

Together for Good

Celebration Event

26th June 2018



Together for Good

Healthwatch Sheffield hosted a celebration event 'Together for Good' on Tuesday 26th June 2018 to show our partners the highlights of our work over the past year and to launch our Annual Report 2017-18.

The event provided the opportunity to recap on the impactful work of our staff and volunteers, and to thank the different organisations we have been working with.

After looking at our work from the past year, we went on to explain our strategy for 2028-20. Our strategy is based on feedback from local people, and the areas they would like us to focus our work. We based our table activities for the second half of the event on those topics and asked attendees to develop solutions to the issues raised.



Celebration Event Agenda

Judy Robinson, Chair of the Healthwatch Sheffield Strategic Advisory Group, welcomed our colleagues and opened the event.

Neil Tester, Deputy Director of Healthwatch England, then spoke about the relationship between the national body and Healthwatch locally.

This led to a presentation of our highlights from this year, including:

- An introduction to our Annual Report 2017-18 by Margaret Kilner, Chief Officer
- Our impact - The Perfect Patient Pathway projects, and our 'Not Equal' report on Deaf people's experiences accessing services

After describing our past work, we demonstrated our aims for 2018-20, set out in our new Strategy.

We then invited attendees to move around the tables for our 'Mapping Voice and Influence' activity. We asked people to move to the table with the topic they were most interested in and discuss the issues and solutions.

The event was brought to a close with lunch by The Real Junk Food Project Sheffield, information stalls and networking.

“What shines through...is the representation of different communities in Sheffield. Such an effective focus is really heart-warming.”

Neil Tester, speaking at our Celebration Event.



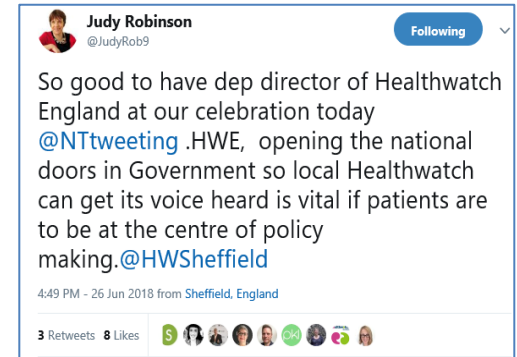
“We want people to know that if you come to us, you'll be welcomed and you'll be encouraged.”

Margaret Kilner, Chief Officer at Healthwatch Sheffield.

Who was in the room?

- ADIRA
- Age UK Sheffield
- British Sign Language Interpreters
- Burton Street Foundation
- Care Opinion
- Citizens Advice Sheffield
- City of Sanctuary
- Clinical Commissioning Group
- Disability Sheffield
- Drink Wise, Age Well
- Healthwatch England
- Healthwatch Sheffield Commissioner
- Healthwatch Sheffield Staff and Volunteers, and Young Healthwatch Volunteers
- Manor and Castle Development Trust
- NHS England South Yorkshire and Bassetlaw Contract Manager
- Perfect Patient Pathway Test Bed Volunteers
- Scrutiny Committee
- Sheffield Advocacy Hub
- Sheffield Alzheimer's Society
- Sheffield Children's Hospital
- Sheffield Chinese Community Centre
- Sheffield City Council
- Sheffield Flourish
- Sheffield Hallam University
- Sheffield Mencap and Gateway
- Sheffield Mind
- Sheffield Teaching Hospitals
- SOAR Community
- Voluntary Action Sheffield
- Zest

In total there were
23 Tweets about the
event.



We had **5** stalls at our
event:

- Healthwatch Sheffield
- Young Healthwatch
- City of Sanctuary
- Drink Wise Age Well
- Sheffield Test Bed Programme



44 people attended
our launch event.





Josie Soutar
@JosieSoutar

Following

Always a big fan of event freebies, check out the little box of plasters! @HWSheffield you have surpassed yourself @DWAU_Sheffield also have t-shirt envy.



11:16 AM - 26 Jun 2018

1 Retweet 5 Likes



Tweet your reply

Annual Report 2017-18

Our ambition is to work in partnership with local people, to ensure that the views and experiences of our communities are heard by the people making decisions about health and social care.

This year's Annual Report sets out our achievements for the year and gives examples of our work with different communities in Sheffield. We have also commissioned a video showing our highlights from the past year.

Our highlights video is available [here](#).

Our Annual Report 2017-18 is available [here](#).



Mark Smith
@marksmith_sheff

Following

Very proud of our @HWSheffield #volunteers and the #impact they've had on gathering people's views on health and social care and making a difference! #goodeggs #iloves



10:46 AM - 26 Jun 2018

1 Retweet 2 Likes



1. Access to Primary Care and Dentists

Issues

- People find dental charges confusing, specifically when transitioning from child services to adult services.
- There is confusion about primary care charges for asylum seekers. There isn't enough information about where to go in an emergency and what the charges are.
- NHS dental appointments are not always available due to high demand, and private practice appointments can be expensive. This can deter people from seeking any treatment at all.
- Some people cannot access services due to language barriers. Services have also had some issues with translation services not working, not being effective, or interpreters not turning up or being booked.
- Staff capacity is limited, particularly in dentistry, with workforce and training. Dental students are sometimes used to help with staff capacity as well as to further their training.

