Thank you from our Chair and Chief Executive

Healthwatch Surrey’s success in championing the views of local people relies upon building trust and respect with all individuals, groups and partners with whom we interact to collect and share information. As we have extended our activities in the past year, we are particularly pleased with the progress made in our relationships with health and social care system partners. Both the breadth and depth of our involvement has increased and this has led to more issues being raised and positively addressed.

More broadly across the system, joint decision-making and working is driving integration of services and accelerating change. This needs to go hand in hand with greater local accountability, and progressively more and different engagement and involvement of local people. This is essential if services are to be fully fit for those who use them.

We have seen encouraging moves away from tokenistic, ‘tick-box’ engagement exercises, and Healthwatch Surrey has been active during the past year in highlighting both good and bad practices. This we will continue to do; challenging poor practice as a ‘critical friend’ and being an enabler and partner to help achieve better engagement wherever that is necessary.

‘Hearing more and sharing more’ is another key contribution that Healthwatch Surrey can make as part of the drive for improved health and wellbeing for the county’s people and communities. To pursue this, we are rolling-out area groups as the next stage of our development, following the successful trial of the area group of volunteers approach in Surrey Heath. The next area group being established is in Guildford and Waverley and others will quickly follow to achieve full coverage of Surrey. Area groups deliver two main benefits: they take us deeper into local communities so we hear more, especially from the ‘seldom asked’, and they let us reach deeper into system decision-making structures, enabling us to share more. Area groups will therefore provide more quality feedback, leading to more things being progressed, with many able to be dealt with quickly at the local level.

A great deal has been achieved over the past year, as you will see as you read on. These achievements, together with the learning gained as we have progressed, provide great foundations for our future development and contributions. So we recognise and are grateful to all those who have made this possible. We thank everyone who has shared an experience with us, giving us the independent insight we depend on to do our job.

We also thank our partners in the NHS and social care who have welcomed our presence and valued our feedback.

Finally, a huge thank you goes to all our volunteers, without whom none of what follows in this report would have been possible.

Peter Gordon, Chair
Kate Scribbins, Chief Executive
What we do

We are an independent organisation that gives people a voice to improve and shape services and help them get the best out of health and social care services. We engage with and listen to what people from all parts of the community say so that we can offer reliable evidence that can be trusted. That way, we will have the credibility to speak with a voice that is heard and taken seriously by decision makers.

Getting out and about and hearing from the people of Surrey

Our community engagement work enables people to share their views and concerns about local health and social care services. This can include using our ‘Enter and View’ powers to visit health and social care services across Surrey.

Influencing change and improvements

We provide evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans. This includes reports and recommendations to influence the way services are designed and delivered.

We can also report concerns about the quality of care to the Care Quality Commission so they can take action.

Information, signposting and advice

We provide, or signpost to, information about local services and how to access them through our telephone Helpdesk (0303 303 0023), local Citizens Advice, website and social media.

Independent health complaints advocacy

In partnership with Surrey Independent Living Council (SILC), we are able to provide free, independent support and assistance to people who might need support to make a complaint about an NHS service. We work to ensure people can represent their own interests as far as possible and not to offer advice on how we think an individual should act.

We make a difference based on your feedback

This year...

- Local people shared 3,824 detailed experiences with us
- We raised 210 issues and concerns with commissioners and providers of health and social care services
- We helped 476 local people through our Helpdesk (0303 303 0023)
- Our Healthwatch Champions in local Citizens Advice offices helped 2,381 people
- Our Advocates helped 255 people to make a complaint about NHS services
- Our volunteers contributed 1,697 hours
- 99 people shared their experiences of discharge from hospital and as a result we created a hospital discharge checklist which is being trialled by Royal Surrey County Hospital (see page 17)
- 237 care home residents and their families shared their care home experiences with us (see page 16)

And this has led to...

- More opportunity for voices of vulnerable patients with complex HIV and sexual health conditions to be heard as the service transitions to a new provider (see page 9)
- Additional arrangements were put in place for patients with complex HIV and sexual health conditions when service provider changed
- Assurance that improvements are being made with the NHS 111 service and Public Health to improve signposting and access to services
- More children and family voices heard as a result of our work to highlight concerns with child and adolescent mental health service waiting times
- Funding secured for four Surrey-based Safe Havens and one in Hampshire (see page 16)
- Community Matron employed to assist care homes with identifying areas for improvement (see page 16)

Collaboration with the ‘whole system’ to embed the public’s voice in service planning

We were selected by Surrey Heartlands Health and Care Partnership to recruit seven ‘Citizen Ambassadors’ to enable local people’s voices to be properly heard as health and care leaders shape the future of NHS and social care services in Surrey.

