

HEALTHWATCH HILLINGDON UPDATE

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|---------------------------------|---|
| Relevant Board Member(s) | Lynn Hill, Healthwatch Hillingdon Chair |
| Organisation | Healthwatch Hillingdon |
| Report author | Daniel West, Director of Operations, Healthwatch Hillingdon |
| Papers with report | Healthwatch Hillingdon NHS Long Term Plan Report |

HEADLINE INFORMATION

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|--|---|
| Summary | To receive a report from Healthwatch Hillingdon on the delivery of its statutory functions for this period. |
| Contribution to plans and strategies | Joint Health and Wellbeing Strategy |
| Financial Cost | None |
| Relevant Policy Overview & Scrutiny Committee | External Services Select Committee |
| Ward(s) affected | All |

RECOMMENDATION

That the Health and Wellbeing Board notes the report received.

1. INFORMATION

- 1.1 Healthwatch Hillingdon is contracted by the London Borough of Hillingdon, under the terms of the grant in aid funding agreement, to deliver the functions of a local Healthwatch, as defined in the Health and Social Care Act 2012.
- 1.2 Healthwatch Hillingdon is required under the terms of the grant aid funding agreement to report to the London Borough of Hillingdon on its activities, achievements and finances on a quarterly basis throughout the duration of the agreement.

2. SUMMARY

- 2.1. The body of this report to the London Borough of Hillingdon's Health and Wellbeing Board summarises the outcomes, impacts and progress made by Healthwatch Hillingdon in the delivery of its functions and activities for this period. It should be noted that a comprehensive report is presented by the Chief Executive Officer to the Directors/Trustees at the Healthwatch Hillingdon Board meetings and is available to view on the website: (<http://healthwatchhillingdon.org.uk/index.php/publications>).

3. **GOVERNANCE**

3.1. **Chief Executive Officer**

Following a review at the end of June 2019, the position of Director of Operations has been extended to the end of December 2019, with the current interim CEO providing support and training until a further review is carried out.

3.2. **Board Members**

Two new members have joined the Healthwatch Hillingdon Board; Tim Markham and Aisha Yussuf, who is also a volunteer for Young Healthwatch Hillingdon.

4. **OUTCOMES**

Healthwatch Hillingdon wishes to draw the Health and Wellbeing Board's attention to some of the outcomes highlighted by its work during the first quarter of 2019-20.

4.1. **Report on the NHS Long Term Plan Report**

Context to the report

With growing pressure on the NHS – an aging population, more people living with long-term conditions, and lifestyle choices affecting people's health – changes are needed to make sure everybody gets the support they need. With the Government investing an extra £20 billion a year in the health service, The NHS has produced a 'Long Term Plan' setting out the things it wants health services to do better for people across the country.

The Healthwatch network was funded by NHS England and NHS Improvement to carry out engagement with communities across the country to establish how the Long Term Plan (LTP) should be implemented at a local level. The views gathered will feed into the development of the NHS local Plans.

The information gathered through the engagement has been collated for North West London (NWL) Healthwatch network, which is made up of the following: Brent, Central West London (Kensington & Chelsea, Hammersmith & Fulham and Westminster), Ealing, Harrow, Hillingdon and Hounslow. A report providing an overview for NWL has been produced and shared with stakeholders and the public.

The Healthwatch Hillingdon Local Report details the outcomes of the engagement for our borough. Following discussion with Hilling CCG, it was agreed that in addition to seeking public views on general health and care services, Healthwatch Hillingdon would also conduct focused engagement regarding mental health services as this is one of the priority areas for Hillingdon CCG, NWL CCG and also the LTP.

Two national surveys were produced by Healthwatch England: general experiences of health and care services, and a condition specific survey. These surveys were used to gather people's views on NHS services across the Borough. They were distributed locally, at targeted engagement sessions and completed online.

HwH also held three focus groups; one to collect people's views on ways to improve NHS services, and two more concentrated on mental health (with one of the groups involving

Young Healthwatch Hillingdon). People were asked to share their ideas on what they would change about the way the NHS in Hillingdon supports people with mental health and:

- What this support should look like.
- What needs to change regarding current provision.

