

To: Healthwatch Surrey Board

From: Kate Scribbins, CEO

Date: April 2021

CEO's report April 2021

Highlights of the last quarter (Q4: January to March 2021)

Highlights

Some of our Young Healthwatch volunteers with lived experience of mental health services have been contributing to the Young Adult Reference Group for the Young Adults (18-25) Community Mental Health Transformation Programme, contributing to a co-design approach and ensuring that the voice of young adults is heard. One of our volunteers spoke powerfully of her experience of services at the Adults and Health Select Committee (where our elected members oversee the performance of our local system). Other mental health and wellbeing services have now approached the Young Adult Reference Group to seek the views of young adults using services.

We have continued to hear lots of feedback about the vaccination programme in Surrey, and the vast majority has been overwhelmingly positive. People are full of praise for the way it has been organised. We were able to share this feedback with our Adults and Health Scrutiny Committee.

We have helped to improve access to vaccine appointments for people who were receiving links on phones which were not smartphones, so they could not click on the link. We raised this with people in charge of the vaccination process who took action to make sure people had a choice of ways to book.

Our recent survey of people waiting for the second vaccination, to find out what information they needed to address and allay concerns, led to various additions to FAQs on NHS partner websites.

We initiated a discussion at the Surrey-wide committee which discusses ethical issues across our health and care system on the ethical issues around visiting in care homes, prompted by the concerns local people had shared with Healthwatch. As most care homes are private business, there are limits to what they can be mandated to do, however all are required to ensure that decisions are individualised and person-centred and must take resident and family views into account. Our intervention ensured that the issues were aired, and residents and families were front and centre of the discussion.

We've amplified the voices of a number of people who've told us that they've not been able to get temporary registration with GPs for people visiting who need access to the vaccination. This goes against NHS guidance and we're working with system partners to address this.

People continue to share their frustrations in trying to access dentists. We met the Local Dental Committee and shared these concerns, and heard the perspective from the practitioners' point of view. We felt there was a lack of clarity about whether local people are "registered" with a dentist; the fact that dentists can take you off their lists if you do not go for check-ups (as our case study on p13 of the Quarterly Report illustrates); inconsistency about access to check-ups; and what constitutes "urgent" need for care.

Despite the challenging year we have had, we have met all our annual KPI targets with the exception of Advocacy new referrals. We are continuing to monitor this and plan focussed communications to promote the service during Q1. We are particularly pleased that we have managed to gather over 5,000 experiences from Surrey residents and our volunteers have contributed over 2,300 hours, despite the fact restrictions have meant we have had to do all this work remotely. We have also achieved over double the number of outcomes and project reports set out in the annual KPIs.

Challenges

As our local system develops, "Integrated Care Partnerships" are becoming increasingly important as the place that local decisions are made about health and care. We have 5 of these in our Surrey system. Each ICP contains a number of "Primary Care Networks" which are groupings of GP practices working together. It is important that Healthwatch is involved to help amplify the voices of local people both at this level, and where decisions are made on a Surrey-wide level. As a small team supported by volunteers, Healthwatch Surrey will only be able to cover this by building active volunteer groups at ICP level. Balancing our resource between ICP and system-wide, and feeding into the Frimley and Surrey Heartlands systems, remains our biggest challenge.

As the pandemic has worn on, we've found that people have become increasingly fatigued and disenchanted with remote meetings. We have joined many groups via Zoom and built some great relationships with groups such as Action for Carers and Mary Frances Trust, however this cannot replace the insight we used to pick up on local services which people used to share with us when we had a stand in hospital receptions, or on the high street. Many of our volunteers really miss this activity. We look forward to getting back to face-to-face engagement as soon as it's safe and possible to do so.

The top risks for our organisation relate to the effects of the pandemic and lockdowns on the morale and cohesion of staff and volunteers, and on our ability to recruit more volunteers at Board Director and volunteer group level, to help us fulfil our broad remit, and ensure that, as our NHS architecture changes, we are being effective in speaking up on behalf of local people and users of services. This is a challenge, but one that we are looking forward to cracking on with once we can get back to some face-to-face activity.

Finances

Healthwatch Surrey CIC – Budget and Expenditure Q4 as of 31st March 2021

SCC HEALTHWATCH CONTRACT	2020/21
-	
Expenditure	
Staffing Costs	£312,117
Direct Delivery Costs	£32,549
CIC Costs	£38,034
Signposting	£46,470
Health Complaints Advocacy	£97,160
Help Desk	£14,600
Total	£540,930

Income £601,282

BALANCE £60,352

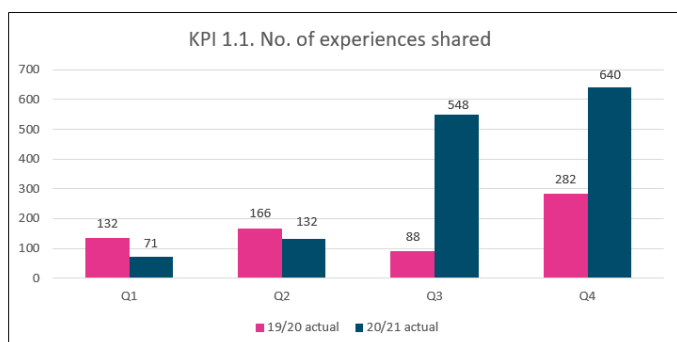
Commentary:

2020/21 was a year when, due to the pandemic, we were unable to carry out activities as originally planned across our project work, communications campaigns, and Community Cash Fund. As we begin to come out of lockdown in the months ahead, we plan to increase our activity significantly in these areas, using the funds which were not spent in 2020/21, to raise awareness of Healthwatch Surrey's services (including information, advice and NHS Advocacy), which will be vital to people dealing with the impact of Covid-19, to catch up with project work and the Community Cash Fund.

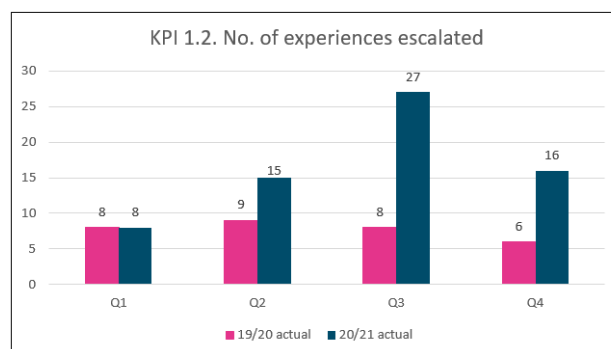
KPIs

Link to mission/vision	KPI No.		Lead	19/20 figure	Q1	Q2	Q3	Q4	Cumulative total to date
1. Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.	KPI 1.1.	The number of experiences we have shared	KE/KN	668	71	132	548	640	1391
	KPI 1.2	The number of experiences we have escalated	KE/KN	31	8	15	27	16	66
	KPI 1.3.	The proportion of reasonable responses received to escalations (80%)	KE/KN	n/a	n/a	n/a	n/a	n/a	0
	KPI 1.4.	Reflective Review - number of responses received and satisfaction levels	LS	Annual figure - reported elsewhere					
2. Healthwatch Surrey's role, function and services are known, understood and valued by consumers and therefore they readily contact us.	KPI 2.1.	The number of people proactively engaging and sharing experiences with us via the website, post, Helpdesk	LS	1557	347	530	337	556	1770
	KPI 2.2.	The number of people contacting the Helpdesk for information and advice (400 PA)	LS	503	87	161	106	193	547
	KPI 2.3.	The number of people accessing the Independent Health Complaints Advocacy service	LS	242	28	41	23	53	145
	KPI 2.4.	The number of new cases managed by the Independent Health Complaints Advocacy service (30 per quarter)	LS	103	7	16	9	16	48
	KPI 2.5.	Service user satisfaction with the Helpdesk and Independent Health Complaints Advocacy service	LS	Annual figure - reported elsewhere					
3. Our influencing is based on sound evidence, knowledge and insight	KPI 3.1.	The number of Useable Experiences collected (3,000 PA)	SBr	5792	1271	1462	980	1365	5078
	KPI 3.2.	The number of outcomes achieved (4 PA min)	KS	n/a	1	1	2	5	9
	KPI 3.3.	Project and outreach reports (4 PA min)	TW	11	4	3	4	4	15
4. As a social enterprise we have secured a growing and sustainable future	KPI 4.1.	Amount of new business turnover (Target 60,000)	LS	69,742	14,468	14,468	23,218	16,959	69113
5. We exist to empower communities and we do this by recruiting and empowering volunteers to enable us to hear more and share more.	KPI 5.1.	The number of hours our volunteers have contributed	ZH	2436	469	584	649	693	2395
	KPI 5.2.	The number of new volunteers per quarter (5 PQ)	ZH	n/a	5	5	5	4	19

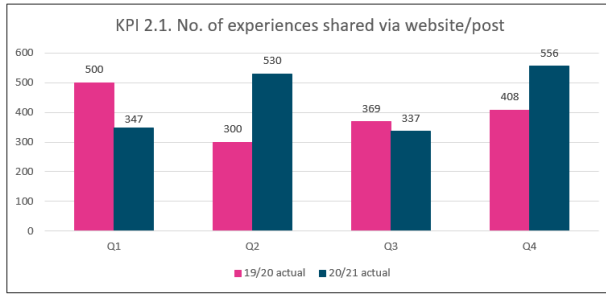
Appendix one: KPI graphs



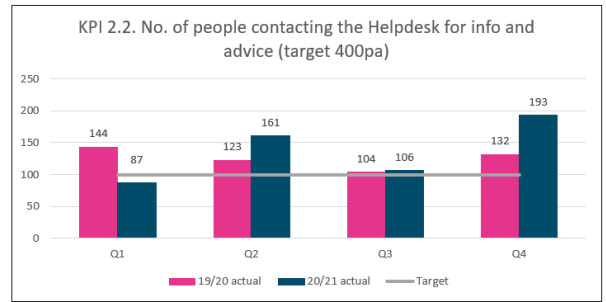
exp.shared	Q1	Q2	Q3	Q4	Total
19/20 actual	132	166	88	282	668
20/21 actual	71	132	548	640	1391



