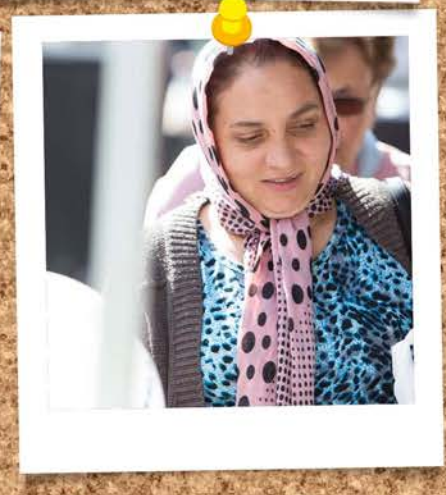
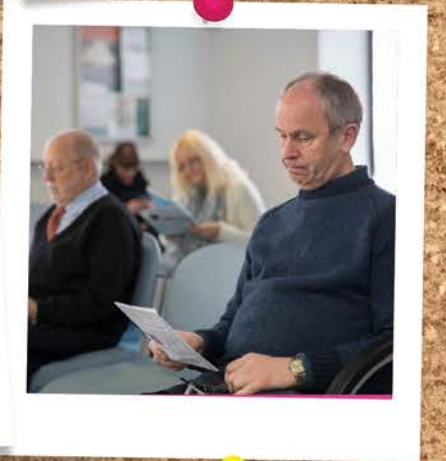
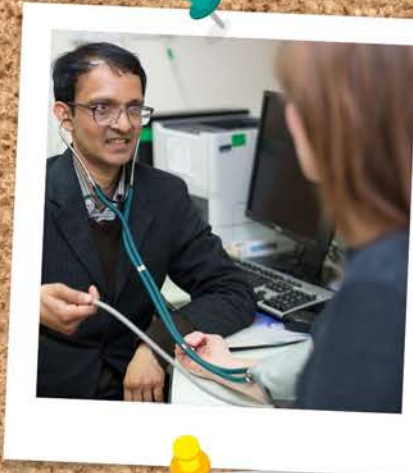
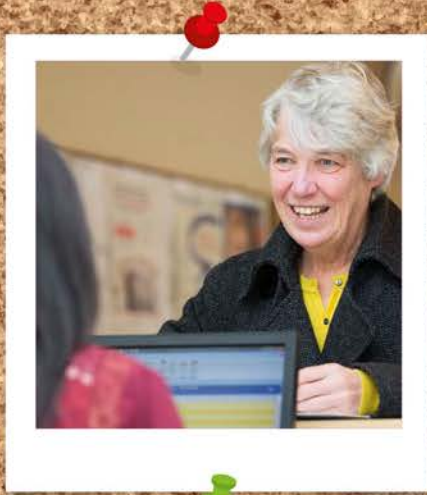


Healthwatch Thurrock

Annual Report 2016/17





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Message from our parent company

Healthwatch Thurrock is a project of Thurrock CVS. We were pleased to report at the end of last year that a new staff team was in place for Healthwatch Thurrock and I am pleased that this year we have seen the benefits that the new staff team has brought to the organisation.



Healthwatch Thurrock has been able to return to producing the volume and quality of work it had previously and they have extended their community engagement to include working with children and young people. In 2016/17 they exceeded their targets on gathering views from the residents of Thurrock on the Health and Wellbeing Strategy 2016-2021, For Thurrock in Thurrock and Adult Social Care implementation of charges for equipment and services. The Board of Thurrock Council for Voluntary Services (CVS) and I would like to thank the staff for the endless enthusiasm and professionalism to their work over this year.

We will continue to work closely with Healthwatch Thurrock over the coming year as the benefits we are able to achieve together by sharing resources enables us to reach a wider, more diverse audience.

Our operational plans for 2017-18 already have a number of community engagement events scheduled.

Healthwatch Thurrock would not operate as successfully as it does without the support of the advisory group who provide their expertise in developing and shaping the projects operational plan. We would like to thank the members of the advisory group for their time and commitment to Healthwatch Thurrock.

As we enter 2017-18 we recognise the challenges that lay ahead in Health and Social Care and the ever increasing importance that Healthwatch Thurrock has in ensuring the voices of people are heard at every level on areas that affect them.

Kristina Jackson

Chief Executive - Thurrock CVS

Message from our Chief Operating Officer: Kim James



2016/17 has been another busy but successful year for Healthwatch Thurrock. Although only a small team the support we get from our overarching organisation Thurrock CVS has allowed us to expand our reach around the borough, resulting in us being able to gather the views on various health and social care topics from over 31,000 residents, a number that we are very proud of.

Last year we said we needed to do more with children and young people, and our children and young people worker Faith has done just that. A large proportion of those voices gathered have been from children and young people. They have fed into the plans around health going forward, they have told us their experiences of mental health support for them, their experiences around bullying, and their views on green spaces and activities within the borough.

