NORTHAMPTONSHIRE COUNTY COUNCIL

Commissioning Healthwatch Northamptonshire 2018-2021
Consultation Analysis Report
July 2017 – September 2017

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1. Introduction

Healthwatch is an independent consumer champion for people who use health and social care services. Each local authority is required by the Health and Social Care Act 2012 to make arrangements to establish and maintain a local Healthwatch organisation in its area.

Healthwatch’s job is to ensure that local voices are heard and that people’s views and experiences are used to improve existing services and to help shape future services. Where concerns and problems about care services have been identified Healthwatch ensures that the right people know and check that action is taken to resolve them and prevent them from happening again.

Healthwatch Northamptonshire (hereafter referred to as Healthwatch) was established in 2013. Its current contract, commissioned by Northamptonshire County Council (NCC), ends in March 2018. NCC are now in a period of re-commissioning their Healthwatch services, with the new service being live from 1 April 2018.

In this consultation the Council wanted to hear the views from interested parties to help shape how Healthwatch in Northamptonshire will look from April 2018 onwards. The feedback from this consultation, along with any other relevant information, and will be used to develop the best model for the statutory provision of Healthwatch in Northamptonshire.

This report is an analysis of the information and data gathered during this consultation held from July to September 2017.

2. Background

The Health & Social Care Act 2012 places a duty for top tier authorities – NCC – to locally commission Healthwatch, which is the primary consumers champion for both local health and social care systems. Supporting customers and the wider public to play an integral part in the strategic development and monitoring of local health and social care services, providing commissioners (and providers) with information that assist in shaping and reviewing services, in the commissioning and procurement of services.

Healthwatch Northamptonshire’s relationship with and responsibilities to Healthwatch England and the Care Quality Commission (CQC) will allow this informing and influencing role to be mirrored at a national level.

Northamptonshire County Council (NCC) established its Healthwatch Service in April 2013. It has been delivered by the same supplier (now known as Connected Together) since that date. NCC decided to put in place interim arrangements, delivered by Connected Together,
Commissioning Healthwatch Northamptonshire 2018-2021 Consultation Analysis Report

to secure ongoing Healthwatch services for 2017/18. This is (to allow time to explore commissioning options for securing longer-term provision i.e. for 2018/19 forward. NCC has embarked on a period of discussion with the current supplier and other key stakeholders to inform this process.

Two initial engagement events were undertaken in March and April 2017 with Voluntary Impact Northamptonshire (VIN), local infrastructure organisations (LIOs) support providers and representatives from Healthwatch Northamptonshire, the outcomes of which helped to shape this consultation.

Consultation was required to ascertain the view and comments from interested parties to help influence the development of the revised service specification.

The consultation was conducted by the Engagement, Participation and Involvement Team within Northamptonshire County Council, who carried out the consultation in compliance with NCC’s Consultation and Engagement Policy and Statement of Required Practice.

3. Consultation Methodology

The following outlines the consultation method used to generate the material / data for analysis.

A stakeholder analysis was completed. It identified stakeholders which included: volunteers, users of health or social care services, interested members of the public, community groups, stakeholder organisations, plus others.

Due to the breadth of potential stakeholders a base questionnaire was devised. The questionnaire was designed to:

- Inform audience of the current service and potential changes of future service once re-commissioned.
- Gain an understanding of stakeholders’ experience of accessing and/or working with Healthwatch Northamptonshire.
- Seek service users’ view on providing feedback on health and care services to Healthwatch Northamptonshire.
- Gain an understanding of stakeholders’ views on the priorities of the key functions delivered by Healthwatch Northamptonshire.
- Ascertain any gaps in service provision.

The online questionnaire was set up in a way which identified respondents who were individuals and those who were representatives of stakeholder organisations / community groups. Respondents were then directed to the questionnaire relevant to them. This meant
that the questionnaire was filtered so that the relevant audience group were presented with the questions that were pertinent to them.

A number of qualitative and quantitative questions were asked to gain an understanding of respondent’s views.

A copy of the questionnaire (Appendix 3) was made available on a dedicated internet web page on NCC’s consultation register, www.northamptonshire.gov.uk/consultationregister, which is where all of the Council’s consultations are published. An easy read version was also published on NCC’s website.

An offer was made to translate the questionnaire into other formats however no requests were made for any translated versions.

The consultation and online questionnaire was promoted to a number of key stakeholders, including:

- Voluntary and Community Sector organisations
- Volunteers
- Various community groups including Black and Minority Ethnic groups
- District and Borough Councils within Northamptonshire
- Health and Wellbeing Board Members, locality chairs and fora
- Nene and Corby Clinical Commissioning Groups
- Care Quality Commission
- Northampton and Kettering General Hospitals
- Northamptonshire Healthcare NHS Foundation Trust (NHFT)
- East Midlands Ambulance Service NHS Trust
- East Midlands Academic Health Science Network
- Voluntary Impact Northamptonshire
- University of Northampton
- First for Wellbeing
- Northamptonshire Adult Social Services
- Members of Northamptonshire County Council’s Consultation Register
- Members of the county’s Residents’ Panel
- Healthwatch Northamptonshire
- Healthwatch England
- Northamptonshire Carers
- Northamptonshire Learning Disability Partnership Board
- Northamptonshire County Councillors
- NCC staff
- Plus other interested parties
Key organisations, identified through the stakeholder analysis were also asked to help promote the consultation amongst their members and other distribution channels. Healthwatch Northamptonshire also promoted the consultation amongst their volunteers, board members, and via their social media accounts, website, newsletter and their known health and care providers and commissioners contacts.

As well as being promoted via our partners’ communication channels, the consultation was posted and publicised via the Council’s Facebook, Twitter and other social media accounts. Respondents were given the opportunity to participate through these social media sites, although no responses were received via this method.

The 8 week consultation began on 7th July 2017 and ended on 1st September 2017.

4. Summary of Feedback

This is an extensive summary of the feedback received however it is recommended that it is read in conjunction with the full results which can be found in appendices 1-2.

A wealth of feedback was received to this consultation and included some 544 comments from the different groups of respondents – including health and social care service users and their families and carers, volunteers, elected councillors, interested members of the public, professionals and stakeholder organisations and community groups.

A copy of the questions can be found in appendix 3.

Questionnaire feedback

From the 382 questionnaires, 327 respondents identified themselves as an individual (68.4% of which were from people who either currently or have previously used health or social care services in Northamptonshire, 33.3% were from those who have a friend, relative, or carer of someone who currently or has used local health or social care services, 3.0% identified themselves as Healthwatch Northamptonshire volunteers, 20.1% were volunteers with other organisations, and the remaining were mostly from elected councillors, members of local patient participation forums / patient congress. Responses also came from current and previous employees within the NHS / health sector. Other respondents said that they were an independent health care provider; a patient; a commissioner; and a couple of respondents said they were just an interested party) and 55 respondents were from stakeholder organisation / voluntary groups.
Individual questionnaire responses

Respondents were asked if they had heard of Healthwatch Northamptonshire prior to this consultation. There was quite a balanced split with 50.9% of individual respondents already being aware of Healthwatch Northamptonshire and 45.6% being unaware of them.

![Graph showing the percentage of respondents who had heard of Healthwatch Northamptonshire](image)

From the 327 individual respondents, only 58 of them had ever contacted Healthwatch. When asked why, the most frequent reason (55.8%) was individuals wanting to help improve health and care services by sharing their experience and knowledge. The below graph demonstrates the most common reasons:

![Graph showing the reasons for contacting Healthwatch Northamptonshire](image)

Those respondents who said ‘Other’ commented that they were volunteers with the organisation. Respondents commented that they had worked together with Healthwatch on research initiatives or projects or attended the same meetings. They also commented that their contact was as a result of responding to surveys and communications circulated by Healthwatch or they (i.e. respondent’s organisation) were seeking information to include in their own publication.

Respondents who had already been in contact with Healthwatch were then asked to describe their experience of Healthwatch. A total of 65.4% described their experience as either good or very good, with only 9.6% describing their experience as either poor or very poor.
These respondents were then asked if there was anything Healthwatch Northamptonshire could have done differently to improve their overall experience. Respondents who said that they had a ‘very good or good’ overall experience said that Healthwatch responded promptly and that they were signposted in the right direction. Respondents felt they were listened too, that they were engaged with and that their views were considered. Respondents felt the information shared was handled sensitively and full explanations were given by Healthwatch as to what would happen with the information supplied. Respondents expressed that Healthwatch was a competent organisation with knowledgeable and passionate individuals whether they were paid members of staff or volunteers.

Respondents who responded ‘neither good nor poor’ commented mostly on the way in which they were given advice or their issue was dealt with. Respondents expressed the need for Healthwatch to be more transparent in sharing information with public; to be constructive with advice; to provide timely feedback; and to offer a complaints service.

Respondents who stated ‘poor or very poor’ commented on the quality of research saying it was of a poor standard; that it did not seek the views from a wider demographic and that it did not contain independent findings rather than Healthwatch repeated information from other surveys / consultations. Respondents spoke about receiving none or untimely feedback; or poor quality information related to the issue raised.

A total of 270 individual respondents ranked how they would prefer to share their experiences of health and care services or report concerns. This raised a mix of responses with all options being disliked by many respondents although when using a 5 point scale the clear majority of respondents said they would prefer to do this online or via an online questionnaire (with a 4.30 average out of 5), this was followed by via a health or care professional (with a 3.58 average), closely followed by a confidential telephone line (with a 3.36 average). Those respondents who said ‘Other’ specified direct email or direct contact by letter. One respondent suggested a confidential postal and email address. Another suggested having an overarching national watchdog where concerns and issues are acted upon. Respondents also stated that consultations undertaken by Healthwatch needed to cover not only those people that are consumers of current health services but all types of consumers. Respondents emphasised the need for feedback, and for quick tick box surveys at all general practice surgeries.
Respondents were then asked if they thought Healthwatch Northamptonshire could improve awareness of its services to local people. The majority of individual respondents (78.4%) felt that they could, with only 3.0% feeling they could not and 18.6% did not know.

The question how do you think Healthwatch Northamptonshire could improve awareness of its services to local people, generated a total of 165 comments. However the bulk of the comments were very similar and centred around respondents who had never heard of Healthwatch to those whose experience of Healthwatch had not been positive or had been limited.

Many respondents gave suggestions on improvements to visibility of Healthwatch which centred on advertising, creating good public relations; being clear on the role of Healthwatch; undertaking direct outreach work; and the council and other public agencies investing appropriately in Healthwatch so that it could deliver improved and better services.

The main improvement areas identified were an increase in public awareness of Healthwatch. Many of the respondents commented that they had not heard of Healthwatch or the job or powers it had. Those that knew about Healthwatch commented they felt little informed about what the organisation actually did.

Respondents extensively commented on the use and exploitation of social media platforms. This included being savvy in using social media to gain maximum public reach regarding general organisational information down to targeted communication on specific thematic campaigns.
Alongside using digital technology respondents also stated that it was imperative to use traditional communication methods such as posters, radio, and localised meetings to get key messages shared on issues but also to critically share what Healthwatch was about. Respondents also suggested that the yearly council tax information leaflets could carry information / advert about Healthwatch.

Respondents commented that although Healthwatch was open to all it was only being accessed by ‘usual suspects’. Local councillors felt that there could be improvements in their own knowledge base about Healthwatch and its remit as to what they could do together in their constituencies.

Respondents also mentioned that Healthwatch ought to be using locality buildings / assets - where people with health issues frequent the most – in order to raise awareness and to make Healthwatch more visible i.e. using doctor’s surgeries as well as other primary care and community based settings such as pharmacies and children’s / family centres.

Furthermore, respondents suggested that Healthwatch needed to use statistical data and knowledge to directly target, advertise and market to specific customer groups.

Respondents were then asked to consider a list of different services that Healthwatch Northamptonshire is expected to provide, and ranked them in order of priority using a 5 point scale. All of the list services were considered very important by the 254 individual respondents who answered this question and were ranked in the below order:

<table>
<thead>
<tr>
<th>Service</th>
<th>Weighted average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.</td>
<td>4.41</td>
</tr>
<tr>
<td>Where concerns have been raised, make recommendations to national organisations for investigation or special review.</td>
<td>4.38</td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td>4.35</td>
</tr>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td>4.27</td>
</tr>
<tr>
<td>Support people to give feedback on local health and social care services.</td>
<td>4.15</td>
</tr>
<tr>
<td>Provide ways for local people to monitor the quality of local health and care services.</td>
<td>4.04</td>
</tr>
</tbody>
</table>

Respondents were then asked if there is anything that Healthwatch should be doing that is missing from the above list. A total of 54 (22.0%) respondents that there was and when asked what else should be included mentioned advocacy, complaints and a mentoring
Respondents were then given a list of statements and were asked to rank them on their importance to help ensure an effective local Healthwatch. Again this was done using a 5 point scale and again all statements were deemed very important by the majority of individual respondents, with ‘Demonstrates that it can get things done and get things changed for the better’ and ‘Is able to influence decision makers’ being identified as the most important with a 4.73 ranking average out of 5. These were extremely closely followed by ‘Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues’ (with a 4.72 average).

Respondents, when asked, what was missing when ensuring there was an effective and local Healthwatch commented on the need for an independent, visible, transparent, challenging,
and adequate financially resourced organisation. Respondents also stated outreach and communications needed to be strong and that it did not duplicate the work of other bodies; and that it did not hold meetings for meetings sake and that its governance was independent from the commissioners.

