

Healthwatch Brent work priority areas 2019-20

Priority areas	Why is this important to Brent?	Desired outcome
Personal Care in hospitals 2 Part report - Oral Health - Personal Care (incl. Use of day room)	This priority will be delivered in two parts: Oral hygiene support and personal care support Oral hygiene for adult inpatients highlighted by NHS Mouth Care Matters document Mouth Care Matters is a Health Education England funded project to improve oral health of adults in hospitals. The initiative aims to upskill nursing staff and allied health professionals so they can support vulnerable patients with mouthcare. The North West London Hospital Trust Recommends you bring your own toothbrush and paste with you for your stay in hospital. Mouth Care Matters Pack has a screening sheet for patients to ensure they are receiving mouth care if required. Mouth Care links to a number of other Trust policies: Privacy and Dignity Policy Dementia Policy The Mental Capacity Act Supporting Staff and patients language and communication needs policy The Management of Dysphagia in Adult Inpatients (drinking, swallowing, eating problem). Resident feedback Learning Disabled user- oral hygiene in hospital not managed. Nurses not encouraging teeth brushing for in patients and not providing tooth brush and paste if they don't bring their own Stroke Ward Northwick Park -One carer gave feedback that staff need training when it comes to mouth care when they are throbbing and cleaning the mouth, the patient eats through a tube and leaves a lot of white marks on the tongue and around the mouth which does not always get cleaned. Personal Care in Hospital The NHS Constitution promotes 'high quality care for all '	Work to be completed by August and to inform the Health and Care Transformation Programme



The NICE Guidance for Patient and Service User Care suggests ensuring patients basic needs are met is a vital part of good quality care. Patients should receive the support to be as independent as possible and help you carry out everyday tasks particularly if you are in hospital.

The guidance outlines help with basic needs includes 'personal care' for example relating to continence, personal hygiene and comfort and should be asked regularly about what support you need. You should receive the support when you need it and with your privacy respected.

(Patient experience in adult NHS services: improving the experience of care for people using adult NHS services. Clinical guideline CG138 2012. https://www.nice.org.uk/guidance/cg138/ifp/chapter/Help-with-basic-needs)

The patient experiences document is published by the National Clinical Guideline Centre

Personal care as outlined above is one of the statements in the quality standard produced by NICE – set of 14

statements describing high quality care for patients in the NHS and is one of the recommendations (16) of the

NCGC document and emphasises meeting their personal needs at the time of asking and ensuring maximum

privacy in doing so.

This project will look into the personal care aspect of hospital stays. Looking at patient experience of basic personal care in terms of hygiene (is it regular and happy with experience) continence (regular support, not waiting for assistance, experience with it) and comfort (staff ensure that positions are changes regularly, temperature, getting use of the day room if possible). A similar approach has been taken on current visits to hospital wards with a focus on personal care including washing and skin care (ie dry areas), nail clipping, care for urinary incontinence, use of day room) for example.



Improving the feedback loop with patients regarding GP access and current plans around GP practices.

The most common issue patients tell us is their perception that it takes 2 to 3 weeks to get a GP appointment.

We know that Brent CCG advertises Hub appointments offering an appointment within a few days. http://brentccg.nhs.uk/en/gps/gp-access-hubs.

Healthwatch Brent made a public commitment to work with the CCG to improve communication with patients which was shared with the Health and Wellbeing Board in July 2018.

Follow up visits Part 2

As part of this commitment we undertook the following:

• In October 2018 we asked 96 Brent residents at a health awareness event "**Do you find it easy to make a GP appointment?"** We asked for an explanation of their response.

Over 50% said they did find that appointments are more easily available contradicting popular perception. However, around a third of the remaining patients reported delays in getting an appointment. On this basis, we decided to conduct a more specific survey in March 2019 to assess patient experience and awareness of self-care and options other than a GP appointment. HWB staff and volunteers visited 20 GP surgeries in the Kingsbury and Willesden locality in Brent in March 2019. The survey was completed by 120 patients. The report findings and recommendations are summarised below:

- 1. The general and widespread lack of awareness among patients about the GP Access Hub appointments demonstrates the need for more information to be displayed in a prominent place in GP practices and in other public places in Brent e.g. Libraries. [75 %of patients (90 patients) did not know about GP Access Hub appointments]
 - a. Notice boards in the waiting room display clear and organised and ordered information about self-care and alternatives to GP appointments
- 2. CCG and GP practices to provide more information to patients about how to access GP appointments online may take the pressure off receptionists as well as other health practitioners.

HWB
acknowledges
that the majority
of patients do see
a GP within a few
days or up to a
week, but that
there is still work
to do to reduce
the smaller
number of
patients who do
still need to wait
over 2 weeks.

Work to be completed by September.

Aim to inform the CCG led primary care transformation programme.



