



## **Healthwatch Kent** Annual Report 2014/15



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Our vision, mission and values

# Our mission

To raise the public's voice to improve the quality of local health and social care services in Kent.

## **Our vision**

You, the public, are listened to, and involved in, improving our health and social care services in Kent.





# We achieve this by

Listening to you about your experiences of health and social care services and taking those experiences to the people who commission health and social care services in Kent.



## **Our values**

- Open and transparent
- Volunteer led
- Objective and balanced
- Working in partnership with organisations - no surprises
- Critical friend
- Balancing positive and negative, loud and quiet, many and few
- Truly represent residents of Kent



# Foreward from our Chief Executive

This time last year, I was reflecting on the end of our first year and the progress we had made in setting up a new organisation, recruiting and training new volunteers. Now another year on, and Healthwatch feels very grown up.

We have nearly 70 volunteers all of whom are actively involved in supporting us in different aspects of our work. Together with our volunteers, we have embarked on a number of detailed projects and reviews of Kent's services. This work is already delivering changes for people who are receiving services right now or improving services for the future.

We passionately believe that by working in partnership with other organisations we can achieve more together. Although we have nearly 70 volunteers, we remain a small organisation covering a huge geographical area with vast differences and priorities from district to district. We continue to invest time in our relationships with the organisations who provide and commission health & social care services in Kent. These relationships mean that we are regularly approached for our input and advice on how best to engage with, and listen to the public. For example, we have recently completed some work in West Kent which saw us involving 215 people and organisations in the plans to improve stroke services. We are currently working in East Kent to ensure the public are involved in plans to change and improve hospital services. These relationships also mean that when we regularly request in-depth information from providers and commissioners about aspects of their work all of them have responded, and willingly work with us in our bid to improve services.

As we move into our third year we are conscious that we are not yet hearing enough from young people. We are planning a new project that looks to build our relationships with youth groups and engage better with young people. We are also looking to invest in new ways to build more meaningful relationships with the voluntary sector and people who are traditionally harder to reach.

This report details just some of the highlights from this year. We hope you find it useful. Do please get in touch if you would like to be involved in any way or would simply like more information.

You can reach us anytime on 0808 801 802 or via email on info@healthwatchkent.co.uk

## **Steve Inett**

Chief Executive, Healthwatch Kent



## **Our volunteers**

Our volunteers are essential to us. They are the life blood of Healthwatch Kent. They are involved in every single aspect of Healthwatch from making decisions about our priorities, through to helping us stuff envelopes. We simply could not function without them.

We asked one of our volunteers, Helen Stewart what it's like to be a volunteer with Healthwatch Kent.

#### Why did you become a volunteer?

I recently retired from social services but I still wanted to play an active role in improving services for people.

## What do you do for Healthwatch?

All sorts! The time I have available varies so some weeks I do more than others but that is the great thing as Healthwatch is flexible and fits round my life.

I represent Healthwatch at meetings which means I update the meeting about the work that Healthwatch does. I also relay information back to Healthwatch about the work of the meeting group which in this case is the Swale Health & Well Being Board. My meeting report is used along with similar reports from lots of other volunteers as a source of information by our Information Gathering Group (IGG). I also sit on the IGG group which is one of Healthwatch's key Governance groups.

We are a mixture of volunteers and staff and we review and analyse all the information that comes to Healthwatch either from the public, from voluntary groups, meetings reports from people like me and intelligence from surveys and reports. We then make recommendations up to the Healthwatch Deliberations & Directions Group (DaDs) about what we think Healthwatch should be focusing on. The DaDs group is again made up of volunteers and they look at all the recommendations alongside the resources that we have and determine what our priorities and projects should be going forward.

I have been trained to do Enter & View visits. I am due to visit a mental health ward in Canterbury very soon and I have already completed a number of visits to hospitals and care homes. I've also been trained to be a facilitator which means when we meet with the public I know how best to gather their experiences and thoughts on services.

