



Healthwatch Milton Keynes

Annual Report 2020-21

Contents

Message from our Chair	3
About us	4
Highlights from our year	5
Case study: Access to NHS dental services	6
Case study: NHS dentistry at top of agenda	7
Case study: GP access inequality	8
GP access: reviewing progress	9
GP access: supporting patients	10
COVID: listening to patients during a crisis	11 - 13
The Campbell Centre	14
District Nursing ‘Mystery Shopper’	15
Speak out to help out	16
Partnership Boards with MK Council	17
Myth busting during COVID 19	18
Cancer prosthetics	19
Rethink mental health report	20
Building a dementia-friendly city	21
Our volunteers	22-23
Our finances	24
What next?	25
Summary of our activities	26
The way we work	27

Message from our Chair

This was a truly unprecedented year for the people of Milton Keynes. Few could have foreseen, back in January 2020 the significant, and for many devastating impacts COVID-19 would have on our lives. I want to start by extending my deepest sympathies to those within our community that have lost loved ones. No one has been left untouched by the pandemic.



For many months, Healthwatch Milton Keynes were unable to undertake one of our key duties: to meet residents, users of health and social care services, and their carers face-to-face. At the beginning of the first lockdown our team recognised that accurate, high-quality, and up to date information about accessing support and care was paramount. We increased the frequency of our e-newsletter, which provided both our members and the wider voluntary sector with valuable information about getting the help people needed and raising awareness of how the health and care system was responding.

We responded quickly to moving what engagement we could to virtual platforms which ensured that Milton Keynes Council's Carers, Mental Health, Older Persons and Dementia Partnership Boards could still meet. Our other events, which included 'Speak out to help out' events and COVID vaccination 'myth-busting' sessions demonstrated the responsiveness of our organisation to listen to the voice of our population and provide information that supported people to make informed decisions around COVID-19.

Undeterred by the crisis, the Healthwatch Milton Keynes Team shared your experiences with health and care leaders, continued our work to support MK to become a Dementia friendly city and ensured that your right to register with a GP without identification did not get lost during periods where accessing GP services became more difficult for everyone.

The Healthwatch Milton Keynes team have shown remarkable resilience in adapting to the restrictions arising from COVID-19, and their achievements have been exceptional in the most difficult of circumstances. The challenges of COVID were accompanied by a number of staffing changes, including the absence of our CEO for a period of maternity leave, and I would like to commend all the team for their adaptability, flexibility and endurance over the past year.

As I stand down from the Board of Trustees, I would like to thank my colleagues on the Board for their continued contribution and commitment, and to extend my good wishes to Mike Newton and George Assibey as they too relinquish their roles as Trustees. The support and encouragement of our Commissioners at Milton Keynes Council as we have navigated the challenges of the past year have also been greatly appreciated. Last but not least, thanks must go to our wonderful volunteers for their patience and staying power during this time of reduced activity. Priorities for the coming year have been set, with a key focus on outreach and engagement, and I wish everyone connected with Healthwatch Milton Keynes further success with the process of rebuilding the changing landscape of health and social care.

A handwritten signature in black ink, appearing to read 'Mary Legge'.

Mary Legge, Chair

About us

Here to make health and care better

We are your health and social care champion in Milton Keynes. We're here to find out what matters to people who use health and social services in our area. We 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 their experience or seeks advice to get a high quality service and to understand the difference their views make.



3 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.



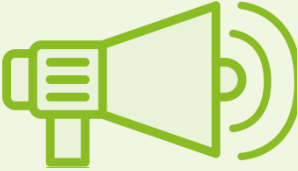
“Local Healthwatch have done fantastic work throughout the country during the COVID-19 pandemic, but there is more work ahead to ensure that everyone's views are heard. COVID-19 has highlighted inequalities and to tackle these unfair health differences we will need those in power to listen, to hear the experiences of those facing inequality and understand the steps that could improve people's lives.”

Sir Robert Francis QC, Chair of Healthwatch England

Highlights from our year

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

Reaching out



We heard from

1,495

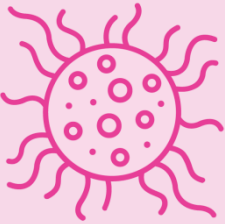
people this year about their experiences of health and social care.

We provided advice and information to

117, 525

people this year.

Responding to the pandemic



We engaged with and supported

99,098

people who approached us with queries and concerns relating specifically to the COVID-19 pandemic.

During the pandemic, traffic to our website increased by

97%

Making a difference to care



10 volunteers

helped us to carry out our work. In total, they contributed **10** days' of their own time. In addition, we have 10 volunteers who support our Enter and View visits to health and social care services in Milton Keynes. COVID restrictions meant that all visits were put on hold.

We employed 4.5 full time equivalent staff

In addition, we have 7 Trustees on our Board.

