HEALTHWATCH SUTTON

Company No: 08171224
(A Company Limited by Guarantee and not having a Share Capital)

Charity No: 1151601

FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2017

MYRUS SMITH
Chartered Accountants
Norman House,
8 Burnell Road,
Sutton, Surrey.
SM1 4BW
HEALTHWATCH SUTTON  
Company No: 08171224  
(A Company Limited by Guarantee and not having a Share Capital)  
Charity No: 1151601  

Annual Report  
FOR THE YEAR ENDED 31 MARCH 2017

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HEALTHWATCH SUTTON  
Company No: 08171224  
Charity No: 1151601  

TRUSTEES’ REPORT AND ACCOUNTS  
FOR THE YEAR ENDED 31 MARCH 2017

The Board of Directors/Trustees presents its report and audited financial statements for the year ended 31 March 2017.

Reference and Administrative Information

Charity No. 1151601  
Company No. 08171224  

Registered Office and Principal address: Granfers Community Centre  
73-79 Oakhill Road, Sutton  
Surrey  
SM1 3AA

Board of Directors/Trustees who served during the year and up to the date of this report:

Chairperson: David Williams  
Vice Chairperson: Barbara McIntosh  

Director and Trustee: Adrian Attard  
Director and Trustee: Adrian Bonner  
Director and Trustee: Annette Brown  
Director and Trustee: Barbara McIntosh  
Director and Trustee: Shri Mehrotra  
Director and Trustee: Tony Ward  
Director and Trustee: Launa Watson  
Director and Trustee: David Williams  
Director and Trustee: Derek Yeo

Staff Team: Pete Flavell – Manager  
Pam Howe – Patient Engagement Officer  
Sara Thomas – Communications and Administration Officer

Bankers: Barclays Bank PLC  
43 High Street  
Sutton  
Surrey  
SM1 1DR

Independent Examiner: Stephen Jones  
c/o Myrus Smith  
Chartered Accountants  
Norman House  
8 Burnell Road  
Sutton  
Surrey  
SM1 4BW
HEALTHWATCH SUTTON
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2017

1. Structure, governance and management

Healthwatch Sutton (HWS) is the consumer champion for health and social care in Sutton. HWS was incorporated on the 7th August 2012 and achieved charitable status on 11th April 2013 it is therefore both a Company limited by Guarantee (08171224) and a registered Charity (1151601).

HWS is governed by a Board of Directors/Trustees (currently 9) who meet bi-monthly to oversee the strategic direction and development of the organisation. The original directors/trustees in 2013/14 were those who established the organisation but they were then subject to election by the members at the first AGM in February 2014. The members of HWS are local voluntary organisations and individual residents who have an interest in health and social care and support the work of HWS.

The Board of HWS work in partnership with 2 local voluntary organisations (through sub-contracting arrangements) to deliver the work of HWS.

The HWS partner organisations are:

- Sutton Centre for the Voluntary Sector (SCVS) who support the Board, the running of HWS, the engagement and representation role and the delivery of specific projects.
- Citizen's Advice Sutton (CAS) who provide an information and advice service.

Recruitment and Appointment of new Trustees

Trustees are recruited and co-opted on to the Board of Healthwatch Sutton during the course of the year to meet the requirements of the organisation. At the Annual General Meeting the membership vote as to decide if they should be elected to the board.

2. Financial Review

HWS’s main source of income comes from the London Borough of Sutton and in 2016/17 £153,939 was received to deliver the activities of the organisation. The contract was retendered half way through the financial year to start on 1 October 2016. At this point Complaints Advocacy was removed from the Healthwatch tender and the total annual funding was reduced from £197,987 to £109,962. From 1 October an annual amount of £20,000 was allocated to CAS to deliver the information and advice service on behalf of HWS. The balance was retained by HWS/SCVS to deliver the core work of the organisation – including funding the 3 staff and office accommodation.

Additional funding of £39,950 was secured from Sutton Clinical Commissioning Group to support work to development Patient Participation Groups and the Patient Reference Group.

Further additional funding of £10,000 was received to manage a fund called the ‘Grassroots’ project for South West London Commissioning Alliance (SWLCA).

The reserves from 2016-17 have been allocated to specific funds. £6,000 has been set aside to be used for communication, marketing and digital inclusion. A further £2,000 is allocated to promote chargeable products being developed by HWS. £3,000 is to be used for the mental health projects and a further £4,000 for a health inequalities project. The remaining £16,903 is set aside for other risks and redundancies should the contract be terminated or unsuccessfully retendered.

3. Public Benefit Statement

HWS Trustees have complied with their duty to have due regard to the guidance on public benefit published by the Commission in exercising their powers or duties. The activities delivered during 2016/17 have been entirely in accordance with the charitable objectives.
HEALTHWATCH SUTTON
REPORT OF THE TRUSTEES
FOR THE YEAR ENDED 31 MARCH 2017
/contd...

