



**Annual Report 2024–2025**

**Unlocking the power of  
people-driven care**

Healthwatch Havering

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“The impact that local Healthwatch have is vitally important. Healthwatch are empowering their communities to share their experiences. They’re changing the health and care landscape and making sure that people’s views are central to making care better and tackling health inequalities.

The feedback local Healthwatch hear in their communities and share with us at Healthwatch England is invaluable, building a picture of what it’s like to use health and care services nationwide. Local people’s experiences help us understand where we – and decision makers – must focus, and highlight issues that might otherwise go unnoticed. We can then make recommendations that will change care for the better, both locally and across the nation.”

**Louise Ansari, Chief Executive, Healthwatch England**

# A message from our Chair

Welcome to our Annual report for 2024-2025, Our role as a Healthwatch is to support Havering residents, by being their independent champion when using health and social care services in Havering.

We are a small organisation and recognise the importance of working in partnership and collaboration with the all organisations that residents rely upon to achieve successful outcomes for their health and social care needs.

This year has been particularly busy, with significant challenges facing both the health and social care system and our residents. It is also important to recognise that there have been some amazing opportunities for Havering, such as the opening of St George's Health and Wellbeing Hub and the new Country Park GP practice: as the year closed, Transport for London announced plans for introducing a new Superloop Bus service, SL12, which we have suggested could serve St George's Hub to ease access to it.

With the many changes happening in GP/Primary care, the introduction of greater use of the Pharmacy services for residents, has caused confusion and anxiety. We have recently carried out a visit to two local pharmacies and our reports can be found on our website

We have continued with our Enter and View programme, visiting Queens A& E department, GP practices, Residential Care homes and the Walk-in services in Queens and Harold Wood Polyclinic; reports on all of these organisations are available on our website.

Working with other Healthwatch, Havering Council, Havering Place Based Partnership, the Integrated Care Board and other stakeholders is essential to ensuring that we can influence decisions taken on residents' behalf.



*It is my privilege to introduce the Healthwatch Havering Annual report and sharing the work we have been doing to ensure that your views on health and social care are heard. The achievements we have made this year and the positive impact on health and social care have been achieved by the co-operation of HPBP team and our staff team and our amazing team of volunteers*

**Anne-Marie Dean, Chair,  
Healthwatch Havering**



## About us

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

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



### Our vision

To bring closer the day when everyone gets the care they need.



### Our mission

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



### Our values are:

**Equity:** We're compassionate and inclusive. We build strong connections and empower the communities we serve.

**Collaboration:** We build internal and external relationships. We communicate clearly and work with partners to amplify our influence.

**Impact:** We're ambitious about creating change for people and communities. We're accountable to those we serve and hold others to account.

**Independence:** Our agenda is driven by the public. We're a purposeful, critical friend to decision-makers.

**Truth:** We work with integrity and honesty, and we speak truth to power.

# Our year in numbers

We've supported more than 1,250 people to have their say and get information about their care. We currently employ 4 staff and our work is supported by 17 volunteers.

## Reaching out:



**1,155** people shared their experiences of health and social care services, helping to raise awareness of issues and improve care.

**103** people came to us for clear advice and information on topics such as GP and hospital appointments, dental care and problems they had experienced in health and social care.

## Championing your voice:



We published **10** reports about health and social care services and the improvements people would like to see.

Our most popular report was **Long COVID syndrome – the continuing effects**, highlighting people's struggles with Long COVID and exploring what is needed to help them overcome their difficulties.

## Statutory funding:



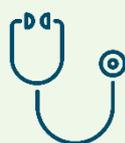
We're mainly funded by Havering Council. In 2024/25 we received **£117,359** from them, which was the same amount as last year.

# A year of making a difference

Over the year we've been out and about in the community listening to your stories, engaging with partners and working to improve care in Havering. Here are a few highlights.

