

# Championing what matters to you

Healthwatch Sandwell  
Annual Report 2021-22



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# Message from our chair

The year started off briskly with John Taylor at the helm ensuring the Healthwatch Sandwell service was squarely focused on the needs of local people

- We enabled VCS organisations to increase their involvement with seldom heard groups regarding health and care experiences, culminating in a wonderful showcase of the achievements.
- In response to concerns shared with us in our annual survey of what people in Sandwell were worried about, we chose three priority projects: Hospital Treatment Pathways: Hidden Impact on carers; and; Black Country Young People's Mental Health – a collaborative project with all the Black Country Local Healthwatch.
- We were commissioned by the Care Quality Commission to engage with 2 local seldom heard communities: people who had experienced homelessness, and people living with Sickle Cell (an inherited blood disorder).
- Ever the consummate professional, John led with insight and desire to achieve excellence in the outputs and impacts of the work of Healthwatch Sandwell. John excelled at supporting and mentoring people, always there to bring considered and constructive challenge to enable you to strive to be the best you could be.
- Sadly, John took ill in the Autumn of 2021 and soon had to step back from Healthwatch, though not before he had battled to continue guiding the Team.
- We carried on with the projects John had helped the Advisory Board (HAB) set.
- John would be thrilled that the 'Hidden Impact on carers' report was very well received, going on to inform and influence the Joint Carers Strategy for Sandwell with praise being given by the Chair of the Sandwell Health and Wellbeing Board.
- Tragically John has passed away recently after bravely battling cancer. John has been taken far too young. Personally and professionally, he will never be forgotten by so, so many people whose lives he touched. RIP to our dear friend John XX The Teams & HAB at Sandwell and Walsall and all at ECS – Simon & Liz XX



John  
Taylor

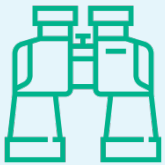
“The COVID-19 pandemic has thrown long-standing health inequalities into stark relief. With NHS and social care facing even longer backlogs, the unequal outcomes exposed by the pandemic are at risk of becoming worse. Local Healthwatch play an important role in helping to overcome these adversities and are uniquely placed to make a positive difference in their communities.”

Sir Robert Francis QC, Chair of Healthwatch England

# About us

## Your health and social care champion

Healthwatch Sandwell is your local health and social care champion. From Tipton to Smethwick and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



### Our vision

A world where we can all get the health and care we need.



### Our mission

To make sure people's experiences help make health and care better.



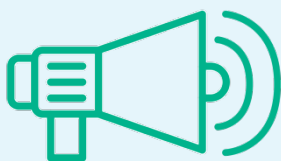
### Our values

- Listening to people and making sure their voices are heard.
- Including everyone in the conversation – especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

# Our year in review

Find out how we have engaged and supported people.

## Reaching out



**3535 people**

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**291 people**

came to us for clear advice and information about topics such as mental health and COVID-19.

## Making a difference to care



We published

**10 reports**

about the improvements people would like to see to health and social care services.

Our most popular report was

**The Hidden Impact of Covid 19 on Carers**

## Health and care that works for you



We're lucky to have

**13**

outstanding volunteers, who gave up **25 days** to make care better for our community.

We're funded by our local authority. In 2021-22 we received:

**£180,250**

which is the same as the previous year.

We also currently employ

**6 staff**

who help us carry out this work. previous year.

## How we've made a difference throughout the year

These are the biggest projects we worked on from April 2021 to March 2022.

Spring



Supported people with sickle cell & thalassemia to become Ambassadors, strengthening patient voice at key stakeholder meetings.



Provided small grants to enable VCS organisations to increase their involvement with seldom groups regarding health and care experiences.

Summer



Digital inclusion partnership working with VCS & Local Authority to raise awareness of risk factors - digital inclusion steering group and strategic connection links established.



Increased engagement with minority ethnic communities through digital exclusion in health services work. Working relationships with support organisations increased.

Autumn



Contributed to work led by Healthier Futures Academy in seeking to gain insight on issues underpinning health inequalities for the population & to work with the Integrated Care System to address those inequalities.



Developed mutual working relationship with the European Welfare Association who support Eastern European, Polish, and Romanian nationality people living in Sandwell.

Winter



Supported residents & specific group engagement with the Midland Metropolitan University Hospital. Connected resident support group contacts to the engagement team & ensured needs of specific groups were relayed & considered.



