



# Annual Report

## 2020-21

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## Get in touch

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Email: [yoursay@healthwatchcoventry.co.uk](mailto:yoursay@healthwatchcoventry.co.uk)

### Find out more about our work

Website: [www.healthwatchcoventry.co.uk](http://www.healthwatchcoventry.co.uk)

### Join our network

[www.healthwatchcoventry.co.uk/join-us](http://www.healthwatchcoventry.co.uk/join-us)

### Or follow us

**Twitter:** @HealthwatchCov

**Facebook:** @Healthwatch-Coventry

**Instagram:** @HealthwatchCoventry

If you need this report in an alternative format please contact us:

Email [yoursay@healthwatchcoventry.co.uk](mailto:yoursay@healthwatchcoventry.co.uk)

Or phone 024 7622 0381

## We are here to make health and care better

We are the independent champion for people who use health and social care services in Coventry. We're here to find out what matters to you. We help make sure views and experiences shape services, by sharing what local people think and experience with those who have the power to make change happen.

## Helping you to find the information you need

We help people find the information they need about NHS and care services in Coventry. This has been vital during the Coronavirus pandemic with the ever-changing information and restrictions limiting people's access to health and social care services.

## Our goals



### Supporting you to have your say

We want more people to get the information they need to take control of their health and care, make informed decisions and shape the services that support them.



### Providing a high quality service

We want everyone who shares an experience or seeks information from us to get a high quality service and to understand the difference their views make.



### Ensuring your views help improve health and care

We want the NHS and care services to use local people's views more to shape health and care support today and for the future.

## How we run

The local charity Voluntary Action Coventry has a grant funding agreement from Coventry City Council to provide Healthwatch Coventry. This is known as a hosted Healthwatch arrangement. Find out more about Voluntary Action Coventry from [www.vacoventry.org.uk/](http://www.vacoventry.org.uk/)

# Message from our Chair

In this report we are reflecting on an extraordinary twelve months in the history of health and care - locally, nationally and globally due the COVID-19 pandemic.

We have all seen or experienced the effect on the provision of health and care services.

It has inevitably also affected the work of Healthwatch Coventry. The face-to-face visits usually made by our volunteers to see how services run were paused, as was our face-to-face community outreach work.

This year we refocused to provide information to local people about the impact of the virus, the rules and restrictions, how to access services and, most recently, about vaccination.

All this occurred at a time when it was necessary for our funding contract to be renewed. I am delighted to confirm that Healthwatch Coventry moved to a new 3-year funding agreement in August. The new arrangement has provided welcome stability. We have now restructured our staff, with new people joining the team.

We have paid close attention to changes that have occurred within the NHS, many of which are ongoing. They include the establishment of a new, enlarged Clinical Commissioning Group for Coventry and Warwickshire. Health and care services have also been significantly adapted to cope with the restrictions caused by the pandemic. We have been listening to what this means for those who use them.

The NHS had already planned to develop the delivery of services digitally, embracing the use of technology. That process was accelerated dramatically as a direct result of the pandemic. One of the biggest changes is GPs conducting appointments virtually or on the phone. We have monitored this and will continue to do so. It has been an issue of concern to our Steering Group that telephone triage and phone/video consultation could become the norm when the impact on patients and outcomes has not been evaluated. We know that some people experience barriers to accessing services this way.



I wish to thank and pay tribute to our Steering Group, and to those volunteers who continue to support us, despite all the difficulties. Thanks are also due to our staff, those who have joined us and those who have left us in the past year.

The success of the remarkable vaccination programme and the way the public has responded means we can hopefully look forward to more settled times ahead.

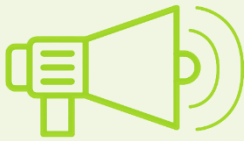


This year we have adapted what we do to help support people during this difficult year and to ensure the views and interests of patients and the public are heard



- Stuart Linnell

# Highlights from our year



We heard from

**426 people**

this year about their experiences of health and social care.

We provided advice and information to

**335 people**

by phone and email this year.

There were

**11,990 visitors**

to our website information.



Our volunteers gave **1006 hours** of their time this year.



We published **7 reports** about the improvements people would like to see to health and social care services.

