



ANNUAL REPORT *2019/2020*

healthwatch
Redbridge



Vanda Thomas
Vanda Thomas
HW Redbridge Chair



Cathy Turland
Cathy Turland
HW Redbridge CEO

Joint message from our Chair and CEO

Welcome to our 7th Healthwatch Redbridge Annual Report.

Healthwatch Redbridge (HWR) has continued to provide excellent public engagement services throughout this year. Later in this report you will find detailed information on the papers we have published and other work we have carried out, particularly our review of cancer services and work on the NHS Long Term Plan. Early on in the year we were able to carry out visits, including ‘enter and views’. We were happy to support North East London Foundation Trust (NELFT) with their patient involvement in mental health initiatives; we continued our well-established accessible information programme, completing the GP practice review and reporting on the Queen’s Hospital audit.

The latter part of the year saw us working with our local health partners to provide support during the Covid-19 pandemic. We joined forces with Redbridge Community Voluntary Services (RCVS) to provide up-to-date health information. We are also members of the local authority Covid Pandemic Committee which enables us to keep abreast of changing circumstances.



We are extremely proud of our work with local volunteers. Covid changed the way our staff have worked - keeping in touch with and providing our services to the public and our partners online and via the telephone. This has meant, of course, what we are unable to undertake any face-to-face engagement for the foreseeable future. However, our staff have proved resourceful and up to the task of continuing to provide our core service.

We have begun working on a survey on the provision of care home services during the crisis - one of only a few local Healthwatch to do this. We have provided interim findings but will be providing a final report early in the new year. We do hope that our partners - the Health and Wellbeing Board and LBR Health Scrutiny Committee in particular - will find this activity useful going forward and as a benchmark to any follow-up work in this area - now and post Covid.

The Board would like to extend its thanks to our staff and volunteers for continuing to provide an excellent service at this time under difficult, remote working circumstances. Board members are dedicating some time to review the way we work and the accessibility of our services going forward.



Disability Awareness Day:
Christchurch Green



Wanstead Festival



The Association of Redbridge African
Caribbean Communities:
Health and Wellbeing event

Our reports have tackled

Cancer Services
Review



Queen's Hospital
Accessible Information
Standard Review



Phlebotomy
Services within
our local Hospitals



NHS - Long Term Plan



We've spoken to
1300
people at local events



3 were visits to Queen's Hospital reviewing their
Communication Support. **2** were visits to Meadow
Court to review the new service.

We have conducted
12 visits
to local services
7 of which were Enter &
View visits to Phlebotomy
Services in local Hospitals.



Work plan 19/20

Each year, we create our work programme based on a review of issues we become aware of during the previous year. We also distribute a short survey through our membership and social media, asking people to tell us the issues they are currently concerned with. We combine this information to develop future projects.

This year, our board approved the following work programme areas:

- **Mental Health:** reviewing the access and quality of services
- **GP, Hospital and Social Care:** better access, availability and continuity of services
- **Children and Young People:** reviewing and implementing the recommendations of the Healthy Living Project (completed by HWR last year)
- **HWR Community Cash Fund:** reviewing previous projects to identify service improvements



Area 1 Mental Health:

reviewing the access and quality of services

We have supported several mental health initiatives through involvement with community and voluntary sector groups, attending events such as World Mental Health Day, Suicide Awareness and Dementia Awareness events.

Attending these events has enabled us to talk with local people about their mental health experiences, providing advice and sign posting.

Some feedback showed an increase in waiting times to access Talking Therapy services. We created a survey to engage with local people regarding their use of these services. The survey is currently live and has been shared by NELFT with services and service users.

We are actively involved in developing patient experience and involvement by working with NELFT at their patient involvement meetings. We are acutely aware that the size of the organisation (covering services from Kent to Essex and throughout London) may lead to a scaling up of engagement across a wider area and we want to ensure local people are still able to become involved.

Our CEO is now a trained a Mental Health First Aid Instructor and we will be introducing a range of MH First Aid courses for local voluntary and community groups.





Area 2 GP, Hospital and Social Care:

better access, availability and continuity of services

Accessible Information Standard (AIS)

Over the last few years, we have been reporting on the impact of the Accessible Information Standards (AIS) which identifies how NHS and Social Care services should support people with communication support needs. We were particularly interested in identifying how services were meeting the standards. We were also interested to hear from people with communication support needs.

