

# healthwatch

Northumberland



**2015 Social Account**





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<sup>1</sup>Independent Complaints Advocacy Northumberland - see page 17

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## About Healthwatch Northumberland



Healthwatch Northumberland is the independent consumer champion for health and social care services and provides the statutory service for NHS complaints advocacy in the county. We aim to inform people about the health and social care services that are available to them and provide support if they need it to make a complaint about an NHS service they have used.

We also ensure that the public's views are integral to local commissioning processes and are raised at national level via Healthwatch England.

We collaborate with the organisations that work face to face with the public such as

- NHS hospitals
- GP's, Dentists and Opticians
- Other health services paid for by the NHS but provided by charities or private companies
- Care homes

We also work with the local organisations that decide what services the NHS or Northumberland County Council (NCC) should buy in for people - often called commissioners.

Healthwatch Northumberland was launched on 1st April 2013. It is run by Adapt (North East) under a contract administered by NCC.

These Social Accounts cover the period from April 2014 to March 2015. 2014/15 was Healthwatch Northumberland's second year of operation and was a year of development and consolidation in terms of its services and staffing. Some data recording and reporting systems were only introduced during the course of the year. Therefore the Healthwatch Northumberland Board views these Social Accounts as a 'work in progress' statement.

We hope that this report will enrich your understanding of Healthwatch Northumberland's work and its mission to give users a voice in the design and delivery of health and social care services.

Cynthia Atkin  
Chair



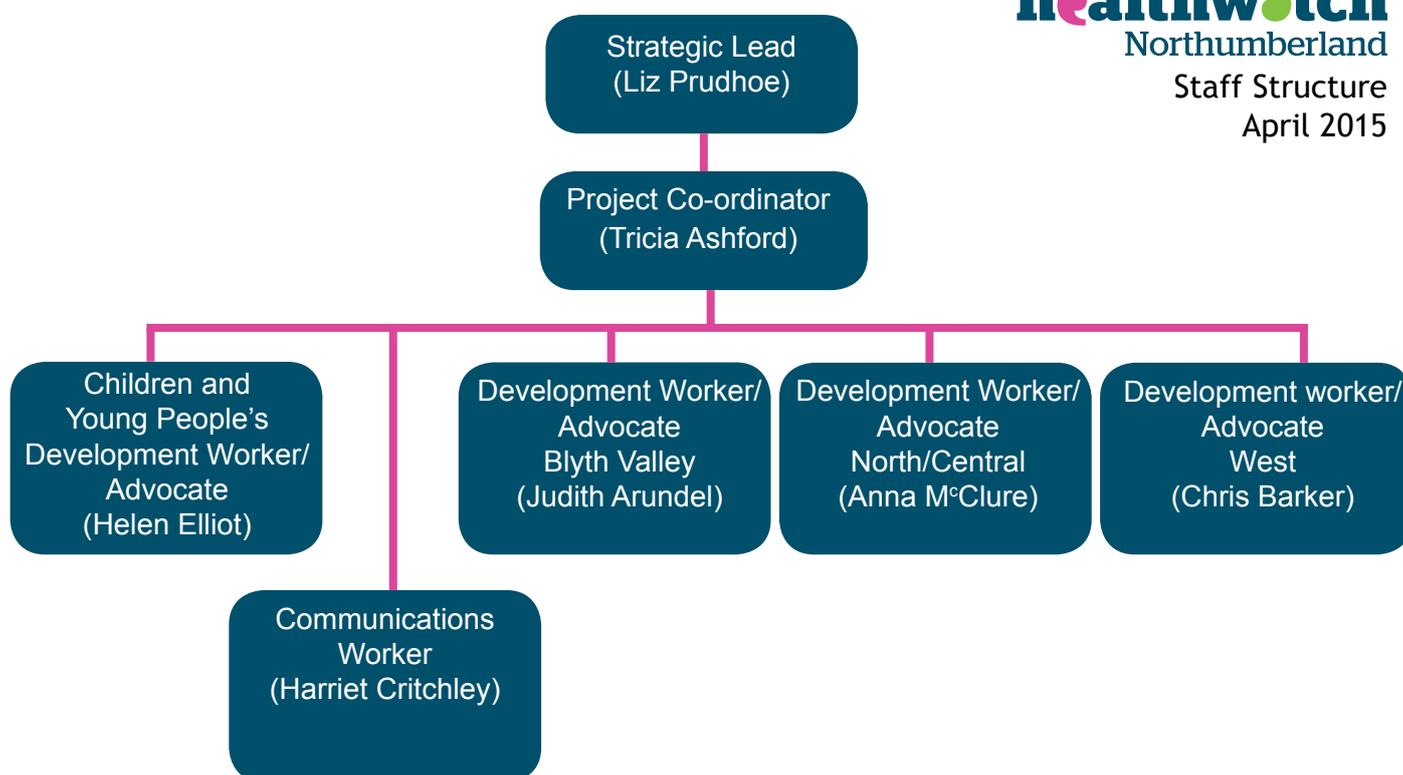
## Board and Staff

The Healthwatch Northumberland Board is constituted to give representation to the different organisations, areas or interest groups relevant to its mission.

Seats	Representing	Appointed/nominated/ open recruitment
1	Chair	Appointed in consultation with Adapt board
1	Adapt trustee board	Nominated representative
1	Carers Northumberland	Nominated representative
1	Age UK Northumberland Advocacy Service	Nominated representative
4	Individuals- North, central, south-east and west Northumberland	Nominated representative
2	VCS Assembly	Nominated representative
1	Group or individual focusing on young people	Open recruitment
1	Group or individual focusing on seldom heard groups	Open recruitment
1	Patient Advice and Liaison Service	Nominated representative (no voting rights)
1	Northumberland County Council	Nominated representative (no voting rights)

Healthwatch Northumberland’s staff report to the Healthwatch Northumberland Board through the Strategic Lead.

**healthwatch**  
Northumberland  
Staff Structure  
April 2015



Healthwatch Northumberland’s delivery of its objectives is also supported by a network of 34 volunteers.

