

Healthwatch Cheshire West





Contents

| | |
|--|----|
| Contents | 3 |
| Note from the Chair, Brendan Doyle..... | 4 |
| Note from Jonathan Taylor, Chief Executive Officer | 5 |
| About Healthwatch | 6 |
| Engaging with people who use health and social care services..... | 8 |
| Involving Local People in Monitoring Services | 12 |
| Providing information and signposting for people who use health and social care services | 15 |
| Influencing decision makers with evidence from local people | 17 |
| Impact Stories | 21 |
| Our plans for 2015/16 | 24 |
| Our governance and decision-making..... | 25 |
| Financial information | 27 |
| Contact us..... | 28 |



Note from the Chair, Brendan Doyle



You said. Together we did!

Healthwatch Cheshire West has gone from strength to strength in 2014/15 as we responded to the feedback that you provided us with.

We acknowledged in last year's Annual Report that developing robust and credible relationships with those who commission and provide services locally is key in getting the voice of local people heard.

Our success in developing and maintaining these relationships has enabled us to use the information that you provide us with about local services to act as a critical friend and effect positive change.

Last year you told us there were gaps in service provision for local people with experience of a mental health condition. We listened, and have worked with a range of local mental health stakeholders to develop two Citizens' Panels which are now working alongside commissioners to ensure that the voice of service users and their families are heard at all stages of the commissioning cycle.

Many of you also contacted us to tell us about issues relating to your access to and experience of General Practice. We used your feedback to develop a project to capture the voice of local people in relation to the key issues you identified. We were blown away by the response with over 1000 of you responding to our questionnaire and many more of you

attending a series of workshops to share your views. We have collated all of your responses in a report which was published at the end of March and are talking to commissioners and providers about the issues you raised.

We have also tried very hard this year to capture the voice of children, young people and their families in our work, because you told us that this was a key priority. On the 3rd December 2014 (the International Day of Disabled People) we launched a project to identify what the key issues are for disabled children and young people across health, education and care. We have had some really interesting feedback, which we have shared real-time with commissioners. This incredibly valuable work will continue in 2015/16 as we monitor the impact of the changes brought in by the Care Act.

Looking forward, there are many challenges ahead and lots of exciting new opportunities for us to work alongside local people to create a health and care system that really meets our needs. If you are interested in improving health and social care services in Cheshire West and Chester we want to hear from you.

Your voice counts.



Note from Jonathan Taylor, Chief Executive Officer



I said in last year's Annual Report that a key challenge for Healthwatch Cheshire West was to continue to strive to make ourselves more visible and to raise our profile so that you, our customers, know that we are here, know what we do and know how to find us.

We can't be an independent voice for the people of

Cheshire West if we don't talk to you and work with you in your communities. There has been a great deal of activity to address this in 2014/15, a year that has seen Healthwatch Cheshire West enjoy more than 5000 contacts with local people. However, we mustn't rest on our laurels and will continue to prioritise engagement with the diverse communities of Cheshire West in 2015/16.

Perhaps my proudest moment of the last 12 months was when our Authorised Representatives for Enter and View were awarded an Adult Safeguarding Award in the category 'best statutory team', recognition of the significant contribution that our volunteers make to keeping some of our most vulnerable people safe.

Healthwatch Cheshire West relies heavily on volunteers to deliver our activities and I would like to take this opportunity to extend my personal thanks to each and every one of you. The Safeguarding Award is just one example of the brilliant work that you carry out and is testament to your unwavering commitment that enables us to be a success.

There have been many other highlights in 2014/15 and I was also particularly proud

of the work carried out by the staff team in relation to Healthwatch England's Special Inquiry into unsafe discharge. I am starting to see the impact of the stories and experiences that we captured from older people and people with experience of a mental health condition in shaping improvements in service provision.

In order to ensure that Healthwatch Cheshire West continues to improve its service to local people the Executive Management Board commissioned an independent reflective audit in January 2015. As part of this process the organisations we worked with spoke to a range of stakeholders including local people, our volunteers, representatives from the voluntary sector and our statutory partners.

We didn't have to do this, but as an organisation we are committed to continual improvement. We wanted to understand how well our stakeholders think we have performed in our first two years and most importantly, how you think we can improve moving forward. We will be using this insight to develop an action plan to help us meet our aim of being the best local Healthwatch around!

I hope you enjoy the Annual Report.



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 grounded in your experience. We are the only body looking solely at people's experience across all health and social care.

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

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

The statutory activities of local Healthwatch:

- Promoting and supporting the involvement of local people in the commissioning, 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 and ought to be improved.
- Obtaining the views of local people regarding 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 or ought to be improved.
- Providing advice and information about access to local care services so that informed choices can be made
- Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.
- Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC)
- Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

The right to essential services

The right to equal access to services

The right to safe, dignified and quality service

The right to information and education

Our vision

‘An independent voice for the people of Cheshire West helping to shape and improve local health and social care services.’

Our Principles

- Act as a strong, local consumer voice, making a difference to health and social care provision for the citizens of Cheshire West
- Provide a platform from which diverse and seldom heard voices from across Cheshire West can be heard
- Be a network of networks - using networking and public engagement to gather meaningful and robust local evidence and intelligence
- Build the capacity and utilise the existing expertise of user-led organisations and voluntary, community and faith sector in Cheshire West
- Set the standard for excellent public engagement and provide innovative ways to gather the lived experience of citizens of Cheshire West
- Ensure that all citizens of Cheshire West have timely and good quality information and advice
- Work hard to be a respected and credible organisation, working in partnership across all sectors of health and social care
- Be capable of influencing key decision making in health and social care and

be unafraid to challenge service providers and commissioners.

