

We're Healthwatch Suffolk

We use your views on NHS and social care services to make things better



In this report...

A year in highlights (Pg. 4)

Check out some highlights from our year and quick references to where you can read more about them.

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1. How we've been making a difference (Pg. 7)

Listening to people (Pg. 7)

Read about all of the ways we capture people's experiences. This includes our feedback process, how we've been reaching out into communities, the work of our sub-groups, our visits to local services and much more.

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Improving services (Pg. 36)

We explore how our work, including our research projects, has helped to shape, influence and improve local services. This includes examples where your feedback has been used by us to bring about change.

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Here's some of the best bits...

My Health, Our Future - Read about the impact of our work exploring the mental health and emotional wellbeing of children and young people in Suffolk.

Page 38

My Care at Home - Find out how our report about people's experiences of care at home is shaping the future of home care services in Suffolk.

Page 44

LGBTQ+ people's experiences of NHS and care - We championed the voice of LGBTQ+ young people at a House of Commons Select Committee. Read about our evidence submission and why we think this issue needs more attention locally and nationally.

Page 50

Working in partnership (Pg. 62)

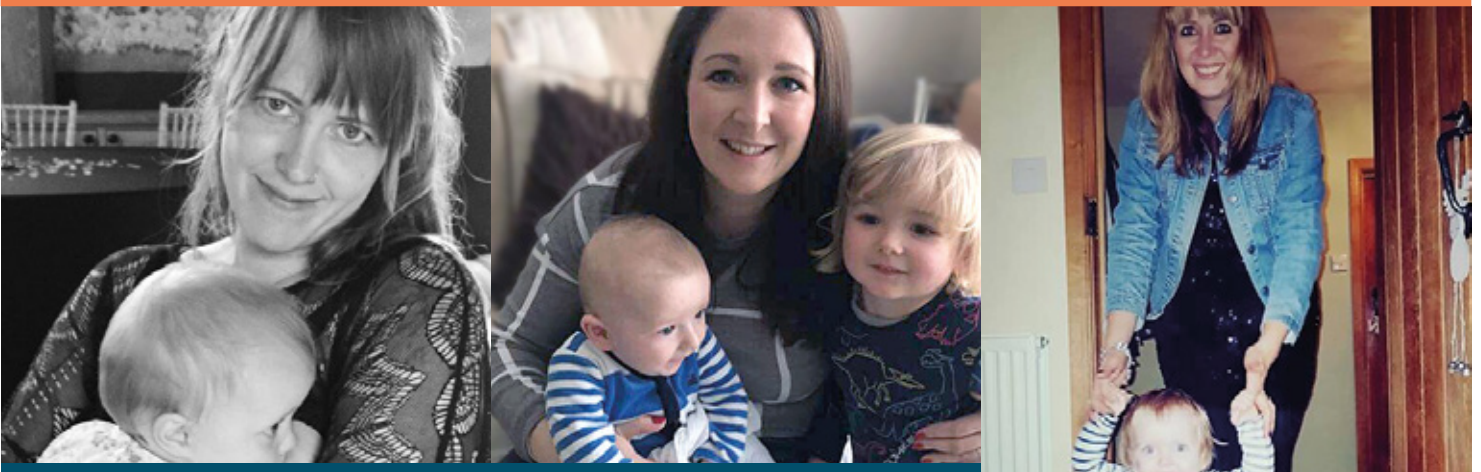
Read about how we are working with other people and organisations to challenge and influence NHS and social care services.

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Why not check out...

The Care Quality Commission - Find out how we have been working with the CQC to inform the inspections of GP practices and address quality issues in Suffolk residential and nursing care homes.

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A new service for babies born with Tongue-tie

Find out how Hannah, Laura and Katy helped us to improve support for new parents in Suffolk from page 58..

2. Finding answers (Pg. 76)

Details about our Information & signposting service. Find out what people have been asking us about and some examples of how we have helped people to find help and support.

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3. Our volunteers (Pg. 84)

Meet our volunteers and find out how they have helping us to be effective, including how they have supported us to make decisions about our work and governance.

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4. Looking ahead (Pg. 92)

A statement from our Chief Executive (Andy Yacoub) about our priorities last year and moving forward.

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5. Our Finances (Pg. 100)

Our abbreviated accounts.

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Need something quicker to read?

Don't worry, we get it! For a speedier read, you can download a summary of our impact this year from www.healthwatchsuffolk.co.uk. You can also watch our highlights video. Just search for "Healthwatch Suffolk" on YouTube.

Highlights from our year..

More on pg. 14



3,549 people shared feedback on our website. We have now recorded nearly 11,000 reviews.

More on pg. 76



Our Information & Signposting service is helping people to find support.

More on pg. 26



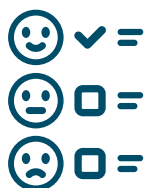
Our sub-groups bring people together to shape, influence and challenge health and social care services.

More on pg. 58



We helped to bring about a new frenulotomy service for people having a baby in west Suffolk.

More on pg. 36



15,000

We recorded almost 15,000 responses to our research projects.

More on pg. 38



Our “My Health, Our Future” project has shaped support for children and young people in schools across Suffolk.

More on pg. 44



Our “My Care at Home” report is shaping the future of home care services.

More on pg. 64



We’re using your views about GP practices to shape local inspections by the Care Quality Commission.

More on pg. 50



We’ve submitted evidence to two House of Commons committee inquiries.

More on pg. 48



We worked in partnership to shape the future of mental health support in east and west Suffolk.

More on pg. 61



Ipswich Hospital is running a pilot to prevent the loss of personal items within the hospital.

More on pg. 62



There’s a seat with our name on it at over 100 strategic health and care forums.

1

How we've been making a difference



Listening to people...

Find out how we seek & record people's views and use them to improve local NHS and care services.

In this section, you can read about our communication activity and how our team has been reaching out into local communities. We have also described the impact associated with our research projects and described clear examples where your views have made a difference to the shape of local services and support.

Our feedback process

We have defined a clear process for obtaining and using feedback from the public about their local services. This can be broken down into six stages as described in the following statements.

1. Receive:

We will always make it as easy as possible for you to feedback and share experiences with us using a variety of methods.

2. Log:

All feedback will be logged onto our Feedback Centre by our staff within a reasonable period of time or onto our online surveys.

3. Review/Moderate:

All feedback will be reviewed by our Information Team. This process is important because it enables us to check that the feedback we publish complies with our Terms and Conditions and does not put any person at risk.

Escalate:

Any comments that staff identify as a safeguarding concern are immediately flagged

and acted upon according to local procedures.

4. Analyse:

Once logged, the feedback is available to theme and review within our Informatics Dashboard or other analytical tools.

5. Take action:

This might include using the information to plan our visits to local services, sharing insight with other statutory or regulatory bodies, triggering new areas of research or asking NHS or care leaders to respond to concerns.

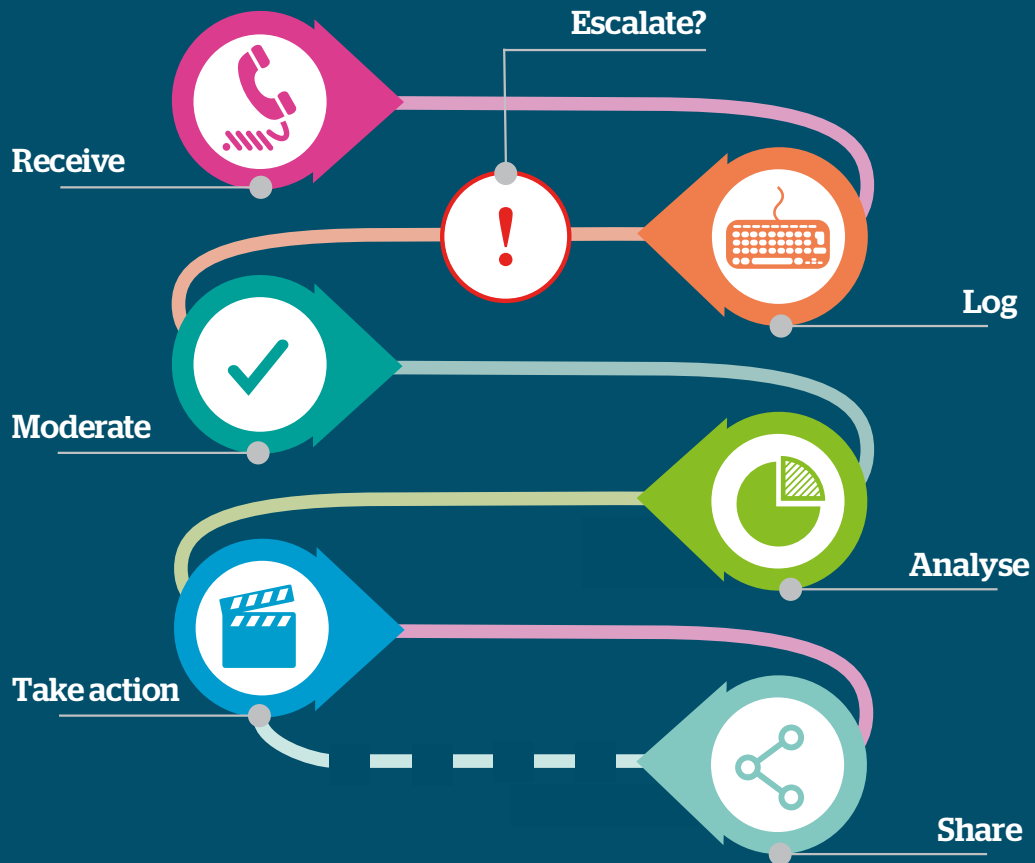
We will feedback on all actions taken and outcomes achieved to ensure continued involvement from local people.

6. Share intelligence:

We can also shape local services by contributing intelligence to specific networks and bodies including our local Health and Overview Scrutiny Committee, Health and Wellbeing Board, Integrated Care Systems, Healthwatch England and many others.

Our feedback process

We have defined a clear process for obtaining and using feedback from the public about their local health and social care services. This can be broken down into six stages as described in the following statements.



Communication is key

Feeding back to people about our work and impact is essential to keeping them engaged in improving health and social care services with us.

We know that not every person likes to communicate with us in the same way. That is why we use many channels through which we can tell people about our work and encourage feedback.

As in previous years, we are pleased to have seen growth across most of our platforms. Please see our infographic below for some highlights.

A note about accessible Information



We remain committed to providing information in multiple formats so that nobody is prevented

from accessing our service.

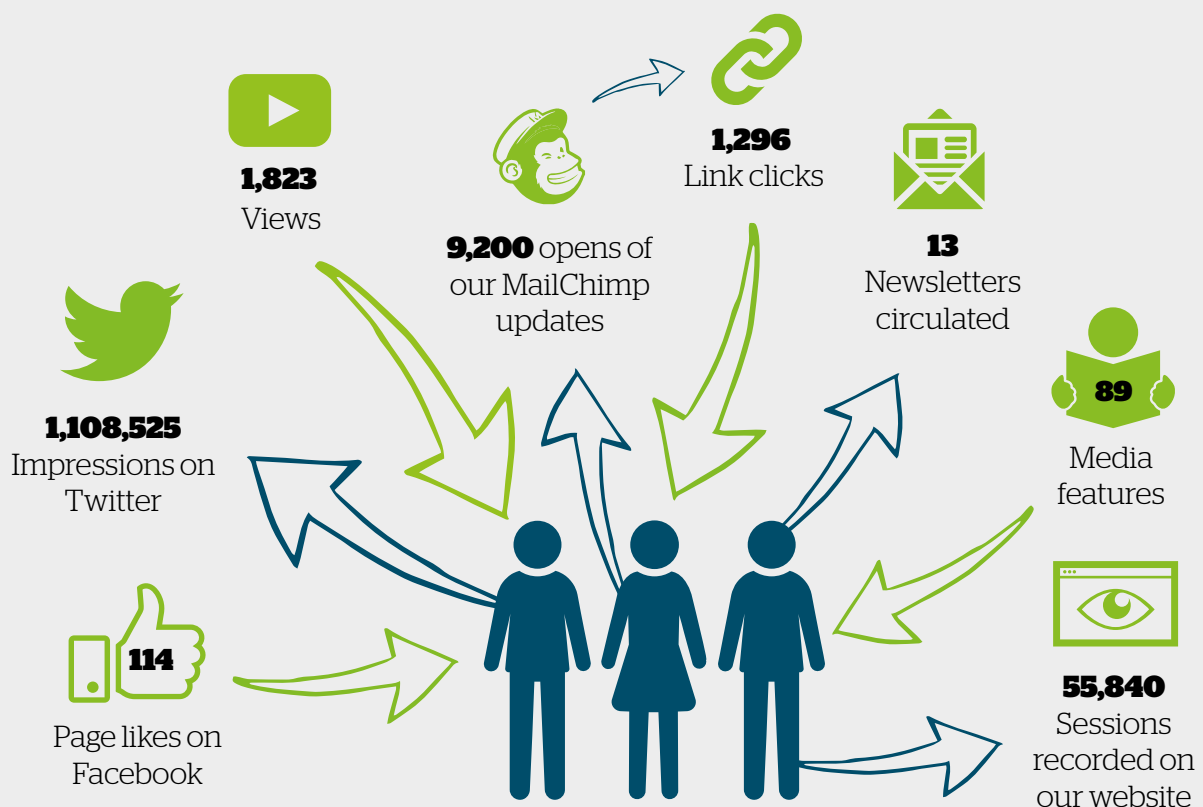
In 2018/19, we retained the Browsealoud accessibility tool on our website. It includes a range of functions that help people to access our information. We also produce information in a range of formats, including easyread.

Translated materials are available on request.

Follow us:

-  @HWSuffolk
-  @healthwatchesuffolk

Our communications activity 2018/19



Sharing stories with us on Instagram

Precious moments and real care

Many people have been sharing their experiences within Suffolk hospitals with us on Instagram. It's a real celebration of the good care we know so many people receive in our county.

The images capture personal moments recorded within our local services including West Suffolk, Ipswich and James Paget hospitals.

From the joyful arrival of a new baby to the worry of a planned or unexpected admission to hospital. Our #NHSSelfieStars have captured it all.

You can view the whole selection by visiting our Instagram page (@healthwatchesuffolk) where you can also share your selfie with us.

The images are used within our reports and briefings to make sure your voice comes across loud and clear to the people who run, provide or regulate our local NHS and social care services. Thank you to everyone that has shared their story with us.



“My beautiful brave girl. Simple operation to sort her hearing out and she’s recovering nicely. Hopefully she won’t need to shout all the time now.

Fantastic work from the NHS!”



“**I had a really pain free experience,** the doctor was very pleasant and made me feel comfortable...”



“Today Archer had surgery (only minor to investigate his under developed tear duct). Today he had no idea what was going on. Today I did know and I was a scared mother. Today Archer was happy. Today I had the best husband who sat by my side. Today I am a very proud mother. **Today I am so grateful for the #NHS** for all they have done and continue to do for my family.

We love to hear from you...

See what people are sharing about their experiences and much more by following us on Instagram (@healthwatchesuffolk). You can also share your experiences with us at any time on:

www.healthwatchesuffolk.co.uk



A hugely emotive moment captured between two grandparents at the Ipswich Hospital. They had been married for 60 years.

"Unfortunately, my granddad passed away, however he was 95 and it's what was best for him. **He seemed to be cared for well while in the hospital**, and I went to see him in the hospitals chapel of rest which was a very nice room and they tried to make everything comfortable."

How we gather people's views

 **35,000+**
experiences recorded since **2013**

There are many ways that people like to feedback about local services. Some are happy to feedback online; others prefer traditional forms of engagement.

Our core methods include:

- + **Feedback Centre** - People can find health or social care services and leave feedback about them on our website. We have tools that mean the feedback can be moderated and analysed to find themes (see page 14).
- + **Research** - Our research projects (see page 36) cover a range of topics. We use a variety of methodologies, such as interviews and surveys, to gather people's views and use them to influence services.
- + **In the community** - Our Community Development Team visit many communities, both large and small, to tell people about Healthwatch and to gather their views on services (see page 16).
- + **Our sub-groups** - We bring people together to shape, influence and improve local services at our two sub-groups. These are the Mental Health and Emotional Wellbeing Focus Group (see page x) and our Black and Minority Ethnic and Diversity sub-group (see page 26).
- + **Information and signposting** - Our information and signposting service (see page 76) has helped people to find their way through services. We gather basic information to monitor whether people are calling us about similar things.
- + **Enter and view** - We can visit local services (announced or unannounced) to look at premises, observe care and talk to people using them. We write reports that include recommendations and share them to improve services (see page 32).
- + **Partnership working** - We work in partnership with many organisations in Suffolk (see page 62) that are in touch with people using services. Organisations can often help us to reach specific groups of people for their views.

You will find more detail about how we have used each of the methods outlined above within all sections of this report.





“I’m so pleased. This new service will help first and second time mums no end. It’s just amazing. Great work Healthwatch.”

Laura Kicks
Member of the public



Laura shared her story - We made it count...

Find out how mums like Laura have helped us to start a new service at the West Suffolk Hospital for new babies born with a tongue-tie on page 58.

Our Feedback Centre



We make sure that your voice comes through loud and clear to the professionals who make decisions about health and social care in this county. That is why our website includes an online feedback platform called the "Feedback Centre".

You can visit our Feedback Centre to find local NHS and social care services, read what other people think about them and to leave feedback. Providers of services can also use our Feedback Centre to respond to your comments and to

signpost where appropriate (e.g. to a complaints lead or patient experience team).

The Healthwatch Suffolk Feedback Centre is accessible using a variety of devices including mobile phones, laptop/desktop computers and tablets. That means you can have your say about local care (good or bad) wherever and whenever you can find the time.

We look for trends within the feedback and use it to shape, influence and improve local care.



**A gold star response
to feedback...**



Did you know? Our Feedback Centre lets providers of services reply to your feedback.

We loved this response from the Alexandra Road Practice to a patient that had fed back about their experience on the Feedback Centre.

