# NARRATIVE FOR VOLUNTARY SECTOR QUARTERLY PERFORMANCE REPORT ORGANISATION: HEALTHWATCH SWINDON QUARTER: Q1 2020/2021 

## BRIEF DESCRIPTION OF ORGANISATION REMIT:

We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved and share their views with those with the power to make change happen.

Healthwatch Swindon is here to:

- Help people find out about local health and social care services.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.


## OUR PRIORITIES FOR 2020/21

The Healthwatch Advisory Board set our priorities in April 2020. Please note that the way we work has changed since the COVID-19 pandemic and subsequent lockdown. Part of our focus has been on providing up-to-date information from national and local sources. COVID19 specific information can be read on our Advice and Information page and in the news section of our website.

- Access to primary care
- Access to mental health services
- Access to social care services
- Self-care, prevention and wellbeing
- We continue to support people to have their say to help improve health and wellbeing services in Swindon


## HOW MUCH IS YOUR ORGANISATION DOING?

How many people are you working with, what does your demographic data tell us about your client group (for example: ethnicity, sexuality, disability etc.) and how does this data inform and influence your planning and service delivery? What gaps are you working to fill?

## Data Collected through our Civi CRM Database (Healthwatch Database)

All feedback for this quarter has been gathered via telephone calls, e-mails, virtual meetings and social media. All of this has been recorded on this database.

We collected 71 pieces of feedback during this quarter ( 12 more than last quarter). COVID-19 lockdown started during Q4 19/20 and continued into this quarter. In addition to this the Parliamentary Health Service Ombudsman paused its work on NHS complaints on 26 March, which will have impacted the numbers of residents calling us. We have, however, started to see this pick up again as demonstrated by the above figure.

The feedback was of a mixed nature. We received eight complaints, 13 compliments and 23 areas of concern about services, which were a mixture of positive, negative and suggestions for improvement. In addition to this 13 people shared their points of view, which again was a mixture of positive and negative. An additional 13 people made requests for information.


Most feedback is collected anonymously. Due to the sensitivity and emotive issues that people raise it is not appropriate to collect demographic data. We can however share that the postcode split across Swindon is showing SN3 is providing $24 \%$ of the feedback, with SN5 and SN25 both providing 11\% and SN1 following behind with $10 \%$. $37 \%$ has not been recorded. We will always ensure, where possible, that people's postcodes are routinely collected.


Key themes emerging from Civi CRM are:
Feedback on the impact of COVID-19 on services:
We received 35 pieces of feedback which related to the impact of COVID-19 on services: one direct complaint, 12 compliments, 10 areas of concern (a mix of negative and positive), seven points of view (a mix of negative and positive) and five requests for information. Some examples of feedback received can be read below:

- "I must say, the service provided by our GPs and all staff at the Whalebridge Medical Practice has been outstanding. I must also say, CMcK and all the staff at McKendricks Pharmacy have been outstanding, bless their hearts. Don't know what we'd do without them."
- "I was due a blood test today but had been told to expect a call instead. I got one around 9:00 am this morning. The test will now be at Park Lane tomorrow @ 9:30, as it's my INR (warfarin) test. Very appreciative that it's being done. My only critical thought is why wait till the day of an appointment to call, why not call the day before - better Patient relations, especially if a test or injection appointment can be made only $\mathbf{2 4}$ hours later?"
- "We are continuing to receive dispersals in Swindon of asylum seekers. Is there a database or link anywhere that provides a list of GPs that can do online registrations? I happened to check out two today, Taw Hill Medical Centre, they do what looks like the standard GP registration, and North Swindon Practice. The latter wishing photo ID and proof of address to be sent by email first before they send on the registration form. Not sure if this to be returned by email or post. A lot of our visitors would not be able to provide photo ID.
Given the difficulties our visitors are likely to have with English, and the lack of access to help, this will represent a potential issue for anyone with a health problem who needs medicine/repeat prescription.
Having looked online at NHS, I can't, at present, find anything that points me in the right direction and it looks, instead, that we would have to phone the GPs direct to see who would provide the online registration. I think Taw Hill may have a translation aid but whether this would be standard, I don't know."
- "Why haven't those of us disabled people who have direct payments and employ PAs not (been) given any COVID guidance or any PPE? I still have no PPE from Swindon Borough Council"
- "As a blind transplant patient he is coping very well and occupies a lot of his time with talking books, email and internet. We are fortunate with our practice where we receive text messages which is especially good for (son) and his smartphone. The attached pharmacy process prescriptions and deliver direct to the patient. We can use POD, practice system- we prefer the latter"
- "Someone was trying to book an appointment for their GP (Taw Hill Practice, Swindon) using their online booking system. It showed appointments available but they were not able to book on. Each appointment had COVID-19 noted on it, so they felt it meant only those with COVID symptoms could book on. It was very unclear."
- Daughter concerned about the non-use of PPE equipment when caring for her father in his own home. He is bed bound and has underlying health conditions. She has called The Care Company and raised concerns. They have told her that they are following government guidance and are only expected to use PPE if the patient is showing symptoms of PPE.


