

HEALTHWATCH KENT PRESENTATION

Health Overview and Scrutiny Committee
Friday 2 September 2016

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Healthwatch Kent

Healthwatch Kent : Who are we?

- We are the consumer champion for health & social care
- Our aim is to improve services by ensuring local people's voices are heard
- FREE Information & Signposting service

0808 801 0102

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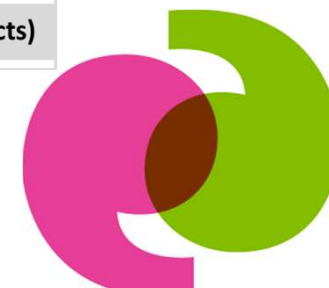
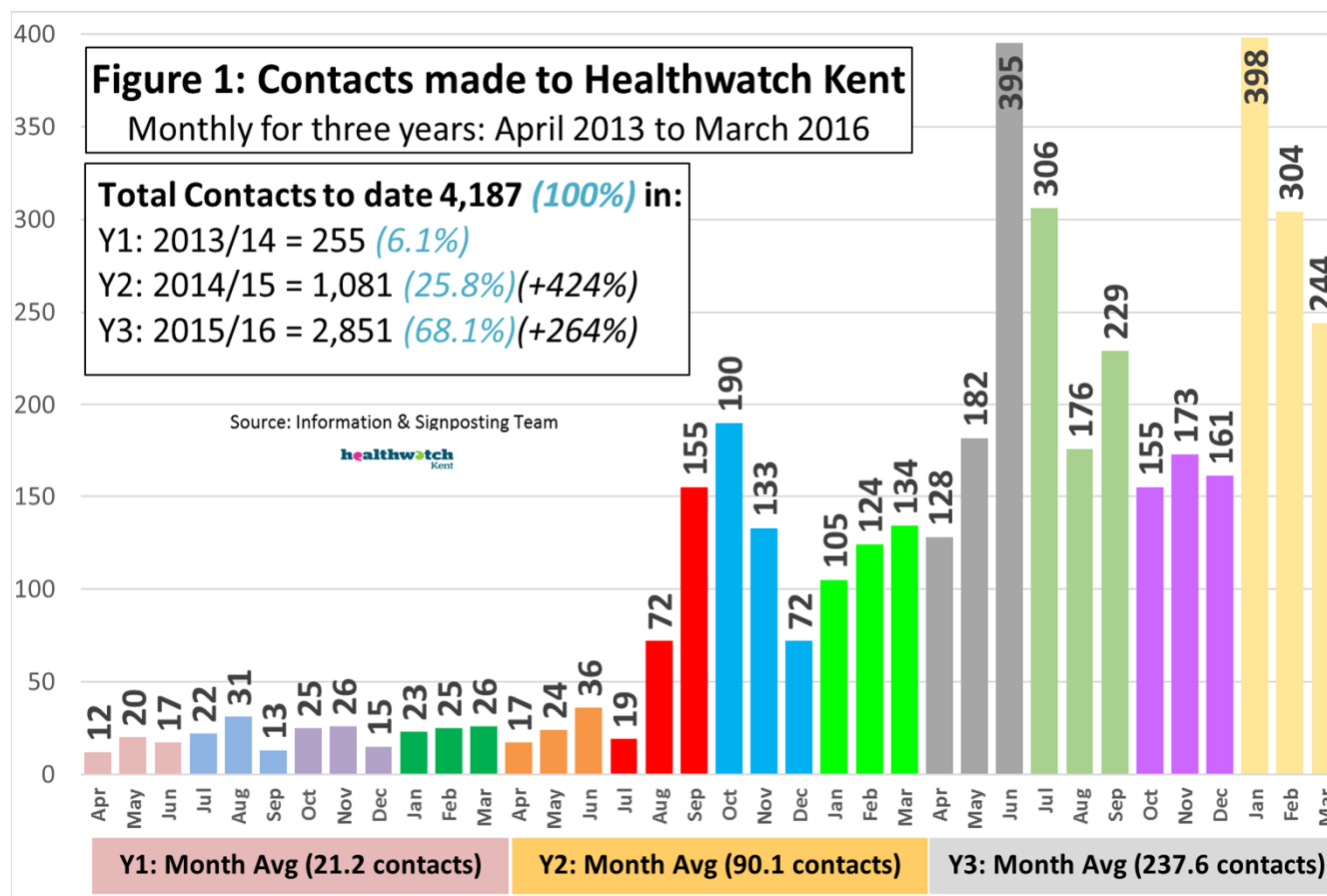


