



Annual report 2019-20

Guided by you

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Message from our Chairman

I am delighted to welcome you to Healthwatch Wandsworth's Annual Report for 2019/20. You will find inspiring examples of our work engaging with patients and local communities, helping them access services they need and advising decision makers in the NHS and social services on issues and challenges to be addressed.

To take 3 examples:

- Mental health was a priority this year. We worked with service users, families, carers and the NHS on improving services in the community, including Recovery Cafés.
- Supporting people to return home from hospital can be complex. We conducted important reviews of the St George's Discharge Lounge and rehabilitation services.
- People's stories remain central to our work. More people contacted us this year, to share their stories or get information.



Stephen Hickey
Healthwatch
Wandsworth Chair

A handwritten signature in black ink that reads "S Hickey".

Healthwatch relies on the commitment of a small professional team, supported by many volunteers who contribute in lots of ways, including conducting 'enter and view' visits, engaging with patient and community groups or service providers on our behalf, or clarifying our organisation's focus. I want to thank all these individuals. Many thanks also to staff who left and joined us; Alana Rhoden, our Communications and Administration Officer who left after 6 years; Natasha Kapadia and Liz Ainsworth who temporarily supported work on our new website and our Maximising Independence Team project, and well done to Gijs van Amelsvoort who became Communications Officer as we tripled our communications during coronavirus.'

I joined at the end of the year and thank Jeremy Cowper who played a key role as Interim Chairman. He led a review to ensure we have strong and transparent governance arrangements within our umbrella body, Wandsworth Care Alliance. A strong committee supported him, 3 of whom – Colleen Bowen, Zenobia Cowen Davis and Rebecca Lanning - have now moved on, but continue to volunteer with us. We thank them for their invaluable work on the Committee over the years.

This report mostly covers our work before coronavirus, but Wandsworth was hit hard in the final months. We, like everyone, changed our focus and working methods. As the longer-term implications of coronavirus are assessed, and services change to reflect a 'new normal', we will need more than ever, to ensure that the voices of individuals and communities across Wandsworth are heard. If you live in Wandsworth your views and your support are welcome at what is clearly going to be a critical time.

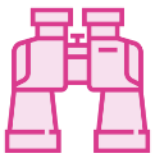
About us

Here to make care better

We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved. We then share their views with those with the power to make change happen locally and through the Healthwatch England national body.

People can also speak to us to find information about the health and social care services that are available in Wandsworth.

Nationally and locally, we have the power to make sure that those in charge of services hear people's voices. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them.



Our vision is simple

Health and care that works for you. People want health and social care support that works – helping them to stay well, get the best out of services and manage any conditions they face.



Our purpose

To find out what matters to you and to help make sure your views shape the support you need. The evidence we gather helps us raise people's concerns with health and care decision-makers so that they can improve policy and practice for the better.



Our approach

People's views come first – especially those who find it hardest to be heard. We are independent and champion what matters to you. We work with others to find solutions.



How we find out what matters to you

People are at the heart of everything we do. Our staff and volunteers work hard to identify what matters most to people by:

- Running surveys to get your feedback on important topics.
- Talking to local people in our community.
- Reporting and presenting your views to decision makers.

This year, social distancing measures mean we are developing new ways to:

- Reach out in the community to hear from local people.
- Hold focus groups.
- Find out how services work if we are not able to visit them.

Our priorities 2019-20

Last year people told us about the improvements they would like to see health and social care services make in 2019-20. These were our priorities for the year 2019-20 based on what you told us:

- **Mental health.**
- **Co-ordination between services.**
- **Access to information about services and help to stay well and manage one's own health.**
- **National NHS and Wandsworth Health and Care Plans.**



Read on to find out more about what we did.

We have been championing the perspective of local people and representing them at a number of meetings and forums, including the local Health and Wellbeing Board. Topics about we have taken an interest in include cardiac surgery at St George's Hospital, suicide prevention and services for the borough's homeless population. We have been following changes in support for carers and development of health care at Wandsworth Prison after our work on these topics last year. We also spoke to the General Medical Council about how they can ensure doctors gather and respond to patient feedback.

How we have reacted to the coronavirus pandemic

The pandemic had an extraordinary effect on everyone and on our health and care services. Uncertainty about how things will develop and how we can keep in touch with others continues.

The health and care system had to use a new emergency decision making structure, and we had to find appropriate ways to communicate with them. Our staff and volunteers learnt new ways to meet and work together from home.

Initially we focused on finding and providing information about access to health and care. The urgency of needing to find and send out information may reduce but we will continue our focus on this.

We kept in touch with some community groups, joining online events if they had them, but many were busy with coronavirus-related work. We used social media more and are now organising ourselves to speak to people by phone, instead of seeing them in the community as before. We do not have people's phone numbers and rely on people contacting us to take part.

Reviewing our Governance

This year we reviewed our governance framework to ensure good governance and decision-making. Healthwatch Wandsworth is independent and organised under the umbrella of Wandsworth Care Alliance (WCA), who are contracted by Wandsworth Borough Council to deliver Healthwatch. Our review clarified how the various parts fit together, including the composition and role of our governing body, the Healthwatch Committee. This includes representatives elected by local members and nominations by WCA. Local people can become a Healthwatch Wandsworth member for free to receive regular information and opportunities to take part in our work.

