

# On equal terms

Then and now

Healthwatch Walsall Annual Report 2020-21

# **Contents**

	Page
About us	3
Message from Chair of Healthwatch England	3
Message from our Chair	4 to 5
Highlights from our year	6
Then and Now 1. Access to GP services	7 to 8
Then and Now 2. Communication: Walsall Manor Hospital	9 to 10
Working with Walsall Together	11 to 12
We have worked with	13
Responding to COVID-19	14 to 15
Case Studies	16 to 18
Engage & Share Pilot	19 to 20
First Friday Focus	21 to 23
Our Befriending Service	24
Volunteers	25 to 26
Finances	27
Next Steps	28
Thank You	29
Statutory Statements	30
Methods and Systems	31
Contact details	32

### About us

#### Here to make health and care better

We are the independent champion for people who use health and social care services in Walsall. We are here to find out what matters to people and help make sure your views shape the support you need, by sharing these views with those who have the power to make change happen.

### Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.

### Our goals



#### Supporting you to have your say

We want more people to get the information they need to take control of their health and care, make informed decisions and shape the services that support them.



#### **Providing a high** quality service

We want everyone who shares can experience or seeks advice from us to get a high quality service and to understand the difference their views make.



#### **Ensuring your views** help improve health & care

We want more services to use your views to shape the health and care support you need today and in the future.



"Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone's views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives."

Sir Robert Francis QC, Chair of Healthwatch England

# Message from our Chair



Mandy Poonia Healthwatch Walsall Chair

"Healthwatch Walsall Annual Report provides an overview of the activities and services provided. The report highlights some of the challenges our communities face in accessing health and social care services in Walsall and how we have worked to address these. Primarily, our role is to gather views and opinions of our local communities and collate data about people's experiences in accessing health and social care services within the Borough.

2020/21 has again been a difficult year. Fortunately, the vaccine programme has been rolled out, however, the new variant brings its own challenges. Healthwatch Walsall has remained diligent in communicating vital and important information through various platforms. Healthwatch Walsall continues to set its annual priorities based on the intelligence and data we gather from our local communities. It is important that we are told by our public, the areas of health and social care that need to be addressed. Healthwatch Walsall recognises there are cohorts of our communities who are seldom heard. This is an aspect that we aim to address in our future work.

Our work continues to be driven by what we are told. It is important you share your experiences and challenges with us, so that we can speak with stakeholders and providers, in order to inform positive change with local service provision.

Our purpose is to influence and help make better care for the public and for providers to understand what people want and their concerns, so your questions, concerns and compliments would be welcomed. At Healthwatch Walsall we are independent and a 'critical friend' with regard to the NHS and social care, we have recently escalated a matter in Walsall, regarding GP's to the Care Quality Commission (CQC), which is currently being deliberated and we are awaiting a response, so that we can provide some assurances to our local communities".

"We have established positive relationships with stakeholders and providers in Walsall which is pertinent to our role. Members of the team currently sit on various strategic boards, ensuring representation of our local communities. Our contract with Walsall Together allows us to work and engage with service users in relation to key clinical pathways. Our Senior Engagement Lead continues to strengthen links with patients and facilitates several forums for service users".

#### **Priorities**

"Our recent priorities have been based on gathering information from the Trust, looking specifically at communication, with recent work looking at experiences of people with learning disabilities in care homes. Healthwatch Walsall has also commenced a project, working collaboratively with Black Country Healthwatch in addressing the mental health needs of young people. The aim is to look at the challenges that young people face in accessing social and health care services, which it is hoped will provide some important intelligence for us to provide change and improvement to local service providers, thus aiming to improve mental heath services for young people".

#### **Looking Forward**

It is anticipated that we will resume 'Enter and View' visits on various health and social care services as soon as the Government allows us. Clearly, during the pandemic we have not been able to carry out these visits safely. 'Enter and View' visits are an important aspect of our work as we can observe first hand the environment and the way in which residents and patients are treated and learn about their experiences. The pandemic has had a huge impact on our local communities and we will be aiming to work with other organisations in order to work towards recovery and building resilience.

Finally, we will continue to serve our local communities, through listening to their experiences and ensuring their voices are heard at all levels within health and social care arenas. Therefore it is important you get in touch with us so we can make a difference".

# Highlights from our year

Find out about our resources and how we have engaged and supported people in 2020-21.

#### **Reaching out**



We have been contacted by

#### Almost 900 people

this year about their experiences of health and social care.

We gave signposting advice and information to

#### Over 200 people

this year.

#### Responding to the pandemic



We engaged with and supported

#### Almost 19,000 people

during the COVID-19 pandemic this year.

Via our social media platforms, online meetings, website, dedicated Service Feedback Centre, daily incoming calls and other work. We started First Friday Focus sessions in June 2020 attracting different audiences monthly.

#### Making a difference to care



We published

#### 19 reports

about the improvements people would like to see to health and social care

From this, we made 126 recommendations for services improvements.

#### Health and care that works for you



#### 20 volunteers

helped us to carry out our work. They contributed 30 days.

## We employ 5 staff All are full time equivalent, the same as the previous year.

We received

### £ 190,450

from our Local Authority in 2020-21.



