healthwatch

Healthwatch Liverpool Annual Report 2015/16



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Message from our Chair



Lynn Collins, Chair of Healthwatch Liverpool

I was appointed Chair in July 2015 in what has been an exceptionally busy year for Healthwatch Liverpool. Over the first six months we arranged visits to meet the senior officers of all of the NHS organisations in the area, and as well as doing introductions this gave us an opportunity to describe the full range of work that healthwatch undertakes. I have taken up the Healthwatch seats on Liverpool's Health and Wellbeing Board and the Clinical Commissioning Group Governing Body, neither of which I could do without the input of our staff and volunteers to ensure I am briefed on the key issues. And it's down to the fantastic work of those staff and volunteers that Healthwatch has maintained a high profile and presence in our community, as this annual report will testify.

Looking ahead, there will be many challenges over the next 12 months. Cuts to public health funding will hit services and impact on Liverpool citizens, and the evolving devolution agenda is likely to have implications for health and social care. Healthwatch Liverpool will continue to work hard to ensure the voices of Liverpool citizens are heard on all issues that impact on health and social care

Message from our Joint Chief Officers

Looking back at 2015-6 there is both satisfaction and unfinished business. Satisfaction because our first year of running Healthwatch Liverpool as a single service under a new contract has allowed us to make many of the changes that we wanted to our ways of delivering the service and engaging with the public. This has borne positive results. On the other hand, a sense of unfinished business because of the scale of the challenge in health and social care that still remains.

In terms of the satisfaction we have much to be proud of:

- The public those we meet at events, those who share their experiences with us and our many enquirers - we learn from you and your experiences every day. We are particularly heartened when you take the time to tell a friend, relative or neighbour about what we do.
- Supportive partners who recognise the value of our unique role sitting both inside and outside the system, with an overview of services and informed by the public about what it feels like to be on the receiving end of those services. We were pleased to see so many of our partners at our first Partners Event in October and hope to see even more of you at our next event in autumn 2016.
- A steady volunteer base, supplemented throughout the year by students on placement with us. Without you all we could not have the impact we do and we thank you for your many hours engaging with the public at community events, in health services and assisting the team to carry out their work.

Massive challenges lie ahead. Liverpool residents experience worse health than elsewhere in the country, despite valiant attempts of so many frontline health staff and when residents in some parts of Liverpool experience 10.5 years less life than in more affluent areas we cannot rest easy. Major changes are needed to address these inequalities. We know that in the current economic situation with local authority budgets cut, with health budgets in the city falling in real terms, with more of us enjoying longer lives and therefore needing more health or social care, our health and care system face problems on a new scale.

This will bring challenges and these will need new approaches. Change is not easy and not always popular. In this city we are proud of our public services, including the NHS, and fearful of them coming under attack. In the times of change ahead Healthwatch is here to support the public to make their views known - from an informed perspective - both on their everyday experiences of using services and their hopes, fears and concerns for the future of these services. We encourage services to really listen to those voices, to communicate honestly and to learn from public feedback. We also challenge, constructively, if services do not do this. We have much more to do in the year ahead.

Sarah Thwaites Tony Okotie

Who we are

We all want the best possible health and quality of life for ourselves, our families and others in our communities. Healthwatch exists to make health and care services work for the people who need them and to help local people understand their options, be able to make real choices and to be listened to about their experiences, needs and preferences.

Our links to local people and communities help us to understand the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.We believe that asking people about their experiences - and really listening to what they say - can identify issues that, if addressed, will make services better.

Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their agenda. We are uniquely placed to to do this because:

- We have an overview of health and care services. Most people and services only have a good knowledge of the parts of the system they use or work in very well We have an interest in every aspect of health and adult social care allowing us to see links and connections and where these break down.
- We are local but nationally connected. As a local service we are in touch with local concerns and with connections into both local communities and services and decision makers. With a national network behind us and a local Healthwatch in every local authority area in England we can also help to influence national and regional decisions.

Our priorities

We have some constant priorities that steer our work year in and year out. These are:

- Helping people through the maze of health and care services
- Hearing what patients really think
- Seeing how services really work
- Helping keep people safe
- Helping people stay well

We also have focused priorities on issues which feedback and public experiences tell us are problems. At present this includes:

- Safer discharge from hospital
- Student health and mental health
- Care Homes helping homes improve and supporting people to choose the right care.

Other priorities emerge from the changes that we know are coming. These include:

- Pressures in the health and care system
- Changes to hospital care are they patient centred?

Listening to people who use health and care services



Gathering experiences and understanding people's needs

People's experiences underpin all the work we do so it is important to us that speaking with the public is always a priority. To understand people's needs we need to speak to them and find out what their experiences are and how they feel about them.

