

Contract Monitoring Projects & Activity Qtr 2 (July – September 2024)

1. Website & Social media (data broken down by media type/nr over the quarter)	
a. Number of web visits	6,629
b. Facebook reach	502
c. 'X' (formerly Twitter) followers	2,457

2. Number of groups HwH is represented on	
a. Total number:	54
Staff	34
Board	17
Representative volunteers	3

3. Projects (Objectives/aims, Who benefits from the project (e.g. HwH, External organisations, a particular sector of the population), outcomes/potential impact) including groups where we have an ongoing leadership role

Hertfordshire and West Essex Integrated Care System (ICS) Research Network Development Programme (REN)

Objective and Project Aims

- To increase participation and diversity in research, with a particular focus on reaching seldom heard communities.

Target Population

- General population
- Seldom heard groups

Activity

- Supported bid application writing (August – September)
- Organised and facilitated meetings with external partners to discuss bid (August – September)
- Meetings with partners to discuss taking forward deliverables (September)

Public Health: Drug and Alcohol Services – Children and Young People Workstream

Objective

- To support Public Health in engaging with children and young people using drug and alcohol services as part of its goal in implementing the National Drug Strategy.

Project Aims

- To understand from children and young people how easy it is to access drug and alcohol services
- To explore the barriers to accessing support from drug and alcohol services
- To identify what could help children and young people in their recovery

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Target Population

- Children and young people (aged 14-24) accessing drug and alcohol services

Activity

- Closed surveys (July)
- Analysed data (July – August)
- Created report (August)
- Shared report with Public Health for feedback (August)
- Shared report with HwH Board for formal sign-off (September)
- Created executive summary (September)

Public Health : Drug and Alcohol Services – Prison Leavers Workstream

Objective

- To support Public Health in engaging with Prison Leavers as part of its goal in implementing the National Drug Strategy.

Project Aims

- To understand from prison leavers what encouraged them to access drug and alcohol services
- To explore the barriers prison leavers face in accessing support from drug and alcohol services
- To make recommendations to Public Health

Target Population

- Prison leavers

Activity

- Transcribed focus groups (August – September)
- Analysed data (August – September)
- Draft report writing (September)
- Created final report (September)
- Shared report with HwH CEO for feedback (September)
- Shared report with Public Health for feedback (September)

Public Health Drug and Alcohol Services – Service Review Workstream

Objective and Project Aims

- To support Public Health in engaging with people with a lived experience of using drugs and alcohol, carers and staff, with a specific focus on reviewing and improving service provision.

Target Population

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- People with a lived experience of using drugs and alcohol
- Carers/loved ones
- Staff within CGL (Change, Grow, Live) and The Living Room

Activity

- Meetings with Public Health to discuss topic and methodologies (July)
- Created draft survey questions (August)
- Shared survey questions with Public Health (August)
- Created draft topic guide questions (August)
- Meetings with Public Health to finalise survey questions and topic guides (August – September)
- Uploaded survey to SurveyMonkey (September)
- Created draft communications (September)
- Launched survey (September)
- Provided weekly updates to Public Health on survey progress (September)

Public Health Drugs and Alcohol Service – Stigma Campaign

Objective and Project Aims

- To support Public Health by launching a survey to gather public feedback on a proposed new website to reduce stigma and encourage access to drug and alcohol support

Target Population

- General population

Activity

- Meeting with Public Health to discuss project and timescales (September)
- Created draft survey questions (September)
- Meeting with Public Health to finalise survey questions (September)

Integrated Care Board International Recruits Review

Objective

- To support the Integrated Care Board by completing an independent evaluation exploring the experiences of internationally recruited staff across the three acute Trusts.

