



Healthwatch Liverpool
Annual Report 2016/17



Contents

Message from our Chair.....	3
Message from our Chief Executive	4
Highlights from the year	5
Who we are.....	6
Helping you find the services you need.....	8
What you asked us about	11
Your views on health and care.....	12
Making a difference together	18
It starts with you.....	20
Our plans for next year	22
Our people.....	26
Our finances	28
Contact us.....	31



Message from our Chair

As chair of Healthwatch Liverpool, I'd like to welcome you to our 2016-17 annual report.



Lynn Collins, Healthwatch Liverpool Chair

This has been a particularly challenging year for Healthwatch Liverpool. As well as maintaining services to patients and the public, we have had to make sure that patient voices aren't overlooked in the increasingly complex and pressurised world of health and social care.

There are tighter financial constraints on health and care services, increasing demand, and a changing political landscape. Not to mention Sustainability and Transformation Plans, The Five Year Forward View, and ever-changing health and care providers both in the public and private sector.

Praise must go to the team who have made sure that Healthwatch Liverpool has remained a respected presence with the local health and care sector. We have always been ready to both listen to the patient view, and then relay this to influence the decision makers. We have continued to take a non-voting observer seat at the Clinical Commissioning Group (CCG) governing body and have been active participants in many of the CCG sub-groups. We also report into the Liverpool City Council Health and Wellbeing Board.

The role of Healthwatch is more important than ever and in Liverpool we hope we have been able to fulfil the role of patient advocate, advisor and supporter by making ourselves accessible and visible.

Regular public facing events, and 'listening days' at local hospitals supplement the telephone advice and enquiry service to make sure we speak with an authoritative voice. Staff work hard to make these events interesting and interactive, and to ensure our presence on social media is current and relevant.

The Healthwatch network remains an important part of our health and social care system, playing a vital role as our annual report shows you. We look forward to continuing to play that role.

Lynn Collins



Message from our Chief Executive



In this report we feedback on our activities in 2016-17. It feels important to set this in the context of the challenges facing NHS and care services and our concerns about the impact that this may come to have on patient care.

Liverpool has long faced major health issues. In 2016-17 some issues became more acute:

- + Challenges in the care home sector intensified;
- + NHS financial controls tightened;
- + Our acute hospitals and A&Es were busier than ever, struggling to meet waiting times targets and with the ambulance service also taking the strain;
- + Pressure grew to 'balance the books' while still meeting immediate and obvious needs.

In recent years organisations had been coming together to think through ways to respond to Liverpool's health challenges and inequalities with some excellent areas of joint work emerging. Increasing financial pressures are putting this at risk. There is no shortage of good ideas and motivation but there are now fewer resources to make things happen.

Valuing what we have - learning from what can be done better.

We do not want to forget the positives. We really do have services to appreciate and value locally. Two of our hospitals, two local GP practices and one local care home received Care Quality Commission (CQC) ratings of 'Outstanding' and patients often tell us about

excellent experiences of care at a wide range of services, singling out the level of care they receive from staff.

Learning from patient feedback is more important than ever when services are under pressure. Beyond performance statistics, it is knowing what it is like to be a user of health or care services that shows services how they are really doing, where the pressure points are and which issues need to be tackled before they grow.

Staff members on the front line go to work wanting to deliver the best care. They need and deserve our help, our praise when things go well and our honest but constructive feedback when they don't.

Facing the challenges

The challenges facing our health and care services are not going away. Budgets are likely to remain tight. We can only hope to influence what happens within the restrictions imposed by those budgets. We will keep encouraging the public to tell us their experiences of services. We will keep sharing these with services and decision makers as a reminder that all decisions need to have people at their heart. Our information services will continue to be there to guide people through the system's complexities.

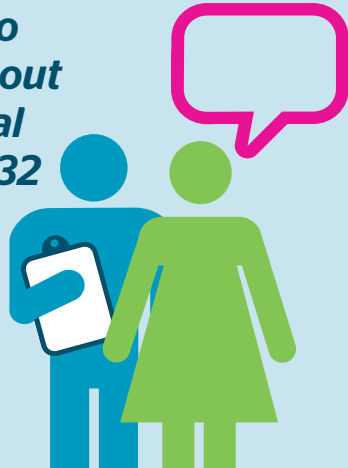
As always we need your help. When you use a service please take time to feedback your experiences to us. Your stories really can help make services better for everyone.

Sarah Thwaites



Highlights from the year

We've spoken to 1708 people about accessing dental services and 1832 people about accessing GP services.



