Homes, Supported Living Homes, and Extra Care Housing during the coronavirus pandemic.

The surveys were developed in collaboration with the Royal Borough of Kingston upon Thames, with support from members of the HW Kingston Community Care Task Group. One respondent said:





"The care given by the staff has been exemplary. The staff really care about the residents and have done their best to care for them to the best of their ability. Due to continual staff infections, visiting has been sporadic to say the least as the home always seemed to be in outbreak status and as my mother has advanced dementia, visiting in a pod is rather unproductive."

### Read our report and recommendations to find out more:

Residents, family and friends' experiences of residential care during the coronavirus pandemic | Healthwatch Kingston (Published 15 June 2022).

### **Bereavement community engagement**

In order to build a more comprehensive picture of the impact of bereavement on our local population, and to gather further insight into views on current service provision, HW Kingston and Kingston Voluntary Action were commissioned by South West London Clinical Commissioning Group to undertake some research into people's experiences.

Three online surveys were designed collaboratively by the Kingston Bereavement Think Tank. These were shared across the Kingston communities between November 2021 and January 2022. We also collaboratively ran nine focus groups in response to expressions of interest from voluntary and community groups in Kingston.



### This work sits within the four pillars of compassionate communities:

1) Primary Care Quality Improvement & Transformation

2) Community development (Our community engagement Quality Improvement pilot sits within this pillar)

3) Acute Quality Improvement & Transformation

4) Compassionate community charter implementation, supported by health & social care and community leadership

### Our local and national impact: Bereavement services and support

Our collaborative community engagement pilot findings will not only now support the planned roll out of this work to other south west London boroughs but it was chosen as an NHS Quality Improvement pilot exemplar. On 10 May 2022, with Kingston Voluntary Action and local NHS representation, we presented our work at the 'Getting to Outstanding' NHSE/I national celebration event.

# 2. NHS and Social Care Transformation

### Our 2021-22 health and care transformation work areas were:

a. Monitor the commissioning, provision and transformation of health and care in Kingston, in particular the introduction of the South West London Integrated Care System.

HW Kingston has closely monitored the provision and transformation of health and care in Kingston, and championed the need for accessible information to support patient and public scrutiny of and engagement with our emergent South West London Integrated Care System (ICS) governance and operational structures. Learn more on page 4.

### Exploring the roles of local Healthwatch during transformation and beyond

At a South West London Communications and Engagement Steering Group (CESG) on 28 February 2022, HW Kingston initiated a conversation about the roles of local Healthwatch particularly as the ICS develops its plans to increase its own level of engagement with communities etc., including at a relatively micro level.

### **Key points included:**

- Although each local Healthwatch needs to engage directly (and independently) with whichever groups locally it feels are appropriate, each local Healthwatch needs to recognise that it will never be able to do all that is needed directly, using its own (limited) resources. It will be important to recognise the work of others and avoid duplication.
- The counterpoint to these limitations on what Healthwatch can realistically do 'directly', is that Healthwatch has a unique position of statutory access to decision-makers (commissioners, providers, local authorities); the ability to ensure that the insights gained from engagement are followed up; and, ultimately, an ability to hold decision-makers to account.
- The added element which Healthwatch may bring to the table is the capacity to analyse and write up the data where some Voluntary Community and Social Enterprise (VCSE) organisations may not have the skill set and, in these instances, co-badging a report may benefit both HW and the other 'front line' organisation providing the engagement.

Tell us what you think the role of Healthwatch is?



### Engaging with seldom heard from groups

For some, trust can be a really big obstacle to meaningful engagement. In such situations, Healthwatch (and others such as the ICS) may need to work indirectly, but collaboratively with and through other trusted organisations and individuals. An example of where HW Kingston has worked collaboratively is the Kingston Bereavement Community Engagement with Kingston Voluntary Action (see page 13).

In addition, working with some seldom heard from groups can take time. In some instances, we already have strong links with organisations and are able to quickly make use of our established trusted working relationship. In other situations, we are reliant on the capacity, availability, and interest of the VCSE organisations who may be closest to our target audience, which can impact our engagement with them.

### **Growing evidence base**

Local Healthwatch across SWL have a 10-year strong back catalogue or 'growing evidence base' of focused work to understand patient experiences on various topics and services, directly relevant to health and social care in SWL.

### Uniquely, Healthwatch has a multi-facetted set of roles

- · Doing its own direct investigations and engagement activities
- Keeping a 'watching brief' that others (such as the ICS, provider collaboratives or whoever) are indeed fulfilling their own commitments on engagement
- Being 'open' to working with and through other, intermediate, community, voluntary etc. organisations to reach seldom heard from/ 'harder to reach' groups
- But offering, in return, our unique ability to follow-up with decision-makers etc., which is perhaps our ultimate Healthwatch Unique Selling Point.

### **Our impact: Transforming hospital services**

HW Kingston and Kingston Hospital Foundation Trust continue to have a positive view about the value of the patient experience in the continuous review and improvement of hospital services.

In January 2020, Healthwatch England published **Shifting The Mindset** and noted:

'Reporting (by hospitals) needs to look beyond the numbers and response times and focus more on how to effectively demonstrate to patients and the public what has been learnt. This is the only way to give the public confidence that their concerns are being listened to and acted on.'

