



## ANNUAL REPORT

May 2013 to March 2014

## **ANNUAL REPORT 2013-2014**

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## **ANNUAL REPORT 2013-2014**

### **1. INTRODUCTION**

The first Annual Report for Healthwatch Portsmouth (HW Ports) is published in accordance with the statutory requirements. The report covers the period 1<sup>st</sup> May 2013 – 31<sup>st</sup> March 2014<sup>1</sup>. A key role of local Healthwatch organisations is to promote a local consumer voice to ensure that the views of the public are heard and fed into improving local health and care services. The primary task of local Healthwatch organisations is to gather evidence from the views and experiences of patients, service users and the public about their local health and care services and to provide feedback based on that evidence.

Central Government funding for the establishment and functioning of Healthwatch Portsmouth was passed to Portsmouth City Council (PCC) who contracted Learning Links (Southern) Ltd<sup>2</sup> as the service provider. Learning Links provides office premises, HR, Finance and Technical support together with Training functions. In addition a formal partnership between Learning Links is contracted with the University of Portsmouth (UoP). Healthwatch Portsmouth also provides and Advocacy Service for individual local healthcare issues.

### **2. STRUCTURE**

#### **2.1 Governance**

The routine activity of Healthwatch Portsmouth is steered by the Healthwatch Board (HWB) consisting of eight members of the public, one adviser from PCC, one advisor from Learning Links and one from UoP. In addition the HW Manager acts as Secretary and Board Administrator. The role of Chair currently rotates between the 8 Board Members who each take turns in the role for a 30 day period.

An independent democratic election for the current Healthwatch Board was agreed by the interim group and given go ahead to commence on 11th November. The elected Board was established as a group at the end of January 2014. Up until this time an Interim Healthwatch Board fulfilled the role. Some members of the Interim Board were elected to the full HWB in December 2013.

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<sup>1</sup> Delay in commencing due to contractual negotiations with local authority

<sup>2</sup> 3 St Georges Business Centre, St Georges Sq., Portsmouth, PO1 3EY

## **2.2 Staffing**

There are three paid members of staff; one full time Manager, one part-time Advocacy Advisor and one full time Information Hub Officer. During the beginning of 2014 there have been significant staff changes with the host organisation providing project continuity through an established management structure.

## **2.3 Voluntary Support**

Healthwatch Portsmouth was contracted to deliver 296 hours of voluntary support over the past 12 months. Taking into account all of the voluntary input we have achieved 1727 hours using a series of activities ranging from a regular volunteer administrator, through to Community Researchers and Portsmouth University Students engaged on market analysis projects. Members of the public and lay people have been part of the Interim and Elected Boards using Healthwatch Portsmouth's governance guidance and training.

## **3. HW STATUTORY ACTIVITIES<sup>3</sup>**

The eight statutory Healthwatch activities have been delivered as follows:

Through regular engagement with the Clinical Commissioning Group and PCC Integrated Commissioning Unit ICU we have entered dialogue into their approach in the creation of a service user charter, leading to higher levels of engagement.

Healthwatch members and interim board members identified six priorities for the first year as: Integrated Care, the Dementia Pathway, Principles of Good Engagement, Raising Awareness, Review of the Francis Report and the Hearing Loss survey. Identifying these priorities led to the creation of a focused work plan and involvement from other agencies in our work.

Through our signposting phone line and website search tool we have helped 1399 people find local health and or social care services in Portsmouth.

Strong links established with all local provider trusts and commissioners, the regional quality surveillance group, and other local groups to promote patient feedback and engagement.

Healthwatch Portsmouth website has been recognised as outstanding compared to other similar sites leading to Portsmouth City Council approaching us to host more information on our website including the SCiP (Social Care in Portsmouth) database. This has led to a service directory for all health and social care services in Portsmouth listing approximately 600 services.

