



Together

we're making health
and social care better

Annual Report 2022–23

healthwatch
Leicester

healthwatch
Leicestershire

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"In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better."

Louise Ansari, Healthwatch National Director

Message from our Chair

I am very pleased to present the Annual Report for Healthwatch Leicester and Healthwatch Leicestershire for the year 2022–2023.

The past twelve months have been very busy as Covid-19 restrictions were lifted we were able to restart our Enter and View programme. During the year we visited a number of GP practices and Care Homes across Leicester and Leicestershire. Following patient feedback, we also carried out a two-day visit to the Emergency Department at the Leicester Royal Infirmary together with our colleagues from Healthwatch Rutland. We will work closely with Leicester Hospitals to implement the recommendations.

The local Clinical Commissioning Groups (CCG) were replaced with the new Integrated Care System and we have secured our seat on the Integrated Care Board to ensure that patient voice continues to be heard.

We have developed a program of outreach which has allowed us to work more closely with the voluntary and community sector organisation. We have enhanced our reach via social media including the use of Facebook, Instagram as well as continual improvements to our website.



Harsha Kotecha
Chair of Healthwatch Leicester and Healthwatch Leicestershire

Members of the Health Advisory Board (HAB) continue to attend board meetings held by providers and commissioners across Leicester and Leicestershire to ensure that issues affecting patients and the public are taken into consideration. We have continued to challenge the local NHS about access issues around getting GP appointments, dental care, and long waits for ambulances.



“May I take this opportunity to thank all who have engaged with us in the last twelve months, who shared their experiences and the providers who have made changes because of our feedback.”

About us

Healthwatch Leicester and Healthwatch Leicestershire is your local health and social care champion.

We make sure NHS leaders and decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.

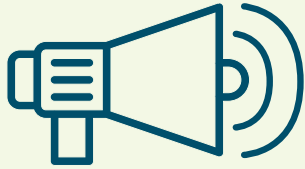


Our values are:

- **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.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

Our year in review

Reaching out



8368 people

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

21799 people

came to us for clear advice and information about topics such as mental health and dentists.

Making a difference to care



We published

20 reports

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

Our most popular report was

Homelessness - what happens when you are discharged from hospital? which aimed to

understand the experience of hospital admissions and discharge of homeless people.

Health and care that works for you



We're lucky to have

18

outstanding volunteers who gave up **65 days** to make care better for our community.

We're funded by our local authority. In 2022-23 we received

£299,672

which is **0.1% more** than the previous year.

We currently employ

8 staff

who help us carry out our work.

How we've made a difference this year

Spring

- ❖ Carers Week gave us an opportunity to reach carers to hear their views on services. We partnered with the team at Voluntary Action South Leicestershire (VASL) to attend carer events across the county and listened to **165** carers.
- ❖ Our Chair went on local radio to highlight the concerns around 'delays in emergency care at A&E'. We then visited the Adults Emergency Department at Leicester Royal Infirmary in September and heard from **139** people.
- ❖ During Mental Health Awareness week, we supported the campaign across social media, linking to our male suicide project. New Music Beats collaboration song 'The Game' launched to get young people talking about their Mental Health.

Summer

- ❖ We attended **45** events and engaged directly with **2165** people during our summer tour. People told us about challenges of accessing GP Practices, NHS dentists and hospital services.
- ❖ With the COVID-19 pandemic disproportionately impacting Bangladeshi and Pakistani communities and vaccination uptake remaining consistently low, we reached out to these communities to hear their stories.

Autumn

- ❖ Living in a rural community can create challenges for people accessing health and social care services and information. We visited libraries and community groups across the districts and boroughs to hear what matters most for local people.
- ❖ We are on the bins! We launched a promotional campaign on refuse lorries across Hinckley & Bosworth. There is a fresh look to the bin lorries of Hinckley thanks to our new campaign to reach more rurally isolated people.

Winter

- ❖ Over **200** young people have shared with us their views on mental health services. We have raised concerns with the service provider about young people's services.
- ❖ We spoke to over **350** people about local Dementia Services and the impact that COVID-19 has had on local service provision.