4. Objectives and Activities

4.1 The Objects of the Charity are:

1. the advancement of health and the relief of those in need, including by:
(i) providing information and advice to the general public about local health and social care services; and
(ii) making the views and experiences of members of the general public known to health and social care providers;
2. the advancement of citizenship and community development, including ensuring local people have a voice in the development, delivery and equality of access to local health and care services and facilities;
3. the advancement of education, including the provision of training and the development of skills for volunteers and the wider community in understanding, reviewing and monitoring local health and care services and facilities;
4. any other exclusively charitable purposes as the Trustees see fit;
   in particular (but not exclusively) in Sutton and neighbouring areas of South London.
5. This provision may be amended by special resolution but only with the prior written consent of the Commission.

4.2 Activities

HWS gives people a chance to have their say and help to improve local health and social care services. It does this through the following activities:

- Gives people information, advice and support about local health and social care services.
- Actively finds out what people think about health and social care services.
- Has voting rights on the local Health and Wellbeing Board and makes recommendations on how health and social care services should be run.
- Shares information and ideas with other local Healthwatch groups, Healthwatch England and the Care Quality Commission.

5. Achievements and Performance

The main achievements during 2016/17 were as follows.

5.1 Inpatient Project

As part of our prioritisation work, local people had identified inpatient care as their third highest priority. They cited staffing levels at weekends, bank nursing staff, food and noise at night as areas of concern. In order to investigate this further, we agreed to carry out an in-depth study to find out more by collecting the views of patients who have experienced staying on wards. The vast majority of the feedback related to wards at St Helier Hospital.

We set up an Inpatient Project Group of local people with an interest in this area of work. The group agreed a set of approximately 20 questions covering a variety of themes that could be used to gather patients' opinions about wards. It was also agreed that our volunteers would support this project by carrying out a series of visits over 6 weeks to eight different wards at both Epsom and St Helier Hospitals (AMU, A3, B5, C3, C5, C6, Derby and Oaks). As St Helier Hospital is also a key provider for the population in the south part of Merton, we also approached Healthwatch Merton who agreed to work with us on this project. Our volunteers partnered-up with theirs for the ward visits. We also created a carers version of the survey and used an observation sheet to capture more intelligence about these wards.

We were very pleased to receive a full and positive response to our recommendations from Epsom and St Helier University Hospitals NHS Trust. The Trust has developed a series of proposed actions to seek to find the causes of the issues and therefore find ways to improve the experience of patients.
5.1 Inpatient Project/contd...

Following completion of the analysis of the survey responses we were pleased to have found the following areas of commendation:

- Average rating of the 'overall experience' of staying on the ward, across all participating wards is 8 out of 10
- 89% of patients advised that they 'Agreed' or 'Strongly Agreed' that they trusted the nurses on the ward that they were staying on
- 91% of patients advised that they 'Agreed' or 'Strongly Agreed' that they trusted the doctors on the ward that they were staying on
- Analysis of comments relating to 'other staff' show that these were overwhelmingly positive (only 8 negative from 135 comments)
- Staff and volunteers visiting wards noted an overall high level of cleanliness and this is also reflected in patients comments

In response to our findings and recommendations, Epsom and St Helier hospitals agreed to take the following actions:

Noise at night
- Dimming lights at a set time
- Maintaining nurse call buzzers but monitoring answering them closer at night
- Ensuring all bins are soft close
- Continue to roll out bay nursing where the nurse is seated in the bay and not at the desk
- Obtain eye masks and ear plugs for patients through the introduction of comfort packs on wards

Sufficient nurses
- Nurses to ensure intentional rounding is carried out 2 hourly to ensure every patient is asked about comfort, pain and position regularly throughout the day
- The nurse in charge will go round every patient once a day and this will be included in their ward improvement programme for 2017/18
- On-going recruitment from abroad will continue to fill vacancies

In addition to these actions, each ward responded to their individual ward reports. In order to showcase their plans, the Trust invited Healthwatch volunteers, trustees and staff to come to an event held at St Helier Hospital. The nursing management staff for each ward gave a short presentation outlining the work that they are now undertaking to address the feedback for their wards.

The event was very well attended and well received by all participants. Progress against the plans that have been made will be monitored through the Trust's Improving Patient Experience Committee.

5.2 Outpatient Project

In our last annual report, we highlighted the work that we had carried out to look into the experience of patients using outpatient services at St Helier Hospital. Our volunteers spoke to nearly 350 people in waiting areas and asked them to complete our survey.

We found that:

- Over 20% of respondents stated that the hospital had changed their appointment to a later date
- Nearly a third of patients stated that they were not satisfied with the amount of time they had to wait to be seen for their appointment
- Of those people who had an appointment delayed by more than 15 minutes over half advised that they had not been informed of the delay
5.2 Outpatient Project/contd
Since our report the Trust has been working on a series of initiatives to address issues that we highlighted relating to Outpatient services. These include:

- Opening of the Outpatient Booking Centre where one centre can help with a wide variety of outpatient appointment bookings increasing efficiency and availability
- Opening of a new £150,000 Outpatient area with 4 new consultation rooms and a further 2 rooms available soon
- Improving governance by moving as many outpatient services as possible into the same division. This allows the organisation to standardise practice and systems to improve efficiency and effectiveness.