HwH engaged directly with nearly 300 people across the Borough (from whom 273 surveys were received and direct feedback from 26 people in focus group settings).

Recommendations in our report, borne out of our engagement is as follows:

- Those people that engaged with HwH are very clear that “resources should be used to focus on prevention and early diagnosis in order to reduce pressures on the NHS”.
- Users of the service are asking for more opportunities to be informed and be able to influence services particularly events and focus groups. Co-production of plans with patients is a must.
- Information and advice for patients needs to be more readily available and in plain English. Whilst the move towards the use of digital communication is understandable the traditional face-to-face meetings and written hard copies should not yet be stopped.
- The move towards more holistic and integrated health and care services is welcomed and should continue.
- Develop further health care professionals’ customer care skills.

4.2. Young Healthwatch Hillingdon (YHwH)

Young Healthwatch Hillingdon (YHwH) work continues to grow and go from strength to strength. The youngsters are getting more strategically involved in local health service delivery and local partners. Recruitment to YHwH is now open, with YHwH is taking the lead in recruiting new members.

Examples of YHwH Activities

In Q1 YHwH members completed 121 volunteering hours across the following activities:

- Three YHwH panel meetings – At these sessions, members planned the YHwH summer activity including the Healthfest 2019 events and developed a ‘youth friendly’ of the Long-Term Plan survey.
- A test run of their session plan for the NHS Takeover Challenge Transition Engagement Event. Future sessions will be planned, using this session plan with other young people, to gather feedback from them about transitioning between pediatric and adult health services.
- KOOTH Ambassador Training.
- Mental Health First Aid Training.
- The NHS Youth Summit - An event organised by NHS England bringing together young people from throughout the country to discuss health issues important to children and young people. YHwH took part in discussions about transitions, the Long-Term Plan, CAMHS etc.
- A focus group about the new proposed model for CAMHS Early Intervention (other young people also attended this).

They also promoted their ‘youth friendly’ version of the Long-Term Plan survey on social media, helping to increase completion numbers.

Other engagement activity conducted by CYP Community Engagement Officer

- Attended a meeting with representatives from Hillingdon CCG to discuss the Emotional Health and Wellbeing side of the NHS Takeover Challenge project, YHwH input and engagement with young people. This links in with the work currently happening through the THRIVE network, developing the proposed new early intervention model for CYP mental health and wellbeing.
- Participated in two full day workshops regarding the development of the proposed new local multi-agency, early intervention model for CYP mental health and emotional wellbeing.
- Met with Public Health LBH to initiate a Sexual Health Services Review project in which YHwH will carry out mystery shopping of local sexual health services for young people.
- Attended the Hillingdon THRIVE meeting for this quarter.
- Met with leads from Uxbridge High, Queensmead and Harlington schools to set up delivery of the Mental Health, Wellbeing and Life Skills programme with their students.
- Facilitated a focus group with CAMHS service users about the NHS Long Term plan aspects relating to young people's mental health and emotional wellbeing.
- Hosted a stall at Uxbridge College to promote YHwH as part of the ongoing recruitment drive.

Young Mental Health, Wellbeing and Life Skills (MHWB) Programme and Peer Support Training (PST) Programme

During Quarter 1, YHwH has been working with three schools to deliver the Mental Health, Wellbeing and Life Skills (MHWB) programme and the Peer Support Training (PST) programme.

Haydon School

The MHWB programme was delivered in Haydon School from February to July 2019, as with Oakwood, the programme's impact was evaluated against the direct and indirect beneficiaries:

- **Outcome 1:** The number of participants who agree that they know how to look after their own mental health remained at 100% for direct beneficiaries, but dropped from 59% to 49% for indirect beneficiaries. This will be followed up to ensure a greater proportion of students feel confident in protecting their own mental health.
- **Outcome 2:** An increase in the number of students who agree they know where to go for mental health information and support from 62.2% to 100% for direct beneficiaries, with indirect beneficiaries showing a smaller increase from 52.7% to 56.4%. This seems to be in line with results of Outcome 1, and should improve with follow up work.