HW Kingston has worked with Kingston Hospital to transform the way that patient issues with hospital services are reported. This has resulted in new quarterly PALS Concerns and Complaints reporting as part of our Healthwatch Forum meetings which helps us to ensure what matters to you is acted on.



# **3. Learning Disability**

### Our 2021-22 Learning Disability work areas were:

- a. Support meaningful engagement with local people with a learning disability in the work of HW Kingston, including Enter and View training.
- b. Provide chair and administrative support for the 'Kingston All Ages Learning Disability Partnership Board' (2018-22 Strategy - Year 4).

### 3a) Support meaningful engagement with local people with a learning disability in the work of HW Kingston, including Enter and View training.

AIM: Ensure the work of HW Kingston is "Learning Disability Friendly".

Inclusion and amplifying the voices of people with a learning disability is a core part of the work of HW Kingston and contributes to borough wide ambition to provide accessible ways for people who may be seldom heard from to engage. In the past year, significant engagement has taken place and we are grateful for the support of local partners with making this work possible. Enter and View visits were not allowed due to pandemic guidance.

It was clear at the start of 2021, that support with coming out of lockdown and managing infection control was needed for people with learning disabilities. HW Kingston helped to ease the risks of this transition period by providing signposting to information and advice about Covid prevention, support and services. HW Kingston also created Easy Read versions of our community engagement surveys, e.g. to include residents in supported living.

### HW Kingston retained and has remained the only local Healthwatch in England to hold the Plain English Campaign's Internet Crystal Mark



for being committed to plain English across our website.



Clear, understandable information is important to help people make the right health and care decisions. HW Kingston teamed up with others and Healthwatch England to help people with learning disabilities, sensory impairments and other barriers to communication have their say on what needs to change.

The 'Your Care, Your Way' campaign to find out more about how the Accessible Information Standard is working for people was launched on 1 March 2022.

### Learn more about 'Your Care, Your Way':

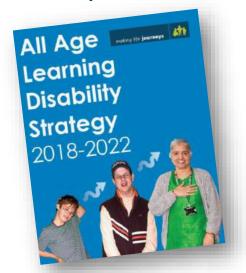
<u>Your care, your way – new Healthwatch campaign</u> launched | Healthwatch Kingston

### 3b) Provide chair and administrative support for the 'Kingston All Ages Learning Disability Partnership Board' (2018-22 Strategy - Year 4).

AIM: Provide independent facilitation for community scrutiny of progress against All Age Learning Disability strategy priorities.

The Partnership Board is co-chaired by HW Kingston and people with a learning disability (LD). In 2021-22, we worked with professionals commissioning and delivering services, people living with a learning disability, and their families, carers and advocates: In this period, we collaboratively covered the following areas of health and social care:

- Flu and Covid vaccines
- Mental Health and wellbeing
- Coming out of lockdown
- Keeping safe during the pandemic
- Accessibility of the built environment
- Dental care
- Eye Health
- Primary care
- Health checks
- Hospital care
- How engagement of people with profound and multiple learning disabilities (PMLD) can be improved.





### **Our outreach and engagement: LD**

### **Kingston Council Disability Awareness Event**

One of the highlights of the year was held in Kingston Market place in September 2021.

This was the first time, since the beginning of 2019, that organisations were able to come together. Visitors to the Ancient Market Square were able to explore a number of stalls from local disability groups, including Kingston Mencap, Eco-Op, Kingston Centre for Independent Living, Kingston Association for the Blind.

HW Kingston joined a stall with the Involve team, who assist with co-chairing the All Age Learning Disability Partnership Board. We promoted the Partnership Board and our other HW Kingston work.

#### Learn more about how we champion what matters to you:

Learning Disabilities End of Year Report 2021 - 2022 | Healthwatch Kingston

# 4. Mental Health

### Our 2021-22 Mental Health prioritised work areas were:

- a. Provide chair and administrative support for the 'Kingston Communities Taskforce - Mental Health and Wellbeing Subgroup' (with the work of the subgroup incorporating the refresh of the 'Thrive Kingston' Mental Health and Wellbeing Strategy).
- b. Continue to monitor progress of and engagement with specialist service provision to people with Emotionally Unstable Personality Disorder (EUPD).

4a) Provide chair and administrative support for the 'Kingston Communities Taskforce - Mental Health and Wellbeing Subgroup' (with the work of the subgroup incorporating the refresh of the 'Thrive Kingston' Mental Health and Wellbeing Strategy).

AIM: Provide independent facilitation for community scrutiny of progress against mental health priorities.

The Mental Health and Wellbeing subgroup is open to all and actively encourages participation from people with lived experience. Meeting agendas support updates from commissioners and providers that promote dialogue about a range of mental health transformation programmes.

The group has been clear that local needs must inform regional strategies and in return our borough populations must benefit from regional initiatives.

The subgroup has been well attended by representatives from the NHS, Public Health and the Voluntary and Community Sector. Between April 2021 and March 2022, we chaired and facilitated six core meetings along with four workshops to inform local priority areas:

- 1. Better Mental Health: Refresh of the Kingston Joint Strategic Needs Assessment
- 2. Improving engagement: Children, young people and parental mental health and emotional wellbeing
- 3. South London Listens: Community engagement to prevent mental ill-health
- 4. Loneliness and Isolation: Addressing post lockdown mental health needs



### Learn more about how we champion what matters to you:

Mental Health and Wellbeing Subgroup (Kingston Communities Task Force): End of Year Report 2021-22 | Healthwatch Kingston

### 4b) Continue to monitor progress of and engagement with specialist service provision to people with Emotionally Unstable Personality Disorder (EUPD).

