healthwatch Suffolk

Guided by you

Annual Report 2019/20



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Improving.

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Why not check out...

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A few highlights.

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13,500

have now been logged on our Feedback Centre about hundreds of health & care services.

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

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Our local work inspired a national report that will now see a "call first" approach to A&E access trialled in England.

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23,753

Responses to our research projects this year. Our research is helping to drive improvements to local care.

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145

Families have been assisted by a clinic we helped to establish at West Suffolk Hospital

More on pg. 34

'MY HEALTH, OUR FUTURE'

'My Health, Our Future' continues to shape and influence mental health & wellbeing support for young people.

We heard from more than...

45,000

People

> *"Healthwatch Suffolk are a great local organisation with a dedicated team that represents the patient voice brilliantly. They are unfailingly helpful and caring with a fantastic reach and insight into the thoughts, feelings and aspirations of all local communities."*
>
> **- Dr Juno Jesuthasan (GP, Barrack Lane Medical Centre in Ipswich and a member of the NHS Ipswich and East Suffolk Clinical Commissioning Group Clinical Executive)**

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We completely shifted priorities to make sure people's views could impact the Suffolk response to coronavirus.

More on pg.11



People had more than **1.5 million** opportunities to hear about our work & to become involved.

More on pg. 52



Services listened to feedback and made improvements.

More on pg. 84



We created a 'recipe' for co-production with people in Suffolk.

More on pg. 20

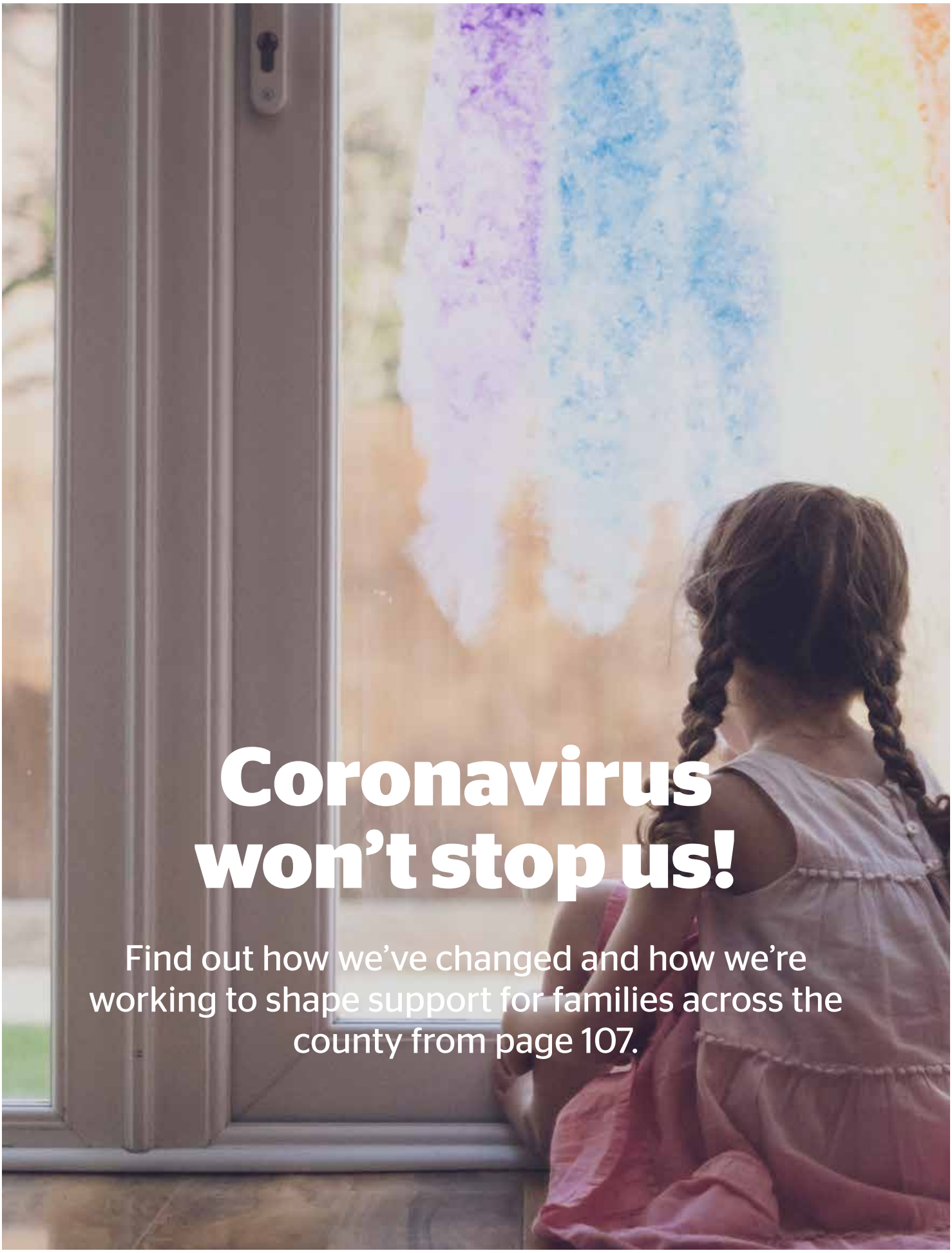


GP practices made changes following our visits. We now visit more than **70** practice sites.

More on pg. 61



We continue to influence safeguarding in Suffolk. We used people's experiences to protect vulnerable residents from harm.



Coronavirus won't stop us!

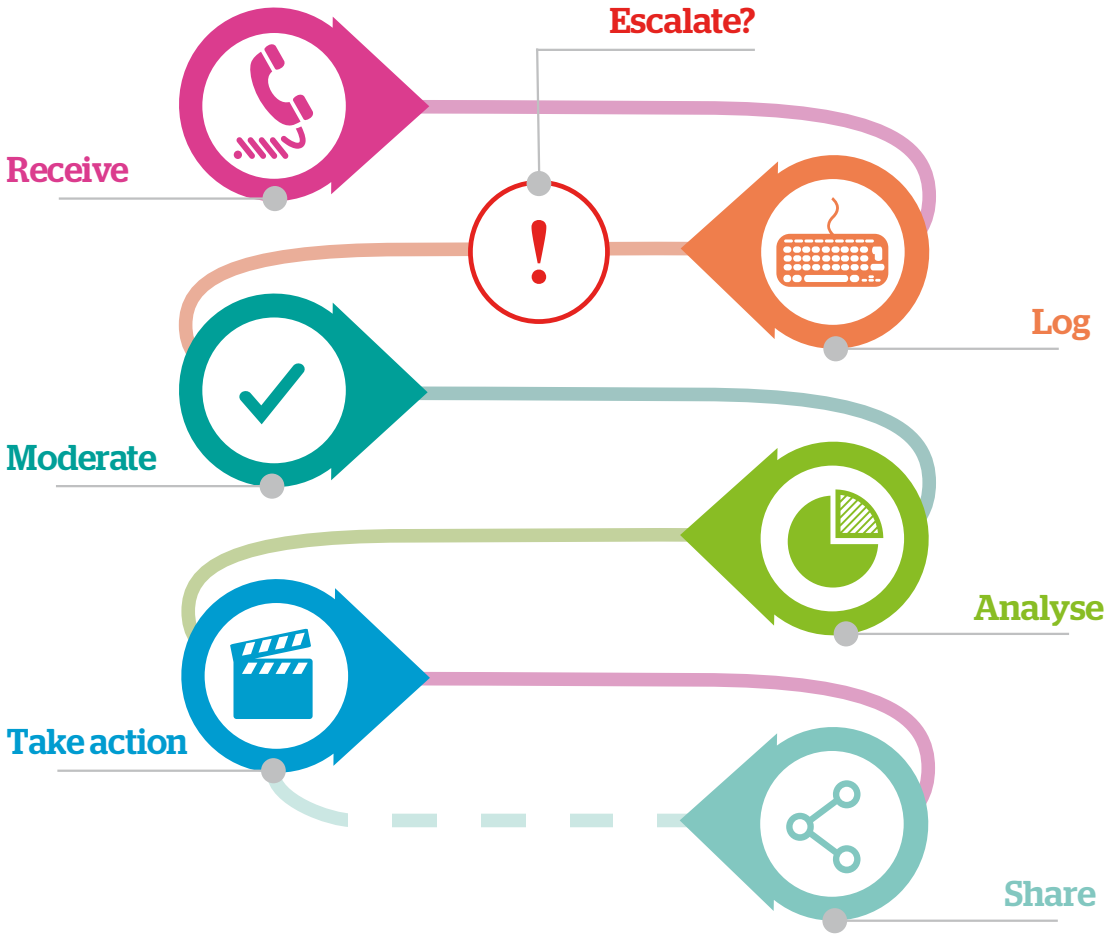
Find out how we've changed and how we're working to shape support for families across the county from page 107.

How we've made a difference.

Listening.

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 is shown above and described on page 10.

We take every comment seriously, paying close attention to trends and safeguarding. We work closely with the right people and organisations to make sure people's experiences are heard and that they are used to improve local care. You can read more about these relationships from page 56. We have also described how we have used people's feedback to protect people from harm (safeguarding) on page 61. Importantly, we will always be transparent about what people have told us and feedback when action is taken.

See what more than **13,000 people** have said about Suffolk services on **www.healthwatchsuffolk.co.uk**.

Our feedback process

We listen to people. It's what we do and we think we do it well. There are lots of ways to feedback to us and, no matter how you do it, we'll use it to shape & improve local care.

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 (e.g. focused research, our Feedback Centre, email, letter or by telephone.

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. Some feedback may not be visible to the public if that has been requested by the individual or if does not meet the requirements of our website terms.

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.

Read more about this from page 61.

4. Analyse:

Once logged, the feedback is available to theme and review within our Informatics Dashboard or other analytical tools. This includes Microsoft Excel, Nvivo and other services available online.

5. Take action:

We will use your feedback to plan our visits to local services, share insights with other statutory or regulatory bodies or to trigger new areas of research. Where trends are evidenced, we will also ask NHS or care leaders to respond directly to local concerns.

We will feedback on all actions taken and outcomes achieved. This is important if we want to maintain interest in our work and encourage continued involvement from local communities.

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.

Making it clear - Effective communication matters

It's easy to underestimate the importance of communication, but we see it as an essential part of what we do. Getting it right matters to us and ensures that people have the best possible understanding about why we are here and how we can make things better for their community.

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.

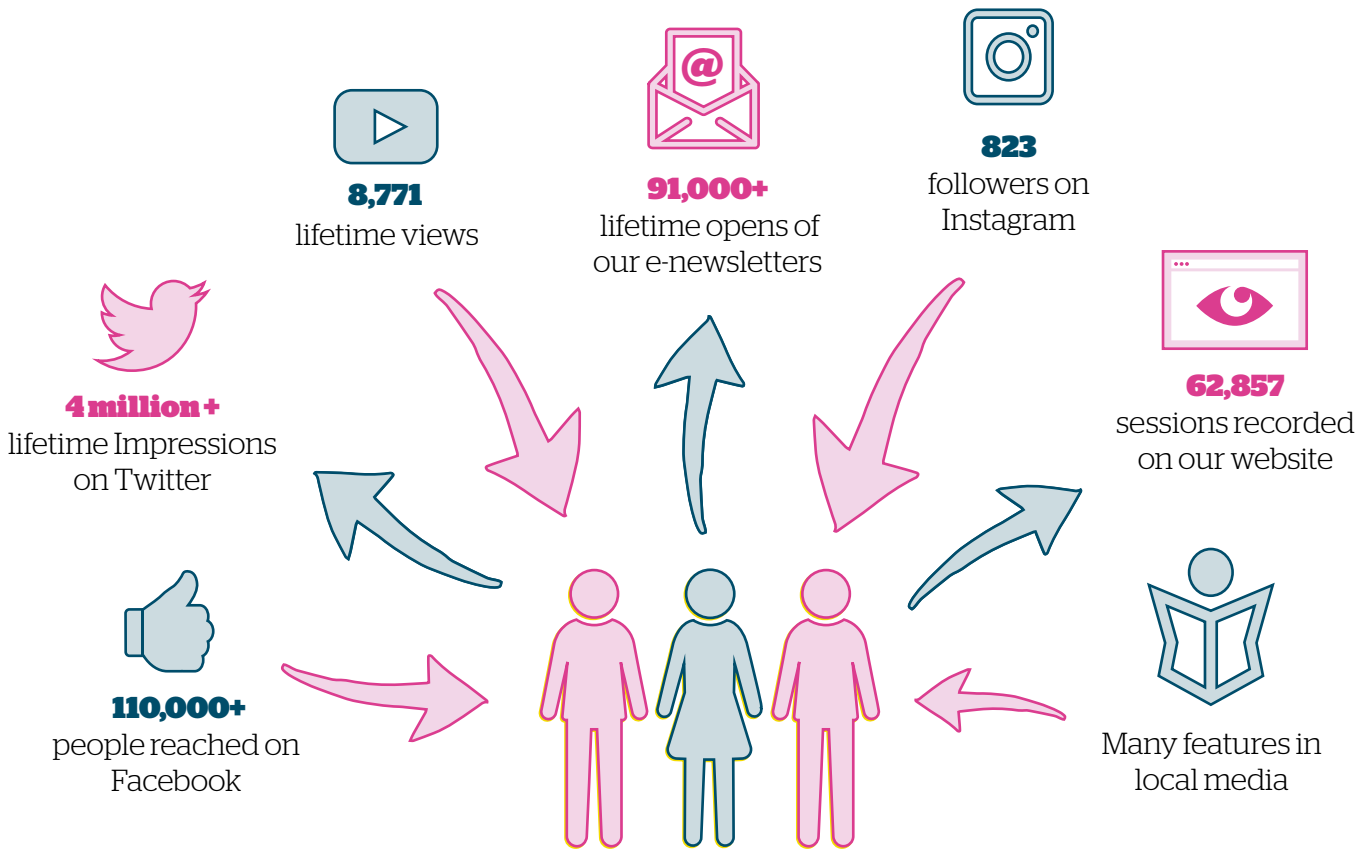
As in previous years, we are pleased to have seen growth across most of our platforms. Please see our infographic below for a few of the highlights.

Making information accessible

We remain committed to providing information in multiple formats so that nobody is prevented from accessing our service. We will always write in plain English and produce information with visual elements to aid understanding and increase engagement with our content.

If you don't feel we've got it right, please get in touch. We will appreciate the feedback (good or bad) and use it to improve our work.

In 2019/20, we retained the Browsealoud accessibility tool on our website. It includes a range of functions that help people to access our information. We also obtained access to a bank of images so that we have the freedom to produce information in easy read format whenever it might be useful or requested Translated materials are available on request.



How we listen...

Speaking up about your experiences is the first step toward change. Here are some of the ways you can share feedback with us.

+ **Feedback Centre –** You can find health or social care services and leave feedback about them on our website. We have tools that mean people's feedback can be moderated and analysed to find themes. It is also possible for providers of services to respond to feedback and to help people resolve issues or concerns.

  Visit www.healthwatchsuffolk.co.uk/services to see what more than 13,000 people have told us about hundreds of local NHS and care services.

+ **Research –** Our projects (see page 32) 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 team visit many communities, both large and small, to tell people about Healthwatch and to gather their views on services (see page 19).

  We talk to people at community events and also by attending local groups/meetings (e.g. support networks and coffee mornings).

+ **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 14) and our Black and Minority Ethnic and Diversity sub-group (see page 16).

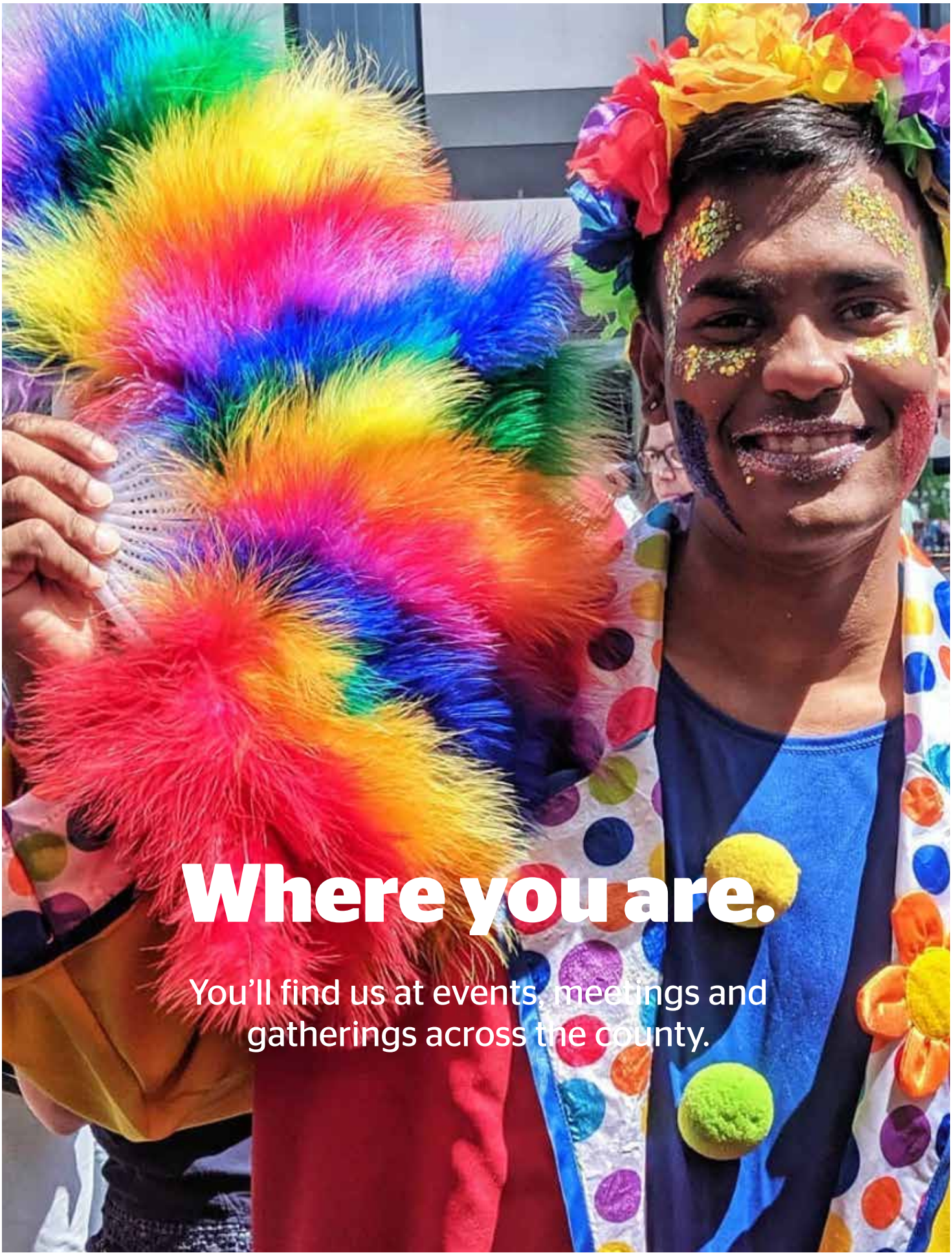
+ **Information and signposting** – Our information and signposting service (see page 76) has helped hundreds of people to find their way through services. We gather basic information to monitor whether people are calling us about similar things.

+ **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.

+ **Partnership working –** We work in partnership with many organisations in Suffolk (see page 56) 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.

> *"Through the support we give to people of all ages facing challenges in life at Green Light Trust, we work in partnership with Healthwatch Suffolk in many ways. Our organisations share similar values and purposes and I am always impressed with the way they go about their complex role. I have observed first hand how they approach this role by combining relevant and innovative quantitative data with a human touch, capturing the views of the people they represent and presenting it in a way people can engage with."*
>
> **- Tom Brown (Chief Executive Officer, Green Light Trust)**


Where you are.
You'll find us at events, meetings and gatherings across the county.

Our sub-groups

Our sub-groups bring people and organisations together with health and care professionals make change happen. They enable service leaders to test ideas and to account for local views. Read more about them below.

Mental Health and 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 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 had consistent attendance from commissioners, who have updated the group with news and developments. This has ensured that people have the opportunity to scrutinise plans for mental health services and to offer suggestions about what could improve service access.
+ The group has sought to bring together the feedback recorded by several organisations with an interest in mental health provision so that it could be best used to challenge practice. Organisations including us, Suffolk User Forum and Suffolk parent Carer Network plan to compile reports for consideration by the group and NSFT on a quarterly basis. Currently, feedback is not gathered in a methodical way and used for service improvement.
+ The group has encouraged NSFT and commissioners to resolve an ongoing debate about the commissioning of a service for people who have an eating disorder.
+ Three providers of services for people who have a personality disorder (NSFT, Suffolk Mind and ENIGMA) attended a meeting. This enabled people to participate in a discussion about the current levels of support available and to suggest improvements.
+ Representatives of the East Suffolk and North Essex Foundation Trust attended to present to the group about plans for new facilities at the Trust. This was an opportunity to challenge the Trust about how it will ensure the new buildings are suitable for mental health patients.

Throughout the year, the group has heard impactful stories from service users and carers about the struggles they have faced when trying to access appropriate support. It has been possible to secure promises to follow-up these cases and the group will hear updates from service leaders at future meetings.

Crisis call recording implemented!

In 2013/14 and prior, issues about a lack of support for people in a mental health crisis were raised jointly by us and Suffolk User Forum following the receipt of many negative comments.

At the time, the Norfolk and Suffolk NHS Foundation Trust (NSFT) committed to a number of actions and this included that calls to the Crisis Resolution and Home Treatment (CRHT) teams would be recorded.

