

Healthwatch Sandwell

Annual Report 2015/16



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Message from our Chair



Welcome to Healthwatch Sandwell's Annual Report for 2015-16. The last year has seen us consolidate our position as the statutory

patient voice for health and social care. We have listened to more people than ever, and produced real change through our investigations and reporting.

We have published several reports throughout the year capturing patients' issues and concerns. This included major reports into care at Sandwell Hospital and into continuing healthcare assessments, which gained significant media coverage and started a positive dialogue with providers leading to improvements. These reports set out to capture the 'lived experience' of patients, as recommended in the Francis Report, which we believe we achieved.

We were fortunate during the year to have extra resources that allowed us to increase our staff complement to eight. Although we reduced back to six at the end of the year, it allowed us to demonstrate what an appropriately resourced Healthwatch can achieve. This included a significant increase in public engagement allowing us to listen to more people than ever, and a full programme of Enter and View visits to health and social care premises. We

increased volunteer numbers, and were able to provide extra support to our volunteer Board members. This enabled them to be more effective in representing the patient voice directly in meetings with senior leaders in health and social care. I would like to thank all of the staff for their continued hard work and innovation.

We have seen some changes this year to our Board with the departure of Parminder Dhani and Pam Jones. Both were inaugural Board members and made a highly valued contribution. In particular, Pam worked with the Local Authority to establish Healthwatch Sandwell, and was Chair until the end of 2015. On behalf of all involved with Healthwatch Sandwell, I would like to pay tribute to the tireless contribution Pam has made, and can wholeheartedly say that without her it would not be what it is today. Although we still hope to be able to call on her expertise, she will be very much missed.

John Clothier, Chair 2016



Pam Jones

The year at a glance

This year we've reached 2142 people on social media



Our volunteers help us with everything from Enter and View to Experience Gathering



We've visited over 256 venues listening to people's health and social care experiences



100+ visits to local services including walk-in centres, GP surgeries, and hospitals



Our reports have tackled issues ranging from Continuing Healthcare to Walk-in Centres



We've met hundreds of local people at our community events



About Healthwatch

We exist to make health and care services work for the people who use them.

Everything we say and do is informed by our connections to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.

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

Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their work.

We believe that asking people more about their experiences can identify issues that, if addressed, will make services better.

Healthwatch Sandwell is an independent organisation funded by Central Government via Sandwell Metropolitan Borough Council. There are one hundred and fifty two local Healthwatches in total.

As well as local Healthwatches, Healthwatch England works at the national level. They take the experiences of local Healthwatch and use them to influence national policy. The organisations who plan, run and regulate health and social care services have a

legal obligation to listen to what Healthwatch England has to say.

When Healthwatch England are made aware of failing services, they report them to key national organisations, including the Care Quality Commission, of which they are a sub-committee, and central government. These organisations must submit a public response to Healthwatch England's concerns.

Aims and purpose

Healthwatch Sandwell works with consumers and partners in the following ways:

Concerns

Picking up on and listening to consumer concerns in a timely manner, including being responsive to the 'early or lone' voice. Raising concerns with those responsible, and following up. Concerns may also come through whistleblowing. We define a concern as something causing repeated consumer issues, but individuals are unlikely to take (early) action on, or a 'low level' complaint that is just put up with e.g. 'unfriendly' waiting rooms.

Customer care and complaints

Identifying and signposting to customer care services and advocacy. Following up if this hasn't worked e.g. 'Why has my complaint been ignored?' Testing and checking customer care services.

Community engagement

Working with the community and volunteers to deliver our aims. Acting as a channel for voluntary and community groups working with consumers e.g. carers group, to raise their issues and hear their concerns.

Consultations

Maintaining an overview of consultations by health and social care organisations and promoting to consumers. Ensuring consultation is done properly, raising issues around potential service issues, and acting as a critical friend to those delivering the consultation process.

Consumer rights

Identifying and clarifying the rights of consumers of health and social care

services. Promoting and providing information on these rights, and advice on enforcing them.

