

# Healthwatch Shropshire Report

## Feedback on the Work of Healthwatch Shropshire 2021

### About Healthwatch Shropshire

Healthwatch Shropshire is the independent health and social care champion for local people. We gather people's experiences of services and share them with local providers, the organisations who pay for services (e.g. Shropshire Council, Shropshire Telford & Wrekin Clinical Commissioning Group) and regulators (e.g. the Care Quality Commission, NHS England/Improvement) to highlight where things are working well and ensure your voice counts when it comes to shaping and improving services.



### Our functions

Healthwatch was established under the Health and Social Care Act 2012 to understand the needs, experiences and concerns of people who use health and social care services and to speak out on their behalf. Every local authority area has a Healthwatch and we share the information we hold and our reports with Healthwatch England, our national body.

Healthwatch England (HWE) are a statutory committee of the independent regulator the Care Quality Commission (CQC) and their main statutory functions are to:

- Provide leadership, guidance, support and advice to local Healthwatch organisations.
- Escalate concerns about health and social care services which have been raised by local Healthwatch to CQC. CQC are required to respond to advice from the Healthwatch England Committee.
- Provide advice to the Secretary of State for Health and Social Care, NHS England and English local authorities, especially where we are of the view that the quality of services provided are not adequate. Bodies to which advice is given are required to respond in writing. The Secretary of State for Health and Social Care is also required to consult Healthwatch England on the NHS mandate, which sets the objectives for the NHS.

As your local Healthwatch our main statutory functions are to:

- Obtain the views of people about their needs and experience of local health and social care services. Local Healthwatch make these views known to those involved in the commissioning and scrutiny of care services.

- Make reports and make recommendations about how those services could or should be improved.
- Promote and support the involvement of people in the monitoring, commissioning and provision of local health and social care services.
- Provide information and advice to the public about accessing health and social care services and the options available to them.
- Make the views and experiences of people known to Healthwatch England, helping us to carry out our role as national champion.
- Make recommendations to Healthwatch England to advise the CQC to carry out special reviews or investigations into areas of concern.

Some of the ways we do this are:

1. **Public engagement** – attending events or running regular stands (e.g. at Royal Shrewsbury Hospital and Robert Jones and Agnes Hunt Orthopaedic Hospital) to explain the role of HWS and gather people's experiences of using health and social care services. During the pandemic our Communication and Engagement Officer has been attending 'virtual' meetings and events over Teams or Zoom.
2. **Information and signposting** – putting people in contact with organisations and services in Shropshire to meet their health and social care needs. During the pandemic we have continued to respond to phone calls, emails and letters requesting support.
3. **Enter & View visits** – a team of trained volunteers visit health and social care services (e.g. hospital wards/clinics, GP practices, care homes) to make observations of the environment, speak to the public at the point of receiving services and staff/managers providing those services. Each visit results in a public report which is published on our website. (No Enter & View Visits have taken place this year due to Covid-19 restrictions.)
4. **Sharing the comments we receive** with Healthwatch England, local providers and commissioners who pay for services (e.g. Shropshire, Telford & Wrekin Clinical Commissioning Group, Shropshire Council) to highlight trends and issues. Our reports are shared directly with these organisations as well as NHS England and Improvement and the Care Quality Commission.
5. **Independent Health Complaints Advocacy Service (IHCAS)** – we are also commissioned to provide the IHCA service for residents of Shropshire and people using NHS services in Shropshire. The main purpose is to support and empower people to understand and use the NHS Complaints Process. A Health Complaints Advocate is able to support those people who need help through the process (e.g. putting their complaint in writing, going along with them to meetings to discuss their complaint).

## The context of the report

In order for us to satisfy our statutory functions we need the population of Shropshire and the people responsible for providing local services to know who we are and what we do so they will talk to us and, crucially for those providing services, listen to us.

Healthwatch Shropshire is a member of the Health and Wellbeing Board and the Integrated Care System (ICS) Board. The ICS will become a statutory organisation from April 2022 replacing the Shropshire, Telford & Wrekin Clinical Commissioning Group (CCG). The ICS includes primary care (GPs), all hospital Trusts, and the two local authorities (Shropshire Council and Telford & Wrekin Council) including Public Health. We are also a member of the Shropshire Safeguarding Community Partnership.

In order for us to have an impact and enable the public's views to be heard when services are being created, re-designed, monitored and evaluated we need to be able to continually learn and improve. We need to understand what we are doing well and where we can do better.

Healthwatch Shropshire gathers feedback on our activities on a daily basis from the people we speak to (public and professionals) over the phone, by email and at events or meetings we attend. However, it is also important to understand which parts of our work people find most helpful and give them the opportunity to let us know what they think we should do differently.

In 2020 we had planned to complete a 360° reflective audit. This was postponed due to the Covid-19 pandemic. In 2021 we decided it was important to give people a chance to give their feedback while acknowledging the ongoing situation would probably impact on the number of people who would respond.

## What we did

In order to give as many people as possible the opportunity to share their views with us we:



- ✓ Promoted an on-line survey aimed at professionals across the ICS on our engagement platform, website and on social media
- ✓ Directly contacted 700 professionals/organisations from across the ICS and wider health and social care system to ask them to complete the survey or respond by email
- ✓ Asked our Board and volunteers to share their views with us
- ✓ Collated the feedback we received in 2020-21 from the public and professionals

There were several suggestions made to us which we have adopted as action points throughout this report.

## What people told us

### The survey responses

We received 25 responses to the survey representing the views of:

#### Health providers and commissioners:

- 1 - Midlands Partnership Foundation Trust (MPFT)
- 1 - Shrewsbury and Telford Hospital NHS Trust (SaTH)
- 1 - Shropshire Community Health Trust (SCHT)
- 7 - Shropshire, Telford & Wrekin CCG (ST&W CCG)

#### Social care

- 4 - Shropshire Council
- 1 - Shropshire Public Health

#### Scrutiny and regulatory bodies

- 1 - Care Quality Commission (CQC)

