



Healthwatch
St Helens

Annual Report 2014/15



Contents

Note from the Chair	3
Note from the Support Manager	4
About Healthwatch	6
Our vision/mission	6
Our strategic priorities	6
Engaging with people who use health and social care services	7
Understanding people’s experiences.....	7
Enter & View.....	8
Providing information and signposting for people who use health and social care services	11
Helping people get what they need from local health and social care services.....	11
Influencing decision makers with evidence from local people	13
Producing reports and recommendations to effect change	13
Putting local people at the heart of improving services	13
Working with others to improve local services	14
Impact Stories	16
Case Study One	16
Case Study Two.....	17
Case Study Three.....	17
Our plans for 2015/16	18
Opportunities and challenges for the future.....	18
Achievements	19
Our governance and decision-making	20
Our board	20
How we involve lay people and volunteers	21
Financial information	22
Contact us	23

If you require this report in an alternative format please contact us at the details on the back page.

Note from the Chair

I am delighted to introduce our second annual report for Healthwatch St. Helens.

We have been working towards improving standards in the areas that last year you told us were the most important to you, i.e. Good Quality GP services and you can read more about that later at page 20.

Our mission is to improve your health or care services by bringing together local people's views about services to make change happen if needed. We cover all age groups and all health and social care services 'from cradle to grave'. Any organisation that provides a health or care service that is funded with public money can be scrutinised by Healthwatch – examples this year include private care homes, health services delivered in prisons and Brookfield Support Centre.

We also analysed an early draft of the local mental health strategy and made a number of suggested changes, which are evident in the new version that is now out for consultation, please use our website to find out more.

Where necessary we highlight issues to Healthwatch England, so that Government departments looking at national trends can gather evidence. This year we raised concerns about closure of the Independent Living Fund, which could affect the income levels of some vulnerable people in our borough, and affect their wellbeing.

We also participated in a national special inquiry about Unsafe Discharges from hospital and the national report will soon be available from our support team

Again, I must thank our dedicated and active committee members and the 'Friends of Healthwatch' volunteers, who have given a massive 1284 hours worth of their time during the year in the service of Healthwatch St. Helens. This has contributed a significant saving to the public purse and without their time & energy, we would not have achieved so much.

I look forward to our continued success in making our local health & care services the best they can be.

Tom Hughes

Chair



Note from the Support Manager

Year 2 of Healthwatch St. Helens has involved some excellent work and some challenges alike.

We revamped our approach, changing the way we target groups and communities that don't often get a chance to have a say as well as encouraging services to think about reaching out to the whole of society.

Being part of a peer-review of the Health and Wellbeing Board, and from an evaluation by our Healthwatch stakeholders, we have learned more about what others think we're doing well and focused on improving in areas where we weren't as strong.

For example:

- Overall people believe that Healthwatch St Helens has a clear purpose, is accessible and focusses on the priorities that matter to local people.
- There was a feeling that the performance and profile of Healthwatch St Helens has been mixed. However, in general stakeholders believe that the service is improving and Healthwatch are doing a good job overall.
- 62% of those surveyed felt that Healthwatch is helping to improve health and social care services. We know that this is an opinion that we want to improve.
- When local people were asked if they felt that Healthwatch St Helens was doing a good job on behalf of residents, service users and patients, the feedback was

largely positive with 50% of respondents feeling that Healthwatch St Helens is doing a good job.

- One area that can be improved is our communication with the Health and Wellbeing Board and its work being understood more by Healthwatch members.
- Someone described how all staff in their office knew who to contact at Healthwatch St Helens if required, while others stated that Healthwatch is an amazing source of relevant information for the voluntary sector made up of excellent, friendly and knowledgeable people.

This year we analysed the results of the public consultation about which priorities we should focus on and got started on the top 2 ranked areas - Good Quality GP services and Preventing Mental Ill Health. You can read more about these areas later in the report.

Other areas that Healthwatch members thought were important were End of Life Care and Making Choices and Having Control of your Health & Care.