How we work

Healthwatch Sandwell aims to promote, gather, analyse and act on issues relating to patients' and their relatives' experiences of health and social care. Promotion of our services and information about health and social care services has included reaching out directly to the public and through existing networks already engaged with the community. We have established our presence and raised our profile so that those looking for help can find us easily.

We gather views and experiences from many places, with a focus on hearing directly from patients and their relatives.

Do you have a concern about your health and social care services?



Raising your concerns if things go wrong

Supporting your rights as a user of health and social care services

Signposting you to customer care & advocacy

Email: info@healthwatchsandwell.co.uk

Web: www.healthwatchsandwell.co.uk

Phone: 0121 569 7210

www.twitter.com/HWSandwell

www.facebook.com/Healthwatchsandwell

Through our Experience Gathering, we have talked directly to hundreds of people, simply asking them to tell us about their last experience of using social care or health services. We want to hear good and not so good experiences and don't ask people to make any judgement. There are many other ways we gather information such as patients contacting us directly and liaising with over sixty community based organisations every month.

We have talked directly to hundreds of people, asking them about their last experience of using social care or health services

The Healthwatch team regularly review evidence to identify issues that need addressing, either immediately or to be looked at further. This can include reviewing our existing database of thousands of comments or carrying out further direct research to gather users views about a service.

'Mid Staffs Test'

Healthwatch Sandwell has always been committed to acting on a clear evidence base, and has used the extensive data from patient views we have collected to inform us where we should take action or investigate further.

We look for trends, but recognise that this cannot always be relied upon due to the limitations of data gathering. However, just as important, if not more so, are one-off significant incidents, or those that could indicate a systemic

problem. This is where the 'Mid Staffs Test' comes in:

*'An issue reported in Mid Staffs may have been the first to indicate systemic problems. What if that had been recognised and acted on?'
Healthwatch Sandwell's Mid Staffs Test*

We apply this thinking to all issues we consider. We seek to find an explanation, and will provide support to complainants to enable us to address the underlying causes.

Shine a light

The most effective action that Healthwatch Sandwell can take is to 'shine a light' on how patients are experiencing services. Once we have gathered and analysed their experiences, we report what we have found to those who can make a difference, as well as to the wider public. This may result in working directly with providers or commissioners to bring about improvements, or simply reporting and continuing to highlight whether they have taken action or otherwise.

Healthwatch Sandwell can 'shine a light' on how patients are experiencing services

Investors in People

Healthwatch Sandwell applied for Investors in People accreditation in September 2014, and it was awarded in October 2014. We believe that we were the first Healthwatch organisation to have achieved this highly respected accreditation in our own right.

Investors in People is the nationally recognised quality standard for organisations reflecting their investment in staff and their service.



Staff

During 2015-16, Healthwatch Sandwell was able to use reserves to increase its staff capacity to 8 staff, enabling increased service delivery and development:

- Mark Guest - CEO
- Laida Fletcher - Office Manager
- Ian McGarry - Communications and Engagement Officer
- Anita Andrews - Information and Research Officer
- Melissa Elders - Support Officer
- Thomas Collins - Support Officer
- Paul Higgitt - Support Officer (June 2015 - March 2016)
- Janet Foster - Support Officer (June 2015 - December 2015)

**What we do: Advising,
guiding and listening to
health and care service
users**



Consultation Network

The Consultation Network is a partnership network with local community groups and organisations. It is a unique activity of Healthwatch Sandwell that enables us to reach out to as much of the community as possible. The network proactively engages with existing community infra-structure and integrates our message and services with theirs. Any group can join and members are:

- Contacted by us monthly to tell us issues and hear our updates
- Listed on our website
- Receive a large certificate/poster to display

The Consultation Network enables us to engage with hard-to-reach groups e.g. people with disabilities, BME groups. We regularly review the network to see if diverse communities are represented, and where there are gaps, look for new partners. This happened towards the end of the year, when we identified faith groups were not sufficiently represented, and since then have been contacting a range of difference faith organisations to address this e.g. Christian, Hindu, Muslim, Sikh.