#### The Voluntary and community sector (VCS)

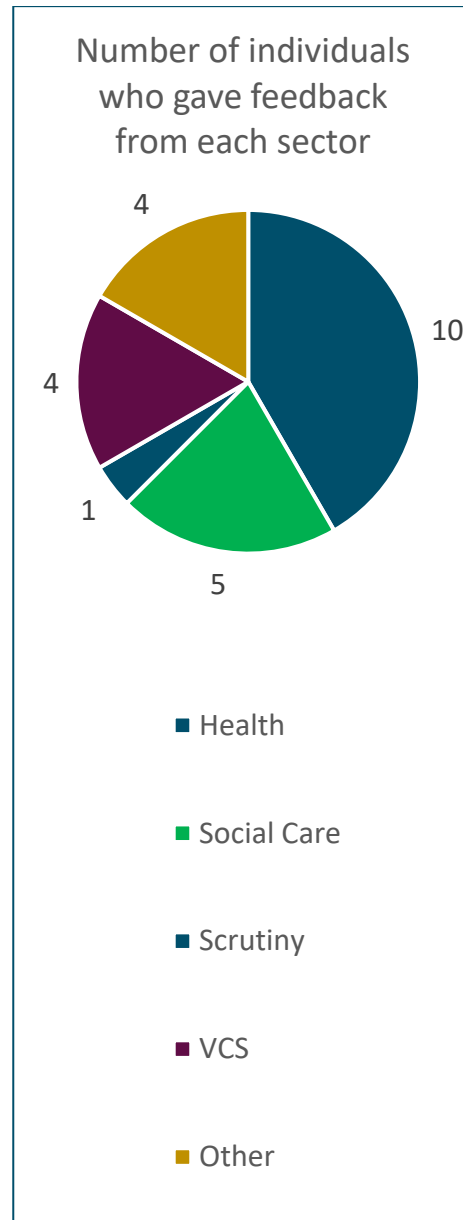
- 1 - DEEP Shropshire
- 1 - Energize Shropshire Telford and Wrekin
- 1 - Shropshire Food Poverty Alliance
- 1 - Sightloss Shropshire

#### Other organisations, including those who work with or support the public:

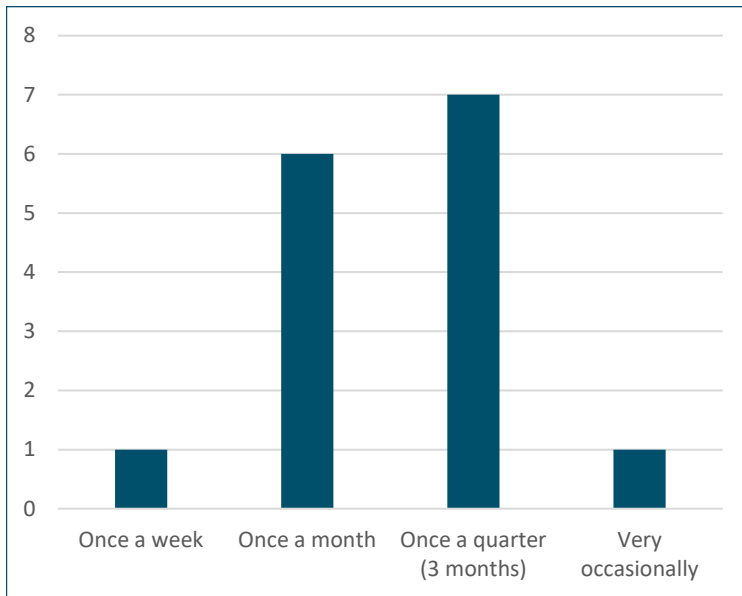
- 1 - Healthwatch Telford & Wrekin (HWT&W)
- 1 - Maternity Voices Partnership (MVP)
- 1 - Royal Airforce Shawbury
- 1 - Shropshire Partners in Care (SPIC)

All comments shared with us are included in this report.

Although it was not aimed at the public, one member of the public completed the online survey. Their response will be included under the Public feedback section.



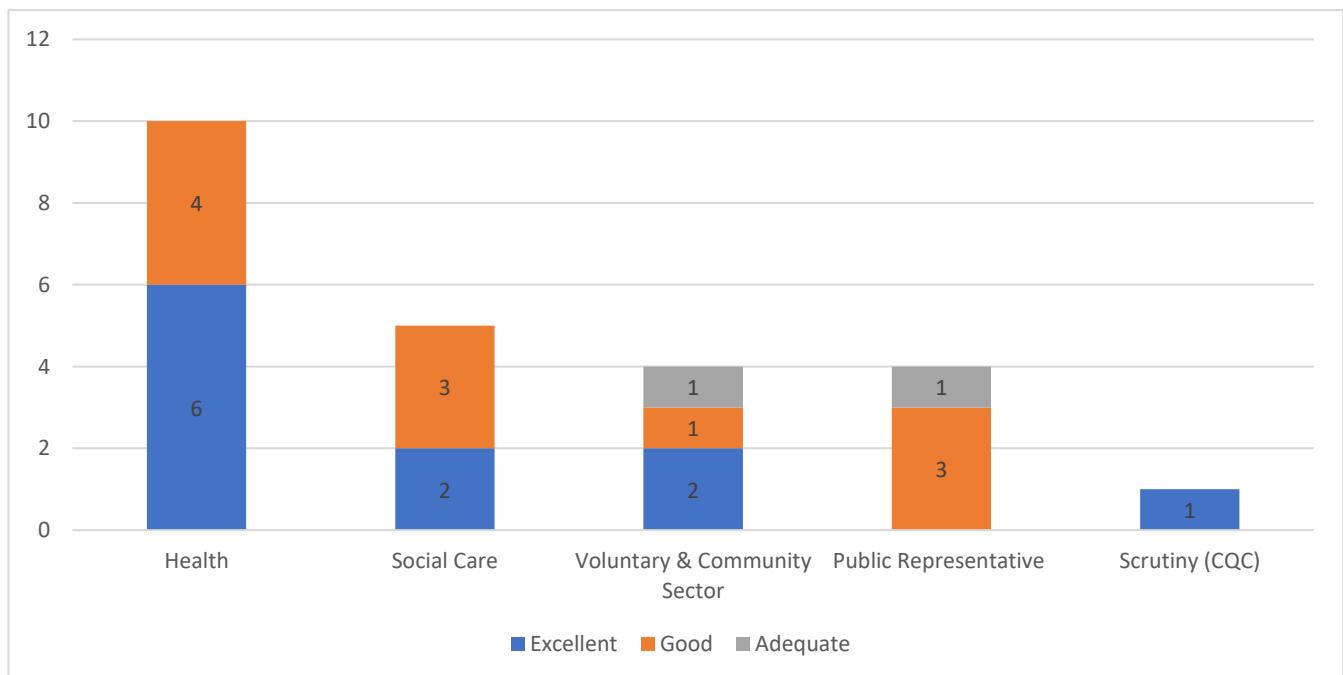
### 1. How much contact have you had with HWS over the last two years?



At the time of completing this survey HWS was completing a project in partnership with Shropshire Food Poverty Alliance (SFPA) which meant that we were meeting often more than once a week.

HWS meets with professionals across health and social care services and commissioners either monthly or quarterly. These can be formal meetings (e.g. with SaTH and the CQC) or 1:1s involving the HWS Chief Officer, e.g. with the Director of Adult Social Care.