"Thank you for your constructive feedback, we will certainly do our best to address your points as soon as possible. I apologise that you had to wait to be seen by your GP. As you alluded to, had the trained reception staff spent slightly more time on the telephone with you, they could have offered you the contact information for the Wellbeing Service or an appointment with our Social Prescriber. At the next staff meeting I would like to reassure you that I will take the time to remind staff and offer further support and training should they require."

"I am pleased to hear that you had a positive experience with our Phlebotomy Service and I am sorry that there is no information on the website to inform you about how to access your results, I will ensure this is updated. We will also contact the local mental health provider and the commissioners to gather information relating to mental health for our website. It helps to hear directly from patients as we cannot always be fully aware of the patients needs so thank you again for this feedback."

At the next staff meeting I would like to reassure you that I will take the time to remind staff and offer further support and training should they require.

11,000+
comments
logged

Since we launched our Feedback Centre, we have recorded more than **11,000** items of feedback about hundreds of NHS and social care services.

Feeding back is easy and you can be anonymous.

Visit www.healthwatchesuffolk.co.uk to find services and leave your review now. We will use it to make services better in Suffolk.

Out in the community

Our Community Development Team are visiting communities across the county.

They attend many local groups, meetings and events to talk to people about Healthwatch and to gather their views about local NHS and care services.

By reaching out into our local communities, we hope to encourage more people to share their views with us. Having feet on the ground keeps us in touch with local issues and it's also how many people like to talk to us.

The team:

- + Record people's feedback about NHS and care services.
- + Deliver a signposting service within the community.
- + Encourage people to take part in our research projects.
- + Develop relationships with key partners who work in the community, private and statutory sectors.
- + Recruits and support our volunteers.
- + Encourage people to become members of our organisation.

National guidelines mean that we are expected to report upon our engagement with specific groups and these are as follows.

Young people under the age of 21

This year, we have completed two research projects that relate to children, young people and families. These are:

- + **My Health, Our Future:** Our project about children and young people's mental health and emotional wellbeing. Across the two

years of this project, we have recorded views from almost 14,000 young people. You can read more about it from page 38.

- + **Suffolk Perinatal Mental Health services:** Our analysis of people's experiences. We hosted a survey on behalf of Public Health Suffolk and submitted the results to Healthwatch England as part of its work to influence national mental health policy (see page 52).

This year, our Community Development Team engaged over **1,000** individuals at activities where it was possible to reach people under the age of 21.

Specific examples include:

- + We have been working closely with our local hospital Maternity Voices Partnerships to engage people about their experiences of maternity services in Suffolk. This has led to the establishment of a new restricted frenulum clinic at the West Suffolk Hospital (see page 58).
- + Our team attended the Outreach Youth Transgender Support Group for Young People and their Parents. We were able to talk about key issues with local services and feed this into our evidence submission to a House of Commons committee (see page 50).
- + Our regular engagement sessions at GP practices across the county offer the chance to speak with children, young people and their family members about their experiences and what could be improved.
- + We attended the Wellbeing Fair at Northgate High School and Sixth Form, where we had the opportunity to talk with pupils and students about their use of services and how they can feedback.
- + We engaged with people attending the St Andrew's Church Toddlers Group in

Lowestoft. The group is in the Normanston Parish, which is one of the most deprived parts of our county.

- + No. 72 is an organisation in Sudbury that provides support to young parents and

families of all kinds as they encounter the normal 'highs and lows' of parenting and family life. We shared information about local work to improve services.

We spoke with

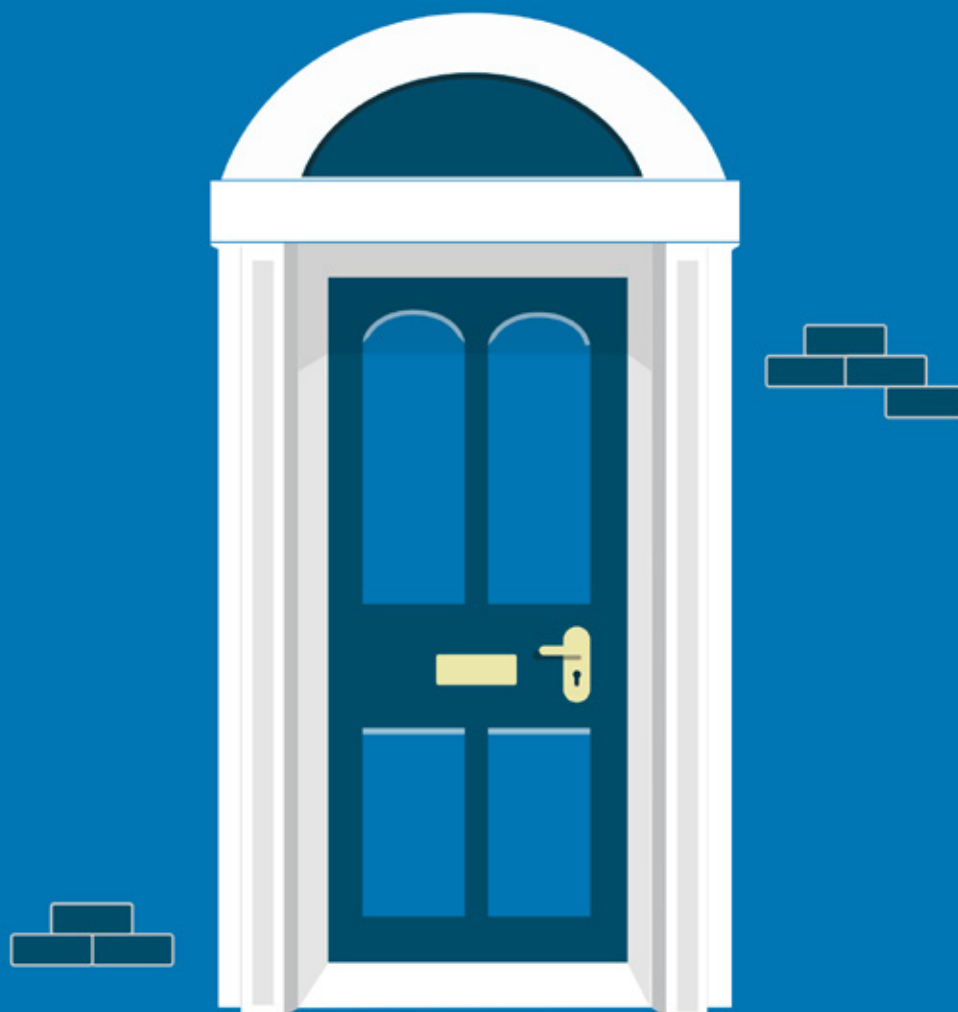
7,464

people in communities across Suffolk

In the spotlight at the Children's Emotional Wellbeing Conference...

Read from page 38 to find out how our latest "My Health, Our Future" report is shaping a better future for children and young people in Suffolk.





- My Care at Home -

People's experiences of home care in Suffolk

Our “My Care at Home” project helped us to reach older and vulnerable people for their views. We have used them to shape the future of these vital services.

Read more from page 44.

People over the age of 65

This year, we published our report (“My Care at Home”) about people’s experiences of domiciliary care services (home care), which was a collaborative project with Suffolk County Council to inform the recommissioning of these services in Suffolk. You can read more about this from page 44.

We have also visited services (Enter and View) that provide care to older people (see page 32).

Our Community Development Team has participated in 298 separate activities at which we had the opportunity to engage with older people over the age of 65 in Suffolk. We engaged with 3,909 people at these activities.

Specific examples of this activity include:

- + Rural Coffee Caravan (RCC) events – The Rural Coffee Caravan delivers information and friendship to rural and isolated communities across Suffolk. It befriends people and offers them access to the information they need about local help and support.
- + Days out with the Suffolk mobile library service
- + Dementia support groups
- + Various over 60’s clubs

Vulnerable people

We consider the term “vulnerable” to encompass many factors. Broadly, this definition might be applied to any population group that is at higher risk of poorer health or care outcomes, discriminatory practices or economic hardship.

Our core values, as defined within our strategy 2017-2020, include that we must always strive for inclusivity and accessibility within our work.

Reaching vulnerable groups is therefore an essential and fundamental element of every project that we develop.

Specific project examples, amongst others, include:

- + In the summer of 2018, Suffolk began to explore how services can better support people’s emotional wellbeing and mental health in east and west Suffolk. To inform this, we worked in partnership with Suffolk User Forum, Suffolk Parent Carer Network (SPCN) and Suffolk Family Carers to run an independent listening exercise capturing the views of service users, families, carers and professionals about what needs to be different. You can read more about this work from page 48.
- + Our “My Health, Our Future” project has included a focus on the mental health and wellbeing needs of specific groups of children and young people (e.g. those who identify as LGBTQ+ or a gender other than male or female). Read more from page 38.
- + We compiled an evidence submission and submitted it to the national House of Commons Women and Equalities Committee inquiry into LGBTQ+ people and their experiences of accessing NHS and care services. Read more from page 50.

We have long established sub-groups that are specifically focussed on bringing people together to discuss shape, influence and improve services for vulnerable people. You can read more about the work and impact of our Mental Health and Emotional Wellbeing Focus Group and Black and Minority Ethnic and Diversity group from page 26 .

Throughout the year, our Community Development Team has participated in 208 separate activities at which we had the opportunity to engage with vulnerable people.

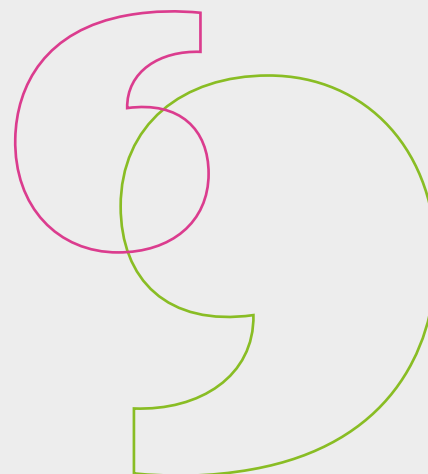
We engaged with 2,589 people at these activities.

Specific examples, amongst others, include:

- + Engagement with members of the Stowmarket Salvation Army CAMEO group
- + Engagement with Leading Lives service users
- + Attendance at Disability Forums in Suffolk
- + Engagement with people at the Downham Cottage Care Farm, which aims to provide a safe, supportive and inclusive environment for a range of vulnerable people.
- + Attendance at the Phoenix group in Ipswich to engage with mental health service users.
- + Visits to the Worry Tree Café, which aims to support people in the local community facing challenges.

local GP practices or community group meetings.

- + A shared pitch at the Suffolk Show with the Rural Coffee Caravan Information project.
- + The Colorectal and Stoma Team “Love Your Life” event in Waveney.



People that live outside of Suffolk but that use our services

At different points in the year, we have sought opportunities to work closely with other local Healthwatch. We have also sought to engage people who live in communities close to county boundaries to obtain and record their views about local services.

Data recorded by our team indicates that we have participated in 52 separate activities at which we had the opportunity to engage with people who live outside of our county but who may use our local services. We engaged with 751 people at these activities.

Specific examples of activity include:

- + Engagement sessions with patients attending acute hospitals.
- + Specific engagement within border communities such as Brandon and Sudbury. This might include specific sessions within



Unlocking doors to engagement

Sometimes, our presence within the community and connections to the people responsible for local services means we can “unlock doors” and create opportunities for better community engagement.

Ipswich Community Media aims to work with those at the margins of society to include them in the positive change and development of our community. It has a focus on engaging vulnerable people through music, media, the creative arts and communication through language.

ICM deliver English for Speakers of Other Languages (ESOL) courses and many others that are health related. By delivering these courses, ICM aims to pass on positive messages about keeping healthy but also about effectively accessing local health services. For several months, it had been struggling to get an introductory meeting with Barrack Lane Surgery which is local to the ICM office and is known to have a diverse patient list.

By developing our relationships with local GP practices, we have been able to connect ICM with the Barrack Lane Surgery and this has subsequently led to positive and mutually beneficial engagement.

“Your introduction was the key that unlocked the door to working with the surgery. Thanks to Healthwatch Suffolk, we now have an excellent relationship with Barack Lane. One of our Roma Romanian Community Champions regularly volunteers at the surgery. Feedback we have received indicates the positive role he plays in helping the Roma community to effectively access services, which saves everyone time and money and leads to positive health outcomes. We would love to replicate this success elsewhere in the town and hope we can continue to work together in the future.”

Bruce MacGregor (Director of Ipswich Community Media CIC)

We're all ears in communities

across Suffolk





GP practice engagement

Throughout the year, our Community Development Team has continued to engage patients attending GP practices.

As the gateway to many services, we see this as an ideal way to record feedback, not just about the practices, but also about the full range of services people may be using. It is also a chance to help practices communicate about things like changes to their services, care navigation and shared care records.

The feedback will be used to inform our latest report about people's experiences of GP practices. We know that this data has been used by the Care Quality Commission to inform its inspections of local services (see page 64).

Our team regularly speak with patients attending GP practices in east Suffolk. Many of these practices have launched our widget to their website as a means to encourage additional independent feedback. Some are proactive in responding to the comments people have shared.

Our feedback can help services to understand how changes are impacting on patients. For example, we were able to demonstrate that

changes made by the Bridge Road Surgery in Lowestoft to its appointments process were viewed positively by patients and highlight issues so that they could be addressed.

Our team has also supported High Street Surgery in Lowestoft to establish a Patient Participation Group by promoting the opportunity for people to become involved during our engagement. It is hoped this will help to guide the practice to improve its rating by the Care Quality Commission.

Look out for our widget...

NHS and care services can place our widget onto their website. It

is linked to the service listings on our Feedback Centre and can be an effective means to encouraging feedback from patients.

The widget demonstrates that services are open to feedback and its use is viewed positively by Care Quality Commission inspectors.

[Click here to Feedback now >](#)

healthwatch
Suffolk

While you wait...

Our team have engaged people in **over 50** GP practices this year.



Closure of the Landseer Surgery site in Ipswich

In 2018/19, the Chesterfield Drive practice applied to close its branch on Landseer Road, Ipswich. It was no longer possible for patients to access a GP during normal opening hours. The practice wanted to focus its resources on developing services at a new single site purpose-built facility on the former Tooks Bakery site in north-west Ipswich. The closure meant that people would either need to travel further to the new site or register with one of several other local practices.

We attended community engagement sessions hosted by the practice, where we could record people's views. We shared these with the practice and commissioners to help with planning and communication. At the events, we were also able to help people to understand their full range of options once the practice site had closed.

“Chesterfield Drive Practice has been working with Healthwatch Suffolk over the last few months to plan for the closure of our branch site. We have appreciated the help and support provided, which has included practical suggestions around communications with patients and participation in patient engagement events as part of the consultation process. We have found the interaction with Healthwatch Suffolk to be a really positive experience and been made to feel as though we are partners on a project rather than being scrutinised.”

Gill Lewis (Practice Manager)

Download our report about GP practices from www.healthwatchsuffolk.co.uk/reports

Our sub-groups

Our Black and Minority Ethnic &

Diversity Group

Our BME and Diversity sub-group is a forum for sharing information, networking, and gathering feedback from different communities about local health and care services. A range of voluntary organisations are members as well as statutory partners.

This year, a panel comprised of group members and representatives of the Suffolk Coproduction Network awarded a grant of £3,500 each to organisations including GYROS for Waveney, Future Inclusions (FI) for East Suffolk and the Bangladeshi Support Centre (BSC).

- + Future Inclusions established a Portuguese Women's Project, which will be charged with looking at health and wellbeing issues. This will include topics such as mental health, domestic violence and smoking cessation.
- + Bangladeshi Support Centre explored access to health and care services for people from black and minority ethnic communities. They planned and delivered three large community events and also completed more than 100 questionnaires at community events such as the Pita Festival and Picnic in the Park.
- + GYROS used its grant to pilot a mental health research project exploring the concept and understanding of mental health amongst local migrant communities in Waveney. They used questionnaires, focus groups and one-to-one interviews with members of the migrant communities and health professionals.

Other work has included:

- + A review of leaflets produced by the East of England Ambulance Service. It wanted a view on which materials would be the most appropriate for translation into Easy Read. The group fed back that the materials were overcomplicated and this was well received. The Trust committed to exploring adjustments.
- + The group has been involved in NHS England Midland and East's procurement of Interpreting & Translating Services for GP & Dental services in East Anglia.

As a result, we have expressed concern to NHS England (Midlands and East) that interpreting and translating services for GP and Dental services may deteriorate because its commissioning process has excluded local suppliers from providing the services.

The fear is that this will result in a loss of local flexibility and expertise as well as good relationships. NHS England and the new supplier of the services will attend a meeting of the group to address ongoing concerns.

- + The group has enabled organisations providing support to link up. This has led to new initiatives such as work between One Life Suffolk and Suffolk Refugee Support to offer better support to specific communities on healthy lifestyle and smoking cessation.

For more information about the group and how you can join, please visit our dedicated web pages:

www.healthwatchsuffolk.co.uk/help-us/our-sub-groups/



Improving the “My Care Wishes” folder

Our BME and Diversity sub-group has helped to improve the “My Care Wishes” folder (sometimes known as the ‘yellow folder’). The changes will make it easier for people and professionals to have important conversations about their cultural needs and wishes.

The yellow folder enables individuals living with a long term or life limiting condition, and their families, to consider their preferences for care. It includes their wishes in an urgent situation and for end of life care.

In response to concerns raised (regarding duplication of recording and inaccessible content), a multi-agency group across east and west Suffolk was established to review the documentation. This group has updated the Shared Care and Support Plan (SC&SP) and the guidance notes. The revised documents were then trialled in January 2019 with family carers, care homes and Community Matrons. There is a consensus that the revisions have made the documentation easier to complete and the Information Sheet is more helpful in supporting completion.

The new documentation will be reviewed annually.

