



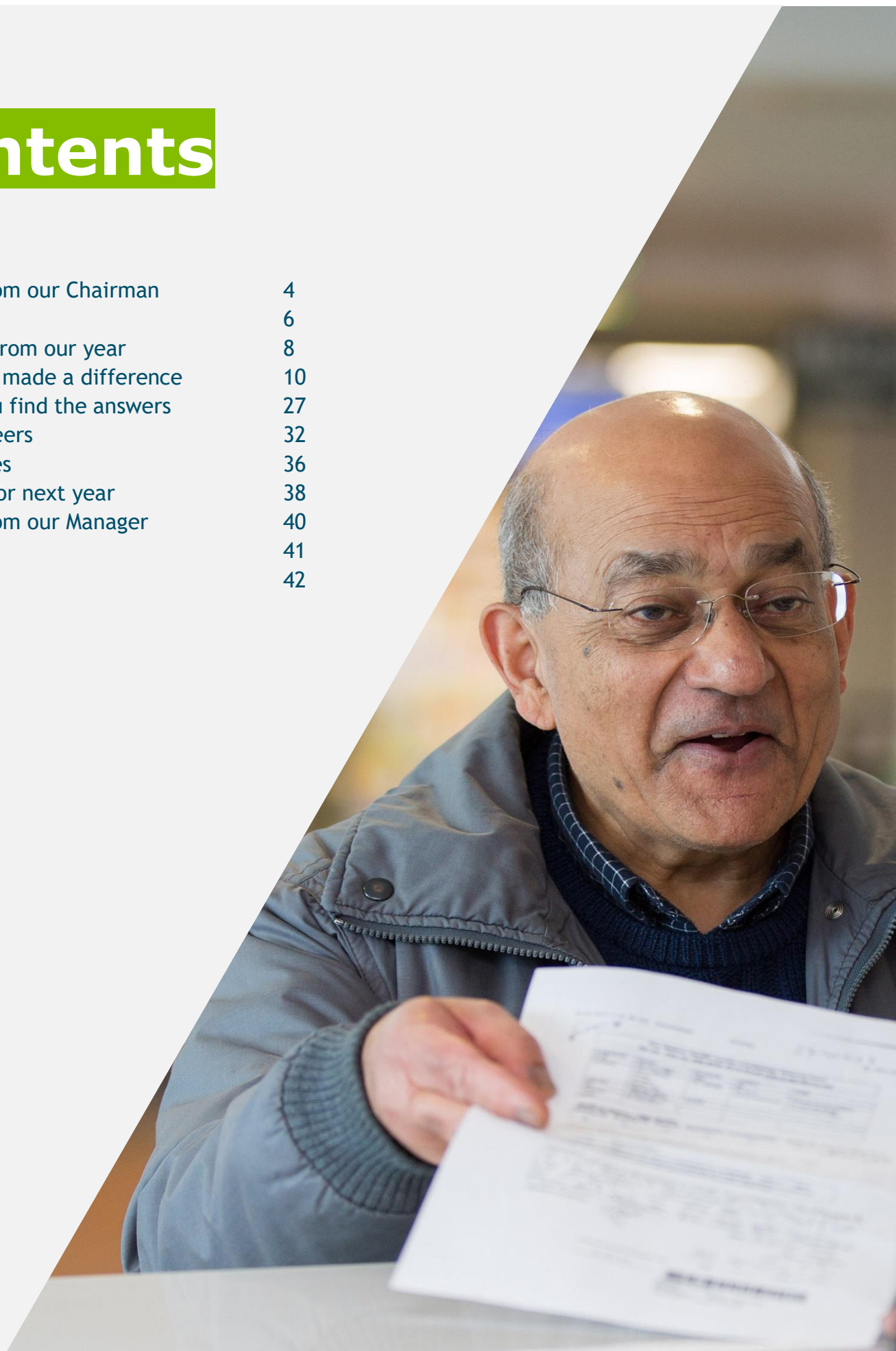
Healthwatch Hartlepool

Annual Report 2018-19



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Message from our Chairman

It`s hard to believe another year has gone by since I last wrote about Healthwatch Hartlepool.

To be honest it`s been a somewhat mixed year, with successes and disappointments.

On a positive note we have earned ourselves an injection of income having carried out a very successful consultation and events in conjunction with Catalyst Stockton-on-Tees Ltd “Living With & Beyond Cancer”. This has been incredibly rewarding for both Healthwatch Hartlepool and for all those residents affected by cancer. The report will be published early in the new year as will the associated finances. We hosted a series of talks and workshops which were well attended and was felt to be very worthwhile. Thanks to our Manager Christopher for seeing the opportunity and to all the team for their organisational skills.

Other achievements, of which there are many, are presented within this year`s report in respect of the Patient Pathway of Carers and a comprehensive review of local Pharmacies. Both these projects demonstrate how we have made a difference together. The many recommendations we have made throughout our work, especially in respect of Enter & View have been warmly received by our partners. These projects would not have happened if we had not directly responded to what is important to the people of Hartlepool. This also proves we champion the cause of the seldom heard, improving inclusivity in Health & Social Care services.

This year saw the change of name of the Executive, which monitors our work programme, to the Volunteer Steering Group (VSG). This change was driven by the Charity Commission who felt that the old name gave the wrong impression. Although this had been in use for many years people have willingly embraced the change and, as Shakespeare said, “A rose by any other name would smell as sweet”. The VSG still carries our prodigious amounts of work and continues to organise and motivate all our willing and invaluable volunteers. I can absolutely confirm that apart from the name change, work continues exactly as before.



‘Healthwatch would be nothing without it`s volunteers. We couldn`t carry out the much-needed work without them, thank you.’

The year was slightly blighted for me by our first real complaint. Someone with a hidden agenda seemed to be using Healthwatch as a stick to beat their intended victim. Christopher and I collaborated, after my discussions with the Charity Commission and made some slight amendments to our documentation. This seemed to bring us into line with their requirements and I am pleased to say we seem to be on an even keel once again.

Back to positives now. I can report we are very healthy financially speaking. We are able to make economies of scale by judicious buying and prudent money management. Long may it continue.

I must thank all the Board members who give their time unstintingly and are always there to help when needed. Two Board members Margaret Wrenn and

Ruby Marshall carry out a dual role and, of course, have double responsibilities and work. What would we do without them?

My sincere thanks go to the management team whose roles get wider every year. They have developed a robust work programme capturing the role we play in the community of Hartlepool. This is published on our website and articulates what is important what is important to the residents. I am hoping it will be onwards and upwards in the next year and look forward to seeing you all at our AGM in July.

Jane Tilly
Healthwatch Hartlepool Chairman

Changes you want to see

Last year we heard from 1598 people who told us about their experience of a number of different areas of health and social care. Here are some examples of the changes that you want to see.



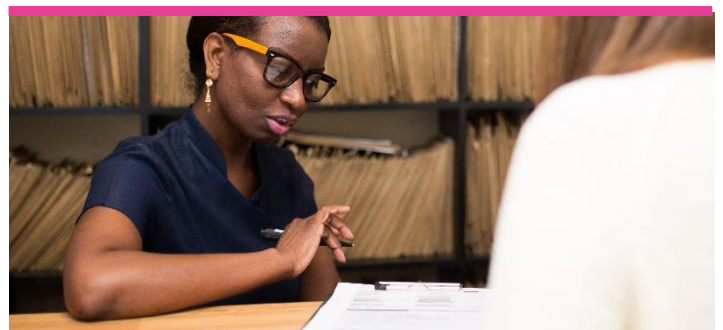
- + Better treatment for autism patients with diabetes.



