



Healthwatch Cornwall Annual Report 2013/14



© Healthwatch Cornwall 2013

The text of this document (this excludes, where present, the Royal Arms and all departmental and agency logos) may be reproduced free of charge in any format or medium providing that it is reproduced accurately and not in a misleading context.

The material must be acknowledged as Healthwatch Cornwall copyright and the document title specified. Where third party material has been identified, permission from the respective copyright holder must be sought.

Healthwatch Cornwall is authorised to use, and has been using, the Healthwatch trademark licence.

Any enquiries regarding this publication should be sent to enquiries@healthwatchcornwall.co.uk

This report is publicly available and can be downloaded from www.healthwatchcornwall.co.uk - or call 0800 0381 281 to request a copy to be sent by post.

Contents

- 2 Foreword
- 4 What is Healthwatch Cornwall
- 6 Statutory activities
- 12 Statutory powers
- 14 Engaging with people
- 17 Communicating with people
- 18 Volunteers
- 21 Partners and Freephone Services
- 22 Finances and future plans

Foreword



**Welcome to
Healthwatch
Cornwall's first
Annual Report.**

**“Putting you
at the heart
of health and
social care.”**



Healthwatch Cornwall's first year has been invigorating, challenging and above all rewarding for those involved, but hopefully more so for those we have represented.

Having joined as Chief Executive in November 2013 it was encouraging to become part of an enthusiastic team of staff and volunteers.

The foundations had been laid by them, and acting director Jayne Zito, and it is from this, and with their support, that I have been able to steer the organisation to where it is now.

Healthwatch Cornwall could not exist however without input from people who live in the county. It is their experiences and stories that lead the work we do, and they are at the forefront of all of our decisions.

Through listening to those who use services and taking action by escalating concerns to the commissioners and providers, or the Care Quality Commission, NHS England, Healthwatch England or even to the Secretary of State for Health, we have real power to get things changed for the better, when necessary. All health and social care providers are now investing in patient feedback as events such as Mid Staffordshire showed the terrible impact not listening can have.

Healthwatch Cornwall has developed strong partnerships within the voluntary and community sector and works as a critical friend to influence and inform commissioners and providers.

I am proud of what we have been able to achieve in our first year and I hope you will be too.

DEBBIE PRITCHARD
CHIEF EXECUTIVE



I look forward to working closely with you and making a real difference to the people we serve, particularly those with the least or living in difficult circumstances. Best wishes for a successful future.

Felicity Owen, Director, Public Health Cornwall

Healthwatch Cornwall is the independent people's champion for health and social care in the county. It is also part of the country's 152 Healthwatch collective that feeds into the national representative, Healthwatch England.

Excellent health and social care is essential for people in Cornwall, and they are best able to say what they want from their care.

That is why all of Healthwatch Cornwall's work starts with the person's point of view.

The first annual report outlines what has been achieved so far and how, and what the organisation hopes to achieve as it develops and grows.

This includes:

- case studies highlighting what can be done by working together with commissioners and providers.
- an explanation of the role of Healthwatch Cornwall, how it is made up and funded, who is involved and its financial activity from April 2013 to March 2014.

Despite constant cuts to funding and changes to service provision, its role is to keep on championing the rights of everyone in Cornwall: children, young people and adults, with a particular responsibility for those who are often not heard.

By holding the local health and social care system to account, Healthwatch Cornwall aims to ensure people in the county are getting the best care possible.

In 2014, and beyond, it will encourage more individuals and organisations to take part and help it to help them by bringing about positive change when necessary, while also recognising their rights to consistent, excellent and, above all, safe and reliable care.



**The story
so far...**



Healthwatch Cornwall has been created in response to the Health and Social Care Act 2012.

It has been developed from the county's former Local Involvement Network (LINK) and is funded by the Department of Health via Cornwall Council.

Healthwatch Cornwall is one of 152 local Healthwatch, with Healthwatch England providing representation at a national level.

Cornwall Council worked closely with LINK, the public, and health and social care agencies to create the model for Healthwatch Cornwall.

It has been set up as a Community Interest Company for the benefit of Cornwall's varied communities. Initially, it was hosted by Cornwall Rural Community Council but the decision was made to end the contract in October 2013. Healthwatch Cornwall moved to new premises in November 2013.

Healthwatch Cornwall has rights in law to Enter and View adult and children's health care settings and adult social care settings.

It must also receive a response from statutory agencies within 20 working days to any formal recommendations it makes.

Along with these statutory powers, Healthwatch Cornwall has influence at a number of relevant boards, committees and groups, making it well placed to inform and influence decisions.

