

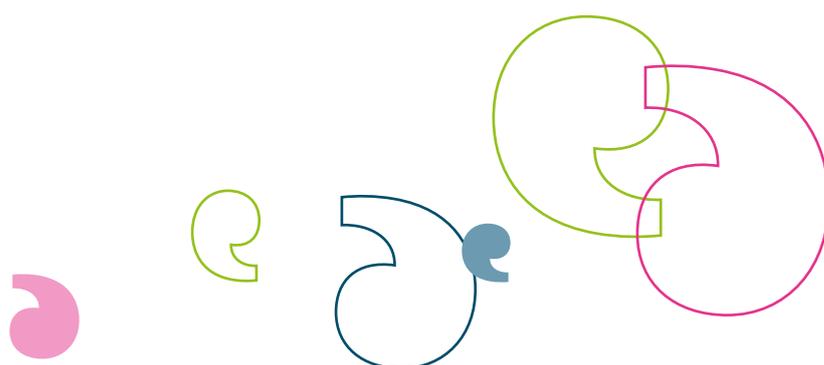
Activity and outcomes quarterly report

Quarter 3: October - December 2020



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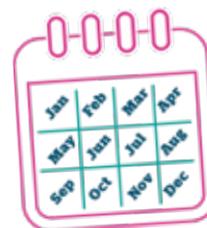
Highlights



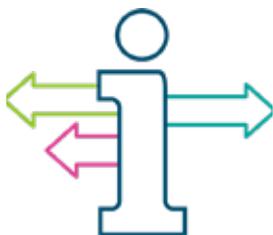
Healthwatch Surrey is an independent organisation that gives the people of Surrey a voice to improve, shape and get the best from health and social care services by empowering local people and communities. Here are some of our key highlights from Q3. This report details the activity associated with these key highlights and some of the key outcomes we have achieved for people in Surrey this quarter.



People shared **980** health and social care experiences with us. The experiences we receive come from a variety of sources.



We have **51** Healthwatch Surrey volunteers. In total our dedicated volunteers gave **649** hours of their time this quarter.



545 people contacted us for information and advice through our Helpdesk, Citizens Advice and Advocacy services.



During Q3 our Engagement Team recorded **103** experiences of health and social care.



In Q3 we had **2,304** new web visitors and **5,562** page views.



This quarter **70** experiences were shared with us online and by post.

Key dates and plans for the next three months



Healthwatch Surrey Board Meeting in Public

The Board meeting on Tuesday 26th January, 2pm-4pm will be held via Zoom link.

Should you wish to join the meeting live then please email enquiries@healthwatchsurrey.co.uk before Monday 25th January to receive the log in details.

As usual, any questions for the Board should be tabled in advance through the enquiries email address above.

Next meeting: Tuesday 27th April 2021

Venue: Zoom

All welcome

Engagement events in Q4

In Q4 we will be launching our 5th Community Cash fund, specifically focusing on groups that we want to hear more from. We also hope to work more closely with Surrey's foodbanks to supply a 'care pack' and create feedback cards which can be used within GP surgeries. We will continue to look out for new opportunities to hear from local people and begin planning for a potential Spring return to face-to-face engagement.



Publications

In Q3 we published the following reports:

- October Insight Bulletin
- November Insight Bulletin
- December Insight Bulletin
- Adult Social Care Insight Report



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.

Under normal circumstances we focus our project work on three or four priority areas. During the pandemic our approach has changed: we have become more responsive to the swift changes in Surrey residents' experiences, and to the needs of our system partners.

In April we started publishing regular Insight Bulletins, focused on themes we've heard about over the previous 4-8 weeks. These bulletins are sent to 395 local commissioners, providers and social care partners. They are also published on our website and are available to subscribers.

The bulletin gives timely insight into emerging issues and between October and December we have highlighted:

- Positive responses to the efficiency of the Flu Vaccination rollout. Initially there was worry and concern, but this quickly faded, and people welcomed innovations such as drive-through vaccination sites.
- Some negative experiences of CAHMS. We've heard about the impact the pandemic is having on the short and long-term mental health of some children and young people and know the pressure on CAHMS is likely to grow over the coming months.
- Frustration and distress caused by care home visiting policies and inconsistencies in visitor arrangements from one care home to another.
- The ongoing difficulty of finding an NHS dentist in Surrey
- Niggling concerns about new processes. Across the system new processes are in place to help people manage their own journey to the right care first time and these changes have benefited many. However, we have heard:

- A fairly constant stream of frustration when these processes are not straight forward
- Some people finding the idea of GP Triage frustrating and hard to understand.

2020 has been an exceptional year, but every month we've heard about excellent care being received by the people of Surrey. Our December bulletin was a thank you to everyone who enables the people of Surrey to be cared for, sharing positive stories we've heard about excellent healthcare, responsive service, care and compassion that we can all be proud of.