When someone is coming to the end of their life, health workers tell us there can be various difficulties amongst family and preparations for care. If people don't plan how they want to be cared for when they are dying, this can cause real emotional upset for everyone involved, and the impact of this can be far reaching and last for many years afterwards.

Through people's stories and reviewing complaints, a high proportion of issues were connected to a death and we see more and more demand for bereavement support and counselling. The work is on-going, but we have brought partners together to support better standards in this sensitive area and will be compiling information packs of how to deal with various aspects of end of life

care that anyone will be able to use to help them ensure their loved one's passing is as dignified as possible.

'Making Choices and Having Control' is a passion for a number of our committee members and Friends of Healthwatch. The initial idea of an informal awareness and sharing event actually became something a lot bigger - our Personalisation Conference - *'My Life, My Choice?'*

Adult Services, Children's Services and CCG colleagues worked with us to agree and organise the programme. Service users and providers shared a common goal in working together and pushing for a 'person-centred approach', so that local people can obtain the best possible services for their support and care needs. A full report from this highly successful event is available from the support team and on our website. We look forward to continuing work on this and related subjects as legislation for social care and its implementation locally starts to become clearer.

I will finish with a huge thank you to the staff team, who have worked hard since the beginning and continue to seek any opportunity for people to share their experiences of health & care services with us.

Stories and experiences - good and bad - are always welcome and we can also usually point you in the right direction if you don't know where to start to get your problem fixed. As one of our members said - "Go on, give Healthwatch a go".

Emma Rodriguez Dos Santos
Support Manager





About Healthwatch

We are here to make health and social care better for ordinary people. We believe that the best way to do this is by designing local services around their needs and experiences.

Everything we say and do is informed by our connections to local people and our expertise is based on their experience.

We are the only body tasked with gathering and feeding back people's experiences across all health and social care.

Statutory activities of a local Healthwatch:

- Supporting the involvement of local people in the commissioning, the provision and scrutiny of local care services.
- Enabling local people to monitor the standard of provision of local care services and whether and how local care services could be improved.
- Obtaining the views of local people about their needs for, and experiences of, local care services and importantly to make these views known.
- Making reports and recommendations about how local care services could be improved. These should be directed to commissioners and providers of care services, and people responsible for managing or scrutinising local care services and shared with Healthwatch England.
- Providing advice and information about local care services so people can make choices.
- Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where appropriate, make such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues.
- Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.



Engaging with people who use health and social care services

Understanding people's experiences

In September 2014, Healthwatch St Helens was commissioned by NHS England to do a review on Eldercare services in St Helens. Eldercare is a service for those people over 65 years of age and are housebound or unable to access standard GP services.

A survey was used to capture the key points over a 3 week period, using social media to encourage Healthwatch members, local contacts and care home networks to participate. A short survey was chosen that could be completed quickly to gather the most information.

As a result of the survey it was found that, on the whole, the majority of people were happy with the service they received but suggested some improvements, e.g. improving the 3-way communication between GPs, pharmacists and care home to ensure correct prescriptions and more immediate medication were provided; improving the registration process for temporary residents and their transition easier should they become permanent residents; and continue opening hours, including Saturdays, but in addition allocate time slots for visits so that carers can arrange to be available when the service attends.

How we engage with hard to reach groups

Under 21s

We have reached the under-21 age group by:

- Holding information stands at local colleges
- Distributing our surveys and information to local schools and colleges
- Young volunteers asking their friends complete questionnaires as part of our task group work

People from other areas

We often come into contact with people from other areas, who come into St Helens for work, education or to shop and we welcome them as valued members. They can also comment on services such as pharmacies or the Walk-in-Centre.

Any experiences or views that they share with us about services in other boroughs are sent onto the appropriate local Healthwatch.

We joined neighbouring Healthwatch to obtain views about our local A&E department in December 2014. The views of St Helens residents from this wider survey have been shared with local CCG service planners.

In some cases, people who live elsewhere contact us to discuss care of their relatives who live in the St Helens area if they are unable to resolve things themselves.