5.3 Let’s Make Support Work for Everyone
In 2016 we were receiving feedback from a variety of sources that there was a large variability in the quality of support provided by Support Workers to people with learning difficulties. Most Support Workers were doing an excellent job, however some were not so good.

In order to investigate this further, we worked with Sutton Mencap and Advocacy for All to set up an event for people with learning difficulties, their carers/families and their Support Workers. The event was called ‘Let’s make support work for everyone’ and held in June last year. We were pleased that 60 people attended. At the event the people with learning difficulties, their parents and the Support Workers all worked in separate groups to give their views about support work. Sutton Mencap and Advocacy for All supported people with learning difficulties to give feedback.

Following the event, with the help of Mencap, we published an easy-read report that laid out the key findings and recommendations.

We made the following recommendations to the Commissioner of the London Borough of Sutton (LBS).

- Council contracts must recognise the importance of a skilled, appropriately paid workforce to provide support work
- The Council must have a robust system for monitoring the quality of support work and acting promptly on concerns
- People who use support and parents and carers must be involved in monitoring the quality of support
- Where poor quality support has been identified, an action plan must be put in place and regularly monitored

LBS are working on addressing these recommendations.

5.4 Caring for people with Dementia Project
Analysis of the general feedback showed that ‘carers’ and ‘dementia’ were both high priorities for local people. When we looked further in to the detail of the evidence we had collected we found that these two areas were interlinked with many of the carer’s comments relating to looking after someone with dementia.

In light of this, we decided to look at people’s experience of ‘Caring for people with dementia’.

We agreed that the best approach to this subject would be to put together some in-depth diaries that collected the experience of people with dementia and their carers. These could then be used to form case studies.

We worked with Alzheimer’s Society and Sutton Carers Centre to find people who would be willing to work with us. We asked our volunteers if they would be willing to go to the houses of people who were taking part and speak to them for an hour or so on several occasions over a period of a few weeks. They were very happy to do this. We also carried out some telephone interviews with carers to give us more insight in to their experience.
5.4 Caring for people with Dementia Project/contd...

The findings of this work were published in a report called 'Exploring the experience of people with dementia and those who care for them' in January 2017.

There are some very insightful stories included in the report that really bring the experience of the participants alive.

The report made the following recommendations:
- The development of a Dementia Hub
- Improvement in early diagnosis
- Improved support for carers
- Raising more awareness of dementia
- Improving support for people with dementia

The report has been formally submitted to the London Borough of Sutton, Sutton CCG and six leaders of relevant local voluntary and community sector organisations. Responses have been received from LBS and the CCG. Meetings have also been held with staff at the Memory Clinic in Cheam, the Admiral Nurses and a local community centre who have all contacted Healthwatch in response to the report. Healthwatch Sutton staff have visited the Dementia Hub in Mitcham to see how the centre works there. We are now in the process of organising a meeting with all the relevant parties to see how we can take this work forward and we are especially keen to see if we can take the idea of a Dementia Hub for Sutton forward.

5.5 Commissioned work – Patient Participation Groups

As part of the Healthwatch remit, to make a real difference and ensure local people have a say in the planning, development and delivery of healthcare services, Healthwatch Sutton has been supporting Sutton patient groups. This work, previously and currently commissioned by Sutton CCG, is based around providing independent support and development to practice based Patient Participation Groups and the Sutton wide Patient Reference Group.

What have we been doing?

As required, all Sutton's practices have some form of PPG. Since beginning this work Healthwatch Sutton has engaged with nearly 80% of practices and their PPG and in the last year has continued to promote and support PPGs, to increase awareness and provide support for the setting up and development of PPGs as an effective voice, both for and of the patients.

We have increased awareness of PPGs by:
- Promoting PPGs and their activities through HWS communications (website, newsletter, e bulletins, social media)
- Informing local people about PPGs as part of HWS outreach presentations
- Sharing individual PPG successes and good practice, with others, through a patient network e news

We have provided support in the form of:
- Guidance and templates for governance, recruitment, ground rules and best practice, tools to support the development of well-run groups, fit for purpose
- Meeting with individual PPGs to discuss or address any specific concerns and provide bespoke support
- Helping PPGs and individual members in understanding their role and contribution at CQC inspections
- Sharing and celebrating successes
- An annual PPG Forum bringing together representatives from PPGs to share problems, ideas and achievements
5.5 Commissioned work – Patient Participation Groups/contd...
What we have achieved
PPG
- Ongoing trusted engagement with the majority of Sutton’s practices/PPGs
- Increasing the awareness of PPGs and the number of people participating in their PPG
- Promoting and supporting the involvement of local people in well run, effective PPGs ensuring patients are having a say in what GP services look like today and in the future
- Added value to Healthwatch Sutton by increasing its reach and engagement activities
- Developed our relationship with CQC sharing intelligence gained from working closely with PPGs and supporting patients to engage with the CQC at inspections

5.6 Patient Reference Group (PRG)
The PRG brings together volunteer patient representatives from Sutton’s PPGs to provide patient input into the provision and monitoring of locally commissioned healthcare services.

