

From: Kate Scribbins

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### FINAL DRAFT Healthwatch Surrey workplan 2021/22

***Note: This workplan is subject to restrictions placed on our ability to carry out our work due to Covid-19 measures, and is therefore subject to change and review with our commissioners. We will keep this workplan under regular review.***

#### CONTEXT

This workplan needs to be seen against a context of significant uncertainty on the following fronts:

1. The impact of Covid in various ways:
  - the mass vaccinations programme
  - knock on effects and delays to most other health services
  - the spotlight on differential impact on different communities and health inequalities
  - increase in demand, particularly for mental health services
  - reluctance of some to engage with NHS services
  - the impact on public views about the NHS and social care – stoicism and reluctance to complain amongst some citizens
  - potential tsunami of feedback and complaints in due course.
2. Changing architecture of Surrey system as ICS, ICPs and PCNs develop, and integrated commissioning rolls out.
3. Changing architecture nationally as government White Paper proposals for ICSs develop.

We have developed agile ways of working over the last year, and adapted our priorities to enable us to gather and feed back insight from the public in a timely fashion to inform fast-moving work programmes. We will continue to do this, and to seek to add value based on our unique independent and public-focussed perspective.

Many of the areas of focus in this workplan remain the same as the previous year. However our approach to gathering insight has shifted, with a move towards quality rather than quantity, and gathering stories that can make a big impact in our priority areas, rather than hearing from users of all health and care services in Surrey. Our focus on developing relationships with Primary Care Networks as well as ICPs has also intensified this year. All of this is underpinned by our reliance on active local volunteer groups and this, alongside building our sustainability, are our highest priorities for the year ahead.

## **Our Mission**

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

## **Vision statements and goals**

Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.

Goal: To have the relationships, people and organisational structure in place that enable us to be trusted by all of our stakeholders, collect the consumer voice and feed it back to the relevant parts of the system. We will be persistent in seeking outcomes and measuring our impact.

Healthwatch Surrey's role, function and services are known, understood and valued by local people who therefore readily contact us when they need us.

Goal: To have a simple, widely understood identity and mission and ensure that at the time when people may benefit from contacting (or have stories to tell) Healthwatch Surrey, they know who we are and what we do, can find and interact with us easily and, where appropriate, do share their need and/or stories with us.

Our influencing is based on sound knowledge of local issues and the insight and experiences of local people.

Goal: To gather feedback from a wide range of communities across Surrey, ensuring that we actively seek out insight from seldom heard or hard to reach groups. To have a tenacious and curious approach to ensure we make best use of this feedback in influencing change.

We have secured a growing and sustainable future.

Goal: To secure additional sources of income by offering services that are complementary to those of our main Healthwatch contract.

We exist to empower communities and we do this by recruiting and empowering volunteers to enable us to hear more and share more.

Goal: To have volunteers organised in all our local areas who are able to help us understand local communities, hear more experiences from local people, and influence change on behalf of local people according to Healthwatch principles.

In order to deliver on this mission and vision, we have a number of strategic priorities for 2021/22:

### **1. Thriving**

- 1.1. Continue to deliver excellent service under our Healthwatch contract, whilst adapting to a reduction in core funding
- 1.2. Ensure we are agile and responsive and reach out to system partners to understand what is valuable to them as well as maintaining our independent priorities and challenge
- 1.3. Be a respected and valued critical friend to engagement and involvement across Surrey
- 1.4. Champion public involvement in system architecture as it evolves

- 1.5. Be known and respected for our expertise in engagement and reach into communities
- 1.6. Have active volunteer groups in all areas and maximise the contribution made by our volunteers
- 1.7. Build new business to enable us to thrive as a CIC (NB this Workplan should be read in conjunction with our New Business Strategy)
- 1.8. Rebuild better – taking what’s worked well from new ways of working

## 2. Hearing more

- 2.1. Continue the focus of our Community Engagement Strategy to ensure that we build on our knowledge of health inequalities to focus our resources on reaching out to those at risk of inequalities and who are harder to reach/less well heard
- 2.2. Continue our Community Engagement strategy of focussing on each ICP area in turn to ensure we have sufficient insight to develop ICP relationships
- 2.3. Build our relationships with Primary Care Networks to better understand how we can collaborate with them to hear more
- 2.4. Return to Listening Tour when safe to do so to carry on with agenda-free listening
- 2.5. Focus on depth and quality of stories shared with us, and permission to share/re-contact, rather than breadth/coverage of all NHS, social care and public health services
- 2.6. Build and support volunteer involvement in engagement to enable us to hear more from local people (Community Listeners)
- 2.7. Volunteers actively involved in all areas in engaging with local groups and direct with people
- 2.8. More people coming to us proactively to share experiences as a result of higher profile
- 2.9. System partners doing more to actively promote us (e.g. signposting to us in appointment letters and clearly on their websites)
- 2.10. Strengthen “offer” to VCFS organisations and relationships so that we can hear more from them and help amplify issues

## 3. Sharing more

- 3.1. Be agile and relevant in our reporting
- 3.2. Empower and support more local people to be involved in local services by increasing volunteer involvement with system engagement and transformation (Community Influencers)
- 3.3. Ensure we are at the right places, both at place and Surrey-wide, to have influence both to share insight and to be a critical friend to engagement
- 3.4. Ensure our insight is as influential as possible when we share it
- 3.5. Volunteers actively engaged in all areas at PCN and ICP level in helping us share insight, network with those involved in engagement, and promote public involvement
- 3.6. Maximise our use of work done by Healthwatch England and make best use of it within our local system
- 3.7. Develop further our relationships and proposition with VCFS organisations to ensure we understand respective roles and remits and collaborate effectively without duplication (links to 2.9)
- 3.8. Ensure maximum influence by being selective about which boards/committees we attend; have clear and consistent rationale for attendance.

