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# Annual Report 2015/16

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**Your  
Voice  
Counts**



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## A catalyst for change

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# Message from our Chairman



**Welcome to the third Annual Report from Healthwatch Hillingdon. I am delighted to be able to report that we have continued our excellent progress during 2015/16 in helping to achieve real improvements in local health and social care services, although there is much still to be done.**

Our aim is to give Hillingdon residents a voice to influence local change and also to continue to highlight those services which fail to meet expectations.

I am particularly pleased that we are able to highlight a number of areas where the organisations who run our local Health and care services have acted upon our representations and made improvements to services as a result. One of our main duties is to listen to residents of Hillingdon so that we understand the things that are most important to you and the extent to which services are currently meeting your needs or expectations. We use this information to illustrate where patients and service users

want to see changes, provide as much evidence as we can to support the need for improvement and we then monitor progress being made by the appropriate agency. We are not always successful in obtaining the changes wanted by residents but we will continue to represent your views and needs.

Examples of areas where HW has been instrumental in achieving change are set out in the report and I will not repeat them here, but one area that does warrant special mention is services for children and young people with mental health issues. This is a very common problem for many families in the borough and we have been able to show that local services are often quite poor and our young people haven't been getting the support they need in their formative years.

This is also a national issue but we do believe that local services can be improved and we are still waiting to see tangible improvements in Health outcomes for young people in our area and we will continue to watch for progress.

Our overriding priority for the future is to continue our successful work in helping to obtain local improvements in services. In addition to following up issues in any service, we are doing some work in two specific areas.

First of all, in maternity Hillingdon is having to increase its activity considerably due to maternity units in other parts of North West London closing down. We are therefore

looking at the experience of Mothers using Maternity in Hillingdon to obtain a view about the quality of service. We will also be looking at the experience of people who are discharged from hospital, particularly older people, to see what improvements may be needed.

We shall also continue to examine bigger changes being proposed to the way in which health and care services are delivered in order to protect resident's interests.

Finally, I would like to offer a huge thank you to Graham Hawkes and his team as well as Board Members for their hard work, effort and support which has resulted in a successful year for Healthwatch and a final year for me, as my term has now closed.

**Jeff Maslen**  
**Chairman**  
**Healthwatch Hillingdon**

# Message from our Chief Executive



**I hope you will agree as you read our 2015-16 Annual Report that the Healthwatch Hillingdon team should be proud of their achievements and pleased with the outcomes of their work.**

As we prepared the annual report what really struck me this year was how much the team had achieved. Sometimes it is not until you take time out of your busy daily schedule to look back, that you really appreciate just how far you have progressed.

It has been a positive year and I thank everybody who has contributed to Healthwatch Hillingdon. For the residents who have spoken to us, the volunteers whose valuable time is so appreciated, my dedicated staff for their hard work and the Board for all their support again this year. It has been a real team effort.

As Jeff steps down as Chairman, I would like to express my sincere gratitude to him and acknowledge his contributions during his term of office.

As Chairman, and founding member of the Board, Jeff has been at Healthwatch Hillingdon from its inception. Through his leadership, dedication and effort over the last 3 years, Healthwatch Hillingdon has developed into a strong, well respected organisation within Hillingdon and the wider Healthwatch Network.

Jeff should be proud in the knowledge that he leaves us on a firm foundation. He will be deeply missed and I wish him all the best for the future.

Vice Chair, Stephen Otter, becomes the Acting Chair whilst Jeff's replacement is recruited. I look forward to continuing to work closely with Stephen in the months ahead.

Board Member, Turkey Mahmoud, also stepped down from the Board at the end of his term in March. I am really grateful for all his help and support over the last 3 years and I am so pleased he has decided to continue his Enter & View work as a volunteer.

Success can be measured in many different ways and as you read our report you will determine for yourself whether by your standards this has been a successful year for Healthwatch Hillingdon.

Although it is important for us to meet our performance targets, success for me is all about how we have served our residents.

**“Success is all about how we have served our residents”**

I am so pleased that this report outlines the many ways in which we have helped people and made a real difference in their lives. With contacts to our information, advice and signposting service more than doubling, to 1100 people in the last year, we really hope this rise continues and we have the opportunity to help so many more.

One of the most pleasing aspects of our work this year is the focus we have continued to bring upon children’s mental health in the borough. With £2.5 million<sup>1</sup> being invested in 4 new services over the next 5 years, this has been a real ‘catalyst for change’.

**“ With £2.5 million being invested in 4 new services over the next 5 years, this has been a real ‘catalyst for change’ ”**

We have come a long way since I sat down with 5 parents nearly 3 years ago and they told me about how Hillingdon’s services were letting their children down. We have more work to do and I certainly will not rest until I know the new investment has improved services and the mental wellbeing of children in our borough.

As we look to the future I know we will have to work hard to surpass this year’s achievements. One thing I can promise you, is the team will continue to focus on our residents and give their best to help in every situation.

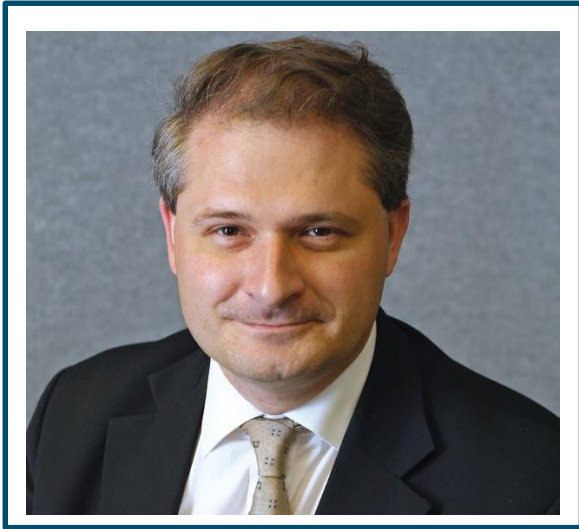
Finally, I would like to ask for your help. Our work has proved that armed with the evidence of your lived experience of care, we can improve services.

We need to hear from you, your family and your neighbours. Tell us your story. Together we can make a difference in our communities.

**Graham Hawkes**  
**Chief Executive Officer**  
**Healthwatch Hillingdon**

1. <https://www.england.nhs.uk/wp-content/uploads/2015/07/annex-4-transformation-plan-guidance-ccg.pdf>

# Forward-Councillor Philip Corthorne



I'm delighted to be able to congratulate Healthwatch Hillingdon once again for the work it has undertaken on behalf of our residents over the last year and as set out in this annual report.

Our partnership working has gone from strength to strength and Healthwatch Hillingdon has proven itself as a valuable partner and as an integral part of our Health and Wellbeing Board, representing the voice of consumers as we seek to improve health and social care standards.

I offer particular thanks to Healthwatch's outgoing chairman, Jeff Maslen, who has steered Healthwatch expertly through its start up to the established partner it is today. In addition, I am grateful for the Healthwatch team and all the volunteers, trustees and residents who have

helped to deliver the impressive programme set out in this report.

As ever the future holds uncertainty, we are working together on a five year Sustainability and Transformation plan which promises much, but crucially, needs to deliver benefits locally. During this unprecedented period of change and it is reassuring to know that we have the "consumer voice" at the heart of our plans.

Cllr Philip Corthorne MCIPD  
Cabinet Member for Social Services,  
Housing, Health and Wellbeing  
London Borough of Hillingdon



HILLINGDON  
LONDON

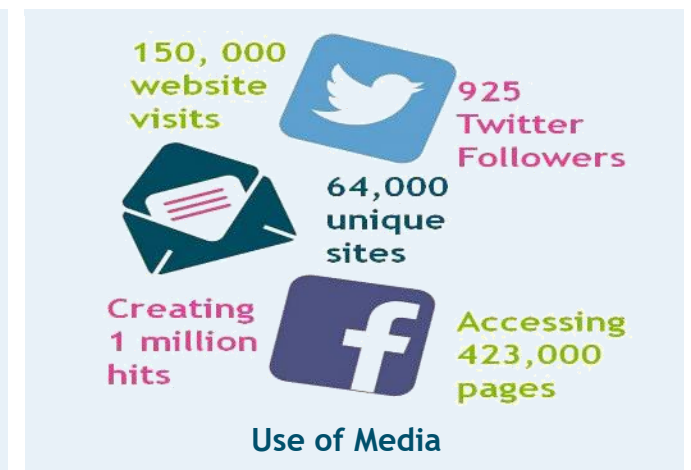


# The year at a glance

## Listening to people who use health and social care



## Giving people advice and information



## Representation



## Our People - Volunteering



# Who we are

Healthwatch Hillingdon is completely separate from the NHS and the local authority.

We represent the views of everyone who uses health and social care services in the London Borough of Hillingdon. We make sure that these views are gathered, analysed and acted upon, making services better now and in the future.

We exist to make health and social care services work for the people who use them.

We monitor local services to ensure they reflect the needs of the community, and where necessary, use statutory powers to hold those services to account.

Everything we say and do is informed by our connections to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.

As part of a network of local Healthwatch from every local authority area in England, we are also uniquely placed to raise issues nationally through Healthwatch England.

## Our vision

Our vision is to become the influential and effective voice of the public.

We want to ensure that local decision makers and health and care services put

the experiences of people at the heart of their work.

And, give adults, young people, children and communities a greater say in - and the power to challenge - how health and social care services are run in Hillingdon.

This vision is founded on the strong belief that services work best when they are designed around the needs and experiences of the people who use them.

## Our priorities

The focus of our work for 2015-16 was established after undergoing an in-depth analysis of the data and intelligence gathered from our residents during the previous year.

