

Healthwatch Shropshire Forward Work Programme 2018-19

1 Introduction

The new contract for Healthwatch Shropshire began on 1st April 2018. This contract includes both Local Healthwatch services for Shropshire and those of the Independent Health Complaints Advocacy Service. Consequently, this forward plan is inclusive of both services.

Local Healthwatch were established under the Health and Social Care Act 2012 requiring them to undertake a range of statutory activities:

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;
5. providing 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.

Healthwatch Shropshire (HWS) was established in April 2013 as one of a network of Local Healthwatch organisations across England. It is a registered charity and company limited by guarantee.

Healthwatch Shropshire has used the statutory obligations and HWE guidance to inform its own vision statement:

Through Healthwatch Shropshire the people of Shropshire know that they have a powerful voice and can make a difference.

Building on this vision statement it was agreed that the following best encapsulated HWS's purpose.

To be the recognised independent voice of the people of Shropshire in seeking to improve their experience of Health and Social Care services.

The strap line to accompany and reinforce this statement is:

Your voice counts

The statutory requirements, additional guidance from Healthwatch England and the local context together have informed the forward work programme for HWS.

If people are not satisfied with the service they have experienced from a hospital, doctor, dentist, local surgery or other NHS provider, they are entitled to complain about it. Healthwatch Shropshire provides The Independent Health Complaints Advocacy Service in Shropshire which can:

- Provide enough information and advice so people can pursue a complaint themselves
- Offer the support of an Independent Health Complaints Advocate who can help them to make their complaint and support them through the process
- Listen to the concerns and help to collect together all the relevant issues and facts needed to highlight the concerns
- Write letters to the right people
- Monitor the progress of the complaint with the organisation responsible and keep them updated
- Signpost to the right organisation if Healthwatch Shropshire is not the right organisation

Healthwatch Shropshire's IHCA service cannot make or process a complaint for someone (they have to do it themselves - it is their complaint) and cannot provide support for someone to make a complaint about a social care service.

2 Work plan 2018-19

The forward work programme for 2018-19 outlined below has been informed by the intelligence received, the health and social care context in Shropshire and local insight by colleagues and stakeholders.

The Forward Work Programme has also taken into account the resources available both financial and in terms of capacity. The decision had been made to reduce the working week to 4 days per week from April 1st 2018 to reflect the reduced income

levels in the new contract. At the beginning of the year HWS had 9 Board members, a staff team of 6 (4 whole time equivalents), an IHCAS Advocate and 15 active volunteers.

The major challenges in looking forward are to ensure there is capacity available and to build in flexibility so that HWS has the ability to respond in a timely and appropriate manner to feedback as it is received and to local circumstances as they develop during the year.

This next section outlines the priorities as currently identified for the year ahead and specific activities to be undertaken, together with the resources available to HWS.

2.1 Priorities

2.1.1 Key priorities

Healthwatch Shropshire has used its intelligence, local knowledge of the health and social care system, worked with its stakeholder group and the Shropshire patients group to identify key themes and with its volunteers, staff team and board members separately undertook a prioritisation exercise using a modified nominal group technique. The Health and Wellbeing board members were also invited to contribute. Bringing everything together key priorities for 2018-19 have been identified as:

Young People's Emotional Health and Wellbeing Service

- To engage with the Child and Adolescent Mental Health Service in Shropshire
- To understand better the experiences of young people using (or not using) these services
- To work with local schools
- Project lead: Community Engagement Officer
- Time frame: September to March

Build on initial work on Social care, particularly domiciliary care, discharge and complaints

- To develop a methodology for gathering feedback on domiciliary care
- To encourage greater feedback on social care services
- Project Lead: Enter & View Officer
- Timeframe: thorough out year

'Communication' including health literacy, awareness/understanding of services covering both social care and health.

- Developing the communication and information services by HWS
- Working with the local health economy to ensure that communications are readily understood
- Project Lead: Information Officer
- Timeframe: thorough out year

Involvement in local transformation programmes and consultations

- Continue to fully engage with the NHS Future Fit programme consultation
- Participate in the Local Maternity System and chair the Maternity Voices Partnership
- Participate fully in other transformation programmes at all levels
- Project Lead: Chief Officer
- Timeframe: thorough out year

Engage with the local initiatives on prevention including social prescribing.

