



**Steve Inett  
Consultancy**

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# Healthwatch Surrey Reflective Review Report

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Steve Inett Consultancy

81 Sydney Road  
Deal CT149XD

07593 452242  
steve@steveinettconsultancy.co.uk

# Healthwatch Surrey Reflective Review Report

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## Introduction

Healthwatch Surrey (HWSy) undertakes a Reflective Review regularly to understand the views of stakeholders and partners in health and social care. The Review seeks to understand how effective HWSy is in carrying out its role, from the perspective of those stakeholders and partners.

The report will inform the strategies and plans of HWSy for 2023/24.

## Methodology

### Preparation

The previous Reflective Review was undertaken in 2018 and the learning from that exercise was applied to this review, such as reviewing the distribution list and revising or removing some of the questions used for that report. This therefore impacts significantly on the ability to effectively compare the results of this review with the results of 2018.

The survey questions were adapted from the 2018 Reflective Review, revised and redrafted with the HWSy staff team to ensure they reflected the current vision and strategic aims of HWSy. It was tested by HWSy staff and volunteers for a week prior to the survey opening. The survey was open from 2 March to 27 March 2023.

Respondents were invited to answer multiple choice questions. Each question then asked for comments on the reason for their response.

Below are summaries of the findings for each question. After the summary section of this report are the details of the responses for each question. Each comment was analysed individually for sentiment either positive, neutral or negative. However some comments included more than one sentiment so the predominant sentiment was allocated. Some mostly positive comments included areas for improvement. Most neutral comments were due to lack of awareness, most negative comments highlighted areas for improvement.

### Distribution

The assessment of the previous Reflective Review highlighted that it had been distributed widely to over 1300 people. Although a good response rate was achieved, there were higher numbers of wider public responses, which skewed the stakeholder views. For example, more responses were returned that indicated they had not heard of HWSy or were not sufficiently aware of its work to be able to comment. Whilst this was valuable feedback, it made it more difficult to fully understand how HWSy was performing from those whom they worked with more closely.

The aim of this Reflective Review was to understand the attitudes of strategic stakeholders, so a targeted distribution list was produced. Stakeholder mapping was undertaken using a range of criteria such as geographical, service, organisation, function and role to produce a comprehensive list of key stakeholder and partner groups. The full list can be found in [Appendix 2](#).

195 individuals were identified from the stakeholder mapping and sent the survey.

## Survey Questions

The survey covered four main areas:

- **About You** - understanding the geographical area, function and role of respondents
- **Our Vision** - evaluating the Vision for HWSy
- **Our Impact** - understanding the impact of HWSy's work
- **Commissioning Healthwatch Surrey** - understanding the views from those that have commissioned work from HWSy

The Vision of HWSy includes:

- Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.
- Healthwatch Surrey's role, function and services are known, understood and valued by local people who therefore readily contact us when they need us.
- Our influencing is based on sound knowledge of local issues and the insight and experiences of local people.

What we do

We:

- Champion public and user involvement in decision making and design of services
- Enable people to share views and concerns about local health and social care services
- Provide evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans
- Provide, or signpost to, information about local services and how to access them
- Provide feedback to the Care Quality Commission
- Produce reports and recommendations to influence the way services are designed and delivered
- Offer advocacy support for complaints about NHS services

These formed the basis for questions to understand how well stakeholders felt HWSy was achieving its vision, and the impact it's activity was achieving.

The survey questions can be found in [Appendix 1](#).

## Accessibility

It was presumed that most stakeholders would prefer to respond to the survey online. To address the needs of anyone needing alternative formats or additional support, the invitation email and the first question of the online survey provided the contact details for Steve Inett Consultancy to discuss what formats and support were needed. No-one requested alternative formats or support.

## Summary of Findings

### Responses

There were a total of 78 responses

60 responses were fully completed

18 responses were partially completed

### Respondents

By a significant margin the highest number of responses were from respondents that worked Surrey-wide, with a significant number of commissioners, system leaders, senior leadership and senior managers. It can be assumed they would have a high level overview of HWSY activity. Other respondents were distributed fairly evenly between Guildford & Waverley, North West Surrey, Surrey Heath, East Surrey and Surrey Downs, with the lowest response rate from North East Hants & Farnham. It can be concluded that the survey has been reasonably successful at attracting respondents from the wide range of geographical areas in Surrey.

The survey has reached a wide range of roles, but has particularly captured the views of senior leaders and managers.

The largest proportion of respondents were from commissioners of health and social care services, with the second largest from providers of health services, followed by board or committee leaders. There was fairly even spread of the remaining responses from Voluntary, Community, and Social Enterprise (VCSE), Place based representatives and social care providers.

HWSy may want to seek additional feedback from social care providers, but helpfully a membership organisation for these providers also responded.

The fuller analysis can be found [here](#).

### Views on the Vision of Healthwatch Surrey

This section aimed to gather views on whether HWSy is achieving its strategic aims, namely:

1. Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.
2. Healthwatch Surrey's role, function and services are known, understood and valued by local people who therefore readily contact us when they need us.
3. Our influencing is based on sound knowledge of local issues and the insight and experiences of local people.

There was clear agreement that Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey, but one comment highlighted the need for more work in social care.

There was not the same level of consensus on the second strategic aim, with 45% of responses and comments observing that not enough of the public know enough about HWSy. However 55% of respondents felt this aim was being achieved.

There were the highest levels of support for HWSY influencing being based on sound knowledge of local issues and the insight and experiences of local people. Only 16% (4

comments) of responses highlighted areas for improvement such as the need to ensure they are reaching every community, especially those that are under-represented.

The fuller analysis can be found [here](#).

## **Views on the Impact of Healthwatch Surrey**

This section aimed to gather the views of stakeholders on what impact or influence HWSy was achieving via the activities in the HWSy Vision.

### **1. Champion public and user involvement in decision making and design of services**

Respondents felt there was influence and impact. 80% of respondents recognised some impact or significant impact, 2 respondents felt more needed to be done but no one felt there was no influence or impact.

83% of comments were positive, with the remainder being neutral or not aware because of their role.

The fuller analysis can be found [here](#).

### **2. Enable people to share views and concerns about local health and social care services**

There was slightly higher recognition of impact for this activity, with 88% seeing some or significant influence or impact. 77% of the 18 comments were positive with neutral comments being through lack of awareness.

The fuller analysis can be found [here](#).

### **3. Provide evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans**

Although a large proportion of responses and comments felt there was some or significant influence or impact, a larger proportion were not aware or unsure of what HWSy does in this area.

The fuller analysis can be found [here](#).

### **4. Provide, or signpost to, information about local services and how to access them**

There was more uncertainty about the impact of providing, or signposting to, information about local services and how to access them, fewer people saw significant influence or impact or were unsure or not aware. The only comment highlighting areas for improvement noted that not all patients are aware of Healthwatch, but a lack of awareness of this function features in a lot of responses. The fuller analysis can be found [here](#).

## 5. Provide feedback to the Care Quality Commission

There was more uncertainty about the impact of providing feedback to the Care Quality Commission, fewer people saw significant influence or impact or they were unsure or not aware. CQC inspectors provided positive feedback on the role HWSy plays, but most people were not aware of the impact or influence of this function.

The fuller analysis can be found [here](#).

## 6. Produce reports and recommendations to influence the way services are designed and delivered

Generally respondents felt HWSy were impactful in producing reports and recommendations to influence the way services are designed and delivered. A small number of respondents felt the impact was not visible to them, no one indicated that there was no influence or impact.

The fuller analysis can be found [here](#).

## 7. Offer advocacy support for complaints about NHS services

43% of respondents felt there was some influence or impact through the advocacy function, a small percentage (22%) saw high impact but otherwise people were not aware of this function.

The fuller analysis can be found [here](#).

## Feedback on the Commissioned Work of Healthwatch Surrey

Over half of the 49 respondents were aware of HWSy's commissioned work, but only 9 respondents gave further information on their experience. 6 comments were positive about the commissioned work of HWSy, 3 comments were neutral.

Those that had commissioned HWSy to do additional projects and gave additional information were positive about the experience. Of the 3 comments that were neutral 2 were aware of the possibility but had not yet commissioned HWSy.

The fuller analysis can be found [here](#).

## Comparison with previous Reflective Review.

The previous Reflective Review was undertaken in 2018 and was distributed to a much larger distribution list. The 2018 survey was shared with 1315 stakeholders and received 148 responses. It recommended that the distribution list was revised which was done for this review.