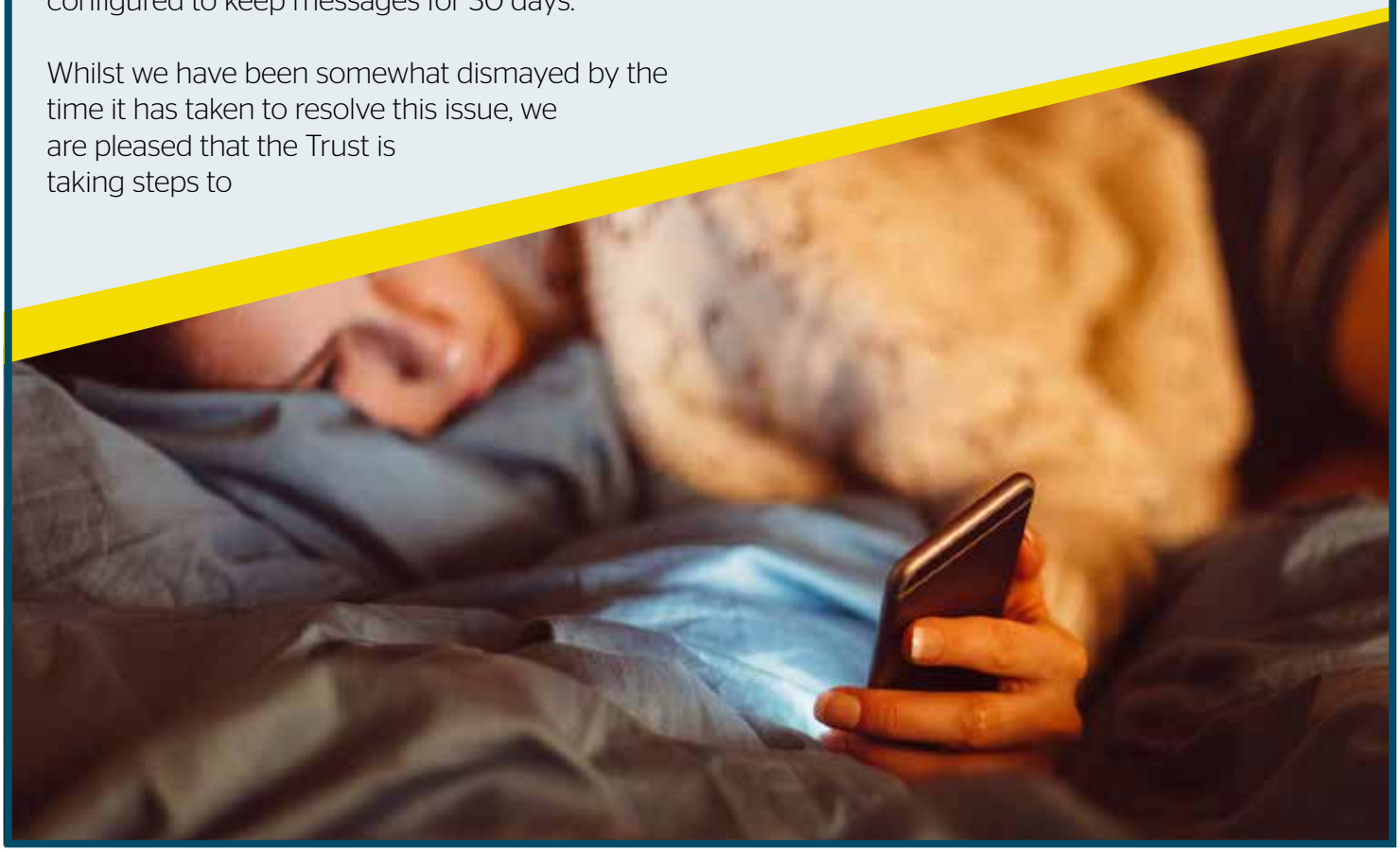
Since that time, it has never been clear as to whether call recording had been implemented and used for the purposes of reflective learning. This is despite a number of enquiries into the issue and a reassurance by a previous Chair of the Trust that crisis calls would be recorded.

Our Mental Health and Emotional Wellbeing Focus Group wrote to Professor Jonathan Warren (Chief Executive of NSFT) to ask, again, for clarity about crisis call recording at the Trust. He confirmed that the system would now be configured to keep messages for 30 days.

Whilst we have been somewhat dismayed by the time it has taken to resolve this issue, we are pleased that the Trust is taking steps to ensure staff have access to this learning resource, and that it is used as a tool for continuous service improvement.

At a later meeting of our group, Mr Warren confirmed that call recording had been used by the Trust as a learning opportunity. He explained to members that a 10% random sample of calls is routinely taken by Team Leaders, scored and peer reviewed. Any scoring below the required standard are investigated further.

The process has been welcomed as good reflective practice for staff and is proving successful. It will allow the Trust and individual practitioners to learn from experiences and to provide better services. It is also an opportunity to highlight best practice and where resolutions have proven to be most effective.



Black and Minority Ethnic and Diversity Sub-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.

The group started the year with an invitation to the Practice Manager (Penny Ashbee) and a GP (Dr Penny Finn) from Barrack Lane Medical Practice. Together with members, they discussed how the practice makes its service as accessible as possible for all patients. New connections were made between the practice and organisations like Suffolk Refugee Support and this will help to improve understanding amongst communities about what people should expect from primary care services.

Other matters explored by the group in 2019/20 include:

- **Changes to Translating and Interpreting services for GP and dental practices in the East of England -** Representatives from NHS England/Improvement and the new provider of the service, DA Languages, attended the group to listen and respond to local concerns. Following the meeting a generic email address was shared from NHS England/Improvement so that any problems with accessing these services could be raised and addressed directly.
- **Re-design of the Suffolk County Council website -** A representative of the Council attended and has agreed to involve disability forums across Suffolk in the website re-design.
- **Children and Young People (a themed meeting) -** This was an opportunity for members to learn more about Kooth, which is a free online counselling and emotional wellbeing support service for young people in east and west Suffolk. Various organisations were able to connect with each other to share information about their current work with young people.
- **Orthopaedic Centre consultation -** East Suffolk and North Essex NHS Foundation Trust presented to the group about its proposed new Elective Orthopaedic Centre at Colchester Hospital and its future plans for patient and public engagement. Members were able to feedback about their views on the plans.
- The group had a useful discussion following a presentation from Leanne Brown (Screening and Immunisation Coordinator, NHS England/Improvement East of England) and Sarah Louise Pemberton (Cancer Specialist Educator).

  A BSL interpreter present stressed the importance of training staff in screening roles to work with interpreters. They felt staff could better understand that people need effective communication throughout the whole of their time at an appointment, not just when the screener thinks they do.

> *"This year has seen a rise in the numbers attending the BAME Healthwatch Group Meetings. The standard of speakers has been excellent. It has been good to see people exchanging information and contact details. I come away from every meeting feeling more positive, knowing I have learnt something new and that there is a greater awareness of some of the hurdles people from the BAME community face. Hopefully this in turn will influence policies and strategic thinking within the county."*
>
> **- Liz Wood (Chair of the Black and Minority Ethnic & Diversity Sub-group)**



Speaking up for change

Our sub-groups bring people together with decision-makers in health and social care to shape, influence and improve local care. They enable service users and carers to share their experiences and to challenge service planning or delivery.

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

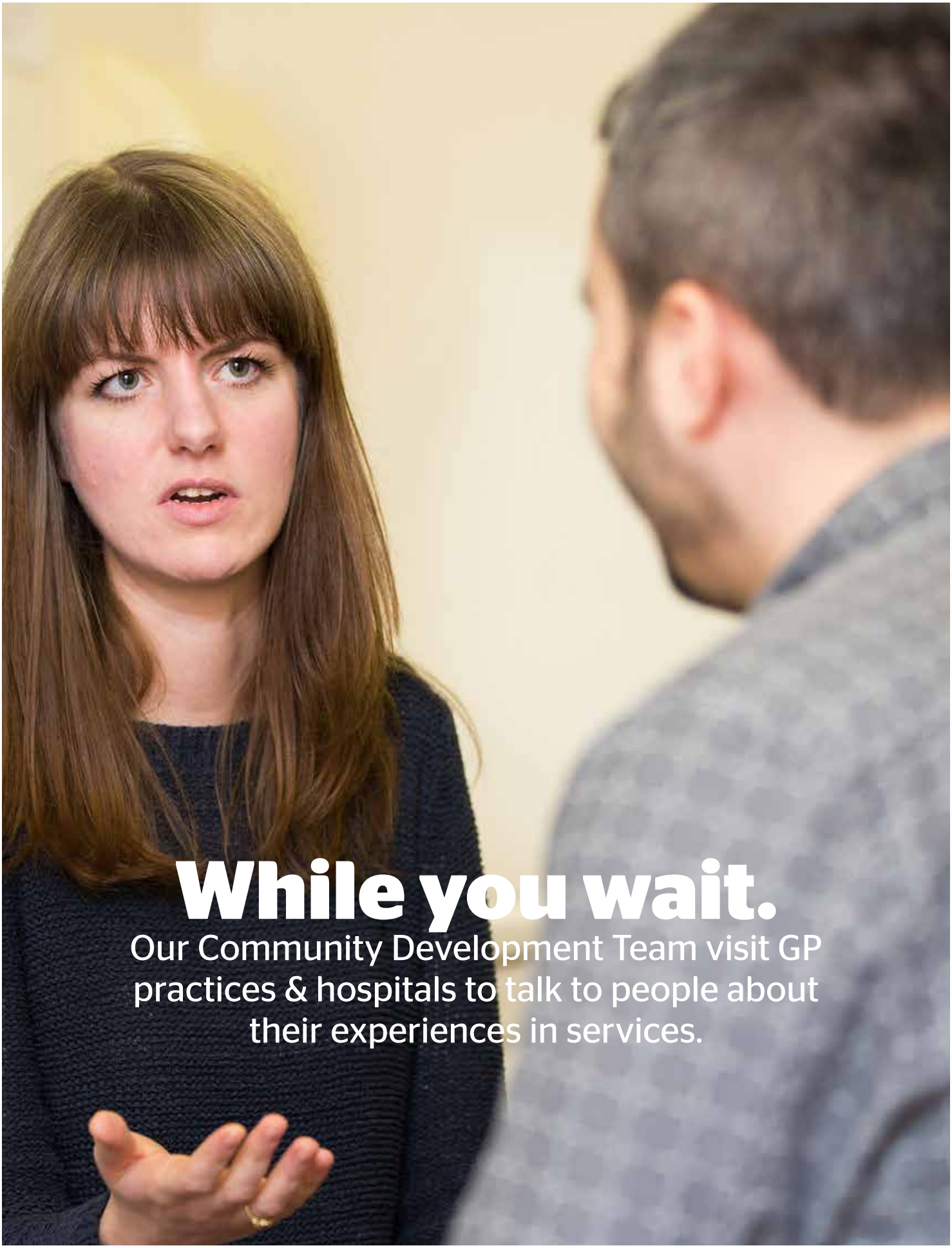
ESNEFT asked if NHS England/ Improvement (East of England) could work with the hospital workforce. New connections were also made with representatives of Norfolk and Suffolk NHS Foundation Trust (to discuss working with GTR communities) and with GYROS, which provides drop-ins for migrants in Ipswich and Lowestoft.

- **Small grants scheme -** A small grants scheme facilitated by the group in 2018/19, has now seen excellent reports published from Future Inclusions and BSC Multicultural Services. They are focused on the portuguese community in Suffolk and on empowering marginalised black and minority ethnic people in east Suffolk respectively.

"Working with Healthwatch as part of their BME & Diversity Group has been informative and impactful. This meeting thoroughly adds value across our community and is one of the 'BEST' meetings I have (personally) attended. It's a genuine collaborative of key strategic partners from public sector organisation, community and the third sector working together and having meaningful conversations about improving Equality, Diversity and most importantly supporting organisations to be inclusive.

I would like to take this opportunity to say thank you for the work you're doing and the difference it's making. In this meeting everyone's voice matters!"

- Tendai Grace Ndongwe (Head of Equality, Diversity and Inclusion for East Suffolk and North Essex NHS Foundation Trust)


While you wait.
Our Community Development Team visit GP practices & hospitals to talk to people about their experiences in services.

Our Community Development Team

Our Community Development Team are visiting communities across the county to help people speak out about their experiences of health and care services. They also offer information and signposting to help people find their way to support.

Our team

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.

Primary care

Our team has continued to engage patients attending GP practices throughout the year.

As the gateway to many services, it is 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.

Following our visits, practice managers receive a summary of the things people have told us. This means they can be responsive to patient feedback and understand more about the impact of any changes they may be making (e.g. new systems). We've included some examples of impact overleaf.

The feedback has also been 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 services (see more on page 56).

Our Community Development Team:



Record feedback & encourage participation



Signpost to help & support



Network & establish new partnerships



Support our volunteers



Share information about access to services

What they say...

This is some of the feedback we have received from local GP practices about why our visits are important and how they have been using their feedback from patients.

*"Healthwatch have visited the Victoria Surgery twice since I have taken over as Practice Manager. **Having the feedback from our patients has been invaluable to focus our attention on where we could be doing better.** For the patients it is more comfortable to provide this feedback to an independent body. I look forward to welcoming Sue and her team to the surgery for many years to come".*

- Jo Shaw (Practice Manager, Victoria Surgery)

*"The surgery approached Healthwatch to assist in understanding our patients views better. There was regular attendance at the surgery with excellent feedback and constructive views. The representative became known to staff and patients and was welcomed with open arms. **We also enjoyed assistance with surveys and marketing new ideas for the services, such as eConsult."***

- Andy Cutting (Service Manager, Christmas Maltings & Clements

"As a Practice Manager it is really important for me to get good quality, real time feed-back. Healthwatch staff have the ability to strike up informal conversations with our patients and ask open-ended questions that allow this to happen. I am then able to share, consider and make appropriate changes with the wider practice team, which I find really helpful."

- Alison Soon (Practice Manager, Dr Lewis & Partners)

We regularly engage with people visiting...

76+

GP practices

*"We find the service very helpful, especially giving us the feedback from our patients. **We then have the opportunity to rectify the comments given by patients."***

- Virna Hale (Deputy Practice Manager, The Rookery Medical Centre)

"I really value the input we receive from Healthwatch. It's great to have an independent person in the surgery talking to patients. We are able to receive timely feedback which enables us to shape the future patient experience."

- Kevin Whomes (Business Manager, The Swan Surgery & Forest Surgery)

"During the last 12 months, Debenham Group Practice has continued to benefit from our ongoing relationship with Healthwatch Suffolk. Periodically visiting each of our three sites, their Community Development Officers assist greatly with our patient engagement, providing valued positive feedback for staff as well as highlighting any area of patient concern or aspects of our care and service where we could improve."

- Steve Bloomfield (Business Manager, Debenham Group Practice)

*"We found the patient engagement really helpful. Our PPG members were able to assist with collecting feedback from patients. It is always helpful to have this patient feedback. Overall the feedback was positive, it is lovely for the team to get positive feedback. **Any areas highlighted for improvement help shape our future services to patients**"*

- Katie Civil (Practice Manager, Fressingfield Medical Centre)

*"This surgery has had received two visits for Healthwatch to discuss with our patients their experiences. In both occasions, the visits have been managed professionally, working with the surgery to get as many patients as possible without affecting the rhythm of the clinics. **The results have confirmed our suspicions on what was working well and what required review.**"*

- Paul Rayner (Business Manager, Angel Hill Surgery)

*"**I have found Healthwatch Suffolk's interaction with patients invaluable**. It is very useful to get an independent and objective feedback regarding the services provided for patients at the practice. HWS has a good understanding of the pressures experienced in primary care and is always balanced in the feedback."*

- Jane Wallace (Business Manager, Wickham Market Medical Centre)

*"I have always found Healthwatch Suffolk to be very understanding of the issues that we are facing. **Whilst Healthwatch is there to listen to the patient's voice, something that it does very well, it can also explain and help the patient understand why changes are happening.** Healthwatch Suffolk is always supportive and also gives me good feedback that is used to change our services for the better."*

- Clive Sillitoe (Practice Manager, Bridge Road Surgery)

*"Healthwatch Suffolk staff make time to connect with the surgery regularly throughout the year and are happy to help us gather feedback from out-patients when they visit. This can be on any particular aspects of our service we want to hear about or just in general. **HWS gives us a timely summary of views from patients and suggests actions we could consider taking.**"*

- Michelle Kears (Practice Manager, Andaman Surgery)

*"We always appreciate and value the feedback we receive from Healthwatch Suffolk. **It is an important way for us to find out the opinion of our patients and act on these comments accordingly.**"*

- Adele Flower (Assistant Practice Manager, The Grove Medical Centre)

"In the uncertain times since COVID, access to healthcare has changed and this trend is continuing. By staying connected with Healthwatch Suffolk, this allows me access to a breadth of practical experience and understanding about how changes affect the people of Suffolk and it has helped guide my work in the Federation to plan during this crisis."

- Dr Ruth Bushaway (Medical Director of the Suffolk GP Federation)

What they did...

After our team has visited a practice, the Practice Manager is provided with a summary of the feedback gathered and offered the opportunity to respond.

The feedback can help practices to monitor whether a change they have made is leading to noticeable improvements (e.g. changes to the way people can book appointments or manage their care). It can also highlight problems that were not previously known and enable practices to respond with prompt action.

On the following pages, we have gathered together some clear examples where patient feedback has enabled local GP practices to make changes and to improve patient experience.

Patients are no longer 'under the weather' in Bildeston

Patients will not be caught in a shower at Bildeston Health Centre after the practice took action to respond to patient feedback.

A regular visitor to the centre provided the following feedback to our staff.

> *"...The queue in the morning when you're trying to get in isn't very nice when it's raining, but I can understand why the doors aren't opened earlier..."*

We shared the feedback with Louise Bissett (Practice Manager) and she confirmed that, in response, the practice had constructed an outside cover for patients who are waiting for walk-in' morning appointments.

We think this is fantastic and that it will really improve patient experience at the practice. A clear example where speaking out about something that could be changed (however big or small) has made a difference for people using local services.

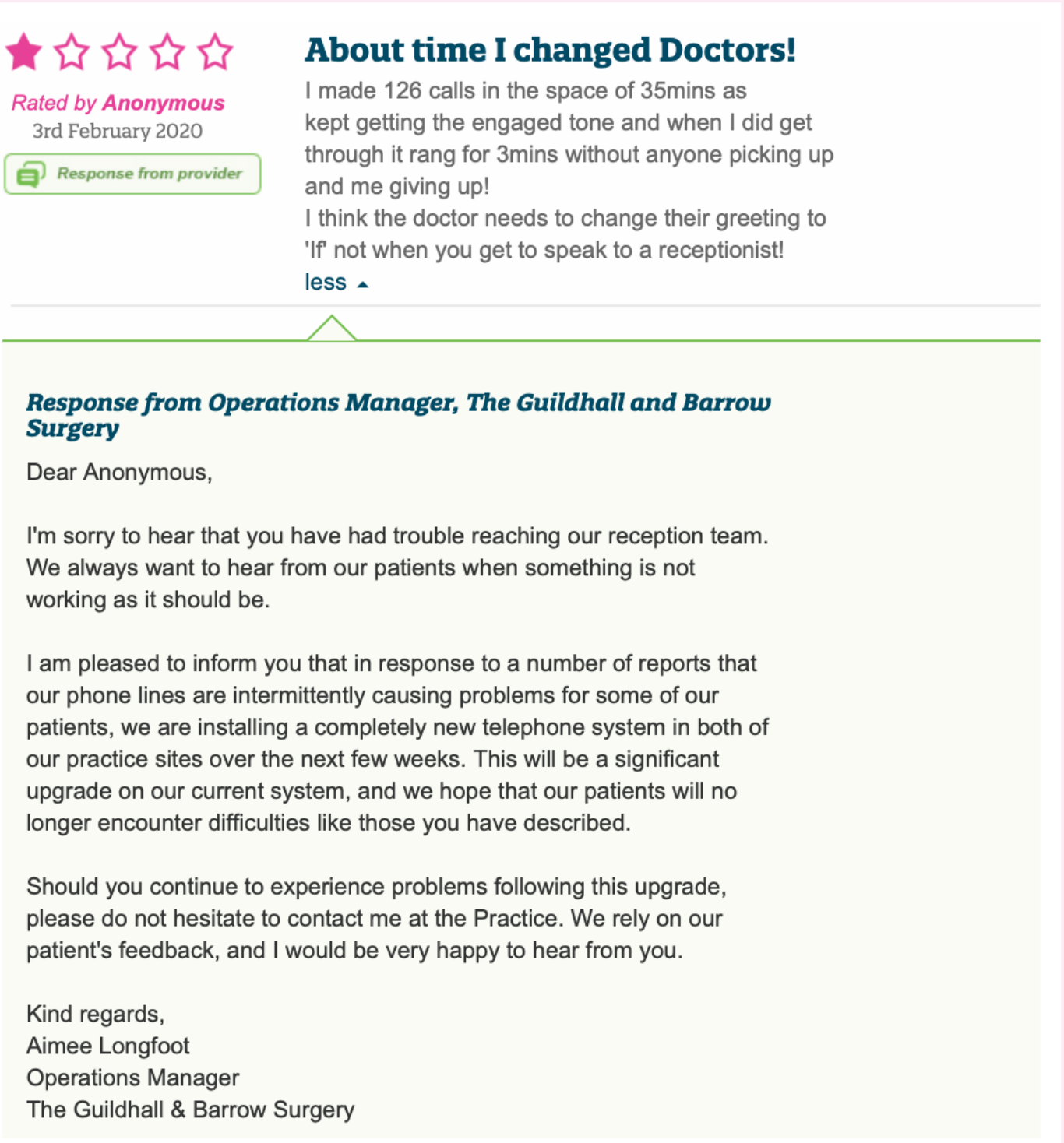


We love this response...

Here is another example that demonstrates why feeding back is so important.

In this case, following a visit to the Guildhall and Barrow Surgery by our Community Development Team, the Operations Manager was able to confirm that the practice had listened to patient feedback and taken the decision to commission an entirely new telephone system.

This will undoubtedly improve people's experiences of this service and we have recorded positive feedback about the practice since the changes were made.



★☆☆☆☆

Rated by ***Anonymous***
3rd February 2020

Response from provider

About time I changed Doctors!

I made 126 calls in the space of 35mins as kept getting the engaged tone and when I did get through it rang for 3mins without anyone picking up and me giving up!
I think the doctor needs to change their greeting to 'If' not when you get to speak to a receptionist!
less ▲

Response from Operations Manager, The Guildhall and Barrow Surgery

Dear Anonymous,

I'm sorry to hear that you have had trouble reaching our reception team. We always want to hear from our patients when something is not working as it should be.

I am pleased to inform you that in response to a number of reports that our phone lines are intermittently causing problems for some of our patients, we are installing a completely new telephone system in both of our practice sites over the next few weeks. This will be a significant upgrade on our current system, and we hope that our patients will no longer encounter difficulties like those you have described.

Should you continue to experience problems following this upgrade, please do not hesitate to contact me at the Practice. We rely on our patient's feedback, and I would be very happy to hear from you.

