

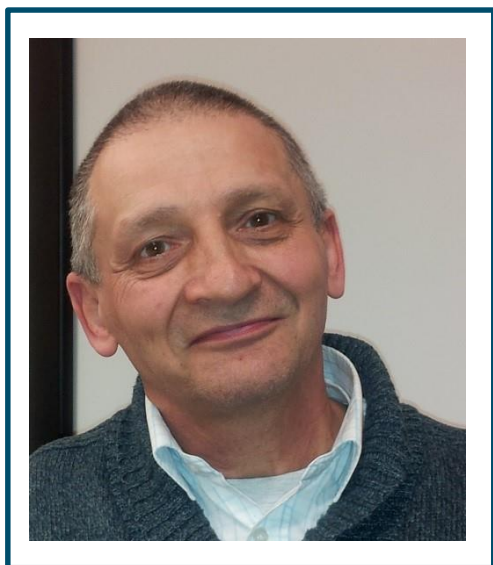


Healthwatch Walsall Annual Report 2015/16

Contents

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|---|----|
| Contents | 3 |
| Message from our Chair | 4 |
| Message from our Chief Officer | 6 |
| The year at a glance | 7 |
| Who we are..... | 8 |
| Listening to people who use health and care services..... | 10 |
| Giving people advice and information | 16 |
| How we have made a difference | 19 |
| Our work in focus | 23 |
| Our work in focus: Mental Health..... | 24 |
| Our work in focus: Supporting the Care Quality Commission | 25 |
| Our plans for next year | 27 |
| Our people..... | 30 |
| Our finances..... | 32 |
| Contact us | 34 |

Message from our Chair



Peter S Browne - Acting Chair

This has been a year of challenge and change for Healthwatch Walsall which has really tested our capacity to stay focussed on the key priority of listening to people and ensuring their views are reflected to commissioners and providers so that services can better meet local needs.

Our leadership has changed with our inaugural Chairs, Richard Przybylko and Rupy Pandaal deciding to step down this year and handing the mantle over, first to myself and then to Trevor Walden.

Trevor has sadly been dogged by ill health and so I was appointed as Acting Chair last month. This introduction recognises the valued contribution made by all four of our Chairs over the past 12 months in steering the company through difficult and challenging times.

Alongside these changes came internal governance challenges which drew overly intense scrutiny from the Council. Our Board commissioned an external review of the issues raised to allow our volunteer led company to meet the challenge and move forward with confirmed robust governance and financial procedures.

Our focus throughout has nevertheless not been diverted from the main priority for Healthwatch which is listening to the voices of people about their experiences of healthcare in Walsall.

Our extensive engagement and survey work in 2014-15 laid the foundations for key pieces of work in 2015-16 focusing on both primary and acute services in the healthcare sector.

Our new staff team have worked tirelessly to support our volunteers in the analysis and review of key work streams looking into **Hospital Discharge, Obesity, GP Satisfaction and Accident & Emergency services.**

We have presented our findings on the Hospital Discharge enquiry to the Local Authority, Walsall CCG and Walsall Healthcare with recommendations for improved communications and collaborative

working between all 3 organisations in order to mitigate the problems found. We welcome the invitation to revisit this area of public concern in the near future to see if things have indeed improved.

Our remaining workstreams are due to present interim and final reports at our Celebration event on 23rd June 2016.

We supported planned major inspections carried out by the Care Quality Commission (CQC) into services provided by Walsall Healthcare NHS Trust and Dudley & Walsall Mental Health Trust.

We arranged extensive listening exercises all around the Borough to allow as wide a cross section of people as possible to have the opportunity of having their voice heard.

For both inspections we submitted detailed reports highlighting peoples experience of these services, both good and bad which helped to identify key lines of enquiry for CQC.

Our work was so well received by CQC that they commended us for the helpful contribution it made to their inspections.

This was also being done at the same time as our engagement team were out and about in all those places that you least expected them, to gather your views on the delivery and outcomes of health and social care in Walsall, and to bring about change.

Regrettably we were not successful in securing the further contract to deliver Healthwatch in Walsall, which the Council awarded to Engaging Communities Staffordshire.

We are though working closely with them so that they can move forward seamlessly to represent the voices of Walsall, with most of our staff team transferring to the new company.

We wish them well in ensuring the voices of Walsall continue to be heard loudly and clearly by commissioners and providers of healthcare in Walsall.

Peter S Browne

Acting Chair Healthwatch Walsall.

Message from our Chief Officer



It only seems a short while ago that last year's Annual Report was being put together. No doubt it will be equally hard to pull out some of our achievements from the many different pieces of work we have undertaken this year thanks again to the dedication of our volunteers and staff.

During the year we have promoted various national awareness weeks both in print and using social media.

"You look back and think wow we really have achieved a lot again this year"

There seem to have been a plethora of CQC and Monitor inspections and investigations of mental health services and hospital services provided within the borough of Walsall during the year.

For each one we have undertaken listening events and widely distributed

supporting questionnaires. We have then written a report for each one and submitted it to the relevant organisation.

"We've now got an incredible 139 organisations and contacts within Walsall"

Healthwatch Walsall also developed a new website during this year that had greater functionality and access tools.

We've been focusing on growing our network of organisations that we work closely with.

We did have reason to look at ourselves during the year and found that our governance was adjudged to be fit for purpose. This allowed everyone to move forwards collectively.

We've undertaken many pieces of focussed work looking at GP Performance and communications in Accident and Emergency Department at the Manor Hospital. As well as publishing reports on hospital discharge and obesity within Walsall.

