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Introduction

This has been a year of transition for Healthwatch in Coventry and for NHS structures and systems. For the first six months from April 2013, Coventry City Council put in place an Interim Healthwatch in Coventry. This provided the opportunity to build on and develop the work of Coventry Local Involvement Network (LINk) and ensure that knowledge and expertise was not lost. However, it lead to uncertainty regarding the future set up of Healthwatch in Coventry and who would be involved. I would like to thank volunteers and staff for their patience and commitment during this period.

In July the City Council consultation and decision making process about how to set up Healthwatch was concluded and the local voluntary sector consortium Here2 Help was grant funded to run Healthwatch Coventry. Here2Help ran an internal bidding round to decide which of its member organisations would be involved in the delivery of Healthwatch services (as sub contractors). The result is that the services of Healthwatch in Coventry are being delivered by four local charities Voluntary Action Coventry, Age UK Coventry, Coventry CAB, and Coventry Law Centre as a seamless partnership.

The last six months of the year has been a period of set up and development: the Healthwatch Information Service has been created; the Independent Complaints Advocacy Service brought within Healthwatch; several new staff posts have been recruited, and the role of Healthwatch Chair was also advertised and filled.

This has been balanced with work to gather feedback and views from users of services and to enable Healthwatch to take its place in the areas of influence within the new structures of the NHS and care services including the local Health and Wellbeing Board and Area Team Quality Surveillance Group.

A thread through all our work this year has been joint work with Healthwatch Warwickshire to research and produce a Good Engagement Charter aimed at professionals in different organisations who seek to gather the views of patients and the public in different ways.

In this report we aim to set out some of the detail about who is involved in Healthwatch Coventry, our work and the influence we have started to have.

Ruth Light
Chief Officer
Our role

Healthwatch Coventry is the champion for those who use or care for someone who uses NHS and social care services locally.

We are independent of services (such as hospitals and GPs) and have legal powers including the right to request information and to get a response to our reports and recommendations.

Our role is to:

- Ask people what they think about services to build a picture of where services are doing well and where they can be improved.

- Influence the planning and delivery of NHS and social care services based on what local people tell us.

- Provide an information service for local people to help people find their way, understand their rights and find the best source of information and help.

- Provide information and support for people who are making a complaint about an NHS service (this is called the Independent Complaints Advocacy service or ICAS).

Healthwatch Coventry is provided by the local voluntary sector consortium Here2Help (H2H).

Contact us

Healthwatch Coventry
29 Warwick Road
Coventry
CV1 2ES
Website
www.healthwatchcoventry.co.uk

Central Team
Tel 024 7622 0381
Central Team email
yoursay@healthwatchcoventry.co.uk

Information and ICAS service
Tel 024 7625 2011
Information and ICAS service email
info@healthwatchcoventry.co.uk
Summary of responses and outcomes

Summary of outcomes

- Awareness has been raised regarding quality issues concerning patient transport services
- Changes have been made to standards for patient transport services in a new service specification
- New accessible information about keeping adults safe from harm has been produced
- The profile of good practice in patient and public engagement has been raised and a number of organisations are improving their engagement approaches
- A need to improve information regarding hospital complaints and Patient Advice and Liaison Services have been clearly identified
- New information about bus routes to the hospital has been produced
- The mechanism within the local Health and Wellbeing Board for taking account of patient and public voices has been strengthened
- Partnership working and influence on quality accounts has been developed
- The Care Quality Commission, Area Team and local NHS and social care commissioners have been informed by intelligence gathered by Healthwatch Coventry
- Local people have had an influence on the priorities of the CCG
- The new Healthwatch information service is helping local people to navigate the NHS and social care and understand their rights
- People have access to a local service to support them in making complaints regarding NHS services