## What Healthwatch are doing about this?

We will send the feedback received to each service, as well as forwarding on to the CCG for review, where appropriate. There was a good mix of feedback this quarter. As well as holding services to account when issues have been raised, we are keen to highlight good practice, as well as the pertinent suggestions for improvement by the commentators, to all of the services mentioned. Each anonymised entry on our CRM database is also received by Healthwatch England in real time and used with information from Healthwatch throughout England to inform and influence DHSC and government centrally.

## Feedback about Prescription Ordering Direct (POD)

We received 18 comments, seven of which came through Twitter. The feedback was a mix of negative and positive. Several people commented that the service "is not fit for purpose" but praise was given by others, particularly around speaking to staff when they eventually got through. Some comments received were as follows:

- "I email POD for my prescriptions and get an automated reply and then call the pharmacy for confirmation that all my meds are done and my son collects them. I have not left the house for 8 weeks and I am very impressed with the way everything has been organised and is working."
- "I emailed them this morning (the POD email) \& Boots sent me a text this afternoon to say my prescription is ready. (I was 47 in the queue last month \& it took just over 15 minutes to get through)... the email service is excellent if you make sure all the details are on it."
- "I have used this service since introduced and found it very good but over the last couple of months things aren't good. I do believe it has become so used that now the cracks are showing!
Virus has meant team are working from home, but this shouldn't change the answering of calls? Before it used to go down ten at a time now 3-4 .I started at 50 and you can imagine the time it took and then at number 3 it cut me off $\qquad$ I have tried new email system .....just shows a blank page? Listed what I needed and gave details of surgery my name and sent.
Received back a mail requesting more info so that they could process what a waste of my time and theirs.
A form would have been helpful in the first place. I took prescription to surgery to be done.
The staff are very good but something has happened? Could the service be extended perhaps later hours and a week ends?"
- "Today was the first and last time for me to ring the POD to order my husband's repeat prescription. Number 35 in the queue!!?? Mum tells me it can be
organised direct via surgery email (not POD email) so why have useless POD at all?"
- "POD auto message on phone queue advised to email prescription details, which I did. I am still waiting for confirmation that this has been processed. Clearly service not working efficiently."


## What Healthwatch are doing about this?

We have fed this information back to the POD at the CCG and will continue to monitor the feedback coming through. On 11 June we received this response from the CCG:
"Hi Jo, thanks for the feedback. POD has coped pretty well with COVID but we are just now completely overwhelmed with an increase in demand which is resulting in difficulties in patients getting through and longer than ideal waits sometimes. The IT \& phone system does work at home but not always as effectively or efficiently as if we were in the office but that unfortunately (is) not possible at the moment. The email has worked well as an alternative as you say and I know the team have already looked at the idea of a template (form to complete on the CCG website) and thought (it is) not possible but (I) will ask again now.

In the meantime, we have new starters primed to start and trying to recruit more to try and deal with the extra pressure on the system. Many thanks for your continued support."

