healthwatch Sunderland



2014/2015



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Our Board



Note from the Chair

Welcome to the 2nd annual report of Healthwatch Sunderland. Our second year has been one of considerable growth and development and we now have a full team in place, a strong and effective Board and a growing group of active volunteers. We now have representation on all of the key Health and Social Care Boards in the city, notably the Health and Wellbeing Board; the Out of Hospital Board and the newly formed Primary Care Commissioning Group. Healthwatch Sunderland aims to give children, young people and adults across the city a powerful and significant voice on all of these Boards to ensure that you get the best from your local health and social care services.

Critically, Healthwatch Sunderland is independent from the services you use and it represents an opportunity for you to ensure health and social care services in your local area really meet your needs. So please get in touch and share your experiences.

As you will see in the following report, the Healthwatch Sunderland Team has made significant progress in achieving that goal. The stories and case studies illustrate some of this work however there is still much work to be done in order to build upon the successes of this year. Strengthening the role that the public, patients and carers have in shaping services will be an ongoing priority for Healthwatch Sunderland and in particular, seeking to ensure that the seldom heard, difficult to reach communities and groups are included.

The Healthwatch Sunderland team of staff, Board members and volunteers have all worked really hard over this year and I am very proud to be a part of this important and essential work.

Finally, a special thanks to the people of Sunderland who have shared their experiences so freely and poignantly. These stories drive our actions; without their voice, we could not do what we do.





About Healthwatch

At Healthwatch Sunderland, we aim to make health and social care better for the people of Sunderland. We believe that the best way to do this is by ensuring local services are designed around the needs and experiences of local people.

Everything we say and do is informed by local people and their experience.

As a statutory watchdog our role is to ensure that local health and social care services, and the local decision makers, put the experiences of people at the heart of their care.

Our vision

Our vision is for Healthwatch Sunderland to empower people and communities to improve health and social care services together.

Our strategic priorities

1. Engaging with people who use health and social care services

We gather information from people who use health and social care services in a number of ways; surveys, engagement events, and through our website. Through feedback from the residents of the local communities making up the Sunderland Healthwatch area, we identify trends and areas of concern, and share this feedback with the health and social care providers on a regular basis. Where there are significant issues or long-term problems we take action and put forward recommendations to the health and social care providers.

2. Providing information and signposting for those who use health and social care services

We have a dedicated Sunderland based Information and Signposting Service through our Freephone number **0800 023 8840**. This service offers information about local health and social care services including how to access them as well as signposting to sources of advocacy, information and support and complaints processes locally and nationally.

3. Influencing decision makers with evidence from local people

Central to our work is the need to influence services provided locally to suit the needs of the local population. This year we have produced several reports with recommendations to the providers of those services to directly influence change.

Engaging with people who use health and social care services

Understanding people's experiences

During the year we have given priority to listening to public feedback through a busy programme of public engagement activities.

Our engagement team, supported by our volunteers, have visited **59 community venues**, carried out **26 acts of consultation** and attended **6 health events**. We now have regular stalls at Sunderland City Library and Sunderland Royal Hospital, and we'd love to see you there to tell us about your experiences.

In addition, Sunderland residents have let us know what they think through **153 Health** and Social Care questionnaires - these questionnaires capture people's lived experience of using local services.

The increased intelligence we gather from the public at these events and surveys, helps us to ensure all our work is undertaken with the people of Sunderland at the heart of our endeavours.

Here's a couple of the projects we've been involved in over the last year to support communities in Sunderland:

- Small Sparks encourages and supports community groups in engaging with their members to share their experience of health and social care services. We provide up to £500 and our staff expertise to support these small scale engagement events
- We worked with groups that have specific needs within the Sunderland communities. In particular, we have supported an engagement event with The Regional Refugee Forum to understand the experience of refugees and how services might more effectively engage with that particular set of people.

