

# Annual Report

## Our year: then and now

Healthwatch Wakefield Annual Report 2020-21

**healthwatch**  
Wakefield



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## Message from our new Chair

“I am honoured to have been appointed Chair of Healthwatch Wakefield.

The Board continues to benefit from the ongoing presence of previous Chair, Dr Richard Sloan, whose wisdom and experience I will be able to draw upon. I would also like to thank my Vice Chair, Ruth McCallum, and our interim acting Chair, Andrew Kent, who combined this role with that of Treasurer during 2020.

Despite the Covid pandemic, Healthwatch Wakefield has continued to fulfil its responsibilities to gather feedback from all sections of the community in Wakefield District on health and social care and to report these to the providers and commissioners of services. Reflecting on the feedback over the past year has allowed us to identify our priority areas for the coming year.

The whole team at Healthwatch are looking forward to engaging with the people of Wakefield District to help ensure everyone is able to have their health and social care needs met in a timely and effective manner.”



**Pam Hodgkins**  
Chair of Healthwatch Wakefield





## Thank you

We would like to take this opportunity to say an enormous thank you to everyone we've worked with throughout this strangest of years - the council, the Clinical Commissioning Group, local trusts, commissioners, and providers - but also not forgetting the general health and care workforce, and perhaps most importantly, members of the public for engaging with us.

We have all experienced challenges that none of us could have predicted. We have all been thrown into situations that nobody expected. We have all had to react swiftly, as effectively as possible, to a pandemic that has changed so many areas of our lives.

It has been a privilege to be part of a system that has strived to do this as best it can, whilst keeping the views, experiences, and voices of the public at the heart of its decision making. It may not have got everything right all the time, when that's happened Healthwatch Wakefield have been there to hold up a mirror to the situation and reflect it back to those who can change things.

So, thank you for engaging with us and giving us the opportunity to share experiences that make positive change happen. Thank you to everyone who works in our health and care services for all the efforts you've made, all the work you've put in, and dealing with unprecedented challenges daily.

On behalf of everyone at Healthwatch Wakefield, thank you.

### In Remembrance

We would like to take this opportunity to remember those people who are no longer with us. We would like to mention our respected colleague and friend, Karen Nicklin, who was always a great help and support.

Also, fantastic volunteers, Eric Marshall, Alison Carbet, and John Nathan from the Cancer Alliance Community Panel, and Sheila Smith and Emma Storey, from the Yorkshire Cancer Community.

We offer our sincere condolences to those bereaved over this last year.



## About us

### Here to make health and care better

We are the independent champion for people who use health and social care services in Wakefield District.

We are here to find out what matters to people and help make sure your views shape the support you need, by sharing these views with those who have the power to make change happen.

### Helping you to find the information you need

We help people find the information they need about services in their area. This has been vital during the pandemic with the ever-changing environment and restrictions limiting people's access to health and social care services.

## Our goals

### 1 Supporting you to have your say



We want more people to get the information they need to take control of their health and care, make informed decisions and shape the services that support them.

### 2 Providing a high-quality service



We want everyone who shares an experience or seeks advice from us to get a high-quality service and to understand the difference their views make.

### 3 Ensuring your views help improve health and care



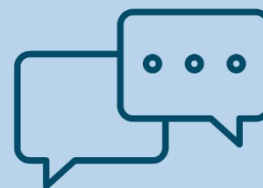
We want more services to use your views to shape the health and care support you need today and in the future.

“Local Healthwatch have done fantastic work throughout the country during the Covid-19 pandemic, but there is more work ahead to ensure that everyone's views are heard.

Covid-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives.”



**Sir Robert Francis QC**  
Chair of Healthwatch England



### Share your views with us

If you have a query about a health and 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.

 [www.healthwatchwakefield.co.uk/get-involved](http://www.healthwatchwakefield.co.uk/get-involved)

 01924 787 379

 [enquiries@healthwatchwakefield.co.uk](mailto:enquiries@healthwatchwakefield.co.uk)

“Thank you for all the help you gave me. I was on the point of giving up but I'm glad I didn't.”

## Responding to Covid-19

**Healthwatch played an important role in helping people to get the information they need, especially through the pandemic. The insight we collected was shared with local partners and Healthwatch England to ensure services are operating as best as possible during the pandemic.**

This year we helped by:

- Adapting quickly to provide up to date advice on the local Covid-19 response.
- Being instrumental in bringing sectors and organisations together to ensure a collaborative effort.
- Supporting the vaccine roll out.
- Supporting the community volunteer response.
- Helping people to access the services they need.
- Supporting services to know the real-life impact and challenges faced by local people.

### Top four areas that people contacted us about:



26% Hospital services



25% GP services



19% Covid testing or vaccines



11% on Dentistry

### Whilst we carried on other activities, including...

- 0-19 Children's Public Health Service
- 2020 Quality Accounts
- 2021 Quality Accounts
- Adult Social Care Engagement and Survey
- Children and Young People Mental Health Survey
- Campaign to End Loneliness
- Cancer Alliance Community Panel
- Care Homes / John's Campaign
- City Fields / Eastmoor Development
- Community Mental Health Transformation
- Connecting Care Executive
- CRS Consultation
- Deaf Communications
- Dental Access
- Digital Exclusion
- Discharge Support
- End of Life Board / Hospice Care Transformation Project
- Gastrostomy Service Improvement
- Health and Wellbeing Board
- Homelessness
- Integrated Care Partnership
- InPAct project with Manchester University
- Maternity Voices
- Mental Health and Wellbeing Hub Set Up
- Mid Yorkshire Hospitals Mental Health Navigators
- NHS Complaints Advocacy
- PIPEC (Patient Experience and Public Involvement) Reconfiguration
- Quality Intelligence Group NHS Wakefield Clinical Commissioning Group



- Quality Intelligence Group Wakefield Council Social Care
- Safe Space Set Up
- Safeguarding Adults Board
- Suicide Reduction Campaign
- South West Yorkshire Partnership NHS Foundation Trust Focus Groups
- Third Sector Leaders' Group
- Voluntary Community Social Enterprise Health and Wellbeing Fund "Starting Well"
- Vulnerable Adults Tactical Group
- Wakefield Families Together
- Wakefield Mental Health Alliance
- West Yorkshire and Harrogate Health Care Partnership Programs:
  - Harnessing the Power of Communities
  - Partnership Board
  - Personalised Care Program
  - Quality Surveillance Group
  - System Leadership Executive
  - System Oversight and Assurance Group
  - Unpaid Carers Program
- West Yorkshire Children and Young People Keyworker Pilot
- Yorkshire Cancer Community
- Young Healthwatch Survey 2020/2021



## Changing how we worked

On 16 March 2020 Prime Minister Boris Johnson made a statement to the nation on coronavirus. In it he said: "...now is the time for everyone to stop non-essential contact with others and to stop all unnecessary travel. We need people to start working from home where they possibly can."

