

# The value of listening

Healthwatch Southend  
Annual Report 2023–2024



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**"Over the last year, local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities."**

Louise Ansari, Chief Executive at Healthwatch England



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# Message from the Chair of our Advisory Group

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It is a great pleasure to be able to introduce our Healthwatch Southend Annual Report for 2023-24. Once again it has been a very interesting, challenging but rewarding year for us and our residents in all aspects of health and social care within the locality.

The changes NHS structures continue to develop. Healthwatch Southend, as an independent service, can inform and influence the NHS by highlighting the real impact of change on local people.

We continue to use our Community Assembly to bring topical speakers to local residents. One speaker gave an update on Community Pharmacy and the services they could provide which may alleviate pressure on local GP services and free up GP's time for more urgent cases. Another gave the background relevant to the future use of community inpatient beds. Plans were presented that included moving the unit outside the Southend area and participants were able to voice their views which included the potential impact on carers/relatives having to travel further to visit and support patients.

I am delighted to be able to report that this year we have continued to recruit to our Volunteer Advisory Group and now have a very experienced and knowledgeable team, familiar with the diverse lived experiences of our residents. They look forward to working on your behalf and the challenges of the year ahead.

As always, I would like to take the opportunity to thank our very hard working and dedicated staff and volunteers who provide such an exemplary service for our residents. I would particularly like to welcome those new members of staff and volunteers who have joined us this year and am sure they will find their new roles both fulfilling and rewarding.

Finally, a huge thank you to all those members of the public who have felt able to share their experiences of local health and social care services with us throughout the year. Your continued engagement and support is paramount to informing all that we do.

David Bowry



In terms of Primary Care, the continued lack of access to NHS dental services and general practice continues to remain one of the most frequent enquiries we receive. Despite various government initiatives, local people still tell us about the problems they have.



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# About us

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## Healthwatch Southend is your local health and social care champion.

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

### Our vision

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



### Our mission

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



### Our values are:

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.



# Year in review

## Reaching out:

**1,654 people**

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

**267 people**

came to us for clear advice and information about topics such as mental health and the cost-of-living crisis.

**1,990 followers**

on X

**700 followers**

on Facebook



## Making a difference to care:

We published

**4 reports**

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

Our most popular report was

**Deaf people's experiences of general practice**

which highlighted the struggles deaf people face when making and during appointments.



## Health and social care that works for you:

We're lucky to have

**7**

outstanding **volunteers** who gave up their time to make care better for our community.

We're funded by our local authority.

In 2023 - 24 we received

**£119,095**

which is the same as the previous year.







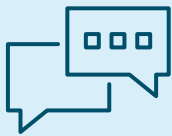



We currently employ

**4 staff (2.75 WTE)**

who help us carry out our work.

We recruited an apprentice in February 2024.

# How we've made a difference this year

Spring	 <p>Published our report on deaf people's experiences of general practice</p>	 <p>Worked with the Council's Public Health team to review the offer for those who need support to adopt healthier lifestyles.</p>
Summer	 <p>Invited to give a presentation to the People Scrutiny Committee about your problems accessing NHS dentistry</p>	 <p>Published our report on making GP appointments</p>
Autumn	 <p>Sent our report on wayfinding to Mid &amp; South Essex Hospitals</p>	 <p>Invited to speak to the People Scrutiny Committee about your experiences of making a GP appointment</p>
Winter	 <p>Sent formal responses to Southend City Council's consultations on telecare, dementia support services and family centres</p>	 <p>Published our report on unpaid carers' experiences of general practice</p>





# Listening to your experiences

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

"Thank you so much for agreeing to join us for the Cancer Café. Jean, thanks so much for giving up your Saturday, you were such a brilliant facilitator, we were so lucky to have you participate."

Friederike Englund, Macmillan  
Integrated Cancer Care Lead  
Mid and South Essex NHS Foundation  
Trust



# Improving the experience of deaf people needing GP services

We know that many Southend residents find it hard to make an appointment with a GP, and that often their experience in the consultation does not always meet their needs. But imagine if you were deaf? We worked with the Royal Association for Deaf People in 2023 to find out directly from residents who use British Sign Language (BLS) how easy it was to make an appointment and what it was like both in the waiting areas as well as in the consulting room. We tied this in with work by Healthwatch England about the Accessible Information Standard.