HWS has been asked to undertake an engagement project to provide:

“assurance that the development of Healthy Lives is informed by the health and wellbeing needs articulated by the Shropshire public and service users, particularly where these needs are not currently met or where they place significant demands on health and care services”

- Develop an approach to the engagement, particularly involving “the quieter voices”
- Project Lead: Chief Officer
- Timeframe: September to March

2.1.2 Other priorities

Progress on Priorities for 2017-18

During 2017-18 there was a challenge to HWS’s capacity as considerable activity was focussed on the recommissioning process and then, following award of the new contract, the implementation of the new contract.

Priorities for 2017-18 were identified as:

- Exploring people’s understanding of how to raise concerns and complaints (and share compliments)
Keele Final Year Medical students undertook a project on this; the report is published on the web site. Information continues to be gathered and is continually fed back to providers.
- Explore the application of the NHS Accessible Information Standards across the county
This piece of work was undertaken through Enter & View at GP practices. Individual reports have been published and an overarching report will be published in 2018-19
- Support the local population to better understand how the local health and care system works
This work will continue as part of the health literacy programme.

- Continue to develop and implement the approach for understanding quality of care delivered in people's homes
This will continue into 2018-19 as there was a lack of feedback received during 2017-18. Gathering the feedback on domiciliary care is dependent on the co-operation of partners
- Expand the discharge project to other providers
This has not been undertaken but feedback is collected and shared with providers.
- Contribute to delivering the Carers' Voice project locally
HWS holds the budget for the continuing activity and is involved in the partner meetings
- Working with partners on the implementation of Dementia strategy and delivering on DAA commitments
HWS has proactively followed up progress on implementation by the Shropshire CCG and will be covered by the Care Closer to Home programme across Shropshire.
- Continue to engage in the local transformation work programmes including the Sustainability and Transformation Plan.
This work continues. HWS provides insight from the people's perspective and challenges when necessary, also providing support to the communications and engagement plans
- Chairing the Maternity Voices workstream as part of the work on the Local Maternity System
This transformation programme continues and HWS chairs the Maternity Voices Partnership hub.

Intelligence

During this coming year HWS will continue to have "Hot Topics", to encourage feedback from people using services - increasing numbers of comments received by HWS will add validity and credibility to the hot spots and trends identified from the intelligence received.

HWS also supports the Healthwatch England campaigns such as #itstartswithyou.

Intelligence gained through Hot Topics is shared with the commissioner and provider and a report will be published.

Research Grant Fund

Further opportunity for these "seldom heard" voices to be heard was through the research grant programme. The final projects reports are anticipated during the first part of the year and will be published on the web site.

Additional priorities

Additional priorities for the year which have been identified include:

- Publish the over-arching report on the Enter & View visits to GP practices with a focus on the NHS Accessible Information Standard
- Follow up on the priorities identified for 2018-19 in the local NHS provider quality accounts

Other priorities will emerge during the year, being informed by intelligence received during the year and awareness of the changing context in and pressures on health and social care services in Shropshire.

The table below summarises how the activity will be delivered, the outcomes and outputs, the risks associated with it and the statutory activities being addressed.

Statutory Activities:	All
Outcomes:	Opportunities to improve health and social care for the people of Shropshire
Outputs:	Reports and recommendations
What it requires to run:	Officer time, volunteer contributions
Risks:	Lack of internal capacity Lack of engagement by the public to provide valid information Failure to meet timeframe

2.2 Regular activities

The statutory obligations and guidance for local Healthwatch have been distilled into a number of areas for the work plan to reflect the way that HWS operates on a day to day basis:

1. Profile Raising and access to HWS
2. Information services
3. Community Engagement
4. Enter & View
5. Volunteering
6. Partnerships and networking
7. IHCAS
8. Governance
9. Research Grants

2.2.1 Profile Raising and access to HWS:

HWS has worked hard to raise its profile with the people of Shropshire and has started 2018-19 with over 1900 followers on Twitter. HWS has a membership scheme for both organisations and individuals who are interested in its work: the

Associate Members are important as they provide a resource for HWS in terms of user experience and many are willing to be involved in consultations, meetings and questionnaire surveys. Total Associate Membership at the beginning of April 2018 was 275.

