



**Patient Experience Feedback:
Impact Report
January - December 2018**

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Introduction

Healthwatch Ealing is the independent consumer champion for health and social care in Ealing. In carrying out our statutory duties and functions we gather and analyse patient experience feedback in a number of ways. This report brings together a large majority of Healthwatch Ealing's Patient Experience information gathered through two main channels:

- Patient Experience outreach
- Enter & View visits

Whilst we collect patient feedback and community intelligence on a number of different health and social care services, this report encompasses only some of these. It includes information on the following service or service areas:

- Ealing Hospital
- GP
- Mental Health
- Care Homes (Residential and Nursing)

This report has been compiled in order to obtain an overview of service areas and some of the themes identified in more detail in our quarterly reports and Enter & View reports. Overall statistics and data have been provided alongside example comments. The comments focus on areas for improvement, bringing the richness of the patient voice and areas of concern to the forefront. The report also goes some way to identifying good practice to be shared more widely, provides information on what Healthwatch Ealing (and partners) have done in response to patient experience information, reflecting the impact of the patient voice.

It is our intention to use this report to work with partners - both commissioners and providers - to ensure that the issues highlighted are being taken up in the appropriate forums and channelled through appropriate mechanisms to ensure the patient voice is effecting change.

Our data explained

Healthwatch Ealing uses a Digital Feedback Centre* (on our website) and Informatics system (software sitting behind the Digital Feedback Centre) to capture and analyse patient experience feedback. The Informatics system is currently used by approximately 1/3 of the Healthwatch Network across England and it captures feedback in a number of ways:

1. It asks for an **overall star rating** of the service, (between 1-5)
2. It provides a **free text box** for comment
3. It asks for a **star rating against specific domain areas**, (between 1-5)

In terms of reporting, the above provides Healthwatch with several data sets.

Star ratings provide a simple snapshot average, both overall and against specific domain areas.

When it comes to the free text comment box, this is analysed in two different ways resulting in two different data sets:

- In the first instance, the Informatics system looks at the patient experience **comment in its totality**, using a sophisticated algorithm to analyse words and phrases in order to apply a sentiment score to the overall comment. The sentiment score is translated into an overall positive, negative or neutral sentiment. This is an **automatic process**. Where overall sentiment is highlighted in the report, it relates to this aspect of the process.
- In the second instance, free text **comments are broken down** and analysed for themes and sub themes. Where relevant, up to 5 themes and sub themes can be applied to any one patient experience comment. Upon each application of a theme or sub theme, a positive, negative or neutral sentiment is also applied. This is a **manual process** undertaken by trained staff and specially trained volunteers. The process is overseen by the Patient Experience Officer and regularly audited in order to ensure consistency. Where themes and related sentiment are discussed in the report, it relates to this aspect of the process.

Each of the areas described above provides an independent set of results which can be viewed separately or in conjunction with one another in order to gain an insight into a service or service area. It is important to note that correlation between different data sets may not be apparent, for example, a service may have an overall star rating of 4/5 but also show that 30% of its patient experience reviews are negative in sentiment, overall.

Enter & View data

Enter & View is a specific tool Healthwatch use to gather feedback and information on services at the point of service delivery, by way of an announced or unannounced Enter & View visit. More information can be found in the relevant section in this report and also on our website here, <https://healthwatchealing.org.uk/what-we-do/our-services/>

NB. Findings contained within this report may not be representative of all service users experiences or opinions.

* Invested in by Ealing CCG

Ealing Hospital

January-December 2018



Introduction - Ealing Hospital









Feedback on Ealing Hospital is predominantly gathered by our team of volunteers, led by our Patient Experience Officer, attending Ealing Hospital to talk with patients. Patients, relatives and carers may also visit the Healthwatch Ealing website in order to leave a review and or may share feedback after talking with Healthwatch in another health, social care or community setting.

Overall picture - Ealing Hospital

1113	60%	21%	19%
Unique reviews	Positive sentiment*	Negative sentiment*	Neutral Sentiment*

* Calculated automatically by Informatics

Star rating - Ealing Hospital

Average Rating	Average Individual Ratings
<p>Average rating for January 2018-December 2018 (3.7610062893082)</p>  <p>Overall average (3.9172565291677)</p> 	<p>Ease of gaining appointment </p> <p>Convenience of appointment </p> <p>Cleanliness </p> <p>Staff Attitude </p> <p>Waiting Time </p> <p>Treatment explanation </p>

Themes - Ealing Hospital













Healthwatch Ealing's Digital Feedback Centre and informatics system enables the 'tagging' of reviews under a number of different theme and sub-theme areas. This enables us to analyse the reviews in more detail.

