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Note from the Chair

Tony Wilkinson, Chair of the Healthwatch Calderdale Programme Board



In producing this Annual report, the adage "doesn't time fly?" comes to mind. It has been both an interesting and difficult year as we strive to find our position in a complex landscape of patient and public involvement and to earn the respect of our partners.

Our work in 2014-15 has been dominated by the huge amount of publicity and consultation by others, along with our own findings, on the proposed hospital re-configuration in Calderdale. The council-initiated People's Commission has taken a strong lead in this debate and we have contributed to it, adding our own findings and insight into widespread deep concerns about the perceived loss of local A&E services. The final consultation period is still unfolding and we will continue to press for urgent clarity about future plans and acknowledgement of the public's contribution.

As you will see in this report there has been activity in several areas, with the first Enter and View visits taking place alongside surveys and questionnaires involving volunteers and members of the public, and

colleagues in the voluntary sector. We know that people want to see results, however it takes time to see long term outcomes from this sort of work and we look forward to more evidence of how the public has influenced the decision makers and service providers in the coming months.

The Programme Board is keen to promote Healthwatch as widely as possible, and a communications strategy was produced to give clarity and greater co-ordination for staff and board members alike. Advertising of our services has increased and our name will be travelling around the bus routes of Calderdale!



As our representative on the Health and Wellbeing Board I can report more recognition of the value of local Healthwatch, and that collaboration with the council and CCG colleagues has increased. We were pleased to participate in the Kings Fund research into local healthwatch performance, as one of six chosen for closer study. It was reassuring to find that we are not alone in the challenges faced!

Having secured a third year for our contract we are keen to build on new relationships and support from the commissioners, that includes more flexibility in how we reach out to the public and ensure that Healthwatch is widely recognised as a volunteer led, community based champion and able to fulfil its objectives.

As we enter our third year, I hope we can increase the amount of public awareness and input, and representation on the board, but am confident that we have a sound structure to enable us to fulfil our role.

I take this opportunity to thank the Programme Board members for their continuing support and the volunteers and staff team for their commitment and enthusiasm, enabling us to demonstrate that Healthwatch Calderdale has been busy this year.



Summary

In its second year, 2014-15, HWC made significant progress in establishing its presence and profile, gathering feedback and experiences of health and social care services and initiating new pieces of work.

Our engagement with the public in events and outreach activities has enabled us to collect information, stories, experiences, evidence and comments and we have used these to plan our work and identify priorities.

We have undertaken a number of Enter and View visits to health and social care services across Calderdale culminating in detailed reports and evidence of our findings. Task and Finish surveys have also been delivered and have focussed on Future Care Needs, Car Parking facilities at Calderdale Royal Hospital, and issues related to General Practice (GP).

The HWC team have been actively involved in Calderdale Council's Health and Wellbeing Board (HWB), and in joint work with our regional partners in the West Yorkshire Healthwatch Network. Networking

and liaison has equally been productive with our locality and national partners including the Care Quality Commission (CQC), NHS, local providers of health and social care services, voluntary organisations and Calderdale Council.





Introduction

In 2013 Healthwatch England (HWE) was established with responsibility for presenting the collective national public consumer voice for health and social care. An independent, local Healthwatch (LHW) was also established in each local authority across England - hence Healthwatch Calderdale (HWC) covers the Calderdale local authority area.

The aim of Healthwatch is to influence national and local policy and the use of resources to improve health and social care services, by strengthening the voice of the public, service users, their carers and families.

Local Healthwatch has statutory powers which include the right to Enter and View the premises of any health and social care provider other than children's care homes, and it holds a place on Health & Wellbeing Boards.

HWC works with communities throughout the district to gather positive and negative experiences of local services. Using data and direct feedback from the public, it identifies trends to initiate surveys, visits and further analysis.

By working directly with the public and volunteers HWC strengthens the public's ability to campaign and influence the decision makers and ensure that services really do meet local needs.

HWC has its own structure and priorities, is overseen by a Programme Board of volunteers, and has a memorandum of understanding with Voluntary Action Calderdale (VAC), which holds a contract and employs staff, on its behalf. HWC also has its own budget which is used to support activities, projects and tasks groups.





