

To: CIC Board

From: Sam Botsford, Healthwatch Surrey Contract Manager

Date: 24/04/2025

## **Healthwatch Surrey Contract Manager's report**

### **Summary of the last quarter Q4**

### **January to March 2025**

## **Highlights**

### **Healthwatch England Impact Award**

We were delighted to once again be shortlisted for the annual Healthwatch England Impact Award for our work with Surrey hospitals to encourage more people to share their feedback about services. The work we were shortlisted for can be found on our [website](#). Julie Callin, who led the report, presented to the Healthwatch network as part of the showcase.

Whilst we were disappointed not to win, this provided an opportunity for us to connect with the hospitals to learn more about how they had used our insight further since our project. We heard how our feedback had contributed to the development of the Royal Surrey Cancer Centre and how Ashford St Peter's had developed creative ideas to inspire young patients to share their views, showing the ongoing impact our work continues to have.

### **Thematic priority updates**

Our 4 thematic priorities are well embedded in our workplan and we continue to achieve a number of outcomes in these areas.

As well as the above recognition for our work under our 'Involvement of People' priority, our subsequent project exploring people who are neurodiverse and their experience of outpatients appointments has

continued to be popular and this work continues to be referenced in system meetings.

Katharine Newman has also reported on the 2<sup>nd</sup> part of our Self-funders project under our social care banner. We worked closely with Age UK Surrey and Surrey County Council (SCC) as part of this and the immediate impact is reported in our impact report, with SCC reporting on our findings to their Director Leadership Team.

We have continued to support on access to primary care this quarter which has led to some commissioned work, working closely with 2 GP practices. We have had very positive feedback from commissioners and GPs who are looking to use our recommendations as a basis for their plans to improve communication and engagement over the next few months, and we will be following up in the autumn.

Lou Danaher has also been completing the fieldwork for our next project hearing from people who have experienced domestic abuse about the support they received from their GP. We will be presenting our findings to stakeholders in May at a convening workshop which will be jointly facilitated by 1 of our volunteers. As well as sharing our findings, this will be an opportunity to engage stakeholders and codesign our recommendations and their actions to take forward.

Shelley Cummings and 2 of our volunteers visited 2 settings that provide support for people with learning disabilities for Enter and View visits this quarter. As well as being able to make observations about the settings, this also meant we were able to hear from residents, service users, carers and family members who might otherwise not be heard. Surrey and Borders Partnership NHS Trust approached us last year to visit these settings in conjunction with our current research project looking at people with learning disabilities experiences of mental health services.

## Challenges

We were notified that the provider of our experiences database, website and online feedback centre would cease supporting Healthwatch websites at the end of this calendar year. We have already transitioned staff onto a bespoke submission form and will be doing the same with the Independent

Health Complaints Advocates in Q1. This mitigates against any risks in capturing and reporting on experiences.

We have also investigated options to change to a new website, and work will begin on this in Q1 allowing for plenty of time to transition and ensure minimal disruption. This also provides an opportunity for our volunteers who are interested in using existing or learning new skills to get involved with the building of our new website.

We continue to await the publication of the Dash review, and alongside news of ICB cuts, the dissolution of NHS England, and local government reorganisation, this is quite an unsettling time. However, we feel we are in a strong position to continue to deliver on our commitments under Healthwatch Surrey and are excited to continue this work into the new financial year. We continue to meet with senior NHS and SCC staff and attend relevant meetings to ensure we are up to speed on developments.

## Finances: Q4

Healthwatch Surrey expenditure April 2024 to March 2025	
Category	Expenditure
Staff costs	£332,541
Direct delivery costs	£52,982
CIC costs	£92,458
Health Complaints Advocacy costs	£97,276
Citizen Advice insight	£10,000
<b>Total</b>	<b>£585,257</b>

