

Annual Report 2021 - 2022

healthwatch Staffordshire

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Message from our Chair

As we entered into 2021 any optimism that the worst of the Coronavirus crises might hopefully have been behind us did not blind us to the profound affect on daily living and, in particular, the way the pandemic has massively impacted health. So many people have suffered either through illness or bereavement. Many others have faced mental health challenges because of the impact of lockdown.

We all want to continue to cheer on all the staff in the NHS and the wider care sector who have worked so tirelessly during this crisis. However, we are all aware that even if we transition to a Covidfree living, the future looks grim with the knowledge of growing operation waiting lists and a concern about the number of serious health conditions going undiagnosed.



I'm proud that Healthwatch Staffordshire has worked tirelessly to ensure that we address the concerns of local people. Of course, our aim isn't just to "catch people doing it wrong" and so we have also endeavoured to compliment when we hear stories of good practice and excellent customer service. We have also sought to make sure that we connect with those underrepresented groups within our communities as we know tat they are often less likely to be heard by these service professionals and decision makers.

Thankyou to our Healthwatch staff and volunteers plus all who have supported and contributed to the work of Healthwatch Staffordshire.

Every Blessing

Lloyd Cook

Healthwatch Staffordshire Chair



The COVID-19 pandemic has thrown long-standing health inequalities into stark relief. With NHS and social care facing even longer backlogs, the unequal outcomes exposed by the pandemic are at risk of becoming worse. Local Healthwatch play an important role in helping to overcome these adversities and are uniquely placed to make a positive difference in their communities."

Sir Robert Francis QC, Chair of Healthwatch England



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About us

Your health and social care champion

Healthwatch Staffordshire is your local health and social care champion. From Kidsgrove to Kinver, Burton to Brewood and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.



Our values

- •Listening to people and making sure their voices are heard.
- •Including everyone in the conversation especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers, government, and the voluntary sector – serving as the public's independent advocate.

Our year in review

Find out how we have engaged and supported people.

Reaching out

2,400 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

965 people

came to us for clear advice and information about topics such as mental health and COVID-19.

Making a difference to care



We published

13 reports

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

Our most popular report was

Coronavirus Pandemic - Returning To Normal

which highlighted the anxieties people had on coming out of lockdown and vaccinations.

Health and care which works for you



We're lucky to have

33

outstanding volunteers, who gave up 30 days to make care better for our community.

We're funded by out local authority. In 2021-22 we received:

£205,338

Which is the same as the previous year.

We also employ

7 staff

who help us carry out this work.



Our Priorities

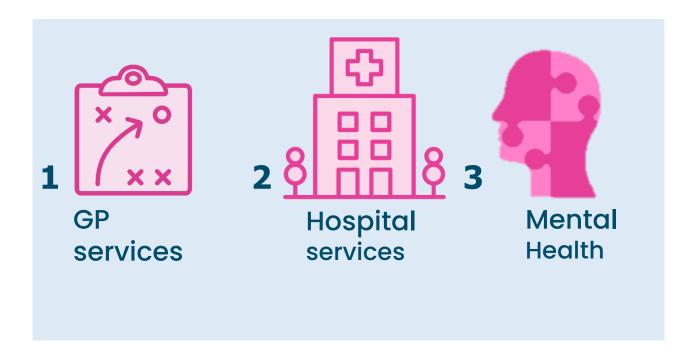


Public surveys

Our priorities during 2021/22

At Healthwatch Staffordshire we want to ensure peoples views and experiences are listened to and are heard. We encouraged people to tell us their stories of Health and Social Care in Staffordshire and how they were different during the global pandemic.

During 2021/22 we published several surveys, based on what people in Staffordshire highlighted as most urgent in our public priorities survey and promoted them via our website, emails, social media, face to face engagement and third parties.





64% of respondents who considered themselves to have a long-standing health condition chose GP surgeries as a key priority.

Our 2021-22 projects.

These are the surveys we have published from April 2021 to March 2022.



We asked the public to tell us what health services were most important to them. We held a series of online Zoom sessions to interact with people and discuss their feedback and ideas.



