Strategic plan

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1 Introduction

"*Nothing about us without us, nothing about me without me*"

1.1 Healthwatch Camden exists to make sure that everyone who uses health and social care services has the chance to have their say. By making sure people can get involved in all the plans and decisions about their health and care, we help to improve their experience. When people are involved, they help to improve the quality of services. This all helps to make life better for everyone in Camden.

1.2 Our vision

We want to be

- the trusted organisation to stand up for people who use health and social care services in Camden

And we hope people will find us to be

- bold, effective, innovative, welcoming, objective, intelligent, creative, engaging, skilled.

We want our work to be

- Well designed
- Tailored to the local community
- With a focus on the least well off

Our work will include

- Talking to people
- Promoting involvement
- Empowering people
- Being a conduit for people's views
- Using data wisely
- Giving people information

1.3 Our role

Healthwatch Camden was created through the Health and Social Care Act 2012. This sets out our responsibilities:

Our role in the local community:

- We provide information and advice to the general public about local health and social care services;
- We make the views and experiences of members of the general public known to health and social care providers and commissioners;
- We enable local people to have a voice in the development, delivery, improvement and equality of access to local health and social care services and facilities;

- We provide support for our volunteers and the wider community in understanding and monitoring local health and social care services and facilities.

To assist us, we have specific powers to:

- Make visits to care services ("enter and view") to gather evidence about people's experiences,
- Publish reports and make recommendations to care providers and commissioners, which they must respond to,
- Be an equal member of the Health and Wellbeing board. Our seat means that we have real influence.

1.4 Our mandate

Nationally, Healthwatch was created to ensure that the vision of 'nothing about me without me' becomes a reality in health and social care services, and to act as the voice of the consumer in the reformed health and care system. Services should be based on children, young people and adult's needs and experiences and accountable to local people. Everyone needs to know what they can expect from services, how to get access to the right services for them and the choices they can make about the services they use.

Policy makers recognise the importance of listening to and responding to people who use care services and their families and carers, and of engaging with the public about service changes. Increasingly, policy makers and service providers recognise that people need a strong voice in the system, now more than ever. Our health and social care system is going through massive change. All organisations have to make savings in their spending, and find ways to provide services more efficiently. The intention is that power will shift from the centre to local people. But in day to day experience people may not believe (or feel) that they have real power. Healthwatch is there to make their voices louder, to help them get heard.

Healthwatch exists nationally and locally. Nationally, Healthwatch England supports the work of local Healthwatch and champions the rights of health and social care consumers, linking up issues across the country. Locally, each local authority area has an independent Healthwatch organisation.

Locally, people have said they want Healthwatch Camden to

- Be independent, accountable, transparent & trusted
- Understand and represent the needs of the community
- Be focused on priorities that are based on what people say is important
- Have influence and teeth locally and nationally

Many local people and groups were involved in designing Healthwatch. They described what Healthwatch Camden needs to do to show that we are doing our job.

- Being independent, accountable, transparent & trusted

This includes: transparent performance management; independently audited accounts; annual public meeting; an independent Chair, appointed for their leadership skills; consistently seeking to improve, including a process in place for seeking and responding to feedback and complaints; public involvement in deciding priorities; clear organisational governance structures and appointment processes – available publically.

- Understanding and representing the needs of the community

This includes**:** outreach to people who are seldom heard; having the skills to do or commission research; good relationship and knowledge of the different community groups and networks; shared skills and knowledge with the voluntary and community sector rp including working with existing networks; working with children and young people; good understanding and use of different engagement and communication methods; being able to represent and broker a range of different views; involving volunteers – understanding the different roles they can play.

- Being focused on priorities that are based on what people say is important

This includes: focus on inequalities, perhaps identifying where prevention activity could be improved on and led by the community; prioritising based on frequent and ongoing engagement with the wide range of local people and interests; being lean and flexible to shift with changing priorities; having an outcomes based approach to projects; focusing on a few things – not trying to do everything; clear communication of priorities.

- Having influence and teeth locally and nationally

This includes: constructive as well as challenging partnership working with services; having a high profile and being well known in the borough – people know what Healthwatch is and what it can do for them; effective mechanisms for tackling concerns; skilled staff and volunteers provide specialist functions; appropriate research and reporting of concerns about service quality; coordinated work across boundaries; a physical presence – within the community; judicious use of enter and view powers; campaigning and lobbying on the issues that matter to local people; use of credible evidence – skills and insight to use data to make informed and credible evidence based arguments.

