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## Business Plan 2021 – 2022

# Healthwatch Wandsworth

# Contents

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What is Healthwatch Wandsworth	Page 3
Summary of our plans for 2021/22	Page 4
Our plans for the year	Page 6
Promotion and communications plan	Page 10
Resources	Page 11
How we make a difference	Page 12
Thank you	Page 14
Contact us	Page 15

# What is Healthwatch Wandsworth?

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Healthwatch Wandsworth (HWW) is the independent champion for people using health and social care services in Wandsworth. Health and social care services have a legal duty to respond to our recommendations and requests for information<sup>1</sup>. HWW can enter a service to speak to patients using its 'Enter and View' powers. In this way we aim to strengthen the voice of local people in how their services are provided.

HWW is contracted by Wandsworth Council through Wandsworth Care Alliance (WCA), a registered charity and the main voluntary sector infrastructure organisation in Wandsworth. This strengthens HWW through the sharing of skills and resources and the synergies between Healthwatch and WCA's other major projects on mental health and support for the voluntary sector generally across the borough. WCA is the accountable corporate body for Healthwatch Wandsworth. More information about our governance, decision-making and our board is on the HWW [website](#).

The role of HWW is to:

- promote and support involvement of the public in health and social care
- gather views about what local people think, what matters to them and to make sure that their views shape health and care services in Wandsworth
- monitor and 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.

HWW 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 regularly speaks to people in the community about topics confidentially and we are non-political. We champion the perspective of local people without judgment and we

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<sup>1</sup> Health and Social Care Act in 2012

work with health and social care systems and their leaders regularly to make sure they respond to what people are saying.

You can read about our past work and achievements in our [Annual Reports](#).

# Summary of our plans for 2021/2022

## The bigger picture

The arrival of the Covid19 pandemic last year created unprecedented challenges for us and those we work with both at the individual level and for the health and care system as a whole.

These challenges are likely to continue and will include:

- a continuing need to respond to the threat of Covid19 and evolving measures to keep people safe
- the need for recovery and evolution of services to work through a backlog and to do as much as possible, sometimes in new ways, to overcome this challenge
- to respond to challenges around mental health wellbeing because of the impact of the pandemic
- to ensure no one is left behind due to inequalities in access to services.

Each year we set out our priorities using our knowledge about what is important to local people. Our work this year, like last, will be heavily influenced by the pandemic and the major challenges it has raised. We will again need to be flexible and respond to the situation as it evolves.

The way we work will continue to evolve to meet the circumstances and to provide opportunities to involve people in our work. We will continue to work from home but will gradually explore how to employ the benefits of working with people online, whilst trying to find safe opportunities to work face-to-face with our community when it is possible.

This past year has brought many issues and challenges into much sharper focus, not least the impact of inequalities and the way different parts of the community have been affected by the pandemic. The need to engage actively and openly with all parts of the community has become more important and pressing than ever. Healthwatch represents a key vehicle to promote this, to ensure everyone has the opportunity to voice their experiences and views on how things should develop and change. We aim to play a role in amplifying this collective voice as your local health and care champion.

The NHS organisational structures are also expected to change this year, culminating in the creation of a statutory Integrated Care System (ICS) for South West London in April 2022. This will bring a new way of planning and delivering services. We will continue to press the need for patients, service users and communities to retain a strong voice at every level.

Last year we also completed a self-assessment of how we work using the Quality Framework designed by Healthwatch England. We will be using this to inform our work and focus on areas we can improve how we operate.

## **Our main objectives for the year:**

Each year we set priority themes to guide our work to keep us focused on what matters to local people.

We've reviewed all of the experiences people have shared with us between April 2020 and March 2021. We discussed a range of emerging issues at our March Assembly. These included communications between services and single points of access and the impact of the pandemic on mental health. Many people wanted to know how managing life, including health and care, will evolve into some kind of normality.

### **This year we aim to focus on the following objectives:**

1. Championing the voice of patients as services respond to the pandemic, building on what people told us last year and ensuring they continue to be involved in shaping services.
2. Listening to carers, people with LD and dementia about their needs and experiences, and the impact of the pandemic for them.
3. Working with minority and disadvantaged communities to identify if there are any issues they face in accessing services and new initiatives to address them.
4. Promoting communications between services and central access points to services.

We are a small team with finite resources, so we have a decision-making framework to

ensure that we focus our efforts on what will maximise delivery of our objectives. We will also consider options to take on additional commissions under this 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:

**Championing the voice of patients as services respond to the pandemic, building on what people told us last year and ensuring they continue to be involved in shaping services.**

### How we'll do this:

The pandemic has led to major challenges and changes in the way services are delivered. We will continue to draw on our recent reports and the experiences people have shared to:

- ensure that decision makers plan services according to what people have said
- monitor the changing situation closely and speak further with people about any significant new changes as they emerge
- feedback on how decision makers have taken their views and perspectives into account.

For example:

- following up findings from our work last year about the greater reliance on digital technology and the implications for patients and residents
- working with partners as changes to discharge arrangements for people leaving hospital more quickly are further refined and embedded longer-term

- monitoring longer-term impacts of the pandemic as they emerge, including 'long covid', waiting times for non-covid conditions and championing the voice of patients as the issues are identified and addressed
- drawing on the synergies between our work and the mental health work of WCA's voicing views project.

