

# 10 years of achieving change

The Healthwatch Suffolk Annual Report 2022/23



# Contents

We've included some features that can help you to navigate this report. For example, you can navigate to a section of the report by clicking our page numbers below.

Look out for hyperlinks (**they'll be in pink**), or select this icon (🔍) to explore more about our work. You can also select this icon (☰) at the top of the page to return to our contents page. Click the page numbers below to head straight to the content you would like to read.



**Look out for our 'ten years of Healthwatch logo' throughout this report.** We'll be looking back on our impact over time, and how it links to our current work to shape, influence and improve local care.



**A message from our Chair and Chief Executive**

**Pg. 4**



**Who we are**

**Pg. 7**

How we're inclusive

**Pg. 8**



**Impact summary**

**Pg. 10**

Five ways we shape local care

**Pg. 11**

Ten years of change (Poster spread)

**Pg. 12**

Highlights of 2022/23

**Pg. 14**



**Listening, shaping and influencing change**

**Pg. 20**

Feedback Centre

**Pg. 21**

1. Research and insights

**Pg. 24**

Dementia care and support in Suffolk

**Pg. 26**

My Health, Our Future (Phase six)

**Pg. 28**

KS2 children in Suffolk

**Pg. 32**

Elective care backlogs in Suffolk

**Pg. 34**

Maternal mental health

**Pg. 38**

Your Care, Your Way- Your experience	Pg. 40
Developing Skills in Health and Social Care (Evaluation)	Pg. 42
Health coaching in Suffolk	Pg. 44
Your voice in national work	Pg. 46
Inclusive digital care in Suffolk	Pg. 50

## **2. Co-production** **Pg. 52**

Our ambassadors	Pg. 53
Workshops	Pg. 54
Commit to Co-production	Pg. 56
Integrated Care Academy	Pg. 60
Tackling Poverty Together	Pg. 62
Youthwatch Suffolk	Pg. 64

## **3. In the community** **Pg. 66**

How our team supports our work	Pg. 67
Supporting primary care	Pg. 68

## **4. Working with others** **Pg. 74**

Partnership agreements	Pg. 76
Suffolk and north East Essex Integrated Care System	Pg. 79
Menopause and perimenopause support in Suffolk	Pg. 79
Stoma care in Suffolk	Pg. 79
Integrated Care Strategy	Pg. 80
Voluntary and Statutory Partnership (VASP)	Pg. 87



## **Helping people to find support**

**Pg. 90**

### **5. Our signposting service**

**Pg. 91**



## **Governance and decision-making**

**Pg. 96**

How we make decisions

**Pg. 97**

Our Board of Directors

**Pg. 100**

Statutory powers and local service scrutiny

**Pg. 102**



## **Looking ahead**

**Pg. 106**



## **Our money**

**Pg. 110**

# Message from our Chair & Chief Executive

## Welcome to our Annual Report for 2022/23

It's a big year for us as we celebrate our tenth anniversary and look back on 'ten years of achieving change'. We've taken the opportunity to reflect on our work since we were established, to weigh up the successes and the challenges. This helps us to continue to raise our game, and to sharpen our impact going forward. It's also an important reminder of the power of people's experiences when they have been heard by services and used by them to make things better.



Wendy Herber  
Independent Chair



Andy Yacoub  
Chief Executive

This is not a matter of business as usual for us. This feels like a critical move at a time when we're seeing extraordinary challenges for our health and care system and those that need their services, and some hugely powerful change too. In this strange post-COVID time that we live in, it's becoming clear that the problems we face are deeply interconnected – and no one organisation can make changes happen alone. In many ways, as the sharp emergency of COVID fades, it feels like we've become used to a different emergency landscape, with stories of demand and need that would have had us in uproar just a few years ago.

As James Baldwin said: 'Not everything that is faced can be changed but nothing can be changed until it is faced.'

We know that people are facing issues every day and are finding help that supports them, but there are huge gaps in services and joined up thinking too. If we are going to tackle the issues we face, we really need to seek to understand them, as they are described directly by the public. Only then can we hope to shape worthwhile and sustainable solutions with them. It is people with lived experience who know what really makes a difference – and what really hurts. This year, our continued and extensive work in the community, and projects that centred around dementia and elective care waiting, demonstrated that so clearly.

As a Healthwatch, independence and partnership are our touchstones. The joy of being an independent organisation is that we can ask the questions that people want to answer – and not just ask for the answers that we want to hear. We're open to feedback that we might not expect – or that might challenge the status quo. We can work and shape solutions with people, without the pressure of having to know what their solutions should look like before they start. We can present the unexpected,

alongside the good and that which is wanting.

This report looks back at some of the work we have delivered over the last ten years, in collecting, collating evidence from those with lived experience and challenging the system to change. It's work that we can only do in partnership, with all the tens of thousands who have given us feedback, or asked our advice, taken part in our research projects and talked to our community development team. We thank all of you.

We are glad to work closely with partners across the county who reach out to, and support, so many people. They help us reach the most vulnerable, excluded and challenged who might find it hard to be heard in any other way. We want to ensure that our health and care services leave no one behind – and to do that we must listen to those at most risk of exclusion. These two cross cutting themes of co-production and equalities remain fundamental to our work, and they feature throughout this report. They are core to our plans for the future.

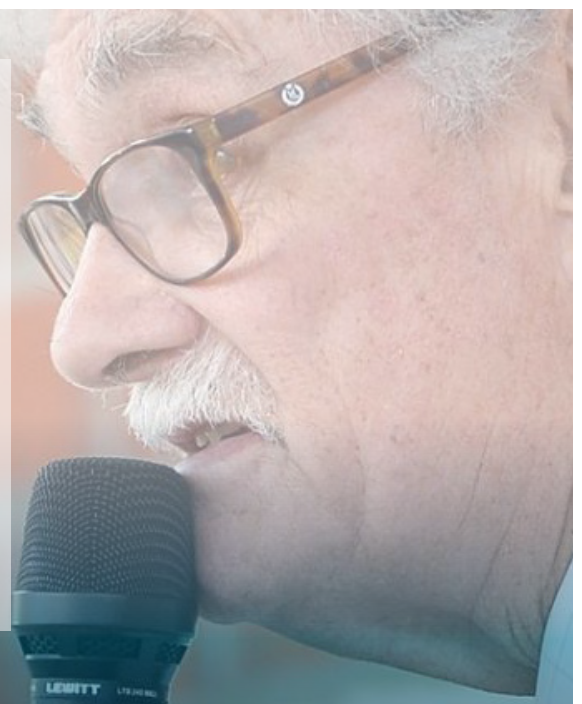
We passionately believe that listening and responding to lived experience is vital to create health and care services that meet the needs of our population. This has never been more important than it is today, if we are to meet the huge challenges we face, and ensure we leave no-one behind. It's never been more important to create services with those that use them than now, and this is why independent collective feedback is so vital.

We look back to move forward, and we seek to do more. As we look at ways to amplify the voice of lived experience and to ensure that it brings change, we ask that you continue to help us by sharing your experiences, good, indifferent and bad, and support us to reach everyone in Suffolk. The answers lie in the detail, the minutiae, and we are best placed to bring such invaluable information to our system colleagues. It will take all of us to make change.

### **In memory of Dr Anthony (Tony) Rollo**

This year we reflect on the loss of Tony who sadly passed away in the year. Tony was our Chair, and a true champion of people's experiences. He was a co-founder of Healthwatch Suffolk, an Interim CEO, and always a trusted leader and loyal friend to our team.

Tony retired from his 10-year voluntary role with us in 2021, and he left behind a vibrant and successful organisation. His legacy continues to be reflected in everything we do.



# Who we are

**We're your health and social care champion.**

If you use health services, or need social care, we want to hear about your experiences. We make sure NHS and social care leaders listen to your feedback and improve standards of care. We can also help you to find information and advice about local services and support.



## We want everyone to be a part of our work

This is our inclusivity statement:



**Our differences are not always visible, and we embrace them all with respect and kindness. Healthwatch Suffolk wants everybody to feel equally valued, listened to, seen and heard.**



Developed in co-production, it is our promise to include everybody in our work.

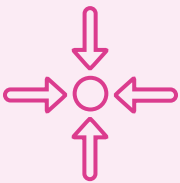
They're not just words – we take them seriously, in all aspects of our work. From talking to people in communities, to planning our research, we strive to make sure no one is excluded from being a part of our work.

## Our purpose and values



### Our core purpose is to...

Collect and share lived experience to influence better standards of health and social care.



### We live and breathe...

Co-production in everything possible. We are inclusive, transparent, accessible, and accountable. We believe passionately that listening and responding to lived experience is vital to create health and care services that meet people's needs.

## Our strategy and priorities

We have published a strategy about our priorities. It will help us to make sure we are using our funding to achieve the biggest impact for local people.

Our chosen priorities are mental health, children and young people, primary care, social care and secondary healthcare. We also have cross-cutting themes of co-production and inequality. You can learn more about our strategy, and why we chose our priorities, by visiting: [www.healthwatchesuffolk.co.uk/about-us/ourstrategy/](http://www.healthwatchesuffolk.co.uk/about-us/ourstrategy/)

**For more detail about our organisation, and how we make decisions about our work, please see from page 96.**

## How are we inclusive?

Here are just some of the ways we aim to be inclusive in our approach, and to make sure nobody is excluded from being able to participate in our work.



### Helping people to feedback

We're making sure people can feedback in ways that suit their needs and preferences (see overleaf).



### Our Strategic Equality and Quality Impact Assessment

We're undertaking a process that helps us to learn more about areas where we could improve our approach to meeting people's needs, and representing all communities in Suffolk (such as through policies, projects, data, communication, and partnerships). Ask us about this if you would like to know more.



### Accessible participation

Every project is designed with equality in mind. We'll invest resources to make sure people can respond to research in a way that suits their needs, and we'll be responsive when people tell us they need a different way to join in.



### Training our team

Our staff learn from Equality, Diversity and Inclusion training to make sure we have the best possible awareness of issues related to inequality.

## Inclusivity starts with supporting our team



"As a disabled person and a wheelchair user, throughout my life, I have had to struggle to make things accessible for me. The statistics of disabled people who are in employment meant I always worried about finding a job, and having reasonable adjustments in place to support me.

"One of the reasons why I like to use identity-first language (e.g., by using the phrase 'disabled person'), is because I feel it is important to recognise that my disability is a large part of my identity – and also to recognise the barriers in society that are often difficult to overcome.

"Since being employed at Healthwatch, I have felt welcomed into the Healthwatch family. Anything that I have needed as reasonable adjustment because of my disability has always been met. I feel that I have a voice, and that I will be heard, which is hard to find.

"Our inclusivity statement shows that, as an organisation inclusivity and accessibility are at the heart of what we do every day. We are always striving to do better. I feel very lucky!"

**Elise Martin-De-La-Torre (Project Co-ordinator for our Tackling Poverty Together project) – Learn more about the TPT project from page 62.**



## Accessible ways to feedback

Throughout the year, we've continued to find new ways for people to share their feedback with us. Our aim is to make sure communities are not excluded from being able to share their experiences, or from being a part of shaping local standards of care.

You can visit our website to find all of the accessible ways to feedback to us ([www.healthwatchsuffolk.co.uk/feedback/](http://www.healthwatchsuffolk.co.uk/feedback/)). You will find details of ReachDeck (a tool that makes our website accessible by enabling translated pages, text-to-speech and much more), translated feedback forms in Polish, Portuguese and Romanian, and how to feedback in British Sign Language.

We'll be adding new features in the year ahead (e.g., a downloadable easy read format of our standard feedback form) - so watch this space.

Call us on...

**SignLive**

This year, we joined 'SignLive'. It means people can connect live with our team using British Sign Language.

Click here to view a video about using SignLive.



### Find our BSL feedback form

This year, we worked with one of our Co-production Ambassadors (see page 53) to create a BSL format of our Feedback Centre. It makes our general feedback form about people's experiences of health and care services accessible to more people.

Find it on [www.healthwatchsuffolk.co.uk/bsl-feedback/](http://www.healthwatchsuffolk.co.uk/bsl-feedback/)





# Impact summary

Our communication, research, community engagement, information and signposting, and co-production activity all contribute to our understanding of people's experiences of local care and support.

In this section, read quick information about five ways we shape, influence and improve local standards of care.



# Five ways we shape care

Learn about how we listen to people’s views and experiences of NHS and social care services in Suffolk. Explore all of the ways that you can learn about our work, and join in with our projects.

## How we shape, influence and improve local support

You will be able to read about examples of work and impact across all of the areas below in the next section of this report.



### 1. Research and insight

We complete research, liaise with partners and encourage feedback on our website to capture people’s experiences of using local services and accessing support.

 [Click to read more.](#)



### 2. Co-production

Our team works with services and commissioners to help them embrace co-production, involving people as equal partners in planning and delivering services.

 [Click to read more.](#)



### 3. Community engagement

Our team encourages people to speak out about their care. We also support services to connect with their local community, and to communicate about service change.

 [Click to read more.](#)



### 4. Information and signposting

We help people to find their way to information, advice and support. We use insights from our service to influence change, and to make improvements for others.

 [Click to read more.](#)



### 5. Working with others

We work in partnership with local people, partners and networks to improve services and support.

 [Click to read more.](#)



### Ten years of change

Since 2013, we've been using people's experiences to shape and improve local care. Here's just a few ways we've made a difference. You can visit our website (see our link below) to find many more examples.

#### Supported discharge (2013)

We included people in the design of a new Early Supported Discharge service for stroke patients. Changes were made to the specification for the service and support for carers was strengthened.



#### Our Feedback Centre is launched (2015)

We made it easier for people to find information and to share feedback about local services.



Our Feedback Centre has since recorded 20,000+ comments and ratings of local services, and more than 1,300 responses from local providers with information about changes they have made.

#### My Health, Our Future pilot research (2016)

We launched our research programme for young people to explore their wellbeing. MHoF has since recorded tens of thousands of responses, helping schools, colleges and health and care services to introduce new services and support.



#### Sickle cell support (2014)

Discussions at our Diversity and Inclusion Group led to the development of a Sickle Cell care pathway from primary care to acute hospital treatment, the placement of an alert on patient notes and a drive to increase staff awareness and training.



#### 'Supporting mum' (2016)

We worked with local hospitals to engage new mums and birthing partners about their experiences.

Our research led to various improvements at the time, including the option for birthing partners to stay overnight to support mum, a better offer of local information around maternity care and much more.

Explore our impact on [www.healthwatch.suffolk.gov.uk](http://www.healthwatch.suffolk.gov.uk)



## Supporting primary care (multi-year priority)

For many years, we have worked closely with local GP practices to gather people’s experiences, and to help them to improve standards of care. That has included changes to appointment systems, informing the introduction of new ways of working (like new digital services), and practical improvements to practice buildings. Read more about our work this year from page x.

### End of life care (2022)

We completed research to understand more about how the pandemic had impacted people’s care and support. Our findings have helped to drive changes in how palliative care is delivered across the county.

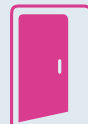


### Digital health and care (2021)

Our research with the Suffolk and north east Essex integrated care system led to the development of co-produced ‘Guiding Principles’ that established a ‘digital first, not digital only’ approach, and have been influencing a more inclusive future for services ever since.

### What’s it like? (2019)

Our research explored people’s experiences of residential and nursing care. We shared intelligence with the Care Quality Commission and Suffolk County Council to inform inspections, and to address care quality issues.



### ‘My Care at Home’ (2018)

We explored people’s experiences of care at home. The feedback was used by Suffolk County Council to influence its plans for a new model of home care delivery at the time, and to include people in the process to choose providers that would deliver the service.

### Frenulotomy services (2017)

We started to raise concerns about the lack of access to newborn tongue-tie services and assesment.



### ‘Feet in Focus’ (2016)

Our research highlighted how people needed more help to reduce their risk of developing complications from diabetes.

A ‘red card’ was developed and made available to patients locally to help people to monitor their risk, and to know how to address worries or concerns.

[chsuffolk.co.uk/about-us/ourimpact/](https://chsuffolk.co.uk/about-us/ourimpact/)

# Highlights from 2022/23

In this section, explore some of the ways we're collecting and sharing lived experience to influence better standards of health and social care. **Click our links and page numbers to learn more about our outcomes in the year.**



We've recorded more than 20,000 reviews about local services on our Feedback Centre, and hundreds of replies from services.

 [More on pg. 21](#)



Services used our Feedback Centre to respond to feedback from local people and to highlight improvements.



Our research on dementia will shape the developing priorities of a joint NHS and social care strategy.

 [More on pg. 26](#)



West Suffolk Hospital is working on a plan to improve support for people with dementia and carers.



'My Health, Our Future' (MHoF) - Nearly 50,000 responses recorded about the wellbeing of young people across Suffolk.

 [More on pg. 28](#)



*"It has given us an insight into the issues our students are facing and the support and education they need..."*



**Explore our growing catalogue of research and insight.**



## Explore 'My Health, Our Future', and its impact.



**“The voice and experience of people and communities have never been more important in health and care as they are today.**

“People using our local health and care system in Suffolk continue to face unprecedented challenges, and we know that we need to work well together as health and care partners to do the very best that we can. Healthwatch has a key role to play as a strong and independent representative of people and communities by both challenging us and supporting us as needed to be better and to do better for the people that we serve.”



- Susannah Howard (Integrated Care Partnership Director)



Commissioners are using our data to make decisions about local support (e.g., services for trans and non-binary young people).



We're helping maternity leaders to improve six-week postnatal checks with GPs.

 [More on pg. 38](#)



We made sure people's experiences of waiting for hospital care were heard by NHS and social care leaders.

 [More on pg. 34](#)



Feedback from waiting patients is influencing national challenge from the Public Accounts Committee to the NHS and government.



We included people in the design of our project with the NHS to explore children's experiences of asthma care.

 [More on pg. 106](#)



Your Care, Your Way continues to improve awareness of people's rights to accessible information and support locally.

 [More on pg. 40](#)



A local GP practice took action to improve access for d/Deaf people in response to feedback from our campaign.



We shaped a Norfolk and Suffolk County Council programme that aims to address long-standing workforce challenges in health and care.

 [More on pg. 42](#)



We're informing the ongoing development of 'health coaching' training and practice in Suffolk.



Our findings on end of life care in the COVID-19 pandemic were included in a national report by a group of MPs.

