

# The value of listening Annual Report





2023-2024

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"Thank you for replying back and giving me some information to take this further and to the right people." - Caller to our helpline

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

We make sure NHS leaders and decision-makers hear your voice and use your feedback to improve care.

We can also help you to find reliable and trustworthy information and advice.

We want to make sure people's experiences help make health and care better.



### Message from our Chair Stuart

Once again, this year, Healthwatch Coventry put a clear focus on hearing and understanding the barriers that local people face in accessing health and social care. Through community outreach and from social media we gathered views and opinions, particularly from those who do not otherwise have a strong voice or tend to be ignored.

We found that, although local people considered it generally harder to access health care, there was an improvement in the numbers saying that they were able to make an appointment at their GP practice, and that it was easier to do so for some than had been the case. There was also a positive acceptance about using pharmacies to treat minor illness, although pharmacy closures remain a concern.

Our series of visits to wards at University Hospital Coventry, highlighted issues patients and visitors face when navigating hospital care and discharge. Our recommendations have been welcomed, resulting in improvements.

As part of the broader Healthwatch network we have supported Healthwatch England to raise issues requiring a national solution. For example, the provision of NHS dental care, which leaves much to be desired and is something that we continue to monitor.

We helped a significant number of people with trusted information about local services – supporting individuals to navigate and when necessary, raise concerns.

I was delighted that Healthwatch Coventry was recognised with an award for its work resulting in improved maternity care for refugee and newly arrived women in the City. This was partnership work that has led to many actions.

We continue to play a role within the local Integrated Care System, and to meet our ambition to make a difference in people's lives.



"Because people of our City respond to
Healthwatch Coventry, we are able listen to the
issues that matter to them and pass this on to the
decision makers and providers of health and care.
Healthwatch Coventry is a vital conduit in reducing
health inequalities, helping to make Coventry a
healthier City and improve peoples' lives."

Stuart Linnell MBE, Chair



#### Year in review

#### **Reaching out:**

3326 people shared their experiences of health and social care with

us, helping to raise awareness of issues and improve

care.

37421 people came to us for clear advice and information about

topics such as diagnosis or referral issues, where to go

for out of hours support and delays in complaint

responses.

#### Making a difference to care:

14 reports showed the improvements people would like to see

and recommended actions that improved care.

13 visits to hospital wards and A&E highlighting experiences

and improvements needed.

#### Involving local people:

37 outstanding volunteers gave

815 hours of volunteer time given to make care better for our

community.

#### **Our resources**

We are funded by our local authority. In 2023 - 24 we received: £201,000 which is the same as the previous year

We currently employ 2 full time and 4 part time staff

#### Key achievements this year



We helped the hospital improve its online information about how to make a complaint by highlighting why it was hard to read and navigate.

We shared what local people think is important to help a GP practice plan its next steps for patient communication.



Summer

We highlighted people who were not included in a local NHS equalities assessment. The approaches we suggested were taken as a model for wider use.

We highlighted the impact of community pharmacy closures on local people to those who review local access.



**Autumn** 

We influenced the priority given to addressing delays in complaints and incident responses, because we called for actions from the hospital.

The second round of Healthwatch small grants for voluntary groups had a brilliant response. Three new partnership projects were agreed.



Winter

We were awarded the annual Healthwatch Impact Award for enabling refugee and newly arrived women's voices to improve maternity care.

Our visits to hospital wards led to swift actions on a ward where we identified concerns. We revisited the ward and saw improvements in care.



## Improving local services

Services can't make improvements without hearing and understanding your experiences. That's why, over the last year, we made sure we could hear from and involve different people.

We used our connections, influence, and power to make recommendations to bring about improvements.

#### Our work led to:

- better maternity care
- better care on hospital wards
- and enabled people to feed into the design of a new NHS diagnostic centre.

We shared our knowledge to help other organisations develop how they reach and involve local people.

And we advocated for the most vulnerable in a service closure.

"Healthwatch has been a real catalyst for change and has promoted developments in joint working," - Peter Barnett CBE, Coventry City Council



#### Improving maternity care

We won the Healthwatch Annual Impact Award for changes made to maternity care for asylum seeking and newly arrived women and our partnership approach.



Last year, we worked with local voluntary group Carriers of Hope to hear women's stories of communication challenges and barriers to accessing support.