Since its beginnings it has developed partnerships with a number of health and social care organisations to gather further feedback from a wide range of people.

In its first year it had four core Expert Partners: Age UK Cornwall, Pentreath Ltd (mental health support), Young People Cornwall and Disability Cornwall.

Age UK Cornwall was also awarded the contract to deliver Healthwatch Cornwall's signposting freephone service.

To develop its work, Healthwatch Cornwall had a core staff of 5 and in its first year had up to 44 volunteers, including its non-executive board members and Steering Group.

It works by:

- gathering public comments which are fed into its secure database
- reviewing data via its Steering Group to determine trends and work to take forward for further research
- utilising its Board to deliver strategic support, particularly around finance, safeguarding and policies
- running effective outreach, communications, research and volunteer programmes

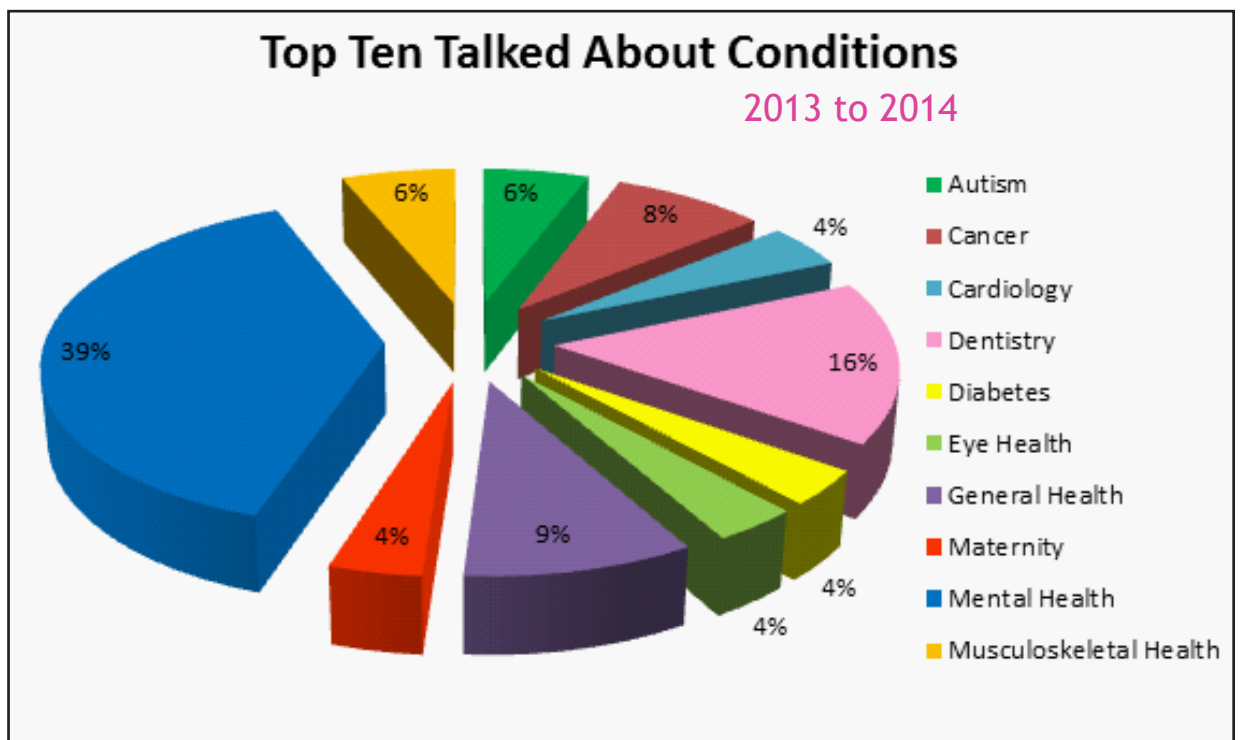
What has been achieved

Healthwatch Cornwall has worked hard in its first year to bring about positive change in response to what people have told it.

To do this it has held numerous outreach events, given talks, and developed its working partnerships with Age UK Cornwall, Pentreath Ltd, Young People Cornwall and Disability Cornwall. It set partners targets and created Healthwatch Cornwall Champion roles within each partner organisation to spread the word and gather feedback. Read more about what partners have been doing on page 21.

It has also liaised with other health and social care organisations to further collect sector opinion. It held two Information Sharing events in December 2013 for groups representing children and those for adults. These events were attended by 26 organisations to discuss how they can also feed in to Healthwatch Cornwall to represent the people they work with.