On 17 March 2020 Healthwatch Wakefield informed the public and our partners that we had started to work from home.

We adapted quickly and changed many of the ways we work in order to continue providing support. The key change was to quickly enhance our virtual presence. This enabled us to provide a way for people to share their experiences and access key information promptly, and for us to support our volunteers.

In the District we were one of the first to host virtual activities; we started to host bi-weekly social sessions with volunteers, many of whom were shielding, and also facilitated meetings with Cancer Alliance Community Panel members. We quickly learnt what worked and shared this learning with other organisations and supported them to move online to provide support.

The pandemic also coincided with us having to move out of our office space and we are incredibly grateful for the support provided to us to at this time.



## Communications



It became apparent that the world was facing a significant threat from the 2019 novel coronavirus, or SARS-CoV-2. A public health information campaign was launched, and the Government introduced the Health Protection (Coronavirus) Regulations 2020 for England. The Chief Medical Officer for England, Chris

Whitty, outlined a four-pronged strategy to tackle the outbreak: contain, delay, research and mitigate. On 23 March 2020, the UK went into lockdown. The Government imposed a stay-at-home order banning all non-essential travel and contact with other people, and shut almost all schools, businesses and gathering places. Those with symptoms, and their households, were told to self-isolate, and those with certain illnesses were told to shield themselves.

Information, and misinformation, started to be shared.

It was vital that Healthwatch advised local people about the unfolding crisis and gave them speedy, accurate, and credible information. Both in relation to the global pandemic, national guidance, and changes to local health and care services.

On 25 March we circulated an eight-page document online with trusted sources, fact checkers, scams and frauds, access to support through our Council and Community Hubs, and volunteering opportunities. It also included places to get support locally for young people, carers, along with contact details for Citizens Advice, Age UK Wakefield District, and the Wakefield Samaritans. It also provided four pages of links to advice for over 30 different health conditions, communities of interest, and organisations.

We adapted our website to create a space to make clear how people could get in touch with us, our new working arrangements, local and national guidance and regulations, where to find support and where to volunteer. The coronavirus page holds more than 20 sections including advice and support for our communities of interest, and in other languages including British Sign Language and Easy Read.

Our summer newsletter was printed and safely distributed around the district, including to local care homes, and included more updates on coronavirus and further support. It also included more uplifting elements reinforcing the 'we're in it together' message, good news stories, tips and puzzles, and activities geared towards trying to combat the desperate isolation some people were feeling.

We worked closely with other third sector organisations developing a 'How to' communications guide for local community groups, and we created and managed the Wakefield District Third Sector Facebook Group as a mechanism for sharing messages and good practice.

More than ever, we worked with local statutory organisations to share key messages, including NHS Wakefield Clinical Commissioning Group briefings, hospital updates, and information from the Covid Community Champions group organised by Public Health and Wakefield Council. We continued to work with West Yorkshire and Harrogate Health and Care Partnership, promoting the new local 24-hour mental health helpline, the Grief and Loss support service, and the staff suicide prevention service 'Check-in'.

We will take forward all the lessons learned and continue to work closely with all our stakeholders.

### Wakefield District Third Sector Group

bringing together our local voluntary and community organisations, charities and social enterprises at the time of the coronavirus crisis





## Engagement and adapting to online



With the onset of lockdown our regular face to face community engagement activities were halted and we had to adapt swiftly to the challenge this posed. One priority was to ensure we kept up our already established strong links with our community partners in the local voluntary and community sector through regular email contact and telephone calls.

As they continued to work with their different communities, they could feed back to us any issues they heard on the ground around local health and care services. We also utilised local Community Hubs and the network of foodbanks which had been set up, which enabled us to send out print material including surveys and newsletters. Attending groups and having face to face conversations were replaced by conference calls, joining in on Zoom meetings and check-in and chats.

The most significant change was the switch to online engagement. Our Engagement Officer set up a Facebook profile and set about finding local organisations and joining Wakefield District related community pages – of which there are many! This soon became an important tool in continuing our engagement, giving people the opportunity to share their views and experiences of health and care services during the pandemic. Stories and experiences shared on these pages could be collected quickly, often immediately, and people would often post close to when something had happened or when they needed information.

Whilst being mindful that many people are digitally excluded, this engagement has given us a different reach. In person engagement often means participants in an already established group, attendees at an event, people who pass by our information and feedback stands. Facebook users consist of all sorts of different people, some of whom might never normally come across Healthwatch. Our Facebook engagement has highlighted how different people read or post information at different times of day and night. People post and tag others and share information with friends and family, who may not have access to, or use, social media.

We heard from many people relaying experiences of elderly family members or friends not on Facebook. We were able to post real time information, especially around changes to services which got immediate real time responses. This was invaluable during the pandemic, for example changes to visiting at the hospitals, and when NHS Dentists reopened in June 2020. With our real time, two-way communication channels with colleagues in both Mid Yorkshire Hospitals NHS Trust and NHS Wakefield Clinical Commissioning Group (CCG), we were able to feedback issues and compliments from members of the public and get real time answers to questions raised too. We were able to communicate information, especially around the vaccine rollout, and highlight any issues directly with the CCG.

By the end of this financial year our Engagement Officer is connected to 135 community Facebook Pages associated with our District. Through the many lessons learned because of the changing times during the pandemic, we will continue to engage online as well as return to face to face, in person engagement.



## Our health and care services



We developed and ran two main surveys through 2020 on peoples experiences of our local health and care services. The first, 'Local health and care services during the coronavirus pandemic' started in April 2020. We explained that health and care services had to drastically change the support they offered the public, and that it was important we understood how these changes were working for people in the district.

We also explained that we were working closely with the people leading the local response to the crisis and sharing experiences in real time. 317 people took part, telling us about things that had worked well and also any issues or problems they were having accessing or using services. This helped those in charge to adapt and improve local health and care services where they could.

