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Healthwatch Rutland

Annual Report 2015/16

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Message from our Chair



My first pleasure in introducing the 2015/16 Annual Report is to welcome Sarah Iveson to Healthwatch as our new General Manager and also Tracey Allan-Jones as our Office Manager. They are most welcome.

2014-15 was a year of change. Financial problems beset the NHS and social care system and it is clear that there will be major change in the way health and social care are delivered in the future.

In 2015, Healthwatch England carried out a poll which found that most people are very savvy about the financial situation and do understand the constraints facing public services. People recognise the need for change but they don't want solutions handed down to them - they want to be there in the room contributing as services are being redesigned.

We support that view completely and never cease to be impressed by the innovative solutions that users of services can produce.

"We call on all providers and commissioners of services to include the public in planning change."

We believe their engagement and contribution is vital to successfully meeting their needs.

Better Care Together is the biggest ever review of health and social care in Leicester, Leicestershire and Rutland (LLR). The programme is a partnership of NHS organisations and local authorities across the area. People welcomed initial proposals from Better Care Together to bring services closer to people's homes Next year will bring proposals to deliver that objective and we will work to ensure that everyone has the opportunity to consider them.

In the meantime, we look forward to listening to as many people as possible about services both now and for the future.

Message from our General Manager



Sarah Iveson joined the Healthwatch Rutland team in March 2016. Her previous experience includes nearly 20 years in the Royal Air Force as an Air Traffic Control Officer, and 5 years in education as a primary school teacher. She is also currently studying for a Master's Degree in Psychology. She has a lot of volunteering experience with young people, including being an Independent Visitor with the National Youth Advocacy Service.

The people's voice needs to be heard by the decision makers in health and social care to inform their planning and provision of services. I strongly believe that in the current financial climate, it has never been more important that limited funds are spent wisely, and with patient/client care at their heart.

The commitment and dedication of our volunteers, who carry out the majority of our work, has impressed me immensly. Their passion for ensuring the best possible health and social care provision for the residents of Rutland is inspiring. My role is to ensure that their work is supported.

"The range of issues covered by Healthwatch Rutland is phenomenal."

The breadth and depth of the job of Healthwatch Rutland is an immense challenge, but I believe that we do make a positive difference to the lives of people in Rutland. We are in a position to gather the views of people and to make sure that these views are used to influence decision makers. This is important for the provision of services currently and also in the future.

We are in a position to influence positive change. Our workplan for the coming year is challenging, but I am confident that this is achievable.

The year at a glance

Our most important role is to be the 'eyes and ears' of Rutland people on Health and Social Care matters. We are active all over Rutland listening to the issues that people are talking about.

We listened to over 1500 Rutland residents

We attended over 30 local events and held 20 meetings, workshops and focus groups at Healthwatch to listen to peoples' concerns

We kept our 300 members up to date with our work and sent them regular bulletins

We signposted the public to consultation events to gather people's views on a wide range of important topics

We conducted 4 Enter & View visits, highlighting recommendations for improvements to services to providers

Working to influence positive change

40 Partner organisations have asked us to join them to bring the voice of Rutland people to their organisations

We attended over 500 meetings to work with them in finding solutions

We hosted 10 conferences to bring the public perspective

We produced 17 reports making recommendations for improvement

Who we are

We exist to make health and care services work for the people who use them.

Everything we say and do is informed by our connections to local people. Our sole focus is on understanding the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf.

We are uniquely placed as part of a national network, with a local Healthwatch in every local authority area in England.

Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their work.

What we do

We are the statutory body which acts as a consumer watchdog on all aspects of health and social care for Rutland residents. We hold regular roadshows, public Board meetings and other events to hear what you have to say.

Our Mission

To make health and social care better for ordinary people

We also carry out projects on specific topics that we know are of concern to local people. This includes 'Enter and View' visits of health and social care services used by the people of Rutland.

We take note of best practice, make recommendations for improvement and monitor progress.

