

Together
we're making health
and social care better

healthwetch Barking and Dagenham

Annual Report 2022–23

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"In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better."

Louise Ansari, Healthwatch National Director

## Message from our CEO

Welcome to our annual report.

This year LifeLine continued to deliver Healthwatch in the borough after a competitive tender process towards the end of last year. We have worked hard on building a stronger Healthwatch team of both staff and volunteers to ensure that local people continue to have their voices heard.

We are pleased to highlight the achievements we have made this year and the difference we have made to improving the quality of local health and social care services. Our work this year has focused on four factors:

- engaging with residents;
- making recommendations based on resident experiences and feedback;
- providing solutions to service providers and commissioners;
- ensuring we have made an impact for those using service.

There are some great examples of different projects which have been summarised within the report.

We believe that it's only by asking those who use the services about their experiences that will we have a true reflection of how health and social care services are working and what areas need to be improved. In order to obtain the views of the community and to better understand their experiences, the team have taken a proactive role across the borough and provided opportunities where people can share their experiences of health and social care services. In total, we have delivered 95 engagement sessions.



We have developed a good working relationship with the Integrated Care System and partners this year, ensuring that the views of the local people have been heard and listened to, and worked alongside a number of other local Healthwatch across the system on two major projects.

In the coming year, we will continue to:

- help people find out about local health and social care services;
- listen to what people think about those services;
- help improve the quality of services by letting providers, commissioners, and Government know about people's experiences and what they want from care;
- encourage those running services to involve people in changes to their provision.

As we look forward to next year, I would like to thank all our volunteers, our Board, our Enter & View representatives, and our Healthwatch Champions who have provided much time and effort in contribution towards our achievements.

#### **About us**

## Healthwatch Barking and Dagenham is your local health and social care champion.

We make sure NHS leaders and decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



#### **Our vision**

A world where we can all get the health and care we need.



#### **Our mission**

To make sure people's experiences help make health and care better.



#### Our values are:

- Listening to people and making sure their voices are heard.
- **Including** everyone in the conversation especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Partnering with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

### Our team and board



Nathan Singleton CEO, LifeLine Projects



**Daniel Singleton** National Executive Director, FaithAction



Manisha Modhvadia Healthwatch Manager



**Agne Pilkauskiene**Project and
Engagement Officer



Ruby Yip Graduate Engagement and Project Assistant



**Daniel Singleton**Board Chair



Elspeth Paisley Board Member



Rachel Allen Board Member



Zahra Ibrahim Board Member



**David Sollis**Board Member



Barbara Sawyer Board Member



**Val Shaw** Board Member

#### **Year in review**

#### **Reaching out**



#### 784 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

#### 1141 people

came to us for clear advice and information about topics such as mental health and the cost of living crisis.

#### Making a difference to care

We published

#### 8 reports

about the improvements people would like to see in health and social care services.



#### **Healthy Living**

which highlighted the struggles of people trying to live a healthy lifestyle.



#### Health and care that works for you



We're lucky to have

19

outstanding volunteers who gave up their time to make care better for our community.

We're funded by our local authority. In 2022-23, we received

£115,160

We currently employ

3 staff

who help us carry out our work.

# How we've made a difference this year



We continued to share information about the COVID-19 vaccination and how and where to access the service.

This information was accessed by 551 residents.



When people struggled to see their GP face to face, we created a helpful guide on patient rights to see their GP face to face and access to urgent care services when needed.

451 residents accessed the guide.



We continued to promote our advice on ear wax removal, which helped residents to understand the difference in commissioned and non-commissioned services at a local level.



Our team represented at the Integrated Board Meeting on behalf of North East London (NEL) Healthwatches raising concerns, sharing best practice and presenting evidence based on NEL residents conversations throughout the year.



## 10 years of improving care

This year marks a special milestone for Healthwatch. Over the last ten years, people have shared their experiences, good and bad, to help improve health and social care. Here are a few of our highlights:

#### How have we made care better, together?

#### Vaccine confidence

Our research exploring vaccine confidence with people from different backgrounds provided vital lessons for public health campaigns.