Making ourselves visible

We set ourselves a number of aims for the year including raising awareness of Healthwatch, increasing the volume of public experiences we gather, engaging with people where they are rather than expecting them to seek us out and ensuring there are clear routes for the public feedback we gather to influence decision makers.

We've attended 92 events in hospitals, health centres, parks, student halls, sheltered accommodation, children's centres, churches, mosques, sports centres, churches, community centres, HMP Liverpool, Williamson Square and St George's Hall.

This gives us the opportunity to hear the experiences of people we wouldn't usually meet and lets them know about what Healthwatch can offer. Once you've met someone, it can be easier to ask them difficult questions. People who've never heard of Healthwatch come to events and get chatting, finding out there's support they didn't even know to ask about.

Making chance encounters count

Because people won't always come looking for us, we aim to meet people



where they are and find out how we can help them. Such a conversation, with someone at a multicultural centre, revealed that their relative was undergoing chemotherapy. We provided information about local support groups, which they hadn't been aware of. This information can then be shared by word of mouth with other community members.

We're listening

This year Healthwatch Liverpool began a series of 'Listening Events', going into hospitals and speaking with patients. On the 3rd December 2015 a team of staff and volunteers went to the Royal Liverpool Hospital and spoke with 89 patients in the reception, clinic areas and on wards. On 18th February we visited the Liverpool Heart and Chest Hospital and Broadgreen Hospital which are both on the same site and spoke with 46 and 17 people respectively. This helped us reach a range of patients on those days including those who use the service but live outside the area.

It's good to share.

We want feeding back on services to be a positive experience for patients. This has not always been the case and people can doubt that their voice counts or will be listened to. Whether it is passing on words of thanks to staff who delivered excellent care or finding a way to share concerns where services haven't met expectations, there is a need to go beyond 'tick box' answers and give patients a way to really be heard. Because people can feel reluctant to 'make a fuss' or to 'be a whinger' we remind people that them sharing their experience gives the service a chance to put a problem right and can prevent someone else having the same problem.



In 2014 we began using Patient Opinion as a way for people to share their experiences anonymously and for services to respond and take action. This year Liverpool CCG also began working with Patient Opinion providing an account for all the local NHS trusts with plans to extend this to GP services after a pilot. We have worked with the CCG, Patient Opinion and trusts to help develop a shared understanding of how these rich personal stories can supplement the more statistical data that hospitals are monitored on.

Tell us what you really think



Our new promotional material has proved to be effective at events as members of the public approach us and say "I've come to tell you what I really think".

We know that there are many competing demands on people's attention, so much information overload that we can all miss information by tuning out.

At Healthwatch Liverpool we take our time to listen to each person to find out what they need and try to offer the right information to help them. Their experiences will also be used to inform our future work to ensure we continue to influence change.

Talking about health is child's play



Healthwatch Liverpool have developed a range of materials to use when engaging with children including Healthwatch Heroes and our Healthwatch Duck. Children complete a health related activity before having a chance to play Healthwatch Hook a Duck. This gives our youngest health patients a way to share their thoughts about services. Seeing their children do this often encourages their parents to do the same.

Diverse voices all count

Liverpool's diverse communities all have experiences to share but many people are reluctant to do so formally. Many people worry that speaking out will influence their care in future. Instead of talking to the services that need to change many people just speak to other communities members. This allows dissatisfaction to spread but doesn't give services the chance to put things right. Over the course of the year we have spoken to many groups, community leaders and individuals about why their voices are important and helping them to speak out.

For example, we have held a series of meetings for community activists at the PAL Multicultural Centre in Toxteth and well attended events for community members. We also arranged for staff from the nearby Liverpool Women's Hospital to attend an event at the centre as a way for the community to have an input into the discussions around the hospital's future

Engaging with prisoners

With Healthwatch Liverpool Independent Complaints Advocacy team, we have begun a piece of work to engage with prisoners. This has involved going into HMP Liverpool on a number of occasions speaking with staff and prisoners to look at how prisoners can engage with Healthwatch to give feedback, ask questions about services or speak with someone about a complaint. Future plans include more visits, extending to include HMP Altcourse and developing information material to be given to people as they leave prison.

Engaging with carers

We know that unpaid family carers have a lot of experience about health and care services to contribute but are often too busy caring to stop to provide feedback or to seek out the information that would help them and the person they care for get the best out of services. We were therefore pleased this year to supplement our usual work with carers with a focused engement with carers on behalf of the city council to dig below their responses to a paper survey.

Engaging with Students

We have done a lot of work to engage with Students this year which includes attending freshers fairs and other student events. More on the Student project can be found on page 21.

