

Quarterly Report: January-March 2021

Headlines



- * In partnership with Sheffield Flourish
- ** In partnership with Disability Sheffield

1. Introduction

This quarter we've heard from over 700 people, a significant rise from the number that we reported in December; this has been through a higher than normal number of enquiries, but also through connecting with more people and groups via online events. Many of these online sessions have been Healthwatch staff visiting other groups, but we have also done more this quarter to start running our own online events. Our staff have taken learning from many different places to develop their own skills in organising and facilitating these virtual events, something that prior to Covid nobody in the team had experience of. It's emerging as real strength of the work that we are doing, and we've had positive feedback from both the public and statutory partners about events that the team have run.

As we get to the end of the financial year, this period has been spent finishing work from our last set of priorities, as well as looking ahead to planning future work. We've spoken with a range of people, both professionals and the public, to help inform the development of our new three year strategy, and our work priorities for 2021/22. Set out below is a summary of work undertaken this year, as well as information about our forward plans.

A look back – our priorities for 2020/21

These are the areas of focus which we set down in June 2020, after an initial period of responding to the emerging crisis of Covid. Each year we identify particular areas of focus (our priorities) where we do some more in depth work; this is essential to help us effectively plan and focus our limited resources. It is important to acknowledge that this does not form the entirety of our work; alongside our stated priorities we will be doing day to day work on a range of subjects, often in response to issues raised through the year - for example, this year dentistry was not a stated priority for us but we have dealt with a large number of enquiries about on this subject. As a result we have spent a considerable amount of time collating evidence and talking with commissioners about the issues we have heard about, as well as developing our own understanding of the dentistry offer to be able to offer people effective information and advice.

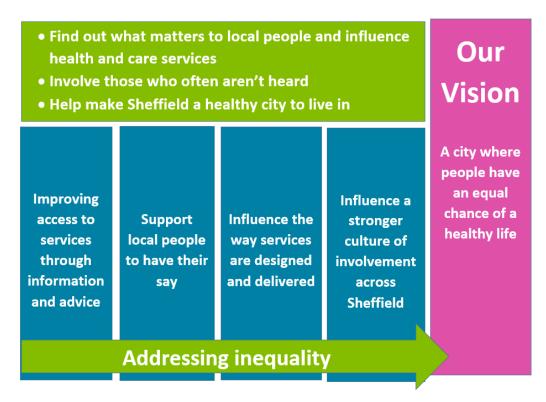
	Priority	Work undertaken	Impact
Accessing support for Recessive Genetic Conditions Worked with the Community Based Genetic Literacy and Support Project on surveys and interviews to inform a focussed report; a draft of this is completed and will be published next quarter Worked with the Community Based Genetic Literacy and Support Project on surveys and interviews to inform a focussed report; a draft of this is completed and will be published next quarter Worked with the Community referrals for support. It is hoped the recommendations will support the Community project to better influence health professionals to refer when appropriate, giving people better access to the support they need.	Accessing support for Recessive Genetic	Community Based Genetic Literacy and Support Project on surveys and interviews to inform a focussed report; a draft of this is completed and will be published next	The report highlights gaps in referrals for support. It is hoped the recommendations will support the Community project to better influence health professionals to refer when appropriate, giving people better access to the

Impact of Covid on the delivery of health and care services:	 Report based on a dedicated survey, enquiries and feedback from groups What we are hearing: began producing regular updates to share our intelligence with providers and commissioners Disabled people and Covid – worked with Disability Sheffield to write a report on the experiences shared by disabled people. 	 Informed Rapid Health Impact Assessments Introduction of short, frequent 'What we are hearing' reports enabled timely operational responses to issues raised Disability report informed a Scrutiny committee working group, leading to an action plan around issues such as respite, social care and travel.
Mental Health	 The Mental Health Journey was a report produced in partnership with Flourish, looking at the experiences of 9 individuals who sought support in relation to their mental health Ongoing input and involvement in the mental health transformation programmes in the city 	 The report has helped us bring lived experience into the places where decisions are being made about service delivery Stories have been picked up by the CCG to be used as pen portraits which will inform the crisis care transformation work on an ongoing basis
Adult Social Care – including care homes	 Partnered with John's Campaign to seek the views of relatives on visiting in Care homes. Worked with SCC on their plans for developing virtual inspections of care homes Worked with SCC to produce information resources on visiting 	 Supported quality monitoring – we shared specific intelligence about relating to homes to help inform SCC monitoring Helped improve access to information for relatives Increased the opportunities for