10 years of improving care

This year marks a special milestone for Healthwatch. Over the last ten years, people have shared their experiences, good and bad, to help improve health and social care. A big thank you to all our Healthwatch Heroes that have stepped up and inspired change. Here are a few of our highlights:

How have we made care better, together?

Vaccine confidence

Our research exploring vaccine confidence with people from different backgrounds provided vital lessons for public health campaigns.

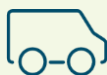


NHS admin

We highlighted the negative impact poor NHS admin can have and recommended five principles for services to improve people's experiences.

Patient transport

NHS England announced improvements to non-emergency patient transport services thanks to public feedback.



Waiting list support

After we and other organisations called for an urgent response to hospital waiting lists, and better interim communication and support, the NHS set out a recovery plan to address the backlog.

NHS dentistry

We continued to voice public concerns that improvements to NHS dentistry are too slow, leaving thousands of people in pain.





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 feed this back to services and help them improve.

Living with Dementia

New research shows that one of the big challenges for people living with dementia, their families, and carers, is to be able to access information and support services that is appropriate and relevant for their individual needs, at the right time.

Local people shared their views and experiences of Dementia services in our new report 'Living with Dementia in Leicester, Leicestershire and Rutland'.

In the report we have identified wide inconsistencies across Leicester, Leicestershire and Rutland (LLR) in the way diagnoses are made and what services are available and accessible for people living with dementia from the first suspicions of memory problems onwards.

We wanted to explore what local services currently exist for Dementia service users and to identify any gaps in provision as identified by people who arrange and use them.

We heard from more than 350 people living with Dementia, their carers and families. Thanks to people sharing their experiences we have identified wide inconsistencies in the way in which services are available and accessible for people living with dementia.

Our recommendations:

1. Improved access to primary care services where the ongoing physical and mental health care are taken seriously
2. Timely referrals and appointments for more specialist care
3. Appropriate, timely and professional information about the progression of dementia, future planning, care, benefits and support services, from both the health and social care sector and the voluntary and community sector
4. Easier access to more responsive social services
5. More equitable access to Admiral Nurses and voluntary and community groups for support and social activities.



“We were aware that many non-urgent dementia services were stood down during the pandemic and not all were stood back up. We need to aim to inform those entering the dementia care phase what support is available. We need to ensure there is easily accessible information about dementia, how to get it diagnosed, what to do with people with dementia who resist diagnosis and what options are available for treatment, care and generally managing the patient before and after diagnosis.”

Harsha Kotecha, Chair

What difference will this make?