Roles, functions and geographic area categories were all updated for this review which makes direct comparison of response rates challenging however some comparisons are noted:

|   | <b>2018 Reflective Review</b> | <b>2023 Reflective Review</b> |
|---|-------------------------------|-------------------------------|
| <b>Senior leadership/<br/>managers responses</b>              | 27%                           | 58%                           |
| <b>Commissioners and<br/>providers of health<br/>services</b> | 21%                           | 60%                           |
| <b>VCSE</b>   | 23%                           | 6%                            |

*Table 1 Responses 2018 Review vs 2023 Review*

This would indicate that the review has been successful in capturing the views of senior leaders and health commissioners and providers. HWSy may want to consider additional exercises to capture more views of the VCSE and social care sectors.

Because of the different audiences that responded in 2018, direct comparisons are not possible but awareness of HWSy aims and activity seems higher overall in this review than in 2018.

The 2018 review drew a correlation between awareness of HWSy and positive perceptions, which appears to be reinforced in this review.

## About respondents

The aim of the survey was to gather views from as many different stakeholders as possible, as set out in the stakeholder mapping groups in [Appendix 2](#).

195 stakeholders were sent the survey, there were a total of 78 responses. Respondents were invited to share their name, function and role details, 23 respondents did this.

In order to gather information about respondents who did not wish to give their details, questions 2 to 4 of the survey asked:

### Q2. Which area of Surrey do you work in?

- Surrey-wide
- Guildford & Waverley
- North West Surrey
- Surrey Heath
- North East Hants & Farnham
- East Surrey
- Surrey Downs

### Q3. What aspect of the health and social care system do you represent? (click as many as relevant)

- Commissioner of health services
- Commissioner of social care services
- Provider of health services
- Provider of social care services
- PLACE based representative
- Voluntary, Community or Faith sector organisation
- System Leadership, Board or Committee
- Regulator
- Other (please specify):

### Q4. Which of the following best describes your role?

- Senior Leadership / Chief Executive / Director
- Senior Manager
- Clinician / Clinical Lead
- Complaints / PALS
- Communications, Engagement, Patient/Public Involvement
- MP / Elected Councillor
- Volunteer / Lay Member
- Other (please specify):

60 responses, a mixture of fully and partially completed, gave information on their geography, function and role.

## Role

### Analysis

The 23 respondents who gave their details were from the following stakeholder mapping groups:

| <b>Stakeholder Mapping Group</b>              | <b>No. of Responses</b> |
|---|-------------------------|
| <b>Surrey wide commissioners and services</b> | 1                       |
| <b>Hospitals</b>                              | 1                       |
| <b>Place leads</b>                            | 1                       |
| <b>Primary Care /PCNs/Federations</b>         | 2                       |
| <b>Comms and Engagement</b>                   | 1                       |
| <b>Senior Leaders</b>                         | 3                       |
| <b>Chief Execs of large charities</b>         | 2                       |
| <b>Membership organisations and alliances</b> | 4                       |
| <b>Carers Partnership Board</b>               | 2                       |
| <b>Dementia strategy Board</b>                | 1                       |
| <b>Integrated Stroke Delivery Network</b>     | 2                       |
| <b>Care Quality Commission</b>                | 2                       |
| <b>Healthwatch England</b>                    | 1                       |

*Table 2 Numbers of Responses from Stakeholder Mapping Groups*

There were 47 responses that did not give their details but gave their role.

The option for respondents to identify their role was in Question 4 of the survey, the options were:

- Senior Leadership / Chief Executive / Director
- Senior Manager
- Clinician / Clinical Lead
- Complaints / PALS
- Communications, Engagement, Patient/Public Involvement
- MP / Elected Councillor
- Volunteer / Lay Member
- Other

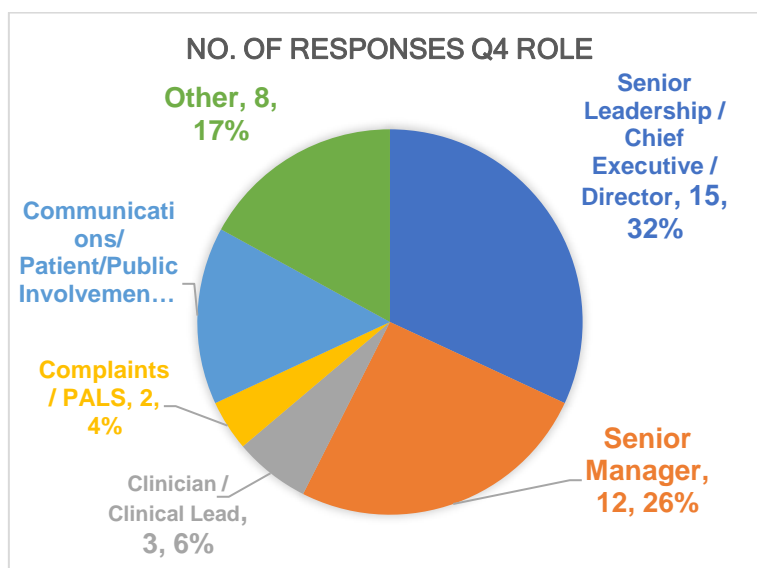


Figure 1 Numbers of responses from Roles set out in Survey Q4

The table below sets out the roles described by respondents under 'Other'

| Role from survey Q4 | No. of responses | Additional details provided via the 'other' option   |
|---------------------|------------------|--|
| Other               | 8                | <ol style="list-style-type: none"> <li>1. Inspector</li> <li>2. CQC ASC inspector</li> <li>3. Adult social care front line operations</li> <li>4. Inspector</li> <li>5. Quality Lead</li> <li>6. Input has also been obtained from CEO, Medical Director and COO for these responses</li> <li>7. Clinical Advisor (retired clinician)</li> <li>8. Regulator</li> </ol> |

Table 3 Numbers of responses from Roles set out in Survey Q4

## Conclusions

It is helpful that 23 respondents gave their details to allow cross reference with the stakeholder mapping. The analysis shows a spread across a broad range of stakeholder groups, with the highest number being from Membership organisations & alliances and Senior Leaders.

Of the further 47 responses that didn't give details but answered Q4, senior leaders and managers make up almost 60% of respondents with a fairly even spread across the other roles.

Those that gave their role under 'other' helpfully identify inspectors and a social care front line worker, as well as indicating a team approach to one response within a health provider.

This indicates the survey has reached a wide range of roles, but has particularly captured the views of senior leaders and managers.

## Function

### Analysis

47 respondents also gave their function, or the aspect of the health and social care system they represent in their responses to Q3:

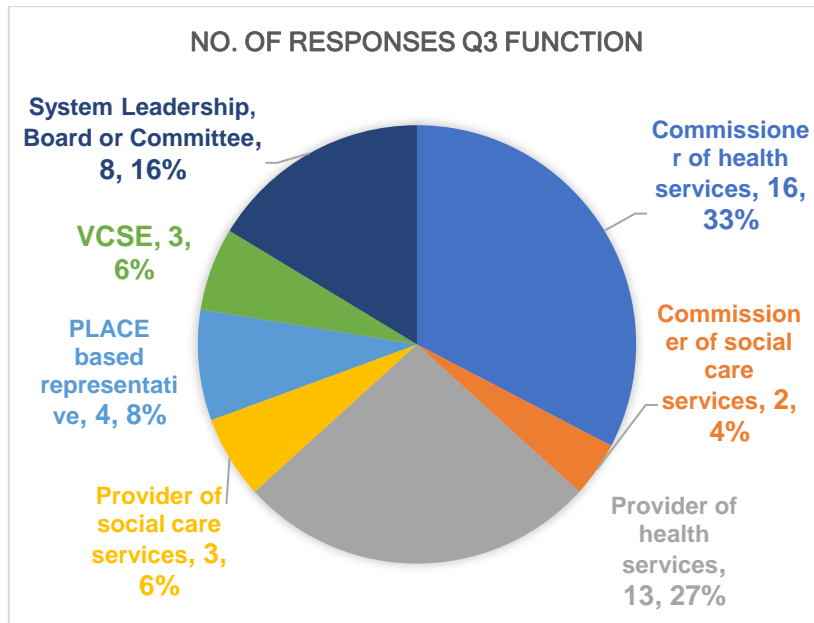


Figure 2 Numbers of responses from Roles set out in Survey Q3

The table below sets out the roles described by respondents under 'Other'

| Function | No. of responses  |
|----------|---|
| Other    | <ol style="list-style-type: none"> <li>1. Regulator</li> <li>2. Communications and Engagement</li> <li>3. Membership organisation representing and supporting providers of adult social care</li> </ol> |

Table 4 Other Functions identified by respondents in Q3

### Conclusions

The largest proportion of respondents were from commissioners of health and social care services, with the second largest from providers of health services, followed by board or committee leaders. There was fairly even spread of the remaining responses from VCSE, PLACE based representatives and social care providers.

HWSy may want to seek additional feedback from social care providers, but helpfully a membership organisation for these providers also responded.