- + Make GP appointments more accessible for carers.



- + Dementia sufferers to be provided with appropriate products from the incontinence service.



- + Improve substance misuse services for those patients who have mental health illness.

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.

Established under the Health and Social Care Act 2012, the requirements set out in the legislation mean Healthwatch Hartlepool will be expected to:

- Obtain the views of the wider community about their needs for and experience of local health and social care services and make those views known to those involved in the commissioning, provision and scrutiny of health and social care services.
- Promote and support the involvement of a diverse range of people in the monitoring, commissioning and provision of local health and social care services through membership of local residents and service users.
- Make reports and recommendations about how those services could or should be improved.
- Provide information to the public about accessing health and social care services together with choice in relation to aspects of those services.
- Represent the views of the whole community, patients and service users on the Health & Wellbeing Board and the Hartlepool Clinical Commissioning Group (locality) Board.
- Make the views and experiences of the broad range of people and communities known to Healthwatch England helping it to carry out its role as national champion.
- Make recommendations to Healthwatch England to advise the Care Quality Commission (CQC) to carry out special reviews or investigations into areas of concern (or, if the circumstances justify it, go direct to the CQC with recommendations, if for example urgent action were required by the CQC).

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, get the best out of services and manage any conditions they face.



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.





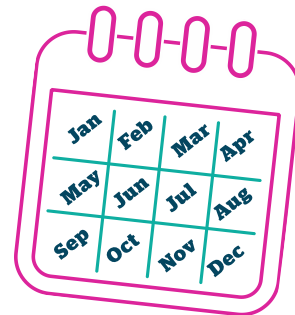
Highlights from

our year

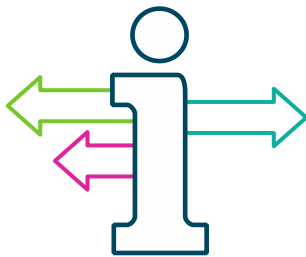
Find out about our resources and the way we have engaged and supported more people in 2018-19. Our resources:



213 people shared their health and social care story with us, in respect of accessing their G.P.



We have over 30 volunteers helping to carry out our work. In total, they gave up over 600 days for our work.



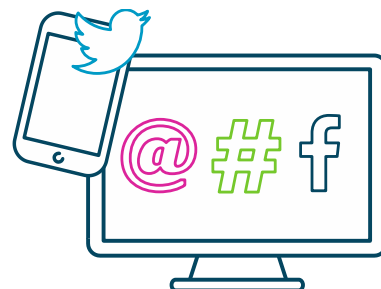
16 people accessed Healthwatch advice and information online or contacted us with complaints or concerns.



We visited 9 services and attended over 50 community events to understand people's experiences of care. From these visits, we made 2 recommendations for improvement.



44 improvements we suggested were adopted by services to make health and care better in our community.



25% more people engaged with us through patient and public engagement.



How we've made

a difference

Changes made to your community

Find out how sharing your views with your local Healthwatch has led to positive changes to health and social care services in Hartlepool. We show that when people speak up about what's important, and services listen, care is improved for all.

Take a look at some of the following examples of how Healthwatch Hartlepool can demonstrate how we have made a difference in our community.

Carer's Healthcare Experience

THE PATIENT PATHWAY OF CARERS:

Healthwatch Hartlepool met with representatives of Hartlepool Carers to discuss a range of health and social care related issues which impact upon the wellbeing of carers and the people they care for. Discussions touched upon a wide range of issues, but it soon became apparent that there was a need to engage directly with carers to obtain first hand experiences of the effectiveness of local health services. During our initial discussions a theme around Personal Health Budgets and Continuing Health Care had emerged. It was felt that carers were experiencing increasing difficulties and inconsistent application on the part of health professionals when applying for funding from both sources.

It was agreed that a series of focus groups would be held, to which carers would be invited. The initial area of discussion at the meetings would focus on experiences of applying for Personal Budgets and Continuing Health Care, but it was agreed that there would also be opportunities to raise wider health related issues and experiences during the sessions. Arrangements were then made to run five differently themed half day carer focus groups covering:

Children and Young People

Transition and Adults

Older People

Young Carers (aged 8 to 11)

Young Carers (aged 11 to 18)

The first 3 sessions were attended by 20 carers with a similar number of young carers attending the final two sessions. It was agreed that a short report would be produced by Healthwatch Hartlepool which would outline key findings and make recommendations as appropriate. All information would be shared in full with key partner organisations, including Hartlepool Borough Council but individual input and comments would be presented anonymously.

NHS Continuing Healthcare is the name given to a package of care that is arranged and funded solely by the NHS for individuals who are not in hospital and have been assessed as having a primary health need.

There is a two-stage process by which eligibility for NHS Continuing Healthcare is assessed. Firstly, the patient has an assessment with a health or social care professional using a screening tool called the Checklist Tool. If after completing this tool it looks like the individual may be eligible for NHS Continuing Healthcare, the second stage is a full assessment using a tool called the Decision Support Tool. Guidance states that the individual should be fully involved in the assessment and decision-making processes.

Their views about their care and support needs must be taken into account. If the individual is struggling to explain their views, or would like help doing this, a friend, relative or advocate can help. A separate process of NHS Continuing Healthcare operates for children and young people. This applies when the child or young person has needs or challenging behaviour arising from disability, accident or illness that cannot be met by existing universal or specialist services alone. Some children and young people (up to 18 years old) may have very complex health needs.

These may be the result of congenital conditions, long-term or life-limiting or life-threatening conditions, disability, or the after effects of other serious illness or injury. Eligibility for such a package of health funded care is assessed following the same process to that illustrated above.

Feedback - Carers of both adults and children was remarkably similar regarding experiences of trying to access both types of Continuing Healthcare. Everyone who had been through either of the processes felt that it had been a complex, difficult and emotionally draining experience. “It felt like the process and procedures took priority over the needs of my child”, “Everything was a fight, it felt like we had to battle for everything!” “Services are not joined up, so you end up repeating things over and over again.”

Carers with children reported that having a full diagnosis of the child’s condition could be a major barrier to accessing support through Continuing Health Care.

“They haven’t been able to come up with a diagnosis yet, but my child’s care needs are still there and not being met.” “The system fails if a clear diagnosis is not in place. The whole process is diagnosis led and not patient centred”

Clear information on how both processes work, with clear explanations of eligibility criteria were said to be very hard to find.

“Information on Continuing Healthcare is hard to find and when you do find it, it’s very unclear and difficult to understand.” “The whole process is very poorly explained and information that you have a right to is not always forthcoming.” “I am still unclear on what Continuing Health Care is. It was not explained well and appears to be inconsistently applied.”

All carers reported inconsistencies in the interpretation of eligibility for Continuing Health Care that was received from different health professionals involved in the assessment process.

“Professionals do not appear to fully understand them (Continuing Health Care processes and eligibility criteria) and sometimes give contradictory advice” “Input from social workers is very inconsistent, some cases are fast tracked and others aren’t but no explanation is given.” “Staff need better training, so they are able to fully understand and explain how the pathways and processes associated with Continuing Healthcare work.”

Many carers reported feeling that the process was finance driven and that it was becoming harder to access Continuing Health Care support.

“The system is dishonest, it pretends that it isn’t financially driven when in reality we all know that it is!” “Carer experience is that applications are usually declined and criteria is getting tougher.” “The person I care for has significant needs but still does not qualify for support.”

