



# Health Scrutiny Panel

19 December 2013

<b>Report title</b>	Healthwatch Wolverhampton – progress report	
<b>Cabinet member with lead responsibility</b>	Councillor Sandra Samuels Health and Well Being	
<b>Wards affected</b>	All	
<b>Accountable director</b>	Sarah Norman, Community	
<b>Originating organisation</b>	Healthwatch Wolverhampton	
<b>Accountable employee</b>	Carol Lamyman	Healthwatch Chief Officer
	Tel	01902 426 271
	Email	clamyman@healthwatchwolverhampton.co.uk
<b>Report to be/has been considered by</b>	List any meetings at which the report has been or will be considered, e.g.	N/a

## Recommendation for action or decision:

The Panel is recommended to:

1. Comment on the progress made by Wolverhampton Healthwatch in delivering its work plan.
2. Agree to receive further progress reports on the work plan at future meetings.

## 1.0 Purpose

- 1.1 The purpose of this report is give members of the Health Scrutiny Panel the opportunity to discuss and review the current work programme as agreed by the Board of Healthwatch Wolverhampton.

## 2.0 Background

- 2.1 Healthwatch Wolverhampton (HWW) is the new independent consumer champion for both health and social care. HWW works in the best interests of the patient or citizen. HWW is not an activist or lobbying group; rather it utilises intelligence gathered from service users to improve the quality and safety of NHS and social care provision.
- 2.2 HWW was set up as an independent Community Interest Group with its own Independent Chair, Maxine Bygrave. Maxine provides strategic overview to the HWW Board. Carol Lamyman was appointed as Healthwatch Manager on 30 July 2013. HWW employs 2.87 WTE staff, and has 10 voluntary Board Members and 4 Directors.
- 2.3 Local Healthwatch is a vital part of the Government's plans to give people a stronger voice and drive improvements in health and social care services. Healthwatch exists in two distinct forms – Local Healthwatch (Wolverhampton, in this locality) and Healthwatch England. (<http://www.healthwatch.co.uk/>)
- 2.4 HWW is able to 'Enter and View' publicly funded health and social care services either as unannounced spot checks or at agreed monitoring visits.

'Enter and View' visits are conducted by a small group of trained volunteers who visit health and social care services to observe and assess the service being provided; write a group report with suggestions for improvements which becomes a public document; and follow-up suggested recommendations where necessary. The findings of the visit will be reported to the providers and commissioners of service and, where appropriate, to the regulators.

Training for members regarding 'Enter and View' has already taken place in September and November. Wolverhampton Council and other organisations provide mandatory training to HWW on safeguarding and other issues.

- 2.5 A representative (usually Chair, Chief Officer or Board member) of Healthwatch has a seat on the local health and wellbeing board, as part of the shared local leadership assessing the needs of communities and planning how they will be met. A representative of Healthwatch is also on the boards of the Wolverhampton Clinical Commissioning Group, West Midlands Ambulance Service, and local NHS Trust, as well as on numerous other committees.
- 2.6 The Chief Officer has recently commenced monthly meetings with The Royal Wolverhampton NHS Trust's Deputy Chief Nurse, so as to discuss issues of significant concern.

2.7 Key Performance Indicators are being drafted for ratification by the Board of Healthwatch Wolverhampton. These are not yet finalised but should be ratified by Board and presented in April 2014.

2.8 During the last three months, volunteers within the Healthwatch office have marketed successfully the organisation via a variety of means e.g. telephone cold calling, targeting schools, University, Fitness centres and organisations affiliated to Healthwatch Wolverhampton on a corporate basis.

### **3.0 Progress to December 2013**

#### **3.1 Governance**

- Board meetings are held monthly. Meetings are held in public with minutes available on the HWW website.
- Recruitment of three new Non-Executive directors has been made to the Healthwatch Board. These are individuals who have vast experience over many years, of strategic planning in Health and Social Care.

#### **3.2 Core Objectives**

Gathering the views and understanding the experiences of all who use services, their carers and the wider community

- HWW has a community engagement strategy from which the views of local groups and communities is gathered
- As part of the community engagement strategy is a volunteer programme which will enable greater reach across the city
- HWW is maximising opportunities to gather views of the public and is in the process of upgrading the website to enable online feedback capture
- HWW Enter and View training programme is in place with one session completed and will be rolled out shortly

Making people's views known, including those from excluded and under-represented communities

- HWW undertakes feedback meetings with key stakeholders including Local Authority, CCG, local hospital trusts and regulators
- HWW attends and contributes to the Quality Surveillance Groups hosted by NHS England Area Team
- HWW will be producing thematic reports which will be shared with stakeholders and published on the website;

Promoting and enabling the involvement of people in the commissioning and revision of local health and social care services and how they are monitored

- All opportunities for engagement and involvement are distributed to HW supporters and communicated through various channels;

Providing non-clinical advice and information about access to local care services so choices can be made about local care services

- The information helpline is in place and responding to 150 (minimum) calls per month
- The helpline is currently staffed by one member of staff and recruitment to a volunteer programme is on-going
- Requests for information include areas such as finding an NHS dentist, physiotherapy services, counselling for the bereaved etc.

Formulating views on the standard of provision and whether and how the local care services could and ought to be improved

- This is in development as part of the Work Plan and a snapshot of concerns or issues is compiled within Appendix 1.