Uxbridge College

After commencing delivery of the MHWB programme, it became apparent that the level of engagement by the direct and indirect beneficiaries was not substantial enough to give a clear picture of the impact, leading to an adapted programme. As such, the Healthwatch Hillingdon CYP Engagement officer continued work with a smaller group of students to deliver one wellbeing event at the college; ultimately engaging with over 50 students and

staff members and evaluating with pre and post programme surveys:

- **Outcome 1:** The number of participants who agree that they know how to look after their own mental health remained at 100%.

- **Outcome 2:** An increase in the number of students who agree they know where to go for mental health information and support from 62.2% to 100%

Barnhill Community High School

The PST Programme was delivered in March 2019 to 9 students in Year 12. Following the training they completed evaluation forms. Across the 5 key outcomes listed below, 100% participants agreed:

The Peer Support Training programme has:

- given me knowledge and skills that will help me in the role of Peer Supporter.
- given me confidence to help other students in my role as Peer Supporter.
- made sure I understand how to carry out the role of Peer supporter with regards to my own safety and the safety of others.
- given me a better understanding of mental health and wellbeing.
- prepared me for my role as a Peer Supporter.

In June, the school reported that some students had used the Peer Support Service since the training, but no monitoring data was recorded. The school lead agreed to try and collect monitoring data in the new school year, and we will follow up with this in September.

Other Schools

Uxbridge High & Harlington School will be commencing the MHWB programme in September, which will conclude in December.

5. ENQUIRIES FROM THE PUBLIC

Healthwatch Hillingdon recorded 254 enquiries from the public this quarter. Of these, 43 people's experiences were logged on our Customer Relationship Management database and 211 residents were the recipients of our information, advice and signposting service.

5.1. Experiences

Overview

Table A (on the following page) illustrates that the hospital service people reported most on this quarter, and one which has featured among the worst in previous quarters, was Accident and Emergency, with all feedback received on this department being negative and the same themes as previously -Waiting times and Access to Services - being cited in each of the complaints received. The feedback we received on Urgent Care Services, however, was 100% positive.

Outside of hospital services, GPs were again the number one service residents gave feedback on, with seven out of the nine experiences recorded being negative. The main

reasons cited for these were: staff attitudes, and communication between staff and patients. Care at Home received three complaints, where the issues were Access to Services, Communication between staff and patients, and Quality of Care.

Table A

| | Positive | Mixed / Neutral | Negative |
|------------------------------|----------|-----------------|----------|
| Hospital Services | | | |
| Accident & Emergency | - | - | 3 |
| Urgent care services | 2 | - | - |
| Neurology | - | - | 2 |
| Paediatrics | - | - | 1 |
| Maternity | 1 | - | 1 |
| Ophthalmology | 1 | - | 1 |
| Orthopaedics | - | - | 1 |
| Sexual Health | - | - | 1 |
| Inpatient care | - | - | 1 |
| Obstetrics & gynaecology | - | - | 1 |
| Phlebotomy | 1 | - | - |
| Cardiology | 1 | 1 | - |
| 111 | - | - | 1 |
| Physiotherapy | - | - | 1 |
| Cancer services | - | - | 1 |
| Outpatients | - | - | 1 |
| Ear, nose & throat | - | - | 1 |
| Social Services | | | |
| Care Home | - | - | - |
| Home Care | - | - | 3 |
| Primary Care Services | | | |
| GP | 2 | - | 7 |
| Dentist | - | - | - |
| Other Services | | | |
| Community Mental Health Team | - | - | 1 |
| Equipment Service | - | - | 2 |
| CAMHS | - | - | - |

Table B indicates the categories of key staff that patients have listed in their feedback and *Table C* highlights the top five themes that people have reported upon. It should be noted that some patients name more than one member of staff and supply more than one reason for the disappointment with their experience. Doctors still received the highest negative feedback, with Admin/Receptionists being the next highest complained about. In terms of main themes, the highest number of concerns were Communication between Staff and

Patients and Quality of Care.