Disadvantaged people

We make sure that people who don't have their voices heard have the opportunity to share their views with us by:

- Maintaining links with contacts at school and colleges to keep channels of communication open around issues for young people around health care.
- Attending forum meetings at the Deafness Resource Centre and collaborating on issues around British Sign Language interpreters
- Setting up a diversity engagement group to engage with BME communities
- Taking referrals from St Helens Mind
- Regular outreach visits to Peasley Cross Hospital, part of the 5 Boroughs Partnership Trust.
- Highlighting issues for transgender people both locally and nationally. Working with members of the transgender community, we have followed up their concerns about how there is very little availability of services locally and how a lack of awareness in mainstream services can hinder their access to specialist services.
- Hold information stands at libraries and community events in disadvantaged areas of the borough.
- Interviews and drop-ins with homeless and substance misuse service users.

Older people

Through doing outreach work, Healthwatch St Helens have engaged with older people via local community groups. This provides the opportunity for older generations who may not use technology for various reasons. Not everyone has access to on-line information and therefore need other opportunities to feedback their views.

Some examples of these are:

- Attending and exhibiting at Senior Voice roadshow events around the borough at local social clubs or community centres.
- Maintaining close links with Age UK Mid Mersey: providing newsletters and advertising our information via their Information Office. Age UK and Senior Voice cascade our information and this year helped with a special enquiry survey on older people receiving an unsafe discharge from hospitals, care units.
- Information stand at the University of the Third Age drop-in
- Informal presentations to Patient Participation Groups at GP surgeries.
- Working closely with the Alzheimer's Society and continuing to ask people about the diagnostic and care pathway for dementia and access to information.
- Participating in Fuel Poverty awareness and Falls Prevention Events.
- Doing Enter & View visits in care homes and asking residents opinions and views on the home.

Enter & View



In 2014 - 2015 Healthwatch St Helens made Enter & View visits to 3 care homes. We are happy to report that none of the visits uncovered any serious issues.

We visited the care homes for different reasons. They included:

- **Invitation from a care home manager to give the community perspective.**



The manager at Linear Park Care Home in Newton-le-Willows asked us to observe the care being provided, to identify any areas for improvement and make recommendations. We were very impressed with how the home is operating, the commitment demonstrated by the staff and the standard of care that residents are receiving. We will follow up with a return visit in the coming year. The staff were given 90 minutes' notice that the visit would be happening (as per guidance) and they have requested that next time they receive no notice at all. They want to be assured that we are seeing them as they really are.

- **Concerns raised with us by members of the public.**

Concerns were first raised with us about a local care home by a lady whose father lived there for a while. At the time, we passed the information on and appropriate action was taken by the Local Authority to ensure that the care home improved the standards of its care.

We chose to Enter & View the home to see for ourselves what improvements had been made and to identify any other areas that need to be developed. We were pleased to see that standards had risen and made some more recommendations.

The care home produced an action plan from the recommendations we made and said that the Enter & View team's feedback proved useful.

- **Observation of a unique service.** Brookfield Support Centre for Older People provides respite care, long term care, rehabilitation and day care. We decided to Enter & View the centre so that we could get a feel for what is on offer there. We were impressed by all areas of the centre and especially with the staff and the positive comments made by clients. The few recommendations we made will be addressed in the imminent refurbishment that is planned for the centre and we have been invited to visit again once the work is complete.

Our authorised representatives are:

- Pam Davies
- Joanne Heron
- Kath Inkpen
- Jimmy Jackson
- Jane Lowton
- Judi Lunt
- Brenda Smith

Healthwatch St Helens plans to Enter & View more care homes in 2015 - 2016 and further training will increase our team of volunteers.

PLACE

Patient-led assessments of the care environment, also known as PLACE, help organisations to understand how well they are meeting patient needs in relation to environment and food, and identify how to make things better.

In March 2015 we took part in 3 PLACE visits, to St Helens Hospital, Newton Community Hospital and Whiston Hospital. We had been involved in assessments of St Helens and Whiston Hospitals before but this was the first opportunity to view Newton Community Hospital.