Strengthened relationships with primary care services to enable patient confidence with the changes in primary care due to Covid-19.

## Working with the Care Quality Commission

We were commissioned by the Care Quality Commission to engage with 2 local seldom heard communities:

- people who had experienced homelessness
- people living with Sickle Cell (an inherited blood disorder)



The aim of the project was to hear from the above seldom heard communities about what they know about what they can expect from health and social care services in Sandwell and the Care Quality Commission (CQC).

The project included asking participants about their understanding of the role of the Care Quality Commission and how it could engage with their community.

Our report:

- Provided a write up of the engagements including direct quotes.
- Made recommendations to CQC on how they could empower, engage and work with the communities in ways suitable to them.
- Suggested how HWS could work with CQC to facilitate these recommendations.
- Provided representative case studies demonstrating barriers and inequalities in engaging with health, social care services and the CQC.

We engaged with people from the Black Country: YMCA Open Door Scheme, who completed a survey with 6 young people at various dispersed host homes within Sandwell within host families. The cohort were mixed in demographics age, gender, ethnicity and disability and other protected characteristics.



**YMCA**  
**OPEN DOOR**

The report found that over half of the respondents were not aware of the CQC and that they would like the CQC to make sure that services provide a safe environment and to continue to monitor the treatment and the support people receive.



People gave experiences of accessing primary and secondary care services including urgent/emergency and mental health services.

Positive experiences were described however barriers were identified and included providing proof of address and identification, judgemental attitudes of front-line staff and communication difficulties.

The cohort made several recommendations including:

- During inspections, the CQC to query the knowledge of front-line awareness of requirements when registering for a GP.
- To examine front line staff training to ensure that staff fulfil the requirements of the Equality Act 2010 and are sensitive to the needs of this group.
- Ensure that providers make their service accessible especially where there are language and impairment barriers.
- Encourage providers to be flexible in-service provision with this community and to work collaboratively with other providers to ensure co-ordination and avoid duplication.
- Engage with this group via technology.

We believe that there is role for us and the CQC in supporting this cohort to receive good quality health and social care services and made appropriate recommendations to the CQC.



## Conversations with people with Sickle Cell

HWS invited 6 people with Sickle Cell, who were representative of the community, to join in a conversations to support the CQC project brief. 5 people attended a virtual meeting and an individual telephone conversation was had with one young adult. All the participants were of African Caribbean ethnicity, Sickle Cell predominantly affects African, African Caribbean and Asian ethnicities.

2 of the group had heard of the CQC and had an idea what they did, the other 4 participants had not.

The group spoke about health and care services that they may access to treat and manage their Sickle Cell disorder, including specialist services at the Sickle Cell and Thalassaemia Centre in Birmingham City Hospital which provides services for patients across the Midlands.

HWS also heard:

- concerns about Covid-19 as people with Sickle Cell fall into the clinically extremely vulnerable category
- need for improvement on awareness of Sickle Cell in health and care services
- very few people connected up to social services or receiving care and support including post hospital admissions
- experiences of transition from children to adults health and care services.

HWS asked the group what they would like to see change in health and care services, how the CQC could engage and work with the patient group.

The group felt that there is something missing, that there is a need for a service to advocate for people with Sickle Cell and Thalassaemia and carers, to hold to account and ensure that health, care and support services meet all patient needs and provide consistently good service. HWS recommendations reflected this overarching principle.

HWS continue to seek to work in partnership with health, care and support providers in Sandwell and the Black Country to improve patient service experiences and outcomes for people with Sickle Cell.

## Carers – what support is needed?

A priority project for Healthwatch Sandwell was:

### **The hidden impact of Covid-19 on carers**


Working with voluntary community sector organisations who provide support to carers HWS gathered insight on the experiences of being a carer in Sandwell during the Covid-19 pandemic. This included identifying impacts on carers health and wellbeing 18 months on from the outbreak of the pandemic, during a period of increased pressure and isolation within caring roles and reduced access to health, care and support services.

HWS captured the experiences, voices and views of **151** carers, headlines heard:

- cared for less independent, more isolated and less part of the community
- high level of negative impact on carers physical health and mental wellbeing
- 60% not accessed or received information or advice about support available

HWS asked carers what information, support, or services carers felt they would benefit from to reset and restore carers lives after the impacts of Covid-19.