We have spoken to looked after children and young carers. Their views and experiences have been fed into the Health and Wellbeing Strategy for Thurrock, and we have listened to the parents and carers of children with disabilities and ensured their views have been heard during commissioning of services affecting them.

Throughout the report you will be able to see examples of the work we have carried out, a breakdown of the numbers of people spoken to, examples of the projects we have run and feedback from some of those we have been able to help. There are also some real voices, not only from those who have used our service in one way or another, but from professionals who we have worked with to make Thurrock a better place for all who live here.

I am proud to present Healthwatch Thurrock's 2016/17 report.



Highlights from our year

This year we've reached 1575 people on social media.



Our volunteers help us with everything from outreach to administration.



We've visited 25 local services in Thurrock including 9 Childrens Centres, 10 GP practices, 2 hospitals and 4 community hubs.



Our reports have tackled issues ranging from Blood Testing Services to Mental Health Services.



We've spoken to over 8,000 people about the For Thurrock in Thurrock CCG programme.



We've met hundreds of local people at our community events.





Who we are

As Healthwatch Thurrock, we form part of the national network of over 150 Local Healthwatch's in England, with a local Healthwatch in every local authority area in England.

We aim to give citizens and communities a stronger voice to influence and challenge how health and social care services are provided within Thurrock. We signpost, provide advice, information and support people to help them make choices and informed decisions around health and care services.

Our organisation is a project under Thurrock Council for Voluntary Sector (TCVS); we are overseen by their CEO Kristina Jackson and by their Board of Trustees. The Healthwatch Thurrock Team are proud of the work we do in supporting the community to have a voice and enabling some small and some significant changes to planning, commissioning and delivery of health and social care services in Thurrock.

We never underestimate the voice of the people.

Our vision

Healthwatch Thurrock aims to enable people, communities and organisations in Thurrock to have a say and influence the planning, commissioning and delivery of Health and Social Care services to improve the health and wellbeing of patients, the public and service users.



Figure 1: Map of Thurrock wards

The Borough of Thurrock

Thurrock is located to the South East of the county of Essex, it is a unitary borough, and lies by the River Thames to the east of London. The borough has a growing and ageing population of 165,200 people¹. Thurrock also has a relatively young population compared to England, but as people live longer, the proportion of our population aged over 65 is predicted to grow faster than the general population. We believe an integral part of our work is to ensure that we reach as many individuals of these groups as possible within our community.

¹ <https://www.nomisweb.co.uk/reports/lmp/la/1946157204/report.aspx?town=THurrock#tabresp>

Our Team

We are a small but mighty team as outlined below:

Kim James: Chief Operating Officer

Andrea Valentine: Team Leader

Samson Odubanjo: Development Outreach Officer

Faith Stow: Child & Young Person Lead at Healthwatch Thurrock

Julie Evans: Administrator



Andrea Valentine
Team Leader



Kim James
Chief Operating Officer



Faith Stow
Child & Young
Person Lead



Samson Odubanjo
Development
Outreach Officer



Julie Evans
Administrator

Figure 2: The Healthwatch Team



*What you told us
about what you
think of services*

Listening to local people's views

We aim to reach as wider population in Thurrock as possible. To do this we speak to and listen to people in a variety of ways. We provide an outreach service within the community, we have a direct telephone line manned Monday to Friday 9-5 and we use social media which is regularly updated by our social media officer in Thurrock CVS.



Figure 3: Part of our Summer Events 2016 involved giving out hundreds of balloons

How we have worked with Children and Young People

We have a designated Child and Young Person Lead whose role it is to get out into the community and speak to young people and the parents of children about their views. In the year 16/17 we have worked with children and young people in Thurrock by visiting and attending a number of groups. This includes Youth Clubs, the Youth Parliament, the Children in Care Council (CiCC) and Young Carers group. We place ourselves in the community and have held a number of stands at two of our colleges in Thurrock, two of which were at

the Fresher Fair events. This gives us the opportunity to speak to a high number of students, introducing them to what support we offer as a local Healthwatch, gather views and to recruit Young Person Volunteers.

If we are speaking to a group, we plan ahead, we work to a theme and we try to be creative. A popular tool this year has been the *"Higher or Lower Game"*, this is where we put figures to NHS services and the group decides whether the costs are higher or lower. This often sparks a debate within the group and encourages people to get into the frame of mind about thinking of particular health services.

How we have worked with older people (over 65).