Healthwatch Cornwall has endeavoured to build strong working relationships with commissioners and providers such as NHS Kernow and Cornwall Council's Adult and Children's health and social care departments by being a "critical friend" to them. It has also nurtured its approach to the Care Quality Commission, NHS England, the Health and Wellbeing Board, the Health and Social Care Overview and Scrutiny Committee, and numerous other relevant boards and groups.



The following case studies give a taste of what Healthwatch Cornwall has achieved in its first year.



“I am aware that Healthwatch Cornwall uncovered a gap in the services meant to deliver a diagnosis of autism in children. That work resulted in a really practical solution so that families could access a diagnostic service without losses to other services in the area.”

Earl Howe - House of Lords
Lords Hansard by date: November 5, 2013

Case Study: Autism

Issue: A lack of a diagnostic Autism Spectrum Disorder (ASD) service in the county for children aged five and above who did not have a mental health issue.

Activity: Healthwatch Cornwall received feedback in regard to the above in April 2013. It discovered that the service previously provided by Cornwall Partnership Foundation Trust's (CPFT) Child and Adolescent Mental Health Services team for diagnosing ASD for children, as described, had not been available since December 2012. It learnt that up to 200 families were struggling to get the assistance they needed and, ultimately, the support their child required.

Healthwatch Cornwall wrote to the commissioners NHS Kernow asking for further clarification and following this the decision was made to escalate the issue to Cornwall Council's first Health and Social Care Overview and Scrutiny Committee meeting held on June 4, 2013.

Interim solutions were then put in place by NHS Kernow such as paediatric assessments to be carried out by Derriford Hospital on referral from GP, and educational psychologist assessments provided by the Council through the commissioner.

In July an Extraordinary Meeting of the Health and Social Care Scrutiny Committee heard that a long-term solution from NHS Kernow, using NICE best practice guidelines, was due to be in place by September 2013.

Outcome: To meet longer term needs the commissioning group worked with CPFT to establish a multi-agency team to include a consultant psychiatrist, clinical psychologist, speech and language therapist and occupational therapist. It also aimed to create a single point of referral for all requests for an ASD assessment regardless of age.

This resource was in place by October 2013.

Read how this service has operated in its first six months at the [You Said - We Did](#) page of the website.

Healthwatch Cornwall also sought confirmation that the proposals would not mean other services losing out, which was guaranteed by NHS Kernow.

This was highlighted at a parliamentary Health Questions session as a successful example of what Healthwatch can achieve.

Visit Healthwatch Cornwall's [You Said - We Did](#) and press release pages on its [website](#) to read fuller details of this outstanding work.

Case Study: Cross border services

Issue: People in the North and South East of Cornwall were struggling to access services.

Activity: Issues collected indicated that people found it harder to access health and social care services the closer they live to the Devon and Cornwall border.

Healthwatch Cornwall volunteers conducted a letter drop in the area and street surveys to gather further feedback in five towns: Bude, Launceston, Callington, Liskeard, and Torpoint.

Outcome: More than 690 questionnaires were completed by end March 2014 and a final report, to include any applicable recommendations is expected to be finalised by June 2014.

Trends in feedback received by end April, included:

- Lack of awareness of minor injuries units
- Waiting times to join an NHS dentist
- Access to Derriford via public transport
- Cost of parking at Derriford

Healthwatch Cornwall will publish its findings and the report on its website.

Case Study: Care.data

Issue: Public awareness of an NHS personal data extraction proposal.

Activity: Healthwatch Cornwall played a part in raising more awareness, including media coverage, around a scheme to extract personal records from GP practices.

The care.data project, run by NHS England and the Health and Social Care Information Centre, was due to start in March 2014.

In February 2014, Healthwatch Cornwall raised concerns that the promotion of the scheme that extracts identifiable information from GP records had not been sufficiently publicised, that many people did not even know it was happening or that they had an opportunity to opt-out, and that there may be the potential to sell on details to third parties.

Chief Executive Debbie Pritchard said:

“Research is the backbone of Healthwatch Cornwall’s work and we appreciate how important data is when reviewing services, but people choose to share their experiences with us to help make positive improvements in care where needed.

“Our issue with this scheme is around the lack of any major publicity and that it is an opt-out process rather than opt-in, as well as clarity around which third parties could access the information and how identifiable it is.”

Outcome: Thanks to pressure from Healthwatch, both locally and nationally, the public and other organisations, this proposal has been delayed until autumn 2014.



Case Study: Not Lonely This Christmas campaign

Issue: Healthwatch Cornwall learnt that 450,000 people aged 65 and over in the UK would face Christmas alone in 2013 following a report commissioned by Age UK.