Whiston and St Helens Hospitals showed consistency in providing high standards of cleanliness for a third year and in staff teams' excellent attitude towards the way the assessments are conducted. The Trust has since been named as best in the country at PLACE visits.

Some staff at Newton Community Hospital were new to the PLACE process and were keen to ensure that the assessment was carried out in accordance with guidelines. The hospital was exceptionally clean and the only areas for concern focused around the size of signage and a few signs of wear and tear around the building.

We look forward to continuing our involvement with the PLACE assessments next year.





Advice and information for people who use health and social care services

Here's some examples of helping people get what they need from local health and social care services

- Worked with Bridgewater NHS Oral Health Promotion team to help them promote their services to the students attending St Helens College. Healthwatch St Helens put them in touch with the SEN Tutor and to deliver an Oral Health Session with resources for a group of students. In addition, they also offered to attend the College to deliver training to all staff on key oral health messages and offered their support for vulnerable service users, with specific sessions of oral health as part of the college curriculum. Bridgewater were pleased with the service, efficiency and support shown to them.
- Healthwatch St Helens also matched up Carmel College pastoral staff with PAPYRUS - Young People Suicide Prevention Services to enable them to go into the college to give a presentation to the students.
- Worked with the Healthy Living Team to train up at least 100 volunteers and workers across the

voluntary sector workforce in Suicide Prevention Awareness.

- Supported the need for a children's triage nurse at Walk-in and ongoing customer service skills supported with experiences.
- Connected equality lead for Alder Hey with community workers who can maximise the distribution of jobs adverts into BME communities and networks.
- Matched up a patient with dementia who needed extra help with Bridgewater NHS Oral Health Promotion team for supportive dental treatment.

Case Studies

Healthwatch St Helens compiled 61 case studies this financial year, of which 10 have been referred to the Healthwatch Independent Complaints Advocacy service. A further 10 referrals have come in from other partners across St Helens to access the complaints advocacy service directly.

Case studies enable us to capture all the good (and bad) points about what happened in a patient's journey and are usually how the patient chooses to tell us their story.

However we also offer quick ways for people to give us their thoughts on services through suggestions boxes, quick polls and surveys, and a Talk to Us form that people can complete via our website that is accessible anytime day or night.

Healthwatch Independent Complaints Advocacy (HWICA)

HWICA is a client-centred service that helps people resolve a complaint about healthcare services and is a free and independent service. They support clients with a grievance related to any aspect of healthcare that falls under the jurisdiction of the Health Service Ombudsman, such as complaints about poor treatment or services provided through the NHS in England.

Healthwatch Advocacy can:

- Give information about who to complain to.
- Explain the NHS complaints procedure.
- Help write letters to the right people.
- Go to meetings with the client.
- Put the client in touch with other people who can help.
- Provide an interpreter if needed.

All Advocates are qualified and have many years' experience of providing advocacy support to individuals making an NHS complaint. They provide a two tier advocacy service for people who need help in making a complaint. Tier 1 is to equip the complainant to follow through the complaint themselves and Tier 2 is offered if the services and support of an advocate are needed.

The service is available at regular drop-ins based in the town centre and supports people where they are unable to construct a complaint on their own. Other advocacy services in St Helens e.g. SHAIR also can access this service, where a client's main issue is a health service.

Healthwatch organisations in the Cheshire & Merseyside area also work together in relation to referring clients for advocacy

support if cases arise where the person doesn't live in that particular area.

In St Helens there is also the SHAIR, St Helens Advocacy & Information Resource service.

Some examples of where Healthwatch Complintats Advocacy have helped clients:

- A carer contacted Healthwatch St Helens because they were concerned about the quality of health services at HMP Liverpool and had made no progress, despite formal complaints to the provider. HwICA service offered support with getting further action from the provider.
- Healthwatch St Helens was contacted by a lady whose 90-year-old brother, with Alzheimer's, was sent home alone from A&E, even though a she had arranged with ward staff to collect him. An apology was given by the hospital to the family.
- A man was having difficulties in getting care for a fractured leg after a car crash. He had seen various GPs/surgeons and felt let down. His complaint was sent to the Parliamentary Omburdsman and a response was received.
- A lady who had an operation several years ago, from which there were complications, from which she is now suffering. Her medical records were inaccurate and the client was considering legal action. The client is awaiting a meeting with clinical personnel about her condition, with help from the trust and her own GP.



