

Action plan: CCG and Healthwatch response to the key points of feedback from local people in the Havering Healthwatch Report on the NHS Long Term Plan, 2019

	Key recommendations	Update/response
1.	That “social prescribing” be used more extensively than at present to encourage service users to make more use of non-medical facilities to support their health and wellbeing	<p>Primary Care Networks are in the process of recruiting Social Prescribers to each PCN in Havering. These Social Prescribers will work with community partners including GPs to ensure that local people are directed on to the right support services, first time, to meet their needs.</p> <p>We are also looking at potential new ways of working across Barking and Dagenham, Havering and Redbridge, whereby a greater emphasis is placed on ‘social’ rather than ‘medical’ solutions for local people. For example, if a person went to their GP with anxiety, they may be prescribed tablets etc. however, working more closely with a Social Prescriber, it may come to light that the root cause of their issue is debt, or worries about their housing situation. The right referral on to a service that can help them address the root cause of their issue, will have a significant impact on their wellbeing.</p> <p>We also discussed during our meeting with you that there is the opportunity to link with Local Authority and CVS schemes to embed promotion of preventative measures, for example, ‘Everyone Active’ is a free swimming initiative in the borough for those aged 60+. We will share this information with our colleagues who are working with the locality authority to embed more integrated working between health and care services with a focus on meeting the needs of local people.</p>
2.	That more information be made available as to where patients should go to arrange for stitches to be removed	<p>Stitch removal is not specifically referenced in the National Contract for Primary Medical Services (General Practice). GPs will review on a case by case basis based on their clinical judgement if a patient presents with a request to remove stitches, or refer on to wound services. There are currently two community locations which provide simple wound care services:</p> <ul style="list-style-type: none"> ▪ Harold Wood Polyclinic – open seven days a week, 8am-8pm, including bank holidays. Walk-in appointments only. ▪ South Hornchurch Health Centre -open Monday to Friday, 10am-2pm and 3pm-6.30pm. Closed on bank holidays. Bookable appointments only. <p>The CCGs Planned Care Team is in the process of reviewing Simple Wound Care provision with a view to potentially providing both bookable and walk in appointments for local people, and extended hours</p>

		<p>access. A public engagement exercise was underway ahead of re-procuring these services, however, this has been put on pause due to Purdah rules in relation to the General Election.</p> <p>We will feed back to our planned care colleagues the need to ensure that information is shared around the stitch removal services in Havering. The Primary Care team recently recirculated this information to GPs via the LMC.</p> <p>You noted during our discussion that post-operative information shared with local people from the acute trust states that local people should go to their GP, and that this should be reviewed to ensure the right information is given to local people so that they are able to access the right support, first time. We will pass this information on to our colleagues in the Planned Care team to progress.</p>
3.	<p>That the arrangements for blood-testing (phlebotomy) in Havering (and Barking & Dagenham and Redbridge) be reviewed to address service users' complaints about inadequate service (such as restricted numbers of tests or opening times (or both) and long waiting times before being seen)</p>	<p>BHR CCGs Planned Care team are in the process of reviewing the provision of Phlebotomy services across the patch, taking into account the feedback from Havering Healthwatch's report on engagement around the NHS Long Term Plan. This review will include exploring extended hours for blood testing, the number of sites, and potentially offering bookable appointments for some sites to improve the experience of local people, particularly those who are required to undertake a fasting blood test.</p>
4.	<p>That signposting and advisory services be reviewed to enable service users more easily to access</p>	<p>The feedback for action point 1 applies to this point, with Social Prescribers being employed by each Primary Care Network, local people will be referred on to a wider range of wellbeing services that will support them to stay well for longer.</p>

	information, not just about the health services they need to use but about broader health and wellbeing issues	
5.	That, in developing future health and wellbeing policies and individual service developments, the underlying theme be the need to maintain individual health and personal independence for so long as possible and practicable	Health and Care leads from across Barking and Dagenham, Havering and Redbridge, have been working for a number of years, through the development of an Integrated Care System, to achieve their key vision to: “To accelerate improved health and wellbeing outcomes for the people of Barking & Dagenham, Havering and Redbridge and deliver sustainable provision of high quality health and wellbeing services” . What this means in practice is that we want to work together to shape services around the needs and aspirations of local people, supporting them to remain healthy and independent for as long as possible. BHR CCGs have a number of transformation programmes, and a financial recovery plan that aims to
6.	That the arrangements for patients undergoing cancer treatment who attend the Emergency (A&E) Department at Queen’s Hospital for unrelated reasons be reviewed to ensure that they are accorded the priority of	<p>You noted that for points 6 and 7, Healthwatch Havering met with Chris Bown from BHRUT to discuss Cancer Treatment and the accommodation for cancer treatment. You used this discussion to raise with BHRUT your concerns that cancer services were moved from KGH to Queens Hospital at too short notice and that there was poor communication around the process. You were pleased with the discussion with Chris, and the assurances that he gave you that BHRUT had listened to this feedback, would ensure that this did not happen again for other services, and that BHRUT would ensure that the accommodation at Queens for cancer treatment is in line with the feedback from local people.</p> <p>We will also share this feedback with the CCG lead for cancer.</p>

	treatment that their condition requires	
7.	That the accommodation used for cancer treatment at Queen's Hospital be reviewed to ensure that the patient experience is not adversely affected by overcrowding, lack of privacy or inability to enjoy natural day light	
8.	That, in developing online consultations and other, non-traditional forms of contact between patients and healthcare professionals, the needs of those who prefer to deal with HCPs face-to-face be acknowledged and honoured	Health and Care partners in Havering recognise that although digital solutions may be the preferred option for some local people and can have a positive impact on the delivery of some services, that it is essential that we meet the needs and preferences of all local people, and that face to face contact with Health Care Professionals will continue to be required going forward.