

Healthwatch North Somerset



Annual Report
2014/15



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Note from the Chair and Chief Officer



Georgie Bigg
Chair

There are many people involved in the work of Healthwatch North Somerset - the staff team, the Board of Directors, volunteers and members, and all are passionate about ensuring the voice of local people on issues of health and social care is heard.



Eileen Jacques
Chief Officer

We have just entered our third year and this report reviews what we achieved in the previous year, what impact we have made and what we can take forward to enhance our continued work. It is useful to take time to look back at the huge amount of work achieved in just one year, I'm sure you will agree there is no doubt that Healthwatch North Somerset is starting to make an effective impact.

We know that we don't work in isolation and recognise that developing relationships with local people, the local voluntary sector and community groups is vitally important, as is maintaining good working relationships with commissioners and providers of services and - acting when required, as a critical friend. We acknowledge that they face many challenges in providing services at a time when more resources are needed as budgets are decreasing.

All the information we gather is utilised to improve services for local people. The back bone of our work is the stories and experiences of local people, and in order

to gather these we must get out and about and speak to people. We have developed a good level of engagement and plan to enhance this in the forthcoming year alongside a programme of enter and view visits.

We would like to give a huge thanks to the Healthwatch North Somerset team who work tirelessly to reach out to the people of North Somerset, the Board of Directors who in a voluntary capacity have provided excellent support, leadership and guidance for the Chief Officer and the organisation through the year and of course to all our volunteers and members who continue to give their time and expertise to ensure that our work influences local health and social care.

And finally we would like to thank the people of North Somerset who take the time to feed back their views and experiences and enable us to work towards ensuring the health and social care services in North Somerset meet the needs of local people.

Easy Read Summary

Your voice is at the heart of everything we do at Healthwatch North Somerset.

Events



In September we took a bus to Weston Super Mare.

North Somerset Council, Crossroads Care and lots of local charities joined us on the road to talk to local people.



In March we had an event for young people at Weston College.

The event was to raise awareness of mental health conditions.

We invited local services who work with young people with mental health problems to show the students the support available.



We opened a shop in Nailsea during February.

We spoke to lots of local people about their Doctors, Dentists, Hospitals, Community Health Care, and Care Homes.

Reports



Healthwatch North Somerset writes reports to tell people in charge about changes needed.

We share our reports with North Somerset Council, North Somerset Clinical Commissioning Group, NHS England, Local Hospitals, Doctors Surgeries and Care Homes.

Meetings



We hold meetings that we invite the public to.

We listen to the feedback we get from the public and have meetings about these topics.

We have speakers at the meetings who will talk about the topic and answer questions.

Talk To Us



We visit local libraries and Children's Centres around North Somerset every month.

When we are there we talk to people about their Doctors, Dentists, Hospitals, Community Health Care, and Care Homes.



About Healthwatch North Somerset

Our Board

Georgie Bigg (Chair)

Michelle Burnett

Tom Foot
(Co-opted to the Board in March 2015)

Celia Henshall

Chris Phillips
(Resigned in February 2015)

Dick Whittington (Treasurer)

Nikki Williams

Our team

Eileen Jacques Chief Officer

Kelly Herbert Administrator
(Resigned February 2015)

Clive Jones Community Engagement
Worker (SCL)
(Recruited June 2014)

Sophia Jones Volunteer Coordinator
(Recruited November 2014)

Claire Malton Administrator
(Recruited February 2015)

Kerry McDermott Information and
Communications Officer

Tamar Sutton Community Engagement
Worker



From left to right:
Eileen Jacques, Kelly Herbert, Tamar Sutton, Kerry McDermott,
Clive Jones, Sophia Jones, Claire Malton

Our Mission:

By offering all people of North Somerset a strong voice, we will improve the quality of local health and social care.

Healthwatch North Somerset is here to listen to local people and provide a strong voice to influence health and social care services.

Gathering views, both good and bad is an important part of how we work to improve health and social care and through this, encouraging providers and commissioners to become more responsive to what matters to local people and ensuring that services are designed around local needs

We do this by:

- Going out into local communities and asking people about their views and experiences
- Listening to and recording people's views and experiences and looking for patterns that show where change needs to happen
- We tell the organisations that commission and provide services what local people have told us
- Attending meetings to share and represent local people's views and experiences
- Checking providers and commissioners are listening to people's views and using this information to improve services



Over the past year our level of influence has grown and our impact comes from strong local connections and bringing people's voices together.

We don't work alone; we work in partnership with the local voluntary sector, community and statutory organisations and it is important that we strive to work in a collaborative way with all our partners. We are part of a wider network and work to bring together local voices to ensure that the volume is turned up.

Healthwatch North Somerset has developed effective connections with partners in the voluntary and statutory sectors at both strategic and operational levels.

Through the year we have extended our membership and solidified our volunteer base through the recruitment of a volunteer coordinator and we ended the year with a core of volunteers who are committed to the organisation. This puts us in a stronger position to inform and contribute to the community-based focus of local commissioning intentions.

Central to our service to the public is the need to ensure that our feedback has a strong evidence base to enable influence, despite remaining independent and objective and retaining a commitment to confidentiality where appropriate.

It is evident that the reputation of Healthwatch North Somerset is spreading, however we also recognise that we still have some way to go before Healthwatch North Somerset is recognised as a household name in North Somerset.

Much of our work seeks to let people know that we exist and the reasons why we are here, because quite simply, people can only feedback their experiences and views if they know about us.



Healthwatch North Somerset

Healthwatch North Somerset is a Charity (no: 1158487) and a Company Limited by Guarantee (no: 8187141) contracted by North Somerset Council to carry out particular activities (Section 221(2) of The Local Government and Public Involvement in Health Act 2007).

The legislative requirements of The Health and Social Care Act 2012 outline a number of statutory functions on which the activities below are based:

1. Promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services.
2. Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved.
3. Obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known.
4. Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England group structure.
5. Providing advice and information about access to local care services so choices can be made about local care services.
6. Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.
7. Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues.
8. Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.



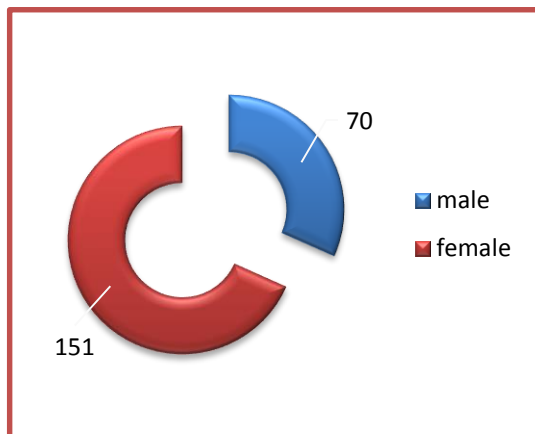
Members

Healthwatch North Somerset is a membership organisation with a membership that grew by 33% compared to the previous year.

Of these 221 members:

70 male members

151 female members



Urban areas

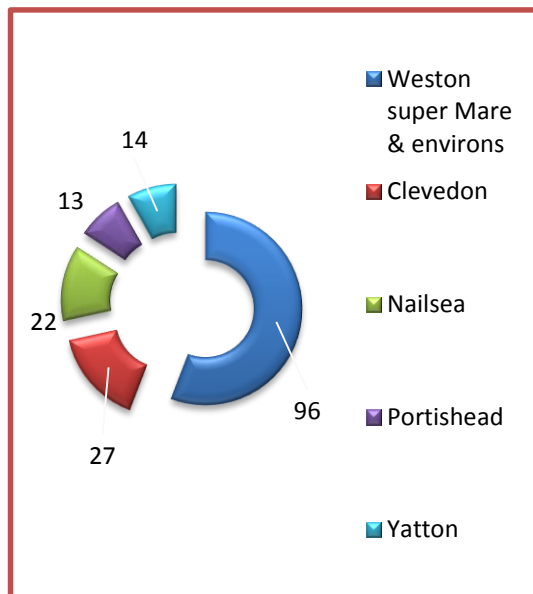
Weston super Mare area: 96 members

Clevedon: 27 members

Nailsea: 22 members

Portishead: 13 members

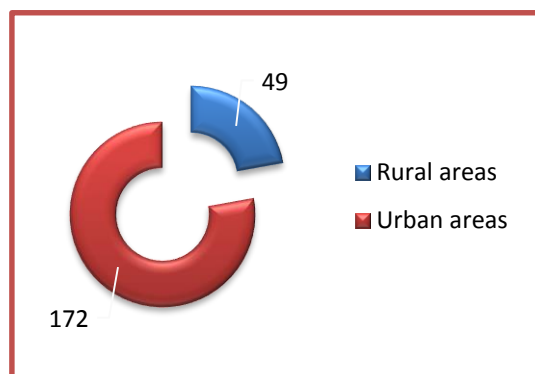
Yatton: 14 members



Geographical membership

Rural areas: 49 members

Urban areas: 172 members



We also maintain a database of an additional 200 people / organisations who receive our information and newsletters.

