

CEO Board Report

January 20th 2022

Introduction

This is my fourth report to the Board as CEO.

We remain under covid related guidance with the majority of staff working from home. This continues to restrict our ability to undertake engagement and volunteering activities but we have been present at some external events.

Overall the position of the organisation is a healthy one. We are in a relatively good financial situation, we have won new project work and have extended existing projects.

Looking ahead we will face the challenge associated with the need to replace Jon as Chair as well as recruit new Directors and Trustees for the Trestadow charity. I will update the Board on developments in that regard at the meeting.

Coronavirus update

External

I have continued to send Directors the weekly situation report updates on the outbreak and vaccination programme. Cornwall and the Isles of Scilly currently has lower levels of infection rates than Upper Tier Councils in England. While the Omicron virus has surged throughout Cornwall it has not resulted in significant demand on hospital services.

I continue to attend meetings of the Local Outbreak Engagement Board which coordinates responses to localised surges.

Internal

Given the relatively high infection levels in the county there are no plans at this time to institute a full return to office working and several staff and their families have had covid over the past month.



Healthwatch Cornwall key contract work

General Practice

Accessing a GP appointment and booking an appointment remain a real concern for the public - for some it is proving almost impossible to access a GP. This is reflected in our monthly data and it is the most common issue people are approaching us about - superseding access to dentistry for the first time in a long while. Ensuring general practice is receptive to this feedback, and reaches them via the most appropriate forum, has always been a challenge. As we go forward, it is important to ensure we can be part of the solution if we are to make inroads with these issues. Understandably, GPs do not want to feel continually condemned by the public in respect of this given the variety of existing pressures and the booster vaccine rollout. There does however need to be further insight gathered into the evidence we have triangulated across the system, or where locality-based trends arise, such as increased ED attendances from areas we have highlighted as particularly struggling with access.

Covid has expedited change across all aspects of the system, including the implementation of non face-to-face appointments, and the introduction of different online booking systems at GP surgeries - as demonstrated in our evidence. There is much to learn from these changes that could form part of a wider engagement, public education and information plan we can support general practice to develop. Building on existing and forging new relationships and ways of working with primary care will be essential to ensure we can sensitively and sensibly influence service development. We are already making great inroads into this as the year begins.

Mental Health issues

We continue to monitor feedback received regarding access to mental health services and escalate as appropriate, while also relaying any emerging themes to the various mental health meetings that we attend. We now have regular meetings with the mental health/learning disabilities/autism commissioning team, with a particular focus on identifying any updates that align with the recommendations from our 'Accessing Mental Health Support' report. There is seemingly slow progress being made with the Community Mental Health Transformation Project - mainly due to inability to recruit into the main roles - but we should see the activity pick up pace now with the development of a communication plan. We remain a stakeholder in this to be able to monitor and input where appropriate. We have also taken a place on the newly formed Learning Disability and Autism Programme Board.



As a result of our ongoing work and involvement in the area of mental health and suicide prevention, we have secured further funding to work on a new engagement project. This mixed methods community engagement aims to inform the future mental health and suicide prevention programme in 2022/23 and beyond. The project aims to work with communities and the voluntary sector to understand the pressures and needs of local people across Cornwall and the Isles of Scilly; and to shape what the mental health and suicide prevention programme will look like in the future. Using examples from the existing programmes such as social prescribing, mental health and suicide prevention, we will work with local communities and co-produce using place based approaches. This work will inform a formal consultation and business case for the mental health and suicide prevention programme. In order to facilitate this rapid turnaround project (which will fall under the project team rather than the core), Michelle Hooker will transition to work on this project solely and so we will need to recruit to backfill her role.

Dentistry

An NHS England SW briefing report has been presented to the members of the Health and Adults Overview and Scrutiny Committee that includes reference to ours and Healthwatch England reports. Healthwatch England recently issued a joint letter with the British Dental Association who continue to apply pressure at a national level for increased funding and national contract reform. <https://www.healthwatch.co.uk/blog/2021-12-12/recovery-nhs-dental-care-too-slow-help-thousands-left-pain>

Adult Social Care

We continue to receive an increase in the amount and complexity of feedback relating to adult social care and are currently reviewing this to evaluate the options available to us in terms of exploring issues with the relevant commissioners and providers. The issues are wide ranging, relating to availability of care packages, financial assessment process, Continuing Healthcare funding, quality of care and the complaints process. This is also set within the context of the upcoming budget saving cuts within Cornwall Council, and the associated impact that this will have, together with the ongoing development of two new draft adult social care strategies - 'Maximising Independence' and 'Better Lives' which form the Adult Social Care Commissioning Strategy for 2022 - 2026. All of these factors make it difficult for us to define what we can do in terms of assurance and raising challenge, and it is also an internal challenge to manage the enquiries that we receive as they draw on our capacity as we try to unpick the complex issues for individuals in order for us to gain an accurate recall of their story and to be able to adequately signpost to support.



Healthwatch Cornwall Key Projects

Kernow Maternity Voices Partnership

The capacity and scope of KMVP has been significantly increased by the recruitment of the Vice Chair and Project Officer. Both have settled into their roles well and the team is developing a cohesive approach to planning and delivery. It is worth noting however that as the demands on KMVP continue to grow, it is important we regularly consult on NHS priorities and manage expectations. There has been a notable long-term absence of the Local Maternity and Neonatal System Programme Lead, which we have mitigated by engaging other senior maternity and CCG leaders.

