



Healthwatch Solihull

Annual Report 2016/17



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Message from the Steering Group Chair

There were only four months of the year left when I accepted the challenge of leading the new group that had been established to give strategic direction to the rejuvenated Healthwatch Solihull service.



However, in that short time, I believe that a good start has been made. Much still remains to be done as our new permanent contractor ECS takes over responsibility for delivering Healthwatch Solihull in July 2017.

Our newly formed Steering Group has quickly gelled, bringing a good mix of skills and experience to the table. We are in the early days of assimilating a picture of the local priorities as the public sees them and we will develop a greater clarity with that over the coming year.

We have yet to get fully to grips with the implications of emerging strategic movement in the provider arena, such as Sustainability and Transformation Plans and changes to Clinical Commissioning Group structures. However the significant work done in recent months to put the spotlight on provision of mental health services and appointment management at GP surgeries, two areas of known public concern, has brought the issues in these areas into a sharpened focus for us to inform the recommendations we are making.

The task of leading our advisory group as it embeds itself and becomes a vital partner to our delivery agents has only just begun. It is a challenge but one which I am relishing. Links to other Healthwatches in the Midlands are also starting to show the benefits of collaborative working. With a new government in place and the increasing pressures on the National Health Services and the national debate on Care for the elderly, Solihull Healthwatch has an important role to play and I am determined we will make an impact on behalf of the residents of Solihull..

Chris Warne



Message from the Interim Delivery Partnership

This year has given us a daunting challenge, but we have relished it, with every reason to believe that we have succeeded in our goals.

We are a partnership of five local charitable bodies, Colebridge Trust, Citizens Advice Solihull Borough, DIAL Solihull, Experts by Experience and Independent Advocacy Warwickshire. We were appointed in July 2016 to take the Healthwatch Solihull service in a new and more effective direction, on an interim basis, pending determination of more permanent arrangements for 2017/18 onwards.

In the forty weeks of the year that these arrangements were in place, we have been able to lay some sound foundations on which these longer term arrangements can build:

- + the profile of Healthwatch Solihull has been raised
- + the community sector has been engaged
- + an increasing number of people have given their opinions
- + an independent advisory group has been recruited and launched
- + two major studies of priority matters have been undertaken
- + one of these studies has been concluded and reported with nine key recommendations
- + relationships have been developed with key stakeholders
- + our statutory functions have been delivered.



Clockwise:
Dave Pinwell
Charlotte Vale
Alice Singleton
Kerry Turner
Peter Smith

The feedback we received tells us that Healthwatch Solihull is in a much stronger place than at the start of the year. We have a growing, whilst still immature, understanding of the key priorities that are emerging from the public voice.

We are confident that with the support of the new Steering Group, under the leadership of Chris Warne, the new delivery agent has a momentum that was previously absent, but can now be sustained and developed. We wish them every success in doing so.

*Dave Pinwell, Colebridge Trust
Kerry Turner, Citizens Advice Solihull Borough
Alice Singleton, DIAL Solihull
Charlotte Vale, Experts by Experience, Solihull
Peter Smith, Independent Advocacy,
Warwickshire*



Highlights from the year

This year we gathered views about services from 711 people



We have recruited an independent Steering Group to prioritise and oversee our work



We have published and gathered data through three separate surveys.



We have published a report on mental health services with nine key recommendations



We have held two public meetings for intensive exploration of priority topics



We've met hundreds of people at local community events





Who we are and what we do

We know that you want services that work for you, your friends and family. That's why we want you to share your experiences of using health and care services with us – both good and bad. We use your voice to encourage those who run services in Solihull to act on what matters to you.

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

Our key priorities in 2016/17

In addition to statutory responsibilities (which include gathering views about services, and making them known, and providing advice and information about getting access to services) the key priorities for the year have been to raise the profile and credibility of the service.

As interim providers, we set out to raise levels of engagement, with both the public and stakeholders, raise awareness of the Healthwatch Solihull brand, increase the level of feedback on services and use that feedback to prioritise topics for further detailed study.

Working with the Steering Group (see page 19) three such areas for further detailed study have emerged. The first two have been actioned this year and the third planned for further work in early 2017/18 (see page 17).

The two areas of study this year have been:

The Future of Mental Health Services

Feedback from users of mental health services indicated concerns about planned changes, with the projected closure of Solihull's acute mental health inpatient facility and planned developments to community based services.

A public meeting, focus group sessions with mutual support groups and a survey confirmed these concerns and put them into sharper focus.

Services were reported to be generally safe and welcoming and it was clear that patient facing staff, in particular, were held in high regard.

There were, however, concerns about forthcoming changes and the impact that these could potentially have on patients and their families.