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In November we were contacted by Frimley Health and Care to help gather patient views on potential new locations for Downing St GP Practice. As time was tight a decision-making meeting was planned for the end of December.

We devised a two-strand approach. A survey was sent by text to all patients who had opted in to the practice messaging service: this received 1,100 responses. We also conducted 23 telephone interviews with older patients who were not on the text messaging list. We presented the findings to the practice and the CCG in mid-December, along with a written report.

The final decision on the new location will be made in January 2021, but our work ensured the voice of the patient will be taken into account when that decision is made, and in the design of the new practice location.

Our two current thematic priorities are:

- Care at Home
- Early Access to Mental Health services

While we continue to work on projects relating to both of these the pandemic is limiting our progress.

Over the past quarter we have been in discussion with Surrey County Council on their assessment of Day Care provision for the elderly and have co-designed a questionnaire that we hope will run in Q4. The aim is for Healthwatch Surrey to add some qualitative interviews to this survey to provide more depth of insight.

We are also continuing to scope a project on people's experiences of the early years after an initial diagnosis of dementia.



Community Engagement



Engaging virtually with the people of Surrey



The team have continued to explore ways to creatively engage with different communities across Surrey and as lockdown progresses and the

pandemic changes, we are continuously revising key messages and call outs for people to share their experiences.

During Q3, we gathered experiences through friends and family, gained local intelligence through our voluntary, community and faith sector (VCFS) contacts, and had a telephone interview with a recently released prisoner who spoke of poor mental health support and over medication.

We also attended virtual workshops and seminars with Healthwatch England and NHS to further our knowledge and increase our skillset in engaging remotely and reaching those who are digitally excluded. We have met with hospital trusts, Surrey Heartlands and Patient Participation Group (PPG) chairs to maintain relationships and share key messages and evidence. We have also worked closely with our volunteers and attended many of their group meetings.

In November, we spoke to many parents of

children with SEND and learnt how complicated the pathway to getting diagnosis and funding for support was. We also heard their frustrations and how some families are at breaking point. In December, we shared these experiences with providers and commissioners, and have plans to create some video interviews/diaries in early 2021 that we can share with key personnel in children's services, to highlight some recent issues with diagnosis and getting support.

Online engagement has allowed some people to join groups they may not have been able to physically access, due to location or anxiety. However, the general feeling amongst online groups is one of 'Zoom Fatigue' and over-exposure to online groups and surveys. Some organisations also felt Healthwatch Surrey's presence would make it harder for people to talk freely when some find it already difficult.

This quarter, we identified many new groups (over 50) that have established online meetings in the last few months and have made contact to engage. We will re-visit these groups in the coming months to try to hear more from local people.



Crest

Through our relationship with local North West Surrey Cancer support group, Crest, we have put Ashford and St Peter's Hospitals' head of patient experience in touch with the group leader. This will help to ensure cancer patients get their voices heard quicker.

Signposting

This quarter we gathered over 100 experiences and signposted to our Helpdesk and Advocacy service, GPs, NHS psychological therapies services (IAPT), Action for Carers, ASSIST Trauma Care, PTSD UK and Mary Frances Trust.

Outreach

Following a consultation with our staff team, Board members and volunteers, two groups were identified as priorities for our outreach into communities this year:

- People from BAME communities
- Families living in poverty

Outreach work on dementia and BAME communities is still ongoing. The aim is to better understand the potential challenges and barriers which typically delay or hinder access to services within these communities. This research will form part of a larger research project about early dementia pathways in Surrey. Background research has been completed, especially to map out key areas of Surrey where we can engage with the target communities. So far, useful discussions have taken place with VCFS groups, health care professionals and Public Health Surrey. A number of volunteers have actively supported us in the planning and outreach to BAME communities they are in contact with. We are continuing to reach out to any existing/new organisations or individuals that may put us in touch with people having recently had lived experience of a dementia diagnosis. Public Health colleagues have confirmed their interest in the project, which is most encouraging.

Reaching out to our second priority group, families living in poverty, will start in 2021.

What we are planning in Q4

In Q4, we will be launching our 5th Community Cash fund. We will specifically focus on groups that we want to hear more from and give our local volunteer teams a chance to choose which organisations will be awarded the grants (of up to £1,000 each). Our volunteer teams will work together in their local areas to look at local VCFS groups and present back to our panel. This will be an exciting project and one that we confidently feel will reach those that are perhaps socially and digitally isolated.

As we move into 2021, we hope to work more closely with Surrey's foodbanks to supply a 'care pack' which will include a bespoke flyer giving people an opportunity to feedback experiences to us. We are also looking into creating feedback cards which can be used within GP surgeries and will continue to be on the lookout for new opportunities to engage and begin planning for a potential Spring return to face-to-face engagement.