Many elements of KMVP work this quarter have been in response to the Ockenden report. Key work areas included website and leaflet reviews, continuity of carer, postnatal pelvic health, theatre SOP implementation review and digital notes review. The KMVP team have also worked closely with the Preparing for Pregnancy and Parenthood project. Many of the regular meetings attended have been cancelled due to the NHS emergency status throughout this period.

The Project Officer has re-started some face-to-face service user engagement within local community groups, as well as building focus groups to bring service user voice to KMVP's work. We are however still limited in the work we can carry out by Covid restrictions, particularly in NHS settings where much of our important service user and service evaluation work would normally happen. We continue to monitor the situation and liaise with the relevant services leads to identify opportunities.

The KMVP 2020-21 Annual Report was published in December, sharing the challenges due to Covid restrictions and staff reductions, and some of the innovative ways that these barriers were overcome to continue the work of KMVP.



Ageing Well

The final Urgent Care Response patient and staff interviews were completed this quarter. All data collated was then analysed to report individually and collectively across the three Integrated Care Areas. The final report was compiled and published in draft form. It was due to be published in early January, but due to continued and mounting pressures within CPFT, review and publication have been postponed until February, along with final decisions on Phase 2. Consideration was given to falls specific work for a future phase of research, but due to lower frequency than anticipated will now be replaced by further Urgent Care Response research.

Three video case studies to bring to life the experiences of patients, carers and staff were completed this quarter, and are now in final edit for release in January. These are highly valued by commissioners, and will certainly be incorporated into future research phases.

Preparing for Pregnancy and Parenthood

The growing stakeholder group continues to work effectively together to support the project from across the NHS, Council, Public Health, and the Voluntary and Community Sector. The aim is for multiple agencies to collaborate in reaching a consensus to design a single robust package of antenatal and postnatal educational parenting programs. The absence of the Programme Lead has impacted on development, as for KMVP, but with mitigation ensuring progress despite this. The research phase has been completed, identifying existing local provision and making recommendations on best practice nationally, noting both content and delivery methods. Effective websites and Apps provide useful complements to any in-person sessions offered, and the importance of facilitator training has been highlighted.

The Project Officer successfully launched two surveys to gather service user feedback this quarter, as well as completing face-to-face engagement with parent groups across Cornwall. Next quarter the Project Officer will facilitate focus groups to gather input from professionals. This will be followed by data analysis to report results from all feedback gathered, informing decisions on the most suitable solution for the unique geographical demographic of Cornwall and the Isles of Scilly

Experiences of Carers of People Living with Dementia

The development of this work is underway through a core project group including commissioners, Memory Café Board members, the CCG dementia lead and other stakeholders. An initial draft survey will be shared with the Memory Café stakeholders (W/C10th Jan) for use in consultation with its members, alongside recognised research tool looking at people's experiences of services, support, and



their wellbeing. Further approaches to this work may include semi-structured interviews and focus groups. The plan is for co-production with café members and the Board members with whom we are working particularly closely, are keen to support us with both dissemination through their network and analysis of survey results. Collaboration with Healthwatch England and NHSE&I colleagues as part of the development of this project to shape future services has informed our work, and will continue to do so.

NHS England and Improvement commissioned project: Carers experiences of hospital discharge.

The project to understand carers' experiences of hospital discharge began in Q3, starting with a call to action to stakeholders across the health, care and voluntary sector to engage with us and our comms campaign to recruit carers to take part in interviews. We were targeted with recruiting ten carers for semi-structured interviews and are on track to deliver 16 interviews. While recruitment has proven challenging for all seven local Healthwatch, we have certainly been tenacious in our efforts with the entire team contributing to this campaign in some way. The next phase is for a focus group in early March with key colleagues from across the system to share insights from the feedback (both local and national) and to agree next steps moving forward. While we will await a public-facing national report, we will challenge services and providers to act on what they here without delay.

New Projects

Following lengthy discussions and negotiations with Public Health throughout quarter three, we entered successful bids and were awarded two new contracts in December. This required recruitment of Project Officers to lead on what will be short and intensive research projects. The two projects are:

- **Impact of Covid on Diverse Population Groups**

This is a four-month qualitative research project to understand the short- and long-term impact of the pandemic on individuals' lifestyles, their physical and mental health. We will focus on the impact for eight specific population groups. We have recruited former Safeguarding Adults Board Project Officer Becky to deliver this on a contract basis. We are working collaboratively with CHAOS who are conducting the research for another four population groups. Project planning and development is in progress leading into quarter four, co-creating methods and tools. This will lead into the research phase, with analysis and reporting to be completed in April. Recommendations from this research will help inform a variety of programmes of work including long-covid services, reduction in health inequalities, support to alleviate food insecurity and fuel poverty, and support for new and emerging mental health and wellbeing needs.



Cornwall Equality and Diversity Network are keen to support and contribute to this research through their member organisations. They may also be able to fund and/or support activity for implementing recommendations highlighted in the final report.