People who want to know more about what we are doing can sign up to receive our quarterly newsletter. The newsletters which are full of useful information are received well by the public.

Anyone who signs up for the newsletter will also join our list of people who receive our reports, invitations to events, opportunities and updates.



Engaging with people who use health and social services

Healthwatch North Somerset has undertaken a variety of different ways to engage North Somerset residents, recognising the diverse nature of the county.

In the early part of the year activity was focused on the population as a whole, with a more targeted approach later in the year - seeking to engage people in their communities.

Wherever possible we seek to have a stall at every key event in North Somerset to ensure we have a presence in the public eye. We attend relevant local voluntary sector meetings and provide a speaker wherever possible. We circulate our quarterly newsletter widely to approximately 700 people each quarter. We distribute leaflets and flyers at every possible opportunity.

We hold public meetings on a number of key issues and advertise widely to ensure we have good audience numbers and provide the public with the opportunity to ask questions and tell us about their experiences. The reports of all our public meetings are made available to the public. Board meetings are also held in public.

The Healthwatch North Somerset team and volunteers regularly attend local, regional and national meetings and events about Health and Social Care issues. These events help us to keep up to date with the latest developments in health and social care provision which informs our work.

We have developed a system through which we collate, store and report all items of information, feedback, actions and requests for information. We have developed systems to log intelligence.

We have sent out over 30 local and national consultations to our members to give them a voice and influence over how Health and Social Care services are shaped.

Great progress has been made over the year during which we have sought feedback from the public and promoted Healthwatch North Somerset at the following:

Bus 'talk to us' event Weston
Pop up shop 'talk to us event'
HWNS Board meetings in public
Libraries 'talk to us' outreach
Weston college fresher's fair
Dementia conference
BIG advice days
AGM
GP Survey
Clevedon festival
North Somerset Show
Young people's conference
GP Surgery 'talk to us' outreach
North Somerset Ploughing Match
North Somerset CCG Health events

We have also carried out targeted engagement work with particular hard to reach communities. We have ensured that we sought the views of young people, people over 65, disadvantaged or vulnerable people and people who are hard to reach and seldom heard.



All of our public engagement work seeks the views of not only those who are resident in North Somerset but also of those who work, volunteer and visit North Somerset and who may use local health and social care services.

We have sought local people's views and experiences of health and social care services through:

- Bulk emailing
- Newsletters
- Speaking at meetings
- Stalls at events
- Setting up our own events eg bus event
- Community Groups
- Voluntary sector
- Projects
- Twitter
- Facebook
- Website
- Weston Hospital Sunshine radio
- Media

Children and Young People

Healthwatch North Somerset has a responsibility to ensure that the voices of children and young people are listened to. Here's what we did in 2014 / 2015 to gain and represent the views of people who are under 21:

We supported young people to reduce the stigma of mental health

In March 2014 a group of young people contacted Healthwatch North Somerset for support in setting up an event in their local school to promote positive mental health. The school had suffered the loss of two pupils to suicide and this had unsettled the school community and pupils proactively sought to turn this around. Through Healthwatch North Somerset's involvement the school held a successful event.

We engaged the public to consider the provision of mental health services for young people

Involvement in the positive mental health project with the school prompted us to consider the level of public awareness and concern for teenage mental health. This developed into a public meeting to gather views about the public's experiences of access to mental health services for young people. The meeting sought to involve mental health practitioners and provide an



opportunity for the public to ask questions and express their views, as well as providing an opportunity for us to gather feedback about local service provision.



The public meeting, held on 28th April 2014, invited two pupils from the school to share their reasons for developing the project and their motivation for it. Additional speakers at the meeting included a North Somerset CAMHS psychologist, a Consultant Child and Adolescent Psychiatrist and an expert in cyber bullying.

More than 40 people attended the meeting and questions were raised about the level of mental health support for teenagers in North Somerset. Parents shared their experiences and frustrations of the current system and the meeting illustrated how widespread mental health issues are for young people and the depth of concern in North Somerset, including the lack of funding, for young people's mental health services locally and nationally, and the consequential long waiting times and strict criteria for access.

We gathered details of a number of issues from the meeting regarding mental health services, and our intelligence tells us that there is much to be done to improve services. A report was produced which included three clear recommendations. The report was distributed and publicised widely and was accepted and discussed in detail at the North Somerset People and

Communities Board and Health Overview and Scrutiny Panel.

We increased awareness of mental health wellbeing through the student population

The crisis in young people's mental health service provision inspired us to continue to keep the issues prominent and we received grant funding from the Quartet Community Foundation to hold a Positive Mental Health and Wellbeing Conference for young people. The event, held on 3rd March 2015 was co-produced with Weston College. Students designed and created their own information stalls to address various mental health issues to inform young people of where they can go to get help. The event was based on providing peer support to break down the stigma of seeking support for teenage mental health. More than 300 students attended the event.

There were numerous stalls from voluntary sector mental health and other relevant support organisations, as well as Healthwatch North Somerset who encouraged students to complete feedback about their understanding and experiences of mental health. Almost 200 pieces of feedback from students were gathered at the event.

“We did eating disorders because we didn't know a lot about them but knew that they often develop in people our age. Lots of people have come to talk to us today. Some parents have taken our leaflets in case they need information for their children.”

Weston College Student

We chose to do depression because it's something that is often swept under the carpet. It's good to bring it out into the open. Now we know the signs, we think we can be useful in helping to spot them in other people and offer them advice."

Weston College Student

The focus on teenage mental health, has for Healthwatch North Somerset been an important one as it has involved in-depth engagement with young people who are often hard to reach. Healthwatch North Somerset has engaged with young people in a way that has been enabling and supportive, allowing this group, as experts, to develop the processes in which they work and share with their peers the knowledge they have gained - this has proved to be an effective and powerful way of engaging with young people.

We provided the tools and they developed the message. We engaged through focus groups, social media, surveys and face to face prior to and during the events



We challenged the consultation period for children's services Reprocurement

Healthwatch North Somerset has been actively involved and engaged in the BNSSG (Bristol, North Somerset, South

Gloucestershire) Children's Community Health Services Reprocurement attending and contributing to meetings and sourcing three young people from North Somerset to join the Young People's engagement team.

In June 2014 Healthwatch North Somerset recognised that the consultation time scale for the Reprocurement process was only six weeks and inadequate to provide full public involvement.

We intervened with a letter challenging the consultation time scales, suggesting they did not allow suitable engagement or enable adequate feedback from the public.

As a direct response to our intervention, the consultation period was extended from 6 weeks to 12 weeks (extended from July 2014 to September 2014).

During the consultation period we engaged widely with the public in North Somerset, Child and Adolescent Mental Health Service (CAMHS) and voluntary sector children's organisations. North Somerset Council and North Somerset Clinical Commissioning Group thanked us for our intervention which led to a stronger voice in the Reprocurement process for not only the children of residents in North Somerset but for the children in Bristol and South Gloucestershire.

Young People's Forum

Healthwatch North Somerset has been central in engaging and leading a working group with the aim of setting up a young people's forum. Working with other voluntary and statutory agencies we are considering the way forward for the group.

Older people

Healthwatch North Somerset has responsibility to ensure that the voices of older people are listened to. Here's what we did in 2014 / 2015 to gain and represent the views of people who are over 65:

Healthwatch North Somerset was commissioned in 2014/ 2015 by North Somerset Council to provide support to five groups of older people called the Senior Community Links - four of the groups were locality based and one group represented the senior BME community.