- Spoke to care home managers to develop our own approach to hearing from residents about their experiences
- ASC review significant input into this review, including supporting the development of the consultation approach.
- Homecare event –
 worked with
 Disability Sheffield
 and SCC to run a
 public event on the
 future of homecare
- Developed plans with SACMHA to explore the experience of the Afro-Caribbean community accessing social care

people to have a say in the development of social care, including increasing the diversity of those heard from.

Looking forward – our strategy for 2021-24



This is the one page version of our strategy, the full version will be on our website in the next quarter.

Looking forward – our work priorities for 2021/22

Maternal Health for Black and Asian women

Impact of Covid

- -Emerging health impacts
- -Service changes

Autism

- -Hearing the voice of autistic adults
- -Diagnosis and support for children

People having a say in new health and care structures

- -Neighbourhood (PCNs, LACs)
- -Sheffield service providers and partnerships
- -Regionally (Integrated Care System)

2. Enquiries, Information and Advice

We provide information and signposting services to members of the public who have healthcare or social care related queries, and are not sure where to turn. Many people who contact us are not sure how to navigate healthcare systems, or how they can have a say in their care.

This quarter, we've heard from 89 people. These people have reached out to us through our website, through email, and by telephone. 25 of these enquiries were about accessing dental services, 19 of these were GP related enquiries. Other enquiries ranged from Covid-19 vaccination enquiries, to mental health service enquires. Often, people just need signposting back to their own service provider, with additional information. Many enquirers just need people to listen, and appreciate being heard by Healthwatch staff, and knowing that their views will be passed on to people who fund and commission services.

Where have we signposted people this quarter?

Single Point of Access **CQC** Enquiries for District Nurses Local Dentistry

Sheffield IAPT

Network guidance Sheffield Health

and Social Care

General Medical Council

)wn Service

Face covering

Sheffield Adult

Provider_{Citizen's}

exemption cards

Safeguarding Gov.uk

Partnership NHS choices Advice

Sheffield Advocacy Hub Parliamentary and Health Service

Patient Advice Liason Ombudsman

Service Samaritans CCG

Sheffield City Council

Local and National Covid Guidelines

NHS England

Other local Healthwatch services

Case Study Accessing a GP

James* was finding it difficult to register at a GP surgery as a temporary patient. He had been a temporary patient with a practice previously, and had been able to get prescriptions for his regular medication; he was told that he needed to re-register at this practice (as a temporary patient), in order to request the same medication again.

However, the GP surgery seemed to have misplaced his application, and were requesting that he fill in another from. This concerned James because he was in urgent need of getting a prescription.

He had been unable to get the medication through NHS111 or out of hours services, because he did not have any record to show that he had previously used that medication. We supported James to speak to different people about a way to get the medication he needed - after lots of back and forth between James, the GP surgery, and his local pharmacy, the GP was able to provide James with a note of his medical record. This note was proof that when he was a patient at that practice, he had been prescribed that medication before. The pharmacy was then able to give him the medication he needed for a couple of days, and in the meantime, the GP was able to fast track his new application for him to become a temporary patient.

*Name has been changed

GP Access Cards

The right information and advice can help improve people's access to care. As part of our focus on this, we are supporting the GP 'Access Cards' campaign, launched by NHSEI and partners such as <u>Groundswell</u>. This quarter we received a supply of the cards which help people overcome the barrier of being asked for photo ID and/or proof of address when trying to register with a GP practice, even though this is not required. We will be distributing supplies to organisations working with people who may benefit from them such as those experiencing homelessness, asylum seekers, refugees and travellers. Not only are these groups likely to experience health inequalities, they are also less likely to have the opportunity to be invited for a COVID-19 vaccination if they aren't registered with a practice.

3. Website / Gathering Feedback

There 2430 visitors in this quarter, (87% of whom were new visitors) and 7264 page views. After the home page, the most visited pages were about the launch of the SpeakUp small grant scheme (viewed 301 times), and the news article about the Mental Health report (viewed 266 times).