“I have found the group stimulating and informative - both in terms of formal presentations and the extended discussions to which they lead. Seeing the NHS and other services through the eyes, especially of recent migrants, has been enlightening. People made anxious and bewildered by flight to another country need professional and personal support across the board. So do cancer patients, whose own settled lives have been replaced by disorientation and by new priorities and fears. Clarity and consistency in information, making full use of cutting edge as well as more traditional methods, is obviously central; but the group has helped me see that the impact of each and every professional and voluntary interaction is uniquely powerful for good or bad.

Sue Blake - Voluntary Member (Ipswich Hospital Cancer Services User Group)

Our Mental Health & Emotional Wellbeing Focus Group

Our Mental Health & Emotional Wellbeing Focus Group facilitates conversation between those responsible for mental health services, service users, carers and organisations. It is a forum for sharing experiences and using them to challenge, shape and inform the current and future provision of mental health support in Suffolk.

Specifically, the group provides a forum where:

- + you can highlight good practice or raise concerns directly with senior mental health professionals for consideration.
- + your views can be heard and used to develop ideas about current and future mental health services (encouraging co-production in service development and delivery).

This popular group is a unique forum, attracting service users and carers but also senior representatives from local organisations, commissioners and the voluntary sector.

The group aims to find a comfortable balance in being questioning, critical and supportive of mental health service development from the perspective of service users and carers. It is an inclusive and accessible way for people to become involved in shaping local care.

Key work and impact this year has included:

- + The group has operated as a forum to inform and challenge recent efforts to transform mental health and emotional wellbeing support in east and west Suffolk. The aim was to ensure that those not directly involved in the engagement work were continuously appraised about progress and how they could be involved.

- + Public Health Suffolk approached the group because it was finding it challenging to bring people together to shape and inform the suicide prevention strategy for Suffolk, and also that of the Norfolk and Suffolk NHS Foundation Trust. The group will now act as an engagement forum for this every six months.

- + Norfolk and Suffolk NHS Foundation Trust sought to re-open the Lark Ward Psychiatric Intensive Care Unit following its closure in early April. The group was a key forum for monitoring progress and challenging the Trust and commissioners where necessary (e.g. understanding what would happen to patients and their families during the closure). This was critical in ensuring things were considered from the perspective of patients and carers.

- + Following the introduction of Universal Credit, local Job Centre Plus (JCP) representatives raised concerns because they are now in receipt of information about people's mental health but are not equipped to offer support. The group has linked JCP staff with the local provider of mental health services to explore how training and support could benefit professionals and the public.

- + The group was a driving force behind the setting up of a multi-agency workshop on dual diagnosis. This workshop included important input from Public Health Suffolk, Suffolk User Forum, Turning Point and the Norfolk and Suffolk NHS Foundation Trust. The purpose was to encourage and find better ways of providing person centred and joined up care - Substance abuse services and mental health services are not jointly commissioned.

- + After service users and carers raised concerns about Norfolk and Suffolk NHS

Shaping the future of services...

Find out how we worked with other organisations to shape and influence the future of mental health support in east and west Suffolk from page x.



Mental health services in east & west Suffolk

A very different conversation

Foundation Trust waiting times, the service lead came to present about their work to address the feedback. This gave people the chance to inform this ongoing work within the Trust.

More information about our Mental Health and Emotional Wellbeing Sub-Group, including future meeting dates and past meeting papers, can be found on our website.

Please visit:

www.healthwatchesuffolk.co.uk/help-us/our-sub-groups/



Our Mental Health and Emotional Wellbeing Focus Group connects people with professionals to talk about improving local services.

Our research

Our research projects are one of the best ways that we can gather people's experiences about a specific issue and use them to make change happen. We know that the approach we take to form our recommendations in co-production with decision makers, ensures that our work has influence over the development of local support and services.

You can read more about this impact from page 36.

This year, our research projects

included...

More on pg. 38



My Health, Our Future (Year 2)

Our report about children and young people's mental health and emotional wellbeing.

More on pg. 44



My Care at Home

Our report about people's experiences of receiving care at home in Suffolk.

More on pg. 48



#AVeryDifferentConversation

Our analysis of data collated by a partnership to inform a new strategy for mental health in east and west Suffolk.

More on pg. 52



Perinatal Mental Health Services

Our analysis of data collected on behalf of Public Health Suffolk to support the development of services.

More on pg. 55



Discharge to Assess (Ipswich)

Our evaluation of discharge pathways from Ipswich Hospital using interviews with staff, patients and family members.

More on pg. 54



Suffolk Carers Survey

Our analysis of feedback gathered by Suffolk County Council to inform its developing new model of carer support.

We also submitted evidence to two national inquiries...

More on pg. 51



Sexual health services

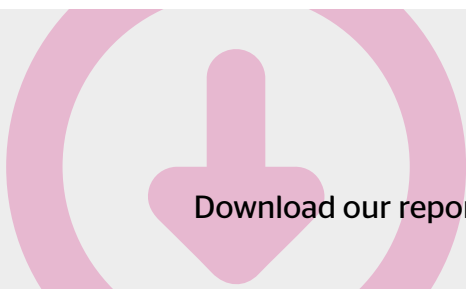
The House of Commons Health and Social Care Committee inquiry into sexual health in the UK.

More on pg. 50



LGBTQ+ people's experiences

The House of Commons Women's & Equalities inquiry into LGBTQ+ people's experiences of NHS and care.



Download our reports from www.healthwatchesuffolk.co.uk/reports

Visiting local services (Enter and View)

We have the right to visit (announced or unannounced) any premises where publicly funded health or social care is provided to people over the age of 18. These visits are called Enter and View.

Our volunteer “Authorised Representatives” visit local services in small teams so that we can talk to people using the services and make observations about the environment and care being provided.

All of our volunteers receive specific training and support. Many have experience of working as health or social care professionals or have lived experience as a user of services.

Following each visit, our volunteers will compile a formal report with recommendations. It is sent to the provider and shared with the following stakeholders, commissioners and regulatory bodies (not exhaustive):

- + The Care Quality Commission
- + Suffolk County Council
- + NHS West Suffolk and Ipswich and East Suffolk Clinical Commissioning Groups
- + NHS Great Yarmouth and Waveney Clinical Commissioning Group
- + NHS England

Providers have twenty working days to respond to our recommendations. Our reports include comments from the provider as supplied to us. This includes any action taken in response to our recommendations.



The visits

This year, we have visited a total of three services (all unannounced). We have outlined the reasons for undertaking these visits and the recommendations we made below.

Three other services were scheduled for a visit this year, however we chose not to conduct them so as not to obstruct ongoing quality improvement work. This was based on advice from the Care Quality Commission and Suffolk County Council's Quality Improvement Team.

A further visit has been planned within the year to the St Elizabeth Hospice in Ipswich. This visit will take place in May 2019.

The Lodge (Ipswich)

We visited this service in February 2019.

The purpose of the visit was to gather feedback and make observations. A previous CQC report had highlighted the extent to which staff at The Lodge engage with residents and adopt person centred care. We wanted to learn more about this approach to care and support.

We observed areas of good practice including that there was a warm and friendly atmosphere within the home, staff were caring and appeared happy, residents' individual needs were respected and there was an overall sense that care was personalised.

Some recommendations were made. These were focussed on improving social interaction and activity provision within the home, implementing reviewed strategies on enhancing hand hygiene, better monitoring of hydration and improved availability of furniture suitable to a range of people with differing physical needs.

The provider of this service has not yet responded to our report.

Depperhaugh Nursing Home (Hoxne)

We visited this service in November 2018.

The purpose of the visit was to gather feedback and make observations about life at the home and services provided by Kingsley Healthcare.

We observed good practice within the home, including that the management were supportive, person-centred care was well embedded, a highly motivated activities coordinator was in place and there were good hygiene practices.

A number of recommendations have been made and the home has planned improvements:

- + The installation of a large banner at the first set of gates to the home.
- + The home will implement our recommendation that the handrails to the upper floor should be a different colour to the walls to promote independence for those with dementia to navigate around the home.
- + Quarterly residents and relatives' meetings have been scheduled throughout 2019.
- + The home will produce a notice for its reception area that will encourage visitors to practice better hand hygiene.
- + The home will explore better signage that will accommodate a broad range of residents needs in accordance with the NHS Accessible Information Standard.

Chilton Croft Nursing Home (Sudbury)

We visited this service in September 2018, following an initial visit in 2015.

The purpose of the visit was to observe and gather information about the extent of choice

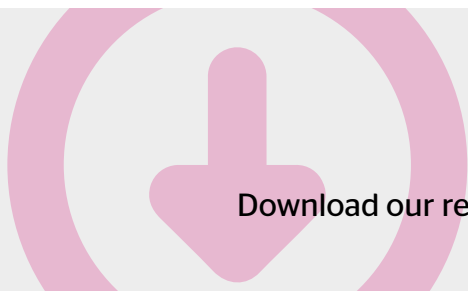
given to residents living in Chilton Croft, their involvement in their care and how they participated in planning their own care.

Good practice observed included that a designated carer was available within the lounge, providing a safeguarding role in the prevention of falls. A befriender is employed, who engages with residents in activities by talking and listening to the residents.

We have made a number of recommendations to this service. These included that the service should:

- + Improve meal choices.
- + Review its practice of using stair gates to restrict resident's movement.
- + Maintain safety by, for example, locking doors where access to cleaning materials is possible.
- + Increase visibility of planned activity.
- + Rearrange seating to encourage interaction between people in the lounge area.

The provider of this service has not responded to our recommendations.




Download our reports from www.healthwatchesuffolk.co.uk/reports

Feeding back is easy and you can be anonymous.

Visit www.healthwatchesuffolk.co.uk to find services and leave your review now. We will use it to make services better in Suffolk.





The feedback you provide about services helps us to make decisions about the services we should visit next. Our reports are shared with the bodies responsible for checking and improving the quality of care in Suffolk.

Improving services

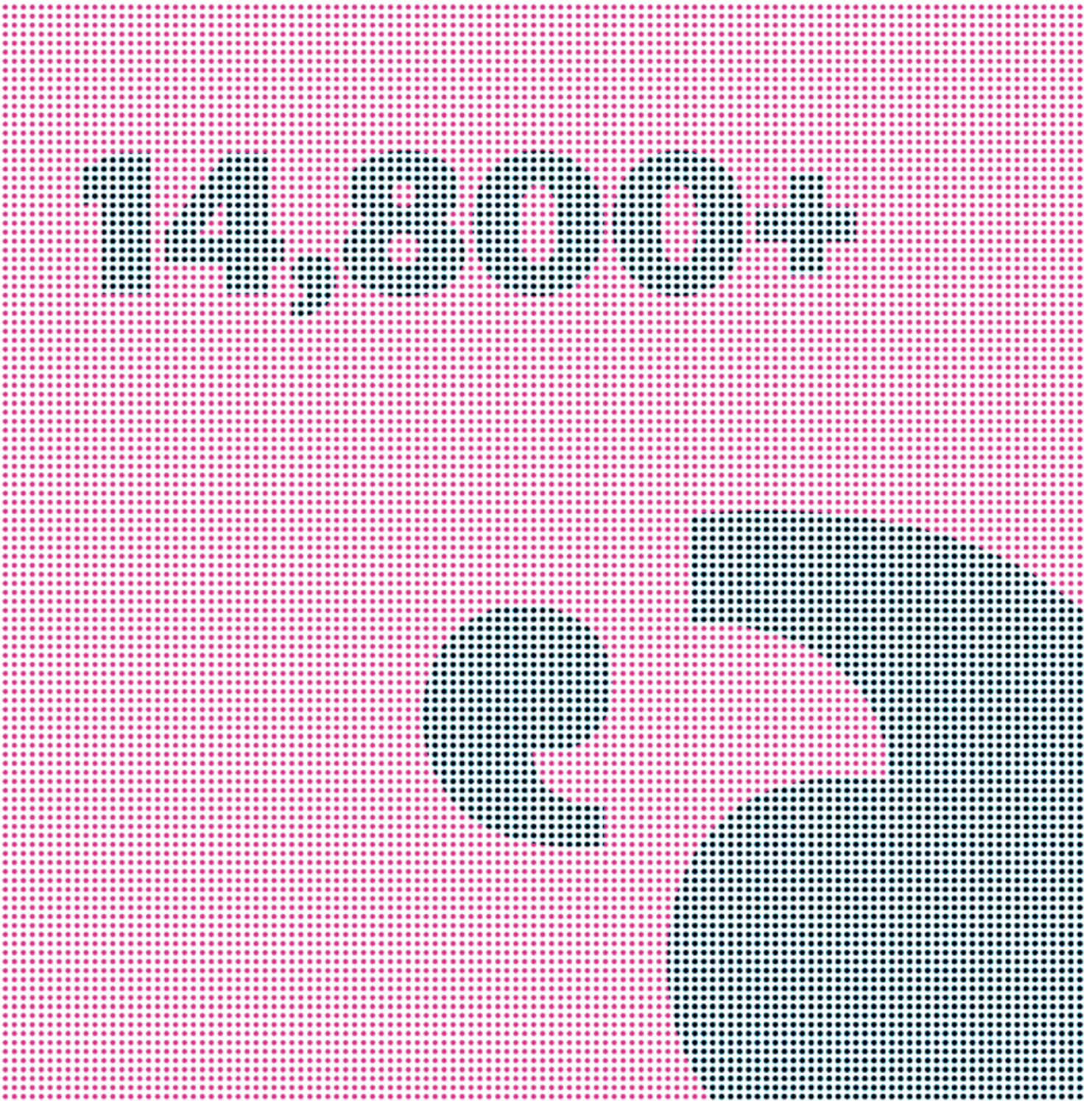
Find out how we've been using people's views to make things better.

In this section, we explore how our work has helped to shape, influence and improve local services. You will find clear examples of where patient feedback has been used by us to bring about changes to local care and support. This includes impact achieved through various means such as patient feedback, research projects, signposting and partnership working.

Our research

We use research to influence decision makers in health and social care with the views of our local communities. In this part of the report, you will find a breakdown of the key findings and outcomes from each of these projects.





That's a lot of dots!

Since the start of 2018, we've analysed close to **15,000** individual responses from people to our research projects. Nearly 14,000 of these responses are from children and young people.

If you are one of our dots, thank you! Every response has been used to shape your local services. See more throughout this section of the report.

My Health, Our Future



Our report about children and young people's mental health & emotional wellbeing



Children and young people will benefit from new approaches to supporting their mental health and emotional wellbeing needs after our report drew attention to the challenges they face, both inside and outside of school.

Across the two years of our "My Health, Our future" project, almost 14,000 responses (2017/18) have been recorded from young people aged 11 - 19. We've recorded views about a range of topics including wellbeing, social media, screen time, self-esteem, body image, self-harm, cyberbullying, sleep and screen time.



Said they are not taught about mental health and wellbeing at school

Key findings

- + 14% of children and young people are currently, or have previously self-harmed. 14% said they would rather not say. Of those who said they have self-harmed, 63% are female.
- + A quarter of female students aged 16 say they have self-harmed and 50% of those who do not identify as male or female have self-harmed.
- + When compared to their non-LGBTQ+ peers, LGBTQ+ young people experience lower levels of wellbeing, self-harm more, get bullied the most and face more challenges in school.
- + 38% of young people spend over four hours each day on social media. Almost half of female students had used social media as a way of escaping from negative feelings.
- + 12% of young people had been bullied online within the last two months. The rate of online bullying was four times higher for those who are 'limited a lot' by a disability.
- + More than half of girls and just under a

quarter of boys worry about their body image "most or all of the time". For girls age 16, over two thirds worry about their body image most or all of the time and, on average, those who worry about their body image had a lower wellbeing score compared to those who don't worry about their body image.

- + 28% have low self-esteem and the main reason for this was not liking the way they look.
- + 39% said they had tried drugs or alcohol and 23% said it had led to a situation they now regret.
- + 40% of children and young people spend most of their evenings alone in their rooms.



◀◀
28% have low self-esteem. The main reason for low self-esteem was **not liking the way they look.**

1 in 4 spend more than seven hours each day looking at screens. **Those who used screens for longer were more like to report self-harm.**



◀◀
More than a third of young people worry about their body image **most or all of the time.** High levels of worry about body image was most evident in female and LGBTQ+ respondents.



A 13 YEAR OLD GIRL COULD SEE A VIDEO OF A FAMOUS PERSON FOR INSTANCE SPEAKING ABOUT SELF HARM, SHE GOOGLE'S "WHAT'S SELF HARM?", SHE BEGINS TO FOLLOW TUMBLR PAGES THAT INCLUDE 'SELF HARM', AND THEN BEFORE WE KNOW IT SHE IS TOO CURIOUS TO NOT TRY IT. THAT'S WHAT HAPPENED TO ME.



What's the impact?

Further to the impact we reported in our annual report last year, "My Health, Our Future" has continued to be a driver for important changes and outcomes that will benefit young people. This has included:

- + All schools that took part have received a bespoke report in October/November 2018 that will be used to improve their approach to addressing the mental health and emotional wellbeing needs of their pupils. Schools have, for example, reported that they have been able to address gaps in their PHSE curriculum and have changed the content of lessons as a result.
- + The report has given commissioners a clearer view on the worrying scale of self-harm. As a result, they will work with some of the schools involved in the survey to develop a local campaign. This will include awareness and support for families and teachers as well as resources for young people.
- + The report has supported the decision to fund a pilot of two different whole school approaches to emotional wellbeing and mental health beginning in March 2019.
- + Throughout the life of the project, the findings have helped to ensure funding made available to the voluntary and community sector has been targeted at prevention work. The subsequent projects have been evaluated and

are known to have led to improved outcomes for young people in Suffolk.

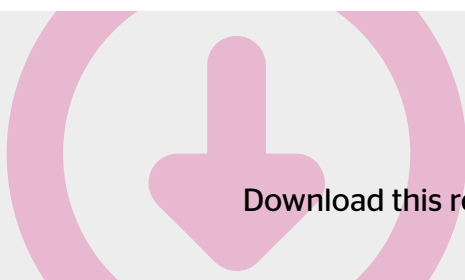
- + 80% of children and young people said their knowledge about mental health and emotional wellbeing had increased by taking part in the research.
- + The project has also enabled more children and young people to find support by signposting them to sources of help.

