Welcome to the summary of our second annual report. We know that lots of information is not for everyone so we have picked out some key highlights from the year. If you want to know more then please download a copy of our full report where you will find much more detail.

This year has seen growth in our activities and I would like to thank all of the team and our volunteers who help us in a variety of ways for their excellent work.

We started this year (2015/16) with the news that Annie Topping (our Chief Executive) has moved onto pastures new. We wish her every success in her new role.

We continue to receive large numbers of stories from people using our health or social care services. These stories are important to us. It is our job to use them to influence commissioners and providers of care.

Finally, please look out for all of the details about our exciting new system for obtaining and analysing your views in 2015/16. This new approach means that it is easier than ever to share your views.

Thank you for your interest in Healthwatch Suffolk.

Tony Rollo
Chair

We are here to listen to your views on health and social care services. Tell us about the good and the bad. We will use your views to make a difference for everyone in Suffolk.
2. About us...

We are clear about our goal - To ensure that the public is heard and to make a difference by giving people the best possible health and social care services.

We aim to give you real influence over decisions about health and social care services by finding out what you think and then using your views to shape and improve them for everyone.

We want people to know that we get their voice heard where it matters; where decisions are made.

Our ambition is to ensure that what patients and carers experience within local services is seamlessly fed into local services; directly shaping health and social care for the future.

We have the strength of the law behind us. It means that the people who run and pay for health and care services must respond to our concerns explaining what action they will take.

We also provide information and signposting to help you to navigate the health and social care system and understand what to do when things go wrong.

As an experienced team, we know that we can provide the NHS, care services, local authorities and others with a significant pool of evidence to help improve services.
Engaging with people who use health and social care services

At least 142,965 minutes engaging communities across the county.

Over 13,000 people engaged at events, meetings and community groups.

1,000 + team activities across Suffolk.

64 volunteers recruited to help us with our activities and to obtain views from local people and communities.

2,000 comments obtained by our Community Development Team from the public about health and care services.

Our experienced team of four Community Development Officers (CDO) have been active this year attending events, meetings and community groups across the county.

Each CDO has a nominated geographical area (determined by the county district council boundaries) within which they operate. This means that communities have a named person through which they can link into our work or receive support.

The team:

- Raises awareness of Healthwatch Suffolk.
- Obtains feedback from local people and communities.
- Recruits and trains volunteers to support our work.
- Encourages participation in our research and projects.
- Develops relationships with key partners who work in the voluntary, private and statutory sectors.
- Develops mutual partnerships with organisations that can support our work and outcomes.
- Where appropriate, signposts people to information that can help them to get the best out of local services.
- Encourages people to become friends or members.
We have engaged with many communities and groups throughout the year. Some of these are a focus of the Healthwatch network and include:

- People who are under the age of 21
- Older people over the age of 65
- Groups of people that we perceive to be vulnerable

**People under the age of 21**

Our team has been working to connect with schools and have engaged young people at many events and groups.

We were proud to work with South Suffolk Leisure to deliver free events for young people at Hadleigh Pool and Leisure, Ormiston Academy, Hadleigh and East Bergholt High Schools.

We also worked with Ipswich Hospital NHS Trust to run an event for young people, which resulted in good outcomes.

**People over the age of 65**

As above, we have engaged many older people at specific events, meetings and groups. We have also contributed to the development of a local Dementia Action Alliance in Hadleigh. This includes a number of commitments.

People in communities across the county have been telling us that problems with accessing patient transport to and from healthcare services (e.g. hospitals) in the county is causing a problem for many people and local communities. This is particularly true of older people. We therefore launched a project to explore this. See page 18 for more details.

**Vulnerable groups**

Our team engages with many individuals and groups that we perceive “vulnerable” to obtain views and experiences. Some examples of note include (amongst others):

- Visits to the Sunset Barn Care Farm
- Regular attendance at the Leading Lives hubs including the No 72 Cafe
- Regular engagement with Mid Suffolk Axis
- Obtaining views from service users supported by Headway

This engagement brings us into contact with many patients, service users and their carers, who have lived experience of services in support of a range of disabilities.