## Feedback regarding SEND provision and support

There is some excellent feedback about some of the support and services provided, but long wait times for appointments and difficulty getting diagnoses are issues. Some comments received are as follows:

- "The OT has been brilliant... Helpful, supportive to both our family and the school and really friendly. Our paediatrician has been really supportive and helpful too. Getting a prescription (melatonin) has been difficult (I'm disabled so getting to the Boots at the hospital is challenging. Also the GP can't prescribe and the system of getting prescriptions through the general paed email is difficult because of lack of communication, limited supply and long waits), and actually accessing services is not easy either (waiting lists, no way to directly contact services etc). However, I've found that when we actually get to see someone they have been really good. The only service I've felt completely let down by is TAMHS. The mental health provision for children is shockingly bad, largely because they are so oversubscribed and inadequately staffed. Aiming high is fabulous. So caring and welcoming. Again, long waiting lists are a
problem (we waited well over a year for a place) but they are fantastic. My lad skips to go in, which is a huge difference from the anxious screaming or shutdown I get when taking him anywhere else! I value his place with AH very highly."
- "We are still waiting for Koalas (pre-school for children with disabilities) to contact us. Our health visitor/early years senior sent off our referral a month ago we still didn't receive anything back from them".
For my health I would say more local parents groups where parents/careers of children with disabilities can share experiences. Also talks with different health professionals where I could ask questions, learn more, understand more. Maybe an online portal as well... for parents. Especially work parents that can't go to the talks. Or do this talks during weekends too. And for improve my little one's health I would definitely say more special needs groups, special areas where he could develop his fine and gross motor skills, less waiting for appointments, more speech and Language appointments... maybe something in group? Maybe somewhere that parents don't need a referral and can bring their children to develop while having fun"


## What are Healthwatch doing about this?

We have also been working with Swindon SEND Families Voices on a survey gathering the views of their members' experiences of health and social care and are analysing the findings from this. The results will be published in quarter 2 in a final report, along with our recommendations to be made to commissioners. More on this can found on pages 12 - 14

## Other feedback received

The remaining feedback was a mixture of asking about dental appointments, concern about the prospect about some pharmacies closing and examples of things that are working well at GP practices, and things that are working less well. We only received two pieces of feedback this quarter about GWH. Some other comments were:

- "In the first few days of lockdown, their (Rowlands Pharmacy) opening hours were very erratic. I walked up to pick up a prescription and they were closed during what would normally have been their opening hours. When I went back my husband's prescription still wasn't ready after we had allowed over a week for them to receive it and make it up. They asked me to go back in a couple of hours which I refused to do, because I didn't consider their social distancing to be adequate. It is only a small pharmacy and there were 3 people besides myself in there and more were coming in. I asked them (nicely) if they could deliver it to us and this is what they have been doing since then. The social distancing in
place now, consists of a queue outside the pharmacy and along the path leading to their entrance."
- "I would like to add that Victoria Cross Staff and Drs have been fantastic during the pandemic"
- "A patient at Sparcells surgery in Swindon contacted them today as they had an infected leg from an insect bite. They were asked to send over photographs of the issue. Shortly after the surgery received the photographs, they phoned the patient to follow up and prescribed medication. That prescription was sent direct to the pharmacy and the patient was able to collect the prescription within $\mathbf{2}$ hours of initial contact. The process was swift and highly professional from start to finish"
- "I have problems understanding people on the phone, which was why I was hoping for a video channel - Facetime or similar. I've looked into it now and my GP (Priory Road) doesn't seem to have embraced that. And its on-line system is not working during the pandemic. So it's back to square one till I summon the fortitude to launch a telephone attack."
- Caller had two scans at Great Western Hospital early pregnancy unit on 17 and 23 June. Wanted a copy but hospital said no.
- "I am looking for help in ensuring that CQC hears about difficulties in getting help from AWP in a crisis and ongoing"

All information is relayed back to the relevant provider for their action/information quarterly. If the information fed back is urgent, we contact the provider straight away. If there is a trend to the feedback coming in we will take action. This could be informing relevant stakeholder, or carrying out an Enter and View.

