

Quarterly Impact Report

January - March 2025





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If you would like a paper copy of this document or require it in an alternative format, please get in touch with us.



This quarter in numbers



122 People supported through our Helpdesk



32 People supported by our Independent Health Complaints Advocacy service



24 Community engagement events



363 People helped, supported or engaged with whilst out in the community



9 Reports published



312 Hours provided by our volunteers

^{*} People contacting our Helpdesk via e-mail, telephone, text or WhatsApp, or via our website.



Impact award

This quarter we are proud to have been shortlisted in the prestigious **National Healthwatch Impact Awards**!

In 2023 we spoke to people who had received care in various departments across Surrey hospitals. Our objective was to help the hospitals to learn from feedback, and to make it easier and more accessible for people to give it. We made a series of recommendations which were shared with every hospital trust, and – as a direct result – a number of changes were implemented immediately. These included improvements to hospital websites, accessible posters and leaflets promoting the Patient Advice and Liaison Service (PALS) and adding QR codes for the Friends and Family Test (FFT).

The judging panel were particularly impressed with our tenacity - we revisited the project a year after it completed and held each Trust to account; asking them to update on the actions they'd committed to in the short term and reviewing the long-term changes that were planned.

"Great to hear how improving feedback leads to change."

Healthwatch England

Fine out more about the project by reading our summary and reports.

Information and signposting

Healthwatch Surrey offer information and signposting – via our Helpdesk or during engagement in the community – to support people to navigate health and care services across Surrey. We help people to identify the services and support they need and provide advice about what to do when things go wrong. Through our relationships with system partners we can also escalate concerns, providing resolutions to individuals and ensuring an improved experience for others.





Supporting residents through our Helpdesk

We helped **122** people navigate health and social care services through our <u>Helpdesk</u>.

"Many thanks for your help. You are amazing.... You took the time to hear me out, many people haven't."

Helpdesk user

"No one has explained to me what Continuing Healthcare is or why my mum can't have her old carers back. Thanks for talking to me and listening."

Helpdesk user

Case study: Debbie's* Experience

Debbie, who has a physical health condition which impacts her ability to process information, contacted the Helpdesk as she was struggling to get a care plan put in place. Debbie was finding herself falling between her locality team and the Continuing Healthcare team, and was left without appropriate care in the meantime. Debbie was concerned as she could feel her condition deteriorating.

Our Helpdesk advisor suggested that Debbie may benefit from seeking the support of a Care Act Advocate, but her request for a referral was denied by her social worker. The Helpdesk advisor then took Julie's case to the commissioner of the Surrey advocacy services who – along with the manager of the Care Act advocacy service – investigated Debbie's case. They were able to offer tailored advice to Debbie and, as a result, Debbie is now fully supported by a Care Act Advocate who is helping her to get an appropriate care package put in place to support her at home.

Wider impact: system learnings

The commissioners of the advocacy services have committed to raising awareness within social care locality teams about Care Act advocacy and when an individual should be referred for support.

* Names have been changed.

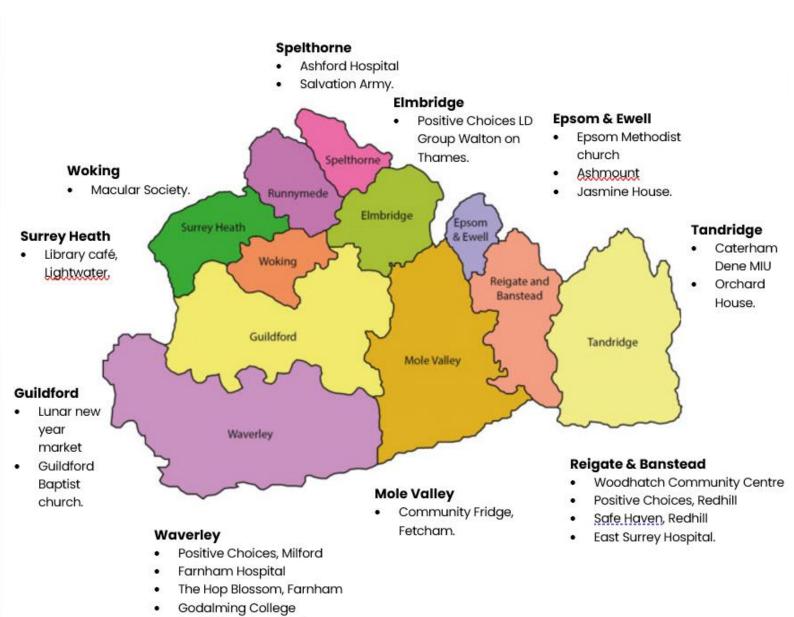


Supporting residents in the community

We visited 23 venues across Surrey and engaged with 363 people.