Mental Health service users are a key group. Driven by our working partnership with the Suffolk User Forum, we have engaged with mental health service users in several ways. This has included:

- A research project on experiences of being referred into mental health services via the Access and Assessment Team (AAT).
- Our Mental Health Focus Group
- Our project on mental health and wellbeing services

Please see our full report for more details about the specific groups and communities we engaged in 2014/15.
Our Operational Delivery Sub-Groups

BME and Diversity
Our BME and Diversity sub-group is one of the most productive means through which we are able to engage diverse communities in Suffolk and, in particular, communities that may be seldom heard.

One of the most significant outcomes from the work of this group included enabling service users with first hand experience of family life living with Sickle Cell Disorder to raise concern at the lack of information and support for the disease in Suffolk.

A year on and the group has achieved recognition and positive changes are happening to improve experiences for people using services.

Mental Health Focus Group
Our MHFG facilitates conversation between those responsible for mental health services, service users, carers and organisations. It is a forum for sharing experiences and is central to our work related to mental healthcare.

This year, the group has focused on shortcomings in crisis services and has suggested radical improvements.

It has also discussed the performance of the new Access and Assessment service which is the gateway to all secondary mental health services. Our research project highlighted a number of areas that could be improved (see details in our full report).

“The Mental Health Focus Group provides an excellent opportunity for all those key stakeholders to come together to discuss mental health in a way that no other meeting does. The people in the room are all passionate about the subject matter and it enables me as a commissioner to really hear about the things that matter to people.”

Alison Leather - Associate Director of Redesign (Mental Health/LD & Children's & Maternity) for NHS Ipswich and East Suffolk Clinical Commissioning Group

Enter and View Management Group
Enter and view is one of the powers that we have available to us to monitor and challenge health and social care services. It will see our authorised representatives visit health and social care settings to observe and engage with patients or service users, their carers and the staff.

The inaugural meeting of our Enter and View Management Group took place in November 2014. It has the role to coordinate our Enter and View activity.

The recruitment of volunteer “authorised representatives” began soon after and, to date, we have trained a total of 16 visitors.

Each of our volunteers have received bespoke Enter and View training as well as important training in safeguarding, dementia awareness and report writing.

Our first Enter and View visits will take place in July 2015 with an emphasis on care homes. We will pay close attention to the resident’s quality of living as well as their interaction with staff, opportunities for leisure and nutrition.

Anetta Bradshaw and Helga Borges share their experience with us in our full annual report.
Engaging local people with effective communications

We know that not every person likes to communicate in the same way. That is why we have many channels (e.g. newsletters, website and social media) through which we feedback on our work and engage people for their views on local health and care services.

A strong presence on social media platforms is essential to our success because it enables us to engage with a discursive online community around its local health and social care issues.

In 2014/15, we increased our followers on Twitter by 64% from just over 1,000 followers to nearly 2,000. We updated people with around 3,000 tweets throughout the year.

In 2013/14 Healthwatch Suffolk achieved more mentions in the media than any other local Healthwatch in England. It means everyone in Suffolk had the opportunity to read something about us at least five times.

To pay for the same coverage we would have needed to pay £191,304.87. We estimate that the total media circulation was 3,752,215 people.

11,277 new visitors viewed our website. That’s a 165% increase over last year. Our site received 38,478 page views. For 2015/16 we are changing the way we obtain views from people online about their experience of local services (see page 19).

We know that not every person likes to communicate in the same way. That is why we have many channels (e.g. newsletters, website and social media) through which we feedback on our work and engage people for their views on local health and care services.
Nearly 100 people contacted our information and signposting service in 2013/14. 52 contacted us by telephone. The rest were made by email, letter or out in the community.

We actively promote a range of resources on our website to help people find local services and seek information to help them make appropriate choices.

Nearly half of our signposting enquiries were from people that needed help to make a complaint about the care they have received within health and social care services.

In addition to ensuring that the voices of service users, patients and the public are heard by decision makers within health and social care, we also provide an information and signposting service to the public about accessing health and social care services.

Our service:

• Provides a free and confidential service, independent from the NHS and care services.
• Will give you contact details for a range of services that best support your request. You will need to contact those organisations yourself.
• Provides information about choices you have to get help in relation to your health, social care and wellbeing needs.
• Can put you in touch with sources of information on NHS and social care services in Suffolk.
• Provides information about what to do when things go wrong and you don’t understand how to make a complaint.
Mrs X called us because she needed help to get to her appointment at hospital. Her normal Dial-a-Ride service was unable to transport her on the day of her outpatient appointment and she did not know how she could get to hospital otherwise.