Our Priorities in 2014/15



In addition to delivering against our statutory activities we have also carried out specific project work based on the priorities that you shared with us:

- **Access to and experience of General Practice**
- **Accident and Emergency services**
- **Mental Health and Wellbeing**
- **Services for Children and Young People**
- **Care at Home (also known as domiciliary care)**
- **Tackling Loneliness and Social Isolation.**





Engaging with people who use health and social care services

Understanding people's experiences

We can't be an independent voice for the people of Cheshire West if we don't talk to you and work with you in your communities. A key priority in 2014/15 has therefore been, to meet you, tell you about our role and to listen to, and understand and gather your views and experiences of accessing local health and social care services.

We have worked hard to have a presence across the local area through regular outreach work at venues across the borough, including GP surgeries, the Countess of Chester Hospital and drop-ins at community venues in the towns and villages of Cheshire West and Chester.



Engagement at Jubilee Hall, Malpas

As well as this regular outreach and engagement work we have also held our own large scale events such as the hugely popular 'Family Health Days' which took place in the summer of 2014 at the newly opened facility at Grosvenor Park in Chester and Marbury Country Park in Northwich.



Our Family Health Day at Marbury

In addition to meeting us face to face there are a number of other ways local people can access Healthwatch Cheshire West such as via our telephone advice line, email and through the completion of a submission form on our website. We have also developed freepost comment cards which are displayed around the community in order that local people can submit their comments about local services.

The result is that Healthwatch Cheshire West has engaged with 5036 local people at 247 meetings and events during the 2014/15 financial year and has provided information and advice in relation to 1124 comments received about local services.

We have shared these anonymous comments as commissioning intelligence with the people who commission and provide those services, to ensure your voice is heard.

Engaging with seldom heard groups

We are acutely aware that some groups of local people can often get overlooked; and that some have a stronger voice than others. Some people, who are not necessarily vulnerable are not always heard or listened to by those who commission and provide services.

As a result of robust partnerships with the voluntary sector and the far reaching networks that we have developed, Healthwatch Cheshire West is in a strong position to connect with groups of local people who don't always have a voice.

In recognition of the need to provide an independent voice for all individuals, groups and communities in our area we have planned and carried out specific activities and attended meetings throughout the year.

Children, young people and their families

We regularly attend meetings held by the Parent Carer Forum and the local branch of the National Autistic Society to engage with their members and we continue to link with partner organisations such as Youth Federation and Cheshire Centre for Independent Living (CCIL) to support engagement with children, young people and their families.



Youth Federation at our Family Health Day in Chester

In 2014/15 we worked in partnership with the Parent Carer Forum to deliver a workshop designed to gather the views of their members in relation to perceived gaps in service provision for disabled children, young people and their families across education, health and care. We also held our own workshop in Chester and worked with Cheshire Centre for Independent Living's Buzz Youth Activity Group to gather views from disabled children and young people during school holidays.



CCIL's Buzz Youth Activity Group artwork

People over the age of 65

We enjoy very strong engagement with people over the age of 65 as a result of our links with partner organisation Age UK Cheshire and strong relationships with the Older People's Network and local charity Vintage Blacon.

The volunteers of Healthwatch Cheshire West also regularly engage with people over the age of 65 via Enter and View activity carried out in local residential care homes and nursing homes.

Two workshops took place in July 2014 to gather the views of older people who had experienced unsafe discharge from local hospitals, care homes and secure mental health settings as part of Healthwatch England's Special Inquiry.

Local disabled people

We benefit from excellent links with our partner organisations Cheshire Centre for Independent Living and DIAL West Cheshire who in 2014/15 have supported us to engage with disabled people with a range of impairments as part of our GP Access Project.

We are also very grateful to Deafness Support Network who supported us to gather the views of 48 local deaf and hearing-impaired people regarding issues with their access to and experience of General Practice.



Dee Sign Choir at our Family Health Day in Chester

Healthwatch Cheshire West is working towards being user-led in its make up and disabled people are well represented throughout the structures of the organisation. We always strive to ensure that our meetings, events and outreach activity are carried out in accessible venues and provide reasonable adjustments such as interpreters for our deaf and hearing-impaired volunteers and members of the public.

Recently Jonathan has become a member of the Learning Disability Partnership Board and is chairing a sub-committee of the Board that is leading on the development of friendships and relationships services for adults with learning disabilities.

People with experience of mental health

Mental health and wellbeing is a key priority for Healthwatch Cheshire West and has accounted for a large part of our activity in 2014/15.

We have been able to link with mental health service users and support groups via partner organisations DIAL West Cheshire and Chester Voluntary Action, the latter hosting the Mental Health Alliance. These links have enabled us to capture the views of mental health service users regarding issues with their access to and experience of General Practice.

In July 2014 two workshops took place to gather the views of people with experience of a mental health condition in relation to unsafe discharge from local hospitals, care homes and secure mental health settings as part of Healthwatch England's Special Inquiry.

