



# Healthwatch Surrey

Annual Report 2015/16

# The year at a glance

We helped 4,044 people with information and advice



Our volunteers helped us with everything from collecting people's experiences to shaping our priorities



We captured 2,485 experiences of local services on our database



Our free independent advocacy service supported 203 new people to make an NHS complaint



Our reports have tackled issues ranging from primary care to data sharing



We've met thousands of local people at community events



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# Message from our Chair



**Healthwatch Surrey Community Interest Company (C.I.C) has come a long way over the last three years. We have grown into our role, performing and impressing sufficiently to have been awarded a new and longer contract for our services, which have also been extended.**

Our success is a testament to the hard work of our staff and volunteers. I would especially like to thank them for all their efforts, as well as recognising our Board members, who have provided sound guidance and leadership - and have “rolled their sleeves up” too when that has been necessary.

Thanks also go to the many members of the health and social care system in Surrey who have embraced our role and worked closely with us. We said from the start that we wished to establish trust with you, our system partners. Most have responded well to this call and we are achieving mutual benefits as a result.

Of course, there are still areas of the system that are more defensive and, perhaps unnecessarily, feel threatened by our presence. To these people and organisations I ask that you reconsider the relationship you have with Healthwatch Surrey and with the public, who all our organisations exist to serve.

The issues and problems we now face in health and social care are so complex that no single body or group can possibly solve them alone - it will take all of us working effectively together with those that we serve. Healthwatch Surrey is here to help. A critical friend perhaps at times, but a friend nonetheless.

Finally, our thanks also go to all the members of the public who have, in whatever way, shared their experiences with us - it is your voice which matters and that we represent.

Peter Gordon  
Chair and Non-Executive Director



# Message from our Chief Executive



Welcome to Healthwatch Surrey's third Annual Report. This year has been one of opportunity and change for Healthwatch Surrey.

After winning the renewal of the Healthwatch contract with Surrey County Council, which now includes the Independent NHS Complaints Advocacy service for the first time, the team have successfully faced a number of challenges.

The commitment and resilience of the staff, partners and volunteers have enabled Healthwatch to continue to produce great work to ensure the voices of the people of Surrey are heard by those that purchase, manage and deliver health and social care services, most notably:

- **Investigating access to primary care and GP appointments for people 65 years and older.** As the proportion of older people in Surrey continues to rise, the views and experiences collected in this report have been

shared with key decision makers in order to inform future planning for primary care.

- **Investigating public opinions around record sharing** between health and care professionals involved in giving care. Almost 700 people completed this survey, the results of which are informing the development of a 'Shared Care Record' for Surrey and have also fed into the National Data Guardian's review of data sharing consent models.
- **Launching a £10,000 Community Cash Fund** for grassroots projects, groups and individuals to help improve wellbeing of local people and provide opportunities to speak out about their experiences of local services. The fund has supported six projects, working with young people, isolated older people and people with long term conditions.

I joined the team half way through the year and had the opportunity to be involved in a review of our mission and vision, so I am looking forward to a year of focused activity as we move ahead towards our goals.

Kate Scribbins  
Chief Executive

# Who we are

Healthwatch Surrey is an independent organisation that gives the people of Surrey a voice to improve, shape and get the best from health and social care services by empowering people and communities.

- We enable people to share views and concerns about local health and social care services
- We provide evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans
- We carry out investigations into specific areas of concern and make recommendations for change
- We provide, or signpost to, information about local services and how to access them.
- We provide advocacy for people with complaints about the NHS.

Healthwatch Surrey is a small team covering a large area, and a complex health and social care landscape, so we count on the support of our great team of volunteers to help us engage with people, build relationships based on local knowledge, and attend meetings in order to shape and challenge decisions about services.

## Our vision

Over the last six months we have reflected on our mission and vision, building on the growing maturity of our organisation and with a desire to clarify our purpose and agree clear goals.

This has resulted in four vision statements, which will shape our work for 2016-17. (More information about these plans can be found on page 33)

- Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.
- Healthwatch Surrey's role, function and services are known, understood and valued by consumers and therefore they readily contact us.
- Our influencing is based on sound evidence, knowledge and insight.
- As a social enterprise we have secured a growing and sustainable future.

## Our priorities

No Local Healthwatch (whatever the area) can possibly work on everyone's concerns regarding health and social care so it's important that we prioritise and have a transparent process for deciding on those priorities (see page 35 for how we do this).

The priorities we worked on over the last year were:

- Improving the experience of making a GP appointment
- Amplifying the voice of Young People
- Making it easier to make NHS complaints

- Supporting, improving and increasing involvement of people, patients and service users in decision making
- Promoting and supporting people, patient and service user focussed cultures.

Our Healthwatch Team (from left to right): Julie Dallison, Kate Scribbins, Jade Parkes, Lauren ter Kuile, Lisa Sian. (Bottom row) Sonali Florence, Katherine Leach, Matthew Parris. Not pictured: Jacque Pond, Bob Hall.



We would to thank the members of the Healthwatch Surrey team who have left us over the last year: Philip Broad, Mike Rich, Vanda Green and Debbie Dart.

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# Listening to people who use health and care services

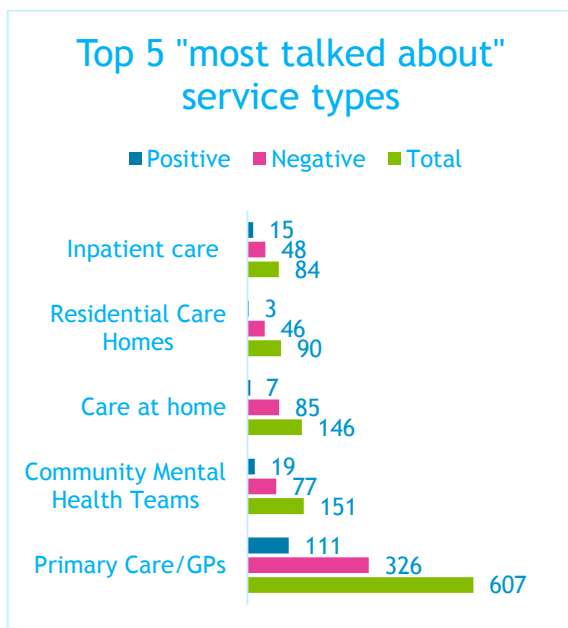




## Gathering experiences and understanding people's needs

Throughout the course of the year **2,485** detailed experiences were shared with us

The health and social care experiences of local people are at the centre of what we do. This year we have been able to strengthen and diversify the range of ways the people of Surrey are able to share their feedback with us. New ways to feedback have included online 'Live Chats' on social media, speaking to one of Surrey's user-led Hubs and through the new Healthwatch NHS advocacy service.