Additionally, the data from "My Health, Our Future", has been used as evidence to inform our submissions to national inquiries into LGBTQ+ people's experiences of NHS and social care support and, separately, sexual health services (see from page 50).

This work has also formed a specific part of the new strategy for mental health support in east and west Suffolk.



People took part in our interactive presentation at Suffolk Parent Carer Networks conference to launch the report.



Download this report from www.healthwatchsuffolk.co.uk/reports



“The very fact that we have been invited to complete this work year on year shows that the wellbeing of our children and young people is being taken seriously by those with the power to bring about improvements to local support. With that considered, our findings show how essential it is that action continues to be taken to tackle the root causes of the problems children and young people face with their wellbeing and to support their mental health inside and outside of school. Ultimately, the aim must be to help our young people to become more resilient.

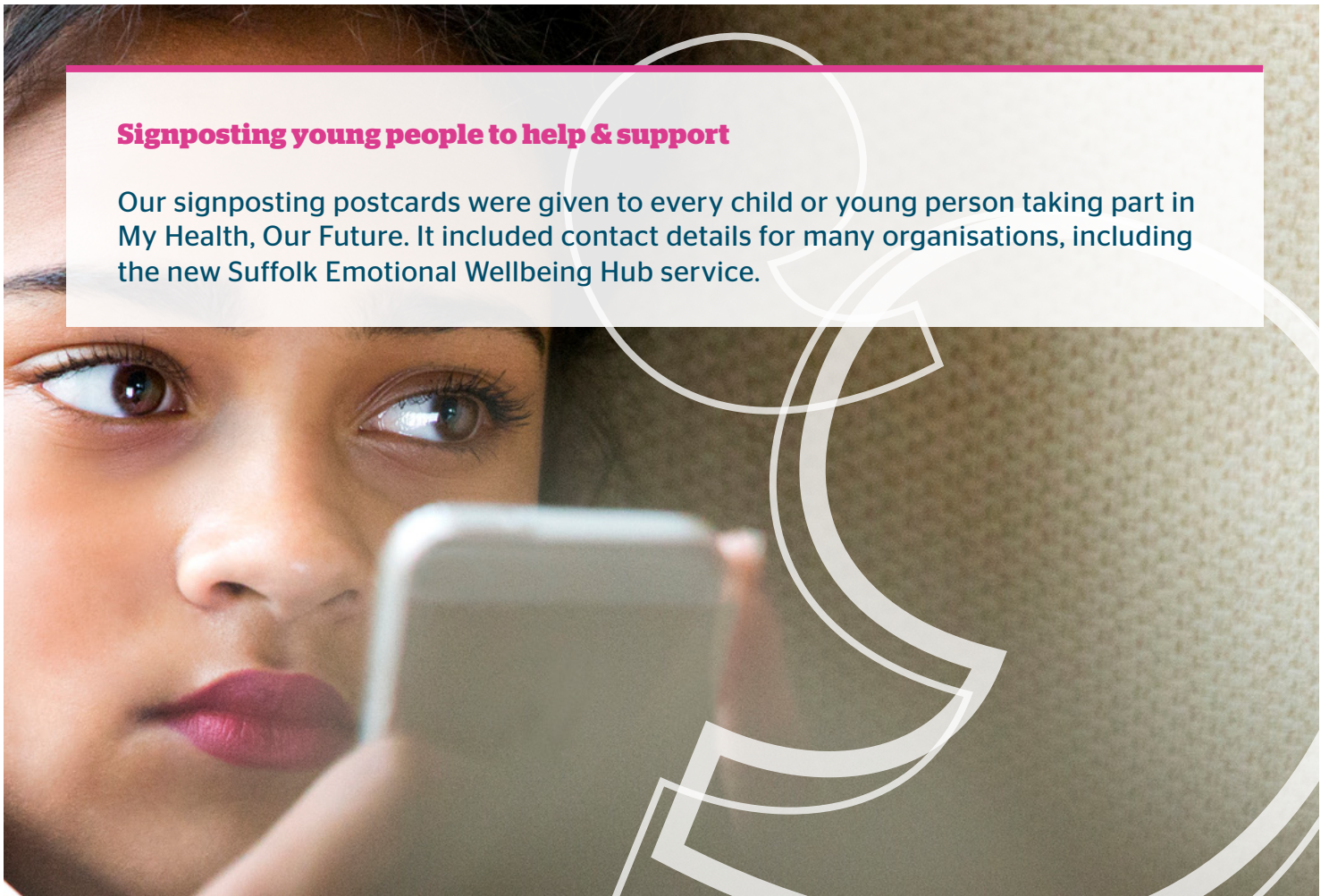
“This is particularly true of young people who identify as LGBTQ+ or as a gender other than male or female. We know from our data that, when compared to their non-LGBTQ+ peers, LGBTQ+ young people experience lower levels of wellbeing, self-harm more, get bullied the most and face more challenges in school. Addressing these concerns and developing a better offer of local support is very much a part of our ongoing conversations with commissioners and we hope to see improvements as a result. Some black and minority ethnic (BAME) also reflect lower than average levels of emotional wellbeing across a number of themes.”

Andy Yacoub (Healthwatch Suffolk Chief Executive)



Signposting young people to help & support

Our signposting postcards were given to every child or young person taking part in My Health, Our Future. It included contact details for many organisations, including the new Suffolk Emotional Wellbeing Hub service.



What do the schools say?

Schools have told us about some of the changes they made since receiving their “My Health, Our Future” from us. This includes changes like new lesson content, new student networks and better communication with parents.

Thurston Community College

As one of the schools trialling newly funded initiatives to address pupil wellbeing, Thurston Community College has made good use of its report to plan activity. This has included improved awareness amongst staff and students, a new peer support group for LGBTQ*+ young people and changes to its Personal Social Health Education (PSHE) lesson content.

Churchill Special Free School

The school has used its report to make changes that include an entirely new PSHE scheme of work and better communications with parents, governors and staff. There will be new lesson

content on relaxation, dealing with exam stress, sexual health and body image. Parents have also received information on subjects like digital wellbeing and coping with anxiety.

We know the school has recently been awarded the Wellbeing Award for Schools by the National Children's Bureau in recognition of its work in this area. Our report, and the actions taken by the school since, helped to support their successful application for the award.

Bungay High School

The school has improved links with outside agencies that can support referrals to services and signposting. Students can now find information within the “wellbeing corner”.

Additionally, the school has re-designed its PSHE content and worked with students so they can better support peers who may be struggling. There has since been an increase in mental health safeguarding disclosures made by students within the school.



Thurston Community College

“It has been a fantastic opportunity to capture our student population's emotional wellbeing needs. There has also been an opportunity to be able to teach them some new skills and understanding around issues like body image, cyberbullying, self-harm and dealing with exam stress.

“We have needed to think about how we can make our PHSE curriculum work. We have also been able to identify areas of need. For example, we have given students the opportunity to set up an LGBTQ+ group for those students to have each other as peer support. We have also allocated a member of staff to support the group”

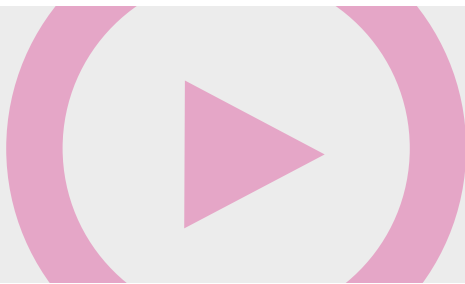
Dr. Beth Mosley (Clinical Psychologist at Thurston Community College)



Churchill Special Free School

"This is such a useful document for us. I can't tell you how grateful we are. We analysed our report and looked at which areas we felt we need to enhance in our PSHE curriculum and what we are in the process of doing is re-writing our entire scheme to work to reflect what our children are saying through the survey that they need."

Georgina Ellis (Headteacher)



Watch our videos about "My Health, Our Future" and mental health in schools on Youtube. Just search for "Healthwatch Suffolk" to find them.



We would like to thank every one of the **30 schools** that have taken part in "My Health, Our Future" since 2017.



- My Care at Home - People's experiences of home care in Suffolk

We worked in collaboration with Suffolk County Council to contact users of its home care services. This work was timely because the current contract for arranging and paying for home care called "Support to Live at Home" is due to end in 2019.

It was intended to be the main way the Council contracted for care but it has proven to not be an effective way to manage the services. Increasing demand for care means there are times when home care is not readily available resulting in longer waiting times and inappropriate admissions to hospitals.

The Council has therefore developed a new model and has used customer feedback from us to influence it.

Key findings

Over 500 people shared their experiences of home care services with us in a survey. Additionally, 50 interviews were conducted with more than 70 service users, their families and carers.

The evidence from both the surveys and the interviews show that service users are extremely positive about their carers. Satisfaction ratings in the surveys are very high, with most respondents reporting a 'good' or 'excellent' rating.

The report also identifies areas that could be improved to enhance the quality of local care. These include:

- + **Increased focus on people's needs:** It is important carers are fully aware of the specific needs of the person, particularly if they are not the person's regular carer. Care needs vary from one person to another and it can cause problems when carers are unaware of what care a person may need.
- + **Engage with people:** The task-focused nature of home care can be a barrier to engaging users of services on a human level. Taking a moment to engage with the person can make a big difference to their experience from day to day. This could be as simple as a conversation.

- + **Consistency is key:** If the user of the service can build a long term and trusting relationship with the person caring for them, this can make personal care much easier to cope with.
- + **Tell people if their care is going to change:** Changes to care arrangements can have a big impact on peoples experience of care. Taking steps to notify users of services that their carer will be late or a different carer may visit can help to reduce stress.
- + **Make more time for care:** People have sympathy for the pressures their carers are under. Providers should aim to keep the travel times between appointments realistic. This would release time to care and ensure people receive their full allocation of care.



We featured case studies, like Edward's story. You can read them all in our full report.



What's the impact?

We have identified three ways our report is shaping the future of home care services in Suffolk. These are:

1. In addition to Suffolk County Councils contract and performance monitoring processes, we have been invited to independently evaluate customer opinion about the new Locality service. Importantly, this will include an ongoing assessment about whether the care is adequately meeting the needs of service users and their carers.

Our feedback will enable Suffolk County Council and providers of care to be reactive to the things people say and to make improvements. We know that people will often not speak up because they fear it might have consequences for their care so we are confident our involvement will help to obtain meaningful and honest insights from people that really can make services better.

2. Providers bidding for the new Locality contract will be asked a question that we shaped with people using services. People were also able to input into what a good answer to the question could look like. It will help to ensure accountability on an element of care that is important to service users.
3. At its meeting in July, the Suffolk Health Scrutiny Committee invited us to present evidence on home care services. It agreed to endorse the recommendations set out in our report and requested an update from us once the revised Locality contracts are established. Our involvement ensures evidence from service users is being used to inform scrutiny of the new service contracts.

In addition to the above, we have attended Market Engagement Forums run by Suffolk County Council. These sessions gave care providers a chance to feedback about the shape of the new home care and support contracts in roundtable discussions.

Three ways we're shaping the future of home care services in Suffolk

healthwatch
Suffolk



Ongoing monitoring of people's experiences once the new home care services are operational.



Shaping the criteria new providers must meet when bidding for the new home care service contracts.



Making sure evidence from service users is being used to inform scrutiny of the new service contracts.



“The work carried out by Healthwatch Suffolk played a vital part in the design of our new care at home service. We used the Healthwatch data, especially feedback from people we care for and the market engagement forums, to substantiate and influence our plans for the new model. It was also an important body of evidence for us to use because it was carried by an independent watchdog.

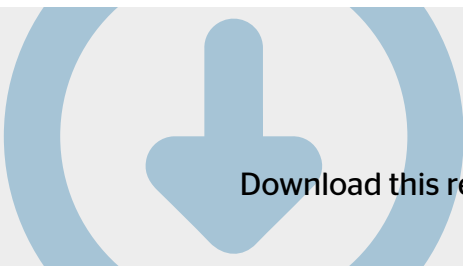
“We believe our new care model, which will be introduced next autumn, will robustly meet future challenges of growth and demand, and also deliver a high standard of care and support.”

Rebecca Hopfensperger (Cabinet member for Adult Community Services)



‘It's a personal thing, isn't it? And you're allowing somebody into your own personal house, your own space, to do a personal thing. And I think it's important to have that rapport, whereas if it continually changes, it's like, a stranger suddenly come to do a personal thing.’

A home care service user



Download this report from www.healthwatchesuffolk.co.uk/reports



Mental health services in east & west Suffolk

A very different conversation

Commissioners wanted to co-produce a strategy for the future of mental health support in east and west Suffolk.

That is how we came together with Suffolk Family Carers, Suffolk User Forum and Suffolk Parent Carer Network to form a co-production partnership.

The partnership developed a survey with professionals, service users and their carers and then coordinated a period of engagement to ask people about how mental health and emotional wellbeing support could be improved. This work was called 'A Very Different Conversation'.

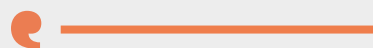
In total, the partnership had 4,430 direct contacts with members of the public, received 737 online survey responses and held more than 40 workshop sessions across the county.

This wide-ranging engagement produced a huge amount of data that we analysed on behalf of the partnership. The findings have been used, alongside information provided by Public Health Suffolk in a needs assessment, to produce a draft

Mental Health and Emotional Wellbeing Strategy for east and west Suffolk.

The final stages of this work will see the co-production partnership continue to have involvement in shaping what comes next for mental health and emotional wellbeing services in east and west Suffolk.

Up to 6,000 people have been engaged through this process to date.



Look out for more opportunities to shape mental health support in Suffolk on our website, and those of our co-production partners, in 2019/20.



Statement from NHS Ipswich and East Suffolk and West Suffolk Clinical Commissioning Groups

More than 800 people who had previously taken part in #AVeryDifferentConversation were surveyed by email.

The survey gave them the opportunity to say whether they felt their views and feedback were reflected in the draft strategy. It also asked them if they felt they had taken part in #averydifferentconversation and gave them the opportunity to suggest amendments.

Additionally, two further engagement events were held in Elmswell and Kesgrave that were attended by more than 300 people. Representations of the new mental health care model for Suffolk, the thinking behind it and an explanation of how it had been developed were placed on the walls at both venues.

Groups of attendees were then 'walked and talked' through them by representatives from our co-production partners and members of the CCGs' clinical transformation team, and invited to give their feedback.

As a result the draft strategy was later amended to reflect the outcomes of specific pieces of engagement work subsequently carried out with adults with learning difficulties and members diverse communities in Suffolk.

Separately, meaningful engagement also took place with front line staff from the Norfolk & Suffolk NHS Foundation Trust. All the email responses received between November and January were collected and analysed by Healthwatch Suffolk.

An amended draft strategy taking on board the feedback received was then re-circulated before being presented to the IESCCG and WSCCG governing bodies for ratification at the end of January. It was subsequently signed-off by both.

The next step is to seek permission as a system to continue working with our co-production partners

- Suffolk Family Carers, Suffolk User Forum and Suffolk Parent Carer Network - on delivering the new strategy.

They have a key role to play in consulting with their memberships on how mental health services will be delivered, and by whom, in the future. In the meantime, we continue to invest in and commission mental health services that will benefit our local population.

These include the launch of Living Life To The Full, a brand-new online resource available via all GP practices to help people overcome stress, low mood and anxiety through low intensity Cognitive Behavioural Therapy.

The CCGs have also commissioned a 24/7 mental health crisis support helpline for Suffolk GPs and their patients via the NHS 111 'Option 2' function, that goes live in April next year.



National inquiry:

Taking young LGBTQ*+ voices to Westminster

What better way to support Mental Health Awareness Week than taking the voices of LGBTQ*+ young people to the very heart of Westminster.

We were invited to give evidence to the House of Commons Women and Equalities Select Committee (appointed to examine the Government's performance on equalities issues).

It has been running an inquiry to consider whether health and care provision for LGBTQ+ people is adequate, whether discrimination is still occurring, and what more needs to be done to improve access to health and social care.

This amazing opportunity followed a submission we made to the inquiry, based on people's experiences gathered in a short survey and from the nearly 14,000 children and young people

that had participated in our "My Health, Our Future" project.

You can watch us give evidence to the committee on our YouTube Channel. Just search for "Healthwatch Suffolk" to find it.

“OVER THE YEARS I HAVE MET WITH OPEN HOSTILITY AND CLEAR PREJUDICE ESPECIALLY FROM GPs AND GP PRACTICE STAFF.”



From Facebook Workplace (National online network for Healthwatch)

“Another superb example of how your work locally can influence and make an impact nationally, on a much larger scale.” - **Public Affairs Officer for Healthwatch England**



National inquiry:

Sexual health services

The House of Commons Health and Social Care Committee conducted a national inquiry into sexual health. It wanted to find out more about people's attitude to sexual health and, in particular, how to tackle the growing number of Sexually Transmitted Infections (STIs).

We used evidence from our My Health, Our Future project to develop an evidence submission for the inquiry. We also submitted the same information to Public Health Suffolk, which conducted a local survey to inform service development in Suffolk.

Key findings

- + As they got older, respondents were less likely to talk to their parents about their sexual health (78% of 11 year olds; 34% of 16 year olds).

- + Preferences to talk to friends increased with age (32% of 11 year olds; 52% of 17 year olds). Similarly, respondents were more likely to speak to their doctor as they got older
- + The preference for receiving information about sexual health in school lessons falls from 62% at age 11, to 37% by age 17.
- + Only 13% of 11 year olds said they wanted to get information from websites. However, for 19 year olds, websites were their preferred choice.