Experience of service delivery was reported to be inconsistent when dealing with transition from child to adult services.

“There were variations and inconsistencies in transition dates and although treatment was received through paediatric services it does not always mean services and support will continue into adulthood.”

A Personal Health Budget is an amount of money to support the identified healthcare and wellbeing needs of an individual, which is planned and agreed between an individual, or their representative and the local Clinical Commissioning Group (Hartlepool and Stockton CCG). The aim of a Personal Health Budget is to give people with long term health conditions and disabilities more choice and control over the money spent on meeting their health and wellbeing needs. It may be used for a range of things to meet agreed health and wellbeing outcomes. This can include therapies, personal care and equipment within defined parameters.

Feedback received from carers largely reflected the experiences outlined above regarding Continuing Health Care. Once again carers generally reported the Personal Health Budget process to be both stressful and difficult to navigate.

“No one really knows about Personal Health Budgets, they aren’t publicised and kept quiet” “The process of applying for a budget is complicated and doesn’t include cognition (Learning disability).”

“The process for both (Personal Health Budgets and Continuing Health Care) is very complicated and feedback on decisions is poor or none existent.”

Difficulties were reported in the way in which Personal Health Budgets are administered and the application process.

“The budget was driven by process and didn’t accommodate the needs of the carer. This restricted what could be done and consequently the benefits were limited.” “I found the health budget to be inflexible and it didn’t match up with individual and carer needs and circumstances, it wasn’t person centred.”

Some parent carers said that their personal knowledge and experience of the individuals condition was not fully taken on board.

“Carers are often not involved in the process and their knowledge and understanding of the persons condition and needs are not fully taken into account”

Certain types of rare condition, and conditions for which there was no full diagnosis were also seen as barriers to being able to access a Personal health Budget.

“People with rare conditions, where normal care provision doesn’t fit could really benefit from having a Personal Health Budget but they are not made aware.”

A more positive experience of the process was identified in cases in which support had been made available during the application process.

“The Personal Health Budget process has improved since a nurse at my GP practice became involved in the assessment process. This has led to better communication and a more informed process.”

Several carers reported that the process was financially driven and that in recent years Budgets had been reduced despite needs either staying the same or increasing.

“Last year x received £1500 for a full year gym membership, but this year only assessed at £750 despite having a degenerative condition.”

“Everything is driven by money and they are always looking for ways to say no!”

The length of time it takes to get a decision on an application was also given as a reason why people choose not to apply for a Personal Health Budget.

“I know about them but didn’t bother to apply, too much hassle and too slow, I would rather self-fund.”

“From putting in my application it took three years to get it approved”

“I applied for a swimming pass over a year ago but have had no response, the waiting times and patient service are completely unacceptable.”

Continence Services - Carers highlighted several issues regarding support for continence issues. Carers of children with continence issues said that the service provision felt fragmented and unresponsive.

“It is difficult to get nappies from the Continence Service, School Nursing and the Continence Service seem to work separately” “The service does not feel carer or people friendly and there is very little continuity” “The service is now very adult focused, difficult to access and outcomes are poor”

Carers for both older people and children commented that very often they were provided with inappropriate products which failed.

“The range of products available is limited and do not always meet individual needs” “Often the nappies you receive are not the right size and can’t be used which has led to a nappy black market.”

A consistent theme amongst those caring for older adults was the lack of availability of “pull ups”. “The person I care for needs pull ups, anything else just doesn’t work. They provide them in Durham, so why won’t they provide them here?”

“The pads that we get are not always right and don’t work. We need pull ups and can’t understand why they don’t provide them. Guess it will be money before the needs of the patient.”

Several carers also said that they often experienced long waits for products and consequently they often end up buying a lot of products for the person they care for.

“We experience very long waits for pads and services.” “Lots and lots of problems. I have to buy a lot of products as the ones the person I care for needs are not available.”

GP Services - All focus groups commented on GP services. Many carers felt that their GP was unaware or unappreciative of the needs of carers and consequently felt poorly supported. “GP’s appear to have a low level of understanding of carer needs, and cutting the Carer/GP liaison service is a big loss” “As a carer I am often left feeling let down by my GP” “GP’s need to have a better understanding of the needs of carers and the role carers play in supporting someone.” “My experience of GP’s hasn’t been good. I have had problems with getting a diagnosis and prescribing.”

Problems were highlighted around communication between the GP, the practice and the patient. Concerns were also raised about poor communication between practices and other health providers.

“Please communicate, explain decisions and talk to patients!” “Communication between GP’s and other health agencies can be problematic. My medication was changed in hospital but my GP didn’t know.”

The most frequently raised issue by all focus groups related to difficulties carers experienced in accessing appointments with their GP.

Most carers are fully engaged in providing care to loved ones between 7.30am and 9.30am. Consequently, they find it extremely difficult contacting their GP practice between these hours to book appointments. When they are finally able to phone the practice, appointments have usually all been taken. This has a significant impact on the ability of carers to access primary care in a timely and convenient manner.

“It is really difficult getting an appointment at my surgery. It is hard to phone between 8am and 9am as it is a really busy time for me and you are just left on hold. When you finally get through all of the appointments are gone.” “I have real difficulties getting an appointment to see a GP. You have to phone between 8am and 9am which is really hard to do for carers. By the time I get through all of the appointments are gone.” “There needs to be better access to GP surgeries for carers.” “I always have problems with appointments, last time it took 100 calls to get an appointment.” “Care is not patient centred, and don’t get me started on the appointment system!”

Finally, concerns were raised about medication reviews, with several participants expressing concerns that they are cost driven, rather than for the benefit of the patient.

“Medication reviews are all about cost.” “My GP has stopped prescribing some drugs, which are an important part of my treatment. This is down to cost and not what is best for me.”

Hospital Services - Generally, carers were positive about experiences of care at Hartlepool and James Cook Hospitals.

“Really good experience of Urgent care at Hartlepool Hospital, it is an excellent service.” “We have used Orthopaedics, Phlebotomy and Haematology at Hartlepool Hospital, they are all excellent and the staff very caring.” “The volunteers at James Cook provide a wonderful service.”

Some concerns were expressed about North Tees Hospital and the care received by patients with a learning disability.

“Patient experience in hospital can be poor, particularly North Tees. A course of antibiotics was missed, I was cold and waited four hours to be taken to the toilet. But they don’t have enough staff.” “Hospital experience for people with learning disability is not so good, understanding and empathy from some staff can be poor. Also, being on a ward can be a scary experience.”

Difficulties getting to and from hospital appointments at North Tees and James Cook were highlighted by all groups particularly by those carers who relied on public transport.

“I have to go to North Tees for check-ups every few months. It costs me a fortune for a taxi or takes ages by bus and I have to get someone to stay with him while I am away.”

Community Services - Concerns were expressed about some aspects of wheelchair services.

Several people stated that the person was expected to fit around the wheelchair, and the size, mobility and needs of the individual were not properly considered.

“I had a difficult experience with wheelchair services, they weren’t very helpful. Patient and carer needs are made to fit around big contract services rather than being about the individual.” “They didn’t have the correct understanding of the needs of the wheelchair user. I had to pick a wheelchair from internet pictures.” “With a wheelchair you have to get it right, otherwise it is a waste of money and it has a big impact on the quality of life of the person in the wheelchair and their carer.”

