

Healthwatch Kingston Board	Tuesday 24 November 2020
Meeting (Part A)	
	Contributors: Stephen Bitti (SB) - Chief Officer, Candy Dunne (CD) - Deputy Chief Officer, Jaimy
Activity Report	Halliwell-Owen (JHO) - Communications and Engagement Officer, Kezia Coleman (KC) - Projects
Activity Report	and Outreach Officer (Disabilities and Mental Health), Hen Wright (HW), Projects and Outreach
	Officer (Young People and Safeguarding), Persephone Pickering (PP) - Time to Change Hub
	Coordinator, Rona Topaz (RT) - Learning Disabilities Support Officer, Graham Goldspring (GG),
	Acting Chair, Hospital Services Task Group, Tony Williams (TW), Chair, Mental Health Task Group,
	Nigel Spalding (NS), Acting Chair, Community Care Task Group and Stephen Bitti (SB), Acting Chair,
	Learning Disabilities Task Group.
PART A Agenda Item 6	Appendices:
	No.

This report updates the Board on progress made towards delivery of our seven work areas for 2020/2021. The report includes updates from the Chief Officer, Deputy Chief Officer, Project and Outreach Officers, the Communications and Engagement Officer and Task Group Chairs. There is an additional section at the end for updates about additional items and activities. Healthwatch Kingston staff, Trustees and other volunteers have continued to deliver against our contracts while responding as resources and capacity allow to emergent needs.

The Board is requested to:

- 1. Review and Note this Activity Report.
- 2. Consider HWK participation in an inclusive exercise (see 1c "South London Listens").
- 3. Nominate a Trustee to work with the staff team to develop the HWK 'Mental Health in the Workplace Policy' committed to in our Time to Change Employer Pledge Action Plan.
- 4. Nominate Trustees to sign off on behalf of the Board upcoming HWK reports (see table at the end of this paper).



SEVEN PRIORITY WORK AREAS FOR 2020/21		
Priority	Aim	Update
1. Mental Health		
1a. Review existing service user experience data and report key themes:	Provide evidence that supports improved experience of people using psychological therapy services	The Mental Health Task Group ran a service user experience review of the iCope Kingston Psychological Therapies Service (which closed the end of 2019). Progress on the reporting of this project has been hampered for a range of reasons, including Covid-19. Recommendations have been now been drafted based on a revised analysis of the report content. The report has been re-structured needs to be finalised. It will then be submitted to the provider and commissioner of the Kingston iCope service for their formal responses to the report's recommendations. We aim to then publish this delayed report at the beginning of March 2021. The iCope provider and commissioners have been notified of the revised timescales.
1b. Time to Change Kingston Hub Coordinator - supporting Time to Change Champions and events:	Change attitudes about mental health in our communities and workplaces	Time to Change Kingston (TTCK) has been working on plans for World Mental Health Day through Steering Group meetings, Champions Network Meetings, working group meetings and one to one meetings with Champions. We have also created a simplified Champions Fund application for online activities that we promoted during October. We also supported the first National Champions Network Event and had a Champion showcase her empowering journey with TTC Kingston at this event. Additionally, we planned a series of social media posts for World Suicide Prevention Day and had a Champion share his experience of suicidal thoughts through a blog post on the Healthwatch Kingston website. We have also reviewed the weekly Champions Check-In with Champions and have had meetings with 3 new Champions who are keen to get involved with the project.



		The national Time to Change campaign is ending on 31 Mar 2021. To refresh our minds, Time to Change Kingston aims are to: Combine insight from the national campaign with local knowledge Proactively campaign to reduce people's negative attitudes and behaviours Put people with lived experience at the heart of our work Embed anti-stigma work locally in schools, workplaces, and the community Engage people of all ages and backgrounds in creating a mental health friendly Kingston. The TTCK Hub coordinator has been in post since the end of Aug 2019. The project has been led by Champions and partner organisations at Steering Group meetings every 2 months and activities and events have been planned and facilitated by Champions at the regular Champions Network meetings and working group meetings. In view of the closure of the national campaign, discussions are being held informally between Champions about future cooperation on an agenda - yet to be agreed - but incorporating anti-stigma.
		A PART B paper has been provided for consideration by the HWK Board.
1c. Chair and administrative support for the 'Thrive Kingston Mental Health Strategy Planning and Implementation Group' (MHSPIG) (year 3):	Provide independent facilitation for community scrutiny of progress against mental health strategy priorities	The 'Kingston Covid-19 Mental Health Response Strategy' group (formally MHSPIG) last met on Mon 12 Oct. This meeting provides a forum for exchange of information on the emerging picture in relation to mental health in Kingston and an opportunity for community oversight. As the 'Thrive Kingston Mental Health Strategy' finishes at the end of Mar 2021, and due to an identified need to continue outstanding work, there was group agreement on the benefit of a review and creation of a refreshed strategy that will also incorporate current and emergent need due to Covid-19.