When asked if they have any other comments, respondents commented that Healthwatch Northamptonshire is a very useful organisation. That it provided support and a voice for the public in regards to the health sector. Respondents stated that Healthwatch Northamptonshire needed to be appropriately resourced and funded to do its work. It needed to be independent and not duplicate the work of other organisations. In particular, the council had to be consistent in the level of funding it provided. Respondents said that it needed to be encouraged to develop ‘more teeth’ and be prepared to challenge issues. Healthwatch needed to adopt more public awareness and self-promotion. Many respondents had not heard of the organisation but felt that if it did promote itself then it needed to be accessible to all sectors of the community.

Respondents also stated the need for it to be a modern, efficient and functional consumer voice organisation. Respondents felt Healthwatch could do more with work with families, and with GP practices, and to protect local services. In this way, they expressed that Healthwatch Northamptonshire would be a more influential and have stronger local presence. Respondents who commented that Healthwatch was not effective in the work that it had done said they had not heard of the organisations achievements. Many had only heard of them through their professional working role as opposed to them being a local resident / member of public.

Respondents stated public resources were being wasted in commissioning Healthwatch Northamptonshire and that the function of public consultation and engagement could be covered by other existing groups/teams.

A number of respondents were concerned about the potential demise of local services and they felt that Healthwatch Northamptonshire should know more about these local services and ought to be sharing information sooner. Some respondents felt let down by Healthwatch Northamptonshire.

**Organisations / community groups questionnaire responses**

Respondents replying on behalf of organisations / community groups were asked the name their organisations and their job title / role of the respondent. Of the 55 organisations / community groups 45 provided this information. Representative’s respondent from a variety of organisations and bodies - locality, county and nationally based - completed the consultation questionnaire. They were from the community and voluntary sector; the public sector including schools, health bodies and providers of health services; and community interest companies and providers of services. When asked to identify their job title / role, a
variety of roles were given as indicated in the below is a WordCloud of the most frequent job roles – a full list is available in Appendix 1.

As with individuals, organisations and community groups were asked if they had heard of Healthwatch Northamptonshire prior to this consultation. From the 49 respondents who answered this question, the majority of respondents (69.4%) were already aware of Healthwatch Northamptonshire, with 26.5% being unaware of them.

Organisations and community group respondents were then asked to describe their experience of working with Healthwatch Northamptonshire. A total of 39.0% described their experience as either good or very good, with only 7.3% describing their experience as either poor or very poor. 36.6% had not worked with Healthwatch Northamptonshire.
These respondents were then asked to provide a reason for their answer and if there was anything Healthwatch Northamptonshire could do differently to improve the impact of their work with the respondent organisation. Respondents who stated ‘very good or good’ commented that Healthwatch had attended their events and meetings; that they had been able to contribute and express their opinions to Healthwatch on issues which were relevant to them. Respondents also said that Healthwatch was an organisation that they could signpost too; that it was a responsive organisation which collaborated on issues and had staff that were knowledgeable. One respondent suggested that their experience of Healthwatch had been exemplary however it would be useful if Healthwatch could discuss their topics in advance with partners so that, where appropriate, work could be synergised.

Respondents who stated ‘neither good nor poor’ commented that they had limited direct contact with Healthwatch but knew of their representation on health and wellbeing forum. A respondent commented they use Healthwatch to signpost people to or use Healthwatch information to promote to local voluntary and community sector. Another respondent stated that their experience of a consultation meeting was that Healthwatch were ‘rubber stamping’ decisions already made by the health sector.

Those respondents that answered ‘poor or very poor’ commented that they had had limited contact with Healthwatch; that they felt support for young people suffering with mental health issues was limited. Another respondent commented on their poor experience post inspection i.e. waiting over 12 months for the initial report and subsequent contact with Healthwatch as a result of the findings.

Respondents who stated ‘not applicable / I have not worked with Healthwatch Northamptonshire’ commented that they had had no contact and another commented that access information needed to be disseminated to residents and organisations, via sources other than digital or web based.

As with individuals, organisations / community groups respondents were then asked if they thought Healthwatch Northamptonshire could improve awareness of its services. Similar to individual, most organisations / community group respondents (59.0%) felt that they could, with 12.8% feeling they could not and 28.2% did not know.

A total of 22 organisations / community groups commented about how they thought Healthwatch Northamptonshire could improve awareness of its service, both within their organisation and to local people. Respondents said on the whole more information could be provided. They wanted Healthwatch’s presence and attendance at local events, to have better social media accounts and activities, and to reach better into the community sector. Respondents felt that Healthwatch need to raise their profile and be proactive in the work that they did in order to be more engaged and in their role in advocating Healthwatch’s value to local communities.
Respondents were then asked to consider a list of different services that Healthwatch Northamptonshire is expected to provide, and rank them in order of priority using a 5 point scale. Again, as with individual responses, they were all considered very important by the 35 organisations / community group respondents who answered this question and were ranked in the below order:

<table>
<thead>
<tr>
<th>Service</th>
<th>Weighted average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td>4.47</td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td>4.45</td>
</tr>
<tr>
<td>Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.</td>
<td>4.17</td>
</tr>
<tr>
<td>Support people to give feedback on local health and social care services.</td>
<td>4.09</td>
</tr>
<tr>
<td>Where concerns have been raised, make recommendations to national organisations for investigation or special review.</td>
<td>4.09</td>
</tr>
<tr>
<td>Provide ways for local people to monitor the quality of local health and care services.</td>
<td>3.81</td>
</tr>
</tbody>
</table>

Respondents were then asked if there is anything that Healthwatch should be doing that is missing from the above list. There were 6 (17.1%) organisations / community group respondents that thought there was and when asked what else should be included and what benefits it would make commented that they could not see evidence of achievements and felt that some things were being duplicated. One respondent commented that Healthwatch should be making recommendations to local organisations not just national ones; and that it was important for Healthwatch to be represented on the Health and Wellbeing Board and another respondent commented on working towards improvements in local health and wellbeing fora. One respondent stated and questioned how public involvement legal requirements, as outlined in the Health Act 2007 were being commissioned with the county.

Organisations / community group respondents were then asked what they could do to support the development of Healthwatch Northamptonshire and to ensure that it has a positive impact on the health and care services. Respondents gave a variety of responses. They stated providing information, helping to display or disseminate information, assist with signposting, help with promoting Healthwatch developments, and sharing appropriate data. Some respondents stated that they needed to understand more about each other’s organisation and that Healthwatch had a greater understanding of the third sector. Respondents said that Healthwatch should be invited to their quality assurance/ public meetings/ engagement exercises.
Respondents were then given a list of statements and were asked to rank them on their importance to help ensure an effective local Healthwatch. Again this was done using a 5 point scale and again, as with individual respondents, all statements were deemed very important by the majority of respondents, with ‘Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues’ being identified as the most important with a 4.76 ranking average out of 5. This was extremely closely followed by ‘Reaches out to individuals and groups who find it difficult to express and communicate their views and choices’ (with a 4.72 average).

When asked what was missing from the list, comments received included a respondent reciting their understanding of what specific legal statutory measurements were missing from the options provided within the body of the question. Another respondent referred to Healthwatch having links to other Healthwatch organisations who border Northamptonshire as well as ‘regional’ areas associated with the county. A respondent also said that Healthwatch needed to list a few of its achievements since its conception.

When asked if they have any other comments, respondents made positive comments about Healthwatch’s independent role and the contribution Healthwatch makes to public engagement activity, assistance to monitoring services and the support it provides to statutory regulatory bodies and other decision makers. Respondents also stated that Healthwatch needs to raise awareness of itself with the public and provide more updates about its work.
5. Conclusion

A great deal of feedback was received to this consultation from a range of health and social care service users, their carers, volunteers, and professional respondents, with a total of 382 questionnaires. In addition to quantitative responses respondents made an additional 544 comments.

One of the aims of the consultation was to gain an understanding of stakeholder’s experience of accessing and/or working with Healthwatch Northamptonshire. Prior to this consultation only approximately half of the individual respondents had heard of Healthwatch Northamptonshire, although this increased to nearly two thirds with organisation / community group respondents. The majority of all respondents who had been in contact with Healthwatch Northamptonshire had a positive experience, although some felt there was room for improvement.

Another consultation objective was to ascertain views of service users on providing feedback on health and care services to Healthwatch Northamptonshire. When presented with a list of methods on how to provide feedback on services individuals provided a mixed response and it is evident that a variety of methods is preferential, although providing feedback online was the most preferred method. The least preferred method was via social media.

The majority of respondents, both individuals and organisations, felt Healthwatch Northamptonshire could improve its awareness of its services, which is possibly to be expected considering nearly half of individual respondents and a third of organisational respondents had not heard of them until participating in this consultation. Individual respondents felt Healthwatch needed to promote its services more via both traditional methods such as posters as well as more modern methods such as social media. Whereas organisations felt Healthwatch need to provide more information and to work closer with the community sector and be more proactive in promoting the work they do.

When seeking stakeholder’s views on the priorities of the key functions delivered by Healthwatch Northamptonshire individual respondent’s views differed slightly from organisations and community groups. Although all of the services Healthwatch provide were considered very important individuals felt Healthwatch’s main priority should be working with national organisations to help influence local and national health and care issues. Whereas organisations felt their main focus should be to provide information and support people to find the right health and care service.

A few individual respondents felt Healthwatch Northamptonshire should be delivering other services including advocacy, complaints and a mentoring service.
Organisations / community group respondents offered to help Healthwatch Northamptonshire by disseminating information and assist with signposting.

When presented with a list of statements on what makes an effective local Healthwatch, possibly unsurprisingly all were deemed very important by the majority of respondents. With the likes of demonstrating that it can get things done and get things changed for the better and is able to influence decision makers being deemed the most important to individuals and having a good understanding of the local NHS, public health and social care priorities, and sensitivity to local issues being most important to organisations.

In summary, both individual and organisational respondents feel Healthwatch Northamptonshire is a very useful organisation and that provides valuable support and a voice for the public in regards to the health and care sector. Although, some felt let down by them they expressed a desire to have an improved independent service which made a difference to the provision of local services.

6. Equalities Statistics Summary

Equalities monitoring questions were asked of each individual questionnaire respondent. Although most individuals answered these questions not all respondents chose to complete this section of the questionnaire.

From the available completed responses, approximately a third of all individual responses were female (63.8%). Most of the respondents were aged between 30 to 74 years (87.9%).

23.2% of respondents identified themselves as disabled, with physical disability being highlighted as the most frequent disability. The most common religion identified was Christian at 60.3% with 26.7% of participants choosing ‘None’. Predominantly respondents identified themselves as White 92.6%, with 3.5% from Black and Minority Ethnic groups. The majority of respondents were heterosexual (83.5%).

There were a reasonably balanced number of respondents from residents living across the county, with unsurprisingly the highest number of respondents living in Northampton (25.0%)

Full statistics of the responses can be found in Appendix 2.
Appendix 1: Questionnaire Results

The following question was asked on the online questionnaire. Respondents who identified themselves as being an individual were directed the questions designed for individuals (questions 2 – 14 and the equality monitoring questions). Respondents who identified themselves as an organisation / community group were directed to the questions designed for this audience (questions 15 - 24).

1) Are you responding to this questionnaire as an individual or on behalf of an organisation/ community group?

There were 382 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>As an individual</td>
<td>85.60%</td>
</tr>
<tr>
<td>On behalf of an organisation / community group</td>
<td>14.40%</td>
</tr>
</tbody>
</table>

Individual questionnaire responses

2) Prior to this consultation have you heard of Healthwatch Northamptonshire?

There were 318 responses to this question.
3) Have you ever contacted Healthwatch Northamptonshire?

There were 321 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>50.94%</td>
</tr>
<tr>
<td>No</td>
<td>45.60%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>3.46%</td>
</tr>
</tbody>
</table>
4) What was the reason for contacting Healthwatch Northamptonshire?

There were 52 responses to this question.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>To get information and advice about health and care services.</td>
<td>38.46%</td>
<td>20</td>
</tr>
<tr>
<td>To make a complaint or raise a serious issue about a health or care service.</td>
<td>32.69%</td>
<td>17</td>
</tr>
<tr>
<td>To help improve health and care services by sharing my experience and knowledge.</td>
<td>55.77%</td>
<td>29</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>21.15%</td>
<td>11</td>
</tr>
</tbody>
</table>

Other:
- Taking part in research.
- Other.
- Contributed to aspects of communication and surveys, also offered suggestions about the best way to contact the public in general.
- As a volunteer on Healthwatch panels - Adults.
- To include information about Healthwatch in my local parish newsletter. (I am the editor).
- Work related.
- Met at meetings.
- A volunteer.
- I used to be a volunteer for Healthwatch and it's two predecessor organisation for almost ten years.
- Working on collaborative research initiatives.
- Get involved in shaping the service and influence.
5) How would you describe your experience of Healthwatch Northamptonshire?

There were 52 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td>36.54%</td>
</tr>
<tr>
<td>Good</td>
<td>28.85%</td>
</tr>
<tr>
<td>Neither good nor poor</td>
<td>23.08%</td>
</tr>
<tr>
<td>Poor</td>
<td>5.77%</td>
</tr>
<tr>
<td>Very poor</td>
<td>3.85%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1.92%</td>
</tr>
</tbody>
</table>

6) Please provide a reason for your answer and let us know if there is anything Healthwatch Northamptonshire could have done differently to improve your overall experience?

