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You will see artwork from Alumwell School children inserted into this report. We asked them to draw what health and social care services in Walsall looks like to them.

We would like to say a BIG THANK YOU to them for their art.



Message from our Chair

Healthwatch Walsall is a trusted and honest local partner working to improve health and social care services.

That's the feedback I've got from our many public events, inquiries and meetings with key health and social care leaders. I'm delighted that this vote of confidence was confirmed in the decision of our commissioners at Walsall Council to award us the Healthwatch contract for a further three + years.

At Healthwatch I've been determined that our volunteers, board and staff seek to make a difference in everything we do. In this review of the year, I am convinced we have done just that.

For example:

We launched a young people's service: Young Healthwatchers, that we will build on next year (see page 21)

We have expanded our statutory Enter & View visits into GP surgeries and hospital wards whilst continuing to visit residential care homes (see page 18)

We have published many reports on people's experiences, including cancer services and mental health services for young adults and are seeing these recommendations implemented (see pages 9 to 12)

We involved hundreds of Walsall people in a conversation about the NHS Long Term Plan and passed their views onto NHS leaders (see page 22)

We have held 4 public 'Spotlight' meetings where we hold NHS leaders and Council bosses to account over services and changes (see page 17)

You will read in the following pages that these examples represent just a small flavour of our entire work. This is made possible by our dedicated team of volunteers and staff - many thanks to all of you.

Healthwatch at its heart is an independent, evidence-based champion for local people that will engage, collaborate and hold health and social leaders to account.

At Healthwatch we never stand still, and over the next year we will focus on 3 major lines of enquiry:



Transforming Care

Hearing the views of people with learning disabilities and/or autism and their families and ensuring they are actively engaged in the co-production of new services.

Care at Home

More and more older people live in their own homes for longer and services need to support people to **do this. We will find out local people's experiences** and report on this.

Maternity Services

We will engage parents and seek their views of pre and post natal maternity services in Walsall.

We will also focus new resources on a Missing Voices project to work with specific communities such as the homeless, refugees & newly arrived citizens, invisible carers and LGBT+ to identify barriers in accessing health and social care and make recommendations to providers and commissioners.

With the formation of the Walsall Together Alliance there is a real chance to change, improve and integrate services for the benefit of local people. At Healthwatch we will continue to monitor these changes to ensure the public stay at the centre of service re-design and the voice of the public is strong and influential.

Healthwatch remains committed to being an open and welcoming organisation. Our board meetings **form part of wider 'Spotlight' public meetings, held** across the borough where we listen to the public and take forward their views and concerns. We look forward to seeing you at one of these in the coming year.

John Taylor
Healthwatch Board Chair

Message from our Healthwatch Walsall Manager

We would like to welcome you to the 2018/19 Annual Report. The report takes a look at the work that we have delivered, how we have made a difference to individual people and how we have worked with partner organisations to ensure that local people have a voice.

With the increase in popularity and use of social media, press and television, we have all become aware of the many challenges that continue to face our health and social care services both nationally and locally to Walsall.

Local people have their own views on how services should be delivered and we have been ensuring that we continue to talk to local people about what they feel is needed and sharing those views or comments with service commissioners or providers.

We have successfully worked on a range of priorities including: Cancer services, Care Assessments, Patient Discharge from hospital to name a few.

Healthwatch Walsall is also looking to ensure that there is a commitment for Patient Participation **Groups (PPG's) to play a key role in representing** patients at primary care level as noted in the NHS Long Term Plan.

The views and experiences we capture continues to increase, along with the number of requests for advice or support, whether that be signposting, escalating concerns or helping people get the answers.

We have also been working closer with a number of partners including: The Health and Wellbeing Board, Walsall NHS Healthcare Trust, Dudley and Walsall Mental Health Trust, Walsall Borough Council to identify how they are tackling some of the local health and social care challenges whilst still ensuring that we remain a critical friend.



Our volunteers continue to play a crucial role in the work that we do supporting outreach, undertaking: Enter and View visits, promoting our work and representing Healthwatch Walsall at a number of meetings and forums.

Local people and families are at the heart of our communities. It is about listening and understanding the needs of our communities. Ensuring we get the message to the right people to make a difference.

Paul Higgitt
Healthwatch Walsall Manager



About us

Healthwatch Walsall is the local consumer champion for people who use health & social care services in Walsall.

We act as an independent voice of local people, championing quality health and social care. We make sure that the needs and preferences of service users are central to how services are planned and delivered across Walsall.

Our Purpose

As Healthwatch Walsall, we exist to help make health and care services in the Borough work for people who use them. Everything we say and do is informed by our connections with patients and local people. Our main focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf. We find out what matters to people and to help make sure your views shape the support you need.

Our role

We make sure that local decision makers and providers put the experiences of people at the heart of their work. That is why we want you to share your experiences of using health and social care both good and bad. We use your experiences to encourage those who run services to act on what matters to you.

We are uniquely placed as a national network, with a local Healthwatch in every local authority in England.

Through effective engagement to gain service user feedback, we can raise awareness of key issues affecting local health and social care services and recommend improvements.

We:

- + Monitor service delivery through concerns raised, feedback received and our Healthwatch Walsall Advisory Board.
- + Analyse consumer feedback and data to produce evidence and insight reports.
- + Challenge commissioners and providers on the quality, access and delivery of health and social care services.



- + Develop services through public involvement and engagement to ensure the consumer voice is heard.

We also collaborate with other neighbouring Healthwatch. Whether it be to deliver a project, undertake surveys or to input and offer feedback about the Black Country Sustainability Plan. Working with Healthwatch Sandwell, Healthwatch Wolverhampton and Healthwatch Dudley, allows us to offer a local view or a Black Country overview relating to service issue.

In addition, liaising with the: Care Quality Commission (CQC), Walsall Clinical Commissioning Group (CCG), Walsall Healthcare Trust, Walsall Dudley and Walsall Mental Health Trust, Walsall Council and others...



**Dudley and Walsall
Mental Health Partnership**
NHS Trust



Walsall Healthcare NHS Trust



Walsall Council

Healthwatch Walsall is delivered by Engaging Communities Staffordshire (ECS). ECS is a community interest company that brings public engagement, consultation and consumer advice services together in a central organisation to create evidence and insight to help improve local health and social care services.

The Healthwatch Walsall team

Our Board

Here at Healthwatch Walsall we have a board who are also volunteers that help us deliver our work and ensures our governance is met and that we remain independent when carrying out our work.

John Taylor

Chair

Oversees the governance and delivery of Healthwatch Walsall, represents at and sits on the **Health and Well being board, leads at ‘Spotlight On...’ meetings, attends and represents at key** strategic meetings with commissioners, service providers and stakeholders.

Lucy Land

Board Member

Liaising with Walsall Together board, attending and representing views of Healthwatch Walsall.

Teresa Tunnel

Board Member

Supports various outreach events and assists in surveys and collating specialist group(s) views and experiences.

Sylvia Bailey

Board Member

Attends and undertakes Primary Care Enter and View visits.

Ross Nicklin

Board Member

Our Enter and View lead, overseeing and carrying out our Enter and View programme, attending strategic social care and primary care meetings.

Aisha Khan

Board member

Our volunteer support member

Frances Beatty

Invited ECS Board member who oversees HWW work and contributes to the board governance.

Healthwatch Walsall Staff

As well as our board we have a team of employed staff who engage with members of the public, attend group meetings, undertake and deliver our work programme planned for the year and signpost people to support.

Paul Higgitt

Healthwatch Manager

Paul manages the day to day running of Healthwatch Walsall. He liaises with strategic partners, commissioners and service providers raising key issues on behalf of the public.

Tom Collins

Engagement and Information Lead

Plans daily work, updates website and social media, arranges Enter and View visits and completes reports.

Emily Lovell/Kavita Pawar

Community Outreach Lead

Public engagement in various and diverse community settings. Collecting patient experiences and views, signing up members and volunteers.

