



healthwatch
Bedford Borough



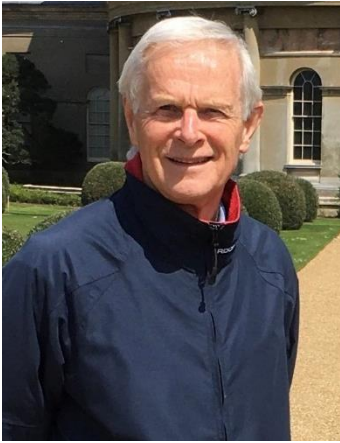
Annual Report 2020/21

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Message from our Chair



“There is now a greater need than ever for the four independent Healthwatch in BLMK to work much more closely together, while maintaining our own individual identities and recognising the differences in our populations.”

This is my first Annual Report following assumption of the Chair from Anne Bustin during the summer of 2020. Over the years she has given much to the organisation, but sadly decided that the pressures of her day job brought about by the COVID-19 crisis meant that she could no longer continue in the role. Fortunately she remains on the Board of Directors, which therefore, still enjoys the benefit of her long experience with both Healthwatch and its predecessor, LINK.

My time as Chair has coincided with what has been a difficult twelve months for almost everyone and that has included us all at Healthwatch Bedford Borough (HBB). For most of the year this has meant working from home, with staff only recently able to return to the office, albeit restricted by government guidelines on COVID-19. But notwithstanding these constraints, we continued to deliver the Healthwatch service unabated and for that and their continued perseverance in these challenging times, I'm very grateful to our small, but dedicated team.

But home working hasn't been easy! With the staff no longer able to work together in the office and benefit from face to face communication, despite the availability of Zoom, it became apparent that HBB couldn't continue to function in the way it had since its inception in 2013.

We therefore decided to take an in depth look at how we worked. This process, amongst other things, highlighted the need for a senior identifiable executive leader and a management structure more like that found in most other local Healthwatch in the region. In the autumn therefore, we recruited our first Chief Executive Officer, Helen Terry, who joined us on 1st December 2020, from Crohn's and Colitis UK, where she had been Director of Research.

As the health environment has evolved with the establishment on 1st April this year of the new combined Bedfordshire, Luton and Milton Keynes Clinical Commissioning Group (BLMK CCG) and with the further development of the Integrated Care System (ICS), the

Message from our Chair continued

Appointment of a Chief Executive has become ever more important. There is now a greater need than ever for the four independent local Healthwatch in Bedford Borough, Central Bedfordshire, Luton and Milton Keynes to work much more closely together, while maintaining our own individual identities and recognising the differences in our populations. Having a clear leadership focus within our organisation has enabled us to play an equal and productive role in this partnership and ensure that the voice of the Borough is properly heard and represented at a working level.

One of the recent outcomes of this enhanced partnership working has been the award of a contract to the four local Healthwatch by the Care Quality Commission (CQC) to look at targeted health and social care challenges, in particular pertaining to the access and additional needs of both the homeless and D/deaf communities.

The past year hasn't just been about organisational change. One of the highlights for us all was being shortlisted for the Healthwatch England Annual Awards 2020 - celebrating 'The Impact We Make With Partners'. This was for our work around the provision of health education to local residents in friendly non-clinical settings. Other highlights have included 'Behind Closed Doors', a study during Spring and summer 2020, looking at the impact of COVID-19 on local residents and, most recently, our

'Voice of the People' survey aimed at identifying local experiences of access to non-COVID related services and care during the pandemic. Responses to this survey are now being analysed and a report will be published in due course.

We, like everyone else, hope that the next twelve months will see a return to some form of normality. Amongst other things, we aim to recruit and re-engage with volunteers and look forward to a resumption of our Enter & View activities, while later in the year we will be hosting an online mental health forum. We'd also like to grow our Board. If you're interested in and have knowledge/experience of health and social care service provision; would like to be involved in the governance of our small but influential organisation; and have a say in the delivery of health and social care services in the Borough, we'd love to hear from you.

There's much to look forward to as we emerge from the pandemic and HBB is in good shape to respond to whatever surprises the future may hold!



John Wright
Chair, Healthwatch Bedford Borough

About us

Here to make health and care better

We are the independent champion for people who use health and social care services in Bedford Borough. We're 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.