Several carers raised concerns about physiotherapy and in particular services for children. It was reported that in some instances, parents were paying privately for physiotherapy services for children as school-based services were not meeting individual needs.

“Children in main stream schools are getting a poor inadequate service and often needs are not being fully identified and met. Families often end up having to pay for private physiotherapy services for their child.” “The service is not working for many children, it is under resourced and health plans often do not fully meet the needs of children.”

Mental Health - Carer mental health was raised in the discussions of all focus groups. Caring can be a physically and emotionally draining experience and have a massive impact on the health and wellbeing of the carer.

“Being a carer has a big impact emotionally and psychologically and can have a big impact on your mental wellbeing” “Caring for someone 24/7 can leave you feeling drained, emotionally and physically, you have to live it to really understand.” “I have felt stressed and depressed but caring for my child must come first.”

Carer experience of mental health support services was mixed. Some reported positive and supportive inputs which had been helpful, others felt that they had wasted their time and had not benefited from their uptake of services.

“I went for one session at MIND, the counsellor was not very good and I did not find the experience helpful. I did not go back.” “Crisis support is inconsistent, you get a mixed response.”

Concerns were raised about Children and Adolescent Mental Health services (CAMHS). A recurrent theme across all focus groups was the time it takes to access CAMHS services and difficulties accessing sensory assessments. Consequently, there was a really strong feeling that all too often support was not made available at an early stage and consequently small manageable problems often became bigger and much harder to address.

“It takes too long to access CAMHS and once you do it is too complicated.”

“My child had major difficulties accessing a sensory assessment. This had a massive knock on effect for the whole family. Eventually they did get a diagnosis of autism, but there is a lot of missed diagnosis and under diagnosis which has massive implications for children and carers.”

Many carers felt that the peer support they received through Hartlepool Carers was far more effective than the support that was available from other mental health specific organisations. “Hartlepool Carers gives me an opportunity to share how I am feeling with people who understand.” “Being a carer can be really stressful, if you don’t care for someone yourself, you don’t really understand. At Hartlepool Carers there are people who have been through what you are experiencing and understand how you are feeling.”

Conclusions

Carer experience of Personal Health Budgets and Continuing Health Care is generally not positive and can be extremely stressful and cause considerable anxiety for the applicant and carer. In both areas understanding and interpretation of criteria is vague and can vary depending on the personal knowledge and awareness of the health professional spoken to. Clear, easy to understand information appears to be hard to find and both processes appear to focus primarily on cost rather than the needs of the individual.

Carers of both adults and children are experiencing significant difficulties in accessing suitable continence products from the Continence Service. Consequently, those who rely on the products are suffering both in terms of dignity and wellbeing, and carers are having to access appropriate products elsewhere at significant cost to themselves.

Carers across the town are experiencing major difficulties accessing GP appointments. Appointment systems at many surgeries are based around patients phoning the practice between the hours of 8am and 10am which for many carers is one of their busiest and most intense periods of the day.

Experience of hospital services was generally quite positive although some concerns were raised regarding the experiences of patients with a learning disability and transport.

The individual needs of the cared for person and carer are not always being fully addressed in the areas of wheelchair services and children’s physiotherapy. Consequently, the wheelchair provided may be inappropriate or the physiotherapy package inadequate in order to address identified need.

A significant number of people were unaware of complaints/compliments procedures and where to find instruction on what to do. This indicates that on some occasions new care service users are not being told about where to find them, or that current methods of passing on information are failing in some cases.

Mental health is a significant issue for carers and those they care for. Access to timely mental health interventions appears to be problematic both for adults and children. Consequently, this has led to low levels of confidence in mental health service providers amongst some carers and some unmet/undiagnosed mental health care needs amongst both carers and those they care for.

Healthwatch made some significant recommendations:

Continuing Health Care

That as a matter of urgency, the processes and procedures associated with applications for Continuing Health Care for both children and adults is reviewed with a view to making the process more transparent, consistent in application and understandable to those who apply for it.

All staff involved in facilitating Continuing Health Care applications should be trained to a consistent level of awareness and understanding and joint training/development of health and social care professionals should be considered to maximise consistency in approach and interpretation.

A specific review of transitional arrangements should be undertaken in order to ensure consistency of approach to transition from children to adult CHC arrangements and that parents and carers are kept fully informed and involved at all stages during this time.

In all cases, the needs of the individual and not financial implications must be the key focus in applications for Continuing Health Care.

Personal Health Budgets

As a matter of urgency, the process and procedures associated with applications for Personal Health Budgets should be reviewed with a view to ensuring transparency and consistency in application.

Hartlepool and Stockton CCG should look to raise awareness of the purpose and availability of Personal Health Budgets amongst patient groups in Hartlepool who may potentially benefit from accessing a Personal Health Budget.

All staff involved in facilitating Personal Health Budget applications should be trained to a consistent level of awareness and understanding and joint training/development of health and social care professionals should be considered to maximise consistency in approach and interpretation.

Efforts are made to ensure that applications for Personal Health Budgets are turned around in a timely manner and that at all stages, applicants are kept informed of progress in clear, concise and understandable language.

Continence Services

The Continence Service undertakes a full consultation with service users and carers regarding the appropriateness of current service provision and product types which are available and that the outcomes of the consultation are acted upon and implemented at the earliest opportunity.

GP Services

As a matter of urgency, GP practices across Hartlepool consult with carers and carer organisations to identify ways by which carer access to GP appointments can be improved. GP practices provide detailed information to patients and carers which describes the various ways in which GP appointments can be booked, including on-line and via the 111 service. Hartlepool and Stockton CCG give serious consideration to ways in which awareness of carer needs and circumstances can be improved in GP practices within Hartlepool including the reintroduction of a Carer/GP Liaison officer.

Hospital Services

North Tees and Hartlepool Foundation Trust should engage with Hartlepool Carers to ensure that carers are fully aware of shuttle bus times, the volunteer driver scheme, subsidised taxi scheme and reduced cost hospital carparking availability.

Mental Health

Efforts should be made to ensure that funding streams are secured to enable Hartlepool Carers to provide support to carers in the areas of mental wellbeing and resilience on a permanent basis. Mental health service providers including CAMHS and TEWV should examine ways of working more closely with Hartlepool Carers to ensure that mental health services are responsive to the specific needs of carers in a timely and effective manner.

How we made a huge difference. Ultimately, we should be judged on our results and for this piece of work we believe it made a huge impact for the future patient experience of carers. Our findings were presented at Hartlepool's Health & Wellbeing Board and all recommendations were accepted by our statutory partners to be monitored within our action plan.

Review of Local Pharmacy Services in Hartlepool



Community pharmacies are an important component of our local health care services. Whether it is for the provision of prescribed medications, over the counter treatments or a wide range of health-related support and advice, the part played by local pharmacies in supporting local health and wellbeing is significant and growing.

In 2014 in the NHS Call to Action the Government said, -

“Our aim is to enable community pharmacy to play an even stronger role at the heart of more integrated out-of-hospital services that support better health outcomes for patients, provide more personalised care, deliver excellent patient experience, optimise the use of medicines and secure the most efficient possible use of NHS resources”.

Within this context Healthwatch Hartlepool undertook a comprehensive survey of Hartlepool residents, which aimed to find out what they thought of their local pharmacy services, what they valued most and their perceptions and experiences of the staff and environment through which local pharmacy services are provided.

Our investigation was carried out from July to October 2018 and 213 people responded, either by visiting the survey link via the Healthwatch Hartlepool website or by means of face to face interviews carried out on site in pharmacies across the town. Response rates varied considerably between locations, but our report highlighted key findings from data available.