AIM: Provide evidence that supports improved experience of people using psychological therapies.

HW Kingston has continued to monitor the commissioning and delivery of EUPD and requests regular updates about how Kingston residents can access Dialectical Behaviour Therapy (DBT). We note that transformation of services will result in an increase of three new Structured Clinical Management (SCM) practitioners. This increase in SCM provision will now be more protected than the previous provision. In addition, the South West London and St George's Mental Health Trust will be recruiting two further psychologists to provide supervision to these new SCM roles.

HW Kingston has also been informed of other shifts – in terms of how the Trust will offer these treatments. The Trust wide Personality Disorder (PD) pathway follows a stepped care approach, so SCM is now offered to less severe cases of EUPD and DBT is offered to more complex cases (although this is likely to change over time).

### **Equality of access**

HW Kingston's original challenge to Commissioners and Providers included the inequality of access to services for Kingston residents with EUPD compared with other boroughs. We are pleased to learn that the Trust PD pathway has signed up to equality of access to treatments across all of south west London and is working on how they can provide Mentalisation Based Therapy (MBT) to Kingston residents, and for example, DBT to residents of Richmond.

### **Our impact: Mental Health services**

### **Informing the South London Mental Ill-Health Prevention and Recovery Programme and the Kingston Council Health and Wellbeing Board**

South London and the Maudsley Foundation Trust, directly contracted local Healthwatch organisations across south London to carry out an audit of community and voluntary sector activity in their area relating to the series of mental health prevention pledges made at the Community-led summit on 16 June 2021.

Our HW Kingston report provided feedback from local community and voluntary sector mental health commissioners and providers.

Informed by the report, the South London Mental III-Health Prevention and Recovery Programme has developed a South London Listens Action Plan for the 2-year programme which was published on 29 October 2021.

"An excellent and vital piece of work providing rich local insight to support our work with the community in preventing a mental health crisis as a result of covid-19."

Neil Balmer, Programme Lead, South London Listens, South London and the Maudsley NHS Foundation Trust

#### Learn more about how we champion what matters to you:

<u>Community and voluntary sector mental health - What people said | Healthwatch Kingston</u>

# **5. Young People**

### Our 2021-22 Young People prioritised work areas were:

- a. Support Youth Out Loud! (YOL!) to review health and care services (we did this in partnership with HW Richmond).
- b. Support delivery (with other partners including HW Richmond) of the Digital Youth Project (year 3) to complete a series of short health and care films and podcasts by young people for young people.
- c. Support YOL! to develop its online and social media.

### Youth Out Loud! (YOL!), is a group of young people aged 13-17 from Kingston and Richmond helping to improve NHS care and the wellbeing of young people.

### 5a) Support Youth Out Loud! (YOL!) to review health and care services (in partnership with HW Richmond)

AIM: Support young people to have a say in their health and care services.

In May 2021, during Mental Health Awareness Week, YOL! invited an Engagement Officer from South West London and St George's Mental Health Trust (SWLSTG) and a Clinical Psychologist and Professional Lead for Kingston & Richmond Child and Adolescent Mental Health Services (CAMHS), to talk about local mental health services for young people and the impact from Covid. A range of questions were asked by young people including:



'How do eating problems start and why might people not want to eat?"

"Is there a specific age for people with mental health issues?"

"What is the typical provision of CAMHS services? Is funding available?"

YOL! was asked to review the 'young carers survey' for Kingston Carers' Network and participate in Kingston Hospital's Wolverton Sexual Health Clinic 'Secret Shopper' exercise (Feedback from this was used to develop the YOL! Sexual Health Film script).

### 5b) Support delivery (with other partners including HW Richmond) of the Digital Youth Project (year 3) to complete a series of short health and care films and podcasts by young people for young people

AIM: Develop a library of films and podcasts made by young people for young people.

Our Digital Youth Project work with YOL! focuses on giving teenagers appropriate information on local and national services, raises awareness of young people's experiences, and supports the promotion of YOL! membership. In July 2021, YOL! recorded podcast#3, a joint podcast with the Kingston & Richmond Youth Council (KRYC) on Mental Health.



The Mental Health podcast is hosted on Spotify and was promoted both by YOL! and KRYC via social media, yolweb.info, Achieving for Children (AfC) and SWLStG Mental Heath Trust. It was also promoted in school newsletters across Kingston and Richmond and promoted via council newsletters.

### "Action...and it's a wrap!"

Work on 'Let's Talk About Sexual Health', the third film from YOL! finally re-started after the pressures of Covid restrictions, lockdowns, a department 'face-lift' and a slight change in procedure at the Wolverton Sexual Health Clinic. We decided to do a 'go back to the drawing board exercise' as we had not truly been able to look at the script since December 2020.

The delay was beneficial as the Wolverton now operates a phone triage service (the first step to getting help) in place of a walk-in service. We also had newer YOL! members and wanted to incorporate their ideas. Filming took place in March 2022.

