

How has Coronavirus Affected You?

Review of Report Recommendations



October 2021

“In the early stages of (vaccine) rollout, one site, which did meet capacity and other requirements was considered too small by some of the patients, who voiced their concerns.

This was responded to, fairly quickly, by relocating the service to much larger premises.”

Local Authority Commissioner

Contents

| | Page |
|--------------------------------|------|
| 1. Introduction | 5 |
| 2. Background | 5 |
| 3. Methodology | 5 |
| 4. Strengths & Limitations | 5 |
| 5. Executive Summary | 6 |
| 6. Review of Recommendations | 8 |
| 7. Health and Care Services | 10 |
| 8. Mental Health and Wellbeing | 26 |
| 9. Wider Community | 34 |
| 10. Glossary of Terms | 46 |
| 11. Distribution and Comment | 47 |

All initiatives

Appendix

This page is intentionally blank.

1. Introduction

Healthwatch Hounslow is an independent organisation that gives people a voice to improve and shape services and help them get the best out of health and social care services.

During the summer of 2020 we asked residents living in the London borough of Hounslow to complete an online survey about their views on the coronavirus pandemic. Over 3000 people responded and as a result two reports were produced in which several recommendations were made. These reports were published in August 2020 and can be found [here](#). Following publication, we presented the report at several meetings.

One year on from publication, we followed up on the recommendations from the reports. During the summer of 2021 we engaged with service providers and commissioners, to establish whether any of our report recommendations have been implemented. 134 initiatives (or projects) that address, or correspond with our recommendations have been discovered.

2. Background

We launched an online survey on the 26th May 2020 to hear about local people's views about the coronavirus pandemic. The survey was created in response to the pandemic, with the aim of finding out how the people of Hounslow were coping during this difficult time. We produced two reports:

- [How has coronavirus affected you?](#)
- [How has coronavirus affected you? Black, Asian and Minority Ethnic Communities](#)

3. Methodology

To understand the progress that had been made against the recommendations outlined in our reports we engaged with providers and commissioners in Hounslow asking them to submit evidence or to arrange a Zoom/Teams online meeting to discuss the recommendations.

Following the meetings, a report will be issued, rating providers overall (RAG system) and on certain indicators.

4. Strengths & Limitations

We are unable to independently scrutinise the feedback and information commissioners and providers have shared. We have not asked them to evidence their progress against the recommendations and have taken their verbal/written feedback at face value.

5. Executive Summary of Findings

During the summer of 2021 we engaged with service providers and commissioners, to establish whether any of our report recommendations have been implemented. 134 initiatives (or projects) that address, or correspond with our recommendations have been discovered.

This is a summary of key findings - see sections 7 - 9 for the analysis in full.

Health and Care Services

We discovered 69 initiatives about Health and Care Services.

Tailoring Information

- Most services have produced documentation in easy-read and additional languages.
- Service users and carers have been able to influence the content of messaging.
- Webinars, question-and-answer sessions and videos have been widely available.
- Ethnic communities have been engaged, with 'champions' recruited.
- Public health data has been utilised to identify under-served groups.
- While good practice is noted, we are unsure as to consistency within organisations.

Upholding Choice of Consultation (In-Person, Phone, Online)

- Some services are taking steps to evidence that choice is offered.
- Face-to-face availability at hospitals and community services is increasing.
- At GP services, choice is increasing at a slower pace.

Support Following Service Cancellations

- No services have a specific policy, or consistent approach, in providing support.
- We detect no initiatives that seek to learn from broader experiences.
- We are also unaware of partnership working or consensus building.

Reducing Hesitancy to Attend Services

- Services, largely through their websites have sought to address concerns.
- Patients have been urged to attend their appointments as usual.
- Service users have been able to influence content and case studies have been used.
- Mental Health and GP services have been proactive in contacting patients.

Midwifery and Health Visiting Services

- A 'Digital Postnatal Discharge Report' provides mothers with essential information.
- Prioritisation of home visits is also welcome, but how does this affect staffing?

Mental Health and Wellbeing

We discovered 25 initiatives about Mental Health and Wellbeing.

Ability to Work from Home

- Services demonstrate a good level of flexibility on working arrangements.
- One service has received the London Healthy Workplace Foundation Award.

Access to Activities, Hobbies or Routines

- The deployment of 'Community Champions' is widespread (now over 100 volunteers).

Support for those with known Mental Health Issues

- Mental Health and GP services have been proactive in contacting patients.
- Effective prioritisation is demonstrated.
- Service users or carers are not visible in messaging (we did not see a case study).

Wider Community

We discovered 40 initiatives on the Wider Community.

Social Isolation

- A good level of co-ordination between services is highlighted.
- Community Solutions is developing a digital inclusion offer for the most isolated.
- Befriending services are available.

Experience of Marginalisation

- A high degree of consensus building and partnerships across services is detected.
- Good levels of engagement, learning and promotion is also demonstrated.
- Grants from 'Thriving Communities' have enhanced resilience of certain groups.

The 'Digital Divide'

- There is consensus on digital poverty and joint-working to provide support.

Accessible Information

- Some hospital services are now capturing ‘additional communication needs’.
- Service users have been consulted on the design and content of letters.
- Public health guides are widely available in a range of languages.
- Many services point to the availability of translators, and ease of facilitating access.
- Foreign language webinars have been conducted.

6. Review of Recommendations

6.1 Our Reports, Summer 2020

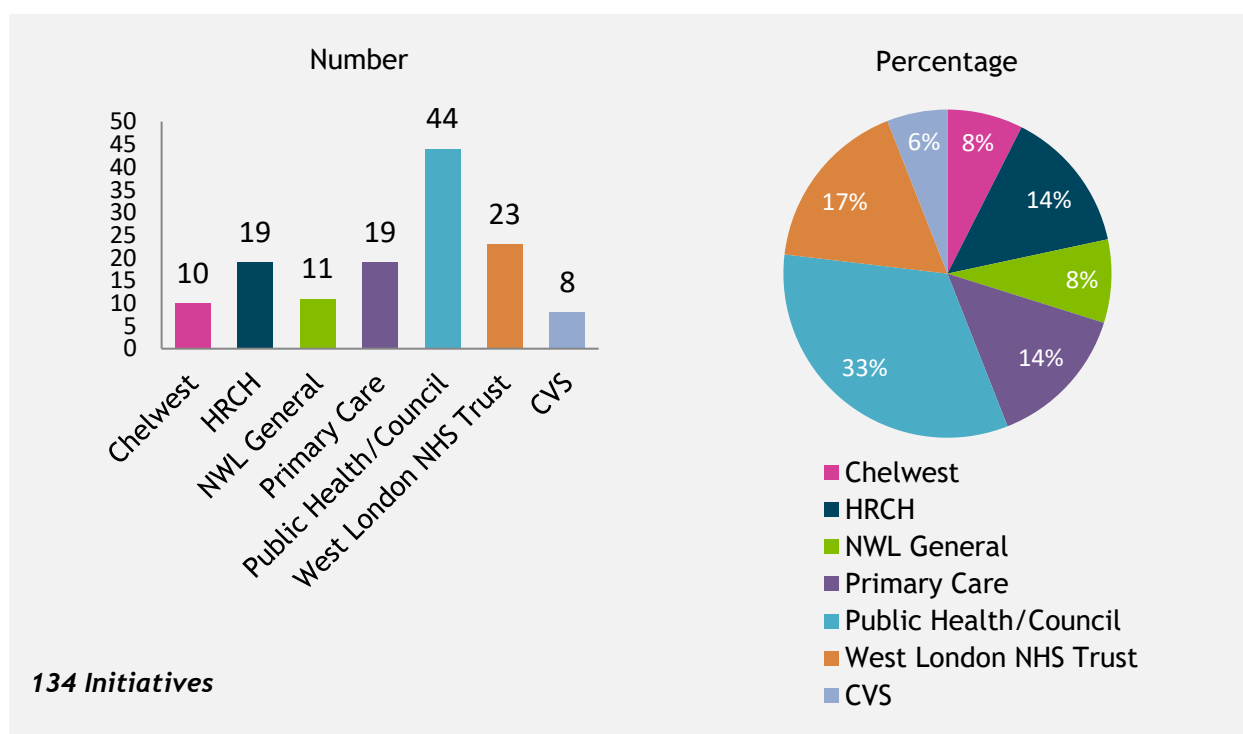
In the summer of 2020, 3,310 local people completed our survey on how the Coronavirus pandemic had affected them.

Through detailed analysis of the feedback, our subsequent reports (general report plus focus on ethnic minority communities) issued recommendations for service providers, looking specifically at Health and Care Services, Mental Health and Wellbeing, and the Wider Community.

6.2 Review of Report Recommendations, Summer 2021

During the summer of 2021 we engaged with service providers and commissioners, to establish whether any of our report recommendations have been implemented. The engagement included interviews with management and staff, we also reviewed publicly available information online. This report details findings.

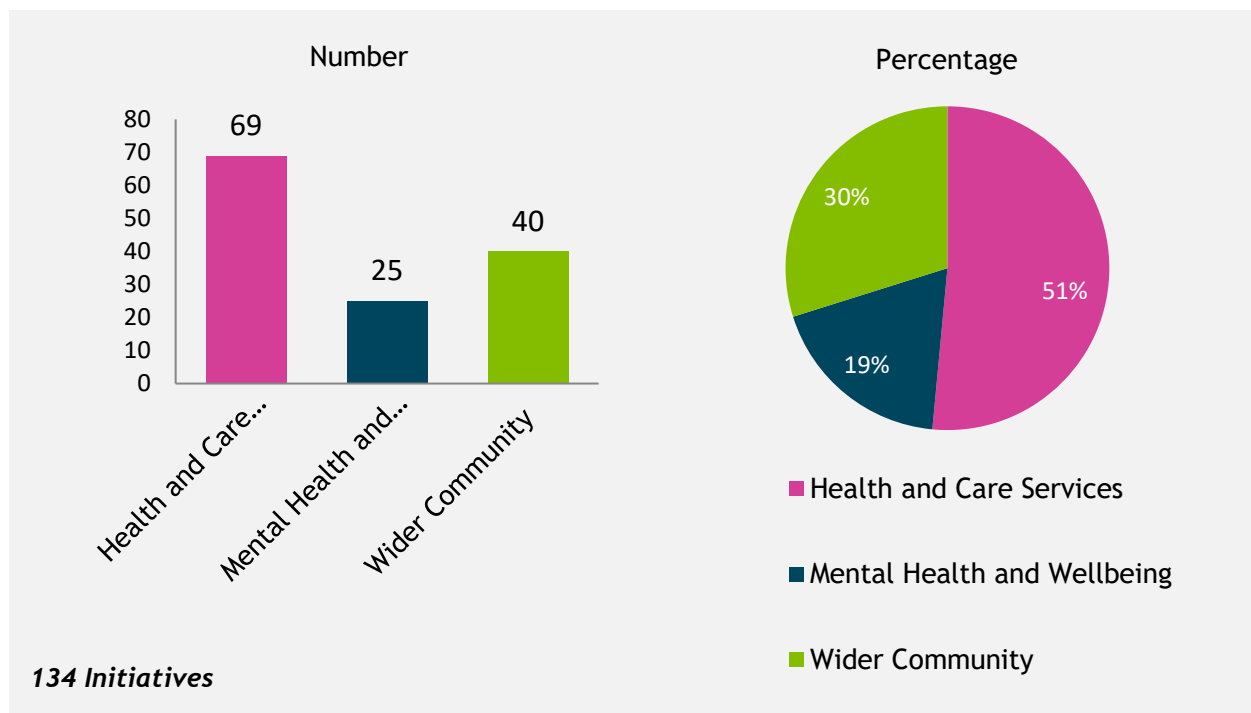
6.3 All Initiatives Discovered



134 initiatives* (or projects) that address, or correspond with our recommendations have been discovered. A third (33%) originate from Public Health and other council departments, 17% from West London NHS Trust, and 14% each from Hounslow & Richmond Community Healthcare NHS Trust (HRCH) and the Clinical Commissioning Group (CCG). Initiatives from Chelsea and Westminster Hospital NHS Foundation Trust (Chelwest), the NHS in North West London, and local Community and Voluntary Sector are also recorded.