# 1. Access to GP services

### Then: In 2019/2020 the public told us they had poor access to GP services

This project was an agreed piece of work from patients/service user experiences we received during 2019/2020. Patients indicated that they were having difficulties contacting a number of GP surgeries/practices across the Borough.

Patient intelligence was gathered from various sources: our online Service Feedback Centre, face to face outreach, calls to our Freephone telephone number, our various social media platforms and our Email info@healthwatchwalsall.co.uk account.

It should be noted that some of this intelligence was gathered prior to the pandemic. Patients were still finding it difficult to contact GP surgeries/practices for diagnostic investigation and results, repeat medication and information on test results.

We undertook both an online survey and a mystery shopper project asking patients about access to their GP and their recent experiences. At the same time, staff and volunteers rang several GP practices recording how many calls it took to get through, how long any recorded message was and how long they waited before a practice employee spoke to them.

Work was done at various times of the day over different days during a six week period. Data was collected and both the survey outcomes and mystery shopper process were analysed and a report drawn up. There was a summary single page report and a full report issued.

#### **Summary of our findings:**

- One respondent said that they had attempted 120 times to telephone their GP surgery/practice.
- 55 respondents telephoned between 1 to 6 times before being able to contact their GP surgery/ practice.
- 17 respondents who were not able to contact their GP surgery/practice did nothing, 12 had sought advice through the internet, 10 had self-treated and 10 had spoken to a pharmacist.

#### **Summary of our recommendations:**

- Clinical and professional staff have access to a dedicated non patient telephone number to 'each' GP surgery/ practice when needed for such things as medication updates, safeguarding issues etc.
- Access to adequate and well staffed telephone systems is very important.
- Digitally excluded patients (no internet) should still be able to access GP services via telephone.



"I would much prefer to speak to a person when I phone instead of a recorded voice. It is very impersonal and cold" "tried 120 times one morning and it was either engaged or just rang out after the recorded message"



### Now: Had to escalate to the CQC

We have recently escalated concerns from the public about lack of GP services contact and access at two surgeries in Walsall. These concerns have also been shared with Care Quality Commission (CQC) and the commissioner of services.

Our aim would be that the providers and commissioner identify and implement improvements of access to GP services in the short and long term.

We continue to receive service user experiences/concerns and we are contacting the surgeries or signposting them to a complaints advocacy service.



To see the full and summary report, visit our website to read and download.

Link for full report: <a href="https://tinyurl.com/wdb65vn2">https://tinyurl.com/wdb65vn2</a>

Link to summary report: <a href="https://tinyurl.com/7uk9f5f3">https://tinyurl.com/7uk9f5f3</a>



# 2. Communication: Walsall Manor Hospital (WMH)



Feedback received from members of the public about communication at Walsall Manor Hospital, formed the basis of this project. We wanted to find out about people's experiences of communication at Walsall Manor Hospital, assess how patients felt about their experiences and to hear about their concerns so that they could be presented to key stakeholders.

In addition, we looked back at our intelligence gathered and patient or relative reviews left on our Service Feedback Centre website, from the 1st April 2020 to 30th March 2021 to see what service user experiences were.

We also looked at NHS Choices website and the Trust's own Facebook page and reviews of patient comments.

In addition to methods noted previously, we also researched CQC published reports on the various departments and aspects of services delivered at the Hospital.

#### Summary of our findings:

- Feedback between Walsall Manor Hospital (WMH) and other care service providers majority mixed.
- Feedback between WMH and GP majority mixed.
- Patient information cards or health passports are not being regarded/used by staff.
- Communication for people with sensory impairments can be improved.
- Discharge plans are not always communicated with families or care providers.

#### Summary of our recommendations:

- · Cancelled appointments are communicated with patients in a timely manner to reduce/cease patients turning up for cancelled appointments.
- Update website and other platforms around what services are open available, which are closed or have delivery restrictions.
- Improve methods or formats of communicating with people with sensory impairments.
- Ensure there is a standardised communication liaison process between departments that works and is adhered to.



"When they do answer they are not able to give clear updates on our family member". "Care for my disabled son and have a health passport for him, the hospital staff are ignoring these or using them inconsistently, this is vital information that is being ignored". "Still waiting for an urgent follow up consultation".



### **Now: CQC 'Requires Improvement'**

From the CQC inspection in March 2021 the CQC has rated many service areas as 'Requires Improvement'. Healthwatch Walsall will monitor this closely.



To see the full report visit our website and the CQCs website

Link for HWW full report: <a href="https://tinyurl.com/5tjrzwfs">https://tinyurl.com/5tjrzwfs</a>

Link to CQC report: <a href="https://www.cqc.org.uk/location/RBK02">https://www.cqc.org.uk/location/RBK02</a>

# Working with Walsall Together



#### **Walsall's Integrated Care Partnership**

Walsall's Integrated Care Partnership is a collaboration between Walsall NHS Healthcare Trust, the Black Country Clinical Commissioning Group, the Black Country Healthcare NHS Foundation Trust, local Walsall Council, GP's, Primary Care Networks, One Walsall and Walsall Housing Group (whg).

Its vision is collaborating for happier communities, with its aim as a partnership to work together to:

- Promote equality and reduce inequalities by focusing on the wider determinants of health.
- Provide high quality and accessible care for all who need it.
- Improve the health and wellbeing outcomes for the population of Walsall.
- Develop a skilled, motivated, and happy workforce.
- Make best use of all partner resources.