<table>
<thead>
<tr>
<th>Official work</th>
<th>number</th>
<th>details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Information requests</td>
<td>3</td>
<td>1 to CWPT - reply out of time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 to CRCCG re patient transport - response received</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1 to CRCCG re friends and family - partial response received</td>
</tr>
<tr>
<td>Recommendations</td>
<td>reports</td>
<td>report on activities and choice in care homes, response received</td>
</tr>
<tr>
<td></td>
<td></td>
<td>report on complaints and PALS at UHCW, response received</td>
</tr>
<tr>
<td>Referrals to Scrutiny</td>
<td>1</td>
<td>Scrutiny had related agenda item on 5 March 2014</td>
</tr>
</tbody>
</table>
Who’s who

Volunteers
Volunteers are central to our approach to Healthwatch. At the end of March 2014 we had 43 volunteers taking on different volunteering roles including 7 individuals on our Steering Group.

Membership
Healthwatch Coventry has a membership made up of individual local people and representatives from voluntary groups.

At the end of the year our membership totalled 330, made up of 255 individuals and 75 from voluntary organisations or community groups.

Our membership includes

- 28% who are informal carers
- 21% who are disabled
- 35% of our membership is from minority ethnic groups compared to a population total of 33.4%.

Authorised Representatives
At the end of the year the following people were Authorised Representatives to enter and view local services:

<table>
<thead>
<tr>
<th>Gaile Allen</th>
<th>Frankincense Osanebi</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jill Hinde</td>
<td>Clair Roberts</td>
</tr>
<tr>
<td>Roger Hudson</td>
<td>Brian Sketchley</td>
</tr>
<tr>
<td>Phil Jones</td>
<td>David Spurgeon</td>
</tr>
<tr>
<td>Karen Keates</td>
<td>Tom Stone</td>
</tr>
<tr>
<td>Sheila Marston</td>
<td>Colin Tysall</td>
</tr>
<tr>
<td>John Mason</td>
<td></td>
</tr>
</tbody>
</table>

Staff team

<table>
<thead>
<tr>
<th>Healthwatch Chief Officer</th>
<th>Ruth Light (35 hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engagement Officer</td>
<td>Louise Stratton (18 hours)</td>
</tr>
<tr>
<td>Volunteering Officer</td>
<td>Kerry Vieira (24 Hours)</td>
</tr>
<tr>
<td>Assistant</td>
<td>Sam Price (maternity cover) (27.5 Hours)</td>
</tr>
<tr>
<td>Advice Session Supervisor Phone &amp; Digital Comms</td>
<td>Gary Shields (30 hours)</td>
</tr>
<tr>
<td>Healthwatch Worker (Access points)</td>
<td>Denise Proctor (18 hours)</td>
</tr>
<tr>
<td>Healthwatch Adviser (ICAS)</td>
<td>Alan Thomas (37 hours)</td>
</tr>
</tbody>
</table>
A message from the chair

I was appointed as the new Chair of Healthwatch Coventry in January 2014 having previously been a Steering Group member of LINk and Interim Healthwatch.

Previously I had a number of roles where I worked to assist people in their concerns over the quality of NHS and social care services. I worked voluntarily supporting older people and the visually impaired and in monitoring services provided in Care Homes. I was a member of the Primary Care Trust and a hospital Mental Health Act Manager at the Caludon Centre.

I see my appointment as a great privilege and a further opportunity to influence the quality of services Coventry people receive from the NHS: whether from their GP’s and the Coventry and Rugby CCG, in Hospital or from Community Health services; and Social Care Services provided by the City Council.

As Chair I am a member of the local Health and Wellbeing Board looking at improvements in public health and Primary Care.

I also attend Health Scrutiny Boards which oversee and call in providers to account for decisions and actions they have taken.

Within Healthwatch I have taken part in Enter and View activities.

I have no hesitation in holding large provider organisations to account over their services for local people. I meet regularly with chief officers of these organisations and with the internal organisations which make up Healthwatch Coventry: VAC, Age UK, CAB and Coventry Law Centre.

I have always had the needs and concerns of ordinary Coventry people at the forefront of my mind and try to meet and talk to as many people as I can about the services they receive to keep myself informed. Please don’t hesitate to tell me or my colleagues about your experiences if we meet, or join us as a Volunteer. Working together is the way we can make things better.