Health and social care that works for you



We published

8 reports

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

Recommendations

Key recommendations were made to Healthwatch England, the Care Quality Commission, and the Equality and Human Rights Commission around the continuing issues around GP registrations. Another recommendation we made regarding 'flesh tone' prosthetics has been picked up by a national cancer charity who have created a petition to get this issue before parliament.



Case study: Access to NHS dental services

We were contacted by a patient who had seen their dentist, agreed a treatment plan but was diagnosed with cancer before the dental work could start. A series of events took place that made any dental treatment almost impossible.

After almost a year of chemotherapy and major surgery, the COVID -19 lockdown resulted in the widespread closure of dentists. After a period of recovery, the patient was then placed on the Shielding List. At the patient's next dental appointment with their original dentist, they were referred to a private practice in Harpenden to carry out a root canal treatment. The dentist advised it was beyond their ability to provide the treatment on the NHS. We raised this issue with the East of England Dental team.

The dental team told us that patients may be referred for private root canal treatment if the treatment was complex, or the dentist felt under skilled. More complex root canal treatment on the NHS is limited in the East of England due to a lack of dentists qualified to deliver that treatment. We were concerned that the patient had not been supported to access a local NHS qualified dentist. NHS East of England dental team organised an appointment with a local NHS dentist who carried out the treatment. Happily, the patient reported back to us how impressed he was with the service, and thanked us for ensuring he received the NHS treatment he needed, locally.



Now: NHS dentistry at the top of the agenda

Due to the extraordinary number of people who contacted us about the difficulty they were having getting access to a dentist this year, we got in touch with the Regional East of England NHS England/ Improvement (NHSE/I) Head of Commissioning. We presented the issues people were facing, and asked what was being done to improve the situation and what we could tell people when they called us. We were invited to meet with commissioners to discuss solutions to the problems people were facing.

When looking at the more general barriers to accessing a dentist, we were able to explore the current access pathway, and understand the pressures and constraints facing dentists during the pandemic.

We updated our website to reflect the advice, and shared accurate, patient-friendly information across our social media to explain to patients why it was so difficult to get a dentist, as well as how and when to seek treatment.



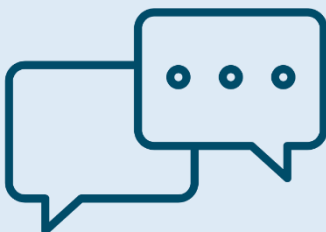
Thank you so much for the kind help and guidance you have afforded me and that has allowed me to gain a pretty sound logical and practical understanding of the correct NHS processes, policies and procedures that I should expect regarding my ongoing Dental health care requirements

MK Dentistry Patient

Our meetings with dental commissioners became a weekly event. We also extended the invite to all local Healthwatch in the East of England. With accurate information to hand, we were able to effectively and appropriately signpost people to the services they needed. This reduced the dentistry-related calls and emails we were receiving by 90%. The information was reaching people effectively, who then shared that information by word of mouth and the dental practices in Milton Keynes are now being monitored more effectively by the regional Commissioning team.

It has been incredibly valuable to us and our residents to have an NHSE/I team so willing to spend time listening to patient experiences. In turn, the team have had the opportunity to explain the reason for delays and barriers to accessing services, and crucially, how and when services would be improved.

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.healthwatchmiltonkeynes.co.uk

 01908 698800

 info@healthwatchmiltonkeynes.com



Case study: GP access inequality

The challenge of being able to easily register with a GP has been one of our working priorities for Healthwatch Milton Keynes, and the wider Healthwatch network since our creation in 2012. During the COVID-19 pandemic, this issue has become a matter of urgency, when using walk-in centres or Accident and Emergency departments have not felt like a safe option for people.

Back in 2019, we published our ‘Right to Access Healthcare’ report, which shone a light on the issue of registering with a GP without identification. This year we carried out a review of the recommendations that we set out in that report. We are acutely aware of the impact that the pandemic continues to have on the NHS and primary care clinical teams but the problem of not being able to access a GP persists across Milton Keynes. People not registered with a GP will experience a different level of health care to those who are. Gaps can include getting timely diagnoses, treatments, investigations and scans, as well as access to vital national immunisation programmes and testing. We were concerned to find that two years’ later, most Milton Keynes GP practice websites still include registration information that isn’t in line with national guidance. We found that 53% of practices still insist on a minimum of two forms of identification to register with the practice. This ongoing, incorrect requirement continues to discriminate, resulting in increased health inequalities and poor health outcomes for Milton Keynes residents.



GP access: reviewing progress

We looked at what action was taken, and what progress has been made against the recommendations we published in 2019 and were concerned to find that even with positive action taken by clinical commissioners and the local GP Federation in response to our report at the time, GP registration issues for residents has not improved for those who cannot provide multiple forms of identification or proof of address.