“We don't do enough sex ed in school and many girls are confused about their own body and have to find out online/through others” - Female (Age 12)

Download our evidence submissions from www.healthwatchesuffolk.co.uk/reports



Perinatal mental health

People's experiences of local support

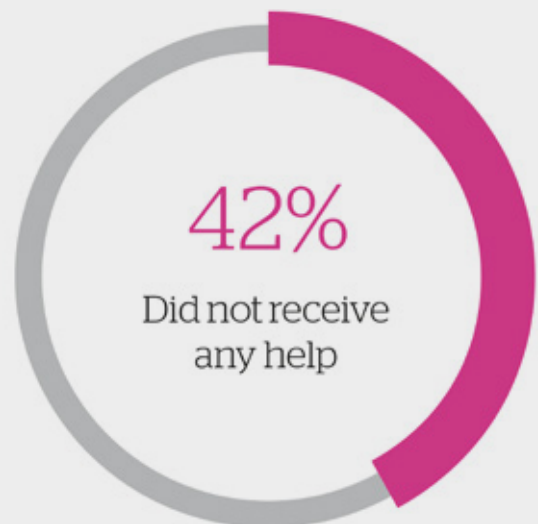
Perinatal mental health problems are those that occur during pregnancy or in the first year following the birth of a child. Perinatal mental illness affects up to at least 20% of women and are also common in men.

Mothers and partners completed a survey at the end of 2018. It was designed for them to provide feedback about their experiences and to help shape the development of support services in Suffolk.

We helped the Suffolk Perinatal Mental Health Service and Public Health Suffolk to gather responses by hosting the survey. We also analysed people's responses to the questions and created a short report about the findings.

This work has also been shared with Healthwatch England, which has been running its own national program of work. It wants to help inform mental health policy and practice by creating a robust national evidence base about people's experiences of mental health care at different stages of life.

The first part of this national work was about perinatal mental health support.



A key finding was that 42% of those surveyed had not received support for their mental health before, during or after the birth of their baby.



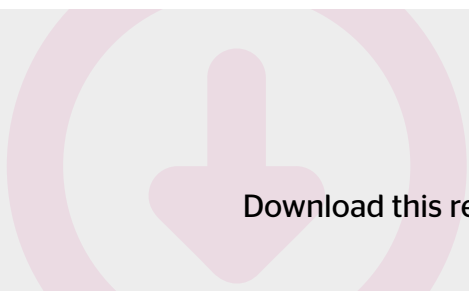
“The report has been circulated to the Suffolk Perinatal Mental Health Steering Group which has oversight of developments to improve access to support and interventions across the continuum of mild to moderate perinatal mental ill health for women and partners.

“It is encouraging to see the positive responses from women who have received care from the new East and West Suffolk specialist perinatal mental health service and the feedback on other services has been directly fed back to service managers for consideration.

“Whilst there is some positivity evident within the survey responses, we must recognise that many people have reported a less favourable experience and highlighted significant problems with access to services. These are issues that we must look to improve as our perinatal mental health offer continues to develop in Suffolk.

“The findings from the survey add to those carried out by our local Maternity Voices Partnerships and will inform current work on reviewing ante and post natal programmes and development of community based support - such as the recently commissioned peer support pilot for Suffolk, as well as the pathways of care between maternity, health visiting and primary care services.”

Sharon Jarrett (Head of health improvement, Children, young people & families and risk behaviours for Public Health Suffolk)



Download this report from www.healthwatchsuffolk.co.uk/reports





The Suffolk Carers Survey

People's experiences of support in Suffolk

The Family Carers Survey aimed to ask family carers about what they would like from the future of services designed to support them.

The survey was designed by the Carers Steering Group, which is coordinated by Suffolk County Council and made up of both professionals and adult carers. We were commissioned to independently analyse people's responses (195 in total).

Key findings

- + Carers felt that they had unmet needs or that there was a lack of support available for them in Suffolk;
- + People said information was poor and that they did not know what services are available;
- + A large number of carers had used Suffolk Family Carers (SFC) for support;
- + Carers felt that carers assessments were useful, however some respondents had been unable to access them;
- + Carers reported that they better access respite or that they felt that respite would be useful;

- + Respondents reported that needing support for their own wellbeing, finding it difficult to balance work and caring responsibilities and changing needs of the person who they cared for were all factors which lead to them asking for support.
- + Carers also reported that they felt like they needed to be able to cope on their own and that this could put them off asking for help.

The findings will be used by Suffolk County Council to inform the future model of carers support in Suffolk.



Discharge to Assess

Analysis of people's experiences at Ipswich Hospital

The National Audit Office has reported that unnecessary delay in discharging people from hospital is systemic and, in 2015, accounted for 1.15 million bed days nationally.

That is why a partnership of Ipswich Hospital NHS Trust, Suffolk County Council, Suffolk Community Healthcare and the NHS Ipswich and East Suffolk Clinical Commissioning Group have been working together to implement a major transformation in how delayed transfers of care (DTOCs) are avoided.

Patients are allocated to one of four possible discharge pathways. These aim to ensure safe and effective discharge to the most independent living arrangements possible, avoiding the need for an admission to hospital.

The pathways are:

- + Pathway 0 (zero): the individual is ready to return to their usual place of residence, where appropriate, with their usual care package of informal support or domiciliary care.
- + Pathway 1: The individuals need can be met safely at home with further reablement to regain independence.

- + Pathway 2: The individual is not safe to return home and further reablement in a bed-based community service is needed before they return to their usual place of residence.
- + Pathways 3: The individual is not safe to return home and there are doubts about their ability to regain independence and return to their original place of residence.

On behalf of the partnership, we conducted an evaluation of the four pathways from Ipswich Hospital using interviews with staff and patients and/or their family members. The aim was to offer a view on how well the D2A approach was working for patients and staff in the Ipswich and east Suffolk area.

In total, 42 patients and their family members were interviewed regarding 43 discharge experiences from Ipswich Hospital that had occurred between November 2018 and February 2019.

You can download our executive summary of the analysis from the website.



Neighbourhood Nursing and Care Team

Buurtzorg Test and Learn Evaluation

A small number of people in West Suffolk have been receiving care at home as part of a new trial of community based nursing and care delivered by the new Neighbourhood Nursing and Care Team.

The project has been inspired by Buurtzorg Nederland, which is a successful Dutch home care organisation. It aims to empower nurses to deliver all the care that patients need. The team handles every aspect of care and business, from patient assessment and personal care to staff recruitment and schedules. The nurses are 'generalists' taking care of a wide-range of patients and conditions.

Providing care in the community rather than in hospitals is seen as a way of both improving patients' reported experiences of care and also reducing pressure on hospitals but this sort of model is new to the UK. Whilst the model is known to have been successful in Holland, there is a need for a much greater understanding of how well this type of care can be delivered within the English health and care system.

We have completed a number of in depth interviews with patients and carers about

their experiences of receiving care from the Neighbourhood Nursing and Care Team. We will analyse the feedback and share the results with the leaders responsible for making decisions about the future expansion of this new model of care.

The King's Fund has also been exploring what adaptations have to be made to the Buurtzorg model, and to the way things are normally done in the English health and social care systems, in order for the model to work here. They have interviewed the nursing team, other clinicians and managers in the health and social care system who are involved in, or effected by, the test. The aim is to gather learning to inform any future larger-scale test of the model in Suffolk, and to help teams in other parts of the country who are also interested in trialling the model.

Ultimately, the local commissioning partnership behind this test and learn, will seek to learn from this trial in order to positively influence current and future health and care integration initiatives in the county.



We're planning a major project to explore people's experiences of residential & nursing care for 2019/20.

Using your views to improve services

In this section, we share examples of impact we have achieved by sharing your stories with those responsible for planning & running local services.



Improving access to Frenulotomy Services

Tongue-tie is where the strip of skin connecting a baby's tongue to the floor of their mouth is shorter than usual. It can restrict the tongue's movement, making it harder to breastfeed. Treatment isn't necessary if a baby can feed without any problems. If their feeding is affected, treatment involves a simple procedure called frenulotomy.

With the West Suffolk Maternity Voices Partnership, we asked NHS bodies to respond after people shared their stories about the challenges they had faced in getting a diagnosis, and how this had impacted upon their lives and the enjoyment of becoming new parents.

In response, Suffolk commissioners worked with the West Suffolk Hospital to establish a weekly consultant led Restricted Frenulum Clinic. This means that babies born at the hospital, or those receiving postnatal care from midwives, can be referred for the release of both anterior and posterior tongue restrictions. These babies can be up to eight weeks of age.

Referrals to the clinic are made by staff that have received training in tongue-tie assessment. The clinic is supported by either a midwife or a midwifery support worker trained in infant feeding to Baby Friendly Initiative standards. After the restriction is released a supervised feed is undertaken to support breastfeeding.

To support the new service, WSFT has arranged opportunities for NHS staff to be regularly

trained in the effective identification of tongue-tie in newborn babies to help with referrals.

Prior to the establishment of this clinic, there was no service in west Suffolk. Parents would either have been referred to Norfolk and Norwich University Hospital for treatment, and may have faced extensive waits for treatment, or they may not have had the opportunity to get a diagnosis in the first place.

The establishment of the clinic is a brilliant example of how people's experiences can be a powerful tool to shape and influence our local offer of services.





Thank you :)

A huge thank you to Laura, Katy and Hannah. They, alongside other new parents, shared their stories with us and helped us to get this new service up and running. It couldn't have happened without them.

You can read their stories on our website. Look for the article "Three mums, one shared experience". You'll find it on: www.healthwatchesuffolk.co.uk/about-us/focus-on



"We are really pleased to be offering this new service to our new families - we hope it will support mothers to initiate and continue breastfeeding when possible, to promote the best start in life for their newborns. Alongside our partners at Public Health England we will be reviewing and monitoring the progress of our patients with follow-up appointments.

"I'd particularly like to thank Healthwatch Suffolk and the West Suffolk Maternity Voices Partnership for bringing the necessity for this service to our attention, and working with us to build this new service to accommodate our patients' needs. We always strive for ways to improve the care we provide."

Lynne Saunders, head of midwifery at West Suffolk NHS Foundation Trust



Feeding back is easy and you can be anonymous.



Visit www.healthwatchesuffolk.co.uk/services to find services and leave your review now. We will use it to make services better in Suffolk.

Making it clear - Birthing partners at Ipswich Hospital

In 2016, we published our report about the experience of new mums and their birthing partners at the Ipswich Hospital. This was a successful piece of work and resulted in a change in policy regarding overnight stays for birthing partners.

Since then, we have heard from numerous individuals that have benefited from the changes. However, more recent patient feedback indicated that the Trust had changed its policy. There appeared to be no clear message from the hospital.

People told us partners were either asked to leave or informed that the Trust “does not do that anymore”. No individuals told us they were offered an alternative option.

We asked the hospital to respond to the feedback. It confirmed the current policy as:

“All birthing partners are welcome to stay with their partners during the induction process and during labour. Overnight

stays on the postnatal ward are open to all partners if they request to stay and especially for women who need additional support following the birth of the baby. There is no blanket policy stating partners cannot stay on the postnatal ward.”

Following our challenge to the Trust, it acknowledged that there had been miscommunication with staff on the ward and their interpretation of the policy.

The Head of Midwifery has discussed this with the Ward Lead and has asked them to reiterate to the maternity staff that partners should not be refused accessibility to staying with their partners if a request is made. This message will also be circulated to staff in a weekly newsletter.



Ipswich Hospital will trial new options to prevent losses of personal items

Ipswich Hospital will explore how it can make better use of its own services to deliver replacements for lost items after we raised concerns about its response to patients.

More than once, we have been made aware of issues affecting patients within hospitals that relate to the loss of essential health related possessions (e.g. hearing aids or dentures).

With our intervention, NHS England was able to source dental care for the patient but there remains a gap in the services because there is no service that will attend to people's dental care needs in hospital, even if it is likely you may not be able to leave the hospital.

A response to us from David Barter (Head of Commissioning for NHS England Midlands and East) acknowledged this failing in services and advised that hospital PALS teams would be made aware of the procedure to follow in future. NHS England has not however committed to contracting any service to address the gap. For us, this is about essential patient care and

compassion for the sickest of patients. That's why we asked the hospital to reflect on its response and to consider improvements.

In a response from Nick Hulme (Chief Executive of East Suffolk and North Essex Foundation Trust), the Trust acknowledged that losses of personal items are a feature of some patients experience. It has purchased storage boxes for individual patients beds that will allow personal items to be stored safely.

The use of these new boxes will be tested and evaluated. They will initially be tested within service areas known to have seen higher losses of items (e.g. elective care). If successful, they could be spread to more services.

Mr. Hulme has also committed to discussing the issue of dental care pathways with commissioners and will also consider how it can better make use of internal services to deliver replacement items for patients (e.g. hearing aids) in the event of loss.



Working in partnership...

Nearly everything we do starts with the premise that a collaborative approach is the best way to reach the best possible outcomes for the public and for the health and care sector workforce.

In this section, you can find out how we work with other people and organisations to shape local services.

A seat at the table

There are many forums established to make decisions about the way services are organised. Some are run by senior leaders of organisations and others are attended by people working on the frontline of services.

In addition to our Community Development Team activity (see page 16), our staff have attended over 100 of these forums to influence discussions and shape local care.

We attend because people drive changes. Therefore, you have to be in the room with them to build relationships and influence their thinking. Attendance at these networks is also an essential component of our intelligence. It ensures that we know about the latest happenings in NHS and social care services.

Our role is to use your experiences to shape and inform discussions. We also attend to encourage providers and commissioners to involve local people whenever they are considering changes to services.

Examples of forums and networks

There are numerous forums concerned with the future of children and young peoples services in Suffolk. This includes the Children and

Young People's Board comprised of the senior leadership of our local Clinical Commissioning Groups, Suffolk County Council and other bodies.

Our My Health, Our Future project (see page 38) has ensured that we have an authoritative voice within these networks. We know that our findings have been a recurring feature at all of these meetings and have focussed people's minds on why support needs to be improved.

Other strategic networks and forums (amongst many others) that we attend include:

- + **The Suffolk and North East Essex Integrated Care System Board** - See page 68 for full details about the work of this important Board.
- + **Primary Care Commissioning Committees** - These committees make decisions locally on how GP services are commissioned. We use our intelligence about local practices to help shape and inform discussions.
- + **Patient and Carer Forums** - These groups enable service users to participate in discussions about the way services are working.
- + **East of England Quality Surveillance Group** - These groups bring together different parts

of the regional health and care system, to share intelligence about risks to service quality. Where serious risk is identified, members of these groups can work together in a coordinated way to ensure action is taken and quality improved.

- + **The Local Maternity System Board** - This Board is tasked with realising the ambitions of the “Better Births” National Maternity Review. It aims to ensure that women, babies and families in Suffolk are able to access the services they need.

See page 58 for information about how our

attendance at this Board has led to a new service for people in west Suffolk.

- + **Voluntary and Strategic Partnerships (VASP)** - See page 58 for information about how we have been working with members of the VASP in localities across Suffolk
- + **Norfolk and Suffolk NHS Foundation Trust Oversight Assurance Group** - Read from page 86 for more information about how attendance at this group by one of our volunteers is helping us to encourage important improvements to the way your local mental health services are working.

**People make
change happen -
So, where you
influence matters!**

**There’s a seat with our name on it at over 100
strategic NHS and social care meetings, networks and
forums. We’re shaping discussions at all of them
using your views and experiences.**

How we work with the Care Quality Commission (CQC)

The CQC is the regulator for health and social care services in England. It checks to make sure your local services meet fundamental standards of quality and safety. It has a legal duty to listen to the things we say about services.

We have continued to work effectively with the CQC to ensure local voices are included within its programme of work. We have maintained good contact with CQC inspection leads and use these relationships to share information and intelligence about people's experiences.



Informing CQC primary care inspections

Our team have engaged patients within GP practices across Suffolk and this means that we have obtained a large quantity of data that can help the CQC to plan its programme of primary care inspections.

In early April 2018, we published our report about people's experiences of GP practices across Suffolk. It brought together data from our online Feedback Centre, the national NHS website, CQC and the national GP survey commissioned by NHS England.

The report was considered by the Primary Care Commissioning Committees across Suffolk and they have requested a second report. We know that the CQC has made use of our data to inform its primary care inspection planning. We also know that the data has been used as a tool to justify the CQC ratings awarded to practices and to challenge local practices to improve their services.

The report was highly successful and promoted by CQC to other LHW as an example of good practice and intelligence sharing. We have also noticed an increase in the uptake of our Feedback Centre

widget by practices that have been encouraged by CQC to enhance their efforts to monitor people's experiences of their services.



“CQC have continued to have an effective working relationship with Healthwatch Suffolk. CQC have made use of the Healthwatch Suffolk report (April 2018) ‘GP practices in Suffolk. What people told us February 2017 to February 2018.’ This has been used in GP practice inspection reports to evidence feedback from patients. Future versions of the report will be used to help support inspection planning through the use of GP practice Annual Regulatory Reviews.”

Anna Glaedell (CQC Inspector)

Information sharing - Adult social care

We are a participating member of Suffolk Provider Performance Board meetings.

Led by Suffolk County Council and the Care Quality Commission, the provider performance process brings together local partners to share information about adult social care services.

We use these important meetings to share the feedback we receive about local services and highlight any concerns. They are also instrumental in helping us to determine the location of our Enter and View visits because they enable us to identify where the outcomes of our visits can have the most impact.

Working together to improve care quality

We shared people's experiences of a local residential care home with the Care Quality Commission and Suffolk County Council. The feedback we had received gave us cause for concern and indicated standards of care were falling below the current CQC rating of “good”.

In response, the CQC agreed to bring forward an unannounced inspection of the care home

in order to check standards and recommend improvements.

Following the visit, the lead CQC inspector and her team invited us to meet with them and local authority contract managers to discuss arrangements and outcomes. This included the opportunity to review our intelligence about safeguarding issues raised with us by the relatives of residents.

Safeguarding Adults Board

As an active member of the Safeguarding Adults Board, we have worked to improve participation by the public in its work. This includes the introduction of Lay Member roles and authorship of a first ever engagement strategy.

More recently, we have encouraged the Board to consider a new project exploring people's experiences of the adult safeguarding process. This offer has been agreed in principle and we will now build a formal business case for this funded project, inspired by a similar approach taken by Healthwatch Oxfordshire. Look out for updates about this work on our website.

