

Impact & Performance



We believe that everyone in society needs to be included in the conversation. Especially those whose voices aren't heard so loudly.

Page 7 shows how we plan to achieve this over the next 12 months.



October – December 2021 (Q3)

At a Glance

Making a difference to care

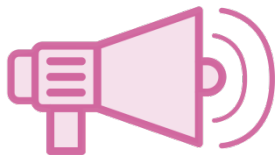


We are listening

We have heard and understood the impact and experiences of people who have had a financial reassessment since January 2021 and will be presenting concerns to the Health and Social Care Scrutiny Committee in January 2022.

Thank you to the thousands of people who have taken part in our survey looking at access to GP-led services. We'll be reporting on what you have told us in the next quarter.

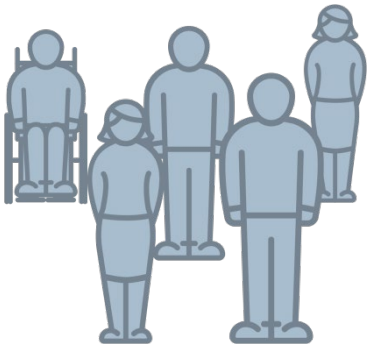
Reaching out



4,500+ stories and survey responses

Our highest quarterly record of insight received over an Autumn/Winter period. Thank you to everyone that has shared their experiences. Page 7 shows how we plan to make sure your experiences are understood by those who plan, buy and provide health and care support.

Providing support



Providing valuable information

Both our services provide easy to understand information based on continually updating our local knowledge and experiences of services, this helps people to have realistic expectations and to get the most out of their interactions with our health and care systems.

Impact: Making a Difference

At the start of this report, we highlight some of the areas/topics where we've had the most impact in the last quarter.

Healthwatch and Integrated Care Systems (ICS) Working Together

Building on their report from October which looked at engagement with ICSs and found 80% of local Healthwatch organisations have regular contact with their ICS, Healthwatch England has now published a series of [promising practice case studies](#), including one for our Sussex ICS. The case studies highlight how local Healthwatch and ICSs are working together to raise standards of care and offer tips on implementing ideas locally.

Your experience is helping 111 communicate better with others

Our authorised representative, Philip, supports us and South East Coastal NHS Foundation Ambulance Trust, who provide 999 and 111 responses (calls and ambulances) for Sussex, Surrey (only 999 in this area/not 111) and Kent/Medway, by reviewing and identifying themes from patient feedback from all the areas covered by this Trust. We meet with the Trust quarterly to understand what they have done as a result of these experiences.

This quarter we have been able to share people's disappointment when turning up at A&Es, having been given a time by 111 but then still waiting a long time. The time, we are told is given to avoid surges of patients to A&E and is an '*arrival time*' (not an appointment). It has been recognised that call-handlers needed to be clearer explaining this to people that this was an arrival time and that they would likely have to wait. The Trust has since strengthened the wording used to clarify for people at the point of being given the time. This issue is also being picked up nationally. We have subsequently asked the Trust to raise the issue with hospital trusts that A&E frontline staff are asking patients if they have an appointment. This may undermine the message given by 111 and add to people's confusion.

We would ask people to take advantage of [111 online](#), rather than call, if they can access the internet. Calls to 111 are higher than last year and waiting times may add to people's frustration. Using the online service may provide a quicker response to get you the health care you need.

Improving how people travel to health appointments

In August 2020, Healthwatch in Sussex (Healthwatch West Sussex, East Sussex, and Brighton & Hove) carried out its fourth review of Non-Emergency Patient Transport Services (PTS). In our latest report (see page 12) we take the opportunity to describe some of what has happened as a result of our full literature review report, and survey findings (of 130 patients), which led to 14 recommendations for improving this service.

Our work was designed to inform and support Sussex NHS Commissioners as they prepared to recommission the service (for a contract starting in 2023).

What has happened since?

