

# Board report

October – December 2023

## 1. Highlights & work (October – December)

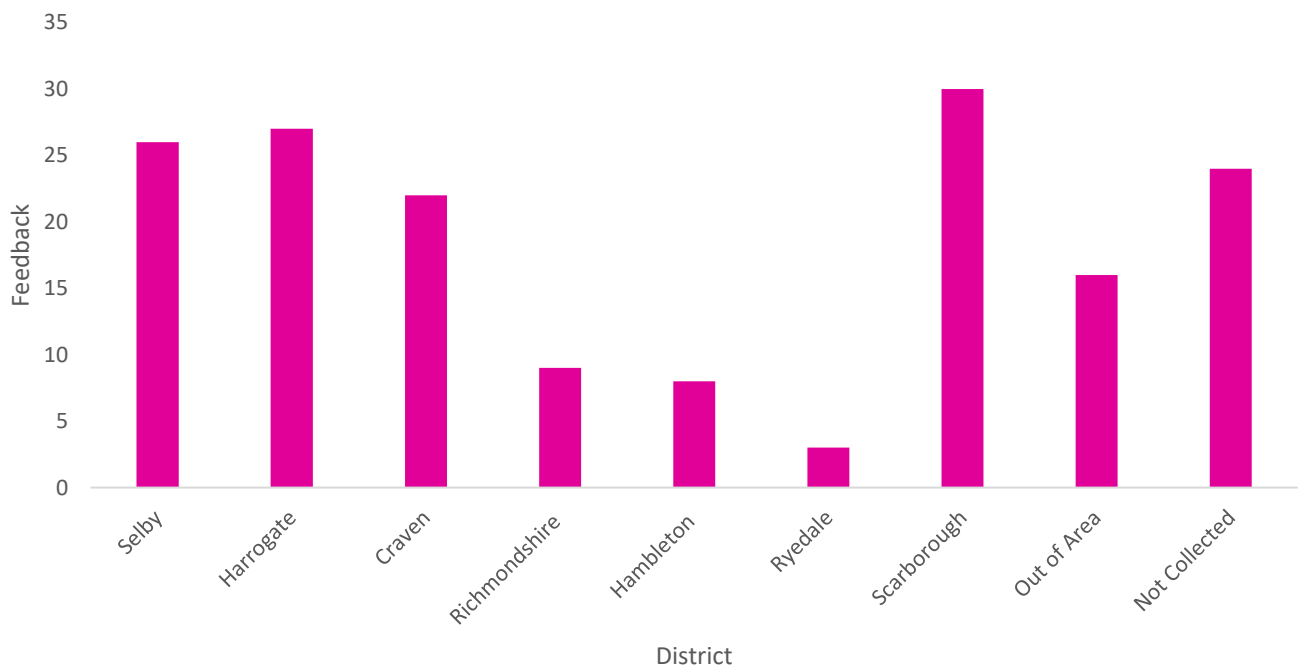
- Thirty-eight people attended our online **AGM** 'Making an impact' webinar, this excluded staff & speakers. Those attending included the public, representatives from the CQC, South Tees Hospitals NHS Trust, Harrogate & District Foundations Trust, York & Scarborough NHS Foundations Trust, Bradford District & Craven Health & Care Partnership, North Yorkshire Council, Healthwatch volunteers and representatives from the CVSE sector.
- Our joint report with York St John University on **Rurality & health inequalities** was launched in October and was on the 'front page' of the Yorkshire Post. We received positive comments back from a range of stakeholders including Sue Symington, Chair ICB, Cllr Harrison, lead for NYC Health & Adult Services, and Bruce Willoughby, Clinical Place Director (North Yorkshire and York). Our report was shared across the health & care system – ICSs, NYC, NHS Trusts, HWE, CQC, public and CVSE sector. We presented the report to the Yorkshire & Humber Healthwatch Network and the report & findings were shared at the Humber & NY ICB meeting in November.
- Our **Medequip report** was launched in November which was commissioned by Medequip and looked into the experiences of people using their services and equipment. Medequip have produced an action plan detailing how they will act on our recommendations. The report has been shared with key stakeholders across the county – NYC, NHS and ICS. There is the possibility that Medequip will ask us (and fund us) to review the actions taken and see if improvements have been made to the services in a year/18 months' time. The report has received strong praise from North Yorkshire Council, and particularly the Corporate Director for Health & Adult Services.
- Additionally, we launched our **GP website & accessibility report** in November which included a series of short briefings that summarise the findings for each of the 17 Primary Care Networks across North Yorkshire. Alongside this we have produced a short summary report of all the findings. The Head of Primary Care Development for North Yorkshire ICS Place has shared our report to all GP practices across North Yorkshire and will report on the actions taken by April 2024. Similarly, the Director of Strategy Transformation, Primary & Community, at Bradford District & Craven HCP has agreed to use our report to work with GP practices in Craven, and report back on the action taken in response to our report.