“When I have visited surgery to book in person I have been handed paper and pen to write down my request – I have poor literacy so not easy and even harder for me to read the reply unless I have someone with me each time.”

We recommended that the Integrated Care Board:

1. Audited the compliance of local GP practices with the Accessible Information Standard, with the involvement of patients
2. Provided deaf awareness training to GPs and all their staff
3. Supported the use of ICT to facilitate communication between deaf patients and practice partners/staff; this could range from vibrating pagers to calling a patient into the consulting room to the use of SignRight during a consultation
4. Ensured that all practices are aware of the translation support available and that practices promote this to all patients and the voluntary, community, faith and social enterprise sectors; patient participation groups could assist
5. Monitored the effectiveness of the contract for translation services, with the active involvement of deaf patients
6. Ensured that local responses to Delivery Plan for Recovering Access to Primary Care (May 2023) took account of those patients with communication needs.

## What difference did this make?

The Integrated Care Board accepted our recommendations, but said it would implement them across the whole of Mid & South Essex. Some **490 people** in Mid & South Essex use Sign Language. There are also people who have some degree of hearing loss who will also benefit. According to the Royal National Institute for Deaf People, 1 in 5 adults are deaf, have hearing loss or tinnitus. This could be over **180,000 people** over 20 in **150 practices** across Mid & South Essex, using the population projections from the Office for National Statistics (ONS).



# Looking after yourself when you're also an unpaid carer

If you are an unpaid carer, life can be very hard. So how does it feel when you need to see or speak to a GP about your own health? We decided to find out from residents who care for family or friends.

We know that if you are an unpaid carer, your health may be poorer because of the physical and mental challenges of looking after someone. We also know that many people do not want to be "labelled" as a carer – you're a husband, or a mother first of all.

Working with Southend Carers and Carers First, we launched a survey to find out about unpaid carers experiences. We used some questions from the national GP Patient Survey, so that we could compare our results with the Survey results for the whole of Mid & South Essex.

"The mental load on unpaid carers is really significant especially where carers have to work in order to ensure that the vulnerable adult (in my case) has access to funds to enrich their lives. Lack of sleep is a huge issue..."

We found that:

- Unpaid carers had the same problems making appointments, but their experience was worse as the 8am rush to phone the surgery coincided with caring duties
- Some people felt they were not given enough time in the consultation, nor that they were listened to when we compared our results to those for Mid & South Essex
- Not all the residents who replied were registered as unpaid carers at the practice and many were unaware of their right to have a carer's assessment
- We also looked at GP websites to see how easy it was to find information to help unpaid carers. The results were mixed. In some cases, it was easy to find, others had information which was out of date, or none at all.

## What difference did this make?

The last Census showed that 8.9% of Southend's population aged over 5 cares for someone. This equals **14,664** residents. Some people will not have answered this question, so the number will be higher. Any improvements which take place because of our work will help a significant number of people.

We made a number of recommendations to the Integrated Care Board for Mid & South Essex. The ICB has acknowledged its role in supporting unpaid carers and has written to us with areas where it will work with practices. Our report has been shared in a number of NHS meetings to raise awareness of the experiences of our unpaid carers.

# Southend Hospital really is a maze, isn't it?

Do you dread being late for an appointment because you cannot find your way easily around your local Hospital? Is visiting a loved one more stressful because of this?

We sent two of our volunteers along with a team member to see how they got on following signs and maps. Starting at different car parks and entrances, they tried to find different departments and wards. Both volunteers were specifically asked to find the Hospital's pharmacy. Two volunteers from Healthwatch Southend had previously helped the Trust with its Patient-led Assessment of Clinical Areas, an annual check from a patient's viewpoint of where they might be treated – this includes finding your way around a hospital.

We understand that the Trust which runs the Hospital has to move services around to make the best use of space. We also know that there were some building works so signs may be hidden temporarily.

"It is a long walk from A&E to here [GP Unit]. I use a walking aid. I've stopped several times enroute. I think it's a long way for people who struggle to walk. I was told I cannot access the GP Unit by any internal hospital entrance, it is only accessible from the front entrance located where Car Park D is."

