healthwatch Surrey



Local Healthwatch Influence & Impact Report

Quarter 2: July - September 2021

Relping shape health and social care services in Surrey

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Our influence and impact in Q2



Our job as a local Healthwatch is to increase the involvement of local people in their NHS and social care services, by providing an independent channel for their views, experiences and feedback; and by challenging and supporting commissioners and providers of services to involve, listen and act.

Hundreds of people share thousands of experiences with us every year. There are three mechanisms by which we bring this insight to local systems and use it to influence the decisions being made on the behalf of the people of Surrey:

- 1. Ongoing influence Constantly bringing the voice of the service user to the table through our attendance at key meetings, our regular 'what we've heard' meetings with key providers, and our Insight Bulletin.
- 2. Proactive reporting Spotlighting issues or concerns that we are hearing clusters of experiences about and getting these to the right places for further action; researching, reporting, and making recommendations for improvement to services under our Thematic Priorities
- 3. Enabling better listening and involvement Responding to requests for insight, partnering with decision-makers to enable them to develop services that meet the needs of all users, and challenging them to carry out their engagement and involvement duties well.

Ongoing Influence

This quarter we have:

- Continued to share our insight with the Care Quality Commission (CQC) to ensure patient feedback is shared effectively. As part of this, we have provided insight about local services as part of their planned inspections.
- Attended and shared insight at large system meetings such as Surrey Heartlands Quality and Performance Board and System Board; Carers Partnership Board; and Surrey Health and Wellbeing Board.
- Shared insight from patients and families/carers at Royal Surrey County Hospital, Epsom Hospital and Ashford & St Peters Hospitals, at Guildford & Waverley and North West Surrey Alliance Quality and Performance meetings; and at Surrey Heath Place.
- Attended the Royal Surrey Mental Health steering group, where we provided feedback from our volunteers about the draft mental health strategy. We shared our 'Carers' experience of Discharge to Assess' report at the Health Inequalities and Equalities group's September meeting.

Sharing the voice of service users

Carers and visiting

A patient who is a wheelchair user shared their experience with us about not being allowed a carer to accompany them in A&E. We shared this with the hospital concerned, who told us:

"I have spoken to the divisional chief nurse for Urgent and Emergency Care this morning and she tells me that they are aware there have been some issues around staff being reluctant to allow carers in, so she has spoken to staff to ensure they allow appropriate people to stay with patients. We have ordered display banners which outline our quidelines around who can stay, and what constitutes a carer. as we can't assume that everyone who arrives in a wheelchair must have someone stay with them, but equally we don't want to turn away people who might be important for the patient's wellbeing."



Carers assessment

Two young adults were struggling to look after their elderly grandmother, who had severe dementia and had been in and out of hospital. They were desperate for help and had tried and failed to get the assessments and support they needed from social care. We shared their experience with Adult Social Care who told us:

"There is significant learning for our teams in how they have managed the circumstances"

"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."

And were able to share this with the family who

said: "Thank you so much for helping us forward our concerns and making them heard."



Our monthly Insight Bulletins

Our regular Insight Bulletin highlights issues we've heard about recently, and is shared with over 800 people - providers. commissioners, patients, advocates - and we often receive requests relating to the topics we have covered.

https://www.healthwatchsurrey.co.uk/our-work/influencingchange-and-improvements/monthly-insight-bulletins/

This guarter our bulletins have shared insight relating to people's experience of mental health services, misunderstanding of dental surgery lists, and confusion over financing of adult social care among others. We also reported our first few experiences relating to Long Covid.

To sign up to our monthly Insight Bulletin please email enquiries@healthwatchsurrey.co.uk

healthwatch Surrey

Insight Bulletin: August 2021

One of the statutory duties of Healthwatch Surrey is to share the experiences of local mode with argumations who make decisions about health and social care services. Our monthly insight Bulletins shine a light on some of the themes we have heard about over the past few months.

The themes highlighted in this month's bulletin are

- Prate for GPs, cancer treatment and ambulance staff
 GP Nental Health Referral Rejections
- Long Covid experiences beginning to be shared with us
 Dur latest reports Epecare and Remote Consultations

If there is a there you would like to hear more about please contact Kate.Scribbinabeeithwatchourney.co.uk

Praise and Thanks

Every month we hear from local people who have experienced excella

"I had a continu ious headache_[Covid PCR test negative so] I completed the Thidd is continuous headable, given or risk test registries may compense are form on the sub-field free weakate to request to appeak to a Q^{-1} for each the same day. The GP made me is face here face appealment on the Wednesday. He dated me to intum in T week if my symptoms did not get any better. The keek later i received an unspected telephone cell from the GP to check if my symptoms were any better. This was very consuming.

for fast and empathetic cancer treatment: "nox's portner was diagnosed with breast cancer ... on 31st December 2020 and referred to hospital that day...bley actended the first appointment on 12ch January within a 16 day harper...be results were reviewed, and a care plan and additional scans to support plans and future treatment were appred. These were completed within 16 days. They not again on 1st february and agreed a review frestment plan requiring support...To their surprise, and retief, the surgery was booted for 16ch February.

