

# Making Your Voice Count

Annual Report 2017/18





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# Message from our Chair

## Healthwatch Derbyshire continues to progress strongly with increasing contact from patients and members of the public regarding their experiences of care and treatment.

Healthwatch Derbyshire remains committed to the continuation of our relationships with providers and service commissioners, open to all communication, whilst at all times remaining independent.

In the past year Healthwatch Derbyshire has conducted various pieces of themed engagement which has led to several reports being completed and presented to a range of high level strategic meetings, including Derbyshire County Council's Scrutiny Committees and the Derbyshire Health and Wellbeing Board, of which we are a statutory member.

In addition, Healthwatch Derbyshire has continued to deliver on our Enter and View function which is our legal right to enter any adult service using trained volunteers (authorised representatives) to observe the quality of care, and discuss this with those who are using the service. We have continued to recruit a diverse range of authorised representatives, and I am pleased to report that we still have two people with learning disabilities who undertake this task as part of the team.

It was particularly rewarding for me personally to hear these two authorised representatives speak at the last AGM on how important it had been for them to be involved. A proud and humbling occasion!

Healthwatch Derbyshire remains committed to promoting public involvement in Joined Up Care Derbyshire (the STP) and our Chief Executive chaired the Engagement Group during 2017 which sits alongside the STP Board.

In addition, Healthwatch Derbyshire was successful in securing a three year contract to deliver a mental health engagement service which, following consultation, has been named Mental Health Together. This development can be seen as another stride forward in our vision to promote meaningful and effective engagement.

These achievements are made possible due to the commitment and hard work of our staff who constantly endeavour to ensure people's views are heard and responded to.

I also offer my thanks to the Board of Directors who remain strong with wide ranging experience and expertise, remembering those who have left us this year, and a big welcome to those who have joined us.

John Simmons



# Highlights from our year



This year our messages  
were seen  
**107,500** times  
on social media



**54**  
volunteers donated  
**1809**  
hours of time to  
support our work



We conducted  
**27**  
Enter and View visits



Our reports have tackled  
issues ranging from  
dementia to child and  
adolescent mental health



We've spoken to  
**8995**  
In the local community

We've given  
**1593**  
people information  
and advice



# Who we are



## You need services that work for you, your friends and family.

That's why we want you to share your experiences of using health and care with us – both good and bad. We use your voice to encourage those who run services to act on what matters to you.

As well as championing your views locally, we also share your views with Healthwatch England who make sure that the government put people at the heart of care nationally.

### Health and care that works for you

People want health and social care support that works – helping them to stay well, get the best out of services and manage any conditions they face.

## Our purpose is...

To find out what matters to you and to help make sure your views shape the support you need.

People's views come first – especially those who find it hardest to be heard. We champion what matters to you and work with those who run services to find ideas for improvement that work. We are independent and committed to making the biggest difference to you.

Healthwatch Derbyshire is a Company Limited by Guarantee (no. 8413881) and a Charity (no. 1154278) set up to be accountable to the people of Derbyshire.

Healthwatch Derbyshire is commissioned to provide an engagement service for mental health service receivers and carers called **Mental Health Together (MHT)**. More about MHT can be found on page 26.



# Meet the team



From left to right:

Lee Mellor - Communications Officer, Healthwatch Derbyshire

Dan Pidkorczemny - Engagement Officer, Healthwatch Derbyshire

Tanya Nolan - Engagement Officer, Healthwatch Derbyshire

Kath Dawson - Administrator, Mental Health Together

Claire Reece - Engagement Officer, Mental Health Together

Hannah Morton - Engagement Officer, Healthwatch Derbyshire

Karen Ritchie - CEO, Healthwatch Derbyshire

Niki Glazier - Engagement Officer, Mental Health Together

Tammi Cooke - Office Manager, Healthwatch Derbyshire

Darren Greenwood - Engagement Officer, Mental Health Together

Dawn Robinson - Team Leader, Mental Health Together

Helen Henderson-Spoors Intelligence and Insight Manager, Healthwatch Derbyshire

Sharon Mellors (not pictured) Engagement Officer, Healthwatch Derbyshire

Hannah Monteiro (not pictured) Engagement Officer, Healthwatch Derbyshire

# Your views on health and care





***“Healthwatch is useful for the Trust for gaining insight in addition to the patient feedback that we gather. Healthwatch works to engage with different communities and seldom heard voices in Derbyshire.”***

Comment from HWD Annual Survey



### **Listening to local people's views**

Healthwatch Derbyshire collects comments from patients, service users and members of the public about their experiences of using health and social care services.

We analyse all comments regularly so that we can identify emerging issues, trends and themes. This helps us to see where service improvements are needed, and show where there is good practice which can be shared.

Engagement activity across the county takes place throughout the year around priorities agreed by the Intelligence, Insight and Action sub group. This group is attended by directors, staff members and lay representatives, and reports to the Board of Directors.

Sometimes engagement work is planned as a result of having limited comments from a particular service user group, or community, indicating that we need to do some targeted engagement work.

We also plan engagement activity around the volume of comments and level of interest coming into us about issues and services.

Our engagement officers target their work wherever possible at seldom heard voices, acknowledging that certain communities are less likely to interact with Healthwatch and speak out about their experiences of health and social care services than others. With this in mind, we monitor the audience type of our engagement activity when possible.