In September 2014 we ran two events to launch our Mental Health Citizens' Panel. During these events we talked to participants about the issues facing local people with experience of a mental health condition, and how a Citizens' Panel might drive the work of Healthwatch Cheshire West in tackling mental health as a work plan priority.

Two Citizens' Panels are now up and running and have brought together local people who have an interest in mental health to review the intelligence gathered by Healthwatch Cheshire West, and to work alongside local commissioners and providers to ensure that the voice of service users and their families are heard at all stages of the commissioning cycle.

People with experience of homelessness

In 2014/15 we have worked with Chester Aid to the Homeless, a registered charity that provides accommodation, day centre services and an education and learning centre to homeless people.

With support from Chester Voluntary Action we engaged with seven service users from Chester Aid to the Homeless via a workshop to gather their views regarding issues with their access to and experience of General Practice. A further twelve service users, some of whom had difficulty reading and writing, were supported to complete the patients' questionnaire to ensure that their views could be captured and shared with commissioners and providers.

Black Minority Ethnic and Faith Groups

In 2014/15 we have engaged with black, minority ethnic (BME) and faith groups via our links with Cheshire Halton and Warrington Race and Equality Centre (CHAWREC) and the West Cheshire Interfaith Forum.

With the support of Cheshire Halton and Warrington Race and Equality Centre a focus group was held on the 20th January for black and minority ethnic people interested in sharing views regarding issues with their access to and experience of General Practice. The workshop was attended by 15 people from a variety of backgrounds in terms of age, gender, ethnicity and faith.

At the workshop there were people of Pakistani, Bangladeshi, Indian and Chinese origin and from different faith backgrounds including Hindu and Islam.



CHAWREC Consultation with BME group

People who live out of area

We have taken a number of measures in 2014/15 to engage with people volunteering, working or accessing services in Cheshire West and Chester but who do not live in the borough.

In January 2015 Healthwatch Cheshire West hosted a meeting between local Healthwatch organisations on the English/Welsh border, and North Wales Community Health Council.

As a result of this meeting a Memorandum of Understanding (MOU) was developed to describe cross border working arrangements between Local Healthwatch organisations in England and Community Health Councils (CHC) in Wales. It recognises the respective roles of each organisation and their shared goals of empowering people and promoting and protecting high standards of care for patients accessing services across the English/Welsh borders. The MOU is intended to provide a helpful and positive framework for working across national borders as NHS England and NHS Wales increasingly develop a cross-border approach to specialist services.



Involving Local People in Monitoring Services

Enter & View

Healthwatch Cheshire West has the power to 'Enter and View' some types of health and care services and report on the nature, quality and experience of care provided.

We endeavour at all times to work constructively and in partnership with local commissioners, providers and regulators of health and care, to avoid duplication and ensure that our Enter and View activity adds value to the wider monitoring and scrutiny of services.

Enter and View activity carried out by Healthwatch Cheshire West in 2014/15 has been discharged as part of our statutory role and with the rationale of:

- Promoting and supporting the involvement of local people in the 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 and ought to be improved
- Obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly making these views known
- Making reports and recommendations about how local care services could or ought to be improved and directing reports to commissioners and providers of care services, and people responsible for managing or scrutinising local care services

- Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.

When planning our Enter and View activity Healthwatch Cheshire West also considers:

- Concerns about services expressed to us by members of the public
- Work plan priorities informed by community views
- Local intelligence and multi-agency safeguarding and risk data
- A focus on issues of local and national resonance e.g. missed A&E targets/ambulance response time
- The need to revisit specific services to monitor the implementation of the recommendations and suggestions for service improvement made by our Authorised Representatives.

Authorised Representatives

Our Authorised Representatives are volunteers and are subject to a Disclosure and Barring Service (DBS) check. They must also receive Enter and View and Safeguarding training.

The gift of our Authorised Representatives is to observe the nature, quality and experience of care provided in a range of services, through the lens of the people accessing them.

The following individuals, as authorised by Healthwatch Cheshire West, have carried out Enter and View Activity in 2014/15:

| | |
|---------------------------|-------------------------|
| Chris Banfi | Richard Berry |
| Joanna Brookes | Pauline English |
| Andrew Firman | Pamela Fox |
| Neil Garbett | Caroline Jones |
| Lynda Kenny | Jo Lewis |
| Pat Lott | Sue Masterman |
| Margaret McDermott | Alan Murphy |
| Val Pasley | Denise Pritchard |
| Betty Shepherd | Rhiannon Wilson |
| Margaret Yorke | Jenny Young. |

Enter and View Activity in 2014/15

In 2014/15 Authorised Representatives undertook a total of 46 Enter and View visits across a range of services. The table below details the split of activity across different establishments providing care to residents of Cheshire West and Chester:

| Type of establishment | Number of visits |
|---|------------------|
| NHS Hospitals | 15 |
| Nursing Homes and Residential Care | 29 |
| Specialist Centres including Adult Day Care | 2 |

All reports are published on our website <http://www.healthwatchcwac.org.uk/enter-and-view>.

Impact and Outcomes of Enter and View

As well as having a clear rationale for undertaking Enter and View activity, it is also vital that we monitor the impact of this important function and measure what

has changed as a result of the recommendations and suggestions for service improvement made by our Authorised Representatives.