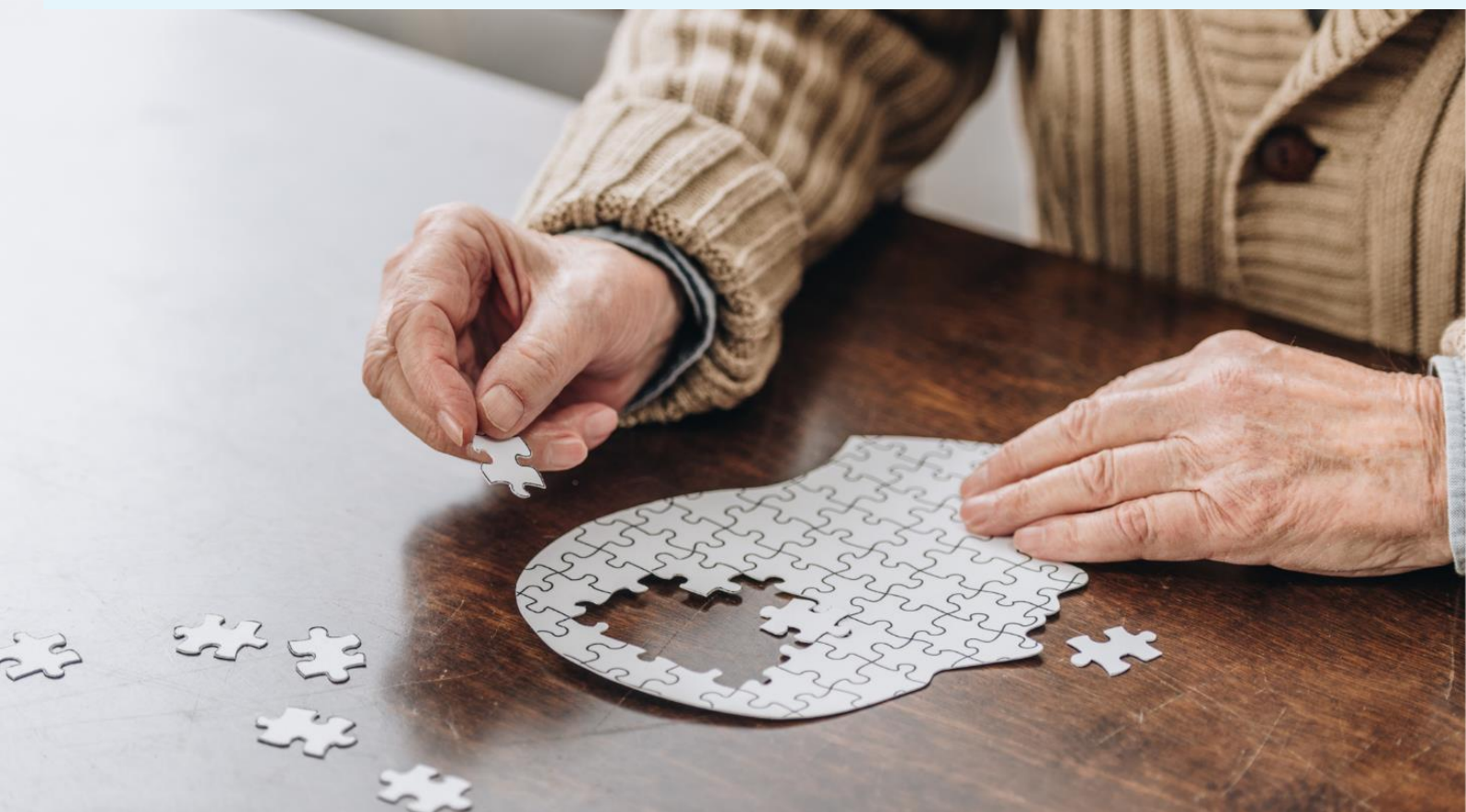
Supporting and helping those living with dementia and their carers remains a priority for LLR's health and social care organisations which includes the Dementia Programme Board. The LLR Dementia Programme Board aims to address all the recommendations and the report findings will inform the development of the revised Dementia Strategy in 2024.

Graham Johnson and Bev White, Co-Chairs, Dementia Programme Board said:

“

The timing of this pre-commissioned research has allowed us to integrate the findings into our LLR Joint Dementia Strategy Refresh ensuring that the wide breadth of voices of those living with dementia and their carers is captured in our strategic priorities.

The priorities contained within the Dementia Strategy, and informed by your research, will be delivered by individual partners who will report their progress to the Board. This way, we can ensure that we are making a difference to people living with dementia.”



Access to Emergency Care

People have raised concerns around delays in emergency care at the Emergency Department (ED) at Leicester Royal Infirmary (LRI). Patient feedback shows praise for medical staff and treatment once seen. However, patients are sharing increasing struggles when navigating emergency care systems.

Following our visit to the ED, we have been able to highlight the patient and visitor experience and push for improvements.

Some of our recommendations:

1. Review and improve the patient check-in process.
2. Ensure that all signage within and outside the ED is clear and easy for people to follow.
3. The hospital and primary care partners to review how people are being signposted to ED and other services including Urgent Care Services across the city and counties.
4. The hospital to effectively communicate the ED process to people who are waiting for treatment and ensure that patients understand how the triage system works when they check in. Explore options for providing key information in other languages.
5. The hospital to work with health partners to explore a system wide collaboration to improve patient journeys through the health system and avoid duplication of medical assessments.

“It was also obvious that this is a very busy department with a lot of people telling me they had come either because they could not get a GP appointment or because their GP had sent them. There is some evidence that ‘Getting it Right First Time’ might not be happening and this is putting more pressure on the system.”

Authorised representative observation



What difference will this make?

The hospital is committed to taking the report findings on processes and environment through the relevant team to establish where further improvements can be made.

Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Lipoedema



We worked with a local Lipoedema support group to help raise awareness of the condition amongst the medical profession and other women who may have the condition misdiagnosed or undiagnosed. Working with medical students from Keele university, we undertook surveys to assess awareness of the condition. One was with medical students at Keele and St George's (London) universities, and one was aimed at healthcare allied healthcare professionals to gauge their knowledge and understanding of the condition. 35 medical students and 102 allied health professionals responded to the surveys and as a result of their responses two information posters were developed and distributed to the universities, GP surgeries and clinics across Leicestershire. In addition, a survey focused at identifying people with symptoms resulted in Healthwatch signposting people to the Lipoedema support group.

Mental Health – Lived Experience



Services need to understand the benefits of involving local people to help improve care for everyone. We have been working with Leicestershire Partnership NHS Trust (LPT) as part of the People's Council to ensure more local voices are involved in decision-making. Working together, LPT have now established paid lived experiences roles.

Dentistry



Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change. Over the years, we have been raising the issue of access to dentistry. We have continued to work with the NHS Local Dental Committee (LDC) and provide concerns from patients. We have advocated for clear advice for patients and details of local NHS provision. We have produced up to date advice which has meant people who need urgent treatment know their options and have clear information.



Hearing from all communities

Over the past year we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently, to gather their feedback and make sure their voice is heard and services meet their needs.

This year we have reached different communities by:

- ❖ Engaging with polish communities at their local centre.
- ❖ Listening to parents at 'little fishes' children play group.
- ❖ Speaking to Bangladeshi and Pakistani communities about their experiences of Covid-19 vaccinations.
- ❖ Listening to local people at the Leicester Mela.
- ❖ Collaborating with LOROs and reaching people in rural areas.
- ❖ Talking to Somali women about how they access primary care services.
- ❖ Meeting with the Deaf community to understand how they navigate the care system.
- ❖ Reaching out to Asylum Seekers and Refugees to share their feedback.

Covid-19 and the impact on communities

When we reached out to ethnically diverse communities to understand their experiences of the pandemic particularly in relation to living in areas of social deprivation, vaccine hesitancy and the possible barriers encountered in accessing health care, we found that people were unsure whether to take the Covid-19 vaccination due to potential side effects and hearing mixed messages from friends, family members and their communities.

We spoke to adults from ethnically diverse groups, in particular South Asian and Black communities. People told us that having the correct information from professionals, talking to GPs and having information in other languages made it easier to understand more about the vaccinations. People wanted to be informed so that they could make choices about their care.

People received and sought healthcare and in particular Covid-19 information from multiple sources and had most trust in information directly from the NHS and GP surgeries. They also had trust in information from friends and families and community leaders. We recommended that information should be developed that helps people understand vaccinations. Creating better communication and information for diverse communities could be vital in the case of health issues such as a future pandemic but could also be helpful in all health and social care messaging.

“I feel like we are at the other side of the pandemic, it will always be around us and now we have to just accepted it.”

Accessing Health and Social Care Services – Interpreters

As part of our access to Health care project we wanted to explore how different groups have been accessing their health care and what that experience has been like for them. We met with members of the over 50s Deaf Club and they told us that they found it extremely difficult during the pandemic. All members of the group have difficulty with their GPs. The main reason for this is the interpreter that is provided or the lack of one. They feel frustrated with the Health and Social Care system. Wearing a mask was difficult because some of them had difficulties breathing and it was not easy for them.

“We can’t book our services in the same way hearing people do. It’s not available to us or goes so wrong we have massive anxiety and don’t go again, or we can’t explain what’s going on and we give up. They give us things to read but sometimes we can’t read and then we feel embarrassed.”

Somali women from communities in Leicester shared their concerns about local GP’s, dentists, hospitals and maternity services. There were concerns about lack of interpreters being provided and not being heard.

“GP receptionists are not allowing interpreters for people using their service and there is no communication to patients about changes in staff. People have to move all the time because they are being treated badly in their GP and causing them to start all over again with translation and culture.”

We will be working with system leads to look at how people can access interpreters when accessing primary care based on the patient feedback.