Acting on what we hear



People shared **980** health and social care experiences with us this quarter. The experiences we receive come from a variety of sources. During Q3 we received **103** experiences from our Engagement Team, **397** experiences from Citizens Advice, **337** experiences via our Helpdesk and **23** experiences from Independent Health Complaints Advocacy.

These experiences were regularly reviewed by our Escalations Panel who make recommendations on the action we should take.

Sharing our stories

We shared insight reports, including 548 experiences, through our What We've Heard meetings with CQC, Adult Social Care, Surrey and Borders Partnership, Royal Surrey and Surrey Heartlands CCG.

Escalations

We escalated 27 individual issues this quarter to providers, commissioners and the CQC. Responses to our questions were reviewed by our Escalations Panel in November and January.

Escalations are a key part of the work we do at Healthwatch Surrey, and the Escalations Panel have been working hard to review the quality of the responses we receive from providers and commissioners. We escalated 27 Individual issues this quarter to providers, commissioners, and the Care Quality Commission (CQC).

As part of the Healthwatch Surrey internal escalations process we share a small number of individual cases of concern, this amplifies the voice of local people and leads to improved outcomes for those using services.

As part of this work a parent shared concerns about how her teenage daughter had been detained under the mental health act. Healthwatch Surrey contacted the provider and received assurance that her concerns would be addressed immediately. We also shared this

experience with the commissioners of children's services.

We shared concerns about the inclusivity of online forms and changes to sexual health testing kits with Public Health. We received assurance that there were no clinical risks and Public Health Commissioners told us:

"This type of feedback is invaluable ... we are working with CNWL to ensure the service user's experience is acknowledged and addressed."

They will let us know of the changes made after hearing service users' feedback.

We heard concerns from patients who found whilst trying to access a Surrey Downs surgery that it was closed. Healthwatch raised the issue with the Clinical Commissioning Group (CCG) to ask why it was closed and what comms were being sent to patients. We were assured that

"The CCG is working with the practice to ensure that the communication is revisited and that it is clear for patients, ensuring this reduces any concerns on how patients access Primary Care services."



Influencing change and improvements



We meet regularly with the Care Quality Commission to share what Healthwatch Surrey have been hearing from people, about local providers and their services in Surrey. As part of our close working relationship with the CQC inspectors, we have collaborated to ensure that any urgent concerns during the pandemic have been acted on. We recently shared feedback regarding care homes and domiciliary care agencies which the CQC acted on, to improve services for service users and their families.

We shared an experience of a domiciliary care provider which resulted in improvements to the provider's "openness and communication to resolve issues in a more timely way" (Adult Social care inspector).

Healthwatch Surrey also meet regularly with Adult Social Care to share what we've heard. We highlighted experiences we heard from those in care homes during the pandemic, emphasising the differences in visiting restrictions across providers, and sharing the challenges faced by residents and residents' families during the pandemic.

Hospitals

Over the past few months, we met with chief nurses from all Surrey's Acute Hospital Trusts. We fed back patients' views of services by preparing patient experience reports for Royal Surrey NHS Foundation Trust, Surrey and Sussex Healthcare NHS Trust, and Ashford and St Peter's Hospitals NHS Foundation Trust, as part of our 'What We've Heard' meeting series.

- We heard about the challenges faced by acute hospitals during the pandemic and their hard work to keep services running for patients.
- We shared key themes we had heard from those accessing services in the past six months.
- We reported what people had to say about visiting restrictions and the impact this has on inpatients and their families.
- We asked about visiting arrangements and what learnings would be taken forward to improve things for those in hospital during the pandemic.
- We heard about best practice and the new initiatives which have been adopted to help loved ones to stay in touch during the pandemic.

"It was good to have visibility of the information you have about people's views and experiences of our services." SASH Chief Nurse



"Thank you for sharing all of the positive experiences as well as those that we can make improvements to. I have asked for feedback from staff involved in the different areas." RSCH Deputy Chief Nurse

We also shared feedback from service users which highlighted areas including experiences of cancer care and remote consultations. We asked about the hospitals' intentions going forward, regarding remote consultations, and we received reassurance that patients' views will be taken into account with regard to virtual consultations.

"We have recently undertaken a workshop to understand the needs of those with lower levels of digital literacy or hard to reach groups and will be implementing the recommendations that arise from that work. We also have the Survey Monkey feedback related to video consultations

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and FFT for telephone. Feedback is reviewed and shared, but we are in the process of obtaining more qualitative feedback to shape the next steps of virtual consultations.”

We have been working closely with Frimley Park Hospital to improve things for future patients. A Surrey Heath patient told us of their experience of receiving care for an eye condition from Frimley Park Hospital. The hospital evaluated the eye care pathway to see how to improve the service for patients. Healthwatch Surrey received reassurance that this experience would be shared with junior doctors to inform future best practice:

“Reflecting on this episode, this case is a lesson for all the junior doctors where they try to manage without getting proper consultant input. This case will be discussed with the junior doctors.”