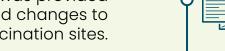
#### Long-term conditions

We ensured voices of people who have a disability or a long-term health condition were heard by service providers and commissioners during the pandemic. The recommendations resulted in changes to the way health information was provided and influenced changes to vaccination sites.



#### Phlebotomy

We were shortlisted for one of the Healthwatch National Awards for the work undertaken as part of our Phlebotomy Project. On the night of the awards we were highly commended for this piece of work.



#### **Access to healthcare**

Our blog on access to healthcare was viewed 481 times. The blog highlighted the relationship between language and access to healthcare.

#### **NHS dentistry**

We continued to voice public concerns that improvements to NHS dentistry are too slow, leaving thousands of people in pain.





# Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.

# Supporting people with healthy living

We undertook a research project to understand the needs of local people in relation to maintaining a healthy lifestyle.

There were two main purposes of this project:

- To gain a better understanding of how residents are recovering post COVID-19 when it came to healthy living; particularly focusing on a healthy weight, exercise, and food
- To explore if residents were aware of the healthy lifestyle services that are on offer and hear their experiences of these if they have accessed any of them.

#### **Our findings**

From the research several themes emerged which highlighted respondents were keen to make positive changes, however, busy schedules, high levels of stress and low income appear to be the main drivers that are preventing people from living healthier lifestyles. Most people we spoke to were unaware of the heathy lifestyles services that are provided. Those who had accessed healthy living services had mixed responses, for some there was a positive impact, but others indicated the need for professionals to understand their culture and situation more.

#### Our recommendations

Based on the feedback from residents, we made a number of recommendations (to the council, including the Healthy Lifestyles team and public health) including:



- Improving awareness of the Healthy Lifestyles team to the public and local organisations who could share this with their service users.
- Refreshing and providing training and information for professionals on the racial and cultural challenges that might be faced by their service users.

#### **Impact**

The council welcomed the report and felt that together with other data and evidence the findings from our project will make a valuable contribution to improve their action to support healthier weight for Barking and Dagenham residents.

The following actions were taken and implemented because of the recommendations from our healthy living project:



- Promotion at smaller community events and via community hubs were agreed, particularly for those suffering from inequalities.
   Community-led HENRY Growing Up weight management service pilots are already under way with a number of community 'trusted voice' organisations. Community Solutions will continue to share information on all new events.
- A one-page summary of services has been developed with links to New Me web page with further detail. It will also be promoted in community hubs and religious spaces.
- Following a competitive tender process, More Life was appointed to pilot their MUMS2B service for women during pregnancy and 4MUMS for women up to 24 months after giving birth. Community Solutions will promote exercise programmes that are available to pregnant women in the borough.
- Council staff facilitating programmes have begun to take place via internal training in three areas (Diversity, Race and Cultural Awareness).
- The council are working with Momenta to look at the current LEAN living programme and how it can be adapted to meet the needs of people from different cultures they are currently recruiting additional community health champions that can support programme participants to think about different foods and appropriate swaps.
- A communication and engagement plan has been developed and will be shared with Healthwatch.

#### What difference will this make

The actions implemented in terms of promotion will increase the number of residents who are made aware of healthy lifestyles services, which should increase the number of people having the option of accessing the service.

Training that has been provided to staff will equip them to provide a service which is more culturally appropriate.

With increased rates of obesity, the changes should support the health and care system with their agenda of reducing and preventing obesity within the borough.

## **Pre-frailty**

Our team facilitated two interactive workshops on behalf of the Population Health Management group. Each session aimed to understand how services are preventing, and could better prevent, people moving from pre-frailty to frailty, from perspective of the service user.

Participants were drawn from a cohort of those identified as pre-frail in the borough, and particularly those aged over 50 and diagnosed with hypertension.

#### **Impact**

We are pleased to report the pre-frailty report has been shared with stakeholders in London working on Anticipatory Care, to help other areas with their implementation. The report has been displayed on the London NHS Future page for Anticipatory Care.

At a local level, the findings from the workshops are being used to develop a pilot model of care for pre-frailty in Barking and Dagenham.

