To: Board
From: Kate Scribbins
Date: 17th April 2018

Healthwatch Surrey work plan 2018/9

Purpose: To finalise our plans to deliver on Healthwatch Surrey’s mission and vision for 2018/9.

The Board is asked to this final version of our work plan for 2018/19.

This work-plan has been driven by our vision statements:

1. Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.

   We will:

   • Continue to prioritise constructive relationships with commissioners, feed back what we’ve heard on a regular basis and seek outcomes.
   • Have effective escalation routes for sharing cases of concern with service providers.
   • Continue to build the way we collect and handle experiences from the public, and share this in an influential way that leads to changes.

2. Healthwatch Surrey’s role, function and services are known, understood and valued by consumers and therefore they readily contact us.

   We will:

   • Have an increased emphasis on awareness-raising across all our core functions.
   • Continue to seek varied and accessible outputs for our work so that we maximise reach, awareness and understanding.
   • Ensure we collect feedback on our Helpdesk and via Independent Health Complaints Advocacy to enable us to better assess value.

3. Our influencing is based on sound evidence, knowledge and insight.

   We will:
• Develop and implement a plan to engage with people in a way that maximises use of our limited resources and ensures equal opportunity to have voices heard.
• Increase the number of experiences we gather, and ensure we have a range of ways that people can share their experiences with us, including through our partner organisations and through the Community Cash Fund.
• Set clear priorities for our thematic work based on transparent criteria.
• Build our volunteer base to help with our work.
• Capture, store and analyse our evidence in a safe, efficient and effective manner.
• Ensure that our evidence is used in an influential manner.

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

• We will secure additional sources of income by offering services that are complementary to those of our main Healthwatch contract.

The following statements and associated KPIs demonstrate how we plan to deliver on these vision statements in 2018/19.
Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey

To do this we need to

✓ Build good relationships
✓ Feed our evidence back effectively to the system and seek outcomes
✓ Demonstrate our effectiveness

1. We will:

Commissioners:

- Continue with regular quarterly opportunities to share What We’ve Heard meetings with commissioners.
- Ensure we give sufficient priority to children’s social care commissioners.

CQC: Continue regular quarterly meetings with CQC.

QSG: Continue regular attendance

Joint Committee and Quality committee of Surrey Heartlands STPs - seek invitation and regular attendance

Adults and Health Select Committee: continue to prioritise attendance and input

Children and Education Committee: ensure we have the access we need to contribute our evidence where we need to do so

Providers:

Continue to ensure we have effective routes in for escalation of concerns and seeking outcomes from providers.

Escalations:

- Continue the work of the Escalations Panel which will meet monthly to guide our approach to issues of concern.
- Pilot local Escalations Panel in Surrey Heath.
- Ensure all escalations procedures are in place and that we have relationships with providers that we need to achieve outcomes.

Influence

- Continue to review our approach to What We’ve Heard meetings every 6 months to ensure we remain effective and build on learnings.
- Continue to review key influencing relationships on a quarterly basis and agree individual strategies needed to achieve agreed goals.
- Ensure we adapt as STPs develop so that we are in the right places and take the opportunities as the system changes to maximise our influence.
• Once findings from Reflective Review are available, incorporate these into influencing strategy where necessary.
• Implement next steps from our review of key boards, committees and meetings to ensure we have the right people in the right place at the right time (to include volunteers).
• Continue to work cooperatively with other local Healthwatch and to build more relationships. Particular emphasis to ensure we have the relationships in place to have a joined-up approach to Frimley.
• Ensure we make full use of the media to become more vocal/critical when required to increase our influence/credibility to ensure we are as effective as possible whilst maintaining good relationships.
• Extend our influencing reach by having the recruitment and support mechanisms in place to support volunteers’ participation in decision-making meetings.
• Develop a new process for making specific, actionable and proportionate recommendations based on our evidence, in order to maximise our influence.
• Make a contribution based on our evidence to all quarterly HWB meetings.
• Give a presentation on a thematic priority area to a key decision-making forum each quarter.
• Review all boards and committees that we are as per our “Participation in system forums” approach which was approved by the December 2017 HWSy Board.
• Ensure attendance at 75% of Heartlands and Frimley STP engagement meetings (using staff or volunteers) and keep in touch with SES via partner HW’s.

Attend all HWS regional meetings (quarterly) and continue to build links with Frimley and SW London HW.

Carry out a peer review within this financial year.

How will we know that we are doing a good job? We will (KPIs):

i. Receive an increase in positive feedback through reflective review to key questions based on same mail-out as this year.
ii. Receive and capture positive feedback from all CCG and social care commissioners with whom we hold WWH meetings around the quality and value of HWSy’s work.
iii. Have evidence to share at all CQC meetings and demonstrate perceptions of value and outcomes.
iv. Maintain effective escalation routes to all providers for cases raised by Escalations Panel and demonstrate outcomes.
v. Continue to capture outcomes across our work, report on these quarterly.
vi. Demonstrate via our influencer mapping that we have clear goals and ownership and monitor all key stakeholder relationships.
Healthwatch Surrey’s role, function and services are known, understood and valued by consumers and therefore they readily contact us.

