

Healthwatch Wandsworth

Annual
Report

2014/2015





Contents

Note from the Chair	3
Note from the Manager	4
About Healthwatch	5
Our vision/mission	5
Our strategic priorities	6
Engaging with people who use health and social care services	7
Understanding people’s experiences.....	7
Enter & View.....	10
Providing information and signposting for people who use health and social care services	13
Helping people get what they need from local health and social care services.	13
Influencing decision makers with evidence from local people	15
Producing reports and recommendations to effect change	15
Putting local people at the heart of improving services	16
Working with others to improve local services	18
Impact Stories	20
Case Study One	20
Case Study Two.....	22
Our plans for 2015/16	23
Opportunities and challenges for the future.....	23
Our governance and decision-making	24
Our board	24
How we involve lay people and volunteers	24
Financial information	26
Contact us	27



Note from the Chair



The second year of existence of Healthwatch Wandsworth has been one of consolidation and defining its identity.

The previous year had been one where the principal tasks were to maintain continuity with its predecessor,

Wandsworth Local Involvement Network (LINK) and to get governance and ways of working established. These were achieved.

Consolidation has included developing and strengthening the “Enter and View” team, developing clear roles for both the Healthwatch Assembly, Healthwatch Representatives and the Voluntary Sector Forum and making the Healthwatch Board more collegiate (and less dominated by the Chair). It has meant developing relationships with other local Healthwatch organisations, with other inspecting and scrutinising bodies and with commissioners and providers of health and social care, sometimes by setting up formal arrangements.

Defining identity has taken time and has meant a shift in emphasis from continuity with the LINK. It has taken time for this to be recognised by partner organisations but has led to the development of more constructive and effective relationships. Practical examples of this have included commenting on the Annual Scrutiny Plan of the Overview and Scrutiny Committee, participation in the Pharmacy Needs

Assessment and attendance at Quality Surveillance Groups.

During the year, Healthwatch Wandsworth had an interim Manager (covering for Ambra Caruso who was on maternity leave). This was Lauren Ashley-Boyall, who brought both enthusiasm and a fresh mind to the job. Her contribution to the process of defining identity was significant and much appreciated. Healthwatch wishes her well for the future.

Given a better-defined identity it should become easier in future for Healthwatch Wandsworth to attract more members and volunteers and to expand its outreach work in the wider community. Better defined relationships will enable it to have greater influence. One of the tasks for the forthcoming year will be to see how far these can be translated into tangible benefits to the local community. However, the dedication and quality of current members, staff and volunteers are grounds for confidence in the future.

Donald Roy, April 2015



Note from the Manager



Welcome to our second annual report. Over the last year we have become more established and influential in our role as local consumer champion for health and social care.

It has been an exciting year for Healthwatch Wandsworth as in

our second year we have become more established and influential in our role as local consumer champion for health and social care.

We have been talking to the local communities relentlessly, engaging with a wide range of groups at more than 120 outreach sessions. As a result of our engagement work and Enter & View visits we have produced 14 reports on topics such as maternity services, Female Genital Mutilation (FGM), care homes for people with Learning Disabilities and for older people, and access to health services for seldom heard groups.

The reports have been presented and discussed at the most important local groups, meetings and commissioners and providers have been held to account as a result. Our influence on local decision-makers has increased and we are now represented on 40 boards, groups and committees.

We have taken our role as community representative on the Health and Wellbeing board very seriously, and we have established clear mechanisms to make sure local communities are given the

opportunity to comment on the papers going to the Health and Wellbeing Board, and to make sure the Board responds to their concerns.

We are particularly proud of the research conducted by our Enter & View team, and of our work in sheltered housing schemes, which are presented as case-studies in this report. We believe that, in those areas, we made a significant difference in local service provision.

During our public meetings, we continue to give members of the public the opportunity to discuss topics important to them and their care, such as changes in primary care commissioning and CQC inspections of our local NHS trusts.

We recognise that not everyone is able to go to public meetings and we have made effort to improve our online presence. Our twitter accounts combined now have nearly 2000 followers and traffic on our regularly updated website has been constantly high, with an average of 1350 visitors per quarter.

Special thanks go to Lauren Ashley-Boyall, who worked hard while covering the manager's role during my maternity leave and whose efforts contributed to the teams' achievements.

Ambra Caruso, April 2015



About Healthwatch Wandsworth

Healthwatch Wandsworth has the legal duty to capture views and experiences of the public and uses it to make services better for ordinary people. We believe that the best way to improve services is by designing services around local needs and experiences.

Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience. We are the only body looking solely at people's experience across all health and social care.