Our Vision

To put the views and experiences of Rutland residents at the centre of local service provision

It is important that people contribute to our activities and tell us about their concerns. This will make Healthwatch Rutland a stronger advocate for change and improvement.

How we work

We gather first-hand experiences from the people of Rutland and develop them into recommendations for health and social care authorities. The information we share helps them make important decisions about your local services.

We use the information we gather to identify important local issues and trends. We then carry out our own research into these issues. In particular, we want to make sure we represent the voice of the seldom heard, the vulnerable, and those in isolated communities.

And, most importantly, we have powers in law which give us influence. We feed back what we discover to the authorities. They have a legal responsibility to hear our views and answer any concerns we raise. You can be reassured that your views really do count.

Listening to people who use health and care services



Gathering experiences and understanding people's needs

We have listened to and gathered the experience of a wide range of people, including:

- Young people (under 21)
- Older people (over 65)
- Children
- The Military
- Carers

They have told us of concerns about a number of issues. We explored in workshops, public meetings and focus groups. We produced reports on a plethora of issues to try to influence positive change with service providers. This included:

- Young People's Mental Health
- Dementia Care
- Ambulance Services
- Accident and Emergency Services
- Dentistry
- Falls
- Community Health Services
- Continuing Health Care
- Community Care Act
- Social Care Charges

What we've learnt from visiting health and social care services

Enter and View visits are a key tool to allow patient experience to be given to the decision makers. Unlike inspections carried out by bodies such as the Care Quality Commission (CQC), Enter and View visits focus entirely on patient experience. Each report highlights good practice from a patient's point of view and recommendations for change to improve the experience for people.

This year we undertook four Enter and View visits on local services. These were undertaken following concerns or questions raised by members of the public. Reports on Enter and View visits can be found on our website:

- Rutland Memorial Hospital In-Patient services
- Oakham Medical Practice
- Urgent Care Centre Rutland Memorial Hospital
- Younger Disabled Unit

Service providers responded to the recommendations we provided. They made a commitment to improvements where needed.

These people are trained and authorised to carry out Enter and View visits for Healthwatch Rutland:

J Darlington, S Jackson, D Murphy,

P Hurford, B Hellyer, C Stanesby,

J Fenelon, B Taylor-Harris, B Henson,

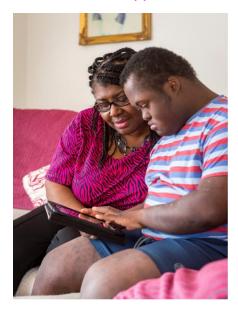
S Henson-Amphlett, C Spark, M Demaine,

S Iveson, B Godfrey, B White.



THE VITAL ROLE OF UNPAID CARERS

As we talk to Rutland people, we have been struck by the large band of largely unsung and unpaid carers who provide dedicated but silent support.



We felt that our annual report should shine a light not only on their excellent and unpaid work but also on the frustrations they face. We asked Karen from Oakham, to give us her reflections on her life as a carer.

Karen not only supports three very dependent people but finds time to help others in the community. This is her real life story as told to us and it is very powerful.

Case Study - A Carer's Tale

"It is 1am, I have time to respond to you now, to detach myself enough to perhaps put things down in writing. We carers don't work 9-5 Monday to Friday, I am happy to share my early morning ramblings as I may not actually have more than 5 precious moments to myself later in the day.

I have cared for my mentally ill husband for over 24 years.

He thrives on routine, on no stress, on things running smoothly. From the outside looking in, his life is steady, he has survived cancer and is in remission, but has the after effects of chemo such as fatigue, and many other issues.

I work hard to keep our life smooth, peaceful, routine, to battle the things that everyone faces daily, but to smooth the way so there isn't a gap, or a worry for him to face, because one small thing is all it takes for him to spiral.

My life feels like constantly spinning plates to stop them crashing to the ground, maybe a dozen at a time to live our life.