2 About us

2.1 Our governance

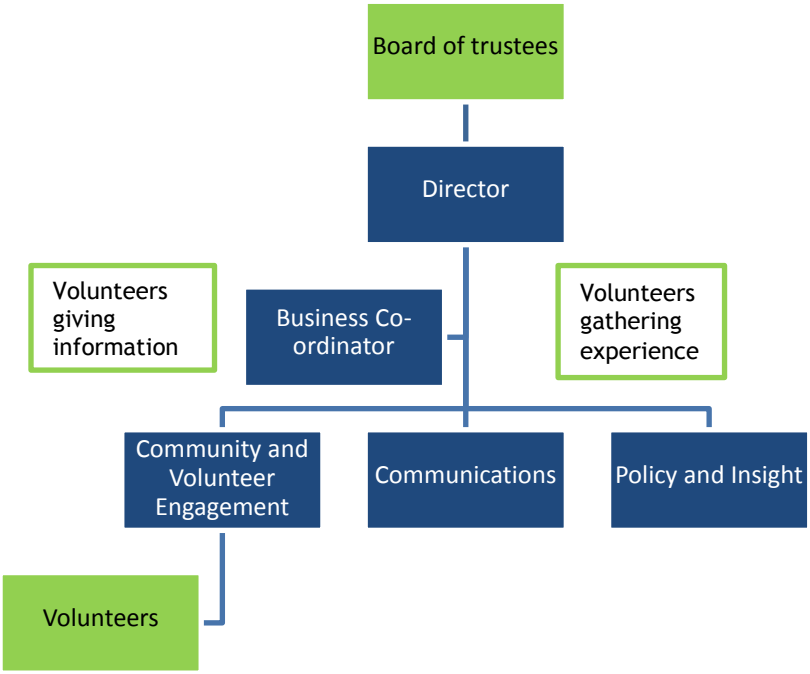
Healthwatch Camden is an independent body, registered with the Charity Commission as a Charitable Incorporated Organisation. We have a board of trustees, comprising people who live and/or work locally. Board members are appointed for a three year term. All board posts are openly advertised.

Healthwatch Camden does not have a formal membership structure; anyone can apply to become a member of our mailing list and a participant in our activities. Healthwatch Camden involves the community in setting our priorities through a range of activity (see under Operating Model, below).

Trustees set strategy, agree policy, oversee the work plan and are responsible for governance.

2.2 Our structure

Healthwatch Camden has a paid staff team of five. We have a pool of volunteers, who carry out a range of activity.



3 Context

3.1 Our development

Healthwatch Camden was designed through a process of community engagement over the course of 2012. The engagement included children, young people and adults from a wide range of Camden organisations and networks.

A steering group, comprising representatives of local voluntary and community organisations, the local involvement network, the council and the clinical commissioning group oversaw the work.

In 2013, the council recruited a Director and the first four trustees. In April 2013 Healthwatch Camden was launched as part of a national network of local Healthwatch organisations. The network is supported by Healthwatch England.

3.2 Camden

Some key facts

The joint strategic needs assessment (JSNA) for Camden shows that Camden has a distinctive population. It is young, it is diverse, it is always changing and it is marked by significant differences in health experience and outcomes between its richest and poorest communities. The population of Camden is estimated to be about 211,700 people in 2012. By 2022 this is predicted to grow by 5.4% to around 223,200.

Camden has a relatively young population. The largest age group are people between 20 and 40. Although older people make up a relatively small proportion of Camden's population, the highest percentage growth in the next ten years will be seen in the group aged 65 and 85 and over with approximately one in eight people aged over 65 by 2022. The growth in numbers of children and young people in the borough is predicted to be slower than the general population.

Like other inner city boroughs, Camden has a larger minority ethnic population than is average for London and England. There are particularly high proportions of people of Bangladeshi and African Caribbean ethnic origin in Camden. The south of the borough is more diverse than the north.

Camden is ranked the 15th most deprived borough in London (out of 33). Within Camden there are areas that are within the 10% most deprived in England and some areas that are in the 20% least deprived.