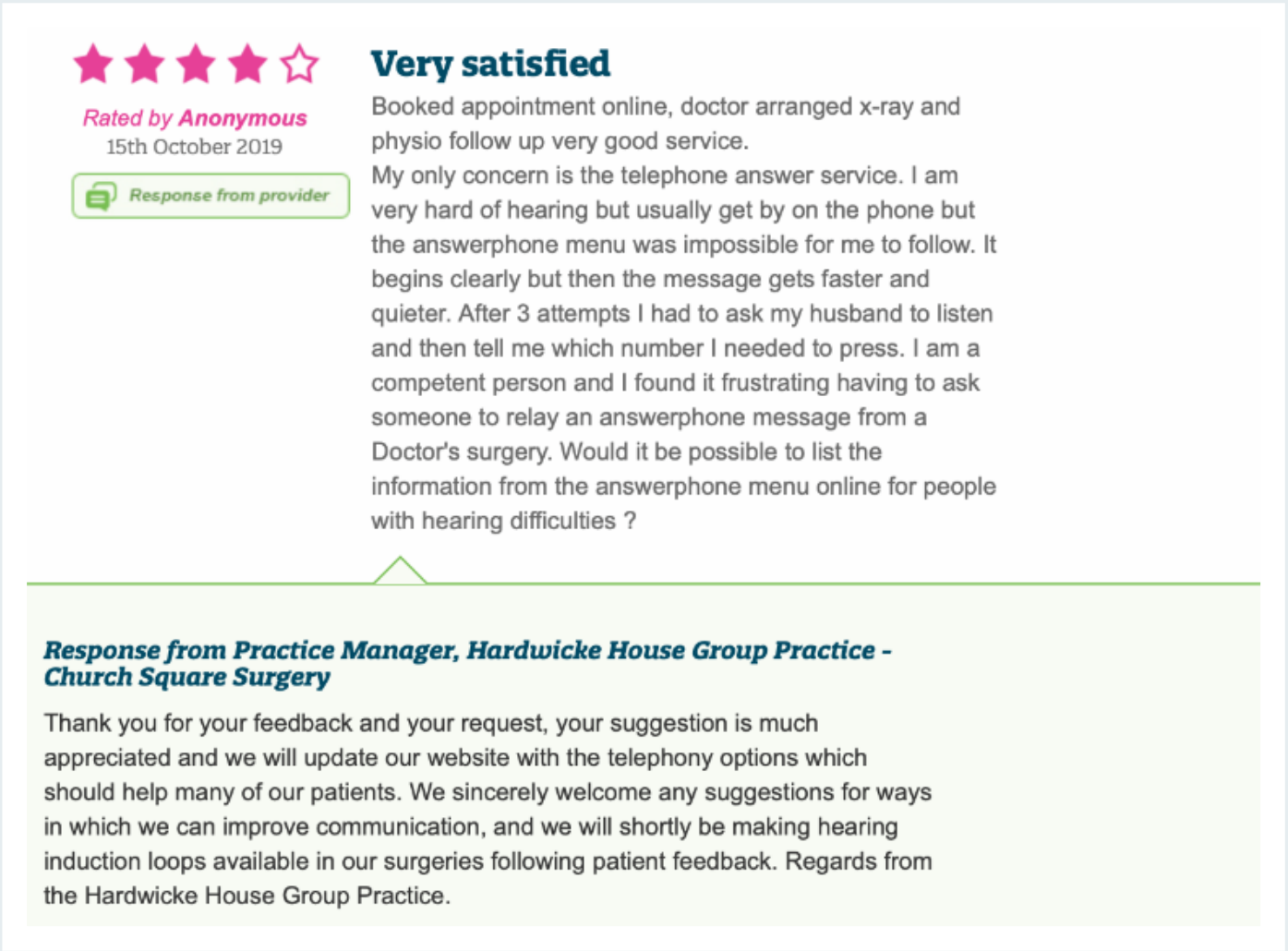
Kind regards,
Aimee Longfoot
Operations Manager
The Guildhall & Barrow Surgery

Another positive response...

We loved this response from the Practice Manager of Hardwick House Group Practice on our Feedback Centre.

After a patient raised concerns about the accessibility of appointment systems, the practice said it would update its website with new content and has committed to making hearing induction loops available within its premises.

These actions will go a long way to ensuring equality of access to information and services from this practice. A brilliant response to patient feedback.



★★★★☆

Rated by ***Anonymous***
15th October 2019

Response from provider

Very satisfied

Booked appointment online, doctor arranged x-ray and physio follow up very good service.
My only concern is the telephone answer service. I am very hard of hearing but usually get by on the phone but the answerphone menu was impossible for me to follow. It begins clearly but then the message gets faster and quieter. After 3 attempts I had to ask my husband to listen and then tell me which number I needed to press. I am a competent person and I found it frustrating having to ask someone to relay an answerphone message from a Doctor's surgery. Would it be possible to list the information from the answerphone menu online for people with hearing difficulties ?

Response from Practice Manager, Hardwicke House Group Practice - Church Square Surgery

Thank you for your feedback and your request, your suggestion is much appreciated and we will update our website with the telephony options which should help many of our patients. We sincerely welcome any suggestions for ways in which we can improve communication, and we will shortly be making hearing induction loops available in our surgeries following patient feedback. Regards from the Hardwicke House Group Practice.

Look out for our widget!

50+ widgets are now live on GP practice websites. It can be an effective means to encourage feedback from patients. and demonstrates that services are open to feedback. Use of our widget is viewed positively by Care Quality Commission inspectors as a marker of candour.



We were totally 'floored' by this..!

Following a recent visit to Victoria Surgery in Bury St Edmunds, we noticed that patients were positive about the practice but occasionally noted that the waiting room carpet had seen better days, and passed this on to the practice manager.

The practice has now completely replaced the carpet with a brand new floor (with staff confirming that patient feedback had played a big part in the decision).

The floor looks much better and significantly improves the environment for patients visiting the surgery. Changes such as this can make a big difference to the way people feel whilst they are waiting to be seen.

Community care

Our team have also visited other services throughout the year to help people understand more about service change and to record their experiences of services.



Sudbury Health Centre

North East Essex and Suffolk Phlebotomy Services were making changes to the way people could access blood tests at the Sudbury Health Centre.

The changes meant that patients would have to book an appointment online, instead of having the flexibility of being able to walk in. The service hoped that this would reduce waiting times and make it easier to manage patients at times of reduced staff capacity,

The changes started in November 2019 for a trial period of three months. Within that time, we were able to visit the service a few times in order to speak with patients about their experiences of the new system and use them to inform the trial.

At one of those visits, a patient fed back about their dislike of the reusable tourniquets that were being used within the service:

"I tried to book an appointment but all taken so I am using the walk in service today. I don't like the fact that they use reusable tourniquets is it not an infection control issue?"

The service responded to the patient on our Feedback Centre to confirm that a change to single-use tourniquets had been implemented. This is the response:

"The use of disposable, single use, tourniquets has been implemented in all our blood clinics to prevent the spread of infection. Thank you for bringing this to our attention."

Care & Nursing homes

As part of our 'What's it like?' project, our Community Development Team has also supported us to record people's experiences of living with local residential care and nursing homes.

The aim has been to inform positive change and continued good practice by learning more about the quality of services in the county, residents' journeys into care and the quality of information available to them.

You can read more about this research project from page 43.

"I feel HealthWatch Suffolk have had such a positive impact with Sudbury health centre as well as West Suffolk Hospital. With regular patient interaction and feedback to us, we can make the patient experience so much more positive and implement recommendations."

- Shan Barnes (Phlebotomy supervisor, North East Essex and Suffolk Phlebotomy Services)

National engagement priorities

National guidelines require us to report upon our engagement with specific groups including young people, older people, vulnerable people and people who live outside of Suffolk but who use our local services.

Young people under the age of 21

'My Health, Our Future'

This year, we have continued our extensive project exploring the mental health and emotional wellbeing of children and young people across the county.

2019/20 saw the publication of our third 'My Health, Our Future' report, which included the views and experiences of almost 12,000 young people from 16 schools and colleges. That brings the total number of individual responses analysed across the series to more than 26,000.

In addition, we have worked with Suffolk Family Carers to adapt our 'My Health, Our Future' lesson plan and survey for use with young carers aged 11 – 18 across Suffolk. The work forms a part of the 'My Mental Health' project for young and young adult carers in England, led and funded by Carers Trust. You can read more about this from page 43.

You can read more about 'My Health, Our Future' and how it has helped to shape, influence and improve support for young people from page 34. We have also included information about how we have adapted this work and utilised our existing relationships to inform the Suffolk 'system' response to the coronavirus pandemic from page 107.

This work has helped to ensure that we have a seat at the table of many important groups, networks and forums where decisions about local support for young people are made. This includes the opportunity to present our findings to, and participate in debates with, senior health and social care system leaders.

Our Annual General Meeting

Our AGM took place in Elmswell on 22nd October and, this year, our theme was children and young people. With this in mind, we asked a small group of young people to help us with the arrangements and they did a brilliant job.

They set out an interesting agenda for our audience, filled with engaging and inspiring guest speakers and performances. Read more about this from page 99.

Youthwatch

Attendees at the AGM also took part in discussions about their priorities for children and young people's mental health. They told us that young people's voices and experiences must be heard where it matters.

We're hoping to take this forward by considering plans for a 'Youthwatch', or young person's health and social care network. Read more about how these plans have developed since the AGM from page 98.

Our Community Development Team activity (young people and families)

This year, our Community Development Team engaged more than 1,000 individuals at activities where it was possible to reach people under the age of 21 or to ask people about support for young people. Specific examples include:

+ **Home Start Groups -** Home-Start recruits and trains volunteers to visit families at home and offer them informal, friendly and confidential support. By attending Home Start support groups, we have been able to talk directly with a discursive and engaged group of parents about the needs of their family.

Everyone has the chance to feedback about health & social care in Suffolk on **www.healthwatchsuffolk.co.uk**.

+ **Suffolk Family Carers Family Fun Day -** A day for carers and young carers. We attended with an information stand to obtain people's views and to talk to them about their experiences. You can read more about how we have worked with Suffolk Family Carers to ask young carers about their wellbeing from page 40.
+ **Maternity Voices Partnerships in Suffolk -** We have been working closely with our local hospital Maternity Voices Partnerships to engage people about their experiences of maternity services in Suffolk (read more from page 50). This has led to the establishment of a new restricted frenulum clinic at the West Suffolk Hospital (see page 54).
+ **Sharing Parenting Conference -** A well-attended event at which we had the opportunity to speak with many people about their experiences.

Older people over the age of 65

We started an extensive research project ('What's it like?') exploring people's experiences of residential care and nursing homes in Suffolk. In order to obtain the most comprehensive view possible, we specifically sought feedback from residents, friends, relatives and visiting professionals (e.g. GPs, nurses and hairdressers).

As part of the project, we visited more than 40 homes to speak with residents and to capture their experiences independently of their provider. That includes a number of case studies that will be shared as part of our report.

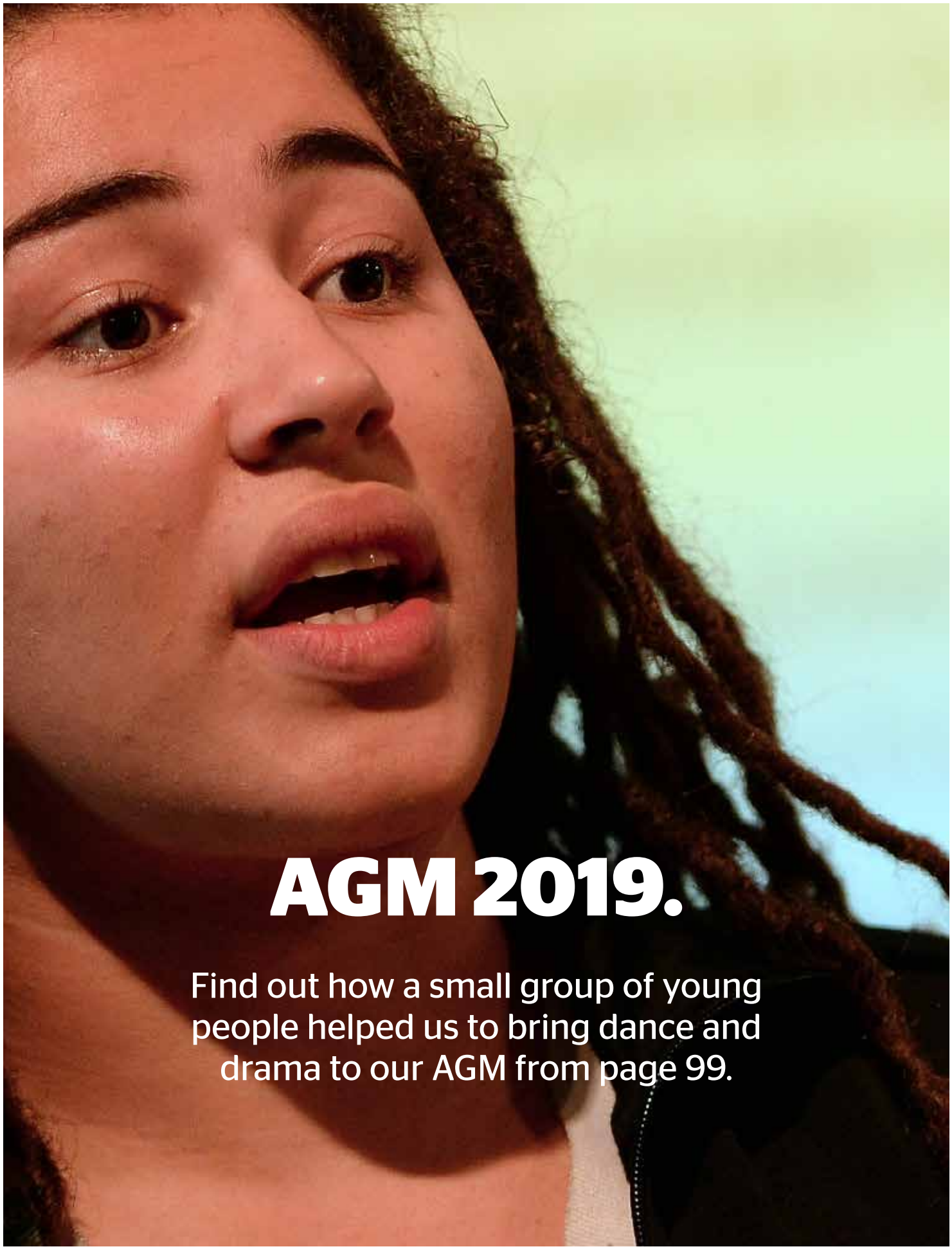
The project, which is endorsed by the Care Quality Commission, Suffolk County Council and local Clinical Commissioning Groups, is the most thorough assessment of people's experiences ever conducted in the county. You can read more about this work and its impact from page 43.

With the coronavirus pandemic in mind, we are now considering how people's feedback could be used to inform recovery plans and to improve support for people who may need care in the future. We may also re-launch some elements of the project so that we can compare the differences between people's experiences before and after the pandemic.

In addition to our research, our Community Development Team engaged more than 3,310 individuals at activities where it was possible to reach people over the age of 65 or to ask people about support for older people. Specific examples include:

+ **Our regular engagement sessions at GP practices -** These visits offer the chance to speak with many people about their experiences and what could be improved.
+ **Community coffee mornings and over 65 groups -** Attended groups and meetings in various locations across the county.
+ **Care Homes week events -** We visited a few homes throughout the week, including the opening of new facilities in Felixstowe.
+ **Community Information Day** - An event at Wenhaston Village Hall to engage with all members of the community, including older people.
+ **Rural Coffee Caravan (RCC)** - We have visited a number of rural communities together with the RCC to gather feedback and to help older people access information, help and advice.

We also had the opportunity to speak with



AGM 2019.

Find out how a small group of young people helped us to bring dance and drama to our AGM from page 99.

people who were being supported by a local hospice.

Our Enter and View Authorised Representatives took part in a joint visit with Trustees of the St Elizabeth Hospice. They were conducting an overall inspection of the services being provided and wanted to include an independent perspective on patient experiences. Read more about this on page 101.

Vulnerable people

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:

+ Our engagement targeted at shaping the latest Care Quality Commission inspection of the Norfolk and Suffolk NHS Foundation Trust. Read more from page 58.
+ 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 34.
+ 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 49.

Find out how we've been capturing people's views

'What's it like?' has been a major project exploring the views of older people living within local residential and nursing homes. It has been the biggest project of its kind ever conducted in the county and has enabled us to shape the provider improvement activity of regulatory and commissioning bodies. Read more from page 43.



We spoke with 

people in communities across Suffolk

We have long established sub-groups that are specifically focused 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 14.

Throughout the year, our Community Development Team has participated in 125 separate activities at which we had the opportunity to engage with vulnerable people. We engaged with at least 2,215 people at these activities. This includes:

+ **Suffolk Coastal Disability Forum -** Established as a reference group to help the district council to listen, learn and consult with disabled people.
+ **Carers event -** Hosted by Suffolk County Council and Suffolk Parent Carer Network to engage in a discussion about the future of support for carers.
+ **Care home open day -** An open day at Prince George Care Home (Care UK) in Ipswich - We were invited to engage with family, staff and residents about their experiences of all services.
+ **Suffolk Indian Mela -** We held a stand to engage with people from all communities in Ipswich and Suffolk.
+ **Non-Emergency Patient Transport (NEPT) discharge lounges -** We visited to talk to patients about their experiences of hospital care and NEPTs.
+ **A Coffee and Catch-up social meeting** - For mental health service users in Beccles.

People who live outside of Suffolk but use our local 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 multiple 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 116 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 local GP practices or community group meetings.

Improving.

Find out how we've been using people's views to shape, influence and improve local NHS and social care services.

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 from patient feedback, research projects, our information and signposting service and partnership working.

Our projects

Our research projects enable people to directly influence decision makers in health and social care and to shape local services. In this part of the report, you can read about our projects and how they have made a difference for people across the county.

Targeted research is an effective way to gather people's experiences and use them to engender change (locally and nationally). Furthermore, our collaborative approach affords us many opportunities to shape decision making about local care and support.

Our projects are planned and delivered together with local people and system leaders wherever possible. That includes the development of any recommendations for improvement or change. This helps to make sure that people take ownership of them and that they are achievable within the constraints of available resources.

In this section, you'll find more information about our projects and their impact. We have also described how they might have been affected by the coronavirus pandemic if appropriate.

Our research projects are delivered on a core funded (from the funding we receive from Suffolk County Council) and also a commissioned basis. To discuss your needs (e.g. service evaluation or consultation), please contact our team directly on 01449 703949 or by email to research@healthwatchsuffolk.co.uk.



You can download our reports from:
www.healthwatchsuffolk.co.uk/reports



Making wellbeing matter.

Our work with children & young people across Suffolk continues to shape, influence & improve support both inside and outside of school.



'My Health, Our Future 2019' is the third of a series of reports exploring the mental health and emotional wellbeing of children and young people in schools and colleges across Suffolk. This year, we recorded almost 12,000 responses 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. In total, across all years of this project, we have now analysed more than 26,000 individual survey responses.

Key findings this year include:

Despite increasing concern about their wellbeing, our report reveals that more than half of young people did not ask anyone for help when they needed it. Of those who did ask for help, the majority indicated that they had approached close friends or family.

There were a number of reasons why young people may not be finding help. Students who had turned to mental health services often found them difficult to access or were passed between them. Others said they would feel embarrassed or worried about being a burden on the people around them. The most common reason for not seeking support was that they did not want help or felt they should deal with problems on their own.

Other findings include:

+ **45%** indicated they had experienced poor mental health. **55%** who have experienced poor mental health had not sought help.
+ **14%** said they have self-harmed and **14%** would rather not say.
+ Young people in Suffolk have a self-esteem score that is more than **four points lower** than the national average.
+ **22%** of boys and **58%** of girls worry about their body image most or all of the time.
+ **15%** of boys and **18%** of girls said they had seen content online that shows self-harm or suicidal behaviour.



'My Health, Our Future 2019' features artwork from young people about their wellbeing. See more in the report.

+ Young people's wellbeing declines with increased use of social media. However, those young people who do not use it at all had poorer wellbeing than low level users.

For the first time, the report explores differences between specific groups of young people.

+ Young people from an ethnic minority were less likely to approach their parents for help.
+ **61%** with a disability said they had experienced poor mental health.
+ **1 in 3** children in care have self-harmed and 14% said they currently self-harm.
+ Young carers were almost **twice as likely** to say they had been bullied online.

You can download the full report or any one of our 22 short topic-focused reports from www.healthwatchsuffolk.co.uk/mhof19



What's the impact?

'My Health, Our Future' is partly commissioned by the NHS West and Ipswich and East Suffolk Clinical Commissioning Groups to shape and inform developing models of providing services and support to children and young people across the county. This includes decisions to introduce new services such as Kooth (online counselling) and to fund initiatives in local schools.

The project has achieved significant impact at local, regional and national levels, having informed a parliamentary select committee exploring the health and care experiences of people from LGBTQ communities. Locally, data concerning the worrying levels of self-harm amongst young people in Suffolk has led to decisions to fund new initiatives targeted at prevention.

Schools receive a bespoke report about their students and are starting to think about how they can address the issues raised by them. This might include peer support groups, improved information and advice, training for teachers and students, targeted education and embedding mental health and wellbeing teaching across the curriculum within their school.

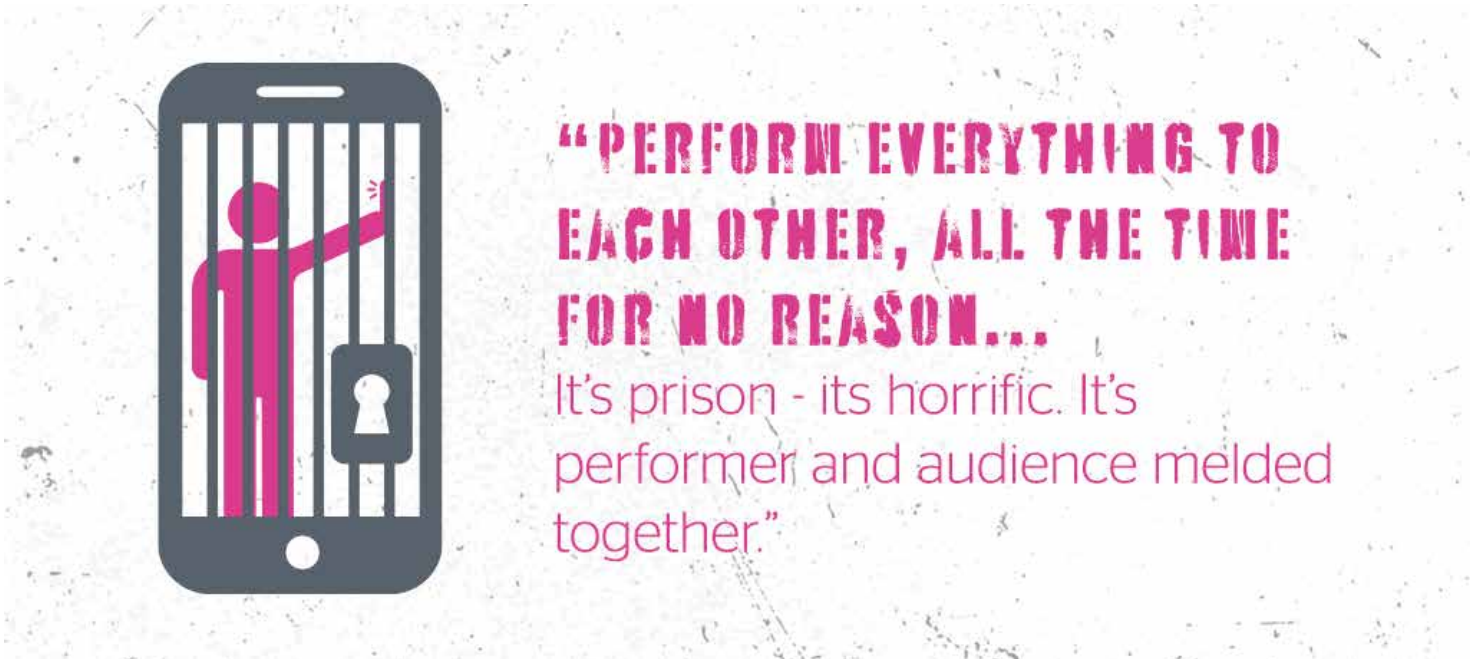
Specific examples of impact include:

+ MHoF helped to establish Whole School Approach initiatives in Suffolk, which in turn (alongside our evidence and that of other partners) has been the foundation for successful Suffolk and North Essex Integrated Care System bids (£2m) to fund three Mental Health School Teams. We were listed as a key partner within the bids.

