**Activity and outcomes quarterly report**

Quarter 1: April – June 2020

**What we do**

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

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.

**Highlights**

Here are some of our key highlights from Q1. This report details the activity associated with these key highlights and some of the key outcomes we have achieved for people in Surrey this quarter.

* People shared 1,271 health and social care experiences with us this quarter
* We have 46 Healthwatch Surrey volunteers. In total our dedicated volunteers gave 469 hours of their time this quarter.
* 516 people contacted us for information and advice through our Helpdesk, Citizens Advice and Advocacy services.
* We spoke to 106 people at virtual community, voluntary and faith sector group meetings about their experiences of health and social care.
* This quarter we provided information and advice on changes to health and care services during Covid-19. 133 people visited the page on our website and 815 people received our newsletter via email.
* 120 experiences were shared with us online and by post. In Q1 we had 1,851 new web visitors and 6,225 page views.

**Key dates and plans for the next three months**

**Healthwatch Surrey Board Meeting in Public**

The Board meeting on Tuesday 28th July, 10am- 1pm will be held via Zoom. Should you wish to join the meeting live then please email enquiries@ healthwatchsurrey.co.uk before Monday 27th July to receive the log in details. We will also be posting a recording of the meeting, that can be viewed after the event, on our website. As usual, any questions for the Board should be tabled in advance through the enquiries email address above.

Next meeting: Tuesday 3rd November 2020

Upper Hall, Trinity Centre Trinity Churchyard Guildford  
GU1 3RR

TBC  
All welcome

**Publications:**

In Q1 we published the following reports:

• COVID-19 survey report

• What do people want to happen next?

• May Insight Bulletin

• June Insight Bulletin

**Engagement events in Q2:**

During the next three months, our engagement team will be busy joining community group meetings across Surrey to hear your experiences of health and social care.

July:

* Focus group with MelaNoMore cancer patient support group
* Engagement with Blossom LGBTQ+ service users via text
* Focus group with mental health service users at Mary Frances Trust

August:

* Engagement with care home residents at CHD Living via Facebook portals
* Virtual workshop with vulnerable women from the BAME community who are service users at Liaise (tbc)

September

* Engagement with retirement community at Whiteley village in North West Surrey (tbc)

**Raising awareness of our work**

Webpage views: We had 6,225 web page views and 1,921 unique web visitors in Q1.

**Q1 Campaign Highlights**

This quarter we published the following reports:

* COVID-19 survey report
* What do people want to happen next?
* May Insight Bulletin
* June Insight Bulletin

Our campaigns were focused around these reports as well as, case studies during lockdown, call for experiences and our work plan during the Covid-19 pandemic. In addition, our other campaigns were focused around Ramadan at home; Quit for Covid; Volunteer’s Week; World Environment Day; Learning Disability Week; Surrey Against Domestic Abuse; Mental Health Awareness Week; Carers Week and Pride Month.

We have also been promoting our partners’ campaigns to make people aware of services in health and social care and the changes to these services during the pandemic.

These included:

* Surrey County Council’s Community Helpline
* Surrey Heartlands’ GP and hospital guidance and pregnancy advice line
* Safe Haven’s services
* Surrey GP and pharmacy Bank Holiday opening times
* Healthy Surrey’s Virtual Wellbeing Hub
* Community Pharmacy Surrey & Sussex’s prescription collection advice
* Surrey Wellbeing Partnership
* Surrey Community Action’s advice line for the gypsy and traveller community
* Surrey Information Point’s Community Helpline
* Central and North West London NHS Foundation Trust’s sexual health services in Surrey
* Children and Young People’s Haven (CYP Havens)
* Children and Family Health Surrey’s support and advice line
* Action for Carers’ Helpline
* Catalyst’s support line
* Surrey’s coronavirus testing hub
* Centre for Psychology’s CBT helpline
* Citizen’s Advice telephone and digital advice line

National campaigns we promoted included:

* Clap for Carers
* NHS 24/7 mental health support helpline
* Young Minds UK mental health support
* Stay Home, Save Lives
* Stay Alert, Save Lives
* Friends Against Scams
* Information on shielding, social distancing and isolating
* Face coverings at hospitals
* How to get an NHS dentist appointment during Covid-19
* Test and Trace
* NHS Volunteer Responders

We also published the Children’s Commissioner for England’s Children’s guide to coronavirus, news of Headley Court serving as a temporary community hospital for Surrey Heartlands, the launch of DadPad, a free online support app, and promoted Children and Young People’s Haven (CYP Havens) Hours Review survey to encourage the public to have their say on how services in Surrey are planned and run.