There is a big gap in life expectancy between men and women living in the most and least deprived areas of Camden. For men there is an 11.6 year gap and for women a 6.2 year gap. High deprivation levels are linked to numerous health problems (e.g. chronic illness, lower life expectancy) and unhealthy lifestyles (e.g. obesity, smoking, drugs misuse).

Camden has a higher than average number of mental health service users. Over a fifth of Camden households (22.3%) contain one or more persons with a long-term health problem or disability, similar to the Inner and Greater London averages. There is an increasing number of children with special educational needs.

Camden is the base for six NHS foundation trusts, including some national centres of excellence. Camden has 39 GP practices. There are a range of social care services. (See Appendix 3 for full list.) Both children's and adults' social care services work in close collaboration with the NHS, with well-established arrangements for joint commissioning.

Healthwatch Camden's work needs to take account of the diversity in the borough, including the diversity of need.

4 Our resources

4.1 Funding

Healthwatch Camden's current source of income is a grant from Camden Council. This is set at £257,400 for each of two years. There is no guaranteed income after March 2015.

Healthwatch Camden operates from a fully serviced office located within Voluntary Action Camden, at 229 Kentish Town Road. The location is well situated for public transport and has adequate (although not ideal) disability access. The renting of a serviced office means that Healthwatch Camden has no fixed assets[1].

Healthwatch Camden has intangible assets in the form of: the knowledge and experience of trustees and staff; good relationships with local statutory partners; increasing relationships among the large and diverse voluntary and community sector in the borough; support from Healthwatch England and the Local Government Association, both nationally and regionally.

4.2 Our partners

Healthwatch Camden is a member of Camden's Health and Wellbeing Board and the members of that board are all important partners in our work.

Healthwatch Camden is a part of Camden's large and diverse voluntary and community sector. We work in collaboration with local voluntary and community networks.

Healthwatch Camden is part of the national Healthwatch network and is active at regional level in collaborating with other local Healthwatch organisations.

[1] Some miscellaneous items were inherited from our predecessor body, Camden Local Involvement Network, however these were fully depreciated before we received them and their current value is nugatory.

Healthwatch Camden has regular contact with the Care Quality Commission, sharing what we and they know about quality of local services. Healthwatch Camden is developing our links with external organisations concerned with standards and improvements in health and social care including universities, and regulators and regional quality surveillance networks. We aim to increase our partnerships with these organisations.

5 Operating model

5.1 How we will fulfil our role and our vision

Healthwatch Camden has organised our work into three broad areas, each designed to fulfil our core role and to create the sort of organisation that local people want. These areas are

- Information
- Policy and insight
- Community engagement

These areas of work are supported by a communications strategy; relationship building with stakeholders and partners; a volunteer strategy, enabling us to involve a range of local people in our work;

5.2 Providing information

Our role is to give people information and advice about access to services and to choices they can make in services. This includes their rights to ask for particular services or to complain about a service.

We respond directly to queries by phone (020 7284 6586) or by email (info@healthwatchcamden.co.uk). We put people in touch with organisations that can help them. If they have difficulty getting information for themselves (for example they have no access to the internet) we send them information. Where we don't have the answer, we find out. If someone raises a concern about a service, we make sure it is passed on to the right person to respond to the concern. We are compiling an ever growing knowledge bank. We record the queries we get via the Healthwatch Hub, a shared databank hosted by Healthwatch England, where all local Healthwatch organisations can share knowledge. We pass on general information we receive, via our website and our e-newlsetter.

What we want to do in future
We want to work with voluntary and community organisations, particularly with advice organisations to develop shared information resources. We'll use existing advice points to offer specific information about access to health and care services, and train volunteers to be able to give information. We understand that existing groups have limited resources, so we want to pool resources to help us all do the best job possible.

We aim to make information accessible to all, so we will produce information in different formats and will encourage others to do the same.

5.3 Policy and insight

Our role is to:

- Enable people to monitor local health and social care services,
- Collect people's experiences,
- Convey those experiences to local providers and commissioners, and to suggest improvements in services.

At the moment we look at available public data on services. We talk to providers and commissioners about the monitoring they do. We talk to the Care Quality Commission about their monitoring of services. We research specific topics of interest (for example our current work on complaints). We talk to voluntary and community organisations to find out what members and users are saying or experiencing. If we decide to look at a particular topic in detail, we will ask some people their views directly, through focus groups or surveys. We will publish what we find.