Healthwatch Calderdale prioritises its work by using information, input and data collected from the public. The Programme Board and staff team agree which activities to carry out, whether they are Enter and View, or task groups, surveys or other means of identifying issues.



Activities and Achievements

Enter and View

Following feedback from service users, three visits were carried out in August 2014. Each visit involved a small team of trained volunteers and a staff member, with preparation that included liaising with the service provider, explaining the reason for the visit, and confirming visit details.

Volunteers contributed to the reports, which were approved by the services providers and a small panel of HWC Programme Board members, and then published on the HWC website and sent to the Care Quality Commission (CQC) and Calderdale Metropolitan Borough Council (CMBC).

Bankfield Manor Care Home

This visit was prompted by concerns expressed by a resident's family member about the physical environment of the home. One staff member and two Enter and View authorised representatives took part, and spoke with eleven residents, a visiting family member, a visiting GP, the service manager and owner.



Calderdale Royal Hospital - Medical Assessment Unit

This visit was initiated after a wider Calderdale Royal Hospital CQC Inspection Report that was published in March 2014, regarding improvements having been made to the safety and suitability of premises.

Asquith Hall Care Home

This visit was prompted by a CQC Inspection that took place in January 2014 that raised concerns about abuse and the safeguarding of residents. One staff member and two Enter and View authorised representatives participated, and spoke with ten residents, three visitors (family members), eight members of staff and the service manager.

Full reports on all three visits can be downloaded at:

www.healthwatchcalderdale.co.uk/ enter-view



Future Care Needs Survey

The survey was designed to address issues that related to what people believed their future care needs would be, and to gauge what importance they put on their future care needs by asking what are the most and least important aspects for them in terms of their future care needs. The survey was also geared towards giving public Health and Social Care bodies an insight into peoples' thoughts relating to their future care needs, to help those bodies develop future services.

We received 222 returns from 250 allocated giving us an 88% return rate.

The results showed that people view 'Care at Home', 'Having their Personal Needs Met' and 'Care in the Community' as being most important to their future care needs.

Dignity and Respect in care is paramount to how future care needs should be delivered - the preference being that care is administered by family members and professionally qualified, caring, compassionate staff.

A full version of this report can be downloaded at:

www.healthwatchcalderdale.co.uk/ <u>task-finish-groups</u>

General Practice Survey

As with national trends, Calderdale residents frequently report frustrations and concerns about aspects of the services provided by GP practices and they dominate much of the public's input to Healthwatch. The most common issues raised at outreach sessions and general experience are:

- Difficulty in getting appointments
- Quality and helpfulness of reception staff
- General access to GP services

Our GP survey results from 2013-14 highlighted the above points and as a result HWC has written to seven GP practices in Calderdale.

Surgeries responded positively to our initial contact and communication pathways have remained open, respectful, courteous and positive.

As a result of our GP survey work, HWC undertook two Enter & View visits at one practice.

Calderdale Royal Infirmary Car Parking Survey

In early 2014, HWC received over 150 comments expressing concern about the closure of A&E services at Calderdale Royal Infirmary (CRI). Within this issue there emerged a sub-issue about the ability to park on and around the hospital site.

Healthwatch Calderdale took this issue to Calderdale and **Huddersfield Foundation Trust** (CHFT), requesting permission to carry out a face-to-face survey.

This was approved and in September 2014, 651 surveys were carried out.

The survey feedback was collated into a report that highlighted key findings including car parking capacity and price. The report was presented to the CHFT for their consideration.

As a result of this report, the CHFT put in place a number of plans to improve car parking at the site, including

Working with the highways agency to create more usable parking areas and improving traffic flow around the hospital site

- A review of the FULL/Spaces signage to ensure it gives an accurate reading
- Better signage about car parking charges
- A review of the way in which the Trust utilises the Eureka Park and Ride

MP Letter

In November 2014 HWC responded to a request from the then Halifax MP Linda Riordan for information on HWC's findings regarding the public's thoughts on the possible closure of A&E at Halifax Calderdale Royal Hospital.