As part of a national network we are uniquely placed to influence service design and policy at a national level, feeding the concerns and opinions of our local population into Healthwatch England and the Care Quality Commission (CQC). We utilise our experienced team of volunteers and staff to ensure that local health and social care services, and the local decision makers, put the experiences of people at the heart of their decision making.

Healthwatch Wandsworth sits within registered charity Wandsworth Care Alliance (WCA), a local organisation that was commissioned by Wandsworth Borough Council to run and provide the Healthwatch service. Established in 1991 WCA has a long history of working with the local community and marginalised groups to empower and support them to improve local health and wellbeing services. This experience and knowledge are assets that we have drawn on to make a stronger and

more capable Healthwatch that serves the community well in fulfilling its role as the statutory watchdog.

Our vision/mission

Our vision is to create a community in Wandsworth in which people's health and social care needs are heard, understood and met.

Creating this vision means that:

- People shape health and social care delivery
- People influence the services they receive personally
- People hold services to account

Our mission is to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf.

We do this by:

- Listening hard to people, especially the most vulnerable, to understand their experiences and what matters most to them.
- Influencing those who have the power locally to change services so that they better meet people's needs now and into the future.
- Empowering and informing people through our Information and Signposting Service to get the most from their health and social care services.
- Working with other Healthwatch organisations to influence service improvement on a local and national level.

Our strategic priorities

As the statutory voice of the patients, carers, public and service users in Wandsworth our strategic priorities are:

To *obtain the views of local people* through outreach and engagement activities at meetings and events and through the use of modern technology such as our website and social media platforms like Facebook and Twitter.

To *make people's views known* to the service providers and commissioners through representation at 40 regular meetings, boards, steering groups, forums and committees that we influence, contribute to and advise. We will also use our regular bi-monthly agency meetings with the Wandsworth Clinical Commissioning Group (WCCG), St George's Hospital Foundation Trust (SGH), South West London St George's Hospital Trust (SWLSTGHT) and the Wandsworth borough Department of Education and Social Services (DESS) to remind them of the need for involvement and consultation.

To *promote and support involvement* of our network of representatives and the wider membership and public in Wandsworth. We will do this by offering training and peer support opportunities, regular meetings and continuing our

programme of updating members on developments in health and social care policy both locally and nationally through electronic methods and our regular Assembly and Voluntary Sector Forum meetings.

To *provide advice and information* to enable anyone to be aware of their rights as patients, carers and service users and provide them with the information they need to choose services and when necessary make complaints. This continues to be delivered via our website, our telephone service and our outreach and engagement activities.

Each year our annual priorities are set in consultation with our members, representatives, stakeholders and the general public. This year

- We have spoken to local community and voluntary groups, gathering people's views about the local health and care services they rely on.
- People have shared their views with us by phone, email or through our website.

Our network of volunteers have acted as our eyes and ears, listening to the experiences of their friends, family, and community and feeding this information in to us.

WCA/Healthwatch staff: Back centre: John Morrill; Left to right: Ambra Caruso, Ayo Oyenibi, Delia Fitzsimmons, Jackie Bedford, Jason Edgington & Alana Rohden; Front centre: Hiliwona Solomon.





Engaging with people who use health and social care services

Understanding people's experiences

One of our strategic priorities is to obtain the views of local people and over the past year we have engaged with 49 different community and voluntary groups, and participated in 120 outreach sessions. Specifically, Healthwatch Wandsworth has a duty to engage with people who are:

- Under 21 or over 65
- Volunteering or working in Wandsworth but may not live in the borough
- Disadvantaged or vulnerable
- Seldom Heard

Our strong programme of outreach this year has enabled us to engage with a wide range of hard to reach and seldom heard groups including:

- People with learning disabilities
- Maternity Services Users
- Mental Health Service Users
- Homeless
- Carers
- Older people
- Young people
- Health and social care professionals
- Voluntary and community sector organisations

People volunteering or working in Wandsworth

Our presence at a variety of public focussed events and festivals have allowed

us to capture the views of those that work or volunteer in Wandsworth. Healthwatch Wandsworth has been present at annual favourites such as the Youth Empowerment, Woman of Wandsworth Event by S.T.O.R.M Empowerment, Wandsworth Borough Get Active Wandsworth Festival, 'Your Day - Your Say' and the Youth Councils Youth Question Time.

With support from the Business Launchpad Trident Business Centre we were also able to host a special 'Happy Birthday Healthwatch' event in celebration of our 2nd year late in March 2015. The Trident Business Centre hosts over 70 local businesses, groups and organisations and we were able to engage with many of them, in particular the working age population.