- **Mental Health and Suicide Prevention**

This is an eight-month qualitative research project working with communities and the voluntary and community sector to understand the pressures and needs of local people across Cornwall and the Isles of Scilly, including increased pressures due to the pandemic. The research aims to understand triggers that lead to mental health crises, review service user views on the value of support currently available, and identify any gaps in support.

The project team are delighted to welcome Engagement Officer Michelle onto the team on a 12-month secondment to lead on this project. She will do this in collaboration with Lesley, who will assist with project planning and development as Michelle transitions into the role, working together until the commencement of the anticipated Phase 2 of the Ageing Well research which Lesley will again lead on.

The final report with recommendations is planned for August, and the findings will shape the future mental health and suicide prevention programme.

Partnership Boards

Carers Partnership Board

A key role of the Board is to scrutinise the implementation of the Adult Carers Strategy through the delivery of the new Informal Carers Service. We developed simple reporting mechanisms for the five providers to provide the Board with quarterly updates on their work, which have so far worked well. The Board continues to be updated on the Delivering Better Care programme, an element of the Adult Social Care Modernisation Programme, but we await confirmation of the next stage of engagement.



Stuart Cohen, CCG, is assisting with the development of the Board having improved sight of local strands of work being undertaken to meet the objectives of the NHS Long Term Plan. This is quite complicated due to workstreams crossing multiple areas so identifying 'leads' is essential.

We are working closely with Charlotte Harris, NHSEI, to ensure that we are aware as early as possible of work being undertaken at both regional and national level and to link in with groups outside of Cornwall to share knowledge and best practice.

Learning Disability Partnership Board and Autism Partnership Board

Although the issues considered by these two Boards differ, the issues affecting them are the same. Maybe understandable given the current upheaval at Cornwall Council and the heavy workload of Commissioners, the current lead officer for the Boards has had minimal input and has caused great confusion with poor communication for many months now, along with last minute apologies being sent on multiple occasions.

Whilst the Boards have been engaged on developing ASC Strategies, presentations have not been catered towards people with LD and Autism so feedback from our self-advocates has been minimal. We are informed that the next stage of engagement will target smaller groups to enable feedback but we have not yet received details of how that will be managed.

Nory Menneer, NHS Kernow, has been the conduit for providing the new Learning Disability and Autism Programme Board, recently set up to ensure that a joint, systemwide approach is taken to all elements of the LDA programme in preparation for the establishment of the Integrated Care System, with feedback on issues considered by the Partnership Boards. It is within its Terms of Reference that there should be two-way links to the PBs and that the Boards should have sight of work undertaken in relation to the LD and Autism elements of the NHS Long Term Plan objectives. We hope to agree upon more formal mechanisms soon.

The value of continuing the LD, Autism and Carers Service Users Events will be reconsidered following its next meeting. The level of support to attend that providers can give to service users has reduced as more 'normal' working practices have started to resume, which has led to a decrease in attendance. It may be that we focus on specific issues in focus group style meetings. It would be a shame to lose the group as the voices of service users heard through this, particularly in



relation to access to NHS services, have led to real change to practices and increased training across a number of services.

It was discovered in November that in July 2020 Cornwall Council had commissioned The Advocacy People to work with service users to help them to develop the skills to become self-advocates. Part of that contract stipulates that their work should *'include but is not limited to helping people to have their voices heard and influence decisions at the Cornwall and Isles of Scilly Partnership Boards facilitated by Healthwatch Cornwall. The approach that is taken to providing feedback from group Community Advocacy sessions to the Partnership Boards will need to be agreed between the Service Provider and Healthwatch Cornwall in collaboration with Commissioners.'* Unfortunately, we were not notified that this contract had been awarded. Meetings have now been held with TAP management and meetings arranged with two new members of staff that will be tasked with working with the PBs. This work could be key in ensuring that we can recruit more service users to participate in the Boards' work.

Older Persons' Partnership Board

No change from the October report. Following agreement with the previous contract manager and the current membership of that board, the OPPB is paused as it was felt that there was an overlap with the CPB. It had proven difficult to find a way to focus agendas as the opportunity for influence was so broad and there are no specific strategic leads for older persons. We continue to liaise with the contract manager to determine how the Board could be utilised in the short term, possibly for engagement on upcoming strategies, and its longer term purpose given the evolution of governance structures across the sectors.

Other Matters

A new Partnership Boards officer joins us at the end of January. Tanya Falaschi's role will be focused less on organisational elements and more on engagement with members between meetings, enabling greater focus of specific issues that arise both inside and outside of Board meetings.

2022 meeting dates have been set and will continue to be held on Teams. This will be reviewed when it becomes realistic to have in-person meetings, though the majority of attendees have expressed a preference for meetings to remain online.



Updates on other issues and projects

Integrated Care System (ICS).

I sat on the appointments panel for five non-executive directors for the new ICS. There was a strong panel of candidates and we were able to make five good appointments which are subject to ratification from the regional NHS.

I have initiated an internal working group to look at the development of the ICS and this is due to meet soon. If any Director would like to participate in these occasional meetings please let me know.

The government has indicated that the introduction of the new arrangements will be put back from April to July this year.

Healthwatch England

“Healthwatch week” took place during the last quarter. This was entirely on-line with key note speeches as well as seminars on many different subjects. There was widespread participation in these from HC staff.

We continue to work closely with Healthwatch England on many different issues including the Quality Framework and Integrated Care System.