This year we worked to be a catalyst for change by sharing the findings with NHS decision makers and those working with asylum seekers and refugees in Coventry.

This led to a multi-agency plan and changes to how services are delivered. Our video of women sharing experiences and ideas was played at decision making meetings.





'Mentally it was really hard I did not have much people to talk to."

"They think because you are a migrant from Africa they [can] treat you differently."

- Women who took part

#### The difference we made:

- A new direct referral route into maternity services has been set up to address barriers and help prevent late access to services.
- New ways of communicating that address language barriers in place.
- Some of the women to become buddies for other asylum-seeking pregnant women.
- Better connections and communication between agencies resulting in women getting more help.
- Scheme to provide free bus travel to NHS appointments is in place, overcoming the barrier of transport costs.



"Thanks to your staff, volunteers and partners for the energy and care that went into both the fieldwork and report which I am confident will result in a legacy for both patients and the services." - Head of Service Libraries and Migration, Coventry City Council

#### Improving care on hospital wards

Our visits to University Hospital Coventry led to improvements in patient care on six wards and highlighted areas for further work across the hospital.

We asked patients and visitors, about communication, how involved they felt in care, and if their needs were met. We spoke to 118 people over 12 visits. We also talked to staff and observed what was happening on the wards.



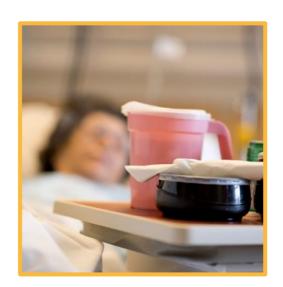
"I have no choice being vegetarian all I have is jacket potato every main meal".

"Drinks available, but not in reach."

"It would help to let visitors know when to ring and then have someone available to take messages."

"We have not been told what the [discharge] plan is and what is involved."

- Patients and Relatives



#### The difference this has made:

 During our visits we had concerns about care on one ward and raised this directly with nurse leaders at the hospital. The hospital was not aware of these issues, and they began actions to address them and to understand what had led to this situation.

We returned to revisit the ward at the end of February and saw that improvements had been made, for example, much more help at mealtimes for patients who needed it.

- As a result of our ward visits the hospital have identified clear actions for 15 of the 25 recommendations we made. Things like the reintroduction of paper menus and reinforcement of good practice in privacy and dignity and patient care.
- Work is ongoing regarding broader themes across wards.



"I would like to thank you for your continued support in undertaking Enter and View visits and supporting the Trust to continually improve our services". Prof. Andy Hardy, Chief Executive

#### People centred design for a new Diagnostic Centre

A new diagnostic hub is being built within an existing unused NHS building in the centre of Coventry. We worked with the local hospital so that local people could share what will help them to feel welcome, clear about where to go and what will happen.

#### What we learnt - what works for people

Issues were raised about car parking, the local road lay out, drop off points, taxi and bus access.

People shared suggestions for meeting the needs of different people such as:

- Use of pictures to help with language needs and to be clear for all
- People to help the human touch
- For signage to use a number system rather than alphabet-based systems i.e.
   Area 1 not Area A.

#### **Next steps**

The project lead for the new centre took away actions:

- Making contact Coventry City Council and other partners about road and transport access to the site
- Looking at other settings which have clear signage e.g. airports, to learn from this
- Using suggestions people made in the design
- Working up ideas around signing in and testing these out with people.





"Lots of discussion and input from all the groups with a variety of interest and representations, including neuro diverse."

-Participant in the session

#### Other ways our work has made a difference

## Working to make sure other organisations listen to local people

We worked with the Coventry and Warwickshire Integrated Care Board (ICB) to develop ways of involving local people in health and care.

We fed our experiences into the ICB's new Involvement Co-ordination Network. We shared good practice and what we learnt from our pilot grant programme of partnership work with local voluntary groups.

We fed into the new Community Engagement Framework produced by Coventry City Council to inform its 'One Coventry' approach.

Our good involvement principles were used in this work. These are based on what local people told us works and doesn't work when organisations seek views or to design services with people.

#### Improving care over time

Over the years we have worked to make sure peoples' experiences were used to improve a repeat medication re-ordering service called Prescription Ordering Direct. Whilst changes made the service more user friendly there were continued problems of delays getting through on the phone. This meant sometimes people did not get their medication in time.