There has also been agreement that this group become the new 'Kingston Communities Taskforce Steering Group - Mental Health subgroup' so that we can avoid duplication and support planning and scrutiny of a Kingston wide coordinated approach that addresses local mental health needs, while augmenting and benefiting from the current momentum across south west London and south London.

The next Mental Health subgroup meeting will take place on Tue 8 Dec, 10am to 12 noon. Please email kezia@healthwatchkingston.org.uk to be added to the group invite list.

The South London Mental Health and Community Partnership - 'Covid-19: Preventing a Mental Health Crisis Summit' took place on Tue 10 Nov. Attendees were updated on progress since the last summit by strategic leads including:

- Norman Lamb, Chair of South London, and Maudsley NHS Foundation Trust, and
- Millie Banerjee, Chair of the South West London Health and Care Partnership.

The summit shared a plan on a page: 'Covid-19: Preventing a mental ill-health crisis across south London' that provides six ambitions covering the following areas:

- 1. Social isolation, loneliness, and community involvement
- 2. Helping people who are at risk of losing their jobs cope
- 3. Housing insecurity and environment
- 4. Supporting communities and groups who experience disadvantage
- 5. Supporting families, children, and young people
- 6. Developing a long-term, joined-up approach to prevention.

To support these ambitions, "South London Listens" was launched at this summit by:

• Pete Brierley, Lead London Organiser of Citizens UK, and



• Cllr Janet Campbell, Cabinet Member for Families, Health and Social Care of Croydon.

They asked people to "get involved and make a difference with your community".

Between 10 Nov 2020 and 31 Feb 2021, "South London Listens" will be reaching out to community groups across south London to hear first-hand ideas for action.

First Listening Phase: 10 Nov 2020 - 31 Jan 2021

Training will be provided for people wanting to participate and listen to people in their own community asking the following questions:

- What is putting pressure on your wellbeing and the wellbeing of the people you care about?
- What has, or could have, made this experience better for you and those you care about?

Second Listening Phase: 1 Feb - 31 Mar 2021

Once they have a sense of the broad themes, stories, concerns of South Londoners, they want to drill down into the detail of these stories. Phase 2 will bring together community leaders to start to think about solutions. Part of this process is about moving from the broad to the specific.

The HWK Board is requested to consider the value of an inclusive exercise ("South London Listens") which will not result in action until at least 6 months' time. It has been suggested that this also be discussed at the upcoming new 'Communities Taskforce - Mental Health Subgroup'. SB raised this at the 'Communities Taskforce Steering Group' on Fri 20 Nov where SB also provided an update on the Mental Health Subgroup.



SB has been invited to present at the next Kingston Strategic Partnership Board on Tue 8 Dec. about the benefits of working in partnership to improve the mental health of local populations - this will include a nod to our recent YOL! report on the emotional wellbeing of young people during Covid, the TTCK Partnership and the emergent Communities Taskforce - Mental Health Subgroup.

SB will also attend an interactive integrated community-based mental health services virtual workshop on Fri 11 Dec, where primary care and mental health clinicians across south west London, together with local authorities and community organisations will come together with service users and carers, the voluntary sector and social services to input into the design of 'truly integrated community-based mental health services'. The outcomes of the initial workshop were:

• Keeping the person at the centre of all processes

Making sure care is tailored to the individual more than the system, helping people get to the right place and person first time, improving what is available in the community for all patients, making sure we take account of the whole person (physical, mental, and social care), preventing people 'bouncing' between services, and dealing with gaps in services

• Easy in, easy out

Making it quick and easy to get mental health advice and support for an individual without the bureaucracy of the referral system and the perceived disadvantages of being 'in' or 'out' of the care of the specialist mental health services

• Communication:

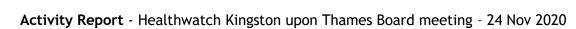
Building good relationships across the system with improved record sharing, so people do not have to keep repeating their stories and can have easy and rapid access to advice.



