

RAISE Supporting Influence network: supporting voluntary and community sector influence on health and wellbeing boards

## Briefing paper for the Supporting Influence network

# Supporting influence through collaboration: local Healthwatch working with the Voluntary & Community sector

July 2014

### This briefing paper is for:

**Health and wellbeing board members**, to enhance their understanding of local Healthwatch and the Voluntary and Community Sector;

**Voluntary and Community Sector organisations and local Healthwatch organisations** looking to collaborate to meet their mutual aims; and

**Health professionals and others** interested in understanding more about the contribution of local Healthwatch and the VCS to the health and care landscape.

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## Purpose of the Supporting Influence network

The Supporting Influence network<sup>1</sup> aims to support voluntary and community sector (VCS) influence on health and wellbeing boards through keeping up-to-date about developments and supporting connection and learning between local areas.

In each of the nine English regions, Regional Voices' component organisations are developing networks to support voluntary sector influence on health and wellbeing boards. The networks are working to support effective engagement with health and wellbeing boards, both where there is a VCS representative on the board and where there isn't, and are looking at different routes to influence and sharing good practice nationally. The Supporting Influence programme recognises that the VCS is well-connected to the communities it serves and can contribute in so many ways, including:

- Expertise and connections
- Intelligence about community need
- Factors affecting wider determinants of health
- Help marginalised groups input their voice
- Community voice and provider expertise into care pathway redesign

## Why this briefing paper?

Surveys and network meetings to date have revealed that there is still some uncertainty about the difference between local Healthwatch and the VCS, with many considering them to be one and the same. We also know that many local Healthwatch organisations and VCS organisations alike want to work better together for mutual benefit, but don't always know how.

Our research has told us that they would benefit from some simple examples of local Healthwatch and VCS collaboration in practice.

The purpose of this briefing paper is therefore to:

- provide clarity about what local Healthwatch is and how it is different from the VCS;
- support collaborative working between local Healthwatch and the VCS through real life examples and case studies

<sup>1</sup> Funded by the Department of Health (Innovation, Excellence and Strategic Development Fund)

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## 1. What is local Healthwatch?

Local Healthwatch gives communities a stronger voice by influencing and challenging how health and social care services are delivered, as well as signposting people to information to help them make more informed choices about health and care services.

Local Healthwatch<sup>2</sup>:

- enables people to share their views and concerns about their local health and social care services and understands that their contribution will help build a picture of where services are doing well and where they can be improved
- has a seat on the statutory health and wellbeing boards, ensuring that the views and experiences of patients, carers and other service users are taken into account when local needs assessments and strategies are prepared
- alerts Healthwatch England, or the Care Quality Commission and/or council scrutiny committees where appropriate, to concerns about specific care providers, health or social care matters
- provides people with information about their choices and what to do when things go wrong
- gives authoritative, evidence-based feedback to organisations responsible for commissioning or delivering local health and social care services
- can help and support clinical commissioning groups and council social care departments to make sure that services really are designed to meet citizens' needs
- signposts people to information about local health and care services and how to access them

## 2. What is the voluntary and community sector?

The VCS is very diverse. It covers everything from local befriending groups to social enterprises to national and international charities. Broadly speaking<sup>3</sup>, there are four types of VCS organisations working in health and care:

- National charities and their branches in local areas or regions
- Service providers - contracted to provide services in health and social care
- Community groups - often volunteer-led, bringing people together to provide peer support, promote self-help, and help people to voice issues
- Infrastructure organisations - providing support to other organisations

Other names for VCS organisations include charities, third sector organisations, not-for-profit organisations, community groups, social enterprises, civil society organisations and non-governmental organisations.

<sup>2</sup> From the LGA publication 'Delivering Effective Local Healthwatch'  
<http://www.local.gov.uk/documents/10180/11463/Delivering+effective+local+Healthwatch+-+key+success+factors/0aa41576-d5f1-40e9-9b7c-fa2d9716618e>

<sup>3</sup> From the Regional Voices publication 'Working with the voluntary sector: a guide for health and wellbeing boards'  
[http://www.regionalvoices.org/sites/default/files/library/Briefing\\_on\\_VCS\\_for\\_healthwelbeingboards.pdf](http://www.regionalvoices.org/sites/default/files/library/Briefing_on_VCS_for_healthwelbeingboards.pdf)

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### 3. Why should local Healthwatch collaborate with the voluntary and community sector?