- Very poor quality of research and no response to correspondence with them.
- Staff and volunteers are very helpful and help to point patients in the right direction to get whatever help they need.
- They got back to me very quickly and them I could start volunteering from the next meeting forward.
- Response was quick.
- Listened! They like the CCG, seem to be more concerned with themselves than sharing with the public. I have yet to see any advice or publicity from them in any chemist or doctor’s surgery? My suggestion for an instant response survey after a GP or hospital visit was disregarded. To be honest I stopped engaging with them a couple of years ago. I felt I was wasting my time.
- My only knowledge was a group to be set up as a patient forum by [name] medical.
- The lady I spoke to went above and beyond to provide the answers to my question.
- In my experience Healthwatch Northamptonshire do not seek views of a wide demographic, the information contained in findings is often repeated from other consultations and surveys.
• In all areas that I have had cause to contact them they have provided a constructive response in a reasonable time frame although I sense that sometimes they are constrained by shortage of adequate expertise and resources.

• Healthwatch personnel have a lot of experience, and knowledge of the NHS and the care system. Therefore any input a member of Healthwatch makes to a discussion is based on knowledge and sometimes on personal experience. Healthwatch go out of their way to obtain the views or patients and users by having events in lots of different places.

• The staff were nice enough but there wasn't a lot of constructive advice. I was expecting a phone call back from someone with specialist knowledge but never got it. Instead I was sent an email asking to take part in a research project. I would have instead preferred the help and support I needed. I managed to seek help by going elsewhere.

• The [job title] consultant is still working in this area despite a number of parents complaining. They do not engage with families with disabilities who have a wide experience of health services and hospitals.

• The person I spoke to listened sensitively and explained what would happen to the information I shared.

• I only know about the Health walks.

• Prompt and helpful response. Have the ability to be represented at partner agency groups/boards/forums.

• Uncertain how effective Healthwatch is - what difference does it make to the people of Northamptonshire.

• I volunteered to work for HealthWatch and also received some training. I was very satisfied with the work I was involved in. However with personnel changes contact was lost and I have not done any work for HealthWatch for at least 18 months.

• Volunteer for Healthwatch, did some really good work.

• I thought that my complaint would be followed up but it will be forwarded to the department concerned for information.

• My initial correspondence was apparently 'lost in the system'. I had wanted advice regarding complaints about the ambulance & hospital service that had not been satisfactorily handled. I was eventually told that Healthwatch do not have a complaints service but can give advice and pass details to the correct people. Instead of having a dedicated 'enquiries' email address it would be more beneficial to have a named contact.

• A relative died in a care home having been dropped twice and suffered a broken hip the first time and a broken thigh next, I contacted Healthwatch to no avail.

• Actually helped me deal with the issue, rather than just pass me on to another organisation. I could have done that myself.

• I did not know if, as a result of what I reported to Healthwatch, that they actually did anything.

• They contacted the service concerned direct and supported me through appointments to correct the past service failures to provide me with suitable orthotic equipment (braces).

• Listened to and acted upon effectively.

• We have had excellent engagement with competent knowledgeable individuals who have had a genuine interest in the subject areas and a passion to change health
services. They have been excellent at engaging stakeholders in the process and getting information out to the relevant people.
- They took forever to come back to me and respond
- Gave me the information I needed.
- Able to implement better customer engagement as a meaningful involvement of influencing social care policy with the wider remit and financial resources made available by the NCC local authority.
- The person I spoke to was knowledgeable and helpful and supportive

7) Using a scale of 1 to 5, where 1 is ‘Least preferred’ and 5 is ‘Most preferred’, how would you prefer to share your experiences of health and care services or report concerns?

There were 270 responses to this question.

Using a scale of 1 - 5, where 1 is ‘Least preferred’ and 5 is ‘Most preferred’, how would you prefer to share your experiences of health and care services or report concerns?

<table>
<thead>
<tr>
<th>Method of Sharing</th>
<th>Least preferred</th>
<th>Most preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organised events</td>
<td>21.46%</td>
<td>33.20%</td>
</tr>
<tr>
<td>Confidential telephone line</td>
<td>14.98%</td>
<td>18.93%</td>
</tr>
<tr>
<td>Through existing forums or groups I am involved with</td>
<td>46.91%</td>
<td>18.49%</td>
</tr>
<tr>
<td>Postal questionnaires/paper feedback forms</td>
<td>30.86%</td>
<td>18.11%</td>
</tr>
<tr>
<td>Online questionnaires/online feedback</td>
<td>39.74%</td>
<td>32.42%</td>
</tr>
<tr>
<td>Online blogs/forums</td>
<td>31.82%</td>
<td>28.30%</td>
</tr>
<tr>
<td>Social media (for example, Facebook / Twitter)</td>
<td>46.29%</td>
<td>19.75%</td>
</tr>
<tr>
<td>With a health or care professional</td>
<td>48.04%</td>
<td>19.00%</td>
</tr>
<tr>
<td>Other</td>
<td>47.62%</td>
<td>18.50%</td>
</tr>
</tbody>
</table>

Scale from ‘Least’ to ‘Most’ preferred and ‘Don’t know’

<table>
<thead>
<tr>
<th>Method of Sharing</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Don’t know</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organised events</td>
<td>33.20%</td>
<td>12.15%</td>
<td>21.46%</td>
<td>14.98%</td>
<td>14.17%</td>
<td>4.05%</td>
<td>247</td>
</tr>
<tr>
<td>Confidential telephone line</td>
<td>17.70%</td>
<td>10.29%</td>
<td>18.93%</td>
<td>18.11%</td>
<td>30.86%</td>
<td>4.12%</td>
<td>243</td>
</tr>
<tr>
<td>Through existing forums or groups I am involved with</td>
<td>23.53%</td>
<td>11.76%</td>
<td>18.49%</td>
<td>15.97%</td>
<td>19.75%</td>
<td>10.50%</td>
<td>238</td>
</tr>
<tr>
<td>Postal questionnaires/paper feedback forms</td>
<td>24.40%</td>
<td>9.20%</td>
<td>16.80%</td>
<td>24.00%</td>
<td>22.40%</td>
<td>3.20%</td>
<td>250</td>
</tr>
<tr>
<td>Online questionnaires/online feedback</td>
<td>3.97%</td>
<td>3.17%</td>
<td>9.13%</td>
<td>24.60%</td>
<td>57.14%</td>
<td>4.12%</td>
<td>238</td>
</tr>
<tr>
<td>Online blogs/forums</td>
<td>40.42%</td>
<td>16.67%</td>
<td>15.00%</td>
<td>12.92%</td>
<td>9.17%</td>
<td>5.83%</td>
<td>240</td>
</tr>
</tbody>
</table>
Engagement, Participation and Involvement Team, Bi&PM

Social media (for example, Facebook / Twitter)
- 48.55% 117 9.96% 24 11.20% 27 11.20% 27 15.35% 37 3.73% 9 241 2.32
With a health or care professional
- 12.15% 30 7.29% 18 20.65% 51 23.08% 57 31.58% 78 5.26% 13 247 3.58
Other
- 22.12% 25 1.77% 2 5.31% 6 2.65% 3 6.19% 7 61.95% 70 113 2.19

Other:
- Email (2)
- Depending upon reasons why feedback is being asked for in the first place...meaning, it’s useless expressing concerns/experiences if it is just for a tick boxing process. I have done many of these so called reports...to date had very little feedback.
- Letter writing about specific concern.
- Instant tick box survey after hospital/GP visit, placed into a feedback box in every GP surgery and NHS establishment.
- Email or letter direct to the service or a PALS organisation.
- By letter. Questionnaires don’t always contain the concerns one has and the answers are restrictive.
- Need to consult from not just current users but people who are healthy but will want to access the service.
- Confidential postal address to write to, and confidential email address to write to.
- Some people do not have computers who would benefit from following HW.
- An overarching standards watchdog should be available to all. Of health, maybe. So that where people have concerns about the received standard of care, or response to need, these can be reported and ACTED UPON.
- It’s all too late now!

8) Do you think Healthwatch Northamptonshire could improve awareness of its services to local people?

There were 264 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>78.41%</td>
</tr>
<tr>
<td>No</td>
<td>3.03%</td>
</tr>
</tbody>
</table>

Do you think Healthwatch Northamptonshire could improve awareness of its services to local people?
If you answered ‘Yes’, how do you think Healthwatch Northamptonshire could improve awareness of its services to local people?

