Health and Wellbeing Board

19 March 2024

Healthwatch Walsall - Update March 2024 Work Plan 2023/2024

1. Purpose

The purpose of this report is to update the Health and Wellbeing Board on the progress of Healthwatch Walsall's work programme for 2023/2024.

2. Recommendation

That the Health and Wellbeing Board notes the progress in delivering the Healthwatch Walsall work plan for 2023/2024.

3. Report Detail

This year we continue to strive to have a positive impact for the communities and the people we serve. We aim to continue to strengthen partnerships with providers and commissioners of services, further increase our public engagement, increase escalations/issues when necessary to decision makers to impact on change. For year-to-date [April 2023 – January 2024] key numbers see below:

- **5,479 people** were engaged with face to face across our communities or virtually on themed online public meetings.
- **24,387 people** were involved via surveys, Enter and View visits, Newsletters, social media posts and our website over the period.
- **1,478 people** shared their experiences of health and social care services with us, helping to raise awareness of issues.
- **1,017 people** were given advice, information and were signposted to support to help meet their health or social care needs.

Other key numbers:

- 345 events/venues attended in the communities of Walsall
- 54 online events/sessions held
- **35** reports published
- 54 escalations made to commissioners, providers and safeguarding
- **15** volunteers support Healthwatch Walsall

The Healthwatch Walsall work programme and projects are based on intelligence received through a variety of sources and for 2023/2024 Healthwatch Walsall have looked at key lines of enquiry, including projects such as:

• Experience of maternity services and post-natal care for Black and Asian women

- Accessible Information Standard
- Urgent & Emergency Care Department, Walsall Manor Hospital

This year we aim to build on the demonstrable impacts and improvements to services to date seeking to have even greater positive impact for the communities and the people we serve. We aim to strengthen partnerships with providers and commissioners of services, continuing to act as their critical friend but ready to hold to account as required, and raising and escalating issues to decision makers to effect change.

At its public Healthwatch Advisory Board Meeting held on 18 April 2023, the Healthwatch Walsall Advisory Board approved the priority projects along with additional pieces of work that will run throughout the year. As for previous years, we built in an element of flexibility into the work programme in order that Healthwatch Walsall can be responsive within the year and able to work on issues that arise and therefore ensure the views of the public are being addressed.

A copy of the Healthwatch Walsall annual work programme is on our website and the link to the report is here:

https://www.healthwatchwalsall.co.uk/sites/healthwatchwalsall.co.uk/files/HWW%20 Work%20Plan%202023-2024.pdf

3.1 Maternity Experiences of Black and Asian Women

The aim of this priority project was to understand patient experience from the Black and Asian communities about their experiences of accessing maternity services.

Data suggests that women from these backgrounds have an elevated risk of maternal death compared to women from white backgrounds and that these women are also at a higher risk of experiencing premature birth, stillbirth or neonatal deaths.

Work commenced in Quarter 1 through face-to-face engagement with Black and Asian women across the Borough. A survey was developed, and it should be noted that each survey was completed on a face-to-face basis with the participants which allowed us to hear fully about their individual experiences.

As well as general outreach, targeted engagement was carried out at the Primrose Ward, Walsall Manor Hospital. We were also successful in securing a regular engagement slot at the new Maternity Outreach at NashDom, Palfrey where we attended twice weekly to listen to patient's maternity journeys on a one-to-one basis.

We worked with local elected members within targeted wards.

As part of the work undertaken a conversation took place with the Equality, Diversity & Inclusion Lead Midwife. An update on the work was given at our APM which included a video of the conversation and the link to this is below:

YouTube: <u>https://www.youtube.com/watch?v=K147q4rso9Y&t=28s</u>

The completed report has been published on our website and shared with partners and stakeholders, and we have received some very positive feedback on how this will be taken forward.

We have been advised that the Walsall NHS Healthcare Trust will put any necessary actions in place, and we will also be presenting the findings to the Patient Feedback Oversight Group.

The Black Country ICB will be sharing the report with LMNS colleagues who will contact Healthwatch to advise of how they may use the report and of any learning.

3.2 Accessible Information Standard

The work on this project was undertaken to determine any health inequalities and to look at whether health and social care services are meeting information and communication needs of people with sensory loss and learning disability/autism.

The public engagement element of this work was extended slightly in order to enable a visit to Learning Disability students at Walsall College who actively took part in face-to-face engagement and easy-read surveys. The survey was based on an existing survey that had been used by Healthwatch England. We contacted various groups and communities in Walsall to get a representation of their experiences and views. The survey was also made available in Easy Read and those that could not directly participate were supported by their carers or Healthwatch Walsall staff.

We held 3 focus group discussions with people with sensory impairments and learning disabilities who are most impacted and who should be supported by the Accessible Information Standard.

The final report will be published and shared with our partners and stakeholders by the end of February 2024.

3.3 New Emergency Department, Walsall Manor Hospital

The aim of this project was to obtain the views of the public about the new ED facility at Walsall Manor Hospital and to determine if there is any impact on waiting times. The work is being carried out in 2 parts, the first being to obtain service user feedback and the second part is to look at the total patient journey. Both pieces of work are being carried out by survey, online and hard copy with Part 2 of the survey being taken away by service users to complete once their ED journey has concluded. Healthwatch Walsall realise there will be a discrepancy in the level of service user intelligence between these two parts of the work.

