

Quarterly Report: July–September 2022

Headlines

Heard from **734** people about their views and experiences



Ran creative sessions to hear the views of adults with learning disabilities



Spoke to older people in care homes about their care



Set up a steering group to shape our Long Covid Project



Started attending the Integrated Care Board to represent South Yorkshire Healthwatch



Worked with 5 organisations on #SpeakUp activities to hear from the people they support



1. Introduction

This quarter we made good progress against our priorities. We talked to **older people living in residential and nursing homes** (and their relatives) to hear about their experiences of care and support; this has already been shared with the Council to shape the way that services are commissioned in the future, and will be published on our website next quarter.

Our **Long Covid** work is becoming well established – the steering group is now in place and meeting regularly, and we have started to do some semi-structured interviews with people living with Long Covid. We meet regularly with representatives from the Long Covid Hub and the insights that we have heard so far are already being shared to help shape thinking and influence service design.

Our **Chance to Choose** Project has reached a wide range of groups of adults and young people with learning disabilities, using creative activities – from drama, to vegetable carving and puppet making – to help them share their views on what matters to them. Commissioners for learning disability services have also joined us for some of these events, supporting our aim to create more opportunities decision makers to come together and hear directly from people who are using services.

Our **#SpeakUp Grant** recipients have also been carrying out their activities, and we have been working closely with each of them to develop their ideas and offer practical support with delivery. Most of the projects are now almost complete, and we are looking forward to sharing the outcome of those projects as the reports are written and shared next quarter.

Finally we're pleased to have been joined by a new volunteer, who has been supporting our Information and Advice Officer to create some resources that will help people to know where to access different pharmacy services in central Sheffield. This is building on the work that we described last quarter, working with different groups to identify what information they need to support them with their health.

2. Enquiries, Information and Advice

Members of the public can tell us about their experiences of health and social care services in the Sheffield region so that we can then share their views and opinions with decision makers. We also offer specific information and advice about their care. Giving information about health and social care services is one of our statutory duties.

Enquiries we receive may include finding out about people's rights to treatment, what services may be available to them, or how to raise a concern about a negative experience they have had. We help people to find the right information as well as signposting them to further support if needed. Sometimes we can help people with their question immediately, whilst other situations may be more complex and may involve supporting the individual for a longer period of time.

Between July and September 2022, we received **124 individual enquiries** relating to people's experiences of health and social care services. This was a slight increase in comparison to the previous quarter.

Prominent themes have continued around people's experiences of being unable to access NHS dentistry and lengthy waiting lists across the city. A large proportion of people we spoke with were experiencing pain but had encountered challenges when trying to access the treatment they needed. We also heard about the persistent struggles of trying to get through to GPs via phone to access both routine and urgent care appointments. Some patients have also reported they are only being offered telephone consultations rather than face-to-face.

Feedback was also shared related to accessible information; some patients told us that formats tailored to their individual needs were not being provided by some healthcare services. This mainly related to patient letters, healthcare information and medication instructions.

This quarter we have also continued to work closely with different organisations to help develop beneficial information for their service users. After hearing feedback from [ISRAAC](#) we are currently creating a pharmacy information leaflet, focussed on central Sheffield and including the NHS services on offer. We also supported a work experience student from a local school to create an information leaflet for [DePaul](#), which contained details of local support services on offer ranging from urgent care services to disability support.

Case Study

Getting information in the right way

*Gillian has multiple health conditions and learning disabilities. She got in touch to tell us that when she requests her patient letters and health information in formats she can understand, this isn't provided. Gillian told us she had never received any information in easy read formats and described her letters as "very difficult to understand, contained too much text and needed breaking down".

When she asked for a specific letter to be resent in a large print format she received a new letter, which had her details, date and time of the appointment amended. However the rest of the content remained in the same size font.

One letter did not provide the Sheffield area code in the phone number, so when she tried to call it from her mobile, the number would not connect.

She has also asked the hospital pharmacy on multiple occasions for medication instructions in larger print, or easy read formats, but has had no success. Recently, she was given a health information booklet but when she asked for an easy read version, she was told this wasn't available. Gillian then asked for it in a larger font but was told this wasn't possible either. Gillian told us she felt ignored and fobbed off.

