

To: Healthwatch Surrey Board

From: Kate Scribbins, CEO

Date: 11th October 2016

CEO's report October 2016

1. Internal

We have embarked on some new initiatives and updated some our key policies this quarter:

- We have had two meetings of our new panel which meets monthly to review all
 evidence that might lead to the need for an Enter and View visit (the reactive Enter
 and View Panel).
- We have continued work to implement a new communications strategy. This now has approval from the Board and we have held a half-day training session for staff. We have been working with a designer on new publicity materials ready for launch.
- We have updated our safeguarding adults policy and already had cause to put it into action (see below).
- We have put into place an implementation plan for our data protection policy and had a staff briefing session on responsibilities.

We held a Team Development Day in July with an external facilitator where we worked on the core Healthwatch message and started to develop our influencing strategy.

We have continued to be tenacious in securing and capturing our outcomes so that we become better at celebrating our success.

We have held Enter and View training for new volunteers which various staff members also attended.

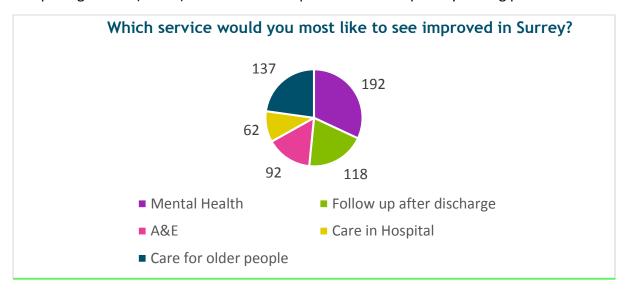
We continue to make progress on new income generation – we have been developing our vision of the Healthwatch Surrey offer and how this might need needs within the system.

We have successfully recruited for an apprentice who joined the team at the beginning of October. Our Research Officer Julie Dallison resigned towards the end of this quarter. Following two unsuccessful rounds of recruitment for a Data Administrator we have now appointed Samantha Botsford who will be joining the team by the end of October.

2. Engagement

The 'Listening Tour – Summer 2016' included 27 events between July and September at Children's Centres, GP surgeries, Hospitals, High Streets and Supermarkets. We spoke to 998 people (60% of whom voted in our poll 'Improving health and care services') and recorded interactions with 263 people during which 488 experiences were shared with us. There were eight experiences disclosed to us which required prompt escalation to the CQC, General Medical Council, Safeguarding Teams and commissioners.





VOICE IT! activity has been facilitated with Older People living at home, in partnership with Methodist Homes Association. A theme was identified around incontinence services. A report documenting this and a Case Study has been shared with commissioners.

We held a celebration of our Community Cash Fund in Dorking Halls with BBC Surrey as presenter to celebrate the work of last year's recipients and announce the 2016-17 winners. During which the community group MASCOT confirmed that the funding they received has enabled them to create a regular and sustainable seated dance session for their community.

The winners of the 16/17 Community Cash Fund have been announced. There were ten successful projects chosen from 49 applications (up from 20 applications in 15/16).

3. Working with partners

We have continued to hold quarterly meeting with CAB managers and meet regularly with the HW Champions. Following Julie's departure Matthew Parris is putting new arrangements in place for who will lead on relationships with the Champions as we are very keen to continue to build communication.

Regular quarterly SLA review meetings were held with SDPP and Help and Care.

I attended a Help and Care managers meeting and HWS meeting. I visited HW East Sussex and HW Kent to find out more about how our neighbours work. I attended a workshop

hosted by HW Kent and run by a HW England specialist which examined how local HW can present their evidence to best effect.

We continue to meet SCC on a regular basis.

We attended Health and Wellbeing Board and Health and Wellbeing Scrutiny Committee on a regular basis and made some challenges. We presented our annual report and forward plan to the Health and Wellbeing Board; and presented user feedback for a session on mental health. We secured a commitment to a regular slot on "patient voice" at future HWB meetings.

During attendance at the Wellbeing & Health Scrutiny Board we have supported the scrutiny of the Stroke Services Review and North West Surrey CCGs public engagement over Adult Community Services Procurement.

Our participation in the Adult Social Care Quality Assurance Steering Group is ensuring that Healthwatch Surrey has a key role in being the first 'point of contact' for any soft intelligence related to adult social care services. Commissioners are collaborating on a communications campaign to increase awareness about Healthwatch Surrey.

We attended the Forum for the Children and Young Peoples Partnership Board.

We presented Healthwatch's work to the Epsom and Ewell Health Liaison Panel.

We had a meeting with Surrey and Borders Partnership Trust where we secured agreement to regular What We've Heard meetings, in addition to finding out about their work on Technology-Enabled Care.

We attended the stakeholder engagement meeting for the stroke services review.

We were invited to join the group developing a Digital Roadmap for Surrey which is closely linked to the STP. The group are interested in working with HWSy to facilitate greater public engagement and we will use this as our first opportunity to present our engagement offer.