All Enter and View reports are routinely sent to the following key stakeholders to ensure intelligence is shared and that any overarching issues and trends can be picked up and acted on by those who commission, provide and regulate services:

- Care Quality Commission
- Cheshire West and Chester Council
- Local Safeguarding Adults Board
- The commissioner of the service
- The provider of the service
- Healthwatch England.

Whilst we have not been required to advise the Care Quality Commission (CQC) to undertake any special reviews or investigations in 2014/15, we are aware of at least one responsive inspection carried out by local CQC officers following concerns highlighted in one of our Enter and View reports.

What follows is a summary of the headline impact and outcomes of Enter and View activity carried out in 2014/15.

Nursing and Care Homes

- Increased monitoring of hydration and feeding in a local care home
- Improvements made to activity programmes to improve wellbeing of residents in a number of local care homes
- Agreed improvements by owners to buildings and grounds
- Improved decoration of premises
- Challenge made to local care homes to ensure that the views of relatives/carers are heard at all times
- Arrangements made for improved use of storage facilities at a number of local care homes

- Improvements to communication between staff and management at a local care home
- Improved quality of information provided to residents and families following a challenge made regarding accuracy of information on the websites of local care homes.

Local Hospitals

- Implementation of improved signage
- Improvements made to accessible parking arrangements for disabled patients and visitors
- Better deployment of volunteer staff within a hospital
- Regular involvement of Healthwatch Cheshire West staff and volunteers in the joint planning of patient engagement activities and monitoring patient experience
- Improvements made to waiting areas with new seating providing patients and visitors with greater comfort to improve experience
- Improvements made to patient information displayed on websites
- Escalation of concerns to senior nursing team.

Specialist Centres

- Improvements made to premises and grounds
- Improvements made to the range of activities provided for service users
- Signposting to fundraising opportunities and support in securing charitable donation to service.

Patient Led Assessment of the Care Environment - PLACE

In addition to Enter and View activity, Authorised Representatives have also been involved in Patient Led Assessments of the Care Environment or 'PLACE visits' in 2014/15.

This detailed monitoring work has involved visits to a number of facilities including The Countess of Chester Hospital, Ellesmere Port Hospital, Leighton Hospital and Elmhurst Intermediate Care Centre. PLACE assessments focus on environmental factors, the way in which the environment supports patient privacy and dignity, the provision of nutrition, cleanliness and general building maintenance.

Developing Enter and View

In order to continually improve our Enter and View function Healthwatch Cheshire West has consulted and engaged with our Authorised Representatives and a range of stakeholders in 2014/15 to sharpen and develop procedures and improve the quality of our reports to ensure they offer the maximum value.

This has led to:

- The inclusion of a provider feedback section on final reports
- Improvements in the speed of publication of reports
- Restructuring the way Enter and View information is displayed on our website
- Making mostly 'unannounced' visits to services
- Improved planning and information sharing with partners.

Adult Safeguarding Award



Healthwatch Cheshire West Enter and View Team wins a prestigious Adult Safeguarding Award, November 2014



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

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

The signposting service is here to help you find a service, make a choice about which service to access, or receive help if you need to raise a concern or make a complaint.

We have worked hard in 2014/15 to develop our signposting service to ensure that local people have access to the best quality information and advice; whether face to face, by telephone, email or via our popular website. In February 2015 we brought in an external consultant to provide training and support to the whole staff team, to enable us to provide the best possible support to local people via the signposting service.

In 2014/15 Healthwatch Cheshire West has provided over 1000 local people with information about local services and has helped them to navigate the health and social care system.

Much of the help that we have provided you with has been face to face at the many engagement and outreach events organised by Healthwatch Cheshire West and our partners. However, many of you have also contacted us via our telephone advice line or used an online submission

form to ask for information or tell us about an issue or concern.

Case Study 1 Signposting via Healthwatch Cheshire West website

A woman with a long term medical condition and who was new to the Cheshire West and Chester area used an online submission form on the Healthwatch Cheshire West website to contact the staff team for information and support. The woman was keen to register with a local GP practice that had specific expertise in pain management but was not aware of how to go about this.

A member of the Healthwatch staff team was able to contact NHS West Cheshire Clinical Commissioning Group on behalf of the woman to discuss the situation. We were directed to an appropriate local GP Practice and arranged for registration details to be sent direct to the woman.

The woman was able to make a successful registration without further support from Healthwatch Cheshire West and wrote back to us to say that she had managed to get the service she required and to thank us for the help we had given.



Case Study 2 Signposting via telephone

A man contacted the Healthwatch Cheshire West staff team with some concerns about the care and support being received by his wife. She had recently been discharged from hospital to her own home, but within a few days had to be moved into residential nursing care for more intensive rehabilitation.

The man, himself elderly, was distressed, upset and confused about the situation that he and his wife found themselves in. During the course of the telephone call it became clear that as well as information, the man was himself in need of advice and support.

The staff team were able to provide information to the man to help him find out more about his wife's condition and care and suggest a number of immediate actions that could be taken to support himself and his wife whilst she remained in residential nursing care. In the two weeks following the initial contact the staff team supported the man through written correspondence, telephone conversations and contact with partner agencies. The man was also directed to the support he needed from Cheshire West and Chester Council, and soon after his wife was able to return home with an appropriate care package in place. He contacted the team to thank us for our help.