1d. Complete South West London and St George's Mental Health Trust Partner Fund - supporting a partnership approach to mental health awareness events in the community:	Raise awareness about mental health in our communities	In addition to two small grants provided to RISE Community Café and Fastminds from this fund, HWK has added Korean subtitles to the Youth Out Loud! 'Self-harm: Being a good friend' film made by young people for young people (YOL! is supported by Healthwatch Kingston and Healthwatch Richmond). The subtitles now need to be reviewed by a Korean language professional to ensure they are appropriately placed within the film, and then a discussion about how we might share this film with the Korean community during Covid is required. There have been some initial discussions linked with Time to Change Korean community partners which need further-exploration and approaching schools providing for Korean communities in New Malden. We may also look at adding Korean subtitles to the YOL! Introduction film and add a Korean translation about the film and the signposting to services it provides for young people to the www.yolweb.info and Healthwatch Kingston website.
1e. Monitor progress of specialist service provision to people with Emotionally Unstable Personality Disorder (EUPD):	Ensure EUPD service is provided as agreed	 In June, the Chair of HWK wrote to SWL Clinical Commissioning Group Mental Health leads asking for clarification on the following: Whether the EUPD service in Kingston is now fully operational, and whether it is comparable to the service provided to residents of the other five boroughs If it is not yet fully operational, whether there is scope for user involvement in its design Whether the service is available to everyone with EUPD. HWK has been told that it covers only a fraction; if so, what is the rationale for this, and what is the provision for people with EUPD who are not eligible What volume of spot purchasing has taken place? A response from Mental Health leads was discussed at both the Healthwatch Kingston Mental Health Task Group and Healthwatch Kingston Board. Following these conversations, it was felt a further letter was required to explore the core unresolved issues identified:



		 The scope of the service provided for Kingston people and whether a significant cohort fall outside it. The prospect that a future service may be in design, and the scope for Patient and Public Involvement in shaping it. Nigel Evason has recently been appointed as Head of Children's, Mental Health & Learning Disabilities (Kingston & Richmond), and has since responded. He has requested a meeting to discuss the numbers/data further. There has however been an assurance made of a commitment to co-production in the reviewing of and any agreed redesign of services. It is felt that Kingston residents are currently being offered at least equivalent service provision to people with EUPD compared to other SWL boroughs. That said, we have been informed that Nigel has been involved in SWLCCG commissioning/transformation board meetings and that this is an area of concern around many of the boroughs and as such there is agreement to explore this further across SWL. SB to arrange a meeting with Nigel, LM and TW to progress.
2. Learning Disability		
2a. Capacity building Healthwatch Kingston to improve access and support meaningful engagement with local people with a learning disability (year 3):	Ensure HWK is "Learning Disability friendly"	KC attended the Kingston Mencap "Let's Talk" meeting, to gather local people's views on Health and Social Care services during Covid. Attendees enjoyed the session, talking about what was good, as well as what wasn't, and the differences they have found, with services adjusting to being Covid secure" Two Healthwatch Kingston Enter and View training sessions have taken place for people with learning disability and we hope to have a good team to make visits to GP practices once it is safe to do so.





