

Business Plan 2020 - 2021

# Healthwatch Wandsworth



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# What is Healthwatch Wandsworth?

HWW is the independent champion for local people using health and social care services in Wandsworth. It was established in line with the provision of the Health and Social Care Act in 2012 and is in its eighth year of operation. The Health and Social Care Act stipulates that health and social care services have a legal duty to respond to our recommendations and requests for information from it. It also allows HWW to enter a service to speak to patients using its 'Enter and View' powers.

HWW is contracted under legal requirements by Wandsworth Council through the Wandsworth Care Alliance (WCA), a registered charity. WCA is the accountable corporate body for Healthwatch Wandsworth. More information about our governance, decision-making and our Board is on the HWW <u>website</u>.

HWW aims to:

- Promote and support involvement of the public in health and social care.
- Find out what local people think, what matters to them and to make sure that their views shape health and care services in Wandsworth.
- Drive up the quality of local services based on the input of local people about their experiences and needs.
- Provide information about local services and service changes and promote access to services and choice of services.

It has a unique position in the health and social care landscape as an independent organisation, listening to what people have to say, with an understanding of how health and social care works in theory and practice. Its core role is to ensure that local people in Wandsworth have the information they need, the opportunity to input their experience and views, and that their voice is heard by those responsible for their health and care services.

HWW speaks to people about topics confidentially and without suggesting that services will change in a particular way or that we are following a particular agenda, whilst we champion the perspective of local people without judgment. As an independent organisation located in the community we are able to speak to people regularly.

You can read about our past work and achievements in our Annual Reports.

# Summary of our plans for 2020/2021

#### Context and a different way of working

Each year we set out our priorities, based primarily on what local people have told us is important to them. This year we face quite exceptional challenges, due to the COVID-19 pandemic. As well as impacting many of our normal outreach and engagement activities, it is throwing up dramatic changes to how health and care services operate, raising major new questions about their future direction.

This means our plans for this year need to be particularly flexible and responsive, so that we ensure the voices of local people continue to be heard at a time of exceptional changes. For example, we are already doing more communications work than normal and more surveys. Without losing sight of longer-standing priorities, we need to focus on the new issues thrown up by the pandemic, for instance its impact on non-COVID-19 patients, groups particularly at risk, and other changes such as increased use of digital and telephone appointments in primary care and outpatients - an important change, but one which highlights the risk of 'digital exclusion'.

The pandemic also means that for at least the first half of the year - and perhaps longer - our own working methods have to change. Our staff must work from home, and meetings are already 'virtual'. Physical Enter and View inspections, and traditional Healthwatch Assemblies, are not currently possible. We therefore need to be creative and imaginative in finding new ways of reaching local people, including those facing social and other disadvantages. This means not just greater use of digital methods, but drawing on the positive initiatives, energy and networks which have flourished locally during the pandemic. Above all, we need to ensure that the concerns and issues of local people continue to be heard and understood by those who commission and deliver local health and social care services.

When the COVID-19 lockdown began in March we focused initially on collating and providing clear information for the public through our website and our newsletters. Sadly, we had to suspend all face-to-face work, including our important Enter and View programme. Instead, we have focused on making maximum use of remote and on-line methods. Early examples include:

- A major survey to hear from people about their experiences of health and social care during COVID-19.
- Support to our local Talking Therapies Wellbeing team, to test a new way of delivering support to local people online.
- Attending online meetings to understand the changes and experiences of local health and care services.

Health services look likely to change faster and more radically in 2020/21 than for many years. For example, there is far greater use of digital and telephone methods, restructuring to separate COVID-19 from non-COVID-19 patients, new initiatives to tackle backlogs of non-COVID-19 treatments and more.

