





Healthwatch England Conference 2017





Eileen at Healthwatch England Conference



Karen and Vicky at Weston Hospital





Mike at 'Walking Out of Darkness' event





Brian and Sarah engaging the public





Maisy at the Sovereign Centre





Mike and Shirley at the Sovereign Centre





Health Hub at 65 The High Street, Nailsea





Langford Surgery Engagement

We were at Langford Surgery today, meeting members of the public and telling them all about Healthwatch! **#SpeakUp**









Background

- Our second full year as a Registered Charity, from April 2016 to March 2017
- Subject to Independent Examination
- Agreed by HWNS Board, to be submitted to Charity Commission after the AGM
- Simplified Accounts to Companies House





Income for 2016/7

Grant from Council

£139,300

• (2015/6 = £147,000)

Quartet Grant

£ 2,000

Interest

£ 448

Total Income

£141,748



Expenditure



Direct Costs	2017(£)	2016 (£)		
 Salary costs 	91,943	93,436		
 Agency & Consultancy 	4,108	5,478		
 Travel & Expenses etc 	4,966	4,386		
 Meetings & Events 	1,989	3,175		
 Marketing & Publicity 	11,837	17,796		
(including Printing and Website)				
 Total Direct Costs 	114,843	124,271		

Expenditure - Support Costs

	2017 (£)	2016 (£)
 Human Resources 	3,135	4,229
 Office Accommodation 	12,179	12,524
 Insurance 	322	312
• IT Support	1,352	1,502
 Telephones 	3,316	3,183
 Legal & Professional 	0	1,157
• Accounts & Governance	1,452	1,526
 Total Support Costs 	21,756	24,433



Expenditure - Project Costs

	2017(£)	2016(£)
Patients in Control		26,000
Central Ward	2,848	6,681
Diversity Trust	800	
Total Projects	3,648	32,681



Income & Expenditure for 2016/17

healthwatch North Somerset

Surplus (Deficit)	1,502	(£677)
Total Expenditure	140,246	181,385
Special Projects	3,648	32,681
Support Costs	21,766	24,433
Direct Expenditure	114,843	124,271
Total Income	141,748	180,708
	2017(£)	2016(£)



Compared with 2015/16

- After taking out Special Projects
- Core Grant reduced by 5%
- Staffing Costs slightly lower
- Marketing & PR reduced by £6,000
- Meetings & Events lower by £1,000
- Very close to Budget



Balance Sheet Assets & Liabilities at 31st March 2017 healthwatch North Somerset

• Cash at Bank and In Hand £60,443

• Debtors £2,082

• Less Creditors (476)

• Total Assets £62,049

Funded by

• Reserves from 2015/6 £60,547

• Plus surplus Current Year £ 1,502

• Total Funds £62,049

(£50,000 is set aside as a Designated Fund to cater for exceptional contingencies)





Final Points

- Breakeven aim for 2016/17, broadly achieved
- Grant Funding from North Somerset Council reduced by approx 5%
- Budget for 2017/18 is tight
- NHS and Social Care undergoing many pressures for change, stretching HWNS resources







You can run but you can't hide from Social Media

Maisy Griffiths
Information and Communications Officer



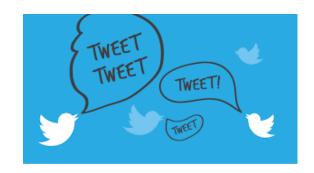






What we use











How we use it











Outcomes

- More followers
- Higher 'digital visibility'
- Can interact with important stakeholders
- Can engage with national campaigns







Julia Ross highlighted that @HealthwatchNS has done a fantastic job in engaging with the local community #NSccgAGM

4:15 PM - 25 Sep 2017







Connect with us today!







Enter and View Reflections

The volunteer's
Experience and the
Lay perspective



Training

Important to have:

- Healthwatch Induction
- Safeguarding for Adults training
- Equality and diversity training
- DBS check



Training covers:-

- What E&V is and what it is not!
- Where it can be done
- Where it cannot be done
- Who can carry it out
- What the benefits are
- Qualities of a good review
- Reporting



Visits

- The visit is booked in advance by HWNS staff
- Usually visit in one or two pairs
- Can be staff and volunteers or all volunteers
- Usually 1 engages and discusses whilst the other records/takes notes



Qualities of the volunteer

- Respectful
- Patient
- A good listener
- A good observer
- Team worker
- Considerate
- Accountable





