



To: Healthwatch Surrey Board

From: Kate Scribbins, CEO and Matthew Parris Deputy CEO

Date: July 2018

CEO's report July 2018

Highlights of the last quarter (Q1)

Engagement

We have substantially exceeded our goals for gathering useable experiences, thanks in part to a strong performance by Citizen Advice partners and the Helpdesk. This achievement has also been possible thanks to our programme of Listening Events becoming increasingly productive in terms of generating experiences (particularly as we have had notable success in securing more volunteer involvement in these events).

Due to capacity issues in the team, we have not conducted the planned outreach activity this quarter, however plans are in place to catch up by the end of the year. Children's services will be a focus next quarter.

We have delivered all re-active engagement activities required by the Escalations Panel. We've also made a good start in seeking to hear about every type of health & social care service before the end of the year, in line with our engagement strategy. Furthermore, we have been able to put in place a new induction process to ensure that new staff and volunteers are competent and confident when attending engagement events.

Sharing what we've heard

We have shared the following experiences as part of our regular What We've Heard meeting series with commissioners.

Commissioners	CQC
66	22

For example we raised with CCGs the issue of inconsistent charging between GPs for provision of medical evidence to support benefit claims which can create significant barriers for people. Surrey Heath CCG are now contacting GPs in their patch to ensure they are transparent with patients around charging.

Through the work of the Escalations Panel, we escalated 12 individual issues (provider 8, CQC 1, Commissioner 3) and shared 1 with another local Healthwatch. Nothing has been escalated to MASH this quarter.

We have taken up an invitation to join the Quality Committee in Common of the Surrey Heartlands CCGs in order to share any concerns we are picking up around quality.

We met with Surrey and Borders to share our insight across their services.

Championing patients' views

We have continued our involvement with changes to sexual health services in Surrey, both in terms of contributing to the scrutiny of how the engagement and consultation was conducted; and in terms of ongoing involvement in the Patient Working Group and participating in Contract Review Meetings at the invitation of the commissioners. We attended the Adults & Health Select Committee and provided a witness statement from HWSy: this included new evidence about on-going issues with the service's online booking systems. As a result local politicians strengthened their recommendations for Sexual Health services and we issued a press release. We continue to challenge as a critical friend around how lessons learnt during this engagement and consultation around service change will be applied to other potential service change plans so that valuable learnings around public engagement are built upon.

HWSy participated in the scrutiny of plans by Surrey Heartlands to engage local citizens in service change and highlighted to local politicians and commissioners some risks inherent in plans to make engagement meaningful.

We made a challenge at the Health and Wellbeing Board during an update on all 4 STPs that touch on our area, around what stage all 4 are at in their public engagement plans.

We presented findings of "*How to help...*", our latest report on Mental Health, to commissioners of Mental Health services across Surrey at their team meeting.

After bringing to the attention of the Surrey Safeguarding Adults Board that there had been a deterioration in the experience of vulnerable adults of the safeguarding process, the Board requested a report into the reasons for this from the Adult Social Care team at Surrey County Council.

We provided a report to and were interviewed by the Independent Review on CAMHS and offered to conduct some focussed evidence gathering to inform the review.

We contributed to a review by consultants Institute for Healthcare Improvement on population health and, specifically, the role of citizen engagement in Surrey Heartlands.

We sought assurance around CAMHS services, from commissioners at the Quality Committee in Common of Surrey Heartlands, specifically around the quality of data on experience.

We have engaged with the CCGs leading the Acute Sustainability transformation plans within the Surrey Downs/Sutton/Merton patch and have put forward a proposal for how we believe local Healthwatch can most effectively contribute to their engagement with local people. We attended one meeting of the Stakeholder Reference Group and will continue to act as a critical friend to the CCGs to help them make the engagement as inclusive as possible whilst maintaining our neutrality on the issues themselves. We have investigated

and talked to other Healthwatch who have been involved in major service change as well as seeking advice from Healthwatch England to establish the role that local Healthwatch can play when major service reconfiguration is proposed.

We attended Stakeholder Reference groups for Surrey Heartlands workstreams and for the Acute Sustainability Programme for South West London.