Adjusting to life during the Covid-19 pandemic was difficult for everyone We wanted to know what people thought about life returning to normal and was there still a risk in their area.



During Covid-19 numerous people complained about accessing dental care. We carried out a survey asking people to tell us about their experiences accessing dental care during the pandemic



Our Primary Care survey was developed so we could learn what people thought of enhanced services as part of the Integrated Care System. Did they want further health services?



With so many people struggling with their mental health and wellbeing due to Covid-19 we wanted to find out just how peoples health had been affected. This was a key priority for our residents in our first survey



We asked people to feedback on their hospital appointment cancellations during the pandemic and had they been offered any support whilst they waited.





Our published reports this year

- Hospital Services Report
- Addendum Hospital Services Report
- Primary Care Services Report 2
- · Mental Wellbeing Report
- Addendum Mental Wellbeing Report
- Primary Care Report
- Addendum Primary Care Report
- Access to Primary care and Digital Exclusion
- Hospital services Report
- Dentistry Report
- Public Priorities Report
- Public Priorities Summary
- Coronavirus Pandemic Returning to normal

The Coronavirus Pandemic – Returning to normal

For well over eighteen months we had experienced anxiety, suffering, tragedy, restrictions on our activities and employment – not to mention the challenges to our health and social care systems that no one could have foreseen in our lifetimes.

We have also seen great community spirit, marvelled at the ingenuity and resilience of front-line health and social care workers and those that support the delivery behind the scenes, not to mention the Public Health, Local Government and an army of volunteers that have stepped up to the plate.

But how did people feel about returning to normal? Over 500 people told us...



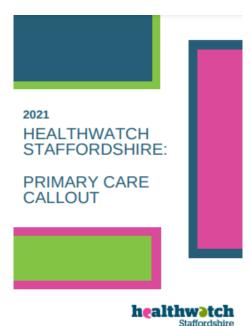


Key findings

- Staffordshire residents reported that they felt safest in their own area followed by Staffordshire county and then the United Kingdom.
- Over 81% of respondents said they were confident in the ability of the NHS to effectively treat those who have contracted coronavirus.
- Around 64% of respondents said they were currently or intend to take part in the home testing initiative, with just 18% reporting that they will not take part.
- 87% of respondents said they were confident in the vaccination programme in Staffordshire to reduce coronavirus transmission and the number of new cases.
- Over 96% of respondents said they have already had or would have the coronavirus vaccination.
- Over 67% of respondents reported feeling anxious and/cautious with the easing of lockdown restrictions.
- Over 36% of respondents admitted to missing at least one health or social care appointment for fear of catching coronavirus since January 2021.
- Over 61% of respondents said that the pandemic has had a negative impact on their mental wellbeing, with young people (18-24) reporting the worst impact.

Primary Care Reports

- Doctors were considered the most essential service out of the listed primary care services with 97% of respondents maintaining they are essential for themselves or their community
- Dementia services were considered the most essential service out of the listed community care services with 60% of respondents maintaining they are essential for themselves of their community.
- While face-to-face appointments were considered as essential by a much higher proportion of respondents than digital appointments, large differences could be seen when breaking this down by the age of the respondents.
- When asked what they thought could improve current services in Staffordshire, again respondents proposed a range of changes but most notable were an increase in staffing and number of appointments, a full return to face-to-face care, and better communication.
- The aspect of accessing a face-to-face appointment at an alternative GP practice was explored, 72% said they could do so easily, though 12% of people said they would find it hard or very hard. Most said they could travel by car or identified a range of alternate methods.
- On the aspect of having a digital or telephone appointment instead of a face-to-face 64% said they would but 24% said they didn't get a choice. 43% said they would be able to take a call at any time but 37% said they would not be able to. 58% of people who would not accept a video call said they didn't think right to have a video call rather than a face-to-face appointment with their GP. Equal numbers, 21%, said they did not have a suitable device or didn't know how to operate it. Less said they could take a video call at any time with over half saying no.