Healthwatch Walsall were commissioned by Walsall Together (WT) in 2019 as part of the patient, service user and citizen engagement around the 6 Key Lines of Enquiry: Diabetes, Cardiology, Respiratory, Mental Health, End of Life & Palliative Care, and best start in life early child.

Before the COVID-19 lockdown we had made positive steps in capturing patient/service user experiences of their care pathways through community outreach and shadowing service providers in the community.

However, in March 2020 we had to start to look at how we undertook engagement differently without the opportunity to undertake face to face contact. We did this by increasing social media activity and through promotion and collaboration with providers and the voluntary and community sector.

#### What have we done so far?

We have held more than 20 virtual workshops to capture patients, service users lived experiences.

- Engaged with over 200 people through our workshops and engagement.
- We have tabled 3 reports on living and managing with diabetes, respiratory and heart conditions.

The reports are now being looked at through the Clinical and Professional Leadership Group (CPLG) to work collaboratively on feedback to patients and service users on how the recommendations and intelligence can be used to support co-production and care pathway redesign. The reports can be found at: https://healthwatchwalsall.co.uk/our-reports.

#### **Service User Group (SUG)**

The Service User Group is made up of a number of individuals, or people who represent those, with long term health conditions and experiences of health and well-being inequalities. The group meet six times a year and using the skills, knowledge, and experience of all the members they work together to help us continually improve our plans for health and care services in Walsall.

The feedback received is taken back to the partnerships Senior Management Team and Clinical and Professional Leadership Group and is used to inform and shape service development. As part of the ongoing development of the WT SUG we want to unsure that we are fully representative of the wider Walsall population and welcome people in Walsall who have an interest in health/social care to be part of this.

#### Phil Griffin – Walsall Together Service User Group Chair

We have worked with patients, service users and carers over the last year with the aim of finding out what they think of health services they're accessing or have accessed. This has been hugely challenging given the need to move to different types of engagement media from those we were able to use initially before the pandemic began.

Using different engagement approaches we have learned a lot about services patients have accessed or are still accessing and have shared our findings in the form of engagement reports with the local providers of services and those that commission them with the intention that this would help to improve services at the point of delivery right across the patient journey.

The aim is to enable and empower communities and individuals to access the care they need as early as possible by building resilient communities and having accessible primary care and other community based specialist services with access to hospital and specialist services when there is a need. The aim is to promote and maintain healthier lifestyles and for everyone to have access to the care they need, when they need it, provided by the right person with the right skills in a community setting but with access to hospital or specialist care when there is a need.

This model of care will rely on greater support and involvement of the voluntary sector in Walsall and community associations which did great work during the pandemic supporting local communities.

We look forward to continuing our work with Walsall Together partners and the communities that we serve and to bring about positive change in the care that people receive.

#### **Walsall Diabetes Peer Support Group**

Through the workshops and through COVID-19 a large number of participants highlighted the impact on diabetes, loneliness, anxiety and the importance of people coming together and sharing experiences. As a result, we have been working in conjunction with Diabetes UK and we have established a bimonthly Diabetes Peer Support Group. This has been very much welcomed and we have had presentations around the impact of mental health and diabetes, health living and support and medicines management.



"The presentation was brilliant and the Q&A answers excellent. We were blessed to have this. Perhaps there could be a Walsall Diabetes Videocast for new diabetics to unlock the mysteries of medication. Even older experienced chaps like me learned stuff yesterday. The response to my Victoza issue was far better than the Manufacturers".

#### **Co-production**

So that this work is of most value, it is important the intelligence and feedback received is used by providers to highlight what people think needs to be changed in health and social care delivery and in the process of service and care pathway change. If services cannot change for whatever reason, we need to ensure that we also feedback to those who have shared their information.

We must though recognise the digitally excluded. We welcome the opportunity when we can undertake face to face community and service user engagement to engage with those excluded.

We would like to say a big thank you to the providers of Walsall Together and partners for supporting our work and the commitment to patient and service user engagement, most importantly to those who have shared their stories and experiences.

More information about Walsall Together and how local people can get involved can be found on their website www.walsalltogether.co.uk.

### We have worked with

Over the year we work with a number of organisations to help raise awareness, pass on important service or condition related information as well as develop and improve service user experiences to get the best health and social care for Walsall people we they need it.































**Patient Participation** and Liaison Group







# **Responding to COVID-19**

Healthwatch Walsall plays an important role in helping people to get the information they need, especially through the pandemic.

The insight we collect is shared with both Healthwatch England and local partners to ensure services are operating as best as possible during the pandemic.

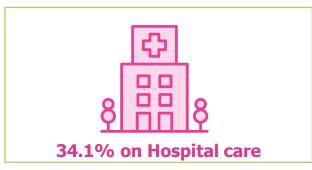
#### This year we helped over 200 people by:

- Continuing to provide up to date local, regional and national COVID-19 information via our website.
- Enabling people to get in touch with services that did not respond.
- Signposting people to services or organisations that they did not consider or know about for help.
- Continuing to support the vaccine roll-out with local hub and vaccination centre information.

