

Healthwatch Oxfordshire Board of Directors

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| Date of Meeting: 24 th May 2016 | Paper No: 5 |
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| Title of presentation: Updated Workplan |
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| This paper is for | Discussion | | Decision | x | Information | |
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| Purpose and executive summary (if longer than 3 pages): This workplan demonstrates how Healthwatch Oxfordshire will deliver on its strategy during the year 2016/17. |
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| Financial implications of this paper: Delivery costs as included in the 2016/17 budget |
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| Actions required: The Board is recommended to approve the draft workplan |
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| Author: Carol Moore |
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Healthwatch Oxfordshire Workplan, 2016/17

Introduction

Our mission: Healthwatch Oxfordshire (HWO) exists to be the independent champion and watchdog for health and social care users in Oxfordshire.

Our vision is that: The people of Oxfordshire are shaping their own health and social care services.

To fulfil our mission and work towards our vision, we will:

1. Find out about local people's experiences of using local health and social care services.
2. Use information about local people's experiences to provide independent and informed advice to relevant local and national organisations about how local services need to change.
3. Help to hold those in charge of local health and social care services publicly to account for their agreement to improve services, and to formulate policy and strategy, in line with our advice.
4. Provide advice and information to individuals about access to local care services.

We are also guided by our statutory duties:

According to Section 221(2) of The Local Government and Public Involvement in Health Act 2007, Local Healthwatch are corporate bodies and within the contractual arrangements made with their local authority must carry out particular activities as set out below:

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.

According to our funding agreement starting in the 2016/17 financial year we will undertake to carry out our statutory duties by:

1. Advocating for high-quality and timely inclusion of Oxfordshire residents and service users in local decision-making processes, including informal and formal processes;
2. Conducting at least one major or two small projects into the quality of local health and/or care services; making recommendations for service improvements where necessary;
3. Maintaining a regular outreach programme with members of the public, service-users and voluntary sector partners;
4. Working in partnership with voluntary sector colleagues to engage with seldom heard groups;
5. Routinely analysing ongoing feedback received from our outreach programme or through unsolicited feedback, reporting the findings to local providers and commissioners;
6. Working with partners, and developing our website and social media networks to ensure an effective information sharing and signposting function;
7. Working closely with local CQC inspectors to provide evidence to their inspection programme; and
8. Actively reporting to or participating in local oversight committees, including but not limited to the Commissioning Board, Health & Wellbeing Board and Health Overview and Scrutiny Committee.

Based on the above framework, a review of the strategy approved by the Board at their November Board meeting, and the results of the 360 review, the staff team recommends the following work plan and budget for 2016/17 financial year.

| Activity | Strategic Area (1-4) |
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| <p>Outreach</p> <ol style="list-style-type: none"> 1. To build on our current outreach programme using our stand at local events, we will: <ol style="list-style-type: none"> a. Plan 6 ‘talk to us’ events, one in each locality - which are widely advertised and where we invite volunteers and locality forum members with the aim of listening to more people at targeted events | |

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| <ul style="list-style-type: none"> b. Work towards a programme of ongoing ‘Healthwatch surgeries’ at local Citizen Advice Bureau offices, libraries or similar locations. c. We will attend 30 outreach events in total, with fewer market stalls as they have been our least effective approach in 2015-16. d. Consider inviting other organisations to ‘talk to us’ events to assist with our signposting function <ol style="list-style-type: none"> 2. We will attend 6-12 ‘service-user groups’ to hear their experiences. These would be pre-existing groups that our voluntary sector partners run. 3. Continue our voluntary sector outreach programme, visiting at least 20 organisations to hear their feedback. 4. Work to close the feedback loop on outreach in the following ways: <ul style="list-style-type: none"> a. writing to the groups we visit b. Sharing stories from our events on the website c. Creating a ‘this month we heard’ feature on the website d. Reporting recommendations based on ‘this month we heard’ quarterly to commissioners and providers, and publishing them on the website. | <p style="text-align: center;">4</p> <p style="text-align: center;">1 & 2</p> |
| <p>Projects</p> <ol style="list-style-type: none"> 1. We aim to conduct at least one and up to three (dependent on scope) HWO initiated Enter and View activities. <ul style="list-style-type: none"> a. One potential project could be the minor injuries / urgent care work with Oxford Health. This has been delayed due to Oxford Health Staff availability. 2. If the pilot project working with young people in schools about GP access and experiences is successful, we roll this out to one school in each locality. 3. Designing a project in the autumn to address the question of impact of the cuts to County Council funding. We will need to develop a realistic scope for this work. 4. Project Fund legacy- We suggest we replace the fund with an offer of support to include (dependent on need): <ul style="list-style-type: none"> a. Assistance with publicising partner organisations’ reports, including writing to commissioners on their behalf; b. Guidance on the process of research - assistance designing a methodology, editing materials and reports; c. Analysing and reporting feedback received by other organisations and in partnership with them turning them into a Healthwatch Oxfordshire report; d. Considering research into topics brought to HWO’s attention for a small scale project. | <p style="text-align: center;">1, 2 & 3</p> |
| <p>Communications</p> <ol style="list-style-type: none"> 1. Closing the feedback loop as per above | |