We found that:

- Some of the car parks' signage appeared unclear/obscured or missing
- Some car park barriers were broken
- Not all car parks we visited had a Hospital site map or showed 'you are here'
- Many signs were high up on walls, or hanging from ceilings, making them hard for some patients and visitors to see
- The maps inside the Hospital use colours to show the different zones, but the font used to list departments was quite small
- There are nine levels in the Tower Block, but none of the floors had anything to say which level it was
- Some departments were outside the main building, but often without signs

## What difference did this make?

Improving signposting and information will make a visit to Southend Hospital less stressful for patients, carers and visitors. Patients will find it easier to arrive on time for appointments. With the Trust merging the three hospitals, activity at Southend is last available for 2019-20. In this year **105,000** people attended A&E, **412,000** went to outpatients and **151,000** patients were admitted. This shows how many people (and their carers or visitors) could benefit from better wayfinding.

Our findings made it into a report by Healthwatch England about outpatient appointments. Read it here: [www.healthwatch.co.uk/report/2024-01-11/what-people-told-us-about-outpatient-appointments](https://www.healthwatch.co.uk/report/2024-01-11/what-people-told-us-about-outpatient-appointments)

# Three ways we have made a difference in the community

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

## Creating empathy by bringing experiences to life

**It's important for services to see the bigger picture. Hearing personal experiences and the impact on people's lives provides them with a better understanding of the problems.**

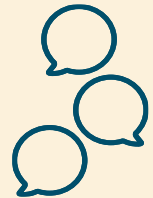
We are continuing our work with SAVS to connect people with experience of COPD with decision-makers in Mid & South Essex. By hearing what life is like on a daily basis, we can help patients and their carers. GP registers show there are about **4,100 patients** in Southend with COPD. Our connectors have worked on information about vaccines, to make more patients aware of the benefits. Read more here - <https://www.savs-southend.org/savs-project/copd-community-connectors/>



## Getting services to involve the public

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

We worked with the Mid & South Essex Integrated Care Board (ICB) to promote their consultation on the future use of community inpatient beds. However, we realised that most of their publicity mentioned St Peter's Hospital in Maldon. It did not talk about changes to the Cumberlege Intermediate Care Centre in Rochford, where a number of Southend residents are cared for. We asked the ICB to make this clearer so local people could take part properly in the consultation. We also gave the ICB time in one of our community assemblies to talk to local people as well as arranging for them to attend one of the local self-help groups in Southend.



## Improving care over time

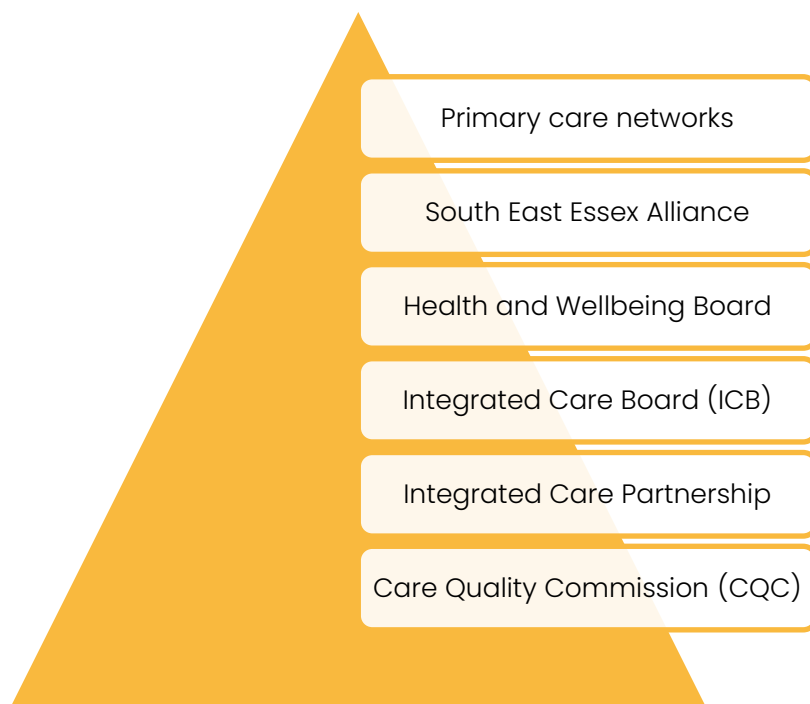
**Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change.**

We heard concerns from residents about the challenges of having to pay for sharps bins to be collected. Many residents will need these for the rest of their lives. We surveyed all the local authorities in Essex and found Southend was the only local authority to charge. Working with officers in the Council, we were able to get the charges removed for 2024-25, when a new contract will be in place. About **1,000** residents have type 1 diabetes, but residents with other conditions will also benefit.