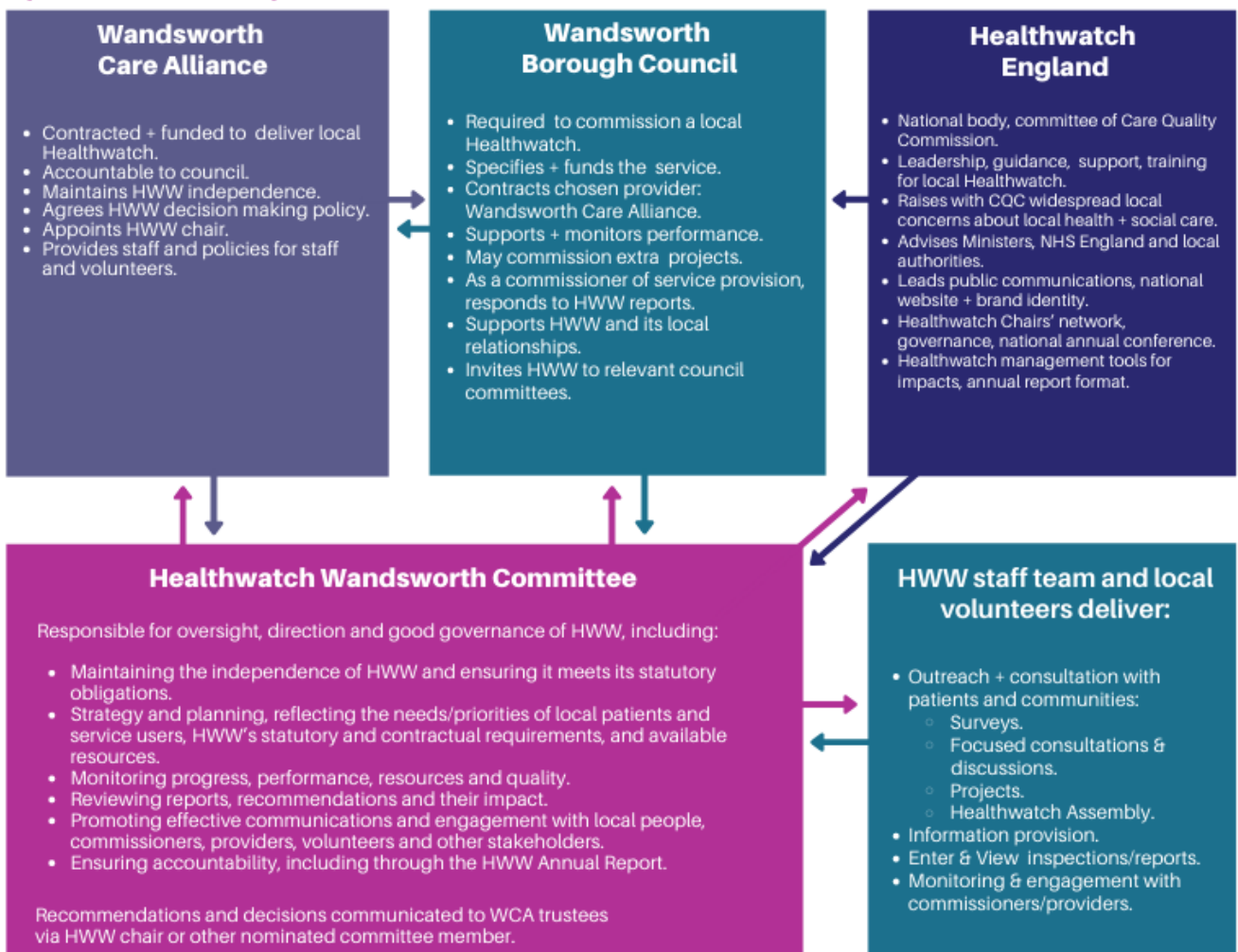
BECOME A MEMBER

- Hear about our events and our work
 - Contribute to our surveys and research
 - Hear about local health and social care services and get involved in improvements
- Become a member for free**

See the following diagram that describes our new framework. It is described in full on our [website](#) alongside our decision-making policy, which guides how we prioritise our work and decide on future projects.

Healthwatch Wandsworth

Decision and governance model: inputs/contributions/responsibilities



Thank you

Thank you to everyone who helped us to put people at the heart of health and social care.

We could not do our work without local people who shared their views with our dedicated team of staff and volunteers.

We are very grateful to the support of voluntary and community organisations like WCEN, BATCA, Share Community, Canerows, Mama Lows Kitchen and many more. This has helped us reach people in the community to find out what they think.

We also want to thank staff working in local health and care services who helped us arrange to speak to the people they support; and managers and decision makers who have often helped us make sure this happens and have encouraged our feedback.



Healthwatch Wandsworth staff (clockwise from top left) Sarah Cook (Manager), Delia Fitzsimmons (Outreach and Engagement Lead), Funmilayo Oyenibi (Information & Outreach Lead), Gijs van Amelsvoort (Communications Officer).