## What does it mean to be a volunteer with Healthwatch?

I very much value the work I do with Healthwatch. It is so varied but we have already achieved so much. I am proud to be making a difference to the community I live in

We have a huge variety of volunteer roles to suit all interests and availability. Give us a ring and find out more. Call our Volunteer Co-ordinator, Theresa on 0808 801 0102 or email theresa@healthwatchkent.couk



# How do we work for you?

Feedback from people about their experiences of health and social care services is the information we use to do our job. We can't work to improve a service, if we don't know the issues, so we make it as easy as possible for people to talk to us:

- The Information and Signposting freephone line is the easiest way to contact us on
   0808 801 0102
   Monday to Friday 10am to 4pm. We work hard to ensure we immediately answer
   any call received in the opening hours but if you have to leave a message we will ring
   you back within one working day.
- You can email us on **info@healthwatchkent.co.uk** and we will respond within two working days.
- You can text us on **07525 861639** and we will respond within two working days. You can request a British Sign Language Interpreter via our text service and they will arrange to meet with you.

The phone line cannot deal with complaints but can provide information about how to complain to the relevant organisation. We will continue to respond urgently to cases where people are potentially at risk or the quality of a service is extremely poor. We will continue to have quarterly liaisons with the main providers of health and social care services to share the anonymised feedback we have received from the public.

## We also ensure that we meet people face to face:

- Anyone can go into their local Citizens Advice Bureau (CAB) and be helped to contact us.
- We hold four public meetings a year, in venues across the county, to update people on our work and gather feedback.
- We visit a different district council area each month and visit libraries, CABs, community groups and events. During these 'public voice' sessions we raise awareness of Healthwatch Kent and the freephone line, give information about patient rights and gather feedback of people's experiences of local services.
- We work with other organisations to deliver events to gather public views
- We work with voluntary organisations who feed us the views of their service users.
- We capture people's feedback via our website and social media. We also have a range of printed materials including a Speak Out form which people can complete and send back to us for free. Our leaflet is available in six languages.

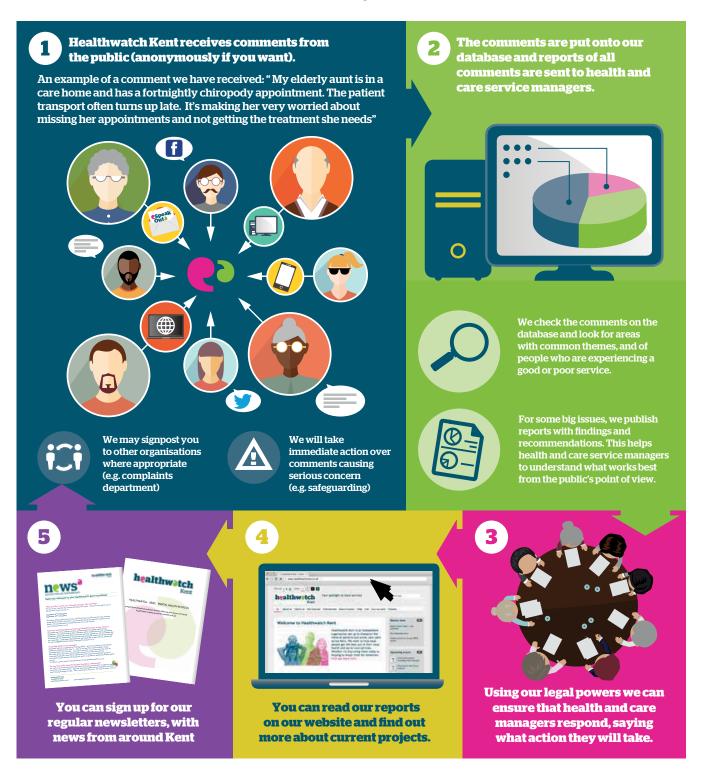
We have proactively taken Healthwatch to many different communities this year. For example, we have visited the deaf community along with our British Sign Language Interpreter to gather experiences of people with hearing loss. We have also worked with our colleagues at Healthwatch Medway and Healthwatch East Sussex on joint projects as we recognise that Kent residents use services outside of the county borders. Equally, many East Sussex residents use Kent services.

In 2015/16 we will improve our accessibility to the most disadvantaged groups to ensure their voice is heard by commissioners and providers. We will continue to raise awareness of Healthwatch Kent amongst the public. You've told us that you want to see Healthwatch raising our profile so we are touring the Healthwatch Big Red Bus in June 2015 which will visit every district in Kent to raise awareness of Healthwatch Kent and gather feedback. We hope to see you there!