To ensure the views from local people are listened to, we hold regular meetings with Sunderland Clinical Commissioning Group and Sunderland Royal Hospital to enable us to directly feedback your grass roots concerns in an effective and timely manner.

We highlight some of our specific engagement work to demonstrate how we put our research, public feedback, and statutory influence into effect for the benefit of the communities of Sunderland.

Case Study 1: Engaging with people with a learning disability

Healthwatch Sunderland has a duty to engage with the most vulnerable members of society in a way that can make a difference. That is why we were particularly excited when we came across the Health Charter for people with a learning disability. The Health Charter sets out clearly and in detail how people with a learning disability should be supported within residential settings to have the best support possible. It covers a whole range of issues from supporting people around the Health and Wellbeing agenda, supporting people to develop health plans and communication passports that they can take to hospital, promoting participation in national health screening programmes and Annual Health Checks, and so much more besides.

Central to the whole charter is a self-assessment tool designed to support providers to make sure that the actions in the charter are implemented. Healthwatch Sunderland believe that with the support of local commissioners the Health Charter has the potential to make a real difference.

We developed this work jointly with Sunderland People First who are an advocacy group for people with a learning disability. Together we determined a strong local need for the Health Charter by:

- Consulting with people with a learning disability
- Visiting a local neighbouring council to see how the charter has been successfully implemented and built into the local commissioning process
- Reviewing both local and national reports and trends to provide an evidence base for the charter
- Holding a series of events to discuss the charter with managers from provider services, Sunderland Commissioners, family carers and other key stake-holders to look at how we can implement the Charter across all providers in Sunderland.

This engagement work gives us an excellent knowledge base from which to influence decision makers and have the Health Charter up and running in the coming months.

Case Study 2: Engaging with older persons

Healthwatch Sunderland recognises the excellent work undertaken by many organisations representing elderly people and their carer's in Sunderland. During the year we have spoken to many community groups representing elderly people, including people with dementia, and it is important to us that we add something extra to the excellent work already underway.

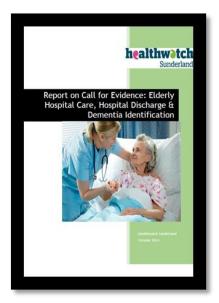
In response to feedback we received from the public, we visited Sunderland Royal Hospital to discuss the 'Red Tray' scheme. The 'Red Tray' scheme is a means by which patients needing that little bit of extra support are given food on a red tray that flags up the need for extra vigilance and attention from staff.

Some public feedback suggested that the 'Red Tray' scheme was not always implemented as well as it might be. We found the hospital very responsive when we visited with this feedback, and staff committed to reviewing the adherence to their 'Red Tray' scheme on appropriate wards.

Our chair, staff and volunteers have also taken part in ward inspections around the provision of food in both the Sunderland Royal Hospital, and the Sunderland Eye Infirmary and found the experience to be very positive, with good reports generally on the quality of the food.

Local feedback also highlighted several quality of care issues around the hospital. We met with senior staff to determine if we could ensure a positive outcome around these issues, some of which appeared to be caused by a breakdown in communication.

We now have an agreement with Sunderland Royal Hospital that any information we receive about a quality of care issue will be passed on to the Matron of the ward involved and Healthwatch Sunderland staff will visit the hospital immediately to discuss. In this way



we believe issues are more likely to be resolved quickly for the benefit of patients.

Our Hospital Discharge Report indicated that there was a recognition by those involved in the study - including dementia patients, carers and families from the Sunderland communities - that overall services for people with dementia were improving. Our meetings with service providers responsible for dementia patients, including the Local Authority and Sunderland Clinical Commissioning Groups, demonstrate the priority that is being given to improving these services further. For example, work is on-going to address post diagnosis support with a wide programme of dementia training for all GP Practice staff.

Sunderland Clinical Commissioning Group have also taken into account issues raised in our report at their Governing Body meeting (January 2015) and are to 'keep under

review the perceived gap in primary care identified by Sunderland Healthwatch Call for Evidence Report as the roll out of Dementia training happens in Practices and Integrated Locality Teams become live in each locality'.