GP AIS Review

Last year we completed a final review of GP practices across Redbridge. The review showed how our intervention had led to several areas where support had been improved including staff training, communication support and information.

We were pleased to see our work being referred to within Healthwatch England's [national response](#) to a General Medical Council (GMC) consultation on changes to how doctors use patient feedback.

An EXAMPLE OF GOOD PRACTICE

Most patients with learning disabilities could be provided with a LD passport to support their access to services. The passport provided essential information about the patient and how they wished to be treated when accessing services.

AIS review at Queen's Hospital

Queen's Hospital AIS Audit

We worked with colleagues from the Patient Experience Team at Queen's hospital to carry out an AIS audit across several departments and wards. We were helped by three of our experienced volunteers - two of whom had communication support needs. Working with British Sign Language Interpreters and staff from Healthwatch and the hospital, [a video](#) and [report](#) were published in January. Our staff and volunteers presented them to the Patient Experience, Engagement and Advisory Group at BHRUT with positive responses.

We have been approached by the Patient Experience lead at Whipps Cross hospital to discuss repeating the audit at their hospital.

Enter & View – Phlebotomy Review

From time to time, we conduct Enter and View (E&V) visits to a service ahead of a formal consultation being carried out. This year we approved visits to several blood (phlebotomy) testing centres.

Visits were carried out at the larger phlebotomy facilities at Whipps Cross, Wanstead, Queen's and King George hospitals. Information and recommendations from these visits are published as individual reports on our website and will be used to respond to the consultation.



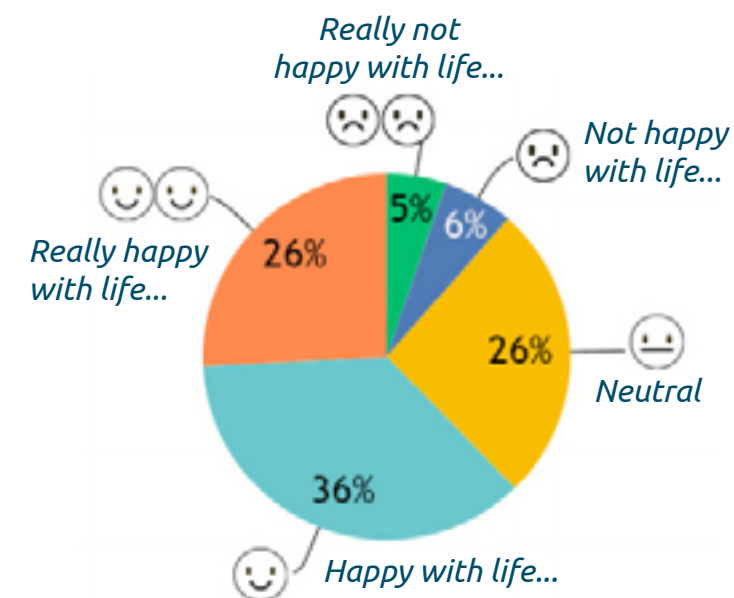
Area 3 Children and Young People: reviewing and implementing the recommendations of the Healthy Living Project (completed by HWR last year)

Healthy Living Project – our report was published in March 2019 and presented at the Health and Wellbeing Board in June (see pages 28-55). This led to an invitation to join the Obesity Strategy Working Group led by Public Health Redbridge.

HWR continues to work with the Obesity Strategy Working Group although, due to the COVID-19 pandemic, meetings are currently paused.

We are also working closely with LBR on the project 'Making Redbridge a Child Friendly Borough' and have joined their steering group to identify possible events and engagement opportunities.

Healthwatch England showcased our 'Healthy Living Project' and 'Accessing Healthcare for Asylum Seekers' reports at the National Children and Adult Services (NCAS) conference in Bournemouth in November. We have used the opportunity to raise interest from other organisations and areas in our refugee work (see page 12).



Emotional wellbeing

We asked young people to rate their emotional wellbeing by choosing from a group of smiley faces. (Healthy Living Report)

"I have really good friends who care for me a lot and my family at home help me with whatever I need"

- Survey participant

"I am in Year 13 so I understand that there will be significantly less clubs available. However, I believe that the facilities should be available for all to relieve stress."