# **Every Comment Counts**

## What do we do with the information you share with us?



# Information & signposting service

With all the changes to health and care services it's not always clear where you should go to report an urgent issue, to make a complaint, or for further information.

Healthwatch Kent can help you find the right services to suit your needs through our FREE Information & Signposting Service. Although we can't give you advice or make specific recommendations, we can help you make an informed decision in finding the right health and social care service whether it is provided by the NHS, the Council, a voluntary or community organisation.

We know how complicated it can be to find your way around the health and social care system. Our team of trained staff can take the worry away and find the answers for you. Call us!



# Call us for FREE on **0808 801 0102**

Calls answered from 10am - 4pm every weekday

Messages welcome anytime and responded to next working day Email us at **info@healthwatchkent.co.uk** or pop into any Citizen Advice Bureau to speak to someone face to face



# How we decide our priorities?

We are always analysing the feedback we receive from the public to identify trends and issues. We combine this information with feedback from our volunteers who attend a variety of meetings on our behalf. All these issues are brought to our Intelligence Gathering Group (IGG) each month which is made up of volunteer readers.







## We undertook a project to talk in-depth to patients, carers and their families from across Kent about their experiences of mental health services. As part of our project we conducted an Enter & View visit to Little Brook Hospital in Dartford. The results of this visit, plus the findings of our project culminated in a series of actions and recommendations. We have been working alongside carers, patients and the mental health trust to make a number of improvements including the completion of a Carers Charter, free

wifi for patients at Little Brook, a free bus service for families visiting from Medway to Dartford. Mental health remains an important priority for us in the year ahead.

**Mental Health** 

in Nursing & **Residential Homes** Enter & View programme. We will the coming year.

We have escalated three concerns for patient safety to the Care Quality Commission and Kent County Council following information we have received from the public. We would urge anyone with worries to contact us for free anytime. In addition we have visited a number of Care Homes across Kent as part of our continue to plan visits to Care Homes for

**Quality of Care** 

## **Complaints systems** People ring us with questions

and issues about making a complaint more than anything other issue. This has triggered us to undertake a project to look in-depth at the systems and process that our hospital trusts use to handle and manage complaints. We are also scrutinising the system for people wishing to complain about social care services. We are actively working alongside Healthwatch England, who are campaigning for a total reform of the complaints system at a national level.

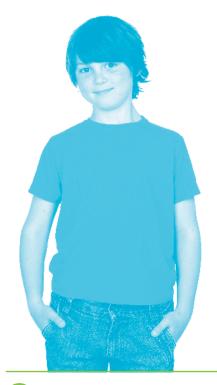


Our volunteers further research around these issues to determine what is already being done to avoid duplication. If we feel the issue needs further investigation, and that the views of patients and the public have not been heard, the decision of whether it becomes a priority for further work is made by our Deliberations & Directions (DaDs) group. This year, our DaDs group have agreed on a number of priorities and projects for Healthwatch.



## Nursing Care at Home

Working in partnership with Kent Community Health Foundation Trust we have invited patients from Thanet & Canterbury to take part in a pilot project to gather the experiences of people who are receiving nursing care at home. We gathered experiences through home visits, telephone interviews and written feedback.



# 6

## Children and Adolescent Mental Health service

We heard from a number of families about their experiences of this service. This prompted us to undertake a detailed project talking to families who use this service and identifying the key issues that they face. Our report has made a number of recommendations which we are keen to see implemented. We will be working with the organisations that commission and provide this service in the year ahead and revisiting the families to understand if their experience has improved.





## Access to services by the Eastern European community

Healthwatch has become concerned about how the Eastern European community is accessing health and social care services, particularly in East Kent. To explore this concern further and to identify the issues, Healthwatch has been working on a project to investigate. We have held a number of focus groups and worked closely with existing support groups and voluntary organisations. Coupled with a detailed literature analysis we have identified a number of issues and will be making a number of recommendations.

## **Enter & View**

Part of Healthwatch Kent's remit is to carry out Enter and View visits. Trained volunteers carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement.

The Health and Social Care Act allows Healthwatch Kent authorised representatives to observe services and talk to service users, patients, their families and carers on premises such as hospitals, residential homes. GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

This year we have completed 17 Enter & View visits. Copies of all our Enter & View reports are on our website. If you require printed copies just let us know by ringing 0808 801 0102.