Citizen Ambassadors are paid roles for up to 10 hours a month who are able to bring a constructive and independent perspective to the work of seven transformation programmes.

We are really excited that the health and social care system recognises the value that our independence and experience will bring in helping to ensure the voices and needs of local people - citizens - remain at the heart of discussions and plans about the future of services.

Kate Scribbins, Healthwatch Surrey Chief Executive
We support community groups and projects

We have continued our Community Cash Fund, a small grants scheme that enables groups and individuals to apply for up to £1,000 of funding to deliver projects that will help local people to speak up about local health services and boost their wellbeing. In 2017/18, we awarded funding to five projects:

**The East to West Trust - relational support work groups**
The Trust ran 10 groups across seven schools in Surrey to support young people who are showing signs of low self-esteem and deliver interventions for 60 of the most vulnerable students.

**Oxted Young Persons Theatre - inclusive theatre for the community**
Weekly workshops for people over the age of 65, exploring areas of drama, music, storytelling, socialisation, writing for theatre stage, poetry, stage makeup and work towards a performance.

**Ash Parish Dementia Action Alliance - The Creativity Box**
A craft initiative to enable people living with dementia and their carers to enjoy expanding their creative skills using hands, eyes and minds. The Creativity Box has also created a scrapbook on film of artwork and craftwork with quotes about how living with dementia has impacted their lives.

**Dyscover - Aphasia Ambassadors Group - Health phase**
Aphasia Ambassadors visited a number of health settings within the local community to present to the staff and care teams their personal experiences of aphasia, the impact upon them and provide information on what strategies can help people to communicate effectively.

**Friends of Bushy Hill Junior School - Bushy Hill family recipe book**
Children and their families at Bushy Hill School created a healthy eating recipe book to include recipes with the vegetables available on the school allotment. The book has information and advice about healthy lifestyles and includes signposting to a range of local health services. Each book also contains a survey and links to an anonymous online version.

(find more about the funding and projects on our website: [HealthwatchSurrey.co.uk/our-work/community-cash-fund/](http://HealthwatchSurrey.co.uk/our-work/community-cash-fund/))

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**Progressing your priorities**
**Improving the experience of making a GP appointment**
“We will work with local CCGs to ensure that [My GP journey] findings are shared with all local GP practices, so that they can take this feedback into account in the provision of care for their patients.” NHS England

**Early intervention in mental health**
We have seen a number of positive outcomes from our work with Safe Haven service users (see page 16).

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**Sharing our learning - awards, recognition and publication**
During 2017/18 we created a number of opportunities to share our learning nationally and with other Local Healthwatch.

**Presenting our work at national conference**
We delivered three workshops at Healthwatch England’s annual conference to share our escalation process, how we measure impact and our Patient Leaders work. Our work on impact was particularly well received and for weeks after the conference, we continued to receive requests for help and information from other Local Healthwatch.

**Case study in national guidance**
We were featured in Healthwatch England’s guidance on engaging with Overview and Scrutiny Committees. Our case study described the protocol we have with Surrey Health and Wellbeing Board and Adults and Health Select Committee (previously Surrey County Council Wellbeing and Health Scrutiny Board) and the work we do to build our relationship with officers and councillors and keep them up-to-date. A link to our protocol was also included in the guidance.

**Evidence contributed to new best practice guidelines on care homes**
We submitted evidence from our work to amplify the voice of care home residents (see page 16) as part of the National Institute for Health and Care Excellence’s (NICE) guidance document: People’s experience in adult social care services: improving the experience of care and support for people using adult social care services. The guidance can be seen at: [nice.org.uk/guidance/ng86](http://nice.org.uk/guidance/ng86)

**Highly commended for Safe Havens work**
We are delighted to have been ‘highly commended’ for a national ‘Diversity and Inclusion’ award that celebrates the difference local Healthwatch have made to health and social care for our work highlighting the experiences of people living with mental ill health in Surrey and the ‘life saving’ work of the Surrey Safe Havens (see page 16).