## Geography

### Analysis

The survey asked respondents to identify the geographical area of Surrey they worked within. There were 74 respondents to this question but not everyone went on to identify their role or function. A detailed breakdown is provided below, setting out the number of responses for each area (some respondents worked in more than one area) and the functions and roles identified in each geography.

| Area   | Commissioner of health services | Commissioner of social care services | Provider of health services   | Provider of social care services | PLACE based representative | Voluntary, Community or Faith sector organisation | System Leadership, Board or Committee | Regulator | Senior Leadership / Chief Executive / Director | Senior Manager | Clinician / Clinical Lead | Complaints / PALS | Communications, Engagement, PPE | MP / Elected Councillor | Volunteer / Lay Member |
|--|---------------------------------|--------------------------------------|---|----------------------------------|----------------------------|---|---------------------------------------|-----------|--|----------------|---------------------------|-------------------|---------------------------------|-------------------------|------------------------|
| <b>Surrey-wide (34 responses)</b>  | 19                              | 2                                    | 2   | 2                                | 1                          | 4   | 8                                     | 6         | 4  | 9              | 1                         | 1                 | 3                               | 0                       | 1                      |
|  | Other roles                     |                                      | Clinical Adviser, Quality Lead, Adult social care front line operations, Membership organisation representing and supporting providers of adult social care |                                  |                            |   |                                       |           |  |                |                           |                   |                                 |                         |                        |
| <b>Guildford &amp; Waverley (8 responses, 2 also ticked Surrey wide)</b>   | 4                               | 0                                    | 1   | 0                                | 1                          | 1   | 3                                     | 0         | 4  | 4              | 2                         | 0                 | 0                               | 0                       | 0                      |
| <b>NW Surrey (6 responses, 1 commissioner also ticked Guildford &amp; Waverley, East Surrey &amp; Surrey Downs)</b>  | 1                               | 0                                    | 5   | 0                                | 0                          | 0   | 1                                     | 0         | 4  | 3              | 0                         | 1                 | 0                               | 0                       | 0                      |
|  | Other roles                     |                                      | GP Federation, Input has also been obtained from CEO, Medical Director and COO for these responses from health provider (Marion Shipman)                    |                                  |                            |   |                                       |           |  |                |                           |                   |                                 |                         |                        |
| <b>Surrey Heath (7)</b>  | 3                               | 0                                    | 1   | 1                                | 2                          | 0   | 0                                     | 1         | 2  | 1              | 1                         | 0                 | 2                               | 0                       | 0                      |
|  | Other roles                     |                                      | Communications and Engagement Team - NHS Frimley x2   |                                  |                            |   |                                       |           |  |                |                           |                   |                                 |                         |                        |
| <b>NE Hants &amp; Farnham (5 all also ticked Surrey Heath)</b>   | 2                               | 0                                    | 0   | 0                                | 0                          | 0   | 0                                     | 1         | 0  | 1              | 0                         | 0                 | 1                               | 0                       | 0                      |
|  | Other roles                     |                                      | Communications and Engagement Team - NHS Frimley x2   |                                  |                            |   |                                       |           |  |                |                           |                   |                                 |                         |                        |
| <b>East Surrey (7, 1 also ticked Surrey wide, 1 health commissioner also ticked Guildford &amp; Waverley, Surrey Downs and North West Surrey, 2 also ticked just Surrey Downs)</b> | 2                               | 0                                    | 4   | 2                                | 0                          | 1   | 2                                     | 0         | 3  | 2              | 0                         | 0                 | 3                               | 0                       | 0                      |
| <b>Surrey Downs (7)</b>  | 1                               | 0                                    | 5   | 2                                | 1                          | 1   | 3                                     | 0         | 4  | 3              | 0                         | 0                 | 1                               | 0                       | 0                      |

Table 5 Number of responses for each geographical area (some respondents worked in more than one area) and the functions and roles identified in each geographical area

## **Conclusions**

By a significant margin the highest number of responses were from respondents that worked Surrey-wide, with a significant number of commissioners, system leaders, senior leadership and senior manager. It can be assumed they would have a high level overview of HWSY activity. Other respondents were distributed fairly evenly between Guildford & Waverley, North West Surrey, Surrey Heath, East Surrey and Surrey Downs, with the lowest response rate from North East Hants & Farnham. It can be concluded that the survey has been reasonably successful at attracting respondents from the wide range of geographical areas in Surrey.



## Feedback on the Vision of Healthwatch Surrey

3 questions were asked in this section which aimed to gather views on whether HWSy is achieving its strategic aims, namely:

- 1 Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.
- 2 Healthwatch Surrey's role, function and services are known, understood and valued by local people who therefore readily contact us when they need us.
- 3 Our influencing is based on sound knowledge of local issues and the insight and experiences of local people.

Below are the analyses of the responses to each three questions.

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

#### Analysis

The chart below summarises the views on the first strategic aim, of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

Do you agree with this statement? 'Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey.'

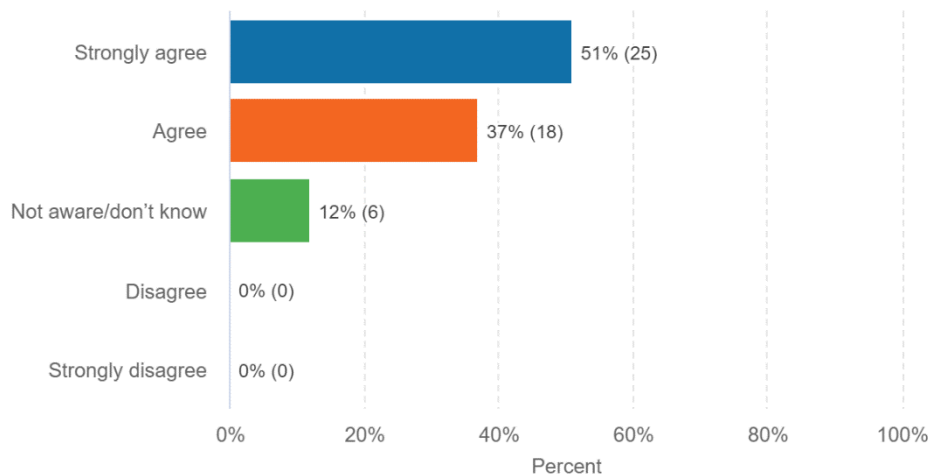


Figure 3 Responses for first strategic aim of HWSy Vision

As can be seen, there were no negative responses, with only 12% of responses feeling they were not aware or were unsure.

Respondents were asked to provide more detail to explain their views. 26 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 26 comments:

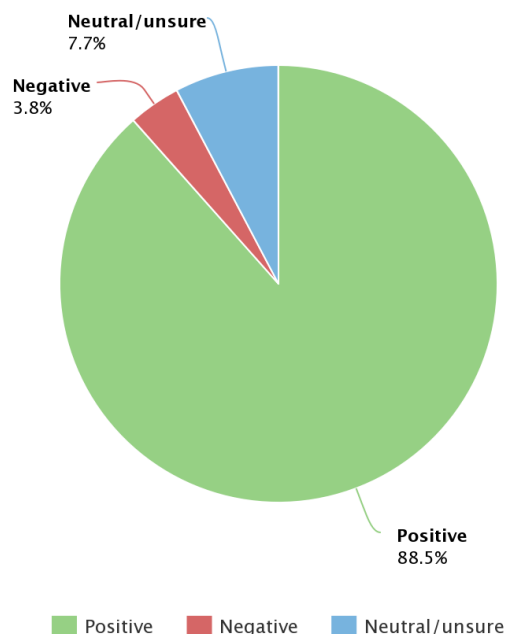


Figure 4 Summary of comment sentiment for first strategic aim of HWSy Vision

The only negative comment was:

*'More work on social care required.'*

The two neutral comments were:

*'We don't have much to do with each other'*

*'My role has not presented me with evidence to corroborate the statement. I have some contact with patients and providers but this does not come up in the context of my work.'*

Some examples of the positive comments were:

*'The team provide hugely valued local insight, they are respected and trusted. Healthwatch engagement is first class from consultation through to presentation.'*

*'I have witnessed how they lead the review of our Dementia Strategy and the positive outcomes that they achieved.'*

*'Healthwatch are well placed at gathering views from Surrey residents and are respected amongst colleagues as a key partner to involve in service change, delivery and development.'*

*'People are increasingly talking about HW, they are in demand to be invited to support with work etc'*

*'Only thing I would question in this statement is the word 'consumer' doesn't feel quite right but would agree they are a respected and credible champion for people who use health and social care (which is all of us)'*

## **Conclusions**

There was clear agreement that Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in Surrey, but one comment highlighted the need for more work in social care.