September 21

August 21 Insight Bulletin D2

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Proactive Reporting

Reports triggered by clusters of experiences

Our community engagement empowers people to tell us about the health and social care experiences that matter to them. When we hear a cluster of experiences relating to a single issue these are analysed and reported to providers and commissioners.

This quarter we have published the following reports:

Pregnancy loss in Surrey

A number of women got in touch with us to share their experiences of pregnancy loss. Some told us what a difference good support they'd had from healthcare professionals made; others told us about lack of support, insensitive treatment and poor communication. In May 2021, we published our Treatment of pregnancy loss in Surrey hospitals report: <u>https://www.healthwatchsurrey.co.uk/wpcontent/uploads/2021/05/Treatment-of-pregnancyloss-in-Surrey-hospitals-May-2021.pdf.</u>

Based on our analysis we recommended:

- Providers should ensure that adequate mental health support is offered to those who have experienced pregnancy loss.
- All acute trusts should offer commemorative certification for foetuses that are not classified as stillbirths and ensure staff are well informed of the process.
- Hospitals should consider regular refresher training in compassion and sensitivity, and explore ways to embed these in communication to patients.

IMPACT:

- Royal Surrey County Hospital has checked that their policies are in line with our recommendations
- East Surrey Hospitalintroduced certificates of commemoration, conducted a review of the Early Pregnancy Unit and reviewed discharge and access to perinatal mental health support.

Communicating to patients about delayed hospital appointments

During the pandemic, many hospital appointments have inevitably been delayed. On the whole Surrey residents

were very stoic about this, understanding that the NHS was under unprecedented pressure and accepted service cancellations; indeed, some people chose to cancel appointments themselves.

However, as time has gone on and lockdown eased some people started to feel frustration and questioned when they would get seen. Some had been told their treatment was delayed or cancelled but had not been given any information about what would happen next.

We wrote to the hospitals to find out how they were planning to communicate with patients on their waiting lists.

All trusts replied, and we reported their detailed responses here: <u>https://www.healthwatchsurrey.co.uk/</u> <u>wp-content/uploads/2021/07/Communicating-to-</u> <u>patients-about-delayed-hospital-appointments-July-</u> <u>2021-summary.pdf</u>

The hospitals are taking various approaches to communication. All are working to update their websites, but adoption of a single point of contact (a strong recommendation in the NHS guidelines) varies from hospital to hospital, as do approaches to their frequency of communication with patients.

IMPACT:

• East Surrey Hospital are considering introducing ReciteMe to make their website more accessible. We have also been invited to join a steering group looking at making improvements for patients to their website.



Eye Care in Surrey

After hearing a number of stories from people accessing eye care we published a report exploring some of the difficulties people had experienced, which included delays in accessing care; gaps between high street opticians and hospital care; and issues with diagnosis.

https://www.healthwatchsurrey.co.uk/wp-content/ uploads/2021/08/What-we-are-hearing-about-Eye-Care-Aug-21.pdf.

IMPACT:

- We highlighted the issue at Surrey Heartlands Quality and Performance Board who are going to look into this aspect of care.
- We have been asked to contribute to work looking at the pathway and treatment options.
- One hospital also told us that the feedback within the report was useful to their work that is already underway on improving the experience and outcomes for patients accessing ophthalmology services.



GP access – untangling the drivers of frustration

One of the issues that we hear most about from Surrey residents relates to remote access and online services. The majority relate to GP services, and given the increasing pressure on GP access we ran a dedicated analysis to deliver better understanding of the patient experience and perspective.

https://www.healthwatchsurrey.co.uk/wp-content/ uploads/2021/10/Review-of-remote-consultationexperiences.pdf

Our analysis revealed that from the patient perspective there are three distinct pressure points in the patient journey:

- Contacting the surgery to request care
- Triage
- Consultation method

Our report recommended:

- Address these three areas separately when addressing short term pressure or designing future service models
- Communicate honestly, positively and proactively with patients.

IMPACT:

- This analysis has informed the development of the Surrey Heartlands Primary Care Model Citizen Co-design Project, and we will be partnering with Surrey Heartlands as the project develops
- Surrey Heartlands have designed communication materials relating to Triage processes for GP Surgeries to disseminate, and we have contributed to the content of this.



