



Annual Report
2016/17

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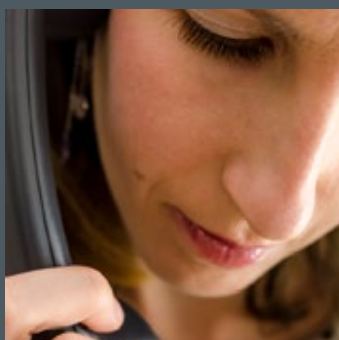
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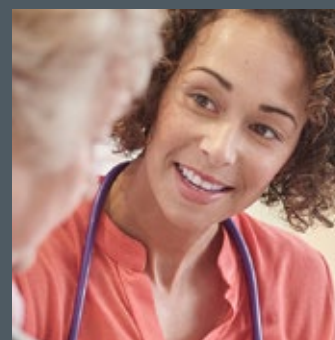
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If you would like this report in another format or language, please contact us on 01449 703949.



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Welcome

We are Healthwatch Suffolk. Our aim is to shape, influence and improve health and social care services in Suffolk by listening to your experiences and making them known in the places that matter. In this report, we will showcase all of the work we have been doing to ensure local services are shaped by your stories of care in the county.

Welcome from our Chair (Dr. Tony Rollo) and Chief Executive (Andy Yacoub)

This year has seen us further strengthen our role and status as the independent voice of the people of Suffolk in matters concerning health and social care. It has also been a year in which we have recruited new Directors to our Board and significantly increased our 'reach' across our county.

We have, through our community and online/social media presence, helped to generate record numbers of stories from people using our health or social care services. These stories are hugely important to us. It is our job to use them to influence commissioners and providers of care, to collaborate with key decision makers, and to report on the changes that we help to bring about.

Our engagement with stakeholders has become closer and more collaborative. This helps us to obtain more experiences from local people and to effect improvements in the care being provided to our local residents.

On behalf of our Board of Directors, we would once again like to thank our staff, who quite simply excel at what they do. They are truly passionate about wishing to bring about the best possible outcomes for the people of Suffolk. We would also like to thank our volunteers, without whom we could not possibly hope to reach the thousands of people we have had contact with over the year. Our Directors are themselves volunteers and as such our message of thanks is extended to our Board too.

Our excellent team of Community Development Officers continue to actively engage people at events, within GP surgeries, dental practices, hospital wards as well as community venues. In this report, you can read about how those views have been used to improve people's care.

Our focus for the future is to ensure that people's voices are not lost as health and care leaders drive forward with their agenda to keep services sustainable. We want people to know that their views will be used to influence these plans.

A little something extra...

Look out for our green video, report download and digital content icons throughout the report. Click on them to launch extra content on your smartphone, tablet or computer.



Our year...



14 reports produced to influence local services (see from page 26 and page 42).



Over **400,000** Twitter impressions and **442** new followers.



Our reports explore peoples' views of services from maternity to diabetes (see page 42).



We have visited **eight** services to talk to people about their care (see page 26).



83 volunteers have helped us to reach local people and to complete various tasks (see page 75).



We engaged people at **1,000** events, meetings and groups across the county (see page 10).



Over **170** people signposted to local services for support (see page 34).



4,635

Responses to our surveys and projects (see page 42).



Comments logged onto our Feedback Centre from people using services.



01

Your views on
local services

Out and about

Our core role is to find out what local people think about health and social care services in Suffolk. That means that we must be present within communities to let people know about us and obtain their experiences of using local services.

We have a team of three Community Development Officers (CDO) and one Community Development Manager. They have been active this year attending many events, meetings and community groups across the county.

Each team member has a nominated geographical area (determined by the county district borders) within which they operate. This means that communities have a named person through which they can link into our work or receive support.

The team:

- Recruits and trains volunteers.
- Encourages participation in our research and projects.
- Develops relationships with key partners who work in the voluntary, private and statutory sectors.
- Develops mutual partnerships with organisations that support our work.
- Signposts people to information that can help them to get the best out of local services.
- Encourages people to become members.
- Raises awareness of Healthwatch Suffolk.
- Obtains feedback from communities.

Our coverage map on page 8, shows where we have visited to talk to local people about Healthwatch Suffolk and gather their views on services in Suffolk.



#Beans4Stories



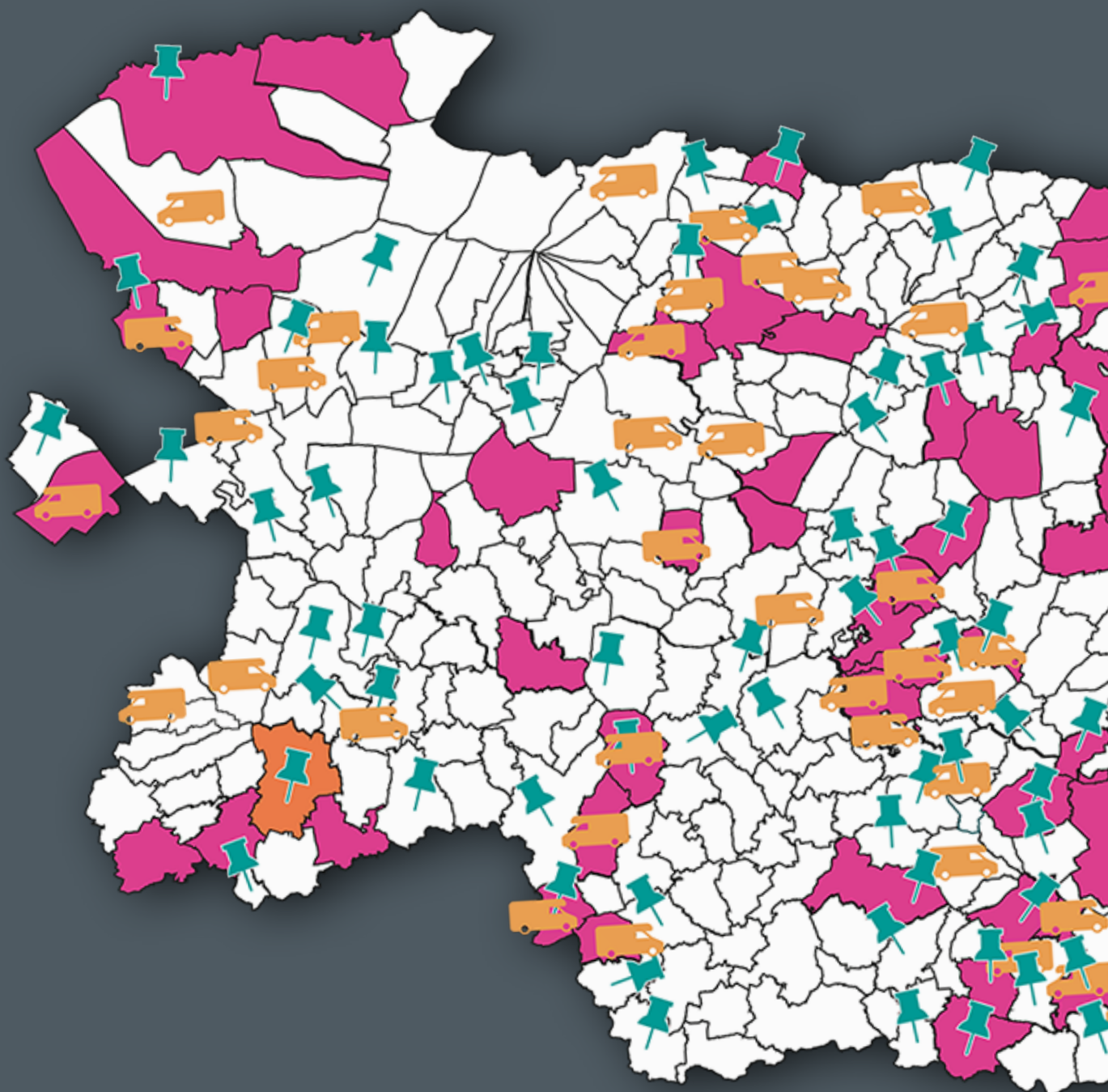
We gave students and staff attending the University of Suffolk Freshers Fair a can of baked beans (a student staple) for a selfie and a comment about what they have “bean” thinking about using local services. Here’s some of the photos that were taken.

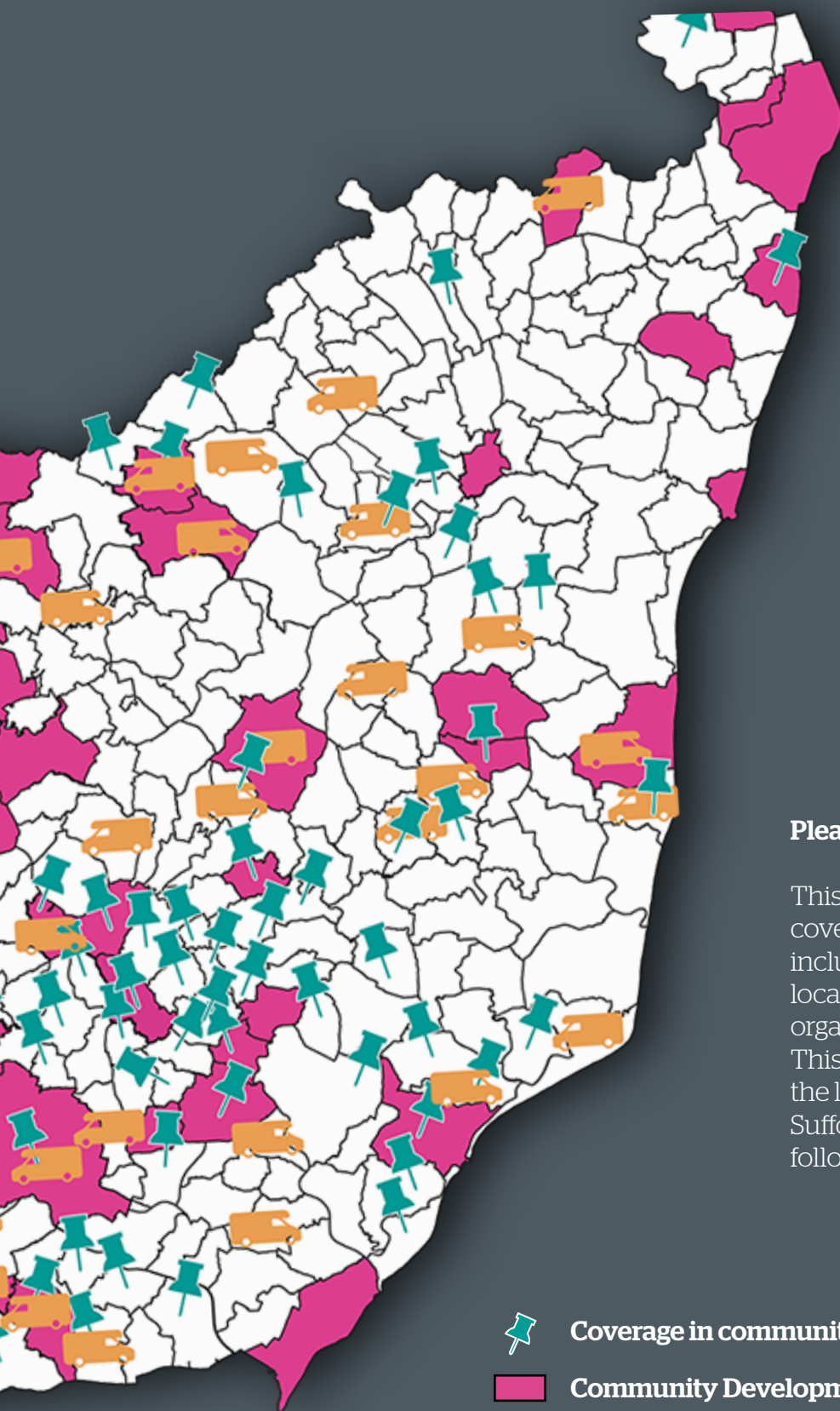


Our reach across the county...

We have created the map below to show the extent of our reach across the county. It includes coverage achieved by our Community Development Team, features in local newsletters and Rural Coffee Caravan visits (see page 73).

In 2017/18, we will use this information to help us identify areas that could be targeted to improve awareness of Healthwatch Suffolk and ensure that all communities have the opportunity to inform our work and feedback about their local services.





Annual Report 2016/17

Please note:

This map includes known coverage only. We have not included coverage achieved in local newspapers or in other organisations newsletters. This map does not include the locations of Healthwatch Suffolk members or social media followers.

-  Coverage in community newsletters
-  Community Development Team Activity
-  Rural Coffee Caravan events



Who we spoke to...

Our team has worked hard to reach as many people and communities as possible throughout the year. By reaching out into local communities, we hope to encourage more people to share their views with us.

Our team attend large events to talk to the public about how we can make a difference. This has included the Suffolk Show and the Indian Summer Mela.

We are also expected to engage with some specific groups as follows:

Young people under the age of 21

In addition to our “My Health, Our Future” project work (see page 88), we have spoken with young people across the county. Such engagement opportunities have included:

- Talking to patients and parents attending for children’s outpatient appointments at the Ipswich Hospital
- Sharing information about us with local children’s centres
- Talking to family carer groups
- Talking to the Level 2 youth project in Felixstowe
- Market stalls at the University of Suffolk Freshers Fair and also its careers fair
- We spoke to families attending groups at Home Start centres

Information about us is also available to young people who visit The Source website managed by Suffolk County Council.



Watch: People shared their experiences of using NHS services with us at the Suffolk

People over the age of 65

This year we have visited services that provide care to older people (see page 26). Some examples of places our team has reached older people for their views are as follows:

- The Kettle and Fish Cafe in Sudbury assisted us to collate views about changes to blood tests at the Sudbury Community Health Centre (see page 68)
- Market stalls at the Rural Coffee Caravan Golden Age Fair events
- Talking to people at a variety of coffee mornings across the county
- Talking to people at the Horizens Club in Woodbridge
- Talking to people at Age UK Suffolk Forget Me Not groups

In addition, we are involved with the continued development of Dementia Action Alliances across the county including in Hadleigh, Stowmarket, Bury St Edmunds and Felixstowe. They bring together regional and local members to improve the lives of people with dementia in their area.

Please see our section about working with others (from page 58) for more examples of how we have engaged with older people in the county. This includes how we have helped to bring about a new Dementia Forum (see page 24) and our partnership work with the Rural Coffee Caravan (see page 73).

Vulnerable people

Please see details of work completed by our Mental Health Focus Group and Black and Minority Ethnic and Diversity group throughout the year from page 20. Other examples of engagement with vulnerable people include:

- We visited Mid Suffolk Axis, which is a day service for people living with disability
- We attend all Disability Forums in the county at which health and social care is a standing agenda item
- We attend various groups that have an interest in supporting people with specific conditions. This includes mental health peer support groups, Upbeat Heart Support, Success After Stroke in Great Cornard and Suffolk Hearing Advisory Service groups.
- Attendance at Public Health Suffolk Recovery Forums, which are for organisations that support people to recover from various forms of substance abuse.
- Attendance at Domestic Abuse Forums in Ipswich and Waveney.



Our CDO team attended 1,000 events, meetings and activities in 2016/17.

We influenced a major decision by those responsible for planning services in the county not to remove Marginalised and Vulnerable Adult services in the county (see page 79) and are now shaping how that service might look in the future.

We have also supported the development of “Suffolk Lives Matter”, which is the campaign to reduce the number of people that end their life through suicide in Suffolk (see page 63).

People that live outside of Suffolk but that use our services

We work closely with other Local Healthwatch and in communities close to county boundaries to obtain views from people that use our services. We also meet people from outside of Suffolk when engaging within our hospital services.

Our work to obtain views on ambulance services from across the east of England is an example of partnership working with other Local Healthwatch (see page 56). The feedback obtained was used to inform the first ever inspection of the East of England Ambulance Service NHS Trust in April 2016.

Obtaining and using your views about services

We make sure that the patient voice comes through loud and clear to the professionals who make decisions about health and social care in this county. That is why our website includes an online feedback platform.

You can visit to find local NHS and social care services, read what other people think about them and to leave feedback.

The Healthwatch Suffolk Feedback Centre is accessible using a variety of devices including mobile phones, laptop/desktop computers and tablets. That means you can have your say about local care (good or bad) wherever and whenever you can find the time.



Tell us about your experiences today:

www.healthwatchsuffolk.co.uk/services



We have received **2,984** comments from members of the public.



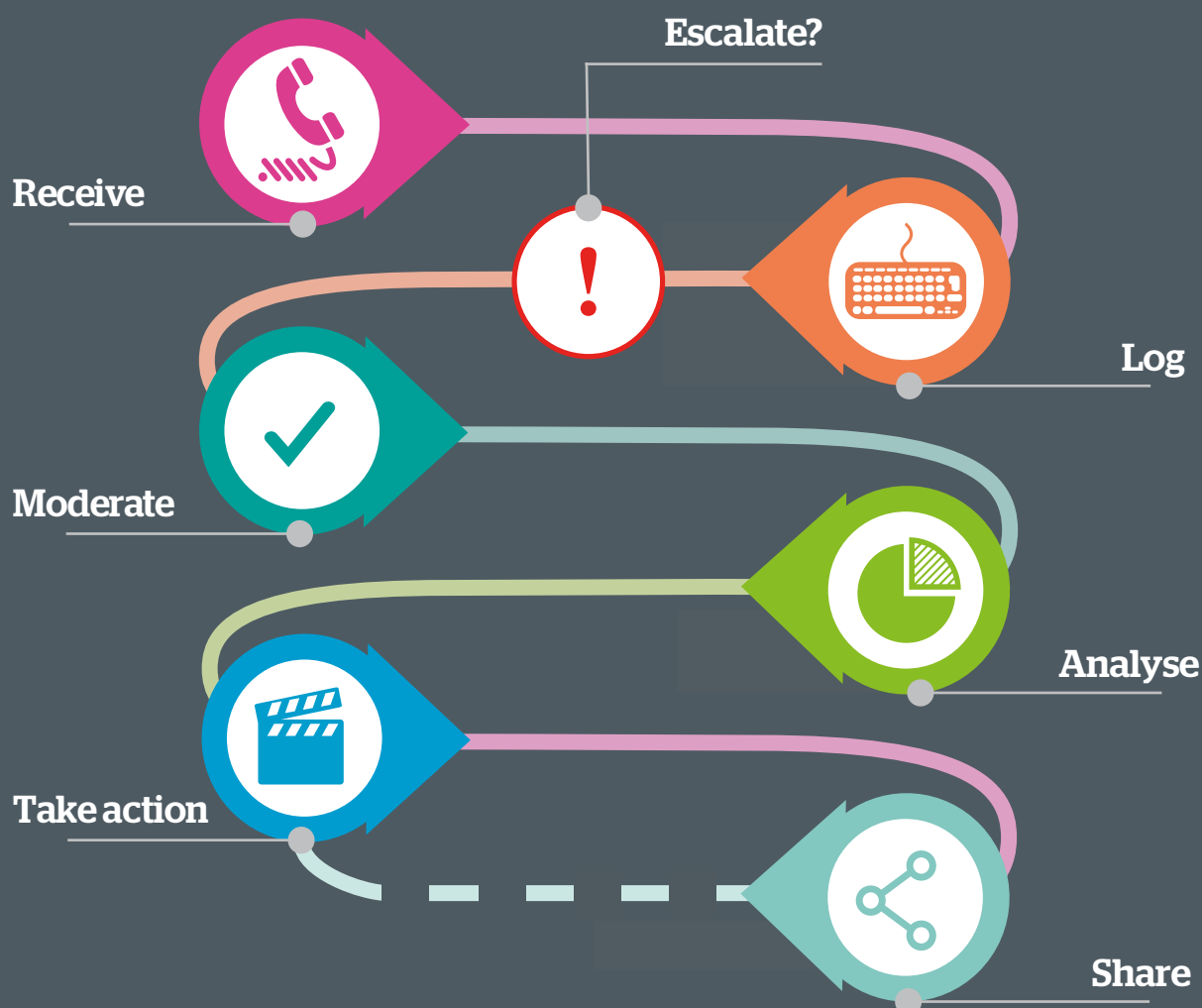
We have received feedback about **376** different health and care providers.