Activity: In response to this, Healthwatch Cornwall launched its Not Lonely This Christmas appeal. Working with its partner Age UK Cornwall it encouraged people to spare some time during the festive period and beyond talking with, or helping, older people in their communities. It also urged people and businesses to provide a gift, or service, to the Not Lonely This Christmas appeal. All donations were part of the campaign's Secret Santa to be delivered to older people attending Age UK Cornwall's day centre festive celebrations.

Outcome: Numerous donations were received from individuals and organisations such as Cornwall Healthy Schools Programme. These were handed out by Healthwatch Cornwall at five Age UK Cornwall day centre Christmas parties. The campaign also attracted good media coverage with local print and radio coverage. BBC Spotlight TV also filmed a feature talking with older people about their feelings of loneliness, which was aired during the Christmas period.





Case Study: GPs and their support for mental health

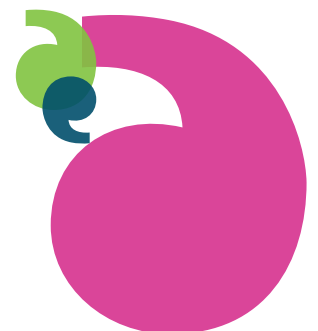
Issue: How GPs deal with people who visit them about mental health problems.

Activity: This work related to people who have suffered from mental health problems in the past, or currently, including those with depression, alcohol or drug misuse, or self-harm.

Healthwatch Cornwall had 223 responses by end of March 2014 from across the county, including feedback gathered through its partners Young People Cornwall and Pentreath Ltd, and also via Cornwall Rural Community Council, Invictus Trust and Outlook South West.

A number of volunteer organisations were also contacted to help raise the profile of the research, along with social media and Healthwatch Cornwall's participation in the national Time to Change event that challenges mental health stigma and discrimination, with its Time for Tea - Time to Talk drop-in event.

Outcome: The final report is expected in June 2014 but the most prevalent concerns as of end March 2014 relate to those under 17 and over 65 finding it hard to book an appointment with a doctor due to a "gatekeeper mentality" from the receptionist, and 10 minutes not being long enough for mental health related discussions.





Thank you for advertising that we want to gain views from people who use community health services. I have received some response already and am pleased that your suggestion worked.

Lynda Kirtland
Care Quality Commission

Recommendations made to Healthwatch England and the Care Quality Commission.

In its first year Healthwatch Cornwall made 2 recommendations to Healthwatch England and 2 to the Care Quality Commission (CQC).

It recommended that Healthwatch England looked into GPs charging people up to £70 for letters in relation to their claims for benefits through the Department of Work and Pensions (DWP), and the way in which claims have been handled by ATOS, the firm commissioned by government to process them.

It asked that Healthwatch England look into whether this is a nationwide issue and that it requests a formal meeting with the DWP to highlight this specific issue affecting patients. This follows on from the formal letters it sent to NHS England in July 2013.

Healthwatch England informed Healthwatch Cornwall that an independent review of the Work Capability Assessment was to be made and that it would inform this review of the concerns raised by Healthwatch Cornwall, and provide a copy of the response it receives.

Healthwatch Cornwall also escalated concerns about Care.data (see case study on page 8 for full details) to Healthwatch England and this resulted in a national turnabout by those instigating the data extraction.

Healthwatch Cornwall supplied a report relating to people's experiences at the Royal Cornwall Hospital to the CQC to assist it with its inspection of the Royal Cornwall Hospital Trust in January 2014.

The CQC responded to this by using the information provided in its inspection work.

A concern relating to a care home was also forwarded to the CQC and Cornwall Council's Adult Social Care for further investigation.

Visit www.healthwatchcornwall.co.uk/you-said-we-did to find out more.

When Healthwatch Cornwall has used its statutory powers

Healthwatch Cornwall, as all Healthwatch, has statutory powers through the Health and Social Care Act 2012.

This includes the right to be responded to within 20 working days when formal recommendations are made to commissioners and/or providers, and the ability to Enter and View adult and children's health care settings and adult social care settings.

Healthwatch Cornwall can escalate any concerns it has if a satisfactory response is not forthcoming to Healthwatch England, the Care Quality Commission and ultimately the Secretary of State for Health.

It worked closely with statutory agencies that plan and run health and social care services, developing good working relationships that help to ensure public opinion is heard.

In 2013 to 2014 Healthwatch Cornwall attended more than 30 statutory meetings, wrote 8 formal letters, made 4 recommendations and took part in 3 consultations. It received 8 formal responses to issues raised on topics such as Personal Budgets.