All in all a busy year - Simon Fogell, CO.

The year at a glance

This year we've reached 516 people on social media



Our volunteers help us with everything from engaging with the public to office admin



We've spent over 1,000 hours on GP performance - one of our top priorities this year



We've visited over 200 local services around the borough



Our reports have tackled issues ranging from mental health to hospital discharge



We've met hundreds of local people at our community events



Who we are

We exist to make health and care services work for the people who use them.

Everything we say and do is informed by our connections to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.

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

Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their work.

We believe that asking people more about their experiences can identify issues that, if addressed, will make services better.

Our vision

Healthwatch Walsall was commissioned to create a locally based Healthwatch for the benefit of Walsall citizens that was user led. In order to be accountable and responsive Healthwatch is committed to:

- ensuring Walsall people are setting its strategy, direction and influencing the quality of health & social care
- becoming a recognised and respected member led consumer

champion that is trusted by stakeholder's providers and commissioners alike

- contributing to shaping local health and care strategy through the JSNA and Health and Wellbeing strategy
- improving the quality of health and care services by forming effective influential partnerships and collaborative relationships with all stakeholders
- supporting individuals to make informed choices by helping them to access information and advice
- Becoming an effective advocate and recognised as the health and care champion for the community and individuals.

Our priorities

We developed the following strategic priorities for Healthwatch Walsall to help deliver the vision:

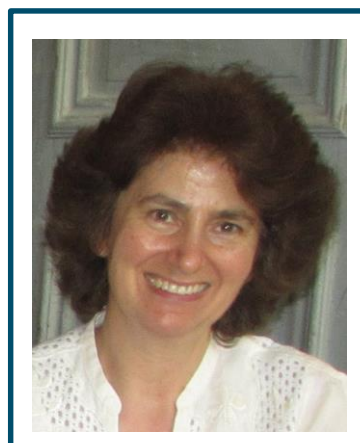
- Enable people to make informed choices about services
- Share people's views and experiences with Healthwatch England to help it carry out its role as national champion
- Recommending investigation or special review of services via Healthwatch England or direct to the CQC

- The involvement of people in the commissioning and provision of local services
- Gathering views and understanding experiences of patients and the public
- Making people's views known
- Provide access to the NHS Complaints Advocacy Service
- Legacy work
- Robust finance and governance
- Promotion of Healthwatch Walsall to the public and stakeholders
- Develop collaborative working and partnerships.

Our Healthwatch Team



Coral Lemm -
Engagement and
Membership Manager



Ann Geadah -
Operations Manager



Simon Fogell -
Chief Officer



Melissa Holt -
Finance and
Administration Officer



Elizabeth Browne -
Engagement and
Membership Assistant

Listening to people who use health and care services



Gathering experiences and understanding people's needs

During 2015 to 2016 Healthwatch Walsall has organised and attended many events that have provided a platform to collect local people's experiences of health and care services, in particular focussing on:

- Services at the Manor Hospital
- Communication at A&E in the Manor Hospital
- Community services provided by the Walsall Healthcare NHS Trust
- Services provided by the Black Country Partnership NHS Foundation Trust
- Services at all GP practices in Walsall
- Services provided by the Dudley and Walsall Mental Health Partnership NHS Trust.

We particularly wanted to engage with diverse groups and communities especially that may be considered disadvantaged, seldom heard or vulnerable.

In order to meet this objective as part of the listening work to support our focus on services provided by the Dudley and Walsall Mental Health Partnership NHS Trust we worked with:

- the YMCA at The Glebe (homeless and Rough Sleepers)
- with Walsall Housing Group
- St Martins Church (Isolation and Loneliness project)
- Mind Matters
- Dementia Café's (Pathways4Life, Age UK, Walsall Council and the Accord Group)

- ESOL and Mental Health Groups Mendit Green Lane Church
- Walsall Probation Service
- The Beacon
- Al SUFFA - UMO Building and Midland Road Church (Free Hot Meals - Monday and Thursday Evenings)
- Blakenhall Youth Group
- SSAFA (the Armed Forces charity).

For the CQC inspection of the Walsall Healthcare NHS Trust (Manor Hospital) Healthwatch Walsall promoted the two listening events that the CQC organised to hear from people their experiences of services.

We requested that the CQC lay on further events to cover the whole borough. Unfortunately CQC were unable to accommodate our request.

Healthwatch Walsall therefore organised eight additional events to compliment those of CQC in order to gather people's views in all six partnership areas.

We also made contact with a wide range of voluntary groups representing some of the diverse communities in Walsall so that as many people's voice as possible was heard by the CQC:

- Walsall Voluntary Action
- Innovate
- Mencap
- Midland Mencap
- British Muslim Youth Group
- Walsall SUE (Service User Empowerment)
- Sure Start Palfrey

- Walsall Blind Association
- Walsall Disability Forum
- Bloxwich Community Partnership
- Collingwood Autism Support Group.

Satisfaction with GP Services

The GP Workstream devised a survey which was more focussed on patient experiences and outcomes of seeing their GP.

The survey was conducted during February and March 2016. Surveys were sent to practices for completion by patients - in some practices the survey process was supported by the local Patient Representative Group (PRG/PPG) and by practice staff.

In others, at the request of the practice, HWW attended the practice to support the process. In addition the survey was put on the HWW website for download and completion by members of the public.

There were wide variations in the number of questionnaires received from practices. The highest number of responses was from practices with active support of the Patient Participation Group/Patient Representative Group, the Practice Manager and the HWW engagement team.