In November 2014 we supported the local authority to deliver their annual engagement event 'Your Day, Your Say'. This event engaged with over 100 people - service users, carers and representatives of community and voluntary sector groups and provider organisations.

Young people (under 21)

Healthwatch Wandsworth has a special remit to work with children and young people in Wandsworth. This is a group that has historically been hard to engage with but through collaboration with local partners that work with young people we have managed to ensure that their voices



and needs are heard and influence the priorities of Healthwatch Wandsworth.

Youth Question Time is an event organised by Wandsworth Council to give the young people of Wandsworth a chance to question the senior decision makers and service providers including the Youth Councillor, Head of Police, School Head-Teacher and a local entrepreneur on the topics that interest and affect them directly. Healthwatch Wandsworth Youth were invited along to have a stall at this event. We used the opportunity to ask over 40 young people “What matters to you?” and ask them to share both happy and negative aspects of accessing and using health and social care services.

These young people had stories, and boy did they have opinions! Here is some of what they said:

What matters to you?

- Being understood as a young adult.
- Being made to feel that I, my situation and my satisfaction with a service are important and matter.
- Having an allocated person to work with young people that have just left foster care.

The good/happy/positive...

- Being taken seriously.
- Being able to communicate on a personal level with health and social care professionals.
- Activities for participation such as these and CLICK (Children Living in Care Kouncil).

The bad/sad/negative...

- Too much work/caseload for key/social workers means that timings are overlong, appointments are missed.

- Continuous change in key/social workers.
- Not being understood.
- Our views not taken into account, instead adult’s views are taken into account for services that we have to use.

To further raise the profile of our Healthwatch Wandsworth Youth programme the suggestion was taken to create a video that would promote the involvement of young people in Wandsworth. Working in collaboration with one of our volunteers and students from South Thames College who did the filming and editing, a special video was created. The video was based on interviews of 10 young people from local youth organisation, Future-Skills Training. This video is still in its editing stage and the final video will be posted to our website and promoted through our social media platforms.

Our presence at other young people focused events such as St George’s University Fresher’s Week has given us good opportunities to promote Healthwatch Wandsworth Youth and get them involved in active roles within Healthwatch as volunteers. This year we have recruited 5 young volunteers as bloggers, research assistants and admin assistants.

Older people (over 65)

To engage with the older population of Wandsworth we teamed up with Wandsworth Older People’s Forum’s to engage with older people living in Sheltered Schemes. We were able to visit 13 Sheltered schemes over 2014/2015 and meet 99 residents who shared their views and experiences of health and social care services with us.



Two reports have been submitted based on our findings with recommendations and presented to Adult Social Care Services, St George's Hospital and the Wandsworth Clinical Commissioning Group (WCCG).

See page 18 for our Case Study based on this work.

Seldom Heard and disadvantaged Groups

Through our outreach to a wide range of groups we have encouraged and enabled people from disadvantaged and Seldom Heard Groups to feedback their experience of health and social care services and participate in local and national consultations. We have supported:

- 28 people from marginalised groups including BME, Faith-based and drug and alcohol service user groups to participate in the Big Advice Survey and tell us about their experience of health and social care services.
- 45 older and disabled people to take part in a London Ambulance Service survey.
- 13 young people to take part in a Children's Safeguarding Board survey about feeling safe in the borough as a young person.

In addition, in October 2014, Healthwatch Wandsworth initiated its own consultations looking at the experience of two groups:

- Homeless people and their experience of being discharged from hospital.
- New mothers and fathers and their experience of St George's Maternity Department.

Stories from both groups were captured through face-to-face and one-to-one discussions.

The work with homeless people was initiated following concerns that were brought to our attention at the end of our first year. Concerns had been raised that procedures for the discharge of homeless people from St George's Hospital were not always being followed. To capture the views and experiences of this group we arranged to visit the Merton based Salvation Army programme called 'Faith in Action' and the Richmond Vineyards Project. We spoke to many of the service users and captured 14 stories about discharge from St George's Hospital specifically.

The Maternity Services consultation was initiated to support the St George's Maternity Services Forum in promoting its existence and attracting more service user



Women of the Katherine Low Settlement FGM Community Health Champions Programme



experience input. By visiting a number of mother and baby groups, drama clubs, play groups, an ESOL class and a postnatal support group we engaged with 44 parents and captured 37 stories between November and December 2014.

The findings of both consultations were shared with WCCG and St George's Hospital at our regular agency meetings held every two months.