- We completed the analysis and data from the four **enter and view** visits that we undertook over the summer and launched the reports over the autumn which were shared with the care homes, NYC, CQC and publicly via our website and monthly e-newsletter. The care homes we visited were in Catterick, Scarborough, Skipton and Northallerton and were all led by our volunteers. We received very positive feedback from a number of the care providers for the professionalism of our volunteers and visits. We spoke to 62 residents and have received a total of 155 responses from family, friends, and staff of the homes.
- We held our third **Public Board meeting** of the year at the Falsgrave Community Resource Centre in Scarborough. The meeting was attended by seven members of the public, including representatives from Seechange, Mencap, and CAVCA.
- We undertook our **postnatal review** engagement project over the autumn with the survey closing at the end of November. We have heard from 167 mothers and attended numerous baby groups in libraries, village halls across North Yorkshire and ones run by the Army Welfare Service to gather people's experiences of care. Additionally, we have involved and liaised with the Maternity Voice Partnerships across the county, including Harrogate and South Tees. Within our engagement we heard from a diverse range of communities including neuro-diverse, disabled, LGBTQ+ and rural. The full report is expected to be launched in April 2024.
- Our proposal to establish a **North Yorkshire People Voice Network** was approved by the North Yorkshire Health & Wellbeing Board. Work has begun to include and involve partners from across the county, with the first meeting scheduled for February 2024.
- We have been working with our Healthwatch partners (East Riding and North East Lincs) on our **Core20PLUS5 Connectors project** (children & young people) where we have produced a survey, application form, briefing and flyers, as well as developing a web page. We have attended Scarborough University to talk with students about our work and becoming a community connector, as well as linking with the CVSE sector. This project will continue until Sept 2024.

## 2. Public feedback & engagement

Between October- December, we heard from 165 people via our telephone line, through email, our website, engagement events and Care Opinion (a website that collects feedback on NHS services). The main areas (in order) were GP services, hospital care and dentistry.

The graph below shows the volume of feedback received by district.



During October and November our engagement was primarily focused on our postnatal project.

Alongside this we joined the Citizens Advice and Law Centre advice bus in Leyburn market and spoke to 10 people. We had a stall in the foyer of the Coventry University Scarborough campus to speak to people about the community connector and postnatal projects. We attended Pickering Library for their Self Care Awareness week event and spoke to 4 people, attended Selby library and received 11 pieces of feedback from the public. We attended the first meeting of the Inclusion North Health Inequalities Workshop task group to help design workshops for adults with learning disabilities on various health issues.

We completed our engagement with people with a learning disability, where we worked with the Wilf Ward Trust, to hear from people in supported living accommodation about their experiences of receiving health and social care support and

services. The feedback was overwhelmingly positive about the care they received, for example by their GPs, dentist, hospital and social care teams.

We reached out to voluntary, charities, community and social enterprise organisations contacts across Harrogate district to take part in a community survey. This was part of research to better understand the range of community-based support available for people affected by mental health. [Whole System Partnership](#) are working with Harrogate and Rural District Community Mental Health Team (part of NHS Tees Esk and Wear Valleys NHS Trust. Findings will be shared with North Yorkshire Council's Stronger Communities Team and the North Yorkshire community mental health providers to help shape future mental health support.

