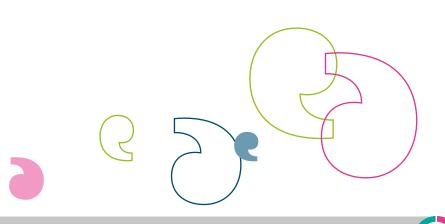


## Activity and outcomes quarterly report Quarter 1: April - June 2021

## Contents

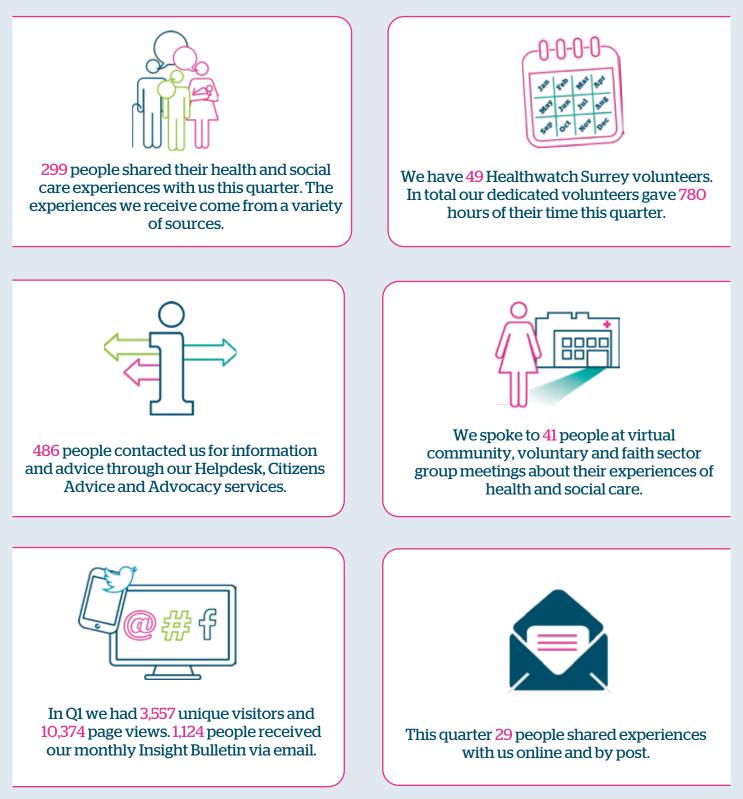


Highlights	3
Our project and outreach work	4
Community Engagement	6
Acting on what we hear	9
Influencing change and improvements	10
Information, signposting and advice	13
We help and support with NHS complaints	15
Our volunteers	16
Key dates and plans for the next three months	18
Contact us	19



## 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 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.



## 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.

After a year spent responding to the immediate needs of our residents and system partners, this quarter has seen us resuming long-term projects to investigate local people's experience of care.

#### Our thematic priorities

We aim to deliver four substantial projects per year, each built around a Thematic Priority. Late last year we reviewed our four priorities and agreed that for 2021/2022 we should continue with Early Access to Mental Health Support and Care at Home.

We have adopted Access as a third priority - the combined impacts of delayed care, compromised capacity, new systems and increasing demand are challenges that are impacting people's access to services both positively and negatively and seem set to do so for some years. We have also agreed to leave one priority unassigned - this will allow us to respond promptly to emerging needs.

#### Our Insight Bulletins - key findings

This quarter we published Insight Bulletins in May (after the local elections) and June.

In both bulletins we reported on patient experiences relating to GP surgery access. Demand for GP services has grown substantially in recent months, putting considerable pressure on the system. Our bulletins emphasised the positive as well as the negative - while we are hearing more concerns we are also hearing a lot of praise and thanks.

The pandemic has accelerated three substantial changes relating to GP access, and that different people respond differently to each of these changes.

Change 1: move from phone-only request to online and phone requests. The addition of online requests is greatly appreciated - the main problem is pressure on phone lines and current difficulty getting calls answered when seeking an appointment.

**Change 2:** move from patient-driven access to Total Triage. Many people are not aware of this or don't realise it is a permanent change. Patients sometimes feel that GPs are not providing an appropriately responsive service.

**Change 3:** move from face-to-face default to phone and face-to-face consultation, with the choice of media often chosen by the GP rather than the patient.

Surrey Heartlands have initiated a development project aiming to redesign primary care access. We have contributed to project development and look forward to progression.

