# eBulletin

June 2025

## Recent Announcement about Healthwatch

### A message from the Healthwatch Staffordshire Manager around the Future of Public Voice and the Importance of Independent Advocacy

In recent weeks following the publication of the NHS 10 year plan: Fit for the future (Easy Read version here) and Dr Penny Dash' review of Review of patient safety across the health and care landscape, it was announced that Healthwatch (Nationally and locally), along with 5 other functions, will be abolished.

Since 1974 there has been continuous parliamentary support for independent public voice initiatives being able to hold services to account. In 2012, the health and social care act saw the creation of Healthwatch services, who since then have served as independent champions for patients, carers, and communities - particularly those who are vulnerable or face barriers to accessing care.

We are 1 of 131 local Healthwatch services across England to have signed a powerful open letter to the Secretary of State for Health and Social Care, urging the government to reconsider proposals that would bring public voice functions under the control of local authorities and NHS bodies. The letter warns that the proposed changes would seriously compromise the independence that makes public feedback effective and trusted.

The letter draws on lessons from the Mid Staffordshire NHS Foundation Trust scandal, where failures in local scrutiny contributed to serious harm. It argues that dismantling independent advocacy would repeat past mistakes and weaken public accountability.

### What will be lost without local Healthwatch?

#### Our role as an independent critical friend.

We work constructively with local stakeholders, but always with the freedom to raise concerns without fear or favour.

#### Our trusted, impartial role.

People come to us because they lack trust, they fear repercussions sharing their feedback directly with those providing their care, they find provider feedback routes difficult to navigate, or because they have shared in the past and feel that they have not been heard.

### Our role amplifying the voices of people who face barriers to accessing support, and those at risk of health inequalities.

The new plan relies heavily on people feeding back to the services they use, but we speak to people experiencing health inequalities about the barriers to accessing those services too.

### Our independence, enabling us to share findings which are 100% person focussed.

Our research is based on what people with lived experience tell us, with no other taskmaster or agenda.

### Our work acting as a bridge across sectors.

People do not fit neatly into one box; they often experience and need services across multiple providers. We connect VCSE organisations, local authorities, health services, and communities to build a more integrated and inclusive system.

*At this time, we have limited information of what this change will look like, but we shall continue to support Staffordshire residents and our communities to make your health and social care feedback heard.*

*Please keep your eyes peeled over the coming weeks and months about the updates we will share.*

## Annual Report

At the end of June we published our latest Annual Report which details our work from April 2024 to March 2025. So, if you're not sure exactly what we do, this would be a good place to start.


It covers the publication of 16 reports which include three Deep Dive reports looking at the patient journey into and out of hospital and a separate look at barriers preventing men over the age of 55 from accessing health, social care, and activities.

The remaining reports are Enter and View reports conducted at local Care Homes (Residential and Nursing) as well as Maternity Services and Renal Units at local hospitals and Forensic Services at St George's Hospital in Stafford.

We hope you enjoy reading about our successes over the last financial year.

## Enter and View Visits

The start of June saw our second Enter & View visit to a pharmacy. This time Chris, Kelly and volunteer Kate went to look around Cornwell's Chemist at Beaconside. The report will follow in due course.

Reports were also released this month from Emma's previous visits to Radford House and Newport House - forensic mental health units at St George's Hospital in Stafford.

Emma was involved in a Quality Visit at Harplands Hospital, Ward 2 and followed this up with another visit where she spoke with 3 service users.

# Deep Dive Surveys

## Survey 1 - Diagnosis of Gynaecological Conditions


If you live in Staffordshire and have received a diagnosis for a gynaecological condition, please please take our survey so we can hear as many different experiences of the diagnostic process as we can.

## Survey 2 - Mental Health: Staying Well After Discharge


If you live in Staffordshire, are over 18 and have been discharged from NHS Mental Health Services in the last 2 years, then please take our latest survey to tell us about your ongoing mental wellbeing and what has helped or hindered you to stay well.

## Send us Your Feedback!

Remember you can always tell us about your other experiences of Health and Social Care through our General Feedback Form or email us directly at enquiries@healthwatchstaffordshire.co.uk

You can always find our ongoing and latest Healthwatch Staffordshire Surveys along with other local surveys on Health and Social Care on the Surveys page of our website.

# Volunteers

In June our volunteer Lynn Ashburner stepped down due to ill health and Cameron Harvey moved out of the area. We would like to thank them both for their help and wish them well, with a special mention for Lynn's assistance with last year's Deep Dives.

