

# Healthwatch Bradford and District

Annual  
Report

2014/2015



*Cover photograph: Joel Lambert and Susan Middleton from Bradford People First*



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# Note from the Chair and Manager



**I am pleased to introduce the second Annual Report of Healthwatch Bradford and District, covering the period April 2014 to March 2015.**

This document describes some of the ways Healthwatch has involved people in shaping improvements in health and social care in the district and the resulting changes in services. We know from the feedback we have had from local groups, NHS commissioners and providers of hospital and community health services that the work of Healthwatch is making a real difference. We have a positive reputation locally, regionally and nationally. We have built on the work of our first year and achieved some excellent results.

I would like to thank my fellow members of the Healthwatch Board who have generously given their time and expertise. I am proud of the work that the Healthwatch staff, volunteers and board members have achieved together and thank them all for their hard work.

*Javed Khan, Chair*

All of us who make up Healthwatch Bradford and District, staff, board and volunteers, believe passionately in the importance of public voice in improving services. In our second year we have involved people whose voices are less often heard - this report describes some of the impact that we have achieved together. Working in partnership with many others we really are making a difference.

Looking forward to next year we will follow up on all current work and ensure that public feedback really translates into improvements in services. We will work on areas like home care, GP access, dental services, mental health, people affected by stroke and other long term conditions, services for younger people. We also have a number of important Enter and View visits planned to both health and social care services. Within these large service areas we will actively seek the stories and experiences of specific groups or communities who often have worse access and care than others.

I would like to thank Javed and the Board for their guidance and support, and all of our expert volunteers who extend the reach of Healthwatch across all communities. Thanks also are due to colleagues in KIVCA who host us. Finally I would like to thank the excellent staff team of Healthwatch Bradford who have worked so hard to make a real difference.

*Andrew Jones, Manager*



# About Healthwatch

**Healthwatch Bradford and District is here to listen to people's experience of health and social care, and use this to improve the services that local communities rely on.**

We want to help people get the best from health and social care, challenging inequalities in access, care and outcomes. We believe the best way to do this is by involving local people and designing care around their needs.

Our impact comes from strong connections with local people and communities; our expertise is grounded in their experience. We work in partnership with local voluntary and community organisations; bringing together people's voices and turning up the volume to ensure they are heard.

As a statutory watchdog, our role is to ensure that local health and social care services and decision-makers put the

experiences of people at the heart of their care.

We are a small organisation, with a big job to do. Our staff team are supported by a team of talented and dedicated volunteers, including our Board who set strategic priorities and ensure our work delivers on the objectives of Healthwatch Bradford and District.

## Our objectives

- Listen to people's views about their needs or experiences, and make sure these views are heard by those setting up and delivering services;
- Involve local people in how health and social care services are planned and provided, leading to improvements for all;
- Influence the way services are designed and delivered at both a local and national level;
- Help people find the information they need to make choices and get the most from health and social care services;
- Report back to the people of Bradford and District, and achieve our statutory duties.



*Some members of our Healthwatch staff & Board team (L-R): Pam James; Javed Khan; Sally Horner; Trevor Ramsay; Victoria Simmons; Kerr Kennedy; Paul Anderson; Mohammad Shabbir; Julie Bruce; John Samuel; Andrew Jones.*



# Easy Read Summary

Healthwatch reaches out to people across our district to find out about their experiences of health and social care.

We listen to groups of people whose voices are not often heard in health and social care. This year we have heard views from young people, older people, people from minority ethnic communities, and disabled people.



We go to local hospitals and GP surgeries regularly, to ask people there about what they think of the services.

Healthwatch volunteers and staff at outreach sessions in hospitals and GP practices have spoken to over 1000 people this year.



Healthwatch is helped by lots of volunteers including our board members.

We have trained and involved people from different backgrounds to become outreach volunteers or Enter and View representatives.

**By finding out about people's experiences, we help improve local services.**



One of our Enter and View visits was to Eccleshill Community Hospital. People were pleased with the service but wanted more information about going home. The hospital started a scheme called 'Ticket Home' - now patients and their families are more involved in getting ready for leaving hospital.



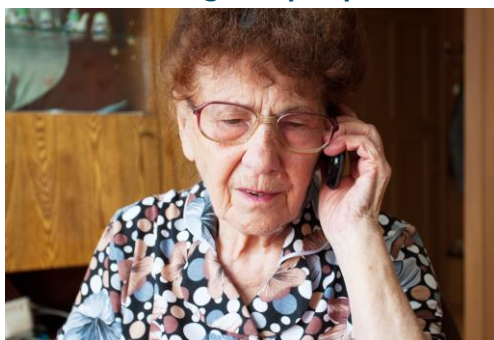
After we made recommendations last year, in March 2015 we went back to Airedale Hospital to see how elderly care wards have changed.

