

To: Healthwatch Surrey Board From: Kate Scribbins, CEO Date: July 2019

CEO's report July 2019

Highlights of the last quarter (Q1: April-June 2019)

Overview

In April-June 2019 we have seen high levels of activity across all our programmes, now that we are fully staffed and delivering on the core contract plus various new business projects. We have had a record-breaking number of hours contributed by our growing band of volunteers, who have been raising awareness, gathering stories from the public and getting involved in representing public voices at stakeholder reference groups. We have gathered over 1,500 experiences about health and social care services in Surrey, and helped 952 people with advice and information. We kicked off the next round of our Community Cash Fund with some fantastic new projects to help local groups improve health and wellbeing in their local communities. We experimented with new ways of engaging with people, including visiting a food bank, and putting a call out on social media for stories relating to community mental health recovery services.

Engagement

We gathered 1,618 useable experiences¹ (UEXs) this quarter through our Helpdesk, Citizens Advice Champions, Independent Health Complaints Advocacy and our pro-active engagement events activities.

We held **Listening Events** in some of the wards with the highest levels of deprivation in the county: Maybury & Sheerwater, Westborough, Westway, Weybridge North, enabling us to make good progress against our goal of visiting the following deprived wards on an annual basis.

At the start of the year we conducted a review of the location of these Listening Events, to ensure we collected a higher proportion of experiences about non-GP and non-Hospital services. This has meant that we are visiting a wider variety of locations e.g. the Bedser

¹ An experience (topic/theme) associated with a named service provider

Hub. Plans for next quarter include visiting sexual health clinics, children's centres, a drop-in hearing clinic and Farnham train station.

This new programme of events has also enabled us to begin to reach all of the different service types² that we want to hear from annually.

Targeted engagement took place with people with learning disabilities, parents of children with special education needs and adult Carers as part of our outreach programme, which will result in two published reports and provide an important contribution to the Joint Strategic Needs Assessment.

We also awarded grants through the Community Cash Fund in May, which enabled us to engage with people from the Black & Minority Ethnic community in Maybury, people being supported to live independently, people who are homeless and refugees and Asylum seekers.

These activities took us a step closer towards our goal of undertaking targeted engagement with a wide range of Surrey's communities during the lifetime of Healthwatch Surrey's current contract.

For more detailed information all aspects of our engagement and Evidence gathering strategy please see Appendix 1.

Sharing what we've heard

A response has been received from **Warrengate Care Home** to our Enter & View visit conducted earlier in the year. It was published on our website and included the following comments:

"The senior management team have reviewed activities at the weekend so that there is the same level of stimulation and engagement as during the week... The suggestion box is being repositioned, open to residents and other visiting professional, contractors, staff & relatives. Suggestions cards / pencils will be accessible... Areas that were tried in terms of decor have been touched up and we have reviewed all our notice boards and put in place a system to ensure their information is current."

The Care Home Manager also commented on his experience of the visit:

"I would like to thank the Healthwatch Team, for their insight, passion and professionalism during the visit. Visits can and are sometimes, anxious for staff teams, however the kindness and mindfulness of the Healthwatch team put both the staff and our residents at ease."

We continued to hear about **issues people are having accessing sexual health services**. After receiving detailed assurances from the service provider, we wrote to the service commissioners to seek more information about the decision to award a contract extension and seek reassurances that the issues raised are being addressed.

We identified a **concerning theme in the experiences gathered about a GP practice**. A visit was undertaken in collaboration with the surgery, to hear more about people's experiences. The visit led to a recommendation being made to "review the telephone booking system to see if there are ways to improve this situation, in particular, for those who work full time or work shifts". We are awaiting a response.

² As defined through registration with CQC

Through the work of the Escalations Panel, we escalated³ 8 individual issues this quarter to service providers, commissioners and the CQC.

We did not have any issues to share with the Multi-Agency Safeguarding Hub this quarter.

We shared 132 experiences with service providers, commissioners and the CQC as part of regular meetings with them. These are issues that are not of immediate concern.

We've conducted a review of how we share our insight across the health and social care system, in the light of the changing architecture of the ICSs, seeking feedback from decision-makers on what forums are most impactful both to share our insight, and to keep abreast of engagement activity across Surrey. We will be making changes to our meetings in Q2 as a result.

Outcomes from this activity can be found in the quarterly Activity Report.

