



# Annual Report 2015/16

## Chair's introduction



This year has been the first full year of our operation under the umbrella of Voluntary Action Oldham. It has been a productive year and our reputation and reach into local communities have both grown.

It has been great to see our quarterly Healthwatch Forum develop further. Speakers have covered a range of topics, including the introduction of the Care Act, local Primary Care Commissioning and Greater Manchester Devolution. We have also included topics to help people to look after their own health and wellbeing, including the importance of physical activity.

Our information signposting service has had another busy year and the types of enquiries people bring have been increasingly complex. In recognition of the work we have done in this area we have been invited to provide the NHS Complaints Advocacy service for Oldham Borough from April 2016.

A new venture for us this year has been working with the CCG, GP practices and Voluntary Action Oldham on an exciting project called Your Child, Your Health

Choices. This project focuses on families in the Failsworth cluster of GP practices who have one or more children aged under 5. Our role has been to help to gather information about the 'health literacy' of these families and also to understand what actions they have taken when their child was ill. We will be using this information to help to inform and shape future services.

Special thanks must go to our Board members for their time, experience and the stability they have brought this year. It has been sad to say goodbye to Judy Robinson at the end of this year - she has been a real asset to the Board. We wish Judy all the best for her retirement and move out of the area.

Thank you also to our hard working and dedicated staff team who have worked tirelessly on our behalf.

You will notice that I am writing this introduction as Acting Chair. I have remained as Acting Chair as our host organisation Voluntary Action Oldham merges with Community and Voluntary Action Tameside to form a new charity called Action Together. Alongside that merger we are taking the opportunity to review our Healthwatch Governance and Board.

I look forward to another year of even stronger growth in Healthwatch Oldham.

***John Starkey, Acting Chair***

# About Healthwatch Oldham

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

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

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

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

We believe that asking people more about their experiences can identify issues that, if addressed, will make services better.



## **Our vision and priorities**

Healthwatch Oldham's vision is that health and care services for residents of the Oldham Borough are shaped by their needs, aspirations and experiences. We want local people to be able to use good quality, accessible services which help them to be as fit

and well as they are able to be. We want services and support to help people to reduce their likelihood of becoming ill as well as to support them when they are unwell.

We have five strategic objectives that help us to do this:

- To gather intelligence so that we can influence commissioning decisions and local health and care related services.
- To offer different ways to engage the public in Oldham Borough about health and wellbeing with a focus on groups who are often under-represented in decision making.
- To undertake research to address health inequalities.
- To communicate as widely as possible information about rights and choices within health and social care for individuals and (from April 2016) to help people to get the most out of the NHS Complaints process if they are not happy with their care.
- To have robust governance to ensure the independence of Healthwatch Oldham.

2015/16 saw further development of the idea for devolved health and social care for Greater Manchester. Outline plans for changes are in place and thought has turned to how they will be implemented. There will be a huge change of emphasis towards reducing people's chances of becoming ill rather than waiting until people become ill before taking action. We will work hard to ensure local people's voices are heard as the changes are planned.

# Delivering our statutory functions

Healthwatch has a number of statutory functions - things that the law says we must do. These fall into four main areas. We will describe our activities in the context of these below:

## **1. Gaining INSIGHT - understanding people's experiences of services.**

We think it's really important to listen to a wide range of people who live or use services in Oldham Borough. One of the ways we do this is to support volunteers in our local communities to be our eyes and ears in that area.

In partnership with Healthwatch Tameside, the Volunteer Team at Voluntary Action Oldham and input from our current volunteers we improved our system for recruiting, training and supporting volunteers. Volunteers joining the Healthwatch Team attend a new introduction to volunteering that also covers Dementia Friends, Safeguarding and Confidentiality. Further training is offered for specific roles and is ongoing as required. We have regular Volunteer Team Meetings and each volunteer receives ongoing contact, support and updates from a member of paid staff.

Our volunteers are great ambassadors for Healthwatch and they are an integral part of the Healthwatch Team and we are proud of them and the volunteering they do for us.

Our volunteers frequently support community information stalls. These are targeted at community events and community groups and provide a local 'front door' into Healthwatch services. Recent examples of this include a Healthwatch Oldham presence in local

libraries and at Royal Oldham Hospital as well as events like a carers' support event at Oak Gables Partnership in Shaw and a stall at an International Women's Day event in a local temple.

Working with children and young people has been really important for us this year. We have run two projects focused on this. The first is a repeat of the student peer research project we started last year in partnership with Oldham Sixth Form College. Last year's project resulted in a number of changes including additional outreach work by local sexual health services. This year's project attracted over 60 students who will be presenting their findings to the Health and Wellbeing Board in June 2016.