The map below shows the venues we visited.

Post 19 Services, Farnham
The Vineyard Centre, Farnham.





Community case study: utilising our system knowledge to offer personalised support

During an engagement event at Royal Surrey County Hospital we heard from a lady whose extended wait for Non Emergency Patient Transport (NEPT) was having a direct impact on her caring responsibilities at home. We advised the lady that she could be flagged as a priority on the NEPT provider's system and provided her with contact details to enable her to do this. We also signposted her to speak to her GP about respite care.

Although we were in the hospital with specific remit to gain insights around NEPT (to share with the commissioner and transport provider), we were delighted to be able to use our contacts and knowledge of the system to address an individual issue whilst there.



Advocacy & complaints

This quarter we supported 32 people to make a complaint through our <u>Independent Health Complaints Advocacy service</u> (IHCA). Run in partnership with the <u>Surrey Independent Living Charity</u>, IHCA provides free, confidential and independent support.

Case study: Maria's* Experience

Maria contacted the advocacy service after a cataract procedure left her with reduced vision in one eye. The risks of the procedure had not been fully explained to her, consent had not been correctly obtained and signs of distress during the procedure had been ignored. Maria did not complete a feedback form for the clinic performing the procedure on behalf of the NHS but later discovered that it had been completed for her. Maria told us she had already started to engage in a formal complaints process and had received a written response which she felt either ignored or didn't fully answer many questions she had raised.

An extensive response to the complaint response was drafted and approved by Maria. The advocate forwarded this to the NHS provider, addressing it directly to the Chief Executive.

Outcome for Maria

A regional director acknowledged the complaint and instigated an investigation. A resolution meeting, where Maria could express her concerns in person, was then arranged with senior members of staff and divisional directors and recorded. The NHS provider informed Maria that the surgeon had been dismissed and would no longer be providing services for them. They accepted that there had been mistakes made and that in Maria's case the feedback had been completed by a member of staff. Apologies were conveyed for the distress and issues that had been caused by the procedure.

Maria said that she would never have had the confidence to continue with the complaint procedure without advocacy support as she felt "beaten by a system that seemed to be against her". She was very appreciative of the support provided and concluded the complaints process to pursue a legal resolution.

^{*} Names have been changed.

Delivering on our thematic priorities

Along with our core priorities of agenda free listening, the provision of information and advice and amplifying the VCSE voice, we also have 4 thematic priorities – access to primary care, social care, mental health and the involvement of people.





Social care

The Surrey residents who talk to us about social care often tell us they struggle to know how to access and understand it. We therefore have a focus on listening to service users and potential service users to help adult social care make things clearer.

Background

In 2024 Surrey County Council (SCC) approached Healthwatch Surrey to support them with gathering insight into the journey self funders (people paying for their own care home accommodation) may take to arrive in a residential care home setting.

During visits to care homes, community settings, Age UK Surrey's 'Planning for your future care' events, and via a survey, people told us they were not aware of available support or the financial eligibility for social care. Further information on our findings, and our recommendations, can be found in our Who can help me plan for my future as an older person report.

In a follow up to this project we undertook additional research focussing on current self-funders and their friends and family, with a desire to understand more about their journey to living in a care home, where they looked for information about care homes, and what they understood about paying for care.

97 people responded to our survey, promoted via care homes, Surrey County Council (SCC), VCSE organisations and our own website and social media. We found very low awareness of the laws and policies around paying for residential care, and mixed understanding about what would happen if a resident depleted their funds. We also found that relatively few people accessed community services such as day centres or community groups and / or respite services prior to making a decision to move in to a care home.



How will our findings be used?

Our findings and recommendations have been shared with Surrey County Council.

They have confirmed that the insights will help them to:

- Build on their Planning for Your Future awareness campaign
- Develop further messages to share with local people, which now really meet the knowledge gaps identified
- Work more closely with care providers to ensure they offer the information people and families need before making a decision for long term care in a residential or nursing home. In addition, that providers make current residents aware that they need to keep an eye on their funds, and to know what to do when they run low.

SCC have also committed to promoting their <u>Technology Enabled Care and Homes</u> (TECH) offer to local people more extensively – their strategy is currently being co-designed with residents and partners – so that more people are able to stay in their own home for longer.

Primary Care

A key outcome that we're seeking as part of our primary care priority is to improve the information and advice available to all sectors of the population about access to primary care.