		Healthwatch Kingston have signposted to several upcoming events for the Learning Disability community and programmes, including Mencap's free health and wellbeing course. We have also recommended panellists with a health related/Learning Disability remit for KCIL's disability awareness conference.
2b. Grow the Learning Disability Task Group (LDTG) of people living with a learning disability, their families, carers, and advocates:	Support people with a learning disability, their families, and carers to have a say in their health and social care services.	Healthwatch Kingston held a Learning Disability Task Group (LDTG) meeting via Zoom on Mon 9 Nov and eight members contributed to our discussions. During the meeting, the LDTG agreed that in future the group would be incorporated into Kingston Mencap "Let's Talk" regular meetings. These currently run weekly but it was suggested that the LDTG be allocated 30 mins of the agenda once a month. This means the LDTG will outreach and engage with a larger input from people with a Learning Disability, their families, carers, and advocates in the community. KC will liaise with Michelle Kitch at Kingston Mencap to schedule dates.
2c. Chair and administrative support for the 'Kingston All Age Learning Disability Partnership Board' (year 3):	Provide independent facilitation for community scrutiny of progress against All Age Learning Disability strategy priorities	The All Age Learning Disability Partnership Board (AALDPB), end of year report is near completion - it has been contributed to by a range of partners and reviewed by the Involve Learning Disability Advocates to ensure accessibility through Easy Read and Plain English. The AALDPB end of year event is being planned for Fri 18 Dec with a save the date going out to stakeholders shortly - the event will have a Christmas theme and it will showcase the publication of the AALDPB end of year report. Healthwatch Kingston has seen new people attend the AALDPB meetings (around 15 to 20 people attending regularly), and the Communications work group are meeting regularly, and providing feedback to RBK so improvements can be made to communication and engagement with people with a Learning Disability, their families, carers, and advocates in the community.



Provide an independent digital solution to capture patient experience of hospital services	The Hospital Services Task Group did not meet during this period. The Enter and View Report of Kingston Hospital Adult Inpatient Wards production schedule has been revised and is due to be sent to hospital leads in Dec. for their formal review and response. The next Kingston Hospital Healthwatch Forum virtual meeting is on Wed 2 Dec, 10.30am to 12.30pm. The next Hospital Services Task Group meeting is on Thu 10 Dec, 10am to 12noon.
Ensure continued robust complaints procedures are available and learning from complaints informs hospital improvements	This continues to be monitored by Healthwatch Kingston on a day-to-day basis through analysis of experiences, concerns and views shared about hospital services through responses to our surveys and other currently virtual engagement activities.
Gather service user experience of components of Kingston Coordinated Care to gauge improvements to	The last Community Care Task Group meeting was on Tue 20 Oct. At the meeting, members looked at RBK's arrangements for recommissioning home care services from April 2021, as contained in a report to the council's Response and Recovery Committee on Thu 24 Sep 2020 - see this link . The Task Group has also acted as an Advisory Group for a new engagement exercise by Healthwatch Kingston, reviewing and commenting on an initial draft survey for the staff-led
	independent digital solution to capture patient experience of hospital services Ensure continued robust complaints procedures are available and learning from complaints informs hospital improvements Gather service user experience of components of Kingston Coordinated Care to gauge



	wellbeing	project on 'The experience of care home residents, their family members and friends during Covid-19'.
4b. Develop links with Patient Participation Groups:		With the support of SWL Clinical Commissioning Group colleagues, GP managers have been contacted to share Healthwatch Kingston's What do you think about the COVID-19 NHS Test and Trace Service survey with their Patient Participations Groups. RT will begin a follow up exercise with Kingston GP managers and Patient Participation Groups the week beginning Mon 23 Nov.
5. Young People		
5a. Support Youth Out Loud! (YOL!) to review health and care services (we will do this in partnership with Healthwatch Richmond):	Support young people to have a say in their health and care services	The Youth Out Loud! Young People's Wellbeing During the COVID-19 Crisis Survey Report was published in Oct. The report written by Healthwatch Kingston and Richmond in collaboration with Youth Out Loud! (YOL!), a group of young people aged 13-17 supported by local Healthwatch.
,		364 young people shared their experiences with us through an online survey during lockdown, with some interesting results.
		The resulting report provides the following key learning:
		1. Tailoring services and support provided, dependent upon the individual's needs Professionals must take into consideration external circumstances and lifestyle changes in relation to the young person's age. Professionals should always seek feedback from the individual as to how events are affecting them and what they need to maintain good mental health. A collaborative and tailored support system should be established with the young person with the flexibility to adapt and evolve as situations and perspectives change.