This year we have taken 2773 public enquiries plus 4226 student enquiries.

SEARCH ENDLESSLY...

OR ASK US!



We've visited 26 local services through Listening Events and Enter and Views, where we spoke to 702 people about their experiences.



Our reports have tackled issues ranging from hospital discharge to GP continuity of care for people with long term conditions



This year we reached 261881 people on social media.



We've met hundreds of people at local events





Who we are

We all want the best possible health and quality of life for ourselves, our families and others in our communities. Healthwatch exists to make health and care services work for the people who need them. We're here to help local people understand their options, be able to make informed choices and to be listened to about their experiences, needs and preferences.

Our links to local people and communities help us to understand the needs, experiences and concerns of people of all ages who use services and to speak out on their behalf. We believe that asking people about their experiences - and really listening to what they say - can identify issues that, if addressed, will make services better.

Our role is to ensure that local decision makers and health and care services put the experiences of people at the heart of their agenda. We are uniquely placed to do this because:

- + We have an overview of health and care services. Most people and services only have a good knowledge of the parts of the system they use or work in;
- + We have an interest in every aspect of health and adult social care allowing us to see links and connections and to spot where these break down;
- + We are local but nationally connected. As a local service we are in touch with local concerns and with connections into both local communities, services and decision makers. With our neighbouring

Healthwatch and a national network behind us we can also help to influence regional and national decisions.

Our vision

A health and care system which:

- + Is stable, well-resourced and trusted;
- + Can meet the growing and changing needs of our diverse population;
- + Enables staff to deliver the best quality, joined-up care;
- + Listens to and learns from patient experiences.

Health and care staff who:

- + Receive and act on both praise and constructive feedback;
- + Know that how they do their work makes a difference and want to keep on making that difference.

Patients who:

- + Know what services and options exist;
- + Are able to make informed choices, with support where needed;
- + Feel able and willing to share their experiences to help services improve further.

A Healthwatch for everyone in Liverpool which helps make this possible.

Our priorities

We have a number of priorities that guide our work. These, together with the reasons why they are important to us, are listed below and will be covered in more detail later in the report:

Helping you find services

Gathering feedback about services

Seeing how services work

Responding to change / system issues



Members of the Healthwatch Liverpool Team at an event (l to r): Amani, Sarah, Danielle and Val



***Helping you find the
services you need***

Helping you find services

The health and care system can be very complicated. Finding your way through it can be overwhelming. By providing people with clear, reliable information through the directory and in a supportive, personalised way through our enquiry work we can make a real difference.

Our enquiry work also underpins all our other areas of work by giving us real, up-to-date information about problems that people are experiencing.

People are often unaware of what services there are or how best to access them. We want everyone to have access to the best quality local care, and knowing what is available is the first vital part of this.

Our directories and enquiries service are important because people need control over their own lives, especially their health. If people don't get timely, accurate advice their problems can get worse, making life more difficult for them and increasing pressure on services.

Online information

We collect, input and update information on thousands of services onto 3 linked online directories:

- + TheLiveWelldirectory.com provides the public with information on health and wellbeing related services and activities. It started off as a Liverpool only directory but is extending to cover the 'Liverpool City Region' with Wirral, Knowsley and Sefton now partner areas. We are responsible for collecting and maintaining the 1678 Liverpool records on the site;
- + Wellbeing Liverpool extracts mental health specific records for easier searching in times of distress;

- + The Ralfy directory provides GPs with information to help support their patients.

Services are constantly changing and we are always working to keep the information on the directories accurate and up-to-date.

Entries include GPs, dentists, pharmacies, specialist health services, care services, lunch clubs, community activities and self-help groups.



“The Healthwatch Liverpool team provide outstanding support to the Live Well directory, ensuring that it is up to date, accessible and easy to use and reflects the changing needs of the people of the city. The success of the directory is due mainly to the work of the team, contacting service providers to ensure that details are up to date, but also looking out for new opportunities to add new services from across all sectors ensuring a wide range of content to help improve wellbeing.

The team at Healthwatch have been fantastic in developing the directory, looking at ways that it can be improved to make the experience for users the best that it can be.

The team also provide excellent one to one support for those people who can't access the directory online or who are having difficulties finding what they need.” Marie Jones, Liverpool City Council

Search endlessly or ask us



Many people do not have access to the internet or in a time of stress may find a directory too impersonal. We are always happy to be the ‘human version’ of the directories for our enquirers.