Lynne Fenton

Senior Insight Lead

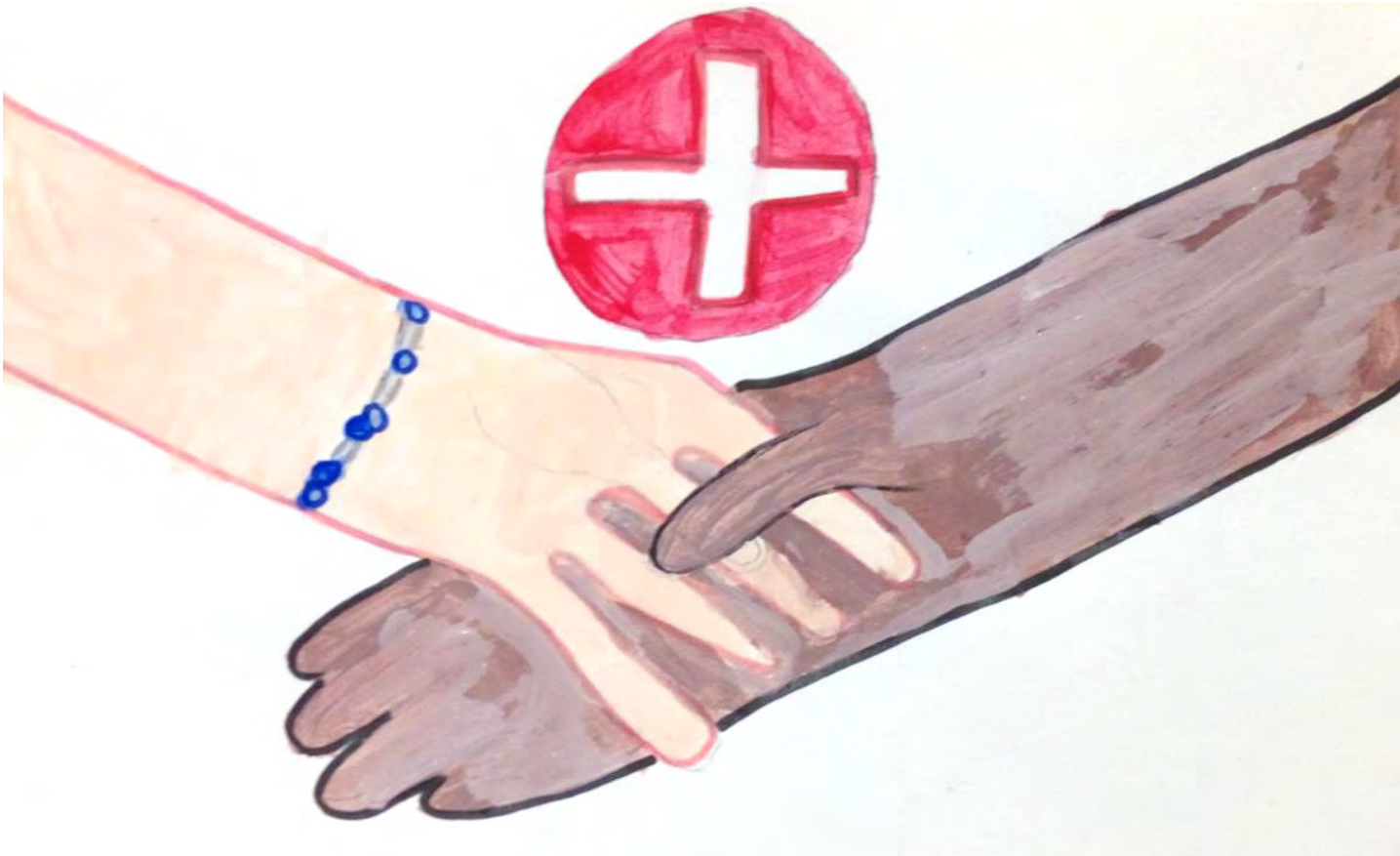
Undertakes various surveys, attends Enter and View visits in social care settings attends and represents at service providers and commissioner meetings.

Youth Engagement Lead

Engages with young people about their health and social care experiences. Meets with groups and support groups to identify what services young people want.

Volunteers

They undertake Enter and Views, attend public engagement events and support staff, deliver surveys and collate responses, also assist in administration duties.



Highlights from

our year



Highlights from our year



We spoke to 4,787 people across the Walsall Borough.



We have 22 volunteers helping to carry out our work. In total they gave over 400 hours of their time to work with us.



We signposted almost 300 people to support, advice and information points.



We visited 216 sites of care, treatment, community events, meetings and groups.



We have made almost 210 recommendations of improvements to help make a difference.



We have 1,743 followers across Twitter, Facebook and Instagram.



Our work

Over the year



Our reports

Each year Healthwatch Walsall uses intelligence that has been gathered and asking members of the public what they would like our priorities of work to focus on.

Our focused pieces of work allows us to carry out consultations and engagement around those subjects. This then leads to the writing of reports, which are then passed to providers and commissioners with recommendations for changes in service provision.

Cancer Services

One of these key priorities was cancer services. Particularly, access to services, the quality of support and signposting services to patients, families and carers.

Additional support services include:

- + Palliative care
- + Holistic therapies
- + Financial support and advice
- + Wellbeing and emotional support
- + Support for family members

We spoke to survivors, and families affected by cancer including support groups who commented:

- + They wanted earlier diagnosis.
- + Needed more access to support services.
- + There should be better information and communication with and from staff.

What they said:

“I was diagnosed late in relation to the stage of cancer I had.”

“Make access to support easier. Everybody seems to want you to contact someone else instead of them.”

“Don’t leave patients in limbo. We need to be informed regarding diagnosis, treatment and aftercare”.

However, those who had accessed support praised the service they received:

“Good support from diagnosis through to op, chemo & radiotherapy. Always at end of phone if I had any questions or concerns in between treatment.”

What we found

Most people were positive about the quality of the services provided. However, it was identified that an above average number of patients were being diagnosed at the later stages of their condition.

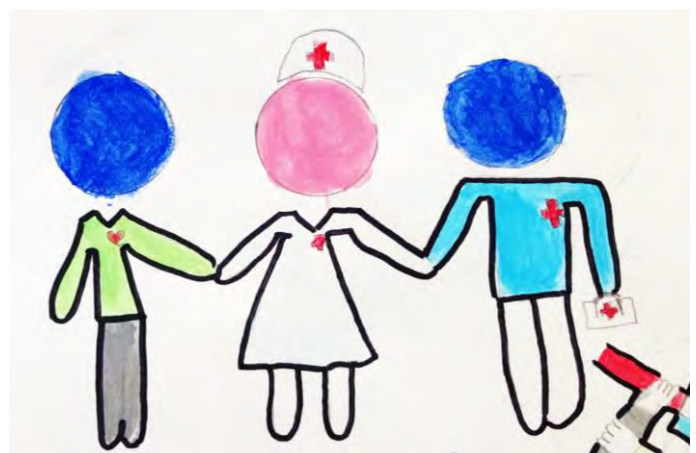
Our Recommendations

- + Continue to invest in effective support and signposting services such as Walsall Palliative Care Centre, Macmillan Hub and through a designated Lead Cancer Nurse.
- + The levels of people accessing support services should be monitored and actions taken where there is poor uptake.
- + A robust action plan needs developing by Walsall CCG and key stakeholders such as Walsall Healthcare NHS Trust to identify why patients are not coming forward early enough with symptoms of cancer.

Healthwatch Walsall sent formal letters to the CCG and Walsall NHS Healthcare Trust Chief Officer to raise our concerns about why a larger proportion of people were not coming forward at early detection.

A raft of work is now being undertaken to improve early detection of cancer and include the Walsall Bowel Cancer Project and FIT (Faecal Immunochemical Test). Cancer screening programme is run by NHS England and is supported by Walsall CCG.

A new standard has been introduced for diagnosis rates (28 days from referral) the current 65-day treatment standard remains the same.



Children and Adolescent Mental Health Services (CAMHS)/ Access to Education Health and Care Plan (EHCP)

Another project that people told us they wanted us to focus on was CAMHS/transition to adulthood services and the support that children receive through accessing EHCP's and through SEND (Special Educational Needs and Disabilities) support.

We undertook this work by completing surveys with family members and young adults, gathering case study material. Our target age range for this work was 5 to 20 years old.