During the last year our engagement priorities have included:

- + Experiences of health and social care services in Derbyshire from the perspectives of people living with dementia, their carers and family members
- + Experiences of using CAMHS services in Derbyshire
- + Experiences of pharmacy services
- + Experiences of non-emergency patient transport services.

Reports for all these priorities can be found on our website or you can request a copy to be sent via post.

## Spotlight on Glossop

You will find Glossop at the tip of north Derbyshire on the foothills of the Pennines and is the gateway to the Peak District National Park. Glossop sits on Derbyshire county's border along with Greater Manchester, Tameside, South & West Yorkshire and Cheshire. Tameside and Glossop Cinical Commission Group has the responsibility for patient health services, whereas Derbyshire County Council covers adult and children's social services.

Glossop residents took a vote in the 1970s to remain in Derbyshire rather than becoming Tameside residents. Over the years we have been told that Glossop residents have experienced issues with accessing cross-border health services

which they feel is due to their rural location and the ever changing commissioning landscape.

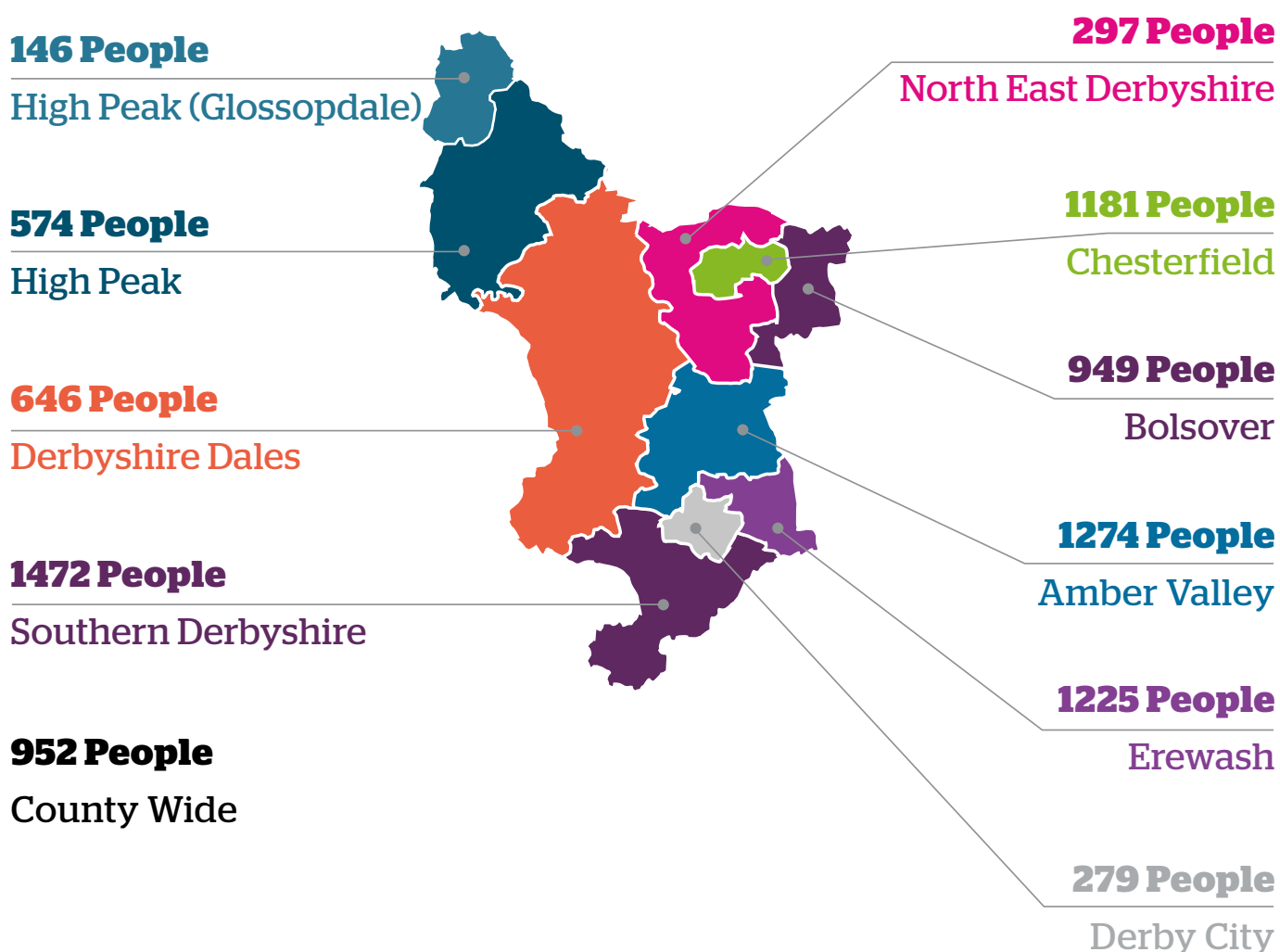
Glossop residents have told Healthwatch Derbyshire that they feel that there is a disparity of health and social care services in Glossop compared to Tameside, with residents saying,

*"Glossop is fed up with having left-overs and only being considered as an afterthought."*

Individuals are also telling us that they feel they have to push for the patient voice of Glossop to be raised at meetings saying,

*"It is always Tameside this and Tameside that, it is rare that Glossop is generally included in conversations without being prompted."*

Figure 1. Number of people spoken to in each district



As a result, we do our best at Healthwatch Derbyshire to ensure that our small team of engagement officers get out to Glossop as much as possible. Currently Dan, Tanya and Hannah Monteiro are responsible for covering the whole of the north of Derbyshire.