The group, which is patient led, provides a forum for dialogue between patient representatives and Sutton CCG – a mechanism by which patients can raise issues about local services, be informed about the CCG’s priorities, planning and commissioning activities and where the CCG can consult patients about specific and future developments including the commissioning of local services. (With the onset of ‘delegated commissioning’ of primary care service, the PRG remit has been extended to include primary care).

The year has seen 92% of practices represented on the group, with just 2 practices who have not engaged in the last 12 months.

Patient representatives act as a conduit, raising issues and taking back information from the group to their PPG and the wider practice population.

What have we been doing?
Supporting the PRG members by:

- Providing administrative support to over 40 registered members
- Supporting the Chair and officers to deliver and report on 6 meetings of the PRG and 6 Agenda setting meetings
- Facilitating the identification of speakers, topics for discussion and responding to Sutton CCG and members requests for information/responses
- Identifying and communicating opportunities for PRG members to be involved as patient or PRG representatives on other Sutton CCG groups and committees
- Providing guidance on good governance and best practice
- Conducting an annual election of officers from the membership and introduced a members register of interests
- Facilitating an annual commissioning workshop – providing formal written feedback, gathered from PPGs and their wider practice population, on the services local people would like to see provided and prioritised in commissioning planning

5.7 Our Volunteers
We are extremely lucky to have a dedicated team of volunteers to support us with our work. The vast majority of our projects would not be possible without their assistance. In particular, this year our volunteers have been pivotal in the collection of people’s views about care on the wards of St Helier and Epsom Hospital. Our volunteers took part in approximately 20 separate visits to wards and enabled us to collect over 170 surveys. Without this quantity and quality of information we would not have been able to publish a report with such detailed analysis and ward-by-ward feedback.
5.7 Our Volunteers/contd...

Our volunteers also support us in other ways. For example, they attend and support us at public events, carry out data entry, carry out administrative work and help us with our major events like our AGM.

It should also, not be forgotten, that all of our Directors are unpaid Trustees for Healthwatch Sutton and give up their time and share their skills in order to ensure that we are an effective and well run organisation.

Every year, we hold a volunteers Christmas Meal to thank all our volunteers and Trustees for their support.

The team have engaged with the new Sutton Uplift Service. A team member also attends the Sutton Uplift Service User Panel Group which is a great way to network with other organisations in regards to Mental Health.

5.8 Grassroots Project

Healthwatch Sutton was approached last year by South West London Collaborative Commissioning (SWLCC) alongside the other South West London Healthwatch organisations, to support a new programme of engagement. The SWLCC had successfully bid for a fund to support engagement with 'hard to reach' groups. They were looking for Healthwatch to go out to local voluntary and community groups and ask them to bid for up to £750 to host a fun event. Each event had to give the opportunity for SWLCC to engage with those attending to ask them questions about their views on NHS services.

We had a great response and the following events were held.

<table>
<thead>
<tr>
<th>Local group / venue</th>
<th>Audience</th>
<th>Purpose/summary</th>
<th>Numbers attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sutton SCILL on behalf of Fibromyalgia Pop in Club SCILL, Sutton</td>
<td>Long Term Conditions Older People Mental Health</td>
<td>Celebratory event held to celebrate 4 years of the fibromyalgia pop in club and to also promote weekly health sessions.</td>
<td>40</td>
</tr>
<tr>
<td>Home start Group – Sutton</td>
<td>Carers</td>
<td>Summer Social for volunteers to say thank you and provide them the opportunity to meet each other informally. The volunteers work on a one-to-one basis with families and children under 5.</td>
<td>20</td>
</tr>
<tr>
<td>Clockhouse Community Hillcrest Halls, Surrey</td>
<td>Families Carers Children &amp; Young People Socio-Economic Deprived</td>
<td>Family fun day for residents of Clockhouse Estate in Sutton. There was a live singer and other entertainment throughout the afternoon along with a hand drumming session.</td>
<td>100</td>
</tr>
<tr>
<td>Sutton Seniors Forum Salvation Army Hall</td>
<td>Older People</td>
<td>Sutton Senior Forum's Twentieth Birthday. Tea, Scones and Music and 'Meet the NHS'. Event helped to reduce the social isolation of older and vulnerable people in Sutton.</td>
<td>100</td>
</tr>
<tr>
<td>Nickel Support</td>
<td>Learning Disabilities Mental Health Carers</td>
<td>Up-cycling event where people can network over a buffet and hot drink and gave people the opportunity to get involved with some of the activities Nickel Support undertake (e.g. up-cycling).</td>
<td>30</td>
</tr>
</tbody>
</table>
### 5.8 Grassroots Project/contd...