**Awareness initiatives**

Throughout Q1 we conducted presentations on Healthwatch Surrey’s engagement work at Bookham and Horsley Rotary Club, Reigate Rotary Club, Woking Soroptimists and Leatherhead Rotary Club.

We presented our Monthly Bulletin to the Carers Commissioning Group and shared our engagement strategy and insight reporting with:

* Surrey Heartland’s Engagement Team
* Surrey Learning Disability Partnership Board
* Royal Surrey County Hospital
* East Surrey Hospital
* Ashford and St Peter’s Hospitals
* CHD Living

**Healthwatch Surrey in the media**

In April and May, Healthwatch Surrey was included on Eagle Radio’s community help page and Jackie Radio’s local information page, web pages dedicated to organisations in Surrey providing support to the local community. We were also featured in the April edition of VantagePoint magazine, a free local magazine distributed to homes across Surrey. Our Maternity Voices Report was mentioned in the April edition of Surrey Safeguarding Children Partnership’s Newsletter and our Monthly Intelligence Report was mentioned in Surrey County Council’s Adult Social Care Briefing in June.

**Community Engagement**

Q1 should have seen the launch of our new community listening strategy, one that focuses on an in-depth approach by geographical area. However, due to Covid-19, all face to face engagement has been ‘paused’. The team have been busy looking at ways to creatively engage with our communities and are constantly revising key messages and call outs for evidence as lockdown progresses and the pandemic changes.

We also designed a flyer asking for experiences of accessing services during lockdown. This flyer was distributed amongst voluntary, community and faith sector (VCFS) groups in Surrey, and more specifically, directly to recipients of food parcels at five food banks: Epsom & Ewell, Hart, Godalming, Woking and Surrey Heath.

In June, we further created several bespoke flyers which we circulated amongst mental health, cancer, maternity, and faith groups. The flyers invited people to contact us with their experiences of how Covid-19 was affecting them in terms of accessing NHS care.

We were invited to join Action for Carers on their Zoom meeting in June, where we held a focus group that gave us some great insight into how the pandemic has impacted upon carers and their families, with changes to day centres and lack of face to face support.

As we move into the next quarter, we continue to look for opportunities to engage with service users and the general public, and also to work closely with our volunteers to hear about their findings on local people’s experiences of health and social care services. If you have a virtual group you’d like us to attend, please email: enquiries@healthwatchsurrey.co.uk.

An attendee from the Action for Carers event was unaware of the Virtual Safe Havens for mental health crisis. When we informed her of the service, she said her daughter would not join a virtual group without knowing anyone, so we enquired if she could join with her daughter for support. Richmond Fellowship looked into this and the service manager came back to us to inform us that she could, be relayed this information back to the attendee.

The following organisations shared and/or promoted our flyer on their websites and social media channels:

* PPA Academy
* Saxon schoo
* NCT Epsom
* Emerge Advocacy
* Crest Cancer
* MelaNoMore
* CofE Diocese of Guildford
* Voluntary Action South West Surrey (VASWS)
* Tandbridge Infants
* Action for Carers
* Valuing people partnership board
* Smart Cranleigh
* Liaise
* Frimley Gynae Cancer Support Group
* Look better, feel better
* Richmond Fellowship
* Safe Haven
* Busbridge Infant School

Signposting:

This quarter our engagement team recorded 106 experiences and signposted to Virtual Safe Havens and GPs.

**Catherine Malins has joined Healthwatch Surrey as Community Engagement and Outreach Officer:**

We are pleased to announce that on 11th May, Catherine Malins joined Healthwatch Surrey as Community Engagement and Outreach Officer.

Prior to joining Healthwatch Surrey, Catherine spent 5 years working at Epsom and St Helier Hospital as a Patient Experience Coordinator which gave her a good insight into the workings of the healthcare system and offered her an opportunity to use patient feedback to help improve services.