Some practices did not support the request and are not included in the analysis.

The initial findings reflect the views of almost 1000 members of the public whose questionnaires were received by mid May 2016.

Accident and Emergency Services

A survey was developed which asked people to reflect on the whole experience of A&E.

The workstream group drew on information from the Care Quality Commission (CQC) patient survey on Walsall's Accident and Emergency service in 2014 which showed that the Trust (WHNHST) achieved a worse score than other Trusts on Care and Treatment.

The workstream group shifted its initial focus from waiting times, staffing and structural deficiencies that were all picked up by CQC inspection though they had been picked up by HWW in part of its borough wide survey as major issues to the softer issues of communications, patient welfare, respect and dignity.

The survey was carried out during May 2016 over a two week period - sessions were organised to cover different times and days.

The questionnaire was given out in the waiting area (with a reply paid envelope as needed), on the website and sent to a range of voluntary groups and organisations for their recent experiences of attending A&E at the Walsall Manor Hospital.

In practice the throughput from the A&E waiting area was not as great as had been anticipated (many people attended by ambulance and did not pass through the waiting area) and consequently fewer people than expected completed the survey. Around 80 completed surveys were received and analysed.

What we've learnt from visiting services

Walsall Healthcare NHS Trust (Manor Hospital)

The listening we undertook with people about services at the Manor Hospital showed us that Three quarters of respondents reported excellent or good levels of service. However, around 13% experienced a service that was not good or poor.

However, significant issues were raised about poor practice. Communication was an issue in several cases e.g. communication between staff and between departments and communication to the patient. Waiting times were of concern to some patients and instances were given of the effect that long waiting times had had on the patient.

Several cases reflected poor treatment, including a lack of compassion and concern. One patient who had a particularly distressing story cited her reasons for reporting the matter as wishing to make things better for other people but felt unable at this point to make a complaint.

Some organisational issues were raised e.g. a shortage of nurses, loss of test results, problems with the appointments system, infection management, cultural issues and poor toilet facilities.

This feedback along with intelligence collected via our Service Watch questionnaire focussed attention on A&E in particular that then led onto our focussed work on communication.

Dudley and Walsall Mental Health Partnership NHS Trust

The majority (78%) reported that they felt safe whilst receiving treatment. However, 7% did not feel safe.

Half the respondents reported that their needs were met. A third reported that their needs were partly met or were unsure, whilst 1 in 10 people reported that their needs were not met.

Some of the explanations given by people who had reported negative experiences of the safety of services referred to mental health issues not being addressed due to various factors: an incident; drug use; medication rather than dealing with core issues; not being listened to. Some were organisational issues: not enough staff; not enough information and advice; nowhere to go in a crisis; no clear path for transitions; no appropriate service at weekends for young people.

There were fairly high levels of satisfaction with the hospital or clinic environment; 71% rated the environment as good or very good; 22% gave an average rating and just 7% considered the environment to be poor.

Satisfaction with GP Services

Patients' overall satisfaction with their practice was high with 84% assigning a good or excellent score to their practice.

78% agreed/strongly agreed that they would recommend their practice to family and friends; however conversely 1

in 5 would therefore not recommend their practice.

64% of patients reported that they were able to get an appointment when they needed it and 65% considered that the availability of appointments with doctors was good or excellent. However, more than 1 in 4 people were unable to get an appointment when they felt they needed one.

84% reported that they were always treated with respect by practice staff. 89% considered that their doctor was good, including 47% who considered that their doctor was excellent. Reception staff were rated good or excellent by 82% of patients. There were many positive views of GPs; patients acknowledging their skills, support and understanding.

Some patients had negative experiences of their GP citing lack of time for them and a lack of help and support from them. Patients experienced difficulties when they could not see their doctor of choice, and a key concern was the impact on continuity of care. This was exacerbated when locums were used.

80% considered that their GP always explained their treatment clearly; 75% feeling that they were told about the options available and could make decisions about their treatment. Most people (80%) found it easy to connect and discuss their problems with the doctor and 83% reported that the doctor listened and understood what was on their mind. 81% felt reassured after their visit to the GP practice.

It is of concern however that approximately 1 in 5 patients did not have such a positive experience and 22%

of respondents reported that they did not feel confident asking their GP questions. Where there were problems in communication some patients reported that this was due to the doctor not listening to their views and patients with additional needs may also have greater difficulty in communicating.

Accident and Emergency Services

These are our preliminary findings. Healthwatch Walsall recognises the pressures that the Trust is working under. The Accident and Emergency Department is currently dealing with significantly more patients than it was designed for.

A GP run Urgent Care Centre is co-located with A & E; the two reception desks are adjacent to each other and colour coded waiting areas are used to differentiate patients waiting for each service although this differentiation is not always well understood by patients. More than 25% of patients reported that they were not sure or did not know which reception window to go to.

The co-location of the Urgent Care Centre and the A&E department, and the use of adjacent receptions, presents patients with a confused picture at the outset. On entering the department the Urgent Care reception window is the one directly in the patient's view and, although it is stated, some patients may not be clear about the distinction between the two services.

“I was very impressed with the service I received. I saw a doctor in 2 hours”

There were examples of good practice where patients reported being pleased with the staff response and the treatment received and these are to be commended.

“The lady behind reception and the nurse knew I was unable to sit on the chairs in A&E due to a problem below, but did not offer me any other option and left me stood there for 3 and a half hours”

However, some of the adverse issues flagged up by patients in this survey are fairly basic and should be addressed.