Throughout the year, Healthwatch Thurrock has engaged with different older peoples groups in the Borough ensuring their views are captured in fulfilment of our main objective, championing people's voices. A few of the groups we engaged with include the Over 60's Club at the Thurrock Rugby Club, the Over 50's Club at Cowdray Hall, Pally Club at Stanford Le Hope, Spring House Guild, Corringham, Fobbing Ladies Lunch Club etc. We also engaged with the Elderly people in the Sheltered Housing Complexes Borough wide to gather their views on the Essex Success Regime, plans on For Thurrock in Thurrock and the Health Hubs with a lot of feedback gathered.

Working with people who are disadvantaged or vulnerable

We have strong links with the third sector in Thurrock. There are numerous support groups in Thurrock which we work closely with. For example, Stroke Club, Art Group,



Figure 4: Sharing your view

Breathe Easy Group and CaPa. All these groups provide a safe place for people to meet, to support each other, to meet health professionals and to share challenges they face on a day to day basis. We try to meet with these groups on a regular basis and invite individuals to various events where local decisions are influenced e.g. Essex Success Regime meetings.

What we've learnt from visiting services

We carried out a number of Enter and Views in 2016/2017 in health and social care services.

Blood Testing Enter and View

Blood testing services in Thurrock has recently changed to a new method of appointment booking: 50% pre-booked

appointments and 50% walk in at Orsett Hospital and an appointment only service at Basildon. We visited both hospitals to observe how the system was working and to ask people their views on the updated system, and whether it is working for people. We had 222 surveys completed, 101 of these being online and 121 in person. We did however speak to many more people in general about pathology services.

We found that 75% of people said they preferred to be able to pre-book their blood testing appointments (both on line and by telephone). 12% of people preferred to walk in and 13% didn't mind either way.

Why? Because those that booked online felt it was more convenient and shorter waiting times. All those we spoke to that had booked on-line appointments were happy as they felt there were plenty of appointments to choose from to fit in with their schedules. Those that preferred walk in appointments were often because of no access to a computer and/or having to rely on public transport to get them to the appointment on time. We received many comments stating that the telephone service took a long time to answer and some patients had even taken around 3 days to book by telephone.

Some comments from patients around the views of the new blood testing appointments arrangements:

"Saves me sitting around indefinitely, especially on busy days and when in for a fasting blood test."

“I think the new booking system offers choice and flexibility for patients and helps to manage resources for the service provider.”

“Good experience of the system so far, seems smoother and more convenient”

“It's so nice to know that I won't have to wait ages to have a test and the staff seem so much happier!”

Views from those using the Blood Testing Service

During the Enter and View at Orsett Hospital we spoke with some people queuing for blood testing who were able to inform us they were waiting for INR testing (International Normalised Ratio - A finger prick test that shows how long it takes the blood to clot). There were about 30 people in the queue, all of whom seem to have been given the same appointment time and many of which had arrived an hour early so as to be seen first so they could get on with their day or jobs. This test is only available on a Tuesday afternoon and these patients queue in the same place weekly, blocking both the lift and the stairs. They were then provided a numbered card and had to continue to queue down a different corridor before they were called in.

One lady that we spoke with and offered a seat to stated she had not sat down in the three years that she had been using the service. There was no seating area and if these patients sat in the pathology seating area they lost their place in the queue. This INR service is not part of the Pathology First service but is an NHS service. We contacted the Interim Director for Basildon and Orsett Hospital. He had not been made aware of this situation before and was very unhappy that patients were in this situation. Within a week of notifying him, he had investigated this issue and improved the service system to ensure patients are given a separate allotted time. This is a very positive outcome from one of the Enter and View visits.

Proof that peoples voices count.

GP Practices Enter and Views

Healthwatch Thurrock has taken on a piece of work to support all Thurrock GP Practices in enlisting volunteers for their Patient Participation Groups (PPG's). Patient Participation is about patients and practices working together to:

- Improve communication between GP's, practice staff and patients.
- Enable patients to look after their own health, with the support of their GP and practice staff.
- Discuss topics of mutual interest to the practice and its patients.
- Encourage improvements within the GP practice through the adoption of change in practice or structure.
- Increase patient satisfaction with the service they have.

This piece of work has been commissioned by Thurrock Public Health and we are working towards every GP practice in Thurrock having a Patient Participation Group. It is a contractual requirement for all practices to form a patient participation group. Having a PPG is already the norm for many practices and is expected for CQC inspection, however there are still many practices in Thurrock that do not have a PPG of their own.

We have been able to attend several practices, sit in their reception areas and give information on how a PPG works and ask patients if this is something they would be interested in whilst gathering their thoughts and ideas.

This has been a difficult approach as most of the people that we have spoken with are in the surgery because they are not well. We are now looking at a different approach and holding coffee mornings and afternoon teas in the local community hubs where we hope to meet and reach more of the community.

A PPG Network Group meeting has been set up by a local PPG member whereby they meet up with the chair persons from other local PPG's and work together problem solving and information sharing. This has been instrumental in setting up PPG's and supporting each other.

