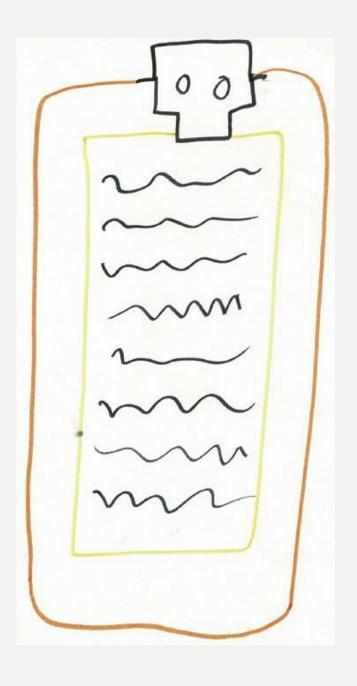


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Healthwatch Staffordshire would like to say a very big thank you to all the children from St Patricks Before and After School Club, 15th Stafford Brownies and 15th Stafford Rainbows who drew such fabulous pictures for this annual report.

Front cover by Lilly

Back cover by Izzy

Message from our Chair

I am very pleased to present the Healthwatch Staffordshire Annual Report for the year 2018 2019.

The many Volunteers supporting Healthwatch Staffordshire enable the work that we undertake on behalf of the residents' of the County to be down-to-earth with honest reporting of aspects of the Health Service covering a wide range of aspects across the County.

The Advisory Board has met bi-monthly during the past year and we have held our meetings at venues across the County. We were sad to lose Beverley Dawson from the Board. Beverlev worked strongly with Volunteers and has now moved to work with the Samaritans. This year we have been pleased to appoint three new members to our Board. Celia Jarrett from the Newcastle area joined us almost a year ago. Celia has led a very busy and interesting life and, for several years before joining us, managed a retirement complex. Fiona Shield from the Stone area joined us earlier this year after taking retirement from the Health Service. Fiona has as particular interest in Organisational Development and has developed a series of "Values" workshops for the Board which will require Board and staff members and volunteers to further develop this work. Thirdly, David Bassett from East Staffordshire, who was Vice Chair with LINk in the time before we became Healthwatch Staffordshire. David has many years of experience working in the Health and Social Services and is quickly becoming a very busy volunteer. Members of our Board attend regular meetings and each member represents Healthwatch Staffordshire at strategic meetings across the County with a range of statutory partners. The Board represent a variety of backgrounds and experiences, ranging from Business to Health Service work.

We look at issues affecting the population of Staffordshire with open minds and broad knowledge of everyday issues.

Where we can, we hold our Board meetings in local Fire Service stations which enable the public to attend easily. Whenever you see a Healthwatch Advisory Board meetings advertised, you are welcome and we look forward to seeing you and answering any questions you may have relative to the Health and Care Services.

Our organisation has undergone many changes during the year and we have also moved premises. We are still on the Staffordshire Technology Park, with our office now at Staffordshire University Business Village

Our Volunteers undertake many roles to support Healthwatch Staffordshire by reviewing the quality of services when we Enter and View Care and Nursing Homes, GP Practices, Dentists etc. Volunteers also attend meetings to represent Healthwatch in their local area and report back to us by taking notes. I would personally like to thank our volunteers for all their hard work. Please do volunteer if you possibly can, you will be made very welcome.

This annual report gives you an insight into our work.



Maggie Matthews

Chair Healthwatch Advisory Board, Staffordshire

About us

Healthwatch is here to make care better



We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. People can also speak to us to find information about health and social care services available locally.

This year has been a very busy and demanding year for Healthwatch Staffordshire as we have continued to build strong links with our communities through our various projects and engagements across a wide and varied landscape. As a small team we have, with the help of our volunteers been able to maintain a visible and vocal presence to bring your real stories to health and social care decision makers.

We have been able to speak with over 7,500 Staffordshire residents and made sure that your views and voices are heard through our intelligence reports and by our representation on numerous boards and committees.

In addition to this, our work this year addressed some key issues for the people in our county including;

- Non urgent patient transport
- Day services for people with Learning Disabilities
- Discharge to Assess
- Improving Prison Engagement
- Young People, emotional wellbeing in schools
- Recruitment of 15 maternity champions as part of the Maternity Transformation Plan and the Maternity Voices Partnership.

The HAB is currently reviewing their core values as part of a commitment to developing and supporting the wider Healthwatch teams. The core values support the vision, shape the culture and reflect what really matters to everyone at Healthwatch Staffordshire. By committing to our Values and what this means in terms of both what we do and what people see, we believe we can unite our staff and volunteers around their shared purpose.

Following a workshop and further opportunities for Healthwatch Advisory Board members to reflect and comment on what is really important to us all, it was agreed that the Healthwatch England values fully capture what matters to us.

- Collaborative
- > Inclusive
- Independent
- Influential
- Credible

The next step will be to describe how we 'live the values' in terms of what people see and hear. It is important that these values are now firmly embedded in everything we do. There will be opportunities for all Healthwatch staff and volunteers to be involved in this via focus groups and surveys.

This year we have been extensively involved in the 'Together We're Better" programme of work through our involvement in a number of strategic and operational groups;

- Health and Care Transformation Board
- Pre-Consultation Steering Group
- > TWB Communications and Engagement task and finish group
- Local Representatives group

A series of listening events is due to start in June 2019 until August when it is expected that a number of options can then be drawn up which will be subject to public consultation. We will continue to play a role in ensuring that the public can have their say in these important discussions about the future of health and care services across Staffordshire. We have also been involved in the Healthwatch England national engagement work about the Long Term NHS plan and completed surveys and carried out focus groups with carers and young people seeking views on the plan.

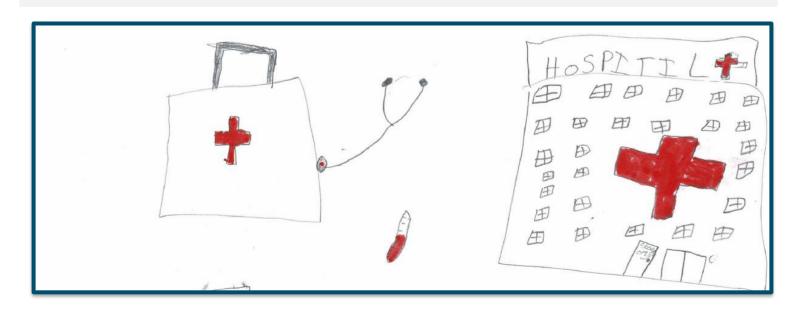
At the Healthwatch England National Conference last year we received an award for our work in 'championing diversity and inclusion' for our work with prisoners, helping them to access community services, we were also highly commended in the category of 'helping people to have their say' We are pleased to be making a difference for patients and service users at local level.