2. Virtual vs face-to-face support

Young people seem optimistic about approaching or being approached virtually by mental or physical health services. Some may benefit equally or more as if they were to meet a professional in person. Virtual support may make some young people feel more comfortable receiving help if they live far from the visit/therapy setting and they are unable to travel, or they simply wish to save time. However, virtual support does not represent a viable option to many young people due to lack of privacy in the home, accessibility issues or practical challenges when not face-to-face due to a lack of diagnostic tools and challenges building rapport). Options should be offered and discussed with each individual. A back up plan should be discussed with patients in case further waves of Coronavirus impose local or national lockdowns, or if they are considering virtual support by default.

3. Improving young people's wellbeing: resilience and the whole school approach Young people should be supported to develop the resilience that is needed to adapt to adverse situations, finding the strength and motivation to pursue activities that are meaningful and supportive to their mental and physical health. We believe that the whole school approach would promote and support young people to better develop and maintain healthy behaviours or skills aimed at reaching those goals.

4. Increase GP capacity

It is important that in the future, physical health services ranging from GPs to specialist support will provide continuity of care, especially to disabled young people. Building GPs capacity will increase the likelihood of services' resilience, ability to bridge service gaps at time of crisis in the community and provide continuity of care.



		 5. Cross Service Collaboration There is a need for services, such as CAMHS and others who prescribe medicines, to facilitate better access to medication during lockdowns, especially when young patients have multiple needs, through cross-service collaboration. Where safe, prescribing more medication each time or reminding patients to request their repeat prescriptions will help some patients and possibly increase services capacity. 6. Improve information provision We recommend all agencies working directly with young people to provide a reliable,
		clear, and easy to read source of information. We will now arrange meetings with commissioners so young people from YOL! can present the learning and discuss the report, supported by Healthwatch.
		After reviewing the report, Healthwatch England asked Healthwatch Kingston and Healthwatch Richmond (our partner organisation) to present at the Healthwatch Week 2020 during a virtual session on 'Engagement with young people and their mental health during the Covid-19 pandemic'. The session was co-presented with Healthwatch Darlington and was received well. There were 39 participants from other local Healthwatch organisations. The session was popular and over-subscribed. Attendees were enthusiastic, there was a positive vibe in the group and a sense of camaraderie across 'Young Healthwatch' groups. We suggested meeting every couple of months to share ideas and learn from each other.
5b. Support delivery (with other partners including Healthwatch Richmond) of the Digital Youth Project (year 2) to complete a series	Develop a library of health and care films made by young people for young people	Work on the planned YOL! Sexual Heath film has been progressed. Since Covid began and now we are in a second lockdown, there are ongoing restrictions to filming, and logistics have been reviewed. To reduce risk, we plan to have Steve Slavin enter the Wolverton Sexual Health Clinic at Kingston Hospital on a Saturday (when it is closed) so that filming can take



of short health and care films by young people for young people:		place in the reception, an assessment room and in a treatment room. This footage will be used as a background to different sections of the film that has been designed by young people for young people. Avatars of YOL! members will be created, and we will use their voices to bring them to life, rather than have the young people enter the clinic during Covid-19.
		We are engaging with sexual health medical professionals as part of the film - a GP who specialises in sexual health and a sexual health nurse from the Wolverton Clinic - to answer questions that came from our recent YOL! sexual health survey. The plan is to interview outside the clinic and use a mixture of interview footage with voice responses as pop-ups.
		SB and HW have met with the CEO of Creative Youth and are putting plans in place to showcase the suite of YOL! films as part in the International Youth Festival in July 2021. Unsurprisingly there is a digital theme to the festival. Creative Youth have also requested a representative from YOL! sit on their new youth panel that helps plan the event. In return we have extended YOL! membership to this panel.
5c. Support YOL! develop its online and social media:	Support young people to safely communicate via social media	We have made a concerted effort with social media posts on the YOL! Twitter and Instagram accounts. We have increased our followers on both online platforms by posting messaging every day. We continually signpost to www.yolweb.com and cross promote through the Healthwatch Kingston website to increase traffic to both sites.
		We plan to recruit one YOL! social media volunteer in Kingston (and another in Richmond) to help develop YOL! social media even further.
		We are also planning to include schools, starting with one in each borough to develop and produce Podcasts on young people's health and care issues. This is a great 'in' to deal directly with schools with an interesting and valuable project and to support the recruitment of YOL! volunteers.