Making general practice understandable for everyone

People told us that general practice can be confusing, particularly for those new to the country, for whom English isn't their first language and for those with additional needs.

We therefore coproduced a leaflet entitled <u>'What do I need to know about GP practices?'</u> with our volunteers to try to address some of this confusion. As part of the development process we also liaised closely with our system partners to ensure the content is consistent with other information sources.

In addition to the main leaflet we have recently worked with Include (a



Surrey based provider of speech and language therapy-based community activities and training) to produce an Easy Read version.

How is the leaflet helping Surrey residents?

Over 800 copies of the standard leaflet and over 100 copies of the Easy Read leaflet have now been distributed to various venues across Surrey to support local people. Residents can find them in all libraries, as well as some citizens advice bureaus, food banks and churches.

Our voluntary sector partner Surrey Choices have incorporated the leaflet as part of their Oliver McGowan training* and we've had some really positive feedback from a local multi-cultural reading group for adults for whom English is a second language.

Primary care leads at Surrey Heartlands Integrated Care board (ICB) are using the leaflets where possible and reception teams at the ICB also have access to the leaflet to ensure that all residents' queries are answered in a clear, consistent way.

"I introduced the group to the first two pages of the booklet and it seemed to go well – there were some people who knew much of it – but most didn't know the word 'Practice'. And it was amazing how much discussion came out of those first pages. Building confidence is the first of our group aims and widening their vocabulary really does help...So I do intend to continue next week with another couple of pages and it is so good to have had your great brochure to give to them to keep."

Gill Cox, Leader Multi-cultural Reading Group for ESL adults

* Oliver McGowen is the standardised training which was developed to meet the statutory requirement that regulated service providers must ensure their staff receive learning disability and autism training appropriate to their role.



Working with individual GP practices to improve the experience for patients

Glenlyn Medical Centre

Following feedback from patients we have been working with Glenlyn Medical Centre and the local MP to ascertain patient view on what is – and what isn't – working at the practice. In our What we're hearing about Glenlyn Medical Practice report we made a number of recommendations for how the practice could work more effectively with patients, families and carers.

The Molebridge Practice

Some patients shared concerns about the practice as the delivery model changed. Surrey Heartlands Integrated Care Board (ICB) were keen to know more about these concerns and to offer some reassurance to patients. They therefore commissioned Healthwatch Surrey to engage with local residents and to provide information and signposting related to the departure of the previous contract holders. We visited both practice sites and a number of additional local community settings.

What difference have we made? Glenlyn Medical Centre

Following our recommendations a number of changes have been made at the practice, including:

- A recruitment campaign for the Patient Participation Group has begun
- A "self-service" machine has been installed in reception to enable people to fill in the online form with the help of reception staff
- A new phone system has been introduced, including a special bereavement and palliative phone line for people to skip the queues
- A plan to revisit the profiles of staff on the website to explain what each of them do and when patients might see them has been developed.

A follow up <u>report</u>, looking at whether patients feel progress has been made in line with our initial recommendations, has now been published. We're having on going discussions with the practice about addressing outstanding and new recommendations.



The Molebridge Practice

We engaged with over 70 people (71), talking to them about their experiences and concerns and signposting to reliable sources for further information. We also worked with Surrey Heartlands to produce a comprehensive FAQs – this guided our engagement and ensured we could provide answers to residents' questions. This <u>FAQs</u> was made available via our website for those who we couldn't speak to face to face and has had 155 views to date.

We shared the <u>analysis of responses</u> with the practice who told us:

"This nicely clarifies the feedback we have been getting from patients and community groups directly and emphasises the need for excellent communication... It is actually quite heartening to see that some people understand the situation."

GP, Molebridge Practice

Ensuring patient views are considered as part of dental commissioning

In January we attended a Dental Services in Surrey Pre-Market Engagement Event. The event was an opportunity for commissioners, providers and key stakeholder to come together to explore innovative approaches to enhancing the accessibility and quality of NHS dental care.

We were able to utilise our attendance at the event to stress the importance of improved communication and patient expectation management, which will form an important part of the future procurement of dental services.



Mental health

As part of our mental health priority we are committed to fostering positive relationships across the listening landscape and with all system and voluntary sector partners working in the mental health field.

Sharing insights to support a drive for better integration of mental and physical health

We were delighted to be asked to participate in the Surrey and Borders Partnership's (SABP) Mind and Body programme. The vision of the Mind and Body Programme is the better integration of mental and physical health, by using collaborative expertise, resources and creativity.

We provided <u>insights around the experience of those with mental health</u> <u>needs in Surrey's acute hospitals</u>.