### 5c) Support YOL! to develop its online and social media.

AIM: Support young people to safely communicate via social media.

### **#ATurnerGirlCan campaign**

A YOL! member came to a meeting and explained that she has Turner Syndrome and that only now does she have the confidence to talk about it, raise awareness and help other young girls through the process of diagnosis, treatment and living with the condition.

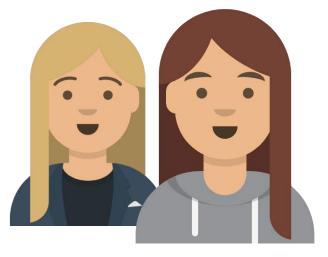
As February 2022 was Turner Syndrome Awareness Month, YOL! decided to create a social media campaign, backed up by information on **yolweb.info/turner-syndrome**.

"Being a YOL! member is really important to me because healthcare impacts a lot of young people's lives and as I get to see how much it does, I thought that I could help make a stronger online community for girls who have Turner Syndrome."

YOL! Member (14 year old)

Learn more about how we champion what matters to young people:

Youth Out Loud! End of Year Report 2021-22 | Healthwatch Kingston





HEALTHY RELATIONSHIPS

# 6. Safeguarding

### Our 2021-22 Safeguarding prioritised work areas were:

- a. Continue membership of the Kingston Safeguarding Adults Board.
- b. Continue to deliver the Kingston Making Safeguarding Personal project (Year 2).
- c. Continue support for the London Safeguarding Adults Board, Safeguarding VOICES and Conference Planning Groups (Year 3) to ensure people with lived experience of safeguarding are integral to safeguarding systems and processes across London.

### 6a) Continue membership of the Kingston Safeguarding Adults Board.

AIM: Gather resident experience of safeguarding to inform service developments and support positive personal outcomes.

HW Kingston has continued to be an active member of the Kingston Safeguarding Adults Board, where we have represented local people and regularly update the Board about our safeguarding related project work.

### 6b) Continue to deliver the Kingston Making Safeguarding Personal project

AIM: Gather personal experience of safeguarding to inform service developments and support positive personal outcomes.

Making Safeguarding Personal puts the person at the centre of everything during a safeguarding enquiry - from the beginning to the end. This approach is supported by the London Association of Directors of Adult Social Services (LondonADASS) and the Local Government Association (LGA). The Kingston Making Safeguarding Personal project aims to use experiences of the safeguarding process to improve provision, in the hope that this will in turn improve personal safeguarding outcomes.

The Royal Borough of Kingston upon Thames (RBK) asked HW Kingston to independently collect feedback from people who have been through the Kingston adult safeguarding process. Originally the scope of the MSP pilot focused on at risk adults with Learning Disabilities. RBK then expanded it to include people being supported by the Mental Health Social Care Team, and in July 2021 it was extended to all Adult Social Care Teams. RBK have also engaged a Senior Social Worker (Adult Safeguarding), for a year, to help with roll-out of the work.







#### Learn more about how we champion what matters to you:

Making Safeguarding Personal: End of Year Report 2021-22 | Healthwatch Kingston

# 6c) Continue support for the London Safeguarding Adults Board, Safeguarding VOICES and Conference Planning Groups (Year 3) to ensure people with lived experience of safeguarding are integral to safeguarding systems and processes across London.

AIM: Ensure the voices of people with lived experience of safeguarding are part of the London Safeguarding Adults Board

London Safeguarding Voices (LSV) is an exciting initiative that brings together people with lived experience (PwLE) of safeguarding, to help shape safeguarding across the city. The key ambition of the London Safeguarding Adults Board (LSAB) was to firmly embed LSV in their work.

After a recruitment drive, new LSV members attended the LSAB Meeting on 21 July 2021 and explained they wanted to do the following:

- Increase the profile of safeguarding to everyone
- Make a difference and have an impact
- Strengthen the voice of the PwLE of safeguarding.

The LSV is committed to equality, diversity, and inclusion, and HW Kingston ensures as many documents as possible are provided in Easy Read and emails are in large font as part of our support and coordination provision. Our monthly LSV member meetings are via Zoom to avoid travel across London.

### Safeguarding is everyone's business

Since the first LSV Meeting on 31 August 2021, HW Kingston have supported the LSV to develop three work areas:

- 1. Communications and Engagement
- 2. LSV contribution to the LSAB Annual Conference.
- 3. Emerging safeguarding themes and how we work with the LSAB on these.

The LSAB Conference was held via Zoom on 16 November, was planned during Safeguarding Adults Week 2021, themed 'Creating Safer Cultures'.

The conference planning team created a promotional film for the LSAB Conference 2022: <u>Give A Voice To People With Lived Experience Of Safeguarding | Join The Next LSAB</u> <u>Conference in 2022.</u>

The LSV also made a film about why it is so important to join the group and share experiences: **LSVG Promo Video 2021.** 

LONDON SAFEGUARDING VOICES 'Our Voices Together Are Stronger' "Join a likeminded group of people who share the same ambition and values and the knowledge that you are collectively contributing to something that could literally change lives for adults and their carers".

#### **LSV Member**

#### Learn more about the work of the LSV:

London Safeguarding Voices Group: End of Year Report 2021-22 | Healthwatch Kingston

### Information, advice and signposting

Finding the right service can be worrying and stressful.