A community engagement worker was recruited to support the groups who each met monthly to discuss the issues facing older people, to provide a forum for two way communication, debate and discussion for older people with North Somerset Council and health and care providers and other relevant organisations.

We have also engaged extensively with older peoples groups in the community and in local churches.

Hard to reach and seldom heard groups

Healthwatch North Somerset works with local people in their communities and works to ensure that the views of those groups of people who are seldom heard and those whose voice can often get overlooked. We undertook a special report to seek the views of disadvantaged and vulnerable people with our Special Discharge Project - further details can be found in this report.

We engage with a number of voluntary sector and community groups who work with those who are seldom heard and gather feedback. We managed the support and administration for the North Somerset Learning Disability Partnership Board, the Carers Strategy Implementation Group, North Somerset Autism Group and the five Senior Links Groups.

These groups provided an excellent opportunity for us to have access and key involvement in number of hard to reach strategic groups and to gain an understanding of the current issues facing people in these groups in North Somerset.



Partners

Healthwatch North Somerset has signed up a number of voluntary sector organisations who work with hard to reach groups of people with an aim of working closely with our partners and developing strong two way relationships. Our partners are:

- Vision North Somerset
- Crossroads Care North Somerset
- Homestart North Somerset
- North Somerset People First
- Key Steps
- Springboard Opportunity group
- Citizens Advice Bureau

Media

Healthwatch North Somerset has established a regular visible presence in the North Somerset newspapers which helps to engage the public and encourage public feedback, promote public awareness of the Healthwatch brand and the role and functions of the organisation. We actively promote our work, forthcoming engagement activity, Board meetings in public and our reports.

We provide press releases to the media of all our work, the list below represents the coverage achieved:

	2014										2015			Circulation
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar		
North Somerset Times			X	X		XX	X	X	XX	X			42000	
Weston Mercury	X		X	X	X	XX	XX			XX			13326	
Nailsea and Backwell Living					X				X		X		10000	
Clevedon & Tickenham Times										X			34423	
Hutton News								X					2909	
Clevedon Living									X				9500	
Nailsea Times									X				31515	
Wrington Journal							X						3161	
Weston & Worle View					X								15000	

We have also had articles and information published in numerous local parish magazines.



Newsletter

The Healthwatch North Somerset newsletter is published quarterly and provides information about Healthwatch, local Health and Social Care groups and national health campaigns and issues of local interest.

Each publication is sent to in excess of 700 people electronically and hard copy. The newsletter is available to download from the website and hard copies are made available at every event attended.

The newsletter has been well received and we may consider publishing the newsletter bi-monthly in the future.

Gathering views

Last year though our engagement activities we spoke to a diverse range of people in excess of 4000 and gathered 384 pieces of intelligence which has been recorded and disseminated in our intelligence reports through the year. These reports were provided to the commissioners and service providers to influence the provision of local services, they were also provided to Healthwatch England.

Public engagement events

Public engagement events have enabled us to talk to people face to face and find out public views. We have been supported at many events by our team of volunteers.

Libraries

Over the past year we attended regular outreach sessions at local libraries and GP Practices across the county including the mobile library service. During outreach sessions we aim to speak to members of the local community about who we are and what we do at Healthwatch North

Somerset and gather local health and social care intelligence from the public.

“Nailsea Library is pleased to work with Healthwatch North Somerset and this is a valuable service which is regularly accessed by library users.”

Phil Robertshaw, Nailsea library

Talk to Us - Bus Event

In September 2014 we organised a ‘Talk To Us’ Bus Event in Weston Super Mare. We teamed up with First Bus Bristol who donated a bus for the day to enable us go on the road and talk to local people. The bus was used as a focal point for our banners and information on the day. Tower House Pharmacy from Nailsea joined us at the event to offer free health checks, and we invited local voluntary sector organisations to have a stand and talk to the public about their organisations.



The event which was a huge success sought to raise the profile of Healthwatch North Somerset with the public and gain intelligence. We spoke to over 400 members of the local community who provided us with local intelligence.

GP Practices

We began the year with a programme of outreach sessions located in GP practices.

Leaflets and posters

We have a range of leaflets and posters which are distributed throughout North Somerset.

Pop up shop

In February 2015 we set up a pop up shop in Nailsea. Taking over an empty shop unit for a week, we turned it into a Healthwatch Hub with the aim of increasing our profile in Nailsea and gathering intelligence from local people. During the week a local pharmacy

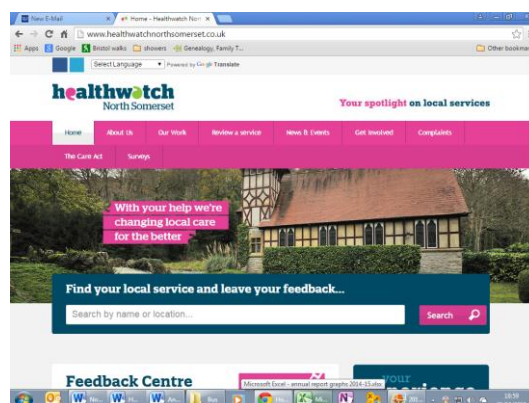


provided free health checks to the community, and each day different local voluntary sectors groups joined us in the shop. On the last day of the shop we had a fun day with a face painter and smoothie bike to encourage families. The shop was a great success we spoke to over 300 local people about health and social care in North Somerset.

Website

A website is an important communication tool and during the year we invested in a new website which went live in November 2014. The new website has a feedback function for all Health and Social Care services used by North Somerset residents which enables the collection of local intelligence. The website provides an opportunity for the public to have their

say and rate and review their local health and social care services in a trip advisor style format. We update the site weekly with information of relevance and interest to the public. The site has a myriad of information relating to health and social care and there are pages that provide information about the work we are doing including news and events. We have received good feedback about the website and we are getting between 30 - 50 website views per day.



Social Media

We use social media extensively and our Facebook and Twitter accounts are updated daily by our volunteer Sean and the team. At the end of 2014 / 2015 we had 82 Facebook Likes and 653 Twitter followers.



Voluntary sector

Our engagement with the North Somerset community is central to the work we do and we seek to engage on an individual level as well as working hard to develop a network for communication with local voluntary sector organisations. We continue to work towards ensuring that the wider voluntary sector becomes involved in our work and informs its key activities.

During 2014 / 2015 Healthwatch North Somerset engaged with the following voluntary sector organisations:

- Bluebird Care
- Age UK
- LGBT Forum
- VANS
- Supportive parents
- CAB
- 1in4
- Keysteps
- PPG groups
- Portishead Stroke Group
- Meeting Point Backwell
- Crossroads Young Carers
- Our Voice Counts
- Care Forum
- Portishead Stroke group
- Crossroads alliance
- NSPF
- Weston College
- Clevedon Arthritis Care group
- SCL
- Diabetes group
- 38 Degrees North Somerset
- Somewhere to Go
- Crossroads Care
- Advice North Somerset
- NAS North Somerset group
- Alliance Homes
- Springboard Opportunity Group - Clevedon and Weston
- Samaritans
- Clevedon Partially Sighted group
- Diabetes Network
- Portishead Macular Group
- Positive Step
- Vision North Somerset
- Notable Club
- Crossroads Care North Somerset
- Mixed by Design
- 1 in 4
- Western Active Stroke Group
- Substance Advice Service (SAS)
- Homestart North Somerset
- North Somerset People First
- For All Healthy Living Centre



Volunteers

In November we recruited a volunteer coordinator to work specifically with our volunteers. Volunteers have been provided with more information about opportunities available and the volunteer programme and policies have been refined and formalised which combine to provide a robust and clear relationship with Healthwatch North Somerset.

This has created a stronger level of involvement and commitment by volunteers to our work. New volunteers are provided with information about opportunities available, a volunteer pack and regular support.

Volunteers are an increasingly invaluable resource and provide feedback on a regular a basis and enhanced recording processes internally enable active use of this feedback.

Our volunteers have:

- given more than 1000 hours of their time to support our work in 2014/2015*
- been actively involved in our engagement activities
- provided representation at meetings and have provided feedback on these meetings
- helped us with administration functions in the office
- engaged with us through the regular meetings of the Health group - feeding into our ongoing work and strategic activities
- provided ongoing and regular updates on Facebook and Twitter
- given lay representation in the local Reprocurement of Community Services process through training,

marking of bids and consensus meetings

- trained as equality experts
- given lay representation in the BNSSG Children's Services Reprocurement process

*This does not include the Board of Directors who are volunteers and give extensively of their time to oversee the organisation.