The Suffolk Health and Wellbeing Board (H&WB)

We have a statutory seat on the Board, which has a duty to “encourage integrated working” between public services in order to improve wellbeing in Suffolk. It is also responsible for delivery of the Joint Strategic Needs Assessment and the Suffolk Health and Wellbeing Strategy.

Our representative on the Board has continued to be our Chair, Dr. Tony Rollo. He is supported by our Chief Executive (Andy Yacoub), who is also a member of the H&WB Programme Office (PO). The PO advises on a variety of matters related to the Board’s agenda.

We also contribute to the Suffolk Health and Wellbeing Network, which is representative local voluntary and community sector organisations involved in health and wellbeing. Meetings take place prior to each H&WB meeting, which means we can support our own representative with intelligence they can use to be an effective influence for local people.

Whenever possible, we have taken the opportunity to share relevant insights with the Board. This has included, for example, the presentation of our “My Health, Our Future” report to the Board in May 2018. This meant our work has informed discussion regarding the desire for every child to have the best start in life; a key strategic priority for the Board.

In 2017/18, together with partners, we successfully applied to make Suffolk a Hub for the Time to Change mental health campaign. The application was endorsed by the Board and has enabled mental health “champions” to put on events that encouraged people to talk about mental health and learn about support.

This project has now completed but it’s legacy continues. In May 2018, the Board signed the Time to Change Employer Pledge collectively, with partner agencies signing up individually in the intervening 12 months.

Organisations that sign the employer pledge will work directly with Time to Change to develop an action plan to encourage their employees to talk about mental health and have access to resources, including training and promotional materials.

We have also contributed to other key work undertaken by the Board including:

- + **Neighbourhood Nursing and Care Team** - Read more about our work to evaluate patient experience of this trial on page 56.
- + **The Pharmaceutical Needs Assessment (PNA)** - We were a participating member of the PNA steering group.
- + **Integrated care in Suffolk** - We shaped discussion and reports about the progress of local Sustainability and Transformation Partnerships (STP) in Suffolk and North East Essex and Norfolk and Waveney. Read more about our strategic involvement with these networks from page 68.
- + **Transformation funds (West Suffolk and Ipswich and East Suffolk)** - West Suffolk and Ipswich and East Suffolk Clinical Commissioning Groups (CCGs) identified £4.8m Transformation Funds for proposals that could demonstrate transformational change linked to local NHS and care strategies for the county. Our CEO chaired panels that were tasked with scoring each bid.
- + **Mental health and wellbeing in Suffolk** - We have been, and remain, a key partner of this co-produced programme of work that will lead to the procurement of new mental health services in east and west Suffolk. Please refer to page x for more information about “A Very Different Conversation”, our partnership work with Suffolk Family Carers, Suffolk Parent Carer Network and Suffolk User Forum.



Members of the Health and Wellbeing Board signed the Time to Change Employer Pledge in May 2018, including our Chief Executive (Andy Yacoub). This was a key ambition of the Time to Change Suffolk Hub that we coordinated as lead partner.

The Health and Overview Scrutiny Committee

Suffolk County Council is required to have a Health and Overview Scrutiny Committee (HOSC) made up of local councillors. It has responsibility for scrutinising health and care services across the county.

Our Chief Executive meets with the Chair, Vice Chair and administrators of the Committee prior to each HOSC meeting. This is a chance to reflect on previous meetings and to report on issues that local people have raised with us.

This exchange of information means that we are able to help shape the current and future agenda of the HOSC, including the challenges made by the committee to the leaders of local services. Our Chief Executive is also invited to interject and to debate at every meeting.

At its meeting in July 2018, the Committee considered a report setting out proposals for the recommissioning of home care services. We were invited to present evidence to the meeting because the committee was aware of our "My Care at Home" report (see page 44).

Our presentation included the involvement of a home care service user, who offered their perspective on our findings to the committee.

The committee agreed to endorse the recommendations set out in our report and requested an update from us on any follow-up work we undertake with Suffolk County Council when the revised home care contracts are established.

Sustainability and Transformation Partnerships

Local health, care and voluntary sector leaders have been working together to develop plans that aim to improve the health and wellbeing of our population, improve the quality of care and delivery financial stability for our services. These are called Sustainability and Transformation Plans (STP).

There are two STP areas that cover Suffolk and these are the Suffolk and North East Essex Sustainability and Transformation Partnership and Norfolk and Waveney STP.

In Suffolk and North East Essex (SNEE), we have been involved strategically as a member of the STP Board. We have also offered advice on communications and engagement. Healthwatch Norfolk is the lead for Norfolk and Waveney STP, though we have had limited involvement on some communication and engagement work concerning Suffolk residents.

Each S&NEE STP Board meeting, which includes membership comprised of many people responsible for leading our local NHS and care services, begins with a themed presentation and discussion. That means we are often able to provide intelligence to shape and inform discussions (e.g. using our data regarding children and young people's mental health and wellbeing).

Our aim, as a strategic member of this important network, is to offer advice and guidance, to challenge assumptions and champion the importance of engagement and coproduction on any plans for changes to the way services are provided in our county.

Discussions by the Board have focussed on a variety of important areas, such as mental health and emotional Wellbeing, maternity services, diabetes, mental Health in school settings, cancer services, stroke services, end of life care and many others.

We have also carried influence within other important forums that form a part of the STP like the Local Maternity System Board (a group charged with taking forward the recommendations of a national maternity review). This has led to outcomes such as the introduction of a new tongue-tie clinic at West Suffolk Hospital (see page 58) and forthcoming work with local Maternity Voices Partnerships to record people's experiences of changing maternity services.

We are monitoring the development of these plans with continued interest and will always challenge senior NHS and care leaders to find opportunities for communications and engagement with the public wherever possible.



For more information about the work of the Suffolk and North East Essex STP ("Can Do Health and Care), please visit www.candohealthandcare.co.uk.



For more information about the Norfolk and Waveney STP ("In Good Health"), please visit: www.norfolkandwaveneypartnership.org.uk



Looking ahead - We'll be working with Healthwatch Essex to employ a Public Engagement Officer. They will help the S&NEE STP to engage local people about specific areas of work. Look out for more details on our website.

Working with our network

Healthwatch England

As a part of the Local Healthwatch network we continue to support Healthwatch England, as the national consumer champion, in its wider engagement.

Throughout the year, we have contributed to numerous conversations coordinated by Healthwatch England and these include:

- + The National Healthwatch Communications Network
- + The national Healthwatch conference
- + East region Local Healthwatch Network
- + The Yammer and Facebook Workplace social media network for all Local Healthwatch

We share all of our reports with Healthwatch England to ensure that our feedback is included within its work to influence national health and social care decision making and policy.

Over time, this has resulted in our work being featured within a number of national briefings.

A good example of this has been our work with Public Health Suffolk to find out about people's experiences of Perinatal Mental Health support in the county. You can read more about how Healthwatch England will be using this information from page 52.

Other local Healthwatch

Improving Healthwatch involvement with the regional moderation of Clinical Commissioning Group leadership

Every May, NHS England (Midlands and East) convenes a group to moderate CCG leadership.

As part of the review process, local NHS England teams often invite a patient or Healthwatch representative to attend to provide insight on the individual Clinical Commissioning Group's (CCG) leadership from a patient perspective.

CCGs can be assessed as green star, green, amber or red on their quality of leadership (QoL), based on set key lines of enquiry and intelligence such as an annual stakeholder survey of CCGs. Local QoL assessments are moderated across



We shared the findings of our work on Perinatal Mental Health with Healthwatch England because it is completing a national project on mental health at different stages of life. Healthwatch will use this work to shape national policy. Read more on [page x](#).



This year, new data protection legislation has encouraged us to collaborate with other local Healthwatch in our region. We share a Data Protection Officer (DPO) and best practice on things like policies and process.

the region for consistency of process and decision making by a multi-disciplinary regional panel. Our Chief Executive has previously attended regional moderation for the Midlands and East region to provide a fresh and external pair of eyes, to comment on the consistency of decision making and the overall process, as well as to remind colleagues from NHS England about the patient at the heart of CCG decision making.

This year, we sought to enrich the input from local Healthwatch by coordinating the submission of statements from them about the performance of their local CCG leadership. 12 other LHW agreed to take part and these include:

- + Birmingham
- + Norfolk
- + Lincolnshire
- + Warwickshire
- + Essex
- + Sandwell
- + Derbyshire
- + Telford & Wrekin
- + Coventry
- + Cambridgeshire & Peterborough
- + Stoke on Trent
- + Milton Keynes

The spreadsheets used to consider evidence for moderation contain information from the Clinical Commissioning Groups and other bodies like NHS England & NHS Improvement. It is hoped this exercise will ensure the local Healthwatch perspective is fully included.

Data protection

The EU General Data Protection Regulation (GDPR) is the most important change in data privacy regulation in 20 years. It is the primary law regulating how companies protect EU citizens' personal data.

Under the GDPR, we are now required to have a Data Protection Officer (DPO) in place.

To ensure best use of our resources, we have come together with other local Healthwatch to share this role. Our DPO has helped us to consider and implement all of the changes necessary to ensure compliance with the GDPR and will continually audit our processes to ensure that compliance is maintained.

You can read more about our data protection practices in our privacy statement. Visit our website or call us to request a copy.

Promoting better mental health at the Voluntary & Strategic Partnership (VASP)

The Suffolk VASP brings a range of individuals and organisations together to share information about mental health, pool resources, reduce stigma and to identify gaps in service provision.

Its network of supporters has continued to grow. Over 600 people now participate and over 150 voluntary and statutory organisations are represented. They share information within seven Locality Groups across the county.

Our Community Development Manager is the Chair of the Strategic VASP, which meets quarterly and brings together those with broader, more strategic roles.

The VASP is enabling news and information to be shared countywide from services about their events and current developments. The VASP is active on social media (Twitter and Instagram), both @oursuffolkvasp.

Working together on complaints

We facilitate and chair the Suffolk Complaints Managers Network. It is an informal group of professionals providing services within the NHS or social services.

The group, which meets twice a year, works to improve complaints handling within the county by sharing good practice and providing peer support in a safe environment. The benefits of this have included:

- + The Network is a part of the National NHS Complaint Managers Forum. This gives members access to a library of nearly 400 documents that can support better complaints handling by sharing best practice.

- + The network brings people working in complaints together to share best practice. For example, this year we welcomed Chris Kitchener (Associate Director of Governance & Risk Management at the East London Foundation Trust), who explained how improving how complaints are handled had helped to change the culture within the Trust.
- + One very well attended meeting saw Jane Stewart (Investigator, Local Government & Social Care Ombudsman) talk about how complaints referred to the Local Government Ombudsman are investigated.

“There are few opportunities to have a discussion with other people managing complaints so this makes the Suffolk Complaints Managers network a worthwhile one to attend. There are very relevant guest speakers who provide useful learning tips and can provide a better understanding of their services (for example the Parliamentary and Health Service Ombudsman (PHSO). We are very fortunate to have such a forum in Suffolk as I am aware other areas do not and I am sure would benefit from this useful and informative group.”

Zoë Pursglove (Quality & Patient Experience Manager, Care UK)

Building relationships with local organisations is an important focus for us. We want to strengthen the local Voluntary and Community Sector (VCS) economy and, in particular, its ability to influence developing models of health and care delivery.



Our Partnership Agreements with organisations in Suffolk

We have signed partnership agreements with a number of organisations that work with people who use services in Suffolk. Our agreements outline ways of working and are intended to form a foundation for working together.

This may include:

- + Gathering and sharing the views and lived experience of local people accessing care services.
- + Ensuring people have the opportunity to get involved in shaping local services.
- + Promoting shared opportunities for people to receive support or influence the planning of local care services.
- + The potential to develop joint projects.
- + The opportunity for organisations to be represented in our activities such as Enter and View.
- + Our support on engagement activities, if required, which may include help with conducting research or talking to people in communities.

We have signed 36 partnership agreements with organisations across Suffolk. We look forward to working closely with all of the organisations in 2019/20 and beyond.

To view the full list of signed partnership agreements, please visit our website. We have included a short description about the role of each organisation and links to their websites.

Find them on:

www.healthwatchesuffolk.co.uk/about-us/our-partnerships/



Last year, we said making co-production a “must do” in the county was a key ambition for us. That work started by us championing the value of co-production and helping to ensure it became a core consideration at meetings of the Suffolk Health and Wellbeing Board.

Now we're taking this ambition further with the introduction of new resources. We want to become a conduit through which the cultural shift required to ensure co-production is at the heart of service development or change in Suffolk can be achieved.

To date, we have employed a Co-Production Coordinator, who will be supported by a Co-production Facilitator to lead on this new area of work. We have launched new content on our website dedicated to co-production and this includes a developing library of helpful resources and information.

We have also launched a new group for people that are interested in getting involved with co-production in Suffolk. Our Co-production Group for Suffolk (COGS) enables people to access information and resources about how to engage in effective co-production. The primary aims of the group are to:

- + Enable the involvement of people with lived experience of health and care in the creation, development, delivery, and evaluation of health and social care services.
- + Help to connect people who wish to participate.
- + Share resources that will help service leaders to involve people effectively.
- + Promote a culture of co-production within our local health and social care system through a consistent and recognised approach.

This work has been instigated by Suffolk County Council. Look for more about this on our website.

What is co-production?

The Social Care Institute for Excellence describes co-production as “people who use services and carers working in equal partnerships with professionals toward shared goals”. Fundamentally, co-production recognises that people who use services (and their families) have knowledge and experience that can be used to improve services.

Co-production is core to our work

We try to ensure that elements of co-production are factored into every project completed by Healthwatch Suffolk.

Some examples of this include:

- **My Health, Our Future:** The very essence of this work is about asking young people to describe the mental health and wellbeing challenges that impact on their lives and using that information to shape the future of support available to them. The signposting card that we have provided to young people participating in our My Health, Our Future project was designed with a group of students at Northgate High School. The survey content, including our choice of short videos, was shaped by students at Thurston Community College.
- **Suffolk Mental Health Friends (SMHF):** An initiative that was successfully piloted in the autumn with over 150 people participating. Local champions with lived experience of mental health, including some who participated in the Time to Change Suffolk Hub, are enabling the journey of co-producing the SMHF programme, supported by an SMHF Coordinator based within Healthwatch Suffolk.
- **#AVeryDifferentConversation:** This work began because the commissioners of mental health services wanted to co-produce their strategy for the future of mental health support in east and west

Suffolk in partnership with the voluntary and community sector.

This engagement took the form of a partnership of local organisations (Healthwatch Suffolk, Suffolk Family Carers, Suffolk User Forum and Suffolk Parent Carer Network), who worked together to co-produce the survey with service users, carers and professionals.

Engagement in the community was coordinated by the partnership and we produced the final report. It was used to inform the final strategy approved by commissioners in the winter of 2019.

The final stages of this work will see the co-production partnership continue to have involvement in shaping what comes next for mental health services in east and west Suffolk. Up to 6,000 people have been engaged through this process to date.

You can read more about this on page 48.

- **Discharge to Assess (D2A) at Ipswich Hospital** - The project and surveys were co-produced with patients, carers and professionals. The report was presented to a local Integrated Care Systems Board, which agreed to all of our recommendations and extended the D2A programme.

We will be sharing more information about co-production throughout 2019/20 and beyond.

Visit our website for more information about how you can shape co-production in Suffolk

www.healthwatchesuffolk.co.uk/co-production

2

Helping you to find answers



Information & signposting

We have a role to provide information and signposting to the public about accessing health, care and wellbeing support. We can help people to access local care and promote choice. In this section, we have outlined our service and provided examples that demonstrate how we can help.

Our service

Our staff in the Information & Signposting Service can help people to access, understand, and navigate health, social care and wellbeing services.

Anyone can contact us confidentially for help on health and social care services near you, how to access the support you need, what to do if you have a concern or complaint or how to share feedback about services.

Our service is:

- + Free, confidential and independent from the NHS and social care services.
- + A signposting service only. We will give you the contact details for services that best support your request. You will then need to contact those organisations yourself.
- + We can give you information about where you might get help in relation to your health, social care and wellbeing needs.
- + We can give you information about what to do when things go wrong and you don't understand how to make a complaint.

Our service is not


- + Supported by trained clinicians or health and care professionals. We can't offer advice about medication or a diagnosis made by a doctor.

- + Whilst we will use your feedback to improve services, we have no powers to investigate complaints about them.
- + We cannot offer advice as to the 'best' place to go or offer opinion on which service you should choose.
- + We are not an advocacy service and can't complain to a service on your behalf.
- + We are not able to offer financial, relationship, legal or similar specialist advice.



Get in touch...

You can call us for information and signposting Monday to Friday (9am until 5pm).

 08004488234 (freephone)

 info@healthwatchesuffolk.co.uk

What have people asked us about this year?

This year, our staff have supported almost 200 people to find information about, or to access support from a variety of services. We have also shared information with at least 7,464 people at over 500 events, meetings or activities (see page 83).

In total, our teams have directed people to 114 separate organisations or groups and networks.

Anyone can contact us for help and suggestions about finding local services or support. Our staff handle an array of queries and this might include (not an exhaustive list):

- + Help with understanding how to complain about a health or social care service.
- + Information about local services or support.
- + Information about the choices people have when seeking to access treatment and care (e.g. GP registration).
- + Information about how to contact or self-refer to services.

The most frequent type of enquiry we receive is from people seeking to make a complaint about NHS or care services. Almost half of the calls answered by our Information Team are related to this subject.

Because of this, organisations like Total Voice Suffolk (the provider of Independent NHS Complaints Advocacy services), NHS Patient Advice and Liaison Services, NHS England and the Parliamentary and Health Service Ombudsman are amongst some of our most common signposting destinations.

Another recurring enquiry this year has been from people supporting children and young people that are facing challenges to their mental health and emotional wellbeing. We have heard from people that are struggling to find support for children and young people (some as young as nine years old) exhibiting challenging or worrying behaviours such as self-harm or suicidal ideation. Many enquiries concerned children and young people with a diagnosis of, or suspected, Autism Spectrum Disorder (ASD).

