

To: Healthwatch Surrey Board  
From: Matthew Parris  
Date: 15th January 2018



## Deciding Healthwatch Surrey's thematic priorities for 2018/19

### Purpose of paper

To inform the Healthwatch Surrey Board about the outcome of a review (including public consultation) of the organisation's thematic priorities<sup>1</sup> and to seek endorsement of recommendations to guide our work for 2018/19.

The Board is asked to consider the paper, and endorse the following recommendations.

### Recommendations

The Healthwatch Surrey Board is asked to give consideration to the competing views expressed through the public consultation when deciding whether to replace 'Improving the experience of making GP appointments' with another priority.

It is recommended that the Healthwatch Surrey Board endorse the following:

1. Retain the priorities which are mid-way through an initial 3-year cycle through 2018/19: 'Amplifying the voices of Care Home residents', 'Investigating the experience of Hospital Discharge' and 'Early Intervention in Mental Health'.
2. Replace the priority area 'Improving the experience of making GP appointments'
3. Adopt a new priority area which responds to the theme suggesting that 'care services for vulnerable and older people living at home need to improve' (ES11)
4. Further refine the issue defined within the existing 'Early intervention in Mental Health' priority area, and undertake projects, to respond to the theme suggesting 'there is a lack of support for people living in the community with mental health issues' (ES8)
5. Adopt the principle that at least one Healthwatch Surrey project in 2018/19 should have significant input from carers, people with learning disabilities and people with autism in order to respond to concerns raised in the public consultation (within one of our existing thematic priority areas).

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<sup>1</sup> Our "thematic priorities" are the issues that we chose to focus on and carry out dedicated research projects on. We also work on "emerging issues" that arise during the year.

## Background

In order to maximise its influence, Healthwatch Surrey focuses its work on a number of thematic priorities. These are reviewed by the organisation each year to ensure the issues remain relevant and that, within its statutory role, it is able to have a positive effect on services on behalf of people in Surrey. The Board has previously decided that in order to achieve maximum effectiveness, four thematic priorities is a sensible number to work on at this stage in our development, given that each priority has a number of projects beneath it<sup>2</sup>.

Each new priority area is initially adopted for a 3-year cycle, with a full review being undertaken of a priority area at the end of this cycle. The current priorities and their date of adoption are:

- Improving the experience of making a GP appointment (April 2014)
- Amplifying the voices of care home residents (April 2016)
- Investigating the experience of hospital discharge (April 2016)
- Early Intervention in mental health (April 2016)

This paper sets out the outcome of the annual review of priorities and makes a number of recommendations to the Healthwatch Surrey Board.

## Improving the experience of making a GP appointment

This priority area reached the end of an initial 3 year cycle last year, at which point it was decided to undertake another year of activity.

Since adopting this as a priority, Healthwatch Surrey has published four reports directly related to the subject. This has involved documenting the views of older people, seldom heard communities and the general public. That work led to 29 recommendations being made to service providers, commissioners and health systems.

It's not possible to quantify the overall impact or contribution of Healthwatch Surrey's work in those three years, however there is evidence to suggest that a positive impact has been made. For example, when responding to a recent report 'My GP journey':

- 37 of 41 practice managers (90%) rated 'My GP journey' as 'Very helpful' or 'Helpful'.
- A number of GP practices are now assessing the need for additional staff training on long term health conditions.
- 35 of 42 practices (83%) are considering how patients with specific conditions can be matched with a GP's special interests where possible.

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<sup>2</sup> A paper on how we decide on thematic priorities was approved at the board in June 2017. Our process is described on our website here: <https://www.healthwatchesurrey.co.uk/about-us/help-share-our-priorities/>

- A majority of practices said they would consider the recommendation to test automated door phasing systems to improve access for patients with mobility issues and sensory impairment.

When analysing the experiences reported to Healthwatch Surrey, and considering the report on the public consultation on its priorities (see Appendix A - Report: Our priorities - A consultation), it is clear that issues with making GP appointments remain.

Of the 148 individuals responding to the public consultation on the proposal to replace this priority, more respondents disagreed with the proposal (48%), than agreed with it (39%). Two people expressed a belief that more could be achieved if a different approach to the issue was adopted, although no additional information or views were provided.

It is, though, important to note that the majority of respondents also indicated that there were other priorities, with 85 respondents proposing new issues that Healthwatch Surrey should be working on.