- Healthwatch raised your concerns and suggested improvements for the PTS service with Sussex NHS Commissioners and the current provider of the service (South Central Ambulance Service NHS Foundation Trust, SCAS).
- We also shared your ideas for changing the service with potential bidders for the new contract in October 2020, and our results were fed back to those leading a national review of PTS, which we discuss below.
- Since our reports were published, we've been working more closely with Sussex NHS Commissioners and SCAS who have provided responses to some of our findings. This has created a better shared understanding of running a PTS service.
- Looking forward, we will continue to work with SCAS and Sussex NHS Commissioners to deliver patient forums.

Getting your eye health needs heard

Cheryl our Strategic Community Partnerships Lead worked hard to make sure that people living with eye-sight and/or hearing loss were heard, and their needs understood when our Council was assessing the Sensory Strategic Needs in our County.

This is important as a Joint Strategic Needs Assessment (JSNA) is a process by which the local authority and Clinical Commissioning Group assess the current and future health, care and wellbeing needs of the local community to inform local decision making.

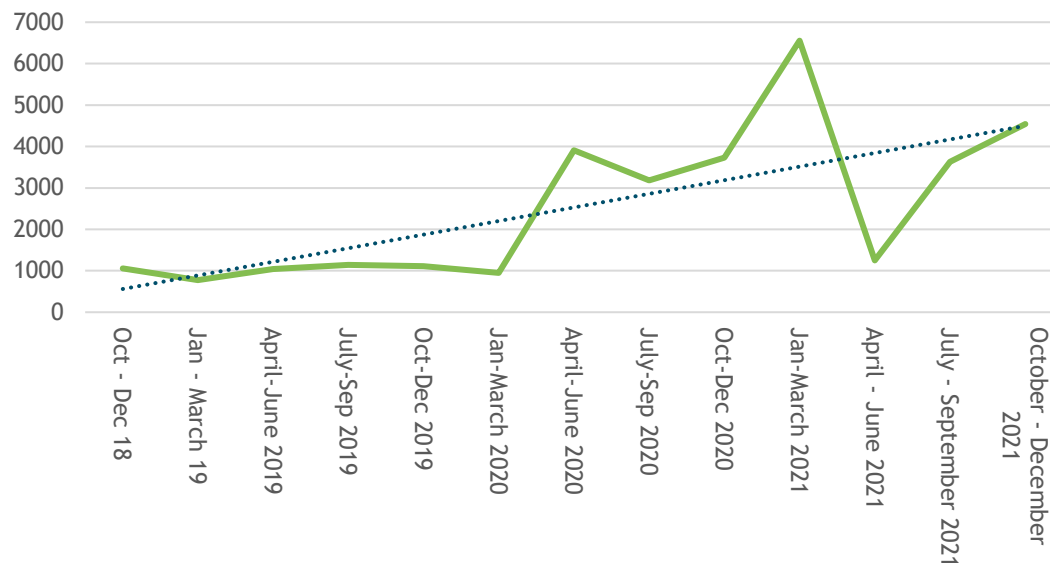


Without Cheryl's efforts the views and experiences of local residents could not be collected at such a difficult time. It also highlighted the huge reach that organisations such as Healthwatch and 4Sight have into communities that we often take for granted. *(Jacqueline Clay, West Sussex County Council's Public Health Team)*

We are committed to public and stakeholder engagement and transparency. You can find our reports, on our website www.healthwatchwestsussex.co.uk

Service and Activities

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



We recorded a winter record total of **4,545 pieces of insight**.

Traditionally, insight at this time of the year drops, but we've been continued to reach out to people to understand their views and experiences (via surveying), particularly around isolation, access to GP-led care and the impact of living with pain.

We've also heard people experiences through three webinars this quarter that has built on our understanding of living with a long-term condition, care home challenges and the current financial assessment processes.

Our considerable insight will be used to share the impact and experiences of people experiencing a financial reassessment for adult social care, since January 2021, at the next Health and Social Care Scrutiny Committee meeting, where this service and NHS Dentistry will be scrutinised. We'll be asking the e to accept the recommendations, we've put in our report for the Committee meeting on [21 January](#), to help WSCC improve the situation some people have found themselves in.

