

# Impact & Performance Report

## July - September 2020 (Q2)



# IMPACT: MAKING A DIFFERENCE

At the start of our report we are highlighting some of the topics where we have had most impact in the last quarter:

## Access to dental treatment

This quarter has seen increased demand for access to dental treatment from people who previously have not had NHS treatment locally. The Helpdesk Hub and locality Team gathered information as COVID-19 restricted dental procedures, but people reported difficulties gaining access to NHS dentists. We've produced an email template to cope with the demand for information and to manage expectations so that Healthwatch could signpost successfully.



We escalated concerns locally and continue to meet senior leaders to discuss the situation. At the same time, we pushed for this to be raised at a national level. We can report that this was taken seriously and Healthwatch insight was submitted to the Parliamentary Health & Social Care Scrutiny Committee. The committee's [Report](#) published at the end of September, states:



House of Commons  
Health and Social Care  
Committee

We further conclude that the delivery of dental services in England has been significantly hindered by the pandemic. This has been largely due to the need to protect both patients and staff from COVID-19 which has, in turn, presented financial challenges to both NHS and private dental practices. We welcome NHSE/ I's continued efforts to support the restoration of dentistry services in England. (Paragraph 67) 9. We are concerned that there does not appear to be a plan for the restoration of dental services in England.

**We recommend that Sara Hurley (Chief Dental Officer for England) sets out her assessment of the challenges facing dentistry services in England, and clarifies what steps will be taken to ensure dentistry services are able to continue to be restored to meet patient demand in the safest possible way whilst also remaining financially sustainable.**

As the Ferring dental practice hands back their NHS contract, we've used the questions local people asked when speaking to the commissioners to be able to get more [information](#) out to Worthing residents. In our discussions with NHS England (who commission High Street dentistry) we will explore further the plans for future services in this area.

## Information and advice

A Helpdesk team member rang Glenda\*, as she had called Healthwatch England. Glenda's husband has cancer and is on dialysis following removal of a kidney. The drugs he needs were originally prescribed by a Consultant in London and their GP has continued to prescribe them - until recently. Her husband has been told by the GP that they can no longer prescribe these. Glenda has spoken to the Dialysis Centre in Brighton, where her husband attends, and they have arranged with the pharmacy for the medication to be prescribed for three months and then it will revert back to the GP. Having listened to Glenda's experience and concerns, we advised her to get confirmation that this has been agreed and to come back to us if there were any further concerns. We followed up the conversation by email. Glenda now knows there's support if there are further problems.



## Support improvement for people with learning disabilities



We'd just like to commend you as our Healthwatch Advocate. When the Ombudsman case worker advised us that our case was very complex and we needed to open it up to incorporate the bigger picture of failings, we contacted Healthwatch. Having never had experience of this we weren't sure how you could help. Yes, we had been under enormous pressure ... and [it] was exhausting us. We met you, discussed our case and you immediately put us at ease by fully explaining how the system worked and suggesting a plan of action.

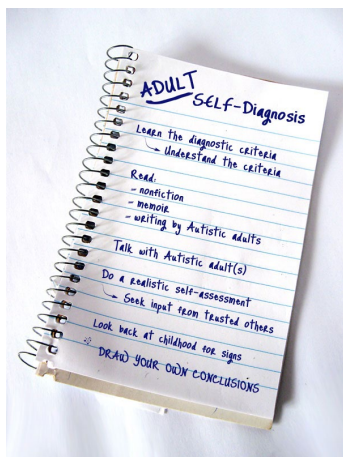
... Your experience has been incredibly helpful and although we have bombarded you with copies of various relevant emails and reports you have such skills in making sense of it and then producing an excellent letter of complaint saying exactly what we want. You've been able to pick out the most important points and word it as strong bullet points, so it stands out to be addressed. ... If we have a concern, we can also use you as a sounding block to thrash out thoughts...

Without the advocacy we would have had to give up with no justice for Denise\* or no voice to say when things are wrong and need improving or in our case accountability for poor practice for those with a severe learning disability.

*Mr and Mrs xxx, customers of the Independent Health Complaints Advocacy Service (IHCAS)*



## Delays in adult autism assessments - the impact on people's lives



We heard several stories suggesting long delays in the adult neurological services, meaning people who were referred for an Autism assessment were unable to get access to the support they needed. A resident shared the letter they received suggesting the current waiting time for an assessment is two years but due to COVID-19, the waiting time would increase.