Of these experiences:

- 289 were captured through our helpdesk, website and from our feedback forms
- 1,100 were shared via Citizens Advice

Experiences have also been shared with us through the channels outlined below.

## Voice It!

We ran 2 successful 'Voice It!' events in which members of the public shared their experiences confidentially with Healthwatch and other attendees in a group setting. The events highlighted themes, for example 'Accessibility', which fed into the development of our priorities and projects for 2016/17.

## The Listening Tour: Winter 2015/16

Between November and January, staff and volunteers braved the cold weather to gather the views and experiences of Surrey residents at 23 locations, covering every Borough and District in Surrey.

The venues included a mix of healthcare establishments and high footfall locations such as supermarkets and shopping centres.

We spoke to 3,700 people and gave out 4,715 pieces of literature during the tour. 828 people voted in the poll to find out the top health priority for the people of Surrey.



The Listening Tour at Farnham Hospital

The options reflected the top five issues that we had heard most about in the previous 12 months. The results of the poll, together with the views and experiences we heard have directly influenced our priorities for the next year and have been shared with providers and commissioners of local services.

Listening Tour Poll:	
“If you were the Secretary of State for Health, what would be your top priority?”	
Quality of care in Hospitals	196
Early intervention in mental health	184
Quality of social care	163
Improving access to GP services	153
Co-ordination of services	132

### Events

We also had a regular presence out and about at community events throughout the year. These included:

- Armed Forces Day, a national event attended by 60,000 people in Guildford’s Stoke Park.
- External Public Engagement Events such as: Action for Carers Conference , Children’s Trust Open Day, Surrey Mental Health Partnership Board Wellness Day, Surrey Independent Living Fair
- We also held further events on the High Street in Redhill, Leatherhead, and Epsom and at hospitals including Royal Surrey County Hospital, East Surrey Hospital and Frimley Park Hospital.



Collecting experiences at the Surrey Heath Show

### Work with seldom heard groups

A key focus for Healthwatch Surrey is listening to people whose voices often go unheard. This year:

- We met with prisoners at Bronzefield Prison and explored how the voice of prisoners could be more effectively heard.
- We have heard feedback and given information and advice to 136 carers and family members who support people who use local services in Surrey, but do not live in the county themselves.
- We were able to help facilitate 2 events with Sight for Surrey, one for visual impairment and one for hard of hearing.
- Surrey Minority Ethnic Forum (SMEF) - we had a stall at a wellbeing event organised by SMEF.

- We attended a workshop in Surrey working with members of the Traveller and Gypsy Community.
- In partnership with Age UK and Godalming Older People’s Welfare Association, over 65s were able to share their experiences of primary care.
- Community Cash Fund projects have been able to empower isolated older people, young people and people with long term conditions like aphasia and dementia to speak out.

### Gathering feedback with social media

We use Twitter, Facebook and Streetlife to reach out to local people. This year, our work has included a series of 12 “Live Chats” themed around health and social care topics to encourage people to talk about their experiences. Topics have included cancer services, men’s health and mental health.

### Raising Awareness

The Healthwatch website, social media, and e-bulletins are central to how we communicate with the public and we continually develop these and grow our audience. In 2015/16, 9,571 people visited the Healthwatch Surrey website, which is a 53.73% increase on the previous year.

	Followers: 1,944 176.7K impressions
	Likes: 140

We have continued to build our profile in the local media, getting good coverage across Surrey for reports we publish as well as commenting on health news in print, online and on radio.

We are currently developing a new communications strategy to help us to continue to build and focus this work.

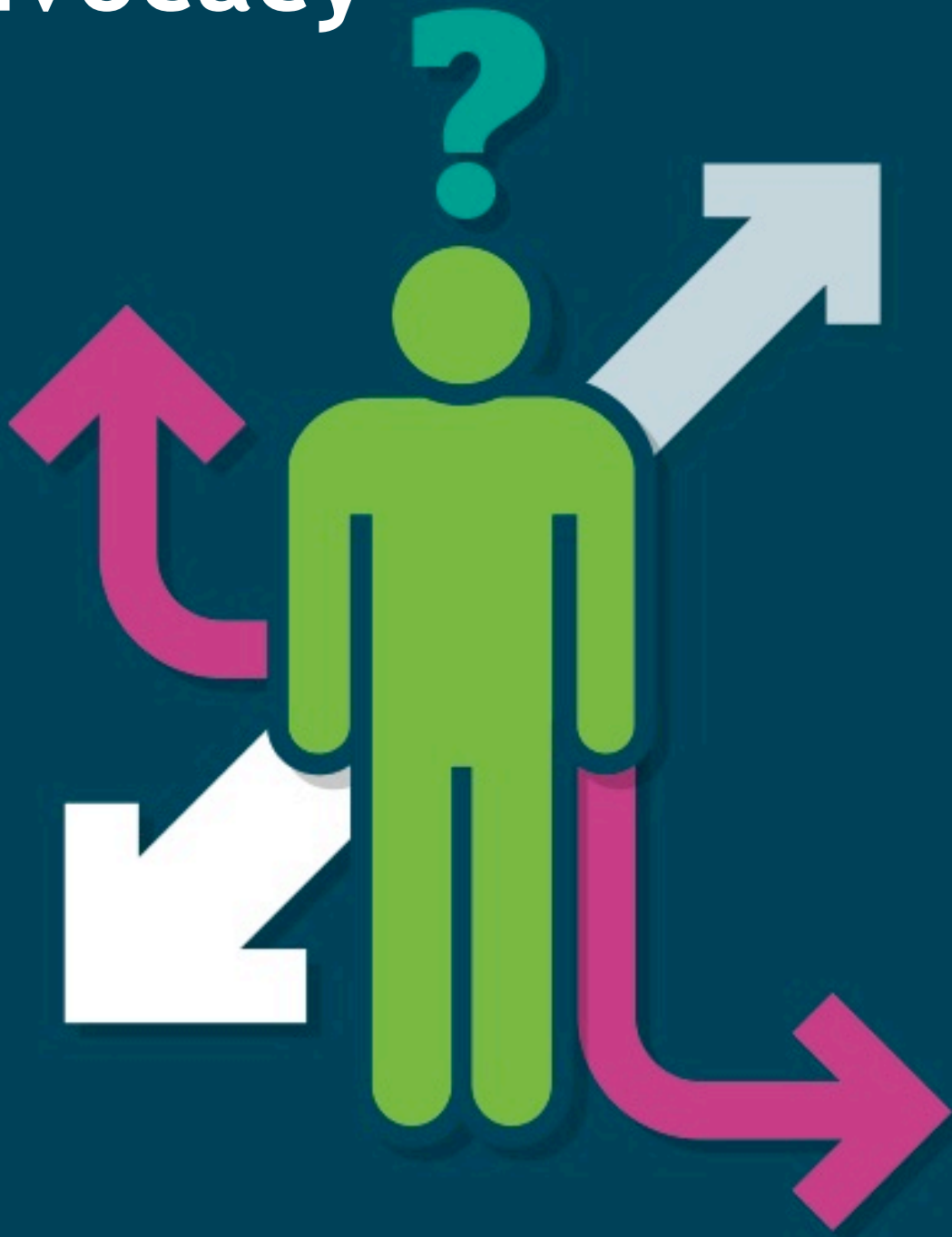
### What we’ve learnt from visiting services

