



Grateful today,  
**powerful  
tomorrow**

**ANNUAL  
REPORT  
2013- 2014**



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**healthwatch**

**Barking and Dagenham**

# Our Achievements

## Broad Street Walk in Centre

200 people consulted on the closure of Broad Street Walk In Centre.

Majority of patients said they would rather go to their GP than a Walk In Centre but are unable to get an appointment.

The response from Healthwatch Barking and Dagenham and others to the CCG consultation on the proposed changes to urgent care services resulted in change.

The CCG offered to make a minimum of 25,000 extra urgent appointments available later in the year, as part of a new way to provide urgent care by family doctors.

## 5 Enter and View visits conducted this year!

Sunrise A and B Frail and Elderly Enter and View Visit:

As a result of the recommendations patients have emergency call buzzers positioned where they can be reached, be consulted on who helps them with their personal hygiene needs and have changes to their health and treatment explained to them more clearly by medical staff.

Patients with personal budgets that provide staff to assist them at home will now be able to have those staff more closely involved in their hospital care.

## Dental Report

Our dental report found that there is still much work to be done in getting the 40% of all of the borough's young people, who do not attend the dentist, to understand the importance of regular dental care.

From the findings 3, recommendations were made. One of the recommendations was *“To encourage regular brushing of teeth at an early age, all B&D Children aged between 3 and 5 years are given a free toothbrush, with a written reminder to parents to take their children to the dentist every 6 months whether they need it or not.”*

The report and findings were presented to the Public Health Programmes Board. The Public Health Programmes Board agreed that the recommendations would be included as part of the Public Health Strategy.

# Our Achievements

## Workshops on the Community Treatment Teams and the Better Care Fund.

Over 70 people attend event commissioned the CCG .

Workshops took place at the event which gave local people a chance to understand what the Better Care Fund is and what the Community Treatment Teams mean for the local community. NELFT and the CCG have taken into account the issues raised during the workshops and now have taken steps to improve some of the aspects that were discussed.

One of aspects was marketing and communication of the new services. Information leaflets have been developed for patients explaining the new services and how they work. These are available at community rehabilitation units, hospitals and are handed to patients.

## 084 GP telephone numbers

Healthwatch Barking and Dagenham was alerted by a number of concerns raised by local people about the cost of using 084 pre-fixed telephone numbers when needing to contact their GP practices.

The concerns raised by local people about this issue have been addressed by Healthwatch Barking and Dagenham through working with the Clinical Commissioning Group to bring about change in the way this service is delivered by some local GP practices.

Providers of GP telephone systems have moved GPs to geographic-rate 01, 02 or 03 numbers.

Barking & Dagenham Clinical Commissioning Group (B & D CCG) acknowledged patients' concerns in response to Healthwatch raising this issue with them.

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Any enquiries regarding this publication should be sent to us at  
[Info@healthwatchbarkinganddagenham.co.uk](mailto:Info@healthwatchbarkinganddagenham.co.uk)

You can download this publication from [www.healthwatchbarkinganddagenham.co.uk](http://www.healthwatchbarkinganddagenham.co.uk)

## Contents

<b>Setting the scene</b>	
Foreword	2
<b>About us</b>	
Healthwatch Network	5
Healthwatch Barking and Dagenham	6
Healthwatch powers	7
Our structure	8
<b>Our projects</b>	
Children's dental health	13
Diabetes project	14
Consultation on closure of Broad Street and the Surge Scheme	16
GP Practices Use of 084 Telephone Numbers	18
NELFT Quality Accounts	19
Barking Havering Redbridge Trust Quality Accounts	20
Care Closer to Home	22
CCG priorities and The Better Care Fund	23
Duty of Candour	24
Stroke Discharge	25
Personal Budget Project	26
Reports and Recommendations	26
Freedom of Information Requests	27
<b>Enter and View</b>	
What is Enter and View	29
Authorised Representatives	30
Visits undertaken	31
Volunteering	35
<b>Out and About, Communication and Engagement</b>	
Communication	37
Out and about in Barking and Dagenham	38
Networks and Partnerships	42
<b>Income and Expenditure</b>	44
<b>Looking forward</b>	45

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## Foreword



**Frances Carroll**  
**Chair**  
**Healthwatch**  
**Barking and Dagenham**

Welcome to the first annual report of Healthwatch Barking and Dagenham .

We are pleased to be able to highlight both the successes and challenges Healthwatch has experienced in its first year here in Barking and Dagenham.

A vital part of Healthwatch's role is representing the views of people who use health and social care services to commissioners and service providers.

Healthwatch has, throughout the year, set up opportunities to listen to views from local people and organisations by hosting public consultation events, undertaking surveys regarding specific needs and service provision, as well as carrying out enter and view visits in both hospital and residential care.

This has provided Healthwatch with

local intelligence highlighting trends and evidence gained from local people and organisations. The information has enabled us to focus our work plans on the issues of concern, which are referred to in this report.

This intelligence also enables Healthwatch to present feedback to commissioners of local services and influence future planning, giving local people a voice in their futures, particularly at a time of rapid change within the NHS and social care.

During the year Healthwatch staff and volunteers have represented local people's voices on various statutory committees as well as the Health and Wellbeing Board and have facilitated events supporting the Barking and Dagenham Clinical Commissioning Group (CCG) and North East London Foundation Trust (NELFT).



This has given Healthwatch the opportunity to become established as representing local people's voice and influencing statutory decision making.

Positive outcomes from Healthwatch's representation have included carers being able to go into hospital to provide care, 0844 phone numbers no longer being used by GP surgeries and recommendations from Healthwatch's Dental Report regarding children's dental health being accepted.

Healthwatch has also experienced its challenges throughout the year which are referred to in the report, not withstanding difficulties with accessing information and there remains barriers to overcome in the coming year.

Barking and Dagenham Healthwatch's engagement throughout the year with local service users, as well as local

organisations, has helped us to focus our work plans for the coming year.

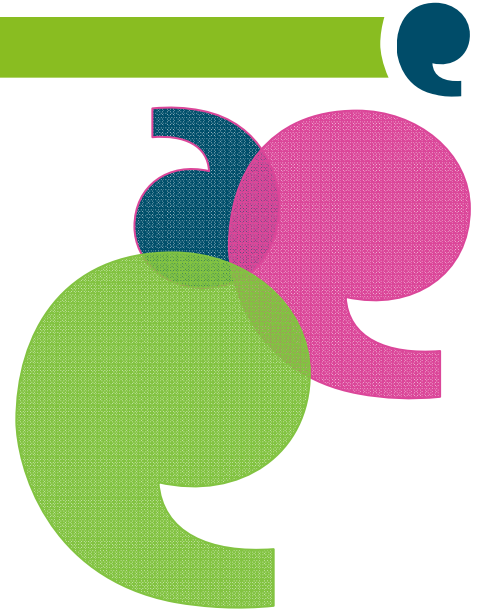
We look forward to continuing with these work plans in the year ahead and working with the local community, commissioners and service providers to ensure responsive and effective health and social care for our community in Barking and Dagenham.