A number of areas were highlighted for consideration by the Board and the final priorities were agreed and set out in the published work-plan, presented to the Health and Wellbeing Board in October.

The key area for 2015-16 was the continuation of our work on Childrens & Adolescent Mental Health and Wellbeing - which is given comprehensive attention later in this report. It was also agreed to look at Discharge from Hillingdon Hospital for the over 65s and Maternity Care following the closure of Ealing Hospital's Maternity Unit. Although started, the conclusion of these projects are planned for later in 2016.

Full details of the Healthwatch Hillingdon Work Plan 2015-2017 can be viewed at <http://bit.ly/20QJAcY>



local businesses. We are always in need of things like Moses baskets, baby carriers, toiletries, and other baby essentials - things most parents take for granted.

Of course with all of the generous donations, we need a permanent storage solution to keep these items clean, dry and safe. We were so grateful that Healthwatch Hillingdon have been kind enough to help us in the interim with temporary storage in their basement.

I think the entire program can be summed up by a message I received from one of our referring midwives: "Thank you for your support you should be here when the ladies receive the packs. Thank you for giving me that pleasure." ”

**“We were so grateful that Healthwatch Hillingdon have been kind enough to help us”**

# Listening to people who use health and care services



## Gathering experiences and understanding people's needs

To gather the experiences and views of our residents we use a number of methods to promote awareness of Healthwatch Hillingdon. We carry out a wide ranging engagement programme to try to reach a broad cross-section of our communities, encouraging as many people as possible to share their views with us.



### Promotion and Communication

To advertise and encourage people to talk to us we have promotional materials in GP practices, hospitals and libraries. Our details are in every edition of Hillingdon People and we regularly have articles published in the local paper, where we call for people's experiences on specific conditions and issues.

Social media has become an excellent way to raise our profile and reach members of the public.

### Engaging

Staff and volunteers listen to our residents at events, workshops, presentations, meetings and numerous outreach activities.

- In our focus on mental health and emotional wellbeing, children and their parents told us their stories and how they felt that they were being let down and wanted things to change.
- Our regular presence at Hillingdon, Mount Vernon and Harefield Hospitals in the early part of the year enabled us to speak directly to people using those hospitals.
- Working closely with the Boroughs' Older Peoples, Disability and Carers Forums has given us an in depth view of the services these residents receive. As a result, we have heard positive reviews of patient transport and have been able to support the deaf community to access GP and hospital appointments.
- By presenting on Healthwatch Hillingdon at individual groups gives us an opportunity to hear about specific issues. Our visit to The Parkinson's Group led to a number of people contacting us and a resident receiving access to a crucial drug they were being denied.



- With the threat of a third runway, residents from The Heathrow Villages remain disadvantaged. Through our engagement with them, we continue

to hear their concerns about having no local GP, dentist, or chemist. Working with NHS England we have supported a number of residents to register with GPs in other parts of the borough.

We also submitted a response to the Government Airports Commission consultation on the possible effects on Hillingdon residents of another runway at Heathrow.

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**Jane Taylor - Chair of  
The Harmondsworth and Sipson  
Residents Association**

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“ HASRA has often questioned if our community’s proximity to Heathrow Airport is to the detriment to our health and is concerned that the requirements of air passengers and hotel guests are often perceived to supersede those of the residents.

Aircraft noise has recently been highlighted in the media as a possible reason for the onset of depression. High levels of air pollution are thought to be responsible for increased incidents of heart disease and breathing ailments. On top of this, many long term village residents have lived through decades of stress, being under the constant threat of having their homes demolished.

Life expectancy in the south of the borough is quoted as seven years lower than for those who live in the north. Seven years is a significant number. With such a discrepancy, what are health professionals doing to understand this difference. Surely if this gap is to be closed, health service provision for the

south of the borough should be considered a high priority within local resources and the needs of the south targeted.

HASRA would like to thank Healthwatch Hillingdon for listening to our residents and acknowledges the significant support we have received from Healthwatch in raising the profile of our unique circumstances. We hope to continue this partnership with a view to achieving a more appropriate investment in the south of the borough to improve our health and well-being leading to the probability we can enjoy a life comparable to those living in the north of the London Borough of Hillingdon. ”

- Supporting the Council’s engagement team at the Older Peoples, Disability and Carers forums has led to us regularly hearing from almost 300 residents.

One of the work-streams of the Disability Assembly early in the year was non emergency patient transport. In addition to holding a workshop, we carried out a survey in conjunction with Hillingdon CCG and Hillingdon Hospital, with participants being entered into a prize draw. The Mayor of Hillingdon, Cllr George Cooper,



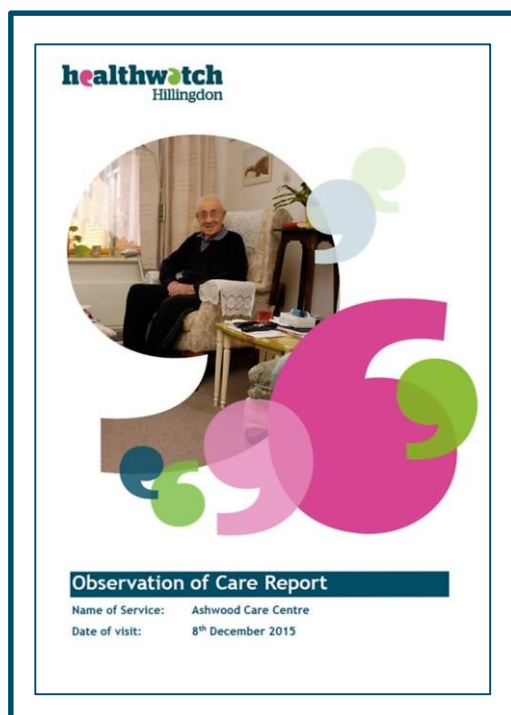
drew out Mrs G from Hayes as the lucky winner

Dear PAT MAHER,  
I was so surprised to get the letter from you and £100. I thought someone was having me on, as they say.  
THANK you very much indeed. I will enjoy spending it very soon. THANKS again.

Importantly, over 90% of the 138 people who completed the survey, or attended the Disability Assembly recommended the service.

## What we've learnt from visiting services

Our Enter & View Representatives and PLACE Assessors visited services on 15 occasions during the year.



We work very closely with colleagues within the Local Authority Contracts Monitoring Team and Care Quality

Commission, to inform their inspection schedule. Our own enter and view activity is therefore very small. In December, we visited Ashwood Care Centre, Hayes, at the request of the Manager, to observe their lunchtime service to residents and make recommendations on how this could be improved.

We also joined Central and Northwest London NHS FT to view the care at the Heathrow Detention Centres at Harmondsworth early in the year, and visited the wards at the Riverside Inpatient Unit in Hillingdon, as part of an internal quality audit.

Patient-led assessments of the care environment (PLACE) looks at patient privacy, the quality of food and how hospitals and clinics maintain and clean the areas where they provide care.

Our team of 10 PLACE Assessors have carried out over 300 hours of assessment during the year. Their work is helping organisations understand how well they are meeting the needs of their patients.

At Hillingdon and Mount Vernon Hospitals, for example, a number of areas were identified and improvements are starting to be put in place:

- The introduction of earing loops at reception desks
- Privacy in reception areas
- Secure storage of personal possessions
- Ensuring there are handrails in corridors and on approaches to bathrooms and toilets
- Dementia friendly floors, signage and door colours



## FOCUS - reaching out to residents through local media

Working with the local media is an important way for Healthwatch Hillingdon to highlight issues that affect our communities and to encourage people to share their experiences about local health and social care services.

This year we featured regularly in the local print media, highlighting local concerns and calling for peoples experiences on fertility treatment, maternity services, young people's mental health services and much more.

UXBRIDGE  
**Gazette**

Here are some of the examples of how the use of local media has enabled us to represent our residents and gather information.

### Children's mental health

#### **'Frightening' truth of Hillingdon's youth mental health services (11.08.15)**

Around our work on children's mental health and in line with our published report *'See & Heard – Why not now?'* which outlined how a lack of early intervention, lack of funding and fragmented services impacted upon children's emotional wellbeing, we spoke to the local media and highlighted the struggles faced by young people and their families with accessing mental health services in Hillingdon. We called for local people to share their experiences of accessing mental health services in Hillingdon.

<http://bit.ly/1Jc72v1>

### Adult Mental Health

#### **Hillingdon adult mental health services to get a re-vamp (29.02.16)**

At the CNWL launch of the new model of care for community mental health services which aims to offer an 'improved experience' for both mental health service users and professionals; we shared our comment's with

the local press on such as positive development in mental health services for the borough as a real opportunity to improve outcomes for local residents.

<http://bit.ly/28Te5O7>

### Mental Health

#### **NHS Trust apologies for 'inadequate' mental health services in Hillingdon (29.07.15)**

In light of the findings of the Care Quality Commission's inspection report on Hillingdon's mental health services, which concluded that some of the mental health services in Hillingdon were 'inadequate', we were asked to share our views on the report's findings. Through the work we had carried out on children mental health services, we were able to echo some of the CQC reports findings about delayed treatments and long waiting lists. As this had been expressed to us by the parents and young people we had spoken to.

<http://bit.ly/28Rcveu>

## Maternity Care Services

### Hillingdon health watchdog concerned for vulnerable mums-to-be in light of national report (07.03.16)

In light of the findings from the national maternity report which proposed that mums-to-be should be given a personal budget of £3000 each to design their own personalised maternity care plan, we highlighted the need for vulnerable and disadvantaged women to receive adequate advice and support to enable them to make informed choices and called for local women to share their experiences of using maternity services in Hillingdon.