## Outcome 1

To develop/maintain strong working relationships with Commissioners, key Boards and Partners

The following key meetings have been attended this quarter:

- Weekly Provider Call with Joy Kennard, Head of Commissioning Adults
- Weekly Voluntary Sector Covid Recovery Meeting, led by Pam Webb, CEO VAS
- Weekly VCSE catch up meeting - supporting the Voluntary Sector and the Live Well Hub, led by Sue Wald, Corporate Director Adult Social Services and Health
- JSNA Steering Group
- Autism Partnership Board Meeting
- Local Safeguarding Adult \& Children's Board.
- Swindon Patient Participation Experience Meeting, BSW CCG
- CQC \& Healthwatch Webinar meeting
- Infection Protection \& Control meeting, Public Health Swindon
- Healthwatch South West Regional Policy Meeting
- Citizens Assembly Meeting
- Healthwatch (BSW) \& CQC intelligence meeting
- Primary Care Commissioning Committee
- GWH and Healthwatch (BSW) quarterly catch up
- Hosted PPG Forum and PPG Chairs Meetings
- Health and Wellbeing Board
- Sanford House Tenants Meeting
- Swindon Care Forum AWP Meeting
- People in Health West of England meeting about online engagement


## Grassroots Meetings

During the quarter we have had to pause all face-to-face meetings due to the COVID-19 lockdown. We did, however, attend two PPG meetings:

- Phoenix Surgery PPG
- Eldene Surgery PPG


## Outcome 2

Working in partnership with other providers to influence commissioners to improve services by using data to identify health inequalities and solutions to addressing gaps. Work to improve the integration between health services in Swindon.

## Projects

- Enter \& View - No enter and views have been carried out this quarter. We are monitoring this closely, as is Healthwatch England, but the health and safety of volunteers, staff and patients and staff of services we visit remain our top priority. We are developing other ideas around engaging remotely with services. We are also very pleased to report that Alex Parker joined the team on 1 June as our new Volunteer Support Officer. She has hit the
ground running and once Enter and View visits resume she will be an integral part of getting these off the ground again.
- Community Pot Projects - we have funded five further organisations to engage with the people they support to find out their experiences of using health and social care services. Please refer to pages $11-12$ to find out more about these.

Patient Participation Groups - Whilst the forum arranged for 16 April had to be cancelled, two meetings have been held with PPG chairs with a third scheduled; and regular updates sent to the entire forum mailing list (over 100) with information about primary care services during the pandemic. This has generated feedback about GP practices, other primary and secondary care services and Covid-19 related issues, some of which is included in detail in this report and all of which is recorded on our CRM database.

We have been invited to join two virtual PPG meetings; and will again be joining the Wyvern PCN PPGs meeting in July.

Swindon Advocacy Movement (SAM) - We have not yet been able to take the Big Lottery Bid application forward as submissions for anything other than COVID-19 emergency applications have been paused. As soon as we get the green light to resume we will pick this up again.

Projects and themes detailed above are agreed at the Advisory Group and link in with The Care Forum and Healthwatch England priorities and KPIs. We also have an element of reactive work from issues that arise.

## Walk-in Centre

The steering group meetings were cancelled as the COVID-19 lockdown started. The closure of the walk-in centre was also brought forward from 31 March to 22 March to respond to the challenges of COVID-19. We have received no feedback from members of the public during this quarter, as visits to services reduced significantly during this period.

## Outcome 3

Deliver an effective and responsive NHS Complaints Advocacy Service, improving patient and user experience and providing information and advice to local residents

During this quarter our NHS Complaints Advocacy Service saw a significant reduction in demand.

The Parliamentary and Health Service Ombudsman (PHSO) had paused work on NHS complaints in March which meant that we could not progress complaints. In addition to this PALS said that complaints could still be made, but that they would not be prioritised.

As a result of this, and the fact that people were using services a lot less, we did not receive any requests for advocacy support in taking complaints forward.

The PHSO has since announced that they would resume work on NHS complaints on 1 July.

We have, however, received 71 pieces of feedback about services throughout this quarter - see pages 2-8 for more on this - and anticipate that requests for advocacy support will increase again in quarter 2.