VCS organisations have a vital role in addressing the health and social care needs of communities. They can represent the “voice” of the communities they serve, including those that are often marginalised. Voluntary and community organisations establish in response to an unmet need - where public or private sector interventions have not fully addressed the needs of a population. They often work with the most disadvantaged communities - both geographic localities and communities of interest.

Many VCS organisations work directly in health and social care, whilst others work to improve the wider determinants of health, such as housing or sports. Work may focus on a particular part of the life course, such as charities for older people, or on people with particular protected characteristics, such as groups serving a particular ethnic group.

The contribution of the VCS to the design and delivery of services, and to reducing health inequalities, makes it an essential partner in the success of local Healthwatch.

### 4. How will collaboration benefit health and wellbeing boards?

By working better together to support the work of the health and wellbeing board, Healthwatch representatives and VCS representatives (where they exist) can have a bigger influence to ensure more effective representation of patients, the public and communities, thereby promoting and supporting the involvement of people in the commissioning of local care services.

Through collaboration they can support the health and wellbeing board to:

- build a comprehensive picture of community needs and assets for their Joint Strategic Needs Assessment - for example by feeding in local evidence
- identify strategic priorities -for example by supporting community participation in prioritisation; and
- develop commissioning plans - for example supporting pathway redesign, reviewing commissioning plans, developing and offering innovative services

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## 5. Opportunities for local Healthwatch in collaborating with the VCS

Local Healthwatch functions	Opportunities include:
Gathering views and understanding the experiences of people who use services, carers and the wider community.	<ul style="list-style-type: none"> <li>• Making use of well-established networks and partnerships</li> <li>• Accessing those who tend not to access traditional services and whose voices are seldom heard</li> </ul>
Making people's views known by enabling people to share their views and concerns about their local health and social care services and helping people to understand that their contribution will help build a picture of where services are doing well and where they can be improved	<ul style="list-style-type: none"> <li>• Using their existing communication channels to promote local Healthwatch activity and to target information appropriately.</li> <li>• Learning from their front line interaction with beneficiaries to highlight causes for concern early on</li> </ul>
Promoting and supporting the involvement of people in the commissioning of local care services and how they are scrutinised	<ul style="list-style-type: none"> <li>• The VCS gathers a wide range of quantitative and qualitative information and intelligence across a wide range of topics. Local Healthwatch can use this information to develop a more robust evidence base.</li> <li>• Working together with VCS reps on the health and wellbeing board to develop a stronger case and have a bigger influence to ensure more effective representation of patients, the public and communities</li> </ul>
Alerting Healthwatch England, the Care Quality Commission and/ or council scrutiny committees where appropriate, to concerns about specific care providers, or health or social care matters of concern	<ul style="list-style-type: none"> <li>• Gathering a range of views using their deep routes into communities</li> <li>• Harnessing existing data and intelligence</li> </ul>
Providing advice and information about access to services and support for making informed choices	<ul style="list-style-type: none"> <li>• Coordinating information on local services</li> <li>• Sharing intelligence to identify gaps in service provision as well as information</li> <li>• Raising awareness of local Healthwatch as a source of information and advice</li> </ul>

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## 6. Examples of local Healthwatch and voluntary and community sector collaboration

### Projects to achieve local Healthwatch functions...

**Healthwatch Bucks** has commissioned a number of projects through the local VCS organisations, all of which enable them to gather evidence and insight to fulfil their Healthwatch functions. These include:

- a project to capture the voices of those with learning disabilities and their experience of health and care services
- work by a young people's action group to make a video for health professionals
- a project to capture the voices of children in care
- a project involving work with Gypsies and Travellers and local health providers
- a community engagement project carried out by the CVS Community Impact Bucks on transport for health care
- an advocacy organisation to do some evidence gathering around gypsies and travellers

**Healthwatch Bucks** also held a conference in partnership with the CVS Community Impact Bucks as an opportunity for VCS organisations and community groups in Buckinghamshire to share experiences and develop a shared understanding about how they can work in partnership with Healthwatch Bucks.