This year the ICB decided to close the service. They asked us for evidence to inform the transition to people re-ordering medication via their GP practice.

We stressed the needs of the most vulnerable who cannot use NHS apps or necessarily go to their GP practice.

We continue to help people to access their medication.



## Hearing from all communities

Over the past year, we have worked hard to reach out to the communities we hear from less frequently.

We want to make sure their voice is heard, and services meet their needs.



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

- Going to support sessions, meetings and events for different Coventry communities with a focus on communities in disadvantaged neighbourhoods.
- Regular outreach sessions in libraries and the City of Coventry Health Centre, a multi-use NHS centre.
- Working in partnership with voluntary groups through our small grant fund. This enabled community research to hear the voices of different people through trusted relationships.
- Producing reports setting out peoples' experiences of access to local NHS services to inform local decision makers.



"A commendable and engaging session with Healthwatch Coventry staff... Thank you for handling the emotional discussion effectively. The goal is to create an inclusive society for all"

- Last, community group leader

#### **Canal boat community**

We heard from boaters who were continuous cruisers on Coventry canal. This means they are unable to stay in one place for more than a defined time. We made visits along the canal from the City centre canal basin to the edge of Coventry.

The boaters we spoke with based their decisions around which health services to use on how easy it is to access those services from a boat mooring. They were quite suspicious of new people.



"If you hadn't of caught me, I wouldn't have spoken to you". - Canal boater

None had contacted mental health services. Although three people recognised that they had mental health needs.

They had work arounds of using other people's addresses to be able to register with a GP or receive NHS letters



#### **Hong Kong Chinese community**

We ran a discussion group with over 50 people from the Hong Kong Chinese community. There is a significant population of people who have moved to Coventry from Hong Kong with British National Oversees status.

They found the NHS very different from services they were used to. We listened to their challenges and shared this information with local NHS leaders.





"I have communication problem between doctor and me, not good". - Participant

Top areas of concern:

- Access to services GPs Dentists and routine health checks, hard to book appointments.
- Communication issues including language barriers and not wanting to use electronic communication due to concerns about the reach of the Chinese state.



## **Advice and information**

We can provide confidential and free information to help you understand your options and get the help you need. Whether it's finding where to go for help or how to make a complaint - you can count on us.

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

- Speaking to people on the phone. People thank us for answering calls when they have not been able to get through to other services
- Responding to 328 requests for information or signposting support
- There were 8,521 views of our website Information and Advice articles and 28,900 people saw our Facebook posts giving Information and Advice.

#### The top four topics we have been contacted about:

- Attitude and communication with patients including issues with not being able to speak to relevant people in a timely way and not feeling listened to.
- Access to services including appointment systems and issues getting appointments.
- Medication, including not being able to get medication or being issued with incorrect medication.
- NHS complaints processes not working well and Trust Patient Advice and Liaison Services not responding quickly enough.

#### Louise's story

Louise's was worried as she had not got a date for her operation

Louise was concerned as she had not had a date for her operation at the hospital, she was struggling to get answers from anyone about when her operation was going to take place.

We put her in touch with the Patient Advice and Liaison Service at the hospital. Louise then got a date, but her operation was cancelled at the last minute.

Louise got back in touch on a few occasions and was happy that we were a service which answered the phone. We escalated her issues to the Head of Patient Relations at the hospital.

We stayed connected with Louise and she let us know when her operation took place.

The delays and waiting impacted Louise's mental health and she wanted to have support to make a complaints, so we linked her to complaints advocacy support from Voiceability.

Louise said: "Thanks very much for your support"



#### **Rob's story**

Rob could not find out how to get his vaccination



"[You] responded and explained how you could help me and then did. My own GP could not do the same when I asked them a few days prior. They did not know how to."

Rob was frustrated and concerned because he was at high risk. His oncologist advised that he should have a Covid-19 vaccination before his chemotherapy started. But Rob was struggling to find anywhere where he could have the vaccine.

We connected Rob to the organisation responsible for vaccinations and then Rob was given a date and location to have his jab.

\*Names have been changed and photos for illustration only

## Volunteering

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



#### This year our volunteers:

- Carried out two programmes of enter and view visits to local services to help them improve.
- · Visited communities to promote Healthwatch and what we have to offer.
- Collected experiences and supported people to share their experiences of NHS and social care services.
- Looked at information to help organisations to make this clearer and more relevant.
- Represented Healthwatch and what we know from local people at meetings of health and care decision makers.
- Questioned local plans and initiatives to help make sure they reflect what local people say and want.