The general views of the people we spoke with during the Enter and Views was that they felt let down by their GP practice, i.e., waiting times, not seeing the same GP and general state of the NHS. We were able to inform patients what a difference being a member of their PPG could make to their practice and how they would be able to support others within their own communities.

This piece of work is ongoing and with continuous hard work and determination Healthwatch Thurrock hope to see a Patient Participation Group in all of its GP Practices in the future.





*Helping you
navigate local
services*

How we have helped the community access the care they need

We have a dynamic role in ensuring Thurrock people have the most current information about the services they may need in health and social care. During 2016/17 we gave advice, information and signposted over **750** people (not including event and outreach work). We were able to reach **1,575** people on social media.

Mental Health Services in Thurrock

In 2016/17, one of our priorities was to carry out work around mental health services in Thurrock. We wanted to know peoples experiences of the services they had used and what people's awareness was around services that support mental health. During this engagement we also provided information on local services that support mental health including support available in schools and higher education.

We carried out engagement around mental health from 10th September to 10th November 2016. We spoke to **126 young people** aged 10-18 years and **61 adults** aged 19-82 years. We engaged with people out in the community at community hubs, support groups, youth clubs, young carers group and Fresher's Fairs. We also had an online survey.

Young people we spoke to were able to share that *stress, sleep problems, a lack of interest and anxiety* were the most common mental health problems they had experienced in the last three weeks. The worrying thing was that many people said they would *do nothing about it*. This could be due to people not knowing where to seek help, or how to seek help. The individual may not recognise that they should seek support or feel that their mental health status warrants the help if

they weren't to feel it serious enough. Alternatively it may be due to stigma.

"I would like more support/assistance and more people to talk to about mental health."

"I would like more provision of Youth Groups, more things for young people that won't cost money. We need better investment in Mental Health Services."

"Counselling on problems we experience in school and outside of school."

Thurrock residents aged below 18

It is important that efforts are made to continue reducing the stigma around mental health and to make it easy for people to seek the help they need. Schools and colleges having the most contact with young people must ensure that they work to raise the profile of help for mental health.

"Help create less of a stigma around mental health and using the mental health services. Listen to young people more - be less dismissive."

Young Carers member

Of the adults taking part in this survey, a majority (40% saying no - 26% were unsure) felt there wasn't enough support for parents in Thurrock, when asked to elaborate the themes centred on services provided by children centres (e.g. the stay and play, speech and language sessions) and more support for parents of children with disabilities. Adults seemed to know and understand what support is available

locally to them with regards to Local Area Coordinators and where to seek help for mental health issues. Very little responses were about the new community mental health services provided by Inclusion Thurrock.

At Healthwatch Thurrock we continue to work with our stakeholders and signpost people that come to us to this service when appropriate.

In a recent Joint Strategic Needs Assessment (JSNA) by Thurrock Public Health², it was identified that recorded levels of depression in some areas of Thurrock (such as Purfleet) were lower than expected. This non-identification of depression in the Thurrock population could be due to a number of factors including:

- Patients not presenting (typical of disadvantaged areas).
- Under-doctoring/lack of appointments for patients who may not feel it is worth continuing to try to get an appointment due to their depression.
- Missed opportunities to diagnose - when patients may present with other long term conditions (LTCs).

When we spoke to the Stroke Club, it was made clear to us just how much having a LTC, or living with someone with a LTC, can impact on somebody's life and therefore affect their mental and emotional state.

The recommendations produced with this report are set out for the local authority

(LA): Thurrock Council to consider and are based on the data we have collected within our surveys.

Recommendations

Some of our recommendations from the mental health report are shown below:

- Increase the awareness of support for parents with children who have disabilities and make it easier for parents to access this support.
- Provide disability support groups and ensure sessions at the Thurrock Children Centres are suitable and accessible to children with a disability. Improve children's emotional health and wellbeing.
- Some of the young people we spoke to (45%) did not know about the offer of help available within their school or college for mental health concerns. This suggests that more needs to be done within schools/colleges to raise the profile of the help available and to promote a culture of asking for help when needed, rather than doing nothing. Make it easy for people to seek help, e.g. through use of social media or an app.
- Continue to strengthen social relationships and opportunities for community connection for individuals and families, especially those in greatest need e.g. the most vulnerable and isolated. For example through use of the Local Area Coordinators.

² Thurrock Public Health 2016: A Needs Assessment to inform the Regeneration of Purfleet and a new Integrated Healthy Living Centre, pp. 92-93.



*How we have
made a
difference*

seen your
GP recently?
Have you
visited
Care Home?
What was it like?
Tel: [redacted]

How your experiences are helping to influence change

Health and Wellbeing Strategy

Thurrock has an updated Health and Wellbeing Strategy for 2016-2021. This was an excellent opportunity for us to engage with Thurrock Residents around the strategic goals and what this means for them. We carried out engagement over an 8 month period. Each goal report included recommendations based on our engagement which will help people to achieve these goals.