We have reissued the recommendations of our findings to Bedfordshire, Luton and Milton Keynes Clinical Commissioning Group, and to the Milton Keynes GP Federation.

We've made recommendations to Healthwatch England to escalate the issue to NHS England/ Improvement, and to the Care Quality Commission, as we recognise it is not a problem unique to Milton Keynes.

Because this issue has a disproportionate impact on the more vulnerable and deprived people in our communities, we also highlighted the issue to the Equalities and Human Rights Commission. They acknowledged our work and advised us that they were working with Healthwatch England to run seminars for local teams.

NHS England have recently produced their own version of the 'right to register' card that Healthwatch Milton Keynes developed and distributed from 2019. This has a phone number and email address that either the patient, or GP reception staff can call to get the registration issue resolved on the spot. We welcome this approach, as it allows NHS England to monitor where people are having continued problems with GP registration.

We will continue to monitor this issue, and continue to distribute the NHS 'right to register' cards locally as GP practices begin the recovery phase of the pandemic.



The NHS have launched their own version of our 'right to register' cards



If you or someone you know is struggling to register with a GP in Milton Keynes, we're here to listen and would like to hear from you.



GP access: Supporting patients and taking a national approach

Because nothing has, in effect, changed for residents of Milton Keynes when trying to register with a GP, we are making the same recommendations as in 2019, but we're going further.



I recently moved home and...informed the practice of my new address. [They] wrote to me at my new address to inform me I would be taken off their register within 30 days. Under normal circumstances this would be perfectly understandable, however, I found it extremely difficult to register with a new doctor at my new address because new GP practice refused to register me without proof of address... and passport IDs which I don't have.

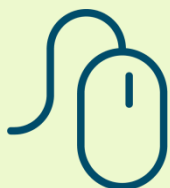
Milton Keynes resident

Why take it to a national level?

We've chosen to raise these local issues to Healthwatch England because we know that some local improvements may rely on a stronger national effort by NHS England. There are also concerns that some of the guidance for GPs can be contradictory.

Milton Keynes GP Federation provided Protected Learning Time (PLT) in September 2019, which specifically focused on registering vulnerable people. This was valuable but focused on common misperceptions that it is only homeless or vulnerable patients that need support to access a GP, when the reality is, the registration process itself is a real, hidden issue that can, and does affect anyone without the documentation GP practices insist upon.

In a time where equitable access to primary care is more important than ever, we hope that patients' rights will be upheld.



To find out more about GP access go to our website:

www.healthwatchmiltonkeynes.co.uk/report/2019-06-06/my-right-healthcare-gp-registration-and-access

Listening to patients during a crisis



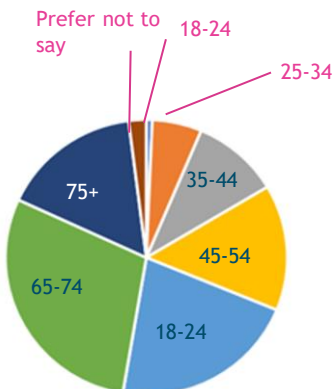
Healthwatch Milton Keynes plays an essential role in helping people to get the information they need about health and care services. During the COVID-19 pandemic, people have come to us, more than ever, to ask for help and information about their care. This year we have helped almost 100,000 people in Milton Keynes by:

- Providing up to date advice on the COVID-19 response by health and care leaders and their services
- Linking people to reliable up-to-date information
- Supporting the vaccine roll-out
- Supporting the community volunteer response
- Helping people to access the wider health services they need

To help us understand where improvements were needed to the COVID response, and to ensure those who are vulnerable could be heard, we carried out an ‘experience of care’ survey.

During the first lockdown of 2020, we surveyed 298 Milton Keynes residents between 4 May 2020 and 30 June 2020. We asked questions about their experience of health care services during the start of the pandemic and reported directly to Health and Care leaders so they were able to address immediate concerns and use people’s experience to learn lessons about the ongoing response to the pandemic.

Who responded?



- In total, 30 respondents identified themselves as carers.
- The majority of responses were from people of a White British background, with 25 people telling us they were from minority ethnic backgrounds and 29 preferring not to answer.

If you could change one thing about your experience..."

We asked people who completed the survey to tell us what changes would make a difference to their experience of healthcare during the pandemic.

"Better co-ordination and easier access to advice from a human being - not a pre-recorded message or online information which doesn't fit your circumstances. Access to, and help with very practical things at the beginning - shopping, prescriptions etc, was difficult and worrying"

"Better access to mental health support for all, inclusive of those who are not necessarily on the high risk who may suffer/have suffered with mental illness."