#### What difference will this make?

Our role is to ensure that patients are involved in planning and designing of health and care services, and this is a prime example of how it should be done. Seeking the views of patients at such an early stage of looking at a model of care will enable commissioners and service providers to design something that is more likely to work for individuals accessing these services.



"This evening's session was really good, thank you to team."

## Direct Enhanced Services provided to Care Home residents

Healthwatch across North East London came together to deliver this additionally commissioned project seeking insight into GP services provided to Care Home residents, in each of the eight boroughs in the region. The project was commissioned by North East London Clinical Commissioning Group (NEL CCG), now known as NEL NHS.

Direct Enhanced Service are defined as primary medical services other than essential services, additional services or out-of-hours services. GPs are additionally funded to provide these services.

There is a Direct Enhanced Service for Care Homes which provides services such as enhanced primary care and community care support, access to out of hours/urgent care when needed, multi-disciplinary team support, end-of-life care, home rounds, GP care plans and more. The Healthwatch data team translated research questions devised by the CCG, evaluating the NEL DES provision, onto a secure Survey Monkey platform. Care home managers were then interviewed. We found that for some homes the service worked well, this was due to good communication between the care home staff and the GP. For some homes it was clear that there was a need for communication to improve and a better understanding of what the service should be offering.

#### **Impact**

Recommendations were made based on the findings and we are beginning to see the impact of the work undertaken.



"NEL ICB have been working together with Healthwatch to hear the voice of care providers across NEL. Healthwatch completed a survey with over 156 Care home managers across NEL, to have a deeper understanding of their knowledge of what the Primary Care Network (PCN) Directed Enhanced Service (DES) outlines. The findings have fed into work to develop a one-page infographic for Care Homes and GP Practices. This will help to facilitate clear understanding of the PCN DES which we know from the [Healthwatch] residents 'focus groups they have found beneficial and helpful in responsive health provision"

—Care Provider Programme Manager/Enhanced Health in Care Homes Lead, NHS North East London Integrated Care Board

# Ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

## Healthwatch influences North East London Local Maternity and Neonatal System Equity and equality strategy

East London has the highest birth rate in the United Kingdom. Our health-care systems must adjust to this while continuing to provide the greatest possible outcomes for mothers and babies. In collaboration with seven Healthwatch services across North East London we looked into the experiences of patients from minority or marginalised groups when accessing and experiencing maternity services.

Together, we engaged with maternity service users, their representatives, and maternity staff by using face-to-face interviews, focus groups, and online surveys.

Overall, we have gained over 952 survey responses, 87 in-depth interviews focusing on maternity units, 76 advocate survey responses, and 5 focus groups with Somali and Pakistani communities. Healthwatch Barking and Dagenham collected 72 responses in the borough.

#### **Impact**

North East London Maternity Equity an Equality Task and Finish Group developed an ongoing plan based on our results and feedback. The action plan is designed around the topics highlighted during our engagement work, which include engagement, information sharing and trust, and consent.

Some of the changes being implemented include:

- Auditing maternity content and accessibility tools on each trust website to understand if the digital offer and access is equitable.
- Undertaking a collateral audit to understand what information currently exists, and in what formats (leaflets, booklets etc) detailing any easy read or translated versions.
- Working with Maternity Voices Partnership (MVP) Chairs and maternity units to develop standard reporting model for feedback and experience, so analysis can be made to recognise themes across NEL.

- Developing localised content available, working across Trusts and planning for the year ahead with scheduled content on service updates and helpful information at appropriate intervals, as well as sharing unplanned messages and proactive information via push notifications.
- Obtaining data from Baby Buddy regarding most used content in NEL, segmented by ethnicity and income demographics to understand information these groups most regularly access. Scope translating of certain general articles and localised content into appropriate community languages.
- Developing and providing an accessible document to be used within
  maternity teams detailing Local Authority led support services including
  children's centres, baby banks and foodbanks, as well as place based social
  prescribing teams and how to refer so staff can better support and signpost
  pregnant women to access certain services.