It is no surprise therefore that organisations and services that focus on the wellbeing of children and young people and their families (e.g. the Emotional Wellbeing Hub, Suffolk Parent Carer Network and 4YP) are a firm fixture within our list of signposting destinations.

You can read some specific case examples from page 80.



People signposted to over 100 organisations, groups or networks.

Things people ask about...



How to feedback or complain about their NHS or social care.



Issues related to GP practices (e.g. registration or concerns about care).



Mental health & wellbeing support for children and young people.



How to make a safeguarding referral to Suffolk County Council.



How to access mental health and emotional wellbeing support.



Access to dental care and how to complain about treatment.



You can read more about how we have helped people to find support, including how we have increased children & young peoples awareness of support from page 82.

How we have helped people to find support

Finding the right care or support can be worrying and stressful. There are usually places people can go for help, but awareness of them can be low and people often don't know where to look.

Here are a few examples of cases where we have helped people to access the help and support they needed.



Lost in translation

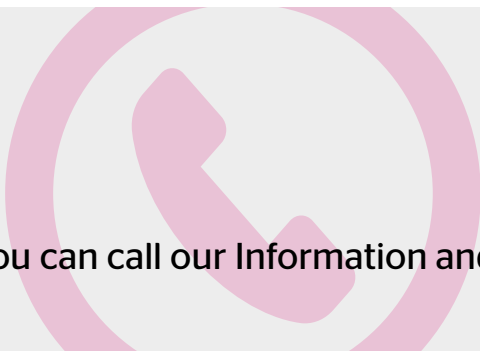
Mr. P had fallen ill on holiday in Poland and spent two weeks in hospital there. He had undergone various tests. As a result there were 20 pages of clinical notes, with more on the way.

The problem was that the notes were not written in English and he could not understand them. He could also not afford the money required to translate the notes.

We found NHS England guidelines on accessible information and translation, which state:

“Where patients register with a practice and are in possession of documents in languages other than English which relate to their health these should be translated into English at the earliest possible opportunity. This will ensure patient safety and continuance of care. These documents should be included into the patient record in both languages.”

We were able to make contact with relevant people at NHS England (Midlands and East), who offered to speak with Mr. P and fund the translation of his medical notes.



You can call our Information and Signposting Service on **08004488234** (freephone)



Care Act Advocacy

Mrs S. contacted us because, as a carer for her mother, she was experiencing difficulties communicating with the residential or nursing home her mother had recently been placed within.

This was causing the carer concern because she did not believe the home was sufficiently meeting her mothers needs or that those needs were adequately catered for within the care plan.

We signposted Mrs. S to Total Voice Suffolk, which is the provider of various advocacy services in Suffolk. Due to her mother lacking capacity, TVS was able to process a referral for Care Act advocacy to assist with the individuals care and support planning.



Dental care in hospital

Mr B contacted us by telephone because his friend was an end-of-life cancer patient that had been admitted to the Ipswich Hospital. The hospital had lost the patients lower denture and this was impacting significantly on their wellbeing in hospital.

The Patient Advice and Liaison Service could not help and did not know how to resolve the issue. To make things worse, this all occurred just prior to a bank holiday weekend.

There are no services that are specifically commissioned to attend to peoples dental needs when facing a long stay in hospital, even if it is likely you may not be able to leave the hospital. With our intervention however, NHS England was able to spot purchase and source urgent dental care for the patient, but there remains a gap in the services.

You can read more about how we have used this signposting case example to encourage improvements to services on page 61.

Helping young people & families to find support

Young people have frequently told us they do not know where to find support for their mental health or emotional wellbeing.

That's why we produced a signposting postcard that includes quick and easy-to-read information about sources of help. The card is supported by a specific page on our website that we have promoted whenever we have communicated about our work in this area.

These resources are freely available on our website and have been provided in hard copy format to all of the young people that have participated in our "My Health, Our Future" project (almost 14,000 individuals). They have also been shared widely on social media by other organisations and distributed within local communities (e.g. by local GP practices, the police and school nurses).

We have assisted our local NHS partners to communicate with families about the pressures faced by the new Suffolk Emotional Wellbeing Hub and pro-actively signposted people to other services wherever possible. That is also a key reason why our signposting resources feature sources of support that are wider than those commissioned by the NHS or Suffolk County Council.

You can read more and access these resources from:

www.healthwatchesuffolk.co.uk/news/myhealthourfuture19/



Suffolk Children & Young People's Emotional Wellbeing Hub
Information, advice and support for children, young people, families and professionals.
0345 600 2090 (Mon-Fri, 8am-7.30pm)
www.emotionalwellbeinggateway.org.uk

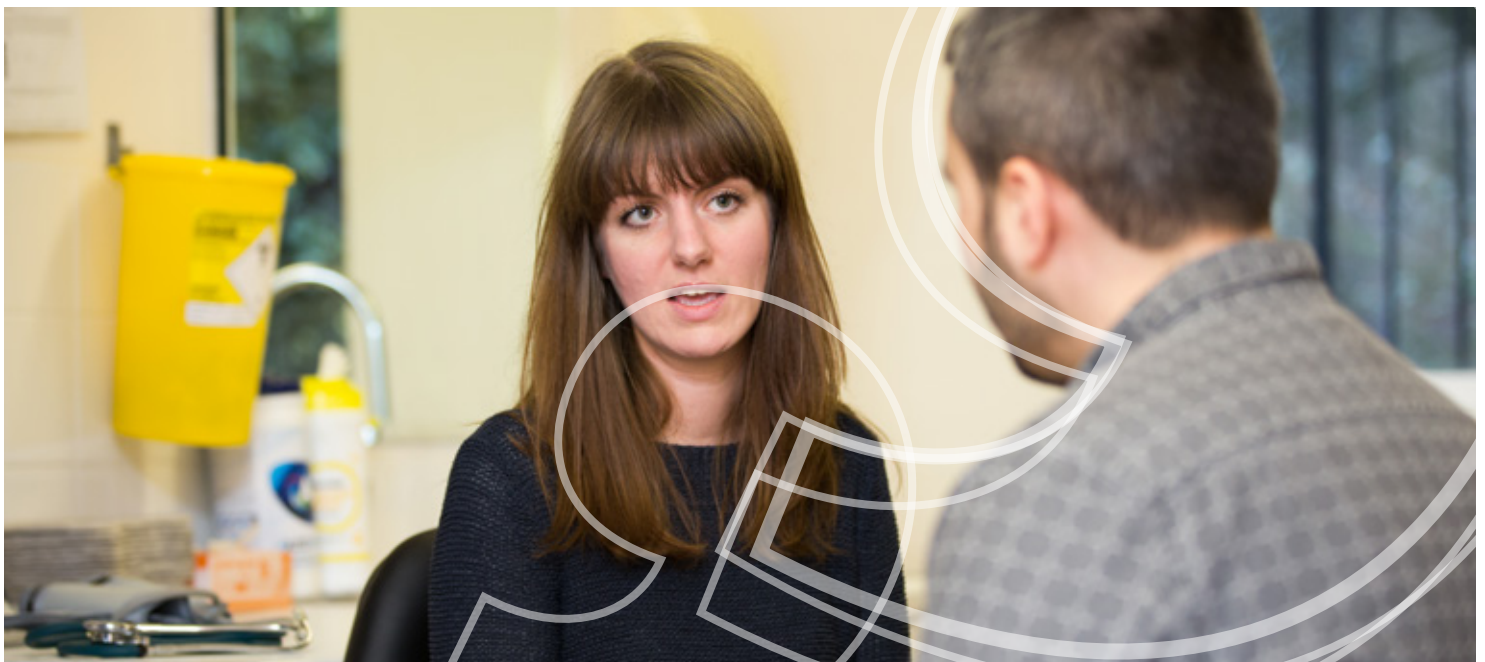
Children &
Young People's
Emotional
Wellbeing Hub

Sharing information to promote access and choice

Sharing information with people is a fundamental role for local Healthwatch. We are well placed to keep people in our communities informed about local services, options for support and opportunities to shape the way things work.

In addition to our communications activity this year, we estimate that our staff in the community have shared information with at least 7,464 people at over 500 activities in communities across the county. This recorded information sharing has taken several forms, and this includes:

- + Helping people to understand more about care navigation within GP practices (**83 activities**)
- + Talking to people about the purpose of Summary Care Records within GP practices (**88 activities**)
- + Sharing details of local support organisations and networks (**62 activities**)
- + Sharing information with people about joining their local GP practice Patient Participation Group (**24 activities**)
- + Sharing information about accessing local NHS or care services (**76 activities**)
- + Telling people about local community groups and networks (**21 activities**)
- + Sharing details of local consultations (**4 activities**)



We shared information with at least **7,464** people at over **500** activities.

3.

Our volunteers and decision making



Our volunteers

Read about some of the ways volunteers help us to be the effective voice of people into NHS and social care services.

Our volunteers support us in a range of roles. In this section, we consider how they have supported us to make decisions about our work and governance.

How you can help us

Our volunteers contribute significant amounts of time and energy to make a difference in local health and social care services. They are passionate about making things better for people using our local services.

Our volunteers support us in a range of roles to check local services are meeting the needs of the people using them and to gather feedback from communities. Some have experience of services as a patient or a service user and some have useful knowledge from previous professional roles.

Some of our key voluntary roles include:

- + Supporting our Community Development Team at community events
- + Visiting local services on our behalf
- + Being a Director on our Board
- + Contributing to our sub-groups
- + Helping us in the office with day to day administration

In numbers...

- + Two community volunteers have helped us to gather feedback from people in their local communities.

- + Two volunteers have supported us in the office this year. Their role has been to help us log all of the feedback we receive about local NHS and social care services.
- + We authorised eight people to visit services on our behalf. Their reports are available on our website and have been used to shape, influence and improve local care services.
- + We had eight Directors. In addition, there are three ex-officio (non-voting) members of our Board.



29 people have volunteered for us this year in various roles.

Meet our volunteers

We've asked a few of our volunteers to tell us what they valued most about their experiences of volunteering with us. Here's what they said.



Helen (Enter and View Authorised Representative)



"I volunteered because I am passionate about the quality of person-centred care that people receive. The role has enabled me to incorporate my nursing background into celebrating positive aspects of care observed in the care homes visited, and also sharing how care might be further enhanced.

"Visiting care homes in partnership with fellow Enter and View representatives has been insightful as to the role of others in fostering positive outcomes for residents and carers, and provided a springboard for sharing innovation with managers for a care home for which I am a trustee, and to illuminate my teaching as a nurse lecturer."



Jane & Chris (Co-Chairs of our Mental Health & Emotional Wellbeing Focus Group)

As Co-Chairs of our Mental Health and Emotional Wellbeing Focus Group, Jane and Chris have supported us to challenge and influence mental health support in Suffolk (you can read about the work of this group on page 28).

Jane and Chris have been our representative at a range of important forums concerned with improving mental health services provided by the Norfolk and Suffolk NHS Foundation Trust.

An example of this is the Oversight Assurance Group, which provides a forum for the oversight of improvements at the Norfolk and Suffolk NHS Foundation Trust.

Every month NHS regulators, together with commissioners, stakeholders and partners (including Health Education England, the General Medical Council, Suffolk User Forum and Suffolk Family Carers) meet with the Chair, Directors and other senior staff of NSFT who provide information on the improvement work continuing in the Trust.

This includes not only feedback on specific improvements required by the regulators, but also on the quest to change the culture of the organisation in order to improve the quality, safety and timeliness of care provided for service users and their carers. There are also “deep dives” into specific areas such as patient safety and safety culture, service user involvement and physical health.

“By volunteering with Healthwatch Suffolk, we have been able to take an active role in shaping the priorities of local health and care decision makers, specifically those focused on the improvement of our local mental health services.

“Our role as co-chairs of the Healthwatch Suffolk Mental Health and Emotional Wellbeing Focus Group has meant that we can ask for improvements and expect a response from those responsible for planning and delivering mental health support in Suffolk.

“We both firmly believe in the value of co-production and that people’s experiences must be a driver for much needed changes to be made to local services. Healthwatch Suffolk is an important driver of that change.”



Rosemary (Community volunteer)

With her own care needs, Rosemary often encounters professionals and knows many people accessing services.

Rosemary helps us to obtain the views of her local community by distributing feedback cards near to where she lives. This includes to a local art group, where the topic of health care is often discussed.

“I value being a volunteer as I care about people. As I am disabled myself, I am only too aware of the difficulties some may have. People see ‘me’ and not my wheelchair and that has given me great confidence. It is nice to point people in the direction of Healthwatch Suffolk knowing their experiences mean something, as I meet people in distress over an experience they have had.”

Decision making

Read about our Board of Directors and how decisions are made within our organisation.

Our Board of Directors

Our Board is comprised of volunteer directors and our Chief Executive.

It is our governing body, and oversees our strategic decision making and operational activities. Our Directors are responsible for ensuring that we are meeting our statutory and other obligations.

The Board:

- + Establishes our vision, mission and values
- + Sets company policy, strategy and structure
- + Monitors progress towards achieving our objectives
- + Seeks assurance that systems are robust and reliable
- + Promotes a positive culture within our organisation.

All Board meetings are held in public. Documents for the meetings are posted to our website.

Our Directors for 2018/19 were:

Dr. Tony Rollo	Chair
Andy Yacoub	Chief Executive
Elaine Aylott	Director
Fiona Ellis	Director (Retired Q3)

Brian England	Ex-Officio member (HR advisor)
Julie Harris	Ex Officio (Retired Q3)
Chris Hedges	Ex-Officio member (Mental Health and Emotional Wellbeing Focus Group Co-Chair)
Bal Kaur Howard	Director
Nigel Mann	Director
Jane Millar	Ex-Officio member (Mental Health and Emotional Wellbeing Focus Group Co-Chair)
Steve Pitt	Director
Barbara Richardson-Todd	Director (Retired Q3)
Liz Whitby	Director
Liz Wood	Ex-Officio member (Black and Minority Ethnic and Diversity Sub-Group Chair)
Ronayi Yildirim	Shadow Director

If you would like to know more about the activity of our Board of Directors, please contact us by email to info@healthwatchsuffolk.co.uk or call 01449 703949. You can also attend our public meetings or our Annual General Meeting (read more on page 90).



Meet our Young Shadow Director:

Ronayi

Ronayi is a student attending Kesgrave High school Sixth Form and was studying for three A levels when she joined our Board of Directors this year.

She had joined the Young Leadership Project, which is managed by Community Action Suffolk. The project aims to get young people involved with Suffolk organisations as shadow trustees/directors. It's all about developing leaders and giving young people a voice within the voluntary sector.

Ronayi is aspiring to be a medical student in the future and wants to train as a doctor. By being a shadow director on our Board she hoped to use her knowledge and views as a young person to influence health, social care and current affairs in Suffolk. We found Ronayi a General Practitioner mentor and she was mentored by one of our Board members throughout her time with us.

We know Ronayi has a bright future ahead of her and we wish her every success.

Here's what Ronayi made of her time with us:

"I have spent the past year at Healthwatch Suffolk as a shadow director and have enjoyed every step. I have learned a lot about the healthcare system in the UK and specifically in Suffolk.

"I have learnt about the finances that go in to the system as well as the people that make it run smoothly. I've had a greater understanding of the politics of it all and the different approaches and discussions that can be made on a subject. I look forward to the future for more encounters with a national body like Healthwatch."

Ronayi Yildirim (Shadow Director)

Thank you Ronayi :)

Visit our website to view information about our Board members and to download meeting papers www.healthwatchsuffolk.co.uk

Our AGM 2018

Our AGM is an opportunity for our members to become involved in shaping our organisation and to hold us to account. People attended this year to hear about our achievements and to talk about the challenges facing primary care.

Dr. Paul Driscoll (Medical Director of the Suffolk GP Federation) presented about the challenges facing services and plans to tackle them.

The presentation was followed by an interesting and varied Q&A session with our panel comprised of:

- + Alan Rose (Non-Executive Director of the West Suffolk NHS Foundation Trust and Chair of a local GP Patient Participation Group)

- + Irene Macdonald (Patient & Public Involvement Lay Member for the NHS Ipswich and East Suffolk Clinical Commissioning Group)
- + Dr. Paul Driscoll (Chair and Medical Director of the Suffolk GP Federation)
- + Sadie Parker (Director of Primary Care for the NHS Great Yarmouth and Waveney Clinical Commissioning Group)

We would like to thank our panel members for their insightful contribution on the day and everyone that attended to make the event so successful.