- Survey participant





Area 4 HWR Community Cash Fund: *reviewing previous projects to identify service improvements*

Refugee Report



*Refugee & Migrant
Access to Healthcare*

Last year we supported RAMFEL to complete 20 in-depth case studies with vulnerable migrants to show the effects of access to primary, secondary and mental healthcare for vulnerable migrants. The report was included in our response to the NHS Long Term Plan review.

The findings have led us to support RAMFEL to address the current inequalities within local health and care services. We have supported them to bring the issues to a meeting with GP's and senior staff from BHR Clinical Commissioning Group (CCG) and the Joint Overview and Health Scrutiny Committee.

The report was updated and provided clear evidence that there were major flaws in accessing primary, secondary and mental healthcare for vulnerable migrants. BHR CCGs have confirmed they are in discussion with RAMFEL and Doctors of

the World (DOTW) in order to seek further support services for vulnerable refugees and migrants across the borough.

We have recently established a small working group with other local Healthwatch across the country to identify further case studies where migrants are being adversely affected by barriers to accessing healthcare.

The Redbridge Public and Voluntary Sectors' Partnership have agreed to support refugee health concerns as part of their 2020-21 work plan.

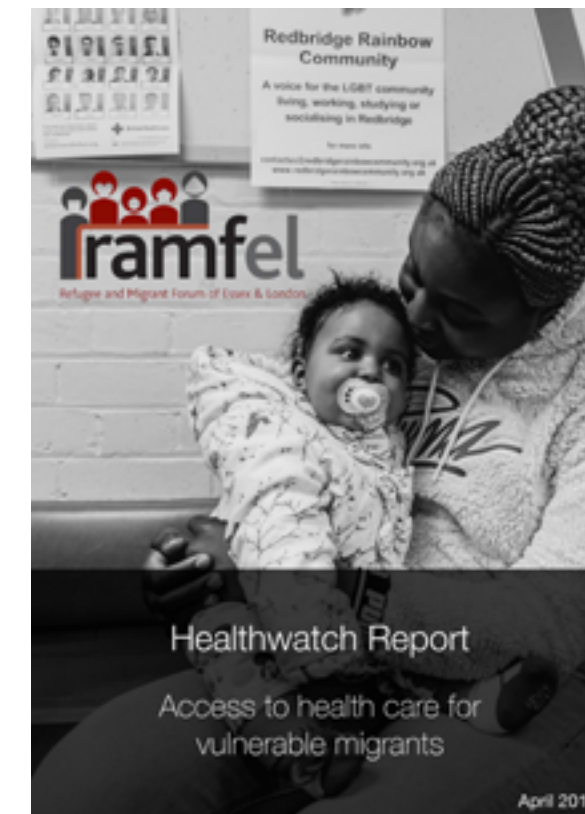
St Francis Hospice (SFH) – Working with local people who use the services provided by the hospice, the hospice gathered views of people with life limiting illnesses about end of life care and treatments they have received. They have also identified gaps in End of Life care services. The report has been shared with BHRUT as they begin a review of local cancer services.

One Place East (OPE) – report provided on the accessibility and ease of navigation of the local health and social care hubs for people with learning disabilities. The report was also republished as an update on access for people with LD regarding 'one step access' into services. We are hoping the council will support OPE to re-audit their hubs to ensure the

recommendations made within the report have been addressed.

Our CEO attended the first 'Accessibility Customer Voice Forum' convened by LBR. The forum was aimed at making sure staff are aware of the Council's offer for people with disabilities or accessibility requirements.

Findings from these two reports have been shared with BHRUT external consultants as they review the Integrated Care System currently operated by BHRUT/LBR and NELFT.



Additional Reports

During April and May 2019, we were commissioned by Healthwatch England to gather feedback regarding the NHS Long Term Plan. The published report should inform the development of NHS England's Long Term Plan. We worked as part of a wider footprint of other local Healthwatch across North-East London. As a group we decided to focus on the following themes of prevention, personalization and primary care services.

NHS Long Term Plan

Working with organisations and individuals in Redbridge, we carried out a mixture of individual surveys and focus groups to gather responses.

There were a number of themes such as the access to GPs (long waits for appointments or not being able to book an appointment at a suitable time). Staff and volunteers held 5 focus groups and completed 302 surveys.

Online access was also a main concern as some people found it inaccessible. Feedback from the Deaf Empowerment Society was extremely poor in regards to the continued problems faced by deaf people accessing services.