Data analysis is currently being undertaken and report will be published by the end of March 2024.

3.4 Teenage Pregnancy

The initial aim of this project was to understand the rates of teenage pregnancy in Walsall, to look at the use of sexual health clinics, access to services, education and to also look at whether the services are youth friendly, and that young people felt assured about confidentiality.

However, following meetings with relevant partners, it became apparent that no new intelligence would be garnered from the Young Person Communication work undertaken previously.

It was for this reason that during the latter part of 2023 it was agreed that an independent evaluation of 2 of the prevention programmes (Thrive and Teens & Tots) would be carried out.

Engagement work has taken place with the cohorts of young people attending the sessions and once concluded this will result in an independent service user evaluation of the programme. The report will be published by the end of March 2024.

3.5 NHS 111

The aim of this work was to gain public experience of NHS 111 following the transfer of provider.

Healthwatch Walsall will be looking to see if there is any correlation between NHS 111 advice to the public with attendance at Walsall Manor Emergency Department. This work should therefore be cross referenced to the work project around patient experience of the new Emergency Department at Walsall Manor Hospital.

The work is being carried out by online and hard copy surveys and once completed the final report will be published by the end of March 2024.

3.6 Long Covid

The aim of this work project was to gain public experience of people living with Long Covid and to see if services are in place to support people living with this condition.

The work was undertaken via an online and hard copy survey, and this was supported by the Long Covid Support Team.

The final report will be published and shared with our partners and stakeholders by the end of February 2024.

3.7 NHS Dentistry

Healthwatch Walsall received calls from the public indicating that they no longer have access to NHS dental treatment or care, and it appeared that many had been removed from NHS dental registration leaving them unclear where to go. The aim of this work was to look closer at possible problems people are experiencing and to identify treatment pathways to suit their needs. We also wanted to find out whether citizens living in areas of deprivation were more affected. Healthwatch Walsall carried out a telephone survey of all dental practices in the Borough and also carried out online and hard copy surveys with members of the public.

The final report was published and shared with our partners and stakeholders.

3.8 Integrated Care Board

Healthwatch Walsall has a participatory (non-voting) seat on the Integrated Care Board and the Manager of Healthwatch Walsall is the Black Country representative at these meetings. There is the same representation at the ICB Quality & Oversight Committee, and the 4 Black Country Healthwatch have a MoU in place for this purpose.

3.9 Volunteer Recruitment

We continue to work with a group of 15 passionate and active volunteers, a small cohort of whom supported our work although providing suitable volunteering opportunities during Covid-19 was difficult and has reduced the cohort accordingly. We are pleased however to have 1 young volunteer working with Healthwatch Walsall and moving forward we will be seeking to expand on the number of volunteers we have.

Engaging Communities Solutions holds the Investing in Volunteers (IIV) accreditation AND has successfully achieved re-accreditation of the IIV award which is valid until April 2026.

3.10 Enter & View

Face to face Enter and View visits to care/nursing homes and primary care services have been undertaken throughout the year, these are intelligence based and reports from the visits are shared with partners and uploaded onto our website.

We seek to follow up on all recommendations made with care providers to see if they have acted upon them and if not, we will seek a response as to why they have not been implemented.

3.11 Strategic Engagement

Healthwatch Walsall has built up a working relationship with a number of strategic level organisations and committees. These include the Care Quality Commission, Health and Wellbeing Board, Walsall Together Partnership Board, Social Care and Health Overview and Scrutiny Committee, Walsall Safeguarding Partnership, Black Country Integrated Care Board and the ICB Quality & Oversight Committee. Latterly, Healthwatch Walsall is also on the Team Walsall Board. We are also involved in other Walsall Together and Local Authority groups supporting their work.

Our remit is to work with these partnerships to ensure the voice of the public and patients are heard, and to provide advice, guidance and assurance on how to achieve this, to work collaboratively to maximise resources and to avoid duplication.

Healthwatch continues to be a strong voice for patients and service users in strategic decision making.

4. Implications for Joint Working arrangements:

Good joint working and partner relationships are crucial in the delivery of Healthwatch Walsall work plan. We continue to act independently with a Healthwatch Advisory Board who champion the public/patient voice and engage in partnership activities to improve and enhance health and social care.

5. Health and Wellbeing Priorities:

- Commitment to supporting the HWBB priorities.
- Healthwatch Walsall support the promotion and delivery of initiatives to support the improvements in health identified in the JSNA.
- Enable those at risk of poor health to access appropriate health and care, with informed choices.
- Empowering and signposting people to appropriate services to support positive health and wellbeing.
- Remove unwarranted variation in health care and ensure access, with consistent quality.
- Marmot objectives: Action on health inequalities requires action across all the social determinants of health, including education, occupation, income, home and community, enabling all children, young people and adults to maximise their capabilities and have control over their lives. (Healthwatch Walsall delivery around Care Assessments and Hearing Impairments – Access to Health and Social Care).

6. Safeguarding

- Healthwatch Walsall have a seat on the Walsall Safeguarding Partnership Performance Quality & Assurance Committee and the Self-Neglect/Hoarding Sub-Group.
- Healthwatch Walsall, via intelligence escalate safeguarding / issues of concern to the relevant authorities.

All reports are published on our website: www.healthwatchwalsall.co.uk

Author: Aileen Farrer Healthwatch Walsall Manager aileen.farrer@healthwatchwalsall.co.uk

07732 683495