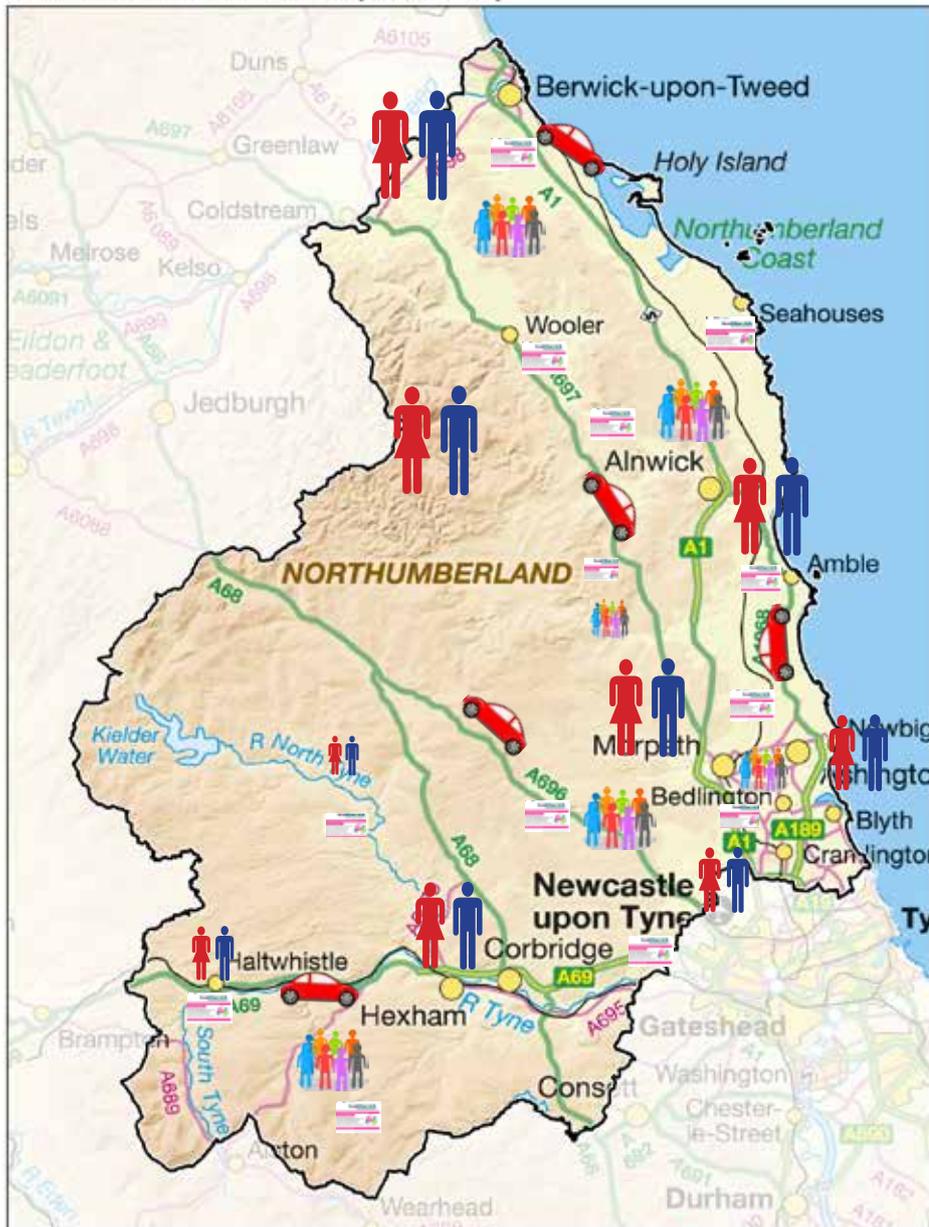


# Serving the whole of Northumberland

In 2014/15 Healthwatch Northumberland reached out to residents of the county in the following ways:



Northumberland Ordnance Survey General Map



Land area- 2,000 square miles  
Population- 315,800

Published October 2013. Scale: 1:450,000  
 Produced by the Policy and Research Team, Transformation Service, Northumberland County Council.  
 © Crown Copyright. All rights reserved. NORTHUMBERLAND COUNTY COUNCIL - OS Licence No. 100049048.



The relative size of the figures representing supporters is approximately indicative of the number of registered individual supporters in relation to the local population in each postcode area.



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## Why Social Accounting and Audit?

The success of Healthwatch Northumberland is measured not in activity alone, but in terms of its effectiveness at:

- ✓ engaging with users of health and social care services across the county, and listening to their concerns;
- ✓ identifying issues relating to the design and delivery of services which are denying users full and timely benefit;
- ✓ representing those issues to commissioners and other decision-makers, and effecting change

Success is therefore as much about the breadth and quality of relationships, and their power to influence as it is about particular issues and their resolution.

Social accounting and audit offers a framework to describe and to report upon the impact that an organisation has on people, on the planet and on the way resources are used. In so doing it offers not only an account of how the organisation is performing at present but it can also be used as a tool to improve performance and effectiveness in the future.

Northumberland County Council (NCC) administers the contract for Healthwatch Northumberland's services. NCC and the Healthwatch Board agreed that it would be helpful to conduct a social audit of the organisation's performance for the year ending March 2015 in order to inform the service specification and contract renewal process due in March 2016.

Cllr Scott Dickinson Chair of Northumberland County Councils Health and Wellbeing Board supports this new approach and endorses the key findings, conclusions and recommendations of the social account.

## Methodology

This first social accounting report has been produced using the methodology and guidelines set out by the Social Audit Network ([www.socialauditnetwork.org.uk](http://www.socialauditnetwork.org.uk)) and includes the audit report of a social audit panel (see page 23).

Healthwatch Northumberland's Vision, Mission and Values are set out on the next page. The analysis and the chapter headings which follow link the account to an Impact Map for organisation (page 9). Page 18 reports a stakeholder review undertaken in autumn 2014 and page 21 considers the contribution of Healthwatch Northumberland to social capital amongst its stakeholder community.



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# Vision, Mission and Values

## Vision and Mission

We are the Northumberland consumer champion for health and social care. Our vision is for a Northumberland where health and social care services are all directly influenced by the diverse community they serve. We want people to receive the right care when they need it, and we want services to be accountable to the public who use them.