Hospital Services reports



- It is clear that responders have experienced lengthy delays, which range from 3 months to a year with some over a year and some indicating indefinitely, to have an appointment or treatment.
- When exploring in greater detail what impact the cancelled or postponed appointment had on the responders, there was a range of answers that expressed negative feelings. For example, responders noted that they suffered pain, discomfort, stress, anxiety, depression, less independence and longer recovery times. Furthermore, responders mainly stated that no alternative support was offered in the interim while waiting for a new appointment date.
- This is clearly an opportunity for hospitals to consider how they liaise with patients to offer timely updates, provide advice on self/pain management and relieve some anxieties when the need may arise to delay or postpone treatment.
- People were in hospital for either less than a week or between one and four weeks. The majority of people said communications from Doctors and Nurses were either excellent or very good.
- Over a third of people reported being given less than six hours' notice of being discharged with just over a fifth less than one days notice and a similar amount one to two days notice.
- Over two thirds of people did not have support needs on being discharged. The remainder said they needed aids or adaptions to be as independent as possible at home. People rated the discharge experience at an average of 6.9 out of 10, six respondents rated it as being a 10.
- The majority of people rated their care as excellent overall with five saying it was mixed and one as very poor.



Mental Wellbeing report

It is clear that people believe that the Coronavirus Pandemic has deeply impacted their mental wellbeing. However, in stark contrast, choosing whether to have the COVID-19 vaccinations and booster vaccines appeared to have much less of an impact on peoples mental health. In some cases, the reason for this was because of the trust in the NHS and belief in the communication strategies applied by the NHS.

The majority of people had not had a break in education or work.

When asking people to contemplate future feelings, people's views on this were mixed across the range with more feeling concerned about the future than those not so much or not at all.





On reflection of people's responses in other questions some responders indicated the ideas around 'what the future entails' brought out some anxieties due to changes in jobs, finances and adaptions to social lives.

It does seem that overall, the Coronavirus Pandemic has increased widespread anxiety levels. People clearly indicate they've spent a lot less time with their family and friends on the whole since the beginning of the Coronavirus Pandemic. Likewise, people spent a lot less time on activities and hobbies which supports the idea that the Coronavirus Pandemic has caused greater loneliness. Overall, nearly 75% concluded by sharing that they do not believe they have a healthier work-lifestyle balance since the Coronavirus Pandemic began. Although, it is clear that this does not relate to increased alcohol or drug usage. On balance, it could be argued that this less healthier work-life balance is because of greater social isolation, not being provided professional support or by simply not being heard, to openly talk and offload personal feelings. It should be noted that the main sources of emotional support came as a result of family and friends. Unfortunately, whilst some people had some means of support a considerable number of responders stated they were still anxious and worried.

Healthwatch Staffordshire Dentistry Report

We were constantly hearing from Staffordshire residents who told us about issues in accessing dental services and getting treatment. We decided to look deeper into this and developed a dental services project which intended to explore and share Staffordshire residents experiences

What people told Healthwatch about their experience of dental services during the pandemic.

The modal number of dental practices the respondents tried when attempting to register with a dentist was 6. 100% of those who were unable to register as an NHS patient were told they would be able to register at that practice as a private patient. 17% of these people went on to register at their dentist as a private patient.

'All the dental practices I phoned said they had no space for NHS patients, but you could join as a private patient'

'Plenty will take you on as a private patient, but I cannot afford it'

80% of respondents said emergency treatment options were restricted due to some procedures not being available at the time they needed treatment.



'Only temporary fillings could be done'.

'They could take the tooth out but that was the only treatment. I still need an urgent filling but do not know where to go'

- Many respondents were not able to make a suitable appointment with an NHS
 dentist to suit their needs, in addition to this, the majority of respondents also
 maintained that they were not given a time-frame of when they may be able to
 do this or even triaged by dental receptionists.
- Some Staffordshire residents have experienced restricted treatment options in both emergency and routine care due to the pandemic.
- The majority of respondents were satisfied with the emergency or routine treatment they received
- Most respondents were satisfied with the covid-19 precautions they experienced at their dental practices.

Advice & Information

One of the main aspects of our service is a statutory requirement to Provide advice and information about access to local care services so choices can be made about local care services.

We certainly had a busy year doing just that plus the extra demand that the pandemic and the national vaccination programme created.