### 2. How would you rate HWS' relationship with your own organisation?



Those representatives from organisations that we meet with more regularly reported a better relationship with us, e.g. across health and social care and the CQC.

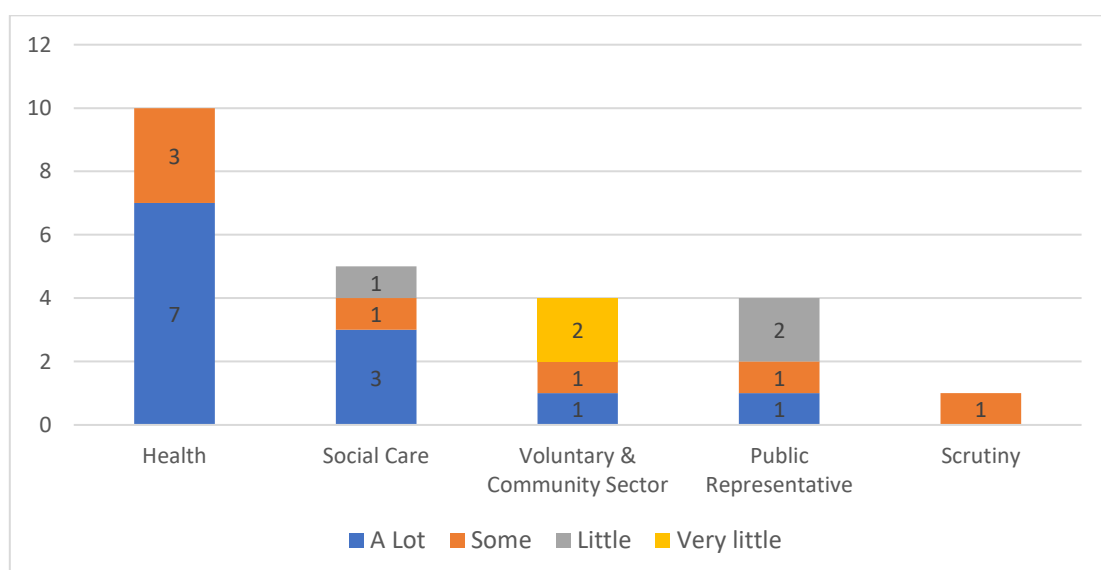
- ‘HWS provide a very straightforward and constructive contribution to discussions we are all party to. They are a reliable partner and consistent in what they advocate and support.’ – Shropshire Community Health Trust (SCHT)
- ‘Too often we have treated HWS as an afterthought. We need to demonstrate taking HWS, and the patient voice more generally, as seriously as we think we do.’ – ST&W CCG
- ‘Personally I am probably in meetings with HWS on a fortnightly basis. I think the relationship between my team/organisation and HWS is good. I have found HWS always to be fair, independent, championing residents voice but supportive and challenging where needed.’ – Public Health
- The CQC ‘Have developed a good working relationship with HW Shropshire, which has resulted in meaningful information sharing.’

HWS attends the Voluntary and Community Sector Assembly (VCSA) Forum. The Chair of the forum is on the Integrated Care System Board but at the moment many VCSA organisations are not represented at meetings across the ICS because they have not been invited or do not have the capacity to attend. The HWS Chief Officer reports on system activity to the VCSA Forum.

The other organisations, including those that represent/support the public, said that their relationship with HWS was ‘good’ or ‘adequate’.

- ‘Very good relationship with the previous organisation I worked for. While representing our own communities, we also did joint work on key subjects. Receive regular updates and information.’ – Previously with HWT&W

