

CEO Board Report

29th April 2021

Introduction

This is my first report to the Board as CEO.

I attended my first cycle of meetings prior to this Board meeting. In the three months since my appointment, I have attended approximately 200 internal and external meetings - each one online although I was fortunate to visit the office once and meet the management team along with our Chair. The organisation has continued to operate in a lockdown situation and therefore sub-optimally, particularly in respect of our external outreach and volunteer recruitment and engagement programme along with our ability to generate feedback from the public. This is unavoidable and we will take swift action to remedy this once lockdown is fully over. Even so, some significant events have taken place during the past quarter.

COVID-19 Update

External

I have sent Directors the weekly situation report updates on the outbreak and vaccination programme. Cornwall and the Isles of Scilly now has one of the lowest rates of COVID-19 cases of all Upper Tier Councils in England. Unless Board members object, I will continue to send the weekly situation report as an update. On that basis I will not include those statistics in this report.

We continue to be represented on 5 separate working groups that deal wholly or partly with pandemic planning. These focus on mental health, suicide prevention, inequalities, communications, outbreak prevention and vaccination.

The vaccination programme has been largely successful so far with high percentages (up to 90%) of over 50s and clinically vulnerable receiving the first dose. The issue of vaccination of care home workers remains a concern and care homes are still susceptible to localised outbreaks although this should cease.

As a participant in the Vaccine inequalities steering group I have supported plans to identify the locations of seldom heard, isolated and under-represented groups in the county and strategies for the vaccine to be delivered to these groups.



Internal

Staff remain working from home and all meetings take place on Teams. There is now “light at the end of the tunnel” as we move ahead to June and the hopeful, end of all covid related restrictions. I intend to adopt what is now being called the “hybrid” system of working both from home and the office. Colleagues will be expected to return to the office but this will have to be on a rotation basis given the office is not able to take everyone at one time with social distancing. We are reviewing the current guidelines on office working and will inform staff of all developments and plans in place to ensure their safety well ahead of any changes. The current small weekly stipend given to staff for working from home will cease in June.

It is my belief that spending at least part of the week interacting directly with colleagues will be beneficial to all.

HWC Core Contracts

I have held two meetings with our contract manager. It would be accurate to hitherto describe the oversight of our contracts by the council as cursory. However, at our recent meeting the contract manager stated that she wished to have a full review of our activity to gain a better understanding of the impact of our work. This would involve bringing in Council management team colleagues to participate in a discussion about our activity. Separately I will provide top line presentation of our approved business plan to a weekly council management team meeting.

Our contract manager is particularly keen to ensure our Partnership Boards are fully engaged with relevant commissioners so that service needs assessments and service delivery can be planned more effectively. I made the point that our PB team has always been keen for that to happen and that the fall down, where it occurs, is with the commissioners themselves who either do not attend meetings or change responsibilities regularly.

Carers Partnership Board

The CPB has developed into a much more functional body over the past 15 months. Discussions are focused and positive. Ania Nicholls as our lead Commissioner has regularly attended meetings. We are well placed to be able to form a solid and fit for purpose membership once the PBs restructure is agreed.

Learning Disability and Autism Partnership Boards

Much work was undertaken from March 2020 to assist partner agencies and to ensure that self-advocates and service users were trained and supported in online meetings. Through the pandemic the themes affecting the two Boards merged and, having gauged the opinions of Board members, we decided to temporarily amalgamate the two. The recent meeting was attended by 38 people.



Additional meetings providing a safe space for self-advocates and carers to express their views continue. These have proven both popular and effective in ensuring that the Boards, and the statutory authorities, hear the voices of our local population with lived experience of learning disability (LD) and/or Autism. They have helped members to both expand their knowledge and grow in confidence. The Boards will return to individual bodies for the next round of meetings unless members express a preference for them to remain joined for now. Regardless, we will continue with the service users and carers group for at least the remainder of 2021.

Older Persons' Partnership Board

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.

New projects - Ageing Well and Planned Parenthood

Colleagues have met to discuss the projects and next steps are to contact relevant stakeholders and discuss plans, timelines etc. It has been established that there have been changes within stakeholder organisations for Ageing Well, so our priority is to identify and connect with current contacts. The Board will receive ongoing updates on these.

Maternity Voices

Since the departure of the previous Chair /MVP Project Manager last summer, the new Chair has increased her input to keep the project running with some support from colleagues. Quarterly Committee meetings are to be reinstated imminently. The new Project Manager is now working with the Chair to restructure resourcing for the project, clearly defining roles and agreeing Terms of Reference to deliver to the SLA. MVP is currently operating on budget underspend carried forward, with priority to meet with NHSE regarding extension of SLA and decision on funding for 2021-22.

Ask Cornwall

Following the decision of the board to terminate the Ask Cornwall platform I informed the platform supplier - Made Open of the decision. MO have transferred the names of the current subscribers (approx. 230) to us and we have sent them a message explaining the decision to close the platform. Other interested stakeholders have been informed. The Ask Cornwall platform has now closed although HWC retains the url.



Healthwatch England

We continue to participate in HWE and HWSW activities. HWE is closely engaged with Ministers and other decision makers regarding the progress of the recently published Health White Paper and I attended a seminar to discuss this. The principal area of interest being the creation of the Integrated Care System (ICS) which is subject to a separate board paper this month. SJ attended the HWE website user group discussion to participate in feedback on the current HWE platform. This session in an open forum with HWE comms team on updates and plans for the platform provider that will be rolled out to our website, and provides an opportunity to feedback and request changes to be made in the future to benefit our own website

AO attended webinars on governance, recent sessions include Code of Conduct and Healthwatch England Quality Framework. These provide opportunities to network with other local Healthwatch and share experiences and best practice.