**Initiatives are detailed in full in Appendix 1.*

6.4 Initiatives by Theme



Half of the initiatives (51%) are about Health and Care Services, 30% about the Wider Community and 19% on Mental Health and Wellbeing.

6.5 Impact Assessment of Outcomes

Each initiative has been assessed for impact, based on the following 8 criteria.

Impact Indicators

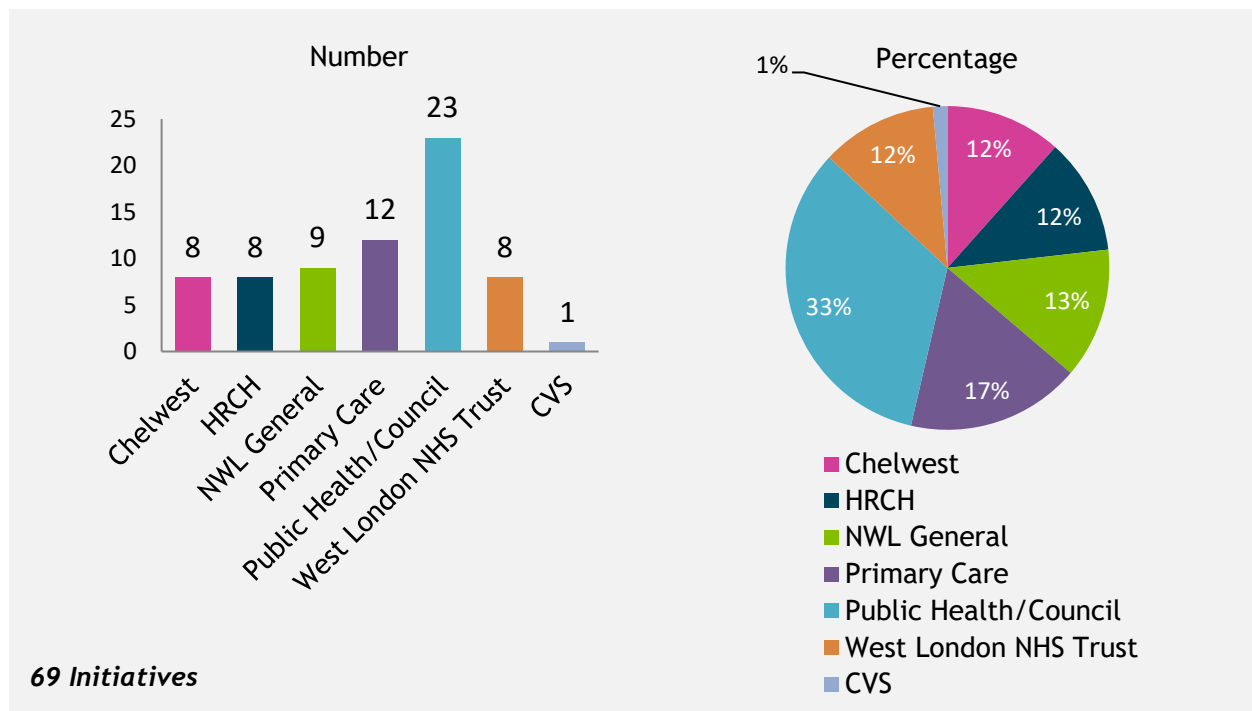
1. Evidence based changes to health and social care services.
2. Reassurance that services are doing the right things.
3. Improved prevention where future mistakes are avoided.
4. Learning where commissioners and provider organisations develop new insights into the way people experience services.
5. Changes in behaviour.
6. Changes to individuals (e.g. choice of and access to services and knowledge of rights through advice and information).
7. Identifying and defining new problems.

8. Consensus building and securing support amongst stakeholders/commissioners to prioritise and work on an issue.

7. Health and Care Services

Our reports made 8 recommendations on Health and Care Services, including on tailoring information, upholding choice of consultation, support following service cancellations, reducing hesitancy to attend services, and improving levels of midwifery and health visiting support.

7.1 Initiatives - Health and Care Services



69 initiatives have been discovered, with the largest volume (33%) originating from Public Health and other council departments.

7.2 Tailoring Information

Our recommendation asserts that “Generic ‘catch all’ information is not always reassuring, or effective. Any information or signposting advice needs to be as personal and specific as possible (nobody should be left unsupported).”

We said...

- Identify patients at most risk - providing ongoing clear communication.
- Systems need to be in place with regular communication for vulnerable patients. Appropriate levels of communication should be established for different groups of patients. For example, a text from Public Health could be sent out to patients who do not require much support. A monthly call could go

to patients who require more support. Links with local voluntary organisations would help in reaching out to patients as well.

30 initiatives have been detected, including the following.

You did...

Hounslow & Richmond Community Healthcare NHS Trust

- The development of “all about me guides” to support a positive experience when attending clinics.
- Co-creation of service information leaflets such as ‘Trip to the hearing clinic’.
- Training delivered to residential homes online, plus communication training to staff.
- Free webinars for carers.
- Video resources to compliment the written resources to support patient management.

North West London (General)

- A range of leaflets and guidance for parents, carers and people who work with children
- information sheet created to answer questions from parents.
- Making it easier to find and download health management apps.
- Webinar about Covid-19, vaccines, pregnancy, fertility and breastfeeding.

Primary Care

- For the Covid and flu vaccine campaigns, easy-to-read literature has been produced.
- Special webinars for care home staff who had questions relating to the vaccine.
- Practices have put on webinars for patients - so people who prefer to listen (rather than read) may do so, and ask questions.
- A lot of topical videos have been produced.

Public Health and Community Hubs

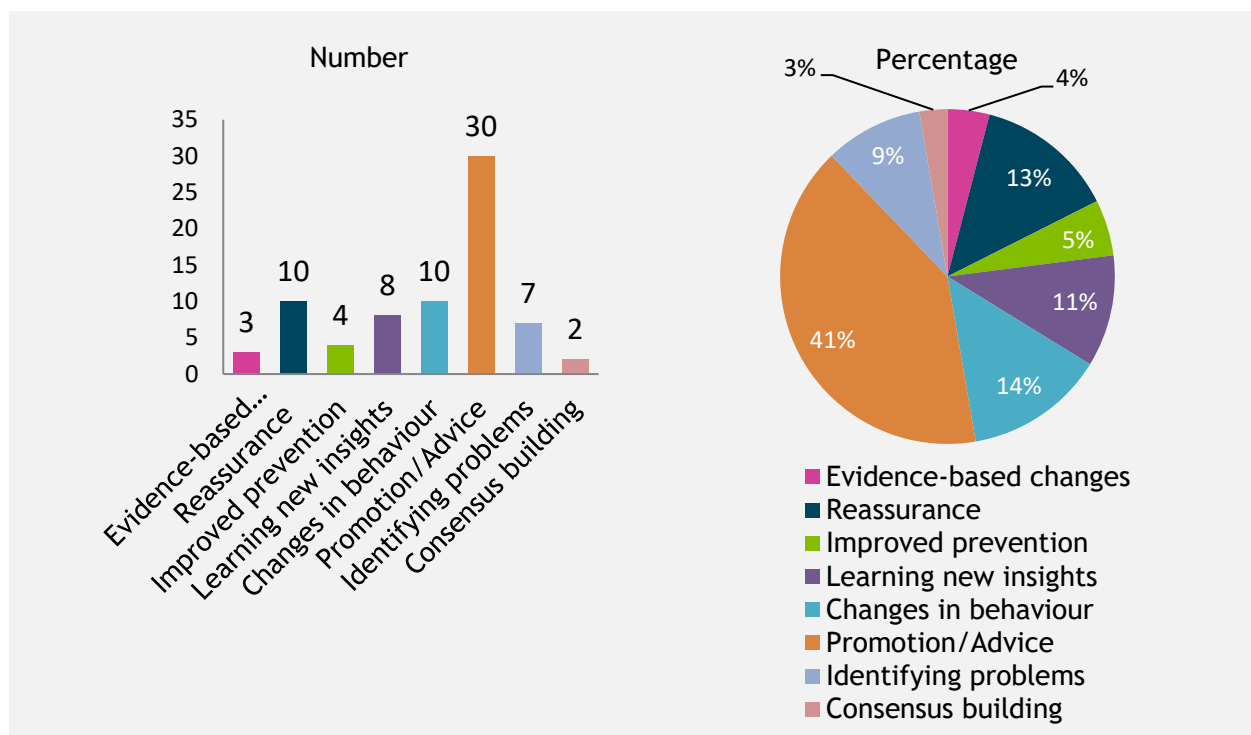
- SignLive has been extended to Community Solutions for deaf/hard of hearing clients.
- All communications are sent in plain English and as jargon free as much as possible.
- Targeted intervention to increase health check uptake for local Black men.
- Use of data to identify ‘underserved’ population groups.
- Working with the British Red Cross to engage with ethnic minority communities.
- Recruitment of community Covid Champions from various ethnicities.
- Engagement with faith groups and leaders to communicate messages.

- Messages in different languages provided.
- Using health care professionals from different ethnic backgrounds to relay messages.
- Using different communication channels.
- Recruitment of community champions and wellbeing champions from different groups.

West London NHS Trust

- Teams of Occupational Therapists joined forces to create a series of free webinars.
- Easy read information - made available to the whole Trust.
- People can get translation support at meetings, whether that's by phone or otherwise.

7.2.1 Impact Assessment of Outcomes



What has been done?

30 initiatives (41%) have a focus on service promotion and advice, and all other outcome indicators are represented.

Leaflets, guides and other information has been produced based on questions from local service users and carers, with use of positive messaging. We also hear about use of plain language, availability of easy-read literature and translation, though we are not sure how extensive or consistent this is across individual services.

Almost all services have provided webinars - for a variety of functions, including information events for service users, families and carers, and training and support for

staff. These are often recorded, along with specialist sessions, and made publicly available. There has also been regional innovation, with a [Health and Wellbeing App Library](#) launched.

There are many examples of targeted interventions, such as recruiting ‘champions’ from ethnic community groups (residents and professionals), working with front-line charities including the British Red Cross to enhance local reach, and engaging with faith and other leaders - to amplify messaging, and make it more relevant. Public health data has been utilised to target ‘underserved’ groups.

What else can we do?

When speaking with service providers, many felt that as the Accessible Information Standard (AIS) exists and is mandatory, known communication issues will have been addressed. However, when asking for examples, few in fact were given generally so effectiveness of AIS policies and rollout may be assumed.

While good work is demonstrated on producing videos, guides, leaflets and other information based on local people, how easy is this to find - in Hounslow and across the region?

Possible actions...

Local Services

- Services would benefit from a general AIS review, to establish effectiveness and consistency across their organisation. Would an Occupational Therapist, or Diabetes Nurse know that the Trust has developed an Easy-Read guide, or produced a video?

Region

- At a North West London level, it would make sense to develop a repository of existing materials (literature and videos). If available, services would not have to ‘start from scratch’ and would be able to build on, and enhance what already exists.

How Can Healthwatch Help?

- When engaging with residents, we could ask a general question on communication needs - thereby accumulating a volume of evidence.

7.2.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |

| | | | | | |
|-----------------------|--|--|--|--|--|
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

*Initiative
detected*



7.3 Upholding Choice of Consultation

Our recommendation asserts that “It is clear that a ‘one size fits all’ consultation system results in the marginalisation of vulnerable communities. We would like to see some level of flexibility, choice and prioritisation around appointment and consultation systems.”