A few rules

- Consider health and safety at all times
- Don't stop staff giving care
- Always introduce yourselves
- Keep to communal areas unless invited in to personal rooms
- Be friendly and allay staff anxiety
- Enjoy it



The report

- Decide who drafts the report and who checks it
- Ensure informants are not identified
- Findings good aspects are as important as things to be improved
- Ensure the report states it covers only a 2 hour visit
- Decide on recommendations



The volunteer's experience

- Varies with everyone's experience and venue
- Opens ones eyes to residential and elderly care
- Appreciate the amount of legislation and rules the managers need to meet
- It is the little things that mean most to residents and relatives



Value from the lay perspective

- Residents and relatives use us as advocates and air difficulties
- Residents can chat to a friendly person
- Report allows staff to hear unbiased view
- Volunteer feels it is a worthwhile intervention and experience.
- The public, North Somerset Council and CQC can use the report for selection and change.



Any Questions??????

- About being a volunteer?
- Where to get help?
- How to get training?
- Where to find information?

The Healthwatch North Somerset Team of course in the Nailsea office.



Thank You

For listening

Patricia Godfrey

North Somerset resident for 42 years

Retired nurse and Lecturer

Grandmother of 4

Volunteer

SW Clinical Senate, Citizens' Assembly





Annual Report 2016/2017

Eileen Jacques
Chief Officer



Healthwatch North Somerset Annual Report

- lt is a statutory function to produce an Annual Report by 30th June each year
- We must include certain items in the report <>>
 - We send it to our Commissioners-North Somerset Council, local Councillors, local
- MPs, local Health Overview and Scrutiny Committee and Healthwatch England, NHS England, Care Quality Commission
- Healthwatch England reads through every one of the 152 local Healthwatch Annual Reports to create a summary of key themes and issues through the country for presentation to the Department of Health



Gathering your views



In 2016/2017 we:



Listened and spoke with 2500 local people and gathered more than 2000 pieces of feedback



Reached more than 60,000 people on social media



Engaged with a diverse range of hard to reach groups



Carried out over 100 engagement activities with local people



Published nine service evaluation reports and nine Enter and View reports



And provided all your feedback to local health and social care providers and commissioners



Monitoring Local Services



Public feedback



Meetings







Informing the public

University Hospitals Bristol



Bristol, North Somerset and South Gloucestershire Sustainability and Transformation Partnership (BNSSG STP)

North Somerset Clinical Commissioning Group

South Western Ambulance Service **WHS**

NHS Foundation Trust









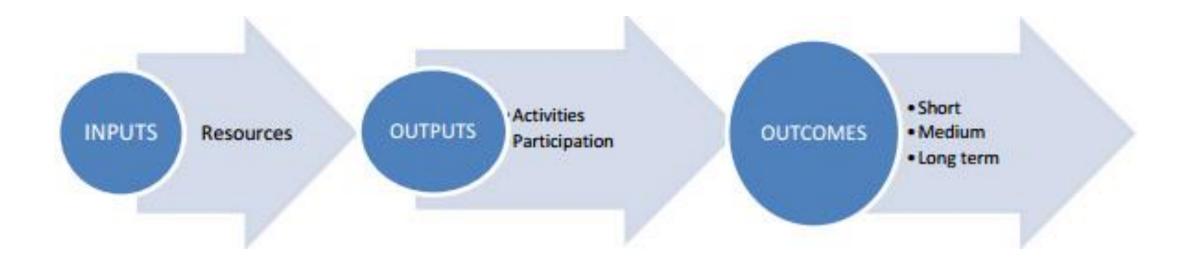
NHS Foundation Trust







So what?!











To the Healthwatch North Somerset Team, Directors, Volunteers and Supporters who have worked hard through the year to ensure that the public voice is heard - a big







Patient and Public Involvement in health:

for people living and working in North Somerset

Mary Adams
Patient and Public Involvement
lead for the BNSSG CCGs

Overview:

- Bringing together Bristol, North Somerset and South Gloucestershire CCGS – into a single commissioning voice
- Patient and Public Involvement GP Practices (Primary Care)
- Healthy Weston: joining up services for better care in the Weston area