'Our local NHS structures are also changing. Wandsworth Clinical Commissioning Group (CCG) has now merged into a single South West London CCG, covering 6 boroughs. And the CCG, together with SWL hospitals, community services, local authorities and others have been formally designated as the SWL Integrated Care Partnership (ICP). The main objective is to encourage greater collaboration and partnership across organisational and geographical boundaries. The 6 local Healthwatch have a shared 'seat at the table' at both entities, and we will need to adjust to these new opportunities and challenges. Nevertheless, our focus will remain on the needs of our local patients and communities, here in Wandsworth.

We need to continue to build relationships with NHS stakeholders so that we can make sure the needs of local people are heard and help shape how services develop.

"It becomes even more important than usual to listen to and involve patients, to find what works and what the new issues and challenges are. Some of these changes are being driven at national, London-wide, or South West London levels. But all patients are 'local', and it's essential to keep a strong focus on what this means for individuals and communities at the local level."

### Stephen Hickey, Healthwatch Wandsworth Chair

We will need to work differently. There will be opportunities as well as constraints, but our role remains the same. This year more than ever we will have to continually review where best to focus our work and may only be able to plan in detail for the short-term. There are some things we may not be able to do because of social distancing measures including, visiting health and care services and community groups to speak to people face to face, attending events in the community and holding our own face to face events.

### Our main objectives for the year:

- To provide information about access to and choice of local health and social care services updated more frequently as services change how they operate.
- To obtain the views of people about their needs and experience of local health and social care services during and in the aftermath of COVID-19.
- To adapt to new ways of obtaining the views of local people.

### Priority topics within health and social care that we aim to focus on will be:

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

We are a small team with finite resources, so we have a decision-making framework to ensure we focus our efforts on what will maximise delivery of our objectives. We will also consider options to take on resources additional commissions under the same criteria.

Please read the next section for more detail about what we intend to do and how we will do it.

# Our plans for the year

### **Objective 1:**

### To provide information and advice about access to and choice of local health and social care services updated more frequently as services change how they operate.

### How we'll do this:

Our website and newsletter will provide information to Wandsworth residents about:

- How to find local health and care services that can help.
- What to do if they are unhappy or unsure about services that are being or not being provided.
- Changes to health and care services.

We will provide a phone and email service people can contact for information and signposting about:

- How to find local services.
- What to expect from services and how to complain if unhappy.
- Helping service users take control of their own health care.

We will aim to promote Healthwatch membership so that people know how they can contact our information and signposting services and receive our communications as well as information about any events we may be able to hold.

We will contact community organisations to reach people who may not contact us otherwise.

### **Objective 2:**

### To obtain the views of people about their needs and experience of local health and social care services during and in the aftermath of COVID-19.

### We will gather the views and experiences of services by:

- Online surveys.
- Survey via social media.
- Discussing experiences by email or phone.
- Reaching communities that are now meeting in other ways e.g. neighbourhood Whatsapp groups.
- Online/virtual discussions primarily focusing on attending those held by community groups and potentially hosting our own.
- Researching what people have shared via other forums.

### **Objective 3:**

### To adapt to new ways of obtaining the views of local people.

Focus topics. In the short term:

- Changes to how health and social care is delivered and how people access it, particularly GP and mental health appointments – including use of technology
- Discharge and follow-up support
- MMR vaccination/immunisation generally

**Over the longer term:** 

- Children and Young People's Mental Health
- Perinatal Mental Health
- Social prescribing
- Longer term impact of COVID-19

#### We may need to return to speak to people about particular topics more than once to see how things have changed.

We usually visit community groups and people using health and care services to speak to them face to face via Enter and View and community outreach. This is currently not possible but we will explore other methods to do this. This should focus on people who face additional challenges to being heard or accessing services.

Usually we would hold our own events for people to share their views and for commissioners and service leaders to update people and discuss how they are changing or developing their services. It may be possible to circulate information via our newsletters or hold online events and meetings.

In the longer term we hope to find ways to speak to people face to face using social distancing measures.

### **Objective 4:**

### To promote involvement of local people in commissioning, provision and scrutiny of local services.

- Supporting local IAPT Service, Talk Wandsworth to reach people differently with their wellbeing workshops using our own online software.
- Engaging with stakeholders to learn about changes to service provision and emergency powers.
- Non-Covid services and impact on patients with long term health and care needs
- Understanding health and care support for residents in care homes and those receiving home care
- Encouraging evolving service changes to be informed by public and patient involvement.