We said...

- Choice in appointment options.
- Face-to-face options/appointments - if needed interpretation service to be offered beforehand.
- Specific time slots for those with sensory conditions and language barriers.
- Home visits.
- One-page information or leaflet for those patients about booking GP appointments during the Covid-19 pandemic.

10 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- Launch of ‘Innovation Projects’ that improve overall efficiency - thereby freeing-up time/enhancing options for ‘non digital’ patients

Hounslow & Richmond Community Healthcare NHS Trust

- Improved interpreting service offer to people with disabilities and those from minority backgrounds.
- The Trust rolled out the use of Attend Anywhere, making it more convenient for a variety of patients.

North West London (General)

- Guidance issued on ‘How to access your GP practice’.

Primary Care

- Surgeries are open, and people may come in, and speak with staff at the front desk.
- The CCG conducts a daily 'situation report' with practices to flag any issues with the delivery of service.

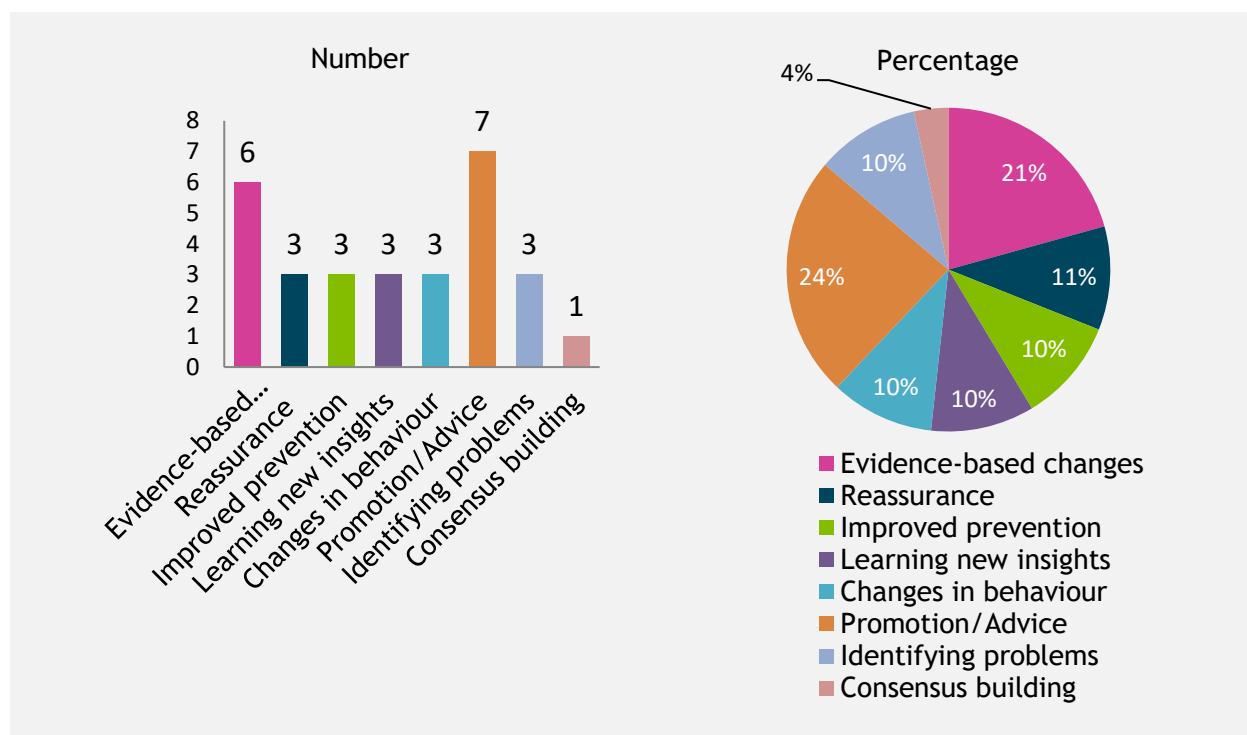
Public Health and Community Hubs

- Community Hub/Community Solutions are now moving to an in-person offer via co-location options with some libraries, faith settings and food bank partners.
- Commissioned services from public health all offer remote/telephone services and are now opening up Covid secure face-to-face services.
- Flexibility on options.

West London NHS Trust

- The service is looking to record that the patient was given a choice.
- For people with complex needs, face-to-face is the 'ideal gold standard'.
- Working with Hounslow Council, solutions for poorer patients sought (helping to pay for digital data).

7.3.1 Impact Assessment of Outcomes



What has been done?

Around a quarter of initiatives (24%) have a focus on promotion and advice, with a similar number (21%) on evidence-based changes to services.

All services acknowledge that choice is important, and some are taking steps to evidence (within personal records) that options were given.

Some hospital-based services have been able to enhance their in-person offer, thanks to increased efficiency and automation of online systems. Apps including [Attend Anywhere](#) are cited as a success. There has been some consensus on ‘digital poverty’, and joint-working to provide targeted support for broadband and other costs.

What else can we do?

While GP practices are contracted to perform all forms of consultation (phone, video, face-to-face) and largely agree on the importance of choice, the vast majority of appointments are based on clinical need - few patients, when booking, are given options.

The Royal College of GPs and NHS England have recently urged practices to increase their face-to-face offer, and additional funding is likely to be available.

Possible actions...

Local GPs

- GPs need a clear understanding of what their patients want - as a whole.
- There also needs to be confidence that patients requiring additional support are effectively accommodated. Do flagging systems work well, are staff responsive?
- Managing expectations is also important - if choice is restricted in the longer term, this needs to be clearly communicated.

How Can Healthwatch Help?

- We could visit practices, informally as outreach, or more formally as Enter & View and discover leading issues on access. It would be useful to get both a patient and staffing perspective.
- We could also work with Patient Participation Groups (PPGs) to establish known issues.

7.3.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |

| | | | | | |
|----------------------|--|--|--|--|--|
| Identifying problems | | | | | |
| Consensus building | | | | | |

*Initiative
detected*



7.4 Support Following Service Cancellations

Our recommendation asserts that “Those with cancelled medical appointments, referrals and tests report on little, or no contact from GPs and services. Patients with serious conditions are especially worried. When seeking information, some have found services to be unresponsive.”

We said...

- We would urge services to get in touch with all patients in this situation, as soon as possible, with clear (and unambiguous) reassurance on reinstatement of appointments.
- Sending out information suited to the patient (email/text/post) to further explain situation and who they can contact for queries.
- Ongoing communication/ dialogue with vulnerable patients is needed. Perhaps an ‘Upgrade for the Pandemic’.

4 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- The merger of the Patient Advice and Liaison Service (PALS) and Complaints Teams will provide a 'seamless service' for patients and their representatives.

Primary Care

- Practices will try to advocate on behalf of their patients. It's often that patients have a lack of information, and GPs will try to find things out for them. We will 'do our best for our patients.'

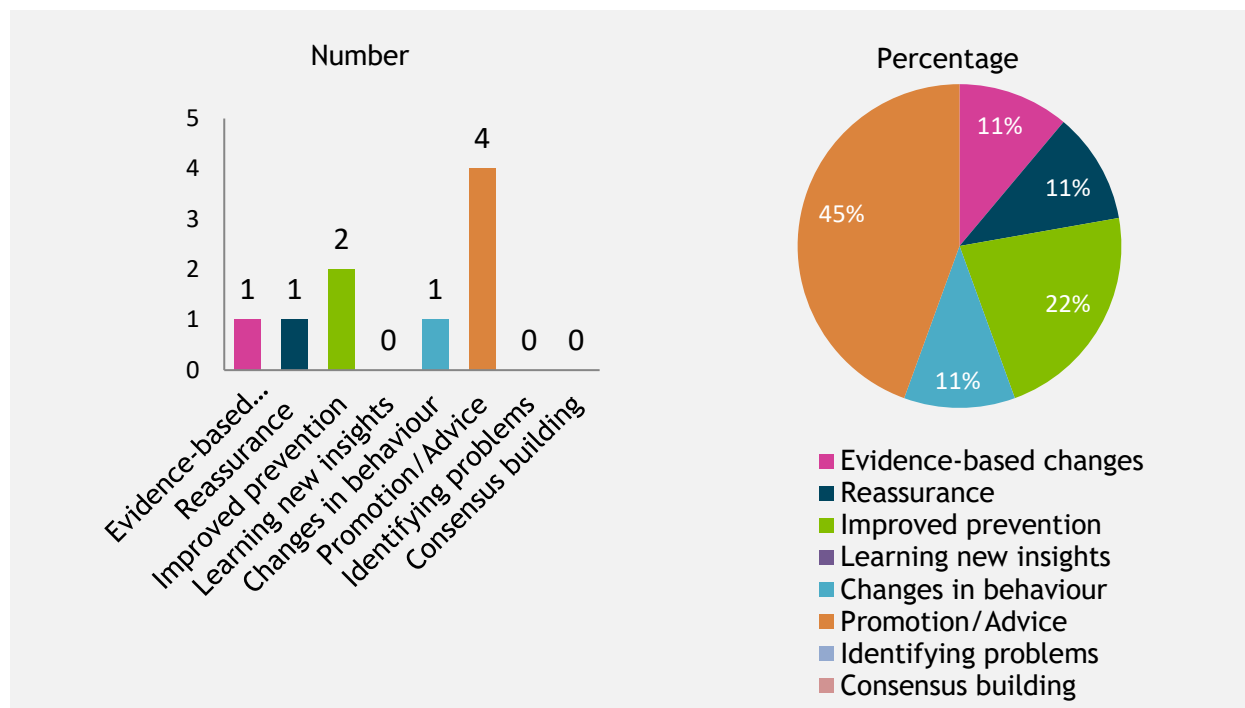
Public Health and Community Hubs

- Black male patients prioritised for health checks.

West London NHS Trust

- Contact is evidenced in the system, just a couple of lines to say that 'the patient contacted us about this, was given the number for that' or something of that nature.

7.4.1 Impact Assessment of Outcomes



What has been done?

When asking services about support following cancellation of planned treatment or care, none have a specific policy, or consistent approach. We detect no initiatives that seek to learn from broader experiences, we are also unaware of partnership working or consensus building.

One Trust is able to demonstrate a methodical response to patients who get in touch, while another says that merger of PALS (Patient Advice and Liaison Service) and complaints will result in a more 'seamless service' for those with concerns, or lodging an official complaint.

What else can we do?

As reports of cancellations, and associated risk, discomfort (and in cases distress) are widespread, we feel that services, at an organisational level should take a more consistent and recognised approach. Working partnerships can also be lacking - we hear that GPs have found it difficult to engage with consultants, and vice-versa.

Additionally, those seeking information on cancelled appointments have often, with some frustration been unsuccessful.

Possible actions...

Local Services

- Services would benefit from an organisational discussion, on how information and support can be addressed with a more systematic approach. Do patients have a named contact? How easily can they get in touch? If leaving a message,

will it be returned? If receiving a letter, does it contain a sufficient level of detail? It is not acceptable for patients to be left without information, or to find it difficult to obtain.

Borough

- On a wider strategic level, consensus and partnerships need to be developed. How do primary and acute care relationships contribute to delays?

How Can Healthwatch Help?

- We can work with services to ensure that at an organisational level, there is a more coherent approach in managing the effects of cancellations. This may include patient and carer focus groups and case studies, and learning more about the challenges of inter-service relationships. We can highlight good and bad practice.

7.4.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



7.5 Reducing Hesitancy to Attend Services

Our recommendation asserts that “Some patients have cancelled or delayed their own treatment and tests, citing fears around infection, PPE, or of ‘being a burden’ at this time.”

We said...