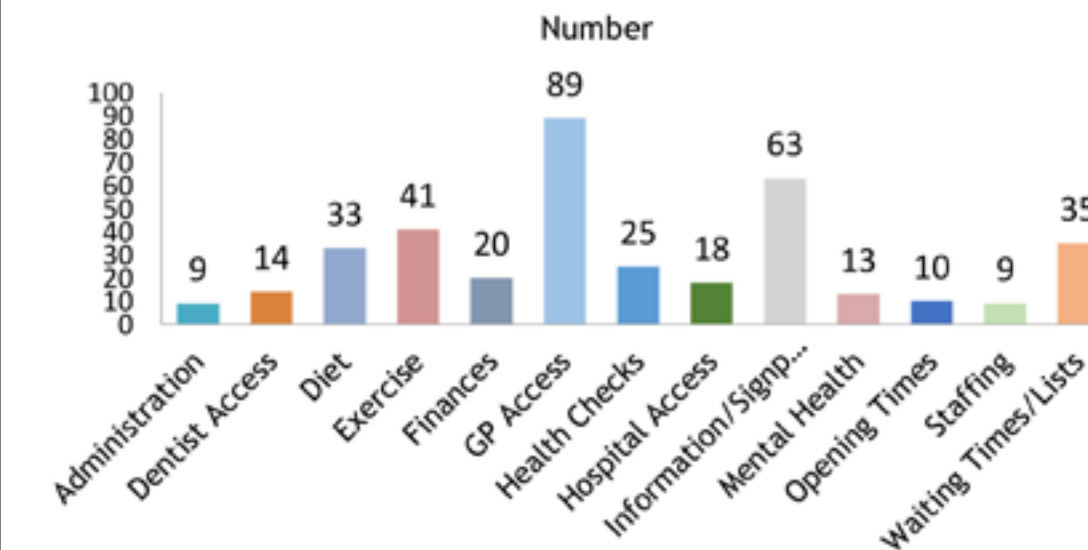


"I am a competent and willing computer/app user, but many people are not, and I feel they are discriminated against by the current focus on and preference for online access."

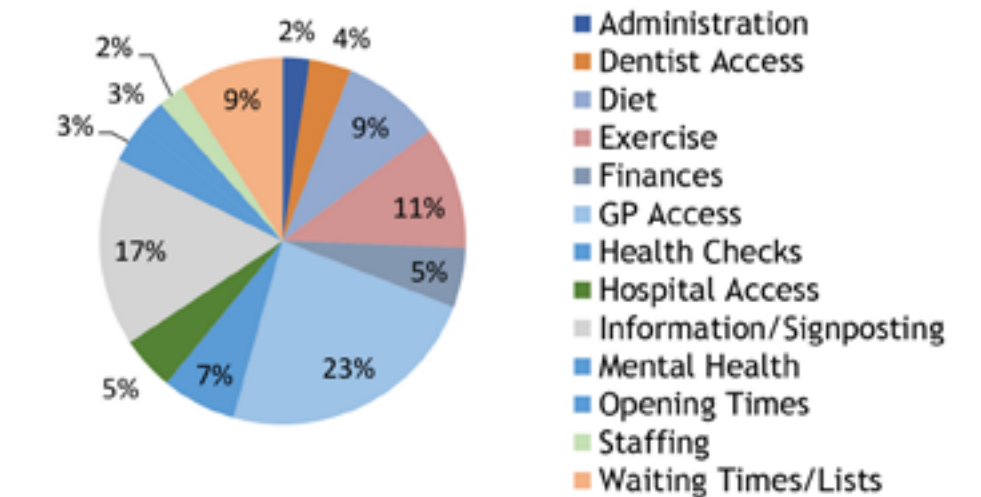
"If you want to see a GP you have to wait at least 2 weeks"

"My main comment is about waiting lists for medical appointments. Not long ago I waited 5 weeks for a local GP appointment"

1.4 Tell us up to three things the NHS and its partners could do differently to help you stay healthy and well.



Themes providing the most comments overall



Total comments: 441

Interpreting Services Review

supporting the CCG to review Interpreting Services at GP Practices in Redbridge.

We have worked with local people to understand why some people use the services why others do not.

We were only able to run one (AWAAZ) out of a potential five focus groups before sessions had to be cancelled due to the Pandemic. We have included findings from work over the last year with the DEAF Empowerment Society and RAMFEL.