One person needed extra support in their further education after leaving school, which cannot be accessed without a diagnosis. We did some research and were able to give this potential student support and advice so they could approach the college for assistance with potentially funding an assessment. Our team also made sure the person's referral to the neurological service was backdated (as the original one had been lost). Also signposted them to other organisations for support in the community.

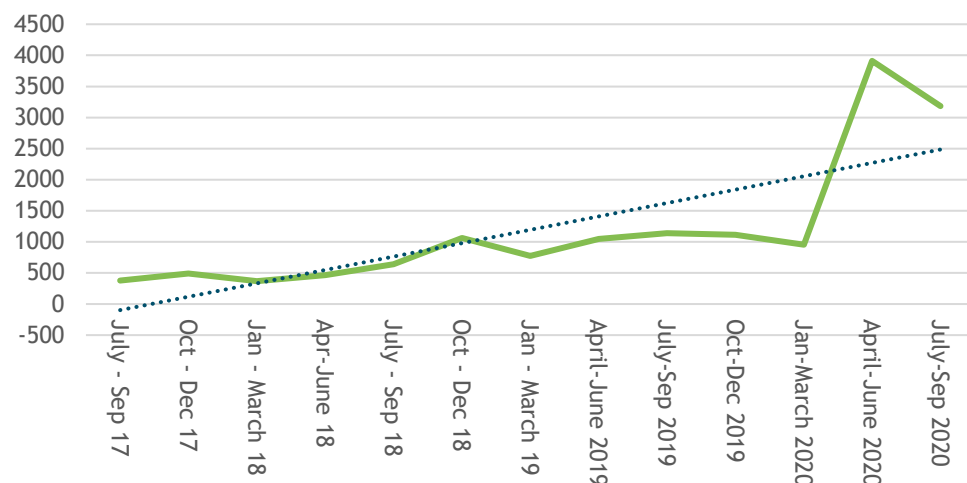
Going forward, we're working with community partners and the programme lead who's developing a Sussex Autism and Learning Disability Strategic Health Plan, to gather first-hand experiences to inform the strategic direction.



We are proud to showcase this, and other reports, on our website: [www.healthwatchwestsussex.org.uk](http://www.healthwatchwestsussex.org.uk)

## SERVICE AND ACTIVITIES

Total No. of stories on CRM and surveys  
(from Helpdesk & Local Team)



It has again been a busy quarter with some large scale engagement projects that have included surveys and semi-structured interviews. These included: Voluntary & Community Sector resilience and impact; gathering people's views and experiences of digital consultations; patient transport service experiences.

We recorded a total of **3,181 pieces of insight** more than double the same time last year.

Given the unprecedented nature of the pandemic, it is to be expected that we would hear a significant increase in health and care experiences. However, we believe people's ability to engage over the coming months may diminish, as resilience-levels appear to be decreasing in some individuals. We continue to work in partnership with community organisations and service providers to reach and hear from as many people as possible from across our communities.

We've a number of engagement activities underway including:

- A webinar planned for 10 November to engage family and friends of residents in care homes across Sussex
- Hearing the experiences of homeless and rough sleeping communities
- Collaborative workshops with young people to explore building rapport and confidence in digital consultations
- Exploring communication and experiences of processes for patients when they are discharged and leave hospitals.



# Information, Advice, Communication & Engagement

Supplied to patients, their family and friend carers, community partners and Integrated Care System stakeholders, through all of our communications channels:

	Key performance metrics for current and previous quarter	
	Q1 April-June 2020	Q2 July - September 2020
Enquiries to Helpdesk and frontline team through email, website and social media	467	565
People signposted to IHCAS	17	48
Number of people engaged with (all channels)	44,509	42,738
Number of engagement/influencing occasions	424	401
No. of stories/accounts recorded on CRM and surveys by Local Team & through Community Partnerships	3,825	3,181
Number of community partners engaged with	863	734
Active community collaborations	10	15
Reports, Spotlights and case studies	6	66
Website visits	8,175 - 88.4% were new users	6,754 - 85.4% were new users
Facebook: Followers Posts Reach	410 86 15,689	431 80 11,060
Twitter: Followers Posts Reach	1,681 60 15,743	1,703 66 22,511
Heads Up briefing subscribers	380	396
External publications (hard copy and digital)	14 - additional readership c15K	39 - additional readership c125k

6,754



As well as being collaborative by joining our community partners virtual meetings, we've worked on some large scale projects this quarter. One of the key ones being in partnership with some of the County's Community and Voluntary Services.