What we've learnt from visiting services

This year we carried out 13 Enter and View visits to 11 different services.

Of these 8 were Residential or Nursing Homes.

Crompton Court Care Home

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- Bentley Care Home two visits
- St Joseph's
- Greenacres
- Finch manor
- Walker Lodge
- Breckside Park two visits
- Rockfield House

We visited Aintree Frailty Unit as part of the Hospital Discharge project. Two Enter and View visits were carried out at GP Practices as part of project work at Storrsdale Medical Centre and Brownlow Student Health Centre.

Enter and View visits are a good way to go into a service, to see how it is working for the people using it and to speak to the people using it. This is particularly important in Care Homes as many of the residents are unable to tell us their experiences any other way.

We chose which services to visit for a number of reasons. We may be responding to public feedback - positive or critical - about a service and want to see how the service works in practice. We may visit because we know that a service is facing a particular challenge and want to see how well they are responding to that. We may choose to visit a service such as a care home in between its more formal inspections by the CQC or its commissioners. This allows us to check if a service appears to be working well and if residents or patients are happy with it. This independent observation can give homes insight into their strengths and areas for improvement prior to their inspections.

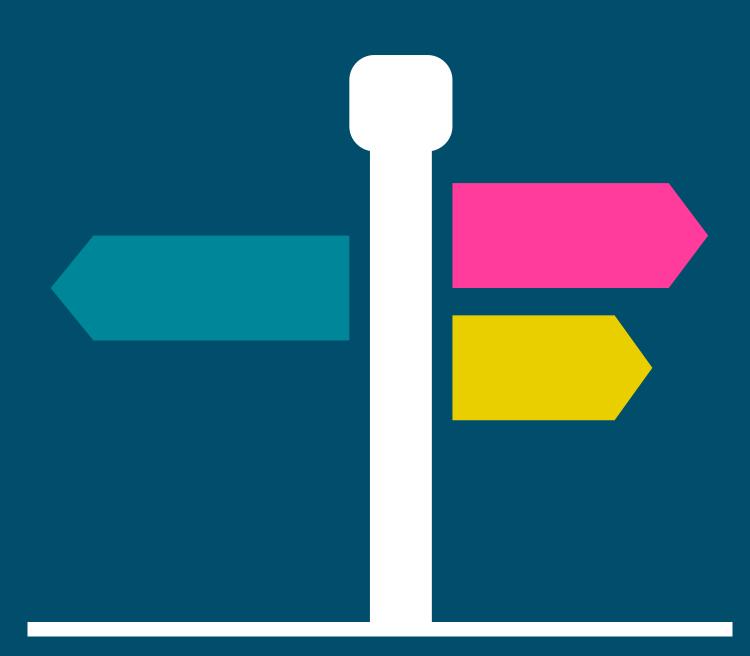
Healthwatch Liverpool may identify what we see as good practice during an Enter and View which we will write up and share with the service, commissioners and the public. We will also make recommendations which we put to the provider for a response and share with the local authority and CQC.

We carry out a mixture of unannounced and announced visits. Both have their strengths and drawbacks. Unannounced visits provide a 'warts and all' view of a service but can mean that key members of staff that we might like to talk to are not available. We may therefore choose to use follow up visits. This year Healthwatch Liverpool carried out follow up announced visits to two services which had previously had an unannounced visit. We found that a follow up visit could be useful as it gave us the chance to fully explain our role to the manager, who hadn't been present on the first visit, to get an update on recommendations we made in our first report and discuss anything else the manager, other staff or residents wished to.

"My only response would be to say Thank you for your visit, it was a pleasure to be involved in an inspection that looks at the service from the point of view of the people who use it and the staff who work there and to receive such a good report."

Jane Troy, Service Manager, Voyage Care, Walker Lodge

Giving people advice and information





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

The health and care system can be very complicated. People are often unaware of what services there are or how best to access them. We want everyone to have access to the best quality local care, and knowing what is available is the first vital part of this.

Our directories and enquiries service are important because people need control over their own lives, especially their health. If people don't get timely, accurate advice their problems can spiral and become out of control, making life more difficult for them and increasing pressure on services.

Directories

We collect, input and update information on thousands of services onto 3 linked online directories.

- LiveWell Liverpool provides the public with information on health and wellbeing related services and activities. Wirral services have recently been included and information from other parts of the 'Liverpool City Region' will be added soon.
- Wellbeing Liverpool is a key part of the city's approach to mental health promotion and prevention
- The Ralfy directory helps GPs to speedily access information to support their patients.



Services are constantly changing and we are always working to keep the information on the directories accurate and up-to-date.

We have around 2000 directory entries including GPs, dentists, pharmacies, specialist health services, care services, lunch clubs, community activities and self-help groups.