Aims

- To engage with internationally recruited staff across the three acute Trusts to understand their experiences of living in the UK and working for the NHS
- To complete an independent review for the Integrated Care Board

Target Population

- Internationally recruited staff

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Activity

- Transcribed remaining interviews and focus groups (July)
- Attended 90 Day Challenge Steering Group (July – September)
- Created presentation on key findings (July)
- Presented key findings to Integrated Care Board Equality, Diversity & Inclusion Committee (July)
- Created final report (July)
- Shared final report with Integrated Care Board for feedback (July)
- Presented key findings at Integrated Care Board Pastoral Care Workshop (July)
- Shared final report with HWH CEO and HWH Board for feedback and sign-off (July)
- Updated report (August)
- Created an Executive Summary (August)
- Meeting with Integrated Care Board to discuss implementation of recommendations and presentation to Integrated Care Board People Committee (August)
- Presented report to the People Committee (September)

Public Health Gambling Harms Strategy

Objective

- To support Public Health in gathering feedback by people with a lived experience of gambling addiction to inform the Gambling Harms Strategy

Project Aims

- To support Public Health in gathering feedback through transcribing and analysing focus groups
- To make recommendations to help inform the Gambling Harms Strategy

Target Population

- Adults with a lived experience of gambling addiction

Activity

- Created final report (July)
- Shared final report with Public Health (July)
- Shared final report with HWH CEO and HWH Board for sign-off (July)
- Finalised report with feedback (July)
- Presented report to the Gambling Harms Alliance (July)
- Published report (July)
- Meeting with Head of Scrutiny to discuss report and findings (July)
- Shared report with partners and stakeholders (August)
- Presented findings to East and North Hertfordshire Health and Care Partnership Community Assembly (August)
- Presented findings to Health Scrutiny Committee (September)

Contract Monitoring Projects & Activity Qtr 2 (July – September 2024)**Phase Two: Primary Care Board Workstream – Orthodontic Care**Objective

- To gather lived experience to feed directly into the Integrated Care Board (ICB) Primary Care Workstream.

Project Aims

- To hear from parents/carers about their experiences of their child receiving NHS orthodontic treatment
- To engage with children and young people who have received or are currently receiving NHS orthodontic treatment

Target Population

- Parents and Carers
- Children and young people

Activity

- Finalised report (July)
- Shared report with Integrated Care Board for feedback (July)
- Shared report with HWH CEO and HWH Board for sign-off (July)
- Updated report in response to internal and Integrated Care Board feedback (July – September)

Phase Two: Primary Care Workstream – Online GP ServicesObjective

- To explore public views and experiences of using online GP services to feed into the Integrated Care Board (ICB) Primary Care Workstream.

Project Aims

- To understand patient experiences of using online GP services
- To explore what people tend to use online GP services for
- To understand whether people use online GP services to book appointments and order repeat prescriptions
- To identify how online GP services could be improved and made easier to use

Target Population

- General population

Activity

- Finalised survey questions (July)
- Uploaded survey questions onto SurveyMonkey (July)
- Launched engagement (August)

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- Shared survey with partners and stakeholders (August)
- Re-promoted engagement (September)
- Writing of literature review, aims and background (September)

Integrated Care Partnership Monitoring Framework

Objective

- To support the Integrated Care Partnership (ICP) in gathering lived experience and patient evidence to inform their Monitoring Framework

Project Aims

- To gather qualitative data and lived experience to inform the Integrated Care Partnership Monitoring Framework

Target Population

- Hertfordshire residents

Activity

- Updated "I" statements and shared with the Partnership (July)
- Created draft survey questions and shared with the Partnership (August)
- Updated survey questions in response to feedback from partners (September)
- Meetings with lead partner to discuss survey questions and launching engagement (September)
- Uploaded questions onto SurveyMonkey (September)
- Launched engagement (September)

Watford Home Care Inclusivity Pilot

Objective

- To support Hertfordshire County Council in hearing from Watford residents about their experiences of using home care, and barriers to using home care

Project Aims

- To engage with Watford residents (particularly ethnically diverse populations) about their experiences of using home care
- To understand barriers to accessing home care
- To explore how cultural competency in home care services could be improved

Target Population

- Watford residents (particularly from ethnically diverse populations)

Activity

- Uploaded translated surveys (July)

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- Launched engagement (July)
- Shared survey and engagement with stakeholders and partners (July)
- Re-promotions of engagement (July – September)
- Meetings with stakeholders to discuss supporting engagement (July – September)
- Attended Watford Faith and Health Networking Conference (September)

Integrated Care Board Pilot Checking Blood Pressures in Dental Practices and Opticians

Objective

- To engage with Hertfordshire residents about their views on checking blood pressure within dental practices and opticians