Working with others

We regularly liaise with Healthwatch England to share what local people have told us. We participate in local and national Healthwatch forums. Stories local people tell us are shared anonymously with Healthwatch England. This year we also helped the Healthwatch England network to

develop their impact toolkit. See also page 18 about how we contributed to national work around the NHS Long Term Plan.

We make regular contact with the Care Quality Commission inspection teams to share intelligence and reports, if appropriate, and avoid duplication or demands on services at the same time.



As Chairman of Healthwatch England I make sure national decisions are informed by what people are saying all over England. If you shared experiences with us last year, I want to say a personal thank you. Without your views, Healthwatch wouldn't be able to make a difference to health and social care services, in your area and nationally.'

Sir Robert Francis, Healthwatch England Chairman



Find out more about us and the work we do

Website: www.healthwatchwandsworth.co.uk

Twitter: @HWWands

Facebook: @HWWands

Highlights from our year

Find out about our resources and the way we have engaged and supported more people in 2019-20.



Wandsworth Council is required to make sure there is a functioning Healthwatch in the borough. They set us a number of Key Performance Indicator (KPI) targets. Below are some highlights and the full list of KPIs is in Appendix 1.

Health and care that works for you



34 volunteers

Helped us to carry out our work.

In total, they gave 1,669 hours.

Providing support



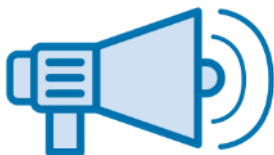
831 people

were involved in sharing their health and social care stories with us.

Over 165 people

contacted us with questions about local support, 60% more than last year.

Reaching out



4,799 people

Engaged with us through our website, 14% more than last year.

1,196 people engaged with us through social media.

Making a difference to care



We published

12 reports

about the improvements people would like to see in their health and social care.

We focus our work on reaching all sections of the community and those whose voices may not often be heard. We collect details about the people involved in our work where they are happy to disclose this and report this to Wandsworth Council. It uses the information to demonstrate that services comply with the general equality duty (Equality Act 2010) and to undertake Equalities Impact Needs Assessments.

How we've made a difference



Speaking up about your experiences of health and social care services is the first step to change. See how your views have helped make a difference to the care and support in Wandsworth.

Mental Health

People often tell us that mental health should be our top focus. So this year we:

- focused projects on [Community Mental Health Teams](#), [Recovery Cafés](#) and mental health support for young people in the community.
- held an event discussing how the Mental Health Trust's Talk Wandsworth Wellbeing team can reach and support priority community groups, developments in children and young people's mental health and the transformation of community mental health.
- continued to input a patient perspective at meetings including the Mental Health Trust transformation and strategy workshops and BAME Mental Health forums.

We focused on hearing from people with a mental health condition and their families/carers, young people and other seldom heard groups.

More detail is available via the weblinks above. Here are a few highlights from this work.

Experience of recovery café support for mental health crisis

Local NHS decision makers are using what people told us about a local mental health recovery café to develop future plans for this kind of support.

We spoke to people using the café and others at community groups set up for those who need mental health support.

People using the café told us they valued the safe space and support of staff and peers. They felt it stopped a crisis from happening.

We were told that the services should:

- Be located conveniently, with good transport.
- Offer a range of activities.
- Provide a safe and supportive space to talk.

Those planning future services have used this to inform their plans.



We recommended they review the locations and opening hours and provide clarity about if people can use the service to avoid a future crisis or prevent a current crisis. We suggested this service should fit into people's longer-term and crisis support plans.

We will be feeding the outcomes from the Healthwatch report – which is providing us with much richer qualitative data - into the thinking around the model.'

- Mark Robertson, Lead Transformation Manager - Mental Health (Wandsworth) Joint Commissioning Unit

Community Mental Health Teams – Enter and View visit

Thanks to people sharing experiences of the East Wandsworth Community Mental Health Team (CMHT), South West London and St George's NHS Mental Health Trust reviewed people's involvement in planning their care and the discharge process.

Mental health policy increasingly aims to minimise hospital admissions by relying on community services. So we visited East Wandsworth CMHT Hub and spoke at length with 12 people using the service, and one carer.

Their views were mixed. The feedback from patients was generally positive, but there were some varying concerns.

Some gave recovery support workers praise; care coordinators and other team members offered patients practical help with finance and housing, as well as emotional support.

Some were happy with their level of involvement in their care, while others were less so. Some felt that lack of continuity of their care coordinator was a problem, negatively affecting feelings of stability.

We recommended the Mental Health Trust consider how they ensure:

- People are given and understand as wide a range of choice of treatment as possible.
- That they consider specialist support for homeless people.
- Minimal unwanted changes of care coordinator/consultant psychiatrist, and people are prepared for change as far as possible.
- Carers feel their voice is heard.
- All patients and carers are prepared for discharge and GPs are sent a letter within 7 days.
- People co-create care/crisis plans.
- Out of hours support for those experiencing difficulty.

Full recommendations and the Trust's action plan are in our [report](#).