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<sup>3</sup> See Appendix 1

Healthwatch Portsmouth leads the way in development of our Community Research model and training. Learning Links sister organisation Training Links provided training to 36 people from Healthwatch Portsmouth, Healthwatch Torbay and Healthwatch Waltham Forest.

Healthwatch Portsmouth 'Hearing Loss Survey' was devised by a Community Researcher. Living with hearing loss herself, she decided to reach out to the general public and collect responses. The survey was taken to various community groups, meetings and conferences, as well as being promoted online through social media and the Healthwatch Portsmouth website. The purpose behind the survey was to gain an understanding of how people living with hearing loss live day to day, what can be done to help them, and what can be done to help the general public's view of hearing loss as a disability.

Our strong links with the University of Portsmouth gives us access to students and academics and adds a strong evidence base to our work. We have worked with 3 different student groups wanting to be involved with Healthwatch projects.

We have identified 5 trends in patient feedback that we have made PCC, CCG, CQC and NHS England aware of. These issues are now being investigated by these organisations after our input.

Healthwatch Portsmouth conducted focus group in conjunction with the CQC as part of their Themed Dementia Review. It was attended by twelve people who were either people living with dementia, carers and professionals. This information was being fed into a national report due to be published in July by the CQC.

### **3.1 Being Effective on the Health and Wellbeing Board**

Healthwatch's position has been taken up on the Health and Wellbeing Board with one advisor in regular attendance. We have been fortunate in having a Board representative who is both experienced in health and care issues and who has significant Board level experience and we have been pleased with the open access afforded to us by the Chairs and Board and officer support.

Healthwatch has valued the opportunity its seat at the Health and Wellbeing Board has provided both to connect to the strategic planning of health and wellbeing services within the City and the opportunity this also has provided to us to give some profile to our own activities and public engagement work.

During the course of the year we have routinely updated meetings of the Health and Wellbeing Board on our organisational development activities and the priority projects mentioned elsewhere in this report, as well as fed back updates from there to our own (Healthwatch) Board.

### 3.2 How local people's needs and experiences of health and care services have been obtained

The needs and experiences of local people have been gained via various agencies across Portsmouth. Many referrals are made by agencies such as advice Portsmouth, SEAP and via PALS at QA hospital. Direct feedback from services users had been gained and also regular surveys sent to Healthwatch members. Ten surveys have been sent out since June 2013, two of these were not digital surveys but undertaken while at outside events. Surveys that have been sent to service users are listed below.

Survey	Date	Responses
Putting patients at the Heart of Portsmouth	October 2013	11
Help us improve the way Local Voices communicate with you	August 2013	265
What is integrated care?	January 2014	3
Hearing loss survey	August 2013	100
Customer feedback survey	July 2013	16
Advocacy feedback survey	June 2014	8
Healthwatch Portsmouth feedback survey	May 2014	17
Healthwatch Portsmouth feedback	April 2014	25
Social media questionnaire	December 2013	8
		453

The scale of market research undertaken was wide ranging and covered proactive engagement in the street with members of the public, focus events at local external venues and surveys. A variety of survey methods were used such as "Survey Monkey" and direct e-mail. In addition Twitter and Facebook have been widely employed to collate people's views and concerns.

The following studies were undertaken:

- Principals of Good Engagement
- Dementia
- Integrated Services
- Francis Report
- Hearing Loss

**Principles of Good Engagement:** Health and Social Care services are of vital importance to local communities and the people of Portsmouth. With the current changes to service provision and the rising demand for NHS and social care, making sure local people are at the heart of all services and listening to them is particularly important. The basic principles are: Time, Targeted, Inclusive, Accessible, Clear and Simple and Responsive.