Project aims

- To explore public understanding of hypertension and its associated risks
- To identify barriers to checking blood pressure
- To understand how confident patients would feel about having their blood pressure checked within these settings

Target population

- Hertfordshire residents aged over 40 without a diagnosis of hypertension

Activity

- Meeting with Integrated Care Board to discuss engagement activity (July)
- Created project proposal and shared with the Integrated Care Board (July)
- Created topic guide questions and shared with Integrated Care Board (July)
- Set dates for online focus groups (July)
- Created consent form and participation information sheet (July)
- Recruited participants for focus groups (July – August)
- Finalised topic guide questions (August)
- Ran focus groups (August)
- Transcribed focus groups (August)
- Analysed and identified key themes (August)
- Created report (August)
- Shared report with Integrated Care Board (August)

Health Innovation East – Engagement on the Secure Data Environment

Objective

- To support Health Innovation East by engaging with people with learning disabilities about the East of England Secure Data Environment

Project Aims

- To engage with people with learning disabilities about the use of their health information

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- To explore with people with learning disabilities their thoughts on NHS research
- To explore with people with learning disabilities their views on their information being stored in the Secure Data Environment

Target Population

- Adults with learning disabilities

Activity

- Meetings with Health Innovation East to discuss engagement (July)
- Facilitated interviews and focus groups (August)
- Transcribed interviews and focus groups (August)
- Analysed data (August)
- Created report (August – September)
- Shared report with Health Innovation East for feedback (September)

Refugees and Asylum Seekers: Supporting the development of the Hertfordshire County Council Partnership Strategy (Scoping)

Objective

- To explore the key health and social care issues faced by refugees and asylum seekers in Hertfordshire (Scoping)

Project Aims

- Scoping stages

Target Population

- Scoping stages - Refugees and Asylum Seekers based in Hertfordshire

Activity

- Meeting with Hertfordshire County Council to discuss next steps (July)
- Created project plan and shared with Hertfordshire County Council (August)
- Arranged and met with key partners and stakeholders to discuss engagement (July – September)

Child to Adult Hospice Transition (Scoping)

Objective

- In scoping stages

Project Aims

- To understand the process of transitioning from children hospices to adult hospices.
- To explore the lived experience of children and their families.
- To identify key learnings for improvement.

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Target Population

- Children with life-limiting illness and their families.

Activity

- Meeting with partners to discuss project and next steps (July)

Support for Autistic Adults (Scoping)

Objective

- To work with Hertfordshire County Council to explore what post-diagnostic support autistic adults need, with a particular focus on lower-level mental health.

Project Aims

- In scoping stages

Target Population

- Adults waiting for an autism diagnosis and those who have a diagnosis

Activity

- Shared updated Project Initiation Document (PID) with Hertfordshire County Council (July)
- Meeting with Hertfordshire County Council to discuss the document and next steps (September)
- Updated the document and shared with Hertfordshire County Council (September)

South and West Hertfordshire Health and Care Partnership Coproduction Board

Objective

- To support the South and West Hertfordshire Health and Care Partnership to develop and launch a Coproduction Board.

Project Aims

- To create a working Coproduction Board for the South and West Hertfordshire Health and Care Partnership.

Target Population

- Residents of the south and west areas of Hertfordshire.

Activity

- Meetings with Deputy Director to plan agenda for meetings in July and September (July – September)
- Created and distributed agenda and papers for July and September Board meetings (July, September)

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- Chaired and facilitated July Board meeting (July)
- Created and distributed minutes from the July and September Board meetings (September)
- Facilitated September Board meeting (September)

East and North Herts Health and Care Partnership Community Assembly

Objective

- The assembly is involved with the Partnership's strategic direction and provides a collaborative forum for a broad range of voices to shape partnership activity. It plays a pivotal role in providing opportunities for patients and carers to take part in transformation and other improvement activity across the partnership.

Project Aims

- To enhance opportunities for patient involvement across the Partnership

Target Population

- Patients, carers, health and social care professionals, Voluntary, Community, Faith & Social Enterprise sector workers and other local people who are interested and invested in health and social care across East and North Herts.

