

Making a difference together

Annual Report 2017 - 2018





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Welcome

This past year was the first working together as one organisation. We've brought together our staff team and volunteers, as well as setting up a new Board of Directors.

Our new bigger Healthwatch will enable us to use our own resources more effectively and have a greater and united voice for local people.

We have listened to thousands of local people from communities across both areas. Hearing your stories of health and care is where it starts.

What you tell us is fed back to local health and care planners and providers to help them improve services. We are encouraged that locally they have welcomed hearing about and learning from your experiences.

We are pleased about successes in some notable areas.

- + We've been able to help new parents in Peterborough and Cambridgeshire get a louder voice in maternity services.
- + Improvements are being made to tongue-tie division services for new-borns.
- + A new autism service was formed after we joined with others to tell commissioners where there are gaps in services.

It's been a year of significant pressures on local health and care services. Resources continue to be scarce. What resources there are need to be used sensibly.

When changes are made, they need to be made with local people, so that we can be confident that the changes will work.

We know that there are areas where services can be simpler and better for people, and we are keen that all decisions are based on your views. The Sustainability and Transformation Partnership are leading these plans. We are working behind the scenes to make sure that local people are kept informed and can play a part.

It starts with you!

We want to thank everyone we have worked with, especially the people who have shared their experiences.

None of what we have achieved would be possible without our dedicated staff team, fantastic volunteers and supportive Board of Directors. We sincerely thank them all for their time, commitment and boundless enthusiasm.



Val Moore
Chair



Sandie Smith
Chief Executive

Highlights from our year

This year we engaged with people **2,000+** times on social media



Our **35** volunteers helped us listen to people and visit services



We published **8** reports into local services



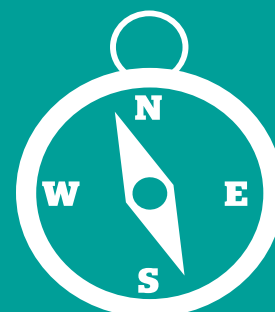
We published a toolkit to help GP Patient Participation Groups.



We've spoken to more than **4,000** people at 158 local events



We've given **200+** people information on where to get help.



What we do



We know that you want services that work for you, your friends and family. That's why we want you to share your experiences of using health and care services with us - both good and bad.

As well as championing your views locally, we also share what you tell us with Healthwatch England. They use what local Healthwatch across the country tell them to influence national health and care policy

Our purpose

Healthwatch Cambridgeshire and Healthwatch Peterborough work together as one organisation with a joint purpose.

Our vision is that all people in Cambridgeshire and Peterborough are listened to about their experiences of health and care services. Individuals should be involved in decisions about their care and how it is provided.

We engage with health and social care commissioners, service providers and communities, when changes to service provisions are planned or public health issues addressed.

We engage with and represent the community we serve, with particular emphasis on individuals from seldom heard groups.

An interim work programme was developed whilst we undertook a strategic review.

We developed a combined set of priorities for 2017-18. We are keeping the same set of priorities for 2018-19.

Our priorities

Access to and experience of primary care, particularly in growth areas, for example GP and dental services.

Access to social care assessments and experience of integrated support services.

Access to and experience of mental health services for children and young people, and adults.

The promotion of health, self-care and independence.

Transforming pathways for urgent and emergency care services.

Engaging patients and the public with the Sustainability and Transformation Programme.

Your views on health and care





Listening to people's experiences

Everything we do starts with what local people like you tell us. We feedback what you say to local health and care decision makers. This helps them plan services that better meet the needs of our communities.

This year, we have spoken to more than 4,000 people at 158 local events across Cambridgeshire and Peterborough. In Cambridgeshire, we spoke to 2,136 people at 111 events. In Peterborough, we had the opportunity to speak to over 1,900 people at 47 events.

This included chatting to people:

- + at local summer fetes and festivals;
- + at the hospitals across our area;
- + in small groups attending meetings in their communities;
- + at conferences and workshops supporting people with chronic health conditions, disabilities and their carers; and,
- + in local schools and colleges.

People have also shared their stories with us through organisations they are involved with, social media, our websites, email and calling our office.

Young people

This year we have focused on meeting with families whose children have additional support needs, families in poorer areas of Cambridgeshire and Peterborough, and young people in secondary schools.

In Cambridgeshire we visited 13 groups, including a visit to Cambridge Regional College in November, to find out about the students' experiences of mental health services.