In addition to using our outreach work to understand the views of local people, we have also used these opportunities to promote wider participation in several local and national consultations. In 2014/2015 our members and the public have responded to:

- 16 formal consultations with 411 responses captured and fed back.
- 21 consultations that Healthwatch Wandsworth initiated with 686 responses captured and fed-back.

Our website, newsletters, ebulletin and social media have also enabled us reach over 3000 people and promote involvement in these consultations.

Enter & View

The work of our Enter & View team continues to be a great source of stories and experiences from the public. The strategy for the Enter & View team agreed in November 2013, had concluded that their programme of work should generally be skewed towards visits to people using adult social care services. It was felt that greater attention was already being given to talking to NHS patients, particularly those in hospitals.

So for 2014-15 the Enter & View Team took the mandate to undertake visits to three care homes for older people (those not providing nursing) and seven homes for adults with learning disabilities.

Enter & View visits, as developed by Healthwatch Wandsworth, focus on two of five elements of the CQC framework - **caring** and **responsiveness**. We have tried to find out what it is like for residents living there - do they feel well cared for and able to live their lives as they would like to?

The Enter & View Authorised Representatives spend most of their time talking to service users, observing the delivery of care and talking to relatives to get a complete picture. In total we have **spoken to 58 residents and 22 of their relatives**.

So what did we find?

The Enter & View team for the most part identified good caring practices with largely positive feedback from residents and families. However the following areas of concern were highlighted in homes for adults with learning disabilities:

- Lack of activities, especially for the less physically dependent, and where activities were planned, poor advance planning leading to expected regular activities being cancelled.
- Poor and inefficient physical design and appearance of homes in some places causing difficulties for some residents to join in communal meals or activities.
- Meals losing their physical appeal when pureed into a homogeneous mixture.
- Lack of awareness and response to residents' emotional and behavioural reactions to fellow residents and staff leaving or passing away.

Based on their findings the Enter & View Team made recommendations including:



- Actively involve residents in planning menus, food shopping and meal preparation. Meal times should also be managed and planned to provide a focus for residents' social interaction.
- Assign roles and responsibilities to those interested and capable to promote the involvement of residents in the home (help to create a homely and community feel).
- Offer a range of individual and group activities as well as on-site and off-site activities so residents have a choice and a balance is struck between structure and flexibility.
- Keep care plans up-to-date, simple and available in the homes and allow for regular reviews with management involving residents and families.

For care homes (without nursing) for older people, the Enter & View team visited three homes which provided services that residents and relatives were largely happy with. Where issues were identified they revolved around responding to residents' individual needs with regards to:

- Effective communication that took into consideration the needs of residents with sensory impairment.
- Interactive activities that gave residents flexibility, choice and reflected the needs of those that enjoyed taking part in group activities, those that chose to not participate, or preferred to pursue their own individual interests.

In total the team made recommendations to 9 provider organisations who have implemented action plans as a direct result of this.

We published individual reports on each home we visited and invited them to respond to our recommendations in the form of an action plan which we published on our web site and shared with the CQC and commissioners. Where available effort is made to summarise findings from the latest CQC inspections to provide context in each report. Likewise when the CQC published a report on one of the homes we visited, they mentioned our Enter & View report.

“Your reports are very useful in capturing the user voice.”

Atif Siddiqi, CQC Inspector

Findings of our Enter & View visits and the action plans produced can be found on our website

<http://www.healthwatchwandsworth.co.uk/enter-view>

Enter & View Authorised Representative for 2014-15:

Stephen Miles

Sian Boisseau

Peter West

Martin Haddon

Sara Turner

Clive Norris

Tony O'Flaherty

Cherill Scott



mental health needs to complete the 2014-15 programme.

Plans for 2015-16

To identify new areas of work for 2015-16 the Enter & View Team has consulted with our members and with our key stakeholders. The team have also reviewed the context of their work looking at the extent to which regulators, commissioners and providers have good quality information on service user views.

Following their consultation and review the Enter & View Team plan to scope and to the extent appropriate and feasible undertake projects in the following areas:

- Extra-care/supported housing
- GP practices
- Improved Access to Psychological Therapies (IAPT)

The Team is also planning to visit a small number of care homes for adults with



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

Helping people get what they need from local health and social care services

The Healthwatch Information & Signposting Service has dealt with 47 information and signposting cases in 2014-2015. A lot of information and signposting has also been carried out casually face-to-face at events and meetings although these have not been formally logged.

A large proportion of those that access the Information & Signposting Service (69%) are female with just 31% of enquiries coming from the male population.