4,635 people have responded to our surveys.

Our feedback process

We have defined a clear process for obtaining and using feedback from the public about their local health and social care services. This can be broken down into six stages as described in the following statements.



Receive: Our goal will always be to make it as easy as possible for people to give views and ensure that they can share their experiences using a variety of methods such as by freepost, telephone, on social media or by using our Feedback Centre (our Information System).

Log: All feedback will be logged onto our Feedback Centre by our staff within a reasonable period of time or directly into our Informatics Dashboard. All comments are logged verbatim.

Review/Moderate: All feedback will be reviewed by our Information Team within five working days wherever possible. This process is important because it enables us to check that the feedback published on our website complies with our Terms and Conditions.

Any feedback that does not comply may be made available to our Informatics Dashboard without being visible to the public. Our Operations Manual offers more detail in respect of feedback moderation, process and guidance.

Escalate: Any comments that staff identify as a safeguarding concern are immediately flagged and acted upon according to local procedures. This includes communication with key partners such as the Care Quality Commission and the Suffolk County Council Quality Monitoring Team.

Analyse: Once logged, the feedback is available to theme and review within our Informatics Dashboard, according to criteria we set.

Take action: Four actions can be taken as follows:

1. **Feed into current issues:** Feedback will be used to inform current issues of interest to Healthwatch Suffolk such as our Enter & View plan of visits or specific research projects.
2. **Initiate further investigation and/or establish new work plan items:** Feedback might trigger new areas of interest or research.
3. **Feedback to commissioners/providers:** Our ultimate aim is to provide authoritative, evidence based feedback to system leaders and organisations responsible for commissioning or delivering local health and social care services. This will be facilitated through access to our Informatics Dashboard and delivered in research reports.
4. **Feedback to service users:** We will feedback on all actions taken and outcomes achieved to ensure continued involvement from local people. As a part of this process, where possible, we will inform relevant persons about outcomes that may have been generated from their individual involvement.

Share intelligence: We can inform local and national health and social care agendas by contributing intelligence to specific networks and bodies.

- **Local Authority Health Scrutiny Committee:** We can refer any issues of concern to the Health Overview and Scrutiny Committee and we are then kept informed of progress and outcomes.
- **Health and Wellbeing Board:** Healthwatch Suffolk is, by statute, a full and equal member of the Health and Wellbeing Board. Our representative is involved in all of the Board's processes such as setting priorities for the Health and Wellbeing Strategy, and ensuring that people's views on health and social care services are heard.
- **Healthwatch England:** We can alert Healthwatch England to concerns about specific care providers so that it can escalate concerns about health and social care services raised by local Healthwatch to the Care Quality Commission. Healthwatch England will provide advice to the Secretary of State, NHS Commissioning Board, Monitor and the English local authorities; and they must have regard to that advice.



Share your story with us:

We can use the things that people tell us about local NHS and care services to improve them now and for the future. Visit www.healthwatchsuffolk.co.uk/services to feedback now.

How do we tell people about our work?

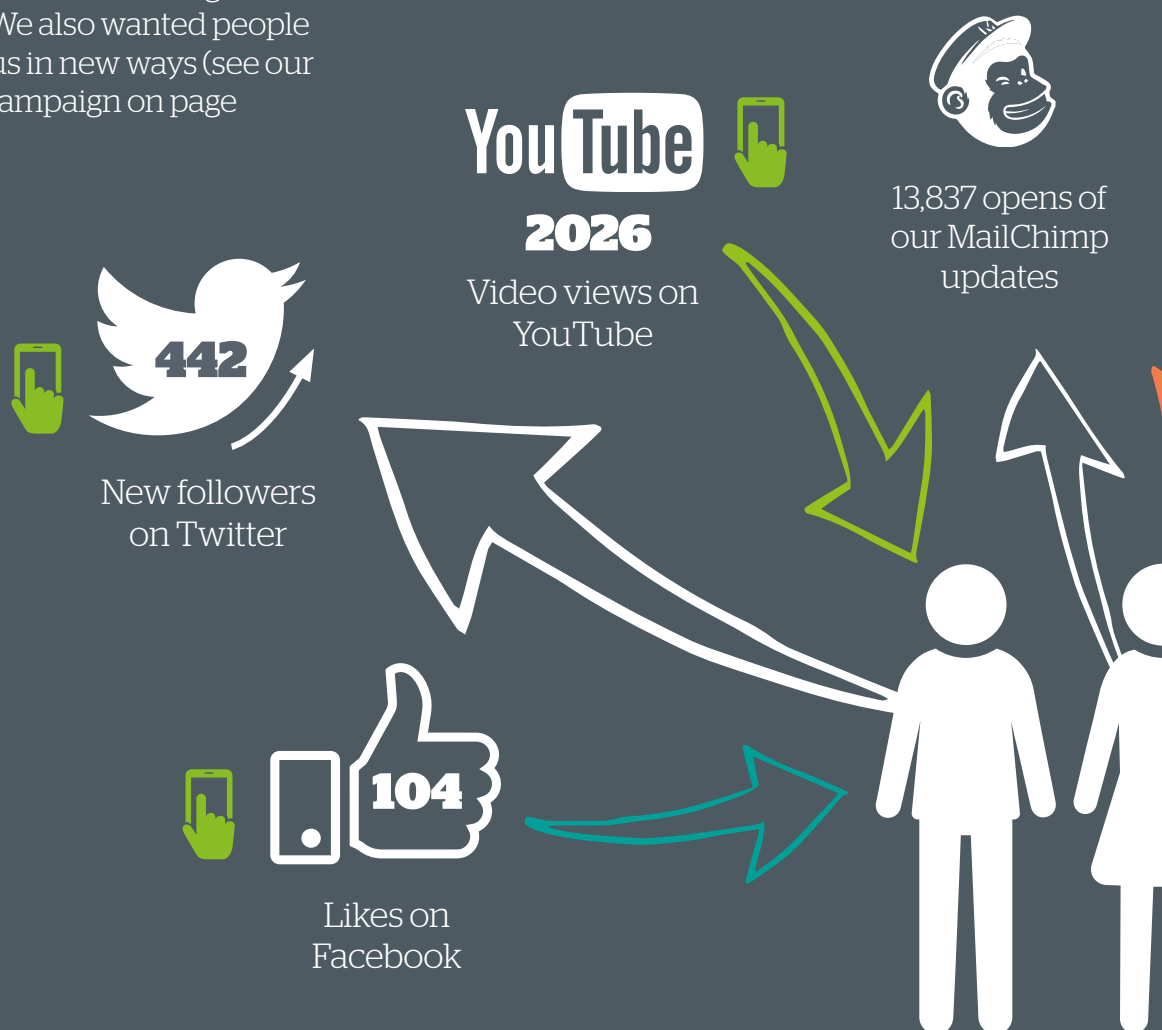
Feeding back to people about our work and impact is essential to keeping them engaged in improving health and social care services with us.

We know that not every person likes to communicate with us in the same way. That is why our Communications Strategy includes many channels through which we feedback on our work and encourage people to share their views on local services.

This year, we revised our approach to using social media because we wanted to make sure that we were using the right platforms. We also wanted people to interact with us in new ways (see our NHS Selfie Star campaign on page 18).

We keep track of various metrics in order to understand the success of our communications and are pleased to report that the majority of these have exceeded or are equal to their equivalent figures for 2015/16. All channels have seen continued growth.

Please see our infographic below for some highlights.



Follow us

There are a variety of ways to keep in touch with us and to feedback about your experiences of NHS and social care in Suffolk. Follow us on Twitter (@HWSuffolk), Facebook (/healthwatchsuffolk) and Instagram (@healthwatchsuffolk).

You can also sign-up to become a member of Healthwatch Suffolk (see page 95). That will mean that you receive our regular email updates and quarterly newsletter. Being a member also gives you a say in how we work and make decisions.



1,623
link clicks



Four newsletters
produced and
circulated



Newspaper
features



70,043 pageviews
of our website
content

Accessible Information

We are committed to providing information in multiple formats so that nobody is prevented from accessing our service.



In 2016/17, we retained the Browsealoud accessibility tool on our website. It includes a range of functions that help people to access our information.

- Text-to-speech enables people to listen to our website content.
- Translation technology enables people to translate our web pages into other languages.
- Text magnification helps users with visual impairments.
- An MP3 generator converts text to audio files for offline listening.
- Screen mask blocks on-screen clutter.
- A page simplifier removes content for easier reading.

In addition to Browsealoud, we produce information in a range of formats, including easyread and large print. Translated materials are available on request.

We want people to tell us about experiences in their own way.

During the year, we revised our approach to social media and launched our Instagram account (@healthwatchesuffolk).

As part of this, we asked people that have visited NHS services to share their story and a selfie with us using the tag #NHSSelfieStar.

It has been a chance for people to tell us what is good about their care, which is important because we know that there is great care

in the county and that should be celebrated.

So far, over 40 people have shared their story and we love to read them. You can see some of the images below. To see the full selection, please visit our Instagram account:

www.instagram.com/healthwatchesuffolk



Take it, tell it and share it with us....



"I couldn't have been happier - everyone I came into contact with was so kind and patient. The staff at Martlesham Ward were like they enjoyed us and they made us very comfortable!"



"I was excited about finally getting out of pain. Gallstones have been a real nightmare. The staff on the day care were fantastic, along with the surgeon and the rest of the team who were involved. I cannot fault the care I was given."



"The physiotherapist helped my stroke, and I thank them for their hard work and to their professional."



was a day of two
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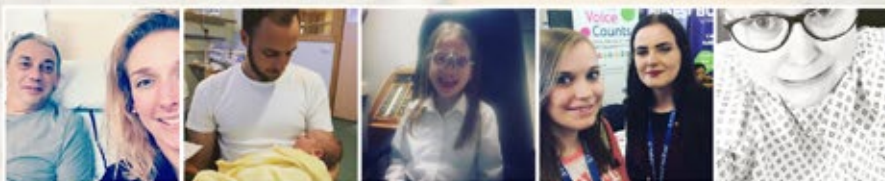


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Share it

#NHSSelfieStar your way...



Our sub-groups

Our BME and Diversity Sub-Group

Our BME and Diversity sub-group is a forum for sharing information, networking, and gathering feedback from different communities about local health and care services. A range of voluntary organisations are members as well as statutory partners including acute hospitals, Clinical Commissioning Groups and the mental health Trust.

People who do not speak English as a first language may benefit from additional support after our group encouraged health decision makers to pre-empt peoples need for support prior to their contact with secondary health care services.

After a group discussion, a representative from the Ipswich and East Suffolk Clinical Commissioning Group said they would encourage GPs in Suffolk to record the need for language support as a part of their referral letters to consultants.

Members of the group enjoy regular meetings in which they have the opportunity to discuss important issues and to learn of local support and events

they may not hear of otherwise. For example, two individuals have joined the Procurement Panel for a new Peri Diagnosis Dementia Service on behalf of the Alzheimer's Society. This opportunity was originally promoted at a meeting of this sub-group.

This year has also seen the chair of the group and our staff lead deliver a presentation about our work to delegates from Europe, the East of England and Suffolk at the European Local Authorities Integration Conference held in Ipswich.

The group continues to support the Thalassemia and Sickle Cell Support Suffolk group and its aim to improve the services available to people attending local hospitals. This has included a formal launch of this important network in October, which was well attended with stands from a variety of local support organisations. Dr. Kofi Anie from the Sickle Cell Society UK was the guest speaker.

A number of interesting talks have been arranged to put people in touch with information about ongoing work to engage diverse communities in the planning of local care. This is something that is beneficial for local communities



We bring people together to shape and improve services

but also for health and care professionals attending the group. This has included:

- Shama Kanwar of Cambridgeshire and Peterborough Clinical Commissioning Group, who is leading on a NHS England funded Dementia Pathway Project exploring cultural considerations specifically within South Asian and travelling communities.
- Jane Carpenter (Clinical Outreach Specialist Nurse for St Helena Hospice), who works with marginalized communities and was able to share knowledge of how best to engage with some of the most vulnerable groups and communities.

Looking ahead: Our Small Grants Scheme

In 2015/16, we reported about our Small Grants Scheme through which community groups and organisations could apply for funding to support the development of their efforts to engage diverse communities and obtain feedback about their experiences of health and social care services.

Seven projects were chosen to receive funding. The final report summarising each of the chosen projects will be published in the summer of 2017.

In 2016/17, our Black and Minority Ethnic (BME) Group have been working in partnership with the Suffolk Co-production Network (SCONE) Group to launch a second joint Small Grants Scheme.

The aim will be to fund projects in west Suffolk, east Suffolk and Waveney that reach out and work with BME Communities with a focus on disabled people and older people. We want to work with communities and groups

to understand what we can offer them and how we can work better with those communities in future.

Look out for more information on our website during 2017/18.

Our Mental Health Focus Group (MHFG)

Our Mental Health Focus Group continues to meet on a roughly monthly basis and continues to attract a good mix of senior Health and Social Care professionals, service users/carers and service user related organisations. The group facilitates a dialogue between all of these groups as a means to bring about improvement.

During the year, we asked people about how well the group was working. People shared that the range of issues tackled by the group had become too great, leading to an over pressured agenda. It was therefore decided that the group should focus primarily on a scrutiny role for Mental Health, leveraging its unique attendance of senior professionals and service users to address strategic issues with mental health service decision makers.

Items requiring extended presentations and discussion are now left to other Forums or specially convened meetings. One example of this is the establishment of a new Dementia Forum for the county. You can read more about this important work and how we have helped to bring it to reality from page 24.

The groups main focus has been on monitoring and seeking improvements to the performance of Norfolk and Suffolk NHS Foundation Trust (NSFT) in key areas relating to its re-inspection by the Care Quality Commission in July 2017.

In addition, the group continues to challenge organisations that make decisions about mental health care (providers and commissioners) to address gaps in service provision identified by service users and carers. It is also influencing NHS leaders to develop viable methods of co-production with service users and carers in order to impact the development of services in their formative stages.

You can visit our website for a description about what co-production means:

www.healthwatchsuffolk.co.uk/about-us/focus-on/

Finally, the group has also been attempting to hold commissioners to account on the delivery of Parity of Esteem for Mental Health services in Suffolk. This means addressing the significant gap that exists between funding for physical health care and mental health care.

Norfolk and Suffolk NHS Foundation Trust

Last year, joint work between Healthwatch and Suffolk User Forum (SUF) identified that key problems, impacting both Access and Assessment and all the stages of Care for service users, were related to poor continuity of care and gaps in service provision. While NSFT has accepted the general validity of these messages, and continues open and transparent dialogue with the group regarding their resolution, improvements remain a work in progress.

Recent feedback continues to highlight that some service users continue to suffer poor risk assessments, inconsistency in assessments, inappropriate assessments (even diagnoses over the phone) and

poor discharge planning. Service users also regularly flag the need for a properly designed care pathway for people with Personality Disorder – the lack of which causes not only unsatisfactory outcomes for those people but burdens the NSFT system with the pressure of continually unmet needs.

On the plus side, NSFT are generally positive on co-production working and developments at the Recovery College and the use of targeted workshops will hopefully provide a good basis for future progress.

NSFT are now also actively developing a Personality Disorder Strategy, recognising that the latter could aid the efficiency of their overall service provision. Three workshops involving people with ‘lived experience’ of Personality Disorder have recently been convened.

Commissioning

At the outset of the period, the active involvement of commissioners in co-production working on mental health with service users and carers was largely confined to the transformation of Child and Adolescent Mental Health Services (CAMHS).

Work towards shaping the Adult Mental Health Strategy had stalled at the initial consultation stage with commissioners failing to develop adequate methods for continuing co-production with service users and carers.

By the end of the period, however, after sustained pressure from Healthwatch, some tentative progress has been made. Notably there have been two workshops held, led by commissioners from both Suffolk County Council and the Clinical Commissioning Groups, involving service

users and carers in shaping plans for a Crisis Cafe or Safe Haven.

A workshop has also been held, with the involvement of commissioners and service users, to review the workings of NSF'T's Access and Assessment service and Integrated Delivery Teams. Follow-up Task Groups involving service users are planned.

The key for the future is whether such co-production working is sustained and developed by commissioners and this will be a major area of ongoing scrutiny for the Mental Health Focus Group. Suffolk County Council, under the current lead Commissioner, has been more supportive of co-production working with a series of workshops being convened at their request during the period by SUF on the future of Sheltered Housing.

Parity of Esteem has been a major area of concern during the period with NSF'T failing to receive a commensurate uplift for 2016/17. The group requested and received figures from the CCG Chief Officer that seem to show that Parity of Esteem was achieved overall with the extra money flowing to the approximately one third of the overall Mental Health budget that apparently lies outside NSF'T.

The full breakdown of how this latter portion of the budget is allocated is not clear however and we continue to press for greater detail. The good news is that NSF'T are receiving PoE funding in 2017/18.



Norfolk & Suffolk NHS Foundation Trust has greatly valued the work Healthwatch Suffolk has undertaken over the last year in representing the views of the citizens of Suffolk on several important areas of our mental health services. This feedback has played a crucial role in the development of our services and has been shared widely with our workforce to support improvements in the way we provide services. We are fully committed to our partnership with Healthwatch Suffolk and look forward to building on our strong relationships, in the coming year, to improve the quality and experience people with mental health difficulties have when in contact with the health and social care system in Suffolk.