Advice and 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. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

This year we've helped people by:

- ❖ Providing up to date information people can trust.
- ❖ Helping people access the services they need.
- ❖ Helping people access NHS dentistry.
- ❖ Distributing 1000 signposting directories across Leicester and Leicestershire.
- ❖ Holding information pop up stands in libraires and public places.
- ❖ Supporting people to look after their health during the cost-of-living crisis.



ReSPECT for people living with Dementia

Members of a local memory café shared with us that health professionals (especially from Glenfield Hospital and Leicester Royal Infirmary) had filled in Do Not Resuscitate (DNR) forms for their loved one living with dementia without checking about capacity or power of attorney with family members. This had caused some distress for members and we wanted to find out from the hospital what the process was.

We contacted the hospital and they shared that they use ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) which aims to create a summary of personalised recommendations for a person's clinical care in a future emergency. This is completed by the patient, family and health care professional.

Following the concerns that have been raised actions have been taken which include discussions at Deteriorating Patients Board, identification of a clinical lead to support improvements and monitoring of compliance through assessment and accreditation.

The hospital also added in additional audit questions outside the scope of the National Audit that they will report on internally only allowing them to look in detail at the ReSPECT process in real time.

Results will be shared at Deteriorating Patient Board and through Patient Involvement, Patient Experience Assurance Committee (PIPEAC).



Volunteering

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 our volunteers:

- ❖ Visited GP Practices and Care Homes as part of our Enter & View Programme.
- ❖ Conducted surveys at Urgent Care Centres.
- ❖ Took part in achieving the Investing in Volunteer award.
- ❖ Worked in partnership with Healthwatch Rutland in conducting Enter & View visits to the Emergency Department at Leicester Royal Infirmary.
- ❖ Attended community events, promoting their Local Healthwatch, listened to and gained the experiences shared by the people of the communities.
- ❖ Took part in user testing of a new adult social care website.
- ❖ Raised issues around access to primary care with providers.
- ❖ Been working with Leicestershire Partnership Trust (LPT) on developing real co-production where people with lived experience take on leadership roles.

Kim Marshal-Nichols – Enter & View Representative

“I have always enjoyed volunteering my time for enter and view I have met some really interesting people and our team has become my very dear friends both young and old. During the pandemic when we couldn't go visiting, we learned to meet virtually, and we can now find our way around zoom and Microsoft teams it has opened up another world to us.”



Moraig Yates – Enter & View Representative

“I have volunteered for Healthwatch for many years and work with some lovely people. I enjoy going round looking at different health premises to see how they are run. Some places are a wonderful model for others and some leave much to be desired and it gives a good feeling when our recommendations are followed, and improvements are carried out.”



Mark Farmer – HAB Member and Mental Health Lead

“I have always in life wanted to improve the lives of the people and communities around me and I felt that being a Healthwatch Board member was a way of achieving this. Over the last five years, as a Board member, I have taken the lead on mental health and community services. I have also been the lead on the Board's relationship with the Board of Leicestershire Partnership NHS Trust.

This has given me the opportunity to work with amazing teams across the NHS, local authorities and voluntary and community sector organisations, and help transform services to improve them for the people of Leicester and Leicestershire. I have also been working to ensure that patients and carers have a role in transforming services. My experience has enabled me to secure national roles, which means I get to improve things nationally too.

There are loads still to do and therefore I remain committed to the work of Healthwatch and committed to the mission to be a voice for people and communities in order to make a difference in the services they are offered.”



Do you feel inspired?

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

 www.healthwatchll.com

 **0116 257 4999**

 enquiries@healthwatchll.com

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.

Our income and expenditure

Income		Expenditure	
Funding received from local authority	£299,672	Staff costs	£318,022
Additional income	£50,000	Operational costs	£80,542
		Management fee	£35,000
Total income	£349,672	Total expenditure	£433,564

Next steps

In the ten years since Healthwatch was launched, we've demonstrated the power of public feedback in helping the health and care system understand what is working, spot issues and think about how things can be better in the future.

Services are currently facing unprecedented challenges and tackling the backlog needs to be a key priority for the NHS to ensure everyone gets the care they need. Over the next year we will continue our role in collecting feedback from everyone in our local community and giving them a voice to help shape improvements to services.