Mapping Voice and Influence Table Exercises

After showcasing our work from the past year and explaining our areas of focus in our Strategy 2018-20, we asked people to move around the tables for our Mapping Voice and Influence Exercise. We encouraged them to go to the table with the priority area they could most influence or are most interested in and discuss the existing issues and any solutions they could think of. The following ideas were generated by this exercise.

Solutions

- Providing information and advice in different formats, e.g: different languages, brail, audio etc would improve accessibility. This can be applied to all primary care services including pharmacies etc.
- Taking a 'person-centred' approach to commissioning services will enable people's feedback to be used as a performance indicator.
- Service users can help to build up evidence of the lack of information available across services, to ensure that commissioners can commit to funding for better information and advice provision.
- Better communication between services would improve access, especially for whole life pathways and transitions.

Main feedback point:

Taking a 'person-centred' approach to improvements/ changes to services and involving people's feedback as well as looking at data will improve people's experiences.



Our Strategy 2018-20 on a page is [available here.](#)

Our Strategy 2018-20 in full is available [here.](#)

2. Understanding what services are available and how to access them

Issues

- The system is complicated and some people find it difficult understand.
- Sheffield Directory provides contact details for services but doesn't describe what each service does or how it links to other services.
- People don't always have the same social workers each time, which can make it harder to know the person's needs.
- Asylum seekers and refugees don't understand the system and are not clear on access charges in particular.
- There has been some inequality of care for people from different groups/areas. Some people use A+E instead of Primary Care services as there are better translation services there.
- Services don't always have access to translation services and there have been issues with interpreters not being booked in advance. Jargon is also used in public-facing documents that could be made more accessible.
- Additional difficulties accessing information include some older people being more likely to be digitally excluded.

Solutions

- Services can co-produce communication materials with voluntary sector groups who work closely with those who are struggling access services.
- Receptionists in GP surgeries could be trained to signpost patients to other relevant services.



Main feedback point:

People don't know what services are available or how to access them. By co-producing leaflets with communities, the information could become more accessible.



Neil Tester
@NTweeting

Following

Margaret unveiling the 3 aims of @HWSheffield's new Together For Good strategy.



11:27 AM - 26 Jun 2018

2 Retweets 3 Likes



3. Quality of Day Centre provision and quality of Care Homes

Issues

- Service users are sometimes uncertain of trying new services or changing their provider in case their entitlements will be affected.
- There is a perception from service users that decision making is cost-based rather than being concerned with quality or individuals.

Solutions

- Constructive relationships need to be built, including creating a channel for staff and volunteers to communicate, as well as making space for service users. People need to feel safe to talk freely about their needs.
- Services could enhance their quality measures to make information and expectations clearer.
- Services could collaborate with existing third sector organisations to gain insight into the challenges their service users face.



Main feedback point:

Not all service users and their families understand how care is quality assessed and there is a need for a forum for service users to meet and feed into the services.



4. Experiences of people with Dementia and their families/carers

Issues

- Primary carer assessments are carried out at the start of the support for a patient, but as their needs evolve and change, the carer assessment should be reviewed.
- The services can be difficult to navigate and healthcare staff do not always have enough information.
- Continuing Healthcare assessments can be confusing for service users and it is not always clear what support they can access.

Solutions

- Decision makers can connect with those with lived experiences and use their feedback to improve services.
- Improve signposting and information about the different services and support available.
- Commissioners and local organisations could work together to identify possible partners and resources to improve services.
- Using a clearer process would enable people to contribute to changes in services.

Main feedback point:

Commissioners need to work with people with Dementia and their carers to better understand their needs and the communication needs of carers.



5. The equity and experience of Continuing Healthcare (CHC) assessments

Issues

- People are confused about who pays for the support before and after the assessments and how the process works.
- Having two separate assessments (one for healthcare and one for social care) also confuses people. It could potentially lead to people missing out on support.
- It is not clear what happens to people who don't qualify for CHC funding.

Solutions

- Having access to clear information in accessible language would improve the experience. Perhaps a visual representation of the process to make it simple to follow.
- Increased support and advice for people throughout the process would help them make informed decisions about their/a relatives care.
- To look into the equity and experiences of these assessments, commissioners could; facilitate workshops, record case studies, follow people all the way through the system, access people's views and experience using existing relationships etc.

Main feedback point:

Any information for the public needs to be clear and accessible, especially what happens to people who don't qualify for funding.



Next steps

The mapping exercise outlined the issues for our priority areas under our Strategy 2018-20 and will feed directly into our work. By encouraging attendees to think about solutions in this exercise, as well as the issues, people were able to see how existing services could help or improve in different areas.

The first area Healthwatch Sheffield will focus on is the equity and experience of Continuing Healthcare (CHC) assessments.

This September our Voluntary, Community & Faith Sector Health & Wellbeing Forum will focus on people's experiences of the Continuing Healthcare (CHC) assessment and how, with Sheffield CCG and our local authority, we can improve the process for service users and their families/carers.

For this forum we're partnering with Sheffield CCG and Disability Sheffield to provide an opportunity for constructive discussion for colleagues in the sector who support people who are affected by CHC assessments.

The aims of the Forum are to understand:

- An overview of the current CHC provision in Sheffield and the intentions of the CCG
 - What support for service users and carers is available
- How VCF & statutory organisations work together to better support service users and carers

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