# Where do we take your feedback?

There are a number of places where we can share your experiences of NHS and social care services.



There are 4 primary care networks in Southend. These are groups of GP practices, covering around 30,000 to 40,000 patients. They share expertise and skills, as well as employing staff such as social prescribers or pharmacists to work across practices.

The South East Essex Alliance brings together NHS organisations, local authorities, the police, Healthwatch Southend and the voluntary sector across Castle Point, Rochford and Southend. It covers 377,000 people. The Alliance is a sub-committee of the Integrated Care Board (explained below). It looks at how to bring services together for the benefit of local people. It is also funding schemes to address the differences in the way some groups in the community experience care and the outcomes they have. Bringing in a mobile dental service is one example.

Southend City Council has to set up a Health and Wellbeing Board. This looks at how to make our local population healthier, making plans to tackle drug and alcohol abuse, for example. Another committee which includes Healthwatch Southend is the People Scrutiny Committee. This meeting acts as a critical friend, challenging and supporting health and social care services as well as education and public health.

The Mid & South Essex Integrated Care Board (ICB) is the NHS body which plans and funds the majority of NHS services. It looks after 1.2 million people. Some of its role is passed to the four alliances in the area – things like general practice. It makes sure that services are safe and high quality, and that NHS money is spent wisely. Some very specialised services are still planned and funded by NHS England – things like heart transplants.

The ICB works with Essex, Southend and Thurrock Councils in an Integrated Care Partnership. It supports work to join services together, as well as looking at the other things which affect health and wellbeing – education, housing or crime. Healthwatch Southend is a member of the Partnership.

Healthwatch England is part of the Care Quality Commission. We share anonymous information about the main concerns we hear from Southend residents – making GP appointments, for example. Healthwatch England uses the themes from all the local Healthwatch across England to influence at a national level.





# Hearing from all communities

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

**This year we have reached different communities by:**

- Working with the Royal Association for Deaf People
- Spending time with the Southend and Westcliff Hebrew Congregation
- Continuing to support Welcome to the UK

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# Helping us to reach you

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Southend and Canvey Island are seeing a growth in members of the Orthodox (Charedi) Jewish community. We know that there are some parts of the Southend population we don't hear from, so we were keen to join a training session with the South East Essex Alliance to learn more about how to have conversations with members of this community.

We learnt about

- Religious festivals during the year, and the importance of avoiding these dates
- Life in a Charedi family – including some of the laws around Kosher food, and the possible challenges in a large family
- Gender issues which we need to respect
- Views about mobile phones and digital devices, which we make so much use of.

Knowing that some women in the Charedi community may have higher rates of breast cancer, linked to a particular gene, we shared the learning with our colleagues in the Lady McAdden Breast Cancer Charity, where we are now based.

We will use this training to make sure we approach local residents in a respectful way.



We were delighted to be invited to spend an afternoon at the Southend & Westcliff Hebrew Congregation. We listened to the experiences of over 50 people, gave advice about local services, as well as having a tour of the schul. Excellent cake too! We got this message later:

"Dear Owen, I have nothing but praise and sincere thanks to you and Sharon as she has already made a confirmed commitment by a consultant Dr X to call me at 9am on Monday next. You have achieved more in 2 days than I have in over 5 years. I thank the almighty that you and your team gave our community your time and support last Tuesday – BLESS YOU ALL"

# Working with Welcome to the UK

## Making sure people know how to navigate local health and social care.

Welcome to the UK provide support for people and families to access information about local services when they are new to Southend. They support with a range of issues; housing, school education and accessing benefits. They offer a weekly friendship group as well as interpreters.

Healthwatch Southend was able to support the group's needs by arranging three sessions to help people navigate local health care. The first session was an opportunity to meet with the group and find out what they were interested in finding out more about. We were able to use this information to put together a printed pack which were able to discuss in detail at the second session.

The pack included information about:

- Seeing a GP – how to register/where to register
- Blood Tests – how to access the online booking service
- Social Prescribing – the range of support services offered
- Children's Health – What to do if your child is unwell/how to use NHS 111
- Women's Health – Routine Breast and Cervical Screening and Sexual Health Services.