81% of cases were responded to in 0-5 working days and 19% in 6-10 working days.

Of the information and signposting cases that we have dealt with the common issues were:

Hospital care and treatment - 16%

Social care services- 41%

Primary health care services - 27%

Mental health - 2%

Other (e.g. housing and benefits) - 14%

Communication methods used for initial contact by people accessing the service:

- Face to face - 32%
- Phone - 57%
- Email - 8%
- Letter - 3%

A new development for the service has been the launch of the 'How to complain about your Healthcare service' training session. These sessions have been delivered:

- In 11 Sheltered Schemes across Wandsworth reaching 68 residents as well as the Sheltered Housing Officers (SHO's).
- The Autumn Rose Club exercise group where 25 people were provided information on how to complain and given the handouts.
- The Community Fair and Healthy Road Show in Streatham Common hosted by the Seventh Day Adventist Church.

The need for the 'How to complain about your Healthcare service' information booklet was further highlighted by the publication of the report by Healthwatch England 'Suffering in Silence'. This report examined the current failings of the health and social care complaints system and brought to light that less than half of the people that experienced poor care complained and that 1 in 4 said this was because they did not know how to



complain. The full report can be found on the Healthwatch England website.

The how to complain booklet has so far been very well received, with lots of comments from recipients that they had not heard of many of the bodies involved in the complaints process, and how useful it is to have the process simply laid out.

“Thank you very much for replying promptly and for all your kind assistance, you have really given a great deal of useful information”

Information & Signposting caller,
November 2014



Influencing decision makers with evidence from local people

Producing reports and recommendations to effect change

A vital part of the process of influencing decision makers is making sure that the stories and views we gather are heard by those in charge of health and social care services, and that they are used to continually improve services.

“Healthwatch Wandsworth has actively contributed to a variety of patient and public involvement initiatives and provided constructive views and feedback at WCCG board Meetings.”

Graham Mackenzie, Chief Officer, WCCG

Regular liaison meetings with St George’s Hospital, South London St George’s Mental Health Trust, Department of Education and Social Services (DESS) and Wandsworth Clinical Commissioning Group (WCCG) are forums where we can bring a lot of the views we are gathering and the recommendations that come from them.

Key recommendations:

- We asked St George’s Hospital to improve the guidance for volunteers and institutions on their mock quality inspections.
- We asked for increased social activities for residents in Sheltered Schemes and

better education for health and social care professionals on the role of Sheltered Housing Officers (SHO’s).

- We urged St George’s Hospital to include service user and carer feedback in the monitoring and review of their new Frailty Pathway.
- We urged WCCG to share the news that they had been approved to become a co-commissioner along with NHS England of some primary care services such as GP’s and dentists to reassure Wandsworth residents and promote transparency.

Service Improvements and positive influence:

- In addition to improving the guidelines for mock inspections, St George’s Hospital agreed to allow all Quality Inspectors (managers, clinicians and lay persons) to agree the draft reports on outcomes and proposed improvements.
- The Council has funded an Activities Coordinator to ensure that activities are available for residents in all the sheltered housing schemes in the borough. The Housing Manager for Sheltered Schemes went to meet with local social workers and explain the exact role of the SHO. Wandsworth CCG expressed an interest in providing training for GPs and other health professionals regarding the SHO’s role and what they can/cannot do for residents but this has yet to be realised.



- Service user and carer feedback will be included in the review of the new Frailty Pathway, and in addition Healthwatch Wandsworth and its volunteer's representative were invited to sit on the implementation steering group.
- WCCG attended our Assembly meetings in February 2015 and gave a presentation to our attendees. This presentation was also filmed and posted on our website.

Formal reports and recommendations are just one of the ways that we ensure the patient voice and experience is at the heart of service design and implementation. Through wide representation on a variety of boards, committees and steering groups we are always speaking out on behalf of the public in Wandsworth. Our involvement in the WCCG Seldom Heard Groups Fund grant and the Thinking Partners Group also allows us to promote the voices and participation of those that would otherwise not be heard.

Putting local people at the heart of improving services

In all our activities we have sought to capture the stories and experiences of local people and bring them to the over 40 strategic and operational decision making boards, meetings and committees that we sit on.