Some of the key information that we wanted to ascertain was:

- + Have improvements been made to waiting times to access CAMHS?
- + **What are young people's experiences of the transition from CAMHS to adult mental health services?**
- + How are children and young people who have been diagnosed with Autism being supported?
- + How are young people accessing EHCPs and are they getting the correct support.

Some of things that people told us:

- + Waiting times for CAMHS had vastly improved.
- + The services through transition to adulthood were limited.
- + Only 10% of patients/family members we spoke to felt that they had received any early intervention in their mental health to prevent future difficulties.

We were also told that many families find it difficult to access diagnosis in order to get an EHCP for their children, and that some of the EHCPs were not identifying or providing the appropriate levels of support through their school.

Some of the comments we captured:

“My son has a diagnosis of Autism and severe anxiety. We have never received an EHCP from the local authority or school.”

“CAMHS have been very helpful and told me to ask for my son to see an Educational Psychologist but the school haven't helped. We have only just

had an appointment.”

Our evidence has highlighted that timely and clear communication with parents with children who require support needs, is essential for their health and wellbeing.

Transition to adulthood for many young people is difficult, particularly for those who have Autism or mental health conditions. Currently a number of young adults diagnosed with Autism feel that they are finding it hard to access support once they become 18.

Recommendations from our findings included:

- + Improved communication between schools, colleges and Walsall SEND team around the EHCP process and to ensure that if parents need support with the EHCP that it is received.
- + Schools/colleges and SEND to be more transparent on what support and funding can be accessed for children who have difficulties/ disabilities that access mainstream school.
- + More support around early intervention with children that are struggling and to ensure that children do not have to wait to be statemented to access resource



Walsall Manor Hospital Discharge process

Healthwatch Walsall were informed by some patients that there were concerns and issues around the hospital discharge process.

We identified an additional concern that some patients who were medically fit for discharge remained in hospital longer than necessary. This was due to a number of factors such as: waiting for social care assessments to be carried out, care packages to be arranged and in place, external and internal changes to properties made to accommodation pre patient discharge.

With patient experiences and concerns in mind we decided to undertake a closer look and arrange a number of visits at the Hospital.

Over the winter of 2018 and January 2019. Healthwatch Walsall undertook surveys with patients going through the discharge process. We set clear aims and objectives about the project:

- + Understand the difficulties causing Delayed Transfers of Care of patients that were medically fit for discharge.
- + Gather views on how the discharge process is communicated to patients and relatives.
- + Understand the experiences of patients during day to day discharge and those using the discharge lounge.

Patients generally felt that they had been involved with plans for their discharge, but for some this amounted to being the recipient of information rather than active players in their own discharge process.

What we found:

- + Patients said that they had received good to very good care during their admission.
- + The initial contact and information given by the discharging Doctor is key and sets the expectation of the patient regarding their discharge.
- + **The term ‘you can go’ is simply not enough** information.
- + Some patients felt that they were being rushed out of hospital.
- + Some patients only became aware of their discharge on the same day.

- + The information patients did receive was contradictory and misleading or may not be passed on by professionals .
- + Relatives particularly felt that they were not involved or kept informed.
- + Some patients have said there is a lack of access to interpreters to communicate with the diverse patient population/ languages.

Some of our recommendations have been:

- + Better communication with patients and relative around discharge,
- + A dedicated, permanent and more patient friendly discharge lounge be identified and used.
- + The patient should receive information about the process and timelines involved.
- + As many relatives are carers it is important that they are involved in the pre and actual discharge process.

We have received a response for the Trust which is available on our website.

Our intelligence reports

We collate what people tell us about services into **a public document, our ‘Intelligence Report’**, which people can access the document through our website.

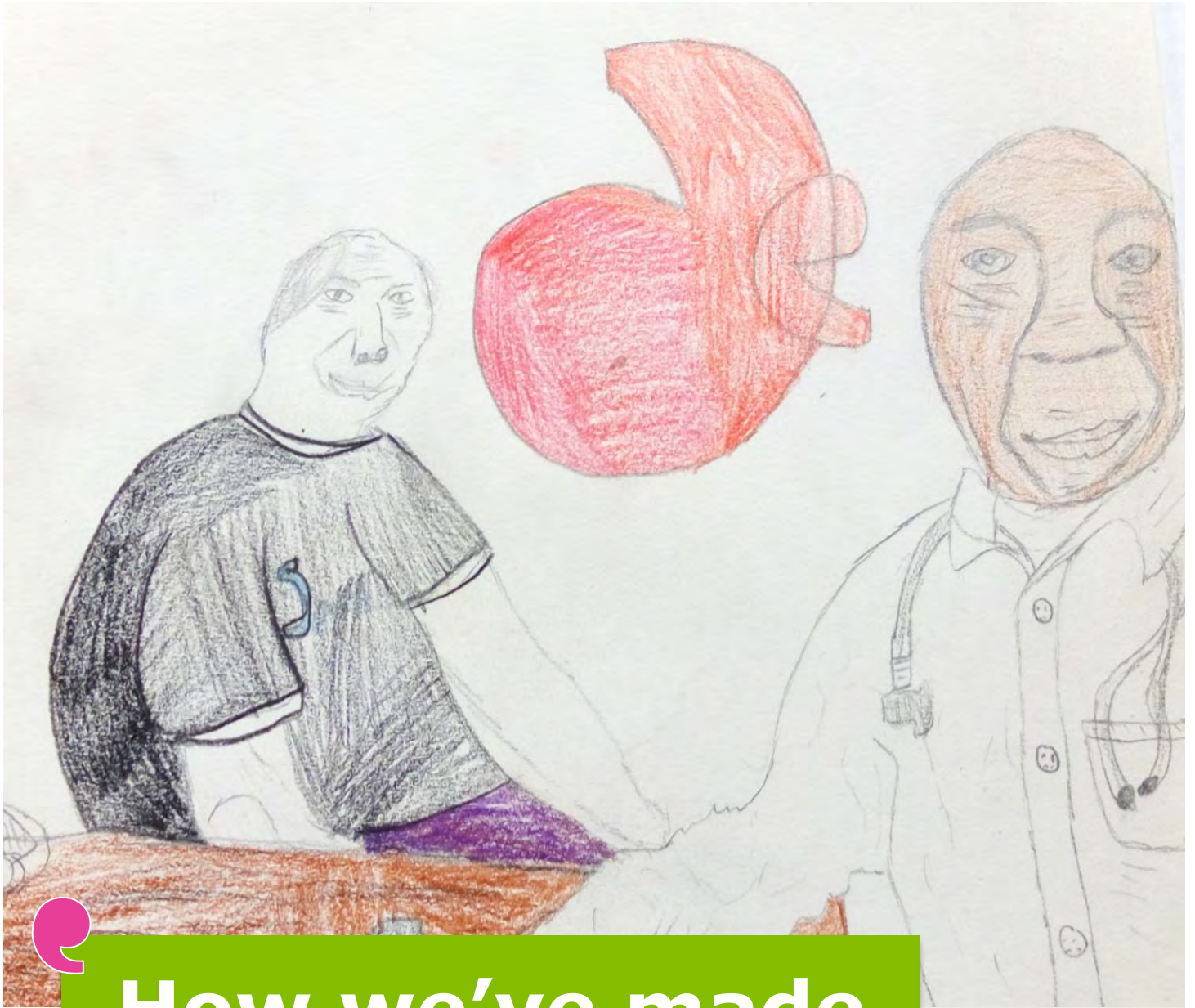
We identify some of the issues people have experienced. We indicate what we did about those issues. Whether, it be escalation to the providers, commissioners of those services or In some cases we can raise those issues directly.

We also refer people to the NHS advocacy in Walsall to assist with presenting formal complaint or we can refer matters about Walsall Manor Hospital to the Patients Advice and Liaison Service (PALS)

The report briefly contains this information and in many cases what positive impact we have been able to have for people in a quick and direct manner when working with providers.

Visit our website to download our reports.

<http://www.healthwatchwalsall.co.uk/documents/>



How we've made

a difference



How a little help makes a big difference

Healthwatch Walsall speak to patients, service users and family members every day. Sometimes a little help makes a big difference to their health and social care experiences. Below are a few examples.