The proposal to replace this priority was made in the belief that, whilst more could be done, other issues in health and social care are now more deserving of Healthwatch Surrey's attention.

*It is recommended, in spite of mixed views about the proposal in the consultation, that the priority 'Improving the experience of making a GP appointment' now be replaced.*

## Options development

The options for a new priority area were shaped by a dedicated conversation with the public and through the conversations that Healthwatch Surrey has day-to-day with people about their experience. This qualitative data was used to generate a set of *Evidence Statements*.

Following an analysis of the experiences gathered in day-to-day conversations, during the 12 months to 31<sup>st</sup> October (and after removing experiences that are related to existing thematic priorities), a set of five Evidence Statements emerged.

An analysis of the comments made in the public consultation led to a further four Evidence Statements being developed. A further two additional Evidence Statements were also derived from input provided via the public consultation from Voluntary, Community and Faith sector organisations who represent specific groups.

The resulting 11 Evidence Statements were the 'options' upon which a new priority area has been identified.

*A full set of Evidence Statements, all of which have been considered as options for a new priority, can be found in Appendix B - Evidence Statements.*

## A strategic options appraisal

The options for a new priority have been analysed in order to understand how they relate to these questions:

- Does the issue impact particularly on groups already disadvantaged or suffering health inequalities?
- Is anyone else already working on this issue from a user perspective?
- Does it relate to Health and Wellbeing Board (HWB) priorities?
- Does it relate to Sustainability and Transformation Partnership (STP) priorities<sup>3</sup>?

An analysis of the options against each of these tests can be seen in Appendix C - Strategic Options Appraisal. Although individually some of the options do not meet all of these tests, when considered alongside the existing priorities there remains considerable alignment.

When taking into account the different options, the Healthwatch Surrey priority setting process also requires the following to be met:

- ✓ One priority to have “mass appeal”
- ✓ One priority to relate to social care
- ✓ One priority to be related to a priority of HWB or STP
- ✓ One priority to link with Healthwatch England priorities and a national issue
- ✓ One priority to link with needs identified in the Joint Strategic Needs Assessment

In all of the options these strategic tests will be met, therefore *all options developed from the consultation and Healthwatch Surrey evidence gathering can be taken into consideration.*

## Options appraisal

When appraising options it is important to remember that there a number of criteria which fall outside the scope of this process.

Whilst the following criteria are very important to Healthwatch Surrey, they are applied when making decisions about the projects undertaken within each priority area:

- Is there potential for volunteer input?
- Does it build on our internal learning/development of our expertise and influence?
- Does it involve use of our Enter and View powers?
- Is there potential for collaboration with a VCFS partner?
- Does it have potential to uncover good practice and positive feedback?
- Do we have coverage of older people and children in our projects to ensure we meet our statutory obligations to engage and report?
- What are other system priorities e.g. Children’s & Young People’s Partnership Board?
- What do regulatory reports tell us?
- What we know about struggling services?
- What we know about services due to re-commissioning?

<sup>3</sup> This includes Surrey Heartlands, Frimley and Sussex and East Surrey STPs.

The appraisal of options for a new thematic priority area is focussed on:

- **Does the issue feature highly in what we hear from local people?**  
(*balance between talked about and negative sentiment*)
- **Does HWSy have the ability to influence and is there potential for change?**

## Options

Evidence Statement (ES) 1	We have evidence to suggest that treatment and waiting times in Accident and Emergency are experienced negatively
ES2	We have evidence to suggest that local people are often dissatisfied with access into and support available from adult mental health services.
ES3	We have evidence to suggest that local people would like more information and access to support from adult social care services.
ES4	We have evidence that access into and communication within outpatient services could be improved for local people.
ES5	We have evidence to suggest that local people require more support with access and payment for dentistry services.
ES6	Family Voice Surrey ( <a href="http://www.familyvoicesurrey.org">www.familyvoicesurrey.org</a> ) have evidence to suggest that parent carers are not routinely being offered Carers Assessments
ES7	Sight for Surrey ( <a href="http://www.sightforsurrey.org.uk">www.sightforsurrey.org.uk</a> ) have evidence to suggest that provision of audiology services varies across the county and that there is a lack of choice
ES8	A theme emerged in our public consultation to suggest that there is a lack of support for people living in the community with mental health issues
ES9	A theme emerged in our public consultation to suggest that there is a need to focus on carers
ES10	A theme emerged in our public consultation to suggest that there is a need to focus on people with Learning Disabilities and Autism
ES11	A theme emerged in our public consultation to suggest that care services for vulnerable and older people living at home need to improve

Does the issue feature highly in what we hear from local people?