Spring

A survey asking about patients' understanding of the role of Allied Healthcare Professionals (AHPs) in GP surgeries showed that most respondents were unaware of AHPs



A series of focus groups for people living with Long COVID, showed support for the establishment of peer support groups for them



Summer

We carried out an Enter and View visit to both branch surgeries of the Greenwood GP practice in Harold Wood and Hornchurch



We met the Havering Safeguarding Adults Board to explain the importance of urging pharmacies and others not to ask patients to reveal personal details when proving their identity



Autumn

In conjunction with the Havering Children's Safeguarding Network, we promoted the NSPCC's PANTS campaign to alert children, their parents and grandparents to the dangers of child sexual abuse



St George's Health and Wellbeing Hub in Hornchurch, development of which we have actively supported since 2013, opened



Winter

Visits to Accident & Emergency services at Queen's Hospital Romford culminated in an Enter & View visit to the three centres – Urgent Treatment Centre, Emergency Department and Ambulance Reception



We promoted the **Veteran Friendly Framework** to care homes, to encourage them to recognise and value the service given by those of their residents who are former members of the armed forces



# Working together for change

**We've continued to work with neighbouring Healthwatch to ensure people's experiences of care in North East London are heard at the Integrated Care System (ICS) level, and influence decisions made about services by NHS North East London ICB and the East London Partnership for Health and Social Care, as well as the NHS locally and Havering Council.**

This year, we've worked with Healthwatch across **North East London** to achieve the following:

## Turning community insight into system change



The 8 Healthwatch continue to develop the Community Insights Programme with NEL ICB. We've processed the experiences of 162,365 people, identifying 536,048 issues. On GP and hospital services alone, we've produced 623 reports and 305 dashboards. The system tracks care trends, highlights what works, and pinpoints areas for improvement—creating a shared evidence base to make services more responsive.

## What good care looks like to local people



In 2023, we heard from over 2,000 residents about what good care means to them. They told us it should be accessible, competent, person-centred, and trustworthy. These principles are now embedded in the Integrated Care Board's strategy through our partnership work. Together with the ICB, we will measure partners' success and track progress against these standards through our Community Insights system.

## Maternity Equality



Our 2023 maternity report helped shape the NEL Maternity Equity and Equality Strategy, leading to commitments on trauma-informed care, cultural competency, multilingual advocacy, and improved communication. Its impact continues through work on interpreting services and a proposed 24/7 helpline. All 3 hospital Trusts are improving access for non-English speakers—introducing new clinical processes and bilingual advocates to deliver more inclusive, responsive maternity care.

We've also summarised some of our other outcomes achieved this year in the Statutory Statements section at the end of this report.

# Making a difference in the community

**We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services and improve care over time.**

Here are some examples of our work in Havering this year:

## Creating empathy by bringing experiences to life



**Hearing personal experiences and their impact on people's lives helps services better understand the issues people face.**

Deaf patients in Havering using GP or hospital services are now guaranteed a British Sign Language (BSL) interpreter if they ask for one, so they can make informed decisions about their care. After we shared experiences of people who had been refused an interpreter with primary care commissioners, GP surgeries and hospitals now have inclusive policies in place. We will be exploring how effective this has been during coming visits.

## Learning Disability & Autism report



**Liberty PCN shaping services for people with Learning Disability and Autism based on our report.**

The Liberty PCN team are doing a piece of quality improvement work around learning disability annual health checks and health action plans, and the ongoing support people get to complete their action plans through the year.

## Improving care over time - Over Fifties Forum



**We have attended this monthly forum for over 12 years, engaging with over 70 resident members. Updating and investigating on their behalf e.g.**

Examples are: Blood Test Booking service, GP reception services, COVID 19 boosters, St Georges Health and Wellbeing development. We also engage with issues such as Neighbourhood Policing, Homelessness and access to clinical services.

# Making a difference in the community

**We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services and improve care over time.**

Here is another example of our work in Havering this year:

## St George's Health and Wellbeing Hub



**St George's Hub in Hornchurch has been built on part of the site of the historic St George's Hospital, which was at one time part of the historic Battle of Britain air base, RAF Hornchurch. It is one of the few hospital projects of the previous government to have come to fruition..**

We have been involved in the development of St George's Hub in one way or another since our foundation in 2013 and it is pleasing to be able to report that the Hub opened for business in November 2024.