I hope that you will enjoy reading about our impact in this annual report and agree with me that we are demonstrating that we are really making a difference and achieving improvements in services for our communities

Our annual report contains much more about the different issues that we have been involved in and how we have used the intelligence gathered to champion change through the decision making bodies.

Jackie Owen

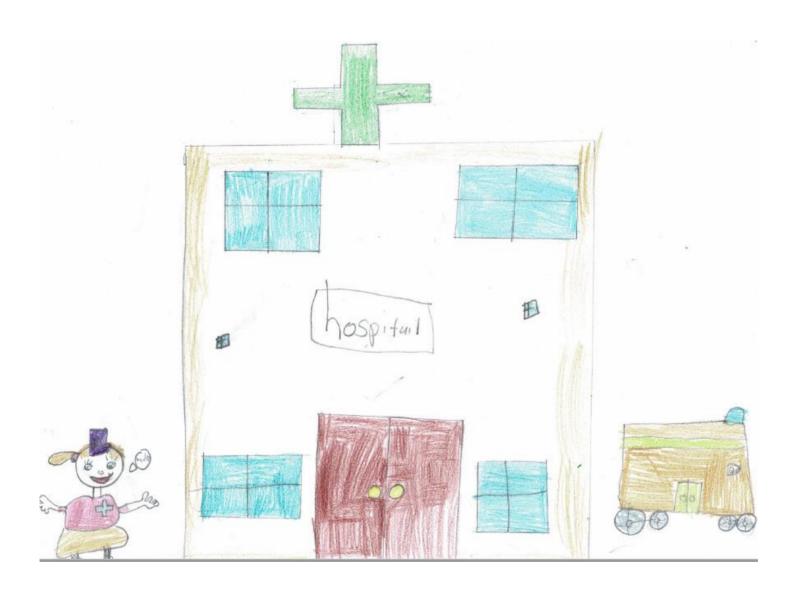
Manager, Healthwatch Staffordshire



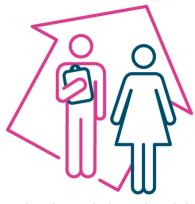
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Highlights from

our year



Our year in numbers: Healthwatch Staffordshire have engaged with over 7,500 people face to face during the year.



776 people shared their health and social care story with us this year



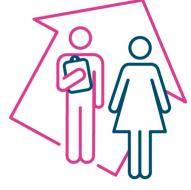
We have 74 volunteers helping to carry out our work.



2083 people accessed Healthwatch advice and information through our engagement work and by directly contacting us for advice or information.



We visited 35 services and 55 community events to understand people's experience of care. We attended in excess of 150 meetings to hear people views and feedback information on people's experiences



613 people were signposted to other services including complaints advocacy services and other organisations that provide support.



9866 people engaged with us through our website and social media.

HEALTHWATCH NETWORK AWARDS

Winner - Championing Diversity and Inclusion

Staffordshire has a high and diverse prison population which makes it important to keep prison healthcare a priority. To help us support the needs of this community we developed a close partnership with prison healthcare providers, the prison estates and the prisoners themselves to establish a volunteer champion role for prisoners across Staffordshire. This not only allows us to better serve their needs but enables their involvement in the work we do and makes sure their voices are always heard. Some of our Achievements are:

- -Prescribed medication could affect prison drug screening programmes and cause the transfer of prisoners to the secure unit. NHS England and the prison healthcare team have liaised with community GP's so that they are aware of medications of concern in respect of screening programmes.
- Prisoners will now be granted licences to leave the prison and register with community healthcare services.
- Necessary healthcare information will be provided upon arrival at the prison and health champions will offer peer-support to help new arrivals understand and navigate the system.

The Healthwatch Network Awards are a fantastic opportunity to celebrate this work, highlighting the difference local Healthwatch have made by using this wealth of intelligence to help decision makers target their efforts to make things better.

Jane Mordue, Healthwatch

England

People living in prisons are entitled to the same level and quality of health services as other NHS patients, but access isn't always as good as it should be. Thanks to Healthwatch Staffordshire, working in partnership with NHS England, new licenses have been put in place enabling people living in six local prisons to access community dentistry services. Healthwatch England



Jo Hall with the Healthwatch England Award

Highly Commended - Helping people have their say

A Dose of Reality - Following a substantial funding reduction to drug and alcohol services in 2017, Healthwatch undertook multiple engagements with service users to assess the impact of the cuts. Due to the complex issues that some of the service users face, they seldom engage in consultation and are often hard to reach so we had to employ various assertive engagement methods and work closely with partners to encourage people to participate and reassure them that their voice will be heard. We used planned and opportunistic feedback sessions, often attending locations at times where we would be most likely to catch people. With the support of our partners, many of whom offered us free access to their services, we were able to capture the feedback of people who would not otherwise have been involved. Since the consultation closed we have worked closely with partners and community providers to address some of the unmet need in the community, and to create new pathways and partnerships into other support services.

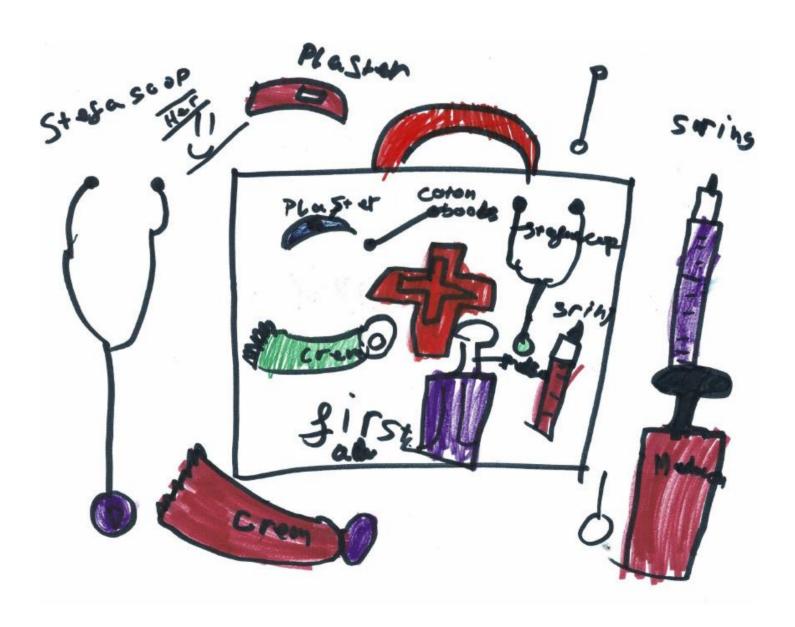
We have developed a partnership between substance misuse service and a local community mental health provider, and commencing May 2018 wellness recovery programmes, and anxiety and depression workshops will be delivered from North Staffordshire drug and alcohol services, and the community mental health provider will have staff co-located at drug services also. We continue to work with partners to address some of the other issues and gaps in services that were identified in the report.