The survey was well received and HW intends to undertake the following action over the next 12 months:

- Develop a service charter that reflects what people feel is important to them
- Further develop the works and identify what groups have been missed
- Involve the community and voluntary sector in supporting these principles and for the Health and Well Being Board to endorse these principles

**Dementia:** Healthwatch Portsmouth has identified Dementia and a review of the current provision of support for those affected by dementia as one of its priorities for the year. Initial discussions between Healthwatch and Integrated Commissioning Unit led to this proposal and by working with partners from other academic institutions considerable effort will be brought to bear on delivering the study.

The study remains ongoing and a fuller report will be included in next year's Annual Report.

**Integrated Services:** The Healthwatch Website has recently incorporated the Social Care in Portsmouth (SCiP) Directory. The impact of this upon the public is that they now have a single point of contact to refer to when they are looking for information on health and social care services. We are looking to develop this further by offering a service review function in which members of the public can provide comments about their experiences.

**Francis Report:** An audit team of Portsmouth University students were commissioned by Healthwatch Portsmouth to investigate the Portsmouth's Trust response to the Francis Report. The audit focused on the complaint procedures currently in force in Portsmouth. The outcome of the study was extremely positive with 83% of those surveyed stating that they would use the services of Healthwatch in the future. The outcomes of this study will be considered by the HWB over the next reporting period.

**Hearing Loss Survey:** The Healthwatch Portsmouth "Hearing Loss Survey" was devised by a member trained to conduct Community Research. The survey was taken to various community groups, meetings and conferences as well as being promoted online through social media and the Healthwatch Portsmouth Website. A number of key findings were identified; in particular 81% of participants viewed hearing loss as a disability. In addition the survey produced a number of tips for dealing with people who have hearing disabilities. The impact of this survey is that the results will be given to the Health and Well Being Board.

### **“Help us improve the way local communicate with you” survey**

August 2013 we also undertook a non-digital survey going out to numerous events where members of the public were asked to fill out a short survey. Various community groups were also targeted including those with learning disabilities. In total the project gained 285 responses from both individuals and community groups and feedback given to the CCG.

### **3.3 Enter & View Activities undertaken**

None undertaken with this period.

## **4. IMPACT**

Concerns came in from members of the visual impairment community that services at the hospital Eye Department should address a number of issues. A meeting with the Macular Degeneration Society led to Healthwatch discussing the issues they were experiencing with the Queen Alexandra Hospital. A meeting was arranged with representatives of Portsmouth Hospitals Trust and the Society to discuss these issues further with two members of the group. As a result of this clarification was sought on discharge treatment and regular future meetings between the Trust and the Society have been set up.

Meetings took place with the Diabetes Research and Wellness foundation as a result of the Healthwatch presentation that was provided for the Diabetes Voluntary Group. The meeting was a great way for Healthwatch Portsmouth to engage with another underrepresented group in the city and Healthwatch continues to link with this group including attending the Annual Diabetes Wellness Day on the 21.06.14.

On the 12.03.14 the advocate met with members of the Portsmouth Deaf Forum. At This meeting many of the members relayed similar issues that they were faced with when dealing with their healthcare and the local NHS providers. As a result a letter was written to the Portsmouth NHS Trust and NHS England highlighting the particular issues that the Deaf Community faced when dealing with different NHS providers in the city.

Through our advocacy service people feel supported and can come and talk to someone who is independent providing good support and information.

There have been concerns over the waiting times at GP surgeries and complaints from patients having to wait for appointments for weeks. This has led to the local media picking up on the story and a week long campaign is due to take place in June.

Incontinence service has received poor feedback from some of our members. Have addressed this with the Carers Council and jointly we have asked for improvements from SOLENT NHS, feedback is positive after these issues have been raised. The five Health Watch Studies referred



to on Pages 5-6 indicate how we have engaged with the public to make an impact upon their principal concerns about Health Care in Portsmouth.