Peter Devlin, Operations Director Mental Health and Learning Disabilities (Norfolk and Suffolk NHS Foundation Trust and Suffolk County Council)



A new Dementia Forum for Suffolk

During the year, we have been able to bring about the launch of a new Dementia Forum for Suffolk. Like our Mental Health Focus Group, this new forum will aim to facilitate a dialogue between mental health professionals and service users/carers as a means to bring about real change in the way that dementia support is provided in Suffolk. It will:

- Have a wide membership and improve communication
- Consider and inform effective data sharing e.g. Joint Strategic Needs Assessment
- Influence and monitor Suffolk's Dementia Strategy and its plans
- Report to the Suffolk Health & Wellbeing Board
- Provide information to the Health & Overview Scrutiny Committee

Whilst this forum will not be directly coordinated by Healthwatch Suffolk, we have been instrumental in sourcing funding from Suffolk Community Foundation (£1,000) that will be provided to LimeSkills CIC to run and facilitate the forum for the next 12 months.

We have also assisted the forum to source its first independent co-chair, which will be Pamela Chappell who was Suffolk Community Healthcare's Director of Nursing, Therapies & Governance. A person with responsibilities for planning services in the county will also take on a co-chair role.



The Mental Health Focus Group has been a valuable forum for information exchange (and networking) between people on the dementia support side. This includes NSFT, and the commissioners. Expressing our concerns probably helped, by reinforcing the need for greater investment in community-based dementia support, towards the commissioning of "Dementia Together".

The basic problem has been that the Mental Health Focus Groups priority on mental health limited its ability to allocate an appropriate time for discussion on dementia concerns. Also, the balance of membership was heavily skewed in favour of mental health.

For this reason, thanks to Andy Yacoub's excellent efforts over the last 6 months or so, I think that Healthwatch in the form of "The Dementia Forum" has every prospect of playing a significant role in the future.

**Jo Marshall, Neurological Centre
Director (Sue Ryder)**





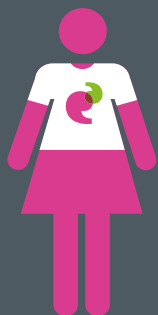
it starts with
YOU

healthwatch
Suffolk

Join the conversation about dementia
care in Suffolk:

If you want to shape dementia services
now and for the future please contact us
to express interest in joining the Suffolk
Dementia Forum.

What we have learnt from visiting local services



We have trained 20 people to visit services on our behalf.

What is Enter and View?

We have the right to visit (announced or unannounced) any premises where publicly funded health or social care is provided to people over the age of 18. These visits are called Enter and View.

Our volunteer “Authorised Representatives” visit local services in small teams so that we can talk to people using the services and make observations about the environment and care being provided.

All of our volunteers receive specific training and support. Many have experience of working as health or social care professionals or have lived experience as a user of services.

Following each visit, our volunteers will compile a formal report with recommendations. It is sent to the provider and shared with the following stakeholders, commissioners and regulatory bodies (not exhaustive):

- The Care Quality Commission
- Suffolk County Council
- NHS West Suffolk Clinical Commissioning Group
- NHS Ipswich and East Clinical Commissioning Group
- NHS Great Yarmouth and Waveney Clinical Commissioning Group
- NHS England
- Healthwatch England

Providers have twenty working



**You can influence what
and view by sharing**

days in which to respond to our recommendations. Our reports include comments from the provider concerned as supplied to us. This includes any action taken in response to our recommendations.

We will usually follow-up each report after a period of time to ask providers what they have done since the visit to make their service better.

Where have we visited this year?

Hazeldell Care Home (May 2016)

The primary purpose of this visit was to assess the readiness of providers for the introduction of something called the NHS Accessible Information Standard. The results were used to support and inform the production of a toolkit for our national network of Local Healthwatch.

The document explains what the NHS Accessible Information Standard is and how Local Healthwatch can hold services to account. The toolkit has been produced with support from NHS England, Healthwatch England,



Watch: Our video about enter and view and how we can use it as a function to improve services.

The Alzheimer's Society, Surrey Coalition of Disabled People, Sight for Surrey, NHS Coastal West Sussex CCGs, Barchester Healthcare and Cranleigh Medical Practice.

In addition to the above, we also made some general observations about the care environment that were addressed by the provider. They included:

- The font size on the service user's manual and other resident read literature was too small.
- Although there are signs in place on all doors the signs are not of consistent design with special regard to communal



ch services we enter
your experiences...

bathrooms and toilets. The provider has taken action to improve this.

Friars Hall Nursing Home (June 2016)

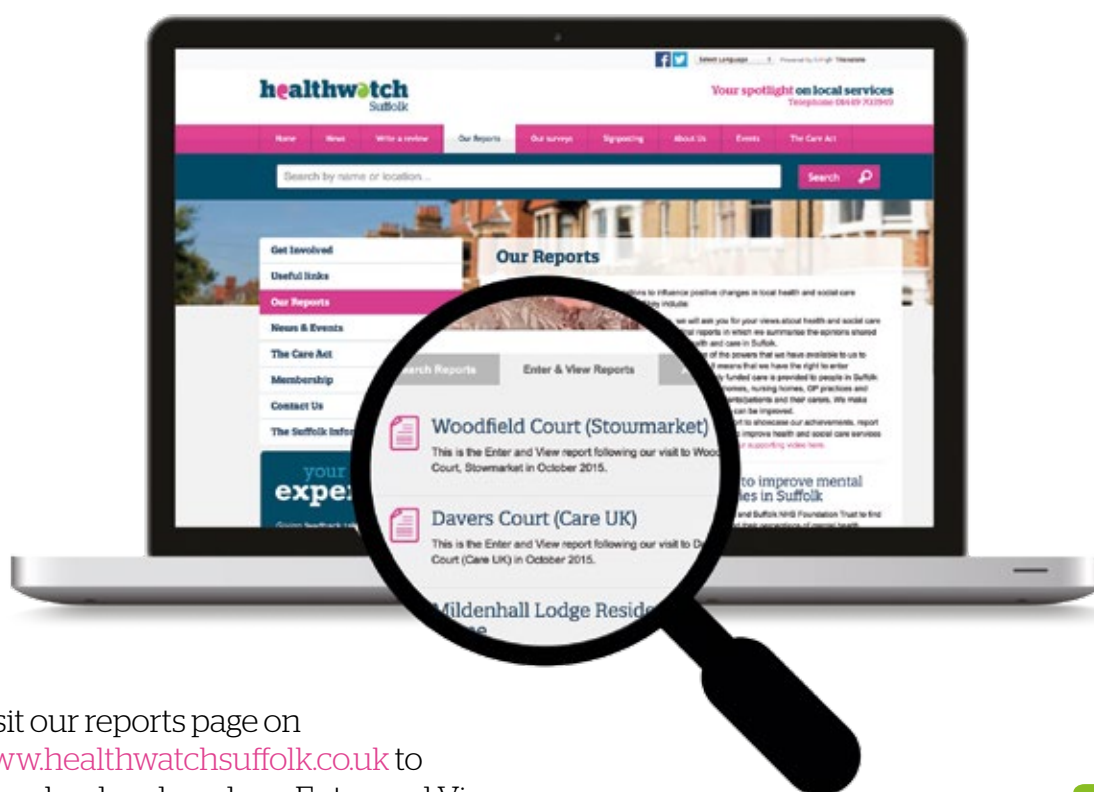
We visited this service to observe the care environment and obtain the “lived experience” of the residents. In particular, our team were interested in knowing :

- What choices residents had, particularly in terms of their daily activities, resident involvement in care planning, food/menu choices
- How staff communicate with the residents to ensure that they participate fully in decision making
- Identification of good practice including that relating to the NHS Accessibility Information Standard

We are aware that this care home has closed since the date of our visit. Prior to this, the provider was exploring the possibility of signage for specific areas of the home that make it clear care is in progress to protect people's dignity. The manager also told us that they would ensure staff are fully aware of appropriate room layout to avoid chairs being placed against the walls.

The staff team were unaware of the NHS Accessible Information Standard at the time and so committed to reviewing their information and to exploring the implementation of dementia friendly signs throughout the home.

The provider also committed to examine a number of décor and maintenance solutions such as the installation of grab rails in corridors, signage and changes to paint colour. It was considered that such



Visit our reports page on www.healthwatchsuffolk.co.uk to download and read our Enter and View reports about local services.



changes would help the home to achieve a higher standard of dementia care.

Alice Grange Care Home (September 2016)

We visited this service to:

- Gather feedback from residents, their relatives and staff.
- Establish what choices residents have in relation to their daily activities and involvement in care planning, food / menu choices.
- Observe how staff communicate with the residents to ensure that they participate fully in decision making.
- Gather information about staffing levels.
- Determine what actions had been taken in response to the CQC recommendation that the service seeks advice about supporting people, with specialist needs, to engage in meaningful activity.
- Determine the extent of the implementation of the NHS Accessible Information Standard

Since our visit to Alice Grange Care Home we have maintained dialogue with the Care Quality Commission, Suffolk County Council and the provider about our observations and feedback received from relatives which caused us some concern.

An action plan was devised by the provider in response to our recommendations, which we considered inadequately addressed the issues that we had raised. We therefore asked for additional information which was provided, including the improvements as listed below:

- Some improvements that will help residents/visitors to be more aware of activities on offer within the home.
- Improved notices for residents and relatives that will help them to know who is in charge of their care.
- The implementation of dementia focussed training for staff including one course about dementia friendly environments and one about dementia care experiential learning.
- Alice Grange Management have started a resource library about dementia that has books and articles available for staff and visitors to read.
- Improvements to the way that complaints are processed.
- There is now an up-to-date list in all kitchen areas of resident likes, dislikes and dietary needs. The provider is also devising a specific handover sheet for the hostess staff.
- All printed sheets and memos are now in a size 14 font or larger to aid with accessibility.
- The implementation of new door sensors. They can alert staff members responsible for monitoring the movement of vulnerable residents within the home.
- Accident forms are being given to Management in a more timely manner and the trends will be discussed at unit meetings.
- Activities on Memory lane have increased, which the provider says has been beneficial to resident wellbeing.
- Developing new connections with volunteers (e.g. beauty therapists and musicians).
- The chef has been tasked with ensuring a quarterly meeting is held with the residents to discuss food for



You can join our Enter and View team to help us improve local services. Just call us on **01449 703949** and we will talk to you about what is involved and our expectations.

the season coming up. Records of this meeting will be held in the meeting file.

- A welcome/information pack has been developed with details about the home and any relevant procedures.

BUPA care homes

BUPA care homes had received either requires improvement or inadequate ratings following their inspections by the Care Quality Commission. We were therefore invited by the team responsible for care quality improvement within Suffolk County Council to complete Enter and View visits in order to gather views from residents, relatives and staff about the quality of care being delivered across the homes.

On the whole, it would appear that BUPA have responded positively to the recommendations made by CQC and Healthwatch Suffolk. We have been able to observe a noticeable improvement in the quality of care provision. We are now aware that Anglesea Heights and Monmouth Court have both seen a boost to their CQC rating from inadequate to requires improvement.

Please see the outcomes from each of our the visits below.

Anglesea Heights Nursing Home (November 2016)

A number of recommendations were made. To date, the management has responded to state that it will address our concerns regarding NHS Accessible Information Standard requirements not being met and pay close attention to ensuring all residents have access to a personal memory box.

Melford Court Care Home (December 2016)

Since our visit, the management has responded to state that will review the signage within the home and ensure it meets the requirements of the NHS Accessible Information Standard.

It will also review internal lighting with residents and monitor the temperature of the building as it felt a little cooler than might be expected on the day of our visit. The provider will also be mindful of the changing needs of residents and ensure that its environment is made more appropriate for people that may have dementia.

In addition, the provider has addressed our concern that some areas within the home had no alarm call system for staff or resident use. Some cords were found to be tied up at a higher level than is practical. It said that the homes maintenance team have reviewed all areas and all residents have access to the call alarm system. We also noticed that an electric cable to a food trolley was frayed and this has been addressed.

Highfield Care Home (February 2017)

One of our recommendations was that the home should explore ways of involving its local community within the home, and to document efforts made to do this. The provider has informed us that it has started a "League of Friends" at Highfield and that this is proving popular. It has also stated that the local primary school is involved with the home.

A further outcome relates to our observation that signage within the home could be improved for the benefit of residents that may have dementia or

any form of cognitive impairment. The provider has told us that signage on toilet and bathroom doors has been delivered from a dementia specialist supplier. It is now also holding regular dementia champion meetings.

Monmouth Court Care Home (March 2017)

The management has sent us an action plan that lists the following improvements:

- Training to be arranged for the management teams regarding the implementation of the NHS accessible information standards.
- Signage to be changed to pictures and words. This will be rolled out to all the units.
- All units will have a notice board put up with pictures of staff, this will also include their name and position held.
- Memory boxes will now be moved outside the resident's room and relatives will be encouraged to bring in personal items to use in the box that will be easy for residents to recognise.
- Devise action plan for activity staff.
- Key worker responsibilities will be reissued to all staff as a reminder of their role in activities.
- More involvement from local community will be addressed.
- Coaching regarding the meal time experience to be delivered to all staff.
- Dining experience audit to be completed on each unit to ensure that this is happening.
- Coaching to be delivered to all staff regarding all fire doors to be kept closed and alarmed at all times.
- Maintenance to carry out monthly checks.
- Will contact estates people to visit site

to provide more accessible gardens and provide raised flower beds.

- Management team will look at the dementia unit and create points of interest for residents to aid stimulation.

Chilton Meadows Care Home (March 2017)

The management of this service has informed us of the following improvements:

- The home has implemented noticeboards that include photographs and names of staff to help residents and relatives to identify the team in each house.
- The home has taken action to ensure all management team members have an understanding of the NHS Accessible Information Standard and its implications.
- The home is taking steps to involve people and groups from the local community to improve cohesion. This work is in progress.
- The management has informed us that it will pay particular attention to ensuring refurbished units are dementia friendly.
- The provider will ensure all signage within the home is standardised as and when it is replaced to avoid confusion.

Our plans for the year ahead

Throughout 2017/18, we will continue to focus on improving the quality of services in Suffolk and, in particular, residential care and nursing homes. In addition, we are planning to develop new approaches that will enable us to visit and obtain the experiences of people using day centres and visiting hospital wards.

We will also explore how we might adapt our approach to visits to support the delivery of research that will focus on people receiving care at home in the county. Look out for future updates in our newsletters and on our website.

A composite image consisting of three horizontal panels. The top and bottom panels show a close-up of a person's hands holding a black smartphone. The middle panel is a solid teal color with white text.

Tell us about your experiences today...

www.healthwatchsuffolk.co.uk/services

We need your views to help us make decisions about where to visit throughout the year. Visit www.healthwatchsuffolk.co.uk/services to rate and review your care now. We want to hear about what is good about your care but also what could be better.

A close-up photograph of a person's face, focusing on the eye and mouth area. The image is partially covered by two large, semi-transparent circular overlays: a green one on the left and an orange one on the right. The text '02' is positioned on the green circle, and the phrase 'Helping you to find answers' is written in white across both circles.

02

**Helping you to
find answers**

The Suffolk Information Standard

We work in partnership to improve information available to people accessing services in Suffolk.

Many organisations produce information about health, care and wellbeing in Suffolk. It can vary greatly in quality, which means that it can be confusing for the public.

To help improve this Healthwatch Suffolk is working with the Suffolk Information Partnership to deliver a local Standard. It will give the public confidence in information available in the county and show that adequate processes are in place to ensure that standards to promote quality information are maintained.

What is the Suffolk Information Partnership?

The Suffolk Information Partnership is made up of key voluntary and statutory sector organisations in Suffolk. As a member of the partnership, we are



Watch: Organisations share their experience of what it is like to be accredited with the Suffolk Information Standard.

helping it to facilitate the delivery of joined up ways of working.

In particular the Partnership is helping to provide a range of clear, quality information for people that enables them to make informed choices and improves the experience and outcomes for those needing to access services. It also provides a network of equals to strategically influence local organisations' thinking about the importance of effective, quality information.

The Suffolk Information Partnership has offered the Suffolk Information Standard to Healthwatch Suffolk and we have responsibility for implementing the process of accreditation.



Accredited organisations can display the trusted Suffolk Information Standard logo on their information materials.



The Hope Trust in Felixstowe is one of the organisations accredited with the Suffolk Information Standard.

Accreditation with the Suffolk Information Standard shows that organisations have demonstrated that they:

- Provide information based on well-founded internal processes; consistent with other information providers in the county.
- Provide reliable and trustworthy information about support.
- Follow good practice by having a review procedure for information giving.
- Train staff and/or volunteers to provide quality information.

The Suffolk Information Standard is available to all organisations producing health and care information in Suffolk. The process for accreditation consists of a peer review panel that is supported by Healthwatch Suffolk staff. To date, a total of twelve organisations are accredited.

These are:

- Age UK Suffolk
- Alzheimer's Society (Suffolk Services)

- Clarke Care Ltd
- Healthwatch Suffolk
- NHS Ipswich and East Suffolk Clinical Commissioning Group
- NHS West Suffolk Clinical Commissioning Group
- Sue Ryder
- Suffolk County Council, Adult and Community Services (ACS)
- Suffolk Family Carers
- Suffolk Libraries
- Suffolk Mind
- the hope trust

A further eight applications have been considered by our Information Panel, which has requested some additional evidence from the organisations.

Throughout the year, we have continued to update the criteria and guidance of this local standard to reflect wider ambitions for information within the voluntary and statutory sectors. More specifically, we have made changes to reflect the implementation of something called the NHS Accessible Information Standard (see page 31).



NHS Accessible Information Standard: What should you expect from local services?

From 31 July 2016, all organisations providing NHS or adult social care should comply with the NHS Accessible Information Standard.

The aim of the standard is to make sure that people who have a disability, impairment or sensory loss get information that they can access and understand, and any communication support that they need.

This includes making sure that people get information in different formats if they need it, for example in large print, Braille, easy read or via email. It also includes appropriate support to help individuals communicate.

How have we supported this?

We are committed to making sure all of our information is clear and accessible. It is vital that anybody who wants to find out about our work is able to do so. That is why we have also introduced the essence of the Accessible Information Standard into our own Suffolk Information Standard.

We also supported Healthwatch Surrey to produce a toolkit for our national network of Local

Healthwatch. It explains what

the NHS Accessible Information Standard is and how they can hold services to account. The toolkit has been produced with support from NHS England, Healthwatch England and a range of other health and care services.

To inform the toolkit, we ran a pilot with Healthwatch Surrey and NHS England, using our powers to Enter and View local services. We directed a small team to visit Hazeldell Residential Home so that we could assess their readiness for the Accessible Information Standard.

We will also be promoting the standard with local providers to ensure that people receive the information they need to make informed choices about their care within our counties services. This has been a continuous theme across all of our enter and view visits throughout the year.



