

Outcomes - Q3 (October to December 2016)

We have identified 5 types of "Useable Outcome"

1. Amplifying the Voice Outcomes

Challenges in Board meetings e.g. HWBB. Demonstrating the impact of us bringing the public voice to the table where without our participation in decision making boards they wouldn't be heard

2. Escalation Outcomes

Situation/Change/Impact based on experiences shared and escalated in regular meetings with CCG's, Acute Hospitals, CQC on the back of relationships we have built with them

3. Relationship Outcomes

Comment/feedback/examples from stakeholders demonstrating how the relationship with HWSY benefits them and in turn their service users

4. Project Specific Outcomes

When a project or result of a project results in an impact or change. Also where our project work results in raised profile or awareness of an issue we have been investigating.

5. Empowering People Outcomes

Demonstrating how, through an interaction with Healthwatch Surrey, a member of the public has been empowered with information and advice

1. Amplifying the Voice Outcomes

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- Peter Gordon & Kate Scribbins attended the Q3 Health & Wellbeing Board. After the presentation of the Surrey Adults Safeguarding Board's Annual report, we questioned the very low levels of safeguarding reported in the Asian community and whether any targeted awareness raising was planned. We pointed out that HWSy made the same challenge last year. The Adults Safeguarding Board?? Board want to work with HWSy to find new ways to communicate their message through our contacts.
- At the Health and Wellbeing Board, Peter Gordon raised the issue of "consultation" in Surrey and what value it has in terms of genuine engagement. STPs will rely on consent and support from all involved including public and voluntary sector but this can only be achieved if engagement is open and honest and starts at an early stage before plans are fully formed. This issue is now on the HWBB agenda for 2017.
- Along with our HW colleagues in the South East region we met with the CEO of SECAMB and challenged him to engage with local HW to ensure patients were fully included and informed about the recovery plan. Local HW made a range of offers to assist SECAMB in its recovery. HW have now been offered a place on the Strategic Oversight Board, HW W Sussex will lead on this.

- Kate Scribbins attended the Children and Young People's Partnership Board, where she welcomed the review of engagement around young people and made a challenge around the purpose of engagement.
- During the September meeting of the Wellbeing Health & Scrutiny Board we made a challenge related to changes in Stroke Service.

"Will there be people in particular places in the county at risk of worse outcomes under these proposals?"

The WHSB subsequently made two recommendations:

1. That an update provided to the Board following the final decision by the committee in common on 6 October 2016
2. That this update demonstrates how consultation activity will engage with identified high risk groups, and those families and patients involved with ongoing care following a stroke.

- During this Wellbeing Health & Scrutiny meeting we also made a challenge to re-procurement of Community Health services. We asked:

"Can you provide an example of how the participation of local people has influenced your decision making on this service?"

Subsequently the WHSB made a recommendation:

That Guildford and Waverley CCG provide further details as to the engagement activities with patients and families undertaken through the procurement process, how this influenced the procurement process, and how this will help inform co-production over the next 12 months.

- We challenged the Surrey Downs Participatory Action Network. HWSy asked the Chair how members of the Network, who were being selected for particular attributes and with specific networks, would be rewarded for participation. We challenged the certainty of the notion that "a sense of civic joy" would secure long term ongoing participation. The CCG is now considering whether members should be rewarded in other ways.
- At the November Wellbeing Health and Scrutiny Board where each of the STP's were presented by senior leaders HWSy asked:

"How are you working in partnership with local communities to develop the plans?"

and, specifically of the Surrey Heartlands STP:

*"How has the recent stakeholder reference group influenced your plans?" and;
"How will you ensure the specific needs of people - for example those with physical disabilities - are not overlooked when using the quantitative research that is being undertaken?"*

Subsequently the Board made the following recommendation for the Frimley STP:
That the STP seek to engage more widely with patient and carer participation forums, and provide a further briefing of how this activity has influenced the development and delivery of the plans.

- We challenged the Quality Surveillance Group to review the nature of local Healthwatch involvement in the Board. We asked that a specific discussion be had between the Chair and local Healthwatch to clarify our role; we also identified that we have important evidence about local services that is being shared with CCGs but is not making its way into this committee given that it is looking at high level trends, themes and 'identifying concerns'.
- Kate met with CEO and Head of Communications at Epsom Hospital to discuss how HWSy can share what we've heard most effectively with the hospital. We obtained agreement to new ways of sharing and commitment by them to feedback on actions/follow up.
- We challenged Guildford & Waverley CCG on interim stroke plans, querying a lack of communication and public involvement in interim plans to change pathways for stroke patients. Guildford & Waverley acknowledged that communication should have been better and want to work with HWSy to ensure this is improved going forward.