Our bulletins have also covered our reports on Pregnancy Loss and Day Centres. Prepandemic we were commissioned by The Kings Fund and Healthwatch England to contribute to their investigation into the impact of poor administration on patients and on the healthcare system, and their final reports have been published this quarter.



#### Reporting on the experiences of Carers of those discharged from hospital during the pandemic

In partnership with Action for Carers we are at the final stages of delivery of our research into the experiences of hospital discharge from the perspective of carers of patients. Our detailed survey reached 78 respondents, and we selected 12 of these for follow-up depth interviews. The interviews followed the journey from admission to long-term care assessment (often several months post-discharge). We heard of some excellent experiences, but we did also hear of the challenges carers faced and the impact on them and the person they care for, and we will be making recommendations to a number of our system partners.

## The Lived Experience of the Early Years of Dementia

We are also working on a research project investigating people's experiences of finding information and support in the early years after diagnosis of dementia. In Surrey the pathway is that 3-6 months after diagnosis by Surrey and Borders Partnership people are discharged back to the community. Our work will shine a light on people's views of the guidance they receive before they are discharged, and how they discover services and support that are available. Findings will be shared with Surrey Heartlands Dementia Strategy Action board and will feed into the redevelopment of the Dementia Strategy in Surrey.



## **Community Engagement**

#### Engaging virtually and face-to-face with the people of Surrey

Engagement in Q1 has seen a limited return to face-to-face events (outside) and we have also continued to join virtual groups to chat to their participants and hear local experiences of health and social care. In addition to engagement events, the 2021 Community Cash Fund was launched for the 5th year and 9 organisations received funding.

#### Blossom LGBTQ on Gaming platform Discord (June)

LGBTQ+ 18-25 year old service users from the Woking area discussed accessing mental health support at A&E at St Peters, Farnham Road and Abraham Cowley Unit. This particular group were negative about the psychiatric liaisons at St Peters, preferring to travel out of the area to Wexham Park (this was discussed at previous engagement with Blossom).

We heard it was hard to register with a dentist upon moving to a new area, individuals were avoiding attending GP due to not wanting to bother the doctors, and delayed eye appointments resulted in anxiety.



#### Staines Health Expo - face to face (June)

Katharine, Maria (Surrey Heath Volunteer) and Sarah attended Staines Health Expo for our first face-to-face engagement since March 2020. We were also supported by our colleague, Omar, from Advocacy at the event. The day was sunny and warm and although it was not extremely busy, people were receptive to chatting with us and we engaged with a good number of people. We heard from Spelthorne residents about difficulty in accessing face to face GP appointments; one service user was not able to obtain an emergency appointment for Grove Medical and had to go to a walk in centre in Ashford for antibiotics. Another from Chertsey Health Centre said she had not had her blood thinning medication reviewed in 4 years. However, on a more positive note, we heard that Staines Health Group were offering face-to-face appointments easily and a patient at Stanwell Road described how their named doctor really listened to them when they needed it. The experiences received at the event will form part of our insight to share back with decision-makers in meetings over the next quarter.





#### MelaNoMore - Virtual coffee morning - Zoom (June)

Supported by Alice (Guildford and Waverley volunteer), we met again with the skin cancer support group for people accessing cancer care at St Luke's cancer support centre, Royal Surrey County Hospital, Ashford and St Peters Hospital, Frimley Park Hospital and Epsom St Helier Hospital. We heard that a new patient passport was being developed at St Luke's that will allow people to have a personalised 'road map' of their illness, prognosis and useful resources and contacts. Other providers



discussed were Cranleigh village hospital who were carrying out some Royal Surrey County Hospital outpatient appointments which were working well and some accessibility issues with digital access for Farnborough Voyager healthcare.

## Engagement Hub trial for Healthwatch England (HWE)

As part of a pilot with HWE, we have learnt how to upload content and manage an engagement hub with service users and residents of Surrey, testing this exciting new method of engaging with local people. We have worked collaboratively with Surrey County Council (Advice and Information), Action for Carers and Frimley CCG (Diabetes team) and Surrey and Sussex Healthcare Trust to create a survey or link with an existing one. We have also a created a newsletter, a vaccination survey, an ideas forum and a poll.