### **3. Our impact**

#### **Continence report**

In response to our Continence report the NY ICS Place Director confirmed that the report's findings and recommendations will feed into a review of the bowel and bladder pathways for children and adults in North Yorkshire, which is due to be undertaken by the North Yorkshire and York Place Quality Group. Our report was discussed at the North Yorkshire Place Quality Group meeting in August and an action plan to examine the recommendations and their implementation is being produced to include the relevant organisations (ICS and NHS Trusts). Similar discussions are underway with North Yorkshire Council around improved awareness and support within the care home sector for people living with continence issues.

#### **Adult autism & ADHD referral pathway**

In response to feedback and concerns raised by the public about changes to the referral pathway for adult ADHD & autism assessment (York & North Yorkshire), we highlighted these concerns with system leaders including the GP clinical lead for mental health, NY ICS Place Director, Humber & NY ICS mental health Executive Lead, and Chair of the Humber & NY ICS.

Following our feedback and lobbying the 3 months online 'Do it profiler' assessment tool was extended for a further 9 months to seek further data/clarification.

Our involvement, alongside Healthwatch York, resulted in two public events (in York and online) being arranged to discuss and hear from the autistic community about their views and opinions of the assessment tool and services in general. We supported the planning and promotion of these events which were attended by approximately 100 people and Lee Adams, our chairperson attended and chaired them both.

## **Rurality report**

The findings and recommendations from our Rurality report have directly influenced two of the county's Local Care Partnerships in Harrogate & District and in Hambleton & Richmondshire to commission new projects, funded via the ICB, to tackle rural health inequalities. Each LPC has received £100,000 in funding. Within Harrogate & District this work will focus on reducing long waiting times in rural locations, with a particular focus on dementia patients.

Within Hambleton & Richmond their focus will be to improve access to care by grouping appointments and non-emergency clinics around postcodes to reduce missed appointments, pilot the delivery of clinics in village halls, open up clinics so people can self-refer, and improve the coordination of the NHS and CVSE sector. All these initiatives replicate the recommendations in our report and our report was acknowledged within the funding applications.

An academic poster has been produced that summarises the report and this was presented at the launch event for the new Institute for Health & Care Improvement at York St. John University in November.

Our report's findings have fed into a recent Rapid Rural Needs assessment undertaken by North Yorkshire Council, which will be used to influence and develop a new Rural Strategy by the council for publication in 2024.

Additionally, our report contributed to the insight gathering as part of the development of the new North Yorkshire Joint Health & Wellbeing strategy (out for consultation). In the strategy they state that they plan to:

- Transform the care market with a focus on rural and coastal areas, dementia and working aged people with complex life circumstances.
- Build on the work of the North Yorkshire Rural Commission to address access issues for health and care.
- Develop innovative models for domiciliary care in rural areas, including care built on community strengths.

## **Medequip report**

Medequip have already fulfilled several of the actions included in their action plan to improve the service and customer care for people using their services. These include:

- The delivery of training events to staff teams to improve their understanding of people's needs. For example, a mother and her child who has complex needs attended the Medequip York depot to spend time and explain their journey with equipment and how they could not live without it. The whole North Yorkshire team were involved in this session.

- On feedback that certain equipment wasn't meeting the needs of the people using it, Medequip have asked the manufacturer to see if they can accommodate any product and functionality changes.
- To ensure that the equipment was the right 'fit' for people and meets their needs Medequip have agreed to set up regular discussions with commissioners and look to build future workshops in partnership with clinicians to ensure the right equipment is prescribed to meet the individual's needs.
- Medequip have ordered 30,000 new leaflets in response to our recommendation that people needed more information about their equipment and how to contact Medequip. The leaflets are now being distributed to Medequip customers.

### **GP website & accessibility report**

We have received feedback from a number of GP practices on how they have and will be using our report and insight to improve their website. Here's a few examples of what we have received so far:

- Hambleton North PCN has said they are planning to make the suggested improvements and then once they have made the improvements, they will trial it out with their PPGs to demonstrate an improvement on patient experience from the feedback we provided.
- Central Healthcare Practices has said they are using our feedback to improve their website and asked for some examples of websites that have good accessibility features as this was something they needed to improve on.
- Esk Valley Medical Practice & Staithes Surgery has said that they have instructed their website provider Standout Media to amend the Esk Valley Medical Practice & Staithes Surgery to action our requests around, for example PPG inclusion, including our Healthwatch website, include CQC rating, include accessibility icon, and include a link to the NHS app.