Findings

The following section summarises the responses received to our survey questions.

1. Why did you visit this pharmacy today?	
Order a prescription	29 (14%)
Over the counter medicine	26 (12%)
Advice on a medical issue	11 (5%)
Non-medical purchase	4 (2%)
Collect a prescription for self	90 (43%)
Collect a prescription for self and over the counter medicine	14 (7%)
Collect a prescription for other person	37 (17%)
Total	211

Most transactions (93%) were prescription related, with the respondent collecting or ordering a prescription for themselves or another person. The remaining visits relate to advice on a medical issue (5%) or a non-medical purchase (2%).

2. How satisfied were you with advice provided regarding your prescriptions?	
Very Satisfied	93 (45%)
Satisfied	77 (37%)
Neutral	15 (7%)
Dissatisfied	23 (11%)
Total	208

An overwhelming majority of pharmacy users (82%) were very satisfied or satisfied with the advice they received regarding prescriptions. Levels of satisfaction did however vary considerably. 100% of customers at Boots Marina, Clayfields, Healthways Middleton Grange, Tesco's and Seaton responded that they were satisfied or very satisfied with advice received. However, only 48 %of respondents at Lloyds Wiltshire way and 56% of respondents at the ASDA Pharmacy were satisfied with advice received.

3. If you collected a prescription today, how long did you have to wait?	
Collect immediately	60 (35%)
5 -10 mins	63 (36%)
10 - 20 mins	39 (23%)
Longer than 30 mins	11 (6%)
Total	173

In total, 71% of pharmacy users reported that they waited ten minutes or less when they called to pick up a prescription. 100% of respondents at Clayfields, Healthways MG, West View and Victoria pharmacies reported that waiting time was under 10 minutes. However, at the ASDA Pharmacy 100% of customers reported that waiting time had been over 10minutes, and at Lloyds Wiltshire way 70% of respondents reported a waiting time had exceeded 10minutes.

4. How satisfied were you with the time it took to provide your prescription and /or any other service you required?	
Very satisfied	69 (35%)
Satisfied	104 (52%)
Very dissatisfied	25 (13%)
Total	198

Pharmacy users were generally satisfied or very satisfied with the time taken to provide prescriptions and other services with 87% either very satisfied or satisfied with service delivery. However, as one would expect, levels of satisfaction were closely linked to the service delivery outcomes shown in question 3 with the poorest satisfaction ratings being recorded at Lloyds Wiltshire way (50%) and ASDA (37%). 100% ratings were recorded at Boots MG, Clayfields, Lloyds Kendall Road, West View, Victoria, Seaton and Lloyds Wynyard Road.

5. Including any previous visits to the pharmacy, how would you rate the Pharmacist and other staff who work there?	
Very good	112 (53%)
Fairly good	81 (38%)
Fairly poor	14 (7%)
Very poor	4 (2%)
Total	211

Generally, pharmacy staff are held in high regard by their customers with 91% of respondents rating them as either very good or fairly good. 100% of respondents at Lloyds Wynyard Road, Seaton, West View, Clayfields and Boots MG all rated staff in the good or very good categories. The lowest percentage share of good or very good responses was at Lloyds Wiltshire Way at 63% of total replies falling in this range.

6. Were all the items on your prescription immediately available?	
Yes	150 (75%)
No	37 (8%)
One or more items were not immediately available	14 (7%)
Total	201

75% of respondents reported that all of the items on their prescription were immediately available. Seaton and Lloyds Wynyard Road both had 100% positive responses to this question, closely followed by Healthways with 93%. At both the ASDA Pharmacy and Lloyds Winterbottom Avenue 50% of respondents reported that not all prescription items were immediately available.

7. Does your Pharmacist deliver your medication to your home address?	
Yes	35 (17%)
No	176 (83%)
Total	211

Most respondents (83%) said that their Pharmacist did not deliver their medication to their home. Only the Headland pharmacy (54%) and the Healthways (50%) and Lloyds Winterbottom Avenue (43%) had significant levels of awareness/usage of delivery services.

8. Would you consider using your local Pharmacy as first port of call for minor illnesses rather than other NHS services?	
Yes	155 (75%)
No	53 (25%)
Total	208

Generally, respondents were positive about using their local pharmacy as a first port of call for a minor illness with 75% saying they would be happy to do so. At Clayfields, Healthways, Seaton and the Tesco pharmacy 100% of respondents said they would consider using their local pharmacy in such circumstances.

9. Has your GP or Pharmacist advised you of the Electronic Prescription service?	
Yes - GP	113 (48%)
Yes - Pharmacist	44 (19%)
No	76 (33%)
Total	233

67% of respondents had been advised of the Electronic Prescription service by either their GP or pharmacist but 33% said that they had not been made aware of the existence of the service. At Lloyds Wynyard Road and Seaton pharmacies no respondents (0%) had been made aware of the electronic prescription service by their pharmacy.

10. Are you aware of the availability of a private consultation room if required?	
Yes	162 (76%)
No	51 (24%)
Total	213

Most respondents (76%) were aware that there was a private consultation room at their Pharmacy should they need to use it. 100% of respondents at the ASDA pharmacy, Clayfields, Lloyds Kendall Road and Lloyds Winterbottom Avenue said they were aware of the private consultation room facility. However, at both the Well pharmacy on Catcote Road and Seaton Pharmacy only 50% of respondents were aware of the facility.

11. Does your Pharmacy have/are you aware of the following facilities?	
Blood pressure testing	65 (28%)
Cholesterol testing	36 (16%)
Diabetes testing	40 (17%)
NHS Check	33 (14%)
Emergency hormonal contraception services	30 (13%)
Medication review	55 (24%)
Pregnancy test	30 (13%)
Sexual health test	22 (9%)
Stop smoking services	45 (20%)
Weight management services	31 (14%)
Flu vaccination	65 (28%)
Total	233

Levels of awareness of the availability of other services at pharmacy outlets was mixed, with blood pressure testing, flu vaccination and medication review being the most frequently mentioned facilities.

Access to most pharmacy premises was generally considered to be good although some concerns were expressed at individual pharmacy sites:

Electronic Doors - Customers at several pharmacies, including Seaton and Lloyds Wynyard Road commented that although pharmacy had a ramp the doors only opened manually which could prove difficult. Customers at the Clayfields Pharmacy also commented that “automatic doors” would be beneficial, and that there was a small step which could cause problems for people with disabilities. Customers at the Victoria Medical centre Pharmacy commented on the “good disabled access with electronic doors”.

Location - Comments were also made regarding the location of several pharmacies. Several users of the Headland Pharmacy commented that its position on a steep slope made accessing the building difficult.

Car Parking - A common area of concern, particularly amongst users of town centre pharmacies was around car parking provision and the cost of parking. “Waive parking fees if you can prove you have only visited the pharmacy” - Healthways Middleton Grange. Customers at the Boots marina pharmacy commented on a lack of parent/child parking bays and the dangers of crossing the adjacent road with children.

Opening Hours - Customers of pharmacies in settings such as the Middleton Grange shopping centre commented that access was limited by the opening times of the shopping centre. Customers at other pharmacies across the town also commented that opening hours could be restrictive. “I would like Saturday morning opening” - Headland Pharmacy. At supermarket based pharmacies such as the ASDA Pharmacy customers commented that late night opening was helpful and appreciated and car parking was not a problem. Customers at the Well Pharmacy on Catcote Road commented that the entrance to the pharmacy could be difficult to negotiate due to “clutter” which could impede wheelchair users and people with mobility disabilities.