The information we provided highlighted that there are concerns amongst Calderdale residents about losing the A&E department, along with disgruntlement about getting access to a GP quickly, noting however, that when access was gained, there was a general satisfaction that clinical treatment when received was of a high standard.

As a result of sending the letter, Linda Riordan highlighted our findings in a parliamentary debate and HWC was noted in the Halifax Evening Courier as having provided the information.



HWC has written to South West Yorkshire Foundation Trust to highlight issues surrounding difficulties in accessing child and adult mental health services and this work will be continued in the following year.

Outpatients Survey

Through our engagement work, some patients had highlighted they were experiencing problems with appointments in outpatient clinics at Calderdale and Huddersfield Foundation Trust (CHFT).

It became clear, that in order to understand more about the service that patients receive, a more in-depth investigation into outpatients experiences was needed. Thus, in partnership with our colleagues at Healthwatch Kirklees, we embarked on a course of action to discover more.

During December 2014, staff and volunteers from both HWC & Healthwatch Kirklees spent time carrying out a survey in the outpatients departments of CHFT. Surveys were also carried out with NHS patients at local private hospitals, including Spire in Elland.

Questions in the survey covered booking appointments, cancellations, waiting times, checking in, patient waiting areas, delays and private hospital appointments.

This piece of work highlighted areas that patients were satisfied with, as well as bringing into focus those areas that needed to improve. This resulted in a report in which its observations and recommendations were shared with CHFT.

Dental Services Survey

Along with other Healthwatch partners in West Yorkshire, HWC undertook a survey to find out how many people have access to a regular dentist and to understand their experiences of looking for an NHS dentist.

We were particularly interested in finding out why many patients use the emergency Unplanned Dental Care services and what their experiences of these were. We visited dental waiting rooms and asked patients a set of standard questions. The survey was designed to be a rapid, short piece of work that we could feed back to NHS England and that could be used as evidence to help procure a new service.



Outreach and Community Engagement

The aim of our outreach work is to engage with the public, to ensure that their voice is heard in relation to any issues they have regarding health and Social care service provision.

We enter the information we have gathered into our database, where it is collated, and from which we can decipher trends/themes that highlight where appropriate action can be taken. This information can for example, instigate an Enter & View visit. We can then write to any service provider whether it's at a hospital, GP's, dentists, or a care home - residential and nonresidential.

HWC runs an Information & Feedback Point at Calderdale College encouraging young people to become involved in HWC and to gather specific feedback on issues pertinent to them. Discussions are being held to try to set up College specific Healthwatch Ambassadors to champion the Healthwatch message with interest coming especially from Health and Social Care students.



HWC ran Information & Feedback Stands at over 20 different locations across Calderdale.







Partnerships and Representation



Healthwatch Calderdale works in partnership with a number of key organisations on a local, regional and national level.



Partnerships and Representation

HWC Chair Tony Wilkinson regularly attends Health and Wellbeing Board and development meetings. Programme Board members discuss the agenda items in advance to support the representative's input at the meeting. A formal presentation was made to the Health and Wellbeing Board in January 2015 outlining HW's many activities and breadth of interest.

This has raised the profile of HWC at a strategic level and led to increased dialogue with commissioners and council members and officers, and an invitation to join a task group including the CCG and council to plan public consultations in the future.

HWC has also made presentations to the People's Commission, attended council Scrutiny Committee meetings and represented Healthwatch Calderdale at regional and national events.

The Programme Board was also invited to send a representative to the Strategic Resilience Group (NHS/LA Winter pressures) and the Planned and Urgent Care Boards.







Promotion is an integral part of the work of Healthwatch Calderdale. With support from local volunteers to help spread the word, HWC utilises every possible opportunity to promote its work to members of the public.



Promotion and Public Involvement

Promotion



HWC produces a bimonthly magazine called *The Calderdale Voice*. Each issue includes updates from HWC's activities, local health and social care projects and national initiatives. The magazine is sent to all HWC members and is a staple at our community engagement activities.

During 2014/15, HWC has launched a number of marketing campaigns to increase its profile. This has included an awareness advert on the sides of local buses and a radio advert played at all Calderdale Council gyms.