Health and Social Care Group

Our Health and Social Care Group is a regular public meeting held at different locations within the borough. The group provides a chance for people to meet managers of services, and provide feedback on issues. Discussion topics are based on feedback from the meeting. The group is chaired by a Board member, and the members decide their own agenda items. During 2015/16 the following topics were covered:

- April 2015 - Integrated Care Services (ICARES)
- June 2015 - Sandwell ASSIST
- Oct 2015 - Right Care Right Here and Primary Care Listening Exercise
- Dec 2015 - Cancer Services
- Mar 2016 - Primary Care Update and Cancer Services Update

Experience Gathering

Experience Gathering is a key activity of Healthwatch Sandwell, taking place continuously throughout the year, and several times every week. Our staff meet with the public in all sorts of places including supermarkets, bingo halls and at community events.

'Tell us about your last experience of health and social care'

They promote Healthwatch Sandwell's work and provide advice and signposting for people in need of support. They also ask people to, 'tell us about your last experience of health and social care'.

The information gathered provides us with invaluable insight into the general quality of services and flags up more serious incidents. We now have a database of thousands of comments which we are able to interrogate when asked about specific services, such as by



the Care Quality Commission, or when concerns are raised about a service.

- 286+ people signposted
- 725+ experiences gathered
- 7000+ leaflets distributed around Sandwell
- 255+ venues visited

Where we've been Experience Gathering

Sandwell Show, Tipton Carnival, Sandwell Hospital, Tividale FC Community Fun day, The Cancer Wellbeing event, Brickhouse Community Family Fun Day, Tipton Carnival, Victoria Park Fun day, Tipton Canal Fun day...

Regularly attend Sandwell Libraries, larger supermarkets (e.g. Morrisons, Tesco and ASDA) etc.

...North Smethwick Resource Centre, Sandwell Health Alliance, West Bromwich Arthritis Self Help Group, Patients Summit Meeting, Young at Heart Group, MS Group, Brook Street Community Centre Over 50s, Stroke Group, Parkinson Group, Extend Group, Community Offer, The Spires PPG, etc etc etc.

All GP's in Sandwell visited to update CompareDrs.com GP services information website. Staff attend a number of Patient Participation Groups (PPGs).

Enter and View visits

Enter and View gives Healthwatch Sandwell the opportunity to be able to formally visit health and social care premises to enable us to find out how these services work for patients, residents, carers, family members and staff that use them, including what works well and what can be improved.

We have a team of 14 trained volunteers who carry out our Enter and View program. During 2015/16 we carried out visits to 9 services in Sandwell. These were:

- Lyndon Hall, Malvern Close, West Bromwich
- Grafton Lodge Residential Unit, Oldbury
- Brunswick House, Wednesbury
- Inshore Support, Trinity Street, Cradley Heath
- Ascot House Care Home, Oldbury
- Ash Lodge Care Home, Smethwick
- Beechcroft Residential Home, Oldbury
- El Marsh Care Home, Oldbury
- Poplars Nursing Home, Smethwick

All of these visits were to residential and nursing care homes as part of our program: 'To examine the delivery and quality of care provided at Residential and Nursing homes in Sandwell.'

When visits are made the visiting team collectively publish a formal report that is shared with local commissioners, providers of services and the Care Quality Commission. These reports are also publicly available on our website.

Additionally, we ensure that our reports are accessible to those people who wish to read them.

The manager of Ascot House suggested we produced their report in easy read format so that their residents would be able to understand it. We are proud that Healthwatch England shared our easy read report format with the wider Healthwatch network as an example of good practice.

Getting Involved

Residents are involved in decision making and help with the care plans

Ongoing Medical Care

Local GP comes to the home regularly

Residents have eye and teeth checks at the Lyng Health Centre.

All residents are looked after by the learning disability team.

Healthwatch Sandwell
22nd August 2019

Enter and View Visit report
Ascot House Care Home

Healthwatch England shared our easy read report format with the wider Healthwatch network as an example of good practice

Networking and partnership

A large part of Healthwatch Sandwell’s role is to represent the patient voice and work in partnership with health and social care commissioners and providers. This work is undertaken by staff and also our volunteer Board members.