### **Darent Valley A&E, Dartford**

**Purpose of the visit:** Concerns had been raised with us about services at A&E by the Health Overview & Scrutiny Committee. **Outcome:** Patients on the day were broadly positive. We will revisit once the new A&E building is finished.

## Faversham Minor Injuries Unit,

**Purpose of the visit:** We had heard strongly from local residents about the importance of the Unit following news that it may be closed.

**Outcome:** patients were receiving a good service. Signage and promotion of the Unit should be improved to ensure local people knew where to go should they need it.

### Tunbridge Wells Hospital, Pembury

**Purpose of the visit:** As part of a nationwide inquiry into Hospital Discharge we wanted to talk to patients who were being discharged that day. This visit was in conjunction with Healthwatch East Sussex.

**Outcome:** the new pilot system was making progress at Pembury and the relevant teams were working well together to ensure quick and seamless discharge of patients. Some concerns raised about discharge of mental health patients and challenges about where they could be discharged too.

### William Harvey A&E, Ashford and Queen Elizabeth the Queen Mother Hospital, Margate

**Purpose of the visit:** As part of our work to support East Kent University Hospital Foundation Trust (EKUHFT), following their Inadequate rating by the Care Quality Commission we undertook a number of visits to East Kent services. The purpose was to establish a baseline of patient experience during this initial visit. Return visits are planned for May/June 2015 to hopefully see improvements.

**Outcome:** Patients on the day broadly had a positive experience.

#### **Outpatient Clinic at:**

- Kent & Canterbury Hospital, Canterbury
- Royal Victoria Hospital, Folkestone
- Buckland Hospital, Dover

**Purpose of the visit:** As part of our work to support East Kent University Hospital Foundation Trust (EKUHFT), following their Inadequate rating by the Care Quality Commission we undertook a number of visits to East Kent services. The purpose was to establish a baseline of patient experience during this initial visit. Return visits are planned for May/June 2015 to hopefully see improvements.

# Outcome at Kent & Canterbury Hospital, Canterbury: The signage has been improved to help patients navigate their way but also to highlight services such as the water dispenser. Whiteboards have been instated to help communicate with patients about any delays and the reasons why. The appointment system is being

## Outcome at Royal Victoria Hospital, Folkestone: They will explore interim

reviewed

options to help patients find their way in advance of a full scale Way Finding project which is currently being planned. Also planning a new centralised reception to better support patients. Our return visit will examine both of these elements.

### Outcome Buckland Hospital, Dover:

The new Dover Hospital should address some of the issues around accessibility and signage that we found. In the meantime, they are exploring interim solutions to the signage issues to help patients find their way.



#### **Care Homes:**

- Barnetts Residential Home, Tunbridge Wells
- Broad Oak Manor Nursing Home, Dartford
- Sonia Lodge Care Home, Deal

**Purpose of the visit:** this was part of a number of visits to Care Homes. Homes were selected on the basis of previous CQC reports which had raised concerns about the quality of care that residents were receiving.

**Outcome at Barnetts Residential Home, Tunbridge Wells:** Continue to make improvements to the physical elements of the home

Outcome at Broad Oak Manor Nursing Home, Dartford: Residents told us that they felt their calls bells were not answered as quickly as they liked. We recommended that the Manager investigates this further and involves residents and families in the solutions

#### Outcome at Sonia Lodge Care Home,

**Deal:** Positive changes have clearly been implemented over the past two years.

## Learning disabilities day centres and residential services:

- Folkestone Independent Living Service, Hythe
- Future Home Care & The Birches Respite Facility, Tonbridge
- Martha Trust Centre, Deal
- Rosecroft Care Residential Home, New Romney
- Whiterose Care, Canterbury
- Little Brook Hospital, Dartford

**Purpose of the visit:** Healthwatch Kent undertook a series of visits to learning disabilities day centres and residential services, as part of a Kent wide observation of provision within the county. Care homes were selected on recommendation from Kent County Council.

### Outcome at Folkestone Independent

**Living Service, Hythe:** The transformation of the service from a traditional day centre to a Community Hub has clearly been welcome and well used by clients.

## Outcome at Future Home Care & The Birches Respite Facility, Tonbridge:

The clients and staff we spoke to on our visit clearly had a good rapport and clients seemed relaxed and comfortable.