The third session focused on Diabetes Prevention. We were fortunate to have a Nurse Specialist to come and talk to the group about Diabetes.

Participants will be able to refer to the pack when they need information and contact details of the various services. Many said they would be able to share the information with other families who are not part of the friendship group.

"We extend our heartfelt thanks to Healthwatch Southend for their time and expertise. The sessions were not only educational but also empowering, helping our community make better health decisions. We look forward to more such informative engagements in the future."

– Sara Muco, Southend Hub Coordinator, Welcome to the UK



# Widening our reach

In order to let as many residents as possible know about the services we offer, we attended various community events including Southend Pride, Feel Good Festival, and Hamlet Court Road in Harmony.

In addition to these events, we made sure we had a presence at the following



## Southend Carers Coffee Mornings

We spoke with carers and recorded their views and experiences of being a carer in Southend.



## U3A

We attended and presented information about our service and gathered views about older people's care locally.



## Norton Place

We were part of the open day at Norton Place which included clinical services to support those with Diabetes, Blood Pressures and other long-term conditions.



## Southend Homeless Action Network

We regularly attend these support network events to reach out and to encourage those who may not have accessed health care for a while or don't know how.



## Children's Centre's Fun Days

We spoke with parents and carers of young children and collected views about accessing health and social care for their families.



## The Ironworks

We booked a space to provide a drop-in session, once a week for six weeks.



We partnered with the City Council and NHS locally to meet more members of the community at the following:

- Slipper swaps – as part of work to prevent falls, residents picked up new slippers, but also got advice and information about local services.
- "In conversation with...." – a series of events to capture local people's views about their communities.
- Women's Health Day – a multi-agency event to promote wellbeing for women

We also attend regular networking events at the Southend Association for Voluntary Service (SAVS). This helps us to raise awareness with other community-based organisations about how we can help their supporters and clients.





## Advice and information

**If you feel lost and don't know where to turn, Healthwatch Southend is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, making a complaint or choosing a good care home for a loved one – you can count on us.**

### **This year we've helped people by:**

- Providing up-to-date information people can trust
- Helping people access the services they need
- Helping people access NHS dentistry
- Supporting people to look after their health during the cost-of-living crisis

## Helping you find the services you need

It's often hard to find the right services for you, your family or your friends.

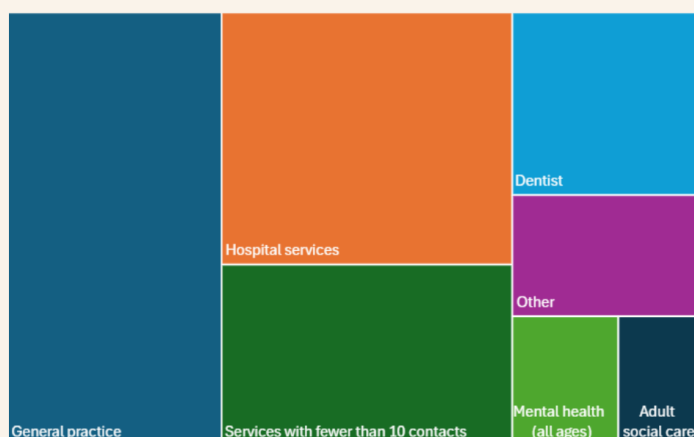
All our enquiries are treated confidentially. We can't recommend a particular GP or care home, but we can help you find more information to help you choose.

We can be contacted by phone, email, or through our website. We also attend community events like Hamlet Court Road in Harmony or give talks at groups like the University of the 3rd Age where we try and answer questions.

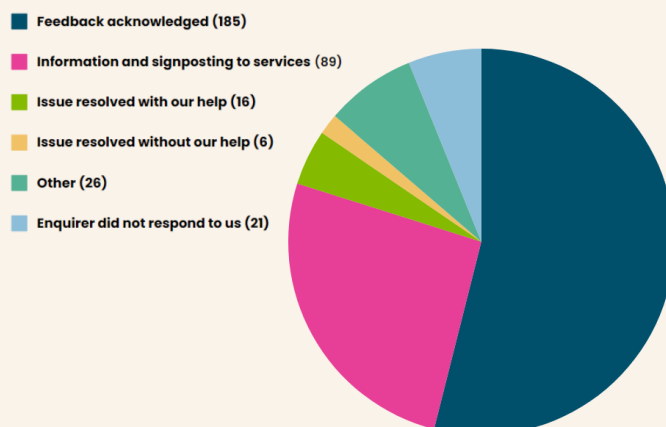
Where we spot common themes from calls or emails – a problem with a particular hospital department, for example – we feed them back in our meetings with the NHS or City Council.