Across the year, considerable efforts have been made to engage with the local community of Glossop. For example, we have been talking to people at:

- + Glossop Mental Health Group
- + Glossop Market
- + The Bureau Drop in
- + Love Letters to Glossop event
- + Glossop Voluntary Sector Funding event
- + Making Space Carers Group
- + D-CAF Carers Group (Glossop Dementia Support Group)
- + Glossop library information stand
- + Self-Care Alliance event
- + Heads Together Group
- + Hadfield Stay Weigh and Play Group

During these engagements we have gathered meaningful experiences and have encouraged those who run services to act on what matters to you.

These experiences are shared with the relevant Glossop providers and commissioners e.g. GP surgeries, dentists, care homes, hospitals, CCGs etc on a fortnightly basis thus ensuring the Glossop voice is being heard.

We are continually working to strengthen existing relationships and build new ones in Glossop, especially with all the transformational changes that are taking place. We are in regular contact with Tameside and Glossop CCG and Tameside and Glossop Integrated Care NHS Foundation Trust, and we are a member of the Partnership & Engagement Network (PEN) to ensure we keep up to date with developments in the area.



## Making sure services work for you

### Enter and View

2017/2018 has been an exciting time for Healthwatch Derbyshire Enter and View activity where we have been involved with visits to a range of providers. This has included working within, Derbyshire County Council's (DCC) residential care services, Derbyshire Recovery Partnership (DRP) Treatment Centres (supporting people with substance and alcohol abuse) and visits to a range of independent care/nursing homes through working in partnership with Hardwick Clinical Commissioning Group (HCCG).

In total 27 individual visits have taken place conducted by 20 authorised representatives.

Overall the visits comprised approximately of:

- 105 hours of on-site activity in services
- 105 interviews with patients/service-users
- 82 interviews with carers/staff
- 43 interviews with relatives of those using services
- 212 recommendations for improvement.

### The purpose of Enter and View visits

Whilst each set of visits undertaken had specific focuses, all visits generally are designed to:

- + Enable Healthwatch Derbyshire authorised representatives (ARs) to see for themselves how services are being provided
- + Consider the suitability of the physical and social environments of each service
- + Assess the accessibility of services in meeting the principles of the Equality Act (2010) and implementation of the Accessible information Standards (July 2016)
- + Capture the experiences of service users, staff and visitors to services
- + Identify areas of service user satisfaction with the service
- + Gather the views of service users and families regarding the process for raising, listening to and responding to any concerns where they arise

- + Highlight any areas felt to be in need of improvement
- + Identify aspects of good practice in the delivery of the service.

The sheer volume of visits undertaken does not allow for a detailed breakdown of all visits. There were recommendations made across all of the 27 visits undertaken!

The quantity of the recommendations does not suggest by any means that services are not providing good quality care or they are of any cause for concern! On the contrary, Healthwatch Derbyshire discovered good standards of care across services visited and more importantly good levels of satisfaction from those using the services. Recommendations made, whilst on occasion included some key important issues, were often seeking clarification on findings and/or highlighting how services might take small practical steps to improve the experience of those using their services.

Healthwatch Derbyshire has always received positive responses from services to its recommendations and we have been delighted to see the often small (and sometimes not so small) changes being adopted by services to improve the experience of those using their services.

The next page is an example of this.

*"Working with Healthwatch Derbyshire is helping us to develop the services and care that our clients receive. It has given us a truly independent view of the services we deliver and has given us valuable feedback to help us improve our services. We have received praise for the quality of our care and facilities, and the excellent relationships our staff have with the residents in our homes. The Enter and View arrangement with Healthwatch is also helping us to keep our standards high by supporting our audit and quality assurance checks. Ultimately, we aim to develop our services and facilities around the requirements of our clients, and Healthwatch's involvement has helped us to achieve that."*

Joy Hollister, Strategic Director for Adult Care



# Enter & View Visit: The Grange (Orchard Care Homes)

**View the  
full report**  
online at:  
[www.healthwatchderbyshire.co.uk/2018/04/the-grange-enter-view-visit-report/](http://www.healthwatchderbyshire.co.uk/2018/04/the-grange-enter-view-visit-report/)

**Location:** Shirebrook, Mansfield

**Date:** Friday 16th February 2018

**Type of care provided:** This home provides residential and nursing care to elderly residents including those with dementia.

**Purpose of our visit:** We visited the home to see how the service was being provided in terms of quality of life and quality of care principles. Our findings were shared with the home to provide an additional perspective into identifying where the service was performing well and where improvements could be made.

## What we found ...

- Décor of ground floor was in good condition and the entrance lobby and hall welcoming, however the first floor appeared less homely and required refurbishment
- Residents and visitors praised the quality of the food
- There appeared to be a broad offer of activities provided for residents
- Good signage and visual aids across the property to support residents' needs
- Relatives raised some concerns around care plans not being followed and toileting prompts or assistance not being made frequently enough.