- Patients say they need written confirmation that services are safe and have adequate capacity - with messaging ideally coming directly from service providers. General positive messaging on a national, regional and local level will also help to restore confidence and uptake.
- Targeted campaigning by working with partners - offering information in multiple languages.

- Volunteer champions who can provide advice and information in those languages.
- Looking at why patients have cancelled their appointments and following up with them.

16 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- Positive story highlighting capacity and environment published on the website.
- Cancer Won't Wait article published on the website, to encourage patients to re-engage with services.
- Patient case study publicised.

Hounslow & Richmond Community Healthcare NHS Trust

- Children and young people services have developed child centred information around the wearing of PPE.

North West London (General)

- Targeted information for parents and carers.
- 'Help us Help You' campaign launched, encouraging and urging patients to attend services as normal.
- Guidance issued 'What to do when you attend your COVID-19 vaccine appointment'.

Primary Care

- GPs encouraged to reiterate that they're still adhering to social distancing and infection prevention and control - so patients 'shouldn't be afraid' to come in.
- Patients assured that GP surgeries are operating as normal over the Christmas period.
- Reassurance will be given in telephone messages and on websites as well.
- Patients can also sit and wait in their car.

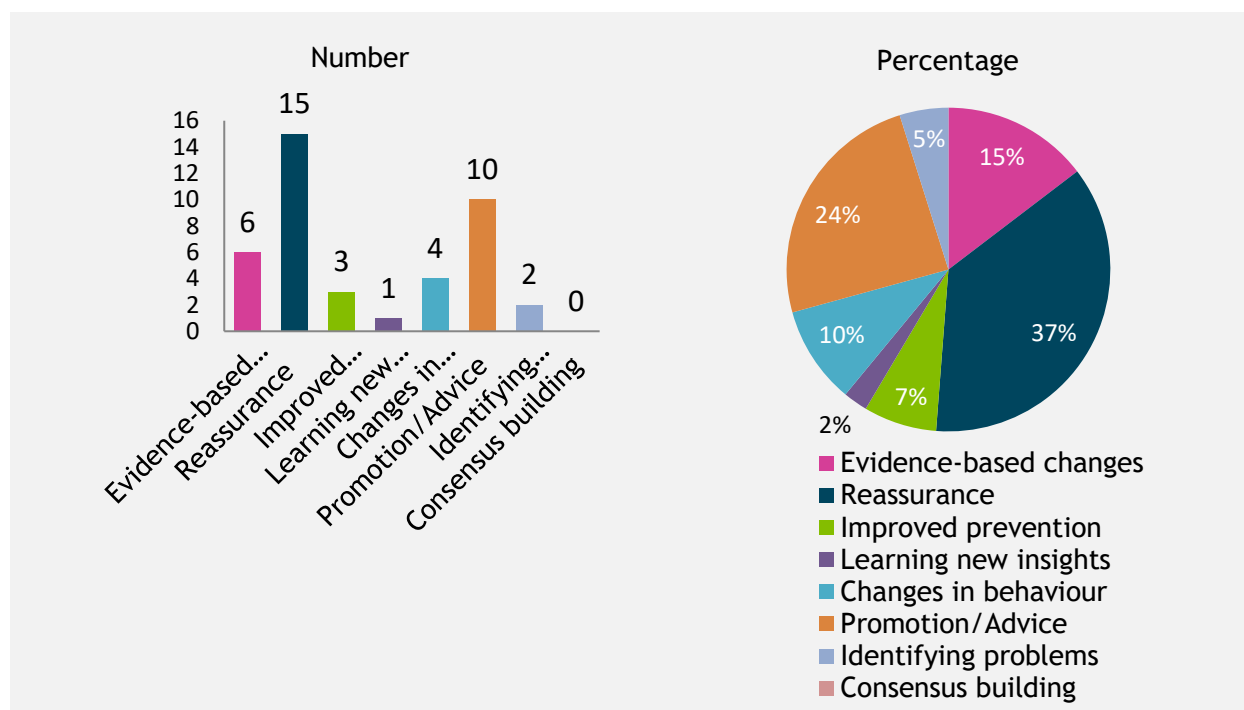
Public Health and Community Hubs

- In the early stages of (vaccine) rollout, one site, which did meet capacity and other requirements was considered too small by some of the patients, who voiced their concerns. This was responded to by relocating the service to much larger premises.
- A ramp was installed at the rear of the initial (vaccine) site, to facilitate one-way access - this was implemented by the Council 'literally overnight'.

West London NHS Trust

- All patients 'on the books' were contacted.

7.5.1 Impact Assessment of Outcomes



What has been done?

15 initiatives (37%) have a focus on reassurance to attend services, and there are varied examples of positive messaging.

Services, largely through their websites have sought to address concerns around capacity and hygiene, and patients needing potentially urgent treatment and tests (such as cancer patients) have been urged to attend as usual. Individual case studies have been promoted, and patients and carers have been able to influence message content.

Mental Health and GP services have been proactive in contacting patients, we also hear that when concerns have been raised, such as distancing or access at vaccination centres - quick action has been taken.

While we detect no initiatives on consensus building, we know that services have been working at a regional, and national level to promote campaigns.

What else can we do?

Overall, reassurance has been visible, and the input of patients and carers will have enhanced effectiveness.

Promotion needs to be constant and relevant, so campaigns should be frequently updated to reflect changing circumstances. Also, how do we reassure those who are not computer literate?

Possible actions...

Local Services

- Services should ensure that promotion campaigns are constant and relevant, and where appropriate developed in partnership with service users and carers.

How Can Healthwatch Help?

- We could attend marketing and communications meetings and forums, to check that local people have been consulted in developing local campaigns.
- We can help to recruit case studies - patients, families and carers with relevant service experience.

7.5.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



7.6 Improving Levels of Midwifery and Health Visiting Support

Our recommendation asserts that “It is reported that midwifery and health visiting services have been delayed or reduced. With mums self-isolating and not as able to call on the support of family and friends, we hear that the sudden lack of support can lead to isolation, anxiety and mental health problems.”

We said...

- While we recognise that services are reduced and home visiting difficult, this needs to be balanced with the needs of patients, some of whom are isolated and in difficult situations. We urge services to make contact, if possible, regularly with patients to check on needs and welfare.
- Specific support services for pregnant women and new mums e.g., hotline service.

4 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- The postnatal team has designed capabilities to provide new mothers with a Digital Postnatal Discharge Report. During the pandemic, mums and their babies are leaving hospital more quickly and are also less likely to have face-to-face contact with their community midwives or health visitors, so the new technology ensures that everyone caring for them has all the relevant information relating to ongoing postnatal care and concerns.

Hounslow & Richmond Community Healthcare NHS Trust

- Health Visiting service - prioritising home visits for families where there are safeguarding concerns and new birth visits.

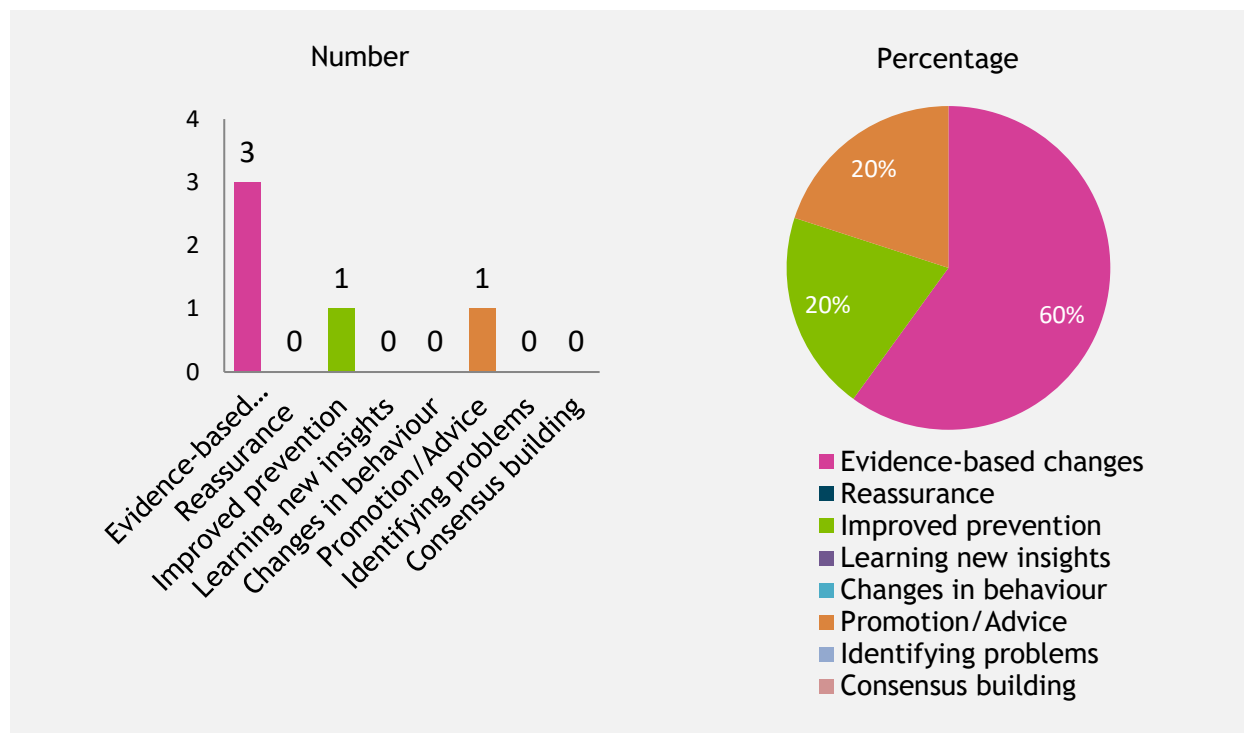
Public Health and Community Hubs

- Promotion of breast feeding and buddying support on the website.

West London NHS Trust

- A new pilot, the Maternity Trauma and Loss Care Service has launched in North West London to help women who are experiencing psychological difficulties following pregnancy loss, still birth and neonatal loss, as well as birth trauma and women who have a fear of childbirth (tokophobia).

7.6.1 Impact Assessment of Outcomes



What has been done?

During our research we have not had a specific discussion with midwifery or health visiting services.

Development of a 'Digital Postnatal Discharge Report' is encouraging, as it helps to ensure that mothers and families are not left without essential contact information. Prioritisation of home visits is also welcome, provided it does not significantly impact staffing, and quality as a whole.

What else can we do?

When asking other services, including primary care commissioners about midwifery or health visiting, none were able to update us on the general situation. This might indicate that partnership working needs to be strengthened, and awareness of the experience of mothers given more prominence.

Possible actions...

Borough

- At borough level, we need to ensure that all relevant organisations are attending maternity forums and committees.

Local Services

- Services should check that the right information is reaching the right people.

- When cascading information internally, how effective is this? Do all colleagues with a maternity remit receive minutes of meetings - in a timely way?

How Can Healthwatch Help?

- We can promote local maternity forums and committees, and supply our local intelligence.
- We can also help to build relationships between services, groups and patients.