The Accessible Information Standards (AIS) aims to make sure that people who have a disability, impairment or sensory loss are provided with information that they can easily read or understand, and with support, so they can communicate easily with health and social care services. We were able to talk to Gillian about her right to receive information in a format that worked for her.

**Name has been changed*

Using Voice for Influence



Gillian wanted to remain anonymous but was happy for us to share her experience with the hospital. We have passed this information on to Sheffield Teaching Hospitals via their Patient Experience and Engagement Group and actions have been raised as a result.

Where have we signposted people this quarter?



3. Website / Gathering Feedback

This quarter our website had 1677 visitors, and 5189 individual page views – significantly less than last quarter, where an increase was driven by us advertising our Speak Up grants and Strategic Advisory Group vacancies.

Our most popular page was our 'contact us' page, where people can find details for our information and advice enquiry line. Our most viewed report was our [Annual Report 2021-22](#), published at the end of June 2022.

4. CQC / Sharing intelligence

CQC: This quarter we shared a wide range of feedback relating to people's experience at Sheffield Teaching Hospitals. This was to help inform an inspection of the hospital, and focussed on the areas of urgent and emergency care, maternity services, surgery, and wards.

Healthwatch England: Every quarter, the themes and key issues from enquires and feedback are routinely shared with Healthwatch England via our CRM system, and also by sharing with them our monthly roundup. In addition to this we have regular regional network meetings, attended by representatives from Healthwatch England

to give us a chance to hear about their work and feedback on issues and themes that we are seeing.

What have we been hearing?: This quarter we have shared three roundup reports with statutory partners, commissioners and service providers to highlight the issues that people are talking to us about. These are picked up in different ways, and have become a regular item for discussion at the Health and Wellbeing Board.

Specific issues with providers: We shared information with the Teaching Hospitals about the experiences of people with learning disabilities and autism.

5. Young and Student Healthwatch

During this quarter we spoke with children, young people and their families to hear their views on the Children's Hospital Clinical Strategy. We ran stalls at the Parent Carer Forum Fun Day in Hillsborough Park and at an event in Lowedges; we spoke to people about their experience of accessing health services, and what improvements they would like to see.



6. Community Partnerships

The Community Partnership programme is a way for us to connect with voluntary sector organisations, working together to raise the voices of the people they support. We now have 12 [community partners](#), who help link us to a range of communities.

We produce regular newsletters for our community partners, but there is no fixed approach for the way the partnership works; we work flexibly to find ways that we can support each other in helping people have their say about health and social care services in Sheffield.

This quarter, our Community Outreach lead has been visiting sessions at the **City of Sanctuary** and speaking with refugee and asylum seekers in Sheffield to hear their views and experiences. This has highlighted several issues that people are facing when trying to access care, including the need for increased communication and information giving, alongside adequate provision of suitable interpreters and interpreted information for patients.

7. #SpeakUp Grants

2021–22 projects

Last quarter we published our [#SpeakUp summary report](#). This document outlines each of the projects we funded in 2021–22, their key findings, and the recommendations they made to improve care for local people.

We sent this summary report to local decision-makers in the NHS and Council, and this quarter we received responses from Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield Children's NHS Foundation Trust, Sheffield Health and Social Care NHS Foundation Trust, and NHS Sheffield Clinical Commissioning Group (CCG).

The responses include any actions the organisations plan to take to address the issues raised, and are now published on our website alongside the report. You can read them [here](#).

2022–23 projects

This year, five organisations received #SpeakUp funding:

- [Sheffield ME & Fibromyalgia Group](#): This project involves asking the group's network of members about their experiences of care related to ME/Fibromyalgia, in order to gain further understanding of the barriers people face.

- [Sheffield Foyer](#): A project with young residents of the Foyer to talk about sexual health – this focusses on understanding experiences and barriers to accessing sexual health services, as well as providing information on sexual health.
- [United Women's Affiliation](#): Working with women who do not have English as a first language, this project aims to understand their experiences of accessing health services and providing information on health and wellbeing.
- [Sheffcare](#): A project focussing on talking to care home residents and their families about their experiences with COVID-19 lockdowns and visiting restrictions.
- [Champion in Achieving Better Health in Sheffield \(CABS\)](#): This project involves speaking with South Asian taxi drivers to hear about their health needs and what the barriers are for them to access and achieve better health outcomes.