 [More on pg. 44](#)

 [More on pg. 46](#)

**Our research is helping to prioritise action on key issues like care backlogs and dementia support.**

More than 11,000 people responded to our projects last year. Learn more about them from page 24.







**“...it has given me such a purpose and I have so many ideas that I want to help with!”** – 13 people with lived experience of poverty or just about managing joined our Tackling Poverty Together project and will work toward change in 2023/24.



Our co-produced ‘Guiding Principles’ continue to shape a more inclusive future for health and social care in Suffolk.

 [More on pg. 50](#)



Co-production ambassadors are helping organisations to include people in the design and delivery of local services.

 [More on pg. 53](#)



Our co-production workshops continue to encourage more people to embrace the approach in services.

 [More on pg. 54](#)



Our Commit to Co-pro campaign is encouraging organisations to develop co-production action plans.

 [More on pg. 56](#)



Medequip appointed a co-production champion in their local depot to include more people in the running of its services.



SENDIASS committed to working more with young people to find out what they want from its services in the future.

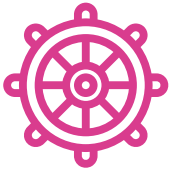


We supported the Integrated Care Academy to develop a ‘Co-production Hub’ to support our health and care systems.

 [More on pg. 60](#)



**381 people** received co-production training from our team, supporting them to learn more about the approach and its benefits.



We made sure young people have a voice in the governance of Healthwatch Suffolk through Youthwatch Suffolk.

 [More on pg. 64](#)



We helped more than 600 people to find their way to health, care or wellbeing support.

 [More on pg. 90](#)



Our visits to GP practices are helping GP practices to make improvements, and boosting the morale of staff.

 [More on pg. 68](#)

**Botesdale Health Centre installed a shelter to keep people out of the elements, and responded to people's feedback (see page 69).**



Siam Surgery told us about several ways it was addressing feedback from us, and its own engagement. That included changes to its phone system after people said they had experienced problems getting through to the practice and more.

 [More on pg. 72](#)



More than 50 partnership agreements are helping us to include people in shaping local NHS and social care services.

 [More on pg. 76](#)



**This year, we completed more than 120 visits to NHS services, including GP practices. Our visits help practices to make improvements, and support them to communicate about service pressures and change.**

**We're engaging people in communities and using feedback to encourage services to improve.**

Find out how some local GP practices responded to our feedback and made changes to their services from page 68.



We made sure people's experiences were included in a major health and care strategy for Suffolk.

 [More on pg. 80](#)



We shared feedback with the SNEE Integrated Care System on stoma care and menopause support.

 [More on pg. 79](#)



***“Healthwatch Suffolk remain a trusted and valued partner in our work across the Integrated Care Board and the wider Integrated Care System.*”**

***“Their work over the last year continues to not only influence our thinking but actively shape how we deliver with and for our local population.”***



**– Richard Watson (Deputy Chief Executive and Director of Strategy and Transformation, Suffolk and North East Essex Integrated Care Board)**



Find out how we're working together with other organisations and networks.

# Listening, sharing and influencing change

## How do we achieve impact?

There are many ways we're listening to your feedback, and using it to improve standards of care across Suffolk. That includes our research projects, co-production activity, visits to local communities and our work with other organisations.

Read on to find out more.

### Skip to...

Research - Pg. 24

Co-production - Pg. 52

Community - Pg. 66

Signposting service - Pg. 90

Working together - Pg. 74





# Feedback Centre

The Feedback Centre supports tens of thousands of people each year to find information about services, see what others have said about them, and to leave feedback. We use this data to improve local care.

With **20,070** (**2,557** in 2022/23) items of feedback now featured across hundreds of service listings, the Feedback Centre offers insights people can use to make informed decisions about local care.

Amongst other examples, Feedback Centre reviews supported us to:

- share more than 900 comments about access to GP practices with the Suffolk Health and Overview Scrutiny Committee to inform its debate on the subject.
- respond to more than 140 media features in the year on a range of topics.
- include people's experiences of dementia support in our research.
- share feedback with the Care Quality Commission to inform its inspections of services.

## What did people tell us about (top three)?



**72%**  
GPs



**9%**  
Hospitals



**6%**  
Mental health care

See what people told us on [www.healthwatchsuffolk.co.uk/services](http://www.healthwatchsuffolk.co.uk/services)

## How providers responded to feedback

There were **265** responses from providers to people’s Feedback Centre reviews. Broadly, responses from services tended to focus on:

- Helping people to understand the possible causes of a negative experience (e.g., changes to systems, or pressures on services).
- Offering information about steps taken to improve services.
- Inviting people to make direct contact with services so that aspects of their care could be investigated.
- Informing people that their feedback had been shared to boost staff morale, or for the purpose of broader learning within services.

Responses to positive reviews often highlighted how services were using the feedback to boost the morale of their teams. Negative comments also received similar replies, with providers indicating that the feedback would be shared with staff to encourage learning.



“Thank you for your kind words and support.

“As a practice we endeavour to help all our patients with all of their health care needs and when we receive comments such as yours the team feel appreciated in the knowledge that all their hard efforts are noted. Once again many thanks.”

Some replies helped people to know that their feedback was taken seriously. In this case, negative feedback about care for people who are d/Deaf or hard of hearing prompted the service to want to explore how it could improve people’s care in the future.



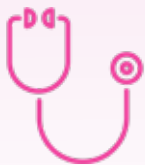
“We are always keen to hear how we can improve the journey for patients when visiting the surgery and make improvement or adjustments if possible. We will be looking into the point you raised and potentially inviting patients in to the surgery who have hearing loss to identify areas that can be improved. Thank you again.”

**Please note:** We monitor all feedback submitted to our website to ensure it is based upon an experience of using the service(s) and does not include safeguarding concerns or abusive comments. For more information about how we process people’s feedback about local services, please contact us.

Some services took time to inform people when they had made practical changes in response to suggestions from patients.



“Following feedback from some patients, we have recently shortened the length of the recorded telephone message. However, there are certain items that do need to be included to ensure that patients select the correct option for their needs.”



This year, we completed **more than 150 visits to NHS services, including GP practices.**

Responding to your feedback, they made changes to improve people’s experiences of accessing NHS and social care support. You can learn more about our work with local services from page 68.





# 1. Research

**Health and care services should be designed on a foundation of reliable evidence. That's why we do research. There have been tens of thousands of responses to our projects, and they help to keep decision-makers grounded in people's experiences.**

## Our approach

Through a combination of surveys, interviews and other methods, we are able to bring people's experiences together in an impactful way, and share them with people who can make change happen.

We always try our hardest to make sure nobody is excluded from taking part in our research. We do this by engaging the right people and partners in planning our work, making sure there are multiple ways for people to take part and being prepared to respond when people tell us we can do better.

Our research projects are delivered on a core-funded basis (from the funding we receive from Suffolk County Council), and also a commissioned basis. Sometimes, our core-funded work is supplemented by additional income so that we can expand our resources to reach more people for their views.

Got a question about our research? Contact [research@healthwatchsuffolk.co.uk](mailto:research@healthwatchsuffolk.co.uk).

Download our insights - visit:  
[www.healthwatchsuffolk.co.uk/ourresearch/](http://www.healthwatchsuffolk.co.uk/ourresearch/)



## A quick overview of research impact

Our projects aim to shape and influence local decision making about NHS and social care support in Suffolk. Here are just a few examples of how we've done that in 2021/22, but you'll find many more across the following pages.



**11,428**  
research participants



**9+**  
projects completed

### Four ways our research is inspiring change



Learn more from pg. 26

Our report about the experiences of people with dementia and carers will shape the priorities of a developing NHS and social care strategy for dementia support in Suffolk, and its action plan.



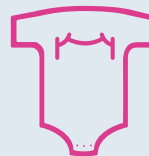
Learn more from pg. 28

Our 'My Health, Our Future' research continues to shape decision-making concerning support for young people, inform local strategies, and help schools and colleges to support the wellbeing of their students.



Learn more from pg. 34

Our research on elective care delays has encouraged senior leaders of health and care services and systems to take time to understand the impact of hospital delays on people's lives, and to shape their response to the crisis.



Learn more from pg. 38

Our support of a national survey on maternal mental health is encouraging our local maternity system to make sure conversations about mental health are not missed from people's experiences across all aspects of maternity care.



## Dementia support in Suffolk

This research exploring the experiences of people with dementia and carers is shaping local priorities for improving support.

The findings of this project, including our key learning points for health and care leaders and services, will be used to shape a joint NHS and social care strategy for dementia support in Suffolk. That includes the priorities for improving local support, and any associated action plan.



*“Suffolk County Council is working with health partners, including Healthwatch, and people with lived experience of dementia, to create a countywide Dementia Strategy for Suffolk – which will be published later this year. This new strategy will look at promoting early diagnosis, providing better information about care and drug options, and focus on improved signposting for people with dementia and their families, to help them get the support they want and need.”*

**Councillor Beccy Hopfensperger (Suffolk County Council cabinet member for Adult Social Care)**

More than 120 people with dementia and carers took part in our research by completing online surveys, or participating in detailed interviews about their experiences. Whilst it was clear people had received excellent care and support at times, this was not a consistent experience for most. Many told us they had struggled to find their way to help and support in Suffolk, and that the type of personalised support they needed simply was not available in key moments of crisis.

### How will this research influence standards of support?

We worked closely with the Suffolk Dementia Action Partnership, and leaders responsible for the strategy, to make sure people’s experiences are included. Our research is already helping people to understand more about the ways in which lives are impacted by the illness, and what is needed to make sure people are supported in the future.

Here are some of the ways we're making sure people's experiences are heard:

- We're participating in the co-production of the strategy by presenting our research findings and key learning points at strategy workshops.
- We're sharing our research nationally with Healthwatch England, adding to intelligence from other local Healthwatch, and supporting our network to influence national policy.
- We're responding to a national call for evidence to inform the government's major conditions strategy.

In addition, we are aware that West Suffolk Foundation Trust is using the research as a driver to inform its own service improvement.



*"This research has been an opportunity to understand the support that people with dementia and carers need from West Suffolk NHS Foundation Trust's services. It includes a number of important sets of key learning from people's experiences, and we have already begun to consider them within our plans for dementia care. Alongside other sources of national and local feedback, and under the guidance of our 'Dementia, Delirium and Frailty Transformation Group', this research will help us to make strategic decisions as a trust. The group is a driver of local action to improve the care that people with dementia and carers receive from our services, and from the wider health and care system."*

**Chelsie Nice (Lead Nurse: Dementia and Delirium West Suffolk NHS Foundation Trust)**

## Explore our research (select an option below)



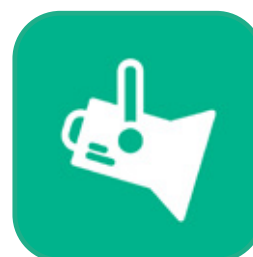
Find our full report about what people told us, and explore other project materials.



Watch Peter, Teresa and Julia sharing their experiences of living with dementia in Suffolk.



Download our poster summary of key learning for leaders and services.



Take a tour through a few of the key findings by reading our online summary.



## My Health, Our Future (MHoF) – Phase six

MHoF data is continuing to prioritise action within the NHS, education and social care sectors to improve young people’s wellbeing.

### What’s ‘MHoF’ and how does it help young people?

MHoF has been exploring the wellbeing of children and young people in Suffolk since 2017. We’ve recorded more than 46,000 responses from young people on topics like self-harm, body image, self-esteem, harmful online content and much more.

Our data has shaped local NHS and social care strategies, informed the Joint Strategic Needs Assessment for Suffolk, supported funding bids for new services managed by the NHS and local community organisations, informed national political debate, and shaped local commissioning decisions related to support for young people.



*“The feedback from young people has enabled us to listen, reflect, learn and ensure our plans for delivering mental health services are in line with what children and young people need. For example, online support from Kooth was commissioned as a direct result of the feedback gathered from MHoF work and has been a significant resource, and support, for CYP, particularly during COVID.”*

*“MHoF helps us to identify gaps in support across the system and how working together to meet need allows us to be creative in our approach. In addition, we know that many schools have reaped the benefits of being able to understand the needs of CYP and target mental health and emotional wellbeing support.”* – **Jaime Hawkins (Transformation Lead for Children and Young People’s Mental Health, Suffolk and North East Essex Integrated Care Board)**

In addition, across all years of the MHoF programme, our reports have helped schools and colleges to identify where additional support could help to improve the wellbeing of students. This has included specific initiatives like peer support groups, updates to their PHSE curriculum, parent workshops, mental health first aid training for young people, targeted support, wellbeing spaces in schools and much more.

**“We have taken part in the Healthwatch survey for several years now and the information it has provided us has been an integral part of our planning in terms of student support and wellbeing. It has given us an insight into the issues our students are facing and more importantly the support and education they need and how they wish to receive this.”**

**Sue Calvino (Head of Pastoral Care and Designated Safeguarding Lead, Suffolk ONE College)**

**“We have taken part in this survey for several years now. We find the well-structured analysis of the results invaluable and find that the students benefit from the survey process. They ask questions whilst completing it, and it can provoke good discussions amongst groups whilst getting them to think seriously about issues that affect them. We are happy to take part in this survey and will continue to do so.”**

**Cathy Durrant (Head of Pastoral Care, West Suffolk College/ Abbeygate Sixth Form College)**

## How does MHoF support local change?



Shaping local wellbeing strategies for young people



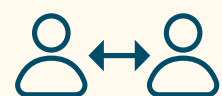
Helping schools to shape their lesson content



Starting a conversation about wellbeing in schools and colleges



Helping schools and colleges to target support



Encouraging schools to establish peer support networks for students

Find more examples of impact on <https://healthwatchsuffolk.co.uk/mhof/mhofimpact/>



*“The survey once again has provided incredibly useful data for us to make changes to our curriculum. Whilst we deliver the statutory elements of RSE and PSHE we can adapt our curriculum based on the findings of our survey data.”*

Richard Goodenough (Senior leader, Mildenhall College Academy)

## Other ways MHoF is helping us to shape countywide action on young people’s wellbeing

### Informing the development of additional support for trans and non-binary young people

Year on year, our data indicates that trans and non-binary young people are amongst those most likely to indicate poor levels of wellbeing. We have been informed that our data is helping to develop a local NHS bid for funding to commission peer support from voluntary, community and social enterprise organisations in both Suffolk and Essex.

The aim is to develop a service that offers support (for the young person, their family and friends) to those waiting for interventions at every stage of transition, including appropriate and up-to-date information and signposting.

Whilst the service is yet to commence, our project has evidenced the need for funding to be directed to support trans and non-binary people in this way and is helping commissioners to progress toward an improved local offer of support.

### Young people with Special Educational Needs and Disabilities (SEND)

Suffolk County Council has been running a survey to empower children and young people with SEND to share their experiences. As part of the SEND Strategy, it wanted to know how the services young people access impact on their lives, and the choices they make about their futures.

Here’s what Susie McIvor (Co- production and Engagement Lead) said about how MHoF had been shaping this work.

*“MHoF provided such valuable information to us when compiling SEND survey for 2023. We could see that Year 11 students were at higher risk of social isolation and this, along with information from our SEND young people’s network around the need for support through transitions at age 14, led to the decision to target our survey at young people aged 14 to 25.*

*“The survey provides such an insight for schools to enable them to support their students, and ensures resources are being used in the right areas. When we go into a setting to co-produce a project with students that will improve the mental health*



Jaime Hawkins (Transformation Lead for Children and Young people at Suffolk and North East Essex Integrated Care Board) talks about the impact of MHoF.

*and wellbeing of their community, these local insights are priceless.” - Susie McIvor (Co- production and Engagement Lead for Public Health Suffolk)*

In addition, we created a specific report (based on data from our 2022 MHoF survey) focused on responses from young people with self-reported SEND. We have shared the report widely with local leaders and commissioners to inform their plans to address the needs of this group of young people.

### **Suffolk Children’s Healthy Weight Strategy**

The Suffolk Children’s Healthy Weight Strategy aims to provide a framework around which our local health and care system can support the wellbeing of families, and provide support to help people maintain a healthy weight. The strategy aims to reduce the numbers of underweight, overweight and obese children and young people, ultimately improving their health and decreasing health inequalities in Suffolk.

Our survey was revised this year to include questions that can help Public Health Suffolk to develop this strategy. That included new questions exploring whether young people are concerned about their weight, and what they feel could help them to manage their weight in the future. A representative of Public Health Suffolk said:

*“The MHoF data is being used to inform the strategy, the issues raised will be shared with partners as part of the action planning process. The aim is to understand the view of young people and bring their voice into the discussion. The data provides a starting point and I hope to develop this into further co production with young people.”*

Look out for this strategy when it is published later in the summer of 2023.



## Research pilot – KS2 children

We've been exploring children's perceptions about their world, enabling them to express something about how different influences on their lives make them feel – and how they like to manage their feelings.

Children completed a survey at school with the support of school staff. It was developed and tested with the Ipswich Opportunity Area in 2021, and will run until the end of 2023. There are two published reports related to this work on our website, and a third report is due to be published later in 2023.

Some schools made use of resources we developed to support the project, and this included classroom activities to get children engaged in learning related to the project. For more information about the survey, and our findings, please visit [www.healthwatchesuffolk.co.uk/mhof](http://www.healthwatchesuffolk.co.uk/mhof).



*"I intend to put each year group's data together with a summary of key findings. I will then give these to staff in September. I think this will be really helpful for them to know what their pupils feel and where, and also to know what strategies the pupils use [to feel better]."*

*"As Inclusion Manager and Wellbeing lead, I will add some recommendations for the teachers on how they may be able to use the pupil identified strategies within their classrooms. I have also noticed straight away that the majority of pupils say they want to learn more about feelings at home with their families. I think this is really powerful and I am going to look into whether I can run some emotional literacy workshops for parents."*

**Inclusion Manager and Wellbeing Lead of a primary school in Suffolk**





---

## **What we found...**

Most children would prefer to learn about feelings with their family, or a trusted adult in school, as opposed to learning in school, or as a part of a small group. Children became less likely to indicate they would talk to trusted adults about their feelings as they got older.

[Click here to explore our findings](#)



## Elective care in Suffolk

Tens of thousands of people are waiting for hospital treatment or care in Suffolk. Here's how local feedback made sure commissioners and leaders of health and care in Suffolk understood the impact of hospital waits on people's lives.