In 2018-19 HWS will

- Continue to raise awareness of HWS as a continuing priority and utilise a wide range of approaches
- Continue to recruit Associate Members and Twitter followers

HWS works to ensure that people are able to get in touch in a way that meets their needs: letter, telephone, website, email, Twitter, Facebook, face to face engagement (see below) and continues to explore new ways. HWS continues to develop its web site and to use the local media to highlight current issues and to raise its profile. In 2018-19 HWS will:

- Continue development of the web site to ensure it is easy to use and has the appropriate information and links to support the people of Shropshire
- Further develop Twitter and other social media to increase access and engagement
- Refresh HWS literature
- Work in partnership with local organisations to increase profile
- Issue regular press releases to encourage increased profile in the local media and develop relationships with local journalists/presenters
- Deliver the Hot Topics with appropriate engagement and communication, including with the relevant partners
- Hold quarterly marketing meetings

Statutory Activities	S1,2,3,5
Outcomes	Raised profile encourages submission of comments, attendance at events, volunteer recruitment, membership etc and ultimately informs the forward work programme
Outputs:	Increased access to the web site, number of twitter followers, number of members and volunteers, number of comments received, numbers attending events
What it requires to run:	Staff, volunteer and board time Supporting literature, active social media and up to date web site
Risks:	Staff capacity to support Costs of materials become excessive

2.2.2 Information services:

Feedback from the people of Shropshire, and others using Shropshire health and care services, is collected using a variety of methods. People need to be actively

encouraged to share their feedback to ensure that the volume of feedback continues to steadily increase despite the working week being reduced to 4 days per week. Feedback received can be both positive and negative and is analysed and presented to the Intelligence Committee (a committee of the Board) at its quarterly meetings. The Committee determines the actions to be taken by analysing trends and hot spots in the data.

Intelligence received will continue to be shared as widely as possible with the commissioners of services as well as the providers; information sharing agreements are in place. HWS will continue to triangulate its information with other data to ensure that “people don’t fall through the gap”. “You Said We Did” reports illustrate how HWS uses its intelligence to achieve change and demonstrate the impact of its work. The continued work on profile raising is crucial as the more feedback received the greater is the likelihood that the analysis is representative of the wider population.

An updated, accessible and informative web site is essential to support all HWS activities.

In 2018-19 HWS will:

- Continue to collect collate and analyse feedback to determine the actions required to influence change
- Share intelligence appropriately to inform the development of the refreshed Joint Strategic Needs Assessment
- Further develop the relationship with Scrutiny; the chair of the Health and Adult care Scrutiny Committee for Shropshire attends the Intelligence Committee
- To continue to work with HWE to ensure that the CRM (Customer Relationship Management) works effectively for us
- Continue to develop the Data Protection Officer (DPO) role for Healthwatch Sandwell and work with the DPO for HWS under the new General Data protection regulations
- Continue to actively participate in the Shropshire Together Communication and Engagement Group
- Change to the new HWE supported web site, to reduce vulnerability, if the budget permits.

Signposting and information services are a vital aspect of HWS activities and link closely with “Tell Us”, which is now Freepost to encourage people to feedback.

- Further development and awareness raising of the signposting and information services

HWS is not a complaints service but provides Independent Health Complaints Advocacy Services (see section 6 below) so not only is HWS able to support people, who contact HWS, with information but also works with individuals to support them in making their complaint. The feedback on services featured in the

complaint also contributes to the overall picture of services across Shropshire, and for Shropshire residents when provided externally.