Information, Advice, Communication & Engagement

Supplied to residents, 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 | | |
|--|-------------------------------|-------------------------------|
| | Q2 July – September 2021 | Q3 October – December 2021 |
| Enquiries to Helpdesk/frontline team through all channels | 1,308 | 1582 |
| People signposted to IHCAS | 45 | 38 |
| Number of people engaged with (all channels) | 39,797 | 57,649 |
| Number of engagement/influencing occasions | 749 | 776 |
| No. of stories/accounts recorded on CRM and surveys by Local Team & through Community Partnerships | 3,634 | 4,545 |
| Number of community partners engaged with | 1700+ | 2,000+ |
| Active community collaborations | 24 | 46 |
| Reports, Spotlights, and case studies | 22 | 12 |
| Website visits | 10,583 – 85.1% were new users | 9,813 – 86.6% were new users |
| Facebook: Followers | 632 | 663 |
| Posts | 39 | 71 |
| Reach | 6,362 | 26,576 |
| Twitter: Followers | 1,744 | 1,758 |
| Posts | 37 | 71 |
| Reach | 16,500 | 13,472 |
| Heads Up briefing subscribers | 1,410 | 1,243 |
| External publications (hard copy and digital) | 15 | 10 |

How we plan to involve and talk to people in 2022

Value:

We recognise the value of listening to people and making sure their voices are heard.

| Hosting | Where you are | Hearing |
|--|--|--|
| <p>We believe that comparing lots of different experiences help us to identify patterns and learning what is and isn't working.</p> <ul style="list-style-type: none">• Surveys and follow-up 1-2-1 conversations• Webinars• Promoting Healthwatch England Campaigns• Polls (Twitter and Facebook)• Face-to-face (multi-partnership) free events• (Max two events) - our ask of stallholders will be they provide a summary of what they have heard from event visitors• Unmanned stands | <p>Going where people are without an agenda to really listen and understand the unique challenges our communities face.</p> <ul style="list-style-type: none">• Virtual group sessions (observational and conversations)• Attending events to sit down with people (rather than as stand holders)• Engaging through doing – offering community groups support or an activity so that we can have conversations <p>Building trust through conversations we will:</p> <ul style="list-style-type: none">• offer access to our hosting• follow-up to <i>make voices heard</i>• get people involved with their health and their community's health and care. | <p>We act on feedback and drive change. Listening has to positively affect outcomes and influence important decisions about people's care.</p> <ul style="list-style-type: none">• Visual/audio, as well as written accounts, to bring first-person stories• We will keep learning records to help us inform our own work and others• Tracking individual insight to get it in to established platforms, so we can ask if example experiences are known and what is being done if people tell us things are not working.• Engage with system through our reports. |

Involving Local People

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

| | Key performance metrics for current and previous quarter | |
|--|--|-------------------------------|
| | Q2 July – September 2021 | Q3 October – December 2021 |
| Volunteers | 54 | 54 |
| Roles covered by volunteers | 94 | 94 |
| Volunteering interactions (meetings, events) | 429 | 402 |
| Volunteer support hours | 435 | 421 |
| Healthwatch Board Independent Directors | 235 | 228 |
| Estimated value of volunteers ** | £28,500 | £27,625 |

**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 with volunteers taking part in:

- Collecting and sharing insight from local networks and social media – identifying themes and emerging issues
- Representing Healthwatch West Sussex and amplifying local people's voices at committees, forums, networks, and other meetings
- Reviewing and commenting on health and care communications as part of our #ConfusingComms Campaign
- 1:1 Volunteer meetings with Volunteer Lead (virtual/telephone)
- Volunteer team met virtually to discuss training needs and to co-design a plan for a volunteer focus-day in Q1 2022-23.

Reports and Publications

As well as our usual publication channels, we are pleased to be working with the West Sussex Records Office so that our reports relating to the pandemic are recorded. They will provide important information for the here and now and give a historical reference.