## Values

All of our work is informed by the following values:

### Inclusive

- We start with people first
- We work for children, young people and adults
- We cover all health and social care services
- We work for everyone

### Influential

- We are responsive
- We take what we learn and translate it into action
- We are innovative and creative
- We know that we cannot fix things by sticking to the status quo
- We work with other local Healthwatch and Healthwatch England to make an impact both locally and nationally
- We work with everyone, not just those who shout the loudest

### Independent

- We are independent and act on behalf of all consumers
- We listen to consumers and speak loudly on their behalf
- We challenge those in power to design and deliver better health and social care services
- We like to highlight what works well but are not afraid to point out when things have gone wrong

### Credible

- We value knowledge
- We seek out data and intelligence to challenge assumptions with facts
- We celebrate and share good practice in health and social care
- We hold ourselves to the highest standards

### Collaborative

- We keep the debate positive and we get things done
- We work in partnership with the public, health and social care sectors, and the voluntary and community sector
- We learn from people's experiences and from specialists and experts
- We build on what is already known and collaborate in developing and sharing new insights

## Delivering Impact

The objective of Healthwatch Northumberland is to ensure that health & social care services are designed in consultation with communities. Its staffing and governance structures, its activities and outputs are all designed to deliver this objective. This first social accounting report offer some insights into how progress towards this goal can be measured referencing some of the key outputs identified in the Impact Map below.

### Impact

- The benefits of engagement are understood and people feel heard with Health and Social Care Services designed in consultation with communities.

### Outcome

- Stronger relationship with institutional stakeholders
- Building the capacity of the community to have a 'voice' though Healthwatch
- Trusted complaints procedure
- Healthwatch seen as the 'go to' brand

### Output

- Enquiries (page 11)
- Supporters (page 12)
- Issues Raised (page 13)
- Geographical Reach (page 15)
- Literature Placements (page 15)
- Volunteers (page 16)
- ICAN service (page17)

### Activity

- Identifying emerging issues and gaps in service provision
- Meetings with and scrutiny of commissioners
- The ICAN service
- Advocacy
- Networking, meetings and events
- Leaflets and brand awareness-raising



## Communication and Engagement

In February 2014 Healthwatch Northumberland adopted a Communication and Engagement Strategy. The target outcomes for the Communication & Engagement Strategy are directly related to the Key Performance Indicators (KPI's) in the delivery contract with Northumberland County Council. Where applicable, performance against some of those KPI's is reported in the pages following.

The strategy identifies a number of target groups for engagement:-

- User, patient and carer groups
- Minority/seldom heard groups
- Children's and young people's groups and organisations
- Other charities/voluntary sector organisations
- Educational institutions
- Housing and housing-related providers and groups
- Geographical groups

Healthwatch Northumberland's Annual Report 2015 describes how this strategy is now being put in effect.



There has been a significant increase in the level of direct engagement with the public - going out and about to leisure centres, libraries, hospitals, supermarkets and other community venues to widen our reach. Development Workers have visited GP practices, care homes, pharmacies, dentists, opticians and hospitals in Northumberland. Working in the community alongside health and social care services Healthwatch Northumberland has been to gather feedback from a growing number and variety of service users across the county.

In the year April 2014 to March 2015 Healthwatch Northumberland staff and volunteers attended 350 meetings and events and engaged with almost 1,400 health care professionals and voluntary sector workers and some 2,000 members of the public.



“Healthwatch is also engaged in many of our locality groups, representing the patient's voice and ensuring that services are planned appropriately for our rural and urban communities. Their expertise in engaging with the public, patients, carers and service users is critical to the work that we do as a commissioning organisation and we look forward to this role developing even further, particularly as we begin to integrate services even more in the future.”

Northumberland CCG

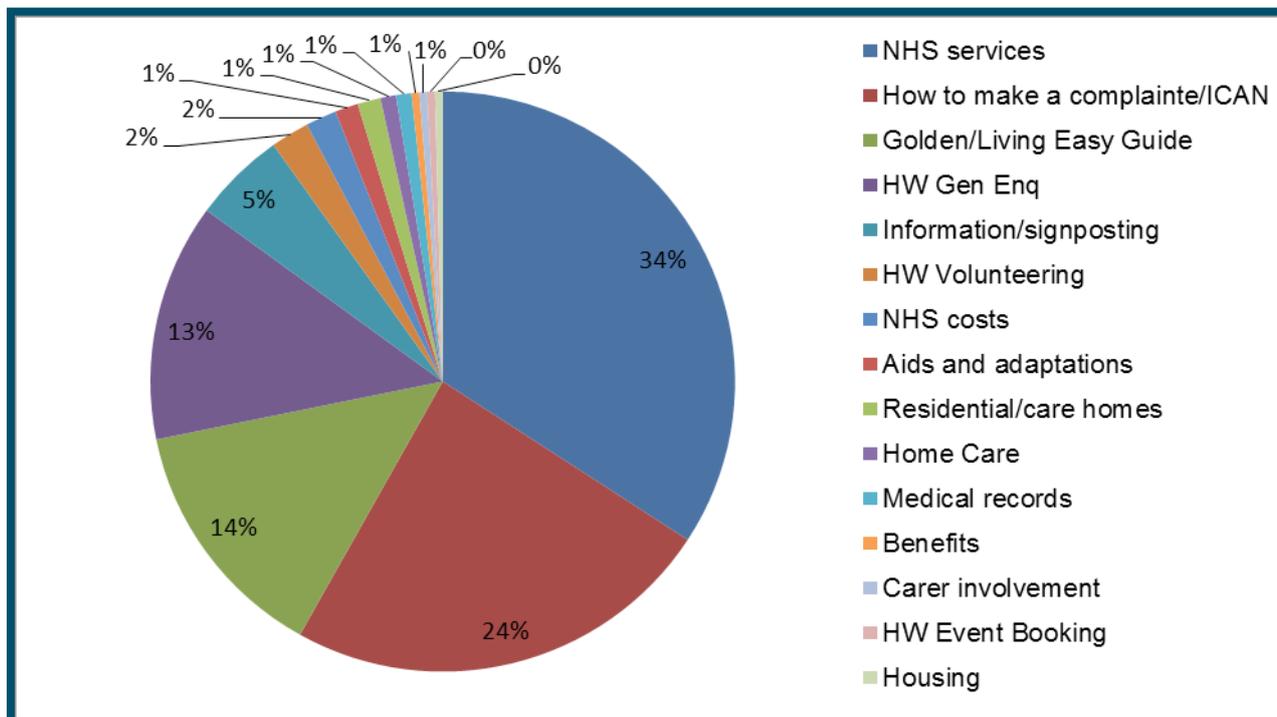




# Enquiries

Healthwatch Northumberland responded to 234 enquiries in 2014/15.