- Work with partners to facilitate complaints services in Shropshire
- In partnership will build up an overall picture of the quality of care provided across Shropshire

Statutory activities	S3, 4, 5, 6, 7, 8
Outcomes:	Identifies good practices and areas for improvement in health and care services in Shropshire Public in receipt of information to support their health and social care choices Confidence in data handling
Outputs:	Collates and analyses information received Signposting and information services Database of organisations for signposting is up to date Supports Intelligence Committee and feeds into the Enter & View Committee Liaison with complaints services, PALs and advocacy services Provision of Information Governance Reports
What it requires to run:	Information Officer with contributions from other staff, volunteers and Board Members
Risks:	Dependent on one officer for analysis but data entry is shared Capacity

2.2.3 Community Engagement

HWS works hard to ensure that local people's needs and experiences of health and social care services are heard, including those from people whose voices are seldom heard. HWS is proactive and reaches out to people rather than waiting for them to come to us. HWS has a Community Engagement strategy to support its approach.

In 2018-19 HWS will continue to work to ensure that its engagement is as far reaching as possible, including reaching disadvantaged or vulnerable people and people who are seldom heard from across the whole county.

In 2018-19 Community Engagement will include:

- Attending local groups, fora and community events, for example, carers' groups, housing groups, senior citizens' groups. These take place continually and HWS goes out to where people are already meeting to maximise attendance

- Healthwatch Shropshire events - planned regular engagement across the county prior to HWS board meetings and in venues such as hospitals, markets etc
- HWS Annual event in November 2018
- Networking - participating in local networks to share and gather experiences including Shropshire Together Communication and Engagement Group, the Voluntary and Community Sector Assembly, the Voluntary Sector Health and Social Care Forum, the Voluntary Sector Mental Health Forum, Shropshire Older People’s Assembly, Shropshire Patients’ Group
- Meeting with Health and Social care professionals, specialist workers, multi-disciplinary teams etc as appropriate
- Engagement using key themes such as Consumer Rights Day, Volunteer Week, Mental Health Week etc where there is a direct link to HWS core activities
- Engagement to respond to HWS Hot Topics, HWE initiatives and changes in the local or national context, such as the current project with the homeless charity the Ark
- Pro-active engagement to inform HWS’s contribution to Local Authority scrutiny committees and Care Quality Commission enquiries.
- Supporting and challenging the communications and engagement of local programmes and consultation
- Promoting the IHCA Service.

Statutory activities:	S1, 3, 4, 6,
Outcomes:	Raised profile and increased comments, signposting requests, new members and volunteers
Outputs:	A variety of events across the county either as HWS or in partnership
What it requires to run:	Community Engagement Officer, Chief Officer and volunteer support as well as other officers.
Risks:	Dependency on one officer Enough volunteers wishing to do it People choose not to engage with HWS

2.2.4 Enter & View

HWS has the power to “Enter & View”, which means that it is able to see and hear for itself how services are provided by visiting organisations that provide health and social care services in Shropshire and talking to the patients, residents, service users and their family members and carers. Reports of the visits are published on the HWS web site.

The Enter & View (E&V) Committee has agreed its approach to Enter & View and meets regularly to review progress, tackle issues and receive intelligence to inform a forward visit programme. Regular meetings are held with the Authorised Representatives to ensure that they are fully supported. To date the visit reports have been well received by HWE, the Care Quality Commission as well as the local health economy.

In 2018-19 Enter & View will involve:

- Responsive visits, to respond to intelligence received by HWS or from external sources, which may be announced, semi announced or unannounced
- Visits as part of planned programmes of work to contribute to an HWS project, such as the recent visits to GP practices focussing on the NHS Accessible Information standard
- Review and follow up of published reports
- Delivery of a training programme for Authorised Representatives
- Support and mentoring of Authorised Representatives
- Review of policies and procedures relating to E&V to ensure they respond to change
- Continue to progress the style of reports to ensure that they are as accessible as possible

Statutory activities:	S2, 4
Outcomes:	Improvements in health and social care by sharing good practice and highlighting poor care and providing the information to key stakeholders
Outputs:	Enter & View visit programme Published reports Enter & View Committee meetings
What it requires to run:	Enter &View Officer, Volunteer Officer, Board Members and volunteers (Authorised Representatives) Chief Officer
Risks:	Largely dependent on one officer Enough Authorised Representatives

2.2.5 Volunteering

Volunteers are important to HWS as it has a small team to cover a wide range of activities across the county.