Health Group

We have established a Healthwatch Health Group of volunteers who meet bi monthly to assist us in bringing the voice and experience of service users, patients, carers and families to inform the Healthwatch North Somerset workplan. The group undertakes specific pieces of work, provides input into our strategy and attends meetings on our behalf.

Equality Volunteers

Healthwatch North Somerset has six volunteers who have each completed two days of equality and diversity assessment training and are able to undertake Equality and Diversity assessments of organisations. The equalities volunteers underwent training in EDS II which is the equality delivery system.

This equips them to undertake equalities evaluations of any organisation. They have currently completed evaluation and assessments of the North Somerset Clinical Commissioning Group and North Somerset Community Partnership.

Both of which were large pieces of work - lasting several days each for a team of four volunteers.

Volunteer story

Patricia Godfrey

One of our volunteers, Tricia, has volunteered with us for a long time and has been involved and supported us in many aspects of our work. We asked Tricia to summarise the volunteering work she does with us.



My involvement and commitment as a Healthwatch North Somerset Volunteer

Over the past year I have been involved in several important events, projects and meetings in the role of a Healthwatch Volunteer. I see my main task as representing North Somerset residents in decision-making by NHS and the wider health and social care organisations.

My background is of working in the NHS, health services abroad and in education of lay and professional staff, my last post being a lecturer with the Open University. My biggest input this year has been as a member of the North Somerset CCG Community Services Reprocurement Group in which my colleagues and I assessed 5

bids for community services which will be transferred to the successful organisation in 2016. This has involved 2 training sessions, reading confidential bids in the 3 rounds of these being submitted and scoring these bids for their coverage of social value and engagement as well as consensus meetings.

I have also represented patients and Healthwatch North Somerset for 2 days at multi-disciplinary meetings concerning the treatment and care of the 2 most debilitating problems occurring in the elderly in North Somerset - Ophthalmic (Eye) problems and muscular/skeletal disease such as hand, shoulder and knee problems.

I attend quarterly Healthwatch Health Group volunteers meetings and also Healthwatch North Somerset Board meetings. I have attended public consultation meetings about the procurement process and the 111 out of hours telephone consultation scheme which replaced NHS Direct.

I use my available time for projects where I believe I have experience and which interest me and where I can make a difference.

As Healthwatch North Somerset develops and grows we need more volunteers to support and represent us throughout North Somerset.

Whatever your skills and interests we can find a volunteering role for you.

If you would like more information about volunteering for Healthwatch North Somerset please contact 01275 851400 contact@healthwatchnorthsomerset.co.uk



Providing information and signposting for people who use health and social care services

North Somerset is well supported by advice and information services and Healthwatch North Somerset offers an additional resource for people in North Somerset. We make use of existing directories of health and social care services and do not seek to duplicate information already available.

Healthwatch North Somerset acts as a point of access and provides a signposting service for local people to health and social care related organisations, putting them in touch with the local and national networks and services and signposting to other sources of information and advice as relevant.

We keep our knowledge up to date and understand what choices are available to people in relation to local health and social care services. Local people are able to access the signposting service through our website, by email, letter, in person or telephone. We also signpost complaints to the relevant complaints services.

Independent Health Complaints Advocacy

SEAP provides the Independent Health Complaints Advocacy Service for North Somerset. Healthwatch North Somerset and SEAP share information on a regular basis to identify themes and common trends. Healthwatch North Somerset is able to identify additional information and demonstrate some significant impacts that

can arise as a result of identified issues. The number of new cases in North Somerset has increased compared to the previous year and 5% of their referrals to SEAP been received through us.

The majority of SEAP's referrals from Healthwatch North Somerset relate to access, waiting times, quality of treatment and staff attitudes.

“We work with Healthwatch to identify themes and trends on a regular basis. Often Healthwatch has a lot of important information with regard to trends and we are able to illustrate these themes using the clients’ stories/case studies, demonstrating the sometimes significant impacts that can arise as a result of identified issues.”

George Baylis, Team Manager, SEAP

In 2014 -2015 we made 26 referrals or signposted to other voluntary or community sector organisations and made 15 referrals or signposted to statutory organisations (CCG, GP, PALS, NHS England, CQC).



Influencing decision makers with evidence from local people

The purpose of gathering the views of the public in North Somerset is to make sure that they are heard by those in charge of health and social care locally and nationally and to ensure the views and experiences are taken in to account to improve services. The role of Healthwatch North Somerset is to act as a ‘critical friend’ and hold the commissioners and providers of services to account on behalf of local people.

We influence decision makers in a variety of ways:

We produce monthly intelligence reports of the public views and experiences and these are distributed widely to North Somerset Council, North Somerset Clinical Commissioning Group, Care Quality Commission, North Somerset Community Partnership, NHS England South West, Quality Surveillance Group, Care UK, Healthwatch England.

We record every piece of feedback received from the public on a database and we look for themes and patterns. When we recognise a theme or pattern we seek to look further into the issue and feedback what we have found.

When we look further into issues we often create a report and within the report we will offer recommendations. We take into consideration whether the recommendations we make are achievable, affordable and evidence based. We ask all stakeholders relevant to the report for comments on the report before it is made available to the public.

The law says that service providers must have regard to our views, reports and recommendations and respond explaining what action they will take, or why they are not taking action.

We receive details about some issues formally from individuals and we acknowledge these, request agreement that we can forward on details of the issue to the appropriate body.



If agreed we forward the issue to providers and commissioners for further information to clarify - we can do this formally through a letter requesting a response within 20 working days or informally, by a conversation to clarify.

We respond to the individual on each case and may refer to the relevant complaints service or the complaints advocacy service.

All issues are recorded on our database and have been resolved or signposted. We need to be aware of the confidentiality of many of the individual issues raised and that by making these public the individual may be able to be identified.

We have dealt with 21 such issues through the year which can be broadly categorised as follows:

- Parkinson's Services
- mental health x 2
- discharge from hospital
- equalities
- respite care x 2
- care services
- GP services
- Southmead Hospital x 3

- 111 Service
- Podiatry
- Clevedon Hospital.

We also have the ability to make recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues.



Producing reports and recommendations to effect change

Healthwatch North Somerset produced seven reports during 2014 - 2015 as a result of our public engagement. All of our reports have recommendations to stakeholders and stakeholders are given an opportunity to respond to the reports before they are made available to the public.

There have been varied responses to our recommendations, some stakeholders have chosen not to respond, whereas others have taken the reports positively and incorporated the findings to improve services.

All of our reports are tabled at the People and Communities Board and the Chief Officer and /or Chair are asked questions about the reports.

Some of our reports are tabled at the Health Overview and Scrutiny Panel and the Chief Officer and /or Chair are asked questions.



Hospital Discharge Report

This report is a summary of feedback received at the Discharge Public Meeting workshops.

The following recommendations were made:

1. Streamline discharge processes to avoid long waits after being patients are advised they are to be discharged.

2. Streamline prescription processes so that patients receive medication on discharge and avoid long waits.

3. Development of a patient centred discharge process which is focused on the patient's individual needs.

Outcomes: The report was acknowledged and we were advised that there are ongoing assessments of the discharge processes in local hospitals.



North Somerset Dementia Challenge Workshop

Healthwatch North Somerset had a place on the Board to develop the Dementia Challenge Conference and with North Somerset Community Partnership and WERN Village Agents we hosted a workshop at the event.

A large number of people in the workshop had first-hand experience of dementia through family or friends and many of them shared recommendations to improve dementia services.

The following comments and recommendations were made:

1. Improve awareness with GPs that dementia can occur at younger age - an example was given of a diagnosis of dementia taking 3 years due to age; 57 was considered too young.

2. Many people with dementia feel isolated but it is good to socialise with people without dementia eg walking groups, activities.
3. Including people diagnosed with dementia in relevant workshops and meetings enables patient / carer feedback and can influence service provision.
4. Partners in Primary Care do not work effectively together.
5. The services for dementia care are not joined up.
6. There is a need to understand that there are some barriers in North Somerset that are causing the services to not be working together effectively.
7. GPs are not listening to family members and this is causing time being wasted in getting a diagnosis.
8. Family members are the experts and this should be acknowledged.
9. There are no mechanisms to influence dementia services in North Somerset.
10. In 1994 the dementia service system was effective but it has regressed, although there are still some examples of good practice.
11. An example of good practice was a good level of support from a GP after diagnosis who rang the family every few months to check on progress. The family felt well supported.
12. It is important to recognise the input of and effect on carers.