Conclusions

Overall, pharmacies are highly regarded by people who use them and appear to be providing a good standard of service. Between 80% and 90% of respondents were satisfied with the quality of service and the performance of staff providing services.

As one would expect the reason for most respondents visit to the pharmacy was prescription related. Only 5% of those completing the questionnaire identified advice about a medical issue as being the reason for their visit and less than 2% said the purpose of their visit was a non-medical purchase.

Several pharmacies including Clayfields, Seaton and Healthways Middleton Grange received noticeably high levels of satisfaction and extremely positive feedback from customers. However, several pharmacies, including Lloyds Wiltshire and ASDA pharmacy attracted high levels of dissatisfaction particularly around waiting times and general advice services.

“More attention to customers, less waiting time.” - ASDA Pharmacy

“I find that often when I go for a prescription there has been a hold up, technical glitch and I need to come back.” - Lloyds Wiltshire way

It is particularly noticeable that pharmacy staff are extremely highly regarded, with over 91% of respondents rating them as good or very good.

“The Lloyds staff are hardworking and friendly but are often faced with angry and abusive customers, this should be addressed.”

“The staff are friendly, it’s having to wait that is the problem.” - Lloyds Winterbottom Avenue

“All staff are friendly and helpful.” - Well Pharmacy, York Road

Pharmacies that had high levels of customer satisfaction such as Clayfields, Healthways Middleton Grange and Seaton also attracted a positive response when patients were asked if they would use their local pharmacy as a first port of call for treatment of a minor illness. In each case 100% of respondents said they would do so.

“All staff I have encountered are very friendly and helpful. The pharmacist is always on hand to give help when needed” - Clayfields Pharmacy

“They greet you by your first name and know exactly your prescription” - Healthways Middleton Grange

“I find the pharmacist and his assistant very helpful and polite and I know if I have a problem I can always go and see them for their advice.”

Advice about the availability of electronic prescription services appears to have come predominantly from GP’s rather than pharmacies, with only 19% respondents saying they had heard about the service from their pharmacist. It is of concern that 33% of respondents said they were unaware of the existence of the service.

Respondents most frequent complaints regarding service delivery related to the length of time it took on some occasions to collect a prescription, lack of staff and being overheard when discussing medication and sensitive issues. This was particularly prevalent in store based branches and in pharmacies at which there was a lower level of awareness of the availability of a private consultation room.

“Add extra staff to decrease waiting time” - Boots One Life Centre

“Could be a little more private, maybe a queue barrier would help. Because of the location within a supermarket it is subject to passing shoppers” - Tesco Pharmacy

Respondents at pharmacies which prescribe methadone, respondents raised issues regarding the behaviour of some methadone users and resentment was expressed that they were often served before other customers.

Some respondents commented that the opening times of their pharmacy were restrictive. Outlets located in Middleton Grange were restricted to shopping centre opening hours and some did not open during the weekend.

“People on methadone are served before people with prescriptions.” - Lloyds Wynyard road

“Open longer hours so I can pick up prescriptions after work.” - Well Pharmacy Catcote Road

Awareness of other facilities was quite mixed with only flu vaccination and blood pressure testing mentioned by over 30% of respondents.

“They should advertise what facilities they have.” - Boots Marina

Recommendations:

Findings from individual Pharmacies are noted and whenever possible any concerns highlighted within the report are considered and acted upon.

Pharmacies need to find ways of making conversations with patients less audible to other customers using the pharmacy, either through use greater use and promotion of the consulting room or by other means.

Pharmacies and GP practices should ensure close working relationships so that repeat dispensing service and repeat prescription service work well. This will ensure patients' medication is ready for collection at the right time for the patient each month. Pharmacists should ensure within this system that there is a conversation with the patient to check if any medication has changed.

Individual pharmacies should clearly display information on advice and services that are available to the public, as well as information on their staff and their qualifications. This will inform patients on the type of advice they may ask pharmacy assistants, dispensing technicians and the pharmacist.

Concerns raised by customers around the behaviour of some methadone patients is noted and consideration if given to future methadone service delivery.

Acknowledgements

We would like to thank the 213 people who completed our pharmacy questionnaire. The respondents completed the questionnaire either by visiting the survey link via the Healthwatch Hartlepool website or by means of face to face interviews carried out on site in pharmacies across the town.

We also want to thank Jane Harvey (Service Implementation and Peer Support Manager) and Lindsay Clode Training and Support Manager from the Tees Local Pharmacy Committee for their help in developing our questions and all of the pharmacy staff who gave us such a warm welcome during the course of our investigations.



Helping you find

the answers

What services do people want to know about?

People don't always know how to get the information they need to make decisions about their own health and care. Healthwatch plays an important role in providing advice and pointing people in the right direction for the support they need.

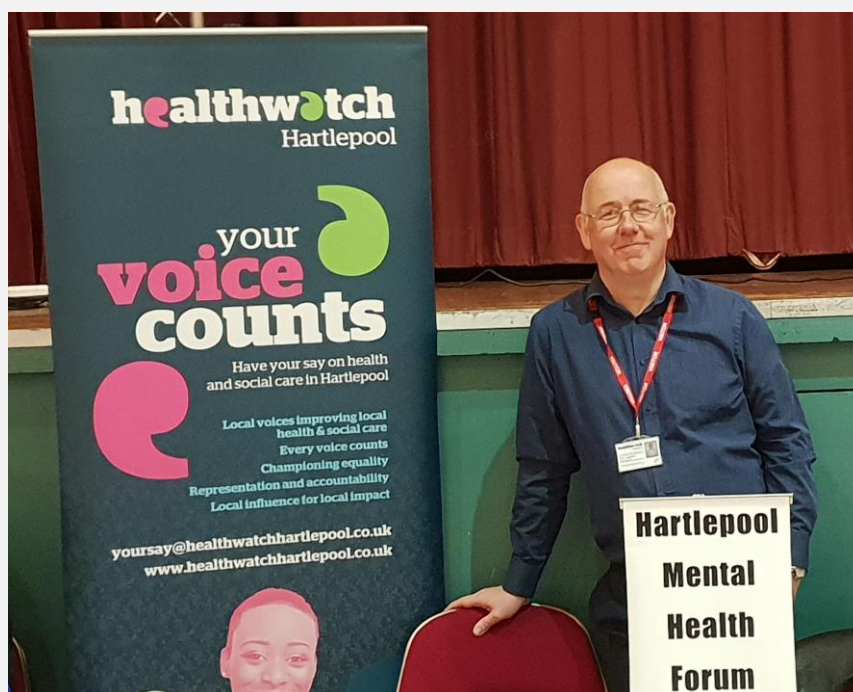
Here are the most common things that people ask us:

Who is responsible for the safe discharge of my loved one?

Why is it so difficult to access G.P. appointments in Hartlepool?

Why don't patients with autism or a learning disability fail to receive the same level of service as others at G.P. Practices?

Why are there not better transport facilities to get the frail, elderly and vulnerable to hospital appointments?



How we provide people with advice and information

Finding the right care or support can be worrying and stressful. There are a number of organisations that can provide help, but people don't know where to look. Last year we helped 1598 people access the advice and information they need.