How we've made

a difference





A snapshot of events we attend

University Hospital of Derby and Burton NHS Foundation Trust held a two day mock inspection event in which Jackie Owen represented Healthwatch Staffordshire.

On behalf of the Executive Team at UHDB please can I once again reiterate my heartfelt thanks to you all for your hard work over the last 2 days.

An initial high level feedback session has been held with the Trust Operational Group and Divisional Colleagues, further details will be available when we have completed the feedback from the team leaders. It was very clear overall how committed and caring our staff are, on all 5 sites, and how proud our staff are to work at UHDB.

In the meantime, thank you once again, for helping to support this important journey to demonstrate that we are working towards our vision of providing exceptional care together.

Libby Keep - Associate Director of Nursing/Risk/Governance/Compilance. University Hospitals of Derby and Burton NHS Foundation Trust

Healthwatch Staffordshire has attended three Wellbeing Days or Health Fayres at Staffordshire prisons over the year. These events have been covered by our Community Outreach Leads and a number of our volunteers.

On behalf of the Governor, I would like to thank you for attending the Stafford Wellbeing Day.

The feedback received from residents has been overwhelming. Looking at a glance at the evaluation forms statements like:

"Best ever", "I am feeling motivated", "I need to change", "only I can make the changes", "it's like being at the NEC", are truly inspirational and makes our job a lot more worthwhile."

It was great to see residents, staff and external agencies all engaging in one common purpose and that's to improve the life and community that we live in.

I can't thank you enough for giving your time, knowledge and commitment to HMP Stafford and hope you will join us next year!

Custodial Manager, HMP Stafford

Healthwatch Staffordshire Manager presents at Rowley Hospital Continued Professional Development session.

I just wanted to pass on my sincere thanks to you for taking the time to present at our recent CPD session. The feedback from staff has been extremely positive and they all walked away with a much clearer understanding of the role Healthwatch play.

Thank you again for taking the time to come and speak with us.

Lisa Powell - Hospital Director

Helping more people have their say



Patient experience of non-emergency ambulance transport

Healthwatch Staffordshire began receiving information about non-emergency patient transport, initially as part of a wider experience, for example where it was one factor within discharge experience, and then increasingly as stand alone experience of the service run by E-Zec Medical Transport.

As the frequency of negative patient reports increased, Healthwatch Staffordshire decided to investigate further, to see if there was an unfortunate number of people who had a less than positive experience or if the issues we had been told about affected a larger number of patients

Reaching the patients to hear their stories

We decided to survey patients, but we wanted to create a survey that would give as much information as an interview to capture the individuals experience.

In order to achieve this, we did not have any yes / no options or the usual ratings. We made every answer a free text option, so that people could explain in their own words their personal experience. Had we chosen the tick box route we could have produced a lot of statistics, but we may have missed the individual's story.

We wanted to reach out to a greater number of people using the service which would mean that people were also able to tell us of good experiences as prior to this we only heard about things when they had not worked well. The patient engagement was led by our Community Outreach Lead with the support of a volunteer and they visited the following Staffordshire hospitals on a multiple of days over a four week period:

- Royal Stoke University Hospital
- County Hospital, Stafford
- Queens Hospital, Burton on Trent
- Samuel Johnson Hospital, Lichfield



We had informed E-ZEC Medial that we would be talking to patients.and they were cooperative in providing information.

We worked with the provider and hospitals who were able to advise us of which departments the relevant patients would be found, Outpatient Clinics, Renal Units and Discharge Lounges.

Hospital Staff want to have their say too

When we started visiting the hospitals and talking to people, the staff indicated that they also wanted to share their experience of non-emergency patient transport. We opened up our interviews to staff members, but we separated their responses in order that we could clearly indicate what patients had told us and what staff had told us. This allowed for the hospital staff to have their say on a service that impacted them on a daily basis.

9

We wanted to capture any variation between waiting times outbound and homebound, so we formulated our questions into two distinct halves so we could see if these were different.

What we did with the information

Having collected all the responses, we analysed the results and produced the usual statistical report - lots of graphs that indicated satisfaction or otherwise. Whereas this provides valuable data it does not tell the patient story.

It was clear that County Hospital in Stafford made use of the discharge lounge for patients waiting for transport more than other hospitals, in part because they have a bigger discharge lounge, and in part because it is out-patient clinic policy to send patients to the discharge lounge as long as it is open and has space. The waiting areas at Queens Hospital at Burton on Trent were deemed to be unsuitable by the hospital staff, but their discharge lounge is quite small and generally does not have the capacity to take people waiting for patient transport.

We decided to include some detailed patient experiences throughout the report and one of these was a Queens Hospital patient telling how on one occasion she had been directed to the discharge lounge as the clinic was physically closing and she told us that "it was quite the best experience she had had" while waiting to be collected as "people were kind, offered refreshments and the lounge had a TV which helped to pass the time, which can often be two hours plus"







How we made the patient voice audible

To better reflect the patient voice, we collated all their responses and put them in bubbles throughout the report, relative to the question and near to the graph.

This brought the report alive - we could now see what people were telling us, which meant the patients voice was being heard.

In respect of waiting times following an appointment, the complete picture cannot be evaluated without hearing what people said. Whereas some people had generally not experienced any excessive delays (and this is a service where up to two hours waiting is considered acceptable by many patients), many had experienced long delays on occasion. When we analysed the results, nearly 50% of patients mentioned a waiting time in excess of 2 hours.

Our conclusions

With the level of experience we were able to capture, we were able to draw some clear conclusions and in turn make some recommendations and asked E-Zec Medical to consider these recommendations.