Whilst we heard from patients about the excellent care they had received at Frimley park hospital, we also heard concerns regarding the use of incontinence pads after a patient’s long stay in hospital. We received reassurance that concerns were forwarded directly

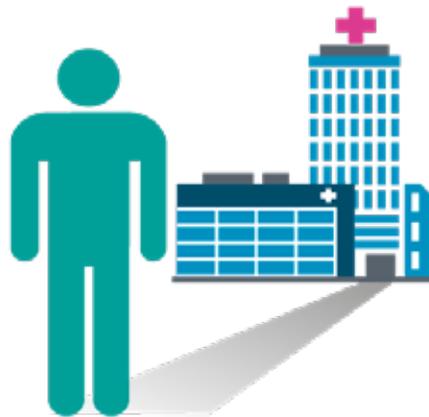
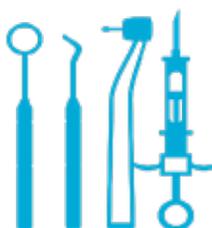
“to the matron of both the wards mentioned and they have spoken to all the nurses as this practice is completely unacceptable.”

We meet regularly with the Surrey Heartlands Primary Care team. We shared praise and thanks about clinicians and practice staff from the many positive stories we have heard during the past few months.

We also continued our scrutiny of digital access for patients, reporting patients’ views on remote consultations and sharing the views of those who do not have digital access to appointments. We continue to collaborate with the primary care team to look at new ways to hear from the population who are excluded from digital access to services.

Dentistry

Since the start of the pandemic, we have seen a marked increase in enquiries about dentistry. We heard from 60 individuals about



dentistry (between August-December 2020) vs 10 individuals in the same period last year. Our insight contributed to a recently published Healthwatch England report about access to dentistry during the pandemic:

<https://www.healthwatch.co.uk/news/2020-12-09/covid-19-pandemic-pushes-nhs-dentistry-crisis-point-finds-new-report>

Healthwatch England experienced a 452% increase in feedback on dentistry in the second quarter of the year, with continuing accounts of people being left in pain, resorting to ‘DIY’ repair methods and in some cases even extracting their own teeth.

The review of 1,300 people’s experiences of accessing dental care found that:

- More than 7 in 10 people (73%) found it difficult to access help and support when they needed it.
- Access issues were caused by dentists not taking on NHS patients, as well as conflicting advice from different parts of the NHS about what help is available.
- Many people were offered treatment if they went private, despite research indicating that 40% of people would struggle to afford private dental care.
- The impact of not being able to access care led many people to experience pain, discomfort and further complications.

The increase in feedback comes after the British Dental Association reported that treatments delivered by NHS dental services in England are at a quarter of pre-COVID levels, with over 14.5 million fewer procedures taking place.

While the report accepts that the overall treatment backlog caused by the pandemic will take time to clear due to limited industry

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capacity and COVID-related restrictions, it makes several recommendations including:

- Providing more accurate and up-to-date information for patients
- Providing clarity over NHS dentists' obligations relating to patient registration
- Making more resources available to improve patient access to dental care
- Reviewing the overall cost to patients of NHS dental care, particularly with a 5% price increase set to take effect before Christmas.

Healthwatch is also calling for people on low incomes who are forced to travel long distances to access dental care, to be reimbursed.

Adult Social Care Complaints

Healthwatch Surrey shared what we and key local organisations Age UK and Surrey Coalition, have heard about Adult Social Care complaints at the Adults and Health Select Committee in December 2020. We hold quarterly meetings with the Adult Social Care team where we share what we've heard from local people. This feedback is in the main not comprised of "formal complaints", but rather issues which service users have chosen to share with Healthwatch, as a safe place to raise their concerns.

Where appropriate, we always signpost people to formal complaints processes. However, much of

the insight that is shared with us is sub complaint level. People will often share their experience in the hope that the learnings will help improve services for others; or they want someone to listen to them; or they want to know if there's anything more they can do to help a loved one.