Evidence Management

Further to the previous update, Healthwatch England have now updated demographics categories on the CRM in mid-December. We have now adjusted all our forms (web form pending final update), and are creating a demographics crib sheet alongside training, to support volunteers in the collection of demographic data from public feedback.

Healthwatch England are continuing to develop the specifications for a new CRM. Delivery of this has been postponed until at least February 2023. The bespoke report created for us using the existing CRM is working well for our routine reporting and allowing us to easily identify and share more detailed feedback with services as and when appropriate - as intended.

We have set up a new Microsoft Form using Excel online saved on Sharepoint to collect Have you Says electronically. This new system allows team members and volunteers to enter Have your Says via a link to a form. This system is being trialled and is working well so far, improving efficiency of data entry and allowing the engagement team to update records as a case unfolds. It may also prove useful for



other projects / administration where simple forms are required for ongoing data collection.

We have also set up reports to automatically run from Care Opinion each quarter. These reports include feedback entered by the public on Care Opinion and nhs.uk websites. These will be used for triangulating issues raised within our feedback, particularly about individual GP surgeries.

Internal and staffing issues

During Q3 there have been no staff changes. There has continued to be a vacancy within the Partnership Boards team and recruitment began in December once the JD/PS was reviewed to take into account the specific skills and attributes needed for this role. There were some minor changes to staff hours with one member of staff reducing their hours and one member increasing them. Also in December the need for additional support within the project team was identified due to the awarding of two pieces of commissioned work to take place in 2022 and an internal appointment to this role has been made. Recruitment to fill the internal vacancy also began in December.

Team Talk and Support Meetings

Natalie presented this new approach to learning and support for colleagues at the October Board meeting. We have since established a forum for supporting the team given the increase in complex, challenging and sometimes emotionally labour some calls and feedback we manage. The objective was to provide a space to share complex cases and feedback in a supportive and learning environment, so staff feel supported and enabled in this aspect of their role. While it does not serve to replace interactions with line managers and peers, feedback from our first meeting in November was extremely positive at which members agreed on the format, process and ethos for the meetings moving forward.

Establishment of Trestadow

We are in the process of establishing a bank account via the Cooperative Bank. The recruitment of Trustees remains vital to the establishment of the charity.



Priorities January - March 2022

In addition to on-going reported activity and project management there are a number of additional priorities for our attention over Q4 that include:

- Ongoing discussions with KCCG regarding structure of public participation in ICS and a Board/senior staff session to consider options for public engagement.
- Continue to ensure the safety of staff working in the office and focus on supporting staff who continue to feel impact of pandemic and effect on delivery of work plans during ongoing uncertain times.
- Initiate activity to prepare for our Work Plan 2022-24
- Work with team, including research team, to plan our engagement and research in order to increase amount of solicited feedback, with a particular focus on primary care and adult social care.
- Set up of financial and accounting arrangements in-house
- Continue with the quality framework action plan
- A number of meetings are in place with key stakeholders to discuss feedback, engagement new ways of collaborating with primary care. We will be working closely with Engagement to agree next steps following a number of key external meetings.
- Progress with two key research projects: carers' experiences of hospital discharge and our work around carers of people living with dementia, will remain a focus.
- An inaugural Patient Experience meeting with key PE leads will take place in January, and will provide an opportunity to help shape patient experience across the county. A review of the impact of our feedback in respect of patient experience within CPFT is also in place, which we hope will provide an opportunity to inform the wider context of this work here.

MARIO DUNN

CHIEF EXECUTIVE

HEALTHWATCH CORNWALL

January 2022



Appendix 1: Q3 marketing & communications update

7th January 2022

Q3 website and digital performance:

- In Q3 2021 the website achieved 5,395 unique users and 10,623 page views
- This is close to +50% up yoy compared to 3,673 unique users for the same period 2020
- 90% of this traffic was new visitors to our website
- The average session time was 1 minute and 5 seconds
- 65% of our audience are male and 35% female
- There is an even split of device usage, with 48% desktop v 47% mobile
- November newsletter - 868 recipients and 406 opens
- December newsletter - 895 recipients and 396 opens.

Q3 comms and marketing highlights:

- Care Homes: good media coverage with CEO comment on the introduction of mandatory vaccinations for care home staff.
- Treliske Emergency Department: reactive comms resulting in good media coverage on the topic of ambulance queuing at Treliske ED.
- Carers and hospital discharge: supporting the research team for the carers' experience of hospital discharge research project.
- Ageing Well: infographic, report and training videos produced to support this project.
- Kernow Maternity Voices Partnership: annual report published with supporting comms package.
- Engagement nomination: press release and comms to peers/key contacts resulting in good PR for Healthwatch Cornwall within the local health and social care sector.

Looking ahead - Q4 priorities:

- Annual report - content planning/research/writing/design.
- Ageing Well - comms support scoping/deliverables (phase two).
- Covid project - comms support scoping/deliverables.
- Mental health project - comms support scoping/deliverables.
- Branding - new brand/design assets roll out from HWE (hopefully).