Featuring responses from more than 1,400 people, our research revealed how people's lives were being impacted by hospital delays (often very significantly). The findings showed how the impact of waiting for treatment extends to all parts of people's lives, including relationships, finances, mental health, physical wellbeing and more.

This is what Dr Ed Garratt (Chief Executive, NHS Suffolk and North East Essex Integrated Care Board) said about this work when it was published:

*"The data is revealing that the impact of delays to elective care is on all aspects of people's lives. We will therefore use the findings from Healthwatch Suffolk to shape our response to these challenges, and to consider how partnership working across all organisations in our Integrated Care System could help to holistically address people's needs, and offset the impact of delays to people's care. The findings will directly influence, and be an integral part of, our elective care strategy for Suffolk & North East Essex, influencing future decision-making for additional services, support, and information that may result from it."*

### How have we made sure people's experiences are heard?

When we published this work, we made it clear that local integrated care systems needed to improve plans to tackle the impact of hospital delays. That included a renewed focus on improving communication with people waiting for care, and action to address the wider impacts on people's lives.

We attended meetings with the most senior leaders of our services (e.g., hospital management boards and meetings of senior-level commissioners) to tell them about our findings. Our report was an opportunity for them to pause and reflect on how people's lives were being impacted by their wait for care. We observed compassionate



*“The feedback has provided a patient-focused perspective as our trust implements the joint Norfolk and Waveney ‘Clinical Harm Review and Prioritisation Policy’ across three acute hospitals in our area. This data has also directly influenced ‘While You Wait’ resources and guidance developed by the integrated care system. They focus on mental and physical wellbeing during the waiting period.*

*“Receiving real-time data from patients in the Waveney area (alongside comparative data from across the rest of Suffolk) has emphasised the importance of the offer of ongoing communication and support for people waiting for care at our hospital, and linking with existing agencies in the voluntary and community sectors to help address common issues experienced by patients. The development of the Family Liaison Officer and Cancer Care Navigation teams, and the work of the trust’s Armed Forces Advocate, has strengthened the support and guidance the hospital can provide to people in care, or waiting for care.*

*“We recognise the improvements we can make to communicating with people during the wait for a procedure, particularly people requiring additional support and/or accessible information. The Trust’s Patient Experience and Engagement team has coordinated regular internal communication across the hospital to embed the processes for producing accessible patient information, or requesting additional translation or accessibility support, and is delivering a Carer and Patient Experience workshop for staff, specific to AIS and translation services, in February 2023.”*

**A statement from the James Paget University Hospitals NHS Foundation Trust in response to our research**

responses, and a desire to improve.

The statement above is an example of how one acute hospital (James Paget University Hospitals NHS Foundation Trust) responded to the report.

West Suffolk Foundation Trust told us the insight from our research had been ‘useful in its endeavours to improve peoples’ experiences and safety whilst waiting’. Responding to the report, the trust described how it has improved communication with people waiting for bone or joint operations (a group with the most long-waiting patients) through the introduction of a new pathway. It said patients are now categorised based on their level of deprivation and risk of emergency hospital admission, and receive a range of communication according to their needs.

‘High risk’ patients receive personal contact by phone call from a social prescriber to help them to find their way to support. ‘Moderate risk’ patients receive an invitation to free support groups being run by Allied Health Professionals Suffolk and Abbeycroft Leisure. Together with ‘low risk’ patients, they also receive a text message or letter with

either links to the trusts 'Waiting Well' webpage or a 'Stay Well' booklet. And, pending the results of an evaluation of this new pathway, the trust plans to expand it to other patients (e.g., urogynaecology and urology patients).

In addition, and prompted by our report, the trust also said it had:

- shared links to its 'Waiting well' webpage with patients and distributed leaflets about support in clinical areas.
- developed better information on waiting times and support for people to access.
- initiated regular contact with patients to check they still need to be seen, update them on estimated waiting times, and to inform people about where they can find information about support.

The East Suffolk and North Essex Foundation Trust has also responded to the report. It provided the following statement to describe how the results had been useful within the continued development of its new orthopaedic centre.



*"We are always keen to work with and support Healthwatch Suffolk when they are exploring new innovative ways of engaging with the public. For the elective care waiting times survey, Healthwatch wanted to test a new SMS messaging approach to contact our patients. Our colleagues across our hospitals looked at how we could support the Healthwatch team with this new methodology. We promoted the Healthwatch survey through our regular engagement channels and were really pleased to see they had an overall high response rate.*

*"The results of this survey have been very beneficial to project colleagues who are working on our new Dame Clare Marx Building for elective orthopaedic care, mostly hip and knee operations. The Healthwatch Suffolk report from the survey has been instrumental in showing that people living in Suffolk are willing to travel across the country to access elective (planned) NHS services. Our new elective orthopaedic centre at Colchester Hospital will considerably reduce the need for patients to consider traveling further for their treatment, whilst still continuing to provide them the opportunity to have their care before and after their operation at Ipswich Hospital.*

*"The elective orthopaedic centre will reduce waiting times for patients which will also reduce the chances of people becoming anxious as they wait for surgery, as the Healthwatch survey suggests. We really welcome insights from surveys that Healthwatch Suffolk produce for us, because they provide many additional opportunities to hear the lived experiences of the people of Suffolk."*

**A statement from the East Suffolk and North Essex NHS Foundation Trust**

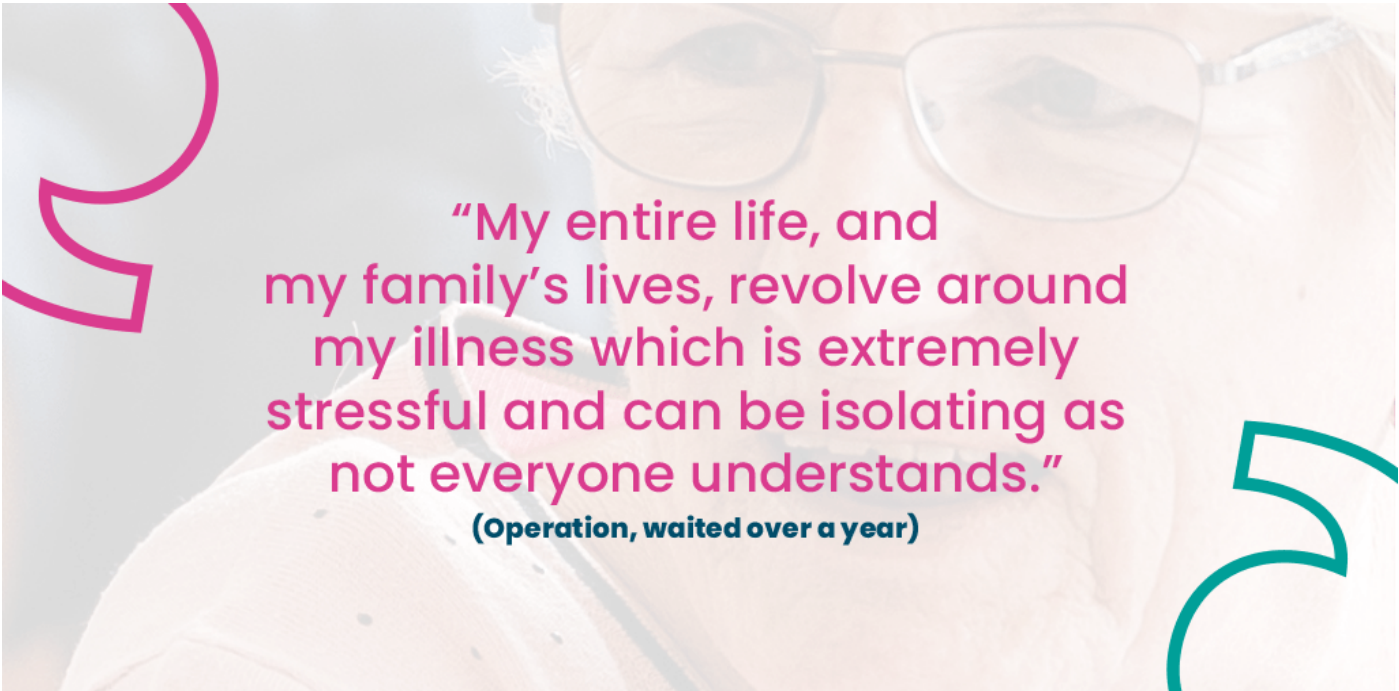
## Shaping national challenge on NHS care backlogs

The Public Accounts Committee (PAC) has the role to hold government officials to account for the economy, efficiency and effectiveness of public spending.

Our evidence is supporting the PAC, the government, the NHS, and local health and care leaders, to understand more about how waiting for hospital care is affecting people's lives. This includes our view that support offered by the NHS does not adequately address the many ways people's lives are impacted by delays to hospital care, leaving people open to other detrimental impacts on their physical and mental wellbeing.

The final report from the PAC includes: "Healthwatch Suffolk submitted evidence to us with powerful examples of the uncertainty, anxiety and other problems experienced by long-waiting patients", and that "Healthwatch Suffolk told us of the wider, often long-term impacts that treatment delays can have, including people having to live with increased pain and experiencing detrimental effects on their mental health, social life, and wellbeing."

[Click here to learn more about the PAC enquiry](#)



**"My entire life, and my family's lives, revolve around my illness which is extremely stressful and can be isolating as not everyone understands."**

**(Operation, waited over a year)**

### Explore our research on waiting for elective care...

This report highlights how people's lives have been deeply affected by their wait for hospital care – and how those impacts are likely to continue after the person has received their treatment.

[Click to find our report](#)



## Maternal mental health

Local findings to a national Healthwatch survey are helping to make sure mental health is no longer a missing conversation in people's care.

Our report (available from [www.healthwatchesuffolk.co.uk/news/maternal-mental-health](http://www.healthwatchesuffolk.co.uk/news/maternal-mental-health)) highlighted that people needed more time in appointments to talk about their mental health after the birth of their baby. Most felt their six-week check with a GP had focussed on the health of their baby, leaving little opportunity to highlight concerns about their wellbeing – and that needs to change.

Responding to the findings and national recommendations, Helen Bowles (Maternity & Neonatal Programme Manager for Suffolk & north east Essex LMNS), said:

*"Suffolk and NE Essex ICB have benchmarked themselves against the report findings and are incorporating further actions in their current Perinatal Mental Health plan to ensure all appropriate recommendations are addressed. The ICB is in the process of reviewing the GP six-week postnatal check and the report has provided clear direction to the mental health element of the appointment. A multi-disciplinary group is developing a toolkit for primary care colleagues to help them address the needs of new parents. This group includes service user representatives to ensure it is co-produced and meets our family's needs."*



### Help and support if you've got a little one at home, or on the way...

To support this project, we created content for our website to help people find their way to sources of information, help and support. You can explore our page on:

[www.healthwatchesuffolk.co.uk/maternal-mental-health/](http://www.healthwatchesuffolk.co.uk/maternal-mental-health/)



“

Looking ahead, we'll be working with Healthwatch Essex and the Suffolk and north east Essex integrated care system to engage young people and families about asthma care and support for children and young people.

**Look out for updates on our website and social media.**



## Your Care, Your Way - your experiences

Our campaign is increasing awareness of people's rights to accessible information from local NHS and social care services, and we're challenging services to take a better approach.

'Your Care, Your Way' (YCYW) has been a national campaign that has helped us to:

- develop new ways for people to share their experiences;
- improve local awareness of people's rights to accessible information and support under the Accessible Information Standard - a legal requirement on services to meet the information and communication needs of people using services;
- make sure local people have a voice to influence national NHS policy.

### The national YCYW survey

People in Suffolk are well represented in ongoing work by Healthwatch England to challenge NHS policy on the Accessible Information Standard (AIS). In fact, more people from Suffolk responded to the survey than from any other area of England.

Healthwatch England wrote publicly to NHS England, calling for it to publish its delayed review of the AIS and clarify how Healthwatch recommendations (initially welcomed by NHS England) will be used to improve people's experiences.

### What is the latest update?

The Accessible Information Standard (AIS) review has been drafted and the work of our network in relation to the Standard, and the accessibility issues people face when accessing services, is cited nine times in the paper from NHS England.

We are expecting the outcome of the national AIS review to be published in the summer of 2023, and Healthwatch around the country will be helping to promote its publication to local stakeholders, providers and communities. We have a key role to make sure our local leaders are aware of their requirements to deliver accessible services to all.



## Extending the campaign

Exploring access to health and social care for people who are d/Deaf or hard of hearing in Suffolk



### Helping people to feedback to us

Our latest YCYW survey has been exploring access to health and care for people who are d/Deaf or hard of hearing. We've worked closely with local community groups, and our own co-production ambassadors, to develop our survey and improve the accessibility of our projects.

To support this work, we launched a new service called SignLive. It gives people access to an interpreter so that it is possible to contact our team using British Sign Language (BSL). We also created a BSL video for social media to encourage people to share their experiences, and a BSL format of our online Feedback Centre so that people could continue to share their feedback with us.

### Our next steps

More than 140 people have shared experiences.

Look out for our report about people's experiences in June 2023. We hope to share information about what people said could help them to access care, and to work with services like hospitals and GP practices to encourage better compliance with the AIS in Suffolk.

### Early impact

Some services are already responding to feedback from d/Deaf and hard of hearing people. In one example, a local GP practice took action after a person who was d/Deaf could not respond to the practices alert system for patients in the waiting area.

"...we have since put in a process for any patients who are either visually or hearing impaired, this is now noted on the 'patient home screen' on the clinical system so that clinicians are aware when they are required to meet the patient in the waiting area, I have also communicated this to the whole team."



**European Union**  
European  
Social Fund

## **Developing Skills in Health and Social Care – An evaluation (year two)**

This project has continued from 2021/22 to independently evaluate a Norfolk County Council and Suffolk County Council programme addressing long-standing workforce challenges within health and social care services.

Part funded by the European Social Fund, the Developing Skills in Health and Social Care (DSHSC) project was developed to address persistent recruitment, retention and workforce challenges within health and social care services. It aims to support skills development by providing fully funded accredited training to staff who live and work in Norfolk and Suffolk.

The benefits for health and care staff include:

- free access to funded accredited training
- increased knowledge, skills and confidence
- opportunities for career progression and higher earning potential

The benefits for services include:

- fully funded training for staff that will provide them with more skills and knowledge
- investment in staff to help with employee retention
- enabling staff to provide higher quality, person-centred care

All participants have access to mentoring and support to help them to complete their accredited learning.

Ultimately, the DSHSC project aims to support a more sustainable health and care workforce, and therefore also improvements to the quality of services across Norfolk and Suffolk. Our evaluation has supported the DSHSC team and Steering Group to:

- review the impact and effectiveness of the project
- create an action plan that has supported improvements within the project
- understand more about the different perspectives of project partners
- identify how the project can support people working in health and social care services to take up the offer of education, and to remain engaged in learning
- communicate about project outcomes, and areas of future development

Low staff capacity within services is often noted as having a negative impact on people’s experience of care and support. By supporting the development of this project over a period of two years, and therefore the potential benefits to the retention and skills of health and care staff, we are helping to tackle one of the most significant contributors to health and care system pressures.



*“The Developing Skills in Health and Social Care project has been working with Healthwatch Suffolk to evaluate the impact and effectiveness of our activities. We are now in the second stage of our work and have an excellent working relationship. They attend our steering group meetings monthly to update members of the most recent findings which allows our decision making to be fully informed, and we meet on a regular basis operationally to ensure the evaluation is working well to meet our aims and objects.”*

*“We were able to effectively use the recommendations (delivered in summer 2022) to improve the efficiency and effectiveness of the activity we provide for participants, for example adopting tailored communication, changing the way we offered information to participants at the very start of their involvement with DSHSC and expanding our mentoring service. The information from HWS also supports the reporting we do for the Department for Work and Pensions, the managing authority of our European Social Funding, as well as for senior stakeholders in Norfolk and Suffolk County Councils.”*

**Barbara Herring (DSHSC Project Manager)**

This project is on behalf of:





## Health coaching in Suffolk

The West Suffolk Foundation Trust has a team focused on training professionals in how to use 'health coaching' (a specific approach to delivering personalised care), and asked us to gather data that will develop its training programme, and ultimately improve health coaching interventions in practice.

“

*“We learned so much from Healthwatch Suffolk over the course of the year. Our journey started with an ambition to tell the story of the WSFT health coaching programme, whilst capturing the real-life impacts this training has on both health and care practice and recipients of health coaching approaches. Our aim was to ensure something transformational rather than transactional, allowing us to act on any findings and recommendations.”*

*“Healthwatch Suffolk were committed to the ethos of transformation and supported us to embed co-production in the development of the evaluation framework, and we now have an excellent analysis of qualitative feedback from local people and professionals who have experience in health coaching. Co-production enabled broader contribution from across the health, care, and voluntary and community sector, patients, and professionals in both the development and participation stages and has helped form clear recommendations for future focus.”*

*“This local analysis sits on a foundation of mounting evidence to support health coaching approaches in health and care services. Healthwatch Suffolk has given us a fantastic co-produced qualitative evaluation with solid recommendations to take forward. Our experience working with the team has been inspiring!”*

Jessica Hulbert (Public Health Manager, West Suffolk Foundation Trust)

## What is health coaching?

Health coaching is an approach used by health and care professionals to support people to take greater responsibility for their own health and care needs. Those trained in health coaching actively seek to give people the knowledge, skills and confidence to set and achieve their own goals for their health and care.



### Download the report

Visit [www.healthwatchsuffolk.co.uk/news/healthcoaching](http://www.healthwatchsuffolk.co.uk/news/healthcoaching) to see what people told us about their experiences of using health coaching in Suffolk, and how it is informing the delivery of local care and support.



Looking ahead, we hope to work closely with the Digital, Data & Technology (DDaT) Strategy and Assurance team of the Suffolk and North East Essex Integrated Care Board to include people in the design of future digital care and support. This work will build upon our previous work that is continuing to shape a more inclusive future for our local health and social care services.

**Read more about this from page 50.**



## Your voice in national work

We've shared people's experiences with Healthwatch England, and national enquiries, to influence debate and challenge on government and NHS policy.

Previously, we have described how we included people's experiences in a national debate on NHS care backlogs by the Public Accounts Committee, and how we have made sure people in Suffolk are well represented in national work by Healthwatch England to challenge NHS policy on accessible information.