“I had to wait in theatre gown in general outpatient’s area - felt exposed and uncomfortable”

There are concerns around privacy and dignity and communication which cause unnecessary anxiety but these should be fairly easy to address. Whilst positive comments were made about staff, the negative attitude of some staff should be addressed.

“Staff were pleasant, kind and concerned over my lengthy wait”

Customer care training, including refresher courses, should be mandatory for all staff dealing with patients, and managers should monitor and address any

issues of poor attitude which impact on patient care.

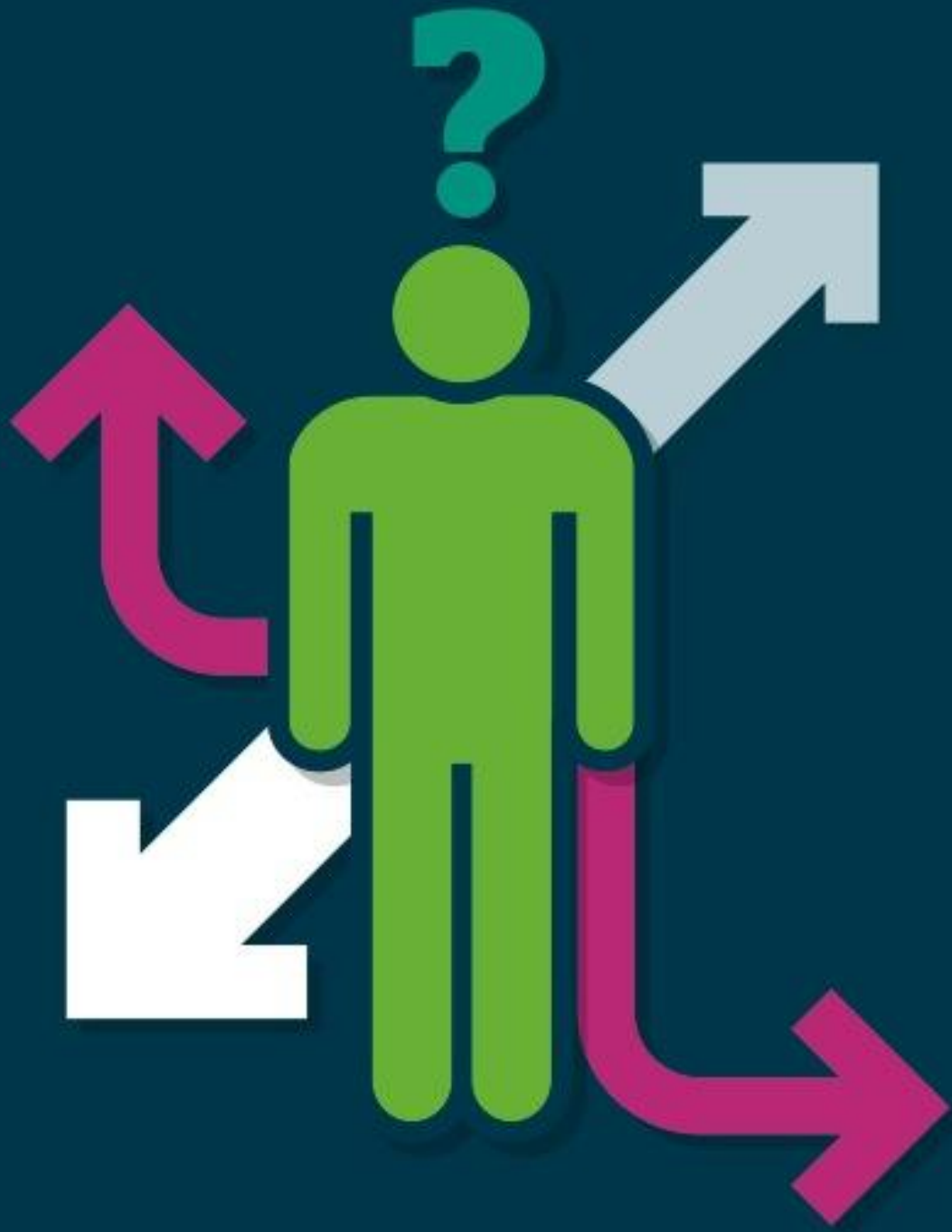
There appears to be a lack of clarity around the expected waiting time before being seen.

“I feel I was not kept informed of what was going on. I was kept waiting for a long amount of time firstly in Urgent Care then in A&E”

Only a third reported that they knew how long they would have to wait and only a similar proportion had been kept informed. There is a waiting time banner which scrolls across a TV screen in the waiting area but the TV is not always switched on, the banner is small and difficult to read and it takes time for it to scroll round due to other information being displayed.