<table>
<thead>
<tr>
<th>Local group / venue</th>
<th>Audience</th>
<th>Purpose/summary</th>
<th>Numbers attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Panic North Cheam Resource Centre</td>
<td>Mental Health Carers</td>
<td><strong>No Panic meeting</strong> The event was for people who experienced anxiety/panic attacks. A fish and chip meal was provided and individuals were able to discuss their experiences of mental health services in Sutton.</td>
<td>40</td>
</tr>
<tr>
<td>Sutton Old Peoples Welfare Committee 139 Brighton Rd Sutton</td>
<td>Older People</td>
<td><strong>Open day</strong> where there were various activities throughout the day including chair based exercises, live entertainment, bingo, play your cards right, art / crafts, buffet. Information stands from other related organisations, hand massage and Hairdressing.</td>
<td>75</td>
</tr>
<tr>
<td>Macular Society - Older People and Carers Holiday Inn Sutton</td>
<td>Long Term Condition</td>
<td><strong>Thank you event</strong> for people with age related macular degeneration (AMD). The event was part of the monthly meeting to thank service users and give them a fish and chip lunch.</td>
<td>40</td>
</tr>
<tr>
<td>Wallington Older People's Community Day The Centre, Wallington</td>
<td>Older People</td>
<td><strong>Community day</strong> for the older people of Wallington. Activities included yoga, dancing, hand drumming, indoor bowls, art.</td>
<td>75</td>
</tr>
<tr>
<td>African Caribbean Heritage Association (ACHA)</td>
<td>BAME Older People</td>
<td><strong>BME day</strong> – the day provided perspectives and presentations on the under representation of older people from BME communities in health and health promotion.</td>
<td>75</td>
</tr>
<tr>
<td>St Teresa’s Church St Teresa’s Field</td>
<td>Children &amp; Young People Families Older People</td>
<td><strong>Family Fireworks Evening</strong> included side stalls, fun activities for children, young people, older people &amp; families, competitions, music and topped off with a spectacular fireworks display.</td>
<td>40</td>
</tr>
<tr>
<td>The Royal Association for Deaf People (RAD) Sutton Salvation Army</td>
<td>Long Term Conditions</td>
<td><strong>Social drop-in event</strong> raising awareness on health &amp; wellbeing matters. Early evening snacks and hot &amp; cold drinks included. Communication was secured by BSL interpreters.</td>
<td>20</td>
</tr>
<tr>
<td>Women’s Aid Sutton Women’s Aid</td>
<td>Children &amp; Young People Women</td>
<td><strong>Christmas Party</strong> for women and children residing at the refuge and for those who have left within the past year or so. There were food and surprise activities, (e.g. Santa, a Christmas Elf). The event was a one off party with the purpose of bringing together women and children who experienced stress, anxiety and depression to a fun, stimulating but also relaxing afternoon designed to enhance the season’s positive aspects.</td>
<td>7</td>
</tr>
</tbody>
</table>
5.8 Grassroots Project/contd...
A report has been put together by SWLCC that collates all the findings across South West London. They are using the information that they have collected to influence their decision-making for services across South West London, this includes decisions that are made as part of the Sustainability and Transformation Plans.

Sutton hosted 13 different events with 662 people attending and 284 spoke directly to the SWLCC team.

We are pleased to say that, due to the success of the first scheme, funding has been agreed to continue the grassroots engagement work for another year.

5.9 Information and Advice
The Healthwatch Sutton Information & Advice service (I&A) is based at Citizens Advice Sutton and operates as part of Advice Link Partnership Sutton (‘ALPS’). The service is open 9am to 5pm, Monday to Friday, and residents can make contact by phone, online or face to face drop-in. The ALPS phone menu and website gives residents access to the service and also provides information and signposting resources relevant to health and social care issues.

The integrated nature of I&A services in Sutton means that clients who contact the service with a query relating to health and social care also have seamless access to other services in the Borough. The staff and volunteers who respond to enquiries are working as part of an AQS accredited body and are trained to explore each resident’s issue, identify any needs they might have and then provide information and advice that is supported by reliable sources and most likely to move them forward.

Beginning operation in October 2016, the service has assisted 121 unique clients with 137 discrete issues, providing information and advice about:

- National charities that can assist with gambling addiction and support for families who have been affected by gambling addiction
- National and local services that support individuals who have dementia or who are caring for someone with dementia
- Non-NHS services that provide counselling for anger management and family issues
- Bereavement counselling and how to access mental health services through the NHS
- Claiming an exemption for paying for NHS dental treatment on the basis of income and challenging fines relating to NHS dental fees
- Obtaining disability equipment from local providers
- Local support groups for residents with particular health conditions or disabilities
- How to complain about private dental care and potential remedies that might be available where the standard of treatment was inadequate
- How to change GP and surgery, where the client is unhappy with their doctor but does not want to make a formal complaint
- How to apply for a care assessment from social services and information about what support is available from local organisations when making an application

The most common enquiries are about:

- Support groups for people with disabilities or long-term health problems, or family members supporting people with the same (17%)
- Social services (15%)
- Counselling services (11%)
- GPs and local surgeries (7%)
- NHS costs and charges (5%)
6. Plans for the Future 2017/18
For all of our projects that have already resulted in the publication of a report, we will continue to follow the progress of any actions that have arisen through the most appropriate groups or committees.