"I choose to volunteer with Healthwatch Coventry so I can feel closer to my local community while gaining skills that will help me with my studies and beyond!"

- Lauren, Healthwatch Volunteer

Our Steering Group volunteers are at the heart of what we do, read more about them and their role on our website:

www.healthwatchcoventry.co.uk/oursteering-group





#### Alan – Authorised Representative Volunteer

"Change happens when services act on what we see and hear on the ground."

I met staff from Healthwatch Coventry at an event. Intrigued by the mission, I trained to became an Authorised Representative volunteer to visit health and care services.

My visits to the hospital allowed me to engage with patients, families, and staff.

These conversations provided valuable insights into the challenges faced by patients on wards.

I bridge the gap, listening to patients and ensuring their concerns are heard. We made several visits to wards and could see the improvements made by the hospital.





#### Ifra - Steering Group Volunteer

"I am a local person who works in public health research, so I have a keen interest in contributing to reducing health inequalities. After learning about the work of Healthwatch Coventry I joined the Healthwatch Steering Group so I could play an active role.

I have learnt about how local health services operate, the launch of new services, alongside the needs of disadvantaged communities and how we can help services improve to best meet these needs.

Joining the group has also provided me with a great opportunity to meet like-minded individuals from diverse backgrounds with different expertise who are also passionate about driving change to improve the health of communities in Coventry."

#### Do you feel inspired?

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





www.healthwatchcoventry.org.uk



024 7622 0381



yoursay@healthwatchcoventry.co.uk



## **Finance**

For our core work we receive funding from our local authority under the Health and Social Care Act 2012.

#### Our income and expenditure

Income		Expenditure	
Annual grant from Government	£201,000	Expenditure on pay	£166,102
Additional income	0	Publicity & marketing	£4,578
		Other operational costs	£26,024
		Office and management fees	£40,200
Total income	£201,000	Total expenditure	£236,904*

<sup>\*</sup> Expenditure in excess of income is covered from underspend brought forward.



## **Next steps**

The coming year will be a year of change for as Healthwatch Coventry is being re-commissioned by Coventry City Council.

Our current funding runs to 31 December 2024. This has an impact on our planning.

We have had a busy and productive year reaching communities and bringing about improvements in care.

We have work to complete, including visits to A&E and same day treatment areas in the hospital, plus community outreach projects in partnership with voluntary groups.

There is also work for us to follow up to see how improvements are developing, such as maternity care, hospital wards and more to do as the new Coventry community diagnostic centre nears completion.

Other areas for work include working with the ICB to improving how NHS organisations respond to NHS complaints.

There are also service changes happening in Coventry and Warwickshire. For example, community health services are moving to a new organisation as part of a transformation programme for these services. So, there will be opportunities to enable people to shape services.



## Statutory statements

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

**Voluntary Action Coventry** 

Harp Place 2 Sandy Lane Coventry CVI 4DX

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 decision-making

Our Healthwatch Steering Group consists of 9 local people and 3 representatives from voluntary groups who contribute on a voluntary basis to provide direction and oversight to our activities. The Group ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

In 2023/24 the Group met six times and made decisions about what work to do and approved findings and recommendations. The group also heard about local service changes and transformation programmes and asked questions about these.

We ensure wider public involvement in deciding our work priorities via the intelligence we gather about peoples' experiences of NHS and social care via our information enquires, public surveys and community outreach. We also work with community and voluntary groups.

This year we updated the prioritisation checklist we use to identify issues and areas we should work on. This uses equalities categories as part of the process.

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

We use different ways to enable as many people as possible to provide us with insight about their experiences of using services. During 2023/24 we have been available by phone, email, webform and through social media, as well as doing outreach, service visits and attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website and promote it through our social media channels and face to face meetings.

#### Our values inform all we do. We are:

Independent	Inclusive	Listening
We make our own decisions about work priorities and fulfil our duty to have and publish a decision-making process	We value inclusivity. Those who are least heard are important to us and there is much to be learnt by their experiences	We recognise the value of listening to first hand experiences of local people and work to ensure people's views and experiences are heard
Constructive	Trustworthy	Open and accountable
We value strong partnerships to achieve objectives; we collaborate but stay impartial - representing the interests of patients/public	We are a trusted source of information for the public; answering questions about NHS and social care services	Our role is to work for local people and we do our work in a transparent way

#### Taking people's experiences to decision-makers

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

In our local authority area, for example, we take information to:

- Coventry Health and Wellbeing Board (our Chair and Chief Officer are members)
- Coventry Care Collaborative (a developing local part of the ICB)
- · Health and Social Care Scrutiny board
- Senior leaders of providers of NHS services.