# About Us





## Healthwatch Network

**Healthwatch Barking and Dagenham is a local organisation within a national Healthwatch England framework. We champion the views of local people on health and social care services.**

Healthwatch England is nationally focused. There are 152 community focused local Healthwatch organisations. Barking and Dagenham is one of these.

Together we form the Healthwatch network, working closely to ensure consumers' views are represented nationally and locally.

### Healthwatch England

Healthwatch England gives a national voice to the key issues that affect

children, young people and adults who use health and social care services.

Healthwatch England gathers intelligence of trends and consumer experiences at a national level, based on evidence gained from people who use the services nationally and locally, information shared by local Healthwatch and evidence gathered from other partners.

All of this evidence is used to highlight major issues and seek change in the policy, regulation and delivery of health and social care services.

Where very important issues arise, they are raised with the Secretary of State for Health, the Care Quality Commission, the NHS Commissioning Board, Monitor or local authorities in England. By law they have to respond to what Healthwatch England has to say.

## Healthwatch Barking and Dagenham

Healthwatch Barking and Dagenham is all about local voices being able to influence the delivery, quality and standard of local health and social care services. We believe that every voice counts when it comes to Shaping services for today and improving them for the future.

We:

Are inclusive and reflect the diversity of the community it serves.

Alert Healthwatch England to concerns about specific care providers, who can recommend further action from the Care Quality Commission (CQC).

Listen to people who have concerns or who want to complain about NHS services or other health and social care provision.

Provide authoritative, evidence based feedback to organisations responsible for commissioning or delivering local health and social care services.

Have a seat on the Barking and Dagenham Health and Wellbeing Board, ensuring that the views and

experiences of patients, carers and other people, who access services, are taken into account when local needs assessments and strategies are prepared.

(Health and Wellbeing Boards bring together the NHS, Public Health, Clinical Commissioning Group (CCGs) Adult and Children's Services, councillors and local Healthwatch, to improve and plan how to best meet the health and wellbeing needs of the local community and reduce inequalities.

Provide people with information about their choices and what to do when things go wrong.

Enable people to share their views and concerns about local health and social care services such as GPs, dentists, hospitals, day care services and care homes.

Provide Barking and Dagenham Clinical Commissioning Group with information and recommendations about services.

**WE believe that  
people using the  
services are best  
placed to tell us and  
share**



## Healthwatch Powers

Under the Health and Social Care Act 2012  
Healthwatch Barking and Dagenham have the powers and functions below :

By law service providers and commissioners must respond to requests of information in 20 working days.

By law service providers and commissioners must respond to any recommendations we make within 20 working days.

Service providers must allow entry to Authorised Healthwatch Representatives to conduct announced or unannounced 'enter and view' visits to assess services.

A seat on the Health and Wellbeing Board, to promote health improvements and tackle health inequalities.

## Overview

Harmony House CIC, won the tender for Healthwatch Barking and Dagenham. The policies and procedures of Harmony House have been adopted by Healthwatch Barking and Dagenham. This includes the confidentiality policy, equal opportunities and volunteering policy.

## Our Structure

### Hub and spoke model

One of the requirements within the tender process was to have a Hub and Spoke Model.

Healthwatch is the HUB and the associates and local community are the spokes, telling us their views on health and social care services.

### Associates

To ensure that the voices of the local community are heard we have Healthwatch Associates.

Associates are well established interest groups that have formed around their member's common bond as service users of either health or social care services. We keep our associates up to date with local and national news who then disseminate this information to their service users.

Some of our Associates hold databases on other organisations and service users. This enables Healthwatch to reach a good diversity of the community.

### Participants

We do not have a membership for individuals, however we do have a participants list. This is a database of the local people who have attended a Healthwatch event, spoke to us at one of our stands or contacted us in one way or another. We send them regular emails with updates and information on forthcoming events if they choose to stay involved.



# Our Associates

Wellgate  
Community  
Farm

Look ahead

Streetz  
Dance Media  
Network

Carers of  
Barking &  
Dagenham

The Work  
Stress Buster

The Step  
Group

Age UK  
Redbridge

The Diaspora  
Community

Support  
British  
Soldiers

Joy of  
Wellness

Parkside  
Stroke Club

Step Up

Barking &  
Dagenham  
Diabetes  
Support Group

Dignified  
Independent  
Living

Volunteer  
Bureau  
Barking and  
Dagenham

Independent  
living  
agency

CVS

Marks Gate  
Community  
Centre

Translating &  
Interpreting  
Services

Studio 3 Arts

Sickle Cell/  
Thalassaemia  
Support

## Executive Board, staff and volunteers

**Our structure looks to ensure that local residents and stakeholders can influence how decisions are made and what priorities are taken forward.**

The Board takes the strategic lead in developing priorities of Healthwatch Barking and Dagenham ensuring the views of the community are listened to.

The Executive Board is set up with 8 seats. Membership is broken down into two main areas to ensure broad representation. This includes the Chair, Executive Directors and Associates.

### Executive Directors

There are 4 seats for Executive Directors. These seats are open only to individuals and not organisations or groups.

Each Director represents one of the areas below:

- Health
- Social Care
- Children and Young People
- Older people

### Associates

There are 3 seats for Associates. These seats are for organisations or groups representing a particular health/social care issue.

### Staff

The Chief Executive of Harmony House is the Contract Manager for Healthwatch.

We have two staff members who are Healthwatch Officers.



## The Board



Frances Carroll  
Chair



Barbara Sawyer  
Executive Director  
Adults and Older Peoples Representative



Grace Kuku  
Associate



Lorraine Goldberg  
Associate

**Becoming a Board member .  
We are currently recruiting for  
Executive Board Members .  
Contact us for more information.**

## Meet the Staff



Marie Kearns  
Contract Manager



Manisha Modhvia  
Healthwatch Officer



Richard Vann  
Healthwatch Officer





# Our Projects



## Children & young peoples Dental Health

**Our recommendations were taken into account and are now part of the Public Health Strategy!**

We found that statistics reflected there was a constant 60% of children and young people who access dental services in Barking and Dagenham.

