

## **Glossary** of organisations and acronyms you might not know.

Barts Health Trust manage the Royal London, St Bartholomew's, Whipps Cross, Newham, and Mile End hospitals and are a delivery partner within Community Health Services.

Care Quality Commission (CQC) inspect all hospitals, GPs, care homes and care services to make sure they are meeting government standards and to share their findings with the public.

Clinical Commissioning Group (CCG) plan and fund (commission) most local health services.

**Co-production** aims to bring together, in an equal relationship, professionals, service users, communities and any other relevant individuals to jointly design and deliver services.

**East London Foundation Trust** (ELFT) provides mental health services in Tower Hamlets.

**GP Care Group** is a federation of all 36 GP practices in Tower Hamlets that aims to provide innovative high quality, responsive and accessible health services.

Health and Wellbeing Board (HWB) is a forum where leaders from the NHS, the local authority, large service providers and the community can work together to improve the health and wellbeing of their local population and reduce health inequalities.

Health and Wellbeing Strategy (HWS) developed by the Health and Wellbeing Board is the overarching plan to improve health and wellbeing and reduce health inequalities in the borough.

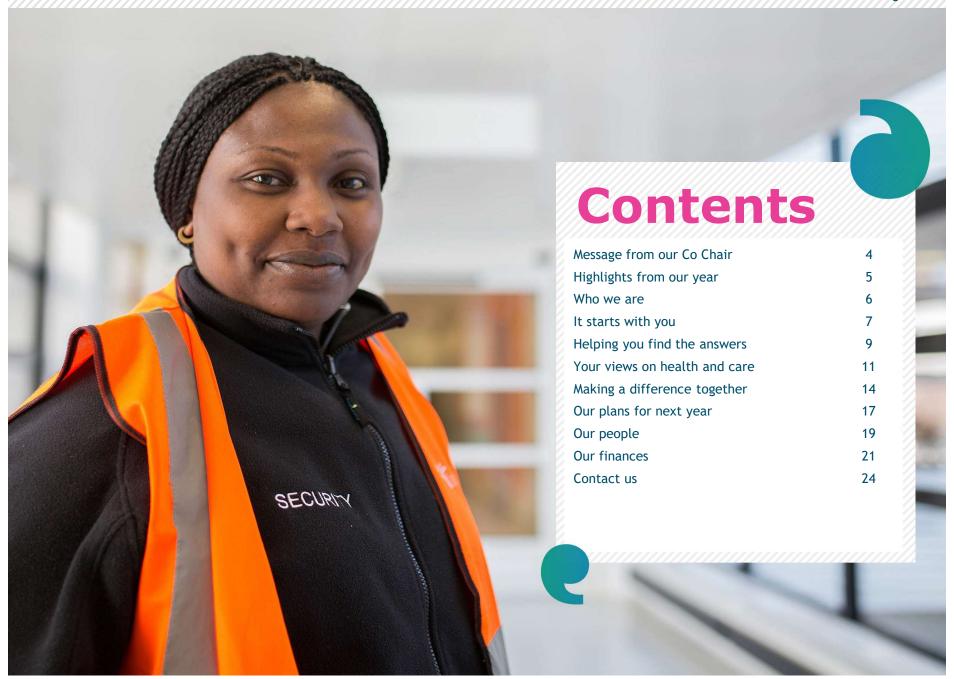
Healthwatch England (HWE) is the national independent champion for consumers of health and social care. It supports and co-ordinates the activity of all the local Healthwatch organisations.

NHS Choices is the main NHS website that allows you to search and feedback on NHS services in your area.

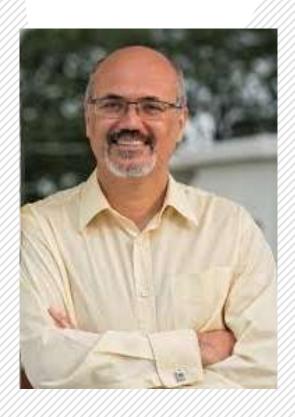
Patient Advice and Liaison Services (PALS) - offers free accessible and confidential support, information and advice to patients, their relatives and carers and can help to resolve concerns or problems. There are PALS at Barts Health and ELFT.