We visited 11 groups in Peterborough, including schools, to talk to young people. This included regular visits to Peterborough Regional College, such as their Freshers' Fair in the autumn.

Transitioning from children to adult mental health services is a period where young people and their families need extra information and support. We visited a transitioning event in Peterborough for young people across the area to listen to the experiences of young people with learning disabilities, difficulties, ADHD and autism who were transitioning to adult services, and their families.

Older people

Older people use health and care services more than people from any other age group.

In Cambridgeshire, almost a third of the events we went to were ones where we mostly spoke to older people. This includes social groups such as the Women's Institute and COPE, disability support groups and the regular Fenland Golden Age fairs.

We also began a listening project with Care Network, a local charity who provide help for older, isolated and vulnerable people living in Cambridgeshire. We are training their volunteers to listen to older people's experiences and share them with us.

In Peterborough, we went to ten events where we spoke mostly to older people. This includes visits to local support groups, lunch clubs and a Dementia Awareness event for the local Black, Asian and Minority Ethnic Communities.

People who are disadvantaged or vulnerable

We work hardest to engage with people who may be disadvantaged in accessing health and care services. There are many reasons why people may be disadvantaged, for example, complex health needs, cultural differences, language barriers, poverty, and discrimination.

In areas like Fenland, for example, people face additional challenges due to the rural nature of the area, where people may have to travel further to get the care they need. It can be harder for organisations to recruit staff to work in this part of Cambridgeshire, so some services do not work as well.

Most of the events and activities we have done this year to listen to people's experiences have been focused on meeting people who are less likely to be heard by those making decisions about services.





We appointed a new Engagement Officer in the final quarter of the year. His job is to focus on meeting with people from different ethnic communities or who are economically disadvantaged, in Peterborough and Fenland.

In Peterborough

Peterborough is a vibrant multicultural city, which is home to people from many different ethnic communities. It also has a high number of people living in deprived areas, particularly in the centre of the city. People in these areas spend more of their life living in poor health and, on average, die earlier than people in the general population.

We spend much of our time visiting community events, and health and cultural groups in the poorer parts of the city, for example, Bretton Summer Festival and regular events at the Olive Branch Community Garden.

As part of an Accessible Information project, we visited a number of support groups and events to meet people with sensory impairments. This includes people who are blind or visually impaired, people who are Deafblind, and people from the local Deaf community.

We also went along to larger events for disabled people, such as the popular Feel the Force event, a film and tv convention aimed at disabled people.

In Cambridgeshire

As part of talking to people in poorer communities, we have spent time at summer fetes and festivals, for example in Chatteris and March. These are good opportunities to listen to peoples' experiences, and develop links with individuals and organisations in the area.

We also visit many local support groups, particularly in the poorer areas. This helps us find out how health and care services are working for people with complex health conditions, such as diabetes, and their carers.

During the year, we regularly attended a local drop in for members of the Gypsy, Traveller and Roma communities in South Cambridgeshire to hear more about their experiences. They make up the largest ethnic minority communities in Cambridgeshire; however, they are more likely to have poor health than other local people.

People who live outside Cambridgeshire and Peterborough

We listen to the experiences of people who volunteer, work or use services in Cambridgeshire and Peterborough, but do not live in the area, as part of our ongoing engagement activities.

We have a regular stall in Peterborough City Hospital, alongside Healthwatch Lincolnshire. This gives us an opportunity to talk to people using health services in our area, but who live in neighbouring areas.

Making sure services work for you

As a local Healthwatch, we have a statutory power to Enter and View.

This is our legal right to visit places that provide publicly funded health or care services to see and hear how people experience these services.

This gives us the opportunity to:

- + Collect the experiences of people using these services, as well as those of their carers and relatives.
- + See the nature and quality of services.
- + Develop insights and recommendations, which we publicly report to the people who make decisions about these services.

Healthwatch Cambridgeshire – care home visits

We visited three residential care homes to find out about residents' food and drink choices. We wanted to see what each home was doing to make sure that people could choose from a healthy varied diet that met their needs and preferences, especially when increasing frailty and health problems could make eating and drinking harder.

Each visit was led by a volunteer Authorised Representative and the reports reflect their observations on the day.

We made recommendations for two of the three homes we visited. These included:

- + Introducing a picture menu to encourage residents to get involved in making daily choices.
- + Having a member of staff in the dining room with the residents to encourage eating and socialising.
- + Using plate covers to protect and keep food warm in transit.