We welcomed volunteers Val Emery, Giri Rajaratnam, Rebecca Ugwueze, Kate Sheldon and Helena Tranter to the Civic Centre to participate in a volunteers' meeting. We met with the volunteers to update them on our work, tell them about the annual report, find out what areas of work they are interested in, and to get to know each other.

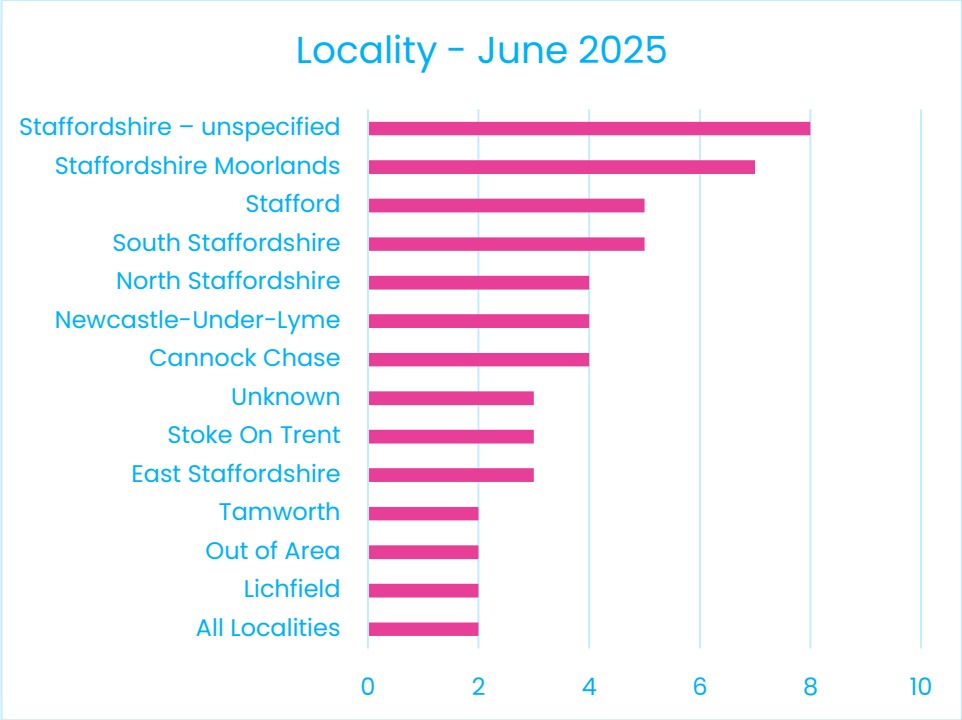
Both Angela Holmes and Helen Tranter assisted Jackie at engagement events. Angela attended the Tamworth Locality Forum at Dosthill and Helena helped at the Codsall event "Live Healthy, Live Happy".

Kate Sheldon helped Chris and Kelly at the Enter & View visit at Beaconside and Pearl Obiorah and Rebecca Ugwueze both contributed to the Women's Health Deep Dive. Giri Rajaratnam attended a training webinar on understanding Healthwatch as part of his induction process.

Thank you to all our volunteers for their invaluable contributions!

## June Feedback

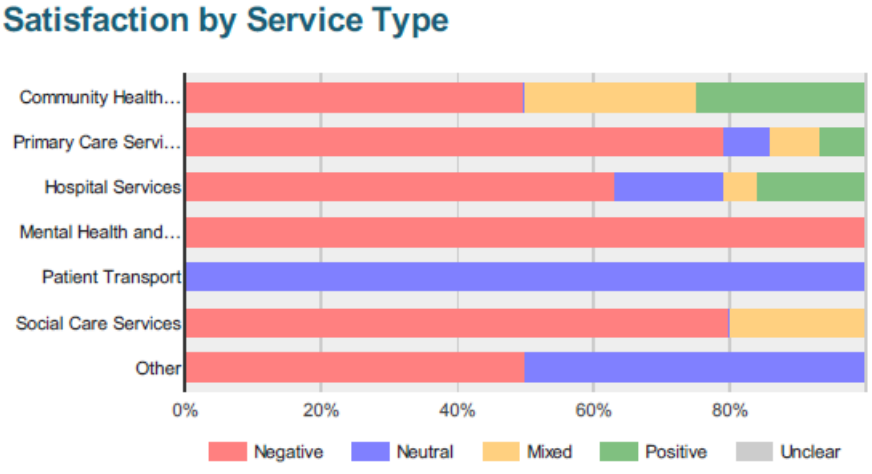
54 responses were collected from across the County as follows:




Please note that the feedback does NOT cover Enter & View Visits nor responses to Surveys.