  These teams include a mix of mental health professionals and provide support to young people and teachers across many schools.

+ The Annual Public Health Report for 2019 focused on children and young people in Suffolk. It captures some of the latest data and evidence related to children and young people and that includes our very own insights.

  The report is completed by the Director of Public Health and Protection. It is a core part of the Suffolk Joint Strategic Needs Assessment (JSNA) and feeds directly in to



"During this year we have continued to work in partnership with colleagues in Healthwatch Suffolk to further develop our understanding of the wellbeing and mental health needs of our local population particularly our children, young people and families. The expertise and creativity of the Healthwatch Suffolk team has enabled the My Health Our Future programme with our local schools and colleges to underpin the development and delivery of our strategic plans.

- Jo John (Senior Transformation Lead for Child and Adolescent Mental Health Services, NHS West Suffolk and Ipswich and East Suffolk Clinical Commissioning Groups)



the Suffolk Joint Health and Wellbeing Strategy (JHWS). Inclusion in this report means that our data is core to shaping decisions about improving the wellbeing of our population.

+ Our report about self-harm (one of 22 MHoF 2019 topical reports), is being included within Public Health Suffolk's 'Self-harm Tool Kit' for schools. The report will also be available to schools via Suffolk County Councils new 'RSE Portal', which is currently under development.
+ Our report about young people's mental health and wellbeing in Lowestoft was the basis of a decision by the Lowestoft Community Partnership Board to fund a Sunday afternoon Youth Social Club at Sam's Café. This will ensure young people have a place they can meet and access information or advice they might need.
+ The report and findings were presented to the Youth Parliament for Suffolk. They have used it to prioritise and inform their work on mental health and wellbeing.
+ Dr Beth Mosley (Clinical Psychologist at Thurston Community College) has used our reports to shape support at schools. As a leader in her field, Dr Mosley has also used our insights and video content within her presentations to conferences and teaching at the University of East Anglia (UEA).

  "The report looks amazing. I plan to use the figures in some teaching I am doing at UEA over the next few weeks."

+ The project has also supported other organisations to secure funding for initiatives that will benefit young people. For example, Noise Solution CIC successfully secured £200k to work with young LGBTQ*+ women using our report as evidence to justify the need for more local support.

Organisations like 4YP have also told us that our research has been an important element of successful bids for funding.

Throughout the year, we have presented our findings to more than **1,000** people. This includes many influential stakeholders and decision makers. Such opportunities have included:

+ Presenting at conferences for Primary School staff across Suffolk to help them shape their new RSE curriculum.
+ Presenting to a regional NHS England & NHS Improvement meeting to highlight areas of good practice that can be shared across the region, but also key challenges that systems may be facing.
+ An interactive continued personal development session with staff at Copleston High School, including a thorough consideration of the schools MHoF data.
+ An interactive presentation about the results to health and social care students at West Suffolk College.
+ Presenting to the high profile University of East Anglia Mental health Conference.

"Thank you for your valuable contribution to the Young People's Mental Health and Wellbeing conference. Your insight helped set the context for an innovative day.

- Prof. Dylan R. Edwards (FRSB Pro-Vice Chancellor)

"The Healthwatch report was the impetus for Noise Solution starting a group to work with LGBTQ+ and young women. We felt It's comprehensive identification of wellbeing deficits for these groups of young people needed addressing. We applied for funding with Spirit 2012 who gave us 200k to work in partnership with Suffolk Carers and we are currently engaged in a pilot specifically with groups of their young women carers."*

- Simon Glenister (Chief Executive, Noise Solution CIC)

"Suffolk UK Youth Parliament was really pleased to hear about the 'My Health, Our Future' report. We were focusing especially on mental health and it was very interesting to understand the issues affecting young people in Suffolk, those who are disproportionately affected by mental health and where young people feel most comfortable seeking support. It was very helpful for the mental health working group in writing their campaign plan as the session showed us where we should focus our efforts. Thank you from all of Suffolk's MYPs (members of Youth Parliament)!"

- Toby Birch MYP (Member of UK Youth Parliament for Bury St Edmunds and West Suffolk)



Co-production with young people in Suffolk

"Suffolk County Council's children and young people's Engagement Hub work alongside Healthwatch in many ways. Whether it is in the pursuance of improving young people's mental health services in Suffolk, consulting, involving and co-producing with young people, championing co-production generally or interviewing for staff. Healthwatch colleagues are always friendly, approachable and totally supportive. They are also a very skilled, knowledgeable and widely experienced team.

"The 'My Health Our Future' surveys have been hugely successful in gaining the views and experiences of a wide range of young people across Suffolk about their emotional health and wellbeing. The reports produced are creative and easy to read and the feedback gained has largely influenced and shaped the transformation of children and young people's mental health services, putting young people at the very centre of it all."

- Julia Ilott (Engagement Hub Manager, Suffolk County Council Children and Young People's Services)

Something to watch...

We caught up with Julia after one of our co-production events (see page 87) to ask her why co-production with young people matters so much, what co-production means to her and the challenges to making it happen in Suffolk. You can watch the video on our YouTube channel or on our website (look for our co-production pages).

For more information about how we are working to promote co-production and to make sure it remains a priority in health and care service planning, please see from page 84.

Young carers in Suffolk

We have worked with Suffolk Family Carers to help the charity understand more about the wellbeing of young carers in Suffolk. The work forms a part of the "My Mental Health" project for young and young adult carers in England, led and funded by Carers Trust.

We worked together to adapt our "My Health, Our Future" lesson plan and survey for use with young carers aged 11 – 18 across Suffolk. 192 young carers took part in the survey from a wide range of schools and colleges. We analysed the data and produced a report, which has been used by Suffolk Family Carers to develop a social action campaign called "I AM" with young carers it supports.

This young carer led campaign focuses on improving the self-esteem and body image worries of young carers and has been specifically designed to address the issues identified by students who took part in the survey. Additionally, Suffolk Family Carers has used this campaign, and our joint



findings, to develop a PHSE lesson plan on the subject of body image.

40 young people attending Ormiston Denes Academy were engaged in the workshop by taking part in discussions and group activities. The session has also been delivered to young carers attending support groups coordinated by the charity.



How we're also helping young people to find support

Our wellbeing postcard for young people includes a list of many local and national organisations that offer mental health and emotional wellbeing support to children and young people. The card is printed and distributed to thousands of students taking part in our survey. It is also shared widely online. During the coronavirus lockdown, Suffolk Parent Carer Network shared the card with more than one thousand young people and families as a part of its support pack.



Supporting schools to improve wellbeing

This year, 14 secondary schools and four colleges took part in 'My Health, Our Future'. All of them received a bespoke report from us about their students, enabling them to adapt plans and to target support.

Here are some of the ways schools have used their reports to improve student wellbeing this year.

+ Farlingaye High School used their report to create a Student Hub and arranged mental health first aid training for its sixth form students so that they could better support each other.
+ Castle Manor High School in Haverhill added new content to its curriculum on specific subjects that were causing students concern. It also arranged parent workshops on key subjects like sleep and emotional wellbeing.
+ Stowmarket High School completely revised its entire PSHE programme to account for issues that we raised by students in their responses. It has also taken steps to address wellbeing across the school by, for example, recruiting a member of non-teaching staff to oversee wellbeing and incorporating learning into whole school personal development discussions.
+ Churchill Special Free School in Haverhill re-designed its PSHE programme to incorporate new learning about issues that had been causing students to worry. The school has participated in the research again in order to understand whether it has successfully challenged its students thinking and to test whether pupil wellbeing has improved.
+ Vision and Voice, a partnership of six local voluntary and community organisations, has used our data to inform its offer of support to students attending Farlingaye High School in Woodbridge, Northgate High School in Ipswich, Alde Valley Academy in Leiston and Stowupland High School as well as their feeder primary schools.

"I have found the Healthwatch Suffolk research to be very helpful, particularly in objectively shining a light on what young people are saying. It formed part of the audit that shaped the menu of activities we have offered in each of our schools."

Sam Petersen (Schools Wellbeing Practitioner, Vision and Voice)

"We have found our report so useful. I have shared the findings with our Heads of Years and Safeguarding Leads and we have already put interventions in place. We are continuing to create new ideas and resources across the school.

"For example, the report highlighted that our sixth form students would benefit from additional support, so we created a student Hub and arranged for Student Life to train our sixth form ambassadors in mental health first aid. They now have a mental health first aid qualification which will help them to identify other students in need of support and enable them to support each other."

- Jemma Schollar (Mental Health Lead at Farlingaye High School)

"The most powerful thing that we have done is to rewrite our entire PSHE programme as a result of what our students have said. Every lesson in every year group has been rewritten and now includes much more support, discussion and signposting on areas that were brought up in our report by the students. We have since re-surveyed the students on how they have found these lessons and the response was super.

"Going forward, we have appointed a new non-teaching member of staff to oversee mental wellbeing and we are seeking to appoint a Personal Development Lead in school. We will be also be introducing PSHE based clubs that will have a focus every half-term (e.g. bullying, mental wellbeing, LGBTQ*+) and encouraging weekly personal development discussion across the whole school in tutor time."

- Claire Ferguson (Assistant Headteacher, Stowmarket High School)



Coronavirus

Prior to the outbreak of COVID-19, schools had the opportunity to introduce learning from their bespoke reports and to address student concerns. Additionally, local health and care system leaders continue to use the reports as a key source of evidence to inform commissioning decisions during the pandemic.

The implications of the findings, which highlight many of the existing challenges young people are facing to their wellbeing, are even more important within the context of this pandemic. That is why we took the decision to launch a specific set of surveys ('My Health, Our Future - At Home') for local children, young people, parents/carers and education staff to complete during the coronavirus lockdown. You can read more about 'My Health, Our Future - At Home' and 'My Health, Our Future - Kids@Home' from page 34.

The coronavirus pandemic and local school closures have meant that we have needed to pause the rollout of our 'My Health, Our Future' survey for 2020 until at least the next school year.



Throughout the year, we have been asking people about what it's like to live in our local care and nursing homes. Incorporating the views of a wide spectrum of stakeholders, 'What's it like?' has been the first countywide research project to explore people's experiences of these services from a multitude of perspectives.

The aim has been to inform positive change and continued good practice by learning more about the quality of residential and nursing home services in the county, residents' journeys into care and the quality of information available to them.

This project is supported by Suffolk County Council, NHS East and West Suffolk Clinical Commissioning Groups and the Care Quality Commission.

What did we do?

A total of four surveys were developed for:

- Residential or nursing home residents
- Friends or relatives of residents
- Visiting professionals (e.g. nurses, doctors, pharmacists, podiatrists, physiotherapists, speech and language therapists, dentists, religious and spiritual leaders, hairdressers and advocates)
- Residential or nursing home staff

All of the surveys were created in co-production with residents in local care homes, their friends and relatives and relevant professionals. They ask a series of questions about a range of things that people told us were important.

That includes (amongst other areas):

+ how people felt about the support available to them when they needed to move into their home
+ food and nutrition in the home
+ care planning
+ personal care and support
+ activities in the home

The surveys were distributed widely. In addition, two Facilitators visited many homes across the county to help residents to complete the surveys independently and to talk to them about their experiences (case studies). Our Facilitators were also supported by our Community Development Officers and Enter and View Authorised Representatives (see page 101).

What's the impact?

So far, we have recorded the views of 600 people about just over 100 individual care and nursing homes.

The project has significantly increased the information and data we hold about residential care and nursing homes in the county. Prior to the project, we had always found it much harder to obtain views about these services because a targeted approach is required to reach people for their views.

The most immediate benefit of this has been that we were able to provide up-to-date information about people's experiences of services to the organisations responsible for regulating, commissioning and supporting local providers of care.

For example, Care Quality Commission (CQC) inspectors have contacted us prior to their visits to local residential and nursing homes and we have been able to contribute regular reports to Suffolk County Council's adult social care teams.

You can read more about our work to inform provider improvement activity from page 56.

At times, we made safeguarding referrals because people identified serious concerns about their care, or the care of their friend or relative, within their survey responses. We are aware that some referrals have led to specific action that will help to keep people safe in their home and to improve services for other people.



Looking ahead, we hope to use the feedback to help providers and commissioners to understand more about what could help to improve people's experiences of living within residential and nursing homes. This work will also offer many insights into the key factors that influence the decisions people make about their care and any support that could have made it easier to choose a provider.

Look out for more updates on our website throughout 2020/21.

"The team from Healthwatch were incredibly supportive throughout the whole time of their visit to Holmwood. They were exceptionally respectful of service users' needs throughout. Listening and valuing what people have to say is a fundamental principle for any caring service and I believe that Healthwatch Suffolk helps to realise this goal."

- Sandra O'Grady (Manager, Holmwood Residential Home)

> Suffolk County Council and NHS Ipswich and East Suffolk and West Suffolk Clinical Commissioning Groups (CCGs) have worked for many years, and continue to work, in partnership with Healthwatch Suffolk. We value Healthwatch Suffolk's collaborative approach in helping us work together, as a system, to improve care for people living and working in Suffolk care homes, and other care settings.
>
> This year, we have worked together to plan and implement a survey for care home residents and staff, delivered and facilitated by Healthwatch Suffolk. Suffolk County Council and the Suffolk CCGs are delighted with the high participation and response rate from this important work and this is testament to the efforts of colleagues at Healthwatch Suffolk.
>
> The information gained from this survey, and indeed from joint working across other forums, has enabled us to better improve care and manage risk across the sector. We wish to thank colleagues from Healthwatch Suffolk for their positive approach to joint working and we look forward to many more years to come.
>
> **- Karen Keeler (Head of Service Development and Contracts, Suffolk County Council) and Benjamin Harvey (Care Homes Clinical Support Manager, NHS Ipswich and East and West Suffolk Clinical Commissioning Groups)**



Coronavirus

Sadly, coronavirus (and the ongoing crisis within local care homes) has significantly impacted upon the impact of this work.

Luckily, we were able to complete our data collection with friends, relatives and residents before coronavirus would have restricted that activity. We will still compile a report based upon this data, aiming to publish it in the summertime.

In order to build the most comprehensive understanding possible about these services, we had started to ask people who work with, and within, care and nursing homes to give their view.

In the interests of supporting providers to focus on the COVID-19 crisis, we took the decision to pause these elements of the project until further notice. However, we have recorded the views of nearly 100 visiting professionals and their views will be captured in a short summary report.

At the right time, we will re-launch the surveys for professionals; referring to the short summary report as a baseline of people's experiences prior to the coronavirus pandemic.



Informing the national debate:

NHS England's Clinical Review of Access Standards in A&E

We inspired a national project that will now see the NHS pilot a "call 111 first" model of Accident & Emergency which could be rolled out across the country.

The aim was to inform NHS England's Clinical Review of Access Standards. and to understand the impact of potential new access targets by finding out what matters most to patients and the public when it comes to A&E. The purpose has not been to argue for or against replacing the current four-hour target, but to inform the ongoing debate.

We worked with the West Suffolk Hospital (WSFT), which was selected to be one of 14 hospitals to trial new A&E targets, to record people's views and offer insight into how the new clinical standards might be impacting on patient experience.

We shared our approach and learning with Healthwatch England, which led to a national conversation about how local Healthwatch can help NHS England to make sure the new standards take into account the needs of those who use services.

Six local Healthwatch (including us) worked with NHS England, and a selection of the test hospitals, to explore how satisfied patients are with their experience of urgent care and to understand the effect of the proposed new standards on people's experiences of A&E.

Building upon our approach with the West Suffolk Hospital, each local Healthwatch led on site visits to interview patients and their family or carers, using an agreed nationally consistent topic guide.

The national report, including our local insights, was published in February 2020 and submitted to NHS England. It featured 330 patient interviews. Additionally, we analysed 6,000 free text comments gathered through the Friends and Family Test to contextualise the national findings.

Key findings included:

+ Time alone does not dictate how people feel about their experience of A&E.

Overall patient experience is also shaped by:

+ The quality of clinical care they receive
+ The quality and frequency of the communication
+ The attitude of staff and whether they have time to offer empathetic care
+ Whether the A&E is working well with other services, such as NHS 111 and GPs
+ The quality of the A&E facilities themselves, including things that can make the experience of long waits easier on people, such as access to food and drink.

You can access the final reports on the Healthwatch England website.

A "call 111 first" approach to A&E access

In the national report about this work, Healthwatch England recommended that NHS England should consider user-focused changes to the A&E

pathway, so people can make more informed choices about where to go for assistance.

It said that this could include "direct bookings into urgent treatment centres, allowing people to wait at home while receiving live communications about waiting times". National policy leaders were lobbied on this point by Healthwatch England and, at the time, said it was not a workable solution.

However, COVID-19 has forced NHS leaders to reconsider their approaches to managing the capacity within services and NHS England has now announced a trial of a new "call first" model for A&E. Pilots will take place in Portsmouth, London and possibly elsewhere in the country.

Those considering going to A&E will be asked to call 111, and be given a time-slot to attend, or advice on the best place to go for treatment. Ultimately, it is hoped this will help to alleviate pressure on A&E by ensuring people are seen by the right services.

Healthwatch England reports that our independent evaluation of people's experiences has been a significant contributing factor to the decision making behind this new approach to A&E access.

This is a perfect example of how our local research can support national policy changes that may have benefits for many millions of people across England, though of course the impact on patients has yet to be assessed.

"Healthwatch Suffolk approached the WSFT to support its field testing of urgent and emergency care proposals, as part of the national review of NHS access standards.

"The Trust was one of 14 providers asked to safely test the new urgent and emergency care proposals. The first six-week phase of testing explored whether an average (mean) time in A&E could be implemented safely, and provide clinicians with a useful measure of activity and patient experience. The second phase of testing then included measuring the time to initial assessment; and collecting data to examine the feasibility of measuring how fast critically ill or injured patients arriving at A&E receive a package of tests and care developed with clinical experts.

"Healthwatch Suffolk's CEO, Andy Yacoub, made welcome contact with us at WSFT to offer Healthwatch support to measure patient experience during the field testing. This was to see what impact, if any, the changes were having on our patients and their experience in the emergency department.

"Healthwatch staff came into the emergency department to survey patients face-to-face about their patient journey and experience, with a particular focus on waiting times. This served as a quality check to balance the focus on the more quantitative measures we were testing, and provided rich and valuable data about the experience our patients were having – allowing us to collectively spot any patterns between the two. This was immeasurably helpful given that one of the seven ambitions of the national review is to make sure that any changes to the standards 'drive improvements in patient experience'.

"The joint working was so successful that our experience in Suffolk was used as a best practice template to follow nationally; with other trusts partnering with their local Healthwatch during phase 2 of the testing as a result."

- Dr Nick Jenkins (Executive Medical Director, West Suffolk NHS Foundation Trust)



Stepping Home

A local service evaluation

Stepping Home is a pilot project aimed at reducing housing related hospital admissions and delayed discharges. The project has accommodation to temporarily house patients who are at imminent risk of hospital admission due to their housing, or are unable to be discharged for housing reasons.

We were commissioned by East Suffolk Council to provide an independent evaluation of patients and professionals' experiences of Stepping Home.

Three main methods were used to explore the impact of the service on patients and professionals and this included focus groups, interviews and an online survey.

Overall, people's responses to the research suggest that the Stepping Home project in the East of Suffolk has been successful at improving people's experiences of using services, improving recovery and preventing delayed discharge from hospital. The service appears to offer several other financial and subjective benefits to patients, families, professionals and the wider health and social care system.

With all of this considered, we have highlighted a number of ways that people felt the service could be improved and suggested that this is learning that should be incorporated into any future commissioning or expansion of the service.

> *"The Stepping Home report produced by Healthwatch Suffolk really gave us the evidence we needed to take to our stakeholders. We knew the project was delivering good outcomes and cost savings, but some of the quotes Healthwatch pulled out of those interviews say more than figures ever could. It enabled us to approach our local health & social care partners, with evidence of the positive impact and benefits we are delivering to their patients. One of the strategic priorities of East Suffolk Council is to enable stronger, more resilient communities, and so improving health outcomes. The report helped demonstrate Stepping Home is helping to drive us toward this aim, and ultimately helped support our case for extra funding to extend the project."*
>
> **- Councillor Richard Kerry (Cabinet Member for Housing, East Suffolk Council)**



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

At the start of the year, 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 had 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.

The final report of the committee was published in October 2019. It highlights that too often LGBT people are expected to fit into systems that assume they are straight and cisgender. But the Committee has found that deep inequalities exist in health outcomes for these communities and that treating them "the same" as non-LGBT people will not address these poor outcomes. This finding is reflective of the feedback we had recorded from people and submitted as evidence.

The final report highlights that some of this discrimination can take the form of signs and symbols that LGBT people may interpret as hostile. It used a quote from our feedback to highlight the fear that this instils in LGBT individuals seeking healthcare.

This is the quote:

> ***"My GP has bibles in the waiting room and a large sign in his consulting room inviting patients to 'Pray with me if it's bad news' As a gay man I feel very anxious my doctor is a practising Christian. I feel inhibited and frightened to discuss health issues concerned with my sexuality."***

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**

Other projects have included...

A number of other projects were started in the year. Some of them have completed, whilst others have not yet concluded or have been delayed by coronavirus.