Transport facilities to and from alternative acute centres in Birmingham, the availability of 'a place of safety' in a crisis and the clarity of consultation exercises were amongst the key issues highlighted.

Waiting times to access services also reflected as a cause of dissatisfaction.

Consideration of these matters and further dialogue with users and providers of services have led to the publication of our report with nine recommendations. These are now under discussion with the Clinical Commissioning Group and Mental Health Trust.

General Practice Appointments

Concerns about access to appointments at GP Surgeries have been recorded both nationally and locally in recent years. It was therefore determined by the Steering Group that a more penetrating study of the accessibility of appointments at surgeries serving the borough should be undertaken.

Three pieces of work were undertaken,:

- + A public meeting took an in depth look at the matter and explored the potential mismatch between surgery and patient aspirations and practice
- + Public opinion was gathered via an online and paper survey

- + A desk exercise gathered a comparison of the various appointment management regimes at surgeries across the borough

This programme of work was being concluded at the end of the year and the resultant report will be published in Summer 2017.

Working in Partnership

Our work has been shared between the five delivery partner organisations. Each has brought their different skills and expertise and their valuable contacts amongst stakeholder organisations, to the work that has been completed since the July start date.





Your views on health and care

Listening to local people's views

We have collected local people's views about health and social care services through our website, via postcards and surveys available in public places, via service providers and through running stalls at local fundays and in shopping centres.

- + In total we collected specific views from 711 people in eight months
- + a clear majority (approximately two thirds) of reports of individual experiences of services that people have used reflected a positive experience
- + It was unsurprising that 49% of these evaluations of individual services related to GP surgeries, given that primary care services are the ones accessed most frequently by the average citizen
- + We have benefitted from the help of colleagues in specialist community sector support services to ensure that voices in particular groups, eg carers, the disabled and elderly, were included
- + We have established a link with a local college to access the voice of young people.

What we've learnt from talking to service providers

We have conducted focused dialogue with service providers regarding strategic matters, especially with regard to the two research exercises undertaken during the year.

The key learning point that has emerged is that public perceptions of services can be affected by a mismatch between expectations and a provider's ability to match them within the constraints of available resources.



Where service users have an understanding of the level of service they might expect, they are more likely to be satisfied. Examples of good practice in this regard encountered during the year were:

- + a hospital clinic appointment letter for what might have appeared to be a straightforward check, but stated that a patient might expect the appointment 'to last three to four hours'.
- + periodic, ie several times per year, GP surgery newsletter in PDF format to patients which provided five pages of detailed guidance on making and cancelling appointments, ordering prescriptions and using online services.



*Helping
you find the
answers*

How we have helped the community access the care they need

People in Solihull have a strong network of advice and guidance services and Healthwatch Solihull is but one spoke in a well populated wheel of access points, through which citizens can obtain guidance and referral pathways to the services which they require.

We complement the two Community Information and Advice Hubs in the borough, alongside the many public and community sector agencies that are now well versed in effective referrals.



Accordingly, there has been a low level of demand on the Healthwatch service to fulfil this responsibility. Nevertheless, when called upon to help individuals access the services required, we have been able to do so, whether this be to support services or to our complaints advocacy colleagues.

Case Study

A resident who had recently moved into the Solihull area contacted us. She needed some assistance to check that her assistive equipment was fitted correctly.

The lady concerned is profoundly deaf and wears a hearing aid together with a cochlear implant and her husband also has a significant disability.

She had previously been provided with a vibrating alarm for times when her husband needed help at night. It also alerted her to the fire alarm in case of emergency or if the doorbell rang. She was concerned that she needed to ensure that this equipment was working correctly so that they were safe.

She had contacted the agency which originally supplied the service but was told that they were unable to help because the maintenance service provider had gone out of business.

The Healthwatch enquiries team made a referral to DIAL Solihull, asking them to provide support in meeting this requirement. Dial identified and contacted the manufacturer directly.

The manufacturer was able to provide detailed step by step instructions on how the equipment should be fitted correctly and as a result our client was able to understand how to independently manage the installation.

The manufacturer responded quickly to all communications. This meant that these needs were fully met in a timely manner, ensuring that the couple were not inconvenienced or left unsafe.

DIAL's Alice Singleton reported the feedback from this client as follows:

“She was extremely happy with the support she was given, in particular as she had been unable to access support from several providers before being put in touch with DIAL by the Healthwatch Solihull team.”

A woman with short dark hair, wearing a dark green top and a watch, is holding a white survey card. The card has text that reads: "GP recently", "Have you", "visited", "Care Home", "What was it like?", and "Tel:". A large green circle and a smaller blue circle overlap on the left side of the image, partially obscuring the woman and the card. The background is a warm, orange-brown color.