**We support community groups and projects**
We have continued our Community Cash Fund, a small grants scheme that enables groups and individuals to apply for up to £1,000 of funding to deliver projects that will help local people to speak up about local health services and boost their wellbeing. In 2017/18, we awarded funding to five projects:

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(find more about the funding and projects on our website: [HealthwatchSurrey.co.uk/our-work/community-cash-fund/](http://HealthwatchSurrey.co.uk/our-work/community-cash-fund/))
We listen to local people in a range of ways

Our community engagement work enables people to share their views and concerns about local health and social care services which we can use to improve services.

Listening events

We have increased the number and the variety of events we have organised and attended to help raise awareness and give a wider group of people the opportunity to share their views. We have also organised events to support specific projects including the GP online work (see page 15).

Throughout the last year, we have visited family fun days and school summer fairs, high streets and shopping centres, GP practices, hospital reception areas and outpatient departments. We also heard more than 300 experiences during our Spring ‘listening tour’ when we held 24 events across Surrey at district and community hospitals, hubs, council offices and high streets.

New ways to engage

In addition to our established methods of engagement, we have introduced some new initiatives to enable us to meet more people and react to what we are hearing.

Reactive engagement

Last year we pioneered a reactive approach to engagement that enabled us to visit service providers that we may have concerns about to gather more evidence and enable us to take more robust action.

Patients sharing their experiences while in hospital

Our staff and volunteers visited three medical wards at St Peter’s Hospital to gain further evidence and insights from patients while they were still within the hospital following two patient experiences shared with us. They gathered 80 positive and negative experiences which were themed around staff shortages, positive attitudes of staff, disturbances on the wards at night, discharge planning and communication with patients.

Our findings and recommendations were shared directly with the hospital and we received a detailed response from their Chief Nurse that outlined the work the Trust is doing to address the issues we raised.

Engagement allows us to have an ear to the ground to find out what is happening and react as needed.

Jade Vlada, Healthwatch Surrey Engagement Officer

Sexual health service change consultation process challenged

We attended an event in May 2017 to listen to views about proposed changes to the location of services affecting people with HIV and sexual health conditions and the potential closure of Blanche Heriot Unit at St Peter’s Hospital following a change of NHS provider, from Ashford and St Peter’s NHS Foundation Trust to Central and North West London NHS Foundation Trust. 81 people attended the meeting and during that time, 48 experiences were shared with us.

We shared the feedback with commissioners and challenged their level of engagement and consultation around the service change. We also used our legal power to challenge the process by referring it to the Adults and Health Select Committee.

As a result of our intervention, additional public meetings were held and additional transition arrangements were introduced, particularly for patients with more complex needs.

Care Quality Commission inspections

We took part in a new method of Care Quality Commission (CQC) inspection which involved us facilitating focus groups with children, young people and adults in mental health hospitals and rehabilitation services. During sessions about the privately-run child and adolescent mental health service unit at Cygnet Hospitals, Woking, we heard that experiences from the children and young people using the service were poor and major issues around safeguarding and staff culture were uncovered. As a result, the young people’s ward was temporarily closed by NHS England and the CQC whilst a review was carried out.

I have been receiving rave reviews about your engagement sessions this week and thank you for your excellent contribution to our inspection process and the rich material you gathered.

Russell Hackett, CQC Mental Health Inspector

Commissioned work

As a social enterprise we look for opportunities to secure additional sources of income by offering services that are complementary to those of our main Healthwatch contract. As a result of this and our recognised engagement expertise, we were commissioned by Epsom and St Helier University Hospitals NHS Trust to develop opportunities for Surrey residents to share their views on where a new health facility for the sickest people might be built.

We ran showcase events at Epsom Downs Racecourse, held drop-in events at community, hospital and high-street locations across the local area and hosted an online survey to get a wide range of views. We were then able to independently review and share the feedback for consideration by the Trust. We spoke to 2,058 people at our engagement events, 8,948 saw our facebook adverts and 5,144 viewed our dedicated web page.

Volunteers

In addition to the volunteers who already support us at engagement events, we have now trained our volunteer group in Surrey Heath to hold their own engagement events and use their local knowledge to seek out the most seldom-heard voices in their local community.
We analyse what we’ve heard

We heard 3,824 detailed experiences during 2017/18 through our Helpdesk, our Healthwatch Champions in Citizens Advice offices and at our various engagement events and meetings.

Just over two thirds of experiences (67%) were negative. The majority of experiences were about hospitals (44%) and GPs (28%).

The highest proportion of positive experiences from the most talked about service types was about emergency care. The highest proportion of negative experiences was about mental health.