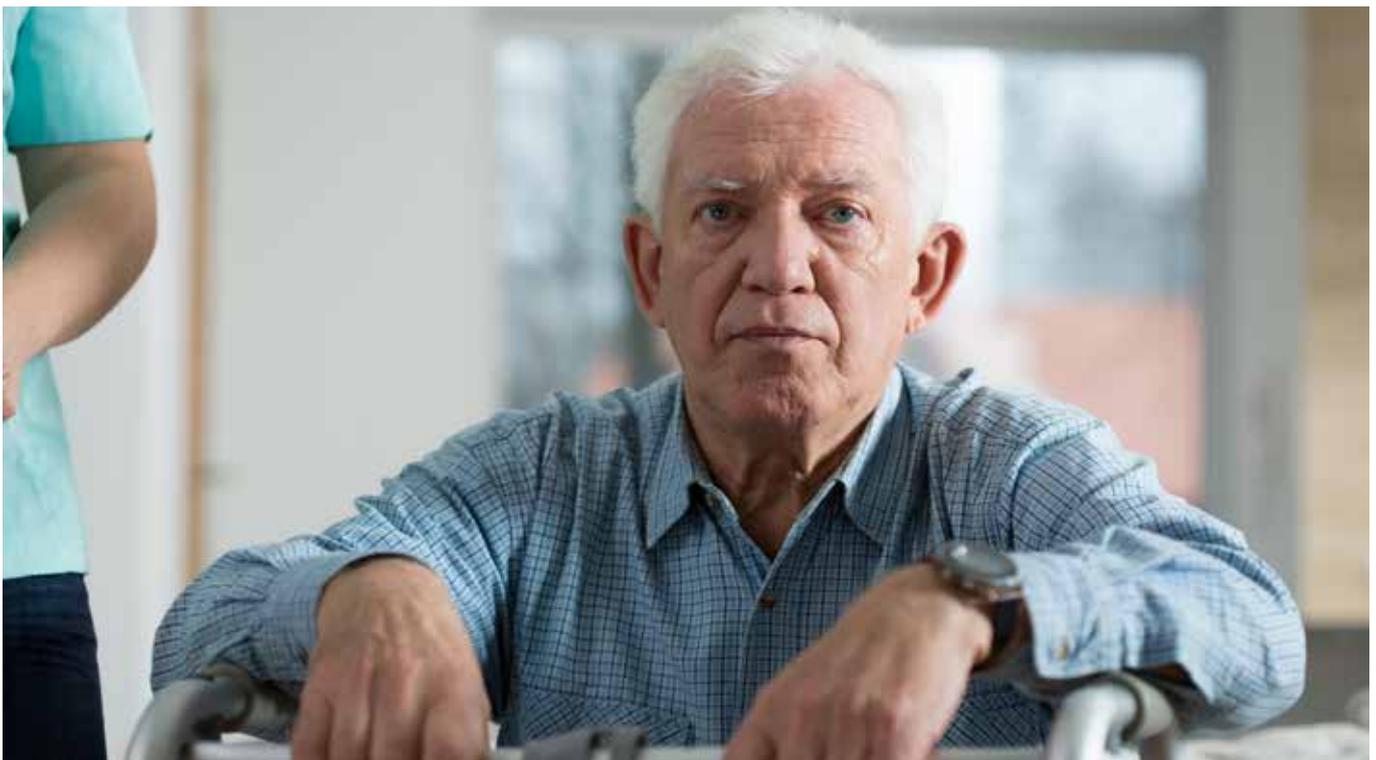
People's reluctance or fear in speaking up about their care is a real concern and we all need to do all we can to make this easy for people.

Adult Social Care has listened to our request for complaints and feedback mechanisms to be obvious in printed literature, which is now more prominent in the new "Listening to your views" leaflet.

Adult Social Care only accounts for 4 % of the experiences that we hear about through our usual engagement mechanisms, therefore we also undertake specific targeted project work to help us hear more about this area, such as our qualitative research in 2019 "Can you hear me? Amplifying the voice of people receiving care at home".

This was a vital piece of research which helped us understand the sub complaint concerns which service users have, and the challenges they face when they are raised.

The full report can be found here: <https://www.healthwatchsurrey.co.uk/wpcontent/uploads/2019/09/Care-at-home-report-web.pdf>



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

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

522 people have received help via our Helpdesk and our Healthwatch Champions this quarter.



0303 303 0023

Citizens Advice

416

Helpdesk

106

Registering with a GP in a different language

Bao* is settling in the UK with her family. She cannot read or speak English and we arranged for a translator to assist. None of her family were registered with a GP and her partner was on controlled medication, which was running out shortly, so we called the GP practice closest to Bao's home who said that they would accept new patients. We also checked their rights to access the NHS. Bao was then emailed the links and provided with step-by-step instructions and advised what documentation was required, which were translated into her first language. Bao confirmed that she received the email with information on how to register with a GP. She felt that it was clearly laid out and that she could now do it alone without further help.

Reassurance on cause for complaint

Rowan* contacted us for advice on behalf of his brother who wants to make a complaint to his local NHS hospital after receiving an incorrect diagnosis of his medical condition. This has caused additional problems which he will need treatment for from the same hospital. His concern is that making a complaint will prevent him accessing the service or impact his treatment. We provided Rowan with the necessary information and confirmed valid cause for complaint, providing reassurance. The Health Ombudsman considers complaints invaluable in improving services. Rowan gave thanks and will pass the information on to his brother.