One way that Healthwatch is able to gather information about services is to use a statutory power called ‘Enter & View’. It involves members of our Enter & View team visiting a service provider to observe what is happening and speak to people using the service and staff working there. This helps give us an informed, lay-person’s view about the quality and scope of health and adult social care services provided for people. Enter & View is used for a defined purpose, in response to intelligence received or as part of a planned project.

This year we did not carry out any Enter & View visits, but have taken the opportunity to review our policy to further define the agreed “triggers” under which an announced or unannounced Enter & View visits will be carried out. We have also produced a guide for Enter & View team members to support them in their role.

We have 13 people currently trained and authorised to undertake Enter & View activity on behalf of Healthwatch Surrey. A list of these individuals is available on our website. The use of Enter & View will be developed further and form the basis for a project in 2016/17.

# Giving people advice, information and advocacy





## Helping people get what they need from local health and care services

We believe that by empowering our communities through the provision of information, advice and advocacy, we can help people get the best from local health and social care services.

### Providing Information and Advice in partnership with Citizens Advice Surrey and Help and Care

Through this partnership, we offered a telephone information, signposting and advice helpline that operated 9am-5pm Monday to Friday and a High Street presence through 13 Citizens Advice in Surrey. People also accessed the information and advice service via SMS, our website and email.

In 2015/16, 4,044 people were able to make informed choices about their own care and support with the help of our information and advice services.



### Janet Rimmer, from Citizens Advice Reigate and Banstead, told us what being a Healthwatch Champion means to her:

“As someone who enjoys sharing information and development, I get a great deal of satisfaction from supporting volunteers and staff in the awareness of Healthwatch. The team are very helpful, informative and the regular opportunity to meet other Healthwatch Champions has also been invaluable. As part of my role, I have also supported the Healthwatch Surrey Winter Listening Tour, attended a presentation by the team at a PPG meeting in Redhill and the first Voice Network event at Redhill Methodist Church.”

Of these:

- 2,916 people contacted their local Citizens Advice for information and advice about health and social care services. This year has seen a notable increase in the number of people seeking information and advice about care assessments and self-funding for care home services.
- 230 people contacted our Helpdesk for information and advice. Around a quarter were referred/signposted to NHS Complaints Advocacy and almost half were signposted to other organisations.

All our Citizens Advice and Helpline advisers use a wide range of reliable and quality assured information sources when giving information to the public on Healthwatch matters including; NHS Choices, Gov.UK, Care Quality Commission and Surrey Information Point.

In addition, Healthwatch Champions are appointed by each Citizens Advice to co-ordinate and gather health and social care experiences from clients visiting the office and to input these into the Healthwatch Database (CRM).

## Case Study 1: Citizens Advice Woking

The Bureau was approached by the relative of an elderly woman who was sectioned due to depression. Her condition had improved and she was fit to be discharged. Doctors recommended she go in to a care home rather than returning to her own home.

The elderly woman's wish had always been to remain living independently in her own home. She was extremely distressed by the concept of not being allowed to do so. Her immediate mental health issues had stabilised and improved to the point where her relative felt she could be successful in this strongly held wish if an appropriate package of support could be put in place.

The client wanted to find out:

- The exact circumstances that an elderly person could be forced to go into a care home against her will
- Who would be liable to meet the costs of the residential care in these circumstances?

The Healthwatch Champion advised that the elderly woman's views would be best represented by an Independent Mental Capacity Advocate, able to give advice on the processes and criteria involved in complex decisions of this nature as well as represent the elderly woman effectively. The adviser also signposted the client to the Surrey Disabled People's Partnership (SDPP) who would be able to provide information about help (practical

and financial) and service providers specific to her needs.

As a result of advice given by the Healthwatch Champion:

- The client's mother had the best opportunity to be an active partner in her own future.
- The Independent Mental Capacity Advocate would ensure her voice was heard while her needs were being assessed and be able to advise her and her family about aspects of any financial implications, benefit entitlements etc.
- SDPP offered potential access to the safety net of support that would allow the woman to continue to live the independent life she wanted for as long as possible.





### Case Study 2: Citizens Advice Oxted

A client's teenage daughter missed over 50 days of school suffering from serious migraines. Fearing the medication was addictive, the client raised concerns about the increasing quantity being prescribed. A referral was made by the Bureau to a migraine management programme (MMP) that helps manage triggers and reduce the use of medication. MMP provided advice to the patient and school on managing serious migraines. As a result the young person required significantly less medication, less time off school and is far more in control of her condition.