- Share information better.
- I don’t know how they should do it, but as I hadn't heard of them, they obviously need to raise their profile!
- I cannot recall ever hearing of this so there is no advertising of it on any news media.
- Target members of the public and not just the 'usual suspects' who attend voluntary sector groups on the county.
- Work with councillors so that they understand the Healthwatch function and point their constituents towards Healthwatch when appropriate. More use of social media generally as this is the way to go.
- Media.
- Through social media.
- I have never heard of them, so I think pretty much anything they did would be an improvement. It's not hard - Facebook ads are cheap and highly targetable, for example. I've never even seen a poster in the GP surgery.
- Not sure how though - more media marketing; perhaps by people being given info leaflets when leaving surgeries/hospital etc.
- More grass roots advertising...prolific word of mouth needed...social media overdrive. Now the [name] CCG is are in such a mess...I should think Healthwatch organisation is more important that ever. After all health and care services are thin on the ground and so very difficult to access.
- Facebook, Doctor's surgeries, Libraries, Council offices, Mailing out to all people over 60, TV campaign, County Council to promote through advertising on Council tax forms, Flyers through doors.
- Information could be sent to GP’s for them to give to patients in a "friendly form - not too many technical terms", so patients could understand them.
- I only knew about Healthwatch by going to SEND events such as 20:20 vision. I don’t see any posters or leaflets about them in places such as libraries etc. Maybe marketing it a bit more would let people know what they do.
- Needs to more leaflets in local GP surgeries. Adverts in the local paper and key locations such as the library, bus and train stations.
- Greater presence in the communities and within Northamptonshire.
- Via doctor surgery/ Patient Participation groups/hospital notices.
- Deploying information through Parish Councils / Parish Newsletters.
- Via social media as it seems the most used to find out about services etc.
- More media coverage to share what they have achieved, what they are currently involved with and what particular demographic are they wanting to involve.
- I haven't heard of you - is quite hard tho cos I don't facebook, don't take newspapers etc. Guess people likely to be looking for something like this when they have a heath contact - so poss e.g. poster on wall in Dr waiting room, poster in local library, in local town guides / newsletters.
- I'd never heard of them so they need a greater presence, mail shot perhaps?
- Well until I had an assembly on it I was aware it existed so it could definitely be promoted more.
- More advertising.
• Full or half page advert in local papers.
• Better PR.
• Employ a good PR person.
• Don’t understand quite why it exists. I would have thought it was up to the local NHS group to carry out these surveys leaving the Council to concentrate resources on Council business.
• Need of more staff to attend events to share/spread information.
• Inclusion of information in local free papers and directories. Information at surgeries - this may be available, but, fortunately for me, I have been an infrequent visitor to my surgery recently, and have never seen anything.
• Yes if you consider people's opinions.
• Start making an effort and leave their offices to visit GP surgeries and enlist patients in providing direct feedback. Much more publicity, in every NHS establishment, chemist, GP surgery and Library.
• More information available in places run by the council, e.g. posters etc.
• Through leafleting, posters, social media, local radio programmes etc.
• Posters in surgeries.
• Leaflets at health providers and to staff of local services. Social media information.
• Notices in surgeries. Online blogs covering topics of concern, action plans, reports on progress.
• Send out emails to all their patients and put up the details on Facebook.
• Hadn’t heard of it before this survey so don’t know what they do.
• Surgeries, [name] and possibly Social Services separately provide a system for Patient input e.g., Friends & Family survey so you need to make it clear where you fit into the existing methods of contact. Any contact from members of the public using these services should be aimed at improving the service in addition to handling complaints. E.g., It would be helpful and reduce non attendance at the [name] clinics if they provided a text reminder for appointments similar to the system provided by our local Surgery.
• I had never heard of it before suggesting that awareness publicity is required.
• Having not heard of it before, I think it should be publicised in all Doctors surgeries, Dentists, Opticians and Pharmacies.
• By publicising themselves in GP surgeries. A simple handout would be enough. Letter box drop, obviously dependant on cost.
• We were unaware of your existence up to now.
• By sending communications to public who expressed interest those who are answering your questionnaire.
• Advertise at local health care providers so patients and families know who to contact and the role of Health Watch.
• Signs in medical areas.
• Postal leaflets.
• Social media advertising. Posters up in GP surgeries, hospitals etc. Pamphlets in waiting areas, particularly for those without internet access.
• Having never heard of Healthwatch Northamptonshire before I can’t say for certain how you can improve awareness. Perhaps local radio advertisements, or posters/leaflets/flyers in doctors/dentist/hospital waiting rooms. I wouldn’t necessarily recommend social media as it is all too easy to ignore ads.
• I think when there is a change in practice or offer, people need to be informed in many different ways e.g. local radio, social media, in schools and family centres.
• This is the first I've heard of it. Perhaps putting information in libraries or GP surgeries?
• Via local radio at different times of day, clearer advertising at doctors surgeries, any health care facilities etc. Senior schools, sporting facilities and local newspapers / online news.
• Leaflets/social media/info in surgeries.
• I had not heard of Health Watch Northamptonshire until I was involved in the health and wellbeing forums and development days for the health and wellbeing board.
• Social Media Campaigns / advertisements via GP's.
• I don't know the facilities available to Healthwatch Northamptonshire but I, and a lot of people I have spoken to have never heard of them. The only sure way of reaching everyone is by a leaflet through the door because: Not everyone visits their Doctor’s surgery regularly or even every year. Not everyone has a social media account. Not everyone has or is familiar with computers. Not everyone reads a newspaper regularly.
• Social media presence and around doctors/hospital.
• More awareness through publicity.
• I only heard of it at meeting re Corby Urgent Care.
• Mail shot. Leaflets in Doctor's surgery's if you’re deemed ill enough to go to the surgery. Any other Health waiting room.
• Use social media doctors surgeries etc.
• More organised events.
• By ensuring that local people know of its availability and expertise.
• Wider co working with already established forums and groups e.g. NPFG for issues relating to patent/ caters of disabled children, LDPB for LD feedback hospital PALS and Northamptonshire carers for example.
• Not only through surgeries but through direct contact inc schools, parish councils, WIs and other organised groups. Not only in the towns but across the villages.
• It’s always possible to do more perhaps using free newspapers, libraries, GP surgeries where not already being promoted. The challenge is getting the target audience to read / listen.
• Am not aware of what it does. So local ad campaign leaflet drop or event locally say in Corby Cube or town centre.
• Until a problem, within my local area had arisen, I was unaware of Healthwatch.
• Articles in local press and information posted to local social-media groups.
• Fund [name]
• I was not aware of it until last week. I don't read the local press, rarely visit my doctor and, presumably, these are the places that Healthwatch Northamptonshire can access easily.
• But only if it had more money to invest in this activity, it has too little at the moment and does well with what it has.
• Social Media is a good start. It's how I heard about you. Link into important local events. Maybe a page linking other social media platforms.
• More advertising more posters.
• Promoting itself more.
• Advertise.... I didn't know it existed.
• More publicity.
• More written information available either by leaflet at certain locations or by media, social or otherwise.
• I have never heard of them. Do they have leaflets in doctor’s surgeries? In hospitals? They need to re-think how they publicise their services and their achievements.
• If it had more staff, then it could cover more events and visit more places.
• Have a greater physical presence within communities. Attend community events and talk to people. This may help avoid the ‘same old’ demographic getting their voices heard on such forums.
• Engage with existing parent groups and forum in the local disability network.
• But I imagine that it is rather challenging with a limited budget [website link] I have noticed that they have been at more diverse community events this last few months and their social media seems to be more active.
• More info via [name].
• Better awareness and knowledge of when and how they should be used.
• I have never heard of it, although I have only lived here for 8 months. Leaflet drop is probably the best option.
• I have picked up leaflets at the hospital, Age UK and Carers meetings but have never seen anything from Healthwatch.
• It is a largely invisible entity and has seemingly focused on niche concerns or agendas rather than health care per se.
• Explaining your services in Doctors and Schools area.
• More information leaflets, particularly in Health Centres and Libraries.
• If it had the resources to attend more public events. It already does as much as possible.
• Road shows may help across the county on a regular basis. Leaflet drop available in all health and social care premises and given out at appointments.
• Not sure.
• Better use of statistical data via local press.
• Direct letter drop to each household. Use of local media i.e. Streetwatch. Neighbourhood Watch etc.
• Social Media. Through partnership working.
• Greater publicity for instance at GP practices, on the radio, contact PPT Chairs to spread the word.
• Have a clear focused purpose.
• Yes, because I am not very aware of them.
• Well for a start what do you do? Who is involved and how might it assist me or anyone else?
• Provide more information in borough council and library locations.
• My [relative] is disabled. Has Learning disabilities and has been treated appallingly by the care services both by the NHS in a hospital environment and by the so called daily Care Services they should receive as a disabled patron.
• People are aware of Healthwatch, but not enough. I think there should be a one off leaflet drop in all households across the county.
• It is simply not advertised enough and a very large percentage of population (usually the people that most need it) do not know anything about it.
• Raising awareness locally of your service, I work for the NHs and am a school governor and the first I had heard of you was when I was asked to complete this survey.
• I do not know anything about Healthwatch and have had to use it so have no input.
• Promote the work that it undertakes on an ongoing basis using different approaches.
• Facebook, Twitter, flyers at doctors, library.
• Through better advertising, online, postal services.
• Being more visible.
• Email contact with individuals and a campaign to sign more people up.
• Local Facebook groups and papers?
• By been more known about advertising, its services etc.
• Ongoing PR - I guess not many people know about Healthwatch until they have need of its services.
• Mailshots. Emails to those signed to other council services.
• More information on local websites and in local newspapers. Or on radio Northampton. Posters around the hospitals and GP surgeries.
• I have only come across Healthwatch in a professional setting. I don't remember seeing any Healthwatch publicity locally.
• Through doctors' surgeries and hospitals/clinics noticeboards and leaflet stands.
• A difficult one, since the only local newspaper became a weekly rather than a daily. However, our local and area councils publish a regular newsletter, in order to inform us all of what a fantastic job they are doing on behalf of our interests. These organs are regularly posted through every letterbox in the County, as far as I am aware, so it wouldn't be too difficult to arrange for a supplement to be included, blowing a trumpet for Healthwatch.
• Social media.
• More information online, more publication in local papers and information in chemists and community centres, libraries and doctors. The reason I say chemists is that most people pop into the chemist but not as many visit the doctors.
• It needs to more out there, I found it by chance on the web.
• By leaflets and posters in doctors waiting rooms.
• By making the information more readily available through local free papers/magazines, doctors surgeries, etc.
• There are lots of relatively cheap e-communication channels available. Examples: email shots, communicate via the local parish council (which have a variety of communication channels themselves); add a few words to text message doctor's appointment test messages, ditto dentist appointments, ditto other local government texting services, add a small section to the local trade/social magazines that get delivered to homes.
• By having a team of independent people visiting local people on a regular basis to check how they are healthwise.
• I only found out that Healthwatch existed because of a relative working at the University where they are based, postal leaflets, leaflets in waiting rooms, social media.
• Distribute with rate bills.
• More advertising e.g. Leaflets.
• Letting people know it's there. Using The Voice, [name] quarterly magazine. Parish magazines, posters, flyers in community centres etc.
• There appears to be less awareness of Healthwatch than its predecessor Northamptonshire Link.
• Most people have not heard of it. Maybe if HW did more to resolve issues it would become more well known. As it just passes people on, it will not have the right reputation.
• Publish information or leaflets in public areas of hospitals, surgeries etc.
• Be more open very few people have ever heard of them.
• GP surgeries plus GP websites, Hospital out patient clinics and wards _- leaflets posters.
• Since I’ve never heard of it then anything would be an improvement! Articles in local free papers? (I.e. Not in council 'glossys" that come through my door and into the bin).
• But I don't think awareness of their services is necessarily the issue. It’s how effective they are in challenging those in power.
• I work for a GP surgery and I have never heard of you. So poor advertising.
• Exhibitions/displays in local centres.
• Spend more time with information stands at public events and in areas where services are provided.
• Healthwatch since its inception has been under constant financial pressure with funds being changed & withdrawn because of current financing from NCC & Local government priorities. Local government should encourage public knowledge & involvement by regular advertising in all local government literature, paperwork sent out to all county residents, businesses, voluntary organisations etc.
• Through local media radio TV.
• They should advertise more and do more events.
• Never heard of it!
• Hardly ever hear about the work of Healthwatch, its staff are rarely encountered and so its knowledge may not be representative as it does not appear to have a meaningful connection to services.
• People have heard of Healthwatch but appear not to know what it is and what it does.
• Info via GPs, Chemists, Schools, Libraries etc.
• Coz nobody I know has heard of you.
• Better advertising in other formats such as advert in local paper or radio.
• More advertising and how they can contact you.
• Maybe social media.
• There is always more work to be done and new and creative ways of achieving this - we need to work together to achieve this.
• Haven't heard of it till Parish Council told me.
• Market it, people do not know you exist.
• Make people more aware by advertising more especially in medical centres hospitals etc.
• Many older people have not heard of Healthwatch and similar services.
• Awareness of who they are and what they do. More visits to local groups especially Seldom Heard.
• I have attended their stands but still don't know what they do for complaints I would go to the NHS complaints advocacy not Healthwatch.
Yes. However it would need more funding to a) advertise and market itself more and b) to manage additional enquiries etc.

Because the main hospitals are in Kettering and Northampton there is a focus on services there. Maybe a bigger spread across the county.

Because I have never heard of it until now.

More publicity - posters etc.

I have no idea. But since I have never heard of them before, "yes" is the only possible answer!

Leaflets should go out with all social care documentation either by email or handed to them by a social care representative.

I know nothing about the service.

9) The following is a list of the different services that Healthwatch Northamptonshire is expected to provide. Using a scale of 1 to 5, where 1 is ‘Least value’ and 5 is ‘Most value’, which of these would be of most value to you?

There were 254 responses to this question.

<table>
<thead>
<tr>
<th>Service</th>
<th>Least value</th>
<th>Most value</th>
<th>Don't know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td>3.66%</td>
<td>9</td>
<td>4.07%</td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td>2.83%</td>
<td>7</td>
<td>2.83%</td>
</tr>
</tbody>
</table>
services and use these to influence and improve services. Support people to give feedback on local health and social care services. Provide ways for local people to monitor the quality of local health and care services. Where concerns have been raised, make recommendations to national organisations for investigation or special review. Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.

10) Do you feel there is anything that Healthwatch should be doing that is missing from the above list?

There were 246 responses to this question.

![Bar Graph](image)

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>21.95%</td>
</tr>
<tr>
<td>No</td>
<td>34.96%</td>
</tr>
<tr>
<td>Don't know</td>
<td>43.09%</td>
</tr>
</tbody>
</table>

If you answered ‘Yes’, please tell us what else should be included:

- I do not understand why people cannot get to see a Doctor when needed, having to book an appointment week/s in advance, it as if we have to plan to be ill, and when people book an appointment online they gets a call from Doctors receptionist asking why they have booked this appointment, What?
• Carry out follow-ups to any investigations to ensure any learning has been embedded in the health care/social care organisations concerned. Provide advocacy services as appropriate.
• Aid in dispute resolution with individual healthcare providers.
• General public should be voted on to boards of the NHS or have regional NHS boards. Patient participation groups should be encouraged and a cross selection of the public of all ages should be voted on to give a proper representation of how people are experiencing the services.
• Risk assessments should be done regarding the impact of services on BAME communities to ensure people from diverse backgrounds engage in services provided.
• Mentoring service for people trying to gain access to health services.
• Empower and support people to complain about poor services.
• They all sound like versions of the same thing. Seems to me it’s about providing ways for local people to monitor quality. All the others are aspects of this. Health info is already being done via First for wellbeing; libraries, Drs etc. Quality control is your USP.
• Does Healthwatch work with Patient Reference Groups in local GP surgeries?
• Carry out random, unannounced checks on hospital wards and Home Care services.
• Challenge the CCG when they complain about patients using the wrong services and MAKE the CCG responsible for failing to manage their own services. The CCG ignore the public and refuse to engage, so Healthwatch need to hold them to account. When did they last have a stall on the market in every town in the county to advertise themselves?
• Draw up and publicise an action plan to address local issues.
• Monitor how many ACTIVE patients there are to each doctor. Not just names on the register but actual people requiring attention. We cannot see our doctors for 6 weeks and the service is abominable. You should look into the issue.
• The [name of hospital] and Surgeries are subject to regular inspections and members of the public should be represented providing the representatives have a reasonable knowledge of how these services operate and experience to make helpful recommendations.
• Do you have any influence on the drugs allowed to be prescribed by GPs?
• Regular checks on patients on regular prescriptions that they are being taken without hoarding the same and not using them.
• How is Healthwatch making a difference at the Northamptonshire H&W board and taking the views as detailed above to the board and feeding back the outcomes?
• Talking to elderly people who do not use the internet and get confused by telephone surveys.
• Oppose the reorganisation of the Community/District Nursing service which is not as good as it was as Northampton has been divided into North, South, East and West so you don’t get Nurses from your own Surgery or even qualified nurses. There is now no continuity in care or even quality care.
• Info and support- website is poor links are outdated.
• Being aware and sharing decisions made at a local level, i.e. Urgent Care Centre in Corby.
• Promote themselves and what they can achieve on behalf of the local population if the NCC and local CCGs will allow them to.
• Help more to improve local services.
• Helping fight Corby UCC to stay open.
• It should offer the following services: complaints; advocacy; signposting; and the inspection of health and social care services.
• Tell us more about who you are. Once upon a time we had the NHS and that was it. There are now so many affiliates’ bodies it's hard to know who they all are. CCG lakeside+ I understand, not sure where you come in.
• Publish what it is doing.
• Working with health services to highlight issues around health and learning disabilities. Also the health of unpaid carers.
• If problems do occur make sure that the cases are fully and properly investigated and, if appropriate, those at fault are brought to account.
• Work with local Councils, Red Cross, Acre, Carers.
• Advertising their services to the wider public so that they are aware that they can raise issues and or concerns safely, people sometimes don't want to raise issues with the care provider.
• Monitoring provision.
• The lack of Help and the needs of the disabled and Venerable in less accessible areas i.e. smaller towns and villages not so easily accessed.
• Make more supervisory role procedures to monitor existing care that is carried out.
• Consult more and more widely. Despite being on your panel I cannot recall ever having received a communication from them.
• Drop the pointless 15 steps as it is non productive and be more pro-active in their work.
• Use some appropriate punctuation when posing questions in on line questionnaires. E.g. the first question above would be much easier to understand if a comma were to be placed between the words "information" and "and". The question as it stands could refer to your organisation providing both information and support people!
• They need to have an Ombudsman role to nudge statutory bodies in the right way.
• Point out trend of local health which are different from the national trends.
• Monitoring care in users private home and helping monitor worker training standards.
• Deal with issues. Not just pass them on.
• Make the public awareness that they exist.
• Provide proper feedback on what the public said and how it has had real influence.
• They should be providing powerful, challenging and independent advocacy for both individuals and groups with concerns about health and social care provision. They should also have adequate resources to undertake detailed investigations in local health issues/concerns. Their funding should be guaranteed for at least five years so there can be no political interference in their work or fear that by being critical of those in powerful positions that their funding will be adversely affected.
• Healthwatch should be carrying out follow up visits once a service or care home has been inspected, and I believe they should be carrying out far more than they currently are, you could not say they have gone into a number of care homes equal to the number they did not visit for example.
• Prevail on NCC to provide realistic funding for you.
• Working more closely with families with disabled members.
• Monitor the effectiveness of mental health support.
Not aware it has ever changed anything - so anything would be good.
More public advertising.
Work more with complementary therapy groups to take the pressure off the NHS and save them money.
Publicising its existence.
The ability to advocate and manage complaints.
Be able to have direct influence on how services are run if people feel these services are failing.
Provide a well publicised and approachable means of contact.