“I stood outside the treatment A&E cubicle for 2-3 minutes and all staff avoided making eye contact with me. We had been waiting over an hour by this time. I had to interrupt someone to ask how long it would be before we were seen. It looked busy but informing us would have helped us to know what to expect. It looked like things could have been organised more efficiently. But the actual care when we got it was excellent”

Giving people advice and information



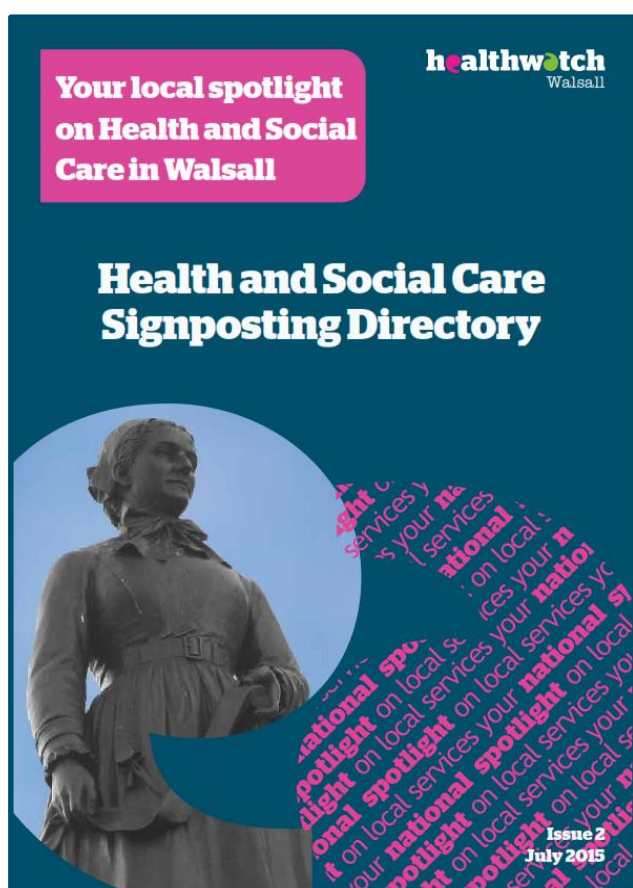
Helping people get what they need from local health and care services

This year Healthwatch Walsall published the second edition of our Health and Social Care Signposting Directory.

It's available as both a hard copy and from our website

www.healthwatchwalsall.co.uk

The Health and Social Care Signposting Directory contains important information about The Care Act, Personal Health Budgets, and Patient Rights as well as about mental health, dementia and the complaints system.



We have also included details to help inform patient choices around their health and social care needs along with details of HWW role as the consumer champion for people who use health and social care services.

Printed copies are being distributed to all GP practices, Libraries, care homes, dentists and youth centres etc. to help ensure it is widely accessible.

Personal copies have also been sent to councillors, MP's and prominent community and voluntary organisations across Walsall so that they are aware of it and equally able to promote it.

Invested in a new website

Healthwatch Walsall launched its new website at the lecture theatre in the Manor Hospital on 09 October. It is a new interactive website which will gather people's views more easily and present real time analysis for relaying to providers and commissioners. It uses a "service rating" type facility to gather patient experience for all health and social care services in Walsall. This is similar to the CQC's recent publicity on their own trip style advisor for rating care homes. Though it can't be taken away from Walsall that we did it first.

Additional accessibility

The new website has more accessibility functions than before including a translation and speech facility called BrowseAloud that has 77 languages and much more.

It incorporates more accessibility functions including a translation and speech facility called BrowseAloud that has 77 languages, read aloud functions, the ability to highlight a narrow channel of text on the page to aid people with visual impairments and with links to Social Media to broaden our reach, particularly into the younger age

categories. We expect this initiative to provide a big "step change" in our ability to gather views and represent them to commissioners and providers.

"We expect this initiative to provide a big "step change" in our ability to gather views"

The website has an Informatics tool built into it which is constantly assessing articles, stories Twitter feeds, Facebook and electronic medias about health and care services in Walsall. It has the capacity to assess up to 90 million bits of data each month and categorise them

into positive or negative sentiments about health care in Walsall.

It will also enable us to provide an application for service providers to link into in order to access real time intelligence about what people think of their services and can provide an independent repository for Friends and family test data. These features provide the opportunity for more collaborative working with commissioners and providers as well as an income generating opportunity for HWW.

The website also has an improved Resources and Library archive which will hold copies of Agendas and minutes of Board and Assembly meetings.



How we have made a difference



Our reports and recommendations

We have complete several reports through the year on a range of different subjects.

We've looked at Mental Health services provided within Walsall by a number of different services. We've also looked at hospital and community health services delivered by the Walsall Healthcare NHS Trust as well as GP services and communication within the accident and emergency department at the Manor Hospital and its discharge process.

For each focussed piece of work we have produced a report that has either been shared with the Care Quality Commission or the provider or in some cases both.

We have also responded through the year to a number of Quality Accounts from the Walsall Healthcare NHS Trust and mental health service providers.

Some reports have been shared with the Walsall Health and Wellbeing Board and the Health and Social Care Overview and Scrutiny Committee of the Walsall Metropolitan Borough Council.

Working with other organisations

Healthwatch Walsall has worked collaboratively with many local organisations within Walsall to gather people's experiences of services or lack of provision or awareness.

The following is a list of organisations that we regularly keep in touch with:

- the YMCA at The Glebe (homeless and Rough Sleepers)
- St Martins Church (Isolation and Loneliness project)

- Walsall Probation Service
- The Beacon
- Al SUFFA - UMO Building and Midland Road Church (Free Hot Meals - Monday and Thursday Evenings)
- Blakenhall Youth Group
- SSAFA (the Armed Forces charity).
- Walsall Voluntary Action
- Midland Mencap
- British Muslim Youth Group
- Walsall SUE (Service User Empowerment)
- Sure Start Palfrey
- Walsall Blind Association
- Walsall Disability Forum
- Bloxwich Community Partnership
- Collingwood Autism Support Group.
- Sendiass
- Bloxwich community Partnership
- Aaina
- Action on Hearing loss
- Advocacy Matters
- Autism West midlands
- Cusp (Carer User Support Program)
- Kaleidoscope
- Manor Farm
- Rethink
- St Peters church
- St Thomas's
- Walsall Deaf Association
- Walsall Society for the Blind
- Walsall disability Forum
- Home Start Walsall
- Brain Power
- Black Sisters Collective