We also had a number of online responses from Action on Hearing Loss. The report is in progress; however the findings will be more limited than we would have liked.



“Accessing healthcare in Ilford is not good, a lot of problems, no interpreters.”

“It comes down to communication. Clear, information being provided. Given medication, but don’t understand how to take it.” - BSL patient

“Language is a major barrier for non-English speakers. I find it difficult to know where to go or find the location of the GP.” - RAMFEL survey participant

Suggested recommendations

Healthwatch Redbridge made the following recommendations based on our findings:

- 1. Ensure all GP Practices are aware of and can easily access appropriate interpreting services.*
- 2. Ensure patients and carers are made aware of interpreting services so that they can request the most appropriate service.*
- 3. Ensure all GP Practices follow the Accessible Information Standards¹ to enable deaf people to have equal access to health services.*
- 4. Encourage the CCG to engage regularly within diverse communities to identify whether their needs are being met through appropriate*



Cancer Services – Chemotherapy Review

Working with the Joint Health Overview and Scrutiny Committee (JHOSC) and Healthwatch colleagues from Havering and Barking & Dagenham, we held a focus group in March with 20 participants to review the changes made to the chemotherapy services at BHRUT

The chemotherapy review report was also included in our response for the national Long Term Plan review.

The report was presented to the JHOSC and a dialogue continued with BHRUT whilst they responded to our recommendations. The response was passed to the JHOSC for comments.

We are acutely aware that there are pauses in cancer services and therefore we have agreed with our Healthwatch colleagues that we will continue to review the services once the pandemic has reduced.



Accident and Emergency

The main concern to emerge from the event was the apparent lack of familiarity of staff in both Urgent Treatment Centre and the mainstream Emergency Departments, with the specific healthcare needs of patients undergoing treatment for cancer.

'I went to A&E after my third (chemotherapy) treatment as my temperature had soared. I had to explain the issue to four doctors! They had no knowledge of the risk to oncology patients.'

We recommended, as a matter of urgency, clinical leads from urgent and emergency care meet their counterparts in oncology to agree protocols for dealing with cancer patients who hold red cards and require urgent or emergency treatment to ensure that their cancer treatment is not compromised in any way.

Chemotherapy Appointments

Some patients told us they were still concerned that their appointments were being booked too early and they were left to wait for 2 or more hours before their chemotherapy medication is ready.

We recommended that the system for booking chemotherapy appointments is reviewed to ensure patients are booked in appropriately and not made to wait unnecessarily. Patients should not have to wait for long periods of time when they could be booked in later in the day.

Cedar Centre

We were concerned that the diversity figures presented by the Trust are not representative of the local populations particularly in Redbridge and Barking & Dagenham. Although we are aware a patient has the choice to use these services

We recommended that the Trust review the types of services being offered to identify why they are not being used by particular community groups.



Our Volunteers

We would like to thank our 27 volunteers for their continued support during this last year. Without our volunteers, we would not be able to undertake the different projects that we do. We thank you for your time, skills, experience, insight and knowledge.

Our volunteers fulfill the following roles: Enter & View, Board members, Administration, Community Outreach, Website Support and Video Production & Editing.

A word from Miranda Peers, our Healthwatch Redbridge (HWR) Volunteer Coordinator

Due to funding cuts, we are now a smaller team - but still have targets to meet. So, we have had to be creative in meeting them. We asked our volunteers to get involved in new and different ways and they have risen to the challenge brilliantly! So, we are even more appreciative of them than before.

Several of our volunteers have helped us out during the year doing Outreach and Engagement, speaking to members of the public and gathering feedback on their experiences of using various NHS services. They have also helped out by doing Outreach and Engagement on specific projects such as the NHS Long Term Plan. Some have been involved in working alongside our stakeholders such as the Clinical Commissioning Group (CCG) and Barking, Havering and Redbridge University Trust (BHRUT) on consultations regarding policy, whilst other volunteers have sat as patient representatives on different working groups. Without our volunteers' flexibility we would not have been able to achieve these pieces of work.

Wave hello to our new volunteer Afshin

Afshin started volunteering with us in January 2020

I joined Healthwatch Redbridge as a Website Support Volunteer. I am updating documentation to help in the transfer of the current Healthwatch website to the new one. This includes reading all reports currently on the website and writing up summaries of each - which will be used on the new site.