Provide access to independent NHS complaints advocacy service

- HWW makes direct referrals to Wolverhampton Health Advocacy Service on a regular basis

Recommend investigation or special review of provider services via Healthwatch England or the Care Quality Commission

- HWW is able to undertake this function and has developed relationships with both Healthwatch England and the Care Quality Commission

### 3.3 Work Plan

HWW's Work Plan is comprised of and based on issues brought to the attention of the Healthwatch staff team or members and is ratified by Board members. Current topics include:

- Nursing/Care home provision – a pilot visit to Inspirations Care Home, Wolverhampton is scheduled for 16 December 2013
- Mental health services
- GP appointment systems – calls are received regularly from individuals who are unhappy at the non-availability of suitable appointments

- Chiropody services – Healthwatch has received concerns regarding access to a nail cutting service for those who are not eligible for the existing provision but do have some needs. This issue is being explored with Wolverhampton Clinical Commissioning Group considering the feasibility of implementing a service similar to that available in the Dudley area.
- Public Health including obesity, sexual health, maternity services. HW is working with Public Health to elicit the views of the public in relation to the sexual health review.
- Any items of concern as compiled by the Care Quality Commission following their recent visit to New Cross Hospital.

### 3.4 Patient and Public Engagement (PPE) Activity

- PPE is an integral theme running through all Healthwatch work. Since commencement in April 2013, there have been 29 public engagement events involving diverse, multi-cultural groups. There was a Civic launch on 30 April 2013 and a well-attended and successful members' launch on 17 October 2013. The latter event was well attended with interactive sessions covering a host of health and social care themes. Response and feedback was positive. Volunteers assist the small complement of Healthwatch staff within the office environment on an ad-hoc basis.
- Supporters (850 in number) of HWW have regular interaction and involvement with the organisation. A dedicated Community Engagement worker undertakes talks on a weekly basis and is available during the day or evening, whichever is most practical to the audience.
- The Chair undertakes presentations at strategic events. The Chief Officer is also available thereby ensuring that Healthwatch is made known to as many groups and citizens as possible within Wolverhampton. The Community Engagement Officer works within the locality targeting and addressing community and 'hard to reach' groups.

### 3.5 Media and Publicity

- Regular items in the print press, (Express & Star and Chronicle) radio (Free Radio) and television (BBC) has helped boost the number of individuals in the Wolverhampton locality who now provide regular feedback on health and social care issues.
- A new method of eliciting the views of the public via an innovative, dynamic website is planned for launch in January 2014. Discussions are underway to have quality, high-profile endorsement.
- A newsletter, produced quarterly is disseminated to key partners, supporters and the general public.

#### **4.0 Financial implications**

- 4.1 There is a Local Authority grant arrangement with the host organisation. Wolverhampton Voluntary Sector Council provides Healthwatch with an operating salary of £200,000 a year for 3 years (2013-16). In addition to receiving statutory income, HWW is actively seeking to supplement this by income-generation as of January 2014.

#### **5.0 Legal implications**

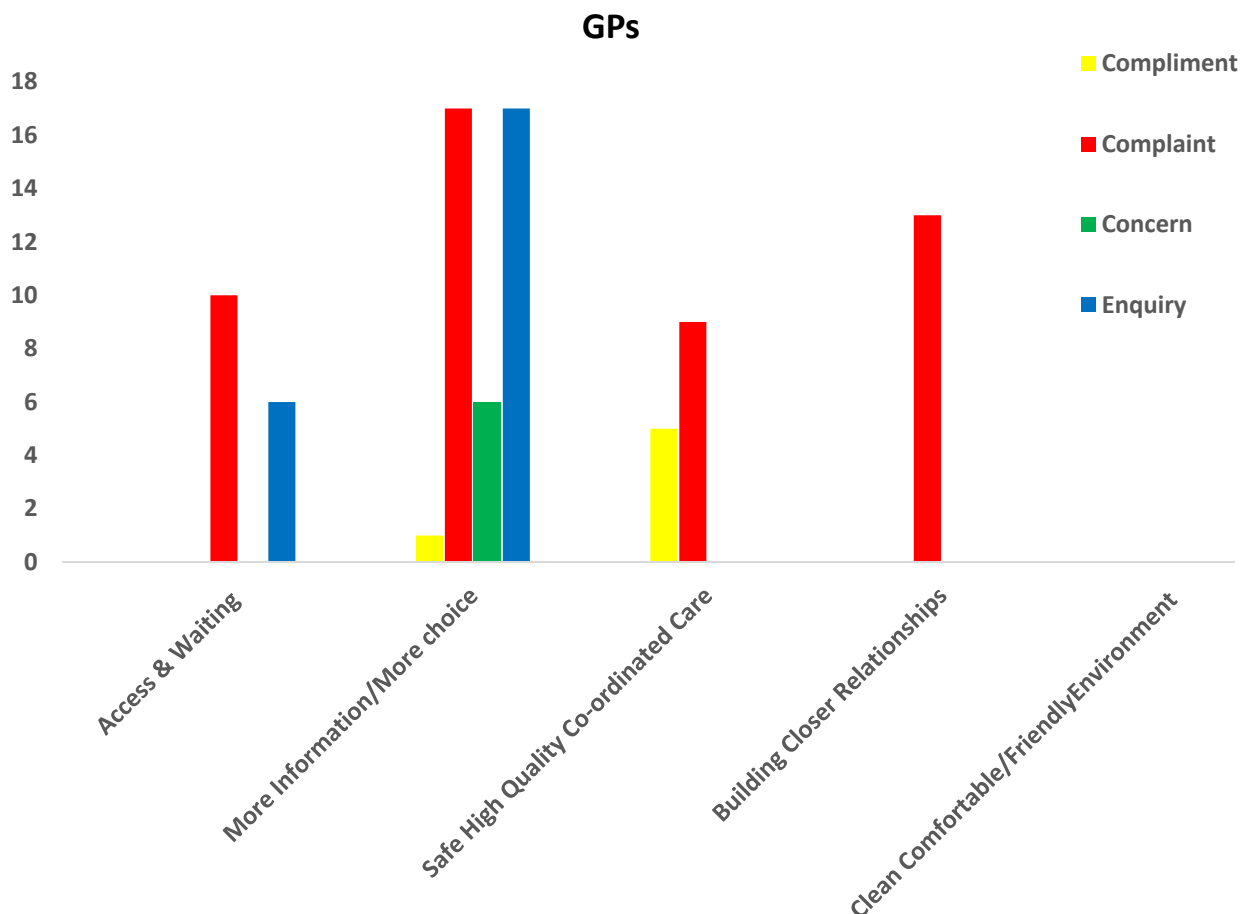
- 5.1 The Commissioner at Wolverhampton City Council meets with and receives quarterly and intermittent updates as necessary from HWW in this regard.