"Change and clarify public policy concerning social care"

"Centralise all the information, too many places to find it. Merge all the organisations information together"

"Communicate with patients 'at risk' of any age, who receive regular medication to ensure they understand the way their GP is working. Or to their carer (or family member who may not be able to have contact). GPs and practice staff are under great pressure. But elderly / disabled patients need support. Especially if they do not have family nearby"

"Care [should be] increased rather than decrease and some proper understanding of what isolation can do to someone with dementia"

"Relaxation on data protection so relatives could call 111 and other services on parents/friend behalf"

"The care systems need to change and the NHS should take it back and then they can work hand in glove"

"Keeping us properly, and timely, updated with the state of affairs. This should come from local sources, GPs, local health professionals... An occasional contact by phone (we had one such) would be more than welcome to enquire on our circumstances."

The top four areas that people have contacted us about:



35% on GP services



22% on dentistry



20% on hospital Care



18% on vaccines and testing

Case study



Image credit: Maxime Rsze, Unsplash

Early in the COVID-19 pandemic, we were contacted by **425** people struggling to access clear and accurate information about their care. Our role during the pandemic was focused on providing people with clear, consistent and concise advice and information on our website to help address people’s concerns and help them get the care they needed.

The key questions people were asking included:

- How can I find an NHS dentist?
- How do I get to see my GP?
- When will my hospital appointment happen?



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.healthwatchmiltonkeynes.co.uk



01908 698800



info@healthwatchmiltonkeynes.com

Making an impact: The Campbell Centre, MK, Enter and View



The Campbell Centre is a 38-bed acute inpatient mental health unit.

In 2020 we carried out an Enter and View of the Campbell Centre. As a result of our recommendations, the Centre has made the following changes:

- **Garden improvements** are progressing. The Centre is collaborating with Arts for Health, patients and carers to develop a plan and Green Gym have agreed to support the work.
- **Complaints and compliments** processes are being improved with staff at all levels now attending weekly community meetings so that feedback to patients can be given directly. 'You Said We Did' posters have been displayed to highlight key improvements that have been made.
- **'Think family' is being embedded** to allow views from family and carers to be recorded on individual care plans and on the 'Know you' form.
- **A 'Staff huddle'** now takes place three times a day to review any emerging issues and promote safety for all. This includes a daily review of any occurrence of restraints being used.
- **Consultant care** is becoming more visible and all ward rounds are now posted at the start of the week, so that patients and their families know when they will be seen.
- **Referrals tracker** development plans are in place so that a patient's journey can be tracked effectively. Improvements to the 'Welcome Pack' are being made so that patients know what to expect whilst at the Centre.

We look forward to hearing how these changes have improved things for patients when we carry out our planned review visit later this year.

Read our Enter and View Report

<https://www.healthwatchmiltonkeynes.co.uk/report/2020-06-02/campbell-centre-patient-experience-review>



The Campbell Centre, Milton Keynes.

District nursing and our 'Mystery Shopper'

In December 2021, patients told us they were experiencing problems accessing the Single Point of Access (SPA) Community District Nurse service, alongside issues with the community referral process.

The service is run by Central North West London (CNWL) Community Health Services. We met with CNWL and agreed to carry out an independent review, in the form of a 'mystery shopper' exercise, to see where improvements were needed.



Image credit: Luke Jones, Unsplash

What we did

We worked with our volunteers to develop three detailed scenarios for our mystery shoppers to use when contacting the service. This enabled us to establish how the service operates and how the caller would be signposted. There was confidence that none of the scenarios would require a district nurse to attend to a patient in person.

Our volunteers called the service at various times of the day and week, between January and March 2021.

What we found

Our volunteers reported that all staff were polite and professional. There were slight inconsistencies in the advice given on occasions, and a much longer call waiting time around shift handover periods.

The service has documented staff guidelines, which appeared to be adhered to during our mystery shopping exercise.

Our recommendations

The service provides more training sessions for staff to maintain a consistent approach to signposting and customer service.

The service undertakes a review of staffing levels at handover times to ensure that sufficient call operators are available to meet demand.

We plan to review the Community District Nursing service again over the next 12 months.

#SpeakOutToHelpOut

This year, the social restrictions and lockdowns needed to keep us all safe during the pandemic have prevented the Healthwatch Milton Keynes team from meeting face-to-face with people in our community. But patients and the public have still needed a voice. So, we created a series of online sessions, dubbed #SpeakOutToHelpOut.

We ran three events so that people still had opportunities to discuss their experiences and needs when it came to general healthcare and pandemic-specific issues.

‘Flu - How was it for you?’

We asked people to share their stories about getting the flu jab. We provided advice and signposting for the public, and we heard anecdotal evidence that we shared with the Public Health flu steering group meetings.

‘Does that make sense?’

People talked to us about their experiences of communication from health and social care services - was it helpful or confusing? Was it in an accessible format that people could understand? Thanks to the patients who shared their stories with us, we were able to share their suggestions and feedback with Milton Keynes Hospital who have now made some improvements to their communications with patients.