Case Study One

One of our staff members was approached whilst undertaking an outreach event at Walsall Manor Hospital, by a gentleman who was concerned about his elderly Nan. The Nan suffers from vascular dementia and Alzheimer's. Nan lived alone in a council bungalow, but the family visited every day to ensure she was safe, her needs were met and they acted as her carers.

She had a Social Worker but had not received the appropriate needs assessment. The family felt side-lined by social services as their wishes were that Nan be placed in a care home as they felt that her living alone was unsafe. Nan was falling down a lot causing her to be admitted to hospital regularly with injuries.

There were ongoing incidents, Nan was leaving her house on her own. This greatly worried the family as they feared for Nans safety. The family in desperation contacted Healthwatch Walsall to see if we could help.

After gaining family members permissions, Healthwatch Walsall contacted the local Adult Social Services to discuss the issues around Nan **and the family's concerns.**

It was found then that Nan had been allocated a new Social Worker which potentially meant an even greater hold up in the action(s) needed to make Nan safe and get the support that was needed for her.

Nan was rapidly getting worse and her cognitive impairment increased, placing her in greater danger living on her own. It was still unclear if any assessment had been made. The family received conflicting information from professionals in relation to the assessment process.

Healthwatch Walsall kept in touch with the grandson by offering advice and liaising with Adult **Social Services to ensure that Nans' needs were identified** and a plan to meet those needs was treated as a matter of utmost urgency.

We asked that the family be kept informed about what was happening to Nan in terms of which care homes were available, what they may have to contribute to the care and any timescales involved.

Outcome

Soon after Nan was allocated a care home which was suitable to her needs and met the family wishes.



Case Study Two

We were contacted by an interpreter of a patient who was deaf.

The patient had an appointment to attend the **'Diabetic Prevention Programme' cancelled as the service could not arrange a suitable BSL (British Sign Language) interpreter** to attend and communicate with and talk for the patient.

It was important that the patient had the opportunity to discuss their own care with clinicians at the appointment. They felt that they wished to ask questions as well as being able to answer any questions the clinicians may have had.

The patient waited and waited to be contacted with another appointment, but no contact came. Weeks passed. The patient grew increasingly frustrated and concerned. They contacted Healthwatch Walsall with concerns. They asked for our help.

We contacted the service provider on three occasions, raising our concerns again asking if someone could get in touch with the patient or representative to keep them informed.

Healthwatch Walsall contacted the commissioner of the service, Walsall Clinical Commissioning Group (CCG), and raised the issue with the Commissioning Manager. They in turn contacted the service provider to address the situation.

Outcome

We received notification a week later that a patient appointment had been arranged and a BSL interpreter was in place.

Case Study Three

Whilst undertaking outreach in the community we were approached by a young mother who was distressed and concerned about a lump she had under her arm. The young mother was concerned that it may have been cancer.

She had the lump for a while and had visited her GP about the lump. Her GP referred her to Walsall Manor Hospital, but the appointment she was given was not till October 2019, many months away.

We contacted the Patient Advice Liaison Service (PALS) at Walsall Manor Hospital, raising a concern about the length of time to wait for the appointment given.

Outcome

We are glad to say that the hospital offered an earlier appointment to the young mother who was very relieved.



Thank You Healthwatch Walsall

We kindly receive a thank you for the work we do. Here are some of the generous comments people have made:

“Whilst walking through Walsall Manor Hospital on my way to an appointment for myself, I noticed a young lady at a table with 'Healthwatch' banners around her.

I had no idea what Healthwatch was and so asked her, and when she filled me in it came as a rush of relief. I've been struggling to get my grandmother the help she needs from Social Services and within two weeks of getting Healthwatch involved I feel like things have finally started to move forward.

*Thank you Healthwatch. I genuinely don't think anything would have happened without your **involvement.**”*

Grandson, Walsall, December 2018

“A big thank you to the Healthwatch Walsall for their help.”

“My Dad had to go to The Royal Stoke Hospital for a procedure, we live in Walsall and have no transport, and were unable to get anyone to take him there on that day. He asked the hospital, and his GP if they could provide any transport but was told no. As my Dad has limited mobility, the only option was to book a taxi there and back, he was quoted a minimum of £100 for the journey. I found Healthwatch Walsall on an Internet search, and emailed them, I received a call from HWW who said they would do their best to help.

They spoke to my Dad and got his details, and then made enquiries on his behalf. The day before his appointment, Dad had a phone call to say that a taxi had been booked for him, and that he would not have to pay anything.

*And anyone else who needs help or advice with any health matters, please contact Healthwatch Walsall who will do their best to help you as they **did with us.**”*

Daughter, May 2019

Our outreach

Our outreach and engagement is vital to our work. We attend a variety of diverse events held in communities throughout Walsall.

We have reached out to a diverse range of cultures, age ranges, community groups and neighbourhoods. Enabling us to capture the experiences, views and voices of the public through holding consultations, organising focus groups and undertaking surveys or by simply having a chat.

We have visited locations such as: Moxley, Aldridge, Bloxwich, Blakenall, Brownhills, Pleck, Paddock, Bentley, Caldmore, Palfrey, Rushall, Pelsall and many more, on weekdays, evenings and weekends.

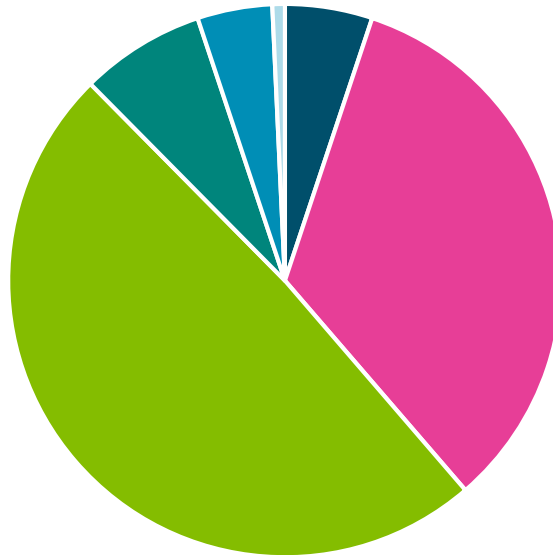
We have venues visited such as: Walsall Manor Hospital, A&E department, Walsall Urgent Care Centres, a number of GP practices, Active Living Centres, Shopping Centres such as the Saddlers Centre, local community centres, churches, a number of local schools, libraries and more...

We have met groups and individuals, such as: Dementia Cafés, local Training Provider students, Walsall College students, Self Care groups, Works Expo, Sure Start centres, Shree Ram Temple, Young Carers, The Glebe Centre, Families And Carers Empowered (FACE), Walsall Black Sisters, The Beacon centre to engage with those harder to reach.

Services people spoke about.

Services spoken about...

- + Hospital
- + GPs
- + Social Care
- + Emergency Care
- + Dentists
- + Care homes
- + Nursing homes
- + Community based services
- + Mental health
- + Care in your own home
- + Social care
- + Pharmacy
- + Ambulances



Top 5 services

- Emergency Care
- GP's
- Hospital
- Social Care
- CAMHS

Hospital - Whilst we have received many positive comments about the quality of care from nursing staff, there have been issues around: the discharge process, patient appointments being changed or cancelled without notification, staffing levels at night and of course car park charges.

GPs -A common theme has been the lack of access to GP appointments, communication issues with staff including GPs, prescriptions not being timely or missing.

Social Care - Care assessments has been highlighted as an area of concern by people. The waiting time, assessment process and impact on people. The change of Social Workers has also been felt.

Care Homes - Activities for residents were not stimulating residents and visits outside of the care home was limited or does not happen.

Our 'Spotlight On...' events

Healthwatch Walsall 'Spotlight On...' events are an opportunity for the public to hear from Walsall health and social care providers and commissioners about topics that are important to the public.

They are also an opportunity for the public to understand and question the delivery of our Healthwatch work. They are informative and frank, highlighting issues that affect peoples health and social care experiences. Members of the public have opportunities to ask service providers questions and get answers.

We have held 4 'Spotlight on...' meetings over the year around the Walsall Borough. Inviting members of the public, local councillors, service providers, service commissioners, stakeholders, our volunteers and our Healthwatch Walsall members to attend.