Catherine’s role as Community Engagement & Outreach Officer is to support the Community Engagement Lead with organising listening events and sharing people’s experiences of health and social care in Surrey with all the relevant stakeholders and partners.

Catherine also volunteers for a local mental health charity and a dog rescue charity.

**Citizen experience of accessing healthcare during the Covid-19 crisis**

In partnership with Surrey Heartlands, throughout June our Citizen Ambassadors investigated how Covid-19 affected access to healthcare and how help-seeking behaviours changed. They researched how lockdown affected lifestyles and impacted on mental and physical health, whilst also uncovering what news sources citizens used and what may help in a potential future pandemic. The Citizen Ambassadors conducted interviews via phone, video call or in a socially distanced way. A total of 24 interviews were conducted\*.

Some key findings about accessing healthcare:

* Some appointments that were postponed weren’t rescheduled, leaving it up to the patient to follow up.
* Any in-person appointments that took place during the crisis were carried out to a high standard, with appropriate safety measures (such as PPE) in place.
* Citizens responded well to a more digital approach to accessing healthcare, with many preferring it.
* Participants delayed seeking help during the crisis because: they have wanted to avoid healthcare settings where they may contract the virus, and worrying that the NHS is under too much strain already and not wanting to exacerbate that.

Some key findings about lifestyle changes:

* Many enjoyed the opportunity to spend more time at home while others found this lack of routine difficult to cope with.
* Many participants reported relying on technology to stay in touch with loved ones and to keep fit with easily-accessible, free online resources.
* There has been much more focus on mental health since lockdown started, which participants believe should become standard practice.
* Lockdown restrictions have driven a sense of community which people have enjoyed, taken pride in and relied on to create a sense of hope during lockdown.

Some key findings about government response to the crisis:

* The narrow criteria for shielding lists excluded people with chronic long-term conditions from receiving support.
* Citizens felt that the response should have been quicker and now are worrying that the easing is happening too quickly.
* Citizens want the learnings from this situation to contribute to building a strategy that will provide more effective care and support in case of a potential future crisis.

Some key recommendations based on participant feedback:

* Signpost and promote underused NHS resources and services such as 111, LIVI and the NHS website.
* Offer digital alternatives to in-person appointments as standard procedure.
* Partner with third sector organisations to fill gaps and alleviate pressure on healthcare services.
* Continue to emphasise the role of mental health in leading a healthy lifestyle.

\*The full report will be available on Surrey Heartlands website

Our project & outreach work

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 that we are able to have a positive effect on services on behalf of people in Surrey.

At the beginning of this quarter we were planning projects in two of our thematic priority areas.

- Care at home: understanding the potential impact of innovations in care delivery being considered by Surrey County Council as part of the development of new specifications for Domiciliary Care.

- Mental Health: progressing three potential project opportunities.

However, due to the Covid-19 pandemic, we put these plans on hold. Instead, we turned our attention to the immediate issues and conducted a survey about local people’s experiences of health and social care during the pandemic. We wanted to find out how the pandemic was affecting people in terms of communications over closure of services, appointments with GPs, treatment plans with acute hospitals etc. Overall, the survey was a success and the main findings were:

* 80% found it very easy or easy to stay informed
* 70% were very satisfied or satisfied with healthcare
* Online consultations and use of IT effective and convenient, especially for GP appointments
* Some efficient rebooking and short hospital wait times
* Information confusing or hard to access for a vulnerable minority
* Non-Covid information sometimes hard to access
* Attitude of stoic acceptance of reduced or cancelled services may stop people speaking out
* Cancellation of face-to-face health care and assessments
* Lack of communication and follow-up for cancelled treatments
* No access to treatment for worsening conditions
* Lack of information about what will happen next

One of our recommendations was immediately adopted and will guide providers who are managing services that have been paused during the crisis.

What do people want to happen next?

In June 2020, we conducted a snap poll with 46 Surrey residents on what their priorities were for service recovery, here are some of the findings.

What messages do people have for those making recovery happen?

* Thank you – “*I think that they are doing an excellent job and to keep up the good work*”
* Slow and steady rather than full speed ahead – “*To not open up services too early unless absolutely necessary*”
* Be kind, be considerate – “*Listen to patients and respond accordingly*”

What should future health and social care look like?