### Our representatives will attend meetings and contact local services providers and service commissioners to:

- Encourage and support them to engage and consult with local people.
- Find out how local people can be involved.
- Share what we know about local people's experiences and needs.
- Encourage them to say how they are responding to recommendations and how they are improving.

This will include attendance at key statutory and other meetings such as the Health and Wellbeing Board, Overview and Scrutiny meetings and the Wandsworth and Merton Health and Care Board.

We maintain a membership list to send newsletters and e-bulletins to reach the community with information about engagement and involvement opportunities.

We will use our newsletters and other communication channels to promote opportunities for local people to be involved in and influence service design and commissioning.

We will explore how we can hold events for people to hear from and speak to, those who make decisions about health and care locally.

We will also use our own research or work with partners to find out local people's views, concerns and experiences of services to feed into information about a topic that local commissioners or providers are investigating.

#### **Objective 5:**

### Based on the above we aim to make reports and recommendations about how services could be improved. We will share these with local commissioners and providers as well as Healthwatch England and the CQC.

We will publish reports on views shared with us and will make recommendations for possible changes or improvements as well as highlighting good practice. Reports will be published and circulated via our communications channels and events. They will be circulated directly to commissioners, providers and regulators to influence their work monitoring services and service changes.

Our representatives will attend meetings and contact health and social care decision makers to discuss the views of local people, whilst understanding the health and social care context and the relevance of what local people are saying about how they are working or could be improved.

Our representatives will continue to ask commissioners and providers how they have listened to views local people have shared with us and those shared directly with them.

Our representatives will represent the perspective of local people in discussions with commissioners and providers about the quality of services and service change.

We will liaise with the Care Quality Commission and Healthwatch England about findings or issues they may need to investigate further locally or nationally

### Other operational.

- Produce an annual report.
- Review governance framework and self-assess ourselves; using the HW England Quality Framework.
- Map PPI across the borough.
- Explore new ways of working (technologies and collaboration with voluntary sector groups on issues relevant to particular patient or population groups).

# **Promotion and Communications Plan**

### Background

This year communications will be a major focus of our work and an important tool to help us reach people who are isolating or social distancing due to COVID-19. It remains unclear whether or when it will be possible to resume some of our traditional communications and engagement methods, particularly face-to-face engagement and meetings, conferences and assemblies. On the other hand there have already been some community conversations online and in social media. We won't have more resources so we need to be strategic about how we reach more people.

### **Our plan for communications**

Our website, electronic newsletter and circulating our surveys electronically will be important. Our plan to do more of this includes:

- Producing more frequent newsletters to provide up-to-date information and guidance on changes to services. E-newsletter every 2 weeks (compared to c.6 weeks normally) during early months.
- Increasing social media reach and improve interaction with local people by using social media networks and influencers, connecting with other groups on social media to tap into their existing networks.
- Circulating links to our newsletter in more places and promoting becoming a member so people receive our news.
- Press releases.
- Working with other WCA projects to reach local people in a joined-up way.

Our staff and volunteers who usually speak to people in the community will need to explore other ways (such as using online events and the telephone) and in time we hope to speak to people face to face within social distancing guidelines and when safe.

We will need to use contacts and networks in the NHS, local authority and the voluntary sector to reach people.

## Resources

#### To deliver our programme we rely on 3 main resources:

- Financial in 2020-21 we expect our contract income to remain the same as 2019-20. Additional project funding may be obtained where it fits our aims and objectives but goes beyond our planned work.
- Professional staff team c3.3 FTE (full time equivalent) dedicated staff resource plus senior management and back office support as well as input form the wider WCA team, where possible and appropriate.
- Volunteers We currently have about 30 volunteers. A vital augmentation to the staff team for achieving current and planned levels of activity, including but not limited to; undertaking a wide range of roles ranging from speaking to patients, during Enter and View activity to helping write our reports.