An important part of Healthwatch activities is providing advice and information to members of the public who contact us by telephone, email and via our website multiple times, every week. We are able to give information, signposting and advice to people to enable them to resolve the issues they are facing.



Throughout the year we have received constant enquiries concerning Covid vaccinations, from how to arrange or book a vaccination, lost property at vaccinations sites, through to issues with recording of vaccinations and obtaining a Covid passport.

We had enquiries about how far forward could GPs prescribe essential medicines when someone had the chance to work across Europe. Another was about a young person in foster care where the local GP practice said they were unable to register them. We often hear about difficulties in getting the right support or people not knowing what to if their elderly parents are poorly and if the prescriptions so far haven't alleviated the condition, in these cases we explain what options are available and the next steps people can take. Just by listening and then empowering people with what they can do is really valuable and just what is needed.

Sometimes we hear about things that are very concerning, in one case it was about a home care provider so we liaised with the Care Quality Commission and following the intervention of the Inspector the providers manager personally visited the person to explain how the service they receive would be improved.

We've provided some more detailed accounts that you can access in the expanded report available here.

Community Outreach

Re-drawing the map!

We took the opportunity re-design the way we delivered our Outreach and Engagement services through the course of this year.

We split the county into four areas for our newly recruited Team of four outstanding people to be able to focus on smaller geographic areas. This would enable the Team to get to know the people and organisations within each segment.



The segments covered North Staffordshire including Newcastle, the Moorlands, Leek and Cheadle. An Eastern segment from Uttoxeter down to Burton, Lichfield and Tamworth. Complimented with a Central and South Western segment.

We have visited Newcastle and Moorlands groups based in Clayton, Newcastle, Chesterton, Madeley, Bradwell, Kidsgrove, Cheadle, Biddulph and Leek and partnered with local organisations on community projects. We have met with various groups and attended meetings, both face-to-face and online sessions to hear of people experiences of health and social care services and to provide information, signposting and advice.

We have spoken with people who have young children, who experience mental ill health, who have dementia, who are on the autistic spectrum, who are carers, who are elderly, and people who experience physical health issues. We have also made people who are blind aware of what we do through articles in the Staffordshire Moorlands Talking Newspaper.

We have regularly attended carers groups in Tamworth, Burton and Lichfield, taking up and resolving issues raised by group members either by providing information or referring matters through the CCG or the patient experience team at University Hospitals of Derby & Burton.

Community Projects

Healthwatch Staffordshire, as the consumer champion for health and social care in Staffordshire launched the Community Cash Fund to invest in the capacity of small grassroots projects and groups that hope to improve the wellbeing of and amplify individuals' voices in their local communities.



Eight Grants of up to £1,500 were offered to individuals, organisations and groups to fund new projects that would help improve the health and wellbeing of local people, especially those who are more likely to experience health inequalities.

The projects did not have to be expensive or complicated. The options were only limited by people's imagination and commitment to improving the wellbeing of their local community.

The projects needed to focus on one of the four areas listed below.

- The impact of Covid-19 on young people accessing and receiving mental health services
- The implications of Covid-19 in accessing Primary Care using technology
- The impact of Covid-19 on people having hospital treatment delays or cancellations
- The impact of Covid-19 on Carers of accessing Primary Care and/or hospital treatment delays or cancellations for themselves of the person they care for.

The Community Cash Fund (CCF) was designed to enable small grassroot organisations or community minded individuals to embark on work that they might not otherwise be able to achieve and in turn grow their group or realize their passion to improve the outcomes for the people they provide services to or within their close communities.

Healthwatch Staffordshire would in turn raise awareness of its services, create strong links with a number of groups / individuals that would hopefully turn out to have the potential to become firm partners in working together to enable the voices of the people they support to be heard by those with the power to improve services.

The eight projects

The opportunity proved very popular with many applications, eight were selected

The initiative proved very successful with us receiving many more application than we could fund. With much debate we whittled it down to eight projects.







Our Community Outreach Leads liaised with the project co-ordinators and formed some very useful partnerships that we look forward to continuing to work with.