Better Births in Suffolk

We've been working with our local Maternity Voices Partnerships (West Suffolk, Ipswich and Colchester MVPs) and maternity services to host a survey about people's experiences of having a baby in Suffolk and north east Essex.

It's all part of efforts to check how changes, introduced by a national maternity review in 2016, are having an impact on peoples experiences of services. This includes changes like (amongst others):

- Making sure new mums have access to the same midwife throughout their pregnancy (including at the birth).
- Improving quality and safety with more effective recording of feedback and outcomes, and comparison of this data between hospitals.
- Improving access to perinatal mental health support.
- Ensuring every mother has the opportunity to develop a personalised maternity plan.

A key focus of the review is that maternity systems must now routinely collect data on the quality and outcomes of their services, measure their own performance and compare against others' so that they can improve.

Three surveys were launched and have been promoted widely by the MVPs and other stakeholders associated with the development of maternity care across the Suffolk and North East Essex Integrated Care System area.

The surveys sought to hear about people's experiences of care during pregnancy (antenatal), at the birth of their baby and after their baby has been born (postnatal). Responses were encouraged from both new mothers and their birthing partners.

Over 800 people have shared their experiences across all surveys and we have begun to work on the analysis. Our final report will be presented to a group of leaders responsible for our local maternity services and realising the ambitions of the national maternity review in Suffolk.

It is our hope that the feedback will help our local NHS maternity services to develop their services and ensure they are meeting people's needs.

Military carers

We're working with Suffolk Family Carers to help the charity understand more about the experiences of carers within military families. It is hoped the project, which launched after the charity received a two year grant from the Armed Forces Covenant- Families In Stress Fund, will build a better understanding about the barriers military personnel may face in seeking support for their caring role.

Alongside Suffolk Family Carers, we have been recruiting participants, conducting interviews and will compile an analysis about the experiences of families. The aim will be to ensure serving families on local bases, and those living in the community, are able to receive support, information and guidance in the future.

The final report will be published at the end of summer 2020.

Neighbourhood Nursing and Care Team patient experience

A small number of people in West Suffolk were 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, a unique district nursing system founded in the Netherlands and which has gained widespread support for its nurse-led approach and cost effectiveness.

The key to the Buurtzorg approach is that it not only empowers nurses to deliver all the care that patients need, but it also gives them greater autonomy over the way they work such as determining their own work schedules and time spent with patients. The nurses are 'generalists' taking care of a wide-range of patients and conditions.

We were commissioned to complete a number of in depth interviews with patients and carers about their experiences of receiving care from the Neighbourhood Nursing and Care Team. Our findings were presented to the Suffolk Health and Wellbeing Board alongside a report from the King's Fund that focused on what adaptations have to be made in order for the model to work within the English healthcare system.

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.

Safeguarding in Suffolk

This project has been seeking to record people's experiences of making a safeguarding referral to Suffolk County Council. The aim is to share good safeguarding practice and to make recommendations for how this service could be improved.

The project is supported by the Suffolk Safeguarding Adults Board, which is a partnership of organisations that promote the development of adult safeguarding work throughout Suffolk. We are still at an early stage of the research and we will be seeking to develop it further throughout 2020/21 alongside members of the SAB and other key partners.



More service improvements

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

East Suffolk & North Essex NHS Foundation Trust (Ipswich Hospital site)

The following outcomes were achieved by providing feedback to ESNEFT.

A safe place for personal aids

A trial of a new box system has been extended at the Ipswich Hospital site of East Suffolk & North Essex NHS Foundation Trust (ESNEFT) after it has demonstrated improvements in patient experience.

In January 2019, we had raised concerns about the way the Trust had responded to an end of life patient whose dentures had been lost whilst they were under its care.

The Trust acknowledged that losses of personal items are a feature of some patients experience and told us that storage boxes for individual patients beds had been purchased that would allow items to be stored safely. It also told us that it would explore internal options for the replacement of lost personal aids.

A trial of the new box system commenced on two Trauma and Orthopaedic wards. It has also been trialled with a patient on the fractured neck of femur pathway. These patients could often be suffering from confusion and are often dependent on various communication aids.

The Trust reported no losses of items within the trial areas and so the trial was extended to test across a whole ward area. Feedback from patients has been positive because communication aids are available to them immediately in recovery, which supports their comfort and care.

The Specialist Surgery Division has also taken planning discussions forward with dental lab and audiologists to consider a commitment to providing either replacement dentures or hearing aids if the need occurred whilst a patient is under the care of the Trust. This is particularly important for patients that may be unable to return home and that cannot therefore access services from, for example, their local dental practice.



Informing the rollout of same day emergency care in Ipswich Hospital

We received a comment on our feedback centre:

> *"Experience in ED good. Treatment caring and professional. Once transferred to Emergency Assessment Unit I was horrified by treatment. I spent 14 hours on a trolley - they don't provide patients beds. I lost feeling in my legs. One nurse told clerk to "ignore" dementia patient who was distressed and calling for help. Another distressed patient was praying out loud whilst ignored by staff. I was physically grabbed at by man who could not get blood. The department should be closed down."*

The Trust responded to the patient as follows:

> *"We apologise your experience in our assessment area was not what it should have been. Our General Manager and clinical teams for Emergency care have listened to your comments and are taking these forward for both specific staff learning and potential changes in policy, to ensure a more comfortable experience for our patients."*

In particular, the Trust told us it had incorporated the feedback into the rollout of its Acute Medical Same Day Emergency Care (AMSDEC) programme. The aim has been to increase the number of patients who are seen in the ambulatory setting and supported by early senior medical input. This should reduce length of stay in both the Emergency Assessment Unit (EAU) and the Emergency Department.

The intention was that this programme would be trialled in November 2019 and, at the time, the Trust assured us it expected patient experience to improve significantly as a result.

What is the AMSDEC Unit?

AMSDEC exists to assess, investigate and treat patients on the same day to avoid them being admitted to hospital. The team includes a consultant, a registrar, nursing staff and Advance Clinical Practitioners. They treat some common conditions such as:

- Chest pain
- Palpitations
- Possible pulmonary embolism
- Chest infections
- Cellulitis
- Symptomatic anaemia
- Urinary Tract Infection
- Referrals of patients with cancer

Patients are referred to AMSDEC by their GP, the Emergency Department, Urgent Treatment Centre, a clinic or paramedic.

On arrival, a patient will have their observations taken and then be assessed by a nurse or associate practitioner, which will likely include an ECG and blood tests.

A doctor will assess the patient and order further tests (e.g. a chest x-ray or medication). A consultant will then look at all the test results and make a diagnosis and decide whether the patient should be discharged, admitted or come back at a later date to the clinic for further investigations or a review.

It's always worth taking a moment to feedback on
www.healthwatchsuffolk.co.uk/services

Improving access to Frenulotomy!

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.





Continued...

A few statistics about the service...

With thanks to Dr Arun Saraswatula (Consultant Paediatrician at the West Suffolk Hospital), who has provided the following data about this service.

Frenulotomy is the name of the procedure used to release a tongue-tie. You might hear of tongue-ties being described as either an anterior type (at the front of the tongue) or posterior type (towards the back of the mouth). Sometimes, tissue on the floor of a baby's mouth hides the tongue-tie and this type is called a sub-mucosal tongue-tie.

80 anterior

8 sub-mucosal

56 posterior



Two babies needed the procedure twice



One baby had both an anterior & posterior tongue-tie

145 procedures

January 2019 - June 2020

63% of people provided feedback about their baby's condition after the frenulotomy.

85% said their babies feeding **had** improved.



15% said their babies feeding **had not** improved.

After discharge, the majority of babies experienced no complications after discharge. None reported a need for pain relief and just four experienced bleeding, but it stopped within five minutes (one person needed to visit A&E). There were no reports of infection.



A big thank you to Laura, Katy and Hannah. They, and other new parents, shared their stories with us & helped to get this new service agreed. You can view their stories on our website.

Partnerships.

A collaborative approach is the best way to reach people for their views and to achieve lasting change in health and care.

In this section, find out how we've been working with other people and organisations to shape local services. That includes statutory services, regulatory bodies and Voluntary and Community Sector (VCS) organisations.

The Care Quality Commission

As the national regulator for health and social care services, the Care Quality Commission has the role to make sure services provide people with safe, effective, compassionate and high quality care. We work with CQC to help ensure its local inspections of service are informed by your experiences.

Sharing intelligence about services

We have continued to work effectively with the CQC to make sure 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.

An example of this has been Alice Grange Care Home in Ipswich, where our involvement prompted the CQC to revise its inspection plans and to evidence its reasoning for a downgrading of the services quality ratings (read more about this on page 63).

We have also provided CQC inspectors with numerous updates about specific residential and nursing homes across the county. We were able to do this because our 'What's it like?' project (see page 43) has enabled us to record hundreds of experiences from residents, relatives and professionals.

Primary care - Our report about GP practices across Suffolk

Our team has engaged patients within GP practices 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.

We published our second report about people's experiences of GP practices in June 2019. It brought together data from our Feedback Centre, the NHS website, CQC and the national GP survey commissioned by NHS England.

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

Suffolk GP Federation has reviewed our feedback regarding the experience of LGBTQ*+ patients. It shared the information and recommendations

with its staff and clinicians, adding that it would also be used as a key component of diversity training for staff.

Some clinicians fed back that they would like a greater understanding of the needs of LGBTQ*+ patients so that they are better equipped and able to provide more effective support. The Federation has therefore planned to work with Alliance and Voluntary Community Sector partners to develop some training for primary care staff.

Here is what the NHS Ipswich and East Suffolk and West Suffolk Clinical Commissioning Groups said about the report:

"The report includes a very helpful account of experiences of the changes within primary medical care including care navigation, the introduction of new clinical roles and range of consultation types.

"The report clearly highlights excellent practice as well as areas in which we need to support improvement; within individual practices to reduce unwarranted variation and more broadly through further training and education, including:

- *Continuously improving knowledge about mental health and wellbeing (an evening training and education programme is supporting this currently, using Alliance transformation funds)*
- *Developing knowledge and consultation skills with LGBTQ patients including younger people*
- *Customer service and care navigation skills*

Some telephone systems do remain under strain at specific times of the day and, as you rightly indicate, we need to support appropriate improvements and encourage use of alternatives.

The General Medical Council (GMC) is the independent regulator for doctors in the UK. During the year, it ran a national consultation on some proposed changes to how doctors collect and reflect on patient feedback as part of their revalidation.



Our report about local GP practices is used by the CQC to inform inspection planning and to justify the ratings awarded to local services. This year, Healthwatch England highlighted the work as good practice within a national General Medical Council consultation response. In particular, how Healthwatch can provide and amalgamate existing data to support GPs to be responsive to patient feedback.

Healthwatch England coordinated a national response to this consultation and chose to highlight our GP report as a best practice example. In particular, how local Healthwatch can provide and amalgamate feedback to support GP practices to be responsive to their patients and communities.

As part of the GMCs response to the coronavirus (COVID-19) pandemic, it has decided to delay publication of the findings and outcomes of this consultation until later this year.

Norfolk and Suffolk NHS Foundation Trust

The CQC notified us that it would be re-inspecting NSFT (our local NHS provider of mental health services) services and invited us to provide feedback about peoples experiences.

The aim of the inspection was to ascertain whether the services had improved since CQCs previous visit in September 2018. The Trust had been rated 'inadequate' for a period of years and was operating under special measures.

We brought together the partnership that coordinated "A Very Different Conversation" about mental health services in east & west Suffolk (Healthwatch Suffolk, Suffolk Parent Carer Network, Suffolk User Forum, Suffolk Family Carers and Ace Anglia) and joined forces to ask people for their feedback.

Nearly **400** people shared their experiences. Whilst some positivity was evident within the feedback, there were high levels of dissatisfaction with access to services, waiting times and communication. People often described the level of support from services as being both ineffective and insufficient for their needs and this was compounded by issues such as limited support in a crisis and poor discharge planning.

The feedback was shared with the Inspection Manager at CQC. The regulator told us that the feedback would be considered before the inspection to help identify any current issues or concerns and specific questions it may ask of NSFT during its inspection.

> *"Under CQC's programme of inspections, all England's mental health hospitals are rated according to whether they are safe, effective, caring, responsive and well led.*
>
> *"It is important that the Care Quality Commission receives information from local people regarding their experiences to help us make the right judgments. This co-production partnership of local organisations has been instrumental in ensuring we understand patients' use of Norfolk and Suffolk NHS Foundation Trust."*
>
> **- Jane Crolley (Inspection Manager, Care Quality Commission)**

The report was discussed at a meeting of the Healthwatch Suffolk Mental Health and Emotional Wellbeing Focus Group, where the Chair of the Trust, commissioners and other stakeholders were present to hear about people's experiences.

The findings were also presented to the group of stakeholders responsible for monitoring whether the Trust has been improving its services under CQC special measures (including NHS England and Improvement, NSFT senior management and commissioning leads).

Our statement on the final inspection report

Following the inspection, the Trust was rated "requires improvement" overall, but it remains in special measures. The outcome is reflective of the efforts staff, clinicians and stakeholders have made to attempt to improve NSFT services.

Overall, we fully recognise the pressures that staff and clinicians have been under and the



> Our family is being torn apart, yet **we still don't meet the criteria for accessing any help.**

challenges this brings for them on a day-to-day basis. Their caring contribution is recognised by patients and carers. Indeed, within our submission, comments often described the positive relationship service users or carers had with the professionals supporting them.

With this considered, it is clear that when we examine public feedback as a whole, the improvements noted by CQC are yet to be experienced by those who rely on the services. Simply put, in the time that has passed since the 2019 inspection, we have noticed very little improvement in peoples' recorded feedback.

High levels of dissatisfaction with access to services remain and people frequently reflect upon the difficulties they face when seeking care. This includes a lack of access to support altogether, poor communication about services, or lengthy waiting times. People have also tended to describe the level of aid from services as being both ineffective and insufficient.

In particular, we remain highly concerned about the levels of help available to children and young people in Suffolk. They, and their families, have told us about ongoing and severe problems with obtaining support in Suffolk. Much of this is related to waiting times, a lack of reliable support upon accessing a service, barriers to getting an initial referral into CAMHS and a subsequent feeling of being passed between services.

There is no doubt that the problems faced by this Trust have been enduring and the situation has become increasingly fraught for many young people. The negative impact of poor access to good quality and timely provision means that many children and young people go without the help or care they need.

Our 2019 'My Health, Our Future' lesson plan and survey programme, which explores the mental health and emotional wellbeing of almost 12,000 young people across the county, highlights the importance of getting local support right. This is fundamental if we are to avoid our children and young people growing up without their needs being suitably and safely addressed; an issue that is heightened at times of increased stress, such as moving into secondary school education or exams.

The CQC recognises the need for the Trust to improve its services for children and young people. In particular, there is recognition that

Trust systems for engaging patients, carers, staff and stakeholders in the development of the children and young person service were not fully effective and that this needs review. There are organisations already in place in Suffolk that can help the Trust to reach young people and families for their views and experiences at any time.

There is a disparity that exists between what the Trust reports, the outcome of this inspection and the experiences of service users and carers.

Many of the improvements specifically highlighted by CQC relate to Trust strategies, newly implemented quality improvement programmes and changes to the way that the quality of services are monitored. We believe that, roughly six months after this inspection took place, it would be reasonable to expect that service users and carers should be noticing improvements to the quality of services and their access to them.

Patients, carers, professionals and the public have a right to expect mental health service provision that meets their needs, is responsive, and is of a high standard. Our view remains that, in order to achieve that ambition, people's experiences must be treated by the Trust as a driver for positive changes to mental health and wellbeing support in our county. On behalf of patients, carers and the public, we once again invite NSFT to genuinely participate in lasting engagement and to demonstrate learning from that.

> *"Healthwatch Suffolk has played an active role in seeking the feedback from service users, local people and family carers to inform improvements and service changes. Over the past year I have seen the active and key stakeholder role they have played with Norfolk and Suffolk NHS Foundation Trust and the Ipswich and East Suffolk and West Suffolk Clinical Commissioning Group patient and public involvement agenda."*
>
> **- Dr Lynne Wigens (Regional Director of Nursing, NHS England and NHS Improvement - East of England)**

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



Safeguarding in Suffolk

Safeguarding is a fundamentally important part of what we do to address service quality in Suffolk and to help protect vulnerable people from harm.

Referrals

This year, we have made a number of safeguarding referrals. This is usually because we have concerns about feedback submitted to our website or within survey responses. We have also made referrals when information has been disclosed to us within the context of a signposting enquiry from the public.

We make a referral if we have evidence that a person may be at risk of harm or abuse in the community or within local services.

We have been made aware that our referrals have led to meaningful action that will help to protect people and to address issues of poor care quality within services. This has included, for example, taking action to investigate a potentially inappropriate client/therapist relationship and the removal of an agency worker from the premises of a residential home because they were working without correct vetting.

Many other concerns have been addressed as service quality issues directly with local managers of services or with Suffolk County Councils social care teams.

Our feedback to Suffolk County Council has also led to improvements on the referral form itself that should make it easier for people to input their concerns if they relate to a service instead of a specific individual.

The Safeguarding Partnership

We remain an active participant on both the Suffolk Adult Safeguarding Board (SAB) and the Health sub-group. They are both key forums associated with, and that drive the work of, the Suffolk Safeguarding Partnership.

The law protects people from maltreatment. The partnership is responsible for carrying out that statutory duty of care to/for you. An independent chair person, Anthony Douglas CBE, leads the partnership.

Throughout the last year, our representative on the Board has referred operational matters to the Health sub-group, for example raising concerns about the lack of availability of dentistry to residents in care homes and poor oral care in general. More recently, we have highlighted concerns about the availability of Personal Protective Equipment to care homes in the early stages of the COVID-19 lockdown.

We have also started to work with the SAB to

improve access by the public to the safeguarding referral process, although the review has yet to commence in earnest (see page 63 for more information about this project). Additionally, we have worked with the independent Chair of the partnership, and a small group of SAB members, to write an Inclusion strategy for the Board.

Ultimately, we have an important role to prompt safeguarding professional leads and Boards to consider greater user involvement and subsequent implementation of recommendations from safeguarding reviews/ investigations.

Suffolk County Council / CQC Provider Performance Board

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 domiciliary, residential and nursing care provision across Suffolk and to highlight any concerns. This has supported commissioners and regulators to take appropriate action and to bring forward scrutiny (e.g. CQC inspections) where necessary.

This year, our research exploring the views of people living within local residential and nursing homes ('What's it like?') has enabled us to provide up-to-date information about people's experiences and to highlight concerns about care quality where they have been identified within survey responses.

Updates on the latest findings have been shared at Provider Performance Board meetings so that relevant professionals can take forward specific actions with services. This has included, for example, addressing matters such as poor access to dental care within homes, poor provision of activities, concerns about care planning and other more general issues with the delivery of care.



We've used data from our 'What's it like?' project to encourage regulators and commissioners to tackle care quality issues and systemic problems within residential and nursing homes. See more about this project from page 43.



Read more about how we support safeguarding in Suffolk from page 61.

Safeguarding - How we helped to make this service safer

The Alice Grange Care Home in Ipswich has been rated "Inadequate" by the Care Quality Commission (CQC), downgraded from 'requires improvement' and a previous 'good' rating.

Over a period of time, we supported local families to be heard by commissioners and regulators so that their concerns could be used to make things better within the home.

Whilst this is not positive news from CQC, we are pleased this latest report does now reflect the experiences that have been shared with us and believe this will lead to important improvements. This is what the report said:

+ There were not always enough staff.
+ Across the home staff were under pressure to meet people's needs and, although it was evident they were trying very hard, CQC noted instances of shortfalls.
+ People were left at risk of poor nutrition and hydration support and at significant risk of developing pressure ulcers.
+ Care plans did not accurately reflect people's needs and any risks or how these were mitigated against.
+ People were not supported to have maximum choice and control of their lives. People's needs were not always assessed adequately.
+ The home was not well managed, and the provider lacked oversight of quality standards.

We feel this is a clear example where families were at a loss about how they could make a service safer for their loved ones.

This is a clear example where families were at a loss about how they could make a service safer for their loved ones.

We were able to help by bringing the right people and organisations to the table in order that the concerns of relatives could be heard and acted upon. This resulted in ongoing action to address the concerns of residents and families and prompted the CQC to adjust its inspection plans.

We remain fully involved in the improvement of this service and have had many opportunities to shape the actions required by the provider to address the concerns. We have noticed genuine will on behalf of the provider to make changes and we hope this will lead to lasting change.

It is Important to note that the CQC report includes information that the provider took immediate action to address some of the concerns identified. These included taking a voluntary suspension on admitting any further people into the home and increasing the staffing numbers.

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 those that have taken place within east region local Healthwatch network meetings and also on the Facebook Workplace social media network.

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.

As an active user of the Healthwatch CiviCRM database, anonymised information about our signposting enquiries (page 76) is shared with Healthwatch England. This helps it to assess common enquiries and issues raised by people using services in England. This information is used as evidence to inform national reports, briefings and network priorities.

A chance to showcase our work with colleagues across England

Each year, Healthwatch England hosts a national conference for all 152 local Healthwatch in England. It's a chance for our national network to come together to showcase work and to share ideas about shaping local services.

This year, our work exploring the mental health and emotional wellbeing of young people in Suffolk was 'highly commended' at the conference for 'improving health and social care'. We were therefore nominated to showcase the work with colleagues from other local Healthwatch across the country.

Feedback was positive, with many people inspired to explore the wellbeing of young people in their local area.



The national conference coordinated by Healthwatch England was an opportunity to showcase our work with colleagues across the network.

Raising the profile of our network

Healthwatch England has an important role to influence national health and social care policy using information and data from local Healthwatch.

Here, current Secretary of State for Health and Social Care and local MP (Matt Hancock MP) holds a copy of our report about people's experiences of home care services in Suffolk after attending a national event facilitated by Healthwatch England.



NHS England's clinical review of access standards in A&E

Coordinated by Healthwatch England, NHS England commissioned local Healthwatch, including us, to inform a national debate about changes to performance targets within accident and emergency departments in England.

Existing access standards stipulate that at least 95 per cent of patients attending A&E should be admitted to hospital, transferred to another provider, or discharged within four hours. The purpose of the research has not been to argue for or against replacing the current four-hour target, but to inform the ongoing debate.

Six local Healthwatch led on site visits to interview patients and their family or carers, using an agreed nationally consistent topic guide. The national report, including our local insights, was published in February 2020 and submitted to NHS England.

The report featured 330 patient interviews. Additionally, we analysed 6,000 free text comments gathered through the Friends and Family Test to contextualise the national findings. You can read more about this project, which was inspired by our local work with the West Suffolk NHS Foundation Trust (West Suffolk Hospital), on page 46.