Below are some examples of the recommendations we made following the visit and the response from The Grange to these recommendations.

Our Recommendation	Provider Response
To advise of the processes in place to ensure that resident privacy is not compromised during bathing, showering or toileting	As explained by the staff upon visit, there is a note in all rooms to say that personal care is being given, do not enter. However, we identified that this is not always being used which was brought to the attention of staff in the staff meeting. Shower curtains are also being fitted in all shower/bath rooms.
To communicate clearly to all family members as to when 'relative meetings' are held	Relatives meetings shall be conducted once every three months. The dates of all will be published early enough to ensure attendance. Notices shall be out early and dates for the whole year shall be published. The home will try to see how the communication can be made more effective.
To monitor the cleanliness of the first floor kitchenette	This is an allocated duty of the kitchen staff now. They are advised to carry out cleaning of the kitchenette and dining area and then sign on the sheet provided.



# Helping you find the answers

*“As a Trust, we take into account feedback received via Healthwatch Derbyshire and try to improve patient experience accordingly.”*

Comment from HWD Annual Survey





### **How we have helped the community get the information they need**

Finding the right help and support for a health, social care or wellbeing issue can sometimes be challenging.

Healthwatch Derbyshire has a wide remit and this includes being a single point of contact for the public who need advice, information and signposting to services that are available.

People get in touch with us about a wide range of issues that they are facing in their lives from needing to know which dentists are taking on NHS patients to how to make a formal complaint about a service.

We also have a wide range of easy to access information available on our website on some of the most common requests for information and advice that we receive.

Our free, friendly and confidential service provides contact details for a range of services that best supports the individual's request.

Where the safety or wellbeing of a member of the public is called into question we take all possible action to ensure their needs are being addressed.

This was the case for a lady who contacted us regarding some issues she was experiencing with her supported living provider, problems with her social worker and that she was suffering from poor mental health but not receiving any support. It was apparent that she was not being listened to and had no one to turn to for help.

As well as signposting her to Psychological Therapy Services to help with her mental health issues, we were also able to refer her to an advocacy organisation to ensure her voice was heard and set the wheels in motion to ensure that she was safe and properly looked after.

We checked up with the lady over the following months to ensure that she was getting the right support and she now feels that she is in a much better place. She told us that Healthwatch Derbyshire were the only people who had listened to her and found her the support she needed.

Whilst not every case calls into question someone's safety and wellbeing, we are here to help with all manner of enquiries related to health and social care services.

If you need help, support or advice, please don't hesitate to get in touch for information on a wide range of issues.

# Making a difference together



## How your experiences are helping to influence change

During the past year we have produced a number of reports, all of which can be found on our website, under the heading 'our work', or you can request a copy to be sent via post.

Many of these reports have had a positive impact on service improvement.

One of these reports was 'Experiences of using CAMHS services in Derbyshire'.

Between May and July 2017 we spoke to 26 people accessing Child and Adolescent Mental Health Services (CAMHS) in the north of the county, provided by Chesterfield Royal Hospital, and 23 people accessing CAMHS in the south of the county, provided by Derbyshire Healthcare NHS Foundation Trust. We have highlighted here some of the issues raised and the actions that have been pledged.

### YOU SAID

People told us they had mixed experiences when talking to their GP about how they were feeling and explained they would like to see improved training for GPs.

“ There will be improvements in training and information for GPs.

There will also be a simpler way of making referrals developed for GPs, with the aim of ensuring that the child receives the right service as soon as possible. ”

Response provided by the commissioners (those who buy the service)

In the north of the county we have a new team of specialist community advisors who will support colleagues in the community, including GPs, by giving advice and training on child and adolescent mental health and supporting contact with our service.

”

Response provided by Chesterfield Royal Hospital

### YOU SAID

People told us they would like to see shorter waiting times to begin CAMHS sessions.

“ Since reading this report we have increased the level of frequency in contacting young people, parents/carers waiting for a CAMHS assessment to check if an urgent appointment is required, and to advise about what other support services are available within the area to help, support and provide advice to parents/carers. This approach commenced in January 2018. ”

Response provided by Derbyshire Healthcare

“ We continue to increase the number of children and young people accessing a wide range of mental health services including CAMHS and are actively working to reduce waiting times to the first appointment for all contracts relating to emotional health and wellbeing. ”

Response provided by the commissioners

### YOU SAID

People told us they would like better information and communication throughout the process.

“ The commissioners of CAMHS services are working with engagement and communication teams across the county to develop a strategy to address this issue.

Derbyshire Healthcare have developed a website which includes information about services and how to access them. It also has a section on frequently asked questions and useful links to external resources.