#### **6.0 Equalities implications**

- 6.1 HWW strives to ensure that the diverse health, social care, cultural and all other needs of the population of its locality are represented as fully as possible by the organisation.

Feedback collated Since April 2013 to November 2013 Healthwatch received 250 issues around Health and Social Care. Areas where Healthwatch receive the greatest comments from the public include; GP, New Cross Hospital, Social Services, Dentist, Mental Health – Black Country Partnership. Minor areas include Benefits, Penn Hospital, Willenhall Hospital, Staffordshire Hospital, NHS Community Services, Optical, other miscellaneous topics.

**Healthwatch received 84 issues around GPs**



## **Example Comments from Public during April 2013 – November 2013**

### **Access & Waiting**

#### **Complaint**

- *Dr Bagary, Ruskin Road, Wolverhampton, Scotlands. x is having difficulty making an appointment with her GP. She has to wait a long time before the surgery answers the phone. She does not get to see her GP for consistency. But has to see her locum.*
- *x from Pendeford - we have no pharmacy or doctors surgery near Dove Court instead they have moved to the health centre. :(*

### **More Information and Choice**

#### **Complaint**

- *My husband has Alzheimer/Dementia, asked my doctor to have him admitted at New Cross but he didn't. Next day I had to call Ambulance Service, they suggested that my doctor refers him to New Cross. He died 2 weeks later.*
- *Having problems making an appointment with the GP. If x Calls the surgery he is told no appointments available, and to make an appointment at the end of the month. But each time he does he sees a locum. Surgery - Alfred Square Road, Wednesfield.*

### **Enquiry**

- *x rang wanting to know more information on GP surgeries that she could access. x is a dependent from Zimbabwe living with her sister.*
- *Laura from WHACS contacted the office and queried x referral. Laura wished to know what advice could be given to x.*



## **Safe High Quality Co-ordinated Care**

### **Complaint**

- *Thornley Street GP. 2 GPs have left who used to support patients with Mental Health. There are no doctors at the surgery who know about Mental Health*
- *Urban Village Centre – Prescription issue. Moved from Cornwall June 2013. Live in Wednesfield and Surgery is in Bilston. Have to catch 2 buses to hand prescription in person and then have to come back 3-4 days later. Doctor won't put me on repeat prescription because the notes have not arrived. Boots chemist can't get the prescription. I took my prescription list to doctor but they lost it. Then had to take all my medication packaging to be photocopied before having medication re-issued.*

### **Compliment**

- *Prestwood GP Surgery is very good. Doctor very good service but sometimes you can't get an appointment*
- *Dr Barry & Partners, 97 Blackhalve Lane, Wednesfield, Wolverhampton, WV11 1BB - 01902 731902 is excellent :)*
- *Showell Road Surgery brill!!*