Through this work we have worked together with community and voluntary groups and organisations throughout the Lockdown and as services moved towards re-establishing face-to-face contact with local people where possible and appropriate.

Using a mixture of formal surveying and semi-structured interviews we've been able to report on the adaptability of this sector, and to show the impact the pandemic has had on local people (as services changed or ceased overnight), staff and volunteers, organisational development and finances. This has been an evolving story and one we plan to continue and to follow-up.

Our resulting reports and case studies are being lodged with the West Sussex Records Office (for historical reference), as well as being showcased widely so the West Sussex Health and Care System understands the resilience and challenges for this vital sector in supporting healthy communities.

“Thank you very much for these three extremely interesting and important reports, from which I have learnt a great deal. The case studies were particularly helpful.

The collaboration of Healthwatch with the voluntary and community service organisations has clearly created a powerful voice, which I hope will result in a positive response. From my point of view, the papers set out a compelling case for investment in volunteering and the support that volunteer-based organisations require to ensure they can provide an effective and safe service. As you know, these themes were also expressed in the Tackling Loneliness Together conference. Moving on from September, I think this would need to focus on the practical steps that are being taken to collaborate in West Sussex and what more needs to be done.

*High Sheriff of West Sussex, Dr Timothy Fooks FRCGP*



There are a number of recommendations within the reports we've published that we'll be following-up over the coming months.

# Involving Local People

Involving local people in designing and delivering our core responsibilities and work is critical to success of this local Healthwatch:

	Key performance metrics for current and previous quarter	
	Q1 April-June 2020	Q2 July - September 2020
<b>Volunteers</b>	<b>48</b>	<b>48</b>
<b>Roles covered by volunteers</b>	<b>92</b>	<b>105</b>
<b>Volunteering interactions (meetings, events)</b>	<b>114</b>	<b>110</b>
<b>Volunteer support hours</b>	<b>307</b>	<b>309</b>
<b>Healthwatch Board Independent Directors</b>	<b>268</b>	<b>252</b>
<b>Estimated value of volunteers **</b>	<b>£27,775</b>	<b>£26,625</b>

\*\* Estimate based on £25 per hour for volunteers who usually work at a high level and £75 per hour for Independent Director volunteers. More virtual meetings reduced the need for travel hours so although a slightly lower number of hours, it reflects increased direct activity.

## During this quarter:

We continue to sustain a good level of engagement and productivity with volunteers taking part in:

- Phone surveys
- Mystery Shopping activities
- Discussions, forums, AGMs and other meetings
- The Board met virtually for a formal meeting in September and an informal workshop in October.

Several of our volunteers have met (in October) virtually with the Investors in Volunteers assessor and a decision goes before the panel in January 2021. Some of our regular volunteers remain engaged but are currently unable to be active due to the pandemic.

## Developing and innovating:

Jo Tuck, our Volunteer Manager and some of the volunteer team have been testing some of the new digital innovations including being able to access our full information and advice database in real time rather than having to refer to our help desk.

# REPORTS AND PUBLICATIONS

We are pleased to be working with the West Sussex Records Office so these and other reports relating to the pandemic are recorded. These - as they not only give important information for the here and now, they will give a historical reference.

The following were published this quarter:



## Voluntary and Community COVID Impact and Resilience Partnership Project

From May to date we have been working in partnership with several of the County community and voluntary support providers (CVS): Arun and Chichester, Mid Sussex and Horsham, to understand how this sector has changed and continues to adapt due to the pandemic for to support local people.

This work has generated 6 Reports, and over 45 case studies.

See page 6 for more information.