These enquiries are logged and analysed by enquiry type to enable staff to discern and highlight emerging or recurrent issues.



As will be seen from the chart above, more than half of the enquiries in 2014/15 took the form either of a generic query about NHS services or of a request for information about how to make a complaint.

During the course of the year Healthwatch Northumberland upgraded its enquiry database to allow more detail to be captured about the source of each enquiry. Local development workers review all of the enquiries received from their locality, ensure that issues raised are followed through, offering advocacy and support when appropriate, and look for and report any emerging trends.



Kay used Patient Transport Services (PTS) on a regular basis due to mobility issues that make it difficult for her to travel to and from appointments. Kay contacted Healthwatch Northumberland as she had been refused PTS after changes were implemented to bring the criteria in Northumberland in line with national guidelines. She was advised to contact the British Red Cross to use their volunteer driver service but Kay was concerned about the cost and that the volunteer drivers would not be trained in dealing with her condition. Kay appealed the decision and it was decided that she was eligible for patient ambulance service. Kay felt supported by Healthwatch Northumberland and was pleased that we took a serious interest in her experience.

Enquiries activity is reported to the Healthwatch Northumberland Board. In December 2014 the Board approved an Escalation Policy which sets out how activity will be reported and prioritised as well as what action will be taken, depending upon the number of comments received in relation to a particular issue and the level of seriousness. Escalations are reported to the Board and to commissioners at quarterly contract meetings.

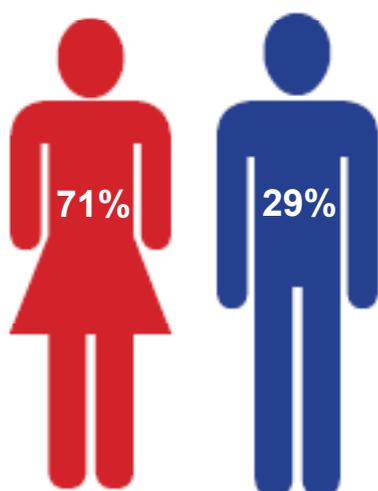
## Supporters

People in the community that Healthwatch Northumberland engages with are encouraged to become supporters – this means that they support the organisation’s values and want to stay in contact, find out about the work Healthwatch Northumberland is doing and opportunities to become more involved.

Healthwatch Northumberland’s vision – “A Northumberland where health and social care services are all directly influenced by the diverse community they serve” – puts supporters at the forefront of the organisation’s work at every level. The organisation’s values are all about starting with people in the community and their views driving its work. Healthwatch Northumberland is delivered by Adapt, an organisation built on the principles of inclusion and diversity, working for everyone in the community.

Building and sustaining an effective and engaged supporter base is a key component of Healthwatch Northumberland’s strategic plan.

- ✓ It is through supporters that it can expand awareness about Healthwatch amongst users of health and social care services
- ✓ Through its e-newsletters and bulletins it can invite user feedback on emerging issues and trends
- ✓ It is from the supporter base that Healthwatch encourages more people to become volunteers



As at the end of March 2015 Healthwatch Northumberland had 287 individual supporters and 284 organisational supporters (voluntary and community groups, healthcare provider organisations, commissioning organisations, other professional groups and networks with an interest in healthcare).

130 new individual supporters were registered during the year – a growth of 45%

71% of individual supporters are female, 29% are male.

Individual supporters are drawn from across the county. Using postcode data where available it can be shown that, despite socio-economic differences, the distribution of supporters is broadly representative of the population clusters in the county.

This outcome supports Healthwatch Northumberland’s policy of recruiting development workers to cover specific localities, and helps to counter the perception of some respondents to the stakeholder review that the organisation was too focussed on the West of the county.



Where individuals have been willing to divulge their age, the age distribution of supporters is:

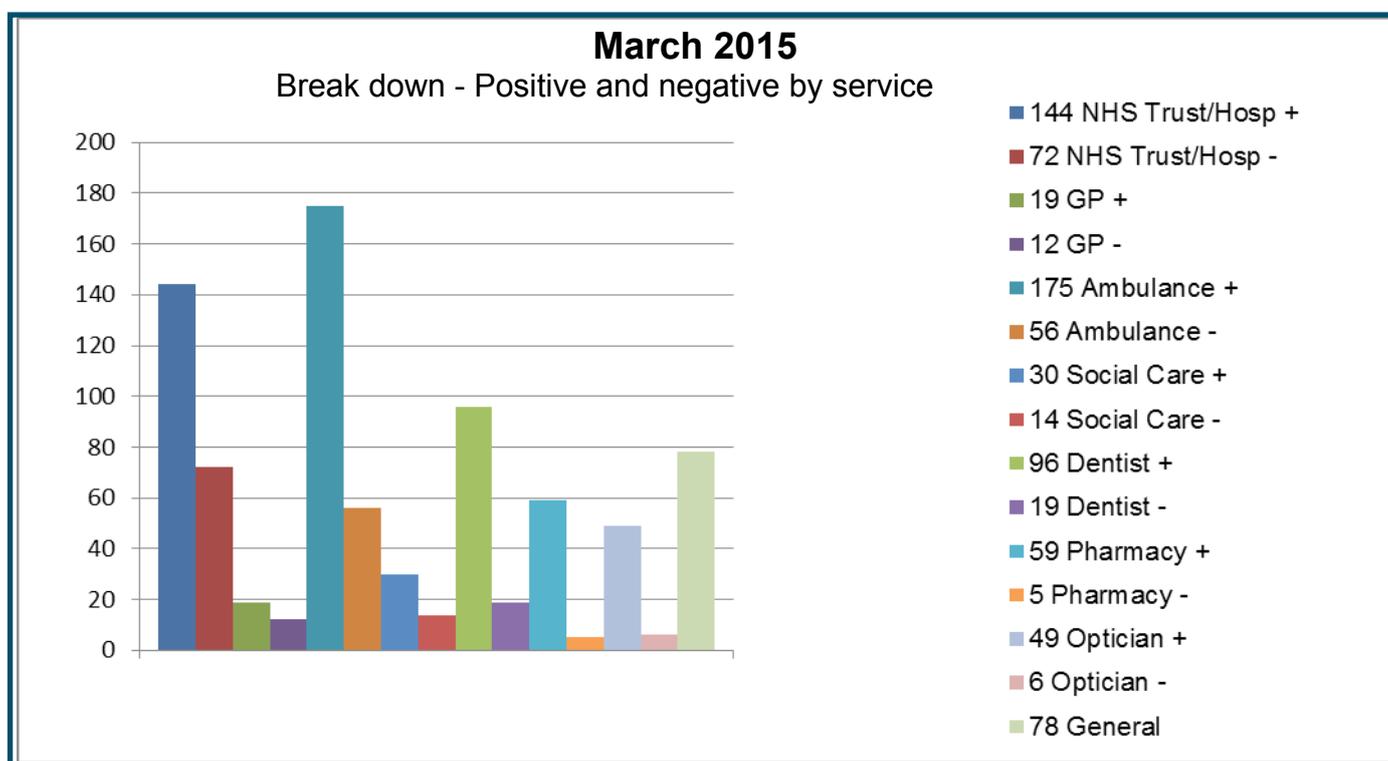
Age category	% of supporters
16 - 25	1%
26 - 45	16%
46 - 65	38%
66 - 80	36%
Over 80	9%

The age and gender split of supporters is not unexpected in the context of those who are likely to have a personal interest in the design and provision of health and social care services. Women are generally more frequent users such services given their needs both in their own right and on behalf of others (young children or older dependents).

## Issues Raised

Healthwatch Northumberland's networking and outreach activity serves a dual purpose. It enables the development of partnerships and the recruitment of supporters. It is also central to gathering of feedback and collection of comments – positive and negative – about the provision of health and social care services in Northumberland.

Monthly feedback is logged by service, and also by the source area within the county.





This data, together with national intelligence and feedback from forums and networks, enables Healthwatch Northumberland to identify issues and concerns to be raised as appropriate through its escalation policies with commissioners and providers.

A Health and Social Care Liaison Group has been established to support collaborative work with commissioners and service providers. The group is to provide a forum for mutual information exchange, and allows early warning about problems.

The Healthwatch Northumberland Board has established Task Groups around some key priorities. Each is led by a Board member, facilitated by a member of staff and involves staff, supporters, service users and carers as well as other appropriate stakeholders. Three Task Groups are presently working on Mental Health, Access to Services and Social Care.

Healthwatch Northumberland shares the outcomes from this group with the public through a 'You said, We did' section in its regular updates and newsletters.

## **Patient Transport – an issue leads to action**

National criteria for the provision of Patient Transport Services (PTS) were implemented in October 2014 in Northumberland. This resulted in concerns being raised by patients who were no longer eligible for patient transport and who were finding it difficult to get to appointments.

Northumberland is a vast, rural county with limited access to public transport in many areas and many patients contacted Healthwatch Northumberland because they had been told that they did not meet the criteria for PTS even though they had used it before the implementation of the national criteria. Healthwatch Northumberland worked with Northumberland CCG to address concerns raised by patients. The questions asked by the call centre were changed and additional questions were introduced to ensure that those patients who needed transport had the opportunity to discuss their needs with the provider when they requested transport to an appointment. Healthwatch Northumberland is participating in a county-wide Transport Commission which is looking at patient transport alongside wider transport issues in Northumberland. Its Access to Health Services Task Group is monitoring progress on patient transport.



## A service for the whole county

The county of Northumberland covers a wide geographical area – encompassing both relatively remote rural communities and urban clusters. The centres of population are found in the south-east corner of the county, up the coastal margin and long the Tyne valley. Different communities have different needs in terms of access to health services and quite widely differentiated socio-economic characteristics.

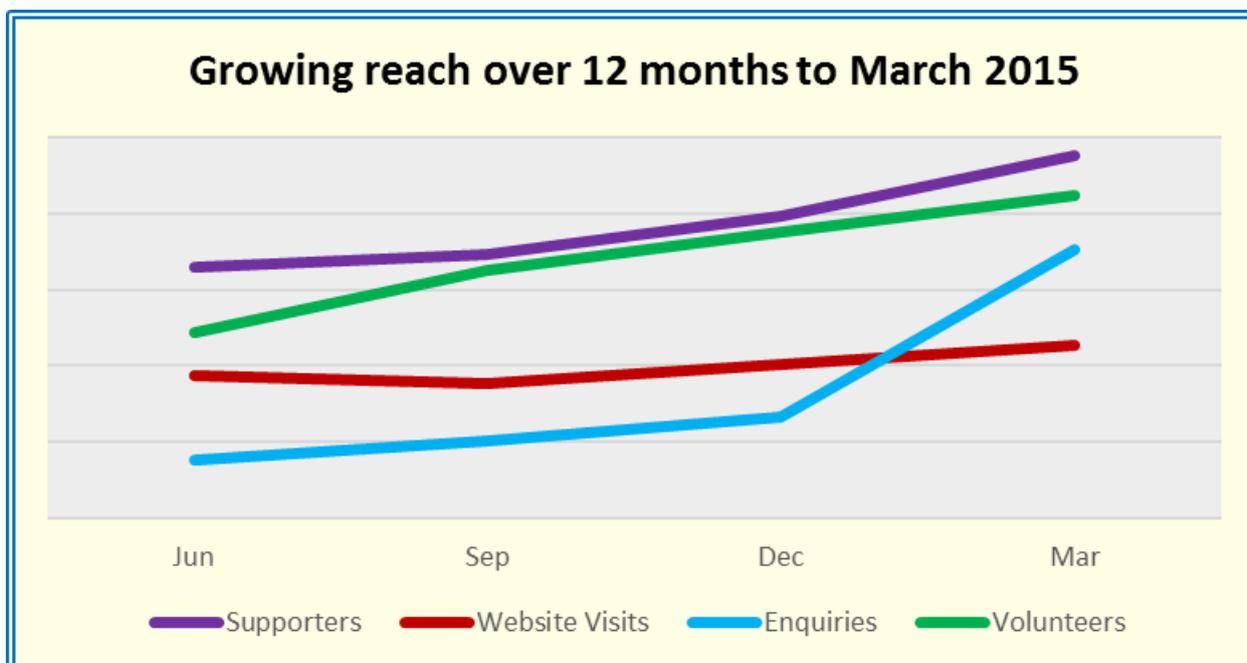
Development workers have been appointed with a specific geographic portfolio and are responsible for the delivery of all of Healthwatch Northumberland’s programme activity – networking, outreach and advocacy within their area. It has been an important feature of their role to get know their area and to build up local relationships.