By definition of the process (i.e. developing Evidence Statements) each option had to feature highly in what we hear from local people through our day to day evidence gathering or through the consultation.

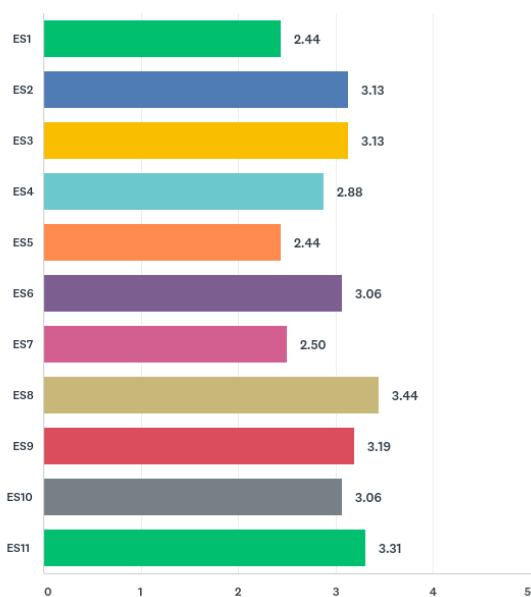
Does Healthwatch Surrey have the ability to influence and is there potential for change?

The subject of Healthwatch Surrey's ability to influence and the potential for change is more difficult to answer.

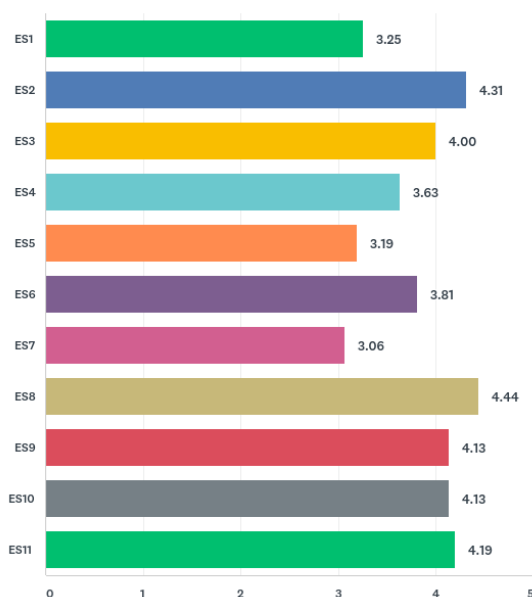
To add additional objectivity and fairness to the process, the Healthwatch Surrey team (volunteers, staff, Surrey Heath Volunteer Team) were given the opportunity to share their views on the options.

Seventeen people took part and a summary of the responses can be seen below.

To what extent do you believe that Healthwatch Surrey can have an influence and impact on these issues?



To what extent do you agree that Healthwatch Surrey should be working on each issue as a priority?



As a result the following issues will not be pursued due to views that it would be difficult for Healthwatch Surrey to have an influence and make an impact, due to the nature of the issues involved:

- ES1: We have evidence to suggest that treatment and waiting times in Accident and Emergency are experienced negatively.
- ES5: We have evidence to suggest that people require more support with access and payment for dentistry services.

- ES7: Sight for Surrey ([www.sightforsurrey.org.uk](http://www.sightforsurrey.org.uk)) have evidence to suggest that provision of audiology services varies across the county and that there is a lack of choice

The ranking of the remaining nine options has been informed by the views of the Healthwatch Surrey team (volunteers, staff, Surrey Heath Volunteer Team).