To do this we need to:

✓ Improve awareness amongst general public and ensure that it is easy to contact us
✓ Improve awareness amongst stakeholders in a targeted manner

2. We will:
Continue our campaign-led communications - we will continue this approach for 2018/19 with a further review in Dec 2018, as endorsed by the Board in December 2017.

Build and develop our awareness raising initiatives, using our volunteer groups and establish a task force to help us achieve our goals within the local community.

In addition to our general Surrey wide and ‘point of entry’ GP surgery awareness building, we will also focus on District & Boroughs and VCFS groups. This targets those identified in the reflective review as having lower awareness of Healthwatch Surrey, in particular our information and advice offering.

Conduct a review of awareness of health complaints advocacy and Helpdesk and implement specific steps to boost take-up.

Following our successful campaign with Eagle radio we will continue to look for new ways of working with local advertising channels to promote our message to a wide audience.

Explore new and innovative ways of communicating our messages such as animations, blogs, new media channels.

Ensure our outcomes and sound bites are effectively communicated and integrated into all our communication initiatives, to highlight the impact we make.

Ensure consistent look and feel across all HWSy output and ensure our output is accessible.

Achieve increased HWSy literature distribution through the awareness raising strategy.

Work with VCFS partners to review the accessibility of our communications.

Evaluate and adapt our social media strategy based on the metrics we have now got from our first paid campaigns to ensure maximum reach and efficiency.

Craft content to communicate our different messages in a way that is relevant to our different target audiences.

Build on our increased media coverage in 2017 to develop close relationships with the channels and look at proactive partnership working with those identified as high interest/impact media partners.
Develop the content on the new website and monitor the metrics closely to ensure we optimise the user journey when visiting the site.

Continue to publish our outcomes on a quarterly basis, continue to review whether this is as impactful as possible and find ways to ensure it reaches a wider audience.

Ensure we capture and track user experience of our services including engagement, Helpdesk, IHCA.

Carry out an evaluation every 6 months to examine consistency and accessibility of our reporting and how we can get maximum distribution and impact.

How will we know that we are doing a good job? We will (KPIs):

i. Reach 1000 E-bulletin Subscribers (20% increase from 800 (Jan 2018))
ii. Reach 3000 Twitter Followers (23% increase from 2432 (Feb 2018))
iii. Reach 750 Facebook followers/likes (62% increase from 461 (Feb 2018))
iv. A 10% increase in average unique web visitors per quarter (Average: 2639 to 2903)
v. Establish a baseline for the number of people contacting NHS Advocacy service each quarter (beyond referrals).
vi. 12.5% increase in calls to helpdesk (480 to 540)
vii. Distribute 10,000 Healthwatch Surrey leaflets
viii. 12 E-bulletins distributed
ix. 12 pro-active press releases
x. 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.
xii. See an improvement in awareness amongst stakeholders (specifically District and Boroughs and VCFS) of those saying they know a lot or a fair amount about our work as measured by annual reflective review. In the first reflective review (reported March 2017) awareness of our services overall (know a fair amount and know a lot combined) was 27% for VCFS respondents and 16% for District and Borough respondents. In Q1 we will receive the results for the second reflective review for similar questions, and will then set a KPI for the year ahead.

xii. See an improvement in awareness specifically of our health complaints advocacy (IHCA) and Helpdesk services. In the first reflective review, 54% of all respondents knew about our IHCA service, and 24% of all respondents knew a lot or a fair amount about our information and advice services. In Q1 we will receive the results for the second reflective review for similar questions, and will then set a KPI for the year ahead.
Our influencing is based on sound evidence, knowledge and insight. To do this we need to:

✓ Set clear priorities and stick to them
✓ Have an engagement strategy to guide our work
✓ Ensure our evidence is stored safely and we are able to analyse and report on it to good effect

3. We will:
Implement a new Evidence Gathering strategy which addresses the recommendations set out in our most recent review of this activity
Maintain a balanced evidence base in order to contribute to a fair and transparent way of responding to emerging issues and setting priorities

- Hold staff-led outreach workshops with four seldom heard or disadvantaged groups that we have not been in contact within in the preceding 12 months
- Hold volunteer-led community outreach workshops to raise awareness amongst those who are seldom heard/disadvantaged