Volunteering at Healthwatch Redbridge is a very rewarding and interesting experience. The staff here are very friendly and instantly make you feel at home.

My main aim when applying for this position was not only to gain valuable work experience within my sector (IT) after a career break, but also to help my local community.



Healthwatch and beyond...



Monazza

Monazza started working after being a volunteer with Healthwatch Redbridge (HWR) for two years.

I am working on the cancer screening programme from Community Links on behalf of the NHS.

The screening programme includes breast, bowel and cervical. We make calls to patients from surgeries to remind patients of their participation in the programme. I also handle a lot of data. It gives me the opportunity to work and maintain home life too. There is an immense amount of training too. To ensure that correct information is being given to patients.

I think HWR gave me the opportunity to gain confidence, get updated on several areas in health and social care.



Hyacinth

Hyacinth has started part-time work alongside being a volunteer with Healthwatch Redbridge (HWR).

My new job is being an outreach worker for HIV in Redbridge. What I would like to achieve with this job is that the community becomes more aware of the potential danger of HIV, and that they need to get themselves checked before it is too late. Help them to get the answers to some of the questions which form the stigma. That people will overlook the stigma of HIV and look more toward prevention.

My work with HWR has enabled me to understand the necessity of information sharing. The importance of people getting information regarding their health for which they can act on.

Our plans for next year

Every year we encourage local communities to get involved and tell us what they feel we should concentrate on in our work plan

Over the previous year, we looked for issues and concerns that have been highlighted through direct contact with us or through other organisations. We also looked at issues we have found (such as the concerns raised with us about communication problems at GP practices or through the report engaging with refugees and migrants).

We presented the results of our engagement findings and used these to support the development of our work plan for this year. However, during March 2020, the issue of the Coronavirus/COVID-19 pandemic took hold and we have revisited our work programme to consider the extensive changes to our working practices.

We will also review our policies and procedures to ensure they are fit for purpose and reflect the changes we are seeing in our society, beginning with our equality and diversity policies.

Our work is currently being completed online through social media which is different from our normal activities. As part of the national review of patient engagement throughout the pandemic, we will conduct an independent COVID-19 Information Survey and care home review.

We are reviewing several potential projects for the coming year working independently or with different statutory partners:

- Video information – creating more short accessible videos to respond to issues or provide information
- Redbridge Safeguarding Adults Board – possible review of the effects of safeguarding on individuals (using the 'Making Safeguarding Personal' national review)
- Public and Voluntary Sector Partnership (PaVSP) – we have recently confirmed that the health issues of refugees and migrants has been added to the PaVSP work programme for next year
- LBR – Working on #letstalkindependence with other community organisations to identify accessible information (online and in print)

We will continue to review our work programme and revise areas where the HWR board considers appropriate.



Our finances

The Healthwatch Redbridge Board consists of 7 people who are full members of the charity and volunteers. Each Board member brings their personal knowledge and experience to the charity. Skills such as financial management, communication, business development and lived experience; are essential to running Healthwatch Redbridge successfully.

Our Board members (Trustees) meet monthly in public with the minutes being published on our website. Trustees are responsible for ensuring the charity is properly run and controlled.

Income	
Healthwatch Contract:	£ 116,400.00
Surplus HW Income from 18/19:	£ 59.00
Additional Income:	£ 8,233.00
Total income:	£ 124,692.00

Expenditure	
Staffing:	£ 89,000.00
Operational:	£ 3,274.00
Office:	£ 32,481.00
Total expenditure:	£ 124,755.00
Carried forward to 20/21:	-£ 63.00

Report does not include audited accounts for this year. These will be presented at our next AGM.



Contact us

If you have a query about an NHS health or social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone.

Healthwatch Redbridge is here for you.

Address:

1st Floor, 103 Cranbrook Road
Ilford, IG1 4PU

Phone number: 020 8533 1236

Email: info@healthwatchredbridge.co.uk

Website: www.healthwatchredbridge.co.uk

Twitter: [@HWRredbridge](https://twitter.com/HWRredbridge)

Facebook: [Healthwatch Redbridge](https://www.facebook.com/HealthwatchRedbridge)

Our annual report will be publicly available on our website by 30 June 2020.

We will also be sharing it with Healthwatch England, CQC, NHS England, Redbridge Clinical Commissioning Group, Redbridge Overview and Scrutiny Committee, 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.

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