## Residents unable to get a face-to-face GP appointment! Is that the only option?

When we are out and about in the community, one of the most common things we hear Barking and Dagenham residents say is how difficult and time consuming it has become to get a face-to-face GP appointment. It is evident that Covid-19 pandemic has exacerbated access problems in general practice.

However, some residents have expressed that getting a face-to-face appointment with their GP is as easy as it was pre-Covid. There is not a single component that is responsible for this access concern. We produced a helpful guide for residents on the different ways of accessing GP routine and urgent appointments.

This guide has been accessed 451 times.

#### Influencing the London Ambulance Service (LAS) strategy

The London Ambulance Service (LAS) asked us for advice on how they can improve the care that they provide for Londoners, to form part of their strategy.

Our team devised a questionnaire to capture service user's pathways when accessing LAS services, to better understand what was working well, what could be improved but also how LAS and others across the system could work better together.

The survey drew a total of 79 responses and 30 additional comments from residents who engaged with our team during engagement sessions undertaken across the borough. We also attended Queen's Hospital Accident and Emergency department to gather opinions.

From the feedback collected during engagement sessions and surveys we found:

- There is still a lot of work to do to ensure that people have an accurate understanding of exactly what NHS 111 can offer.
- There needs to be clear understanding about expectations from NHS 111 for example, can NHS 111 book you an appointment or is this an arrival time? It's crucial to communicate the message as simply and accurately as possible to eliminate any misunderstandings.
- There was a lot of praise for LAS staff and this needs to be shared with those directly delivering the service.
- Most respondents were happy with the professionals that they spoke to and provided them with support.
- Call backs from NHS 111 clinicians should be made in a timely manner.
- Consideration needs to be given as to how LAS can utilise the voluntary and community sector better.

#### **Impact**

LAS has acknowledged Healthwatch Input and our findings have influenced the LAS Strategy with.

Reports from the NEL Healthwatch were also used as part of an urgent care deep dive by North East London National Health Service (NEL NHS) when they looked into urgent care. This piece of work has been beneficial on a London wise and at local basis.

## Feedback from LAS (Beata Malinowska, Deputy Director of Strategy and Transformation)

"The engagement you and your Healthwatch colleagues led with local residents on has been one of the key data inputs into LAS five-year strategy development process. The areas of work and improvements LAS is going to introduce over the next five years have been heavily influenced by the voice of the residents that Healthwatch engaged with"

## GP practice websites – are they working from the patient perspective?

We reviewed all GP practice websites in Barking and Dagenham. The review was undertaken as a response to recent feedback from the local patients including:

- Not being able to clearly find out who to complain to at their GP practice.
- The opening times for their surgery were not clearly displayed.
- Being unclear regarding the process of making a complaint.
- Being unsure about whether their surgery offered the E-consult service.

## Some of the main themes from our findings and recommendations included:

- 21% of GP practices did not have an individual practice website which meant only limited information was available on which services were available to patients and the different ways these could be accessed. We recommended that all practices should have an independent website.
- Websites that use clip art or pictures are more accessible for people
  with learning disabilities or those whose first language is not English. We
  recommend that all practices who use text only to change the content and
  style of their website to make it more accessible to all their patients.
- Some websites had out of date information. We recommended that all
  practices have a dedicated staff member who checks their website on a
  regular basis to ensure information is up to date.
- The processes around making a complaint was not clear on majority of the websites. We recommended that all practices clearly display their complaints process on their websites.

#### **Impact**

We have shared our findings with NHS NEL, all GP practices with the borough and Primary Care Network (PCN) leads. The PCNs will be using our findings as part of improving access to primary care services. At the time of writing this report we were waiting for a formal response from NHS NEL and the PCN directors.



# Hearing from all communities

Over the past year we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently, to gather their feedback and make sure their voice is heard and services meet their needs.

#### This year we have reached different communities by...

#### **Maternity Project**

As part of the maternity project, we engaged primarily with people from ethnic backgrounds, we approached places of worships, toddler groups and ante natal clinics. We also undertook a specific focus group with women from the Somali background.

#### **DES**

We improved services for those living in care homes where the DES service is being delivered.