# What people shared...

#### Top four areas that people have contacted us about:









#### The typical issues that people had:

- Lack of contact and access to GP services.
- No face to face GP appointments.
- Couldn't get repeat prescription, needed to make an appointment but couldn't.
- Length of surgery telephone messages before speaking to a staff member.
- No ID no GP registration.
- Hospital appointments being cancelled and patients not being informed in a timely manner.
- · Hospital patient records misplaced.
- Imaging appointments and results not readily available.
- Unable to get through to hospital to get updates on patients admitted on ward.
- The style that some hospital staff talk to patients.
- · Variation in cost of care in own home.
- Waiting for insulin injection from community based nursing.
- Being asked to pay for dental work previously available on NHS.
- Taken off the Dental practice list due to COVID-19 now got to re-register.
- Need a disability friendly dental practice.



#### Contact us to get the information you need

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch Walsall is here for you.



www.healthwatchwalsall.co.uk



**6** 0800 470 1660



info@healthwatchwalsall.co.uk

### **Case Studies**

#### Getting people in touch with their GP Practice

Pre and during COVID-19 people told us how difficult it was to get in touch with their GP practice, particularly in two Walsall GP surgeries. With over hundreds of calls made, but not being able to get through, getting cut off etc or asked to call back the next day. In some instances professionals from Children Services, Social Services, Safeguarding and a local care home representative contacted Healthwatch Walsall (HWW) to advise that they could not get in touch with practices to attain important information or medication for a resident.

HWW tried continuously to contact the practice and after much perseverance and with the patients or organisation representative permission passed the request for contact on to the surgery staff. In the short term this resolved some of the contact issues.

However, similar issues continued to be brought to our attention. We continued to assist wherever possible and informed patients of alternative care options such as our 'Extra GP Appointments' system in Walsall to access a GP or the Urgent Treatment Centre (UTC) and of course NHS 111.

We escalated these issues to the Care Quality Commission (CQC), the Primary Care Service Commissioner at our Clinical Commissioning Group (CCG), patients also complained directly to local Councillors. All this has resulted in news coverage on the BBC with interviews from local patients and requests for patient access improvement from local Councillors.

#### **Communication with Walsall Manor Hospital**

A service user contacted Healthwatch Walsall as it had been confirmed by Walsall Manor Hospital, seven months previously, they needed a knee operation. Seven months on from a diagnosis and a treatment plan the patient had not had a date for the operation or an any updated information on the current situation from Walsall Manor Hospital.

The patient also asked Walsall Manor Hospital if they could supply them with a letter as proof to their employer.

Healthwatch Walsall contacted the 'Patients Advice and Liaison Service' (PALS). PALS contacted the patient to say there was a backlog due to COVID-19. The Trust confirmed the patient was on the waiting list and would be appointed an operation date as soon as possible. Seven weeks later the patient had a telephone consultation with a Doctor from Walsall Manor Hospital, nine months after the diagnosis. The Doctor was unable to confirm the patient required an operation, instead the patient was booked in for an X-Ray. The Doctor told the patient 'He needed to make his mind up if they needed an operation or not'.

The patient had a manual job, and their medical condition was making it difficult for them to be fully mobile. Walsall Manor Hospital supplied a letter after a period, but the patient's job title was wrong. The letter stated the patient worked for a music corporation when in fact they worked for a Local Government department.

10 months after the patient's original diagnosis it was confirmed, again, that they still needed an operation. PALS did supply the patient with a letter for his employer with the correct job title.

"Well it has been a long time coming but they have finally sent the letter I have asked for so I would like to say a VERY BIG THANK YOU for all the hard work you have done and for putting up with people like me very much appreciated many thanks.

#### Peoples ideas going in to our new build A&E

One of our First Friday Focus meetings was themed around the Walsall Trusts proposed new build, Accident & Emergency Department (A&E). During the presentation an attendee raised the importance of having a changing room in the department for ease of access to individuals and carers of people with complex medical needs.

It became apparent that the Trust and architects had not allowed or included for such facility albeit a legal requirement and a need for other service users. Healthwatch Walsall later organised three focus groups in conjunction with the Trust Project Manager to listen to the potential needs, ideas and suggestions from the deaf/hard of hearing, blind/visually impaired and carers or relatives of people with complex medical needs.

The Trust Project Manager proved to be very interested and took some of the ideas back to their team and the projects architects. Healthwatch Walsall also contacted the Clinical Commissioning Group specifically regarding the changing room and shortly after it was agreed to include the changing room as part of the project.

Additional input from the groups will be revisited further down the line in the project development and include an overview of how some design elements are results of the focus group conversations and service user ideas.



"This is fantastic news. I'm so pleased that we made an impact. This will be of huge benefit to so many disabled adults and children".

#### **Getting the information needed**

Healthwatch Walsall were contacted by an outpatient of Walsall Manor Hospital who asked for out help in trying to get his results of an MRI scan. The service user had a Prostate Check, which involved an MRI scan in the Urology Department at Walsall Manor Hospital in February 2020.

Concerned about the results the patient contacted his own GP in August, who confirmed an area was showing up as a hotspot. The GP could not confirm anything as he needed the Consultant/Doctor at the hospital to interpret the results.