Influencing decision makers with evidence from local people



Producing reports and recommendations to effect change

- St Helens Council held an event at the World of Glass in January 2015 to inform recipients of the changes around the Independent Living Fund. This event was brought about through requests to Healthwatch St Helens that users were fully advised as to the upcoming changes that could affect them.
- Intelligence returns which we send to Healthwatch England twice a year are used to inform Healthwatch England about a safeguarding issue at a Liverpool hospital and also issues relevant in St Helens but also nationally.

Putting local people at the heart of improving services

- Healthwatch St Helens encouraged the purchase and distribution of new slippers to give away to attendees at a falls prevention event.

- Highlighted concerns regarding the lack of joined up working of End of Life processes across the health and social care family.
- Regular attendance at the local Hospital Trust's Patient Experience Council, where patient stories are shared and an action plan is reviewed with the Trust. Also attend the Patient Safety Council meetings to scrutinise the data.
- Other meetings attended to improve services are: 5 Boroughs Partnership PPI Advisory group, Health and Social Care Scrutiny Committee and the Quality Surveillance Group.

Working with others to improve local services

Healthwatch St Helens joined other Healthwatch in a Project to look at issues for people who are deaf/hard of hearing or have hearing loss. The aim was to gather views and experiences of being treated in Outpatients Departments within Whiston and St Helens Hospitals of St Helens and Knowsley NHS Trust.

Consultations were held with relevant target groups and the survey was also open on our website. Healthwatch asked patients to consider what does/doesn't work well and what improvements could be made.

Feedback revealed that people were generally quite happy with the staff who are polite and helpful, but that improvements could be made with regards to lack of interpreters, health professionals having their back to the patient, or looking at their computers, making it difficult to lip-read and see facial expressions, as well as people's names being called out from behind a screen.

Recommendations were made, which included having an ear symbol put on the records of all patients who are deaf/hard of hearing or have a hearing loss; installing display screens in all departments with names of consultant, room and names of patients flashing across the screen and waiting room seating being moved to face the screen.

The Deafness Resource Centre (DRC) contacted Healthwatch St Helens earlier in the year because there were ongoing issues with access to British Sign Language (BSL) interpreters at Whiston Hospital, it was policy for the NHS to arrange this. However sometimes there were appointment cancellations and new

appointments made without the interpreter being re-booked.

A joint letter between Healthwatch St Helens and the DRC was sent to the Chief Executive of the Trust highlighting these concerns. The Deafness Resource Centre provided copies of information posters and the hospital ensured these were issued to all wards with an instruction to contact the Centre directly regarding interpreter needs. Also arrangements were made for the Deafness Resource Centre to provide deaf awareness training to staff on wards and the situation has improved.

Supporting our representative on the Health and Wellbeing Board to be effective

- The Healthwatch St Helens manager briefs the Chair with data or patient experiences before each meeting, where relevant to the agenda being discussed.
- Comments and recommendations are regularly made regarding partners' strategies and progressing actions.
- Healthwatch gathered responses from the public on the draft Mental Health strategy in July and pushed for its ongoing development. For the next draft, we provided a stakeholder analysis to partners of which groups it should be consulted with, elevating its importance.



Special inquiry into unsafe discharge

Healthwatch England hosted this enquiry and St Helens was one of the 101 local Healthwatches across England to participate in this survey.

The target groups that the inquiry wanted to hear from were:

- People with mental health needs
- People who were homeless
- Older people

Emerging themes showed there were difficulties with what happens when someone is discharged from hospital or care units, including lack of co-ordination between services and lack of post-discharge support.

The effects on the groups above were particularly bad and created over 1 million emergency readmissions within 30 days costing the NHS £2.4 billion. This report called for national change to the discharge process, which Healthwatch St Helens continues to campaign for.