Appointment of CCG CEO/Accounting Officer

I chaired the Patient and Public Involvement stakeholder panel for the interviews for the position of CEO/Accounting officer for Cornwall CCG. This is an extremely important position that will drive the creation of the Integrated Care System. We interviewed four good candidates and all of them were committed to including a strong public voice in the commissioning and delivery of health and social care services. We were not asked to recommend a candidate, rather reflect our views on the principal merits of each one - and I fed these back to the main appointments panel.

Once an appointment is confirmed I will update the Board.

Dentistry

A Healthwatch England update in December 2020 showed a significant increase in feedback across the network on dentistry, and this has been picked up by national media who ran stories on dentistry in December, with a further update from HWE in February. As a consequence of this we initiated local press activity where I conducted some press interviews, the press release was shared across social media, and a Cornwall Live article online received 250 comments from people agreeing with the issues that were highlighted.

JW continues to attend the South West Local Dentistry Network meeting (LDN) which includes NHSE representatives, local dentistry committee Chairs and various other people who lead on dentistry specialisms, together with other representatives from all local Healthwatch across the SW. The findings from the HWE report, backed up by SW specific feedback, was presented at the last meeting and commitments made to include local Healthwatch in ongoing discussions regarding the recently released Oral Health Needs Assessment and pending implementation plan. We have committed to maintain our profile at the LDN and to establish a relationship with the Local Dentistry Committee Chair. In addition, NHSE are running a series of 'Sprint' workshops which Healthwatch have been invited to participate in.

Dentistry is also a key focus area in our Business Plan and whilst the profile of NHS dentistry has been increased hugely, the solution will not be a short term one.



Citizen's Advisory Panel (CAP)

The Citizen Advisory Panel (CAP) is a sub-group of NHS Kernow's People and Organisational Governance (POG) committee. CAP provides an independent view and critical friendship on matters relating to health and care in Cornwall and Isles of Scilly. In particular, the CAP is intended to help advocate that the voice of the local population is heard and influences health and care developments. The CAP supports the health and care system to ensure opportunity is created for meaningful, targeted and proportionate public engagement, across all local communities and this is given equal importance to the work that is done with professional health and care partners.

The CAP has had a somewhat halting existence so far. I have attended three meetings which have been dominated about discussions relating to its terms of reference, remit, membership etc. Participation is sporadic and the group requires a new chair and an injection of fresh (preferably younger) voices. The role and input of the CAP into the putative ICS is a matter for ongoing discussion. I believe we should continue to support the work of the CAP but this is kept under review pending the impact of the election of a new chair and a membership recruitment drive. I am involved directly in the latter.

Marketing, Communications and public feedback

Appendix One to this paper sets out details in respect of public participation and feedback to HWC and includes details of the issues raised and time involved in managing queries. While overall numbers of participants are quite low, the time involved in dealing with them is lengthy. We are developing more detailed data management techniques in order to better understand how queries are processed and the impact of our involvement in them. To this end, plans are in place to conduct a review of existing systems and processes for managing enquiries, including a review of the CRM database. This will be carried out in view of developing more regular reporting of feedback across a wider scope of internal and external reports. We are developing a plan for more regular training and development of staff in respect of handling enquiries.

Appendix Two to this paper is a quarterly record of website hits and other communications activity. This will be aggregated to evidence the impact of our work.

Mental Health issues

Following a digital Facebook live discussion on 'Accessing mental health support in Cornwall' in February, 397 people have shared their experiences of using mental health services and accessing different kinds of mental health support. The engagement team and volunteers have also spoken to 18 people via video and telephone calls to hear about their stories in depth. Analysis and writing up are underway and results will initially be shared at the Multi-agency Suicide Prevention Group and Community and Wellbeing Recovery Groups. Initial results indicate that support available online has met many people's needs, but that mental health services are not meeting the needs of those with more severe mental health conditions due to inflexible criteria for support and a lack of specialist support, such as trauma



services. We hope to share the results more widely in early May and are considering holding focus groups for service leads to discuss and take forward agreed actions.

Discharge/Discharge 2 Assess

Commissioned work for Healthwatch England was completed last summer. The impact so far has been that RCHT and CPFT (including mental health) will implement new discharge processes to improve care, safety and patient experience to be monitored via respective patient experience fora. Patient Experience at UPHT agree this report should be a catalyst for a wider ambition/project to change discharge at the hospital. A proposal to present at the Urgent Care Board is agreed in principle, in order to monitor actions and outcomes through this meeting re the wider implications for health and social care. A further aim is to ensure transparency of data at PCN level in respect of people leaving hospital into a temporary care home, for example.

Quick updates on other issues and projects

Safeguarding Adults Board

The report 'People's experiences of Adult Safeguarding services: A review of services in Cornwall and the UK' is now complete and Becky is in the process of presenting to key stakeholders. The report will be formally submitted to the SAB Exec Board 25th May and we will publish and PR the report after this date. This concludes the activity relating to this specific commissioned piece of work but we will ensure plans are in place to monitor the development of the recommendations, and also explore further opportunities to build upon this project with the potential for further related commissioned work.

Rheumatology services improvement

We are returning to work on Rheumatology services improvement post covid (external pause), following the move of rheumatology services to Truro Health Park in 2019. Following our research into patient experience, we have agreed with RCHT to review progress against service improvement areas previously identified and to jointly report on the impact.