Enter & View

Another success story for us this year has been to establish our Enter and View teams. By January 2015 we had recruited and fully trained 6 Enter and View Volunteers whose range of skills and life experiences is vast.

Enter & View authorised representatives

We are proud to announce our Enter and View team of volunteers:

Gill Charman, Liz Highmore, Helmut Izaks, Janet King, Gwen Young, Rabia Tilt.

We are very excited about what the unique experiences of our volunteers can bring to helping us to raise the standards of services in Sunderland. As part of establishing Enter and View we thank our partners for their support in developing our programme of visits: City Hospitals Sunderland, Sunderland City Council, Care Quality Commission, and Sunderland Clinical Commissioning Group.

With their support, we have developed an understanding of how the unique perspective of Enter and View volunteers can be used to add value to the existing inspection regimes of the statutory services. Our approach is to make Enter and View a positive, complementary tool that will support providers with ideas around sharing good practice, ultimately improving the experience of the quality of care for thousands of Sunderland residents.

Case study: Deerness Medical Centre



Following several positive comments from our surveys, we carried out an Enter and View at Deerness Medical Centre, to help us understand if there was any good practice to be shared around the high level of service their patients received. We were particularly interested in how effective the Patient Participation Group was and what lessons this might provide for other surgeries throughout Sunderland.

Deerness Medical Centre received a lot of positive support from their patients, the full report is available on the Healthwatch Sunderland website.

We recommended in our report that other GP Practices in Sunderland might be interested in the methods Deerness Park uses to actively engage with patients.

The next steps

Healthwatch Sunderland have shared the Deerness Park Enter & View report widely with key stakeholders as well as key partners and organisations including other Sunderland GP Practices, Sunderland Clinical Commissioning Group, NHS England, the Care Quality Commission and the newly formed Primary Care Commissioning Committee.

We are currently seeking feedback from other GP Practices in Sunderland to understand their mechanisms for public involvement and engagement - and are looking at a project to see how we can support GP Patient Participation Groups during the coming year.

Providing information and signposting for people who use health and social care services

Helping people get what they need from local health and social care services

We have a dedicated Sunderland based Information and Signposting Service through our telephone Freephone number **0800 023 8840**. This service offers the following:

- Information about local health and social care services including how to access them
- Signposting to sources of advocacy, information and support
- Signposting to complaints processes locally and nationally.

During the year, the Information and Signposting Service had **103 calls** from members of the public. These have been of a varied nature and include the following examples:

- Service user diagnosed with Type 1 diabetes wanted to know services and support available
- Information wanted on community befriending services for dementia
- Information on access and waiting times for mental health services
- What exists around specialist medical home care support and how to access this
- How to complain about the hospital and GP
- How to access disability equipment and support
- How to re-register with GP following Practice closure
- How to access personal health budgets.

"This information is really helpful and the sources are really useful. I will definitely be using this".

Member of the Public, Evaluation Survey (Information & Signposting Service).

Case Study: Providing Information

A member of the public contacted Healthwatch Sunderland's Information & Signposting Service in November 2014 regarding registering with a GP and voluntary sector support services for veterans in Sunderland.

Our Research & Information Adviser provided information and useful contacts on how to register with a GP and explained the process if there were any difficulties in registering,



and on veteran's services available in Sunderland - including Sunderland Armed Forces Network.

The service user responded via e-mail to say "This information is really helpful and the sources are really useful. I will definitely be using this".

Case Study: Signposting to Services

A service user contacted us and asked for information on personal health budgets and how to access them.

We spoke to both Sunderland Clinical Commissioning Group and Sunderland Council and found that personal health budgets are being delivered in the same way as direct payments for social care. The first point of access is through a person's social worker and in the first instance eligibility is for people receiving NHS continuing care.