- John Mason

Healthwatch can be a very powerful force for change and works to magnify the voices of local people so these are heard by decision makers

John Mason, Healthwatch Coventry Chair
Reaching local people

This year we have:

- Strengthened our membership from voluntary, community and self help groups in order to improve our reach into different communities. We did this by making direct contact with groups and working with Voluntary Action Coventry’s Health and Social Care Forum for voluntary groups.

- We have created and are recruiting to the role of Community Connector: people within groups who can act as a link to Healthwatch by gathering feedback and channelling Healthwatch information.

- We have begun a programme of outreach and for example we have been in contact with: partially sighted service users; mental health service users, and people with addiction problems. Already we have gathered interesting feedback and perspectives on local services.

- We have been seeking a local employer to promote Healthwatch to their employees as a way of reaching working people.

- We made links with Coventry University to facilitate volunteering in Healthwatch by students on health and social care courses and 13 students have signed up to be Healthwatch volunteers. Volunteering agreements have been signed with the University.

- We enabled local people to feed into Council plans for making savings to budgets and changes to social care services at different stages of the Bolder Community Services review.

We have set our engagement priorities for the coming year:

1. People who are homeless/vulnerably housed and have addiction problems
2. People from black and ethnic minorities - especially newly settled communities
3. People with long term conditions, including their carers
4. Children

Eyes and ears

The different elements of our work mean that we have a number of ways to gather information and intelligence about local services. We put together information from our information and ICAS services with that gained through outreach and visits, plus information and data from our involvement in external groups and forums.
Our role is to:

- Gather views and understand the experiences of all who use services, their carers and the wider community (including the seldom heard)
- Promote and enable people to be involved in the commissioning and provision of health and social care services and how they are monitored

Good Engagement Charter

This was a joint piece of work with Healthwatch Warwickshire to gather views from local people about what would make them want to give their input, and perspectives when different agencies seek to gather views about local services in different ways.

Engagement is an overarching term which covers a range of activities including one to one conversations about services; surveys; discussion meetings; patient/service user/carers groups; work to involve people in service redesign; consultations; and many more.

We gathered the views of 271 local people about good engagement, through a survey and discussion groups and what they told us was used to write a 9 point charter setting our good practice which includes:

- Making sure engagement activities are thought through and planned
- Being clear about the objectives and what people can influence and what they can’t
- Allowing enough time to complete the activity well and reach people
- Using the most appropriate methods, adapting these for particular groups of people as necessary
- Making sure that people receive feedback on what happens as a result or why it was not possible to do what they asked

The Charter was launched in September 2013 to mixed group of health and social care professionals.

We have been working to get individual NHS and organisations and local authorities to adopt the good practice in the charter and make a pledge about what they will do to put the Charter in place.

Four out of the five organisations we have approached have adopted the Charter or are in the process of adopting the Charter.
Reports, recommendations and using our powers

Visits to care homes

Our first piece of work as Interim Healthwatch was to visit a number of care homes around Coventry. In total we visited 13 to look at activities and choices for residents.

We carried out these Enter and View visits in recognition that residents would not have an easy route to contact Healthwatch and in the knowledge of the increasing pressures within the care sector. We worked with commissioners in the local authority to help select our sample of homes to visit.

We found that there were variations around food, interaction between staff and residents, types and number of outings, involvement of the local community and roles of staff (having an activity worker or not) between the different care homes.

The size and space available to the care home also impacted on the type and range of activities available to residents. Healthwatch identified positive practice where the individual choices of residents were met and creative ideas for activities were implemented.

There was learning for Healthwatch about the processes and methods used for this Enter and View which can inform future work.

We produced individual reports on each home visited which were passed to the commissioner of the service in the City Council and to the CQC. These then informed commissioner’s visits to homes and CQC intelligence on services. Our summary report which makes 5 recommendations can be found on our website.

Hospital complaints and PALS service

Following contacts to our information service and work by Healthwatch England we looked at complaints processes and the Patient Advice and Liaison Service at the local hospital University Hospital Coventry and Warwickshire (UHCW).