The themes most commonly identified from patient reviews for Ealing Hospital are *Access, Staff, Treatment and Care* and *Administration*, with *Access* receiving the largest number of counts*

*A count is the number of times an issue is identified. One unique review may be tagged or counted up to a maximum of 5 times. On each count a theme and sub theme may be applied, together with a sentiment.

Theme/sub theme	Count	Positive	Negative	Neutral
Access	639	31%	64%	5%
/Waiting times	517	26%	69%	6%
Staff	610	79%	20%	2%
/Attitudes	481	86%	12%	2%
Treatment and care	511	76%	22%	2%
/Treatment explanation	144	78%	24%	1%
/Quality	132	78%	19%	3%
/Experience	103	80%	19%	1%
Administration	468	55	43	2
/Appointment availability	150	49%	50%	1%
/Management of service	149	79%	20%	1%
/Booking appointments	123	41%	57%	2%

Example patient comments highlighting the prevalent access and administration concerns

	<p><i>There is no available staff to speak to. Treatment is fine. Waiting time is bad as they are running behind today.</i></p>
	<p><i>I am a regular patient here and the last time I came I waited over 2 hours. It was really busy, they were some patient all the way by the entrance because there was not space.</i></p>
	<p><i>Its good, very good. The staff try their best. The only thing is to do with the checking I was seating in the wrong area and waited awhile and because there was no one at the reception to tell me the right place to seat. So far that the only thing I don't like.</i></p>
	<p><i>Overall the experience with staff and waiting time is ok. I have appointments every 6 months and today there was no one at the reception and the machines weren't working, so my treatment wasn't explained to me properly.</i></p>
	<p><i>There is no one to tell you where to go. I had an appointment but did not receive a letter only a test so could not find my way.</i></p>
	<p><i>I come here every 3 months for my treatment and sometimes it's difficult to get my appointment, especially when something happened. The waiting time is too long.</i></p>
	<p><i>I saw my doctor then I was told they will send me a letter for next appointment then last week I got a call telling me to come today and the time. Then 10 minutes later someone called and changed the time. Today we came then we don't know who we should see. They are not organised at all.</i></p>
	<p><i>My friend is having an operation, so we are here for an assessment and everything is different. There is no more reception so it's not easy to speak to someone or find your way around.</i></p>
	<p><i>The main problem is that you wait long for your appointment until few days before they tell you that they have to postpone it. I am really angry.</i></p>
	<p><i>The appointment system and booking system is bad. I made an appointment with the dermatologist department, they cancelled two hours before my appointment and rebooked it three weeks later. Sometimes I've had a rebooking after cancellation of my appointments 3 months after.</i></p>
	<p><i>Since April last year after a scan, the follow-up appointments had been cancelled over 3 times from what I can remember and an only getting to see the doctor now for a follow-up, which is almost a year now.</i></p>
	<p><i>I had a treatment in April last year and had an appointment booked in jun and 2 days before I received a latter of cancellation, then another cancellation in November and now I am here for the visit. Almost a year.</i></p>

Healthwatch Ealing has also undertaken a number of Enter & View visits to wards at Ealing Hospital. The reports can be found on our website [here](#) under the Enter & View tab.

Impact

London North West University Healthcare NHS Trust (LNWH)

Healthwatch Ealing are regular attendees of London North West University Healthcare NHS Trust (LNWHT) Patient Experience Committee. Our Quarterly Patient Experience Reports have been presented at the Committee and the concerning themes drawn out.

In response the Chief Nurse at LNWHT requested an internal report on the number of outpatient appts cancelled within 6 weeks and those cancelled within 48hrs, the number of appointments rebooked and reason why.

The Head of Patient Experience was also tasked with finding a suitable way in which Healthwatch Ealing Patient Experience Reports could be incorporated into existing internal patient experience mechanisms, ensuring comprehensive analysis and triangulation of relevant information. There have been some changes within the team and this is still in process. The feedback Healthwatch Ealing has provided has helped drive the establishment of a new Access Centre to address some of the booking and contact issues experienced in outpatients. Now in place for 18 months the Access Centre is still an improving service, with new features being developed and clinics being added to it during summer 2019. Healthwatch Ealing will monitor its implementation and impact on changing patient experience comments.