What we do

We are commissioned by Bedford Borough Council. We deliver services which can be summarised as:

Influencing – helping shape the planning of health and social care services

Signposting – helping people access and make choices about care

Our goals



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.



Ensuring your views help improve health & care

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



Providing a high quality service

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

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.

Foreword from Director of Public Health



“Healthwatch Bedford Borough have offered strong strategic support during the pandemic and in doing so have once again shown their commitment to providing a strong voice for local people.”

This report shows how Healthwatch Bedford Borough have sought and represented the views of local people over the past year and worked hard to support local authority and NHS partners during what has been a most difficult period for us all. Healthwatch Bedford Borough have continued to work with Bedford Borough's diverse communities, seeking their experiences of health and care in the local area during the pandemic, and have used social media channels and their influence to promote important messages, focusing, for example, on COVID-19 key directives and vaccination processes, along with availability of services locally. Their signposting service has had an important role to play, continuing throughout to support people who may otherwise have struggled to access the services they have needed during such uncertain and challenging times.

Healthwatch Bedford Borough continue to represent and challenge the needs of the local population with commissioners and service providers. During last spring and early summer, they surveyed residents and released '**Behind Closed Doors**', a report looking at access to services and the challenges faced by residents. One of the

recommendations has been used repeatedly to highlight the duty to cover the communication needs of those that are protected by the Equality Act 2010, and recommended requesting Equality, Diversity & Inclusion (EDI) analysis of the need for, for example, BSL (British Sign Language) videos, foreign language recordings and Easy Read literature.

The pandemic has highlighted the importance of good communication, with the voices of residents, particularly the more vulnerable members of our communities, heard and acted upon. Healthwatch Bedford Borough have once again shown their commitment to providing a strong voice for local people. I look forward to working with you to ensure patient and service users' voices remain at the core of everything we do here in Bedford Borough.

Vicky Head

Vicky Head

Director of Public Health (a shared service across Bedford Borough, Central Bedfordshire and Milton Keynes Councils)

About our staff



Helen Terry – Chief Executive

Helen works with our Board on strategic development and supports them in meeting their responsibilities as Directors. She takes overall management responsibility, ensuring that the organisation meets its statutory obligations, strategic outcomes and operational objectives.



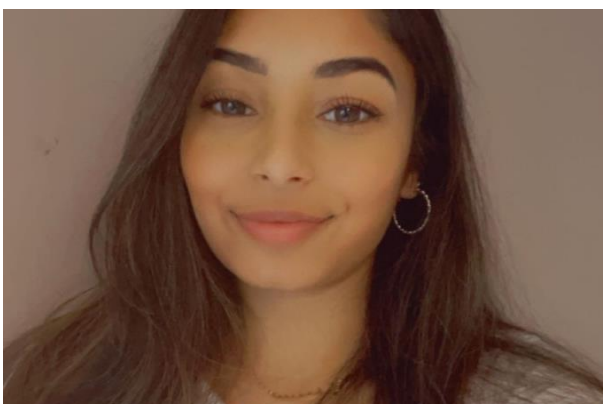
Emma Freda – Communications and Stakeholder Engagement Officer

Emma supports some of the most seldom heard and vulnerable communities in Bedford Borough and ensures that they are given a powerful voice in the areas of commissioning and service delivery. She also manages our communication channels.



Jennifer Foley – Signposting, Research and Insight Officer

Jennifer talks to people about their experience of services both complex and straightforward. She takes time to listen and explain options, which include referral to NHS advocacy. She captures data, looking for trends to inform the rest of Healthwatch's work.



Shanice Dadhria – Administrator and Assistant Volunteer Co-ordinator

Shanice provides full administrative support to the Board and staff at HBB. She updates the day to day running of both our website and Instagram accounts. She also provides full internal technical support to the HBB team.

About Bedford Borough



- **173,292** people live in Bedford Borough (ONS 2017).
- It is estimated that the population will increase to around **186,453** by 2030, with the fastest rise in ages 65 and over.
- **117,835** people live in the urban areas of Bedford (around two thirds) and **55,457** live in the surrounding rural areas (around one third).
- Up to **100 different ethnic groups** live in Bedford Borough.
- More than **1 in 3 people** in Bedford and Kempston are **from minority ethnic groups**, compared to less than 1 in 8 in rural areas.
- Average life expectancy in Bedford Borough is **79.5 years** for men and **83.5 years** for women but there are large inequalities in life expectancy depending on where people are born.
- Women from the most deprived areas are predicted to live on average **4.5 years fewer** than those from the least deprived. For men, the gap is **11.2 years**.
- Bedford Borough's ethnic communities have increased substantially in recent years; from **19%** in the 2001 Census **to 29%** in 2011.