We are following this up with a focused project to listen to women's experiences on maternity care services in Hillingdon.

<http://bit.ly/2925bUz>

## Contraception

### Concern over contraceptive coil removal across Hillingdon GPs (14.12.15)

Following a decision made by Hillingdon Health & Wellbeing Board to decommission (stop) the service providing the contraceptive coil to local women across general practice, which raised concerns about teenage pregnancy rates, we were contacted by the local press to give our comments. We asked for women affected by the changes to come forward and share their views and experiences.

<http://bit.ly/28UUw7L>

## Fertility treatment

### West London Patients suffer mounting 'stress' over IVF postcode lottery (05.02.16)

We challenged the inequalities faced by IVF patients in Hillingdon who were suffering the strain of a 'postcode lottery', by only being allowed one treatment cycle on the NHS, compared to three cycles on offer in other boroughs.

We called for women to share their experience of IVF treatment in Hillingdon and used Facebook and Twitter to engage with local women to gather their experiences.

<http://bit.ly/28PJn4s>



# Giving people advice and information



## Helping people get what they need from local health and care services

At Healthwatch Hillingdon we provide a comprehensive information, advice and signposting service to our residents, through a number of different ways:

- Our shop within The Pavilions Shopping Centre
- Stalls at events and fairs across the borough
- Our website and social media
- Taking telephone enquiries and receiving emails

The shop is used as a main information hub. We have a wide ranging array of leaflets and posters to inform residents.



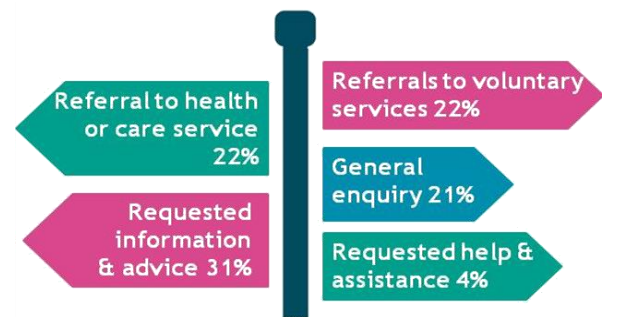
Our website also features similar information and has been visited over 150,000 times this year.

We signpost people to NHS, Care and Voluntary Sector Organisations.

Where possible we look to empower people by providing them with the information and advice to make their own choices.

Where required, we intervene for residents and on a few occasions have provided intensive one to one support.

1102 residents contacted our information, advice and signposting service in 2015/16



The reasons that people contact us are very varied. They range from simple enquiries, to some very complex issues. Our experienced team have an excellent knowledge of health and social care and the services that are provided locally.

As these examples show, this means that when approached we can offer residents advice and support that best meets their needs:

- A deaf and mute gentleman had been sent an appointment for an eye clinic. He wanted to change the appointment but could not contact the department, as telephone was the only method, and both he and his wife were deaf and mute and they did not know another person who could help them.

We contacted outpatient appointments on the gentleman's behalf and rescheduled the appointment.

We also raised this with the hospital and are working with them to ensure that methods of communication for people who are sensory impaired are appropriate to their disability.

On 37 occasions this year we have referred residents to other independent services that provide

advocacy support. The majority of these were to VoiceAbility for people needing help to make a complaint. We have however referred 4 people who alleged clinical negligence to Action against Medical Accidents (AvMA).



- A number of people contacted us to tell us that their NHS dentists had told them they no longer provided treatment for NHS patients and they would have to pay privately. Where people gave us their permission, we contacted NHS England and reinstated NHS treatment for those patients.

We have also shared these experiences with Healthwatch England and the Federation of London Local Dental Committees.

- Mr B, contacted Healthwatch with a request for help. Mr B is frail, elderly and has chronic respiratory and cardiovascular conditions. He was referred to Charing Cross Hospital, part of Imperial College Healthcare NHS Trust. His GP advised him that he would need patient transport. Mr B attempted, without success, over a 2 month period to arrange transport to Charing

Cross Hospital including 1 missed appointment.

Our intervention with Imperial College Healthcare NHS Trust resulted in Mr B being assigned patient transport and he was able to attend his next appointment.

Additionally, Healthwatch Hillingdon raised a number of concerns with the NHS Trust regarding their patient transport policy. In response to these concerns, the patient transport policy was revised to improve equality of access for all patients who go to Imperial College Healthcare NHS Trust.

**‘The previous methodology for assessing if a patient is eligible for patient transport was primarily based on mobility and how the patient currently managed their daily activities... Our revised assessment involves a new series of specific questions that assess a patient’s medical need... rather than the previous set of questions that may not have identified all of the patients that truly needed patient transport’**

Imperial College Healthcare NHS Trust’

- After we visited the local Parkinson’s Group, Mrs P contacted us about access to a medication called apomorphine. She had been informed by Imperial College Hospital Trust (ICHT) this treatment for Parkinsons was no longer available.

On enquiry we discovered that the Trust had decided to withdraw this costly treatment to patients as it was not a directly commissioned service. We challenged this decision and the outcome was that ICHT re-instated access to apomorphine for Mrs P and all NWL residents, whilst a permanent solution is found with commissioners.

- During changes to the Wheelchair Service in Hillingdon we received a high volume of calls from residents. Many people contacted us after receiving a letter about the changes, to advise they had already returned their wheelchair and some family members rang us to advise the person being written to was deceased. We raised this immediately and a public apology was issued to those relatives by the Chief Executive Officer of Central NorthWest London NHS FT.

**Will came to the shop to tell us about his experience of the new service**



When the new provider took over we helped residents during the transition and in the period the new service was imbedding, to ensure they were fully informed about the new service.

- A number of residents contacted us because they had been unable to register at a GP surgery.

On investigation we found that the majority of these residents had been registered for a number of years with other GP surgeries in Hillingdon, but as a result of the relocation of a GP practice, they were now looking to move to another local surgery.

On contacting the surgeries, all confirmed that without exception their policy was to only register a patient who had photographic identification.

As this was contrary to current UK law and NHS England guidance, Healthwatch Hillingdon challenged this policy and supported all local residents who had contacted us to register with a GP.

As a result, a GP Access Forum was started by Hillingdon CCG and we are working closely with them and NHS England to address similar problems across the borough.

To date everybody who has contacted Healthwatch has been registered with a GP.

# How we have made a difference



“Just sending you a very BIG thank you, had a phone call off (CNWL) and met with them the following day, and L now has a permanent care coordinator and the consultant she wanted. Thank you” Mr T

“Thank you very much for the information regarding (nursing home), as well as the time that you and your organisation have spent with our family. It is greatly appreciated.

We had a meeting with Hillingdon Social Services after seeing you on Wednesday. The objective was to complete an assessment of Mum to determine Mum’s future level of care that she needs....

..... we will keep you informed of progress. Once again thank you and your organisation for all the advice and time given to us.” Mr S

“I attended the national maternity review as per your advice. I tried to put forward my experience to them. Hope it brings a change. It was really helpful. Thank you.”- Ms E

“A note to say ‘thank you’ for your valuable support during our traumatic experience relating to my mother’s numerous hospitalisations this year.

Your support was extremely valuable and important and a catalyst to ensuring our mother’s treatment vs recovery at Hillingdon Hospital was effectively carried out. Without your involvement, we strongly believe the outcome would have been detrimental.

Your involvement was a ‘life saver’ for our mother.” Ms W

“Thank you again for being so helpful and understanding, it’s made me very glad I contacted your service!” Ms J

“Healthwatch are fantastic they made sure I get a British Sign Language (BSL) interpreter when I go to the doctor, instead of taking my (school age) son.” Lady at Disability Assembly via BSL interpreter.

“When I rang you I was not expecting anything. You were the 4th organisation I had contacted. The others did not even try to help but you were excellent. Thank you so much for helping me register with a GP.” Mr C

“Thank you for all the help you are doing for me.” H

“But again I am glad I contacted you and followed up and acted on your advice.” Ms J

“I’m really grateful for your help. Not sure we would have got this without your involvement.” Ms W

“Yes I am happy with all the help I can get right now, thanks for what you guys are doing.” Mr P



## Working with other organisations

Healthwatch Hillingdon has very strong operational relationships locally with NHS, Council and Voluntary Sector organisations.

As the ‘stakeholder statements’ demonstrate later in this chapter, we are seen as independent, an equal partner and a valued “critical friend” within health and social care.

These important relationships enable us to have considerable strategic input into the shaping of local commissioning and the delivery of services.



This year Healthwatch Hillingdon attended 235 health and social care meetings and 79 voluntary sector and community meetings, covering a wide range of subjects.

Our involvement enables us to fulfil our duties professionally, keeping us well-informed on all matters and gives us the opportunity to challenge and seek assurances on behalf of our residents. It also ensures that the lived experience of our patients and public are clearly heard and are influencing decisions and improving health and social care in Hillingdon.

In practice our strong relationships ensure that whatever element of our work we are engaged in, we are able to directly communicate with all organisations at any level.

- Working with Hillingdon Clinical Commissioning Group is a key relationship. We have an independent seat on the Governing Body, all their strategic meetings, and across a range of work streams. This strong avenue of communication has allowed us to regularly raise quality issues and challenge commissioning decisions. High on the agenda this year has been our work on children’s mental health, access to GP services, Continuing Health Care, fertility treatment, Co-commissioning and the transfer of services from Ealing to Hillingdon Hospital.
- At the Health and Wellbeing Board (HWB) we have used our statutory membership to champion our concerns on the boroughs provision of Childrens and Adolescent Mental Health. We were the only Healthwatch in NWL asked by a HWB to sign off their Childrens and Adolescent Mental Health Transformation Plan, before its successful submission to NHS England, and later in the year the Better Care Fund. This is testament to our valued contribution to the HWB.
- We meet with Hillingdon Social Services to input into a number of areas, such as, discharge from hospital, care homes, domiciliary

care and SEND (special educational needs and disability)

- We work in similar ways with both The Hillingdon Hospitals NHS FT and Central West London NHS FT.