	 GP practice managers to remind their staff that many patients still do not understand the increased offer. [The long wait in queues or on the phone were cited as one of the major causes of difficulty in accessing the GP services.] Brent CCG to feedback to NHS 111 service that posters clarifying difference between the 999/112 and the 111/101 numbers would be helpful to the general public. Brent CCG to compare the information provided in the HWB report with its own data. Brent CCG and the GP Networks/Localities to respond to these recommendations in writing. Healthwatch Brent to repeat this survey in 6-months working with Brent CCG and GP Networks and localities to facilitate access to GP practices as a way of tracking progress of patient awareness. 	
Increasing awareness about cancer screening and treatment options for people with a learning disability	Brent Community and Wellbeing Scrutiny Committee received a report with the following statistics: Patients with a learning disability (LD) have lower rates of cancer screening, most notably in cervical cancer screening compared to women without a LD - only 31% reported having had a smear test compared to 73% of women without LD. 1 in 2 eligible women with a learning disability received breast cancer screening compared to 2 in 3 eligible women without a learning disability. Brent carers have raised concerns about the access of breast cancer screening to women with LD, believing that the complexity of their health issues means that their bodies age differently and that this is not taken into consideration when developing screening programmes and impacts on their eligibility because of an emphasis on age as an entry factor into the screening programme.	Increase awareness amongst LD people about cancer screenings and to enable carers to accompany people with LD into screening appointments. Inform the Health and Care Partnership



The Brent suicide audit 2017 highlighted some differences to the national nicture on suicide	Identify the
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Brent had between 7 and 9 suicide cases per 100 000 people in Brent compared to the national average of	faith
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3.5 cases/100,00 people.	access
In 2017 – six deaths were recorded as 'death by suicide'. In summary:	information and
·	advice about
·	suicide
·	prevention and
	use this to inform
	the borough's
· · ·	Suicide
	Prevention
picture.	Strategy.
	Strategy.
under-estimate. We have also spoken with local organisations about the support available.	
Adult B Safeguarding Adults Review 2018 described disturbing life experiences of a Brent resident living with	Capture the
a learning disability and autism in Brent. She was the recipient of care services but was not protected from	voices of this
,	community and
	the efficacy and
	effectiveness of
The Transforming Care Programme also requires a range of changes to services for people with a learning	the Health
	passports to
, , , , , , , , , , , , , , , , , , , ,	access public
	services more
	easily and feed
	this into the
	Health and Care
	Transformation
	Programme
	The Brent suicide audit 2017 highlighted some differences to the national picture on suicide. Brent had between 7 and 9 suicide cases per 100,000 people in Brent compared to the national average of 9.9 cases/100,00 people. In 2017 – six deaths were recorded as 'death by suicide'. In summary: • 5 had been born outside the UK – (1 in Africa and 4 in Eastern Europe). • only 1 had been known to adult mental health services • 4/6 were aged between 20-35 years and 2/6 were aged over 60 • All 6 were in employment • 50% had contact with primary care three months prior to death • 4/6 – the death was by hanging/strangulation, 2/6 died through self-poisoning reflecting the national picture. Also, in 2017, there were 170 emergency hospital admissions for intentional self-harm. We believe this is an under-estimate. We have also spoken with local organisations about the support available. Adult B Safeguarding Adults Review 2018 described disturbing life experiences of a Brent resident living with a learning disability and autism in Brent. She was the recipient of care services but was not protected from serious abuse. Part of the learning showed that Brent Statutory Services do not effectively record the quality of lives of such people, only the services they receive. The Transforming Care Programme also requires a range of changes to services for people with a learning disability. At the 2019 Community Wellbeing Scrutiny Committee councillors were keen to hear more of the direct voices of people using these services.



Awareness and use of Health Help Now app	This is a two-part programme based on the following understanding: Brent CCG is promoting the Health Help Now App – the app is seen as a way of reducing the bottleneck in primary care by directing people to self-care and is available to people across NW London. The app will enable residents to find the right health services, medical advice and trusted information as well as access to approved medical advice and see the closest services to your current location to get help	This information will feed into the NHS LTP on digital solutions for accessing health services.
	 Current features NHS Choices health advice articles contact information for local NHS, council and approved voluntary services hospital appointment booking service (e-RS), to be used after you have been referred by your GP GP online to manage your GP appointments, get repeat prescriptions and view your medical records *'Your mental health' section has helpful advice and information on a variety of mental health conditions. The 'mood tool' asks basic questions about your mood and how you feel and will signpost you to relevant services based on your responses. web links to useful websites such as your local council and Know diabetes asthma/COPD section provides helpful advice articles and information on how to use your inhaler. 	
	We will collect the views of Brent residents about the app both via a survey and through focus groups	D- 4 - C
Enter and View Programme	We will visit a range of supported living care homes offering services to people with mental health conditions, learning disabilities, sensory impairments and physical disabilities. We are working closely with adult social care.	Part of Healthwatch's statutory functions
Integrated Care Pathways	Explore possible projects with the ICP Board and New Models of Care sub-group relating to a number of areas including: Anorexia / eating disorders Experience of Cardiovascular services NHS LTP priorities Digital Fluency	