



Healthwatch Islington Annual Report 2016/17



Contents

Message from our Board	3
Highlights from the year	4
Who we are.....	5
Your views on health and care.....	7
Helping you find the answers	10
Making a difference together.....	12
It starts with you.....	14
Our plans for next year	16
Our people.....	18
Our finances	20
Contact us.....	22



Message from our Board



Olav Ernstzen, Chair of our Board

We are pleased to introduce the 2016 Healthwatch Islington Annual Report. It's been another great year for our volunteers with Faiza Al-Abri being recognised as Islington Young Volunteer of the Year and Healthwatch Islington being presented with a national award for its overall approach to volunteering.

We've spoken to hundreds of local residents about their experiences of local services, focussing particularly on the needs of people with autism, refugee and migrant communities, and older people. We've also delivered projects working with parents and new mums, and supported a borough-wide patient group to have their say.

We've been working closely with our neighbours in Barnet, Camden, Enfield and Haringey to champion residents' views within North London.

We are really proud to say that we've made it easier for local residents to access their social worker. We recommended a series of changes to the council's phone system. The council implemented these changes and greatly valued the feedback from Healthwatch.

"Thank you so much for undertaking the mystery shopping. It is really good to see that there has been improvement after our new implementations. We will be sharing the learning in our service managers meetings and will suggest that they implement similar measures to ensure effective call response to the public."

We've also developed strong links within the voluntary and community sector, helping to strengthen the voices of local people. And we continue to gather the views of local residents to make sure that our work is informed by their ideas.

I would like to take this opportunity to thank our volunteers for their continued hard work. Their contribution is fundamental. We hope you'll enjoy reading the report. If it inspires you to join us, our contact details are on the back page.



Highlights from the year

This year we won national recognition for our approach to volunteering.



Our volunteers help us with everything from mailings to mystery shopping



We've visited 22 local health and care services



Our reports have tackled issues ranging from autism to podiatry



We've spoken to 279 people from marginalised groups about challenges accessing services



You've spoken to loads of local people at our community events





Who we are

Health and social care works best when people are involved in decisions about their treatment and care. But this doesn't always happen. We are here to help ensure that those designing, running and regulating health and social care listen to people's views and act on them.

There is a local Healthwatch in every area of England. We are the independent champion for people using local health and social care services in Islington. We listen to what people like about services and what could be improved and share their views with those with the power to make change happen. We also share them with Healthwatch England, the national body, to help improve the quality of services across the country. People can also speak to us to find information about health and social care services available locally.

Our sole purpose is to help make care better for people.

How do I benefit from what Healthwatch does?

- + You can speak to us about what you think of local services - good or bad.
- + We are interested in everybody's views, from all parts of the community.
- + Where possible, we will let you know when changes are planned to services in your area and help you have a say.
- + You can speak to us to find information about health and social care services available locally.

Why should I get involved?

Speak to HealthwatchIslington about your experiences of any NHS or social care service, and help make them better for you, your neighbours, friends, and family. It's quick and easy to get in touch - you can phone, email, chat online, or meet us in person. Just a few moments of your time could make a big difference.

"I've been waiting for a podiatry appointment for 15 weeks. I should get seen every 10 weeks."

"There are not enough social workers assigned to people. You want to talk to someone who knows about your situation. Everytime I ring up I'm assigned to the duty social worker - they don't know me."

"There was a long wait to see the paediatrician. The appointment really helped. They were very good at explaining her condition, helping me understand and calming my nerves."

Our Vision

- + Local health and care services which are informed by evidence from the local community, and a community which is informed about local health and care services.

Our board of directors use their expertise to ensure that Healthwatch Islington is fulfilling its legal and statutory obligations.

Our Mission

- + To collect knowledge that reflects the diversity of needs and experiences within the borough and encourages people to feedback their honest views on services,
- + To use the evidence we gather to influence service delivery, provision and commissioning for the benefit of local people, and so that people have a better experience of services.
- + To reach out to and empower our local community to be informed about local services, involved in local services, and exercise choice in taking up services.

Our Board of Directors (from left to right): Jana Witt; Phillip Watson; Shelagh Prosser; Med Buck; Rose McDonald (and not pictured: Olav Ernstzen; Bob Dowd; Clara Boerkamp)



We can
help you...