Communication to patients and hospital discharge were the topics with the highest proportion (78%) of negative experiences.

See page 17 for information about the work we have done to review and improve communication around hospital discharge.

95% of experiences we heard about child and adolescent mental health services were negative.

See pages 9, 14 and 16 for more information about our work in this area.

81% of what we’ve heard about residential care homes was negative.

See page 16 for more information about our work with care homes.

What we’ve heard most about

<table>
<thead>
<tr>
<th>Service</th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>General practice</td>
<td>411</td>
<td>606</td>
<td>37</td>
<td>1054</td>
</tr>
<tr>
<td>Mental health (adult)</td>
<td>30</td>
<td>171</td>
<td>7</td>
<td>208</td>
</tr>
<tr>
<td>A&amp;E</td>
<td>86</td>
<td>83</td>
<td>6</td>
<td>175</td>
</tr>
<tr>
<td>Inpatient care</td>
<td>20</td>
<td>125</td>
<td>2</td>
<td>147</td>
</tr>
<tr>
<td>Sexual health</td>
<td>30</td>
<td>84</td>
<td>0</td>
<td>114</td>
</tr>
</tbody>
</table>

There was a significant increase in feedback about sexual health services – rising from one experience in 2016/17 to 114 in 2017/18. Just under three quarters (74%) of these were negative sentiments, compared with an overall average of 67% negative sentiments. See page 9 for information about our work on sexual health services.

Hospital (1691)

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>64%</td>
<td>34%</td>
</tr>
</tbody>
</table>

GP (1056)

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>58%</td>
<td>39%</td>
</tr>
</tbody>
</table>

Mental Health (305)

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>87%</td>
<td>10%</td>
<td></td>
</tr>
</tbody>
</table>

Social Care (292)

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
<th>Neutral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>83%</td>
<td>15%</td>
<td></td>
</tr>
</tbody>
</table>

Emergency Care (90)

<table>
<thead>
<tr>
<th></th>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>28%</td>
<td>59%</td>
</tr>
</tbody>
</table>

(As a proportion of all comments about the topic. Other comments received had a neutral sentiment.)
We raise issues and concerns as a result of what you told us

We use our evidence-based feedback to influence, inform and, if necessary, challenge the way services are designed and delivered.

We hold regular ‘What we’ve heard’ meetings with commissioners and providers to enable us to raise issues and concerns directly and ensure specific action is taken to improve a particular service.

In addition to our regular meetings with commissioners and providers, we also take the voice of local people to a wide range of decision-making forums and monitoring groups including:

- Health and Wellbeing Board
- Adults & Health Select Committee
- NHS England Quality Surveillance Group
- Children’s & Young People Partnership Board
- Safeguarding Adults Board
- Surrey Priorities Committee
- North West Surrey Primary Care Co-Commissioning Board
- Surrey Quality Assurance Group (Adult Social Care).

Escalating concerns and issues

Our Escalations Panel, which comprises volunteers, Board members, staff, and Helpdesk advisers meets every month to agree which issues need to be shared and how. However, urgent issues regarding safeguarding and patient safety are escalated immediately to the relevant organisation or group such as the Care Quality Commission (CQC) or the Multi-Agency Safeguarding Hub (MASH).

During 2017/18 we shared 210 issues.

<table>
<thead>
<tr>
<th>Social Care Quality Group</th>
<th>CCG</th>
<th>NHS England</th>
<th>CQC</th>
<th>Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Social Care</td>
<td>2</td>
<td>19</td>
<td>88</td>
<td>42</td>
</tr>
<tr>
<td>Child’s Rights Department</td>
<td>1</td>
<td>9</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Local Healthwatch</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MASH</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Unsafe discharge

When we gathered people’s experiences of the Epsom@Home service (see page 17) we had concerns for the welfare of a lady who had been discharged from hospital to a supported living environment as she was worried that her mobility problems would affect her ability to escape in an emergency. We raised our concerns to the Multi-Agency Safeguarding Hub who referred us to the locality social work team. We chased the team on a number of occasions before escalating it to two separate area directors. Our alert was combined with two other safeguarding referrals (one from the housing provider and one from the ambulance service). As a result, the fire service visited and confirmed that the lady was safe and a package of care has now been put in place.

‘My GP Journey’ video used by Moathouse Surgery in disability awareness training

The Practice Manager at Moathouse Surgery in Merstham ran a disability awareness training for all staff and used our ‘My GP Journey’ video as part of the training. We were also invited to talk about the report and the recommendations during the training session.