## Outcome 4

Improve the awareness and profile of Healthwatch Swindon and engage the public (including less heard groups) in informing the shaping of health services in Swindon to ensure there is a greater patient, carer and public satisfaction with these services.

## Nepalese Association

The Nepalese Association completed the survey with 203 people sharing their views. The engagement work for this took place in quarter 4 of 2019/20. This increased our engagement with people from a BAME background and accounted for nearly a quarter of people who share their experiences of health and social care with us in 2019/20.

We typically get the majority of our feedback from people from a White British background. In light of the Public Health England report looking at health inequalities and the impact of COVID-19 on different communities. It is vital that we find more ways of engaging with more people from a BAME backgrounds to hear their experiences of health and social care, to start to address some of these inequalities.

The key findings from this were:

- A request for more interpreters across practices to overcome language barriers
- A request for prescription delivery and alternative ways to get prescriptions
- A request for more information on health eating an exercise

The report can be read by following this link., which also includes an appendix, showing all of the questions asked and the responses received, as well as the demographic data collected.

Our findings have been shared with Lyn Gardner from Swindon Borough Council with a suggestion to set up healthy cookery courses with Nepalese residents. It should be noted that our contact at NAW has been unable to get back into the country since the COVID-19 lockdown.

We have flagged up the issues around language barriers with Kingswood Surgery and Priory Road Medical Centre but further follow up with them and other practices is required.

## Community Pot 2020/21

Healthwatch Swindon commissioned the community pot for 2020/21. Applications from the five organisations were reviewed by our advisory group, who then agreed for the funding to be granted to each of the applicants.

The following organisations were awarded funding:

- Harbour Project (Asylum Seekers and Refugees)
- Swindon and Gloucestershire Mind
- Parkinson's UK Swindon \& District
- Swindon SEND Families Voice
- Swindon Interactive Arts Service (supporting adults with learning disabilities)

The engagement work - asking up to 100 of their members to take part in a bespoke survey - was due to take place between April and June. We have had to be flexible with these dates in light of COVID-19 as face-to-face engagement has had to be postponed.

Two groups - Parkinson's UK Swindon and District and Swindon SEND Families' Voice have, however, completed their surveys. The report for Swindon SEND Families' Voice is being written at the moment and will be published in quarter two.

We heard from 104 members of Parkinson's UK Swindon and District and $\mathbf{1 0 2}$ people from Swindon SEND Families' Voice.

## Parkinson's UK Swindon and District Branch Survey Report

We have completed the analysis of the findings from the feedback we received. Key findings from this are:

- Concern at the length of time people have to wait to get a GP appointment and/or see the clinician of their choice.
- The need for more communication about and support to register for online access to primary care services, appointments and prescription renewal.
- Frustration at the inability to book, say, three months ahead for a regular blood test or jab.
- Concern about access to carer support and respite and for the future of the Hop Skip \& Jump facility.
- Concern about the post Covid-19 backlog of referrals and appointments.
- Evidence of limited knowledge of Swindon Local Offer and information about services available

The full report can be read here.
The Harbour Project have started to engage with its service users to help them complete the surveys. We are also starting to receive paper copies from Swindon Interactive Arts Service, so good progress is being made.

We will continue to support Mind with the project but understand that their services are in high demand responding to the fall-out from COVID-19 and that supporting referrals is their number one priority.

## COVID-19 Survey

In response to the COVID-19 pandemic we joined forces with Healthwatch Bath and North East Somerset and Healthwatch Wiltshire to gather feedback from people during COVID19, asking them a range of questions about getting information about the virus, if they have used services during lockdown, how this was for them or if they have received support from other organisations - for example, to support them with their mental health.

In total we heard from $\mathbf{1 2 0}$ people in quarter 1. The survey was closed on 12 July so we are expecting this figure to have gone up. The findings from this will be analysed and put into a final report.

The three surveys carried out in quarter 1 has meant that we have heard from 326 people, in addition to the $\mathbf{7 1}$ people we heard from via our usual channels.