In July 2020, Wakefield's Integrated Care Partnership asked us to find out more about peoples' experiences. A second survey, 'The future of our health and care services', was launched and ran for approximately four months from the end of July to the end of November 2020.

Questions were based on the themes of telephone and video appointments; hospitals and care homes; home care and accessing support and information. It was online and paper copies were also distributed to the Community Hubs and Wakefield District Housing, Independent Living tenants, and Wakefield District Homelessness Forum. Electronic copies for people to print and share with their own networks were sent to all members of the Integrated Care Partnership, the Third Sector Leaders' Group, and Public Health's Commissioning for Prevention Team.

The survey was also sent to the following groups:

- The Polish CIC
- Public Health
- Live Well / SMaSH
- Wakefield District Sight Aid
- Wakefield & District Society for the Deaf
- Mumbler

The survey was promoted through various channels including the Healthwatch website and social media.

A total of 408 people completed this survey.

Four focus groups also took place to compliment and add to the depth of information received. The survey had asked if people would be willing to take part in a focus group later, this generated participants for three of the focus groups. A further focus group was run with Healthwatch volunteers taking part. In total 14 people took part in focus group discussions.

Survey results were shared with over 140 stakeholders / leaders in the district on a weekly basis. This ensured that decision making could be informed by patients' experiences. Individual cases have been picked up and dealt with as and when required by Wakefield's Quality improvement groups.

Gary Jevon, Chief Executive Officer for Healthwatch Wakefield said: "We were really keen to make sure that people in our district continued to receive the best health and care services available during the Covid-19 pandemic: the right care, at the right time, in the right place. An example of the impact of sharing results as quickly as possible would be the swiftness of the response from the Maternity Transformation Programme Team based at Mid Yorkshire Hospitals NHS Trust to the feedback that patients were providing regarding their experiences of community-based services. The team were able to take this on board and implement immediate improvements, and as a result satisfaction with the service increased."

**"Very helpful and insightful... I have read with interest some really rich information in here – well done – this is so important and informative for all [local] priority and enabling leads... There are some important pointers in here for us from both a collective workforce and a system development perspective."**

**Linda Harris OBE, CEO, Spectrum Community Health CIC**

Find our reports from last year at [healthwatchwakefield.co.uk/archive-reports](https://healthwatchwakefield.co.uk/archive-reports)

## Adult social care service user wellbeing



In November 2020, a working group was formed including the Service Director for Adult Social Care (Older People and Physical Disabilities) and several members of her team alongside the Healthwatch Research Officer.

A series of questions were put together to find out how well services were working for people, and whether any improvements could be made in the future.

People from the Adult Social Care database were telephoned by the Healthwatch Research Officer between December 2020 and January 2021. They were asked if they would be willing to answer a few questions about the care and support that they had received over the previous six months, and their thoughts and feelings about the future.

Of the 126 people who answered the phone call, 120 people agreed to take part and answer the questions. The support most people had received in the last six months was care in the home, a social worker, and Care Link tele care.

Overall, people were very appreciative of the phone call and that someone was checking in on them and taking an interest in how they were feeling.

Most people who were receiving care in the home were also very appreciative of it, with several people calling this contact from their carers a 'life saver' particularly at that time.

Where there were some negative comments about care in the home, these tended to be more around the organisation of the care. Where telephone appointments had been accessed there was very positive feedback about them. Most people would still prefer to have a face-to-face appointment and worried about things being missed, but overall, people understood the need for different ways of doing things. Most people reported that they had additional support from family and friends or neighbours. This was often in the form of a family member providing care or help with shopping.

Many people were clearly very lonely.

For example, we spoke to a 99-year-old lady who was very happy with the carers who came to help her, she was hard of hearing but could just manage on the telephone. She told us that although she was managing ok, she would very much like someone else to talk to. She mentioned several times that we could ring her again and how lovely it had been to chat.

Some people were clearly not managing very well, and the isolation was having a grave impact on them. A few people mentioned suicidal thoughts.

### Message from Wakefield Council's Adult Social Care Service Directors:

"At Wakefield Council we have been concerned about the impact of the Covid-19 pandemic on our service users in adult social care. We therefore commissioned Healthwatch Wakefield to help us find out how people were coping. We have been very pleased with the positive responses to the telephone surveys and happy to see that most people have felt supported by services. We note however that many people have felt lonely, and some are not managing well. As a result of the Healthwatch Wakefield work, we are planning to put in a 'check in and chat' service to offer informal support and company for people who feel that this would be helpful.

"We have also commissioned Healthwatch Wakefield to continue and expand the engagement work they have done for us, improving our ability to listen to and support our service users. We would like to thank Healthwatch Wakefield for giving us a valuable insight into the experiences of local people who need our support."

#### Nichola Esmond

Service Director for Adult Social Care, Older People and Physical Disabilities

#### Lisa Willcox

Service Director for Adult Social Care, Learning Disabilities and Mental Health

## Deaf patients and communication needs



We were asked for help to make an NHS complaint about the refusal of Mid Yorkshire Hospitals NHS Trust to meet someone's communication needs during two inpatient stays at Pinderfields in 2020.

The person is Deaf and British Sign Language [BSL] is their first language.

They do not lip read, and their understanding of written English is limited.

### February 2020: Inpatient for 12 days

- Staff in the Emergency Department refused to get them a BSL Interpreter and told them to phone one themselves.
- The Deaf person's relative had to help them complete the health questionnaire for an MRI scan.
- Staff on Gate 33 did not understand the Deaf person but did not provide a BSL Interpreter either face to face or by Video Remote Interpreting.
- Staff would hold their hand up to say hello but then left the person alone because they were Deaf, this upset the Deaf person and made them feel that staff didn't care.
- When the Deaf person buzzed for help, staff didn't understand them.
- The Deaf person didn't understand the doctor; when he was pointing to his diagram following the test results and didn't have the opportunity to ask him questions.

### July 2020: Inpatient for three days

- Different nurses were asked to get a BSL interpreter but there was no coordinated approach, and the person was told 'we have tried'. When the Deaf person indicated 'interpreter' to the doctor he said no and wrote things down.

- The Deaf person did not understand the written information, but the doctor walked away without explaining things to them.
- The Deaf person was asked to sign a form; they did not understand it and didn't have their glasses. They were shocked when they found out after surgery that the form was consent for this.
- No BSL interpreter was provided during this stay and the Deaf person was discharged without fully understanding what had been done or what would happen next.