## Care Home Social Media - keeping in touch and staying connected

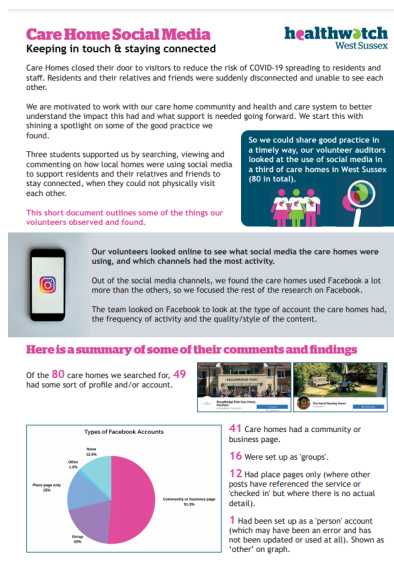
September 2020

Three students supported us by searching, viewing and commenting on how local care homes were using social media to support residents and their relatives and friends to stay connected, when they could not physically visit each other.

Care Homes closed their doors to visitors to reduce the risk of COVID-19 spreading to residents and staff. Residents and their relatives and friends were suddenly disconnected and unable to see each other.

We are motivated to work with our care home community and health and care system to better understand the impact this had and what support is needed going forward. We start this with shining a spotlight on some of the good practice we found.

This short document outlines some of the things our volunteers observed and found.







## Heads Up

Keeping people up to date on health and social care.

[September 2020](#)

[August 2020](#)

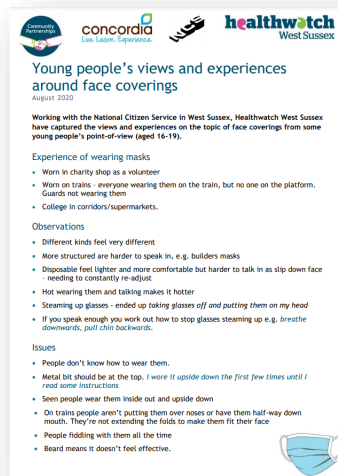
[July 2020](#)



## NHS Reset Round Table - Key issues

September 2020

As part of the NHS Reset conversation, Healthwatch leaders, include from West Sussex joined an online session to share their learning from the response to the pandemic, including what worked well and what needed further consideration. This paper picks up the key themes.

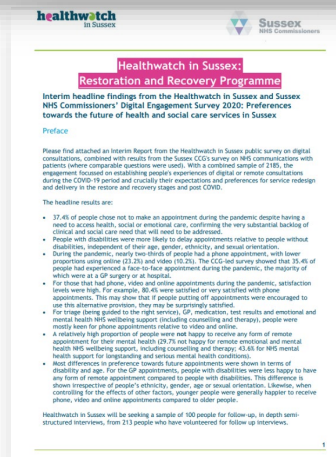
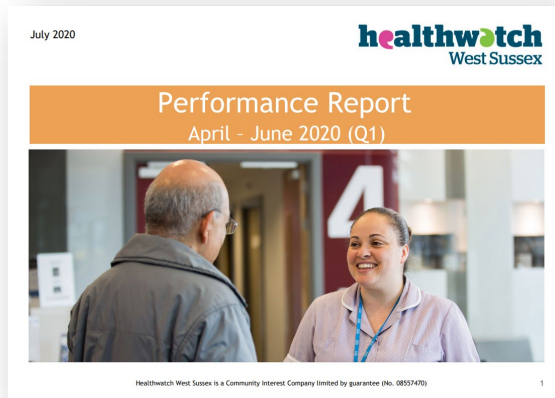


## Young people's views and experiences around face coverings

September 2020

Working with the National Citizen Service in West Sussex, Healthwatch West Sussex have captured the views and experiences on the topic of face coverings from some young people's point-of-view (aged 16-19).

We have used this learning in a task and finish exercise looking at face masks and communication within the ambulance trust, and in discussions with communication specialists - as it gives useful insight about communication with young people.



## Performance Report Q1: April to June 2020

August 2020

A summary of the breadth and depth of our work in the quarter April to June 2020, issues/concerns and our forward plan for the next 3 months.

In these challenging times we've adapted to make sure we find out what matters to you, and others, and to help make sure your experiences and views shape the support you need.

Listening to peoples' experience and needs, we have during this quarter, escalated 34 issues across the system for more urgent attention and resolution.

## Digital Engagement Survey 2020: Interim Report

August 2020

Interim findings from the Healthwatch in Sussex and Sussex NHS Commissioners' Digital Engagement Survey 2020: Preferences towards the future of health and social care services in Sussex

This reflects the finding of public surveying on digital consultations, with **2185** responses. The engagement focused on establishing people's experiences of digital or remote consultations during the COVID-19 period and crucially, their expectations and preferences for service redesign and delivery in the restore and recovery stages post COVID.