13. Carers support groups can enable carers to talk about and share their problems.

Outcomes: The Dementia Challenge Conference was held by North Somerset Council as a commitment to improve awareness of dementia and dementia services in North Somerset and a great deal of work has progressed since the Conference with several stakeholders including North Somerset Council, North Somerset Community Partnership and voluntary sector organisations actively working together.



GP Practice Website Review Report

As part of our wider work around Access to GP Practices in 2014-2015 we took a spot check of the accessibility of GP Practice websites in North Somerset. We found a lot of good practice but some areas where there could be improvements.

Outcomes: Some local GP Practices made changes to their websites as a result of our findings, making access easier for their patients.

Discharge Special Enquiry

This report was instigated by a request from Healthwatch England for each local Healthwatch to undertake an enquiry into one aspect of discharge in their county. We chose to review discharge from Weston General Hospital for vulnerable people - homeless and vulnerably housed.

The following summary was made:

1. There was a lack of coordination between the Hospital discharge team and community based services.
2. There was a lack of establishing that there was support in place for vulnerable people on discharge, including access to shelter.
3. The service users were unable to articulate their vulnerability and it appears that they weren't all asked about their personal situations.
4. There was a lack of clarity on discharge by the service users about any follow up care and/or treatment required.
5. This is a hard to reach and hard to manage group of vulnerable people, some of whom are slipping through the net.

Outcomes: The report was referred to North Somerset Council. See Impact Case Study 3 for full details of outcomes.

Public Meeting GP Good Practice

This meeting sought the views of the public regarding GP practices. The meeting aimed to clarify some of the issues raised by members of the public and also served as a means for Healthwatch North Somerset to gather further intelligence around primary care issues and gain a fuller understanding of the issues that are of concern to the public.

Outcome: A GP Practice survey has been conducted based issues raised at this meeting by the public. The report was published in the 2015/2016 year and included a number of recommendations. The report is available on line.

Teenage Mental Health Report

This meeting was set up as a result of concerns raised about access to mental health services for young people.

The following recommendations were made:



- Targeted work in schools and training for teachers addressing the need for prevention and early intervention.
- Positive approaches to mental health in schools and peer led programmes.
- A named adult available for confidential support during, or after, school hours.
- Mindfulness and positive ways of thinking could be taught alongside PHSE.
- Develop a coordinated approach and a service with clear pathways, key workers and effective communication channels so that everyone involved in prevention, intervention and care are working effectively together.

- Ensure adequate funding for young people's mental health services.
- Decrease the unacceptably long waiting times and increasingly strict referral criteria.

Outcome: The outcome of this report is an increase in public awareness of the issues relating to Young People's Mental Health, and an understanding of the frustration that parents feel with the system, an understanding of the restraints that underfunding of the services has on service provision.

The report has been provided to Healthwatch England and is included in their current work on mental health services. The report led us to set up a Young People's positive mental health conference to gain an insight in young people's views on mental health support.

There have been no identified outcomes from providers and commissioners to these recommendations.

Community Transport Report

The purpose of the public meeting was to understand the issues of transport to medical appointments from the patient and provider's perspective, to consider what more might be done to help and to identify what if anything Healthwatch can do.

The following recommendations were made:

- Provide patients with an indication of the time the appointment / treatment is likely to take would help the public when booking or making arrangements for transport to hospitals.

- Inform patients that they may be eligible to claim transport costs back.
- Hospital appointment makers should consider the distance people have to travel to an appointment as people will cancel appointments if they are unable to get there.



- Providing information leaflets on community transport schemes with appointment letters would ensure all patients are aware they are available.
- Information and posters about local Community Transport schemes and reclaiming transport costs displayed in GP surgeries would be of benefit for patients.

Outcomes: North Somerset Council, Weston General Hospital and the Bristol Hospitals have a greater awareness of the issues facing North Somerset patient's

access to transport to medical appointments and this has fed into service provision.

Some of the reports and outcomes of work done in 2014/2015 will be achieved in 2015/2016

These include:

- Report of the North Somerset GP Practice Survey
- Report of the Special Report on Stroke Discharge
- Report on access to dental services
- Report on Young People's mental health wellbeing conference

All Healthwatch North Somerset reports and recommendations are made available to Healthwatch England, local commissioners and providers and the public.



Making a difference

We have developed strong relationships with health and social care providers in North Somerset and with cross county providers and the channels of communication are good.

We work with and have developed a number of key statutory relationships and attend regular meetings to share information, to develop working relationships and keep abreast of changes occurring.

The key relationships and meetings are listed below and are attended by Healthwatch staff, directors or volunteers:

North Somerset Clinical Commissioning Group

- Reprourement of Community Services
- Update and information sharing meetings
- Community engagement meetings
- Procurement Board meetings
- Quality and Effectiveness sub group
- Outcomes group
- PQQ
- AGM
- Your North Somerset event
- Stakeholder event

North Somerset Community Partnership

- Leg Club meeting
- Patient Led Assessments
- Community Forum
- Update and information sharing meetings
- Response to Quality Account
- PLACE volunteer
- Specialist services meeting
- Stakeholder event

North Somerset Council

- Dementia Project Management Board
- Health Overview and Scrutiny Panel
- People and Communities Board
- Joint Strategic Needs Assessment
- Learning Disabilities Partnership Board
- Older Peoples Champion Group
- Social Inclusion Meetings
- Care Act Advisory Group
- Personal Budgets
- Update and information sharing meetings
- SCL
- North Somerset Integrated Care JMT
- Mental Health and Wellbeing Strategy Partnership Group
- Learning Disability Programme Group
- Children's Programme Group
- Social isolation
- Early Intervention and prevention
- Personalisation
- Older Peoples transformation group
- Children's services stakeholders meeting
- Children and Young People
- Your North Somerset event

Weston Area Health Trust

- PERG
- Trust Board meetings
- Response to Quality Accounts
- Home from Hospital team

NHS England SW

- Quality Surveillance Group - local and regional
- Update and information sharing meetings
- Diamond Cluster
- Regional meetings
- Ophthalmic multi-disciplinary meeting
- Muscular/skeletal disease multi-disciplinary meeting

Care Quality Commission

- GP inspections
- Weston Area Health Trust inspections
- Care Home inspections
- Update and information sharing meetings
- Listening events

Care UK Southwest 111

- Update and information sharing meetings

Brisdoc

- Update and information sharing meeting

United Hospitals Bristol

- Patients Forum
- Update and information sharing meeting
- Feedback reports
- Response to Quality Accounts

North Bristol Trust

- Feedback reports
- Response to Quality Accounts

Avon and Wiltshire Mental Health Partnership

- Response to Quality Accounts
- Early Intervention in Psychosis team (AWP)
- Regional meetings

Healthwatch

- Regional and local meetings

- Update and information sharing meetings
- Parliamentary presentation

Other meetings

- Winter Action Network
- Mental Health Alliance SW
- CARBAG
- CSIG
- VCS Mental Health Network
- Clinical Policy Review Group (BNSSG)
- Stakeholder Engagement in Specialist Children's Community Services
- Autism Strategy Group
- North Somerset Stroke Network
- Improving Diversity in PPI (South West)
- Local and regional Quality and Surveillance groups
- SEAP Update and information sharing meetings
- CAMHS Update and information sharing meetings
- Weston College event planning meetings
- PPG Chairs
- Curo update and information sharing
- Better Care Fund
- North Somerset Care Forum Mental Health VCS network
- Equality scheme - equalities group
- Living later life conference
- BNSSG Eye health
- Recommissioning of children's services BNSSG
- BAD
- Blagdon VA
- Supportive Parents (Community Paediatrics)
- ALMC
- Nailsea practice
- Voluntary sector forum
- Clevedon Tithe Barn board
- SW senior citizens assembly

Direct influence can sometimes be difficult to measure, but Healthwatch North Somerset seeks to ensure that the voice of local people is heard at all the meetings that influence the provision of local health and social care.