## **5. ADVOCACY**

NHS Advocacy are integrated and coordinated alongside the work of Healthwatch Portsmouth with the coordinator involved in many aspects of the day to day operation. The Coordinator works alongside the Information Hub Officer with regards to signposting members of the public. The Healthwatch Portsmouth website has a dedicated section on NHS advocacy and support for Portsmouth residents living in PO1 to PO6. This excludes Independent Mental Health Advocacy (IMHA) and Independent Mental Capacity Advocacy (IMCA), which are both provided By SEAP Advocacy.

There is an open-referral system in which organisations, agencies or individuals can contact Healthwatch Portsmouth for information and advice via website or telephone. We also hold regular drop-in sessions.

From July 2013 up to and including May 2014 Healthwatch Portsmouth has provided full Independent Advocacy support for 42 cases. The Advocate is in regular contact with the SEAP and Advice Portsmouth teams to avoid duplication and to refer cases that are not within the Healthwatch Portsmouth NHS Advocacy remit.

The Coordinator and the Healthwatch Manager met with the Beneficial Foundation for input into preparing easy read documents for the NHS advocacy support. The Advocate has had meetings with the Portsmouth NHS Trust's patient experience team and PALS to explain the Healthwatch Advocacy programme remit and eligibility criteria and in general has a good working relationship with the patient experience team. The Portsmouth NHS Trust Patient Experience Team is aware of the eligibility criteria for Healthwatch Portsmouth advocacy support and they refer clients onto Healthwatch that match the criteria.

Depersonalised figures from NHS Advocacy Support cases are recorded in the Healthwatch database. Healthwatch NHS Advocacy is integrated and coordinated with other advocacy agencies and providers as much as it can be in that the other advocacy providers in Portsmouth are aware of the Healthwatch Advocacy remit; parameters and eligibility criteria that we operate within. Healthwatch Advocacy is aware of the remit and eligibility criteria of the other advocacy agencies and regularly refers members of the public to these agencies.

The Coordinator has final meetings with all clients to debrief and gauge whether the client is happy with the levels of support they have received. In the 38 cases of advocacy support provided there was 1 client that was not happy with the level of support they received, this case did not become a formal complaint as the Healthwatch manager discussed the clients concerns and they were resolved. The 42 clients that received advocacy support completed an anonymous survey and all said that they would recommend the service to a friend or family member. All clients rated the Advocacy Service as either Excellent or good.

## 5.1 Advocacy Trends

Agency	<sup>4</sup> Total cases	Poor Care	Failure to Diagnose/refer	Poor communication	Violent patient Scheme
Portsmouth NHS Trust	17	16	7	11	
Solent NHS Trust	7	6	1	5	
Southern Health NHS Trust	1	1		1	
CCG	2				
Dentist Surgery	2	2		2	
GP Surgery	12	10	4	8	2
Care/Nursing home	1	1		1	

## 6. UNDER REPRESENTED GROUPS

Healthwatch Portsmouth has attended meetings with groups and open days for underrepresented groups that have led to relationships being built for future cooperation between Healthwatch and the underrepresented groups. Healthwatch has also used connections with Learning Links family support project Families Moving Forward to attend two events targeting young people and vulnerable families.

Two members of the Healthwatch Board, are involved with Portsmouth Beneficial Foundation and Portsmouth Disability Forum these relationships began with initial meetings that have a large role to play in influencing Healthwatch Portsmouth and how we communicate and interact with underrepresented groups in the city.

Of the 60 events that Healthwatch Portsmouth has attended, 21 have been events targeting people under 21 and/or over 65, disadvantaged or vulnerable people. These events have reached over 500 vulnerable people across Portsmouth and include meeting with organisations<sup>5</sup> such as:

- Portsmouth Disability Forum
- Stroke Association
- Hard of Hearing
- Families Moving Forward (children and disadvantaged families)
- Pompey Pensioners

<sup>4</sup> Total cases represent specific complaints against the NHS Agency. Some clients have complaints against multiple agencies.