Through observation and the sharing of information we work together to gain a wider understanding of service quality and how their patient's experience the services each organisation provides.

Healthwatch has a duty to respond each year to the Trusts Quality Statements and we now work very closely with each Trust throughout the year to make sure that quality is continually addressed and those areas which require the most focus are seen as a priority.

We support both Trusts by providing volunteer PLACE Assessors to carrying out inspections of the care environment and this is resulting in improvements to their condition, cleanliness and to the provision of food.

This year we have worked closely with both Trusts on major strategic changes.

Hillingdon Hospital have seen maternity services transfer to them from Ealing hospital and they have also been preparing for the transfer of children's paediatric services in 2016.

At Central West London NHS FT there has been a reconfiguration of the way in which mental health services are delivered in Hillingdon with a greater

emphasis on providing services in the community.

Throughout these changes we have made sure residents have been kept fully informed and supported.

- We represent Hillingdon at regional meetings for change programmes which are being planned and implemented across North West London. Such as:

**Shaping a Healthier Future** - the reconfiguration of acute and community services

**Like Minded** - the reconfiguration of mental health services

**Sustainability and Transformation Plans** - health and social care working together to build services around the needs of the local populations

- Healthwatch Hillingdon continues to develop strong relationships with our local voluntary sector and community groups.

We work closely with Age UK, DASH, Hillingdon Carers and MIND, supporting residents together, through the sharing of information and signposting to each others services.

Our work on children's mental health saw us work very closely with Hillingdon Carers, Link Counselling, P3 Navigators and local schools on our CAMHS report.

- Our role on the NWL CCG's Policy Development Group (PDG) is to ensure that access to certain NHS treatments is both fair and equitable.

As reported in our last 2 annual reports, Healthwatch Hillingdon has been working to remove weight restriction in the access to knee replacement operations. We are pleased to acknowledge that this was finally implemented across the whole of NWL this year.

We have also pressed the case for changes to the referral criteria for inguinal hernias. Our intervention led to a recommendation by the PDG that the referral policy should be changed to reflect the standpoints of the Royal College of Surgeons and NICE. This is a major step forward for the safety and quality of care for hernia patients across NWL.

- During 2015-16 we have continued to hear from many Hillingdon women and couples about the unfairness they face in accessing fertility treatment on the NHS.

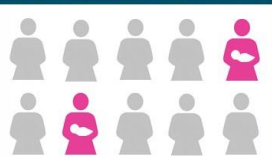
SHOULDN'T ALL WOMEN HAVING NHS IVF HAVE EQUAL CHANCE OF A SUCCESSFUL PREGNANCY?

NICE say 3 IVF cycles increases chance of a successful pregnancy to over 50%


80% of CCGs only offer 1 cycle and reduce a women's chance of pregnancy to 20%

Equal opportunity and access for all can be achieved economically

1 Cycle = 2 in 10 success rate



3 Cycles = 5 in 10 success rate



We are disappointed that to date we have been unable to change policy. Based on the feedback we have gathered and our work in this area over the past 3 years we believe that NHS England and the Department of Health undertakes a national review

of the access to fertility services for NHS patients and consumers.

- Our strong relationship with Healthwatch England continues to go from strength to strength.

Our regular attendance at the London Healthwatch Network meetings provides a valuable opportunity to share intelligence and good practice with others in the London Healthwatch network and to help influence the work of Healthwatch England at the national level.

We would particularly like to thank Healthwatch England's policy team for their work with us on Children & Young People's Mental Health and the National Maternity Review, which is presented later in our report; And for the work with us and NHS England on strengthening the CCG conflict of interest national guidance and NHS Continuing Health Care advocacy, which follows:

### CCG conflict of interest guidance

Healthwatch Hillingdon continues to make significant contribution at the national level by working in partnership with Healthwatch England and NHS England to bring about improvements.

In our annual report last year, we highlighted our concerns around the potential conflicts of interests in the joint co-commissioning of GP services by CCGs.

We are pleased to report this year that NHS England and Healthwatch England have responded positively to these concerns and have actively involved Healthwatch Hillingdon in

the development of more robust conflict of interest guidance to CCGs.

**“We view this as a really positive step, which demonstrates our ability to deliver impact and outcomes at both the local and national level”**

We believe that the revised conflict of interest national guidance goes a long way to address many of the concerns highlighted in our last annual report.

We view this as a really positive step, which demonstrates our ability to deliver impact and outcomes at both the local and national level.

### **NHS Continuing Health Care**

Last year we also highlighted the need to improve access to NHS Continuing Health Care (CHC). We have seen a steady and welcomed improvement in this area, although more can and should be done.

Through this work we became aware of a gap in the provision of advocacy support for those people who could most benefit from NHS CHC. This resulted in us stepping in to provide direct support for local residents.

**“Just a brief note to say thank you for attending yesterday's meeting on behalf of Healthwatch Hillingdon, it made it a friendlier place and was much appreciated”**

We highlighted this gap to both our local CCGs and NHS England. We

were pleased with the positive responses we received and their willingness to work with us, in partnership with Healthwatch England to address this issue.

This work will take some time to deliver outcomes and improvements. In the meantime, as this year, we will continue to step in and provide appropriate support for local residents in the NHS CHC process.

- Healthwatch Hillingdon regularly shares anonymised feedback and intelligence on providers with the Care Quality Commission (CQC).

We hold regular quarterly meetings with the CQC where we discuss common concerns and areas of improvement with the regulator. Healthwatch Hillingdon values our growing relationship with the CQC and we look forward to strengthening this relationship in the year ahead.

## **Our reports and recommendations**

Healthwatch Hillingdon's strategic input enables us to use the information collected from residents, to make regular recommendations to commissioners and providers on how they could improve the quality and safety of services. Our input is recorded in the minutes of meetings and this means that recommendations do not always have to be formally submitted by letter, or in a report.

Following the transfer of maternity services from Ealing we wrote to the Shaping a Healthier Future Clinical Board outlining a number of recommendations. The response was positive and a commitment has been made to improve

the consultant presence in maternities to meet the Royal College's standards.

This will potentially result in helping to ensure that the clinical outcomes for mothers and new born babies will be improved for 29,000 mothers per year across NWL.

Our 'Seen & heard?' report, published following our engagement with young children and their families outlined a number of recommendations on how children's mental health and emotional wellbeing could be improved in the borough. Full details of the impact of this report and how recommendations were received are outlined in "Our Work in Focus"

### Involving local people in our work

There have been a number of ways we have directly involved residents in Healthwatch work, or supported them in other opportunities.

Our Board members are not only involved in the governance of the organisation but regularly attend meetings as Healthwatch representatives, including the Health and Wellbeing Board.

Our Enter and View representatives and PLACE Assessors are all active members of our volunteering team and undertake visits to NHS and care facilities.



Through active promotion of local events in our newsletter and direct contact with residents by telephone and email we make sure that residents attend important events and conditions specific focus groups where their input is invaluable.

### Safeguarding Boards

Through an advertising campaign we were able to



help recruit lay members to both the Children's and Adult's Safeguarding Boards in Hillingdon. This is enabling local people to use their expertise on these important boards and it was a way for us to support the Local Authority who were having difficulty recruiting to these volunteer posts.

**"Just to say a big thank you for all your help in this process. I have recruited KP for the children board and MN for the SAB. Both were really keen and I think will contribute a lot to the board. I couldn't have done it without your help, so thank you."**

**Andrea Nixon, Business & Development Manager LSCB and SAPB, London Borough of Hillingdon**

### National Maternity Review

In addition to sharing the experiences of over 150 mothers of maternity services at Hillingdon Hospital with the National Maternity Review (Cumberlege Review), we also supported two families to attend the Maternity Review's "listening event" into serious injury during birth. This gave those local families the opportunity to share their recent experiences directly with the national review team.

## Stakeholder statements

Hillingdon Clinical Commissioning Group  
Caroline Morison,  
Chief Operating Officer

**NHS**  
**Hillingdon**  
**Clinical Commissioning Group**

“ Healthwatch Hillingdon is a key partner for Hillingdon CCG. They provide a valuable contribution to a number of our formal committees, including our Governing Body and Quality Safety Risk Committee, supporting us in the identification of local priorities as well as the development and delivery of plans to address them. Healthwatch Hillingdon is also a member of our Conflict of Interest Panel, working with us to manage potential conflicts of interest arising from Primary Care Co-Commissioning robustly and transparently.

In addition, we value the role that Healthwatch Hillingdon plays in ensuring that ongoing, consistent feedback from the residents of Hillingdon is incorporated into the way that our services are commissioned and delivered. In 15/16 that has included input to access to community and primary care services, including the development of integrated care for older people, GP access and end of life care. Healthwatch have supported us with the development of mental health transformation programs, specifically focusing on urgent care, talking therapies, perinatal care, dementia and improved coproduction with children and young people with

mental health needs. Healthwatch Hillingdon also contributes to shaping services outside Hillingdon including attending the North West London Policy Development Group.



‘Future of Health and Care in Hillingdon Event’

Hillingdon CCG looks forward to continuing to work in partnership with Healthwatch Hillingdon, shaping our services in a way that best meets the needs of Hillingdon residents.”