### Service Categories

Primary Care had most responses (29) followed by Hospital Services (25). The next largest response was for Social Care Services (10). Remaining comments were about Community Health Services (4),



Mental Health and Learning Difficulties, Patient Transport and Other (all 2).

In **Primary Care** the responses were mainly about GP services (23) with 3 comments about dentistry. Under **Hospital Services** the responses mainly covered Outpatients (4), gynaecology (3) and hospital psychiatric care (3).

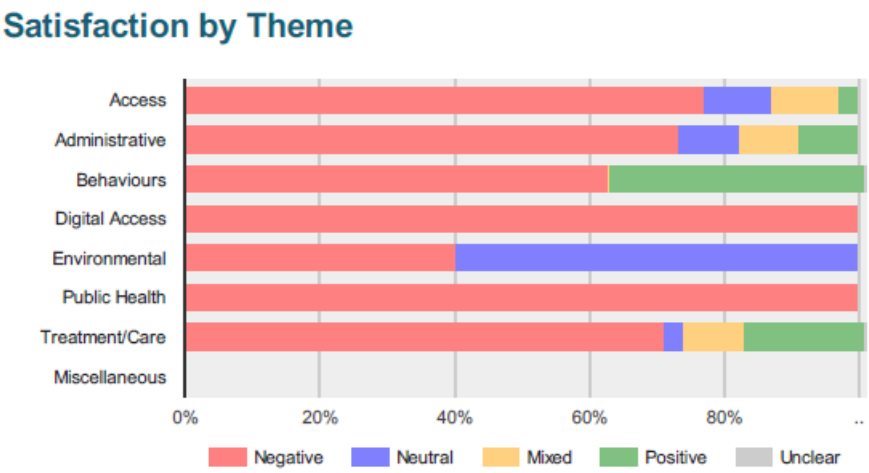
**Social Care Services** were widely split with care packages (2) the only one with multiple answers. **"Other"** mentions Housing and Sensory Issues.

## Themes

Various **Treatment and Care** themes were mentioned 76 times, and within this area, the topics mentioned most often were:

- Quality of treatment
- Waiting for appointments or treatment /waiting times
- Person-centred care
- Communication with patients, treatment and explanation/verbal advice
- Follow-on treatment and continuity of care
- Medication, prescriptions and dispensing

The responses under **Access** (30) were all about "Access to Services", under **Administration** (12) most comments (6) related to "Booking appointments" and under **Behaviours** (8) all were "Staff Attitudes and Performance".




## Positive Feedback in June

Breast screening at The County Hospital in Stafford:
*"I went for breast screening which was very professional by a female scanner. Very private environment and treated with dignity and respect."*

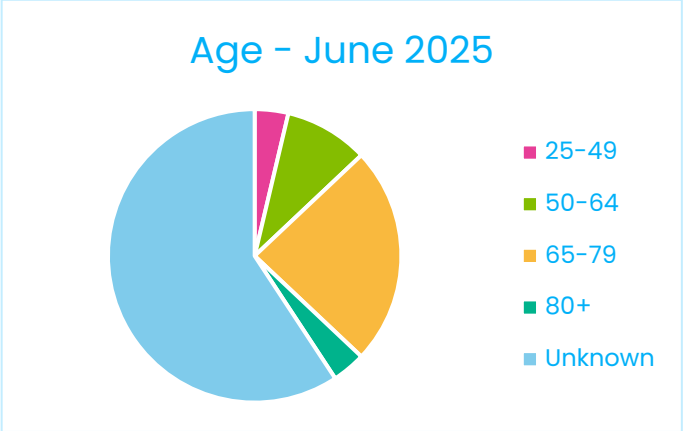
Maternity services from Royal Wolverhampton Trust
*"She particularly wanted to mention Dr Murty who acted so swiftly when she started haemorrhaging and kept an eye on her closely and the baby and came in in her own time to do an emergency C section. She was great and very caring."*