**Tower Hamlets Together** (THT) is a partnership of Tower Hamlets GP Care Group, Barts, ELFT and the local authority that provides integrated care and delivers the Community Health Services contract.





## Message from our Co Chair



#### This year we've enhanced our influence as the voice of local people.

We have achieved this through cutting edge work, building a substantial evidence base and working alongside our partners to deliver better services for local people.

Our new Community Insights Repository provides a database of qualitative feedback gathered from local people and partners. It allows any of our partners to quickly produce statistically robust reports on local peoples views.

Our aim is to be the first port of call for partners seeking evidence of what local people think of their services.

With significant input from our volunteer researchers, we conducted substantial studies into a range of community priorities. Our GP Access report looked at the difficulties patients experienced in getting appointments. Working alongside our GPs we demonstrated which surgeries perform better or worse in this respect and how they can learn from one another. We believe it is already making the health services in the borough better and we continue to monitor improvement.

The voice of local people is critical in designing better services and we are keen to support and act as a resource in order for more residents to engage in this work. We believe this is how innovative and effective ideas emerge.

Finally, I'd like to thank all our volunteers and staff who have made our achievements and progress this year possible.

Randal Smith

## Highlights from our year

4,047 local people told us about 25,094 issues.



Based on your issues we made

**158** 

recommendations <sub>III</sub> to decision makers.

We visited

local services to talk to people receiving care.



We produced

reports on foot health to mental health and maternity services to social care.



8,000 people visited us online to feedback and find services.

300 people information and advice.



## Who we are

We give local people a greater say in how health and social care support and services are provided.

Our purpose is to find out what matters to you and to help make sure your views shape the support you are offered.

You need services that work for you; helping you to stay well, get the best out of services and manage any conditions you face. That's why we want you to share your experiences of using health and care with us - both good and bad. We'll use your voice to encourage those who run your services to act on what matters to you.

We champion what matters to you and work with others to find ideas that work. We are independent and committed to making the biggest difference to you

#### Our aims are to:

- 1. Support you to have your say
- 2. Provide a high quality service to you
- 3. Ensure your views are heard and help improve health and social care

**Insight**: We undertake research to understand our communities, target engagement and track improvements over time.

**Partnership:** We work stratgically with professionals to share what communities say to bring about improvements.



Our staff team - Dianne Barham (Chief Executive) Raluca Enescu (Community Insights Manager) and Aurora Todisco (Finance & Information Officer)



"I didn't want other people to go without food in hospital. Our recommendations on the hospital food service at the Royal London Hospital have led to more choice, better food and greater care for those needing help." local resident lain

#### #ItStartsWithYou

The more people share their ideas, experiences and concerns about NHS and social care, the more services can understand what works, what doesn't and what people want from care in the future.

### But what difference can I make?

#### **Iain's Story**

Iain was visiting a neighbour in hospital when he noticed a patient's lunch was taken away without their having touched it. Iain used our Enter and View Programme to conduct a series of visits to see how the food service could be improved. As a result patients have been directly involved in feeding into the new food service

contract specification. Iain's work has had a direct impact on the quality and variety of food for patients across all the Barts Hospital sites and has contributed to an improvement in patient outcomes and improved nutrition. Iain continues to work with hospital staff and management to monitor and improve the new service.

A huge thanks to lain. I hope he is very proud of what we have all achieved with the new contract. Kenny Hanlon, Associate Director of Estates and Facilities, Barts NHS Trust

#### **David's Story**

David was a frequent user of the Foot Clinic at the Mile End Hospital as he was unable to cut his own toenails because of mobility issues. Changes in service provision left him without access to this vital service or a viable alternative. David wanted to know what was happening and alerted us. We did a quick survey to find out if others were having problems. As a result of our report and recommendations the provider is looking at alternative services and better training for carers.