Community-based mental health support for young people

There are plans for more mental health support in schools, but having spoken to adults about recovery cafés, we heard there isn't similar community support for young people's mental health.

We started work on this topic and planned to collaborate with Silverlined Horizons, an organisation facilitating young people's involvement in mental health services.

Unfortunately, elections and the coronavirus pandemic delayed our face to face work, but we still managed to speak to two groups of young people

before lockdown took effect.

They told us it would be valuable to have mental health support at a community-based place located away from school, after school and at weekends.

We will continue this work in 2020.



Coordination between services

Many people told us to focus on how services co-ordinate with each other to provide a person's health and care, particularly for older or vulnerable adults. Many highlighted discharge as an important process. We describe below our work on this topic.

- We spoke to people about their experience of rehabilitation and re-ablement care after leaving hospital. We heard from people who received this care in their home (funded by Wandsworth CCG). We also surveyed people about how different services that offer this type of care might integrate.
- We spoke to people about their experiences of discharge from St George's Hospital at the hospital's 'Departure Lounge'.
- We planned and prepared to go to speak to residents at an extra care home, but we had to cancel our final preparations for the visits due to the coronavirus pandemic.

More detail is available via the weblinks above. Here are a few highlights from this work.

Rehabilitation at home after discharge from hospital

Services helping people with rehabilitation in their home will be more joined up because people shared their experiences of care provided by the Central London Community Healthcare NHS Trust's (CLCH) Maximising Independence Team.

We spoke to people whilst care providers visited them at home and invited people to complete a paper survey by post or over the phone.

People were generally positive about the support the service provided and felt they were progressing. Some reported:

- they understood their goals and had been involved in setting them.
- long waiting times to start receiving the service.
- not having discussed what might happen after the short-term support or who to contact.
- a lack of communication between various services involved in their care.

We recommended a review of communications about the service, reviews of goals and who to contact. The service should also look at how they

involve the patient, family members and carers. We suggested communications between services could be improved.

The service developed an action plan, but due to the coronavirus pandemic it was put on hold and arrangements for people after discharge changed for this period.

It was really helpful to receive independent feedback on this service and we will be using it to develop the services, and in particular to make access more joined up and for services to communicate better with each other. This has already started through the coronavirus response.'

Sandy Keen, Assistant Head of Transformation – Integrated Care, Wandsworth NHS South West London CCG





Intermediate Care Model

We spoke to local people at a variety of rehabilitation groups about how intermediate care might be integrated better between services. This work was delayed by the coronavirus pandemic, and the introduction of a new model of care. Nevertheless, we will continue to use our findings to inform future developments in discussions with decision makers.

St George's Hospital Discharge Lounge

Thanks to experiences people shared with us, St George's Hospital accepted our recommendations and in their quality priorities for next year they have committed to improving discharge from hospital experiences.

In November 2019 we visited the hospital's Discharge Lounge to hear people's experiences of discharge.

Feedback was mainly positive and most

people felt prepared for discharge, and family/carers were involved appropriately.

Some people had concerns about going home related to their condition, treatment or adaptations at home. Over half reported that a staff member went through their discharge summary, but the rest were unaware of being helped with this. The majority had not been given a leaflet on the wards.

We recommended a review of patient information, processes for medication, transport and other issues which can lengthen waiting time to go home. The hospital wrote an action plan and we continue to follow progress at meetings we attend at the hospital.

The Trust welcomes the feedback from Healthwatch and accepts the recommendations. Improvements are in the action plan and will be integral to the Trust wide approach to improving patient flow and discharge of patients.'

Extra Care housing schemes

We began work on an Enter and View visit to an extra care scheme and had almost completed our research phase. We had spoken to commissioners, arranged a meeting with the scheme managers and started drafting surveys.

We received some information about the service from the managers via email and had hoped to hold our meeting with the managers in March; possibly visiting residents soon after.

We decided to pause this work due to the coronavirus situation.

Access to information about services, and help to stay well and manage one's own health

Last year many people told us it is difficult to find groups or services available. They wanted us to look at how there could be a one-stop-shop to find information about services, especially ones that could help them keep well. These are issues that affect everyone, and particularly those who may face health inequalities. So this year we:

- [Held an event](#) on how public health messages can reach groups who face health inequalities. We discussed public health campaigns and how information might reach community groups and be tailored to bring about change>
- Launched a new website, rewrote a lot of the information and signposting information and recruited a new part-time communications officer.
- Started using Refernet, which co-ordinates information requests between local organisations.
- Took part in workshops about developing the 'front door' of social services.
- Aimed to launch a project on the new social prescribing service. This was postponed as the plans for the service changed. We hope to return to this at a future date.
- Rapidly developed a survey about MMR immunisations, working with Public Health, to hear people's experiences of managing their vaccinations and understand why there was a low take up of vaccinations. We attended two clinics and started to explore how to promote the survey or speak to people using social media, but during the coronavirus pandemic we paused this work.



Wandsworth Council Public Health Team work closely with Healthwatch to contribute to the Wandsworth Healthwatch Assembly. We work alongside Healthwatch to share and reflect our work around health inequalities and value the platform provided by the Assembly to have open discussions and dialogue with our partners and residents. It also allows us to use the feedback to inform our team and be reflected in our future work.'