The following were published this quarter:

GP Care



[Published Survey and Communication to ask people in Sussex to share experience of using Doctor Surgery services in the last 6 months](#)

November 2021

We needed to hear about your experiences of accessing GP services, so we can help the NHS understand what is working well and what could be better so that together we can find solutions.

The survey was live from 18 November to 31 December.

We are also partnering with Healthwatch in Sussex to survey 16 and 17 year olds about their experiences and views on vaccination. The survey now closes on 31 January.

Community Working



Published Survey and Communication to ask people in Sussex, who are living with pain, to share their experiences

November 2021

We are asking people aged over 18 years to share their experiences of living with physical pain. As by focusing on what matters to you, helps you to have more choice and control over the way your pain management and care is planned and delivered.

Your answers are important as they will help to shape the design of services, as the NHS will be re-purchasing (commissioning) services from April 2023 to help people see the right person/clinician at the muscular skeletal services.

Here is the [link](#) to the survey which remains live until the end of January 2022 – please complete if you are living with pain.



Raising awareness of Parkinson's – Webinar Resources

November 2021

The link is to the meeting recordings, presentations, and additional resources from two webinars we held in November with Parkinson's UK.



[How has lockdowns impacted people's wellbeing and access to exercise?](#)

November 2021

We asked West Sussex residents their views about access to exercise, their self-perception of their health and wellbeing and access to health and wellbeing services pre and post-pandemic. Read our report [here](#).

Spotlight on other services:



[Updated Spotlight on apetito](#)

November 2021

apetito supports people in their own homes by promoting health and wellbeing through the supply of healthy, nutritious meals.

One key part of the driver's role is to carry out a safe and wellbeing check on delivery, which gives families peace of mind that someone is able to visually check on vulnerable or frail people. For a contactless delivery the driver will stand back but will still make sure they see the customer to carry out the wellbeing check.

Other



[Patient Transport Services - How your views are helping reshape services?](#)

November 2021

A year on from our patient survey on Non-Emergency Patient Transport Services, we take a look at what impact our reports have had.

Healthwatch West Sussex



[Heads Up](#) - Keeping people up to date on health and social care.

[Heads Up - October-2021](#)

[Heads Up - November 2021](#)

[Heads Up - December 2021](#)



[Q2 Impact and Performance Report - July-September 2021](#)

November 2021

A summary of the breadth and depth of our work from July to September 2021, issues/concerns, and our forward plan for the next 3 months.



Latest Board Meeting Papers

November 2021

[Agenda for November 2021 Meeting](#)

[Minutes from the last Board meeting](#)

Independent Health Complaints

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 | |
|--|---|---------------------------------------|
| | Q2 July – September 2021 | Q3 October – December 2021 |
| One off information, advice, and support | 19 | 72 |
| New referrals for support | 70 | 38 |
| People on waiting list | n/a | 2 |
| Advocacy support concluded | 60 | 79 |
| Ongoing advocacy support cases | 82 | 113 |



I just wanted to say a massive thank you to Katie and Sophie for being there to support my daughter and I over the last couple of days. We appreciate all your time and effort.

West Sussex Resident supported by IHCA
at Coroner's Court as the conclusion of complaint that has **led to national learning and local improvements**

We have had this service on our risk register and been notifying our commissioner that the demand for advocacy for NHS Complaints will exceed the contracted services. We believe that that more resources are needed to meet the need. It is vital for people to be supported to have their voice heard for their own benefit and for the learning this offers the NHS, particular at a time when there is great stress on services and more risk of mistakes happening. Seeing our work result in national learning about *avoidable deaths* and local improvements is powerful for people and our advocates. Unfortunately, we've now had to implement a waiting list for the service and must report that people are now experiencing a wait (which may run into months) as our advocates do not have the resources to handle new cases without closing existing ones.

Learning for the NHS

Need for better communication

As reported last quarter, there is often a need for a sensitive approach from our advocates, to build a trusted working relationship to provide the support and guidance that is required. Feedback from people who have experienced Complaints Handling Processes throughout West Sussex, is that the process needs to take account of peoples' bereavement and grief. We recognise that investigations and processes take time, but people tell us, the long gaps without communication, adds to their grief, and makes them feel like things are '*being covered up*'.