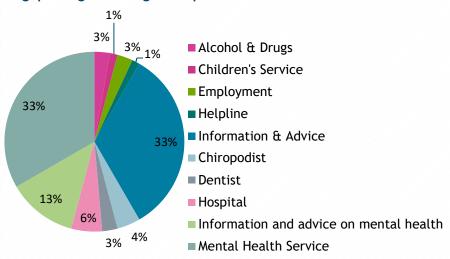


## Helping you find the answers

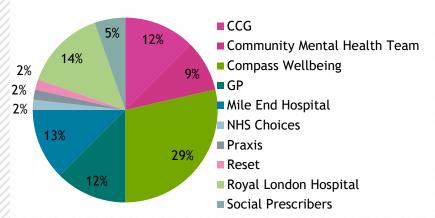


### Helping our community to get the information it needs:

We helped over 300 people with requests for information and signposting on a range of topics.



#### We signposted them to a wide range of destinations.



#### Case studies of how we helped

An older resident contacted us. Over the course of our discussion it became apparent that he was going through a mental health crisis. While talking to him about available community and NHS options for mental health support, we also found out that he was not registered with a GP. We gave him the address for his nearest GP surgery and talked him through the process of registering and then obtaining a referral for long term mental health treatment. We also signposted him to other mental health support resources he could use in the.

A Romanian UK resident phoned us as he had been invoiced nearly £5000 for his treatment at the Royal London Hospital. Through working with PALS and Complaints we helped him to successfully prove he had been wrongly classified as a non-resident and the invoice was withdrawn.

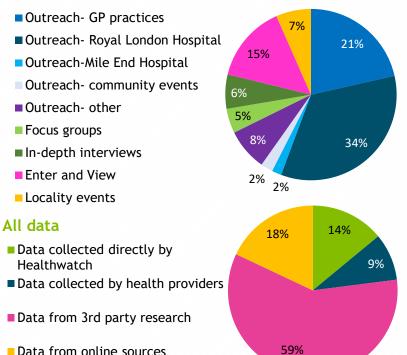
Thank you so much for all your help in finding the right service for Mrs B.... I am confident this will take a huge amount of pressure off her in having to deal with something she clearly has a lot of anxiety about. No doubt, this will have a positive effect on her wellbeing. As a result, we will hopefully have a resident who feels she is being listened to and is supported while she is going through this trying time in her life. Take care and keep up the amazing work you do! Health, Adults & Community Services Directorate



#### **Listening to your views**

To help us to find out what matters to you and to bring about change, we developed our Community Insights Repository. The repository holds over 25,000 issues identified by local people that were gathered either directly by us or through NHS and local partners. It will continue to grow.

#### **Data collected directly by Healthwatch**



We use this information to identify what it feels like to receive care in Tower Hamlets and make that voice heard to improve services and support for local people.

#### We want to hear all voices in the community; to reach people who are not normally heard, we have engaged with:

- elderly members of the Chinese and Vietnamese community with help from the Community of Refugees from Vietnam.
- elderly members of the Bangladeshi community with help from Bengali-speaking student volunteers.
- the Lesbian, Gay, Bisexual and Transgender community, particularly around their experiences with GP surgeries.
- carers of people with advanced dementia, who would not have been able to give feedback on care themselves.
- young people through a work placement programme with Tower Hamlets Education Business Partnership and Queen Mary University.
- people undergoing cancer treatment from the point of diagnosis, through surgery and post discharge with the help of Toynbee Hall and Queen Mary University film department.