The Health & Wellbeing Board

We have a statutory seat on the Suffolk Health & Wellbeing Board (H&WB), 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 of 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 H&WB

representative with intelligence they can use to be an effective influence for local people. Whenever possible, we take the opportunity to share relevant insights with the Board, gathered from our Feedback Centre or from research we conduct.

In 2019/20, we actively and substantively contributed towards the development of the 2019-24 Suffolk & North East Essex Integrated Care System Five Year Strategy, and the 2019-2024 Norfolk & Waveney System Plan for Health and Care. In addition, we reported on our evaluation of a west Suffolk Neighbourhood Nursing and Care Team (Buurtzorg Inspired) Test and Learn, part of a broader report by The King's Fund.

2019/20 was also the first time a major local Public Health report (Suffolk Through a Child's Eyes) had strongly featured Healthwatch Suffolk intelligence and data. The Report recognises our contribution in this way: "We would like to thank Healthwatch Suffolk who produced the 'My Health, Our Future' project, which has influenced this report".

The January 2020 Board meeting involved a Healthwatch Suffolk led submission and proposal on Co-production. The proposal invited the Board Members, as influential leaders, and their respective organisations, to consider enabling a co-production culture to thrive across Suffolk and the two health and care systems that involve Essex and Norfolk. The Board was asked to:

+ Reflect on the steps that have been taken to model and support the coproduction of services, and to identify additional measures the Leaders on the Board and their respective services can positively take;
+ Ensure the Senior Leadership in its members' organisations model and express a culture of truly valuing people's lived experience and their client's knowledge and skills when developing, commissioning, delivering and evaluating services; and
+ Participate in a co-produced half day workshop that shall be facilitated by Healthwatch Suffolk in March 2020, within which there will be the opportunity to hear from people about their experience of participating in co-production and to discuss together what it is and how to do it well.

All recommendations were unanimously agreed. These recommendations have since been delayed due to the coronavirus pandemic and will instead be reconsidered as part of the county's recovery plans.



This year, a major Public Health report ('Suffolk Through a Child's Eyes') strongly featured Healthwatch Suffolk intelligence and data gathered as part of our 'My Health, Our Future' project.

The Suffolk Health Scrutiny Committee

Suffolk County Council is required to have a Health and Oversight Scrutiny Committee (HOSC) made up of local county, district and borough 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.

During 2019-20, Healthwatch Suffolk contributed to each of HOSC's scrutinies, inclusive of Integrating Health & Social Care Services, Implementing the Mental Health and Emotional Wellbeing Strategies for East and West Suffolk and Norfolk and Waveney 2019-29, and the provision of Non-Emergency Patient Transport Services The Home Care Procurement discussion allowed the Committee an opportunity to consider and comment on the future arrangements for the delivery of domiciliary care services in Suffolk for a contractual period of five to ten years.

Our 2018 report significantly influenced the Council in its revised approach to procuring domiciliary care services in Suffolk, having itself been presented to HOSC in 2018. Home Care services will in future be evaluated by Healthwatch Suffolk, both in terms of service user/carer satisfaction, but also in terms of provider experience. Such surveys and workshops will be conducted annually.

The pandemic has understandably delayed the first such evaluation.



'My Care at Home'

Our 2018 report about home care services continues to influence the commissioning and scrutiny of these services. In 2019/20, we agreed to independently evaluate people's experiences of the new home care service contracts on an annual basis.

Coronavirus has delayed this work, however our intention is that this work should progress with Suffolk County Council within the next financial year, ensuring the voice of service users is heard and able to influence the quality of home care provision in the county.

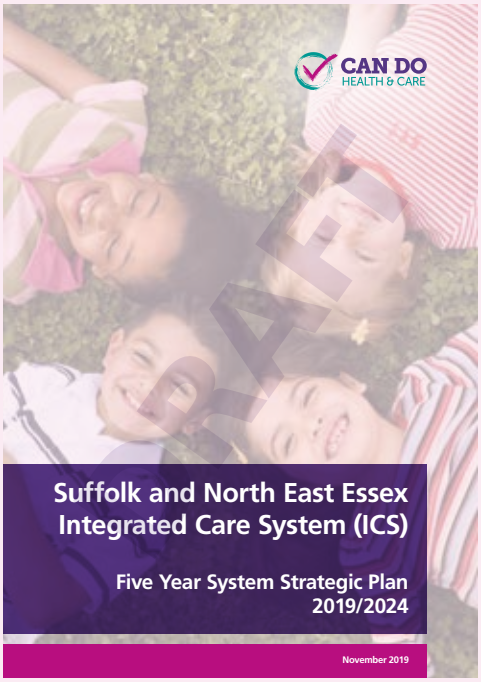
> As Chairman of the Suffolk Health Scrutiny Committee and Joint Chair of the Joint (Essex and Suffolk) Committee, I would like to make a statement in support of the valuable work that Healthwatch Suffolk performs on behalf of patients, residents and care providers. The evidence provided by Healthwatch at scrutiny committee meetings has been invaluable in enabling members to understand viewpoints that otherwise we would find difficult, given our limited capacity to get 'below the surface' of things ourselves. Healthwatch prepares well researched, objective and reliable documentation about issues experienced by Suffolk residents on a wide range of topics and is an essential part of the process by which effective public scrutiny is conducted.
>
> **- Cllr. Jessica Fleming (Chairman, Suffolk Health Scrutiny Committee)**

Integrated Care Systems

There are two Sustainability and Transformation Partnerships (STPs) that cover Suffolk and these are Suffolk and North East Essex, now recognised as an Integrated Care System (ICS), and Norfolk and Waveney.

In Suffolk and North East Essex (SNEE), we have been involved strategically as a member of the Board from the outset. We are the advisory members of this ICS on engagement and co-production, in partnership with our neighbours Healthwatch Essex, and indeed now have a funded role to support the ICS in its engagement endeavours and commitments. Healthwatch Norfolk is the lead for Norfolk and Waveney STP, though we do have limited involvement on some communication and engagement work concerning Suffolk residents.

The SNEE Board membership is comprised of many people responsible for leading our local NHS and care services and includes representatives of statutory/public and Voluntary Community and Social Enterprise (VCSE) organisations. Each meeting begins with a themed presentation and discussion. That means we are often able to provide intelligence to shape and inform discussions.



As a member of the Board, we were able to influence and contribute to the draft SNEE ICS Five Year System Strategic Plan 2019-24.

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 co-production on any plans for changes to the way services are provided in our county.

As a local Healthwatch in 2019-20 we were offered the unique opportunity of writing the chapters concerning Engagement and Co-production for SNEE's five year plan, with support from our Essex colleagues. This is an indication of the trusted working relationship between this ICS and its two local Healthwatch.

Discussions by the Board have focused 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, homelessness, inequalities 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. This has led to surveying projects such as that concerning local Maternity Voices Partnerships, to record people's experiences of changing maternity services (see page 50).

> *"Healthwatch Suffolk are key partners in Suffolk and North East Essex ICS providing system leadership in key areas including public engagement and co-production, working with colleagues at Healthwatch Essex. During COVID-19 they have been proactive in enabling the system to continue to listen to the experiences of people and families through online surveys, collaboration with other VCSE leaders and contributing a patient and public perspective to tactical forums with those leading the local emergency response."*
>
> **- Professor William Pope (Chairman, Suffolk & North East Essex Integrated Care System)**

SNEE ICS Engagement

In 2019/20, we secured a funded role to support the SNEE ICS in its engagement endeavours and commitments. From October 2019, our Integrated Care Services Public Engagement Officers carried out a series of engagement with the public on matters of interest to the ICS and in alignment with SNEE ICS priorities. This has included:

+ Talking to patients visiting the West Suffolk NHS Foundation Trust and East Suffolk and North Essex NHS Foundation Trust (Ipswich Hospital site) about their experiences of using Non-Emergency Patient Transport services (NEPT). Our evidence was also considered by the Suffolk Health Scrutiny Committee (see page 67).
+ Involvement in the very early stages of the Patient Safety Incident Response Framework; a process through which providers should respond to patient safety incidents and how and when a patient safety investigation should be conducted.
+ Engaging patients who use diabetes services within the ICS footprint. This included a visit to the Ipswich Hospital Diabetes Services User Group who shared experiences on their continual care, and issues faced in the day-to-day management of diabetes.
+ Listening to views and experiences of accessing cancer services in Suffolk and North Essex, including:
    + developing contacts with Cancer Research UK to reach people for their views and to share information and insights.
    + Attending a wellbeing event hosted by the John Le Vay Cancer Support & Information Centre (based at Ipswich Hospital) along with around 70 patients and family members.
    + Visiting the Stowmarket Cancer Group to talk about people's experiences of local support.



Suffolk Voluntary & Strategic Partnership

VASP

The Suffolk Voluntary & Strategic Partnership (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.

We facilitate the successful delivery of the VASP network by employing the part-time Coordinator and providing support with the administration of finances and office space. Furthermore, the Chair role for the Strategic VASP is being covered by our Community Development Manager.

There are seven Locality VASP groups, each coordinated by a volunteer Chair. They cover the areas of Haverhill, Sudbury, Bury St. Edmunds and Forest Heath, Mid-Suffolk, Ipswich, Woodbridge, Lowestoft and Waveney. Local VASP networks are key forums for the local exchange of information about wellbeing initiatives.

The Strategic VASP group, which is intended for people who have a countywide strategic role, meets quarterly. These meetings are preceded by a VASP Chairs meeting, enabling all local Chairs to flag and discuss matters for consideration at countywide scale.

The number of people participating in the Suffolk VASP has continued to increase. More than **980** people are now connected with VASP activity, this includes over **300** people within the Strategic VASP group.

All VASP networks enable people to discuss the real-life issues faced by people in different parts of the county. Services and groups find that the VASP network is an effective means through which they can promote local support and how people can access it. This helps the wider community to know what support is available and to participate in the co-production of services.

In a survey about the VASP, 108 people said...

100%

VASP provides useful information about mental health.

VASP is a useful network **(99%)**.

"Great networking, up to date information, **groups which are not able to advertise well due to size, location or resources are really well represented**..."

> So many charities and organisations that I am able to share with my customers and there has been training events that **I have attended which I would never have known about if not for Suffolk VASP.**

> Networking in this way is invaluable in supporting some of the most vulnerable people in our communities. Those with complex needs require multiple organisations to support them and **VASP provides a unique opportunity for several organisations to work together** towards a common goal.

In addition, the VASP provides important opportunities for:

- **Peer support –** Helping small organisations to groups to draw on the support, experience and knowledge of partners.
- **Feedback on draft strategies, plans and policy changes -** For example, the network has promoted opportunities to inform commissioning intentions related to children and young people and mental health crisis care. It has also coordinated feedback to the Public Health Suffolk Suicide Prevention Strategy.
- **Challenge local care -** The network brings together many people with an interest in local mental health and wellbeing support. Service leaders often attend VASP groups and this is an opportunity for people to challenge the delivery of care and support within a safe environment.
- **Escalation -** The VASP has the necessary connections with us and other members of the strategic group to escalate issues for wider debate or action where necessary.

VASP during coronavirus outbreak

The VASP has been an important forum for sharing information about changes to support. This includes the promotion of new services that have been so vital to our local communities under COVID-19 lockdown restrictions.

Information is received by our VASP coordinator on a daily basis from a diverse range of voluntary and statutory services. This is then shared with people signed up to receive updates from the VASP on a regular basis.

Though COVID-19 has prevented locality VASP networks from meeting in person, a number have successfully coordinated online activity to ensure people have access to important local updates about the virus and how services have been changing.

Working to improve complaints management

Our Suffolk Complaint Managers Network continues to provide a safe and useful space for Complaint Managers within Suffolk to share challenges and best practice.

The network has now expanded to include representation from north east Essex. In addition to NHS and local authority organisations attending, we welcome managers from the Suffolk GP Federation, our local hospices and also our local advocacy provider (Total Voice Suffolk).

The meeting in May was held during Mental Health Awareness Week. Sue Gray (Workplace Wellbeing Trainer at Suffolk Mind) attended to talk to the network about the Suffolk Needs Met approach to improving mental health and how managers could apply it within their workplace.

In general discussion, data protection (GDPR) and consent has been discussed as well as tips when reviewing a complaints process. We were able to share learning from the report by BSC Multicultural Services completed as part of our Small Grants Scheme (in association with Suffolk Coalition of Disabled People), including the key message that people from ethnic communities do not know how to complain about services.

In November, we welcomed local Care Quality Commission (CQC) Inspectors for primary care, hospitals and adult social care. As a part of its regulation of services, CQC will consider providers' complaints procedures and this includes the sharing of learning as a result of any complaints. It was therefore important that complaints managers should understand more about how CQC uses this information.

Feedback and complaints help CQC to determine the quality of care being provided and, of course, this is where Healthwatch also has an integral role. During discussion, the Norfolk and Suffolk NHS Foundation Trust was able to share learning from its efforts to co-produce a revised complaints process with service users, carers and staff.

Our network is a member of the National NHS Complaint Managers Forum. This has led to useful information sharing across borders. For example, we were able to contact the network about an enquiry received from Mid Cheshire Hospitals NHS Foundation Trust, asking about the recording of complaint meetings. West Suffolk NHS Foundation Trust responded with helpful suggestions about how the Trust could implement changes that would support better communication with patients and carers.

> *"Healthwatch Suffolk hosts the Suffolk Complaints Managers Network. The network provides an opportunity for complaint managers across Suffolk to meet and discuss best practice as well as supporting each other with the challenges faced in managing complaints.*
>
> *"The meetings also feature guest speakers and at the November meeting representatives from the Care Quality Commission (CQC) provided an informative presentation on how the CQC monitor services in England including Primary Care and Hospitals."*
>
> **- Heather Barker (Complaints & Enquiries Support Officer, NHS Norfolk and Waveney Clinical Commissioning Group)**


Guided by you.
There's a seat with our name on it at over
100 strategic forums and networks. We use
evidence from you to shape & inform decision
making at all of them.

Partnership agreements



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 **37** partnership agreements with organisations across Suffolk. We look forward to working closely with all of the organisations in 2020/21 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.healthwatchsuffolk.co.uk/about-us/our-partnerships/

> *"4YP is very happy to be a partner with Health Watch Suffolk. We have an excellent information sharing relationship and have benefited from the insight and contemporary awareness of their independent research, which we have used in funding bids. The regular meetings for professionals and involved partners to attend and share information are also very important for helping the Suffolk services develop appropriately."*
>
> **- Tibbs Pinter (Chief Executive Officer, 4YP)**

Some more messages from our partners and stakeholders

"It has been a privilege to work alongside and in partnership with Healthwatch - such a creative organisation where service users are at the core of driving change. A responsive and inclusive philosophy permeates all areas of Healthwatch practice and relationships, leaving partners enthused and motivated to drive change further.

Andy and the team clearly love this philosophy and have been a true pleasure to work alongside. The team are always willing to engage and take every opportunity to jointly plan and mutually support and learn from each other. I can undoubtedly say that this is a relaxed and positive working relationship, where human qualities are the heart of collaboration, and I feel privileged to be part of establishing such a creative partnership."

- Codrutza Oros-Marsh (Head of Quality, Engagement and Professional Development, Suffolk County Council ACS and CYP services)

"Healthwatch Suffolk is a dedicated and passionate organisation working hard for the people of Suffolk and we are very proud to be a long standing partner.

"Feeling comfortable that they are getting the best care possible, and make their voices heard if they are not, is something that matters hugely to the people we see on our Coffee Caravan visits. It is reassuring for them to know that Healthwatch Suffolk work on their behalf to hold healthcare providers to account and of course to praise when deserved too.

"Healthwatch Suffolk are team players and knowing they work with so many other organisations means we can be sure they are able to reach as many people as possible. This again helps us to reassure our visitors that it is indeed worth their while to make their voices heard. For those that can access it, their website is clear, informative and very user friendly, a necessity for those less confident with IT and the internet.

"Healthwatch Suffolk is part of our new Coffee And Friends Events (c-a-f-e) network and this will help even more Suffolk residents be part of shaping the services that matter to them."

- Ann Osborn (Chief Executive, Rural Coffee Caravan)

"ESNEFT works very closely with Healthwatch Suffolk. As a Trust, it's essential for us to hear and importantly to listen to the voice of our patients, carers and the communities we serve about how we provide care every day in Ipswich and east Suffolk across our community and hospital services. Healthwatch Suffolk supports us to do this. By flagging up queries and concerns, running inclusive online surveys, completing detailed analysis of specific service areas and maintaining close contact with our villages and towns, Healthwatch Suffolk provides the essential voice we need to support our Trust in this endeavour. I particularly welcome the Healthwatch team's proactive approach and their expert knowledge as we work together to identify solutions and hear the voice of our patients on specific challenges or problems. Over the last year, their advice and guidance around a public consultation on orthopaedic care has been particularly important."

- Rebecca Driver (Director of Communications and Engagement, East Suffolk and North Essex NHS Foundation Trust)

Helping you to find the answers.

Information & Signposting.

We have a role to provide information and signposting to the public about accessing health, care and wellbeing support.

In this section, we have outlined what our service is and provided examples that demonstrate how we can help people to find local support.

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.

We have supported more than...



callers to find local information & support

This year, our staff have supported 160 people to find information about, or to access support from a variety of services. We have also shared information with at least 500 people at over 200 events, meetings or activities.

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. 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.

This year, more than ever, we have heard from people struggling to access NHS dental care. This has been compounded by the coronavirus pandemic at the end of the financial year. Contacts include questions about how to challenge problems with treatment, registration or charging and how to find or register with a new practice.

In total, our teams have directed people to approaching 70 separate organisations or groups and networks. This includes local charities, social enterprises, community groups and statutory services.

People talk to us 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.



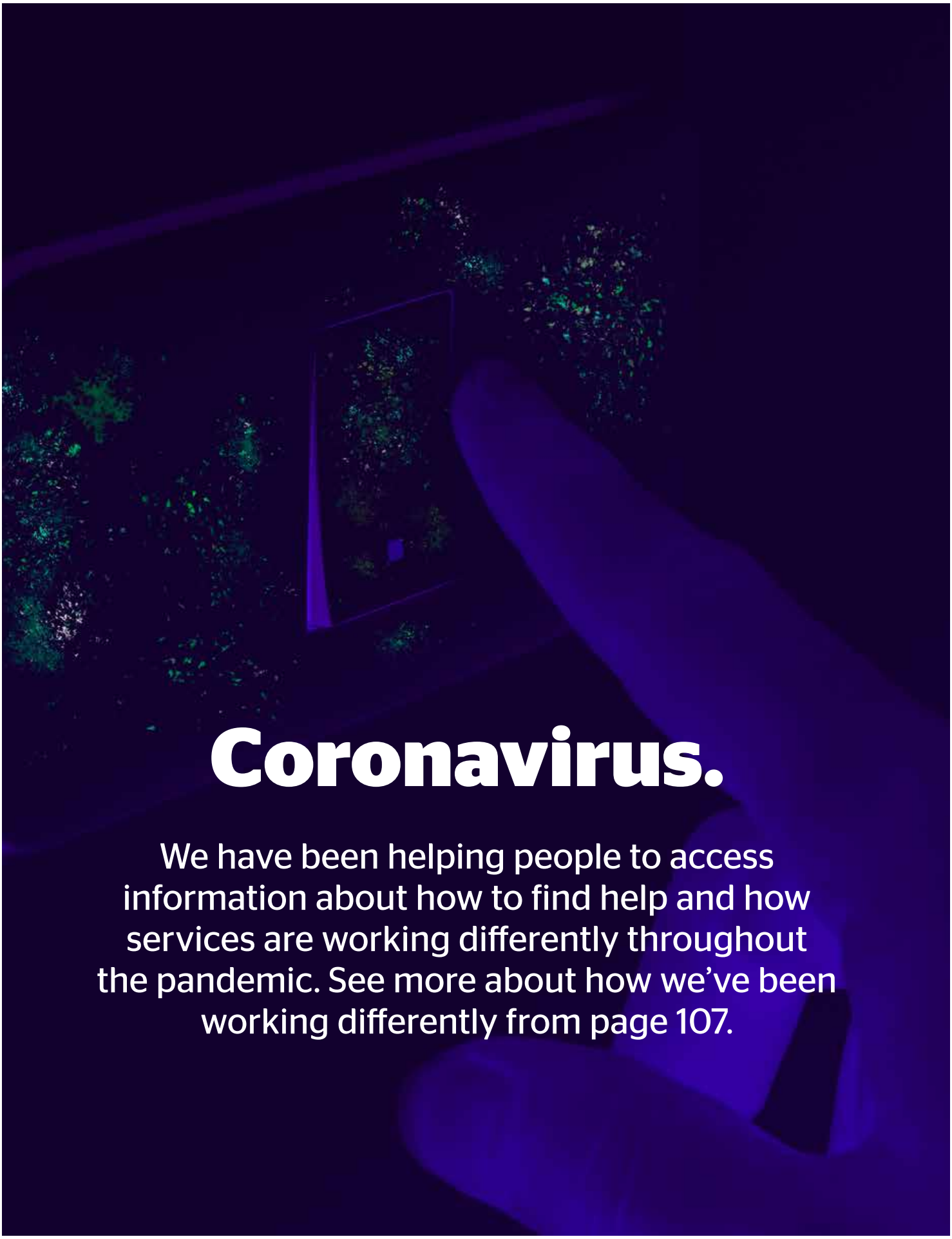
How to make a safeguarding referral to Suffolk County Council.



How to access mental health and emotional wellbeing support.



Access to dental care and how to complain about treatment.



Coronavirus.

We have been helping people to access information about how to find help and how services are working differently throughout the pandemic. See more about how we've been working differently from page 107.

Case examples...

Ms W has a rare disease. She contacted us because she wanted to challenge a hospital on its progress toward meeting the requirements of the "NHS England Implementation Plan for Rare Diseases". Her contact with the Trust had not led to useful conversations and she was concerned about the impact on patients.

We made some enquiries. The Medical Director of the hospital said they would raise this matter with consultants and the relevant clinical lead so that a response could be offered to Ms W. They also committed to ensuring all clinicians are aware of the specialist commissioning plan for rare diseases and what this means with relevance to their practice.





Mrs P has a physical disability. She contacted us because she wanted to know if there is a physiotherapy service available in Suffolk to support her with a specific womens health issue. She had visited the GP, but there had been an error with administration that meant there would be a significant delay in seeing a consultant. She wanted to be pro-active by starting some exercises under professional guidance.

We signposted Mrs P to Allied Health Professionals for self-referral to physiotherapy services, which includes specialist women's health advice (e.g. advice on an individualised pelvic floor muscle exercise programme). This ensured she would have access to treatment in advance of her contact with a consultant.