Ealing CCG

Ealing CCG is in regular receipt of the Healthwatch Ealing Quarterly Patient Experience Report which is tabled at various committee meetings across the organisation. The report contents are reviewed, and relevant information drawn out to support different aspects of their work.

The information relating to Ealing Hospital has, in particular, helped validate the CCG's focus on supporting improvements to LNWT elective pathway from GP referrals to hospital assessment, diagnostic, consultation and treatment (as part of the 18 weeks referral to treatment standard). For Ealing CCG, performance from commissioned acute hospital providers - Ealing Hospital and others - was 79% in 2017/18 against a national target of 92%. With the additional focus and support it increased to 86% in 2018/19. The CCG continues to use Healthwatch Ealing data to monitor providers.

The data and feedback around appointment availability, bookings and cancellations has been used by Ealing CCG to inform LNWT development of their new Access Centre. The new Access Centre receives all of the Trusts referrals for appointments and will make it easier to book and communicate around appointments.

The CCG has also used Healthwatch Ealing data to feed into their collaborative work with North West London CCGs, looking to jointly improve emergency care pathways. Focussing on this type of care reduces the occurrence of hospitals having to cancel routine appointments and planned elective operations. Improvements should have a knock-on effect for patients in outpatient services.

Ealing GP surgeries

January-December 2018



Introduction - GP surgeries









Feedback on GP surgeries in the borough is predominantly gathered by our team of volunteers, led by our Patient Experience Officer, attending individual practices to talk with patients. Patients, relatives and carers may also visit the Healthwatch Ealing website in order to leave a review and or may share feedback after talking with Healthwatch in another health, social care or community setting.

Overall - GP surgeries

2749	63%	20%	17%
Unique reviews	Positive sentiment*	Negative sentiment*	Neutral Sentiment*

* Calculated automatically by Informatics

Star rating - GP surgeries

Average Rating	Average Individual Ratings
<p>Average rating for January 2018-December 2018 (3.9196071298654)</p>  <p>Overall average (3.9172565291677)</p> 	<p>Ease of gaining appointment </p> <p>Convenience of appointment </p> <p>Cleanliness </p> <p>Staff Attitude </p> <p>Waiting Time </p> <p>Treatment explanation </p>

Themes - GP surgeries

The themes most commonly identified from patient reviews for GP are *Administration, Staff, Access, Treatment and Care*, with *Administration* receiving the largest number of counts*

*A count is the number of times an issue is identified. One unique review may be tagged or counted up to a maximum of 5 times. On each count a theme and sub theme may be applied, together with a sentiment.

If we look at some of the most frequently counted sub themes within each category, we can see that the most counted theme, Administration, also includes a large element of access issues.










Theme/sub theme	Count	Positive	Negative	Neutral
Administration	2669	52%	46%	2%
/Booking appointments	1287	49%	49%	2%
/Appointment availability	978	46%	52%	2%
/Management of service	339	85%	14%	1%
Staff	1571	83%	14%	3%
/Attitudes	1337	85%	12%	3%
/General	144	79%	16%	5%
Access	1072	31%	62%	7%
/Waiting times	732	27%	65%	8%
/General	188	21%	76%	3%

Treatment and care	923	83%	14%	2%
/Quality	244	91%	9%	0%
/Treatment explanation	223	87%	9%	4%
/Experience	217	83%	16%	1%
/Safety of care/treatment	206	77%	19%	4%





GPs that have received over 50 unique reviews during the period are listed below.

NB. The sentiment information on the right-hand side may not correlate with the star rating as they relate to two different data sets. Please see the box in the main introduction section of this report for more information.

Service	Service Type	Reviews	Rating	Positive	Negative	Neutral
Gordon House Surgery,		146	★★★★☆	75%	14%	10%
Hill Crest Surgery / Drs Dhatt and Tailor		105	★★★★☆	70%	10%	20%
The Mill Hill Surgery		98	★★★★☆	66%	17%	16%
Hillview Surgery / Dr Shergill & Partners		95	★★★★☆	59%	29%	12%
Jubilee Gardens Medical Centre		95	★★★★☆	40%	33%	27%
Crown Street Surgery		94	★★★★☆	59%	22%	19%
Northfields Surgery / Dr D Cowen & Partners		92	★★★★☆	70%	12%	18%
Florence Road Surgery / Dr Evans & Partners		85	★★★★☆	64%	18%	19%
Waterside Medical Centre / Network Healthcare Solutions Limited		84	★★★★☆	56%	30%	14%
Ealing Park Health Centre		81	★★★★☆	72%	14%	15%
Queens Walk Practice		79	★★★★☆	76%	13%	11%
Greenford Avenue Family Health Practice / Healthcare 360 Limited		78	★★★★☆	51%	17%	32%
Featherstone Road Health Centre		75	★★★★☆	45%	31%	24%
Cuckoo Lane Practice		74	★★★★☆	78%	11%	11%
Grosvenor House Surgery		72	★★★★☆	51%	28%	21%