This led to:

- Those responsible for NHS and care service hearing the experiences of local people and care home managers resulting from COVID-19 changes
- Care home actions to address improvement to physical access and dementia friendly design and addressing residents' hearing loss issues, following our visit
- Work to improve GP websites after we looked at them all and identified areas for improvement
- COVID-19 vaccination public information produced to address issues we raised
- Easy read information about shared records produced by lead agency after our feedback



We received **£249,716 in funding** from our local authority in 2020-21, 4% more than the previous year

# Providing information

Our biggest focus this year during the Coronavirus pandemic has been to provide information to local people. To help individuals to find their way around NHS and social care services and get the information or help they needed.

## What did we do?

- We changed how we delivered our Information Line service. This moved from Citizens Advice Coventry to within the staff team at the beginning of November.
- We launched a new Healthwatch Coventry website with new content.
- We created and adapted information to help people understand changes to local services and changing rules related to Coronavirus restrictions.
- We created a specific section of our website to hold up to date information to help local people understand who is eligible for and how the vaccination programme practically works to fill an information gap.



## How many people did we help?

- We answered 335 information enquiries from individual local people
- 185 by phone, 143 by email and 7 in other ways.
- 11,990 visits to our website
- Between January and March 2021 we had 6,024 website users. Our specific web page on COVID-19 vaccination had 2076 visits.



We answered 28 individual questions about COVID-19 vaccination and vaccination related queries were 42% of our total enquiries between January and March.

Our social media channels had reach impressions of 140,471. During April - June we had a particularly high reach from our social media.

## Top 4 things people contacted us about



**14%** Access to services

**11%** Attitude and communication



**13%** Concerns about quality of care



**9%** COVID-19 vaccination questions

## Examples of how we helped



### Mick

We helped Mick to get a full reimbursement for travel costs to a specialist NHS appointment in London. He was originally awarded only 13.5% of the cost by the NHS, even though COVID-19 restrictions meant there were no other travel options available. He had tried to resolve it but departments were blaming each other.

We helped by checking the guidance about what expenses could be reimbursed and which organisation was responsible. We provided information about how to draft a letter explaining mitigating circumstances and where to send this to. Mick then got the full amount paid into his bank account.

### Zara

Zara is a carer for her disabled child. She has no other support. She was very worried that if she got COVID-19 there will be no-one to look after her child. She had tried to register as a carer at her GP practice but they told her she is a parent not a carer.

We provided links to the GOV.UK web content and the NHS pages where they emphasise that unpaid carers are important and are recognised for vaccination as she could show this information to her GP practice. We also provided information about the work of the local Carers Trust and carers support groups for help in being recognised as a family/unpaid carer.



NB Names have been changed

## Contact us to get the information you need

If you have a query about a health and social care service, or need help with where you can go to get support, get in touch.

Online [www.healthwatchcoventry.co.uk](http://www.healthwatchcoventry.co.uk)

Phone 0300 0120315







## Now: access variation and digital exclusion

When we entered the first Coronavirus lock-down NHS services had to change how they provided their services very rapidly. For example GP surgeries moved to speaking to people by phone and some had access to video conferencing technology. For a while people also did not contact services so much, sometimes thinking they were closed.

All that we had already heard from local people about digital approaches was a really useful insight. We promoted what people had said and our recommendations to campaign for more understanding of the different needs people have.



Healthwatch England heard what people all over England were saying to all the local Healthwatch. They raised concerns about digital access and exclusion through their national work.



We know that these kinds of appointments do not work for everyone. We heard concerns about the accessibility of remote care for people with additional communication needs, as well as people who do not use the internet. People also told us that digital or telephone appointments and assessments are not always suitable for people living with dementia, autistic people, and those with learning disabilities.



- Healthwatch England

Healthwatch England worked with National Voices, Traverse, and PPL as we explored people's experiences of remote appointments, further leading to the report [The Dr Will Zoom](#) you now.



There has also been a more recent focus on access to GP appointments and variation in access and approaches being taken. This leaves some people struggling to talk to a GP.

In Coventry our Steering Group has spoken to local NHS leader about the issues people are experiencing with access to some GP services. We have also set up regular meetings with the GP IT lead at the Clinical Commissioning Group and promoted our findings to the local Primary Care Networks.

