



# Annual Report

2018-19





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# Message from our Chair

We are delighted that this year is the start of a new Healthwatch contract for us and thank Tameside Metropolitan Borough Council for making a commitment to us through to 2024. This means we can plan our work in ways that enable us to engage in some longer term change programmes as well as the day to day quality monitoring we routinely undertake.

The increased integration of health and social care in Tameside has provided new opportunities for us to work with a wider range of partners and our staff team have worked hard to make the most of these. The work we have done with Millgate Healthcare Partnership is just one example of a new partnership we have been able to make which has led to improvements for Tameside residents. Austerity is still very much a factor for health and care services. Even in areas where additional resources have been promised by Central Government, pressures are tight.

Workforce is also an increasing pressure on the system - even if services had more money they wouldn't be able to recruit all the staff they might want. We know that there are local, regional and national shortages in many key clinical staff areas. These are the result of three main factors.

Firstly, there have been periods over past years when the health and care system has not recruited and trained as many clinical staff as we now know that we need. The training process takes many years so anyone starting training now could take up to 10 years to be fully qualified.

Secondly, we have many Consultants, GPs, nurses and social workers who are becoming eligible for early retirement or reaching state pension age. As

these people leave, especially through early retirement, many are willing to take on some part time work but this does not always fill the gaps left in the system.

Thirdly, front line social care staff have often been amongst our lowest paid staff. Funding pressures can make it difficult for care homes and home care providers to retain these staff and in some organisations this can mean there are high levels of staff turn over.

In terms of these challenges we see our role as doing a number of things. As a priority, we need to understand what impact this has on the quality and safety of services people receive - and to share this information with the relevant service commissioners and providers. We also need to work with service providers to make sure that their staff hear the many positive comments we are given about the care that people receive. Care staff often work under huge pressures and we think it is really important for them to be told when people appreciate their hard work.

In addition, we need to work with all our partners to understand how the new staffing models they are developing will ensure that people get timely access to good quality care. This includes changes like some patients being seen by an Advanced Nurse Practitioner instead of a GP or some patients being directed to a Primary Care led service rather than an A&E Consultant. In these cases, we believe it is important for us to understand why these changes are needed and then to help our local population to know how to get the most direct route to the care they need, when they need it.

I hope you agree that this report shows the great depth and breadth of work undertaken by Healthwatch this year. Whilst our Healthwatch Manager has been seconded to Greater Manchester Healthwatch activities, the Healthwatch Tameside team has worked with reduced management support. Our achievements are a testament to the dedication and hard work. Thanks to all our volunteers and paid staff for the fantastic commitment and hard work they have put in for us this year. We must also thank Viki Packman who served as part time Interim Healthwatch Manager for part of the year, including leading the process for recruiting our new Board members who start in April 2019.

It is with great sadness that I must report the passing of Hanif Malik during this year. Hanif was very active in the community. He had served as a local magistrate and as a lay member of Tameside and Glossop Primary Care Trust. He played a leading role in a number of local voluntary and community groups, including helping to set up an exercise group for men from our local South Asian community who were recovering from heart surgery. We will miss Hanif's passion and insight but we will always remember the great contributions he made.

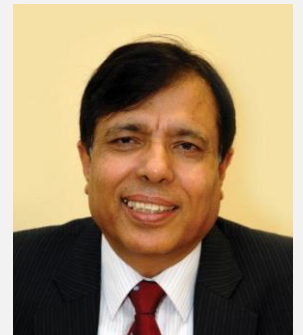
My final thanks must go to all our outgoing Board members who ended their period of office in March 2019. Many of them have not only served Healthwatch since our inception in 2013 but were also active in the LINK and the Community Health Council prior to that. Our retiring board members are:

Dorothy Cartwright  
Frank Downs  
Murtaza Husaini  
Gideon Smith

Many thanks to everyone for your support and hard work.

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**Dr Kailash Chand OBE**  
Healthwatch Tameside Chair



# About us

## Healthwatch is here to make care better

We are the independent champion for people using local health and social care services. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. People can also speak to us to find information about health and social care services available locally. In Tameside we provide help to people who are going through the formal NHS Complaints process, as an additional service to our local community. Our purpose is to help make care better for people.

### Our vision is simple



Health and care that works for you. People want health and social care support that works - helping them to stay well, to get the best out of services and to manage any long term health conditions that they live with.

