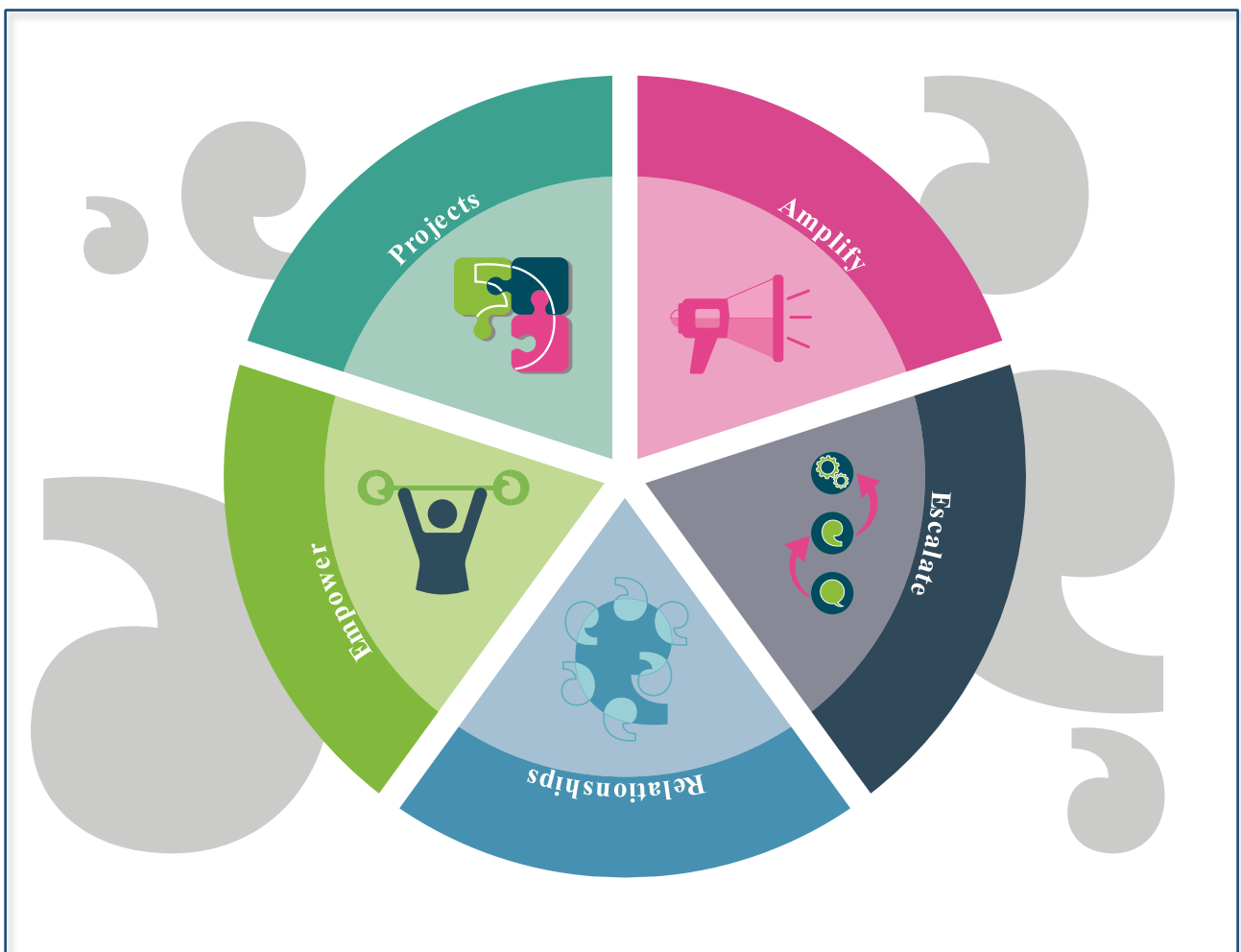


‘Making a difference’

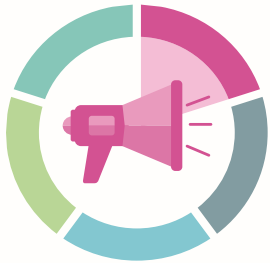
Q3 2017 Outcomes



Making a difference



We continually monitor the range of ways we make a difference to local health and social care services for the people of Surrey. This includes:



Amplifying your voice

Sharing views and experiences at meetings and events where health and social care services are planned and reviewed to ensure the voices of the people of Surrey are heard



Escalation

Raising issues and concerns directly with commissioners and providers or with regulators and monitoring groups and organisations to ensure specific action is taken to improve a particular service



Relationships

We are committed to developing mature relationships with health and social care commissioners and providers, as well as with community, voluntary and faith groups and organisations, to make it quicker and easier for services to be improved based on the feedback we share



Empowering people

Supporting local people with information and advice that empowers them to get the best experience of health and social care services



Projects

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 the themes that come from what people are telling us and other local priorities.