The Hub includes a GP practice (which moved there from premises in Upminster), a Kidney Dialysis Unit, a Blood Test centre, Community Diagnostic Centre and other health facilities, and a Community Café.

We are playing an active role in the Management Board for the Hub.

Our involvement with the Hub has been informed by the wide range of feedback we get from service users about the needs they see for health and wellbeing facilities in the community.



# Listening to your experiences

**Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.**

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.



# Listening to your experiences

## Queen's Hospital: Streaming & Urgent Treatment, Ambulance Reception and the Emergency Department

**Queen's Hospital, Romford has been under considerable pressure continually since last summer. With patients' numbers attending in summer as high as they do in winter, the hospital has had no respite.**

With no evidence that this pressure would steady and improve from a patient's perspective, we decided to carry out a series of Enter & View and less formal visits.

### What did we do?

In discussion with Queen's Hospital, we arranged for an Enter and View visit. Our trained team of Volunteer members developed a plan which would explore three separate care areas, plus a survey with patients, to understand some of the reasons for attending.

### Key things we heard from patients about why they had gone to A&E:



Our work shows that potentially these patients could have been treated with a different and more appropriate service model.

### What difference did this make?

This information helped us to share and discuss with the Hospital Trust and Commissioners the need to design different service models and with the future proposals regarding Same Day Access this could have a very positive impact on Queen's Hospital.

# Listening to your experiences

## Living with Long COVID

**In 2022, jointly with our Healthwatch colleagues in Barking & Dagenham and Redbridge, we surveyed people living with Long COVID, a debilitating and potentially life-changing consequence of being infected by COVID.**

This led to a further survey of people affected by Long COVID living in Havering, undertaken with the support of a working group comprising Public Health Havering, NEFLT (the local community health trust) and a Havering Primary Care Network. This led to a series of focus groups that took place in May 2024.

### What did we do?

We held four focus groups, attended by 21 people with experience of Long COVID, two of which were held online (and included by people who were bedridden as a result of Long COVID). This produced a rich account of their – mainly negative – experiences of seeking support for their illness..

### Key things we learned from patients:

Patients need prompt medical care but find many healthcare professionals fail to recognise Long COVID as a debilitating condition or take it seriously. The process of diagnosis was over-long and cumbersome.

Patients need targeted therapies, as referral to traditional talking therapies is not appropriate for dealing with Long COVID. Recognition of Long COVID as potentially disabling would also help. Mental health support alone is not enough.

They also told us that they felt dismissed and ignored by some healthcare professionals.

Many participants told us that the availability of Peer Support Groups would be helpful.

We reported the findings of our focus groups to the Havering Place-based Partnership, which supported the establishment of Peer Support Groups.

### What difference did this make?

We began working with the Peer Partnership, a specialist third sector organisation that provides training for peer support group facilitators to identify a training programme and participants in our focus group who were interested in facilitating the groups.

# Hearing from all communities

We're here for all residents of Havering. That's why, over the past year, we've worked hard to reach out to those communities whose voices may go unheard.

Every member of the community should have the chance to share their story and play a part in shaping services to meet their needs.

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

- Connecting with professional teams and working with the Traveller community
- Developing links to enable us to help to support the Veteran community
- Working with Havering Safeguarding team on the Suicide Prevention Stakeholder Group



# Hearing from all communities

## Havering Community Chest Fund

The Fund was devised by Havering Council and the NHS to support small and medium-sized local organisations with projects aimed at addressing health inequalities. As a member of the panel that awards grants from the Fund, we use our insights to influence decision-making positively for patients. The following examples show what has been done this year:

### Providing hearing loop facilities for users of hearing aids

#### What difference did this make?

A grant from the Fund enabled the installation of a hearing loop in the Urgent Treatment Centres at Queen's Hospital, Romford and Harold Wood Polyclinic for the benefit of patients who are deaf or hard-of-hearing (an issue identified as part of our review of Services for the Deaf).