The learning gained by Healthwatch Cheshire West in supporting the man and his wife was shared with partner organisations who had been involved with the couple including Cheshire West and Chester Council, NHS Vale Royal Clinical Commissioning Group and Mid Cheshire Hospitals NHS Foundation Trust. This shared learning contributed to the development by Mid Cheshire Hospitals

NHS Foundation Trust (the hospital involved in the initial discharge) of improved systems of communication and information provided to relatives and carers at the point of discharge.

Case Study 3 Signposting face to face

Healthwatch Cheshire West carries out regular community engagement and outreach activity across Cheshire West and Chester. This usually involves a member of the staff team and/or a volunteer setting up an information stand at a community venue or in a busy area (like the high street or at a supermarket) and talking to local people about the role of Healthwatch and their experience of local services.

On one occasion whilst hosting an information stand in Chester City Centre, a member of the staff team was approached by a homeless man. The man described the difficulty he was having accessing support in relation to accommodation and day centre services.

The team member directed the man to Chester Aid to the Homeless, a local registered charity that provides accommodation, day centre services and an education and learning centre to homeless people.

The man went directly to speak to Chester Aid to the Homeless and returned to the information stand about an hour later to say that they had offered him support and to thank us for their help.



Influencing decision makers with evidence from local people

Producing reports and making recommendations to effect change

In 2014/15 Healthwatch Cheshire West has published 50 reports, including 46 reports relating to Enter and View activity.

Other reports published by Healthwatch Cheshire West during 2014/15 include:

- 2013/14 Annual Report
- Mental Health Citizens' Panel Launch
- Special Inquiry into Unsafe Discharge
- GP Access Project - Patient Questionnaire Results.

Each report is published on the Healthwatch Cheshire West website and shared electronically with identified stakeholders and key partners. Reports are also presented to key partners and stakeholders at their meetings and committees. In 2014/15 Healthwatch Cheshire West reports have been formally presented to:

- Health and Wellbeing Board
- Health and Wellbeing Scrutiny Committee
- NHS Vale Royal CCG Quality and Performance Committee
- NHS West Cheshire CCG Primary Care Programme Board.

In addition to the formal presentation of Healthwatch Cheshire West reports at partner meetings and committees, the Chief Executive, Chair and staff team also meet with strategic and operational staff

within partner organisations to discuss each report that is produced.

Healthwatch Cheshire West works collaboratively with partner organisations to discuss and agree actions in relation to how the learning from our work will be used and how any recommendations for service improvement will be implemented.

Example of the response of service providers to our recommendations and suggestions for service improvement:

“We have read the report produced by Healthwatch following their latest survey of the Accident and Emergency waiting room and initial registration process and wish to thank them for their observations and recommendations.

We are aware that the waiting room is not large enough to cater for the number of patients; we are currently in the process of exploring the possibility of providing further seats within the limited capacity.

We are going to also explore the suggestion made by Healthwatch to use a volunteer within the waiting room to provide a “Meet and Greet” service, explaining the registration process and providing refreshments.

We have been in touch with the Volunteer Coordinator within the Trust to pilot this service. We are also exploring the use of a further plasma screen within the waiting



room to provide patients with information regarding waiting times, areas within the department, staff on duty etc.

We have also been in touch with the estates department to discuss the possibility of replacing the curtains with a door to provide more privacy and dignity to patients undergoing the streaming process.

The waiting room was initially provided to cater for approximately 40,000 patients per year, we currently are seeing approximately 70,000 plus another 15,000 who are streamed through to the Primary Care Unit. The Trust has agreed to a new Emergency Hub incorporating the out of hour's service, Primary Care Unit and the new Emergency Department and we have now started to have discussions in relation to how we would like the department to function.

Privacy during clinical streaming and registration are very important to us and also providing a comfortable, spacious waiting room. I am sure as a department we would very much welcome the further ideas and input from Healthwatch representatives when we get to this stage”.

Sian Williams, Deputy Director of Nursing, Countess of Chester Hospital NHS Foundation Trust.

Putting local people at the heart of improving services

Healthwatch Cheshire West promotes and supports the involvement of local people in the commissioning, provision and management of local health and social care services in a number of ways.

Healthwatch Cheshire West has engaged with 5036 local people at 247 meetings and events during the 2014/15 financial year and has provided information and advice in relation to 1124 comments

received about local services. We have shared these anonymous comments as commissioning intelligence with the people who plan and provide those services, to ensure that your voice is not only heard, but is central to shaping service improvements.

Healthwatch Cheshire West plays an important role at both a strategic and operational level through our involvement in key interagency meetings, committees and working groups that influence the way that local services are designed and delivered. Volunteers from our Operational Committee attend and represent Healthwatch Cheshire West at a variety of these important meetings to ensure that the voice of local people is at the heart of improving services. Examples include:

- Health and Wellbeing Board
- Interagency Carers Meeting
- Local Safeguarding Adults Board - Learning and Development Sub Group
- Corporate Disability Access Forum
- CCG Governing Body Meetings.

With your help in 2014/15 Healthwatch Cheshire West has set up two Citizens' Panels of local mental health stakeholders in Vale Royal and West Cheshire, bringing together local commissioners and providers of mental health services to work alongside local people with lived experience of mental health.

In the summer of 2014 Healthwatch Cheshire West involved more than 30 older people and people with lived experience of mental health in our work in relation to the Healthwatch England Special Inquiry into unsafe discharge from hospitals, care homes and secure mental health settings. You worked with us during a series of workshops and your views and experiences



were central to the report that was shared with local commissioners and providers.