Another example is the Your Child, Your Health Choices project. This is a multi-agency project using a Health Literacy approach. The core project was funded by Oldham Clinical Commissioning Group, led by a GP and health professionals and facilitated by Voluntary Action Oldham in partnership with Deakin University, Australia.

Healthwatch was invited to join the project as it was felt we could bring a more independent approach to some of the data collection. It was recognized that it would also enable us to engage in more detailed interviews with the target audience who historically we have not had much contact with. The core target audience was parents with children aged under five who had higher GP and A& E attendance with their children due to minor illnesses.

200 Health Literacy Questionnaires (HLQ) were undertaken with parents across a range of settings in the Failsworth Cluster. Following on from this, seven in depth interviews were undertaken by Healthwatch which explored parents' experiences of Health Literacy in more depth but also provided the opportunity for Healthwatch to give parents an opportunity to talk about their own health and social care experiences. These seven interviews were used to produce the vignettes for further workshops with parents and professionals and are now the basis for the main project to investigate for future development.

Healthwatch has built on this project to form strong relationships in this community which we had not previously had much engagement with. We now work closely with the GP Practice Patient Participation Groups in the area and are looking to recruit and train some of their members to become local Healthwatch volunteers.

## **2. Working to INFLUENCE the people who plan and manage services - based on the things local people have told us.**

One of the interesting outcomes of the Your Child, Your Health Choices interviews was that all of the parents interviewed were currently experiencing or had experienced some mental ill health which had not previously been indicated to this level from the Health Literacy Questionnaires. We were able to feed back their concerns, and proposed solutions in the workshops, this included easily accessible information around mental ill health in GP surgeries. We know that these are being considered alongside all the other data to develop community based support in this area.



Through the information signposting service a lot of information is collected around people's experiences, from this it may be that a Patient Opinion or Care Opinion story is collected or the relevant services are contacted to try and resolve the situation or it could result in a formal complaint being made. Patient Opinion/Care Opinion is an online tool we use to share patient experiences with partner organisations - it provides the organisations with a way to respond to what people say. Each of these methods provides

valuable insight and feedback to the service in question and help to highlight areas within the service that need to be changed. Here are two examples of how this has worked:

- Someone contacted us with several queries. One of these was that his mother was having issues with Oldham eye clinic and was now awaiting referral to Rochdale Infirmary for a cataract operation. Healthwatch worked with the person, Pennine Acute Hospital Trust, PALS and Oldham CCG to highlight this issue. We worked together to understand how it may have arisen. This helped to resolve the situation and to reduce the likelihood of it happening to another patient. The person's mother had a successful cataract operation shortly after and both she and her family felt the service she had received in this time was very good.
- Another person asked us for support around a decision for an individual funding request for a procedure it had been agreed that they would benefit from. There appeared to be confusion between NHS England and Oldham CCG in terms of where the request needed to go. This confusion was because his current treatment was funded by the CCG but the treatment he had been referred to was funded by NHS England. Through Healthwatch communication with NHS England and Oldham CCG the situation was resolved and with the help of his GP the person was able to re-submit his individual funding request. In March 2016 Healthwatch received feedback from the person, thanking us for our help and that he

had been successful in his reapplication to Oldham CCG and was now on the waiting list for the procedure. We understand that this case has also helped people referring patients in similar situations to better help them to navigate the system.

In addition to our forums (see below) we have worked closely with our Oldham locality plan leads as part of the Greater Manchester (GM) Devolution planning process. We have supported them to deliver two large scale public engagement events and are working with them to plan more for the future.



### **3. Providing INFORMATION signposting and support to help local people to make an informed choice about services they access.**

Our Healthwatch forums play an important role in our information giving work. Over the financial year we have held four forums in different venues and geographical locations and covering different Health and Care topics. These were:

- Delegated Primary Care Commissioning and Greater Manchester Devolution
- Health and Wellbeing/Public Health and Exercise Opportunities
- Mental Health Awareness

- Urgent Care and Taking Charge of Your Own Health

We have delivered these in partnership with Pennine Care NHS Foundation Trust, Pennine Acute Hospital Trust, Oldham College, Public Health Oldham, Oldham Community Leisure, Mind and the Dementia Action Alliance as well as many other services and organisations.



The forums have been well received with an average of 45 members of the public at each event and provide an important function of providing relevant, up to date and easy to understand Health and Social Care information / updates to the people of Oldham and provide an opportunity for the public to ask questions and give feedback on important issues.