The system can learn from looking carefully at recent coroner cases, where people shared their impact statements to appreciate the need for improvement.

Support Practices to have good outcomes from resolution meetings

Our Team have spent time this quarter working with a practice, helping them to understand the complaints process and the benefits of having a good local resolution meeting. By supporting the practice to prepare for the meeting and advocates offering advice during it, there is now a more healthy and manageable patient/practice relationship.

In this case, the practice is going to consider:

- Introducing a system suggested by our advocate to mitigate the risk of medication errors and wastage in their dispensary (simply by asking the person to look into the bag to check the content is what they are expecting.)
- Following up with mental health support.
- Enabling access to other clinicians for the patient.

We recognise for General Practice, handling complaints is not a significant part of their business, but when complaints do arise, they can be costly in both resources and reputational damage and potential compensation claims.

There is scope for practices to benefit from 1-2-1 advice from a team that are experienced in this area and can help staff to learn from people who raise concerns and achieve better outcomes. Healthwatch West Sussex can be commissioned to deliver bespoke support in this area – please email katrina.broadhill@healthwatchwestsussex.co.uk for more information.

Finance

Finance and Performance Board Sub Committee and Actions

Wherever possible we continue to pursue additional commissioned work and social enterprise opportunities to support us to deliver our work, tackle inequalities and influence to improve health and social care outcomes for people.

The finance subcommittee met on 31 January 2022 to scrutinise:

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

Looking Forward

Our Board will be looking at the priorities for the next financial year in January, so we can focus our resources on where we can add value. As part of this work, we look back at what local people have told us in the last 12 months, recognising the impact of the continued impact of the COVID-19 pandemic on both people and services. We also look at the NHS England [2022/23 priorities and operational planning guidance](#). Page 7 shows how we plan to be meeting our statutory functions within the resources we've available.

Whilst the new target date for the introduction of Integrated Care Systems (ICSs) and Integrated Care Boards (ICBs) is 1 July 2022, we are working with Healthwatch England and a few other local Healthwatch to develop a toolkit to help the Healthwatch network in its formal working with ICSs.

Whilst we have a waiting list for our NHS Complaints Advocacy, we continue to help our local services improve on safety and patient care. Through our service and the tenacity of the complainant a Trust is discovering a lot of learning. A further case has concluded with national patient safety improvements identified.

Our team of staff and volunteers is being guided by Healthwatch England who give guidance around engagement activities.

We are delighted to be using the new Healthwatch branding from the new year. This has helped us to really re-focus our minds on how we can make a difference. Over the page you'll see how we plan **listen to people and making sure their voices are heard**.