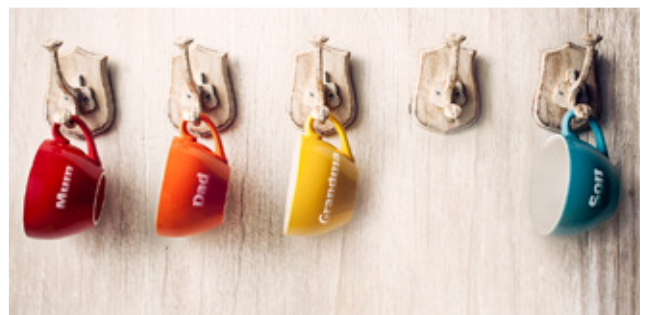
Here are two other ways that we have contributed evidence to national bodies and enquiries.

### End of life care and support

People's experiences were included in a national report by a group of MPs looking at palliative care during the COVID-19 pandemic. It means local feedback has helped to shape recommendations for the NHS, and the Government, that may have implications for how care is provided to people in the future.

The final report of the All Party Parliamentary Group (APPG) for Hospice and End of Life Care, supported by Hospice UK, highlights the key findings and reflections from evidence submitted across England. It describes a distressing picture of traumatic deaths that took place during the pandemic and the lasting impacts on health and care staff and grieving loved ones.

#### Find our report



Our report about end of life care in the pandemic has shaped the response of local leaders to challenges people faced, influenced local training around palliative care and more.

[Click here to explore our findings](#)

The final report includes evidence from us to show how, during the pandemic, many were bereaved under traumatic circumstances. The APPG report says bereaved people expressed an “intensified sense of guilt” and that many had questioned whether, if the circumstances had been different, their loved one would have died at that time or in the way that they did. This contributed to people’s grief at the time, and made it harder for people to process what had happened.

This quote from our research was included in the final APPG report:

*“The fact that we couldn’t see her all of this time in my mind was what caused her death, she just gave up as she couldn’t understand why my sister and I couldn’t see her every day like before.”*

The APPG makes recommendations to National Government, NHS England, Integrated Care Boards and the palliative and end of life care sector. The aim is to address the impacts of the pandemic and to make sure high-quality palliative and end of life care is available across the UK.

## Unmet needs in social care

We’ve contributed a case study to a project by Healthwatch England that will focus on unmet needs in social care. Combining insights from local Healthwatch together with national sources of experience, Healthwatch England will create a report to identify some of the ways people felt their needs had not been met as they progressed through the social care system in England. We will share more information about this when the work is published later in 2023.

**10**  
Years

**Looking back – we took the voice of LGBT\*Q+ young people to Westminster**



In 2019, we were selected to give evidence to a House of Commons Select Committee (the Women and Equalities Committee) that was exploring the wellbeing of young people who identify as LGBT\*Q+. It meant that we were able to include people’s experiences in an important national debate at the time.

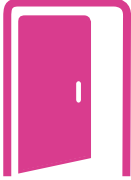
Our visit to London followed a submission we made to the inquiry, based on people’s experiences gathered in a short survey and from the nearly 14,000 children and young people that participated in our ‘My Health, Our Future’ project that year (see page x for more detail about MHoF).

Since this time, we have consistently submitted evidence to national inquiries to include people’s experiences in national scrutiny of our nation’s health.

# Research – Looking ahead

Here’s a brief summary of research we’re currently working on, and information about the impact we hope to achieve.

Spring



## Home care services in Suffolk

We will begin work with Suffolk County Council to evaluate people’s experiences of receiving home care.

Throughout 2023/24, the council will share our anonymous co-produced survey with people receiving home care across Suffolk. We’ll explore the quality of local services by asking people about how well the services are meeting their needs for support, the consistency of care and people’s experiences of interacting with care staff.

Every few months, we will review the results with Suffolk County Council leaders to explore areas of improvement identified from people’s feedback.



## Looking back – our previous impact from work exploring people’s experiences of home care services.

In 2018, we published similar work with Suffolk County Council.

Our ‘My Care at Home’ research supported the council to develop an entirely new model for the delivery of home care services at the time. And people who took part in our project were included in the process of choosing new providers to deliver the new services.

The COVID-19 pandemic prevented us from being able to re-visit this work once the new model of home care delivery began to operate. Therefore, we are pleased to be able to take this work forward once more, and to make sure some of our counties most vulnerable residents have a voice in their care.

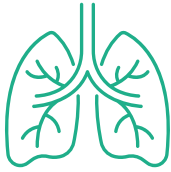


## Don’t miss a chance to have your say

Sign-up for our mailchimp updates to stay up-to-date with how you can help us to influence local care. In 2022/23, people opened our updates more than 15,000 times to learn more about our work and how they could take part in our projects.



Summer



## Support for children and young people with asthma in Suffolk and north east Essex

From the summer of 2023, we'll launch new opportunities for young people and parents or guardians to feedback about asthma support for children and young people across SNEE.

The project, which will be delivered together with Healthwatch Essex, aims to explore people's experiences within the context of national guidance on how asthma care should be made available to CYP and families managing the condition.

We hope to gain a thorough understanding about people's experiences, including their thoughts on what would help them to manage their asthma better in the future. The project will help to inform local and regional plans for future CYP asthma care and support.

[Click here for our latest updates](#)



*"Healthwatch Suffolk and Healthwatch Essex are key partners in Suffolk and North East Essex ICS, we are excited to be working in collaboration with them to give children and young people with asthma a voice on the care they, and their families, are provided with across our region."*

*Dr Raman Lakshman (Consultant Paediatrician at West Suffolk NHS Foundation Trust, and clinical lead for children and young people's asthma care across Suffolk and north east Essex)*

Autumn and beyond...



## My Health, Our Future (phase seven) and more...

Later in the year ahead, look out for the latest findings of our 'My Health, Our Future' project (phase seven) about young people's wellbeing across the county. We're already sharing reports with local schools and colleges that have helped to distribute the survey in 2023, and our countywide analysis (featuring insights on new topics) will follow in the autumn. You can find all previous MHoF reports, including information about the impact of this project, on [www.healthwatchsuffolk.co.uk/mhof](http://www.healthwatchsuffolk.co.uk/mhof).

Other projects to be completed later in the year include work focused on digital care, and opportunities to explore the experiences of staff delivering social care and support in people's homes, and other settings.

[Click here to explore MHoF](#)



## How our work continues to shape a more inclusive future for services



The design and development of digital care in Suffolk continues to be shaped by our co-produced ‘Guiding Principles’. They were developed in 2021 following our extensive research into people’s experiences of digital care during the COVID-19 pandemic.

Most recently, our ‘Guiding Principles’ were adopted by the Cabinet of Suffolk County Council. This is what Chris Bally, Deputy Chief Executive for Suffolk County Council and joint Chair of the Digital Inclusion Network, told us about the Cabinet’s decision:

*“We have championed the development of the Healthwatch Suffolk ‘Guiding Principles’ within Suffolk’s ‘Digital Inclusion Network’, and this has included a number of actions to ensure they are shaping the future of digital support in Suffolk. For example, together with Healthwatch, we presented to the Suffolk Health and Wellbeing Board to get the principles adopted by the wider Suffolk health and care system.*

*“Our ‘Digital Inclusion Policy Development Panel’ considered the ‘Guiding Principles’ as a part of their work, and were very impressed by their simplicity and clarity. The Panel considered how they could support, and further strengthen, the Council’s own approach to ‘Digital by Design’. As services are increasingly delivered in digital ways, the Panel concluded that it was more important than ever to think about how to support those who may have difficulty engaging with online services to ensure they are not excluded. This led to the recommendation to adopt the ‘Guiding Principles’, and account for them in the design of our future services.*

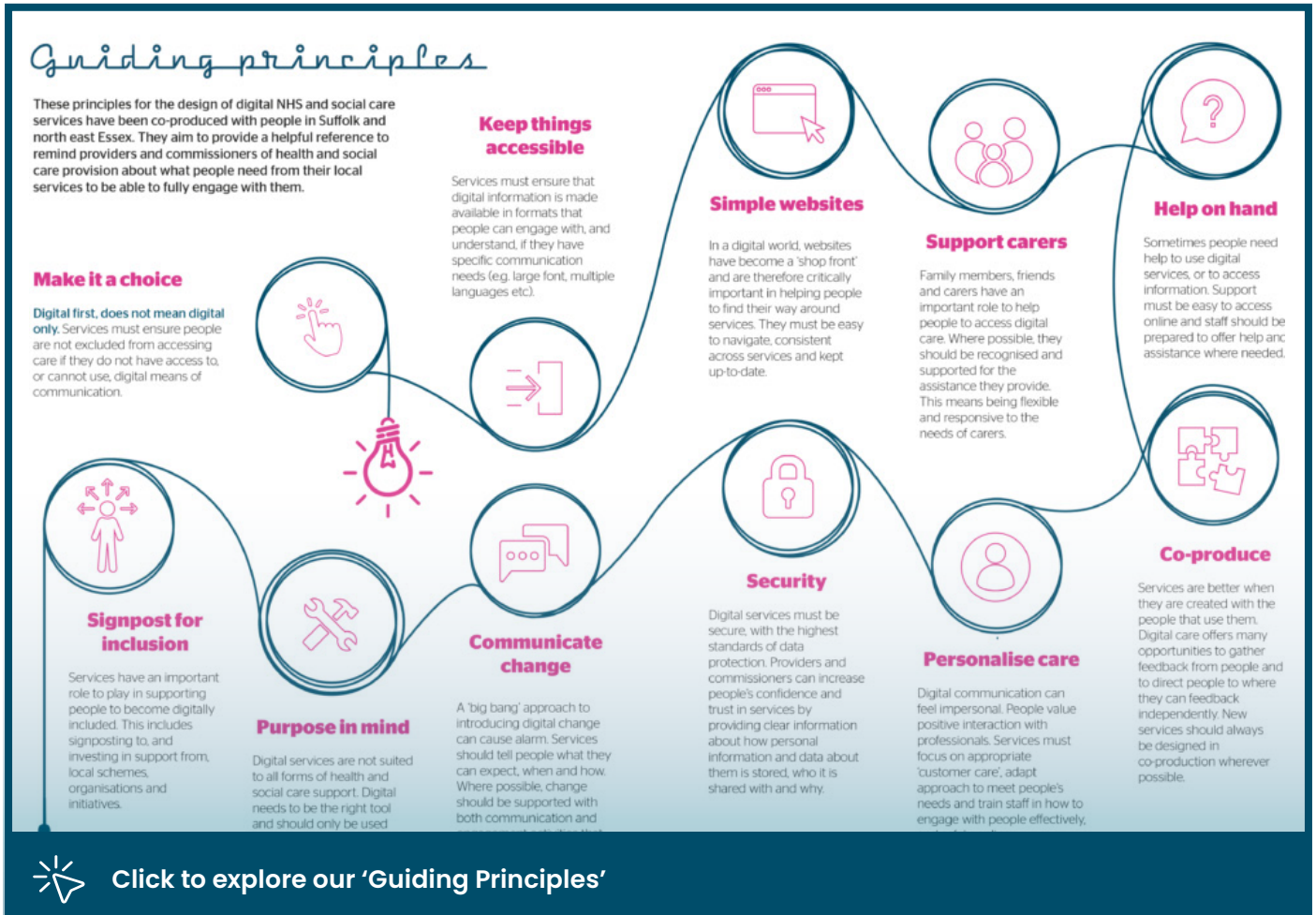
*“The ‘Guiding Principles’ will act as a useful framework for service designers and developers at the County Council. The Cabinet were keen to adopt them, and the Leader of the Council singled them out as a significant contribution to supporting digital inclusion in Suffolk. Work is now underway to communicate the principles far and wide within the County Council, and to develop supporting material to help service managers in their implementation.”*

*“The Suffolk and North East Essex ICS have a long standing relationship with Healthwatch to make use of their links that connect with, and represent the views of, our diverse ICS population. In particular, the Digital, Data & Technology (DDaT) Strategy and Assurance team have worked with Healthwatch to understand what challenges and opportunities existed for our citizens with regards to using digital for the delivery of our services.*

*“The result was the Guiding Principles, a nationally recognised production aimed at providers and commissioners of both health and social care to ensure our people get the best from their local health and care services. Another important aspect of this was the feedback we received to ensure we adopt a ‘digital first, but not digital only’ approach to the delivery of health and care so the DDaT team ensure that our programmes of work encompass the guiding principles as well applying an equalities and equity impact assessment which we also use when we work with our partner organisations.*

*“We are hoping to commission a further piece of work linked to the digital care agenda, to obtain some valuable research and insights that will be help support us to shape our DDaT offer in this area for the benefit of all.”*

**Jo Lennox (Acting Digital Programme Director for Suffolk & North East Essex Integrated Care System)**





## 2. Co-production

Find out how our team has been working to encourage services and leaders to embrace co-production – an approach that makes sure services are shaped with, and by, people as equal partners.

### What is co-production?

Co-production is when people work equally with professionals and decision-makers to design, evaluate, and improve health and social care services. It is a cultural shift for our health and care 'systems'. However, it is an approach that offers huge potential for innovative change in the way that people, and communities, are supported.

Our team is working to establish a culture of co-production across Suffolk, ensuring that professionals are working with local people and communities as equal partners, to plan and deliver care whenever possible. We provide support, guidance, workshops and training to embed co-production as an approach to delivering, and evaluating, services. The team is supported by ten Co-production Ambassadors who bring a wealth of lived experience of services, and of co-production.



If you would like to know more about co-production, or discuss a project with us...

Email [coproduction@healthwatchsuffolk.co.uk](mailto:coproduction@healthwatchsuffolk.co.uk) or call **01449 703949**.

## Our Ambassadors

It is important to involve people from outside of Healthwatch Suffolk within our co-production work and thinking. That's why we created the role of Co-production Ambassador.

Here are just some of the ways ambassadors supported us in 2022/23:

- Ambassadors worked together with organisations making a commitment to co-production (see our campaign from page 56). They helped them to explore co-production, and to make an action plan.
- Drawing on their experiences of using services, as well as their knowledge of practising the principles of co-production with organisations, they co-delivered our co-production workshops (see from page 54).
- They have helped us to film, and edit, short videos about co-production.
- They have visited Ipswich Community Media to learn from their community champions and explore co-production together.
- They have helped to support and develop our research projects, and to make sure they are accessible to everyone.
- They have supported co-production of addiction and gambling training sessions for GP's, practice managers and primary care nurses.

The role is adaptable and flexible, requiring no specific experience, time or skills. The direction of the role is dependant on the individual's needs, aspirations and availability.

“

It's a privilege working with the co-production team and being a co-production ambassador. I feel valued, and I have learned new skills. I look forward to assisting in bringing service providers and communities together to establish a way of working that benefits us all in society for a better tomorrow.”

**Anetta Bradshaw**

“

We are all service users one way or another. Having a voice to shape the way our services work for ALL of us is the most important thing.”

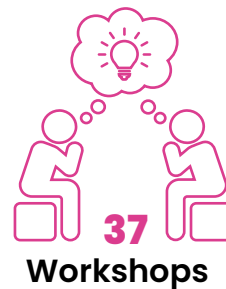
**Claire Reeve**

Learn more about our team and ambassadors on:  
[www.healthwatchesuffolk.co.uk/co-production/meet-our-co-pro-team/](http://www.healthwatchesuffolk.co.uk/co-production/meet-our-co-pro-team/)



## Co-production workshops

Co-production workshops help organisations and services to develop a shared understanding of co-production, its benefits, and how to embed our local principles into their projects.



We create a learning environment through which people are supported to think about:

- what co-production means to people in Suffolk
- how to collaborate with people in a co-production environment
- how to make co-production a sustainable long-term approach to service development
- how co-production is different to the ways organisations engage already

Co-production Ambassadors have helped to develop, and deliver, the workshops. They have supported people to explore challenges that are hindering a truly co-productive approach within services, and to define an achievable way forward.

Workshops were delivered to professionals representing organisations delivering a broad spectrum of different services to people in Suffolk. They included:

- Workshops delivered as a part of a national staff induction training programme for Medequip
- Suffolk County Council Engagement Officers
- West Suffolk Foundation Trust Quality Improvement training programme
- Saxmundham and North East Integrated Neighbourhood Team
- Leading Lives senior Directors
- South Norfolk and Broadlands Health and Wellbeing Partnership Board



*“South Norfolk and Broadland Health and Wellbeing Partnerships had a great experience. Every interaction has been warm and encouraging. Partners who took part in their co-production training sessions all came out with a renewed excitement for what can be achieved through co-production, and the Partnerships are now collectively determined to build to a point where co-production underpins their work.”*

**Abigail Langley (Health and Wellbeing Partnership Officer)**



*“We are delighted to be working with Healthwatch Suffolk to develop and embed a culture of co-production throughout Leading Lives. This began with a face-to-face awareness workshop for our Board of Directors and senior leadership team in November 2022 and has continued into 2023 with a roll out of online workshops for our workforce. Having co-production ambassadors co-deliver training has been enlightening and inspirational for our own co-production journey. We look forward to working closely with Healthwatch Suffolk to identify experts and involve our stakeholders in co-production activity.”*

**Boo Dendy (Business Development Manager, Leading Lives)**



*“The co-production training reminded me how important it is to design services with residents. They are the expert and can give an insight into their needs, one that we should embrace. Designing services for, instead of with, residents is counterproductive and ultimately (at worst) will offer the wrong service, or one that is expensive and does not deliver for them. I think all customer services should be designed with the expert, only this way will they deliver what they need and value for money for everyone.”*

**Councillor Fran Whymark - Chair of Broadland Health and Wellbeing Partnership)**

## Feeling inspired? Get in touch

Get in touch, or visit our website, to learn more about our workshops - or to book now.



[www.healthwatchsuffolk.co.uk/co-production/coproworkshops/](http://www.healthwatchsuffolk.co.uk/co-production/coproworkshops/)



01449 703949



[coproduction@healthwatchsuffolk.co.uk](mailto:coproduction@healthwatchsuffolk.co.uk)





## Our co-production campaign

Will you commit to co-production? That's the question we're asking local NHS and social care services through our ongoing co-production campaign - 'Commit to co-pro'. Read on to learn more about how our campaign is making a difference.

Through this campaign, we hope people will understand that co-production is valued, and how they can be involved in shaping services. The campaign is helping local providers to show how they are empowering people to participate in their services.