HW Kingston plays an important role in signposting people to the advice and information they need to take control of their health and social care and find services that will provide them with the right support.



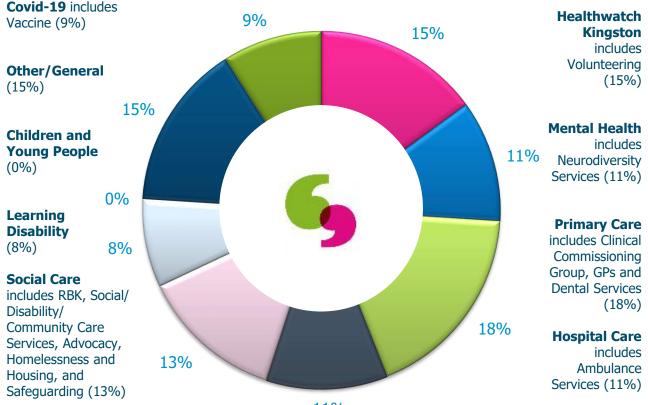
### **Telephone, email and web contacts**

Here is what the **670\* local people** (448 people in 2020-21/168 in 2019-20), **who contacted us by telephone, email or via our online `contact us' form**, talked to us about during 2021-22:

\* People can talk about more than one area of interest in any one contact.



Based on data shared with and then analysed by HW Kingston between 1 April 2021 and 31 March 2022

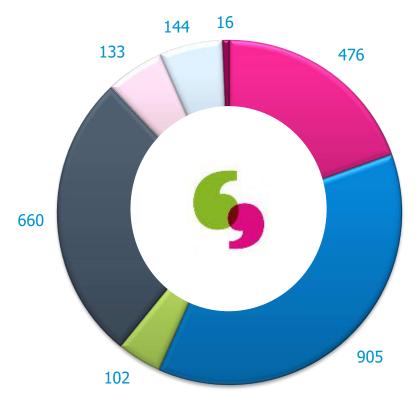


11%

Healthwatch Kingston 15% (14% 2020-21/13% 2019-20)
Mental Health 11% (9% 2020-21/6% 2019-20)
Primary Care 18% (22% 2020-21/13% 2019-20)
Hospital Care 11% (9% 2020-21/6% 2019-20)
Social Care 13% (19% 2020-21/51% 2019-20)
Learning Disability 8% (3% 2020-21/4% 2019-20)
Children and Young People 0% (3% 2020-21/1% 2019-20)
Other 15% (5% 2020-21/6% 2019-20)
Covid-19 9% (16% 2020-21/no data in 2019-20)

### **Advice and information online**

**11,861** people visited our website in 2021-22 (12,822 in 2020-21), out of which **2,436 people** (711 in 2020-21) **sought help specifically through the sections of our website set up to provide information, advice and signposting.** In 2021-22, seeking improvement in awareness of HW Kingston and our service offer, we modified the way that advice and information is provided through our website. We added a series of 'All about' pages, promoted the pages through social media and linked these to some of our community engagement such as our <u>Healthwatch Kingston Pulse Check Programme | Healthwatch Kingston</u>. For an example of an 'All About' page see: <u>All about: Diabetes services | Healthwatch Kingston</u>



New advice and information home page: 476 people
New 'All About' pages: 905 people
Find NHS services: 102 (134 in 2020-21/ 115 in 2019-20)
Mental health services: 660 (426 in 2020-21/ 28 people 2019-20)
Older people's services: 133 (41 people in 2020-21/ 24 in 2019-20)
Local services: 144 (92 in 2020-21/ 15 people in 2019-20)
Social care services: 16 (18 in 2020-21/ 10 people in 2019-20)

Based on data shared with and then analysed by HW Kingston between 1 April 2021 and 31 March 2022.



# **Our people**

HW Kingston staff have worked alongside **50** volunteers during 2020-21.

In the past year, our Board and other volunteers have helped us: govern our organisation, find out what local people thought was working and what improvements local people would like to make to NHS and social care services, set our priorities, develop new outreach and engagement projects, review our survey data, and identify themes for our reports.





Are you feeling inspired? We are always keen to welcome new volunteers. If you are interested in volunteering, please get in touch at HW Kingston.

- www.healthwatchkingston.org.uk  $\Box$
- 020 3326 1255 8
- info@healthwatchkingston.org.uk  $\checkmark$

### **Our local influence**

A key part of the remit of local Healthwatch is to influence decision makers. In order to help facilitate this, HW Kingston has a seat on the Health and Wellbeing Board where key decisions are made about strategy, commissioning and delivery of local health and social care services.

Our staff and Trustees and volunteers attended a number of other meetings and committees, to ensure that we are well informed about anything that may impact on NHS and social care services for people in Kingston.