#### Welcome to Healthwatch Surrey Engagement Hub

Welcome to our Community Engagement Hub, a one stop pletform where we will invite you to be involved in Issues that affect local Health and social care services, take part in a survey, have your opinion in a poll or drare your recent feedback about care. You can also find out more about our local partnerships with Clitzen Advice and our free Independent Health Complexits Advices/resrvice. You can also find some of our published reports antilearn more about our work.

#### **Current Projects**



Ave 34.2021 Surrey Heath residents share your experience of managing Diabetes

oseferced är nataglig unar zodition, living vitti dätete

Phase diactory



Share your experience with us four itory us help-thingt local leasts and social care winking Tell us about your morest ...



Communications We have heard from local people that they are work descring some delayers.

-----







COVID-19 Vaccination

Programme

Tax part in our purier



#### Aver 9, 2021 SASH Carers Strategy Survey Cares finitings 3023-3024 R5523 in a set convitted to ruling a different in cares in.

#### 2021 Community Cash Fund - 5th year

Our 5 volunteer groups worked together to find local, small organisations that could demonstrate the difference small funds could make to improve their local community; especially those isolated or vulnerable. We also invited people to apply via social media and through direct channels such as e-mail, telephone etc.

Our panel met in May and unanimously chose the following organisations to benefit from our funding:

- Tandridge Befriending scheme helping isolated, lonely people with a befriending service that supports resilience, independence and health and well-being
- The Brigitte Trust providing volunteer led emotional support and help in Surrey to those facing a life-threatening diagnosis
- The Green Hub project for teens run for teenagers 15 to 18 years with low to moderate anxiety, depression, eating disorders and those that may be on long waiting lists for CAMHS
- Blossom LGBTQ supporting LGBTQ+ young adults who are vulnerable and have mental health needs
- ROC helping secondary school pupils with IT needs from families in poverty and in deprived areas for laptops etc.
- South Woking Help at Hand helping residents who are struggling with everyday tasks including shopping, hospital transports, prescriptions etc.

- Dorking Men's Sheds bringing together men who are socially isolated to provide a venue to meet and create projects to work together on
- Banstead Tuesday Club a weekday social club with talks, lunch, and exercise for those with Dementia and their carers
- Surrey Heath Veterans Listening Project a drop-in for veterans and families and have also offered doorstep contact and help for those isolating and the vulnerable.

Our community cash fund allows us to connect with local community groups and engage with their members to understand their experiences of health and social care in Surrey.



#### Outcomes:

One member of the MelaNoMore group disclosed they adopted a 'stiff upper lip' when faced with reading a medical report that mentioned things not discussed at a Zoom consultation or phone-call. This caused much anxiety until their next appointment which affected their partner and their sleep. They felt it was not possible to call the consultant or their PA as they were busy doing their jobs. It was established after a Royal Surrey County Hospital clinical lead joined the meeting and we posed the question, that there is a team member at Royal Surrey County Hospital who deals with queries such as this and contact is encouraged to alleviate stress and misunderstandings. The group were unaware of this contact and this would be communicated out to the wider Cancer community.



## Acting on what we hear



299 people shared their health and social care experiences with us this quarter. The experiences we receive come from a variety of sources. During Q1, 149 people shared their experiences with our Helpdesk, 73 with our Citizens Advice champions, 39 with our Engagement Team, 2 with our volunteers, 8 with Healthwatch England and 27 with our Independent Health Complaints Advocacy service. These experiences were regularly reviewed and shared with providers/commissioners/regulators as appropriate.

#### Sharing our stories

We shared 334 people's experiences through our insight reports and our What We've Heard meetings with CQC, Public Health, Adult Social Care, Surrey and Borders Partnership, East Surrey Hospital, Ashford & St Peter's Hospital, Frimley Park Hospital, Guildford & Waverley ICP, Frimley Health & Care, and Surrey Heartlands CCG.

#### **Escalations**

We escalated 26 issues this quarter to providers, commissioners and the CQC and asked them to respond. Responses to our questions were reviewed by our Escalations Panel in May.



# Influencing change and improvements

#### Care Quality Commissioner (CQC)

This quarter we have continued to meet and share insight with the CQC to ensure patient feedback is shared effectively. As part of this working relationship, we have provided insight about cancer services to be used as part of their Provider Collaboration Review (PCR) and have also contributed during their briefing session to discuss the early findings of the review. They told us: *"We value the insight you shared with us around the key themes which will help to shape the direction of our final report."* 

We also contribute insight to inform the CQC's planned inspections. We recently told them about someone who had experienced issues with medicine dosage whilst living in supported living accommodation. The CQC told us that this was also in line with their findings and as such could talk to the registered manager about the issue and what action plans could be put in place to help prevent further incidents.