Review of GP surgery websites

Following concerns raised about public communication in our Covid-19 Survey, Rhiannon led volunteers through an evaluation of GP websites. They reviewed how easy it is to find key information that is accessible, up to date and easy to understand. A report is being drafted to highlight to commissioners and services what is working well and could be improved, with the aim of encouraging surgeries to provide the best information and support possible.



Health of frontline NHS staff

We raised concerns about the health of frontline staff at the Quality Surveillance Group in February, and anticipate a response at the QSG in April. The agreed action was for the QSG to ask the Workforce Delivery Board about how it plans to address workforce health in light of the pandemic.

Isle of Scilly Healthwatch

I have met twice with the IoSHW team and have a call scheduled with their Chair, Paul Charnock. I have offered our ongoing support particularly where there are issues of congruence.

Care home sector

We are building relationships in the care and care home sector and through our attendance at the Care Home Partnership Board, with aim of increasing feedback from patients, residents and families.

Internal and staffing issues

The landlord responded to our request for a reconsideration of our ability to enforce our break clause with conditions that were too onerous for us to consider. Consequently we will be unable to move from the Walsingham Place premises for the duration of our current lease which expires in July next year.

There have been a number of staffing changes since the last board meeting. I will update Directors on this verbally in part two of the meeting.

Roger and Anne will update the Board and the positive developments being achieved by ODAG.

HWC CRM review

As outlined above, reviewing systems and processes to manage data will include a review of HE's CRM database to ensure efficiencies in data management. The impact of imminent changes to the taxonomy needs to be understood in the context of reporting, and in view of an alternative HE CRM system proposed for 2022.



Volunteer development plan

The Volunteer Development Plan sets out how the organisation will recruit and support volunteers in their roles at Healthwatch Cornwall. Volunteers will continue to play a vital role in developing and adding value, and ensuring its continued success through representation of the organisation. Clearly the role of our existing and new volunteers has adapted over the last year so the current plan is undergoing a refresh to reflect the current options available, looking at potential new roles, and looking ahead to a blended approach as and when Covid-19 restrictions allow. All volunteers have been sent a survey asking for their ideas and comments relating to the last year and looking forward to the next, and their responses are being incorporated into the refreshed plan. Key to this will be to ensure that all staff are encouraged to always consider the potential opportunities for the involvement of volunteers in any ongoing work.

Priorities May - July 2021

In addition to on-going activity a number of priorities for our attention over Q1 include:

- Project Manager to launch Ageing Well and Planned Parenthood projects, extend MVP and restructure resourcing
- Progress discussions with CCG regarding structure of public participation in ICS
- Ensure safe return of staff to hybrid working
- Appoint Engagement and Organisational Support Officer (job title tbc)
- Appoint Project and Organisational Support Officer
- Production of research reports: Mental Health Survey and GP Website Review
- Monitoring of discharge process changes and further engagement around work to improve discharge experiences
- Re-evaluation of CloS EOL Strategy Board subgroups and projects
- Ongoing review of data management processes, CRM and staff development to support handling enquiries
- Follow up recommendations from Covid Survey report.
- Conducting staff appraisals/objective setting
- Action Plan to align with HE Quality Framework