For Thurrock in Thurrock

The For Thurrock in Thurrock programme sets out newly developed transformation plans as worked out by the NHS Thurrock Clinical Commissioning Group (TCCG). This plan sees a new model of healthcare that places a greater emphasis on neighbourhood based care across Thurrock. The plan also sees the creation of four new Integrated Healthy Living Centres in Thurrock. The Health and Social Care Teams will work more closely together to deliver care closer to Thurrock residents, moving away from the current more complex system. As shown in the Joint Strategic Needs Assessments (JSNA) completed by Thurrock Public Health, the Integrated Healthy Living Centres will provide to the health and care needs of the local population addressing a number of issues such as: population growth; wider determinants of health (e.g. housing and debt services) and local health concerns which vary across the Borough. The plans will result in less fragmentation of care services with less reliance on services from outside of Thurrock. By focussing on local care with greater integration between

providers, the plan is to make the best use of Thurrock's funds and resources to pay for healthcare in Thurrock for Thurrock people.

We spoke to over 250 Thurrock residents and distributed over 4000 leaflets about the transformation plans set out by the TCCG. People overwhelmingly agreed with the plans to improve health and care. From the responses gathered around which services people would like to see within the new centres, blood testing was the most common request. Local blood testing would improve many people's health services experience, especially those who require regular check-ups, who are often experiencing the most ill health and have the most difficulty travelling far. Of all responders, **93%** agreed that having services provided more locally would be of benefit and the overall consensus was very positive about the proposed changes.

Thurrock residents did express a number of concerns; greatest concerns were around the current lack of healthcare professionals working in Thurrock. It is known that there is a shortfall in doctors in Thurrock, this has led to growing waiting times and difficulty getting GP appointments hence "waiting times" being high up on the agenda of people's concerns. It is hoped that the Healthy Living Centres will be able to address the shortfall in Doctors and go some way to making it easier for accessing services in Thurrock.

The Mid & South Essex Success Regime

The Mid & South Essex Success Regime (ESR) is currently one of three transformation programmes in the country. The Success Regimes focuses on areas in England where there are deep-rooted, systemic pressures within the NHS services. The aim is to improve health and care where these systems are managing financial deficits or issues of service quality or both. The Success Regime enables management and financial support to local services delivery and will help to unblock any barriers to change.

We worked with the ESR NHS England Team to ensure that the Thurrock community that use NHS services were aware any changes they should expect to see. We spoke to over 3,000 people and had **235** people complete our survey thus enabling us to gather the views and voices of many residents over this period of engagement.

The findings showed that people understood the need for the health and social care system to undergo improvements in order to address the current pressures on the system, such as: the NHS funding deficit in Essex, population growth and an ageing population in Thurrock. Over **90%** of people we spoke to agreed that there needs to be systemic changes. Thurrock residents recognise that having a more joined up health service not only has financial benefits but creates greater confidence of the system itself. Peoples greatest concerns were around the health and care system not being adequate enough to support them and care for them

when they become ill. The quality of that care was also a concern. It is known that there is a shortfall of GP's in Thurrock, this has led to growing waiting times and difficulty getting GP appointments hence "improved waiting times" and "accessing services made easier" being high up on the agenda when people were asked what one thing they would change about the health and care system.