### Case Study 3: Citizens Advice Mole Valley

At the height of a period of extreme, harsh weather conditions a homeless client came to Citizens Advice in Leatherhead for help with a number of pressing issues:

- Homelessness
- Recent bereavement of a close relative contributing to outward signs of mental health issues
- Poor budgeting of Job Seekers Allowance
- Disorganised administration creating difficulty with proof of Identity
- Raging toothache and no immediate access to dental treatment

The adviser encouraged the client to prioritise his next most pressing issue after food, which was toothache. The lack of adequate identification was impacting on his ability to find an NHS dentist. The adviser directed him to an NHS practice with local responsibility to provide dental care for homeless people and he was able to get an urgent, emergency appointment.

The Dentist was able to make an immediate referral for him to Mole Valley District Council where the emergency winter homelessness service was in place because of the severe weather. The client was also made aware of other sources of help for the longer term: support with budgeting and counselling services to help him deal with the loss of his brother and pathways to improve his mental health and wellbeing going forwards.

## Providing Independent NHS Complaints Advocacy in partnership with Advocacy in Surrey

Independent NHS Complaints Advocacy is a free advocacy service that can help you make a complaint about any aspect of NHS funded treatment. An advocate seeks to ensure that:

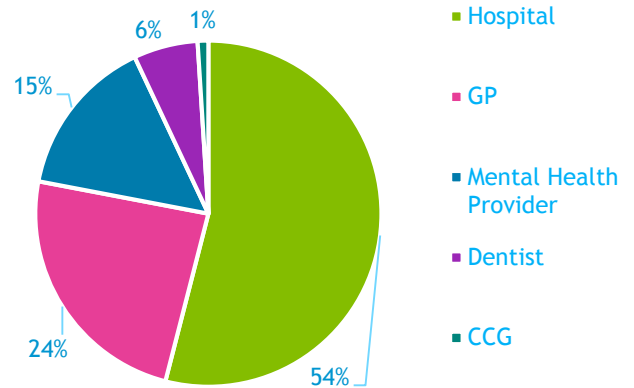
- you are able to have your views, experiences and feelings heard
- you are in control of decisions which are made about you
- you can contribute to improving health and care services you use.

In 2015/16 we partnered with Advocacy in Surrey to deliver the Independent NHS Complaints Advocacy service in our county. Advocacy in Surrey is a consortium of advocacy services led by Surrey Disabled People's Partnership. Together with 44 cases transferred from the previous provider, the service was able to support 203 new clients.

Everyone that accessed the NHS Complaints Advocacy service last year was asked about their satisfaction with the service.



Nature of NHS complaints supported by Advocates 2015/16



On a scale of 1-5, with 5 being the highest level of satisfaction, 88% clients rated their satisfaction with the overall service as 4 or 5 and 100% said that their advocate was good or great.

Next year, we will be working more closely with Advocacy in Surrey to help us capture more information about complaints to be used strategically and operationally to drive forward service change.



## NHS Complaints Advocacy - Eric's story.

Eric is an elderly and physically frail man who has experienced long delays to a back operation. On meeting with Eric at his home and listening to his story, Eric had already submitted complaints to his GP practice, Virgin Care, the CCG and the Royal Surrey County Hospital and was completely overwhelmed trying to deal with various responses. After discussing in detail and reviewing his paperwork, we agreed the areas for concern were:

- Physiotherapy sessions that were booked that could not go ahead as the physio required X-rays which the GP refused to provide
- Waiting time for his back operation was exacerbated due to the triage system implemented by Virgin Care, where he had to see an orthopaedic specialist before joining the waiting list for surgery
- Alterations had been made to his medical records following an initial complaint

Eric felt he had not got the responses he wanted from the various NHS providers and had forwarded everything to the Parliamentary and Health Ombudsman (PHSO). Eric had a call from an Assessor at the PHSO, which hadn't gone well and that's when we were contacted to help.

The advocate called the Assessor and explained that the client had not felt physically or emotionally well enough to deal with his complaint and acknowledged that he found the phone call both distressing and overwhelming. We asked the Assessor if it would be possible for a different Assessor to investigate the case because the client now felt the case had already been decided.

The Ombudsman is now fully investigating the issue around the alterations to Eric's medical records. Although, the client is disappointed that not all of his points will be addressed, he is looking forward to a positive outcome.



# How we have made a difference



## Producing reports and recommendations

We have produced a number of reports this year to ensure the views and experiences of Surrey people directly inform specific work of regulators, commissioners and providers, or as a result of projects directly linked to our priorities.

- **The Voices of Children and their Families (April 2015)**  
This report, for the Children's Rights Department at Surrey County Council, resulted in the creation of a multi-agency and Surrey-wide Children & Young People user experience forum by Surrey County Council to regularly hear the experiences captured by Healthwatch Surrey. This will help maximise the learning, and - where possible - secure outcomes for the individuals, carers and families involved
- **Patient Stories: Experiences of Frimley Park (July 2015)** A joint report with Healthwatch Slough, Wokingham, Surrey and Hampshire
- **Experiences of Continuing Health Care (July 2015)** In this report for the Surrey County Council Continuing Healthcare team, a theme was identified in the experiences shared with us about making applications for funding of continuing health care. People were finding the process difficult and a number of people were enquiring about advocacy services but were not able to find them. Without this advocacy their

involvement in these important decisions about their services was being hampered. As a result of this information from Healthwatch, Advocacy services for Continuing Healthcare applications have been identified (Age Concern, Alzheimer's Society, Spinal Injuries Association and Beacon) and brought to the attention of local Information & Advice providers

- **A Silent Majority (October 2015)**  
A report on everything we have heard in the 12 months up to October 2015 has informed the priorities for Healthwatch Surrey for the coming year.
- **'If I've told you once' - People's views on record sharing between health and social care professionals involved in their care in Surrey (November 2015)**  
See pg. 27
- **Listening Tour Summary Report (March 2016)**  
This report summarised what we had heard from the public during the Listening Tour which ran from November - January. We asked the Health and Wellbeing Board to consider how, in the context of diminishing resources, we can ensure that evidence of inefficiencies in health and social care services, which are often raised by the public in their feedback to us and other organisations, is fully harnessed and explored.