Championing patients' views

We maintained a regular presence on key decision-making forums including

- Health & Wellbeing Board
- Adults & Health Select Committee
- NHS England Quality Surveillance Group
- Children & Young People Partnership Board
- Safeguarding Adults Board
- Surrey Heartlands Quality Committees in Common
- Surrey Heartlands Integrated Care System Transformation Programmes

We shared emerging findings from recent work with children and young people with Learning Disabilities (LD) and Special Educational Needs (SEND) with the **Children & Young People Partnership Boar**d during a discussion about priorities in Surrey. Families had told us that having a child with SEND / LD should be "less of a battle" and that people involved in care delivery need to do more to support transitions from 'childhood' to 'adulthood'. It was agreed that a priority about 'transitions' should be added.

At the Adults & Health Select Committee we were able to share a recent positive experience of online GP consultations, but also raised concerns about the awareness of the full range of services provided by NHS 111, particularly amongst vulnerable and disadvantaged groups. During the My GP Journey project we heard how not everyone was aware of NHS 111 and that people often did not realise that it can provide faster access to other services i.e. it is more than just an information and advice line. The commissioners committed to using the findings from the report and working with Healthwatch Surrey to inform a new communications campaign.

We also took an opportunity to **comment on BBC Surrey** about mental health services, specifically eating disorders, during which we repeated our key messages on mental health and signpost people to support.

Thematic priorities

After the publication of the **Hospital Discharge Checklist** we evaluated the strengths and weaknesses of the work and looked at how we move forward. The checklist's value was as

³ Escalating an issue is different to 'sharing' as we require a written response from the organisation.

a prompt to patients, ensuring they ask staff for important information before they are discharged from hospital. It needed to be shorter, simpler and more accessible. We took the most valuable questions in the checklist and produced a small toolkit of communications materials.

We completed 17 face-to-face interviews with Care at Home users and many other interviews with care agency staff to find out whether these users 'had a voice'. The report **"Can you hear me?"** was published and a communications campaign has begun to disseminate the findings. The findings have been presented to commissioners of the service who have indicated that they will be adopting a number of the recommendations.

Plans were decided for our final Care Homes project. Initial scoping commenced on the next Mental Health project.

Information and Advice

891 people have been helped this quarter via our Helpdesk, Healthwatch Champions based in Citizens Advice and our NHS complaints advocates. On top of this our engagement officers and volunteers help people with signposting and information whenever they are out on engagement events.

Independent Health Complaints Advocacy

Advocates support 61 clients this quarter of which 17 were new referrals. We will be taking steps in Q2 to carry out targeted awareness-raising for the service to try to boost this number.

Communications

Web Activity

Web activity has decreased since last quarter, page views are down by 29% and new visitors have decreased by 35% compared to Q4 last year. However, page views per visit has increased by 3.7%, which indicates people are spending more time on our website. Looking at the figures for Q1 last year, it is on trend for Q1 web activity to be lower compared to the rest of the year.

		2019			
Web Analytics	Q1	Q2	Q3	Q4	Q1
Page views	8,554	12,348	9,311	10,681	7,567
Visitors	3,259	4,823	3,834	4,515	3,079
Unique visitors	2,341	3,400	2,685	3,129	2,052
Page views p/visit	2.62	2.56	2.43	2.37	2.46
New Visitors	2,105	3,172	2,425	2,932	1,884

Social Media (Facebook, Twitter)

The total number of Twitter followers has increased by 2.5% this quarter and the number of impressions (the number of people who have seen one of our tweets) is 36,800, which is a decrease of 19% against Q4 but an increase of 86% compared to Q1 last year.

		20	2019		
Twitter Characteristic	Q1	Q2	Q3	Q4	Q1
Followers	2,517	2,584	2,614	2,692	2,760
Following	1,268	1,300	1,295	1,427	1,609
Total Tweets	5,231	5,324	5,353	5,471	5,574
Impressions	19.7K	24.1K	11.7K	45.8k	36.8k

On Facebook we have 618 likes (an increase of 3.6% vs. last quarter).

Awareness Initiatives

In Q1 we conducted presentations on Healthwatch Surrey's engagement work at East Surrey CCG Patient Reference Group, Surrey Minority Ethnic Forum meeting and a Councillors meeting at Elmbridge Local Committee.

In April we continued promoting the NHS Long Term Plan survey and in May started promoting the Frimley NHS Long Term Plan survey. We distributed Care at Home interview leaflets across Surrey at libraries, leisure centres, community centres, Citizens Advice, church halls, supermarkets and post offices. We also carried out social media campaigns to accompany these campaigns.