### Boards, Committees, Groups and regular meetings attended during 2021-22 included:

1. Royal Borough of Kingston upon Thames (RBK) Health and Wellbeing Board, which has a key role in the local integration of health, social care and other public services; 2. RBK Health Overview Panel, the chair of which has regular meetings with the chair of HW Kingston; **3.** NHS South West London (SWL) Clinical Commissioning Group (CCG) Governing Body; **4.** Kingston and Richmond Primary Care Management Group; 5. SWL CCG Primary Care Commissioning Committee; 6. SWL Community Engagement Steering Group; 7. Kingston and Richmond Communications and Engagement Group; 8. Kingston Patient and Public Forum; 9. Kingston CCG and HW Kingston Meeting; **10.** RBK Director of Adult Social Care Meeting; **11.** SWL HW Chief Officers' Meeting; **12.** Kingston Chief Officers' Network; **13.** Kingston Hospital HW Forum; 14. SWLStG Mental Health Trust HW Forum; 15. Kingston Health and Wellbeing Network; 16. Kingston All Ages Learning Disability Partnership Board; **17.** Kingston Communities Task Force (CTF); **18**. Time to Change Kingston Steering Group; 19. London Safeguarding Adults Board (LSAB); 20. LSAB Voice and Conference Planning Work Group; 21. London Safeguarding Voices Group; 22. Kingston Safeguarding Adults Board; 23. London Healthwatch Network; 24. Care Providers Forum; 25. Kingston Carers Board; 26. Making Safeguarding Personal Management Group; 27. CTF Mental Health and Wellbeing Subgroup; 28. Care Worker Wellbeing Planning Group; 29. Kingston and Richmond Post-Covid Steering Group; **30.** Youth Out Loud! **31.** Kingston and Richmond Youth Council; **32.** Kingston Interim Place Committee; **33.** London Safeguarding Voices Communications and Resources Work Group; **34.** London Safeguarding Voices Conference Work Group; **35.** SWL Bereavement Think Tank; **36.** Kingston Voluntary Sector Forum; 37. London Ambulance Service LAS Public and Patients Council; 38. RBK BAME Mental Health Partnership Meeting; 39. Kingston, Richmond and Surrey A&E Delivery Board; 40. Joint Quality Governance Committee; **41.** SWLStG Community Mental Health Transformation Design and Delivery Group (now the Kingston Adult Mental Health Partnership Task & Finish Group); 41. K&R Borough Committee; **41.** Kingston Hospital Dementia Services Group.



During 2021-22, HW Kingston attended or hosted over **543** meetings, presentations and workshops (513 in 2020-21/ 230 in 2019-20).

#### HW Kingston Board 2021-22:

Dr Liz Meerabeau, Chair and Lead for Primary Care Nigel Spalding, Treasurer (until 30 September 2021) and Lead for Social Care

**Richard Allen**, (appointed 26 May 2021) Treasurer (from 1 October 2021) and Lead for Hospital Services

**Grahame Snelling**, Lead for Safeguarding

**William Ostrom**, (until 1 December 2021) Lead for Mental Health and Communications

#### James Waugh,

Lead for Risk Management

#### Scotty McLeod,

Lead for Business Continuity

# Finance report 2021-22

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income		Expenditure	
Funding received from local authority*	£129,000	Staff costs	£113,612
		Administration costs	£8,364
Additional funding**	£43,000	Overheads	£20,069
	- /	Grants	£8,472
Total income	£172,000	Total expenditure	£150,517

### Finance report notes:

\*HW Kingston statutory service contract value was increased from £122,000 to  $\pounds$ 129,000 (to support increased engagement of people with learning disabilities in our statutory work).

\*\*HW Kingston secured additional grant funding totalling £43,000 for delivery of the following pilot and project work:

- Secretariat for the Kingston Mental Health and Wellbeing Group (£2,000 from the South West London Clinical Commissioning Group).
- **Making Safeguarding Personal Pilot** (£7,000 from the Royal Borough of Kingston upon Thames, Safeguarding Adults Board).
- Support to the London Safeguarding Adults Board, London Safeguarding Voices and Conference Planning Groups (£10,000 via Healthwatch England on behalf of LondonADASS).
- South London Listens Community Mental Health Audit (£2,000 from South London and the Maudsley NHS Foundation Trust).
- **Kingston Bereavement Community Engagement** (£5,000 from Kingston Voluntary Action on behalf of South West London Clinical Commissioning Group).
- **Care Worker Wellbeing Pilot** (£17,000 from the Royal Borough of Kingston upon Thames)

# Next steps: A message from our Chief Executive Officer

Once again, during another challenging but still incredibly busy year, I have been delighted by our collective achievements. Huge thanks! The work of HW Kingston is supported by a group of passionate staff, Board members and other volunteers that do what we do, so that we can champion what matters to **you as residents**.

We also champion our independence. This continues to be a key platform from which we frame our work.

Although we have the power to ensure NHS and social care decision makers listen to local feedback and improve standards of care, I trust you feel we use this with respect and professionalism in our engagement with and challenge of **you as stakeholders**. Thank you for your patience with us while we exercise our role, particularly because we know you are also working under increasing pressures.



**Stephen Bitti** Chief Executive Officer HW Kingston

### What else springs to mind?

Much about the benefits of collaboration has already been shared within this Annual Report 2021-22, but if I were to add a couple of additional milestones for us to celebrate they would be:



Our community stall at the Kingston Health and Wellbeing Event - on 15 March 2022 for people experiencing homelessness, refugees and asylum seekers – which was our first 'face to

face' public engagement session since the beginning of the pandemic in March 2020.