* More NHS funding and better access to services – “*More qualified physio, chiropodists, annual check-up, stem cell treatment, alternative treatment*”
* More digital services – “*Consultations through video or messaging apps such as what’s app*”
* Restoring previous services – “*Ensuring resources are not removed for some fields of healthcare*”

What have people done to look after themselves during lockdown?

* Two out of three respondents said they had taken steps to look after themselves. There was slightly more focus on mental wellbeing than physical health although for many the two went hand in hand
* “*Try not to drink too much alcohol, can affect mental health*”
* “*I have tried to practice mindfulness, eating healthy and exercising to keep myself in check*”

Alongside the survey and poll, we also reviewed our approach to the development and selection of thematic priorities in the future. We are now working with Surrey County Council to plan a project under Care at Home, and revisiting project opportunities under our Mental Health priority.

**Acting on what we hear**

People shared 1,271 health and social care experiences with us. The experiences we receive come from a variety of sources. During Q1 we received 448 experiences from our Listening Events, 463 experiences from Citizens Advice, 227 experiences via our Helpdesk, 120 experiences via the website/ post and 12 experiences from Independent Health Complaints Advocacy.

One of Healthwatch Surrey’s most valuable assets is our Intelligence – the knowledge we gather from the constant stream of experiences, networking, contacts, meetings, and reports that we receive.

To improve the flow of that Intelligence across the team, and as a response to the speed of change triggered by the pandemic, our Intelligence Officers initiated weekly intelligence reports. These reports capture what we are currently hearing, highlighting themes or emerging issues, and the reports are shared across the whole team. As the months have passed, the timing and frequency of reporting has settled to a detailed fortnightly report and monthly synopsis. The reports have proved invaluable, giving all staff access to our intelligence, and supporting decision making in Escalation Panels, surveys, and our contribution to external forums.

The Intelligence Reports have also given rise to our Insight bulletins, which we share publicly with our system partners. The bulletins bring to life people’s challenges or illustrate emerging themes. The system’s response to the bulletins has been very positive and we are aware they have been widely shared.

**What we’ve been sharing**

Sharing our stories:

We shared 71 experiences this quarter with commissioners, service providers, regulators, CQC and Healthwatch England. 150 experiences contributed to the monthly insight bulletin.

Escalations:

Through the work of the escalations panel we escalated 8 individual issues this quarter to providers commissioners and the CQC.

We have been working hard to put the patient’s voice at the heart of services, we have shared  
our survey findings which resulted in our commissioners commenting, “*Thank you for sharing the Healthwatch Surrey Pandemic survey report. Lots to think about for the future. A very important set of evidence to guide our work as a County Council and across the wider partnerships*.”

Surrey Heartlands Primary Care team have shared the bulletin with all of the GP practices in Guildford and Waverley, Northwest Surrey, Surrey Downs and East Surrey, “*we will share this bulletin in our primary care bulletin which goes out to all GP practices in Surrey as I think there is some good common learning in it for all of us*” - Dr Canniff Clinical Chair of Surrey Heartlands Clinical Commissioning Group. Dr Canniff also commented on the views in the bulletin about GPs as, “*both a positive reflection [on the hard work of GPs] but also a reminder of the hard to reach out there and the need for ongoing communications about why and how services have changed*”. Those who commission services would like to hear more: “*The feedback on GP is positive and I hope that we  
can build on this with you as we start to look at gaining more stakeholder feedback*” - Nikki Mallinder Associate Director of Primary care.

Our local Hospitals have also been acting on what they’ve heard. The bulletin has been shared with Ashford St Peters, Epsom St Helier, Royal Surrey County Hospital and East Surrey Hospital. The East Surrey Hospital patient experience team have picked out themes from the bulletin for discussion within the Hospital and will in particular, “*look into the issue around lack of communication once appointments have been cancelled to see what our approach has been and if there is any work we need to do around it*” [East Surrey Hospital].

