

# Annual Report 2021-22

Championing what matters to you



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# Message from our chair

The Covid-19 Pandemic has continued to be a huge factor in Healthwatch Coventry's work. We played an important role in ensuring that information, including details of vaccination programmes and venues was available for local people using our website and social media and independent voice. We also helped resolve problems for individual people meaning more people were vaccinated.

As with most other organisations our work has been affected by the limitations imposed through various stages of the pandemic. Our small, hard working staff team have nonetheless provided information and listened to local people.

The restrictions that were imposed on all our lives have eased, if not disappeared to a large degree, but the virus has not gone away. We were advised that we will have to learn to live with it and that is proving to be true.

Front line health services are under pressure. Accessing GP services is an ongoing cause for concern. We are listening to peoples experiences of what's happening in Coventry. We are seeing that some services have more issues than others and we are passing on information from local people to those who are working to improve things.

My thanks to our staff team, led by our senior officer Ruth Light, and to our team of volunteers who fulfil our work programme throughout the city. As the NHS undergoes significant structural change, Healthwatch Coventry remains ready and committed to representing the voice of patients and the wider public.



*“For many people appointments over the phone or on a video link work well. But many also find it does not meet their needs and are unable to communicate with NHS services in this way. Tackling inequalities of access and outcomes must be the focus in health and care and Healthwatch is well-placed to support this focus.”*



**Stuart Linnell MBE**  
**Healthwatch Coventry Chair**

# About us

## Your health and social care champion

Healthwatch Coventry is your local health and social care champion. From Tile Hill to Walsgrave and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information.

### Our vision

A world where the health and care we need is centred around people and people are partners in care.



### Our mission

To make sure people's experiences help shape health and care and make it better for everyone.



### Our values

- Listening to people and making sure their voices are heard.
- Including everyone in the conversation – especially those who don't always have their voice heard.
- Analysing different people's experiences to learn how to improve care.
- Acting on feedback and driving change.
- Staying independent and impartial while working with partners to get things done.



### How we run

The local charity Voluntary Action Coventry [www.vac Coventry.org.uk/](http://www.vac Coventry.org.uk/) has the grant funding agreement from Coventry City Council to host Healthwatch Coventry.



# Our year in review

## Reaching out



**405 people**

came to us for clear information about topics such as local Covid-19 vaccination

This was a **21%** increase from last year

**48,720** visits to our website advice and information articles

Visits to our website increased by over **400%** overall

**497 people**

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

## Making a difference to care



**Our report of mystery shopping of GP phone systems**

highlighted the problems of long and complicated phone messages and confusing options. All before eventually getting through.

GP leaders acted on our suggested changes.

## Health and care that works for you



We're lucky to have

**31** outstanding volunteers, who gave **775 hours** to make care better for our community.

We're funded by our local authority. In 2021-22 we received:  
**£201,000**

## How we've made a difference this year



To support the Covid-19 vaccination programme we set up a vaccination information webpage and updated this several times a week. There were **38,280** visits to this page.



When people struggled to see their GP, we made sure that people's experiences were known by the health regulator and local decision makers.



With non face to face appointments being used a lot, we continued to use our findings and feedback from local people to help services understand barriers.



We supported the #BecauseWeAllCare campaign which saw 54,000 people come forward to tell Healthwatch across England about issues they faced with services.



We tested access to rapid Covid-19 tests and vaccination booking so we could provide guidance to local people and let the NHS know of issues.



We kept a check on issues accessing NHS Dentistry and supported Healthwatch England's work to get the Government to act to help those struggling to see an NHS dentist.



2430 people engaged with us through social media.



We made recommendations for action to improve GP phone accessibility after testing this out.

# Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and help services to improve.

## We have:

- Built links with local voluntary groups
- Started to get our information back into community settings
- Linked with groups via social media eg Facebook
- Shared patterns in feedback we received about local service to help improve care for everyone.



## Getting through to GP practices

Thanks to people sharing their experiences of local GP services and the help of our volunteers. We identified ways to improve the phone systems used by GP practices.

Our volunteers did a mystery shop to ring all the local GP practices to see what the phone systems were like and how long it took to get through.

We found that some practices had good phone systems and some were off putting. The tone of messages could be negative and some were confusing. Generally we were able to get through, but for some practices we could not.

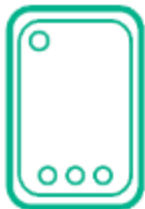


*“The voice changes from a female automated voice to a male automated voice then back to a female automated voice. Sounds very unwelcoming and not personal”*

- Healthwatch volunteer



Some phone messages were harder to understand because they:



- used electronic voices rather than human voices
- gave a lot of information
- used complicated words or jargon
- were spoken too quickly
- had lots of different options

Some of the things that we can see will help:

- The tone used should be welcoming and positive – the same information can be given in either a positive or negative way
- Repeat key information eg phone numbers to give people more time to write it down if they need to
- Check the message - by ringing as a patient every time the message is updated This can identify things like a volume issue or fast pace.

