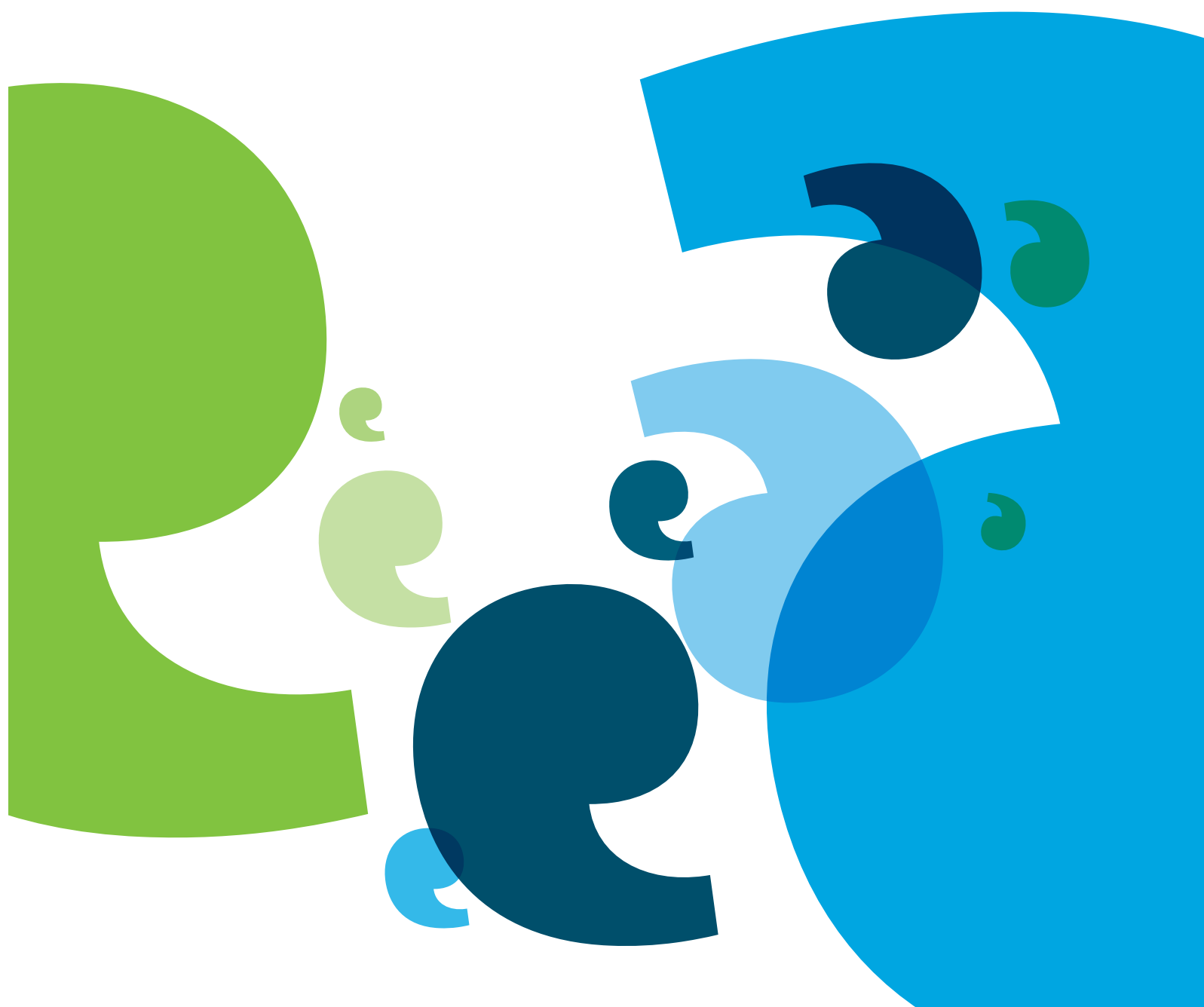


Healthwatch Reading
Annual Report 2013-2014





Healthwatch Reading was fortunate to transition from Reading Local Involvement Network including the transfer of Board and Staff to the new organisation. We recruited a group of Trustees and set up Healthwatch Reading as a Charitable Incorporated Organisation. Under this new structure the Board would be responsible for the workplan and the Trustees would oversee the development of the organisation.