Chesterfield Royal Hospital has also developed a dedicated website, which will act as a means of sharing general information with all service users, families and carers. The comments provided in the Healthwatch report have been taken into account when designing the site. Chesterfield Royal Hospital are also reviewing the information sent out to families for their first appointment. Currently, a national CAMHS leaflet is provided; the team wish to produce a bespoke information leaflet that is more relevant locally and includes local contact details.. ”



**YOU SAID**

*The overwhelming theme from the report was that parents and carers felt like they got little support to help them with their child's emotional needs.*

**“** *From 2019 there will be a Derbyshire wide offer for parents which will include awareness raising, how to identify signs of early problems, how to provide early support to reduce the likelihood of problem escalation, how to recognise that your child needs additional support and how to get additional support.* **”**

**Response provided by the commissioners**

**“** *We are running a parent participation group which will look at issues raised by parents, including inclusion, communication, and examples of “you said we did.”*

**”** **Derbyshire Healthcare**

**“** *A Parent Support Group is being established at Temple House, Derby and Rivermead, Belper from April 2018. We will provide details in the waiting rooms and also on our website.* **”**

**Derbyshire Healthcare**

**“** *Parents and young people have reviewed all our waiting areas and started to improve information available.* **”**

**Derbyshire Healthcare**

**Healthwatch Derbyshire follow up on all actions pledged to our reports at regular intervals.**

You can read the full report on our website [www.healthwatchderbyshire.co.uk/our-work](http://www.healthwatchderbyshire.co.uk/our-work) or you can request a hard copy to be sent via post.

**“** *I am constantly impressed with Healthwatch Derbyshire. It is clear that they are independent but they are always willing to talk with commissioners and providers about the work that they do to see if there are opportunities to work collaboratively.*

*We have worked with them because of their independence and have been impressed with their work and professionalism.* **”**

Comment from HWD Annual Survey





## Working with other organisations

We work together with service providers, commissioners, regulators and other partners to bring about change.

All our reports are sent to Healthwatch England.

We are their eyes and ears on the ground providing information about people's experiences in Derbyshire.

Healthwatch England ensures that this evidence is used to influence those who plan and run services at a national level.

For example, Healthwatch England recently produced a report on findings from the Healthwatch network titled 'What's it like to live in a care home?' The work of Healthwatch Derbyshire featured in this report.



## In many instances our reports are also sent to the Care Quality Commission (CQC)

The CQC is the independent regulator for all health and social care services in England. They use our intelligence to inform their inspections of service providers.

In response to our report highlighting the experiences of the LGBT+ community when accessing health services, the CQC Primary Medical Services Inspection Team for the Derbyshire and Nottinghamshire area agreed to take the findings into account when carrying out their inspections of GP practices, particularly when reviewing patient information that is provided in the reception area and on the practice website. This was a direct result of one of the findings of our report which highlighted that there was a lack of LGBT+ related information and rainbow signs in GP surgeries to show they are LGBT+ friendly.

## We table our reports at appropriate strategic meetings

This is to trigger discussion at a high level and ensure that the voice of patients and the public informs the health and social care agenda. This includes the Health and Wellbeing Board, Local Authority Improvement and Scrutiny Committees, Quality Surveillance Group meetings, Commissioning Boards and Patient Experience and Engagement groups across the county.

To view the report online go to  
[www.healthwatch.co.uk/resource/whats-it-live-care-home-findings-healthwatch-network](http://www.healthwatch.co.uk/resource/whats-it-live-care-home-findings-healthwatch-network)

## How we've worked with our community

We owe a large part of our success to the voluntary and community sector who support our engagement officers by actively allowing us to attend, participate and engage with existing groups, as appropriate.

***"I feel Healthwatch Derbyshire has strong communication links with local communities and make their presence known at local events."***

Comment from HWD Annual Survey

## Volunteers

We also owe a large part of our success to our volunteers, who are supported by our volunteer coordinator.

Volunteering with Healthwatch Derbyshire offers an exciting opportunity to play a critical role in helping us to influence change and improve the quality of local health and social care services.

In the past year we have had 54 volunteers who donated 1809 volunteer hours.

All our volunteers at Healthwatch make valuable contributions to our work, without whom we would not be able to meet our aims and objectives. In 2017-2018 volunteers have supported us in a number of ways:

## Healthwatch promoters

Our networkers have raised awareness of HWD through the circulation of leaflets, posters and information within their local community.

***"I volunteer as a networker. My role involves me promoting Healthwatch Derbyshire in the community and encouraging people to tell Healthwatch about their experiences."***

***"The more that people speak out, the more services and authorities will take note and change."***

***"I enjoy volunteering with Healthwatch. I enjoy the variety it offers and the fun I have doing it."***

Jaime Fisher - HWD Networker/Promoter

## Pharmacy survey

In 2017, volunteers went out in the community to see what Derbyshire residents had to say about their experiences of pharmacies. The volunteers then considered the findings and produced a report highlighting good practice and suggesting possible improvements.

***"I spent the morning on Alfreton Market with one of the engagement team asking people if they used their local pharmacy and getting them to complete the survey telling us about their experience both good and bad. It was really nice engaging with the public and also having the opportunity to explain the role of Derbyshire Healthwatch and also signposting them to other agencies if appropriate. I was pleasantly surprised at the number of people who came to talk to us and it was refreshing to hear all the positive feedback they gave regarding their local pharmacy."***

Yvonne Price - Healthwatch Derbyshire volunteer

***"I was looking to volunteer and wanted somewhere where I could try new things and build up my confidence. It was important that I volunteered for a place where I would be supported."***

***"Since joining Healthwatch Derbyshire, I have had lots of different roles. I have been a networker, helped staff on a stall at a community event, helped with a mystery shop and I am also a specialist Enter and View authorised representative. Volunteering here has been great. I have learned new things, met lots of people and I am happy that I am making a difference."***

Denise Bowles - HWD Volunteer Specialist  
Authorised Representative



## Specialist authorised representatives (SARs)

Some visits are attended by our specialist authorised representatives (SARs) who are people who have learning disabilities. They have been trained since 2016 and whilst initially using their expertise with visits only to learning disability services, they now act as authorised representatives (ARs) across all services. The SARs are supported by another AR during their visits.