Service	Service Type	Reviews	Rating	Positive	Negative	Neutral
Hanwell Health Centre - Drs Lees Naish Bassl		71	★★★★☆	70%	15%	14%
The Mansell Road Practice		66	★★★★☆	55%	18%	27%
Cloister Road Surgery / Drs Robinska,Sillitoe and Dhall		64	★★★★☆	72%	16%	13%
Meadow View Surgery		64	★★★★☆	77%	13%	11%
The Saluja Clinic		63	★★★★☆	60%	22%	17%
The Allendale Road Surgery		61	★★★☆☆	51%	30%	20%
Dormers Wells Medical Centre		53	★★★★☆	43%	34%	23%
Goodcare Practice		53	★★★★☆	70%	17%	13%
The Barnabas Medical Centre		51	★★★★☆	75%	12%	14%

Example patient comments highlighting the prevalent access and administration concerns

	<i>Its not easy to get an appointment especially in the morning when everyone is trying to book an appointment. if you call after 8 you won't get a same day appointment. Its hard to get through to someone on the phone. Its hard when you are working to be able to call at 8am.</i>
	<i>It's not easy to get an appointment and it's very hard to get through to someone on the phone. The line is always busy and they are always running late. Sometimes I need to wait one hour for to see the doctor.</i>
	<i>There is a long waiting for appointment, however I am very happy with doctors treatment. It's very hard to get an appointment when you phone you can be on hold for 10 to 20 minutes before speaking to someone.</i>
	<i>It's fine if you want to see the locum doctor there is no problem but if it's the registered doctor you have to wait weeks.</i>

<p>It's easy to get an appointment but if you want to see the same doctor you have to wait long. I had a blood test done 1 month ago and only today I am here for the results because I wanted to see the doctor that referred me.</p>
<p>It's okay but I don't like that I have to see different doctors everytime we come and if you want to see a specific doctor you have to wait for 2 weeks.</p>
<p>Generally its good, in the last few months it has been difficult to get an appointment. before you need to wait two days for an appointment now at least 10 days.</p>
<p>It's okay but the worse part is the wait for appointment, you have to wait 3 to 6 weeks appointment. The staff are helpful</p>
<p>It's easy to get an appointment but there is a long waiting. It's not their fault there are too many patients and less doctor.</p>
<p>It's hard to book an appointment and I don't always get the doctor I like.</p>
<p>The doctors are great but there is a long waiting. Especially when you are sick and you have to sit here for hours that's not great. Certain doctors are great.</p>
<p>When you call in the morning, it's easy to get an appointment but other times when you want to book normal appointments it's not easy sometimes more than 10 days wait.</p>
<p>With my doctor when I make an appointment they tend to tell me I've got wait two weeks to be seen. When it's urgent I really have to stress that I need to see the doctor.</p>
<p>I can get an appointment as soon as possible. The doctors and staff are okay but appointments need to be longer; 10 mins is not long enough.</p>
<p>It is not very easy to get an appointment because when I call the phone its busy. Also, I usually cant find an appointment on the day I work and I end up getting one a week after. The waiting time for this surgery is also a bit long.</p>
<p>The surgery is always busy and crowded. I always have to say my appointment is urgent even if it's not just to ensure I get one.</p>
<p>It was a new experience to use the surgery in the UK and I've noticed doctors get changed regularly. So that was new for me.</p>
<p>It's a bit difficult to book an appointment because you need to phone at 8:30 am and then the phone is engaged a so you constantly have to keep phoning.</p>

Impact

Healthwatch Ealing regularly attend the Ealing CCG Quality & Patient Safety Committee, and Primary Care Commissioning Committee where the quarterly report and key findings are presented.

Individual GP Practice

Through the Patient Experience Programme our Patient Experience Officer has been able to share insights and intelligence at Practice level directly to Practice Managers. This has resulted in changes on the ground at some individual practices. For example, one practice changed their telephone system based on feedback from our visits, resulting in more positive patient experience feedback as a result.