MARIO DUNN

CHIEF EXECUTIVE

HEALTHWATCH CORNWALL



APRIL 2021



Public Participation & Feedback

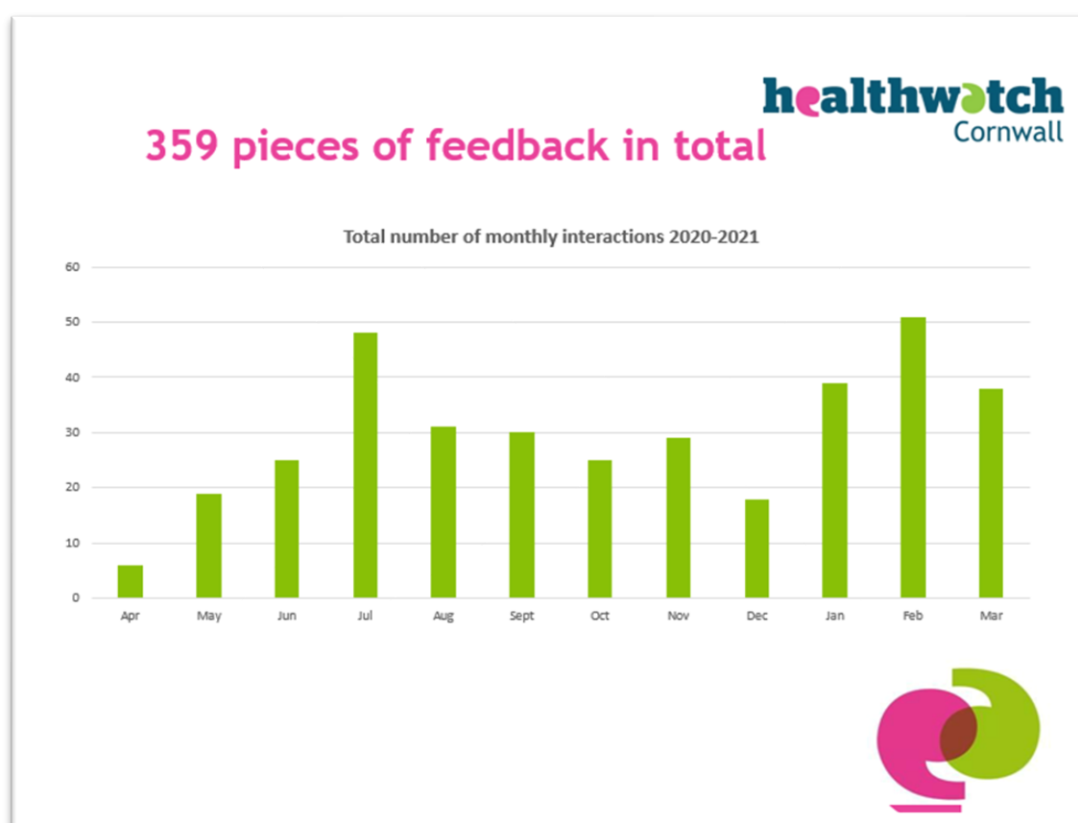
29th April 2021

As face to face engagement ceased mid March 2020, all contact has been through our information freephone number, by e-mail or by our website. The bulk of this is handled by Business Support although the Engagement Officers can get involved in longer Have your Says.

The contacts are reviewed monthly at our Prioritisation & Planning meetings and if risk rated appropriately are taken forward as “bubbling issues”.

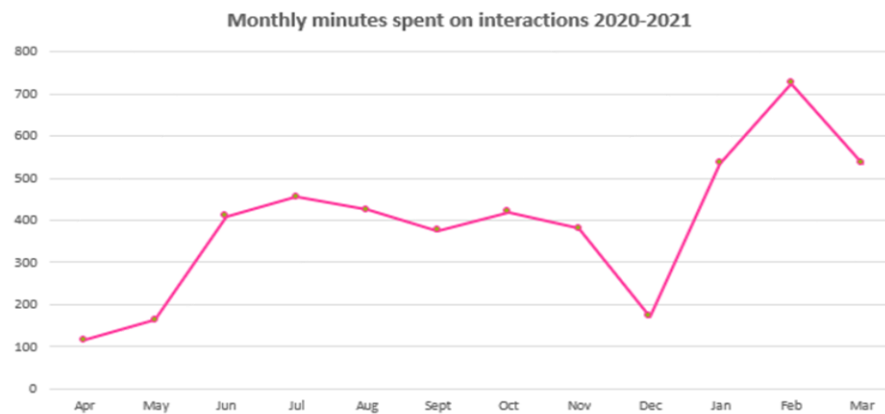
The graphs below give a snapshot of the feedback received.

Total feedback communicated to the organisation



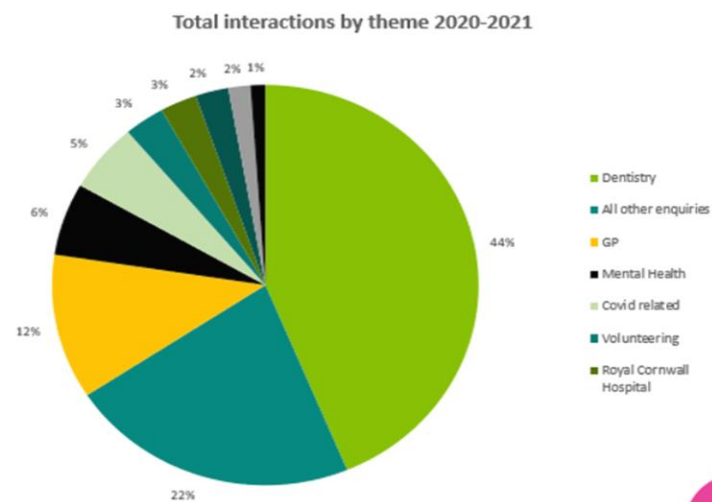
Time spent by the team processing feedback

Time spent - just under 80 hours



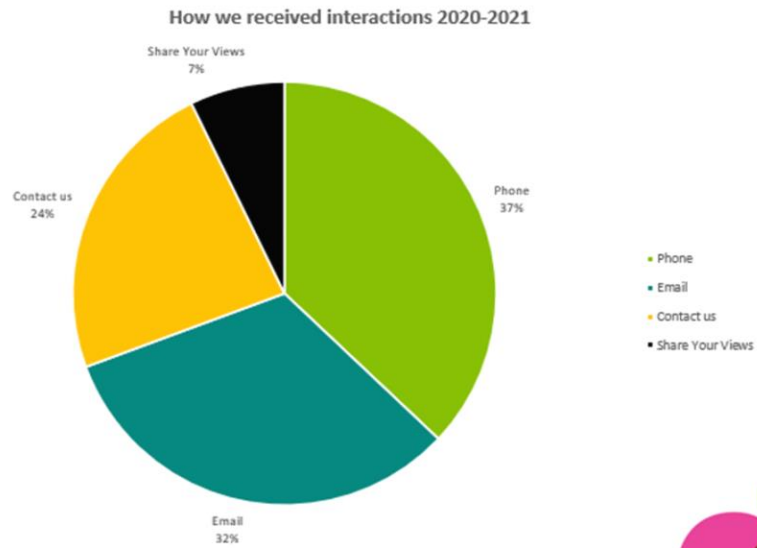
What we were contacted about

What we were contacted about



Contact mix

How they came in



Website and other communications

29th April 2021

Website performance

Website traffic has more than doubled year on year to 4.3k unique users for the period Jan-Mar 2021 v 1,924 unique users for the same period in 2020.