## **Building Closer Relationships**

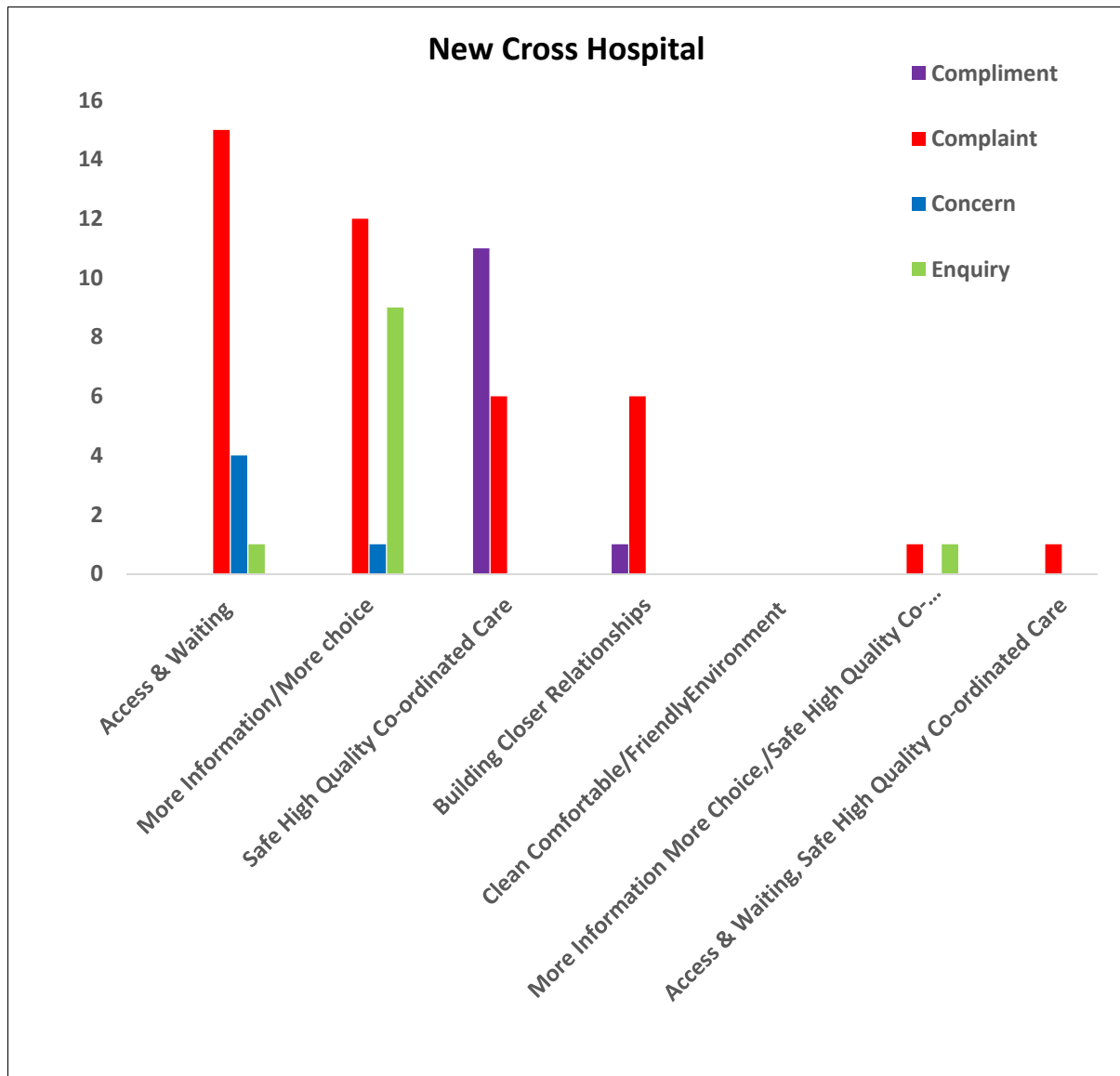
### **Complaint**

- *There needs to be better communication between doctors and palliative services - my nurse told my GP, I needed some new medication three days ago. The GP still hasn't sorted out the prescription.*
- *Doctors don't know enough about Lymphodema. They can't tell you straight away about how you should be treated. This delay led to me getting an infection. Getting doctors to listen to you*
- *I will not be going back to this surgery. If this is the way GPs are now operating it's no wonder many people are going to A&E departments*

[NOT PROTECTIVELY MARKED]

*inappropriately. I would rather go back there but hopefully will have a new and polite surgery to go to.*

**Healthwatch received 68 issues around New Cross Hospital. Some issues covered other services as well as New Cross Hospital ie. Ambulance service.**



Waiting time was the main reason for the public reporting a negative experience. A significant number was impressed with the care and treatment received. Healthwatch receives a range of enquiries that are signposted to relevant service providers ie. NHS Choices website.

Members of public have contacted Healthwatch office and given their observations whilst at New Cross Hospital.

### **Example Comments from Public during April 2013 – November 2013.**

#### **Access & Waiting**

##### **Complaint**

- *I have been waiting for an appointment at New Cross for Osteoporosis since March 2013*
- *New Cross: Routine appointment supposed to be sent home at 3 monthly but I have to ring up to chase up appointment. Better admin system needed*
- *X has had a knee problem for many years, He has had a number of cancellations for his operations.*

##### **Concern**

- *Healthwatch member phoned office, observed a cancer patient at the pharmacy waiting for at least 30 minutes then to be told the prescription is incorrect. The patient had to return to her ward.*

#### **More Information/More Choice**

##### **Complaint**

- *X contacted HW office as had bad experience at New Cross Hospital in January and reluctant to be admitted back to hospital. He was unsure about his patient rights whilst on the ward if he could contact PALs. He stated that he will be writing to Chief Executive of the Hospital. He wanted more info on HW*
- *Cancer Care needs to be at one location at New Cross*

##### **Enquiry**

- *Does 560 bus still goes around the town then to New Cross Hospital?*
- *member of public wanted a number for PALs*

### **Safe High Quality Co-ordinated Care**

#### **Compliment**

- *Had a great experience during my stay at New Cross. After care also great!*
- *C22 Dementia Ward first class*
- *The Dementia Ward at New Cross is good. I wish it was there years ago when my dad was in Hospital*
- *Eye infirmary at New Cross on 17th Sept 2013, accompany husband once a month. Treatment couldn't be better.*

#### **Complaint**

- *New Cross maternity unit - 1 year ago when I had my son he was born 7pm and by the time they sorted me out, my husband had to go home. The nurses didn't let him stay with me.*

### **Building Closer Relationships**

#### **Compliment**

- *PALs excellent service.*
- *Young child with Cystic Fibrosis – query re breaking difficult news to the child. – Matron X contacted and agreed to provide help for the family.*