As a result, one home made changes to make sure residents got warm food. They also developed a dementia friendly menu to help residents understand their meal options.

Healthwatch Peterborough – access to GP surgeries

Healthwatch Peterborough visited two GP surgeries to find out more about people's experiences of care at these practices. They also asked questions about how the practice was providing accessible information for people with sensory and learning disabilities. They spoke to 28 patients at the surgeries, as part of these visits, and made a number of recommendations to improve the service for each practice.

The surgeries both responded to our Enter and View recommendations. After our visit to Boroughbury Medical Centre, the surgery improved the information about accessible information in the reception area and added information about this to their Registration Packs. In addition, they introduced children's corners in each of the waiting areas with child friendly tables and chairs, and colouring packs available.

Helping you find the answers



Our Information Service aims to help people with information about local health and care services. We also tell people about other organisations which may offer help and support.

This year, we merged the Information services for Healthwatch Cambridgeshire and Healthwatch Peterborough into one service. This has helped us make sure that we can give people the best information we can, about how they could sort out any issues they have or where they could go for help. This is called signposting.

People can contact us by telephone, email, online, or by talking to us at events we attend. We also receive referrals from other organisations.

Most people ask for information and signposting in the context of their personal experiences of health and care services. This helps us to identify themes and issues which we need to escalate, either locally or to Healthwatch England.

In Cambridgeshire

We helped signpost people 170 times to 59 organisations or websites. The majority were to Patient Advice and Liaison Services (PALS), followed by Total Voice who provide advocacy services across Cambridgeshire and Peterborough, including independent health complaints advocacy.

We heard that some people are finding it difficult to make a non-urgent GP appointment. Some people told us they had to wait several weeks, especially if they wanted to see a named GP.

People in Fenland also reported difficulties finding an NHS dentist.

We also heard about issues with the community audiology service provided in Cambridgeshire by SpecSavers. These included a lack of information, quality of service and waits for appointments.

Peterborough

We helped signpost people 62 times to 19 organisations or websites. The majority of signposting was to Total Voice to help people who wanted to make a complaint about health services.

The main reported issue was difficulty in finding an NHS dentist.

People also told us about problems with getting British Sign Language interpreters provided for health appointments.



Borders

We continue to work with neighbouring Healthwatch because of people using services across local authority boundaries. We also receive referrals in return.

It is not unusual for people to live in another county but to be registered with a Cambridgeshire and Peterborough Clinical Commissioning Group GP service. Conversely, some people live in Cambridgeshire but are registered with a GP practice in a neighbouring county.

In addition, many people from outside Cambridgeshire and Peterborough are cared for at our acute and specialist hospitals.

We put people in touch with their local Healthwatch, or the best organisation to help them sort out any problems they are having.

Making a difference together



As a local Healthwatch, we have a duty to use reports and recommendations to suggest how local care services could or ought to be improved.

Accessible Information as Standard

Published November 2017

We found that local health and care services are not always offering information to people with sensory and learning disabilities in a format they can understand. The Accessible Information Standard which came into effect on 1 August 2016, says that they must do this.

Our Accessible Information as Standard report examines people's experiences of trying to get information in a way they can understand when visiting health and care services. People who need information in an accessible format such as braille, British Sign Language or easy read are often not getting it.

This report brought together the findings of projects from Healthwatch Cambridgeshire and Healthwatch Peterborough.

In Cambridgeshire, we worked closely with Cambridgeshire Deaf Association and Cambridgeshire Hearing Help to find out the issues for people who were Deaf or hearing impaired.

In Peterborough, the project was wider ranging; we also listened to the experiences of Deafblind, visually impaired, blind and learning-disabled people.





Jason's story

Jason found himself in a confusing and dangerous situation when he had to go to A&E with a lung condition. Jason is Deaf and uses British Sign Language.

'I asked if I could have an interpreter, and they said that they couldn't find one at such short notice.'

Like many Deaf people, Jason struggles with written English, which has very different grammar to British Sign Language.

He tried to communicate with the staff by writing things down on his phone. But it wasn't clear to him what was wrong with his lung or what treatment was needed.

Eventually, after over seven hours in A&E, a qualified interpreter arrived.

The interpreter explained to Jason that he had pneumothorax blebs, a hole in his lung which had caused it to collapse. The interpreter also explained the treatment that was required, which Jason was then able, finally, to agree to.