- Following our Consultation Institute training (which gave us greater understanding of the Equalities Act obligations when services are modified), plus our additional research into this issue, we challenged whether the Surrey Priorities Committee or the CCGs carry out an Equality Impact Assessment when making recommendations for changes to thresholds (to identify if any group may be disproportionately affected). This challenge was welcomed and will be further investigated.
- Upon hearing at the Health & Wellbeing Board, that a number of issues relating to improved health and social care outcomes were being developed in Surrey Heartlands and Frimley but not in East Surrey we expressed concern that residents across Surrey were at risk of not having equality of access as STPs develop. There was significant support expressed for this concern amongst the Board.
- In a Health & Wellbeing Board review of the emotional wellbeing and mental health strategy update, we challenged commissioners about whether there is sufficient accessible information available to people between referral, assessment and treatment:
“For example, people being referred to services with a moderate/long wait are unsure what support is available in the interim and how this support fits with the 'treatment' phase.”
- In hearing an evaluation of integration initiatives across Surrey Heartlands at the Health & Wellbeing Board, we questioned why the evaluation had not included any engagement with service users and pointed to our work with [Epsom@Home](#). We urged greater engagement with service users with any metrics and outcomes developed as part of this work.
- The Surrey Commissioners Forum for South East Coast Ambulance Service (SECAMB) have committed to reviewing our Case Studies on long waits for ambulances at their next meeting.
- We presented to the Children’s & Education Select Committee that;
 - a) we had not heard anything positive about CAMHS in 12 months and that this was unusual when compared with other services
 - b) we continue to hear about problems with timely access to services and
 - c) we’ve heard reports that Targeted Mental Health in Schools Services (TaMHS) is not working for all children or schools in the county.

Amplifying your voice



We urged the committee to consider more intensive scrutiny of the issue. A recommendation was ultimately made that the provider and commissioners provide an improvement plan to the committee within 2 weeks and that it would be the subject of further scrutiny at the committee's next meeting. A recommendation was also made that the Full Cabinet Committee should be made aware of the situation at its next meeting.

- We raised concerns with commissioners at the Adult Health Select Committee about performance around ambulance 'green calls' (less urgent calls), where there is no national target, following reports to us of a number of very long waits (over 3 hours).
- At the Sexual Health Working group, a Healthwatch Surrey volunteer raised a concern around the lack of availability of online appointments at sexual health clinics, which was recorded. The provider asked Healthwatch Surrey to provide more information and we then followed up at the next meeting.
- We alerted the NHS England Quality Surveillance Group that we were continuing to hear of issues with timely access to CAMHS. Commissioners agreed to add this as a dedicated agenda item for the next meeting, including a review of what is being done to improve the situation.
- We challenged commissioners at the Adult Health Select Committee (AHSC) to confirm whether they believe there is a legitimate expectation that people should be consulted on the location of a new inpatient mental health service in Surrey and whether the consultation would consider the views of people in the East of the county.

Escalation



- A lady contacted the helpdesk to say that there was a 5 month wait for a cervical screening test at her GP surgery. Our Escalations Panel recommended this be taken to the provider who confirmed that they were 1 nurse down but provided assurance that there should only be a couple of weeks wait for an appointment.
- During the Epsom@Home project we spoke to a lady who was discharged from a local community hospital to a supported living environment. We had concerns for her welfare, as she had mobility problems and felt she would not be able to escape in an emergency. After making an initial referral, we did not receive an update in response from the Multi Agency Safeguarding Hub. After chasing, MASH referred us to the Locality Social Work Team. After we chased this team several times, the matter was escalated to the Area Director but a week later still no response had been received. The following week we met another Area Director and made enquiries about what a reasonable expectation was about a response to a case such as this. The Area Director offered to follow it up herself. The Area Director confirmed: *“The alert became a safeguarding referral (two other referrals were received - from the housing provider and from the ambulance). When SCC carried out the initial assessment, before discharge from [the community hospital], she had capacity and expressed a wish to go back home. The fire service visited after the safeguarding alerts and “confirmed she is safe”.* A package of care has now been put in place.
- Following our What We’ve Heard (WWH) meeting with North West Surrey CCG, it was confirmed that the CCG had asked all GP surgeries to display posters about community/patient transport. Furthermore, surgeries were reminded of details for the online translation services in their monthly 'Spotlight' update.
- We escalated an experience about waiting time for a chemotherapy belt removal. North West Surrey CCG informed us that long waits for district nurses (often 24 hr+) is indicative of Central Surrey Health (CSH) coverage problems. We were give reassurance that this is an issue the CCG is aware of and is monitoring closely.
- We escalated an experience of a hand injury not treated correctly at Ashford St Peter’s Hospital (ASPH) to North West Surrey CCG. They confirmed this serious incident had been closed and that ASPH had given assurance that the resulting actions had been taken on board.