Our quarterly Assembly public meetings allow us to inform and support the involvement of local people in the commissioning, provision and management of local health and social care services. Guest speakers from Public Health, the WCCG, St George's Hospital, South West London & St George's Mental Health Trust and the South West London Collaborative Commissioning Group have engaged and

informed those that attend on a variety of issues including:

- St George's Hospital CQC inspection and their action plan following the CQC inspection.
- The South West London and St George's Mental Health Trust consultation on the modernisation plans for in-patient mental health services.
- Public Health's Pharmacy Needs Assessment consultation asking people for their views on local chemist services including their location and the services they offer.
- London Collaborative Commissioning Group informing people of the NHS Case for Change looking at how and why the NHS needs to change to improve efficiency and make cost savings.
- Wandsworth CCG and the Collaborative Commissioning Programme were invited to share the news of new developments in Wandsworth about how primary care services such as GP's and dentists will be commissioned, moving from NHS England to local CCG's.



Our Assembly Meeting in September 2014 consulted people on the Mental Health Trust Modernisation Plans.

Our Community and Voluntary Sector Forum is another meeting where a wide range of groups and individuals have been



able to influence service design through contributions to the Health and Wellbeing Board, a key body involved in the commissioning of health and social care services.

The Voluntary Sector forum is a place for local people and groups to be informed and comment on the issues being considered by the Board. This year we have enabled 125 people and 30 different community and voluntary groups to influence the Health and Wellbeing Board and respond to issues including:

- The Older People's Strategy
- Better Care Fund
- Healthy Eating Strategy
- Public Health Bi-Annual Report and progress on the Joint Strategic Needs Assessment (JSNA)
- Adult Safeguarding Annual Report

Healthwatch Wandsworth has a seat of right on the Health and Wellbeing Board and thus is able to contribute to discussions and ask questions. This is a very important role and our Chair, Donald Roy, is always briefed with comments and issues we have gathered from the public and our members to ensure we are really representing the voice of Wandsworth.

We also regularly submit reports to the Health and Wellbeing Board, based on the issues and discussions from our quarterly Voluntary Sector Forum.

Our Volunteers influencing change

A large part of the work carried out by Healthwatch Wandsworth is delivered through our volunteers and this is one of the main ways that we ensure local people are involved in the commissioning, provision and management of local health and social care services.

21 Representative volunteers that represented Healthwatch Wandsworth at over 40 boards, committees and meetings.

3 local Youth Bloggers that write regular articles for our Healthwatch Wandsworth Youth Page.

Our Volunteers all play important and specific roles that help us carry out our statutory activities. As residents or users of health and social care services in Wandsworth, we understand and appreciate that our volunteers are often the best at being the voice of the Wandsworth public and service users. Executive Board members, Authorised Representatives and Enter & View Representatives help in gathering views and helping Healthwatch Wandsworth act as a 'critical friend' that holds providers and commissioners to account, continually challenging them to take action in response to people's experiences.

"Healthwatch colleagues provide invaluable insights into the experience of patients accessing health services in the borough and support us in monitoring and improving the performance of local services"

Graham Mackenzie, Chief Officer, WCCG.

To enable our volunteers to carry out their representative role, Healthwatch Wandsworth promotes and supports them to take part in training opportunities and events.

In 2014-2015 we had:



This year our volunteers have attended 23 training and information events provided by both statutory and voluntary organisations.

Working with others to improve local services

In addition to visiting care homes to monitor quality and working with the providers, Healthwatch Wandsworth has also worked with the Care Quality Commission (CQC) to improve services.

We have shared with the CQC all reports of our Enter & View visits for the homes we visited for older people:

- Wood House
- Redclyffe and
- Lyle House

We have also shared our Enter & View reports for the homes we visited for people with learning disabilities

- Anvil Close
- Arabella Drive
- St James Drive
- Toterdown Street
- Wardley Street
- St Mary's Convent.

We have sought to influence the behaviour and activities of the CQC by participating in a number of their events, including their:

- Regular local Healthwatch advisory conferences.

- CQC Co-production workshops.
- Adult Social Care Intelligent Monitoring Workshop.

“Thank you for the contribution you have made to the development of our new approach both through our formal consultation processes and through your attendance at our bi-monthly co-production group meeting. The co-production group has been a core part of shaping and designing the new approach and your involvement has been so important in helping us to get it right - we could not have done it without you.”

Andrea Sutcliffe, CQC Chief Inspector of Adult Social Care.

The CQC were also a guest speakers at our June 2014 Healthwatch Assembly, where in addition to presenting the findings of the inspection of St Georges Hospital, our members were informed about their work.

As well as the CQC we have worked with our other partners to improve quality of services including:

- The CCG by attending their Clinical Quality Review Meetings and the steering group for Transforming Community Adult Health Services.
- St George’s Hospital by participating in their Quality Inspections Programme and proposing improvements in the methodologies.
- The Mental Health Trust by reviewing and commenting on their Quality Accounts.