Highlights from our year

Find out about our resources and the way we have engaged and supported more people in 2020/21.

Providing support

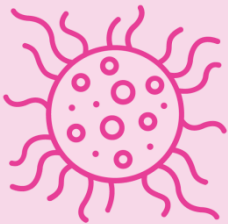


We heard from

124 people

this past year about their experiences of health and social care through our signposting service.

Reaching out during the pandemic



We have used our social media channels extensively...



1594 followers



1581 followers



485 followers



3264 hits on our website

Making a difference to care



We published a report entitled 'Behind Closed Doors' about access to Health and Social Care Services during the pandemic.

9 recommendations

were made, which have been acted upon.

Health and care that works for you



5 volunteer Directors

helped us to carry out our work.

We employ 4 members of paid staff

50% of whom are full-time equivalent.

We received

£94,760 in funding

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



Supporting you

Healthwatch Bedford Borough continued to provide support to people locally, especially during the pandemic. Many were impacted and struggled to access services or get the help they needed.

“My daughter has a mental health problem and we have been passed from pillar to post.. My daughter’s condition is worsening by the day.”

See how our signposting service made a difference to people throughout the year.

Supporting you

The onset of the pandemic has brought new challenges for all of us. Analysis by the Office for National Statistics (ONS) in 2020 showed that loss of independence, worries about money, and disability were factors in exacerbating the anxiety and loneliness felt by people during the pandemic. These findings were mirrored by our work with the general public. Callers mentioned the new burdens that they carried of social isolation, employment worries and financial stress. Knowing that frontline workers were bearing the brunt of the pandemic made it even more difficult for many to talk about their feelings. For those with long-term physical conditions, managing these were complicated by the pandemic. Patients spoke to us about the stigma of some physical conditions and the need they felt to downplay this with friends and especially at work. Other patients spoke about how traumatic it was to have a stroke or other medical emergency. With increased isolation due to the pandemic, HBB gave advice on services which people can self-refer to, including Bedfordshire Wellbeing Service and the social prescribing service.

Three themes have emerged from the areas that people told us about:

1. **A need for more Information**
2. **Access to GP Surgery's**
3. **Communication Issues**



For some people, the changes to the services they would usually use left them feeling abandoned – with infrequent telephone appointments not meeting their needs. HBB spoke to service users who felt that they had hit a wall; *'They just didn't seem to hear', 'She just didn't listen, if I raised my voice it was because I was upset.'* For others, the triggers of loneliness and employment issues became too much; *'I tried to tell them about my self-harm – it's a warning sign for me', 'I've been having nightmares – I could lose my house and lose everything.'*

For people with sensory issues including visual and hearing impairment, the pandemic has brought about additional difficulties in making themselves understood. The charity SignHealth published a report **'How has Coronavirus impacted deaf people'**. This showed that almost three quarters of respondents had found it difficult to access health care and around one third of D/deaf people were struggling with major mental health difficulties. The picture in Bedford mirrors the national picture. Deaf people have told us that they are excluded from using phone lines such as Samaritans. Whilst there are crisis text services, they feel that these can never replace the intimacy of a conversation. This has meant that the pandemic has been an incredibly isolating experience for many people in the Borough.

"I know that they are busy, but I am trying to contact them for a good reason."



A need for more information

At the beginning of the pandemic, we were contacted by people who were concerned about government guidelines or unsure about why they were not included in the government list of those at high risk. Some people told us they were particularly anxious because they had received conflicting advice from the hospital and their GPs. Without being identified as clinically vulnerable by their GPs, they were unable to get food delivered and felt they were forced into ignoring government regulations by going to the supermarket. We gave information on the government guidelines and this enabled them to return to their GP with clear information.

Some people with mental health problems said that they were not clear about their rights. For example, different rights regarding medication for mental health inpatients compared to those living at home/in a supported environment led to many questions. These included; whether someone was required to take medication when unsure of how well their body would react to this and whether or not a person living in the community could refuse medication. With planning in advance to avoid a future crisis in mind, HBB signposted to the charity Rethink for information, but also encouraged service users to return to their health professional to discuss this.