# How our work will make a difference

We will use the insight we gather from the public to make the case for improvement. However, demonstrating impact is a challenge and not always straightforward because our achievements depend on how far our evidence or recommendations are acted on. Sometimes this can be immediate, sometimes it can take time to see change. As a small organisation, working with a range of major public services, we rely ultimately on our ability to influence and inform, based in turn on our understanding of the views of patients and service users. We must balance our independence and role in holding the system to account with acting as a critical friend and working constructively with health and care decision-makers.

We therefore aim to build constructive working relationships with local health and care leaders, to ensure we keep up to date with what is happening in health and social care and so that we can continue to raise and champion the views of local people.

Our impact will be felt in the following ways:

- We ensure that service commissioners and providers are constantly reminded of the importance of engaging with patients and service users in all their activities. By our presence at key local decision-making fora, including the Wandsworth Health and Wellbeing Board, the Wandsworth Oversight and Scrutiny Committee, and key committees of the local Clinical Commissioning Group and major service providers, we ensure that the patient and service user perspective is not overlooked and that opportunities for public engagement and co-production are highlighted.
- Through our own regular communications and consultation exercises, and our input to the consultation and engagement exercises of others, we ensure that the public has access to important information, and are able to raise issues and concerns.
- By investigating particular services or issues in depth e.g. through our Enter and View programmes, or other targeted exercises - we throw a light on specific issues or areas of concern and make recommendations which we then follow up with the relevant commissioners and providers. Our intention is that, where recommended, service commissioners and providers will make changes to their practice including staff training and guidance and changes to how a service works.
- Service commissioners and providers make changes to their practice in the short term, and/or longer-term changes, such as staff training/guidance, changes to procedures or that services start to work with other organisations.

• Our work - and the input of local people in our work - has highlighted areas for improvement, challenged assumptions or provided reassurance. In some instances, the work will prompt further investigation and monitoring.

These impacts are not easy to measure - and specific service changes on the ground are almost always the result of the work of many people, including but not exclusively Healthwatch. Nevertheless, they are vitally important. Updates about the impact of our work will be available on our website, via our newsletter and our annual report.

#### **Our Key Performance Indicators:**

In addition to our broad statutory responsibilities and obligations, under our contract with the London Borough of Wandsworth we have each year a number of particular Key Performance Indicators (KPIs) against which our performance can be assessed. Our KPIs for 2020-21 (which pre-date the COVID-19 crisis) are:

- 800 People involved in feedback through engagement in consultations, survey's, outreach and enter and view
- 72 Patient and public engagement events outreach/meetings/training/development/briefings
- 40 Attendees at our quarterly events
- 8 Enter and View visits
- **2500 Unique visitors to our website**
- 4124 Total visitors to our website
- 600 Social media engagements
- 8 Newsletters published
- 12 Articles published in a local newsletter/on a website
- 450 Individual members
- **160** Organisation members

- 12 Reports, and feedback and recommendations sent to commissioners and providers
- 8 Meetings with the other regional/national Healthwatches
- 22 Active and trained Enter and View and Healthwatch Representative volunteers
- **10** Other active volunteers
- 2000 Volunteer hours contributed
- 26 Committees, boards, groups attended regularly

### 50,000 Funds from alternative funding sources

We also provide a report on the demographics of our volunteers and people who have been involved in our work where information is disclosed.

This year these KPIs may be affected by social distancing or other measures introduced as a result of coronavirus.

# Thank you

Thank you for your support. We look forward to working with local people and organisations in the coming months. If you would like to discuss any aspect of our work or contribute your views and experience, we would be very glad to hear from you.

# **Contact us**

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Address and contact details of the organisation holding the local Healthwatch contract as of 31/03/2020.

Contact number Email address

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 in an alternative format please contact us.

Note: Please include your charity or company number here. © Copyright (insert local Healthwatch name) 2020

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