### Our Purpose



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

### Our approach



People's views come first - especially those that find it hardest to be heard. We champion what matters to you and work with others to find solutions. We are independent and committed to making the biggest difference to you.

## People are at the heart of everything we do

We play an important role bringing communities and services together. Everything we do is shaped by what people tell us. Our staff and volunteers identify what matters most to people by:

- + Visiting services to see how they work
- + Running surveys and focus groups
- + Going out in the community and working with other organisations

Our main job is to raise people’s concerns with health and care decision-makers so that they can improve support across the country. The evidence we gather also helps us recommend how policy and practice can change for the better.

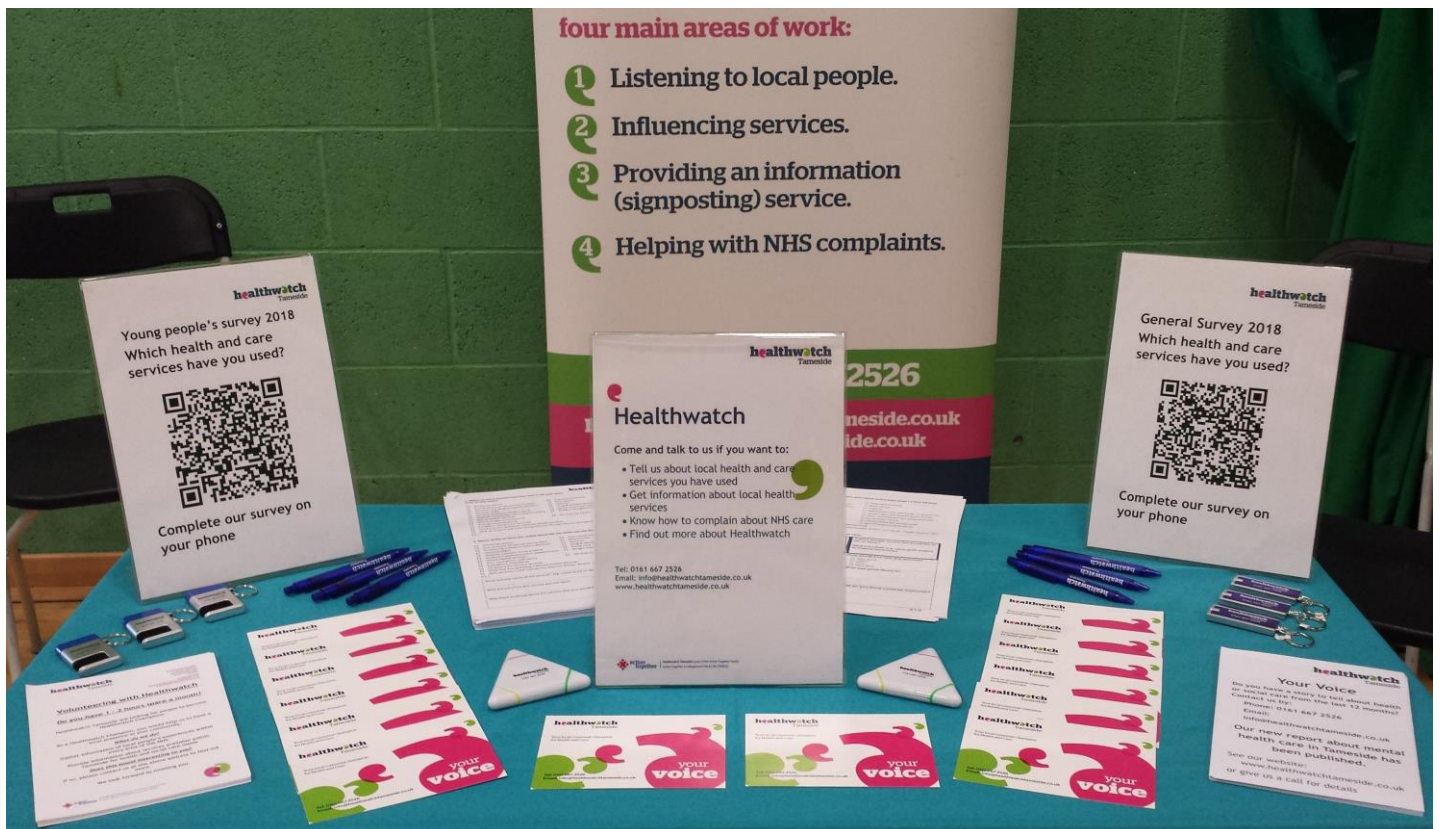
Legislation means that Tameside Council has a duty to commission us to work in the area. We have a duty to be independent of all local health and care organisations but to work with them in the best interests of local people. We set our own priorities and decide what we are going to work on - what you tell us is an important part of this. At the same time we have to take into account things that we know are likely to change because our

best opportunities to influence organisations often arise at the time they are planning their changes.