The experience also had a negative impact on the person's family who were worried about their relative and their communication needs. Calls from the person's daughter were not returned and the person's partner was refused entry and did not understand why.

The Trust investigated, explained the treatment given and the surgery which had been carried out. Staff on Gate 33 had been asked to arrange a BSL interpreter, but none were available.

The Trust explained that the Covid pandemic may have influenced the availability of interpreting services.

The whole team offered their sincere apologies for the distress, anxiety and frustration caused; stating it wasn't the intention of any staff involved in the Deaf person's care.

### Positive experience following the NHS complaint

The Deaf person had another inpatient stay of 12 days in October 2020 and told our NHS Complaints Advocate using Video Relay Service [VRS]:

**"This admission was a much better experience. I was on Ward 20, and I was happy with the care I received. Interpreters were brought in regularly for me, it was very organised. I was able to ask questions via the interpreters and I had a very nice doctor who spoke to me using interpreters. Every day it was brilliant and was so much better than my previous experiences. I was very happy with Ward 20."**

Continued...



The person has written to the Trust, with our help, to pass this positive feedback on. The Deaf person also said:

“Should other people be in a similar situation, I would encourage them to make a complaint and seek support from Healthwatch to raise their issues.”

### NHS Complaints Advocacy working differently during the pandemic

We understand that it is better for Deaf BSL users to have face to face BSL interpreting. However, during the pandemic we had to use Remote Video Interpreting and Video Relay Service [VRS].

This gave this Deaf person the opportunity to tell our Advocate what they wanted to say in the NHS complaint, the outcomes they wanted and the impact their experience had on them.

We used VRS so that the Deaf person was able to understand the information in the response and to voice their further comments and positive feedback.

Healthwatch Wakefield also use and have an account with SignLive.



### Did you know?

During the coronavirus pandemic 20% of the Healthwatch Wakefield team completed training in British Sign Language.

We would like to take this opportunity to thank Wakefield and District Society for Deaf People for their ongoing advice and support. Especially Val Pratt, Manager, who is always willing to help us improve health and care services for Deaf people. You really make a difference.

[www.wakefielddeaf.org.uk](http://www.wakefielddeaf.org.uk)

**“We are pleased that Healthwatch was able to provide their support to someone to enable them to make a complaint. As a learning organisation, we welcome all sources of feedback to improve our patient experience.**

**Good communication is fundamental to providing a high standard of care to the patients who access our services. Interpreting and translation services are available at the Trust for those patients who need support to express themselves, make informed choices and be clearly understood.”**

**Michael J Shanaghey**  
Assistant Director of Nursing  
Nursing and Quality Directorate



## Keep Calm and Carry on: The Community Panel for West Yorkshire and Harrogate Cancer Alliance

When lockdown was announced, staff from all sectors were instructed to work from home and significantly, cancer patients would be required to shield themselves. It was clear that the pandemic wasn't going away any time soon and as a cancer specific community group, we would need to find other ways of meeting and engaging with our members.

Healthwatch Wakefield and West Yorkshire and Harrogate Cancer Alliance took out a Zoom conferencing plan. This enabled the panel to continue to meet face to face but in the virtual world and crucially, it would allow us to continue assisting the Cancer Alliance with ongoing project work and discussions to continue to support local cancer patients.



On 9 April, we held our first Community Panel 'check in and catch up' Zoom meeting. This gave panel members the opportunity to get used to using the technology and to share a bit about how they'd been managing in the wake of the Covid-19 crisis. The initial response was excellent with members exchanging stories and sharing some of the more positive experiences they'd had whilst being confined to house and home. What was clear during this initial meeting, was that members felt uplifted, through being able to meet

face to face once again and being able to freely share what was on their minds. As a group we now had something positive to look forward to. Resuming panel meetings meant we could support the ongoing the project work of our local Cancer Alliance, to help and make a difference to cancer patients and services across our local areas.

**"Well done, really good Zoom meeting today and it was great to meet up with everyone again."**

**Claude Hendrickson**

At one meeting, the panel held a very engaging discussion around public confidence in accessing cancer services. Evidence suggested that patients were worried about putting an additional burden on the NHS or are afraid of contracting the virus during their treatment. Securing public confidence in the availability and safety of cancer care was essential to ensure that those who need to access services, feel reassured to do so.

**"I'd just like to say what a great call this was, well organised and the group chats worked perfectly... and ours was led very well by our 'leader'. Everyone respected people's views and some great feedback and ideas were shared. I hope that all the work you are doing along with our small contribution, will help those who need it, including us all too."**

**Karen Stead**

**"Today's meeting was one of the best and has given me so much more info to present to Mid York's, so thanks again and well done. I know the Cancer Alliance will really appreciate all this work and the difference it is making so well done."**

**Paul Vose**

Coordinator Fraser Corry also kept in touch with members by phoning round, having a friendly chat and catch up and being there to listen to some of what they had experienced with their own cancer treatment, check-ups, and other

related issues. This close level of engagement was particularly welcomed by members who were more isolated.

The Panel also took part in digital work collaboration through email. For example, members provided feedback and suggestions for an NHS guidance leaflet document to support cancer patients preparing for surgery during Covid-19.

Cancer Alliance, 'Living with and Beyond Cancer' Project Manager, Charlotte Houston, confirmed that many of the suggestions made by the panel as part of this work, were incorporated into the final leaflet and their input had been a great help and support.

Looking back, it has been a really challenging time for cancer patients and our panel members but embracing these new technologies and finding new ways to engage online was met with a very positive response.

Find out more about the Cancer Alliance Community Panel here: [canceralliance.wyhpartnership.co.uk/get-involved/our-community-patient-panel-find-out-more](https://canceralliance.wyhpartnership.co.uk/get-involved/our-community-patient-panel-find-out-more)

## Yorkshire Cancer Community

The Yorkshire Cancer Community is an independent patient led information and support network for people affected by cancer covering Yorkshire and the Humber.

Initially, run as a Healthwatch Wakefield project, on 1 April 2020 it became a registered charity, and has its own board of trustees. Jill Long, Engagement & Communications Officer, works alongside colleagues at Healthwatch.

It can be lonely having a cancer diagnosis. Outside of clinical appointments, or when treatment ends, patients often don't know where to turn for further help and information.