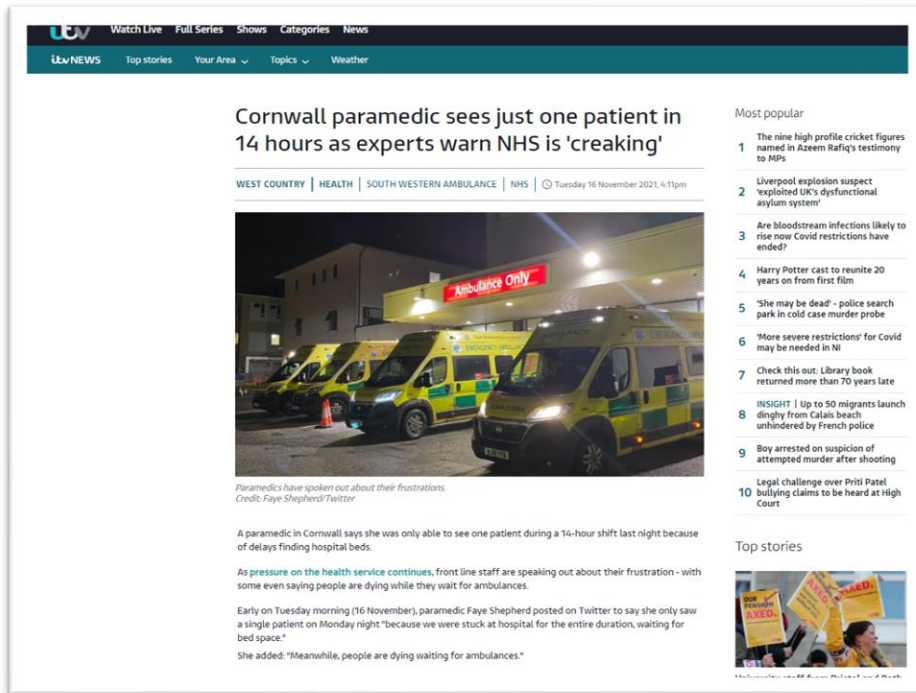
Mandatory care home staff vaccinations - media coverage

In response to the introduction of mandatory vaccinations for care home staff, ONS annual care home death data was used proactively alongside CEO quote to approach local media. The timing worked incredibly well for this with the subject received significant national coverage, our proactive press release to local media in Cornwall secured CEO interview on ITV West Country, BBC Spotlight and BBC Radio Cornwall.



Treliske Emergency Department - reactive media coverage

Queuing ambulances at the Treliske Emergency Department is an issue that tends to occur seasonally because of winter pressures, however this has become a more frequent sight outside of the normal winter season flaring up in November 2021. We have good relationships with local ITV journalists and were approached for comment in response to this, a quick turnaround/response enabled us to arrange interviews - achieving good coverage with CEO comment and video interview on ITV.com and ITV social channels.




Carers' experience of hospital discharge - research support

The research project for NHSE&I to understand carers' experience of hospital discharge has been a real team effort across the organisation with support from comms. In collaboration with research and engagement colleagues, comms and marketing collateral was produced and published to support this research project and encourage respondents to come forward.

Comms, marketing and advertising activity for this included:

- Online article Healthwatchcornwall.co.uk
- Healthwatch Cornwall newsletter inclusion x2
- Social media graphics designed + social media campaign
- Targeted paid social advertising, local radio advertising.
- Poster designed and distributed
- Engagement with key comms counterparts at CCG, Council etc.

Do you help care for a relative, friend or neighbour?



In our role as the health and social care champion for people in Cornwall, understanding carers' experiences of hospital discharge is an incredibly important piece of work for us that we are currently interviewing people about, sharing our insights from Cornwall to form part of a national picture for NHS England and NHS Improvement (NHSE&I). If you help care for a friend, family member or even a neighbour and they have recently been discharged from hospital, our team would really like to speak with you about this.

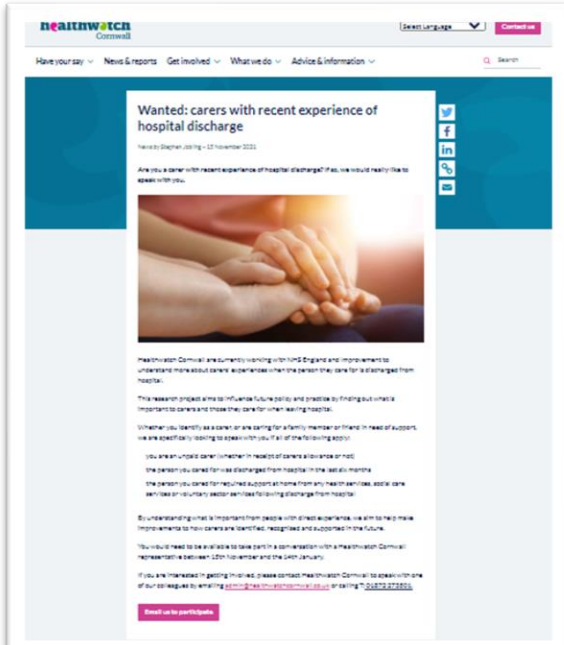
Since we launched this research project in November, we have interviewed a diverse range of carers, some of whom have experienced a change in need or circumstances since admission. We are hearing from those caring for others who require a range of support from health, social care, and voluntary sector organisations, whether that's providing care to patients or support to their carers.