Based on carers views and the project findings the report included recommendations to improve and develop a comprehensive support service offer for carers in Sandwell . This included recommendations for some as immediate adjustments and others to inform and influence the draft Joint Carers Strategy for Sandwell, which is currently in development.

 *" As Chair of the Sandwell Health and Wellbeing Board I sincerely thank Healthwatch Sandwell and all the Carers that offered their precious time to contribute to this report which will inform how Carers in Sandwell have been impacted through COVID-19 and how the Council, alongside its partners, can support them in the future."*

*Cllr. Suzanne Hartwell*

*Chair of the Sandwell Health and Wellbeing Board & Cabinet Member for Adults, Social Care and Health*



# Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feedback to services to help them improve



## Improving access to mental health and well-being service during Covid 19 Pandemic

HWS were hearing from local people about how Covid -19 was affecting their mental health, so decided to conduct a study into access to mental health and well-being services in Sandwell during COVID - 19 pandemic.

We spoke to the general population who already had mental health issues prior to COVID 19 as **well as** those who's mental health has been affected by the pandemic. They described how isolation, bereavement, unemployment and uncertainty about the future had all affected them.



**62% of people** who did access support services, rated the intervention as '*excellent*'

Access to mental health and well-being support organisations had either been postponed or altered to meet the restrictions of the Pandemic, however support had been appreciated. The deaf community had experienced communication difficulties in accessing mainstream services and young people faced many challenges however they adapted to new ways and developed resilience.

People had used a variety of coping mechanisms including walking and new hobbies. The use of virtual support was appreciated, and people suggested that this should be further utilised in the future.

It was agreed that the long-term implications for mental health and well-being services is that there would be an increased demand due to the Pandemic. HWS made **5** recommendations which include improving information about mental health services, support for new parents and access to bereavement services.

### What difference did this make

HWS have been able to raise these issues at the Health and Well-being Board and are monitoring the implementation of the recommendations.



*'The pandemic is affecting more people than you think, and we won't be able to just bounce back easily. There will be a chain reaction... People have been alone for nearly 12 months and may have developed other mental health problems... I don't think the demand will be able to be met.'*



# Black Country Star Strategy

## Better health care for people with learning disabilities and or autism

People with learning disabilities die, on average, 20 years earlier than the general population but many of these premature deaths could be avoided by giving these patients equal access to healthcare services

People with learning disabilities still face inequalities in access to health services.

**Healthwatch Sandwell have been working in partnership with Dudley Voice for Choice, Autism West Midlands and Healthwatch Dudley looking and creating an equitable health care service for people with a learning disability and or autism**

We aim to set up the Black Country Star network which will measure the activity and guide health professionals on what people with learning disabilities and autistic people need and most importantly expect from their health services.

The Black Country Star branding will function as a kite mark and will denote that the service provider has agreed to open their service for review, education and adjustment aimed at improving service provision for people with learning disabilities and or autism

**Healthwatch Sandwell have been engaging with young people with learning disabilities and or autism about their experiences of GP appointments and finding out how the service could be improved.**

*54 % of people said that they had a negative experience with 5% saying that they were unable to cope with the environment they were in*

## Black Country Star Strategy continued.....

### Some of the feedback so far

The Dr gave me two different tablets to take every day - I don't know what they are for, and they do not make me feel better.

The waiting room was very scary to me and had a smell that was weird. I didn't like it so I kicked off. I was asked to leave so I did not see the Dr in the end.

I did not know what was wrong with me as the Dr did not tell me - I worry what is the matter with me

**This is a pilot project for this financial year which will continue into next year.**

**Feedback will be shared with stakeholders.**

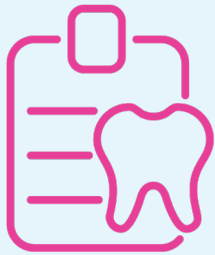
### Next steps

A GP review peer group is to be established. We will engage with a proportion of GPs in Sandwell to establish how they engage people with learning disabilities /autism and how they hear about the issues or concerns of the learning disability /autistic population that they represent and -

If they do not have engagement processes for people with learning disabilities /autism or their carers, what are General Practices doing to get better representation and voice from this group?

## Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.