We also had three referrals to our signposting service as a consequence of the in depth interviews in the Your Child, Your Health Choices project, and two further signposting queries. All queries have been successfully followed up and information provided. In the future we will be building on these strong community contacts enabling a two way flow of information between

local people, Healthwatch and health/care related organisations.

Individual information requests can sometimes be complex and time consuming if we are to help the person to access the services they need. The examples we have given in section 2 above illustrate how these can sometimes include a number of agencies and how the boundaries between organisations and services can make it harder to find the right solution for someone.

The example below is a slightly simpler case and shows how working with the right partner organisation can help to find a solution more swiftly:

- Someone contacted Healthwatch about her mother in law who has become very forgetful. The lady who contacted us was struggling with family members not understanding the enormity of the situation and she wanted support and advice regarding a way forward. We discussed making a referral to Age UK's Dementia Information Service. She agreed to the referral and Age UK arranged to meet with the lady and her family and look at options around finding the right care home, dementia information and offer advice on getting a diagnosis. The lady contacted us afterwards to say that she had found our help to be extremely useful and it has provided both her and other family members with a structure to follow which involves the GP, Adult Social Care Services and Age UK.

#### **4. Sharing what we know with Healthwatch England, the Care Quality Commission and other similar external organisations.**

We have continued to invest in positive working relationships with external partners, having a varied level of contact with the different organisations.

Our strongest links have been with Healthwatch England with whom we have shared local data that we have collected as well as working as part of

their steering group around the development of Quality Statements for local Healthwatch organisations.

We have played an active role in the Greater Manchester network of local Healthwatch organisations. This network has shared information and representation on a wide range of topics and has negotiated a Healthwatch presence within the governance structure for GM Devolution.

## **Priorities 2016/17**

We anticipate a number of key changes around local services. Our Board has agreed that we have a significant role in helping to ensure that local people's voices are heard as these changes are planned and implemented. We therefore feel that our priorities for 2016/17 include:

- Outreach into 'seldom heard' local communities and communities of interest
- Building on the data collected in the Your Child, Your Health Choices project
- Continuing and building on our routine data collection about a range of health and care services
- Establishing and developing our Help with NHS Complaints service (added to our contract from April 2016)
- Helping local people's voices to be heard in GM Devolution planning - including implementation of Healthier Together
- Helping local people's voices to be heard in the development and delivery of Oldham's locality plan
- Ensuring that proposals around a single hospital service for the City of Manchester take into account the needs and experiences of Oldham residents whose hospital trust is likely to be affected by the proposals.

# Financial and governance information

Healthwatch Oldham has an independent board within a family of organisations under the umbrella of Voluntary Action Oldham. The Board was appointed to reflect both the skills needed and experiences of local people. Board membership for 2015/16 was:

John Starkey (Acting Chair)  
Norma Bewley  
Norma Parry  
Judy Robinson  
David Makin  
Yvonne Lee



In addition to our Board we have a network of local Healthwatch volunteers who are active in local communities. The information they collect about people's views is reported regularly to the Board and used to shape our work and priorities.

We thank all our volunteers for the numerous hours they put in on our behalf.

Our staff team in 2015/16 comprised:

Liz Windsor-Welsh  
Peter Denton  
Linda Dunbar  
Gaynor Keane  
Martyn Nolan  
Susan Pownall

Healthwatch Oldham's collaborative approach to our activities means that we have not felt the need to use our statutory powers during this year.

# Financial information 1 April 2015 to 31 March 2016

Income	Oldham MBC	£146,096
	<b>TOTAL INCOME</b>	<b>£146,096</b>
Expenditure	Office & Support Costs	£26,585
	Salaries, on costs etc.	£89,121
	Direct delivery costs	£5,423
	<b>TOTAL EXPENDITURE</b>	<b>£121,129</b>
Excess of income over expenditure		£24,967
Brought forward from 2014/15		£10,924
Carry forward to 2016/17		£35,891

## Notes:

1. Income is at a fixed level, paid quarterly, for the duration of this 30 month contract. This means that an underspend was planned in the first half of the contract's delivery period. The coming year (2016/17) is the final year of delivery under the current contract and it anticipated that the inflationary increases in staffing and operating costs will be covered by the savings made in the past.
2. An additional underspend occurred due to changes in staff hours during the year. The saving made will be invested in additional staffing in 2016/17.
3. Good practice guidance suggests that it is prudent to carry 3 months operating costs as reserves.



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