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| Healthwatch Kingston Board Meeting (Part A) | Date: Wednesday 17 January 2024 |
| Report Title: Q3 2023-24 Chair's Report     | Author: Liz Meerabeau           |
| PART A Agenda Item: 3                       | Appendix: No                    |

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| For Information   |
| <p>The Board is requested to:</p> <ul style="list-style-type: none"> <li>• <b>Note</b> this report and consider question(s).</li> </ul> |

This is the last Chair's Report that I will write as the Chair of Healthwatch Kingston, since I will be stepping down on 31st March 2024 in order to have a period of transition before I retire as a trustee in February 2025. I wish our new Chair, Kathryn Yates, every success in the role.

I became Chair in September 2018, and from December 2016 to December 2022 also served as the representative for the six SWL Healthwatches on a succession of bodies- the Sustainability and Transformation Partnership, the merged Clinical Commissioning Group, and the Integrated Care Board. During that time, I have seen Healthwatches become more influential in shaping services, and the value of our information even more valued by both health and social care.

On 21st November 2023 I attended the Health Overview Panel, where the main topic was dementia diagnosis and care; it is recognised that RBK needs a new dementia strategy. Research by Dementia UK in July 2023 has shown an increasing number of calls to their helpline about safeguarding, so we need further information carers' experiences, and HWK has made contact with the local Alzheimer's Society, which provided input to the HOP report.

The main topic for the January HOP will be children's dentistry; as has been widely publicised, nationally the main cause of children's admission to hospital is the need for dental extractions. HWK has asked for the adequacy of provision for adult dentistry to also be assessed; this was not a topic in the recent Kingston Joint Strategic Needs Assessment, but we are hopeful that it will be addressed as a 'deep dive'. Dentistry is now commissioned through the Integrated Care Systems rather than nationally. In the South West London ICS, a steering group has been established in which the six Healthwatches are represented; a major purpose is to enhance dental care provision by using the local underspend generated by dentists handing back parts of their contract which leave them out of pocket.

HWK continues to act as a critical friend to Adult Social Care in RBK. We are finalising arrangements for piloting Enter and View in a care home, and anticipate being involved in the peer review of ASC in early 2024 which will be part of the preparation for a CQC inspection at some point. An improvement plan is being created, and Public Health have been asked to undertake a needs assessment, recognising that there is currently an unprecedented demand for ASC.

I have also attended the Kingston Partnership Board. The December Board focussed on community cohesion, and noted that 41% of children and young people in RBK have a BAME origin. It was also noted that a review of economic development in RBK shows that although the median wage is above the national average, many of the businesses actually situated in the borough are in low wage sectors such as retail.

Lastly on 11th January I attended the Healthwatch England quarterly network meeting for chairs and board members. Topics included the need for a new HW commissioning model (including the possibility of commissioning HW on an ICS footprint) and more systematic links with the CQC locally. The HWE Head of Policy will be speaking to a Select Committee on primary care, including pharmacy, and Louise Ansari commented that it would be useful if HWs monitor the operation of pharmacy first locally. I spoke about risk management in pharmacy first, having experienced two serious issues of missed diagnoses, and several attendees commented about the lack of pharmacy provision in their own area, such as Norfolk.

Two actions requested for local HW are that we try to improve our reporting of demographic data, particularly in relation to signposting where it can be harder to gather the information. (HW will also be gathering diversity data on trustees, employees and volunteers). Secondly, we asked to participate in the culture workshops:

[Online workshop January 25, 2025](#)

[Online workshop February 20, 2024](#)

[London February 27, 2024](#)