HWS has established an active volunteer base and will continue to identify volunteering opportunities and match them to the skills of the volunteers. Volunteer contributions are really appreciated in terms of supporting the community engagement programme, profile raising and specific project work. HWS will actively recruit new volunteers during the year to ensure it has enough to support delivery of its statutory activities.

In 2018-19 will continue to:

- Provide an ongoing training programme for existing volunteers
- Provide regular volunteer meetings to give support and ensure that all volunteers are up to date with key issues for Shropshire
- Provide a monthly newsletter with HWS information
- Ensure that individual volunteers are fully supported
- Expand the volunteer base to reflect the diversity of the Shropshire population
- Undertake a robust recruitment and induction programme for new volunteers

Enter & View volunteers are called Authorised Representatives and after initial induction are required to undertake specialist training before they carry out visits. At the beginning of 2018 HWS had 10 Authorised representatives and 15 volunteers in total.

Statutory activities:	S1, 2, 3
Outcomes:	Awareness of HWS Improvements in health and social care services Additional capacity at HWS
Outputs:	Increased number of volunteers who will <ul style="list-style-type: none"> • support the Enter & View visit programme • support engagement opportunities • provide specialised knowledge and skills • etc
What it requires to run:	Volunteer Officer and Enter & View Officer, Board Members and volunteers and Authorised Representatives
Risks:	Potential volunteers are not attracted to the volunteering opportunities Volunteers are not fully utilised

2.2.6 Partnerships and networking / relationship building and influencing

HWS has worked hard to develop strong relationships with commissioners and providers of health and care services including the voluntary and community sectors in Shropshire.

In 2018-19 HWS will

- Continue to fulfil its statutory obligations and attend and participate in the Health Wellbeing Board meetings
- Attend board meetings and other relevant meetings of local commissioners and providers of NHS and social care services
- Attend the Health Overview and Scrutiny Committee of Shropshire Council and other scrutiny committees as appropriate
- Continue to work to develop the relationships between the scrutiny, HWBB and HWS

- Attend special interest groups, external working groups and committees across Shropshire, prioritising participation depending on capacity
- Continue to participate and challenge in the NHS Future Fit and other transformation programmes and service redesign
- Attend local Healthwatch regional meetings and HWE meetings
- Attend CQC, NHS England and other partners' meetings when relevant
- Respond to requests for feedback to inform CQC inspections by sharing patient experiences from HWS intelligence and proactively gathering patient stories where possible in advance of inspections
- Respond to requests for feedback by commissioners and providers including the safeguarding teams.

As the staff capacity is limited HWS will work with board members and volunteers to maximise its participation and engagement.

People cross borders to access services and HWS will continue to liaise closely with neighbouring Healthwatch and in Wales with the Community Health Councils.

- Relationships will be developed further to ensure that people's voices and experiences can be effectively heard and escalated where appropriate.
- A stakeholder survey / reflective audit will be undertaken towards the end of the year to identify where change may be needed

Statutory activities:	S4, 6,
Outcomes:	Opportunities to influence design and delivery of health and care services in Shropshire
Outputs:	Gather public input and the lay perspective at a wide variety of initiatives and meetings; share the intelligence as appropriate
What it requires to run:	Chief Officer, Chair, Board members and officers Supported volunteers for some meetings
Risks:	Workload Poor quality input (due to high work load) Lack of response from commissioners and providers to issues raised

2.2.7 Independent Health Complaints Advocacy Service (IHCAS)

The priority of this service is to empower members of the public to make a formal NHS complaint about care and treatment either they or a relative / friend have received. We will continue to do this by making people aware of the step-by-step guide to 'Making a NHS Complaint' including guidance on what to include in their formal letter of complaint. The guide is either sent out by post, via email or available on our website. Those people who request the support of an Advocate to put their complaint in writing, attend a local resolution meeting to discuss their complaint or apply to the Parliamentary and Health Service Ombudsman will continue to be offered a home visit or to meet the IHCAS Coordinator and

Advocate in the office to discuss their needs and the role of IHCAS. To date people have been allocated an Advocate as requested. However if demand grows and capacity becomes an issue we will need to consider introducing a waiting list.