Healthwatch England has called on NHS England to act and new guidance has been issued to GP practices.



# Information for patients and public



## Then: work for better information to help local people access NHS and care services

We have done many pieces of work aimed at improving the information local people get about health and care services. Too often information in letters, in leaflets or on websites is hard to understand and it does not help people to understand local services, where to access services or what is happening to them.

For example:

- Our work looking at hospital discharge showed that information for people being discharged from hospital did not empower people to understand what was to happen next and we set up a group with key people from different organisations to look at changes to improve this.
- Our work talking to people about GP services showed that people wanted more information from their GP practices.
- Information about record sharing between services was too complicated for people to understand.
- We identified some services where the information did not help people to understand what they offered and we contributed to a changed approach.



## Now: challenges around informing people

### GP website review

We looked at the websites of all local GP practices to see how information about COVID-19 and how to access GP and urgent care was communicated.

We found a varied picture with just 51% (28) of practices providing updated website information about how COVID-19 has impacted on how to access GP appointments. Whilst 78% (42) of websites had information about COVID-19 such as symptoms and what to do if you had symptoms and/or information about testing.

We identified how websites could be made clearer and easier to use and demonstrated good and bad examples of information content. We recommended that patients are involved in user testing websites, there is more consistency between GP practices and more focus on GP website content through the new groups of GP practices working together (Primary Care Networks).

As a result, one Primary Care Network told us they would use what we had said as they were putting in place a new website for their member GP practices.

The findings were discussed by other Primary Care Network leads at their meeting.

The Clinical Commissioning Group said it would be responding to the issues raised via work it will be co-ordinating under a 'Digital First' funding stream for GP practices and that this gave the opportunity to improve website design and patient focus.



### Review of information about sharing of records

We provided feedback on draft information about joined up health and care records, which was aimed at the public.

We fed back how this could be made clearer and identified words and terms which might not be understood by everyone. We also asked about plans for getting information to different people.

The information was changed and developed and easy to read information was produced.



# Responding to COVID-19

## Experiences and learning in care homes

Between 6 July and 7 August 2020 we spoke to 71% of residential care home managers in Coventry and heard their experiences and views about the impact of COVID-19 on the services they provide. They also shared examples of what worked and what did not.

We asked questions about the impact of COVID-19 on delivering care, residents' wellbeing and on staff. We also asked about support from NHS organisations and the Council, hospital discharge and for reflections on what worked well and what could be better.

## What we found

Care home managers said the commitment of staff, quick and open communication, support from the CCG and the infection prevention control team and the use of technology had all been positive.

### Areas where things could have worked better were:

- Difficulties managing the amount of information received
- Concerns about access to testing for residents and staff in care homes
- Hospital discharge process and identifying individual's needs
- Guidance around protective equipment (PPE) not clear

Read more from COVID-19 experiences and learning in Coventry care homes - [www.healthwatch.co.uk/reports-library/covid-19-experiences-and-learning-coventry-care-homes](http://www.healthwatch.co.uk/reports-library/covid-19-experiences-and-learning-coventry-care-homes)

## How the pandemic changed people's experiences of services

In summer 2020 we worked alongside Healthwatch Warwickshire to find out the impact changes to services resulting from COVID-19 were having on local people. Coventry people highlighted:

- Challenges around getting the right information for them
- Impact of service changes due to COVID-19 e.g. outpatient appointments delayed or tests postponed
- Mixed experiences of the use of non face-to-face NHS contact (e.g. by phone or video)

38% said that changes to health care services was the area they found it hardest to get information about

56% identified an impact on their mental health, however most were not seeking outside help

Later in the pandemic we gathered more stories and experiences of services and produced a second report - Lived experiences of using Coventry NHS services - [www.healthwatch.co.uk/reports-library/lived-experiences-using-coventry-nhs-services](http://www.healthwatch.co.uk/reports-library/lived-experiences-using-coventry-nhs-services)

The top issues identified were:

- Not enough clear and accurate information about how to access key services was always available
- Difficulties contacting the service required - telephone numbers were incorrect or weren't answered and routine appointments were cancelled without explanation
- Some people liked remote appointments but for some people they felt they needed to be seen in person

This information has been used to inform local NHS and social care service managers and planners.