### 3. How much impact/influence has HWS had on your organisation?

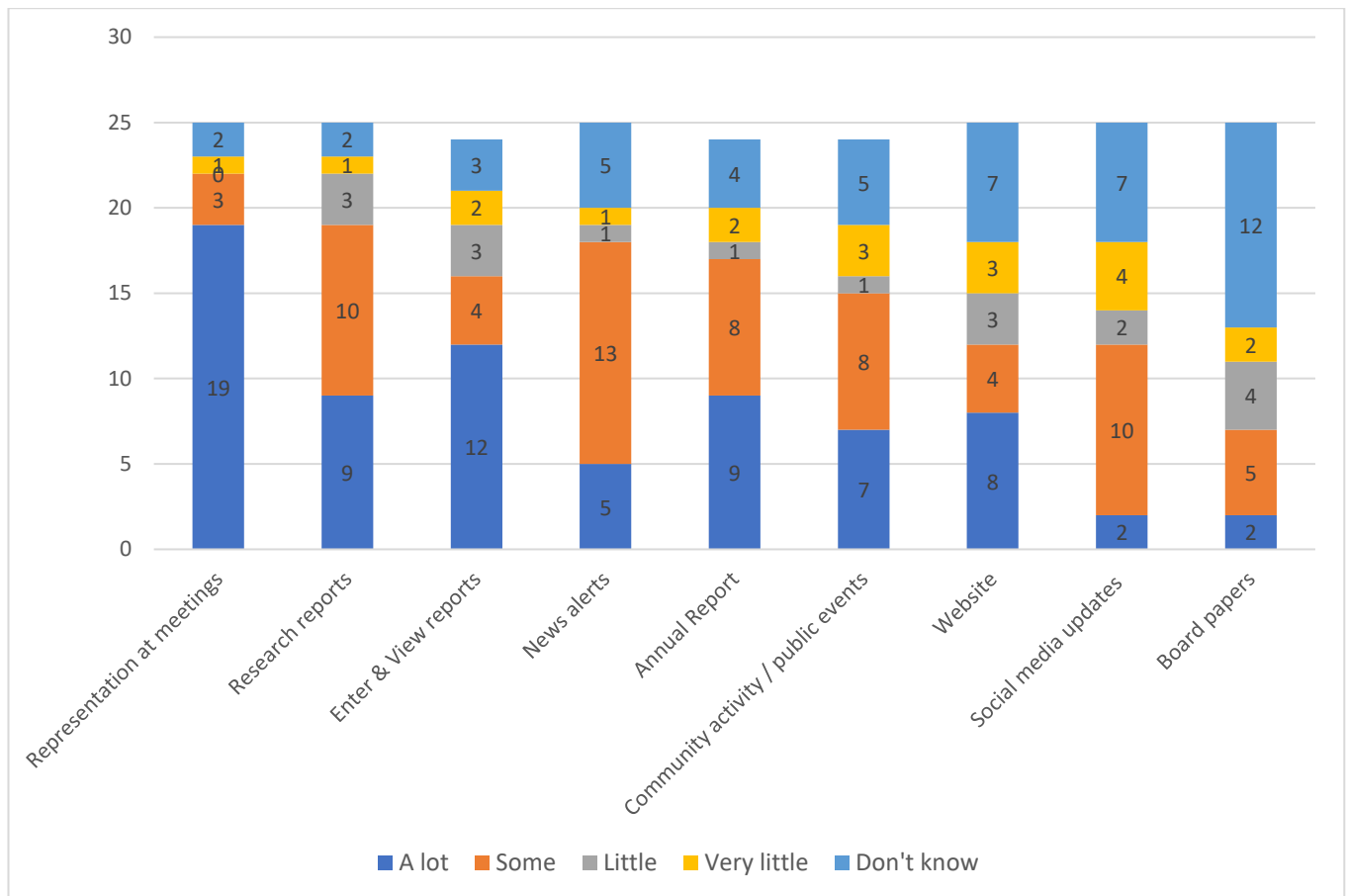


Those people from organisations who met with us more frequently rated us as having 'a lot' or 'some' influence on their own organisations. For example:

‘I don't think your communication has been poor - I think we could/should engage more in future. Discuss potential approaches and collaborations.’ – Energize (VCS organisation)

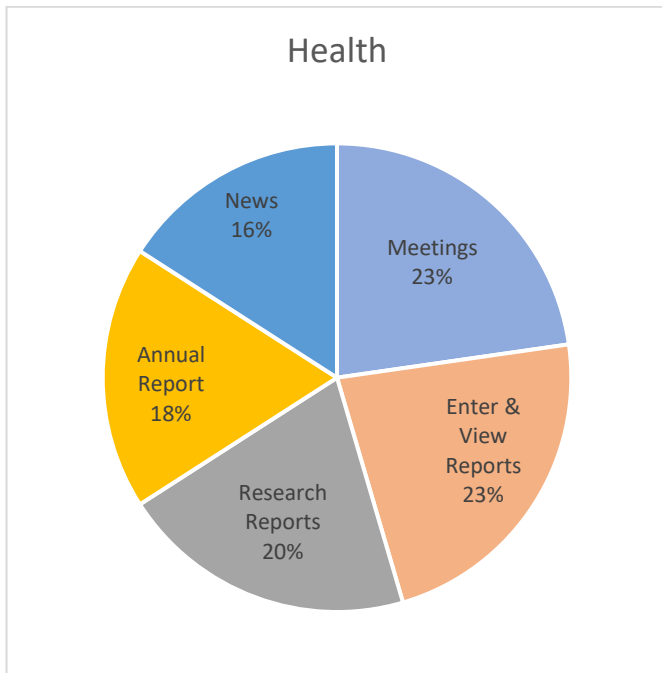
When looking at which organisations found our various communication methods useful (Q4) it was also possible to see that the more contact they had with us and the more they heard about us the greater impact our work had.

**4. HWS uses a range of methods to communicate about its activity, please indicate to what extent you have found the following useful:**

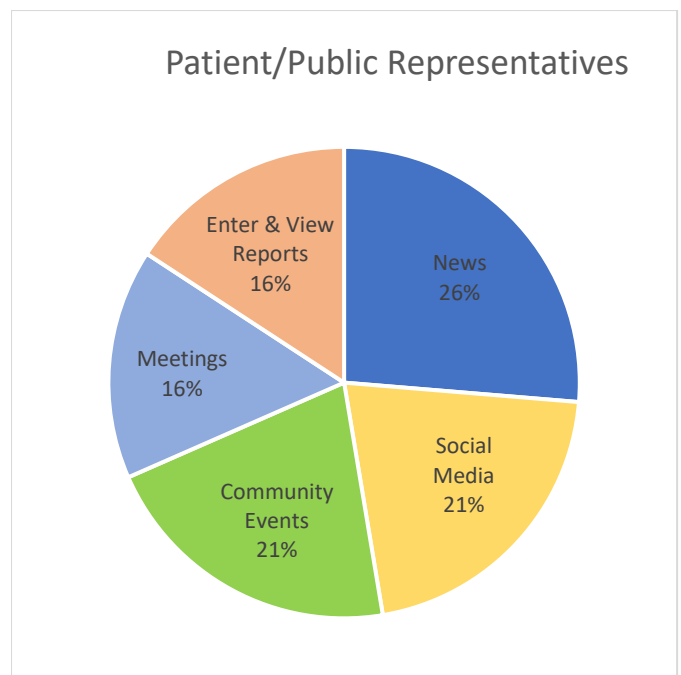


‘I personally feel that HWS have good communication and it is my organisation that needs to be more proactive with its communication to HWS’. – ST&W CCGW

**Top 5 communication methods for each sector**



Health and social care providers and commissioners place very similar value on our attendance at system meetings, our reports and newsletters. These professionals are unlikely to attend community (public) events or follow us on social media. The majority of them receive our reports directly by email.



VCSA and patient representative organisations also see us at system meetings but are likely to see and speak to us at community (public) events when these are possible. These organisations value the



newsletter, social media and our website to keep up to date on what is happening at Healthwatch Shropshire and across the health and social care system.

During the Covid-19 pandemic Healthwatch Shropshire has been using our newsletter and other information methods to share Public Health and NHS messaging:

#### Newsletter:

- 'We've identified a need for something like this. I'm sure your bulletin will be very well received. We shall share it here.' - Community Group
- 'Thank you for lots of useful pointers, signposts and reference material.' – Member of the public.

#### Website:

- 'Excellent support page from @HWSHropshire with a number of valuable links in @ShropshireMind zoom support sessions, Coronavirus and your wellbeing.' - Chair of Shropshire and Telford & Wrekin Clinical Commissioning Group on Twitter

#### Reports:

- 'The Covid-19 report and the interim reports which you sent out were very helpful and useful. Thanks to Healthwatch Shropshire for that.' Consultant in Public Health
- 'I wanted to say just how useful we have found the data in the reports that you have been sending round, this has really helped to shape the offer that has been worked up through the Mental Health Resilience and Prevention Group [led by Shropshire Council and Public Health] as the data is live from local residents and ensures that we can provide and adapt what is needed for Shropshire people in relation to their mental health.' - Consultant in Public Health in response to the interim reports and final report [Health, care and well-being services during the Covid-19 pandemic | Healthwatch Shropshire](#)
- 'Very interesting report and findings.'
- 'Thank you that is really useful, a great piece of work.' - Social Prescriber in response to [Social Prescribing for 16-25 year olds | Healthwatch Shropshire](#)