"Thank you very much for your concise and accurate portrayal of CoDA in Liverpool. I'm grateful for the work you've done and including it in your listings."

The directories are also used by organisations to help them find potential partners or contacts. The information on them is also underpinning work on the Liverpool Physical Activity and Sport Strategy see page 23 to find out more about this.

Search endlessly or ask us



We never forget that many people do not have access to the internet or in a time of stress may find a directory too impersonal. We are always happy to be the 'human version' of the directories for our enquirers. In 2015-16 our enquiry service dealt with 2716 enquiries, most of which contained complex situations.

People contact us looking for information for themselves, family members and friends, or for people they are supporting professionally. We provide information in a way that suits their circumstance and we pride ourselves on providing a personalised service to meet individual needs.

Going beyond the obvious

People can contact us about anything that concerns health or wellbeing. Sometimes people aren't sure what it is that they are looking for or what services might be out there to help. We are happy to listen and take it at the person's own pace, sometimes over several calls or emails. We often suggest possibilities that the person hadn't even considered and always remember that people are individuals who need to make their own decisions about what will work for them.

Our team are selected for their ability to relate to people on a human level, with understanding and compassion. People who call us are often relieved that we aren't a call centre but 'real' people who know the system and the city and can help them see their way through the maze. We are often thanked for how quickly we can provide relevant and detailed information and how much of a difference our approach makes.

"Thanks for seeing me. It made me feel good the conversation, I felt it was a bit of a milestone and I hope I will now be able to get in touch with people who hopefully will be able to make the difference." Person who feels that their physical health symptoms are being dismissed by their GP because of their previous mental health issues.

"Thank you so much for all your information, everything you have said is correct, it is an emotional time for me.....as I'm sure you understand things are not easy, and decisions are tough to make, change is difficult. Thank you once again you are most helpful." A recently bereaved person planning a move into accommodation which is more suitable for their health.

Often our enquirers go on to contribute to our work by providing valuable feedback about services they have accessed. This gives us early warning of where things might be going wrong in a service and so informs the other areas of our work.

How we have made a difference

Project Work

Throughout the year we highlighted some areas for particular focus and worked on collaborative projects around these.

Continuity of Care at the GP

Our focus on continuity of care began when we received numerous concerns from patients about some GP practices which were relying very heavily on short term locum GPs. This was compounded by issues in how these services were managed. Patients felt that they had no continuity of care and that their treatment suffered as a result. This feedback was shared with the CQC and commissioners. The provider of these practices has now changed and patient feedback indicates that care has improved as a result.

We had become aware though that some other groups of patients, mainly those with long term conditions such as Chronic Obstructive Pulmonary Disease (COPD)or diabetes also had strong opinions on continuity of care. We began collecting feedback from these groups about continuity of care at GP surgeries. We wanted to find out from patients how good they felt the care they received is to help them manage their long-term condition(s), whether they felt they received enough information and if they felt there was continuity in the care received. Healthwatch Liverpool spoke with patients at patient groups such as the Stroke Association, and with patients at events, in health centres and hospitals. Additionally questionnaires were distributed. We have also liaised

with key stakeholders such as Liverpool CCG as long term conditions feature highly in Healthy Liverpool plans.

The project is ongoing, with the aim to bring it to a conclusion by the end of 2016.

Discharge from Hospital

We have been focussing on this subject because of feedback and concerns that we were hearing from members of the public. We were aware that this mirrored national patterns. We have drawn local attention to some of the important pieces of national research and recommendations on this subject such as Healthwatch England's Special Inquiry findings, 'Safely home: What happens when people leave hospital and care settings?' (July 2015). We also decided to take into account the useful work that other local Healthwatch organisations like Healthwatch Knowsley have done. This has enabled us to take a twin track approach to the subject. Firstly we have held networking meetings with Liverpool CCG, and representatives from local NHS Trusts to understand some of the pressures and see how they are responding to these pressures to identify and share best practice. The networking has extended to Healthwatch organisations, Hospitals and CCGs across Merseyside. Parallel to this we are getting a patient perspective of the current state of hospital discharge locally via a questionnaire and carrying out Enter and View visits to some of the local services. Liverpool CCG is responding to both the national drivers and their engagement with Healthwatch Liverpool by introducing measures to improve

Hospital Discharge locally and is continuing to engage closely with Healthwatch Liverpool regarding their plans. We continue to engage to ensure the patients voices are heard on this important subject.



Influencing decisions and securing change

Healthwatch can use our reports to make recommendations which we ask providers to respond to. It is easy to count these, for example, we made 39 recommendations to care homes as part of our Enter and View visits. However we believe that real and lasting change comes instead from the much harder to measure influence. This may not involve formal recommendations. Instead it can come from being in the right position at the right moment with the right evidence to influence decision makers.