Direct Enhanced Service are defined as primary medical services other than essential services, additional services or out-of-hours services. GPs are additionally funded to provide these services.

#### **Healthy Living project**

Our healthy living projects recommendations meant there is more culturally awareness and targeted engagement for residents from different backgrounds.

#### **Engagement stands**

To reach a wide range of voices our team visited, churches, libraries, carers group, toddler groups, thus ensuring we are providing residents the opportunity to share their experiences by being available in different settings and times.

We have engaged with:

- 76 residents who self-described as disabled
- 80 residents who self-described as a carer
- 36 residents who self-described as having a long-term condition

#### **Post-Covid Syndrome**

This project has been a collaboration across Barking and Dagenham, Havering, and Redbridge (BHR) Healthwatch. 169 people from Barking and Dagenham, Havering, and Redbridge completed the survey on Post-Covid Syndrome. 39 of the respondents reside in Barking & Dagenham.

We had three main strands of data collection:

- A Tri-Borough survey with free text comments for additional qualitative analysis, promoted by the NEL CCG Comms team; NELFT Long Covid service comms team; NELFT patient experience and expert patient's comms team; Barking, Havering & Redbridge University Trust (BHRUT) Long Covid Clinic; and our local Healthwatch comms teams.
- 10 in-depth interviews with local service users who identified as experiencing Long Covid, accessed through the survey and by referral from the Long COVID Clinic and other local contacts.
- 4 Interviews with local GPs and a further focus group with their service leaders, in conjunction with Dr Adam Ainley, Clinical Lead of the BHRUT Long Covid service.

#### Recommendations and impact

Changes were made in the light of interim findings:

- A potential confusion was identified, between a 12week referral window and a 12-month structure. This led to primary care training webinars being designed and delivered by the Long Covid service.
- Additionally, the referral form from NHSE was simplified to make the referral structure easier for GPs.

A final report has been published, and the findings have been shared with GPs across North East London. They will also be published on the website of the NHS Integrated Care Board. This sharing of findings will enable the people involved in designing and delivering services to gain a better understanding of the experiences of service users. Additionally, the findings have provided support to those involved in designing patient information materials, increasing awareness of the specialist clinic at King George Hospital.

#### Sexual health services

Pre Covid, we undertook an Enter and View visit which focused on sexual health services provided by BHRUT. As Enter and Views were on hold during the pandemic, we revisited the matter through a different route of engagement.

Our aim was to find out the standard of the current service, including how easy it is to access, how service users found staff, and what the outcomes are for the local people.

Two different methods of collecting evidence were used:

- To gain insight into the experiences of local people using sexual health services, our team developed a questionnaire.
- Five volunteers carried out mystery calls to the sexual health service appointment line, this was undertaken in stages. The aim of the calls was to establish how responsive the service was when people called, when appointments for different services were available and how the staff interacted with people when they contacted and spoke with them.

#### What we found

- Service users were struggling to get through to the service despite calling several times.
- The majority of service users described staff as kind and understanding.
- There is a lack of information across the system when it comes to sexual health services.

#### **Our Recommendations**

The report clearly reflected the demand on current sexual health services, highlighting the kind of issues the service was experiencing and how effective the delivery is. Our recommendations included that the Trust addresses issues with the phone being answered and that there should be a system wide approach to communicate access to sexual health services delivered by other partners such as pharmacists and GP practices.

#### **Impact**

BHRUT thanked us for the report and responded; the trust has made several changes since COVID-19 and since the visit and survey findings from Healthwatch. Communication issues within the call centre have been addressed to ensure patients know that they will be triaged and seen based on clinical need and to ensure that staff deliver this message confidently. To support this, communication with clerical teams has been updated to ensure patients are receiving the correct information regarding appointments and service availability when they call. Initial triage on the phone will help patients identify the right service they need, and patients are then signposted accordingly.

Online booking has been introduced to give service users another avenue to book appointments and to reduce waiting times on the phones.