In 2016-17 our enquiry service dealt with 2773 health and social care enquiries, plus 4226 student enquiries at welcome and fresher events at universities and colleges, which included 2519 students asking for information on, or registering for GP or dentist services.

People contact us looking for information for themselves, family members and friends, or for people they are supporting professionally. We provide information in a way that suits their circumstance and we pride ourselves on providing a personalised service to meet individual needs.

Finding the right options

People can contact us about anything that concerns health or wellbeing. Sometimes people aren’t sure what it is that they are looking for or what services might be out there to help. We are happy to listen and take it at the person’s own pace, sometimes over several calls or emails. We often suggest possibilities that the person hadn’t even considered and always remember that people are individuals who need to make their own decisions about what will work for them.

Our team are selected for their ability to relate to people on a human level, with understanding and compassion. People who call us are often relieved that we aren’t a call centre but ‘real’ people who know the system and the city and can help them see their way through the maze. We are often thanked for how quickly we can provide relevant and detailed information and how much of a difference our approach makes.

Often our enquirers go on to contribute to our work by providing valuable feedback about services they have accessed. This gives us early warning of where things might be going wrong in a service and so informs the other areas of our work.

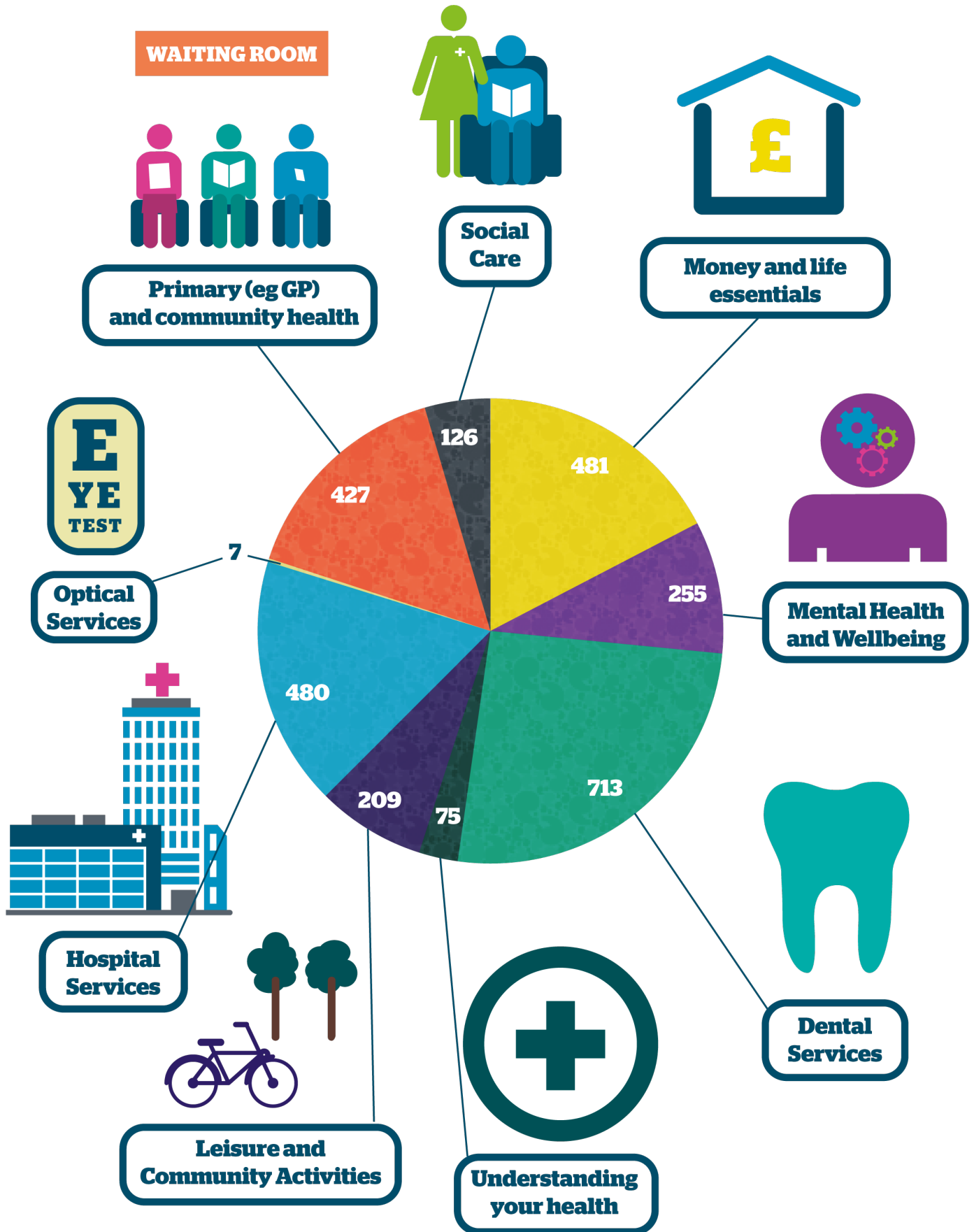
“I’ve been going around making phone calls for two days and nobody has been helpful. You’re the only one who has made me feel a bit more relaxed about things. Healthwatch is a life saver, finding your number was the best thing I ever did, many, many thanks”. A member of the public