HBB also received calls from relatives concerned about family members awaiting assessment for Autism. They felt relatives had tried to mask their anxiety as the pandemic was such an urgent issue. However the anxiety soon resurfaced. With many autistic people experiencing increased anxiety levels, relatives asked for information on diagnosis, access to services and skills for living with Autism. Healthwatch explained the National Institute of Clinical Excellence (NICE) guidelines on both childhood and adult Autism and the criteria that is used in diagnosis. Healthwatch also signposted to Autism Bedfordshire, plus the National Autistic Society for information on Autism and also helplines on Education, Parent to Parent emotional support, school exclusion and transition support.



Access to GP Surgery's

As the pandemic developed, GPs made changes to how they interacted with the public, with more telephone appointments being offered. People told us that they felt let down by the service provided by their GPs. Consequently we referred several people to POHWER, the advocacy agency. People said they understood why GPs practices were taking extra steps – recognising that these were for their safety as much as anyone else's. However, it was the lack of conversation or understanding about types of appointments and how they were arranged that many found difficult.

Healthwatch England collated information from the concerns raised in Bedford and these responses formed part of a report published by them called '**GP Access Review During Covid-19**'. This report acknowledges that for some, the rapid move to telephone and video consultations has worked. However, one size doesn't fit all and there were people who had been disadvantaged by changes in the service. The report recommends an NHS Review of accessing primary care and for choice regarding types of appointments. We will continue to gather your views so that residents of Bedford Borough have their say.

"I asked for a face-to-face appointment, this was refused. In fact, it was worse than a refusal – they simply acted like I had not said anything. I never did find out how they decided who is seen and who is not. I think it's okay to ask that."

“I cannot agree to be available exactly when they ring.”



Communication Issues

Communication was a constant theme throughout the past year. We were told about *'rude'* receptionists. There was a worry that what was said to receptionists was not listened to and understood – *'what she said didn't reflect what I had said'*. One person said *'Talking to the Business Manager was hard work, none of the administrative staff responded to my queries with care and understanding. In fact, not responding at all seems to be the norm.'* Sadly, some people felt that the lack of face-to-face appointments lead to a late diagnosis with serious conditions discovered by other NHS teams once a condition had become debilitating. People felt their lives would never be the same again in such circumstances.

Access Bedford, the charity for D/deaf people and those who are hard of hearing, told us that they had noticed a big change, with more D/deaf people than ever contacting them as it became more difficult to make contact with other services. D/deaf people contacted Access Bedford when communication systems had broken down and GP surgeries were telephoning people who were unable to hear the phone or answer it. Healthwatch Bedford Borough were also approached by D/deaf people who reported that communication difficulties were a barrier to good quality care. One person who contacted HBB who was clinically extremely vulnerable was concerned about the impact that these administrative difficulties would have on receiving vaccines and secondary care. Another person was concerned about receiving an accessible high standard of care and another said that all the notes held on his communication needs appeared to have been lost after a merger between practices.



Responding to COVID-19

Healthwatch plays an important role in helping people to get the information they need, this has been especially pertinent throughout the pandemic. The insight we collect is shared with both Healthwatch England and local partners to ensure services are operating as well as possible during the pandemic.

This year we helped local people by:

- Providing up-to-date advice on the COVID-19 response locally
- Linking people to reliable up-to-date information on service provision
- Supporting the COVID-19 vaccine roll-out programme
- Supporting the community volunteer response
- Helping people to access the services they need



Responding to COVID-19



Overview

On the 31st December 2019, the World Health Organisation (WHO) was informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China. On 12th January 2020, it was announced that a novel Coronavirus had been identified in samples obtained from cases and that initial analysis of virus genetic sequences suggested that this was the cause of the outbreak. This virus is referred to as SARS-CoV-2, and the associated disease as COVID-19.