This includes statutory seats such as on the Health and Wellbeing Board and the Primary Care Co-commissioning Committee. Other examples include Health and Adult Services Overview Scrutiny Committee, Sandwell and West Birmingham Hospital Trust, Right Care Right Here and Midlands Metropolitan Hospital Design Group.

Research and reports

Healthwatch Sandwell regularly reviews what it is hearing from the public, and uses this to direct further work and where to take action. This can range from following up an issue on behalf of a patient with a service provider, to carrying out extensive research and publishing a report. The type of research will depend on the particular issue. This



can include simple surveys, e.g. our research into Walk-in Centre usage, through to extensive patient interviews in order to understand and convey the patient’s ‘lived experience’ e.g. our research into Continuing Healthcare

Assessments. There are examples of this work throughout the Annual Report.

CompareDrs.com

CompareDrs.com is a unique GP services information website developed by Healthwatch Sandwell.



It provides patients with comprehensive and easy to compare information about every GP practice in the borough and accessing their services. Collating the information and showing the site to the public at our Experience Gathering events has provided us with an excellent GP engagement and public promotion tool.



Countdown to opening of the new Midland Met Hospital

Friday 22nd January 2016 marked the start of a 1000 day countdown to the opening of the new state-of-the-art hospital, The Midland Met.

To mark the event, SWBHT asked local representatives to unveil digital clocks at four main sites across the Trust to count down the 1000 days.

Chair of the Birmingham Health and Wellbeing Board, Cllr Paulette Hamilton unveiled the clock at City Hospital at 9.15am, whilst the late Leader of Sandwell Council, Cllr Darren Cooper, did the same at Sandwell Hospital. At Rowley Regis Hospital, James Morris MP for Halesowen and Rowley Regis, unveiled the clock.



Bill Hodgetts, Healthwatch Sandwell Board member, did the honours at Leasowes Intermediate Care Centre.

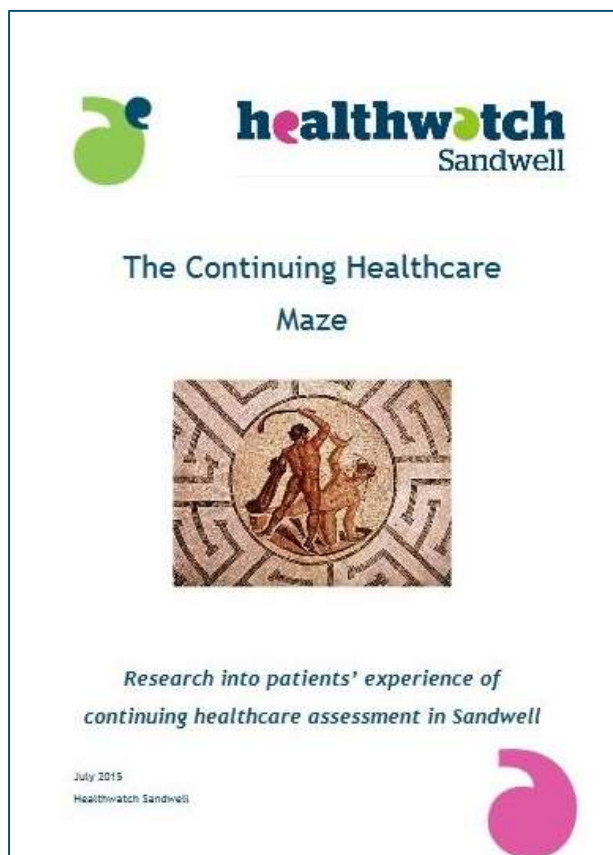
Our work in focus: The difference we've made



During 2015/2016, HWS have been involved in many activities that have made a difference to the provision of care and support for people of Sandwell. This involvement has been at various levels from strategic to one-offs. The aim is to make a difference to local people's lives so that they receive services that are responsive and sensitive to their needs.

'The Continuing Healthcare Assessment Maze' - Report into CHC assessments

HWS carried out research into the Continuing Healthcare (CHC) assessment process as a result of being contacted by a number of people who had experienced a CHC assessment and wanted to discuss their experiences, concerns and issues.