The Hillingdon Hospitals NHS FT  
Shane Degaris,  
Chief Executive Officer

The Hillingdon Hospitals **NHS**  
NHS Foundation Trust

“ The Trust has continued to work in close partnership with Healthwatch Hillingdon and appreciates the valuable contribution they provide to the organisation. Representatives from Healthwatch Hillingdon have regularly attended focus groups and committees and have attended meetings of the Trust Board, Council of Governors and People in Partnership. Healthwatch Hillingdon is

an active member of our Experience and Engagement Group which oversees the delivery of the Trust-wide plan for improving patient experience.



Healthwatch Hillingdon has direct access to the Chief Executive and meets bi-monthly with the Chief Executive and Director of Nursing to provide feedback from patients and local residents who are in receipt of services provided by the Trust

Healthwatch Hillingdon and Healthwatch Ealing attend a quarterly quality meeting, to check progress and gain insights into how the Trust is performing against a number of quality indicators. The Trust has benefitted from the involvement of Healthwatch Hillingdon in Executive appointments at the Trust and we continue to work closely with Healthwatch Hillingdon on the consultation for the priorities for the quality report, PLACE inspections and follow up actions.

The Trust undertakes regular engagement with local people by attending community events and forums. The Trust has attended several events with Healthwatch Hillingdon providing

opportunity to work together to improve services for the local community.

In the coming year the Trust will be supporting Healthwatch Hillingdon on two projects which will be looking at the patient experience on maternity and discharge into the community. ”

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Central & North West NHS Foundation Trust  
Maria O'Brien,  
Divisional Director of Operations

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“ CNWL deliver a significant number of health services in Hillingdon including inpatient and community based mental health services as well as adult and children’s physical health community services such as district nursing, rehabilitation, rapid response, health visiting and school nursing. It is therefore essential that we work with local organisations to improve services and respond effectively to feedback from our service users and patients.



Our relationship with Healthwatch Hillingdon is an important element of this feedback and as a critical friend to the organisation, it is important that we are able to work in partnership to address any concerns, improve existing services or redesign them completely to meet the changing needs of our local patients.

We have a longstanding and established working relationship with Healthwatch with regular meetings in place between

Healthwatch senior officers and the CNWL Mental Health and Community Borough Directors and Divisional Director of Operations. We recognise the valuable contribution that they make through our regular dialogue, visits to our clinical areas and joint working on specific service related projects.

Throughout the year, we have worked with Healthwatch across a variety of areas including:

- Informing and developing our 2016/17 Trust-wide Quality Priorities
- Involvement in the co-production of a new model of care for our mental health community services



Launch of new model of care for adult community mental health services in Hillingdon

- Developing a joint CAMHs strategy alongside Hillingdon Clinical Commissioning Group and London Borough of Hillingdon
- In-patient PLACE inspection teams

We look forward to our continued joint working during the forthcoming year and welcome their ongoing challenge function to support our drive for continuous quality improvement. ”

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The Community Voice,  
Joan Davis, Chairman

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“ Healthwatch Hillingdon has much to be proud of. It has excellent premises ideally situated in a major mall in Uxbridge, where its is highly visible to shoppers. Its open frontage invites casual visitors, who can help themselves to the many NHS leaflets on display. More importantly, there is always a member of staff ready to answer questions and to give advice.

Healthwatch Hillingdon is an active participant in many local NHS committees. It stoutly defends the interests of local patients and is vocal on their behalf. It also monitors all levels of NHS services and engages with the public at every opportunity.

The high standards of Hillingdon Healthwatch are sadly not echoed universally elsewhere. Some of its sister organisations could learn much from the exemplary model that it provides. ”



# Our work in focus



# Our work in focus: Children and Young People's Mental Wellbeing

## Being a catalyst for change



### Introduction

As we reported in last year's annual report, in December 2014 Healthwatch Hillingdon and Hillingdon Mind published 'Listen to Me', an interim report that highlighted the struggles of children and young people with mental health problems in Hillingdon and the effects these have on them and their families.

We outlined how uncertain funding, a lack of early intervention and fragmented services were compounding issues and

called for a joint approach, from all stakeholders, to improve services.

In Hillingdon, 'Listen to Me' inspired a renewed commitment to improve services for children experiencing mental health problems.

Hillingdon Clinical Commissioning Group (CCG) and the London Borough of Hillingdon formed a new Children & Young People's Mental Health and Wellbeing group to oversee improvements to services and started to develop a Joint Social Emotional Wellbeing and Mental Health Strategy 2015-2018. This incorporated a number of the recommendations made in our 'Listen to Me!' report.

Nationally, Healthwatch England used the report to directly influence the Government's Children and Young People's Mental Health Taskforce, which was undertaking a major review of children's mental health.

### Continued Engagement

The interim report was published due to the scale of the problem we had found. It was very important that we built on this report and to do so we set out a 5 month intensive programme of engagement with young people, their families and care professionals. Our ambition was to gain a

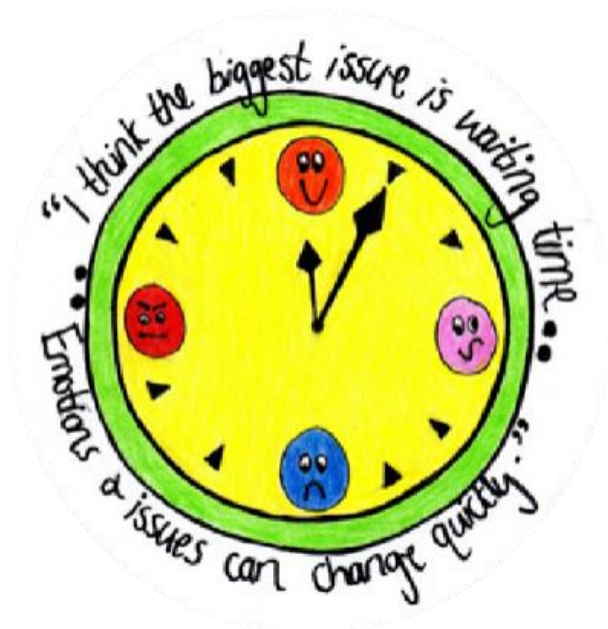
better understanding of services. We wanted to produce a comprehensive report, which not only gave a rich evidence base of the lived experience of children, young people, parents and carers, but ensured that these experiences influenced and shaped future plans, by offering practical solutions on how services could be improved.

### Sustained Challenge

As our engagement continued, we took every opportunity to bring focus upon children's mental health.

At the Children & Young People's Mental Health Group we looked for the membership of the group to be expanded, to include schools and the voluntary sector.

We maintained a sustained challenge at the Hillingdon CCG Governing Body and the Health and Wellbeing Board.



This led to the Hillingdon CCG commissioning Public Health to complete a Children's Mental Health Needs

Assessment, and providing funding for:

- Reducing the waiting list for the Tier 3 CAMHS (Children's and Young Peoples Mental Health Service)
- Learning Disability CAMHS
- Out-of-Hours CAMHS intervention at Hillingdon's A&E department
- Perinatal Mental Health Services.



### Already prepared to act

The Children and Young People's Mental Health Taskforce completed their review and in March 2015 published a report called 'Future in mind - Promoting, protecting and improving our children and young people's mental health and wellbeing.'

The Taskforce echoed much of what we had said in our interim report and reinforced the recommendations we had made.

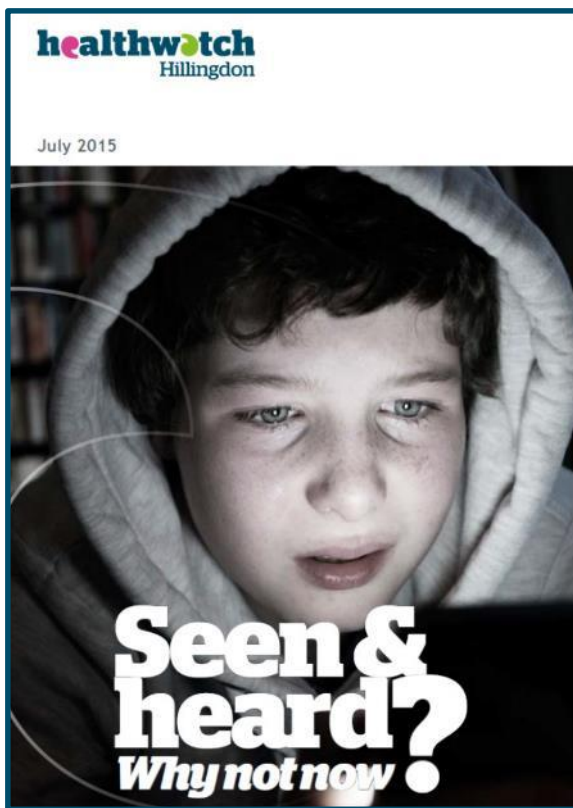
It called for long-term whole system solutions, collective working and the development of clearly defined transformation plans to address the

shortfalls in children’s mental health provision.

Due to the Healthwatch Hillingdon work on children and young people’s mental wellbeing, these were steps we had already taken in Hillingdon. Partners were in a position of strength that could now be built upon.

### Comprehensive Report

In July 2015, pre-empted by a publicity campaign in the local media and the release of a short promotional animation, we published our eagerly awaited second report, ‘Seen & Heard - Why not now?’



The report featured some uncomfortable hard hitting stories, which gave real insight into Hillingdon’s mental health and wellbeing services from the children, young people and their families who have faced the struggles of emotional and mental health.