‘Through the Looking Glass’

This discussion gave people with friends or family in care homes a chance to tell us about the impact the restrictions were having on them and their loved ones. It was heart-warming and encouraging to hear how hard the staff at some care homes had worked to keep families connected during lockdown.



The staff at all times kept within the regulations and also made sure that families stayed connected...via weekly face time/ telephone calls at agreed times to suit the family and arranged visits outside the window, so that Mum could see her grandchildren regularly.”

Daughter of a local care home resident

Partnering with MK Council to champion patients



Milton Keynes Council run ‘Partnership Boards’ that are local forums for patients, their families, healthcare providers and commissioners to recommend improvements to services and advise on joint development of health, social care and related services. The Boards ensure that local health and social care services are aligned to the policies, objectives and strategy of the Milton Keynes Health and Wellbeing Board.

For the last three years, Healthwatch Milton Keynes have supported Milton Keynes Council’s Partnership Boards for Mental Health, Older People, Carers, and Dementia by holding regular meetings, providing independent Chairs to run meetings and encouraging patients and professionals to engage in positive discussions about the design and delivery of local health and social care services.

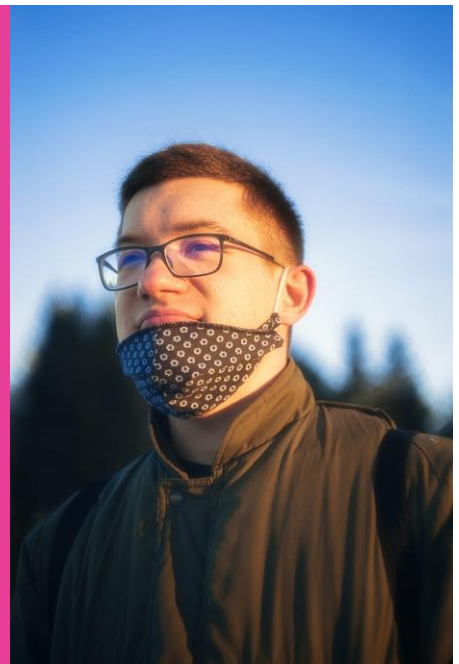
To comply with COVID-19 restrictions, we moved the Partnership Board meetings to a virtual setting to ensure that the patient’s voice was not lost during the pandemic.

We developed separate forums for individuals, the voluntary sector and professionals. This helped to provide confidential spaces where people could speak freely about their experiences. It also allowed professionals to address patient issues in a supportive space with their peers.

We ensured that feedback was delivered to the decision makers, and we demonstrated to patients how their involvement was instrumental in affecting change.

Case study: collaborating for change

One patient described to us the gaps in communication between addiction and mental health services. We arranged for leaders of both services to collaborate and commit to working together to improve their patient communication. They also made improvements to the care received by people who used both services.





Myth-busting during COVID

As the NHS roll-out of the COVID-19 vaccine programme began, we were concerned that many members of the public remained sceptical or unsure about whether they should accept the COVID vaccination.

To challenge and counter some of the myths, worries and misconceptions in the community, in December, we hosted a presentation by Dr Tarlochan Grewal (Raj), to help the public gain a better understanding of vaccinations and the new technology behind the NHS-approved COVID vaccines (at that time, Pfizer/BioNTECH and AstraZeneca/Oxford University).

Dr Raj also explained the differences between the various tests (PCR, antigen, rapid-flow) and how they worked.

Our aim was to provide the public with information that would allow them to make informed decisions about whether to have the vaccination or not - based on facts.


Almost 30 people attended Dr Raj's presentation, including the Mayor of Milton Keynes, who then shared the information in his weekly Facebook update - reaching hundreds of Milton Keynes residents.

Cancer prosthetics campaign

The background

In July 2019, as part of our work on the NHS Long Term Plan, we highlighted the unconscious inequality issue of prosthetics for cancer patients.

Currently, cancer patients from ethnic minorities are not offered prostheses in a range of skin tone colours. There is only one 'generic flesh tone'. Permanent prosthetics can be customised, but it takes considerable time between surgery and being healed sufficiently to even be measured for a permanent prosthetic. Added to the waiting time whilst the prosthetic is made, this can amount to a long period of psychological distress. Recovering from any surgery is difficult, without adding the psychological trauma of having lost a very visible part of yourself. We are unable to achieve change locally, as contracts to supply prosthetics are awarded at a national level.

 “Patients with cancer already deal with a lot of physiological, financial and emotional stress after receiving their cancer diagnosis. NHS England and Improvement should provide and make resources available for everyone - regardless of their skin tone so an already difficult journey is as seamless as possible, hence we are advocating for more funding to be provided in order to provide equal cancer care for all.”