We care and support our disabled son. He has a brain injury. I do a lot of background work to make sure things run smoothly for us and our son. We visit him daily as part of our routine.

I sort all medical and DWP stuff for hubby and son, forms then more forms, appeals, doctors, hospitals, everything. Nothing is smooth or easy, one wrong box ticked, it is suspended, and I still have to keep the plates spinning smoothly...perhaps another 6 plates for my son. This is lessening, as he's now psychologically stronger, and my previous hard work has sorted benefits, so each year things get a little easier... but 12 plates plus 4/5

plates for him is still a lot to keep spinning constantly day, after day, after day, after day.

Since July 2014 I also have my disabled brother's life to manage. He lives in Leicestershire and has had three strokes over ten years. The last one left him more physically and mentally damaged than before.

I now have 12 more plates to spin to run his life - bills, finances, benefits, day to day everything. I also run his direct payments and organise his care package which is a nightmare logistically as he lives 15 miles away in a rural area.

I am running more plates than I can imagine. I am on my knees, every avenue has challenges, which I am expected to smooth to satisfy one or another person, I hardly have time to sleep.

The additional strain on me from my brother is affecting my ability to keep things smooth, keep my own plates spinning. Despite supporting three people, the government pay me one set of carer's allowance, would getting more change anything? Who knows...

Last year the Council in my brother's area assessed my needs as a carer and awarded me £200 which I took as a two-day break - two days because it's all I could be away for without everything collapsing, and my brother continued to call me despite me being away.

But I'm too exhausted to fight the system.

I employed a care agency which failed my brother. I took up the complaint with the company, involved CQC, and contacted the social worker. The care agency eventually terminated their contract just before they were inspected.

I'm left dejected and forced to return to a more expensive service which swallows all the budget. People who sit at desks pay lip-service to us but don't know what life is like as a carer.

The little care available is scant in rural areas and he needs more than 15 min thoughtless arse wiping or flannel flicking. Agencies can be born, registered, and dissolve before CQC can inspect. Clients are dumped if they complain.

The alternative is a care home but he is 63 not 93. He has a right to independence and care and protection of the state, in his own home...but he doesn't get it. He has been waiting for adaptations since discharge from hospital. He has slept on a sofa downstairs since September 2014. I complained to Director of Social Services about the cuts to his care package and chivvied occupational therapist assessment and its failure after failure.

So because of these failures I am still embroiled in his life but I *CAN'T* do it any longer or my world will crumble or I will be destroyed and then who will keep things smooth for my husband?

And now I need to sleep, it is 2.20 am..."

Carers' Week in June 2016 reported that 3 in 4 carers don't feel their caring role is understood or valued by the community

Giving people advice and information



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

Signposting Guide

Healthwatch Rutland have produced a comprehensive signposting guide to services in Rutland.

This signposting document has been made available at local pharmacists, GP surgeries and libraries across the area. It is also available on our website: www.healthwatchrutland.co.uk

We have based our source data on the NHS Choices, information from the East Leicestershire and Rutland Clinical Commissioning Group ELRCCG) and Rutland County Council.



We endeavour to keep this information as up to date as possible.

Online Support

In 2016/17 we will be upgrading our website to include a 'Find a Service' function to allow people to access this information online easily.

Staff in our office are available to help to signpost people who call in to the relevant service or support network, allowing those without access to a computer to have this support.



This year we have been able to signpost people to a range of services. These include NHS dentists in the area and contacts for voluntary support services. We have been able to direct people to PowHer, which is the charity that offers advocacy for people when complaining about the NHS. They can help people to navigate the formal complaints process.

How we have made a difference



Our reports and recommendations

We have used our reports, and our position on a number of committees, to recommend how people's health and care services might be improved. This year these issues have included:

- Young People's Mental Health
- Dementia Care
- Ambulance Services
- Accident and Emergency Services
- Dentistry
- Falls
- Community Health Services
- Social Care Charges

Working with other organisations

Healthwatch Rutland works collaboratively with a wide range of service providers to help to improve services.