7.6.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|-----------------|-----|----------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

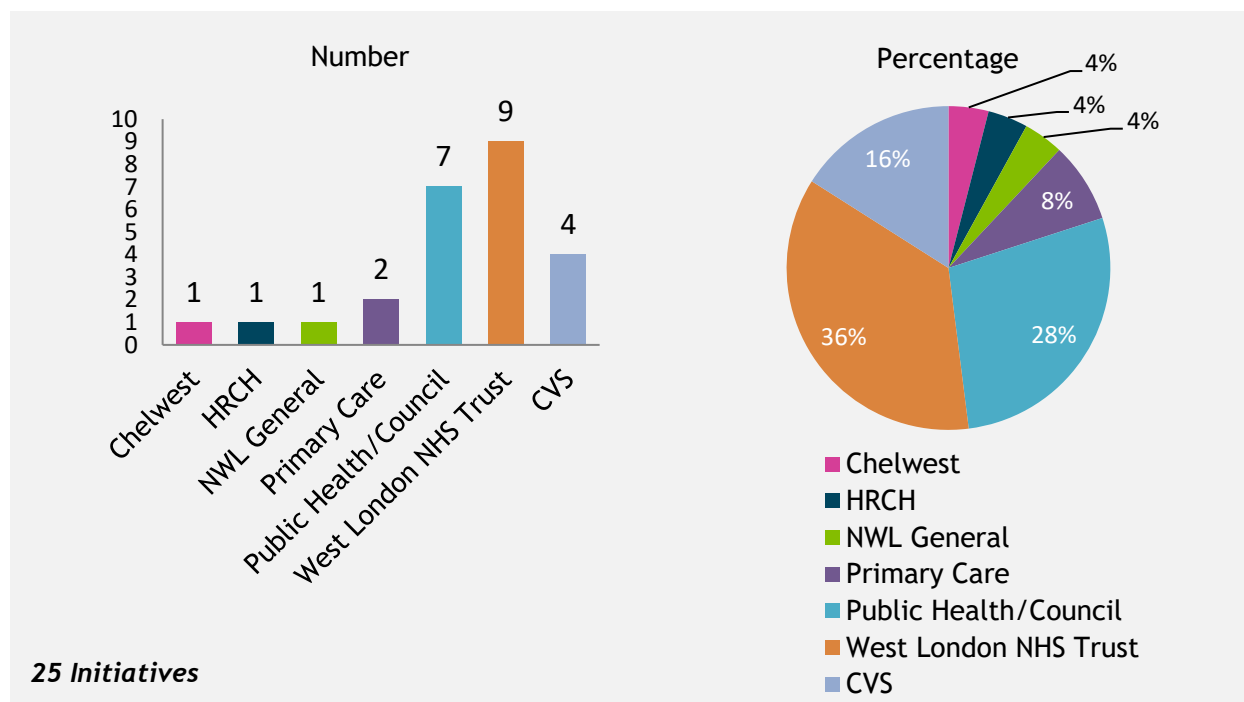
*Initiative
detected*



8. Mental Health and Wellbeing

Our reports made 3 recommendations on Mental Health and Wellbeing, including on the ability to work from home, access to activities, hobbies or routines, and support for those with known mental health issues.

8.1 Initiatives - Mental Health and Wellbeing



25 initiatives have been discovered, with the largest volumes originating from West London NHS Trust (36%) and Public Health/other council departments (28%).

8.2 Ability to Work from Home

Our recommendation asserts that “In many cases, those able to work from home experience a better work-life balance, with proven benefits for mental health and wellbeing.”

We said...

- We would urge employers to offer flexibility and choice on home working, where possible and appropriate. With proven benefits on mental health and wellbeing, this may equate to happier, and more productive staff.
- Local Authority can provide a leading example in offering flexibility and choice on home working. They can offer local guidance and information to smaller businesses.

6 initiatives have been detected, including the following.

You did...

Hounslow & Richmond Community Healthcare NHS Trust

- The Trust says “Ensuring we look after our staff helps them provide a better service to our patients. In recognition of this HRCH has been awarded the London Healthy Workplace Foundation Award by the Mayor of London.”

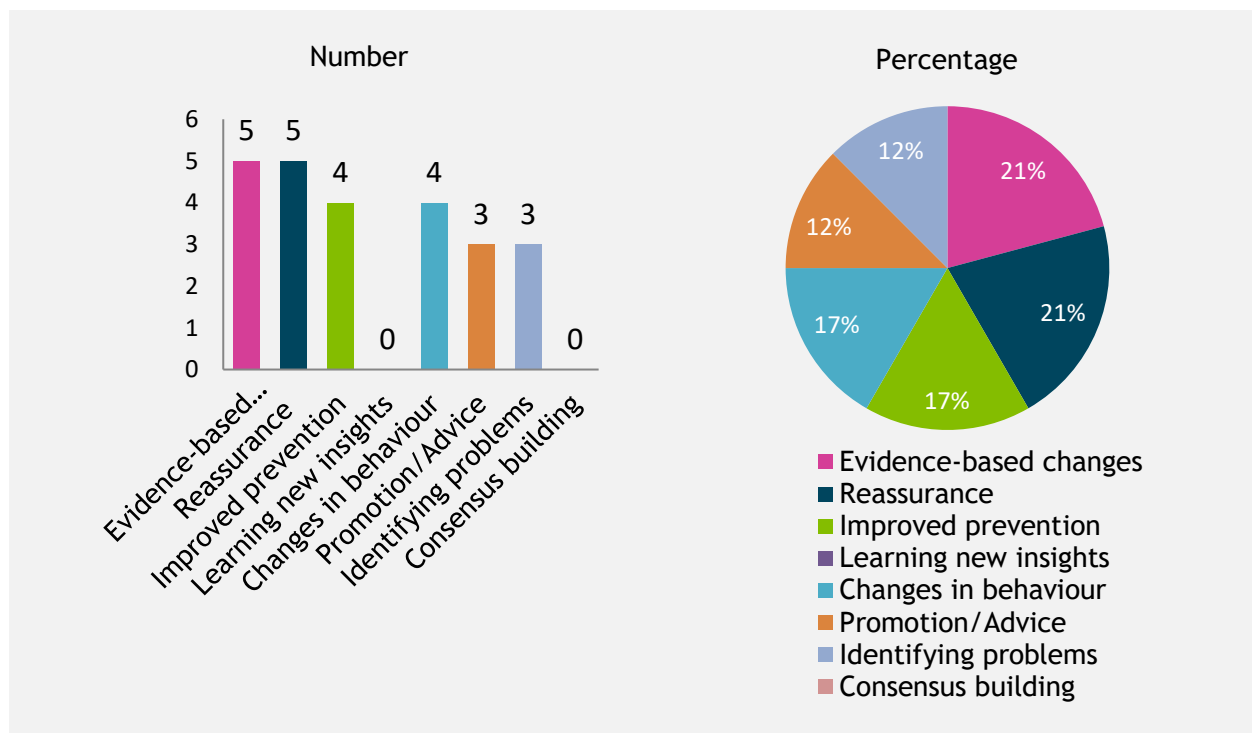
Public Health and Community Hubs

- The council operated a flexible working policy pre-pandemic, and continues to be open to supporting people’s choices around flexible working, via its new World of Work initiative.
- New staff survey also conducted to understand staff experience of the World of Work and how best to work going forward, results being analysed.
- London Borough of Hounslow (LBH) has a programme around staff mental health and wellbeing with additional staff training including on Mental Health First Aid (MHFA).

West London NHS Trust

- The Trust says “We have really focussed a lot on developing a modern and forward thinking policy around agile working, so actually even though the Covid era is coming to an end, we are still working with staff to think about flexibility to work at home.”

8.2.1 Impact Assessment of Outcomes



What has been done?

In the health, care and public sector we find that Hounslow as a borough is able to demonstrate a good level of flexibility on working arrangements. Home-working opportunities have existed before the pandemic, and are certain to continue.

We hear that one Trust has received the London Healthy Workplace Foundation Award. The local authority has developed a 'World of Work' initiative, and has recently surveyed staff to learn from experience.

What else can we do?

There are many good initiatives and policies in place - it would be interesting to have a borough-wide 'summit' so that services may learn more about developments at peer organisations.

Possible actions...

Borough

- A one-off 'Healthy Working' summit to celebrate and share local good practice.

How Can Healthwatch Help?

- Our newsletter can showcase examples of good practice.
- We can lead by example - by ensuring that staff continue to work remotely as appropriate.

8.2.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



8.3 Access to Activities, Hobbies or Routines

Our recommendation asserts that “Those with activities, hobbies or routines appear to be more resilient than those without.”

We said...

- If possible, the level of social prescribing should be increased and enhanced, to reach more residents and reduce isolation. While this will have a cost implication, the subsequent reduction in physical and mental health conditions may in fact benefit services in the longer to medium term.
- Encouraging BAME communities to speak about mental health openly in a safe environment. Possibly accessing existing groups to set up online workshops or telephone consultations about access to mental health support and an understanding of mental health.
- Offering community support through Mental Health groups and specialist services.
- Funding projects which benefit the local community.

3 initiatives have been detected, including the following.

You did...

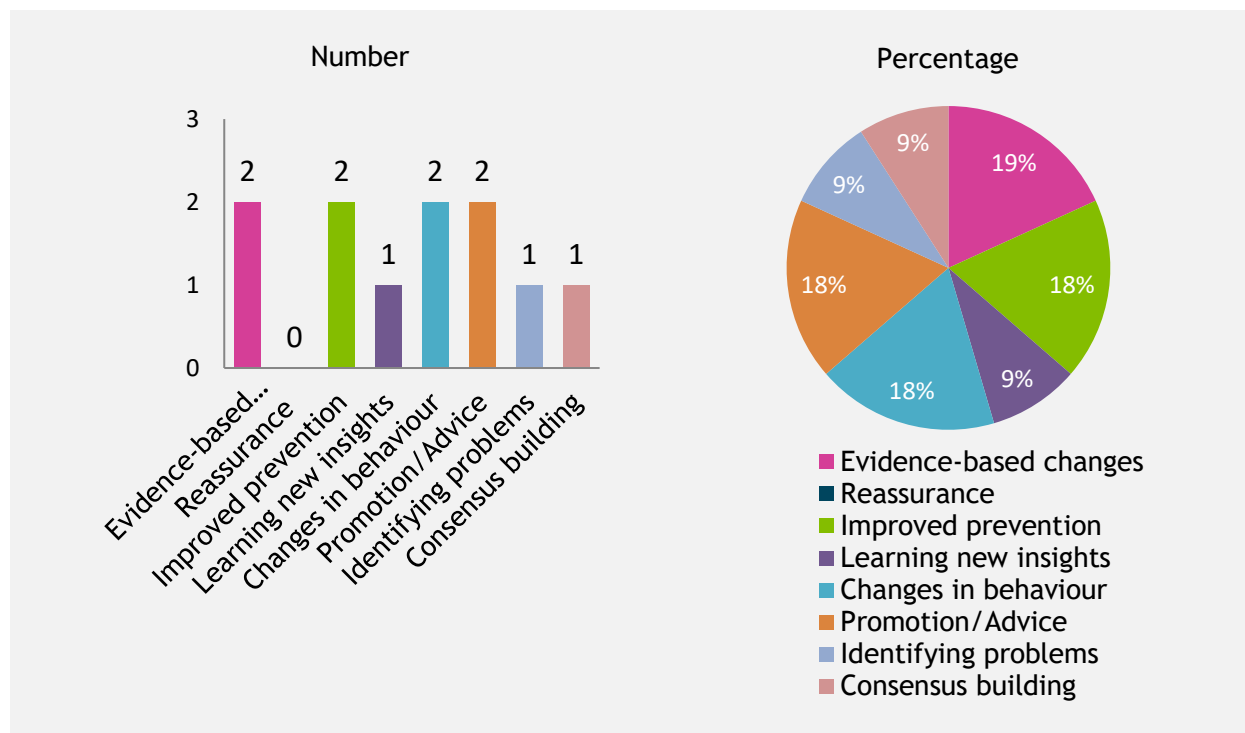
Public Health and Community Hubs

- Health Walks have resumed and some activities in Covid secure settings have started.
- Community Solutions will also continue to work with the Public Health Engagement Officers who have recruited 100+ Community Champions who help disseminate key information representing a range of Hounslow’s communities.

West London NHS Trust

- Patients have occupational therapy and services also have activity co-ordinators and others attached to them.

8.3.1 Impact Assessment of Outcomes



What has been done?