The process for publication of the Healthwatch Patient Experience Quarterly Reports now involves sending a copy to GP practices in order that they may respond to any issues identified. Anecdotal feedback from GPs and Practice Managers is that has made them listen and think about patient experience more.

Ealing CCG

Ealing CCG recognise the patient experience data provided by Healthwatch Ealing. It is similar to that understood through other intelligence and data sets and continues to provide validation for their programmes of work including:

- + Ensuring GP Access during contractual hours of 08:00-18:30 is a reality for patients at every single practice.
- + Driving GPs to provide a minimum of 100 clinical consultations per 1000 population per week with additional appointments during the winter months (as part of the Access specification within the Ealing Standard).
- + Driving improvements to the uptake and utilisation of three Extended Access Centres providing evening appointments 18:30-20:00 and weekend appointments 08:00-20:00 for all Ealing registered patients.

The above areas continue to be monitored by Ealing CCG and resulting work plans are put in place to drive improvements. Throughout the course of the year Healthwatch Ealing data provides real time feedback regarding any changes to patient experience on the ground.

Healthwatch Ealing data has also:

- + Helped CCG Network Relationship Managers (NRMs) have targeted conversations with practices around the number of phone lines and how easy it is to get through on the phone.
- + Helped add weight to patient experience conversations at the CCG Patient Engagement Reference Forum (PERF).
- + Helped identify where good practice is happening which has led to NRMs undertaking additional visits and sharing findings more widely across other GPs in the borough.

Going forward

- + The data has highlighted some gaps in feedback from smaller practices and Q1 of 2019/20 will be directed towards visiting these practices repeatedly over the period.
- + Ealing CCG are seeking to incorporate data from Healthwatch Quarterly Patient Experience Reports into their Ealing Standard dashboard.

Residential Care Homes and Nursing Homes

Enter & View reports 2017-2019



Introduction - Care Homes

Healthwatch Ealing has undertaken a number of Enter & View* visits to Residential and Nursing Care Homes across Ealing since September 2017. The following homes have been visited:

Site	Residential /Nursing	Date of visit
Raj Nursing Home	Nursing	8 th January 2019
Beech Haven	Residential	22 nd November 2018
Kent Lodge	Residential	13 th November 2018
Roshini Care Home	Residential	5 th November 2018
Kingsley Care Home	Residential	30 th October 2018
Blakesley House Nursing Home	Nursing	26 th September 2018
Acton Care Centre	Nursing	9 th March 2018
Downhurst Residential Care Home	Residential	23 rd February 2018
Chaston House Care Home	Residential	8 th February 2018
Sycamore Lodge	Nursing	30 th January 2018
Hanwell House	Residential	15 th January 2018
Elm Lodge	Nursing	8 th January 2018
Telford Lodge	Residential	30 th November 2017
Pranam Care Centre	Residential	10 th November 2017
Threen House	Nursing	30 th October 2017
Torkington House Care Home	Residential	13 th October 2017
Martin House Care Home	Nursing	15 th September 2017

The Ealing Care Provider Quality Dashboard lists 20 Nursing Homes and 33 Residential Care Homes in the borough providing fully or partially funded health and or social care for individuals. Healthwatch Ealing has visited 17 of these, approximately a 1/3 of the total. Some homes provide both residential and nursing care within the same setting.

* Enter & View is a statutory power conferred upon Healthwatch by the Health and Social Care Act 2012. It allows our authorised Enter & View Representatives to enter and view any publicly funded health and social care services in the borough, to collect the views of service users at the point of delivery, and to collect the

views of carers and relatives of service users. These visits can be agreed in advance with the service we are visiting or can be unannounced spot checks. It is important to remember that Enter & View is an engagement tool, not an inspection. The aim of Enter & View is to put together a picture of what people think of the care they are receiving.

In undertaking Care Home Enter & View visits in Ealing, we used Healthwatch England's indicators of a good quality care home to assess the homes. The indicators are:

1. Have strong, visible management
2. Have staff with time and skills to do their jobs
3. Have good knowledge of each resident and how their needs may be changing
4. Offer a varied programme of activities
5. Offer quality, choice and flexibility around food and mealtimes
6. Ensure residents can see health professionals such as GPs and dentists regularly
7. Accommodate residents' personal, cultural and lifestyle needs
8. Be an open environment where feedback is actively sought and used

These are discussed in more detail below.