#### What is Enter and View?

- The Health and Social Care Act 2012 allows local Healthwatch to carry out Enter and View visits.
- Authorized representatives are recruited and trained to carry out visits to observe specific settings and give feedback.
- During a visit information is gathered through the experiences of service users, their relatives, friends, and staff to collect evidence of the quality and standard of the services being provided.
- Enter and View visits can happen if people tell us there is a problem with a service, but equally they can occur when services have a good reputation.
- The visits enable us to share examples of best practice and make recommendations where improvements are needed from the perspective of people who experience the service first-hand.
- An opportunity to give authoritative, evidenced-based feedback to organizations responsible for delivering and commissioning services.
- The visits assist local Healthwatch to alert Healthwatch England or the Care
  Quality Commission to concerns about specific service providers of health and
  social care.
- If you are interested in finding out more about Enter and View visits or Healthwatch Barking and Dagenham, then please visit www.healthwatchbarkinganddagenham.co.uk

#### **Park View Care Home**

Park View care home was chosen randomly to collect evidence of what works well and what could be improved from the resident perspective in care homes. This was also part of Healthwatch wider workplan to engage more residents within the social care remit.

All evidence collected during the visit was positive, the care home was clean and tidy throughout, there were several activities and choices being provided to residents and mainly residents and family members shared positive experiences with our team. There were also some areas of improvement which would be of benefit to residents and improve quality of care and choices. Based on observations and feedback the following recommendations were made to Park View Care Home:

- Due to the vulnerability and feedback from residents Healthwatch recommends that staff increase their frequency of checking on residents to ensure they do not disturb other residents.
- Staff need to ensure that meats and more soft drinks are made available to those residents who would like this.
- Staff also need to ensure that if a preferred food choice is not available during mealtimes, staff should enable residents to choose another option, and not just provide a replacement, which a resident may or may not like.
- Staff should check all the rooms and ensure that no curtains are covering the radiator, if this is the case these need to be trimmed down so residents are not required to roll these up every day. Healthwatch would like to see this request acted on.
- Staff to offer more choice to residents regarding personal care timing and ensure that all residents clothes are changed as quickly as possible if they get stained.
- The care home should review the buzzer alert system that is currently in place to see if it meets the needs of all residents. Considerations should be made to provide mobile residents with panic alarms (pendant or bracelet) should they fall and not be able to reach their buzzer.

We also encouraged the care home to continue to provide choices and involve residents and families, as we know that this has a positive impact on one's health and wellbeing.

At the time of writing this report, we are waiting for a response from the care home.



# Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

#### This year we've helped people by:

- Providing up to date information people can trust
- · Helping people access the services they need
- Helping people access NHS dentistry
- Supporting people to look after their health during the cost of living crisis

## How our advice and information service works: Emma's case

Emma first contacted us wanting to express that nobody was listening to her. She is an older resident with limited mobility and many other health issues. She lives alone in a flat and is also known to Social Services. Emma is in receipt of a care package, and she told us that she was unhappy about the way her carer treated her. Our advisor recognised the need to raise a safeguarding alert based on Emma's concerns. An out-of-hours call was made to adult social care, and a safeguarding referral was initiated. The safeguarding issue was investigated, leading to a change in her care provider.

Following this, Emma contacted our information and signposting phone line several times, expressing that she has not been treated fairly by healthcare staff, and that she has no one to listen to her. As we spent time speaking with her, we quickly identified that she was experiencing loneliness and her health issues meant her social life had been severely impacted. Our advisor suggested an option of referral to a befriending service with Emma, and it was mutually agreed that this referral would be beneficial. A referral was made by our advisor and Emma later was contacted by the service.

It later emerged, that Emma's dissatisfaction with healthcare staff had been increasing, and she felt like she did not know where to express her worries. Concerns expressed included unfair treatment and dismissing her experiences. Our Healthwatch advisor discussed a referral to Independent Health Complaints Advocacy services in Barking and Dagenham and Emma was referred to the service.

Emma has reported finding our services very useful, she found our service to be a listening ear and established a relationship with an advisor. She feels comfortable in picking up the phone to ask for support to navigate the system.