Improving the way that patients and staff are kept informed of delays in transport arrangements and that information given is as accurate as possible. This could mean patients would be able to go and seek refreshments etc. without fear of missing their transport and staff can have an opportunity to seek alternative waiting arrangements for patients if the delay is likely to be longer than a two hour wait or go beyond the clinic time where patients are waiting.

- ➤ Review of the way in which journeys are organised and routes planned to increase efficiency of the use of the transport and cut down on some of the more significant delays in waiting times for patients. If necessary, provide additional training to controllers and encourage flexibility and alterations to planned routes in reaction to information fed back by crews, changing situations or where a patient has been waiting for an excessive period of time.
- Meet with the Hospitals Management to review the waiting areas available to patients using E-Zec Patient Transport. Discuss whether there may be any capacity in Discharge Lounges for patients with extended waits or where the Department or Clinic waiting area is not suitable. In addition to discuss with the Hospital's whether there is any potential within the buildings to create a specific waiting area which has access to better facilities.
- ➤ Consider staff training and supervision in respect of customer relations. Whereas the majority of staff were stated to be friendly and helpful, patients have reported some negative experiences, some of which are serious in terms of rudeness and aggression directed at patients.
- Consider staff training and supervision is respect of booking staff to ensure that they are following procedure and processing the bookings according to company policy.

Joint response from E=Zec Medial and the Staffordshire Clinical Commissioning Groups.

Staffordshire CCGs and E-Ezec Medical Transport (E-Zec) would like to thank Healthwatch Staffordshire for the work they have undertaken to gain patient views on the current non-emergency patient transport service.

Both the CCGs and E-zec value the information contained within this report as it builds on the work currently being undertaken to support improvements in patient experience of the service which have common themes with the recommendations identified in the Healthwatch report.

The Healthwatch report has provided greater understanding of patient, carers and family experiences which will support Commissioners to continually improve service provision.

The CCGs will work with E-zec to ensure these recommendations are implemented in the current commissioned service. In response to this report and the work already being undertaken in the table below outlines the actions to date that align with the recommendations within the Healthwatch report.

Actions are outlined in the full report - find it on our website with the link:

http://healthwatchstaffordshire.co.uk/download/ezec-medical-transport/

We hope that this provides assurance to Healthwatch Staffordshire and our patients, carers and their families that we are committed to working in collaboration to improve patient experiences and outcomes of the service.

We would like to personally thank you for the work that you have carried out in this service area and welcome the opportunity for further discussion to ensure that we all remain assured of the improvements we expect to see.

Cheryl Hardisty - Director of Commissioning & Operations
Heather Johnstone - Director of Nursing & Quality
Wayne Spedding - Director of Operations, E-Zec Medical Transport Services Ltd.



People tell us of their experience of access to mental health services

Following concerns brought to our attention about the Access Team at the North Staffs Combined Healthcare Trust Mental Health Team Healthwatch collaborated with The CCG Quality team and carried out focus group work and survey work to gain a wider view of service users experience of the service.

As a result, we gathered 103 pieces of feedback from groups which included; Changes, Borderland Voices, Staffordshire Mental Health Helpline, Voices, American Clubhouse and the Observatory. This was shared with the CCG who used it to plan and inform a quality visit to the service.

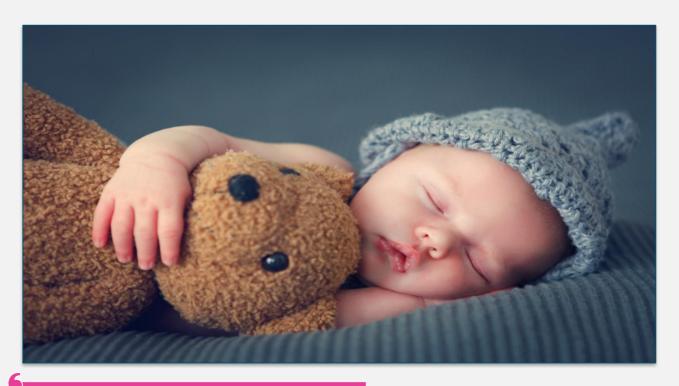
Thank you so much for this feedback which is extremely informative and will help support our quality visit to the Service. Please pass on my grateful thanks to those individuals who have helped pull this together.

Mary Barlow, NHS CCG

Maternity Transformation Programme

Staffordshire and Stoke-on-Trent Maternity Transformation Programme is a workstream of the STP. The programme sets out to implement the recommendations set out in 'Better Births'. Engagement with women and their families is a key theme throughout Better Births with Maternity Voices Partnerships across all STP footprints. Women and their families should be involved in any planning or service improvement for true codesign.

Healthwatch Staffordshire has worked with the MTP to help recruit and train 15 Maternity Champions to be part of the Maternity Voices Partnerships. We talked with over 570 women who were either new or expectant mums from across Staffordshire. This is now an active group working closely with the MTP in the development of future maternity services.



Improving health and social care

Making a difference to healthcare in prisons

Over the time period of the last three years Healthwatch Staffordshire have been working in partnership with NHS England to evaluate healthcare services in our local prisons by engaging with patients to ensure that their voices were represented. During this time, we developed a positive relationship with Care UK who deliver healthcare services in all our local prisons and have also established a network of prisoner volunteers who support us to engage with patients for both internal and external consultations.





Care UK were keen to enhance their patient engagement, so we agreed to work in partnership with them to co-produce a Patient Engagement Standards Framework with patients and staff, that is inclusive of all patients and will enable patients to have a role in the design, delivery and governance of their service, and to take more responsibility for their own health and wellbeing.

In total we engaged with 857 patients and 80 staff to gain some understanding of the sentiment towards current healthcare services, thoughts and ideas for improvement, and the barriers and issues that are faced when working in partnership with various stakeholders in a secure setting.



Healthwatch Staffordshire, Care UK and patient representatives enjoying the success of the Framework Launch Event and the visual minutes that will be displayed for all patients to see

Care UK Patient Engagement Quality Standards Framework
Values - co-produced with patients and staff

ACCESSIBLE

COLLABORATIVE

INCLUSIVE

ACCOUNTABLE

Using focus groups, surveys, 1:1 interviews and intelligence from patient groups and Heads of Healthcare we were able to identify what patients and staff value in their healthcare and what systemic and personal barriers there are in achieving this. Using a mixed methods approach to analyse the data, we were also able to identify solutions and make recommendations that were entirely co-produced by the patient and staff cohort.