We undertook a survey of 157 local young people to discover their views on going to the dentist and better understand why 40% do not attend at all. We looked at the general dental health of children and young people in the borough and what their views are of the dental services available. Young people who went to the dentist found the service to be easy to access and the practitioners friendly and reassuring.

We found however, that there is still much work to be done in getting the 40% of all of the borough's young people, who do not attend the dentist, to understand the importance of regular dental care.

From the findings 3, recommendations were made.

One of the recommendations was

*“To encourage regular brushing of teeth at an early age, all B&D Children aged between 3 and 5 years are given a free toothbrush, with a written reminder to parents to take their children to the dentist every 6 months whether they need it or not.”*

The report and findings were presented to the Public Health Programmes Board.

The Public Health Programmes Board agreed that the recommendations would be included as part of the Public Health Strategy.





## Diabetes Project

At the request of the Health and Adult Social Services Select Committee, Healthwatch undertook two projects.

The first project was to look at how young people with diabetes could be supported in the borough.

The second project was to look at how young adults with type 2 diabetes could be supported in the borough.

## Children and young people

Healthwatch Barking and Dagenham has undertaken a survey of children up to the ages of 16 to find out what their experience has been like whilst accessing diabetes services and what their support needs are.

Healthwatch worked with the Diabetes Paediatric Service at BHRUT and sent out the questionnaire to the 90 registered service users. All 90 live in Barking and Dagenham.

Overall the findings showed that the experience of services was generally good.

However there are some areas which could be improved to meet the needs of young people and children.

Young people felt that information about diabetes needed to be tailored around their age group.

The findings showed that 38% of the respondents never had their weight checked. Services for children need to ensure that all checks are carried out. If patients are not checked, complications will be difficult to prevent.



## Young adults

Healthwatch Barking and Dagenham undertook this project to provide information about the support needs of younger adults and their experiences of diabetic services.

Overall, the responses showed that the experience of services was pretty good.

However there were areas of improvement around the support needs of diabetic patients.

Taking into account the feedback from respondents, Healthwatch made the following points to be considered:

Promotion of available courses needs to reach all diabetic patients and they need to be given the opportunity to attend.

Individuals would like an online forum where they can share their issues, exchange information, provide advice, receive advice and meet others who also suffer from type 2 diabetes.

Commissioners need to relook at the council's exercise programme and reconsider the times to enable individuals to fit the programme around their working life.

**The findings have been incorporated within the Health and Adult Social Services Select Committee summary which will be presented to the**

**Health and Wellbeing Board. Decisions will be made on the necessary actions that need to be taken. At the time of writing this report, no decisions had been taken.**

## Challenges

This project was specific to a target audience, for this reason we tried a number of times to get GP practices on board so that Healthwatch could send the surveys to their diabetic patients, however the GPs did not respond.

Healthwatch had asked GP practices via the CCG, to send surveys out to diabetic patients. Stamps and envelopes were being provided, and a member of staff would have been available to assist if GP practices did not have the staff to undertake the mail out.

However only 2 GPs responded and worked with Healthwatch to send the surveys out to their diabetic patients.

Healthwatch had asked the CCG to send out reminders to other GP practices and still we had no response from the GP practices.

We hope that GP practices will consider and look into why this happened and work with Healthwatch Barking and Dagenham in the future, to ensure that patients can have their say on health and social care services.

## Consultation on the Closure of Broad Street Walk In Centre

Healthwatch undertook a survey with 200 members of the public to seek public opinion on the proposed closure of Broad Street Walk In Centre.

The majority of the 200 people consulted said they would rather see their own doctor for urgent care if they could get an appointment in a timely way. As most believed this was not going to happen, they wanted Broad Street to remain open.

There was also a clear message that the public is confused about the variety of terminology used to describe urgent care settings and when it is appropriate to attend which setting. This report was sent directly to the CCG and copies given to the Health and Well Being Board and the Health and Adult Services Select Committee (HASSC).

*The response from Healthwatch Barking and Dagenham and others to the CCG consultation on the proposed changes to urgent care services resulted in change.*

*The CCG offered to make a minimum of 25,000 extra urgent appointments available later in the year, as part of a new way to provide urgent care by family doctors.*

## GP Urgent Care - SURGE Scheme

From October 2013 To March 2014, the clinical commissioning group commissioned GP practices in the borough to undertake a pilot scheme to provide **25,000** urgent care appointments **in addition** to the services they already provide.

Healthwatch Barking and Dagenham first wrote to participating GP services on the 9<sup>th</sup> December 2013, asking for responses to specific questions relating to the scheme referred to as 'surge'. Healthwatch received 2 responses to this request.

The Healthwatch Board decided that this was not an adequate response and so a formal request under the Freedom of Information Act (FOIA) was sent to all GP practices in the borough on the 17<sup>th</sup> March 2014 - whether participating in the scheme or not. GP practices were set the date for information to be returned by 21<sup>st</sup> April 2014.

Healthwatch asked for the following information:

- How many additional urgent care appointments is your surgery providing on average each day?
- Is your practice providing urgent care appointments in the evenings and at weekends?
- Who at your surgery decides what an urgent appointment is?
- What other services do you refer patients to as part of your urgent care pathway?
- Has your practice set waiting times for urgent care appointments and if so, how long are patients expected to wait to get an appointment?
- Can patients drop in at any time to your surgery and be seen as an urgent care patient?
- Is there an established Patient Participation Group at your surgery - if so, who is the lead person at your practice for this?

In response, Healthwatch received 17 written replies from the 41 Freedom of Information requests that were sent out. The level of response is not satisfactory.

From the responses received so far and based on the information provided by practices, Healthwatch Barking and Dagenham estimates that the pilot scheme has yielded **16,548** appointments. It is not clear whether these appointments are in addition to the usual appointments the practices provide.

The pilot scheme has been extended until the 30<sup>th</sup> June 2014.

Healthwatch Barking and Dagenham will continue to work with the Clinical Commissioning Group and the General Practices to obtain the information that represents and informs the public interest through the changes to urgent care services being provided at GP surgeries.



## GP Practices in Barking & Dagenham Use of 084 Patient Contact Telephone Numbers

Healthwatch Barking and Dagenham was alerted by a number of concerns raised by local people about the cost of using 084 pre-fixed telephone numbers when needing to contact their GP practices.

The concerns raised by local people about this issue have been addressed by Healthwatch Barking and Dagenham through working with the Clinical Commissioning Group to bring about change in the way this service is delivered by some local GP practices.