**Healthwatch Kent** has a special grant pot which we will use to commission voluntary organisations to undertake projects on their behalf.

**Healthwatch West Berkshire** has a small grants scheme which is being used to fund work on mental health, disability and on vulnerable groups more generally.

### Local Healthwatch working with Citizens Advice Bureau and local infrastructure organisations...

Many local Healthwatch organisations across England have strategic partnerships with their local Citizens Advice Bureau (CAB). CABs can play a key role in helping people to find their way around the health and social care system, and can also feed back to local Healthwatch key messages and concerns that it is hearing directly from the public.

The nature of the collaboration can vary: for example, there are a number of CAB/VCS partnerships that were successful in winning the contract to deliver local Healthwatch. In some areas in other cases the partnership is less formal, but might include a Memorandum of Understanding as a statement of intention of how participating organisations will commit to partnership working.

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A separate case study on CAB's role in evidence for planning in health, wellbeing and care can be accessed via the following link: <http://www.regionalvoices.org/VCS-Intelligence>

Strategic partnerships with infrastructure organisations, such as CVS (Councils for Voluntary Services) are also common since, through their extensive networks of local voluntary and community sector organisations, they can provide a current picture of local services, help to identify gaps and facilitate access to a huge range of organisations, partnerships and networks.

### **Local Healthwatch and the VCS collaborating to support the work of the Care Quality Commission (CQC)...**

RAISE has collaborated with a number of local Healthwatch and VCS organisations to access people and organisations to share their recent experiences of health and care services being inspected. For example, **Healthwatch Portsmouth** and RAISE collaborated with the CQC as part of a themed national survey on the experiences of people with dementia and their families who had been admitted to an acute hospital from a care home and also those who have been discharged from hospital to a care home in the last year. The focus was on both emergency and non-emergency admissions to hospitals from care homes - people living with dementia, carers and organisations were invited to come along and discuss their experiences on the quality of care provided to support people living with dementia to maintain their physical and mental health and wellbeing.

### **Local Healthwatch partnering with universities...**

**Healthwatch Milton Keynes** is one of a growing number of local Healthwatch organisations partnering with a university to harness their research skills. They recently commissioned the Open University to do some research on digital inclusion and social isolation.

A project called 'No barriers to information' was delivered by the Community University Partnership Programme (CUPP) in Brighton for **Healthwatch East Sussex** to ascertain the level of interpretation and communication support available for people accessing health and social care services in East Sussex.

**Healthwatch Bucks** is to partner with Bucks New University on a project entitled 'Dignity in Care'. The project will evaluate the standard of Dignity in Care provided by Buckinghamshire's Care Providers by engaging directly with those who use the services as well as their families and carers. It is intended that more than 150 service users, their carers and care professionals will be interviewed over the life of the project. The outcomes from this work will be shared widely across the sector as well as with the public and with national bodies such as Healthwatch England and will be used to improve the experience for service users, improve practice across care settings and inform commissioning decisions.

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## Healthwatch Milton Keynes developing a network of networks - a case study

Healthwatch Milton Keynes made “Developing networks of networks” the key theme of their annual meeting and have asked members of leading VCSE sector organisations to come and do a 2 minute “elevator pitch” saying who they are, why networks are important and what they are going to do (to “pledge”) to help with this development. We have also invited members of the statutory sector to do the same but for them we have asked them to pledge in terms of listening and acting. We have helped the voluntary sector connect through our e-alerts and they in return have circulated information about our activities. We meet with groups via our community outreach officer and also meet on specific topics on an ad hoc basis - such as on mental health issues where we and local mental health charities are concerned about quality of service delivery. We have been exploring ways that we can use our statutory roles and responsibilities to give a more powerful voice to these issues.