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| <ol style="list-style-type: none"> 2. Creating a 'current issues in Health and Social Care explained' feature. Potential topics might include devolution, transformation and ongoing quality concerns. 3. Sharing more sources of information on the website such as papers for board meetings of commissioners and providers. 4. Featuring case-studies on our website and working to find case studies for the media. 5. Further developing our use of media to raise HWO's profile. | <p>3</p> <p>4</p> |
| <p>Organisational Development</p> <ol style="list-style-type: none"> 1. Develop a framework for evaluating paid work against: <ol style="list-style-type: none"> a. Reputational risk b. Mission drift c. Ability to retain independence 2. Continuing to develop the CRM, and how we use it. 3. Developing a plan for how and when we use volunteers, what skills they have to offer and how we can keep them engaged. 4. Working to bring our policies up to date and in line with HR best practice. Looking to ensure we have the correct policies in place to be able to tender for appropriate paid-for work. 5. Following on from February Board development workshop - working to develop how the Board and staff team work together. 6. Premises - ensuring our office move runs as smoothly as possible. | <p>2 & 4</p> <p>2 & 4</p> |
| <p>Income Generation</p> <ol style="list-style-type: none"> 1. One to two paid-for Enter and View projects. Currently looking at feasibility and costing for an Enter and View at Townlands Hospital in October-November (c. £3000-6000). 2. Voluntary Sector Conference - aim to produce one annual voluntary sector conference that would be fully cost recovering. 3. Working to see if we can extend support to Patient and Public Participation West Oxfordshire to other locality fora. 4. Consider possible funding sources for the 'impact of the cuts' project. 5. Monitor the South East tendering portals (and others) for potential work to bid for. | <p>New area not ID in strategy</p> |
| <p>Ongoing Work:</p> <p>We will also continue with our ongoing programme of work which includes:</p> <p>Attending local scrutiny and strategic meetings (including):</p> <ul style="list-style-type: none"> - Health Overview Scrutiny Committee - Health and Wellbeing Board - Oxfordshire Safeguarding Adults Board - OCCG Primary Care Commissioning Group - OCCG Locality Forum Chairs | |

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| <p>Supporting lay involvement in H&SC:</p> <ul style="list-style-type: none"> - Transformation board - Health Improvement Board - Children's Trust Board - Support of PPG development - Hearsay! Assuming funding is possible <p>Information and Advice:</p> <ul style="list-style-type: none"> - Updating the website with information - Taking and signposting callers who request information | |
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Monitoring:

Most of the monitoring in this plan is evident, given targets included in the work. Below find the measures for success:

Outreach:

1. Were 6 Talk to us events carried out? # of people heard from
2. # of CAB surgeries completed
3. # of outreach events completed
4. # of service user groups spoken to
5. # of voluntary sector organisations received feedback from
6. Hits on the web for 'this month we heard' + feedback from providers and commissioners on recommendations

Projects:

1. # of projects completed
2. Responses to recommendations

Communications:

1. Successful completion of Current issues in Health and Social Care Explained - # of topics.
2. # of case studies shared
3. Media monitoring stats:
 - a. # of articles
 - b. # mentions
 - c. # of enquiries

Organisational Development:

1. Framework for paid work developed
2. Evidence of CRM use (amount of feedback input, mailing list and cases updated)
3. # of policies developed
4. That we are in new office with little disruption

Income generation:

1. Volume of paid work in £
2. # of additional patient forum work