In Barking and Dagenham, local Healthwatch found that 9 of the 40 GP practices in the borough (22.5%) were using 084 numbers for patients to contact them.

[NHS England advised that they would contact the GP practices still using](#)

[084 numbers](#) (8% Nationally) - via their Local Area Teams - to remind them that they would be in breach of contract if they 'do not take all reasonable steps' to stop using premium rate telephone numbers.

Providers of GP telephone systems have agreed to move GPs to geographic-rate 01, 02 or 03 numbers.

**Barking & Dagenham Clinical Commissioning Group (B & D CCG) acknowledged patients' concerns in response to Healthwatch raising this issue with them.**





## North East London Foundation Trust Quality Accounts

Healthwatch Barking and Dagenham sent a response on 15<sup>th</sup> May 2013.

As Healthwatch was a new organisation, we were not in a position to respond to the request for a retrospective view ; however we raised the following:

“Looking forward, we are particularly interested to know what the Trust’s strategy is concerning the engagement of the public and local community in Barking & Dagenham.

The single paragraph in the report about engagement doesn’t give us much to go on; it would be very useful to have a ‘bigger picture’ on the Trust’s commitment to this and how this will be achieved. Working with patients and other stakeholders; what are the Trust’s proposals to ensure that processes are fully inclusive to everyone in the community?”

Healthwatch Barking and Dagenham are represented on the mental health sub- group of the Health and Wellbeing Board. Going forward, Healthwatch will be looking for opportunities where individuals who have experience of using local mental health services can represent and influence future mental health strategies and policies that could affect services for local people.

Healthwatch Barking and Dagenham were not provided with any response to the points raised about the trusts forward plan.



## Barking Havering Redbridge Trust Quality Accounts

Healthwatch Barking and Dagenham were asked to feed into and provide a response to the trust quality account 2012/13. As a new organisation, Healthwatch could not provide a retrospective view on the services provided, however on the trust proposals for their forward plan, the following observations and comments were put forward:

### Emergency and Urgent Care

“Does the 4 hour target for A&E include both sites across the Trust as they are presently, or is this only applied to Queens Hospital?”

“What steps will the Trust take to publicise the increase in use of the Urgent Care Centre? How will this information reach the community from Barking and Dagenham?”

“Does this include collaborating with the local Clinical Commissioning Group on proposals they may have for local urgent care pathways?”

“The proposal to reduce the length of stay in hospital beds; does this include commissioned bed services in local areas too e.g. Grays Court in Barking & Dagenham? If so, is there likely to be an estimate of how this will affect local social care services in Barking & Dagenham?”

“Does the discharge policy include weekends and if so, would more patient transport services be available at these times? How will this change in services be communicated in a way that patients will understand?”

### Quality, Effectiveness and Safety Trigger Tool

“This is a positive move towards measuring and monitoring the quality of services; will this include measuring standards as well and how will this be communicated to patients so that they can understand?”



### Friends and Family Test

“How is the Trust intending to communicate the outcomes from this to patients so that they will know how the test is working for them?”

### Emergency Surgical Access

“The move towards 7 day working rotas for Doctors and Consultants; will the staff providing the extra time for services be employed by the Trust or will the Trust have to consider using bank or agency staff to cover this?”

### Infection Prevention and Control

“The Trust target of MRSA zero tolerance against the backdrop of 95% control for elective and emergency

patients; what measures and steps would the Trust intend to take to deal with the 5% that are not screened and could present a risk?”

“ANTT - what does this mean to patients and how will the Trust communicate what this means? Is it a measure that would be included in their care plan?”

“We look forward to your comments concerning the issues raised and that you give them due consideration when finalising your report.”

Healthwatch Barking and Dagenham were not provided with any response to the points raised about the trusts forward plan.

## Care Closer to Home

We were commissioned by Barking and Dagenham Clinical Commissioning Group to run two workshops, which were on :

1. The two new pilot services. The Community Treatment Team and The Intensive Rehabilitation Service.
2. CCG commissioning priorities for the next two years and the Better Care Fund.

The first workshop gave local people and organisations a chance to understand the new services that are being piloted, share their views and any concerns.

The event was well attended by over 70 local residents and organisations.

A presentation was delivered by Caroline White (Director of Adult services for NELFT). This was followed by a question and answer session allowing participants to ask specific questions.

Healthwatch then facilitated workshops to discuss specific questions.

From the discussions many valuable comments were received.

Some of the themes that emerged are listed below:

- The importance of team working and the good communication between stakeholders including the voluntary sector.
- Quick response times for service users.
- a greater emphasis on effective and clear communication and involvement with informal and formal carers.

NELFT have responded to some of the queries that were asked at the event, they have produced a “you said and we did sheet”, which highlights the steps they have taken, Some of these included:

- Developed information leaflets for patients explaining the new services and how they work. These are available at community rehabilitation units, hospitals and are handed to patients.
- Patients are triaged through the community treatment team, which makes sure patients go to the service that best meets their needs.
- Working with social care staff to trial different approaches to make sure social care needs, as well as physical and mental health needs, are met.



## CCG priorities and The Better Care Fund

The second workshop gave the CCG an opportunity to:

- Update participants on progress the CCG have made in their first year
- Set out the key commissioning priorities for the next 2 years
- Get feedback on their plans and areas where the CCG need to improve services.
- Explain about the Better Care Fund and the views of this.

A presentation was delivered by Doctor John, on the priorities that have been set by the CCG.

Glynis Joffe from London Borough Barking and Dagenham also delivered a presentation on what the Better Care Fund is and the update so far.

A question and answer session took place after each presentation allowing the participants to ask questions to Sharon Morrow, Doctor John and Glynis.

Healthwatch also facilitated workshops and from these we found that the majority of participants did not have issues with the priorities that

have been set. There were concerns about the implementation of these.

A number of themes occurred from the discussions these included:

Difficulty in booking GP appointments having an impact on diagnosis certain health and issues and referrals to services.

The need of services to work together including community and voluntary groups to ensure that patients are signposted to support services to enable them to take more responsibility of their health.

More information as to how funds are going to be spent and what services will be cut or reduced.

The findings from this event supported the CCG to better understand the concerns of the local community. Furthermore it was an opportunity to explain what the Better Care Fund is and how it will be funded.



## Duty of Candour

The Francis report into Mid-Staffordshire Foundation Trust and investigation into abuse at Winterbourne View raised many concerns from service users and their families, relating to systemic failures in some health and social care services.

