1. **Summary**

1.1 This report provides an update on the council’s current review of Healthwatch Tower Hamlets (HWTH). The aim of the review is to develop a model for HWTH which builds on existing strengths, identifies areas of improvement and incorporates good practice from other local Healthwatch organisations. The review findings will inform the retender of the Healthwatch contract.

1.2 The existing contract which was due to expire on 31st March 2016 has been extended by one year so the new contract must be in place by 1st April 2017. The paper outlines the methodology for the review and timetable for reporting on the findings and commissioning of the new Healthwatch contract. It then poses the key questions that will be explored in the review in order to get feedback and comment from Health Scrutiny Panel members.

2. **Recommendations**

2.1 The Health Scrutiny Panel to note the report and comment on the following questions:-

- What are the key strengths of Healthwatch Tower Hamlets and areas for development?
- How can Healthwatch Tower Hamlets work more effectively with the Health Scrutiny Panel?

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**LOCAL GOVERNMENT ACT, 1972 (AS AMENDED) SECTION 100D**

**LIST OF “BACKGROUND PAPERS” USED IN THE PREPARATION OF THIS REPORT**

**Background paper**

<table>
<thead>
<tr>
<th>Name and telephone number of and address where open to inspection</th>
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<td>None</td>
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3. BACKGROUND

3.1. Healthwatch Tower Hamlets was established as part of the Health and Social Care Act 2012 and is the local consumer champion for patients, service users and the public, covering health and social care. Altogether there are 152 Local Healthwatch across the country and a national body called Healthwatch England which provides oversight and supports the development of the local Healthwatch network.

3.2. Healthwatch Tower Hamlets undertakes the following key activities:

- Provides information, sign-posting and advice to the public about accessing health and social care services and choice in relation to aspects of those services;
- Obtains the views of people about their needs for and experience of local care services and make those views known to those involved in the commissioning, provision and scrutiny of care services;
- Promotes and supports the involvement of people in the monitoring, commissioning and provision of local care services;
- Influence the commissioning and provision of services through producing evidence-based reports and recommendations about how those services could or should be improved. Local Healthwatch have a statutory seat on the local Health and Wellbeing Board to help them to do this effectively;
- Makes the views and experiences of people known to Healthwatch England helping it to carry out its role as national champion;
- Makes recommendations to Healthwatch England to advise the Care Quality Commission to carry out special reviews or investigations into areas of concern;

3.3. The Council went through a formal tendering process and awarded the contract for establishing HWTH to Urban Inclusion in March 2013. HWTH was set up as a Charitable Company made up of 12 Board Members, most of whom are local residents with some third sector representatives. The Board is responsible for oversight of the business and performance of the organisation. HWTH currently has a staff team of four. Additionally there is a large pool of volunteers (250+) drawn from across the area who receive training to support the delivery of the Healthwatch Tower Hamlets work programme, for example by doing outreach sessions in the community and going on “Enter and View” visits. Under the Healthwatch statutory regulations, local Healthwatch organisations have the power to Enter and View health and social care providers so that authorised representatives can observe matters relating to health and social care services and get insight from patients / service users – see example below.

Case study: ‘Enter and View’ visits

Healthwatch Tower Hamlets carries out visits to health and social care services where staff and volunteers observe and listen to people’s experiences of the service. They then report back to the providers and commissioners of services with recommended actions for improvement. In 2015 Healthwatch conducted an ‘Enter and View’ visit to the inpatient ward at the Tower Hamlets Centre for Mental Health where they highlighted some issues with the design and layout of reception areas and positive feedback from service users about changes that had been implemented following a serious incident. The findings were then presented to the East London Foundation Trust who committed to making some improvements; for example changes to the layout of reception areas to make them friendlier and less stressful for service users.
METHODOLOGY AND TIMEFRAME FOR THE REVIEW:

3.4 The review comprises the following components:

I. Desk research: performance and contract monitoring information to date, review of broader literature on the development of local Healthwatch and national evaluations of local Healthwatch

II. Stakeholder engagement:

   a. Meetings and semi-structured interviews with key stakeholders in the health and social care system including LBTH (Adults Services, Children’s Services, Public Health & Community Engagement leads), the Tower Hamlets Clinical Commissioning Group (CCG), Bart’s Health Trust, East London Foundation Trust, Healthwatch England, HWTH staff and board members and HW commissioners in other areas.

   b. Discussion groups with Healthwatch volunteers, community groups including the Health & Wellbeing forum, Voluntary and Community Sector representatives and equality forums.

   c. Visits to two local Healthwatch who were selected on the advice of Healthwatch England as good practice examples. (Jan – Feb 2016)

III. Report, recommendations and development of future model for HWTH (March 2016)

3.5 These are the key questions being addressed in the review:-

   • To what extent is HWTH inclusive and representative of the diverse local community that it serves?
   • What can be done to raise the profile of Healthwatch Tower Hamlets amongst local people of all ages and backgrounds and local community organisations?
   • How can local people be more engaged in setting the priorities for HWTH and being involved in delivering its work programmes?
   • How can HWTH effectively influence services and harness the views of the public to make positive changes?
   • How can Healthwatch become more effective in quantifying its evidence and demonstrating how it has contributed to practical changes as a result of its work?
   • How can Healthwatch improve its ability and reach in signposting local people to services and providing information and advice?
   • What can be done to help HWTH improve the quality of its analysis and reporting?

3.6 At time of writing (9/2/16) the review is in the stakeholder engagement phase and visits to local Healthwatch are happening in mid-Feb. A draft report will be produced by the end of February. HWTH are involved in the review and are supporting its progress.
3.7 DISSEMINATION & FUTURE COMMISSIONING PLAN: The table below gives the timeframe for this review and the commissioning of the new service which will start from April 2017.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Timeframe</th>
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<tbody>
<tr>
<td>HWTH Service Review</td>
<td>Jan 2016 – Mar 2016 (See above)</td>
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<tr>
<td>Report to CMT</td>
<td>March 2016</td>
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<tr>
<td>Stakeholder engagement</td>
<td>April – June 2016</td>
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<td>Report to MAB</td>
<td>April 2016</td>
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<td>Report to Cabinet</td>
<td>June 2016</td>
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<td>Procurement</td>
<td>July – Dec 2016</td>
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<tr>
<td>Decision Making</td>
<td>Jan-Mar 2017</td>
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<tr>
<td>Contract mobilisation</td>
<td>Apr 2017</td>
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4 ONE TOWER HAMLETS CONSIDERATIONS

4.1 The review specifically explores the extent to which HWTH is inclusive and representative of the diverse local population of Tower Hamlets. Recommendations arising from the review will suggest ways that HWTH can reach people of all ages and backgrounds across the borough. The review also seeks to maximise the opportunity for local people in Tower Hamlets including those whose voices are seldom heard to become more engaged in setting the priorities for HWTH and delivering its work programmes throughout the borough.