It has been a very busy and successful year. We have increased our engagement with local people, carried out two key pieces of work engaging young people, and further developed our work to reach out to those groups who are seldom heard. Healthwatch Reading worked on eight different projects, resulting in a number of recommendations for improvement to local services. These involved the engagement of hundreds of local people and their time to speak with us has been invaluable in bringing about local service change. Healthwatch Reading also focused a lot of the year on developing relationships with the new Clinical Commissioning Groups (CCGs) and building on relationships with other local commissioners and providers of services. In particular working with local voluntary organisations through the setting up of a new forum called Healthwatch Voices. As a result Healthwatch Reading has received a record number of contacts from the local public and is working to support several members of our local community to raise issues and work towards improving services. This work in particular has led to the Local Authority awarding Healthwatch Reading the contract to manage and run advocacy support for those who wish to make a complaint about a NHS service. We would like to thank all our partners and supporters and our local community who have helped to make this a successful year.

Executive Summary

Healthwatch Reading are pleased to introduce our first Annual Report. Over the past twelve months Healthwatch Reading has been developing into a robust and active organisation representing the views and experiences of local people.

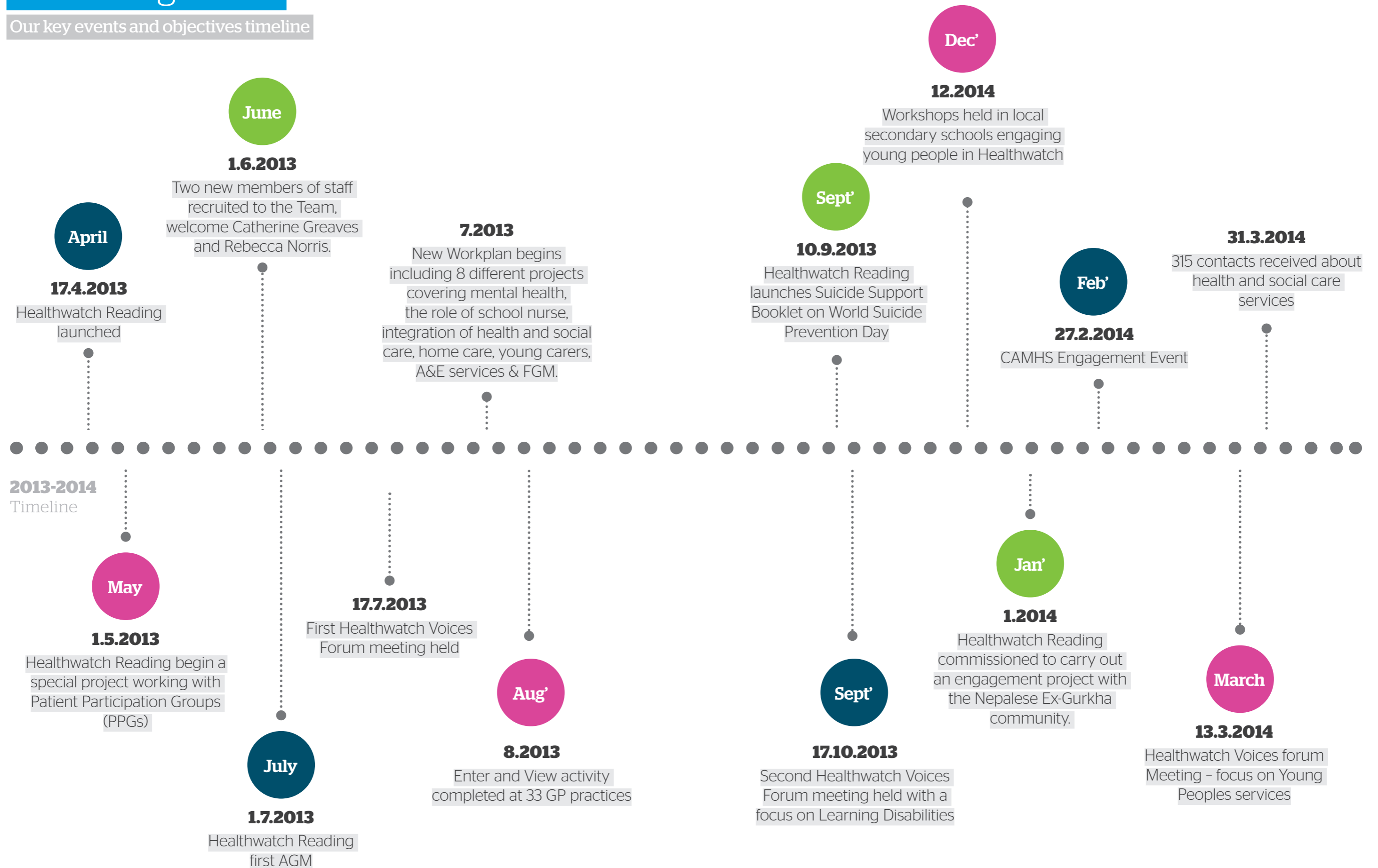
Healthwatch Reading is the new local 'consumer champion for health and social care'. We help people get the best out of their local health and social care services; whether it's improving them today or helping to shape them for tomorrow. Our work involves:

- **Engaging** - with all members of the local community, living and working in Reading who use Reading services. Their views are gathered to understand the way services are delivered
- **Influencing** - the way services are designed and delivered based on evidence from those who use services. Also influencing how services are set up and commissioned by having a seat on the Health and Wellbeing Board
- **Information and Advice** - Providing people with information, advice and support about local health and social care services

The Healthwatch Reading Board

2013 at a glance...

Our key events and objectives timeline



2013 - a year in review

Our key events and objectives

17.4.2013

Healthwatch Reading launch event.

Over 100 local people and groups attended the launch event in Reading. The event outlined the role of Healthwatch Reading and how local people could get involved to influence service delivery.

1.5.2013

Healthwatch Reading begin a special project to develop the local patient voice by working with Patient Participation Groups (PPGs) funded by a successful bid to the CCGs Partnership Development Fund. This project aims to support the development of local patient participation groups in GP surgeries across Reading. It will engage members of the community in having an active voice in shaping local health and social services and explore ways to network the groups and work more closely with Healthwatch Reading.

1.6.2013

Two new members of staff recruited to the Team, welcome Catherine Greaves and Rebecca Norris.

1.7.2013

Healthwatch Reading first AGM.

At the first Annual General Meeting a new Board was elected. The Board is made up of 11 members, all of whom are local people who live or work in Reading. Two spaces on the Board were created for the

Chairs of the CCG Patient Voice Groups. The Board is made up of the following people and their area of interest and/or expertise:

Sheila Booth - Physical Disabilities and Sensory Needs

Monica Collings - Social Care

Linda Dobraszczuk - Public Health and Mental Health

Douglas Findlay - Young People and Pharmaceutical Services

Tony Hall - Care for the older and Elderly and GP services

Sue Pigott - Learning Disabilities

Reverend John Rogers - Engagement with the Faith community and Social Care

David Shepherd - Commissioning of Services

Helena Turner - Community Engagement, Young People and Mental Health

Co-opted Members

Bernard Dominic - Chair of North and West Reading CCG Patient Voice

Carol Munt - Chair of South Reading CCG Patient Voice

David Shepherd was nominated to be the Healthwatch representative on the Health and Wellbeing Board. He was involved in the Shadow Board and has been involved in the workshops aimed at developing and shaping the Health and Wellbeing Board.

The workplan

Engaging with local people, partners & organisations

7.2013

New workplan agreed by the Board

The workplan included the following focused projects. The projects were approved by the Board and were based on evidence that had been gathered from local people and the intelligence gathered by Board members. All projects involve engaging with local people through interviews and/or surveys and working with local partners or voluntary sector organisations. Once information is gathered from local people recommendations for service improvement are then made. Following this Commissioners and Providers are then asked to respond to the recommendations. The report is published and can be found on our website.

1. The physical care needs of people with mental health issues, are they recognised and treated appropriately?

Key Findings from the report, which will be published in Summer 2014.