Healthwatch Cornwall made one Freedom of Information request to the Royal Cornwall Hospital Trust in relation to attendances at the Emergency Department.

Visit the [consultation website page](#) to read more about Healthwatch Cornwall's work around Poltair Hospital, the Children's Services Review and the Child and Adolescent Mental Health Service Inquiry.

The Health and Wellbeing Board

Healthwatch Cornwall has two seats on Cornwall's Health and Wellbeing Board.

It has attended 4 meetings of this board since April 2013.

During this time Healthwatch Cornwall has reported formally on its activity twice. The second time included the recommendation that the Disabled Children's Charter be adopted by the Board.

This was a contentious issue but with Healthwatch Cornwall's support, Councillor Andrew Wallis was able to ensure this was signed four months after it was first raised by Healthwatch Cornwall.

To support the volunteer Board director's attendance at this meeting, full papers and staff assistance have been made available.

Healthwatch Cornwall is involved in agreeing any proposed recommendations on this Board. It has been involved in overseeing the Health and Wellbeing Board's communications strategy and a joint communications strategy for all associated with it and the Living Well scheme.

Details about [Living Well](#) can be found at Healthwatch Cornwall's website or via NHS Kernow.

Visit [Cornwall Council](#) to find out full details about the Health and Wellbeing Board meetings and minutes.



Thank you for sending me the details of the case...it sounds as if Healthwatch Cornwall has certainly been doing some sterling work by intervening in this difficult case.

Tony Hogg,
Police and Crime Commissioner
Devon and Cornwall Police

The Health and Social Care Overview and Scrutiny Committee

Healthwatch Cornwall was instrumental in using its statutory powers to escalate concerns via this channel very early on in its first year.

Having heard about a gap in Autism Spectrum Disorder diagnosis services for children aged five and over, it presented its case to this Committee, which ultimately led to a new service being set up via NHS Kernow.

Read the case study on page 7.

Healthwatch Cornwall has attended all meetings of this committee.

Other statutory meetings

Healthwatch Cornwall has attended and participated in a number of other board and strategic level meetings.

This includes the Patient Experience Committees at Derriford Hospital and at the Royal Cornwall Hospital.

Representatives from the organisation have also input into the Quality Surveillance Group, which looks at issues relating to quality of health services and the Local Dental Network (LDN), which is made up of a number of dental commissioners, paediatrics specialists, primary and secondary care specialists, educational representatives and patient representation from across the south west Peninsula.

This group aims to ensure that quality of care occurs in both the primary and secondary sector of dentistry and address areas that don't meet the standards.



Working with the community



It's all about you

Gathering feedback from people in Cornwall to make health and social care work for them is the reason Healthwatch Cornwall exists.

To get the best out of services in the county, Healthwatch Cornwall has devised a number of different ways to engage with people, and hopefully enable everyone to find a way to have their say that suits them.

In 2013, the people's champion developed a marketing strategy that included awareness raising via promotional materials available at GP surgeries, libraries, hospitals and other health and social care organisations, as well as running publicity campaigns in hospitals and on local radio. It also created a varied outreach programme that saw more than 60 events, meetings and workshops attended (not including formal representation at statutory meetings or partner outreach).

Its staff, partners and volunteers promoted the organisation and gathered feedback at events such as the Royal Cornwall Show, The Big Event for Carers and Play Fest and at meetings with groups such as The Royal British Legion, the Befriending Forum and patient participation groups. This helped to ensure a wide age range and cross section of people was engaged with.

Its dedicated Freephone signposting and information number received 692 calls, while its website and social media on Twitter and Facebook enabled online users to get in touch in a way they preferred.





Seldom heard?

To ensure the voices of those seldom heard, vulnerable or harder to reach were heard, Healthwatch Cornwall put in place a number of measures.

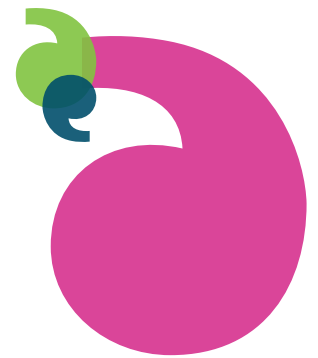
Working through its partner Age UK Cornwall it gathered 38 comments from older people, with its Not Lonely This Christmas 2013 campaign as highlighted on page 9 also raising awareness around issues pertinent to older people. Age UK Cornwall also organised more than 20 meetings or publicity opportunities during 2013.