This information was passed onto the service user who contacted us later to say "thanks for taking the time to find me the information. I appreciate this."

Information & Signposting Service User Feedback

We are proud to report that **100% of service users** who responded to our evaluation survey have **found the service useful** and would recommend it to others.





Influencing decision makers with evidence from local people

Producing reports and recommendations to effect change

Central to our work is the need to influence services by producing reports with recommendations that directly influence change. This year we have produced the following reports, full details of which are available in this report:

- Wearside GP Practice closure. We made recommendations to improve the public consultation practice around proposed changes to GP Practices. NHS England and Sunderland Clinical Commissioning Group took on board our findings and committed to build a revised process into further service changes. We now have a seat on the Board where service changes are discussed and agreed
- Report on Call for Evidence: Elderly Hospital Care, Hospital Discharge and Dementia Identification. We made recommendations to improve dementia identification and ongoing care in the primary care setting. Sunderland Clinical Commissioning Group are keeping our feedback under review as they roll out dementia training
- Enter and View Report: Deerness Park GP Practice. We made recommendations to share good practice around the active involvement of Patient Participation Groups, and the benefits of using a variety of mechanisms to engage with patients. We have received a positive response from the Sunderland Clinical Commissioning Group and the newly formed Primary Care Commissioning Committee. We are undertaking further work to understand and improve the impact of Patient Participation Groups in the coming year
- **Refugee Report: the health experiences of Sunderland Refugees**. This report was the result of the first significant Healthwatch Sunderland engagement with this section of the community and highlighted a number of issues raised by the refugees who attended. The main recommendation of the report is that further engagement with refugees and representatives from health and social care providers takes place to ensure more meaningful dialogue around service access and provision this is on our work plan for next year to follow up.

We have also written two 'plain English' versions of consultation documents as a way of helping those members of the public, who may not be familiar with the complexity of Health and Social care language:

- Healthwatch Sunderland summary version of the Sunderland Pharmaceutical Needs Assessment
- Sunderland Health and Care System Strategic Plan 2014 2019.



Putting local people at the heart of improving services

Healthwatch Sunderland always listens to the voice of the local population, and where there are clear trends, we can add areas of concern to our work plan to take action on your behalf. We're committed to being recognised as the leading consumer champion of health and social care services across Sunderland.

Our helpline enables us to monitor concerns and complaints and to provide the public with information and signposting about services. Through our ability to rapidly analyse helpline data, as well as data from our general consultation, we can identify any emerging trends and provide an early response where there are areas for concern.

One of the ways we do this is through our **"You asked, They said"** initiative, whereby areas of concern expressed by more than one person are flagged up. We then ask questions based on concerns to providers and commissioners and ask for a response which we publish in our E-News and on our website.

We are working closely with the voluntary sector to establish HealthNet, a forum where community views are gathered around health issues. Healthwatch Sunderland intends to be the mechanism by which community views shared at HealthNet meetings are taken forward.

Working with others to improve local services

Partnership working is the key to the work we undertake; sharing work and ideas and also acting as a critical friend.

Members of the Healthwatch Sunderland Board represent us at meetings that influence the strategic aims within Sunderland, for example, by being part of the Health and Wellbeing Board and the Safeguarding Adults Board. Our Chair will also hold regular meetings with Senior Officers from the Council, Clinical Commissioning Group and Hospitals to discuss issues that Healthwatch Sunderland has identified.

At an operational level we work closely with the Care Quality Commission (CQC), sharing our monthly data trends and any direct data on specific services. For example we recently shared information on community based NHS services in Sunderland to help inform the CQC inspection of the South Tyneside Trust.

We have good working relationships with Sunderland Council, sharing our community data regularly, especially around services the Council commissions and inspects. Through this partnership, we will be conducting reviews at care homes next year based around themes, such as the quality of social activities in care homes. We also regularly support requests to help with consultation. Examples include reviewing the Sunderland Safeguarding Strategy the Pharmaceutical Needs Assessment consultation, where we helped by writing a plain English version.