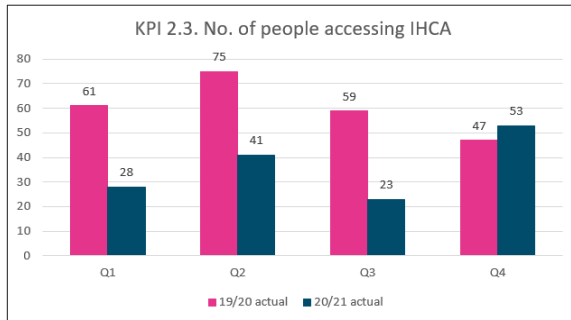
exp. escalated	Q1	Q2	Q3	Q4	Total
19/20 actual	8	9	8	6	31
20/21 actual	8	15	27	16	66



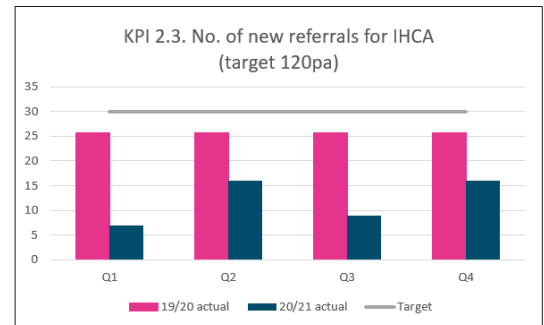
exp.website/post	Q1	Q2	Q3	Q4	Total
19/20 actual	500	300	369	408	1557
20/21 actual	347	530	337	556	1770



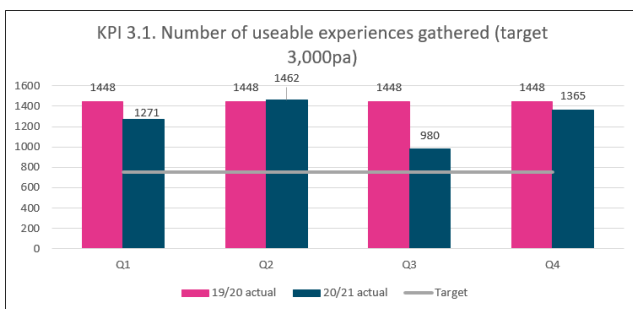
Helpdesk contacts	Q1	Q2	Q3	Q4	Total
19/20 actual	144	123	104	132	503
20/21 actual	87	161	106	193	547
Target	100	100	100	100	400



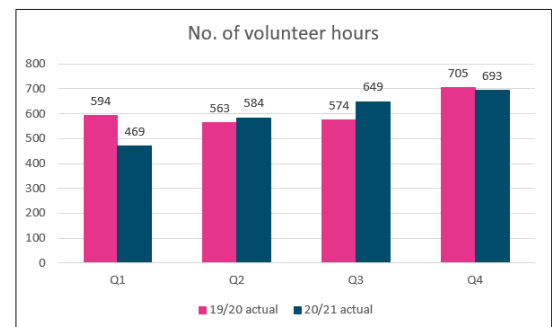
IHCA access	Q1	Q2	Q3	Q4	Total
19/20 actual	61	75	59	47	242
20/21 actual	28	41	23	53	145



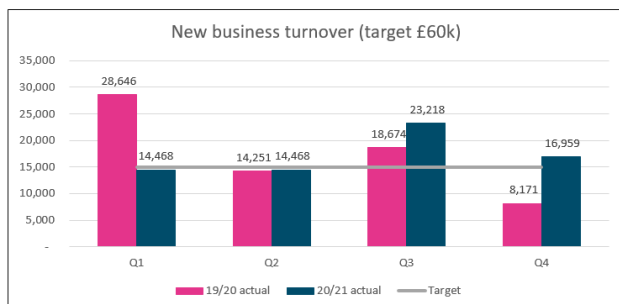
IHCA referrals	Q1	Q2	Q3	Q4	Total
19/20 actual	25.75	25.75	25.75	25.75	103
20/21 actual	7	16	9	16	48
Target	30	30	30	30	120



No. of useable exp	Q1	Q2	Q3	Q4	Total
19/20 actual	1448	1448	1448	1448	5792
20/21 actual	1271	1462	980	1365	5078
Target	750	750	750	750	3000



No. volunteer hrs	Q1	Q2	Q3	Q4	Total
19/20 actual	594	563	574	705	2436
20/21 actual	469	584	649	693	2395



New business turnover	Q1	Q2	Q3	Q4	Total
19/20 actual	28,646	14,251	18,674	8,171	69,742
20/21 actual	14,468	14,468	23,218	16,959	69,113
Target	15,000	15,000	15,000	15,000	60,000