We have always offered any support that might be beneficial to the recipient organisations of our reports and will continue to do so.

At our May Board meeting we agreed the following priorities for 2017/18:
- We will continue our work in response to the ‘Caring for People with Dementia’ report by bringing together the Local Authority, NHS and voluntary & community sector to see if we can find solutions to the issues raised and develop a plan of action.
- We will continue our previously agreed mental health project. We are in the design and delivery stage of a new project to find out more about the mental health and well-being of children and young people in Sutton. We are planning to base our work on the young people’s survey that has been carried out by Healthwatch Richmond and Healthwatch Kingston.
- We will be starting a new project to look at the quality of care provided by care homes from a resident perspective with input from their friends and family.
- We will be starting a new project to look at ‘Getting the best start in life’ by looking at the support needed for new parents and their young children in Sutton.
- We will continue to monitor the progress of the Sustainability and Transformation Plan for South West London and will engage with local people at appropriate times in the Plan’s development.

We are also committed to finding other sources of revenue by developing a series of engagement products that local organisations can buy from us.

We will offer an independent assessment of services that will result in a report with commendations and recommendations for service providers. We would do this by finding out local people’s views on any health or social care related subject (i.e. how active people are or people’s understanding of nutrition). If you are interested in our services, please get in touch with us.

We have only recently received a response from Epsom and St Helier University Hospitals NHS Trust to our Outpatient Report. Over the next year we will monitor the progress of the actions that were proposed in this response and we have offered to help in any way that we can to achieve the changes needed to improve patients’ experience of Outpatient services.

We are also currently working with the hospital Trust on another project to find out patients’ views on the service provided at a variety of wards at both Epsom and St Helier hospitals. A report will be published soon and we will again be looking to see what action can be taken to address any issues, alongside any commendations for great service.

Plans are also in full swing to hold an event to find out about the experience of people who have a learning disability who are supported by a Support Worker. This event will allow people with a learning disability to tell us about their experience of support work and also the Support Workers themselves to share their views on their work. Parents will also be invited to share their experience. An easy-read report will be published shortly after the event has been held.

Mental health has also been highlighted as an area of concern for local people and we are in the preliminary stages of establishing where the priorities are in mental health. We will then launch a new project to look in to a specific area of mental health.
6. Plans for the Future 2017/18/contd...

Finally, we are aware that plans are currently in development that could have an impact on the delivery of a wide variety of services across the whole of South West London. We will be monitoring this closely and responding to any reaction in public opinion to any proposals that emerge.

Approved by the Board of Trustees on 22 August 2017 and signed on its behalf by:

D. Williams
Trustee
Independent Examiner's Report to the Members of:
HEALTHWATCH SUTTON

I report on the accounts of the Healthwatch Sutton for the year ended 31 March 2017, which are set out on pages 14 to 19.

Respective responsibilities of trustees and examiner
The trustees are responsible for the preparation of the accounts. The trustees consider that an audit is not required for this year under section 144(2) of the Charities Act 2011 (the 2011 Act) and that an independent examination is needed.

Having satisfied myself that the charity is eligible for independent examination, it is my responsibility to:

- examine the accounts under section 145 of the 2011 Act;
- to follow the procedures laid down in the general Directions given by the Charity Commission under section 145(5)(b) of the 2011 Act; and
- to state whether particular matters have come to my attention.

Basis of independent examiner's report
My examination was carried out in accordance with the general Directions given by the Charity Commission. An examination includes a review of the accounting records kept by the charity and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts, and seeking explanations from you as trustees concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit and consequently no opinion is given as to whether the accounts present a 'true and fair view' and the report is limited to those matters set out in the statement below.

Independent examiner's statement
In connection with my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that in any material respect the requirements:

   - to keep accounting records in accordance with section 386 of the Companies Act 2006; and
   - to prepare accounts which accord with the accounting records, comply with the accounting requirements of section 396 of the Companies Act 2006 and with the methods and principles of the Statement of Recommended Practice: Accounting and Reporting by Charities

      have not been met; or

2. to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

S. A. Jones FCA
C/o Myrus Smith
Chartered Accountants

22 August 2017
HEALTHWATCH SUTTON
STATEMENT OF FINANCIAL ACTIVITIES
(Incorporating Income and Expenditure Account)
FOR THE YEAR ENDED 31 MARCH 2017