Are you struggling
with social care?

***Your views on
health and care***



Listening to local people's views

Healthwatch Islington welcomes the views of anyone living or using services in our borough. We carry out extensive out-reach with community partners and through information stalls in community settings in order to hear from our local population.

We log and analyse these views, reporting them to providers and commissioners with recommendations for change:

As reaching people who are 'harder to reach' takes more time, we have taken the view that the number of people reached is less significant than the diversity and vulnerability of those contacted.

General work

- + Our Steering Group meetings are open to the public and we encourage participants to give their views and raise questions. We include presentations from local service providers and commissioners in order to give people the opportunity to hold those responsible for services to account. These have included discussions on Sustainability and Transformation Plans and Whittington Health.
- + Each month we hosted at least two community stalls at various venues around the borough and a stall at Cally Festival which is attended by over 7,000 people.
- + We reached 720 people through our activities and captured their views through focus groups, interviews and on-line.
- + Anyone who uses services in our area is invited to give a view. However, we will refer them to their Local Healthwatch for signposting queries.

Targetted work

- + We specifically sought the views of people from Black and Minority Ethnic communities through our work with consortia partners.
- + We carried out specific work on Autism and Learning Disability and engaged Deaf people in our patient group meetings. People with a wide range of disabilities have taken part in our work throughout the year, and we aim to be as accessible as possible.
- + Each year we take part in carer's week with local partner Centre 404. We attended our local Carer's Rights Day to speak to carers. We also engaged carers in our Autism work and through the work of our refugee and migrant community consortia.
- + We work with partner organisation Help On Your Doorstep to knock on thousands of doors in local estates to reach people who may not find us otherwise.

Of those who recorded their age, 12% of respondents were 18 or under (the same as recorded in the 2011 census). In particular, we engaged young people in our Autism work and our general out-reach activities.

56% of respondents who recorded their age were of working age. Although this is lower than the 80% recorded in the census, this group were well represented in the discussions around extended GP access and mental health.

Older people were over-represented in our work, 23% of respondents who declared their age were over 65 (as opposed to only 8% in the borough as a whole). We particularly engaged this age group in our work on podiatry, home care and residential care.

What we've learnt from visiting services

Mental health day services

We were approached by residents worried about cuts to mental health day services. We visited the services to gather views on how people benefitted from using them and what they valued. People enjoyed the range of activities and the help offered by staff. They would like to see services open for longer.

These views will now inform the council's consultation on day care provision.

Podiatry

Knowing that waiting times for accessing foot care are at an all-time high, we visited local health centres to talk to users. They talked about the anxiety caused by a confusing appointment system, and frustrations about getting an appointment. In general they praised the care provided.

We are now working with the provider to improve the clarity of appointment letters and the Trust is reviewing its system for allocating appointments so that those patients needing an appointment within six weeks are given a time-slot as they leave their previous appointment.

Reaching your social worker

Although we didn't visit social services, we did mystery shop their telephone services. A local resident had told us about how hard it was to reach her social worker. She was aware that this must also be an issue for other social care users. Following a mystery shopping exercise the council implemented a series of changes to how calls are handled. We mystery shopped again several months later and saw a marked improvement. See page 15 for our case study on Angela, who raised the alarm.

Our Enter and View team

We'd like to thank the volunteers who make up our Enter and View team:

Mark Austin
Sue Cartwright
Jenni Chan
Viv Duckett
Olav Ernstzen
Alison Fletcher
Lynda Finn
Frank Jacobs
Elizabeth Jones
Rose McDonald
Helen Mukerjee
Geraldine Pettersson
Jane Plimmer
Natalie Teich
A representative from a local mental health service user group

*Helping
you find the
answers*

healthwatch
healthwatch.co.uk

Steph Edu...

How we have helped the community access the care they need

We want to empower local people to get the best from local health and care services. We work with a range of local partners to extend our reach through community meetings, door-knocking and presentations. The majority of contacts come through our partners.

This year we provided information and support to over 550 residents.