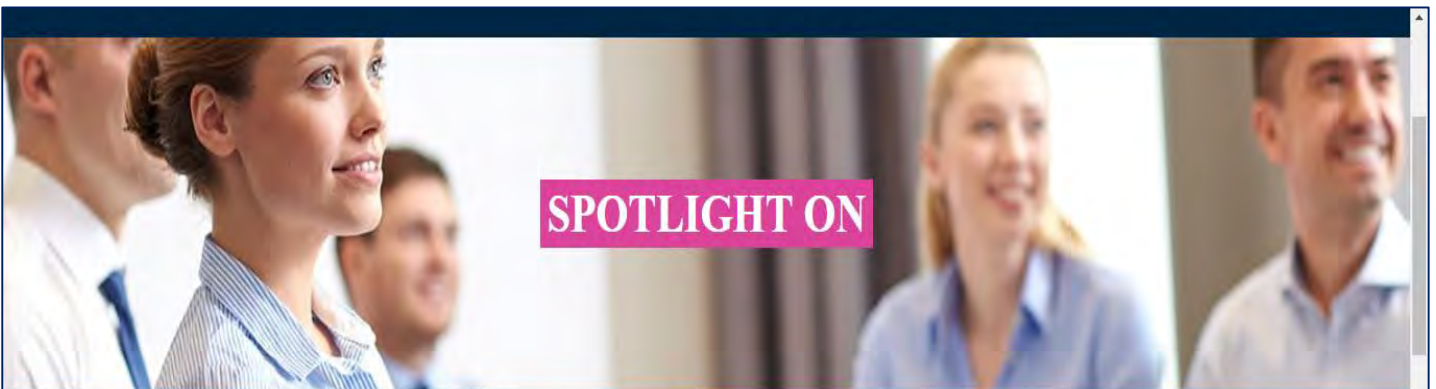
We hold Question and Answer sessions (Q&A) and we publish these on our website along with our board meeting documents.

We have held events focused on Young Peoples healthcare, Quality of Care in Walsall care homes, How is health and social care going to get better in Walsall? (Walsall Together and The Black Country Sustainability and Transformation Plan) with associated guest speakers, discussing the spotlight focus and sharing insight and information.

This has given Healthwatch Walsall the opportunity to follow up with questions of their own and responses have been gained from providers and commissioners.

Visit our 'Spotlight On...' page use the link below:

<http://www.healthwatchwalsall.co.uk/spotlight-on/>



Healthwatch – giving people a powerful voice locally and nationally.



Healthwatch Walsall's 'Spotlight On' briefings are an opportunity to hear from Walsall health and social care providers about topics that the public have highlighted to us as issues they are concerned about.

Our Enter and View programme

What is Enter and View?

Under the Healthwatch regulations, we have the power to Enter and View premises providing health and social care services which are publicly funded.

This means that our Authorised Representatives can observe the quality of care being delivered and to talk to residents, relatives and staff. These trained volunteers visit health and social care settings. A public report is published for each visit with recommendations to improve the quality of the service. But before a report is published, it is shared with the provider for comment and feedback, offering them the opportunity to develop an action plan or programme to make positive changes for residents and to address any negative findings that we note.

Published reports are made available on our website. Circulated to: service providers, service commissioners, Care Quality Commission (CQC), Walsall Council, The Walsall Clinical Commissioning Group (CCG) and other interested parties.

Over the last twelve months

Over the last twelve months, we have extended our Enter and View Programme, from not just visiting social care settings such as care and nursing homes but we now visit primary care settings such as GP surgeries. This has meant that we have undertaken 24 Enter and View visits.

The social care settings we visited were: Brownhills Nursing Home, Harper Villas, Acorn Retirement, Home, Ash Grange, Bush Care Home, Oak Lodge Residential Home, Aldridge Court Nursing Home, Cedar Falls, Hilton Rose Retirement Home and Woodthorne Care Home.

The GP Surgeries we visited were: Moxley Medical Centre, Rushall Medical Centre, Sina Health Centre, Kingfisher Berkeley Practice, Broadway Medical Centre and Ambar Medical Centre.

We have supported Walsall CCG in their quality visits to GP surgeries.

We engaged with patients and collected their experience and views which was fed back to the service providers and service commissioners.

From our findings we list recommendations that not only improves the resident or patient experience, it offers a fresh pair of eyes to a service provider who may make positive changes in service delivery or facilities.

Our findings have ranged from minor points to major issues requiring immediate action. They have been escalated to the appropriate organisations. We also identify opportunities that may help providers improve their service or improve communication with residents or patients.

Some of our social care settings recommendations:

- + Review provision of activities to ensure sensory stimulation for residents.
- + Ensure all Fire Exits are always kept unblocked.
- + Consider the dietary and cultural eating needs of individuals.

Social care impact:

In instances where issues were escalated, the service commissioner was also informed. Who, in turn, carried out unannounced visits of the service to determine if care quality and safety of residents were compromised.

Some of our primary care recommendations:

- + Consider utilising the services of National Association of Patient Participation Groups.
- + Review the provision of information for patients for out of hours services.
- + Consider if any evening appointments for workers/parents may be offered in the future.

Primary care impact:

- + Patients have been made aware of the Extra GP Appointments programme in Walsall giving greater access to GP appointments.
- + Patient information advice has been updated in some surgeries enabling greater patient awareness and choice.

Capturing the voices of people in care and nursing homes

We were asked by the Local Authority to undertake and deliver a government survey to people who were in care or nursing homes.

This work highlighted the importance of reaching people who have cognitive impairment, enabling them to have the same rights as peers completing surveys, going forward to improve the services in the future.

There were 186 people across the borough that were consulted using communication tools and tailoring the pace of the survey to the person.

Many people were able to complete some of the questionnaire and the remainder of people were unable to due to their cognition, illness, or declined, as was their choice.

During the period of completing this survey concerns and issues were raised with the Local Authority regarding: resident safety, public health issues, and safeguarding concerns which were formally reported.

Healthwatch Walsall were also commissioned by the Local Authority to undertake a series of surveys with patients/residents that were accessing the Local Authority transitional beds service. To gather views and experiences from those from discharge to where they were currently residing and to date in the transitional process.

We met with 81 people; majority of these people gave their views of the transition bed process. Some people were unable to give their views due to advanced cognitive impairment, being very ill, or they had returned home prior to visit.

The key importance of this this was again to enable people to have an improved transitional bed service in the future, that was more inclusive of people being consulted more effectively, using resident/ patient led communication tools where necessary before and during transition.

Some of the comments people made when consulted about their transitional bed experience were:

“I only have good things to say about this home, the staff are lovely, and I am treated very well.”

“I would have liked more information before I came to this home from the social worker”

“I felt I was discharged too soon, but the doctor told me he needed the bed”

“I was informed I would be having physio, but that hasn't happened in this home”

“I had no choice about coming here, I had nowhere else to go, I didn't have much say where I was going “

“I have had no issues in this home, everyone is very good, and helpful whenever I need them”

“I have received good care, I am treated well, I don't want to leave here.”

Some conclusions

- + Majority of people who gave feedback were satisfied with the transitional beds process.
- + Respondents felt safe, cared for and respected.
- + Majority of respondents felt happy in the homes that they were in and felt that staff were lovely and great.
- + Some service users and relatives cited discharge from Walsall Manor Hospital as a poor experience. Many identified the lack of communication, choice and involvement in their discharge and where they were going as the reasons.

Some recommendations

- + The planning of transition needs to be a **“planned move”**, with timescales that are clearly recorded, revisited and where necessary adjusted. Any changes in the process should be shared with those involved.
- + That people have a clear pathway in understanding what the transitional bed process is, using effective communication tools, i.e. easy reads/pictorial. Considering people who have cognitive impairment, including IMCA (Independent Mental Capacity Advocate) where appropriate.

How do our volunteers help us?

At Healthwatch Walsall we could not carry out all the work we do without our volunteers. They are key to our engagement and the carrying out of work priorities and any additional work or projects that we deliver.

Our volunteers work in Walsall communities, listening to members of the public sharing their health and social care experiences. Attending as Authorised Representatives on Enter and View visits, reporting back their findings.