- SSAFA - West Midlands North Branch
- St. Martins

The next list of organisations is those that we continue to collaboratively work with:

- the YMCA at The Glebe (homeless and Rough Sleepers)
- with Walsall Housing Group
- St Martins Church (Isolation and Loneliness project)
- Mind Matters
- Dementia Café's (Pathways4Life, Age UK, Walsall Council and the Accord Group)
- ESOL and Mental Health Groups Mendit Green Lane Church
- Walsall Probation Service
- The Beacon
- Al SUFFA - UMO Building
- Midland Road Church (Free Hot Meals - Monday and Thursday Evenings)
- Blakenhall Youth Group
- SSAFA (the Armed Forces charity)
- Walsall Voluntary Action
- Innovate
- Mencap
- Midland Mencap
- British Muslim Youth Group
- Walsall SUE (Service User Empowerment)
- Sure Start Palfrey
- Walsall Blind Association
- Walsall Disability Forum
- Bloxwich Community Partnership
- Walsall FACE
- Collingwood Autism Support Group.

Involving local people in our work

Local people have been at the centre of all the different investigations to produce the reports that we have listed earlier in the document.

We have worked really hard to build up our network to be able to access people from all groups and communities up and down the borough.

All our reports are based on the views and experiences of people who have used those services.

Central to this is the support received from Healthwatch Walsall Volunteers in helping engage with members of the community during our investigations into different services.

During our investigation into the Walsall Healthcare NHS Trust Manor Hospital and Community Health Services Healthwatch Walsall ran a stall at the Darlaston by Sea fund day.

The stall was located on the high street, which is a busy main shopping street in Darlaston with a large Asda supermarket adjacent to and complimentary to the array of shops.

The high street was blanketed in stalls celebrating the Darlaston by Sea fun day. This ensured a constant a high footfall past our stall all day.

That was all we needed and were able to interact with a great number of local people capturing their experiences of the services provided by the Walsall Healthcare NHS Trust.

Our local volunteers, some of who were from the Darlaston area, were well received by people and resulted in many questionnaires being completed.

Pictures of Darlaston by the Sea fun day



Our work in focus



Our work in focus: Mental Health

Engagement and Consultation Program.

A series of consultation and engagement sessions were held at a range of venues in the borough to proactively engage with service users of the Dudley and Walsall Mental Health Services Trust prior to the CQC inspection in February 2016.

We felt that we needed to reach out to the many organisations who work with people needing mental health support, 66 organisations were contacted, initially by email. Community organisations across all six partnership areas of the borough were also contacted.

Those who proactively engaged with us were provided with additional information or presentations to their community members to explain the purpose of the questionnaire survey and to encourage completion of them. Significant effort was made to reach people with disabilities, those disenfranchised from society (particularly the homeless/rough sleepers) and minority ethnic groups.

An easy read version of the survey was also available for people with learning disabilities or for whom English is not their first language. In addition, over 350 supporters, assembly and board members were emailed copies of the questionnaire.

Some partner agencies were able to disseminate information, questionnaires and invitations to the Listening Events via their own web pages. These included Walsall Face, Collingwood Association, Walsall Voluntary Action and the Walsall Disability Forum. Two Listening Events were held at The Hub, 17 Lichfield Street Walsall WS1 1TU. The events took place on 3rd and 11th of December, from 11 am to 3 pm and CQC Inspectors attended the second event.

Questionnaires were completed over the two days' events and gave people the opportunity for face-to-face discussions with HWW staff about sometimes sensitive issues regarding mental health services as well as being able to address concerns directly to Inspectors from the CQC.

Staff on several occasions visited and engaged with people being supported by the Glebe Centre and also those attending Al Suffa at the UMO Building and Midland Road Church. While talking with the clients it became apparent that several members of the group had no knowledge of the Dudley and Walsall Mental Health Services Trust, though many stated that they suffered from negative mental health impacts, in some cases without any identifiable support. In addition many people within the group had none or limited access to GP services, due it was claimed to their lack of an address.

Discussions were had with the organisational lead from Al Suffa regarding the difficulties experienced by their homeless and rough sleeping client groups and shortly after with the Urgent Care Manager at the new Urgent Care Centre in Bridgman Street in Walsall regarding access to GP services for these members of our local community. The Urgent Care Centre agreed that the people concerned could indeed attend their clinic to receive vital health care services.

As well as reaching out to disenfranchised people and enabling them to have their voice heard in respect of Mental Health Services though in this case the lack of, we were also able to arrange for them to receive vital healthcare services that they had been being denied.

Our work in focus: Supporting the Care Quality Commission

The Care Quality Commission (CQC) carried out an inspection of Walsall Manor Hospital and Walsall Healthcare Community Services from 8th to 11th September 2015.

Healthwatch Walsall (HWW) was contacted by the CQC and invited to share information that we may have about these services and, in order to inform the process, HWW undertook a range of listening and engagement events across Walsall to add to information it had previously gathered.

The CQC uses information provided by local Healthwatch (and others) to help plan the inspection and identify what to look for in the inspection. The CQC uses its own data and also organises its own listening events so members of the public can tell the team about their experiences of care.

HWW commissioned a media campaign to provide added publicity to the CQC Inspection arrangements and listening events as well as its' own which were instigated to provide wider coverage and opportunities for the public and particular groups to contribute.

