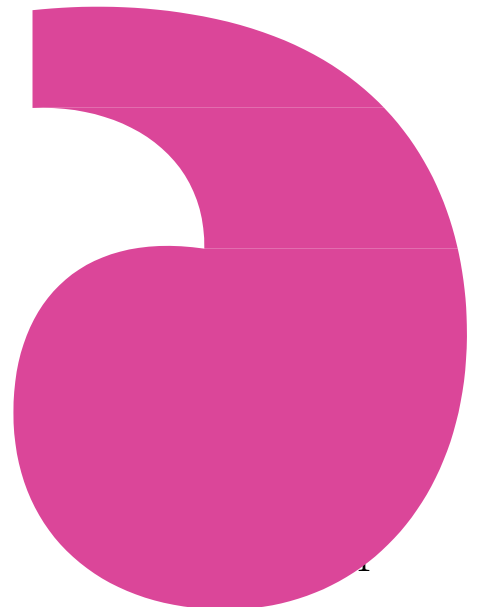




Engagement Report

April - Sept 2020



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Abbreviations

CAPE - Community Activities Project Ealing	HWE - Healthwatch Ealing
CCG - Clinical Commissioning Group	NWL - North West London
CQC - Care Quality Commission	NWP - Northwick Park
ECN - Ealing Community Network	CVS - Community Voluntary Sector

Introduction

[Healthwatch Ealing](#) is the independent consumer champion created to gather and represent the views of the public. We play a role at both local and national levels to make sure that experiences of health and social care are considered by the service providers.

Healthwatch Ealing gathers insights from local people about their experiences with local NHS services - including but not limited to hospitals, GPs, dentists, and social care providers. This gives us a chance to find out what is working well, what is not and what needs to be improved - which can be relayed to the appropriate service, Trust and CCG.

This report covers both quarter one and quarter two as Healthwatch Ealing, much like other organisations that work with the public in a face-to-face capacity, have had to learn and adapt our scope and methods in light of the Coronavirus pandemic. All our face-to-face work has been suspended based on risk assessments, and we have had to move to online/remote working. As such, we have been using much of this time to re-assess and develop new methods of engagement and delivery with the public. This report will delve into the challenges and successes of the first 6 months of the pandemic on our work.

It should be noted that, due to the nature of this engagement work, most people tend to express concerns more than they mention examples of good practice. Therefore, for a balanced view of patient views, this report should be read alongside Healthwatch Ealing's [Patient Experience reports](#). This engagement report is also a way to channel concerns into helping to find solutions, finding out what service users would like and where they think improvements need to be made.

Updates

The latest Patient Experience reports can be found online [here](#).

Engagement activities

Overview

Healthwatch Ealing have been to 20 engagement meetings and events over the last two quarters, just under our target of 13 engagement events per quarter due to the pandemic.

The meetings during this period focused on how the local Voluntary and Community sector could work together to continue to deliver services for Ealing residents and to also keep updated on changes that occurred in the delivery of, and access to, these services. Healthwatch Ealing also took part in the Young Ealing Foundation's Build Back Better [report](#) to help improve and work even more effectively with the local Community and Voluntary sector (CVS). We are also participating in work with Communities Activities Project Ealing (CAPE) to identify how we can work with the local mental health sector and assist them in relaying user feedback to statutory services. We express our thanks to all those engaged with for providing information and insights.

Engagement Event	Type of Engagement	No. of people
Ealing Mental Health Forum	Community Forum	20+
Ealing Mental Health Forum	Community Forum	20+
Ealing Voice Network Launch Event	Community Forum	20+
Maternity Voice Partnership Meeting NWP	Feedback	15+
LetsGoSouthall - Intro Meeting	Introductory meeting	1
CQC NWL updates	Updates from CQC and HW collaboration	20+
CAPE Co-production Workshop	Workshop	~6
MH Meeting with CCG/Council Leads	Introductory meeting	2
ECN General Meeting	Community Forum	20+
Ealing Mental Health Forum	Community Forum	20+
Green Doctors	Intro Meeting	1
Youth Centre Group	Focus group	~6
HWE MH Webinar	Webinar - Information and signposting	~34
Ealing Together & ECVS Meeting	Community Forum	20+
Presentation for NCS	Introduction to HWE	~15
Hounslow Mental Health Forum	Community Forum	20+
CAPE Co-production Charter Workshop	Workshop	~15
Heal Together CIC - Somali MH	Introductory meeting	1
Ealing Mental Health Forum	Community Forum	20+
ECN Meeting	Community Forum	20+

Challenges

In the first three months of the pandemic, we suspended all face-to-face public engagement making it difficult to carry out any work, especially during this period of the first national lockdown where only essential travel was allowed. At Healthwatch Ealing, our engagement work normally takes the form of talking to residents where they may already be gathered in public spaces i.e., Outpatients at Ealing hospital, community groups, community health centres etc. However, these were all also suspended, and we were unable to contact residents in this manner. As we usually engage with specific communities through our networks with other community organisations, we were limited as the entire CVS in Ealing was adapting their services for the pandemic. Not only this, but many of the CVS organisations were, and still are, at the forefront of the pandemic providing essential frontline services to residents who need their support, and were too busy during this period for us to reach or ask to engage with their clients. We also recognised the extreme pressure, and personal situations residents were dealing with in the first wave of the pandemic so did not push engagement during this period.

Therefore, engagement dropped off significantly. We attempted to maintain our community availability by promoting our continued services by phone and email. Additionally, we started a Whatsapp service and online Zoom sessions for the public to participate in if they wanted information or to relay feedback. We had limited uptake for these initial Zoom sessions as many of the public, and other services, were also at the beginning of digital onboarding.