From patient feedback we identified that patients want to have more responsibility, provide peer support to each other, and support the healthcare service to embed local learning and improvement into the national Care UK learning network. From this we were able to make suggestions that would enhance the existing patient involvement opportunities and create a more formal Patient Participation Group that meets the needs of patients and the healthcare service in a secure setting, the prison based PPG network is also to become a member of the National Association for Patient Participation (NAPP).

We have also been able to support the development of relationships with external providers of services, so that patients will be able to have easier access to more specialist support in the way of in-reach clinics. Local Advocacy services have also supported us to deliver the staff training package that we created and have established referral pathways for patients that have not previously been in place.

Early feedback from patients and staff has been extremely positive about the Patient Engagement Standards Framework, and patients state they feel more empowered, valued, listened to and in control of their own healthcare and the way that their services are provided. We will continue to provide support to patients and staff at the Staffordshire based prisons as the new framework is embedded and to ensure that patients voices continue to be represented.





Helping you find

the answers



What do people want to know?

People don't always know how to get the information they need to make decisions about their own health and care. Healthwatch plays an important role in providing advice and pointing people in the right direction for the support they need.

Here are the most common things that people ask us about:

GP services

Hospitals

Mental Health

Social Care

Care Homes

Support services





Living with Cancer event, Cannock Leisure Centre

How we provide people with advice and information

Finding the right care or support can be worrying and stressful. There a number of organisations that can provide help, but people don't know where to look. Last year 568 people contacted us looking for individual signposting advice.

You can come to us for advice and information in a number of ways including:

- + Our contact us form
- + At community events
- + Promoting helpful services across our social media channels
- + Over the phone

Living with Dementia Carer Experience

One of our Community Outreach Leads met and chatted with Mrs X at a Living with Dementia group in February, having given a talk to the group. Mrs X was most distressed, crying and unable to discuss her concerns for quite some time. They sat in a quiet area and she told our Community Outreach Lead about her husband and how his possible diagnosis was also affecting her health. The issue was that she believed her husband has Dementia, they were unable to get a diagnosis following a CT scan 3 weeks previously in Walsall Manor Hospital and they'd not been made aware of any results being sent through to their GP surgery. Mrs X was desperate to involve Social Services as she needed respite care for herself due to her own health issues, but they would not get involved until there was a diagnosis. This had been going on since before Christmas. In addition to this, she had been responsible for dealing with her husband's diabetes and was worried that with her own health issues she might not be doing this correctly as she had received no instructions on injecting insulin.

In the week following our Community Outreach Lead spoke to Diagnostic services, the GP at the Surgery and Social Services. He was given various timelines and schedules, some up to a further 3 months, which he felt was unacceptable and asked them if anything could be done to improve on this due to the negative impact on the health of both Mr and Mrs X.

As a result of this, Mrs X confirmed that they have been offered a 'cancellation' appointment at the GP's to get the results and diagnosis and that Social Services have contacted her to make an appointment and they are also seeing the diabetic unit the same day. All of these appointments were able to be made within two weeks of Mrs X telling our Community Outreach Lead about her difficulties.

Mrs X was almost speechless with delight and cannot believe how much Healthwatch have been able to assist in getting her a such a prompt and welcome outcome.



Living with Dementia group, Burntwood

Issues with hospital discharge

Healthwatch received a call from a lady who explained that her mother had 9 weeks earlier suffered a severe stroke and was admitted to Royal Stoke hospital. After two weeks, upon arriving to visit her mother, she found that she was not on the ward and at this stage staff advised that the patient had been transferred to the rehabilitation unit at County Hospital, Stafford. The patient has been there for 7 weeks and the family had suddenly been informed that she was being transferred to Samuel Johnson Hospital in Lichfield. On making enquiries about why she was being moved again, it was advised that the patient would then be assessed on the care package she would require.

The daughter was concerned that after several weeks on the rehab ward it had seemed that her mother would be unable to return home and that a care home place would be required. The caller also advised that the patient's husband was very upset at the further move to Lichfield as he would find it very difficult to visit. Healthwatch were concerned that no assessment had been made during the latter part of the stay at County Hospital. It appeared as though, because there are now Discharge to Assess beds at Samuel Johnson that no attempt had been made to consider the future care requirements of the patient whilst on the rehabilitation ward at County Hospital.

Healthwatch contacted the Head of Patient Experience (with whom they hold regular meetings) to look into this matter with a view to making things less stressful for the patient and her family. With the intervention of the Patient Experience Lead, the decision was made to complete the assessment at County Hospital rather than have another transfer for the patient which could cause distress to the patient and her family.

The family expressed their gratitude for the assistance provided by Healthwatch Staffordshire and the Patient Experience Lead of University Hospitals North Midlands.

Caller was asking for advice regarding her Grandad who was at Sir Robert Peel Hospital and she has been told that they are discharging him to "home". The history was that Grandad had a bad fall and had been admitted to Good Hope Hospital - he had broken two limbs. Staff at Good Hope were ready to discharge from the acute hospital setting after a couple of weeks, and the granddaughter reported that some staff were saying that he needed to be transferred to a non-weight bearing bed (potentially in a care/nursing home) until he was able to go to Sir Robert Peel for rehabilitation. He was however discharged to Sir Robert Peel rehabilitation unit. After a day or two at Robert Peel, the staff there said they "can't keep him" (as he was not ready for rehabilitation) and they would discharge him home.



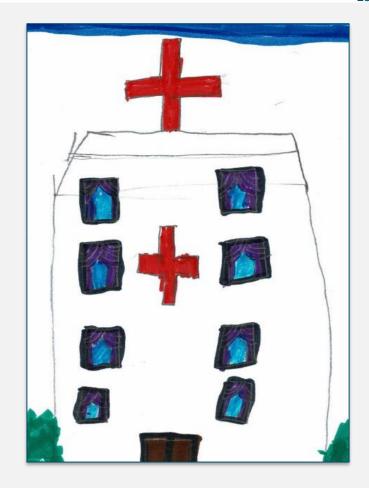
The granddaughter was very concerned as he was non-weight bearing, bed-bound and was worried about him being discharged home, even if carers were to attend up to 4 times a day as had been suggested. Family had arranged a meeting with the Discharge Nurse, so Healthwatch discussed with family about writing some notes in advance of the meeting, questioning whether any sort of proper assessment had been made as it seemed to the family that Grandad needed continuing medical care (it being less than three weeks since he had had his fall). Healthwatch also advised to ask about other options i.e. nursing home for a period until he was ready for rehabilitation and to ask about what physiotherapy if any was being done currently to keep his functionality as well as is possible with his injuries because of the high risk of de-conditioning. The Family reported back that the Discharge Nurse had reconsidered and the discharge had been postponed.