We worked with you as part of our project looking at access to and experiences of General Practice. Over 1000 of you responded to our patient questionnaire (which was developed using the feedback that you provided in 2013/14), and many more attended a series of workshops to share your views on the issues which affect your access to and experience of General Practice. This work has been shared with primary care leads at NHS England and both NHS West Cheshire and NHS Vale Royal CCGs with key lines of enquiry being explored to improve patient experience.

We are currently working with a number of local people to gather your views regarding gaps in service provision for disabled children and young people (age 0-25) across education, health and care. The information that you continue to provide us with via the completion of an online questionnaire, a series of consultation work shops and planned interviews is being shared real time with commissioners and programme leads from Cheshire West and Chester Council, NHS West Cheshire and NHS Vale Royal CCGs.

Our role on the Health and Wellbeing Board

One of the key ways Healthwatch Cheshire West ensures that local people's views and experiences are heard and listened to by those who plan and provide services is via our important role on the local Health and Wellbeing Board.

Our local Health and Wellbeing Board brings together key partners from the NHS, public health, adult social care and children's services, to plan how best to meet the needs of local people and tackle local inequalities in health and care.

Healthwatch Cheshire West provides the Deputy Chair of the Health and Wellbeing Board through Brendan Doyle - our Operational Committee Chair.

Brendan has been supported to be effective on the board by the Chief Executive and Deputy Chair of the Operational Committee who have provided briefings and helped to put together responses to agenda items.

Agreement was reached with the Health and Wellbeing Board in 2014/15 for Healthwatch Cheshire West to submit an interim and annual report, with the flexibility to bring items to the agenda when the need arises. In 2014/15 we have provided the board with four reports as well as playing an active role in challenging the board and its partners to actively engage with, consult and listen to the voice of local people when making decisions that affect you.

Healthwatch influence on the Health and Wellbeing Board

Being a core member of the Health and Wellbeing Board and therefore, part of system leadership is an important (and new) role for Healthwatch. We have to be assured that the voice of local people is heard early in the decision making process.

Brendan attended an integration summit in June 2014 looking at transformational change in the health and wellbeing system and the effective operation of Health and Wellbeing Boards. The summit brought together professionals from local government, the health service and associated bodies to debate how to improve outcomes and explore system leadership.

At the next meeting of the Cheshire West and Chester Health and Wellbeing Board



Brendan, with support from the Chief Executive, submitted a discussion paper to report the learning from the summit as a catalyst for discussion between partners in relation to the development of the Board and how it can add further value for local people.

A key recommendation from that paper related to the way that the Health and Wellbeing Board, its partners and those who provide services make good on their commitment to transform the way in which health, wellbeing and care services engage with local people. Part of this recommendation was that more opportunities need to be developed for the views, experiences and opinions of local people to be heard and considered early in the decision making process by a proactive Health and Wellbeing Board.

The paper submitted by Healthwatch was well received by board members and contributed to the planning of a Health and Wellbeing Board ‘Away Day’ in January 2015. At this meeting the vision, purpose and priorities of the board were discussed in addition to how the board can operate more effectively and engage with wider partners including local people.

At the ‘Away Day’ Healthwatch were able to bring focus on how the board listens to, involve and engage service users, patients and the wider public in order to influence and inform the broader work of the Health and Wellbeing Board and to support integration and service reconfiguration.

Working with others to improve local services

During 2014/15 Healthwatch Cheshire West has used a collaborative approach with service providers, commissioners and regulators to effect change.

We recognised early on that our influence in improving local services would be strongest if we develop robust and credible relationships with the people that commission, provide and regulate services, and strive to achieve the right balance in our role as a constructive critical friend.

Good relationships based on openness, trust, mutual respect and the confidence to be critical and offer challenge have been developed with key partners across the local health and social care economy, including:

- Cheshire West and Chester Council
- NHS West Cheshire CCG
- NHS Vale Royal CCG
- NHS England Local Area Team
- Care Quality Commission
- Healthwatch England.

Whenever Healthwatch Cheshire West has needed to request information from those who plan and provide services we have always been answered and encouraged to enter into positive dialogue about the issues and concerns we have raised on behalf of local people.

There have been a number of occasions when commissioning colleagues and quality leads from Cheshire West and Chester Council and the local clinical commissioning groups have directly intervened in issues that we have highlighted and have increased scrutiny of particular services when we have raised alerts.

Impact Stories

Case Study One

Special Inquiry into unsafe discharge

In June and July 2014 Healthwatch Cheshire West took part in a Special Inquiry into unsafe discharge, led by Healthwatch England.

We talked to over 30 local people with experience of being discharged from a hospital, care home or secure mental health setting within the past 18 months. We focussed on collecting the views of people with experience of a mental health condition and older people; groups that we know are particularly affected.

In addition to attending a series of four focus groups, a number of you also contributed by sharing comments via telephone, in writing and by completing questionnaires to ensure we captured your experiences of being discharged from health and social care settings.

We asked all participants the same key questions:

1. What happened during your discharge?
2. What happened after your discharge?
3. What worked well, and didn't work well during the discharge process?
4. What could be improved?