Over the year our volunteers have worked with us at: Walsall Pride event, Walsall Manor Hospital, two Urgent Care Centres, community events such as fun **days, Spotlight On... events, focus groups and specialist group meetings** across the Walsall Borough.

Our volunteers have joined us because like us at Healthwatch Walsall we want to make a positive difference in peoples health and social care services. Lets hear what they say.



Richard

“I started looking at improving residents experiences in care homes as part of a previous project with Walsall Council in 2008. This work identified that relatively simple initiatives could have a great benefit for residents.

In 2017, Healthwatch Walsall gave me the opportunity to continue with that aspiration. I found them to be very welcoming and helpful. The HWW training to become an Authorised Representative has greatly improved my understanding of how Care Homes work and how **we all might help improve Residents’ experiences.”**



Manisha

“I joined Healthwatch in November 2018. One of the main reasons I joined was because I wanted to give back to the community in my spare time as well as giving my support to others. As a team, we asked people how they felt with the service provided and support those with language barriers. We also aimed to make changes to benefit everyone.

An example of this was when we opened a stall to invite the young people of Walsall College to give their opinion on the health service they receive. This was useful for taking their opinions **on board to make beneficial changes.”**

We offer a number of roles that people can volunteer for, they are:

- + Enter and View Authorised Representative
- + Events and Engagement support
- + Marketing and Promotions
- + Local research
- + Reading panel member

If you are interested in volunteering with Healthwatch Walsall then give us a call.

Tel: 0800 470 1660



A BIG THANK YOU TO OUR VOLUNTEERS

Young Healthwatchers

It is vitally important that Healthwatch Walsall listens to young people and their views, they are often overlooked, especially when it comes to their experiences of using or not being able to access health or social care services.

Healthwatch has been working on a number of themes and subjects relevant to young people. To find out about their views we recruited some young people from Walsall aged 12-25, to work and lead on this work guided and supported by our Youth Engagement Lead.

We are currently developing a Youth Forum to bring young people together. We will be undertaking further engagement to understand their views on wellbeing, the importance of good physical and mental health. We also give young people the opportunities to scrutinise providers of services.

Violence

Young people told us they were concerned about the impact of violence upon peoples mental health and general well being. Given the national media attention it is an issue that people are aware of daily.

Healthwatch Walsall will support young people to continue to raise their concerns. It remains a priority for other stakeholders such as the Health and Wellbeing Board. All partners are committed to supporting initiatives to keep young people safe.

We have started to talk to young people regarding the impact of negative/ sensationalised social media. The findings from this will be presented to the youth forum as one of its first topics of local intelligence.

Long Term Conditions

Some young people also have long term conditions. As part of our Walsall Together work we aim to bring young people to the table to discuss how they are supported with health conditions.

From this it can be fed into any plans that Walsall Together have or The NHS Long Term Plan being delivered in Walsall to meet young peoples needs.

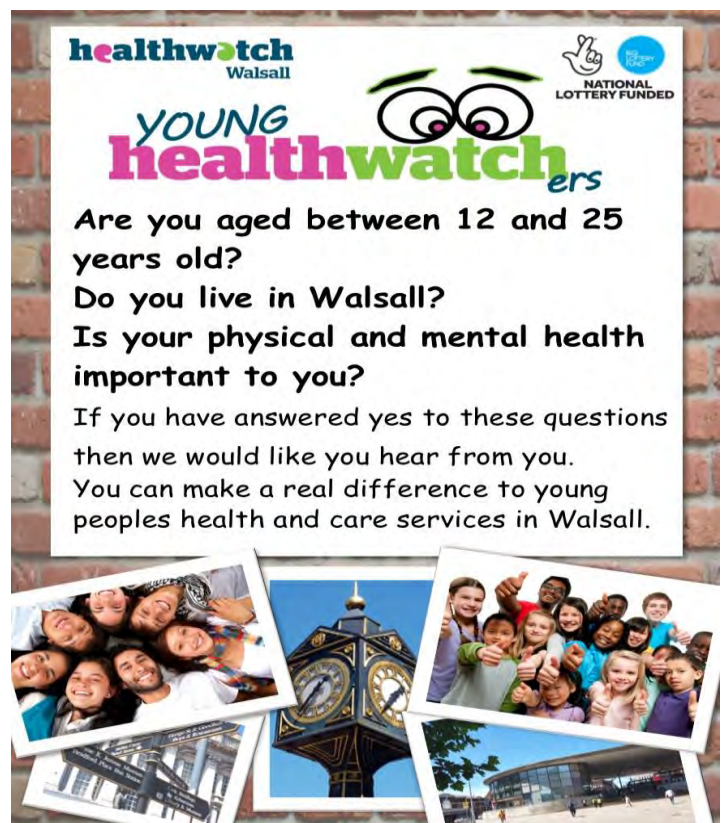
Young Carers

During this work we have identified some young people who are carers. Difficulties accessing services for themselves and those they care for were a concern. As it is not just about their own health but also the person(s) they support. We will take a closer look, to see if adequate support exists and what may be needed.



Visit our Young Healthwatchers website click on link below

<http://www.healthwatchwalsall.co.uk/younghealthwatchers/>



What next for your local services

The work around **Walsall's** local integrated health and social care partnership has continued to develop. It has started developing plans to bring together Health and Social care service providers so that integration will deliver better local services for local people.

Key Partners

- + Walsall NHS Healthcare Trust
- + Dudley and Walsall Mental Health Services
- + One Walsall
- + Primary Care Networks
- + Walsall Borough Council Adult Social Care

Healthwatch Walsall were a member of the Walsall Together programme board, where we ensured the need to involve the voice of those who currently and in the future, will use the reshaped integrated services is at the heart of any services.

We recommended that a patient charter be developed and adopted to ensure patients were involved in any new care pathway development. This was accepted.

As part of our work programme we agreed to look at care assessments. A number of people came forward to share with us their stories. A full analysis was undertaken of the intelligence from the stories.

We chose not to publish a detailed report as it may have been possible to identify recipients of services due to the unique nature of some individuals care packages.

We will use the learning to give appropriate constructive feedback to commissioners through our regular strategic liaison meetings.

What's going to make a difference to your healthcare in Walsall

In January 2019 the NHS Long Term Plan was launched.

The plan is about making national and local health service changes to ensure that people get the best care possible. This includes supporting

people to access the right services at the right time. The plan highlights that further support is needed around mental health, early diagnosis of conditions and help around earlier intervention to prevent people becoming unwell.

Healthwatch Walsall as part of a Black Country approach were asked to gather local **people's** views of the NHS Long Term Plan. This focused on self care, 330 people participated in this survey.

We also undertook two focus groups to discuss how people can be supported to better look after themselves and what should be put in place to help people take control of their health and to support people to live better lives with Long Term Conditions

Healthwatch were able to talk to over 60 young people at a Conference at Walsall College. Some of the comments that we received from young people were:

"More rewards for healthy choices"

"Healthy lifestyle marketing campaigns"

"Advice on weight loss more readily available"

"A burger is £2 in Walsall and a good salad £4 what can those in charge do to change **this?**"

"GP's see different each time; the inconsistency **doesn't help**"

"Culture, awareness and language **barriers**"

Our second focus groups was arranged with Walsall NHS Healthcare Trust, Self Care volunteers and staff.

What people told us

- + If we **can't** be **'fixed'** we need to know coping mechanisms and how to self-manage.
- + Help children at the early stage to understand the consequences of a poor lifestyle and how lifestyle choices are important.
- + Create Local Health Champions to inspire people.

"You may visit your GP 6 times a year for 10 minutes (1 hour) yet you live all the time 365 days a year with a Long-Term Condition. **It's** about how you are supported to manage the condition."

Working with our partners

Working with the Care Quality Commission (CQC)

During this year we have continued to work with the CQC through intelligence sharing at quality and information meetings. Discussing social care and primary care concerns, updates and change in CQC ratings applied to services.

In addition we regularly receive requests for intelligence about services, across social care and primary care provision. In preparation to any CQC inspection visits.