*“I was delighted when Healthwatch appointed SARs to the Enter and View team of volunteers, and what a wonderful, insightful and professional contribution they make. It is a pleasure to support them as they undertake their role during Enter and View visits.”*

*“As a parent carer of a learning disabled family member, I have an understanding of the support needed by a person with learning disabilities, and I thoroughly enjoy my support role.”*

Margaret Morrison - HWD Authorised Representative

## Proofreading

At HWD, we produce a wide range of leaflets, documents and reports. As such, effective proofreading is absolutely vital to ensure

that we communicate successfully with our intended readers. Our proofreading is done by Louise Cheung who is a professional proof reader but gives her time freely to HWD as our volunteer proof reader.

*“As a fully qualified proofreader, I enjoy giving documents from Healthwatch Derbyshire a final run-through before publication. I fully support the aims of Healthwatch and feel that my contribution is worthwhile and helps to get their message across.”*

Louise Cheung - HWD Proofreader

## Mystery shop

In March 2018, Healthwatch Derbyshire volunteers undertook a mystery shop at Royal Derby Hospital to test the process a patient would follow when being invited to the hospital for an outpatient appointment.

Volunteers were able to comment on their experiences from the receipt of a patient letter inviting them to a fictitious outpatient appointment at the hospital, of travel to the hospital for that appointment and navigation of the hospital site in order to find the outpatient location.

This report will be available shortly.



it starts with  
**YOU**





***STOP! I have a learning disability.***

***We teamed up with the county's Good Health Group to better support individuals with learning disabilities.***

Healthwatch Derbyshire and the Good Health Group – part of Derbyshire County's Learning Disability Partnership Board – has developed a poster entitled – STOP – I have a learning disability.

It has been distributed to people with learning disabilities to take to appointments, and displayed in GP and dental surgeries and hospitals across the county.

The poster includes prompts for practitioners and patients to agree non-verbal signals if they are in pain, want to ask a question or need further support at the beginning of treatment or a consultation.

The poster production followed our report detailing the views and experiences of people with learning disabilities and their carers when accessing health services.

A particular issue highlighted was the need for better communication and understanding when patients need a procedure, such as dental treatment, to stop.

*"The Healthwatch Derbyshire report exploring access to health services for people with learning disabilities highlighted the difficulties experienced by individuals in this respect".*

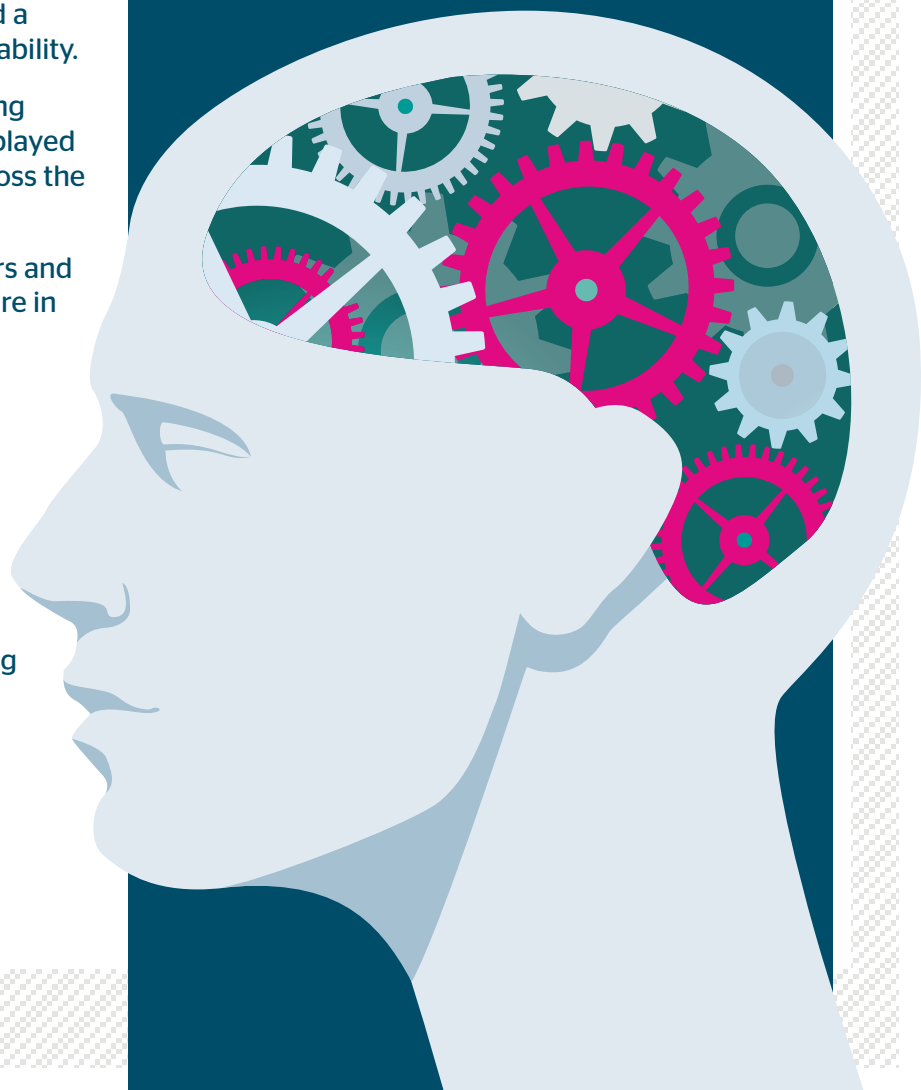
*"People with learning disabilities may express pain and communicate in a number of different ways.*