The patient contacted the Urology Department at Walsall Manor Hospital to try and get his results, but they were unable to speak to anyone. They then contacted PALS to help.

The patient should have had a telephone consultation from a doctor at the hospital. This did not take place due to the patient's notes being sent to the wrong department (sent to Respiratory instead of Urology) The hospital did phone them and apologise. After several attempts to speak to the Hospital again and having no answers the outpatient contacted Healthwatch Walsall.

Healthwatch Walsall contacted PALS at Walsall Manor Hospital relaying the patient's story. The same day a Nurse in the Urology Department spoke with the outpatient and gave them their results. The Nurse was also going to arrange a biopsy.



"Thank you for your help. I am really pleased, someone phoned me today".

#### Patients pain driving them to suicide

A service user contacted Healthwatch Walsall as they were in pain and said they needed an operation. The service user's pain was leading them to have suicidal thoughts. They spoke very little English, the language barrier made it difficult for them to communicate and hindered each parties understanding. The service user had been an inpatient previously at a local Acute Hospital who said they could not help.

By spending time listening, understanding and communicating, to the service user's concerns it became apparent to us that the service user had additional complex care needs such as housing, mental health issues and physical health problems.

Healthwatch Walsall contacted the service user's GP Practice and relayed the conversations they had with the patient as permission had been granted to do this.

The GP Practice decided to make a referral for a Multidisciplinary team (MDT) so that health and care services could be co-ordinated to meet the need of the individual with complex care needs. Seven days later the service user had an appointment for a Mental Health Assessment where an interpreter had been booked.

In addition the service user secured an appointment at University College London Hospitals which was their original wish.

#### How to get in touch to make a difference

People can get in touch with us in different ways, to share experiences, seek information, ask a question or to book to attend any of our public meetings. So here is how to contact us:

- Leave a service review on our 24/7 online Service Feedback Centre which can be found on our website: https://healthwatchwalsall.co.uk/services/ .
- Leave a message/ comment via our website: https://healthwatchwalsall.co.uk/contact/ .
- Email us using: info@healthwatchwalsall.co.uk .
- Telephone us on our FREE phone number: **0800 470 1660**.
- Or write to us (our address is on the rear of this annual report).



# Our Engage & Share Pilot



Due to the suspension of Enter and View because of COVID-19, we set about developing an initial pilot alternative that used technology to gain service insight and service user views.

In the past, we would have been able to go into a service, see, hear, smell and ask about the service delivery and its impact on service user lives and their loved ones.

We came up with the alternative and developed a delivery methodology which involved working with the service commissioner, clinicians involved and Local Authority social care operatives in their care/nursing home quality team.

We called it 'Engage & Share'. Initially liaising with the Local Authority, services commissioner of Learning Disabilities care homes, we developed questions for service users, relatives and carers, staff and managers.

With questions now in place for those involved. We decided that we could gain intelligence by using telephone interviews, an online questionnaire that mirrored the interview questions or if agreed and appropriate, use of video calls. We offered parties the choice to take part and the opportunity to withdraw if they wished.

We involved volunteers and over a period of a month we engaged with 4 separate Learning Disability care homes and recorded their responses to our questions.

As this could only be delivered if participants chose to be involved a letter was sent and made available for each participant. Additional easy read material was made available. Each participant was asked to identify a keyword rather than their personal details so that they could withdraw if they chose to so at a later date and we could remove their answers as necessary.

When delivering the pilot specially identified staff and volunteers were used and briefed prior and feedback was gathered during the four week period during which the project was carried out. This enabled any relevant queries or issues to be addressed and the pilot to carry on.

Once the engagement had been finalised the data was analysed and draft reports created and shared with the service provider for comment and also to check the report contained the discussed information. Once the provider had commented and any amendments made the reports were approved by the Healthwatch Advisory Board and subsequently published on our website, shared with: local Councillors, service commissioners, the service providers, CQC, our Local Authority including their internal social care quality team and of course the general public.



#### Contact us to get the information you need

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch Walsall is here for you.



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#### A summary of the main findings included:

- Service users and relatives felt that the service, facilities and care they accessed was good.
- There was reduced access to outside activities and social activities due to COVID-19 lockdown, which service users greatly missed.
- Access to GP visits in the home if needed, was not always available.
- Service users missed personal socialising and simply a hug that was not possible during COVID-19.
- Develop service user opportunities to work in garden area/duties when possible.

#### Some of the comments we received during the pilot from service users

"I can't attend the motivational hub x2 weekly because I have to stay home. The staff support me to go on zoom with my friends, so things have changed because of the germ"

"Staff stop me from getting hurt if I was worried about anything I would let staff know"

"I have just had my room decorated in my choice of colours and what I wanted so this has improved where I live"

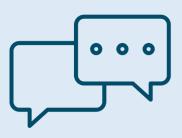
"Food is lovely here I had onion rings and salad and breaded mushrooms today"

"It's the same as it normally is"

#### A summary of the main recommendations

- Walsall CCG to be made aware of GPs that refused genuine home visit requirements to residents.
- Individual annual review/health checks to be completed.
- Explore use of outside areas for outside activities.
- Explore community venues and available day centres for redeveloping social engagement with others when safe to do so.
- Develop service user opportunities to work in garden area/ duties when possible.