- GPs not listening to physical health issues and treating physical complaints as part of the mental health issue.
- Always assuming that physical health issues are related to side-effects or lifestyle.
- An assumption that family/carers will be able to manage the physical health needs of their family member/person they care for.

2. The transition from children's mental health services to adult mental health services

During 2012-2013 Healthwatch Reading (then Reading LINK) carried out a project on children and adolescent mental health services and from that piece of work arose the need to explore the transition to adult services. Key findings from the report due to be published in Summer 2014:

- Not being included in the process
- People found that they were waiting months for their first appointment.
- There was no introduction to new care team or handover so no trust or relationship was built.

Case Example: A young lady found out that she was pregnant during the transition but did not know who to contact about her fears about taking medication while she was pregnant so she stopped her medication suddenly. We met with her and she was starting to feel very unwell and anxious and contacted her GP on her behalf. She discussed her issue and was assured by the GP that her medication was fine to take while pregnant so she returned to the medication regime and feels much better. The issue however was that she was unsure who to contact during the transition.

The workplan

Engaging with local people, partners & organisations



3. Exploring the role of specialist school nurses to support the mental health of young people in secondary schools

This project was organised in partnership with the Youth cabinet and a survey of 170 local young people was carried out. Key Findings:

- 47% of young people did not know when the school nurse was available in their school.
- 58% did not know or were unsure how to contact their school nurse
- 52% of young people wanted to be able to contact their school nurse via email.
- 50% of respondents would consider talking to a school nurse about their mental health.

4. The integration of health and social care services and the impact on those who have experienced delayed transfers of care

This project is underway and has so far involved in-depth interviews with 7 local people who have experienced a delay in the transfer of their care out of hospital. A full report will be out by the end of 2014.

5. The experience of users of home care services

This project involved interviewing people whose voices are seldom heard, in their homes about the services they receive. This was a partnership project with Adult Social Care services at Reading Borough Council.

The findings from this series of interviews echo the themes of the 2012-2013 research. In particular the latest findings re-emphasise the importance of punctuality of care workers' house calls, especially for the first visit of the day, as this will follow the longest duration spent alone, for many service users. As before, the need to train care workers to communicate effectively is also highlighted, especially with those who are hard of hearing.

Overall, service users send a strong message on the importance they place on the social contact that home care workers provide, especially for those unwilling or unable to leave their homes. Service users say the best care workers

don't just complete tasks; they also make a cup of tea, chat, make appointments on their behalf, help them out to their back gardens and seem to 'really care'.

The findings from this report will be used to inform the performance indicators for providers and "inform the ongoing development of the new 'frail elderly pathway in Reading. This pathway aims to support people to stay in their own homes for longer, prevent unnecessary admissions to hospital, and help them recover after periods of illness or injury. New local multidisciplinary teams will meet regularly to agree joint health and social care packages for service users, and a named, lead professional will be allocated to each service user." Joint response from Suzanne Westhead, Head of Adult Social Care: Reading Borough Council and Gabrielle Alford, Director of Joint Commissioning: Berkshire West CCGs.

6. The experiences of health and social care services by young carers

Key findings:

- Young carers want and need more support from teachers and school nurses.
- Young carers want peer support from specific young carer groups.
- Contact with/referrals to GPs is non-existent.

Our workplan

Engaging with local people, partners & organisations

7. To understand the level of use of A&E by the Polish community and promote education on appropriate use of services.

Key Findings:

- 79% of respondents reported that they registered with a GP when they first arrived in the UK.
- The Walk-In Centre in Broad Street Mall is well used by this community and 47% of all respondents had used it at least once since moving to Reading.
- Knowledge of the 111 service was reported as very low, by the focus group.
- 41% of respondents reported they or a member of their immediate family had attended the Emergency Department (ED) at the Royal Berkshire Foundation Trust (RBFT), at least once within the past year.
- 64% of respondents reported that they had travelled back to Poland to access healthcare services there, since moving to the UK.

Key recommendation made to the CCGs:

'Provide more written information in Polish about NHS services'

Response to recommendation by the CCG:

The project has highlighted that there is a lack of awareness of the Out of Hours GP Service (Westcall) and the NHS 111 Service and identified a need for the local NHS to provide more written information in Polish about these services.