The new wards are better for people with dementia. On our second visit, carers and patients were pleased with the care they received.



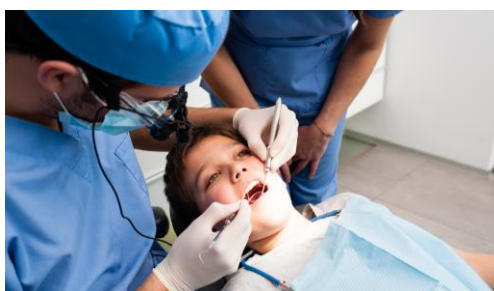
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## Healthwatch gives people information about local health and social care services.



This year, 179 people asked us for information by phone, email or at outreach sessions.

They asked questions about things like social care services, community support, and how to make a complaint.



Lots of people who got in touch were looking for help to find an NHS dentist. This has shown us that there is a problem with access to dentists in some parts of the district. We are working with other Healthwatch organisations to get those in charge to understand and tackle the problem.

## Healthwatch writes reports and tells those in charge about what needs to change.



We influenced local Clinical Commissioning Groups (who plan and buy health services) to introduce a training course for GP practice receptionists.

The training helps them to understand things from a patient's point of view so they are more helpful.



Healthwatch went to the Accident and Emergency department at Bradford Royal Infirmary, to ask people about their experience.

The Trust welcomed our report and have written back to tell us how they will improve the department.

**Healthwatch Bradford and District works in partnership with other organisations, and we're part of the national Healthwatch network. By working together we can make sure people's voices are listened to, and we can have a stronger impact.**

**This Annual Report also includes details of how we make decisions, and where our money is spent.**



# Engaging with people who use health and social care services

## Understanding people's experiences

Gathering views and experiences of health and social care is the core of our work. Healthwatch staff and volunteers are regularly out in the community, talking to people about the services they use and listening to what's working well and what could be improved.

Since August 2014, we have held weekly outreach sessions at Bradford Royal Infirmary visiting outpatient waiting areas to talk to patients and carers about Healthwatch and ask them about their experiences of care, both at the hospital and elsewhere.

This work has involved volunteers, including a number of students from Bradford College. We have also carried out outreach sessions at Airedale General Hospital, in GP practices and at public events across the district.



Photo: Sally Horner and Cyril Davies at Easier Access event, September 2014

Outreach activities have engaged with over 1000 people this year, gathering feedback as well as providing information and putting people in touch with services.

In addition we have held public events about the NHS response to our work on GP services, the experiences of carers of people with dementia and our AGM. We reached out to the public when we ran stalls or workshops at other organisations' events, such as Easier Access, Manningham Healthy Living Initiative, Positive Minds, People First health fairs in both Keighley and Bradford, GP practice health promotion events, and Airedale Hospital open day.

**Healthwatch also carries out targeted work with particular communities; we have taken steps to ensure that we are hearing the views of:**

- Young people (under 21) and older people (over 65)
- Disadvantaged or vulnerable people
- People who are seldom heard.

We have not specifically targeted those who work or volunteer in our area but do not live here. However we know that they are represented among people we have spoken to in our outreach work.



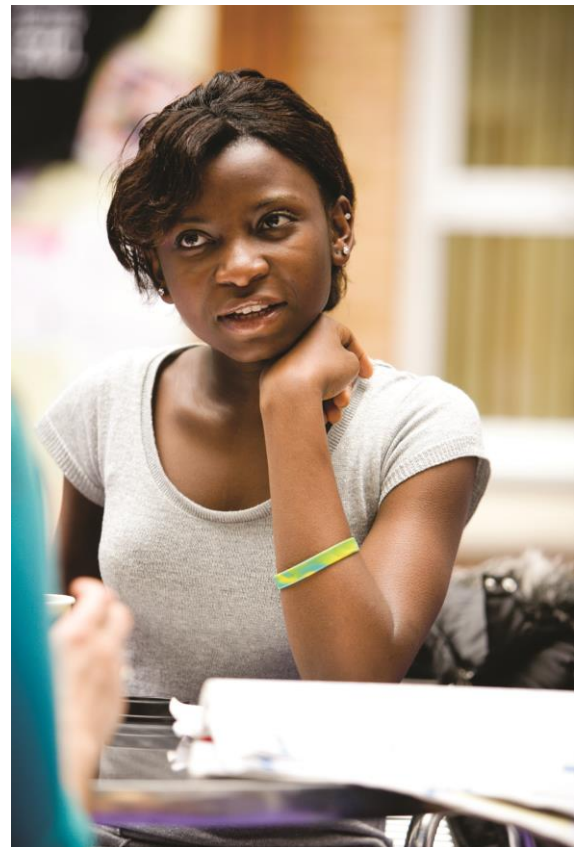
## Work with young people

Healthwatch teamed up with Barnardo's to deliver an innovative project to increase young people's participation within primary care services. In collaboration with Barnardo's, we worked with two local GP practices in Bradford: we delivered training on participation, supported the practice staff to carry out a self-audit and to develop an action plan.