11) Using a scale of 1 to 5, where 1 is ‘not at all important’ and 5 is ‘very important’, how important are each of the following to ensure an effective, local Healthwatch?

There were 242 responses to this question.

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<thead>
<tr>
<th>Feature</th>
<th>Not at all important</th>
<th>Very important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well known and trusted in local communities.</td>
<td>0.84% 2 1.27% 3</td>
<td>8.02% 19 16.03% 38</td>
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<tr>
<td>Works positively and in partnership with local people and commissioners.</td>
<td>0.42% 1 0.84% 2</td>
<td>6.75% 16 17.30% 41</td>
</tr>
<tr>
<td>Reaches out to individuals and groups who find it difficult to express and communicate their views and choices.</td>
<td>0.42% 1 0.42% 1</td>
<td>5.49% 13 16.88% 40</td>
</tr>
</tbody>
</table>
Works closely with other local organisations for mutual benefit.

An active organisation which is recognised as a statutory route for patients and the public to express their views.

Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues.

Demonstrates that it can get things done and get things changed for the better.

Is able to influence decision makers.

Has local knowledge and relationships and is able to reach out to individuals and groups across Northamptonshire.

Is seen as independent from health and social care planners/commissioners/ providers.

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<td>72.57%</td>
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<td>237</td>
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<td>4.57</td>
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11a) If you feel there is anything missing from the above list, please tell us below:

- It should be independent, not just 'seen' as independent.
- The funding should be through a user led group not a bunch of ex health and social care pros.
- Is listened to and respected by professionals.
- Too many options, makes too diluted and fuzzy. Anything else is part of the methodology to do the above.
- Can't be independent as commissioners hold their purse strings.
- VISIBILITY!!
- How does HealthWatch demonstrate accountability and governance if it is independent from commissioners?
- Resources; at the moment the Healthwatch service is under funded to deliver a top quality service.
- These statements are all very well when written like this but it does not work sadly like it as we all know how matter how much you try. Too many (OLD SCHOOL) social workers! Can’t change there ways and sadly influence a lot of todays decision makers into making bad calls...... All of the above sounds wonderful, if only there were such a team.
- Some of the existing procedures are inadequate, needs to set the bare higher at the onset.
- Well known, see in the local communities via stalls. Awareness days. Leaflets in local community centres. Media attention on success stories, accomplishments.
- Sadly none of the above very important points appear to be followed by the [name] Branch.
- It should not be seen, or actually be in, the "pockets" of NHS or local authority finders. It must be vigorously independent and challenging.
- It is essential they are independently funded by the government to ensure and demonstrate impartiality.
- Doesn't have meetings for meetings sake, and doesn't duplicate work of what seems to be numerous health monitoring bodies.
• Must be demonstrably independent of commissioners and providers and prepared to challenge them.
• As never heard of you I have no idea of any of the above.
• Effectiveness, I suggest, is mainly a function of clarity of function - how well its role is understood by its clients. So that role should be spelt out in simple concrete terms and avoid good-sounding but vague generalisations.

12) Do you have any other comments you would like to make about Healthwatch Northamptonshire?
• No. (14)
• As I cannot recall ever hearing of this before, you need to be more up front, advertise!
• Healthwatch needs sufficient funding so that it can employ paid staff to carry out its work and organise volunteers. It should not be put in a position such that only volunteers are used. It is vital that it is independent from NCC and NHS organisations and can hold them all to account and decides its own programme of work.
• Can Healthwatch England give advice on areas that have done well? Does the make up of Healthwatch represent equality act discrim groups? Does CQC rate them locally? What contract monitoring has the commissioners undertaken? Could they influence individual patient action plans for the prevention of hospital admission? Plans where GPs trust self assessment for urineninfectins and patient can immediately take obtain anti bios?
• It feels like this thing has been there because it has to be, but has been kept as quiet as possible so that local people don't actually use it to raise concerns about issues. Once again I would guess that it is underfunded and understaffed like every other service that NCC have anything to do with.
• Pleased it is still functioning at a level that's accessible.
• To be kept informed of progress the commissioning Healthwatch is achieving and to keep GP's informed.
• I would like to see more promotion of how to get involved with Healthwatch Northamptonshire.
• Great organisation but need to do more with regards to families.
• Really haven't come across you so can't say, if you're worth commissioning. Poss better to give the money to direct practitioners - e.g. local Docs, hospitals etc. All have to have transparency and complaint processes anyway (power of social media and media) processes and there are patient groups locally. Not sure another organisation is worth it and may just add to the overwhelmingness of 'choice'.
• I think raising awareness will definitely get people to contact Healthwatch more.
• It needs to have teeth and not be beholden to local services and not be a fraud to be critical also needs to determine if it has a place as several other organisations do the same job needs to have complaints advocacy role.
• Healthwatch is a very useful tool for the community so funding needs to be appropriate as to the work they cover.
• Although I have met [name] of Healthwatch Northants, I am not really aware of how much influence Healthwatch have had in the past, with the way the CCG functions in delivery of healthcare services.
The very frequent changes of personnel the CCG have fielded in Communication events during the past few years, makes one wonder if anyone really takes any notice of information given by members of the public, either in singular surveys like this, or more corporate events. These events, several of which I have attended, have often felt very positive, but then there is no follow up, to indicate the outcomes of information given by participants on the day. Will a new revamped Healthwatch have a more open contact strategy, so the average member of the public feels free to ask questions. I am aware of some people who received telephone calls, apparently from Healthwatch, asking questions without making the participants fully aware of who or what they are. So transparency in communication is vitally important.

Does your remit include [name].

Profoundly disappointing overall, self-serving and ineffectual, too concerned with talking to themselves and the CCG/NCC and ignoring the public. Condescending and patronising towards the public and forgetting that they are paid for by us. Presumably a spineless and invisible organisation, who are ineffectual, IS EXACTLY what the DoH and the govt. wanted.

Unfortunately under the current leadership I feel it fails to achieve all the sound objectives overleaf. There appears to be a lack of connectivity and ability to actively engage as a partner organisation. The comment reflects the style of the senior leader not the Board nor the key staff.

This is the first indication that I have had that such an organisation actually exists and I am pretty certain that I am not unique in this.

Investigate why our surgery [name] is so dreadful in being able to get an appointment. Their service is disgusting.

Only to push their profile more so that people know they are there and understand what they stand for.

Let the general public be made aware of your existence and give feedback to any of their concerns raised.

It's Very important that Healthwatch do manage and understand the situations that does concerns patients.

Not at this point - thank you

Would like to know more about it.

A valuable organisation and long may it continue.

Need to listen to the people using or needing the services available and not the people who sit on the board of directors or committees who are in such positions that they will not need the services of the board / committee they are on.

Keep people informed and keep our local NHS services alive.

Despite having worked in both the NHS and public sector, I'm not actually sure what health watch have achieved to date.

Perhaps consider the leaflet delivery so you have at least tried your best to reach and inform everyone.

The Corby UCC needs support & funding to stay open. Corby is by far the second largest town in Northamptonshire & is growing. We need this facility If not a new hospital with its own A & E department.

Something to be done about the of of services at Doctor's Surgeries. i.e. A month wait to see a diabetic nurse, no ear syringing, no ulcer dressings, no blood taken, 5 minute appointments and are given a slip to say one can only discuss one thing, Doctor’s very, very rarely visit. Why do Doctor’s and Nurses refer wheel chair bound
people to Ambulatory Care when it says on the NGH web site it is for people that are mobile?

- DO NOT LET CCG CLOSE OR LOWER THE LEVEL OF CORBY UCC. MAKE CCG PAY THE CORRECT TARIFF FOR THE SERVICES PROVIDED. Corby UCC is vital to the future of Corby and surrounding areas.

- In my experience Healthwatch Northamptonshire is a waste of public money, there are established local groups that with extra support could provide the info/ support and feedback required. NCC also has an engagement and participation team with knowledge and experience of the social care / healthcare world so having another agency piggybacking is like paying for the same responses twice! Bringing together the good networks already in Northamptonshire is what's needed.

- The current situation at Urgent Care Centre in Corby has highlighted the challenges facing decision makers and the lack of public awareness. If Healthwatch is meant to be the link then it has responded very late in the day.

- I'm very concerned that Healthwatch is funded from the Government via NCC and the NCC can be allowed to divert off the central funding provided into other uses and thereby underfund Healthwatch and so curtail it from being critical of local NCC provided services. Healthwatch is not sufficiently independent of the NCC.

- I am extremely concerned about the situation regarding Corby UCC and hope that Healthwatch are doing everything in their power to save this facility. It is essential to the peopled Corby and surrounding areas.

- Adequately fund the UCC in Corby.

- Just that I don't really know a lot about you. Aid heard the name bit not sure what your remit is. That said, from the questionnaire I'm guessing a voice for public regarding our local health care.

- Healthwatch does a good job. It is essential that there is an independent body like Healthwatch to monitor outcomes and campaigning for improvement in services where these are found to be either faulty or missing.

- Needs to be respected by the medical profession and nursing.

- My contact and experience with Healthwatch Northamptonshire has been very positive.

- No idea what it does!

- Healthwatch needs to lobby for a greater provision/funding for front line mental health charities as demand is going up and spend is not reaching those working with clients particularly in the voluntary sector.

- Inform us where we can get details about this organisation.

- As in my previous comments too many (Old School) are still make decisions. Whilst there experience is obviously of value they can be set in there ways. I am an older [relative] and am appalled at the treatment or lack of the Care Services my [relative] is getting at the moment. In my opinion Northamptonshire is one of the worst I have read about in this country let alone experienced!! and I have lived in this same house since moving here from [place] for 40 years ago and raised 3 children in Northants.

- The profile of Healthwatch needs to be promoted more widely and on an on going basis.

- Some of my own experiences with the NHS have been horrendous which I have been lucky to survive. I am now left with the prospect of being frightened to go to the hospital even if my life depended on it. Consequently I feel that we need ongoing
supervisory of the existing procedures which I feel that Healthwatch could be of valuable assistance.

- Make more of an effort to connect to the local communities, you are too remote and detached. If I have not heard of you why would I trust you?
- Healthwatch MUST be far more pro-active and have very active and inquisitive people, not just elderly volunteers. Sorry, but they are our only insight to how a hospital is doing. At [name], they did nothing to indicate that the hospital was so bad and would end in in the state it is now.
- Unless Healthwatch Northamptonshire can actually make a difference to health provision, then it’s just another useless layer of bureaucracy. Therefore it will probably need teeth, enabling the enforcement of change where change is seen to be required.
- I think that the point about independence is paramount for local people to trust the organisation.
- Any person who can not communicate because of a disability or syndrome be them old or young should have a person who gets to know them and visits on a regular basis to make sure they are being cared for properly, are accessing the local community and living full and meaningful lives. This person should be like a guardian.
- Please send me more information relating to Healthwatch locally and nationwide.
- I was very active within Northamptonshire Link and was very disappointed with the way Healthwatch was created, the time and resources wasted re-inventing the wheel was scandalous.
- Will there be any funding from 2018 onwards?
- They should be much more engaged with the public and not just a club for their own amusement.
- I was asked to complete this survey by one of my patient panel members and I still have no idea of who you are and what you do. Which is feel is very poor if you are offering a service to the public to help support the wellbeing of people’s health.
- They have already advised N.C.C. it is unlikely they will be able to fulfil their statutory duties due to inadequate funding thus having insufficient staff to write reports, even though the volunteer members were willing and able to carry them out.
- I would like to see you more in Kettering and let us know where you will be.
- As currently managed and configured it is hard to understand the value that is being added. Perhaps consideration should be given to an alternative model that would better engage with the Councils and local people’s priorities?
- We have a very good Healthwatch which is an asset to our local health economy.
- Be more public about yourselves and what you do. I’ve no idea what you do.
- If it wasn’t for my work role, I would know nothing about Healthwatch, they need to be promoting in G.P surgeries and places such as older people services. If you randomly asked people in the street what they know about Healthwatch, I imagine the percentage would be very low.
- Healthwatch Northamptonshire is a statutory role which should be properly funded. Continually cutting the budget will lead to poor service and will ultimately be a waste of public funds. The voice of local people needs to be properly heard by the decision makers, providers and commissioners of health and social care. A truly independent, properly resourced Healthwatch enables this to happen. Without a local voice
patient involvement would be poor and we could be another Mid Staffs waiting to happen!