The granddaughter said that talking to Healthwatch had allowed her to prepare for the meeting and raise the important issues that needed to be considered, thereby helping her to assist her Grandfather in gaining the appropriate care.

Issues with hospital discharge

Healthwatch received a call from a gentleman about his 88 year old father. The caller told how his father has been living with him for the past 18 months following a number of falls at his home resulting in the ambulance service being called out. Since living with his son, the father had several falls but these were able to be dealt with by his son, so not requiring medical intervention. However, the caller stated that his father's mental health has been deteriorating to the point where the GP had referred him to the Mental Health team and also for a brain scan.

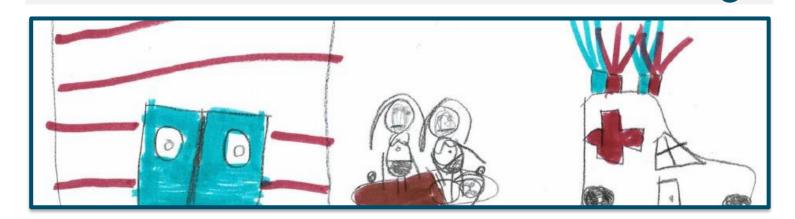
Before he could have this scan, he had a fall and broke his hip resulting in admission to Queens Hospital, Burton where he stayed for one week before being transferred to Erasmus Darwin ward at Samuel Johnson hospital. The son was awaiting a scheduled hip replacement and he informed Social Services that he did not feel he could cope with caring for his father due to his own health and his father's possible dementia. The son is 69 years old and had been struggling to care for him for some time.



He reported that he had requested an assessment for residential care but had been informed that he did not meet the criteria for residential care as he has no diagnosis of dementia nor local history of falls and therefore refusing to have him home would essentially be making him homeless. He was informed that his father would therefore be transferred from hospital to Bed and Breakfast accommodation with a care package. He was informed that a meeting would be held with his father the following day to arrange his discharge.

Healthwatch were concerned as there appeared to be a continuing risk of falls and about whether there had been any mental health assessment carried out to confirm whether he had Dementia or not, and if so, to what degree he could care for himself. The son had told Healthwatch how there had been involvement previously with a Nurse Practitioner in the mental health team. Healthwatch advised the caller to go back to the GP to see if they can expediate a brain scan to confirm or reject a diagnosis of dementia and also contact the nurse practitioner to see if they are able to input on this case.

Healthwatch escalated this to Midlands Partnership Foundation Trust who agreed to undertake a further assessment before any decisions were made regarding the discharge.



Accessing dental care

A member of the public called asking for support in accessing the dentist. He has Parkinson's and very restricted mobility. He had a fall recently and had been trying to get to a dentist as he's broken two teeth and a crown. He is unable to get to the dentist and doesn't have a carer who can go with him. He was not aware if any of the dentists in the Tamworth area could make home visits. We wanted to see what could be done to help him access the dental treatment that he obviously needed.

We contacted NHS Community Dental service and explained the situation to them. They came back to us and advised that they had been in touch with a Tamworth Dental Surgery and they had arranged a home visit for him in April and said that if he needed to see them sooner he could make an appointment at the surgery and gave the telephone number for Tamworth Community Transport.

We contacted the gentleman again to check that he was happy with the result. On speaking to him in further detail he was able to say that he had some pain and discomfort and that he could not access the Tamworth Community Transport as he could not meet the requirement of being able to stand unaided from a seated position. We established that the gentleman uses non-emergency ambulance transport for hospital appointments. The gentleman confirmed that he would prefer to be seen sooner as it was a long time to wait, a month or more, when 2 of his teeth and a crown were broken with a possibility to the pain increasing.

We re-contacted the Community Dental Team to clarify the situation. This resulted in them making an appointment within days at the Community Dental Service at Cannock Hospital and the gentleman was able to make arrangements for the non-emergency patient transport service to take him to his appointment.

The gentleman expressed his thanks to Healthwatch Staffordshire in enabling him to receive the appropriate care.



A gentleman called Healthwatch, very concerned about his disabled friend who was having difficulty in accessing dentistry due to mobility difficulties and they had spent months trying to find a dental practice who would be able to provide dental services to someone in these circumstances. In desperation he contacted Healthwatch for advice. Healthwatch were able to contact the Community Dental Services to see what could be arranged. This resulted in an appointment being made at the Rycroft Centre and arrangements for non-emergency patient transport to take and return the patient home after treatment.

A note of grateful thanks for assisting me to get my disabled friend to a dental service after months of trying. Your intervention to the Community Dental Service and their brilliant attention to need is more than we hoped for. We have a first dental appointment next week at the Ryecroft Centre, not far from where my friend lives. The Centre has organised an ambulance taxi and will get him in and out of the surgery. The Surgery staff and the dentist were so very nice, caring and helpful. So many thanks indeed.

9

Day Services for people with learning and physical disabilities

Following intelligence received about the availability and quality of Day Opportunities for People with Learning Disabilities at one Staffordshire service, Healthwatch Staffordshire decided to undertake a County Wide Project looking at the quality and scope offered by these services. These largely unregulated services are accessed by some of the most vulnerable citizens in the county and Healthwatch wanted to see what was available to people, how well the opportunities met people's needs and assess the value of these services.

We wanted to visit many different types of service which cater for people with different needs and we wanted to visit services geographically spread though the county.

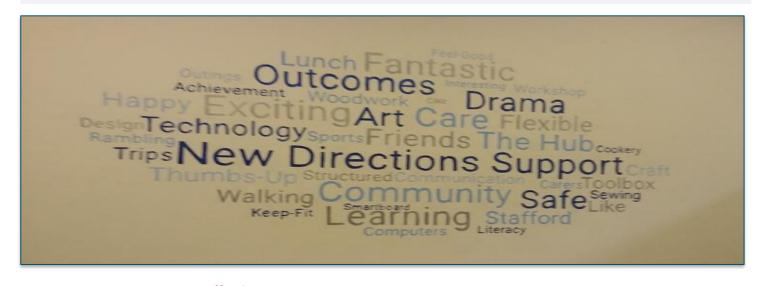


We researched the type and location of services and made plans to visit 22 separate services under our Enter & View remit, using our volunteer Authorised Representatives and our staff who have all received specific training in relation to visiting services and who have all been DBS checked.