You can come to us for advice and information in a number of ways including:

- + Specific advice and information blogs online
- + Our contact us form
- + At community events
- + Promoting helpful services across our social media channels
- + Over the phone

World Mental Health Day:

Zoe Sherry - Lead member for Mental Health

As the lead Healthwatch member for Mental Health I believe we have had a very busy and successful year. We have held and attended a variety of projects and events. Healthwatch continues to be actively involved with the local Mental Health Services. As well as being Mental Health lead I am also Chair of Hartlepool Mental Health Forum and also a Public Governor of Tees Esk & Wear Valley Mental Health Trust (TEWV).



The forum meets quarterly at Hartlepool's Centre for Independent Living (CIL) and is a group of people with an interest in all aspects of mental health. This includes professionals and non-professionals, Healthwatch members and the general public.

Once again, we celebrated World Mental Health Day with an event called 'Strictly Mental Health' in October. A big social gathering in the town's Borough Hall with music and dancing, free refreshments including soup from donations of vegetables from the local allotments. Also, many organisations had stalls promoting support and services within the mental health arena. More than 230 people attended the event. We could not manage without the support of our sponsors, public donations and Hartlepool Borough Council.

In December the forum held a 'working together for change' event which focussed on crisis care. It was well attended, and a future work plan was evolved from the day. As Mental Health lead I also represent Healthwatch Hartlepool on the 'Fundamental Standards' group of the Tees, Esk and Wear Valley Mental Health Trust (TEWV). This group takes part in visits to Trust establishments to report on services, changes, concerns and good practice

Healthwatch Hartlepool carried out an 'Enter & View' visit to Stewart House, a mental health establishment housing several services. This was a very positive experience.

Hartlepool CAMHS (Children and Adolescent Mental Health Services) were invited as guest speakers to a meeting at Healthwatch Hartlepool. The staff spoke about their service and recent developments, especially changes to the transition services. They are also operating a pilot scheme to support new referrals to the service which is being well received. Some of CAMHS service users are to take part in an Art competition for the forum to be displayed at this year's world mental health day event.

Roseberry Park Hospital is undergoing remedial work to its wards. This has necessitated patients being moved and has affected local people. The staff preferred to move with their patients, this made the move though necessary more acceptable.

Healthwatch continues to have two representatives at the Teeswide Safeguarding Board. One officer, and one member, who at present is the mental health lead. Safeguarding legislation continues to change especially around modern slavery and domestic violence.

Nationally Healthwatch England and NHS England held a meeting in London called The Mental Health Policy Forum, This was attended by one officer and myself as the mental health lead. This was to prove how well we do in the North East and how advanced we are in our service changes to meet the needs of the National Plan.

Healthwatch members continue to attend relevant meetings and training to enable it to support people wherever possible.

“Once again, our thanks go to the Local Authority and staff for their support. Also, all who help at events and promotional venues, especially Judy Gray and Amanda Burgess. Special thanks to Neil Harrison we are indebted to him for his invaluable knowledge, hard work and support.”

“Special thanks to Healthwatch Hartlepool for another informative year. The Mental Health forum has been key to supporting the development of a plan on a page identifying the key priorities for prevention in mental health. A report presented to Adult Services Committee by Healthwatch on Sensory Loss has supported the development of a Sensory Loss Strategy which is being coproduced by people with lived experience. Healthwatch Hartlepool continue to support the Teeside Safeguarding Adults Board in promoting an adult's right to live an independent life, in safety, free from abuse and neglect.”

NEIL HARRISON HEAD OF SAFEGUARDING & SPECIALIST SERVICES

Diabetes Awareness:

Evelyn Leck - Lead member for Life-long Conditions

Many people have been offered advice and guidance in respect of Life-long conditions. A special thank you must be made to Dr. Sony Anthony - Consultant Physician Diabetes Specialist and his team on our joint event for Diabetes Awareness for which they gave up their free time.

Over fifty people turned up to listen to Dr Anthony as well as our other guest speakers covering Podiatry and Diet. Thanks to the event members of the public were able to ask many questions and most important got the answers they required. The event was a huge success and attendees left telling us they feel better supported and more knowledgeable about their needs.



I believe Hartlepool Healthwatch has been incredibly successful in our work with North Tees and Hartlepool NHS Foundation Trust. We have undertaken several Enter & View visits and our recommendations have been warmly received by the Trust. The full reports can be found on our website.

We have developed a strong partnership with Hartlepool Borough Council staff and the North Tees Dementia Collaborative. This resulted in us collaborating to put a joined event - "Dementia -A Celebration of our Journey." I would like to thank all key partners who attended including Hartlepool Borough Council Staff, North Tees Dementia Collaborative staff, The Bridge, Hartlepool Carers, Fire Service, West View Advice & Resource Centre, the Memory clinic and everyone who attended. Over ninety people attended and feedback stated they were impressed with the help and support Hartlepool has to offer.

Once again Hartlepool Healthwatch, proves they can work with a wide range of partners to gain information for the people of Hartlepool.

"If you interested why not join our Hartlepool Healthwatch as a volunteer and Have You Say"

Share your ideas and experiences and help services hear what works, what doesn't and what you want from can in the future.

www.healthwatchhartlepool.co.uk

Telephone: 01429 288146

Email: yoursay@healthwatchhartlepool.co.uk

Are you looking for help?

If you have a query about a health and social care service, or need help with where you can go to access further support, get in touch. Don't struggle alone. Healthwatch Hartlepool is here for you.

W: www.healthwatchhartlepool.co.uk T: 288146 E: yoursay@healthwatchhartlepool.co.uk



Our volunteers



How do our volunteers help us?

At Healthwatch Hartlepool we couldn't make all of these improvements without the support of our 30 plus volunteers that work with us to help make care better for their communities.

What our volunteers do:

- + Raise awareness of the work we do in the community
- + Visit services to make sure they're meeting people's needs
- + Support our day to day running e.g. governance
- + Collect people's views and experiences which we use in our reports

Over the last year our volunteers have worked incredibly hard to champion the needs of residents. Some examples of improvements implemented by our partners through our recommendations are:

- + Better treatment for autism patients with diabetes
- + Made G.P. appointments more accessible for carers
- + Improved substance misuse services for those patients who have a mental health illness via our collaborative work with Hartlepool's Health & Wellbeing Board
- + Dementia sufferers should now be provided with appropriate products from the incontinence service

Enter & View

Thanks to the sterling work of our Enter & View Volunteers, services have made changes across Acute Care, Primary Care as well as Nursing and Care Homes. We visited 2 hospital wards, 3 G.P. Practices, a Pharmacy, a mental health facility and 4 Care Homes.

In terms of our hospital visits the Trust has developed an improvement plan that was escalated to the Directorate Management Team. Some of the recommendations implemented in respect of primary care cover such aspects as greater availability of on-line appointment making for those wishing to do so and referred practices to our Dementia Friends as part of our work for 'Dementia Friendly Hartlepool'.

Our Care Home visits were particularly useful in promoting independence for residents, promoting better hydration and we especially examine residents' dignity and respect. All our reports have been published on our website www.healthwatchhartlepool.co.uk and we always welcome and train new volunteers.

Meet our volunteers

We caught up with a couple of our fantastic volunteers to show you how their work truly makes a difference to the lives of people in our area.

Zoe Sherry – Lead member for Mental Health

I have been a volunteer at Hartlepool Healthwatch for approximately 9 years. At the present time I am the Mental Health Lead which also includes Safeguarding. I enjoy 'enter & view' visits, working on projects, and the opportunity to interact and support many people.