Table B

| Key staff categories | Positive | Mixed / Neutral | Negative |
|-----------------------------|-----------------|------------------------|-----------------|
| Doctors | 1 | 1 | 10 |
| Admin / Receptionist | - | - | 8 |
| Service Manager | 1 | - | 1 |
| Care/Support Workers | - | - | 1 |
| Nurses | - | - | 1 |
| All Care Professionals | 2 | - | - |
| Allied Care Professionals | - | - | 1 |
| Maternity | - | - | 1 |

Table C

| Key Themes | Positive | Mixed / Neutral | Negative |
|---|-----------------|------------------------|-----------------|
| Communication between staff and patients | - | - | 10 |
| Quality of care | 2 | - | 6 |
| Service delivery, organisation and staffing | 5 | - | 4 |
| Quality of treatment | 1 | - | 4 |
| Staff attitudes | 1 | - | 3 |
| Quality of appointment | 1 | - | - |
| Complaints procedure | - | - | 1 |

5.2 Healthwatch Support

Residents continue to seek support from HWH in a variety of circumstances, for example:

- We received complaints from two individuals about the wheelchair service this quarter, concerning the assessment process and communication problems. As a result of this, we contacted the service provider, who was keen to meet with us to resolve ongoing issues. We also talked to the Hillingdon Clinical Commissioning Group (CCG) who, having previously involved us in their plans for personal wheelchair budgets, were keen to invite these individuals to be part of the personal wheelchair budgets service user group. As a result of this partnership working, the individuals concerned have been contacted by the service provider and are satisfied with the outcomes.
- Another individual contacted us with concerns about their 85-year-old relative, who was in Hillingdon Hospital. The patient had been cared for at home for the previous five years by the family member. The patient went into hospital with cellulitis on their legs. After the first week the family were told the infection had cleared up but the patient had delirium as a result of the infection, so the hospital said it was not safe for

them to go home. The patient then spent four weeks in hospital and became incontinent, unable to eat, drink, or sit up. The family member had a meeting with the hospital team but said they were unable to ascertain why their relative had deteriorated so much since being there, from being admitted with an infection that had cleared after a week. They wanted an explanation of how it had got to this, as they were expecting the patient to be able to go home once the infection had cleared up. We were given permission by the individual to share these details with the hospital and CCG in order to look into this case. We raised this as a safeguarding concern, and this was investigated by Hillingdon Social Services.

- As a Healthwatch it is important for us to understand whether a case has been closed and what the learning might be. We were assured that Social Services had escalated this concern and that the patient's status was a direct reflection of their complex clinical needs and the care and treatment being delivered were appropriate. In order to ensure that the patient's relative was fully aware of the situation, the ward manager was asked to arrange a family meeting. The ward manager advised us that he had met with the family and there was improved communication throughout the patient's stay, with a positive relationship between the family and staff, and that the patient responded well to treatment and was discharged soon after, having regained their baseline level of function.
- In another case, we were contacted by an individual whose son had suffered a spinal injury and, on returning home from hospital, had to care for their son themselves for the first two weeks, as no care was provided. Care was then provided by an agency, through Hillingdon Social Services. However, after Easter, the individual phoned the agency to say they didn't want the carers anymore as they were very unhappy at the conduct and lack of care for their son. The individual was told that the care would need to be cancelled by social services; they then had to wait for the social worker to call a meeting, where the individual expressed their concerns that the package of care was not working for their son. Social services said there needed to be a four-week notice period for the cancellation (which would start from the date of the meeting). The individual found this very frustrating and contacted Healthwatch because they were very unhappy about how all this was being handled, saying they had not seen any care plan for their son. We followed this up with Adult Social Care and the social worker involved contacted us to inform us that their manager had then spoken with the individual regarding a new support plan for their son moving forwards, which the individual had agreed to.
- We were able to assist another individual who had tests for HIV and Hepatitis at the Tudor Centre in July 2018 but, when trying to chase up the results, were told that their file had been lost due to the service moving. The individual then contacted the new service provider and was promised a call back, but after three days nothing had happened. The individual phoned again on 24/5/19 and was told a nurse would phone back, but when HWH called the individual four days later, they still had not received any phone call. This was obviously very concerning for the individual, so we took this up with the service provider and the issue was swiftly resolved.