A quick search on directories of information enabled us to help by advising of other community based transport services nearby. We provided Mrs X with the details she needed and she was able to find an alternative option and make it to her appointment.

Mr Y is an older person who contacted us because he had seen an advertisement about a health screening event near to his community. As an older person, Mr Y was concerned about his health and was keen to explore the screening options available to him. He was nervous because he did not want to be “scammed”.

We checked the company providing the screening to see if they had been registered with the CQC and were meeting safe standards of care. We also signposted Mr Y to talk to his GP about the options available to him and what the essential screening options were for his age group.

Mr Z called us for help with his sight loss. He lost sight in one of his eyes some time ago but recently noticed a change in his ability to read and assess depth.

We signposted Mr Z to local organisations with a base in Suffolk that could provide good advice and ongoing support to people with sight-loss including Sensing Change and the West Suffolk Association for the Blind.
The Suffolk Information Standard
Many organisations produce information about health, care and wellbeing in Suffolk. It can vary greatly in quality, which means that it can be confusing for the public.

To help improve this, we are working with the Suffolk Information Partnership to deliver a local Standard. It will give the public confidence in information available in the county and ensure that standards to promote quality information are maintained.

Accreditation enables organisations to demonstrate that they:

- Provide information based on well-founded internal processes; consistent with other information providers in the county.
- Provide reliable up-to-date information and is part of an accreditation scheme.
- Are committed to giving trustworthy information about services.
- Follow good practice by having a review procedure for information giving.
- Train staff and/or volunteers to provide quality information.
- Have fulfilled criteria and eligible to display the Suffolk Information Standard logo.

To date, a total of nine organisations are accredited with the Suffolk Information Standard. These are:

- Healthwatch Suffolk
- Suffolk Mind
- Suffolk Libraries
- Clarke Care Ltd
- Age UK Suffolk
- Suffolk Family Carers
- The Hope Trust
- Suffolk County Council, Adult and Community Services (ACS)

“The Suffolk Information Partnership (SIP) and Healthwatch have worked brilliantly together over the past year to implement the new information standard the Suffolk Information Partnership has developed. This means that we have raised the bar on the quality of information the people of Suffolk can access to support their health and wellbeing. Several organisations have completed the process and many more are beginning.”

Sue Gray (Suffolk Information Partnership Chair)

Helping people to understand the Care Act 2014
Nearly everyone will experience care and support at some point in their lives. It is the term used to describe the help some adults need to live as well as possible with illness or disability.

The Care Act tells county councils across England what they need to do if someone has social care needs.

We developed an information page to help people understand what the changes might mean for their care and support or that of their family, carer or friends now and in the future.

Our page is hosted on our website: www.healthwatchsuffolk.co.uk/the-care-act/

We know that the page has been extensively used by the public and professionals. Other Local Healthwatch have also replicated its design and layout in other areas of England.
Some tasks seem pointless, with others it’s instantly clear why they have to be done and so it was with the application to acquire the Suffolk Information Standard. It wasn’t hard or complicated and along the way we learnt a lot.

As a founder member of Healthwatch Suffolk’s Information working party, I felt it was important that the Information Standard had to work for big, national charities and for charities, like Hope Trust, that are small and without a dedicated admin team. Not demanding but with enough stretch to make the journey from application to accreditation interesting.

What we didn’t expect was for the process to help our small charity establish some simple, easy steps that meant our systems were more robust, helpful and easy to maintain.

So, what has changed?
The formalizing of informal practice means our information standards will remain high, regardless of who works here. The unexpected benefit has come from how others perceive the standard - as the mark of good practice that it is.

This gives our small charity a bit of a boost as we seek to punch above our weight. It has also allowed us to offer some limited information and signposting services to local organisations where we think they might be of benefit and the colourful accreditation mark gives weight to both our intent and ability to deliver; in other words - a win, win, now what could possibly be wrong with that?

