

To: Healthwatch Surrey Board

From: Samantha Botsford, Local Healthwatch Contract Manager

Date: January 2024

# Local Healthwatch Contract Manager's report on Healthwatch Surrey

Summary of the last quarter Q3: October - December 2023

# Highlights

- All priorities progressing well
- Volunteer recruitment exceeding KPI
- IHCA new cases exceeding KPI for 2<sup>nd</sup> quarter in a row
- Continue to receive positive testimonials and feedback relating to our Helpdesk support

#### **Priorities**

This quarter we have made significant progress towards our planned outcomes under each of our priority areas, more detail can be seen in our impact report to support this.

#### Involvement of people

With the support of our volunteers, we have completed our visits to the acute hospital trusts in Surrey to listen to people's attitudes and experiences of sharing feedback on services with the aim to increase people's awareness of how to share feedback and the importance of doing so, as well as encouraging hospital trusts to do more to facilitate feedback and take action to make improvements as a result. All 5 hospital trusts have responded to our recommendations and demonstrated the commitment to hear more and act more on the feedback that they receive on their services. Each of the individual reports and the responses to our recommendations can be found on our website in our reports section: https://www.healthwatchsurrey.co.uk/reports/involvement-of-people/

Whilst we spoke to a range of people accessing services in these settings we are also keen to highlight experiences of people who may be at risk of health inequalities. Therefore, our next phase of this priority is to explore the experiences of neurodivergent people accessing care at hospitals in Surrey, to encourage learning and improvements from their experiences as well as sharing examples of good practice. We will be involving our volunteers, people with lived experience and colleagues in the voluntary sector in a planning workshop to design the project.

# Social care

This quarter we also got our project aimed at supporting self-funders to find information and support to plan for their care needs underway. We have been working closely with Surrey County Council to design this project and have, along with our volunteers, been visiting community settings

to talk to people about their experiences of planning their care needs. During these visits, we are also offering signposting and hearing about people's experiences of other health and care services which has the added benefit of helping people with other health and care needs. We continue to share this feedback with Adult Social care as well as health providers and decision makers.

Another of the outcomes that we are working towards under this priority is to improve our team understanding of social care. We were pleased to welcome the Quality Assurance Lead for Adult social care to a Lunch and Learn session which is detailed in our impact report which demonstrates how as an organisation we have a better collective understanding of the expectations of the quality of services and are therefore, providing those who we speak to about services with the best information and advice.

#### Access to primary care

Access to primary care is often what we hear most about from people who share their experiences. We are well represented across both Frimley and Surrey Heartlands, ensuring that people's experiences are listened to and used to inform the delivery of services.

Whilst we're embedded in sharing with the system, we have also identified a need within communities to better understand how and when to access GPs. Therefore, we held a coproductions workshop with volunteers to identify the key themes to cover when offering information and advice to local residents. This means that local people are directly involved in creating resources to share with their communities, to make the experience of accessing care from their GP better. Our co-production will continue in Q4 with further collaboration planned to finalise the resources to better meet people's needs.

#### Mental Health

This year we set out to map, understand, and immerse ourselves in the listening landscape around mental health in Surrey to ensure that people's voices are heard. Collaboration is fundamental to the success of this and we have continued with our involvement in the User Voice & Engagement Coordination (UV&EC) Group ensuring that the voice of young people is better heard. We have also helped to refresh the Learning from Experience Group putting insight from lived experience at the heart of this meeting.

# Forward planning

This year has seen us change our approach to our work under our priorities and as a team we have benefitted from a real focus on our priority areas from initial engagement through to creating outputs that lead to positive change for people in Surrey. This quarter we will be reflecting on that progress and taking it further with updates to our Engagement, Volunteer and Communications strategies which are already underway. We are also excited to explore ways of improving how we share our findings on projects; we will shortly be sharing a video summarising the difference our work in hospitals has made this year, as well as the impact we are making at Place.

# Challenges

Getting the balance right between recruiting an onboarding new volunteers with supporting and nurturing existing volunteers has been a particular challenge this quarter and will remain so into Q4 as we are successfully recruiting a number of new volunteers. We are planning on addressing this by finding out more from our volunteers about what's working well and what we can change as well as what motivates them to continue to volunteer for Healthwatch Surrey. We are conducting a volunteer satisfaction survey in January-February to help inform the volunteer strategy going forward.

We carried out a comprehensive review of our commitments to system meetings this quarter. We have proposed and made changes to some of our commitments in the Frimley system to ensure that we are being better represented at Place (serving our residents more fully) rather than on behalf of all Healthwatch at ICS level. However, the challenge of our role at System vs Place remains across both Frimley and Surrey Heartlands, with requests to do more detailed work particularly with primary care being a challenge to manage.

#### Finances: Q3

Healthwatch Surrey Expenditure April to December 2023						
Category	Expenditure					
Staff Costs	£283,568					
Direct Delivery Costs	£57,826					
CIC Costs	£18,996					
Health Complaints Advocacy	£72,956					
Citizens Advice Insight	£10,303					
Total	£443,649					

# Performance on KPIs

This quarter we have again exceeded the Independent Health Complaints Advocacy 30 per quarter target for the 2<sup>nd</sup> quarter in a row. The provider of the service commented that: "bringing the Healthwatch Surrey Helpdesk in-house continues to make a significant difference to the number of referrals, with 18 clients hearing of the advocacy service through Healthwatch this quarter. A significant number (15) are people who've used the service before and are returning to make further complaints about the NHS" suggesting that they were satisfied with the support they had previously received. We have been collating feedback from people contacting our Helpdesk and whilst they are often frustrated with their experience of services, they have expressed gratitude for the service we have provided. We regularly share this through our social media channels to help encourage others to contact us.