Our staff this year have been:

- + Ben Gilchrist
- + Julie Beech
- + Karen Whitworth
- + Elaine Kilburn
- + Carolyn Shaw (from January 2019)
- + Ayesha Khatun (from March 2019)
- + Viki Packman (Interim management support)

Due to our collaborative approach to working with commissioners and providers of local health and care services, we have not had need to use any of our statutory powers during 2018/19.





**Highlights from  
our year**



## Engaging with people and services

One key highlight for this year is the work we undertook with Millgate Healthcare Partnership. This work was undertaken collaboratively with the Millgate team. This is highlighted in Case Study 1 below (in 'How we have made a difference').

Another highlight has been our ongoing involvement in mental health work which builds on work on this topic in previous years. Again, this is highlighted in Case Study 2 below (in 'How we have made a difference').

This year has also seen our first student placement (100 hours between February and May 2019), following work we undertook with Health and Social Care students and tutors at Tameside College as part of their research module. Our staff and volunteers attended lessons to talk to the students.

Feedback from the tutor at the college was very positive:

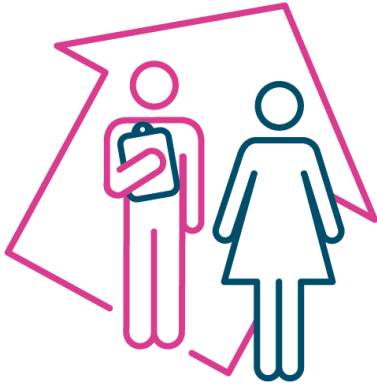
*"I would like to thank you and your team for supporting our learners to complete their research module. The learners have no doubt, with your guidance gained an insight into the role of Healthwatch and have produced some fantastic research proposals/projects."*

This year saw us deliver our 1000th outreach session. We marked this with a celebratory session at Tameside Hospital in December 2018. Through these outreach sessions we have:

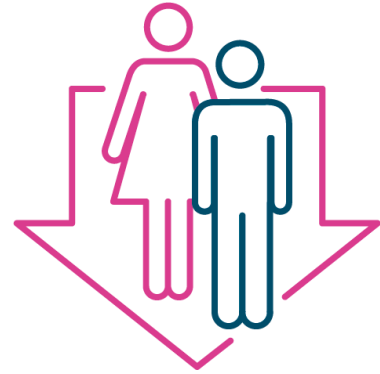
- + made contact with 23,856 people;
- + distributed 24,311 promotional post cards;
- + completed 2,011 surveys; and
- + gathered 921 patient stories.



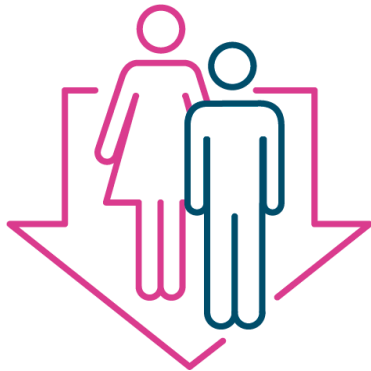
Find out about our resources and the way we have engaged and supported more people in 2018-19.



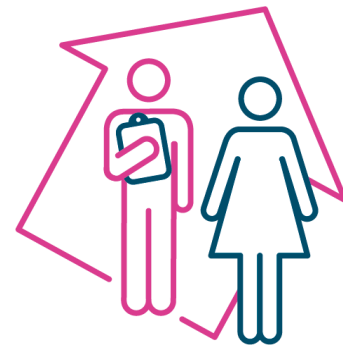
218 people shared detailed stories about the support with health and care that they had received



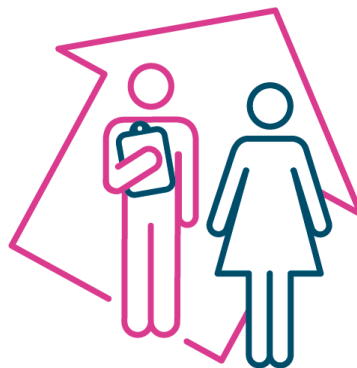
636 people completed our surveys and questionnaires



169 people accessed Healthwatch advice and information online or contacted us with questions about local support.