As it can been seen in Emma's case, some of our most vulnerable residents will require multiple services to get involved to get their support needs met and fill the gaps. If you know someone who might benefit from our information and signposting support do let them know about us.



## Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

#### This year our volunteers:

- Visited communities to promote their local Healthwatch and what we have to offer
- Collected experiences and supported their communities to share their views
- Carried out enter and view visits to local services to help them improve
- Reviewed GP and dentist websites to review accessibility
- Collected the most up-to-date information on changes to services, such as whether NHS dental appointments were available at a practice

We would also like to thank students who choose to join Healthwatch to gain experience.

#### **Aisling**

#### Work experience student

"Thank you so much for supervising me through my work experience. I have really enjoyed the experience because of how kind and welcoming you the team are. This experience has been a greatly educational experience and I know that what I have learnt during this time will be useful to me for years to come."

#### Val

#### Volunteer

"I have been volunteering with Healthwatch for the last ten years. I enjoy being a board member as I can help Healthwatch also be the voice for people less able to do it themselves. Also, by disseminating information between Healthwatch and the Public and back the other way too. I also support with Enter and View.

Volunteering is my lifeline. If you are able to do so, please give it a go. You will not only make great friendships but also help your mind to keep healthier."

#### Nusrah

#### Work placement student

"My time at Healthwatch has been a revelation into how different service users feel about different services and how much more these services need in terms of support. Not just for the services but those who work and are a part of the teams. I personally thought I should get out of my own comfort zone and put myself into a new environment that I have never worked in. Especially since, I can gain a lot out of working in different health and social environments to build my knowledge that I can use later in my years."



#### Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



**%** 0800 298 5331

info@healthwatchbarkinganddagenham.co.uk

## Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

#### Our income and expenditure

Total income	£130,965	Total expenditure	£130,695
Additional income	£15,805	Non-pay expenditure	£32,242
Annual grant from Government	£115,160	Expenditure on pay	£98,723
Income		Expenditure	

Additional funding is broken down by:

- £2,600 funding received from council LBBD as part of population health management group to deliver pre-frailty project.
- £8,205 funding received from NHS NEL for a number of projects including HealthWatch representation during workshops and meetings.
- £5,000 funding received from a London Ambulance Service for engagement as part of the clinical strategy.

#### **Next steps**

In the ten years since Healthwatch was launched, we've demonstrated the power of public feedback in helping the health and care system understand what is working, spot issues and think about how things can be better in the future.

Services are currently facing unprecedented challenges and tackling the backlog needs to be a key priority for the NHS to ensure everyone gets the care they need. Over the next year we will continue our role in collecting feedback from everyone in our local community and giving them a voice to help shape improvements to services.

We will also continue our work to tackling inequalities that exist and work to reduce the barriers you face when accessing care, regardless whether that is because of where you live, income or race.

#### Top three priorities for 2023-24

- 1. Education Health Care Plans
- 2. Mental health and social prescribing
- 3. Social care



## Statutory statements

Healthwatch England, 2 Redman Place, Stratford, E20 1JQ Contracted to LifeLine Projects, LifeLine House, 25 Neville Road, Dagenham, RM8 3QS

Healthwatch Barking and Dagenham uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

### The way we work

## Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Board consists of five members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Throughout 2022/23 the Board met five times and made decisions on matters such as our workplan and priority areas of Enter and View visits.

#### Work plan

We ensure wider public involvement in deciding our work priorities.

Healthwatch is all about local voices being, able to influence the delivery and design of services. We are here to ensure that local people's views are heard. As we are here for the people of Barking and Dagenham the areas of work we look at must come from them, or gaps in by local publications such as the JSNA. Every year we look at the intelligence we have and communicate with local stakeholders and the public about the areas of work we should focus on for the following year. From the comments received, a final work plan is produced.

#### **Enter and View**

An Enter & View visit is undertaken: If we have received concerns from a family, carer or resident/service about a particular social care or health service.

If a visit is part of our wider work plan, for example if we have specific work priority on children, we may undertake a visit to a children's ward.

Our Enter & View Representative volunteers carry out visits according to guidelines provided by Healthwatch England.