As a result of this project, one practice has now 8 young people engaging with their service and together they have produced a participation statement and a separate website for young people.

We worked through local colleges to attract young people with an interest in health and social care to get involved in our work.

Some of our young volunteers carried out a 'walk around' visit to children's wards at Bradford Royal Infirmary in February 2015, where they spoke to children and their families to identify areas for improvements and they wrote up as a report to share with the Trust. Subsequent Enter and View visits led by trained young people have built on this work.





### Work with BME communities

Our report on the cancer experiences of people from three different minority ethnic communities was published in June 2014. This piece of work was carried out in partnership with Macmillan as part of their ‘Cancer Voices’ project. We held focus groups for particular communities to come along and share their experiences: South Asian; Central and Eastern European; African and African-Caribbean. Although many common themes were identified, we also uncovered some culturally specific experiences and issues. Our findings have helped both Macmillan and local providers to better understand the experiences of these groups.

The Trust has developed a ‘You said, we did’ response to this work and is making changes to its services, including a new website providing information for patients. They are now carrying out ‘holistic needs assessments’ so that staff ask all patients about all their needs such as spirituality and cultural life, and not just about medical needs.

In March 2015, we held a focus group with recent migrants from Romania, to listen to their experiences of accessing primary care services. We heard about the importance of community networks in sharing information about health services, as well as about some of the barriers to access presented by language and cultural differences. We worked with the local CEELS (Central and Eastern European Liaison Service) team, the Laco project based at the Thornbury Centre, and with the Healthwatch England policy team on this piece of work, which will contribute to a national report on primary care to be published in autumn 2015.



*Photo: Focus group at the Thornbury Centre in Bradford, March 2015*



## Work with older people

Healthwatch has taken steps to gather the views of people over 65, with a number of pieces of work looking at services predominantly used by older people.

In Autumn 2014, we heard some mixed feedback about people's experiences of using Bradford Council's Access Point, which is the first contact for social care services in the district. Healthwatch decided to undertake a short, focused piece of work to gather more evidence about this service. We heard from a number of partner organisations, including the Alzheimer's Society, Age UK, and Carer's Resource, about people's experiences of trying to get information, advice and support from the Council. Our report was published in February 2015 and will contribute to the Council's review of the service; we continue to work with the Council to seek improvements.

In February 2015, Healthwatch conducted a survey among people over 65 receiving care in their home. A survey was sent to a sample of people receiving care from private providers, paid for either in part or full by the Council, to understand how well these services meet their needs. Our report 'Come on time, slow down, and smile' is based on 240 responses from older people or their carers, and will be published in the summer of 2015.



## Work with disabled people

Healthwatch has strong links with a number of organisations across the district run by and for people with physical, sensory or learning disabilities.

Following previous work with people with sensory impairment, we have continued to seek improvements from Bradford Teaching Hospitals NHS Foundation Trust on their services. In March 2015 we completed a follow-up survey within three hospital departments: Ophthalmology; Audiology; and Ear Nose and Throat to gather views on access, communication, and additional support offered for appointments.

Some of our Enter and View authorised representatives have physical or learning disabilities. These volunteers are a real asset to the Healthwatch team, and have helped us identify issues around access and suitability of local services. We have consolidated our training for volunteers carrying out visits and developed more Easy Read materials. We continue to strengthen our partnership with local People First organisations and other groups.

Healthwatch has worked with People First members to run stalls at events for people with learning disabilities, listening to their experiences of health and social care services. We have also involved people with a learning disability when delivering training to the Patient Participation Group Network in order to effectively communicate how to make patient groups more accessible.

*Photo: Surekha Thind and Mehvish Akhtar at Learning Disabilities Healthy Living Event, March 2015*



# Raising awareness

The Healthwatch team work hard to let people know about what we do, and how we make a difference.



In summer 2014, we got involved with Big Screen Bradford's family film events in City Park. A short advert about Healthwatch was played out to crowds who gathered in the square to watch family films on the big screen. Each of the four events attracted between 200-350 people. Volunteers and staff were on hand to hand out flyers and stickers for children and talk to people about Healthwatch.

We have continued to build our profile in the local media, getting excellent coverage for reports we publish as well as commenting on health news.

Our work and local case studies have also been used by Healthwatch England in national media stories, boosting the profile of Healthwatch as a whole.

The Healthwatch website, social media, and e-bulletins are central to how we communicate with the public and we continually develop these and grow our audience. In 2014/15, 4617 people visited our website - an increase of 34% on the previous year.

We have worked with the Digital Working Academy of the University of Bradford, to develop short films highlighting examples of our work and featuring some of our volunteers, staff and partners. The three films on the themes of Involvement, Impact, and Influence will accompany this annual report on our website.