Wherever possible, HWC utilises local print press to publicise our work. For example, in October 2014, an advert for our Enter and View recruitment was including in all four local newspapers and resulted in increased interest for the volunteering role.

Once a month, HWC presents a breakfast show on local radio station Phoenix FM. The show is used as a signposting tool and promotes local health and social care services and initiatives.

HWC also works in partnership with Healthcare Publications to develop a Health and Social Care directory. The Directory provides local residents with information and contact details for a range of Calderdale Health & Social Care services including GP Surgeries and Residential Care.



Public Involvement

Local people are at the heart of Healthwatch Calderdale, participating as volunteers in the following areas:

- Members of our Programme Board
- Members of trained Enter and View teams
- Delivering face to face surveys
- Promoting HWC at community engagement activities
- Providing insight, experience and advice as service users and members of other networks and organisations

The Programme Board comprises people from different backgrounds and experiences, who are endorsed by the wider membership of Healthwatch; currently, 179 people who have signed up to support the organisation.



HWC volunteers have helped collect over 1,500 comments about local Health & Social Care services from Calderdale residents.







Voluntary Action Calderdale holds a contract for HWC with Calderdale Council, and during 2014/15 successfully secured a third year's operating costs of £120k



Governance

The Programme Board

A Programme Board was established at the outset to ensure that Healthwatch is driven by the public and not by VAC itself. VAC employs a small team to support the Programme Board. The Board is an advisory body rather than a fully independent board with management responsibilities. The staff provides intelligence gathered from outreach work and other sources as described, and this which is used by the Board to prioritise the next phase of work, in agreement with the staff team.

During the year, there were changes to composition of the Board. At one point, Board members reduced from twelve to eight. However, two new members joined in August 2014 and another rejoined after a temporary absence. Members aim to build up the number again in 2015/16.

At 31 March 2015 members were based in the local Age UK; the Learning Disability Partnership; West Central Halifax; Upper Valley; Halifax and a local enterprise centre; all with relevant expertise in those areas and also pharmaceuticals, NHS policy, nursing, BME communities, and academic research.

The Chair is selected annually from within the group and Tony Wilkinson took the role in July 2014.

On a day to day basis the Chair liaises with the staff team and VAC's CEO. Programme Board members take on additional tasks, working on specific areas such as a small Enter and View panel to approve the reports; working with staff on events; advising on communications.

The Programme Board has a small separate budget at its disposal, which is negotiated annually with VAC, and allows those members to have more control over expenditure on new or continuing activities.

The Board received external support with development days including the production of a new information/induction pack in November 2014.



Financial information

In the year 2014-15 HWC received £150,000 from Calderdale Council. Over the course of the year £125,294 was spent on staffing, rent and office costs. This figure included a management fee of £9,538 for VAC as the host of HWC. The Programme Board spent an additional £22,874 to support the delivery of the HWC work plan which covers community engagement, communications and events work, as well as supporting the research and Task and Finish programme.

| INCOME | £ |
|---|---------|
| Funding received from local authority to deliver local Healthwatch statutory activities | 150,000 |
| Additional income | |
| Total income | 150,000 |

| EXPENDITURE | |
|---------------------------------------|---------|
| Staffing, rent and other office costs | 115,756 |
| Hosting fee | 9,538 |
| Direct delivery costs | 22,874 |
| Total expenditure | 148,168 |
| Balance brought forward | 1,832 |



Planning Ahead

Outline of priorities for 2015-16

- Revisit to Calderdale Royal Infirmary car park
- Care Act implications
- Access to Physiotherapy services
- Asylum Seekers and their access to services
- Child and Adolescent Mental Health Services
- Hospital Trust reconfiguration consultation
- Home Care provision
- **Development of Patient Information Resources**
- Improving reach to groups with protected characteristics under the Equalities Act 2010.



Contact us

Get in touch

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We will be making this annual report publicly available by 30th June 2015. It will also be circulated to Healthwatch England, CQC, NHS England, Calderdale Clinical Commissioning Group, Calderdale 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.

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

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