Shannon Katiyo, Director of Public Health, Directorate of Adult Social Care and Public Health, Richmond and Wandsworth Councils



Share your views with us

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

Website: www.healthwatchwandsworth.co.uk

Telephone: 020 8516 7767

Email: information@healthwatchwandsworth.co.uk

Long Term Plan

#WhatWouldYouDo

The Government committed to increase investment in the NHS. The NHS published the 'Long Term Plan' in January 2019, setting out its key ambitions for the next 10 years.

Healthwatch launched a countrywide campaign to give people a say in how the plan is implemented in their communities.

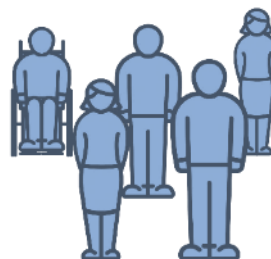
Local Highlights



More than **40,000 people** shared their views nationally with Healthwatch.



In South West London the views of over **1,000 people** informed regional plans.



Healthwatch Wandsworth discussed borough plans direct with **more than 180 people**.

Healthwatch across South West London and South West London NHS Health and Care Partnership collaborated to speak to local people about specific plans for our local services. We focused on asking people ‘What matters most to you’ when managing your condition and living your life, and how services can help you achieve this.

In each borough local Healthwatch investigated one of the following areas of care: cardiovascular disease (Wandsworth), crisis in mental health (Richmond), end of life (Kingston), outpatients (Sutton), diabetes (Merton) and respiratory (Croydon).

People told us the following is important:

- Information to know one’s own limitations and how to maintain a normal healthy life.
- Support in the community or closer to home (rather than hospital).
- Coping strategies when there is uncertainty of how a condition will develop.
- Mental health support, which needs to be easy to access.
- Better information and efficiency of administration to reduce stress and complicated health care journeys.

Healthwatch Wandsworth spoke to 27 patients with cardiovascular disease at St Helier and St George’s Hospitals and

received 5 online survey responses. Patients highlighted the areas listed above and:

- The impact on work, money, family and relationships.
- The need for rehabilitation or exercise classes are needed to help longer term well-being.
- The need for guidance on self-management of their condition.

We reported what people told us directly to decision makers at a clinical conference, so that people’s views helped to inform their long-term plans.

[Healthwatch] contributions to the Clinically Led Conference made sure the patient voice resonated, and was heard by all those clinicians and professionals.’

Charlotte Gawne, Director of Communications and Engagement South West London NHS Health and Care Partnership

Last year, Healthwatch Wandsworth spoke to **more than 150** local people about the **Wandsworth and Merton Health and Care Plan**. This year we made sure this informed local plans and use this to inform our discussions at important forums like the Health and Wellbeing Board and the Health + Care Wandsworth Board.

Helping you find the answers

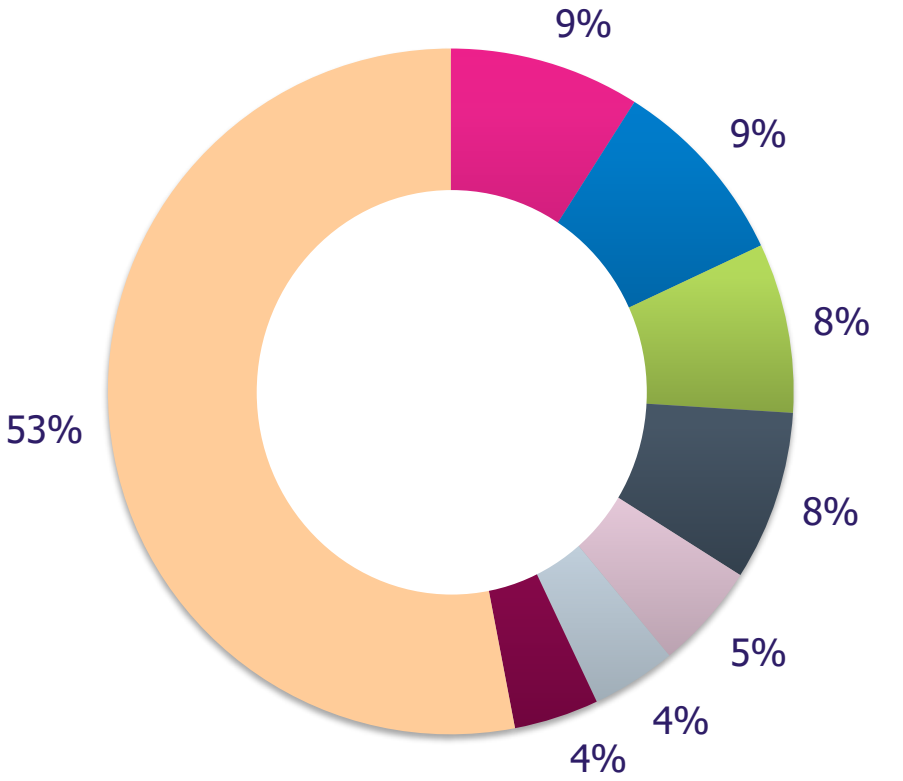


Finding the right service can be worrying and stressful. Healthwatch plays an important role in helping people to get the information they need to take control of their health and care and find services that will provide them with the right support.

