



Your Voice Counts

Healthwatch East Sussex
Annual Event 2023



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Our 2023 Annual Event took place on the 13th July at The View Hotel, Eastbourne.

It was great to be able to share our achievements, plans for the future, as well as to receive feedback and engage in lively discussions about health and care in East Sussex.

We had **five** key speakers who responded to our themes of *'Your Voice Matters'* and *'Celebrating 10 years of Healthwatch'*:

Sarah Russell – Assistant Director, Adult Social Care & Health, [East Sussex County Council](#)

Lou Carter – Assistant Director, Communications, Planning & Performance, Children's Services, [East Sussex County Council](#).

Richard Milner – Chief of Staff, [East Sussex NHS Healthcare Trust](#)

Jennifer Twist – Chief Executive, [Care for the Carers](#)

Louise Ansari – Chief Executive, [Healthwatch England](#)

Copies of the speaker presentations can be downloaded on the [Healthwatch East Sussex website here](#).



74

people attended the event including; members of the public and our colleagues from statutory and voluntary organisation.

Annual Event 2023

Discussion Groups

Following the speaker's presentations, we hosted a discussion session exploring the theme of 'Your Voice Counts'.

Our groups discussed the following questions:



1. How can we ensure public and patient voice is at the heart of local decision-making [in health and care]?
2. How well do health and care services 'listen' to local people and service users?
3. What practical suggestions do you have to encourage and enable people to share their health and care experiences?
4. What three issues should HWES prioritise in our work for the next 12 months?

Discussion points raised in these sessions were collated and are summarised on the following pages.

1. How can we ensure public and patient voice is at the heart of local decision-making [in health and care]?

- Recognise patients as an individual, every step of the pathway needs to see patients as an individual and put people at the heart of all decisions.
- Staff are working really hard. Everyone should understand patient and service voice is collaborative and two-way. It is about relationships.
- Patient and public voice should be in-built into strategies and delivery plans and regular feedback provided on how it is being monitored and used to support changed and delivery.
- Clear channels of communication between decision-makers and the population/service users should exist, which are well publicised and accessible to all.
- Improved consistency across all agencies about the processes used to make clear and transparent decisions.

Annual Event 2023

Discussion Groups

Continued: How can we ensure public and patient voice is at the heart of local decision-making [in health and care]?

- There is an opportunity to make better use of local Councillors in supporting awareness of local needs and issues, making decisions and monitoring change.
- There should be a commitment to true co-production which should include representation from all parts of society with proper ring-fenced and sustainable funding.
- Voices should be heard face to face, not just through technology and forms. A cultural change is needed.
- Feedback should involve services going to the people, rather than expecting them to come to you. Go to the spaces where people are and vary these to engage with different groups and communities.
- Share the feedback received with those that gave it.
- Give realistic timetables for what can be achieved, rather than setting aspirations or schedules that are unachievable.
- It seems difficult to make a change in these big organisations. Plans are always discussed, and re-structures keep happening but there hasn't been the change.
- Lots of older people do still have issues with technology. Yes most use it, but most is not all, and the digitalization of healthcare does exclude people who cannot access it in this way and this needs to be considered.
- Address barriers to leaving feedback – what stops people from providing feedback e.g. length of feedback forms/time/lack of confidence that feedback will be listened to or acted upon?
- Provide multiple opportunities for leaving feedback – small feedback is still important.