As planned, in addition to containing a rich evidence base, we outlined 10 key principles that formed a ‘blueprint’ for commissioners to provide better support and services in Hillingdon.

### Transformation Plans

Healthwatch Hillingdon had a pivotal role in the formulation of Hillingdon’s Children and Young People’s Mental Health and Wellbeing Transformation Plan. The insight provided by our ‘Seen & Heard - Why not now?’ report, has been an important reference into the experiences of our children, young people and their families and framed much of the contents of the plan.

The information in our reports has been referenced in the Children’s Mental Health Needs Assessment completed by Hillingdon’s Public Health team. It was also pleasing to note that Hillingdon was the only borough in North West London to complete a needs assessment to inform

their transformation plan and this was directly as a result of Healthwatch Hillingdon's request in our Listen to Me! report for this to be commissioned.

Our work was also promoted as an area of best practice by Like Minded, the programme which is looking to transform mental health and wellbeing services across North West London.



We continued to collaborate with partners to develop Hillingdon's transformation plan and in recognition of all our work were invited by the Health and Wellbeing Board to countersign the plan, with the CCG and the Council, before it was submitted to NHS England for approval, as part of a joint North West London plan.

We did not want to see the momentum for change in Hillingdon slow whilst the plan was being assured by NHS England. Being conscious that every region across the country would be looking to recruit specialist CAMHS staff once transformation funding was announced, we formally asked the CCG Governing Body to consider funding the recruitment

of CAMHS staff in advance of the announcement. We also raised concerns with them about the slow progress in the development of the pan North West London Eating Disorder Service and asked for firm timelines to be set in delivering this new service.

NHS England announced in November 2015 that North West London had been successful in its bid and Hillingdon was awarded £524,623<sup>3</sup>, recurrent for 5 years, to deliver the transformation plan.

3. <https://www.england.nhs.uk/wp-content/uploads/2015/07/annex-4-transformation-plan-guidance-ccg.pdf>

### Delivering The Plan

We continued to work with and challenged partners on the delivery of the transformation plan, to ensure services were being appropriately planned to meet the needs of Hillingdon's residents and that children and their families/carers are involved in the process.

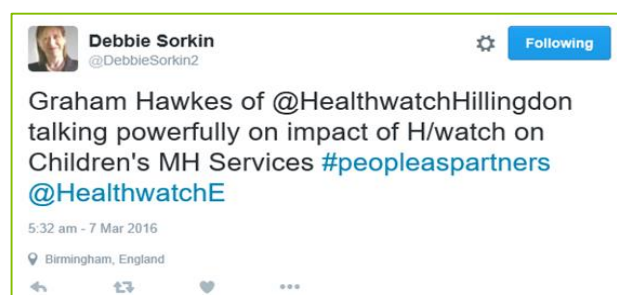
As before, we took every opportunity to raise the profile of children's mental health.

In December 2015 we presented on our CAMHS work and the 'Seen & Heard - Why not now?' report to The Children and Young People's Mental Health Coalition (CYPMHC) at the Mental Health Foundation. They were very complimentary about our work and specifically admired the Healthwatch role in signing off the Hillingdon Transformation Plan at the Health and Wellbeing Board.

Through this presentation we facilitated the CYPMHC attending the Hillingdon Children and Young People's Mental Health and Wellbeing Board, to inform on the work being carried out in schools by Place2Be.



We also presented on our CAMHS work at the National Service Change Conference in March 2016. Facilitated by Healthwatch England and the Leadership Centre, the conference focussed on how the public sector can work together during service change programmes.



### Progress on plan?

We acknowledge that progress has been made in the implementation of the plan.

Our expectation is high and we have been increasingly frustrated by the speed at which progress is being achieved.

New services have commenced for community eating disorder, self harm,

crisis and intensive support and challenging behaviour, which will take time to imbed.

We have seen a reduction in waiting times for accessing CAMHS Tier 3, but until we see the implementation of initiatives to offer early help and prevention, system pressures will remain and those young people who do not meet Tier 3 thresholds, will struggle to find support.

Children and Young People have been engaged by partners in redesign and training will commence in April 2016 following the completion of a training needs assessment.

As we had anticipated the recruitment of staff has been a real challenge and with Trusts across the country advertising for professionals, this has also had an adverse effect of staff retention.

Engagement with schools has also proved to be problematic. Especially with the independence of academies.

We understand the challenges involved and appreciate the efforts being taken by partners but it is disappointing that almost all of the work-streams within the plan were RAG rated amber at the end of March 2016.

### What next?

As work continues into the new financial year, it is recognised by all partners that there are 6 areas which require immediate focus and further development:

- No counselling service for under 13's
- Recruitment & retention of NHS staff
- School based counselling services

- Raise participation of CYP in redesign
- Increase Tier 2 capacity
- Transition to adult services

Healthwatch Hillingdon’s task will be to continue to monitor, and challenge, the development in these areas and ensure the new services deliver the desired outcomes.

We have come a long way since we sat down with 5 parents nearly 3 years ago and they told us about how Hillingdon’s services were letting their children down.

We know we have more work to do and Healthwatch Hillingdon will certainly not rest until we know the new investment in Hillingdon has improved services, and the mental wellbeing of children in our borough.

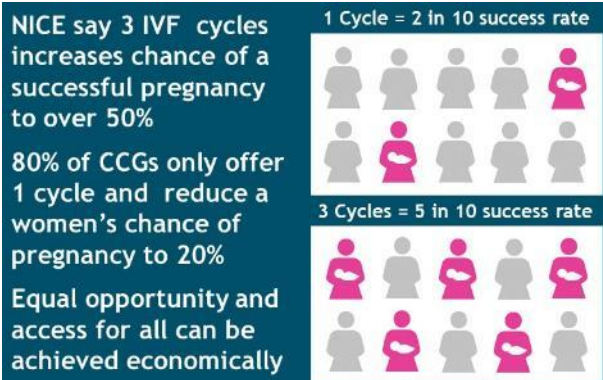
<b>Half Term Report - Feb 2016</b>	
Subject: <i>CAMHS Transition Plan</i>	
Name: <i>Hillingdon</i>	Grade: <i>B</i>
<p><i>Early days for this subject but it has been encouraging to see the progress you have made this year.</i></p> <p><i>You may find working closer with your peers more rewarding</i></p> <p><i>Excellent theory but need to work harder on implementing the practical</i></p>	
Signed: <i>A Critical-Friend</i>	

# Our work in focus: Access to Fertility Treatment

## Shouldn't all women having NHS IVF have equal chance of a successful pregnancy?

### Introduction

Over the past 3 years Healthwatch Hillingdon has heard from Hillingdon women and couples who have expressed their views on the unfairness that they face in access to NHS-funded fertility services including in vitro fertilisation (IVF). These people, in our view, represent seldom heard members of our community.



### The facts about fertility

- Most couples seek medical advice after 1-2 years of trying to conceive.
- Fertility issues are second to pregnancy, as the most common reason for women to visit their GP.
- If left untreated, infertility can result in stress, depression, emotional distress and breakdown in relationships.
- The chances of IVF success fall sharply after the age of 42.
- The National Institute of Clinical Excellence (NICE) recommends that women under 40, who have been trying to get pregnant for 2 years, should be offered 3 full cycles of IVF.<sup>4</sup>
- For women aged between 40 and 42, who have been trying for 2 or more years, and have not previously received IVF, NICE recommends 1 full cycle of treatment.

4. <https://www.nice.org.uk/Guidance/CG156>

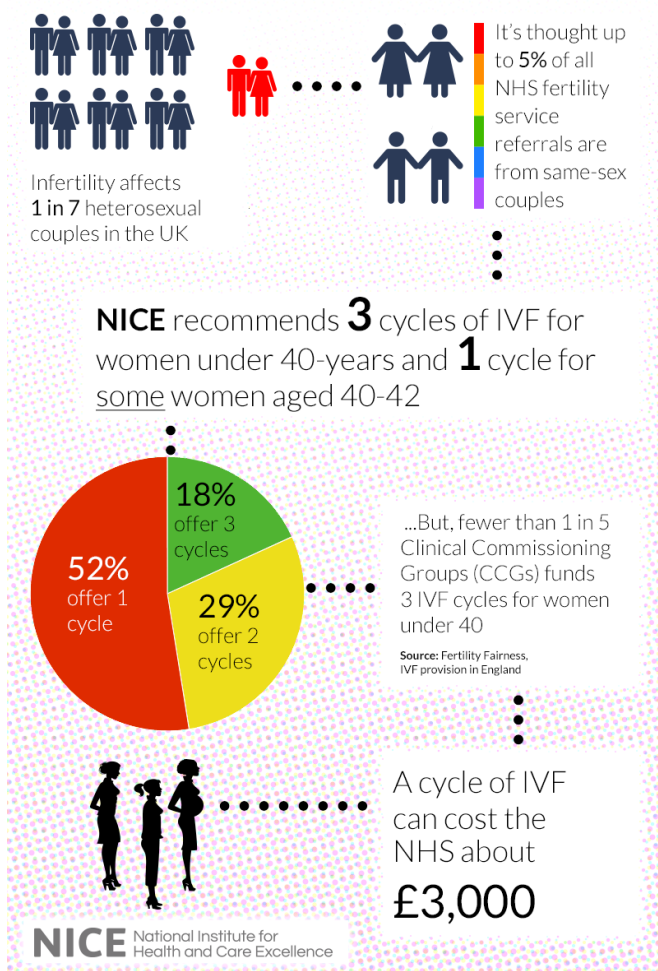
### The main causes of infertility in the UK



- male infertility 30%
- unexplained infertility 25%
- ovulatory disorders 25%
- tubal damage 20%
- uterine or peritoneal disorders 10%



Decisions on whether IVF treatment is offered to patients are made by local NHS bodies (CCGs), which is leading to a “postcode lottery” in access to IVF.