Escalation



- We escalated an experience of reception staff's attitude at Ashford St Peter's (ASPH) A&E. North West Surrey CCG confirmed this had been reported back to the hospital. The trust is aware of issues around some temporary/agency staff not following trust social and clinical procedures.
- We escalated an experience about poor communication between the orthopaedic and radiology departments at ASPH, resulting in delays to treatment. After Healthwatch Surrey raised the issue, ASPH offered to expedite the appointment for the patient. The patient had since had the appointment but was really pleased that we have escalated her experience and the service provider will hopefully be taking steps to improve systems.
- We escalated an experience of a patient who was given the incorrect phone numbers to rearrange appointments at Frimley Park Hospital. The PALs department then asked the Head of Outpatient service to check if the phone numbers on the standard letters are correct.
- We escalated an experience to ASPH regarding them not picking up on a patient having MRSA or removing a clip following an operation. ASPH have escalated this concern to the Chief Nurse and are awaiting a divisional response.
- We reported a case of a missed tongue tie in a baby to ASPH, who have raised it with the divisional lead.
- On raising issues with service delivery at Langley Green in West Sussex, we sought assurance that patients were receiving a good service and were told that Surrey & Borders Partnership should no longer be sub-contracting beds at the service.
- We highlighted the experience we heard about children being transported in cages between mental health services, during a discussion at a meeting with Surrey County Council commissioners about the lack of and need for advocacy for children under 16 who lack capacity.
- We challenged commissioners to explore whether and how social care needs are picked up pre-assessment by an Acute Trust. Some assurance was provided by the Trust *"... following on from my discussion with both pre-operative assessment units (Epsom St Helier Trust ESHT and South West London Elective Orthopaedic Centre SWLEOC), patients' social needs are identified during the pre-op visit and should they need support/care after discharge, this is*

Relationships



- We visited Ashley Practice Patient Participation Group (PPG) in Ashted, and Abbey Practice PPG in Chertsey to give presentations about Healthwatch Surrey and our work.
- For the first time in our history, we engaged in Roma Traveller families' own homes and gained insight into their health and social care needs and perceptions. *"Health is like the weather, it comes and it goes"*.
- We attended the Surrey Children and Young People's Mental Health Transformation Board, discussing projects that are ongoing to help children and young people experiencing mental health difficulties - including crisis services, support programmes available for schools, and support for young offenders.
- We attended the Helping Hands Dementia Workshop in Godalming. Also in attendance was Helping Hands CEO Tim Lee and Secretary of State for Health Jeremy Hunt.
- We responded to interview requests from BBC Surrey and Eagle Radio, finding and supporting members of the public to share their experiences with journalists, either pre-recorded (Eagle) or live (BBC Surrey).
- We received over 30 experiences after the National Autistic Society included Healthwatch Surrey contact details in their e-bulletin.
- We made relationships with Co-Founder and Charity Manager of Bright Shadow Rhiannon Lane who is running new Dementia friendly workshops in Woking and Godalming as part of the Zest Dementia program.
- We were invited by Claire Burgess of Surrey County Council to the Brighter Futures Health Group meetings.
- We provided feedback to a researcher at University College London. The researcher supplied us with a small number of leaflets relating to Black and Caribbean awareness of Dementia and Alzheimer's and asked us to share them with the relevant communities wherever possible. We did this over a 6-month period and fed back any comments gathered from people we spoke to.
- We were invited to hold an outreach session at Family Voice's AGM to hear experiences of Speech and Language Therapy services in Surrey.
- We attended the Mindsight Surrey CAMHS Commissioner Provider Workshop.