Advice on medical support when unemployed

Elijah* is currently unemployed due to the Covid-19 pandemic and feared that he might eventually be unable to work because of his poor health. He was paying for medical needs including a supply of catheters and this was becoming a burden. A previous application under the NHS Low Income Scheme proved unsuccessful. With detailed knowledge of his circumstances, we offered to help in completing the HC1 form which was done via a telephone call. Elijah was subsequently advised by the NHS that catheters are not covered in the NHS Low Income Scheme but was advised to speak to his GP. His GP was able to arrange for catheters to be supplied free of charge.

**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

Justina* changed GP surgeries in October 2019 and was told in mid-November that her records had been released to the new surgery. However, 10 months passed, and her GP was still unable to access her records during consultations.

Justina made enquiries at both surgeries about her records but was unable to get them to investigate. She even contacted the Clinical Commissioning Group (CCG) but after saying they would investigate the matter nothing was done, and communication stopped. She sought the help of our Independent Health Complaints Advocacy, as she was concerned that her GP could not access her record and that her private medical records, both written and digital, seemed to have disappeared.

The advocate assisted Justina, who has a learning disability and complex needs, to instigate a formal complaint at her former surgery. They initially misread the complaint and provided a response that did not accurately cover the questions submitted. The advocate responded with a letter, after it had been approved by Justina, to the surgery who then completed a full investigation and provided a satisfactory response. This indicated that the records had been sent to the new surgery.

Justina was then assisted to make a further complaint to the new surgery. They initially attempted to informally resolve the complaint and informed the advocate it had been resolved. On contact with Justina, it was discovered that the matter was not resolved as answers had not been provided. The advocate wrote to the surgery reminding them of Justina's statutory right to a formal investigation and requested that one be carried out and a response sent directly to Justina.

The advocate communicated with Justina by email and telephone during this process ensuring that she was in control and approving all actions taken to assist her and make the process accessible.

Eventually, the paper records were located in a storeroom of the new surgery. It was discovered that Justina had been incorrectly informed that they were lost. The investigation continues as to why the GP2GP system has failed to transfer the digital records, but Justina's current surgery has agreed to digitise her records so that she may feel confident that any GP treating her will have access to notes relevant to her care needs.

People contacting the Advocacy service for information and advice

Q3
23

Q3
9

New referrals

People supported through the complaint process

Q3
72

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



“Due to the ongoing coronavirus situation, our volunteers continue to support us remotely, and gave **649 hours** of their time this quarter”

In line with the advice and guidance from Public Health England and the World Health Organisation, our volunteers continue to support us virtually, rather than meeting and engaging with service users face to face.

Meet our new volunteers

5 new volunteers joined us to amplify the voices of local communities and to make a difference in health and social care in Surrey this quarter:



EriOluwa

Dr EriOluwa Olangunju is an MBA student at the University of Surrey and is currently living in Guildford. She was previously the Medical Director of Redeemer University Health Centre in Nigeria and has been working with undergraduate students as a health educator for the past five years. She has a particular interest in helping young people to get the best from health and care services and is currently representing Healthwatch Surrey as part of Surrey Heartlands' 18 -25 mental health transformation programme. EriOluwa is a member of our Guildford and Waverley volunteer group.



Rida

Rida is a Biomedical Sciences student at Royal Holloway University of London. She joins us as a new member of our Young Healthwatch volunteer group. Rida has previously volunteered with setting up the NHS Nightingale hospital in London, and with City Harvest, an organisation that helps put fresh surplus food to good use by redistributing it to organisations that feed the hungry. Rida is keen to support the community in North West Surrey while also learning new skills and gaining experience of working in a healthcare environment.



Jade

Jade is originally from Hong Kong and is currently studying Nutrition at the University of Surrey. She plans to undertake an MSc in Physiotherapy after graduating. She has previously volunteered with the Red Cross to support elderly and vulnerable people, and as an English Tutor. Jade is interested in learning more about the NHS and getting involved with her local community in Surrey. She is a member of our Young Healthwatch, and our Guildford and Waverley volunteer group.



Paris

Paris is studying dance at the University of Surrey and plans to go on to study Movement Psychotherapy after graduation. She recently undertook a year-long placement as a Project Assistant with Luca Silvestrini's Protein in London, where she supported outreach and community engagement projects to bring the arts to vulnerable children and adults in the city. Paris feels it's important that young people have a say in how the health and care services they use are delivered. She has joined our Young Healthwatch team and our Guildford and Waverley volunteer group.



Fatima

Fatima joined us as a Young Healthwatch volunteer this quarter. She is studying Nutrition at the University of Surrey and is hoping to become a registered nutritionist within the next year. She has previously worked for several non-governmental organisations in Nigeria to provide food, aid and sanitary kits to deprived communities. Besides her studies and volunteering with Healthwatch Surrey, Fatima is a trained and certified Wellbeing Champion at University and has a focus on improving the mental health and wellbeing of her fellow students. She is also the Social Media and Marketing Officer for the University's Arab Society.