We will also continue our work into tackling inequalities that exist within our services and work to reduce the barriers you face when accessing care, regardless whether that is because of where you live, income or race.

Top two priorities for 2023-24

1. Access and communication
2. Supported Living



Statutory statements

Engaging Communities Solutions (ECS) is the contract holder for **Healthwatch Leicester and Healthwatch Leicestershire**. The ECS corporate office is based at: Blakenall Village Centre, 79 Thames Road, Walsall, WS3 1LZ – www.weareecs.co.uk

The local office is based at: Voluntary Action LeicesterShire, 9 Newarke Street, Leicester, LE1 5SN.

Healthwatch Leicester and Healthwatch Leicestershire uses the Healthwatch Trademark when undertaking our statutory activities as covered by the license agreement.

The way we work

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

Our Healthwatch board consists of five 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 2022/23 the board met six times and made decisions on where to carry out our enter and view visits, what our priorities should be and escalated issues about access to services to the relevant providers.

We ensure wider public involvement in deciding our work priorities by carrying out independent research and evaluations of health and social care. We rely on your feedback and experience of health and social care services to influence how services can be improved and how best practice can be shared.

In February 2022, we conducted a survey and held two online listening events to give people the opportunity to share their views about what key themes they would like to see us focus on in the next 12 months.

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

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services.

During 2022/23 we have been available by phone, by email, provided a webform on our website, provided a feedback centre/rate and review system, attended meetings of community groups and forums, provided our own 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 at www.healthwatchll.com and share it with relevant committees.

Responses to recommendations

We had no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

Enter and view

This year, we made 11 of Enter and View visits. We made 60 recommendations or actions as a result of this activity.

Location	Reason for visit	What you did as a result	Recommendations per report
Emergency Department – Leicester Royal Infirmary	Public concerns raised with Healthwatch include long waiting times, delays in care; facilities at ED, ambulance handover delays and insufficient capacity across the system to see and/or admit patients.	Wrote a report with recommendations – the service provider has commented about the several steps taken to improve the accessibility of the Emergency Department.	16
GP Practice – Rosebery Medical Centre	Intelligence gained from feedback given.	Wrote a report with recommendations – the service provider has taken on board the recommendations.	7
GP Practice – De Montfort Surgery	Intelligence gained from feedback given.	Wrote a report with recommendations – the service provider have followed up on the recommendations.	3
GP Practice – Castlemead	Intelligence gained from feedback given.	Wrote a report with recommendations – the service provider have taken on board the feedback from surveys and recommendations.	6
GP Practice – Spinney Hill Medical Centre	Intelligence gained from feedback given.	Wrote a report with recommendations – the service provider has taken on board the recommendations.	9
GP Practice – Merridale Medical Centre	Intelligence gained from feedback given.	Wrote a report with recommendations – the service provider has taken on board the recommendations.	14

Enter and view

Location	Reason for visit	What you did as a result	Recommendations per report
Care Home – Fernleigh Care Home	Intelligence and feedback.	Wrote a report which reflected the good practice at the home.	0
Care Home – Egerton Lodge Residential Home	Intelligence and feedback.	Wrote a report which reflected the good practice at the home.	0
Care Home – Kingsfield Court Care Home	Intelligence and feedback.	Wrote a report which reflected the good practice at the home.	0
Care Home – Agnes House	Intelligence and feedback.	Wrote a report with recommendations -the report reflects the good practice at the home.	5
Care Home – Amberwood Care Home	Intelligence and feedback.	Wrote a report which reflected the good practice at the home.	0

Health and Wellbeing Board

Healthwatch Leicester and Healthwatch Leicestershire is represented on the Leicester Health and Wellbeing Board and Leicestershire Health and Wellbeing Board by Harsha Kotecha, Chair and Gemma Barrow, Chief Officer.

Integrated Care Board

Healthwatch Leicester and Healthwatch Leicestershire is represented on the Integrated Care Board by Harsha Kotecha, Chair.

During 2022–23 our representatives have liaised with local authority democratic service officers and other leads to discuss papers for presentation and discussion at board meetings.

healthwatch

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