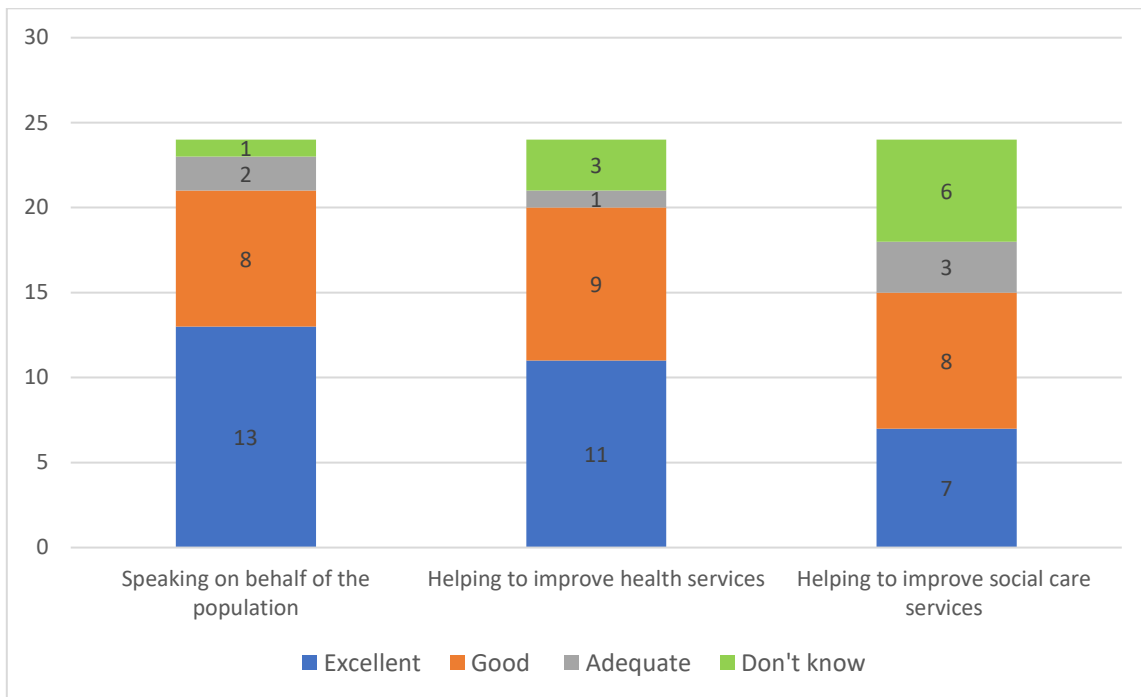
- 'Some interesting findings from this pre-pandemic survey by Healthwatch Shropshire of clients and providers of domiciliary care.' - Professional in response to [Home Care in Shropshire | Healthwatch Shropshire](#)
- 'Thank you again for all your hard work on the survey. As we discussed at the [Urgent Care] Board we took the survey results to our Discharge Alliance Group. We discussed the results alongside our new process for cause for concern and believe that this would be a fantastic opportunity to use this process to tease out the themes and lessons and ensure that we learn from them.' CCG Urgent Care Director in response to [Hospital Discharges During the Covid-19 Pandemic | Healthwatch Shropshire](#)

However, we are also very aware that stopping all face-to-face engagement and relying on our website and social media messaging will have led to digital exclusion for those people who can't or don't want to use a computer or smart phone. We have continued to share press releases about our work and have spoken on BBC Radio Shropshire on a number of occasions and highlighted our phone number and Freepost address.

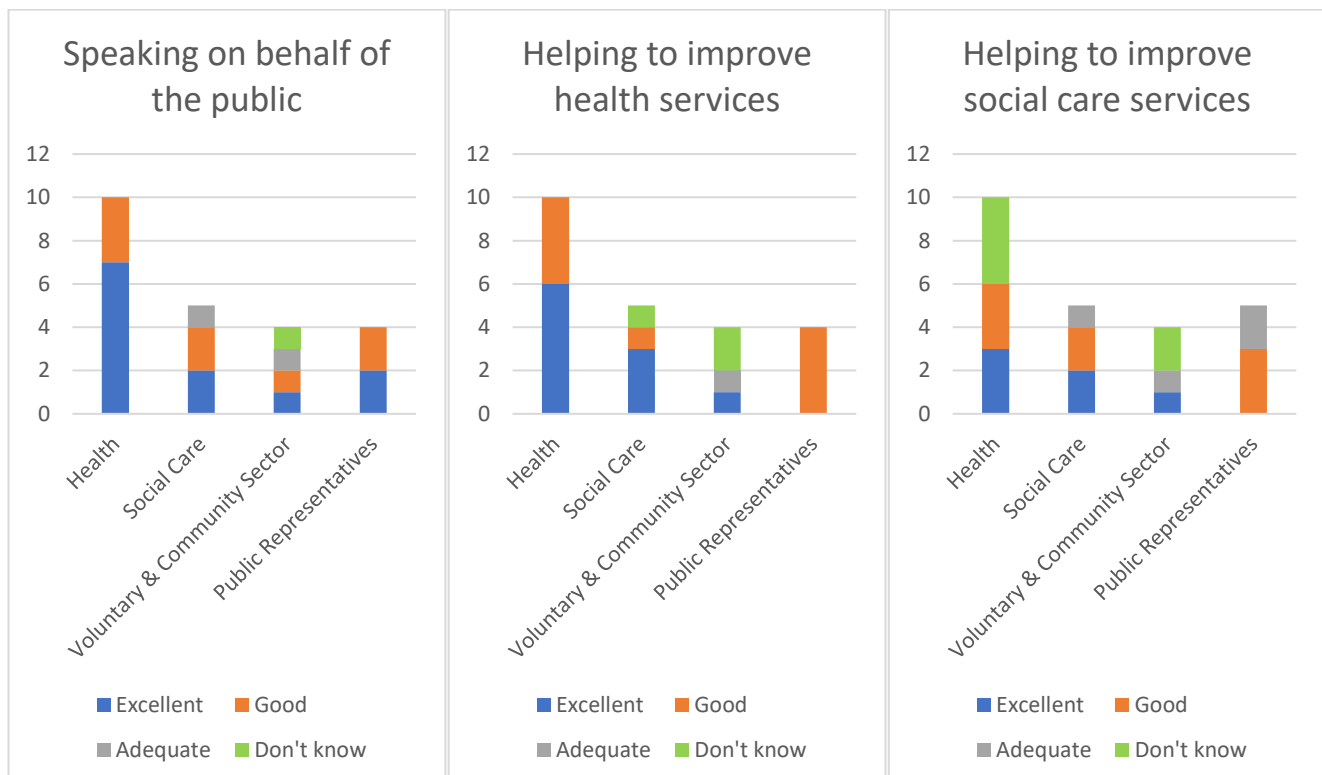
- 'Thank you for this, it's really helpful. It's great that you have all bases covered in regards to how folk can feedback information.' Social Prescriber
- 'Joint working with other Healthwatch on key areas affecting whole population. Like to see more news articles in local papers as not all people have computers, iPads, etc. and still rely on paper versions. When allowed, face to face engagement is very important.' – Previously with HWT&W

**Action:** Continue to promote Healthwatch Shropshire widely and work with local media to reach as many people as possible.