The final report, the Continuing Healthcare Maze, was published on 22nd July 2015 alongside a press release. The report found:

- Poor Communication by Assessors with Service Users and Carers.

There was a lack of explanation of the assessment process, both actual and future. Service users described not being listened to and not being understood when information was being provided to the assessor.

- Poor Assessment Skills of the Assessor

It was found that the assessors approach was unsatisfactory in obtaining an accurate picture of the situation.

- Emotional Cost

Service users and carers have experienced emotional distress from the process, which has had a negative impact on their health and well-being.

- Poor Communication and Collaboration: Health Care Professionals and Social Workers

The research found that service users and their carers experienced unacceptable disagreements and arguments between professionals during home visits.

- Timescales

Service users and their carers had to endure unacceptable timescales and uncertainty over outcomes for the assessment process.

HWS believe that these findings are unacceptable for people who are vulnerable and living with life

debilitating conditions that already seriously affect the quality of their life. The report made the following recommendations:

- Thorough review of process and resources in the assessment process
- Recognition of the personal and human cost in the assessment
- Support for service users and carers: advice and advocacy
- Support for service users and carers: enforcement of rights

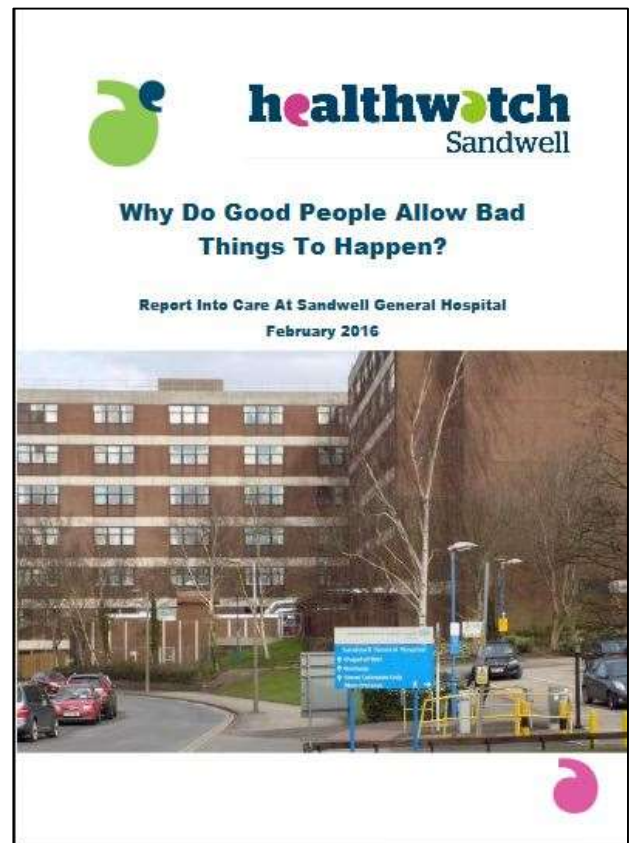
The NHS Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) who are jointly responsible for the assessment process, along with Sandwell MBC, responded by saying that during 2014/15 SWB CCG funded 1,014 CHC eligible patients and that there had been a repeat review and audit of the processes within CHC service (January 2015) which demonstrated improvements in service process and pathways.

The SWB CCG acknowledged that further improvements are to be made, especially with regard to ensuring the assessment is as user friendly as possible.

HWS will continue to listen to patient experiences to see if they feel that this has led to improvements in the assessment process.

'Why Do Good People Allow Bad Things to Happen?' - Report into care at Sandwell Hospital

HWS concluded and published a report (February 2016) into patients' experiences at Sandwell Hospital. This report was initiated as a result of various issues being raised with us by the public during 2015.



Our investigation found failures to provide appropriate nursing care, communications issues regarding patients and family, including end of life circumstances, and limitations in the complaints system.

The report recommended:

- The Trust should consider why these issues have arisen, and what can be/has been done to prevent any repetition, even if

improvements have already been made.

- The Trust should consider why the culture leading to these failures has existed among staff i.e. Why do good people allow bad things to happen?
- The Trust needs to consider patients' reluctance to complain, which patients sometimes attribute to fears of discrimination (which may be founded or not).
- The complaints process needs to be more explicit, clearly stating the steps involved, what can/will happen, and possible outcomes.