- The Council by proposing how closer working across agencies could improve the monitoring of adult social care services.

regular London Healthwatch meetings and the South West London Healthwatch meetings.

We are also in regular contact with our Healthwatch England colleagues. We exchange information with other local Healthwatch organisations during the



Impact Stories

Case Study One

Sheltered Scheme Residents Speak Out



Over the past 16 months Healthwatch Wandsworth has made visits to 13 Sheltered Schemes and met 99 residents who shared their views and experiences of health and social care services with us.

Each Scheme was visited twice which allowed us to get to know the residents and for them to become comfortable with us. The first sessions were always opportunities to get to know the residents and find out about their experience of accessing and using services in Wandsworth. Our second sessions were opportunities to deliver the Information and Signposting service and share the 'How to complain about healthcare services' booklet. This booklet was well received by both residents and the Sheltered Housing Officer's (SHO's).

With each Scheme we visited, similar themes materialised:

- Difficulties with accessing GP appointments.
- Misunderstandings of the SHO's role and increasing demands on their time.
- Lack of social activities for residents leading to isolation.
- Concerns about the time carers spend with residents.
- Concerns about fewer live-in wardens and the 'move around' policy for SHO's.
- Resident's confusion about care packages and type of support they are receiving.

In total we have visited 13 sheltered schemes and spoke to 99 residents.

Visits in early 2015 to Schemes we had never visited before highlighted many of the same issues as earlier visits but this time residents also spoke about their concerns with:

- Quality of home care.
- Communication between SHO's, care agencies, health care providers and families.
- Transport arrangement when leaving hospital if brought in by an ambulance.
- Consistency and continuity of carers and struggles to get care organised.



- Older people becoming carers and not knowing what support is available to them.

So what happened next?

The feedback we gathered was very valuable and we compiled a report with recommendations which we took to our regular liaison meetings with DESS and WCCG. As a result of this work, the following things have happened:

- DESS and the CCG responded by rolling out training programmes called 'learning bites' where SHO's visited social care professionals to explain their role.
- An Activity Co-ordinator's post was created from a budget of pooled CCG and DESS funds to combat isolation. The Activity Co-ordinator will ensure that activities are available for residents in council sheltered housing schemes in the borough.
- Wandsworth CCG expressed an interest in providing training for GPs and other health professionals regarding the SHO's role and what they can/cannot do for residents.

The findings of our second batch of visits to Sheltered Schemes in 2015 will be taken to our meeting with DESS, St George's Hospital and WCCG in the next few months. Once this has happened we will update the schemes we have visited and the wider public on 'What happened next' through our website and newsletters.





Case Study Two

An Enter & View into Wardley Street Respite Care Home



Members of the Katherin Low Settlement Older Peoples Lunch Club.

Our Enter & View team visited 2 Wardley Street in November 2014. Wardley Street provides respite care for adults with learning difficulties and varying physical disability. The home, which is run by Certitude, had three of its seven rooms filled at the time of the visit.

Through their observation and interaction with residents, staff, and relatives the Enter & View Authorised Representatives made the following recommendations:

- Any efforts to increase the 'homeliness' of the home, and decrease the utility style of some of the rooms and common areas, would be beneficial especially for people staying for a number of weeks.
- Care plans should be up to date and accurate, only including information about the individual concerned.
- Consideration could be taken to how residents might spend their evenings and whether more alternative activities might be offered within the home.

The report of the complete findings of the Enter & View Team can be found on our website.

So what happened next?

In response, Wardley Street wrote a user-friendly Action Plan to address the issues raised in the report and published it in their newsletter. The Action Plan made promises including to:

- Work more closely with residents and families to ensure correct work plans are available.
- Invite suggestions from residents and their families on how to make Wardley feel personal and homely.
- Invite suggestions on possible activities residents would like to do.
- Maintain a board that will inform residents of what's happening at the home and allow residents to make suggestions. This will be an ongoing commitment.

Activities like these by Healthwatch Wandsworth aim to allow the voice and experience of the patients, service user and their family to influence the quality of service they receive. Although we do not have powers like the CQC, work such as this, carried out in collaboration with the providers and commissioners, will allow us to influence positive change on a local level.



Our plans for 2015/16

Opportunities and challenges for the future

Our priorities in our third year will continue to be around obtaining the views of local people and using these to positively influence change in the commissioning and provision of health and social care services in Wandsworth.