We know from patient feedback that our experiences are determined not just by the big strategic decisions but also by the way we are treated, how staff talk to us, how well our needs are understood and met. We believe that front line staff go to work with the aim of delivering good care and that we can best help them in this by being constructive in how we engage with them.

Now that Healthwatch Liverpool is known and trusted by key services and decision makers, what is often more effective than lengthy recommendations is a quick conversation with the right person who has the power to make changes. Many problems come to our attention via the enquiry line and it would be possible to make a lot of public noise about these problems and to produce endless lists of recommentations. What matters to us and makes more difference to local people however is getting problems resolved, and where possible prevent them from recurring.

A health professional brought a situation to our attention which we explored further with the member of the public. A mum of a very young baby who had taken ill was sent by the North West 111 service to a walk in centre 17.4 miles away and in an area served by different hospitals when there were a range of services within Liverpool which would have been able to help. The mum wanted to understand why this had happened and to know where they should go should the baby have future health problems. After many exploratory phone calls and emails the reason for the inappropriate advice was eventually identified. The system was changed to make sure a similar situation could not happen in future.

"We had previously been made aware of your concerns on 22nd December 2015 by Healthwatch, at which time an investigation was carried out, actions were taken and feedback provided...Following discussions with Liverpool Clinical Commissioning Group, their Directory of Services Managers and their Clinical Lead this issue has been addressed" Excerpt of letter from North West 111 Service reponse to the parent confirming that the situation has been resolved.

Another member of the public raised concern about the the monitoring form used by Spire, a private provider which is providing increasing amounts of NHS funded care. The form was outdated and and not in keeping with the Equality and Diversity expections on publicly funded services. As a result of us raising concern about this it is being addressed by Spire nationally.

"As you can see the complaint has led to a number of actions at a national level so can I thank you for bringing it to our attention" - Liverpool Clinical Commissioning Group

Working with other organisations

We recognise that despite our strategic importance and statutory powers, Healthwatch Liverpool is just one small part in a much bigger health and social care system. We therefore know that to have the impact we want we must work collaboratively. This approach is embedded into everything we do. This includes our project work such as on student health where we worked with students, universities, health providers, commissioners and others and in our ongoing work to collect and share public feedback with people who need to hear it to bring about change - this includes but is not limited to services, the CCG, NHS England and the CQC.

Example: Quality Assurance Group

We meet on a monthly basis with other organsiations such as Liverpool City Council, Liverpool CCG, the CQC, infection control team and lead GP to consider quality and safeguarding issues in social care, particularly care homes. By pooling the information that we each hold, developing a shared understanding of priorities and risks and coordinating action we can collectively provide the best degree of oversight into care homes. This allows visits to be informed by an understanding of the shared intelligence and on occasions this has included joint visits to care homes allowing each partner to focus on their area of expertise or concern but in a coordinated manner.

Example: Safeguarding

Our enquiries bring us into contact with some very serious situations, where people are not as safe or as well cared for as we would expect. We are members of the Safeguarding Adult Board and three subgroups, which provide an opportunity to work collaboratively with partners to feed in the experiences that people share with us and work to make Liverpool residents living in potentially vulnerable situations, safer.

We have also been concerned for some time about the lack of support for people whose mental health issues results in hoarding behaviour. We are therefore pleased that self-neglect is now covered

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by Safeguarding and will be part of a task group looking at this issue in 2016-17.

Where issues have a wider geographical impact they are fed through to the Quality Surveillance Group which provides strategic oversight of health and care services accros Merseyside.

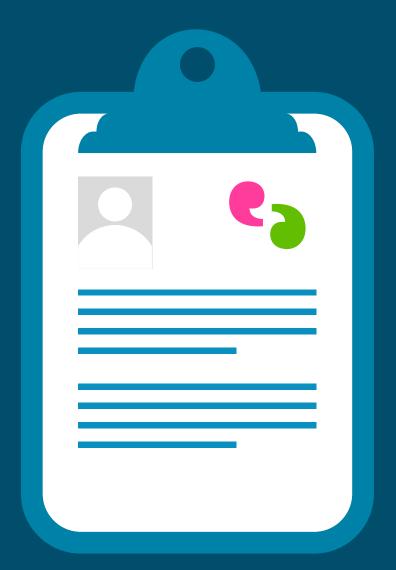
The major challenges facing the social care sector are the reason that this has been highlighted as a Healthwatch Liverpool key priority for 2016-17.