- **‘Just getting on with it’ - Views and experiences of people aged 65 and over in Surrey (March 2016)** See pg. 29
- **Patient Advice and Liaison Services/PALS (January - present)**. This project was born out of our priority to help make it easier for people to make an NHS Complaint. We have been working with PALS departments in Surrey to ensure up to date information is available and to help ensure people have access to independent support with making a complaint.
- **Community Cash Fund (September - present)** See pg. 30
- **Patient Participation Groups (PPGs) (January - present)**  
The aim of the PPG project is to build a closer working partnership between Healthwatch and the PPGs/GP surgeries across Surrey.

All public reports are available on our website and are shared with volunteers, Voice Network and other subscribers through our e-bulletins and network. The information gathered in these reports have been used to make evidence based challenges to decision making bodies.

### Working with decision makers

This year, we have been piloting a model of providing feedback to providers and commissioners in Surrey. The approach includes regular meetings to share insight into what we are hearing from local people. We have been meeting with senior executives at Surrey Downs CCG, Surrey Heath CCG, East Surrey Hospital, and Ashford & St Peter’s hospitals and a

number of outcomes have resulted from this work. We have received positive feedback, particularly from the commissioners involved.

**‘In the past year Healthwatch Surrey has established a good working relationship with Surrey Downs CCG. We meet regularly so that HW can provide feedback on what they’ve heard from the public, and we find this a very valuable source of information to help us improve local services’**

**Dr Claire Fuller, Clinical Chair, Surrey Downs CCG**

This feedback has resulted in a number of outcomes, including:

An individual called our Helpdesk to describe how they were regularly transporting their grandfather to visit his wife in hospital. The visits could only take place in the evening, after work. The visiting times of the ward were changed to end at 6:30pm, which led to the patient being in hospital without her husband and carer for the remainder of her stay. After raising this experience with the management team of Frimley Park, they confirmed that it was done on a trial basis by the Ward Sister and that they had decided to re-instate the original visiting times.



In North East Surrey, a lady reported to us that she had been threatened by a Consultant when she asked to raise a complaint. A subsequent search on our database identified another negative experience about the same Consultant, related to his attitude, from a different source. This was shared with the CCG. The CCG have asked the hospital concerned to investigate.

A young woman who had recently attended A&E at Frimley Park told us that she had been triaged on arrival by a receptionist. The Trust confirmed that they do sometimes have a nurse at reception who will triage patients. In this situation they have acknowledged that it is possible people would not be aware this is a suitably qualified member of staff. The trust confirmed that when this arrangement is in place in the future, the nurse on duty will state clearly to patients coming into A&E that they are suitably qualified before beginning the triage process.

Following an evaluation of this pilot we have begun rolling out this model across all commissioners in Surrey and have recently secured commitments from senior executives at all CCGs and Surrey County Council.

Most providers or commissioners have responded positively and actively to our requests for information or reports. A minority have not responded in this manner and we pursuing these cases with tenacity.

## Working with other organisations

### The Voice Network

A new Voice Network roadshow co-ordinated by Surrey Community Action on behalf of Healthwatch Surrey began in March aimed at encouraging voluntary, community, faith, service user and carer groups with an interest in health and social care to share the views of their members.

Each event takes place at a different venue across the county each quarter and a wide variety of organisations are encouraged to attend, so that Healthwatch Surrey can reflect evidence from the views and experiences of group members and service users and help to ensure that their health and social care needs are properly catered for and met.

Events have taken place in Reigate and Godalming with large and small charities represented as well as faith groups, with groups as varied as Disabled4Disabled, Headway Surrey, Are You Able To?, Think Action and Christ Central Redhill. Issues raised have included the lack specialist nurse provision, transportation to GP appointments, communication between health and social care providers and the impact of cuts on service provision.

Feedback following the events has been positive with comments such as:

**“Refreshing to know that service users’ views can be feedback to those who can actually influence services!”**

Voice Network member

Two more listening events are planned for September and December and there will be a celebration event in September with presentations from recipients of the Community Cash Fund.



### Establishing a new Independent Mental Health Network in Surrey

We have worked with Surrey Coalition of Disabled People to help shape a new Independent Mental Health Network which will ensure:

- that effective and meaningful involvement in all aspects of our lives builds resilience and changes people's lives;
- genuine partnership working between mental health services, professionals, service users and carers, based on agreed and shared outcomes;
- That this partnership of expertise works towards common goals of respect, recovery, choice and control for each and every individual experiencing mental distress and carers.

The group has already secured funding from commissioners to support them with a series of 'Mystery Shopper' activities to monitor service delivery.

By working in partnership with Healthwatch England, and designing a South East Workshop for both Healthwatch and Care Quality Commission (CQC), we have been able to ensure consistency across our region, as well as shared learning and best practice. This approach is now being nationally replicated and as a consequence of the workshop CQC is improving its induction for new inspectors to make them more aware of the value of Healthwatch.

### Healthwatch England

All our reports are published on the Healthwatch Surrey website and we share these directly with Healthwatch England. Our staff also regularly take part in the South East regional and national forums. No formal issues have been made to Healthwatch England this year, however our work on over 65s' experiences of primary care and views on data sharing, has fed directly into the national work by Healthwatch England. You can find their report on Primary Care, which focuses on experiences of particular groups, here: <http://www.healthwatch.co.uk/resource/peoples-experiences-primary-care-our-findings-full> More information on pg. 29.

### Working with other Local Healthwatch

We are pleased to be able to work closely with our regional local Healthwatch partners. As well as the South East regional forum, we also work closely with Help and Care affiliated partners, so that we can share resource and learning.

Working together has enabled us to tackle regional issues, such as that caused by the South East Coast

Ambulance Service NHS 111 ‘scandal’. This included joint meetings with the provider and joint media work with South East Healthwatch. We continue to work closely together on ambulance services.



### Working with the Care Quality Commission (CQC)

We meet quarterly with the CQC to discuss issues we’ve heard and how we work together. CQC regional teams (or directorates) for hospitals, general practice and adult social care are invited to attend. This good working relationship has allowed Healthwatch Surrey to directly bring issues and problems to their attention. The intelligence we have shared has influenced the CQC’s Key Lines of Enquiry and when combined with other intelligence, has triggered early inspections of a GP practice and a residential care home.