<table>
<thead>
<tr>
<th></th>
<th>Notes</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INCOME</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incoming resources from charitable activities</td>
<td>2</td>
<td>203,889</td>
<td>232,987</td>
</tr>
<tr>
<td><strong>EXPENDITURE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raising funds</td>
<td>3</td>
<td>465</td>
<td>4,032</td>
</tr>
<tr>
<td>Charitable activities</td>
<td>4</td>
<td>188,373</td>
<td>225,725</td>
</tr>
<tr>
<td></td>
<td></td>
<td>188,838</td>
<td>229,757</td>
</tr>
<tr>
<td><strong>NET MOVEMENT IN FUNDS</strong></td>
<td></td>
<td>15,051</td>
<td>3,230</td>
</tr>
<tr>
<td>Reconciliation of Funds</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fund balances brought forward</td>
<td></td>
<td>16,784</td>
<td>13,554</td>
</tr>
<tr>
<td>Fund balances carried forward</td>
<td></td>
<td>£31,835</td>
<td>£16,784</td>
</tr>
</tbody>
</table>

All funds are unrestricted.

The notes form part of these Financial Statements
HEALTHWATCH SUTTON  
(Company No: 08171224)  

BALANCE SHEET  
AS AT 31 MARCH 2017  

Notes

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>CURRENT ASSETS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Debtors</td>
<td>195</td>
<td>187</td>
</tr>
<tr>
<td>Cash at Bank</td>
<td>35,842</td>
<td>24,713</td>
</tr>
<tr>
<td></td>
<td>36,037</td>
<td>24,900</td>
</tr>
<tr>
<td>CREDITORS:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amounts falling due within one year</td>
<td>4,202</td>
<td>8,116</td>
</tr>
<tr>
<td>NET ASSETS</td>
<td>31,835</td>
<td>16,784</td>
</tr>
<tr>
<td>FUNDS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>31,835</td>
<td>16,784</td>
</tr>
</tbody>
</table>

The company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2017.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 March 2016 in accordance with Section 476 of the companies Act 2006.

The directors acknowledge their responsibilities for:
(a) ensuring that the company keeps accounting records which comply with Section 386 and 387 of the Companies Act 2006 and
(b) preparing financial statements which give a true and fair view of the state of affairs of the company as at the end of each financial year and of its profit or loss for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the company.

These Financial Statements have been prepared in accordance with the Special Provisions of Part 15 of the Companies Act 2006 relating to small companies.

Approved by the Board of Trustees on 22 August 2017 and signed on its behalf by:

D Williams  
Trustee

The notes form part of these Financial Statements.
1. ACCOUNTING POLICIES

a) Basis of preparation and assessment of going concern

The financial statements have been prepared under the historical cost convention with items recognised at cost or transaction value unless otherwise stated. The financial statements have been prepared in accordance with the Statement of Recommended Practice: Accounting and Reporting by Charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) issued on 16 July 2014 and the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) and the Charities Act 2011.

The Charity constitutes a public benefit entity as defined by FRS 102.

The trustees consider that there are no material uncertainties about the Charity's ability to continue as a going concern.

b) Reconciliation with previous Generally Accepted Accounting Practice

In preparing the accounts, the trustees have considered whether in applying the accounting policies required by FRS 102 and the Charities SORP FRS 102 a restatement of comparative items was needed. No restatements were required.

c) Fund Accounting

Unrestricted funds are available for use at the discretion of the trustees in furtherance of the general objectives of the charity.

Restricted funds are those funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for specific purposes.

d) Company Status

The charity is a company limited by guarantee. The members of the company are the trustees. In the event of the charity being wound-up, the liability in respect of the guarantee is limited to £1 per member of the charity.

e) Incoming Resources

All incoming resources are included in the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy. Income from contracts which are related to performance is recognised as the charity earns the right to consideration by its performance.
1. ACCOUNTING POLICIES (cont’d)

f) Resources Expended

All expenditure is accounted for on an accruals basis.

Charitable activities comprise those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them.

Governance costs include those costs associated with meeting the constitutional and statutory requirements of the charity and include audit fees and costs linked to the strategic management of the charity.

g) Pension Costs

The charity operates a defined contribution pension scheme for the benefit of its employees. The cost of contributions are charged to the Statement of Financial Activities in the year they are payable.

2. INCOME FROM CHARITABLE ACTIVITIES

<table>
<thead>
<tr>
<th>Contracts</th>
<th>£</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>London Borough of Sutton</td>
<td>193,889</td>
<td>197,987</td>
</tr>
<tr>
<td>NHS Sutton Clinical Commissioning Group</td>
<td>-</td>
<td>35,000</td>
</tr>
<tr>
<td>NHS Wandsworth Clinical Commissioning Group</td>
<td>10,000</td>
<td>-</td>
</tr>
<tr>
<td>Group</td>
<td></td>
<td></td>
</tr>
<tr>
<td>All</td>
<td>£203,889</td>
<td>£232,987</td>
</tr>
</tbody>
</table>

All of the £232,987 received in 2016 related to unrestricted funds.