### Our Healthwatch England Quality Framework self

**assessment** - completed with a range of stakeholders, this identified a set of actions to help us improve the way we work, some of which we have already introduced and are benefitting from.

### What's next for HW Kingston?

I feel most of us will all agree that the pandemic has shone a stark light on the impact of existing inequalities when using health and social care services. This has highlighted the importance of championing the voices of those who all too often go unheard.

Over the coming years, the goal of Healthwatch is to work with decision makers to help reduce these inequalities by making sure local voices are heard, to reduce the barriers faced, regardless of whether that's because of where people live, income or race.



HW Kingston has collated recommendations from each of our reports and, where we have them, relevant commissioner responses including action plans. Some of these actions include us co-facilitating provider workshops with commissioners and we have scheduled a HW Kingston Open Meeting in February 2023 where updates can be made to the public about recommended health and social care service improvements.

#### If you would like to attend our Open Meetings please email us to let us know and we will ensure you get an invite nearer the time: info@bealthwatchkingston org uk

info@healthwatchkingston.org.uk

In addition to continuing to fulfil our legislated role to provide information, advice and signposting, the next page sets out our plans for 2022-23. You'll see that along with health inequalities we have included long term conditions and women's health. All of us at HW Kingston look forward to working with you on these areas as we continue to champion what matters to you.

### Building upon our impact: Care worker wellbeing pilot

HW Kingston and Kingston Council (RBK) continue to have a positive view about the value of the resident experiences in the continuous review and improvement of social care services.

Towards the end of 2021, in response to some concerns raised about the treatment of frontline staff in the Home Care sector in Kingston, the RBK Quality Assurance Team sent out a wellbeing survey to all frontline workers, including Home Care, Care Home, and Voluntary Sector organisations.

The results of the survey showed an appetite for a frontline staff forum/virtual networking site, so that staff could share experiences and information to improve wellbeing. This would also include an escalation pathway for concerns or complaints around equality and diversity issues. When RBK asked who care workers felt would be best placed to host this work, the first choice was RBK. However, as they commission most of the social care in the borough, it was deemed inappropriate for them to carry out this work. The second choice for both activities was HW Kingston and indicated awareness of our work within the care workforce.

HW Kingston has since been contracted to provide a retrospective engagement with care workers about their wellbeing during 2021-22 and share anonymised findings and learning.

### In addition to providing information, advice and signposting to NHS and social care services, our plans for 2022-23 are:

- 1. Response to and recovery from the coronavirus pandemic:
- a. Continue to gather views and experiences of NHS and social care services during and after the coronavirus pandemic, to ensure commissioners, providers and other system leaders respond appropriately to the health and care needs of local people.
- 2. Health inequalities and NHS and Social Care transformation:
- a. Continue to monitor the commissioning, provision and transformation of NHS and Social Care in Kingston, in particular: the South West London Integrated Care System; health inequalities; the health and care needs of women and people with long term medical conditions.
- 3. Learning Disability:
- a. Continue to support meaningful engagement with local people with a learning disability in the work of HW Kingston, including Enter and View training.
- b. Continue to provide chair and administrative support for the 'Kingston All Ages Learning Disability Partnership Board'.

### 4. Mental Health:

- a. Continue to provide chair and administrative support for the 'Kingston Mental Health and Wellbeing Group'.
- b. Continue to monitor progress of and engagement with specialist service provision to people with Emotionally Unstable Personality Disorder (EUPD).
- c. Provide independent evaluation of the south west London Community Mental Health Transformation Programme in Kingston.

### 5. Young People:

- a. Continue to support Youth Out Loud! (YOL!) to review health and care services (in partnership with HW Richmond and other stakeholders).
- b. Continue to support delivery (with other partners) of the Digital Youth Project (Year 4) to complete a series of short health and care films and podcasts by young people for young people.
- c. Continue to support YOL! to develop its online and social media.

### 6. Safeguarding:

- a. Continue membership of the Kingston Safeguarding Adults Board.
- b. Continue to deliver the Kingston Making Safeguarding Personal project (Year 3).
- c. Continue support for the London Safeguarding Adults Board, London Safeguarding Voices and Conference Planning Groups (Year 4) to ensure people with lived experience of safeguarding are integral to safeguarding systems and processes across London.

Find out more about how our plans align with Healthwatch England Plans for 2022-23.

# Thank you from our Board

### The HW Kingston Board would like to thank everyone that is helping us put people at the heart of health and social care, including:

- The **5,087** people who shared **28,196** views and experiences with us through our outreach and engagement events and projects in 2020-21
- Our staff: Stephen Bitti (Chief Executive Officer); Candy Dunne (Deputy Chief Officer); Jaimy Halliwell-Owen (Communications and Engagement Officer); Kezia Coleman (Projects and Outreach Officer, Mental Health and Disabilities); Helena Wright (Projects and Outreach Officer, Young People and Safeguarding); Rona Topaz (left in June 2021)
- Our wonderful volunteers, including Youth Out Loud! and London Safeguarding Voices, we could not do as much as we do without you
- Our diligent Enter and View Authorised Representatives: Alan Moss; Elinor Young; Graham Goldspring; Jillian Dempsey; Jo Boxer; Nigel Spalding; Pippa Collins; Rob Robb; Scotty McLeod; Sheena Crankson; Tony Williams
- The many, essential voluntary and community organisations that have contributed to our work, in particular Kingston Voluntary Action, our local infrastructure organisation
- Our NHS, social care, educational partners, officers and Councillors working within the Royal Borough
  of Kingston, and across south west London, the London Safeguarding Adults Board, the LondonADASS
  and of course our helpful colleagues at Healthwatch England.