Healthwatch Surrey volunteers are highly commended at the Healthwatch Network awards



Gareth



Jenny



John

This quarter, we nominated three of our amazing volunteers Jenny, John and Gareth for the 'Celebrating our Volunteer Team' award at the Healthwatch Network Awards for their outstanding work in improving serious incident reports for patients and their next of kin at Royal Surrey NHS Foundation Trust.

We are delighted to announce that Jenny, John and Gareth were 'Highly Commended' for their work and received a special mention for their achievements from Healthwatch England Chair, Sir Robert Francis.

More about the project:

Royal Surrey NHS Foundation Trust reached out to us back in December 2018 to ask whether our volunteers would like to assist in reviewing and improving their serious incident reporting process.

Jenny, John and Gareth signed up to help with this project and met 2-3 times a month throughout 2019 to read and review confidential serious incident reports together as a team. They provided feedback to the report authors and the Head of Patient Safety before reports were sent out to the patients and their families.

They were asked to consider the clarity, tone and sensitivity of the reports, and whether any of the information contained could be considered misleading or insensitive to patients.

“At its most basic this project was a “purge of the acronyms” and making sure that any ‘NHS-speak’ was translated for the layman. More than this we tried to put ourselves in the position of the recipient, be it the patient or their next of kin who might often be elderly, confused or even angry about the incident.” - John

Some significant improvements have been made to the reporting process thanks to our team of volunteers:

- The report template has been completely reworked to make it reader friendly, accessible and less repetitive.
- The risk matrix which showed the likelihood of the event happening again has been removed. The risk matrix was upsetting to the families of patients who had died because of the serious incident, especially if the risk of the event happening again was described as ‘low’, as it seemed to some that the death of their loved one was an insignificant matter.
- Our volunteers have worked with the authors to improve clarity. Some incidents span 1 -3 years. The order of events was sometimes muddled and unclear in the reports.

These major changes to the reporting template have also now been shared with other hospital trusts in Surrey. Royal Surrey NHS Foundation Trust’s Head of Patient Safety and Quality Simon Pawlin described the work done by our volunteers as “extremely valuable”.

Healthwatch volunteer Liz Sawyer chairs LeDeR Mortality Review



People with a learning disability often have poorer physical and mental health than other people and may face barriers to accessing health and care to keep them healthy. Too many people with a learning disability are dying earlier than they should, many from things which could have been treated or prevented.

The learning from deaths of people with a learning disability (LeDeR) programme was set up as a service improvement programme to look at why people are dying and what can be done to change services locally and nationally to improve the health of people with a learning disability and reduce health inequalities. By finding out more about why people died we can understand what needs to be changed to make a difference to people’s lives.

In a LeDeR review, someone who is trained to carry out reviews, looks at the person’s life and the circumstances that led up to their death and from the information they have makes recommendations to the local commissioning system about changes that could be made locally to help improve services for other people with a learning disability locally. They look at the GPs records and social care and hospital records (if relevant) and speak to family members about the person who has died to find out more about them and their life experiences.

The LeDeR review meetings are chaired by our volunteer Liz Sawyer and have representation from Primary Care, Acute, Adult Social Care, Safeguarding, Commissioning, Surrey and Borders Partnership Trust, Pharmacy representative, Local Area Contact for LeDeR and the initial LeDeR Reviewers.

WE'RE RECRUITING!

If you would like to join Young Healthwatch to make a difference for young people in Surrey email volunteers@healthwatchesurrey.co.uk or visit our website www.healthwatchesurrey.co.uk/get-involved/volunteer/



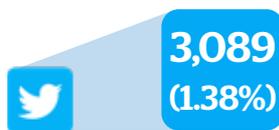
Raising awareness of our work



Webpage views - We had **5,562** web page views and **2,398** unique web visitors in Q3.