***Making a
difference
together***

How your experiences are helping influence change

The feedback which Healthwatch Solihull receives regarding your experiences of services helps to build a picture of where best practice is delivering results and where services might be further developed.

This feedback is used by the Steering Group to prioritise future detailed investigative work and to inform dialogue with service providers with a view to influencing change.

Our report, 'The Future of Mental Health Services in Solihull', published late in the year, and available on our website, was triggered by public concern emerging with an awareness of the potential closure of the acute mental health services unit in the borough.

This report, whilst acknowledging that financial pressure and strategic approaches to treatment necessitated change, highlighted public concerns in nine recommendations now being discussed with providers.

Working with other organisations

Since the re-commencement of the Healthwatch Solihull service in July, we have sought to strengthen relationships with other stakeholders. Dialogue with neighbouring local Healthwatch teams in Coventry and Birmingham has proved fruitful on areas of joint interest.

We have established contact with the Care Quality Commission and participated in regional networking with Healthwatch England. Our report, 'The Future of Mental Health Services in Solihull' has been shared with both and received positive interest.

We have engaged with relevant providers and commissioners, particularly with Solihull Council, Solihull CCG and Birmingham and Solihull Mental Health Foundation Trust.

Engagement with the work of the Council's Health and Adult Social Care Scrutiny Board has been particularly important for sustaining an awareness of strategic developments and concerns. One of our team has attended each Board meeting as an observer. We have presented two positively received reports to the Board ourselves, our recommendations regarding mental health services aligning closely with the Board's deliberations.



How we have worked with our community

Our partnership with other community sector organisations has been strong and this has assisted with the gathering of views.

We gained a clear insight into the experiences of mental health service users by arranging well attended focus group style discussions with three local support groups.

Two well attended public meetings gave opportunities for the exchange of informed views between service users and providers. One of these attracted the attention of the media and was attended by a BBC journalist.



It starts with you

healthwatch

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Case Study

A Solihull resident family agreed to share their story and experiences. To protect and respect the identity of the family, however, names and other identifying details were changed.

Whilst studying away from home, Sam developed mental health issues and sought support for these. The quality of this support was poor and, as a result, Sam returned to the family home in Solihull.

Back at home, Sam's care and support from local Mental Health services was very positive and of an excellent standard compared to that previously experienced. Staff were caring and the atmosphere was positive and supportive.

Upon learning that acute inpatient provision in Solihull was set to close (with the loss of sixteen beds), Sam and wider family members were particularly concerned about how needs would be met with alternative provision in Birmingham.

Sam's family described the 'trek' involved during one earlier instance of Birmingham based provision for 'snatched conversations' with Sam of up to only twenty minutes, due to extended travelling time, and resultant heightened levels of anxiety and stress.

They expressed the view that the local facility would close without any clear transition to community care and with insufficient acceptance of the importance of local and neighbourhood support in recovery for people requiring effective, timely and needs driven treatment.

They stated that the process has left them with little confidence and trust in the situation and also fearful of what the future now held for Sam, losing a provision that was found to be safe and effective and close to family and friends.

Follow Up

We included a detailed version of the case study in our report 'The Future of Mental Health Services in Solihull'.

This and other feedback received led to our flagging up the issue of transport to Birmingham based acute inpatient facilities in an interim report presentation to Solihull's Health and Adult Social Care Scrutiny Board and in our final report, with a recommendation that the issue be given further consideration.

We further recommended that a programme to grow confidence in the provision in the local community amongst users of services would be beneficial.


These recommendations were put to the Solihull Clinical Commissioning Group and Birmingham and Solihull Mental Health Foundation Trust as commissioners and providers of services respectively.

With regard to the transport matters, the providers replied that they were now scoping the potential for a person to step down to a nearer assisted living centre where appropriate and clinically safe to do, adding:

"The outcomes from this approach are expected to be shorter stays for Solihull people in Birmingham Units."

With regard to confidence amongst users of services, they added:

"(We) have good experiences of involving and co-producing service redesign and transformation in collaboration with people with lived experience. Learning from this and other projects will contribute to growing the confidence of the service users who access the services."

A woman with long brown hair is looking down at a green and blue leaflet. The leaflet has the Healthwatch logo and the text 'Your voice counts'. There are large, semi-transparent orange and green circles overlaid on the image. The orange circle is on the left, and the green circle is in the center, partially overlapping the orange one and the woman's face.

Our plans for next year

healthwatch

Your
voice
counts

Put your comments to us at:
If needed, 0115 954 8114
Healthwatch team
At: 100
100

Call us on our freephone number:
0800 60 1000
Visit our website:
www.healthwatch.co.uk

100
100
100

What next?