5.3 Signposting Service

During this quarter a total of 211 enquiries from residents were recorded which resulted in HWH providing information, advice, signposting or referral. 183 of these can be categorised as universal and 28 as a result of advising individuals following a complaint or

concern. Individuals are signposted to a wide range of statutory and voluntary organisations across health and social care. The following table illustrates the reasons for people contacting our service and the ways in which HWH can help them through signposting to appropriate organisations.

| How did HWH assist? | Qty | % |
|--------------------------------------|-----|-----|
| Signpost to a health or care service | 51 | 24% |
| Signpost to voluntary sector service | 49 | 23% |
| Requesting information/advice | 50 | 24% |
| Requesting help/assistance | 19 | 9% |
| General Enquiry | 42 | 20% |
| Total | 211 | |

| Organisations signposted to? | Qty |
|------------------------------|-----|
| CAB | 17 |
| NHS - other | 14 |
| Mental Health | 6 |
| NHSE | 5 |
| Hospital | 8 |
| Social Services | 4 |

6. REFERRING TO ADVOCACY

We continue to provide people with the information they need to make complaints about the services they have received, including signposting them to POhWER and AVMA for advocacy support (see table below).

| Advocacy Referrals | Qty |
|--------------------|-----------|
| POhWER | 18 |
| AVMA | 3 |
| Total | 21 |

7. ENGAGEMENT

The NHS Long-Term Plan (LTP) was the main focus of our engagement activities for this quarter. We carried out targeted engagement at Mount Vernon and Hillingdon hospitals speaking to patients and visitors and encouraging them to share their views of the NHS LTP via the LTP surveys. We spoke to stroke survivors and mental health service users to find out what they wanted from local NHS services and invited them to have their say at one of our LTP focus groups. We also had a stall at the Hayes Muslim Centre and distributed over 100 surveys to worshippers of the Mosque.

In addition to our engagement on the Long-Term Plan, the 1st June was the start of national Volunteers' Week. To mark this important week, we held two volunteer recruitment events in Hayes and Uxbridge to raise awareness of the benefits of volunteering and to promote our current volunteering opportunities.

Finally, we concluded our visits to Hillingdon dental practices which was part of our mystery shopping exercise to look at access to dentistry for people with disabilities. We will pull together the information we have gathered through this exercise into a report which will be presented at the September Board Meeting.

During this very busy period, we attended 27 events across Hillingdon and engaged with over 700 residents.

Key highlights:

Launch of new dental practice in Yiewsley

We were delighted to attend the official opening of a new dental practice in Yiewsley (Feel Good). The newly commissioned surgery offers ground floor access to patients in the West Drayton and Yiewsley areas who would no longer need to travel to find a dentist with step-free access.

The launch was attended by representatives of NHS England and The Clinical Commissioning Group and staff at the practice provided a tour of the building and its state of the art facilities.

Visual impairment reading group

We revisited the Uxbridge VIP Audio Book Group to verbally present the Wayfinding and Signage Report to those who took part in the signage audit. The group were complementary about the report and welcomed our recommendations to The Hillingdon Hospital on how wayfinding could be made easier for the visually impaired community.

Hillingdon Carers Fair

We had a stall at annual carers fair which was held at the Pavilions shopping centre in Uxbridge. We engaged with over 60 people at this event, providing them with information about Healthwatch Hillingdon and where necessary, signposting them to other services.