## Spotlight: Safe in Sussex

August 2020

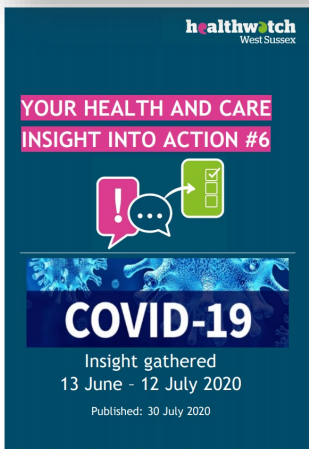
Safe in Sussex delivers a range of services throughout West Sussex for people who are experiencing or at risk of domestic abuse. Find out more about Safe in Sussex in our Spotlight report.



Annual Reflection 2019-20

## Learning from complaints

healthwatch  
West Sussex



## IHCAS Annual Reflect 2019-20: Learning from Complaints

August 2020

This report shows examples from 2019/20 where our Independent Health Complaints Advocacy Service (IHCAS) supports local people to have their concerns heard.

We are keen to ensure our work supports local people to have their concerns heard and at the same time, is supporting our local Integrated Care System to learn from peoples' lived experiences.

## Your Health and Social Care - Insight into Action - Report 6

July 2020

This is our sixth report in this series and covers the insight we've heard from you from 13th June - 12th July 2020.

We raise and escalate the issues we hear as soon as we hear them. These reports then collate issues and trends to enable our developing Integrated Care System to plan and adapt to changing needs.

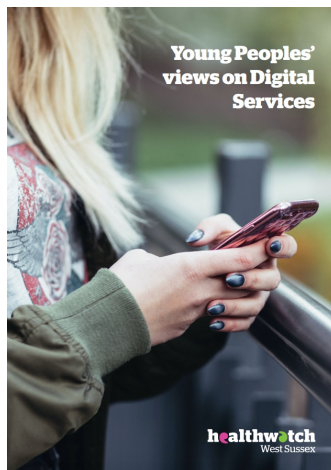
## Mental Health Sector Connector Forum

July 2020

'Sector Connector' is a Sussex wide collaboration between Healthwatch, the Voluntary and Community Sector and the NHS. This is the Communications and Engagement document.

Healthwatch have been asked to arrange and facilitate 'Forums' which will meet three to four times a year and provide a way for the Voluntary and Community Sector, expertise from people with lived experience and the private sector to influence and engage with NHS Mental Health strategic planning, Clinical Commissioning Group on a Sussex-wide basis.

[Restoration and Recovery Programme Update](#) [Terms of Reference](#)



## Young People's Views on Digital Services

July 2020

This is an independent case study showing some young peoples' experience and views of digital health offers and use of technology. It is not exhaustive but starts to explore potential assumptions.

Such insight, we hope will provoke an appetite within commissioning and services for engaging young people in designing solutions when a need is identified. This could be finding a way of meeting demand or where there is not a service to meet needs.



## Spotlight: Time 4 Children

July 2020

Time 4 Children is a small charity based in Haywards Heath. Their aim is to increase the emotional wellbeing, self-confidence and self-esteem of emotionally vulnerable children of primary school age who live in Mid Sussex.

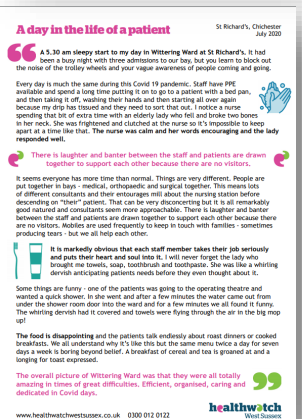
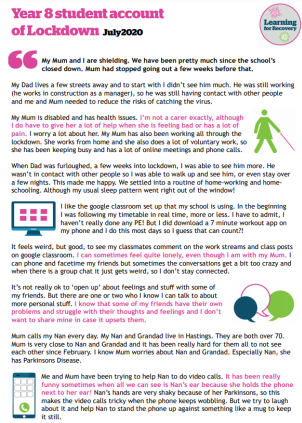
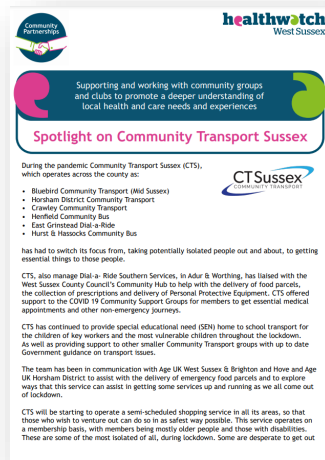


