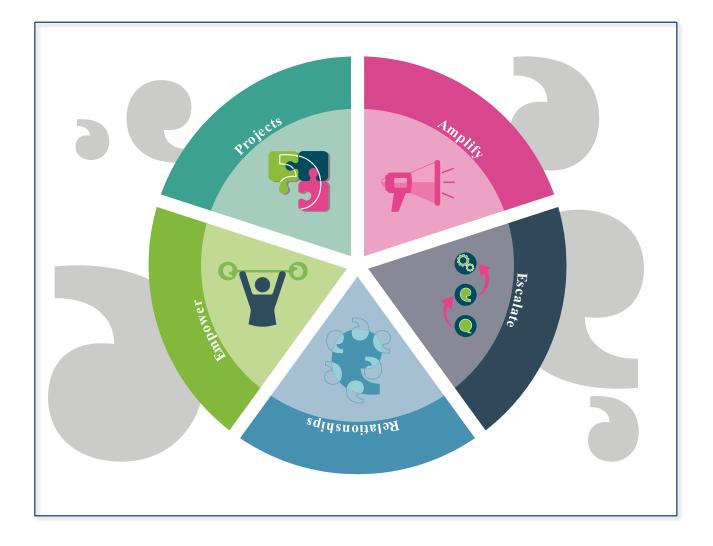


'Making a difference' Q4 2018 Outcomes



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.



• We challenged leaders to ensure there is a strong emphasis on addressing issues with Children & Adolescents Mental Health Services in the Women & Children's transformation workstream, during a meeting of the Adults Health Select Committee - Surrey Heartlands STP sub-group.

• We challenged senior leaders of adult social care services, at the Adults Health Select Committee, on the nature and level of involvement of NHS colleagues in the new Adult Social Care Online portal and the extent to which the portal addresses health needs, particularly at key points like Hospital Discharge. A commitment was made to work toward a vision of an integrated health and adult social care online portal.

• We presented findings from 'If I've told you once' to the Adults Health Select Committee, in relation to an item on the new shared care record, to highlight support for record sharing amongst health professionals but also to demonstrate the need to engage with groups and around services where there is less support i.e. people who access adult social care.

• We presented a summary of our work that relates to the transformation workstreams within the Frimley Health STP System Operating Plan, in a meeting with Frimley Health STP senior leaders. We asked senior leaders to look beyond aligning workplans and into new opportunities to collaborate with local Healthwatch. We challenged the lack of local Healthwatch involvement in the governance structures of the STP.

• We challenged Surrey Downs CCG to clarify how commissioning intentions would help to address the issues found in the report 'It's difficult to know what to ask' and specifically; people not having information about the Care Home they are moving to and an individual being discharged without a front door key.

• We challenged the Surrey Safeguarding Adults Board to review its performance reporting to ensure that *everyone* (with some agreed exceptions) who is the subject of an intervention is asked what outcome they would like from the intervention.

• We gave extensive feedback on communications materials for the Surrey Care Record to help make them as straightforward and accessible as possible. We've also provided constructive criticism on the overall plans.

• We have encouraged North West Surrey CCG to engage as widely as possible with all interested groups in their review of interpretation and language services for Surrey.



• We have been challenging where responsibility lies for ensuring Equality Impact Assessments (EIAs) are done in a timely and thorough manner across Surrey and what impact the developing governance structures of the STPs have on this. HWSy has raised questions about whether EIAs are done to inform changes to thresholds for access to treatment; and we have queried the timing and content of EIAs for sexual health service reconfiguration. We have also requested the EIA for Shared Care Record in order to assess differential impact on different communities. We are now discussing this with colleagues across Heartlands STP to help assure within developing governance structures that EIAs are embedded from an early stage.

• In our second meeting of the Joint Commissioning Committee for Surrey Heartlands we raised a challenge about whether a patient-reported metric could be included in the overall metrics for scrutiny of performance of the outcomes across the Surrey Heartlands STP.

Escalation



• We escalated concerns about people accessing inpatient mental health care being discharged to no fixed abode - Guildford & Waverley CCG are now reviewing their policy and have passed it onto Public Health.

• A safeguarding concern raised at one of our care home visits was passed onto the locality team and the concern is now being investigated by them.

• We escalated an experience we heard from a parent of a child with Special Educational Needs to the Continuous Improvement and Change Strategic Lead, Schools and Learning, at Surrey County Council for response. They agreed to investigate this case with the parent to determine if learning could take place.

• We escalated 3 experiences of people with HIV not receiving their medication to treat their condition with Central & North West London (CNWL) and received assurance in each case from the service provider.

• We escalated a safeguarding concern to the Multi Agency Safeguarding Hub about the suitability and safety of accommodation and support of someone with Learning Disabilities. Response from MASH:

"The Transition Team and the Surrey Clinical Commissioning Group are actively working to support [the family] to resolve any concerns they have in relation to [their son's] care and support, whilst also ensuring that [he] is supported within the Mental Capacity Act (2005) to take a lead on decisions that affect him. [His] Social Worker will maintain oversight over [his] care and support arrangements at the placement and will communicate, as required, with the family and other professionals involved in supporting [him]. Please be reassured that the team are doing everything possible to ensure that [he] is supported within a successful placement."

• Surrey Downs CCG are investigating the capacity of local GPs after a report from a patient that having moved to the area, they had been turned away from a practice which was causing them problems obtaining important medication.