*Photo: Andrew Jones, Manager of Healthwatch Bradford and District, filming for the BBC*



# Impact story

## Making a difference through volunteering

### *Mehvish Aktar*



Mehvish Akhtar, aged 20 from Great Horton, started volunteering with Healthwatch in 2014.

“I first heard about Healthwatch when Afsana and Marcella came to Bradford College and told us about Healthwatch and asked for volunteers for the BRI outreach programme. I wanted to volunteer because, at that time, I wanted to be a children’s nurse. I thought that being in a hospital environment would give me experience and more confidence.

“When I first started at BRI it was really nerve wracking. But you get used to it in the end because, you know, different patients have different stories to tell. The elderly tend to want to talk more than the young ones, but it’s great.”

As Mehvish grew in confidence and learned more about Healthwatch, she began to get involved in other elements of our work.

In August 2014 she led a ‘walk around’ visit to the Children’s Wards at BRI, recruited other young people to take part

and wrote a report that identified areas for improvement from children and young people’s perspectives. Bradford Teaching Hospitals NHS Foundation Trust welcomed the feedback and has responded with a plan to make practical changes such as updating the decoration on wards and improving facilities for visiting families.

“Being part of those improvements felt great because it showed that the hospitals actually listening to what people had to say. Because it was not just us making those recommendations, we talked to some of the patients and families and they had things to say which we wrote down. So it shows that the hospital is listening to patients and families, as well as us.”

Mehvish has now gone on to become a fully trained Enter and View representative. She has worked alongside our volunteers with a learning disability to run stalls at events, promoting Healthwatch and gathering views.

**“As I’ve gone along I’ve gained loads of confidence, and talking to patients is like second nature. I enjoy working with Healthwatch because I’ve learnt more, and I’ve met some really great people.”**





# Enter and view

Healthwatch has statutory powers to carry out Enter and View visits to health and social care services across the district. This is an important tool to gather evidence about how well services meet the needs of local communities.

One key benefit of Enter and View is that it is carried out by ordinary people, giving a fresh perspective. Our volunteers notice aspects of care that may not be obvious to professionals or inspectors, but that make a real difference to patients and carers. Services generally welcome Enter and View visits, and act on recommendations we make. But we are not afraid to challenge services when people using them are not satisfied.

## Our Authorised Representatives:

- Abbas Ali
- Hoshiar Singh
- Irene Cyhanko
- Jean Hepworth
- Joan Fenton
- Katie Matthews
- Tim Pickles
- Val Mills
- Yvonne Jardine
- Huma Malik
- Bilaal Hussain
- Anne-Marie Bentley
- Surekha Thind
- Damian Marshall
- Lorna James
- Mehvish Akhtar
- Muneeba Afzal
- Mohammad Akhtar

Our team of Authorised Representatives have been fully trained, and receive ongoing support from Healthwatch staff. This year we strengthened our team of volunteers through targeted recruitment of young people, people from minority ethnic communities, and people with a learning disability.

Enter and View representatives meet regularly with the Healthwatch team to plan which services should be visited. Visits can be carried out in order to look at examples of good practice, as well as in response to concerns from members of the public or partner organisations.

Eccleshill Community Hospital June 2014

The visit was an opportunity to learn how Bradford Teaching Hospitals deliver intermediate care services. We focused on communication and discharge in order to feed in to Healthwatch England's special inquiry.

One Medicare @ North Street August 2014  
GP Surgery

E&V representatives wanted to follow-up on 'Invisible at the Desk' by gathering experiences of specific practices with different characteristics. This surgery was identified as an example of a small practice in an urban area.

Holycroft GP Practice September 2014

E&V representatives wanted to follow-up on 'Invisible at the Desk' by gathering experiences of specific practices with different characteristics. This surgery was identified as an example of a large practice in an urban area.

Ward 17, Bradford Royal February 2015  
Infirmary

To look at children's services with a particular focus on nutrition and hydration, which had been identified as an issue during the 'walk around' visit by young people.

Ward 4, Airedale General March 2015  
Hospital

This was a return visit to look at changes made since an Enter and View visit in August 2013.

It has not been necessary to take any further action or escalate concerns as a result of any Enter and View visits.



# Impact story

## Improving people's experience of leaving hospital

### *Eccleshill Community Hospital*



Our volunteers carried out a visit to Eccleshill Community Hospital in June 2014, to look at intermediate care services - when patients are ready to be discharged from acute hospital services but need a period of recovery and rehabilitation before they go home.

The volunteers' overall impression of Eccleshill was that it is a good unit with many positive features.

One of our volunteers Yvonne Jardine explains,

“We certainly learned that people valued Eccleshill. They were really delighted with the service there; the staff, the care, the peaceful and quiet environment.