Annual Event 2023

Discussion Groups

2. What practical suggestions do you have to encourage and enable people to share their health and care experiences?

- Suggestion boxes in healthcare settings to allow people to provide feedback quickly and efficiently e.g feedback forms or feedback tablets.
- Make use of digital tools that are not intrusive and don't take a lot of people's time. Examples of ticking a happy/neutral/sad face on a tablet, QR codes and follow-up emails.
- Give an example of previous feedback and how this has changed the service and inform people what has happened as a result of their feedback.
- Get as many people as possible to know about Healthwatch as some people aren't comfortable talking to statutory agencies.
- Make any feedback opportunities as widely accessible as possible but do not overuse internet or digital tools. Make more use of Easy Read surveys and cater for different people/groups and characteristics.
- Continue going to where people are – like in the Listening tours and more facilitation on public forums bringing people together.
- Technology is good, but there should be ways of giving feedback without it.
- If positive feedback is sought by services, then it should be pro-actively asked for, otherwise feedback may be negatively focused.
- Feedback should capture direction of travel – satisfaction before, during and after engagement/use of services.
- Communication on why feedback is collected and what it is used for should be clearer.
- Reassurance is needed that a person's care won't be affected by the feedback they offer.
- Not asking for feedback too soon, people may need time to recover from an experience, or time to know whether something has worked for them.

Annual Event 2023

Discussion Groups

3. How well do health and care services 'listen' to local people and service users?

- People want to feel their care is personalised to them and reflects their needs and circumstances. This isn't always the case.
- Concerns over the ability of older people and other groups in society to use digital services and tools – feelings of not being listened to and discriminated against as these become the 'norm'.
- People feel listened to when they don't feel rushed, when staff listen to them and are supportive of their individual needs.
- Organisational culture was identified as important in the public and patients feeling listened to. A 'listening and personalisation' culture needs to be delivered 'system-wide' by all organisations and at all levels.
- It is important to build long-term relationships between services and communities to develop trust and enable better understanding of whether services are meeting needs and how they need to develop.
- Better communication is needed on both sides to bridge the chasm of views. Make sure that services see complaints/bad experience as way to improve the service Make sure that people are aware that the issue may not be able to be acted on, and the reason why.
- Patients appear to be suffering from feedback fatigue. Real change and improvement isn't always delivered following feedback or consultation.
- As well as making sure feedback is acknowledged, the loop must be closed to ensure people know the difference their feedback makes.
- Focus groups are an effective method for capturing feedback and really listening to people.
- Make sure all information is private, some people think if they complain they will be treated differently in the future.

Annual Event 2023

Discussion Groups

4. What issues should HWES prioritise in our work for the next 12 months?

- Look more at communication within health and care, including:
 - communication between services and how they can better work together including the sharing of best practice.
 - how services communicate with the public about what happens 'behind the scenes' i.e. waiting times and complaints processes.
 - more communication about what services are available and when to use them.
- Access to care in the first 5 years of life.
- Raise the profile of Healthwatch so more people are aware of our role, what we offer and the impact we have.
- Mental health, particularly around wait times and how waiting for assessment/treatment is impacting people. A focus should be young people's mental health.
- Social determinants of health including digital exclusion, cost of living, housing, service planning and the impact of COVID-19.
- Follow the care pathway of any one patient - mapping the journey of a patient and their experience through the system.
- Consideration of neurodiversity amongst adults and children during service design and delivery.
- Terminal Care – with greater exploration of the transition from living well to terminal care.
- Carers needs and how carer assessments work.
- A specific project looking at maternity care locally.
- The transition between young people and adult services and experiences of this.
- Awareness raising and improved understanding of social care services amongst the wider population.

Annual Event 2023

Next Steps

1. We will share what we have heard with key partners, including local healthcare providers and commissioners to highlight the importance of keeping patient voice at the heart of decision making.
2. We will use what we have heard to shape our priority setting and project planning moving forward.
3. Healthwatch East Sussex will use the learning from this event to inform our future events and engagement activity.
4. Healthwatch will continue to raise awareness of our role amongst communities, across East Sussex so more people are aware of what we offer and the impact we have. Including attending events and local venues to reach out to as many residents as possible.



Annual Event 2023

Feedback From Attendees

"fantastic event..., lots to celebrate and look forward to"

"so enjoyable and full of useful content"

"Really well organised. Fantastic attendance. Varied and interesting sessions."

"(most useful) hearing lots of opinions from all aspects and backgrounds"

"Great to be involved in celebrating 10 years of Healthwatch."

"I found the discussion sessions really valuable, thank you."



healthwatch

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