A Commissioners View

“As commissioners it is important and essential for us to use the views, experiences and feelings of patients, carers and families across St Helens to fully understand the effectiveness of our services. One example of this is how working with Healthwatch St Helens has helped us understand some of the reasons patients may choose to delay their treatment. This is useful for commissioners when considering how the people that are paid to provide services to local people, such as the hospitals &

community services, are meeting national target waiting times, as laid out in the NHS Constitution.

Often these delays are labelled by the service as “due to patient choice”. As a local commissioning organisation, we feel this is a rather broad label and may mask the meaning behind a multitude of different reasons for why patients are choosing to delay their treatment.

As commissioners, patients, and carers, we understand that it is important there is reasonable notice of appointments given, with the right information, in a clear and understandable manner to enable local people to make the arrangements necessary to attend on the right day and at the right time suitable to their lifestyle, so that they really do have a choice.

Commissioners and those providing health and care services need to fully consider the reasons for delay beyond the label above. We believe only by fully understanding the different needs and experiences of our patients, can we then support quality improvements which help patients access the right care, in the right place and at the right time.”

Impact Stories

Case Study One

Highlighting the need for better communication

Healthwatch St Helens were able to highlight to a local Hospital Trust how sometimes, a lack of communication between medical professionals can lead patients and their families to feel uncertainty around their treatment.

R contacted us to talk about his only son, S, who passed away in 2013 at just 17 years of age. At the time of contacting us, R felt that he was coming to terms with losing his son but he still felt confusion around some things that happened during his son's illness and needed some explanation about how things were handled.

S, aged 16, played lots of sport and was a very fit and active young man, excited to have just started an apprenticeship, when he was diagnosed with a neck sarcoma. He received what his parents feel was excellent care from local hospitals, including Whiston Hospital and Clatterbridge Centre for Oncology, but sadly, despite intensive treatment, lost his battle on 20th April, 2013.

R stressed to Healthwatch that his son received very good care from all the medical professionals involved and his queries were about his need to understand things better.

Through our strong relationship with partners at St Helens & Knowsley Hospital Trust, we put R in touch with Clare Aspinall, the Trust's Patient Experience Manager. Clare worked with her clinical colleagues to address R and his wife's uncertainty, arranging for them to meet with some staff who could answer their questions.

Clare felt that this family's situation highlighted the need for better communication and made a DVD to illustrate the struggle to get clinical teams to communicate effectively both with patients and with each other.

The DVD was shown at a meeting of the Trust's Patient Experience Council where key members of staff started a conversation about how to improve communication throughout the Trust. The film was also shown to the Trust's Board.

Some of the difficulties around communication are a national issue which involves inconsistent communication between Trusts who might hold clinics in different hospitals, but don't necessarily share information about patients with other clinicians who are treating them.

The Trust's Chief Executive, Ann Marr fully supports the drive to keep channels of communication open, to ensure that patients and their families are not left in any confusion about treatment.





Case Study Two

Working together to prevent falls

Healthwatch St Helens were made aware of concerns where staff in care homes had been advised to limit their requests for ambulances in the event of someone falling. There was a fear that homes might be black-listed or fined for unnecessary call outs.

Healthwatch St Helens contacted various partners and were assured that the Falls Prevention Team and The Care Home Support Team were working closely to establish a post falls protocol aimed to keep residents safe. In the meantime it was recommended that care homes follow their own guidance/policies and procedures in the event of a resident falling and seek advice from the Care Homes Service as required.

Copies of the St Helens Care Homes Service leaflet were refreshed which set out the main aims of the service, how it works and who is eligible for the service.



Case Study Three

Helping to restore faith in a GP practice

H contacted us with concerns about getting her medication on time. She had recently transferred to a new GP practice because of previous problems getting all of her medication when requested and was having the same issue with the new practice.

She was also unhappy with the reception staff at her practice and felt that they didn't understand the implications of not getting her prescription right.

We supported H to arrange and attend a meeting with the Practice Manager.