The Chief Officer of SWBHT agreed to meet the respondents to discuss their experiences

SWBHT stated 'We welcome the support from Healthwatch Sandwell in listening to patients and contributing to our work of continual improvement across all the services we provide, that is in hospitals, in clinics and in the community. We have invited HWS to repeat their study in summer 2016 to test independently whether the work to improve the care experience is reflected in patient feedback.' Also the Chief Officer of SWBHT has agreed to meet the respondents to discuss their experiences.

HWS welcomes working with SWBHT and continue to monitor patients' experiences at Sandwell Hospital to ensure that all patients receive appropriate care.

Oncology monitoring

The issue of changes to oncology services provided by Sandwell & West Birmingham Hospitals NHS Trust (SWBHT) was brought to our attention via social media and a Board member. It was understood that a local agreement with Queen Elizabeth Hospital to provide radiology services for Sandwell patients was to end in April 2016. Patients were concerned that services would be located elsewhere in the West Midlands (and possibly beyond) meaning that patients would need to travel further and be treated by unfamiliar radiologists and oncologists.



We attended a patients' meeting at Sandwell Hospital where it became clear that because there had been limited consultation with patients, there was a great deal of confusion, concern and mixed messages. The hospital confirmed it was seeking agreements with other local trusts to provide radiology and oncology services to increase choice for patients and that the current agreement with Queen Elizabeth hospital was still ongoing. They pledged to hold further

meetings with patients when more information became available.

As part of keeping patients involved, HWS held a meeting of its Health and Social Care Group in December. 35 people attended to hear the Trust's Medical Director, Dr. Roger Stedman, explain how the hospital Trust will work to ensure that the oncology service is maintained after April 2016.

He gave an assurance that current treatments would remain unchanged and the hospital trust continues to work with the Black Country Alliance and other local NHS Trusts to ensure that the service delivered gives patients more choice as to where oncology will be delivered as well as providing more services locally.

Details of this can be found on our website under Health and Social Care Group.

HWS played an active part in this engagement process to ensure that patients were given the right reassurances and a commitment to their involvement in future service provision discussions.

Following this public meeting, we have continued to monitor this issue by requesting updates from the SWBHT to enable us to keep local people informed of developments, and they have updated further Health & Social Care Group meetings. HWS was also invited to send representatives to a NHS risk summit regarding these services.

Walk-in centre survey

HWS were informed that many patients were visiting the walk-in centre in Parsonage Street, West Bromwich as they have difficulties getting appointments with their own GPs.

Findings from the Walk-in Centre survey include that 42% of all walk-in visits were by patients registered at 6 GP practices.

As a result of this, HWS carried out research to find out why people use walk-in centres. Over 164 patients were surveyed at the Parsonage Street and Summerfield Centres. Findings include that 42% of all walk-in visits were by patients registered at 6 GP practices. A summary report was published, and



discussions have taken place with the CCG on some of the details.

Midlands Metropolitan Hospital, Right Care Right Here, Better Care Fund

During the year, Healthwatch Sandwell has monitored progress of the new Midlands Metropolitan Hospital (being developed by Sandwell and West Birmingham Hospitals Trust), and its relationship to the Right Care Right Here programme and Better Care Fund. As a result of discussions, we recognised that further clarity from all organisations involved was required. This led to a meeting being convened between the Hospital Chief Executive Officer, Toby Lewis, the Clinical Commissioning Group Accountable Officer, Andy Williams, and Local Authority Director of Adult Services, David Stevens, along with Healthwatch Board members.



As a result, the Hospital agreed to produce a list of FAQs that would form the basis of an ongoing dialogue, and the CCG recognised that the Right Care Right Here message needed to be taken to people afresh.

CCG primary care listening exercise.

During September, Sandwell and West Birmingham Clinical Commissioning Group (SWB CCG) carried out a Listening Exercise into primary care, and HWS responded with a report, 'What You Say About GP Services in Sandwell'. This was based on data from our Experience Gathering activity. Over 1200 comments were reviewed and ten common themes identified.