Thematic Priority Research Reports

Carers' experience of Discharge to Assess

https://www.healthwatchsurrey.co.uk/wp-content/uploads/2021/10/Carers-Discharge-2021-NV-F.pdf

This quarter has seen the completion of our latest research report under our "Care at Home" thematic priority "Carers' Experience of Discharge to Assess". This project was undertaken in partnership with Action for Carers.

The research gathered the experiences of 79 carers in a survey, and we undertook depth interviews with 12 of those carers to add depth to our insight.

While we heard that some people had excellent experiences – even at the height of the pandemic – many struggled. The key issues were:

- Poor communication between the hospital ward and carers
- Lack of consultation over discharge arrangements
- And poor explanation of discharge and assessment processes.

The report makes four recommendations that are relevant to both hospitals and to social care. We have shared the report with all Surrey Hospitals and with Surrey County Council and are waiting for their formal responses to our recommendations.

IMPACT:

The main findings have already been shared at the Surrey Heartlands System Board, and the Carers Partnership Group (which includes carers' service commissioners, providers, and VCFS). We will be discussing the report at meetings with the Royal Surrey County Hopsital and Frimley Park Hospital patient forum in November, presenting it at the Mental Health Delivery Board, and we know there is keen interest in our report accross the system.

Lived Experience of the Early Years after Dementia Diagnosis



Our project looking at how people in Surrey find their way to support in the early years after diagnosis (when they have been discharged by mental health services back to the community) is nearing completion. We expect to be taking our recommendations to the Surrey Heartlands Dementia Strategy Action Board in the coming months, but we have already shared emerging findings with the Board.

IMPACT:

The joint chair of the Dementia Strategy Action Board commented *"the findings will be integral in the refresh of our dementia strategy".*

Enabling better listening and involvement



Helping a hospital get feedback from patients

We recently worked with Epsom Hospital to help them talk to people in the Emergency Department to find out why and how they had ended up there. The survey, which was part of a Think 111 campaign and took place over 3 days, was to establish if people consult 111 or another service before going to A&E. People were also able to tell us about their waiting times and experience of the consultant, nursing and reception teams. Epsom will use the feedback we gathered to make recommendations to the system on how to improve the urgent care pathway and patients' ability to access the right healthcare.

Ensuring patients are at the heart of the Stroke Care Pathway

Healthwatch Surrey have a history of supporting patient voices in the development of the stroke care pathway. Ranging from our report from our Stroke Pathway Project in 2013 to our review of experiences of stroke services in 2020, we have always endeavoured to ensure that patients' and their families' and carers' voices are heard and that services remain responsive their wide-ranging needs. To further this aim, we have become a member of the Integrated Stroke Delivery Network (ISDN) to encourage the consideration of patient experience as part of ongoing work. We will support the ISDN Board's decision in establishing a forum that includes those with lived experience, along with their carers and families. We will also be working alongside partners such as Stroke Association and other local Healthwatch to get this off the ground, ensuring as services continue to develop that patient voices will always be present.

Helping GP surgeries with communications to their patients

We know that all areas of the NHS are under great pressure and seeing increase in demand at the moment, and GP surgeries, as the gatekeepers to much of our system, are often at the sharp end of patient feedback and frustration. Access to primary care has undergone a huge change in a short period of time, and we are all trying to understand what that means for the future and maximising on what's worked well, whilst managing the current pressures. Honest, proactive, consistent, and collaborative communications are vital to help patients understand the routes to access the range of care from different professionals and how to navigate these. Our volunteers have worked recently with a number of surgeries, patient groups and primary care networks to "test drive" their comms and make constructive suggestions to ensure that comms are as clear and helpful as possible.



Agenda-free listening return to face to face engagement

We are delighted to get back to listening to people face-to-face in public spaces this quarter. Getting out and about into the community means we can hear from a diverse range of people and can gather experiences that are important to them. We have listened to people at family fun days and a wellness festival over the summer, as well as the high street at Epsom Square, Redhill market area and Guildford High Street.

We have also visited some groups which have returned to face to face meetings. One of our volunteers joined the Guildford hard of hearing group, and we also visited Men in Sheds (Dorking), gathering experiences from their regular members. Blossom LGBTQ+ group asked their members if the pandemic has affected any of their access to care. We were delighted to be invited back to join Guildford and Waverley Cancer support group; MelaNoMore by Zoom.

Looking forward to Q3 we are excited to be returning to our regular pattern of listening events. These are focussed on one geographical area a quarter, starting with Guildford and Waverley.