Site stats for the period 1st Jan - 31st March 2021 are:

- 4,349 unique users
- 10,172 page views
- 1 min 27 secs average dwell time
- 89% of this traffic were new users to our website, 4,000
- 10% were returning visitors
- 50% mobile / 47% desktop / 4% tablet

Website content

Healthwatchcornwall.co.uk has been kept updated with a broad mix of content so far this year with nine news/advice articles and multiple reports. The choice of content for the site reflects our diverse remit, with content on our core contract responsibilities as well as ensuring that we perform our role of signposting and supporting local relevant organisations/information.

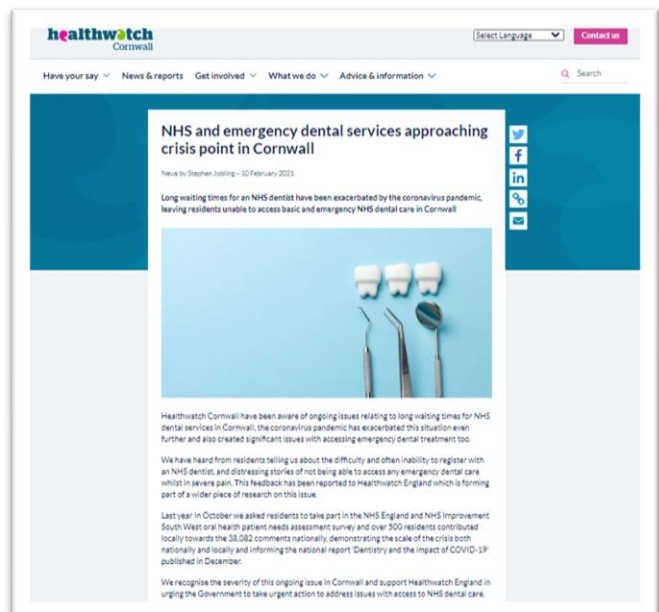
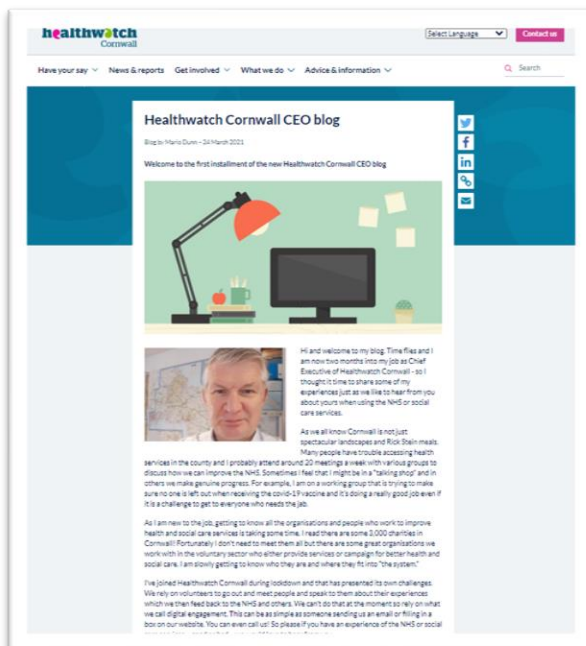
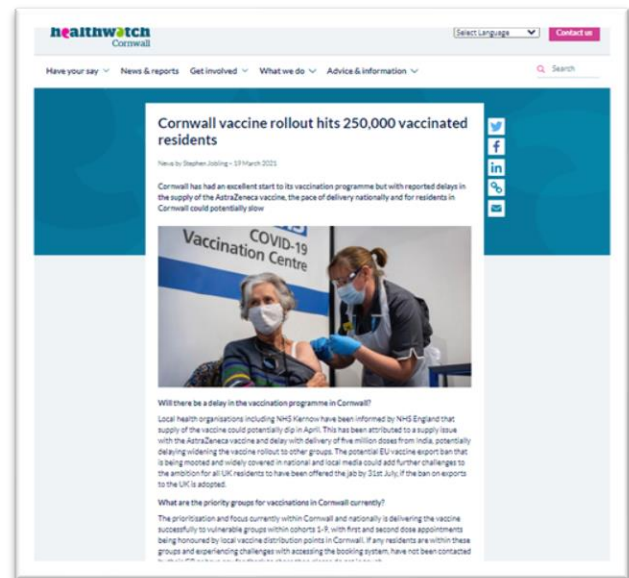
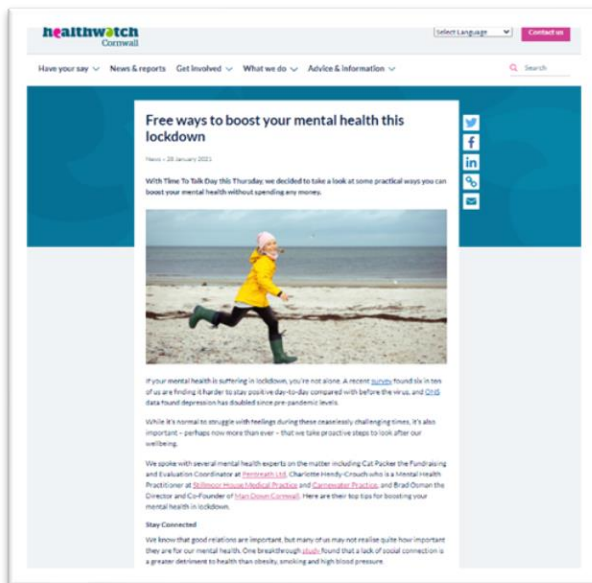
Content is used to support announcements, highlight surveys, reports, communicate relevant updates and also call out poor performance where appropriate. An addition to the content mix this year has been the commissioning of 'lifestyle content' to broaden the tone of the website, this was used for the mental health campaign.