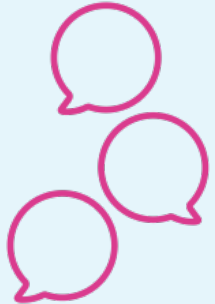
### Access to dentistry in Sandwell

Our volunteers undertook a mystery shopper activity to find out if people can access NHS dentist in Sandwell, including, registering, access to face-to-face routine and emergency visits.

45 dentists were contacted:

- 15% were taking on NHS patients.
- 31% offered a service to private patients only.
- Some practices were operating a waiting list
- 80% were offering face to face appointment for a routine check-up.
- Some were prioritising patients according to need/being an existing patient.

To ensure equality in dental care for the people of Sandwell, we will be raising concerns with our Integrated Care system.



### Getting services to involve the public

The Midland Metropolitan University Hospital (MMUH) will provide the acute care services for Sandwell and West Birmingham Hospitals NHS Trust (SWBHT). It will include transfer of the Sickle Cell and Thalassaemia Centre from City Hospital. HWS worked with the SWBHT to ensure the start of engagement and consultation with this patient group around the new services. HWS also helped contribute to planning of the patient and visitor wayfinding experience at MMUH including providing report insights around digital exclusion and the need to ensure full accessibility in service design.



### Working with Public Health for better pharmacy access

HWS supported the pharmaceutical needs assessment (PNA) steering group. PNA is a way of gathering evidence from the pharmacists and the public about what pharmacy services are provided in the Sandwell area. This report also captured the impact of coronavirus on these services.

This involved attending meetings, distributing and promoting assessment to community groups and Patient Participation Groups (PPGs). HWS helped to promote PNA with ethnic minorities, making sure they have access to interpreted versions. We also assisted some people with completing the survey over the phone.

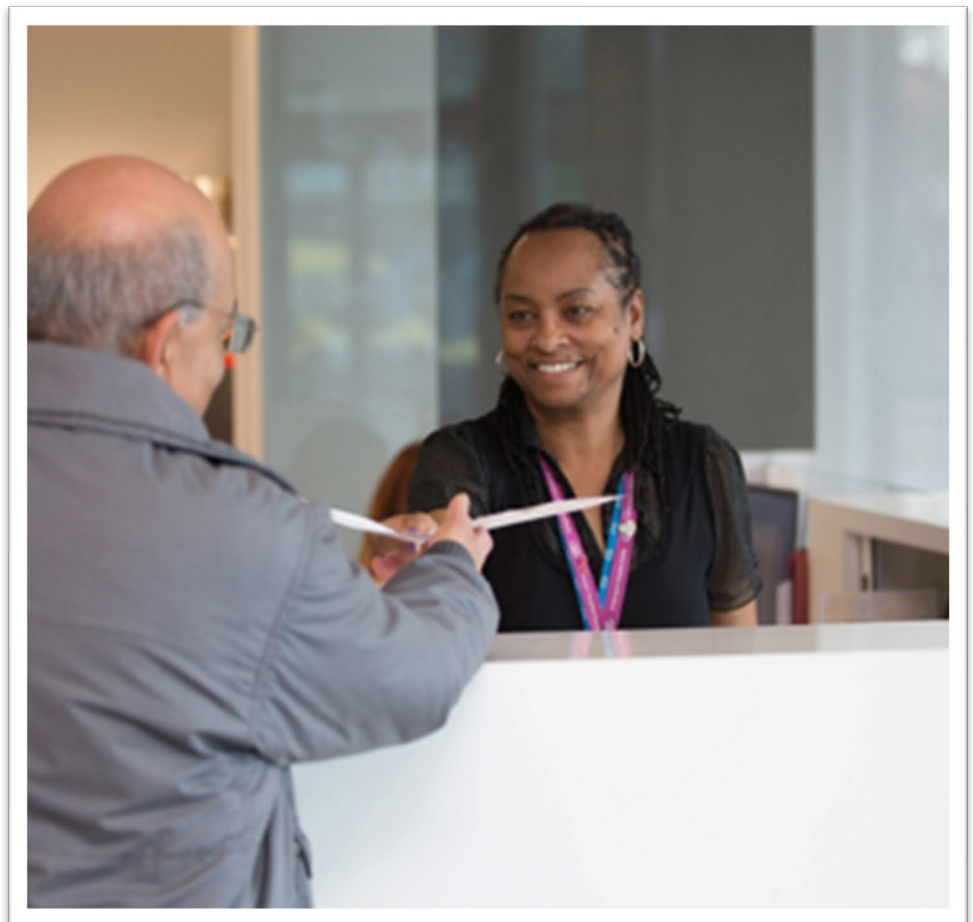
The report will be published in October 2022.

# Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

This year we helped people by:

- Providing up to date information on COVID-19
- Linking people to reliable information they could trust
- Supporting the COVID-19 vaccination and booster programme
- Helping people to access the services they need





## Supporting vulnerable in getting access to GP surgeries

Healthwatch Sandwell supported people registering to a new GP surgery.

At that time in the pandemic not all surgeries were taking on new patients. Adult Social Care and Safeguarding teams requested assistance with this. The people were of a vulnerable nature (Safeguarding and Domestic Abuse) and needed extra support. This was completed with the assistance of Practice Managers and admin staff at the GP surgeries.



## Signposting people who needed additional support

At times supporting the public can occur over a longer period, especially if they have complex needs.

The initial contact was just before the pandemic started and lasted into Spring 2021.

A patient had been discharged from a mental health clinic but required a medication review. There was also a lack of support in the community.



We advised the person to make a formal complaint through the advocacy service POhWER, where the complaint reached Ombudsmen stage. This was not taken any further due to an appointment for medication review being issued.

Person was also assigned a community advocate to support with attending clinic appointments and with issues in the home. Person is now linked with the right services and getting the support they need.

Healthwatch Sandwell made referrals to POhWER, LEAP, South Staffs Water, BEAM and Sandwell Enquiry. We also had contact with their CPNs, Murray Hall, Recovery College and Sandwell Advocacy.

# Volunteers

This year we have been supported by a growing team of wonderful volunteers who are from a variety of backgrounds and bring a wealth of experience.

We have **5** volunteer Board members who continue to provide advice on Healthwatch Sandwell work programme priorities. We have **8** generic volunteers, who have assisted the team with a variety of activities including:

- Community Outreach – engaging with the local community
- Projects – survey distribution and publicity
- Administrative and IT support, including creating graphs and graphics
- Mystery shopper activities – dentists
- Attending Integrated Care Systems Engagement Approach Workshop

We are continuing to incorporate young people (ager 16 – 24) into our work plan to ensure we continue to recruit young volunteers and engage with young people through our community engagement programme.

Our volunteering activities have had to adapt to the challenges of Covid-19, however our volunteers have made an excellent contribution this year.

We are thankful for the time and commitment that our volunteers give us and their local communities.



### Daniel

"I have been volunteering with Healthwatch Sandwell for nearly a year now and I can honestly say that I have enjoyed every second of the time I have committed to volunteering with them. Not only because it enables me to utilise and develop my existing skills, but it also helps me to learn new skills too!"



### Ann Marie

"I believe that as a volunteer I will be able to use skills I already have to help others and in doing so gain different skills and help even more people.

I believe it would give more structure to my week and get me out and about meeting people from different backgrounds.

As a volunteer I would also be able to share my experiences within

health and social care so individuals know they are not alone and changes for the better can be made. Finally, I think as a volunteer as part of the team at Sandwell Healthwatch lasting and more beneficial changes can be made to improve people's lives"

### Alia

"Joining Healthwatch Sandwell, earlier this year, and becoming a volunteer has made me more aware of the support systems within our community and the needs of different people. As a volunteer, I'm surrounded by friendly and welcoming volunteers who share similar ideas.

I must admit, this is by far the most enjoyable volunteering experience which I have accessed, and I am proud to be working towards improving the services that members of the community access daily"



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



[www.healthwatchsandwell.co.uk](http://www.healthwatchsandwell.co.uk)

07885 214421

Email: [info@healthwatchsandwell.co.uk](mailto:info@healthwatchsandwell.co.uk)

# Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income		Expenditure	
Funding received from local authority	£180,250	Staff costs	£142,830
Additional funding	£10,067	Operational costs	£8,523
		Support and administration	£30,063
<b>Total income</b>	<b>£192,119</b>	<b>Total expenditure</b>	<b>£181,416</b>

## Top three priorities for 2022–23

- The patient experience of accessing primary care services
- Accessibility for patients – meeting information and communication needs
- Exploring the impact of language barriers in health and care services

## Next steps

The pandemic has shone a stark light on the impact of existing inequalities when using health and care services, highlighting the importance of championing the voices of those who all too often go unheard.