Sheila Taylor - The Hope Trust
Throughout 2014/15 we engaged with people and published a number of research projects. This included your views and experiences of:

- Wheelchair Repair services
- Community Equipment Services
- Referral into mental health services via the Access and Assessment Team of the Norfolk and Suffolk NHS Foundation Trust (NSFT)
- Visiting a doctor in Haverhill
- Ambulance and NHS 111 services in Suffolk
- The future model for health and social care services in Suffolk
- GP practices across the county

These reports have resulted in a number of outcomes. A few highlights include (see our full report for more information and details):

- Our analysis of partner engagement activities informed the development of two integrated care projects that have been launched to take forward the common Integrated Care model developed within the Health and Care Review.
- We informed the improvement plans of the East of England Ambulance Service.
- Service users asked for better communication regarding Community Equipment and Wheelchair Repair Services. As a result Serco implemented Terms of Reference for communicating outstanding work orders. These detail the frequency and accountability for communicating with service users.
- A new Carers pack and 2 new information leaflets (one for adults one for children and young people) have been developed for GPs and other referrers to give to service users who are referred to the Access and Assessment Team of the Norfolk and Suffolk NHS Foundation Trust.

Ten reports produced with recommendations for health and social care decision makers.

More than 2,500 individual responses from a range of communities to our surveys in 2014/15.

5287 comment records logged on our database in 2014/15. 59% were negative, 31% were positive and 10% were neutral in sentiment.

Please download our full report for a full breakdown of findings and outcomes from each report.
Using your feedback to improve services

We made a total of 45 requests for information from providers and commissioners of health and social care in Suffolk. Of these 29 were responded to within the required 20 working days.

Making a difference for patients using GP practices in Suffolk

In July 2014, we reported that your views had made a difference to the provision of GP services.

- A practice was reminded about the importance of disability awareness after your comments highlighted a potential gap in staff training.
- A practice made adjustments to the timing of appointments to improve patient experience.
- A practice reviewed room layout because concerns were raised that intimate examinations were being made awkward by obstacles in the room.
- NHS England discussed the current rationale for GP time provision across two sites (the public had perceived an imbalance) and planned to work with the practices to make adjustments where the need for change could be evidenced.

James Paget University Hospitals

In September, we challenged JPUH because we had received commentary to suggest that a person was not adequately informed about a particular procedure. The person also seemed unaware of choices available to them.

- The head of the department was asked to ensure that all staff are aware of the potential for causing distress to patients if processes are not followed with compassion.
- The hospital reviewed practice and procedures for obtaining patient consent and recognised that it has the responsibility to provide patients with information they need. It reviewed the information that it provides.

Negative comments regarding patient discharge from us were incorporated into mandatory training to inform learning at the hospital.

Ipswich Hospital NHS Trust

We raised a number of issues with the Trust this year and it has provided assurances that:

- Comments regarding the poor attitude of staff on a certain ward were addressed.
- Signage within the Eye Clinic is appropriate following a walk around by the Patient Experience Team.
- Following a concerning comment about care within the Trust’s maternity services, issues were raised with staff and midwife rounding was introduced across all maternity wards.
- Patients awaiting transport were experiencing delays on discharge and appeared unclear about when it would arrive. The Trust is working with the ambulance service to address the imbalance between the prioritisation of discharge transport and outpatient transport.

- We had comments from carers because they were not kept informed of their relatives appointments. The hospital has reviewed its administration system and, with the help of its Caring for Carers Group, has been able to successfully test the system to ensure carers receive information about appointments as well as patients.
- The hospital removed an information leaflet about healthy eating and diabetes from its website and subsequently reviewed its format and content. This followed feedback from us on the basis of service user feedback to state that the leaflet contained inaccuracies.

Norfolk and Suffolk Foundation Trust

A comment about the administering of depot medication at a specific clinic led to the Trust reminding staff that patients should be made aware of their right to refuse observation by student nurses. Depot medication is used to treat some types of psychotic illnesses. In this case the person was being given the injection in an intimate area and felt embarrassed by the presence of student nurses. Staff had not checked that the person was happy to be observed.

East Coast Community Healthcare

Following a complaint endorsed by us, Community Nurses were reminded to assess a patient in a full and robust manner before making the decision to ask them to attend a clinic instead of receiving home visits.
A relative came to us because she felt her son, who is a vulnerable adult, had not received good care at the West Suffolk Hospital.

She told us about problems with her son’s care in the hospital, the interpretation of his medical notes and matters concerning the maintenance of his dignity.

We knew that the comment raised important issues and took an immediate decision to escalate it to the Chief Executive. At the same time, we provided information about how she could complain directly to the hospital and get help to do so.