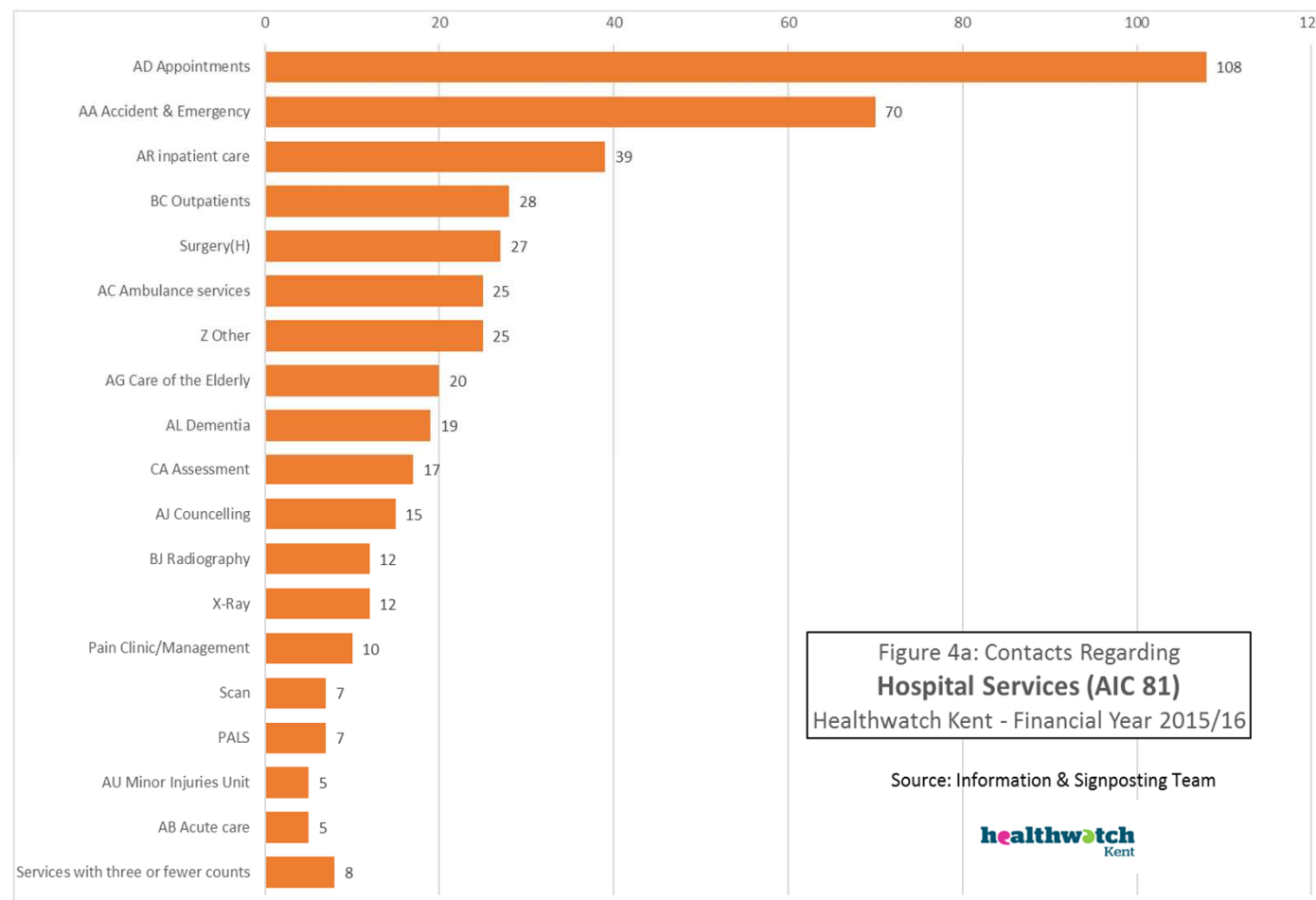
What have we done this year?