We held a briefing session for all our Authorised Representatives who would be making these visits as we had formulated a specific questionnaire to capture relevant information. We based this questionnaire on quality indicators which we adapted from those we use for other services.

We contacted the services we had selected to arrange visits and to ask them to complete a previsit questionnaire so that we would have advance knowledge about some aspects of their services.

We found the overwhelming majority of the services to be very welcoming and very helpful in supplying all the information we asked for, which was quite considerable covering number of service users, staffing, staff to service user ratio, staff training and qualifications and types of activities available. There was the distinct feeling that people were proud of the service that they offered and were very happy to have Healthwatch visit and report their findings.





Aspire, Stafford - A visit to Llandudno

We visited services for people with mild to moderate needs, services for people with considerable needs, right through to the County Council run Complex Needs Services. The visits took place over a three month period in early 2019. We found a diverse range of services which catered to differing needs of individuals.

Whereas some services mainly provided activities, nearly all promoted life and social skills with some services providing education and specific training and work experience.

Our findings

Almost without exception, we found that the services we visited were excellent providing life enhancing activities for people using the services. People's experience of these services was vital to their wellbeing, providing community, friendship, occupational activity, learning and life and sometimes work experience.

Without exception we found that the management and staff of the services to be passionate and caring. They knew their clients well and consideration was made of clients individual needs and abilities and the support provided to clients was professional but with a very human touch. We found services that had sensory rooms and provided therapies to enhance the wellbeing of their clients. We visited farm based projects with emphasis being on growing food and ornamental plants and animal husbandry. We visited sessional services based in Leisure Centres which

provided very low cost inclusive sports and also offered rebound therapy.

It was really heartwarming to see clients of complex needs services attending these sessions, showing that it is not always about the money - these people were able to assess a rewarding experience, available to all, whatever their level of need, for just a few pounds cost, although they did have their one to one support with them to enable participation.

We found very few causes for concern and did not feel it necessary to make a lot of recommendations - where we found a concern, we discussed it with the provider and found them to be very responsive and pro-active in addressing that concern. One important concern on the frequency of DBS checks for staff was promptly addressed in an internal management meeting and the provider reported that they would be taking immediate action to bring all staff DBS checks up-to-date.

With regard to people making use of the services, they were very welcoming to our representatives and were keen, where possible, to tell us of their experience. If was abundantly clear that these services were a lifeline to people, providing community, company, activities, friendship and opportunity.

Healthwatch Staffordshire would like to thank all the staff and people using these services for making us welcome and sharing their experiences with us. It allowed us an insight into what is available, what is important to people and the high quality of these services.

I must compliment the Staffordshire Healthwatch team on the very professional way that they undertook the Enter and View visit here at New Directions Support as part of their work with independent day opportunities providers. The visit was very thorough and the team took time to speak to a number of staff and service users, as well as assessing a range of evidence that we were able to provide around the Healthwatch quality framework. The visit has resulted in New Directions Support gaining an extremely positive Healthwatch report, which has celebrated our high-quality services and good practice, and ensured they are shared with others. Thank you to all the Healthwatch team for the diligent and constructive way that they carried out the visit, and for the comprehensive report that has been compiled on our service.

Warren Low, Chief Officer, New Directions Support



All the reports are available on our website and you can reach the reports on the following links:http://healthwatchstaffordshire.co.uk/downloads/?cp_enter-view-reports=2



Goats at Upper Moreton Farm, Rural Therapy & Activity Projects

Our volunteers

A Volunteers story

Healthwatch Staffordshire was the perfect opportunity to give me the insight into the world of working in Health and Social Care. As a second year student at Staffordshire University studying Health and Social care, I was looking for some volunteering to go alongside my course. I have always had an interest in improving and changing the lives of others in my local community. Healthwatch Staffordshire fits perfectly alongside my course as they work with all different groups and people across the community giving me a wide range of experience.

I initially heard about Healthwatch at university but prior to this, I had never heard about them or the work they did. However, since volunteering with them I have come to realise how much work Healthwatch does for communities and the impact they have.

I decided to volunteer to enhance my skills and knowledge around health and social services as well as make a difference to the local community. Additionally, I thought that volunteering would be a great opportunity to meet new people who work in the health and social care sector.

From my time volunteering with Healthwatch Staffordshire, I have had the opportunity to work on an emotional wellbeing project in schools and attend a Health fair at HMP Stafford. The project in schools has allowed me to have a greater understanding of mental health in young adults. The project involves creating surveys, emailing schools and arranging a meeting with the head of pastoral care at the school. This project has given me great experience in planning and organising a project. In addition to the projects in school, I also had to the opportunity to attend a Health fair at Stafford prison. This experience was so interesting, and I was able to learn so much about health care in prisons and the quality of care they receive.

Volunteering at Healthwatch has given me the opportunity to build on my current skills in health and social care as well as improve my confidence in talking to new people. Volunteering at Healthwatch has given me some excellent experience that I will be able to take forward and use in future jobs and careers. Healthwatch Staffordshire has so many different opportunities for volunteering and they make me feel I am making a difference to the local community and I definitely feel like they value my time and input.

I thoroughly enjoy my time volunteering at Healthwatch, and I hope to carry on working on more projects in future months.

Jess, Healthwatch Volunteer

Volunteering with Healthwatch has always given me much pleasure. Recently I have been doing survey work in hospitals about Discharge to Assess. I have met some lovely people and it is not only a pleasure, but also a privilege, to speak to patients.

Garry, Healthwatch Volunteer





How do our volunteers help us?

At Healthwatch Staffordshire we rely on the work and support of our volunteers. This is particularly important when undertaking projects, which could be difficult to achieve without our valuable volunteers. What our volunteers do:

- + Raise awareness of the work we do in the community
- + Visit services to make sure they're meeting people's needs
- + Support our day to day running e.g. governance
- + Collect people's views and experiences which we use in our reports



Artwork by Catherine Care Day Opportunities (household sponge technique)

Authorised Representatives visit 22 Day Services for people with learning and physical disabilities

Healthwatch Staffordshire undertook a series of Enter & View visits to Day Services for people with learning difficulties in order to see the range and quality of these unregulated services. Fifteen volunteer Authorised Representatives worked with the Healthwatch staff to carry out 22 visits to services throughout the county.