In May we held the Community Cash Fund Winner's Workshop, an event to announce the winners and learn about each winning project and how the funding will be spent. It enabled us to raise awareness, build trust and facilitate engagement with seldom heard groups.

As well as these initiatives, we also had a stall at the Healthy Guildford event and took part in the North East Hampshire and Farnham CCG Innovation Conference.

We now have the Healthwatch Surrey presentation displayed on the waiting room screen at Camberley Citizen Advice.

E-Bulletins

During Q1, three monthly e-bulletins were distributed to stakeholders and members of the public. The current number of subscribers is 836. Over the quarter, on average 32.4% of subscribers opened the e-bulletin each month. The e-bulletins focus on news from Healthwatch, local and national health and social care issues, consultations and other opportunities for people to get involved in health and social care in Surrey.

Campaign Highlights

This quarter our campaigns focused around Care at Home (phase 2), continued promotion of the NHS Long Term Plan survey and the Frimley NHS Long Term Plan survey, Bowel Cancer awareness, Diabetes Prevention Week, Autism awareness, International Day against homophobia & transphobia, Dementia Action Week, Volunteers Week, Carers Week. We published Hospital Discharge - next steps.

We have also been promoting our partners' consultations to encourage the public to have a say in how services in Surrey are planned and run, along with making local people aware of services available in health and social care. These included:

- NHS Mental Health Crisis Helpline
- Transport for Surrey focus group and questionnaire
- NHS Surrey and Borders Partnership smoke free questionnaire
- Finding your way a directory of services for people bereaved by suicide in Surrey & North East Hampshire.

In April, we were featured in Get Surrey, County Border News and Bromley Borough News all the articles included information about Healthwatch Surrey and how we were engaging local people to take part in the NHS Long Term Plan survey. On 11th June, we were interviewed by BBC Radio Surrey on GP closures and on 21st June we were interviewed by BBC Radio Surrey on eating disorders, where we signposted to available support in Surrey.

Building our use of volunteers

We have seen great progress on volunteer activity this quarter, based in part on our recent recruitment drive, and in part on the fact that we have been joined in the staff team by Wendy Loosely who provides invaluable admin support to the volunteers, and links them up with local community groups. We have recorded a record 662 volunteer hours this quarter which is an increase of 146 hours on last quarter. We continue to see the number of hours contributed by our volunteers grow. 8 new volunteers joined us in Q1.

The awareness raising work of our volunteer groups, specifically with those communities who face barriers to their voices being heard, is starting to gain momentum. The volunteers have been mapping local VCFS groups who meet in their area and are now reaching out to these groups to deliver our presentation or to speak informally to them about Healthwatch Surrey. In Q1, our volunteer groups reached out to carers support groups, veterans and people with dementia and their families to raise awareness and hear their experiences.

Our volunteer groups are also making an excellent start to mapping the Patient Participation Groups at GPs in their CCG area, and in actively sharing intelligence about changes to services with our staff team; especially in relation to primary care. This quarter our groups also began to reach out to local people through social media. Two volunteers from our North West Surrey group, who are both students at Royal Holloway University, reached out to Surrey's student population via Facebook, to encourage them to share their views with us via our website and helpdesk. We received an instant response from students who wanted to share their experiences with us.

This quarter, we have also been preparing our Community Influencer volunteers to represent us at public meetings in our critical friend role. We have taken the time to meet with each Influencer individually, to learn more about their background and expertise, and to support them in championing the patient voice and promoting best practice for engagement and public consultation. In Q1 our Influencers represented us at the Improving Healthcare Together consultation oversight group for the Epsom and St Helier Hospitals reconfiguration, Stakeholder Reference Groups for Primary Care and for Urgent Care in Guildford and Waverley CCG, the North West Surrey Stakeholder Reference Group for Urgent Care, the Stakeholder Group for GP Online Services and the Surrey Heartlands Quality Committee in Common. They are also volunteering their time to monitor publications and the media for us, and now regularly pass their insights to the staff team via our Volunteers Officer. Our volunteer groups have also undertaken an entirely volunteer led research project; visiting 53 of Surrey's 143 GP surgeries, across all six of our CCG areas to investigate the barriers faced by some Surrey residents when obtaining medical evidence from their GP to support benefits claims, after our Escalations Panel considered a number of concerning experiences relating to this matter. East Surrey group volunteer Kate Oake will be interpreting the data gathered by our volunteers to produce a report in Q2 and will be working with our senior management team to formulate a list of recommendations which will be sent to GP surgeries and commissioners. The report will also be made publicly available.