3. COST OF RAISING FUNDS

<table>
<thead>
<tr>
<th>Direct costs</th>
<th>Support costs</th>
<th>TOTAL 2017</th>
<th>TOTAL 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Publicity</td>
<td>£Nil</td>
<td>£465</td>
<td>£465</td>
</tr>
</tbody>
</table>

All of the £4,032 expenditure in 2016 was charged to unrestricted funds
4. **CHARITABLE ACTIVITIES**

<table>
<thead>
<tr>
<th></th>
<th>Direct costs</th>
<th>Grant funding of activities</th>
<th>Support costs</th>
<th>TOTAL 2017</th>
<th>TOTAL 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff and volunteers costs</td>
<td>99,044</td>
<td>-</td>
<td>-</td>
<td>99,044</td>
<td>107,331</td>
</tr>
<tr>
<td>Subcontractors</td>
<td>-</td>
<td>56,900</td>
<td>-</td>
<td>56,900</td>
<td>79,800</td>
</tr>
<tr>
<td>Property costs</td>
<td>-</td>
<td>-</td>
<td>8,041</td>
<td>8,041</td>
<td>9,322</td>
</tr>
<tr>
<td>General running costs</td>
<td>-</td>
<td>-</td>
<td>6,160</td>
<td>6,160</td>
<td>7,265</td>
</tr>
<tr>
<td>Management costs</td>
<td>-</td>
<td>-</td>
<td>5,596</td>
<td>5,596</td>
<td>7,192</td>
</tr>
<tr>
<td>ICT costs</td>
<td>-</td>
<td>-</td>
<td>2,894</td>
<td>2,894</td>
<td>2,738</td>
</tr>
<tr>
<td>Finance costs</td>
<td>-</td>
<td>-</td>
<td>3,865</td>
<td>3,865</td>
<td>4,820</td>
</tr>
<tr>
<td>Other support costs</td>
<td>-</td>
<td>-</td>
<td>4,407</td>
<td>4,407</td>
<td>4,920</td>
</tr>
<tr>
<td>Governance costs (note 6)</td>
<td>-</td>
<td>-</td>
<td>1,466</td>
<td>1,466</td>
<td>2,337</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>£99,044</strong></td>
<td><strong>£56,900</strong></td>
<td><strong>£32,429</strong></td>
<td><strong>£188,373</strong></td>
<td><strong>£225,725</strong></td>
</tr>
</tbody>
</table>

All of the £225,725 expenditure in 2016 related to unrestricted funds.

All of the above costs relate to the sole activity of the Charity which is to offer people a chance to have their say and help improve local health and social care services.

5. **GOVERNANCE COSTS**

<table>
<thead>
<tr>
<th></th>
<th>TOTAL 2017</th>
<th>TOTAL 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Examiner's fees</td>
<td>1,440</td>
<td>1,440</td>
</tr>
<tr>
<td>Board Meetings and AGM</td>
<td>-</td>
<td>884</td>
</tr>
<tr>
<td>Other costs</td>
<td>26</td>
<td>13</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>£1,466</strong></td>
<td><strong>£2,337</strong></td>
</tr>
</tbody>
</table>

6. **STAFF COSTS**

<table>
<thead>
<tr>
<th></th>
<th>TOTAL 2017</th>
<th>TOTAL 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages and salaries</td>
<td>85,431</td>
<td>91,066</td>
</tr>
<tr>
<td>Social Security costs</td>
<td>8,432</td>
<td>9,209</td>
</tr>
<tr>
<td>Pension costs</td>
<td>4,272</td>
<td>4,553</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>98,135</strong></td>
<td><strong>104,828</strong></td>
</tr>
<tr>
<td>Other direct costs</td>
<td>909</td>
<td>2,503</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>£99,044</strong></td>
<td><strong>£107,331</strong></td>
</tr>
</tbody>
</table>

Average number of employees based on full-time equivalents

- No: 3
- No: 3

No employee received remuneration amounting to more than £60,000 in either period.

Total employee benefits received by key management amounted to £38,152 (2016: £37,774).

7. **DEBTORS**

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Other debtors and prepayments</td>
<td>£195</td>
<td>£187</td>
</tr>
</tbody>
</table>

18
8. CREDITORS: Amounts falling due within one year

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other creditors and accruals</td>
<td>£4,202</td>
<td>£8,116</td>
</tr>
</tbody>
</table>

9. STATEMENT OF FUNDS

<table>
<thead>
<tr>
<th></th>
<th>At</th>
<th></th>
<th>At</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>31 March</td>
<td>Incoming</td>
<td>Resources</td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>2016</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>General funds</td>
<td>£16,784</td>
<td>£203,889</td>
<td>£188,838</td>
</tr>
</tbody>
</table>

The General Fund represents the free resources of the charity which are not designated for particular purposes.

10. RELATED PARTIES

During the year, no trustees (2016: 3) were reimbursed for travel expenses (2016: £308).
The trustees received no remuneration in either year.