We met with the new CEO of Frimley Park Hospital and discussed how Healthwatch insight can best be shared with the Trust.

We attended a visit to HMP Coldingley organised by Surrey Heartlands to look at challenges prisoners face in accessing healthcare.

Thematic priorities

Care Homes

In May we published '*What I want...within reason*', an exploration of mealtimes in 20 care homes for older people. The report highlighted some fantastic examples of good practice which have been shared with Care Homes throughout Surrey.

We also found that whilst staff in homes could describe ways that residents were provided choice, residents gave mixed responses about the availability of choice. Residents and their relatives also told us that care home staff are often under pressure and this seemed to lead residents to moderate their requests and expectations.

A number of Safeguarding Adults concerns were raised with the Multi-agency Safeguarding Hub during the project.

An impact report will be published in the Summer.

Mental Health

In June we published '*How to help...*' which explored how mental health services can support emotional wellbeing. We heard from 70 people during visits to mental health hospitals, drop-in sessions at community-based clinics and an online survey.

We found that when people with mental ill-health and their carers are involved in care plans they are substantially more satisfied with services. However, around half of people accessing services in the last 18 months have not been involved in their care plan.

We have recommended that service providers should review the way they assess the services they provide to ensure that they incorporate feedback reported directly by patients, on the issues that patients told us were important.

An impact report will be published in the Summer.

Hospital Discharge

We have scoped a new project on Hospital Discharge which will see the extension of the piloting of the Healthwatch Surrey Discharge Checklist. Following some initial success at Royal Surrey County Hospital, we will now be refining the tool and responding to the demand created amongst local hospitals. We met with Action for Carers to discuss how best to incorporate carers' perspectives and rights into the checklist.

New priority: Care at Home

We have conducted a short review of the literature available on the policy context and evidence on user perspectives on care at home. By combining this with what we've heard from local people and some intelligence from dialogue with key stakeholders and volunteers, we have been able to develop a short list of project ideas for our first project on this thematic priority area. We have selected a project for some initial scoping.

A watching brief on CAMHS

We have begun formalising our work on issues with Children's Adolescent & Mental Health services, by creating an additional priority area within which we will maintain a 'watching brief'. We are hoping that a volunteer or a number of volunteers will come forward to help us with this. The topic area that we will be concerned with will be directed by the Escalations Panel. Whilst we will not necessarily embark on project work in this area, the role will help ensure we have the intelligence we need to be able to respond appropriately to emerging issues.

Influencer Mapping

We believe we are currently achieving our goals (as set out in our Influencers Strategy) with the overwhelming majority of key relationships identified within the health and social care system (65 of 90 relationships). Though there are some key areas of concern, for which we have devised new actions in order to improve relationships.

There have been some significant changes at Surrey County Council in the last quarter, which have prompted us to make plans to engage with; our new Healthwatch Surrey commissioner (once appointed), new Chair of the Health & Wellbeing Board, the new Director of Children's Services and the new Chair of the Health Integration & Commissioning Committee (formerly Adults & Health Select Committee).

Progress has been made with the Sussex & East Surrey Alliance who, following the introduction of new leadership, have invited all the local Healthwatch within the footprint to attend a Transformation Board to explore the role that our organisations can play in the partnership.

Plans are in place to strengthen relationships with Children's Services, following Surrey County Council's latest Ofsted report. Relationships with some VCFS organisations also need to be refreshed ahead of the HWSy Board Member recruitment campaign.

Information and Advice

The number of clients contacting the Helpdesk was down this quarter, due in part to there being no Eagle radio campaign running this quarter. We know that the radio adverts help to drive traffic to the Helpdesk and will be running the campaign again in Q2.

Independent Health Complaints Advocacy

This was the first quarter in which Surrey Independent Living council ran the IHCA service for us. SILC dealt with 64 cases this quarter of which 27 were new referrals.

We are very aware that public awareness of our Helpdesk and Advocacy services are lower than we would wish. This was one message that we heard loud and clear in our Reflective Review. We are working on plans to boost awareness this year.