## Spotlight: Granddad's Front Room

July 2020

Granddad's Front Room has been set up as a safe space to help individuals, community groups, and local charities in Bognor Regis and the surrounding area. Read more about the work they do here.





## Spotlight: Community Transport Sussex

July 2020

During the pandemic Community Transport Sussex (CTS) has had to switch its focus from taking potentially isolated people out and about, to getting essential things to those people. Find out more about CTS here.

Community Transport Sussex (CTS) operates across the county as:

- Bluebird Community Transport (Mid Sussex)
- Horsham District Community Transport
- Crawley Community Transport
- Henfield Community Bus
- East Grinstead Dial-a-Ride
- Hurst & Hassocks Community Bus

## Year 8 Student's account of Lockdown and Shielding

July 2020

A year 8 student's story of lockdown, their feelings and thoughts about what it's like to lockdown whilst still at school.

## A day in the life of a patient

July 2020

A case study showing a day in the life of a patient at St Richard's Hospital, Chichester.

*There is laughter and banter between the staff and patients are drawn together to support each other because there are no visitors.*

# INDEPENDENT HEALTH COMPLAINTS ADVOCACY

Supplied to patients, their family and friend carers, community partners and Integrated Care System stakeholders through offering support in learning from complaints and patient concerns:	Key performance metrics for current and previous quarter	
	Q1 April-June 2020	Q2 July - September 2020
One off information, advice and support	7	25
New referrals for support	27	48
Advocacy support concluded	17	49
Ongoing advocacy support cases	81	76

## During this quarter:

- Service has supported five complainants to submit cases to the Parliamentary Ombudsman
- Advocates took on two complex complaints, both involving multi agencies and safeguarding concerns/serious incident investigations
- Changes made to self help guide to reflect the need to request GP's medical records for a deceased individual from Primary Care Support England
- Added to the service self-help [information](#) to reflect some local resolution meetings are being offered digitally - so that people are be more prepared for a meeting happening in this way
- Finished a complaint with Sussex Partnership NHS Foundation Trust that involved an internal investigation report that resulted in six recommendations to improve services for patients. Healthwatch will be seeking an update on these recommendations to see what difference this has made.

# FINANCE

## Finance and Performance Board Sub Committee and Actions

We continue to pursue additional commissioned work and social enterprise opportunities and believe this is enabling us to work creatively to support the core objectives of a local Healthwatch. A number of small commissioned projects are underway and we are firming up plans with Healthwatch England in relation to Cancer experiences for BAME men and the local Health and Care System in relation to Discharge.

The finance subcommittee met on 9 November 2020.

- Impact and Performance report (published document)
- Finance report (internal document) & refreshed Risk Register (internal document).

# LOOKING FORWARD

Following government advice and guidance Healthwatch West Sussex team members continue to work from home. All face-to-face engagement activities stopped in mid-March 2020 and we will continue to operate a flexible workplan for our staff and volunteers for the foreseeable future.

## Future opportunities



We continue to work collaboratively with our colleagues in Healthwatch Brighton & Hove and East Sussex, where issues are Sussex-wide, including additionally commissioned work.

Healthwatch West Sussex currently lead on behalf of local Healthwatch on: Cancer, Autism and Learning Disabilities, Dentistry, Children & Young Peoples future engagement with the implementation of the Foundations for Our Future recommendation implementation.

We are a key partner in the collaborative application to the Kings Fund - **Healthy Community Together Programme**, which is moving through the second phase.