"The report is excellent, rapidly delivered and provides a really good balance of people's experiences. I like how the qualitative form of the data allows the Programme to hear people's individual experiences and shows each person as an individual rather than a number in a dataset. This qualitative data will be really useful to enhance the other quantitative and qualitative data that we have access to. It's especially good to have feedback from an independent source like Healthwatch Surrey because that is likely to make the feedback more honest."

Rose Lawson, Project Manager, Commercial Development Department, SABP

Coming soon!

This quarter we have conducted Enter & View visits at 2 mental health inpatient settings - reports are being drafted and given to providers and we'll share more in our next Impact Report.

Making a difference at a system level

We ensure that decision-makers in Surrey Heartlands and Frimley Health hear about the insights and experiences residents have shared with us, both positive and negative. We sit on a number of boards and committees and proactively challenge system partners over issues identified to us by local residents and share when things have gone well to help to identify best practice.





Local insights impacting national policy (and national insights impacting local policy!)

Shining a light on local experiences of community mental health services

Healthwatch Surrey champions the voice of local people to shape, improve and get the best from NHS, health and social care services. Sometimes we're championing at a local level, and sometimes at a national one.

The parliamentary Health and Social Care Committee are undertaking an <u>inquiry into people's experience of community mental health services</u> and we submitted written evidence based on the experiences of people here in Surrey.

What difference have we made?

We have had confirmation that our written evidence has been accepted by the enquiry, meaning local residents' views will be heard on the national stage.

Utilising national and local data to inform system partners: eye health

Following feedback on long waits and high costs for care (and the evidence that eye care and related health issues disproportionately affect specific communities) Healthwatch England launched a national drive to learn about people's eye care experiences.

Here in Surrey we worked with local partners to promote the survey and to find out what local people think; 61 Surrey residents responded to the national survey.

We'll be sharing both national and local statistics with a number of boards and committees across Surrey to help to inform thinking around eye care moving forwards. Find out more in our one pager highlighting findings from the Healthwatch England survey about eye care.



Ensuring local compliance with national guidance

Eliciting positive change in continence service

We escalated the concerns people had shared with us around the continence service provided in Surrey to our system partners back in 2017. More recently we shared some of the issues our Giving Carers a Voice colleagues had been hearing about to the Surrey Heartlands Joint Intelligence Group. Following this, the Carers Lead and Quality Lead from Heartlands ICB brought relevant providers together to review their positions against the Association of Continence Practitioners 2023 Guidance. As a direct result, all are now compliant.

A leaflet – co-designed with our volunteers - has also been designed for GPs to give to their patients about what to expect from the continence services and where they can buy products while waiting for a referral, ensuring residents who need it feel confident about the system and process.

Involving local people in health and social care

Our dedicated team of volunteers help us to ensure that local people have their say, and that we hold decision makers to account.





This quarter our volunteers gifted us **112** hours of their valuable time!

Healthwatch volunteers support new cancer centre

As part of our <u>hospitals feedback project</u>, staff and volunteers visited the cancer centre (formerly known as the St Lukes Cancer Centre) at Royal Surrey County Hospital and spoke to patients attending for chemotherapy and radiotherapy. We shared the patient insights and a series of recommendations with the hospital.

What difference have we made?

Our recommendations played an important part in the redesign of the new Royal Surrey Foundation Trust Cancer Centre, helping to ensure it is a space which meets the needs of patients, their families and carers at what is a very difficult time.

"The cocreation of the space in the new cancer centre was planned using the feedback from patients to Healthwatch Surrey with regards to process, environment and communication. The new facilities have been designed around patients' needs and provide a welcoming environment that is expertly equipped to support individuals and their loved ones going through a challenging and unsettling time. Our patients now benefit from inviting spaces and facilities that have been designed and built with their needs at the very heart."

Louise Stead, CEO & Vicky Mumford, Professional Director of Nursing and Cancer, Royal Surrey County Hospital.



Ensuring continence information is understandable to its audience

As well as helping to bring about positive changes to Surrey's continence service, our volunteer Reading Panel were also instrumental ensuring the new leaflet on the service is clear, understandable and meaningful for its intended audience.

"Please pass on our thanks to the Reading Panel, their feedback is extremely helpful. They were so quick and efficient and the report is fantastic."

Nina Austin, Communications & Engagement Officer, Surrey Heartlands Integrated Care Board

We would like to thank everyone who gave their time and shared their experiences with us this quarter.

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We are committed to the quality of our information. Every 3 years we perform an audit so that we can be certain of this.

The Healthwatch Surrey service is run by Luminus Insight CIC (known as Luminus).