Communications

Web Activity

Overall web activity is down on last quarter following the success of the winter campaign. However, when compared to the same period last year, there is significant growth in the number of page views, unique and new visitors. The most popular pages this quarter included:

Web Analytics	Q1	Q2	Q3	Q4	Q1
Page views	7,379	13,513	11,018	13,113	8,554
Visitors	2,581	4,374	4,792	4,584	3,259
Unique visitors	1,688	3,238	3,207	3,081	2,341
Page views p/visit	2.86	3.09	2.30	2.86	2.62
New Visitors	1,505	2,887	3,003	2,841	2,105

Project reports, meet the team, contact and work with us pages.

E-Bulletins

Over the quarter, 3 e-bulletins were distributed to more than 843 stakeholders and members of the public, a disappointingly low 0.3% on the last quarter. The predominant cause of this has been the introduction of GDPR regulations that require all sign-ups to confirm their subscription before they are successfully added to the list. As a consequence 95% of new requests to join the e-bulletin list have not been successful. We will be reviewing what further action we can take to address this. On average 30.8% of subscribers open 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.

Social Media (Facebook, Twitter)

The total number of Twitter followers has increased by 1.8% this quarter and the number of impressions (the number of people who have seen one of our tweets) has reduced by 19%.

Twitter Characteristic	Q1	Q2	Q3	Q4	Q1
Followers	2248	2311	2397	2471	2517
Following	1154	1205	1228	1251	1268
Total Tweets	4273	4575	4826	5081	5231
Impressions	23.9K	50.5K	45.1K	25.4K	19.7K

In Quarter 1 we surpassed 500

Facebook followers/likes to reach 520 at the end of the quarter. This was a 5.5% increase from 493 followers last quarter.

We ran 2 Facebook adverts to promote job opportunities within Healthwatch Surrey These adverts or boosted posts have reached 4,891 people in Surrey, which resulted in 176 engagements, including comments, likes and shares.

Media

- We have issued 3 proactive press releases this quarter which resulted 3 online or print articles (known) and 1 radio interviews on BBC Surrey this quarter. Issues/topics covered include: Food and drink in care homes, community mental health services and #ItStartsWithYou award nomination.
- We have responded to a request from BBC Surrey for an interview regarding a Marie Curie report on the state of end of life care in Surrey.

Awareness

- We have continued to seek to raise awareness of Healthwatch Surrey through other VCFS organisational newsletters. This quarter, this included articles in Surrey Coalition Newsletter, Surrey Disability Register Newsletter and
- Campaign led communications campaigns focussed on:
 - April - Hospital Discharge Checklist
 - May - Care Homes
 - June - Mental health

Campaigns coming up in Quarter 2

- July-August - Healthwatch Surrey Awareness
- September - Care homes (impact report)
Care at home

Building our use of volunteers

We have recorded 424 volunteer hours this quarter, which is an increase on last quarter.

We have recruited three new volunteers, two of whom will be attending the kick-off meeting for the Guildford and Waverley Volunteer Group.

We have 3 other expressions of interest and have met with all three.

No volunteers have left us this quarter.

This quarter volunteers have been involved in engagement events; high street and at provider locations; Enter and View; feeding back what we've heard to commissioners; Sexual health patient working group; wiring our entries for Healthwatch England awards; attending a workshop to help us evaluate the development of our Volunteering Strategy; helping us review the findings of the Ofsted report into Children's Services and work out the Healthwatch role in this.

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 STP. The workstreams are developing at different speeds and this is causing some issues for the Ambassadors. We are keeping closely in touch with the programmes and supporting the Ambassadors as much as possible. We have recruited Natalie Markall who will be spending 50% of her time supporting the Ambassadors.

We have submitted a bid to South West London CCGs to help them engage with communities across Surrey Downs, Sutton and Merton and we are waiting to hear if this has been successful.

Other

We have successfully completed our move to offices in Guildford Borough Council. Much time has been taken up with problems with our internet connection - we were without a

connection for 6 weeks. However this is now resolved and staff are settled in to the new office and all is going well.

We were able to get our privacy statement and asset register updated in time for GDPR, and agreed data sharing agreements with our partners. We have lockable boxes for all staff and volunteers involved in gathering experiences, as this was identified as a key risk for us, and this is incorporated into engagement training. The asset register helps us to establish additional areas where we now need to focus our attention and we will be working on this in Q2.