What we want to do in future

We want to build strong links with existing service user organisations, including patient participation groups, parents groups, service user forums, to gather the issues that are important to them. Where needed, we will use our powers to make those voices louder. We will check that providers and commissioners really are listening and responding to what people say.

We want to set up regular communication with voluntary and community organisations and with other forums so that we are sure that we are picking up the issues that matter to people in Camden. We will continue focusing on specific topics. Sometimes we will do a longer term project, looking at a topic in detail. Ideally, we'll take part in shared projects with other organisations.

We want to focus on areas where people may have greater difficulty in having a say or in finding services that are right for them. This will influence our choice of project priorities.

For some enquiries we will use our formal powers to visit health and social care premises ('enter and view' powers). This activity is governed by specific regulation, so each programme of visits will be planned in advance. In other work we may make informal visits, with the agreement of service providers.

We will build on existing good relationships with providers and commissioners to ensure that people not only have a say but continue to be involved in the design and implementation of service improvements.

5.4 Community engagement

Our role is to make sure that our priorities are what matters to the people of Camden and that the community is involved in setting our priorities. To this end, we ask voluntary and community organisations to help us to ask people about our

priorities, so that we are working on the issues that matter to locals. We want to use existing forums wherever we can. We are talking to community organisations about how to go about doing this.

We are making links with community and voluntary organisations and with projects that involve local people in aspects of health and social care services (for example the VAC project on health advocates). We are talking to providers and commissioners about how they involve people and checking how effective it is. We are training people to carry out visits to services, using our 'enter and view' powers, so they can gather experience first-hand. We encourage people to share their experiences via our website – www.healthwatchcamden.co.uk.

What we want to do in future

We want to use the links we are making with service user organisations to help us to check how well involvement is working locally. We want to support providers and commissioners to work really well. We want to work collectively with our partner organisations to develop ways of working on 'co-production' of service improvements. We want to build on what is already working well in Camden. We want to explore ways of including people who don't currently have a 'voice'.

5.5 Communications strategy

We need to let people know we exist, we need to share information about what we do and we need to establish Healthwatch as 'the place to go' to get things done about health and social care, both for the public and for those involved in providing and commissioning services.

At the moment we have a website where people can find out about us. We publish a monthly e-newsletter. We have an active Facebook page and Twitter account. We have distributed flyers about our work to local community organisations, libraries and other centres. We take part in major community events.

What we want to do in future
We want to have a regular conversation with the people of Camden, find out what matters to them, and let them know what we're doing with what they tell us. We think we need to use a mix of ways:

- Developing our website and social media tools, such as Twitter;
- Going to more community events;
- Attending local forums and service user forums;
- Organising focus groups on particular topics

We want our communication to be accessible to all so we will produce materials in different formats. We will make use of video as a format for some of our reports. We know how vital the voluntary and community sector is in enabling people to have a voice, so we will invest some of our resources into working with voluntary and community sector partners.

We want to be influential and to be seen to be expert. We plan to do this by:

- Publishing well researched and well-presented reports
- Making authoritative presentations at local forums (including official bodies such as Health Scrutiny Committee)
- Taking part in regional and national policy initiatives, where we can benefit from wider promotion of our work.

5.6 Relationship building

Our role is to promote improvements in services and equality of access to services. To do this we need to work closely with people who plan, deliver and monitor services. We will do this through:

- Making best use of formal relationships with the Health and Wellbeing Board
- Establishing information sharing protocols with key statutory partners, including the CCG
- Making formal partnerships with some of our voluntary and community sector partners (for example in the delivery of information)
- Building a profile in the borough for the Director and Chair of Healthwatch, so that the organisation has a recognisable leadership
- Making best use of our statutory rights to be consulted on quality accounts of health providers, Camden JSNA and be part of quality surveillance networks.
- Regular informal contact with statutory partners
- Being a constructive member of regional and national networks.

We know that other organisations share our aims of improving health and social care services, so where appropriate we will invest some of our resources into joint projects with other bodies (e.g. think tanks, academic organisations based locally). We will take part in regional or national work where it helps us to achieve our local aims, but we will always make local work our priority, and will not get involved in national or regional work at the expense of local activity.

5.7 How we will be accountable

Healthwatch Camden is there for the public and it is our duty is to be accountable to them. We also have to account for the public money we spend and show that we are meeting our legal obligations. We will do this in a number of ways:

- Through publishing what we do

We will always publish our reports and recommendations and the response we get to those recommendations. We will also publish our board papers and policies, so that people can how we are working. All of this publishing will be via our website.