“Thank you so much for all of your help with my requests. I really appreciate the effort and time you have taken and I will pass this information onto my lady who will be very grateful!” Talk Liverpool

“I am really grateful for your service. It has helped to talk. I feel lighter knowing that there are things I can do and that there is support available to get through the maze.” A member of the public



What you asked us about



Liverpool

Tell us what you really think,

*Your views on
health and
care*

...d, we want to
what you really think
ut health and care
ges in Liverpool.

...we can actually
hing about it.

...we can make
for everyone.

7 77 007

(same as to a local line)

healthwatchliverpool.co.uk

Hearing what people really think

Because patients are the experts in how services work for them, decisions made without hearing the patient perspective miss a vital part of the picture.

People can be wary of speaking up. We can give people from across Liverpool's diverse communities a 'safer' way to share their experiences and the assurance that doing so makes a difference.

This is one of our core priorities on which our work is based.

We speak to thousands of enquirers each year. As well as giving them information to help resolve their concerns we try to use their feedback to help prevent the same problem happening to others.

We supplement this with other ways of hearing what people think about health and care services. For example we:

- + attended 57 local community events;
- + held 16 Listening Events in health settings;
- + visited and talked to community groups;
- + used paper and online questionnaires;
- + supported this with conversations with a network of contacts and our social media followers.

We have engaged many diverse groups and communities to hear views and experiences, and to ensure we give everybody equal opportunity to have their voices heard. We know that equality is not as simple as treating all people the same as some people and groups have particular barriers.

As well as the general public we also actively sought out:

- + those whose views are often overlooked

- + those who are particularly affected by this year's priority topics such as hospital discharge and continuity of care for people with long term conditions, This includes older people, carers and members of peer support groups.



Over the past year, we have visited many communities engaging disadvantaged or vulnerable people in our work. These visits and events aim to enable them to have a strong voice in sharing their views and experiences to:

- + discuss our work and what we do;
- + take enquiries about health and social care services;
- + help people understand the benefits and aims of sharing their views, and how their experiences can make a difference;
- + offer an opportunity for people to share their patient experiences.

Examples have included:

Older people

Typically our need for services increases with age and so we tend to speak to a high proportion of older people in our Listening Events in health settings. To ensure that we don't exclude other groups of older people we also visited older people's social groups, a dementia cafe, sheltered housing and care settings. We are also the point of contact for patient surveys for the Frailty Service.

Black, Asian, Minority Ethnic and Refugee communities (BAMER):

Visiting a range of community groups and events to gather people's views including Building Links Women's Group for the Somali Community, PAL Multicultural Centre Women's Group, a health event at the PAL Centre, a Sepas event for the Persian Christian community as well as various Polish community events drawing on the trust established by our Polish team member.

In previous years we received a significant amount of negative feedback about a GP surgery in a very multicultural area of the city. Sharing this feedback with decision makers was vital. That surgery transferred to a different provider this year and we returned, with multilingual community partners, to talk to patients and confirm that patient satisfaction had improved.

People who are deaf or have hearing impairments:

We attended events at Merseyside Society for Deaf People following which we:

- + liaised with PALS at Broadgreen Hospital to improve access to screening;
- + helped with concerns over accessible food labelling for healthy eating.

People with mental health issues:

- + We are long-term and active members of the local Mental Health Consortium and chair their BAMER group;
- + We liaised with mental health service user groups around access to mental health and emotional wellbeing services, as well as physical healthcare services.

Children and young people

It is essential that young people be given an opportunity to have their voices heard in a meaningful way and for these views to be given due weight.

We engage with children at family events through our child-friendly Healthwatch Heroes activities and resources. These also allow us the opportunity to talk to their parent while the child is happily engaged.



At our Listening Event at Alder Hey Children's Hospital, we spoke directly to young patients where appropriate, with additional information from their family members. Our questionnaires were amended to be child friendly for this purpose.