### Access to dentist services

We looked at access to dental services after the first lockdown ended and made contact with dental practices to see what capacity was available for NHS treatment. We found that just 5 NHS dental practices were seeing patients. This was very different to the national messages about restarting of services.

We shared this information with Healthwatch England so they could use it with information from other local Healthwatch as part of a national campaign for change.





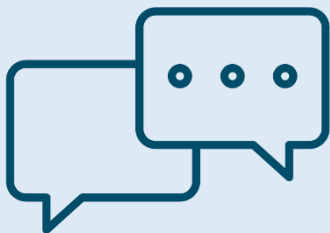
# NHS changes

## Feeding into changes to how the NHS is organised

This year another process of change was underway within the NHS to bring together the three separate organisations which oversee NHS spending on a substantial amount of the NHS services in Coventry and Warwickshire. These are called Clinical Commissioning Groups.

Because of their role, how this new organisation is set up and works is important for the interests of patients and the public.

So our volunteer Chair was involved in the recruitment process for key positions in the new organisation including the Accountable Officer, Chair and lay board members. This meant we could ask question of the candidates related to how they would engage with and involve local people in their decisions and work.



### Share your views with us

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch is here for you.

[www.healthwatchcoventry.co.uk/share-your-views](http://www.healthwatchcoventry.co.uk/share-your-views)

Email: [yoursay@healthwatchcoventry.co.uk](mailto:yoursay@healthwatchcoventry.co.uk)

# Our volunteers

Our approach is based on involving and listening to local people. Our volunteers play a really important part in what we do.

Understandably, this year some of our volunteers weren't able to carry on volunteering with us because of all the many impacts the pandemic had on people's lives.

Also, our normal volunteering activity had to stop to comply with the COVID-19 restrictions and to help keep people safe. We put a hold on recruitment to our volunteer places on our Steering Group for a year.



Despite all this our volunteers contributed **1006** hours of time this year

## Healthwatch Steering Group individual volunteer members

Hakeem Adedoja  
Tervinder Bhangal  
Apollo Economides  
Stuart Linnell (MBE)

Dennis Saunders  
Catherine Smith  
David Spurgeon  
Edward Devane

## Healthwatch Steering Group voluntary group members

Sue Ogle, Voluntary Action Coventry  
Andrew Collis, Involve Coventry  
Samantha Keogh-Collins, Grapevine  
Christine McNaught, FWT- A Centre for Women  
Steven Hill, Coventry and Warwickshire Mind  
Sonja Woodhouse, Carers Trust Heart of England  
Ed Hodson, Citizens Advice Coventry

Representing our host organisation  
To July 20  
To December 20  
Ongoing  
Co-opted from Nov 20  
Co-opted from Nov 20  
Co-opted to March 21



## Volunteer with us

Find out more at: [www.healthwatchcoventry.co.uk/volunteer](http://www.healthwatchcoventry.co.uk/volunteer)  
Contact: [yoursay@healthwatchcoventry.co.uk](mailto:yoursay@healthwatchcoventry.co.uk)

# Next steps

## Our top three priorities for 2021-22

1. Continuing to work to ensure that digital services do not create barriers to using services for some local people.
2. Continuing to work for improved and good quality information to help people understand, and access local NHS and care services.
3. Working to ensure a Healthwatch voice within new NHS and local 'Place' structures and for patients/public interests and voices to be at the heart of service planning.

Our priorities for the coming year provide continuity on key areas we have been working on and recognise the important changes that will be happening to NHS and local structures. There will also be the challenges for the NHS of reinstating services and addressing large backlogs and waiting times. New ways of working have been put in place and some are important improvements but others may not work long term for those who need to use the services.

This report is being produced just as the national COVID-19 restrictions are easing, but the future course of the pandemic and its implications for Healthwatch Coventry remain uncertain.

We are planning for some continued differences to how we work and the work we are able to do face-to-face but hope to be back in our office soon.

**The challenges facing NHS and care services in the coming year are considerable. Working with and effectively communicating with local people will support efforts to restore services and address waiting times.**

Our focus will be on developing our reach to different communities and people in Coventry, ensuring we connect with diverse people of many different heritages, including Black people. Other less heard people locally are men, those of working age and people from the most deprived areas of our city.