Mr D is a vulnerable person known to services. Based on the information shared with us by his family, we became increasingly concerned about Mr D's welfare. This included that they were not being adequately supported by statutory or community based organisations because of the coronavirus lockdown. This situation was compounded by the rurality of his location and isolation.

We made a safeguarding referral and were subsequently advised that action was being taken to support this person. We also signposted the family to various support organisations who may be able to offer Mr D specific advice or support in the future.



Helping young people to find support

From our 'My Health, Our Future' project, we know that young people do not always know where to find support for their mental health or emotional wellbeing. This is particularly true of young people who report self-harming.

That is why we produced a signposting postcard that includes quick and easy-to-read information about sources of help. It is freely available on our website and has been provided in hard copy format to many thousands of young people that have participated in our 'My Health, Our Future' project.

The card has 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).

Helping families to find support during the coronavirus pandemic

We would like to say a big thank you to Suffolk Parent Carer Network, which has distributed more than **1,000** of our signposting cards to local families as a part of its coronavirus support packs.

This means that many young people will have had access to the information they need if they have been struggling with their mental health or emotional wellbeing during the coronavirus lockdown.

The card includes information about NHS funded support, details of charities offering support and national digital services.



The **Emotional Wellbeing Hub** (0345 600 2090) provides support to anyone under 25 years old, who is concerned about their mental health or emotional wellbeing in east and west Suffolk - Visit thesource.me.uk/hub. If you live in Great Yarmouth & Waveney, or Norfolk, you can contact **Point 1** (0800 977 4077) - Visit point-1.org.uk. Information and advice for young people is also available on **The Source** website (www.thesource.me.uk/wellbeing).

Information sharing in local communities

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 **552** people at over **235** 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 (36 activities)
- Sharing details of local support organisations and networks (16 activities)
- Sharing information about accessing local NHS or care services (39 activities)
- Telling people about local community groups and networks (8 activities)
- Sharing details of local consultations (three activities)

Helping people to understand how services have changed because of coronavirus, through prompt and accurate information provision, has been a particularly crucial part of our role during pandemic (see more from page 107).



Coronavirus Catch-ups

With Andy...

Our Chief Executive has been recording interviews with prominent health, care and community leaders during the coronavirus pandemic.

The aim is to encourage leaders to be more visible and to promote discussion about the biggest challenges they have faced since the outbreak began. It is a chance for them to explain how and why things are changing, what people should expect from services and to explore important learning for the future.

Interviews have included Dr Ed Garratt (Chief Officer for three local Clinical Commissioning Groups) and Nick Hulme (Chief Executive of East Suffolk and North Essex NHS Foundation Trust).

See more on page 114.



Contact us to get the information you need

If you have a query about a health or social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

Website: www.healthwatchsuffolk.co.uk/signposting

Telephone: 0800 448 8234 (Freephone)

Email: info@healthwatchsuffolk.co.uk


Finding help.
Navigating local services can be confusing. We're helping people to find the information and support they need in Suffolk. Call us on 0800 448 8234 (Freephone).

Co-production.

Co-production in Suffolk

Our co-production team has been working with people and organisations in Suffolk to enhance local understanding of what it means to co-produce and to develop resources that can support people to do it.

In this section, we'll define co-production and demonstrate how our work is helping to set the foundations for people, providers and commissioners to plan local care together.



Our ambition...

In our report last year, we described how we had started to make co-production a "must do" in the county and shared information about our intentions to develop new resources, share good practice and build a hub of information on our website.

That work has continued at pace this year, driven by our part-time Co-production Coordinator and our employment of a Co-production Facilitator in July 2019.

Ultimately, 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.

Co-production can be defined as:

"A meeting of minds coming together to find a shared solution. The approach is built on the principle that those who use a service are best placed to help design it. It means aspiring to being equal partners and co-creators."

- Definition adapted from that produced by the Social Care Institute for Excellence

We have been aided by existing local experience and external national resources to develop a deeper understanding of what co-production is, what it means to local people and how to do it well.

By working with local people and partner organisations, a common desire to have all services co-produced with people in Suffolk is clear.

Our co-production team has worked with people, organisations and networks across Suffolk to develop a recipe for co-production. Read more on page 90.



The team has been working hard to get people and professionals thinking about co-production in Suffolk. Here's some of the things they have been doing throughout the year.

Information, communication & sign-ups

+ The team has continued to encourage people to sign-up for news about co-production in Suffolk. **115** people now receive updates from us, including co-production resources, good practice examples, opportunities to be involved in local service design and the chance to be a part of the conversation.
+ We have increased the amount of content available on our dedicated website pages. It now features news, updates, local and national resources, good practice examples and much more. You can access the page by visiting www.healthwatchsuffolk.co.uk/co-production.

Events

Two events were held to start the conversation and to develop a set of core local principles that encapsulate what it means to people in our county.

+ 'A Blank Canvas' was held in July 2019. The aim was to introduce our team and to open the conversation.

  Attended by 57 people, our event invited participants to open the conversation by sharing their hopes and concerns of co-production in Suffolk. Both members of the public and organisation representatives provided positive and constructive ideas, building the foundations for future work.

  "Strengthening the service user and carer voice is a responsibility of us all." **- 'A Blank Canvas' event participant**

+ Our second event 'Cooking Up Co-production' was held in December 2019, and was co-produced with volunteers. They took forward the aspirations and actions from the previous event.

  A local 'Recipe for Co-production' began to take shape. Using the theme of cooking, the principles that form the foundations of co-production in action were discussed.

> *"Meaningful co-production is crucial in ensuring that policy and practice reflects the everyday lives of individuals within our communities. The work which Healthwatch Suffolk are engaging in is vital in ensuring that current health provision meets the needs of services users and the wider public by enabling Suffolk voices to shape change."*
>
> **- Katie Tyrrell (Research Associate, University of Suffolk)**



Join our mailing list...

We have continued to increase the number of people signed up to hear about co-production in Suffolk. There are now more than **100** people on the list!

Join now: www.healthwatchsuffolk.co.uk/co-production



'Cooking Up Co-production' - Our event

An excellent mix of people with different backgrounds and perspectives on using health and care services attended our event in Haverhill to talk about all things co-production in Suffolk.

The theme of cooking, which saw the event speakers wearing chef hats and aprons, inspired many to get involved and have a voice in how services and service users can work together in the future. This included, what co-production means to them and what principles and values we should agree to follow when co-producing something in the county.

We would like to thank our speakers on the day (Student Life and the Suffolk Children and Young People's Engagement Hub), who provided examples of how co-production is already happening, how it is successful, the challenges that are faced, and the positive impacts.

Julia Ilott (Engagement Hub Manager) spoke about the Children in Care Council who support Suffolk County Council to deliver services and support that are appropriate for children in care. We caught up with Julia after the event and you can see what she had to say about why co-production is important on our YouTube channel.

You can also find our videos with Tommy and Rachel from Student Life, in which they describe the work they do engage young people in a discussion about mental health, to highlight critical issues (e.g. self-harm) and to encourage students to be supportive of each other.



We caught up with Julia Ilott (Engagement Hub Manager) after the event to ask her why co-production with children in care has been so important.

Making it visual!

At the 'Cooking Up Co-production' event, we aimed to understand the principles and values that underpin what we do when co-producing something. The two activities during this event helped us to create the recipe to follow when organisations and people who use services want to work together.

The Recipe for Co-production, is comprised of six 'ingredients'. They are the agreed principles of co-production; Accessibility, Trust, Equality, Mutual benefit, Evaluation and Diversity. The recipe is available as a printed card and PDF download from our website (see page 90).

The art piece

We have commissioned local artist Rebecca Osborne to encapsulate our journey of co-production in Suffolk.

The brief was to combine the creative ideas of others and the theme of cooking from our event in December 2019, with our agreed 'recipe' comprised of the local principles that underpin co-production.

The final piece (see right) brings all of those ideas into one place. It shows people working together to co-produce a recipe comprised of the key principles and ideas people have told us must underpin all co-production in local service design.

With thanks to every person that contributed ideas toward the development of this artwork or attended our events to agree the recipe for co-production in Suffolk.




Culture
STRUCTURE
PRACTICE
Reviews
EVALUATION
TRUST
DIVERSITY
RECIPROCITY
INGREDIENTS
METHOD
Share
Accessible
Mutual Benefit
Equal Partners
Co-production

Development of local resources

Alongside the Recipe for Co-production (see below) and co-production art piece, other resources are also being created. They include:

+ A toolkit, acting as an easy-to-understand guide for why and how to do co-production.
+ An academic literature review, to present the existing evidence of what value co-producing has across health and social care.
+ A collection of local good practice examples.
+ A shared local agreement about paying people for their involvement in co-production, which developed a guidance about how payments could impact people's benefits.
+ A workshop learning tool about co-production, created in partnership with Norfolk and Suffolk NHS Foundation Trust (NSFT), co-designed with people to be delivered across the sector, the county and beyond. We held a practice training session for improvement and feedback, and to co-produce the delivery of this useful resource.

Supporting others

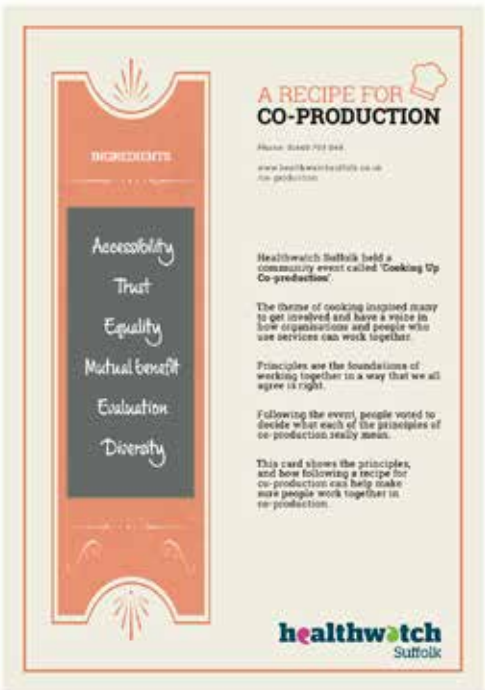
Throughout the year, the team has had a number of opportunities to support people working in our local health and care system and to raise awareness about the value of co-producing local services. This has included:

+ The Co-production Team had the chance to discuss co-production at the Suffolk Health and Wellbeing Board in January 2020.



Get your copy of our recipe for co-production in Suffolk!

The final recipe for co-production (see below) is also available as a printed card and PDF download from our website. Our website also includes more information about how this recipe was developed and agreed with local people.





"The co-production advice and support from Healthwatch has been invaluable. In contributing to our commitment at NSFT to work together with our partners, experts by experience and carers, their input has been welcomed and valued by all involved.

"On a personal note, I found attending a co-production workshop facilitated by Healthwatch stimulating and exciting in the potential of embedding co-production in our Mental health services. The workshop was very well facilitated, and the programme thoughtfully compiled, it was very inclusive, and I very much gained from the experience both professionally and personally.

"I look forward to continuing to work closely with Healthwatch, and value the opportunity to have an independent eye on the quality of our service delivery."

- Eddie Cross (People Participation Lead, Norfolk and Suffolk NHS Foundation Trust)

Our proposal invited the Board Members, as influential leaders, and their respective organisations, to consider enabling a co-production culture to thrive across Suffolk and the two health and care systems that involve Essex and Norfolk. You can read more about this from page 65.

+ We participated in the Suffolk and North East Essex Integrated Care System 'Co-Production Leads workshop' to be part of the vision that all services across the Suffolk and North East Essex Integrated Care System are co-produced.

  Working with Healthwatch Essex, our joint knowledge about people in our communities, means the ICS will utilise our co-production resource to meet and improve a wide range of health and care needs.

+ We encourage external organisations to work together with the people who use their services. We have provided advice, guidance and practical support across the county.

  For example, we have supported the local NHS Wheelchair Service to make improvements to their patient feedback system, by providing advice and assistance to facilitate a session with Suffolk Axis.

"The last 12 months of co-production has enabled us to work closer with all our partners in designing a wheelchair service which meets the needs of our end users. By involving them, listening to their needs and working through solution has helped us plan for what the future of the service requires."

- Laura Rawlings (Transformation Manager Wheelchair Services, West Suffolk NHS Foundation Trust)





"I thoroughly enjoyed being involved with the co-production of the Healthwatch Suffolk 2019 AGM. As a new member of the board of directors, it allowed me to engage with staff members at Healthwatch Suffolk and understand their roles. Furthermore, working alongside other young people allowed the AGM to truly focus on what mattered to us. I'm really excited to take the learning from the AGM forward to create a Youthwatch Suffolk and co-produce this with more young people."

- Charlotte Brown (Healthwatch Suffolk Director)

Co-production within our own organisation

Having an in-house co-production team ensures that we consider the value of co-production within everything that we do. Here are some examples of how co-production has helped us to add value to our work and to engage people in a discussion about their local services.

+ **Our project exploring people's experiences of residential and nursing care ('What's it like?') -** In advance of the data collection phase of this project, we embarked on an extensive period of co-production with professionals, residents and relatives. The purpose was to make sure that we were asking about the things that mattered most to people and that our surveys were created with our intended sample in mind. A series of visits were organised to local residents and family meetings within local homes and the feedback was used to adapt and improve the survey design.

+ **Our AGM -** We asked a group of young people to help us to plan our AGM 2019, which was to be based upon the theme of young people's wellbeing. They shared ideas about what was important to them in advance and suggested speakers for the day. They even took to the microphone and participated in the event themselves.

  The result was our most varied and creative AGM yet, with a range of performances and presentations by local young people. A discussion was held about the idea of a 'Youthwatch', and a vote decided that this should be explored further so that young people in Suffolk can have more of a say in the health and social care that they may need or can access (read more from page 98).

It has been an exciting year for co-production at Healthwatch Suffolk. We very much look forward to achieving more in the year 2020 – 2021 and building upon the foundation of collaborations we have gained so far.

Some more messages from our partners...

"The co-production work from the Healthwatch team has really taken this concept forward in Suffolk over the last 12 months by enhancing understanding with a wide variety of individuals and organisations. It has certainly helped me to encourage this way of working within the Mental Health and Emotional Wellbeing Focus Group, which I co-chair."

- Chris Hedges (Co-chair, Healthwatch Suffolk Mental Health and Emotional Wellbeing Focus Group)

"It has been great to work with the Healthwatch Suffolk co-production team since we were introduced in May 2019. As a Co-Production Lead working in an NHS Trust it is important for me to both support, and learn from, other champions of co-production. It's great to see the team working hard to bring as many people as possible into the conversation about what co-production is and how it works in real life scenarios.

"I attended the Blank Canvas event in July 2019 and also the Co-Production Training Day that was being beta-tested in October 2019. Both of these events provided great opportunities for me to learn from others about their experience of co-production, and allowed me to share some examples of scenarios that I had experienced within my role within the NHS. The recent Recipe for Co-production has been a great analogy to remind me that it takes many ingredients to make a good final product! I look forward to continuing to work with the Healthwatch Suffolk co-production team!"

- Sarah Kilby (Co Production Lead, Cambridgeshire Community Services)

"The network of Disability Forums in Suffolk continues to work with Healthwatch Suffolk to ensure that the views and concerns of disabled people form part of their work.

"Of particular note has been the co-production between wheelchair users, Healthwatch Suffolk, and professionals involved in delivering the wheelchair service to ensure that wheelchair users have a say in the service provided to them.

"This has been beneficial to all concerned and has ensured that wheelchair users received a better and more timely service."

- Linda Hoggarth, Chair of Disability Forum for Suffolk



Volunteers and decision making.

Volunteering with us.

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

In this section, we outline how we have involved volunteers and other local people to help carry out our statutory activities.

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.

Volunteers have supported 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 have included:

+ 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.
+ We authorised **six** 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 **nine** Directors. In addition, there are **five** ex-officio (non-voting) members of our Board.



Ask us about opportunities to support our work

If you are interested in volunteering to improve health and social care services in Suffolk, please contact us. We may have the perfect role for you.

Telephone: 01449 703949

Email: info@healthwatchsuffolk.co.uk

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 2019/20 were:

Dr Tony Rollo	Chair
Andy Yacoub	Chief Executive
Charlotte Brown	Director
Nick Conn	Director (Resigned December 2019)
Elaine Aylott	Director
Brian England	Ex-Officio member (HR advisor)
Chris Hedges	Ex-Officio member
Sue Hughes	Ex-Officio member
Bal Kaur Howard	Director
Nigel Mann	Director
Ben Millar	Director
Jane Millar	Ex-Officio member
Steve Pitt	Director
Liz Whitby	Director
Liz Wood	Ex-Officio member

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.

A new independent Chair for Healthwatch Suffolk

This year, we announced that our long-standing Chair, and co-founder of Healthwatch Suffolk C.I.C. (Dr Tony Rollo) is retiring.

Tony has been a fantastic support for all of our staff and volunteers, offering a listening ear and excellent leadership of our Board throughout his tenure. He will remain a Director and will continue to represent us in several local health and care forums.

In light of this news, in January 2020, we advertised for the first independent Chair of Healthwatch Suffolk (£8,500 per annum remuneration). A number of candidates were considered but we were not able to appoint to the role.

The Chair of a local Healthwatch is a pivotal role with statutory related duties such as being our representative on the Suffolk Health and Wellbeing Board (see page 65). They will provide strategic guidance and will be required to represent our organisation (and therefore the public) in meetings and networks that exist across the Suffolk health and social care system. This will include, for example, those associated with Integrated Care Systems (see page 68) and other similar forums.

Unfortunately, the coronavirus lockdown has prevented us from launching a second recruitment drive for an independent Chair. In the meantime, Ben Millar and Sue Hughes have kindly stepped forward as interim Co-Chairs of the Board until such a time as it is possible to recruit to the role.

In this interim role, they will support our Chief Executive, oversee the second recruitment for an independent Chair of the Board and coordinate our Board meetings. They will ensure that business is conducted appropriately and that people have fair opportunity to share their views in meetings.

Our volunteers - Jane Millar & Chris Hedges



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 14).

Jane and Chris are ex-officio members of our Board of Directors and have also been our representative at a range of forums concerned with improving mental health services.

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.

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.

With their vital leadership, our MH&EW Focus Group has become an influential forum, dedicated to the betterment of mental health support for people across Suffolk.

"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."

- Jane Millar & Chris Hedges

Our volunteer - Charlotte Brown



Charlotte is a Director and our lead Board member for championing the voice of young people in our organisation.

She has worked in healthcare for the past six years and has experience in care of the elderly, managing long term conditions and dementia care.

During her time on the Board, Charlotte has often shared the perspective of the local NHS workforce and this has been of particular value during the coronavirus pandemic. She has also assisted our team to begin co-production with young people within our organisation.

"My first year as a director of Healthwatch Suffolk has benefited me greatly. It has allowed me to grow in confidence, advocate for people's health needs in Suffolk and meet others with shared interests. I am passionate about working with individuals to create health services which work for them, in turn allowing them to have the best health outcomes and my involvement in Healthwatch Suffolk lends itself perfectly to this. For me, two highlights of the year have been Healthwatch Suffolk's ability to adapt to the current pandemic and Youthwatch Suffolk.

"As with the rest of the world, Healthwatch Suffolk has had to rapidly adapt its services and functions in the past few months to work alongside the undeniably challenging circumstances that COVID-19 has produced. The team at Healthwatch Suffolk have certainly risen to this challenge, continuing to advocate for people's health needs in Suffolk, challenging providers and supporting local communities. This will certainly shape the Board of Director's approach and priorities for the future.

"During our AGM in 2019, myself and several other young people launched the concept of Youthwatch Suffolk. A great deal of support was offered and we have since had a successful planning meeting were many young people offered ideas, ground work and backing. I am really excited to be involved with Youthwatch Suffolk's continuing development alongside enhancing my own skills in leadership and co-production."

- Charlotte Brown

Dancers, dramas and more at our AGM

This year, our theme was children and young people. So we asked a small group of young people to help us with the arrangements and they did a brilliant job. They set out an interesting agenda for our audience, filled with engaging and inspiring guest speakers and performances.

Our Annual General Meeting 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 young people.

This year, the event started with an energetic performance by MRD Dance School (a dance group for children and young people in the Ipswich area).

After their dance, MRD took to the stage to talk about how dance is a positive outlet for them. For one member, MRD had helped her to build confidence and new social connections after she had been bullied in school. Her emotional talk was a stark reminder about why we have been working to improve support for young people both inside and outside of school.

Next up, we were pleased to welcome Student Life. We heard about its work to improve young people's wellbeing by encouraging participation in the production of a periodic lifestyle publication, teaching new skills (e.g. writing and photography) and training young students who want to become Mental Health Ambassadors in Mental Health First Aid England.

Our final guests for the day were from WASSUP. They are a group of young women (supported by Volunteering Matters) who raise awareness of domestic abuse, gang grooming and sexual violence within communities using powerful live drama.

We caught up with our speakers after the event and you can see what they had to say about young people's wellbeing on www.healthwatchsuffolk.co.uk/news/agm2019/









Attendees at the AGM took part in discussions about their priorities for children and young people's mental health. They told us that young people's voices and experiences must be heard where it matters.

We're hoping to take this forward by considering plans for a "Youthwatch", or young person's health and social care network.







Visiting services (Enter & 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.

St Elizabeth Hospice (May 2019)

We were invited to visit St Elizabeth Hospice at the invitation of its trustees. The visit was part of their overall inspection of the services being provided. This was our only Enter and View visit conducted in 2019/20.

The Trustees of the hospice met with our volunteers before the visit and agreed that a joint visit would be beneficial to learning and sharing.

> *"Enter and View has been a great way to view how care homes operate from the point of view of the service users and their families. I feel that the knowledge I have gained from the various homes and how they operate has enabled the team I have been in to offer suggestions for good practice that we have seen operating well elsewhere. In addition I feel the service users have enjoyed the opportunity to meet us and to know that we are there for them."*
>
> **- Sheila Warnes (Authorised Enter and View Volunteer)**

Our team were joined by three Hospice Trustees and the parties agreed in advance how the visit would be conducted. The findings of both have been incorporated into a single report.

We found that all staff were welcoming and friendly. Numerous members of the staff team have worked at the hospice for many years and this offers patients a stable and experienced staff team.

The manager and trustees were supportive of the visit, encouraging patients and staff to speak to our team. Staff were readily available for the patients and relatives and were seen to be caring and mindful of their needs. Both relatives, friends and patients spoke of their appreciation of the care and support they received.

A new approach

We have changed the way we use our powers to enter and view services. We will no longer operate a schedule of visits. Instead, we will use Enter and View as a tool to obtain feedback from people if other methods are likely to be ineffective.

For example, we might use this power if:

- We are requested to make a visit by partners (e.g. Care Quality Commission).
- We have asked for information from a provider because we have concerns about patient/carer feedback, but it has not responded.
- There is no other means to check that a service is providing good care.