We have engaged with young adults through colleges and universities including our facilitation of a Student Health and Wellbeing Group. The group is attended by student union officers and includes a standing item regarding student feedback. We also have stalls at student freshers and welcome events enabling us to introduce ourselves to thousands of young people, many of whom are new to Liverpool.

What we've learnt from visiting services: Listening Events

In all of our work we carefully choose the most suitable activity to meet our objective. With NHS services we have found that open Listening Events are generally the most effective ways in which we can talk to patients and gather a clear picture of the service's activities. Because many of our hospitals serve people in neighbouring areas too, we work closely with our partners in Healthwatch Sefton and Knowsley and have worked with them on hospital listening events.

During this year we carried out 16 Listening Events which included the following services:

Acute and Specialist Hospitals

- + Aintree University Hospital
- + Alder Hey Children's Hospital
- + Broadgreen Hospital
- + Liverpool Women's Hospital
- + The Walton Centre

Mersey Care services

- + Mossley Hill Hospital
- + Windsor House inpatients wards
- + Drug Alcohol Recovery Team (DART)

Liverpool Community Health services

- + Old Swan Walk-in Centre
- + Smithdown Road Children Minor Injuries Centre

7 Health Centres - which house between them 16 GP practices, 4 dentists and various community health services.

- + Breeze Hill Neighbourhood Health Centre
- + Fiveways Family Health Centre
- + South Liverpool Treatment Centre

- + Kensington Neighbourhood Health Centre
- + Picton Neighbourhood Health Centre
- + Mere Lane Neighbourhood Health Centre
- + Townsend Ln Neighbourhood Health Centre

As well as talking to patients in waiting or entrance areas, we visit wards and clinic areas to talk to as wide a range of patients and their families as possible about their experiences.

During these events we have used carefully considered questionnaires to give people a chance to freely share their experiences and to provide patient insights into some key areas that services and decision makers are grappling with.

The feedback from these events is analysed, shared with the service and the public.

Alder Hey - feedback about the quality of care was overall extremely positive, especially regarding the care of very sick children who have prolonged admissions and treatments. There was however some learning to be done about how difficult it is to be the parent of a child in such circumstances and suggestions from families of ways in which their needs could be better met.

"They talk to my son. Even at 16 months they addressed their questions to him and then I can fill in if he can't answer. If I have a question I can just ring up and ask them and they don't make you feel like you're being daft. They are absolutely fantastic and we are very much involved in his treatment plan. He loves coming here now, it all makes so much difference." Alder Hey patient family member

Liverpool Women's Hospital - a chance conversation on the day of the Listening Event led us to return to the hospital twice to talk to families who use the Honeysuckle Bereavement Service which supports people who have lost a child due to miscarriage, stillbirth or early neonatal death. Feedback from families about the support they received from this team was so positive that we nominated the service and the families for a national Healthwatch award.

“The service is invaluable - They value every loss no matter how early or late. They helped me through the most traumatic time of my life.” A user of the Honeysuckle Bereavement Service at Liverpool Women's Hospital

Because of the specialist nature of some of Liverpool's hospital trusts they serve a wide geographical area. We therefore not only engage service users who live within Liverpool, but also people living elsewhere who travel to use specialist services. During these listening events we had meaningful discussions with 673 service users, visitors or members of staff; and of these, 112 (16.6%) did not live inside the Liverpool City Council boundary.

What we've learned from visiting services: Enter and View Visits

We have focussed our Enter and View activity this year on Care Homes. There are major pressures in the care home sector in Liverpool and it is vital that, alongside our partners, we keep a close eye on the sector and those who rely upon it. Enter and View visits provide the best opportunity to engage with care home residents who are often isolated and would not otherwise be able to share their opinions and experiences.

This year we have visited:

- + Brooklands Nursing Home
- + Greenacres Care Home
- + Woolton Manor Care Home
- + Finch Manor Nursing Home
- + Broadway Nursing (twice)
- + Mersey Parks Residential and Nursing Home
- + Stapley Residential and Nursing Home
- + Mayfield Court
- + Cressington Court Care Home

One of the Care Homes we visited was as a follow up visit to see what changes had been made following our earlier recommendations.

Another visit was to a Care Home which had received an Outstanding rating from the CQC and we wanted to see what good practice we could hear about and share.

Our other visits were conducted on a range of homes to help us to understand how the services work and in response to feedback received.

Some of our visits are unannounced (the home is not notified in advance). This allows us to promptly visit and observe the home environment.