2. Escalation Outcomes

Situation/Change/Impact based on experiences shared and escalated in regular meetings with CCG's, Acute Hospitals, CQC on the back of relationships we have built with them

- HWSy alerted Multi Agency Safeguarding Hub (MASH) regarding a disclosure about Tilgate Ward- East Surrey Hospital in 2015. This was then escalated to the CQC and it has now been fed back to the relationship owner at East Surrey Hospital who have logged it for "future reference in case a theme is developing".
- HWSy alerted Multi Agency Safeguarding Hub (MASH) about a concern someone had shared regarding their friend staying in Glebe House Nursing Home in Caterham. The MASH team sent someone to visit the vulnerable person and concluded that she is safe and all is well.
- During a 'What we've heard' meeting with Ashford & St Peters Hospital we shared 12 experience including:
 - An experience about a person's poor experience of lack of information or signposting following a Dementia diagnosis is being shared with the Dementia Lead.
 - ASPH to investigate whether there are any other patients reports about issues with Diagnostic Services following reports of someone not having access to MRI scan at Cobham Hospital.
 - A report about issues with the wheelchairs at Ashford Hospital is something the hospital has also had negative feedback about and 10 new wheelchairs have been ordered.

- At the December 'What we've heard' meeting with Surrey Downs the CCG committed to putting a news item in their next GP newsletter to alert GPs to a case we heard about a lady that did not receive a flu jab reminder this year. This was due to the fact surgery had moved completely over to a SMS based system and she did not have a mobile number.
- During the Surrey Downs quarterly meeting we also shared 12 experience with the CCG. Due to the evidence we shared the CCG will be undertaking a quality visit as a result of two experiences shared about the Alexandra Ward at Epsom Hospital.
- During a visit to a local Care Home as part of a programme of 25 visits, our Authorised Representatives identified safeguarding concerns which were subsequently raised with the Multi Agency Safeguarding Hub and the CQC. The CQC subsequently undertook a visit two days later, substantiating our concerns and taking enforcement action.
- We escalated an experience relating to the quality of care received in Alexandra Ward at Epsom Hospital to the CQC. They followed up with the Trust and we received a detailed reply from the Nurse in Charge as well as reassurance that this would be shared with the ward manager and staff.

“The feedback from the contents of the received email from our CQC colleagues have been shared with the ward manager in regards to the concerns raised about one of the patients in her care to enable her to share this with her staff and ensure that patients and their relatives remain fully informed in regards to their care and that other visitors to the ward can observe that patients are being well cared for.”

- We shared an experience relating to medical records not being available for appointments at Frimley Park Hospital due to the records now being kept offsite. We received a detailed reply from the Head of Patient Experience explaining the rationale for moving the records offsite as well as the reasons why some records are not available. We were given reassurance that they were aware of the issue and that medical records team were working to resolve issues. Measures are showing improvements and indicating that this is becoming less of an issue.

3. Relationship Outcomes

Comment/feedback/examples from stakeholders demonstrating how the relationship with HWSY benefits them and in turn their service users

- HWSy was approached by North West Surrey CCG with regards to participation in the co-design process/commissioning of the new NHS111 service for Surrey. The CCG are still very much in the early stages and would like to ensure the patient voice is centre stage. To begin this involvement, HWSy produced a report on our current evidence relating to 111.
- Deloitte have been commissioned by Ashford and St Peter's Hospitals NHS Foundation Trust to administer a Well Led Governance review. As part of the process they are

seeking views from fellow Board members, staff, service users and Governors. Kate Scribbins participated in feeding into this external stakeholder review.

- North East Hants & Farnham CCG invited HWSy to participate in their task and finish group meeting to look at two things: Metrics for engagement and the PPE Committee and engagement work stream going forward
- In this quarter HWSy received agreement from Jo Young, Director of Quality, Surrey and Borders Partnership to have regular 'what we've heard' meetings with her going forward.
- Feedback from the Programme Manager on the regular "what we've heard" meetings with Social Care Quality leads from Surrey County Council and all the CCGs: *"the county wide reporting from Healthwatch Surrey to the Surrey QA Group has established and is working well. The information presented stimulates a good level of conversation, raises questions and members of the group are taking ownership for the issues discussed, taking away actions as appropriate"*
- We were asked to give feedback on the Guildford and Waverley CCG NHS RightCare Leaflet we responded with comments, inputting into the making of the leaflet.
- During this quarter HWSy was invited, by Thirza Sawtell, to take part in Epsom Health and Care Stakeholder Workshop. Kate and Matt were given a "walk through" of the new integration initiative Epsom @home which is designed to bring all professionals involved in care of a frail over 65 yr olds together. Including social services to enable people to stay out of hospital or be discharged more quickly. HWSy were first people to have this walk-through. Agreement to conduct a joint project to talk to people to evaluate the service was obtained.