The value of the relationship between Healthwatch North Somerset and the wider health economy means that the interests of North Somerset people can be regularly articulated in the most strategic of forums about the issues of greatest concern.

Quality Surveillance Group

The Quality Surveillance Group brings together the leaders of national statutory organisations across the health system, alongside expert and lay members, including Healthwatch North Somerset.

The group has an important function as part of a culture of open and honest cooperation, to identify potential or actual serious quality failures and concerns, to follow them up and take corrective action in the interests of protecting patients.

We are actively engaged in this group contributing to discussions by raising local concerns and issues as raised by the public and provides the critically important function of providing a voice for local people through the provision of monthly intelligence returns for the group.

Health and Wellbeing Board (North Somerset People and Communities Board)

Healthwatch North Somerset has a statutory seat on the Health and Wellbeing Board (known as the People and Communities Board in North Somerset). The Health and Social Care Act 2012 established Health and Wellbeing Boards

as a forum where key stakeholders in the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

Board members collaborate to understand their local community's needs, agree priorities and encourage commissioners to work in a more joined-up way.

The Healthwatch North Somerset Chair represents Healthwatch North Somerset on the Board which meets every other month and the Chair is updated on a regular and ongoing basis on the work and issues raised which enables effective representation of the feedback, views and experiences of the public.

Health Overview and Scrutiny Panel

North Somerset Health Overview and Scrutiny Panel scrutinises health matters relating to the NHS, wider health issues apart from NHS - health promotion, addressing health inequalities and the impact of local and national initiatives (drugs and alcohol, hospitals, mental health, primary care etc).

We participate in regular HOSP agenda planning sessions and briefing meetings.

Care Quality Commission (CQC)

Healthwatch North Somerset has provided the CQC with feedback intelligence prior to inspections through the year including: GP surgeries, Weston General Hospital, dentists. We have publicised listening events to our members and contacts to enable feedback about local services.

We have the ability to make recommendations to undertake special reviews to the CQC on issues that require further investigation -these can be made

directly to the CQC or via Healthwatch England.

This can occur if we are not satisfied with a provider or commissioner's final response to our enquiries about local health and social care issues. Healthwatch North Somerset did not make any recommendations for further investigation to the CQC in 2014 / 2015.

Putting local people at the heart of improving services - North Somerset Community Services Reprocurement

Healthwatch North Somerset has been actively engaged in the Reprocurement of Community Services processes.

Eleven volunteers were recruited for lay representation in marking bids and consensus meetings and the Chief Officer represents the public voice on the Board.

In addition to carrying out our own work, Healthwatch North Somerset supports the work of our strategic and voluntary partners and the wider involvement of health and social care for local people.

We regularly advertise and forward on relevant health and social care information to our members, and opportunities for people to get involved to our volunteers and wider contacts.

“North Somerset CCG has worked closely with Healthwatch North Somerset to ensure that patients, carers, service users and the public voice is ever present during the procurement process and will continue to help us as commissioners understand what matters most to our local people.

Healthwatch involvement has helped raise the profile of the CCG and the Local Authority as they have been working with us in partnership. Healthwatch lay members have enjoyed working alongside CCG colleagues to attend project meetings including the Board, design critical factor questions and participate in marking them and co-designing the next phase of involvement.”

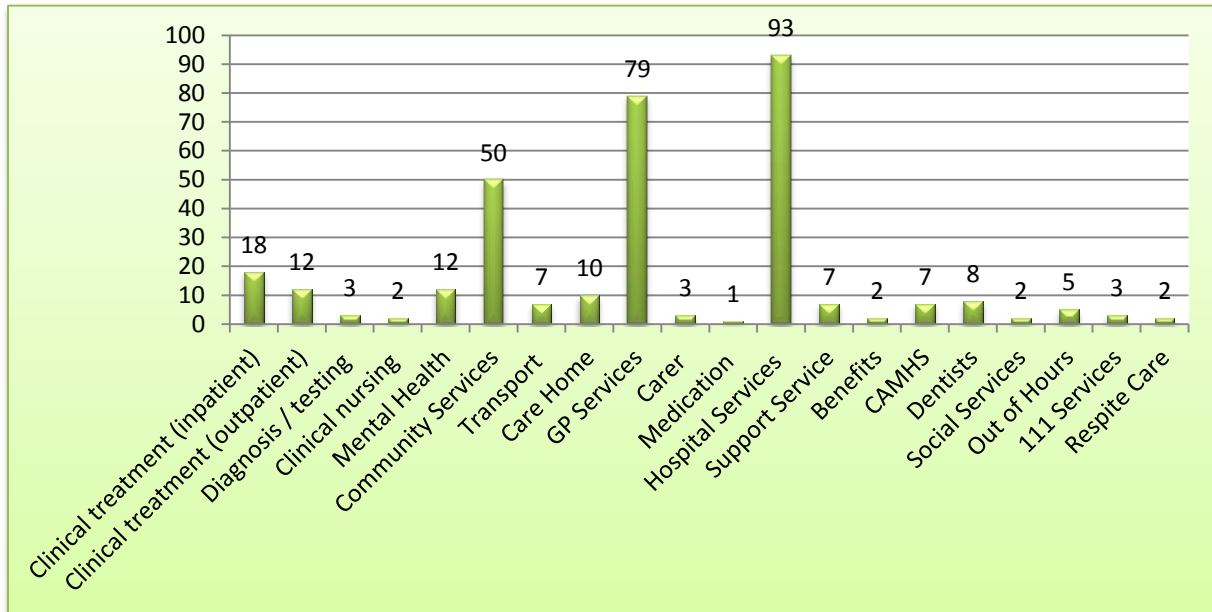
Julie Kell, Head of Joint Commissioning, North Somerset Clinical Commissioning Group



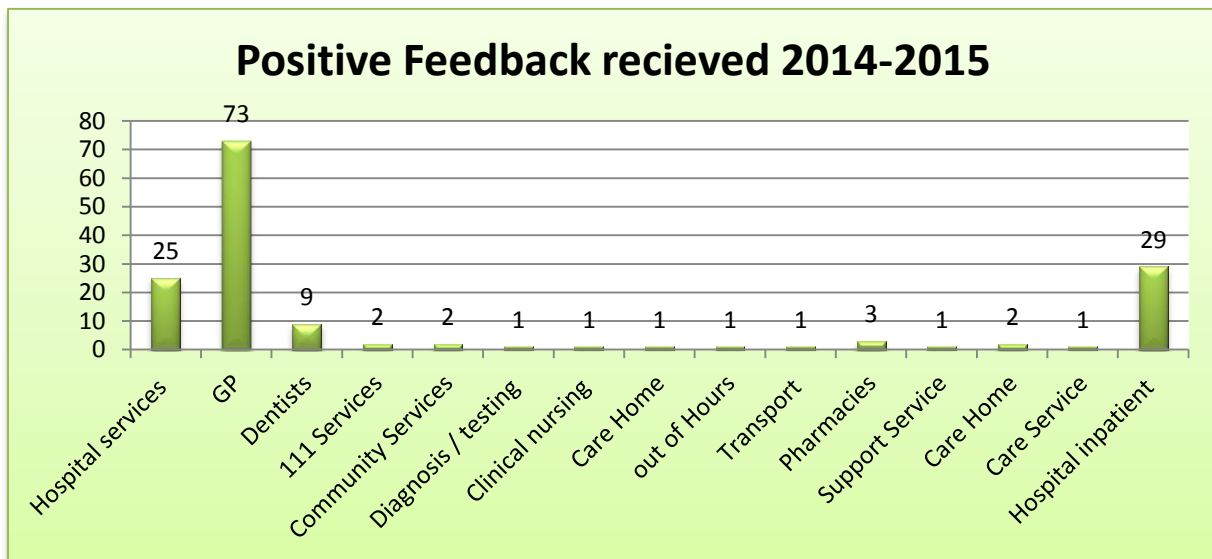


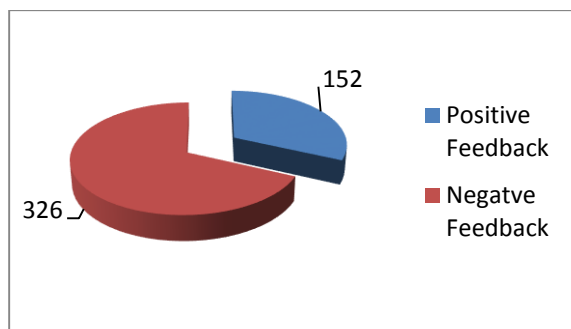
Intelligence

In 2014-2015 we recorded 450 pieces of intelligence from the public in North Somerset. The data has been categorised into the areas shown below.