It is a worthwhile use of my time and I enjoy using my skills and being trained in new ones including relevant legislation and being informed about the local community and available public services. It is rewarding to be part of a team and help to inform and support people with concerns or issues that are related to all aspects of health and social care.

Margaret Wrenn - Chair Healthwatch Hartlepool Volunteer Steering Group:

I have spent all my working life in one or other of the branches of nursing, so when I retired I felt that I would be able to use the expertise I had gained, and that is why I volunteer for Healthwatch Hartlepool. Information given to us by local people on the services available within the Town sets the scene for the work we carry out.

We have been successful in many of the projects we have carried out, and the resulting information, in the form of a report put into the public domain. When we have made recommendations for changes in a service, these have normally been taken up, and the service changed for the better. Therefore, I feel we are successful as a group, and why I enjoy my volunteering role.



Volunteer with us

Are you feeling inspired? We are always on the lookout for more volunteers. If you are interested in volunteering get in touch.

w: www.healthwatchhartlepool.co.uk

t: 288146

e: yoursay@healthwatchhartlepool.co.uk

‘The views and stories you share with us are helping to make care better for our local community’

Tony Leighton
Patient and Public Engagement Officer





Our finances



How we use our money

Income	£
Carried forward from 16/17	33,362
Funding received from local authority to deliver local Healthwatch statutory activities	116,150
Income from Consultations	1000
Interest from Bank	38
Total income	117,188
Expenditure	
Operational costs	24,518
Staffing costs	96,750
Office costs	12,026
Total expenditure	133,294
Balance brought forward	17,256

The 2018/19 final balance includes Healthwatch liabilities in respect of notional redundancy costs but does not include monies owing @ £10,000 for additional work undertaken.



**Our plans for
next year**

What next?

The purpose of our future work programme is to set out the activities, priorities and outcomes expected from Healthwatch Hartlepool in 2018/19 and beyond. This will be delivered in accordance with our Governance Framework, meetings of associated task & finish groups, public meetings and service specification and will build upon progress made during 2018/19.

Acute Care

Following several further referrals into Healthwatch Hartlepool, we shall again review the Hospital Discharge Procedures and associated patient experience. In collaboration with Council's Audit & Governance committee we shall monitor the implementation of the recommendations in respect of Midwifery led service provision at the University Hospital of Hartlepool. We shall again monitor the feedback we receive from patients accessing services at the Hartlepool site of the North Tees & Hartlepool NHS Foundation Trust, monitor mortality rates and see if there has been any improvement into access to transport in line with the Equality Act 2010.

Mental Health

We shall continue to drive the work of the Hartlepool Mental Health Forum in closely monitoring the work & continued outcomes of the Crisis Care Concordat to ensure patient care and experience is maintained and improved. We shall monitor Safeguarding, Crisis and Community based services to ensure patient care and experience is being maintained or improved. We shall also monitor the impact of the ongoing reconfiguration of Tees, Esk & Wear Valley (TEWV) Mental Health Trust and collaborate with Hartlepool Borough Council again supporting the forum for World Mental Health Day 10th October 2019 due to the success of our previous events.

Primary Health

Again review the implementation of our key recommendations to GP's regarding our previously published 'Voice for You' report in respect of Health Checks for the cohort of population with a Learning Disability. Undertake a discrete piece of work 'Emergency' Dentistry. We shall also visit the Urgent Care facility now operating from Hartlepool Hospital.

Social Care

Look at the experiences of residents in Care/Nursing homes across Hartlepool in line with the Care Quality Commission (CQC) standards and Hartlepool Borough Council's. Undertake a range of new Enter & View visits in line with the opening of any new care homes within the Borough of Hartlepool providing nursing care as well as monitor the implementation of previous recommendations to Care Homes.

Life-Long Conditions

Organise and host seminars focusing on member led lifelong condition priorities. Commencing with an event covering Men's Health & skin conditions. Organise key investigations into the Health & Social Care support provided to Veterans and Offenders.

Patient and Public Engagement

Continue to develop and deliver a comprehensive schedule of activity, which will focus on engaging with the seldom heard and hard to reach groups.

We shall undertake some further demographic profiling to engage with local communities previously not targeted. We shall monitor the distribution of our leaflets and associated response to recruitment of volunteers. We shall continue to offer a service where we collate patient stories, which articulate patient experience as evidence for future work plans.

Message from our Manager

This is my third report for Healthwatch Hartlepool as a Charitable Incorporated Organisation.

Looking back

- + I am delighted that we have worked collaboratively across the region to ensure residents have had their opportunity to have their say on the NHS 10 Year Plan
- + I am so proud of our work around the emotive subject of cancer and promoting the support that is available to live well with and beyond cancer.
- + Early in our new year we will finalise our work around both of the above and I am sure we shall see better support for people with cancer, mental health conditions, heart & lung diseases, diabetes and dementia.

Looking ahead

- + Our future priorities are to ensure Mental Health receives the same priority as physical health, promote key services for those residents living with life-long conditions and work with Hartlepool's Health & Wellbeing Board in delivering their strategy in respect of substance misuse.
- + We shall achieve this through a range of events and collaborating with all our key partners.

Barriers and opportunities

- + It is ever more difficult to deliver our statutory duties with a reduced budget and increased operational costs.
- + The additional income sourced from working with partners shall enable us to continue to delivery of our service effectively.

Thank you

- + I feel, thanks to the staff, Directors and volunteers we have been incredibly successful this year in delivering our key priorities because of their rich mix of talent, expertise and contribution.



'Healthwatch Hartlepool is an efficient organisation. We work with stake holders to co-ordinate and link our community engagement activities where appropriate to help avoid duplication of effort, time and resources.'

Christopher Akers-Belcher
Healthwatch Manager

Thank you

Thank you to everyone that is helping us put people at the heart of health and social care in Hartlepool, including:

- + Members of the public who shared their views and experience with us
- + All of our amazing staff and volunteers
- + The voluntary organisations that have contributed to our work
- + The Mental Health Forum
- + Hartlepool Borough Council
- + Hartlepool Carers
- + Hartlepool's Audit & Governance Committee

“On behalf of the Audit and Governance Committee, I would once again like to thank Healthwatch Hartlepool for its commitment to the work of the Committee. Healthwatch continues to be an essential source of local views, comments and concerns, for the Committee in fulfilling its statutory responsibility to scrutinise service provision and challenge proposals for variations to services accessed by residents of Hartlepool.

Healthwatch continues to share information on a regular basis and has helped shape the Committee's annual work programme, resulting in the investigation of issues including the provision of maternity and mental health services over recent years. In addition to this, Healthwatch representatives have actively participated in the Committee's work around:

- *Regional proposals for the provision of translation and interpretation services and the transformation of respite care services;*
- *Monitor of the implementation of service changes (i.e. Assisted Reproduction services, GP services and Urgent Care services); and*
- *The development and review of statutory plans and strategies (i.e. the Joint Health and Wellbeing Strategy (2018-2025)).*

The views and opinions of Healthwatch continued to be of significant value to the Committee and we look forward to working together over the coming year.”

Councillor Gerard Hall Chair of the Audit and Governance

Contact us

Contact us

- + Contact number: 01429 288 146
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- + Website: www.healthwatchhartlepool

Address of contractors

The Legend of Skippy - providing IT, website, social network and print design support.

33 Kilwick Street
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- + Contact number: 07955 658 399
- + Email address: skippy@legendofskippy.co.uk
- + Website: www.legendofskippy.co.uk

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 in an alternative format please contact us.

healthwatch

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