As part of a wider enquiry for work being undertaken by Healthwatch Barking and Dagenham, a survey was undertaken at two care homes and a health care department to find out and begin to understand how easy and open it is for staff to raise concerns and “whistle blow” when the behaviour of colleagues is observed to be inappropriate and where the basic principles of care are not being performed to an acceptable standard.

The following summary refers to feedback that Healthwatch has received so far:

5 (14%) of the respondents said there were no policies for staff to complain about bad practice or unacceptable behaviour by a colleague at work.

Of those that said they knew about their employer’s “whistle blowing” policy; 20 (57%) said they found out about it either through face to face or computer based training.

6 (17%) people said they had used their work’s policy - of these, 4

(11.5%) said investigations had been carried out and followed up; 1 (3%)

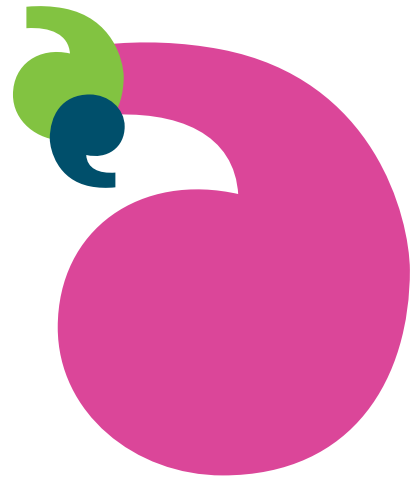
said it was confidential and 1 (3%) wasn’t told what the outcome was.

2 (6%) people said they wished they had used the policy but didn’t due to concerns and fears of being penalised or sacked at work.

When asked about ways to raise difficult matters with their managers, 18 (51%) said that their managers had an “open door” policy - other responses included using a suggestion box; staff questionnaire and feedback via email.

Of the responses Healthwatch received, 10 (28.5%) said that their manager had spoken with them about the questionnaire, before they completed it.

Healthwatch will continue to work with various Health and Social Care providers during 2014/15 to find out more about the extent of “whistle blowing” policies across services and providers that serve the borough.







## Stroke Discharge

Healthwatch wanted to find out the views and experiences of people from Barking and Dagenham who had used the stroke service discharging process.

With input from the Stroke Association, Healthwatch developed a questionnaire to gather peoples' experiences of the service.

Healthwatch visited the stroke service at Grays Court in Dagenham and Parkside Stroke Club in Barking. We met with 30 patients and some of their carers.

Healthwatch received 6 responses to the survey.

Barriers to achieving more responses from other stroke patients have occurred due to accessing patient contact information from North East London Foundation Trust (NELFT) and

Barking, Havering and Redbridge University Trust (BHRUT) under the terms of the Data Protection Act. Some key points that have emerged so far:

Working with health service partners to reach greater numbers of stroke patients from the borough to participate in the survey, is an ongoing challenge.

Barking and Dagenham has no funded presence in the borough that gives ongoing support and information to stroke patients and their carers, once discharged from services.

Patient experience of the discharge processes vary from a comprehensive care plan to none at all.

Healthwatch Barking and Dagenham will continue to develop the work undertaken with this project over the next year.



## Personal Budget Projects

One of the last pieces of work that Healthwatch undertook this year was on personal budgets.

A survey has been produced and distributed out to find out the experiences of individuals who have a personal budget. The project is still ongoing and will continue next year, however So far the feedback we have received shows:

50% of respondents felt that having a personal budget has improved their relationship with friends and family, that they are able to go out more, they can choose where they want to go.

60% of respondents felt that their personal budget gives them choice and more power about how they want to receive their care and from who.

Respondents feel that their needs to more information about what services they can access using their personal budget.

## Reports and Recommendations

Reports and recommendations made during this year to commissioners are listed below:

Dental Report: This report went to the Public Health Programmes Board and The Health and Wellbeing Board as part of the Public Health Strategy.

Report on 0844 GP telephone lines: This report was sent to the CCG.

Diabetes report: This project was requested by HASSAC. The report has been sent to the HASSAC and is due to go the Health and Wellbeing Board and the CCG for consideration as part of the summary produced by the HASSAC.

Sunrise A and B Ward Enter and View report: This report was presented at the Integrated Care Sub Group and the HASSAC.



## Freedom of Information Requests

	Reason	Response	Outcome
<b>Date: 22nd August 2013</b>			
Healthwatch requested information regarding young people and the access to dental services.	Healthwatch were undergoing a Dental project and needed to know how many children and young people were accessing dental services within Barking and Dagenham.	A response was received within the timeframe.	The information was used to compare data to see if there has been a change in the number of children accessing dental services.
<b>Date: 17th March 2014</b>			
Healthwatch requested information regarding GP urgent care appointments from 41 GPs in the borough.	Service users informed the Healthwatch that they were unable to access their GP for urgent appointments.  Healthwatch wanted to find out what appointments systems are in place at the practices within the borough.	Not all GPs had responded at the time of writing this report.	This project will continue next year, there are no outcomes to report on as of yet.



# Enter and Views



## What is Enter and View

Healthwatch can enter certain health and social care premises to view the care being provided. This includes premises such as hospitals, care homes and doctors surgeries etc.

Healthwatch compiles a report from what service users have said at the visits and make recommendations or suggestions for improvements and also highlight what is working well.

The Enter and View programme is an important part of the Healthwatch activity and the law enables Healthwatch to undertake these visits.

Visits can be unannounced or announced.

Healthwatch recruited and trained 7 Authorised Enter and View Representatives this year. However one left due other commitments.

At the time of writing this report another four volunteers were recruited and booked to have their training.

Healthwatch Barking and Dagenham trained all the individuals according to guidelines provided by Healthwatch England.

The training programme ensured that representatives were given a full understanding of the process and their duties in carrying out this role.

Five visits were undertaken over the course of the year. The visits undertaken were

- 1)Queens Hospital
- 2)(follow up visit) to Queens Hospital
- 3)Cloud House
- 4)Look Ahead
- 5)Darcy House

Reports on the visits were sent to the service providers for comments .Once a response had been received from the service provider the reports were then made public documents.

The reports were then sent to the commissioners of the services, Care Quality Commission and other relevant stakeholders. Copies of the reports are also available on our website.

## Meet our Authorised Enter and View Representatives



**Barbara Sawyer**



**Frances Carroll**



**Val Shaw**

**Our staff have  
also undertaken  
the Enter and  
View Training**

**Want to be an  
Authorised  
Enter and View  
Representative  
Please call us on  
020 8526 8200**



Director of Nursing Flo Panel -Coates commented,  
“I feel that the report is a fair reflection of activity and patient care on the wards and would like to thank you and your team for their time and helpful comments”

### Visit to Sunrise Wards A & B

Visit to Sunshine Wards A&B at the Queen’s Hospital Romford. On the wards, which care for frail and elderly patients, our volunteers asked patients and their visitors for their experiences of hospital life.