### **More Information/More Choice/ Safe High Quality Co-ordinated Care**

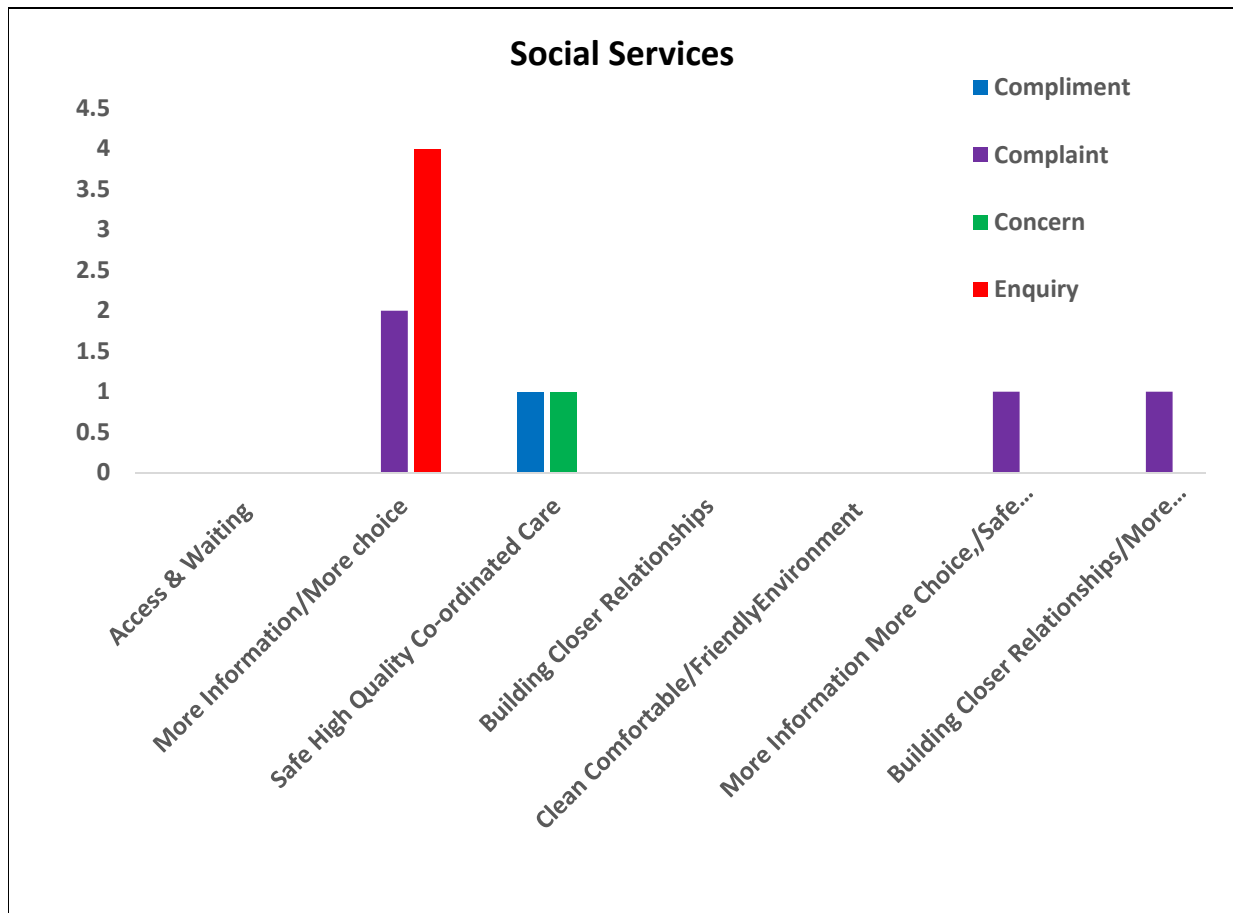
#### **Complaint**

- *x rang to ask for information on what she can do about her lost medical records from New Cross Hospital. She explained that she has been patient of x at Gynaecology department since 1980 and when she was there last year she saw a young nurse taking my records away from the gynaecology department before my appointment with x. She challenged her that where are you going with my records but was told that she will bring them back once she has finished checking something up. That was the last time she saw her records. She has been in touch with x 6-7 weeks ago and she can't find the records either.*

**Access & Waiting/ Safe High Quality Co-ordinated Care**

- *x providing care for her elderly relative who is tube fed and bed bound. The person is at end of life and need to be seen by a consultant at New Cross. Doctor from Compton Hospice wrote a detailed letter to New Cross Hospital to arrange an ambulance to New Cross, have the necessary x-rays/scan and treatment at one visit but a letter had arrived for an out patients appointment. When x called New Cross for an ambulance – she was told to bring her relative on public transport.*

**Healthwatch received 10 issues around Social Services.**



**Example Comments from Public during April 2013 –  
November 2013.**

**More Information/More Choice**

**Enquiry**

- *x rang to enquire about her care package for her disabled elderly husband in getting carers to come at earlier slot in morning.*

**Safe High Quality Co-ordinated Care**

**Concern**

- Nursing & Care homes - people in charge need to make sure that employees are doing their jobs properly.