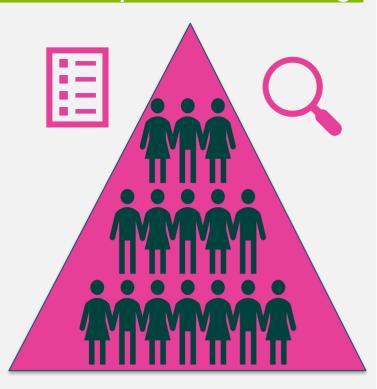
The volunteers attended a briefing session about the project and the day services questionnaire that had been formulated for these visits, which would provide clear information of different aspects of the services where the quality of the service could be identified and aid report writing of the visit. The resulting reports give clear insight into the high quality services that are available to Staffordshire residents.

Healthwatch Staffordshire would like to thank all the Authorised Representatives, without whom an Enter & View project on this scale may not be possible.

I admit I was a little nervous about the visits to Day Services, despite the excellent training and briefing documents as Enter & View was a new experience for me having fairly recently joined Healthwatch as a volunteer. I don't really know what I expected, but all of the centres I visited had a warm, supportive atmosphere which welcomed both clients and visitors. The range of activities on offer was amazing and so obviously enjoyed by the clients. At the end of the visits I not only felt better informed about Adult Day Services but realised I'd had fun too!

Volunteers interview patients on their experience of discharge

Healthwatch are undertaking study of patients being discharged from hospital through the process known as Discharge to Assess (D2A). This is the process through which Patients are assessed for their health and care needs once they no longer need to be in an acute hospital bed. Patients may be discharged home with a package of care to continue rehabilitation, or to a nursing home or a community hospital bed to continue their recovery before they can return to their home. So far, we have spoken to about 36 people who were Patient's in Royal Stoke or County Hospitals and will be following some of those up through their journey out of hospital. We are continuing to speak to people from Queens Hospital Burton and those who have gone to Samuel Johnson and Robert Peel for further rehabilitation Hospital assessment.



I have been volunteering with Healthwatch for some years and I am an Enter & View Authorised Representative. Recently I have been taking part in the Discharge to Assess project, surveying patients in hospitals. I have found it very interesting as I have previous experience caring for my brother. It always seems to me that discharge is not straight forward, there are many issues to consider. Val, Volunteer & Authorised Representative

I have now volunteered for Healthwatch Staffordshire for a number of years and as an ongoing medical condition has progressed and I can do less walking and standing I have found that they are considerate and changed my opportunities.

I have been involved in many projects from surveying hospital in-patients asking them about their experience to visiting a local prison to speak with patients about their health care.

Now I attend some meetings on behalf of Healthwatch, including the Service User Meeting for those using Mental Health Services, submitting a report following the meeting. I have always found Healthwatch a thoughtful organisation who have looked after me as much as I have worked for them. They find the time to keep in touch with their volunteers.

Bev, Healthwatch Volunteer





Volunteer with us

Are you feeling inspired? We are always on the lookout for more volunteers. If you are interested in volunteering get in touch; www.healthwatchstaffordshire.co.uk

t: 0800 051 8371

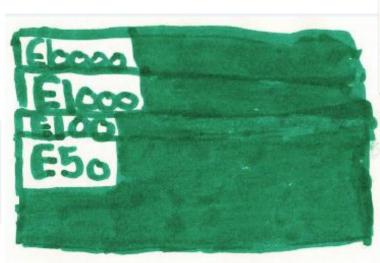
e: enquiries@healthwatchlstaffordshire.co.uk

Our finances

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	199,545
Additional income	625
Total income	200,170
Expenditure	£
Operational costs	47,474
Staffing costs	137,562
Office costs	8,872
Total expenditure	193,906
Balance brought forward	6,263











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Our plans for

next year

Looking back

The report provides an overview of some of the work that we have undertaken over the past year of which we are very proud. In addition to this we have projects which are carrying over into this year. Below is a flavour of our on-going work.

Young People

Healthwatch Staffordshire has embarked on a study looking at emotional well-being provision in Staffordshire High schools and the impact of budget restrictions have had on low-level emotional well-being services including how pastoral care has been affected for student's year 7 and above.

Discharge to Assess D2A)

Following a number of concerns into Healthwatch about the experience of D2A, we are undertaking a project looking at patient experience of the discharge process. We are visiting all of our local acute and community hospitals finding out about what patient's think. we are also talking to staff who operate the system and will report back our findings once the fieldwork is completed in August 2019.

Looking Ahead

This year we have decided to focus on 2 projects based upon intelligence gathered over the past 12 months through our engagement activity, our experience exchange and our social media and in discussion with partner organisations. These are:

Monkey Dust

Following feedback we have received from local communities and services, together with the recent media focus on the Monkey Dust crisis in Stoke on Trent, we will be completing a long-term consultation to assess the impact of the use of this drug on individuals, families and communities in other parts of Staffordshire.

We will be working in partnership with various public and voluntary sector organisations, as well as individuals and community groups to identify the true extent of the issue, and the short and potential long-term impact it is having in our communities. We will also be working with commissioning partners to plan a joint approach to addressing the issue, and supporting people who are affected by it.

Access to Social Care Assessment and Service

Following feedback from the public, reporting difficulties in accessing a social care assessment, we will be undertaking a study of people's experience of this and looking at any potential impact this has on them and their carers in being able to continue to live independently in their own home.



Barriers /Opportunities

Resources are our major barrier to achieving success in all that we do. Healthwatch like most of the public and voluntary sector has experienced significant cuts to it budget and this has inevitably led to a significant reduction in our resources available to do the job. Despite this, the issues that people report to us everyday are still very real and in some cases more so as cuts in services take their toll on people.

However we have a group of around 74 volunteers without whom we could not be as responsive to people and the issues they bring to us. Volunteers add great value to our team and we are very grateful for the time and commitment they give to us and hope that we can continue to build on this as we move forward in 2019/20.



Finally I have to thank all the staff and volunteers who work so hard to deliver an effective Healthwatch to the people of Staffordshire and to our Healthwatch Advisory Board for the steer and support they give us to enable us to be an effective organisation.



Jackie Owen

Jackie Owen Healthwatch Staffordshire Manager



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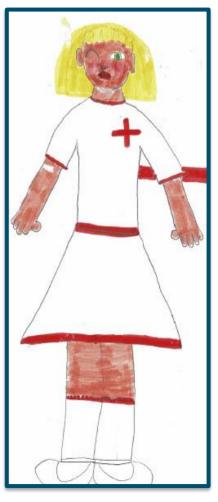
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