

Outcomes - Q4 (Jan - March 2017)

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

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

- In February, we joined the Surrey Safeguarding Adults Board and provided challenge at our first meeting to its most recent Serious Case Review, specifically its work to understand the views and perspectives of the relatives involved and, related to this, the broad nature of its recommendations around provision of information & advice services.
- We challenged Surrey County Council plans to discontinue the Home-Based Care survey (not required in national statutory returns) at a 1-1 meeting with the service commissioner and at a meeting with the Director of Adult Social Care, offering to support the activity if required, leading to the survey being reinstated.
- In February we challenged mental health commissioners at the Independent Mental Health Network 'Get together' to confirm the future funding of Safe Haven Cafes and reported the anxiety being felt by some users of the service.
- HWSy met with G&W CCG to contribute ideas for effective engagement and consultation around changes to stroke pathway. We provided challenge around the fact genuine consultation should highlight which areas in plans are open to change and which are fixed. G&W requested ideas about wording of questions and which groups to engage with.

- On the 13th January, Matthew Parris, a member of the staff team was interviewed on BBC Surrey Drive Time about the Patient Leaders programme.
- On the 21st January Matt was on BBC Surrey discussing the impact of the rating, advice to patients relating to the St John's Family Practice, Woking CQC report. We were informing patients of the option to select alternative practices with good ratings.
- In February Kate was interviewed live on the Danny Pike show - talking about Sustainability Transformation Plan and the impact for Surrey.
- At the Health and Wellbeing Board HWB we had an agenda item which was designed to stimulate debate about genuine consultation and engagement and whether we could improve this within Surrey. This led to a further agenda item around the role of the voluntary, community and faith sector in the HWB which is ongoing but is a very important debate about the important contribution this sector makes to health and wellbeing.
- We challenged Guildford & Waverley CCG at the Wellbeing & Health Scrutiny Board on the Stroke Services Reconfiguration agenda item to clarify:
 - whether there are instances when the 2 hour threshold for getting patients to a Hyper Acuity Stroke Unit are exceeded for people experiencing stroke
 - whether performance against this target is improving or getting worse
 - what the performance against this target is like specifically in West Surrey, an area most likely to be concerned about the change.

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

- In January we escalated two concerning experiences related to Royal Surrey County Hospital to the Surrey & Sussex Quality Surveillance Group, adding context to discussions about the provider, leading to a Board to Board workshop (CCG and RSCH) to discuss improvement plans, completion of a Quality Risk Profiling tool with NHS England and additional Quality Visits by the commissioner to the service.
- Jackie Pond met with Julie Sunkwa - Mills - Medicine Manager at East Surrey to raise an experience shared by an NHS professional working at East Surrey Hospital concerning:
 1. Inadequate notes accompanying patients being moved from A&E to ward meaning it took longer to care for the patient as time was spent chasing up records on the patient's admittance from A&E.
 2. Agency staff on the ward not responding to the patient call bell.
 Julie said she would feedback these points to the Head of Nursing and help get progress the meeting with the Executive team and Healthwatch Surrey.
- Surrey Heath CCG provided an assurance that there was not a known systemic issue with missing records at outpatient appointments at Frimley Park Hospital.

- Surrey Heath CCG provided an assurance that they were aware of the issues with the stroke rehabilitation pathway and an on-going improvement programme would address the concerns we raised.
- Surrey Downs CCG committed to exploring with Epsom Hospital what could be learnt from the experience we shared about water being thrown over a child experiencing a fit.

3. Relationship Outcomes

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

- In February we secured a membership place for a HWSy Patient Leader on the Safe Discharge and Transfers of Care work stream, hosted by the Academic Health Science Network and Surrey Downs CCG (on behalf of the Surrey Heartlands Academy), seeking to improve the experience of leaving hospital.
- We received the following feedback from the CQC "I think the relationship between Healthwatch and CQC is something to celebrate and I am sure we will continue to use the important information from your feedback to help us ensure that people get the good care they deserve" -CQC Adult Social Care Inspection Manager.
- Following a WWH meeting with East Surrey CCG, Dr Elango Vijaykumer has invited HWS to speak at the Surrey Collaborative Accountable Officers meeting when he takes over as Chair in April 2017.
- A huge thank you in particular to Jacquie, Jade and Sam for their efforts in securing and helping report such high quality insight into the experiences of local people. Helen Collins the Associate Director for Quality & Improvement remarked at the Guildford and Waverley 'What we've heard meeting':
"The experiences that Healthwatch Surrey share with us remind us why we're all here... they sensitise us to the experiences people are having day-to-day".
- We were invited to join the Glenlyn Medical practice councillors meeting in February.
- We met with Surrey & Borders Partnership in February and gained agreement to a regular meeting to feed back what we've heard. 4 cases of particular concern were discussed and we will be working closely with SABP to ensure we record and analyse feedback on their services in the most meaningful way.
- Invited to attend the NWSy Quality Monitoring Group by NWSy CCG so that we can feed our cases of particular concern direct into the most relevant forum. We will attend this group from April to assess resource implications.
- We attended Surrey Heartlands STP Leadership Event.
- Sally Brittain from Frimley NHS trust at the patient experience conference named Matthew Parris as a successful Healthwatch partner.