The response was fascinating and led to the capture of a large number of comments, patient stories and powerful anecdotes across local services which identified the following key themes:

- Negative experiences of hospital discharge lounges
- Delays in receiving aftercare support
- Lack of rehabilitation support for patients leaving care after a long stay

- Lack of consistency or common approach to discharge
- Need for improved discharge planning
- More information needed for family members/carers post discharge.

Your experiences and comments were shared and discussed widely with local commissioners and providers and they have clearly had an impact:

NHS Vale Royal CCG has used them to help develop a Commissioning for Quality and Innovation (CQUIN) scheme for the providers they commission, including Mid Cheshire Hospitals NHS Foundation Trust and Cheshire and Wirral Partnership NHS Foundation Trust. The CQUIN will encompass all aspects of the discharge process, but will be clearly focussed on improving patient experience.

NHS West Cheshire CCG has also listened and used your opinions and stories to help update their quality schedules (contracts) with the local providers they commission, including Countess of Chester NHS Hospital Foundation Trust and Cheshire and Wirral Partnership NHS Foundation Trust.

The Countess of Chester Hospital Foundation Trust has responded very positively to the findings, and their discharge working group has developed an action plan to respond to the findings of the report.

Case Study Two

Mental Health Citizens' Panel

We received a large number of comments in 2013/14 regarding your experiences of local mental health service provision, and through our priority setting tool, you clearly asked us to focus on mental health in our work.

In response we organised two events in September 2014, in Winsford and in Chester, to share the intelligence we had gathered and to talk to you about your experiences. During these events we discussed the following questions:

- What are your thoughts on local mental health services? What works well? What doesn't work as well?
- What could be done to improve local mental health services?
- What role can Healthwatch play in trying to improve local mental health services?

Together, we decided to pilot an approach of using Citizens' Panels to work within local communities and empower local mental health stakeholders to get involved and shape and drive the work of Healthwatch Cheshire West in relation to mental health.

Underpinning the Citizens' Panels would be the concept of co-production:

"...a way of working whereby citizens and decision makers, or people who use services, family carers and service providers work together to create a decision or service which works for them all. The approach is value driven and built on the principle that those who use a service are best placed to help design it". (Social Institute for Care Excellence.)

Through the Citizens' Panels we have already been able to start a dialogue with local decision makers, who have responded positively and demonstrated a willingness to work with us. By talking to commissioners of local mental health services it has become clear that there are different approaches and plans for providing services in different areas of the borough. We have therefore, set up two Citizens' Panels:

- Vale Royal for residents of Northwich, Winsford and surrounding rural areas
- West Cheshire for residents of Chester, Ellesmere Port, Neston and surrounding rural areas.

The Citizens' Panels are currently working with partners from Cheshire West and Chester Council, NHS Vale Royal and NHS West Cheshire CCG to identify shared priorities and opportunities for collaborative working.

Both Citizens' Panels have already engaged with representatives from Public Health to develop opportunities for the voice of local mental health stakeholders to shape the development of the Mental Health Needs Assessment for Cheshire West and Chester.



Case Study Three

Working with Healthwatch England

During 2014/15 Healthwatch Cheshire West was required to escalate our first local issue with national resonance to Healthwatch England.

There were two parts to the escalation, the first related to the abolition of the Percentage Threshold Scheme (PTS) since 6 April 2014, which had allowed employers to reclaim Statutory Sick Pay (SSP) in certain circumstances.

In our escalation to Healthwatch England, we highlighted the impact on local disabled people employing their own care staff (in their own home) through Direct Payments, whereby they are no longer able to claim back any SSP.

The decision to organise personal care is an individual one which is agreed with a local authority who makes an assessment based on individual needs and agrees a direct payment. That assessment has to take into account the following:

The Care and Support Statutory Guidance issued under the Care Act 2014 sets out that “Where a direct payment recipient is using their payment to employ a personal assistant (PA) or other staff, the local authority should ensure that there are clear plans in place of how needs will be met in the event of the PA being absent, for example due to sickness, maternity or holiday. Local authorities still have a duty to ensure needs are being met, even if the person makes their own arrangements via the direct payment, so contingencies may be needed. Where appropriate, these should be detailed in the care and support plan, or support plan.”

The Chief Executive of Healthwatch England, Katherine Rake raised the issue with Sally Burlington, Head of Programmes at the Local Government Association who advised this is a local issue (not a national one). This is because there is a need to consider issues around sick absence of personal assistants and payment of SSP on a case by case basis with the relevant local authority.

The second part of our escalation focused on the point that people employing their own care staff were not eligible for the new Employment Allowance.

Since we escalated this issue, which was highlighted by Healthwatch England with Department for Work and Pensions (DWP) and Her Majesty’s Revenue and Customs (HMRC), there have been some developments in this area. The Chancellor of the Exchequer announced in the Autumn Statement on 3 December 2014 that there will be an extension of the Employment Allowance to individuals who employ care and support workers from 6 April 2015, which is a great outcome for disabled people both locally and nationally.

The new regulations allow individuals to employ a care and support worker, either for themselves or for another person, and benefit from an annual reduction of up to £2,000 in their Employer National Insurance Contributions liability.





Our plans for 2015/16

Opportunities and challenges for the future

Service change and improvement doesn't happen overnight so we were not surprised that many of the issues and priorities you identified last year remain the same for 2015/16.