We are looking to speak with people if:

- you are an unpaid carer (whether in receipt of carers allowance or not)
- the person you cared for was discharged from hospital in the last six months
- the person you cared for required support at home from any health services, social care services or voluntary sector services following discharge from hospital.

Please get in touch with us if you meet these criteria, or know someone that does.

[Click here to tell us about your experience](#)



Wanted: carers with recent experience of hospital discharge

Are you a carer with recent experience of hospital discharge? If so, we would really like to speak with you.

Healthwatch Cornwall are currently working with NHS England and Improvement to understand more about carers' experiences when the person they care for is discharged from hospital.

This research project aims to influence future policy and practice by finding out what is important to carers and those they care for when leaving hospital.

Whether you identify as a carer or are caring for a family member or friend in need of support, we are specifically looking to speak with you if all of the following apply:

- you are an unpaid carer (whether in receipt of carers allowance or not)
- the person you cared for was discharged from hospital in the last six months
- the person you cared for required support at home from any health services, social care services or voluntary sector services following discharge from hospital.

By understanding what is important from people with direct experience, we aim to make proposals to how services are identified, recognised and supported in the future.

You do not need to be available to take part in a one-to-one interview with a Healthwatch Cornwall representative in person, by phone or the internet.

If you are interested in getting involved, please contact Healthwatch Cornwall to speak with one of our colleagues by emailing info@healthwatchcornwall.co.uk or calling 7 2422 27200.

[Email us to participate](#)



Healthwatch Cornwall @HWCornwall · Dec 29, 2021

Talk to us if you care for a friend, relative or neighbour and they've been discharged from hospital recently. @UHP_NHS @NHSKerow @CornwallCouncil @RCHTWeCare @RCHTPExp

Get in touch with our team by following the link below. ow.ly/Vmt350HcWTJ

Has a relative, friend or neighbour you care for been discharged from hospital recently?

healthwatch Cornwall

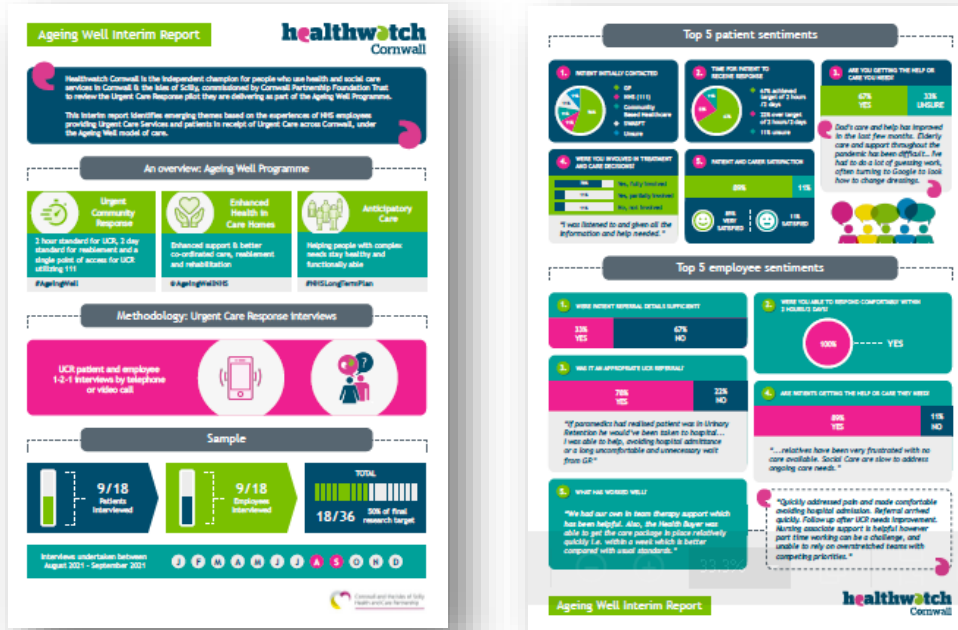
4 retweets, 2 likes



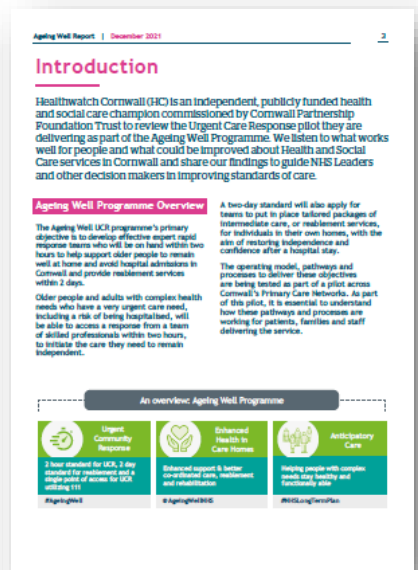
Ageing Well project support

Since securing the commission for the Ageing Well project earlier in the year, the Project team have been supported with comms resource for this specific piece of work. An infographic was produced as an interim report and the full report has also just been designed and submitted to the commissioners in late December. Three case study/training videos have also been produced that will be shared with the commissioning team and potentially used as content on our HWC owned channels.