We produced our Annual Report to deadline.

We completed our presentation training which we are able to include volunteers and some Citizen Ambassadors in, and are now ready to run this ourselves as necessary.

We have had significant change in our staff team this quarter with three members of staff leaving. Tessa Weaver; Natalie Markall and Kathryn Edwards joined us; we appointed a new apprentice Joe Kite who has just started; we have recruited a new Volunteer Officer who starts on 24th July and we have been using a temp to provide admin support. We have created an additional Engagement Officer post and will start recruitment for this shortly.

Wanda Jay resigned as a Board NED this quarter. We have agreed to go out to recruit 4 or 5 additional volunteer non-executive Directors to our Board and recruitment will take place in August/September.

Finances

Healthwatch Surrey CIC – Budget and Expenditure Q1 as of 30 June 2018

	Full Year	Budget to	Actual to	Variance to	Balance to
Category	Budget	Jun-18	Jun-18	Jun-18	Jun-18
Staffing Costs	£334,065	£83,516	£69,825	£13,691	£264,240
Direct Delivery Costs	£76,500	£19,125	£10,107	£9,018	£66,393
CIC Costs	£41,662	£10,416	£14,009	-£3,594	£27,653
Sign Posting	£46,470	£11,618	£11,619	-£2	£34,851
Health Complaints Advocacy	£97,160	£24,290	£24,291	-£1	£72,869
Finance, HR, IT, Office Support & Telecoms	£32,845	£8,211	£8,211	£0	£24,634
Help Desk	£14,600	£3,650	£3,651	-£1	£10,949
	£643,302	£160,826	£141,713	£19,113	£501,589

Link to mission/vision	KPI no.		Annual target	Quarterly target	Q1	Q2	Q3	Q4	Cumulative total to date
Awareness: Role function and services known and people readily contact us...	7	Reach 1000 E-bulletin Subscribers (20% increase from 800 (Jan 2018)) +50/q	+200	+50	41				41
	8	Reach 3000 Twitter Followers (23% increase from 2432 (Feb 2018)) +142/q	+568	+142	73				73
	9	Reach 750 Facebook followers/likes (62% increase from 461 (Feb 2018)) +72/q	+289	+73	60				60
	10	A 10% increase in unique web visitors per quarter (vs.2017)	+10%	+10%	39%				39%
	12	12.5% increase in calls to helpdesk (480 to 540) +15/q	+60	+15	-71				-71
	13	Distribute 10,000 Healthwatch Surrey leaflets	10,000	2,500	2,510				2,510
	14	12 E-bulletins distributed	12	3	3				3
	15	12 pro-active press releases	12	3	3				3
	16	Present an 'introduction to HWSy' or 'update on our work' to at least 60 people per quarter who a) do not currently feel they know what we do and b) may have a reasonable expectation that they should know.	240	60	100				100
Evidence: Influencing based on sound evidence, insight and knowledge	19	Gather over 3,750 experiences that provide a balanced evidence base (to include more experiences from social care and community services)	3,750	938	1,197				1,197
	20	Deliver 1,036 Useable Experiences via Listening Events as follows: 24 in acute hospitals or urgent care centres; 14 in GP surgeries; 6 in community hospitals; 11 on high streets; 12 in alternative locations	1,036	260	471				471
	21	Our Citizens Advice partners will deliver similar level of Useable Experiences as 2017/18 (1600)	1,600	400	415				415
	22	Our Helpdesk will deliver 550 Useable Experiences	550	138	311				311
	23	Publish reports on 4 projects around our thematic priorities which produce a report, conclusions and recommendations plus a follow-up Impact Report	4	1	1				1
	24	Produce one report based on research into an emerging issue	1	0.25	1				1
Volunteers:	28	Increase number of volunteer hours by 10% on previous year. (Base this year is 1,712. Previous year was 1,000.)	1882	470	424				424
Sustainability: Build a growing and sustainable future	30	Bring in a minimum of £50,000 in new income turnover this year.	50,000	12,500	16,460				16,460
	31	Achieve a contribution to CIC of £10,000.	10,000	2,500	1,840				1,840