The past twelve months have been unlike anything that most of the population has ever experienced. At its worst, the COVID-19 infection rate in Bedford Borough peaked at 15,000 per 100,000, compared to 6,315 across the East of England.*

With residents ordered to only leave the house for essentials such as food, medicines, exercise or to care for a vulnerable person during the majority of the past year, the emotional and physical strain on many local families has been all too apparent. This sentiment was echoed when Healthwatch Bedford Borough conducted an analysis of the acute situation, to listen to local people during the spring and summer months of 2020.**

* Figures as of 31st May 2020

** See '**Behind Closed Doors**' survey, live from the 29th April 2020 to 22nd July 2020.

Hearing from you

Having surveyed and conducted telephone interviews with local residents from a cross section of communities, ages, abilities, genders and faiths, we undertook an in-depth look at the needs of our diverse population. 67.6% of respondents reported that information was available, however some people with additional communication needs stated that Easy Read documents and information would have been of great help. Respondents said *'when information is given, it is very confusing'* and *'I feel it's constant contradictions and we will never know the full truth'*. Many felt that they had nowhere to go to for advice and support. The subject of lack of BSL availability and Easy Read information for those with English as a secondary language, learning disability or low levels of literacy, continues to be a common theme in relation to feedback we receive.

96.9% felt that COVID-19 had a negative impact on their mental health



The 2020 data relating to the impact of COVID-19 on the health and wellbeing of local residents made for very stark reading. 96.9% of those who agreed to take part in telephone interviews, often conducted in their native language, felt that it had had a negative impact, with 70.3% of those interviewed reporting that it had had a great impact on their mental health and wellbeing. When looking at online responses, we noted that 86.9% of respondents stated that they felt the impact, with 24.6% of respondents reporting it to have had a great impact. When asked whether they felt able to access support in this area, 70.4% of telephone respondents said no; they did not, compared with 11.1% of online respondents who said no. This begs the question; when we know that many local communities have limited understanding of English and literacy challenges with many that are digitally excluded, are they being fully supported to access services and are they being given an adequate amount of choice, when most service delivery is offered through online provision?



"When information is given, it is very confusing."



Concerns over Vaccinations

With the introduction of COVID-19 vaccinations, policy makers faced a number of open questions about how to prioritise. How should the needs of the elderly be balanced against those with conditions? Which workers should be prioritised? What about unpaid carers? Eventually a number of cohorts were agreed that placed people living in care homes within the first cohort. With daily news showing ever increasing numbers of people being vaccinated, the system for calling people to vaccination centres and the priority list was not always absolutely clear. HBB explained the system of cohorts to callers. We helped by liaising with GP surgery's on behalf of people who were clinically extremely vulnerable but had not been given priority and others who had inadvertently been missed off the list. Feedback from one caller was *'Thank you so much for helping me sort my dad's vaccination. From contacting yourselves late on Monday to see when cancelled vaccinations would be rescheduled, you have kept me fully updated & got his vaccination date. He is so pleased and it seems to have given him a real boost! He said the whole experience was lovely.'*

One group that found the vaccinations difficult to organise was people with learning disabilities and their carers. COVID-19 had an acute impact on people with learning disabilities and their carers, as their usual care and support was no longer available from the start of the pandemic. The vaccinations were an important step back towards day-care and other support. At the Centre for Independent Living which provides day-care for people with learning disabilities, service users said they had been *'nervous'* about the injection but it was *'all fine'* on the day. Feedback from the centre was *'this makes such a life changing impact for our service users and their elderly parent carers. Your time is hugely appreciated.'* *

*see full case studies on following page

Case Studies

“The parents were extremely relieved to have someone take over the discussions with the GP practices and be invited for the vaccinations.”



“Two parents contacted me extremely upset and frightened that they had not been able to book vaccine appointments for their family members with moderate learning disability and complex healthcare needs. The family GPs said they could not give appointments and they had to wait in shielding until they were called. This prevented them from attending the centre for their care and support and was leading to social isolation and creating a pressure on the elderly parent carers. I contacted Healthwatch Bedford Borough for guidance and support who swiftly liaised with the individual GP surgeries and appointments were secured immediately for those vulnerable adults. The parents were extremely relieved to have someone take over the discussions with the GP practices and be invited for the vaccinations.”



“Parent was delighted and very grateful for the time and attention given to ensure her daughter with Autism could be included in the vaccination programme despite her profound needs.”