Acting on what we hear

300 people shared their health and social care experiences with us this quarter

164 people contacted our Helpdesk for information and advice

We heard 58 experiences through our Citizens Advice partners



Our engagement team and volunteers heard 60 experiences



We then shared these experiences with commissioners, providers and regulators through a series of "What We've Heard" meetings.

Helpdesk

164

Empowering people with information and advice

This quarter 620 people have received information and advice through our Helpdesk and Citizens Advice Partners.

ers. 456

Citizens

Advice

Here are some examples of how we have helped people get the support they need this quarter.

Help with information about requesting a social care assessment

Julia* was struggling to care for her husband at home. Her husband has several disabilities, and she requested advice on what additional help there may be to help her care for her husband. Julia was taken through the process to request a social care assessment and how to complete the online financial assessment on the Surrey County Council website.

IMPACT:

Julia then had the information she needed to complete her online application and get the care she needed for her husband.

Help with resolving a complaint about a care provider

Andrew* has several health issues and has a daily care package including cleaning calls twice a week. The cleaning calls had been stopped at very short notice following a complaint he had made about the standard of service. As Andrew cannot physically clean his own home he was upset about the situation and had to rely on his neighbour to do the cleaning. Andrew had tried calling the council and the care agency a number of times but was not able to get a resolution to his complaint. Andrew was given information he needed to make a complaint including a draft letter and guidance on how to complete and send the letter. He was also signposted to other organisations that could help him and was put in touch with a Wellness Adviser with regards to extra support for him.

IMPACT:

Andrew was given information about the process and the options available to him to resolve his issue. Subsequently the decision has been made to change care provider for Andrew and he is now in contact with a Wellness Adviser for continued support going forward.





Help to make a complaint to Surrey County Council

Mary's adult daughter has disabilities and uses a wheelchair. She has considerable difficulty getting about the house. Her property had been assessed by an Occupational Therapist and plans were drawn up to make alterations but, two years later, the work had not been progressed and she was at her wits end. Mary was given the information she need to make a formal complaint and request a timeframe from Surrey County Council.

IMPACT:

Mary was able to make a formal complaint to the council, and the next day she received a call from them reassuring her that the work and grant would be chased up and that her daughter would be accommodated in a Care Home until the work was completed.

Help accessing emergency dental care

Suzanne* had managed to get an emergency dental appointment for an abscess and a loose tooth. They had prescribed antibiotics but could not carry out the work required. She informed us that she had tried 30 dentists asking for an appointment for NHS treatment with no luck at any of them. The pain was excruciating. We were able to provide Suzanne with alternative websites providing details of dentists that she had not tried.

IMPACT:

Suzanne was able to use the information provided to find a dentist and get an appointment confirmed.

Independent Health Complaints Advocacy

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.

During the last quarter 69 people contacted the service for information and advice. There were 24 new referrals and 95 people in total were supported through the complaints process.

Some examples of how we have supported people to make a complaint this quarter include;

Support making a complaint following the death of patient in hospital

Following the death of her mother we were contacted by a lady needing help to make a formal complaint to a Surrey Hospital. The lady was advised of the complaints process and supported by an advocate to write a formal letter of complaint outlining the issues that had arisen whilst her mother was in the care of the hospital. Following a number of delays to the time frame originally set, the hospital provided a written response to the questions raised. The daughter remains dissatisfied and is currently considering whether to take legal action against the hospital or whether to go further with the NHS complaints procedure with the support of the advocate.

Support for a Surrey resident after poor communication at Kingston Hospital

A lady living in Surrey, contacted us for support in making a complaint to Kingston Hospital after she was admitted to A&E there with a broken collar bone. Following her treatment she didn't hear anything from the hospital and no details were passed to her GP. After suffering ongoing pain and loss of movement, further investigation showed her collar bone was still broken and she was informed that the she should have received follow-up sooner. She was referred to the Royal Surrey and now requires surgery to fix the bone together. An Advocate contacted her to discuss the complaint and then drafted a complaint to the hospital. A response was forthcoming but the lady was unhappy with it as the hospital imply that the treatment was carried out correctly, although the hospital have admitted they did not inform the GP and did not arrange a follow-up appointment. Steps were being taken internally to remind all Doctors in the Department of the correct procedures. As a result, the Advocate has now discussed the options moving forward. The lady is now considering whether to take the matter further and deciding whether or not to pursue either in writing, at a Local Resolution Meeting with the Hospital, or via the Parliamentary Health Service Ombudsman.

If you need support to make a complaint about NHS care our free, independent advocacy service is provided by Surrey Independent Living Council (SILC)

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

Contact us

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