Healthwatch choose three topics to ask patients from Barking and Dagenham about.

- Meal times: was their food tasty, were they given time and help to eat it.
- How were they helped to wash and bathe: was there sufficient help and was it offered in a dignified manner.
- How did the staff interact with them: were they friendly, professional and did they have time for them.

There were nine recommendations made and BHRUT fully accepted all the recommendations for improving the stay of patients in their care.

*As a result of the recommendations patients will have emergency call buzzers positioned where they can be reached, be consulted on who*

*helps them with their personal hygiene needs and have changes to their health and treatment explained to them more clearly by medical staff.*

*Patients with personal budgets that provide staff to assist them at home will now be able to have those staff more closely involved in their hospital care.*

These are among the nine recommendations fully accepted by the hospital.

An action plan was developed by the trust in response to the recommendations made.

A follow up visit was undertaken to gather the views and experiences about the services being provided to them after the implementation of changes made by the Trust in response to recommendations made from Healthwatch Barking and Dagenham.

A follow up visit has been conducted. However at the time of producing this report an official response has not been received and therefore Healthwatch is unable to comment on this.

The three social care Enter and Views were done in a series.

Representatives from Healthwatch Barking and Dagenham wanted to speak with residents from the borough that were using the services at Darcy House, Cloud House and Look Ahead to gather and record their views on 6 areas of enquiry. These were:

- ◆ Nutrition
- ◆ Personal Hygiene
- ◆ Social Activities and Hobbies
- ◆ Family Contact
- ◆ Clothing
- ◆ Staff interaction

A summary of the findings can be found on the following pages.

## Darcy House

Darcy House extra care housing is provided through the council and in partnership with Hanover Housing Association.

The extra care scheme is staffed 24 hours in shifts: 7.30am to 1 pm, 4 staff are on duty including the Manager. From 1pm to 7.30am there are two members of staff who are on duty. There is a buzzer system available in all the flats and bungalows.

There is a site manager who is on duty from 9 -5, employed by Hanover Housing.

49 residents are currently resident at Darcy House. 31 of these receive care.

Overall from the visit and from what residents told us, it has come across that Darcy House is a comfortable home where individuals are receiving a good standard of care.

The residents seem to be generally happy with the services that are being

provided and are very much aware that this is a independent living setting and they are happy to be independent but with the staff there if they need to call upon them.

Healthwatches Enter and view report highlighted that although patients were happy with the staff and the service they receive, there were concerns relating to the temperature of food when served and residents feeling that they are having to wait for longer then they should for carers when buzzed. There were also some concerns raised about the repairs of showers when they were out of order.

TLC care services did respond and are working with the resident to explain not only how the buzzer system works but have recently **TLC had recently in March taken the action to minimise the concern over the buzzer issue by providing additional care staff in the morning because this is usually when the demand is really high ( 7.30 - 13.30 now making it 5 care staffs in the morning).**





## Cloud House

Cloud House is a small care home that has been open for 2 years; it is owned by Delrose House Limited. It is situated on a residential estate and is near to some local shops and a GP practice.

The home provides residential support and care for male individuals with Mental Health conditions and/or Learning Disabilities. The Lead Representative was advised that residents currently living in the home are settled and stable in the home; any new referrals are carefully assessed prior to being accepted.

The home is advertised as providing services for 10 residents, each with access to their own rooms with en-suite WC facilities.

Mary Chander, the care home manager, oversees the running of another care home in Ilford. Mary advised that she works up to 5pm at Cloud House, although she is on call out of hours when needed.

The home is staffed 24 hours in shifts: 7.30am to 5 pm, 3 staff are on duty including the Manager; 5pm to 9pm, 2 staff on duty; 9pm to 7.30am there is 1 'awakening' member of staff on duty.

Healthwatch representatives felt this was a positive visit and that the

standard and quality of care observed was meeting the needs of residents, based on the feedback received.

There were four areas raised by Healthwatch representatives, of these two of the recommendations were:

- The care home staff should ask each resident if they have had enough to eat at mealtimes and to ensure that they each have an equal say in the choice of the food on the menu for the following week.
- The home has a no smoking policy; residents are allowed to smoke in the garden. Consideration should be given for the provision of a shelter outside, for residents that smoke.





## Look Ahead

Look Ahead (Ford Road) is supported living accommodation for individuals who have Learning Disabilities.

This service is commissioned by London Borough of Barking and Dagenham (LBBD).

Look Ahead (Ford Road) accommodates seven residents in single occupancy bedrooms and has a communal kitchen and dining room. The units are not ensuite but have basins in rooms with shared bathroom.

Residents have personal budgets that they use to pay for toiletries, activities, food, clothing etc

Overall from the visit and from what residents told us, it has come across that Look Ahead supported living is a comfortable place where individuals are receiving a good standard of support that they need to live independent lives.

The residents seemed to be happy with the services that are being provided; however for Healthwatch Representatives felt that more could be done to encourage group outings if the residents wanted this.



# Volunteer for Healthwatch!

Healthwatch is keen to recruit volunteers who have an interest in health and social care. The work of our volunteers will be essential in developing the work of Healthwatch Barking and Dagenham.

There are a number of different ways in which you can get involved:

**Enter and View Representative:** These volunteers will be authorised representatives. Their role will be to observe how local health and social care services are being provided. Representatives will need to interact with service users and providers. They will need to identify examples of both good practice and where improvements need to be made. The information will be collated in a report and sent to the service provider for a response.

**Outreach Volunteers:** Helping to man information stalls at community events and various health and social care settings. This area consists of a variety of roles including promoting Healthwatch, having stands at events, consulting with people, having a display at health and social care settings. Advising individuals of certain health and social care services, including advocacy services

**All volunteers will be given the necessary training, support and expenses!**

**If you are interested please contact**

**Healthwatch Barking and Dagenham**

**on 0208 526 8200 or**

**email us [Info@healthwatchbarkinganddagenham.co.uk](mailto:Info@healthwatchbarkinganddagenham.co.uk)**



# Out and About Communication & Engagement



## Communication

**We want to ensure that we are communicating widely with the local community to ensure their voices are captured and heard, keep them up to date with what is happening nationally and locally with health and social care services and inform them of opportunities to influence services.**

**There are are number of ways we do this:**

### **Website**

A website has been developed to promote the work that we do.