Walsall Health and Wellbeing Board

Healthwatch Walsall also has a statutory seat on the Walsall Health and Wellbeing Board. The Board is a formal committee of Walsall Council with statutory duties and its members include Councillors, GPs representing Walsall CCG and representatives from the police and fire departments and community and voluntary sector, who fully understand local health and wellbeing challenges and opportunities.

We raise issues of concern from the public at this forum and continue to promote the importance of public involvement in strategic decision making.

Walsall Health Scrutiny Board

The Chair of the Healthwatch Walsall Advisory Board attends the Social Care and Health Scrutiny and Overview Committee and regularly champions the public's views. The following are some examples of what we do:

The Place Based Commission of the Walsall Together Alliance - Healthwatch stated that language in reports needed to be clearer and more consistent and that the timescales were ambitious and suggested that Walsall residents needed to be involved in the governance of the Walsall Together Alliance. The Director of Commissioning agreed and reassured the Committee that this would be addressed as part of the development of the business plan which would be presented to the committee.

Changes to Urgent Care Centres -

Healthwatch stated that promotion of the additional primary care appointments needed to improve and feedback to the 9/10 that were not in favour of the proposals should be given more promptly to ensure that consultees felt that their contribution had been meaningful

Future of Community Alarms Service - Healthwatch **asked how service users' views had been heard** during the consultation. He suggested that four out of the five options were not viable

meaningful. Officers stated that service user views were taken on board and that all options were subject to an analysis. Healthwatch stated that the community alarm service helped to keep people living independently at home, that the proposals could lead to increased costs for 111 and 999 services and suggested that other providers could be asked to contribute to maintain the service. Officers explained that this was considered but could not be progressed.

Walsall Safeguarding Adults Annual

Report Healthwatch stated that outcomes were not clear within the report. After further discussion, the Committee suggested that a further report, containing a dashboard of performance information, was received to evidence outcomes in the future.

Refresh of 'The Walsall Plan: Our Health and

Wellbeing Strategy 2017- 2020' - Healthwatch expressed concern that the workshops prior to Christmas did not demonstrate measurable objectives and questioned when specifics would be evidenced. In response, the Director of Public Health reassured the Committee that the priorities would be worked through in a SMART way.

Primary Care Commissioning Committee

Healthwatch is a member of this Committee and also attends and asks questions at Board meetings of Walsall CCG (the commissioners). During the year we have questioned whether enough money is spent on mental health services and how the public can influence the integration of services (**'Walsall Together'**). **We also presented our report** on access to GP services which was welcomed by the CCG and they agreed to take further action to increase GP access and provide extended out of hours GP hubs.

One Walsall

One Walsall is the voice of the voluntary sector in Walsall. We work closely with them as a conduit to promoting and supporting our volunteering opportunities.

Walsall Council

We have forged greater partnership links with the social care commissioning department. Attending quality meetings aimed at identifying the standard of care provided to Walsall care home residents.

Through these meetings we are able to share our Enter and View findings and recommendations and have a direct pathway to escalate concerns or issues that require prompt attention or action.

Our finances



Walsall Council

To help us carry out our work, we are funded by a Walsall Council contract, to the amount of: £150,800.

We also received an additional £28,735 made up in part from National Lottery funding, public engagement around the NHS Long Term Plan and a new role; Social Care Advocacy Insight Lead.



NATIONAL LOTTERY FUNDED

Income

Healthwatch income from Council £150,800

Other Income A

£28,110

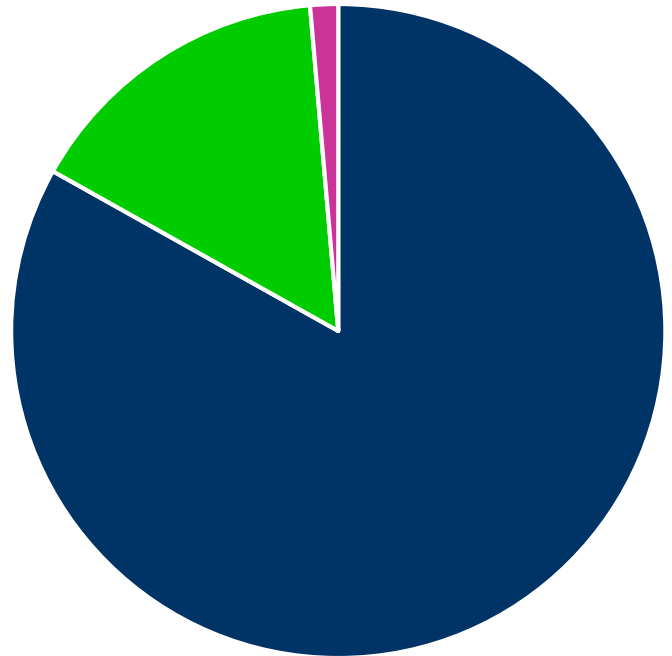
(Big lottery fund £7,760
Social care advocacy insight project £20,350)

Other Income B

£625 The NHS Long Term Plan, engagement.