The IHCAS Coordinator and Advocate have met with the Complaints Managers for all local Trusts and built working relationships with member of the complaints teams. They will continue to monitor how well NHS providers follow their own complaints policy and the NHS complaints procedure.

All callers to IHCAS will continue to be asked if they wish to share their experience as a comment with HWS so that this information can be included in the intelligence gathered about services.

Outcomes:	Improved NHS service provision for Shropshire residents as a result of changes made by the provider Enhanced relationships with the NHS providers and commissioners Closure for the complainant
Outputs:	Closed cases Quarterly reports for the Commissioner and Board
What it requires to run:	Advocacy Co-ordinator, Advocates, Chief Officer with administrative support
Risks:	Increasing number of callers for the IHCAS Increasing demand for an advocate Lack of response from commissioners and providers

2.2.8 Governance

HWS aims to be a well-run organisation and has taken a rigorous and robust approach to delivering its statutory activities and exercising its statutory power to Enter & View.

HWS has to respond to the requirements of the Charity Commission, Companies House, Healthwatch England and its Commissioner, Shropshire Council. The annual report reflects HWS' response to these requirements and was submitted to HWE by the end of June 2018, as required, and is available on the HWS web site. A more readable document, the Annual Review, will be published later in the year for the annual event in early November 2018.

Policies continue to be reviewed and new policies introduced as required.

A regular report against key performance indicators (KPIs) is provided to the Board at all of its meetings and to the Local Authority at the quarterly contract review

meetings. A revised approach has been developed for 2018-19; outcomes of the work programmes will continue to be reported through the KPI framework.

All the officers undergo regular reviews with an annual appraisal and training is provided when needed. The Chair of the Board undertakes annual reviews with Board Members. Joint development / training sessions will be undertaken during the year as required.

Statutory activities:	N/A
Outcomes:	A credible well run organisation which delivers on its KPIs A motivated team Committed Board Members and volunteers
Outputs:	Timely and effective Board and Committee meetings Meaningful and effective policies Working group reports Risk Management Matrix Stakeholder Group meetings Contract Review meetings
What it requires to run:	Chief Officer time with administrative support Chair and Board member input Volunteer input to committees
Risks:	Work load to deliver Capacity

2.2.9 Research grants

HWS has been fortunate to be able to offer research funding to the voluntary and community sector under its first contract. Final reports will be published during 2018-19.

At the annual event in 2017 the chair of HWE offered a contribution from her own resources to support the continuation of the research grant scheme. The identification of match funding will be followed up in 2018-19.

Statutory activities:	S3, 4
Outcomes:	New knowledge to support HWS activity Joint working with the voluntary and community sector Seldom heard people make their views known
Outputs:	Research reports
What it requires to run:	Officer time and board member input
Risks:	Projects do not deliver what was planned Projects not delivered to time

3 Resources and budget

The budget for 2018-19 is confirmed at £161,450 which includes the funding for IHCAS. This is a significant reduction (27%) on the previous annual budget under the first contract.

The reduction in the working week to 4 days (closing on Fridays) and a move to smaller top floor offices within the same building in April are a result of the reduced overall budget. HWS has moved to a rental agreement (from a licence to occupy) and also now has its own independent IT system. Notwithstanding this the finances will be very tight in this financial year. HWS has used its experiences of the previous contract to inform the allocation of the budget for this year.

4 Prioritisation

A challenge for Healthwatch Shropshire is sheer volume of potential work across all the areas of activity. Potential work covers the geographical county, includes all ages and all demographics as well as all services which are publicly funded. Together with the transformation programmes in the county there are a high number of meetings to attend.

As a result criteria have been developed in order to prioritise a specific piece of potential work.

In terms of forward planning it is essential that HWS allows for sufficient flexibility in order to react to important high profile issues that occur during the year.

5 Risk Identification and Management

HWS has a “live” risk management matrix which identifies the external risks that affect the operation of HWS. The Matrix is considered at the regular Business Committee meetings and is presented to the Board meetings in Public on a quarterly basis; at these meetings appropriate amendments are made to take into account changing circumstances and to ensure that the identified risks and their mitigating actions are current.

The Matrix is formally reviewed in an internal workshop on an annual basis.