Mary Oladele, Founder at Cancer Education UK

Cancer Education UK came across local press coverage of our work on the issue (in the 'MK Citizen'). They contacted us to find out more, and earlier this year announced their petition and an 'awareness week' where they campaigned for other types of skin coloured prosthetics to be readily available to ethnic minorities. We gladly allowed Cancer Education UK to share our evidence, as part of their mission to tackle inequalities for patients with cancer, who are treated differently due to their race, culture, or their background.



To find out more and sign the petition head to:

www.healthwatchmiltonkeynes.co.uk/news/2021-05-17/campaign-cancer-prosthetics-ethnic-minorities

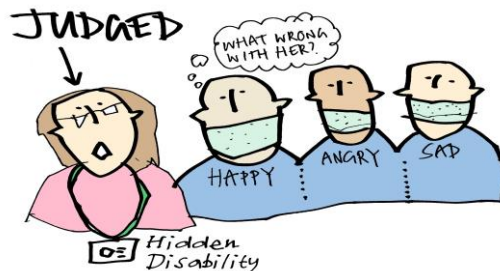
“Its been quite lonely”



Rethink Milton Keynes supports 118 people of all genders aged between 18 and 84 years of age, who are affected by mental distress.

During November and December 2020, Healthwatch Milton Keynes supported Rethink Milton Keynes to engage with their patients and understand what was working for them and what could be improved. In total, 30 patients gave consent for their Peer Support Worker to share their experiences of life during the pandemic, including lockdown. We also offered an independent, anonymous option for people to provide honest feedback about Rethink services. This was taken up by 15 people.

It was also an opportunity to hear, and to share, some of the techniques and strategies that Rethink patients had found helpful during the pandemic. These thoughts and suggestions formed the basis for our recommendations.



The illustrations used throughout the original Rethink report, including the image above, were created by Jon Ralphs during focus group sessions to explore patients' thoughts and feelings about how things were for them during the pandemic.

What patients told us: Communication is key

- Communication was the biggest area of concern for people, and almost every patient we spoke to said improvements were needed. This is a persistent issue, as we've made specific recommendations around communications in previous reports for Rethink.
- Listening is a crucial element of effective communication between healthcare providers and patients. Shared decision making is a key component of the patient-centered health care promoted by the NHS. It allows clinicians and patients work together to make decisions and select tests, treatments and care plans based on clinical evidence, that balances risks and expected outcomes with patient preferences and values. Most of the people we spoke to included 'listening' in their comments about what could have been done better.

Find out more at www.healthwatchmiltonkeynes.co.uk/news-and-reports



Building the UK's first dementia-friendly city

Milton Keynes Council (MKC) have embarked on an ambitious project to make Milton Keynes a community where people with dementia are understood, respected, and supported.

As a member of the MKC Dementia Pathway Improvement group, Healthwatch Milton Keynes was invited to carry out a survey of people with dementia, and their families and carers, to hear what they thought the priorities should be to make this a reality.

Our aim was to understand the wider themes that affect people, such as transport, and health and social care services. In the years ahead, discussions will focus on the detailed improvements and experiences around each topic and will involve the wider community.

We worked with the MKC Dementia Day Services and the Alzheimer's Society Dementia Connect Local service, to ensure the survey reached those who have firsthand knowledge of dementia.

If you are asked to complete a survey or come to a meeting about Dementia Friendly MK, please do take part - your voice will make a difference!



Our volunteers

At Healthwatch Milton Keynes we are supported by 10 volunteers who help us find out what people think is working, and what improvements are needed.

This year our volunteers:

- Created digital content for our social media.
- Carried out digital research on local services.
- Helped with the local volunteering efforts of shopping and collecting prescriptions for those self-isolating or shielding.



Get involved!

Would you like to become a member or volunteer with us? Please get in touch:

www.healthwatchmiltonkeynes.co.uk

01908 698800

info@healthwatchmiltonkeynes.com



Launching our Instagram, Fatema

“Volunteering with Healthwatch has given me the chance to do something truly positive for others. I enjoy juggling my volunteering with my studies and the team are really supportive. Launching the Instagram page means that I can reach out to young people in the community. It’s been fulfilling to see people gain the benefit of our posts and to know I am helping their future.”

Digital research, Jill

“I enjoy research and subscribe to various health organisations. Combined with Twitter, I have found that passing on topical information helps the HW team to signpost. I can’t commit to particular hours, but I can contribute at my own pace and have taken part in some Zoom meetings. I feel this to be both rewarding and interesting. There are many ways to volunteer, it helps me to feel like I am helping to make a difference.



Community engagement, Dianna

“I enjoyed the ‘secret shopper’ exercise because it’s important to be sure that the structures underpinning services available to ordinary members of the public are flexible and supportive. My involvement in HW means I am part of the solution, not just a cog in the problem. As an older member of the public, I’m delighted to be able to be involved in assessing the way the system works, for me and others like me. Having a voice is a real joy.”

Finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012. This year Healthwatch Milton Keynes moved to an accruals based accounting system, recognising that our activities need the flexibility to spread income and expenditure across financial years. The COVID-19 pandemic meant that our expenditure was reduced because of restrictions on our face-to-face activities. We are investing our savings in additional staff to relaunch outreach in 2021-22.

Income		
Funding Received from Local Authority	£158,644	Core Grant from Milton Keynes Council
Additional Income- Milton Keynes Council Partnership Boards	£9,120	Covering the period July 2020 - June 2021
Additional Income - Enter and View	£11,250	
Donations	£5	
Total		£179,019

Expenditure	
How much it costs to run Healthwatch Milton Keynes	
Operational Costs	£ 35,613
How much we pay our staff	£ 128,710
Total	£ 164,323
Balance carried forward 31st March 2021	£ 39,150

Balance at 31 st March 2020 Detail	
Fixed Reserves	£20,000
Funds from balance committed to 2021-22 budget	
Bills paid in advance 2020-21	£65.00
Grant Income brought forward for April – June 2020	£ 2,280
Additional Outreach Staffing for Covid recovery	£ 15,651
Petty Cash carried forward	£ 22.00
Cash Total carried forward	£1,132

What next?

Top three priorities for 2021-22

- Relaunching our outreach into the Milton Keynes community
- Enter and View in our Care and Residential Homes
- Your voice within the Integrated Care System

Our next steps.

The COVID-19 pandemic has significantly affected the way we've been able to engage with and listen to residents, patients and their carers. Whilst we've been successful in moving many of our engagement activities online, we know that many people do not have any access to online platforms, and have therefore struggled to get their voice heard. Inequalities in health and care have truly been laid bare over the last year.

As we now begin a gradual departure away from national restrictions, our first priority for the people of Milton Keynes is to get back out there and listen to you directly, ensuring that the people who face the biggest inequalities and barriers get their voice heard. Because we were unable to deliver our services in the normal way during the pandemic, we are investing all funding carried over from last year into ensuring that the people that face the biggest inequalities and barriers to sharing their experiences with those that pay for and provide health and care services receive the most support. As part of this work we'll be working on behalf of the CQC to listen to the voices of people in Milton Keynes of no fixed address.

Residents of care homes have been significantly impacted by COVID-19: separated, isolated, with many struggling to cope. Our second priority, therefore, is to resume our 'Enter and View' activities, in collaboration with Milton Keynes Council. We will share our findings and recommendations for how homes, and the wider health and care system can improve the experiences of residents. As restrictions lift further and face-to-face activities become the norm, we will begin our follow-up activities on recommendations from Enter and View reports published prior to the pandemic.

"As we begin to move away from national restrictions, we'll be getting back out there and listening to you directly, ensuring that the people who face the biggest inequalities and barriers get their voice heard."

Our third priority will be working with other local Healthwatch against the backdrop of a changing health and care system. This new system will be referred to as an 'Integrated Care Partnership'. The commissioners of health services in Milton Keynes have now transitioned into a 'system-wide' single commissioner for Bedfordshire, Luton and Milton Keynes. This year, health leaders will be designing what this fully integrated care system will look like, both at 'scale' across Beds, Luton and Milton Keynes, and 'at place' in Milton Keynes. Our priority is to ensure that patient experience always takes centre stage: we will continue to champion those who are marginalised, on the periphery, and struggling to be heard.