The following are some of the agencies we work with to ensure that the patient voice is at the heart of what they do:

- We share evidence and information with the Care Quality Commission (CQC).
- This relationship has allowed our activity to complement and support local CQC monitoring, inspection and regulatory activity.
- Our local evidence and insight has been shared with Healthwatch England and used in national reports.
- We work with the local Clinical Commissioning Group (CCG) to

- discuss the provision of clinical services in our area.
- Our relationship with Rutland
 County Council allows us to
 influence change in the provision of
 services through input to the
 Health and Wellbeing Board and its
 subgroups such as the Children's
 Trust.
- We work with voluntary organisations who help us to gather the views of people they support.

Involving local people in our work

All service providers and commissioners now promise to ensure that the patient voice is central to their decision making.

"ELR CCG wants to truly involve local people in decisions about healthcare."

East Leicestershire and Rutland CCG Website, 19 June 2016

Healthwatch Rutland ensure that all service providers truly involve the public in their decision making processes.

This may be by running events ourselves, such as focus groups or workshops, or by carrying out our own surveys. We also work to ensure that service providers carry out their own surveys to accurately gather public opinion on proposed changes. This is becoming ever more important due to current pressures on the Health and Social Care system and the changes that are required to keep it sustainable.

Our work in focus



Our work in focus: Dementia

10 KEY MESSAGES FROM THE PEOPLE OF RUTLAND.

We have now published the results of listening to what the people of Rutland feel about services for those with dementia.

Locally we have many excellent services but there are also gaps. We wanted to hear the experiences of users and carers. We also drew on the valuable insight of about 300 professionals, voluntary organisations and planners.

Our report was prepared for both providers and commissioners.

East Leicestershire and Rutland CCG is leading the development of a revised dementia strategy for the Better Care Together programme.



The numbers of those with dementia in Rutland is expected to more than double between now and 2030 from around 650 at present (Source JSNA update 2015).

People told us they want a coherent whole care system. Ten powerful messages from our report capture their views.

- 1. DECIDING TO SEEK A DIAGNOSIS More could be done by organisations working together across the whole community to raise awareness of memory loss in Rutland and dispel the stigma and fear of "dementia".
- 2. GOING TO THE GP FOR HELP GPs would welcome help to support families to come forward to seek a diagnosis. The Rutland diagnosis rate is still below target.
- 3. GETTING A DIAGNOSIS There is lack of clarity about the many routes people can take to obtain a diagnosis. The system feels slow, cumbersome and confusing to those in it.
- 4. GETTING TREATMENT Those getting treatment also found the system confusing and fragmented.

- 5. INFORMATION Getting the right information tailored to each stage is very important but does not happen.
- 6. SUPPORT AT HOME AFTER STARTING TREATMENT (Clinical & Social) People feel that system of care coordinators is needed to help those less able to find their way around such a complex mix of statutory, voluntary and commercial services. Linking these services in a more cohesive way is now being addressed and is vital.
- 7. CARE HOMES & DOMICILIARY CARE Relatives struggle to find residential and domiciliary care of suitable quality. They feel this shortage will get worse as demand rises and if new services are not provided.
- 8. SHORT BREAKS Carers value respite care and short breaks but it can be stressful for all concerned. Carers would like more flexibility both in the packages on offer and financial arrangements.
- 9. HOSPITAL Hospital admission is best minimised for those with dementia but remains the largest source of referral for diagnosis. Considerable improvements have been initiated with government funding in surrounding hospitals and need to be evaluated. People in Rutland attend many different hospitals and the problems of delayed and inappropriate discharges continue to bedevil us.

10. END OF LIFE - We will be looking at end of life care for all people and have not yet undertaken this critical work.

The Future

We will continue to listen to the needs of Rutland people with regards to dementia care and to work with Commissioners and the Local Authority to influence improvements to services in this area.