## What we have done to date and will continue to do:

- Built on our existing good home working practices and using the time to maximise on technology to deliver effective communications. Our staff have access to MS Teams, Skype and Zoom so we can have virtual meetings both internal and with external stakeholders
- Maintain effective and productive relationships with all key partners. We will:
  - continue to use *a constructive partner* tone of voice in our conversations
  - give stakeholders insight early, to enable them to respond swiftly and will then publish any reports
  - produce case studies and update using our routine communication channels: monthly Heads Up, website and social media
  - capture our escalations, recommendations, outcomes and testimonials, in a central document and will share this with system partners - this will enable us to demonstrate the difference our work makes
- We will share important information relating to local COVID-19 issues and signposting to date information regarding local and national services to residents
- Ensure we provide ongoing support for voluntary and community sector organisations.



## October 2020 - March 2021

### Clear and accurate information, advice and signposting

- Work with key stakeholders to create information support based on what residents say are their emerging themes - using a narrative that enables local people to understand what is changing and how this could impact them.
- We will focus on supporting our place-based system to improve the content of written material to residents, for example hospital leaflets and general letters
- Use our social media presence to deliver trusted information and advice to local people and engaging people, which when appropriate may include surveys.
- Develop our information and advice through digital innovation to maximise the investment in our Healthwatch Hub and Community Partnership engagement and knowledge of West Sussex.

### Gather feedback and the views of peoples' needs and experiences in relation to COVID 19 and other services where it relates to patient safety

- Our team will use existing networks within the community, and a range of designed communication tools to establish and encourage individual and groups to provide *eyes and ears* feedback around health and care:
  - Confusion and contradictions information
  - Gaps and blockers in accessing support and services
  - Positive experiences of accessing services and the innovative things that people are finding beneficial which could be maintained after the pandemic
- This includes joining more geographical Facebook Groups and seeking out opportunities to talk to voluntary and community group members virtually.

### Reporting

- Spotlights on community services, using a refreshed design that shows others the impact these services have on the individuals who benefit from accessing them
- Learning for Recovery case studies (published) and insight briefing (non-published).
- Construct or contribute to and share Sussex-wide Healthwatch Reports.
- Enable our place-based system to respond to insight and then publish reports.

### Involving Local People

- By working with our existing volunteers, we'll create opportunities for online mystery shopping of information sources, and phone-based interactions with other residents to support the system to improve services through the lens of local people.

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## Issues and Concerns - “Hot Topics”

There are **high rates of non-attendance for appointments for treatment** and procedures which will affect people’s long-term health and wellbeing and impact the NHS’s ability to recover. Whilst an obvious factor for this is people’s fear of the virus, there is an urgent need to ensure that patient communication is appropriately supportive and right first time. We’re making this a priority area. We invite providers to take advantage of our connections to those with lived-experience and communities. Together we can tap into these resources to sense check written or visual communications to ensure it will be effective and understood.

**Access to GP services** (in its broadest sense of primary and community care not just GPs) is becoming a stronger theme again and we’re sharing a briefing on this to the West Sussex Clinical Commissioning Group, highlighting some of the areas of concern. We are currently looking at how we can add value to improving communication around how people now access services (both virtually and face-to-face).

We accept statistically the **NHS Dental** provision is stronger in our county than it maybe in other parts of England. However, this should not detract from the very real challenges people face in getting access to treatment when they can’t afford to pay privately for dental treatment. It is concerning that dentists are handing back NHS Contracts and there is not (at the time of writing) a national recovery strategy for this part of the healthcare system. We have a strategic discussion on this scheduled for November.

We share peoples’ concerns over the spread of the virus and the impact this will have on individuals, communities and economy and financial stability of West Sussex. Having **strong local public health leadership** is important at this time, and we will work even more closely with the WSCC Public Health and Community Teams throughout the winter to ensure everyone can find appropriate information and advice and raise concerns as needed.

We’re concerned over the **fatigue** felt by local people and the **ability for workers to continue to deliver high quality health and care**, when there has been little respite in the demand - firstly from the virus, and secondly from a need to recover services. We can see a steady increase in referrals for health complaints support, which we’ll monitor so we can alert our leaders to any potential risks within the system.

## Board meetings

The CIC Board met informally for a workshop on 14 October 2020 to take stock of the current situation nationally, at an integrated care system and at a West Sussex level to review and refresh Healthwatch West Sussex priorities. It has been agreed that the next six to nine months will focus on: COVID-19 and resulting “Hot Topics”.

Future public board meetings are scheduled below and will remain virtual until it is possible to safely hold them face to face:

- 18 November 2020
- 10 February 2021
- 12 May 2021