BNSSG CCGs – a single commissioning voice

- July 2016 NHS refresh in resulted in legal directions being issued to North Somerset and South Gloucestershire
- An independent Capacity and Capability Review was commissioned by the BNSSG CCGs.
- Recommended closer collaboration and creation of a 'single BNSSG commissioning voice'.
- Since then working together as a single commissioning team, but became clear that a merger would place the CCGs in a better position to face their challenges
- Other CCGs across England are in a similar position
- Now in a process of transition GP membership has approved; NHSE need to approve a new constitution by the end of Dec 2017 – for creation of the new organisation by April 2018



Patient and Public Involvement - GP practices (Primary Care)

Three NHS bodies that commission Primary Care:

- All are required to engage with patients and public - generally and for service changes.
- Clinical Commissioning Groups
- NHS England
- Public Health / Public Health England
- All use a variety of approaches and mechanisms for engaging, including working with Healthwatch and Practice Patient Groups
- Practices often lead engagement and are supported to do so by bodies such as the BMA who published a PPI toolkit for GPs in 2015.



Clinical Commissioning Groups

Patient and Public Involvement - GP practices (Primary Care)

- The BNSSG CCGs are creating a new Patient and Public Engagement
 Forum within their governance structure
- NS CCG Voices for Health Group is a group that includes lay volunteers and Healthwatch to review and support our PPE strategy which will continue

A challenge:

But how 'local' will the local voice be in the future?

- 1) How do PPGs connected to individual practices respond to changes in primary care with practice federations and mergers?
- 2) How do those that support patient and public involvement develop skills and capacity to contribute to an increasingly complex and challenging debate around health and care transformation?



Healthy Weston: joining up services for better care in the Weston area

- Public engagement from February until April 2017
- Healthwatch collated all the feedback into a report
- Feedback said that people wanted us to consider the services for the Weston area in the round – not just at the hospital but GP and community care, mental health, maternity and children and young peoples services
- Also, since the engagement, A&E has closed overnight due to safety and solutions for the future need to be found
- A draft 'vision' document with a much wider scope is in the process of being finalised – once this has been agreed by our regulators a period of public dialogue and co-design will commence in mid-October
- You can look at the document on the CCG website public summaries will be available soon





The Prioritisation Panel

Jane Towler and Sue Stone Volunteer Prioritisation Panel members



What is the Prioritisation Panel?

- Group of volunteers with Healthwatch staff and Board Member
- From a variety of backgrounds
- Volunteers are selected by an interview process





What does the Panel do?

- Meet quarterly
- Interrogate data gathered by Healthwatch
- Decide where the Healthwatch North Somerset team needs to focus their work programme





Who are the Prioritisation Panel?

- Chaired by the Chief Officer
- 2 Board Members
- 4 Volunteers
- Healthwatch staff member/ Note taker





Can I come to the meetings?

- Yes
- Prioritisation Panel meetings are open to the North
 Somerset public
- However, the public are invited as observers only



healthwatch North Somerset

Why did we become members of the Prioritisation Panel?

- Passionate about our local Health and Social Care Services
- Healthwatch helps shape our local Health and Social Care services
- Healthwatch have an important role in reaching people and is ideally placed to work and engage with patients, public and organisations involved in providing our care



Examples of the Panel's work

Data was showing number of issues in accessing GP services

"Access To GP Appointments"

 Data and conversations where showing a number issues from a carer's perspective

"Investigating Support for Carers"

- Number of issues about dental health
 - Contact made with commissioner of service to highlight the issues being shared with Healthwatch



Further Examples of the Panel's work

Enter & View

- Support for mothers to breastfeed babies admitted to hospital
 - Response received from hospital concerned
- Discharge Planning in Bristol and North Somerset







When is the next Prioritisation Panel public meeting?