An overview of demographics from each of the three surveys can be seen in the pie charts below:

$94 \%$ of respondents in all three surveys identified as White British, five identified as Irish, three as mixed (but didn't specify), one as British/ Arab, one said they were Muslim, three as other (but didn't specify), one as Pakistani, two as any other Asian background and one as African.

## HOW WELL IS YOUR ORGANISATION DOING?

Example: This is about the quality of the service that you provide to your client group, what do you have in place to deliver a good service, how well trained and supported are your staff, how do you ensure that the interventions you provide meet the needs of your client group? What evidence do you have for this?

## Raising Awareness of Healthwatch

- Three 'Health Bites' bulletins have been sent out this quarter, one per month.


## Staff Training and Support

Team meetings are now held weekly as we are unable to have the usual daily face-to-face contact. We have one for the Swindon and B\&NES team and one strategic meeting held for Team Managers every Wednesday.

The last Advisory Group meeting was held in April. An interim meeting was held in June when new team manager, Vanessa Scott and new Volunteer Support Officer, Alex Parker, joined the team. This was held so we could introduce ourselves and discuss work priorities and intelligence that had been gathered.

Supervisions are held monthly for all staff.
All staff have an individual work plan which they work to on a day to day basis. Each Healthwatch project under The Care Forum works to a dashboard which is presented to the Board and RAG rated to show our KPIs.

KPIs have been re rag-rated to reflect the current situation and a risk spreadsheet has been completed and returned to Swindon Borough Council, as requested, and will be on a weekly basis until the current pandemic situation changes.

WHAT DIFFERENCE IS YOUR ORGANISATION MAKING TO THE USERS OF YOUR SERVICE?
What outcomes are you delivering and sustaining for your client group? How do you know you make a difference?

## Volunteers

- Healthwatch have 22 volunteers.
- We received one new volunteer enquiry this quarter but this did not progress as the individual lives in Wiltshire.
- Volunteers have represented Healthwatch Swindon at virtual events including; Citizens Assembly, Swindon Care Forum, PPG forum, PPG Chair meetings, local

Total of nine volunteer hours worked this quarter which is an increase of $\mathbf{2 1 2 . 5}$ hours from the previous quarter. Please note that this figure is likely to be higher: one of our volunteers has said he has worked 14 days but we have been unable to get a breakdown of the actual hours he has worked. We will provide a further update to this once we have this.

Volunteers have attended significantly less meetings this quarter due to COVID-19. This is due in part to cancellations, and due in part to some of the volunteers not being online, and therefore not being able to attend anything virtually.

One volunteer attended the regional Citizens Assembly with two staff members. This is usually held in Taunton, but for the aforementioned reasons this was done virtually.

During the next quarter Healthwatch Swindon and Healthwatch B\&NES will continue to share good practice and look at how we can incorporate further, possibly accredited, training for the volunteers. Once applications are being accepted again we will develop our Big Lottery bid to incorporate training to enhance the bid (following feedback from the Big Lottery) to include training for those with learning disabilities and Autism to take them closer to the work market.

## WHAT ARE THE CHALLENGES FOR YOUR ORGANISATION?

## - Staffing Issues/Opportunities

The biggest challenge for this quarter has been the issues presented by COVID-19. We have seen a reduction in feedback via our usual channels but this has been boosted by our Community Pot Projects and the COVID-19 survey.

The Volunteer Support Officer resigned in January, leaving a gap in staffing. We have since filled this role and warmly welcome Alex Parker to the team who has slotted in really well, bringing lots of ideas and enthusiasm to the volunteers and the team.

Vanessa has taken over as manager, which means that the Communications Officer role is now vacant. This is being advertised with interviews expected to take place on $6^{\text {th }}$ and $7^{\text {th }}$ August.

Jo has been responding to a lot of the calls and emails we have received. He has also been part of the Silver Cell team giving support to Swindon residents in lockdown. In addition to this he has been attending strategic meetings and writing up the reports for the community pot projects.

Jim has been responding to feedback, as well as supporting the Silver Cell volunteer team, as well as completing his City and Guilds advocacy diploma, to further enhance his skill set.