We made a series of Enter and View visits to UHCW to talk to people waiting in out-patient areas about how they might raising a concern at the hospital if they needed to. We asked 155 people what they would do. We found that people were not aware of the role of the Patient Advice and Liaison Service (PALS).

We made nine recommendations to UHCW calling for clarity of the roles of the complaints team and PALS, better information and reviewing the process from the patient’s point of view. We have also shared our report with the commissioner of hospital services: Coventry and Rugby Clinical Commissioning Group (CRCCG).
Our role is to:

- **Make people’s views known to services, commissioners and planners of services**
- **Make reports and recommendations on how local services could or ought**

Patient transport

Healthwatch has a particular interest in patient transport for renal patients, following work carried out by Coventry LINk, which found many issues.

The Healthwatch Steering Group decided at their November meeting to refer the commissioning of patient transport by the Coventry and Rugby CCG to the health and social care Scrutiny Board of the local council.

This is one of Healthwatch’s powers. The decision was taken because Healthwatch had been involved in the tender process for patient transport for some time, providing comments on the specification and lobbying for the findings of LINk’s report into patient transport for renal patients to be addressed.

Healthwatch was concerned about delays to the tender process and about the quality of the current service.

The Scrutiny Board made a number of recommendations to the CCG, and a new timeline for the tender process has begun.

Healthwatch has also collected and passed on information about the quality of service to the CCG for them to address this with the service provider.

Access to the hospital

Following a large survey by Coventry LINk about getting to the local hospital, and car park and site issues we have been sitting on a UHCW task group about access to the hospital.

Through this we completed work on information about new bus routes and kept an overview of plans for changes to the hospital site.

This year the Trust applied for planning permission for significant changes to the hospital and it is pleasing that phase one of the changes has been completed. This has created a much larger drop off zone.
Quality Accounts

Quality accounts are documents produced every year by NHS Trusts to set out information about the quality of their services and to set quality priorities for the coming year. Local Healthwatch have the right to produce a commentary for inclusion in the document.

Commentaries were submitted for inclusion in the quality accounts of all three Trusts providing services to Coventry residents; UHCW, CWPT and West Midlands Ambulance Service (WMAS).

We have taken part in Quality Account task groups (led by Warwickshire County Council Scrutiny Board) to review progress against quality account priorities across the year and to work to influence the quality priorities for the coming year.

Equality Delivery System

We have taken part in an advisory group for the local hospital equality plans throughout this year and provided feedback on their plans.

We have also fed back on Coventry and Rugby CCG’s equality plans and asked that commissioners make sure these are joined up with those of providers.

The plans and approaches of the new Clinical Commissioning Group (CCG)

Clinical Commissioning Groups came into being on the 1 April 2013 and have the role of commissioning/purchasing a significant amount of local health services on behalf of the local population.

This year Healthwatch Coventry has provided input into the development of the CCG’s priorities and strategies, as well as taking part in 360 degree reviews of their progress.

Dementia Strategy

Coventry City Council has been leading on the development of a dementia strategy for Coventry. Healthwatch has discussed the draft documents and provided comments and taken part in a workshop session organised by the Health and Wellbeing Board.

Clearer language

Following successful work to influence the development of clearer information about keeping adults safe from harm we did further work to ensure that easy read information was produced by the City.
Independent Complaints Advocacy Service

Our role is to:
- Provide support for people making a complaint about an NHS organisation or service by running the Independent Complaints Advocacy Service (ICAS)

Between 1 April and 30 September 2013 Coventry City Council continued to commission the national organisation POhWER to provide the Independent Complaints Advocacy Service for people in Coventry. This was separate to Healthwatch Coventry.

From 1 October the Independent Complaints Advocacy Service (ICAS) has been provided directly by Healthwatch Coventry. We worked through the transfer of existing cases from POhWER to us.

Therefore we have been able to connect this to our public information service so that there is seamless access for those who need support in making a complaint about NHS services.