While few initiatives are detected, the network of 'Community Champions' which liaises with services, groups and communities is respected for building resilience, in part by encouraging uptake of local activities.

What else can we do?

It would be useful to learn more about the 'Community Champions' programme in particular and to hear directly from the volunteers - their insight on what works well, and challenges faced could improve the interface between services and community groups, and further strengthen integration.

Possible actions...

Borough

- At a borough level, gathering individual experiences of 'Community Champions' would enable us to better understand not only the programme, but interface between local services, groups and residents.

How Can Healthwatch Help?

- We can interview 'Community Champions' and report on their collective experience.

8.3.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

*Initiative
detected*



8.4 Support for those with known Mental Health Issues

Our recommendation asserts that “It is noted that those with existing mental health conditions will be much more impacted and at greater risk during the pandemic. Those in need of help don’t necessarily seek it.”

We said...

- We would urge services, GPs in particular, to identify those with a known mental health condition and check on welfare. Reviewing systems in place and regular communication with vulnerable patients.
- Family and friends have been identified as the biggest help and are the biggest connection. Schemes and projects that connect people and build on mutual aid groups.
- Low level support needed.

16 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- Establishment of Post-Covid Assessment Centre. The new centre brings together doctors, nurses, physiotherapists and occupational therapists to offer both physical and psychological assessments and refer patients to the right treatment and rehabilitation services. In practice, Post-Covid related mental health issues are less likely to be overlooked.

North West London (General)

- Psychological support for diabetes patients.
- Mental health screening for diabetes patients was established last year, screening has been 'stepped up' to a higher level this year in view of the pandemic.

Primary Care

- Free NHS physical health checks for people living with mental illness.
- During the pandemic GPs contacted patients on their vulnerable list (this includes people with mental health conditions) and they also went through other routes (such as family members) to check that people are okay.

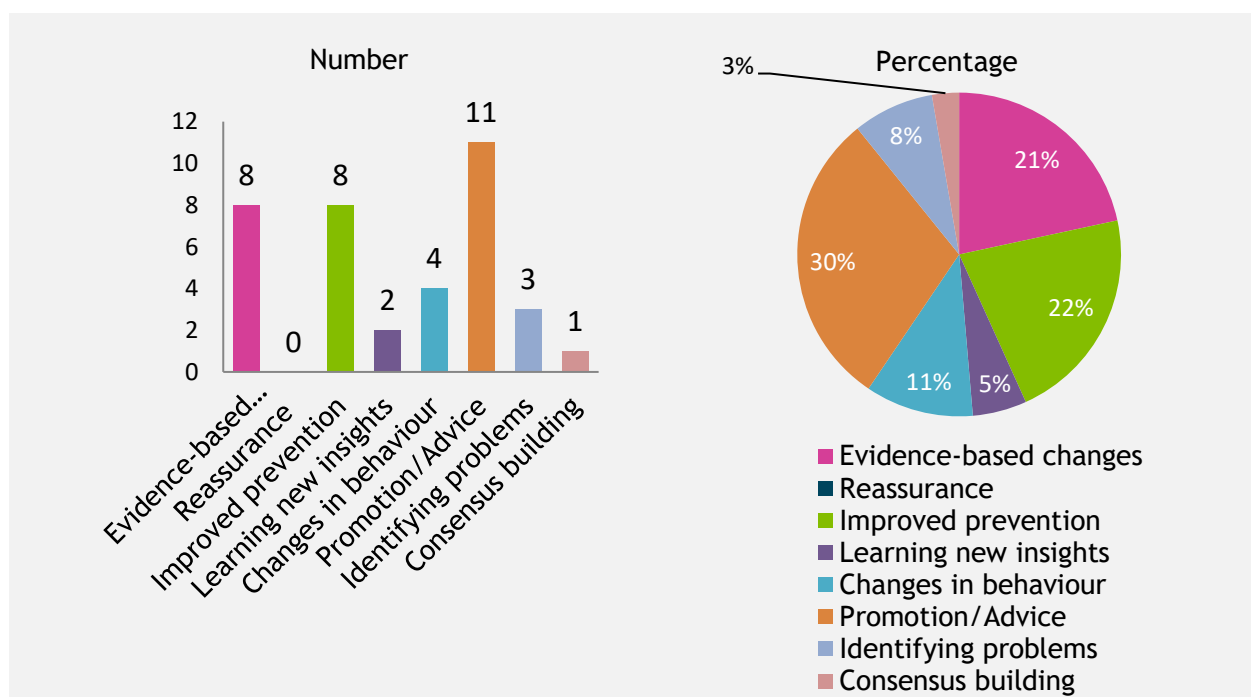
Public Health and Community Hubs

- The Community Solutions team are undergoing a series of training around mental health to support themselves and residents better.

West London NHS Trust

- The Trust has expanded its Early Intervention in Psychosis (EIP) services to now accept referrals for 14 to 65 year olds.
- Using nature in rehabilitation project launched.
- Speak CAMHS, a new specialist helpline, is available for anyone to discuss mental health concerns they have about children and young people, under 18.
- Free Talking Therapy publicised on the website.
- Project to ensure children with autism and learning disabilities get mental health care closer to home.
- All patients 'on the books' were contacted.

8.4.1 Impact Assessment of Outcomes



What has been done?

11 initiatives (30%) have a focus on promotion and advice, a good level of work is also demonstrated on improved prevention and evidence-based service changes.

GPs have contacted patients with known mental health conditions and issues, and good practice is highlighted - such as speaking with family members and carers, as appropriate to check on welfare.

We also hear that mental health services have got in touch with 'all patients on their books', with a RAG (Red, Amber, Green) system to prioritise those most in need. Furloughed staff were trained and deployed to assist.

The local authority is training staff in mental health awareness and support.

On service provision, a new specialist CAMHS (Child and Adolescent Mental Health Services) helpline has been launched and free talking therapy has been widely publicised. There is also a project to ensure some people get mental health care closer to home and community projects such as 'Using Nature in Rehabilitation' aim to help with prevention.

What else can we do?

None of the initiatives have an element of reassurance, this is partly because messaging is directly from service to user - without the use of case studies or comparative experiences.

Possible actions...

Local Services

- We know that services often promote positive case studies in their news articles - it may be useful if extracts were utilised within general advertising, so that the 'human story' is clearly visible. A purely 'clinical' message has limited appeal.

How Can Healthwatch Help?

- We can recruit case studies, and work with campaign organisers to make sure their voice is prominent, in encouraging others to step forward for treatment.

8.4.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

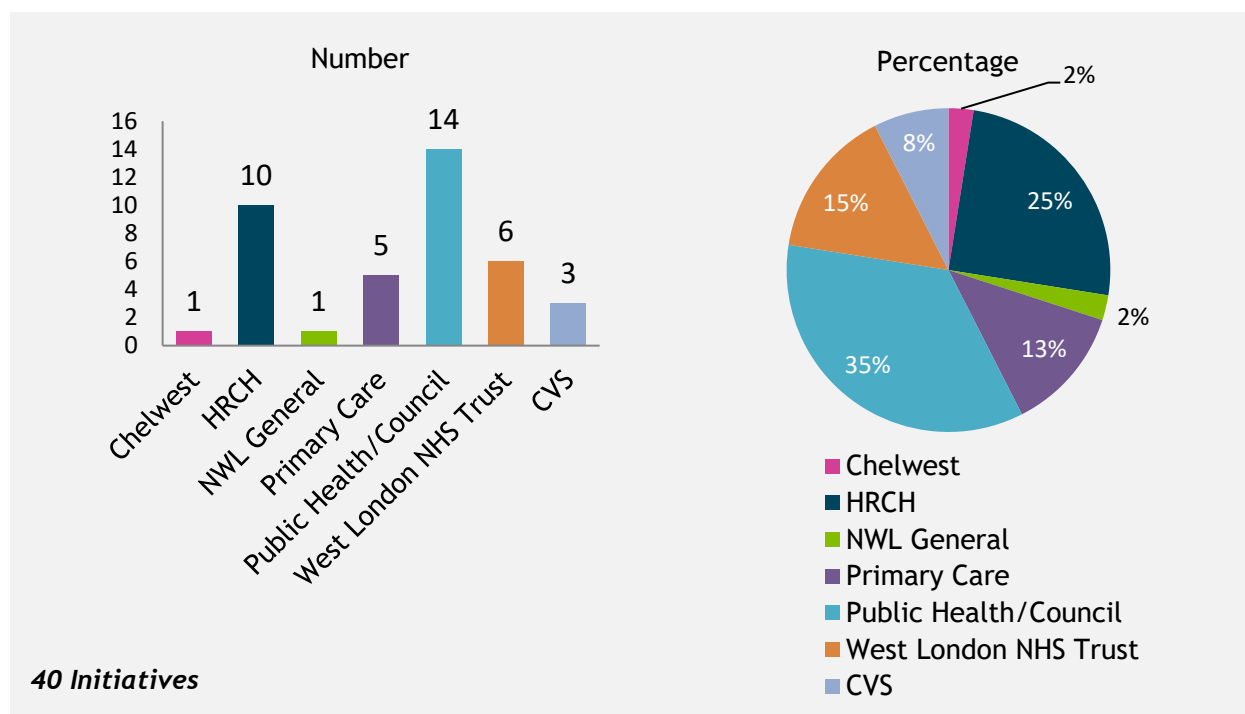
Initiative detected



9. Wider Community

Our reports made 5 recommendations on the Wider Community, including on social isolation, marginalisation experienced by certain communities, the ‘digital divide’ and accessible information.

9.1 Initiatives - Wider Community



40 initiatives have been discovered, with the largest volumes originating from Public Health/other council departments (35%) and Hounslow & Richmond Community Healthcare NHS Trust (25%).

9.2 Social Isolation

Our recommendation asserts that “The lockdown and shielding brings with it isolation on a large scale, perhaps unprecedented. The difficulty with social isolation is, there is no single organisation with ultimate responsibility - therefore it is crucial that agencies co-produce and work together, to find solutions.”

We said...

- Those completely isolated are extremely hard to reach, nevertheless it should be possible to offer a ‘friendly knock on the door’.
- Developing and expanding the Hounslow Community Hub.
- As there are social prescribers in GP surgeries perhaps a similar role could be created in the Local Authority (speaking different languages).
- Local Authority reviewing their databases and information on vulnerable people.

9 initiatives have been detected, including the following.

You did...

Hounslow & Richmond Community Healthcare NHS Trust

- A Positive Behaviour Support Practitioner for the Hounslow Adult Learning Disability Health Team has produced resources that are now featured on the national Social Care Institute for Excellence website.
- Befriending services, Hounslow Community Hub and Social Prescribing publicised on the website.

Primary Care

- A lot of work went on during lockdown in terms of identifying vulnerable people, conducting searches based on known conditions and circumstances. Social prescribers will be directed to people who are isolated or in particular need and there is joint working (such as information passed on from carers groups).