- Used our Enter & View power to visit 20 services
- Took our Red Bus Tour to every Kent district
- Launched our Guide to Consultations
- Engaged thousands of people through variety of channels
- Proactively visited and listened to seldom heard and vulnerable groups
- Held regular feedback sessions for the public in hospital foyers
- Won an award!

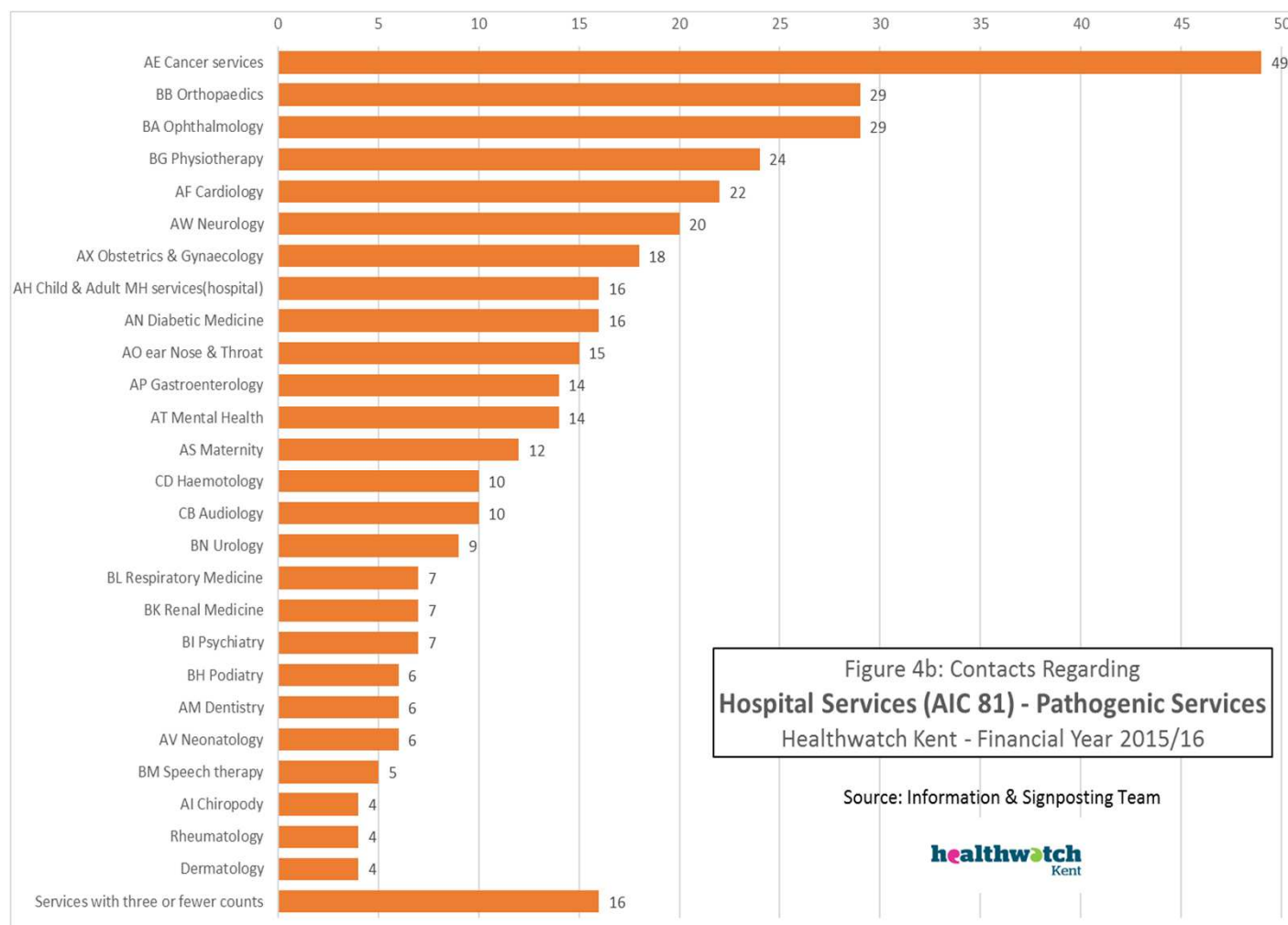


Feedback from the public

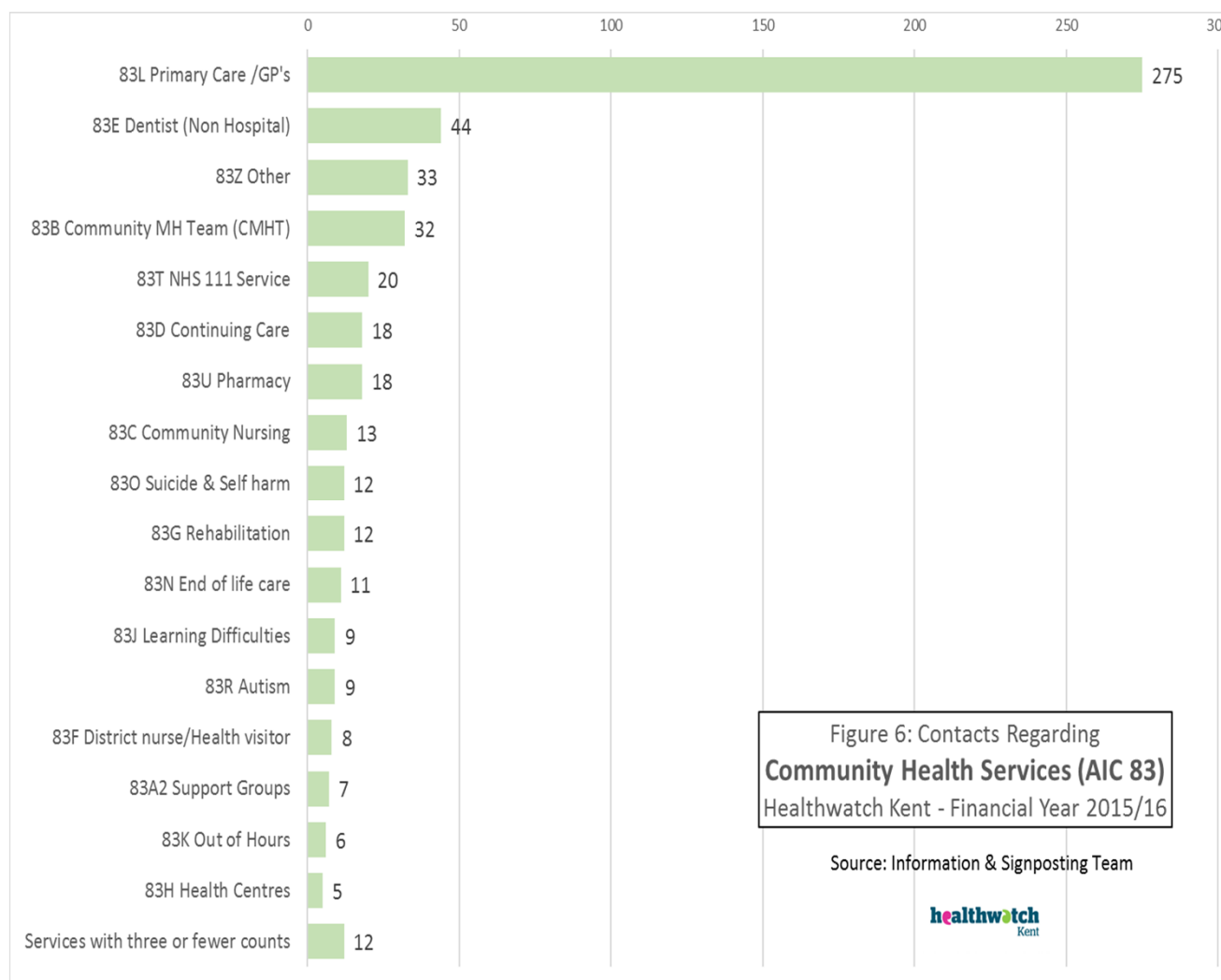




Feedback from the public - hospitals



Feedback from the public - comm NHS



What have we achieved?

- Improved communications for patients in A&E & Outpatients in East Kent
- Improved dignity for A&E patients at Darent Valley Hospital
- Uncovered and escalated 4 cases of Safeguarding in Care Homes to KCC
- Together with patients we secured a single point of access to mental health services and a carers charter
- Ensured patients were heard during changes to stroke services and hospital services in East Kent
- Created a Kent wide physical disabilities form



Sustainability & Transformation Plan

- Key Priority
- Role of Healthwatch Kent & Medway in steering group
- Engagement
- Consultation
- Raising awareness