The team format has changed and is now:

| Manager (B\&NES \& Swindon) | 37 hours | Vanessa Scott |
| :--- | :--- | :--- |
| VSO | 24 hours | Alex Parker |
| Engagement and Development <br> Officer | 18.5 hours | Jo Osorio |
| Advocate | 20 hours | Jim Hogg |
| Information and Marketing <br> Worker | 18.5 hours | VACANT |

- Advisory Group

This quarter Advisory Group was held virtually on $22^{\text {nd }}$ April 2020. All members of the group were present, no members of the public requested to attend. Our work priorities were agreed during this meeting and these can be viewed here.

- New Website

Healthwatch England have carried out work on our website - now to be rolled out across the network - as most Healthwatch had seen a significant drop in traffic due to the fact the redirects had not been put in place correctly. This has seen an increase of $104 \%$ in traffic since the last quarter.

## Coming in Q2 2020/21 - some work is dependent on lockdown being ease

- Continue to carry out recommendations from the NHS Long Term Plan in partnership with the BSW STP.
- Publish the community pot project reports for Swindon SEND Families Voice, and Swindon Interactive Arts Service.
- Work with other local Healthwatch to carry out an Enter and View at GWH, following negative feedback. This was put on hold. A meeting is in the diary to discuss this with the other Healthwatch on 16 July.
- Complete Big Lottery application (if applications are being accepted again) to support a project for those with Learning Disabilities to carry out Enter and View visits from their perspective. This would be in partnership with specialist agencies.
- Support Harbour Project and Mind with their successful community pot applications.
- Develop a development and learning strategy to support Healthwatch volunteers in their personal growth, giving them further opportunities and developing capacity within Healthwatch.

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| Provider Specific Data |  |  |  | Q1 |
| :--- | :--- | :--- | :--- | :--- |
| Q2 | Q3 | Q4 |  |  |
| Number of paid staff delivering contract | 4 |  |  |  |
| Number of paid staff hours spent delivering contract | 1,237 |  |  |  |
| Number of paid staff hours lost through sickness | 13 |  |  |  |
| Number of paid staff off sick | 1 |  |  |  |
| Staff turnover - number of staff members leaving | 2 |  |  |  |
| Staff turnover - number of new staff members | 2 |  |  |  |
| Number of Volunteers delivering contract (added <br> value) | 22 |  |  |  |


|  |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- |
| Number of Volunteer hours spent delivering contract <br> (added value) | 9 |  |  |  |
| Number of complaints received against the service | 0 |  |  |  |
| Number of complaints resolved | N/A |  |  |  |
| Number of complaints upheld | N/A |  |  |  |
| Number of current DBS checks | 0 |  |  |  |


| KPI | Measure | Q1 FIG | Q2 FIG | Q3 FIG | $\begin{aligned} & \hline \text { Q4 } \\ & \text { FIG } \end{aligned}$ | RAG | Customer FEEDBACK / HEALTHWATCH COMMENTS |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Number of contacts providing feedback on services and gaps in service each quarter. | 150 individual contacts. | 397 |  |  |  |  |  |
| Increase social media presence. | 3000 website visits* excludes long term plan <br> At least 3 posts on Facebook per week (36 per quarter). Likes <br> At least 3 posts on Twitter per week (36 per quarter). Followers <br> At least 2 posts on Instagram per week (24 per quarter). | 2280 <br> 103 <br> 395 <br> 123 <br> 3061 |  |  |  |  | We have not started to use Instagram yet. $0$ |
| One current survey running and published on website. | Attend 2 events to encourage completion of current survey. | COVID-19 survey |  |  | . |  | No events attended by COVID-19 survey was disseminated amongst our VCSE networks. |


| Advisory Group <br> Meeting. | 1 per quarter. | 22.4 .20 |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| Produce e-bulletin <br> 'Health Bites' | Produced monthly, <br> looking to increase <br> subscription | 1522 |  |  |  |
|  | 100\% representations at: <br> Health and Wellbeing <br> Board <br> Scrutiny Committees <br> Primary Care <br> Commissioning <br> Committee <br> Meeting <br> attendance | All <br> attended <br> where <br> possible <br> details in report |  |  |  |


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