## Healthwatch East Sussex - a case study

Since April 2013 Healthwatch East Sussex has developed partnerships across the voluntary and community sector as well as with the hospital Trusts, East Sussex County Council and the three local CCGs.

Healthwatch East Sussex is delivered by East Sussex Community Voice (ESCV), a new community interest company. In staying true to its organisational goals of remaining as a lean core team, ESCV took the decision to outsource many of the operational functions of local Healthwatch, including:

### Signposting and information services

‘Development Resource’ delivered by Age UK East Sussex to reach out into communities across the East Sussex districts and boroughs, and provide information to people / groups / organisations on the full range of Healthwatch East Sussex services.

‘Information Line’ delivered by Sussex Community Development Association to provide the Healthwatch East Sussex information line service, between the hours of 10.00am and 4.00pm Mondays to Fridays, using paid staff.

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## Commissioning evidence and insight

There are occasions when ESCV will require additional evidence and insight from which to prioritise the Healthwatch East Sussex function. ESCV has a partner framework of over 40 local voluntary and community organisation and consultants, through which the majority of this work is commissioned.

In year one ESCV was able to commission a number of innovative activities. These were developed from concerns and information that was shared with Healthwatch East Sussex by both the public and partner organisations in the voluntary and community sector.

ESCV has, for year two, developed a formalised priorities framework. It will be through this process that ESCV analyses the data we collect on health and social care issues, and that will inform future commissions for evidence and insight.

The areas below are examples of the evidence and insight work commissioned from the year one budget. ESCV will publish reports, recommendations and feedback from these areas to both local partners, and on the Healthwatch East Sussex website,  
<http://www.healthwatcheastsussex.co.uk>.

**Q-team<sup>4</sup> care visits delivered by Southdown Housing**, to plan, deliver and report on six Q Team sessions using the 'Southdown Q Kit tool'<sup>5</sup>. This will support service users with learning disabilities and their families in a co-produced quality checking of the services they receive.

**Listening to our communities delivered by Age UK East Sussex** to plan and deliver five listening events with people who use mental health services in East Sussex, one in each district/borough. The focus was to draw out what is working well for service users and carers, and what isn't.

**HIV/Aids awareness training delivered by Terrence Higgins Trust** which planned and delivered two interactive HIV/AIDS Awareness sessions with NHS staff from East Sussex Healthcare Trust in Eastbourne and Hastings and four short sessions with Sussex Partnership Trust in different venues with different staff teams.

In year two ESCV will continue to engage with the public and the voluntary and community organisations on health and social care issues, (including children's health and social care issues), and ensure these are listened to by the strategic / commissioning decision makers and service providers.

<sup>4</sup> Q Team- two teams of service users with learning disability services that are committed to improving the quality of life for all service users> Read more about Q Team and the Southdown Toolkit on <http://www.southdownhousing.org/get-involved/the-q-team/>

<sup>5</sup> A quality checking tool designed by service users. Read more about the tool on <http://www.southdownhousing.org/services/learning-disability-support/the-q-kit/>

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Achieving this will require that ESCV continues to develop a strong partnership with the voluntary and community sector in East Sussex.

East Sussex Community Voice has worked hard in its first year to develop strong partnerships with the voluntary and community sector, and in particular to ensure that through the Healthwatch East Sussex functions and its commissioning responsibilities, it is adding value to the sector.

For more information, please contact [info@escv.org.uk](mailto:info@escv.org.uk) or call 01273 646 890

## References:

Regional Voices has produced resources to support the voluntary sector to understand, link in with and influence health and wellbeing boards:

**'Influencing local commissioning for health and care: guidance for the voluntary and community sector'**

<http://www.regionalvoices.org/sites/default/files/library/Influencing-local-health-and-care-commissioning-RV-briefing.pdf>

**'Working with the voluntary sector: a guide for health and wellbeing boards'**

[http://www.regionalvoices.org/sites/default/files/library/Briefing\\_on\\_VCS\\_for\\_healthwelbeing\\_boards.pdf](http://www.regionalvoices.org/sites/default/files/library/Briefing_on_VCS_for_healthwelbeing_boards.pdf)

## Acknowledgements overleaf

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