### What are the benefits for organisations that sign up?

The first step is a chat with two of our co-production ambassadors. They help people to build upon their understanding of what co-production is, and the value that it can bring to services.

From there, we'll work together with organisations to help them to realise their co-production goals. That includes support to explore how they can bring people into their process of co-production, and to make an action plan.


Every organisation that has made a commitment receives a bespoke communications pack with materials that make it easy for them to be visible about their commitment, and to encourage people to join in.

See our campaign page for more information on [www.healthwatchsuffolk.co.uk/co-production/committocopro/](http://www.healthwatchsuffolk.co.uk/co-production/committocopro/)



**Feeling inspired? Get in touch**

Sign-up to our campaign on [www.healthwatchsuffolk.co.uk/committocopro-signup/](http://www.healthwatchsuffolk.co.uk/committocopro-signup/)





# Who has made a commitment?

## Medequip

Medequip provides community equipment services to local authorities and the NHS. In 2021, we provided co-production training to groups of its staff. Since then, it has progressed co-production in the UK and embedded our workshops into its national staff induction programme.



### A local commitment to co-production

Medequip Suffolk has worked with co-production ambassadors on an action plan for their commitment to co-production. This has included more involvement of people in how its services are provided and increased employment opportunities for disabled people. Part of the plan has been to appoint a Co-production Champion (Oliver) at the Suffolk Depot. Read a statement from Oliver below.



*“Making the culture change at the front line is where I will be able to direct and help change the mind set of those who are client facing and in their own lives as well. Making a culture change that has a positive effect both during work and at home can bring out more humility and care for those who may need it and for those who think they don’t. Being the Co-Pro Champion at the depot means I get to be a part of the culture change, and means I can spread the message and aid in the implementation across the depot at a more face to face level.*



*“Making the improvement and ever evolving change to not only the Suffolk Depot, but other depots I work at and visit, it is important to be able to have the communication skills to deliver co-pro effectively, rather than being bogged down by what some may not understand. That being the simple message underneath co-production, which ultimately means providing a better and more wholesome healthcare service, making people feel cared for and noticed, rather than just another number on a spreadsheet.”*



**Oliver Goodey (Medequip Trainer, and Co-Production Champion, Suffolk Depot)**



## A different way of thinking...

Medequip invited our team, and Co-production Ambassador Robert, to join a stand at the Suffolk Show. The aim was to help people to explore co-production, and to encourage feedback.

It's all a part of Medequip Suffolk's commitment to include people's experiences in how its services are delivered. The service is also encouraging people to feedback by including our widget on its local web pages.

Read more on [mq-uk.com/suffolk](https://mq-uk.com/suffolk)

The large poster on display at the show explained how Medequip has established a different way of thinking to give people a voice in its service.

## Steam House Cafés are committed to co-pro!



*"We have been working with an ambassador as we develop the STEAM mental health café service in Bury St Edmunds. Having Roy as part of our Lived Experience Advisory Forum has been like welcoming a critical friend. No only does he bring valuable lived experience and insights as a service user, but he has so much knowledge of the system that offers a wider perspective in our discussions. I am finding it to be a really rich experience having an ally who is not afraid to challenge us, to raise questions and hold us to account, who does so with humour and a genuine desire to create positive experiences for service users."*

**Beth Stephens (Steam House Cafés)**

## Suffolk Safeguarding Partnership (SSP)

After attending a co-production workshop, the SSP took a further step toward co-production. It worked with ambassadors to co-produce an 'openness statement' – a written commitment to how the SSP will be open about its work – an important principle to underpin safeguarding process in Suffolk.

Our work together continues, and co-production ambassadors have since supported the SSP to develop resources that will promote better co-production with families and communities in the future.



### Read the SSP statement

Click here to download the 'openness statement'.



## Visit our website to view more commitments

Find more information about how organisations are working to include people in their services. That includes Suffolk SENDIASS (Special Educational Needs and Disabilities Information Advice and Support Service), which formalised its commitment to co-production by signing up to our campaign.



*"We have begun to focus on what we need to do to make sure co-production is embedded across our service. We plan to meet with groups of young people to find out what they would like from our service, and to create content with them for the young person section of our website. We hope, as a first step in our plan, to agree a SENDIASS co-production pledge or promise."*

[Click to explore more commitments to co-production](#)





## The Integrated Care Academy (ICA)

Since helping to establish the ICA as a founding partner, it has introduced course content in integrated care for pre-registration, post-graduate certificate, diploma and master's students, progressed research to further understanding of integrated care, and established a Co-production Hub.

The ICA is the first of its kind in this country. It is a partnership between the University of Suffolk, the Suffolk and North East Essex Integrated Care System (ICS), Suffolk County Council and Healthwatch Suffolk – bringing together the four pillars of higher education, an integrated care system, local authority, and the voluntary and community sector.

Our Co-production Coordinator supports the Co-production Hub hosted by the ICA to uphold co-production as an operating principle, to support and advise education, leadership and research, and to support other organisations and communities who wish to expand and improve their co-production activities.

Over 2022–2023 the Co-production Hub has co-delivered training development days and sessions for people working within integrated care systems. It has also introduced co-production seminars into University of Suffolk courses for students of health, social care to help them to learn the importance of involving people in co-production at the earliest stages of their careers.

Together with Co-production Hub members, a co-production 'network of networks' has been established by the ICA for people to share tools, discuss challenges and collaborate more easily. To find out more, or to sign up to become a member of the Co-production Hub, visit [www.integratedcareacademy.org.uk/be-part-of-it/](http://www.integratedcareacademy.org.uk/be-part-of-it/).



*“Working with Healthwatch Suffolk on improving the important use of co-production in public service developments has been great. Their willingness to provide resources and support to the work of the Integrated Care Academy and our Integrated Neighbourhood Teams in this regard is very much appreciated.”*

**Dr Mark Shenton (Professor of Integrated Care and Lead for Special Projects SNEE ICB)**



*“Healthwatch Suffolk is a champion of co-production. They have championed this innovative approach of working in Suffolk and North-East Essex ICS, which is ensuring that service users and professionals are fully involved in helping to shape the way services are designed and delivered.*

*“They have been instrumental in the formation and operations of the ICA Co-production Hub, which has been working with a range of people and partner organisations to explore how co-production can be embedded within the work they do. Over the last year, we have been privileged to collaborate with them on several projects such as a short course focusing on embedding the concept of co-production within health and social care and VCSE sector.”*

**Freedom Duma - Integrated Care Academy, Programme Manager**



*“Healthwatch Suffolk have played an integral and pivotal part in ensuring that our Integrated Care Academy remains ‘honest’ to the value of co-production and co-creation which underpins all the work of the Academy.*

*“Sharing the lived experience of the people of Suffolk in relation to health can at times be challenging and uncomfortable, but Healthwatch Suffolk undertake this with sensitivity whilst still ensuring that their voices are heard and incorporated into all we do. Our partnership working goes from strength to strength, including shared PhD students, conference presentations, board engagement and always undertaken with an improvement and enhancement focus which is critical to our work.”*

**Dr Paul Driscoll-Evans (Pro-Vice Chancellor – Health & Wellbeing, University of Suffolk)**



# Tackling Poverty Together

We want to discover the answer to the question: 'What if people who struggled against poverty could help to make decisions about tackling poverty? Read on to find out how we're working to tackle local poverty with local people and leaders.'

With the cost of living on the rise, increasing numbers of Suffolk residents are experiencing poverty or struggling with low incomes and high housing costs. Action is needed to address this growing problem - but, for change to happen, we need to bring people with lived experience and local decision-makers together to work on shared solutions from a position of mutual understanding.

This project is modelled on the 'Poverty Truth Commission' approach, which aims to help people to listen to each other, share wisdom and build empathy. In doing so, it is hoped that trusting relationships are formed that empower people and decision-makers to find a way forward. You can learn more about this on the Poverty Truth Network website, which supports those delivering work inspired by the approach, on its website. See [www.povertytruthnetwork.org](http://www.povertytruthnetwork.org).

**"...lasting social change only happens when those who experience the struggle participate in generating that change."**



**We need you to be a part of local action on poverty...**

Have you got lived experience of poverty? Are you interested in influencing local change? Find out how you can join in with, or support, this work on our website.

[Click to join our project](#)

## Our progress

The project was launched at our Annual General Meeting this year, where (with the assistance of a large inflatable), we encouraged people to address ‘the elephant in the room’ – local poverty.

Speakers engaged people in powerful talks on the impact of poverty on local communities, and how the Poverty Truth Commission approach can be an effective means of achieving change.

Since the launch, we’ve been building a core group of around 30 people. Known as ‘partners’ in the project, they will support us to understand the nature of poverty, and consider creative ways of addressing the issues that lead to it. Some will have lived experience of being in poverty, or just about managing (community partners). Others will be from the private, public and charitable sectors, and be able to influence the poverty situation in Suffolk (civic partners).

To date, 13 community partners have joined the core group. They met for the first time in May 2023. It was an opportunity to begin to build the supportive and trusting relationships that are such an important part of this work.

Our next steps will be to recruit our civic partners, and to work toward an event where our community partners will creatively share their experiences of poverty together. From there, our focus will turn to time-limited projects that can help to achieve local change. Our supportive team will ensure people can participate in a way that suits their individual needs.



Our team has been engaging in communities to recruit ‘partners’ to our core group.



**“...it has given me such a purpose and I have so many ideas that I want to help with!”** – 13 community partners have joined our project. They’ll share their experiences, and work with civic partners toward local change.



*“I did not get the help I deserved through my struggles, which in turn made me stronger but damaged me – now is the time to make change happen, together. It really angers me that anyone can fall into poverty, and be totally ignored, or be born into it. I want to share my experiences so people, especially those not aware of poverty and its impact on people’s lives, will understand that it is a living hell – and that it is not a life. In 2023 people deserve more than to endure poverty.”*

A community partner in our Tackling Poverty Together project



# Youthwatch Suffolk

Our network for young people (Youthwatch) is a catalyst for young people to work in co-production with decision-makers in Suffolk, and to improve local support. Our influence, relationships, and statutory powers will ensure young people have a strong voice through Youthwatch, and that the things they say can engender real change for them.

## Youthwatch aims to:

- give young people an independent voice within the health and care system
- help young people to develop new skills to take forward into their future careers
- generate opportunities for young people to work with different organisations
- ensure young people are represented in our work and decision-making

Youthwatch is managed by a project officer. They help to coordinate a core group of members, and also a wider virtual network of young people who participate based upon their interest in specific work or topics.

Youthwatch is structured into the governance of Healthwatch Suffolk through the inclusion of a representative on the Healthwatch Suffolk Board. They have been provided with a Personal Development Plan and training, and have been offered a mentor on the Board.

## Progress to date

To date, the Project Officer for Youthwatch, and a core group of young people, have:

- helped us to include young people's views and experiences in the media.



- co-chaired meetings of the ‘Mental Health and Emotional Wellbeing Focus Group’. This included opportunities for people to share their experience of eating disorder support, and to suggest areas of improvement to local leaders of mental health services.
- attended a local discussion with the Secretary of State for Health and Social Care.
- Supported our research team to co-produce the ‘My Health Our Future’ (MHoF) Phase Seven (2023) survey (see page 28).
- identified core interests for the network that include LGBTQ\*+ support for young people and the impact of hormonal changes on mental health and wellbeing.

## Future activity

As Youthwatch Suffolk continues to grow, we hope to include young people in:

- project work on things that matter to the network, including writing reports and recommendations on key issues
- recruiting new members to Youthwatch Suffolk to grow our network
- contributing to health and care system events relevant to young people
- opportunities to explore work experience in the health and care system

For more information, or to join Youthwatch Suffolk, please visit

[www.healthwatchsuffolk.co.uk/youthwatch](http://www.healthwatchsuffolk.co.uk/youthwatch).



### Do you feel inspired?

Youthwatch Suffolk is a space for young people (aged 13 – 25) to come together to learn more about their health and social care services, have their experiences heard, and develop new skills.

If you’re interested in helping us to develop Youthwatch, or if you know a young person who might like to join in, please contact us.



[www.healthwatchsuffolk.co.uk/youthwatch](http://www.healthwatchsuffolk.co.uk/youthwatch)



0800 448 8234  
(freephone)



[info@healthwatchsuffolk.co.uk](mailto:info@healthwatchsuffolk.co.uk)



## 3. In the community

By reaching out to local communities, we're encouraging more people to feedback about services. We're also helping services to communicate about service change, and helping people to find their way to support.

Our team has an important role to include people in our work by visiting local communities, and representing us in various groups and forums.

The team:

- records people's feedback about NHS and social care services;
- delivers a signposting service within the community;
- connects us with local partners supporting people in communities;
- helps services to engage communities about service change;
- offers local groups and networks a way to be heard by services and commissioners;
- Attends local groups and forums to feed in people's experiences.



### Encouraging participation

Our team of Community Development Officers encourage people to participate in our work. For example, we visited James Paget University Hospitals NHS Foundation Trust audiology department to engage d/Deaf and hard of hearing people about their experiences of using services. Read more about this project on page 40.

## How our team supports our work...



### They helped people to find their way to support

More than **20%** of our signposting activity took place in the community. Our team helped people to find their way to many different types of services and support.

Read more about our information and signposting activity from page 90.

### They encouraged people to share feedback about their experiences

Community Development Officers recorded over **2,000** comments about local services. That's roughly 80% of the comments recorded to our Feedback Centre.

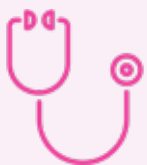
The comments are included in our work to influence local standards of care, to share feedback with services, to include local experiences in the media and much more.

**2k+**



### They connect us to people in communities

The team visited communities across Suffolk, engaging an estimated **4,000+** people in local meetings, groups, services and at events. It means that we can reach people that might not engage with us in other ways (e.g., by feeding back to our website), and make new connections with partners and community leaders.

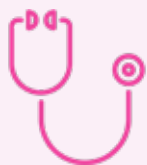


This year, we completed more than **120 visits** to local GP practices and hospital services across more than 70 sites.

The visits help services to make improvements, and support them to communicate about service pressures. We also recorded more than 110 visits to local community groups and networks.



## Supporting primary care in Suffolk



This year, we completed more than **100 visits to NHS services, including GP practices**. Our visits help practices to make improvements, and support them to communicate about service pressures and change.

Community Development Officers helped GP practices to engage communities as they continued to manage service pressures, and changing public attitudes towards services.

### Our visits to services

Visits to local GP practices, and our engagement with patients and carers:

- help services to communicate about change with patients and the public
- help us to gather feedback about all NHS and social care services
- support people to find alternative information, care and support
- increase people's understanding about how their practice operates
- enable practices to respond to feedback, and to make informed changes to their services

Following visits, practice managers receive a summary of the things people have told us. This means they can be responsive to patient feedback and understand more about the impact of any changes they may be making (e.g. new systems).

This year, feedback has helped practices to raise the morale of their teams and to respond to patient experience issues. This included problems with access to services (e.g., telephone systems), and changes to improve people's experiences of waiting in surgeries (e.g., by installing a shelter for waiting patients).

## Botesdale Health Centre

Patients are no longer ‘under the weather’ at Botesdale Health Centre after the practice responded to patient feedback and installed a new shelter.

Donna Szukalski (Practice Manager) said:

*“Healthwatch provides an invaluable service, connecting us with our patients and offering good insight into the patient experience. Healthwatch enables us to improve and enhance the service we offer.”*

*“Patients had expressed their concern about queuing outside for medication, where they are open to the elements. We felt this was a practical solution to improve the situation based on comments received from them.”*



We returned to the practice in June 2023, and this is what a patient of the practice told us about how the shelter is already making a difference.

*“The new shelter is great to have, and it’s wonderful that the practice have thought about how they can practically help patients waiting for medication.”*

Another patient said:

*“The dispensary is busy and queues do form. Having the shelter will be much more pleasant, especially on a day like this when it is really hot or when it’s raining.”*

**10**  
Years

### It’s not the first time we’ve kept people out of the elements

In 2019, Bildeston Health Centre constructed an outside cover for patients waiting for morning appointments in response to feedback.



## In their words – what local GP practices said about our visits

### Brandon Medical Practice



*“Always happy to work with Healthwatch, a very good way of receiving patient feedback and engagement to help us improve our services. They are always courteous and helpful, I would recommend the service to anyone.”*

### Botesdale Health Centre



*“Healthwatch is of great benefit to us and provides an invaluable service by connecting us with our patients, and giving us a good insight into the patient experience enabling us to improve and enhance the service we offer.”*

### Andaman Surgery



*“Healthwatch Suffolk always keeps in touch and comes out twice a year to speak to our patients, asking them for feedback about the practice’s services and if they have any comments about the wider healthcare system. It is always ready and willing to speak to our patient reference group about the important listening and influencing work of the organisation.”*

### Orchard House Surgery



*“We really appreciate the work Healthwatch does for us. Practice visits require little to no input from ourselves and have no impact on the running of our day. Their feedback report includes good and bad in a very concise and supportive way. We have used much of the feedback gathered at these visits to help us improve services. We find this service invaluable.”*

### Woolpit Health Centre



*“We are very grateful to Healthwatch Suffolk, due to the facilitation of feedback we would be unlikely to receive in our own surveys. They provide insight into the challenges being faced elsewhere and also pass this onto patients to ensure they are aware of the wider challenges we face, instead of assuming the issue is specific to us. We always act upon the feedback provided and ensure our staff are aware of the successes and areas for improvement. The feedback will also be discussed at practice and PPG meetings, which demonstrates the value Healthwatch surveys have.”*

**10**  
Years

## Looking back - how we've supported primary care

From changes to buildings (like new floors and shelters), to helping people to access services (e.g., changing systems), our team has supported local practices to make improvements since 2013. Here's just a few examples amongst many others:

- In 2018, we helped Ipswich Community Media to begin a new partnership with a local practice that meant a Roma Romanian Community Champion could volunteer to support easier access for the community.
- in 2019, Hardwicke Practice Group (Church Square Surgery) installed a hearing loop to improve the accessibility of its services following feedback.
- In 2020, Guildhall and Barrow Surgery commissioned a new telephone system to help people to access appointments.