All of these groups have been busy over the summer carrying out engagement activities for their projects. These have included surveys, focus groups, one to one interviews, and arts sessions.

This year our offer to groups has included four days of dedicated staff time to support with designing or delivering the projects. Our Community Outreach Lead has been working with each of the groups over the summer, helping to design surveys as well as attending and helping to facilitate focus groups.

8. Projects, Involvement and Engagement

Maternity Outreach Project

Four 'mother and baby' sessions have now been held at Firvale Community Hub. These were organised by the Sheffield Maternity Co-operative (SMC) in partnership with Healthwatch Sheffield and Firvale Community Hub.

The sessions were for people of all backgrounds living in nearby communities, aiming to inform and empower people when accessing maternity healthcare services. Sessions covered topics such as what to expect during the pregnancy journey, birthing process, and safe infant sleep. Healthwatch Sheffield also engaged with the women directly, to understand how their healthcare needs are being met by the local maternity healthcare services.

Unfortunately, the sessions have not been particularly well attended, but we know that other similar groups have also had challenges with attendance; we are working with the Maternity Voices Partnership (MVP) and the engagement team from

Sheffield Teaching Hospitals to work out other ways to connect with and hear from women, particularly those from ethnic minority communities.

Older People in Care Homes

One of our priorities for the year is hearing from older people in residential care. We wanted to contribute to the local planning currently taking place around adult social care, specifically that which is looking at residential and nursing care for older people and what this provision might look like in the future. We were particularly interested in what works and what doesn't work for people, as well as what they would like to change or improve.

As part of a dedicated project, we spoke with 16 residents in both residential and nursing care homes as well as five relatives of residents. In total we visited six care homes and heard about another two. Residents spoke to us about the process of moving into a care home, the physical environment of the home, their care and support needs, the social aspects of their care and their access to healthcare.

As a result of our conversations, we have produced a report and a set of recommendations which we have shared with Sheffield City Council. The report will be published next quarter.

Understanding the experiences of older people from minority ethnic groups

Some of our work to date has indicated a lack of representation of people from black and minority ethnic groups in accessing older people's services. We are currently working with Age UK Sheffield and a number of community groups, to better understand the barriers that they may experience.

Chance to Choose

We have been working in partnership with Disability Sheffield on a project hearing the views of adults with learning disabilities, to help inform work on the city's new Working Age Framework.

This framework will include a range of services including Supported Living, day opportunities and respite care. We have used a range of approaches to involve people in different ways including:

- Creative activities (drama, art, creative writing, puppet making) to involve people to have their say in different ways – these have been run in a variety of settings, with a range of groups
- Bigger events taking place focussed on a particular theme, where council staff come together with people with learning disabilities to talk about how services are now, and how they could be in the future
- An accessible survey
- Events focussed on involving and hearing from carers



Long Covid

We've started work on a Long Covid project, which we are undertaking in collaboration with Voluntary Action Sheffield (VAS). There is a need to better understand the experiences of people living with Long Covid in Sheffield, including their experiences of accessing care and support. This work will involve the public and patients coming together with a range of other stakeholders to help shape what Long Covid services and support look like in the future.

During this quarter we supported VAS with a stakeholder event, bringing together voluntary sector organisations to talk about their experiences relating to Long Covid – how it's affected their work, and the people they support. We've now established a joint steering group to shape the VAS and Healthwatch Long Covid work, which includes health professionals, individuals with lived experience of living with Long Covid, and voluntary sector organisations. The steering group has been meeting once a fortnight to identify themes, develop a plan to hear the views and

experiences of more people and organisations, and identify ways to improve the support in Sheffield.

In addition to this, Healthwatch has been carrying out interviews with individuals impacted by Long Covid to hear their stories and experiences. These stories are helping to build rich insight to inform the work. We also attend the Long Covid Board, and have started sharing a patient story at each meeting.