This year we helped **over 165** people get the advice and information they needed by:

- Providing information articles on our website.
- Answering people’s queries about services over the phone or by email.
- Talking to people at community events.
- Promoting services and information that can help people on our social media.

Here are some of the areas that people asked about.



- GP Services
- Mental Health
- Podiatry
- St. George's Hospital
- Dental Services
- Sexual Health Services
- Social Care
- Other

Spotlight on Podiatry: The changing landscape of health and social care

The health and social care landscape is one that is continuously shifting – whether it be due to directives from central government or the changing needs of an ever growing population.

A switch in provider can have a significant effect on the care people receive. This was the case when **Healthshare Wandsworth** took over podiatry from St George's Hospital.

Over the year, and after this change, we received **12 requests for information** and **2 people raised concerns** about the

podiatry service in Wandsworth. Patients who contacted us were mainly trying to contact Healthshare Wandsworth about an appointment, or needed help contacting them.

We signposted people to Healthshare and logged the queries and concerns people had about the service.

We kept **Wandsworth Clinical Commissioning Group (CCG)** informed about the issues patients were having.

I gave permission to transfer my electronic healthcare records to Healthshare Wandsworth and was told I would be contacted for a new appointment in the near future...and I am still waiting'.





GP Services:

GP services continued to be a common subject of queries we received. During the year we helped **more than 15 people** to access the support and information they needed, relating to their local GP services.

Queries ranged from concerns over patients’ medications being stopped, being removed from a GP’s register after moving home, and patients seeking information on how to make a complaint.



Share Community - Accessible Information:

Share Community is an organisation that supports adults with disabilities. We discussed ways its students could participate in our work. It asked us to adapt our **Health and Social Care Survey** into an Easy Read format. So we produced and shared this with it and the students shared their feedback on local services. This helped us understand the needs of adults with disabilities.



Coronavirus – Unprecedented Times:

The reporting year ended with the start of the coronavirus pandemic. We were contacted by people offering their support as volunteers, and vulnerable people seeking information on services during the lockdown. As well as signposting them to relevant national and local advice, we increased the flow of information through our website and newsletters, and started planning for a survey to understand people’s experience of the crisis.



Contact us to get the information you need

If you have a query about a health or social care service, or need help with where you can go to access further support, get in touch. Don’t struggle alone. Healthwatch is here for you.

Website: <https://www.healthwatchwandsworth.co.uk/>

Telephone: **020 8516 7767**

Email: information@healthwatchwandsworth.co.uk

Volunteers



This year we were supported by 34 volunteers who helped us find out what people think is working with services in their communities, and what people would like improved.

What our volunteers do:

- Raise awareness of the work we do in the community.
- Visit services to make sure they're meeting people's needs.
- Collect people's views and experiences which we use in our reports.
- Support our day-to-day running.

Sara Turner, Enter & View (E&V) Representative



Sara was a clinical psychologist in the NHS where she was interested in promoting service improvements, especially for groups of patients whose voices were often not heard.

She was interested in the Enter and View team's work, speaking directly to patients and carers to see services from their viewpoint. She has now been a member of the team for more than seven years and has taken part in visits to services for older people both in hospitals (St George's Hospital and Springfield) and in the community (care homes, extra-care settings and services for people with learning disabilities). She was also part of

the team that visited Wandsworth Prison. This year she was involved in the CMHT and the Departure Lounge visits mentioned earlier in the report.

Sara always enjoys the E&V visits, especially talking to service users and carers. 'I have found it very positive being part of a team which works well together and is committed to high standards for visits and reports.'

Sara has been impressed by the positive responses of service providers and commissioners to E&V reports and the way that some have risen to the challenges of improving their services.

'The support from the Healthwatch manager has been excellent and very important for getting the project done.'

For those thinking of becoming a volunteer, she says it is a 'rewarding experience'. Healthwatch respects its volunteers and 'does not ask more of them than they can give.' There are lots of different roles, from being part of the E&V team, which works quite intensively on a project, to doing background research and being part of the outreach work.



Volunteer with us

Are you feeling inspired? If you are interested in volunteering, please get in touch with us.

Website: www.healthwatchwandsworth.co.uk

Telephone: 020 8516 7767

Email: enquiries@healthwatchwandsworth.co.uk

We could not do what we do without the support of our amazing volunteers. We are proud to welcome three new Committee members elected at the Healthwatch Assembly in March 2020.



Charlotte Langley

'I want to serve as a member of the Healthwatch Committee as a result of my experiences, and that of living in a One Housing Hostel.'

I have worked at two NHS Foundation Trusts, Guy's and St. Thomas' and The Royal Surrey County Hospital and lived in Wandsworth for many years.'



Penny Oakley

'I was born in Wandsworth and have spent most of my life in and around the Borough. My teaching career was spent in Wandsworth primary schools and my final position was as Deputy Head and SENCO at a large school.'