*"Our aim is for clinicians including GPs, dentists, consultants and other health professionals to stop and take a moment to understand that the patient has a learning disability and clearly ascertain the individual's preferred method of telling them to stop if they are in pain or are feeling anxious.*

*"It also acts as a reminder of the importance of listening to family carers and support workers and to consult individuals' hospital passports which may contain valuable information which could improve the treatment or consultation.*

*"We have had an excellent response from health service providers and commissioners and are confident that this poster will be widely displayed across the county."*

Karen Ritchie CEO of Healthwatch Derbyshire







## Find out how I show pain. I have a Learning Disability



STOP! I have a  
learning disability



Listen to me



Take time to read my  
hospital passport  
(If appropriate)



I may not be  
able to talk



Ask me questions  
about how I  
communicate



Take 2 minutes  
to understand me



Listen to my  
carer/support worker



Refer me to the  
acute liaison nurse  
at your local acute  
hospital (if appropriate)



Understand  
how I show pain



Stop if I show I  
am in pain



If I hold my hands up I may  
not be refusing treatment,  
I might just be anxious

Hand this poster to a healthcare professional  
at your next health appointment.

If you work in a health setting, please display this poster and share with clinicians.

Online at: [www.healthwatchderbyshire.co.uk](http://www.healthwatchderbyshire.co.uk)

Telephone: **01773 880786** Email: [enquiries@healthwatchderbyshire.co.uk](mailto:enquiries@healthwatchderbyshire.co.uk)

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**"The views and stories  
you share with us are  
helping to make care  
better for our local  
community."**

**Mike Smith**  
Healthwatch Volunteer





Mental Health  
**TOGETHER**  
Engaging with Derby and Derbyshire

# Mental Health Together



## Mental Health Together

Mental Health Together (MHT) has been set up to give service receivers and carers a greater say in the services they access; ensuring they are listened to and that their experiences are at the heart of service design and delivery.

The service started on the 1st July 2017, and is commissioned jointly by Derbyshire County Council (DCC), and the four Clinical Commissioning Groups (CCGs) in Derbyshire.

### Steering group

The team of five staff is supported in their role by a steering group made up of service receivers, carers and organisations who represent service receivers and carers. The steering group bring their expertise to the service, helping to identify priorities, suggesting best methods of engagement and evaluating the effectiveness of the work we do.

### Experts by Experience

An important part of this service is to recruit Experts by Experience. Experts by Experience are people who have personal or caring experience of mental health conditions. They help to gather information from their own communities and networks, about what people think is good and bad about services and their ideas for improvement. They then use this information to represent service receivers and carers at meetings and workshops that are looking for ways of improving services for people with mental health conditions.

## Training for mental health commissioners and STP leads

We successfully delivered co-production training on the 3rd January, 2018 to high level strategic leads and commissioners for mental health services. The training covered all the stages of the engagement and consultation process, i.e. from stating the case for change, through to public consultation, and looked at the opportunities for co-production at each stage, and the methods that can be used, e.g. during option development.

80 - 93% of people who attended reported that their knowledge had increased as a result of the training.

Next steps: A further two half-day workshops will be delivered on the 10th and 17th July, 2018. These workshops will cover methods of co-production including citizens juries, participative budgeting, appreciative enquiry and deliberative events.

Following on from this training we would like to develop an engagement strategy for transformation of services around mental health which outlines a framework for 'continuous engagement' that can support strategic leads with their change agenda, and drive improvements in services with the full involvement of service receivers and carers.

We were encouraged to see that identifying when co-production should take place has now become part of the plans of the mental health workstream of Joined up Care Derbyshire, the Sustainability and Transformation Plan for Derby and Derbyshire, going forward, with opportunities identified for the next 3-6 months, 6 months and 12 months.



### The team (left to right)

Darren Greenwood - Engagement Officer

Claire Reece - Engagement Officer

Niki Glazier - Engagement Officer

Kath Dawson - Administrator

Dawn Robinson - Team Leader (not pictured)

# Our plans for next year







### **What next?**

Over the past four years we have developed a strategy for determining the priorities for engagement work which we feel confident leads to the development of evidence-based reports, with the potential to influence and shape service design and delivery.

### **Engagement priorities**

Our priority for May – July 2018 is engagement with rural communities in Derbyshire.

We are doing this piece of work to find out more about the impact that where people live has on the health and social care services they use.