The top three were:

- Difficulties with booking appointments
- GP/staff attitude and service
- Unhappy with diagnosis*

We also responded to the Exercise regarding the approach used. This related to the potential for aggregated data to be produced e.g. 88% people happy with GP access, which could be interpreted as relating to all GPs, when individual practices may vary significantly. The CCG asked to meet with us to explore this issue further. It was agreed that the listening exercise is providing an overview, and there needs to be an awareness of how data is presented. The CCG's Primary Care Commissioning Framework is a key part of improving services, and it was agreed that use of patient experience as a metric strengthens this. As part of the overall

development planning, they can also address perceptions regarding conflicts of interest. There was agreement that Healthwatch has a role to play through early engagement when consultations are being developed.

* Unhappy with diagnosis includes patients not believing their symptoms have been addressed, the diagnosis is wrong and confirmed cases of misdiagnosis. HWS has drawn this issue to the attention of NHS England previously, who noted that this may be an issue that is not currently acknowledged.

The Mental Health Crisis Care Concordat

The Mental Health Crisis Care Concordat is a national agreement between services and agencies involved in the care and support of people in crisis. It sets out how organisations will work better together to make sure that people get the help they need when they are having a mental health crisis.

In February 2014, 22 bodies involved in health, policing, social care, housing, local government and the third sector came together and signed the Crisis Care Concordat. Since then five more bodies have signed the Concordat, making a total of 27 national signatories.

HWS met with the CCG to discuss engagement regarding the concordat, as communications issues had been raised by ourselves and with us by other organisations. The CCG clarified that engagement had been ongoing, but were able to identify that there may have been administrative issues during handover from the Local Authority to the CCG. It

was agreed that this could be resolved by the CCG cross-referencing participants from the different stages and reengaging.

Care Quality Commission (CQC)

HWS are regularly contacted by the CQC to provide information relating to forthcoming inspections. This has included GP practices and hospital inspections. When a request is received, HWS is able to interrogate its database of several thousand comments, thus ensuring that the patient experience is heard in CQC inspections.

Black Country Mental Health Partnership

The Care Quality Commission (CQC) inspected the Black Country Partnership NHS Foundation Trust in November 2015. This included Edward Street Hospital, Hallam Street Hospital, Heath Lane Hospital and related community services. The CQC requested feedback from HWS from the last 12 months and were particularly interested to hear about Child and Adolescent Mental Health Services (CAMHS). HWS collated views from its database and contacted its Consultation Network to ascertain patients' and carers' views.

HWS also attended a focus group with the CQC and other Black Country Healthwatches regarding the upcoming inspection, to discuss the various issues we are aware of.

SWBHT Childrens Services Quality Summit

HWS were invited to the Quality Summit along with other stakeholders, where the

results of the CQC's inspection into Children's Services at SWBHT were reported. The report was very positive, and HWS were able to advise that this was in agreement with its data collected from service users.

Case study: Assist telephone number

HWS have been contacted on many occasions about the cost of calls to ASSIST Sandwell* which is an 0845 number, which the public were reluctant to call due to cost. HWS consulted regularly with Sandwell MBC and advised them of the public's concerns. This resulted in HWS being informed that the number is due to be changed which will be charged at a local rate.

*ASSIST Sandwell is the first point of contact for the public to access advice, guidance and support for adult social care needs

Case study: Signposting and partnership

A patient contacted us who has been diagnosed with skin cancer, is housebound and unable to read or write.

To alleviate the stress, this person wanted help, advice and support. She had contacted her local councillor who informed her of HWS.

HWS made a referral to Sandwell Advocacy, who were able to guide her to Macmillan Cancer Services. They had a specific service that could meet her needs. The patient has received appropriate support and is very happy with the outcome.

Case study: Impact of an on-going complaint at SWBHT

HWS actively supported a complainant about the care of an elderly relative at Sandwell General Hospital. This included intensive support to help collate and document anecdotal evidence to present a coherent case. The complainant had several meetings with the Hospital. After many months, this resulted in an acknowledgement of issues with care from the Trust. Healthwatch Sandwell recognised this as a significant incident. This resulted in further interrogation of our existing data, eventually leading to the major report, 'Why Do Good People Allow Bad Things to Happen?'

