

# Somerset County Council

## Somerset Health and Wellbeing Board

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### Healthwatch Annual Report

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	<b>Seen by:</b>	<b>Name</b>	<b>Date</b>
<b>Report Sign off</b>	Relevant Senior Manager / Lead Office (Director Level)	Christina Gray	11.09.17
	Cabinet Member / Portfolio Holder (if applicable)	Christine Lawrence	11.09.17
	Monitoring Officer (Somerset County Council)	Julian Gale	12.09.17
<b>Summary:</b>	The 2016/17 Annual Report, contains updates on progress and achievements during the past year. Highlights include:  1. Survey with local people regarding service use, which will help to inform the CQC and STP  2. Enter and view work into mental health inpatient services and the subsequent actions  3. Young Healthwatch research and findings		
<b>Recommendations:</b>	<b>That the Health and Wellbeing Board formally acknowledges the annual report.</b>		
<b>Reasons for Recommendations:</b>	Presentation of the annual report is a statutory requirement for local Healthwatch		
<b>Links to Somerset Health and Wellbeing Strategy:</b>	Healthwatch is a statutory member of the Health and Wellbeing Board and committed to supporting the delivery the Health and Wellbeing Strategy through its work.		
<b>Financial, Legal and HR Implications:</b>	None		
<b>Equalities Implications:</b>	None		

<b>Risk Assessment:</b>	N/A
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## 1. Background

- 1.1. Healthwatch Somerset is a voice for children, young people and adults in health and social care. Anyone can speak to Healthwatch about their experiences of health or social care services (including GPs, hospitals, mental health services, social care teams) and feedback what was good and what was not.

Healthwatch is led by an Executive Group made up mainly of lay people who oversee the work plan and who bring specialist knowledge to the project. We are grateful to all our volunteers, and to organisations with whom we have worked in partnership including Somerset Rural Youth Project, Swan Advocacy, Compass and many others.

- 1.2. This year has been a year of change, development and challenge across health and social care. We have seen changes to how some services are delivered: like the early supported discharge for stroke patients which Healthwatch has previously helped to evaluate. We have also been able to influence, including by formally supporting the proposal for the County to create a university to address local skills gaps.

It is also clear that the public is increasingly aware of what Healthwatch can offer them – as over 600 people took part in surveys to share their views this year.

We were also delighted to work closely with Somerset Rural Youth Project, a local voluntary sector organisation that works with young people, in order to empower young Somerset residents to have their say about a wide range of important health and social care issues.

- 1.3. *“All wards currently display notice boards with staff pictures with Job titles. The uniform policy is being reviewed but once completed then this can be added to inpatient notice boards for information”*  
- Somerset Partnership response

Healthwatch worked with local commissioners to talk to people who have had a stroke about their care. A model of care called Early Supported Discharge is now being used in Somerset to help people who have had a stroke return home more quickly and get back to everyday life. Overall, the feedback about the Early Supported Discharge service was excellent. *One gentleman shared his joy at being able to rehabilitate and build up his strength whilst doing his gardening at home.*

We spoke to people about their use of services and those who spoke to us showed relatively little appetite for visiting an unfamiliar **GP practice** or seeing a professional who is not a GP – which shows that *there is lots of work to do to win patients over if NHS planners intend to implement new approaches to the provision of primary care.*

However, **if a GP is not available**, a clear majority of respondents would favour contact with a *nurse* for support.

Experiences of **NHS111 and NHS Choices** appear to be highly polarised, though *positive experiences generally outweigh negative experiences*. Respondents who have experienced good outcomes were strongly favourable and language used was very positive “excellent”, “high quality”, “useful”.

This year, the volunteers have taken a close look at **mental health inpatient** services. This has resulted in a series of recommendations which are being used to *monitor the quality of mental health services* for local people.

We heard accounts of patient dissatisfaction with a local **orthotics** service from our advocacy partner SWAN advocacy, and via personal testimony shared by a patient with our Executive Group. *We’ve asked challenging questions on their behalf to try and support them to improve their outcomes, and we are looking further into this matter in 2017/18.*

Healthwatch continues to develop our reach and visibility and has successfully advocated on behalf of hundreds of patients, carers and members of the public this year.

## **2. Options considered and reasons for rejecting them**

2.1. N/A

## **3. Consultations undertaken**

3.1. N/A

## **4. Financial, Legal, HR and Risk Implications**

4.1. N/A

## **5. Background papers**

5.1. Healthwatch Annual Report 2016 - 17