## From listening to people and visiting services we know that local people:

- e are broadly satisfied with the quality of medical care received from GPs, hospitals and community health services, but find booking appointments with GPs, hospital consultants and community clinics frustrating and time-consuming. Services are perceived as over-stretched and under pressure.
- e are generally happy with the care they receive in hospital and the attitude of staff members whom they describe as kind and dedicated. But many report very poor follow-on after discharge or being discharged without an appropriate care plan.
- find the care assessment process a difficult bureaucratic process with some perceiving it as unfriendly and adversarial.
- have limited knowledge of social care options and resources.
- find community and day centres and befriending schemes a crucial resource for combatting loneliness but feel they are becoming more difficult to access due to cuts to activities and community transport.
- find the extent to which services collaborate has a knockon effect (positive or negative) on their outcomes and the kind of life they are empowered to live.
- are overwhelmingly pessimistic regarding the ability of social services to provide the care that they may need in the future.
- feel that maternity services are slowly improving.

#### Our Key Reports 2017-2018

**Adults receiving care at home** - how well services are services working together?

Maternity services - are things improving?

**GP Practices** - how could access be improved?

Royal London Hospital - what are local concerns?

**Foot Clinic** - the impact of service changes on patients no longer eligible for the service?

To read any of our reports please visit our website www.healthwatchtowerhamlets.co.uk/our-work/documents/



# Making a difference together



## How your experiences are helping to influence change

Because so many local people give us their views and they are held in our community insights repository we are able to quickly provide community voice reports on wide ranging topics. These reports have brought us, and local people, into the heart of co-designing services and have led directly to:

- An improvement in the choice, nutritional value and the delivery of food at the Royal London Hospital.
- the establishment of a Royal London Hospital Patient Experience Operational Group focusing on improving administrative processes and patient information.
- CCG Primary Care Commissioning and the GP Care Group co-designing a boroughwide online consultation offer that meets the needs of patients and practices. Our regular monitoring is accepted and used by practices to improve their services.
- The development of a social enterprise providing an affordable toe nail cutting service.
- Systematic monitoring of local people's experience of integrated care, and understanding where in the system patients experience problems.
- Our maternity intelligence being quoted in the Royal London CQC Report. We continue to provide the CQC with crucial patient experience indicators in order for them to continue their regular inspections.
- Our Adults Receiving Care at Home report is influencing the expansion of integrated primary care teams.

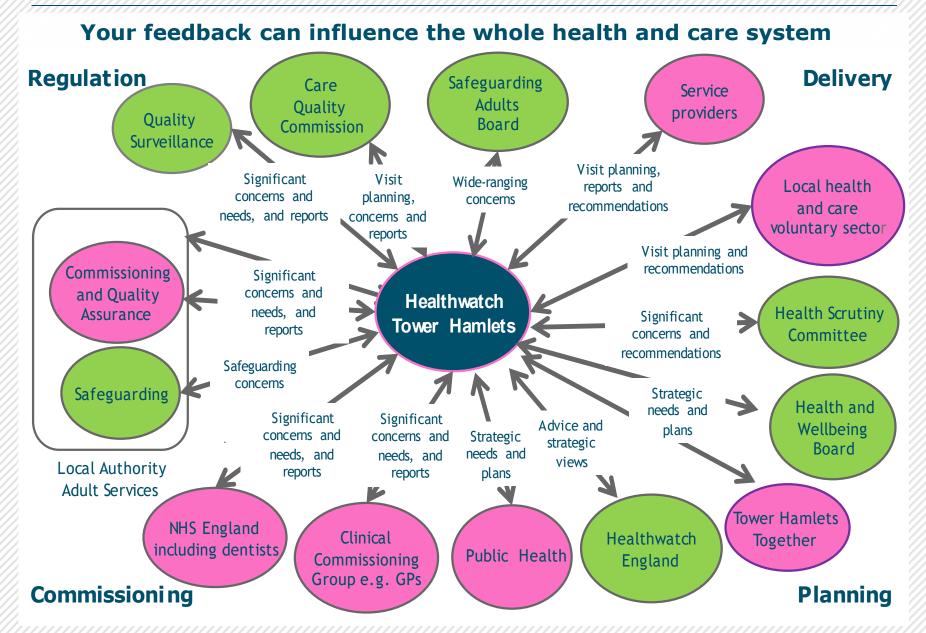
The regularly updated and centralised repository of patient feedback has been used to help practices improve their processes and the CCG commission and deliver broader strategic programmes. Jenny Cooke, Deputy Director for Primary and Urgent Care, Tower Hamlets CCG