“But there was some uncertainty, some slight criticism about the fact that they didn't feel they were being fully involved in the planning for discharge. They felt unsure about when they were going to be going home, what was being set up, who was talking to whom. They felt, both patients and carers or relatives we spoke to, that they would have liked to be better informed and more involved in that process.”

The volunteers' report following the visit made recommendations that the hospital should involve patients and carers more in making decisions about when they are ready to go home.

As a result of Healthwatch's report, the hospital piloted a new scheme; 'Ticket Home' gives a patient control of their own recovery goals, and helps them work proactively with their care team. The 'Ticket Home' acts as a visual aid to help patients and their carers work with medical staff to plan and record their steps towards being ready for home.

Hoshiar Singh, who also took part in the visit says the impact of this Enter and View visit makes him very proud,

“With the Ticket Home scheme, they get patients, carers and staff all working together at the time of discharge. And that does make a difference, it means patients and carers understand, they feel their views have been taken into account, and that nothing will have been missed.

“When we found out the Trust had taken up this scheme it was very, very satisfying. Knowing that you helped to make a difference makes you feel good, as if you've done something worthwhile.”





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## Enhancing the hospital environment for people with dementia

### *Airedale General Hospital*

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In March 2015, Healthwatch Enter and View volunteers visited Ward 4 at Airedale General Hospital, to look at the way they care for patients with dementia. Healthwatch previously visited an elderly care ward at Airedale General Hospital in August 2013 and also carried out a review of the experiences of carers of people living with dementia, published in April 2014. Healthwatch had made a number of recommendations for improvements, such as improving aspects of the ward environment, improving training for staff, and increasing the involvement of carers.

We went back to the Trust to look at the changes that had been made to the elderly care wards during a refurbishment programme and how this has impacted on patient experience.

Val Mills is an Authorised Representative, who took part in both visits,

“There were massive changes when we went to the ward on the second occasion. They had moved to a new ward in the hospital, it had been completely refurbished and the service was being delivered at a much higher level. For example, there was a room where patients could go with their visitors and actually talk with them privately. There was a huge aura of lots of new things happening, lots of new care being taken of the patients”

To follow-up on our work with carers of people with dementia, we invited a representative from the local Memory Club to come along on the visit.

Cyril Davies cares for his wife, and had previously had mixed experiences of the elderly care wards at Airedale. He was impressed by the Trust’s commitment to improving their services and involving carers,

“They were setting up a dementia garden, the decorations had improved a lot, and I think it is a good environment now for people with dementia. The sister in charge seemed to be well aware of what people with dementia are feeling, although perhaps not everything because you’ve got to live with people to really know that.

“I think Healthwatch is doing a good job in trying to keep in touch with all that’s happening with the hospital. And hopefully with the experience of carers like myself they will improve the hospital environment. I think this is needed, really needed, and the more experience I have of Margaret’s dementia, the more I’m learning every day.”

Elaine Andrews, Assistant Director of Patient Safety at Airedale NHS Foundation Trust, welcomed the Enter and View visit and report:

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**“I think it’s essential for us to listen to what carers are saying to Healthwatch, so that we can identify priorities and address them, and so that we have carers who feel confident in our care.”**



# Providing information and signposting

## Helping people get what they need from local health and social care services.

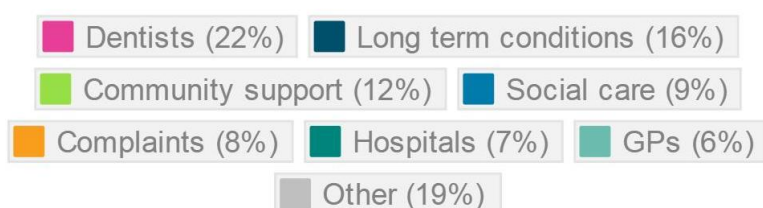
Healthwatch Bradford and District continues to provide an office-based information service, with all members of the team answering calls and email enquiries. In 2014-15 we recorded 179 requests for information. We put people in touch with the local services that they need, and provide information about sources of support and advice.

We also provide information to people about health and social care services when we carry out outreach sessions and attend public events.

Many people contact us for help to find an NHS dentist, because information on NHS choices is often out of date - listing practices as taking on new patients when in reality there is a very long waiting list. The Healthwatch team provide as much assistance as possible to people, often ringing around several practices to try and find one which will accept new patients - but often this is still several miles away.

Healthwatch are working with other Healthwatch organisations across West Yorkshire to tackle the issues around access to dentists and inaccurate information. We continue to gather people's feedback while trying to help them get the services they need.

## Requests for information: common themes





# Influencing decision makers with evidence from local people

## Producing reports and recommendations to effect change

Healthwatch Bradford and District publish reports which outline the feedback we have gathered on services and make recommendations for improvement. Our approach is to share these reports with providers and commissioners and request their response before making them public. This enables us to tell members of the public what action is being taken to address the issues they have raised.