#### Outcome at Martha Trust Centre, Deal:

Staff have created a Family Forum. They work with the Forum to look at ways to continually improve the service. The management try to resolve any issues by regular contact with parents individually and through the Family Forum and are constantly looking at ways to improve the service they offer. The CEO has developed a Parent's Representative.

**Outcome at Rosecroft Care Residential Home, New Romney:** The Trust demonstrated a good relationship with parents and families.

#### Outcome at Whiterose Care. Canterburu:

The residents we met had a positive experience of the service provided by Whiterose

#### Outcome at Little Brook Hospital,

**Dartford:** Free wifi for residents was installed almost immediately after our visit, allowing patients to communicate more freely with their families. A free bus service has been established for relatives wishing to visit from Medway. Improvements have been made to the outside area and the number of activities for patients has been improved.



# What difference have we made?

1,225 people have directly contacted us this year either by phone, email, through our website or by talking to us face to face at events and community meetings. We have helped each of them with information and signposting to the right service or support.

Hundreds of people have shared their experiences of services with us and we have taken those experiences directly to the people who commission and provide them in order to improve them for the future

Other ways we have made a difference is through our projects and Enter & View visits. Our visits give people a voice. By talking to us and voicing their experiences we can help to make a difference to services. So for example, **mental health patients** and their families told us about how difficult it was to stay in touch and visit loved ones when the mental health hospital was so far from home. As a result free Wi-Fi has been installed at Little Brook Hospital in Dartford and a free bus service is now provided for families from Medway wishing to visit patients in Dartford.

We have attended meetings to help plan the move of another ward from Medway, this time to Maidstone. In response to our work visiting Sapphire Ward in Dartford this year, we were asked to contribute to the plan for the move of Emerald Ward to Maidstone to ensure issues such as travel for relatives and activities on the ward were planned effectively.

Our visits to **care homes** led to changes being instigated re menu choice and staff training, as well as improving the decoration.

We facilitated a meeting between a **Fibromyalgia** support group and a GP practice where there were concerns from the group about the approach of the practice to fibromyalgia. The meeting was very successful and the practice have agreed to display information about the condition and the support group.

Following every Enter & View visit we make a number of recommendations. On visiting **Outpatients** in East Kent we made a number of suggestions for improvement to their appointment systems and waiting rooms. Most of our recommendations have now been implemented and we are planning a follow up visit to ensure patients are enjoying a better experience.

Similarly by working with mental health **carers** and other voluntary organisations we have helped to raise the voice of mental health carers. We've worked collectively together to ensure a Carer's Charter is now in place and a regular communication with carers across Kent has recently started. Carers have been trying for many years to make these relatively simple changes.

Working with the **Deaf community** we have heard about the extreme difficulties that have in making appointments and securing British Sign Language Interpreters to support them. We've been working jointly with Kent Community Health Foundation Trust, Kent County Council and East Kent University Hospital Trust to create a free credit card which they can present to any health or social care professional to indicate that they require a translator. These cards will be available shortly. Linked to this, we have created a new text service for people with hearing loss who want to contact us. The text service allows people to share their experiences or ask for information. It is also a route for people wishing to set up an appointment with our BSL interpreter to have a more in-depth conversation.

Other examples of our impact are related to **safeguarding** issues. We regularly share our intelligence with the Care Quality Commission and we have escalated three issues this year which we deemed to be serious safeguarding concerns. These issues have been dealt with swiftly by either Kent County Council or the relevant Clinical Commissioning Group. Through our feedback to organisations about the quality of their previous consultations we have worked closely with hospital trusts to ensure a robust engagement takes place with the public going forward. This work has been on stroke services with Maidstone & Tunbridge Wells NHS Trust which spoke to over 200 people. We are also in the process of working with East Kent University Hospital Trust to ensure the public are fully involved in their clinical strategy.

We have also been an integral part of the **integration** of health and social care services. We took over as chair of the communication and engagement working group of the Kent Integration Pioneer and worked with partners to develop a shared language to be used by organisations across the county when talking about integration.

We are one of the first Healthwatch in England to speak to **people in their own homes** about the services that come to them. Although it is not part of our powers such as Enter & View, many people receive care at home. We found many people received a good service but we fed back to the community trust the areas patients felt they could improve.