The team will be carrying out a range of engagements across rural Derbyshire, as well as conducting in depth engagement with some target areas that we have not worked extensively on before. The engagement team will also be carrying out engagement with farming communities. We will use the themes that emerge to help inform commissioners and providers about how they can best respond to the needs of people living in rural Derbyshire.

From September 2018, we will be running a creative engagement project for young people. The project topic, and the feedback we collect will be linked to, and will help to inform decisions made as part of the Children's STP Board in Derbyshire, which is a multi-agency strategic meeting informing the transformation of services for children and young people in Derbyshire.

### **Enter and View**

During 2018/2019 we will continue to carry out unannounced Enter and View visits to Derbyshire County Council run care homes. A total of 13 establishments will be visited. This is a separately funded contract that will take place in addition to our normal Enter and View activity.

We also have the capacity to conduct Enter and View visits to other services in Derbyshire. These visits are agreed by the Intelligence, Insight and Action (IIA) sub group throughout the year, in line with our Enter and View strategy, and gives a voice to residents, service users and members of the public, who might otherwise find it difficult to be heard.

### **Ensuring effective engagement with members of the public**

We are aware that due to financial pressures in Derbyshire there are plans to change or cut services in order to balance budgets. Where plans are driven by financial pressures such as this, it is important that there is still due regard given to engaging with patients and members of the public to fully explore the impact that changes might have on patient experience, and ensure that what matters to patients is taken into account.

Over the course of this year, Healthwatch Derbyshire will be working closely with commissioners to ensure that there is significant opportunity for local patients and members of the public to engage in conversations that enable them to help shape the values the CCGs use when developing and agreeing proposals.

Further priorities will be set at our IIA sub group which meets quarterly to take action on the intelligence we receive.

# Our people

***"We value the feedback we receive from HWD as it helps us understand our patients needs. Patients talk to HWD openly, which some might be reluctant to do with health care professionals."***

Comment from HWD Annual Survey



## Our Board

The Healthwatch Derbyshire Board has agreed that they will recruit up to 12 directors drawn from the population of Derbyshire and will endeavour to have a full and diverse representation.

The directors are the only members of Healthwatch Derbyshire and they are all volunteers. Appointment to the Board is undertaken usually when the number of Board members falls below eight, and is through an open recruitment process.

The Board has appointed three sub groups, Governance, Intelligence, Insight and Action (IIA) and Finance and Audit (F&A) to fulfil the aims of the strategic plan and meet its legislative requirements.

During the last year ten directors have served on the Board.

- + John Simmons – Chair
- + Madeleine Fullerton – Vice Chair
- + Sonia Rafferty – Treasurer
- + Helen Barker
- + Marie Hannah
- + Emma Hyde – Resigned March 2018
- + Helen O'Connor
- + Trevor Ride
- + David Roulston – Resigned July 2017
- + Carolin Shearer

We would like to express our thanks to all directors who served during the year.

## How we make decisions

All decisions outlined below are made by the Chief Executive of Healthwatch Derbyshire, with support from the staff team and in consultation with the Chair of the Board.

- + How we undertake our activities
- + Which health and social care services we include in our activities
- + The resources we will commit to our activities
- + Whether to request information
- + Whether to make a report or a recommendation
- + Which premises to Enter and View, and when
- + Whether to refer a matter to the Overview and Scrutiny Committees
- + Whether to report a matter concerning our activity to another person.
- + Any decisions about sub-contracting.

Many decisions will often include the full Board of Directors, or the relevant sub groups.

We involve lay representatives on the IIA sub group who serve for a fixed term to bring different perspectives to the decision making process.

We also consult with the general public through our annual evaluation survey, which includes a question on what they feel should be our priorities. Furthermore, we also conduct a workshop for the general public on what they feel should be our priorities at our Annual General Meeting.

# Our finances





Our principle funding source is our contract with Derbyshire County Council (DCC).

This year we also received funding to deliver Mental Health Together which is jointly funded by DCC and the four Clinical Commissioning Groups (CCGs) in Derbyshire. This income is shown below as 'additional income'.

We also receive a small amount of funding from DCC to visit 13 of the 26 care homes which DCC manage, to support their quality assurance processes. This income is shown below as 'additional income'.


Full accounts can be viewed on our website or you can request a copy.

For the period 1 April 2017 - 31 March 2018

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	£321,113
Additional Income	£134,596
Total income	£455,709

Expenditure	£
Charitable activities	£374,586
Management costs	£39,183
Governance costs	£7,561
Total expenditure	£421,330
Balance brought forward	£34,379

Derbyshire County Council  
County Hall  
Matlock  
Derbyshire  
DE4 3AG





***“In my organisation I can see that feedback from Healthwatch Derbyshire is noted and actioned through triangulation with other information. Feedback from Healthwatch has definitely influenced services in my organisation. Due to the situation of the NHS and social care at the moment it is becoming more challenging to influence services when very difficult financial decisions must be made.”***

Comment from HWD Annual Survey

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 /Healthwatch Derbyshire

# Thank You

We are working towards a society in which people's health and social care needs are heard, understood and met. To do this we work with a wide range of organisations and people.

Thank you to everyone who is helping us to put people at the centre of health and social care, helping their voice to shape, inform and influence service delivery and design.

We will be making this annual report publicly available by the 30 June, 2018 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, CCGs, Overview and Scrutiny Committee/s and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.



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