Some of our visits were announced in advance allowing time for the home to advertise our visit to family and friends of residents so we were able to get a broader range of feedback about the service. In addition, we always leave feedback sheets and cards for people who can't attend on the day of our visits but still have comments that they would like to share.

As part of each Enter and View visit we:

- + Talk to residents, where they are able and willing to communicate, and to visiting relatives;
- + Tour the premises;
- + Speak to the Manager and/or other key members of staff.

We made 10 recommendations and we will follow up on some of these with return visits to these services in the coming year.

We feedback on our visit to the home, sharing our report with them for comment. If a visit highlights a potential safeguarding issue we report this. Copies of all our reports are sent to the CQC and any concerns have been raised with the Local Authority, Liverpool CCG or the CQC.

The good practice we have highlighted will be shared with Care Home managers and providers by way of a newsletter we are to start sending this coming year.

We have shared our concerns about the care home sector with the public via our website and social media. Healthwatch Liverpool manager Sarah was also interviewed on the BBC Radio Merseyside breakfast show about this issue.

Care home staff are on the sharp end of caring for some of the most frail members of our city with extensive health needs. The staff often have really valuable insights into how the health and care system works in an effective joined up way and where it doesn't. We have opportunities to raise these concerns in a strategic way that the homes might struggle to do.

Information from these conversations also feeds into our understanding of issues like hospital discharge and provides real life examples to indicate where the health and care system is making progress and where it is still falling short.

In a single day two homes shared with us concerns about end of life care. They had noticed an issue affecting some residents who were arriving after a stay in hospital to be supported to live their last days and weeks as peacefully as possible. They did not always have clear discharge paperwork such as a 'Do Not Resuscitate' (DNR) form. This brings a risk that the resident may be subjected to uncomfortable and unwanted medical procedures. We raised this with the CCG who are currently working on a project to improve the coordination of care for end-of-life patients. We were also able to share feedback about the much more effective discharges to homes from Palliative Care wards so that lessons can be learned and shared.

“It’s as good as anywhere. We get allocated carers but the carers only look after their own, if they see a red light but it’s not one of theirs they don’t answer. My daughter has raised concerns as sometimes I get left on the toilet - I like a bit of dignity.” resident

“I feel really supported. Been here 13 years and it feels like a community in here, like chatting and get on with each other really well.” resident

“The staff are brilliant, honestly, I’d recommend them and I’m not just saying that. They make me a cup of coffee everyday which makes me as a visitor feel welcome.” friend of a resident

Tell us
what you
really

Search endlessly
ask us

How GP or dentist?

Looking after somebody?

*Making a
difference
together*



Working with other organisations

Student health and wellbeing

With four universities attracting students from across the world, students make up a high proportion of the city's residents and health service users. We were concerned that students who weren't registered with local GPs were struggling to access health care when they developed physical or mental health problems, or using the 'wrong' service for their needs. We set about developing constructive relationships with students and our universities, bringing them together with key health partners for honest and informative discussions. In this year:

- + We presented a paper on student health to the Health and Wellbeing Board and secured an ongoing reporting link between the Student Health and Wellbeing Group which we helped set up and the Health and Social Care Scrutiny Committee;
- + We attended 9 'Freshers' events across the 4 universities to engage new students on health issues, helping them to access local GPs, dentists and other health services and to hear their thoughts. Across these events we spoke to 4226 students;
- + We brought partners together to plan joint work, share best practice, understand each other's priorities and constraints.

“Healthwatch were pivotal in the development of the Student Health group and these forums are so useful for sharing information, best practice and identifying future opportunities to encourage joined-up working (that actually works!) Healthwatch have been an indispensable resource and a really valued partner” Bernadette McGrath - LJMU Student Advice and Wellbeing Service

Hospital discharge

Public feedback showed that people's experiences of being discharged from hospital is sometimes far from ideal – delayed, rushed or disjointed, at times even dangerous.

We collected views and experiences from the public and staff in all our local hospitals, bringing together a temporary Hospital Discharge Network to share information, best practice as well as highlighting areas of concern.

“A frustrating experience! After seeing a doctor and being discharged I waited another 4 hours before pharmacy provided medication. It meant that I didn't get home until evening, and blocked a bed for another day. The cardiac rehab nurse phoned the day after discharge to make contact and start the rehabilitation. This part of the process was reassuring.” patient

The picture that emerged is a complex one. Liverpool's specialist hospitals serve a wide geographic area making discharge more complicated. Liverpool's acute hospitals are increasingly busy and having to find ways to meet increasing demands with limited resources. As the population ages, more people need home or residential care services in place before they can be discharged but with social care budgets drastically reduced and care home beds in short supply, patients can stay in hospital for longer than their health requires.