We record both the positive and not so positive feedback we receive and this is shared with those who provide and commission local services.





The total adds up to more than 450 as a number of people have let us know about more than one issue eg perhaps they had difficulty parking but received good treatment.

In addition to this data we receive feedback from our public meetings which is included in our reports but not in this data.

We record and review all of the information we receive to see if there are concerns that may need to be looked into further, or if the information we have supports taking immediate action. We look for specific comments and themes and address these through follow up as they arise. A confidential record is kept of all comments requiring follow up action. We have developed a prioritisation process which we utilise to help decide which issues to take further. Where comments are received that require urgent action, escalation arrangements are in place to relevant stakeholders.

We record the:

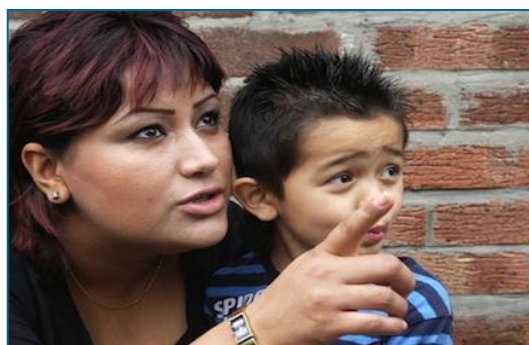
- Source of intelligence
- Type of intelligence
- Subject
- Topic
- Action
- Positive comments

- Summary of comments

Healthwatch North Somerset - making a real impact on local health and social care

Enter and View

Each local Healthwatch holds the power to Enter and View (announced or unannounced) any premises where publically funded health or social care services are being delivered and view the services. In the year 2014 / 2015 we did not use this formal power. We will however have a programme of Enter and View visits in the forthcoming year.



Requests for information

In the course of our work we may have reason to request information from NHS bodies and local authorities to gather data and evidence about local services. Sometimes we do this through the formal process of a Freedom of Information request (FOI) during 2014 -2015 we made one Freedom of Information request in relation to NHS dental services from NHS Choices.



Impact Stories

Case Study One

Individual case study

A member of public contacted Healthwatch North Somerset as there had been a breakdown in communication with the clinical staff with regards to a family member who was a hospital inpatient.

The member of public did not know how to deal with the issue, how to reopen the lines of communication or whether to or how to make a complaint.

We helped the member of public consider the options by providing signposting information for the Hospital complaints (PALS) or support and advocacy through SEAP who could help the member of public decide whether to proceed with a complaint.

The member of public made a complaint to the relevant organisation and the lines of communication were opened with the outcome that the member of public was able to liaise with the hospital over the family members care.



Case Study Two

Intelligence received

A number of concerns were raised to Healthwatch North Somerset regarding the Parkinson's service at Weston General Hospital which was lacking a full time consultant.

This had created long gaps between appointments; some people had to wait for over a year for their next one. We spoke with the Parkinson's Society who confirmed the number of sufferers in North Somerset and the lengths of times they had to wait for appointments.

Healthwatch North Somerset contacted Weston General Hospital and outlined the issues that had been raised with us and asked what the current situation was with regards to the services and whether there were any plans to ameliorate it.

Weston Area Health Trust confirmed that

there was a Parkinson's Consultant vacancy which created the backlog of appointments for patients. Over several months we reviewed the situation and requested updates from Weston Area Health Trust.

The outcome was that Weston Area Health Trust Clinical Team reviewed the service provision and agreed to recruit a doctor to increase the number of weekly clinics, along with the allocation of two care of elderly registrar doctors to support the service.

Furthermore the Clinical Team were considering a specialist Parkinson's nurse to ensure there is effective support to Parkinson patients in the hospital and working with community teams.



Case Study Three

Discharge Special Enquiry

Healthwatch North Somerset sought views of service users at a local drop in centre for the homeless and vulnerably housed on their experiences of discharge from hospital. This group of people are a group who in society are hidden, whose voice is seldom heard and who are often excluded from more formal methods of engagement. We engaged with this group through a local homelessness centre.

We found that had been several cases within the last six months where service users had been discharged from hospital without the hospital having checked that they had somewhere to go.

In one of these cases, the individual in question was street homeless and was discharged still very unwell, and was subsequently re admitted four times in the following two week period. This individual was also an intravenous drug user, and reported that when he was discharged, not only did he have nowhere to go and was not asked this question, but he could barely walk and did not feel that he was medically fit for discharge, and had no shelter.

Alcoholics discharging themselves are not unusual, and we found there is a subsequent lack of coordination with community services at point of discharge, or with voluntary sector organisations working in this area. Clients have complained about there being no 'after care' once they have left hospital, and no coordination or checking if they have any support in the community. The feedback

received was that it was felt that hospitals don't want addicts on the wards; therefore they are discharged as soon as possible.

Healthwatch North Somerset spoke with several of the homelessness centre service users who had recent experience of being discharged from the local hospital.

One man felt he was well enough to be discharged, and that on leaving the hospital, had fallen several times. He had nowhere to go and the question was not asked prior to discharge. He was then readmitted several more times within the same fortnight. He felt that he was not involved in any way in discharge planning and that the hospital "just wanted rid of him" because they were "not bothered" about drug users and alcoholics. Whilst not sure whether he advised hospital staff that he was homeless he was sure he did say that he had no one to help him but was not offered any support after discharge or signposted to any support organisation.

When asked what could be improved, one service user said that hospital staff need to be aware that not everyone has a place to go or family to support them and that discharge from hospital should not occur without making sure that patients are well enough to leave (even if they are a drug user) and that there will follow up and automatic coordination with community services. This was a view that all service users spoken to agreed.

The homelessness centre service users who contributed to the discussion had similar experiences to share, and all felt that they were treated differently to “normal” members of the public, either because they were homeless or because of their substance misuse (NB, not everyone we spoke to had a drug or alcohol problems). They also felt that the hospital considered that no follow up or support was required on discharge and that there was a lack of follow up, after care and coordination.

Healthwatch North Somerset found that:

- There was a lack of coordination between the Hospital discharge team and community based services.
- There was a lack of establishing that there was support in place for vulnerable people on discharge, including access to shelter.
- The service users were unable to articulate their vulnerability and it appears that they weren't all asked about their personal situations.
- There was a lack of clarity on discharge and by the service users about any follow up care and/or treatment required.
- This is a hard to reach and hard to manage group of vulnerable people, some of whom are clearly slipping through the net

Outcomes: The report was submitted to Healthwatch England who incorporated the findings into a wider report on discharge in England which has been submitted to the Department of Health.

The report was referred to North Somerset Council and was discussed at

the Adult Services and Housing Policy and Scrutiny Panel (ASSH). The Panel requested that officers look into the findings and provide a report to the Panel. Following the ASSH Panel meeting discussions have taken place between representatives from Weston General Hospital, CCG, North Somerset Community Partnership, Adult Social Care, Housing, Supporting People, The Home from Hospital Service and Red Cross.

These discussions highlighted services currently available for homeless people and areas for further development. The following outcomes have been identified: Training provided for hospital Pathway Facilitators, ward sisters and the Emergency Department matron on the services available for homeless people and how to access these services including through the Home from Hospital and Red Cross.

Home for Hospital staff will provide induction training for all new staff. Improved links will be developed between the statutory homelessness, Home from Hospital, Red Cross and community based services.

The Community Outreach Practitioner Service will be linked in with new and existing services being commissioned for rough sleepers.

Senior Nurses who provide mentoring will promote the Home from Hospital service.

A guide for rough sleepers is being developed and will be distributed.





Our plans for 2015/2016

Opportunities and challenges for the future

It has been a successful and productive year for Healthwatch North Somerset, we continue to build and strengthen our systems and processes to allow intelligent capture of information to influence current activity and future planning.