Involving local people in our work

We believe that it is important for local people to have a range of ways and levels for being involved in our work. Some people have the motivation and time to become Healthwatch Liverpool volunteers and we are immensely appreciative of their contribution. However we know that people have busy lives with many competing priorities and we need to make it easy for people to be involved at the level that suits them. For other people involvement in our work will be shorter term either with a particular piece of work or even arising from a chance conversation with us at an event. Sharing their experiences with us as we assist them with an enquiry, taking part in a discussion group or leaving feedback online - all of these are valid and valuable ways to contribute to our work and to improving health and care services locally.

Healthwatch Liverpool is represented on strategic bodies such as the Health and Wellbeing Board and the CCG Governing Body by our chairperson, Lynn Collins. In her day job Lynn is North West TUC Regional Secretary and brings with her a wealth of community connections.

Healthwatch in action



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Healthwatch in action: Student Health



Healthwatch Liverpool at Student Freshers Fair

With 4 universities/ higher education settings in the city and over 50,000 students Liverpool is a major university city. Although each of the universities makes considerable efforts to support the health and wellbeing of their students, for many students, messages about registering with a GP are overlooked in the stress and excitement of their arrival in Liverpool. This leaves many students without ready access to a GP or NHS mental health support and more likely to turn to inappropriate services such as A&E for matters that could better have been dealt with elsewhere. This is not good for students or the services themselves which are already facing a high level of demand from local people needing to access those services. Students are not the only group who are tempted to use the 'wrong' service, they are however, a large grouping and it was clear that collective action could

help improve the situation. We also knew from feedback that students sometimes struggle to access mental health support, finding services confusing , waiting times off putting and service provision not ideally suited to their patterns of term time only residence in Liverpool.

> "Once you're getting support things tend to be good, but getting into that 'world' is incredibly difficult, especially if you don't know anyone with experience of navigating the system." - student

Our actions.

We:

- talked to students and student representatives to find out what they thought about services
- interviewed organisations about what works well and what could be improved
- brought partners together in round table meetings to find collaborative solutions. These meetings are continuing into 2016-17.
- collected information on options for students in mental distress and circulated these so that frontline service can give students accurate and consistent information on their options.

- are active partners in student welcome events, providing information stalls, talking to thousands of students and encouraging them to register with a GP.
- personally delivered 100s of completed registration forms to GP practices on behalf of students.

 Have designed a student specific page for our website <u>http://www.healthwatchliverpool.</u>
<u>co.uk/students</u> "I think these round table meetings have been great and really useful for networking between different agencies. I really appreciate the lead Healthwatch have taken on this issue" Karen Sheehan Head of the Counselling and Mental Health Advisory Service, University of Liverpool

We will be reporting to the Health and Wellbeing Board on work in this area in July 2016.



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Healthwatch in action: Healthy Lifestyles



Picture taken at our Twitter Chase day

"Residents in the City experience a range of worse health outcomes in comparison with similar cities, with significant levels of inequality within parts of the city and with other parts of the country.Inequalities within the city are shocking:the gap in life expectancy between the ward with the highest (Woolton) and the ward with the lowest (Kirkdale) life expectancy is 10.5 years;" *Healthy Liverpool Prospectus*

This needs to change. Most of our work in Healthwatch Liverpool is about making sure that we all have access to top quality, joined up services that meet our needs as patients. But there is more to health than health services and there is much that we can all do to look after our health - and that we can be helped to do.

We know that it is good for our health if we eat well, are physically active, cut down our smoking and drinking and generally take good care of ourselves. But we also know that this isn't always easy and that when we are busy, stressed or strapped for cash even the best intentions can go out of the window. Some groups of people face particular obstacles to keeping well and may need extra help to have the same chances of activity and good health as others take for granted. At Healthwatch Liverpool we are committed to doing everything we can to make sure that people have the information, support and encouargement they need to make the right choices for them.

Many people rule out physical activity as being 'not for them', especially if they have long term health problems. There are so many options that we can usually find something for everyone - from the fastest jogger to strollers in the parks and including disability friendly options.

Our discussions with people with mental health issues have highlighted that people want the same chances to look after their health but can feel that professionals shy away from having these conversations with them out of fear of destabilising their mental health. It may be more difficult to motivate yourself to stop smoking or get moving when you are feeling low or very anxious but this is a reason for people to be offered extra support and encouragement not for the subject to be avoided. We use every opportunity to remind services of this and the need for health promotion activities to be psychologically informed and sensitive to individual circumstances.

We offer suggestions around how to be active to as many as our enquirers as possible, often encouraging people to try activities - in supportive environments where needed - that they might not have thought possible for them.