By sharing patient experiences we help ensure that the work that is underway to improve 'patient flow' has patients and not just targets at its heart.

It starts with you

healthwatch
Liverpool

Meet friends,
go out &
Cook. Good!
Keep

#NameOneThing



@HW_Liverpool

#ItStartsWithYou

GP services - The Gateway to the NHS

GP practices are a key issue for the public. In the past we had concerns raised with us about the quality of a number of GP practices.

We spoke to patient groups and held Listening Events in GP practices to encourage the public to speak to us about the good and the bad of their experiences. We heard from patients with multiple long-term conditions that they often prefer to see the same doctor for continuity. Some patients though have been able to give examples of how good record keeping and high standards allow them to feel confident to see any doctor in the practice knowing that they will be aware of the key issues in their care and that they won't need to repeat these each time.

We have also helped to pilot Patient Opinion (recently renamed Care Opinion) in GP practices, providing patients with a way to leave their feedback and for staff to respond.

We share the feedback we receive with decision makers so that it can inform their work.

We have also been establishing better working relations with a number of GP practices where we are now able to contact them direct to help patients get issues resolved early and hopefully prevent patients needing to make a complaint.

With changes in some providers during 2016-17 leading to a reduction in expressions of concern from patients of those practices we have been able to change our focus for 2017-18.

Now the main concern expressed by patients about GP services is access to appointments with some patients reporting having to phone over 50 times to get through and other

patients reporting difficulty getting prompt appointments once they do get through. Surveying patients on this issue and making sure that their feedback is heard is a priority for our work this coming year.

Care homes

Through our enquiry work we hear how difficult it has become to find a suitable care home vacancy when needed and about people's concerns about safety and quality in some homes. This can delay discharge from hospital and increase hospital pressures.

We have:

- + Made care homes the priority for our enter and view visits;
- + Worked closely with partners to share the information that members of the public tell us. Where this has included safety concerns it has influenced the timing of quality and enforcement inspections;
- + Spoken out about our concerns around the challenges facing care homes, the instability of the sector and the risk if more homes close.
- + Joined the Quality Assurance Group, Care Home Needs Assessment Group and Liverpool Care Home Improvement Programme Group to assist with work to monitor, support and develop care homes.

Care homes remain a top priority for our work this year.

#ItStartsWithYou - without your stories we wouldn't know where to focus our work to have the biggest impact for people in Liverpool. A big THANK YOU for your input this year and please keep telling us what's important to you in 2017-18.



***Our plans for
next year***

Our priorities for 2017-18

GP Access

This year we are visiting GP waiting rooms to talk to patients about their experience of trying to make appointments and their priorities. Major changes are planned around GP provision as part of the national 'GP Forward View'. We can help get the patient perspective heard in the local implementation of this.

We are also looking into what people do if they can't get an appointment with their GP. Together with other local Healthwatch, we will be visiting all A&E services on one day to gather a snapshot of people's reasons for attending and what proportion of attendances were influenced by difficulties getting appointments. Visits to Walk-in Centres will follow.

Care homes

Care home provision in Liverpool is under increasing pressure from a number of factors including quality, quantity and finances. Our information helps people needing a care home place for themselves or a family member to make more informed choices in a difficult situation. The feedback we gather helps us to spot problems at the earliest opportunity and our contact with care homes and partners can help tackle problems and enable the sharing of best practice.

This year we will be:

- Improving information available to the public
 - Producing a guide to help people choose a care home.
 - Working with care homes to improve the information they include on the directories adding information which is important to people looking at care homes such as top up fee charges
- Improving the information we provide to care homes
 - looking at our reports, CQC reports and other research to highlight areas of good practice
 - sharing information on this good practice, resources and ideas to help improve the lives of people living in local care homes.

Students

Students are a large and increasing proportion of the population who often don't know where to turn when they experience health problems. We can inform them and the organisations that support them about appropriate sources of help. By encouraging students to use the right services at the right time, they are more likely to get the help they need and less likely to overuse other services such as A&E. This is good for the population as a whole.

Seeing and influencing how the whole system works

Poor coordination between services is a common cause of the problems that people experience. At the strategic level, there is now an emphasis on health services "working as one" but most routes for patient feedback (such as the Friends and Families Test) only cover individual services and most professionals are still used to seeing only one part of the picture. The Healthwatch overview perspective is unusual and one of our great strengths. We will seek to make the most of this opportunity to help join services more effectively.