HWW carried out a series of listening events from 14th to 22nd August 2015. The chosen venues were spread across Walsall with at least one event being held in each of the six area partnership zones.

TELL US ABOUT YOUR CARE

Healthwatch Walsall wants to give you the chance to share your experiences of the Manor Hospital and Community services for the CQC inspection

When it comes to health we all want the best services we can get. Whether we only need help now and again, whether the quality of our lives is affected or whether it's a matter of life and death.

The Care Quality Commission (CQC) is the independent regulator of all health and social care services in England with statutory responsibilities for monitoring and inspecting these services. CQC has announced that it will be carrying out an inspection of Walsall Manor Hospital and Walsall Healthcare Community Services from **Tuesday 8th September to Friday 11th September** to check that their services meet the standards expected.

The inspections - which are carried out by a mixture of independent and experienced professionals, CQC inspectors and lay people - will assess whether the Manor Hospital and community services, are **safe, effective, caring, responsive to people's needs and whether they are well-led**. These are the 5 questions that will be at the heart of the inspection to make sure that the focus is on the things that matter to people.

Come to the CQC public listening events meet the inspectors and share your experience of the services and care provided in the last year by Walsall Healthcare NHS Trust

27th August 2015 2.30pm - 4.00pm
Bentley Leisure Pavilion, Bentley Road North, Bentley, Walsall WS2 0EA

2nd September 2015 6.30pm - 8.00pm
Manor Farm Community Association, King George Circus, Rushall, Walsall WS4 1EG

In addition to the 2 listening events arranged by CQC, Healthwatch Walsall has arranged a further 8 events across Walsall to help give everyone an opportunity to have their say and share their experiences, good and bad to help CQC look into the areas that matter most to Walsall people.

These are as follows:

| | |
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| Fri 14th August 10 till 12 noon @ The People's Centre 3 Queen Street, Moseley WS10 8RS | Tues 18th August 10 till 12 noon @ The Collingwood Centre Collingwood Drive, Pheasant, B65 7HR |
| Fri 14th August 2 till 4pm @ Willenhall CHART 19 Corner Street, Willenhall WV11 2NS | Wed 19th August 10 till 12 noon @ Beechdale Lifelong Learning Centre, Stephenson Square, Beechdale Estate, Walsall WS2 7DN |
| Mon 17th August 10 till 12 noon @ Brownhills Memorial Hall, Lichfield Road, Brownhills WS8 6HR | Wed 19th August 5 till 7pm @ Palfrey Community Centre, Milton Street Palfrey WS1 4LA |
| Mon 17th August 2 till 4pm @ The Star Ball Centre Abbots Street, Walsall WS3 3AZ | Sat 22nd August 10 till 4pm @ Darlington by the Sea, King Street, Darlington |

For people who are unable to attend a listening event there are other ways you can feed in your views - details can be found on our website

healthwatch Walsall

www.healthwatchwalsall.co.uk or email info@healthwatchwalsall.co.uk

Telephone 01922 614144

Ensuring local health and care services are centred around what matters to Walsall people

Copy of Advert that was run in the local newspapers.

At each event people attending were invited to complete a questionnaire about their experience of services. Where people wished to comment in more detail they had the opportunity to speak to staff or volunteer members from Healthwatch who then completed a 'My Story' form with them.

Healthwatch Walsall consulting through its' partner network to allow specific groups to have an input, including groups

representing people with disabilities, people with mental health illness and learning disabilities, young people, ethnic groups etc. by completing patient experience surveys and providing more “in depth” stories.



Healthwatch Walsall at the Peoples Centre, Moxley.

Overall there were more positive than negative responses to the questionnaire on health services at the Manor Hospital and Community Services. Three quarters of respondents reported excellent or good levels of service.

However, around 13% experienced a service that was not good or poor. Similarly, 70% of people felt reassured after treatment at the Manor and 76% considered that communication was good.

Whilst the majority express positive experiences, HWW was concerned that between 25-30% remain outside this category i.e. 1 in 3 or 1 in 4 people are not having positive experiences. The levels of satisfaction varied depending on the speciality.



Healthwatch Walsall at the Stan Ball Centre, Walsall

The Service Watch questionnaire raised a number of themes. 82% had experienced a good level of service. People who were dissatisfied cited issues of waiting times, quality of care and communication in particular as being their concerns.

This is supported by the findings of Tell Us Your Story. There were many examples of good treatment. Patients with high satisfaction commended the treatment received and the care given by the staff.



Our plans for next year



Future priorities

Healthwatch Walsall CIC

Since our bid to secure a further contract for the next phase of Healthwatch in Walsall was not successful this will mean a period of reflection as we contemplate what the future may hold for our company.

We are working closely with Engaging Communities Staffordshire (ECS) to help ensure a smooth transition to the new Healthwatch provider. We have been assured by ECS that the currently agreed workstreams will be allowed to carry their work through to conclusion as these were identified as community priorities.

ECS has indicated that it is to carry out its' own borough wide engagement and listening events to inform its' understanding of the priorities and areas of concern for Walsall people as part of a refresh of the priorities for Healthwatch Walsall going forward. We endorse this approach as the landscape for health and social care continues to change and bring new challenges almost every week.

Cuts to social care budgets are a concern, mental health has been recognised as a national priority but will funding levels be adequate to provide the services needed particularly around children's and adolescent mental health and the transition to adult services. Local commissioning of GP services needs careful scrutiny to ensure that this does bring about better services and increased public satisfaction with GP services.

