

HEALTH AND WELLBEING BOARD	AGENDA ITEM: 9
<p>DATE OF MEETING: 16 January 2014</p> <p>REPORT AUTHOR & CONTACT NUMBER: Nisar Mohammed 01582 817060</p> <p>SUBJECT: Healthwatch Luton Work Programme</p>	

WARD(S) AFFECTED: ALL

1. PURPOSE

To provide an overview of the current Healthwatch Luton work programme and to consider issues arising from the work programme.

2. RECOMMENDATION(S)

The Health and Wellbeing Board is recommended to note the information presented and consider the points highlighted.

3. BACKGROUND

The Healthwatch Luton 2013/2014 work programme is determined by the following:

- The priority areas identified through stakeholder consultation (April – July 2013)
- Issues/concerns that are brought to our attention by the general public
- Issues/concerns identified via consultation/engagement within the voluntary and community sector
- Opportunities presented to us as part of service reviews/commissioning cycles

4. REPORT

1. Review of General Practices

We have visited all GP surgeries in Luton and have recorded a total of 961 patient surveys with an average of 24 patient surveys for each GP surgery.

We are currently in the stage of data analysis and will begin to contact each surgery with their results and recommendations during the coming weeks.

2. Children and Young People

Working in partnership with Public Health, we are currently in the process of gathering views from young people about their experience of personal, social and health education in secondary schools. Survey results will be included in the final report.

Young people and mental health – the table below details the number of young people from Luton admitted into mental health inpatient units since April 2010.

Financial Year	Number of Admissions	Presentation
2010-2011	11	Psychotic x 5 Suicidal x 4 Eating Disorder x 1 Depression x 1
2011-2012	16	Suicidal x 8 Self Harm x 2 Aspergers x 2 ADHD x 1 Psychotic x 1 Assessment (s.2) x 1 Eating Disorder x 1
2012-2013	30	Suicidal x 6 Psychotic x 6 Risky Behaviour x 5 Eating Disorder x 5 Depression x 4 Self Harm x 2 Bipolar Disorder x 1 ADHD x1
Apr – Nov 2013	17	Risky Behaviour x 5 Suicidal x 3 Psychotic x 3 Self Harm x 2 Depression x 2 Learning Disability x 1 Eating Disorder x 1

The above table highlights a steady rise in the number of young people being admitted into mental health inpatient units. A work stream will be created with involvement from our young Healthwatch Champions to explore this topic further with involvement from the service provider and commissioner.

3. Luton and Dunstable hospital

A review of staff and departmental communication methods, policies and procedures at the L&D – we have received a steady flow of information from patients which has highlighted poor quality in communication across a number of departments at the L&D. We have requested and received a range of documents from the hospital which will be analysed and used to assist us in completing a review and reporting back to the hospital and Luton Clinical Commissioning Group (LCCG).

4. Older People

We have membership on the Luton Dementia Action Alliance Core Group.

Home Care - we have received several examples of poor quality home care and we are currently working on formulating a project plan to explore these concerns further.

Monitoring of care homes – we receive weekly activity reports from the Care Quality Commission and are in the process of formulating an information sharing and joint working protocol with LBC's adult social care department.

5. Mental Health and NHS Community Services

We are continuing to support LCCG with the development of new service contracts for mental health services and NHS community services.

6. Consultation with service users from Headway Luton

We teamed up with Headway Luton to host a "conversation" for people with an acquired brain injury. The purpose was to:

Assess the quality of care and treatment received for people with an acquired brain injury, during treatment and after discharge from hospital.

Key points and recommendations identified at the service user consultation:

Service users stated that they felt General Practitioners (GP's) do not seem aware that services such as Headway Luton exist.

Headway Luton organised an open day for staff and the public. An invitation went out to all GP's in Luton but no GP's or practice staff attended.

Service users also felt they were not given enough relevant information once they were discharged from the Luton and Dunstable Hospital (L&D).