We have also exceeded on the target to recruit 5 volunteers per quarter. We have also now exceeded the number recruited last year whilst also retaining our existing volunteers. The increase in the number of hours contributed also demonstrates the vital support we receive from our volunteers.

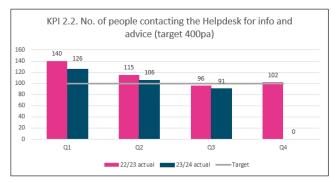
Whilst there has been an increase in the number of people sharing their experiences with us this quarter, we are still lower than the previous year. We are finding that due to the locations that we are visiting in order to reach those at risk of health inequalities and the priority populations, people have complex needs and experiences meaning we are spending more time with individuals to listen to their experiences as well as offering information and signposting. We see this as a real benefit to the depth of stories that we hear, however, it can mean that we don't hear from as many individuals. We are also evolving the way in which we engage with people by ensuring that we are giving more back to communities. One example of this can be found in the impact report where we

detail our work supporting people to use the NHS app, therefore improving their experience as well as others. This work as well as awareness raising of Healthwatch Surrey services, also includes encouraging people to continually share their experiences with our Helpdesk and whilst we don't always collect direct experiences at the time we will see the success of this through an increase in traffic to the Helpdesk. We are starting to see this coming through with an increase from 14 submissions via our website in Q2 to 47 in Q3.

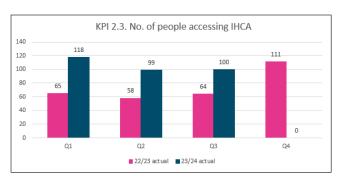
# KPIs: Q3

KPIs for 2023/2024									
Link to mission/vision	KPI No.		Lead	22/23 figure	Q1	Q2	Q3	Q4	Cumulative total to date
Healthwatch Surrey is the respected, trusted and credible champion of the consumer for health and social care in		The proportion of reasonable responses received to escalations and project recommendations (80%)	SBo	Non-contract KPI. Definition and process to be review LHWAG				be reviewed by	
Surrey.	KPI 1.3.	Reflective Review – number of responses received and satisfaction levels	LS	Reported biannually					
Healthwatch Surrey's role, function and services are known, understood and valued by consumers and therefore they readily	services are known, understood and valued KPI 2.2. KPI 2.2. Share an experience (400 P.0.)				126	106	91		323
contact us.	KPI 2.3.	The number of people accessing the Independent Health Complaints Advocacy service		298	118	99	100		317
	KPI 2.4.	The number of new cases managed by the Independent Health Complaints Advocacy service (30 per quarter)		89	28	40	32		100
	KPI 2.5.	Service user satisfaction with the Helpdesk and Independent Health Complaints Advocacy service	LS	Testimonials reported quarterly in influence and impreport			nce and impact		
Our influencing is based on sound evidence, knowledge and insight	KPI 3.1.	The number of people sharing experiences with us		1423	256	338	378		972
	KPI 3.2.	The number of outcomes achieved (4 PA min )	AC	Highlights reported quarterly in influence and impac report			e and impact		
rn a		Project and outreach reports (4 PA min)	KS	19	з	00	5		16
		The tracking of engagement and insight shows we are hearing from a wide range of communities (activity plan and demographics collected)	SBolSBr		G	G	G		RAG
We exist to empower communities and we do this by recruiting and empowering volunteers to enable us to hear more and	KPI 5.1.	The number of hours our volunteers have contributed	HG	1874	446	413	463		1322
share more.	KPI 5.2.	The number of new volunteers per quarter (5 PQ)	HG	10	2	5	7		14

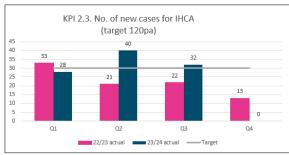
# **KPI Graphs**



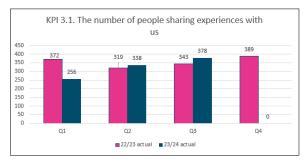
Helpdesk contacts	Q1	Q2	Q3	Q4	Total
22/23 actual	140	115	96	102	453
23/24 actual	126	106	91	0	323
Target	100	100	100	100	400



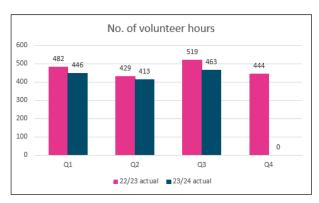
ICHA access	Q1	Q2	Q3	Q4	Total
22/23 actual	65	58	64	111	298
23/24 actual	118	99	100	0	317



ICHA referrals	Q1	Q2	Q3	Q4	Total
22/23 actual	33	21	22	13	89
23/24 actual	28	40	32	0	100
Target	30	30	30	30	120



No. of useable exp	Q1	Q2	Q3	Q4	Total
22/23 actual	372	319	343	389	1423
23/24 actual	256	338	378	0	972



No. volunteer hrs	Q1	Q2	Q3	Q4	Total
22/23 actual	482	429	519	444	1874
23/24 actual	446	413	463	0	1322