“Another parent contacted me at one of the Centres for support as she did not feel her daughter who has Profound Learning Disabilities and Autism was going to be able to cope in the Vaccination Centre environment due to her care and support needs. The GP had prescribed Diazepam to be given prior to the appointment, however the parent felt this was going to be very distressing and dangerous for her daughter. I spoke with HBB to seek some guidance and support to see if there was a possibility of providing an Autism friendly and secure environment for this young lady to have her vaccination whilst safeguarding her and maintaining her dignity. HBB liaised with the GP surgery who arranged a domiciliary home visit and the vaccine was administered in a space that was appropriate and safe for everyone. The parent was delighted and very grateful for the time and attention given to ensure her daughter with Autism could be included in the vaccination programme despite her profound needs.”



In summary

In everything we do, Healthwatch Bedford Borough consider the wider social determinants of health and its effect on the local population. This includes education and employment opportunities; literacy and language skills; housing needs; social networks; environment; good nutrition and social connections. COVID-19 has not changed this thinking. This has further enhanced our need to ensure that local communities' complex needs are evaluated by those commissioning and delivering services and that service user voice is at that heart of service provision. We are still looking at the data from our latest survey '**Voice of the People**' (live from 24th March 2021 to 2nd May 2021), which asked for people's views on:

access to primary care, digital exclusion, referral processes and communication, the ability to access mental health support, long term condition management, access to services for those with a Learning Disability and inpatient stays, elective surgeries and procedures several months on.

We have found very mixed responses from the survey. Some respondents have stated '**Very good service from the GP despite restrictions**' and '**adequate, given the constraints of COVID**', others still appear to be having very poor experiences, with recent respondents advising '**Absolutely diabolical.**' '**Watching the person I care for in pain and knowing there is not much I can do to help is heart breaking**' and '**I told my GP that ongoing issues with my eyes was getting me down. I broke down on the phone to him. He told me to Google talking therapies. No wonder we have a mental health crisis on our hands**'. With the added vulnerability that this pandemic has brought, this highlights the need to consider the emotional and physical health needs of those accessing, or trying to access, local services.

*'**Voice of the People**' full report to follow in due course.

Quotes from members of the public

"I feel it's constant contradictions and we will never know the full truth."

"Concerns regarding lack of communications and worry that virus could be spreading through bad practice at the local hospital in Bedford."

"When information is given, it is very confusing."

"No access to digital worlds. No smart phone or tablet, unable to text, email etc."

"I was admitted via NHS 111 on 2 occasions since the lockdown and I was refused a test, even though they placed me in the red zone."

"Very well and reassuring."

"Not enough support for the deaf community."

"As good as could be expected at the moment."

"My experience was positive. I have accessed the Smoking Cessation service and care from my GP during this period."

"Difficult. Like I was imposing and they had much better things to do."

"I told my GP that ongoing issues with my eyes is getting me down. I broke down on the phone to him. He told me to Google talking therapies. No wonder we have a mental health crisis on our hands."

"Always made to feel guilty about taking up the doctors time. Making a doctors appointment is always my last resort."

"Only interested in COVID."

"Quick to prescribe medication and end the phone call."

"Adequate, given the restraints of COVID."

"Very frustrating as he has several problems, each needing a different specialist doctor, and he didn't ever seem to speak to the same doctor/nurse/specialist twice."

Top four areas that people have contacted us about:



23% on GP services



6% on Dentistry



13% on Hospital care



14% on Mental Health



Early in the pandemic we heard from people about the lack of clear information and often inaccurate information. Our role became much more focused on providing people with clear, consistent and concise advice and information on our social media channels to help address people's concerns.

The key questions people were asking included:

- **How do I know if my parent is on the COVID-19 housebound vaccination list?**
- **What happens if I need a BSL Interpreter at a vaccination appointment?**
- **My GP practice aren't able to give me any information and keep referring me to 119 who don't have the answers. What should I do?**



Contact us to 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.healthwatchbedfordborough.co.uk

 **01234 718018**

 enquiries@healthwatchbedfordborough.co.uk



Volunteer Board members

At Healthwatch Bedford Borough we are supported by 5 volunteer Directors, to help us find out what people think is working, and what improvements people would like to make to services.

Volunteer with us



Are you feeling inspired? We are always on the lookout for new volunteers. If you are interested in volunteering, please get in touch at Healthwatch Bedford Borough.

www.healthwatchbedfordborough.co.uk

01234 718018

enquiries@healthwatchbedfordborough.co.uk



Hear from our Board member **John Wright**

Q1 – What do you think are the necessary characteristics of a great Healthwatch volunteer and why?