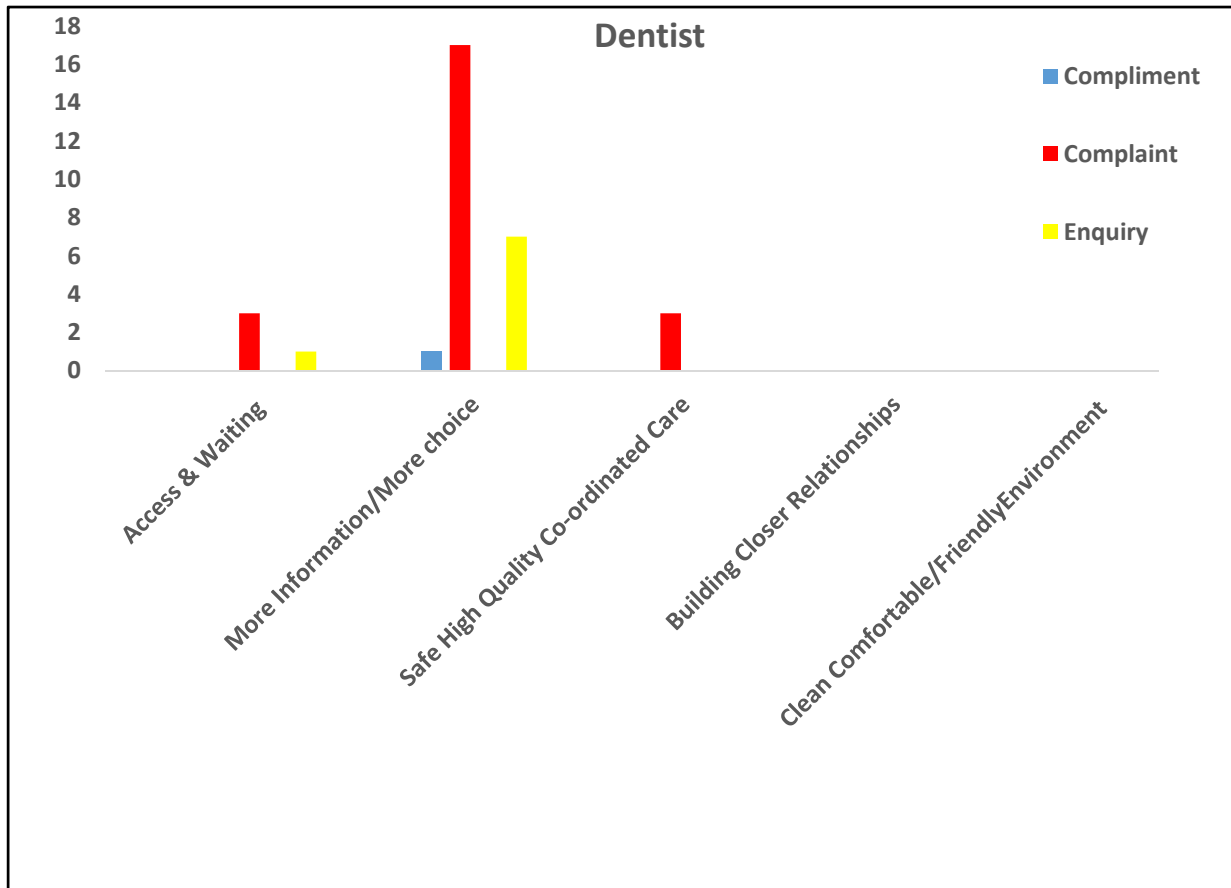
**Compliment**

- Home care is excellent :)

**More Information/More Choice/ Safe High Quality Co-ordinated  
Care**

**Complaint**

- x family of this lady was concerned that their mother was unable to be discharged from hospital due to a lack of suitable social care beds. Query was disseminated to Charlotte Hall, Deputy Chief Nurse.



**Healthwatch received 33 issues around Dentists**

**Example Comments from Public during April 2013 – November 2013**

**Access & Waiting**

**Complaint**

- Hill Crest Dentist is not answering any calls and it is closed every time. x tried to book an appointment in person. X rang PALs number to ask for assistance and then rang Healthwatch office to ask how she could find out if her dentist surgery is trading?

**Enquiry**

- Law queried if there was a mobile dentist, who could visit his mom 98 years for denture fitting.

## **More Information/More Information**

### **Complaint**

- *x would like to complain against her old dentist - Hillcrest on Penn Road. Who she had visited in the last 12 months. X thought she was having her treatment by her regular dentist, but was told on the day of treatment, it would be by another dentist. The dentist had carried out 4 fillings instead of 3. X moved to a Bilston Dentist, to have the work redone. The dentist at Bilston had to redo the fillings. x would like to make a complaint. She had tried with the Practice manager but was unsuccessful.*
- *Call from a Wolverhampton resident - needed an emergency dentist for his sister who had moved from Birmingham a month ago. He had been to Phoenix Health Centre and the emergency dentist was closed.*