Last quarter we described that we were developing a freepost, paper feedback form to reach groups and individuals who may not be in a position to feedback online. We now have this form printed and towards the end of the quarter we started to distribute a small number – we have plans for wider distribution in the next quarter.

4. CQC / Sharing intelligence

- CQC: we shared 9 pieces of feedback about 4 services with the CQC
- 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. They use this to help inform their 'What are we hearing?' reports, and to help them identify issues which need raising at a national level. This quarter, HWE published their report on access to GPs which included reference to HW Sheffield work particularly our work focussed on the experience of deaf, BSL users accessing healthcare.
- 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. A summary of these reports was presented to the Health and Wellbeing Board by our Chair.
- Submission to the Scrutiny Committee Dentistry: In January we produced a <u>summary of feedback and experiences relating to dentistry during Covid-19.</u> Access to dental care continues to be a subject that we hear a lot about through our enquiries, with many people struggling to understand what is available, and finding it very difficult to access the care they need.
- Submission to the Scrutiny Committee Experience of disabled people during Covid: At the request of the Scrutiny Committee we undertook a piece of work to gather together existing evidence about the experience of disabled people during Covid. We did this in partnership with Disability Sheffield; the report informed a working group of the Scrutiny Committee which picked up a number of the recommendations for action. The report has since been shared with a number of boards and meetings.

- Outpatient Transformation Programme NHSI: We were approached by staff from NHSI who are working on changes to outpatients. We shared a round of relevant intelligence to inform this work including some intelligence on digital exclusion, our Covid-19 report and the piece of work we did in relation to the NHS Long-Term Plan.
- Sheffield Teaching Hospitals Quality Objectives: we prepared a round-up of intelligence which could be used to help inform STH quality objectives for 2021/22.



Using Voice for Influence

Rapid Health impacts had been done in Sheffield to understand the impact of Covid in different areas of life. Concerns were raised that this work hadn't looked specifically at the experience of disabled people, despite the evidence that they had been significantly negatively impacted by the pandemic. As a member of the Healthier Communities and Adult Social Care Scrutiny Committee, we were able to ask what could be done to fill this gap. A working group of the committee was convened to consider the issue, and we worked with Disability Sheffield to produce a report highlighting experiences and concerns that people had shared with our organisations. This report was considered by the working group and an action plan was drawn up to address a range of issues relating to areas such as social care, travel, and access to healthcare. Work on this action plan is ongoing.

5. Young and Student Healthwatch

Continuing work with Ellesmere Youth Project boys group has taken place this quarter. Following the sessions with our Community Outreach Lead, the group applied for a SpeakUp Grant which they have already been using, to design and share a survey about health and wellbeing. By the end of March more than 300 people had completed the survey.

The group are now talking about presenting their findings to organisations and the community. The young men have steered this project from its beginning, empowering them to speak out about resources in their community and how they can influence positive health and wellbeing.

6. Engagement

Homecare – What Matters to You?

In March we worked with Disability Sheffield and Sheffield City Council to run an online event where the council shared their ideas for the possible future of homecare. 13 members of the public attended this event. We had feedback from the Commissioners about this work:

Commissioners at the Council are collaborating with Healthwatch Sheffield as we develop the Home Care Transformation Programme. Their support is invaluable in several respects. Firstly, they are generous in committing time and expertise in facilitating events which enable Council officers to meet with and discuss plan with people with first-hand experience of local social care services. They also provide a valuable role as a critical friend, always constructive and with the needs of the people they represent in mind. The home care report, published in 2019, has been a valuable source of local intelligence, which encapsulated many of the issues we are seeking to resolve through the Programme.

Healthwatch Sheffield Public Meeting

In March we held a public meeting to hear from people about their ideas for our work at Healthwatch. 26 people attended the event, a mixture of individual members of the public and staff from voluntary sector organisations and statutory bodies. The feedback from discussion in break out rooms has helped us develop our thinking for both the three year Healthwatch Strategy, and also our workplan for 2021/22.

Sheffield Voices

This quarter our Community Outreach lead ran the WISH (What Is Health) course with Sheffield Voices, adapting the materials for adults with learning disabilities. Part of the course was looking at the subject of power, including the power of an individual in a health context. As a result, one participant felt empowered to raise a concern and complain to a health provider following the session. She said:

I felt more confident after being at the Wish course (Sheffield Voices) and decided to phone to complain.