- All of these objectives are motherhood and apple pie - who could possibly object to them? But how does this relate to all the other systems and lobby groups and charities who have a finger in the pie? For example, helping people find the best health and care services - is that not the job of the GP and medical practices? It feels like layers and layers of organisation eating up public money and individual effort that should be directed at primary services; and confusing people as to who does what. But on the other hand, if this is a functioning organisation that is actually doing good work and not duplicating what others do, it should be left to get on with it and not threatened with re-commissioning. Staff teams take time to build up and uncertainty is a killer.

- I follow advice issued by: [email contact supplied]

13) Please tell us in what capacity are you completing this questionnaire?

There were 234 responses to this question.

![Bar Chart](chart.png)

<table>
<thead>
<tr>
<th>Capacity</th>
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<tbody>
<tr>
<td>I currently/have used health or social care services in Northamptonshire</td>
<td>68.38%</td>
</tr>
<tr>
<td>I am a friend, relative, or carer of someone who currently/has used health or social care services in Northamptonshire</td>
<td>33.33%</td>
</tr>
<tr>
<td>I am a volunteer with Healthwatch Northamptonshire</td>
<td>2.99%</td>
</tr>
<tr>
<td>I am a volunteer with another organisation</td>
<td>20.94%</td>
</tr>
<tr>
<td>I am an elected Councillor</td>
<td>6.64%</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>11.54%</td>
</tr>
</tbody>
</table>

Other:

- My [relative] has to visit GP surgery every week many times their choice not hers why can't they develop a plan and stick to it?
- I am a member of my local GP's Patient Participation Group, and worked in General Practice for 25 years.
- Other.
- Retired ex NHS worker.
- I am chair of a medical practice Patient Group and a member of a Locality Group. Several years of experience in both. My answers are not necessarily representative of my Patient Group, as they are often reluctant to express views collectively, or even in one to one discussions as they just wish to 'get on' with their normal lives.
- I work for a regulatory body within healthcare.
- Survey arrived in my inbox.
- Borough council employee.
- An interested party.
- Manager of an independent health care provider.
- Past elected County Councillor for [number] years.
- GP patient and chair of local PPG.
- Chair H&W charities.
- I am interested in supporting to improve local services.
- I am a member of the CCG’s Patient Congress and chair a local patient engagement organisation.
- I was a volunteer prior to my current illness [name] and hope to return to active membership of Healthwatch in the early part of 2018.
- I am also a member of my surgery with the patient involvement group.
- Member of Northampton Patient Forum.
- Bog standard patient.
- Commissioner.
- I work for an NHS organisation.
- Parish Council.
- Parish councillor.

14) Which borough or district of Northamptonshire do you live in?

There were 236 responses to this question.

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<tr>
<th>What district / borough of Northamptonshire do you live in?</th>
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<td>Daventry</td>
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<tr>
<td>East Northamptonshire</td>
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<td>Kettering</td>
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<td>Northampton</td>
<td>25.00%</td>
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<tr>
<td>South Northamptonshire</td>
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<tr>
<td>Wellingborough</td>
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<tr>
<td>Other (please state)</td>
<td>1.27%</td>
</tr>
</tbody>
</table>
Other:

- Crick
- Oundle

Organisations / community groups questionnaire responses

15) Please tell us the name of your organisation and your job title/role:

Name of your organisation:

- 6th Daventry Brownies
- Borough Council of Wellingborough (2)
- British Red Cross
- Citizens Advice Daventry and District
- Corby CCG
- Corby VCS Ltd
- CQC
- Crick Medical Practice
- D K & A
- Daventry Fibromyalgia Support Group (2)
- Daventry Volunteer Centre
- Favell Day Services
- Harrington Village Hall Committee
- Home start
- Huntington’s Disease Association
- Kettering General Hospital (2)
- Kingsthorpe Medical Centre
- Mind Wellingborough
- MK Springers
- NC TLC Trust
- ncalc (3)
- Nene CCG (2)
- Northamptonshire Healthcare NHS Foundation Trust (3)
- Northants Association for the Blind
- Northants Hearing Advisory Service
- Service Six
- Shire lodge nursing home
- SNVB
- South Northants County Council
- Sponne School (3)
- Teamwork Trust
- The Lowdown
- The Mounts Medical Centre
- Towcester Area Door to Door
- Vine Community Trust
Your job title / role:
- Administrator
- Brownie Leader
- CEO (3)
- Chairman
- Chief Executive (2)
- Chief Officer
- Clinical chair
- Community Support (2)
- Consultant Project Manager
- Director (4)
- Founder
- Founder / Group Leader (2)
- Head of Learning and Development
- Head of Localities / Communications & Engagement Lead
- Head of Specialist Children’s Services
- Health and Wellbeing Officer
- Healthcare Assistant
- Home manager
- Independent Living Service Manager
- Inspection Manager
- IT and Finance Lead
- Learning Mentor
- Manager (2)
- Patient Advice and Liaison Service
- Patient experience manager
- Practice Manager (2)
- Progress Learning Leader for Year 7
- Project coordinator
- Senior care co-ordinator
- Specialist Adviser
- Student Welfare Manager
- Transformation Manager
- Trustee
- Welfare Officer

16) Prior to this consultation have you heard of Healthwatch Northamptonshire?

There were 49 responses to this question.
There were 41 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td>19.51%</td>
</tr>
<tr>
<td>Good</td>
<td>19.51%</td>
</tr>
<tr>
<td>Neither good nor poor</td>
<td>17.07%</td>
</tr>
<tr>
<td>Poor</td>
<td>2.44%</td>
</tr>
<tr>
<td>Very poor</td>
<td>4.88%</td>
</tr>
<tr>
<td>Not applicable</td>
<td>36.8%</td>
</tr>
</tbody>
</table>

17) How would you describe your experience(s) of working with Healthwatch Northamptonshire?

There were 41 responses to this question.

| Prior to this consultation have you heard of Healthwatch Northamptonshire? |
|-----------------------------|-----------------------------|
| Yes                         | 69.4%                       |
| No                          | 26.5%                       |
| Don’t know                  | 4.1%                        |

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>69.39%</td>
</tr>
<tr>
<td>No</td>
<td>26.53%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>4.08%</td>
</tr>
</tbody>
</table>
18) Please provide a reason for your answer and let us know if there is anything Healthwatch Northamptonshire could do differently to improve the impact of their work with your organisation?

- Healthwatch are always at events for people with learning difficulties and sometimes at events for people with MH - we have had Healthwatch come to our centres to talk to groups of adults with LD and the way they worked was excellent ensuring the individuals voice was heard.
- We support a rural community with an ageing population and Healthwatch came and spoke to them, asking for their opinions and signposting them as appropriate - it was an excellent opportunity conducted in their village and showed the extent to which Healthwatch considered rural isolation and the elderly key parts of the community.
- Attended their meeting at the University which was supposed to be about consultation. It was called to basically "Rubber Stamp" the decisions made by those who are employed in the sector. Such a gathering of all organisations was needed to allow the process to continue.
- Great signposting for the information required.
- Provide access to residents and organisations on information. Disseminate information via sources other than digital, web based or otherwise electronically.
- We do not have much direct communication but it is good to have representation at the Wboro Health and Wellbeing forum. I don't think currently their work has much impact at all on our organisation.
- There is not much direct work but we are now updated with other partners via Healthwatch representation on the Wboro Health & wellbeing forum.
- I have attended a previous health watch seminar.
- Very good line of communication between Healthwatch and our organisation. Always been kept up to date about new developments.
- More frequent visits to organisation would even more support further collaboration, especially including visits to meet some of our beneficiaries.
- I have not had a lot to do with Healthwatch Northamptonshire, but now I have and adult and a child in my group with special needs and 2 elderly parents who are both terminally ill. I wish to find out what more help/assistance these people can receive within the community.
- A representative attends the South Northants Health and Wellbeing forum and always responds to emails.
- I have had one contact with HealthWatch around researching homelessness.
- Responsive.
- My contact with Healthwatch is around signposting people to their services and promoting their information to the local VCS organisations.
- There is not a lot of support for young people suffering with mental health issues.
- When we have worked with Healthwatch on Children and Young People engagement, their work has been exemplary. However, it would be useful if Healthwatch discussed their proposed topics in advance with partners so we could try to synergise work where appropriate.
- Have worked with the young volunteers and [name] and was really impressed by them.
• Provide our organisation with up to date and useful feedback and information.
• Quicker turn around on reports.
• Relationships with Northamptonshire Healthwatch have been generally good although I feel further clarity on their role at the point of interface with organisations could be more helpful.
• They provide really helpful feedback direct from patients that supports CQC in its role as regulator.
• Have met with team members to discuss how Healthwatch can support local health developments. Good attendance at local patient engagement groups. Supporting developments within STP.
• I met with the CEO of HW Northamptonshire at a conference, and thought she had a very good understanding of HW objectives and planning to meet them.
• We underwent an inspection and didn’t received our initial report for over a year. We responded to the report and asked for the report to be amended to reflect that it was now out-of-date, but the report was published anyway.
• We have had no contact from Healthwatch Northamptonshire at this time.

19) Do you think Healthwatch Northamptonshire could improve awareness of its services?

There were 39 responses to this question.

![Bar chart showing responses to the question]

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>58.97%</td>
</tr>
<tr>
<td>No</td>
<td>12.82%</td>
</tr>
<tr>
<td>Don’t know</td>
<td>28.21%</td>
</tr>
</tbody>
</table>

If you answered ‘Yes’, how do you think Healthwatch could improve awareness of its services, both within your organisation and to local people?

• The more information available the better.
• More publicity, more active social media accounts, attend more events.
• Perhaps more info in local publications - not just county council ones - I’m talking about info that people choose to read - Village Connect Parish Magazines etc.
• Twitter and facebook are often inaccessible to older communities.
• Working with ACRE would also be a bonus in our community and having something that addressed the farming communities needs would also be beneficial.
• But doubtful.
• Reach out to organisations working with the community of Northamptonshire but not necessarily based in Northants, for example our club!
• I tend to hear about consultations, but not necessarily the outcomes or any work leading from it.
• I tend to find out about consultations through various networks, but not always the results of any work/findings/results. I would find it a challenge to explain to councillors what H
• I only heard about it from a friend.
• Attend team meeting to promote Healthwatch amongst Practitioners.
• Leaflets to leaders of organisations to pass on to clients.
• Northamptonshire County Council is just a window, you need to have people who will go out and talk to groups and local people. Many people do not have access to information online.
• We are a community project we look after kids with cancers www.nctlctrust.com. We would like to be more aware of your services you offer.
• I understand that Healthwatch is meant to provide advice and information and as the lead provider for the Daventry area I have no idea how they provide that advice, to whom, and why we do not receive any referrals from them.
• More local contact.
• I have no awareness of what you do. Not sure how this can improve.
• I think awareness is reasonably good.
• Everyone in our organisation is aware. I think it is more about raising awareness with the public. They are good at going to community events and libraries, but supermarkets and businesses are the more likely places to find people. Most people that go to libraries and community events are often already engaged in the community.
• All about raising profile in the community.
• As a member of an organisation who works closely with Healthwatch I’m aware of their services but it is important that Healthwatch continue to work with the public to ensure they are aware of how they can support local people in developing their local health services.
• Advertisement. Better engagement with practices.
• Let organisations and individuals have a greater understanding of Healthwatch Northamptonshire so we can use/access the services that are provided.
• Needs to be much more engaged with a communications strategy advocating its value to local communities.

20) The following is a list of the different services that Healthwatch Northamptonshire is expected to provide. Using a scale of 1 to 5, where 1 is ‘Least value’ and 5 is ‘Most value’, which of these are most valuable in helping your organisation to deliver an effective service?

There were 35 responses to this question.
### The following is a list of the different services that Healthwatch Northamptonshire is expected to provide. Using a scale of 1 - 5, where 1 is ‘Least value’ and 5 is ‘Most value’, which of these are most valuable in helping your organisation to deliver

**Least value**

1. Provide information and support people to find the right health and care service.
2. Gather the views of local people on health and care services and use these to influence and improve services.
3. Support people to give feedback on local health and social care services.
4. Provide ways for local people to monitor the quality of local health and care services.
5. Where concerns have been raised, make recommendations to national organisations for investigation or special review.
6. Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.

**Most value**

1. Provide information and support people to find the right health and care service.
2. Gather the views of local people on health and care services and use these to influence and improve services.
3. Support people to give feedback on local health and social care services.
4. Provide ways for local people to monitor the quality of local health and care services.
5. Where concerns have been raised, make recommendations to national organisations for investigation or special review.
6. Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.