Development Workers have ensured that information about Healthwatch Northumberland and its services is available in 238 access points around the county used by the public – eg health centres, dental surgeries, libraries, etc.

Healthwatch Northumberland has set as a strategic priority increased involvement of children and young people. One of the Development Worker posts has specific responsibility for this age group, which includes the recruitment and support of young volunteers – see below.

## Growing Reach

2014/15 represented the second year of development for Healthwatch Northumberland, and in the early months of the year under review were some staff vacancies. Systems and processes were still being refined.



The chart above shows a number of key success indicators for Healthwatch Northumberland which have marked significant progress during the year – notably supporter numbers and volunteer recruitment. The marked growth in the number of recorded enquiries in the final quarter reflects increased public engagement during that period.



## Volunteers

As at March 2015 Healthwatch Northumberland had 34 volunteers (27 female and 7 male). 21 new volunteers were recruited during the year.

Volunteers are engaged in supporting Healthwatch Northumberland at public engagement events and in representing the organisation at meetings. Activities include:-

Care Home Inspections - volunteers are trained by Northumberland County Council to visit care homes in the county as Independent Observers

Connecting with the Community – volunteers are linked to community groups and help to keep Healthwatch Northumberland informed about member feedback

Mystery Shopping - volunteers participated in a mystery shopping exercise of the Northumberland Single Point of Access (information, advice and support for social care). This was delivered in partnership with Northumbria NHS Healthcare Trust

In line with its strategic objective to engage with users of health and social care services of all ages, Healthwatch Northumberland has also successfully recruited 17 young volunteers under “**vInspired**”<sup>2</sup> programme. Young volunteers now have the opportunity to log their volunteering hours online in order to work towards different awards.

“The contribution of volunteers to local Healthwatch organisations cannot be overstated,” says a Kings Fund report (see page 20 below). The same report acknowledges both the voluntary work undertaken by Board members and the contribution of volunteers to support the capacity of the staff teams to get things done.

### Volunteer Case Study



Gillian started volunteering for Healthwatch Northumberland after caring for her elderly mother who was supported to stay in her own home with the assistance of a team dedicated carers. This experience gave her valuable insights into the different aspects of home care services. “The care my mother received was excellent but at times the system wasn’t easy to navigate”. She wanted to use her experience of health and social care to make a difference.

Gillian trained to be an Independent Observer for Care Homes. During her training she visited 6 care homes from across the county. This role has allowed Gillian to fit volunteering around her.

“I was able to volunteer in my own home, in my own time to complete the paperwork and then return it in the post”.

Gillian recommends volunteering for Healthwatch Northumberland for a variety of reasons, “It is not a huge time commitment, you give them your available dates and they work around you, which is great if you have a busy lifestyle but want to volunteer”. She enjoys meeting like-minded volunteers who are contributing to making a difference across the county. “Volunteering for Healthwatch Northumberland allows you to make a difference to the services you utilise or will have to utilise in the future.”

<sup>2</sup>vInspired is a nationally recognised volunteering award scheme which allows young people aged 14 to 25 to get the recognition they deserve, as well as offering a chance to develop their CV

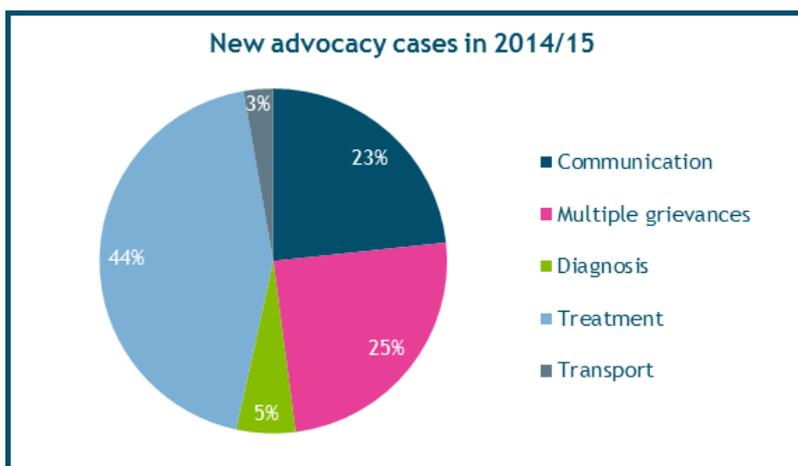


# ICAN

Healthwatch Northumberland manages and delivers the Independent Complaints Advocacy Northumberland (ICAN). This free service is offered to residents of Northumberland to raise a concern or to complain about NHS care and treatment, including in care or nursing home places provided by the NHS.

The service offers the support and guidance from an advocate to listen to the concerns of the complainant, and to provide information on the different ways in which concerns can be raised and on the processes involved.

Development Workers have been appointed to serve all localities around the county. They are able to provide advocacy support to ICAN clients in their area who need it. All have achieved, or are working towards a professional advocacy qualification. In 2014/15 they supported 73 new clients making complaints about NHS services.



Including cases brought forward from the previous year, Healthwatch Northumberland handled 126 ICAN cases during the year. 80 cases were completed and closed during the year.