### What difference did this make

GP practices used our findings and suggestions to improve their phone messages. Some that were getting new phone systems used the information when planning this.





## Helping people access Covid-19 vaccination

**Thanks to people sharing their experiences and questions we helped people get their Covid-19 jabs and the NHS vaccination effort made changes to improve access.**

The Covid-19 vaccination programme was complicated. It had lots of different stages aimed at different groups of people.

There was a lack of clear, local information, so we set up our own webpage to give information about who could be vaccinated, when and at which sites. This page was visited **38,280 times**.

We also helped by

- Answering peoples' individual questions
- Taking issues to the local Vaccinating Coventry Group to flag problems so these could be sorted out by the NHS
- Raising issues about responses from the local vaccination problem solving route. People said they were not getting answers. Changes were made to how it worked.



*“Communication from the NHS was disjointed to start with. There was often a lag between national announcements and vaccination being locally available and this was confusing. Healthwatch Coventry met a local need for those with questions or who could not organise their vaccination. We made sure the NHS understood real experiences.”*

Ruth Light, Chief Officer



### What difference did this make

- People could access local information about vaccination which wasn't available elsewhere.
- NHS and public health organisations improved their information and communication with local people
- Those planning Covid-19 vaccination in Coventry used the experiences we shared to guide the planning of new vaccination sites and outreach.
- People who weren't able to book or weren't called as they should have been were vaccinated. Their problems getting vaccinated were solved - eg some housebound people or people with weakened immune systems.



## Other ways we have made a difference for the community

We make sure our previous work makes a difference and that the experiences of local people are used to shape their services.



### Improving care over time

**Change takes time. We often work behind the scenes with health and care services to consistently raise issues and push for changes**

- The local Hospital opened a new car park making hundreds of extra spaces available for staff and visitors. This was the final piece of plans to address issues with car access to the hospital, which Healthwatch has been talking to the trust about for over eight years. People have complained about lack of spaces and layout problems that have made it hard for them to get to appointments. The changes made have improved access.
- We kept talking to local GP leaders and GP practices about making improvements to GP websites so it is easier for people to find information. Some local GP groups have brought in new website designs this year that are clearer and easier to use.



### Getting services to involve the public

**Services need to understand the benefits of involving local people to help improve care for everyone**

- We produced ideas for how people and communities could be better involved and what Healthwatch could do.
- We worked with NHS leaders on plans for listening to local people.
- We talked to those in the NHS and council who work to involve local people about the challenges and what would help.
- We scrutinised and challenged decision makers on the level of public involvement in service review and development. We called for this to be a much much bigger focus.

# Giving information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need.

## This year we helped people by:

- Linking people to reliable information they can trust and helping people to access the services they need
- Supporting the Covid-19 vaccination by providing up to date information and problem solving for people
- Working with the local NHS complaints advocacy service so people get help to raise their complaint
- Adding lots of advice and information to our website including regular updates on Covid-19 rules; the NHS app; Covid passes, vaccination and testing
- Reaching 120,221 people through our social media channels.



## Signposting people who needed additional support

Omar\* contacted Healthwatch to say that he should have a third dose of Covid-19 vaccination and he had a letter from his hospital doctor to prove his diagnosis for this. Omar could only have the Astra Zeneca vaccination due to his health condition.

We helped Omar to raise his problem with those running the local vaccination programme. Within three days Omar replied to say he was having his vaccination.



*“Thank you for taking the time to reply - you’re the first person to have made the effort!”*

### Top 4 topics of contacts

**28%** Covid-19 vaccination

**20%** Access to services

**10%** Concerns about quality of care

**6%** Communication issues

## Helping find the answer

Barinder\* contacted us because NHS orthodontic treatment stopped when a dentist closed. She could not get an answer to how the treatment was going to be carried on by another dentist. So she was left in the middle of her treatment.

We contacted NHS England to raise the problem. This helped identify that there were patients whose records had not been passed on when the dentist closed. We connected Barinder to the right person in the dental team.



*“Thank you, you have made things clear”*

\* Names have been changed

# Volunteers

We're supported by a team of amazing volunteers who are the heart of Healthwatch. Thanks to their efforts in the community, we're able to understand what is working and what needs improving in NHS and social care.

## This year:

- We recruited new Clear Information volunteers to review information aimed at local people by health and care to see how easy it really is to understand. They did their first piece of work
- New members joined our Steering Group which oversees what we do
- Our volunteer Chair took on a second term as Chair and was busy talking to NHS leaders about how new NHS structures will work and was involved in the recruitment processes for new NHS leaders.

**Our volunteers gave 775 hours of their time**





**Lauren**

“As a volunteer with the Clear Information Group my time is spent ensuring information about Coventry's healthcare resources is accessible to all. Joining the group has allowed me to give back to a city that has welcomed me with open arms - I really feel part of the community!”



**Orowo**

“I am part of a team that assesses health documents providing information to the public and service users, ensuring that information provided is simple, concise and comprehensible. It has helped me to build my skills of analysis and teamwork. With Healthwatch, I truly feel like an integral part of a unit.