6. Safeguarding		
6a. Explore how the Community Reference Group for adult safeguarding will become a sustainable adjunct to the Kingston Safeguarding Adults Board:	Gather service user experience of safeguarding to inform service developments and support positive personal outcomes	Community Reference Group meetings during this period have not taken place as our safeguarding work has focused on establishing the Making Safeguarding Personal pilot.
6b. Deliver the Kingston Making Safeguarding Personal pilot:	Gather personal experience of safeguarding to inform service developments and support positive personal outcomes	Healthwatch Kingston has now provided the RBK Adult Safeguarding Team with the mutually agreed Making Safeguarding Personal (MSP) pilot documentation required to deliver and therefore, the frontline service can now be provided to current service users with a Learning Disability as part of and at the end of the safeguarding process from Mon 23 Nov. RBK has confirmed they will contact service users who have completed the safeguarding process since April and are exploring how this pilot can be extended beyond people with learning disabilities to other target groups Kingston Adult Safeguarding.
6c. Continue support for the London Safeguarding Adults Board Conference Planning Group (year 2) and work to ensure people with lived experience of safeguarding are integral to safeguarding systems and processes across London:	Ensure the voices of people with lived experience of safeguarding are part of the Kingston and London Safeguarding Adults Boards	(As previously reported) SB has been asked to Chair the London Safeguarding Adults Board (LSAB), Voices subgroup, which SB has been attending (on behalf of a HWK commitment) for the past year. This role will be supported by an administration officer and additional resource. Leads at HWE and London Association of Directors of Adult Social Services (on behalf of the LSAB) are preparing paperwork to outline this arrangement - which will include supporting people with lived experience of safeguarding representation from Kingston.



7. Response to coronavirus

7a. 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:

Gather service user experience of NHS and social care services during the coronavirus pandemic Healthwatch Kingston is engaging or planning engagement with local populations in the following areas and will publish reports with learning and recommendations to support continuous improvements in commissioning and provision of local health and social care services - including future pandemic preparedness:

• Experiences of NHS and social care services during COVID-19

The Healthwatch Kington 'Have your say' survey closed at the end of Oct. Responses are being analysed and then combined with other feedback provided to HWK between Apr and Oct and will be written into a report sharing the experiences, concerns and views of residents about NHS and social care services during the coronavirus pandemic. This report will be published at the end of Nov.

Experiences of COVID19 NHS Test & Trace

Healthwatch Kingston is gathering experiences, concerns and views from Kingston residents about the <u>COVID-19 NHS Test and Trace survey</u>. This survey will close at the end of Nov and the report will be published in Jan 2021.

• Residents, family members and friends' experiences of residential environments during COVID-19

Healthwatch Kingston is interested to hear about the experiences of residents, and family members and friends of residents of **Care Homes, Supported Living Homes and**





Extra Care Housing during Covid so we can provide anonymised feedback to service providers and commissioners to help improve services.

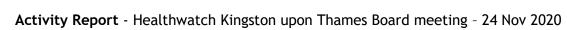
We are now planning to 'go live' with this in Dec and close the survey at the end of Jan 2021. We will produce a Kingston report but are also considering (with other SWL HW colleagues) how the information gathered from our and other SWL HW care home surveys might contribute to a themed SWL report.

As noted above, the Community Care Task Group is the Advisory Group for this project and as such, the group reviewed and provided feedback on the draft survey. The staff team are in the process of incorporating feedback and will circulate an updated survey for review as soon as this is available.

SB and CD met with RBK lead officers (Miriam Smith and Helen Coombes) on Wed 11 Nov to discuss the project further. We discussed the sensitive nature of this work given the level of vulnerability and loss (in its broadest terms) that many people will be living with since Mar.

RBK are keen to support our independent research and have agreed to collaborate with Healthwatch to help facilitate. RBK will offer support to people for whom this unearths unresolved issues with dealing with the pandemic and separation from their loved one. It has been agreed this will be provide through the Kingston Stronger Together Hub - who will be able to refer people to active listening or 'low-level' emotional support services.