The final reports can be located on our reports section of our website: www.healthwatchwalsall.co.uk . Link to section: <a href="https://healthwatchwalsall.co.uk/our-reports/">https://healthwatchwalsall.co.uk/our-reports/</a>.



#### Share your views with us

If you have a guery about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch Walsall is here for you.



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# **Our First Friday Focus...**



During the Pandemic HWW were unable to undertake face-toface engagement so the driver for this form of engagement was developed. In June 2020, on the first Friday we held an online focus group style session on "Hello Walsall, how are you doing". This was in the style of an informal chat and was unscripted with free flow dialogue. The purpose of this was to see where this led to, and to see how easy it was to engage with the public online.

We advertised the event through all our networks and used the Zoom online digital platform for the event. We chose the subject to gain intelligence about the effects of Covid-19 on the citizens of Walsall. Given that it was a free flow conversation, this utilised our communication and engagement skills to ensure the discussion was a success.

On this occasion we didn't have a guest speaker but all the Healthwatch Walsall team were present and contributed fully to the session which was recorded with the consent of participants. It was very well received and following an informal evaluation, we agreed as a team, that a serious of focus groups would be held on the first Friday of every month.

To come up with a "catchy" marketing style, we named the sessions as 'First Friday Focus...'(FFF) and the marketing is similar for each event which is now a recognised brand.

Since the start of the FFF sessions, our momentum has grown, and we now offer the platform to stakeholders/partners as a way to support engagement with the public. We are joined not only by regular attenders, but we attract new audiences each month dependent upon the topic.

#### Friday 3 July 2020 – Domiciliary Care

General discussion held around domiciliary care service provision in the Borough during the pandemic. Some of the gueries raised were around early access to PPE, whether staff were allowed to stay on site to reduce outside contact and whether easy read information was available.

Impact – One of the attendees was from a LD care provider and HWW were pleased to send the attended a copy of or LD Directory of Services.

#### Friday 7 August 2020 – Primary Care Networks

Updating the public on the status of the PCNs within Walsall generating a lot of discussion.

Impact – Information about the integrated phone number was made available and from this one of the attendees was able to speak to two of the social prescribers.

#### Friday 4 September 2020 – Access to GP Services

This session was held to support the Healthwatch Walsall Methods of Access to GP Surgeries work project. A general discussion was held around how people access services and how digital exclusion will affect the citizens without IT access. One of the social housing providers in attendance advised that 40% of their tenants do not have wi-fi and that services need to be available for all including those most disadvantaged, different backgrounds and cultures.

Impact - The session allowed citizens to have their view heard about accessing GP services all of which were included in the final report.

#### Friday 2 October 2020 - Mental Health IAPT

It is clear that throughout the pandemic there has been a significant impact on people's mental health and anxiety. In discussions with the Black Country Healthcare NHS Foundation Trust, there is a need to promote and make readily available information to patients and service users access to IAPT (Talking Therapies) for people with low to medium mental health and anxiety. Many people still do not know what IAPT entails and how to access it. With this in mind the IAPT Pan Trust Manager gave a presentation on IAPT, its benefits and how the programme can be tailored to people's needs. He also indicated that there are IAPT programmes for those with specific long term health conditions.

Impact- Information sharing with the public about how to refer into the IAPT service in Walsall.

#### Friday 6 November 2020 - A&E New Build

Patients, service users and relatives were able to share their views of needs within a A&E New Build for various communities such as the Deaf/Hard of Hearing, Blind/Visually Impaired, Learning disabilities around layout, lighting, space and facilities.

Impact-Three further Zoom meetings took place with the Trust Project Manager and seldom heard groups who were given the opportunity to share their views on new build raising issues around adult changing rooms and entrance issue for Blind/Visually impaired. Availability of video BSL interpreter was a point that was also raised and access to a BSL interpreter person raised and taken on board.

A major impact following Healthwatch FFF is that we have now received confirmation that funding has been made available to have an adult changing room prominently sited in the new A&E Department.

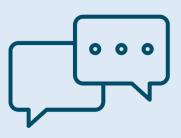
#### 4 December 2020 – Communication between Manor Hospital/Service Users

This session was held to support the Healthwatch Walsall work priority project and led to the collation of patient and relatives' experiences all of which will be fed into our Work Programme report. The guest speaker was the Trust's Medical Director who informed attendees of a new communication method whereby the Hospital now corresponds directly with the patient and this is copied to the GP, rather than the other way round.

Impact- Enabling greater patient understanding of their condition/service and allows greater self-care/ management.

#### Friday 8 January 2021 – Emergency Care

This was an information sharing service user session, about the new changes of service user access to urgent or emergency care given that there was a new process to identify the correct service for patients to access in place from January 2021. A presentation was given by Walsall CCG with a slide presentation and O and A session.



#### **Share your views with us**

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Impact- Raising awareness of new and important issues around accessing emergency care.

#### 5 February 2021 - Adult Safeguarding

This FFF was also held as an information session about safeguarding giving attendees an insight of the signs of abuse and harm. An informative presentation from the Walsall Safeguarding Partnership was given with shared examples of cases and what look for and what to do if abuse is suspected. This was followed by a Q and A session.