During May, we heard of a small number of experiences relating to decisions around resuscitation. The stories, along with the interviews we carried out in our report, “Planning Ahead: care home residents’ experiences of advance care planning”, highlighted three key things to watch out for when discussing “DNAR” (do not attempt resuscitation) with people. The pandemic has seen an unprecedented need for people to make decisions about their future healthcare and resuscitation, and there will be many good lessons learned about how to ensure decisions are properly informed, truly consensual, and empowering. We do need to ensure that when time is short the basic principles of good practice still apply. We shared our concerns with the Surrey Heartlands End of Life team and Acute providers and have escalated one detailed experience to an

Acute provider, who has acted on what we’ve heard: by using the real life example Healthwatch Surrey shared with them to improve good practice among frontline staff.

We escalated concerns to the Head of Safeguarding regarding the procedures in place for safeguarding enquiries at a local care home and heard that, “*Our priority going forward is in working with people throughout the adult safeguarding process to gauge how involved they want to be and making that work for them, and making good decisions case-by-case about how to do this. These are both areas where teams have put a lot of work in, and a lot of improvement has been made, and where we are now in the phase of consolidating those improvements.” Healthwatch Surrey were also given assurances around the monitoring process for improv*ements.

We continue to meet virtually with commissioners and providers as part of our ‘What we’ve heard’ meeting series to share Surrey residents’ feedback.

**Information, signposting and advice**

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 support if people want to share their experience or make a complaint.

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

**Advice on receiving additional care and funding**

Leo\* contacted us as his father’s care needs had increased. His parents were living independently in their own  
home and had a carer who visited each morning. His mother was the main carer for his father, but after an accident it was evident that they required more care. Leo was worried about arranging this and about how it would be paid for. We suggested contacting Surrey County Council Adult Social care and explained the options for financing care. We were also able to advise on the possibility

of his parents claiming Attendance Allowance and on Powers of Attorney. With this information, Leo contacted Surrey County Council Adult Social care and found them to be very helpful, both in arranging care and arranging the funding for the care. As a result, his parents have been able to continue living in their home and he reported that his mother was less worried now.

**Information on free transport to hospital**

Connie’s\* partner is receiving regular medical treatment for cancer and she wanted to know if they could get free transport to hospital appointments. They have been using hospital transport, but it often takes all day, and this  
is detrimental to her partner’s health. Connie and her partner both receive benefits and have also built up a debt paying for alternative transport costs. The NHS healthcare travel cost scheme was explained to her which may allow them to claim the cost of the taxis.

They could claim back travel costs incurred for the last 3 months if they can supply the receipts. The NHS Volunteer responder scheme was also explained, whereby volunteers in

the local community will drive patients to hospital appointments, when referred by their GP. Connie is now aware of how to claim back travel costs and how to access free travel in the future.

**Assistance with a maternity care complaint**

Marian\* wished to have assistance with a complaint regarding her maternity care at a Surrey hospital. She was advised about the complaints procedure and informed that the Covid-19 pandemic meant that there was currently a hold on processing complaints by the Ombudsman. Medical negligence was discussed, and she was advised to get an opinion from a solicitor. Marian was also told about our Advocacy service and how she could get support from them with NHS complaints.

**Support with food deliveries during Covid-19**

Natalie\* who was living in Glasgow sought assistance from Citizens Advice in Addlestone, concerned about her elderly father who lives alone in Virginia Water, Surrey. He was isolated and had been trying to get help with food deliveries as the Covid-19 lockdown came into effect in March 2020. Citizens Advice contacted the Runnymede Borough Council Welfare Cell which liaises with local help groups and were advised with the contact details of a newly formed Covid-19 Response Team which covered her father’s area. Citizens Advice got back to her in Scotland with this information and she said she would immediately contact the Virginia Water Covid-19 Response Team for her father to receive regular food deliveries.

**Advice on dental charges**

Katja\* contacted our Helpdesk because she wanted advice on how to query the charges she received from her dentist. Having had a baby in the last 6 months and being in receipt of benefits, she visited her NHS dentist and was charged for both PPE and the resulting filling. She wanted to query if this was correct. Katja was advised about what she is entitled to free of charge under the NHS and the evidence required to prove this. She was also advised about the NHS low income scheme and now knows her rights regarding dental charges.