'I asked why they kept checking my blood pressure. They explained that it was because my heart was having to work extra hard, which was quite risky. It could have been really quite dangerous, thinking back on it now.'

'Imagine if there had been an interpreter from the start. We could have got the procedure done quickly, but I couldn't consent because I didn't know what was going on. Nurses, GPs, everyone needs a little bit of training.'

What needs to change?

Our Healthwatch said that local health and care organisations need to do more to meet the information access needs of local people.

- + Staff need to know about the Accessible Information Standard and their responsibilities to people.
- + Services need to be able to show that people have understood their treatment and said yes to it.

- + Services should make sure people can talk with them properly, for example, being able to reply to texts to check that support has been booked.

We asked each of our local NHS Trusts what they are doing to improve the situation for disabled people using their services. We are following up with each Trust to make sure that improvements are made.



Improving young people's mental health

Young people have told us that they need more flexible, creative solutions to give them the information and support they need to stay mentally well.

In the last two years, we have talked to hundreds of young people in Cambridgeshire and Peterborough about mental health and wellbeing to find out what would best help them. This year we published two reports into young people's mental health.

Our report, 'Being Happy, Being Me' looks at young people's attitude towards and understanding of mental health. We spoke to more than 500 young people as part of this project.

Our report, 'Minding us: Improving services for young people at greater risk of mental ill health' tells the stories of young people's experiences of mental health services and what they want to change. We talked to 90+ young people, including young carers, young people who had been sexually exploited, and young lesbian and gay people. Many had experienced one or more difficult life challenges, for example, dealing with prejudice, isolation or abuse. Published September 2017.

This work was funded by our local mental health commissioners who used it to help in the redesign of local children and young people's mental health services.

They told us that, in response to what young people told them, they are:

- + providing both online and face to face support for young people;
- + more self-referral and flexible access options for mental health support; and
- + a local website to be a focal point of information for children, young people, professionals and families.

As part of this work, we let young people and organisations working with young people know about the local support services available to them.

Helping involve patients in their GP services

We developed an online Patient Participation Group (PPG) toolkit to help local GP surgeries in Cambridgeshire and Peterborough better involve people in improving services.

Although all surgeries should have a PPG, we know that many find it a challenge to effectively involve patients.

Our toolkit includes local case studies and suggestions about membership, as well as activities that PPGs can get involved in.

We have also advised some local GP surgeries on how to better involve their patients in conversations about merging.

Helping to shape services

We regularly feedback the issues that local people raise with us, to the organisations who plan and provide these services.

We share regular feedback summaries with organisations, to let them know the issues that are important to the people we have spoken to. We don't share information that could identify people when we do this.

If we see a problem, we will contact the organisations responsible for commissioning and providing those services, so they can do something to fix it. Sometimes the fix is something quick, but often it can take many months or even years before an issue is resolved.

New autism service

A new autism spectrum disorder service for young people was introduced in autumn 2017 thanks to the lobbying of Pinpoint, our Healthwatch and the National Autistic Society.

This is run by Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) who provide an assessment and intervention service for young people aged 12 - 18 years old.

In addition, CPFT also confirmed a new service for young people between child and adult services. Adult mental health services officially start at 17, but as part of improvements to increase the support available, some young people will be able to continue with children's services until they are 18.

Making tongue tie services better

Local health commissioners confirmed that tongue tie services are available on the NHS in Cambridgeshire and Peterborough. Plans to improve them are to be included in the local Better Births Plan for maternity services.

This is after our Healthwatch wrote to Cambridgeshire and Peterborough Clinical Commissioning Group in November 2017 to say that Tongue Tie (Ankyloglossia) services in Cambridgeshire and Peterborough are inadequate and overly complicated.

We are pleased to have an agreement that these important services will be included in the local Better Birth Plans. Better Births is a national initiative by NHS England to improve maternal care. Each CCG has to develop a plan to implement Better Births.

Access to audiology services

We received lots of complaints about problems with the audiology service provided by Specsavers. This service provides hearing tests, hearing aids and aftercare for people with a hearing impairment.

These problems included: long waits for appointments, loss of records when the service was transferred, and being told to go back to the GP for a re-referral. There were also concerns about staff knowledge of hearing issues and the quality of work carried out.

We raised this issue with Specsavers and Cambridgeshire Clinical Commissioning Group who commission this service. Specsavers passed our feedback on to their franchisees and told them to improve the quality of their service, including how they communicate with people.