**Veronica**

“I like being able to assist health and social care service users in better communicating their needs and experiences to the appropriate authorities resulting in improved outcomes. Healthwatch has aided in the improvement of my communication skills, particularly in terms of providing clearer and easier to understand information.”



**Interested in volunteering?**

We are always on the lookout for new volunteers, so please get in touch today.



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

024 7622 0381

[yoursay@healthwatchcovnetry.co.uk](mailto:yoursay@healthwatchcovnetry.co.uk)

# Finance and future priorities

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

Income		Expenditure	
Funding received from local authority	£201,000	Salaries and staff costs	£129,900
Additional funding	£0	Publicity & marketing	£1,207
		Other operational costs	£5,124
<b>Total income</b>	<b>£201,000</b>	Management & overheads	£40,200
		Contingency	£16,000
		<b>Total expenditure</b>	<b>£192,431*</b>

NB The Healthwatch funding agreement with VAC runs August – July rather than on the financial year

\* There has been a salary underspend due to vacancies this is being used to support Healthwatch delivery

## Next steps

The pandemic has shone a light on the impact of existing inequalities in health and care. It highlights the importance of championing the voices of those who all too often go unheard.

Over the coming year our goal is to help reduce these inequalities by making sure your voice is heard, and decision makers reduce the barriers you face, regardless of whether that's because of where you live, income or race.

New NHS decision making bodies start from July and they have a focus on integrated care. We will be working to help make sure that the culture of how work is done begins to change so that the many possibilities the Integrated Care System has are made real. The change must be felt by local people in how they are involved in health and care.

### Top three priorities for 2022–23

1. Access to NHS services including impact of non face to face appointments
2. Local people being heard and involved in plans for NHS and care services
2. Better quality (relevant and understandable) information for the public about local NHS and care services

# Statutory statements

## About us

**The contract to provide Healthwatch Coventry is held by:**

Voluntary Action Coventry  
27-29 Trinity Street  
Coventry  
CV1 1FJ

Healthwatch Coventry 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 Steering Group consists of nine members who are volunteers and three that are representative for local voluntary groups. They provide direction and oversight to our work.

The Group ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Through 2021/22 the Steering Group met five times and made decisions on matters such as signing a memorandum of understanding with Healthwatch Warwickshire and agreeing changes to Healthwatch work priorities.

We ensure wider public involvement in deciding our work priorities. We collate what local people tell us when they contact us for information with the feedback people give us online through our website and social media; and outreach discussions and any other routes.

We use categories to identify themes and apply our work prioritisation process which is overseen by our Steering Group.

More information about Healthwatch Coventry decision making is available at: [www.healthwatchcoventry.co.uk/about-us](http://www.healthwatchcoventry.co.uk/about-us)



## Methods used to obtain people's views and experience

We use a 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 2021/22 we have been available by phone, by email, provided a web form on our website, 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:

- Setting a clear focus to our engagement/outreach activities based on knowledge of where we need to develop
- Developing partnerships with voluntary organisations to recruit link volunteers and to gather experiences from diverse communities



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 and make it available in other formats.

## Responses to recommendations and requests

We had two 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 to visit any NHS or care services. Therefore, 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. Therefore no special reviews or investigation resulted.

## Health and Wellbeing Board

Healthwatch Coventry is represented on the Coventry Health and Wellbeing Board by our Chair Stuart Linnell and Chief Officer Ruth Light. During 2021/22 our representatives have effectively carried out this role by participating in all of the meetings held and raising matters such as issues related to local Covid-19 vaccination and GP access.

In addition they attended joint meetings between the members of the Coventry and Warwickshire Health and Wellbeing Board and discussion sessions on the role of the boards in new NHS decision making structures. Written summary reports from these meetings are discussed at Healthwatch Coventry Steering Group meetings.

## 2021-2022 Outcomes

Project / Activity Area	Outcomes and changes made to services
Survey reaching 84% dentists to gather information about access to NHS treatment	Information provided to people to help them find a dentist. Information shared with Healthwatch England to inform national campaign
We received 78 contacts in 5 weeks from people who are patients of Holbrook’s Health Team GP practice about access to services	We collated information and shared it with the Care Quality Commission (CQC) and local Clinical Commissioning Group (CCG). The CQC inspected the practice. We set up a follow up meeting with the GP practice to see how the action plan for improvement was going. The CQC called a risk summit. Further issues were identified and actions taken.
Integrated care record public information reviewed	More was done to make sure information on how care records are shared was clear for local people. New formats including easy read were published. This showed our earlier feedback was acted on.
Gathered 8 stories/case studies of carers’ experiences.	This enabled carers’ stories to be heard by those who run and plan services.
Clear information review of new GP practice booklet	Our Clear Information volunteers provided detailed feedback on a new print booklet to explain the GP practice team leading to significant changes to the draft and a much shorter leaflet. Written in Plain English.



**healthwatch**  
Coventry

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