Quality Accounts

Last quarter we responded to local NHS Trust's 2021-22 Quality Accounts. A team of staff and volunteers commented on the accessibility of these reports, each organisation's priorities for the year ahead, progress against last year's priorities, and the opportunities for patient and public involvement in their work.

This quarter, two of the organisations we responded to have published their reports and they can be viewed online:

- [Sheffield Health and Social Care NHS Foundation Trust](#)
- [St Luke's Hospice](#)

9. Reports

What have we been hearing?

This quarter we shared three of our monthly insight reports – from [June](#), [July](#) and [August](#). These round ups highlight ongoing trends and emerging issues in health and social care, and are based on our enquiries, engagement work, and other intelligence.

Many themes have continued throughout this quarter, such as difficulty accessing GP and NHS dental appointments, accessible information in hospital, and mental health support. We've also heard about other issues, such as delays to prescriptions from pharmacies, and Long Covid support.

In July, we presented these insight reports at a Healthwatch England reports showcase event. They wanted to highlight our reports as a good example of the format; we shared our learning from developing these regular briefings, and gave advice to other local Healthwatch who were considering developing their own.

10. Health & Care Public Forum (Sheffield)

This quarter, the Health and Care Public Forum members shared their views on a range of pieces of work which aim to improve health and care in Sheffield. These include:

Phlebotomy (blood testing) services – Recent survey findings were discussed and the group were updated on future work plans. They were impressed by how the programme had managed to hear from a diverse mix of people in a variety of ways, including the use of surveys translated into several languages that are spoken locally.

Pharmacy – Members shared detailed experiences of pharmacy services to inform improvement work, including a project to make changes for people who are housebound. Some members also contributed to the Pharmaceutical Needs Assessment (PNA), which assesses the adequacy of local pharmacy provision in our city.

Long Covid – Healthwatch Sheffield and Voluntary Action Sheffield (VAS) shared their plans to work on a project which will help to inform care and support for people with Long Covid in the future. Their insights will be shared with the Long Covid Board.

A smaller group of forum members have been working hard to develop a framework to guide the group's thinking when considering documents and having discussions with professionals during meetings. They also worked to form an action plan to make improvements to the forum following the results of a survey of health and care professionals.

11. Local decision making

The Health and Care Bill is new legislation which has made changes to the way the NHS is organised – on 1st July new **Integrated Care Boards** (ICBs) were set up across the country in each sub-region. These boards will work with partnerships of local organisations such as voluntary sector organisations and local authorities, as part of an **Integrated Care System (ICS)**. Sheffield will be part of the **South Yorkshire ICS**.

This is important to the work of Healthwatch because our role is to influence and improve the way services are run. In the new system, some decisions about Sheffield services will be made at a South Yorkshire level – this means we need to have routes to influence decisions in this new structure.

During this quarter we have continued to work with other South Yorkshire Healthwatch to promote the importance of public involvement and citizen voice in

the new structure. We have continued work on our own collaboration agreement, and our approach to working together as local Healthwatch in South Yorkshire.

In the new structure, Healthwatch has a non-voting place on the ICB where we will have the opportunity to bring insight from our work, and constructive challenge to the system in our role as a critical friend. As an interim measure, the Healthwatch Sheffield Chief Officer has taken this place while we develop a longer term plan to ensure we can be fully effective in our work with the board.

Locally, our Chair has been attending the **Health and Care Partnership Board** meetings, and has been active in contributing to discussion around the future of how services will work together as Sheffield Place. This also links to the role that we have currently facilitating the Health and Care Public Forum, giving people and patients an opportunity to directly hear about and comment on locally developed plans (see section above).

We will continue to advocate for the importance of involving people in decision making, wherever those decisions are made.

12. Supporting services to involve people

Primary Care Hubs

In September, we continued to hear views related to the [primary care hubs consultation](#). Volunteers helped us to attend many of the public meetings around the city to hear what people's concerns were about the possibility of GP practices moving.