Maxine Taffetani, Chief Executive Officer

Summary of our activities

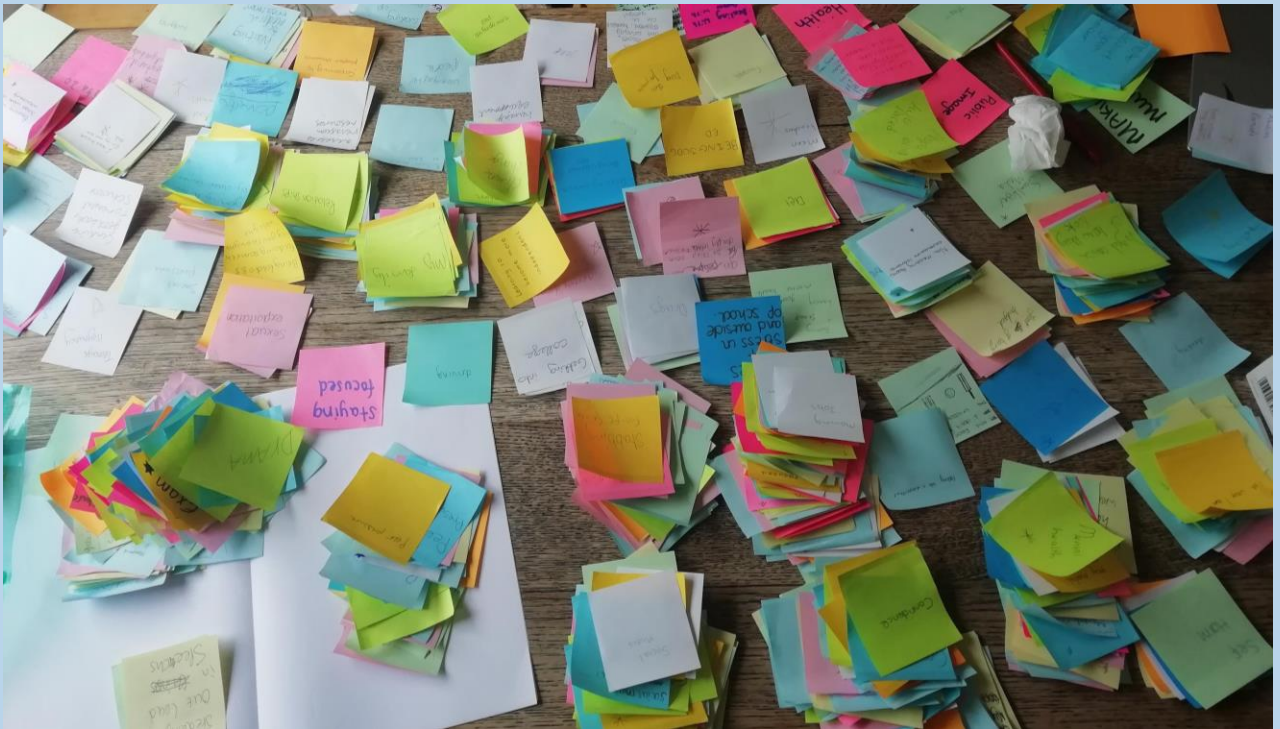
When you share your experiences of health and care with us we work hard to influence real improvements to services. Here is a summary of our projects and the impact we achieved.

Project / activity area	The impact of our work
Experiences of Care during COVID-19	Local commissioners set up specific workstreams to listen, and respond to insight and information Healthwatch across Milton Keynes, Luton and Bedfordshire gathered from the public about GP access and COVID vaccination
Enable Health and Adult Social Care Partnership Boards for Mental Health, Carers, Older Persons and Dementia to thrive on a virtual platform	Service users and their wider communities were given accurate, up to date information about how to access services with changes/restrictions imposed on them during the COVID-19 pandemic.
NHS Dentistry	NHS regional commissioners are piloting ways to include dentistry in care pathways that are paid for by local commissioners of healthcare. For example, someone with diabetes would have dental care integrated in their treatment/ condition management plan, rather than being a service completely separate to their care plans.
'My Right to Healthcare' review	NHS England have produced their own standardised 'Right to Register' card for GP services.
District Nursing Service Single Point of Access (SPA)	The service updated its patient leaflet and its website to improve access to the service by patients

Responses to recommendations and requests

All providers we asked to respond to requests for information or recommendations, did so. 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.

We escalated the review of our 'My Right to Healthcare' report to the EHCR (Equality and Human Rights Commission). They responded to inform us that they were going to arrange a series of workshops with Healthwatch England to explore the issues the report outlined. There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.



The way we work

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

Our Healthwatch Board currently consists of 7 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 and its committees met 12 times and made decisions on matters such as prioritising the collection of experiences of care during the COVID pandemic

We ensure wider public involvement in deciding our work priorities. We drew from the experiences shared with us by the public to develop activities that sought to improve access to NHS dental care.

Methods and systems used across our work to obtain people's views and experience.

We use a wide range of approaches to ensure that as many people as possible have the opportunity to 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, a WhatsApp text service, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

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 our website, provide printed copies to our members and ask professionals and our partners in the voluntary sector to make the report widely available.

Healthwatch Milton Keynes
Suite 113, Milton Keynes Business Centre
Foxhunter Drive
Linford Wood
Milton Keynes
MK14 6GD

www.healthwatchmiltonkeynes.co.uk

01908 698800

info@healthwatchmiltonkeynes.co.uk

 [@Healthwatch_MK](https://twitter.com/Healthwatch_MK)

 Facebook.com/HealthwatchMK

 <https://www.instagram.com/healthwatchmiltonkeynes/>

 <https://www.linkedin.com/in/healthwatchmk/>

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

Thank you for your support

“By sharing your experiences with us about your care during COVID, GP services, your dentist, hospital and social care, we’ve been able to highlight the changes needed to make long-lasting improvements that will have a positive impact on peoples’ lives.”

Maxine Taffetani, CEO Healthwatch Milton Keynes