Activity

- Continued work on Involvement Plan (July–September)
- Created draft agenda for August Assembly and shared with team (July)
- Communicated with and organised presenters (July – August)
- Created Outlook Calendar invite and managed responses (July – August)
- Finalised and distributed agenda (August)
- Created and scheduled social media comms (July)
- Created research presentation (August)
- Created involvement plan presentation for Assembly (August)
- Managed August Community Assembly (attended, recorded, took notes, presented) (August)
- Wrote up Assembly minutes and shared with members (September)
- Collated all presentations and follow up papers, and shared these with members (September)
- Created involvement plan presentation for the Partnership's Joint Committee (September)

East of England Strategic Review of the Mount Vernon Cancer Centre

NHS England East of England Specialised Commissioning Team and NHS London are undertaking a review of the Mount Vernon Cancer Centre (run by East and North Hertfordshire NHS Trust at the Hillingdon Trust in London). The aim is to organise services in ways that

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provide the best modern care for patients, including access to research trials and new technology and treatments, from good quality buildings and facilities.

- The Strategic Review of the Mount Vernon Cancer Centre Programme Board meetings have resumed and have been taking place monthly since June 2024.
- We have seen and been able to comment on the draft consultation document and survey¹ which has undergone a number of iterations following feedback from stakeholders. It will go to the Consultation Institute for further comment.
- There is a draft timeline for December 2024 for the consultation to begin though this may slip to January 2025 due to the required governance not yet completed.
- There are a number of key dependencies that are being mapped including the progress of the Watford Hospital redevelopment (currently under review by the government).
- The Patient Reference Group is now also meeting on a regular basis.

Communications Activity

- Responded to media requests:
 - i Newspaper – keen to speak with patients who faced significant delays booking GP appointments (provided research data)
 - BBC Three Counties – Long-serving Chief Executive leaving and their HWH achievements
 - Global Radio/Heart – interview with our Chair re the new government NHS review
- Finalised Annual Report and developed associated communications for launch on our website, newsletter and social media (including 1-page highlights summary)
- Annual General Meeting/Annual Report media release issued to local media outlets
- Supported research team with comms and social media to launch findings from the Gambling Harms Strategy Report
- Assisted with promotion of Pharmaceutical Needs Assessment survey
- Input re draft questions for Mount Vernon Cancer Centre review
- Met with Integrated Care Board re pharmacy 7-day prescribing guidance campaign
- Development of social media policy for Trustees
- Videos: 2 for studies, 1 for newsletter
- Comms accessibility review: revised multiple web pages, including GP and dentist pages; AI voicing for accessible newsletter
- Comms growth elements planning and discussions across Comms team and Executive Leadership Team
- New MP briefings: MP for Berkhamsted & Harpenden to meet with our Chair & Chief Executive
- Reviewed and updated stakeholder lists
- Marie Curie campaign finished, insights from advertising

¹ The proposals involve relocating MVCC to a new, purpose-built cancer centre adjacent to the Watford General Hospital. The proposals also include an option to have a networked radiotherapy unit in addition to radiotherapy at Watford, at either Luton or Stevenage.

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- LinkedIn: Launch continues, 560 followers, third highest Healthwatch in country
- Ongoing discussions with Integrated Care Board Comms relating to publishing Report findings
- Attended Integrated Care Board Comms meetings
- Wrote and published HwH hard copy newsletter and e-newsletter
- Ongoing monitoring of social media platforms to promote our key messages and engage with followers
- Continued reviews of HwH website and Google Analytics
- Supporting local charities, Healthwatch England initiatives, local Councils and NHS/social care organisations via social media
- Healthwatch England Workplace monitoring
- Ongoing monitoring of media stories relating to HwH and issues in general that may be relevant to our work

Media Release

- 19/07/24 - By listening to people in Hertfordshire, local services are making improvements

Website Articles

- <https://www.healthwatchhertfordshire.co.uk/news/2024-07-08/listening-you-local-services-are-making-improvements-our-annual-report-202324>
- <https://www.healthwatchhertfordshire.co.uk/news/2024-07-10/are-you-or-someone-close-you-living-terminal-illness>
- <https://www.healthwatchhertfordshire.co.uk/news/2024-07-23/what-do-you-think-pharmacies-hertfordshire>
- <https://www.healthwatchhertfordshire.co.uk/news/2024-07-29/navigating-digital-health-online-gp-services-and-bookings>
- <https://www.healthwatchhertfordshire.co.uk/news/2024-07-31/hertfordshire-residents-reveal-serious-gambling-harms>
- <https://www.healthwatchhertfordshire.co.uk/blog/2024-08-30/geoff-brown-final-reflections-and-farewell>
- <https://www.healthwatchhertfordshire.co.uk/news/2024-09-03/healthwatch-hertfordshire-welcomes-ivana-chalmers-our-new-chief-executive>