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

### Analysis

The chart below summarises the views on the second strategic aim, of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

Do you agree with this statement? ‘Healthwatch Surrey’s role, function and services are known, understood and valued by local people who therefore readily contact us when they need us.’

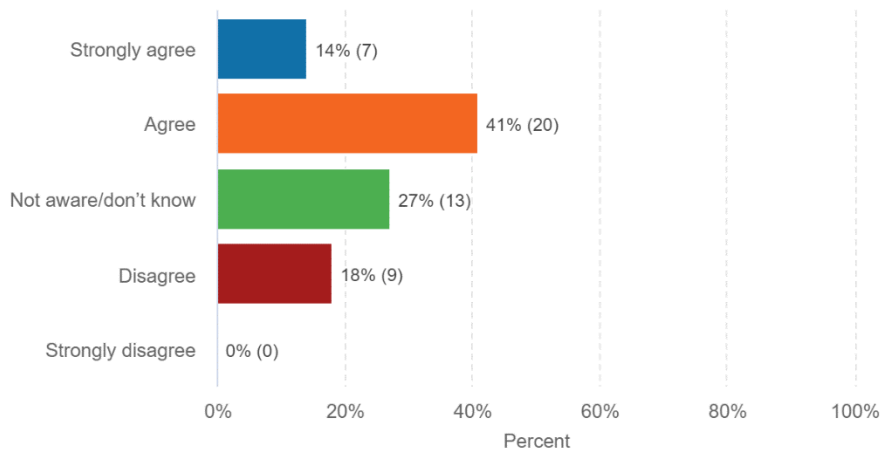


Figure 5 Responses for second strategic aim of HWSy Vision

Responses were much more mixed for this second strategic aim. 55% (27) of responses agreed or strongly agreed, but 45% of respondents were negative or not aware/unsure.

Respondents were asked to provide more detail to explain their views. 25 respondents gave further detail. These comments were analysed for sentiment either well know, more needs to be done or neutral/unsure. The chart below summarises sentiments of the 25 comments:

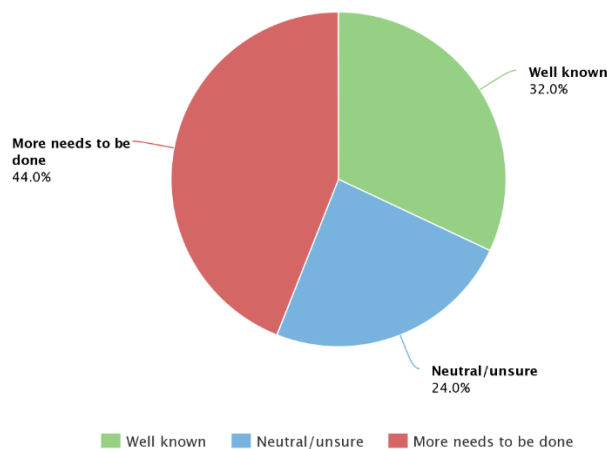


Figure 6 Summary of comment sentiment for second strategic aim of HWSy Vision

The sentiment of the comments highlighted more areas for improvement.  
Examples of comments for 'More needs to be done' were:

*'I know of Healthwatch from a professional capacity. I think the name means that the role they can play for people using social care is not always clearly understood'*

*'Recent Neighbourhood workshops in East Surrey have suggested that people who know Healthwatch absolutely value it but not all know about it'*

*'I am not sure all of the local population understand the role of Healthwatch'*

*'The tangible results of the local team not always well heralded, greater need for local press/media support. suggest Healthwatch Surrey have not fully realised their local ambition for profile and presence'*

*'I think the vast majority of the general public have no idea of you and what you do'  
'Although I think you can always do more to make people aware - from a Primary Care perspective maybe make some info that can be shared to every GP PPG (patient participation) group?'*

Neutral/unsure comments were:

*'It's hard to answer this. I think there is definitely increased awareness but not sure how many people'*

*'I don't know how familiar citizens generally are with Healthwatch'*

Some examples for comments for 'Well known' were:

*'Healthwatch has a trusted and respected reputation by local people and organisations. When we sought their engagement, they knew exactly what we needed and delivered vital feedback for our project.'*

*'We know that people are willing to share feedback with Healthwatch in a way that they won't directly with health services... Healthwatch regularly share updates, reports and carry out work on behalf of the NHS that supports us in our ability to shape and transform services based on patient feedback and experience. I can't comment directly on how well known they are by the wider population but their reports regularly demonstrate a good reach into local communities.'*

*'Healthwatch provide us with local insight from residents so we assume that residents know how to contact Healthwatch. They seem to be able to gather feedback from residents on a wide variety of services which is very valuable to commissioners.'*

## Conclusions

There was not the same level of consensus on the second strategic aim, with a number of responses and comments observing that not enough of the public know enough about HWSy. However a significant proportion of respondents felt this aim was being achieved.

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

#### Analysis

The chart below summarises the views on the third strategic aim, of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

Do you agree with the statement? 'Healthwatch Surrey's influencing is based on sound knowledge of local issues and the insight and experiences of local people.'

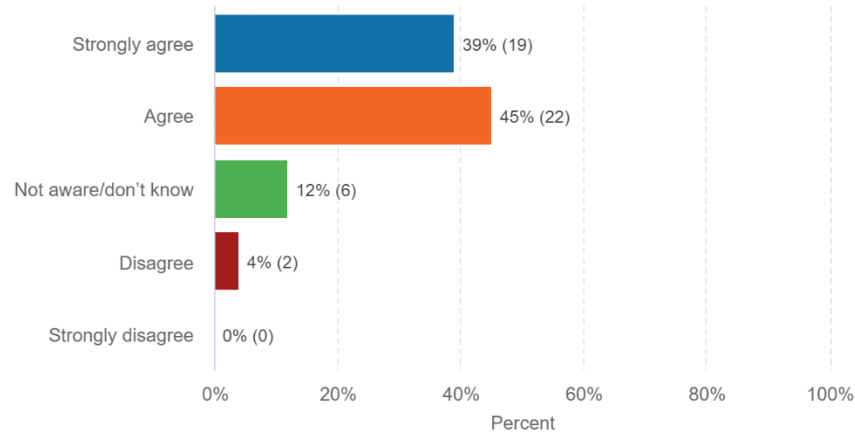


Figure 7 Responses for third strategic aim of HWSy Vision

This aim had the strongest support, 84% of respondents agreed or strongly agreed that HWSy is achieving this strategic aim, with 6 not aware and 2 respondents disagreeing.

Respondents were asked to provide more detail to explain their views. 26 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 26 comments:

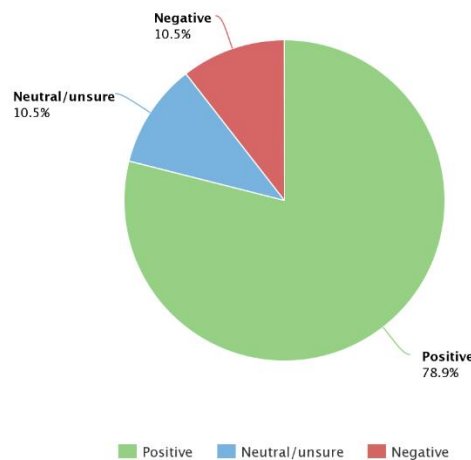


Figure 8 Summary of comment sentiment for third strategic aim of HWSy Vision

The comments indicated slightly less support with 78.9% positive with equal numbers of comments being negative or neutral.

Examples of the comments were:

### **Positive**

*'They are excellent at communication, insight and community engagement.'*

*'The way they present their data and stories both through the publications and at meetings shows a commitment, insight and knowledge of the issues that are effecting our population.'*

*'Healthwatch provide us with detailed resident feedback on commissioned services. I see them as a critical friend who challenges us to help make services better for residents.'*

*'I also think the work of Healthwatch's volunteers is very important which often comes down to the passion and advocacy of individuals.'*

*'From feedback in meetings, you gather info from service users and present to various forums providing insight. More work required by partners and actioning and closing the circle'*

### **Negative**

*'Surrey Healthwatch good at relaying and advocating on behalf of those that do manage to make contact...however there remains a large group of underserved who do not see Healthwatch as giving voice to their cultural needs or indeed see Healthwatch as their avenue of choice. Healthwatch reflects only a part of the population of Surrey, needs to consider local communities and the diversity in its representation when undertaking its outreach work'*

*'To a point but not sure how good it is in capturing the underrepresented groups and voices - I haven't seen many activities that actively seek out these groups views - e.g. first language might not be English and would like to see them working with these groups more - maybe via SMEF and others e.g. GRT lead'*

### **Neutral/unsure**

*'I am not cited on evidence of this'*

*'Again, I don't know how deep the insight is, although I am sure it is very good'*

### **Conclusions**

There were the highest levels of support for HWSY influencing being based on sound knowledge of local issues and the insight and experiences of local people. Only 16% (4 comments) of responses highlighted areas for improvement such as the need to ensure they are reaching every community, especially those that are underrepresented.