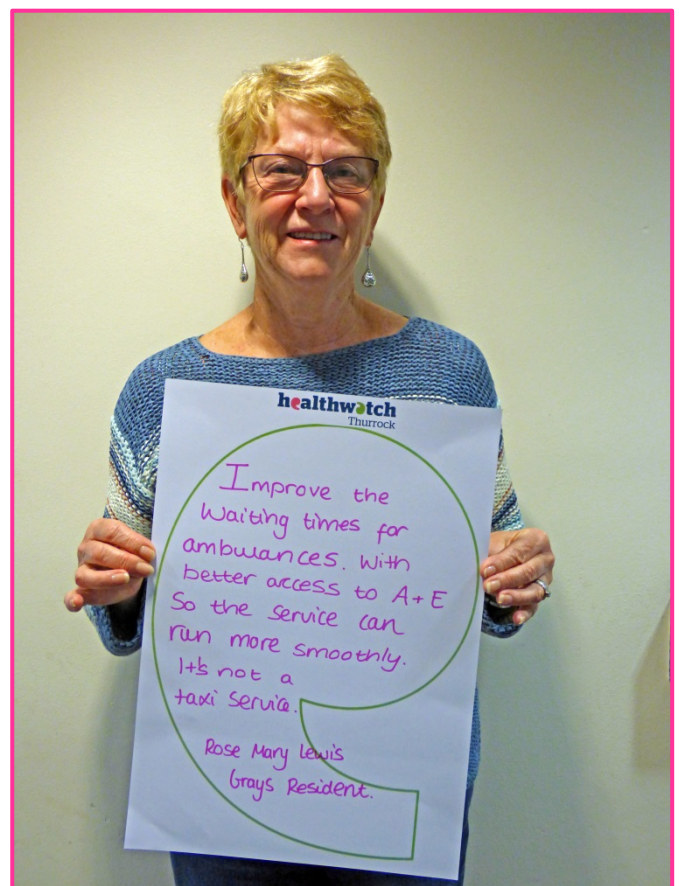


Figure 5: Sharing your view

Healthwatch England

Our reports are sent to Healthwatch England and made available on our website. This provides them with a local insight of Thurrock and the health and social concerns specific to Thurrock. Last year at the Annual Healthwatch Conference we shared knowledge by entering into one of the awards. We did not win, but it was an excellent learning experience with lots of information and stories shared from other local Healthwatches around England.

Testimonials

Basildon and Thurrock University Hospital

“Our relationship with Healthwatch Thurrock is absolutely key to helping us improve the care we offer the communities of Thurrock. The team at Healthwatch are not afraid of raising the concerns and issues of local communities and have supported us in reviewing services where there have been concerns and supporting us to make the improvements we need to the way in which we work. I look forward to continuing to work with Healthwatch to strengthen our relationship further to drive further improvements in our care”.

Tom Abell, Deputy Chief Executive - Basildon and Thurrock University Hospital Foundation Trust

Thurrock Clinical Commissioning Group (TCCG)

Thurrock CCG has a close working relationship with Healthwatch Thurrock. We have joined forces for at least eight separate engagement and public communication projects, including consultations around the Essex Success Regime and the Sustainability and Transformation plans. Healthwatch Thurrock also works with us to feed in to and distribute our joint Newsletter, for Thurrock in Thurrock.

By working together, we are able to make contact with many more people than our traditional routes of consultation and involve them on any proposed changes to health and care provision in Thurrock. We look forward to continuing this working relationship with the next patient engagement event for the Success Regime this March 2017 and beyond.”

Mandy Ansell, Accountable Officer -Thurrock CCG

NHS Organisations

“It has been a pleasure working with Healthwatch again over the past year. They have managed to get the balance of independence when needed, but working together to improve care and support people just right. They give people in Thurrock a voice and are well respected by all.

Tania Sitch, Integrated Care Director for Thurrock (NELFT and Thurrock Council)

Public Health Thurrock

Healthwatch Thurrock led the consultation and engagement process for Thurrock’s Health and Wellbeing Strategy. Their approach has meant significant numbers of people representing a variety of Thurrock’s communities being able to make their views known and influence both the Strategy’s focus and its delivery. Their strong voice on the Health and Wellbeing Board means that partners are held to account for listening to, actioning and responding to what people have said.

Ceri Armstrong | Senior Health and Social Care Development Manager | Adults, Housing and Health

We are very lucky in Thurrock to have such a pro-active Healthwatch. The level of community engagement and ground level intelligence is outstanding.

Roger Harris | Corporate Director of Adults, Housing and Health

How we've worked with our community

We see it as a Healthwatch priority that we work with our community to encourage groups and individuals to attend events/meetings where decision makers are present. For example as with the Essex Success Regime, there have been a number of events held where we have ensured that representatives from the Thurrock community are able to have their say. We use social media, our quarterly newsletter

and also outreach engagement to feedback important news such as changes to healthcare or social care in Thurrock.

The summer period for us is an excellent opportunity to get out and speak to Thurrock residents. The annual Big Lunch event in Grays Park is very popular; we hold a Healthwatch Thurrock stand in the park and are able to speak with hundreds of people in a short space of time. Last year we had over 80 surveys completed which informed one of our reports at the time.



Figure 6: The Big Lunch in Grays Park 26th July 2016



Date	Event	Location	Event type	Estimated No. contacts made	No. Completed Surveys
Jul-16	East Tilbury Community Fun Day	East Tilbury	Community fun day	100	22
Jul-16	Community Event	Chadwell Heath	Council Housing Event	80	15
Jul-16	St Stephens Fun Day	Purfleet: St Stephens Church	Community fun day	300	9
Jul-16	Big Lunch	Grays Park	Community fun day	500	84
Jul-16	Open door event	Grays: Hathaway Academy	Community fun day	150	32
Aug-16	Thurrock Parkinsons Group	Stifford Clays: Social Club	Social Event	65	0
Aug-16	Grays Market Day	Grays Town Centre	Market stand	150	20
Aug-16	Tilbury Fest	Tilbury: Anchor Field	Community fun day	150	28
Aug-16	South Ockendon Centre Fun Day	South Ockendon	Community fun day	45	9
Aug-16	Chafford Gorge	Chafford Hundred	HW stand	10	9
Aug-16	Stroke Association Meeting	Grays	Community group	25	17
Aug-16	Beacon Family Fun Day	Chafford Hundred	Community fun day	50	19
			Total	1625	264

Figure 7: Summer Events engagement

Our Chief Operating Officer, Kim James, attends the Health and Wellbeing Board Meetings to champion the local peoples voices. We have worked closely with the board members over the last year, with our Health and Wellbeing Strategy Engagement carried out for almost a year.