A report produced in October 2013, following a review of the NHS Hospitals Complaints System chaired by the Right Honourable Ann Clwyd MP and Professor Tricia Hart, made a number of recommendations, including “The independent NHS Complaints Advocacy Service should be re-branded, better resourced and publicised. It should also be developed to embrace greater independence and support to those who complain. Funding should be protected and the service attached to local Healthwatch organisations”. Northumberland County Council incorporated the delivery of independent NHS Complaints Advocacy into the commissioning of local Healthwatch in September 2012, in advance of the publication of the report.

Healthwatch Northumberland’s advocacy work was rated at 7.4 out of 10 by respondents in the 2014 Stakeholder Review.

Some feedback from users of the ICAN service:

The ICAN service was really good. I had a meeting with the Trust and I am happy with the outcome.

I would just like to say a very big thank you for all the help you gave me

Very supportive and understanding.



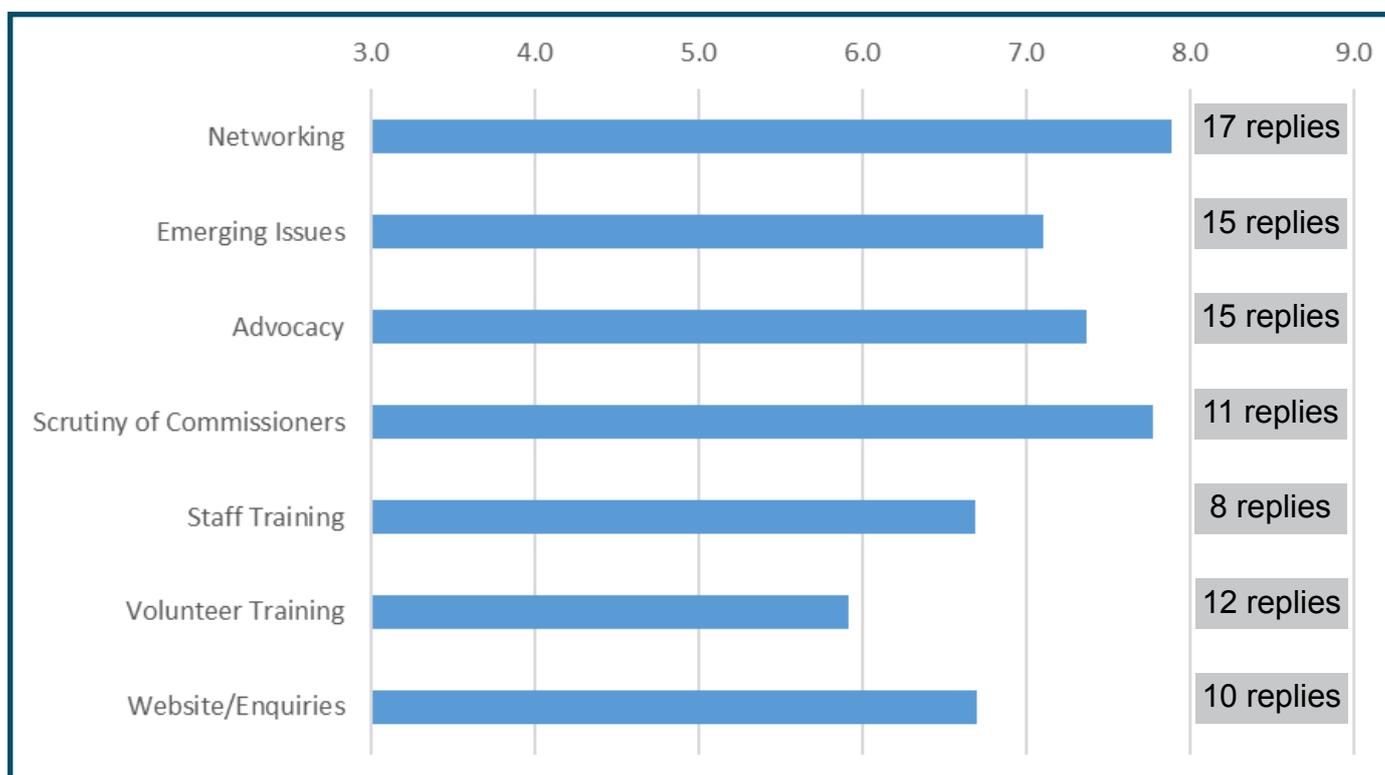
## Stakeholder Review

One of the Key Performance Indicator requirements under the contract issued by Northumberland County Council was to conduct a 3600 stakeholder review.

In autumn 2014, the Healthwatch Northumberland Board commissioned an independent stakeholder review to gauge the opinions of key stakeholders about the organisation's achievements to date and priorities for the future, and to inform these social accounts. The stakeholder review was conducted by social economy consultants, Angier Griffin.

24 interviews were conducted involving a cross-section of staff, Board members, commissioners, health professionals, Healthwatch England, local authority representatives, voluntary sector partners and volunteers. Interviewees were selected by the consultants based upon information provided by Healthwatch Northumberland.

When invited to rate Healthwatch Northumberland against its contractual Key Performance Indicators, the ratings were generally positive.



Not all respondents felt able to give a rating. The scores shown in the table above are the average scores from those who did, noting the number of respondents to each question.





## National Picture

In March 2015 the Department of Health published a report<sup>3</sup>, commissioned from the Kings Fund, examining the progress that had been made in the first 18-21 months of local Healthwatch programmes.

The report drew upon both survey data and cases studies. The report includes analysis of responses from 108 of 152 Healthwatch organisations in England. The report's executive summary concludes:

Local Healthwatch organisations are in the process of shifting from setting up the organisation and developing local relationships to developing effective processes for carrying out their activities, and then in some cases beginning to achieve impact in terms of changes to services.

This conclusion echoes the experience of Healthwatch Northumberland. The data reported in these accounts show a gathering momentum in terms of operationalising strategic aims and engagement with commissioners and providers around issues of concern.