National and local health and social care news and events are uploaded on the website giving people the option of keeping up to date and get involved.

There is also a section on local services that individuals can access.

### **Social Networking Sites**

We have a Facebook and Twitter account to promote the activities of Healthwatch Barking and Dagenham and a Streetlife account. The networking sites enable us to inform a number of individuals from all walks of life.

### **Leaflets**

We have produced a leaflet which has been distributed out to all the GPs, Care homes, Pharmacies, the leaflets are also available in easy read.

### **Media**

We have promoted news through Barking and Dagenham Post, sharing the outcomes of the work that has been undertaken, we advertise events and keep local people involved in health and social care issues.

### **Associates**

We distributes information via our associates to their service users, this gives us the opportunity to connect with some individuals who we not be able to speak with.

## Out and About In Barking and Dagenham

Healthwatch Barking and Dagenham carry out outreach stands across the borough to ensure that we capture the local communities views on the services they access.

By finding out and understanding the needs of services users, we are able to work with services and commissioners to towards designing services which met the needs of local people.

This year we have had 20 stands in various places across the borough including libraries, supermarkets, health centres, Children's Centres and Youth Club provision.

The outreach stands also gives volunteers and staff the chance to approach a wide range of individuals to let them know who we are what and we do. The stands also gives service users the chance to share their experience directly with us.

We have also attended various events across the Borough.

We also had a public launch: an all day event at Vicarage field. Over 300 people were spoken to and given information about Healthwatch.

On this occasion the majority of people were concerned about the closure of Broad Street Walk in Centre.

A local pharmacist provided health checks for 100 people that included BMI assessments and blood pressure checks. Examples of other locally available activities, which boost health and wellbeing, were available such as a Yoga and Belly dancing demonstrations and head and hand massages.

Another two public events took place one in Barking one in Dagenham. The event in Dagenham took place in Kingsley Hall and was focused particularly for older people. There were local organisations who attended such as DABD Uk and Carers of Barking and Dagenham. Demonstrations and head and hand massages and nail painting were also available.

All three were a success and we engaged with over 600 people in total.

Healthwatch has taken 105 calls and emails from the public requesting advice and signposting. The calls consisted of individuals wanting to know how to make a complaint about, where to go for benefit advice, issues at the GP practice and other signposting requests.





## Comments from local people

“GP is good, quite like them but long wait for blood test.”

“Waited 4 weeks and 4 days for an appointment - there were none any earlier. I’m worried that no service will be provided over a weekend.”

“BHRUT - General lack of nurses, they are overworked. Not good for patients' health.”

“Mother needs social care but cannot get it. Has heart problems.”

“I pay for care out of my personal budget money. I have a live in carer but feel my life is being dictated by the Social Worker and the carers they want to provide my care. I feel bullied and harassed that my wishes are not respected.”

“My experience of the service is fine but waiting to see a paediatrician takes too long - 4 month waiting list.”



## Out and About In Barking and Dagenham - what the public told us

Throughout the year Healthwatch Barking and Dagenham has engaged with the public through a number of public events and site visits to various locations around the borough including at the premises of some of the providers from outside the borough, that serve local people.

From meeting people, 189 were keen to tell us about their experiences of using local Health and social care services... These are the issues that mattered most to people

101 people (53.4%) wanted to tell us about their GP service. Of these, 47 (46.5%) told us their experience of using their GP services was a positive one. 54 (53.5%) had negative experiences with their GP service.

Some examples of feedback we received about GP services:

- “My GP is very good with my children, but for myself he doesn’t really seem that interested in my health needs”

- “Need more GP appointments to be available at weekends and bank holidays; I don’t just get unwell during week days”

There were 69 people (36.4%) who told us about the hospital services they had experienced. Of those people, 47 (68.1%) said that their experience of using the service had been a negative one and 22 (31.9%) told us their experience of the service was positive.

Some examples of feedback we received about local hospital services:

- “King Georges and Queens have a general lack of nurses and too many patients to deal with. It worries me that patients, including members of my family, could be put in danger”
- “When I go to Queens Hospital Anti-Coagulant Clinic I’m always greeted by my first name and seen within 20 minutes”
- “I had a good experience at King Georges Hospital; quick appointment; quickly investigated -couldn’t fault them ”

15 people (8%) told us about their experiences of social care services in Barking and Dagenham.

Of those individuals; 10 (66.6%) had negative experience and 5 (33.4%) had positive experience of services.

Examples of feedback we received about social care services:

- “The carers that come to assist me are there for ten minutes when it should be for half an hour. They do what they think I need and when I tell them this, they argue with me”
- “I have had social care support for many years and have always been satisfied with the service”
- “I feel my life is being dictated by the social care staff who tell tales about me that are not true. I feel harassed and bullied”

4 people (2.2%) wanted to tell us about other services they had experience of using. Some feedback of other services:

- “People don’t tend to use the gym which is free for the over 60’s - they should make the most of the activities; it will help keep them healthy”

- “The community dental service is very good, but where I have to contribute to the cost because I work, I find it difficult to pay the contribution as I only get low wages”

Over the next year, Healthwatch Barking and Dagenham want to encourage more people to come forward and tell us about their experience of using local health and social care services.



## Networks and Partnerships

Healthwatch is committed to working in partnership to ensure local peoples experiences both positive and negative are heard and taken into account. We have outlined below the partnerships and networks that we have been involved in.

### Health and Wellbeing Board

London Borough of Barking and Dagenham Health and Wellbeing Board includes Barking and Dagenham Council, Barking and Dagenham Clinical Commissioning Group (B&D CCG), Healthwatch Barking and Dagenham, Barking, Havering and Redbridge University Hospitals NHS Trust (BHRUT), North East London Foundation Trust (NELFT) and The Metropolitan Police.

The Health and Wellbeing Board have the following sub groups

Children and Maternity Sub Group  
Public Health Programmes Board  
Learning Disabilities Partnership  
Board.

Integrated Care Sub Group

Each sub group has a representative from Healthwatch who attends and contributes to discussions ensuring the voice of the local community is heard.

Healthwatch share evidence based reports to the sub groups, decisions

about who could take the recommendations forward are discussed and these are then presented to the Health and Wellbeing Board.

Healthwatch have a seat on the Board to represent the local voice, comment and challenge decisions that are being made.

We reported on a 6 monthly review to the Board and our annual report will also be presented.

### North East London Healthwatches

Barking & Dagenham, Havering, Redbridge, Waltham Forest and Newham Healthwatch have begun to meet to ensure that common themes and issues where necessary can be taken forward. Two meetings were held this year with the vision that these will become more regularly in the coming year.