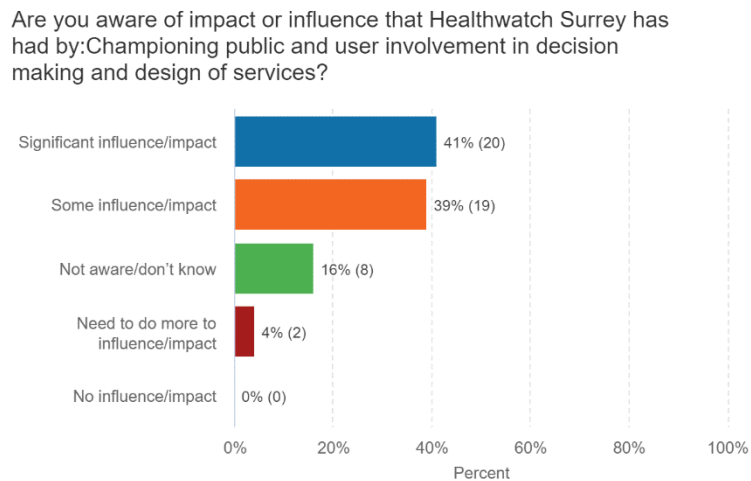


## Feedback on the Impact of Healthwatch Surrey

### Championing public and user involvement in decision making and design of services

#### Analysis

The chart below summarises the views on the impact they see from HWSy Championing public and user involvement in decision making and design of services. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:



*Figure 9 Responses on impact or influence of championing public and user involvement in decision making and design of services*

80% of respondents recognised some impact or significant impact, 2 respondents felt more needed to be done but no one felt there was no influence or impact.

Respondents were asked to provide more detail to explain their views. 18 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 18 comments:

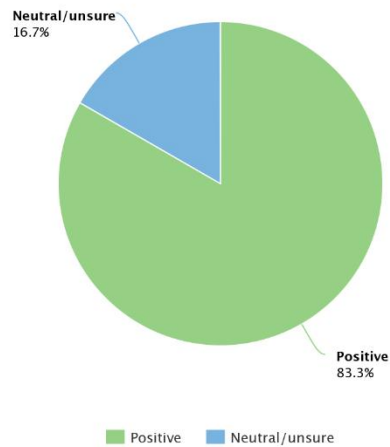


Figure 10 Sentiment of comments on impact or influence of championing public and user involvement in decision making and design of services

There were no negative comments.

Examples of Neutral/unsure comments were:

*'Not really in the design of services but I don't commission services'*

*'I am not able to fully comment. I am not a commissioner'*

Positive comments included:

*'It comes through in the way and what they present to all of the provider organisations in Surrey Heartlands'*

*'I have the pleasure of working regularly with health watch at senior board level and see regular evidence that the voice of the user and their families/carers is raised time and time again across all type of service delivery/transformation/BAU'*

*'Certainly their reputation influenced our decision to engage their support as it is respected and impartial.'*

*'We value the input Healthwatch brings to our stakeholder and service development forums as well as to quality Assurance and system intelligence meetings'*

*'Working with Healthwatch has helped us to not only listen but hear what our patients are worried about and want to change.'*

*'I have been involved with the commissioning of a number of services and input to new contracts and tender bids and have seen the really helpful co-production that Healthwatch have facilitated.'*

*'I strongly believe some things have changed and improved as a direct result of HW's intervention and work'*

## **Conclusions**

Respondents felt there was influence and impact. 80% of respondents recognised some impact or significant impact, 2 respondents felt more needed to be done but no one felt there was no influence or impact.

83% of comments were positive, with the remainder being neutral or not aware because of their role.

## Enabling people to share views and concerns about local health and social care services

### Analysis

The chart below summarises the views on the impact they see from HWSy enabling people to share views and concerns about local health and social care services. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

Are you aware of impact or influence that Healthwatch Surrey has had by: Enabling people to share views and concerns about local health and social care services?

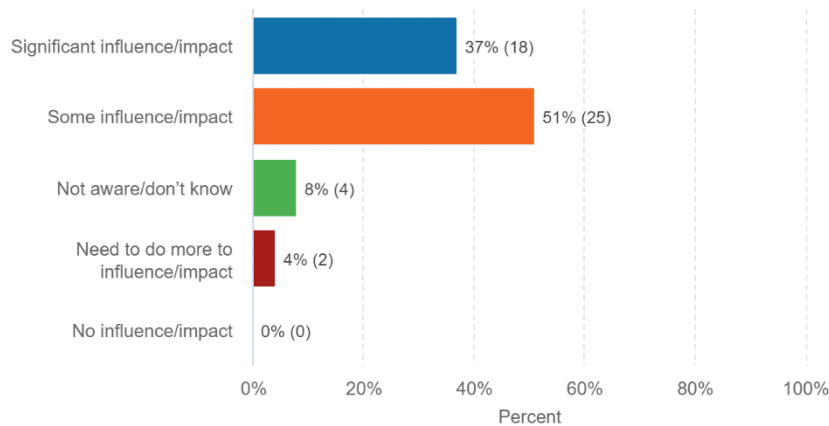


Figure 11 Responses on impact and influence for enabling people to share views and concerns about local health and social care services

There was slightly higher recognition of impact for this activity, with 88% seeing some or significant influence or impact, but significant impact was slightly less and some impact increased. Again, 2 respondents saw no influence or impact.

Respondents were asked to provide more detail to explain their views. 18 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 18 comments:

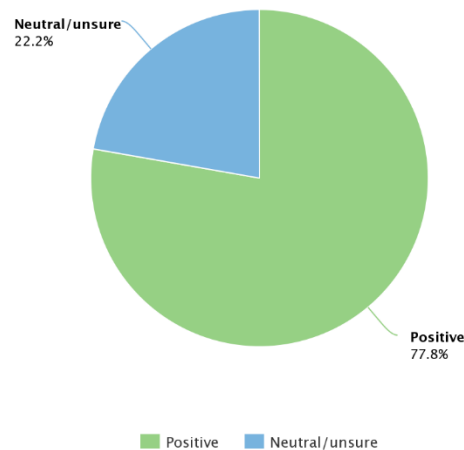


Figure 12 Sentiment of comments for enabling people to share views and concerns about local health and social care services

There were only positive or neutral comments for this question. Comments included:

**Positive**

*‘They are a reliable source of information’*

*‘Based on my experience of their review of our strategy that involved collecting user views.’  
‘I know Healthwatch are active members on several ICS groups and always contribute their views and findings’*

*‘Patient’s feel safe sharing their views with them and this helps us to gain insight we might not have done before’*

*‘From the Healthwatch bulletin reports’*

**Neutral/unsure**

*‘My portfolio of healthcare service only has a limited number of locations in Surrey, it is a mixed portfolio and I don’t have engagement with integrated care system in surrey to be aware of the impact or influence that Healthwatch Surrey has or has not had.’*

*‘I think Healthwatch does this well, although as above I am unsure of the scale and reach HW has’*

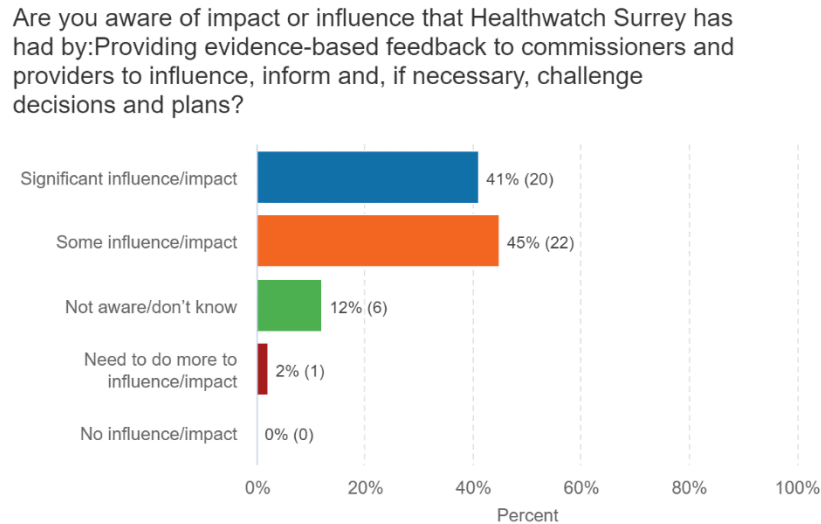
**Conclusions**

There was slightly higher recognition of impact for this activity, with 88% seeing some or significant influence or impact. 77% of the 18 comments were positive with neutral comments being through lack of awareness

## Providing evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans

### Analysis

The chart below summarises the views on the impact they see from HWSy providing evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:



*Figure 13 Responses for the influence or impact of providing evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans*

There were slightly fewer negative comments for this question but more respondents were not aware. 86% of respondents reported some or significant influence or impact.