Yorkshire Cancer Community was set up by cancer patients and carers who felt there was a gap in services and wanted to provide something that was patient friendly.

The network offers support to guide patients through this difficult time, signposting them to individuals who have been there themselves and to support groups and cancer charities.

They do this by offering information and patient stories through social media and regular newsletters; by offering opportunities for patients to get involved in research and patient panels and an informative website which lists cancer charities and support groups across the region.

Over the last year they have also been involved in different patient related initiatives which included running an online cancer support group and working in partnership with the West Yorkshire and Harrogate Cancer Alliance on the awareness raising project, Cancer SMART, as well as recruiting 'Digital Champions' and 'Community Connectors'.

Find out more about the Yorkshire Cancer Community and how to get involved, along with advice, information, and support here: [yorkshirecancercommunity.co.uk](https://yorkshirecancercommunity.co.uk)





## Our volunteers

**At Healthwatch Wakefield we are supported by 69 volunteers to help us find out what people think is working, and what improvements people would like to make to services.**

Our volunteers always play a vital role in supporting people to have their say about health and social care services, and this year has been no different.

However, due to the pandemic our volunteers have had to adapt their role and volunteer remotely from their home.

Nevertheless, our committed team of volunteers ensured they continued to make a difference and, despite all the challenges, still managed to give approximately 500 hours to improve health and care in Wakefield District this past year.

Here are some highlights of what our volunteers have achieved throughout the pandemic:

- Collecting views and experiences of Health and care by doing online surveys and focus groups.
- Raising awareness of Healthwatch in their local communities.
- Trustees have been actively supporting the day to day running, governance, finance, and representation by attending strategic meetings.

To enable this change, our volunteers spent time developing skills on virtual meetings, gaining experience, and sharing those with each other so they can continue to make a difference to communities within the virtual world.

They also carried out their usual task and finish projects such as Quality Accounts; and our Board, made up of volunteers, continued to steer the organisation including hosting our virtual Annual General Meeting.


Everyone at Healthwatch Wakefield wants to say a big **thank you** to all our wonderful volunteers.




### Volunteer with us

Are you feeling inspired? We are always on the lookout for new volunteers.

If you are interested in volunteering or have ideas about what you would like to do, please get in touch.

 [www.healthwatchwakefield.co.uk/get-involved](http://www.healthwatchwakefield.co.uk/get-involved)

 01924 787 379

 [enquiries@healthwatchwakefield.co.uk](mailto:enquiries@healthwatchwakefield.co.uk)

**“I have nothing but the upmost respect for this service...  
We are very grateful for everything.”**





## Young volunteers and our Public Health Director

### Young Healthwatch have been working with Public Health in Wakefield District engaging young people around Coronavirus.

During the lockdown in August 2020, several young volunteers raised issues and concerns about messaging being put out to young people around Covid-19, dealing with health issues and exam stress.

They didn't know if the information they were getting from social media, their family and friends was correct or not.

Young Healthwatch were also getting feedback about coronavirus through their survey. This was from the many young people across the district who work with them such as members of youth clubs and other groups.

The main topics raised were the negative impact on mental health; the inability to get an appointment at the dentist, or even to get registered; and hospital appointments or treatment being cancelled or delayed, for them and members of their family.

“A lot of adults have become bored with Covid, unless they are old or vulnerable, and lots of adults do not seem to believe in Covid anymore. What info can you give young people who are trying to get through this mess, and where can we get sensible info from?”

#### Young Healthwatch Volunteer

They needed professional help in answering their questions, so Young Healthwatch approached the Director of Public Health, Anna Hartley, and invited her to meet young people and bring updated information on Covid-19 restrictions along with local data. It also gave her the opportunity to hear first-hand the current issues affecting young people.

There have been three very successful sessions, with Anna meeting lots of young people.

### The top themes from discussions were:

- **The vaccine and vaccinations**
- **School stress**
- **Resilience in children and young people**
- **Mask wearing**
- **Rules and restrictions**
- **Strain on hospital services**

The information from these sessions is being published on the WF-I-Can website so other young people can see the responses from our Director of Public Health.



[www.wf-i-can.co.uk](http://www.wf-i-can.co.uk)

One of our young volunteers also supported West Yorkshire and Harrogate Integrated Care System to reach more young people by producing a Tik Tok video on Covid-19 myth busting.

One of the young volunteers who attended the meetings summed up what she thought of the sessions:

“During the pandemic, the sessions I attended of the Young Healthwatch Forum, including question and answer sessions with Anna Hartley, Director of Public Health Wakefield, have been extremely helpful.

“Being able to listen to Anna regarding the effects of Covid-19 and share my views with Anna and knowing she understood my concerns allowed me to feel supported, which was very considerate in the current climate.

“In every meeting organised by Young Healthwatch, Anna made sure she explained every fact and figure regarding coronavirus in Wakefield District and the rest of the UK. This was beneficial as no information was ever missed. Also, I was given many opportunities to ask Anna about the new vaccines emerging and the consequences the virus has had within society.

“The response and feedback I gained from Anna was always reassuring for not only myself and those attending the meetings, but also for many other young people who can access the information through the WF-I-Can website.”