## **4. Volunteering**

We completed a volunteer audit which reviewed numbers, activity, interests, and availability from across our volunteer network. This work has allowed us to have a better understanding of our volunteer abilities and interests, as well as where we have gaps such as in specific districts of North Yorkshire, and in gender, for example only 19% of our volunteers are male, and 56% of our volunteers are aged 50 years and over.

See next pages for a summary of findings from the audit.

## Location of volunteers:



## Diversity of Volunteers:

Cultural diversity represented by individuals from black and minority ethnic backgrounds: **3**  
Including **1** refugee

Diversity in sexual orientation and gender expression **3**

People with physical or mental conditions: **6**

Individuals who play a substantial role in caring for another person: **16**

Retired individuals and those who took early retirement: **17**  
People in active employment (full-time & part-time): **11**  
Students: **8**



## Breakdown of areas that volunteers support our work:

Desk-based, support research	Literature review, mapping -skilled	11
Desk-based, data collection	Collecting data follow our guide	14
Desk-based, assistance	Talk to a member of the public over the phone, taking notes, review, proofreading	17
Engagement - in Community	Support Community Engagement Activities & Stalls. In-person	15
Engagement - meetings	Meetings, representation. Online & in person.	3
Engagement - focus groups	Support Focus Groups. Online & in person	4
Marketing	Support distribution	3
Enter & View	Enter & View Visits	12
PLACE	PLACE, Place light, National Audit of Dementia etc.	7
Admin	Admin	0

Our volunteers contributed to a variety of tasks over the 3-months including, supporting our postnatal project (literature reviews and engagement), facilitating a regular local public engagement session at Selby Library.

Seven volunteers have assisted with the Patient Led Assessment of the Care Environment 2023 across three Trusts in North Yorkshire. Our volunteers helped to review a York & Scarborough NHS Trust 'Alternative Patient Choice' document. Seven authorized representatives completed data entry for the past four enter & view care home visits, with one volunteer undertaking Enter & View Training.

Our volunteers supported North Yorkshire Council with a number of their new Autism strategy (2023-2027) public consultation events in Harrogate, Richmond, Selby and Northallerton where they met with and spoke to members of the public.