**6. In the context of the work of your organisation how good a job, overall is HWS doing?**



● 'I think they do an excellent job considering their level of resource' – ST&W CCG



Every person working within health said we were 'excellent' or 'good' at speaking on behalf of the public (service users and patients) and we had helped improve health services. Four people did not feel able to comment in the impact we have made on social care services.



- 'This role is a vital one.' – ST&W CCG
- 'I've enjoyed working with the team at HWS to collaborate on how we can best improve things for patients.' – ST&W CCG
- 'I think HW are invaluable in holding commissioners/providers to account for the quality and patient experience of health services in STW. Personally, I very much valued their support in designing and carrying out the patient survey on NHS 111 First at a time when the main provider was too pressured to carry it out for themselves.' – ST&W CCG
- 'I feel it would be good if there was greater requirement for those who deliver services to be accountable to act on the feedback provided by HWS - sometimes a low number of people who engage leads to a dismissal of important feedback.' – Shropshire Community Health Trust (SCHAT)
- 'It is my personal opinion is that my organisation needs to do things differently (i.e. proactive engagement) rather than HWS changing how they function.' – ST&W CCG
- 'I think that HWS offer an excellent independent service which both reactively and proactively engages with members of the public to ensure that their voices are heard and, where indicated, acted upon to improve local health and social care services. HWS are very professional in their approach and provide members of the public with a raft of communication routes ensuring ease of access to share valuable feedback.' – ST&W CCG

Some health professionals commented particularly on Healthwatch Shropshire's Chief Officer:

- '[She] comes over well in meetings and speaks clearly and with conviction. She also challenges where she is not satisfied with the response she or Healthwatch is getting. I think she is an impressive individual who is a credit to Healthwatch Shropshire.' – ST&W CCG
- '[She] is proactive, eloquent and curious so that she gets to the heart of issues. She is fair, always wanting to gain a well-rounded view.' – Midlands Partnership Foundation Trust
- 'My main experience is of [the Chief Officer] at local meetings where I think she represents Healthwatch and the 'public voice' extremely professionally and effectively.' - Energise
- 'Constructive, open and reflective' - MPFT

The majority of social care staff said we were 'excellent' or 'good' at speaking for the public and we had helped to improve social care services.

- 'I always read your Enter & View reports with interest! Thank you.' – Social Care Commissioner

The CQC Inspector said that they thought we were doing an 'excellent' job in speaking on behalf of Shropshire residents and improving health and social care services:

- 'I would just like to say thank you for the positive working relationship that we enjoy with HWS and the information sharing that helps to inform our work.' – CQC Inspector

The other organisations including those that represent/support the public, said we were 'excellent' or 'good' at speaking for the public, 'good' at helping to improve health services and 'good' or 'adequate' at improving social care services.

- 'Healthwatch Shropshire is a positive voice for the people accessing health and care services in Shropshire, HWS representation at meetings is positive and is respected.' – Shropshire Partners in Care (SPIC)
- 'Due to the recent pandemic, managing this has taken priority but sharing information has been vital, recent surveys have shed light on people's feelings. Found staff really professional and helpful.' – Previously with HWT&W
- 'Concentrate on researching and producing analysis of services/experiences. This creates in-depth useful material to influence improvements. Keep at it, in spite of diminishing resources!' – Deep Shropshire

A number of people working for Voluntary and Community Sector organisations didn't know if we were helping to improving services:

- 'I don't feel qualified to say - I don't know enough about the organisation.' - Energize
- 'HWS is good at collating information about issues with health and social care services and identifying what needs to change but I feel there is a lack of clarity as to what impact their reports have - Do services actually change and, if not, what action can HWS actually take?' – Sightloss Shropshire

**Action:** Promote our Annual Report 2020-21 highlighting the impact we have made and include more updates in our newsletters, e.g. 'You said, we did, this happened...'

## Other feedback from professionals across Shropshire

- 'Healthwatch are a crucial element in ensuring that services work for the people and the Enter and View role adds real clout and authority.' - ST&W CCG
- 'I have always found staff very helpful and great to work with. Website and news articles kept up to date and relevant. Good social media news articles or links found. Quality of reports excellent, and easy to read and understand. HWS represents the needs of Shropshire residents.' – Previously with HWT&W
- 'I have only been working with Healthwatch Shropshire for a short period of time, but have found all members of the team to be highly professional. They are all eager to help and support patients and the public to have a voice even through these difficult times of "virtual meetings". I hope as the new CCG settles down that we can do more joined up engagement work.' – ST&W CCG
- 'Healthwatch have always engaged in the work we do within the Community Trust especially in regards to End of Life care. Thank you Healthwatch team.' – SCHR
- '[The Community and Engagement Officer] regularly attends our face to face/ virtual Armed Forces Outreach Support and is a great asset to our extended team. Engaging with our veteran community and updating regularly. It's a pleasure working alongside her.' - Support Officer