In the last financial year we have had a volunteer recruitment drive. Each volunteer role is flexible and suited to the individual with regards to duties, times and skills gained. We have roles that include: *Administrator; Volunteer Coordinator; Young Person Volunteer and Outreach Volunteer.*

A woman with dark hair, wearing an orange safety vest over a black top and a pink lanyard, is shown in profile, looking to the left and speaking. The image features two large, semi-transparent circular overlays. The first is a blue circle on the left containing the text 'Making people's voices heard'. The second is a green circle on the right containing a logo with the text 'healthwatch.co.uk'.

*Making people's
voices heard*

healthwatch.co.uk

In focus

Primary Care demands and pressures

Thurrock, much like many parts of England, has experienced issues with primary care.

The demand for primary care in Thurrock has been steadily increasing due to an increasing population, a shift in population in terms of people moving in and out of the area and changing demographics. There are also vast health inequalities within the borough. What we have been experiencing at the same time is a reduced GP workforce due to there being challenges in recruiting GPs into Thurrock. These factors have contributed to the demands and pressures on the primary care system. In the last couple of months we have been taking calls on a weekly basis where we have advised members of the public how and where they can get registered to a GP in Thurrock. A couple of practices have closed their books now due to demand pressures. August last year, one of the GP practices was set to close due to the building being repossessed. We were concerned about this; the practice is an area which is isolated in terms of geography and serving public transport and also in an area of higher deprivation. There is only one other practice in the area. We raised our concerns with NHS England staff, our local authority Public Health Team and with Thurrock CCG. We helped these staff members with arranging events where the public had opportunities to voice their concerns.

The outcome was that the practice has remained open and the local authority is looking into ways they can purchase the building. **More proof that your voice counts!**

Helping our clients with grief

We occasionally receive complaints around end of life care/treatment. We work closely with the St Luke's Hospice in Thurrock, St. Luke's Hospice provides specialist palliative care for people living in the Basildon and Thurrock districts with any life threatening, life limiting disease. A member of the St. Luke's Hospice sits on our Advisory Board.

Last year we worked with a client who had sadly lost a close family member to cancer. We initially signposted the client to POhWER, a NHS Complaints Advocacy Service, as she felt she had a complaint to make around the end of life care her brother had received. The signposting process continued, including her GP, St Luke's Hospice for bereavement counselling, Inclusion Thurrock and the Local Area Coordination Service.

The complaint was outside of the usual time limit being that for the last 3 years she had been grieving. The client felt upset that *'a time limit had been put on their family's grief'*. However, the client had found it therapeutic to write the complaint and get her thoughts onto paper. The outcome was that the:

- Thurrock Clinical Commissioning Group (CCG) read and acknowledged client's complaint. Thurrock CCG will be more aware for future cases.

- Client had advised others of POhWER advocacy and need to complain within 12 months i.e. empowering others, sharing learning

The client fed back that she was extremely grateful for advocacy and for the support and empathy she had received during a very difficult time in her life. This client had previously avoided seeking help however, she now feels that she can encourage others to seek support and engage in services.



Our plans for next year



What next?

Healthwatch Thurrock has had an amazing year. We have spoken to a record amount of people about their services and what matters to them, we have, with their voices, been able to influence some major decisions. We have supported some of the most vulnerable within our community to be heard and more importantly they have had feedback from those who are the decision makers. We feel rightly, very proud of the work the team have achieved.

We are about to enter into our own Tender process, and the outcome of that may well decide the future of Healthwatch Thurrock. We can only hope that we are able to carry on the way we have been working. The residents know us, they know where and how to contact us, and they know we will do all we can to help them. The tender process unfortunately has meant we have lost a couple of valuable staff members, who for personal reasons felt this was the right time to move on and we wish them every success. They have stayed within the Borough, so we will still have a relationship with them.