**“This information is like gold dust”**

Claire Martin, Primary Care Directorate CQC

We regularly promote opportunities for members of the public to feed directly into CQC inspections and have facilitated whistle-blowers contacting the CQC with information about services.

We have submitted ‘Insight reports’ to the CQC to inform inspection programmes. This has included evidence reports we have gathered on Surrey and Borders Partnership Trust (January 2016) and a number of GP surgeries (March 2016). We also consult with the CQC on whether to use our Enter & View powers.

### Case Study: Healthwatch trigger early inspection

Citizens Advice Woking made Healthwatch aware of a number of issues relating to Haven House residential care home. They had found that clients were reluctant to make open complaints for fear of repercussions for relatives at the home and for themselves. A member of the public had also reported concerns about the rough handling of residents. Healthwatch linked the issues and raised them with the Care Quality Commission. As a result of Healthwatch amplifying these voices about concerns, an early CQC inspection was triggered. The home has been assessed as ‘inadequate’ and given notice to improve. Healthwatch is continuing to monitor this care provider.

## Involving volunteers in our work

Our team of volunteers have been the “eyes and ears” of Healthwatch Surrey, playing an important role in helping us fulfil our statutory activities; from finding out the views and experiences of local people, to contributing to research for projects.

On the Listening Tour volunteers from across the County helped us listen to what people had to say. They enabled us to speak to more people and find out what really matters most in their local communities.

Volunteers were able to assist in our projects by distributing an online survey through all their networks, organising engagement events in their local communities, engaging with the public in locations such as their local health centre or Sure Start Children’s Centre. This helped us ensure that a diverse range of the population had the opportunity to contribute and tell us their opinions and experiences.



We asked Healthwatch Volunteer, Angus Paton (pictured, left) to tell us about his volunteering experience:

“I came to volunteering with Healthwatch through my work at Citizens Advice. Through my work I interviewed many clients who had raised health and social care issues. I could see that it was hard for individuals to get satisfaction when dealing with large, faceless organisations such as the NHS, so I was enthusiastic about volunteering with the Healthwatch team.

In November, I joined the Listening Tour at Farnham Community Hospital. I have also taken part in a Patient Led Assessment of the Care Environment (PLACE), reviewed

Healthwatch evidence for their response to Quality Accounts, visited PALS departments and acted as a strategic ambassador for Healthwatch in meetings with North West Surrey CCG. My role has been so wide and interesting and I find it increasingly satisfying.

Volunteers have played vital roles in our projects investigating Patients Advice and Liaison Services (PALS) and looking at best practice of GP Patient Participation Groups (PPGs). They visited PALS departments, made observations about information displayed and spoke to PALS staff. Volunteers visited a number of PPGs to investigate how they have been set up and run, listening to the barriers they encountered and how they overcame these. Their observations and the information they have gathered will inform what further action is taken.

The public, volunteers and stakeholders also played a key role in one of the biggest decisions that Healthwatch Surrey made this year - the appointment of our new CEO. Representatives from Surrey Coalition of Disabled People, Sight for Surrey, Action for Carers, Healthwatch volunteers and staff all took part in the interview process, in addition to the Healthwatch Surrey Board.



## Health and Wellbeing Board

The Surrey Health and Wellbeing Board (HWB) work together to improve the health and wellbeing of the people of Surrey. It is comprised of NHS commissioners, public health, social care, local councillors, Surrey Police, borough & district council and public representatives. Healthwatch Surrey has a seat on the board, and our representative is supported by regular briefings, and evidence and insight that we can share on relevant agenda items.

Healthwatch Surrey has been able to challenge the HWB on a number of issues. For example, we queried whether the Improving Children and Young People's Health and Wellbeing Strategy was sufficient, following the inadequate rating given to some Surrey County Council services by Ofsted in June 2015. It was agreed that the strategy would be reviewed and brought back to a future meeting sooner than originally planned. Also, having identified inconsistency between different CCGs in the style and language of various plans presented to the Health and Wellbeing Board, with some being much more accessible than others, Healthwatch challenged CCGs over the importance of demonstrating a consumer-focussed culture by ensuring key plans are accessible and understandable to the public.

### Supporting local people to shape services

We have promoted the involvement of local people in shaping local services through raising awareness of opportunities to engage with their local

providers and tell them their views and experiences.

We promoted the call for evidence for inspection programmes at Surrey and Borders Partnership Foundation Trust, South East Coast Ambulance Service and Moorfields Eye Hospital, London. Healthwatch Surrey distributed the details of how the public could contact the inspectors through our e-bulletin, social media and amongst our voluntary networks. Additionally, we have encouraged local people to feedback their views on a wide range of consultations on issues that could impact the health and wellbeing of local communities. These have included the:

- Public and Community Transport Services Review
- Community Hospital Services Review
- Royal Surrey County Hospitals and Ashford & St Peter's Hospitals Proposed Merger
- Mental Health services for veterans of the Armed Forces Review
- Surrey Learning Disability Partnership Board strategy
- Epsom and St Helier University Hospitals Estates Review
- Stroke Services Review
- Community Pharmacies Review
- Patient-lead assessments of the care environment (PLACE). We were approached by several providers to promote these opportunities and several of our own volunteers also came forward. Results are used to improve quality of services.



# Our work in focus



# Investigating what people think about sharing their health and social care records



The intention of the health and care providers within Surrey is to move towards a “Shared Care Record” in order ‘to integrate care and support services to improve our planning and delivery of services and hence people’s outcomes and experiences.’ (SCC Project Brief, May 2015). Surrey County Council (SCC) wanted to find out more about people’s opinions on sharing information about their health and care records, so they asked us to carry out a survey.

We piloted and then distributed a survey via a variety of channels, including:

- Healthwatch Surrey website
- E-Bulletin and contacts, as well as on social media
- Other voluntary organisations such as Surrey Youth Focus and Surrey Minority Ethnic Forum,
- Universities,
- Citizens Advice, Surrey Hubs and Surrey County Council.
- A press release resulted in newspaper coverage and a radio interview.
- It inspired debate on Streetlife and Twitter and was tweeted and retweeted many times.
- Hard copies of the questionnaire were also printed and distributed at engagement events and were used to engage with the public at a range of venues including a GP surgery and a Children’s Centre.