Impact-Raising awareness of signs of abuse and what to do in these circumstances.

#### Friday 5 March 2021 – Young People View of Manor Hospital

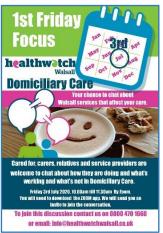
The March First Friday Focus was held as an opportunity for young people to share their experiences of inpatient stays at Walsall Manor Hospital. Although promotion of the event was widely spread across social media platforms, the attendance of young people was low. Parents of young people attended and shared past experiences of their children to young adults.

Impact- The views of service user experiences were passed on to the Quality Improvement Lead at Walsall Healthcare Trust.

The 'First Friday Focus' meetings continue to grow in popularity with the public and professionals. We continue to schedule current and interesting sessions attracting different audiences.

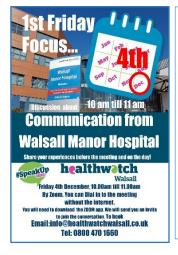
At the request of other Healthwatch, the format has been shared with them to enable them to develop their alternative meetings.

















# Our befriending service

During COVID-19 some of the roles we would have undertaken have been suspended. We realised there were many socially isolated people in the community who may have no one to communicate with which may impact on their mental and physical wellbeing.

We decided to set up a telephone befriending service for those in community social care and personal home settings. It was promoted via contact with our Local Authority and some participants joined from the work Healthwatch Walsall had undertaken.

This was successful and we had some 20 participants at one point. We have continued to use this opportunity and shared their experiences of local health and social care services. It also allowed us to signpost individuals to support organisations when needed and also to raise a safeguarding concern and a wellbeing check.



Here are two testimonials from participants of our befriending service.

"Hello Lynne, I don't know how to say the biggest thank you to you Lynne. You are a brilliant person to talk, I really appreciate how we can just talk about anything and some times forgetting the time, you always listen and there is always good advice from you"

Lynne has helped me a lot in becoming a befriend I was so happy on the first Friday force meeting when she asked if she could phone me ever since she rings me and I look forward to talking she's beautiful and amazing lady. So brilliant to have Lynne I feel so safe and blessed, as I don't go anywhere I look forward to her phone calls, feel very safe knowing I have a best friend who can talk about anything we, do have a lot to talk not just my health but on other topics like problems.

"Keep up the good work and I strongly recommend you. Biggest Thank you with hug's @ 20 and I feel so thankful knowing someone outside my family really cares for me. Thank you"

"Our conversations we have each week is a life saver to me". " I look forward to hearing from you, I can talk to you about anything, and some things I wouldn't even discuss with my family."

"During lockdown I have only had a family call maybe every two weeks for a few minutes" "I am isolated so its lovely to get a weekly call from you, you take your time listening to me ".

"I don't know what I would have done without you" "You are always pleasant and lovely to me, and we have a laugh which makes me feel better"



#### Share your views with us

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## **Our Volunteers**

At Healthwatch Walsall we are supported by 20 volunteers to help us find out what people think is working, and what improvements people would like to make to services.

#### This year our volunteers:

- •Helped people have their say from home, carrying out surveys over the telephone and online.
- •Took part in our pilot 'Engage & Share' asking questions about the delivery of the service and staff related questions over the phone.
- Sent in local service information and updates to help others.
- •Took part in valuable surveys that were planned and helped promote those surveys to family members, friends and people they knew.
- •Our volunteer Health Advisory Board (HAB) have guided and overseen our work programme and attended many strategic meetings to keep us informed of local service developments.

"The reason why, I really wanted to volunteer for Healthwatch Walsall is because this is the place where you can hear the publics' good or bad experiences they have had whilst visiting healthcare services. By acknowledging the public issues, Healthwatch Walsall becomes a voice for the public and have a positive impact on those who have concerns regarding any services. It does really enable people to have a better experience.

Therefore, I wanted to be part of this amazing community where I can provide as much help and support to make a little difference in someone's life. I will also get to meet new people and work as a team with different age, gender and race. I wish to gain many skills through my volunteering, such as communicating, teamwork, empathy and problem solving. I am really looking forward to work with Healthwatch Walsall as I feel like I will have a better understanding of what public go through in every day life and how Healthwatch Walsall works as a team to resolve those problems"

"My overall experience of volunteering with Healthwatch Walsall has been very positive. The team are very helpful, supportive and caring and I feel it has been a good experience in terms of gaining insight into local health and social care provision and learning how to interact with staff working in these settings. It also made me feel as if I was contributing into the community.

I feel I have gained confidence as a result of volunteering for Healthwatch, also it has helped me to realise that some of my skills from previous employment which I never thought I would use again are in fact very useful and can be transferred into other areas. Just to say that if you would like to keep on touch on a befriending basis I would be grateful of that, although maybe not weekly as I will probably not have time for that now!

Many thanks for your help, kindness and support over the time I have been with Healthwatch and I wouldn't hesitate to volunteer again"



Are you feeling inspired? We are always looking for new volunteers. If you are interested in volunteering, please get in touch at Healthwatch Walsall.



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### **Finances**

To help us carry out our work we receive funding from our Local Authority under the Health and Social Care Act 2012.