They are involved in planning the visit, undertaking the visit and ensuring recommendations are based on the findings.

## Methods and systems used across the year to obtain people's experiences.

Gathering people's experiences of health and care services and understanding their needs is at the heart of what we do. The team believes that those who use the services are in the best place to give us firsthand experience of what has worked and areas which need to be improved. We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight into their experiences of using services. During 2022/2023 we have utilised a number of different approaches including:

#### **Engagement sessions**

This year we have visited a wide variety of community venues giving residents the opportunity to speak to us. We also visited the antenatal clinic and the Accident and Emergency Department at Queens hospital as part of our maternity and London Ambulance Service project.

This remains an effective way of hearing people's views and collecting intelligence, as well as raising our profile. Evidence collected at these events help us to paint a picture of the quality of different services and ensures we can challenge service providers and commissioners to take into account the service users' perspective; especially when looking at the design of new or development of current services. We have undertaken 95 engagement sessions this year.

#### Social media

We have utilised our social media accounts to share opportunities of involvement and information and signposting advice on a regular basis for example during World Mental Health Day we utilised our accounts to amplify the message that their a number of services available for anyone who needs support and shared contact details of organisation such as North East London Foundation, Samaritans, Young Minds, and CALM.

#### **Ebulletin**

Our team published a monthly ebulletin; Its main aim is to keep registered members updated with local and national news and provide opportunities of involvement. We also promote information about local services, health and care news, consultations, and what the Healthwatch team have been up to.

#### **Registered members**

We also have a free membership, this is open to those who live in borough, work in borough and local organisations.

#### Website

Our website is used to promote information and signposting services, news items and blog consultations and events as well as keeping the local community up to date with what projects the team are working on. There is also a speak out section, which can be used for people to share their stories of health and care services with us.

#### Our freephone number

We have a freephone number to make it easier for the community to contact US.

GET ON BOARD!

Tell us your story and help us shape health and care.

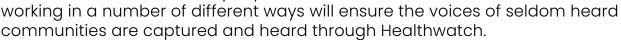
0800 298 5331

#### Our bus advert—GET ON BOARD!

We advertised on bus backs for 6 weeks to raise awareness of Healthwatch. The advertisement was on the back of 10 buses which routes which cover Barking and Dagenham. The aim was to increase awareness amongst those who use public transport of the Healthwatch service.

#### **Working in partnership**

We have worked in parentship with the local council, NHS NEL, BHRUT, the VCSE, faith groups to obtain the views of local people. We believe





We used our engagement tracker to ensure we can monitor feedback being received from residents.

#### **Annual report**

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, an electronic copy is shared with statutory, public, voluntary sector and our members. We also print a limited number of hard copies which are available on request and distributed through our engagement stands.

#### Find out more

If you're interested in registering as a member, volunteering with us, or just finding out when we're in your area, be sure to visit our website!

www.healthwatchbarkinganddagenham.co.uk

Or give us a call!

0800 298 5331

And don't forget to follow us on social media:



@HealthwatchBD



facebook.com/healthwatch.bd



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#### Responses to recommendations

We had no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

#### Taking people's experiences to decision makers

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us. In our local authority area for example we have reported our progress to the Health and Wellbeing and shared our findings from our projects.

We have also shared our reports with the public health team within the local authority and received positive feedback from decision makers.

We also take insight and experiences to decision makers in the North East London Integrated Care System.

We also share our data with Healthwatch England to help address health and care issues at a national level.

#### **Enter and view**

This year, we made one Enter and View visit. We made five recommendations or actions as a result of this activity.

#### **Health and Wellbeing Board**

Healthwatch Barking and Dagenham is represented on the Health and Wellbeing Board by Nathan Singleton, CEO of LifeLine Projects. During 2020/21 our representative has effectively carried out this role by ensuring the voices of local residents are heard by the board. Our representative also provided solutions where necessary.

Healthwatch Barking and Dagenham is represented on the North East London Integrated Care Partnerships and Integrated Care Boards by Manisha Modhvadia, Healthwatch Manager.

## healthwetch Barking and Dagenham

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