All reports are available on our website and are shared with volunteers, Healthwatchers and other subscribers through our e-bulletins.

We have produced the following reports this year that have influenced local decision makers:

Enter and View Report on Waddiloves Health Centre	May 2014
Experiences of people affected by cancer from minority ethnic communities in Bradford and District	August 2014
Enter and View Report on Eccleshill Community Hospital	October 2014
Care for Carers: A short study of the quality of hospital care across Bradford District for carers of people living with dementia	October 2014
Data on survey of patients' experience of unplanned dental services (joint report with other Healthwatch in West Yorkshire)	January 2015
Enter and View Report on Holycroft Surgery	January 2015
Enter and View Report on North Street Surgery	February 2015
People's experiences of using Bradford Council Access Point for Adult Social Care	February 2015
Report on Healthwatch visit to the Accident and Emergency department of Bradford Royal Infirmary	March 2015

No providers or commissioners have failed to respond to requests for information or reports that we have shared with them.





## Putting local people at the heart of improving services

In addition to carrying out our own independent work, Healthwatch supports the wider involvement of lay people and volunteers in the commissioning, provision and management of local health and social care services.

We regularly advertise opportunities for people to get involved, for example as governors of local Trusts or in taking part in consultations. This information is published on our website and sent out in regular e-bulletins. We have also helped local Trusts to recruit volunteers to take part in PLACE (Patient Led Assessment of the Care Environment).

Healthwatch has also set up opportunities for members of the public to tell their stories directly to those in charge of local health and social care services. For example, in November 2014, we presented at the Bradford Teaching Hospital NHS Foundation Trust's 'Grand Rounds' meeting along with one of the people who had shared her experience for our Cancer Voices work. She spoke directly to clinicians about her experiences of cancer treatment as an African-Caribbean woman. Helping health and social care services to hear about the lived experience of the people they serve is a vital part of our work.

## Regularly feeding in to the system

Healthwatch collates all the feedback we gather from the public and routinely feeds this in to service providers and commissioners across the district. Month on month, we are the largest contributor of data to the local CCGs' 'Grassroots' system which brings together patient experience information from a number of sources.

## Health and Wellbeing Board

Javed Khan, Chair of the Healthwatch Bradford and District Board, takes up our seat on the Health and Wellbeing Board. He is supported to be an effective member with information and briefings by the Healthwatch manager and regular pre-meetings with the VCS representative. Javed has promoted the idea of joining up public engagement across the whole health and social care system. He regularly attends the Health and Wellbeing Board development sessions. A peer review of the Health and Wellbeing Board carried out in November 2014 recommended that the Board increase its involvement with Healthwatch.

## Health and Social Care Overview and Scrutiny Committee (OSC)

We have forged good links with this important committee and have presented both formal papers and contributed informally to specific agenda items where these coincide with Healthwatch issues. We have shared with the committee public feedback on home care services, the Council Access Point, accident and emergency services and formally presented our Annual Report to elected members. The committee receive all of our public reports and we have initiated a tailored bulletin for elected members. Two Healthwatch Board delegates are also, in different capacities, co-opted members of the OSC, strengthening links further.





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## Working with the CQC

We have specifically gathered feedback from the public prior to CQC inspections of two local Trusts: Bradford Teaching Hospitals NHS Foundation Trust (October 2014) and Bradford District Care Trust (June 2014). In both cases we submitted a large volume of feedback, publicised and attended listening events prior to the inspections, and took part in Quality Summit meetings when the reports were published.

We have also passed on intelligence and patient feedback to the CQC for other local health and social care providers when they have been carrying out

inspections of these services, including a number of care homes.

Healthwatch Bradford and District has not made recommendations to the Care Quality Commission (CQC) - either via Healthwatch England or directly - to undertake themed or responsive investigations.



## Case study: Duchess Gardens

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### Visiting a care home to gather experiences

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In May 2014, Healthwatch was approached by the CQC about a local residential and nursing care home, Duchess Gardens in Bingley. The CQC had carried out an inspection but felt they did not have an accurate picture of residents' experience of this large care centre. They asked if we would be willing to visit the care centre and talk to residents about their experiences and views of the service. We agreed that as an independent organisation, we might usefully add to the picture of resident and carer feedback. The manager of Duchess Gardens welcomed our visit and was keen to hear more feedback from residents and their families.

A group of Healthwatch volunteers and staff visited the care home in July 2014,

and shared our findings with the CQC and the provider. Although we heard some positive feedback, we raised concerns about the number of experienced staff on duty, staff training and induction, poor support for some people to eat and drink enough, and a lack of interaction or activity for some residents. Healthwatch involvement added to the regulator's understanding of people's views.