Views/experiences shared by work area	2021-22	2020-21	2019-20
Mental Health	1468 views/experiences	5243 views/experiences	1155 views/experiences
NHS	2982 views/experiences	3103 views/experiences	(No data to compare)
Covid-19	4927 views/experiences	2647 views/experiences	(No data to compare)
Children and Young People	536 views/experiences	2651 views/experiences	562 views/experiences
HW Kingston	1701 views/experiences	1736 views/experiences	1213 views/experiences
Community Care	2463 views/experiences	1268 views/experiences	688 views/experiences
Learning Disability	1306 views/experiences	1037 views/experiences	1082 views/experiences
Hospital	3009 views/experiences	754 views/experiences	1906 views/experiences
Other/General	2533 views/experiences	50 views/experiences	39 views/experiences
Social Care/Safeguarding	1705 views/experiences	(No data to compare)	(No data to compare)
VCSE/Communities	4005 views/experiences	(No data to compare)	(No data to compare)
Bereavement	1561 views/experiences	(No data to compare)	(No data to compare)

# **Statutory statements**

#### **About us**

Healthwatch Kingston upon Thames, Suite 3, 2nd Floor, Siddeley House, 50, Canbury Park Road, Kingston upon Thames KT2 6LX.

Healthwatch Kingston upon Thames uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.



### The way we work

### Involvement of volunteers and lay people in our governance and decisionmaking.

Our HW Kingston upon Thames board currently consists of **six** members (**one** member retired membership on 1 December 2021 - see page 33) who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2021-22 the board met **seven** times and made decisions on matters such as additional project work contracts and a complete refresh of our Employee Handbook alongside our HW Kingston Policies and Procedures.

We ensure wider public involvement in deciding our work areas through our HW Kingston Open Meetings and other outreach and engagement projects. We also review our contact log and survey responses to assess what key themes may be emerging.

### Methods and systems used across the year's work to obtain people's views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2021-22 we have been available by phone, by email, provided a webform on our website, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media – and eventually a risk assessed, face to face community event.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and social care decision makers. This year we have done this by, for example, our collaborative Bereavement Community Engagement work with Kingston Voluntary Action (see page 13).

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We promote via social media and publish it on our HW Kingston website: <u>www.healthwatchkingston.org.uk</u>

### **Responses to recommendations and requests**

Most providers responded to requests for information or recommendations. There were two instances where information was requested from a health organisation that was not part of the CCG and replies were not received, despite several requests.

This year, due to the Covid-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity.

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee or to the Care Quality Commission and so no resulting special reviews or investigations.

### **Health and Wellbeing Board**

HW Kingston is represented on the Royal Borough of Kingston upon Thames Health and Wellbeing Board (HWB) by Dr Elizabeth Meerabeau (LM), Chair of HW Kingston.

During 2021-22 our representative has effectively carried out this role by contributing to the following: the Kingston Health and Wellbeing Board met four times. The legislation allowing remote local authority meetings was time limited, and there was a period during the summer of 2021 when meetings could only be face to face but could not take place due to the pandemic. The first meeting of the HWB did not therefore take place until September 2021 and the agenda was concerned mainly with the NHS operating plan during the pandemic, the local estates strategy, the development of the Integrated Care System and refreshing the Health and Care Plan.

An ongoing theme, initiated by a peer enquiry visit in early 2020, has been clarification and strengthening of the role of the HWB; seminars took place in October 2021 and February 2022. This work is ongoing; at the November 2021 meeting LM proposed a more focussed use of the Joint Strategic Needs Assessment (JSNA) and information being provided on housing provision in Kingston, given its centrality to health. A member of the public asked how eligibility for hospital transport is assessed; the answer was given outside the meeting and is being followed up by HW Kingston with Kingston Hospital.

The January 2022 meeting was attended by our Chief Executive Officer, who presented on the HW Kingston Community Mental Health Audit and how it linked to the Better Mental Health JSNA. HWK also sought clarification on the reporting line for the Kingston Mental Health and Wellbeing Group which ceased to report to the Kingston Communities Taskforce after the local Council elections.

The March 2022 agenda was largely concerned with the ICS and the revised HWB. It was agreed that a proposal for a refreshed HWB should be on the agenda of the May Council meeting. LM also requested that a revised paper on the estates strategy should be provided shortly. The initiation of the refreshed JSNA was also discussed; HWK will be on the steering group and we have requested that it should include dentistry and neurodiversity. Both of these topics arise from national and local Healthwatch reports.

"Teamwork in health-related matters is crucial and we have all worked hard to improve outcomes for our residents, and Healthwatch Kingston's input [to the Health and Wellbeing Board] is always well thought out and insightful. Thank you."

Councillor Margaret Thompson, Co-chair, HWB, March 2022.



HW Kingston upon Thames Suite 3, 2nd Floor, Siddeley House 50, Canbury Park Road Kingston upon Thames KT2 6LX

www.healthwatchkingston.org.uk



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