The hospital took the feedback from us very seriously. A thorough investigation was conducted.

“We were saddened to hear of this experience and viewed this feedback as an opportunity to improve the care we provide to this group of patients.

“We were able to implement specific actions targeted to address the issues raised. This has included additional training in ward areas and additional support to patients, families and carers from specialist staff.

“With the support of Healthwatch this family were able to tell us why the care we gave did not meet the specific needs of their son. We apologised for this and have taken steps to change practice.”

Sam Bower (Deputy Chief Nurse)

Improving patient involvement at the Constable Country Rural Medical Practice

“We receive more comments about GP practices than any other service. During the year, we were contacted by the Capel St Mary Parish Council, which was concerned by the response it was receiving from its local practice. Les Bryant (Chair of the Parish Council) describes how we helped his community to be heard.

“Capel St. Mary Parish Council, had been receiving complaints from residents about the service provided by the Constable Country Medical Practice. Attempts by us to discuss and resolve these issues with the Practice and its Patient Representative Group had proved unsuccessful so we approached Healthwatch Suffolk because we knew it has the role to champion the voice of communities across the county.

With its influence, we were able to arrange a joint meeting to explore our concerns in detail and agree how things could be improved for our community.

We would like to thank Healthwatch Suffolk for challenging the practice on our behalf and encouraging it to take action on how it has been listening to and communicating with patients. We know that Healthwatch are now working with the Practice to engage patients and implement actions that includes the recruitment of volunteers to a newly established Patient Representative Group.”

Les Bryant (Chair of Capel St. Mary Parish Council)
We have a statutory right to a seat on the Health and Wellbeing Board. It has a duty to “encourage integrated working” between health, care, police and other public services in order to improve wellbeing in Suffolk.

In 2014/15, our representative on the Board was Tony Rollo (our Chair).

The future of health and care in Suffolk
It is broadly recognised that the NHS and social care will change because the system must respond to an ageing population, increases in long-term conditions and financial constraints.

The Government has said that the bodies responsible for arranging and delivering NHS and social care services need a common approach and closer working relationships. The Health and Wellbeing Board is a key driver.

The Better Care Fund (A vision for health and social care services in Suffolk 2019/2020)
The Better Care Fund is a single pooled budget for health and social care services to work more closely together in local areas, based on a plan agreed between the NHS and local authorities.

Approved in December 2014, the Suffolk Better Care Fund Plan has been developed by working groups of the Suffolk Health and Wellbeing Board. The accountability for the development work is its two System Leaders Partnerships of which we are an active member.

The plan specifically states that our work on the health and care review (see below) engagement has helped to “focus the schemes to support people’s needs as effectively as possible”.

The Health and Care Review
In 2014/15, Ipswich and East Suffolk Clinical Commissioning Group (IESCCG), West Suffolk Clinical Commissioning Group (WSCCG) and Suffolk County Council (SCC) engaged with local people to gather views about the Health and Care review, which offers a new vision for the future delivery of health and social care in Suffolk.

We agreed to compile the results of the engagement activity. Along with Community Action Suffolk and the Suffolk Coalition for Disabled People, we helped to identify events from which feedback could be gathered. Two integrated care projects have since been launched to take forward the common Integrated Care model developed within the Health and Care Review.

East Ipswich and Sudbury have been chosen as early adopter sites of this new integrated model. Both areas bring together a range of organisations supporting children, families, adults and elderly from across the full range of public services. They will work in partnership with the local population and communities to support, sustain and build capacity to support individuals to live independent and healthy lives.

Joint Strategic Needs Assessments (JSNA)
JSNA are local assessments of current and future health and social care needs. They are produced by Health and Wellbeing Boards, and are unique to each local area.

The JSNA is used to help determine what actions local authorities, the NHS and other partners need to take to meet health and social care needs and to address the wider determinants that impact on health and wellbeing.

As a member of the JSNA task group in Suffolk we are able to influence important decisions about new needs assessments and contribute to the evidence base on health and wellbeing.
National Unsafe Discharge Inquiry
In May 2014, Healthwatch England launched a special inquiry to find out why things go wrong when people are sent home from services.

We supported this work by obtaining views online and at community groups. Sessions were also run in partnership with the Salvation Army and YMCA Ipswich.