"Thanks for all the details you have sent me, I really appreciate it. I never thought that there would be anything available to me. This is wonderful news, not because there are others suffering but the fact that there is a place where people may understand my fears. The chair yoga and relaxation classes sound really interesting to me as I find it hard to concentrate, relax or sleep at the moment. I can't thank you enough for this information - this is extremely helpful." - Talk Liverpool patient given our number to find activities to help with their stress and anxiety.

Our actions

We make sure that LiveWell Liverpool has information on as many physical activity options as possible.

The information on the LiveWell directory has also

- Been shared with GP neighbourhoods where physical activity is a priorty to help doctors know the local options for their patients and
- Is populating a new physical activity finder.

We have also been involved in:

- Supporting an initiative in Croxteth where local residents interview and encouriage other residents to use local community assets to get active.
- Finding physical activity champions to support the new physical activity campaign.
- Arranging Twitter Chases in which teams on city bikes visited and tweeted about activites and services in local neighbourhoods to raise awareness of the range of options.

Finally we try to live by our own advice and keep as active as we can.

Our plans for next year



Future priorities

Helping people through the maze Our information and enquiry service will continue to be the bedrock of what we do. It allows us to help local people make sense of the complexity of health and social care provision. It also keeps us rooted in reality: hearing how services and changes to these impact on real people's lives means that when we attend meetings and speak out, we do so with patients at the forefront of our mind.

Hearing what patients really think We need to hear as many people's experiences as possible. We are therefore expanding the 'Listening events' we began with local hospital trusts in 2015-16, to include Health Centres. These give us the chance to get feedback while patients are on site and the quality of their care is fresh in their minds.

We will continue to support the public to use Patient and Carer Opinion to share their experiences of services and to encourage services to use this feedback constructively as an opportunity to improve.

Seeing how services really work We are continuing with our programme of Enter and View visits as these allow us to see services in operation and to speak to users of those services who wouldn't be able to share their experiences with us in any other way.

We continue to work in conjunction with other partners to make sure that our visits are helpful and well timed and complement rather than duplicate visits by the CQC and others. We also use other opportunities such as PLACE assessments to review how services actually work on the ground.

Helping keep people safe

We all want high quality care. The very least that we should be able to expect is safe care. We are therefore actively involved in local safeguarding work, both where issues arise through our enquiries and at a strategic level as a member of the local Safeguarding Adults Board and chair of the Prevention and Engagement subgroup.

Making a difference through project work

We continue our project work where we look in more depth at issues highlighted by the public. This coming year we will be continuing work on projects work highlighted earlier in the report on hospital discharge, student health and continuity of care for people with long term health conditions because we recognise that there is more that Healthwatch can contribute on these subjects.

We will be starting a project to refocus our activity around **Care Homes**.

Helping care homes improve

There are major pressures within social care and finding a suitable care home place for someone when they need it can be very difficult. This causes problems for our hospitals when patients are ready to be discharged. A number of care homes in the city have closed. We want to keep as many of the remaining homes in the system as possible and providing the standard of care that we would expect for our loved ones.

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There are many useful resources for homes but often care home staff do not have the time or often the internet access to find these. We are therefore collating useful resources and tips to help support homes to address any weaknesses that we identify. We will also be highlighting and sharing good practice

Helping people choose the right care

We know how stressful it can be to move into a care home or to find one for a family member. We will work with care homes and other partners to provide information to make this process less bewildering, including encouraging people to share feedback on care homes to help others make informed decisions.

Pressure in the system

Social care has been under massive pressure for years - trying to meet growing needs with rapidly diminishing resources. Home care services struggle to recruit and retain staff. Nursing homes face particular problems recruiting nurses. Finding - and funding - high guality social care services to meet people's needs is harder than ever. This is a huge worry for the people who need care and their families and also has a direct impact on NHS services. With the NHS locally entering a period of tightening resources, difficult situations lie ahead. Our role is to remind those taking difficult decisions that real people and their lives are directly affected by them.

Healthy Liverpool

The Healthy Liverpool programme will begin this year to dominate discussions on health services and to influence the care we all receive. As outlined on page 28 much of our work fits within the strands of Healthy Liverpool. There will be extensive public consultation on Healthy Liverpool's big structural proposals such around hospital services.

Changes to hospital care - are they patient centred?

Major changes are happening to hospital services in the city. Alder Hey is now in a new building. Construction of the new Royal is well underway. Clatterbridge is opening a site in Liverpool to deliver cancer care closer to home. The future of the services delivered by the Liverpool Women's Hospital are being consulted upon.

Some of these changes are welcomed wholeheartedly by local people. Others cause fear and concerns. Healthwatch's role in this is to stay impartial, encourage the public to have their say and ensure that those views are listened to. We aim to make sure that consultation is meaningful and honest, that people know what the proposed changes would involve and the risks and opportunities if the proposals do or don't go ahead.