### Least value

<table>
<thead>
<tr>
<th>Service</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Don't know</th>
<th>Total</th>
<th>Weighted Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td>2.94%</td>
<td>5.88%</td>
<td>1</td>
<td>0.00%</td>
<td>0</td>
<td>20.59%</td>
<td>22</td>
<td>5.88%</td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td>0.00%</td>
<td>0</td>
<td>2.86%</td>
<td>1</td>
<td>8.57%</td>
<td>3</td>
<td>22.86%</td>
<td>8</td>
</tr>
<tr>
<td>Support people to give feedback on local health and social care services.</td>
<td>0.00%</td>
<td>0</td>
<td>8.57%</td>
<td>3</td>
<td>17.14%</td>
<td>6</td>
<td>25.71%</td>
<td>9</td>
</tr>
<tr>
<td>Provide ways for local people to monitor the quality of local health and care services.</td>
<td>2.86%</td>
<td>1</td>
<td>5.71%</td>
<td>2</td>
<td>28.57%</td>
<td>10</td>
<td>22.86%</td>
<td>8</td>
</tr>
<tr>
<td>Where concerns have been raised, make recommendations to national organisations for investigation or special review.</td>
<td>2.86%</td>
<td>1</td>
<td>2.86%</td>
<td>1</td>
<td>22.86%</td>
<td>8</td>
<td>17.14%</td>
<td>6</td>
</tr>
<tr>
<td>Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.</td>
<td>2.86%</td>
<td>1</td>
<td>2.86%</td>
<td>1</td>
<td>14.29%</td>
<td>5</td>
<td>22.86%</td>
<td>8</td>
</tr>
</tbody>
</table>

### 21) Do you feel there is anything that Healthwatch should be doing that is missing from the above list?
There were 35 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>17.14%</td>
</tr>
<tr>
<td>No</td>
<td>37.14%</td>
</tr>
<tr>
<td>Don't know</td>
<td>45.71%</td>
</tr>
</tbody>
</table>

If you answered ‘Yes’, please tell us what else should be included and the benefits it would make:

- My problem is I see little or no evidence that any of these items are being achieved. One also must question why another body has to do some of these items which the actual provider should be doing in the first place. Basically DUPLICATION of activities.
- Also make recommendations to local organisations not just national.
- Taking the specific example of the district Health and Wellbeing Forum, perhaps some feedback on how the forum could be improved / compare to other forums that Healthwatch representatives attend. But I realize that resources are limited and this is a very specific area of activity!
- I understood the HealthWatch remit also covered providing advice and information, at least that what the HealthWatch service provides in other counties, as some CAB's in other parts of the country provide the health-watch service.
- Your questionnaire doesn't cover all the legal requirements as per the legislation under Section 221(2) of The Local Government and Public Involvement in Health Act 2007, so I don't know who else the county council commission to fulfil these services.
- What does the Legislation say local Healthwatch must do?
- Local Healthwatch are corporate bodies and within the contractual arrangements.
- Made with their local authority must carry out particular activities.
- A lot of the subsequent legislative requirements are based on these activities which include: 1 promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services. 2 enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved; 3 obtaining the views of local people regarding their needs for, and experiences of, local care services and
importantly to make these views known; 4 making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England. 5 providing advice and information about access to local care services so choices can be made about local care services; 6 formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England. 7 making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues. 8 providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

- Assist organisations in enabling patient and public involvement to commission services.
- Representation on the Health and Well Being Board is very important.
- Although they are there to take concerns about services up why do we have First for Well Being who will direct patients to the correct services and provide services for them? Yet again we have a duplication of services?

22) What can your organisation do to support the development of Healthwatch Northamptonshire and ensure it has a positive impact on health and care services?

- Any representatives to beat the drum for mental health.
- We work actively with other partner organisations to promote an understanding of health and care in the county, we invite speakers and attend seminars and promote Healthwatch within our organisation.
- WE already have leaflets and information on our noticeboards and the session was very helpful.
- If you have to ask this question then "Healthwatch" has not been listening in the past.
- Share content on SM.
- Provide Healthwatch with up to date information on our services available to people.
- Be able to direct people to its services.
- Understand more about Healthwatch!
- If we are informed of meetings we can attend and bring and share our knowledge and expertise.
- Welcome Healthwatch to visit our organisation, provide access to beneficiaries who can be consulted.
- Have somebody from Healthwatch to talk to our service users possibly.
- I am not sure at this moment in time, however I am willing to discuss it further to find a way forward.
- We can help disseminate publicity (with sufficient notice) to the South Northants population.
- We do a lot of signposting for our families.
- We can provide advice and information on any issue that could improve someone’s health and well being, thereby reducing the impact on health and care services. Through our membership of a national we could contract with the County Council to
provide the advice and information part of the Healthwatch service, as described in Section 221(2) of The Local Government and Public Involvement in Health Act 2007.

- Continue to support.
- Promote Healthwatch developments.
- Ensure that Healthwatch are invited to public engagement and assurance meetings, as well as public events and consultations.
- Keep updated with the latest information and deliver that to students where necessary. Supporting students and their families.
- Dissemination of information.
- Offer to open our meetings and where appropriate, data with them. They were a part of our Young Healthy Minds partnership, and it was very useful.
- Continue to share information relating to patient experience.
- Continue to build better engagement to share information.
- Share views.
- Include Healthwatch in decision making regarding commissioning. Involve at the earliest opportunity.
- I will be arranging to meet the CEO of HW Northamptonshire in the next quarter.
- Invitation to our Patient Groups, greater awareness amongst patients and staff.
- Healthwatch Northamptonshire should have a greater understanding of the third sector and the services that we provide within the local community and also refer service users to us, where applicable.

23) Using a scale of 1 to 5, where 1 is ‘not at all important’ and 5 is ‘very important’, how important are each of the following to ensure an effective, local Healthwatch?

There were 31 responses to this question.
### Engagement, Participation and Involvement Team, BI&PM

#### Commissioning Healthwatch Northamptonshire 2018-2021 Consultation Analysis Report

<table>
<thead>
<tr>
<th>Aspect</th>
<th>Not at all important</th>
<th>Very important</th>
<th>Don't know</th>
<th>Total</th>
<th>Weighted Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well known and trusted in local communities.</td>
<td>0.00% 0 3.33% 1 3.33% 1 13.33% 4 73.33% 22 6.67% 2</td>
<td>30</td>
<td>4.68</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works positively and in partnership with local people and commissioners.</td>
<td>0.00% 0 3.23% 1 3.23% 1 25.81% 8 64.52% 20 3.23% 1</td>
<td>31</td>
<td>4.57</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaches out to individuals and groups who find it difficult to express and communicate their views and choices.</td>
<td>0.00% 0 0.00% 0 0.00% 0 26.67% 8 70.00% 21 3.33% 1</td>
<td>30</td>
<td>4.72</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works closely with other local organisations for mutual benefit.</td>
<td>0.00% 0 0.00% 0 16.13% 5 22.58% 7 58.06% 18 3.23% 1</td>
<td>31</td>
<td>4.43</td>
<td></td>
<td></td>
</tr>
<tr>
<td>An active organisation which is recognised as a statutory route for patients and the public to express their views.</td>
<td>3.33% 1 0.00% 0 10.00% 3 30.00% 9 53.33% 16 3.33% 1</td>
<td>30</td>
<td>4.34</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues.</td>
<td>0.00% 0 0.00% 0 0.00% 0 23.33% 7 73.33% 22 3.33% 1</td>
<td>30</td>
<td>4.76</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates that it can get things done and get things changed for the better.</td>
<td>0.00% 0 0.00% 0 3.23% 1 32.26% 10 58.06% 18 6.45% 2</td>
<td>31</td>
<td>4.59</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is able to influence decision makers.</td>
<td>0.00% 0 0.00% 0 0.00% 0 33.33% 10 60.00% 18 6.67% 2</td>
<td>30</td>
<td>4.64</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has local knowledge and relationships and is able to reach out to individuals and groups across Northamptonshire.</td>
<td>0.00% 0 0.00% 0 3.33% 1 30.00% 9 63.33% 19 3.33% 1</td>
<td>30</td>
<td>4.62</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is seen as independent from health and social care planners/commissioners and providers.</td>
<td>0.00% 0 0.00% 0 0.00% 0 28.57% 8 64.29% 18 7.14% 2</td>
<td>28</td>
<td>4.69</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### 23a) If you feel there is anything missing from the above list, please tell us below:
- Perhaps list a few specific achievements that Healthwatch has made in Northamptonshire since it started.
- Not all the legal measurements of a health watch that are listed above. 1 A lot of the subsequent legislative requirements are based on these activities which include: 1 promoting and supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services. 2 enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved; 3 obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known; 4 making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England. 5 providing advice and information about access to local care services so choices can be made about local care services; 6 formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England. 7 making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where
the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues. Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

- Has links with other HW organisations in neighbouring counties, and also across the Eastern Region/East of England.

24) Do you have any other comments you would like to make about Healthwatch Northamptonshire?

- No.
- As a major advice provider we have had no regular update about Healthwatch, and have been limited to what we can access online.
- 1.) Unless plugged in I suspect many unaware of Healthwatch. 2.) Unsure as to its effectiveness in delivering core mission (seems to have gone quiet of late).
- The general public need to know more about what Healthwatch do.
- Thank you to for your continuing contribution to our public engagement activities.
- Overall, it is exceedingly useful to have independent views to help inform our decision making and monitor our delivery.
- Always very helpful to CQC.
- HW Northamptonshire - keep up the good work on limited resources.
- They don't come into general practice unannounced, which has happened in the past.
Appendix 2 – Demographic Questions

1) What gender are you?

There were 232 responses to this question.

![Gender Distribution Chart]

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>33.19%</td>
</tr>
<tr>
<td>Female</td>
<td>63.79%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>3.02%</td>
</tr>
</tbody>
</table>

2) How old are you?

There were 232 responses to this question.

![Age Distribution Chart]

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 to 9</td>
<td>0.00%</td>
</tr>
<tr>
<td>10 to 19</td>
<td>0.43%</td>
</tr>
<tr>
<td>20 to 29</td>
<td>2.16%</td>
</tr>
<tr>
<td>30 to 49</td>
<td>22.84%</td>
</tr>
<tr>
<td>50 to 64</td>
<td>34.48%</td>
</tr>
<tr>
<td>65 to 74</td>
<td>30.60%</td>
</tr>
<tr>
<td>75+</td>
<td>5.60%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>3.88%</td>
</tr>
</tbody>
</table>
3) Do you have a disability?

There were 233 responses to this question.

![Bar chart showing the percentages of responses for disability status.]

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>23.18%</td>
</tr>
<tr>
<td>23 responses</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>72.96%</td>
</tr>
<tr>
<td>170 responses</td>
<td></td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>3.86%</td>
</tr>
<tr>
<td>9 responses</td>
<td></td>
</tr>
</tbody>
</table>

3a) If Yes, please tick the appropriate box(es) which best describes your disability?

There were 60 responses to this question.

![Bar chart showing the percentages of responses for disability type.]

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health</td>
<td>16.67%</td>
</tr>
<tr>
<td>10 responses</td>
<td></td>
</tr>
<tr>
<td>Physical Disability</td>
<td>48.33%</td>
</tr>
<tr>
<td>29 responses</td>
<td></td>
</tr>
<tr>
<td>Hearing Impairment</td>
<td>16.67%</td>
</tr>
<tr>
<td>10 responses</td>
<td></td>
</tr>
<tr>
<td>Learning Disability</td>
<td>8.33%</td>
</tr>
<tr>
<td>5 responses</td>
<td></td>
</tr>
<tr>
<td>Sight Impairment</td>
<td>6.67%</td>
</tr>
<tr>
<td>4 responses</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>16.67%</td>
</tr>
<tr>
<td>10 responses</td>
<td></td>
</tr>
</tbody>
</table>
4) What is your religion or belief?

There were 232 responses to this question.

```
<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>26.72%</td>
</tr>
<tr>
<td>Christian</td>
<td>60.34%</td>
</tr>
<tr>
<td>Hindu</td>
<td>0.00%</td>
</tr>
<tr>
<td>Jewish</td>
<td>0.00%</td>
</tr>
<tr>
<td>Muslim</td>
<td>1.29%</td>
</tr>
<tr>
<td>Sikh</td>
<td>0.00%</td>
</tr>
<tr>
<td>Buddhist</td>
<td>0.43%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>9.91%</td>
</tr>
<tr>
<td>Any other religion (please specify)</td>
<td>1.29%</td>
</tr>
</tbody>
</table>
```

Other:
- Irrelevant question
- Non-specific
- Humanist

5) How would you describe your ethnic origin?

There were 231 responses to this question.
<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>White - English, Welsh, Scottish or Northern Irish</td>
<td>90.04% 208</td>
</tr>
<tr>
<td>White – Irish</td>
<td>0.43% 1</td>
</tr>
<tr>
<td>White - Gypsy or Irish Traveller</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>White - Other White Background</td>
<td>2.16% 5</td>
</tr>
<tr>
<td>Asian or Asian British – Indian</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Asian or Asian British - Pakistani</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Asian or Asian British - Bangladeshi</td>
<td>0.87% 2</td>
</tr>
<tr>
<td>Asian or Asian British – Chinese</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Asian or Asian British - Other Asian Background</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Mixed / Multiple ethnic Background - White &amp; Black Caribbean</td>
<td>0.43% 1</td>
</tr>
<tr>
<td>Mixed / Multiple ethnic Background - White &amp; Black African</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Mixed / Multiple ethnic Background - White &amp; Asian</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Mixed / Multiple ethnic Background - Other mixed / multiple background</td>
<td>0.43% 1</td>
</tr>
<tr>
<td>Black or Black British - Caribbean</td>
<td>1.30% 3</td>
</tr>
<tr>
<td>Black or Black British – African</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Black or Black British - Other Black Background</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Other – Arab</td>
<td>0.00% 0</td>
</tr>
<tr>
<td>Other ethnic group</td>
<td>0.43% 1</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>3.90% 9</td>
</tr>
</tbody>
</table>

Other:
- Irrelevant question

6) If you are 16 or over which of the following options best describes how you think of yourself?