Collaborate with our local volunteer teams to innovate our Evidence Gathering in ways that inspires more volunteer activity in this area
Better utilise our communications channels - particularly in the VCFS sector - to generate more evidence
Engage with people in a variety of locations which will lead to us hearing about all ‘service types’1 during the year
Take more opportunities to align our evidence gathering with the needs of the health and social care system
Be more responsive to emerging issues and set aside resources to work on these issues, including re-active Listening Events, re-active Enter & View visits and a re-active project
Introduce a little more flexibility in planning of Listening Events i.e. by visiting 12 ‘alternative locations’ that are not GPs, Acute Hospitals, Community Hospitals or high street locations
Undertake activity in order to close the gaps in our evidence base around ‘social care’ and ‘community services’
Maintain and continually improve our partnership with Citizen Advice branches
Undertake a desktop research project which documents the barriers and preferred engagement methods of people with protected characteristics and those from seldom heard groups

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1 As defined by CQC
Continue our work on our thematic priorities according to our thematic priority process and plans.

Undertake another project on an issue that emerges during the year

Review our Data Protection Policy and where appropriate implement new plans to take account of the new GDPR legislation

Conduct a consultation in Q3/Q4 with the public and our volunteer teams around our priorities in order to feed into review of thematic priorities.

Produce simple guidance aimed at system partners on best practice in engagement with people with protected characteristics and seldom heard groups

Produce other outputs as appropriate based on what we are hearing from local people

Hold reactive engagement events or Enter and View visits at service delivery points when appropriate and as determined by Escalations Panel.

Have evidence from IHCA cases in our evidence-base and take themes and trends from Advocacy to WWH meetings

Have new Information Governance policies in place and appropriate data protection assurance in line with GDPR requirements by May 2018.

How will we know that we are doing a good job? We will (KPIs):

i. Gather over 3,750 experiences that provide a balanced evidence base (to include more experiences from social care and community services)

ii. 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

iii. Our Citizens Advice partners will deliver similar level of Useable Experiences as 2017/18 (1600)

iv. Our Helpdesk will deliver 550 Useable Experiences

v. Publish reports on 4 projects around our thematic priorities which produce a report, conclusions and recommendations plus a follow-up Impact Report

vi. Produce one report based on research into an emerging issue
**Building our use of volunteers**

*To do this we need to*

- **Have a clear strategy and implement it**

**We will:**

Continue to implement our volunteer strategy which is designed to increase Healthwatch Surrey’s capacity to fulfil its remit and deliver more for the people of Surrey via the use of volunteers.

Nurture and learn from Surrey Heath local team.

Establish terms of reference, clear aims and targets with input from volunteer teams.

In support of the local teams, develop a recruitment and communications strategy to build the volunteer teams.

Develop mechanisms to ensure effective two-way communications between volunteer teams and HWSy staff team; and for teams to communicate and network with each other.

Conduct a thorough evaluation of effectiveness at end of Q2.

Ensure volunteers have been assigned ownership of relationships with key influencers in local areas and feel confident in their roles.

Continue to develop recognition and rewards programme and link to Volunteer Week.

Develop skills audit and monitoring.

Conduct annual appraisals with volunteers.

Carry out annual survey of satisfaction amongst volunteers.

Establish baseline retention rate for volunteers in order to set target for next year.

Investigate feasibility of requirements of “Investors in Volunteers” accreditation.

**How will we know that we are doing a good job? We will (KPIs):**

i. Surrey Heath team will continue to perform, sets targets and we support them to meet those targets.

ii. Get Guildford and Waverley team up and running fully by end Q1.

iii. Establish two more local teams by end Q2.

iv. Increase number of volunteer hours by 10% on previous year.

v. Receive high levels of satisfaction via a new annual survey.
As a social enterprise we have secured a growing and sustainable future.

To do this we need to:

✓ Develop a strategy
✓ Build our ability to pitch and tender for work
✓ Ensure we have the key relationships in place

4. We will:
Continue to deliver excellent service on core contract and maintain excellent relationships with commissioners

Ensure we have plans in place and are in an excellent position to re-tender for the Healthwatch contract

Have a steering group in place by end Q1 to start planning for re-procurement by SCC.

Review new business strategy with new business sub-group in April 2018 and product paper for Board at end Q2.

New business opportunities to be discussed as a standing item in staff team monthly meetings.

Continue to deliver on the New Business Strategy

Have a clear pitch for our offer, and staff team and board will be familiar with this and will be encouraged to take all opportunities to open discussions with potential clients.

Ensure project budgets are maintained to enable us to cost and track work accurately

Seek to win an award at the HWE annual awards; and an award for volunteering.

How will we know that we are doing a good job? We will (KPIs):

i. Bring in a minimum of £50,000 in new income turnover this year.
ii. Achieve a contribution to CIC of £10,000.

5. Other
Ensure we have appropriate accommodation for our team.

We will ensure we have staff appraisal, development and training plans in place across the staff team and for our volunteers.

We will continue to review an update all policies.

We will review HWSy Board development and seek to recruit more NEDs.