Over the coming years, our goal is to help reduce these inequalities by making sure your voice is heard, and decision makers reduce the barriers you face, regardless of whether that's because of where you live, income or race.

## Sandwell Place Based Partnership

For our next financial year Healthwatch Sandwell have been commissioned by Sandwell and West Birmingham Clinical Commissioning Group to support patient, service user and citizen engagement around the Integrated Care Partnership. This is called Sandwell Placed Based Partnership.

This is an exciting opportunity for people of Sandwell to be part of the decision-making process around how health and social care services are provided in Sandwell.

Our role will also be to champion the local voice and to capture intelligence on how local people access services, their experiences, challenges people face and how service can be joined up.

# Statutory statements

## About Us

Engaging Communities Solutions CIC holds the contract to deliver Healthwatch Sandwell and is based at Blakenall Village Centre, 79 Thames Road, Blakenall, Walsall, WS31LZ. Healthwatch Sandwell uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.



## The way we work

### Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch board consists of 6 members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met 8 times and made decisions on matters such as escalating issues of concern to relevant organisations and commissioned pieces of work in addition to our work programme

We ensure wider public involvement in deciding our work priorities. We seek feedback through surveys using our website and social media. We ensure that we reach out to people who are digitally excluded by using paper surveys returned via free post, telephone and one-to-one sessions if required. We hold online and face to face focused sessions and work in partnership with VCS to widen our reach. We collate insight and data from information and signposting enquiries and publish an Intelligence report each quarter. This information is used to give a more in depth understanding of public priorities.

Methods and systems used across the year's work to obtain people's views and experience.

**We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.**

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by, building relationships with the faith sector, having a profile at local cultural events and supporting people to tell their stories at stakeholder meetings.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website, have an extensive mailing list and distribute hard copies to community and health and care establishments.

This year, due to the COVID-19 pandemic, we did not make use of our Enter and View powers in many of the establishments that we intended to. However we have undertaken Enter and View in a number community pharmacies in Sandwell, talking to service users around access, and the quality of the services made available.

### Reporting Issues

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

## Health and Wellbeing Board

Healthwatch Sandwell is represented on the Sandwell Health and Wellbeing Board by Alexia Farmer, Manager Healthwatch Sandwell. During 2020/21 our representative has effectively carried this role by 100% attendance at meetings, contributed to agenda discussions and ensured that the public/patient voice is heard where appropriate. 2021-2022 Outcomes

Project / Activity Area	Changes made to services
<p>Black Country Children’s Mental Health.</p> <p>One of the areas that all four Black Country Healthwatch were hearing was around the transition from children’s mental health into adult mental health</p>	<p>The Black Country Healthwatch partnership welcomes that the region is embarking on a journey of considerable and exciting change for local mental health services. We recognise that plans are already underway to join up service provision across the region, enabling communities previously served by different Trusts, to receive equitable mental health access.</p>
<p>“Patients in waiting” experience of hospital treatment pathways was a HWS priority project for 2021/22</p>	<p>HWS heard from patients about the impact of Covid-19 on hospital communications and processes. Insight was also gathered on impacts of longer waits for hospital treatment on patient health and wellbeing. HWS made 4 key recommendations to NHS services to improve communication and information and to help ensure patients feel informed and involved as “patients in preparation” for hospital treatment.</p>
<p>Community Outreach - Going Above and Beyond</p>	<p>Although undertaking community outreach has been a challenge through the pandemic we have seen a huge increase in the number of calls and requests for support and advice. We haven't just signposted people but helped them make the right contacts, get the right advice and support in their times of need.</p>
<p>The Midland Metropolitan Hospital is now closer to completion. And will be a state of the art hospital for the region providing many specialist services , children's services , maternity and acute care.</p> <p>SWBHT – Sandwell and West Birmingham Hospital Trust MMUH – Midland Metropolitan University Hospital</p>	<p>Patient and service user involvement is key to the preparation of future service provision.</p> <p>We have worked with the SWBHT to ensure the start of engagement and consultation with patient groups around the new services. HWS also helped contribute to planning of the patient and visitor wayfinding experience at MMUH.</p>

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 Healthwatch Sandwell


 healthwatchsandwell

The contract to provide the Healthwatch Sandwell service is held by Engaging Communities Solutions C.I.C.

[www.weareecs.co.uk](http://www.weareecs.co.uk)

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 Engaging Communities Solutions (ECS)