Strong, visible management

Overall the majority of residential and nursing homes we visited were able to demonstrate strong visible management, displaying:

- Familiarity with residents
- Good communication and teamwork with staff members
- Staff members reporting good communication and teamwork with manager
- Corresponding information from management and staff
- Regular staff meetings

There were a small number of homes where we had concerns about the management. This was based on staff reporting a lack of communication and teamwork, and information between the two parties not corresponding. These same homes often fared less well in our overall analysis on their quality as the impact of less strong and visible management was felt throughout the home.

Staff have the time and skills to do their job.

This area varied from home to home and by individual staff member.

The ratio of staff to residents or patients varied throughout the homes, from 1:3 to 1:7. Those with the highest number of residents or patients per staff member also

appear to be those homes more likely to have a high staff turnover and report higher usage of agency staff.

There were two homes where staff verbally reported not feeling they had the time and skills to do their job. These were also the homes with higher patient to staff ratio and those that reported dissatisfaction with their induction.

In respect of scheduled supervision and annual appraisals, where this issue was discussed partially or fully with staff and management, all homes highlighted that these took place and overall, the majority of homes staff did report being satisfied with the induction process and the handover process.

There were a few homes where staff reported being dissatisfied with the break entitlements and wages. The breaks entitlement, in particular, was very rarely fully utilised by staff.

In terms of good practice, one home highlighted they had a mentor scheme for staff and the majority also highlighted a range of non-mandatory training that was on offer or provided to staff members.

Staff have a good knowledge of each resident and how their needs may be changing

Overall, staff at all the homes were able to demonstrate a positive relationship with residents, familiarity with their needs/preferences, and that communication with the resident's family, where appropriate, did take place. There were only two instances where representatives felt staff were only partially able to demonstrate an understanding of residents needs/preferences.

In terms of good practice, there were three homes that were able to clearly outline how they interviewed new residents to assess their needs and preferences and another three homes were able to outline a procedure for using non-verbal communication.

Where it was discussed fully or partially, homes were also able to highlight daily update of handover notes and monthly update of care homes. There was only one home that did not appear to undertake daily handover notes.

Good practice was highlighted in one home by staff being very clear around knowledge of residents and able to recognise atypical behaviour eg. Post Flu jab. Another home demonstrated how they accommodated a Spanish resident, using a Spanish dictionary, getting interpreters for meetings and were in the process of producing a Spanish menu.

The home offers a varied programme of activities

The activity 'offer' varied significantly from home to home depending on the size of the home, the number of residents or patients able to participate and any affiliations with 'sister' homes or other establishment. The following good practice was identified:

- Dedicated activity coordinator in place

- Activity board displayed
- Activity schedule in place with daily activities on offer
- Independent activities
- Regular group outings
- Independent outings with relatives/friends supported/encouraged
- Garden
- Religious cultural celebrations and activities (in-house and linked with religious establishments)
- Activities based on residents' preferences and both formal and informal systems in place for gathering feedback on activities and planning activities

The home offers quality, choice and flexibility around food and mealtimes

Overall the majority of homes were able to demonstrate quality, choice and flexibility around food and mealtimes. The following good practice was identified:

- Devoted kitchen staff - whereas most homes had this, management and care staff were partaking in meal preparation in one home.
- Choice of 3 food options per meal - the majority of homes offered this.
- Menu on display - all except one home had this.
- Pictorial menu - a few homes had this in place.
- Meal plan - the majority of homes had this.
- Meals taking account of residents' preferences - the majority of homes were able to demonstrate this.
- Dietary needs catered for - all homes were able to demonstrate this.
- Religious and cultural needs catered for - all homes where it was discussed were able to demonstrate this.
- Choice of where they eat - the majority of homes were able to identify this.
- Ability to request snacks - the majority of homes were able to identify this.
- Resident/patient can assist in meal/snack preparation - a couple of homes highlighted this practice, with one highlighting that residents have access to 'mini kitchens' stocked with dry foods, snacks and drinks.
- Can request meals outside the menu - most homes were able to identify this.
- Flexibility around mealtimes - some homes were able to identify this option.

- Feedback of food quality - Most residents and patients we spoke with reported back positively on the quality of food. One home asked for feedback during monthly residents' meetings.