In 2015-16 we will:

- Continue to obtain the views of local people with particular focus on those that are seldom heard.
- Promote involvement into existing structures including by ensuring people's views are known at the boards, committees and groups we are represented on.
- Respond to all main local health and social care consultations and involve patients, service users and carers in this response.
- Support our network of representatives through training and peer support.
- Continue to support wider involvement of our membership and the public through both traditional and modern communication methods.
- Identify those who are less likely to be aware of their rights as patients, carers and service users and provide them with the information they need to choose services and when necessary make a complaint.
- Maintain regular dialogue with the CQC and Healthwatch England.
- Continue the Enter & View work within the existing strategy and identified priorities

Our stream of work for 2015-16 will include:

- Work with seldom heard groups to increase their capacity to engage with local health and social care services.
- Recruit and develop Healthwatch Researchers
- Support the South West London Collaborative Commission group by acting as a conduit of information, supporting views of our local groups, patients and the public to feed into the programme
- Planning and delivery Enter and View work in Extra-care settings; GP surgeries, IAPT
- Promoting Healthwatch Wandsworth to ensure a higher number of local residents are aware of what we do and what we have achieved

This is not as exhaustive list and will develop and adapt as we move forward.





Our governance and decision-making

Our board

The Healthwatch Wandsworth Executive Board is our governing body and is responsible for the overall governance and strategic direction of Healthwatch Wandsworth. The Executive now has eight voting members, four of whom are WCA Trustees (of whom one will be Chair), and four members elected from among the Healthwatch membership.

The Healthwatch Wandsworth Board members are:

Donald Roy (Chair)

Elizabeth Berner (WCA Trustee)

Clive Norris (WCA Trustee)

Cherill Scott (WCA Trustee)

Jamie Gillespie (elected member)

Colleen Bowen (elected member)

Christine Lewis (elected member)

Paul Dinsdale (elected member).

How we involve lay people and volunteers

Much of the work of Healthwatch Wandsworth has been achieved through the efforts of its members acting as volunteers and with the support of staff.

Appointed representatives are those that act as Healthwatch Wandsworth formal representatives and contact point in specific areas. In 2014-15 we had 21 active Volunteer Representatives that represented Healthwatch on a variety of boards and committees.

Although the consumer champion for everyone that lives or uses services in Wandsworth, Healthwatch Wandsworth has a special structure and governance that ensures its transparency and accountability to those it represents. As a membership organisation our registered members hold a special consultative position. This allows them to vote in elections, stand for election to key positions within the Executive or other representative roles and generally contribute ideas and help inform our priorities.

At the end of our second year we had:

- 492 individual members
- 170 organisation members

We have also developed our online presence this year, and through our regular posts reach:

1,955 Twitter followers and 1,035 Facebook friends with local and national news and alerts about developments in health and social care services.

Members of Staff

- Project Manager: Ambra Caruso
- Interim Project Manager: Lauren Ashley-Boyall



- Administrator: Alana Rhoden
- Outreach & Engagement Lead: Delia Fitzsimmons
- Information & Outreach Lead: Hiliwona Solomon
- Office Volunteer: Eduardo Ricardo Chiesa



Financial information 2014/2015

INCOME		£
Core Payment	142,772	
Performance Related Payments (PBR**)	39,577	
Total income	182,349	

EXPENDITURE		
Rent & operating overheads	44,476	
Staffing and management costs	120,434	
Legal & Professional costs	5,259	
Total expenditure	170,169	

*Note these draft income and expenditure are compiled from management accounts and therefore remain, at this stage, indicative only and remain subject to alteration and adjustment, scrutiny of auditors and approval of the Healthwatch Executive and WCA board.

**Under the terms of the contract a Payment by Results (PBR) model is used. WCA receive 80% of the nominal contract value (£142,722) in four quarterly payments. In addition to this, WCA may receive 10% of the nominal contract value (£17,840) divided into quarterly payments in arrears, for the successful achievement of quarterly performance measures; 10% of the contract value for the successful achievement of annual performance measures; and a further 10% for the successful delivery of the outcomes and objectives within the agreed Annual Plan. This means that WCA can achieve a cumulative maximum 110% payment if all performance measures are met. During 2014/15 WCA received £13,200 (74% of the possible payment) for the achievement of quarterly performance measures, and a total of £26,377 (74% of the possible payment) for the annual performance measures and Annual Plan objectives.



Contact us

Get in touch

Address: WCA, Trident Business Centre, 89 Bickersteth Road, London SW17 9SH

Phone number: 020 8516 7767

Email: enquiries@healthwatchwandsworth.co.uk

Website: www.healthwatchwandsworth.co.uk

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, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

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.

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

© Copyright Healthwatch Wandsworth 2015