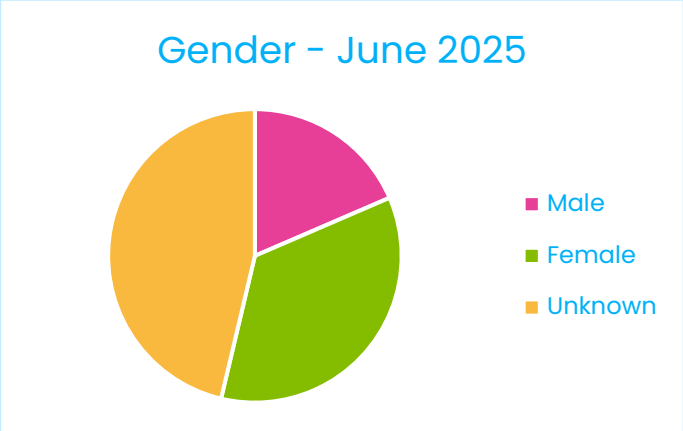
Emergency care at Russell's Hall Hospital after a suspected heart attack. After calling NHS 111 they then called an ambulance, which came in 15 to 20 minutes

and took him to A&E where *"he was immediately transferred to Cardiac centre and hooked up to a cardio machine and immediately diagnosed with a cardiac arrest. The following day he was referred for surgery which happened the following day and he was home 4 days later … the care was excellent, very efficient and caring"*

The GP practice at Alton Surgery Hurston Lane gave *"Excellent care. We could not have had better."* And at Gnosall Surgery *"No problem, message my GP easily and they ring back."*

## Demographics




We reached 1 carer. We spoke with at least 5 members of the LGBTIA+ community. Of those who specified an ethnicity, 17 were white British, 1 was mixed Asian/white and 1 was mixed multiple. We spoke to one veteran.

There were 8 people with a long-term condition and 8 who considered they had a disability. 2 people were deaf or hearing impaired, 2 had dementia (including Alzheimer's), 4 had Cardiovascular or other heart issues or stroke. Other conditions mentioned included cancer (5, 1 with skin cancer and 3 concerned about changes to the intervals between cervical screening checks), 4 people with mental health conditions, 3 around gender dysphoria, 2 with physical or mobility impairment, 2 with arthritis, 1 with learning disabilities, 1 with motor neurone disease, 1 with mastitis and 1 with cataracts. Other area discussed were dental treatment (4), antibiotics (1), earwax removal (1) and menopause medication (1).

# Engagement & Signposting

## Pride Month


We attended two Pride events in June. Emma and Kelly made an early start at Stoke Pride in Hanley and Emma attended the first ever Staffordshire Moorlands Pride event where she shared a stand with a Support Staffordshire colleague Deb Boden.

Several transgender people spoke to us about their experiences with gender dysphoria and being prescribed hormones.

Gender Dysphoria is diagnosed at a Gender Clinic where there are long waits for the first and subsequent appointments with the Clinic. We were told that the wait for a first appointment at a gender affirmation clinic can be 7 years for the London clinic and 2 years for Nottingham.


We were told that in the past GPs prescribed bridging hormones during the wait, but many are now refusing to do so and only prescribe hormones after a diagnosis, and not always at the correct level. For people who seek a private diagnosis or treatment (due to the NHS waiting times), their GP can refuse to provide 'shared care' which means the patient must continue to pay privately for hormone treatment and/or aftercare going forward.

Issues around hormones had already been reported to us by local support group SAGE and they told us that in the past sending GPs information on bridging hormones from TransActual had been a way to support GPs' confidence in this specialist area. However, they told us that GPs are now reluctant to prescribe even after receiving this information.

These issues reflects the national findings in the recently published Healthwatch England report 'What trans and non-binary people told us about GP care'.

Trans-Staffordshire are another local source of support for both trans people and SOFFA (Significant Others, Family, Friends, and Allies).

Project 93 is making a positive impact on the lives of LGBTQ+ individuals and those affected by HIV in Staffordshire. They offer vital support services, promote inclusivity, and build stronger communities.

## Lifeworks Visit

We had a visit from two staff members Louise and Aimee from Lifeworks Staffordshire which is currently becoming Lifeworks North Staffs.