At the meeting she was able to talk about how much stress she experienced if her prescriptions are not ready or incomplete when she goes to collect them, as well as accepting that sometimes she doesn't give enough notice to get her prescriptions by a certain time. The Practice Manager was keen to rectify issues with the reception staff who weren't always as sympathetic as they could be.

H has not had any problems with her repeat prescriptions since the meeting and both parties learnt from the experience.

Our plans for 2015/16

Opportunities and challenges for the future

Our top 3 priorities for work on health and social care issues in 2015/16 are:

- Good Quality GP Services
- End of Life Care
- Preventing Mental Ill Health

Good Quality GP Services:

In 2014, more than half of the people we spoke to said that good quality GP services was their top priority.

Healthwatch St. Helens has seen a recent noticeable increase in experiences being shared with us around GP Services.

In order to put a more detailed picture together of public opinion, we have designed a survey to find out what “good quality” means to people.

The results of this survey will be shared with GP practices and stakeholders to inform how services can be improved in the future.

End of Life Care:

Healthwatch has got involved in as many activities as possible to encourage services to work together and assist local people to prepare for end of life situations. This includes:

- Reps involved with the End of Life steering group at Whiston Hospital, the Cheshire and Merseyside strategic clinical network for Palliative Care and annual Dying Matters events for over 3 years.

- Input into development work around the new Care and Communication Record (replacing former pathways)

Preventing Mental Ill health:

A new mental health strategic framework is to be consulted on during the summer of 2015 and action plans are now beginning to be rolled out.

Healthwatch’s role will be to make sure service users and carers have a say in the delivery of the framework and also assist with awareness-raising work around some aspects of the strategy, e.g.

- training in Suicide Prevention awareness
- support initiatives that reduce the stigma around mental health and mental illness by helping with annual Time to Talk initiatives
- highlight cases where people have a poor experience of treatment services
- help partners ensure crisis services and arrangements work better for the patient and carers



Achievements

- Persuaded St. Helens Council and NHS Partners to purchase new sturdy slippers to give away to the public at a 'Falls Prevention' event.
- Highlighted concerns re. lack of joined up working re. End of Life processes across the health & social care family.
- Challenged the local Hospital Trust around British Sign Language interpretation and suggested improvements needed for deaf patients.
- Fed back on local Adult Services plans e.g. Better Care Fund, Care Act information, etc.
- Provided 'plain English' amendments to Adult Services Local Account for the 3rd year running.
- Campaigned for more information sharing around local care homes and achieved agreement on a summary information document in order to inform Healthwatch E&V team and reduce duplication.
- Worked with partners to promote fuel poverty awareness to older residents and churches in one area with elevated 'winter deaths' and helped distribute 120 winter warmth packs.
- Hosted a conference to which over 130 attended from across the borough and speakers presented case studies about how to ensure Personalisation happens for local people.

We never miss an opportunity!

- Whilst listening to 'The Lancashire Hotpots' in Church Square one Saturday, staff asked spectators about their experiences of GP services locally. One member of the public joined Healthwatch on the spot and helped out with a consultation about healthy weight management services the following week!
- When getting a taxi home after a night out, a staff member asked the driver's views on local health services, which led to information sharing information about how to safeguard children and highlighting how Healthwatch could receive information anonymously.
- While waiting to be served in a local bank, a staff member met someone working in St. Helens who had a complaint about a hospital in another area, so Healthwatch St Helens passed on her details.
- Working with NHS England and St. Helens CCG to understand the involvement of local groups working with people from protected characteristic groups in making decisions about changes and improvements to services, promoting Healthwatch on the way! As a result we will be able to reach and help more people from Black and Minority Ethnic (BME) communities and provide information about what support is available in St Helens around health.
- While in a hospital recovery ward after surgery, a team member told the lady in the next bed that she should contact her local Healthwatch about a previous bad experience. This resulted in her getting support to make a complaint.