# The year ahead?

# Together with our volunteers, we have identified the following strategic priorities for 2015/16

#### Improvement of Mental Health Services

We will work with patients and carers to establish if they feel services have changed following our work to improve services

### Improvement in Children and Adolescent Mental Health Services (CAMHS)

We will work in partnership with commissioners to ensure the voice of young people is heard in the redesign of CAMHS, now known as Children and Young People's Services (ChYPS)

## Health & Social Care Complaints

We will follow up our evaluation of complaints processes in health and social care with an evaluation of the improvements that have been made from complaints, and how those improvements are maintained.

## **End of Life Care**

We will get feedback from patients on the effectiveness of new end of life care pathways in the hospital and community trusts in Kent.

### **Dentists**

We will speak with patients of dental practices in Tunbridge Wells to understand their experiences, and work with those practices on evaluating their services.

## **Focus on Social Care Services**

We will ensure we have equal focus on social care services and health services.

#### **Children & Young Peoples Services**

Working with existing networks we will ensure that the voice of children, young people and their families are heard in setting strategic priorities and developing new services.

## Integration of health & Social Care services

Healthwatch Kent has already been heavily involved in the strategies for integrating services and we will continue to monitor the impact of the Better Care Fund. We will actively gather experiences of people who are moving between services such as from a hospital to a care home.

## **Public Consultations**

We will work in partnership with organisations to ensure they actively engage communities when consulting on service changes. We will act as a critical friend, setting out our expectations of good practice.

We will also be continuing to raise our profile amongst the general public. If you can help by placing posters and leaflets within your local community do please let us know.

You can follow the progress of these projects through our website or sign up for our monthly newsletter. If you are particularly interested in any of our priority areas or would like more information, do please get in touch.



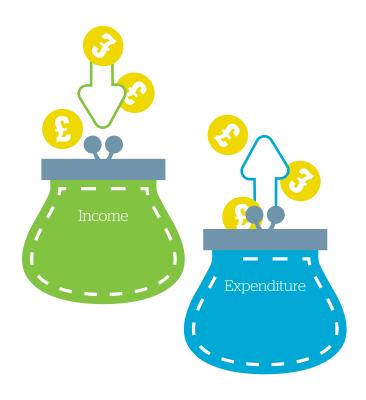
## **Finances**

# Table heading showing statement of activities for the year ending 31 March 2015

Income	Total
KCC Contract	£411,555
KCC Business case projects	£122,213
Project income	£13,940
Total income	£547,708

Expenditure	Total
Engaging Kent	£15,601
Staff employment costs	£170,587
Staff recruitment / training	£2,395
Staff and volunteer expenses	£17,978
Projects and research	£287,277
Professional fees	£5,667
Office related costs inc Insurance	£25,345
Total expenditure	£524,850

Surplus on activities before taxation	£22,859
Surplus on activities after taxation	£18,287



## Balance sheet as at 31st March 2015

## **Fixed assets**

Tangible assets	£3,981
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## **Current assets**

Debtors	£104,337
Cash at bank	£154,341

## Total current assets £258,678

## **Creditors** (£243,576)

(amounts falling due within one year)

Net current assets /(liabilities)	£15,102
Total assets less current liabilities	£19,083
<b>Provisions for liabilities</b> Deferred tax	(£796)
Net assets	£18,287
Capital and reserves	£18,287

#### Note

Tangible assets, based on ICT equipment purchases minus a depreciation charge. Cash at Bank - funds allocated to current projects

 $Creditors-trade\ creditors, taxation\ and\ social\ security,\ deferred\ income\ and\ accruals.$ 



# Your voice counts We want to hear from you

Tell us your experiences of health & social care services in Kent



## **By Telephone:**

Healthwatch Kent Freephone 0808 801 01 02



## By Email:

Info@healthwatchkent.co.uk



## **Online:**

www.healthwatchkent.co.uk



**By Post:** Write to us or fill in and send a Speak out form. **Freepost RTLG-UBZB-JUZA** Healthwatch Kent, Seabrooke House, Church Rd, Ashford TN231RD



## Face to Face:

Call 0808 801 01 02 to arrange a visit



**By Text:** Text us on **07525 861 639**. By texting 'NEED BSL', Healthwatch's British Sign Language interpreter will make contact and arrange a time to meet face to face.

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