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.

- In January we attended a Quality Account workshop at Epsom & St Helier University Hospitals NHS Trust and put forward arguments for Hospital Discharge to be a more prominent priority in the Trust's plans for 17/18, leading to changes where hospital discharge did become a more prominent priority.
- HWSy presented the early findings from research into GP access to the Health & Wellbeing Board in February. This stimulated lively discussion and an initiation to HWSy to join the Surrey Heartlands Primary Care Steering Group so that we can feed the patient voice directly into a decision-making forum.
- Also in February we presented the findings of 'My Way, Every Day' to a committee of health and social care commissioners responsible for overseeing the quality of Care Home services (Adult Social Care Quality Group, hosted by SCC) who committed to responding formally as part of our Impact Report.
- Following the publishing of the Care Home Report we have appeared on both Eagle Radio and Surrey Hills Radio to discuss the findings.
- The Safe Haven summary report is featured on a 2-page spread in Surrey Independent Living Council's spring newsletter which is distributed to 700 people in Surrey plus 400 places.
- We challenged Surrey & Borders Partnership NHS Foundation Trust to clarify what they know about the future status of Safe Haven Cafes, particularly in Epsom and Redhill, and the approach to communications around on-going funding which have resulted in some users experiencing additional anxiety.
- Challenged the Adult Social Care Quality Assurance Group to include in its final recommendation to the Surrey County Council Cabinet that more still needs to be done by the system to gather soft intelligence about local services and that a decision still needs to be made about who should host systems and infrastructure to assure quality of social care i.e. Surrey County Council or local health commissioners as part of Jointed Integrated Commissioning Groups.

5. Empowering People Outcomes

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

- Family Voice Operations Manager contacted us to ask if our HWS advocacy service extends to Education, Health and Care Plan and requested her IT team to put Healthwatch Surrey information on the Family Voice website they also asked if we can do more to publicise the health complaints advocacy service.

Independent Complaints Health Advocacy Surrey - Case Study

A gentleman contacted Advocacy as he had lost his long term partner to a liver condition. She had been an alcoholic for many years and as a result had suffered from a number of health complaints. In a one-week period leading up to her death, she attended A+E three times, her physical state went ignored and her death came as a result of a large internal bleed. This was very difficult for him to cope with and he felt that he needed answers as to why she wasn't treated for her internal complaints and if she had received the treatment she needed, would she have survived. He had been in communication with the hospital a number of times previously but contacted Advocacy as he wanted assistance in arranging a local resolution meeting and support with this.

Advocacy worked with the gentleman to form an agenda for a local resolution meeting and worked closely with the hospital in the arrangement of this. Advocacy then accompanied the gentleman to a meeting with a number of consultants involved, as well as a member of the PALS department.

The hospital was very forthcoming and empathetic with the information they provided at the meeting and were able to provide the client with the answers he was desperately seeking. They explained the rationale around the treatment they gave.

As a result of this meeting, the gentleman was extremely happy with the answers he and now feels that he is now able to let go of his grievances and finally begin to grieve for his partner. He was extremely grateful for the support and told the Advocate on a number of occasions that he did not believe he would have been successful without their support.

Camberley Citizens Advice – Case Study

A lady contacted Citizens Advice regarding her son who has been diagnosed with Bi-polar disease. He is currently in the Abraham Cowley Unit at St Peter's Hospital in Chertsey.

He was initially sectioned for six months but he called yesterday to say that this had changed and he could be discharged soon. The lady contact CA as she was very concerned about where he will go upon discharge from Abraham Cowley as living with a relative is not an option.

The lady was not clear whether he has been referred to a Community Mental Health team and whether he has been assigned a Care Co-ordinator. She was given information by Citizens Advice from the Surrey Mental Health and Housing Protocol which indicates that the hospital and the Care Co-ordinator can contact Surrey Heath Housing about accommodation for her son while he is still in the hospital, if living with a relative is not an option.

The lady is now empowered with the information relating to the Surrey Mental Health and Housing Protocol to go and find the name of her sons Care co-ordinator and take further steps to try and ensure he has somewhere to go when discharged from Abraham Cowley Unit.

Helpdesk – Case study

A lady called the helpdesk regarding her young son having been diagnosed with ADHD, after a very long wait for the necessary referral and was also being tested for ASD. Until he was diagnosed with ASD, the ADHD medication could not be prescribed.

The family were awaiting a referral to CAMHS. The son had struggled at school, which lead to him being taught alone by a TA and taking breaks and lunch separately. He was finding it hard to cope with going to school and was awaiting a speech and language referral, EHCP, and funding for the school. His family had found that calls and emails to relevant services were not responded to. The services seemed to be blaming each other leaving the family are very distressed.

The Healthwatch Helpdesk advised on the complaints procedure and gave information about the advocacy service empowering her with the information needed to take her case further.