Having volunteered for Healthwatch for over a year, I look forward to being a committee member.'



Sarah Forrester

'I have lived in Wandsworth for 40 years and have personal and professional experience of local health services. Working both in health and the Local Authority with families and children has given me a good understanding of the diversity of the community and inequalities in health outcomes in the area.'

I hope my experiences in delivering and commissioning health and care services will be useful to Healthwatch and welcome the opportunity to be involved.'

A special thanks to all of our wonderful volunteers:

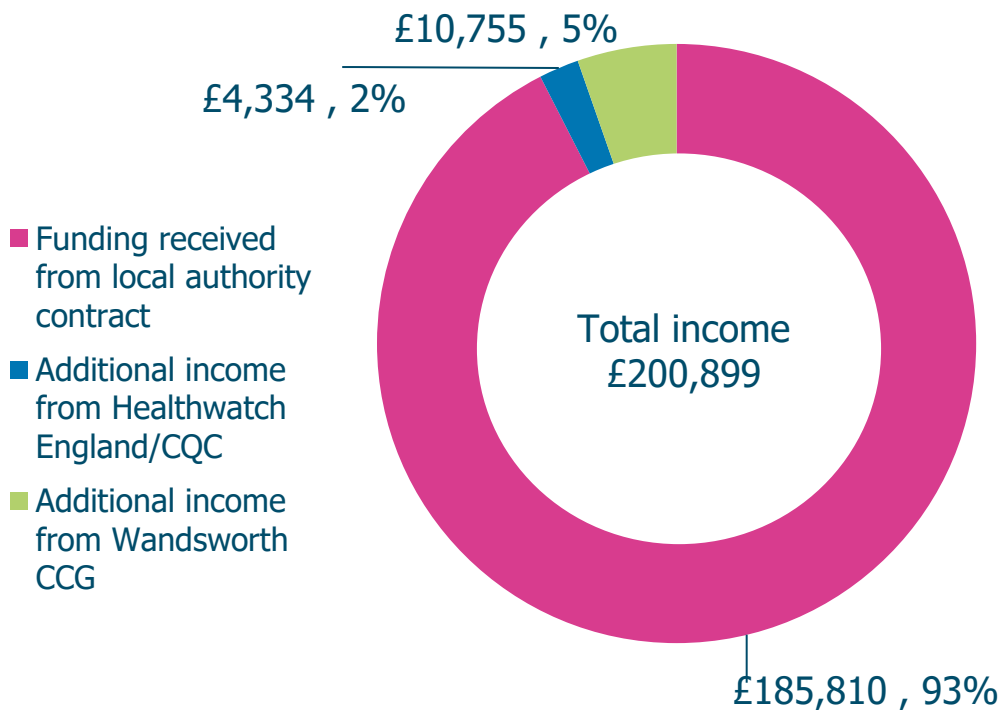
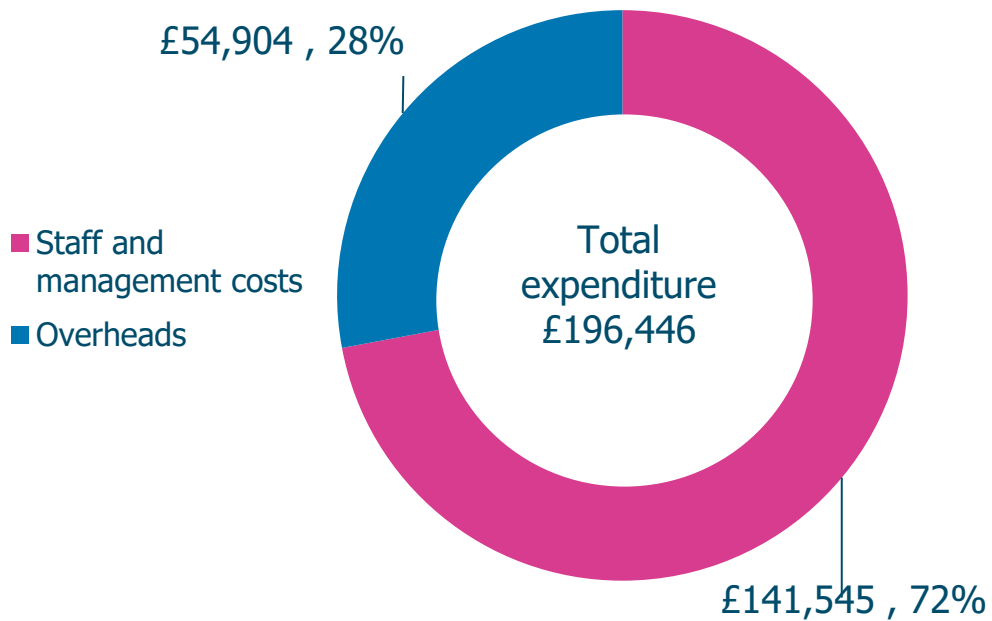
Avril, Brenda, Caroline H, Caroline N, Catherine, Charlotte, Cherill, Colleen, Dominic, Donald, Donna, Donovan, Elizabeth, Francesca, Harriet, Jahan, Jamie, Jeremy, Jummy, Kabeh, Lisa, Martin, Michelle, Mike, Nada, Ni'mah, Paul, Pearlina, Penelope, Rebecca, Sara, Surriya, Stephen, Teresa, and Zenobia.