Unfortunately she felt she didn't feel listened to and so called Healthwatch Sheffield for advice. The partnership work between Healthwatch Sheffield and Sheffield Voices made those attending aware of the Healthwatch role and this prompted her to call for support.

SpeakUp Grants

We know that local voluntary groups have strong relationships within their communities. The Speak Up grants are a way to help community groups to give a greater voice to the people they support, and encourage people to speak up about their experiences of health and social care.

With a grant of £500-£1000, we support groups to plan a project which enables them to hear from the people they work with. This could be interviews, surveys, focus groups or something more creative.

This quarter we awarded SpeakUp Grants to 13 community organisations:

- South East Sheffield Community Dementia Advice Service
- Burton Street Foundation
- Autism Hope Sheffield
- Shipshape
- JCI Sheffield
- Thalassemia South Yorkshire
- Sheffield Maternity Cooperative
- SACMHA
- Adira
- Luv2MeetU
- Disability Sheffield (Sheffield Voices)
- Saalik Youth Project
- Asperger's Children and Carers Together

We will be working with these groups to support them in planning their activity, and later in the year we will produce a report based on the information gathered.

Care Homes

We spoke to 10 care home managers about how best to gather the views of their residents, and those living in similar homes in terms of size, and residents' demography. Managers' suggested topics that residents may want us to investigate and provided great insights into what might work best in light of continued lockdown restrictions. There was great interest in working with us to help give voice to residents. We will implement the learning from these discussions in our work with care homes and residents in the coming months.

Some managers talked about how the COVID-19 pandemic had impacted on residents and their families, and what measures they had put in place to promote the wellbeing of residents in general, and on an individual basis to help people achieve what mattered to them. We also heard how joint working between organisations had improved and had been the one positive to arise from the pandemic.

7. Reports

What have we been hearing?

We produced our round up reports in <u>January</u>, <u>February</u> and <u>March</u>. Key issues included: Covid-19 vaccines (largely positive stories, but some access concerns), communication with GPs, difficulty accessing dentistry, access to services for Deaf people (as well as a number of negative stories we've heard some positive examples of good practice this quarter), annual health checks, and maternity services.



Using Voice for Influence

In February we supported Citizens Advice Sheffield to share **Susan's story**. Susan's husband Ronnie passed away last year – they are both profoundly deaf and in the video, Susan shares her experience of trying to communicate with services during his last few months of life. The story was picked up by several news outlets and generated a great deal of conversation, including prompting others to share their own stories of accessing health services as a deaf person. We have since met with Sheffield Teaching Hospitals who have been working to improve the service they offer to BSL users; recognising that there is still a long way to go, we know that some actions have already been taken, for example pre-booking interpreters for inpatient stays, and trialling the use of transparent face masks to help with lip reading. Susan's willingness to speak up and share her experience is helping to improve services for other deaf people accessing healthcare.

The Mental Health Journey

In partnership with Flourish, we published this report in January 2021; it can be read here.

Its key messages were:

- Professionals across the system aren't always good at identifying poor mental health.
- People wait a long time to be seen and it is difficult to get seen in times of crisis.
- There are issues with the communication between GPs and other services.
- Different treatments work for different people but choice is sometimes not offered or available.
- Services aren't delivered with sensitivity to different cultures and to individuals with particular needs.

8. Quality Accounts

Each year Healthwatch are invited to comment on the Quality Accounts of local Trusts. This normally happens in March, but this year NHS England extended the deadline to help Trusts cope with the emerging Covid-19 pandemic. Last quarter we talked about the process by which we gathered views from staff and volunteers to comment on the Quality Accounts. The reports (and our responses) have now been published:

- Sheffield Health and Social Care NHS Foundation Trust
- Sheffield Teaching Hospitals NHS Foundation Trust
- Sheffield Children's NHS Foundation Trust (not yet published)
- Yorkshire Ambulance Service NHS Foundation Trust
- St Luke's Hospice

9. Sheffield Accountable Care Partnership

We continue our focussed commissioned piece of work to support engagement across the Accountable Care Partnership (ACP) in Sheffield.