Our governance and decision-making

Our Management Committee

Alan Griffiths

Brenda Smith

Chris Coffey

Elaine Cotterill

Francis Williams

Jane Dearden

Joan Young

Jonathan Griffith

Joyce Storton

Sam Omar

Tom Hughes (Chair)

Wendy Burton

How we involve lay people and volunteers

There are 4 tiers of Healthwatch membership and people can choose the most appropriate level for them. They are:

- **Informed members** - who receive regular information regarding health and social care issues and services and may get involved as and when they wish to.
- **Involved member** - who attend events, coffee mornings and meetings etc., depending on their area of interest. Participation is ad hoc and doesn't involve any regular time commitment.
- **Active members** - who attend events and meetings etc., depending on their area of interest and knowledge base on a fairly regular basis. They might be asked to represent views of Healthwatch members and the public at meetings or may be part of the Enter and View team.
- **Management Committee Members** - expected to commit to a minimum of 5 hours per week which will vary from week to week, depending on attendance at monthly meetings, essential external meetings requiring Healthwatch representation, and other involvement such as Enter & View visits, training sessions and interview panels.



Leadership of Healthwatch St Helens

Our management committee are responsible to the Chair & Board of Directors. They play a key role in setting the strategic plan and direction of Healthwatch St Helens, in line with the Department of Health and Healthwatch England requirements and agreed objectives, through good governance and effective strategic planning and uphold the good name of Healthwatch St Helens and the principles for which it stands.

It is up to the management committee of Healthwatch St Helens to decide what work it does and when and how it does it, and focuses on achieving outcomes via an action plan. The management committee meetings are held monthly, where decisions are made. Monthly informal sessions are also held where key issues are discussed in more detail.

Friends of Healthwatch St Helens

Friends of Healthwatch St Helens are volunteers who can't commit to being on the Management Committee but are willing to, or already do help to spread the word and raise the profile of Healthwatch St Helens.

Being a 'Friend' means that dedicated volunteers can play an important role in the work we do, regardless of how much or how little time they can spare.

They are the ears and voice of their local community; they seek out views and opinions, especially around work plan priorities and task group topics, and feed information back to the Management Committee and Support Team. They help us to reach more people by taking case studies from local contacts that are reluctant to talk to a stranger.

Some of our Friends have been involved in task groups, PLACE (Patient led assessment of the care environment) and Enter & View.



Financial information

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities	152,512	
Additional income	0	
Total income	152,512	

EXPENDITURE		
Office costs	38,020	
Staffing costs	95,801	
Direct delivery costs	14,349	
Total expenditure	148,170	
Balance brought forward	4,342	



Contact us

Get in touch

Address: Healthwatch St Helens, Tontine House, 24 Church Street, St Helens, WA10 1BD

Phone number: 0300 111 0007

Email: info@healthwatchsthelens.co.uk

Website URL: www.healthwatchsthelens.co.uk

Staff

Emma Rodriguez Dos Santos - Support manager

Jayne Parkinson - Engagement officer

Janet Roberts - Outreach officer

Claire Jones - Communications officer

Debbie East - Administration and Volunteers Support Officer

Partners

- St Helens District Citizens Advice Bureau, Millennium Centre, Corporation Street, St Helens, WA10 1HJ - Tel: 01744 732270
- St Helens Independent Living Services, Shopmobility St Helens, King Street, Chalon Way Multi Storey, Chalon Way West, St Helens, WA10 1DF - Tel: 01744 613388
- Healthwatch Independent Complaints Advocacy, The Gateway Conference Centre, 71 London Road, Liverpool, L3 8HY - Tel: 0151 298 3267

Healthwatch St Helens Limited

Company No. 8567187

Healthwatch St Helens is a Company Limited by Guarantee and part of the Healthwatch network (and part of Healthwatch England)

We will be making this annual report publicly available by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Groups, Overview and Scrutiny Committees, 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.

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Using the Healthwatch branding

The Healthwatch St Helens logo can be seen all around the borough. Our membership forms, comment cards and 'Have your say' leaflets can be found in libraries, health centres, community centres and other places around St Helens.



Our Healthwatch St Helens pens and stress-ball keyrings are a favourite at information stands.