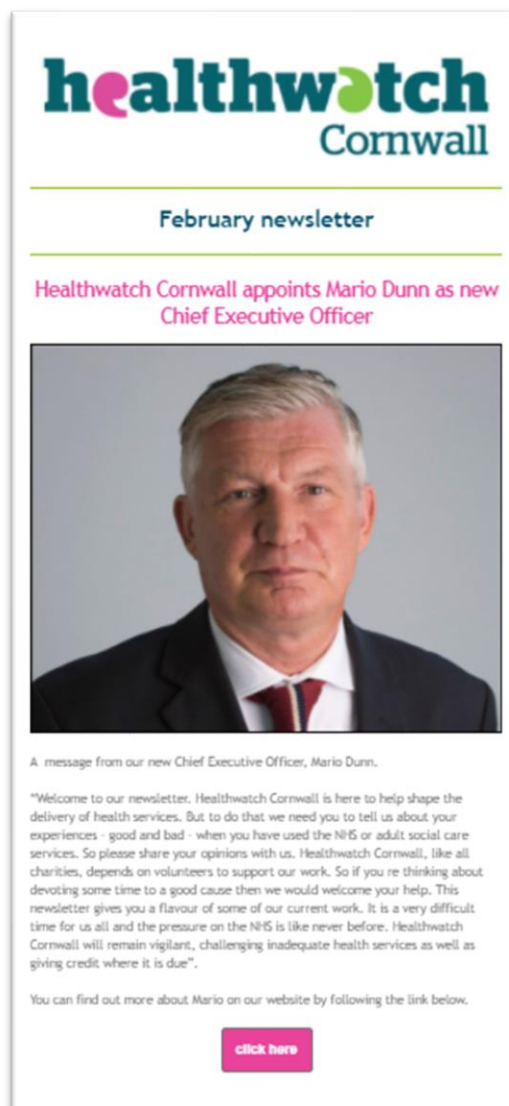
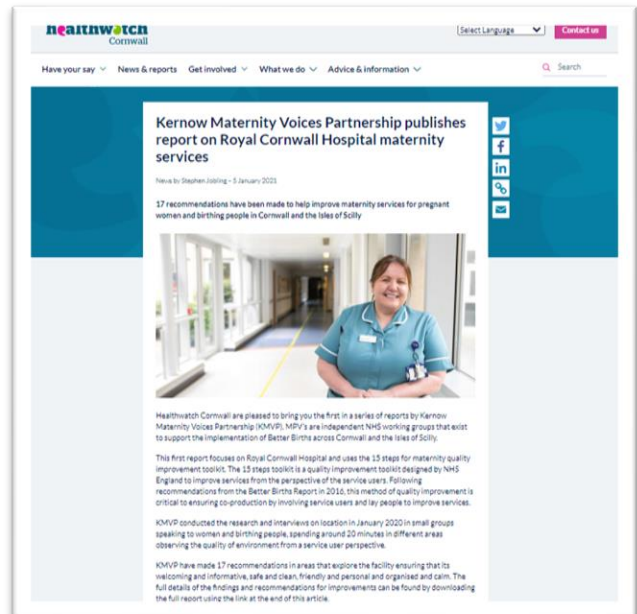
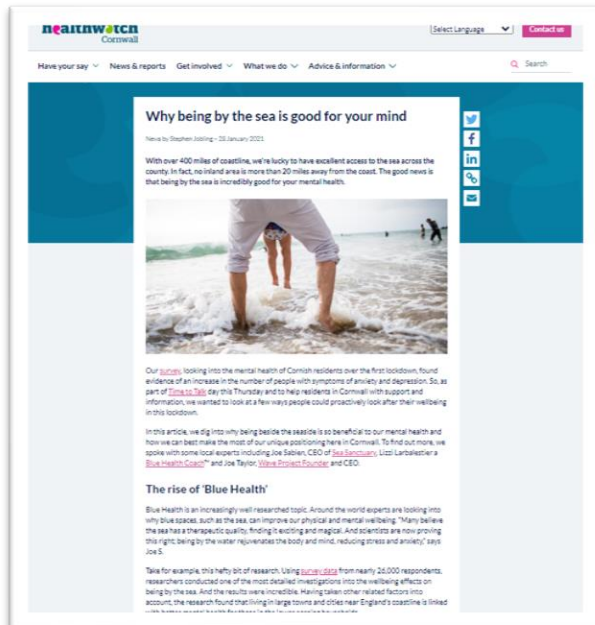
The decision-making and editing process for website content is challenging with such a rapidly unfolding COVID related news agenda, social media is the preferred space for sharing latest developments as well as updating our latest advice articles.