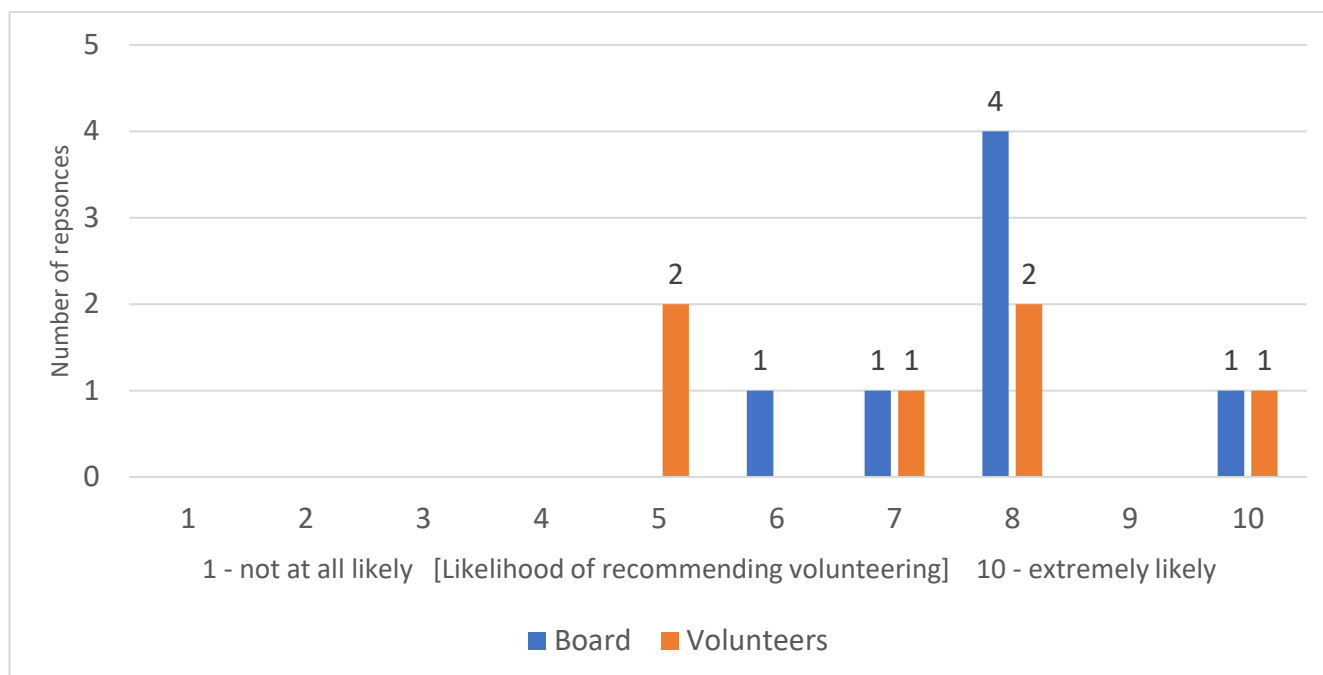
Throughout the year we have received a number of unsolicited comments from professionals about our work, including:

- 'Thank you for sharing the feedback with me, I have shared it with the Ward Manager, Matron and Head of Nursing as it is important that they are aware. It's very difficult feedback to read however it is important that the team are aware to take steps to prevent others having a similar experience.'- SaTH Patient Experience Lead
- 'Really appreciate the update so, thank you. It looks like you did everything possible to provide support and advice for this person, so I do hope there was a happy ending and the patient was discharged safely.' CCG Quality, Patient Safety & Experience Manager
- 'Thank you very much for your detailed help.' - Care Co-ordinator
- '[Enter & View Officer] did a fabulous job helping to arrange the phlebotomy focus group and on the day. The feedback she shared with me on how I delivered the session has been really useful and we will use this to improve how we approach focus groups going forward.' – ST&W CCG Director of Primary Care

## Our Board and volunteers

Seven Healthwatch Shropshire Board members and six volunteers completed a short survey online specifically to hear their views.

We asked them on a scale of 1-10 how likely they would be to recommend volunteering with us to a family member or friend (1 being not at all likely, 10 being extremely likely):



Comments from Board members:

- 'Volunteering with Healthwatch is a very rewarding role. One can see first hand how our time contributes to the well-being of people in need. I do believe we make a difference and it is obvious from the reactions of those we visit. We give people a voice and an avenue to make life more comfortable and less stressful. It is the best position I have held in many years of charity work.' Score: 10
- 'You feel as though you are doing some good.' Score: 8
- 'Involvement and it is worthwhile.' Score: 8
- 'I joined Healthwatch hoping to influence organisations delivering NHS services in Shropshire. Whilst I applaud the aspirations of Healthwatch I have been frustrated by the lack of success in engaging constructive responses and ability in bringing about change.' Score: 8

- 'I would only recommend volunteering to someone I know is interested in our sort of work and in volunteering per se.' Score: 8
- 'I've enjoyed being on the Board but not being on the Intelligence Committee I feel I am not engaged in a meaningful way with how the Board reacts to its accumulating intelligence to assist the excellent Healthwatch Team.' Score: 7
- 'It's important work e.g. Enter & View work, but it can be frustrating when you feel HW has few teeth and it's unclear how much real difference we make. Hopefully it's getting better.' Score: 6

**Action:** Publish our Annual Report 2020-21 where we have had the opportunity to pick examples of work where we can demonstrate that we have made a difference over a period of time. Quite often it can take more than one financial year for the impact of our work to be felt. [Annual Report: April 2020 - March 2021 | Healthwatch Shropshire](#)

#### Comments from volunteers:

- 'Knowledgeable and responsive Team.' Score: 10
- 'Worthwhile thing to do but role of volunteer is extensive and need to be committed' Score: 8
- 'The role of the volunteer has changed with the Covid-19 pandemic, but I think that prospective volunteers could add useful information, offering the services an 'on the spot' view of the problems faced at the point of delivery.' Score: 8
- 'I enjoy volunteering with HWS and they are an excellent organisation. I feel they have to rely on volunteers too much for carrying out responsible roles, HWS should receive more support for their services.' Score: 7

#### The two volunteers who scored '5' considered the act of 'volunteering' more broadly:

- 'It depends on the individual, so I would hesitate to recommend - hence the 'middle of the road' response.' Score: 5
- 'Difficult to express as number as different people are looking for different things from volunteering. Volunteering may be "easier" for some if there is a regular day of the week commitment throughout the year. This provides regular engagement, structure and helps plan other pastimes/interests. Others might find a more "episodic" involvement suits their lifestyle better. Holidays and visits can be blocked in. Equally some are looking for a local focus to engage with their immediate community. For others "making a difference"



on a broader scale is an attraction. As an organisation with which to volunteer, however, HWS would score more highly. The employed staff (and volunteers) are supportive, welcoming and value the involvement of those they work with.' Score: 5

We asked the Board members and volunteers what we could do to involve volunteers more in our work and received a range of responses:



- 'I feel they involve them enough' – Volunteer
- 'This is a difficult one to answer, especially after this exceptional year. It would be good to review and discuss opportunities to utilise individuals' skills, and have knowledge of the work plan for 21/22.' – Volunteer
- 'Difficult to say, because we all have different strengths & weaknesses. Many would-be volunteers may not be comfortable with the current use of remote meetings and technology. I would put myself in that category. Whilst reasonably competent, I'm not as confident as others and therefore question my value.' – Volunteer
- 'Ensure that Volunteers do not feel as if they are operating in isolation. I appreciate that the past year has presented particular difficulties in that regard.' – Board member
- 'I would like volunteers to be encouraged to express an interest in specific areas e.g. mental health; young people; info technology; etc. and HWS to design activities that allow them to develop these interests e.g. attending relevant meetings on behalf of HWS and contributing alongside team members in talking to the public, attending groups run by other charities e.g. Diabetes UK, MIND, Stroke Association, Dementia Alliance etc.; setting up a 'blog'.' – Board member
- 'More engagement with the public and carrying out more surveys (face to face, phone, online). Less long report-writing which is rather onerous.' – Board member

**Action:** During the pandemic the staff have been working from home and all face-to-face meetings have moved on-line. We have had regular Volunteer meetings on MS Teams and continue to have formal Board meetings. We will arrange a joint meeting to ensure the Board understand the work we have continued to do to involve the volunteers in our work.