For a copy of our report email info@healthwatchrutland.co.uk or call 01572 720381. It is also available on our website www.healthwatchrutland.co.uk

Our work in focus: Young People Drive Change in Mental Health Services in Rutland

CASE STUDY - YOUNG PEOPLE'S CHAMPIONS TAKE A KEY ROLE IN IMPROVING MENTAL HEALTH IN RUTLAND

Healthwatch Rutland is here to enable the voices of people to be heard and that includes our young people. We helped them to describe their concerns about mental health. Not only did they put their case effectively but a new breed of champions has emerged. They have gone on to develop real leadership skills by pioneering new approaches. They have mobilised their peers and now work with health, social care and education leaders on implementing solutions. We are extremely proud of what they are doing and we highlight here the work of one of our champions, Tim Amor.



Tim speaks out then helps lead the drive for improvement

Tim is one of our leading champions. He doesn't say much about his treatment as an inpatient for depression in CAMHS (Children and Adolescent Mental Health Service) apart from the fact that he wishes no one will ever have to go through his experience.

As our young people gathered around to help drive the case for improvement Tim was able to bring his first-hand experience and his passion for an improved service. Tim said:

"Through my dissatisfaction with CAMHS, I knew change needed to happen. Too many times I was let down by a service that couldn't deliver. Often, I felt like I was shoved in a corner and had no say in the treatments I received. So, rather than sit around and be passive, I became active in encouraging change wherever possible so that mental health services can provide the best possible care not only for current generations, but for future ones too."

Tim's modesty does not allow him to expand on his role in helping to change the lives of young people in Rutland.



He became a leading spokesman for the young people in Rutland, working alongside Healthwatch Rutland and the Local Authority. He challenged the stakeholders in public meetings, held a major role within his College to bring about awareness and remove the stigma around mental health, then moved on to a regional role in the redesign of CAMHS (Children and Adolescent Mental Health Service). He was a leading voice in the film commissioned by Healthwatch England and made by Healthwatch Rutland which has been praised by the Duchess of Cambridge in her role as champion for the support for children and young people.



Tim, through speaking out, his dedication and perseverance, is really making a difference. He leaves no one in doubt "you *must* make change happen".

Healthwatch Rutland is now recognised as a national leader in bringing the voice of young people into decision making. Their messages have been clearly heard by all professionals and organisations responsible for providing services.



Some of the many young mental health champions together with Rutland health social care and education leaders

Future Plans

The Government programme "Future in Mind" has allocated extra funding to meet the dire need for support to mental health services all over the country. Work is underway to redesign and implement a plan for Leicester, Leicestershire and Rutland. We play an active part in bringing the views of young people into redesigning the whole service.

Our plans for next year

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Future priorities

In 2016/17 our priorities are to ensure the people of Rutland are heard on the major changes to Health and Social Care planned through the Better Care Together Programme. In addition, we are planning projects on Ambulance Services, Adult Mental Health (including Dementia), Transfer of Care (from Hospital to Social Care) and Youth Mental Health.

Better Care Together (BCT)

We await Better Care Together proposals. Our challenge will be to ensure that as many Rutland people as possible are aware of the consultation and have an opportunity to help shape services for future years

Ambulance Services

Response times in Rutland remain a serious concern as they are the worst in the region. Healthwatch Rutland have worked hard to raise these concerns with the East Midlands Ambulance Service (EMAS) and Commissioners.

The trust was working hard to improve response times for emergency calls but these were consistently below the national target. (Source CQC Inspection report of EMAS May 2016.)

We are organising an event in July 2016 for EMAS to listen to the people of

Rutland. We will continue to monitor response times and to try to influence positive change to this vital service.

Adult Mental Health

Mental health problems are a growing public health concern, with 1 in 4 people experiencing a mental health problem in any given year. The care of people with mental health problems has received a lot of media coverage in recent times. Much of the focus has been on the need to prevent problems in the first place and to remove the stigma and discrimination that people with mental health problems can experience.