Young People Cornwall (YPC) arranged 11 meetings, including a consultation for young people in February 2014 to find out how they think Healthwatch Cornwall should engage with them. It also worked collaboratively with Cornwall Youth Work Partnership to garner young people's interest in health and social care and a report is due in April 2014. Overall, YPC gathered 68 comments as a Healthwatch Cornwall representative.

Pentreath Ltd helped Healthwatch Cornwall at its Time for Tea - Time to Talk event designed to get people talking about mental health. It also gathered 23 feedback comments but its role was adjusted in November 2013 so that it promoted the organisation but did not collect data.

Disability Cornwall has promoted Healthwatch Cornwall via its website and social media and attended more than 10 meetings. It has provided 27 comments gathered through its various networks and work on behalf of Healthwatch Cornwall.

SEAP, the company that runs the Health Complaints Advocacy Service supplied 36 comments in the last quarter of the year.



Healthwatch Cornwall has seen its communications grow and develop during its first year.

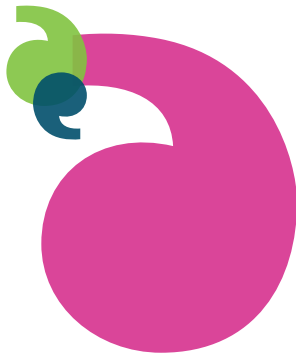
It has built its reputation as a credible voice for the media to utilise when looking for comment in relation to topical news stories. In 2013 it took part in more than **90** interviews in print, on radio and TV and produced more than **40** press releases and statements.

Its social media presence has also grown dramatically with Twitter and Facebook providing a great way to connect with sector organisations and interested individuals. During 2013 more than **1,180** Tweets, Favourites and Retweets were made/received and Twitter followers grew from 540 in June 2013 to **935** in March 2014. To meet Facebook rules a new 'business' page had to be created in late 2013, which had **144** likes at the end of March 2014. The old 'personal' Facebook page had 1,851 'friends', all who have been directed to the new page. **567** posts and interactions were made on Facebook during the year. Scan the 'QR codes' on the right with a smart phone to go to the sites and join in the conversations.

The website has been another way to engage with people and share news, updates and gather feedback and members. It had **6,281** unique visitors from April 2013 to March 2014.

Healthwatch Cornwall produced **213** communications and promotional resources such as posters and press releases, including 12 monthly newsletters that were sent to the ever increasing membership, which at end March 2014 stood at **1,355**.





Who's Who

Non-executive Board members 2013/14

Chair - Guy Chappell (up to February 2014)
Vice Chair - Mark Richardson
Director - John Evers
Director - Nadia Hewitt
Director - Roger Sinden
Director - Margaret Abban
Director - Jon McLeavy

Steering Group 2013/14

Chair - Jeremy Preedy
June Hackett
Teresa Davies
Karen Pardoe
Shirley Polmounter
Sandra Ward

The Steering Group is also joined by staff, directors John Evers and Margaret Abban, Healthwatch Cornwall Champions from its partners, and other health and social care organisation representatives.

You can read full Terms of Reference and Governance for the Steering Group and the Board's Articles of Association at:

www.healthwatchcornwall.co.uk/whos-who/

Enter and View

The ability to Enter and View adult and children's health services and adult social service settings is one of Healthwatch Cornwall's legal rights.

These reviews of services speak directly to those accessing them or working within them to build a real-time picture of what people think of the care being provided.

They are not an inspection process but a means to garner a more emotive response to services rather than a tick-box exercise.

To ensure they are carried out efficiently and appropriately Healthwatch Cornwall conducted a thorough recruitment scheme for its Enter and View volunteers in 2013/14.

This involved an intensive induction process for all those who wanted to take on this role, with a view to begin Enter and View work from June 2014.

Up to end March 2014, Healthwatch Cornwall's Enter and View Visitors were:

Julie Brewer
Patricia Brocklebank
Michele Brown
Kathy Doeser
Patricia Hamling
Jane Harvey
Pamela Pracey
David Simpson
June Hackett

Visit www.healthwatchcornwall.co.uk and go to the **Enter and View** section for more details.



The induction session was enjoyable with sufficient background knowledge to give me a feeling of knowing exactly what I was going to be doing and that I would be fully supported by the team. Thank you.

Anonymous feedback from Enter and View volunteer

Healthwatch Cornwall representatives at other health and social care meetings as of end March 2014.