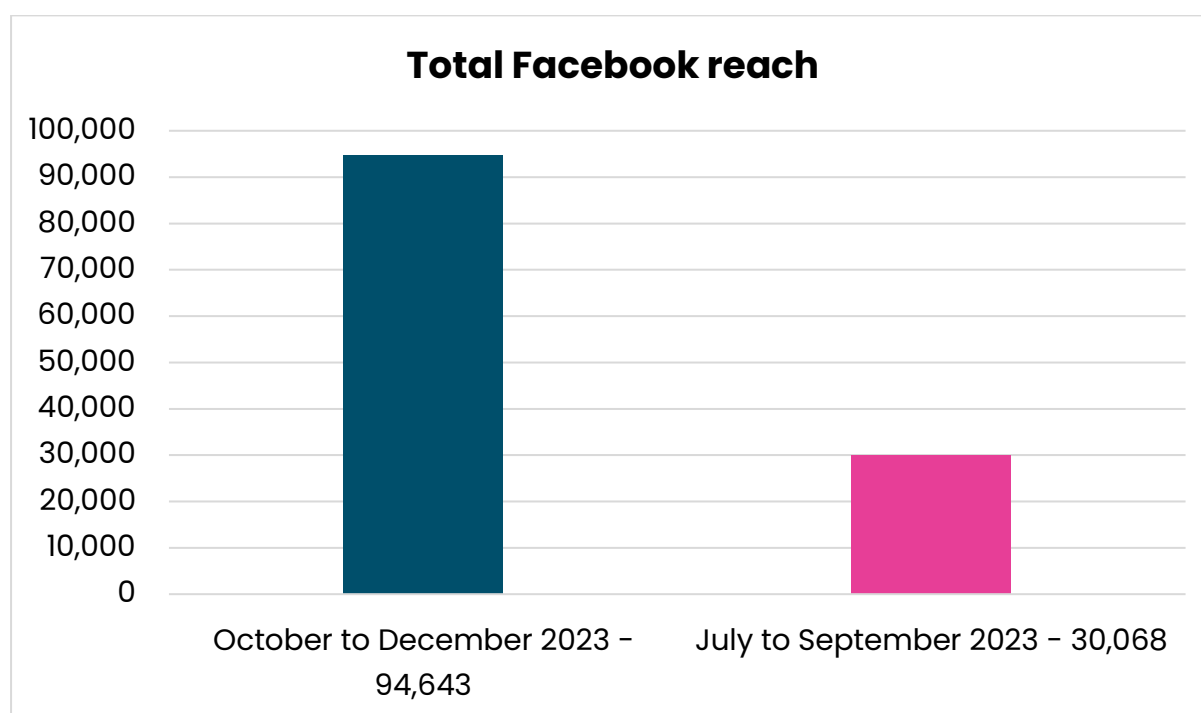
## 5. Marketing and communications

### Social media

#### Facebook

**Our reach and interactions with our public continues to increase.**

Paid adverts about who Healthwatch are, what we do, how they can feedback on services and our surveys and reports continues to be a great way of getting people to 'buy into' what we do.



#### Reach breakdown

##### **1 October 2023 to 31 December 2023**

From organic – 8,928

From adverts – 87,340

##### **1 July to 30 September 2023**

From organic – 5,767

From ads – 25,367

The reach of our content (posts, stories, and adverts) also includes page or profile visits. This means people are checking us out and not scrolling by.

## Content interactions

The number of likes or reactions, saves, comments, shares and replies.

**This quarter = 729**

**Last quarter = 227**

The number of likes or reactions, saves, comments, shares and replies.

## Link clicks

The number of clicks, taps or swipes on links.