### Grove Medical Centre



*"We work really closely with Healthwatch Suffolk. They are always available for advice and support. The team provides a vital link between the surgery and its patients, and this has proved to be invaluable in recent years."*

### The Rookery Medical Centre



*"In my experience it is always a pleasure to host Healthwatch in the Practice. The patients feel at ease talking to them and they elicit honest and fair feedback about how the Practice runs. They provide constructive help to the Practice by identifying areas where there may be a need to be more proactive but balance this with professionalism and insight into the day-to-day issues facing primary care. I always find that their results are fed back to us in a prompt and positive way."*

### Mount Farm Surgery



*"Healthwatch Suffolk have been invaluable in helping us to monitor our services from the patient perspective. Their staff are friendly and approachable when speaking to patients, and I think this encourages patients to open up and share their experiences. The feedback gained is always passed on in a timely manner so that we can identify any potential issues or common themes, and take the appropriate action."*

## Responding to patient feedback – Siam Surgery

Following our visits, Siam Surgery took time to reflect on changes it had made in response to feedback from us, and from its own engagement activity. It told us:



— The practice will commission a new telephone system ahead of the winter months to improve people’s experiences. Faults on its lines were causing significant frustration for patients.



— It is hoped negative comments about hold music will also be addressed by the change in telephone systems.



— The practice will make sure people are aware of how they can cancel appointments online, or by email, after patients complained about being marked as ‘did not attend’ when they could not cancel by telephone.



— The practice took action to improve accessibility after a patient in a wheelchair had struggled to reach its waiting area check in screen.



— The practice is exploring how it can open online booking for more of its services. This is a particular challenge because online services can add to demand on clinicians due to the need for triage.

Rachael Barton (Practice Manager) said:

*“We find the engagement sessions that Healthwatch run to be a real benefit to our practice. They provide our patients with the opportunity to talk candidly about their experiences and it allows them time to have thought-provoking conversations about their healthcare, unlike if they were simply answering a written survey. This means we get to hear new ideas and gain a more detailed insight into how our patients perceive our service.”*



*“Receiving positive feedback from a third party is always great for staff morale and the feedback is presented in a way where we can clearly identify trends and areas to concentrate on for making improvements to our service.”*



We recognise where services are positively responding to people’s experiences. It is clear this practice has taken time to reflect on how it could address things that mattered to people we engaged.



## Reynard Surgery



*"We learn so much from what the patients feedback. As a result of a visit in January, we looked at two things. One, our telephone system and as a result we changed to a completely different cloud based system with a call back opportunity. And two, we looked at the appointments that we offered for blood testing. We increased these to a further mornings appointments and are now able to offer blood testing on a mostly two week wait, sometimes less. We have also added a touch screen check in screen to make the queuing shorter for patients, and this also takes the pressure off the staff."*



**Our team attends hundreds of meetings and events to talk to people about our work, and to record their experiences of using NHS and social care services.**

In the summer of 2022, we joined the crew of the vaccination bus at Latitude festival. It was hot! But we enjoyed engaging with people about their experiences of using services and supporting colleagues working across the health and social care system at the event.



## 4. Working with others

**A collaborative approach is the best way to reach people for their views, and to achieve lasting change in health and care. In this section, discover some of the ways we've been working with others to include people in services.**

### **People make decisions, not services – so relationships matter!**

We hold a unique position in health and care systems as an independent partner – a part of the system, but with the independence to speak out about things that matter. We are an organisation connected to local communities (in many ways a part of the voluntary, community, faith and social enterprise sector), but with a statutory role enshrined in law to make sure people's experiences influence standards of local care.

We have a seat to influence decision-making at key health and social care boards, committees and events. In the year, this has included the Suffolk and North East Essex Integrated Care Partnership Board, the Suffolk Healthwatch and Wellbeing Board, Integrated Care Boards and many others. In addition, we seek opportunities to build relationships with influential leaders and commissioners to help them to know more about people's current experiences of care.

We also seek to influence the work of other organisations, such as the Care Quality Commission. We have an important role to make sure regulators, and other bodies responsible for monitoring the quality of local care, are aware of people's experience of services. We know our insights have helped to inform the outcome of, for example, CQC inspection reports. Read on to find out how we have worked with other partners in 2022/23.

## What people said about working with us

Here's what some of our partners and stakeholders said about working with us in 2022/23.



*"Despite being a small organisation, Healthwatch Suffolk is an integral part of the health and wellbeing eco-systems that cover East Suffolk. Their series of reports on mental health and wellbeing in young people have added hugely to understanding of the current mental wellbeing landscape and they are a positive and enthusiastic partner in engagement and co-production activities. Their presence at a variety of important health related meetings has been crucial to understanding the perspective of the patient/service user. Their input can at times be challenging, but it is always constructive and ultimately helps lead to better outcomes as a result."*

*"Healthwatch Suffolk has been an excellent partner to work with and we have found the team to be very supportive of our work, where they will often participate in events and at times, lead sessions. An example of this was at our Communities Partnerships Annual Forum, where they led a session on co-production. Their work on digital inclusion has also been very beneficial and is often cited in various meetings, where for instance, digital access is raised as an issue."*

**Nick Khan (Strategic Director, East Suffolk Council)**



*"Having steered us towards embedding the strategic principle of placing true co-production at the heart of our design process, Healthwatch have remained close at hand throughout the year as a critical friend; providing feedback, constructively challenging where necessary and, above all else, supporting OUR critically important project to build a new hospital for our community. I continue to look upon the close engagement of Healthwatch as one of those seminal moments upon which then progress of our project was founded."*

**Gary Norgate (Programme Director, West Suffolk Foundation Trust)**



*"Healthwatch are a valuable partner in developing and maintaining good services for patient care. This year, access has been a particular challenge and I was really grateful to be able to talk this through with Healthwatch and representatives of our population. It is vital we hear views and share understanding in such a balanced way."*

**Dr Ruth Bushaway (Medical Director, Suffolk GP Federation)**

## Our partnership agreements

A total of **54** partnership agreements are now in place with organisations working with people who use health and social care services in Suffolk. The agreements outline ways of working, and they are intended to form a foundation for working together.

### That includes:

- gathering and sharing the views of local people accessing care services
- promoting shared opportunities for people to influence the planning of local care
- the option to develop joint work that can benefit local communities
- the opportunity for organisations to be represented in our activities and research
- our support on engagement and research if sought

Partnerships help us to connect with, and engage, people from a broad range of communities and backgrounds. They help us to make sure people are included in our research, and offer opportunities for professional advice and guidance about how to include people in our work.

To view the full list of signed partnership agreements, please visit our website. We have included a short description about the role of each organisation, and links to their websites. Find them on: [www.healthwatchsuffolk.co.uk/about-us/our-partnerships/](http://www.healthwatchsuffolk.co.uk/about-us/our-partnerships/)



*“The Rural Coffee Caravan was created to address loneliness and isolation in rural Suffolk. We do this in a variety of ways, two of which offer our visitors a direct opportunity to be heard by Healthwatch Suffolk.*

*“One, the HWS team regularly travels with us to rural communities to chat face-to-face with rural residents. And two, We share surveys online and in real life, enabling rural folk to have their say about issues that matter to them. Both of these pathways enable and empower rural residents. They feel seen, included, and valued for their opinions. The HWS team understand and respect how we work and as a result we have built a highly effective collaboration. This is one of our most important and enduring partnerships.”*



**Ann Osborn (CEO, Rural Coffee Caravan / Meet Up Mondays)**



## Compassion amongst nature – engaging with our partners

It's not every day you're invited to explore crisp Suffolk woodlands for work. But that's exactly what the Green Light Trust (GLT) kindly offered a member of our team, so they could hear feedback about both people's experiences and the support the environmental education charity provides.

GLT delivers wellbeing and educational support programmes for disadvantaged and marginalised adults, children and young people at woodland locations. It's a partner of Healthwatch Suffolk, and has supported our work to hear from people about their experiences of local support. Here's what our Community Development Officer, Sue, had to say:

*"This was not what I would describe as typical community engagement! I was given the freedom to immerse myself in the experience of each session, as well as having the privilege of listening to people's individual stories and how the Green Light Trust was helping them."*

*"The open camp fire and cooking, the woodland walks or making things out of wood, were some of the things on offer - all under the gentle compassion of GLT leaders. It was a wonderful chance to feel the earth beneath your feet, and to feel alive."*



*"We have had a partnership in place with Healthwatch for quite some time without ever fully understanding what that meant, or what either party got out of it. I have always been impressed with the work to understand the health and wellbeing of Children and Young People across the county in particular. We allowed Healthwatch to gather some insight into our work with adults facing mental health challenges this year. Immersed in one of our 12-week courses they turned this into a snapshot report now hosted on their website. This was a great start for us and we are keen to discuss how this could be developed into an ongoing quality demonstration in coming years."*

**Tom Brown (CEO, Green Light Trust)**



“At Volunteering Matters and the #iwill Movement we are committed to unlocking the voices and experiences of young people and the challenges they face in their communities. Turning this knowledge in to power through youth social action, can often seem a difficult path to cut through to power. Healthwatch Suffolk and the ability they have built over a number of years to reach the voices of so many young people in schools on a variety of health-related experiences is hugely important to this work. Not only in adding weight and scale to the voices we hear, but also in the clarity of what they say, providing vital voice to power, modelling challenge from those that have the most to say to the most that need to hear it. As we continue our endeavours to support young people in Suffolk to build the place they want to live in, Healthwatch Suffolk are a vital component of helping drive that kind of systemic change through their robust and inclusive mechanisms and unstinting support.”

**Stephen Skeet (Director of Business Development and Impact, Volunteering Matters)**

## Other local Healthwatch

**Working together with other local Healthwatch ensures people’s experiences are represented in regional services (like local ambulance services), and across county borders.**

In one example, we worked with Healthwatch Cambridgeshire and Peterborough to share feedback about a poor experience of hospital discharge from Addenbrooke’s hospital.

We received feedback that an elderly person had been returned home in hospital robes and left on the doorstep with no means to care for themselves, or even to get into their home. The comment was passed to the patient experience team at the hospital, which confirmed it had discussed the matter with the hospital ward concerned to prevent similar cases of poor discharge in the future.

We also work very closely with Healthwatch Essex on joint projects across Suffolk and north east Essex (see overleaf for some examples). Our work together is helping to include people’s lived experiences in the strategic planning of local care, and this will include an upcoming project (together with the NHS in Suffolk and north east Essex) to explore people’s experiences of asthma care for children and young people.

Look out for more information about this work on [www.healthwatchsuffolk.couk/CYPasthma](http://www.healthwatchsuffolk.couk/CYPasthma) in 2023.

# Suffolk & North East Essex Integrated Care System (SNEE ICS)

Local Healthwatch are recognised as independent partners and leaders in engagement by SNEE ICS.

Together with Healthwatch Essex, our team is funded to inform engagement priorities of the ICS across Suffolk. That includes time-limited engagement on specific topics of interest to the health and care system (see examples on this page).

Data from the projects is shared with relevant leaders, commissioners and providers within the ICS, and also with Waveney Primary Care Networks.



## Menopause & perimenopause

Over 400 people across Suffolk shared their personal experiences of the menopause and perimenopause, and the support they received.

[Click here to find our report](#)

## Becoming a 'menopause friendly employer'

Inspired by this work, and having recently attended the Suffolk Libraries 'Menopause and Me' training course (delivered by Suffolk Mind), we now feel more able to support our staff who are going through the menopause, the perimenopause or those affected by it.

In 2022/23, we began the process of embedding a menopause policy within our 'Health and Wellbeing Strategy', and have completed the employers pledge to become a 'menopause-friendly employer'.

[Find out what this means.](#)



## Stoma support in Suffolk

People living with a stoma in Suffolk shared their experiences of local care, and what could be improved.

In total, 31 people took part in a short survey. Their lives had been significantly impacted by their operation, and some were still coming to terms with how day-to-day life had changed.

[Click here to find our report.](#)

# WHAT MATTERS TO YOU & WHY?

## SNEE ICS – What matters to you, and why?

We helped to shape a strategy that sets out how the health and care needs of local people will be met – not just by the NHS, but also through social care, public health and our local voluntary and community sector.

### What is the integrated care strategy?

The Department of Health and Social Care asked all 42 integrated care systems in England to develop an initial integrated care strategy, to be continuously developed and strengthened over time through ongoing engagement by health and care partners.

The strategy is important because it informs both local NHS and county council commissioning plans and the work of NHS trusts and wider system partners. In Suffolk and North East Essex, the integrated care strategy is now accessible as an online resource for everyone interested in health and care.

Visit [www.sneecs.org.uk/working-together/integrated-care-strategy/](http://www.sneecs.org.uk/working-together/integrated-care-strategy/) for more information.

### How did we help?

As an independent partner within the SNEE ICS, we supported its engagement with local communities about the development of the strategy. People were asked to share their responses to two key questions:

- What matters to you and why?
- How should we be ‘thinking differently’ in health and care?

We supported the development of the strategy by:

- establishing an independent online capture of people’s answers to the engagement questions
- helping people to respond to the questions when engaging in services, community settings, and in meetings



- contributing the full extent of our reports and data on people’s experiences of health and social care services
- attending themed online workshops to share and present our evidence and offer a perspective on people’s lived experience
- supporting communications by the ICP to encourage people to join in



*“Healthwatch have a statutory role in Integrated Care Partnerships, in particular around the development of the Integrated Care Strategy.*

*“Healthwatch Suffolk provided exemplar support to the development of the strategy for Suffolk and North East Essex. As well as helping to collate and share existing insight about people’s experience of health and care services, they provided an independent dimension to our engagement with the public and supported every stage of the process to ensure that the voice of local people, including those from marginalised groups, were at the heart of this work.”*

**Susannah Howard (Suffolk and North East Essex Integrated Care Partnership Director)**

We contributed evidence about people’s lived experience of key topics associated with the strategies development. We did this by presenting at online public workshops, and by sharing our insights with ICS leaders.

Our contributions directly led to the development of “I” statements about what people said they wanted from health and care, and “We” statements demonstrating the commitments of the health and care system to enabling timely and equitable access to services, ensuring people experience high quality care and support, and achieving better health outcomes for all.



## SNEE ICS – Maternity care

Feedback from 147 new parents was used by maternity leaders to shape its future strategy for our local maternity ‘system’ (LMNS).

After we shared feedback in March 2022, new content was added to the strategy in May 2022 that will help the LMNS to make sure people receive an equality of service at all stages of maternity care. We shared ‘four drivers of patient experience’ were built into the strategy because they mattered to those who shared feedback with us. They included the need to address:

- **Postnatal care** – ensuring people are well-supported with baby care, both in the hospital immediately after the birth of the baby and the community.
- **Staff approach** – there needed to be a renewed focus on making sure the approach of staff was contributing positively toward people’s experiences.
- **Staff capacity** – poor staff capacity can directly impact on care quality, and people often noticed teams were under pressure.
- **Information about treatment and feeling involved** – people need to receive crucial information at the right time. Concerns about care should be responded to, and staff need to check people have understood communication about their care.



*“The feedback has moulded the strategic direction and we are keen to progress to a new way of working. This strategy will therefore provide the beginning of a journey of change within our maternity and neonatal services, as well as within the wider Integrated Care System (ICS). Working together we will deliver innovative, and family focussed care models to improve experience and clinical outcomes.”*

Taken from the LMNS strategy

## Working together – a statement from the Suffolk and North East Essex Integrated Care Board

“Healthwatch Suffolk plays a vital role in the Integrated Care Board partnership, actively engaging, constructively challenging and always, consistently acting as the advocate for people and communities. Their unique role within the Suffolk system makes them an essential and trusted partner, without whom significant gaps would be felt.



“Healthwatch Suffolk has a strong reputation as being reflective, credible and a critical friend to the health sector, providing independent analysis. Their membership on committees, forums and groups as the independent champion for people and communities, ensuring leaders listen and take action is both valued and respected. Their honest and candid feedback ensure better quality outcomes are achieved.

“Healthwatch Suffolk has developed strong networks with local organisations and groups who have powerful and established roots into Suffolk communities. These groups have their voices amplified through Healthwatch. The numerous Healthwatch Suffolk reports and insights also shine a light on hidden communities and enable their stories to be told.

“We would like to reiterate our thanks to the Healthwatch Suffolk team for all the hard work they do, the insight, recommendations, commitment and collaboration.”



*“Healthwatch Suffolk remain a trusted and valued partner in our work across the Integrated Care Board and the wider Integrated Care System. Their work over the last year continues to not only influence our thinking but actively shape how we deliver with and for our local population. In particular for the last year, Healthwatch’s work to highlight those waiting for elective has helped drive our response to ensure people are waiting as well as they can and their recent report into dementia highlights the experiences of those with dementia and their carers helping influence our upcoming dementia strategy.”*

**Richard Watson (Deputy Chief Executive and Director of Strategy and Transformation, Suffolk and North East Essex Integrated Care Board)**

## Sub-groups and networks

Our sub-groups connect people with services to share information, and to shape decisions about local services.

### Diversity and Inclusion sub-group

The Diversity and Inclusion sub-group is a forum for sharing information, networking, and gathering feedback from different communities about local health and care services. A range of voluntary and statutory partners are members.

Throughout the year, the group has enabled people to share information about services and local support. A range of topics were explored in meetings across the year, with speakers attending to inform people about services and to hear feedback from the community.

For more information about our group, please contact us.

### Mental Health & Emotional Wellbeing Focus Group (MH&EWFG)

Suffolk's Mental Health & Emotional Wellbeing Focus Group has been led by Healthwatch Suffolk since 2013. It is independent of the statutory sector 'framework' and offers an equal opportunity for the public and the professional voices to speak about the most important mental health issues and subjects at any one time.

In 2022, two central themes were centre stage; Discharge from Care (over two meetings of the group), and later in the year, a wholesale review of the group and its Terms of Reference.

This co-produced review led to a relaunch of the Group in January 2023, with the key changes being:

- New Terms of Reference reflecting joint hosting between Healthwatch Suffolk, Suffolk User Forum and Suffolk Family Carers, with admin support from the Suffolk & North East Essex Integrated Care Board.
- Chairing being supported by an independent co-chair with lived experience.
- Planned meeting dates and themes a year in advance.
- A mix of face-to-face and online meetings.
- From April 2023, a direct link to Suffolk's two new Mental Health Collaboratives.

## What people said about working with us

Here's some more feedback from our partners and stakeholders, and what they said about working with us in 2022/23.