There were 224 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bisexual</td>
<td>2.68% 6</td>
</tr>
<tr>
<td>Gay Man</td>
<td>0.89% 2</td>
</tr>
<tr>
<td>Gay Woman / Lesbian</td>
<td>0.89% 2</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>83.48% 187</td>
</tr>
</tbody>
</table>

If you are 16 or over which of the following options best describes how you think of yourself?

![Graph showing the responses to the question.](image-url)
7) Is your gender identity the same as the gender you were assigned at birth?

There were 227 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>91.19%</td>
</tr>
<tr>
<td>No</td>
<td>0.88%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>7.93%</td>
</tr>
</tbody>
</table>

8) What would you describe your marital status as?

There were 224 responses to this question.

<table>
<thead>
<tr>
<th>Answer Choices</th>
<th>Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>65.18%</td>
</tr>
<tr>
<td>Single</td>
<td>12.95%</td>
</tr>
<tr>
<td>Civil Partnership</td>
<td>0.89%</td>
</tr>
<tr>
<td>Widow / Widower</td>
<td>4.91%</td>
</tr>
<tr>
<td>Other</td>
<td>8.48%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>7.59%</td>
</tr>
</tbody>
</table>
Appendix 3 – Copy of the Online Questionnaire

The following is a copy of the text used for the online questionnaire.

Commissioning Healthwatch Northamptonshire 2018-2021

What is this about?

Healthwatch is an independent consumer champion for people who use health and social care services. Its job is to ensure that local voices are heard and that people’s views and experiences are used to improve existing services and to help shape future services. Where concerns and problems about care services have been identified they will ensure that the right people know and check that action is taken to resolve them and prevent them from happening again.

Each local authority is required by the Health and Social Care Act 2012 to make arrangements to establish and maintain a local Healthwatch organisation in its area. Healthwatch Northamptonshire has been established since 2013 and its current contract ends in March 2018.

Northamptonshire County Council are re-commissioning their Healthwatch services, with the new service being live from 1 April 2018, and we would like to hear your views to help us explore and shape how Healthwatch in Northamptonshire will look from April 2018 onwards.

After the consultation has ended we will consider the views of local people and organisations along with any other relevant information and will use these to develop the best model for Healthwatch in Northamptonshire.

How can I help?

Please could you take about 10-15 minutes to tell us your views by completing this questionnaire. Your feedback will be used to help us gain a better understanding of peoples’ opinions and will help us shape the future design and focus of these services. Your feedback will be part of a report with many other people’s feedback, so you will not be personally identified.

You do not have to answer all of the questions. If you don’t want to answer a question, or don’t know the answer, then move on to the next question.

If you have any queries, comments or would like a copy of this survey in another format (including paper, easy read or large print) you can contact us by email, post or telephone. Our contact details are as follows:

Email address: EPIT@northamptonshire.gov.uk
Telephone: 01604 367611
Postal address: Engagement, Participation and Involvement Team
Northamptonshire County Council
The deadline for completing this survey is **1st September 2017**.

Thank you for helping us by completing this questionnaire.

Respondents who identified themselves as being either an individual were directed to the questions designed for individuals (questions 2 – 14 and the equality monitoring questions). Respondents who identified themselves as responding on behalf of an organisation / community group were directed to the questions designed for organisations / community groups (questions 15- 24).

**Q1. Are you responding to this questionnaire as an individual or on behalf of an organisation / community group?**

<table>
<thead>
<tr>
<th>As an individual</th>
<th>On behalf of an organisation / community group</th>
</tr>
</thead>
</table>

**Individual questionnaire**

**Your experience of Healthwatch Northamptonshire**

**Q2. Prior to this consultation have you heard of Healthwatch Northamptonshire?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
</table>

**Q3. Have you ever contacted Healthwatch Northamptonshire?**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No (please go to question 7)</th>
<th>Don’t know (please go to question 7)</th>
</tr>
</thead>
</table>

**Q4. What was the reason for contacting Healthwatch Northamptonshire?**

- To get information and advice about health and care services
- To make a complaint or raise a serious issue about a health or care service
- To help improve health and care services by sharing my experience and knowledge
- Other

If, ‘Other’, please specify:
Q5. How would you describe your experience of Healthwatch Northamptonshire?

<table>
<thead>
<tr>
<th>Option</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very good</td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td></td>
</tr>
<tr>
<td>Neither good nor poor</td>
<td></td>
</tr>
<tr>
<td>Poor</td>
<td></td>
</tr>
<tr>
<td>Very poor</td>
<td></td>
</tr>
<tr>
<td>Don’t know</td>
<td></td>
</tr>
</tbody>
</table>

Q6. Please provide a reason for your answer and let us know if there is anything Healthwatch Northamptonshire could have done differently to improve your overall experience?

Providing feedback on Health and Care Services

Q7. Using a scale of 1 to 5, where 1 is ‘Least preferred’ and 5 is ‘Most preferred’, how would you prefer to share your experiences of health and care services or report concerns?

<table>
<thead>
<tr>
<th>Least preferred</th>
<th>Most preferred</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organised events</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Confidential telephone line</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Through existing forums or groups I am involved with</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postal questionnaires / paper feedback forms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Online questionnaires / online feedback</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Online blogs / forums</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social media (for example, Facebook / Twitter)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>With a health or care professional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If ‘Other’ please specify:
Q8. Do you think Healthwatch Northamptonshire could improve awareness of its services to local people?

| Yes | No | Don’t know |

If you answered ‘Yes’, how do you think Healthwatch Northamptonshire could improve awareness of its services to local people?

Q9. The following is a list of the different services that Healthwatch Northamptonshire is expected to provide. Using a scale of 1 to 5, where 1 is ‘Least value’ and 5 is ‘Most value’, which of these would be of most value to you?

<table>
<thead>
<tr>
<th>Least value</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Most value</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support people to give feedback on local health and social care services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide ways for local people to monitor the quality of local health and care services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where concerns have been raised, make recommendations to national organisations for investigation or special review.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q10. Do you feel there is anything that Healthwatch should be doing that is missing from the above list?

Yes [ ]
No [ ]
Don’t know [ ]

If you answered ‘Yes’, please tell us what else should be included:

Healthwatch Northamptonshire in the future

Q11. Using a scale of 1 to 5, where 1 is ‘not at all important’ and 5 is ‘very important’, how important are each of the following to ensure an effective, local Healthwatch?

<table>
<thead>
<tr>
<th>Important</th>
<th>Not at all important</th>
<th>Very important</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Well known and trusted in local communities.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works positively and in partnership with local people and commissioners.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaches out to individuals and groups who find it difficult to express and communicate their views and choices.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works closely with other local organisations for mutual benefit.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>An active organisation which is recognised as a statutory route for patients and the public to express their views.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Demonstrates that it can get things done and get things changed for the better.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is able to influence decision makers.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has local knowledge and relationships and is able to reach out to individuals and groups across Northamptonshire.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Is seen as independent from health and social care planners/commissioners and providers.

Q11a. If you feel there is anything missing from the above list, please tell us below:

Q12. Do you have any other comments you would like to make about Healthwatch Northamptonshire?

About you

Q13. Please tell us in what capacity are you completing this questionnaire?

- I currently / have used health or social care services in Northamptonshire
- I am a friend, relative, or carer of someone who currently / has used health or social care services in Northamptonshire
- I am a volunteer with Healthwatch Northamptonshire
- I am a volunteer with another organisation
- I am an elected Councillor
- Other

If ‘Other’ please specify:

Q14. Which borough or district of Northamptonshire do you live in?

- Corby
- Daventry
- East Northamptonshire
- Kettering
- Northampton
- South Northamptonshire
- Wellingborough
- Other

If ‘Other’ please specify:
## Equality monitoring

1) **What gender are you?** (Please tick the appropriate box)
   - [ ] Male
   - [ ] Female
   - [ ] Prefer not to say

2) **How old are you?** (Please tick the appropriate box)
   - [ ] 0 to 9
   - [ ] 10 to 19
   - [ ] 20 to 29
   - [ ] 30 to 49
   - [ ] 50 to 64
   - [ ] 65 to 74
   - [ ] 75+
   - [ ] Prefer not to say

3) **Do you have a disability?** (Please tick the appropriate box)
   - [ ] Yes
   - [ ] No
   - [ ] Prefer not to say

3a) **If ‘Yes’, please tick the appropriate box(es) which best describes your disability?**
   - [ ] Mental Health
   - [ ] Physical Disability
   - [ ] Learning Disability
   - [ ] Sight Impairment
   - [ ] Hearing Impairment
   - [ ] Other

4) **What is your religion or belief?** (Please tick the appropriate box)
   - [ ] None
   - [ ] Christian
   - [ ] Hindu
   - [ ] Sikh
   - [ ] Buddhist
   - [ ] Jewish
   - [ ] Prefer not to say
   - [ ] Any other religion (please write in)

5) **How would you describe your ethnic origin?** (Please tick the appropriate box)
   - **White**
     - [ ] White British
     - [ ] White Irish
     - [ ] Other White Background
   - **Asian or Asian British**
     - [ ] Indian
     - [ ] Pakistani
     - [ ] Other Asian Background
     - [ ] Bangladeshi
   - **Mixed / Multiple ethnic Background**
     - [ ] White & Black Caribbean
     - [ ] White & Asian
     - [ ] Other mixed / multiple background
   - **Black or Black British**
     - [ ] Caribbean
     - [ ] African
   - **Other ethnic group**
     - [ ] Arab
     - [ ] Any other ethnic group (please state)
     - [ ] Prefer not to say

6) **If you are 16 or over which of the following options best describes how you think of yourself?** (Please tick the appropriate box)
   - [ ] Bisexual
   - [ ] Gay Man
   - [ ] Gay Woman / Lesbian
   - [ ] Heterosexual
   - [ ] Prefer not to say
7) Is your gender identity the same as the gender you were assigned at birth? (Please tick the appropriate box)

☐ Yes  ☐ No  ☐ Prefer not to say

8) What would you describe your marital status as? (Please tick the appropriate box)

☐ Married  ☐ Single  ☐ Civil Partnership

☐ Widow/ Widower  ☐ Other  ☐ Prefer not to say

Organisations / community groups questionnaire

Q15. Please tell us the name of your organisation and your job title/role:

Name of organisation

Job title/role

Your experience of Healthwatch Northamptonshire

Q16. Prior to this consultation have you heard of Healthwatch Northamptonshire?

☐ Yes  ☐ No  ☐ Don’t know

Q17. How would you describe your experience(s) of working with Healthwatch Northamptonshire?

☐ Very good  ☐ Good  ☐ Neither good nor poor

☐ Poor  ☐ Very poor  ☐ Don’t know

Q18. Please provide a reason for your answer and let us know if there is anything Healthwatch Northamptonshire could do differently to improve the impact of their work with your organisation?
Q19. Do you think Healthwatch Northamptonshire could improve awareness of its services?

Yes ☐  No ☐  Don’t know ☐

If you answered ‘Yes’, how do you think Healthwatch could improve awareness of its services, both within your organisation and to local people?

Q20. The following is a list of the different services that Healthwatch Northamptonshire is expected to provide. Using a scale of 1 to 5, where 1 is ‘Least value’ and 5 is ‘Most value’, which of these are most valuable in helping your organisation to deliver an effective service?

<table>
<thead>
<tr>
<th>Least value</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide information and support people to find the right health and care service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gather the views of local people on health and care services and use these to influence and improve services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Support people to give feedback on local health and social care services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide ways for local people to monitor the quality of local health and care services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Where concerns have been raised, make recommendations to national organisations for investigation or special review.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work with national organisations (e.g. NHS England, Care Quality Commission) to influence local and national health and care issues.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q21. Do you feel there is anything that Healthwatch should be doing that is missing from the above list?  

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t know</th>
</tr>
</thead>
</table>

If you answered ‘Yes’, please tell us what else should be included and the benefits it would make:

Q22. What can your organisation do to support the development of Healthwatch Northamptonshire and ensure it has a positive impact on health and care services?

Healthwatch Northamptonshire in the future

Q23. Using a scale of 1 to 5, where 1 is ‘not at all important’ and 5 is ‘very important’, how important are each of the following to ensure an effective, local Healthwatch?

<table>
<thead>
<tr>
<th></th>
<th>Not at all important</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>Very important</th>
<th>4</th>
<th>5</th>
<th>Don’t know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Well known and trusted in local communities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works positively and in partnership with local people and commissioners.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaches out to individuals and groups who find it difficult to express and communicate their views and choices.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Works closely with other local organisations for mutual benefit.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>An active organisation which is recognised as a statutory route for patients and the public to express their views.</td>
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<td>Has a good understanding of the local NHS, public health and social care priorities, and is sensitive to local issues.</td>
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Demonstrates that it can get things done and get things changed for the better.

Is able to influence decision makers.

Has local knowledge and relationships and is able to reach out to individuals and groups across Northamptonshire.

Is seen as independent from health and social care planners/commissioners and providers.

Q23a. If you feel there is anything missing from the above list, please tell us below:

Q24. Do you have any other comments you would like to make about Healthwatch Northamptonshire?