## What will good look like at the end of 2021/22?

1. New Business Strategy embedded and making good progress against milestones
2. Citizen Ambassador programme getting outcomes, positive feedback and agreement to renew
3. Vol groups well established, good numbers, with Chairs
4. Vol groups with clear set of tasks, local workplans, and being proactive in building relationships for hearing more and sharing more
5. Regular meetings with all ICPs for a) sharing insight and b) being critical friend to engagement
6. Clear strategy and milestones in place for developing relationships with PCNs, volunteer groups involved with clear plans and tasks
7. Good relationships with all providers with clear escalation routes and getting reasonable responses to CONCs
8. Sharing insight at place and Surrey-wide level
9. Team of volunteer Community Influencers who feel confident being critical friend to engagement plans
10. System partners doing more to actively promote us (e.g. appointment letters)
11. More people proactively contacting us as a result of higher profile and more targeted comms and system partners more actively promoting HWSy
12. More referrals to our NHS complaints advocacy service
13. Regularly asked by significant oversight cttees to contribute insight (e.g. Select Cttee; QPB etc)
14. Regularly asked to sit on groups as a critical friend but clear process for decision-making/prioritisation and clear articulation of HW role
15. Good overview of all key transformation and reprocurement plans across Surrey, access to engagement plans, able to challenge engagement plans at an early stage leading to more inclusive involvement.
16. Strong links with VCFS orgs who overlap with our priority areas with a clear two-way understanding of benefits of collaboration
17. Clear evidence of more empowerment of local people to be involved in design, commissioning and delivery of local services.

## Appendix 1

### Key operational priorities for 2021/22:

- Agreed plans and timeframes for actions around diversity, linked to Board effectiveness and culture and value work across Board/Team/vols
- Maximise contribution of volunteers and maturity of Volunteer Groups
- Keep building relationships with Trusts
- Keep pursuing CONCs and reasonable responses, based on revision of definition of reasonable response from evaluation of Yr 1
- Build relationships with ICPs and build ICP lead roles in team and link with Vol Groups - also relationships with PCNs
- Build on new relationships with children's services
- New website
- New stakeholder management database
- Develop use of case studies and videos
- System partners to promote us more effectively
- Drive traffic to Helpdesk and Advocacy
- Maximise links between engagement, comms and sharing of insight
- Maximise experiences (eg ensure consent is as robust as possible and we can go back to people for video etc)
- Retain agility about project work
- Ensure projects and outreach are working closely together
- Improve demographic info and keep under review who/where/what we are hearing about so that we can direct our resources to those we are not hearing from
- Ensuring we adapt engagement to hear from those newly at risk, or vulnerable as a result of the pandemic
- Continue to keep under review how we can use our Enter and View powers to ensure we reach people "behind closed doors" who might not otherwise be able to contact us via our Listening Tour activity
- Ensuring we have good arrangements in place to harness the intelligence and feedback gathered by our volunteers and maintain excellent communication with them
- Ensuring we capture, code, store and analyse our stories in a way that maximises their potential
- Continuing to review how we share our insight (what and how we share and who with) to ensure we use our insight as effectively as possible. As a key part of this to review how we use individual stories for maximum impact

## Appendix 2: KPIs and SPIs

### KPIs

As overall KPIs under our core contract we will measure and report on (NB these are our own generated KPIs, and in some areas go way beyond the KPIs in our LHW contract with SCC - where we have a target under SCC contract this is noted below):

KPI		Contract target?
1.1	The number of experiences we have escalated	
1.2	The proportion of REASONABLE RESPONSES received to escalations	
1.3	Reflective Review - number of responses received and satisfaction levels	
2.1	The number of people proactively engaging and sharing experiences with us via the website, post, Helpdesk	
2.2	The number of people contacting the Helpdesk for information and advice	400 PA
2.3	The number of people accessing the Independent Health Complaints Advocacy service	
2.4	The number of new cases managed by the Independent Health Complaints Advocacy service	30 PQ
2.5	Service user satisfaction with the Helpdesk and Independent Health Complaints Advocacy service	
3.1	Number of Useable Experiences collected	3,000 PA
3.2	Number of outcomes achieved	4 PA
3.3	Project and outreach reports	4 PA
4	New business turnover (targets in New Business Strategy)	
5.1	The number of hours our volunteers have contributed	
5.2	The number of new volunteers per quarter	5 PQ

SPIs (as agreed in April 2020 to assess performance against mission, vision and goals)

SPI	
1.1	Receive reasonable responses to our recommendations (i.e. which arise through project work)
1.2	Receive reasonable responses to our escalations (target 80%)
2.1	Number of people proactively contacting us through our Helpdesk, Website and Advocacy
3.1	That our recommendations and escalations all have a clear link back to insight shared by local people
3.2	Our tracking of engagement and insight shows that we are hearing from a wide range of communities
3.3	Our tracking of recommendations and escalations shows that we are tenacious in following up.
4.1	Clear business plan in place by end of year
4.2	Net contribution to CIC per annum (NB targets set by New Bus Strategy)
5.1	Maturity of local volunteer groups as measured by the maturity matrix

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