In the London Borough of Hillingdon and across the 8 London Boroughs of North West London (NWL), the NHS NWL CCGs have chosen to implement a blanket policy which only allows eligible women (under 40) to have 1 cycle of IVF and no cycles for 40-42 year olds. This does not follow the national NICE IVF recommendations.

“Infertility is a recognised medical condition. People affected should be able to receive treatment as a core NHS service..... It is

unacceptable that parts of England are choosing to ignore NICE recommendations for treating infertility. This perpetuates a postcode lottery and creates inequalities in healthcare across the country”

Professor Gillian Leng, deputy chief executive and director of health and social care at NICE.

### Offering solutions

Over the past 3 years, Healthwatch Hillingdon has attempted, on numerous occasions, to put the case forward for a fairer and equitable approach to improving access to IVF across North West London. The suggestions we have made include phasing in of the commissioning of IVF services at scale across NWL with a single, common contract. This practical approach could realise much needed financial efficiencies for the NHS, by reducing the cost per treatment, and lead to improved outcomes for families by increasing the chances of a successful pregnancy for women.

“The Claimant observes that the perceived vice which has to be tackled is the so-called “postcode lottery”, but in my view it goes further than that. Any system which has the duty of distributing finite resources must do so not merely on a basis which is not arbitrary (c.f. the

**happenstance of the postcode) but also on a basis which recognises the patient's fundamental human right to be treated in exactly the same way as anyone else with the same clinical need”**

**MR JUSTICE JAY, in the case of Rose v Thanet NHS CCG April 2014, Case No: CO/1272/2014, Royal Courts of Justice.**

We have recently highlighted to the NHS Hillingdon CCG that in addition to only receiving one procedure, some NHS-funded patients from Hillingdon are being asked to pay for additional IVF procedures that NHS patients in other areas are not charged for.

Local women have told us that at a very emotive time in their life, when they feel this one procedure is their only chance of having a child, they felt pressured and compelled to pay in excess of £1000 in additional charges.

We have requested that the NHS NWL CCGs undertake a review of current IVF contracts they commission, so that NHS-funded patients in NWL are not being financially disadvantaged by this other example of inequality for NHS patients receiving the same IVF treatment.

NHS England has a national IVF policy for service personnel in the armed forces and their families, which does allow for 3 IVF cycles and follows NICE recommendations. This creates further inequality in access to IVF as women living on the same street could have

completely different access to NHS-funded IVF. Naturally, armed service personnel and their families give fantastic service to their county and rightly deserve access to the best that the NHS can offer them, but this inequality raises the question: “are other women in England less deserving to have reduced access to NHS IVF treatment?”

Sadly, to date, the NHS NWL CCGs have not been sympathetic to the views we have put across and we have been unable to improve fair access to fertility treatment for NWL residents.

**“Access to NHS funded IVF is not easy and women already need to meet strict medical criteria before they can be considered for IVF and must have tried all other options first. This is not a life-style choice, nor an “easy option” for women but changes to our society and demands made on women, make starting a family difficult enough without facing a postcode lottery in access to IVF. Women across North West London are facing an uphill struggle to access fertility treatment that has been recommended by NICE as being both clinically effective and cost-effective.”**

**Graham Hawkes CEO, Healthwatch Hillingdon.**

“This represents a postcode lottery in care. Our members have paid taxes all their lives for a National Health Service and do not expect the NHS to deny women an opportunity to have a child in this random manner.”

- *Oak Farm Residents Association*

“Today we should live in a society of equality so I can not understand how a select few CCG’s can justify a post code lottery of entitlement to IVF treatment.” - *Ms E*

“Not my fault that we lost the baby, but not able to get NHS IVF as we had used our 1 cycle of IVF.” - *Ms D*

“why as a 30 year old woman who has been trying to fall pregnant for 3 years and after various health checks, blood tests, procedures and an operation why I am unable to get a referral for IVF treatment. My partner who I love has a child from a previous relationship is the reason.” - *Ms B*

Due to having a medical procedure years ago, G was advised that her fertility would be affected and would need IVF.

“I pay tax to the government and I don't understand why I am unable to get the same NHS service as other women in England. This is really unfair on women. We are now thinking of moving to a neighbouring area, Hertfordshire, so that we can get NHS-funded IVF. But is sad that I am been forced to move from where I live (Hillingdon) due to stupid local NHS rules.” - *Ms F*

“I believe that this is very unfair and would ask that this issue is taken up urgently. Being unable to conceive naturally is a very alarming situation and to be discriminated due to age is not acceptable” - *Ms A*

“Living within the London Borough of Hillingdon, I wasn't entitled to an AMH blood test ... All my taxpaying life I've lived here (Hillingdon) and I'm being penalised for living here, whereas my friends in High Wycombe got three rounds of IVF and Hampshire gets two and they're only a couple of miles down the road either way. It really does depend on where you live and I think that's absolutely appalling.” - *Ms C*

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## Healthwatch Hillingdon Recommendations

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- 1 NHS England to consider publishing robust national guidance to CCGs which may (a) assist in improving access to NHS-funded IVF treatment that meets NICE Clinical Guidelines and (b) assist NHS England in meeting its equality duty obligations.
- 2 Recommend that NHS England and Healthwatch England/CQC considers undertaking a national review of the access to fertility services for NHS patients and consumers.
- 3 We recommend that this national fertility review should give careful consideration of the merits of nationally commissioning NICE recommended fertility treatment at scale rather than delegating this responsibility to the local level.
- 4 Recommend that the national fertility review explores whether the current provision and commissioning arrangements are working in the best interests of patients and consumers or are placing unnecessary hurdles and/or significant financial burdens on consumers who should be able to access NHS fertility services based on clinical need.

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Healthwatch Hillingdon believes that commissioning fertility services at scale across England, with a fixed national NHS tariff, incorporating nationally agreed outcome measures, and phasing in the services over a number of years, will be more cost effective for the NHS. It will eliminate the current inequality in access

to fertility services and most importantly, improve the clinical outcomes for people needing IVF treatment and increase the chances of a successful pregnancy.

Healthwatch Hillingdon stands ready and willing to contribute its insight to a national fertility review.

# Our plans for next year



## Future priorities

**The delivery of our statutory roles will always be our main priority. Focusing upon, and listening to, what our residents are saying, and protecting their rights, is key to everything we do.**

We look forward to the next year and delivering Healthwatch Hillingdon's operational priorities, as set out in our 2015-17 work-plan.

We will continue to have an oversight of the quality and safety of care services in Hillingdon and be strategically involved in change programmes in the borough and across NWL.

2016 will be pivotal for The Shaping a Healthier Future programme as paediatric services will transfer to Hillingdon Hospital from Ealing at the end of June.

The delivery of the Childrens and Young Persons Mental Health Transformation Plan, and the development of the Better Care Fund, Accountable Care Partnerships and the Sustainability and Transformation Plans will also be high on our agenda.

Work-plan projects, like Discharge and Maternity are already underway and will be completed during the coming year.

After each project is completed we will evaluate our position before commencing work on the next priority. This allows us to look at current data and patient feedback, to ensure the priority remains relevant; or that another emerging priority should not take preference.

If, as this year, it is found no changes are required, in late 2016 and early 2017 we will be concentrating on:

- Care Homes
- Primary Care

## Priority Focus

### Discharge from Hillingdon Hospital

The discharge from Hillingdon Hospital sets out to engage with adults over the age of 65 with complex needs or long term conditions who have been recently discharged from Hillingdon Hospital to home, or another care facility.

With the Better Care Fund and the general integrated care programmes being implemented across Hillingdon, we felt it was important to get an understanding of how services are working now. This will enable us to benchmark current hospital and community services and gauge as changes are implemented how services

**Are you an older person who has recently been discharged from hospital?**

**We want to hear your experiences**

If you are aged over 65 or are a carer, friend or relative we want to hear your views.

**Tell us:**

- What went well?
- What didn't go so well and could have been improved?

**your experience**

Giving feedback takes minutes, but the impact could last a lifetime

**healthwatch Hillingdon**

are improving for residents. It also gives us an opportunity to help shape future services through the experience of our residents.

**your voice counts** **healthwatch Hillingdon**

**Tell us your experiences of Maternity Care in Hillingdon**

We want to hear about your care...

**Antenatal**  
**Labour**  
**Postnatal**

**your experience**  
Giving feedback takes minutes, but the impact could last a lifetime

### Maternity Care in Hillingdon

Ealing Hospital's Maternity Unit closed in July 2015 and it is expected that an additional 600 women from Ealing will give birth at Hillingdon Hospital's Maternity Unit in the coming year.

The 'Maternity Care in Hillingdon' project is seeking the views and experiences of women who choose to give birth at Hillingdon Hospital and using this evidence, evaluate the provision of the maternity for both Hillingdon and Ealing residents.

This project is being carried out over an 8 month period and our engagement programme will speak to women at the hospital and children's centres.

### Sustainability and Transformation Plans

As NHS England look to implement the the Five Year Forward View, health and care systems across the country are being asked to work together locally to plan future services around the needs of their local population. The Sustainability and Transformation Plan (STP) sets out shared plans for the next five years to bring together providers and commissioners of care (both local government and NHS) to deliver a genuine place based plan for the borough.

In Hillingdon the STP is seen as a platform for the development of new and innovative ways of funding Health and Social Care over the next 5 years. Local relationships are advanced and we are in a strong position to develop our STP.