**This quarter = 2,248**

**Last quarter = 541**

## Highest reach on a post

Postnatal survey

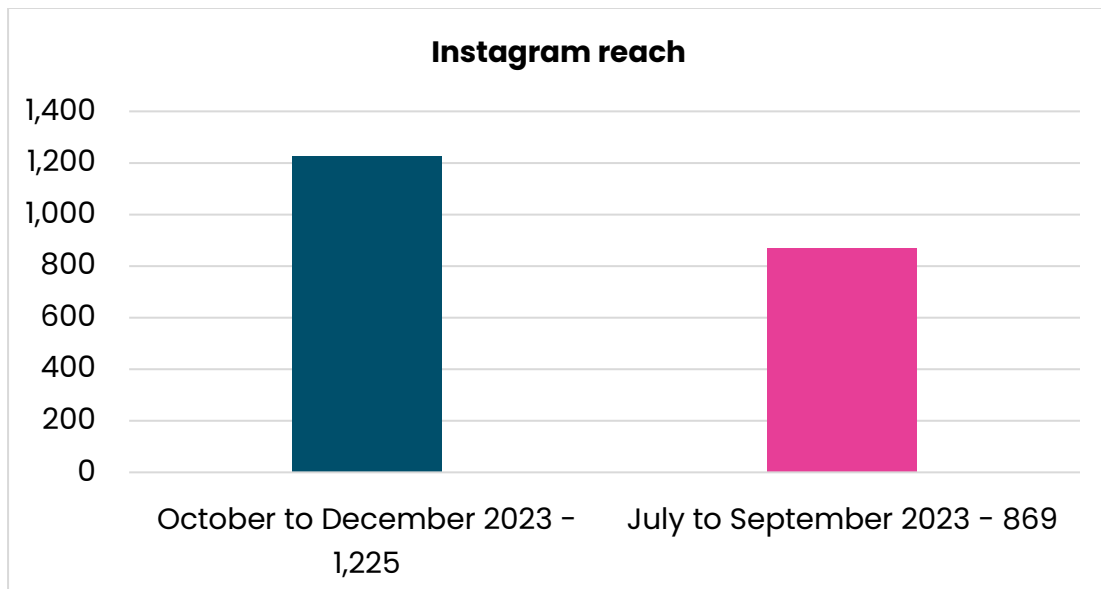
## Highest reactions on a post

Community connectors

## Highest comments on a post

Healthwatch Christmas thanks

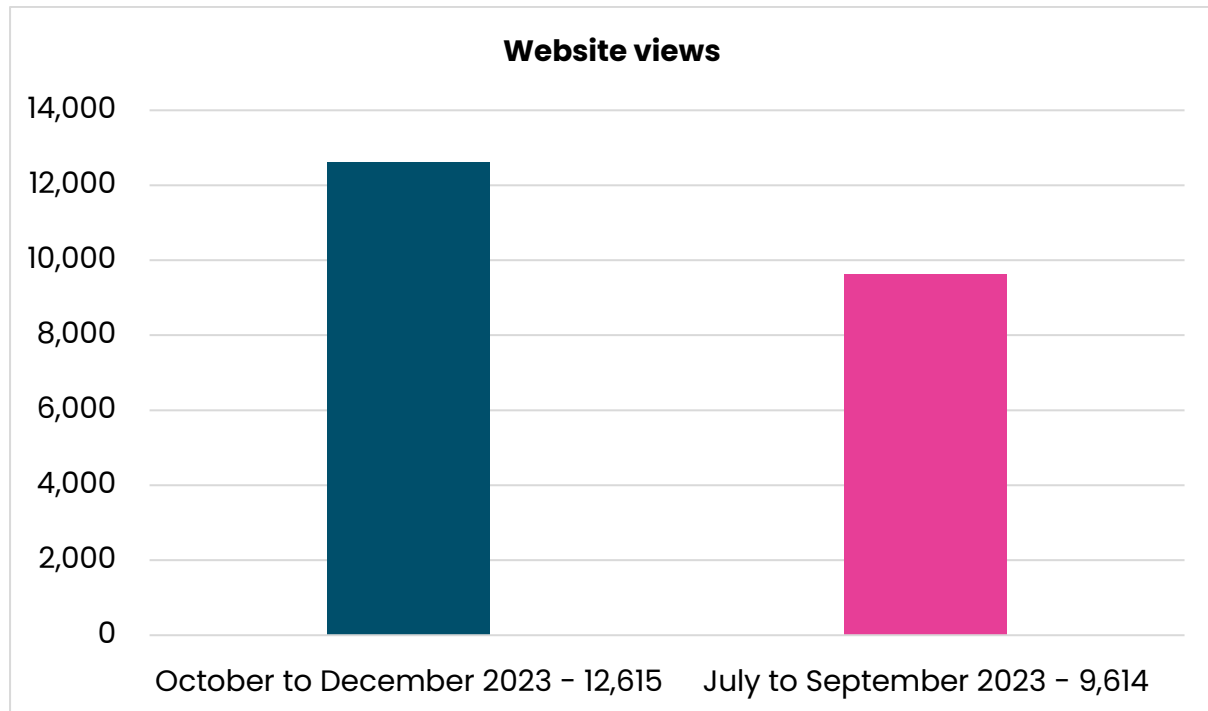
## Instagram



## Website – HealthwatchNorthYorkshire.co.uk

### Our website hits from our public continues to increase.

This is, in part, due to an **increase in social media adverts** pointing people to our web-based content.



Our most visited pages this quarter (1 October to 31 December)

This has also seen an **increase of website visitors**

1. [Homepage](#) = 1,713 (1,492 previous quarter)
2. [GP website health check up](#) = 1,087
3. [News and reports](#) = 856 (704 previous quarter)
4. [Rural health inequalities](#) = 856
5. [Experiences of postnatal care](#) = 441 (127 previous quarter)

Our new **impact page** draws out examples to help feed into our [annual report](#) and let our public know what good their feedback has achieved.

<https://www.healthwatchnorthyorkshire.co.uk/how-we-make-difference>

We will **continue to use this section to highlight good work being done** (as well as highlighting the gaps where more work is needed and use this to push for further response).