In November 2014, we published our local report and submitted data to Healthwatch England. Our findings showed that:

- Patients are not receiving suitable information upon discharge.
- At times, assessment prior to discharge has been insufficient.
- Examples of negative impacts on the condition of patients where support is not offered after discharge.
- Some patients did not feel ready to leave the care of the service.

We will continue to encourage providers to take greater care when sending people home. It is noteworthy, that the James Paget University Hospitals has made improving information for people at discharge a priority for the year ahead.

For more information about our work with Healthwatch England including national primary care briefings and other issues, please see our full report.

Working with others to improve local services
We work with many stakeholders to improve services. Some examples of note include (please see our full report for more examples and information):

- Informing CQC inspections of GP practices in west Suffolk with your views and experiences.
- Contributing to shared intelligence about local care services with other key bodies.
- We contributed to discussions about how Ipswich Hospital could improve its complaints process.
- We informed discussions of the Health Scrutiny Committee by producing briefings on intelligence held by us in respect of NHS 111 and GP practices in Suffolk.
- We represented the voice of patients and the public throughout the process of choosing a new provider of community services in Suffolk.
Looking ahead - Our plans

Future Research Projects

We will be exploring the experience of birthing partners (any person that accompanies a mother during the process of giving birth) at the Ipswich Hospital NHS Trust.

We are planning to start a research project about peoples experiences of the dementia care pathway in Suffolk. Look out for more details coming soon.

We are currently devising a clear strategy that will help us to prioritise projects and determine which issues should be investigated. It is likely that a number of new projects will be selected this year through this process. Look out for all the details in our newsletter.

We will be working with Healthwatch Norfolk to obtain the views of veterans and encourage commissioners to uphold their obligations with regard to the armed forces covenant.

We will be exploring experience of parents who have made a complaint to a service about their child’s care. The project is specific to the experience of parents who have a child with additional needs.
Our Strategy for 2015/16 and beyond
We have been developing our strategic objectives for the future delivery of Healthwatch in Suffolk.

To develop the strategy, we have made a full assessment of our role and functions and aligned them to our statutory activities.

From this, we have begun to determine some of the key priorities that will drive our focus in 2015/16. Please see our full report for more details.

Transport to Healthcare Services Project
Since Healthwatch Suffolk was launched two years ago, people in communities across the county have been telling us that problems with accessing patient transport to and from healthcare services (e.g. hospitals) in the county is causing a problem for many people and local communities.

We have therefore been seeking to understand your experiences. Specifically, we want to understand how the current system affects people, both positively and negatively, in the hope of improving services for all.

Our report will be ready this summer and we will be using it to inform the future commissioning of services in the county and to highlight where we feel improvements could be made to make things better for people trying to access the services.

Mental Health Services Project
This project was initially set up in April 2013 and aims to examine the mental health services provided at Highpoint Prison. It had originally been established by the Suffolk Local Involvement Network (LINk) to follow up the findings of a previous investigation into mental health services at Blundeston Prison in 2011 by Norfolk LINk.

Once the questionnaire has been distributed the next phase of the project will be to begin the analysis of the responses. We also hope that some of the prisoners will agree to meet members of the project group for 1:1 interviews where they can explain their experiences in more detail.

The report describing our findings and conclusions should be completed by the end of 2015.

Mental Health and Wellbeing Services Project
We are working with the Norfolk and Suffolk NHS Foundation Trust on a piece of work focused on supporting communities to improve their experiences of accessing and using mental health services in Suffolk.

Our report will be published in summer 2015. Please see our newsletters for all of the details and findings.
At the start of 2015/16, we launched our new online tool to help people in Suffolk let health and care bosses know what’s good and what’s bad about health and social care in the county.

It is easy to share your story with us in 2015/16. Our feedback centre is accessible on our website via a variety of devices. This means that you can easily and anonymously rate the care that you or a friend or family member have received in a simple way; wherever you are. Feedback is also collated by telephone, freepost comment cards and from public events so no person will miss the chance to have their say.

Recent research has shown that half of the public who considered complaining about NHS services did not. Many people were put off because they expected the process to make no difference. We believe that, by helping patients to more easily express their views, we can improve health and social care in the county.

Hundreds of thousands of people every day use online review systems to give their opinion about other services or products they have bought or used. We want to harness that behaviour to get patients, users and their families to give us vital information about the NHS and social care.