Improving Information about leaving hospital



The new 'When you are ready to leave hospital' leaflet was developed to give patients better information to help them, when they are being discharged from hospital or other care services.

The leaflet, published by Cambridgeshire and Peterborough Clinical Commissioning Group (CCG), was developed from a project started by Healthwatch Cambridgeshire in 2016. It's now part of the CCG's updated Choice policy

and will be used to help patients plan as they leave hospital.

We wanted to make sure that people understand the options they have when they are leaving hospital, particularly people who needed ongoing care and support.

We recruited four volunteers, who between them had different insights into hospital discharge, to help write a patient information leaflet. Rebecca, from Cambridge, told us of her father's poor experiences of leaving hospital.

Rebecca's story

'Several times over the past decade or so I have first-hand experience of relatives being admitted to hospital.'

'I found working out who to talk to and when they were available, how to navigate the ever-changing processes, and working out what to do on the day of discharge time consuming, confusing and often distressing.'

'Hospital staff want to do their best for patients and relatives but don't always have the time or information to explain discharge.'

'Having an easy-to-read flyer, with further contacts, ought to be helpful - and for staff too.'

Access to dental services

We wrote to NHS England to raise concerns about people's difficulties getting NHS dental appointments in Peterborough and Fenland.

NHS England replied to let us know what they were doing to improve information about dental services. This includes updating local directories of services.

They said that there were problems with the availability of routine and emergency appointments in Peterborough. They told us they were working with local dental practices to put in place additional routine and urgent care.

We will continue to monitor dental service availability in these areas in the coming year.



Ear wax removal

Local doctors' surgeries have been told they cannot refuse to give patients' ear wax removal treatment.

We raised this issue with Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) after we heard that some people were having problems getting treatment at their GP surgeries.

The CCG confirmed that GPs should be providing this service as part of their GP Treatment Room contract.

Public involvement in re-shaping services

Our Healthwatch has reminded local NHS and government officers of the importance of involving people in the development of the local Sustainability and Transformation Plan.

The Fit for the Future Plan, launched in 2016, has been developed to re-design how local health and care services can better meet the needs of local people. It covers hospital services, community healthcare, mental health, social care and GP services.

Our role is to make sure the STP partners are involving patients and the public in the decisions that they make. We have given them guidance on how to run a good consultation and they have signed up to the principles that we outlined

We have Healthwatch representatives on each key workstream. These are:

- + Care Advisory Group
- + Urgent and Emergency Care Delivery Board
- + Primary Care and Integrated Neighbourhoods Delivery Board
- + Local Maternity System
- + End of Life Care Strategy Development Group
- + Falls Prevention Strategy Group
- + Joint Emergency Team (JET) steering group

Our role on each group is to advocate for plans to be considered from the perspective of the patient.

Locally, we have had concerns about how well people are being involved in developing services. We have challenged STP partners to do better at recruiting and supporting patient representatives with experience of that service, in developing different sections of the plan.

Consultations and changes

We regularly respond to local and national consultations and reviews to make sure that any changes are considered from the perspective of people who use local services. We base our responses on what we know about the local health and care system, and on what local people tell us.

Fertility services suspension

Cambridgeshire and Peterborough Clinical Commissioning Group consulted on plans to reduce in-vitro-fertilisation (IVF) treatments.

We raised concerns about how the proposed cuts would affect people in Cambridgeshire and Peterborough, after listening to people's concerns.

We said that the proposed funding cuts were against national guidance, would affect poor people the most and may not save as much as planned from local NHS budgets.

We raised issues that the CCG had not been aware of and we know that they did listen to the concerns that were voiced. Unfortunately, the CCG decided to suspend services until April 2019, due to the financial problems that they are currently facing.

This is an issue we will return to next year and we hope then that we can see the re-introduction of fertility services for local people.

Fairer Contributions Policy in Cambridgeshire

Along with a number of other local voluntary sector organisations, we raised concerns about the Fairer Contributions Policy changes proposed by the Council.

We said they would have disproportionately affected vulnerable people who are already experiencing financial pressures.

As a result, Cambridgeshire County Council's Adults Committee rejected proposals to increase contributions for people receiving social care.

Involving people in safeguarding

We gave feedback on the Safeguarding Adults Policy and Procedures for Cambridgeshire County Council and Peterborough City Council.

This was part of the reorganisation of the local Adult Safeguarding Boards this year, who merged to work across Cambridgeshire and Peterborough.