The main content/news articles we have published this year are:

- Why being by the sea is good for your mental health
- Free ways to boost your mental health this lockdown
- Cornwall vaccine rollout hits 250k vaccinations
- NHS and emergency dental services approaching crisis point in Cornwall
- Kernow Maternity Voices Partnership - 15 Steps Report
- New CEO Appointment
- CEO Blog
- Latest advice and information on coronavirus
- Covid vaccine easy read







Social Media - Organic

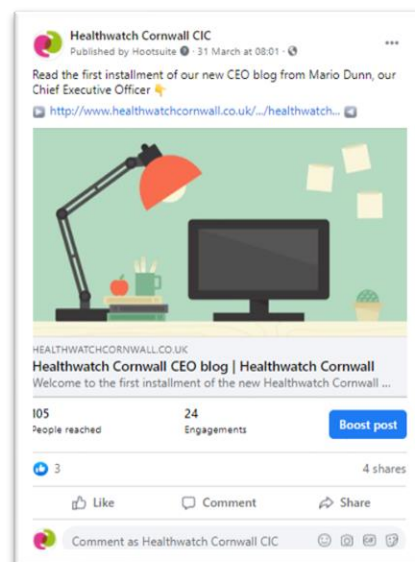
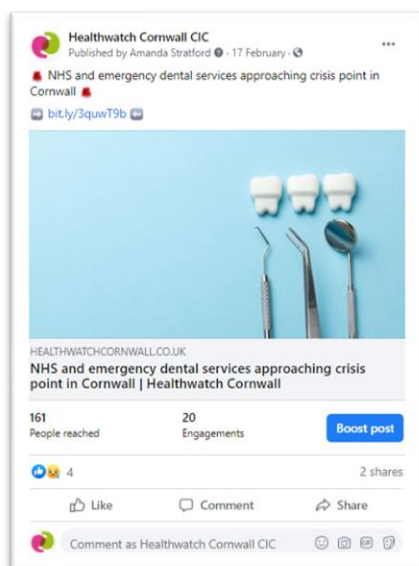
Our social media channels are excellent platforms to share information and engage with other organisations in Cornwall. As well as sharing and signposting extensive coronavirus information and linking to content published on the website, they are also used to highlight relevant health and social care subjects/national days and support local voluntary organisations.

Some of the organisations, events and surveys we have supported on our social channels are:

- Ovarian Cancer Month
- Student Volunteer Week
- Gender Identity Services questionnaire
- NHS Long Terms Plan questionnaire
- Social Prescribing Webinar
- NHS 24/7 mental health support line
- Cornwall Council Covid Q&A

Some highlights from our social channels are:

- We have 5,714 followers across our social media accounts
- Twitter achieved 22k impressions from 47 Tweets.
- We have 3,536 followers on Twitter
- Mental health, Ovarian Cancer and vaccine information
- 1,394 people follow/like us on Facebook
- 35 posts to Facebook
- Instagram has 784 followers

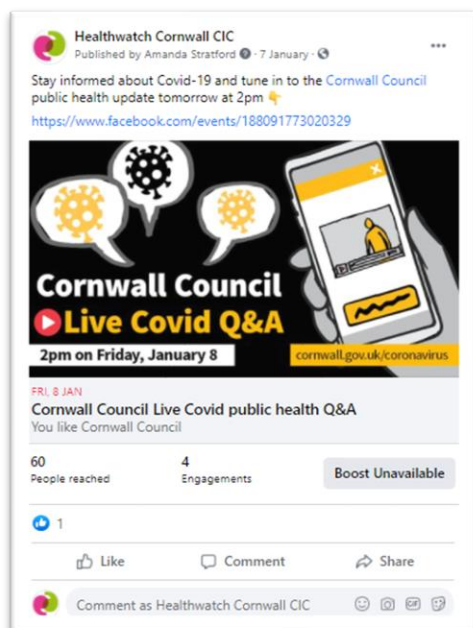


Social Media - Paid

Targeted paid social media has driven excellent results for our campaign work with marketing budget invested in several audience targeted paid campaigns on Facebook and Instagram. Paid social has also been used for recruitment, using both location-based targeting such as 'Plymouth' and 'Bristol' outside Cornwall for the Project Manager role.

Three posts that delivered good results in terms of generating leads for the role and awareness/sign ups for the mental health campaign were:

- Project Manager vacancy - 4,835 post reach
- Facebook live event promotion - 4,061 post reach
- Join our mental health discussion promotion - 7,004 post reach



Bespoke Campaign #1 - Accessing mental health support in Cornwall

This digital campaign was developed and executed to further our understanding of people's experience with mental health support services in Cornwall during the pandemic.

It was also designed to create digital engagement opportunities for the Outreach Team in a climate where physical outreach was not possible.

Broadly the campaign set out to ask residents in Cornwall 'if they were ok' and to pose the broad and open question around 'accessing mental health support in Cornwall' to allow us to get as much engagement with the topic as possible.

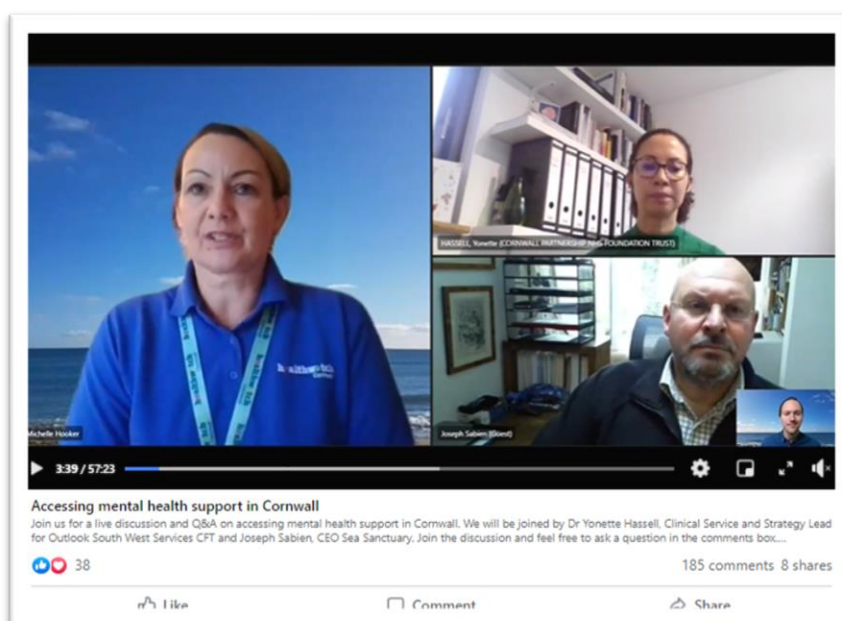
The campaign consisted of the following deliverables:

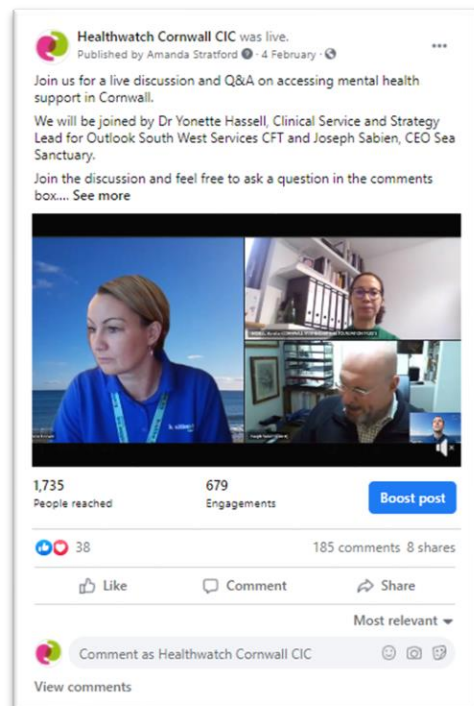
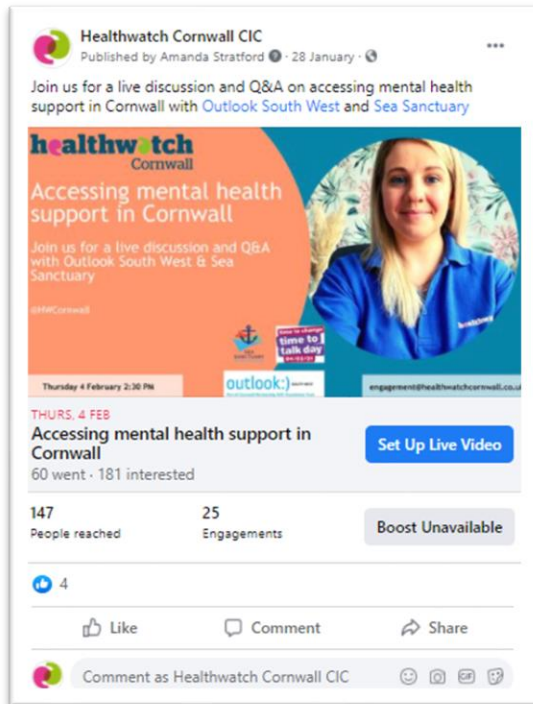
- Facebook Live panel discussion with Outlook Southwest & Sea Sanctuary
- Survey Monkey survey
- Social assets designs created and distributed to contacts/organizations support
- Press release sent out to key contacts
- Newsletter inclusion
- Social video promotion
- Website content x2 articles
- Paid and Organic social

Ballpark targets of 100 survey completions and 10 follow up interviews were set as a guide target of success and we were pleased to excel and overdeliver in both these areas. The campaign delivered above expectations and achieved 400 survey completions and 30 follow up opportunities for the OR team to conduct 121 Zoom/Teams digital engagement.

The Facebook Live achieved 1.4k views and 185 comments and created lively debate around the topic that led to some excellent engagement and brand awareness for us, with both the public and system here in Cornwall.

The research team are currently finalizing the report which will be published and externally communicated soon.





Bespoke Campaign #2 - Dentistry crisis in Cornwall

Healthwatch Cornwall have been closely involved in issues surrounding dentistry for several years now, the pandemic has exacerbated these issues which we took the decision to use as an opportunity for some tactical PR around the issue.

Its often difficult to land a message loudly in public in Cornwall but the dentistry crisis PR piece was a good example of using our resident feedback to really land an issue by highlighting a real world insight that highlights the problem.

One resident informed us they had been told to buy a tooth replacement kit from Amazon and it was felt this would be a good angle to approach mainstream media outlets to highlight the severity of the issue here.



We achieved:

- BBC Spotlight - CEO voice headline news, video
- BBC Radio Cornwall - CEO voice, headline news audio
- Cornwall Live - online [article](#) and social post
- Falmouth Packet - online [article](#) and social post



Newsletter

Sticking with the bi-monthly frequency one newsletter has been sent out this year to our 858 contacts. This included content on the new CEO appointment, MVP 15 Steps report, dentistry crisis and accessing mental health campaign mention.

Newsletter structure is generally kept to three or four key topics and highlights around the work we have been doing and links back to the website. This content could expand in the future to include more thought leadership style subject matter around a specific issues or topic each month.

A one-shot email was also sent to our 'survey follow up list' promoting the 'accessing mental health survey' asking them if they would be interested in completing this.

- New CEO - announcement
- Accessing mental health support in Cornwall - survey highlight
- KMVP new report - linking to our website report
- NHS dentistry services approaching crisis in Cornwall - PR news piece link