Analysis of the Feedback Centre data will shed light on health and care trends, patterns, and issues virtually in real time. These results will be actively shared with the public and with health and social care organisations for service improvement now and in the future.

In the two months since our Feedback centre went live, over 300 comments from the public have been uploaded about specific health and care services in Suffolk.

Unrivalled intelligence about local services
The Healthwatch Suffolk Feedback Centre will collate crucial data from the public via the internet, comment cards, social tools, widgets, events and community engagement.

On a more analytical level, our informatics intelligence tool provides us and key partners with credible data on patient and service user experience of services. Featuring trends and sentiment analysis, it also tracks discussions from the public, press and partners about local services.

Talk to us about the health and social care services that you use
Sharing your experience is easy. Simply log onto: www.healthwatchsuffolk.co.uk/services
Involving people in our decision making...

We have two levels of membership (friends and members). Members receive our annual report and accounts and have voting rights at our AGM.

**Our Board of Directors**

Our Board is comprised of up to 10 volunteer directors and the Chief Executive. It is our governing body, and oversees our strategic and operational activities. Please see our full report for more details and a list of our Directors.

There were two sub-committees of the Board in 2014/15 with remits as follows:

**Finance Sub-Committee:**
- To monitor the delivery of our financial resources.

**Human Resources Sub-Committee**
- To oversee the recruitment, training and development of our volunteers.
- To make recommendations to the Board on HR matters.
- To develop Human Resources policies and oversee staff appointments.

**Our Operational Delivery Group (ODG)**

Our ODG consists of volunteers, Directors and two senior staff members. It facilitates the exchange of information as a means to enhancing our community development work, providing feedback on staff and volunteer activity and validation of our proposed and ongoing projects.

Members of the ODG bring experience to Healthwatch Suffolk that we can draw upon to make a real difference. A number of ODG sub-groups have been set up to focus on specific areas. Each of the sub-groups are chaired by members of the ODG. They are as follows:

- Our Mental Health Focus Group
- Our Enter and View Management Sub Group
- Our BME and Diversity Sub Group

“The past year has seen this group work through significant change relating to its strategic position within the organisation, and ensuring this is the hub through which information flows and informs much of our work programme to ensure a bottom up approach.

“The group consists of ten regular attendees who are active volunteers and staff with a broad range of experience, expertise and local knowledge. We meet monthly to review and feedback volunteer activities, issues raised by service users, project proposals and potential research themes.”

Fiona Ellis (Chair of the ODG and Healthwatch Suffolk Director)
Please see the below breakdown of our finances throughout 2014/15. This includes the total income received from Suffolk County Council for all of our activities as highlighted in this report and a breakdown of our expenditure across the year.

### INCOME

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Funding received from local authority to deliver local Healthwatch statutory activities</td>
<td>£412,500</td>
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<tr>
<td>Additional income</td>
<td></td>
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<td>Services</td>
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<td>Government grant</td>
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</tr>
<tr>
<td>Bank interest</td>
<td>£1,053</td>
</tr>
<tr>
<td><strong>Total income</strong></td>
<td><strong>£420,747</strong></td>
</tr>
</tbody>
</table>

### EXPENDITURE

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head office (E.g. office rent, insurance, telephones and utilities)</td>
<td>£52,816</td>
</tr>
<tr>
<td>Salaries</td>
<td>£341,135</td>
</tr>
<tr>
<td>Advertising and promotion</td>
<td>£22,197</td>
</tr>
<tr>
<td>Expenses (staff and volunteer)</td>
<td>£22,317</td>
</tr>
<tr>
<td>Directors expenses</td>
<td>£10,104</td>
</tr>
<tr>
<td>Payment to Community Action Suffolk for Young Persons Health Ambassador</td>
<td>£12,500</td>
</tr>
<tr>
<td>Depreciation</td>
<td>£6,917</td>
</tr>
<tr>
<td><strong>Total expenditure</strong></td>
<td><strong>£467,986</strong></td>
</tr>
</tbody>
</table>
This annual report will be made publicly available by 30th June 2015. We will publish it on our website and circulate it to Healthwatch England, the Care Quality Commission, NHS England, Clinical Commissioning Groups, Overview and Scrutiny Committee/s, and our local authority.

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