#### **Working with other partners**

We ran our Your Voice Counts events in partnership with Tower Hamlets Together to jointly engage local people on:

- The Health and Wellbeing Strategy
- Children and Families
- Older people
- **Q** Local GP Practices.



Our plans for next year



#### What next?

To set our priorities for the coming year we:

- analysed all of the feedback that we have gathered over the past year to understand what local people think is important;
- asked local organisations responsible for designing and providing health care what they would like to know from local people; and
- reviewed whether there are gaps in our feedback that mean that some voices aren't being heard.

We developed a long list of 20 potential priorities and asked our local partners and the local community to choose their top six.

Our gaps analyses of community insights across the life course Childhood Adolescence Young Adulthood Early adulthood years vears of life Quite Not well Not well Some topics covered well covered covered not explored so covered covered beyond early Small amount on GPs & mental health.

The following project priorities are areas that our members and partners feel are important, timely and will have an impact.

#### Our top priorities for next year

- 1. Developing co-located integrated care services and group clinics in primary care.
- 2. Improving dementia and end of life care.
- 3. Improving hospital administration systems and patient information.
- 4. Mental health focusing on non-hospital based treatments and a human rights approach.
- 5. Engaging with young people
- 6. Gathering dentistry feedback with a focus on children.

We will now consider the background factors of:

- local work on the issue:
- work plan balance;
- potential to have an impact;
- Urgency of issue

We will then set these as our key priorities for the coming 18 months.





healthwatch

## talk ( ...we are listening



Health







Community Services





Services



Care







#### **Decision making**

We are run by a Board of 12 local people who are elected annually at our Annual General meeting through and open recruitment process.

David Burbidge (Co Chair)	Randal Smith (Co Chair)
lain MacLeod	Karen Bollan
Lesley Pavitt	Fatihmah Rofe
Mahbub Anam	Myra Garrett
Tim Oliver	Fay Quayle
Stephanie Dowker	Vicky Allen (Local Authority)

Our staff, Board members and volunteers attended over 200 meetings to represent the voice of local people. We continue to have a strong role on the Council-led Health and Wellbeing Board; to bring the voice of local people into the shaping services in the future; and to the Local Authorities Health Scrutiny Committee to hold service providers to account where the evidence dictates this.

#### **Volunteers**

We can't function without our volunteers. They have undertaken comment collecting, data entry, event support, research and report writing and lead their own projects. Our patient experience panel members meet every two weeks to read and code all of the feedback they and others gather. We work closely with local universities and secondary schools to provide our young people with crucial work experience.

If you want to learn more about our volunteering opportunities and how to get involved please go to <a href="https://www.healthwatchtowerhamlets.co.uk/get-involved/volunteers/">www.healthwatchtowerhamlets.co.uk/get-involved/volunteers/</a>







Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	179,716
Additional income	1,904
Total income	181,620
Expenditure	£
Operational costs	44,800
Staffing costs	119,259
Office costs	17,352
Total expenditure	181,411
Balance brought forward	209

The views and stories you share with us are helping to make care better for our local community

**Aurora Todisco**Healthwatch Finance and information Officer





## **Contact us**

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Tweet us: @HWTowerhamlets

Like us on Facebook: https://www.facebook.com/Healthwatch-Tower-Hamlets-436763663344717/

Our annual report will be publicly available on our website by 30 June 2018. We will also be 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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