The resulting report ‘If I’ve told you once ...’ (November 2015,) captured the views of nearly 600 local people on the sharing of personal data records between health and care professionals.

*The messages contained within the report were clear - If the parameters of medical and care record sharing are kept within the confines of the medical and care professions, and there are procedures in place to ensure security, confidentiality and accuracy, there is strong support from survey respondents for sharing all or part of their health and care record with the health and care professionals involved in their care. There was also a strong desire for people to be involved in decisions about the sharing of their data.*

The findings in the report were presented to Surrey County Council and shared with the Surrey Information Governance Group who are involved in taking the Shared Care project forward.

**“This is an important piece of work... part of our information sharing processes and helped feed into our privacy impact assessments concerning the sharing of people’s personal data.”**

Grisilda Ponniah, Corporate Information Governance Manager, Surrey County Council

Findings have also been shared with User Involvement Groups (e.g. Patient Participation Groups), Surrey Health and Wellbeing Board, Surrey Transformation Board, Local Joint Integrated Commissioning Groups, Wellbeing and Health Scrutiny Committee, Department of Health: National Information Board, and the Local Government Association.

The work was also shared with Healthwatch England (HWE) where it was used to inform a submission to the National Data Guardian Review Team on Public Attitudes to consent and data security (30 Nov 2015). As a result, in December 2015, HWS were invited to join a workshop with the National Data Guardian Review Team on consent models, an involvement which is ongoing, and is leading to further invitation to participate in round table discussions at the Department of Health.

The report was also chosen as one of the Patient Experience Library’s ‘*Twenty reports to make you think*’ which were chosen on the basis “*We wanted to highlight some reports that struck us as really good exemplars.... we wanted insights and learning points that would really make us sit up and take notice*” (Feb. 2016).



# Exploring the primary care experiences of people over 65



**Access to GPs is consistently a top concern recorded by us in our interactions with the public.**

Our previous work in this area, 'Getting an Appointment with your GP: Experiences of the people of Surrey' (Jan. 2014), contributed to a Healthwatch England (HWE) report: 'Local Healthwatch Investigates: Access to Primary Care' (March 2015).

Following this report we worked with Age UK Surrey and Godalming Older People's Welfare Association to engage with groups of older people across the county. We'd identified this group as having particular difficulty getting an

appointment with their GP. *We also knew that the percentage of people aged over 65 in Surrey is currently slightly higher than the national average and is projected to rise considerably over the coming years to 20% of the population by 2022, and 25% by 2037.*

The research found that in general, older people were happy overall and appreciative of the healthcare they received. They tended to be stoic in attitude - and the flexibility offered by innovations such as online appointment booking and repeat prescription services were generally welcomed. However they identified room for improvement in areas such as telephone booking systems that don't have queuing options, appointment slots that are too short for people with complex needs, transport concerns for non-drivers and feelings of vulnerability when the GP surgery is closed. The people we spoke to questioned why best practice at some surgeries which have found a way to get it right, cannot be more widely spread across the county.

We have presented our findings to Surrey Wellbeing and Health Scrutiny Committee, Surrey Health and Wellbeing Board and Surrey Transformation Board and shared it with the CCGs in Surrey.

# Community Cash Fund



## Older people in Woking take part in health awareness session

In September 2015, Healthwatch Surrey launched its first Community Cash Fund. The aim of the initiative was to invest up to £1,500 in the capacity of grass roots projects, individuals and organisations which seek to improve the wellbeing of their local communities, and to enable people to share their experiences of accessing local health and social care. The grants were offered on the basis that each project would be completed by the end of April 2016.

Over 20 diverse and innovative applications were submitted and projects were successful in receiving a Community Cash Fund grant. These were:

- Sit-down Yoga and Health Awareness sessions which enabled older people to engage and make friends
- Youth Activity events which encouraged young people to voice their views to help shape local services
- An Aphasia Awareness session which helped people coping with the condition build skills and confidence.
- A 'Living Well with Dementia' event which raised awareness and understanding of this brain disease
- Seated Dance sessions which provided older people with an opportunity for exercise, conversation and to strengthen community links
- Young filmmakers who produced a short film exploring the experiences of young people with mental health issues

Feedback has been really positive and some of the projects will continue through 2016 because they have sourced a reliable route to self-fund their activity.

Healthwatch Surrey are proud of the results these groups delivered and we are really pleased to announce we will shortly be inviting applications for Community Cash Fund 2016/2017.



We asked Jasmine Crowne, fund winner Matrix Trust, to tell us what they have been able to achieve with the help of the Community Cash Fund (CCF):

“Working with the CCF has been a great experience from start to finish. Friendly, flexible and supportive staff have allowed us to deliver our project, and the young people in our community have benefitted hugely from this. Not only have young people in Surrey had the opportunity to have their voices heard by health commissioners, but over *35 young people a week will now have access to information about mental health and signposting opportunities as a result of the project the CCF allowed us to run*, as well as over 25 young people completing an interactive workshop about emotional health and wellbeing.

The benefit of having access to and working with the CCF will last for many months to come. The young people that benefitted from the funding reported “learning lots and having so much fun”, and it would not have been possible without Healthwatch Surrey and the CCF”



Screenshots from ‘Our Minds Matter’, a film made by The Matrix Trusts’s Re:Fresh on experiences of Mental health



# Our plans for next year



## Priorities for 2016/17

Our thematic priorities are decided in an open and transparent manner, to which the public and volunteers make an important contribution (see pg. 35). This year the issues we will concentrate on are:

- Amplifying the voice of Care Home residents
- Investigating the experience of Hospital Discharge
- Early intervention in Mental Health
- Improving the experience of making a GP appointment
- Making it easier to make an NHS Complaint

Alongside our work on these specific issues we will be engaging with as many people as possible in Surrey to gather experiences of health and social care.

We will focus on **seldom heard groups** and build our contacts with voluntary and community groups in order to work in partnership to amplify the voice of service users.