Healthwatch Hillingdon is already well placed and part of the STP Deliver Group in Hillingdon. In our input at this early stage we have already asked for patient choice and cross boundary provision to be strengthened in the initial draft plans.

This year we want to ensure that as the Hillingdon STP evolves that our residents are not only well informed, but there is strong engagement with them so that they play a central role in the developments of plans and strategies.

### Accountable Care Partnerships

Accountable Care Partnerships (ACPs) emerged as a key part of NHS policy in the Five Year Forward View. ACPs bring together providers in new organisational forms, to deliver integrated care around patients and are seen as part of essential actions to manage quality and financial sustainability for the NHS.

In Hillingdon, an ACP is being developed which brings together The Hillingdon Hospitals FT, Central North West London FT, the GP Networks and the voluntary sector organisation, Hillingdon4All. With a new Programme Director appointed, the organisations are currently working collaboratively, to develop a new joint governance structure, which will enable the ACP to deliver services in shadow form in 2016.

The integrated care delivered by the ACP will initially be for older people with long term conditions. It is planned that this will progress to all older people and other population groups with long term conditions during the next 5 years, as the Five Year Forward View is realised.

We are currently in discussion with the ACP to look at how they will involve the public in its development and are exploring the value of Healthwatch Hillingdon.

As we move into 2016-17, like the STP, we want to strengthen the involvement of the Hillingdon public in the ACP and ensure patient engagement and public accountability is imbedded in its structure.



# Our people



## Decision making

### *Our Board as at 31<sup>st</sup> March 2016*

- *Jeff Maslen, Chairman*
- *Stephen Otter, Vice Chair*
- *Allen Bergson*
- *Richard Eason*
- *Turkay Mahmoud*
- *Baj Mathur*
- *Burns Musanu*
- *Kay Ollivierre*
- *Rashmi Varma*

Healthwatch Hillingdon is a Company Limited by Guarantee. The Board are bound by the companies Memorandum of Articles.

Board members act as Directors of Healthwatch Hillingdon under the Companies Act 2006 and as Trustees of Healthwatch Hillingdon under the Charities Act 2011.

Healthwatch Hillingdon is governed by a Board that consists entirely of lay people and volunteers. Selection and recruitment to our Board is through an open and transparent recruitment process.

Meetings of our Board are held in public and agendas, minutes and reports of our meetings are published on our website and available upon request.

We have published our 'Relevant Decision Making Policy' on our website, setting out how the Healthwatch Hillingdon Board makes relevant decisions. This policy is reviewed annually to ensure that the decisions taken by Healthwatch Hillingdon follow national best practice

and reflect any guidance from Healthwatch England.

The focus of our work for 2015-17 has been aligned with our Strategic Priorities and selected to reflect our statutory requirements, and the findings from in-depth analysis of data and intelligence gathered from our residents.

The Work Plan is an open and transparent document that is shared publically on our website and with collaborative partners. We actively seek feedback on our plans and priorities and review the Work Plan annually to validate its relevance, take note of feedback and update it where necessary.

## Our Staff Team

- *Graham Hawkes, Chief Executive*
- *Raj Grewal, Operations Coordinator*
- *Pat Maher, Administration & Support*
- *Charmaine Goodridge, Outreach & Volunteers*
- *Nina Earl, Engagement & Communications (until Oct 2015)*
- *Victoria Silver, Childrens Engagement (until July 2015)*

## Our Volunteers

Volunteers play an important role in enabling Healthwatch Hillingdon to achieve its core functions. We consider ourselves very fortunate therefore to have a team of dedicated volunteers who bring with them a wealth of skills and experience and a passion to improve health and social care services for local people.

During 2015/16 volunteers undertook a range of activities on behalf of Healthwatch:

- **Engagement** - Manning stalls, attending events

- **Social Media** -Raising the profile of Healthwatch through social media outlets such as Facebook & Twitter, YouTube
- **PLACE Inspections** - conducting place inspections at The Hillingdon Hospital and other care facilities
- **Administration** - data inputting and office based activities

In all a total of 52 volunteers supported our work, contributing a staggering 2366 hours of their valuable time and many of those volunteers received additional training where needed to enable them to carry out their role effectively.



Without their contribution, it would be impossible to do all that we do and as our pool of volunteers continues to grow we will be in a better position to expand the work we do and reach out to those communities who would otherwise not be heard.

### Case Study 1 - Shakira Sayyed

Before joining Healthwatch Hillingdon in March 2016, Shakira had previously volunteered with Healthwatch Croydon and so was familiar with the work of local Healthwatches. When she visited our shop in early February to enquire about volunteering opportunities with Healthwatch Hillingdon, our Outreach &

Volunteer Officer was at hand to talk her through the current volunteering opportunities available to her. She quickly expressed an interest in the Data Entry role and it wasn't long before she was busy getting stuck into updating our various databases.



“I joined Healthwatch Hillingdon in March 2016 as a data entry volunteer. I thoroughly enjoy my work and the team are warm, friendly and supportive. As well my data entry role, I have also participated at engagement events attended by Healthwatch, helping to gather the views of local communities on health and social care. It feels great to know I am making a difference!

I would recommend volunteering to everyone, it's a fantastic way to build our confidence, meet new people, make new friends and learn new skills.

Shakira Sayyed - Volunteer

### Case Study 2 - PLACE Assessors

The most popular volunteering role at Healthwatch Hilingdon is being a PLACE Assessor.

Patient-led assessments of the care environment (PLACE), are carried out in

hospitals and assess how the care environment supports patient's privacy and dignity, food, cleanliness and general building maintenance.

As part of a team our Assessors have the opportunity to visit Hillingdon, Mount Vernon and Harefield Acute Hospitals; and Central North West London FT's mental health and childrens units at Riverside and Woodlands in Hillingdon.

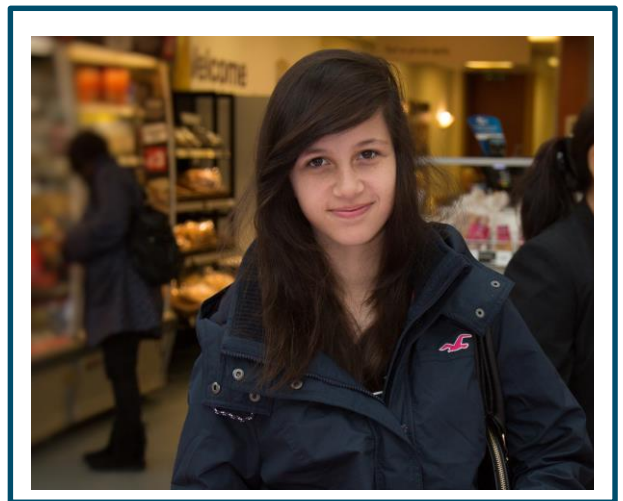
As anyone of our 10 assessors will tell you, it is easy to become an Assessor. The training is light, but thorough and you can build your confidence by shadowing somebody else and you will really enjoy it.

**I joined Healthwatch to help improve our NHS and social care. Healthwatch volunteers walk around the hospital or care service with the service's staff to assess the care environment in a range of acute and mental health services and care providers. It's part of a national survey called PLACE. Services are getting better and its good to know that we can all be part of the change. During assessment visits we report on cleaning and hygiene, safety and condition of equipment and decoration. We also taste and observe the food service.**

Roger Dewey - Volunteer

### Case Study 3- Big Thanks to the Healthwatch Hillingdon Team

The past 2 weeks have been a great experience for me, and something that will definitely help me in the future. I've learnt a great deal a lot more than I probably would have if I just done my work experience at a random retailer like



what was originally planned- no regrets from that stand point.

I'm very grateful to how kind you've all been, and how well you've all managed to put up with me. From this experience I can really see how much effort it takes to make change; It's wonderful to see people out there still willing to fight for it.

The skills and new found knowledge is greatly appreciated and I can see it really helping me, thanks to the experience I have a clearer idea what i want to in the future. If I had been more confident speaking, then I'm sure I would have enjoyed my time a lot more. I still found it interesting though, and realized for the first time how satisfying getting work done can be.

It's a great cause you're all working for and I hope you get the recognition you deserve. Keep up the good work!

Thanks for everything, best of wishes. N.

To find out more information about our volunteering opportunities please email: [charmaine.goodridge@healthwatchhillingdon.org.uk](mailto:charmaine.goodridge@healthwatchhillingdon.org.uk) or, call us on 01895 272997

# Our finances



## Financial Statement 2015/16

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		175,000
Brought forward 2014/2015		15,647
Total income		190,647
EXPENDITURE		
Operational costs		24,550
Staffing costs		133,423
Office costs		9,958
Total expenditure		167,931
Balance brought forward		22,716

NOTE: The Financial Statement is provisional and subject to the Healthwatch Hillingdon accounts for the year 2015-16, being examined by an independent examiner under section 146 of the Charities Act 2011.

# Contact us



## Get in touch



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Healthwatch Hillingdon



[@healthwatch\\_LBH](https://twitter.com/healthwatch_LBH)

**Registered Office:** Healthwatch Hillingdon, 20 Chequers Square,  
Pavilions Shopping Centre, Uxbridge UB8 1LN  
Company Limited by Guarantee  
Registered in England and Wales

**Company Number:** 8445068

**Charity Number:** 1152553

We will be making this annual report publicly available on 30th June 2016 by publishing it on our website and submitting it to Healthwatch England, Care Quality Commission, NHS England, Hillingdon Clinical Commissioning Group, London Borough of Hillingdon, Hillingdon Health and Wellbeing Board and the External Services Scrutiny Committee.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format, please contact us at the address above.

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