<sup>5</sup> See Appendix 2 for full details

## 7. FUTURE PROGRAMME

The aspiration for Healthwatch Portsmouth during the next 12 months is that as the Elected Healthwatch Board becomes more established it will increasingly start to guide future activities. Overall guidance will be taken from the CCG Portsmouth 5 Year Strategic Plan where it's 4 priorities are:

- All to have access to the right health services as and when they need them
- People are treated with compassion, respect and dignity
- Health and social care services are to be joined up so that people only tell their story once
- To tackle the biggest causes of ill health and early death and promote wellbeing and positive mental health

The HWB will direct its focus through evidence based research with the public by agreeing it's Research Priorities and topics.

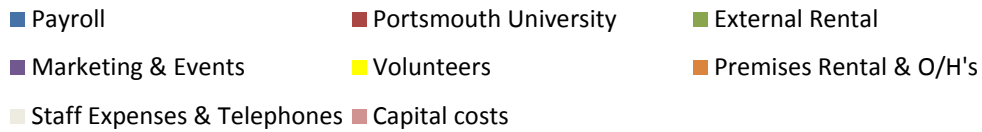
## 8. FINANCIAL SUMMARY

As a first year project Learning Links and Healthwatch Manager have prudently managed the budget and with changes in staff this has resulted in planned reallocation of resources that have been committed to a new staffing structure proposal to strengthen the team and enable Healthwatch Portsmouth to become even more engaged with members of the public.

### Summary - May 2013 - March 2014

<b>INCOME</b>	<b>£137,440</b>
<b>EXPENSES</b>	
Salaries, NI, Pension	£80,664
University of Portsmouth - Sub Contractor	£18,333
External rental	£457
Marketing & Events	£11,279
Training & Volunteers	£131
Premises rental & Overheads	£19,845
Staff Expenses & Telephones	£2,067
Capital costs	£4,664
<b>TOTAL ALLOCATED EXPENDITURE</b>	<b>£137,440</b>

## Health Watch Expenses May 13 to March 14



## 9. ADDITIONAL INFORMATION

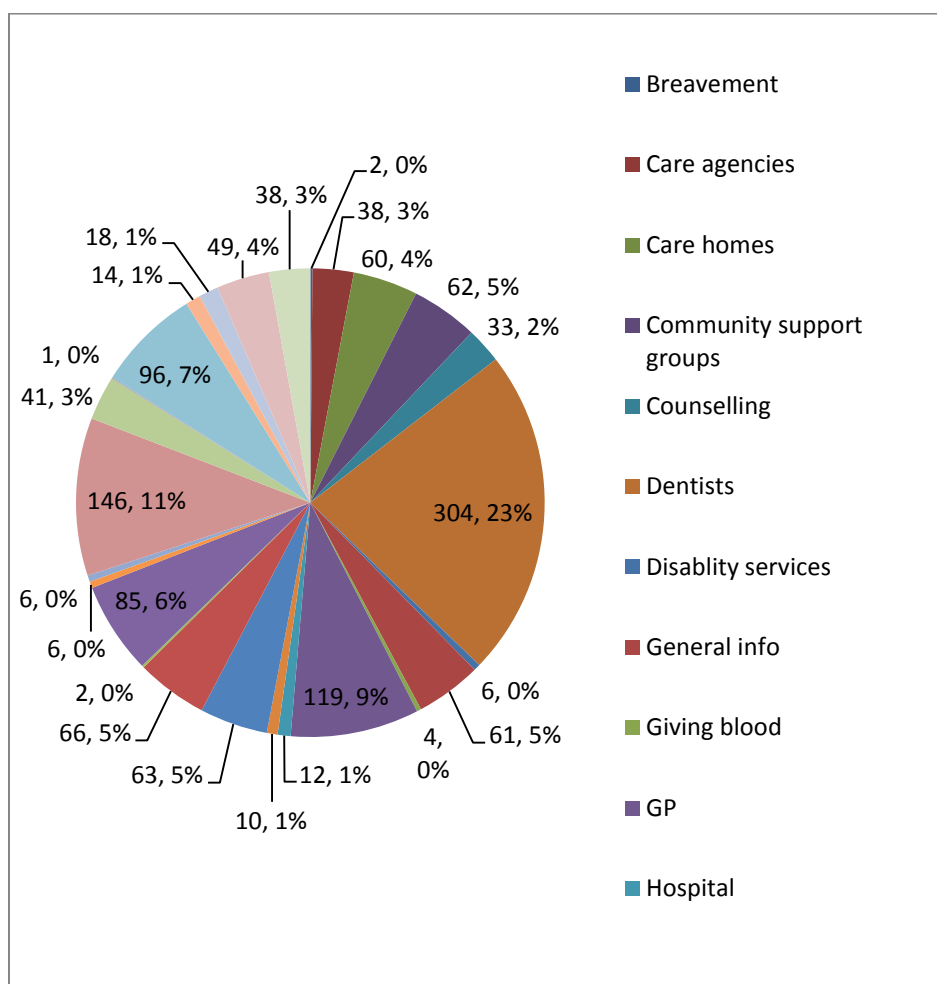
Healthwatch Manager is making initial contacts with Veterans groups in the area. There are approx. 20000 living in the PO1-PO6 and whilst fully supported in service there are challenges on leaving the service for them and their families.