- Through publishing an annual report

Our annual report will be published in print format as well as on our website.

- Through meeting people in their community organisations and forums

We will be available to tell people how we are working and to answer questions about our work. We will be open to changing the ways we work, to suit the local organisations. We will always try to work in ways that support other voluntary and community activity.

- Through holding public meetings where people can give views and ask about our work

In addition to attending existing forums, we plan to hold at least one public meeting a year where we can be held to account by local people for the way we work and what we have achieved.

- Through reporting to our funders

We are required to give quarterly updates to our funders, and to account formally for how we have used our grant. We will be continuously evaluating our work and will from time to time organise an independent stakeholder survey to check others' views on how we are doing.

- Through reporting to the Charity Commission

As a registered charity, Healthwatch Camden must submit an annual report to the Charity Commission.

- Through being a generous and open minded partner

We will always try to work as a supportive partner with other bodies, focused on what is important to the people of Camden, not on narrow organisational interests.

- Through sharing our work with Healthwatch England

Healthwatch England has an oversight role to be sure that each local area has an effective local Healthwatch. We share information with them via the Healthwtch Hub and take part in regional and national networking and learning opportunities organised by Healthwatch England.

6 Our plan

6.1 Our future

Healthwatch Camden currently has a two year plan. Our first year (2013/14) is concentrating on establishing ourselves in the borough, becoming expert at our core activities and making impact through some targeted work on specific services. Our second year (2014/15) will continue this work and will seek to make significant impact locally, including real influence over longer term plans. At the same time we will be developing our capacity to extend our work beyond the limits of our original grant aid, to enable us to generate income from other sources. This may be through joint projects with other bodies or through selected consultancy work

(for example in quality assuring or improving the involvement activity of statutory partners). We will also use this time to plan for third and subsequent years.

We will continue to involve the local community in shaping our future. We anticipate that our legal mandate will continue at least until 2017, and we plan to be an active and essential part of Camden for the foreseeable future.

Our founding board members were appointed for one year only, and will be eligible for re-appointment for a period of up to three years. Our second tranche of board members will be appointed for a period of three years. Any new board members appointed during 2014 will also be for a period of three years. We aim to arrange appointment terms so that there is always some continuity on the board.

6.2 The risks to our success

A number of factors might prevent us from achieving our aims.

Short term

- Local community organisations may see us as rivals rather than partners – we can plan to minimise this by establishing strong working relationships and by responding to their concerns constructively and promptly, and by demonstrating effective partnerships to strengthen local residents' voices in debates on health and social care
- We may not be able to establish productive working relationships with statutory partners, so that our recommendations are ineffective. We can plan to prevent this by making sure that our input is constructive and evidence based.
- Local people may not know about us or may not trust us – we can plan to prevent this through our communications strategy and through regular reporting of what we have achieved.
- Our monitoring systems might miss a major failure in a service, resulting in people seeing us an ineffective. We can plan to prevent this through being well networked with other monitoring bodies and keeping in close touch with local 'word on the street' and by staying up to date with data on local services.
- Our resources are limited and we may not be able to do all the things we want to do, or that local people think we should do. We can minimise the effects of this through good governance and through having a clear priority setting process.

We also face general organisational risks, such as fraud. We have planned to prevent these through implementing good governance policies. Some risks may not be preventable, e.g. IT failure. We have planned to minimise these by having service contracts and by good housekeeping (e.g. having records backed up).

Longer term

Nationally, the history of change in arrangements for representation in the NHS suggests that we are always vulnerable to re-organisation and to having things added or taken away from our mandate. We can prepare for this by being an effectively governed organisation so that we are able to develop smoothly if required.

Locally, pressure on local government funding may result in a drop in our grant income. At present, the council is committed to maintaining our grant level, but this cannot be taken for granted in the longer term. We can prepare for this by being a highly effective contributor locally, by gaining widespread public support and by having a realistic strategy for income generation.

6.3 Our work plan

Healthwatch Camden has developed a work plan to support our strategy. Each area of the work plan is supplemented by its own work plan or project plan. It is reviewed on a regular basis by the board.

6.4 Our budget

Healthwatch Camden sets an annual budget, which is monitored monthly and reviewed half yearly.