The video can be viewed by visiting our YouTube channel - search Healthwatch Surrey. See page 15 for more information about our report.

Mental health support following adult sexual trauma

We heard from three people who have had difficulties accessing appropriate mental health support after experiencing rape or sexual abuse as an adult or a child. They had tried to seek support for their mental health and felt they’d been let down by the NHS. One person felt her GP had offered no meaningful help, she couldn’t access face to face specialist advice and was told that access was not available from NHS. Another had been passed from pillar to post and waited for months until she eventually sought help privately.

We tried to clarify the situation with NHS commissioners. They told us that face to face assessment for IAPT should be available when needed and have taken this up with the provider. The commissioners also confirmed that information on mental health services about sexual trauma is not comprehensive, and that as a result doctors may not be aware of what support is available or how to access it. They told us that complex commissioning arrangements involving Public Health and charities as well as NHS services create challenges and are taking steps to provide clearer information around this.

We have been assured that work is underway to improve the directory of mental health services used by the NHS 111 service (as part of the specification for the new service) and that commissioners are working with Public Health to redesign functions and develop an easy-read map of mental health services in Surrey to improve signposting and access to services.

Additionally, a new service is now being developed for sexual trauma and we have recommended that the patient voice is included as it develops.

Ear wax clinic

We identified multiple experiences of people being turned away for treatment by GPs in North West Surrey who were not aware that the microsuction services for ear wax are now provided at Ashford and St Peter’s hospitals. We escalated the issue to the local Clinical Commissioning Group who took action to promote the service through its monthly e-newsletter to GPs.
Our Priorities

In order to maximise our impact, we focus our work on a number of priority areas. We review these each year to ensure the issues remain relevant and we are able to have a positive effect on services on behalf of people in Surrey. We also use the database to inform our priorities, based on what people are telling us.

Our priorities this year were:

- Improving the experience of making a GP appointment
- Early intervention in mental health
- Amplifying the voice of care home residents
- Improving the experience of hospital discharge

Information about these projects can be found on the next page.

We work on projects based on local feedback

Changes and improvements have also been made as a result of our project work around four priority areas.

Improving the experience of making a GP appointment

My GP Journey

Our ‘My GP Journey’ report explores the GP experiences of 120 people from seldom heard and vulnerable patient groups (such as those with long term conditions or a disability). The experiences cover all stages from registering and booking an appointment, through to attending the surgery and getting treatment.

Key themes that came out of the report included: difficulty booking appointments, lack of staff awareness about their particular conditions and low uptake of online booking.

Following the report, we found:

- 90% of the GP surgeries who took part said the findings were very helpful or helpful.
- 34 out of the 37 practices said they planned to make changes or to incorporate the feedback into their practice in some way.
- 67% of the practices said they are now considering how patients with long term conditions can visit staff training sessions to talk about living with their condition.

A summary of the responses we had to our report can be seen in the Impact Report on our website.

GP Online

Our volunteers teamed up with eight GP practices across Surrey to help raise awareness of online GP services and gather views on how the current system is working as part of a national campaign to help more people make the most of the internet.

We spoke to almost 300 people during the week, including views gathered from over 150 people through an online and freepost survey.

We heard about the benefits of using GP’s online services, why people don’t use them and what improvements are needed to increase the use of them.

Our findings can be seen in our report: ‘GP online: ‘Even better if... People’s experiences of GP online services’ and a summary of the report ‘GP online: understanding and increasing the use of online GP services in Surrey’.

We will work with local CCGs to ensure that [My GP journey] findings are shared with all local GP practices, so that they can take this feedback into account in the provision of care for their patients.”

NHS England

Long waits for Child and Adolescent Mental Health Services (CAMHS)

We raised concerns about the lack of timely access to CAMHS with senior NHS staff and shared our evidence with local politicians at the Children’s Health and Education Select Committee. We then actively worked with the local media to amplify the voices of children experiencing issues with emotional wellbeing. We supported parents and carers to share their experiences with BBC Surrey, Eagle Radio, Get Surrey and the Surrey Advertiser.

An independent review of CAMHS is being conducted and we are sharing our insight. The Committee also increased its scrutiny of the services and called for more evidence around the experience of children and families.

14

15
Early intervention in mental health

Safe Haven Impact Report

In April 2017 we published our report ‘Keeping the Light On’ to give Safe Haven service users the chance to share their views on mental health services and the way the Safe Haven service is provided.