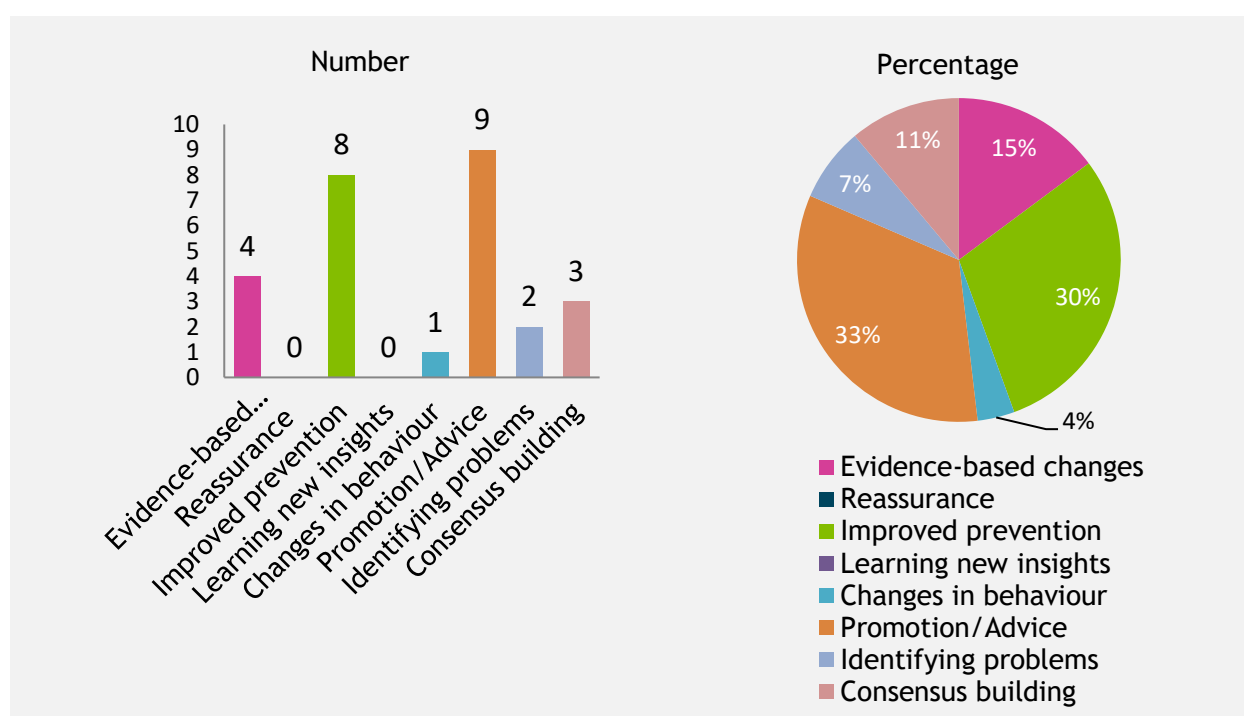
Public Health and Community Hubs

- Community Solutions is developing a digital inclusion offer to support those most isolated and not physically mobile/anxious about going out.
- Vaccination teams visited homeless hostels (such as St Mungos), supported living, mental health and learning disability accommodation.
- There is a long standing project called the Hounslow Wellbeing Network, an asset based community development project and is very much focussed on social isolation and community participation.

West London NHS Trust

- The Trust and the ‘Thriving Communities’ part of the local authority put together some grants, targeting specific groups, yielding specific projects.
- The Trust says “We have some new link worker roles that have recently been commissioned and recruited to, and the GPs have an expanded team of social prescribers, and local authority through their Community Solutions Project also have some officers and we’re working very closely with the organisations responsible to make sure people don’t get ‘bounced’ between the three, and it doesn’t matter which one of those three areas you enter, you get a similar type of support around access to community projects that might meet somebody’s needs.”

9.2.1 Impact Assessment of Outcomes



What has been done?

9 initiatives (33%) have a focus on promotion and advice, with a similar volume (30%) on improved prevention.

A well-established programme - the Hounslow Wellbeing Network, is ‘very much focused’ on social isolation and community participation. Befriending services are available. We also hear that Community Solutions is developing a digital inclusion offer to support those most isolated and not physically mobile.

A good level of co-ordination between services is highlighted - with residents contacting either their GP (social prescriber), community hub or mental health service ‘not bounced’ between the three. This is confirmed and reiterated at different interviews.

On the vaccine rollout, teams visited homeless hostels (such as St Mungos), supported living, mental health and learning disability accommodation.

What else can we do?

When looking at the outcome indicators, it is noticeable that there are no initiatives with a focus on learning new insights - this is interesting, as services should have a good level of knowledge on individual needs. While 2 projects help to identify problems and issues, this should be at a greater level for social isolation.

Possible actions...

Borough

- We may assume that 'Community Champions', Social Prescribers and services generally are aware of, and in contact with many isolated residents. It is also likely that broader surveys and other work has been done, to establish particular gaps and areas of need. The learning from this work ideally needs to be collated at borough level and circulated widely - to all local health and care services.

How Can Healthwatch Help?

- We can hold community listening events, to hear how health and care services may assist in reducing and alleviating social isolation.
- We can also encourage the flow of information - by networking and helping to forge new inter-service partnerships.

9.2.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



9.3 Experience of Marginalisation

Our recommendation asserts that “We hear that older people are feeling marginalised and ‘sidelined’, those from LGBT (Lesbian, Gay, Bisexual, and Transgender) communities are feeling vulnerable and isolated, and people from Black and Asian backgrounds are feeling particularly uncertain and at risk.”

We said...

- We would urge authorities and services to reinforce their links with identified groups, listen to any concerns and give meaningful reassurance and support.
- Ongoing communications with vulnerable groups of people should be established.
- Funding for local groups who are well established with these vulnerable groups.
- Reviewing funding strategies for the community.

8 initiatives have been detected, including the following.

You did...

Primary Care

- Older people have been prioritised for welfare checks.
- PCNs (Primary Care Networks) are doing work around ‘population health management’ - working with black men to increase uptake of the vaccine and health checks.
- Each PCN has a dedicated Public Health officer. Data and analytics are being used to identify ‘underserved’ groups - a pilot is underway to enhance detection and treatment of diabetes.
- Outcomes are also measured, to prioritise patients (for health checks) that live in the 20% most deprived communities. As part of this, people are encouraged to engage more with services, and to influence how services are offered.

Public Health and Community Hubs

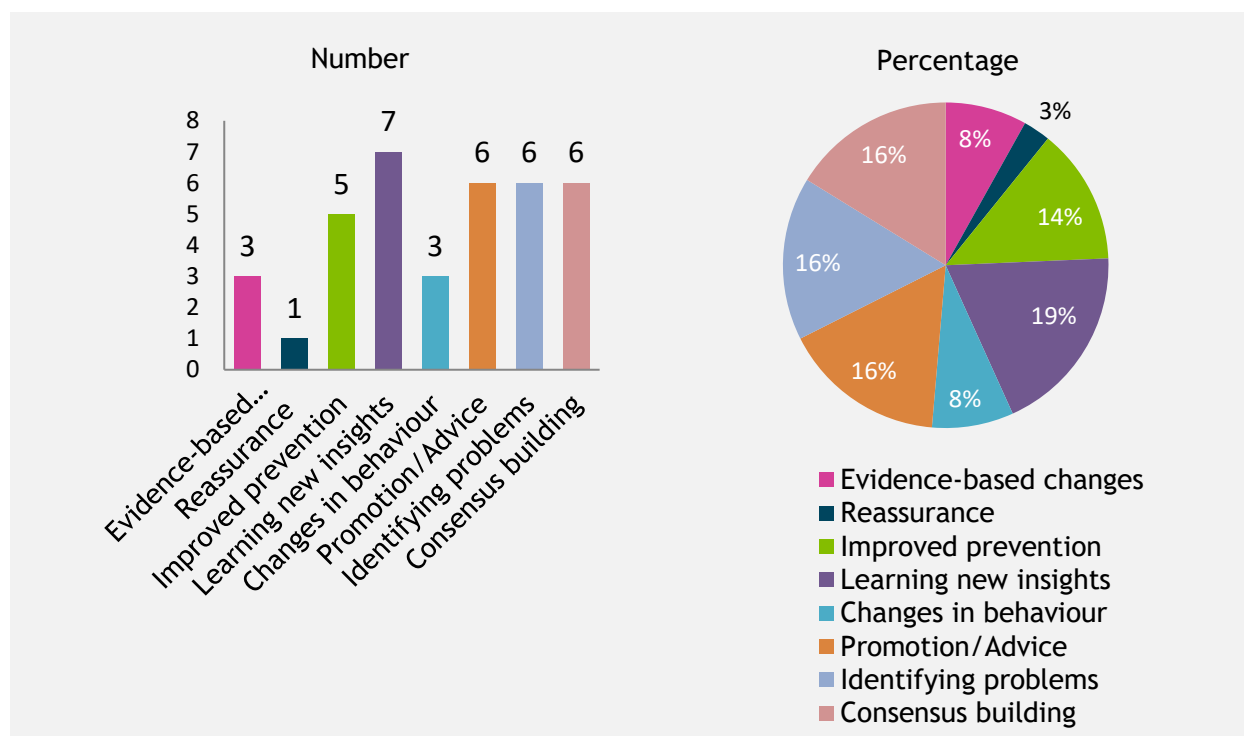
- The Community Hub was set up very quickly in response to the Covid-19 pandemic and so as the service is evolving to Community Solutions, are committed to ensuring that communities who have typically felt marginalised no longer feel like that and that we can reach them to provide support/guidance and information.

West London NHS Trust

- The Thriving Communities work that was jointly done with the local authority was very much focussed on increasing access to services in the community. “We worked with ethnic groups from diverse backgrounds as we know that

‘traditional’ mental health services aren’t always best suited to a group so we need to engage with those communities.”

9.3.1 Impact Assessment of Outcomes



What has been done?

A high degree of consensus building and partnership working is detected, with good levels of engagement, learning and promotion also demonstrated.

On services, older people have been prioritised for welfare checks. PCNs (Primary Care Networks) are doing work around ‘population health management’ - working with Black men to increase uptake of the vaccine and health checks. At the pop-up vaccine centres, people were able to talk with clinicians, to tackle hesitancy and help to alleviate anxieties.

Health outcomes are also measured, to prioritise patients (for health checks) that live in the 20% most deprived communities. As part of this, people are encouraged to engage more with services, and to influence how services are offered to them.

On the general community, the Community Hub was set up ‘very quickly’ in response to the Covid-19 pandemic and is ‘committed to ensuring that communities who have typically felt marginalised no longer feel like that’ and that ‘we can reach them to provide support/guidance and information’.

The Thriving Communities project has provided grants to community groups, with one example including an LGBT (Lesbian, Gay, Bisexual, and Transgender) group with a large proportion of ethnic minority members.

What else can we do?

When asking about initiatives specific to the Black and Asian community we hear that vaccination clinics have been located at mosques, with residents able to speak with clinicians and staff - about the vaccine and their health more generally. Local Black men have also been targeted for health checks, based on known levels of attendance.

Few other examples of specific work around Black and Asian communities are given.

Possible actions...

Borough

- At borough level, it would be beneficial to identify all health-related initiatives around the Black and Asian community, to aid learning and future co-ordination.

How Can Healthwatch Help?

- We can work with equalities leads, groups and committees, to assist in pooling intelligence and identifying priorities and outcomes.

9.3.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



9.4 The 'Digital Divide'

Our recommendation asserts that “While it is acknowledged that digital services are effective and resourceful, we feel there should always be an alternative. It is simply the fact that ‘one size fits all’ systems result in the marginalisation of disadvantaged and vulnerable groups.”

We said...

- Services should be offering telephone consultations where possible.
- Services should be offering a variety of options considering accessibility.

7 initiatives have been detected, including the following.

You did...

Hounslow & Richmond Community Healthcare NHS Trust

- Clinics which have been fully remote will become a mixture of remote/face-to-face going forward and will be driven by patient preference.

Primary Care

- Awareness training is being rolled-out for reception staff, to be sensitive towards accessibility needs, and to accommodate patients on an individual level.