Service users stated that social workers do refer people to Headway.

Meetings and agreements between Headway Luton and the L&D have previously been made and referrals to Headway are currently being made by speech therapist and physiotherapist staff. However, not all relevant staff/ departments are referring patients to Headway Luton.

Recommendations:

1. Service users unanimously agreed that it would be positive for GP's and Staff at the Hospital, to receive awareness training around specialist services operating within the community/third sector in order to signpost patients to services that can offer support and alleviate pressures from primary and secondary care.
2. Develop a directory of non statutory community based services made available to health and social care professionals. There are huge benefits of a referral/signpost to such specialist groups within the community from health and social care professionals at the earliest possible point; these support networks offer a highly beneficial impact on the rehabilitation of service users.
3. More needs to be done to ensure referrals to Headway Luton are made from Accident and Emergency and inpatient wards such as the stroke ward.
4. Include information in discharge packs about acquired brain injuries and specialist community groups that can offer additional support. Include information relevant to carers and families of patients.
5. A suggestion was put forward for trained volunteers to attend the Stroke ward to inform patients of specialist community services such as Headway Luton.

All service users present stressed the importance of accessing Headway Luton at the earliest opportunity as they considered the service instrumental to their rehabilitation.

The majority of service users felt that they were left with no information or guidance once they were discharged from the L&D. This sense of isolation and confusion hindered their rehabilitation.

Headway Luton has expressed its willingness to work with primary and secondary care professionals and commissioners to implement the key points raised at the consultation.

Next steps: We have received positive initial responses from LCCG, NHS England and the Local Medical Committee and now plan to take these recommendations forward with the continued involvement of Headway Luton.

7. Consultation with services users from Embrace Life Luton

Working with Embrace Life Luton, we conducted a consultation with people living with HIV/AIDS. The purpose of this consultation was to assess the experience of treatment and accessibility of health and social care services.

The feedback from the consultation showed that service users are happy with the services provided at the GUM Clinic – service users feel that the service is confidential and well organised with all of the right support available in one place.

When asked about care in the community and relationships with GP's, service users feel that there is no confidentiality in local GP surgeries. Service users expressed concerns about GP training and feel that more HIV awareness training is need amongst GPs and Nurses. GP access was also highlighted – services users stated that there is a lack of appointment availability; as a consequence service users prefer to go to A&E as they believe that they receive timely and more consistent care and treatment there.

Next steps: we have shared our preliminary findings with public health and will share our final report and recommendations with all interested parties.

8. Accessibility of services for people with Multiple Sclerosis

A case study has now been completed and arrangements are being made for Healthwatch Luton to gather further views and experiences by attending a Multiple Sclerosis Branch meeting.

9. Information, Advice and Signposting Record:

To date, Healthwatch Luton has signposted 76 people to a range of services. Signposting has been done through contact to our office (telephone, email and website) and face to face contact in the local community.

111 Service x 3	L&D PALS x 1
A GP Surgery for new registration x 5	Penrose x 1
Age Concern x 2	SEPT x 1
General Medical Council x 6	Pohwer x 9
Care Quality Commission x 6	NHS Walk in Centre x 2
Headway Luton x 1	Shopmobility x 3
Healthwatch England x 1	Community Dental Team x 1
Healthwatch Central Bedfordshire x 2	LBC Carers Assessment Team x 2
Health and Wellbeing Board x 1	Alzheimer's Society x 1
Local Pharmacy x 33	LBC Social Workers Department x 3
LCCG Complaints/PALS Department x 5	Nursing and Midwifery Council x 1
NHS Choices x 4	Healthwatch Hertfordshire x 2
NHS England x 5	LBC Carers Assessment Team x 2

IMPLICATIONS

5. Not applicable

6. Not applicable

CONSULTATIONS

7. Not applicable

APPENDICES

8. None

9. LIST OF BACKGROUND PAPERS

9. None