Relationships



- We were invited by CQC to facilitate engagement sessions with patients in a CAMHs unit. Upon holding these engagement sessions, we heard the experiences from the children using the service were poor, and major issues around safeguarding /staff culture were uncovered from the session. On Friday 3rd November 2017 a directive from NHS England closed the unit permanently.
- We met with Claire Fuller, Senior Responsible Officer for Surrey Heartlands STP to discuss how Healthwatch could best fulfil our statutory duties within the developing Surrey Heartlands structure. We agreed a new way for working, where Healthwatch will have observer status on the Joint Committee, and will have quarterly meetings to review how this works.
- Healthwatch Surrey secured a slot to present at a new member training provided by Surrey County Council for elected representatives.
- We presented to Programme Leads for the Surrey Heartlands STP on the Healthwatch Surrey role and Citizen Ambassadors Programme.
- We spoke to Board Members at the Mental Health and Children's and Maternity Programme Boards about Healthwatch Surrey's role and Citizen Ambassadors.
- We congratulated Surrey & Borders Partnership on securing funding for the innovative Technology Integrated Health Management pilot in Surrey at the Surrey Safeguarding Adults Board.

Empowering people



Our information, advice and advocacy services enable us to help with individual queries. This means we help individuals in a wide range of ways on a daily basis. Some of the ways we have empowered people this quarter included:

- During Q3, we produced a 4-page summary leaflet for GP practices to distribute to patients explaining the benefits of GP online services and how to sign up.
- We have distributed over 1,500 information and advice leaflets, signposting people to our telephone helpdesk, NHS complaints advocacy and to Citizens Advice services.
- We met a lady at a local hospital whose 5-year-old son had multiple disabilities. She explained that she was using a toddler push chair as she had not been able to get a suitable pushchair to cater to his disability despite asking for help from the local council and a local charity. We contacted Family Voice for advice and sent the lady 4 different options for how she could get a suitable pushchair.
- Our Advocacy service helped a gentleman with the information he needed to make a complaint to the ambulance service after he had received poor service and a long wait following a fall at home. He was helped to write a letter and received a response which he was happy with from the service provider.
- Our Helpdesk helped a gentleman who contacted them as he was due to have his social care package review meeting and was daunted by the prospect of presenting his case. He was given the details of Advocacy so he could enquire about having an Advocate with him at the meeting.
- Our Helpdesk also gave information to a lady on how to access her community mental health team. They helped her check eligibility and then gave her information on what she needed to do to register.
- Through our Citizen Advice champions, we gave information and advice to over 700 people this quarter including; a lady was given advice on how to access her GP, a gentleman was given help finding support after being discharged from mental health services and a gentleman was given advice following a penalty fine relating to prescription charges. (See Q3 Activity report pg.10 for full details)

Projects



- The suggestions we made to address issues identified in our Epsom@Home services have been shared with the Epsom@Home team. They will discuss the key points from the report with an outside facilitator so that these can be taken forward as points for learning. We have spoken to the facilitator to ensure that key messages are discussed in appropriate detail. *“We would like to thank Healthwatch Surrey, and in particular the volunteers who played such a key role in the project, for their time and commitment. The collaborative approach adopted and the feedback received has provided a firm foundation we will use both for the @home service and for wider Epsom Health and Care integration programmes moving forward”.*
- Following publication of the Epsom @Home report looking at people’s experiences of integrated care, we were invited by the Chief Executive to present a summary at the December public board meeting of Epsom & St Helier University Hospitals NHS Trust, meaning our findings and learning points could be shared beyond the @Home service.
- Following our finding in ‘My GP journey’ that there was a lack of awareness around GP Online services, in October we reached nearly 300 local people to talk about GP online services. This helped to raise awareness of this facility and gathered people’s views and experiences to be fed back to practices and commissioners.
- We received positive feedback from the Contract Manager for our Epsom & St Helier 2020- 2030 work (helping to engage local people in a conversation about the long term future of the Trust) *“[the HWSy programme] was excellent...”, “the high street events really worked”, “liked the style [of the showcase events] and the way it was done...”, “done under huge time pressure, attracting a wide variety of people...”, “delivering a huge amount in a short space of time... a huge number of people...”, “your experts at it... organisations like ours just ‘play at it’...”, “there is a need for you [HWSy] to increase wider knowledge within the NHS of what you do...”, “you need to capture the value of what you do and communicate it to more people in the system...”.*