- Monitoring progress



Recent Concerns - Discharge

- Simple/minimal discharge
- Complex discharge
- Discharge Lounge
- Integrated Discharge Team (IDT) (NHS)
- Short Term Pathways Team (Social Services)
- BICA form
- Kent Enablement at Home: KEAH team (Social Services)
- Intermediate Care Rehab Unit/Elm Court (NHS)
- Hospital at Home team (HAHT) (NHS)
- Inpatient Occupational Therapy Service
- Elderly Frail Unit
- Discharge to Assess model



Recent Concerns - Discharge

“I was listened to. I said that I didn’t want carers coming in but we discussed it (with the Short Term Pathways Team) and I agreed to have them for just three weeks”

“They talked about me going somewhere, but I didn’t know where. I wanted to go home, but I knew it wasn’t well enough.”

“I was surprised that I was brought to the rehab ward - I thought that I was going home. I wasn’t told what to expect, they are all very busy anyway at the hospital.”



Recent Concerns - Discharge

- We heard about differences in opinion between hospital social services (Short Term Pathways teams) and the acute team regarding patients' readiness to leave the acute setting and the level of social care support necessary
- There were reports of patients arriving in intermediary care settings who did not appear to be medically stable enough to have left hospital; there were examples of patients who were very unwell being immediately redirected to hospital



Recent Concerns - Discharge

- The Kent Enablement at Home team noted that some discharged individuals' needs do not match their earlier Short Term Pathway Case Officer and inpatient OT team assessments
- The KEAH team are working close to their own internal capacity. There is now a procedure for seeking additional home care, using approved external care providers.
- We heard of one instance where a patient had been assessed in hospital as in need of home care, but had been discharged home only to find that there was no availability in her area. Her daughter was forced to take a loan in order to pay for private care in the intervening period whilst the care deficit was addressed.



Our Priorities

- Hospital Discharge / integration of services
- Carers
- Community Equipment
- Complaints
- End of Life
- Children & Young People / Autistic Spectrum Disorder
- Patient Transport



THANK YOU

ANY QUESTIONS?

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