### **Compliment**

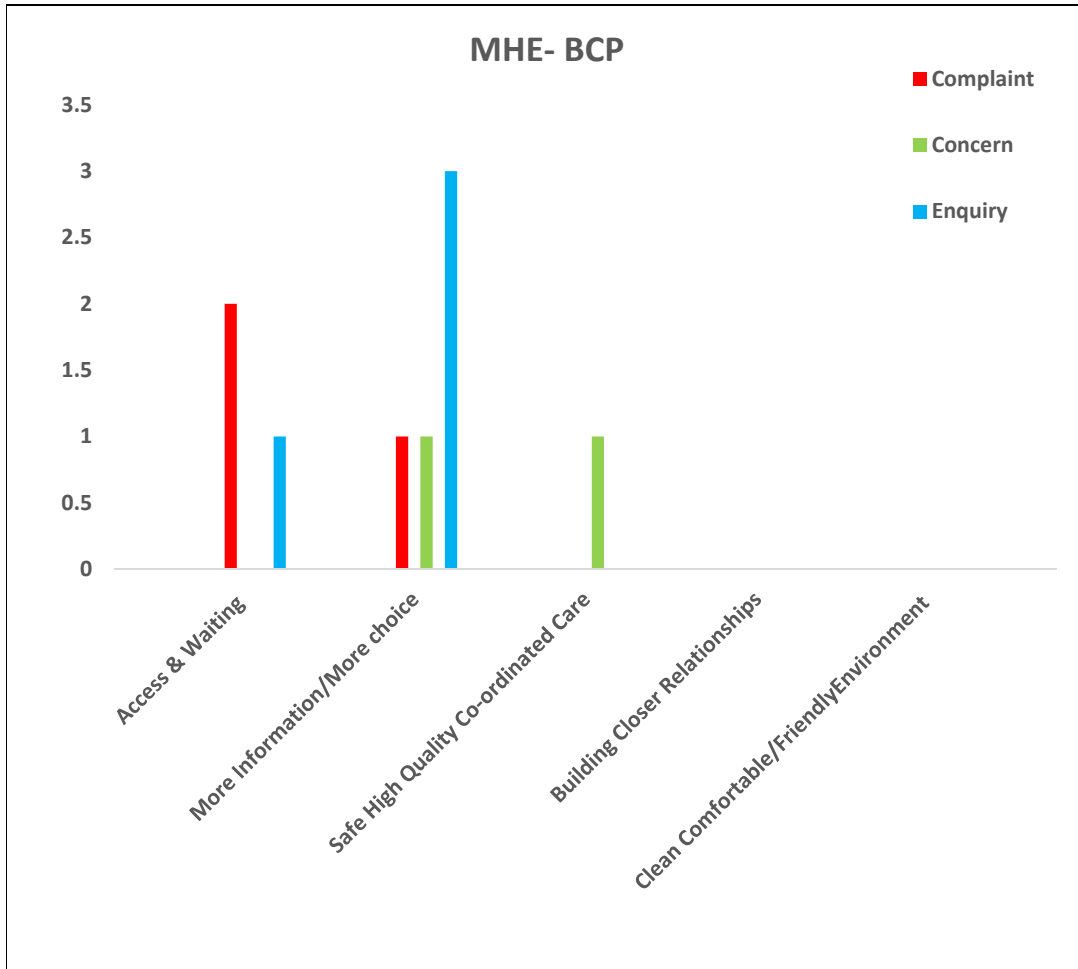
- *Dental service is excellent but why some people have a free eye test and why not free dental checks and only pay for the treatment??*

### **Enquiries**

- x from Pertemps contacted the office on behalf of the client x. x had cracked his tooth and wanted to know how to access local dentists.
- Dr Lyer wanted a list of local dentists within Tettenhall.



**Healthwatch received 9 issues around the Mental Health Services-  
Black Country Partnership**



**Example Comments from Public during April 2013 –  
November 2013**

**Access & Waiting**

**Complaint**

- *When you are in crisis, system needs to be in place to be seen straight away instead of waiting for a long time. Condition gets worse while you are waiting for an appointment*

## More Information/More Choice

### Complaint

- *Mother currently caring for her child who is 16 and has Mental Health issues. She wanted to make a complaint about the Children's Mental Health services.*

### Concern

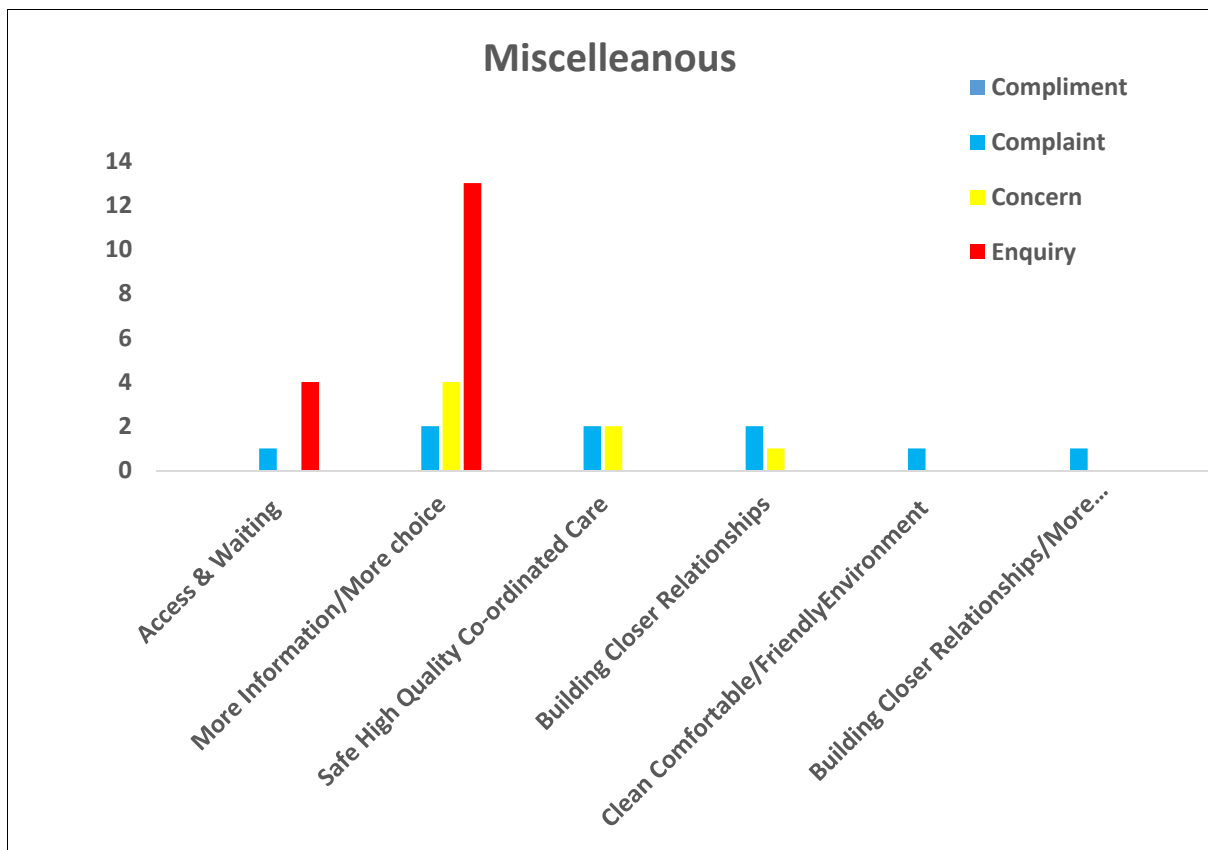
- *List of GP practices covering mental health*