Monday 16th October 2017

The Campus, Worle BS24 7DX

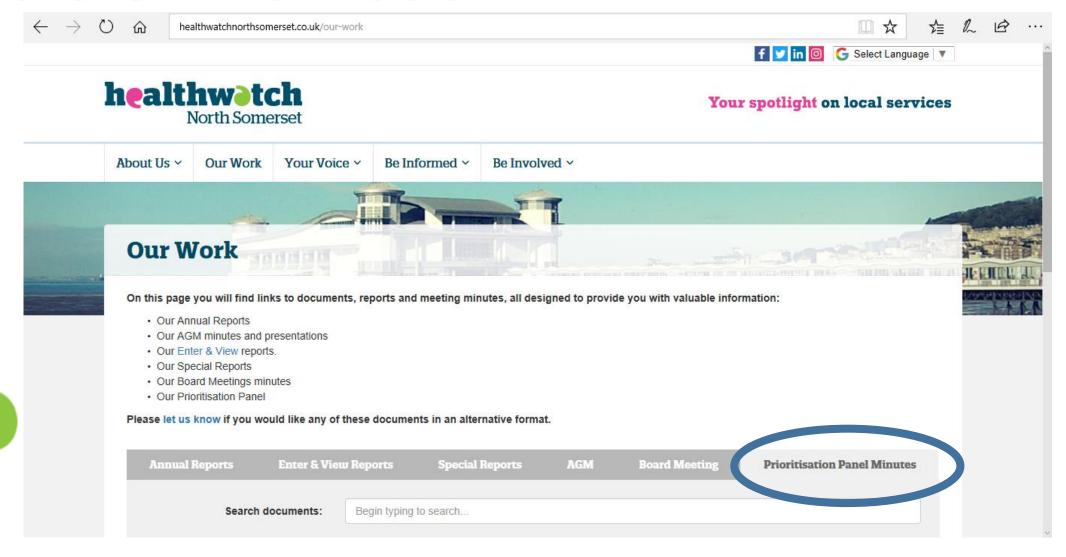
Public Meeting 3.45 pm - 4.15 pm

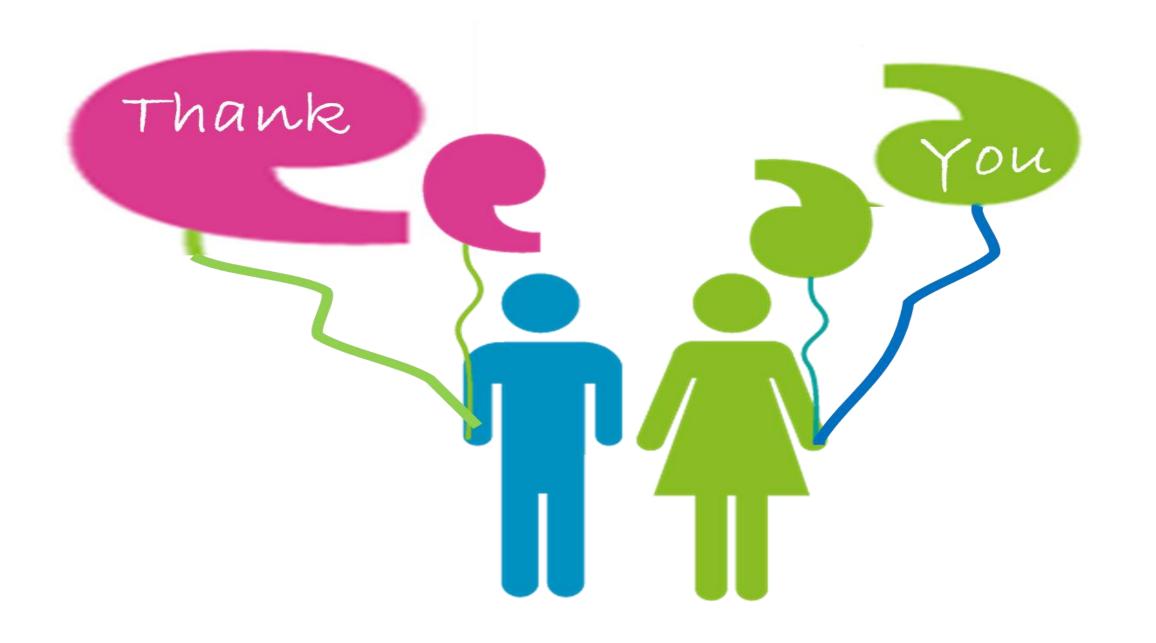






Further information











Engagement: Squaring the Circle

Karen MacVean Engagement Worker

A Definition of Engagement



Public engagement

"Is a process that brings people together to address issues of common importance, to solve shared problems and to bring about positive social change. Effective public engagement invites citizens to get involved in deliberation, dialogue and action on public issues that they care about. And, it helps leaders and decision makers better understand the perspectives, opinions, and concerns of citizens and stakeholders"

NY-based Public Agenda.

General Synopsis on the Benefits of Engagement.

"When done well, public engagement goes far beyond the "usual suspects" to include those members of the community whose voices have traditionally been left out of political and policy debates. Moreover it:

- Helps people weigh up a variety of perspectives and listen to each other's views;
- Builds common understanding, manages differences and establishes direction for moving ahead on tough issues;
- Builds trust and improves communication between the public and leaders;
- Creates new opportunities for citizens to become involved in public problem solving and decision making".