Health and Wellbeing Board - two seats: John Evers and Debbie Pritchard

Health and Social Care Scrutiny Committee - two seats: Margaret Abban plus one unnamed representative

Quality Surveillance Group: Debbie Pritchard or deputy

Mental Health Expert Reference Group: Paul Reeve, Pentreath Ltd

Customer Journey Stakeholder Group: Unnamed representative

Patient Experience Committee, Derriford: Frank Trew

Patient Experience Group, RCHT: John Evers

Derriford PLACE Working Group: Frank Trew

Royal Cornwall Hospital Trust Board: Margaret Abban



Volunteers are invaluable in helping Healthwatch Cornwall achieve its aims. From the community volunteer out on the street collecting experiences to the board member overseeing policies and governance, all have played a part in nurturing and guiding the company through its first year.

Volunteers have helped deliver Healthwatch Cornwall's statutory activities by attending events, collecting information for research surveys and engaging directly with the public.

The board, made up of people with first-hand experience of health and social care, has overseen governance structure and policies, and guided and informed how strategic decisions are made.

It held 9 meetings in its first year, some chaired by Guy Chappell who stepped down in February 2014. The Chair role was still vacant at March 31, 2014, with the vacancy scheduled to be advertised in early June 2014.

Healthwatch Cornwall's Steering Group has had 4 meetings up to end March 2014. It determines the work undertaken in response to feedback gathered. By reviewing this data the group determines the best ways in which to gather further information; the time and costs associated with research activities; whether request for more information, report or recommendation are made; which premises to conduct Enter and View at; and when to refer a matter to the Overview and Scrutiny Committee.

Three task groups (two are featured as case studies on page 8 and 10) looking at GP and mental health patients; cross border issues; and urgent care services were instigated, with results and recommendations expected in mid 2014.

Examples of volunteer input can be seen in the case studies highlighted, meetings attended and the development of an Enter and View schedule of visits to begin in June 2014.

Policies relating to volunteers and Enter and View can be seen on the [Policies page](#) of the website.



Expert Partners

Healthwatch Cornwall wanted to work closely with the voluntary and community sector and other health and social care organisations from the start.

To help it reach out to a diverse audience Healthwatch Cornwall invited interested parties to apply to become a partner.

From this process, Age UK Cornwall was chosen to represent older people and to provide the Freephone signposting phone line service; Disability Cornwall was chosen to represent those with disabilities; Pentreath Ltd was chosen as a representative of mental health issues and Young people Cornwall was selected to ensure young people's voices were also heard.

Each organisation appointed a Healthwatch Cornwall Champion to help spread the word and gather feedback.

Healthwatch Cornwall also decided that it would be able to spot purchase support to represent diverse communities and issues on a needs basis.

Partners were allocated the following amounts to support them in employing a Healthwatch Cornwall Champion to gather feedback and/or share details about the company.

AGE UK CORNWALL = £57,864.43 (INC. FREEPHONE SERVICE PAYMENT)

YOUNG PEOPLE CORNWALL = £9,535.84

DISABILITY CORNWALL = £6,660.74

PENTREATH LTD = £7,742.88

Its partners' registered offices and contact details are:

Age UK Cornwall
Boscawen House, Chapel Hill, Truro
Cornwall. TR1 3BN. 01872 266388

Disability Cornwall
Guildford Road Industrial Estate, Hayle.
TR27 4QZ. 01736 756655

Pentreath Ltd
Narrow Lane, Newquay. TR8 5EE.
01726 862727

Young People Cornwall
Lemon Street, Truro. TR1 2PE.
01872 222447



Summary of accounts

Healthwatch Cornwall’s financial year runs from April 1 to March 31. It has been funded by the Department of Health, via Cornwall Council for a period of three years up to 2016.