We take insight and experiences to decision-makers in Coventry and Warwickshire Integrated Care System. For example,

- Healthwatch Coventry is represented on Coventry and Warwickshire Integrated Care Partnerships by our Chair Stuart Linnell.
- · Our Chief Officer is active in the System Quality Group and its subgroups
- We have strong connections to the Local Maternity and Neonatal Network and the Mental Health Care Collaborative.

We also share our data with Healthwatch England to help address health and care issues at a national level and link with the Care Quality Commission inspection teams covering Coventry.



## Responses to recommendations, information requests and escalations

There were no providers that did not respond to requests for information or recommendations.

Coventry and Warwickshire Integrated Care Board did not respond fully to an information request related to the closure of Prescription Ordering Direct.

There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

#### **Enter and view**

This year, we made 19 Enter and View visits. We made 25 recommendations for actions because of this activity.

Location	Reason for visit	What you did as a result
12 visits to six wards within University Hospital Coventry (UHCW)	Feedback about hospital care and communication with patients and relatives	Findings and recommendations led to actions to improve patient care, and work on communication with patients and relatives.
		We identified concerns on one of the wards to senior hospital leaders for immediate action to address these.
Six visits to A&E and urgent treatment areas of UHCW	Feedback about waiting times and experiences.	Visits being completed and findings analysed
One unannounced follow up visit to ward 43 at UHCW	To check on progress on issues raised about a specific ward at the Hospital	Improvements in care evident and findings shared in published report

#### 2023 - 2024 Outcomes

Project/activity	Outcomes achieved
We used our findings from visits to local care homes to support ICB led multi agency work to develop enhanced health in care homes.	Review completed to understand what is currently happening to capture people's voices and identify areas for development Agreed outcomes and principles after considering if services are inclusive and meeting the needs of all residents.
We produced three reports highlighting experiences of access to local NHS services.	We ensured local commissioners and providers had up to date information about experiences and issues regarding GP access, cost of living impacts and trust in NHS services to ground their discussions and plans in experiences.
We fed into the local End-of-Life strategy.	We made sure that diversity and inequalities were considered and worked for the strategy to be simpler, clearer and more measurable.
We used our experience of communication with local people to pass on good practice to local NHS organisations.	New services such as the community diagnostic centre were explained in different ways that are more meaningful to local people.

#### What do names and initials mean?

#### Integrated Care System (ICS)

This is the system that brings together the health and care organisations in a particular local area, to work together more closely. There are 42 ICS's across England. Each integrated care system is responsible for planning health and care services in the area it covers. Each one is made up of an integrated care board and an integrated care partnership, which work to meet the needs of their population.

#### Integrated Care Board (ICB)

The Integrated Care Board is responsible for planning NHS services and for NHS budgets. The membership includes 'partner' members drawn from local authorities, NHS trusts and primary care. The ICB should ensure that services are in place to deliver the Integrated Care Strategy developed by the Integrated Care Partnership.

#### Integrated Care Partnership (ICP)

The Integrated Care Partnership is made up of partners from across the local area, including Healthwatch. One of the key roles of the partnership is to assess the health, public health and social care needs of the area and to produce a strategy to address these.

#### Health and Wellbeing Boards (HWB)

HWBs are a statutory forum where political, professional and community leaders from across the care and health system come together to improve the health and wellbeing of their local population and reduce health inequalities. They have been running since 2013.

#### **Health and Social Care Scrutiny board**

Part of local council scrutiny arrangements focusing on health and social care. It operates through statutory powers to obtain information, ask questions in public and make recommendations for improvements, which must be considered.

#### Care Quality Commission (CQC)

The Care Quality Commission regulates all health and social care services in England. The commission ensures the quality and safety of care in hospitals, dentists, ambulances, and care homes, and the care given in people's own homes.

**Photo credits**: Healthwatch Coventry, Healthwatch England, Centre for Aging Better, Canva

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