We sent out 15 eBulletins and paper newsletters to over 450 local people and organisations.



80 new Help with NHS Complaints clients contacted us. Our active caseload is more than 60 cases at a time.



**How we've made  
a difference**

## CASE STUDY: Primary Care responds to patient feedback

On 1st April 2017, Churchgate Surgery and Windmill Medical Practice merged, becoming Millgate Healthcare Partnership. During the 12 months post-merger, Healthwatch Tameside spoke to several people who use the practice, in their regular outreach sessions in the community. The comments were not conclusive, being a mixture of positive and negative feelings. At a Tameside & Glossop Clinical Commissioning Group primary care meeting, information was shared about various changes which had been put into place by the practice. This was in response to negative feedback received by the practice. Healthwatch Tameside considered what they had heard so far and decided to investigate more deeply. We wanted to find out whether the measures that had been introduced were having the desired effect, or whether a few tweaks may be needed.

With agreement from Millgate Healthcare Partnership, Healthwatch Tameside arranged to talk to patients. The information collected was anonymised and a report produced.

Millgate Healthcare Partnership responded positively to the Healthwatch Tameside report with a detailed action plan covering the main areas of concern - telephone access and appointment access/availability. The action plan included the

recommendations made by Healthwatch Tameside in their report, with some actions already completed, and others part of a programme to be completed in the following months. The response stated 'Thank you for your valued feedback from the patients surveyed by your team. We have very much welcomed your help and support through our merger and for the subsequent months.'

Millgate Healthcare Partnership have added a 'You said... We did....' section to their website, which can be found at

<https://www.millgatehealthcare.nhs.uk/>

A copy of the Healthwatch Tameside report can be found at

[https://www.healthwatchtameside.co.uk/sites/default/files/millgate\\_healthcare\\_partnership\\_report.pdf](https://www.healthwatchtameside.co.uk/sites/default/files/millgate_healthcare_partnership_report.pdf)

Millgate Healthcare Partnership shared the Healthwatch report and their response with the Care Quality Commission during their inspection, which resulted in a 'Good' rating. The CQC report acknowledges the work undertaken by Healthwatch Tameside on page 14 of the evidence pack

<https://www.cqc.org.uk/sites/default/files/evidence/evidence-AAA9665.pdf>

Millgate Healthcare Partnership have asked us to carry on sharing with them any feedback we receive. This happens monthly, with all comments anonymised.

## CASE STUDY: New mental health services

The Living Life Well Programme in Tameside and Glossop was started because of concerns about a gap in mental health services where people with a range of needs have not always been getting support. People looking for help were going to their GP or A&E but were not provided with ongoing support. These concerns had been highlighted through a report we published in 2017.

The purpose of the 101 days for Mental Health Project was to co-design a model for meeting mental health needs of people who are currently not receiving a service in the neighbourhoods in Tameside and Glossop. In setting up this project, the commissioning team at Tameside & Glossop Clinical Commissioning Group mapped existing provision, established the types of people who were falling into the 'gap', considered other models of care, and considered the recommendations from the Healthwatch Tameside mental health report published in November 2017. [https://www.healthwatchtameside.co.uk/sites/default/files/mental\\_health\\_report\\_2017\\_0.pdf](https://www.healthwatchtameside.co.uk/sites/default/files/mental_health_report_2017_0.pdf)

A slide pack was produced, which set out the vision for the project. The quotations used were virtually all from the Healthwatch Tameside report.

The project ran for 101 days from July to November 2018. Healthwatch Tameside, along with people from many other organisations across Tameside, and people with lived experience of mental health care, took part in this collaborative project.

At the end of the project, the Strategic Commissioning Board approved a business case for additional investment to roll out a new neighbourhood model for mental health care.

The Living Life Well Programme continued at the end of the 101 days project, and Tameside and Glossop were selected by the Innovation Unit to join the Living Well UK Programme for 3 years, funded by the Big Lottery. The programme is supporting the development of a new model of mental health care in Tameside and Glossop. The new adaptable model is being rolled out gradually across the neighbourhoods of Tameside and Glossop, to be completed by April 2020.