We wanted to make sure that the service user representative role that had been developed in Cambridgeshire was maintained and extended to Peterborough.

We also submitted responses to:

- + Cambridgeshire County Council and Peterborough City Council Pharmaceutical Needs Assessments.
- + The Children's Centres consultation in Cambridgeshire.
- + Cambridge City Council Community Review.
- + Better Births Plan for Cambridgeshire and Peterborough.
- + Cambridgeshire and Peterborough Dementia Strategic Plan Consultation.

Nationally, we have used what local people tell us to help inform:

- + The National Audit Office enquiry into children and young people's mental health.
- + The government's 'Transforming children and young people's mental health provision: a green paper'.

Getting local voices heard

Our Healthwatch staff and Directors sit on many groups, where we can raise the issues you have told us about.

Health and Wellbeing Board

Our Chair, Val Moore, represents us on the Cambridgeshire Health and Wellbeing Board. Our Vice-Chair, Gordon Smith, represents us on the Peterborough Health and Wellbeing Board.

These Boards are places where key leaders from the health and care system work together to improve the health and wellbeing of our local population.

We support Val and Gordon, in their roles, by making sure we keep them updated on issues raised by local people.

Cambridgeshire and Peterborough Clinical Commissioning Group

The CCG's Quality Outcomes and Performance committee looks at the quality and performance of local health services. Our Chief Executive goes to this meeting. We share what people tell us with this group so that the CCG are aware of the range of people's experiences.

Our Chief Executive also goes to the CCG's Primary Care Commissioning Committee. This oversees the commissioning of primary care services such as local GP surgeries.

People tell us that in many areas it is difficult to get an appointment with their GP. We make sure that the committee knows about these difficulties and involves local people in changes.

Working with other organisations

Other groups we sit on include:

- + Peterborough City Council Overview and Scrutiny committee
- + Adult and Children's Safeguarding Boards
- + Quality Surveillance Group led by NHS England. The group looks at the quality of care across the East of England.

The Care Quality Commission

Over the last year, we have continued to work with the Care Quality Commission (CQC) to make sure local people's experiences are listened to.

We have shared people's anonymised experiences of local services with CQC, when they are preparing for inspections. We also send them copies of our published reports. Sometimes we will put individuals in touch with the inspectors if they have a concern to share about a service.

We contribute to bi-monthly information sharing meetings about residential and domiciliary care in Cambridgeshire. These are also attended by Cambridgeshire County Council who commission these services. We have continued to attend bi-monthly information sharing meetings with the CQC and local authority in Peterborough. At these meetings, we can share any concerns people have raised with us.

We commented on the CQC's consultation into their next phase of regulation.

Healthwatch network and Healthwatch England

We are part of a network of local Healthwatch organisations.

We share what people tell us about their experiences with Healthwatch England. We also send Healthwatch England copies of our reports when they are published. We can formally escalate an issue to Healthwatch England, if we think it is part of a national issue.

Our Healthwatch was involved in the development of the Quality Matters initiative, on behalf of Healthwatch England and the Healthwatch network.

Quality Matters was jointly produced by organisations from across the health and social care sector to help raise standards of care. It is designed to improve services like care homes, nursing homes, and care provided for people in their own homes.

Sandie Smith, our Chief Executive, represented local Healthwatch in some of the discussions about co-production that helped develop this document. Co-production is about jointly developing services with the people who use them.

The past two years have been a time of change for Healthwatch as the two teams across Cambridgeshire and Peterborough have come together to form a combined organisation.

Their importance as close partners of Cambridgeshire and Peterborough CCG cannot be underestimated in terms of making us a better organisation. They continue to provide representation to key committees and ask challenging questions based on what the people of Cambridgeshire and Peterborough are telling them. The intelligence they gather is an integral part of the CCG being able to understand issues that might not otherwise have had such a high profile but are so important to patients and families. However, Healthwatch are also always keen to support solutions such as writing an information leaflet to ensure people have the right information and can access NHS services appropriately.

2018/19 will see a year of greater integration across all health and social care organisations, and key to making this happen will be the continuing close working relationship with Healthwatch Cambridgeshire and Peterborough.