The following table is a breakdown of our work and in addition, because of our added value of connections with other Law Centre services, support is being given on the health aspects of 2 community care cases where there is a strong health angle.

<table>
<thead>
<tr>
<th>Service area</th>
<th>No. of cases Oct-Dec 2013</th>
<th>No. of cases Jan-Mar 2014</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital services (UHCW)</td>
<td>9</td>
<td>5*</td>
<td>15</td>
</tr>
<tr>
<td>Warwick Hospital</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Adult Mental Health (CMHT)</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Young People’s Mental Health (CAMHS)</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>GPs</td>
<td>4</td>
<td>4*</td>
<td>8</td>
</tr>
<tr>
<td>Dentist</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Community Health Services</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>19</strong></td>
<td><strong>15</strong></td>
<td><strong>34</strong></td>
</tr>
</tbody>
</table>

*1 complaint is about both the GP and the neurology service
Information service

An Interim Signposting service was set up quickly by Voluntary Action Coventry to be in operation from 1 April 2013. Callers were able to leave messages and then were called back and provide with relevant information/contact details for other services.

This service dealt with 123 enquiries between April and September 2013. 53 of these related to a GP service in some way, with the most frequent topics being:

- Making a complaint
- Vaccinations
- Registering with GP
- Medication

21 callers raised queries or concerns about dentists.

A new full Healthwatch Information Service was created from 1 October by Coventry CAB and dealt with a total of 115 enquiries between 1 October 2013 and 31 March 2014.

Information access points

In order to reach more people we are developing community based Healthwatch information access points. The aim is to support existing organisations and groups to provide information about Healthwatch Coventry and signpost to our services.

Work started in January 2014. We have:

- Developed a resource pack to support this work
- Thought about what data to record
- Identified 4 local libraries to pilot the service
- Set our priorities to guide the work
- Planned a launch for Health Information week in July 2014
Our role is to:
- Provide information to local people about local NHS and social care services so that people can make choices and find their way in the system

Topics of enquiries October 2013 to March 2014

<table>
<thead>
<tr>
<th>Service area</th>
<th>Oct-Dec 2013</th>
<th>Jan-Mar 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>GPs</td>
<td>9</td>
<td>23</td>
</tr>
<tr>
<td>Dentists</td>
<td>3</td>
<td>10</td>
</tr>
<tr>
<td>Care Homes</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Local Authority</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Pharmacists</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Opticians</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Hospitals</td>
<td>7</td>
<td>15</td>
</tr>
<tr>
<td>Non-acute-other</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Non-acute-CWPT</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Ambulance services</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Social Services</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>NHS England</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>General/ Miscellaneous</td>
<td>3</td>
<td>22</td>
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<tr>
<td><strong>Total numbers</strong></td>
<td><strong>26</strong></td>
<td><strong>89</strong></td>
</tr>
</tbody>
</table>
Healthwatch has a role both in campaigning for change and improvement to health and care services and in working within the systems of the NHS and social care to influence delivery, plans and commissioning approaches.

In order to do this we are part of or attend a range of external groups and meetings.

This year we have taken an active part in the Health and Social Care Scrutiny Board of the city council, where we have a co-opted representative. This enables us to contribute to the scrutiny of local services. The Scrutiny Board adopted our Good Engagement Charter this year and questioned the local Clinical Commissioning Group regarding patient transport after we referred the issue to them.

We sit on the Quality Surveillance Group run by the Local Area Team of NHS England. This is so that the intelligence that we gather about local services can be shared in a confidential way to enable any risks within the NHS system to be acted upon.

We also meet on a quarterly basis with local NHS providers and the Clinical Commissioning Group to share intelligence about local services including emerging issues.

Our relationship with the Care Quality Commission (the regulator of health and care services) is also very important as this enables us to flag up concerns about local services and pass on information to inform their work.

We have quarterly meetings; pass on copies of our reports and recommendations; and provide specific information to their requests for evidence to inform inspections of local services.