*"The Suffolk and North East Essex (SNEE) NHS111 and Clinical Assessment Service continue to work closely with Healthwatch, and this year completed a co-production process of reviewing complaints."*

*"Some of our complaints were anonymised and shared with a patient group and the co-production team to review and offer feedback on our complaints process. We found the whole co-production easy to use and was very beneficial to gain an honest independent view of how we respond to our patients."*

*"We continue to look at future opportunities to work together with our local supportive Healthwatch Team."*

**Zoë Pursglove (Quality & Patient Experience Manager, Practice Plus Group - SNEE Integrated Urgent Care)**



*"Healthwatch Suffolk plays an important role in supporting people to have their say on health and wellbeing issues and to empower communities so that their voices can be heard. This is invaluable to both Public Health Suffolk and the wider system to identify and tackle health inequalities and improve population health."*

*"Healthwatch champions the views and feedback of people and communities to foster innovation, co-production and creative thinking."*

**Stuart Keeble (Director of Public Health, Public Health - Suffolk County Council)**



*"Healthwatch Suffolk continues to play a vital role in contributing to the mental health and wellbeing of the population of Suffolk. It ensures the voice of communities are heard and acts as a critical friend to our Trust in our journey to improve our services. Importantly, through their proactive engagement Healthwatch Suffolk supports our collective response to feedback and insight from our population, to ensure that we listen, truly hear and most importantly act on that feedback."*

*"Healthwatch Suffolk plays a key role in the Mental Health and Emotional Wellbeing Focus Group which continues to encourage active conversations between service users and carers and representatives from our Trust, other provider partners and commissioners of service"*

*to improve outcomes for mental health. Healthwatch Suffolk is a member of our Oversight and Assurance Group with our ICB partners and regulators, offering insight and challenge in support of our improvement journey and response to the concerns raised by the Care Quality Commission.*

*“The engagement work Healthwatch Suffolk has undertaken in the past year to contribute to understanding and insight regarding mental health issues has been incredibly helpful in supporting the Trust in focusing on the things that matter most to the people of Suffolk. This includes reports on Maternal Mental Health, Dementia care and ‘My Health Our Future’ engagement work with children and young people. I would like to thank Healthwatch Suffolk for its constructive challenge to NSFT over the past year, as we strive to improve our specialist mental health services in partnership.”*

**Zoë Billingham CBE (Chair, Norfolk and Suffolk NHS Foundation Trust)**

## Suffolk VASP

The Voluntary and Statutory Partnership (Suffolk VASP) brings people together to talk about mental health and wellbeing, pool resources, reduce stigma and identify gaps in services.



With our support, the VASP has grown to become a popular network where people are empowered to share information about support for local communities, and to work in partnership. We facilitate the VASP network by employing the Coordinator, and providing support with the administration of finances and office space.

The network has a membership of more than 1,840 people (up 22%).

VASP members received regular updates (47 in 2022/23) from our Coordinator throughout the year with details of local services and events shared within the network. Our updates enable VASP members to direct local people to services at grass roots, and to access help when they need it.

The VASP hosts regular themed 'County VASP' meetings that feature speakers sharing their lived experience. For example, in December 2022, 95 people joined a county VASP meeting online to engage in discussion about women's mental health and wellbeing. In addition, voluntary Chairs of seven 'Locality VASP' groups have hosted 43 networking meetings in 2022/23. Every group offers open news sharing and networking meetings at least quarterly.

Furthermore, the VASP Coordinator continues to support the 'Suffolk Mental Health Friends initiative', which aims to support better mental health in Suffolk in three ways.

1. Visiting and talking together with local people in groups countywide.
2. Filming conversations with services about the support they offer to people, and sharing those films widely with VASP followers.
3. Providing 'Happy to Chat' bench signs across Suffolk to address social isolation.

**As part of the Suffolk Mental Health Friends programme, our VASP coordinator is using short films to share information about grassroots support in Suffolk.**

In this video, Rebecca Adams and Jade Wright (Senior Practitioners from Ormiston Families) discuss their 'Breaking Barriers' service for young people affected by the imprisonment of a close family member.





## Are you happy to chat?

Social connection is an important human experience that can help us to live happier and healthier lives, yet so many of us are missing out on chances for interaction as we live increasingly distanced lives.

The Suffolk Mental Health Friends initiative aims to address this by encouraging people to chat together in local communities.

There are now 38 'Happy to Chat' signs placed on benches across Suffolk with the support of partners like Bungay Town Council, Rec Café in Stowmarket (run by the Salvation Army), Beccles Town Council and West Suffolk Hospital.

Look out for a sign near you, and get chatting!

GG

*"Healthwatch Suffolk is very supportive of the VASP network, not just hosting our wonderful VASP Coordinator, but also promoting the network and what we do whenever they can.*

*"Members of their Community Engagement team regularly attend 'Locality VASP' meetings, helpfully sharing the current Healthwatch Suffolk work as well as learning more about other services provided to local communities to support signposting of local people to grassroots support."*

**Gill Jones (Chair, County VASP)**

**"The newsletter is such a great resource for keeping up to date with all the different work happening in Suffolk."**

Learn more , and join the VASP – visit:  
**[www.suffolkvasp.co.uk](http://www.suffolkvasp.co.uk)**



This page is intentionally blank.

# Helping people to find information and support

Sometimes it can be hard to know where to look to find support for your health, care or wellbeing. We can help.

We can point you to information about local services and the places where you might be able to find some support. If we don't know the answer, we'll try our hardest to find someone that does.





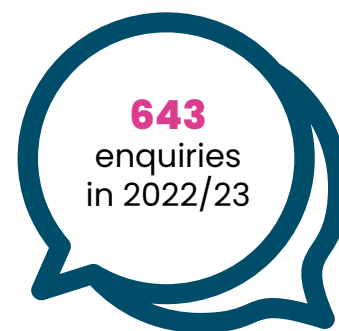
## 5. Our signposting service

People contact us to ask for help, and suggestions, about finding local information and services. Our staff respond to questions about many different aspects of health, care and wellbeing. In this section, we explore just a few of our most frequent enquiries.

### Information and signposting in 2022/23

Our service is delivered in several ways. They include:

- Calls to our freephone telephone number
- Submissions to our online contact form or email address
- In the community at events and meetings
- Featured signposting pages on our website



Enquiries covered a broad range of topics, including help to access services (e.g., NHS dentistry), make complaints to local services, find support for mental health and many more. Learn more about our top enquiries on the next page.

Data from signposting enquiries has also been used to inform local debates about access to NHS dental care (see page x), and primary care (see page x).



Since 2013, we've **logged more than 3,000 signposting enquiries** and shared information with tens of thousands of people online and in communities.

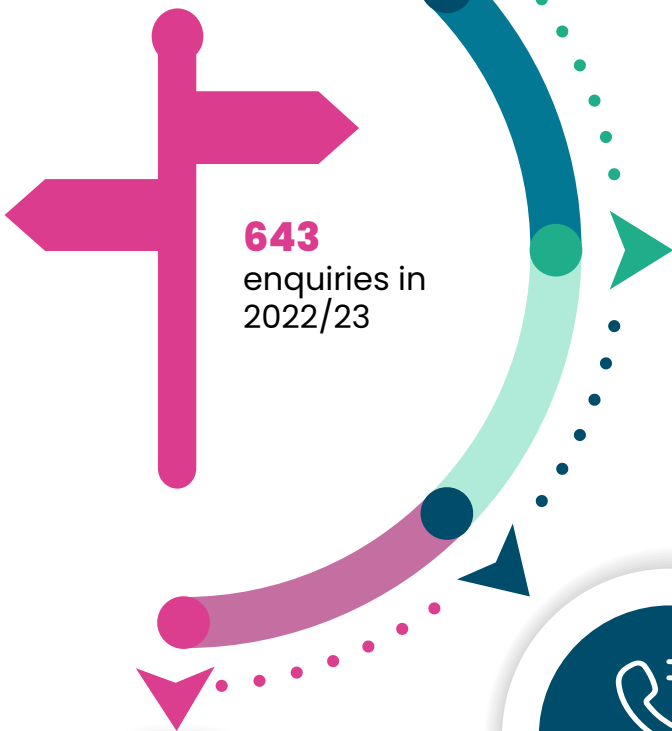
# Information and signposting in numbers

Our website includes pages with links to services and support. They support our research and help our team to respond to common enquiries. **There were nearly 5,000 visits to these pages in 2022/23.**



Our team visit communities to engage people about their experiences, and to help people find their way to support.

**More than 20% of our signposting activity took place in the community in 2022/23.**



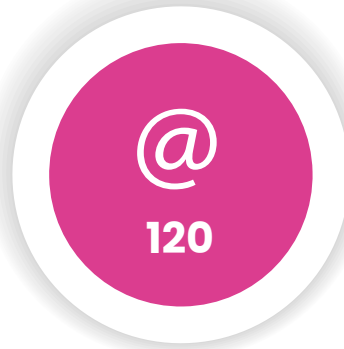
Our Feedback Centre is a platform for sharing experiences, but it is also a source of information about services.

**People visited our NHS and social care service listings almost 60,000 times in 2022/23.**



People contacted our freephone telephone number to speak with our team, and to ask for support.

**In 2022/23, 136 enquiries were made over the telephone.**



People can also ask for signposting support by email, or by using our online enquiry form. **In 2022/23, 120 enquiries were received from online contact.**

## Top three enquiry types 2022/23



**21%**

### Access to NHS dental care and treatments

The most common enquiry in the year related to people trying to access NHS dental care. We helped people to understand more about current options for accessing dental care, and how they could complain about poor access.

We used information about these enquiries to share insights with local NHS task forces responsible for improving access to local dental care and support. The data will also inform a debate at the Suffolk Health and Overview Scrutiny Committee in July 2023.



**12%**

### Complaints about services

People often sought information about how to make a complaint to an NHS or social care service, or how to raise concerns about care more generally.

We help people to find information about how to make a complaint and signpost people to local complaints advocacy support. In addition, we can help people to know how they can share their experiences for service improvement without the need of making a formal complaint to services (e.g., by sharing feedback with us, or directly with providers of care).



**11%**

### Primary care services - GP practices

People contacted us for a range of advice and guidance related to GP practices. This included information about people's rights (e.g. registration), practice operating procedures (e.g. problems with appointments, access to test results and making complaints) and general information about access to services from primary care (e.g. obtaining scans and progressing referrals).

Learn more about the signposting service on  
[www.healthwatchsuffolk.co.uk/signposting/](http://www.healthwatchsuffolk.co.uk/signposting/)

## Online content

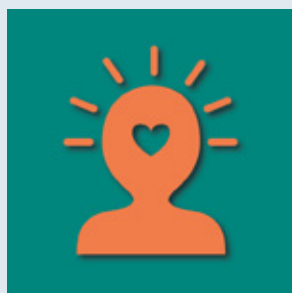
We've created online content to help people find their way to support. Our pages are based on frequent enquiries to our signposting service, but we also create specific signposting content to support our research projects.

For example, many thousands of young people taking part in our 'My Health, Our Future' surveys have been re-directed to our page about mental health and emotional wellbeing support for young people and families. In addition, we continue to share printed copies of our signposting card to support young people who may prefer not to access this information online.

Similar signposting content has been created to support our projects related to waiting for hospital care and end of life care and support. You can access our pages by interacting with our boxes below.



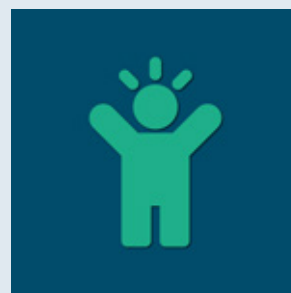
Support for dementia



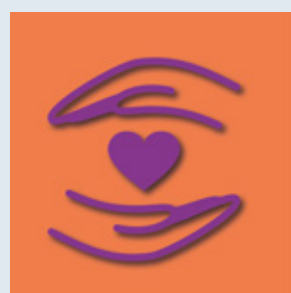
Mental health signposting



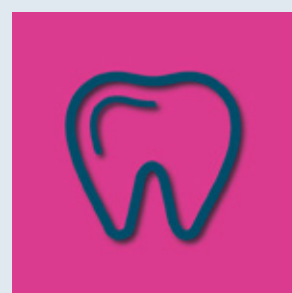
Maternal mental health



Support if you're waiting for care



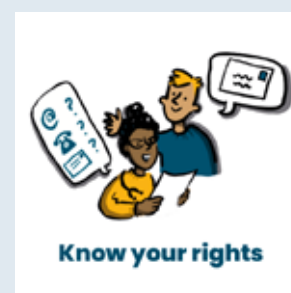
End of life care and support



Access to NHS dentistry



Support for young people



Accessible support

Explore more on [www.healthwatchsuffolk.co.uk](http://www.healthwatchsuffolk.co.uk)



...port sometimes. Here's some information about places you can go for support about your wellbeing...

...being Hub can provide information, advice, and guidance if you're a young person with personal wellbeing difficulties in east or west Suffolk. Contact the hub on **0345 600 2090**, and choose one that is right for you. If you live in Lowestoft and Waveney, you should use the service on **0300 300 0123** or text **07520 631590**.

...for 11 - 18 year olds where you can find information you can trust when you need it. [kooth.com](https://www.kooth.com) | **SOURCE** [thesource.me.uk](https://www.thesource.me.uk)

...on 2) - For urgent mental health support, use your phone to call 111 and press option 2 for Health Crisis Support. Anyone can call this service. **111 (Option 2)**

...is service if you need someone to talk to or tell you what to do. **116 123** | **Suffolk's LGBT\*Q+ youth work charity.** [outreachyouth.org.uk](https://www.outreachyouth.org.uk)

...with text ChatHealth to ask for help about a range of issues or make an appointment with a counsellor. Includes emotional support or sexual health services. **Text 07507 33355**

...port for young people experiencing mental health issues. **Text SHOUT to 85258** | **Wellbeing Suffolk - Find help (16+) with low mood, depression or stress.** [wellbeingandsuffolk.co.uk](https://www.wellbeingandsuffolk.co.uk)

...contact Childline about anything. Find information on its website, call the helpline or chat with a counsellor. [childline.org.uk/get-support](https://www.childline.org.uk/get-support)

There's more on [www.healthwatchsuffolk.co.uk/signposting/youngpeople](http://www.healthwatchsuffolk.co.uk/signposting/youngpeople). Scan QR >>>



## Helping young people to find support

Visit our website to download a copy of our signposting card (updated in 2023) for young people in Suffolk.

We've helped many thousands of young people to find information that can support their wellbeing. That includes by sharing our card with local schools and colleges, and making it widely available to our partners.

The signposting card includes information about some of the best sources of information, help and support currently available to young people seeking information, help or support for their wellbeing.

[Click to find our latest signposting card](#)

# Governance, statutory functions and decision-making

In this part of the report, learn more about the function of our Board of Directors, and how we make decisions.





# Decision-making

**Sound decision-making is extremely important if we are to maintain our credibility as a trusted champion of people's views into their health and social care services. It is also central to our core value of transparency.**

## How we make decisions

Like all organisations, we're making decisions about our work on a daily basis. This might include strategic decisions about our priorities, as well as decisions about things like taking on new work. In all aspects of our decision making, we aim to be guided by your feedback.

You can expect our decision-making to be guided by effective policies and processes (see overleaf) and to be informed by the right levels of oversight and assurance. You can also expect us to be transparent, and able to adjust to new advice. Here are just a few examples of things that influence our decision making:

- staff and volunteer policies
- independent advice from our human resources and data protection advisors
- co-production of our projects with local people and communities
- the opportunity for people to ask questions at our public meetings

We dedicate time and space to reflect on the decisions we have made, and how they have affected our work. This occurs at all levels of our organisation.

## Relevant decisions

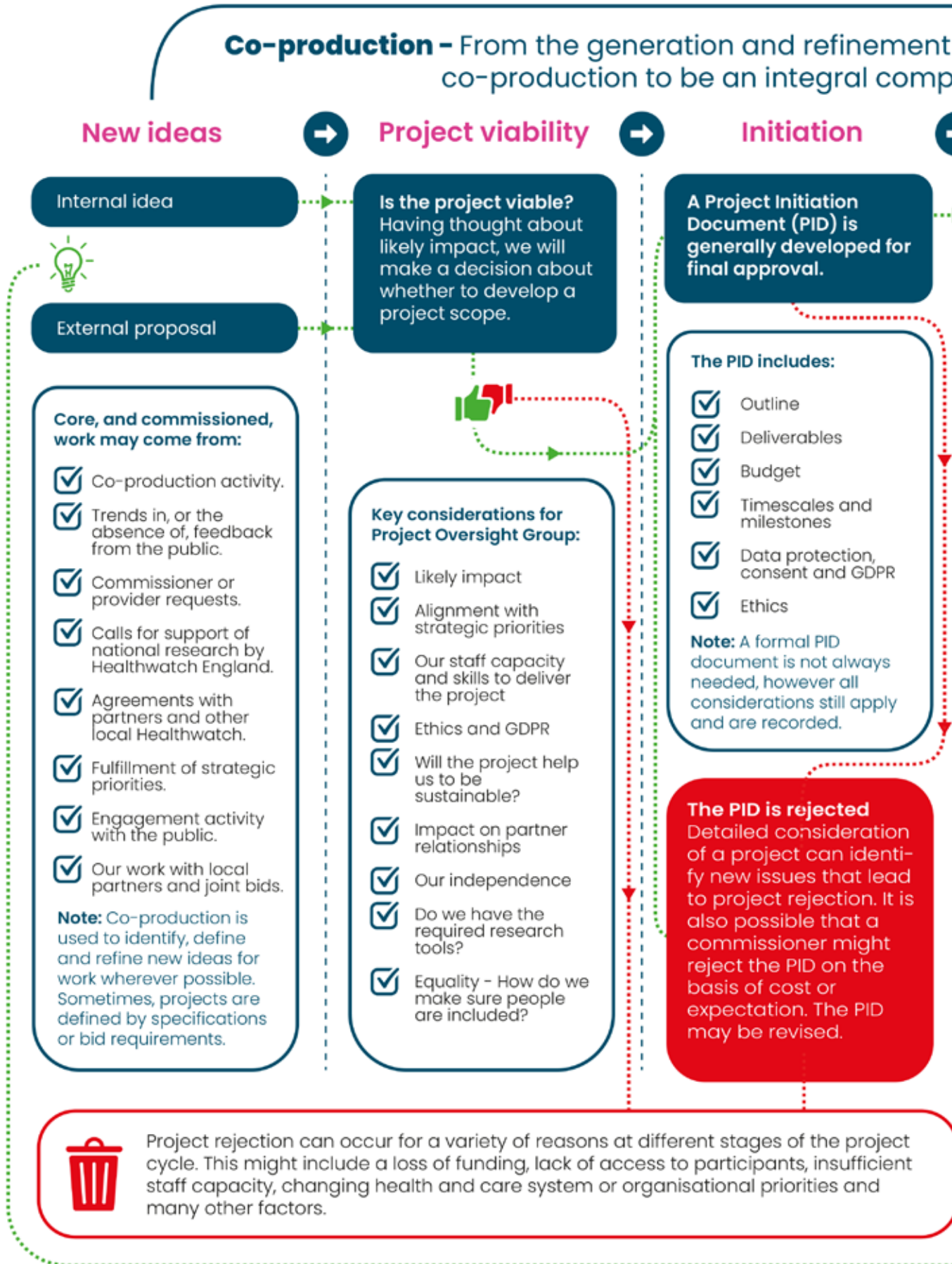
Relevant decisions are those that carry a risk to the independence, capacity or reputation of Healthwatch Suffolk.