Facebook likes



Twitter followers



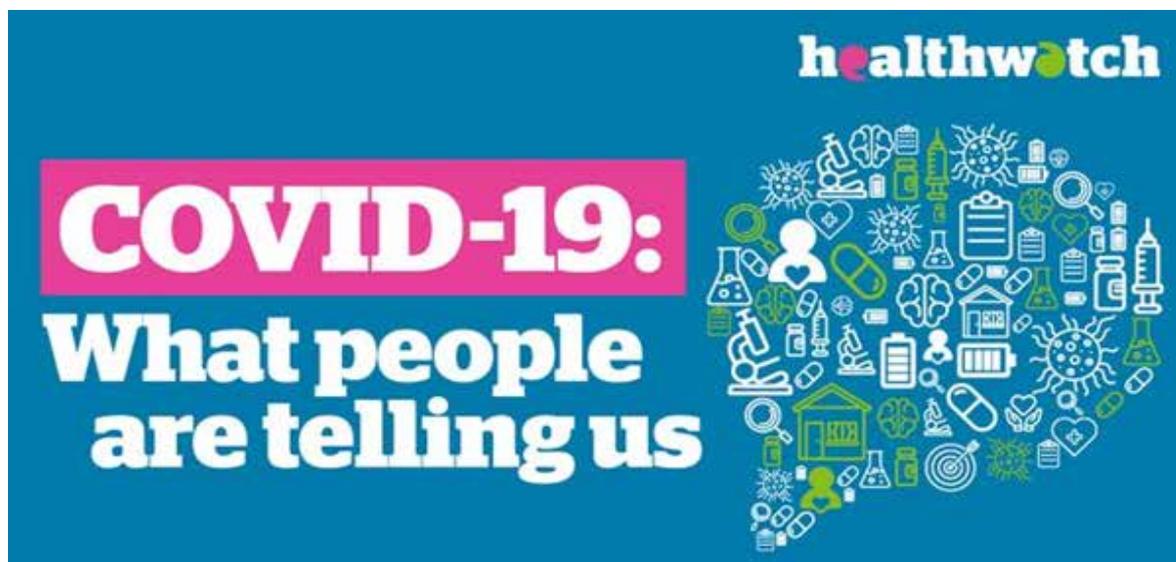
E-bulletin subscribers

Campaign highlights:

This quarter we published the following reports:

- October Insight Bulletin
- November Insight Bulletin
- December Insight Bulletin
- Adult Social Care Insight Report

Our campaigns were focused around sharing the findings from our insight bulletins, call for experiences, promoting our engagement meetings and sharing what we've heard. In addition, we have continued the #BecauseWeAllCare campaign, a Healthwatch England and CQC campaign encouraging more people to share their views about their health and social care. We also promoted Healthwatch England's reports, COVID 19: What people are telling us and attended the Healthwatch England Network Event in November.



We have 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.

- NHS flu vaccination
- NHS COVID-19 vaccination
- NHS 111 First
- North East Hampshire and Farnham CCG's Supporting Communities funding
- i-access opening hours

- Stoptober
- Healthy Surrey's HIV testing, treatment and care services
- Family Voice Surrey's Preparing for adulthood virtual event
- Mary Frances Trust's Young People Programme
- Men's Minds Matter
- Kooth's online service during Christmas and New Year
- Community Pharmacy opening hours during Christmas and New Year
- Surrey Crisis Fund



We also promoted partner consultations to encourage the public to have their say on how services in Surrey are planned and run, including;

- Supporting adult carers consultation
- SEND, Mental Health and Emotional Wellbeing services survey for parents and carers
- Our Views Matter - Transitioning from Children's Mental Health Services survey
- Surrey Carers Strategy 2021-2024
- Surrey Strategy, Pathway and Contingency Planning virtual event
- Surrey Heartland's Non-Emergency Transport Services Review survey
- Surrey County Council's 2020 Resident Budget Survey
- Consultation on proposed changes to additional SEN funding in mainstream schools
- Surrey Sexual Health Services survey



As well as promoting campaigns and consultations, we use Awareness Days to signpost to local services who provide help and support. Here are the Awareness Day campaigns we promoted in Q3:

- ADHD Awareness Month
- Baby Loss Awareness Week
- World Mental Health Day
- Get Online Week
- Wear It Pink - breast cancer awareness
- Movember
- Lung Cancer Awareness Month
- International Stress Awareness Week
- National Stress Awareness Day
- Sugar Awareness Week
- Alcohol Awareness Week
- National Safeguarding Adults Week
- World COPD Day
- National Grief Awareness Week
- International Day of Persons with Disability
- Carers Rights Day
- Self Care Week

Awareness Initiative

In November we conducted presentations on Healthwatch Surrey's engagement work at Redhill, Reigate and District Rotary Club. In December we spoke about Healthwatch Surrey and our Young Healthwatch at the Association of Volunteer Managers session on Engaging with Young Volunteers 18-25yrs. Throughout Q3 we also attended meetings with the NIHR Applied Research Collaboration Kent, Surrey and Sussex, where we gave an overview of Healthwatch Surrey.

Healthwatch Surrey in the media

In November, we took part in an interview with BBC Radio Surrey to discuss the changes to GP appointments and consultations. Healthwatch Surrey was also featured in the December issue of Sparkline - a monthly newsletter published by Richmond Fellowship.



Contact Us



 Telephone: 0303 303 0023

 Text/SMS: 07592 787533

 Text Relay: 18001 0303 303 0023

 Email: enquiries@healthwatchesurrey.co.uk

 Pop into any of the Citizens Advice in Surrey

 healthwatchesurrey.co.uk

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