Karen Handscomb
Acting Chief Nurse
Cambridgeshire and Peterborough Clinical Commissioning Group

Our people



Our Board

Chair

- + Val Moore

Vice Chair

- + Gordon Smith, Vice Chair (From 5 July 2017)

Directors

- + Frances Dewhurst
- + Mike Hewins
- + Graham Jagger
- + Ruth McCallum (Until 5 July 2017)
- + Jonathan Wells
- + Sue Westwood-Bate
- + Nicky Hampshaw (From 5 July 2017)
- + Susan Mahmoud (From 5 July 2017)
- + Margaret Robinson (From 5 July 2017)
- + Nik Patten (From 5 July 2017)

The current Board of Healthwatch Cambridgeshire and Peterborough CIC, has six members who were previously members of Healthwatch Cambridgeshire CIC's Board. Five Directors joined the Board from the Peterborough Patient and Public Involvement Network Community Interest Company (CIC) who previously managed Healthwatch Peterborough. This Company was dissolved on 14 November 2017.

The Board updated our name, memorandum and articles of association in April 2017. Healthwatch Cambridgeshire and Peterborough CIC provides the statutory functions of a Healthwatch in both Cambridgeshire and Peterborough.

The Directors joining the Board from Peterborough were part of a Shadow Board advising the Directors from January 2017. They formally joined the Healthwatch Cambridgeshire and Peterborough CIC Board at our AGM on 5 July 2017.

Our Chair is remunerated and receives £8,408 per annum.

Our Directors are unpaid but receive reasonable out of pocket expenses, in line with our Volunteer Involvement policy

How we are governed

As a Community Interest Company (CIC) we are governed by our Memorandum and Articles of Association and comply with the reporting requirements of a CIC.

Our organisation is managed by a Board of Directors. They decide what is most important for us to do and make sure our organisation is properly run.

The Board meets every two months, in public. All papers are posted on the Healthwatch Cambridgeshire website and promoted across Cambridgeshire and Peterborough. At every meeting, the Board are updated on progress made against the work programme.

Members of the public and Healthwatch volunteers are actively encouraged to attend. They can ask our Board questions at these meetings.

Our volunteers

We have 35 active volunteers, 22 in Cambridgeshire and 13 in Peterborough.

Our 25 Community Listener volunteers help us listen to people's opinions and experiences of local health and social care services. They support our engagement team at community events such as stalls, talks and workshops.

Some of our volunteers are trained as Authorised Representatives and get involved in Enter and View visits. We also have some volunteers who help us in the office or with individual project work.

The Peterborough based Advisory Group volunteers have now moved into a Community Listening role. They will help us understand the issues that are important to people in Peterborough.

We provide regular training and support to help people in their roles and we pay out of pocket expenses, in line with our Volunteer Involvement Policy.

Our finances



All local Healthwatch are funded by the Department of Health and Social Care. They give money to each local authority who are required to commission a local Healthwatch service.

We receive our funding through grant agreements from Cambridgeshire County Council and Peterborough City Council.

These figures are from our draft audited figures.

A copy of the full audited accounts will be presented for approval at our Annual General Meeting to be held on Wednesday 18 July 2018, 2pm-4pm, Etheldreda Room, Ely Conference Centre, Palace Green, Ely, CB7 4EW

This is a public meeting, and anyone is welcome to attend.

The final accounts will be available on our website or from the office after this date.

| Income | £ |
|---|----------------|
| Funding received from local authority to deliver local Healthwatch statutory activities in Peterborough | 187,500 |
| Funding received from local authority to deliver local Healthwatch statutory activities in Cambridgeshire | 287,602 |
| Additional Income | 32,764 |
| Total income | 507,866 |
| | |
| Expenditure | £ |
| Operational costs | 91,489 |
| Staffing costs | 334,694 |
| Office costs | 38,653 |
| Total expenditure | 464,836 |
| Balance brought forward | -43,030 |

Contact us

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Our annual report will be publicly available by 30 June 2018 by publishing it on our websites and sharing it with Healthwatch England, the Care Quality Commission, NHS England, Cambridgeshire and Peterborough Clinical Commissioning Group, Cambridgeshire County Council, including the Health Committee, and Peterborough City Council, including Peterborough Health Scrutiny Committee.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

You can read and share this report free of charge. If you need this report in a different format, please get in touch with us.

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Registered Company Number: 08516179

Registered address: 6 Oak Drive, HUNTINGDON, PE29 7HN

We are the independent champion for people who use health and social care services in Cambridgeshire and Peterborough.

Our job is to make sure that those who run local health and care services understand and act on what really matters to people.