Ensure residents can see health professionals such as GPs and dentists regularly

The health care 'offer' to residents and patients was briefly outlined by each home we visited. Whilst there were some general features (outlined below), not all of the homes had these in place and the health care offer differed quite substantially across homes. We are also aware of instances where patients wait for a healthcare appointment in order for the home to take a few people together, rather than undertake a one-off visit for an individual.

- All residents/patients registered with a GP
- Scheduled dentist check-ups at least every year
- Scheduled optician check-ups at least every year
- Residents feeding back that they see health professionals regularly
- Audiologist appointments when necessary
- Opportunity for podiatry visits - these tended to be privately funded
- Regular visits by District Nurses for catheter changes

In terms of GP appointments, provision for Nursing Homes is delivered by The Argyle Practice. A number of the other residential care homes we visited also had GP provision for all patients delivered by one practice. One residential home used Ealing Community Transport to take patients to appointments. A number of nursing homes identified once or twice weekly homevisits by GPs with either staff or residents self-identifying if they need an appointment. One nursing home was also able to identify 3 monthly check ups for everyone on top of weekly visits for those that require it. There was one nursing home that identified no regular contact with the GP, stating that appointments were made as and when required.

Accommodate residents' personal, cultural and lifestyle needs

Homes fared very positively in this domain area. The following good practice was identified:

- Can decorate their room/bring personal possessions
- Accommodate religious/cultural needs
- Choose what they wear
- Choose when they wake up/go to sleep
- Accompanied/independent outings
- Staff run errands to the shops for residents

- Staff actively encourage independence and involvement
- Can have visitors in their rooms

There is an open environment where feedback is actively sought and used

Homes approach to this area varied, however all homes were able to demonstrate efforts to involve residents, patients and relatives in some capacity. What proved a little more difficult, however, was identifying any changes on the basis of feedback received. The following areas of good practice were identified:

- Information about how to make a complaint is available - all homes were able to demonstrate this, however, not all residents were necessarily aware.
- Residents and relatives are provided with information about external inspections and audits - this usually took the form of notices on noticeboards.
- Residents and relatives meeting in place - there was varying regularity and approaches in place across the homes with three homes not having this in place.
- Residents and relatives are actively encouraged to give feedback - only one home was unable to demonstrate this.
- Residents and relatives are comfortable approaching management with issues - where this was discussed, all identified feeling comfortable with this.
- Residents and relatives were provided with adequate information about the home in the form of an information or welcome pack.
- Homes were able to clearly identify changes made based on resident and relative feedback.

In terms of good practice, one home identified a fairly simple process for seeking feedback from a target number of residents each month, ensuring one or two people from each unit/area/floor of the home. Different people were targeted each month ensuring everybody had the opportunity to feedback and likewise, that staff and management were not inundated with lots of different ideas and changes in any one go.

Impact

The Enter & View process involves receiving a response from the provider to the Enter & View visit and recommendations made within the Enter & View report. All homes visited provided a response, however individual responses varied in terms of commitment to and process for addressing the recommendations. Individual reports, including the provider response can be found on our website here <https://healthwatchealing.org.uk/what-we-do/our-reports/>

In February 2019 Healthwatch Ealing conducted three unannounced Enter & View visits to homes where previous issues had been identified. During this process we requested feedback on any changes that had been made based on the recommendations from our initial visit. All three homes were able to successfully demonstrate impact as a result of our Enter & View reports, outlining in detail the changes that had been made as a result of our recommendations. For example:

- One care home had replaced the flooring after the Healthwatch Ealing Enter & View report highlighted strong and persistent urine odours.
- Another care home had conducted staff training and appraisal around ensuring the staff on-duty board was updated daily.
- One care home introduced protected drink times.
- One care home introduced a quarterly meeting in order to obtain resident feedback .

For other sites, six months after our visit we asked providers for feedback on progress against the recommendations made. In total, 75% of recommendations made have been either fully or partially implemented (58% fully; 17% partially).

CCG and Local Authority

All Enter & View reports are taken to the Ealing CCG Quality & Patient Safety Committee and any immediate action identified. The Committee has welcomed the Enter and View process as this is a key part of the assurance and oversight required to monitor standards of care provided by a range of independent nursing and residential home providers. The CCG jointly, with Ealing Council, monitors the local providers through a range of measures including Care Quality Commission formal inspections, ratings and improvement plans. The Enter and View process has enabled both Ealing CCG and Ealing Council to assess where nursing and residential home providers require additional support. Where matters of concern are raised by Healthwatch Enter & View reports this is fed back into operational activity through clinical reviews and assessments at nursing homes. As a direct result from the reports, the CCG has offered medicines management advice where required, mobilised it's enhanced primary care and continuing healthcare services to review specific patient cases to ensure that packages of care are the most suitable to the individual's care needs.