#### Placed-based Partnerships

To keep up with the new health and care system architecture across Surrey, Healthwatch Surrey has created the role of Healthwatch place based lead. The different ICPs are at different stages of development but we have had initial conversations with each of them. We have been invited to sit on the Quality and Safety Boards in several Places.

In Guildford and Waverley, Vicky Stobbart (ICP deputy director) said: "I have had extremely positive feedback from Alliance colleagues about the involvement of Healthwatch as valued partners around the table."

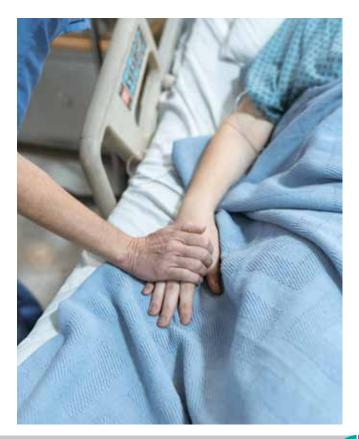
We look forward to continued involvement with all ICPs.

#### Pregnancy loss

We have recently published a report based on the experiences of people who have gone through pregnancy loss. We will be sharing this at the local maternity and neonatal board. <u>Treatment-of-pregnancy-loss-in-Surrey-hospitals-</u> <u>May-2021.pdf (healthwatchsurrey.co.uk)</u>

We made the following recommendations:

- Providers should ensure that adequate mental health support is offered to those who have experienced pregnancy loss.
- All hospitals should offer commemorative certification for foetuses that are not classified as stillbirths and ensure staff are well informed of the process.
- All hospitals should consider regular refresher training in compassion and sensitivity for all professionals coming into contact with expectant parents and explore ways to embed compassion and effective communication to patients.





#### Dentistry

We've also published what we've heard recently on dentistry and shared with CQC.

Dental-experiences-Jan-May-2021.pdf (healthwatchsurrey.co.uk)

## Communication by acute hospitals to patients regarding delayed appointments

In April, we wrote to all of the acute hospitals in Surrey to ask how they were communicating with patients about delayed appointments. We shared with them the NHS guidelines which outline the principles that should be applied to patients waiting for care. These guidelines have since been updated in May: <u>https://www.england.</u> <u>nhs.uk/coronavirus/wp-content/uploads/</u> <u>sites/52/2021/01/C0855-i-good-communication-</u> <u>with-patients-guidance-v2.pdf</u>

This also refers to the National Voices report <u>https://www.nationalvoices.org.uk/</u> <u>publications/our-publications/patient-noun-</u> <u>adjective-understanding-experience-waiting-</u> <u>care</u> (October 2020) which highlights patients' lived experiences of provider communications while waiting for care.

We have heard back from all the hospitals. We were particularly pleased with the response from SASH which said: *"since receiving your letter we have revisited our offering and taken the following actions in relation to the recommendations made."* 

We will be shortly publishing a summary of all of the Hospitals' responses.



#### Primary care

In June, we shared what we've been hearing with Primary Care colleagues and have been exploring with them how we can best use our insight to contribute to improvements to services for patients.

We are planning to share relevant insight directly with GP surgeries going forward, in order to amplify the voice of the patient at the point of contact.

A few people have told us that they have found it difficult to register at their local GP practice. One person told us that they had struggled to register their relative as a temporary resident and were becoming increasingly concerned as they were running out of medication. We shared this with the Surrey Heartlands Primary Care team who told us that they would *"happily pick up this and see what we can do to support."* 

Another person told us that they had been asked for photo ID and two documents with proof of address when trying to register at a GP practice after returning home from university. They were concerned that this would be a barrier to some people to access treatment. We shared these concerns with the practice directly, who assured us that "whilst it is practice policy to request photo ID and proof of address, it would not be a barrier to them registering with the practice if they didn't have the ID required, instead we would work with what they are able to provide. I would expect in this situation had the person come back to advise they didn't have the ID, the receptionist would have worked with them. I will give a reminder to the team that whilst it is desirable, lack of ID/Proof of address shouldn't be a barrier to them registering with a GP."