## Safe Quality/Co-ordinated Care

### Concern

- *BME Tenants-Mental health support/care needed*

## Healthwatch received 33 issues around the Mental Health Services- Black Country Partnership



## Patient Experience

Healthwatch Wolverhampton has developed a draft workplan based on patient and user experience of health and social care services across the city. The remit of Healthwatch is to seek to influence the provision of services by using the intelligence gathered directly from those who are in receipt of services.

A number of issues, which are detailed in the plan have been transferred from the workplan of the Local Involvement Network (LINK). These have remained on the plan due to a number of outstanding actions, which are being addressed by the local acute provider, the Royal Wolverhampton NHS Trust.

<b>A &amp; E Eye Casualty</b>	
<b>Issues Raised</b>	<b>Actions</b>
Poor communication with patients informing of waiting times	Addressed by refurbishment of the A and E area. At time of booking receptionist will inform patients of estimated waiting time
Eye casualty should be re-located within the Eye Hospital. Patients find it confusing to attend A & E and then to attend the Eye hospital for treatment. This is especially challenging for patients who may have had drops administered and then have to walk to the department this is a difficult journey.	<p>No plans to re-locate the eye casualty. Hospital transport is available.</p> <p>This remains an outstanding action with increased difficulty with plans to build a new Emergency department as indicated in the Urgent and Emergency Care Strategy.</p> <p>Agreement by Chief Executive, David Loughton and Medical Director Dr. Jonathon Odum to work with Healthwatch to look at this group of patients following the conclusion of the consultation.</p>
<b>Best Practice Wards</b>	
Poor cleanliness in toilet areas – recommendation for regular checks to maintain standard	Notices implemented to encourage reporting of poor standards for remedial action
Improved maintenance of shower rooms required as increased risk of infection	Initial solution to trial a cleaning solution. Longer term solution would be the creation of wet rooms this would be subject to wider capital planning with estates
Call button response is not timely.	Work to improve visibility of nursing staff in all areas, which would increase response to call buttons and need. Need to ensure all patients on admission

	are advised on how to use and buttons are put within reach, essential to review for patients admitted during the night or sedated
Discharge process still remains problematic with patients delayed due to waiting for medication.	This is an ongoing issue with feedback still being received regarding delays on discharge.
<b>Protected mealtimes</b>	
Some patients need assistance with meals. Recommendation to use mechanisms which provides support to patients	Implementation of the yellow knife and fork sign Implementation of volunteers to help with meal times  Note this is not consistently implemented, therefore there is need for ongoing monitoring. This can be raised directly with Trust at Patient Experience Forum
There does not appear to be fresh fruit made available to patients.	The Trust has stated that fresh fruit is readily available on the drinks trolley. Further observations have indicated that this is not always the case. Ongoing monitoring may be required to ensure consistency.
<b>Discharge Lounge</b>	
Patients not involved in the planning of their discharge and therefore not given information on what to expect	Discharge lounge to contact relatives to notify of discharge.  There remains issues with the discharge process families given short notice of discharge but then delays occur due to long waits for medication  HW still receives feedback regarding poor experience of the discharge process. Therefore this will feature as an independent area of work and is currently being scoped.
<b>Primary Care</b>	
Poor access to GP appointments  HW receives regular feedback regarding poor access to GP appointments	Feedback will be shared with NHS England and local commissioners  Input into Urgent and Emergency care strategy consultation

<p>Access to NHS dental care Requests for mobile dentists</p>	<p>Information provided via signposting service. HW will monitor all requests for information and work with commissioners to ensure accurate and suitable information is widely available in a range of formats</p>
<p>Feedback is being gathered on the following areas  Maternity services Experience of nursing /residential care homes</p>	
<p><b>Mental Health</b></p>	
<p>HW received feedback regarding poor access to day services and therapies for patients  Little or inadequate information is available on service provision  Patient experience falls significantly during a change of contract or service provider</p>	<p>Discussions with the commissioner indicated a review was being undertaken and actions would emerge following the review.  The report produced did not resolve the issues raised with the commissioner and a meeting has been planned to discuss how to move this issue forward.  HW has noted that there is a mental health strategy re-fresh taking place and would seek to engage in this process, which may enable resolutions to be agreed. This will also enable HW to recommend including mechanisms to reduce impact on patient experience during any transition phases</p>

#

#

#