4. Holding commissioners and providers to account and partnership working

Please note, most meetings continued to take place virtually during the period, though a number are now 'face to face' or hybrid. This report begins with our roles around patient leadership at a strategic level, then listing meetings with commissioners, providers and partners and summarising key themes covered.

Hertfordshire and West Essex Integrated Care System (ICS) – The Integrated Care Board (ICB) and Integrated Care Partnership (ICP) remain major drivers for our activity and provide further opportunities to be involved around: patient experience, service quality and equalities and

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diversity. Healthwatch is seen by the Integrated Care System as a key organisation, and we have again been heavily involved in work strands and meetings. The move towards greater delegation to Health and Care Partnerships (HCPs) provides further opportunities, including new meetings to attend, though work is still needed to develop strategies and new ways of working. Governance change has impacted on models of involvement and coproduction.

Activity has included:

- Meeting with the Chair of the Integrated Care Board to discuss strategic issues and system challenges. Topics discussed included: Industrial action by GPs; Messages from new Government; New Hospital programme; Patient involvement and roles of HWH and PEF.
- Involvement with meetings of the Integrated Care System including: the Integrated Care Partnership Board, the Primary Care Transformation Group and Primary Care Commissioning Committee, and the Integrated Care Board Quality Committee.
- Contributing public feedback to a System Escalation Meeting regarding AJM Healthcare Wheelchair Service, which had been placed on the Risk Register in July
- Six-weekly meetings with the Nursing and Quality Team across the Integrated Care Board to raise issues from signposting and research. These meetings have proved an excellent way for us to raise concerns and the ICB have been very responsive in taking action to address these.
- We also participated in a task and finish group to look at how meaningful patient experience metrics can be incorporated into the Integrated Care Board's Experience of Care dashboard. Frailty was chosen as an area of focus and we were able to provide themes from a person's experience for a frailty-focused quality visit the Board was undertaking collaboratively with West Hertfordshire Teaching Hospitals Trust (WHTH) and Central London Community Healthcare (CLCH).
- Continued meetings with the ICB Equalities Lead to develop Integrated Care Board research opportunities (see section 3).
- Regular meetings to address Primary Care Research, Engagement and Communication with residents with the Director of Primary Care Transformation and Engagement and Communication leads. Meeting with Healthwatch Essex to develop the research programme to deliver this work.
- Involvement with the Patient Engagement Forum (and its development). Attended 4 meetings of the Forum.
- Review of the processes and effectiveness of the Integrated Care Board Quality Group.
- Involvement with the development of the new Elective Hub.
- Regular attendance of the Integrated Care Board Health Inequalities Communities of Practice Forum. Collaborated with Healthwatch Essex to create survey questions and commenced public engagement for monitoring progress on the Integrated Care Partnership Framework in terms of people's experiences.

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South and West Herts Health and Care Partnership (SWHHCP) – Our involvement with the partnership continues to be extensive, encompassing our lead role on coproduction across the partnership. During the quarter, work has included:

- Membership of the Partnership Board with a particular role around patient involvement and coproduction.
- Chairing and managing South and West Herts Health and Care Partnership Coproduction Board Meeting
- Regular meetings with the Development Director and Place Deputy Director, Transformation, to brief them on coproduction and models of patient involvement.

East and North Herts Health and Care Partnership (ENHHCP) – We also have extensive involvement with the partnership in the east and north of the county. This includes:

- Membership of the Partnership Board where we represent the patient perspective.
- Chairing and managing the Community Assembly, which looks at strategic issues on health and care across the area and aims to enhance opportunities for patient involvement with workstream priorities. The latest meeting included: the impact of rural isolation on people's health and wellbeing and improving health outcomes, the Partnership's involvement plan and the future of Community Assembly, update on partnership development and findings from our research into gambling harms.
- Building on the work of the Community Assembly, planning for an enhanced model of patient and community involvement
- Membership of the Board's group addressing health inequalities that meets monthly, as well as looking at the role of Healthwatch to evaluate work to address inequality.
- Membership of the Care Partnership's Quality Group, which uses a 'deep dive' approach to review a particular quality concern.