There was some very interesting work undertaken from enabling children at a local school to have an area to garden as well as a quiet area for reflection to supporting young people to receive a programme of Emotional Wellbeing





Workshops for Year 7s to have a forum focusing on anxiety that has come about due to Covid.

Other projects set out to support people with Autistic Spectrum Conditions and secondary mental ill health who identified as suffering due to impact of COVID. Another ran weekly wellbeing sessions for parents/carers of children with cancer

Each project has produced a report and in one case a presentation to appreciate what the opportunity has enabled each of the projects to achieve as outcomes.

We have created a place that you can read through all the reports and view the presentation to appreciate what great results the projects have been able to deliver.

You can access all of these and more here.

Christmas Lunch for lone elderly residents of Silverdale

Healthwatch Staffordshire heard from an active resident of Silverdale who was providing weekly meals to lone elderly people and taking her dog to Royal Stoke Hospital as a therapy dog for patients to interact with. Celia told us how she and a small group of volunteers already provide weekly and monthly meals to elderly people and that the social interaction is as important as the meal itself. Celia wanted to provide a special lunch for these elderly people at Christmas, who would otherwise be on their own.

Celia told us "It is fairly clear that these weekly meals contribute a lot to the mental wellbeing of these local people. There are a lot of people who are lonely and live on their own. Covid has had an impact on their lives and the isolation and lack of social interaction has been difficult for many older people to cope with. Being together and belonging to a society of people who care is so important." Regarding providing a special Christmas lunch, Celia explained "We have the equipment, the communal room which Aspire housing let us use and the volunteers to help. The people who will benefit from the meal are (with the exception of 2) all over 80 years age. We already provide them with soup, a hot roll and a pudding each week and a three-course meal once a month."

When asked about the benefits of providing meals, Celia said "Social interaction is so important, and it is a good incentive to get them physically out of their home for a few hours. Our priority is to avoid elderly people from feeling neglected and isolated. At the meals they often talk about local issues and personal problems as they have no one else to share things with. You only have to look at the smiles after the luncheon. One gentleman told me today that the only hot meal he had each week was when he was with us and he is so looking forward to spending Christmas day with us."

Healthwatch Staffordshire wanted to support this special luncheon so Engaging Communities Solutions CIC, who deliver our service, supported the initiative and provided funding, enough to make the difference, turning this meal into a celebratory occasion. Celia told us how well received the Christmas lunch had been and sent us a thank you card signed by many members of the community who had received a special Christmas lunch.







Digital Communication



Digital Highlights throughout 2021 – 22

We are committed to providing up to date, appropriate and helpful information via social media and our website.

We provide information and a signposting help online to help you make the right decisions about health and social care.