We want to do more to **build awareness** of who we are and what we do, and we will focus our awareness-raising work around the thematic areas above. The more we hear about people's experiences in these areas, the more we can ensure that our work reflects these experiences.

We will **build on relationships** already established with CCGs and some hospitals with the aim of meeting all key commissioners and service providers in our patch on a regular basis to tell them "what we've heard" based on the experiences we've gathered.

Our combined staff/volunteer teams will cover each CCG area to make sure we have the local intelligence and relationships we need to do our work.

Work on our thematic priorities will include greater use of **Enter and View** as a way of conducting our research, and we will be very reliant on our trained expert volunteers to help us with this.

We are impacted by the Sustainability and Transformation Plans for three areas - Surrey Heartlands, Frimley Health and Sussex and East Surrey. Our main focus will be on Surrey Heartlands although we will use our relationships with neighbouring Healthwatch to ensure we are in touch with what's going on in these other areas. We are already involved and working to challenge or support where necessary to help drive genuine public engagement with these plans to ensure they are right for the local population.



Surveying members of the public

# Our people



## Decision making

Healthwatch Surrey CIC is governed by a Board which has a majority of independent Directors. The Board meets in public quarterly and members of the public are encouraged to attend and ask questions. The Board makes decisions about Healthwatch Surrey's strategy and priorities. The members of the Healthwatch Surrey board are:

### Independent Directors

- Peter Gordon (Chair)
- Jason Davies (Deputy Chair)
- Paul Charlesworth (retired from the board March 2016)
- Deborah Mechaneck
- Wanda Jay
- Lynne Omar
- Kary Backhouse

### Member Nominated Directors

- Richard Davy, Surrey Independent Living Council
- Mark Sharman, Help and Care
- Laurence Oates, Citizens Advice Surrey, who replaced Norma Corkish in November 2016.

## How we decide our priorities

We have a process which helps us decide on which issues Healthwatch Surrey should focus. The aim of this process is to ensure that our priorities and projects are representative of the wishes and needs of Surrey's communities. Volunteers are also involved in the decision-making process. Any member of the public can put forward a priority proposal. The Healthwatch team also put forward proposals based on the concerns fed back from the public. All proposals are assessed by the Priorities Recommendation Group, which is made up of six Healthwatch Volunteers who examine and discuss evidence from a range of sources including the Joint Strategic Needs Assessment and the Healthwatch database (CRM). Their conclusions and recommendations are then submitted to the Healthwatch Surrey Board in public for debate and decision.

In deciding where our work should focus in 2016/17, the Board took into account the following:

- Input from our Priorities Recommendations Group
- Whether the issue is already being dealt with effectively elsewhere
- Whether the issue is already impacting those suffering inequalities, seldom heard or potentially vulnerable
- Whether Healthwatch Surrey can make a difference
- Whether the issue is related to the Health and Wellbeing Board strategic plan.



# Our finances

Below is the summary of Healthwatch Surrey's financial activity (subject to final independent audit) for the year 2015/16.

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities and NHS Independent Complaints Advocacy		£693,315
Total income		£693,315
EXPENDITURE		
Insurance		£2,540
Wages		£87,583
Pensions		£14,037
Post and stationery		£7,076
Travelling		£8,130
Recruitment costs		£2,996
Staff training		£1,019
Room hire costs		£4,872
Computer costs		£2,377
Sundry expenses		£349
Accountancy		£1,994
Consultancy fees		£1,382
Legal fees		£416
Other direct costs		£469,197
Depreciation		£804
Total expenditure		£604,772
Balance brought forward		(£88,543)

The end of year balance was a surplus of £88,543, mainly due to staff vacancies during the year including the Chief Executive post, cover for which was provided voluntarily by members of the Healthwatch Surrey board. As a result of these vacancies, some project work and associated costs from 2015/16 have been carried over into 2016/17. The board has agreed to use £55,520 of this surplus to meet the requirements of the company's reserves policy and the remaining £33,023 towards the costs of carrying out the priorities it has identified for its work plan 2016/17.

### Reserves Policy

Healthwatch Surrey is working towards ensuring an unrestricted funds reserve equivalent to two months of its full year budget. In order to achieve this it will establish a reserve equivalent to one month of its 2015/16 contract sum by the 31<sup>st</sup> of March 2016 which equates to the sum of £55,520. This is the minimum reserve level needed to ensure we can provide financial stability and the means for the development of our required activities.

The basis for this judgement by the board is the need to;

- Cover staff redundancies and winding up costs in the event of closure.
- Take account of the relatively short time scale of our main service contract
- Take account of the relatively short notice of termination period of our main contract
- Ensure our commitment to ensuring continuity and quality of service.
- Bridge the timing differences between start of the financial year and the receipt of the first quarters contract payments to protect against the effect of late payment of contract invoices and the potential for ongoing late payments throughout the financial year

The Board will, at least annually, review the policy and level of reserves that are required to ensure that they are adequate to fulfil our continuing obligations.

# Contact Us



**Registered Address:** Healthwatch Surrey CIC, The Annexe, Lockwood Day Centre, Westfield Road, Guildford, Surrey, GU1 1RR

**Telephone Helpdesk:** 0303 303 0023

Visit your local Citizens Advice

**Website:** [www.healthwatchesurrey.co.uk](http://www.healthwatchesurrey.co.uk)

**Email:** [Enquiries@healthwatchesurrey.co.uk](mailto:Enquiries@healthwatchesurrey.co.uk)

**SMS:** 07592 787533

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@HW\_Surrey



Healthwatch Surrey

**Address of contractors:**

- **Help & Care**, 896 Christchurch Road, Bournemouth, BH7 6DL
- **Surrey Independent Living Council**, Astolat, Coniers Way, Guildford, Surrey, GU4 7HL
- **Citizens Advice Surrey**, 36 Bridge Street, Godalming, Surrey, GU7 1HP
- **Advocacy in Surrey**, Surrey Disabled People's Partnership, 51 Commercial Way, Woking, Surrey, GU21 6HN
- **Surrey Community Action**, Astolat, Coniers Way, Guildford, Surrey, GU4 7HL

We will be making this annual report publicly available by 30th June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

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