We have made this change because we feel there are better ways to understand people's views. Quite simply, we find other methods of intelligence gathering to be more effective at achieving outcomes for the benefit of service users and carers in Suffolk.

For example, this year, we used our volunteer Authorised Representatives differently by enabling them to support our 'What's it like?' project (see page 43), exploring the views and experiences of people living within residential and nursing homes across the county.

Volunteers supported our Community Development Officers and Research Facilitators to visit local care and nursing homes across Suffolk. The purpose was to build better relationships with providers and to independently capture people's experiences within our survey for residents.

These visits, arranged with providers in advance, also meant that we could observe the care environment on an informal basis, to get a 'feel' for what it might be like to live within the service.

The success of the project means that we now have access to information that is of significant value to regulators and commissioners. We know that our data from the research has been used to influence provider improvement activity in the county (see page 56) and the outcome of CQC inspections.





Thank you.

We'd like to thank everyone that has dedicated their time to help us improve local NHS and social care services in 2019/20. We simply could not have made the same impact without you.

The money.

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	£541,559
Cost of sales	-£10,708
Gross surplus	£ 530,851
Administrative expenses	-£559,868 -£29,017
Other operating income	£63,370 £34,353
Interest receivable and similar income	£2,802
Surplus before taxation	£37,155

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.

Looking forward.

Coronavirus.

The COVID-19 outbreak took hold in March 2020 and has had significant ramifications for our local health, care and community sectors.

In this section, we outline how coronavirus has impacted upon our activity and how we are working differently to ensure people can influence the response to the pandemic in Suffolk.

At the start of the coronavirus lockdown, we outlined five new priorities. These were:

1. To help the NHS and social care services to provide information and advice about access to local care.
2. To promote and support community efforts to keep people safe and to limit the impact of social isolation.
3. To gather feedback from people about their experiences in relation to COVID-19. We want to understand how this crisis is having an impact on local care so that we can help local service leaders to adapt their plans.
4. To make sure vulnerable people and our diverse communities are not overlooked.
5. To consider how we can use our resources differently to support the Suffolk response.

The above priorities, which were informed by national advice from Healthwatch England, have guided our work throughout the pandemic and we are pleased to have delivered against each of them in a variety of ways. We have outlined some of these on the following pages.

Despite the restrictions, we have continued to deliver all of our core functions, including the provision of an information and signposting service. People have still been able to feedback to us about their experiences and we have still been able to carry out our research projects. Unfortunately, we have not been able to engage with people in local communities and our sub-groups have needed to take a break.

Engagement is a big part of what we do, so we have needed to explore new ways to connect with our communities. For example, we have spent time catching-up with our members, we have tried new digital means to engage with groups and networks and we are working much closer with like-minded organisations across the county to reach people for their views and experiences.

> *"We have experienced unprecedented times when it has been absolutely imperative that our health and social care systems are able to support the most vulnerable older people in Suffolk. There has been a huge amount of change within the system as a whole and I am pleased to see that Healthwatch Suffolk has risen to that challenge and continues to work alongside health and social care providers to protect the most vulnerable in our society."*
>
> **- Andrew Gardner (Chief Executive, Age UK Suffolk)**

Priorities 1 & 2 - Information, advice & supporting our communities

A pandemic of information overload!

In the early stages of the pandemic, there was a sudden influx of information (from both local and national sources) that required our input or interpretation.

With each passing day there seemed to be new guidance from the Government and from the NHS, new details about how NHS and care services were having to change and emerging resources to promote people's wellbeing under lockdown conditions.

Our role is to help people to understand how services are changing and what they should expect, promote appropriate use of services during the pandemic and to ensure people have access to validated resources that could help them to live well during the COVID-19 lockdown.

We quickly established a specific section on our website that is dedicated to sharing information about the impact of coronavirus. It includes:

+ Information about how local services have been working differently (e.g. mental health services, hospitals and social care.
+ Helpful information about what to do if you become well, including the latest information from the NHS and the Government..
+ Information about the response within our local communities, including new local services and community schemes.
+ Opportunities to provide feedback about services during the pandemic and to say thank you to local key workers.
+ Local and national resources to help people stay well at home and to manage their health and wellbeing under lockdown restrictions.
+ Information about how people can help and support local services to deliver care and support.

Our coronavirus information can be accessed by visiting:

www.healthwatchsuffolk.co.uk/coronavirus



Priority 3 - Gathering feedback

There has never been a more important time for people to share their experiences of using services. The speed of change within our local NHS and care services, including the way people can access care and support, meant that we needed to secure rapid feedback to shape the local response to this pandemic.

Importantly, traditional methods of engagement and gathering feedback have not been available to us under the coronavirus lockdown. Therefore, we needed to make people aware of how they could still share feedback using digital means and why it has been so important for people to do so.

We very quickly established three methods for people to share their experiences and we have promoted them widely across the system. These methods are as follows:

- **Promotion of our Feedback Centre** - People can find and share feedback about all health or social care services on www.healthwatchsuffolk.co.uk/services. Our feedback is moderated and 'themed' by our Information and Communication team at regular intervals. We make this information available to local decision makes at their request and incorporate the feedback into our briefings or reports.
- **'My Health, Our Future - At Home'** - Our wellbeing for children, young people, parents/guardians and education staff during the coronavirus lockdown. Read more about this on page 110.
- **Suffolk Coronavirus Experience Survey** - Our general survey for people to share their experiences of using services throughout the pandemic. Read more on page 112.

"Healthwatch are a vital part of the West Suffolk system and hold a clearly established and much appreciated role within our Alliance team. Their scope is not limited to the larger pieces of engagement work, where an experienced partner is essential to ensure that the voice of our population is able to play a role in delivery and commissioning decisions, such as #averydifferentconversation. They have had equal impact on the smaller conversations both internally and externally, in which they are able to confidentially challenge the all-too-familiar group think and ingrained behaviours of the statutory sector when they appear.

"During the pandemic Healthwatch's input into the daily system conversations has been invaluable. They have helped to ensure that the rapid changes made to services during this time, to protect and support our population, also contained feedback, observations and insight into their potential impact on the lives of individuals and their families. Working together to be able to maintain a focus on the whole person rather than individual service lines has been invaluable and will continue to be so as we move into recovery."

- Kate Vaughton (Director of Integration & Partnerships, NHS West Suffolk Clinical Commissioning Group)



'My Health, Our Future' is our project exploring the mental health and emotional wellbeing of children and young people across Suffolk (see page 34). We felt it was crucial to understand more about the impact of the coronavirus lockdown on families and school staff so we adapted our approach and launched this project.

'My Health, Our Future – At Home' has been a mental health and emotional wellbeing survey for young people, parents/guardians and education staff during the coronavirus lockdown.

The results will be used by people and organisations across Suffolk to help schools and local NHS and care leaders think about what is needed to support recovery from this pandemic.

Three surveys were launched. One for young people, one for parents, carers and guardians and one for education staff. They were shared widely on social media and also by local schools and other stakeholders.

Amongst a few other things, we asked people about how they were feeling, how their family was coping with the lockdown and how their experiences of accessing local services or support had changed.

In total, we heard from:

+ 2,572 young people (aged 11 – 19)
+ 1,058 parents/guardians or carers
+ 747 education staff

What's next?

Our findings have been shared with the people in charge of local services. Regular updates have been provided to the Suffolk and North East Essex Integrated Care System Board and various forums responsible for the planning and delivery of support for young people.

The aim is that the findings should be used to shape and inform the response to COVID-19 in Suffolk and to support the recovery after coronavirus restrictions have been lifted. Understanding how the virus has impacted on the wellbeing of our population is crucial if we are to put the right support in place to help our communities recover.

The findings are also available to schools to help them address pupil and staff wellbeing as their students return to education.

We are still working on the full analysis of everything people told us, however an interim results page with some early key insights is available to view on www.healthwatchsuffolk.co.uk/mhofahresults



Further to the launch of 'My Health, Our Future - At Home', we worked with the pilot Mental Health Support Teams (MHST) in Suffolk to adapt the survey so that it would be suitable for completion by children aged 6 - 11.

The aim is to understand more about what children think about going back to school and how they have found being at home during the coronavirus lockdown.

Children's thoughts, feelings and opinions will help local teachers, doctors and other professionals to put things in place that can support their wellbeing during coronavirus and afterwards.

The survey has been developed and trialled with the Mental Health Support Teams (MHST) in Suffolk, which will use the results to help schools they support promote wellbeing. This includes as young people return to school or start secondary education from feeder primary schools.

The MHST include a mix of mental health and wellbeing professionals including clinicians, emotional wellbeing practitioners, family support workers and education psychologists. The team provides support to children, young people and teachers across many schools in east and west Suffolk.

The survey has been promoted widely and remains open until the end of this school year. We have encouraged parents to complete the survey with their children to aid with their understanding of the questions, address any questions they may think about themselves or to support them emotionally. At the end of the survey, we signpost families to sources of information, help and support should they need it.

As with 'My Health, Our Future - At Home', our results from the Kids@Home survey will be made available to local primary school leaders and also leaders of our health and social care system. It is our hope that this will help people to think about how we can best encourage children to return to school and how we can support them so that they feel comfortable within the school environment.

Look out for the results of this survey on www.healthwatchsuffolk.co.uk/mhofahresults



In the early stages of the pandemic, and as lockdown measures were introduced, we quickly identified that we would not be able to continue to engage people within our local communities. That was a problem because much of our feedback is obtained by our Community Development Team (see page 19), who visit local communities to talk to people about their experiences of using services.

With so many changes happening across our local health and social care services, our health and care 'system' needed rapid feedback to understand more about how well they are working for local people. That is why we launched the Suffolk COVID-19 Experience Survey.

The aim of the survey is to support commissioners and providers to:

+ Improve and encourage best practice for patients, their carers and families.
+ Identify any gaps in the care of those who are already coping with an existing condition.
+ Use people's feedback to have a positive impact on staff morale.

We asked people to think about their experiences of:

+ Diagnosis, treatment and support.
+ How COVID-19 has changed the way in which they access local health and care services, particularly if they rely on them for regular care.
+ How services responded to people who have become unwell with COVID-19 symptoms.

This is an ongoing survey, created specifically to provide people with prompt and up-to-date information about people's experiences of services throughout the pandemic.

Regular updates have been provided to system leaders and the structures (e.g. local recovery forums) established by health and care commissioners to respond to the needs of our communities during the coronavirus pandemic.

The latest results have been regularly updated on a web page that has been shared with both statutory and community organisations across Suffolk and also within the Norfolk and Waveney healthcare system. We continue to encourage providers and commissioners to share this survey with local people so that the results can offer the best possible value.

You can view the latest data on:
www.healthwatchsuffolk.co.uk/c19esresults

Priority 4 - Ensuring vulnerable people and our diverse communities are not overlooked

From the very beginning of the COVID-19 lockdown, our focus has been on how the sudden withdrawal of local support networks and services may be impacting upon the most vulnerable people with our local communities.

Already, our survey data from 'My Health, Our Future - At Home' has highlighted to commissioners how changes to support for young people already in touch with services has adversely impacted upon their mental health.

Throughout the pandemic, we have asked questions of our health and care services, ensuring that there is an enduring focus on how we can keep people safe in communities and protect people from unintended harm.

In particular, we have continued to remain involved in local safeguarding procedures as they relate to residential and nursing care provision; a part of our health and care economy that has been drastically impacted by the pandemic. You can read more about how we support local arrangements to protect people from harm from page 61.

Most recently, together with Ipswich and Suffolk Council for Racial Equality, we have planned a local event that will be an opportunity for our BAME communities to talk, for our public leaders to listen, and for us together to make pledges that can make a real and lasting difference to Suffolk's health & care outcomes.

Some of the statistics in recent months are extremely alarming, including the fact that deaths among BAME males was nearly four times more than expected during the initial phases of the pandemic in the UK. The local, national and indeed global evidence is overwhelmingly clear. We need to act now, as we plan the 'recovery phase' of the pandemic.

If we don't, our county's strategies will be set in stone for years to come and we will find ourselves in the same position we have been in the past and presently, which is utterly unacceptable. Inequalities such as these have to be addressed in co-production with the communities most affected.

Look out for more updates about this critical work on our website.



Priority 5 - Using our resources differently to support the Suffolk response to COVID-19

The onset of the pandemic meant that we needed to consider and re-evaluate all of our ongoing work and projects. As we did so, we also developed new ideas about how we could use our resources in new ways in order to seek opportunities to shape, influence and contribute to the local urgent response to the virus.

In essence, we have entirely shifted the priorities of all staff in order that we can offer support to our local services, whilst maintaining our core service offer (e.g. the provision of information, signposting, community engagement and encouraging feedback about local services).

Examples of this include:

+ **The development and launch of the 'My Health, Our Future - At Home' surveys** - Our work with children and young people has usually been part commissioned by the NHS and Public Health in Suffolk. This means that we can reach more young people for their views and ensures local buy-in to address the findings.

  The 'At Home' surveys were never planned and are entirely resourced by our core funding. We have needed to re-allign the priorities of our Research Team in order that they could complete this work at pace and provide regular updates of the findings to our health and care system leaders.

  Ultimately, the full reports will be used by schools and local leaders to address the wellbeing of young people as they return to school. The findings will also help commissioners to determine the extent of the impact on the wellbeing of our local population and to consider this within their strategic plans and priorities as lockdown restrictions are eased or tightened respectively.

+ **Engagement with local communities** - Similarly to the 'At Home' surveys, our COVID-19 experience survey had not been planned and is core funded by our grant from Suffolk County Council. It was developed as a way to offset the absence of our outreach function during the pandemic and to make sure people had a simple way to provide their experiences from home. The survey has offered our health and care system immediate insights into the impact of the pandemic on people's experiences of services.

+ **Making time available for new strategic forums and networks** - An extraordinary number of new networks have been established at all levels of health and care organisations to address the additional demand on services and plan the recovery phase of the virus.

  We have needed to make time available to influence conversations within these important strategic forums and to keep a focus on people's experiences of services. Such forums include regular meetings with local VCSE leaders, the NHS led Tactical and Planning Forum of the Suffolk and North East Essex Integrated Care System and the local authority led Recovery Coordinating Group. There are many others.

+ **Supporting local services to communicate with the public -** Our Community Development Team has continued to maintain contact with community groups and local services (e.g. GP Practice Managers) to help us understand more about the challenges they are facing, to support their efforts to communicate with patients and to share helpful feedback, including thank you messages from their community.

  Equally, our Management Team and Information and Communication Team have liaised at regular intervals with leaders and communication professionals across the health and care system to encourage open communication with the public.

  To date this has included communication about what people should expect from primary care services, easy to understand information about care act easements within social care services, clarity for the public about what should happen at the end of a person's life (e.g. the use of Do Not Attempt Resuscitation forms) and other similar issues.

  Most recently, our Chief Executive has been making time to film short interviews with health, care and community leaders across the county. The aim is to increase public visibility of leaders and to encourage open dialogue about their biggest challenges throughout the pandemic. Importantly, it is also a chance to promote debate about the learning that must follow as we move into the recovery phase of our local system planning.

  In particular, we have been keen to support and promote the efforts of local VCSE organisations as they continue to reinforce and protect our local NHS and social care system.



We have been working in new ways to respond to the impact of COVID-19. That includes major adjustments to our priorities and research to ensure that local voices could influence the response to the pandemic in Suffolk.

Message from our CEO.



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 exponentially growing influence within the health and social care sector, which simply would not be possible without the enthusiastic, skilled and knowledgeable 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 generated many thousands of stories from people using 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.

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

> Building a sustainable future for our organisation is paramount to maintaining a strong and effective independent local voice for the public in Suffolk

Here are just a few of the ways that we delivered against our pre-pandemic priorities outlined within our strategy. Our priorities for 2019/20 included social care services, primary care services, children and young people, co-production and mental health services.

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 26,000 children and young people aged 11-19 years 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 34. 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.

The success of this work year on year meant that we were well placed to provide useful insights to our health and care decision makers about the wellbeing of children, young people, families and education staff during the COVID-19 lockdown (see 'My Health, Our Future - At Home' from page 110).

Local school closures have meant that we have needed to pause the rollout of our 'My Health, Our Future' survey for 2020 until at least the next school year. It is our intention that this project should continue once young people have returned to their normal education environment.

Beyond 2020/21, we would like to see this project evolve into new areas of focus such as younger children in primary school and those who are educated at home. With this in mind, our 'My Health, Our Future - Kids@Home' pilot survey during the pandemic (see page 111), has been a useful way to test how we might adapt this work so that it can be used within primary school settings.

Finally, I would like to extend my thanks to the group of young people who so enthusiastically helped us to plan and deliver our most varied and interesting Annual General Meeting yet (see page 99). They shared ideas about what was important to them in advance and suggested speakers for the day. They even took to the microphone and participated in the event themselves.

It was a brilliant example of how true co-production can help us to ensure events, projects or services are best representing the interests of the people we are seeking to engage.

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.

That is why, in 2018/19, we launched a project called 'My Care at Home' that focused on people's experiences of domiciliary care services in Suffolk. Since that report was published, we know that it has, and continues to, influence the commissioning of home care services in the county.

Since the report has been published, home care services have been commissioned differently and, in 2019/20, we agreed to independently evaluate people's experiences of the new home care service contracts on an annual basis.

Coronavirus has delayed this work, however our intention is that this work should progress with Suffolk County Council within the next financial year, ensuring the voice of service users is heard and able to influence the quality of home care provision in the county.

This year, we have continued to influence local safeguarding procedures and the provider improvement activities of our local authority and the Care Quality Commission. You can read more about this from page 56, including how we played a significant part in ensuring vulnerable residents were protected within a failing home.

Further to all of the above, for the first time, we have coordinated a major review of people's experiences within our local residential care and nursing homes (see page 43). It is the first of its kind in the county and has ensured that we have been able to provide useful intelligence to the CQC and both health and care commissioners about the quality of local care. We know this information has been used to target service improvement activity and to challenge poor care.

More than **600** people took part in our surveys, which were co-produced with residents, relatives and professionals across the county. People have told us about what matters to them and how well they have been cared for. They have also helped our health and care system to understand more about how people make choices about their care and what could have made their journey to care easier.

There is no doubt that our local residential and nursing provision has been severely affected by the coronavirus pandemic. Our thoughts are, of course, with all of the families who have lost loved ones within these services and also with the care staff who have faced unimaginable challenges. The implications of this for the quality of local care and the morale of our local workforce could be significant.

Understanding how various factors have contributed to the crisis faced by some residential and nursing homes is crucial learning for our local health and care system. Furthermore, using feedback from our 'What's it like?' project as a baseline, it will be important to understand how people's experiences may have changed because of the pandemic.

At this point, we have not defined with local partners how this might be achieved, however it is our intention that this work should continue at an appropriate time. It is crucial learning that must be included within local recovery plans and to ensure that the voice of some of our county's most vulnerable residents is not missed.

Mental health services

Our Mental Health and Emotional Wellbeing Focus Group (see page 14) 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.

This has been an important year for our local mental health trust (Norfolk and Suffolk NHS Foundation Trust), which has been operating under special measures for a number of years. Quite simply, the quality of mental health care in the county is not good enough and this has had dire consequences for many service users, carers and families.

The Care Quality Commission (CQC) notified us that it would be re-inspecting the services to check whether the measures introduced since its 2018 inspection had been leading to improvements. This was an opportunity for us to elicit feedback from people about their current experiences of the services and to share them to shape the outcome of this critical inspection.

We brought together the partnership that coordinated 'A Very Different Conversation' about mental health services in east & west Suffolk (Healthwatch Suffolk, Suffolk Parent Carer Network, Suffolk User Forum, Suffolk Family Carers

and Ace Anglia) and joined forces to ask people for their feedback.

Nearly **400** experiences were recorded. The feedback was shared with the Inspection Manager at CQC. The regulator told us that the feedback would be considered before the inspection to help identify any current issues or concerns and specific questions it may ask of NSFT during its inspection.

The report was also presented to the senior leadership of NSFT and other stakeholders (e.g. CQC, NHS England/Improvement and NHS commissioners).

We recognise the improvements highlighted by CQC in its final report, which improved the Trust's rating from 'Inadequate' to 'Requires improvement' (though it remains under special measures). However, it is our view that these improvements have yet to be felt by people using mental health services or their carers. It is reasonable to expect therefore that this should change over time and we will be seeking opportunities to work with the Trust and local partners to ascertain whether this has been the case.

Primary care services

Our Community Development Team has continued to build lasting relationships with GP practices in Suffolk. Our page featuring feedback from GP practice managers (see page 20) is testament to the value of this work and how it has enabled local services to respond to the needs of patients and communities.

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. This activity has therefore been a significant driver of the total feedback we have logged onto our Feedback Centre (www.healthwatchsuffolk.co.uk/services).

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 with 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.

You can read more about GP practices have used our feedback to make improvements from page 22.

Co-production

Our work to make co-production a 'must-do' in Suffolk has continued at pace this year, driven by our dedicated team. You can read more about their work from page 84.

Following our submission to the Suffolk Health and Wellbeing Board in January 2019, influential leaders and their respective organisations, have committed to enabling a co-production culture to thrive across Suffolk and the two health and care systems that involve Essex and Norfolk (see page 65).

To support this ambition, we have defined a 'recipe for co-production" (see page 90), including local principles that must be met when people are working together to plan services. These principles have been defined in co-production with people in Suffolk and set the foundations for building better services in our county.

Our team has also continued to develop a range of resources for use by providers, commissioners and local organisations. They include:

+ A toolkit, acting as an easy-to-understand guide for why and how to do co-production.
+ An academic literature review, to present the existing evidence of what value co-producing has across health and social care.
+ A collection of local good practice examples. These have been shared as blogs on our website.
+ A shared local agreement about paying people for their involvement in co-production.

+ A workshop learning tool about co-production, created in partnership with Norfolk and Suffolk NHS Foundation Trust (NSFT).

2020/21 will see us continue to enhance our offer of support to the health and care system and significantly increase the amount of content available to people on our website. We very much look forward to achieving more in the year ahead and building upon the foundation of collaborations we have gained so far.

A note about business development

Building a sustainable future for our organisation 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 continue to work on plans that will ensure we have the best opportunity to maintain our services and to further 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, 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

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	Freepost RTTY-CEUT-LCRH Healthwatch Suffolk CIC Unit 14, Hill View Business Park Old Ipswich Road Claydon Ipswich IP6 0AJ
Telephone	01449 703949 / 08004488234 (Freephone for Signposting Service)
Email	info@healthwatchsuffolk.co.uk
Website	www.healthwatchsuffolk.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@healthwatchsuffolk.co.uk.

healthwatch Suffolk

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

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

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