Events

| Event | Attendance | Direct Engagement | Age Category | | | | Communities of Interest |
|--|------------|-------------------|--------------|--------|---------|---------|-------------------------|
| | | | Under 5s | 6 - 21 | 22 - 65 | Over 65 | |
| Yeading Library | 25 | 7 | | 10 | 2 | 13 | General Public |
| Yeading Library | 22 | 5 | | 8 | 6 | 8 | General Public |
| The Stroke Association Support Group | 32 | 32 | | | 8 | 24 | General Public |
| Mead House service users support group | 13 | 13 | | | 13 | | General Public |
| The Hillingdon Hospital (LTP engagement) | 200 | 40 | | 2 | 30 | 8 | General Public |
| Yeading Library | 20 | 6 | | | 6 | | General Public |
| The Hillingdon Hospital | 300 | 30 | | 2 | 20 | 8 | General Public |
| Mount Vernon Hospital | 65 | 50 | | | 40 | 10 | General Public |
| Hayes Muslim Centre | 300 | 300 | | | | | General Public |
| Healthwatch Hillingdon LTP Focus Group (<i>Mental Health</i>) | 12 | 12 | | | 6 | 6 | General Public |
| Healthwatch Hillingdon LTP Focus Group (<i>General issues</i>) | 10 | 10 | | | 3 | 5 | General Public |
| Health Awareness Day – Hillingdon Sports and Leisure Centre | 40 | 14 | | 3 | 11 | | General Public |
| Visual Impairment Reading Group | 9 | 9 | | | 1 | 8 | General Public |

| Event | Attendance | Direct Engagement | Age Category | | | | Communities of Interest |
|---|------------|-------------------|--------------|--------|---------|---------|-------------------------|
| | | | Under 5s | 6 - 21 | 22 - 65 | Over 65 | |
| Stall at Hillingdon Leisure Centre | 60 | 13 | | | 12 | 1 | General Public |
| Hillingdon Carers Health MOT Day | 10 | 5 | | | 5 | 5 | General Public |
| Hertz Wellbeing Day | 30 | 8 | | 5 | 25 | | General Public |
| Volunteer recruitment event – Botwell Green Library | 25 | 5 | | | 5 | | General Public |
| Volunteer Open Day at Healthwatch Hillingdon | 2 | 2 | | | 2 | | General Public |
| Hillingdon Carers Fair | 200 | 60 | | 5 | 35 | 20 | General Public |
| Assembly for disabled people | 80 | 11 | | | 6 | 5 | General Public |
| H4ALL Community Development launch event | 40 | 10 | | | 10 | | General Public |
| The Wednesday group | 9 | 9 | | | 1 | 9 | General Public |
| Hillingdon BoB | 12 | 12 | | | 12 | | General Public |
| Assembly for older people | 80 | 14 | | | 10 | 70 | General Public |
| Barr Lodge - Sheltered Housing Scheme | 17 | 17 | | | 1 | 16 | General Public |
| SEN Fun Day | 100 | 20 | | 5 | 15 | | General Public |
| Launch event – Yiewsley dental practice | 15 | 6 | | | 15 | | General Public |
| Total | | 720 | | | | | |

Social Media

We have added 8 new twitter followers during Q1 2019 which is lower than in the previous quarter. However, our tweet impressions, which is the number of times people have seen our tweets has increased from 11,962 in Q4 2018 to 12,550 in the Q1 2019. The tweet which earned us the most impressions and was therefore the most viewed was our invitation to join the NHS Long Term Plan Focus Group.

Facebook has seen a steady increase in page likes, with a sharp spike in total reach due to the LTP work, wherein community groups were engaged to gain feedback via the surveys.

On Instagram our followers have continued to grow quickly, and we are fast approaching 400 followers. As we have mentioned in previous reports, we believe there is scope to grow our followers further.

We recently recruited a new Social Media volunteers who has some fantastic ideas on how we can grow our channels and increase engagement. We are excited about putting their ideas into practice.

With good progress on all our social media channels we will continue to grow our audience accordingly, with an upcoming website redesign to complement this work.

| | | January | February | March | April | May | June |
|-----------|-----------------|---------|----------|-------|-------|-------|-------|
| Twitter | Followers | 1234 | 1240 | 1248 | 1249 | 1255 | 1257 |
| | Impressions | 2591 | 2883 | 6488 | 5,480 | 4,228 | 2,842 |
| | Profile Visits | 96 | 57 | 297 | 136 | 83 | 63 |
| Facebook | Likes | 435 | 436 | 443 | 456 | 462 | 473 |
| | Post Reach | 52 | 1461 | 9991 | 34018 | 3711 | 6873 |
| | Post Engagement | 2 | 40 | 403 | 1779 | 224 | 446 |
| Instagram | Followers | 314 | 328 | 344 | 354 | 363 | 374 |

8. VOLUNTEERING

Our volunteers contributed a total of 644 hours to Healthwatch Hillingdon in Q1. They supported us with our engagement on the Long-Term Plan, participated in our focus groups and helped run stalls at local community events.