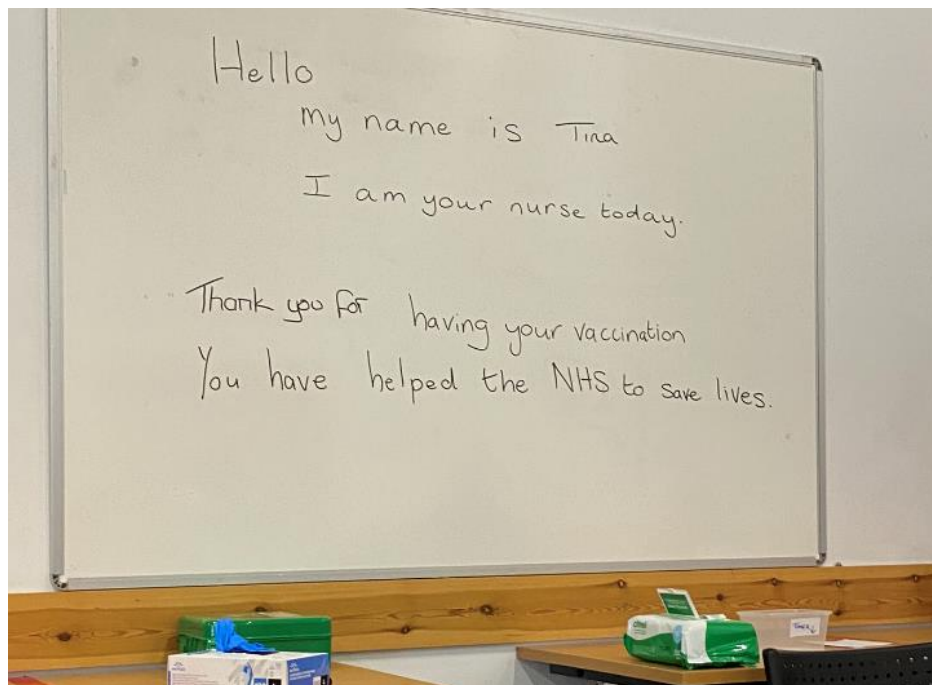
**Young Healthwatch Volunteer**

“They were challenging and good questions and thank you for the invitation... The young people are fab. Really enjoyed meeting with them again – it’s a vital part of my job and I always enjoy it.”

**Anna Hartley, Director of Public Health**

## Volunteering at the 'sharp' end

**One of our volunteers, Sheila, explains how she helped with our local covid vaccination efforts.**



“Much has changed since the onset of Coronavirus, as face-to-face interaction with the public, in all settings, had to be suspended.

The volunteers continued to meet fortnightly online via Zoom, so were able to keep apprised of current developments in the wide arena of health care in Wakefield District. This has been particularly important because of enforced isolation, or limitation of movement, of many members of the public.

It was frustrating being unable to offer practical volunteer help and support for the community, but lockdown regulations made things quite restrictive. That said, Healthwatch has had a particularly important role to play during

the pandemic, providing information to the public about available services, and guidance in how to access these in rapidly changing circumstances.

I heard that staff at St Swithun’s Vaccination Centre were needing volunteers on clinic days, so I got in touch and offered to help. I asked each patient general health questions at the door, made sure they used hand gel, or offer gloves to those who might be allergic, and ensured they were wearing a mask. Patients were then guided to the vaccination room to be registered before receiving their vaccination.

Sometimes I helped on the reception desk, checking appointments, and finding each patient’s individual vaccination card to show to the vaccinator. If it was a Pfizer day, we might be asked to take vaccinated patients through to a waiting room where they remained for 15 minutes, supervised by a nurse or doctor in case of a reaction to the vaccine. Some patients were extremely nervous and chatting helped to keep them calm, and some could be taken to another room to be vaccinated, away from the noise and from other patients.

It was wonderful to have some face-to-face conversations, some light humour and laughter. It lifts everyone’s spirits, including my own. I volunteered there for several weeks and loved every minute. I feel that volunteering, helping others even in a small way, is so good for both physical and mental health and wellbeing, and the staff and volunteers are one of the nicest groups of people I have worked with.

I would certainly recommend volunteering if you have just a little time to spare. I am looking forward to Healthwatch being allowed back into the big wide world, meeting people face to face again, and supporting them in whatever way we can. Volunteers really do make a difference!”

**Sheila Hornby-Mould**

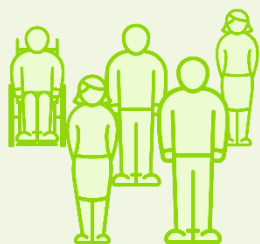
### Did you know?

**Our Chief Executive Officer, Gary Jevon, and our new Chair, Pam Hodgkins, both started as volunteers with Healthwatch Wakefield.**

## Our year at a glance

Find out about our resources and how we have engaged and supported people in 2020-21.

### Reaching out



We received formal feedback from

**858 people**

this year about their experiences of health and social care.

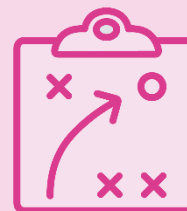
We provided signposting, advice, and information to

**680 people**

Our NHS Complaints Advocacy service worked with and supported

**159 people**

### Making a difference to care



We published

**5 reports**

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

These related to health and care services through the pandemic, including domiciliary care, and dentistry.

You can find all our reports on our website [www.healthwatchwakefield.co.uk](http://www.healthwatchwakefield.co.uk)

### Responding to the pandemic



We engaged with and supported people during the Covid-19 pandemic this year through our website, surveys, social media and with virtual meetings.

Our coronavirus 'reset' surveys were fed back to service providers and decision makers in real time, enabling them to act and adapt quickly.

**21,648 people**

visited our website, mostly to access coronavirus information and updates, and mental health advice and support.

### What helps health and care work for you



**69 volunteers**

helped us to carry out our work. In total, they contributed the equivalent of 60 working days, not including the work of our Board.

**We employ 10 staff**

which is 7.8 staff as a full time equivalent, a 9% decrease from the previous year.

We received

**£263,000 in funding**

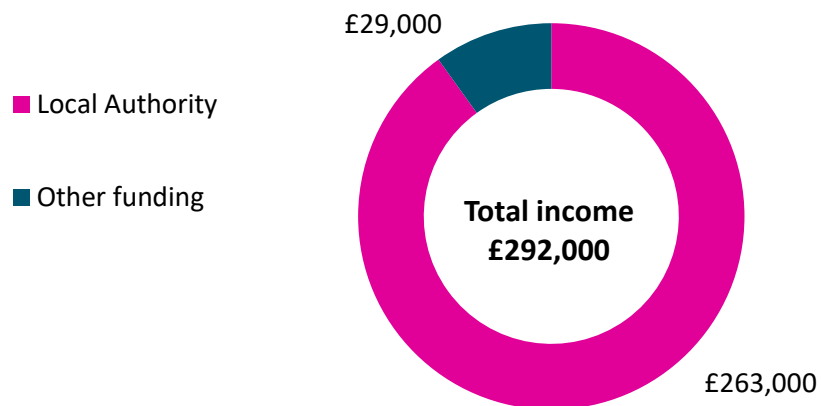
from our local authority in 2020-21, the same as the previous year.