Escalation



• After reporting a theme to Surrey Downs CCG of issues with timely access to Children & Adolescent Mental Health Services on the BEN pathway, the CCG provided assurance that they had evidence that things were now improving.

• East Surrey CCG provided assurance that issues with Children & Adolescent Mental Health Services are being worked on. East Surrey CCG conducted its own review which has recently concluded with several recommendations. They are now working with the lead commissioner (Guildford & Waverley CCG) on implementing these recommendations.

• When informed two recent and poor examples of A&E by expectant mothers. East Surrey CCG confirmed that they had not previously had concerns about treatment of expectant mothers at East Surrey Hospital A&E but concluded that this was an area to keep an eye on moving forward.

Relationships



• The National Autistic Society have included a call to action for people with Autism to share their experiences of Health & Social Care in their newsletter.

• We sent a call to action via the Learning Disabilities Surrey County Council distribution list to hear experiences from people with Learning Disabilities.

• We shared a Carer's feedback of the One Stop Surrey website with Kim Garland at Surrey County Council. She shared it with the scheme's co-ordinator in Adult Social Care for their information and response.

• We have secured agreement with North West Surrey CCG to hold a regular meeting to share the experiences we've heard from people concerning primary care and will be working with them to maximise use of our evidence. This will ensure that these insights get directly to decision-makers.

• We have been invited to join the primary care delegated commissioning committee for Surrey Heath CCG.

• We were invited to meet the Chief Executive of the Surrey and East Sussex (SES) STP, Bob Alexander, to discuss how best to carry out engagement across SES footprint and how local Healthwatch can be involved.

• We contacted various organisations supporting people with learning disabilities, including The Grange and Cobham Community Centre, to promote our work in hearing experiences from people with learning disabilities.

• We now have contacts at the National Institute for Health Research (NIHR) to share our report findings with.

• We provided advice to commissioners with the Surrey Heartlands STP footprint on how to communicate and facilitate a consultation on commissioning intentions.

• We provided advice and information to a commissioner leading on the redesign of dermatology services, to support meaningful involvement of local people in the process.

• We have been kept informed by Surrey County Council over their plans to consult on substance misuse services and have helped promote the consultation.

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 daily. Some of the ways we have empowered people this quarter included:

- We have distributed over 2,000 information and advice leaflets and posters, signposting people to our telephone helpdesk, NHS complaints advocacy and to Citizens Advice services.
- We asked Kingston Advocacy Group to update their website as they no longer provide self- advocacy services but a google search would lead people to believe they did.
- We raised awareness of our report 'My GP journey' with 4 Valuing People's Groups in South East Surrey, North West Surrey, South West Surrey and Mid Surrey. This led to people with learning disabilities, their Carers and professionals gaining insight into the role of Healthwatch Surrey and sharing their experiences with us about their own GPs.
- Through our NHS advocacy service 51 new referrals were helped with NHS complaints. This included Anne* who was helped to make a complaint regarding her inpatient mental health treatment, satisfied with the response to her queries Anne had the confidence to concentrate on her recovery and be released from section. (See pg. 11 of the Q4 activity report for case study)
- Our Helpdesk handled over 100 calls helping people with information and advice to help them navigate the health and social care system.
- Through our Citizen Advice Healthwatch champions, we gave information and advice to over 700 people this quarter.

(See Q4 Activity report pg.10 for full details)

Projects



• Our recommendations from 'It's difficult to know what to ask' were adopted by the Epsom @Home service.

• The Epsom @Home service held a team meeting to discuss actions from the Epsom @Home report and have started including telephone calls to follow-up with patients and provide a method of feedback.

• National Institute for Health Research (NIHR) contacted HWSy to discuss visits to care homes and whether we would like information about their work.

• The 'It's difficult to know what to ask' report has been circulated by Royal Surrey County Hospital to GPs in Guildford and Waverley.

• The Big Chat workshop in January, in collaboration with Surrey Youth Focus, brought together 60+ professionals from local schools, Surrey & Borders Partnership, Surrey CC and VCFS representatives to discuss young people's mental health and creative ways to help young people to look after their own and others' mental health and wellbeing.

• The Practice Manager at Moathouse Surgery in Merstham ran a Disability Awareness Training for all staff and asked us to use the 'My GP Journey' video as part of the training. We have been invited to come along to the training to talk about the report and the recommendations.

• We had feedback from one of the Care Homes we visited;

"Many thanks for your visit to our home, both residents and staff expressed how much they enjoyed the visit. These visits give an opportunity to highlight areas that could be improved. Following on from the visit we now employ a new member of staff who works on Sunday, she eats lunch and socialises with residents, she then spends the afternoon chatting individually or partaking with activities" - Greys Residential Home

• We presented findings from 'It's difficult to know what to ask' to an audience of Non-Executive Directors and Lay Member representatives from amongst the organisations involved in the Surrey Heartlands STP.

• We presented findings from 'My GP Journey' to a Health Inequalities task group setup by Waverley Borough Council to investigate inequalities in the borough. We received the following feedback;

Projects



"Healthwatch Surrey was instrumental in providing a qualitative understanding about the patient experience in accessing GP services, including highlighting the issues within Primary Care that contribute to health inequalities in the Borough and in helping the Task Group make some valuable recommendations on the issues identified."