Our regular meetings with the hospital have established an effective and collaborative relationship. For example we have several Healthwatch members who have agreed to join Patient-Led Assessments of the Care Environment (PLACE) inspections. These inspections look into areas such as cleanliness, quality of food and accessibility issues. We also attend the hospital's monthly Patient, Carer and Public Experience Committee which reports on patient concerns and outcomes, ensuring the patient voice is heard.



Impact Stories

Case Study 1:

Relative with disabilities experiencing difficulties with hospital care

Healthwatch Sunderland was contacted via our sign-posting service by a family concerned about the experience their disabled son had during a visit to the hospital. The main concerns were around:

- A confusion over the physical needs of the patient which meant many hours waiting for an invasive procedure in a physically uncomfortable environment. This could have been remedied by a more thought out appointment time
- A frustration from the family over having to share the same information on numerous occasions with many different staff
- Weighing facilities and a hoist that could accommodate the patients very specific physical needs.

Whilst Healthwatch Sunderland does not advocate on behalf of an individual sometimes a person's experience may have implications for a wider group of people offering 'lessons learned'. As the family did not wish to make a complaint Healthwatch Sunderland decided to arrange a meeting with the hospital to discuss if the case had wider implications. The hospital carried out a full internal investigation around the case and had a further meeting with the family and Healthwatch Sunderland. The following was agreed:

- Often there is a reason for health professionals having to ask the same questions as it does ensure a higher level of safety around an individual's care
- The hospital will ensure that health professionals are reminded about the importance of reasonable adjustments and that the hospital has experts who can be contacted for advice if needed
- The hospital will review how it flags up the needs of people who require reasonable adjustments on the computer systems to see if any amendments are needed
- The hospital will investigate the possibility of an alternate hoist for people whose bodies are particularly vulnerable in standard hoists
- The hospital agreed that the experience of the family concerned can be used in future staff training.

From the Healthwatch Sunderland perspective the case illustrated how one story can make a difference and that a well-documented and thought out approach received a very positive response from the hospital. We would like to thank those involved in this lessons learned case, especially the family concerned.



Case Study 2: Wearside GP Practice Closure

NHS England informed Healthwatch Sunderland that in July 2014 the Wearside GP Practice was under consideration for closure. Healthwatch Sunderland agreed to support the GP Practice service users through the consultation period by supporting one to one sessions and attending consultation days.

It soon became clear to Healthwatch Sunderland that there were serious issues around the quality of consultation being carried out:

- Stakeholders were not provided with sufficient information upon which to make an informed choice regarding the closure
- Patients were not provided with adequate consultation opportunities
- Communication of the closure and subsequent support was poor, and did not consider the differing needs of such a large patient group.

Healthwatch Sunderland produced a report evidencing our concerns. We made several clear recommendations:

- Ensure that NHS policies and procedures around consultation are followed
- Ensure that findings are shared with stakeholders to enable informed decision making •
- Ensure greater transparency around whether or not any proposed change is eligible to • be assessed by the Sunderland Council's scrutiny function
- Ensure consultation is fully inclusive, taking into account ways to present information in a meaningful way, engaging with all in a fully inclusive way so that no section of the community is left out or disadvantaged by the method of consulting.

Essential to Healthwatch Sunderland is to work in partnership to ensure that any proposal for a GP closure in the future learns the lessons of the Wearside Practice experience. We are pleased to say that we now have an agreement that all policies and procedures will be followed and consultation will be undertaken in a meaningful, truly inclusive manner.

We have been invited to have a seat on the Board that discusses and agrees these important service changes, and have accepted a position on that Board to enable us to influence any proposed future service changes.





Our plans for 2015

Developing our work plan for the coming year

Our work plan is a living and evolving document; priorities may change due to circumstances such as the national agenda, local issues, and grass-roots feedback. We will always do our best to ensure our work plan responds effectively to what the people of Sunderland are telling us.