We are very keen to do this and are currently exploring the idea of developing a Polish-language mobile app which will provide information about NHS services and help direct people to the most appropriate service. We believe this app is the most appropriate way to respond to the information needs of this community.

8. Female Genital Mutilation

During an information and awareness event for Berkshire organisations regarding FGM several issues were raised regarding reporting and safeguarding. We are aware that numbers are expected to rise in our locality over the next three years due to immigration patterns so Healthwatch Reading took it as an issue, to look at policies and procedures in place in Reading safeguarding babies and girls. Information requests were sent to Royal Berkshire Hospital and the Child Protection at Reading Borough Council. The information sent back highlighted a discrepancy in the information and closer working is recommended. This report will be published in Autumn 2014

2013 - a year in review

Our key events and objectives

17.7.2013

First Healthwatch Voices Forum meeting held.

Healthwatch Voices is a quarterly forum set up by Healthwatch Reading in order to work better with the Voluntary sector and represent the views of their users. Each forum has a theme and involves networking and gathering the views from the sector and sharing these with Providers and Commissioners. The first meeting included a workshop on the importance of monitoring and creative ways to collect feedback from users.

10.9.2013

Healthwatch Reading launches Suicide Support Booklet on World Suicide Prevention Day.

Healthwatch Reading had previously worked on a project to explore the number of suicides at Prospect Park Hospital. As a result of this work Healthwatch Reading spoke to families about their experiences and learned that there was a lack of information and support available to them. Therefore in discussion with CRUSE Bereavement Care, No.5 Counseling Agency, Daisy's Dream and The Coroners Court Support Service, Healthwatch Reading established a working group to produce a booklet outlining support services available to families at every stage of the process. This booklet was launched on

October 10th by Board Member Linda Dobraszczyk who lost her daughter to suicide. "What families really need when a loved one carries out a suicide is a warm, independent human to help them through the practical and grieving process. I believe this new guide will be a fitting legacy of Eva's, which will help families find the support they need."

17.10.2013

Second Healthwatch Voices Forum held with a focus on Learning Disabilities. This event was held in partnership with charity Talkback and was partly led by service users, helping services understand the best ways to work and communicate with them.

12.2013

Enter and View activity completed, visiting 33 GP practices to assess their knowledge of and access to the Patient Participation Groups at their surgery. We reviewed information on GP practice websites, we asked reception staff about how to join the PPG, what the PPG did and reviewed PPG information available to patients in waiting rooms.

We found that reception staff could be better informed about their PPG in order to encourage patients to join their PPG. We found that some surgeries were good at putting information into their waiting rooms but a high number of surgeries did not display information about their

2013 - a year in review

Our key events and objectives

PPG, while reporting they did not get interest from patients to join the PPG. A full report is available on our website.

1.2.2014

Healthwatch Reading commissioned to carry out an engagement project with the Nepalese Ex-Gurkha community. The aim of the project is to gather an understanding of how the Nepalese Ex-Gurkha community accesses health services and their experiences of these services.

27.2.2014

CAMHS Engagement Event

Following the recent publication of a report published by Healthwatch Reading in 2013 on local peoples experiences of Children and Adolescent Mental Health Services (CAMHS), Healthwatch Reading came together with Reading Families Forum and Reading Children's and Voluntary youth Services (RCVYS) to hold an event to share learning and hear feedback to the report.

This event focused on bringing those involved in working with young people who use the CAMHS service, parents and carers and the providers and commissioners of CAMHS. This included Berkshire Healthcare Foundation Trust and the Commissioning Support Unit, parents, carers and the local youth and education services.

Key findings:

- Better communication is needed between CAMHS and other services, as this will improve outcomes for families.
- Better promotion of the CAMHS service and a much clearer definition of what CAMHS is and what do they do.
- A named contact that other professionals can contact for information and updates.
- More multi agency working between health, education and support services to improve outcomes for families.
- Recognition of families and the expertise that parents have when it comes to their child.
- Emphasis on the family as a whole.
- Clearer more effective information about complaints.
- Long waits for diagnosis and lack of information affect all areas of the child's and the family's life.