### 9.1 Networking yearly review with 6 month figures for comparison, including social networking reports

Membership Type	Number	Difference 6 month report
Number of networked members	579	23% increase
Number of Community Researchers	51 (47)	8% increase
Number of Governance members	25 (19)	31% increase
Number of organisational members	61 (61)	The same
Facebook page likes	329 (302)	9% increase
Twitter followers	1578 (1418)	11% increase
Total network size	2623 (2317)	13% increase

## 9.2 Signposting Trends Identified

Hits on the Healthwatch website have increased significantly in the previous six months from 2842 in October 2013 to 9384 at the end of March 2014. Breakdown of services enquires via the Healthwatch website and direct enquires either face to face or from the telephone advice line. Overall dentist and GP made up 32% of all enquires, this includes referrals for new practices and complaints. Below is a chart showing the main information requests:



Complaints to PALS have been categorized under hospital. It has not been possible to categorise every individual enquiry, as some were not health related. Enquires listed as other are the following:

- Info on CCGs
- Info on what Healthwatch does
- Callers looking for other Healthwatch areas i.e. Hampshire
- Enquires about board meetings
- Educational/research requests
- Unrelated requests such as adult learning

## 10. CONCLUSION

The first year of Healthwatch Portsmouth has been primarily devoted to becoming an established organisation. It has had to adapt many of the functions of the previous LINK organisation and simultaneously develop and implement new ways of working. From a standing start it has made considerable efforts to become recognised by the people of Portsmouth as their single point of contact for health signposting and a consumer champion for Health matters. However Healthwatch Portsmouth has only just begun its mission and over the next twelve months we intend to ensure a greater involvement and rapport with people over health issues and concerns. This will be achieved by a continued engagement with the principal NHS Directing and Commissioning Bodies to ensure that service user concerns and issues remain at the forefront of all deliberations.

In particular the core pillars of Healthwatch Portsmouth's strategy remain:

**Remaining Independent:** We have been given independence by the law to challenge others to put people at the heart of what we do.

**Being Trusted:** We will continue our commitment to openness and transparency.

**Giving a Voice:** We will ensure that we provide a collective and powerful voice to the issues that really matter. In particular we will pay particular attention to those who find it hardest to be heard.

**Here for the Long Term:** Healthwatch has secured explicit cross party political support. This is important because it will ensure that HW is here to stay whatever happens in the electoral arena.

We look forward to the challenges that next year will bring.