First and foremost, a great Healthwatch volunteer needs to have a belief in and passion for Healthwatch aims and its purpose. They need time, commitment and enthusiasm combined with a degree of positivity and importantly, they need to be prepared to get their hands dirty (figuratively speaking!). Like most volunteering roles, it doesn't help to feel half hearted about it! They need to like people and be likeable themselves, whilst having empathy for those requiring health and social care services. Ideally, but not essentially, a great volunteer would bring a knowledge and understanding of the health and social care sector, either from the point of view of a user or from that of a sector professional.

Q2 – Board members bring expertise, wisdom, strategic thinking, and their address

books. Can you tell us about what you offer the organisation?

As someone, who has worked in the public sector all my life, in both central and local government, including a number of years in adult social services, I bring an understanding of how government at all levels works. I have a good grasp of the legislative processes; am very familiar with committee based working; and have significant experience of planning, policy development and change as well as project and risk management. I have also managed multi-million pound budgets and been in positions of leadership throughout my career. Since retirement I have enjoyed making a contribution to and developing a background in the voluntary sector both as a Director of a small not-for-profit housing association and formerly as a trustee of a disabled sailing charity, before joining Healthwatch Bedford Borough in 2020 and assuming the role of Chair in the summer of that year.



Hear from our Board member **Anne Bustin**

Q1 – What do you think are the necessary characteristics of a great Healthwatch volunteer and why?

I think the most important things are time, knowledge of Bedford Borough and the communities that live here, and a real passion for the need for excellent health and social care services for everyone from birth to older age. These services should be accessible for all and the role of the volunteer is to guide and support people into getting the information and help they need.

They need to be good listeners, compassionate and able to give information in a clear and concise manner without giving personal views or being judgemental.

Q2 – Board members bring expertise, wisdom, strategic thinking, and their address books. Can you tell us about what you offer the organisation?

I have 36 years experience working in social care in Bedfordshire. 26 of these years have been working in the private sector managing learning disability, mental health and older person's services.

Over the years I have formed relationships with the local authority and providers of mental health and community services. I have contributed to various Boards in the past; Health and Wellbeing Board, Adult Safeguarding, Learning Disability Partnership and Mental Health Partnership Boards to name but a few.

I think I am an approachable person with good interpersonal skills. I'm passionate about ensuring people have access to receiving excellent health and social care and when it goes wrong, patients and their families should expect that concerns should be looked into with clear outcomes.

I have contacts that I am able to call upon if I need some advice or signposting in order for me to assist the public.



Hear from our Board member **Linda Hiscott**

Q1 – What do you think are the necessary characteristics of a great Healthwatch volunteer and why?

I think that volunteers need to be interested in people and their experiences and to do this, they must be good at listening, not jump to conclusions and be non-judgemental; no matter what they are told or hear. They also need to be empathetic as well as questioning and never assume, always check.

Q2 – Board members bring expertise, wisdom, strategic thinking, and their address books. Can you tell us about what you offer the organisation?

When working in the NHS I had a strong passion to ensure an equality of access to services for all, whatever their disability, accepting that this would often mean making adjustments. One size does not fit all. I believe that recognising this is key to

the work that HBB does on behalf of the people of Bedford Borough.

My working experience has mostly been with people who find communication difficult, so the skills I think I bring are influenced by this, for example listening and taking time to understand the whole situation. I am a firm believer that there is often more than one way to do things, or find a solution to a problem, and the best way wherever possible involves supporting people to resolve things themselves. I have found that it is possible to use this approach with organisational teams and individuals.

However, I think realism is also a key skill that I bring to the organisation. We need to use our position wisely to ensure the voice of the people is listened to, to ensure we bring about positive change in both health and social care.

And finally, I believe that recognising good practice is just as important and should be highlighted.



Hear from our Board member **Ashok Khandelwal**

Q1 – What do you think are the necessary characteristics of a great Healthwatch volunteer and why?

It is important for volunteers like me to ensure that we are driven by one's passion to improve the services. I do appreciate that one must understand public needs and deal with issues persistently, with patience.

A volunteer must be enthusiastic and must be eager to proactively support the organisation for the benefit of the public it serves. One must truly believe in equality, take diverse opinions and learn from these. The motto must be to serve in the best interest of the users of health and social care. Volunteers must provide selfless service to create the right impact for the greater good.

Q2 – Board members bring expertise, wisdom, strategic thinking, and their address books. Can you tell us about what you offer the

organisation?