If changes are implemented, we aim to make sure that patients' views and needs are at the heart of this. We use patient experiences as a reality check to feedback whether this is happening in practice.

healthwatch

Liverpool faces major health challenges. Healthy Liverpool is the city's plan to improve the health of people in the city with the aims of supporting more of us to stay well for longer and providing the best treatment and care when needed. A lot of what we do links in to the five priority areas of the Healthy Liverpool strategy.



Our work to collect and maintain information on options for physical and other health promoting activities underpins work in this area. Our enquiry service gives people a human way to explore their options.



Digital Care and Innovation

Technology presents opportunities but can also create fears. We can encourage services to improve online access - eg to registration and appointments - which many patients expect to be able to do online but often can't. We help people who are less confident with technology to understand the changes and liaise with partner organisations to support people to make their first move into using technology. When people without a GP attend A&E or a walk in centre, if they consent, their contact details are sent to us so that we can provide details of GPs that they could register with to try to avoid them visiting A&E unnecessarily in future. Work to encourage students to register with GPs also plays a part in keeping A&E for real accidents and emergencies.



Urgent and Emergency Care





Community Services

We work closely with GP practices to help ensure that people get the care they need when they need it.



Hospital Services

We work with hospitals to ensure that we, and they, hear what their patients have to say about their services, including using Patient Opinion make it easier for people to share their experiences and for services to learn from these. This is more important than ever with major changes proposed to our hospital services. We also have a keen interest in those areas of hospital services which regularly cause people problems - such as discharges from hospital and repeated hospital admissions.

Our people



Decision making

In this report we have highlighted our priorities for the year ahead (page 26). Some of our priorities relate our core role as local Healthwatch. These **core priorities** ('Helping people through the maze', 'Hearing what patients really think', 'Seeing how services really work' and 'Helping keep people safe') are at the centre of our work every year.

We have **responsive priorities** which arise out of planned changes to services and pressures on the system that we hear about through our work with stakeholders.

We also have **issue based priorities** which arise from issues that the public raise with us, through our enquiry and engagement work.

Healthwatch Liverpool does not have a formal membership arrangement as those that were not members could feel that their view would be excluded. We consider the views of all local people to be equally important. Some people face greater barriers in speaking up and would be unlikely to think of joining Healthwatch if we were a membership organisation. They need more encouragement to share their experience and ways to do so which fit with their life and priorities.

The first stage of all of our pieces of project work is to test out the issue with partners, contacts and community groups to make sure that the issue is indeed an important one, that no-one else is undertaking work in this area that we could contribute to instead and that it is the right time for this piece of work. The projects can therefore evolve. Last year, our project on Student Health became bigger than we could have predicted as it proved to be a key issue with lots of interested partners but no organisation with an overall perspective. In contrast Physical Health of People with Mental Health Issues has become a priority for other health providers and we can most helpfully contribute by gathering and sharing the perspectives of service users.

Getting more involved in our work

Where people have the time and inclination, there are many options for becoming more involved with Healthwatch Liverpool work. We have a wide variety of tasks that volunteers can become involved in. These include research, data entry, events and publicity, photography, enter and view visits, engagement events as well as coming together for monthly update meetings. Volunteers choose those that fit with their interests, skills and availability. A key contribution that all volunteers can make is helping to spread awareness of Healthwatch in local communities as word of mouth is often the best form of recommendation.

Our volunteers span all ages and have a wide range of reasons for getting involved. We hope to make it a positive experience for them all.



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Our finances





As Healthwatch Liverpool became more established it has become clear that there are limitless areas of work for us to become involved in. We receive far more requests for work than we have been able to accommodate. It is a constant balancing act to do as much as we can reasonably manage without reducing the quality of our work or stretching the service to the point where lose our reliability. We therefore made a strategic decision that we needed to manage our finances very carefully to allow us to expand the staff team and do more of the work that we want to do.

We therefore reviewed our budget, established financial priorities and managed to reduce our running costs to a level where we can now afford to recruit additional staff. In 2016-17 our staff team will therefore go up to 15, (11 full time equivalent) and our costs will increase considerably in line with this.

INCOME	£
Funding received from local authority to deliver local Healthwatch statutory activities	404,356
Additional income	0
Total income	404,356
EXPENDITURE	
Office costs	34,225
Staffing costs	265,801
Other costs	32,199
Total expenditure	332,225
Balance brought forward	0

Contact us





Get in touch

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f Search 'Healthwatch Liverpool'

We will be making this annual report publicly available by 30 June 2016 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group, Overview and Scrutiny Committee, and our local authority.

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

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