A changing NHS

The NHS is going through a period of massive change – facing increased needs, tighter financial constraints and service changes. It is more important than ever that Healthwatch ensures the patient perspective be heard.

5 ways to expand our reach

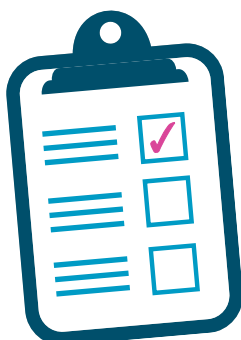


1.

Making a film exploring the experience of giving feedback about NHS services

2.

New translated publicity



3.

Getting out and about for Enter and Views and Listening Events to see services first-hand and to speak to service users, their friends and family

4.

New posters in Hospital Trusts to promote relevant local Healthwatch



5.

Care Home information pack

Our people

healthw@tch
Liverpool
Let's
Talk
#askHWL

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Liverpool
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Informing our decision making

Our priorities and activities are informed by what the public tell us. Our enquiry service, our contacts with community organisations and the people we talk to at listening events give us a good insight into what matters to people. We are always looking to hear from more people. Our volunteers and community contacts are a vital part of helping us do this.

Our activities are also informed by what we learn about forthcoming changes that we know will impact on people's care in the future. We can't wait until after changes take place but need to make sure that people's needs are taken into account throughout the planning and decision making process. This is more important than ever given the challenges facing the NHS at the moment and the pace of planned changes.

Ways of getting involved with our work

We are very grateful for the assistance of our volunteers. We know that not everyone has the time to become a volunteer and we want to make sure that other people also have a chance to contribute in the way that suits them best.

Healthwatch contact - people can keep in touch with our work through mailings, website and social media and can then get involved when an issue arises that really grabs them. These people are well placed to help pass on details of our work when a friend, relative or colleague runs into a difficulty or has experiences to share.

Healthwatch champion - We are now recruiting HW champions. Champions are making a more definite commitment to share information with others and to explain our work. To help with this, champions will be able to attend workshop sessions with our volunteers on subjects like "explaining the

work of Healthwatch" or "understanding the health and care system".

Healthwatch volunteer - help with a range of tasks and activities depending on their interests, skills and availability. These include attending events, gathering patient feedback, carrying out office based research to support our day-to-day work.

We are also happy to work with other organisations to help their volunteers become Healthwatch champions and even to share volunteers where appropriate such as in our work with Liverpool CCG volunteers.

This year we collaborated with Liverpool CCG and the Liverpool Volunteer Centre to provide 3 training sessions to CCG volunteers focusing on gathering patient feedback. As a result of this, 7 CCG volunteers worked with us and joined us to take part in activities such as the Listening Events mentioned previously.

"I come from a health and social care background. Healthwatch has provided an opportunity to use my skills and experience to help others" volunteer

"It's a privilege to help be the voice for people who might not otherwise have been heard" volunteer

Volunteers Amani and Danielle helping out at a university freshers fair



Our finances



As this report has highlighted, the health and care sector in Liverpool has become more complex and faces growing pressures. This means that the services provided by Healthwatch Liverpool have never been more necessary and there is no shortage of work to be engaged in. Indeed even after increasing our staffing levels last year, we receive more requests for work than we have been able to accommodate. It is a constant balancing act to do as much as we can reasonably manage without reducing the quality of our work or stretching the service to the point where we lose our reliability.

We have continued to make staffing our top priority area of expenditure and keep our staffing structure under review, increasing our staffing again towards the end of this period.

We still employ 15 people but now with more staff hours (12.5 FTE) and a different mix of skills and responsibilities to respond to the changing environment. We now have 2 joint Co-ordinators who oversee our information service and co-ordinate our day-to-day work. We also have a Communications Lead. As in all small organisations, staff multi-task and these team members also provided experienced input into our enquiry service.

To accommodate our growth, towards the end of this year we began planning a move to a larger office space in the same building and moved during June 2017. We have also been investing in staff training, particularly for our new specialist roles and will continue to do so in the coming year.

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	401,543
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Expenditure	£
Staffing costs	311,528
Office costs	26,016
Operational costs	47,114
Total expenditure	384,658



Contact us

Healthwatch Liverpool is delivered in partnership between Laridae CIC and LCVS.

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We will be making this annual report publicly available on 30 June 2017 by publishing it on our website and sharing it with Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, 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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healthwatch Liverpool

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