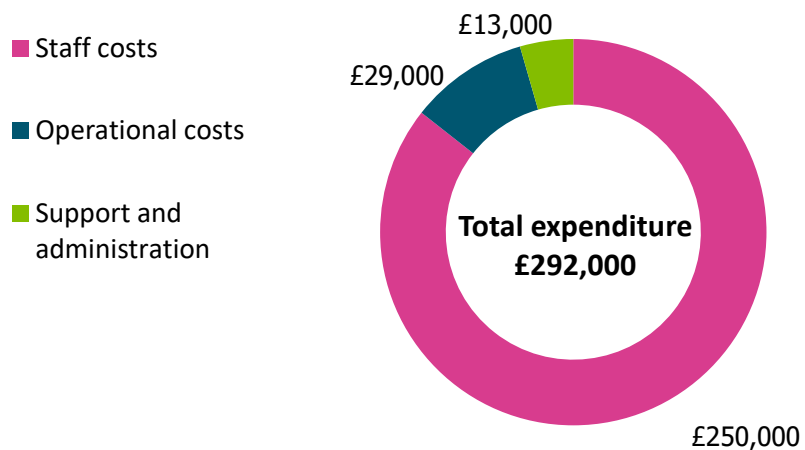
## Finances

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

### Income



### Expenditure



## Statutory statements

### About us

Healthwatch Wakefield, c/o 11 Upper York Street, Wakefield WF1 3LQ.

Young Lives Consortium, Lightwaves Leisure Centre, Lower York Street, Wakefield WF1 3LJ are subcontracted to provide Young Healthwatch.  
[www.ylc.org.uk](http://www.ylc.org.uk)

Healthwatch Wakefield employ the Cancer Alliance Community Panel Coordinator. [canceralliance.wyhpартnership.co.uk](http://canceralliance.wyhpартnership.co.uk)

Healthwatch Wakefield hosts the Yorkshire Cancer Community Engagement and Communications Officer. [yorkshirecancercommunity.co.uk](http://yorkshirecancercommunity.co.uk)

Healthwatch Wakefield uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

## The way we work

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

Our Healthwatch board consists of eight members who work on a voluntary basis to provide direction, oversight, and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2020/21 the board met eight times and made decisions on matters such as our response to the Covid-19 pandemic, and an options appraisal for our operational team restructure.

We would like to take this opportunity to thank our trustees John Hyde, Fran Kinchin, and Mags Hilton, who stepped down from our Board this year. Their contributions were wide ranging and extremely valuable, including work on Connecting Care, and securing our Investing in Volunteers Quality Standard.

We ensure wider public involvement in deciding our work priorities. See the next page for how we do this in line with our agreed service delivery model.

### Methods and systems used across the year's work to obtain people's views and experience

We use a wide range of approaches to ensure that as many people as possible can provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities, and engaged with the public through social media.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by implementing a forum for Deaf service users to have direct contact with leaders and commissioners of local service providers, by our volunteers proactively participating in the newly formed Covid Community Champions scheme, and by increasing the diverse ethnic community representation of the membership of our Cancer Alliance Community Panel.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on the Healthwatch Wakefield website, and in print where requested. This year we aim to make different language versions available to those who require them.

## Our 2020-21 priorities and changes made to services

### Mental health services

- Implementation of a new Mental Health and Wellbeing hub.
- Development of the Safe Space scheme.
- Introduction of Mental Health navigators at Mid Yorkshire Hospitals NHS Trust.

### Children and young people

- Improvements in the waiting times for CAMHS.
- Evaluation of the 0-19 Children and Young People's Public Health service.
- Introduction of the Wakefield Families Together programme.

### Maternity services

- Preparatory work for Healthwatch Wakefield to host the Maternity Voices Partnership from April 2021 onwards.
- Improvement in community-based post-natal services during the Covid-19 pandemic, in conjunction with Mid Yorkshire Hospitals NHS Trust.

### Primary care

- Evaluation of primary care service provision in the Eastmoor and City Fields area.
- Evaluation of dental services across the district.
- Introduction of 'My Right to Healthcare' cards.

### Communication

- Rapid reporting of feedback from our Covid-19 surveys to allow providers and commissioners to make immediate changes to service delivery during the pandemic.
- Development of the Suicide Reduction 'Check-In' programme.
- Introduction of a forum for Deaf service users to have direct contact with leaders and commissioners of local service providers.

## Responses to recommendations and requests

We had 0 providers who did not respond to requests for information or recommendations.

This year, due to the Covid-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity.

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

## Health and Wellbeing Board

Healthwatch Wakefield is represented on the Wakefield Health and Wellbeing Board by Gary Jevon, Chief Executive Officer. During 2020/21 our representative has effectively carried out this role by providing ongoing reports regarding the state of local health and care services, including reporting to the Adult Services, Public Health and the NHS Overview and Scrutiny Committee; by presenting case studies of patient stories at Health and Wellbeing Board meetings; and by holding the role of Senior Responsible Officer for Communications and Engagement across the regional place-based partnership.




### Get the information you need

If you have a query about a health and 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.

 [www.healthwatchwakefield.co.uk/get-involved](http://www.healthwatchwakefield.co.uk/get-involved)

 01924 787 379

 [enquiries@healthwatchwakefield.co.uk](mailto:enquiries@healthwatchwakefield.co.uk)





## Our next steps

Our fourth year of trading as an independent charitable company has seen us develop our reputation and skills as a trusted local partner within the health and care system.

We have also involved more local people than ever before in our work, enabling patients and users of health and care services to have their say in how their care is delivered – we intend to continue this trend through 2021 and beyond.

Healthwatch Wakefield's priorities for 2020/2021 were around mental health, communications, primary care services, children and young people, and maternity services.

Towards the end of March 2020, the global Covid-19 pandemic led to an impact on our operational activities as well as, to a lesser extent, its finances. The national lockdown, followed by the implementation of ongoing tiered restrictions, meant we had to amend the way we worked. Face-to-face engagement moved into the virtual space. Meetings with stakeholders, commissioners, and colleagues took place online, rather than in person. Staff readjusted their working patterns in order to work from home.

Operationally we found ourselves becoming much busier, particularly in terms of scrutiny of local services. We used our position and reputation to inform and advise and engage with local people in a time of rapid change.

Our original places for granular activities in 2020-2021 had to be amended at short notice as we swiftly responded to the pandemic, the changing environment, and the needs of the Wakefield population. We were not alone amongst health, care, and Voluntary, Community and Social Enterprise organisations in doing so.

We have taken account of the evidence gathered through our work, reviewed ongoing feedback from members of the public, and we have adapted our work plan in light of the novel coronavirus.