Ideas for developing the role of volunteers included:

- 'I would like to hope that Healthwatch could develop a small cadre of volunteers in each community who would focus on the particular health and social care needs of their own community and become involved in promoting healthier lifestyles, if that is now to have a higher priority for the NHS post-pandemic.' – Board member
- 'More practical monitoring or investigative roles as Enter and View offer, more hands-on opportunities.' – Board member
- 'Need to increase visibility and interaction with the community.' – Board member
- 'I feel that the younger generation are sometimes overlooked. It would be a delight to give assistance to a better way of understanding of our health services to young people that are in need. It always seems more tragic when young people have health issues and it must be very difficult for them to find a way through them. I think Healthwatch could contribute greatly.' – Board member

Healthwatch Shropshire offers a number of volunteering roles:

#### **Engagement support volunteer**

To support and represent Healthwatch Shropshire at local and countywide events to speak to people in our community and find out more about their experiences of health and social care.

#### **Enter and View Authorised Representatives**

To visit local services and find out what's working and what needs to be improved to help make them better.

#### **Community Support Volunteer**

To help spread the word about Healthwatch Shropshire and make people aware of who we are and what we do, so they know where they can go when they need help with their health and social care.

#### **Volunteer representative**

To represent Healthwatch Shropshire and what people have been telling us at a range of forums, groups and other meetings.

Some people chose to do just one of these roles but volunteers can get involved in them all if they want to. All volunteers can suggest areas of work for us and the Chief Officer and staff team regularly contact Board members and volunteers to ask them for their ideas and if there is a piece of work they would like

to be involved with. They are also asked to promote the work of Healthwatch Shropshire to their families, friends and local communities.

**Action:** Chief Officer and Communication and Engagement Officer to continue to talk to the Director of Public Health for Shropshire regarding the support we can offer to complete the Joint Strategic Needs Assessment (JSNA) to identify local need.

**Action:** Healthwatch Shropshire have identified working with children and young people as a priority and will continue to explore creating a Young Healthwatch.

## Public feedback

One member of the public completed the on-line questionnaire. They said they had 'never' had contact with us and our work has had 'very little' impact on them. However they did suggest that HWS has a role to engage with families of people with learning disabilities.



One local Councillor took the opportunity to raise an issue on our engagement platform that had been discussed in person with the Chief Officer several months before. At that time it was explained that HWS is not a campaigning organisation, as an independent charity we can only respond to comments we receive from the public.

**Action:** Healthwatch Shropshire continues to be a member of the ICS Mental Health, Learning Disability & Autism Operational Delivery Board so we can identify opportunities for engagement as services are reviewed/developed. All age mental health (including learning disability and autism) continues to be a priority for us in 2021-22. We also attend the ICS System Quality and Safety Group and the SaTH Safety Oversight and Assurance Group and share the comments we receive regularly with SaTH and the CCG and raise any safety concerns the public share with us immediately.

**Action:** Engage more with local Councillors and MPs to ensure they understand the role and statutory functions of Healthwatch Shropshire and ask them to promote our work to their constituents so that people understand the value of sharing their experiences and views of local health and social care services with us.

We also captured from members of the public who contacted us to share their experience of health and social care services or asked for information and signposting.

Comments from the public included:

- 'Can I just say how helpful you have been, it is much appreciated.'
- 'Many thanks for your reply. I would be delighted for you to share my concerns in the way you have outlined.'
- 'Thank you for getting back to me so quickly.'
- 'Thank you for your quick reply and the information provided.'
- 'I've found [the team] pleasant and helpful.'
- 'Thank you for your kind response.'
- 'Thank you for replying to my query. I have received an appointment. Thank you for your advice.'
- '[The Independent Health Complaints Advocacy Service] sounds like a fantastic service, I'll know who to call if I have issues in the future.'

## Our forward plan for 2021-22

In addition to the actions highlighted throughout this report we have identified our priorities for our engagement activities this year. The progress we make will be determined by our capacity but also emerging priorities throughout the year. It is not always possible to evidence the progress we make against our priorities within the financial year as a lot of preparation takes place, for example, meetings with our stakeholders, including the public, to make sure we are taking the right approach and our engagement is meaningful and able to produce effective outcomes.

The staff and Board of Healthwatch Shropshire have agreed the following priorities for 2021-22:

- Mental health (including learning disability and autism, general mental wellbeing and older adults mental health, e.g. Dementia)
- Primary care (access to primary care services including dentistry, the development of Primary Care Network's)
- Secondary care (impact of the pandemic on elective care, diagnostics and Cancer, Hospital Transformation Programme (HTP), patient initiated follow-up)
- Prevention & Place-based care (including 'single point of access', care homes and service redesign, e.g. MSK, out of hospital)
- Maternity services (the Ockenden Review, Maternity Services Consultation)
- Children and young people (physical and mental health)

- Health inequalities (including rural inequality, digital inequality)
- Public involvement (promoting and supporting timely engagement and involvement across the ICS to include the public and staff delivering services, for example working with Housing Associations/housing providers and Patient Groups to reach people)

Our progress against these priorities will be evidenced in our newsletters throughout the year and our Annual Report for 2021-22 which will be published in July 2022.

To read our Annual Report for 2020-21 please go to our website: [Annual Report: April 2020 - March 2021 | Healthwatch Shropshire](#)



## Thank you

The Healthwatch Shropshire Team would like to thank the public for their feedback over the year, our Board and volunteers for their insight and the professionals from across health and social care and the voluntary and community sector who shared their views with us.

*Your voice counts!*

### Copyright

This report is the intellectual property of Healthwatch Shropshire. If you wish to do any of the following please discuss it with Healthwatch Shropshire in order to get the necessary permission: copy the report, issue copies of the report and appendices to the public, communicate the findings with the public, edit or adapt the report.

### Contact us



01743 237884



[enquiries@healthwatchshropshire.co.uk](mailto:enquiries@healthwatchshropshire.co.uk)  
[www.healthwatchshropshire.co.uk](http://www.healthwatchshropshire.co.uk)



Healthwatch Shropshire, 4 The Creative Quarter, Shrewsbury Business Park, Shrewsbury, Shropshire, SY2 6LG