Putting people in touch with help and support

Our Information and Signposting Service

Our service is:

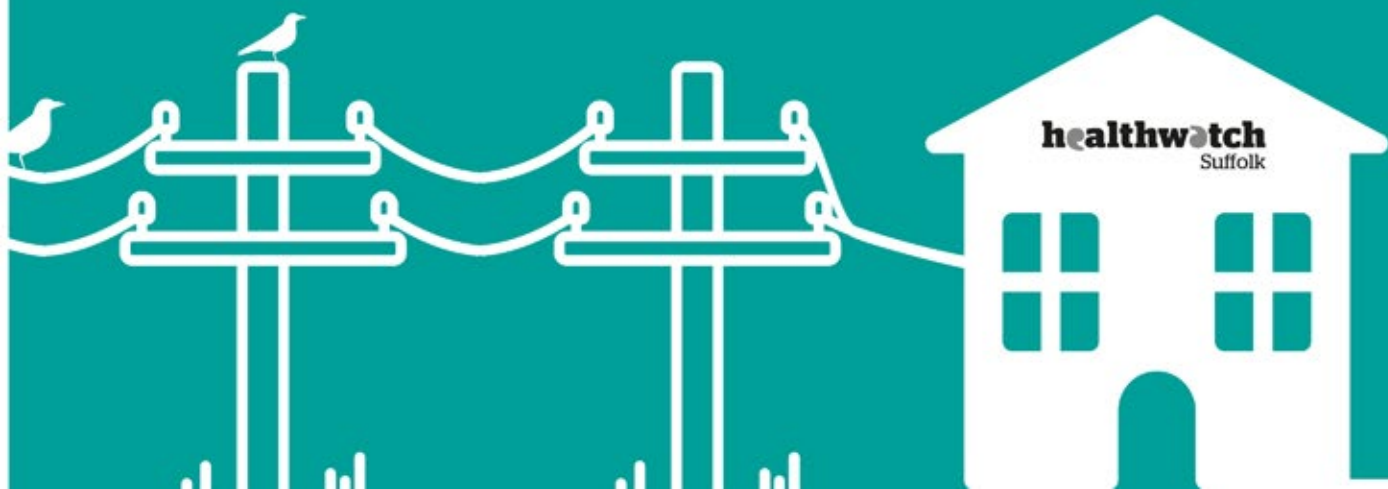
- A free and confidential service that is independent from the NHS and social care services.
- We will perform a signposting role only. This means that we will give you the contact details for services that best support your request. You will then need to contact those organisations yourself.
- We can give you information about where you might get help in relation to your health, social care and wellbeing needs.
- We can put you in touch with sources of information on NHS and social care services.
- We can give you information about what to do when things go wrong and you don't understand how to make a complaint.

Our service is not...

- Supported by trained clinicians or health and care

professionals. It means that we cannot offer advice about medication, queries about a diagnosis made by a doctor or recommendations about a choice over a particular treatment pathway.

- Whilst we will use your feedback to improve services, we have no powers to investigate complaints about them.
- We cannot offer advice as to the 'best' place to go to receive a service or offer an opinion as which service you should choose.
- We are not an advocacy service and so cannot make a complaint to a service on your behalf.
- We are not able to offer financial, relationship, legal or similar specialist advice. This form of advice should always be sought from a trained specialist such as a solicitor, counsellor or financial advisor.



Example enquiries...

Ms. P spoke to us because she was experiencing difficulties attending health appointments. She was very concerned about an upcoming operation and the need for care thereafter.

We suggested contacting her local volunteer drivers scheme, who could assist with transport to appointments. We also

provided information about Connecting Communities Suffolk, which is designed to help people who might not have access to a regular bus service.

We also shared details of services, such as Age UK Suffolk, who could offer support and advice regarding independent living.



Mr. M has no fixed address. He called because he needed a repeat prescription of a strong painkiller that he took regularly but was about to run out. Unfortunately Mr M found that he could not register himself with a GP.

We signposted Mr M to the Marginalised and Vulnerable Adult service that runs clinics. He saw a

nurse and advisor. They managed to arrange registration with a local GP practice to resolve the situation regarding his medication needs and to ensure his health care for the future.

Mr M has called to let us know how he had got on and to thank us for our help.



"I contacted Healthwatch in July 2016 to ask for their help with enquiries around commissioning of services for young people in Suffolk. I had made enquiries with the local CCG and the provider organisation but neither were forthcoming with information. Healthwatch however were very helpful in signposting me to useful local resources and took forward my concerns to the local commissioners."

Mrs. Y called us because her daughter in-law, who was visiting from Australia, had run out of a regular medication. She had visited the family GP and was told they could not access the service without payment.

We contacted NHS England to seek clear guidance. Mrs. Y was able to use our advice in a conversation with the Practice Manager,

who agreed that her daughter in-law could see a nurse free of any charge to obtain the medication she needed.

Mrs. Y said:
“Thank you Healthwatch Suffolk for your help, without which I wouldn’t have pushed the GP as hard and wouldn’t have got my Daughter in-law seen without paying”



Mr. D and his mother spoke English as a second language. They explained that he attends hospital appointments with his mother to help with translation but was finding the complex language used by medical professionals difficult to understand.

We advised that it should be possible to access translation services and that this could be arranged by the hospital. We suggested that they check their appointment letter and contact the relevant Patient Advice and Liaison Service (PALS) for help should they feel it is needed.



**Logged enquiries to our
Information and Signposting service**



You can contact our Information and Signposting service on 08004488234 (Freephone). Alternatively, please send an email to info@healthwatchsuffolk.co.uk.



03

Making a
difference
together

Reports and recommendations

We can exert influence over our local health and social care services but in order to do so effectively we must first be able to evidence the need for change or indeed the need to maintain service satisfaction.



Research reports produced to influence local services.

We use reports to influence decision makers in health and social care with the views of our local communities. This includes reports published following our visits to local services (see page 26) and also reports that follow extensive research projects.

In 2016/17 a total of six research projects were published and this includes:

- Feet in Focus: Our report about patient experience of diabetic foot care services in Suffolk (March 2017)
- Supporting mum: A report on patient experience of maternity services in Suffolk (November 2016)
- Lets Talk Mental Health: What did you tell us? (July 2016)
- Supporting mum: A report on patient experience of maternity services provided by Ipswich Hospital NHS Trust (June 2016)
- Young people's views on mental health and wellbeing: A project with

the Thomas Gainsborough School and Unity and Diversity

- My999Story: What did you tell us? Full briefing (April 2016)

We have included a breakdown of the key findings and outcomes from each of these projects within this section. Copies of our research reports are available to download from our website. Visit:

www.healthwatchsuffolk.co.uk/our-reports-2/

Alternative formats are available on request. Please call 01449 703949.

Some projects were launched within the year but the final reports will be published within 2017/18. These include:

- My Health, Our Future - Our work with schools across Suffolk to engage young people about their views on mental health and wellbeing
- A Qualitative Evaluation of the Discharge to Assess (D2A) Pilot in the East of Suffolk
- A Qualitative Evaluation of the Discharge to Assess (D2A) Pilot in the West of Suffolk

Read about these projects from page 84.



#FeetInFocus

We put feet in focus with the launch of our report about people's experiences of local diabetes care. Find out how services are improving in response...

People with diabetes will be more able to manage the health of their feet after our report encouraged health leaders to review the information available and to improve awareness of the risks of complications.

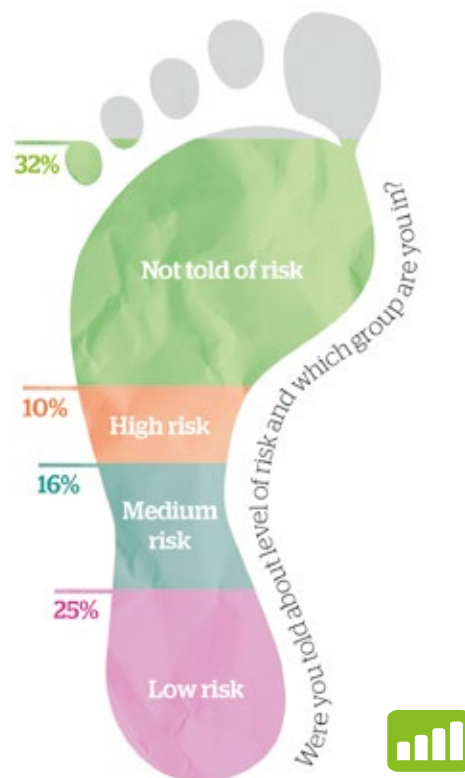
they thought a new foot problem had developed.

- 28% of respondents said they were not given advice about how to look after their feet.

Figures from Diabetes UK indicate that over 100 diabetes-related foot amputations occur every week in England and that, surprisingly, one in three people with the disease do not realise that having the condition increases their risk.

Our report, produced in partnership with a lead clinician (Dr. Gerry Rayman), paints a generally positive picture of diabetic foot care services in Suffolk but there are some areas that could be improved:

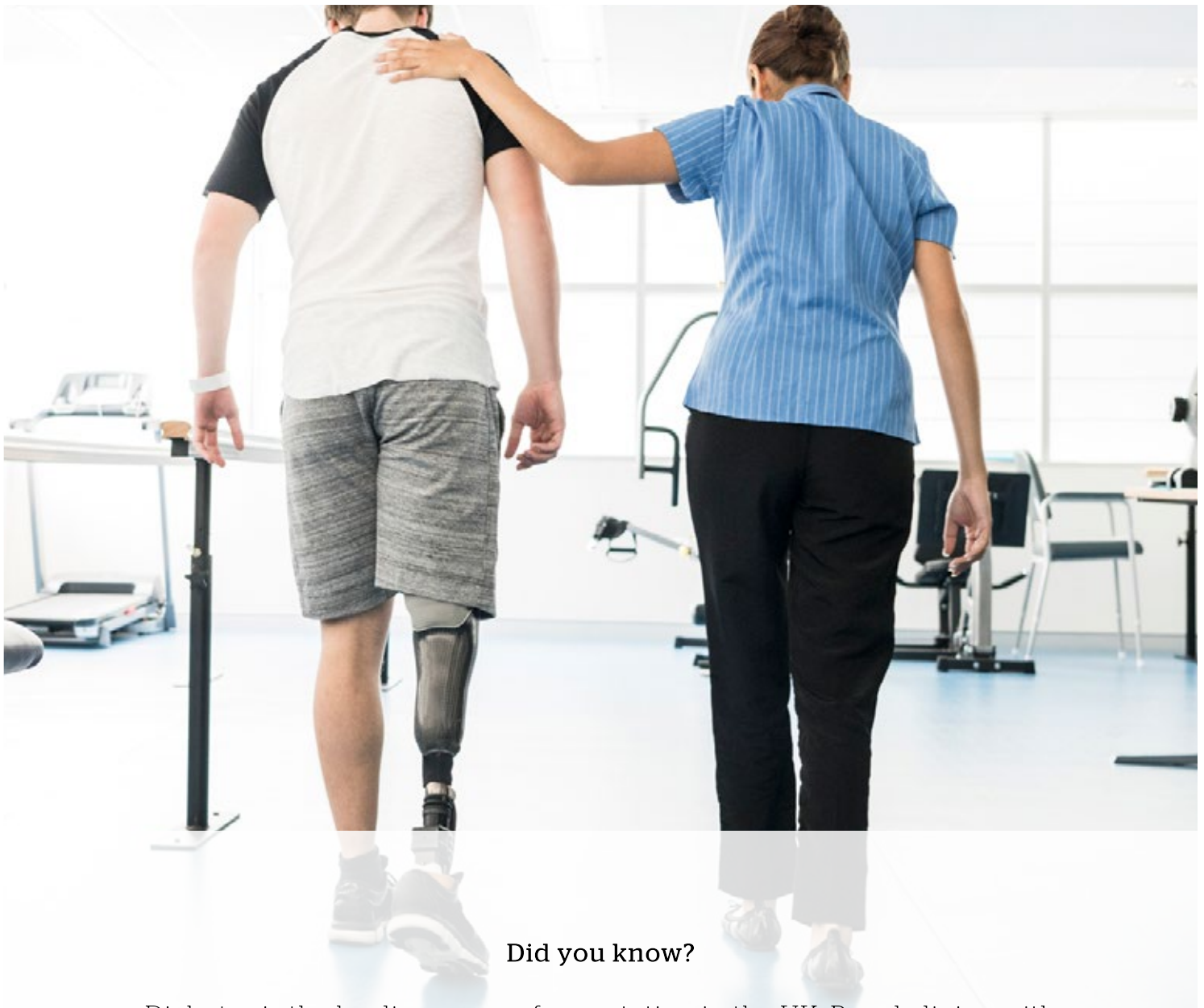
- 32% of our respondents stated that they were not told about their risk of developing a foot problem.
- 43% of respondents were not told about the action they should take if



“This survey should reassure those with diabetes that the foot care provided in Suffolk is of a high standard compared with the rest of the country. It is also very helpful as it reveals areas in which we need to improve, in particular having people with diabetes know their risk of developing a diabetes foot complication and what to do in event of a complication.

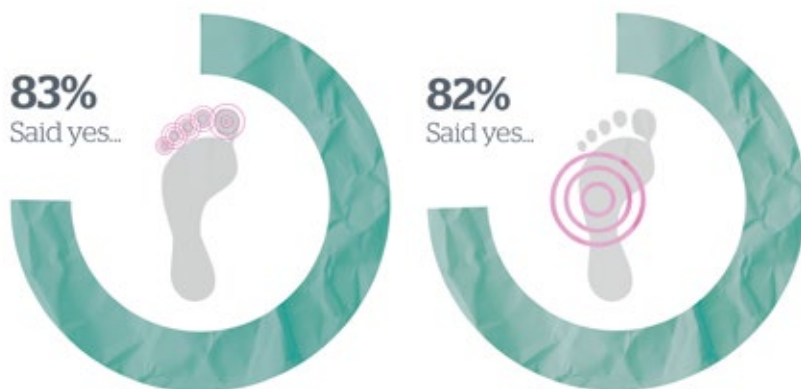
“In response to this, we are working with the East of England Clinical Network to produce an information card for people with diabetes which explains their risk and what to do in an event of them developing a foot problem. I would like to thank the team at Healthwatch Suffolk for this initiative which is so important in improving the care of people with diabetes in our community.”

Dr. Gerry Rayman (Head of Service at the Diabetes and Endocrine Centre, and the Diabetes Research Unit at Ipswich Hospitals NHS Trust)



Did you know?

Diabetes is the leading cause of amputation in the UK. People living with the disease are 15 times more likely to undergo amputations than other people without the disease (Diabetes UK, 2016)



During your last examination, did a health professional assess your ability to feel sensation in your toes and check the pulses in your feet?

How are we improving services?

Here are three things that have improved since the publication of our report:

1. There will be more information available to people to help them understand the risks of diabetes to the health of their feet.
2. GP practices will be reminded about the specifics of what to check, what expectations/advice to give patients and to make sure that annual foot checks are being carried out in a timely manner.
3. In Waveney, NHS leaders have committed to work with diabetes services on the development of co-ordinated appointment booking and the possibility of these being booked using e-referral (Choose and Book).

In detail...

Following the publication of our report, letters were written to the NHS Ipswich and East Suffolk, West Suffolk and Great Yarmouth and Waveney Clinical Commissioning Groups (CCG). They are the bodies responsible for planning and funding NHS services in the county.

East of England

We are very pleased that patients across the east of England will benefit from the outcomes of our project.

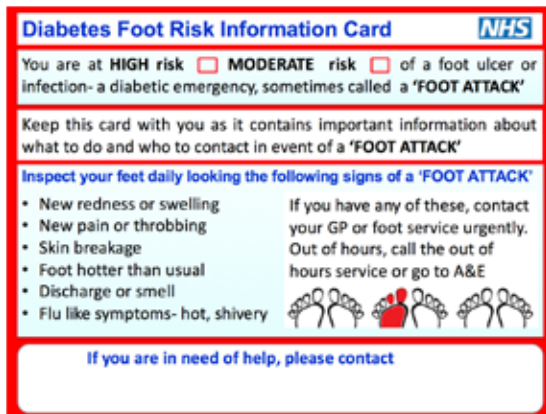
The East of England Clinical Network meetings on Diabetes Foot Care brings together consultants, podiatrists, commissioners and other healthcare professionals to share good practice and learning. It has developed a wallet-sized "red" card to explain the risks of foot ulcers. It will be handed out to all patients at foot checks but also at any contact going forward.

Dr. Gerry Rayman is taking this forward in the Ipswich and East Suffolk area with plans to roll out across Suffolk and then further afield. He has already directly attributed the development of this innovation to our project.

Ipswich, east Suffolk and west Suffolk

Dr. Ed Garratt (Chief Officer of NHS West and Ipswich and East Suffolk CCGs) acknowledged the significance of our findings and told us how the CCG's plan to address them.

They are awaiting the outcome from NHS England of three bids for funding related



 **The red card will help patients to monitor the health of their feet across the east of England.**

to diabetes care. These are:

1. Improving the uptake of structured education
2. Improving the achievement of treatment targets
3. New or expanded Diabetes Inpatient Specialist Nursing services

If successful, each of the areas listed above offer the potential to ensure that patients are informed about the risks associated with diabetes. In particular, the CCG and partners are hoping to use funds to increase the uptake of special courses, in which risks of diabetes are discussed.

The CCG is also exploring links with care homes and considering a Suffolk wide integrated foot care pathway to address the need to reduce the number of foot ulcers and amputations.

Lastly, Dr. Garratt has committed to communicate with GP practices in Suffolk to remind them about the specifics of what to check, what expectations/advice to give patients and to make sure that annual foot checks are being carried out in a timely manner.

Great Yarmouth and Waveney

Rachel Leeds (Head of Clinical Commissioning) told us:

- All Diabetes network members and GP practices have been reminded of the need to advise patients on the risk of developing complications and that the leaflets available to practices will help with this.
- Information leaflets for patients on foot care are now made available to GP practices and hospital podiatry clinics.
- The CCG has engaged with colleagues who manage a national diabetes eye screening service locally and they have agreed to assist this work by making foot care leaflets available and stressing to patients the importance of foot care as well as the importance of eye screening.
- The CCG recognises that the achievement of the foot check target at 72% is not as high as it would like and that more work is needed to ensure patients attend their appointments. Ms. Leeds explained that it has a new system in place that can run reports on treatment targets and care processes. It will work with GP practices to help them to utilise this information.
- One of our findings was that some patients felt the diabetic foot care services they access could be improved by amending or improving the appointment booking process. The CCG has told us that it will work with providers to look at co-ordinated booking of appointments. It will also look into the possibility of these being booked using e-referral (Choose and Book).