We have as a team, with our advisory group, our volunteers, Thurrock CVS and the communities of Thurrock put together next years work plan with some priorities identified through our engagement work. This will be reviewed at the end of the tender process to see if it fits going forward, those priorities are;

- Mental Health Services
- Family Planning Services
- Domiciliary Care
- Primary Care
- Social Care Assessments
- Building PPG Membership

Thurrock is also within a Success Regime/ STP (sustainability and transformation plan) footprint and this is highlighting some significant re design of services, Healthwatch Thurrock will be very heavily involved in this work going forward to ensure the residents of Thurrock have a chance to have their say on the issues that affect them and that are important to them. Some of this work has begun and we have already supported many residents to have their say in the early stages. We will ensure that they have an opportunity to be heard at every step going forward and HWT will use our seat at the Statutory and Programme Boards to ensure we bring true representation of the citizens of Thurrock.



Our people

Decision making

Healthwatch Thurrock's goal is to ensure that we gather real voices, opinions and the interests of our community. The people within our community are at the heart of everything we do.

Our approach is characterised by openness and transparency.

To ensure that we are held accountable we have an advisory group made up of volunteers and some local services. Any new pieces of work, consultations or changes are put forward to the group for their opinions, debate and advice.

Healthwatch Thurrock is not set up as most other Healthwatch organisations across the country, we are not a CIC or a charity in our own right, we are a small organisation within a unitary local authority area, and have a budget to match.

We are a project underneath Thurrock CVS, this allows us to have HR and Finance cover, office space at a reduced rate and the relationship allows us to feed into over 500 voluntary Organisations and charities across Thurrock.

Thurrock CVS as the overarching organisation hold the contract for Healthwatch Thurrock and are therefore responsible for the delivery, the budget and ensuring it remains compliant with its contractual obligations. The Thurrock CVS Board of Trustees meet bi monthly and the Chief Operating Officer reports to them at every board meeting. One trustee sits on the Healthwatch Advisory Group to ensure that work and spending being agreed by the group is within both the contractual and statutory powers of Healthwatch.

Between the Trustee Board and the Chief Operating Officer and staff there is an advisory group, these are all volunteers and is made up of service users, PPG members, local support group representatives, community leaders and residents of Thurrock, it totals 12 members. They attend bi monthly meetings, where the day to day running of Healthwatch is discussed and the work plans are agreed and signed off. Concerns/issues around services reported to Healthwatch Thurrock are discussed and plans are put in place. Any Enter and View work is also discussed and agreed. All events/meetings are costed, discussed and agreed by the group.

Members of this group also take part in Enter and View, attend meetings representing Healthwatch, sit as an independent person during procurement exercises and also man Healthwatch Thurrock stands at events to promote Healthwatch Thurrock work.



How we involve the public and volunteers

We hold regular public meetings and using our prioratree (this is a large freestanding board tree made by a local art group for us), we invite people within the community to highlight what should be a priority for Healthwatch Thurrock going forward, This work helps to form our work plans going forward, we do this by looking at and listing all the concerns that have been raised by the residents during our engagement activities, complaints and information and advice work over the previous quarter. We then invite members of the community to come along and identify from the lists which they feel should be picked up by us, the outcomes are then taken to the advisory group for their input and decisions.

We also run a regular campaign, which rather than just asking people to complete general questionnaires, we have 'change one thing' cards, which simply ask 'if you could change one thing about this service, what would it be?' This has proved to be a very quick and easy way to gather views on individual services as well as larger commissioned services. The completed cards can be put into drop boxes or posted back using our freepost address. The cards are in all GP surgeries, dentists, opticians, pharmacies, different departments throughout the local hospital, clinics, day services and residential homes.

We also use these when carrying out Enter and View on some services when appropriate, there is also an option to say what is good as well.

We have many volunteering opportunities, our advisory group are all volunteers and as stated in the previous section, they are very involved in our work. We also have volunteers who help us out day to day within the office supporting the team with admin work, social networking, checking information is still up to date (organisations contact details, opening hours, services offered and referral pathways for our signposting work).

We have volunteers who help us with meetings and events, with roles such as ensuring attendees sign in, signpost to where people should be, provide refreshments, man the HWT information stand, speak to people and encourage them to give us feedback.

We also have volunteers within the community and within community groups who are our eyes and ears on the ground. They act as ambassadors and direct people to us if they have issues with services they may be using. We have young people, BME (black, minority & ethnic) Representatives, Faith Representatives, Older People and Commuters within our volunteering bank. We are also signed up to time banking, so all hours volunteered go back into a community pot which allows people to ask for help in all sorts of areas, including gardening, clearing rubbish in communities, decorating community spaces amongst many other opportunities.





Our finances

Income	£
Funds b/f not spent from previous years	56,238.41
Funding received from local authority to deliver local Healthwatch statutory activities	12,435.70
Additional income	19,286.00
Total income	143,643.00
Expenditure	
Staffing costs	161,648.40
Overheads	15,918.47
Legal and Insurance	5,477.83
Advertising	3,162.07
Engagement	6,200
Governance	2,889.96
Total expenditure	195,296.70
Deficit for year	-51,653.70
Funds c/f	4,584.70