The Interim Delivery Partnership is to continue providing the Healthwatch Solihull service until the end of June 2017.



During this period there will be two key priorities:

- + The completion of our study into General Practice Appointments in the borough so that a report can be published and recommendations taken to stakeholders.
- + The partners and Steering Group have identified that the views of young people are under represented amongst those gathered in 2016/17 and a specific study will address this.

From July 2017 onwards, the Healthwatch Solihull service will be delivered by Engaging Communities Staffordshire, whose plans are:

July and Beyond

Volunteer Recruitment: We will use our 6 key volunteer roles to work with existing Ambassadors and to recruit new volunteers. We will provide full induction and training.

Enter and View Visits: We will train volunteers to act as Authorised Representatives and develop a targeted Enter and View programme, to understand services from the point of view of patients and service users.

Community Engagement: We will have a dedicated Community Outreach Officer who will reach out and establish links with local communities, including with seldom heard groups.

Strategic Engagement: Healthwatch Solihull will provide independent and impartial representation at the Health and Well Being Board, Health and Social Care Scrutiny Board and others. We will particularly focus on understanding how the Birmingham and Solihull Sustainability and Transformation Plan will impact on Solihull services and residents.

Providing Information, Signposting and Non-Clinical Advice: There is a full listing of all Solihull health and care services on our website, and we will respond to all public enquiries via our Freephone and website within 1 working day.

Healthwatch Advisory Board: The Healthwatch Solihull Advisory Board will carry out its work in a transparent and effective manner, including holding regular public meetings across the Borough, including public listening sessions.

Healthwatch Priorities: We will consult with Solihull residents to identify the key health and social care issues. We will hold a public event alongside an online consultation and a review of feedback received to identify our future priorities.



Our people

Decision making

Decision taking in Healthwatch Solihull is undertaken in an accountable, open and transparent way. The decisions are made at Steering Group meetings (see below).

How we involve the public and volunteers

We actively seek the development of volunteer involvement in our work. In addition to involving volunteers in our public engagement and research activities. One of the key developments of the past year has been the recruitment and development of a volunteer led Steering Group.

This has been formed to direct our strategy and make the key decisions on priorities and recommendations. The agreed Terms of Reference provide for the Group to comprise, as voting members:

- + six diverse volunteer members of the public, including our independent Chair, Chris Warne
- + three members appointed from voluntary and community sector groups which represent specific service user groups, eg carers, learning disabled
- + three of our volunteers.

Delivery partners, alongside Council and CCG representatives, inform the Steering Group meetings to assist the decision making process.

Whilst each of the delivery partners remain responsible to their own management Boards for legal and fiscal matters, they have been, since the Steering Group was formed in late 2016, responsible to it for service related matters.

Furthermore:

- + Steering Group meetings are public with an open invitation
- + Steering Group meeting minutes are available on our website.

Amongst the Steering Group responsibilities are:

- + Deciding priorities and overseeing the action plan
- + Commissioning, receiving and approving reports of activities
- + Approving recommendations to service providers
- + Providing reports of activities to key stakeholders
- + Planning and overseeing enter and view activity
- + Ensuring the active involvement of local people
- + determining representation to local Boards and committees.





Our finances

The funding for the provision of the Healthwatch Solihull service, on an interim basis to March 2017, was awarded by Solihull Council in July 2016 following a tendering exercise.

The service has been delivered on this interim basis by five partners by allocating existing resources on an 'as required' basis.

Accordingly, only one member of staff was fully employed for Healthwatch Solihull responsibilities, and the staff cost will be low in comparison with national norms, other work being contracted out to partners as operational costs.

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	£90,000
Additional Income	Not Applicable
Total income	£90,000
Expenditure	£
Operational costs	£72,431
Staffing costs	£11,876
Office costs	£0
Total expenditure	£84,307
Balance brought forward	£5,693



Contact us

Get in touch

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Addresses of delivery partners:

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Address: Lower Ground Floor, The Core, Homer Road, Solihull, B91 3RG

Phone number: 0121 704 7861

Citizens Advice Solihull Borough Ltd,

Address: 176 Bosworth Drive, Chelmsley Wood, Solihull, B37 5DZ

Phone number: 0121 704 7810

DIAL Solihull

Address: 167 The Parade, Kingshurst, Solihull, B37 6BB

Phone number: 0121 770 0333

Experts by Experience Solihull CIC

Address: PO Box 17126, Solihull, B90 9JP

Phone number: 07803 335601

Independent Advocacy Warwickshire

Address: Stoneleigh Park, Avenue M, Stoneleigh, Kenilworth, CV8 2LG

Phone number: 024 7669 7443

We will be making this annual report publicly available on 30 June 2017 by publishing it on our website and sharing it with Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

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

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