We will return to some of the groups we have spoken to, to let them know what decision makers have said and to see if experiences have improved.

We will publish on our website updates about progress.

### **Objective 2:**

## **Listening to carers, people with LD and dementia about their needs and experiences, and the impact of the pandemic for them.**

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

- Online surveys.
- Survey via social media.
- Discussing experiences by email or phone.
- Attending meetings and events held by community groups and hosting our own to hold online discussions and face-to-face discussions when the situation allows.
- Researching what people have shared via other forums.

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 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.



**Objective 3:****Working with minority and disadvantaged communities to identify if there are any issues they face in accessing services and new initiatives to address them.****How we'll do this:**

We will reach out to community groups to build new relationships, raise awareness of our work and work with them as an independent organisation to strengthen their voice from within the health and care system.

We will work with WCA voluntary sector, mental health and LGBT projects to reach and engage with local voluntary groups and local communities.

We will build on the considerable engagement work last year between the NHS, voluntary sector and HWW on the vaccination programme to ensure people are involved in health and social care developments.

Our staff and volunteers will continue to encourage decision makers to seek views from local communities and to co-design their services, for example in the work of the Ethnicity and Mental Health Improvement Project which will begin this year.

We will employ methods mentioned under objective three to collect experiences.

**Objective 4:****Promoting communications between services and central access points to services.****How we'll do this:**

We will speak to people who use key services that provide an access point for people with a number of health and care needs. This may be via surveys and interviews and 'mystery shop' exercises.

The focus will be on how a person's care is co-ordinated and their journey between services. Digital access may also be considered under this objective.

Where there are useful services or resources to help people co-ordinate and manage their care, our website, newsletter and events will promote these.



Our staff and volunteers will encourage health and social care services to work together and focus on how they communicate with their service users and how they help them coordinate their care. This could be at a large scale as we discuss with them plans for an Integrated Care System, or at a smaller scale relating to specific types of service.

We will also promote the importance of designing services to include involvement of carers and will promote the Make Every Contact Count learning module that raises awareness about carers issues to as many services as possible.

## Other key operational challenges and objectives.

- The NHS structures in Wandsworth and across South West London are expected to change, notably with the SWL Clinical Commissioning Group (CCG) expected to disappear and be replaced in April 2022 by a new Integrated Care System (ICS), with other changes at local level. Details are not yet clear, but a crucial challenge for HWW in 2021/22 is to ensure that local service users, patients, carers and communities continue to have a strong voice at every level.
- We will produce an annual report.

Having assessed ourselves using the national Quality Framework for Healthwatch we will also focus on the following areas.

- Focus on building relationships in the aftermath of the challenges of the pandemic, for example, with the local authority
- Demonstrating our independence and holding services to account
- Reviewing staff and volunteer roles and support
- Volunteer recruitment and involvement, which was constrained by the pandemic, especially our Enter and View visits to speak to users of local services
- Ensuring our staff and volunteers are able to review and demonstrate our impact
- Ensuring effectiveness of remote working for the first few months of the Healthwatch year. This will involve working with providers closely to be able to speak to patients/service users. We hope to re-start some face-to-face work at some point but this will involve careful consideration and planning.
- Make sure our staff and volunteers are up-to-date on awareness of issues relating to diversity and equality of opportunity.
- We will continue to look at opportunities to create more links and feedback loops in the community as we review staffing and volunteer roles.
- We will review the Healthwatch England Research Governance Framework to see how this might inform our work.
- We need to implement a feedback survey to understand what happened once people have contacted our Information and Signposting Service and have been given information by us.

- We will also explore additional equipment and technology that may be needed for new ways of communicating with people digitally and face-to-face.

# Promotion and Communications Plan

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## Background

Communications will continue to be a major focus of our work and an important tool to help us reach people to ask them about their experiences and to let them know they can contact us if they need help finding health and care services.

We will continue to build on online methods used over the past year and will aim to consider how we can begin to resume some of our more face-to-face engagement methods. We have reached more and different audiences using online methods, so we would like to blend our use of technology with other more traditional communication methods. This will have to be done strategically to enable us to most effectively use our resources.

## Our plan for communications

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

- returning to 2 newsletters per quarter (one longer one and a shorter bulletin) to provide up-to-date information on services
- promoting Healthwatch Wandsworth Membership and involvement in our work, with more people signing up to our newsletter
- 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 press releases and links to our newsletter in more places and promoting becoming a member so people receive our news
- developing networks and relationships with people who work in communications to increase our reach and ensure we have up-to-date information about local services and ways people can be involved.

- working with these networks to:
  - o develop a communications and engagement about accessing services and positive steps people can take to manage wellness/preventing illness.
  - o encourage sharing of opportunities for digital/non-digital communication resources.
  - o support South West London Listens' outcomes to support mental health wellbeing.
- working with other WCA projects to create a joint communications strategy.

Our staff and volunteers will continue to use remote ways of speaking to people in the community but will look for opportunities to return to some work speaking to people physically located in the community when safe and feasible.

# Resources

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

- Financial - in 2021-20 we expect our contract income to remain the same as 2020-21. 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 from 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.
- We will also explore additional equipment and technology that may be needed for new ways of communicating with people digitally and face-to-face.

# How our work will make a difference

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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 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 visits 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 continue to be affected by social distancing or other measures introduced as a result of coronavirus.**

# Thank you

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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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