### London Healthwatch Network

The London Healthwatch Network gives a perspective on issues that Healthwatches are facing across London. It is an opportunity to share information and tackle issues as a London Healthwatch Network where needed.

### B&D Health & Adult Services Select Committee (HASSC)

We worked on the diabetes project, which was requested by HASSAC. Healthwatch have attended scrutiny meetings and given input at these meetings.



### **Joint Overview Scrutiny Committee (JOSC) - North East London**

Healthwatch have attended JOSC meetings and given input at these

### **CQC**

We ensure that CQC are up to date with our findings from Enter and View visits and findings that we come across in regards to the services they monitored.

### **Safeguarding Adults Board**

We have a seat on the Safeguarding Adults Board and have been asked to work in partnership with the Board next year to engage with the local community to find out if they know how to raise a safeguarding concern, if they feel there is enough information about the matter and what would stop them from raising an alert. This piece of work will be taken forward early next year.

### **CCG**

We have met with the CCG chair a number of times and also have a non voting seat on the Clinical Commissioning Group Patient Engagement Forum which we regularly attend.

We were also commissioned by the CCG to deliver a workshop on the Community Treatment Teams, Better Care Fund and CCG priorities.

### **North East London Foundation Trust (NELFT)**

NELFT are the providers for

Community Health Services and Mental Health Services in the borough. We are involved in the mental health sub group to ensure that the patient voice is taken into account. We have also worked with Community Health Services in delivering workshops on the new Community Treatment Teams.

### **Barking Havering Redbridge Hospital Trust (BHRUT)**

Both King George Hospital and Queens Hospital come under BHRUT. We undertook a visit to the frail and elderly ward at Queens Hospital. We made nine recommendations.

The trust accepted all the recommendations. A follow up visit was undertaken where Enter and View Representatives found that our recommendations were implemented.

### **London Borough of Barking and Dagenham (LBBD)**

We have attended the Care Providers forum, informing care providers of the role we play. We are also working with LBBD alongside the CCG to keep the public updated about the Better Care Fund.

We have undertaken 3 enter and view visits. After one of the visits we raised a safeguarding alert to the LBBD safeguarding team.

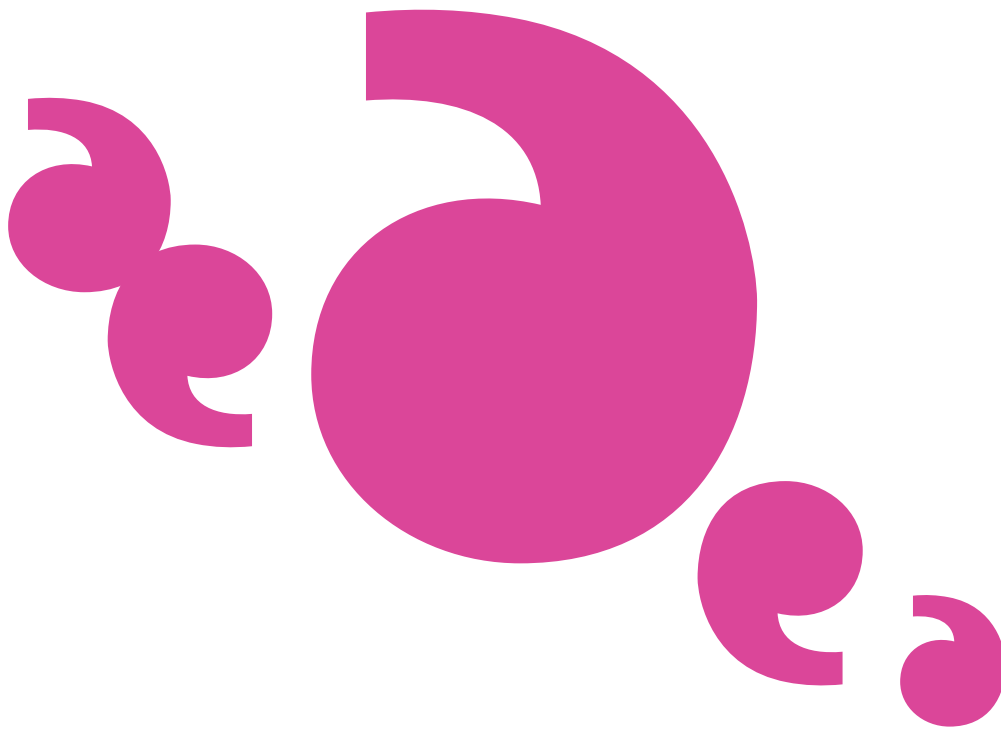
In total we have attended over 300 meetings, this includes forums and presentations that have been undertaken.



## Income and Expenditure

These figures are a breakdown / overview for this report and audited accounts will be contained in the Harmony Houses annual accounts.

Description	Annual Cost
Staffing salary with job titles: Health Watch Manager. Outreach Worker. 2x Admin Support	75,442
Training and supervision	12,000
Recruitment (staff, volunteers, experts etc)	1,800
Other (Please Specify) (travel)	2,100
Accommodation (lease/rental etc)	9,000
Equipment & stationery	5,650
Consumable/Administration	5,150
Other Overheads (specify) general administration	2,725
Materials	2,000
Social media	2,610
Events	3,400
Consultation	3,125
<b>TOTAL COST</b>	<b>125,002</b>



## Looking Forward

A work programme for next year will be developed once a consultation event is held with the public.

This will ensure that the areas of work that will be taken forward will be from feedback received from the local community.

Some areas of work that may be taken forward have been highlighted below, these have been determined by the findings from the various consultation and engagement events held this year.

Please note this is a list of the possible projects and a final decision will be made after asking the community what they would like us to take forward and they will also have the opportunity to raise other areas they may feel we could look at.

- Children's Orthotics
- Children's Accident and

### Emergency Services

- Relocation of Cardiovascular and Cancer Services
- Duty of Candour (continuation):
- Children's Mental Health
- Adults Mental Health
- Maxillofacial Service
- Stroke project (continuation)
- Accident and Emergency Children
- Personal budgets (continuation)

## Contact Details

**Address:** Healthwatch Barking and Dagenham  
Harmony House CIC  
Baden Powell Close  
Dagenham, Essex.  
RM9 6XN

**Phone:** 020 8526 8200

**Email:** [Info@healthwatchbarkinganddagenham.co.uk](mailto:Info@healthwatchbarkinganddagenham.co.uk)

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