Ageing Well interim report - infographic



Ageing Well report - 31-page full report



Ageing Well - training videos/case study

Video is a great medium for us to tell compelling stories in a visually interesting way, and the experience of people receiving Urgent Care under the Ageing Well programme really benefited from this approach. Three subjects were filmed telling us about their experience of this service, providing the commissioners with invaluable insights from the perspective of what worked well and what could be improved. The videos were edited with title cards and full closed captions/subtitles. They are available on Youtube and as video files including the subtitles.

A carers' perspective



An NHS employee perspective

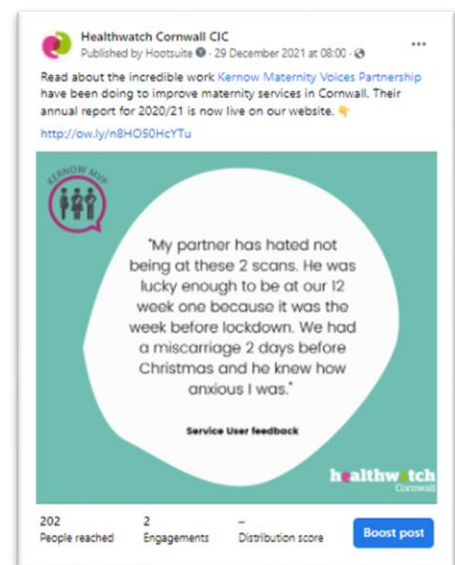


Carer and patient perspective



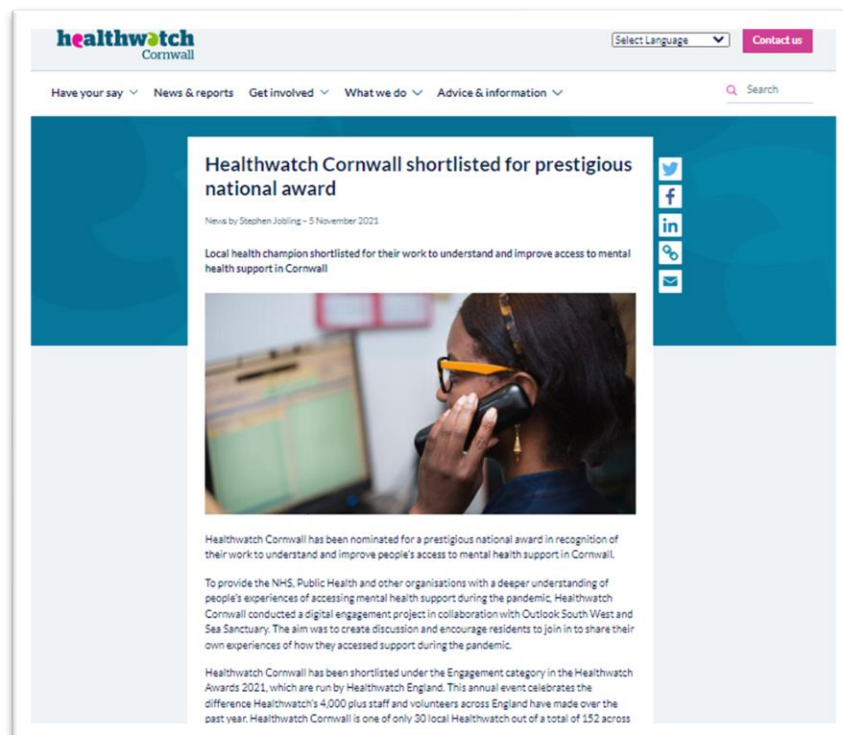
Kernow Maternity Voices Partnership - annual report

The KMVP team are in excellent shape currently with the addition of a new Vice-Chair and project team resource. Their annual report published at the end of 2021, with support from comms to publish and promote this. In line with new Healthwatch England accessibility guidelines for PDF reports, a longform [website article](#) was produced on Healthwatchcornwall.co.uk to articulate key content from the PDF report. This included supportive quotes secured from the Head of Midwifery (Jane Urben) and Associate Director of Commissioning (Liz Cahill) to support publication. Social media graphics were also designed to promote this using service user feedback, as well as inclusion in our Healthwatch newsletter.



Network Awards Engagement nomination - proactive comms

The accessing mental health support engagement activity was an excellent example of engagement during lockdown and the restrictions in early 2021, and we entered this engagement and research project for the annual network awards in the Engagement category. The entry was shortlisted and we appeared alongside two other Healthwatch. This was an excellent achievement for Healthwatch Cornwall and proactive comms went out to communicate this to our key contacts and stakeholders. We may not have won the award but achieved recognition from our peers and colleagues across the county for our diligent work on this subject and creative approach to engagement.



“Many congratulations to Healthwatch Cornwall. They are such important partners in our overall plans to engage our communities and work to transform and improve mental health services. I am delighted that they have received this national recognition.”

Dr Adrian Flynn, Joint Medical Director (Mental Health) Cornwall Partnership NHS Foundation Trust

“A very well deserved recognition of all the hard work and commitment which the team at Healthwatch Cornwall have put into the issue of mental health and wellbeing. The learning stemming from this recent work will be of huge benefit and value in helping improve local services and help us to design and deliver even better outcomes and experiences for the people of our communities who need care and support. Well done Healthwatch Cornwall!”