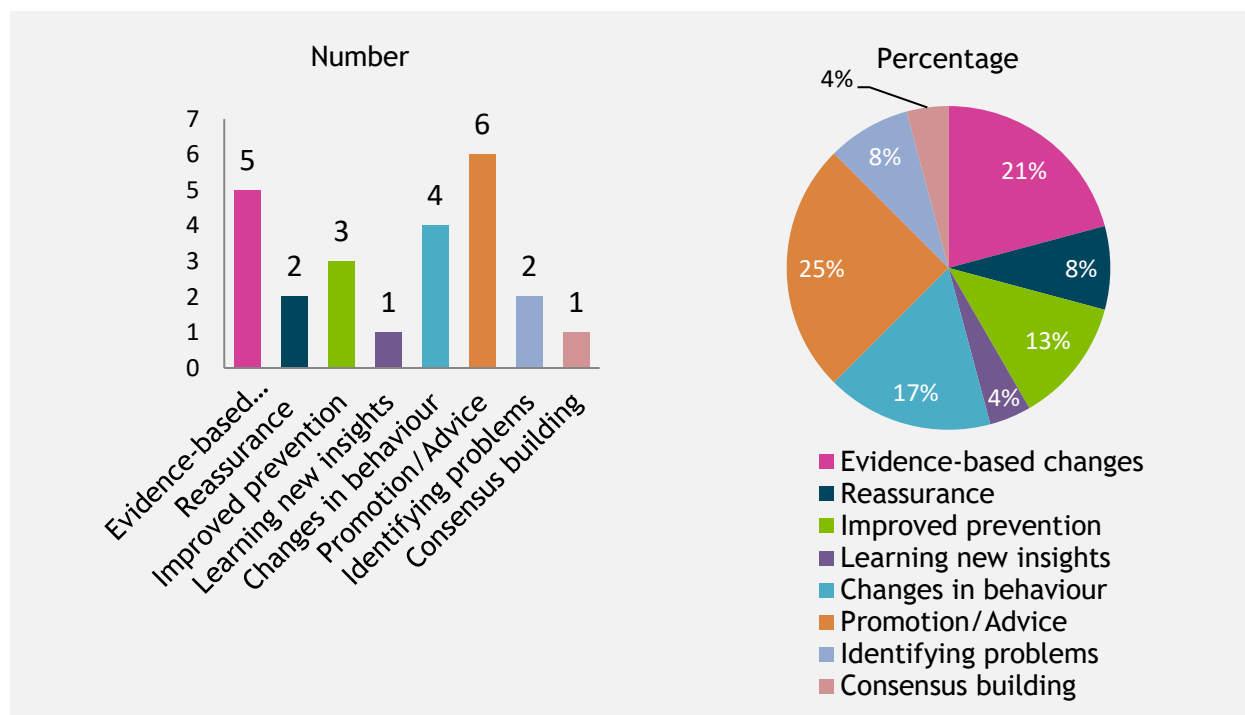
Public Health and Community Hubs

- The Community Solutions offer is available via email and phone, and moving to in-person.
- Hounslow Connect will help bring residents and partners closer to services and information/guidance if they choose to access digitally.
- Digital inclusion work is underway, Council pilot to distribute refurbished laptops through the community sector. The Digital Inclusion Group has an ethnicity workstream lead by the Head of Equalities.
- Commissioned services from Public Health all offer remote/telephone services and are now opening up Covid secure face to face services.

West London NHS Trust

- The Trust says “No matter what the service is, it’s about making sure choice will be available, both based around needs but also people’s preferences too.”

9.4.1 Impact Assessment of Outcomes



What has been done?

We detect good levels of promotion and advice, evidence-based changes to services, and changes in the way people access services.

Hospital and community-based services say they are moving back towards a more face-to-face offer, with options based on patient's preferences. At GP services this may be happening to a lesser extent, however reception staff, where possible are receiving awareness training - with a focus on being sensitive towards accessibility needs, and to accommodate patients on an 'individual level'.

Digital inclusion work is underway, with a local authority pilot to distribute refurbished laptops through the community sector. This initiative has an ethnicity workstream lead by the Head of Equalities.

What else can we do?

It is clear that the pandemic has accelerated the move to online access. As stated previously in the report, while GP practices are contracted to perform all forms of consultation (phone, video, face-to-face) and largely agree on the importance of choice, the vast majority of appointments are based on clinical need - few patients, when booking, are given options.

Possible actions...

GP Services

- It remains the case that digital platforms - including booking and consultation systems are not appropriate for all, yet we receive accounts of GP patients, on phoning, being advised to complete the online form. Not only is this inefficient and inflexible, but we also believe it is unnecessary. Should staff be encouraging, rather than instructing?

How Can Healthwatch Help?

- We are unsure if these issues are systemic, or training related. As stated previously in the report, we can work with PPGs and Practice Managers to ensure that experiences are heard, and considered.

9.4.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



9.5 Accessible Information

Our recommendation asserts that “A sizeable minority of people (14%) say that information is not accessible to them. Ideally, information intended for the public should observe accessibility protocols on formatting and presentation.”

We said...

- Any information considered to be especially important should also be offered in a range of accessible formats, as appropriate. Depending on the audience, use of plain wording, and translation into known community languages is also encouraged.
- 2,787 respondents said that they used WhatsApp. The Local Authority, HCCG and other providers should consider trialling some of these options.

15 initiatives have been detected, including the following.

You did...

Chelsea and Westminster Hospital NHS Foundation Trust

- Website accessibility tips and AIS (Accessible Information Standard) promoted.

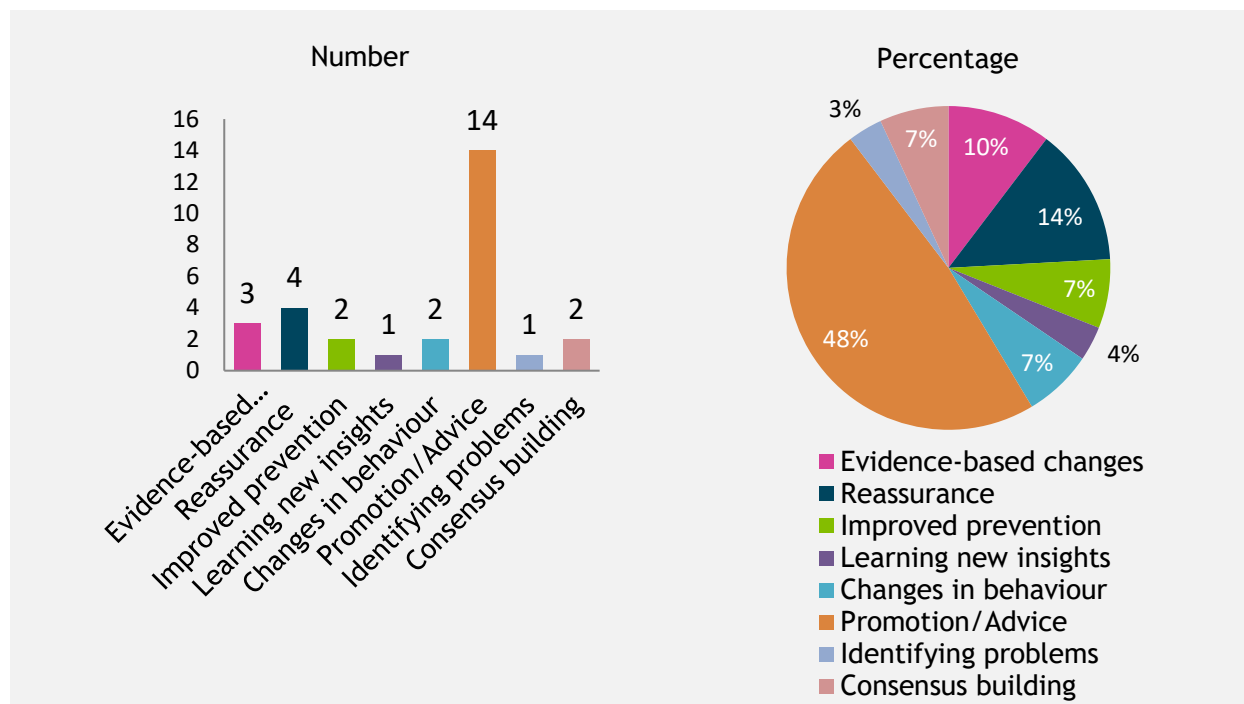
Hounslow & Richmond Community Healthcare NHS Trust

- The Trust has developed a new template for use across all its service lines that captures any additional communication needs (and how to meet those needs) because of a sensory disability.
- Information leaflets provided for services this includes a section written in the top 5 languages for the boroughs advising on how to obtain the leaflet in a language of their choice.
- Translation and interpreting service available for any language difficulties. Teams can book translators where required to attend appointments with patients.
- HRCH website uses a system called Browse Aloud which when text is highlighted can read aloud the text or translate the English text to any language.
- Children and young people services have developed the appointment letters for children and have created a video to support clinic attendance for children's therapy appointments.
- The Learning Disability team has developed Easy read materials for the end of life care pathway.
- Diabetes specialist dietitians provide structured education on weekday evenings and weekends as well as via digital options for those unable to access group education programmes. The service provides an Asian language speaking structured education class.

Public Health and Community Hubs

- The plan is for our leaflets to be printed in the top 5 most spoken languages in the borough.
- Accessible Covid-19 information provided in Easy Read, BSL (British Sign Language) and other languages.

9.5.1 Impact Assessment of Outcomes



What has been done?

14 initiatives (48%) have a focus on promotion and advice, and all outcomes are represented.

Many services point to the availability of translators - for remote or in-person appointments, it is also suggested that translation is 'increasingly easier' to facilitate. Documents of particular importance - such as public health guides are widely available in a range of languages and some Asian specific information sessions have been conducted.

Use of easy-read documents is also highlighted. Some hospital services are now capturing 'additional communication needs' (and outlining how to meet them).

Children and young people services have developed appointment letters for children and have created a video to support clinic attendance for children's therapy appointments.

What else can we do?

As noted previously in the report, we are unsure as to how extensive or consistent communications initiatives have been within organisations.

Possible actions...

Local Services

- Services would benefit from a general AIS review, to establish effectiveness and consistency across their organisation. Would an Occupational Therapist, or Diabetes Nurse know that the Trust has developed an Easy-Read guide, or produced a video?

Region

- At a North West London level, it would make sense to develop a repository of existing materials (literature and videos). If available, services would not have to 'start from scratch' and would be able to build on, and enhance what already exists.

How Can Healthwatch Help?

- When engaging with residents, we could ask a general question on communication needs - thereby accumulating a volume of evidence.

9.5.2 Outcomes by Service Provider

| | Chelwest | HRCH | Primary Care | LBH | West London |
|------------------------|----------|------|--------------|-----|-------------|
| Evidence-based changes | | | | | |
| Reassurance | | | | | |
| Improved prevention | | | | | |
| Learning new insights | | | | | |
| Changes in behaviour | | | | | |
| Promotion/Advice | | | | | |
| Identifying problems | | | | | |
| Consensus building | | | | | |

Initiative detected



10. Glossary of Terms

| | |
|-------|--|
| AIS | Accessible Information Standard |
| CAMHS | Child and Adolescent Mental Health Services |
| CCG | Clinical Commissioning Group |
| HRCH | Hounslow and Richmond Community Healthcare NHS Trust |
| LBH | London Borough of Hounslow |
| LGBT | Lesbian, Gay, Bisexual, and Transgender |
| PALS | Patient Advice and Liaison Service |
| PCN | Primary Care Network |
| PPG | Patient Participation Group |
| RAG | Red, Amber, Green |

11. Distribution and Comment

This report is available to the general public, and is shared with our statutory and community partners. Accessible formats are available.

If you have any comments on this report or wish to share your views and experiences, please contact us.

Healthwatch Hounslow
45 St. Mary's Road
Ealing
W5 5RG

Telephone: 020 3603 2438
Email: info@healthwatchhounslow.co.uk

“We work very closely with GP social prescribers and Community Solutions officers.

Regardless of which organisation a resident contacts, they get a similar type of support around access to community projects that might meet their needs.

They do not get ‘bounced’ around services.”

West London NHS Trust