Successes

In the second quarter, we had slightly more success as we were able to reach out again through our network of CVS organisations and start to engage with some service users online. However, we recognise this method is very limiting to community engagement work because of digital exclusion.

We reassessed our work and decided to pilot an online information and signposting webinar for residents and CVS organisations who work directly with the public. The aim of the first webinar was to inform of the changes made to Mental Health CVS organisations and statutory services due to the pandemic. We had an impressive uptake, with approximately 34 attendees, many of whom commented that they found it useful. We sent out the presentations and resources to all attendees and via our mailing list so all who are a part of our network were able to access the information that was relayed during the webinar.

Additionally, we have used this time to make changes to our website to provide relevant COVID-19 information and have created a resources page which we are beginning to populate. So far these contain national resources, and we aim to add information about local CVS organisations to this page. As most of our engagement has moved online, we have also grown our Twitter following in the last 6 months by 58 and our mailing list has increased by 150.

Feedback

Youth Centre

During the first months of the pandemic, we spoke to a small number of young people through Westside Youth Centre, who have weekly catch ups to continue to stay in touch with those who needed support over the period.

They told us that they were predominantly “okay” with GPs and hospitals and other statutory services, not having much to do with either, but were happy to go if they needed to. It should be noted they did not go regularly for dental check-ups.

One of the young persons had a care plan, and both him and his youth worker were not aware of whether dental care could be included in the plan. We were able to put the youth worker in contact with local organisation Contact Ealing who have specialist knowledge regarding children’s care plans and would be able to provide further information support for the youth worker in future.

The topic of mental health was covered, with many young individuals stating that this was an issue amongst their peers with the rise of social media. Their support workers were their first point of contact who would be able to signpost them to additional support. When the centre was physically open, they had posters and information around the centre.

In future research, Healthwatch should reach out to parents to understand if there are any issues with making appointments, or accessing services, as young people themselves tend not to be arranging these. It was also evident that youth workers were having to find out information themselves as best as possible to help young people. In this regard Healthwatch Ealing will make a concerted effort to reach out to youth centres and staff to supply them with information and signposting. This will ensure that they are regularly

updated with information and can be informed of other voluntary sector organisations in the borough.

Other

- The **mental health forums**, made up of local CVS organisations, have been discussing ways of working together to continue to support local people during this period. Many have expressed concerns that service users are feeling increasingly isolated during this period as they do not have access to their usual support network, and many are digitally excluded. Organisations are attempting to keep in touch with users through regular telephone calls. Interestingly, CAPE conducted a piece of internal research with their service users and found that a small number of service users preferred the lockdown - further information and results can be found by contacting CAPE projects directly.
 - Based on the number of changes to service access during this time, Healthwatch Ealing decided to put together a **pilot online webinar** to provide information and signposting to community workers and residents about these changes. The webinar focused on access to mental health services in the borough with the support of Ealing Mental Health Forum for promotion and recruiting speakers. The Mental Health Forum recognised that getting out this information would be a good idea.
- HealTogether - aims to work with Somali community groups across London to provide therapeutic services to Somali people. We heard they felt this cohesive work was lacking across different Somali organisations, and their aim was to create ways of joint working with these, and other local mental health services who struggled to support local Somali communities. They felt mainstream mental health services were not always appropriate for Somali people due to lack of understanding of the specific issues the Somali community faced, and language barriers.
- ECN - through these meetings we heard many organisations were struggling to onboard service users to digital service provision methods. Additionally, many organisations themselves were struggling to transition online especially during the first months. Some organisations remained working 'on the ground' to provide essential services to the community, such as a food parcel delivery in support of local food banks and the isolated vulnerable.
- Across the board there has been a recognition that the CVS and statutory services must work together more closely to effectively support vulnerable people and the community at large. Much of this period was spent finding ways to achieve this, though it has been in a strain under pressure of the current circumstances.

Follow-up activities and next steps

Other work that we have completed that is related to the pandemic includes a piece of research about the impact of COVID-19 on Ealing residents which can be found online [here](#). As a result of the report by Public Health England regarding the impact of COVID-19 on Black and Minoritised Ethnic (BME) communities, Healthwatch Ealing is currently pursuing a best course of action regarding our own research on health inequities in the borough. We are aiming to speak with, and involve, the 6 BME community organisations who have produced their own [report](#) on this subject. With insight from them and statutory services, we aim to establish a research project in a specific area of health inequities where we feel we can bring useful recommendations and hopefully, tangible

impacts for the community.

We aim to deliver a series of webinars for the public, to provide them with information and signposting of health and social care services, and community and voluntary sector organisations. We will work with neighbouring Healthwatch's in Hounslow and Hammersmith & Fulham to deliver this work for the tri-borough area. We plan to add all presentations from the webinars, including the pilot, as a website update to ensure all information is publicly available, post-event. We are also planning to work with local CVS organisations to find out how to best share information via other methods including, sending short videos out via Whatsapp, and translating information into community languages - depending on what is feasible.

Healthwatch Ealing in the next quarter will discuss ways we can help to bridge the divide between CVS and statutory organisations due to our unique position between the two. We have however, committed to support CAPE in its Co-production Charter in any way we can, especially in terms of relaying feedback to statutory services in a more cohesive way - as is our remit.

In terms of social media, we are aiming to post more online on Twitter and work on new ways to add to our mailing list so we can build a larger online community as mixed methods working will likely remain in the future.

This report will be published on our website, sent to relevant partners, and presented at relevant CCG, Local Authority and Service Provider committees and meetings.