Through 2015 / 2016 we will continue to:

- Deliver consistent and systematic engagement with all sections of the local population
- Seek the public views about current health and social care services
- Recruit volunteers who reflect the local community
- Seek to develop organisation that is easy to contact
- Ensure we are a welcoming, inclusive and listening organisation
- Provide easy accessible Information
- Continue to make a positive contribution to local strategic planning and service commissioning
- Present local views based on credible evidence, presented in an accessible, relevant way
- Provide constructive challenge on behalf of local people when required
- Develop informed, robust relationships based on mutual respect and an appreciation of the

different roles each organisation plays

- Provide judicious use of enter and view powers by collaborative working with other inspection regimes
- Collect, analyse and share information
- Gather individuals stories and experiences
- Seek where hard to reach groups are located



Communications

We continually review the effectiveness of how we communicate with the public, assessing the effectiveness of campaigns and communication tools. We seek to increase the level of communications activity to commissioners and partners and brand awareness which will help develop a stronger awareness and understanding of the role and functions of Healthwatch North Somerset within North Somerset.



Workplan 2015/16

Our broad intentions in 2015 / 2016 are to consolidate and deepen our locality and voluntary sector stakeholder relationships.

We seek to extend our influencing role and to attain higher visibility with the public, the voluntary sector and the statutory providers and commissioners and thereby increase our influencing impact.

The key areas identified for the year are:

- Older peoples services including Community Connect
- Care Act
- Personal Budgets
- Social Care and Day Care
- Health Inequalities
- Weston Hospital
- Clevedon Hospital
- Bristol Hospitals
- Reprourement of Community Services
- Reprourement of Children's and Young People's Services
- Better Care Fund
- Hospital Discharge



Community Engagement



Healthwatch North Somerset is currently reviewing the effectiveness of all its engagement activity. Whilst continuing with successful methods, we will seek out new and innovative approaches of engagement and involvement, with ongoing focus on seldom heard groups including young people and working age adults, using local specialist organisations.

We have a target to grow the membership by 40% during the year, encouraging greater involvement of volunteers through our volunteer coordinator. We are also actively seeking to develop key links and outreach posts where people can feedback from the rural areas of North Somerset.

Influence

Healthwatch North Somerset has continued to build on its intelligent use of information and patient experience in strategic planning and commissioning and is involved in a number of local, regional and national strategic groups within partner organisations.



Our governance and decision-making

The Healthwatch North Somerset Board of Directors sets the strategic direction for the organisation and ensures that its priorities are driven by local priorities. The Board of Directors are recruited from the local community and represent a diverse range of expertise and skills.

Healthwatch North Somerset became a Registered Charity (no: 1158487) and Company Limited by Guarantee (no: 8187141) on 8th September 2014 after the members voted at a special meeting held in January 2014 to transfer the governing arrangements from a Community Interest Company.

Healthwatch North Somerset has robust governance, policies and management structures to fulfil its responsibilities to:

1. Local service users and resident individuals in North Somerset
2. North Somerset Council in terms of value for money
3. Healthwatch England in terms of quality standards
4. The governing organisation for the chosen corporate vehicle: Charity Commission, Companies House and all UK legislation relevant to the organisations activities
5. The Nolan principles of standards in public life, the public sector equality duty under the Equality Act 2010 and the Freedom of Information Act
6. Safeguarding vulnerable adults and children

Healthwatch North Somerset is not an NHS or local authority organisation and no one involved in the governance of Healthwatch North Somerset is an officer, paid or elected, of an NHS organisation or a local authority.



The Healthwatch North Somerset Board of Directors hold regular meetings in public in varying accessible locations across North Somerset.

The meetings offer members and local people the opportunity to view the functioning of the organisation and to ask questions on local health and social care matters.

All minutes of public meetings are made available to the public on the Healthwatch North Somerset website and are available in alternative formats on request.

Healthwatch North Somerset is a membership organisation and has made provision for decisions on behalf of the organisation including lay people (members). These decision making processes are included in the Healthwatch



North Somerset governing documents (Articles of Association) which include details about how Healthwatch North Somerset undertakes its activities.

Healthwatch North Somerset Members are either individuals living or working in North Somerset; or a community or voluntary organisation with a base in North Somerset or a national or regional organisation with a focus in North Somerset; or a private sector organisation or business with a base in North Somerset, or a national or regional organisation with a focus in North Somerset.

Healthwatch North Somerset works in a transparent way and is inclusive; it seeks to reflect the diversity of North Somerset. There is an explicit requirement in the Health and Social Care Act 2012 that Healthwatch North Somerset membership must be representative of local people and service users - including carers and hard to reach groups.

The views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared, such as the Joint Strategic Needs Assessment (JSNA).

Healthwatch North Somerset processes to ensure local accountability:

- an annual general meeting, which is open and accessible to local stakeholders
- a published annual report
- accounts available for public inspection
- organisational governance structures
- public Board meetings

Healthwatch North Somerset:

- Reflects both local community and existing stakeholder organisations in health and social care including the CQC and Healthwatch England.
- Has local intelligence gathering systems which make the diversity of views and experiences of people known to stakeholders.
- Works as an effective partner to enhance commissioners' ability to commission and co-produce new services, where appropriate and monitor performance and quality.
- Works with partners in a way which encourages all parties to welcome informed challenge from the patient and service user perspective.
- Understands its role in relation to their local People and Communities Board and the Local Authority Overview and Scrutiny systems.
- Works within national and local safeguarding structures and procedures.
- Makes every effort is made to ensure that Healthwatch North Somerset information is accessible and available in accessible and alternative formats as required.

Healthwatch North Somerset has a robust Board of Director and staffing structure and in 2014 / 2015 this consisted of an experienced Chair and fully functioning Board of Directors , a full time Chief Officer and Community Engagement Officer (SCL); part time Community Engagement worker, administrator, Volunteer Coordinator, Information and Communications officer. All staff have key responsibilities but also wider engagement involvement.



Recruitment and Involvement of Members

Healthwatch North Somerset is a Membership organisation; its members have a key role in the governance of the organisation as stipulated in the Articles of Association. There is a process of active recruitment of members as a key community engagement activity. At the end of 2014 / 2015 Healthwatch North Somerset had 221 members.



Local People Influencing

Healthwatch North Somerset Key Projects have been formally agreed for 2015 / 2016, members were asked to provide



feedback about the work they would like us to focus on in 2015 / 2016.

Safeguarding

Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It is fundamental to creating high-quality health and social care.

(ref: CQC

[www.cqc.org.uk/content /safeguarding-people](http://www.cqc.org.uk/content/safeguarding-people)).

We have a Safeguarding policy and the team have all attended North Somerset Council Adult Safeguarding Training.

Plans are being put in place to ensure that all existing and new volunteers attend Safeguarding training. Healthwatch North Somerset has a place on the Adult Safeguarding Board. During 2014/2015 we referred seven contacts to the adult safeguarding team.





Financial information

Each local Healthwatch is funded by their local council using money allocated for this purpose by central government. Healthwatch North Somerset is contracted by North Somerset Council to provide the local Healthwatch service.

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		157,000
Additional income *		41,500
Total income		198,500
EXPENDITURE		
Staffing		91,120
Training & HR		2,420
Travel & volunteer expenses		4,620
Premises		12,125
Marketing & PR		21,550
Room Hire & Meetings		2,430
Office costs		9,605
Accounts & Governance		2,348
Website development & maintenance		11,325
Legal & Professional		1,942
Senior Community Link - support costs		34,325
Total expenditure		193,810
Balance brought forward (including underspend from 2013 /2014)		94,876



Healthwatch North Somerset is contracted by North Somerset Council to provide the local Healthwatch service. The contract value for Healthwatch North Somerset in 2014 / 2015 was £157,000 as against £187,000 in the previous year (-16%). The Council also contracted with Healthwatch North Somerset to support the five Senior Community Links groups at an additional cost of £40,000.

North Somerset Council agreed that £45,000 of the 2013 / 2014 surplus should be allocated to Reserves and £36,000 to specified projects to be undertaken in 2015.

*Additional income SCL Contract, Quartet Project Funding and bank interest



Contact us

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Twitter: @HealthwatchNS

Charity no: 1158487 / Company no: 08187141

If you require this report in an alternative format please contact us at the address above.

We will be making this annual report publicly available by 30th June 2015 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, North Somerset Clinical Commissioning Group, North Somerset Overview and Scrutiny Committees, and North Somerset Council.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.