The Healthwatch Suffolk Board is responsible for making relevant decisions. To inform their decision-making, our Board will consider whether the proposed decisions about our work fit with our organisational role and responsibilities. It will also assess how much change Healthwatch Suffolk can bring about from the decision, and whether that change needs to come from Healthwatch Suffolk. The Board are guided by our business priorities and decision-making policies.

For more information about how we make decisions, please contact us.

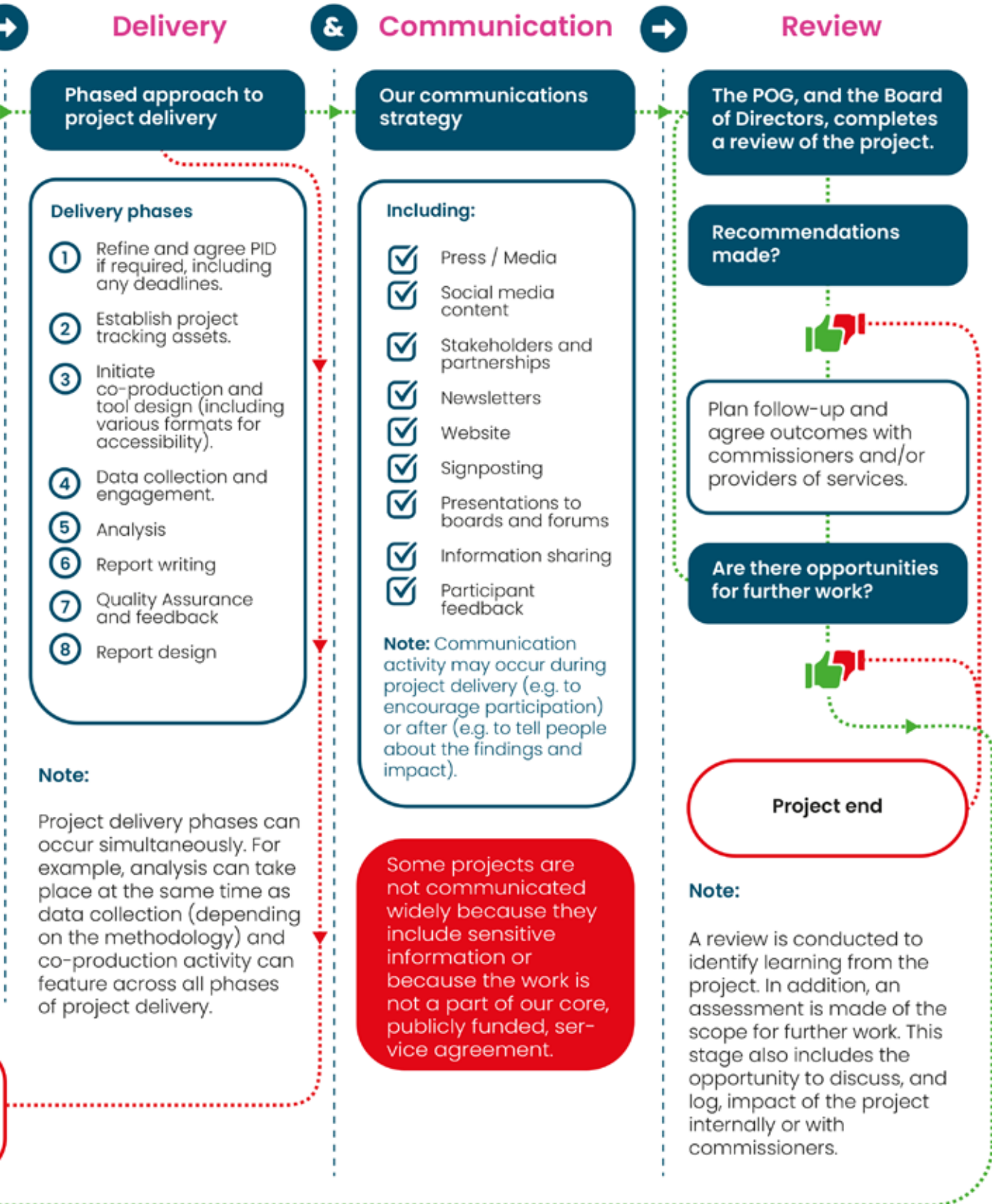
# Our project cycle

This diagram shows how we make decisions on project completion and the publication of...



# ons about our work. From the generation of new ideas through to f our reports, and everything in-between.

of new ideas, to project delivery and review, we aim for  
 onent of our model for project delivery.



## Our Board of directors

The Healthwatch Suffolk Board is comprised of volunteer Directors, our Independent Chair and our Chief Executive. It is our governing body, and oversees our strategic decision-making and operational activities.

Directors are responsible for ensuring that we are meeting our statutory and other obligations. The Board:

- establishes our vision, mission and values
- sets company policy, strategy and structure
- monitors progress towards achieving our objectives
- seeks assurance that systems are robust and reliable
- promotes a positive culture within our organisation

All Board meetings are held in public. Meeting documents are posted to our website.

### Our Directors 2022/23

Wendy Herber	Independent Chair
Andy Yacoub	Chief Executive and Director
Bal Kaur Howard	Director
Ben Miller	Director
Charlotte Clarke	Director
Gill Jones	Ex-officio
Grace Pearson	Director
Liz Whitby	Director
Dr Penny Newman	Director
Sue Hughes	Director
Steve Pitt	Director

If you would like to know more about the activity of our Board of Directors, please email [info@healthwatchsuffolk.co.uk](mailto:info@healthwatchsuffolk.co.uk) or call 0800 448 8234. You can also attend our public meetings, or our Annual General Meeting.

## Thank you Liz



Our Directors have an important role to hold our organisation to its values, and to set our strategic direction. They do it on a voluntary basis, and we cannot thank them enough for their commitment and dedication to supporting our continued growth and development.

Sadly, due to the rules that govern our Board, we will be saying goodbye to Liz Whitby this year. Liz has held a unique perspective on the development of Healthwatch Suffolk. From our initial transition from Local Involvement Networks (LINKs), to becoming an established conduit of people’s experiences into our local health and care systems.

Liz shares her thoughts on ten years of Healthwatch Suffolk.

*“I am really pleased to be able to contribute to this annual report, celebrating HWS 10th birthday!”*

*“I have had the privilege to serve HWS as its first commissioner, leading the transition from the Local Involvement Network (LINK), at times a rocky journey, to establishment of HWS in April 2013, and then as a Board member from July 2017.*



*“As my time on the Board comes to a close, I reflect on ten years of our local Healthwatch being a true champion for people’s voices and views on our health and social care system, whilst still commanding respect from commissioning bodies and providers. It is not an easy balance to achieve, I know, and it requires constant attention to maintain trust and integrity in relationships. The skill of the HWS team cannot be overstated.*

*“I have thoroughly enjoyed being part of the journey, and I wish everyone involved a successful second decade!”*



Learn more about our Board members, and find their profiles on [www.healthwatchsuffolk.co.uk/about-us/our-board-members/](http://www.healthwatchsuffolk.co.uk/about-us/our-board-members/)

# Statutory powers & local service scrutiny

## Suffolk Health and Wellbeing Board

The Suffolk Health and Wellbeing Board is responsible for improving and protecting the health and wellbeing of all people in Suffolk. It brings together leaders from across Suffolk so that they can work together to ensure health and care services meet the needs of our residents, promote wellbeing, and prevent ill health at the source. Our Independent Chair has a place on the Board, while our Chief Executive attends the programme office that supports it to ensure that our feedback shapes the agenda and influences change.

Last year, the Board agreed a new approach, with greater emphasis on the wider determinants of health and wellbeing. It welcomed new members to the Board to widen its reach and impact. Following two facilitated workshops, four priorities were agreed which were felt to be those that the H&WB was best suited to take forward in partnership. They are:

1. Public mental health
2. Good work and health
3. Wellbeing of children and young people
4. Listening and engaging with local voices.

As a Healthwatch, we welcome the move to work more closely with those with lived experience—and also the acknowledgment that bringing the public into this partnership can help us to tackle the most difficult issues by breaking through barriers that prevent action.

The work to build voice and engagement has been the last to be developed, and we continue to work to influence a more open and inclusive conversation with the public. The new approach has already brought change, as allowing questions from the public at each board meeting helps to raise the plight of those living in areas of high air pollution, often in our most deprived areas. Allowing the public more voice has already helped to generate the joint decision to take action on this wider determinant of health as a priority, and work together in partnership to bring genuine change, especially for those most at risk.

We will also have an ongoing key role in supporting the response to the cost of living crisis through our Tackling Poverty Together project (see page 62), which brings the voice of lived experience into a partnership that has the power to take action for those in most need.

## Suffolk Health Scrutiny Committee

Suffolk County Council is required to have a Health and Oversight Scrutiny Committee (HOSC) made up of local county, district and borough councillors. It has responsibility for scrutinising health and care services across the county.

This year, we contributed to HOSC debates focused on:

- **Primary care access in Suffolk** – We shared a report based on more than 900 comments submitted to our Feedback Centre about accessing local care.
- **The Suffolk Childhood Obesity Strategy and Action Plan** – This is ongoing work, led by Public Health Suffolk, that is being informed by questions featured within

our 'My Health, Our Future' research programme (see page 28). The Committee recognised work we had completed in Lowestoft and Brandon to provide insight from parents and children that could inform the Strategy refresh.

- **Changes to mental health services** – Norfolk and Suffolk NHS Foundation Trust's Proposals for the re-designation of Psychiatric Intensive Care Units. Read our statement about this on [www.healthwatchesuffolk.co.uk/news/nsft-single-mental-health-ward/](http://www.healthwatchesuffolk.co.uk/news/nsft-single-mental-health-ward/).
- **End of life care in Suffolk** – We shared [our research exploring people's experiences of palliative care during the pandemic](#), and the committee used it to inform its reasoning for local recommendations. The Committee also heard about how our research on digital health and care supported decisions to commission a pilot of a developing digital tool to improve end of life care in Suffolk.
- **The West Suffolk Hospital Future System Programme** – Members heard that extensive work has been undertaken to co-produce the proposals for a new hospital through workshops with the public and staff. An approach taken because of our involvement in the programme (see [www.healthwatchesuffolk.co.uk/shaping-a-new-hospital-build-through-co-production/](http://www.healthwatchesuffolk.co.uk/shaping-a-new-hospital-build-through-co-production/)).

We continue to inform the forward plan of the Suffolk HOSC and to share our insights with its members, and that will include a future debate on dental access in Suffolk (a delayed debate post transfer of commissioning arrangements from NHS England to local Integrated Care Boards).



## Our briefings to inform local service scrutiny

In addition to our research, we shared two briefings to inform debate by our local Health and Overview Scrutiny Committee.

### NHS dental care

We shared anonymous signposting cases to inform scrutiny of access to NHS dental treatment in Suffolk.

This report was also shared with local NHS Task Forces in Suffolk and north east Essex and Norfolk and Waveney responsible for improving services for Suffolk residents.

[Click here to download our report.](#)

### Access to primary care

We analysed more than 900 comments from our Feedback Centre about access to local GP practices. Our report was shared to ensure the HOSC was aware of the impact of access pressures on people's lives.

[Click here to download our report.](#)

## Responses to recommendations and requests

Healthwatch Suffolk takes a collaborative approach to challenging services and achieving impact. But there are also times when we need to speak up, or to use our statutory powers to require a response from services.

Providers and commissioners have responded well to our requests for information and recommendations when they have been made in the year. We have generally obtained the answers we sought from leaders without the need for further challenge.

### Enter and view

We did not make use of our Enter and View powers in 2022/23.

Consequently, no recommendations or other actions resulted from this area of activity. There were no issues or recommendations escalated by our Healthwatch to the Healthwatch England Committee, and so no resulting special reviews or investigations were completed.



This page is intentionally blank.

# Looking ahead

**It's already shaping up to be a busy year ahead. In this section, learn more about some of our key work and projects for the year ahead.**

Don't miss out – sign-up and make sure you stay informed about our latest opportunities to shape, influence and improve local care.

[www.healthwatchsuffolk.co.uk/membership](http://www.healthwatchsuffolk.co.uk/membership)



# What's up next?

Here are just a few things to look out for in 2023/24.



## Asthma care for children and young people in Suffolk and north east Essex

Together with Healthwatch Essex, SNEE Integrated Care Board and leading NHS consultants, we'll be asking people (including children, young people, parents and guardians) for their ideas and experiences.

We hope to support future commissioning arrangements for children and young people's asthma care. We'll explore people's ideas for how support could be improved, and how children and young people can be better supported to manage the condition.

Visit [www.healthwatchesuffolk.co.uk/cypasthma/](http://www.healthwatchesuffolk.co.uk/cypasthma/) to find our latest project updates.



## My Health, Our Future (phase 8)

Later in 2023, we'll share the latest findings from our survey about young people's wellbeing. So far, and with the support of local schools and colleges, more than 10,000 responses have been recorded.

Our survey was revised in co-production with local schools, colleges, young people, Public Health Suffolk and other partners to make sure it is helping to address the needs of local leaders.

We'll share insights across a range of topic areas, including how young people feel about their education on subjects like puberty and mental health, awareness of sexual health support, vaping, wellbeing and anxiety (amongst others).

Learn more on [www.healthwatchesuffolk.co.uk/mhof/](http://www.healthwatchesuffolk.co.uk/mhof/)



## We'll continue our work to shape digital health and care services

We're planning work with the Digital, Data & Technology (DDaT) Strategy and Assurance team of the Suffolk and North East Essex Integrated Care System that will include an independent evaluation of a new digital solution, known as Record Once Share Insight (ROSI).

ROSI is an electronic Advance Care Plan solution that aims to improve care for people with very serious health conditions, and those likely to be nearing the end of their lives. Information about people's care and support needs will be accessible to professionals, and also via a connected patient app (ROSI and Me) for people to be able to see their clinical record. But, before ROSI is used more widely, it is being tested in a small part of Suffolk.

Our evaluation will inform the continued development of ROSI, and any subsequent rollout to other parts of the county. The aim will be to enhance our understanding of how this digital solution is influencing the delivery of care, and how it is changing the nature of the relationship between patients, families and clinicians.



## 'My Care at Home 2023' - Home care services in Suffolk

In 2018, we published the results of our work with Suffolk County Council to evaluate people's experiences of home care and support. The report helped to inform new commissioning arrangements, and made sure people's experiences were included in shaping the requirements of new providers delivering the service.

Now, throughout 2023, we'll be working with Suffolk County Council again to contact current users of home care services (and staff delivering care). People will participate in a survey that will support the Council to understand more about people's current experiences of care (or delivering care), and how services could be different.

Explore this project on [www.healthwatchsuffolk.co.uk/homecare/](http://www.healthwatchsuffolk.co.uk/homecare/)

This page is intentionally blank.

# Our money

Details of our abbreviated accounts. Our full accounts are available on request.



Please see our abbreviated accounts below. The figures are correct at the time of publication and are subject to auditors inspection. Our full accounts will be available on request.

Please call 01449 703949 or send an email to [info@healthwatchsuffolk.co.uk](mailto:info@healthwatchsuffolk.co.uk).

<b>Turnover</b>	<b>£489,403</b>
Cost of sales	£850
<hr style="border-top: 1px dotted #000;"/>	
GROSS SURPLUS	£488,553
Administrative expenses	£694,533
<hr style="border-top: 1px dotted #000;"/>	
	(£205,980)
Other operating income	£169,084
<hr style="border-top: 1px dotted #000;"/>	
OPERATING (DEFICIT)/SURPLUS	(£36,896)
Interest receivable and similar income	£11,740
<hr style="border-top: 1px dotted #000;"/>	
	(£25,156)
Interest payable and similar expenses	£151
<hr style="border-top: 1px dotted #000;"/>	
(DEFICIT)/SURPLUS BEFORE TAXATION	(£25,307)
Tax on (deficit)/surplus	(£927)
<hr style="border-top: 1px dotted #000;"/>	
(DEFICIT)/SURPLUS FOR THE FINANCIAL YEAR	(£24,380)

Our accounts will also be presented at our Annual General Meeting (AGM). Please see our website and newsletters for more information, and to book your space.

We will be making this annual report publicly available by publishing it on our website and circulating it to Healthwatch England, the Care Quality Commission, NHS England, Suffolk Clinical Commissioning Groups, the Suffolk Health and Overview Scrutiny Committee, the Suffolk Health and Wellbeing Board and our local authority (Suffolk County Council).

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

**If you require this report in an alternative format, or language, please contact us on 01449 703949 or by email to [info@healthwatchesuffolk.co.uk](mailto:info@healthwatchesuffolk.co.uk)**

© Copyright Healthwatch Suffolk 2023.



## **Contact us**

**Email:** [info@healthwatchesuffolk.co.uk](mailto:info@healthwatchesuffolk.co.uk)  
**Tel:** 01449 703949

Healthwatch Suffolk CIC  
Office Poonsook  
Main Road  
Little Blakenham  
Ipswich  
Suffolk  
IP8 4NF

**Explore our work on:** [www.healthwatchesuffolk.co.uk](http://www.healthwatchesuffolk.co.uk)