**Helping you find**

**the answers**

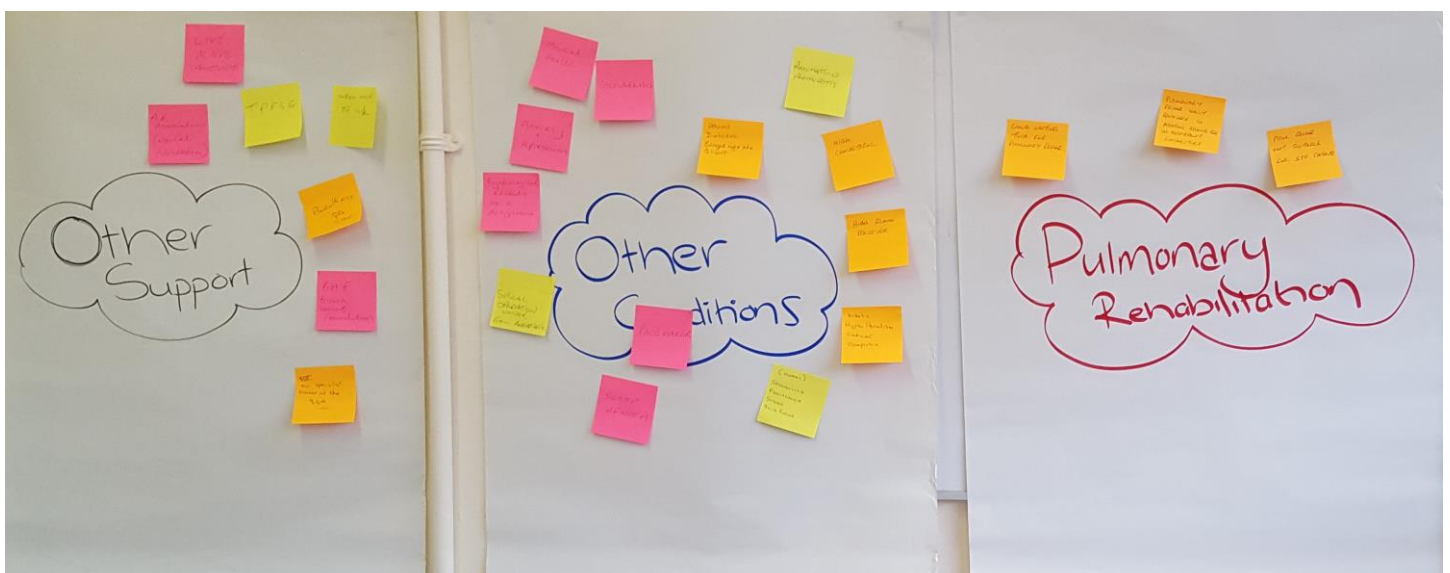
## How we provide people with advice and information

Finding the right care or support can be worrying and stressful. There a number of organisations that can provide help, but people don't know where to look. Last year we helped 169 people access the advice and information they need.

Enquiries from members of the public asking for information about health and care services are received by phone, e-mail, through our website and as part of our outreach work. Although these are relatively small in number (approximately three per week) they often tend to be quite complex. Many of our information enquiries relate to the interaction between services - for people who require care and support from more than one organisation.

Surveys were completed by Tameside College students - one of the questions asked what they would like to know more about. Most answers were sexual health and mental health. We arranged with educational outreach from the Orange Rooms (sexual health clinic) to make contact with the college. When we visited some time later, the member of staff was there with a table in the entrance to one of the buildings.

Our Help with NHS Complaints Service (sometimes called 'Independent Complaints Advocacy') continues to be busy. Our open caseload is normally in excess of 60 cases, a significant proportion of which take many years to conclude, especially if our client wishes to take them to the Parliamentary and Health Services Ombudsman. Although this work takes up a large amount of staff resource we find it brings us valuable insight into local health and care organisations as well as providing a way for us to help people to access the care, support and resolution they need.





# Our volunteers



## How do our volunteers help us?

At Healthwatch Tameside we couldn't make all of these improvements without the support of our volunteers that work with us to help make care better for their communities.



This has been a challenging year for our volunteer activity. Several of our long-standing volunteers have experienced health difficulties which have limited their ability to support us. We thank them for all that they have done and wish them a speedy recovery.