Finances



We are funded by Wandsworth local authority under the Health and Social Care Act (2012). In 2019-20 we spent £196,446.

Please note that these figures, at the point of writing this report, remain provisional and may be subject to amendment after financial audit.



We also received a donation of IT equipment. This contributed to a saving on in year expenditure and we estimate that it could be equivalent to around £7,500.

Our plans for next year



Each year we set our priorities based on what local people tell us is important. As we and the health and care system adapt to added challenges of coronavirus, and changes are made to services, we need to hear what works well and less well for local people.

Looking ahead

When the coronavirus lockdown began we had already started analysing what local people had told us in the past year to decide our new priorities. We reviewed this in light of coronavirus and found many of the same topics were still important to focus on, but with a slightly different emphasis.

How we tackle these topics will be challenging as the world and health and care services changes around us. We need to respond to organisational changes in the NHS (in April 2020 a single [SWL Clinical Commissioning Group](#) and [SWL Integrated Care System](#) were created), while keeping our primary focus on the specific needs of Wandsworth residents.

Our future priority topics include:

- Changes to how health and social care is delivered and how people access it, particularly the use of technology.
- Discharge and follow-up support.
- Immunisation, including MMR.
- Children and young people's mental health.
- Perinatal mental health.

We will need to do things differently by:

- Providing information about access and choice of health and care – with more regular updates to the information.
- Seeking people's views about their needs and experiences of health and care during and in the aftermath of the coronavirus pandemic.
- Finding new ways to hear from people.
- Working with our NHS and council contacts to ensure that what we hear from people quickly influences changes.


See more in our [business plan](#).

Impact

We have a number of Key Performance Indicators. These mark our progress in speaking to local people, understanding and reporting their needs, and making recommendations to decision makers, see Appendix 1.

Measuring the impact of Healthwatch is important but difficult. We aim to work with both the community and decision makers to ensure that:

- People have a voice in designing and improving services.
- Areas for improvement are identified.
- There are short and long term changes in practices, procedures, staff training and more.
- Decision makers understand priorities and concerns of local people.

 Thank you to everyone who has helped us in our work this year. I hope you and others will continue to support us and the community we serve.'



Sarah Cook, Healthwatch Wandsworth Manager

Contact us

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Healthwatch Wandsworth is operated by Wandsworth Care Alliance (WCA). WCA is a Company Limited by Guarantee Registrar for Companies for England and Wales – Registration 5101120, Charity Number 1110178.

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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 need this report in an alternative format please contact us.

Appendix 1

Our KPI performance:

Community voice and influence

	Notes	Q KPI	A KPI	Q1	Q2	Q3	Q4	Annual
No. of people involved in feedback through engagement in consultations, surveys, outreach and enter and view	Includes the number of people involved in group sessions rather than individual feedback.	182	800	132	198	293	208	831
Number of patient and public engagement events - outreach/meetings/training/development/briefings	This includes meetings where representatives promote what we do and encourage people to engage in our work.	12	72	14	24	31	12	81
No. of non-exec members in attendance at meeting of Assembly		40		27	35	22	34	
Number of Enter and View visits	Includes exploratory visits and set up meetings where research and observations are made		8	2	2	8	2	14

Informing People

No. of unique visitors to website in the period		625	2500	1067	1055	1,217	1,460	4,799
Total no. of visits to website in the period		1031	4124	1118	1461	1,691	2,093	6,363
Number of social media engagements, including friends, likes and followers		150	600	388	277	325	206	1,196
No. of newsletters published (electronic/paper) in the period		2	8	2	2	2	4	10
No. of articles published in a local newspapers/newsletters or other organisation		3	12	2	4	4	4	14
Total number of members (non-organisation)		450	450	585	581	572	578	578
Total number of organisation members		160	160	226	228	233	229	229
Number of signposting contacts received	Email/online/face-to-face			103	130	124	103	460

Making a difference locally and strategic context and relationships

Number of reports, and feedback and recommendations sent to commissioners and providers	Includes Enter and View and Consultation reports Includes formal feedback/recommendations from HW/W e.g. comments on quality indicators and		12	5	2	2	3	12
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Relationship with Healthwatch England/CQC

No. of regional/national HW meetings attended in the period		2	8	4	1	2	2	9
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Operational indicators

Number of active and trained Enter and View and Healthwatch Representative volunteers	Annual figure - the number of people who have volunteered (including those who have left)	18	22	22	22	22	20	22
No. of Committees/Boards/Groups with LHW rep attending (snapshot measure)			26					55
No. of active volunteers excluding Enter and View and Healthwatch Representatives	Annual figure - the number of people who have volunteered (including those who have left)		10					13
Estimated number of volunteer hours contributed by volunteers over the year			2000					1669
Level of funds from alternative funding sources in			50000					18,254
End of year profile of membership			Report					Done
End of year profile of volunteers and representatives			Report					Done



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