**Information on how to make a complaint**

Iain’s\* aunt had a heart attack and was taken to a hospital A&E department. She was discharged two days later but when Iain went to collect her, she was expressing symptoms of delirium. Iain spoke to the nurse about the state of his aunt but was informed it was probably due to the ‘contrasting agent’. She had always lived alone but Iain felt he should stay with her as she was very weak, had difficulty getting up from chairs or out of bed and was extremely tired. A few days after discharge Iain decided to call NHS 111 as he was concerned as to why his aunt was so tired all the time. The dispatcher spoke to his aunt and decided, as she appeared to be short of breath, they would send paramedics. Paramedics arrived within 15-20 minutes and they almost immediately suspected a low heart rate and said that it was due to one of the drugs given after the heart attack. His aunt was taken back to A&E for the night and discharged the following day with corrected medication. Iain believes his aunt should not have been discharged until the hospital was sure that the medication was correct or at least alerted him to keep an eye out. Iain was provided with advice around the complaints procedure and given the Healthwatch ‘How to Complain leaflet’ and will now consider his options.

*\*Names have been changed to protect identities*

**We help and support with NHS complaints**

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

Case study:

Samira\* was admitted to hospital with pneumonia. She also suffers from extreme anxiety, OCD, and a fear of hospitals. For this reason, family members stayed with Samira throughout the day. Her daughter helped with all aspects of her personal care and provided reassurance to Samira. Samira is independent and very private when it comes to personal care. In view of this, her daughter made sure all hospital staff on the ward aware of her wishes, that she did not want to be treated by male nurses, just female nurses. The hospital agreed and her daughter built up trust with the staff who also agreed to call her if Samira became anxious or worried.

However, when Samira had an accident and two male nurses came to her bedside. Samira asked for a female nurse, or for them to call her daughter, as she did not want the male nurses to carry out the intimate personal care needed, however they said no female nurses were available and continued with the personal care. When her daughter arrived on the Ward that morning Samira was anxious and traumatised by the whole experience. Her daughter reported the incident to the Ward Sister, who said she would talk to the two male nurses. The staff agreed that this should not have happened and one of the male nurses apologised to Samira’s daughter. Later that day Samira’s daughter discharged Samira from the hospital, for her well-being, and because she could no longer trust the staff to respect her mother’s dignity and wishes.

Since the incident Samira has been experiencing post-traumatic stress disorder symptoms. Samira’s daughter filed a complaint with the hospital via our Advocacy support service. Her Advocate has been monitoring the response from the provider, keeping Samira’s daughter updated, especially during the Covid-19 pandemic which has caused some delays in complaint handling and letters have been exchanged between the parties.

The hospital apologised for not meeting expectations and for the distress caused. They acknowledge that the incident was distressing and profoundly affected Samira and her daughter. They considered the incident a matter of urgency and with no female nurses available that morning, male nurses attended to Samira. They refer to this as a clinical judgement call and with Samira’s best interest in mind as well as health and safety concerns. Samira’s daughter is unhappy with the response and intends to reply but currently Samira is back in hospital and her daughter is unable to visit due to the Covid-19 situation. It is a very worrying time so she will revisit the complaint once things have settled.

Due to the Covid-19 pandemic, complaints investigations were either delayed or suspended. Providers across Surrey are now accepting new NHS complaints but there may still be delays in investigations. On 26th March, the Parliamentary and Health Service Ombudsman (PHSO) paused their work on NHS complaints but after careful consideration decided to restart this work on 1st July 2020. Further information can be found on the Parliamentary and Health Service Ombudsman website: https://www.ombudsman.org.uk/making-complaint. During the last quarter we have continued to support clients with their complaints by phone, email and online meetings, including attending online local resolution meetings (LRMs).

In Q1 there have been:

* 28 people contacting the Advocacy service for information and advice
* 67 people supported through the complaint process
* 7 New referrals

There has been a significant decrease in the number of NHS complaints our Advocacy service has provided help and support with compared to Q4, as during the Covid-19 pandemic we have seen a reduction in hospital and GP visits for non-Covid related conditions.

Advocacy provider:

Our advocacy service is provided by Surrey Independent Living Council (SILC).