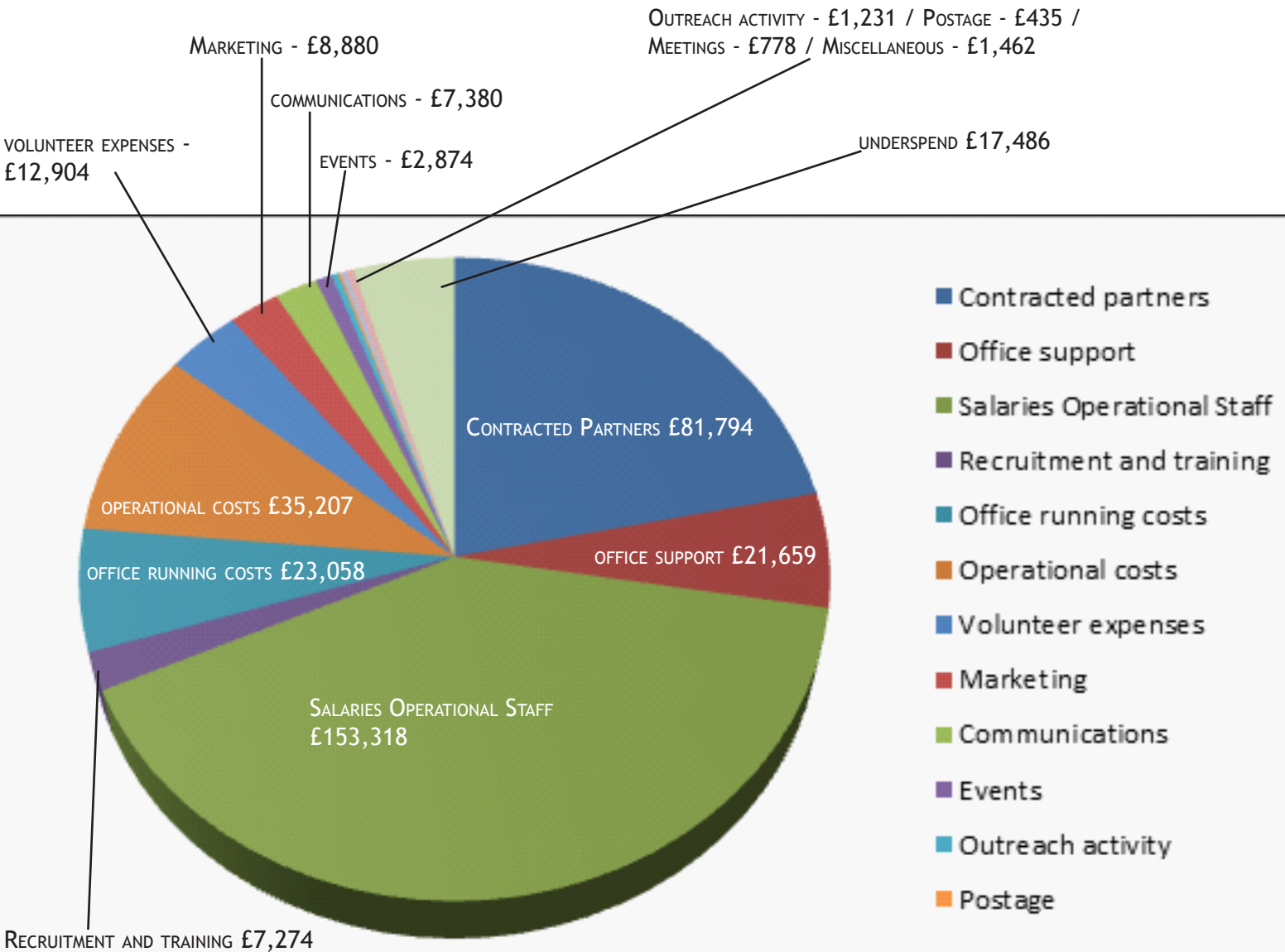
Part of the Healthwatch Cornwall budget is managed by the Steering Group, with all finances overseen by the Board of Directors.

INCOME FOR 2013 to 2014
£336,287.39

EXPENDITURE FOR 2013 to 2014
£317,429.37

In the first year of Healthwatch Cornwall there was an underspend of £17,486.42 in relation to caution over tax implications on business support functions.

Healthwatch Cornwall’s allocation was broken down and spent in the following ways:





“Those that attended gave fantastic feedback regarding the advice and information that they were given by you all.”

Tim Roe - Home Instead Senior Care speaking about Healthwatch Cornwall attendance at dementia event

Future plans

In 2014, and beyond, Healthwatch Cornwall aims to encourage more people to take part and help bring about positive change in health and social care services.

It intends to help people to recognise their rights to consistent, excellent and above all, safe, care.

To do this it will, among other plans, aim to work with more community partners, begin its Enter and View schedule in earnest, hold a large scale public information event, take on more staff to support volunteers and cover further operational needs, recruit new volunteers, focus on engaging with people classed as harder to reach and look to input in to national projects.

Healthwatch Cornwall also aims to bring its Freephone signposting phone service in-house.

It will also develop and grow its website, social media, PR and marketing activity to generate further interest and reach those who have yet to learn about the opportunity it presents to be heard by commissioners and providers.

By staying abreast of current services, and potential changes to services, it will be the place for people to discover what is happening locally to health and social care.

Healthwatch Cornwall will remain committed to:

“Putting you at the heart of health and social care.”



Healthwatch Cornwall

Mansion House,
Princes Street, Truro,
Cornwall, TR1 2RF.

0800 0381 281

enquiries@healthwatchcornwall.co.uk

www.healthwatchcornwall.co.uk

Company Number: 8399730