Total Income

£179,535



Expenditure

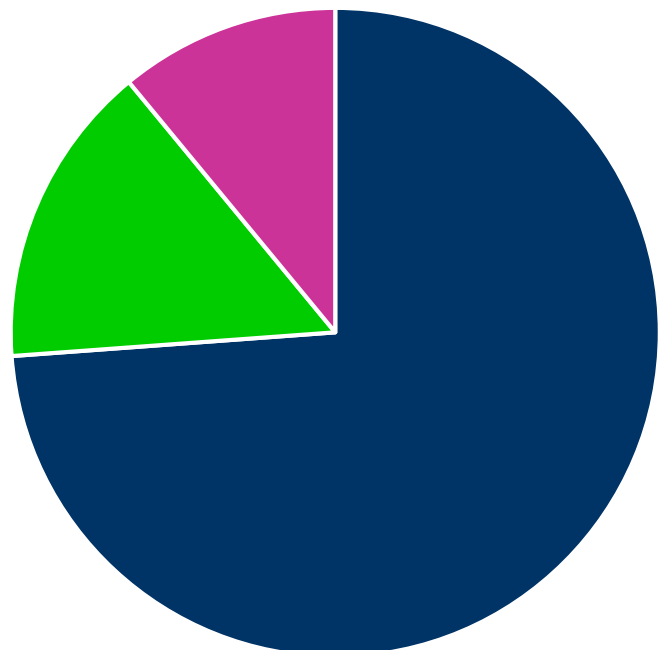
How much we pay our staff
£126,727

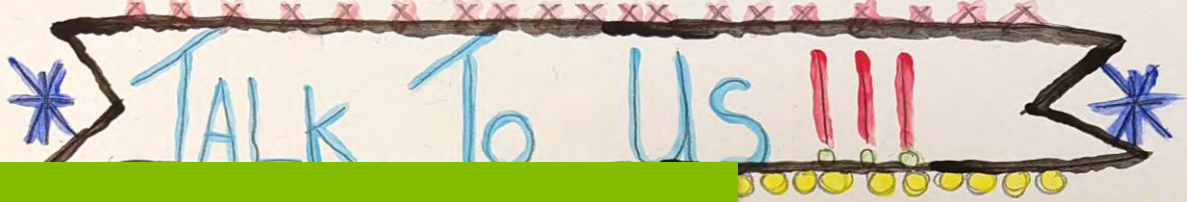
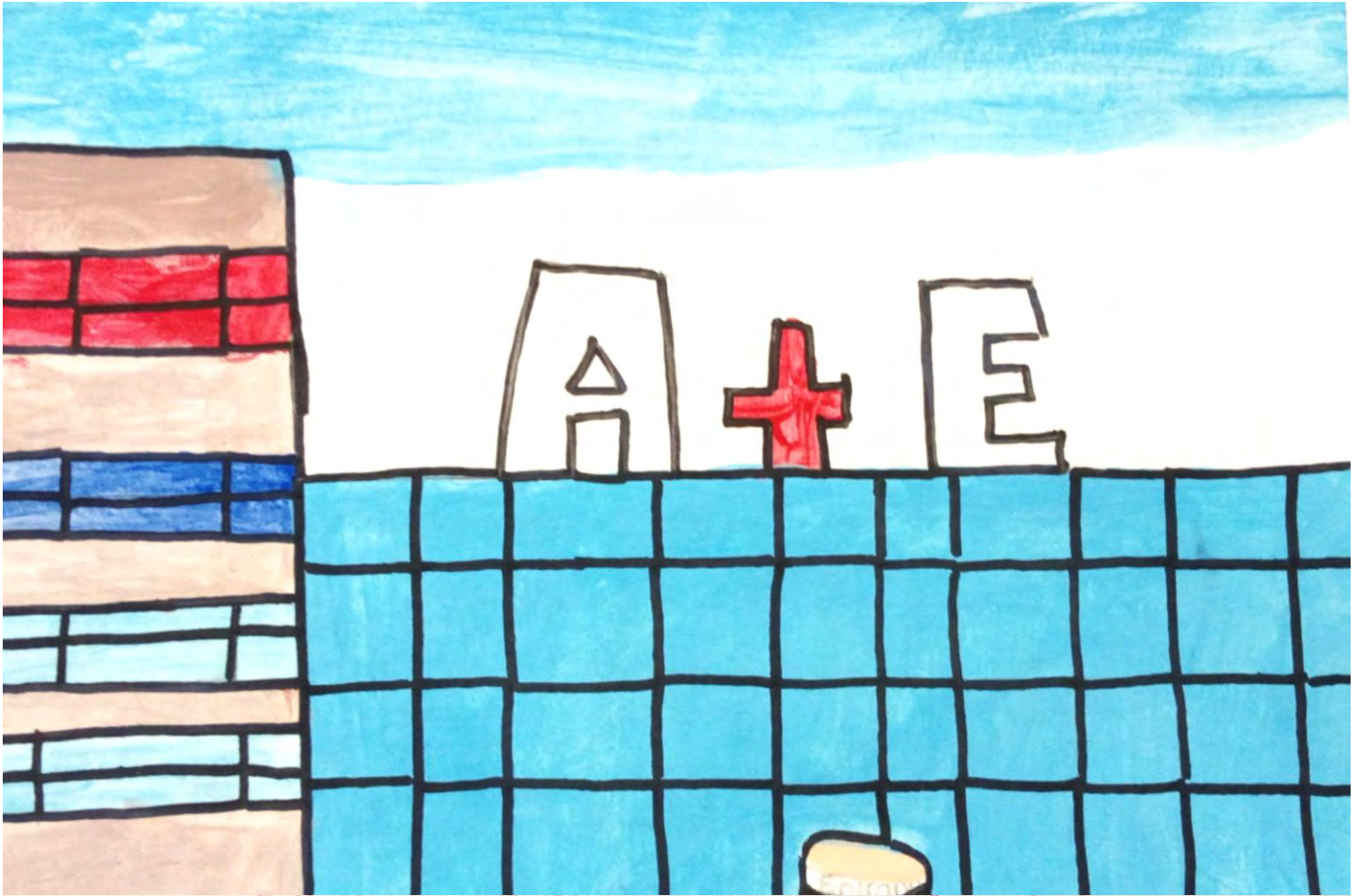
How much it costs it run our Healthwatch
£18,836 (Premises, I.T. and Insurances)

Operating costs £26,075
(Volunteer expenses, governance, marketing, admin, training)

Total Expenditure

171,638





Priorities for next year



Priorities for next year

In 2019/20 we aim to have even greater positive impact for the communities and the people we serve. We will strengthen partnerships with providers and commissioners of services, further increase our public engagement and raise and escalate these issues to decision makers to affect change.

We will have three major lines of enquiry:

1. Transforming Care

The Black Country Transforming Care programme was established to transform care and support for people with learning disabilities and/or autism. Healthwatch Walsall will work with families and people with learning disabilities and /or autism and ensure they are actively engaged in the co-production of new services.

2. Care at Home

More and more older people live in their own homes for longer and services need to support people to do this. Following any hospital stay, delays in discharge are often caused by lack of available community services. Increasingly people are contributing to the cost of their care. **We will find out local people's experiences and report on this.**

3. Maternity Services

There have been a number of improvements in maternity services but some recent concerns about access to community-based provision. Healthwatch Walsall currently attend the Black Country Local Maternity System (LMS) and they have been doing work around patient engagement and the quality of services. We will engage parents and seek their views of pre and post natal services in Walsall

Enter & View Visits

We will undertake at least 16 Enter & View visits this year and focus on residential care homes, hospital wards and GP surgeries. Visits will be determined by the intelligence and patient feedback we receive. We will follow up on previous reports to check implementation of

of our recommendations. We will specifically focus on the provision in care homes of stimulating physical and mental activities for residents. We will test the Enter and View approach in new settings such as pharmacies and dental practices.

Aim: Carry out at least 16 Enter & View visits during the year

Spotlight meetings

We will continue to engage local people and invite Directors of health and social care services **to public 'spotlight' meetings and ensure the public are able to have their say.**

Aim: Host 4 public 'spotlight' meetings with a focus on current issues.

Community Engagement

Our staff and volunteers will visit a range of community groups and events to seek patient and public opinions and views. We will ensure **our visits focus on the diversity of Walsall's communities.** All visits will have a clear purpose and target.

Aim: Undertake at least 125 outreach events

Strategic Influencing

Healthwatch Walsall is represented on a wide range of strategic Boards that oversee health and social care including Walsall Health and Wellbeing Board, Health Scrutiny Committee, Quality Surveillance Group, Black Country STP, CCG Governing Body, Primary Care Commissioning Committee, A&E Delivery Board and CCG Quality Committee. Our remit is to work with these partnerships to ensure the voice of the public and patients are heard, and to provide advice, guidance and assurance on how to achieve this.

Aim: Healthwatch is a strong public voice in strategic decision making

Promotion and signposting

We will ensure our services are widely available and promoted in a range of formats including in the media, social media (Facebook and Twitter), **leaflets & posters, GP surgeries 'TV screens' and hospital wards.** This promotion helps makes us more accessible, as people can message us at any time to seek advice or information, and we can quickly signpost them to other organisations.

Aim: Healthwatch is a trusted and known route for local people to raise health and social care matters.

Missing voices

A dedicated staff member will work with specific communities such as the homeless, refugees & newly arrived citizens, invisible carers and LGBT+ to identify barriers in accessing health and social care and make recommendations to providers and commissioners to provide responsive services.

Aim: Missing voices are heard by service providers and their services adapt to meet these needs

Inequality focus

We will continue our work with the deaf and hard of hearing community to understand their experience of health and social care services and identify and recommend any services changes required.

Aim: Publish our findings and recommendations by November 2019.

Volunteers

Volunteers play an essential role in the delivery of Healthwatch Walsall. We currently have 15 active volunteers and provide training to help them fulfil their roles.

Aim: Recruit an additional 20 active volunteers over the year

Additional funded projects

Young Healthwatchers

Our Lottery funded project will continue until December 2019 and focus on:

- + Assessing whether local services meet the health and social care needs of young people
- + Seeking views on the neglect strategy of the Walsall Safeguarding Board
- + **Understanding young people's attitude to violence in society**

We will publish our findings and share these with providers and commissioners. We will consider seeking additional funding or mainstreaming our Young Healthwatchers.

Walsall Together Alliance

We have been commissioned to provide patient and public involvement in developing and co-designing new clinical and community pathways for health conditions. This will influence the Integrated Care Partnership in transforming health and social care services for Walsall.

Any work requested by commissioners and providers beyond this workplan will need to be agreed by the Healthwatch Walsall Board to ensure adequate resourcing.





Contact us

healthwatch
Walsall

Healthwatch Walsall
47 - 55 Bridge Street,
Walsall,
West Midlands,
WS1 1JQ
www.healthwatchwalsall.co.uk
t: 0800 470 1660
e: info@healthwatchwalsall.co.uk
Twitter: HWWalsall
Facebook: Healthwatchwsl
Instagram: Hwwls Walsall

Contract holder's address and contact details as of 31/03/2019.
Engaging Communities Staffordshire CIC (ECS)
Unit 42, Staffordshire University Business Village
Dyson Way
Staffordshire
ST18 0TW
Contact number: 01785 887809
Email address: contactus@ecstaffs.co.uk

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