This was followed by our Impact Report which was published in October 2017 to share the positive feedback the report received along with several positive outcomes, including:

- Woking Safe Haven have adopted recommendations from service users to show pictures of the inside of the Safe Haven so they know what to expect.
- The central risk assessment used by all Safe Havens will be updated in response to an incident of assault we reported at one local Safe Haven.

We also shared our report with Healthwatch Norfolk to help them understand how people using crisis cafes feel about the service, as part of their work with local commissioners.

Amplifying the voice of care home residents

My Way, Every Day – Impact Report

In the Summer of 2017, we published an Impact Report for ‘My Way, Every Day’; our report looking at how care homes in Surrey provide activities for care home residents.

As a result of our report, a community matron has been employed to assist care homes with identifying areas for improvement and care home providers have told us:

- 85% have reviewed their activity provision to make sure people can participate in activities in a flexible way, overcoming any health limitations.
- 71% have reviewed their recruitment processes, induction planning and job specifications to ensure that ‘meaningful activities’ is integrated into every care worker’s job role.
- 76% have explored ways in which family, friends and volunteers could get involved in meaningful activities.

We also carried out a series of 20 Enter and View visits to care homes across Surrey in January and February. The individual reports are on our website and a full report will be published in May 2018.

Our work with the users of Safe Haven was Highly Commended in a national Healthwatch England award for working with seldom heard groups.

Mainstream funding from Clinical Commissioning Groups (CCGs) is being used to support four Surrey-based Safe Havens and one Hampshire Safe Haven, following successful piloting.

Hospital discharge report

We worked with local acute hospitals to gather older people’s experience of being discharged from hospital. We visited wards at a number of hospitals to talk to patients about their experience of communication around hospital discharge processes and also conducted an online survey encouraging people to share their experiences.

We found that a lack of clear information and communication is causing unnecessary worry for people leaving hospital. This includes inadequate plans for transport home and relatives not receiving information about changes to care, such as new medication being prescribed.

We analysed the in-depth experiences of 59 older people and their relatives, before and after being discharged home from hospital in a report about what people told us about their expectations, needs and experiences throughout the process of leaving hospital. Our report, ‘It’s difficult to know what to ask’, included six recommendations directed at hospital staff, hospital discharge teams, social care teams and providers of residential care.

The report also led to an interview on BBC Surrey with our CEO Kate Scribbins, to help raise awareness of the issues people face when leaving hospital.

A summary of the responses we received about our hospital discharge report from the commissioners and providers can be found in our Impact Report: https://www.healthwatchsurrey.co.uk/wp-content/uploads/2017/06/Hospital-Discharge-Impact2018-HWSy.pdf

Epsom Health and Care @Home

The Epsom Health and Care @Home team provides integrated care for patients over 65 who are being discharged from hospital. We worked with them to supplement their own evaluation to understand what is being done well and what could be done better from a patient (and carer/relative) perspective.

As a result of the evaluation the Epsom Health and Care @Home team have started to make telephone calls to follow-up with patients and provide a method of feedback.

“I think it’s useful to have these questions there. There are things you like to know so you have to ask. It’s easy to read through it all and it would help me to get things straight.”

Patient

Hospital discharge checklist for patients

We took our findings and worked closely with hospitals, patients and other organisations to design a checklist of key questions raised by patients as being important to consider before leaving hospital.

The checklist, ‘Leaving hospital - What do I need to know?’ is available as a printed copy and online at: healthwatchsurrey.co.uk/our-work/reports-and-papers/project-reports/

The checklist is being trailed at the Royal Surrey County Hospital.

Keeping the light on
We provide information and advice about health and social care

Our information and advice service helps to signpost people to the right health or social care service or organisation for their needs (such as: Age UK, Mind, Care Quality Commission and Social Services). We can also offer information if they want to share their experience or make a complaint.

Our specially trained Healthwatch Champions can give face-to-face advice from five Citizens Advice offices, as well as a dedicated Helpdesk telephone number for people to call in confidence.

Case Study - Help with concerns over care provision

A lady had became unhappy over the last year due to more than 30 changes of live-in carer, and the significantly reduced quality of care. She hadn’t complained as she was concerned that the agency might remove the care services completely if she did. Our Helpdesk explained the responsibilities of the provider to ensure care was provided which gave her the confidence to raise her concerns.

