

Wiltshire Council

Health Select Committee

15 July 2014

Subject: Healthwatch Wiltshire Annual Report 2013/14

Executive Summary

Healthwatch Wiltshire (HWW) was established as a new independent organisation in April 2013 in order to provide the role of consumer champion for health and social care. Over the last year, HWW has set down the ground work including organisational infrastructure to fulfil its role and deliver its statutory functions which are set out in legislation (Health and Social Care Act 2012).

The legal requirement to publish an annual report provides an opportunity to demonstrate to local people and other stakeholders, including the Health Select Committee, the progress which has been made in 2013/14 and to look forward to 2014/15.

Proposals

It is recommended that Health Select Committee:

- i.** recognise the progress which has been made to establish an independent and credible local Healthwatch in Wiltshire which is able to fulfil its role as consumer champion for health and social care
- ii.** note the content of the Annual Report 2013/14
- iii.** recognise the unique and valuable contribution which Healthwatch Wiltshire can make, on behalf of local people, to the work of the Health Select Committee.

Reason for Proposals

Healthwatch Wiltshire welcomes the opportunity to sit on the Health Select Committee in order to promote the voice of local people in respect to both health and social care issues. Healthwatch Wiltshire's statutory role in scrutinising health and social care services mean that there are some common areas of responsibility with the Health Select Committee. As such it is important that the Committee receive the Healthwatch Wiltshire report in order to make any comment and recognise the work undertaken to date. It also provides an opportunity for the Health Select Committee to confirm its commitment to listen to the voice of patients, carers and the wider community in its future work and through Healthwatch Wiltshire.

Wiltshire Council

Health Select Committee

15 July 2014

Subject: Healthwatch Wiltshire Annual Report 2013/14

Purpose of Report

1. The purpose of this report is to present to the Health Select Committee the Healthwatch Wiltshire (HWW) Annual Report for 2013/14 in order to invite any comment, recognise the progress achieved during the last year, and confirm a commitment to listen to and take account of the views of local people in respect to health and social care services.

Background

2. The Health and Social Care Act 2012 established local Healthwatch and Healthwatch England. Healthwatch England is the national body which provides leadership and support to a network of 151 local Healthwatch organisations. Local Healthwatch has an important role, set out in the legislation, to promote and amplify the voice of local people in the design of health and social care services and in monitoring the quality of those services. Commissioners and providers of such services have a duty to listen to that voice.
3. Local authorities were required to establish local Healthwatch by April 2013. A report was submitted to Wiltshire Council Cabinet in October 2012 to recommend an approach. This led to the creation of HWW as a social enterprise with an independent Board of five directors. The Independent NHS Complaints Advocacy service was contracted, and continues to be contracted, to SWAN Advocacy (a Wiltshire based charity).
4. Wiltshire Council provides core funding to HWW through a contractual agreement which is subject to quarterly monitoring and performance reporting. It is important to note the Council does not direct the work plan of HWW and instead contracts the organisation to deliver the statutory activities for local Healthwatch (see appendix 1).
5. In many other parts of the country local Healthwatch has developed from the local involvement network (the pre-cursor to local Healthwatch) or is being delivered through an existing and therefore well-established organisation. However, the decision to establish a brand new organisation in Wiltshire to deliver Healthwatch functions has inevitably meant that time has been needed to set in place the organisational infrastructure. The Board of HWW believe that the time taken during 2013/14 to put in place the necessary infrastructure will be rewarded by an effective and

independent organisation which is respected as the credible voice of patients, service users, carers, and the wider community.

6. The Chair of HWW was appointed in February 2013 followed by the appointment of four Board Directors in March. The first year work plan was agreed and has been implemented. The annual report sets out progress and outcomes in 2013/14 (see appendix 2). In terms of organisational set up, HWW has been registered as a community interest company (social enterprise), a small office secured, and 1.5 full time equivalent staff team transferred across from the Wiltshire Local Involvement Network. A Chief Executive Officer was appointed and started in post in late January 2014. The Board of Directors has worked incredibly hard giving time significantly over and above that which would be expected. Priority has been given to raising awareness of HWW through a range of methods but particularly through engagement at Area Boards, Community Area Joint Strategic Assessment Events, and through a number of other community forums. Time has been taken to put in place processes for effective engagement (with patients, service users, carers and the wider public) and to monitor the quality of services.
7. HWW is already being recognised as an example of good practice (by the Local Government Association, Healthwatch England, and Patient Voice South (NHS England)). Although the organisation would want to take some credit for this, HWW Directors recognise that this is partly because local commissioners have provided the context for HWW to operate as an independent body. Healthwatch in local authorities close to Wiltshire do not enjoy the same autonomy and the very real risk is that they will not be regarded as an independent and powerful voice for consumers of health and social care. Wiltshire is to be commended for taking the necessary steps to ensure that HWW is developing to be what the legislation intended local Healthwatch to be.