We continue our volunteer recruitment campaigns in East Surrey and Surrey Downs CCG; advertising our role profiles with the Reigate and Banstead, Tandridge, and Central Surrey Councils for Voluntary Service, Charity Job and Indeed.com. We have sent posters out to all our East Surrey and Surrey Downs community contacts, and our Volunteers Officer will be accompanying our Engagement Officers and volunteers to listening events in those areas to speak to people about our volunteering opportunities. We are already seeing some success with the campaign and will shortly be able to set up a Surrey Downs volunteer group.

As a social enterprise we have secured a growing and sustainable future

We have continued to work with Surrey Heartlands on our project to support Citizen Ambassadors for the workstreams of the ICS.

We have continued to work on our project with Surrey Safeguarding Adults Board to amplify the voice of those who have been subject to a safeguarding enquiry.

We have completed our work for Healthwatch England to carry out engagement around the NHS long term plan in Surrey, liaising with our partners in the Surrey system to work out how to align this work with the Surrey strategy, and conducting separate pieces of work for Surrey Heartlands and Frimley ICSs.

Other

The team and Board have received training in how to maximise our influence and how to maintain constructive relationships whilst making difficult challenges.

All staff and Board members have now completed our new Data Protection refresher training. 60% of volunteers have completed the refresher training and sessions are planned for the new volunteer groups to complete it at their next group meetings.

Joe Kite completed his Business Administration & Marketing Apprenticeship in June, we held an all staff team and Board team celebration to say farewell to him.

Finances

Healthwatch Surrey CIC – Budget and Expenditure Q1 as of 31st June 2019

Healthwatch Contract	2019-20	Budget to	Actual to	Variance to	Balance to	
Category	Budget	Jun-19	Jun-19	Jun-19	Mar-20	
Staffing Costs	£360,611	£90,153	£86,660	£1,594	£273,951	
Direct Delivery Costs	£83,830	£20,958	£20,583	£1,575	£63,247	
CIC Costs	£9,940	£2,485	£1,769	£716	£8,171	
Signposting	£46,470	£11,618	£11,618	£0	£34,853	
Health Complaints Advocay	£97,160	£24,290	£24,290	£0	£72,870	
Finance, HR, Office & Governance Support	£32,720	£8,180	£7,801	£379	£24,919	
Help Desk	£14,600	£3,650	£3,650	£0	£10,950	
	£645,330	£161,333	£156,370	£4,963	£488,960	

KPIs

Link to mission/vision		Lead	18/19 figure	Q1	Q2	Q3	Q4	Cumulative total to date
consumer for health and social care in	The number of experiences we have shared versus 2018/19	MP	513	132				132
	The number of experiences we have escalated versus 2018/19*	MP	45	8				8
Healthwatch Surrey's role, function and services are known, understood and valued by consumers and therefore they readily contact us	Number of experiences proactively shared with us via website/post1	MP	317	98				98
	Number of experiences proactively shared with us via the Helpdesk	LS	1188	352				352
	Number of people contacting the Helpdesk for information and advice	LS	426	144				144
	Number of people accessing the Independent Health Complaints Advocacy service (Note: 2018/19 88 people were supported by an Adovacate to make a compaint)	LS	263	61				61
Our influencing is based on sound evidence, knowledge and insight	The number of Useable Experiences we gather to a minimum target of 3,000 per annum	MP	5497	1618				1618
	Capture at least one Useable Experience from every service type annually	MP		These to be monitored via Evidence Gathering Strategy on a quarterly basis				
	Undertake targeted awareness-raising or engagement with specific groups as outlined in Evidence Gathering Strategy	MP						
	Gather Useable Experiences annually from one ward within each CCG area identified as amongst most deprived and/or having lowest life expectancy	MP						
	Publish 4 reports/outputs per annum on thematic priorities	MP	4	1				1
	Publish 4 reports/outputs per annum based on outreach work	MP	1	0				0
	Publish one report/output per annum on an emerging issue	MP	1	1				1
Building our use of volunteers	The number of volunteer hours	LS	2336	594				594
As a social enterprise we have secured a growing and sustainable future	Progress against target to bring in £60,000 per annum in new business turnover	кѕ	70,133	28,646				28,646

KPIs from 2019/20 work plan

¹Website / post only - does not include all interactions with the Helpdesk *Figure based on refined definition used in quarterly report i.e. "X specific concerns were escalated..." (this would have been '9' if using existing wording)