Case Study - Homeless man helped to access GP services by Healthwatch Champion

A man in his early 60s visited Citizens Advice after coming back to the UK from living abroad. He was homeless, living off friends, in poor physical health and relying on a local food bank.

He told our Healthwatch Champion that he couldn’t access GP appointments at local surgeries because he had no proof of address to give them. The champion found the nearest GP surgery which was taking homeless patients and contacted them on his behalf.

They advised him of the process and the man said he would go back to the GP centre to register with them.

Case Study - Patient struggling after husband's death in hospital receives advocacy help

A lady whose husband died from a diabetes-related illness contacted our advocacy service as she felt the hospital had some responsibility for his death and she couldn’t grieve properly as a result.

An advocate met with her at home to explain the NHS complaints process and helped her to write a complaint letter to the hospital in question. However, she was not happy with the answers they gave her.

A Local Resolution Meeting (LRM) was then arranged and the advocate helped both the lady and her daughter through the process of preparing for, and attending, the meeting.

The staff were very helpful and answered all of the questions, after which the lady felt much happier and better understood the hospital’s decisions.

New advocacy provider

Our advocacy service is now provided by Surrey Independent Living Council (since April 2018).

Tel: 01483 310500  SMS: 07704 265377
Email: nhsadvocacy@surreyilc.org.uk, www.surreyilc.org.uk

We help and support with NHS complaints

Our independent health complaints advocacy service helps people to make complaints about an NHS service. We provide free, confidential, independent support and assistance to anyone living in Surrey who needs to make a complaint.

People can use the service to make complaints about hospitals, GPs, mental health services, nurses, pharmacists, dentists, opticians, 111, walk-in centres, NHS-funded private care and more.

During the 2017/18 financial year, we provided the service in partnership with Advocacy in Surrey whose trained advocates helped explain the options available and support individuals to pursue a chosen course of action throughout the complaint process. Our advocates don’t offer legal or medical advice but they can offer help and support.

The most common complaints our advocates helped with were around hospital services, GP services and mental health services.

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We couldn’t do any of this without our volunteers
Volunteers are fundamental to our work and are at the heart of everything we do. They bring huge experience, knowledge, dedication and enthusiasm and make our work to improve services possible.

Our local volunteer groups help us to increase local engagement with people throughout Surrey, set up events and help us achieve our outcomes by providing us with valuable knowledge and intelligence.

We are becoming more volunteer-led as we create much broader opportunities for people to join us, based on their skills and passions, rather than trying to fit people into specific roles. This includes volunteers who help with admin duties in our delivery team office. To support this, we have been working to get to know our volunteers better and held a lunch ‘n’ learn session with volunteers and staff to highlight all of the ways volunteers can get involved in our work.

Contribution to Projects
Volunteers are actively involved in all aspects of our project work - from planning to implementation - and play an integral part in the development of projects across all of our key priorities (hospital discharge, care homes, GP access and mental health).

Involvement in Escalations Panel
Additional volunteers have joined our Escalations Panel to help share their advice and experiences. The Panel decides what action to take and/or which issues to prioritise for further/specific action around services with high levels of negative experiences, as well as in individual cases which cause concern.

Celebrating success with a Christmas party
We can’t emphasise enough the value which the work of our volunteers brings to the organisation, so to say thank you we got all of them together for a Christmas party in December. It was a wonderful event, with over 20 volunteers attending, to celebrate all of the hard work they carry out throughout the year.

Learning from volunteers in Patient Leaders to shape Citizens Ambassadors
We used our experience of training volunteers to be ‘Patient Leaders’ to create seven new Citizen Ambassador roles to work with Surrey Heartlands Health and Care Partnership this year. These paid roles will bring their own insight and views from the local community into discussions across service transformation programmes comprising: Mental Health, Women and Children’s Services, Cancer and Digital, MSK, Out of Hospital and Cardiovascular.

Our volunteers contributed 1697 hours the equivalent of 45 working weeks during 2017/18

Surrey Heath Volunteer Group
We have provided training for our volunteers in Surrey Heath to enable them to carry out their own volunteer-led engagement events in the area. This has enabled them to forge relationships and establish local community connections. The group have been holding regular meetings and held a successful engagement event in Camberley Mall.

Patient-led assessments (PLACE)
Several of our volunteers have helped to support two acute trusts and four community hospitals to carry out Patient Led Assessments of the Care Environment (PLACE). These assessments give patients and the public a voice to discuss the local standards of care.