- + We provided support to 180 residents directly (of which 94 were referred by partner organisations within the community sector)
- + We provided information and advice to a further 279 residents through signposting activity carried out with our voluntary sector partners. We also increased the capacity of these partner organisations to respond to future queries.
- + We gave out over 100 'goody bags' of useful information as part of International Women's day events we attended. We also provide information about services and entitlements in all conversations with our local community.
- + We had more queries about hospital care and home care services than other services.

Case study

One Islington resident told us she was being treated by the Rheumatology Clinic at University College Hospital for a debilitating back issue. She was having to take monthly injections and have weekly physiotherapy to manage her pain. She was finding it difficult to bathe, get ready in the morning, bend down, and sometimes walk.

The partner organisation who first alerted us to this case reported that she had 'no clue about services that are out there', and that she needed help to arrange an Occupational Therapy assessment for a walk-in shower.

Healthwatch called her to discuss her needs. She said that she suffered from the long term chronic condition Ankylosing Spondylitis. She told us that hot water really helped her condition, but she was often in agony and struggled to get in the bath. We suggested a referral to the Navigator service at Age UK. We also explained that there are multi-disciplinary teams based at GP surgeries in the borough who address people's health and social care needs in a joined up way, with GPs and social care professionals working together.

She became nervous about the idea of social services becoming involved. She explained that her children helped her at home. She felt she might be criticised for this. Healthwatch agreed to talk to her again if she changed her mind. She called back a week later, advising us that she had spoken to her GP and she would now be happy for the referral to be made.



***Making a
difference
together***

Virginia

How your experiences are helping influence change

We spoke with Islington residents with Autism Spectrum Condition, and with their families. We heard from 60 people in total. We were particularly interested in learning whether they thought that more could be done to make health and care services accessible.

- + We have recommended more training and support for professionals, more appropriate and readily available information for families and carers, and adherence to the Accessible Information Standard so that appointments are more accessible.

Working with other organisations

We were successful in achieving additional funding for Diverse Communities Health Voice. Diverse Communities Health Voice is a partnership of 10 Islington based organisations: Arachne Greek Cypriot Women's Group; Community Language Support Services; Eritrean Community UK; IMECE Women's Centre; Islington Bangladesh Association; Islington Somali Community; Jannaty; Kurdish and Middle Eastern Women's Organisation; Latin American Women's Rights Service; and Healthwatch Islington.

- + 207 respondents gave the partnership their views on Pharmacy; Well-being; Accident & Emergency; Interpreting services; and referrals to specialist services.
- + 257 people received information to help them access services including what is on offer in local pharmacy and extended hours GP services.

We share reports and findings with the Care Quality Commission and pass them specific service information to inform their inspection visits. We have shared reports and findings with Healthwatch England, including experiences of dentistry for the Healthwatch England Dentistry report, and experiences of accessing services for the Healthwatch England report on children and young people with autism.

All providers and commissioners responded to our formal requests.

How we've worked with our community.

- + Volunteers have taken part in mystery shopping, Enter and View visits and helped us with interviewing local residents.
- + We provided a training programme for parents of children with special educational needs, equipping them with the skills they need to go out and gather views on services from other parents.
- + We are working with the Bright Beginnings project. This project works with new mums from migrant communities, and gathers their feedback on maternity services.
- + The Chief Executive and Chair of Healthwatch Islington represent us at the Health and Well-Being Board. Both are briefed in advance so as to be able to contribute effectively.



It starts with you

Case Study

Thanks to Angela, phoning the social work team at Islington Council is far less stressful than it used to be.

Angela is disabled and relies on support from social services to provide and coordinate her care. She got in touch last year to tell us it was very hard to get through to her social worker or occupational therapist on the phone, nor was it possible to leave a message.

- + This made it much harder than it should be to cancel or rearrange appointments.
- + She was left on hold for long periods of time.
- + Angela told us that a voicemail service would be welcome, particularly one that people could call in the evening when many phone providers offered free calls.

Sharing your experience with us is quick and easy and, as in Angela's case, it could make a big difference.

Healthwatch decided to investigate further. Our staff and volunteers made nearly 300 phone calls to the social work team, spread across two mystery shopping campaigns.

Like Angela, we found that it was not easy to leave a voicemail message if your social worker was not answering the phone. Instead, you'd be placed in a queue to speak to a member of the business support team. But they did not have the capacity to handle the volume of calls that were being forwarded. We experienced very long waits, and often our calls would not get answered at all. We shared what we learned with the service.