### Improving health and wellbeing within local Asian communities

#### What difference did this make?

Havering Asian Social and Welfare Association – Funding was awarded for equipment for Chair Yoga, providing a gentle and accessible way to practice yoga that includes seated and standing poses using the chair for balance and support to improve flexibility, reduce stress and improve mental health.

### Reducing health inequalities for Refugees and Asylum Seekers

#### What difference did this make?

Over the past three years Havering has seen a significant increase in refugees and asylum seekers as a result of world events. Following workshops, mental health support was identified as a key need.

Havering has addressed the barriers which were driving the health inequalities experienced by the asylum seekers and refugees through providing a dedicated Psychologist Support Service for this cohort.

# Information and signposting

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, over 100 people have reached out to us for advice, support or help finding services.

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

- Providing up-to-date information people can trust
- Helping people access the services they need
- Supporting people to look after their health
- Signposting people to additional support services



## Access to services for people with Autism

**We shared and discussed widely our report "Services for people living with learning disability and autism", which was published in 2023 but continues to reverberate across the local health and social sector for people living with Autism.**

One correspondent told us "I am an adult with Autism, and I get a dreadful service from both (NHS and social care). I would like a social worker who is qualified to do a full assessment under the Care Act and not pick and choose and to stop coming up with excuses. As for (the NHS), it is ring-a-ring let's all go around in circle; do you know what this does someone with Autism?"

I feel that as an adult with Autism trying to make changes, I am coming up against a brick wall. Yes, I am the lone voice on the Havering Autism Partnership".

**Our report was one of a number of reports by local Healthwatch that paved the way for the Healthwatch England report "Recognising ADHD: How to improve support for people who need it" (published May 2025)**

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## Empowering children who can hear but have deaf parents and/or siblings

**Our report "Deafness is not a barrier - It only becomes a barrier if there is a lack of accessibility" has also had a major effect locally.**

One correspondent asked: "Can you please give me all the information for support of a hearing child in a deaf family. She's a young girl who is lonely and has asked for help and support. She is in primary school and her brother is deaf and so are both parents"

We were able to refer both to a local voluntary service specialising in supporting deaf people, and to the statutory service provide by our local Council.

**As a direct result of our report, the local Place-based Partnership has established a working group to identify where improvements in local services for deaf people are needed – both NHA and social care – on which we are represented by our Chair.**

# Showcasing volunteer impact

Our fantastic volunteers have given over 800 hours between them to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

## This year, our volunteers:

- Carried out six formal Enter and View Visits and four less formal visits to follow-up previous Enter and View visits
- Collected experiences and supported their communities to share their views
- Represented us at various community events and meetings



# Showcasing volunteer impact

## At the heart of what we do

From finding out what residents think to helping raise awareness, our volunteers have championed community concerns to improve care.

“My career as a teacher of children with challenging behaviours was followed by a spell with a VSC. I have been volunteering with Healthwatch for over ten years and have been an Elected Member of the Governance Board for over six years.

For me, it is important that hospital care is compassionate and flexible. This year I have focused on the delivery of care in A & E. When we undertake a visit, we publish a report which is shared with the organisations being visited. It is gratifying when the hospital authorities act on our recommendations for improving the service.”

**Dawn**



“Having retired after many years of working in the Home Care sector, being a Volunteer with Healthwatch Havering has given me an opportunity to continue my passion about how important the role of Caring is and how Carers can make a positive impact on the lives of our residents. The values of Healthwatch have given me a sense of purpose to continue to contribute to the Care sector and to give a voice to residents and their families that is expressed in our reports. Visiting care homes and seeing how our elderly are looked after is a pleasure.”

**Mary**



### Be part of the change.

If you've felt inspired by these stories, contact us today and find out how you can be part of the change.



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



01708 303300



[enquiries@healthwatchhaverling.co.uk](mailto:enquiries@healthwatchhaverling.co.uk)

# Finance and future priorities

We receive funding from Havering Council under the Health and Social Care Act 2012 to help us do our work.

## Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£117,359	Expenditure on pay	£88,458
Additional income	£5,671	Non-pay expenditure	£14,257
		Office costs	£24,671
<b>Total income</b>	<b>£123,030</b>	<b>Total Expenditure</b>	<b>£127,386</b>

## Additional income is broken down into:

- **£5,000** received from NHS North East London for work supporting them \*
- **£500** received from a local Primary Care Network for joint work on the project about services for people living with Long COVID
- **£171** interest from our bankers

### \* Integrated Care System (ICS) funding:

The eight Healthwatch across North East London receive funding from our Integrated Care System (ICS) – NHS North East London – to support collaborative work at this level. As part of this commitment, Healthwatch Havering represents all North East London Healthwatch at meetings of the ICB Finance, Performance and Investment Committee to ensure that the patient perspective is taken into account when financial decisions are made.

# Finance and future priorities

## Next steps:

**Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences. Our Enter & View programme will continue to focus on care homes, GP practices and Queen's Hospital.**

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 other key priorities for the next year include:

- 1) **Primary Care: GPs** – working with primary care practitioners to improve patients' access, including the development of Patient Participation Groups
- 2) **Primary Care: Community Pharmacies** – promoting the development of the Pharmacy First initiative in Havering
- 3) **Development of A&E services** at Queen's Hospital, LAS and Urgent Care there and at Harold Wood Polyclinic – monitoring changes
- 5) **Long COVID** – supporting the development of Peer Support Groups for people living with Long COVID
- 6) **Working with the Deaf community** – to continue supporting Havering Council on its developments to empower the Deaf community.
- 7) **St George's Hub Development** – participating in the development of this vital community facilities
- 8) **Care Quality Commission** – working with the CQC to improve inspection and reporting of local health and social care facilities
- 9) **NSPCC: PANTS campaign** – supporting initiatives to improve safeguarding of children

# Statutory statements

Healthwatch Havering is the operating name of Havering Healthwatch CIC, a Community Interest Company limited by guarantee (registered in England, no. 8416383)

Queen's Court, 9-17 Eastern Road, Romford RM1 3NH

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

## The way we work

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

Our Healthwatch Board consists of 10 members who provide direction, oversight, and scrutiny of our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. The Board members are the three company directors, two staff and five volunteers elected annually from among our membership.

Throughout 2024/25, the Board met 10 times and made decisions on matters such as priorities for our Enter and View programme and Public Engagement projects, and our relationship with Havering Council, the ICB and the Place-based Partnership.

We ensure wider public involvement in deciding our work priorities.

## **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, including participation in the Healthwatch North East London Community Insights System and feedback from individuals via the Healthwatch England webform system..

During 2024/25, we have been available by phone and email, provided a webform on our website and through our weekly Friends' Network news bulletin, as well as attending meetings of community groups and forums.

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 and send it to a wide range of stakeholders.

# Statutory statements

## Responses to recommendations

No providers failed to respond to requests for information or recommendations. There were no issues or recommendations escalated by us to the Healthwatch England Committee, so there were no resultant reviews or investigations.

## Taking people's experiences to decision-makers

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

For example, in our local authority area, we take information to the Health and Wellbeing Board, Health Overview & Scrutiny Committee, Outer North East London Joint OSC and Havering Place-based Partnership Board, as well as less formal forums such as the Havering Live Well Network and the Havering Integrated Care and Social Prescribing Network.

We also take insight and experiences to decision-makers at North East London ICB. For example, we meet regularly with senior staff at Barking, Havering and Redbridge University Hospitals Trust as well as the North East London ICB. We represent all Healthwatch in North East London at the ICB Finance, Performance and Investment Committee and we also share data with Healthwatch England to help address health and care issues at a national level.

Our Non-Executive Director, Ron Wright, sits as a patient representative on both the Board of Barking, Havering and Redbridge University Hospitals Trust and the Council of the Partnership of East London Cooperatives (PELC) a GP-led organisation providing streaming/triage at Queen's Hospital, Urgent Treatment Centres and out-of-hours GP services.