We believe that the views of birthing partners are under-represented. That is why we worked with our local acute hospitals to give fathers and birthing partners a say in the maternity pathway.

November 2016 saw the publication of our report that analysed the views of new mums and birthing partners that had accessed maternity services at West Suffolk, Ipswich and James Paget Hospitals.

This has been an important project because there is a lack of engagement research locally and nationally for birthing partners to share their experiences. It has also encouraged the services to improve their offer of support to new mums and their birthing partners.



44% of birthing partners told us that they would have liked the opportunity to stay overnight with mum and baby.

OUR MATERNITY REPORT

What has changed?

The Ipswich Hospital announced that partners of women are now able to stay overnight so that they can offer vital support to their partner while bonding as a family.

Partners are welcome to stay throughout the admission, and will be offered a reclining chair, blanket and pillow to make them comfortable. Previously, they needed to leave at 9pm, which meant that anyone whose baby was born in the evening could only spend a short time with them before having to go home.

Increased patient involvement in birth planning:

Whilst the hospital provides information about where people can have their baby, our survey suggests that people often struggle to distinguish between choice of place of birth and their birth plan. It will therefore work on ensuring women and their partners have more opportunities to discuss these subjects during their pregnancy. The "Birth Options Clinic" is now in place and led by a Consultant Midwife for women who need more detailed discussions about developing their birth plan and their choice of birth place.

Effective communication about who to call and when:

The hospital has told us that it recognises the need to improve its

offer of information and will review the content on its website about how to contact the maternity unit and in what circumstances.

Ensuring adequate information is available for mums and their birthing partners:

The hospital is undertaking a complete review of its website information and social media activity. The Trust said that it would also review its antenatal education provision and an offer of Hypnobirthing classes has been made available to all patients.

The content of antenatal classes:

46% of the mums and 37% of the birthing partners who took part in our survey stated that they did not feel antenatal classes equipped them for labour. The hospital therefore agreed to review the classes, including its support to the team of midwives who provide the classes.

Keeping people informed of their babies progress:

Whilst most respondents told us they had received an update on their babies progress on the neonatal unit within 15 minutes, the hospital is aware that sometimes this does not occur. It will explore use of cot camera's so that parents can see baby and communicate with a named nurse if they are unable to be at the bedside.

Information about potential emotional changes post birth:

A perinatal mental health midwife has recently started to work at the Trust, which will enable training to be provided to all midwives. The hospital will also be working on an approach to improve what is offered, the information and support available.

James Paget University Hospitals NHS Foundation Trust

The hospital said it would pilot a system whereby birthing partners can be offered the opportunity to stay in the hospital overnight. This will include the eligibility criteria, safeguarding issues, facilities and a contract of behaviour.

The Trust also committed to:

- Ensure all community midwives have new smartphones to improve communication with parents.
- Make sure every patient is offered a documented birth planning appointment. An audit will be completed to check this is happening.
- Produce written information to help people make informed choices about where to have their baby.
- Review the content of parent education classes to identify how the classes can be improved.
- Re-design birth planning documentation so that it includes options for emergency support. This



Most people said they were assessed within 30 minutes of arriving at one of the hospitals.



Watch: A birthing partner shares his experience of maternity care in Suffolk.



will ensure new parents are clear about their options.

- Produce a leaflet about pain relief available in different languages.
- Include post birth emotional changes as a part of the information offered to new parents upon discharge.

West Suffolk NHS Foundation Trust

The hospital told us that it would review the possibility of introducing overnight stays for birthing partners. In response to our report, from October 2016, the hospital extended its visiting hours for birthing partners to 09:00 - 21:00.

The Trust also committed to:

- A review of the antenatal appointment structure.
- Improve staff attendance at sessions on delivering service excellence.
- Monitor patient feedback to improve communication between professionals and patients.
- Review parent education to check that course content is appropriate and that adequate information is provided during the antenatal period.
- Explore with stakeholders, the possibility of a social platform through which birthing partners can connect.

- Consider how the process for informing people about the health status of their baby whilst on the neonatal unit could be improved.
- Develop an information leaflet regarding emotional changes in the few weeks after birth.

National Maternity Review

As part of the roll out of Baroness Cumberledge's "Better Birth" reports, the Local Maternity Systems (LMS) were asked to formulate plans.

Sue Arrowsmith (Deputy Director of Nursing, Quality and Patient experience) said that she would forward our reports to the clinical network leads so that the Maternity Accountable Officer could ensure our findings are incorporated into the Ipswich and East Suffolk LMS future planning.

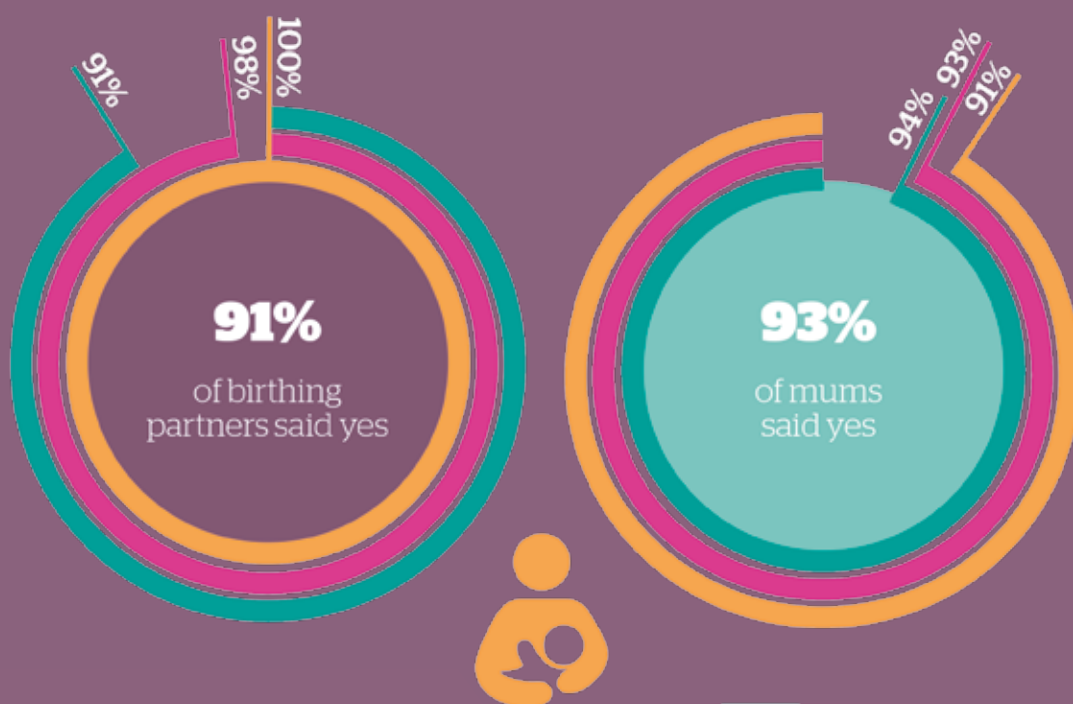
Following the national review, a group called the Suffolk and North Essex Local Maternity System Board was

established. We have been invited to attend as a representative of peoples' lived experiences and also to maintain awareness of our report.

Other outcomes:

A number of further opportunities have become apparent because of our work in this area and they include:

- **Information gathering meetings with the West Suffolk Maternity Voices Steering Group:** These meetings will help us to identify themes from people that have given birth and used maternity services in West Suffolk.
- **The Perinatal Mental Health Steering Group:** This meeting has been established to plan for a new service specification regarding specialist perinatal mental health support in the community. It forms a part of the Children and Young Peoples Emotional Wellbeing Transformation Plan for Suffolk (EWB2020).



Q. Did you have contact with your baby shortly after the birth?

■ Ipswich Hospital
■ James Paget Hospital
■ West Suffolk Hospital



Let's talk

about improving mental health
care in Suffolk

The Care Quality Commission (CQC) monitors, inspects and regulates services to make sure they meet standards of quality and safety. It has a legal duty to listen to the things we say about services.

In July 2016 the CQC inspected the Norfolk and Suffolk NHS Foundation Trust (NSFT). Prior to this, we launched our short #LetsTalkMH campaign, which has been successful in encouraging people to share their experiences with us.

What did people share?

Some people had positive experiences: They expressed gratitude for intervention that improved their mental health and their quality of life. Positivity within the

data was often attributed to experiences of the Recovery College, which people hold in high regard.

- *Lack of access to services:* It is evident that people feel there are distinct gaps in service provision and that their needs are unmet.
- *Communication:* Some individuals said NSFT failed to respond to them or that there are communication issues affecting their recovery.
- *Failure to listen:* Feedback indicates that service users and families experience a disconnect between their experience and the opinions of mental health professionals.
- *Continuity of care:* People said that

frequent changes in clinicians mean they are required to describe their circumstances repeatedly, often finding that each clinician has a different level of awareness in respect of their medical history. Service users find it difficult to connect with the professionals or form any basis of trust.

- *Demand for services:* We consider that most people have a positive impression of Trust staff and feel they are caring people. There are just too few staff and so they are very stretched.

All feedback and our report was shared with the CQC to inform its inspection of the services.



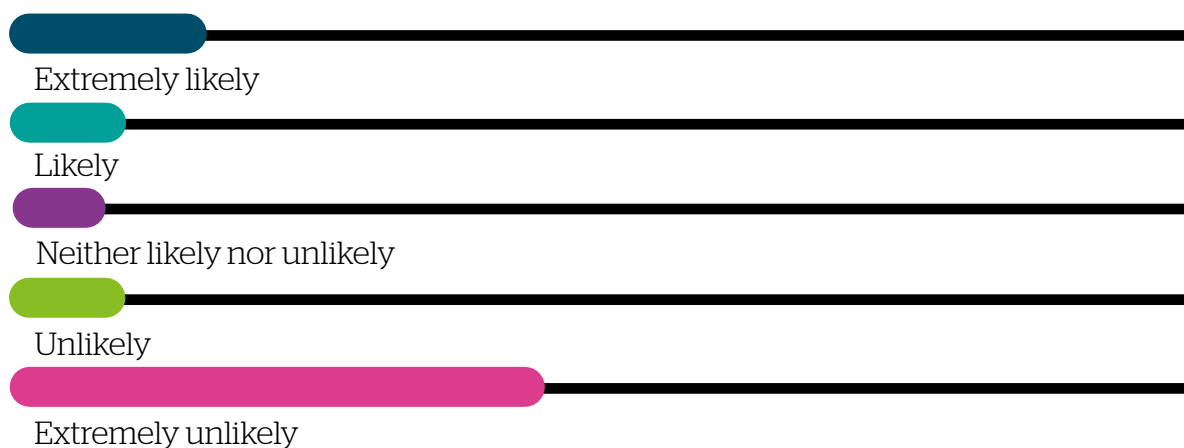
People rated mental health services two out of five stars on our Feedback Centre.

125

Comments were analysed within the briefing and shared with the CQC

Friends and Family Test Question Responses to Healthwatch Suffolk

48 individuals chose to answer the FFT question on the Healthwatch Suffolk Feedback Centre. The results recorded are as follows:



Understanding Young Peoples Experiences of Mental Health and Wellbeing

Engaging young people in Sudbury

Staff and students at the Thomas Gainsborough School have received mental health awareness training after young people told us they were dissatisfied with their PSHE lesson content. Students said they wanted their school to run mental health awareness workshops.

The Suffolk Children and Young People's Emotional Wellbeing Plan 2020 (EWB2020) sets out a new way to improve children and young people's emotional wellbeing and mental health by transforming services, changing the landscape in which services operate and upskilling the workforce.

The plan was developed by people responsible for making decisions about what services should exist in Suffolk with involvement from young people, families and schools.

In May 2016, we published our report following a pilot project in partnership with the Thomas Gainsborough School in Sudbury and Unity and Diversity, through which we collected the views of pupils about their use of services as well as the ambitions of the EWB2020.

The project gave over 400 young people the opportunity to take part in a live interactive survey and share their feedback about using services. We also ran sessions with GCSE students about the importance of speaking up and to ask for their views.

The final report and findings have been shared with health and social care decision makers to support the continued development of the EWB2020. Each stage of the project, including mental health and wellbeing based short dramas performed by students, has been filmed and you can watch the videos on our YouTube channel.





“TGS was delighted to work with Healthwatch Suffolk on a six-month project focusing on mental health and wellbeing. The project was extremely beneficial, on many levels, for both students and staff. The scoping exercise involved a large number of students and their teachers raising awareness generally amongst the student population. The findings provided very useful student feedback which is informing future practice and curriculum planning.

“The three sessions with the health and social care students contributed directly to their learning in health and social care and their conclusions helped shape the drama. The drama students fully embraced the topic and showcased this learning to a mixed audience of staff, students, parents, governors and community leaders. The showcase evening was also an excellent opportunity for staff to liaise and network with health professionals.

“To conclude, students have been empowered to express their views and staff have welcomed the chance to listen to this student voice and to improve provision. As a direct result, sixth form health and social care students had some excellent mental health awareness training.”

Tracey Welsh (Thomas Gainsborough School)



Encouraging young people and their teachers to express their views about mental health and wellbeing

Our latest work with children and young people in eight schools across Suffolk (My Health, Our Future), developed from our work at the Thomas Gainsborough School. Read all about this exciting project from page 88.



We're listening. Share your #My999 Story

The Care Quality Commission (CQC) monitors, inspects and regulates services to make sure they meet standards of quality and safety. It has a legal duty to listen to the things Local Healthwatch say about services.

In April 2016, the CQC inspected the East of England Ambulance NHS Trust for the first time. As lead Local Healthwatch for this particular service, we were keen to ensure that a significant body of evidence could be presented to the CQC on patient and carer experience.

Our campaign successfully encouraged people to share their experiences. In total, over 140 stories were obtained from people across the region. Over 750 comments were shared with Local Healthwatch research projects.

What did people share?

We found that patient experience of the Trust is generally positive in sentiment. In particular, analysis of the feedback obtained confirms an established

understanding that people tend to be strongly positive about ambulance crews.

The conflict between service performance and patient/relative expectations remains a problem and issues with communication indicate that more could be done to keep those waiting for an ambulance updated on when their designated ambulance is likely to arrive.

Our report and data was used by the Care Quality Commission to give the patients perspective in its final report about the East of England Ambulance Service, which requires the Trust to make improvements. The report has also been made available to Local Healthwatch in the East of England.



"Healthwatch has been instrumental in ensuring we understand patients' use of and opinion of the ambulance service. The nature of ambulance services makes obtaining the views of patients more difficult whilst on inspection. This valuable and important information will be given to the inspection team to inform inspection planning and for focusing on any areas of concern. It will be used to give the patients' perspective in the final report of EEAST."

Mark Heath (Care Quality Commission Inspection Manager East Anglia team)





To download any of our reports about local services, please visit our website: www.healthwatchsuffolk.co.uk/our-reports-2/

Working with others to improve services

It's a big job - Doing it alone just doesn't make sense...

Suffolk is a big county and although we do our very best, we cannot easily reach every person that might contact an NHS or care service. That is why we must work in partnership with other people and organisations. It means that we have more potential to shape and influence positive changes to peoples care.

We network with a large number of individuals, groups and organisations (statutory and voluntary) at all levels. This includes at the places where decisions are made about what care should exist in the county.

In this section, we highlight a few of these partnerships and explain how they are helping us to influence change.



Healthwatch Suffolk plays a crucial role in ensuring that the health needs of the county's population are recognised and met both now and in the future. Community Action Suffolk works in partnership with Healthwatch providing a voice for individuals and groups who may not otherwise be heard, representing their interests to the public sector and helping to build resilient communities.

Pete Richardson (Chief Executive, Community Action Suffolk)



We have an agreement with the Rural Coffee Caravan that enables us to obtain feedback and raise profile within Suffolk's smallest communities (see page 73).



Our local and national network

The East Region Local Healthwatch Conference

The role of local Healthwatch in changing health and care for the better is as important as ever. In an increasingly challenged health and care system, it isn't an easy job. That is why it is important for our local Healthwatch network to work closely together.

Together with four of our other county Healthwatch, we organised a Regional Conference to let our staff learn from each other to help our network develop and be more effective. 56 Healthwatch staff from 11 Healthwatch attended the conference to talk about our work, the challenges we face and how we can learn from each other to better respond to these challenges.

We are a diverse network and know that these challenges are different for different areas, particularly for those Healthwatch in smaller Unitary Council areas, but

we all have very much in common; the opportunities to share and support each other are significant. The conference was a way to get some off this sharing up and running.

Those Healthwatch present took the opportunity to share their promotional materials and supplied a summary of their business priorities and staffing structures and contact details. We are now much better informed about how to contact our neighbouring Healthwatch about various issues.

We also actively contribute to a regional forum of Local Healthwatch. This includes acting as a lead representative for the network on matters concerning the East of England Ambulance Service NHS Trust.





Contributing to national conversations

- The national Healthwatch conference
- East region Local Healthwatch network
- The Yammer social media network for all Local Healthwatch

- The National Healthwatch Communications Network

We want to work closely with other organisations so that we can influence the shape and quality of local NHS and social care services.

This may include:

- Gathering and sharing the views and lived experience of local people accessing care services.
- Ensuring people have the opportunity to get involved in shaping local services wherever possible.
- Promoting shared opportunities for people to receive support or



Healthwatch continues to be a champion of people using health and social care services in Suffolk. Suffolk Mind and Healthwatch have worked in partnership this year on several initiatives to improve the mental wellbeing of the people of Suffolk - this has included Time to Change, Suffolk Congress, input to the Health and Wellbeing Board, working with Schools, Mental Health Supported Housing and the Suffolk Information Partnership. We look forward to doing more in the future to help make Suffolk the best place in the world for talking about and taking care of mental wellbeing.

Jon Neil, Chief Executive (Suffolk MIND)



- influence the planning of local care services.
- The potential to develop joint projects.
- The opportunity for organisations to be represented in our activities such as Enter and View.
- Commitments to improve the way information is produced and managed by making an application for Suffolk Information Standard accreditation.
- Our support on engagement activities, if required, which may include help with conducting research or talking to people in communities.
- Outreach Youth
- Rural Coffee Caravan
- Sue Ryder
- Suffolk Coalition of Disabled People (SCODP)
- Suffolk Libraries
- Suffolk MIND
- Suffolk Refugee Support
- Suffolk User Forum
- Survivors in Transition

We have signed partnership agreements with the following organisations:

- 4YP
- ActivLives
- Age UK Suffolk
- Gatehouse
- Genesis (Orwell Mencap)
- Leading Lives



Health and Wellbeing SUFFOLK

The Health and Wellbeing Board

We play an active role in numerous forums responsible for planning and delivering health and social care in the county; quite simply too many to list here. The Health and Wellbeing Board is one of the most important of these.