"I waited a long time before, an unacceptable amount of time. Sometimes forty minutes and once it was over an hour."

Having some independent feedback from Healthwatch gave the Adult Social Services team the opportunity to look again at the way they managed phone calls.

They made many of the changes we recommended, and as a result:

- + Far fewer calls go unanswered
- + All staff now have answerphones
- + Recorded messages make it easier to tell that you have reached the right person
- + The wait to speak to the business support team has been greatly reduced

The Adult Social Services team were very happy with the outcome. They are sharing what they've learned with the managers of other services at the council, and suggesting that they make similar changes to improve the way they manage phone calls.

"It's much better now. At least you get through and there is somewhere you can leave a message. If I call after 7 pm, calls are free so it saves us from having to make such expensive calls like before"

Angela Dobson, Healthwatch champion



***Our plans for
next year***

What next?

We will continue to talk to our local community about their health and social care needs using a range of techniques:

- + We will mystery shop services to see if they are meeting the Accessible Information Standard. The Accessible Standard, developed by NHS England, tells organisations how they should make sure that patients receive information in formats that they can understand and receive appropriate support to help them to communicate. Initially we will develop an Autism-friendly checklist and mystery shop services using these. We will then extend this to cover other disabilities.
- + We will gather views on day services for mental health service users. We will build on our work from this year, visiting services and gathering users' experiences.
- + We will work to ensure that local residents' views influence the development of care closer to home networks.
- + We will continue to seek out opportunities to engage children and young people. This year we are considering school nursing with partners at Whittington Health.
- + We will gather views on re-ablement services for people leaving hospital.
- + We will support a borough-wide patient group. Through this group we will gather feedback on the quality of services and on the commissioning intentions of local health partners. We will be supported by Manor Gardens Health Advocacy Project and Every Voice (Islington's Black and Minority Ethnic Forum) to ensure that this work has a diverse reach.

- + Building on our work this year, we will train more parent researchers to carry out peer research and act as role models and champions to other parents.
- + We will audit the Bright Beginnings service for new parents from migrant communities. Now in its second year, Bright Beginnings delivers services to pregnant women and new mothers in the borough. We will work with them to audit the effectiveness of the service and the impact on its users over the next two years.
- + We will work with London Metropolitan students to gather research to feed in to the borough's Joint Strategic Needs Assessment.

We will develop our partnership with our local university.





Our people

Decision making

Healthwatch Islington is led by volunteers and by the local community. Decision-making by our Steering Group reflects the views of our community. Our work plan brings together community views and local priorities for maximum impact. It is finalised and monitored at a series of public meetings.

How we involve the public and volunteers

The public and volunteers are involved in all aspects of our work. Our Articles of Association, developed by volunteers on our Steering Group, are on our web-site. Our vision and mission were developed with input from local residents, members and volunteers.

Volunteers contribute hundreds of hours of expertise each year. Without their valuable contribution we would not be able to carry out the work that we do.

- + Our Steering Group (24 seats) is elected by our community members (750 people) with space for some co-options to increase diversity. Membership is open to anyone with an interest in local health and wellbeing services. Individuals and community organisations are represented.
- + Our work plan is based on feedback from the local community. We develop a list of key themes and then ask members and local voluntary sector partners for their views on these themes.
- + Any work planning, reports or recommendations we make are discussed and approved by the Steering Group.

- + The public determine how we will undertake activities and what services to focus on, whether to request information and whether to refer matters elsewhere.
- + Decisions about Enter and View are approved by the Steering Group but made by a specialist team of trained Enter and View volunteers.
- + Decisions about subcontracting are made by the company directors who are also volunteers from our local community and members of the Steering Group.
- + We follow the principles of Investing in Volunteers and seek feedback from those involved on how we can improve their experience and develop the organisation.



Our finances

Income	£
Funding received from local authority to deliver local Healthwatch statutory activities	165,479
Additional Income	76,695
Total income	242,174
Expenditure	£
Operational costs	57,455
Staffing costs	147,819
Office costs	25,555
Total expenditure	230,829
Balance brought forward	11,345



Contact us

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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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