With the help of our graphic design volunteer, we are producing a new volunteering leaflet which when printed, we will distribute to community groups, libraries and other venues across Hillingdon to attract more volunteers to Healthwatch.

Volunteers' Week

During National Volunteers' Week, several residents expressed an interest in joining Healthwatch Hillingdon and we are happy to have recruited a volunteer new Community Ambassador through our open day at the Healthwatch Hillingdon office.

9. FINANCIAL STATEMENT

To end of Quarter 1 (2019-2020)

| Income | |
|---|-----------------|
| Funding received from local authority to deliver local Healthwatch statutory activities | 42000 |
| Bought forward 2018/2019 | 95391 * |
| Additional income | 72 |
| Total income | 137462 * |

| Expenditure | |
|--------------------------|--------------------|
| Operational | 8011 |
| Staffing | 34089 |
| Office | 2630 |
| Total expenditure | 44731 |
| Surplus to c/f | 92732 ¹ |

¹ Provisional, awaiting audited figure. The figure also includes contingencies (£20,000 for office rent and staff redundancies). The carry forward is larger than usual due to vacancies which have now been filled

10. **KEY PERFORMANCE INDICATORS**

To enable Healthwatch Hillingdon to measure organisational performance, 8 quantifiable Key Performance Indicators (KPIs), aligned to Healthwatch Hillingdon's strategic priorities and objectives, have been set for 2017-2020. The following table provides a summary of our performance against these targets during Q1 2019.

| KPI no. | Description | Relevant Strategic Priority | Quarterly Target 2019-20 | Q1 | | | Q2 | | | Q3 | | | Q4 | | | 2018-2019 Total | |
|---------|--|-----------------------------|--------------------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------------|--------|
| | | | | 2017-2018 | 2018-2019 | 2019-2020 | 2017-2018 | 2018-2019 | 2019-2020 | 2017-2018 | 2018-2019 | 2019-2020 | 2017-2018 | 2018-2019 | 2019-2020 | Target | Actual |
| 1 | Hours contributed by volunteers | SP4 | 525 | 540 | 629 | 644 | 504 | 689 | | 363 | 729 | | 564 | 669 | | 2100 | 644 |
| 2 | People directly engaged | SP1 SP4 | 330 | 220 | 444 | 720 | 675 | 713 | | 2027 | 427 | | 440 | 317 | | 1320 | 720 |
| 3 | New enquiries from the public | SP1 SP5 | 200 | 208 | 243 | 254 | 286 | 267 | | 247 | 215 | | 235 | 194 | | 800 | 254 |
| 4 | Referrals to complaints or advocacy services | SP5 | N/A* | 24 | 21 | 21 | 23 | 13 | | 17 | 18 | | 6 | 18 | | | 21 |
| 5 | Commissioner / provider meetings | SP3 SP4 SP5 SP7 | 50 | 62 | 62 | 50 | 70 | 52 | | 52 | 52 | | 49 | 50 | | 200 | 50 |
| 6 | Consumer group meetings / events | SP1 SP7 | 15 | 26 | 19 | 27 | 23 | 18 | | 13 | 14 | | 31 | 17 | | 60 | 27 |
| 7 | Statutory reviews of service providers | SP4 SP5 | N/A* | - | - | - | - | - | | - | - | | - | 1 | | | 0 |
| 8 | Non-statutory reviews of service providers | SP4 SP5 | N/A* | 5 | 3 | 1 | 2 | 2 | | 2 | 2 | | 1 | 1 | | | 1 |

*Targets are not set for these KPIs, as measure is determined by reactive factors