NY-based Public Agenda





What are the benefits of Engagement in shaping the future of North Somerset Health Services?

- Meeting the Communities Needs: Collaboration with communities can successfully improve planning and decisionmaking to deliver services and activities which meet all the members of the communities needs.
- Cost Effective: A systematic review of Community Engagement has shown it can empower communities and is more likely to lead to services, activities and interventions that communities want and need and which, consequently are likely to be more effective in improving health.

At the Heart of Health Report, realising the Value, March 2016 www.realisingthevalue.org.uk



What does Healthwatch North Somerset do to ensure North Somerset People 'Have a Voice'?



- We listen to and record what people say. This includes good practice.
- We make sure there are plenty of opportunities to collect the views and experiences from all members of the community.
- The data we collect is then collated into a monthly report that is sent to stakeholders and decision makers including commissioners and service managers, Healthwatch England, CQC and NHS England.
- We highlight good practice to share and make recommendations based on the evidence we have received
- We look more deeply into issues that come up repeatedly i.e. Reports and Enter and View Visits.



What does Healthwatch North Somerset Do to ensure North Somerset People 'Have a Voice'?



In order to listen to as many people of North Somerset as we can:

- We go to where local people are i.e. Sovereign Shopping Centre, Freshers Fair, Markets, Libraries, North Somerset Show, Pride, Church Groups, Children's Centres, Foodbank and Leisure Centres.
- We attend focused community and health groups such as Weston Rheumatoid Arthritis Group (WARM), Rotary Clubs, Parkinson's and Youth Groups to name a small number.
- We work with other groups and organisation to access harder to reach groups in the community i.e. young people with mental health issues (through CAMHS), BOME, Rural Communities, homeless (through food banks) and Leg Clubs



What does Healthwatch North Somerset do to ensure North Somerset People 'Have a Voice'?



- We have a Volunteer-led Prioritisation Panel in place who look at the data and pick up themes.
- We use a wide range of tools to facilitate people giving us feedback including face to face, telephone, questionnaires, Share Your Story leaflets and on-line access.
- Healthwatch staff or volunteers attend strategic meetings to ensure that the people of North Somerset 'voice' is always present and heard, especially when important decisions are being made about future services.

What Has Changed in North Somerset because of Public Engagement?



- In response to a member of the Public ringing up and asking if the Diabetes Publication '100 things' was available in braille, we rang Diabetes UK and found out it wasn't. Diabetes UK told us that as a result of our call, they would now look into providing their publications in braille.
- We have been advised by NSCP Discharge Lead that the findings and recommendations from the Healthwatch North Somerset Stroke Report (2015) has been very useful for professionals who have been identifying gaps and developing Stroke Discharge and Community Rehabilitation Pathways which would work for stroke survivors in North Somerset.

So What Has Changed in North Somerset because of Healthwatch NS Public Engagement?

healthwotch

A Short Case Study

Last December Healthwatch North Somerset carried out an Enter and View Visit to the Outpatients Departments at Weston General Hospital. Overall there was very positive feedback about the treatment, care and staff attitudes; but two issues came up

- Patients told us there was no hand sanitiser next to the electronic sign-in machines. These have now been installed in all the outpatients departments
- Some patients in the Eye Clinic waiting room told us they had difficulty in seeing the information boards. The patients explained this issue was due partly to the way the chairs were set up, coupled with poor lighting and where the board was situated. This waiting room has now been reorganised after consulting with Vision North Somerset to ensure the information board is more visible.

The Report was shared with Weston General Hospital outpatient staff, so that they were made aware that mostly what they were doing worked really well and to carry on doing it as it was much appreciated by the outpatients.

How do we show success?



So how do Healthwatch North Somerset show the people of North Somerset that their views and experiences have changed and/or shaped future services to the benefit of all the residents living in the Community?

- Return Visits i.e. Enter and View
- Re-visit previous reports and ask current service users if the report recommendations have been implemented or made a difference i.e. 2015 Community Stroke Report
- Success can be reflected in the feedback we receive (not getting the same issues coming up)
- "You Said We Did" section on the website
- Use the website, newsletter and other social media to let people know when positive changes happen.



In Summary the Benefits of Healthwatch North Somerset Engagement are!

Happy Healthy North Somerset Residents all enjoying fit-for-purpose, economically effective Health and Social Care Services



































Thank you for coming