Meetings with Service Providers

The meetings allow an important opportunity to raise issues from our research and signposting and the NHS and Herts County Council have been very receptive to feedback as to how their services need to be improved. These meetings also covered: finance, system pressures, patient and community involvement, and our research programme and its findings. These meetings complement the meetings with senior commissioning staff mentioned above.

West Hertfordshire Teaching Hospitals Trust -

In the period, activity has included:

- Our regular meeting with the Chair and Chief Executive of the Trust, which included an update on Trust performance, service sustainability, the elective hub and cancer waiting times
- Chairing the Trust's Coproduction Board, and meeting with the Deputy Chief Nurse and Associate Chief Nurse to review the Coproduction Board and develop its role to complement the local Health & Care Partnership coproduction work highlighted above.

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East and North Herts Trust -

In the quarter we held:

- Our regular Chair and Chief Executive meeting, providing an opportunity to explore issues around the pressures facing the Trust and an in-depth look at enhancing patient and community involvement both at the Trust and the Health and Care Partnership.
- At our August board meeting, the Trust's Chief Nurse presented on key issues at the Trust, including maternity services, audiology and patient feedback.

The Princess Alexandra Hospital Trust

Although we did not have our meeting with the Chief Executive and Director of Strategy during this period, we have had continued involvement with patient activity at the Trust.

Hertfordshire Partnership University Foundation Trust (HPFT) and The Mental Health, Learning Disability and Autism Health and Care Partnership -

During the quarter, our contact with the Trust included:

- Our regular meetings with the Trust have been rearranged due to staff changes at both HPFT and Healthwatch Hertfordshire. Our new CEO had an introductory meeting with the Chief Nursing Officer at the Trust.
- Attendance of the Mental Health and Substance Use steering group.

Central London Community Healthcare NHS Trust (CLCH)

The Trust remains keen to build on their relationship with us and we have monthly meetings with their Divisional Director of Nursing and Therapies, which they have requested. This includes discussions about service pressures such as the recruitment of specialist nurses and opportunities for patient voices to be heard. We are invited to attend their quality meetings on a quarterly basis to ensure a focus on an external, patient perspective is included. We also had 2 meetings with Director of Nursing and Quality, and the Chair to discuss service pressures, transformational change and system challenges.

Hertfordshire Community NHS Trust (HCT)

- Met with the Trust's Chair and Chief Executive to discuss service pressures, transformational change and system challenges.
- Attended the Trust's Health Inequalities Community Engagement Group

Circle Health Group

We met with Circle in August to understand issues and share feedback on their service, which took over from Connect Health in April 2024.

HUC

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We liaised with the Head of Patient Experience and HUC's commissioner regarding the process for allocating urgent dental appointments, as we'd received information stating that additional appointments especially commissioned in this time of high demand were not being taken up.

Cambridgeshire and Peterborough Integrated Care System (ICS)

Our work with Cambridgeshire and Peterborough ICS during the period included membership of the Royston Infrastructure Steering Group and attendance of monthly meetings. This included:

- Let's talk Royston community feedback
- options appraisal regarding estates

NHS England – East of England

Work has continued with Head of Partnerships and Engagement to discuss changes in commissioning, and the possibility of research work within the region. We met with a patient and the Regional Director of Nursing to discuss a historic concern.

Hertfordshire County Council (HCC) – Children's Services

Regular 6 monthly meeting with the Director of Children's Services and Executive Member for Children's Services and discussed progress on the Special Educational Needs & Disabilities (SEND) improvement plan including the SEND Academy and increase in recruitment. Other subjects discussed included the challenges around referral waiting times for autism/ADHD diagnosis and audiology, the increasing issue of mental health for children and young people, and the range of support available.

Hertfordshire County Council (HCC) – Adult Social Services

During the quarter, activity included:

- Met with the Director of Health Integration and subjects discussed included service pressures, discharge, continuing healthcare and the importance of Healthwatch Hertfordshire's role in ensuring people's experiences are heard.
- Met with commissioners to finalised details of our contract.
- Presented at the Strategic Quality Improvement Group (SQIG) to outline our work and highlights from our Annual Report.