Youth work

We are really keen to develop our work with young people. Some ideas we are progressing include:

- Promoting engagement with young people's community projects in some of Sunderland's most deprived areas
- Commissioning work from the Youth Inspectors and Groundwork North East & Cumbria to ensure the voice of young people around health issues is captured.

Reaching out to the seldom heard

We will take forward the actions highlighted in our Refugee Report, in particular understanding how the mental health and wellbeing of refugees is supported, and continue to promote the rights of people with a learning disability.

Supporting effective engagement

There is a real feeling that people want engagement and consultation to be ever more effective, and that to do this effectively in times of limited resources, working together, sharing ideas, expertise and networks is vital.

One area we are particularly keen to develop with Voluntary Community Action Sunderland (VCAS) is an effective Sunderland HealthNet. HealthNets are such a simple idea; the wider community develops and runs its own network devoted to health and social care issues. The agenda, issues and information sharing is completely determined by the community and statutory organisations only attend a HealthNet when invited from the membership.

Promoting Enter and View

We believe that Enter and View can add something unique - the ability to bring in the perspective of the lay person in order to make sure people are truly listened to.

Our primary approach is to identity themes from our grass-roots engagement. By taking one issue, looking at it in depth across several services, we will be able to build up a richer picture of people's experiences. Our first themed work will be looking into the quality of social activities provided for our older population living in care homes.

Our governance and decisionmaking

Our Board

Healthwatch Sunderland has an independent Board, which meets bi-monthly. The Board currently consists of 9 non-executive Board members including the chair of the Board, Kevin Morris. The Board has approved the Healthwatch Sunderland Work Plan and ensures that the organisation meets its strategic aims and objectives through regular operational reporting. The Board ensure that Healthwatch Sunderland is designed and developed to be an independent organisation, which can effectively and efficiently deliver its functions and continue to develop in line with strategic requirements and our aims, ambition and aspirations in Sunderland.

All Board Members bring a wealth of experience: Kevin Morris (Chairperson), Helen Clay, Deborah Spraggon, David Tate, Jodie Williams, Chris Rowell, Anne Charnock, Kim Hunter, Lindsay Gibbins.

For further information on our Board Members please visit our website.

How we involve lay people and volunteers

Healthwatch Sunderland has a team of 7 Volunteers who bring a wealth of experience and skills. This year two of our volunteers have supported us with Enter & View Visits, another volunteer has joined The Out of Hospital Board, we have volunteers taking part in hospital PLACE inspections, volunteers who sit on the decision making panel of Small Sparks and volunteers regularly support us at community events including our regular stall in the City Library and Sunderland Royal Hospital.

Healthwatch Sunderland recognises the contribution our volunteers make and that they are a part of our team. We hold bimonthly development sessions for all of our volunteers where they can have the opportunity to truly influence the direction of Healthwatch Sunderland.

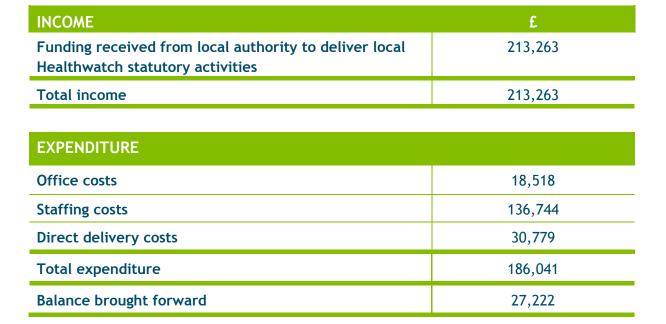
Our volunteers are; Gill Charman, Liz Highmore, Helmut Izaks, Janet King, Kath Mullen, Gwen Young, Rabia Tilt







Financial information



Contact us



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We will be making this annual report publicly available by 30th June 2015 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.

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