Volunteers represent us at meetings such as the North East London Local Quality & Surveillance Group, the Havering Quality and Safeguarding Group and the Havering Drug and Alcohol Partnership.

# Statutory statements

## Healthwatch representatives

We are represented on the Havering Health & Wellbeing Board and the Havering Place-based Partnership Board by Anne-Marie Dean, our Chair, who attends the monthly Partnership Board and quarterly Health & Wellbeing Board meetings.

Our Executive Director, Ian Buckmaster, represents us at meetings with the North East London ICB and East London Health and Care Partnership; he also attends the ICB Finance, Performance and Investment Committee.

We are also represented on a range of official and community bodies including:

- Barking, Havering & Redbridge University Hospitals Trust – Board
- Havering Adult Safeguarding Board
- Havering Children's Safeguarding Board
- Havering Combatting Drugs Partnership
- Havering Community Safety Partnership
- Havering Health Overview & Scrutiny Committee (OSC)
- Havering integrated Care & Social Prescribing Network
- Havering Live Well Partnership
- Havering Over Fifties Forum
- Havering Quality & Surveillance Team meeting
- Havering Volunteer Managers' Forum
- Havering Combatting Drugs Partnership
- London Ambulance Service Public & Patients Council
- North East London Local Quality & Safeguarding Group
- Outer North East London Joint Health OSC
- Partnership of East London Cooperatives – Council
- St George's Health & Wellbeing Hub Management Board

In addition, we have regular meetings with the Chairs and senior leaderships of local commissioner and provider bodies, including:

- Barking, Havering & Redbridge University Hospitals Trust
- Havering Place-based Partnership
- NHS North East London ICB

# Statutory statements

## 2024-25 Enter and view

Location	Reason for visit	What you did as a result
GP Practice – Greenwood (two branch surgeries: Ardleigh Green and Harold Wood)	The next call in our continuing series of visits to GP practices to observe their day-to-day operation. We visited both branches.	We suggested that: <ul style="list-style-type: none"> <li>• Hearing loops be installed for the benefit of patients with hearing impairments</li> <li>• Staff training be improved for triaging and prioritising appointments</li> <li>• Observance of patient confidentiality be improved in open areas</li> <li>• The premises' appearance be improved</li> </ul>
Queen's Hospital – inpatients' mealtimes	We carried out a series of similar visits in 2016, 2017 and 2018. This was the first opportunity post-COVID to continue the series. Our purpose was to observe how meals were delivered and served to patients.	We made a range of recommendations for improvements in the system. In response, the hospital prepared and executed an action plan.
Residential Care Homes – Cherry Tree, The Farmhouse, and The Paddocks  (three care homes co-located on one site)	The provider organisation for these three homes had recently changed. We had visited them when under previous management and so we wished to observe their operation in the new circumstances.	The visiting team made only one recommendation: that blinds be provided in the conservatory of The Farmhouse. We will be re-visiting later in 2025 to see what progress has been made.

# Statutory statements

## 2024-25 Enter and view *continued*

Location	Reason for visit	What you did as a result
Pharmacies – two Boots pharmacies in Central Romford (The Brewery and The Liberty)	We have started a programme of visits to pharmacies to observe them in operation as Pharmacy First is introduced. Visiting these two large Boots stores was the next in series.	We recommended that: <ul style="list-style-type: none"> <li>• The two branches liaise to ensure patients can obtain prescriptions</li> <li>• Translation services be provided</li> <li>• Staff be trained in mental health first aid</li> <li>• The vacant post of manager be filled at the Liberty pharmacy as soon as possible</li> </ul>
Queen’s Hospital – A&E Services – Emergency Department, Urgent Treatment Centre and Ambulance Reception  (both formal Enter & View visits and informal visits all combined in a single report)	We had previously observed the operation of A&E services at the hospital. Following significant increases in patient attendances, extensive reconfiguration of accommodation and changes in operational procedures, we wanted to observe the current arrangements.	The report set out a range of recommendations for the providers of the services (the Hospital Trust, the UTC operator and the Ambulance Service).  In response, the Hospital Trust prepared and executed an Action Plan to address the suggestions we had made