We also had meetings with:

- Lead officers for Refugees and asylum seekers in Hertfordshire to discuss how our research in this area could provide the greatest impact and which key contacts to work with to ensure public engagement.
- Chaired and attended Task and Finish Group for Hertfordshire Health and Wellbeing Board Stakeholder Workshop

Hertfordshire County Council (HCC) – Public Health

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We continued to work on the *C.H.A.T Coproduction (Common Holistic Assessment Tool) and attended two meetings of this group during the period, where user testing and evaluation began.

Hertfordshire County Council (HCC) – Scrutiny

We continue to work closely with HCC Scrutiny, attending the Health Scrutiny Committee, and presenting at the Health Scrutiny Committee on our work on Gambling Harms.

National and Regional Meetings, including Healthwatch England (where we chair the Regional Meeting).

During the quarter we:

- Continued to be involved with the National Institute for Health & Care Research (NIHR) Public Health Intervention Responsive Studies Team (PHIRST) Connect Board and the NIHR Applied Research Collaboration (ARC) East of England. This included being an interviewer for Deputy Director of the ARC.
- Chaired Healthwatch Eastern Region network meeting, which included initial messages relating to the new government's priorities and support for people with taste and smell disorders.
- Attended the Healthwatch Eastern Region Network Day

Local Councils and Voluntary and Community Sector partners

As mentioned previously, our relationship with Voluntary and Community and other local partners is crucial. During this quarter, our work has included:

- Regular meetings with Marie Curie Eastern Region Leads to collaborate on public engagement for a user-voice survey, aimed at understanding experiences of end of life care. We collaborated to strengthen links to a range of hospices in the county.
- Discussed key Voluntary, Community, Faith & Social Enterprise (VCFSE) groups supporting refugees and asylum seekers and were introduced to them by colleagues from Herts County Council, including Herts Welcomes Refugees and the South Hill Centre.
- Attended a drop-in centre for refugees and asylum seekers and liaised with colleagues from Herts Welcomes Refugees, Mind, and Flourish to establish plans for public engagement visits in future.
- Introductory meeting with Health and Wellbeing public engagement team from Watford FC to discuss potential links and opportunities for mutual support of each other's work.
- Meeting with Isabel Hospice CEO on behalf of all hospices in Herts & West Essex area. Topics discussed included NHS financial pressures and impact on hospice care; Out of hours hospice services; Parliamentary discussions about assisted dying
- Meeting with hospices about transition from children to adult services
- Attended Garden House Hospice AGM event

Themes discussed and issues raised in the period include:

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- The Integrated Care System progress and challenges, and moves to ensure effectiveness and avoid duplication. Continued discussions around the changes planned to Health and Care Partnerships and governance, including opportunities/impacts around coproduction and patient involvement
- Financial pressures and impacts across the system
- The importance of patient experience in service redesign and change
- Feedback from signposting and research which continues to include access to services, including fairness of criteria, delays to treatment, and poor communication
- Health Inequalities and impacts
- New hospital developments and review of the New Hospital Programme
- Digital opportunities and challenges
- Delays to accessing ADHD and Autism services
- Workforce fatigue and morale
- Staff shortages and recruitment of specialist staff (e.g. audiology, educational psychology)
- Opportunities to link to community wellbeing events
- Ensuring constructive and individualised approaches to hearing seldom heard voices, including refugees and asylum seekers.
- Initial areas that are seen to be the focus of the new government, including access to general practise, elective waiting lists, parity of esteem for mental health services.
- Special Educational Needs & Disabilities services and progress on improvement plan
- Findings of the Darzi report highlighting the importance of ensuring patient voice is heard and learning is taken from patient experience
- Mental health support and services for Children and Young People
- Industrial action by GPs

Holding to Account Log

We continue to maintain a 'Holding to Account Log and have regular 'holding to account' reviews of the latest concerns and information and feedback from signposting and surveys.

5. Budgets & Finance (Budget sheets; reasons for any significant under or overspend, as well as highlight any findings/issues which may impact on this contract)



Management
Accounts Qtr 2 30092