Simon Haill

Healthwatch Portsmouth  
Manager

## **Appendix 1: The statutory activities of local Healthwatch:**

1. promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services;
2. enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved;
3. obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known;
4. making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England;
5. providing advice and information about access to local care services so choices can be made about local care services;
6. formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England;
7. making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues;
8. providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

## Appendix 2: Engagement Summary

Event	Number of Contacts	New Members
Careers Exhibition at the Pyramids	25	8
Voluntary Sector Network	12	
Transforming Adult Social Care	40	
Health and Well Being Board	30	
Cosham Community Day	35	4
City Centre Community Day	45	10
Palmerston Road Outreach Event	70	15
Stroke Association Group Meeting	20	1
CAP Power Hour	10	0
Central Library Outreach Event	30	2
Cosham Community Day	35	4
Learning Disability 'Know Your Rights' Event	10	0
Advice Portsmouth	6	0
Advice Portsmouth	7	0
Advice Portsmouth	4	0
Advice Portsmouth	2	0
QA Hospital – Outside Level B Restaurant	35	0
2 <sup>nd</sup> Year – Dental Hygienists	30	0
Mental Health Recovery Team South	20	0
PDF Health Overview Group	10	0
Dental Hygiene Students Year 3	40	0
SOLENT NHS AGM	20	0
Cascades	30	0
Beneficial Foundation Volunteering	10	0
HOSP Presentation	25	0
Mental Health Recovery Team South	20	2
NHS CCG Staff Event	50	3
Radiography Students	40	0
Putting Patients First Healthwatch Event	70	5
Association of Blind Presentation	30	6
Presentation to PHT Involvement Group	10	1
Presentation to Biomedical Students	50	35



Event	Contacts	Demographic	Main Issues
Putting Patients at the Heart of Care: NHS England Event	10	Professionals	Improving engagement across the NHS, more joined up consultation
Hard of Hearing Group	12	Disabilities	Communication with GPs' surgeries & poor reception service
Welcome at Haven Community Centre	10	Older People	Walk-in centre in Guildhall Square & the St. James minor injuries unit
Friday Club at John Pounds	15	Older People	Poor communication service about podiatry service in the city
Cascades Engagement Day	50	General Public	
Wednesday Club at John Pounds	13	Older People	Walk-in Centres
Southsea Friends	10	Older People	Waiting times at GP surgeries
Headway Carer's Group	10	Disabilities	Information for local services & assistance with making an NHS complaint
National Disability Day – Central Library, Portsmouth	3	Disabilities	
You Trust	3	General Public	
PHT Listening into Action Event		Professionals	
Monday Club at Paulsgrove	20	Older People	Appointment waits
Student Dental Presentation	50	Students	Changes to the NHS system
Focus Group Beneficial Foundation	10	LD	Support for a regular health-care professional & not a different one each time, more training for doctors dealing with LD people, & LD people treated as the patient
Macmillan Service Steering Group	4	Professionals	
Service User Charter Focus Group	3	Professionals – Voluntary Sector	Wanted to know more about who commissions what in Portsmouth & reminders for everything to be made simple & clear
Twitter Conversation		Professionals/General Public	How can local people influence priorities of the CCG
Tour of QA Hospital	3	Professionals	Struggle to maintain standards because of outside pressures including funding & problems in recruiting doctors
Engagement Meeting with Advocate Team at SEAP	8	Professionals	Mental Health services in Portsmouth being poor & not adequate. Information for people seeking support from advocacy groups
Patey Day Centre Consultation Meeting	30	Carers	Real Concern about city councils' consultation process
Waterlooville Macular Society Talk	20	Older People, Disabilities	Concern about GP surgeries in their local area & whether they would be overrun with new arrivals. Problems making GP appointments inside of 3 weeks
PDF Focus Group	18	Disabilities	Better Communication & big problems with wheelchair equipment store
Gosport BAME Network Healthwatch Presentation	6	Professionals	Wanted to know more about Healthwatch & relationships with bodies & agencies like the Health & Well Being Board & CCGs