Our plans for next year



Future priorities

Having started to make a real impact during 2015-16 as the patient voice of health and social care, we see the following year as one of consolidation.

We have developed a network of strategic contacts and representation. We believe we are seen by partners as a positive representative to work with, whilst strongly maintaining our integrity and independence. As a critical friend, we can bring real challenge and credibility to those who engage with us. We now aim to build further on this base, utilising it for the benefit of users of health and social care services.

We have now got in place skilled staff and effective systems for reaching out to communities and finding out what matters to them and what their issues are. We want to capture and improve the methods we use for doing so, which will enable us to be more effective and deliver an even greater impact.

Being clearer about how we work, will enable us to use volunteers more effectively. We see volunteers as one of the key ways in which we can increase our resources, and be more effective as the patient voice. Therefore, increasing volunteers is one of our main aims for the coming year.

We are very proud at Healthwatch Sandwell of our record of innovation, with projects and services such as CompareDrs.com. We want to continue this, particularly given the need to be more effective with reducing resources,

and will be looking for creative ways that we can achieve this.

Our society is continuing to change, with new people and groups arriving regularly. We believe that we have made real progress on reaching the seldom heard, but we must remain aware of the ongoing challenge. We want to consider who we are not reaching, such as newly arrived refugees, and to develop methods to reach out to them, hear their issues and understand their lived experience.

We are aware that having reached the end of our third year, we have not appointed any new Board members since we started. At the same time, we have been losing Board members. Therefore, we need to appoint new members early in the year, and then decide how we will refresh and replenish the Board going forwards.

We are aware that Healthwatch England are undergoing changes, with the departure of their Chair and Chief Executive Officer last year, and Central Government clarifying their role as being to support local Healthwatches. These changes have seen them move closer as an organisation to the Care Quality Commission, whom we also work closely with. Although a separate organisation to ourselves, they are a very important national advocate and any developments may well have an effect on our future options.

Our people



Our board

The members of our Board are:

- Pam Jones. Chair Apr 2013 - Dec 2015 (Resigned Jan 16)
- Parminder Dhani (Resigned Jan 16)
- John Clothier. Chair Jan 2016 - pres
- Wasim Ali
- William Hodgetts
- Doug Round
- Geoff Tranter
- Kwadwo Owusu-Darko
- Teresa Culverwell

Healthwatch Sandwell is governed by its community Board who are ultimately responsible for all decision making. It is proud to have had this level of community control from the start.

A Business and Finance Sub Group comprising of Board members, meets and reports back to the main Board as and when required. There is a regular meeting of Board members to consider the quarterly Healthwatch Activity Report. This is concerned with matters relating directly to health and social

care, providing the space to be properly considered without distraction, and to allow the main Board meeting to concentrate on company matters. This meeting, along with the main Board meeting, are held in public.

Healthwatch Sandwell Board members take an active role in representing the view of patients on various strategic partnerships and groups throughout the Borough. The Board aims for every member to be the lead in at least one area e.g. Hospital Trust. This approach ensures that representation of patient's views is as close to the community as possible.

How we involve lay people and volunteers

The involvement of lay people and volunteers is at the very heart of our governance and decision making, with the Board being comprised of community volunteers. The Board have overall control of all decisions. Their main meetings are held in public, supported by information gathered from the public.



Our finances



INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		175000
Previous year's reserves (Local Authority)		42000
Additional income		1052
Total income		218052
EXPENDITURE		
Operational costs		15478
Staffing costs		201383
Office costs		4464
Total expenditure		221325
Total Loss		(3273)
Balance brought forward		4159
Reserves		886

Note: 43,000 of income has been deferred into 2016-17 year. This is recorded on the balance sheet.

Contact us



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Email: info@healthwatchesandwell.co.uk

Website URL: www.healthwatchesandwell.co.uk

We will be making this annual report publicly available by 30th June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group, Overview and Scrutiny Committee, and Sandwell MBC.

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.