Respondents were asked to provide more detail to explain their views. 15 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 15 comments:

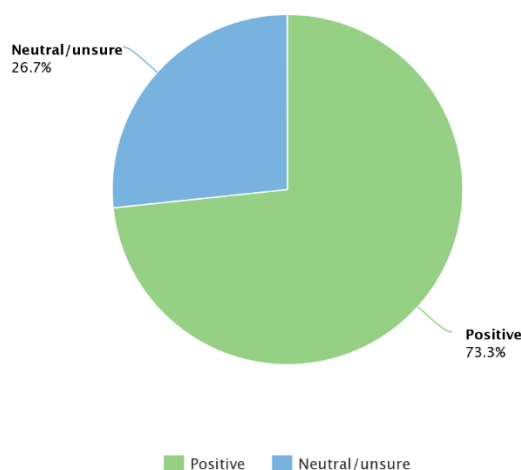


Figure 14 Sentiment of comments for providing evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans

There were no negative comments but there was a greater proportion of comments that were neutral or unsure about the influence or impact for this activity. Comments included:

### Positive

*'Yes through East Surrey Health and Care Partnership'*

*'They are always listened to at the meetings that I attend when they are presenting and provoke debate about actions which arise from their presentations.'*

*'I also receive monthly newsletter and am aware that we have used direct evidence/feedback to inform and improve services especially across primary care. I have ticked some rather than significant as we still struggle with anonymized nature of much of the feedback making direct engagement with individuals to resolve issues impossible'*

*'Healthwatch are a valued stakeholder in service change and service transformation events'*

### Neutral/unsure

*'My portfolio of healthcare service only has a limited number of locations in Surrey, it is a mixed portfolio and I don't have engagement with integrated care system in Surrey to be aware of the impact or influence that Healthwatch Surrey has or has not had.'*

*'I am not able to fully comment. I am not a commissioner'*

*'Not sure of any real evidence base that I've seen in reports - more identifying the themes and trends of people they talk to'*

*'I would welcome more feedback and evidence based policy suggestion'*

## Conclusions

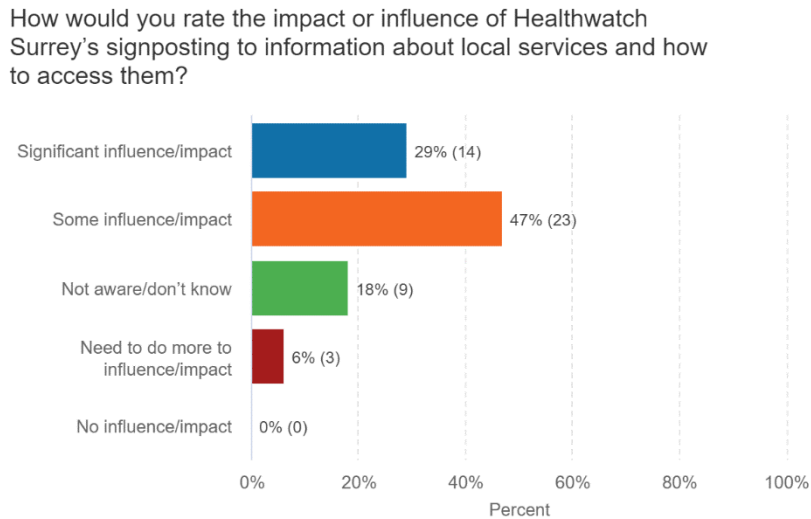
Although a large proportion of responses and comments felt there was some or significant influence or impact, a larger proportion were not aware or unsure of what HWSy does in this area.



## Providing, or signposting to, information about local services and how to access them

### Analysis

The chart below summarises the views on the impact they see from HWSy providing, or signposting to, information about local services and how to access them. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:



*Figure 15 Responses on impact of providing, or signposting to, information about local services and how to access them*

Fewer respondents were positive about the signposting function of HWSy and more respondents were not aware felt more needed to be done.. There was a higher level of responses indicating some influence rather than significant impact.

Respondents were asked to provide more detail to explain their views. 13 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 13 comments:

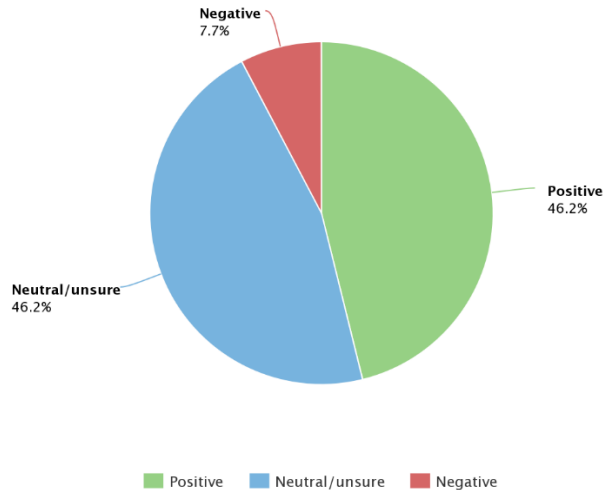


Figure 16 Sentiment of comments on providing, or signposting to, information about local services and how to access them

There was 1 negative comment and a greater proportion of comments that were neutral or unsure about the influence or impact for this activity. Comments included:

**Positive**

*‘They are a reliable source of information’*

*‘From the Healthwatch bulletin reports’*

*‘Have spoken to users of health and social care services who have told me HwSy has signposted them to information to local services and how to access them.’*

**Negative**

*‘Not all patients are aware of Healthwatch’*

**Neutral/unsure**

*‘Have not seen evidence of this yet but is definitely needed’*

*‘My portfolio of healthcare service only has a limited number of locations in Surrey, it is a mixed portfolio and I don’t have engagement with integrated care system in Surrey to be aware of the impact or influence that Healthwatch Surrey has or has not had.’*

*‘I don’t really discuss that with Healthwatch but I have heard they do this I think HW does this well, but as above, I am unsure of reach’*

**Conclusions**

There was more uncertainty about the impact of providing, or signposting to, information about local services and how to access them, fewer people saw significant influence or impact or were unsure or not aware. The only comment highlighting areas for improvement

noted that not all patients are aware of Healthwatch, but a lack of awareness of this function features in a lot of responses.

## Providing feedback to the Care Quality Commission

### Analysis

The chart below summarises the views on the impact they see from HWSy providing feedback to the Care Quality Commission. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

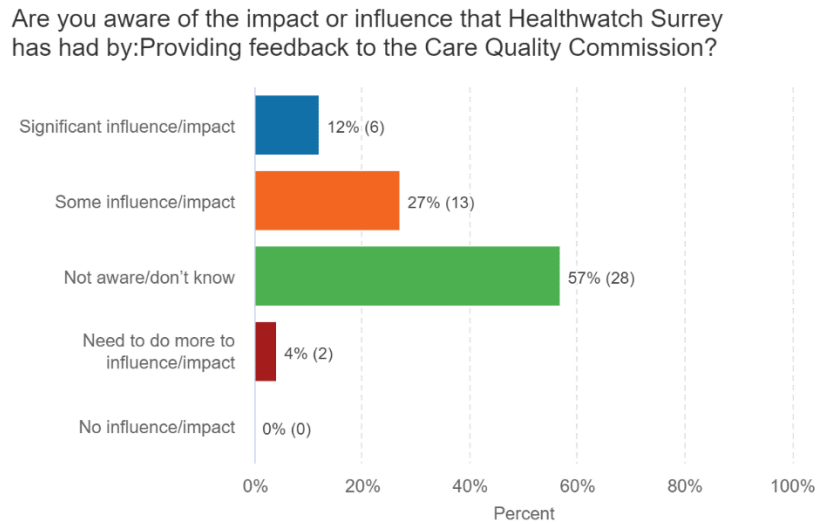


Figure 17 Responses for providing feedback to the Care Quality Commission

The majority of respondents (57%) were not aware of HWSy providing feedback to the CQC, with only 12% reporting significant impact.