4. Project Specific Outcomes

When a project or result of a project results in an impact or change. In addition, where our project work results in raised profile or awareness of an issue we have been investigating.

- HWSY attended East Surrey Care Home Managers Forum with the Quality Assurance team at Surrey County Council to promote Healthwatch and the Quality Assurance support offer for providers. It was a positive meeting and there were a number of great questions particularly about Enter & View and the current project. The manager of Southlands Care Home who had a recent Enter & View inspection feedback that the process was very easy and positive. The group have invited us back to share the results of the report in 2017.
- As a result of the PPG project we were contacted by Thorhill Surgery PPG and asked to attend to discuss how we could work together. We shared the PPG Fact Finder Analysis initial results and a number of ways HWSy can help their PPG.

We received positive feedback from the Chair of the PPG, *"We were impressed by the activities that Healthwatch is involved with and by your personal enthusiasm. It's good to know also that we can call on your expertise."*

5. Empowering People Outcomes

Demonstrating how, through an interaction with Healthwatch Surrey, a member of the public has been empowered with information and advice

- As part of the Quality Assurance work streams 2800 Praise, Problem or Suggestion leaflets will be distributed through locality teams, new service user information packs and a number of other channels in order to promote feedback to Healthwatch.
- The Surrey & Borders Partnership website encourages members of the public to call the switchboard in order to contact Safe Havens, but the Safe Havens do not have a telephone number for people to be referred on to. HWSy suggested that the website has a small note under the telephone number to remind people that they will need to visit Safe Haven in person if they would like to speak to someone as the switchboard cannot put calls through. This way we can make sure that the public have a smooth pathway through to Safe Haven, SABP have made adjustments to the website to accommodate these recommendations.
- HWSy empowered a local consultant to raise an issue with the Wellbeing & Health Scrutiny Board. The consultant had concerns about re-commissioning of Sexual Health services. We put her in touch with the WHSB and asked her to explore how we could encourage patients to contact us with any concerns.
- A lady contacted us having heard about the Community Cash Fund Aphasia project on the BBC Surrey as part of the 'Let's Celebrate' coverage. She has a friend who has recently had a stroke and now has a communication disability. She believes she would benefit from the being involved in something similar. We gave her contact details for Dyscover.
- Some examples of where we have empowered the public with information and advice are as follows;

Healthwatch Helpdesk - Case Study

A caller contacted the Helpdesk to get advice. Her children had previously been placed with their biological father due to her poor Mental Health. Since then the caller had sought the help of local services to rebuild her life and had got a job. She now wanted to get her children back into her care, but social services felt this would obstruct her recovery. She also felt she had been wrongly treated by a social worker in Adult Social Services. She wanted advice on what help was available. The caller was signposted to local specialist services that could help her. She has since called back and confirmed that as a result of the help she was given by the local services she has now sought legal representation and is also considering making a complaint against Adult Social Services.

Citizens Advice Case Study - Waverley

Client attended the Citizens Advice with concerns about the welfare of a neighbour. They felt the neighbour was showing signs of dementia as well as being very isolated and not eating properly. With no family that visit the neighbour the client was helping out but becoming stressed with the responsibility, the neighbour was refusing offers of outside help. CAB completed an anonymous referral to social services. The client called back to thank for the help and confirm that social services had been and made enquiries and the neighbour was now 'in the system' and social services are involved, which is great weight off his mind.

Citizens Advice Case Study - Woking

Client contacted the CAB as they felt their son was neglected by a doctor. Five weeks ago his son was ill and was seen by a GP in Woking. She told him to gargle with salt water. There was no improvement and 2 days later his son saw a different doctor and was admitted to hospital with septic pneumonia. His son who is self-employed has now missed a couple of weeks work as he was so ill. The client wanted advice on how to make a complaint against the Doctor and he was given the information needed in order to start that process.

Independent Health Complaints Advocacy IHCA - Case Study

Client is a mother living in Surrey who has a daughter that is a drug addict, with mental health problems living in Bradford. The client contacted IHCA to get help with making a complaint against Bradford Hospital following poor treatment her daughter received in their care. She had not received adequate responses to her queries raised directly with the hospital. The client was supported by an NHS advocate to communicate with Bradford Hospital. A local resolution meeting was held during which the Advocate put forward the clients views and questions. As the information provided in this meeting was not felt to be satisfactory by the client she has being supported in contacting the Health & Parliamentary Health Ombudsman and a report has now being submitted. The family now feel that they have been listened to and that their concerns have been voiced. They are currently waiting a response from the Ombudsman.