CQC

All Enter & View reports are shared with our partners at the Care Quality Commission and feed into their inspection programme, both timelines and focus areas. Where concerns have been raised, the CQC have taken immediate action, contacting the care home for further assurance. In addition, they have promptly re-inspected one of the homes, rating it as 'requires improvement' and initiating a number of actions and requirements for the home to put in place.

Mental Health Services January-December 2018



Introduction - mental health



Over the course of 2018 only a small number of reviews for mental health services have been obtained using the methods described in previous sections. The data below is provided for information purposes only at this stage.

Overall - mental health

48	56%	25%	19%
Unique reviews	Positive sentiment*	Negative sentiment*	Neutral Sentiment*

* Calculated automatically by Informatics







Star rating - mental health

Average Rating	Average Individual Ratings
<p>Average rating for January 2018-December 2018 (3,375)</p>  <p>Overall average (3.9144065687982)</p> 	<p>Ease of gaining appointment ★★★★★</p> <p>Convenience of appointment ★★★★★</p> <p>Cleanliness ★★★★★</p> <p>Staff Attitude ★★★★★</p> <p>Waiting Time ★★★★★</p> <p>Treatment explanation ★★★★★</p>

Themes - mental health

Theme	Count	Positive	Negative	Neutral
Treatment and care	26	50%	50%	0%
Staff	22	73%	27%	0%
Administration	15	73%	27%	0%
Access	11	9%	91%	0%

Services - mental health

▼	Service	Service Type	Reviews	Rating	Positive	Negative	Neutral
+	Ealing West Recovery Team		15	★★★★☆	73%	13%	13%
+	Ealing recovery team east		15	★★★★☆	53%	27%	20%
+	Ealing IAPT		7	★★★★☆	43%	29%	29%
+	Ealing crisis assessment and treatment team	 Mental Health	3	★★★★★	100%	0%	0%
+	Ealing CAMHS		2	★★★☆☆	50%	50%	0%
+	Early Intervention - Ealing		2	★★☆☆☆	0%	100%	0%

Impact

Whilst there is a need to increase patient experience feedback about mental health services across the pathway, Healthwatch Ealing is in discussion with West London NHS Trust (WLNHST) around some of the issues identified to date.

Healthwatch Ealing is re-establishing a presence at the Trust Wide Service User and Carer Experience Sub-committee (SUCE) with a view to regularly feeding back patient experience and presenting the Quarterly Patient Experience Report.

In May 2019 Healthwatch Ealing carried out some engagement with mental health service users and carers and has further engagement focusses planned for later in 2019. The feedback from these will be incorporated into future reports.

CCG

Ealing CCG acknowledge the numbers are not yet large enough to show any firm themes and trends. By way of an update regarding mental health commissioning and services, they have provided the following update:

In West London we are working towards improving how effectively services are provided in the three boroughs served by the West London NHS Trust (H&F, Hounslow and Ealing). This work includes CCGs, local authorities, people with lived experience, the voluntary and community sector and the Trust themselves. The focus is on improving crisis care, building up Primary Care Mental Health Services, and making sure that people from all communities can easily access specialist community and hospital services if they need them. In the past year we have:

- Added more resource to Psychiatric Liaison services at Ealing Hospital. This means that people can get expert support in hospital and in the Emergency Department if they have mental health needs, 24 hours a day. The Crisis Assessment and Treatment Team and Single Point of Access are now also both available 24 hours.
- Resourced an expansion of Early Intervention in First Episode Psychosis services to reach people aged from 14 years old. Having this skilled intervention at an early stage has a huge impact on chances of recovery and better life chances for people and their families.
- Secured additional funding to build up employment support services for people with mental health needs, and to extend expertise across the borough in Individual Placement Support, which is an evidence-based way of supporting people to get back into employment.
- Commissioned a small, voluntary sector service to provide talking therapies for those with complex mental health needs who do not reach the criteria for the most specialist statutory services.
- Continued to support talking therapies for common mental health needs such as depression and anxiety, through a grant to a voluntary sector consortium
- Commissioned two new voluntary sector community services to support people contributing to and benefiting from their own communities. This includes work to challenge stigma and discrimination as well as building resilience in individuals.