Respondents were asked to provide more detail to explain their views. 9 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 9 comments:

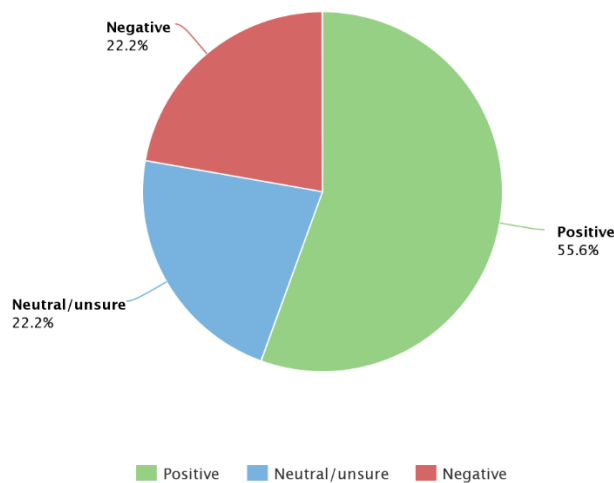


Figure 18 Sentiment of responses for providing feedback to the Care Quality Commission

A higher number of comments (55%) were positive, with the remainder split equally between negative and neutral/unsure. Some respondents were CQC inspectors. Comments included:

### **Positive**

*'I benefit greatly from the insight provided from the reports shared with me and the engagement calls I have with the team'*

*'HW information has informed monitoring and inspection'*

*'CQC has benefited from insight gathered during HWSy's Enter & View visits and used this insight to inform our view of care quality.'*

### **Negative**

*'No I didn't know they did that'*

*'Not seen anything to provide information.'*

### **Neutral/unsure**

*'Just not aware but wouldn't necessarily expect to be'*

*'I am aware HW does this, I am not sure of the scale of this activity'*

### **Conclusions**

There was more uncertainty about the impact of providing feedback to the Care Quality Commission, fewer people saw significant influence or impact or they were unsure or not aware. CQC inspectors provided positive feedback on the role HWSy plays, but most people were not aware of the impact or influence of this function.

## Producing reports and recommendations to influence the way services are designed and delivered

### Analysis

The chart below summarises the views on the impact they see from HWSy producing reports and recommendations to influence the way services are designed and delivered. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

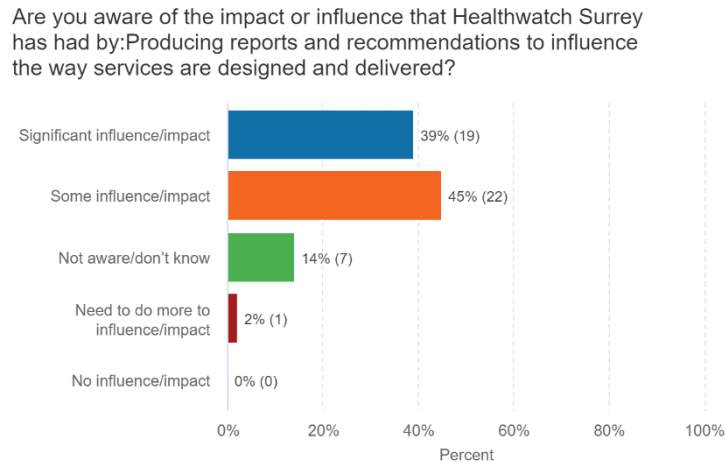


Figure 19 Numbers of responses for producing reports and recommendations to influence the way services are designed and delivered

84% of respondents recognised some impact or significant impact, 7 were not aware and 1 respondent felt more needed to be done but no one felt there was no influence or impact.

Respondents were asked to provide more detail to explain their views. 13 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 13 comments:

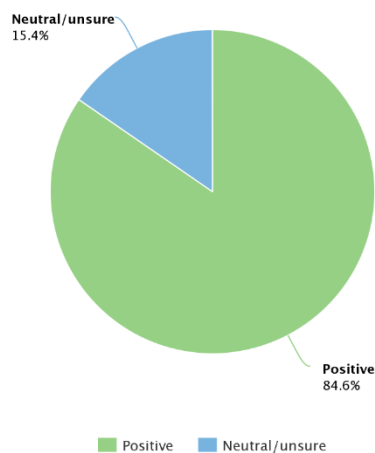


Figure 20 Sentiment of comments for producing reports and recommendations to influence the way services are designed and delivered

A higher number of comments (85%) were positive, with 15% neutral or unsure. There were no negative responses. Comments included:

**Positive**

*'I work for Surrey Heartlands and am aware of their input.'*

*'I am aware for example of work done around discharge that has had an impact on hospitals designing of discharge services-sadly till not perfect but getting there'*

*'A good range of reports - and a variety of issues covered in the quarterly impact report.'*

**Neutral/unsure**

*'I am not able to fully comment. I am not a commissioner'*

*'I read reports produced by HwSy but am not aware whether these have had an impact on the way services are designed and delivered.'*

**Conclusions**

Generally respondents felt HwSy were impactful in producing reports and recommendations to influence the way services are designed and delivered. A small number of respondents felt the impact was not visible to them, no one indicated that there was no influence or impact.

## Offering advocacy support for complaints about NHS services

### Analysis

The chart below summarises the views on the impact they see from HWSy Offering advocacy support for complaints about NHS services. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

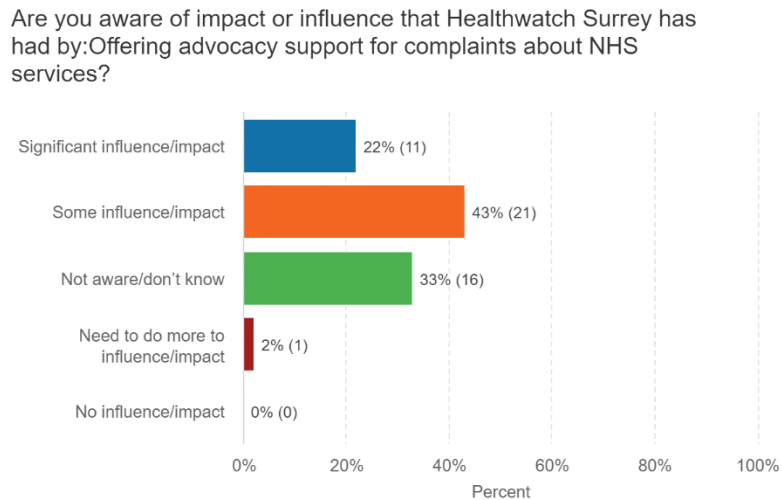


Figure 21 Numbers of responses for offering advocacy support for complaints about NHS services

There was a much more mixed picture in the responses to the impact of advocacy services. The highest percentage (43%) of responses was for some influence/impact, with 33% not aware. Some saw significant and impact and 1 respondent saw no influence/impact.

Respondents were asked to provide more detail to explain their views. 10 respondents gave further detail. These comments were analysed for sentiment either positive, negative or neutral/unsure, negative comments highlighted areas for improvement. The chart below summarises sentiments of the 10 comments:

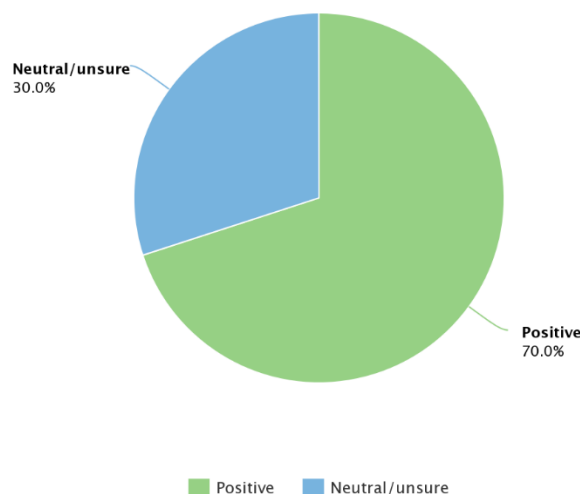


Figure 22 Sentiment of responses for offering advocacy support for complaints about NHS services



The majority of comments (70%) were positive, with 30% neutral or unsure. There were no negative responses. Comments included:

### **Positive**

*'I became aware of the advocacy role recently and have been made aware of one complaint which HW Surrey have supported.'*

*'I have been in a SI situation where Healthwatch has held an advocacy role and also again with primary care complaints/feedback'*

*'From the Healthwatch bulletin reports'*

### **Neutral/unsure**

*'Was not aware of this'*

*'As above I am unsure of the scale of this function'*

### **Conclusions**

43% of respondents felt there was some influence or impact through the advocacy function, a small percentage (22%) saw high impact but otherwise people were not aware of this function.

## Commissioning Healthwatch Surrey

Alongside the contract to deliver local Healthwatch services to Surrey residents, HWSy can be commissioned to carry out specific projects in engagement and outreach; insight gathering; service evaluation and co-design. The survey wanted to understand stakeholder views on this work.

### Analysis

The chart below summarises the respondents awareness that HWSy can undertake commissions. Of the 60 that completed the survey, 49 respondents answered this question, 11 skipped it:

As a not for profit, Community Interest Company (CIC) we can also be commissioned to develop bespoke projects for those who want to hear more from local communities and people using services. Did you know we could be commissioned to carry out work beyond our local Healthwatch contract?