The CQC returned to inspect the care home again in January 2015 and rated it as inadequate, with many of their findings mirroring what Healthwatch had reported. The CQC have told the care home what action it must take to improve and the local authority are closely monitoring the situation to ensure that residents are being cared for safely.



## Escalations to Healthwatch England

Healthwatch Bradford and District made one formal escalation to Healthwatch England about dentistry issues, problems which have been identified across West Yorkshire. Healthwatch England met with NHS Choices in March and raised our concerns about poor information about available NHS dentists - a task force is being set up to improve the quality of information. Healthwatch England have also raised our concerns about unequal access to NHS dentists with NHS England. We continue to work locally as a West Yorkshire group of Healthwatch organisations and nationally on these issues.

We have also contributed to a number of national pieces of work by Healthwatch England, for example:

- Special Inquiry on Unsafe Discharge
- Access to Primary Care report
- Guidance on involving people with learning disabilities

Healthwatch Bradford and District shares all its reports with Healthwatch England and the national network of local Healthwatch. As one of the first Healthwatch to adopt the new CRM database, we ensure that local intelligence is routinely shared with Healthwatch England in order to contribute to the national picture.

## Quality Accounts and the Care Quality Working Group

A Quality Account is a report about the quality of services of an NHS healthcare provider, produced by the provider itself. Healthwatch has the right to scrutinise and comment on these reports and our commentary has to be incorporated in each Quality Account and made public. This work is carried out by our expert volunteers in the Care Quality Working Group, supported by the Bradford Resource Centre. This year they have studied and formally commented on Quality Accounts by Bradford Teaching Hospitals NHS Foundation Trust, Airedale NHS Foundation Trust, Bradford District Care Trust, Yorkshire Ambulance Trust, the Yorkshire Clinic and the Yorkshire Eye Hospital. Members of the group have also contributed to the Joint Strategic Needs Assessment Group for the District, giving the public perspective on specific health and social care needs and services.





# Impact Stories

## Customer care training for GP receptionists

### *Bradford City and Bradford Districts Clinical Commissioning Groups*



Last year, Healthwatch gathered views from people across the district about their experiences of GP practices and produced a report called ‘Invisible at the Desk’. This year we’ve been pleased to see that report is now resulting in some real improvements for patients across our district.

‘Invisible at the Desk’ made a number of recommendations; one of these was to provide better training for reception staff in GP practices, as some patients had reported poor experiences and feeling that sometimes receptionists acted as a barrier to getting the appointments they needed.

Dr Andy Withers, Clinical Chair of Bradford Districts Clinical Commissioning Group says the Healthwatch report influenced them to take action,

“Invisible at the Desk certainly resonated with us as GPs; we recognised that patients had a problem accessing GPs. Clearly we wanted to improve our services but it was very difficult to know what to do about it.

“It was suggested that we invest in training for our receptionists, to try and help them see the problem from the patients’ point of view. Nearly every practice in the Bradford City and Bradford Districts CCGs has taken part in the training and receptionists generally have been very positive about it.”

The two CCGs have now rolled out the courses across the district. They aim to help staff ‘make each patient feel valued and at ease’.

Wendy Haines is a member of the Grange Practice Patient Participation Group, and she says she noticed a real difference when the training was introduced,

“By having this training, I think now that they do come across softer. People are coming in with a smile on their face and going out with one; I’ve noticed a big change.”

Following on from the ‘Invisible at the Desk’ report Healthwatch Bradford and District will continue to be involved in the national network’s approach to addressing the issues in primary care, focusing on the needs of particular communities and pushing for changes to the way services are designed and run.



## Accident and Emergency

### Bradford Teaching Hospitals NHS Foundation Trust

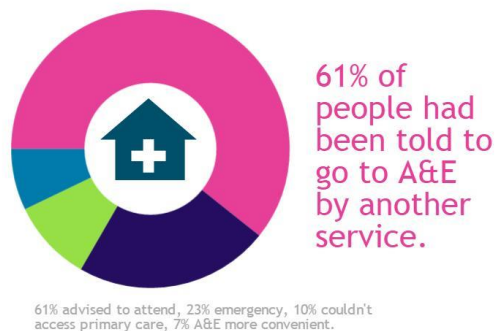
In December 2014, the Healthwatch staff team made a return visit to the A&E department in Bradford, spending a twelve-hour shift observing how the service was running and talking with patients and carers about their experience. Many people were positive about their experience, particularly in relation to the clinical treatment and staff attitude; however we did see significant problems with waiting times and a lack of information for patients about their progress through the department.

Our full report and the Trust's response are published on our website. The Trust welcomed our feedback and has incorporated many of our recommendations into their plans for improving and refurbishing the department during 2015.

**“This has been a useful piece of patient and carer feedback. We are committed to making improvements and this is an excellent example of collaborative work.”**

Juliette Greenwood, Chief Nurse  
Bradford Teaching Hospitals NHS  
Foundation Trust.