4. Thematic work

We have developed work plans for all five of our thematic priorities and are starting work in all areas. Each thematic priority is allocated to a team member who is responsible for coordinating ongoing influencing work for that theme, as well as progressing specific projects.

Care Homes: Following a training session for our volunteers, we have embarked on a series of 25 Enter and View visits. We have been working closely with SCC adult social care partners who attended and led a session at our induction day for our Enter and View volunteers. We aim to complete these visits in November. Individual reports will be published on our website as they are completed and a full reports will pull together overall findings once the visits are complete. One visit early in the programme led to escalation of a safeguarding alert which in turn led to an immediate CQC inspection.

5. Relationships with CCGs

We are really starting to make progress on the meetings to feed back "What we've heard", having had meetings with all the CCGs. We are now preparing for the second round of meetings. We have developed a template for standardised reporting of sentiment and themes, and are refining the way we analyse all relevant cases from the CRM in order to identify key case studies to illustrate our themes. This is taking considerable resource as we prepare for each meeting.

The team have met to review how "What we've Heard" meetings are going and plan next steps. We have taken steps to ensure consistency around minute taking and follow up.

6. Escalations

Eight particularly concerning experiences were escalated promptly to the following organisations:

- Care Quality Commission (3)
- General Medical Council (1)
- Adult & Children Safeguarding Teams (3)
- CCGs (3)

The Enter and View panel meet monthly to consider whether we should use our powers to investigate cases from our CRM or whether to escalate via other routes (e.g. Commissioners or CQC).

7. South East Coast Ambulance Service (SECAmb)

SECAmb has hit the headlines this quarter with both a warning in July and final report from CQC in September which recommended the service be put in special measures. HW attended the CQC Quality Summit in late September. We obtained coverage in local media and on BBC South. We continue to have a monthly catch up with NW Surrey as lead commissioner which enables us to be well-informed.

8. Sustainability and Transformation Plans

We have attended the first stakeholder engagement workshop on Surrey Heartlands STP. We are keeping in touch with colleagues involved in East Surrey and Sussex where East Sussex HW is leading for the various HW affected, and we are linking up with our various HW involved in the Frimley footprint to ensure a unified HW input into that process. We are concerned to ensure that the patient and citizen voice is incorporated in a way that is meaningful and early enough in the process to add value and will continue to raise this with those leading the process.

9. Joint Strategic Needs Assessment

We have been corresponding with the JSNA team to see whether intelligence gathered by HWSy can be used as chapters are updated to provide a section on "the customer

experience". There are some practical difficulties and resource constraints in doing this but we are continuing to work this through and have suggested other organisations who might have local insight.

10. Volunteering

Our volunteer team comprised of 27 volunteers at the start of the quarter; we have recruited one volunteer and one volunteer has left the team. Due in large part to increased project work we have seen a large increase in the number of volunteer hours this quarter. Total volunteer hours this quarter were 320 (compared to a quarterly average in 2015/16 of 170 hours).

- 13 people expressed an interest in volunteering
- Ten volunteers recruited onto new project or activity

	Q2
Public engagement	18
Internal meetings	15
External meetings	50
Training and workshops	67
Enter and view visits	56
Other-volunteering from home,	
report writing, travel etc.	114
Total hours	320
Volunteers involved in activity	13

Volunteers assisted us with (amongst other things) attendance at System Resilience Group for East Surrey; Frimley South System Resilience Group, CQC Quality Summit for SECAmb; Central Sussex Alliance place-based Care programme Board; Ashford St Peters Patient Experience Forum.

11. Communications

Web Activity

Overall web traffic has increased, with more visitors in Quarter 2 than any of the previous three quarters. There has been a significant increase in new visitors and the decreasing bounce rate suggests more people are engaging with website content. The most major spikes of activity are likely to relate to the launch of the

Web Analytics	Q2	Q3	Q4	Q1	Q2
Page views	7,000	6,827	6,725	5,966	6,871
Visitors	3,372	3,021	2,814	2,792	3,278
Unique visitors	2,635	2,101	1,871	1,938	2,181
Pae views p/visit	2.08	2.26	2.41	2.14	2.10
Bounce Rate	62.28%	58.59%	52.03%	54.69%	49.51%
New Visitors	2,514	1,969	1,709	1,797	2,025

Community Cash Fund, updated volunteering pages, and recruitment opportunities.

E-Bulletins

Three e-bulletins were distributed to over 600 stakeholders and members of the public. The average open rate is increasing to an average of 32% and another 230 people have seen the e-bulletins via sharing mechanisms.

Social Media (Facebook, Twitter, Streetlife) The total number of Twitter followers has increased organically by 3% this quarter and Facebook likes has increased organically from 156 to 178 (14%). We have also been working with Streetlife to develop our profile and increase our reach.