Appendix one: Evidence gathering strategy progress report

We held Listening Events in some of the wards with the highest levels of deprivation in the county: Maybury & Sheerwater, Westborough, Westway, Weybridge North, enabling us to make good progress against our goal of visiting the following deprived wards on an annual basis:

- □ Court (Surrey Downs)
- □ Hindhead (Guildford & Waverley
- □ Leatherhead North (Surrey Downs)
- Maybury and Sheerwater (North West Surrey)
- □ Merstham (East Surrey)
- □ Old Dean (Surrey Heath
- □ Stoke (Guildford & Waverley
- □ St Pauls (Surrey Heath
- ⊠ Westborough (Guildford & Waverley)
- ⊠ Westway (East Surrey)
- ☑ Weybridge North (North West Surrey)

At the start of the year we conducted a review of the location of these Listening Events, to ensure we collected a higher proportion of experiences about non-GP and non-Hospital services. This has meant that we are visiting a wider variety of locations e.g. the Bedser Hub.

	UEXs	Proportion YTD	Proportion 2018/19		
GP & Hospitals	1116	75%	80%		
Other	364	25%	20%		

Plans for next quarter include visiting sexual health clinics, children's centres, a drop-in hearing clinic and Farnham Train Station.

This new programme of events has also enabled us to begin to reach all of the different service types⁴ that we want to hear from annually:

- □ Adoption support agencies
- \boxtimes Ambulances
- □ Blood and transplant service
- \boxtimes Dentist
- ⊠ Diagnosis/screening
- \boxtimes Doctors/GPs
- □ Education disability services
- □ Children's homes, including secure children's homes
- \boxtimes Community health service
- ☑ Community Services Healthcare
- □ Community Services Learning Disabilities
- ☑ Community Services Mental Health
- □ Community Services Nursing
- □ Community Services Substance abuse
- \boxtimes Clinics
- \Box Home hospice care
- \boxtimes Homecare agencies
- \Box Hospice
- \boxtimes Hospital
- ⊠ Hospitals Mental health/capacity

⁴ As defined through registration with CQC

- □ Hyperbaric chamber services
- □ Independent fostering agencies
- □ Long-term conditions
- □ Mobile doctors
- \boxtimes Nursing homes
- ⊠ Phone/online advice
- □ Prison healthcare
- ⊠ Rehabilitation (illness/injury)
- □ Rehabilitation (substance abuse)
- □ Residential family centres
- □ Residential holiday schemes for disabled children
- ⊠ Residential homes
- □ Shared lives
- □ Supported housing
- Supported living
- ☑ Urgent care centres
- □ Voluntary adoption agencies

Targeted engagement took place with people with learning disabilities, parents of children with special education needs and adult Carers as part of our outreach programme, which will result in two published reports and provide an important contribution to the JSNA.

We also awarded grants through the Community Cash Fund in May, which enabled us to engage with people from the Black & Minority Ethnic community in Maybury, people being supported to live independently, people who are homeless and refugees and Asylum seekers.

These activities took us a step closer towards our goal of undertaking targeted engagement with the following communities during the lifetime of Healthwatch Surrey's current contract:

- □ Adults with Autism
- \boxtimes Adult Carers \checkmark (\checkmark = activity last quarter)
- $\boxtimes\;$ Adults with learning disabilities $\checkmark\;$
- Black & Minority Ethnic community
- ☑ Black & Minority Ethnic community in Maybury, Sheerwater, Goldsworth East wards ✓
- □ Children born to teenage mothers in North West Surrey
- □ Children in need in Spelthorne & Elmbridge
- oxtimes Children with special educational needs and disabilities \checkmark
- ☑ Deaf and hard of hearing people
- $\boxtimes~$ Deprived people $\checkmark~$
- Gypsy Roma & Traveller communities
- Gypsy Roma & Traveller community in Guildford & Waverley and North West Surrey
- □ LGBT+
- \boxtimes Older men
- \boxtimes Older people
- □ People being supported to die well
- $\boxtimes~$ People being supported to live independently $\checkmark~$
- ☑ People being supported to live with illness
- $\boxtimes~$ People who are homeless $\checkmark~$
- □ People with mental health conditions in East Surrey

- \boxtimes People with learning disabilities in East Surrey
- People with communication impairments
- \boxtimes People with dementia
- \boxtimes Refugees and Asylum seekers \checkmark
- \boxtimes Vulnerable people
- ⊠ Young Carers
- ⊠ Young people
- □ Young adults in Guildford & Waverley