As Director I work with the team of fellow Directors and dedicated staff providing leadership, guidance, and support as required. My previous experiences of over 40 years work in Health, Social Care and Probation enables me to provide intelligence and insight to make service improvement in line with local public opinion.

I am also Honorary Director in one of the largest Indian Doctors Associations and their training academy, who represent over 65 thousand ethnic doctors in the UK. This gives me access to thousands of medical staff working within the NHS and provides me with a great insight, focus being on patient safety and promoting equality and diversity. I represent HBB at the local Health and Wellbeing board and as a member of the GP leads meeting.

As a trustee of a local Hindu society, I understand only too well issues relating to this ethnic group.



Hear from our Board member **Tracy Cowan**

Q1 – What do you think are the necessary characteristics of a great Healthwatch volunteer and why?

I think to be a volunteer you need passion, integrity, great communication and to be a team player. Passion for the cause helps with some of the less interesting tasks, and integrity is needed as you are entrusted to carry the organisation's name, ethos, culture and possibly manage resources or facilities.

Communication is key to everything. We need to get our Healthwatch message out there and of course being part of a great team and making a difference is what makes it all worthwhile.

Q2 – Board members bring expertise, wisdom, strategic thinking, and their address books.

Can you tell us about what you offer the organisation?

As CEO of a charity whose main objective is to connect and care for the residents of Bedfordshire, I feel that my aims and objectives match with Healthwatch Bedford Borough perfectly. During my day to day activities, I also sit on other groups and Boards outside of HBB. I have had a wide and varied career with over 25 years in the Corporate and Education sectors and have managed day to day operations as well as leading international strategic teams. I feel this variety of experience helps me to support Healthwatch Bedford Borough in bringing that external knowledge back to enable creative and practical decision making. I also think I'm tenacious, love to take on a challenge and have a mad sense of humour, which I hope helps us to look at things in a slightly different way.

Finances

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

Income	£
Funding received from the local authority to deliver local Healthwatch statutory activities	94,760
Total Income	94,760

Expenditure	£
Operational costs	6,530.38
Staffing costs	90,155.79
Office costs	1,897.39
Total expenditure	98,583.56
Balance brought forward	£24,338.58

Healthwatch Bedford Borough are grateful to the Harpur Trust for a grant of **£4,330.00** awarded in December 2020. This grant will be drawn down in 2021/22 for the enhancement of our Information Technology infrastructure to meet new challenges posed by the COVID-19 pandemic.

Next steps & thank you

Next steps

As health economies begin to recover, restore and reset in the aftermath of the COVID-19 pandemic, Healthwatch Bedford Borough will continue to influence the provision of accessible and equitable health and social care services, with a focus on the following:

Top five priorities

- 1. Challenging the barriers to care and services faced by people who are seldom heard**
- 2. Bringing the voices of people living with mental health and emotional distress to the planning and delivery of services**
- 3. Championing the needs of children and young people to promote their physical and emotional health and wellbeing**
- 4. Engaging with the BLMK ICS* to ensure that the views of people from Bedford Borough are heard and acted upon at regional level**
- 5. Recruiting volunteers from the heart of local communities to support us in delivering an effective Healthwatch**

*Bedfordshire, Luton and Milton Keynes Integrated Care System

Grateful thanks

It would be remiss of us not to mention Laurie Hurn, who left the organisation in December 2020 after many years of loyal service. Laurie was instrumental in setting up Healthwatch Bedford Borough as a Community Interest Company, for which we owe him a debt of gratitude. We wish him all the very best in his retirement.

Our heartfelt thanks also go to local stakeholders including the public of Bedford Borough, local Commissioners and providers of health and care services and many others who have supported us during this past year.



Statutory statements

About us

Address and contact details of the organisation holding the local Healthwatch contract:

Healthwatch Bedford Borough, 21-23 Gadsby Street, Bedford MK40 3HP.

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

Community Interest Company No. 8385413.

The way we work

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

Our Board consists of 5 Directors who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. The Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local population. Through 2020/21 the Board met 14 times.

We ensure wider public involvement in deciding our work priorities. This is achieved through our engagement activities with our local communities, faith leaders, voluntary and charity organisations. Themes and workstreams are identified through our signposting, advice and guidance service and through communication with local residents using our digital and social media channels.

"A strong voice for local people"



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