Apprenticeships
Following the success of our first Business Administration and Marketing Apprentice, who completed her apprenticeship in September 2017, we have recruited a new Apprentice to join us.

Sexual health services feedback
Liz Sawyer is a volunteer who represents us on the Central North West London NHS Foundation Trust and Surrey County Council Patient Working Group (Sexual Health). Liz explains why she got involved:

“When I heard local sexual health clinics were being closed due to Public Health budget cuts I was very concerned that local vulnerable groups would not be able to access health services that they continue to need. “A stitch in time saves nine”. These preventative public health services are key to containing costs in other health services.

“Through a long career in IT technology services I have successfully challenged the ‘status quo’ and transformed the way services are delivered. In my view the radical transformation we are seeing in public health needs commissioners and service providers to actively listen to service users and develop a trusting relationship to be effective.”

Liz’s work has helped to open communication channels, making Healthwatch Surrey a conduit for patients who want to provide feedback on the new sexual health services.

Governance and decision making
Healthwatch Surrey is governed by a Board that meets in public every quarter and members of the public are encouraged to attend the meetings and ask questions. The Board reviews all of our thematic priorities at the end of each year and uses what the people of Surrey tell us, to drive continuous improvement in the health and social care services. They combine consultation and engagement work with assessment of national issues to make sure our views and priorities are always balanced.

The current members of the Board, the majority of whom are independent Non-Executive Directors, are:

- Peter Gordon (Chair)
- Jason Davies (Deputy Chair)
- Lynne Omar
- Wanda Jay
- Deborah Mechaneck
- Richard Davy - Director appointed by Surrey Independent Living Council
- Mark Sharman - Director appointed by Help and Care
- Laurence Oates - Director appointed by Citizens Advice Surrey

Kary Backhouse was a Non-Executive Director until October 2017.
We listen to your concerns to plan our future work

Our project work enables us to find out more about a particular issue or service and make recommendations for change or improvements.

Projects are based on themes that are influenced by what people are telling us (e.g. through feedback on our website, through our Helpdesk or attendance at our listening events). We take account of what we hear most frequently and also whether what we hear is good or bad. These form our priority areas and help us to focus our project resources on areas where we feel we can have the most impact for local people.

Each theme usually guides our work for three years, however we do have an annual review of whether our priorities still fit with what local people are saying.

We published a report summarising the process for reviewing our priorities and what people told us as part of the review in January 2018.

The report can be seen on our website:  
www.healthwatchsurrey.co.uk/about-us/our-priorities/

More than 150 people took part in our review of priorities in November 2017.

As a result of this year’s review of priority areas, our Board agreed to retain the priorities which are mid-way through a three-year cycle for 2018/19. These priorities are:

- early intervention in mental health (which will cover the concerns raised during our review about a lack of support for people living in the community with mental health issues)
- amplifying the voices of care home residents
- investigating the experience of hospital discharge.

The Board also agreed to replace the priority area ‘improving the experience of making GP appointments’ (which has been a priority since 2014) with a new priority area:

- care services for vulnerable and older people living at home.

Our finances

Summary of Healthwatch Surrey’s financial activity (subject to independent audit) for the year 2017/18

Below is a summary of Healthwatch Surrey’s financial activity (subject to independent review) for the year 2017/18.

<table>
<thead>
<tr>
<th>Income</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding received to deliver local Healthwatch statutory activities in Surrey and the county's Independent Health Complaints Advocacy Service</td>
<td>601,282</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenditure</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Operational costs</td>
<td>258,346</td>
</tr>
<tr>
<td>Staffing costs</td>
<td>303,984</td>
</tr>
<tr>
<td>CIC costs</td>
<td>9,248</td>
</tr>
<tr>
<td>Total expenditure</td>
<td>571,578</td>
</tr>
</tbody>
</table>

Balance brought forward | 29,704 |

Note to 2017/18 figures

The Healthwatch Surrey CIC Board decided to carry forward the £29,704 end of year balance to meet commitments to move to new office accommodation, pay outstanding Community Cash Fund invoices, and provide additional staff resource on increased activity in delivery of our work plan.

Our reserves balance as of March 2018 stands at £69,441. The Board keeps the Company’s Reserves Policy under review and considers this is the level currently required to ensure we can provide financial stability and fulfil our continuing obligations.
About Healthwatch Surrey

Healthwatch Surrey is an independent local watchdog that gives the people of Surrey a voice to improve, shape and get the best from health and social care services.

Contact us

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