+ Balance B/F 2019/20 £19,410

#### **Expenditure**

■ Staff costs **£140,494** 

■ Operational costs £19,059

Support and administration

£33,362



# Next Steps

#### **Top priorities for 2021-22**

At the extra-ordinary Healthwatch Advisory Board held on 6 May 2021, the following two work priorities were agreed.

#### 1. Young People's Mental Health

This is a collaborative piece of work with three other Black Country Healthwatch, namely Healthwatch Wolverhampton, Healthwatch Dudley and Healthwatch Sandwell. The work will focus on transition into adult services.

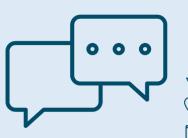
#### 2. Use of Walsall Urgent Treatment Centre

Healthwatch Walsall will commence a piece of work about the use of the Walsall Urgent Treatment Centre to understand why there is an increase in patient presentation and whether this is linked to people not being able to see their GP or not wanting a telephone consultation. The work will also look at length of waiting times, communication and quality of care.

The Healthwatch Advisory Board agreed that at this stage, only two main work priority areas would be agreed for Healthwatch Walsall to allow flexibility in year.

#### **Next steps**

- Healthwatch Walsall hope to recommence face to face engagement and resume Enter and View visits once national guidance allows this.
- We are building into our work plan time to follow up on recommendations made in reports published to the end of 2021 and ensure responses are received and shared.
- We continue to engage with seldom heard communities, and indeed during lockdown we have been successful in engaged with diverse groups. It is also pleasing to note that Healthwatch Walsall have a seat on the newly formed BAME group.
- All our staff, Board members and volunteers have equality and diversity training in order that this is embedded into all the work we undertaken.



#### Share your views with us

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### **Thank You**



Aileen Farrer Healthwatch Walsall Manager

"I would like to take this opportunity to thank all members of the public that have contacted and engaged with Healthwatch Walsall to share their views and experiences of health and social care services in the Borough.

Please continue to keep in touch with us by whatever means suits you best as this then allows us to ensure you have a voice with providers and commissioners of services. We are very much looking forward to being able to recommence face to face engagement and being out and about in Walsall meeting you all.

Thank you to the Healthwatch Advisory Board who provide us with a steer on our work programme and provide us with support and quidance in shaping our activity and helping to raise the profile of Healthwatch Walsall.

A huge vote of thanks goes to our loyal volunteers that support us at Healthwatch Walsall, their help is invaluable, and we appreciate all the dedication and time they give us. We could not do all we do without our volunteers, and we look forward to being able to meet up again soon.

Thank you to our stakeholders who support us in many ways, not least of which is listening to the views of the public.

It would be very remiss of me not to thank our staff team who, during the last 12 months of the pandemic, have worked tirelessly to support the citizens of Walsall, continuing to reach out to new groups, initiating and supporting new and innovative ideas of engaging with people virtually, which have been a great success. We are a small, but close team and I look forward to our next 12 months of working together".



# Statutory statements

#### **About us**

Healthwatch Walsall contract is held and delivered by: Engaging Communities Solutions, Unit 42, Staffordshire University Business Village, Dyson Way, Stafford, ST18 0TW.

Healthwatch Walsall uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

#### The way we work

Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Board consists of 8 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Through 2020/21 the Board met 5 times and made decisions on matters such as approval of the innovative 'Engage Share' pilot project in 4 learning disability homes in the Borough.

We ensure wider public involvement in deciding our work priorities. Our work priorities are based on public intelligence we receive through all of our public communication channels including our First Friday Focus... sessions.

#### Methods and systems used across the year's work to obtain people's views and experience.

This year we have done this by, for example piloting the 'Engage&Share' work which was implemented during the lockdown as a way of engaging with learning disability service users in the Borough to hear their views about health and social care services they received. We also collaborated with organisations running food banks to have Healthwatch Walsall leaflets in food packages. We also worked with the Carers Centre to have an article in their newsletter that is sent out to all carers in non-digital format.

We send our Annual Report to all statutory organisations, our stakeholders and partners, local Members of Parliament and Councillors and we publish on our website and ask stakeholders to also include a link on their websites. Hard copy reports are also made available as required.

Link to view or download our reports: <a href="https://healthwatchwalsall.co.uk/our-reports/">https://healthwatchwalsall.co.uk/our-reports/</a>

#### 2020-21 priorities

Project / activity area	Changes made to services	
GP Access	Presented to the CCG and we will follow up on recommendations made.	
Communications between Manor Hospital and Services Users	Has been published and we will be following up on recommendations made.	
Walsall Together Diabetes Key Line of Enquiry	Through the work undertaken on Diabetes pathway, a diabetes peer support group has been set up in conjunction with Diabetes UK. This is to be commended as there was no peer support group available in the Borough and this forum now allows for people with diabetes to meet and to learn about different issues that affect their long term condition.	

#### Responses to recommendations and requests

All providers when asked, provided information on request.

#### **Health and Wellbeing Board**

Healthwatch Walsall is represented on the Walsall Health and Wellbeing Board by Mandy Poonia, Chair, Walsall Healthwatch Advisory Board. During 2020/21 our representative has effectively carried out this role by attending numerous strategic committees and meeting with key stakeholders across the Borough to raise the profile of Healthwatch Walsall.



#### Contact us to get the information you need

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