We have a statutory right to a seat on the Health and Wellbeing Board. It has a duty to “encourage integrated working” between health, care, police and other public services in order to improve wellbeing in Suffolk. It is also responsible for delivery of the Joint Strategic Needs Assessment and the county’s Joint Health and Wellbeing Strategy.

Our representative on the Board in 2016/17 continued to be our Chair, Dr. Tony Rollo. We have supported him throughout the year with the information required to be an active participant on the Board. This includes pre-meeting briefings.

As a member of the Board, we have been able to contribute to discussions about improving the health and wellbeing of our local population. One such example, involving the more vulnerable members of our community, concerns the Learning Disability Strategy and its implementation plan.

Members of our team met with Abdul Razaq (Director of Public Health and Protection) when he started his new role.





Around **60** people end their life by suicide each year in Suffolk. We have been contributing to and promoting awareness of the “Suffolk Lives Matter” Public Health strategy that aims to reduce the number of people who lose their life by suicide in the county.

This has been an exemplar approach in terms of co-production. We have continuously advocated and actively supported this programme of work and encourage other fields to adopt similar approaches.

In early 2017, we helped to bring about a Co-production Development Workshop for members and associated stakeholders of the HWBB. This was developed in partnership with the Suffolk Co-Production Network and Suffolk County Council. It was a one-off workshop to raise the profile of co-production and enlighten Board members as to what the evidence of co-production looks like.

Public Health Suffolk

We work closely with Public Health Suffolk to inform its programme of work. In 2016/17, we have taken the opportunity to network with its community teams and have presented to one of its Continuing Professional Development sessions about our research work.

Mental health has been a key focus for Public Health Suffolk this year because improving people’s mental health is a priority for the HWBB. A key element has been “Suffolk Lives Matter”, which is a strategy that aims to reduce the number of people that end their life by suicide in the county.

While no single organisation is responsible for preventing suicide, a range of professionals from the voluntary and statutory sectors (including us) all play a crucial role.

It is essential therefore that we know how to respond appropriately and signpost people effectively when necessary. That is why we recently ran a training session for our staff team on mental health first aid. Whilst our staff are not clinicians and cannot support people with advice about a diagnosis, we hope that this training will at least assist us to engage with people in a way that is most appropriate to their needs.

In addition to the above, we have been promoting opportunities for people to be involved in shaping this strategy and have attended workshops and conferences hosted by Public Health Suffolk. We are also members of the Suffolk Lives Matter Steering Group and task and finish groups, which have a role to shape the ongoing implementation of the strategy across the county.

We take our responsibility for safeguarding vulnerable people very seriously and will always take action to protect people from harm where a risk has been identified. Please see page 64 for more details about how we have improved care for local people through safeguarding.

Suffolk Health and Overview Scrutiny Committee (HOSC)

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

We have an agreed working protocol with the Committee, which includes commitments to work closely together in a way that will achieve the best outcomes for people in Suffolk. The committee receives an update from us for each of its meetings that covers items of mutual interest and any matters that we would like it to investigate.

Our Chief Executive is always invited to attend HOSC meetings to comment, observe and contribute to discussions. We have pre-committee meetings with the Chair, Vice Chair and Administrator. We use them as opportunities to talk about our work but also to highlight matters that we feel may need public scrutiny. Our meetings lead to future committee agenda items and calls for reports on key issues.

Some examples of outcomes from this work include:

- Poor engagement with communities in Hopton and Stanton regarding local changes to GP services led to calls by the committee for guidance that can help GPs making similar changes in the future. We proposed producing a guide jointly with the NHS and this was accepted (see page 66 for all of the details).
- The committee have asked that we

keep it informed about our work concerning all priority areas for HWS and, in particular, our work to engage young people about mental health and wellbeing (see page 88). They will use the final report from our work with schools to influence their thinking about proposals to transform mental health services in the county.

Quality Accounts

The Trusts that provide health services in Suffolk must produce a Quality Account that sets out information about the quality of care they provide and identifies priorities to improve quality for patients.

In 2016/17, a small group of our volunteers worked together to produce response statements on our behalf for all of the main providers of NHS services in Suffolk. Our statements must be included in the appendix of the reports unchanged.

The HOSC, which also has the right of response to QA reports, took the view that it would be appropriate for us to consider the content of the Quality Accounts for this year, and comment accordingly.

Safeguarding vulnerable people

This year we have improved care for some very vulnerable people. We take our responsibility to protect people in Suffolk from harm very seriously. All of our staff and some volunteers (role dependent) have received appropriate training. We have also developed policies to guide us in what constitutes appropriate responses to matters of safeguarding.

Throughout the year we have made

a number of safeguarding alerts to appropriate authorities after somebody has disclosed information to us about their local service. It is not our role to investigate such issues but we will always seek feedback on any service improvements implemented in response and have noted several across the year.

One example was in response to feedback received on one of our freepost comment cards that a deaf blind person was receiving poor treatment within their care home. The comment indicated that staff within the service were not able to communicate with the individual and that their post and phone messages were not being communicated. The person was unaware of what was being said about them during doctors visits because an interpreter was not available.

We immediately escalated the feedback according to our safeguarding processes and have since been informed that the care home concerned is receiving support and training to enable their staff to communicate with all residents including those with additional support needs.

A further example followed an enter and view visit to a care home in the county. Our visit prompted a relative to come forward with concerns about the care provided to their family member. We made a safeguarding referral and this resulted in a case conference with a variety of stakeholders including Suffolk County Council and the Care Quality Commission.

Following the case conference, we have continued to challenge the home about its care. It has provided an action plan that outlines its intentions to make improvements to the service.

The Peoples' Panel

The Peoples' Panel is a sub group of the Suffolk Safeguarding Adults Board (SAB) and is chaired by our Operations Manager.

The SAB has a clear commitment to engage communities in safeguarding and to promote the welfare of vulnerable adults. The role of the Peoples' Panel is to ensure that communities in Suffolk are represented. The Panel includes representation from a range of service user groups.

To help us achieve this more effectively, the Peoples' Panel will be appointing Lay Advisors who will bring a community perspective to the work of the Board, to think as a member of the public, to play a part in offering challenge, oversight and scrutiny to the decisions and policies made and produced by the Board.

In 2016/17, a successful event was organised by the Peoples Panel to help everyone understand a little more about safeguarding in Suffolk and to recruit lay advisors.

GP's and Primary Care

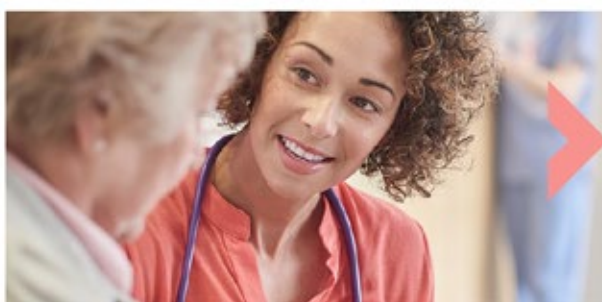
Most people experience contact with NHS services through their GP practice initially. That is why it is so important that we work pro-actively to educate GPs about the importance of listening and responding to feedback from patients and their families or carers.

We hold more feedback about GP practices than any other service. This is largely a result of important work completed by our Community Development Team. In particular, our

team has developed positive and ongoing relationships with several practices that have enabled us to talk to patients using their services.

These include (not exhaustive):

- Constable Country Rural Medical Practice
- Two Rivers Medical Practice
- Debenham Group Practice
- Combs Ford Surgery
- Siam Surgery



A new guide to help GP practices engage with patients when making changes to services

Helping GP's to engage with patients on service changes

The Suffolk Health and Overview Scrutiny Committee (see page 64) suggested that our local Clinical Commissioning Groups should work in partnership with us and other key stakeholders (e.g. NHS England) to produce a document that would help GPs to engage their practice populations more effectively when making changes to their services.

This followed concerns raised by local communities about the extent to which they had the opportunity to inform or be involved with recent changes to primary care in their area.

The outcome of this was a guide that includes links to useful information about engagement, contact details for Healthwatch, a mock engagement plan and real examples of learning (case studies) from across the county. In addition to devising a simple design layout for the guide, our teams have provided advice and feedback to inform the guide content.

Download your copy today from www.healthwatchsuffolk.co.uk/news/gpguide. Any queries should be directed to Suffolk Clinical Commissioning Groups Communications Team.



We have also completed work in partnership with GP services and commissioners as follows:

- We attended NHS West Suffolk Clinical Commissioning Group Community Engagement Workshops organised to establish a way to support GP Patient Participation Groups (PPG) in the West of the county.
- We have maintained our supporting role at the Constable Country Rural Medical Practice PPG meetings.
- We took part in the NHS Great Yarmouth and Waveney CCG Big Listen event by observing at Kirkley Mill Health Centre and sharing our findings.
- We have regularly engaged with patients in Felixstowe and with the Suffolk GP Federation about plans for greater collaboration between practices in the area.



We have always found working with Healthwatch Suffolk a very positive experience. They understand the pressures that general practice is facing and where it's been needed they have offered constructive advice to ensure we are communicating with patients in a clear and effective way. It is a relationship that we are keen to develop further moving forward and we very much hope it continues in the same manner.

David Pannell, Chief Executive of Suffolk GP Federation

Suffolk Primary Care

We have been working with 11 local GP practices to engage patients about their

new partnership called Suffolk Primary Care.

The new partnership aims to meet the ambitions of NHS England for GP practices to collaborate and work closer together. This is because GP services are under increasing pressure and face major challenges with the recruitment and retention of doctors.

It is hoped that, by coming together, the surgeries will be able to share resources and expertise, reduce the duplication of paperwork, offer role security to staff and explore the introduction of new models of delivering care (e.g. the use of other professionals to support doctors).

At this early stage we were asked by the partnership to speak with patients attending all of the practices involved. Our visits were an opportunity to explain what these changes will mean and to gather views from patients, including concerns they may have for their future care.

We have fed back a summary of the feedback we gathered to Suffolk Primary Care, which will inform its planning going forward.

The Pathology Partnership at Sudbury Health Centre

The Pathology Partnership is a joint venture between six NHS Trusts in the East of England that have come together to modernise delivery of pathology services for hospitals, GPs and patients.

People were telling us that they were experiencing difficulties with accessing appointments for blood tests at the Sudbury Health Centre.

We have been able to engage on a





Effective engagement with patients visiting the Sudbury Health Centre for blood tests meant we could influence improvements to this service.

regular basis with patients attending for appointments at the health centre and have shared our feedback with the Pathology Partnership so that issues can be addressed.

Patients told us that the process for booking an appointment was confusing and suggested that a pop-up banner guide would be helpful. This request was met by the provider and now helps to guide people through how to book or check in for appointments.

We have also promoted the opportunity for a volunteer to help people to navigate the system for checking-in at the health centre. Unfortunately, we have not been successful in finding a suitable individual at this stage.

The Pathology Partnership has also made changes to the service that will help it to meet demand. For example, in October 2016, it made changes to staffing that meant Phlebotomy Services could continue across lunch time.



The local phlebotomy provider introduced a new appointment and booking system into the Sudbury Health Centre early 2016. Unfortunately this caused a significant level of confusion and anxiety among the patients using this service as the IT needed to ensure smooth running was not reliable.

Healthwatch's representative Elizabeth Storer was a key member of the task and finish group that was put together to resolve all the issues this innovation caused. We were able to secure an effective IT link and a commitment to maintain the current level of service. Elizabeth led and delivered real time patient feedback that helped to shape the current service which was invaluable.

Lois Wreathall, Head of Primary Care (NHS West Suffolk Clinical Commissioning Group)



Hospitals

Ipswich and Colchester Hospitals

During the year, Healthwatch Suffolk has provided feedback to Ipswich Hospital about its draft Strategy for 2017-2022, ensuring an appropriate focus on patient engagement, and also the Hospital's Stakeholder Peer Review.

Colchester Hospital University NHS Foundation Trust (CHUFT) and Ipswich Hospital NHS Trust (IHT) are looking at different ways in which the organisations can work together to create a more sustainable future for both organisations.

Hospital leaders have explored the reasons why change is needed, the benefits to the Trusts in working together, and different ways in which this could happen. This might include:

- A merger of the two Trusts with full integration of clinical services
- A merger of the two Trusts with some integration of clinical services
- An acquisition of one Trust by another

The details of this new partnership will not be fully realised until at least April 2018.

Our Chief Executive is a member of the Ipswich and Colchester Hospitals Partnership Leadership Group, which is chaired by the Chief Executive of both Trusts (Nick Hulme). He will be advising on patient and carer engagement in the development of the implementation plan expected in summer 2017.

In addition, our Chief Executive is also the chair of the Patient and Carer Advisory

Reference Group for the Ipswich aspect of this programme.

Ambulance services

The East of England Ambulance Services NHS Trust hit the headlines in 2016/17 after a Freedom of Information request showed that £454,636 was spent on 81 lease cars for managers, including BMWs, Audis and Range Rovers, in 2015/16.

The news followed recent coverage that indicated the service performance in Suffolk was at its lowest level in February for around two years.

Feedback submitted to us from people across the East of England indicates that, whilst people are happy with the treatment received from service staff, consistency of performance and waiting for ambulances to arrive is an issue for patients and their families or friends.

We therefore encouraged the service to seriously review the reasons for its poorer performance and, in light of this latest news, to transparently review its approach to the leasing of unmarked vehicles.

Since this time, Andy Yacoub (Chief Executive of Healthwatch Suffolk) has been invited to contribute to the internal review of the Trusts vehicle leasing policy and has actively encouraged the Trust to think carefully about the outcome of this.

Local Pharmacy Services

In 2016/17, our team of Community Development Officers worked closely with the Suffolk Local Pharmaceutical

Committee (LPC) to deliver training to Healthy Living Pharmacy Health Champions.

The information sessions included details about Healthwatch Suffolk and the importance of encouraging local communities to share their experiences of using health and social care services with us.

Health Champions have signed up to become members of Healthwatch Suffolk. It is our hope that they will be able to encourage people to feedback about their use of services and have their voice heard. It will also assist Pharmacy staff to better signpost people who have concerns about local services.



Suffolk Local Pharmaceutical Committee (LPC) has been pleased to work closely with Healthwatch over the last year. Community pharmacies have been involved in ensuring that patients are aware of the role of Healthwatch Suffolk and how they can get involved to ensure that local services meet their needs.

At a challenging time for the NHS when redesigning services is crucial for financial stability, Healthwatch in Suffolk has established a strong voice in ensuring that the needs of patients are properly represented. What matters to local communities, matters to Healthwatch and we will continue to work with them to make sure that people in Suffolk have a voice.

Tania Frarrow (Chief Officer, Suffolk Local Pharmaceutical Committee)



NHS England

Performance Moderation of Clinical Commissioning Groups

Under the Health & Social Care Act 2012, NHS England has a duty to provide annual assurance to the Secretary of State on the performance of every Clinical Commissioning Group (CCG) in England.

In 2016/17, our Chief Executive was invited to be an independent panellist for the NHS Performance Moderation of CCGs across the whole of the Midlands and east region (61 CCGs in total). The purpose of this was to comment, observe and have a say in the gradings that are agreed about the quality of leadership across all of the CCGs.

Interpreting and Translation Review

Our BME and Diversity Sub Group (see page 20) has discussed and shared views with NHS England Midlands and East about its Interpreting and Translation Review that it is currently undertaking to look at the future of services in the region.



We thank Healthwatch Suffolk for attending the NHS England Midlands and East panel to help with our annual review of Clinical Commissioning Group leadership and related agenda items. The input provided on the process, documentation, the discussion points and decision making was insightful, considered, and challenging.

Healthwatch Suffolk reminded the panel of the impact of CCG leadership and decision making on patients, and continued to ensure the patient perspective was not overlooked.

In particular some excellent points of clarification were raised, prompting us to be more explicit in the rationale and reasons behind some of our assessments. One example included asking why we had a CCG red rated for leadership but green rated for STP engagement, for example, which helped with the consistency of the leadership and STP engagement assessments not only for this specific CCG but also overall.

Once again, thank you on behalf of myself and Graeme Jones, Regional Director of Operations and Delivery (and panel chair) for your contribution to the panel.

Lucy Smith, Senior Assurance and Delivery Lead (NHS England Midlands & East)

The Care Quality Commission

The CQC monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. It has a legal duty to listen to the things Local Healthwatch say about services. It means we are best placed to inform the work of the CQC with the experiences of local people.

Throughout 2016/17, we have continued worked pro-actively with the CQC to develop an effective working relationship through which information and intelligence about people's experiences of using health and social care services can be shared. This information exchange has often been targeted at informing CQC inspections of services used by Suffolk residents.

As described on page 56, we published a briefing following a successful campaign

to obtain feedback about the East of England Ambulance Service NHS Trust from across the East of England. The purpose was to inform the first ever CQC inspection of the service which was due to commence in April 2016.

The briefing was welcomed by the Lead Inspector of the service, who assured us that the data would be used to give the patients perspective in the final report following the inspection. The work was of particular value as the CQC's own engagement of patients was very limited.

We have also shared patient experience data with the CQC about the Norfolk and Suffolk NHS Foundation Trust (see our Let's Talk campaign on page 52).

National thematic review of child and adolescent mental health services

The Prime Minister has asked the Care Quality Commission to lead "a major thematic review of children and adolescent mental health services across the country" to identify what is working well and what is not.

We were pleased to represent local Healthwatch within this important review. We were one of just two local Healthwatch that were accepted to contribute to the CAMHS Thematic Review Advisory Group, which is tasked with:

- Challenging the review from a diverse range of perspectives
- Checking that the review findings and outcomes are relevant and timely
- Advising on partnership working and engagement activity

Our work with young people in the county to inform the transformation of services that support children and young

people's emotional wellbeing means that we are well placed to contribute to this piece of work.

Suffolk County Council

Working together in Adult Social Care - Information Sharing:

Healthwatch Suffolk is a participating member of Suffolk Provider Performance meetings. Led by Suffolk County Council and the Care Quality Commission they bring together local partners including Suffolk Clinical Commissioning Groups, Environmental Health and the Fire Service to share information about adult social care.

We use these important meetings to share the feedback we receive about local services and highlight any concerns. They are also instrumental in helping us to determine the location of our enter and view visits because they enable us to identify where the outcomes of our visits can have the most impact and potential for change.

The Suffolk Care Market Review

Cordis Bright, which provides consultancy, advice and research aimed at improving public services, were asked by health and care leaders to deliver a strategic care market review in Suffolk. The purpose of this was to ensure that the people responsible for making decisions about care could be informed about the challenges of current provision.

As a result of the review key stakeholders were brought together to shape and influence future provision of care in the county. Four working groups were established to explore important issues including the cost of care, recruitment and retention of care staff, managing

the demand for care and user and carer information.