#### Surrey and Borders Partnership (SaBP)

As a result of our continued relationship with SaBP we have been invited to sit on the Mental Health partnership delivery board.

We have also met with SaBP this quarter to share insight from their service users. One person who is a carer for their elderly parents told us they were visited by a community psychiatric nurse who was not wearing a mask. This caused great concern to the family, one of whom was clinically extremely vulnerable and shielding. We shared this experience with the provider who told us that in response, they had taken the following actions:

"1. We have reinforced to our staff that NHS guidance that we have been working with for over a year has not changed.

2. Having the vaccine does not alter the requirement to wear a mask (in all clinical and non-clinical area).

3. We are following up with the individual to support them in getting this right."

#### Adult Social Care (ASC)

We met with Surrey County Council ASC to share what we've been hearing from people accessing their services. They told us that "These experiences are really useful when demonstrating the importance of integration as they add the emotional 'human' aspect." -Locality Director of Health & Social Care from Surrey County Council was appreciative of us highlighting issues of service integration.

We have also shared the story of a family whose grandmother was discharged from hospital into their care. They told us that they were struggling to cope mentally, emotionally and financially and approached Healthwatch Surrey for advice on how to ask for help and support. After looking



into the circumstances of what happened, ASC told us that "there is significant learning for our teams in how they have managed the circumstances both they... found themselves in... We will... be supporting practitioners to learn from [this family's] experience to ensure we take measures to improve communication and responsibility between teams to stop families being passed between multiple teams... thank you for raising these issues with us; once again please pass on my apologies..."

We shared this with the family who said: "Thank you so much for helping us forward our concerns and making them heard."



#### Hospitals

We continue to meet regularly with the acute hospitals to share patient feedback. As part of this we worked in conjunction with other local Healthwatch to share with Frimley Health Foundation Trust (FHFT) an overview of a year's worth of insight. On the back of this, we were invited to present this to the patient experience forum.

We were also invited to share headlines of what we've heard at Epsom & St Helier Improving patient experience committee (IPEC) and Ashford and St Peter's patient experience monitoring group (PMEG). This provides an opportunity for a wider audience to consider triangulating our insight with their own.

#### Children's services

We have been developing our relationships with the evolving Children's services landscape. During Q1 we attended meetings with Children and Adolescent Mental Health Services (CAMHS) leadership, Additional Needs and Disabilities. We will be sharing our pregnancy loss report at the Local Maternity and Neonatal System Board in July.

## 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 four Citizens Advice offices, as well as a dedicated Helpdesk telephone number for people to call in confidence. 414 people have received help via our Helpdesk and our Healthwatch Champions

## 0303 303 0023

Citizens Advice

Helpdesk

188

226

#### Information about data opt-out provided

Our Helpdesk received a call from Janice\* who was concerned about the NHS Digital's collection of GP data, which is due to go ahead in September. She has no computer or access to the internet and is worried about the sharing of her medical records, so wants to opt out. Our Helpdesk posted Janice a hard copy of an opt-out form and gave her the details of the NHS digital contact centre telephone number and address.

#### Help accessing a vaccination appointment

We were contacted by Yoki\* who wanted help getting access for a Covid vaccination for her Mum. Yoki's Mum is a British citizen, was born in the UK and left when she was a child. She has recently returned to the UK and has registered with the local surgery. However, there appears to be some issue with her NHS registration, and she does not yet have an NHS number. As a result, she can't get a booking for a covid vaccine. Her daughter has drawn a blank trying to get help from the surgery or the NHS, so contacted us to find out if there is any route to get her vaccinated without an NHS number. We signposted her to 'NHS Book a Coronavirus vaccination' link on the NHS website and gave Yoki the contact details for Surrey Heartlands Clinical Commissioning Group enquiry line which is dedicated to issues related to the programme. Yoki told us: *"Thank you very much for this! I have contacted Surrey Heartlands and have managed to make a booking with them. Thanks for this guidance"*.

#### Help arranging hospital transport

Claire\* called our Helpdesk as she did not have any means of transport to get to her NHS appointment which was causing her upset and stress. She is on benefits and couldn't afford a taxi. Claire had asked for help at her GP surgery, but they were unable to help her. She was also worried about attending on her own. We checked the hospital website, and were able to help Claire to access hospital transport. We also advised her that the hospital website said that due to her mobility issues, it should be okay for her husband to accompany her as her carer. She was relieved that transport could be provided, and that it was possible for her to be accompanied given her personal circumstances.