We are planning a volunteer recruitment campaign and have created two new roles which are flexible and can be done virtually as needed. There are also opportunities on our Steering Group to fill.

We are refreshing our strategic plan and we will be thinking about how to update our work priority setting process so that it can still be clear and transparent but a bit more flexible in the fast paced world we work in.

Finally, a big **thank you** to everyone who has given their time and input to our work in this very challenging year.



- Ruth Light, Chief Officer



# Statutory statements

## The contract to provide Healthwatch Coventry is held by:

Voluntary Action Coventry  
27-29 Trinity Street  
Coventry  
CV1 1FJ

Between 1 April and 31 October 2020 the Healthwatch Coventry Information Line function was subcontracted to:

Citizens Advice Coventry  
Kirby House  
Little Park Street  
Coventry  
CV1 2JZ

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

## The way we work

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

Our Steering Group is responsible for setting the strategy and direction of Healthwatch work. It is made up of individual local people and local voluntary organisation representatives.

The Steering Group makes decisions about the work we do and the use of our powers and these decisions are published via Steering Group minutes. They ensure that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Through 2020/21 the Steering Group met 7 times and made decisions on matters such as agreeing work priorities from July 2020, and membership of the group: agreeing to co-opt two new voluntary sector members to provide extra experience to the Steering Group membership.



## We ensure wider public involvement in deciding our work priorities

We listen to and collate what local people tell us about their experiences of health and care services. We hear this information through our engagement activities and from those using our information service. We have links with different voluntary sector organisations so we can hear what issues their users/members encounter too.

We use categories to identify possible trends and services we might want to look at in more detail or issues to raise immediately. We then apply our work prioritisation process which is overseen by our Steering Group.

More information about Healthwatch Coventry governance and decision making is available at: [www.healthwatchcoventry.co.uk/about-us](http://www.healthwatchcoventry.co.uk/about-us)

Project/activity area	Results this year
Views and needs of local people in the use of digital and other non face-to-face ways of providing NHS and care services	<ul style="list-style-type: none"> <li>Findings and recommendations promoted</li> <li>Follow-up work underway</li> </ul>
Good quality information to help people find their way in changed services resulting from COVID-19	<ul style="list-style-type: none"> <li>Changes to GP websites made by one local GP Group (PCN)</li> <li>CCG doing work to improve other GP websites</li> <li>COVID-19 vaccination public information produced to address gaps we raised</li> <li>Easy read information about shared records produced by lead agency</li> </ul>
Feeding into the merger of the three local CCGs for the benefit of patients and the public	<ul style="list-style-type: none"> <li>Healthwatch Coventry took part in the recruitment process to key roles</li> </ul>
Understanding the impact of COVID-19 on patients and the public	<ul style="list-style-type: none"> <li>The information we have gathered has informed local decision makers in health and social care</li> </ul>
Enter and view visit to Victoria Manor Care home	<ul style="list-style-type: none"> <li>Action plan from care home manager to address improvement to physical access and dementia friendly design and addressing residents' hearing loss issues</li> </ul>

## Methods and systems used across the year's work to obtain people's views and experience

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of health and care services. During 2020/21 we have been available by phone, by email, provided a web form on our website, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this, for example, by building connections with community groups in Coventry that have links with different and diverse communities and collecting monitoring information through our different work so we know the gaps in our reach and can plan to improve this.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on the Healthwatch Coventry website, include details in our newsletters, and promote via social media and other channels. Paper copies are available from our office.

## Responses to recommendations and requests

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

This year, due to the COVID-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity.

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

## Health and Wellbeing Board

Healthwatch Coventry represented on the Coventry Health and Wellbeing Board by our Chair and Chief Officer. During 2020/21 our representatives have effectively carried out this role by attendance and participation in all of the virtual meetings the Board has held and by attending the COVID-19 Test and Trace subgroup set up in June 2020.

Our attendance enabled us to question some of the information provided and approaches taken and to reflect what we have learnt about local people's experiences to the group.