We are chairing and actively contributing to the User and Carer Information Sub-Group of this review. We are also helping to inform the other areas of work identified above. The sub-groups have produced plans and recommendations that will be presented to senior health and social care leaders. The intention is that the recommendations will be delivered as part of the five year strategy for the commissioning and provision of care home services and associated care in Suffolk.

Care UK

Our Ambassadors Scheme

It is challenging to obtain the views of people that live within our county's care and nursing homes.

In particular, it is difficult for us to reach people that may be vulnerable or find it difficult to speak out about the standard of their care. That is why we took the decision to launch a scheme with Care UK through which we hoped to increase the amount of feedback we receive from people about their use of all services including those provided by Care UK.

The arrangements enable Care UK staff to feedback on the health and social care experiences that impact on their residents' care. This feedback might be about the Care Home itself, but could just as easily be feedback about, for example, GP visits; hospital admissions/discharge, dental appointments or district nurse care.

There will usually be four Healthwatch Ambassadors in each Care UK home. We have developed a toolkit for them to use and each home has a named

Healthwatch Suffolk Community Development Officer (CDO) who will provide support where needed. This includes an offer to attend relatives meetings and to share thinking on how Ambassadors can be proactive in talking to residents/relatives about sharing their experiences.

Our Community Development Manager has regular quarterly meetings with the Care UK Operations Director for the Eastern Region and the Director for Residential Services in Suffolk. We also keep in contact with its Regional Sales and Development Manager. These relationships help us to monitor progress and ensure continued development of the scheme at all levels.

Rural Coffee Caravan

Working with the Rural Coffee Caravan over the last year has continued to increase our reach into the more rural areas of Suffolk. They share our leaflets and information as well as encourage local people to feed back about the health and social care services they are using.

Healthwatch was invited to hold stands at the Queen's 90th Birthday Celebration Cream Tea events this year and these were a great success, giving lots of people the opportunity to share their experiences with us.

The Loneliness Event workshops at Eye and Bildeston highlighted the positive benefits that 'social prescribing' can bring in both rural and urban settings. Garry from the RCC also took part in our video at the Suffolk Show.

The RCC is a unique organisation with a fantastic team who make a real impact on the lives of people living in rural Suffolk, sharing not just information about services and support groups, but



Watch: Ann Osborn (Director, Rural Coffee Caravan) talks about our partnership.

also providing an often much needed conversation and a listening ear.

The RCC's Team is quite simply our eyes and ears, not only encouraging the public to share their experiences of health and care services, but also talking about to individuals about improvements to their health (or deterioration as the case may be) over time, perhaps due to NHS or care intervention and the quality of services provided to them.



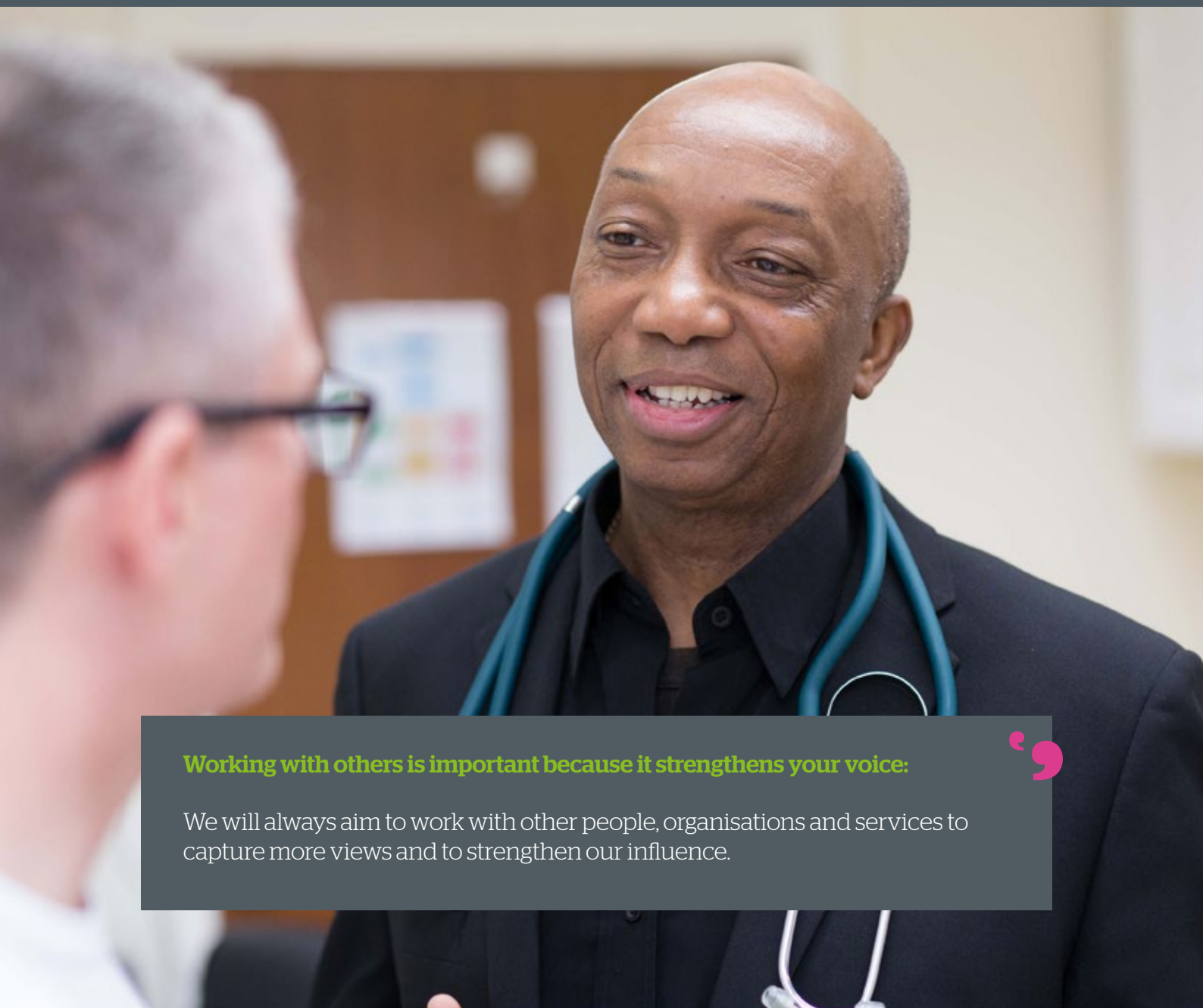
The Rural Coffee Caravan (RCC) is viewed by organisations and agencies seeking contact with elderly and vulnerable people as an effective channel to understand health and social care issues in Suffolk.

It is important to us that organisations choosing us to collect views and information from our visitors collate, understand, react to and deliver solutions to the concerns raised. We have evidence of, and absolute confidence that, Healthwatch Suffolk does this consistently and effectively. They have the strength of the law behind them, and

use this, and the information collected, to influence positive change.

Their success in becoming a key partner in the “Time to Change Hub” will have a direct and beneficial impact on the general and mental health and wellbeing of Suffolk people. The RCC will ensure our visitors have access to the Hub in the knowledge that Healthwatch Suffolk will deliver solutions to issues raised. They are a trusted and valued partner.

Ann Osborn, Chief Executive (Rural Coffee Caravan)



Working with others is important because it strengthens your voice:

We will always aim to work with other people, organisations and services to capture more views and to strengthen our influence.

Involving people in our work

Our volunteers

To be the independent effective voice of local people, Healthwatch Suffolk relies on a network of volunteers who support us to check local services are meeting the needs of the people using them and to gather feedback from communities.

Some people have experience of services as a patient or a service user and some have useful knowledge from previous professional roles. We know that much of our strength is rooted in their passion.

Our volunteers support us in a range of roles and this includes:

- Supporting our Community Development Team at community events.
- Visiting local services on our behalf (see page 26).
- Sitting on our governance groups such as our Board of Directors.
- Contributing to our sub-groups.
- Helping us in the office with day to day administration.

Our Volunteers in Numbers

Community Support volunteers	53 (Includes Care UK Ambassadors)
Enter and View Authorised Representatives	16
Board of Directors	9
Sub-groups	3
Office support volunteers	2

It is also noteworthy that a total of 167 people are signed up to receive information from and contribute to discussions held by our sub-groups.



"As a senior citizen, I enjoy volunteering at Healthwatch Suffolk because everyone is friendly. I do this because the sense of being useful and for being part of something worthwhile is important to me."

Teri, Office volunteer





Here's to Bob!

Bob is one of many people that help us to visit local NHS and care services. His reports can make a

"Volunteering for Healthwatch Suffolk has been a real eye opener into the way care homes and other care facilities function. I have found volunteering to be most rewarding.

"I have been able to make a contribution to the care sector by being able, as part of a team, to highlight shortfalls in the provision

of care within services. Care providers are willing to take on board our comments and react to provide a better environment for their clients, which is beneficial to all service users."

Volunteer with us...

Call 01449 703949 or email info@healthwatchsuffolk.co.uk.





it starts with
YOU

healthwatch
Suffolk



04

It starts with
you

Making your views count

We are all about using the things that you tell us to shape the design of local NHS and care services. Further to the outcomes achieved as part of our research and partnership work, in this section, we wanted to highlight one or two examples where your voice has really counted to shape, influence and improve services in the county.

In-Vitro Fertilisation (IVF) Services and Marginalised and Vulnerable Adult Services in Suffolk

People can still access IVF and MVA services in Suffolk after your views were heard by health leaders following a major engagement exercise.

We obtained many views from local people about proposals to change IVF and MVA services in Suffolk. Those views influenced health leaders in the county to decide that there should be no change to the current IVF policy of up to two cycles for eligible patients. It was also agreed that MVA services covering east and west Suffolk will be re-commissioned so that it continues to support the most vulnerable members of our communities.



Last Autumn we advised commissioners on how they could improve their approach to equality impact assessing proposed policy changes to local services, such as IVF and MVA services, covering for example advice on how to reach a wide range of service users. We have since worked hard to motivate our networks and the public to offer their views on such proposed changes and are pleased to note that this has been so impactful. The fact that so many made their views so clear has led to our local health leaders reaching this sensible conclusion.

Andy Yacoub (Chief Executive of Healthwatch Suffolk)



As one of our strategic partners Healthwatch Suffolk plays an important role in the way we commission NHS services. Its contribution in helping develop our plans for the next five years for NHS and social care has proved invaluable. Also we really appreciated the support the Community Development Officers were able to give us for our engagement about our IVF service and our provision for marginalised and vulnerable adults and children in summer 2016.

Dr. Ed Garratt, Chief Officer of the NHS West Suffolk and NHS Ipswich & East Suffolk Clinical Commissioning Groups



West Suffolk NHS Foundation Trust

Carers of patients within West Suffolk Hospital will receive more support after we raised concerns about feedback regarding the care for patients at the end of life and the support available to carers.

The feedback we received indicated that care for patients could be coordinated better from within the hospital. In particular, there were issues with regard to poor communication, continuity of care and a lack of support for carers. Information that should be given to families about support had not been made immediately available and there were significant problems with discharge planning.

The hospital will now support its staff to identify carers earlier. This includes:

- Placing envelopes in outpatient areas containing support information.
- Updating information contained in carer packs, which will be added to the carer's web page on the hospital's website.
- Further family carer awareness training will be delivered to wards to emphasise the benefit of packs for carers.
- Carers champions have been nominated across wards and departments.
- The detail of the case we raised with the hospital will be used as a learning tool for staff training.

As a result of our letter and other episodes of poor communication between the NHS West Suffolk Clinical Commissioning Group and West Suffolk

Hospital discharge planning team, a daily teleconference has been established to discuss all cases awarded continuing healthcare funding and waiting for care packages to be started or care placements to be found. This will, in turn, improve communication between the discharge planning team, patients and their families and carers.

The hospital has also informed us that it is currently reviewing how it can improve continuity of care for unplanned admissions to Oncology by focusing on whether patients admitted to the Macmillan Unit can bypass the emergency assessment unit to be admitted straight to a medical ward. A poster has been developed as a reminder for patients to contact the Macmillan Unit (MACU) if a patient becomes unwell.

With regard to end of life care within the Trust, an action plan that was in development prior to our contact with the hospital, highlights the following outcomes:

- A new end of life care champion has been identified for ward F7.
- Focussed staff training sessions are planned regarding end of life care issues and the referral process.
- An end of life care review was completed on ward F7 in March 2016.

We are pleased to hear of the steps that the hospital has taken and will be monitoring patient experience with continued interest.



Thanks to Pauline

Thanks to Pauline, people within her mothers care home are starting to get better care.

Pauline approached us after we had visited her mothers care home. She told us about problems with the care being provided including poor management of vulnerable residents and issues with hygiene.

"I approached Healthwatch because I thought they would listen. They did, and I have noticed improvements within the home. My mother is much happier now but there is more the home could do to meet her care needs. The carers do a brilliant job but there are simply not enough of them. At times, the team at Healthwatch have been the only people to listen and respond when things are bad."

#ItStartsWithYou

It doesn't stop there...

We will continue to talk to Pauline, sharing her experience and that of other people with those that have power to change things. We will always speak out to give vulnerable people in our local services a voice.

 @HWSuffolk

 /HealthwatchSuffolk



it starts with
YOU



healthwatch
Suffolk





05

Looking ahead

healthwatch

healthwatch.co.uk



Your voice where it matters most in NHS & care services - Our draft strategy 2017 - 2020

Alongside documents like our annual report and Communications and Engagement strategy, our strategy tells you how we intend to work to make a difference to your local NHS and social care services. This includes the issues that we will focus on and the factors that influence our decision making.

Our focus is on shaping all local health and care services but, to do the job well, we must decide on some specific priorities. That is why we proposed to work on five main areas, in addition to our core work and functions.

They are:

1. Mental health and wellbeing
2. Children and Young People
3. Primary care (e.g. GPs and dental services etc.)
4. Social care (including care/nursing homes and home care services)
5. Co-production

We have based our intentions for the next three years on our conversations

with local people but also on intelligence available to us from within our national network and the Suffolk health and care system.

We know from our work, and that of other local Healthwatch, that focusing on specific areas offers us the best opportunity to make a genuine difference to local care and makes best use of our limited resources.

Our intention going forward is to both increase our membership and involve members to a greater degree in our work. This is important because implementing our strategy cannot happen without the help and support of our staff team, volunteers and members.

Look out for more information about our strategy soon.

Generating our own income

We must recognise that we work within a network that has seen significant cuts to its funding over the last few years. To ignore this would be irresponsible and that is why we have been thinking about new ways to generate income for the purpose of supporting our core work and the betterment of health and social care in Suffolk.

This includes:

- Layout and infographics design work for other organisations.
- Commissioned research and service reviews for local statutory and voluntary organisations.

Discharge to Assess

One such project relates to a new NHS approach to reducing the number of Delayed Transfers of Care (DToC) from hospital.

DToC is the term used to describe people that are fit enough to leave the care of a hospital but that cannot be discharged because ongoing care is not readily available in the community. The prevalence of DToC is increasing and this is a concern because we know that increased hospital stays can lead to poorer health outcomes for patients.

One of the ways that health and social care leaders have been working to address this problem is through Discharge to Assess (D2A) models. They are being promoted nationally by NHS England to help people leave hospital when they are medically ready to be discharged, to then continue receiving re-enablement and care, and the associated assessments, in the community.

Pilots have been underway to introduce D2A in east Suffolk and also in the west of the county for patients in West Suffolk Hospital. We worked with

all partners involved to qualitatively evaluate these pilots so that we can shape what such models of care in Suffolk might look like in the future.

Our approach involved a “deep dive” into the circumstances surrounding the discharge of a small sample of patients that have followed D2A pathways. This enabled us to build a detailed picture of the care and support that has surrounded those patients on their journey home. We interviewed patients, close family members and professionals involved with the persons’ care.

The development of D2A models must be supported by continuous service evaluation that includes the lived experiences of patients. That is why all partners involved welcomed our involvement, which will ensure that the voice of patients is heard throughout the development of D2A models of care in Suffolk.

The summary reports from this work are available to download from our website. Visit:

www.healthwatchesuffolk.co.uk/our-reports-2/



Ipswich and East Suffolk Clinical Commissioning Group (IESCCG) has been working collaboratively with health, social care and voluntary community services to develop and implement a Discharge to Assess (D2A) model.

D2A is a nationally recognised and mandated requirement which focuses on support and providing opportunities for people to regain lost function and independence after a period of ill health. This may have required acute hospital input or simply a deterioration in an individual's health within their existing home environment. Healthwatch Suffolk has supported IESCCG by being part of the project group and has contributed considerably to the design of the D2A model programme of work.

In late 2016, early 2017 the D2A model was piloted in Felixstowe in order to test this new way of delivering patient care. As part of this pilot, we asked Healthwatch Suffolk to undertake a qualitative evaluation by developing a semi structured questionnaire, meeting with the patients (and their carer/ family member) and front-line staff involved in the D2A pilot to seek their views on the effectiveness of the processes in place to deliver the model. This work was effectively a deep dive into a small number of cases.

Healthwatch Suffolk undertook the work effectively and within the identified timescales. Some key recommendations were presented which were welcomed by colleagues across the health and care system in Ipswich and East Suffolk, and are now being used to 'roll-out' D2A across the rest of Ipswich and East Suffolk.

Mark Cooke (Senior Transformation Lead) and Gillian Mountague (Transformation Project Manager) - Ipswich and East Suffolk Clinical Commissioning Group



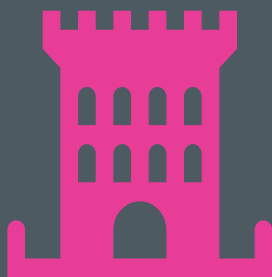
That lightbulb moment...

Whilst not an immediate core priority, business development must be a continuous focus for us in the years ahead. In 2017/18 and beyond, we will continue to generate new ideas for how we can ensure Healthwatch has a long term future in Suffolk.

Look out for more information on our website.

Current and Future Projects

There are several projects that are currently running and due for publication soon or still in the early phases of development. We will describe a few of them within this section.



Mental health in prisons

We will be working to engage with prisoners to understand their perception of issues around mental health and wellbeing within the prison system. The work will inform the strategic direction for health services in the justice system 2016 - 2020.

We have recently received a letter from the Governor of HMP Norwich asking that our research proposal is submitted to the Integrated Research Application System (IRAS). This follows discussions with the Health and Justice Commissioning Lead for the East of England, who is also happy to move forward with the proposal in its current format.

We are hopeful that this project will be able to progress during the forthcoming year and will share more information on our website as and when it is available.



Spirituality in care

This piece of work aims to promote discussion and reflection by providers of care and their teams, with the aim of helping every resident in Suffolk to experience responsive, spiritual care, which is good or outstanding.

On completion of this work, we aim to share and promote good practice by making our report available to care home provider forums in the county. More information will be available on our website within the first half of 2017/18.