	SB and CD attended the Kingston Care Home Providers Open Forum on Thu 19 Nov to discuss this survey and to identify willing providers and will now liaise with those that have indicated interest so far.
	ADDITIONAL ITEMS AND ACTIVITIES
Item/Activity:	Update:
HWK Open Meetings	Open Meeting October 2020
	Healthwatch Kingston has held our Open Meetings via Zoom since COVID-19 lockdown in Mar with a fairly constant level of attendance.
	In addition to Healthwatch Kingston signing the Time to Change Employer Pledge (reported below) and the publication of the Youth Out Loud! Report (reported above), the meeting provided presentations with question and answer time from:
	 Kingston Hospital on COVID-19 from Sally Brittain, Director of Nursing and Sarah Shade, Head of Nursing, Planned Care Division.
	 NHS SWL Clinical Commissioning Group on Preparing for Winter/111 First/NHS is here, Keeping Kingston Safe from Hannah Keates, Engagement Manager
	Afternoon agenda items included the Mental Health Task Group and the Community Care Task Group meetings followed by updates from all Task Groups (Hospital Services/Learning Disability/ Mental Health/Community Care/Youth Out Loud!).
	The next <u>HWK Open Meeting will be held via Zoom on Tuesday 15 December</u> from 12 noon to 4pm.



Healthwatch Kingston signs the Time to Change employer pledge	Time to Change is a social movement aiming to change the way people think and act about mental health. Healthwatch Kingston now joins the many organisations across the country who have pledged to tackle mental health stigma within their workplaces. At our Healthwatch Kingston Open Meeting on Tuesday, 20 October, Healthwatch Kingston Chair, Liz Meerabeau, signed up Healthwatch Kingston to the Time to Change Employer Pledge. We were joined online via Zoom by the staff team, Trustees, other volunteers, members of the local community, RBK and NHS colleagues, who all witnessed the signing. You can watch the full online event of the pledge signing in the video here.
	Healthwatch Kingston Board and staff will now begin the development of a Mental Health in the Workplace Policy that is committed to in our Employer Pledge Action Plan.
Agile working	It may be timely for Healthwatch Kingston to explore how we can deliver our role with more agility while continuing to maintain the health and wellbeing of our staff and volunteers. Arrangements would be kept under review and may revert as and when we return to a more stable environment. This may include the need to convert our Task Groups to more agile Advisory Groups and link into other groups/pieces of work (e.g. Mental Health Task Group members have already been invited to join the new Kingston Communities Taskforce - Mental Health subgroup, Hospital Services Task Group members have and can continue to attend the Kingston Hospital Healthwatch Forum meetings, the Learning Disabilities Task Group has recently agreed to run as part of Kingston Mencap 'Let's Talk' group, and the Community Task Group is already acting as an Advisory Group for our Care Home survey and provides useful horizon scanning about social care).
HWK Reports Publication Schedule	The table below sets out a revised publication schedule for Healthwatch Kingston between Oct 2020 and Jun 2021. Potential engagement with local populations about their experiences of Long Covid services, Access to



Urgent Care via 111 and Covid-19 Vaccination services are emergent areas currently being discussed with
stakeholders and will require further exploration by Healthwatch Kingston before commitment.

Revised publication schedule for Healthwatch Kingston reports (Oct 2020 to Jun 2021)			Staff lead(s)	Board lead(s)
1	October 2020	YOL! Report	HW/SB	WO
2	November 2020	Experiences of NHS and social care services during Covid-19 Report	JHO/CD/SB	LM
3	December 2020	All Age Learning Disability Partnership Board End of Year Report (2018-20)	KC/RT/SB	?
4	January 2021	NHS Test and Trace Report	JHO/CD/SB	?
5	February 2021	Enter and View of Kingston Hospital Adult Inpatient Wards Report	JHO/SB	WG
6	Beg-March 2021	Service user experiences of iCope services	KC/SB	GS
7	End-March 2021	Residents, family, and friends' experiences of Care Homes during Covid-19 Report	JHO/CD/SB	NS (TBC)
8	April 2021	Experiences of Long Covid services AND/OR Experiences of Urgent Care via 111 (TBC)	JHO/CD/SB	?
9	May 2021	Further experiences of NHS and social care services e.g. Covid vaccination (TBC)	JHO/CD/SB	?
10	June 2021	HWK Annual Report 2020-21	SB/staff	LM/Trustees