## Working with others

### The Healthwatch network

We are part of the wider Healthwatch network of 151 local Healthwatch. Healthwatch England collates the issues which local Healthwatch hear to use to influence national policy. You can read all of the briefings responses and reports they have produced at:

[www.healthwatchcoventry.co.uk/news-and-reports](http://www.healthwatchcoventry.co.uk/news-and-reports)



### Voluntary and community groups

We work with local voluntary and community sector organisations as they have expertise in different areas of work and connections with many local people.

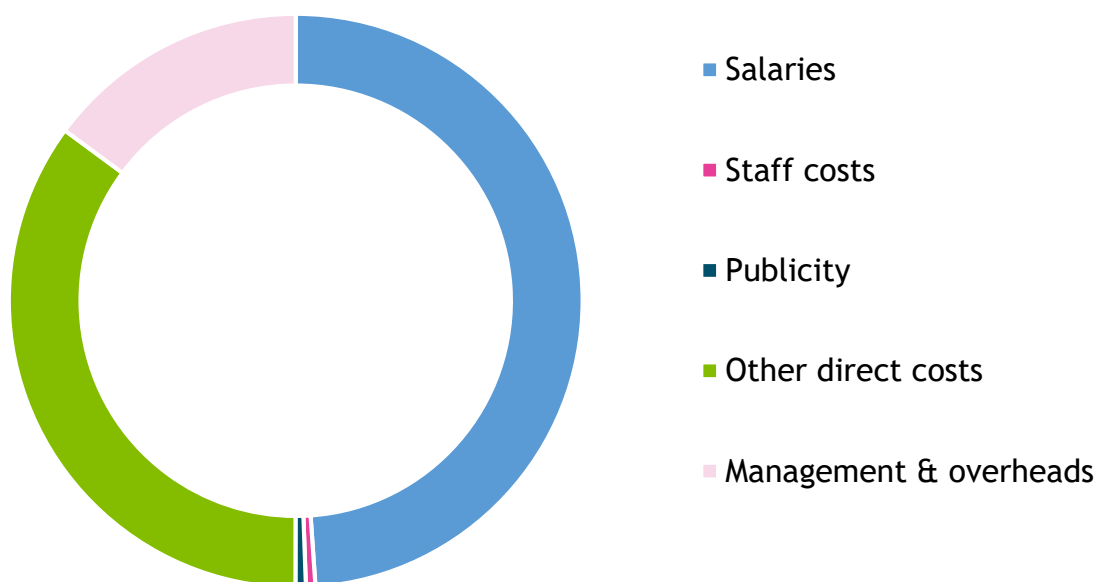
# Our finances

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income	£
Funding from local authority to deliver local Healthwatch statutory activities	249,716
Other income	0
<b>Total income</b>	<b>249,716</b>

Expenditure	£
Salaries	114,459
Staff costs	1,246
Publicity	1,363
Other direct costs	82,166
Management & overheads	34,830
<b>Total expenditure</b>	<b>234,064</b>

## Expenditure



# What terms mean

Authorised Representatives	Healthwatch volunteers who are trained and approved to visit NHS and social care premises
Care Quality Commission (CQC)	Regulator of health and social care providers in England. It inspects services to see if they meet certain standards
Clinical Commissioning Group (CCG)	Organisation with responsibility for spending and overseeing a proportion of local NHS budget
Commissioning	Process for organising or buying health or social care services or other services and for monitoring the quality of the service provided
Engagement	An overarching term for activities to gather views, opinions or feedback from patients or the public
Enter and View	Term for one of the Healthwatch powers: to visit certain NHS and social care premises to see how services are being run
Healthwatch England	National body supporting local Healthwatch and utilising the evidence local Healthwatch gather for national policy campaigns
Health and Wellbeing Board	Led by the Local Authority to develop a strategy for local health and wellbeing, setting priorities for local joint work across health and social care
Primary care Network (PCN)	GP surgeries other services joining together to cover communities of around 30,000-50,000 patients. They can share staff, records and technology to improve their services
Social Care services	Services organised by the local council to provide support to vulnerable, disabled and/or older people who need support to live their lives, for example support to live at home or residential care
Trust or NHS Trust	An organisation within the English NHS providing healthcare services for residents such as hospital services, mental health services or ambulance services




## Photo credits:

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