Concerns about rises in dementia, diabetes and obesity are well founded and the demand for a more unified and

collaborative based healthcare economy to deliver better health outcomes places great expectations on the much vaunted Better Care Fund whilst more self-care and health awareness and lifestyles may become the longer term solution.

Our experience, knowledge and passion for health and social care is acknowledged by ECS who plan to continue to have conversations with our company as it unveils its delivery model and there may well be opportunities for our members to participate through the Healthwatch Advisory Board. We will be contacting our membership to exercise their own individual options for having their individual membership transferred, or not, to ECS as part of the new Healthwatch Walsall. Much of our work and data about healthcare and resources from our website will be transferred to provide a strong base for the new provider and a continuing legacy of our founding work for Healthwatch in Walsall.

As a company we have decisions to make once the dust has settled on this transition period - our initial aim is to keep a watching brief as the ECS managed Healthwatch Walsall begins to establish itself as the voice for local people.

Beyond that is difficult to predict but long term decisions will be made by the company members over the coming months.

Future priorities

Engaging Communities Staffordshire

ECS is delighted to be delivering Healthwatch Walsall, and we are committed to building on the good work of the previous provider to take this service forward. For us, Healthwatch is critical service in ensuring that patients and the public have a strong voice in the planning and delivery of our health and care services. In Walsall, this is more important than ever before, given the challenges facing services in the area - with a hospital in special measures, pressures on social care budgets, and the recognition of the need for the planning of services to be more joined up.

The NHS in all parts of the country are now required to produce a Sustainability and Transformation Plan, outlining how organisations will work together as a system to develop a place based plan which is ambitious about transformation and covers the breadth of the agenda from prevention and self-care, workforce through models of care and finance.

For Walsall, the "footprint" for this plan is the Black Country - i.e. Walsall, Wolverhampton, Dudley and Sandwell, and health leaders are submitting initial plans by the end of June. We are working really closely with our neighbouring Healthwatch to ensure there is a strong public voice in the programme, and that there are robust plans to engage and consult with the public at every step. Healthwatch Walsall commits to ensuring we keep the public in Walsall up to date with future developments.

We are also committed to ensuring that Healthwatch Walsall has at its heart the voice of patients and service users. We will be recruiting to a new Healthwatch Walsall Advisory Board, which will make the key decisions about the work of the Healthwatch service. We will also be consulting with the public about the priorities Healthwatch should be focusing on, and we will start this process at the celebration event on 23 June, to which we are delighted to have been invited to run a session.

Healthwatch Walsall has benefited from some excellent support from volunteers, assembly members, board members and others, and we hope that many of these people will continue their involvement with Healthwatch. ECS is committed to supporting volunteers, and we have recently won the Investors in Volunteers award, signalling the priority we give to this. We have developed a range of volunteer roles in our existing Healthwatch services, and these can be used to help support volunteers in Walsall.

Finally, we would like to take this opportunity to thank the existing Board and the staff of Healthwatch Walsall both for the excellent work they have carried out on behalf of the public, and for their support in the transition period. We look forward to welcoming staff to our organisation, and to continued working with Board and Assembly members.

Our people



Decision making

Healthwatch Walsall's Board moved to a new style of working during 2015 - 2016 by holding its Board meetings in public.

The Board also publishes minutes of Assembly and Board meetings on our new website to help provide greater openness and transparency on our work.

How we involve the public and volunteers

Healthwatch Walsall is an independent organisation. It is led solely by its Members and volunteers who decide the direction of travel and work programmes of the organisation.

There are three levels of membership in terms of how people can be involved with Healthwatch Walsall. The first level is as a 'Supporter' and is open for any individual or organisation with the option to attend meetings, fill out feedback forms or e-mail us with feedback to voice their opinions.

Supporters can also attend workstream meetings and receive consultation requests and regular newsletters and updates.

The second level is an 'Assembly Member'. Both individual and organisation Supporters can nominate themselves for the Assembly. They will need to have been Supporters for at least 6 months and demonstrate active

participation in Healthwatch Walsall or a similar health or social care role.

Assembly Members focus on the issues and topics raised by members or through presentations from stakeholders and providers. The Assembly will help to develop a work programme, and are therefore a key component of Healthwatch.

Members of the Assembly are encouraged to join workstream focus groups and workshops and to represent Healthwatch on groups in order to gain and share in-depth opinions and evidence of the performance of Health and Social Care services.

The Assembly will also receive presentations from service providers and commissioners, and will aim to gather views and challenge providers and policy makers to be accountable to service users.

The third level of membership is that of 'Board Member'. Board Members are elected at AGMs by the Assembly.

There are 10 Board seats, 7 for individuals and 3 for organisations, and up to 3 places to co-opt members with specific skills to assist the Board in its duties. Board Members are responsible for ensuring the organisation is run properly in accordance with its contractual obligations and to comply with its Memorandum and Articles of Association and other legislative requirements.

Our finances



| INCOME | | £ |
|---|--|------------|
| Funding received from local authority to deliver local Healthwatch statutory activities | | 223,740.00 |
| Additional income | | 4,500.00 |
| Total income | | 228,240.00 |
| | | |
| EXPENDITURE | | |
| Operational costs | | 73,381.00 |
| Staffing costs | | 103,363.00 |
| Office costs | | 7,805.00 |
| Total expenditure | | 184,549.00 |
| Before depreciation | | 5,383.00 |
| Balance brought forward | | 38,308.00 |

Contact us



Get in touch

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We will be making this annual report publicly available by 30th June 2016 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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