Working with others is important because it strengthens your voice:

We want to influence changes to the way support is delivered to children and young people and their families. See "My Health, Our Future" from page 80).



My Health, Our Future

Our ongoing project, “My Health, Our Future” is giving pupils and teachers across Suffolk the opportunity to talk about their views on mental health and wellbeing and about how their school could improve its approach to maintaining the wellbeing of young people. We are working closely with eight schools.

The students across all year groups are taking part in a survey that has been embedded into lessons over the course of a term. It explores their perceptions of mental health and wellbeing in general. It also seeks to assess their current understanding of how to look after their wellbeing (coping) and how to interact with those who may be suffering from poor mental health.

In addition, we will soon be asking teachers to share their views about what more could be done to support young people’s emotional wellbeing. They will be asked what they think about the availability of mental health support in Suffolk and how the current curriculum engages pupils with the subject of mental health and wellbeing.

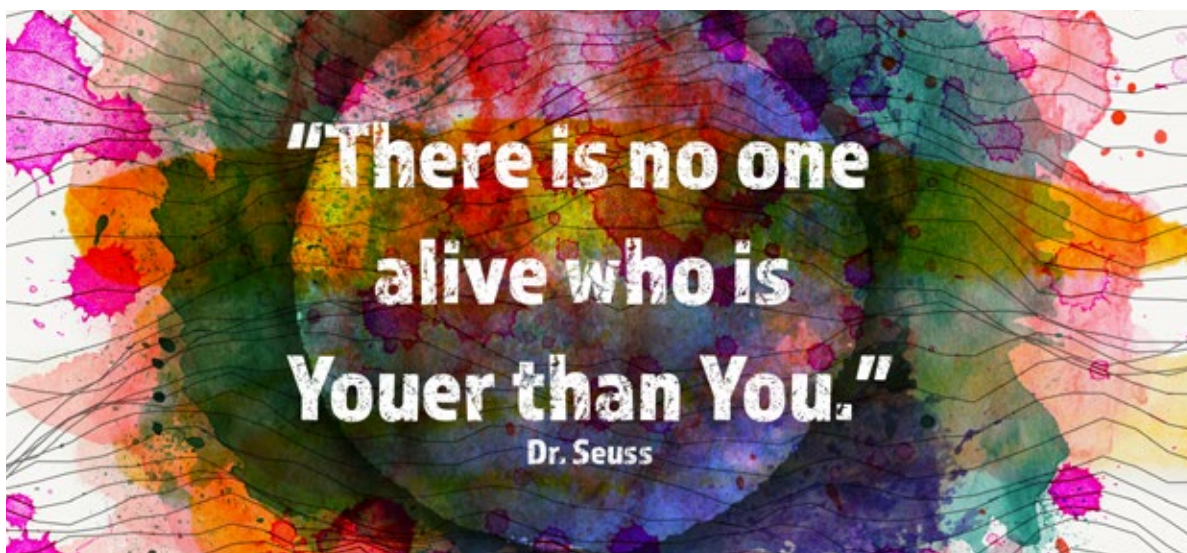
Here is why its important...

This work is commissioned to inform and be part of something called the Suffolk Children and Young People’s Emotional Wellbeing Plan 2020 (EWB2020). This plan will determine the availability of support for young people and families across the county.

EWB2020 sets out how it will improve children and young people’s emotional wellbeing and mental health by changing services and ensuring people have better knowledge about how to support young peoples mental health. The plan was developed by people responsible for making decisions about what services should exist in Suffolk with involvement from young people, families and schools.

You can read more about the EWB2020 by visiting: www.healthysuffolk.org.uk/healthy-children/EWB2020/





Let's get creative about improving mental health and wellbeing in Suffolk

As a part of this project, we are encouraging young people to get creative about their understanding of mental health and wellbeing.

We have tasked students attending the schools that are taking part in our "My Health, Our Future" project with submitting something that is personal,

powerful and that represents what mental health and wellbeing means to them. It could be a photograph, artwork, a poem or even a song. We don't mind!

We can't wait to see the results, which will be shared with NHS and care leaders as a part of the final publication of our "My Health, Our Future" work. Watch this space for more details coming soon.



Over the course of the last 12 months Healthwatch Suffolk has supported Ipswich and East Suffolk and West Suffolk CCG's in its programme of work; namely Children's Emotional Health and Wellbeing. We have commissioned Healthwatch Suffolk to support 8 schools in the County to conduct surveys with pupils in order to get a better understanding of the schools emotional health and wellbeing needs. The findings of which will help inform the future commissioning of services and will be presented in a 'State of Suffolk' report in 2017.

Health watch Suffolk is considered a valuable partner to Suffolk CCG's and we look forward to building stronger alliances with our joint programme of work going forward.

Eugene Staunton, Associate Director of Transformation & Lead for Children & Young People, Mental Health, Maternity & Learning Disabilities (NHS Ipswich and East Suffolk Clinical Commissioning Group and NHS West Suffolk Clinical Commissioning Group)





#**YOUR HEALTH MATTERS**

healthwatch
Suffolk

A GUIDE TO WELLBEING

**Text a school nurse on
07507 333356**

**Suffolk Wellbeing Service
0300 1231781
www.wellbeingnands.co.uk**

**4YP - Services that improve the social,
emotional, and physical health and
wellbeing of 12-25 year olds
01473 252607 www.4yp.org.uk**

Wellbeing means more than just being happy, it means feeling able to cope with the challenges life can throw at us. If you are unhappy or facing a difficult situation, talk to someone you trust - this could be a parent, friend, teacher, or even your GP for some professional support.

**The Source
Information and advice
for young people in Suffolk
www.thesource.me.uk**

**Samaritans
116 123
www.samaritans.org**

**Beat - The UK's eating
disorder charity
0808 8010711
www.b-eat.co.uk**

**Suffolk MIND
0300 111 6000
info@suffolkmind.org.uk**

**Childline
0800 1111
www.childline.org.uk/info-advice**

**Papyrus - Prevention
of young suicides
0800 068 41 41
www.papyrus-uk.org**

**Young Minds - Committed to improving the emotional
wellbeing and mental health of children and
young people 0808 802 5544
www.youngminds.org.uk/noharmdone**

**Anorexia & Bulimia Care UK
03000 11 12 13**

**PACT -Advice for parents and carers
Contact Bec: (07801) 330827
or Anne: (07834) 083447**

If you would like more information, in confidence you can call the Healthwatch Suffolk Information and Signposting Line on 08004488234 (Freephone) or by email to info@healthwatchsuffolk.co.uk

Date of publication: April 2017

Improving awareness of mental health and wellbeing services for young people in Suffolk

To support the delivery of our “My Health, Our Future” project in schools and also our local Information and Signposting Service (see page 38), we have developed a poster and A5 postcard that aims to share information with young people about sources of support for better mental health and wellbeing.

There has been an excellent response to these materials locally and we have made them widely available to statutory bodies

(E.g. the police and hospitals) as well as schools and local organisations. The response from local organisations and networks on social media has also been very positive.

These materials are free to download from our website. Hard copies may be available on request. Please contact 01449 703949 or email info@healthwatchsuffolk.co.uk to enquire.



Because supporting the wellbeing of our counties young people is more than just important; its crucial to their development

Our signposting postcard was circulated to every student in schools participating in our “My Health, Our Future” project to help any young person that may be experiencing any form of mental health or wellbeing distress.



Healthwatch Suffolk continues to enable patients and carers to have their voices heard with regard to local health service issues. Their work helps to create important information resources within Suffolk. Its work exploring Young People's Views on Mental Health is providing a unique platform for young people to talk about sensitive and controversial subjects without the fear of being stigmatised. Their research continues to prove invaluable and very relevant to many other organisations.

Kirsten Alderson (Chief Executive, Suffolk Family Carers)



time to change suffolk

let's end mental health discrimination

Suffolk has been named one of the first Time to Change hubs in England. It is a new partnership of local organisations and mental health champions committed to improving local attitudes and behaviours towards people experiencing mental health problems.

The new hub is being created to combine the insights from the Time to Change campaign, run by charities Mind and Rethink Mental Illness, with local knowledge to support communities, workplaces and schools to take action in their area. It's part of Time to Change's broader strategy to embed and sustain its social movement in local communities.

Time to Change Suffolk is being co-ordinated by a local group of organisations with an interest in mental health called the Voluntary and Strategic Partnership (VASP). We are a significant contributor to the project.

In 2017/18, this will include:

- Communications and engagement to support the hub.
- Signing up to the Time to Change Employers Pledge and encouraging other organisations to do the same.
- We will use our engagement activities as opportunities to talk about mental health and to encourage people to share their experiences.



**BE IN YOUR
MATE'S CORNER**

1 in 10 young people will experience
a mental health problem this year.
If your mate's acting differently, step in.
#inyourcorner

Reducing mental health stigma: One of the ways that we have been contributing to this piece of work is by helping to promote national time to change campaigns such as #inyourcorner that is targeted at young people.

Sustainability and Transformation Plans

Our health and social care services continue to face big challenges. People are living longer with ever more complex needs and the type of care that people need is changing. Our health and social care services therefore need to change too.

If we continue spending money on services as we are, there will be a £362 million overspend across Suffolk and North East Essex, and close to £500 million in Norfolk and Waveney, in five years' time.

Local leaders have been working together to develop plans that seek to ensure the future of our local NHS and social care services. These are called Sustainability and Transformation Plans. They will show how local services will evolve and become sustainable over the next five years, ultimately delivering something called the NHS Five Year Forward View. This Forward View will, in essence, aim to do the following:

- Bring about a radical upgrade in prevention and public health;
- When people need health services,

patients will gain far greater control of their own care;

- The NHS will take steps to break down the barriers in how care is provided between family doctors and hospitals, between physical and mental health and between health and social care;
- Local health communities will be supported by the NHS' national leadership to choose from amongst a small number of new care delivery options;
- Across the NHS, urgent and emergency care services will be redesigned to better integrate between A&E departments, GP out-of-hours services, urgent care centres, NHS 111, and ambulance services.

Healthwatch Suffolk is interested in two such Sustainability and Transformation Plans (STPs):

- North East Essex, West & East Suffolk, locally named "Local Plan for Health and Care"; and
- Norfolk and Waveney, locally named "In Good Health".



Healthwatch Suffolk have been key partners in the Suffolk & North East Essex STP over the last year. As well as participating in the development of the plan itself, Healthwatch have played an important role by offering a focal point for the public and patients to access and feedback on the plan. Healthwatch leaders continue to work alongside other leaders in our STP system to develop our approaches to STP governance, communication and engagement.

Susannah Howard, Programme Director (North East Essex, West and East Suffolk STP)



Healthwatch Suffolk is mindful of the strategic importance of these Plans, which rightly involve other sectors such as social care and housing, and is therefore prioritising every opportunity to be engaged in the process of developing them.

In terms of STP engagement of Healthwatch Suffolk, the North East Essex, West and East Suffolk STP has involved us fully, from the outset. Norfolk and Waveney STP has unfortunately not been as mindful of the need to prioritise engagement and communication, to-date.

We are doing so from the perspective of an independent voice, amongst what are otherwise commissioners and the larger providers of health and care services. We are working alongside and in collaboration with Healthwatch Essex and Healthwatch Norfolk.



More than just a seat at the table - We are your mouthpiece:

These plans can seem very distant from users of services. Ultimately, people just want the services to be there when they need them to be.

STPs are not currently well defined and, with lots of decisions being made behind the scenes, your voice can be lost. Our independence means that we will always stand up for what we think is right and will do so on the strength of what people tell us they need from their local services.

We will speak out where necessary, to ensure local people have the best chance to influence the future of health and social care in Suffolk. Look out for more information as and when it becomes available on our website.





Making sense of complex issues:

Your views are so important to shaping the future of care in the county but we know that the NHS and social care services are not always very good at making things easy to understand for people that do not work within the "system".

Our job is to make sure that you can have your say on changes to services in a meaningful way. Look out for updates on our website.



06

Our people

Involving people in our decision making

Until the latter half of 2016/17, we had two levels of membership (friends and members). The Friends category of membership is no longer in use. We took this decision because:

- It was complicated to manage two levels of membership.
- It is now easier to determine who can vote at our Annual General Meetings.
- We want our members to become more engaged in what we do.

Currently, members receive our annual report and accounts, have the right to vote at our AGM and elect the Board of Directors. As part of our new strategy, we will be exploring new ways for members to get involved in shaping and improving care with us during 2017 and beyond.

Our Board of Directors

Our Board is comprised of up to 10 volunteer directors and the Chief Executive. It is our governing body, and oversees our strategic and operational activities.

Its overall responsibilities are to:

- Establish our vision, mission and values
- Set company policy, strategy and structure
- Monitor progress towards achieving our objectives

- Seek assurance that systems are robust and reliable
- Promote a positive culture

All Board meetings are held in public. Minutes and agendas for the meetings are posted to our website.

Visit:

www.healthwatchsuffolk.co.uk/about-us/board-meetings-and-papers/

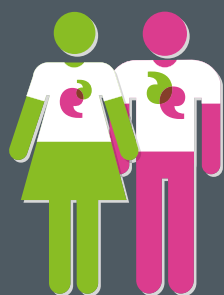


In 2016/17, we announced the appointment of three new volunteers to the Healthwatch Suffolk Board of Directors. They are Nigel Mann, Bal Kaur Howard and Steve Pitt.

We have more places that we would like to fill. We will be seeking Directors with knowledge and expertise in human resources, legal, research and/or marketing.

Healthwatch Suffolk Directors 2016/17

Andy Yacoub (Chief Executive)	Member since December 2015
Dr Tony Rollo (Chair)	Member since April 2013
Fiona Ellis	Member since July 2013
Elaine Aylott	Member since January 2015
Barbara Richardson-Todd	Member since March 2014
Bal Kaur Howard	Member since January 2017
Nigel Mann	Member since January 2017
Steve Pitt	Member since January 2017
Jeff Stern	Ex officio member of the Board
Julie Harris	Ex officio member of the Board
David Evans	Resigned



Membership means that you receive all of our latest opportunities to shape health and care in Suffolk but it also means that you have a say in how our organisation is run. You can sign-up online or by calling us on **01449 703949**. Visit: [Http://www.healthwatchsuffolk.co.uk/membership/](http://www.healthwatchsuffolk.co.uk/membership/)

Comments from individuals and groups are always welcomed about our activity and the decisions we take in your interest.

The best way to become involved with our decision making and activity is to become a member. Visit:
www.healthwatchesuffolk.co.uk/membership/

Shining the spotlight on mental health at our Annual General Meeting 2016

One of the best ways to influence our decision making is to attend our Annual General Meeting (AGM) at which you may have the opportunity to vote on important matters that affect our company such as those relating to our Board of Directors.

We were pleased that many people attended our AGM in 2016 to find out about our work and to hear interesting talks by our guest speakers (Norman Lamb MP and Natasha Devon MBE), which had a specific focus on mental health.

Norman Lamb delivered a speech about his sincere concerns for the future sustainability of NHS and social care services, indicating that we risk "sleep walking toward a disaster" unless action is taken to address the serious challenges facing our local and national health and care system.

He also shared personal reflections on his experiences of trying to access NHS care for his son, who was diagnosed with Obsessive Compulsive Disorder (OCD) at the age of 16. He described inequalities in the system that mean physical health care is prioritised over mental health care and that he believes prevents people from getting the care they need.

Natasha Devon MBE spoke about the three skills that she believes can be incorporated into school culture to promote good mental health. She described these as critical thinking, teaching coping mechanisms and talking about emotions in a healthy way.

She also spoke about the approaches needed to address the mental health needs of different individuals. In particular, she focussed on what is needed to address the mental wellbeing of men.



View our YouTube playlist to see what Natasha Devon MBE and Norman Lamb MP spoke about at our AGM 2016.

A date for your diary...

Our AGM for 2016/17, will be held on 10th October 2017 and will have a social care theme. More details will be available on our website and in our newsletters.





"I don't want to live in a country where you can get great care if you can afford it but you don't get anything, or you are left waiting too long, if you can't afford it – but that is the reality of what we are heading towards..."

Norman Lamb MP at the Healthwatch Suffolk AGM 2016

Our AGM 2016 encouraged people to think about the challenges facing mental health services in the county. Norman Lamb MP (Top right) and Natasha Devon MBE (Bottom right) were our guest speakers on the day.



"If you don't teach children healthy coping mechanisms, then they will find their own..."

Natasha Devon MBE at the Healthwatch Suffolk AGM 2016





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Our finances

Please see our abbreviated accounts below. The figures are correct at the time of publication and are subject to auditors inspection.

Our full accounts will be available on request. Please call 01449 703949 or send an email to info@healthwatchsuffolk.co.uk.

Turnover	£488,471
Administrative Expenses	£513,486
Other operating income	£42,663
Operating Surplus/ (Deficit)	£17,648
Interest receivable & similar income	£844
Surplus/(Deficit) on ordinary activities before taxation	£18,492
Tax on surplus/(Deficit) on ordinary activities	£2,150
Surplus/(Deficit) for the financial year	£16,342

Our accounts will also be presented at our fourth Annual General Meetings (AGM), which is currently due to take place in October 2017. Please see our website and news-letters for more information and to book your space.



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Contact us

Getting in Touch

Healthwatch Suffolk CIC is commissioned by Suffolk County Council to deliver the statutory activities of a Local Healthwatch in Suffolk. The contact details for our registered office are as listed below.

Address	Freepost RTTY-CEUT-LCRH Healthwatch Suffolk CIC Unit 14, Hill View Business Park Old Ipswich Road Claydon Ipswich IP6 0AJ
Telephone	01449 703949 / 08004488234 (Freephone for Signposting Service)
Email	info@healthwatchsuffolk.co.uk
Website	www.healthwatchsuffolk.co.uk

The design, layout and graphics contained within this report have been created by the Healthwatch Suffolk Information Services Team. For a free quote, please contact us as above.

We will be making this annual report publicly available on or before 30 June 2017 by publishing it on our website and sharing it with Healthwatch England, the Care Quality Commission, NHS England, Clinical Commissioning Group's, our local Health and Overview Scrutiny Committee, and our local authority.



If you require this report in an alternative format please contact us on 01449 703949 or email info@healthwatchsuffolk.co.uk.

We will be making this annual report publicly available by 30th June 2017 by publishing it on our website and circulating it to Healthwatch England, the Care Quality Commission, NHS England, Suffolk Clinical Commissioning Groups, the Suffolk Health and Overview Scrutiny Committee, the Suffolk Health and Wellbeing Board and our local authority (Suffolk County Council).

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

If you require this report in an alternative format please contact us on 01449 703949 or by email to info@healthwatchesuffolk.co.uk

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We are accredited with the Suffolk Information Standard...

See inside for more information and details about how we have been working with partners to improve information available to people in the county.