# We help and support with NHS complaints

Our Independent Health Complaints Advocacy service (IHCA) 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.

Our Independent Health Complaints Advocacy service is supporting John\*, who has been suffering mental health issues for several years. He has a diagnosis that he does not agree with, and has been trying to be more involved in his own care. He is compliant in his treatment and he is currently on a community treatment order. John made a complaint to Surrey and Borders Partnership (SaBP) and submitted a large amount of information in support of his complaint. This complaint was rejected for investigation as it also contained a large amount of historical information People contacting the that was outside the remit of the complaints Advocacy service for process. Q1 information and advice John was signposted to our NHS complaints 72 advocacy service by Mind and made a referral after looking at the website. His advocate worked with him by telephone and email to go through the information provided, and see which bits were relevant to be used in support of his complaint. The advocate supported John to condense the details down to information that was specific to his desired outcomes, and that would provide information for **Q1 New referrals** investigation that was within the complaint timeframe and remit. 22 Several drafts were exchanged until John was satisfied his concerns would be covered. There were pauses in the communication exchanges while John had treatment which triggered his Post Traumatic Stress Disorder. **People supported** Throughout this process John was very appreciative of through the the support he was getting from the advocacy service, 01 complaint process he has stated that he has been attempting to move 89 forward in his treatment for 12 years and now feels supported in being able to get answers regarding his treatment.

\*Names have been changed to protect identities

### **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 local area volunteer groups have played a significant role in promoting our Community Cash Fund this quarter and have actively reached out to local grass roots groups and community organisations in their area to build relationships with them and encourage them to apply to our small grants scheme.

Our Community Listeners spoke to members of the public in person for the first time in over 12 months at the Staines-Upon-Thames Health Expo. This outdoor event was run by Staines Rotary Club and featured stalls from voluntary and community groups and support organisations. Our volunteers promoted our Helpdesk and Advocacy Services and collected people's feedback and experiences of using NHS and care services in North West Surrey.

Our Community Listeners also continue to support us with virtual engagement events. This quarter they joined a video call with MelaNoMore, a skin cancer support group run at St Luke's Cancer Centre in Guildford, and with Action for Carers, to hold focus groups and hear people's experiences of accessing care during the pandemic.

## Nurturing our Community Influencer volunteers:

This quarter, we have been working closely with our Community Influencer volunteers to ensure they feel well equipped to undertake their volunteer role.

Our Community Influencers support us by:

- Scrutinising papers ahead of meetings attended by our team, such as the Health and Wellbeing Board and the Quality and Performance Board.
- Reading local NHS providers' Quality Accounts to help us stay abreast of key issues and their priorities.
- Representing us at meetings, across Surrey and at the local ICP level (for example Trust or commissioner Boards, AGMs, Stakeholder Reference Groups and operational groups).
- Supporting us with building relationships

"Our volunteers gave **780 hours** of their time this quarter"

with our partners within the NHS and with voluntary and community groups in their local area.

• Working closely with our staff team to share insights and information.

We have continued to hold regular 6-weekly Community Influencer powwows to provide peer support for the 18 volunteers who support us in this role across the county. This quarter, we have undertaken a 'passions' audit to help us to understand which areas of health and social care our Community Influencers have expertise in and which areas they are most passionate about. This will enable us to involve our highly qualified volunteers in the areas of our work they are most interested in, and where they can add the most value.

We also continue to develop their skills and knowledge by providing training opportunities. This quarter we held a training session on Equality Impact Assessments. The workshop explored the Equality Act and Public Sector Duty and our volunteers had a go at scrutinising live examples of Equality Impact Assessments recently undertaken by our system partners in the NHS and County Council.