In this section, we talk a bit more about this work.

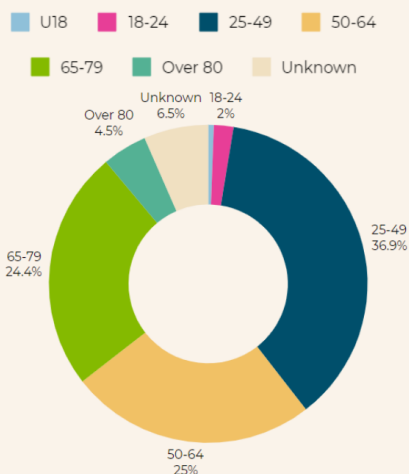
### What did you contact us about?



### What happened after you contacted us?

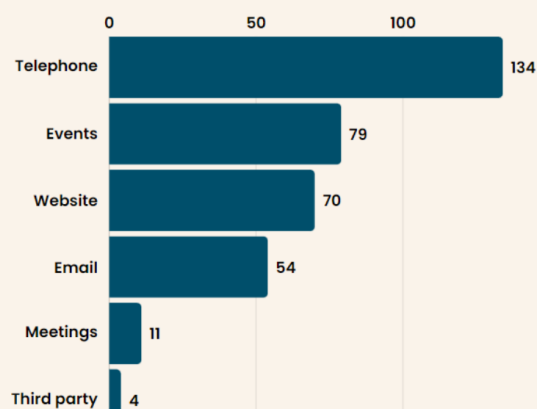


### How old were our contacts?



**37% of enquiries came from family and friends**

### How did we hear from you?



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## Healthwatch Southend Information, Advice and Guidance Service

We offer a service that is sometimes known as signposting. We give information to people who are having difficulties accessing health and care services they need. Most people are then able to take the steps necessary to sort out their difficulties themselves.

However, sometimes we support people who face barriers that are difficult for them to overcome on their own. Residents might face vulnerabilities that are age-related or have underlying health problems. They may struggle to access services because they are digitally excluded or don't have English as their first language.

We're not an advocacy service, (South Essex Advocacy Services, SEAS provides that service for Southend residents) but we will provide additional support to vulnerable residents who find it difficult to act on the information we give them. In these cases, we will often contact services on behalf of the person we are supporting. If services are unresponsive, or if appropriate services are hard to identify, we will take further action.

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### This is our IAG officer Sharon, describing this part of her role

"I respond to calls, emails, and drop-in visits from residents. Enquiries are really varied. I give advice on how to find local health and care services, help them to overcome barriers or problems in accessing services, and sometimes how to best to raise concerns or complaints with services. I always listen to the person carefully, making sure I understand what advice to give them and what needs to happen next.

It gives me a great sense of achievement if I've helped and supported a person and given them the right information to help them with an issue they have, regardless of how small or how long it's taken me."





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## Here are a couple of examples demonstrating the variety of issues people have raised and how we helped during this past year:

**A bereaved client emailed us saying “I have a Pathologist interim report about the death of my partner which has been sent to me from the coroner's office, advising me to get it translated into plain English. Are you able to provide this service?”**

We explained we don't provide translation services ourselves, however signposted the client to their GP and a charity based outside of the area for further help and advice. We also gave them contact details of a bereavement support service to consider using for their own health and wellbeing.

Building up confidence in our service, the client contacted us several more times. They gave us lived experience on local health services, as well as requesting further specific advice and contact details regarding Freedom of Information Requests and Personal Record Requests via the Access to Health Records process.

As well as providing the information we suggested additional support from the local advocacy service might be helpful. With their agreement, a referral and a meeting was arranged.

The client was grateful for our support and responded “Thanks for that, it contains the information that I wanted.”