During this year our volunteers have helped us to:

- + Deliver regular outreach sessions
- + Attend community events
- + Act as 'mystery shoppers' (sometimes unintentionally) for a range of health and care services

Board members serve in a voluntary capacity. We thank the following people for their contributions to our Board this year:

- + Kailash Chand (Chair)
- + Murtaza Husaini
- + Frank Downs
- + Hanif Malik (to December 2018)
- + Dorothy Cartwright
- + Gideon Smith (Tameside Council representative)

Part of our 2019/20 work plan includes a drive to recruit additional volunteers. If you are interested in volunteering to support our work, please feel free to get in touch with us.



## **Our finances**

## How we use our money

To help us carry out our work, we are funded by our local authority. In 2018-19 we received £136,000 core funding.

### Income

	<u>2017/18</u>	<u>2018/19</u>
Tameside MBC	£136,000	£136,000
Focus Group Work		£475
<b>TOTAL INCOME</b>	<b>£136,000</b>	<b>£136,475</b>

### Expenditure

	<u>2017/18</u>	<u>2018/19</u>
Office & Support Costs	£37,623	£39,346
Salaries, on costs etc.	£89,787	£92,898
Direct delivery costs	£8,590	£4,231
<b>TOTAL EXPENDITURE</b>	<b>£136,000</b>	<b>£136,475</b>

<i>Excess of income over expenditure</i>	£0	£0
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<i>Brought forward from previous year</i>	£50,427	£50,427
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<i>Carry forward to next year</i>	£50,427	£50,427
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### Notes:

- + Good practice guidance suggests that it's prudent to hold a minimum of 3 months operating costs in reserves.
- + We are currently one year into a six year contract. Reserves are expected to reduce during the remainder of this contract, to enable us to make cost of living pay increases to staff and to meet inflationary pressures on our purchasing budgets.
- + Our core income of £136,000 has remained at the same level since Healthwatch was established in 2013 and is expected to remain at the same level for the duration of our current contract.
- + Although there is no separation in our contract between core Healthwatch services and the Help with NHS Complaints (NHS Complaints Advocacy) service, the complaints function was taken on in lieu of a 15% cut in 2014. We therefore apply the following assumption when apportioning our local authority funding:
  - + £115,600 core Healthwatch (85%)
  - + £20,400 NHS Complaints (15%)
- + In reality, the Help with NHS Complaints function takes up more than 15% of our resources.
- + Healthwatch Tameside is a restricted fund as part of Action Together Charitable Incorporated Organisation. Full copies of Action Together's audited accounts are available on request.



**Our plans for**

**next year**

# What are our priorities and concerns?

## Our plans for 2019/20 include:

- + Maximising the opportunities arising from the **NHS Long Term Plan** consultation (led by Healthwatch England).
- + Building on our **engagement with Tameside College**.
- + Reviewing patient experience following the merger of three GP practices to form **Ashton Medical Group**.
- + Improving our insight in terms of **residential care and home care services**.
- + Supporting Greater Manchester engagement on the **Improving Specialist Care** programme.
- + Reviewing the impact of **changes to local Mental Health services** - changes which were made following our identification of some gaps in services and our engagement with partners.
- + Reviewing the experiences of people who had accessed the **Parliamentary and Health Services Ombudsman** when they have not been able to have their NHS complaint resolved to their satisfaction locally.
- + Monitoring, encouraging and supporting the ongoing **improvement journey for Pennine Care NHS Foundation Trust**.
- + Continuing our outreach work in the local community, including seldom heard groups of people to ensure their voices are heard.

# Contact us

Healthwatch Tameside  
95-97 Penny Meadow  
Ashton-under-Lyne  
OL6 6EP  
0161 667 2526

[info@healthwatchtameside.co.uk](mailto:info@healthwatchtameside.co.uk)  
[www.healthwatchtameside.co.uk](http://www.healthwatchtameside.co.uk)  
[@healthwatchtame](https://twitter.com/healthwatchtame)

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Action Together is the independent social enterprise holding the local Healthwatch contract as of 31/03/2019. Healthwatch Tameside operates from Action Together's registered address and they can be contacted through the Healthwatch team at the above address.

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 need this report in an alternative format please contact us.

Action Together is a Charitable Incorporated Organisation, registration number 1165512.



Oldham  
12 Manchester Chambers, Oldham, OL1 1LF  
Rochdale  
104 - 106 Drake Street, Rochdale, OL16 1PQ  
Tameside  
95 - 97 Penny Meadow, Ashton-under-Lyne, OL6 6EP