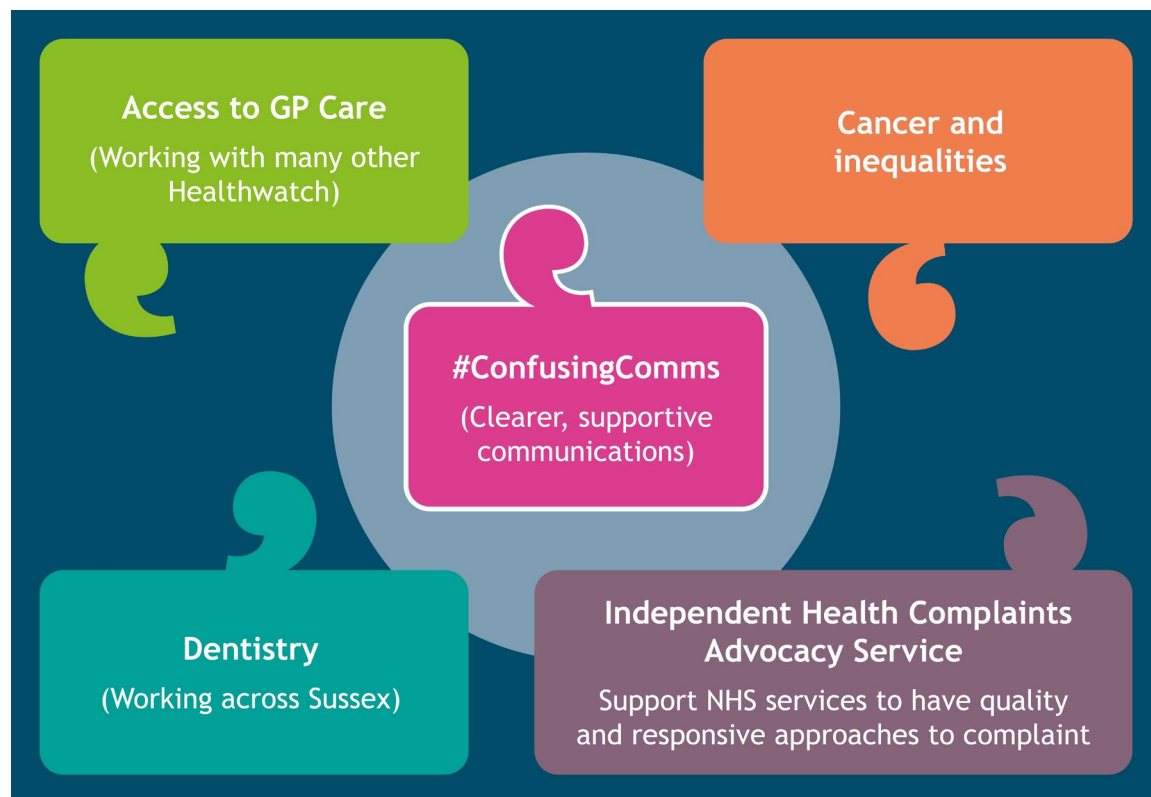
Future opportunities



We continue to enjoy extend our strong and collaborative working with 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: Autism and Learning Disabilities, Cancer, Children and Young Peoples future engagement with the implementation of the Foundations for Our Future recommendation implementation, Dentistry and Ophthalmology. We are also coordinating involvement with GP Access planning. Co-production with Sussex Health and Care Partnership is at the heart of our project work.

These are our priority areas for our core activities.



We will also be following up on a range of activities and issues we have worked on in 2020/21 and continue to contribute to the vaccination programme roll-out. These include:

- Adult autism diagnosis
- Sensory Needs Assessment
- Financial assessment for social care support
- Working alongside Local Community Networks.

Timeline for our access to GP-led Services Project

Thank you to the thousands of people who participated in our public survey looking at what works for people and where there are issues in accessing GP-led services across Sussex. This survey ended on 31 December 2021.

We are part of a regional collaborative working group (that includes NHS staff and commissioners, LMC representatives and an elected member) that has coproduced this project work.

We plan to analyse and have a draft reports by the end of February, after which we will finalise the information from this project with the working group with the aim of offering GP-led Services examples of what is working well for people and possible solutions they may wish to explore.

Issues and Concerns

We've heard locally, many of the concerns reported nationally about the impact of the extensive rate of Omicron infections in the lead up to the new year and we continue to work with the Sussex Health and Care Partnership on a wide range of topics/projects.



Dentistry – We continue to receive **high level rates of access to dental-related enquiries**. The lack of access to NHS dentistry has intensified as an issue for people over the last 18 months. Healthwatch England's latest research (which includes our insight) is a stark reminder that it is an issues decision-makers must focus on urgently to protect our health. For more information <https://www.healthwatchwestsussex.co.uk/blog/2021-12-13/recovery-nhs-dental-care-too-slow-help-thousands-left-pain>

We'll be discussing this at the January Health and Social Care Scrutiny Committee meeting.

Independent Health Complaint Advocacy – we continue to experience higher referrals for advocacy than we have funding to be able to provide. There is a risk of important learning being delayed or concerns lost with greater impact and anxiety for individuals and families concerned.

Board meetings

Board meetings are held in public (virtually at the current time). Future meeting dates are:

- Wed 9 Feb 2022 10am – 12 noon (Q3)
- Wed 11 May 10am – 12 noon (Q4)