13.3.2014

Healthwatch Voices Forum Meeting focusing on young peoples services. This meeting included presentations from local young people on their experiences of counseling support services and being young carers, directly sharing these with providers and commissioners.

2013 in numbers

The numbers of people talking to us

315

Number of contacts for the year

Most contacts relate to these top three services:

19%

GP Services

15%

Royal Berkshire Foundation Trust

10%

Mental Health services

Case Study: Supporting GP patients
Mrs O'Reilly contacted Healthwatch Reading with what she thought was a minor issue, but one that affected her experience every time she visited her GP practice. As a mother of three young children, she liked that her GP surgery had a space within the waiting area, just for children, which helped keep them occupied while they waited. It was especially a godsend when appointment times ran over, sometimes up to an hour. But one day she went in and discovered the waiting room had been changed around to integrate more with the next-door pharmacy, and the children's area had disappeared. Healthwatch Reading agreed to log her feedback - anonymously - and it was fed back in the regular reports Healthwatch Reading submits to local GP practices. Healthwatch Reading also suggested Mrs O'Reilly raise the issue with the practice's Patient Participation Group - which tries to resolve these kinds of issues. Mrs O'Reilly fed back her concerns via a survey the PPG handed out during her next visit to her GP. She was surprised to find a few weeks later that a children's table and chairs and another toy had been set up in the waiting room to help keep children occupied during the waits. "I really wasn't sure if giving feedback would make any difference but I can say now I'm glad I spoke up - it's just a little change but it means my children, and other kids that parents bring in, don't get bored and start shouting or running around the waiting room, which would annoy all the other patients as well."

Strengthening the voice

How we are engaging and involving local people

Healthwatch Reading is involved with a large number of local networks and partnerships in order to gather the views of as many people as possible. Our engagement includes organising events and focus groups, being out in the community, at community events as well as working on more targeted projects.

- Involvement in **30** different local networks and groups that we meet with regularly
- Organised **27** targeted Engagement events with local people involving **643** people
- Worked on **8** focused projects involving **300** local people
- Took part in **25** local events and engaged with approx **600** people

An important part of this engagement is the Healthwatch network. This network is made up of the following and is where we go to recruit volunteers for projects, share information and ask for feedback and includes local people and local groups and organisations:

Reference Group Membership - **662**

Likes & Friends on Facebook - **50**

Twitter Followers - **1655**

Healthwatch Reading Year 2...

Healthwatch Reading goes into its second year with a good network of contacts and a full team committed to continuing the good work developed in the first year. We will be conducting a Reflective Audit of our first year to highlight some key early learning points that will help our development in the coming years. In addition as of April 1st 2014 Healthwatch Reading will also be managing and running the Advocacy Support Service for those wishing to make a complaint about a NHS service, one of a very limited number of Healthwatches awarded this contract across the country.

Healthwatch Reading will be looking to expand the numbers, knowledge and skills of its Board to ensure we are capturing the views and needs of our diverse community. We will focus the year on a number of key projects including the Integration of Health and Social Care Services and will continue with our efforts to promote Healthwatch Reading and engage members of the public in our work, as well as gather people's experiences and ensure their voices are heard.

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Financial statement

Our income and expenditure for the financial year

Healthwatch Reading Accounts 01.04.13 - 31.03.14

Income & Expenditure

1 April 2013 -31 March 2014

	Healthwatch Reading	PDF/PPG Support	TOTAL
Grant income	130,311	21,667	151,978
Staff Costs	79,880	16,602	96,482
Volunteer	886	-	886
Governance	120	-	120
Premises	-	-	-
Administration	1,107	-	1,107
Marketing	3,323	-	3,323
Activities	6,238	-	6,238
ICT	1,440	-	1,440
Finance & Fundraising	-	-	-
Legal & Professional	-	-	-
Contingency / recharges	16,880	5,065	21,945
Total Expenditure	109,875	21,667	131,542
Surplus / (Deficit) for the year	20,436	-	20,436
Funds brought forward 1st April 2013	21,802	-	21,802
Funds carried forward 31st March 2014	42,238	-	42,238



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