Media

This quarter media worked included:

Kate interviewed on BBC
 Surrey Radio and BBC
 South News regarding

Twitter Characteris tic	Q2	Q3	Q4	Q1	Q2
Followers	1723	1828	1944	2100	2163
Following	893	940	998	1048	1082
Total Tweets	2790	3081	3338	3481	3744
Retweet Reach	164. 8K	No longer availabl e*	No longer availabl e*	No longer availabl e*	No longer availabl e*
Mention Reach	111. 1K	No longer availabl e*	No longer availabl e*	No longer availabl e*	No longer availabl e*
Impressions	n/a	61.1K	47.4K	27.7K	49K

- the CQC inspection of South East Coast Ambulance service. This is the first time Healthwatch Surrey have appeared on television.
- The Community Cash Fund 2016/17 press releases promoting the fund picked up by local news channels.
- BBC Surrey covering the Community Cash Fund Let's Celebrate Event at Dorking Halls

Raising Awareness

Over the summer our aim was to attend a major public event in each CCG area in order to raise awareness of Healthwatch within the general public, but particularly the working population. Events included the Mytchett Family Fun Day on Bank Holiday Monday, Reigate Festival and Epsom Family Fun Day. These events enabled us to hear from hundreds more people and increased the visibility of Healthwatch as a community organisation.

Communications Strategy

A new campaigns led communications strategy was developed and ratified by the board. In late September, thematic priority leads attended a communications workshop to support the development of communications and action plans ahead of the campaign commencement date of November 1st 2016.

In order to support this campaign approach we have sought to the assistance of a designer to produce a series of template posters, leaflets, banners etc that be easily customised for each campaign.

Preparing for Winter

The Health and Wellbeing Board Sub Comms Group have been preparing our annual 'Winter Preparedness' campaign. Healthwatch took a lead role in updating this plan for 2016/17 and was able to highlight the potential gap in flu vaccination and information provision for young carer

Quality Assurance

We have been working with the Adult Social Care Quality Assurance Steering Group on a communications work stream that will support the promotion of Healthwatch Surrey to the public e.g. getting feedback forms into libraries, GP surgeries, hospitals and social care settings, but will also focus on promoting awareness and understanding of Healthwatch amongst social care professionals and providers.

12. Finance

Finance

A statement of the Healthwatch Surrey CIC financial position this quarter is detailed below

Financial Statement – 30th September 2016

	Budget 2016/17	Budget 30/09/2016	Actual 30/09/2016	Variance 30/09/2016
Staffing Costs	£169,020	£84,510	£68,360	£16,150
Direct Delivery Costs	£104,023	£52,012	£18,361	£33,651
CIC Costs	£7,380	£3,690	£6,336	-£2,646
Citizens Advice Bureau	£46,470	£23,235	£23,235	£0
Help & Care	£188,681	£94,341	£94,223	£118
SDDP	£113,839	£56,920	£56,919	£0
SILC	£36,538	£9,134	£18,299	£0
	£665,951	£323,841	£285,734	£47,272

13. Resources

Healthwatch Surrey has Service Level Agreements with delivery partners covering most aspects of its service delivery.

Citizens Advice: Information & Signposting via Surrey Citizens Advice Bureaux in Reigate and Banstead; Runnymede and Spelthorne; Surrey Heath; Waverley and Woking.

Help & Care: Evidence & Insight, telephone Help Desk and Community Engagement

Surrey Disabled Peoples Partnership: Health Complaints Advocacy and Information/Signposting via Surrey User Led Hubs

Surrey Independent Living Council: Governance & Office management, Support for Information/Signposting via Surrey User Led Hubs

Between them the delivery partners employ a range of staff to work for or on behalf of Healthwatch Surrey:

Help & Care

Dr Julie Dallison (Research Officer - resigned this quarter), Matthew Parris (Evidence & Insight Manager), Jade Parkes (Engagement Officer), Jacquie Pond (Engagement Officer), Sonali Florence (Data Handler/Administrator – left this quarter).

Surrey Disabled Peoples Partnership

Wendy Ward & Alison Lancaster (Managers), Val Pettman and Jade Wilson

In addition to this Healthwatch Surrey is supported by other staff and volunteers from the delivery partners including Healthwatch Champions at Citizens Advice Bureaux, helpline staff at Help & Care, advocacy administration and management at Surrey Disabled Peoples Partnership and finance, administration and governance support from Surrey Independent Living Council.

Healthwatch Surrey C.I.C directly employs its own team of staff:

Chief Executive Officer, Kate Scribbins., Katherine Leach (Volunteer Officer), Lauren ter Kuile (Communication & Projects Officer) and Lisa Sian (Administration and Projects Officer)

Healthwatch Surrey Board

Non-Executive Directors: Kary Backhouse, Jason Davies (Deputy Chair), Peter Gordon (Chair), Wanda Jay, Deborah Mechaneck, Lynne Omar

Member Appointed Directors: Richard Davy, Mark Sharman, Laurence Oates.