The CQC have also returned to visit the Trust, and their findings on A&E highlighted similar issues that Healthwatch identified around staffing levels and communication. We continue to work positively with the Trust to help them understand patient experience and make improvements to their service.





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# Our governance and decision-making

## Our board

Our Board sets the strategic direction for Healthwatch, and ensures our work is driven by the priorities of local communities. Members are volunteers drawn from a range of different backgrounds and communities, representing service user groups or partnerships from across the district.

- **Chair - Javed Khan**
- Representative of Airedale, Wharfedale & Craven CCG Patient Network - Gill Bowskill
- Representative of Bradford District CCG Patient Network - Susan Crowe
- Representative of Bradford City CCG Patient Network - Mohammad Shabbir
- Service user from Strategic Disability Partnership - Paul Anderson
- Service user from Older People's Partnership - Pam James
- Service user from Learning Disability Partnership - Surekha Thind
- Service user with experience of mental health services - Trevor Ramsay
- Service user from Adult & Community Services - Emmerson Walgrove
- Carer drawn from the Carers' Partnership - Julie Bruce
- Delegate of the Health and Wellbeing Forum - Mashud Haque
- Delegate of the Young Lives Forum - Kerr Kennedy
- Delegate of the Equalities Forum - John Samuel
- Health and Social Care academic - Professor Gerry Armitage
- KIVCA Trustee - Isobel Scarborough

All members of our Board have signed a Code of Conduct, and they work in partnership with the staff team and the KIVCA board to oversee the performance of Healthwatch Bradford and District.

## Our host organisation

The contract for Healthwatch Bradford and District was awarded by Bradford Council to Keighley and Ilkley Voluntary and Community Action (KIVCA), this contract runs until March 2016 with the option to then extend or retender the contract.

The KIVCA board is accountable for the delivery of the contract and has responsibility for employing staff.





## How we involve lay people and volunteers in decision-making

Decisions made by Healthwatch Bradford and District are rooted in the experiences of the communities we serve; our priorities for work are driven by the evidence we are continually collecting from the public.

Healthwatch staff and board members have held joint planning sessions to consider which health and social care services we will cover in our work, and how to undertake these activities.

Members of the board sometimes establish smaller steering groups to consider particular issues, such as establishing principles for future income generation, and looking in detail at financial decisions.

Volunteers are routinely involved in helping to make decisions about our work. For example, Enter and View volunteers meet with staff to jointly consider which services to visit and to establish plans for conducting the visit. Volunteers who carry out the visits draft the report and decide on recommendations to be made.



*Photo: Andrew Jones,  
Manager of Healthwatch  
Bradford and District*



# Financial information

The contract value for the second year of Healthwatch Bradford and District was £308,692. This was £28,308 less than in year 1 - an 8.4% cut in the contract value. This budget cut was due to the overall financial pressure on Bradford Council and the need for them to make savings in all areas. The Council were entirely satisfied with our performance, monitoring and reports.

Underspend from year 1 (2013/14) was £5,220. This was 1.55% of the contract value for year 1; the Council did not permit us to carry this forward into year 2 and deducted it from payments to Healthwatch. We generated a small amount of income from training in 2014/15, and we are developing plans for increasing income generation in 2015/16.

INCOME		£
Funding received from local authority to deliver local Healthwatch statutory activities		303,472
Additional income		250
<b>Total resources available</b>		<b>303,722</b>

EXPENDITURE		
<b>Staff costs</b> <i>Salaries, NICs, pension, payroll</i>		185,274
<b>Recruitment &amp; Training</b>		2,172
<b>Travel</b> <i>Staff travel expenses &amp; mileage</i>		3,754
<b>Mobile phones</b>		1,783
<b>Business costs</b> <i>Offices, admin support, printing, landline, stationery, postage</i>		52,149
<b>Management fees</b> <i>KIVCA management costs, accountancy, insurance</i>		18,522
<b>IT</b> <i>Equipment, software, website, CRM system</i>		2,739
<b>Communications</b> <i>Communications &amp; promotional equipment and materials</i>		4,021
<b>Events, workgroups &amp; campaigns</b> <i>Engagement activities, focus groups, outreach, public events</i>		9,120
<b>Board Costs</b>		8,120
<b>Volunteers</b> <i>Expenses, recruitment &amp; training, Care Quality Working Group</i>		9,212
<b>Enter and View</b> <i>Training &amp; authorised representatives' expenses</i>		1,709
<b>Total expenditure</b>		<b>298,574</b>
<b>Balance brought forward</b>		<b>-5,148</b>

The Council has agreed that this underspend can be carried forward into year 3.



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## Making this report public

We will be making this annual report publicly available by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Groups, Overview and Scrutiny Committee, and our local authority. The report will be formally presented at our AGM on 9<sup>th</sup> June 2015.

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

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