3475 Social media followers



1619 Tweets

2131 Facebook posts

59378 Website Users



60032 Users

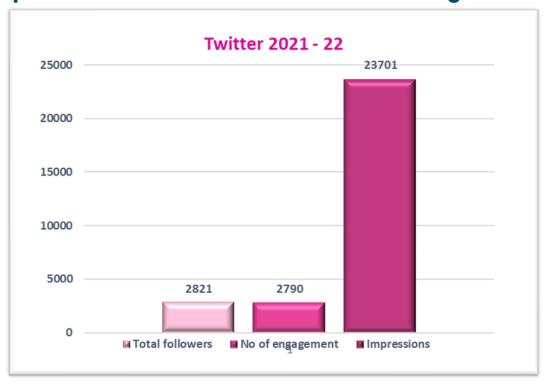
91401 Page Views

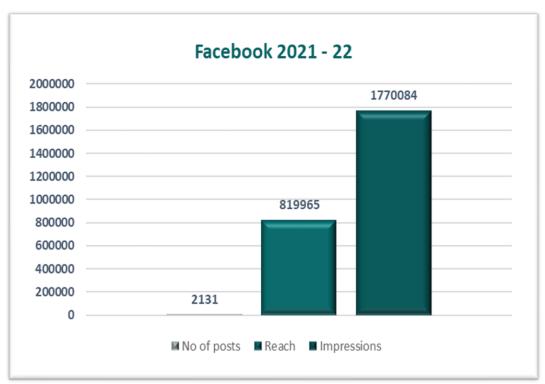
New and returning users



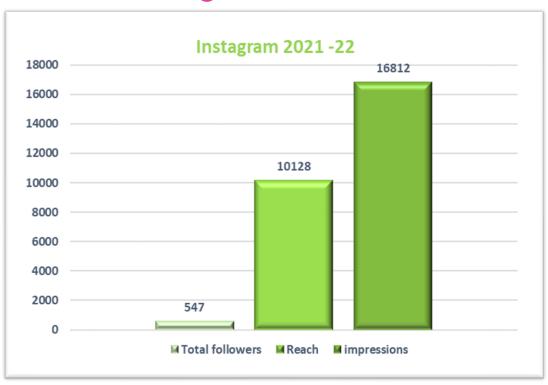
Social Media Figures

An overview of our 3 main social media platforms Twitter, Facebook and Instagram





Social Media figures cont.



The number of visitors who visited our website and browsed through the content.



Finance

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012

Income	
Funding received from local authority	£205,338
Balance from 2020-21	£11,169
Additional income	93
Total income	£216,507

Expenditure	
Staff costs	£154,167
Operational costs	£20,277
Support and administration	£36,658
Total expenditure	£211,101

Next steps

- The pandemic has shone a stark light on the impact of existing inequalities when using health and care services, highlighting the importance of championing the voices of those who all too often go unheard.
- Over the coming years, our goal is to help reduce these inequalities by making sure your voice is heard, and decision makers reduce the barriers you face, regardless of whether that's because of where you live, income or race.

Statutory statements

About us

Engaging Communities Solutions CIC is the organisation holding the Healthwatch Staffordshire contract for 2021 - 2022.

Blakenall Village Centre, 79 Thames Road, Blakenall, Walsall, WS3 1LZ

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



The way we work

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

Our Healthwatch board consisted of 4 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met and made decisions on matters such as agreeing our 2021/22 Work Programme Priorities and gained approval and feedback on the public reports.

We ensure wider public involvement in deciding our work priorities. The public helped shape our priorities by attending online Zoom sessions which were purposely designed to collect information about real-time local issues, and we also used our monthly intelligence reports to identify commonly reoccurring themes that were shared by the public.

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

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers.

This year we have done this by, for example, using a funding system to enable smaller grass roots community groups to undertake engagement work on our behalf through the Community Cash Fund. We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website under our reports section.

Responses to recommendations and requests

We had 0 providers who did not respond to requests for information or recommendations.

This year, due to the COVID-19 pandemic, we were unable to make use of our Enter and View powers due to national guidance and rules in force at various times.

Health and Wellbeing Board

Healthwatch Staffordshire is represented on the Staffordshire Health and Wellbeing Board by Simon Fogell, our Chief Executive. During 2020/21 our representative has effectively delivered the role on the Health and Wellbeing Board using the statutory seat to ensure the publics voice was heard.

2021-2022 Outcomes

Project / Activity Area	Changes made to services
Primary and Community Care Services	We collected 143 survey responses to explore how residents felt about the existing set of primary care services and what could be further added to improve the service range, whilst further learning about how accessible local primary care services are for people across the county.
Hospital Services	We collected 50 survey responses that collected residents' views on how cancelled or postponed appointments have impacted their physical and mental welfare. We also explored how effective the discharge processes have been for residents.
Mental Health Services	We collected 85 survey responses which individually reflected residents' views on what mental health services are needed in the county and how they can help people recover from the Coronavirus Pandemic coinciding impacts.
Returning to normal	People went through so much, had restrictions on their lives in addition to the challenges to our health and social care systems that no one was prepared for. We saw great community spirit, marveled at the ingenuity and resilience of front-line health and social care workers and those that support the delivery behind the scenes, not to mention Public Health, Local Government and an army of volunteers that have stepped up to the plate. But how did people feel about returning to normal? Over 500 people told us



Healthwatch Staffordshire

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The contract to provide the Healthwatch Staffordshire service during 2021 to 2022 was held by Engaging Communities Solutions C.I.C..

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