## Ranking

		To what extent do you believe that Healthwatch Surrey can have an influence and impact on these issues? (A)	B. To what extent do you agree that Healthwatch Surrey should be working on each issue as a priority? (B)	Composite Score (A+B)
1	ES8: A theme emerged in our public consultation to suggest that there is a lack of support for people living in the community with mental health issues	3.44	4.44	7.88
2	ES11: A theme emerged in our public consultation to suggest that care services for vulnerable and older people living at home need to improve	3.31	4.19	7.5
3	ES2: We have evidence to suggest that local people are often dissatisfied with access into and support available from adult mental health services.	3.13	4.31	7.44
4	ES9: A theme emerged in our public consultation to suggest that there is a need to focus on carers	3.19	4.13	7.32
5	ES10: A theme emerged in our public consultation to suggest that there is a need to focus on people with Learning Disabilities and Autism	3.06	4.13	7.19
6	ES3: We have evidence to suggest that local people would like more information and access to support from adult social care services.	3.13	4	7.13
7	ES6: Family Voice Surrey ( <a href="http://www.familyvoicesurrey.org">www.familyvoicesurrey.org</a> ) have evidence to suggest that parent carers are not routinely being offered Carers Assessments	3.06	3.81	6.87
8	ES4: We have evidence that access into and communication within outpatient services could be improved for local people.	2.88	3.63	6.51

## Recommendations

The Healthwatch Surrey Board should give consideration to the competing views expressed through the public consultation when deciding whether to replace 'Improving the experience of making GP appointments' with another priority.

It is recommended that the Healthwatch Surrey Board also endorse the following:

1. Retain the priorities which are mid-way through an initial 3-year cycle through 2018/19; 'Amplifying the voices of Care Home residents', 'Investigating the experience of Hospital Discharge' and 'Early Intervention in Mental Health'.
2. Replace the priority area 'Improving the experience of making GP appointments'
3. Further refine the issue defined within the existing 'Early intervention in Mental Health' priority area, and undertake projects, to respond to the theme suggesting 'there is a lack of support for people living in the community with mental health issues' (ES8)
4. Adopt a new priority area which responds to the theme suggesting that 'care services for vulnerable and older people living at home need to improve' (ES11)
5. Adopt the principle that a Healthwatch Surrey project in 2018/19 should have significant input from carers, people with learning disabilities and people with autism in order to respond to concerns raised in the public consultation



# Appendix A

Report: Our priorities - A consultation

# Appendix B

## Evidence Statements

# Appendix C

## Strategic Options Appraisal

	Does the issue impact particularly on groups already disadvantaged or suffering health inequalities?	Is anyone else already working on this issue from a user perspective?	Does it relate to Health and Wellbeing Board priorities?	Does it relate to STP priorities?
<i>Existing Priorities</i>				
Amplifying the voice of care home residents	Yes	No	Yes	Yes
Investigating the experience of hospital discharge	Yes	No	Yes	Yes
Early intervention in mental health	Yes	No	Yes	Yes
Improving the experience of making a GP appointment	Yes	No	Yes	Yes
<i>Options</i>				
Improving the experience of making a GP appointment	Yes	No	Yes	Yes
ES1: We have evidence to suggest that treatment and waiting times in Accident and Emergency are experienced negatively	Yes	No	Yes	Yes
ES2: We have evidence to suggest that local people are often dissatisfied with access into and support available from adult mental health services.	Yes	No	Yes	Yes
ES3: We have evidence to suggest that local people would like more information and access to support from adult social care services.	Yes	No	Yes	No
ES4: We have evidence that access into and communication within outpatient services could be improved for local people.	Yes	No	No	Yes
ES5: We have evidence to suggest that local people require more support with access and payment for dentistry services.	Yes	No	No	No
ES6: Family Voice Surrey ( <a href="http://www.familyvoicesurrey.org">www.familyvoicesurrey.org</a> ) have evidence to suggest that parent carers are not routinely being offered Carers Assessments	Yes	Yes	Yes	No
ES7: Sight for Surrey ( <a href="http://www.sightforsurrey.org.uk">www.sightforsurrey.org.uk</a> ) have evidence to suggest that provision of audiology services varies across the county and that there is a lack of choice	Yes	Yes	No	No
ES8: A theme emerged in our public consultation to suggest that there is a lack of support for people living in the community with mental health issues	Yes	No	Yes	Yes

ES9: A theme emerged in our public consultation to suggest that there is a need to focus on carers	Yes	No	Yes	No
ES10: A theme emerged in our public consultation to suggest that there is a need to focus on people with Learning Disabilities and Autism	Yes	No	Yes	No
ES11: A theme emerged in our public consultation to suggest that care services for vulnerable and older people living at home need to improve	Yes	No	Yes	Yes

# Appendix D

Public Consultation – Full results (redacted)