Although the headings used in the Kings Fund report do not correlate directly to the KPI categories used in the Healthwatch Northumberland Stakeholder Review (pages 18 & 19) comparisons are made where appropriate:

Category	Kings Fund <i>(Self-reported assessments by Healthwatch Managers)</i>	Stakeholder review <i>(based upon interviews with sample of stakeholders)</i>
Enquiries/Information/Advice	85% respond working well or making good progress	Rated 7 out of 10
Gathering Intelligence/ Emerging Issues	91% responded working well or making progress	Rated 7.1 out of 10
Scrutiny of Commissioners/ Influencing Provision	78% respond working well or progress with more still to do	Rated 7.8 out of 10
Networking/ Information Sharing	66% respond working well or making good progress	Rated 7.9 out of 10

<sup>3</sup> Local Healthwatch: progress and promise (March 2015)-  
<https://www.gov.uk/government/publications/local-healthwatch-progress-and-promise>



## Social Capital

Social capital is ‘anything that facilitates individual or collective action, generated by networks of relationships, reciprocity, trust, and social norms [James Coleman]. Since the facilitation of relationships and information exchange lies at the heart of the purpose of Healthwatch Northumberland, it relevant in this social account to consider how it contributes to social capital in the community it serves.

Healthwatch Northumberland has recruited almost 300 individual supporters, and engaged with more than 2,000 members of the public in 2014/15. As is illustrated in the diagram below Healthwatch Northumberland (like other local Healthwatch organisations across England) adds value by the facilitation of relationships between institutional health and social care providers and commissioners, informed by its contact with individual service users.



The 2014 stakeholder review showed that the stakeholders interviewed rated the organisation highly in terms of Networking, Advocacy, Scrutiny of Commissioners and identification of Emerging Issues. Therefore, over and above the practical benefits of having a strategically placed intermediary to facilitate communication between patients and patients groups and the providers of health and social care services, there is some evidence that the quality of the relationships facilitated is valued.

### About Social Capital

*Most literature considers how social capital can be understood by reference to the interactions between individuals in a community. Most commonly the measures used relate to the number of networks or relationships sustained, the levels of trust between members of a network and the frequency and reciprocity of interactions. Other research suggests that higher levels of social capital result in a broad range of social goods – higher educational achievement and reduced crime as well as greater emotional wellbeing and better health. There is, to date, little published research to describe how organisations can add social capital by facilitating relationships between institutions and stakeholder groups.*



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## Key Findings, Conclusions and Recommendations

Healthwatch Northumberland has undertaken this first social accounting report of the organisation's performance with the encouragement of its commissioner, Northumberland County Council. The findings will be used to inform the future service specification and contract renewal process due in March 2016.

The report's findings follow the organisation's Vision, Mission and Values (page 8) and Impact Map (page 9).

The report finds that:-

- ✓ with a comparatively small staff establishment the organisation achieves an effective reach across a wide geographical area (pages 10 and 15);
- ✓ Healthwatch Northumberland commands the respect of its stakeholders – especially in respect of its networking, advocacy and scrutiny of commissioners (Stakeholder Review – page 18)
- ✓ it has invested effectively in the recruitment of supporters (page 12) and volunteers (page 16)
- ✓ like other Healthwatch operations across England, 2014/15 – its second year of operation - has been a year of growing reach and engagement (page 15)
- ✓ its ICAN service draws positive feedback both from stakeholders and users and its governance arrangements follow recommended best practice (page 17)

There is comparatively little benchmarking data against which to compare Healthwatch Northumberland's performance and achievements. Where relevant data from an independent stakeholder review (pages 18 and 19) and from a national study of Healthwatch programmes (page 20).

The draft social accounting report was reviewed by a Social Audit Panel and by the Healthwatch Board.

The Social Audit Panel makes two recommendations in respect of the scope of future reports (page 23).

Most organisations which accept the discipline of social accounting find that it is an iterative process of reporting, review and reflection which helps the organisation both better to articulate its goals in terms of social impact and to refine its choice of outcome indicators to evidence its progress towards those goals.

The management and Board of Healthwatch Northumberland, and the service commissioner, Northumberland County Council will welcome feedback about these initial findings from stakeholders and residents of the County.



## SOCIAL AUDIT STATEMENT: Healthwatch Northumberland

The Social Audit Panel has examined the draft Social Accounts submitted to us and discussed them in detail with Tricia Ashford, Liz Prudhoe and Cynthia Atkin of Healthwatch Northumberland and with Philip Angier of Angier Griffin at the Social Audit Panel meeting held on Tuesday 22nd September 2015. I have examined the revised Social Accounts which were prepared following the Social Audit Panel meeting and which have taken into account various points identified in the notes\* of the Social Audit Panel Meeting. We also examined a sample of the data and the sources of information on which the Social Accounts have been based.

We believe that the process outlined above has given us sufficient information on which to base our opinion.

We are satisfied that, given the scope of the social accounting explained in the revised draft and given the limitations of time available to us, the Social Accounts are free from material mis-statement and present a fair and balanced view of the performance and impact of Healthwatch Northumberland as measured against its stated values and objectives and the views of the stakeholders who were consulted. We would like to commend Healthwatch Northumberland on being, what we believe to be, the first Healthwatch to complete a set of social accounts.

In the notes of the Social Audit Panel meeting we identified a number of important issues to be taken into consideration during the next social audit cycle. In particular we would refer to the following:

- i) Wider stakeholder consultation strategy particularly looking for feedback on values.
- ii) Widening the scope to include environmental and economic impacts.

The members of the Social Audit Panel were:

- a) Tracy Mitchell (SAN Approved Social Auditor, and Panel Chair)
- b) Kirsten Francis (Northumberland County Council)
- c) Alison Killen (Volunteer with Healthwatch)
- d) Sandra King (Community Health Promotion Consultant)

Signed:  .....  
Chair of the Social Audit Panel

Dated: 11 November 2015

\* The notes of the Social Audit Panel meeting form part of the social accounting and auditing process and may, by arrangement, be inspected along with the full social accounts at the offices of Healthwatch Northumberland at Adapt North East, Burn lane, Hexham, Northumberland, NE46 3HN. Members of the Social Audit Panel have acted in an individual capacity.



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## Contact Us

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### Adapt North East

**Address:**

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NE46 3HN



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