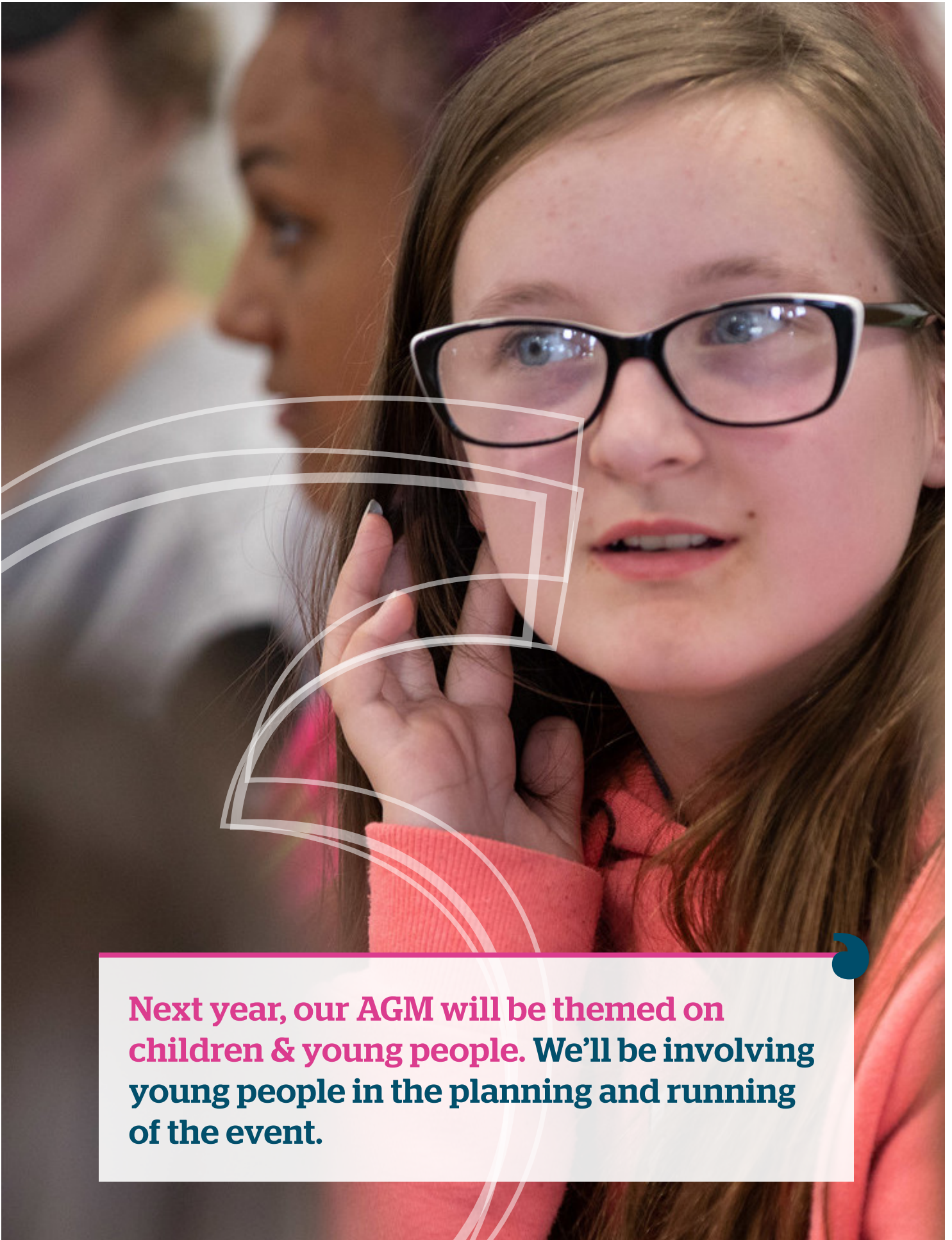


“A really good turnout and debate. I was very impressed with the amount of engagement Healthwatch has achieved with both professional organisations and individuals. It was good to hear about the difference that has been made locally. It enables Healthwatch to speak authoritatively about health and other issues in Suffolk.”

Dr. Paul Driscoll (Chair and Medical Director of Suffolk GP Federation)



People took part in a debate about primary care services with our panel of experts.



Next year, our AGM will be themed on children & young people. We'll be involving young people in the planning and running of the event.

4

Looking ahead



Message from our CEO

Andy Yacoub (Chief Executive) talks about how we have worked to deliver against our priorities and our plans for the future.

Find out about what's next for Healthwatch Suffolk, including our plans for My Health, Our Future (our project exploring children and young people's mental health in Suffolk and a range of other projects that are either underway or being planned.



Firstly, I would like to start by thanking everybody that has been involved with our work this year. I am proud of our organisation's growing influence within the health and social care sector, which simply would not be possible without the enthusiastic support of our staff, volunteers, the public and our partners.

It is with the continued support of the public and our partners that we have continued to generate many thousands of stories from people using our county's health or social care services.

The comments and people's lived experiences are hugely important to us, our business currency I suppose, and we want to stress that they are used by us to influence commissioners

and providers of care, to collaborate with key decision makers, and to report on the changes that we help to bring about.

Our priorities

Throughout the year, we have successfully delivered against the priorities outlined within our Strategy 2020.

These priorities (social care services, primary care services, children and young people, co-production and mental health services) were selected following conversations with our membership and local people, but also because of intelligence available to us from within our

national network and the Suffolk health and care system.

Children and young people

“My Health, Our Future” is our work exploring the mental health and emotional wellbeing of children and young people in Suffolk.

Throughout the life of this programme, we have reached almost 14,000 children and young people aged 11-19 years (upwards of 20,000 by April 2019) and they have told us about their views on important subjects like social media, self-harm, bullying and self-esteem.

This programme of work has continued to be a driver for important changes and outcomes that will benefit young people. You can read more about this impact from page 38.

We know that “My Health, Our Future” is an enduring and ever-present conversation piece within all networks and meetings responsible for shaping local support for young people and their families.

The sheer volume of response ensures that our results carry the weight needed to drive a continued focus on service improvement amongst commissioners, providers and other support organisations.

Social care services

Obtaining feedback from people about their use of social care services has always been challenging. Partly because of the nature of these services but also because people fear consequences for speaking out about their care.

This year saw the publication of our report exploring the views and experiences of people using home care services in Suffolk. This report was made possible because we were able to engage Suffolk County Council in a dialogue about the value of using people’s experiences to shape the future of care in the county.

Our independent assessment is the first of its kind in Suffolk and has offered commissioners insights that we know have been used to inform the re-procurement of these services in 2019.

In addition, we have continued to share the feedback we receive about adult care services (e.g. care and nursing homes) with the people and organisations responsible for monitoring care quality in the county. This includes the Suffolk County Council Quality Improvement Team and also the Care Quality Commission.

We were pleased that these developing relationships have enabled us to influence improvements by, for example, encouraging the CQC to bring forward inspections or encouraging the safeguarding team to review people’s experiences.

Mental health services

The case for change to mental health support in Suffolk is well documented by us and other bodies that represent the views of service users, carers and professionals.

So, when a unique commissioner instigated coproduction partnership opportunity to influence the future of support in east and west Suffolk became apparent, we were keen to get involved.



“...when a unique commissioner instigated coproduction partnership opportunity to influence the future of support in east and west Suffolk became apparent, we were keen to get involved.”



We want to become a source of expertise to support and enable those responsible for services to embrace co-production in service development.

This work included a new VCS and healthwatch partnership (Healthwatch Suffolk, Suffolk User Forum, Suffolk Parent Carer Network and Suffolk Family Carers), which ran an independent listening exercise capturing the views of between 5,000 and 6,000 service users, families, carers and professionals about what needs to be different.

This wide-ranging engagement produced a huge amount of data that we analysed on behalf of the partnership and shared with commissioners to shape their future strategy. Our findings from the aforementioned My Health, Our Future programme have also formed an important component of this strategy.

Our Mental Health and Emotional Wellbeing Focus Group has continued its work to facilitate conversation between those responsible for mental health services, service users, carers and organisations. Driven by the passion of our volunteer Co-Chairs (Jane Millar and Chris Hedges), the group has become ever more influential in its role as a forum for sharing experiences and using them to challenge local support.

Primary care services

Our Community Development Team has continued to build lasting relationships with GP practices in Suffolk. As the first port of call for many people accessing NHS services, we view the opportunity to engage within local practices as an ideal way to collate feedback about the full range of NHS and care services people may be using.

At the same time, we have been able to support practices to communicate about their ways of

working, whilst also sharing feedback with them about their services to support improvement.

Our pro-active engagement within practices, our CCGs and the Suffolk GP Federation has enabled us to obtain thousands of comments about people's experiences and we are using these to shape the outcomes of CQC primary care inspections and also local work by commissioners to improve the quality of care provided by GP practices.

Our network of relationships in this field also meant that we could theme our AGM on the subject of primary care (past and future). A large number of people attended our meeting in Felixstowe to engage our expert panel in a varied Q&A discussion about the challenges our local services are facing.

Co-production

At Healthwatch Suffolk we believe that Co-Production must be at the very heart of decision making within our local health and social care "system".

This requires a significant cultural shift on the part of commissioners and the agencies they represent, alongside a commitment to and from the service users, patients and carers involved. It is our ambition that Healthwatch Suffolk should become a conduit through which this can be achieved.

The first step has been to employ a Co-production Coordinator, whose role it is to establish our organisation as a source of trusted expertise to which professionals and the public can turn when seeking to becoming involved in co-producing local care. We will also be

expanding this new function with additional capacity in the form of a Co-production Facilitator.

We are already working on new content for our website, including details about how to become involved in co-production and links to existing resources. This work is being guided by the Co-production Group for Suffolk, which is being led and facilitated by our Coordinator.

This network will enable people to access information and resources about how to engage in effective co-production. Specifically, the group will:

- + Enable the involvement of people with lived experience of health and care in the creation, development, delivery, and evaluation of health and social care services.
- + Help to connect people who wish to participate.
- + Share resources that will help service leaders to involve people effectively in the

development of services.

- + Promote a culture of co-production within our local health and social care system through a consistent and recognised approach.

We look forward to sharing more about this work throughout the coming year.

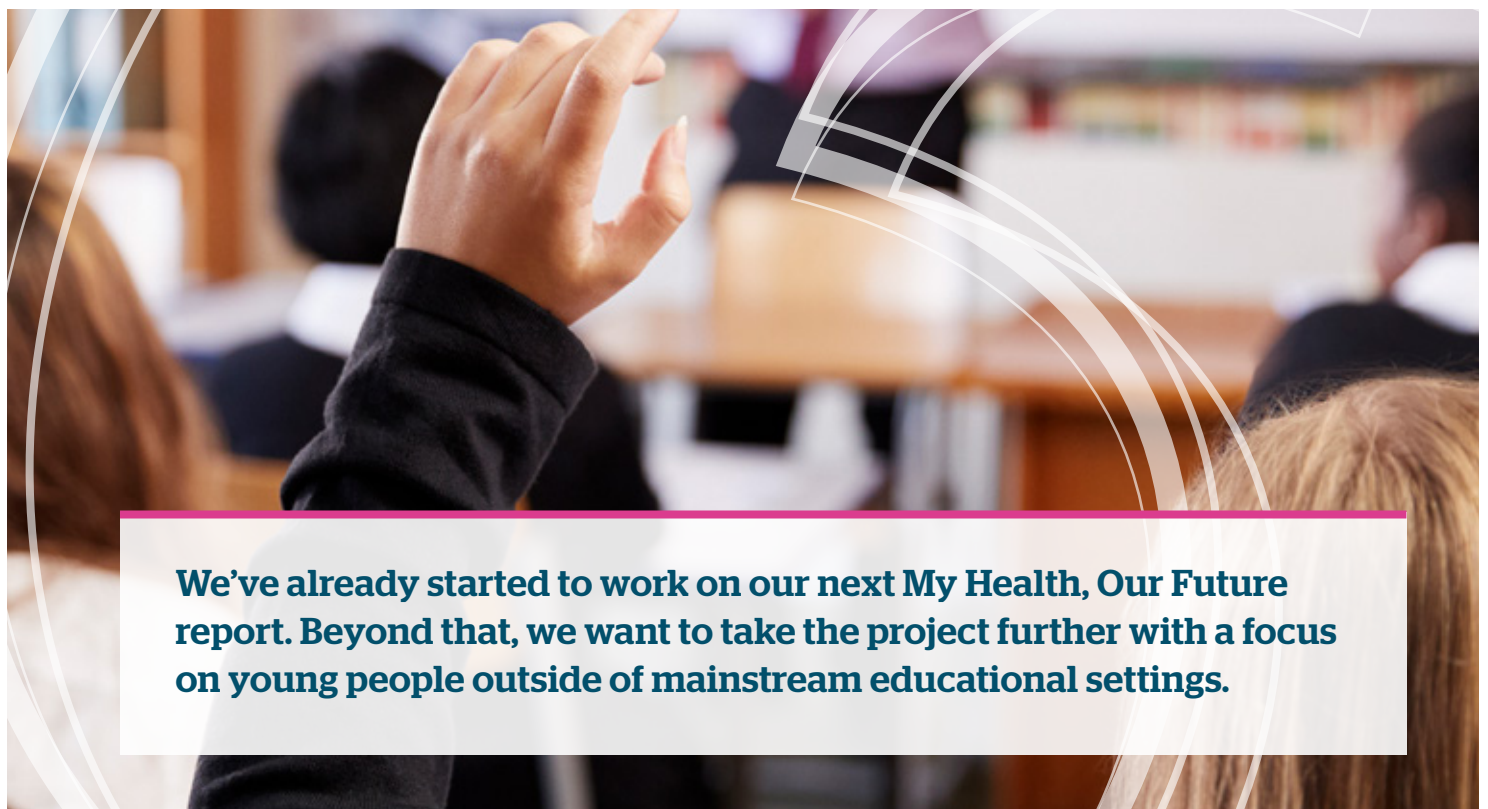
Looking ahead to our future

Our team is already working on a number of exciting projects and areas of work that will be launched or completed within the next year and beyond.

My Health, Our Future (Year 3)

We have already started to work on the next report of this high profile project.

We're working with five colleges and 14 secondary schools. For the first time, we will be working with all of the secondary schools and



We've already started to work on our next My Health, Our Future report. Beyond that, we want to take the project further with a focus on young people outside of mainstream educational settings.

the college in Lowestoft, an area of high social deprivation.

We've made some changes to the survey. For example, it is now shorter, which should make it easier for young people to complete. We have also included new questions focussed on harmful online content and a more robust measure of young people's self-esteem, widely used in social science research.

We also want to build a better understanding of some of the things that we know can really shape the lives of young people. That's why we are asking young people to identify whether, for example, they may be caring for somebody in their family, they have a disability or they have been in care.

This valuable new data will help to support the development of better support by helping the people planning care to be responsive to the needs of these particular groups of young people.

Beyond our next report, we are currently working on the possibility of developing this project further. In particular, we would like to explore the possibility of engaging young people outside of mainstream education settings.

This might include Pupil Referral Units, special schools and young people educated at home. We would also like to re-design the survey so that it is appropriate for use with primary schools and special schools.

Social care support

Understanding people's experiences of social care services in Suffolk continues to be a priority for us in 2019/20.

One of the outcomes from our "My Care at Home" report was that we would be invited to help Suffolk County Council to monitor the implementation of new home care services once they are established in the latter half of 2019.

In addition, we are planning an extensive project about people's experiences of care and nursing homes in Suffolk. Our motivation for this is to increase our intelligence about these services and to maximise our influence with other statutory and regulatory bodies in improving local care.

The details about this project are limited at this stage but our intentions are to run a countywide survey to record feedback. In addition, we hope to interview residents, family members and professionals about how people have reached the need of requiring the services of care or nursing homes and the choices that were available to them when deciding where to live.

Look out for more information about both of these projects on the Healthwatch Suffolk and our usual communication platforms.

GP analysis

Following the success of our first report, we are again seeking to offer the CQC and commissioners a view on what people think about our local GP practices.

This year, we will be bringing together more feedback than ever before to give a collective view about people's access to services and experiences of new ways of working such as care navigation by GP reception teams. We are confident that our report will offer the most comprehensive analysis of qualitative patient experience data ever conducted in Suffolk relating to GP practices.

In doing so, we will be making full use of the thousands of comments people have shared with us; either direct to our website (perhaps via a widget on a practice website) or in contact with a member of our Community Development Team when they are engaging within their local practice.

We know that this work has previously been used by the CQC to inform its programme of primary care inspections. Look out for our report in early part of the coming year.

Business development

Building a sustainable future for our organisations is paramount to maintaining a strong and effective independent local voice for patients, service users, carers and the public in Suffolk.

We are not naïve to the funding and political challenges faced by our national network and are already working on plans that will ensure we have the best opportunity to maintain our services and to strengthen our influence.

Importantly, we have always valued the support of our commissioning team within Suffolk County Council and are hopeful that it will continue into our future.

Look out for more information about this in the years ahead.

Thank you

Lastly, I feel I must extend my thanks to the numerous individuals that have contributed to our work throughout the year.

That includes the public that have shared feedback with us, people that have participated in our research projects, all of the schools and teachers that have been part of our “My Health, Our Future” project, our partners in the voluntary and community sector, the leaders of our local health and social care services, clinicians, MPs, our staff and volunteers. There are simply too many to name them all.

I hope that you will continue to support our organisation and to support the involvement of

local people in the planning and delivery of our local NHS and social care services.



Andy Yacoub
Healthwatch Suffolk CEO



A huge thank you to every person that has supported our work this year. Our aim is always to bring people together to understand the bigger picture of their experiences. It's only with your feedback behind us that we can make change happen.

Share your feedback on:

www.healthwatchsuffolk.co.uk/services

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Our finances



Please see our abbreviated accounts below. The figures are correct at the time of publication and are subject to auditors inspection.

Our full accounts will be available on request. Please call 01449 703949 or send an email to info@healthwatchsuffolk.co.uk.

Turnover	£483,065
Administrative Expenses	£513,513
Other operating income	£65,825
Operating Surplus/ (Deficit)	£35,377
Interest receivable & similar income	£1,391
Surplus/(Deficit) on ordinary activities before taxation	£36,768

Our accounts will also be presented at our Annual General Meeting (AGM). Please see our website and newsletters for more information and to book your space.

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Contact us



Healthwatch Suffolk CIC is commissioned by Suffolk County Council to deliver the statutory activities of a Local Healthwatch in Suffolk. The contact details for our registered office are as listed below.

Address	Freeport RTTY-CEUT-LCRH Healthwatch Suffolk CIC Unit 14, Hill View Business Park Old Ipswich Road Claydon Ipswich IP6 OAJ
Telephone	01449 703949 / 08004488234 (Freephone for Signposting Service)
Email	info@healthwatchesuffolk.co.uk
Website	www.healthwatchesuffolk.co.uk

The design, layout and graphics contained within this report have been created by the Healthwatch Suffolk Information Services Team.

We will be making this annual report publicly available on or before 30 June 2019 by publishing it on our website and sharing it with Healthwatch England, the Care Quality Commission, NHS England, Clinical Commissioning Group's, our local Health and Overview Scrutiny Committee, and our local authority.

If you require this report in an alternative format please contact us on 01449 703949 or email info@healthwatchesuffolk.co.uk.

We will be making this annual report publicly available by 30th June 2018 by publishing it on our website and circulating it to Healthwatch England, the Care Quality Commission, NHS England, Suffolk Clinical Commissioning Groups, the Suffolk Health and Overview Scrutiny Committee, the Suffolk Health and Wellbeing Board and our local authority (Suffolk County Council).

our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us on 01449 703949 or by email to info@healthwatchsuffolk.co.uk

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