We will therefore, continue work in the following areas:

- **General Practice;** we will continue to work with partners to explore the key lines of enquiry identified through our work with you around access to and experience of General Practice
- **Accident and Emergency;** we will continue to monitor your experience of accessing urgent and emergency care, including through regular Enter and View activity at local Emergency Departments
- **Services for Children and Young People;** we will continue to gather your views and experiences regarding gaps in service provision for disabled children and young people (age 0-25) across education, health and care
- **Mental Health;** we will continue, through the Citizens' Panels of local mental health stakeholders, to create opportunities for professionals and decision makers to work alongside you in an equal and reciprocal way, when shaping and improving local mental health services
- **Care at Home;** we will use the feedback you gave us in 2014/15 to monitor the experience of Direct Payment recipients and self-funders who purchase care and support in their own homes.

You have though, also raised some new issues and concerns in areas we haven't yet explored.

The Operational Committee is currently looking in detail at all comments and data relating to these areas to identify targeted work to address the issues and concerns that you raised in relation to:





Our governance and decision-making

Our board

Healthwatch Cheshire West is a Community Interest Company (CIC) made up of a consortium of six well known local voluntary sector organisations, committed to ensuring there is the best possible Healthwatch established in Cheshire West. These diverse and influential local organisations are:

- Age UK Cheshire
- Cheshire Centre for Independent Living (CCIL)
- Cheshire, Halton & Warrington Race & Equality Centre (CHAWREC)
- Chester Voluntary Action
- DIAL West Cheshire
- The Youth Federation.

Executive Management Board

Healthwatch Cheshire West is overseen by an Executive Management Board of seven directors who meet on a quarterly basis to ensure our legal duties are met and that accountable and transparent decisions are made about our finances. The Executive Management Board includes six executive directors who are drawn from the consortium organisations, and one non-executive director (a lay person/volunteer), who is also the Chair of the Operational Committee.

Directors

- Lynne Turnbull, Cheshire Centre for Independent Living
- Shantele Janes, Cheshire, Halton and Warrington Race and Equality Centre
- Carol Berry, Chester Voluntary Action

- Lucy Welsh, Age UK Cheshire
- Keith Roper, DIAL West Cheshire
- Chris Hindley, Youth Federation
- Brendan Doyle, lay Director.

How we involve lay people and volunteers



The Operational Committee meeting in Neston

The volunteer-led Operational Committee is the heartbeat of the organisation and has responsibility for making important decisions about:

- How we carry out our activities
- Which health and social care services we will cover
- Which services to visit
- When we need to request information from those who plan or provide services
- Whether we need to make a report or a recommendation.

The Operational Committee holds its monthly meetings in public in venues across West Cheshire and the minutes of its meetings can be accessed via the Healthwatch Cheshire West website www.healthwatchcwac.org.uk.



Operational Committee Members

- Brendan Doyle, Chair
- Gus Cairns, Deputy Chair
- Elizabeth Bott
- Pat Clare
- Lynne Ewin
- Andrew Firman
- Anthony Groom
- Lynda Hesketh
- George Loughlin
- Rhiannon Wilson
- Margaret Yorke.

The Staff Team

The Healthwatch Cheshire West staff team is led by the Chief Executive, Jonathan Taylor, and includes a full time Finance and Administration Manager, part-time Project Co-ordinator and two part-time Community Engagement Workers.



Jonathan Taylor
Chief Executive
Officer



Emma McKenzie
Administration and
Finance Manager



Matthew Hyndman
Project Co-Ordinator



Neil Garbett
Community
Engagement Worker



Jackie Lewis
Community
Engagement Worker



Come and meet us at CILAD

Cheshire Independent Living Awareness Day or CILAD comes to town for the fourth year running on Friday 28th August 2015!

This year Healthwatch Cheshire West is joining forces with Cheshire Centre for Independent Living to stage this informative and inclusive family fun day.



Friday, 28 August 2015

11am to 2pm

**Moss Farm Leisure Complex
Northwich
CW8 4BG**

Why not come along, meet the team and volunteers, share your views and see what's in store?!



Financial information

The table below provides a summary of our basic financial information for the 2014/15 financial year. We are awaiting a decision from Her Majesty's Revenue and Customs (HMRC) in relation to our Corporation Tax liability.

Any impact of the decision from HMRC will be reflected in the statutory financial accounts for Healthwatch Cheshire West CIC which will be submitted to Companies House later this year and will also be made available on the Healthwatch Cheshire West website.

Our income from Cheshire West and Chester Council for 2015/16 remains the same at £189,385.

| INCOME | | £ |
|---|--|-----------------|
| Funding received from local authority to deliver local Healthwatch statutory activities | | £189,385 |
| Surplus brought forward from 2013/14 | | £35,573 |
| Total | | £224,958 |

| EXPENDITURE | | |
|---------------------------------|--|-----------------|
| Office and administration costs | | £32,000 |
| Staffing and management costs | | £116,000 |
| Direct delivery costs | | £42,583 |
| Total | | £190,583 |
| Surplus carried forward | | £34,375 |



Contact us

Get in touch

 0845 340 2859 or 01606 351134

 info@healthwatchcwac.org.uk

 www.healthwatchcwac.org.uk

 Follow us on [Facebook](#)

 Follow us on [Twitter](#)



Healthwatch Cheshire West
Sension House
Denton Drive
NORTHWICH
CW9 7LU

Status

Community Interest Company

Company Number 7791174

Registered in England

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

© Copyright Healthwatch Cheshire West 2015