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**Client X arranged a face-to-face appointment; they felt more comfortable explaining their situation in person rather than by telephone or email. They had an ongoing health condition causing extreme physical pain. After many years of taking high levels of NHS prescribed pain relief under the care of the local hospital, the medication ceased to work effectively. The local hospital offered a surgical operation for pain relief but were unable to guarantee the success ratio. The client declined the operation.**

X researched and self-sourced another medication, treating the condition successfully. However, their pain relief supply suddenly ceased.

X asked for Healthwatch advice and support with who and how to make a request for NHS support with the specific medication they had sourced outside local health service provision.

We contacted the Mid and South Essex Integrated Care Board Medicine Optimisation team. We asked if the product X was seeking was on licenced NHS prescription in this locality, and for details of accessibility criteria for the item. The team advised part of the product was indeed on licenced prescription, but only for a specific health condition as pain relief. X did not meet the criteria to access the medication.

We explained details of Individual Funding Requests (IFR) to X. (An individual funding request application can be made by the clinician treating you if they believe that because your clinical circumstances are exceptional, you may receive benefit from a treatment or service that isn't routinely offered by the NHS).

Integrated Care Boards are required to have a process for considering funding for individuals who seek NHS commissioned services outside established commissioning policies. There are, in general, two types of requests (category 1 and 2) that come before an IFR Panel. An IFR must have the support and evidence of a clinician to be considered before a panel.

We advised X to seek further advice from their clinician regarding suitability and next steps.

X responded: “It was lovely meeting you this morning. Thank you for acting so quickly making the enquiries. If anything else comes to mind I would rather pop down in person, but I will call beforehand. Thank you again for your confidentiality and professionalism.”

Our Advice and Information team handled 254 signposting cases in 2023/24. If you know a resident in Southend City who might benefit from our support, then do let them know about us.





# Volunteering

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

**This year our volunteers:**

- Visited communities to promote their local Healthwatch and what we have to offer
- Collected experiences and supported their communities to share their views
- Carried out enter and view visits to local services to help them improve

We have seven volunteers at Healthwatch Southend, each of whom gives up their free time for different reasons. Viv Storey is one of our newest volunteers working within our Advisory Group and she has shared her story.

Almost two years ago, Viv retired from a 40-year-long career in health and social care, which began when she purchased a small care home in Southend. She reflected on her extensive career, and how after diversifying from residential to homecare, her company grew to be one of the largest homecare providers in Southend. Viv's background and insights are invaluable to the work we do.

In 2023 Viv decided to venture back into the world of health and social care by applying to volunteer with us, saying she began to "miss the busy life and being part of an ever-changing care provision".

Viv said: "My previous life was all about work and caring for others, and after a while, you miss being around people and having a purpose in life.

"When I saw Healthwatch Southend looking for advisory members I thought I could help. My role is quite minimal at present and so far has mainly been about reading documents, making comments, or completing research tasks. I am sure as my knowledge of Healthwatch Southend grows, I might be able to help more".

Our volunteers get involved in many different ways and with a range of tasks, varying from things to do from the comfort of their own homes to assisting us at events and visits.

When asked why she chose to volunteer with Healthwatch Southend, she commented that the most rewarding thing was "listening and giving help to others who need it in whatever way you can."

She added: "Volunteers can help in many ways, for me, it was sharing my experience with those who are now 'in charge', hoping they will listen. It's the chance to be a voice of the past, to prepare for the future, and to improve the now. All of us hope to make a difference somehow and be wanted. Not everybody, especially me, are group or club people and eventually, you find yourself missing the life you had."



## Do you feel inspired?



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



[www.healthwatchsouthend.co.uk/volunteer](http://www.healthwatchsouthend.co.uk/volunteer)



01702 416 320



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



# Finance and future priorities

To help us carry out our work we receive grant funding under the Health and Social Care Act 2012. This the Local Reform & Community Voices grant from the Department of Health & Social Care, paid through the local authority.

## Our income and expenditure

Income		Expenditure	
Annual grant via Southend City Council	£119,095	Expenditure on pay	£74,023
Additional income	£200	Non-pay expenditure	£12,945
		Office and management fees	£13,270
<b>Total income</b>	<b>£119,295</b>	<b>Total expenditure</b>	<b>£114,531</b>

### **Additional income is broken down by:**

- £200 to support the promotion of the consultation on community inpatient beds by the Mid & South Essex Integrated Care Board

### **ICS funding**

None of the three local Healthwatch across Mid & South Essex received funding from our Integrated Care System (ICS) to support new areas of collaborative work at this level.