According to their entry on Staffordshire Connects their mission is: *"to support marginalised people 14+ with an average or above IQ, with **Autism, ADHD, Dyspraxia, Tourette's Syndrome**, mostly with mental ill health and, their carers to find a sustainable lifestyle".*

They spoke to us about the services they offer which are tailored to the individual's needs and may include befriending, client social groups, carer support groups and life coaching (for a small hourly fee) around housing, work, referrals for diagnosis and misdiagnosis. They have 900+ clients with a waiting list of 40-50. They told us that there is now a social work team for the neurodiverse in Newcastle under Lyme and Staffordshire Moorlands. We also learnt that there is no adult diagnosis service for Tourette's syndrome.

We hear from the public that getting a diagnosis for autism spectrum disorder or ADHD is also subject to long waits and drives many patients to seek a private diagnosis. For those with ADHD who could benefit from medication, this can also lead to problems with 'shared care' and GPs refusing to prescribe ADHD medication on the NHS. This is a complex area which we need to understand better as there is also some NHS financial support for diagnosis and titration (getting on the right medication and dosage) through the Right to Choose scheme and NHS Approved (private) assessors. There is no medication for autism. There is no therapy under the NHS for autism or ADHD.

You can learn more about support for ADHD in the Healthwatch England Report Recognising ADHD: How to improve support for people who need it Or listen to this podcast Deep dive into Healthwatch's findings on ADHD with Paul Callaghan hosted by Henry Shelford from ADHD UK (more ADHD UK videos available here).

## Other Shared Care Issues

We have also heard issues with 'shared care' arrangements in other circumstances including the private diagnosis of early menopause and HRT prescriptions as well as a private CT scan which was not accepted by a GP.

## Support Staffordshire Locality Forums

Jackie attended the Southeast Locality Forum at Dosthill (Tamworth) with volunteer Angela; Emma visited the Staffordshire Moorlands Forum and Dave went to the Lichfield and East Staffordshire Forums, the latter forum was followed by a Volunteering fair.

## Other Engagement

Dave and Anna attended the **"Diabetes Patient Care – A New Dawn"** conference at Burton-On-Trent, organised by John Bridges of East Staffordshire and Surrounds Diabetes UK Patient Network. This event brought together patients, local healthcare professionals from hospital and community health services and the voluntary sector. Various presentations highlighted what good practice in Diabetes care and support looks like and the gaps that exist at present. Based on what had been discussed participants were asked to produce a list of suggestions on how local services could be improved.

Dave also conducted exit interviews at a screening event called **BEAT** organised by East Staffordshire Primary Care Network. With over 700 targeted patients booked on, the event focussed on risks of high blood pressure, heart failure and diabetes. A range of patient testing and health education was available with GP and Cardiology medical oversight. Patients were also supported to use the NHS App.

Jackie went to an **End-of-Life planning event** in Kinver. She heard about cross border issues with GPs.

Emma and Kelly attended the **SEND Community Lounge** which was very good, with SEND transport, SENDIASS, Royal Stoke Hospital, and Lifeworks all attending.

# Healthwatch England News

In June, Healthwatch England published a report : One year on: How is Pharmacy First working for patients?

Find out more about the Pharmacy First service where you can get advice on several common ailments at a local pharmacy, rather than needing a GP appointment.

Healthwatch England also produced a blog about accessible healthcare and information on the support available to carers.

# Social Media

Information posted about local services covered the end date for Spring Covid-19 vaccines; Open Clinic's Easy-Read Sexual Health Materials and a Volunteer

Recruitment Fair in Burton. We also promoted Festival of Practice – a learning event for professionals who work with adults, children and families – as well as the Safe Surgeries Toolkit for primary care clinicians helping asylum seekers and refugees.

We also shared surveys and research/focus group opportunities including Staffordshire and Stoke-on-Trent ICB's Mid-wide led birthing services consultation (ends on August 3rd); Volunteering for Health Surveys; Diabetic Eye Screening Programmes Survey (ends 30th September); research with Neurodivergent Women in Staffordshire and MPFT Championing Race Equality in Mental Health Services.

During Carers' week we promoted Staffordshire Together for Carers and in Men's Health Week we shared information about The Dadicated – A community of dads linking to Family Hubs, schools, services, community groups and organisations. We raised awareness of a MPFT initiative around #BoysNeedBins in Continence Awareness Week as well as how to book Cervical Screening.


# Get in touch

## Healthwatch Staffordshire

**Support Staffordshire, Civic Centre, Riverside, Stafford ST16 3AQ**

**0800 051 8371**

www.healthwatchstaffordshire.co.uk

enquiries@healthwatchstaffordshire.co.uk

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