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

**Our volunteers**

“Our volunteers gave 496 hours of their time”

Despite the Covid-19 lockdown restrictions, five new volunteers joined us in Q1. Our local area volunteer groups continued to meet regularly using the video conferencing app Zoom and continued to support us at virtual stakeholder meetings, community engagements and with desk-based research tasks from home.

Our volunteers have played a central role in sharing with their community and professional contacts our Covid-19 survey and flyers calling for experiences. They’ve been monitoring local community groups on Facebook, to monitor what people are saying about local health

and social care services and have fed this information back to our Intelligence Officers. Key intelligence they have sent us includes; concerns about Covid-19 testing, cancer care and access to GP surgeries. This has been fed back to clinical commissioners and providers.

They have helped us to map Covid-19 community support groups who are providing support to shielding and vulnerable people in their area. They have also helped us to identify local groups who are continuing to meet on Zoom with whom we can engage with to hear their experiences. For example, our volunteers have connected us with carers support groups, veterans’ groups, faith groups and learning disabilities family support groups, who have welcomed us to their meetings, shared our flyers and shared their experiences with us.

Our Community Influencer volunteers have attended virtual stakeholder and system meetings where these have been held online, to share what we’ve been hearing from Surrey residents, and to represent us in our ‘critical friend’ role. They have represented us at:

* The Better Care Together Stakeholder Reference Group for Urgent Care in Guildford and Waverley
* Surrey Learning Disabilities Partnership Board
* Voluntary Action South West Surrey Mental Health Network Forum (where we shared our flyer).
* Tandridge Health and Wellbeing Board

Our Community Influencers have also supported us by reading papers and helping us to prepare for significant meetings attended by our CEO and Intelligence Officers, including our regular feedback meeting with SECAmb, and for the Improving Healthcare Together programme. Those Community Influencers with clinical expertise have supported us with reviewing particularly concerning experiences received from Surrey residents (helping us to identify what the correct procedure/course of action should have been, and where these have not been followed). This will support the work of our Escalations Panel who have continued to meet virtually during lockdown.

**GP surgery websites:**

We tasked our volunteers with visiting the websites of every GP surgery in Surrey to find out:

* Whether the practice was open, and what advice there was for patients about booking and attending appointments at the surgery.
* What the system for triaging was, and whether the website made this clear.
* What advice they gave about obtaining and collecting prescriptions.
* Whether the website had an area/ webpage dedicated to Covid-19 information and advice.

17 volunteers from across our five volunteer groups supported us with this task. Alice, a Community Influencer from our Guildford and Waverley volunteer group has supported our Intelligence Officer Katharine Newman with undertaking the analysis of this research. Katharine will be presenting the findings with the Primary Care Commissioning Committee at the start of Q2.

**Meet our new volunteers:**

Meet Robert - Community Influencer, Surrey Downs

* Robert, now retired, spent his professional life in public service, making health policy as an advisor to the Prime Minister’s policy unit and working as a Senior Manager at the Audit Commission. He also served as a Borough Councillor for eight years.
* Robert was a volunteer visitor at Long Grove Hospital and then West Park Psychiatric Hospital in Epsom for 30 years. He also has lived experience of navigating the health and social care system as a Carer.

Meet Elaine - Community Listener, Surrey Downs

* Elaine has a post graduate certificate in Public Health and Health Promotion from Brunel University, London. She works as part of a multidisciplinary team to deliver care to critically ill patients and those with complex needs.
* She is passionate about people and connecting with the local community and is looking forward to volunteering with Healthwatch Surrey to utilise her skills while also gaining experience of involving the patient voice in service development and change.

Meet Beth - Community Promoter, North West Surrey

* Originally from Byfleet, Beth is an undergraduate Sports and Exercise Science student at Loughborough University. She plans to use her holidays and free time when at home in Surrey to volunteer for Healthwatch.
* Beth has previously volunteered for East African Playgrounds, and Parkrun. She wants to help people in her local community to receive the best care they can and is looking forward to getting started as a volunteer.

**Contact Us**

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Text/SMS: 07592 787533

Text Relay: 18001 0303 303 0023

Email: enquiries@ healthwatchsurrey.co.uk

Pop into any of the Citizens Advice in Surrey

healthwatchsurrey.co.uk

Twitter: @HW\_Surrey

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