# Statutory statements

## 2024–25 Outcomes

Project/activity	Outcomes achieved
<h3>Joint projects with other Healthwatch</h3>	
<p>Big Conversation: what does good care look like? Creating a <b>Good Care Framework</b></p>	<p>The framework developed has four principles: Accessible, Person-Centred, Competent and Trustworthy. The Framework can be used by stakeholders to develop their own success measures and evaluation tools. NHS North East London has endorsed the Good Care Framework for use by NHS providers across North East London.</p>
<p>North East London Integrated System Research Engagement Network</p>	<p>The aim was to understand people's willingness to take part in research on health and social care services. The top three research topics were mental health, diabetes and cancer.</p> <p>The top three topics identified were: engage with diverse populations; continue participants' involvement in projects; and build trust through honest dialogue.</p>
<p>Care Homes Direct Enhanced Service (DES) – commissioned by NHS North East London</p>	<p>The aim was to find how DES was working between GPs and care homes. The findings were that GPs were in regular contact with homes, supporting and visiting as required and that additional services such as chiropody, physiotherapy, optometry and dentistry were available to residents</p>

# Statutory statements

## 2024–25 Outcomes *continued*

Project/activity	Outcomes achieved
<b>Healthwatch Havering projects from previous years</b>	
Long COVID (Post-COVID syndrome): the continuing effects –	Following up previous work on Long COVID, four focus groups were held, attended by 21 people living with Long COVID. The resultant feedback was presented to various stakeholders and funding identified to set up Peer Support Groups to assist people living with Long COVID.
Services for people living with learning disability and Autism	Our report on service for people with a learning disability or Autism, published in 2023, continues to be influential. We identified areas where improvement was needed, and the NHS and social care services continue to address those needs for improvement
Services for people who are deaf	This report, also published in 2023, continues to have an effect too. The local NHS and the council have established a joint working group – on which we are represented – that is examining in depth the improvements in service that are needed.
Healthwatch Havering Friends' Network (HHFN)	Our HHFN bulletins continue to be published weekly, passing on to readers various messages from local NHS and social care authorities and providers and other organisations who might not otherwise find out about them

# Statutory statements

## 2024–25 Outcomes *continued*

Project/activity	Outcomes achieved
<b>Healthwatch Havering projects</b>	
George's Health and Wellbeing Hub	<p>Virtually since the beginning of Healthwatch, we have supported the development of a Health and Wellbeing Hub on the site of the former St George's Hospital in Hornchurch.</p> <p>The Hub opened in October 2024. We have continued our involvement with the project as it continues to grow in importance to the local community</p>
Defibrillators	<p>As a result of a report from Healthwatch Manchester, we decided to review the availability of defibrillators (assisted by the London Ambulance Service).</p> <p>The project continues into 2025/26 but, as a direct result of it, a new defibrillator has been installed at one church in the borough and plans are well-advanced for the installation of one at another church.</p>
Superloop Bus route SL12	<p>Towards the end of the year, Transport for London announced a new bus route for Havering, SL12. We have proposed an alternative for part of the route to enable the buses to serve the new St George's Health and Wellbeing Hub (which is not well served by buses at present).</p> <p>Our proposal has been strongly supported by the constituency MP, GLA Member and local councillors, among others.</p>

# Statutory statements

## 2024–25 Outcomes *continued*

Project/activity	Outcomes achieved
<b>Healthwatch Havering projects (continued)</b>	
Veteran Friendly Framework for residential care homes and GP practices	Having become aware of this initiative by Royal Star and Garter and the British Legion to provide support to residents of care homes who have served in the armed forces, we decided to support it by promoting to local care and nursing homes and GP practices. This project continues into 2025/26., when will be exploring how many homes and GP practices are developing their service as “veteran friendly”.
Same Day Access to GP hubs	NHS North East London has asked for a survey of people’s understanding of the availability of Same Day Access for patients unable to see their own GP. The project continues into 2025/26.

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