We took an interest in the changes being put in place in the CQC contributing to their consultation as part of their next steps programme.
Our role is to:
- Make people’s views known to services, commissioners and planners of services

Our role on the Health and Wellbeing Board

Healthwatch Coventry has two places on the local Health and Wellbeing Board; our Chair and Chief Officer. This body is organised by the City council and brings together key decision makers across health and social care in order to develop and implement a health and wellbeing strategy for Coventry.

Our role is to ensure that the voices of local people are considered in the planning and decision making and that processes are in place to ensure this.

This has been the first year of the Board and we have worked to develop thinking about how the voices of patients and the public can influence the assessment of needs and development of strategy.

Along with other members we have taken part in a peer review exercise of the Board and development sessions throughout the year.

We also sit on task groups regarding primary care quality and the review of the Health and Being Strategy/engagement which enable us to have influence.

We have pressed for service quality to feature in discussions and plans and contributed to the priority being given to quality in primary care as we know this is a big issue for local people.
Finances

a) Interim Healthwatch - April - September 2013 - Voluntary Action Coventry (VAC)

City Council Grant: 96,983
- Salaries: 57,617
- Staff costs: 2,764
- Publicity: 10,214
- Volunteer expenses: 376
- Other direct costs: 2,988
- Management & overheads: 20,073
Total: 94,032

b) Full Healthwatch - October - March 2014 - Here 2 Help

City Council Grant: 119,500
- Subcontractors: 118,500
  - VAC - voice: 60,222
  - CAB - signposting helpline: 21,082
  - Law Centre - NHS complaints: 21,692
  - Age UK Coventry - access points: 9,578
  - VAC - contract mgt/H2H secretariat: 5,926
Total: 118,500

VAC - voice:
- Salaries: 43,642
- Staff costs: 1,867
- Publicity: 2,180
- Volunteer expenses: 181
- Other direct costs: 3,261
- Management & overheads: 9,615
Total: 60,746

CAB - signposting helpline:
- Salaries: 13,956
- Contribution to phoneline: 1,388
- Set up costs: 833
- Volunteers costs: 2,152
- Management & overheads: 3,366
Total: 21,695

Law Centre - NHS complaints:
- Salaries: 9,698
- Staff costs: 600
- Management & overheads: 3,464
Total: 13,762

Age UK Coventry - access points:
- Salaries: 5,922
- Staff costs: 1,175
- Management & overheads: 1,530
Total: 8,627

Any underspends (largely due to later recruitment of staff) will be used to further develop Healthwatch Coventry services in 2014-15.
Registered office Healthwatch and sub contractors

Healthwatch Coventry
c/o Voluntary Action Coventry
29 Warwick Road
Coventry CV1 2ES

Grant-holder: Here2Help

Voluntary Sector Consortium (trading as Here 2 Help)
c/o Voluntary Action Coventry
29 Warwick Road
Coventry CV1 2ES

Sub contractors:

Voluntary Action Coventry
29 Warwick Road
Coventry CV1 2ES

Coventry Citizens Advice Bureau
Kirby House
Little Park Street
Coventry CV1 2JZ

Coventry Law Centre
Oakwood House
St Patricks Road
Coventry CV1 2HL

Age UK Coventry
Alvyn Smith House
7 Warwick Rd
Coventry CV1 1EX

Trademark
Healthwatch Coventry has adopted and signed the trademark licence agreement for Healthwatch England.
Decision making

Strategic level decisions are taken by the Steering Group and are published to the public via the minutes of the Steering Group meetings e.g.

- how Healthwatch undertakes its activities as an overall strategy
- which health and care services Healthwatch Coventry covers with our activities
- whether to make a report or a recommendation
- whether to use Enter and View powers
- whether to refer a matter to an overview and scrutiny committee
- whether to refer a matter to anyone else
- whether to subcontract etc

The more operational details within those decisions will be determined by staff under the guidance of the Healthwatch Chief Officer, who may also seek the guidance of the Chair on potentially contentious issues, e.g.