Tim Francis, Associate Director of Strategic Commissioning (Mental Health, Learning Disability and Autism) NHS Kernow Clinical Commissioning Group



Appendix 2 - Overview of Prioritisation & Planning activity

Prioritisation & Planning 2021/22 - overview for Board	A	At risk of going off track	G	On track	Complete	Completed		
	August	September	October	November	December	January	February	March
HC Workstreams								
Engagement	6 week digital campaign, engagement forward planning	Freshers Fayres	Focus on planning and where face to face engagement can start	Next steps potential diabetes work and HE social care interviews		Recruit new Engagement Officer Update to HC Board.	Induct new EO. Embed new engagement plan.	Embed new engagement plan.
Volunteer Development	6 week digital campaign, engagement forward planning	HCAF - face to face (meeting postponed to October)	Re-engagement of existing and recruiting new volunteers	Align with engagement and research opportunities both core and projects		Evaluate volunteer recruitment	Volunteer recruitment	Volunteer recruitment. HCAF
Partnership Boards	Start recruitment process for new PO, Carers Board meeting	Service Users meeting & LDPB meeting	Autism PB meeting. Start recruitment process for new PO	Carers PB, Service Users and LDPB meetings	Autism PB meeting. New PO induction	New PO induction	Carers Board Meeting	LD & Autism PB meetings
Research	GP Review assess work required	Establish contacts / pathway for GP feedback	Design and scope HE follow up to discharge and dementia carers	Design and scope Carers' Research	Conduct Carers' Research	Complete Carers' Interviews and plan focus Group, Dementia Carers, Diabetes project. Collate EOL stories to share with commissioner/EOL Strategic lead and feed into EOL Board.	Complete Carers' Interviews and plan focus Group, Dementia Carers, Diabetes project.	Carers' Focus Group
Ageing Well	Finalise delivery process & conduct training with front line staff in all delivery areas. Patient interviews, staff interviews, analysis	Patient interviews, staff interviews. Interim infographic feedback. Negotiation for project extension / long term research contract.	Patient interviews, staff interviews, analysis. Confirm future funding plans. Interviewee video case studies	Patient interviews, staff interviews, analysis. Confirm future funding plans. Interviewee video case studies. Analysis & reporting.	Analysis & reporting, final report completion. Prepare & submit budget for phase 2.	Comms to complete video editing. Report review and Phase 2 planning with commissioners (impacted by CPFT emergency status).	Report review and Phase 2 planning with commissioners.	Phase 2 planning & development.



	August	September	October	November	December	January	February	March
Kernow Maternity Voices Project	Following on from LMNS approval of additional funding, recruitment of Vice Chair and Project Officer.	Project Officer & Vice Chair induction. Delivery planning inc. re-starting engagement.	Volunteer planning & Recruitment, and volunteer promotional video (<i>video plan subsequently cancelled</i>) Engagement and representation.	Engagement and representation. Annual Report compilation.	Engagement and representation, inc meeting Ockenden response deadlines. Annual Report compilation & publication.	Engagement & representation.	Engagement & representation.	Re-start monthly F2F engagement.
Preparing for Pregnancy & Parenthood	Research existing provision & best practice nationally & locally. Establish links with key NHS boards.	Research existing provision & best practice. Plan engagement to identify needs.	Engagement to identify needs. Volunteer planning. Establish stakeholder meetings.	Service user engagement & survey to identify needs. Research analysis. Branding development.	Building multi-agency delivery group. Survey conducted. Research analysis. Branding development.	Engagement with service providers. Engagement analysis. Finalise logo.	Review best practice, plan universal offer.	Develop education programme.
Impact of Covid on Diverse Population Groups			Collaboration with Public Health on impact of Covid Impact research.	Collaboration with Public Health on impact of Covid Impact research.	Bid submitted/ contract awarded for Impact of Covid research project. Project Officer contracted, project planning started.	Project expansion negotiated. Collaboration with CHAOS on project plan and delivery tools. Networking to identify engagement opportunities.	Targeted population group engagement inc focus groups, interviews and surveys.	Complete engagement. Analysis of data.
Mental Health & Suicide Prevention				Collaboration with Public Health on engagement work to inform social prescribing and mental health programmes.	Bid submitted/ contract awarded for mental health research project. Project Officer recruited, transitioning from Engagement team.	Project Officers collaborating on project planning & development.	Networking, inc building on links with loC project.	Targeted engagement of service users and service providers, inc focus groups, interviews and surveys.
Business Support	Support to 6 week engagement plan	HCAF presentation of QF Action Plan (HCAF postponed)	ODAG and Board Meeting	Sensitive conversations training, Cloud access for MVP	File 2020/21 accounts at Companies House. Seek new finance support, recruit for Admin Apprentice	QF meeting with HE, Recruit Chair, Directors, Trustees. Board Meeting Prep for new finance support	Induct Apprentice, take finance in-house. Interviews for Chair, Director & Trustees	Year End, budget, business plan Assist with induction of new Chair, Directors, Trustees
Comms & Marketing	Generic feedback campaign	Ageing Well interim infographic, MVP maternity journey feedback report, HE NHS waiting times survey	Volunteer section website update - Healthwatch Cornwall & KMVP pages	Ageing Well case study/training videos	Ageing Well final report, MVP Annual Report, comms for Carers' Research	Annual report planning, website updates, new HWE brand guidelines rollout	Ageing Well phase two, Covid and MH content/deliverables	