Main Considerations

8. Local Healthwatch must prepare an Annual Report by 30 June for the financial year 1 April 2013 to 31 March 2014. The report must be submitted to a number of bodies including Healthwatch England, The Care Quality Commission, NHS England, Wiltshire Clinical Commissioning Group, Wiltshire Council, and Wiltshire Health Select Committee.
9. The Annual Report must include information across a range of areas including:
 - delivery of statutory activities (see appendix 1)
 - engagement with local people
 - the role of volunteers and lay people
 - use of statutory powers (this includes Enter and View inspections of health and social care services)
 - responses from the system (for example if the Care Quality Commission undertook an investigation following a recommendation from Healthwatch Wiltshire)

- being effective on the Health and Wellbeing Board
 - financial information
10. Wiltshire's Health Select Committee is asked to note these particular areas of progress and impact (over and above the set-up of the organisation):
- development of the HWW volunteer network with close to 50 individuals having been recruited, trained and tasked with a role (volunteers are important to HWW's engagement and representation functions)
 - engagement with local people through a range of forums (including Area Boards and Community Area Joint Strategic Assessment events) which has raised the profile of HWW and provided useful intelligence on what people think about health and social care
 - support for the Care Quality Commission inspection of the Royal United Hospital in Bath which resulted Wiltshire people having the opportunity to share their views about the quality of care they received
 - commissioning of a children and young people's engagement programme
 - raising with commissioners and providers issues about poor experiences of services (for example the non-emergency transport service)
 - effective use of the HWW's place on a range of strategic bodies including Health and Wellbeing Board, Clinical Commissioning Group Governing Body, NHS England Quality Surveillance Group, and Health Select Committee
 - provision of an information and signposting service for members of the public including taking up issues raised about any poor experiences of health and social care services.
11. The Annual Report was agreed by the HWW Board of Directors at its meeting on 14 May 2014. It was presented to the Health and Wellbeing Board as a draft, on 22 May 2014 in order to allow the opportunity for comments which could be taken into account in the preparation of the final version. The Annual Report covers the first year of HWW. However, HWW was not organisationally operational until July 2013 (it had no staff or office base before this time) and therefore activity before this time was inevitably limited. Despite this, a great deal was achieved in 2013/14 and provides a good basis on which to build. An ambitious strategic work plan for HWW is in the process of being prepared.
12. HWW intends to share its Annual Report with local people and this will include special meetings with its 50+ volunteers in the summer 2014. These meetings will provide an opportunity for the organisation to meet with local people and to find out what they think about the HWW strategic work plan. The following are key areas of the work plan for the future:
- Enter and View Programme ('lay' inspections of the quality of health and social care services will commence in September 2014)
 - 'Phase 2' engagement with local communities through Area Boards and working with the Community Area Partnerships
 - Closer working with the local voluntary and community sector including the development of protocols for information sharing and joint engagement

- Development of the information and signposting service
- Engagement programme for the Better Care Programme (in order to find out people's experiences of integrated services)
- Development of the volunteer programme and lay person involvement in the work of HWW

Financial Implications

13. There are no financial implications. HWW is contracted by Wiltshire Council to deliver its activities and receives core funding under an agreement which will expire in June 2017. This provides welcome financial certainty and a significant window of opportunity to develop HWW so that it is a real asset for Wiltshire people.

Christine Graves
Chair, Healthwatch Wiltshire

Steve Wheeler
Director, Healthwatch Wiltshire

Report Author:

Emma Cooper, Chief Executive, Healthwatch Wiltshire
Telephone: 01225 434218
Email: emma.cooper@healthwatchwiltshire.co.uk

30 June 2014

Background Papers

Wiltshire Council Cabinet, Local Healthwatch and NHS Complaints Service,
October 2012.

<http://cms.wiltshire.gov.uk/documents/s52716/Healthwatch%20and%20Local%20NHS%20Complaints%20Service.pdf>

Appendices

Appendix 1: The Statutory Activities of Local Healthwatch

Appendix 2: Healthwatch Wiltshire Annual Report (circulated separately)

Appendix 1

The statutory activities of local Healthwatch¹:

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.

¹ Section 221(2) of The Local Government and Public Involvement in Health Act 2007