- the detail of what information to request and from whom
- the scheduling and organisation of enter and view visits following a Steering Group decision to use Enter and View powers
- which subcontractor to use to print materials
- ongoing referral of issues and intelligence to commissioners and regulators

Our structure

- Patients service users, carers and public
- Volunteers
- Steering Group
- H2H Board & contract management group
<table>
<thead>
<tr>
<th>Glossary</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Authorised Representatives</td>
<td>Volunteers who are approved to visit NHS and social care premises</td>
</tr>
<tr>
<td>BME</td>
<td>Black and Minority Ethnic communities or people</td>
</tr>
<tr>
<td>CQC</td>
<td>Care Quality Commission: regulator of health and social care providers in England. It registers providers and inspects providers to see if they meet certain standards</td>
</tr>
<tr>
<td>CCG</td>
<td>Clinical Commissioning Group: new body with responsibility for proportion of NHS budget from 1 April 2013</td>
</tr>
<tr>
<td>Commissioner</td>
<td>Organisation/officer with responsibility for buying health or social care services for the local population and for monitoring the quality of the service provided</td>
</tr>
<tr>
<td>Community connector</td>
<td>One of Healthwatch Coventry’s volunteering roles</td>
</tr>
<tr>
<td>Coventry and Warwickshire Partnership Trust (CWPT)</td>
<td>Provider of mental health, learning disability, and substance misuse services for Coventry and Warwickshire plus community health services for Coventry</td>
</tr>
<tr>
<td>CQUIN</td>
<td>Commissioning for Quality innovation (CQUIN) payment framework, a quality incentive scheme which links quality related targets to financial payments</td>
</tr>
<tr>
<td>Engagement</td>
<td>an over arching term for activities to gather views, opinions or feedback from patients or the public</td>
</tr>
<tr>
<td>Enter and View</td>
<td>Term for one of the Healthwatch powers: to go to certain NHS and social care premises to see how services are being run</td>
</tr>
<tr>
<td>Equality delivery system (EDS)</td>
<td>Plans to develop services, staffing etc to address the needs of people falling into 5 protected characteristic under equalities legislation</td>
</tr>
<tr>
<td>Health and Wellbeing Board</td>
<td>Led by the Local Authority to develop a strategy for local health and wellbeing and to set priorities for local joint work across health and social care</td>
</tr>
<tr>
<td>ICAS</td>
<td>Independent Complaints Advocacy Service: service to support people making a formal complaint through NHS complaints processes</td>
</tr>
<tr>
<td>LINk</td>
<td>Local Involvement Network - body which operated before Healthwatch came into being which shared some function with Healthwatch</td>
</tr>
<tr>
<td>NHS England</td>
<td>Central team responsible for aspects of NHS services including the commission of some specialised services. Also known as NHS Commissioning Board</td>
</tr>
<tr>
<td>NHS England Area Team</td>
<td>Our Area Team covers Herefordshire, Worcestershire, Warwickshire and Coventry, they have responsibilities for commissioning primary care and oversight of services</td>
</tr>
<tr>
<td>Official information request</td>
<td>One of Healthwatch powers: the right to request information from service managers and to receive a response within 20 working days</td>
</tr>
<tr>
<td>Overview and Scrutiny Committee or Board</td>
<td>Committees of the local council made up of local councillors that look at health and social care delivery</td>
</tr>
<tr>
<td>Safeguarding</td>
<td>Protecting children or adults from abuse or neglect and putting systems in place to prevent abuse or neglect from happening in the future</td>
</tr>
<tr>
<td>Social Care</td>
<td>Services organised by the local council to provide support to vulnerable, disabled and older people who need support to live their lives; for example support to live at home or residential homes</td>
</tr>
<tr>
<td>Quality Account</td>
<td>Document produced by Trusts to set out their work around quality and to set priorities for action to develop quality further</td>
</tr>
<tr>
<td>UHCW</td>
<td>University Hospitals Coventry and Warwickshire. Trust providing hospital services in Coventry and Rugby</td>
</tr>
<tr>
<td>WMAS</td>
<td>West Midlands Ambulance Service</td>
</tr>
</tbody>
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