Mental Health Services

We have attended a variety of mental health meetings this quarter, and been involved in a range of discussions to support services in thinking about how they can involve people in the way services are designed. This included:

- **Outcome measures:** We continued to attend a series of meetings to inform work to choose a set of outcome measures, which will be used in community mental health services. We held a small focus group with the New Beginnings Project to capture their views on the measures and shared their feedback with the project. We also attended an event alongside experts by experience and representatives from statutory and VCS services, to contribute to discussions of research, and current thinking about what needs to be considered when selecting and implementing the measures.
- **CMHT transformation:** We brought together Sheffield Health and Social Care Trust and Sheffield Flourish to form a plan to involve service users in shaping the

delivery of the new clinical model in mental health Recovery Services. Sheffield Flourish designed a series of 'snakes and ladders' sessions to find out what the issues might be with the proposed model and how they may be addressed. We facilitated at the first session which was a great success.

- **Primary Care Mental Health:** We supported Sheffield Health and Social Care Trust to plan an event to hear the views of people about Primary Care Mental Health services. Our Engagement and Involvement Officer helped facilitate an initial event, which was well-attended. We heard about the experiences of people with lived experiences and how they would like to see future mental health care services to provide appropriate and timely care outside hospital.

There were in-depth discussions about the barriers to accessing appropriate mental healthcare services faced by people whilst they live in the community including referrals to different services and waiting lists. There were productive discussions around the tables between mental health professionals and the people using mental health services.

This was the first session of a series where people with lived experiences will be heard from and discussions about the integral steps to be taken ahead as part of the transformations.

13. Volunteers

This quarter, our volunteers contributed at least **146** hours of their time, helping us in many different aspects of our work.

Strategic Advisory Group

This quarter we welcomed new members to our Strategic Advisory Group (SAG). Following a successful recruitment process, Mark Gamsu and Lucy Fox have joined SAG. We have also welcomed Tim Furness, who is the new link member with the VAS Board. This update means current SAG membership is as follows:

- Judy Robinson (chair)
- Trish Edney
- Janet Harris
- Verni Tannam
- Beth Kyte
- Asma Rabeha
- Lucy Fox
- Mark Gamsu
- Tim Furness

SAG met twice this quarter – taking a break in August. September’s meeting was a meeting in public, and we used this as an opportunity to revisit our workplan for the year 2022–23 and review progress against our targets. Several staff members presented about their area of work to help flesh out some of our current projects.

Other volunteering highlights

In July, a new Information Volunteer started working with us on a weekly basis. She’s currently collating information about the different services offered by pharmacies in part of the city, to support a community group who’ve said this would be helpful for their members.

In August, a team of staff and volunteers supported the Sheffield Parent Carer Forum family fun day. They went along to help out at the event, and hear from children and families about the health and care services they use.

14. Healthwatch Team

This quarter we had no changes to the Healthwatch team, although **Natasha Munoz** who joined us as an Engagement and Involvement Officer to work on our Care Homes work has stayed on in the team to lead on the Long Covid Project for 12 months.

15. Coming up – What next for Healthwatch Sheffield?

We will publish our report on the experiences of older people in care homes.

We will develop the next stages of our Long Covid project, in collaboration with our new steering group.

We will start publishing the #SpeakUp reports and share them with people who make decisions about health and care services in Sheffield.

We will publish our report on GP websites.

Using Voice for Influence



As well as sharing our intelligence in our written round ups, staff and volunteers regularly raise feedback and share experiences in the meetings they attend. Taking part in meetings helps us stay informed about developments in services, and enables us to promote the importance of listening to, and involving people, in shaping those developments. This quarter, we have attended the following meetings, boards and committees:

- Health and Wellbeing Board
- Lived Experience and Co-production Assurance Group (Sheffield Health and Social Care Trust)
- Integrated Care Board
- Children & Young People's Health & Well Being Transformation Board
- Learning Disability Partnership Board
- Primary Care Commissioning Committee
- Sheffield place Strategic Patient Involvement, Experience and Equality Committee
- Sheffield Mental Health, Learning Disability, Dementia and Autism Delivery Board
- Mental Health Crisis Care Board
- Black, Asian and Minority Ethnic Public Health Group
- Healthier Communities and Adult Social Care Scrutiny Committee
- Area Prescribing Committee
- Community Mental Health Team Review
- Community Covid Hubs meetings
- Health and Care Strategy meeting – voluntary sector
- Integrated Care Partnership
- Sheffield Health and Care Partnership Board
- Addressing Health Inequalities – Children's Hospital