## **Next steps**

**Over the next year, we will keep reaching out to every part of our community, especially people in the most deprived areas, so that those in power hear their views and experiences.**

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

### **Our top three priorities for the next year are:**

1. Engaging with ethnic minority communities in Southend to explore their experiences of health and care in one or two specific areas
2. Access to primary care, including Pharmacy First
3. Hearing from the young people in Southend.



Southend Association for Voluntary Services has been involved with Healthwatch Southend across a range of partnerships and programmes throughout the past year. They provide an essential function for those with health or social care needs. Representing the lived experience and sharing the voice of those accessing and using services to influence and shape policy and design. Healthwatch Southend are key to the commissioning and scrutiny of both health and social care in Southend.

Anthony Quinn  
CEO Southend Association for Voluntary Services & Chair, SE Essex Alliance





# Statutory statements

**Healthwatch Southend, 203 Elmsleigh Drive, Leigh-on-Sea, Essex, SS9 4JH**

**The contract for Healthwatch Southend is held by The Advocacy People, a registered charity (charity number 1080679).**

**Healthwatch Southend uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.**

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# The way we work

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

Our Healthwatch Advisory Group consists of five members who work on a voluntary basis to provide direction, oversight and scrutiny of our activities. Our Advisory Group ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. The formal responsibility for the way in which we work remains with The Advocacy People, the registered charity which holds the contract with Southend City Council.

We ensure wider public involvement in deciding our work priorities. Over the next year or so, we want to see how we can capture more views of children and younger people, as well as different segments of our community.

## Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services. During 2023/24, we have been available by phone, and email, provided a web form on our website and through social media, as well as attending meetings of community groups and forums. We also helped with the Slipper Swop and the "In Conversation with..." events run jointly by the Council and the NHS.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, but will provide hard copies as requested. We want to balance being accountable to our community with a wish to reduce our carbon footprint.

## Responses to recommendations

We had no providers or commissioners who did not respond to requests for information or recommendations.

## Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us.

In our local authority area, for example, we take information to the Health & Wellbeing Board (<https://democracy.southend.gov.uk/mgCommitteeDetails.aspx?ID=144>) and the People Scrutiny Committee (<https://democracy.southend.gov.uk/mgCommitteeDetails.aspx?ID=132>)

We also take insight and experiences to decision-makers in the Mid & South Essex Integrated Care System. For example, we attend meetings looking at the quality of care and where action needs to be taken to address inequalities. Page 12 talks a little bit more about the structures.

We also share our data with Healthwatch England to help address health and care issues at a national level.

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## Enter and view

Healthwatch Southend has the legal power to enter premises where NHS or most social care services are provided, allowing it to talk to patients, services users, staff and families about their experiences of care. This power is to be used with care, and where significant concerns have been raised. During 2023/24, no specific concerns were raised with us.

However, we did use the enter and view *approach* in our work on wayfinding at Southend Hospital.

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### Healthwatch representatives

Healthwatch Southend is represented on the Southend Health and Wellbeing Board by Owen Richards, our Chief Officer. The Chief Officer is also a co-opted member of the City Council's People Scrutiny Committee, which carries out the function of Health Overview & Scrutiny Committee. During 2023/24 our representative has effectively carried out this role by regularly attending these meetings and using feedback from local residents to influence discussions at the Board.

Healthwatch Southend is represented on Mid & South Essex Integrated Care Partnership by our Chief Officer. The Chief Officer is also a member of the Mid & South Essex System Quality Group and the Population Health Improvement Board. A member of the Advisory Group attends the Mid & South Essex Integrated Care Board's Quality Committee. The Chief Officer is a member of the South East Essex Alliance, which is a formal sub-committee of the Integrated Care Board.

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### 2023 – 2024 Outcomes

Project/activity	Outcomes achieved
Deaf people's experiences of general practice	Acknowledged by ICB; action plan to raise awareness and address recommendations through education and practice level support
Making GP appointments	Acknowledged by ICB and shared with primary care networks to inform their work on access
Wayfinding at Southend Hospital	Acknowledged by MSE Hospitals; follow-up visit undertaken by Healthwatch Southend
Unpaid carer's experiences of general practice	Acknowledged by ICB. Findings presented at health inequalities meetings at Alliance and system level and built in to ongoing work to support unpaid carers

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