Timely access to effective, good quality, evidence-based mental health treatment and therapies in response to need, always in the least restrictive setting, was a primary concern. (Source: The Five Year Forward View Mental Health Taskforce: public engagement findings)

This current focus on mental health care has been described as a once-in-ageneration opportunity to transform services and support for people with mental health problems. We want to find out about the experience of Rutland residents who access these services. The project will enable us to find out what is available for local residents and what they think about those services. This will allow us to influence positive change with the providers where needed.

Transfer of Care

We have heard from Rutland residents concerns around the transfer of people from hospital to home with social care support or to social care homes. These concerns include delayed transfer of care. This is where people are spending too much time in hospital because the support they need to be discharged is not in place. Also we have heard about people being released from hospital too soon without suitable support so that a future hospital admission is more likely. There is also concern that people are being discharged without the support they need at home.

Poorly managed transfers of care harm people. (Source: Right Place, Right Time Better Transfers of Care: A Call to Action, NHS Providers.)

There is a lot of work being done by the Local Authority and the NHS to address some of these issues, and we feel it is vital that they make any decisions based on patient experience and feedback. Therefore, this project aims to gather the experience of people who have used these services and report to the decision makers in the Local Authority and NHS to try and influence positive change.

Youth Mental Health

Healthwatch Rutland has been running a highly successful Youth Mental Health project for 18 months (see Our Work in Focus). Following on from this we will continue to influence providers to put in place preventative measures that have been identified as vital for our young

people. These measures may include resilience training for school staff. We will monitor the provision of these services and ensure that commissioners continue to give these issues the priority it requires.

Listen and Watch Groups

Volunteers ensure that issues are monitored. Any issues that are highlighted to us are raised with the relevant authority:

- Primary Care (GPs)
- Community and Social Care Services
- Dental Health Services
- Pharmacy Services
- Services for Older People
- Services for People with Learning Disabilities
- Services for People with Physical Disabilities
- Maternity and Neonates
- Planned and Elective Care
- Urgent Care
- Services for Carers
- The Military
- End of Life

If there are any other health or social care issues that you think we should be listening to and watching, please let us know.

Our people



Our Volunteers

Healthwatch Rutland relies on the help and support of volunteers across all activities. There are always opportunities for people to give as little or as much time as they can spare. Our volunteers come from all walks of life. They bring with them a wealth of personal experience and skills.

"I got involved with HW Rutland because I wanted to make a positive difference within my local community. It gives me great satisfaction to know that we are giving the people of Rutland a voice and helping to ensure that they feel listened to, involved and empowered to help influence better health and social care services."

Nicola D, Healthwatch Rutland

There's good evidence that volunteering brings benefits to both the person volunteering and the people and organisations they support.



Our volunteers help at events, showcasing the work we do and listening to the public's views on Health and Social Care services.



"The provision of good health care is now almost the number one issue in the minds of the people. Volunteering with HWR means having a chance to influence and maybe change for the better how that is done here in Rutland"

Bart H, Healthwatch Rutland

Our volunteers also take the lead on projects, ensuring that the views, concerns and experiences of people are captured so that they can be reported to service providers. They undertake Enter and View visits to report on the patient experience and give recommendations for the improvement of these services.

If you are interested in volunteering with us, please get in contact.

Our finances



INCOME	£
Funding received from local authority to deliver local Healthwatch statutory activities	65,000
Additional income	
Total income	65,000
EXPENDITURE	
Operational costs	26,438.31
Staffing costs	28,024.42
Office costs	8,649.63
Total expenditure	63,112.36
Balance brought forward	1,887.64

Get in touch

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The Healthwatch Rutland contract is held by Rutland County Council, Catmose, Oakham, Rutland, LE15 6HP

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

If you require this report in an alternative format, please contact us at the address above.

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