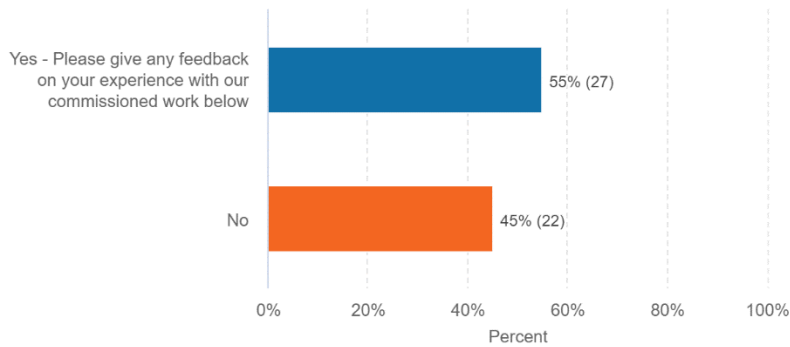


Figure 23 Responses for awareness of commissioning Healthwatch Surrey

Over half of respondents were aware of HWSy's commissioned work, but only 9 respondents gave further information on their experience:

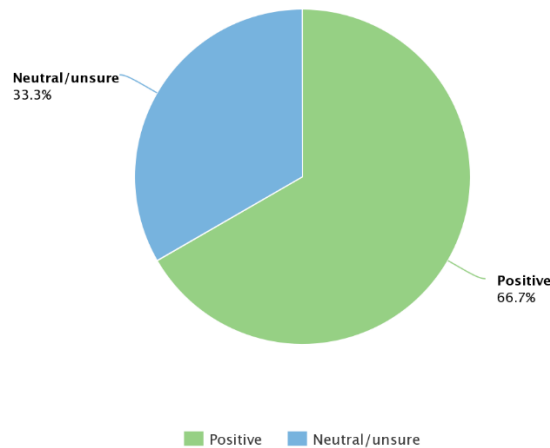


Figure 24 Sentiment of comments for commissioning Healthwatch Surrey

6 respondents were positive about the commissioned work of HWSy, 3 respondents were not aware that HWSy took on additional projects or had not yet commissioned anything.

### Positive

*'As have commissioned Healthwatch to understand Citizen views on Virtual Wards and they worked very effectively on this.'*

*'Have provided excellent collaboration on work that I have been involved with.'*

*'Excellent from start to finish. Super responsive but great listeners to what we were trying to achieve with local insight and recommendations. The report added credence to our submission alongside other data.'*

*'Commissioned an engagement piece. Desk based research very thorough and valuable. Community did not engage so limited value in face to face research.'*

*'NHS Frimley has worked with Healthwatch Surrey on a number of occasions to carry out commissioned work. This is because they are a trusted partner with good reach into local communities. We have also commissioned work across the Frimley area and HW surrey are happy to work closely with HW Hampshire, WAM, Slough and Bracknell Forest where required to ensure comprehensive coverage of the Frimley area. We are continue to explore opportunities to develop a more formal working agreement in the future.'*

*'Giving carers a voice'*

### Neutral/unsure

*'Not aware of the detail'*

*'I've not commissioned anything but I know this is possible'*

*'I am aware and this is an area we have discussed'*

## **Conclusions**

Those that had commissioned HWSy to do additional projects and gave additional information were positive about the experience. Of the 3 respondents that were more neutral 2 were aware of the possibility but had not yet commissioned HWSy.

## Appendix 1



Healthwatch Surrey Reflective Review 2023

### 1. Help with completing this survey

1. Would you like help completing this survey? \*

- No, proceed to the survey
- Yes, click next below for contact details

### 2. Contact for help

Please contact Steve Inett for help with this survey:

Email: [steve@steveinettconsultancy.co.uk](mailto:steve@steveinettconsultancy.co.uk)

Telephone: 07593 452242

### 3. About You

2. Which area of Surrey do you work in?

- Surrey-wide
- Guildford & Waverley
- North West Surrey
- Surrey Heath
- North East Hants & Farnham
- East Surrey
- Surrey Downs

3. What aspect of the health and social care system do you represent? (click as many as relevant)

- Commissioner of health services
- Commissioner of social care services
- Provider of health services
- Provider of social care services
- PLACE based representative
- Voluntary, Community or Faith sector organisation
- System Leadership, Board or Committee
- Regulator
- Other (please specify):

**4. Which of the following best describes your role?**

- Senior Leadership / Chief Executive / Director
- Senior Manager
- Clinician / Clinical Lead
- Complaints / PALS
- Communications, Engagement, Patient/Public Involvement
- MP / Elected Councillor
- Volunteer / Lay Member
- Other (please specify):

**4. Our Vision**

**5. Do you agree with this statement?**

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

\*

- Strongly agree
- Agree
- Not aware/don't know
- Disagree
- Strongly disagree

Why do you think this?

**6. Do you agree with this statement?**

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

\*

- Strongly agree
- Agree
- Not aware/don't know
- Disagree
- Strongly disagree

Why do you think this?

**7. Do you agree with the statement?**

**'Healthwatch Surrey's influencing is based on sound knowledge of local issues and the insight and experiences of local people.'** \*

- Strongly agree
- Agree
- Not aware/don't know
- Disagree
- Strongly disagree

Why do you think this?

## **5. Our Impact**

**8. Are you aware of impact or influence that Healthwatch Surrey has had by: Championing public and user involvement in decision making and design of services? \***

- Significant influence/impact

- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?

**9. Are you aware of impact or influence that Healthwatch Surrey has had by: Enabling people to share views and concerns about local health and social care services? \***

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?

**10. Are you aware of impact or influence that Healthwatch Surrey has had by: Providing evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans? \***

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?



**11. How would you rate the impact or influence of Healthwatch Surrey's signposting to information about local services and how to access them?**

\*

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?

**12. Are you aware of the impact or influence that Healthwatch Surrey has had by: Providing feedback to the Care Quality Commission?**

\*

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?

**13. Are you aware of the impact or influence that Healthwatch Surrey has had by: Producing reports and recommendations to influence the way services are designed and delivered?**

\*

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact

No influence/impact

Why do you think this?

**14. Are you aware of impact or influence that Healthwatch Surrey has had by:  
Offering advocacy support for complaints about NHS services?**

\*

- Significant influence/impact
- Some influence/impact
- Not aware/don't know
- Need to do more to influence/impact
- No influence/impact

Why do you think this?

## 6. Commissioning Healthwatch Surrey

**15. As a not for profit, Community Interest Company (CIC) we can also be commissioned to develop bespoke projects for those who want to hear more from local communities and people using services. Alongside our contract to deliver local Healthwatch services to Surrey residents, we carry out specific projects, building on our expertise in engagement and our established local networks and links into communities. We specialise in engagement and outreach; insight gathering; service evaluation and co-design. We enable public sector organisations to use feedback to deliver more efficient and cost-effective services to local residents.**

**Did you know we could be commissioned to carry out work beyond our local Healthwatch contract?**

\*

- Yes - Please give any feedback on your experience with our commissioned work below
- No

Feedback on commissioned work:

## 7. Commissioned work enquiries

If you would you like to know more about how we could help and/or support you with public engagement and involvement, please put your contact details below or contact Lisa Sian at [lisa.sian@healthwatchesurrey.co.uk](mailto:lisa.sian@healthwatchesurrey.co.uk)

## 8. Sharing your details

16. Are you happy to share your details? If so, please complete below:

|           |                      |
|-----------|----------------------|
| Name      | <input type="text"/> |
| Email     | <input type="text"/> |
| Telephone | <input type="text"/> |

17. We will be publishing an analysis of the results shortly. Would you would like to receive a copy of the report?

- Yes (You will need to complete your contact details above)
- No

18. We may like to talk to you about your responses, to better understand your views. Are you happy for us to potentially contact you?

- Yes (You will need to complete your contact details above)
- No

## Appendix 2

### Stakeholder Mapping Groups for distribution list

- Surrey wide commissioners and services
- Local commissioners
- Hospitals across Surrey
- Ambulance Trusts
- Surrey & Borders Partnership
- Place leadership for:
- Surrey Downs Health and Care Partnership
- North West Surrey Alliance
- East Surrey
- Guildford and Waverley Alliance
- Surrey Heath
- Social Care
- Primary Care /PCNs/Federations
- Place - Primary Care Leads
- Comms & Engagement
- Senior Leaders/Committee Chairs
- Chief Execs of large charities
- Membership organisations and alliances
- Carers Partnership Board
- Dementia Strategy board
- Integrated Stroke Delivery Network
- CSH /First Community Health
- Care Quality Commission
- Public Health
- Healthwatch England