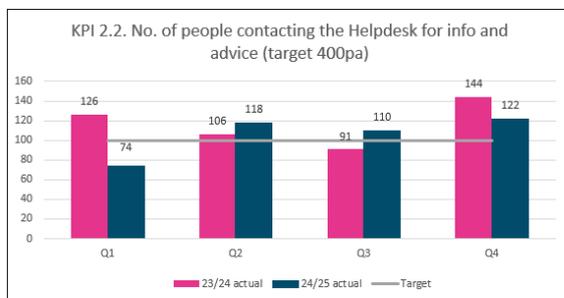
## Performance on KPIs

We are pleased with the position that we are in at year end with our KPIs. The methods in which we have captured resident insight this year has been incredibly varied, meaning we have been able to reach a variety of people. As well as introducing Whatsapp and increasing our use of surveys, we have maintained our community engagement; talking face to face to people in community settings. This reach into communities has enabled us to offer our volunteers a range of opportunities to suit their strengths and areas of development. In addition, we are maintaining a good level of insight in order to share with stakeholders upon request as well as part of

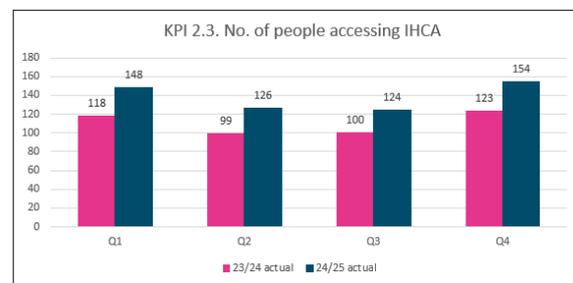
our planned reporting series. Whilst the number of people sharing their experiences with us has increased each quarter, there is a decline in Q4 vs this year. This is in part due to a large survey that was conducted on the impact of pharmacy closures last year.

The number of people accessing the IHCA service has increased this year, however, the complexity of cases is also increasing. This means significant resource is being dedicated to supporting on these enquiries but this does not always then lead to cases requiring advocacy support.

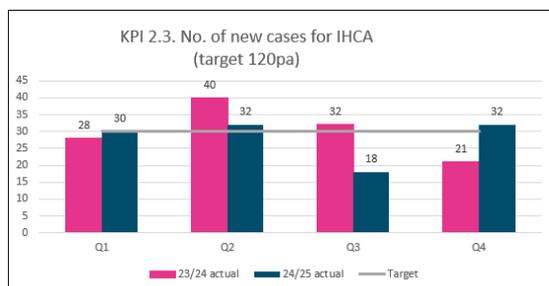
## KPIs: Q4



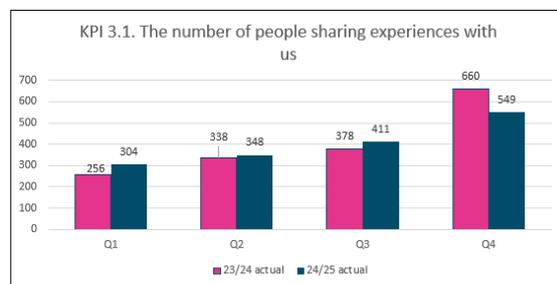
Helpdesk contacts	Q1	Q2	Q3	Q4	Total
23/24 actual	126	106	91	144	467
24/25 actual	74	118	110	122	424
Target	100	100	100	100	400



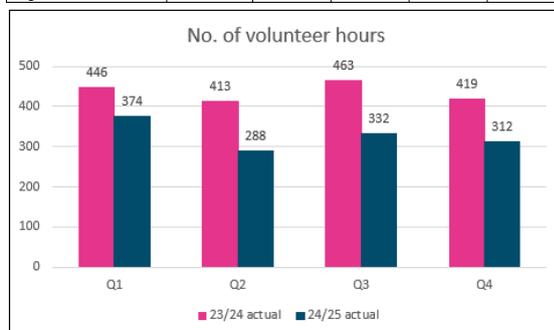
ICHA access	Q1	Q2	Q3	Q4	Total
23/24 actual	118	99	100	123	440
24/25 actual	148	126	124	154	552



ICHA referrals	Q1	Q2	Q3	Q4	Total
23/24 actual	28	40	32	21	121
24/25 actual	30	32	18	32	112
Target	30	30	30	30	120



No. of useable exp	Q1	Q2	Q3	Q4	Total
23/24 actual	256	338	378	660	1632
24/25 actual	304	348	411	549	1612



No. volunteer hrs	Q1	Q2	Q3	Q4	Total
23/24 actual	446	413	463	419	1741
24/25 actual	374	288	332	312	1306