As a result, we have taken a proactive approach to our ongoing activities and going into 2021-2022 we are revising our priorities.

Our focus for the coming year will be on the following areas locally:

- The ongoing impact of Covid-19
- Health Inequalities
- Community Mental Health services
- Acute Mental Health services at SWYPFT
- Care Homes and Nursing Homes
- Adult Social Care

### We will continue to work to our agreed service delivery model:

Firstly, to **INFORM AND ADVISE** by keeping ourselves informed and share information about local health and care services with members of the public; helping people to understand their rights; and supporting individuals who have questions or concerns about local services.

We will **INVOLVE** and engage local people through our outreach activities, even if these remain virtual for the time being, we will offer a variety of ways for people to access information, advice, and support, and we will continue to build and support a strong team of volunteers.

We will **INVESTIGATE** by looking deeper into specific areas of concerns raised by local people; and we will collect, analyse, and report on intelligence around people's experience of health and social care services.

We will share our intelligence and report findings widely to **INFLUENCE AND IMPACT** the key decisions that our made about health and care services for local people, and support decision making with local people's voice in mind.

Through the NHS Complaints Advocacy Service, we will continue to **ADVOCATE AND SUPPORT** as appropriate to enable people to complain about NHS services when they need to.

And we will **GOVERN** ourselves effectively in line with our statutory functions, managing our funding to support our sustainability.

Continued...



We will continue to work with partners on a wider geographical footprint, such as a neighbouring local Healthwatch organisations, to ensure that people's voices remain heard across the evolving Integrated Care System in West Yorkshire and Harrogate.

Especially as the national systems looks to reorganise itself once again – it will remain important to us that the public voice does not get lost amidst these important conversations and decisions.

We will also extend our collaborative work across the region to investigate areas such as Dental Services and access, and End of Life care.

And we will continue to work with other agencies at a local level to ensure that our longer-term areas of need continue to be monitored and improved.

Namely, children and young people, where we remain supported the Young Lives consortium to deliver our Young Healthwatch function; cancer services, where we continue to work with the Cancer Alliance and its Community Panel, as well as continuing to support the Yorkshire Cancer Community; and maternity, where we look to evolve our relationship with the local Maternity Voices Partnership.

I am confident that Healthwatch Wakefield occupies a strong position in the local health and care system, and we will continue to use this position to ensure the voice of the public remains both heard and important to our decision makers.



**Gary Jevon**  
Chief Executive Officer of Healthwatch Wakefield

**Our collaboration with Healthwatch helps us connect the voice of communities to the work of the voluntary, community and social enterprise sector, and to ensure we use these to shape our response to the health and care priorities in West Yorkshire and Harrogate in the most effective way possible."**

**Jo Baker**

Programme Lead Third Sector: Harnessing the Power of Communities, West Yorkshire and Harrogate Health and Care Partnership

**Healthwatch have been a focussed and inclusive resource effectively drawing on the voices of lived experience across Wakefield District and continuing to track this throughout the pandemic. As workforce Senior Responsible Officer for Wakefield Integrated Care Partnership, this information presented clearly and openly is invaluable to support our place-based people strategy."**

**Dr Linda Harris OBE**

Chief Executive Officer Spectrum CIC and Workforce Senior Responsible Officer for Wakefield Integrated Care Partnership



**As the senior commissioning manager for maternity service in Wakefield CCG it has been an absolute pleasure to work with Gary Jevon and the team in appointing Healthwatch as host for the Wakefield Maternity Voices Partnership (MVP). Healthwatch Wakefield is perfectly placed to support this given their infrastructure and outreach to our local communities to enable meaningful engagement with women and families and encourage more involvement from our underserved groups. We have been so pleased with the level of enthusiasm, backing and support for this exciting collaboration and are very much looking forward to working together.**

**Tracy Morton**

Senior Commissioning Manager Maternity, Children's and Women's Services, NHS Wakefield Clinical Commissioning Group



**Healthwatch are a vital part of the system in Wakefield District ensuring that local residents' voices are heard. This provides vital feedback to system leaders which improves services and facilitates accountability. Healthwatch Wakefield have responded admirably to the Covid pandemic and flexed their offer accordingly.**

**Anna Hartley FFPH**

Director of Public Health  
Wakefield Council



**On behalf of the Wakefield Mental Health Alliance, I would like to thank Healthwatch Wakefield for their crucial work. Through the period of the Covid-19 pandemic they have continued to secure the views of Wakefield citizens in relation to mental health services in the district. This feedback has been invaluable in shaping the work and service response of service providers in the Alliance.**

**Sean Rayner**

Director of Provider Development, South West Yorkshire Partnership NHS Foundation Trust



**Healthwatch Wakefield have made a real impact to Wakefield Health and Care Services by ensuring our patients experiences of care shape the design of future services. Healthwatch frequently share Wakefield residents experiences of health and care at a number of key forums in our District and work with health and care partners to ensure that as a system that views of our residents are listened too, acted upon, and help improve services. Keep up this fabulous work Healthwatch Wakefield!**

**Mel Brown**

Commissioning Director for Integrated Care, NHS Wakefield Clinical Commissioning Group



Healthwatch Wakefield  
c/o 11 Upper York Street  
Wakefield  
WF1 3QL

[www.healthwatchwakefield.co.uk](http://www.healthwatchwakefield.co.uk)

telephone: 01924 787379

email: [enquiries@healthwatchwakefield.co.uk](mailto:enquiries@healthwatchwakefield.co.uk)

twitter: @healthywakey

Facebook: [Facebook.com/HealthwatchWakefield](https://www.facebook.com/HealthwatchWakefield)

Instagram: [instagram.com/healthwatchwakefield](https://www.instagram.com/healthwatchwakefield)

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**Sarah merriman**

@sazza773

I took this issue to @healthywakey who took it to the CCG who said they will send out definitive guidance to all GP practices in Wakefield in the next week or so for them to implement to ensure that carers are registered accordingly. @tide\_carers. Thanks @healthywakey fab result

**Sarah merriman** @sazza773 · 29 Jan

Speaking to a member or @tide\_carers today in Wakefield. She works & is caring for her mum who has #Dementia. Her GP practice is refusing to register her as a carer as she doesn't receive carers allowance - Apparently following guidance. Carers in other areas reporting same!

2:45 pm · 2 Feb 2021 · Twitter for iPhone