#### Key meetings attended by our Community Influencers this month:

- First Community Health and Care Forum (East Surrey)
- Tandridge Health and Wellbeing Board
- Digital Focus Community Forum
- Surrey Safeguarding Children's Partnership Engagement and Communications sub-group
- Learning Disabilities Partnership Board
- LeDeR Governance Panel
- Voluntary Action South West Surrey Older People's Network
- Local Valuing People meetings (across Surrey)
- Sexual Health Outreach Group
- South East Armed Forces Symposium
- Frimley Trust Patient Engagement Forum
- Surrey Heath Welcome Forum
- Surrey Heath Community Lunch
- Surrey and Borders Partnership (SaBP) Public Board Meeting
- Transforming Mental Health Care in Surrey (SaBP)
- Ask How I Am- National Voices Report and Campaign Launch
- 18 25 Mental Health Transformation Program - Young Adult Reference Group/ Task and Finish groups.
- North West Surrey Listening Group

Our volunteers have also supported with reading and commenting on provider Quality Accounts. Volunteer Liz Sawyer assisted us with commenting on Surrey sexual health provider, CNWL's Quality Accounts and thanks to her insightful comments has been invited to represent us at the CNWL Covid Co-production group. We also commented on NHS Royal Surrey Foundation Trust's Quality Accounts with volunteer support from our Guildford and Waverley volunteer group.

#### Volunteer spotlight:

#### Adam Connelly

Adam joins us as a Community Listener in our Guildford and Waverley volunteer group. He is passionate about people and their stories and is



excited about starting a volunteer role where he will be able to meet people and play a role in ensuring their stories are heard. Adam has worked as a recruiter in the health sector for several years, during which time he developed a working knowledge of how the NHS operates. He has also held research roles and has a PhD in Anthropology. He is currently in in the process of a career transition into digital content and storytelling and will hopefully be supporting us with creating engaging content for our social media platforms.

#### Ellie Marsh

Ellie joins us as a Community Influencer in our Surrey Downs volunteer group. Ellie has recently returned to live in Surrey having spent several years



working in international public health in London and abroad. In her current role, she works to improve access to health commodities in low and middle income countries. She has an undergraduate degree in Natural Sciences from the University of Cambridge and a Master's in Public Health from the London School of Hygiene and Tropical Medicine, where she studied epidemiology, statistics, health economics and the principles and practice of public health, including assessing health needs, strategy development, priority-setting and decision making. She is keen to use her expertise and experience to be give back to her community and would like to use her skills to improve health and social care services at a local level.

# Key dates and plans for the next three months - come and meet us!

### Healthwatch Surrey Board Meeting in Public

The next Board meeting in Public is on:

Tuesday 27th July, 2pm-4pm

The meeting will be held via Zoom.

Should you wish to join the meeting live then please email enquiries@ healthwatchsurrey.co.uk before Monday 26th July 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: 2nd November 2021

Venue: TBC (All welcome)





#### Engagement events planned in Q2. Come and chat to us!

#### Woodhatch & Whitebushes Community Fun Day East Surrey 24th July 2021, 11.30-2.30pm

#### Guildford High St (Holy Trinity)

Guildford and Waverley 28th July 2021, 11-2pm

#### Epsom Market Clocktower

Surrey Downs 10th August 2021, 11-2pm

#### **Redhill Market**

East Surrey 9th September 2021, 11-2pm

The Atrium - Camberley Surrey Heath Date to be confirmed, 11-2pm



### Publications planned in Q2

- June, July and August Insight Bulletins
- Discharge to Assess report
- Dementia report (due to be published September/October)

#### We are looking for a Digital Marketing Apprentice!

The apprenticeship is for 15 months during which time you will work alongside our team to learn skills in practical digital marketing, relationship marketing, online analytics and web technologies.

At the end of the apprenticeship, you will receive the following qualifications:

- BCS Level 3 Digital Marketer Apprenticeship
- Principles of Coding (BCS KM1)
- Marketing Principles (BCS KM2)
- Google Analytics IQ

For more information, please contact: recruitment@healthwatchsurrey.co.uk

## **Contact Us**





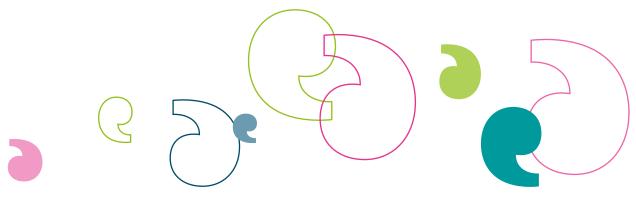
- Text/SMS: 07592 787533



Email: enquiries@  $\mathbf{\Sigma}$ healthwatchsurrey.co.uk healthwatchsurrey.co.uk







\*Note: all photos contained in this report are stock images or were taken pre-COVID-19