The Improving Accountable Care (IAC) forum continue to meet every month. We reported last quarter that we have been developing a way of extending the reach of the group, by opening out attendance to people who may be interested in a particular topic, enabling them to attend on a one off or ad-hoc basis. This has proved successful, and each session tends to have the core members, plus 2-3 others who have signed up to that session because of their particular interest. This quarter our Engagement officer contacted all group members and attendees to get feedback on how the meetings were running – this feedback was positive, with people feeling that it was running well.

To keep the group accessible for people who don't access online events, our staff member continues each month to have phone conversations or e-mail correspondence with 2-3 people

who make contributions outside of the meeting. We have also received positive feedback on this approach.

Agenda items this quarter have included:

- Covid vaccinations
- ACP 10 year vision
- Pharmacy updates
- Census
- Personalised Care
- Digital Inclusion

After each meeting, a written summary of feedback and questions is shared with the speakers who are asked to provide an update/response. These responses are then shared with attendees.

10. Volunteers

This quarter one of our long standing volunteers committed a significant amount of time to help us with the SpeakUp Grants panel.

Elsewhere, volunteers have been taking part in virtual events like Improving Accountable Care (IAC) Forum meetings, and online engagement events such as our public meeting.

Volunteers on our Strategic Advisory Group (SAG) meet monthly and have been active this quarter in considering the development of our new strategy and workplan. We have also welcomed two new members of SAG this quarter, Marim Alfakih and Asma Rabeha who bring with them clinical knowledge as a pharmacist and a doctor.

11. Prominent or emerging themes

As reflected in our January, February and March report, some of the main issues we have been hearing about are:

Accessing dental surgeries

We continue to receive a lot of calls about dentistry, from people seeking to access both routine and urgent care. We have started routinely sharing details of these issues with dental commissioners, who have looked into some of the specific concerns for us. However, the majority of people we speak to are still having significant issues and there is a growing sense of concern around prevention, for example from parents who are unable to access routine checkups for their children.

Access to GPs

We hear a lot of positive stories about the care offered by GPs, but also hear concerns which relate (often) to issues around access. We have heard from many people who have struggled to contact their surgery by phone, sometimes trying for several days without success. Issues around GP access and considerations for future service delivery are described comprehensively in the Healthwatch England report on this subject, which largely reflects what we are seeing happening in Sheffield.

Mental Health Services

We continue to hear about people's poor experiences of accessing Mental Health Services, although in our February and March we were also able to share some positive experiences of people who felt listened to, and had been well supported through the Single Point of Access. One area of concern relates to complaints – this quarter we have heard from more people who have found the complaints process at Sheffield Health and Social Care Trust hard to access and unresponsive, something which we have highlighted previously.

Disabled People and Covid

Our report on the impact of Covid on disabled people highlighted concerns from disabled people about the process of coming out of lockdown. Many have been shielding for long periods of time, and have described barriers to getting back out and about to work, exercise, shop and socialise. These barriers are both related to physical changes to the environment (e.g. moved bus stops, tables and chairs on pavements, social distancing measures) and also to loss of confidence and skills, as well as diminished health for example from lack of exercise.

12. Healthwatch Team

There have been no staff changes this quarter.

13. Coming up – What next for Healthwatch Sheffield?

We will publish our report on access to support for Recessive Genetic Conditions

We will develop our work with care homes, to hear from residents and relatives about their experiences

We will work on developing our
Community Partnerships by forming new
partnerships, and growing the way in
which we communicate and work with our
existing partners

We will launch our BSL Vlog in partnership with Citizen's Advice Sheffield, providing information and advice for deaf people





As well as sharing out intelligence in our written round ups, our staff and volunteers regularly raise feedback and share experiences in the meetings which we attend. During this quarter, this has included:

- Health and Wellbeing Board
- CCG Governing Body
- Children & Young People's Health & Well Being Transformation Board
- Learning Disability Partnership Board
- Primary Care Commissioning Committee
- CCG Quality Assurance Committee
- Sheffield CCG Strategic Patient Engagement,
 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
- Patient Experience Committee (Sheffield Teaching Hospitals)
- Area Prescribing Committee
- Community Mental Health Team Review
- Quality Board (Sheffield Teaching Hospitals)
- Carers Strategy meetings
- Adults Service Improvement Forum
- Neurodevelopmental Task and Finish Group (children's hospital)
- Sexual Health Networking Meeting