

Derby LINK

HEALTH

and



Annual Report 2012—2013



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Introduction

Steve Studham, Chair of Derby LINK



The final one! The Link comes to an end on 31st March 2013.

It is most appropriate to say thanks you to the LINK members and staff for your support and input over the life of the LINK. There have been many challenges and I am pleased to say that the volunteers have risen to these and kept the LINK doing what it should. Our resources may have been small but the achievements made with them have very commendable as you will see in the following pages.

The last year has been progressively geared toward the creation of Healthwatch Derby and it gives me great pleasure to thank the members of the steering group, the outgoing NHS organisations and Derby City council for their assistance in realising the transformation of the LINK into Healthwatch.

It is a great credit to LINK that the support staff have maintained a composed and continuing input despite the uncertainties of the future and it is good to know that they will be the core staff of Healthwatch Derby.

Enjoy the report and good bye.

Steve Studham
Chair Derby LINK

Overview

James Moore

Derby LiNk Co-ordinator

The final year of the LiNk was mainly taken up with the transition to the new consumer champion for public and patient voice Healthwatch.



Healthwatch England launched in October 2012 and Derby LiNk board and staff helped develop and design the Local Healthwatch Service for Derby City ensuring that the learning and experience gained from the past is not lost and Healthwatch Derby can build on the legacy and solid foundations that have already been laid down.

LiNk continued to carry out enter and view visits to care homes and worked closely with our local CQC as well as continuing to work at a national level with the CQC on how to ensure appropriate communications between the organisations happen in the new Healthwatch arena.

We also followed up on our work around hospital discharge to care homes locally and discovered that there had been some improvements and the Standard operating procedure that Derby Hospitals NHS Foundation Trust developed after our initial report and with involvement from LiNk members and staff has been rolled out. However we also reported that there were still areas that needed vigilance and continual improvement.

LiNks membership base continued to grow and has successfully transferred to the new organisation and will help ensure continued engagement with all areas of the community.

Derby LiNks legacy will live on and help develop the shape of Healthwatch work locally and nationally our newsletter was the basis of many other LiNks around the country. Our enter and view work was recognised as good practice by CQC and included in one of their guides for LiNks. Our Hospital Discharge work is helping to effect positive change locally.

The work of the volunteers and staff has led to the LiNk being involved with the transformation process and being trusted to be the basis of the new local Healthwatch and to ensure that the voice of local people will be heard by the commissioners

To them a big thanks and good luck for the future.

James Moore

Derby LiNk Co-ordinator

Who we are

Management Committee

We currently have a combination of 435 individual and organisational voluntary members, throughout the year 14 served as Management Committee members giving their time attending meetings, discussing and identifying issues, agreeing policies ,setting priorities ,LiNk development and ensuring that all activities are designed to help improve the Health and Social Care for the peoples of Derby.

Issues are identified from public consultation, working with service providers, statutory partners and our members' own observations and experiences.

Our Management Committee members for the year were:

Ciselyn Alexander
Raj Bali
Som Bhalla
Carol Burns
Margaret Daisy Butler
Raj Gill
Margaret Hall
Marta Hancock
Keith Jeffrey (Resigned August 2012)
Margot Keats
Gloria Newell
Tim Proctor
Steve Studham - Chair
Peter Swift – Vice Chair

The Management Committee works in partnership with those that reside or work in Derby, service providers, our statutory partners which include Derby City Council, the Care Quality Commission , the Primary Care Trust , NHS and our host Community Action Derby .

Staff team

We have a staff team of 3 who ensure the day to day running of the LiNk, provide support to the Management Committee and volunteers as well as acting as liaison between the LiNk and the wider community. These are:

James Moore – LiNk Co-ordinator
Rebecca Johnson– Recruitment and Membership Officer
Jessica Davies – LiNk Researcher

Authorised representatives

Derby LiNk has been carrying out Enter and View visits to Care and Residential homes in the City. The aim of the visits are to provide a lay person's view of the home focussing on dignity and quality of life for the residents and their families and they compliment the official inspections all homes must have from the Care Quality Commission.

The Local Government and Public Involvement in Health Act 2007 states that Health and Social Care service providers have a duty to allow authorised representatives of LiNks to Enter and View and observe the carrying on of activities on premises owned or controlled by the service provider.

As of March 2012³ Derby Link have not had to formally use the Enter and View legislation as the Homes have willingly co-operated with us.

Derby LiNk has provided regular training on the process and legislation associated with Enter and View visits and has been supported by Derby City Council who have provided Safeguarding Training.

Since LiNk began we have trained 31 local volunteers who have completed the Enter and View training and the safeguarding adults awareness training; of those trained the following are our current authorised representatives.

Raj Bali
Bimlla Bhalla
Som Bhalla
Carol Anne Burns
Andrea Jane Grealy
Margaret Hall
Margot Keats
Azzma Madarbakus
Gloria Newell
Eileen Pettitt
Ian Pettitt
Timothy Proctor
Pearl Swann
Peter Swift
Shirley Wessels
Jon Wroe
Parminder Singh Thindal



What we did this year

Recruitment

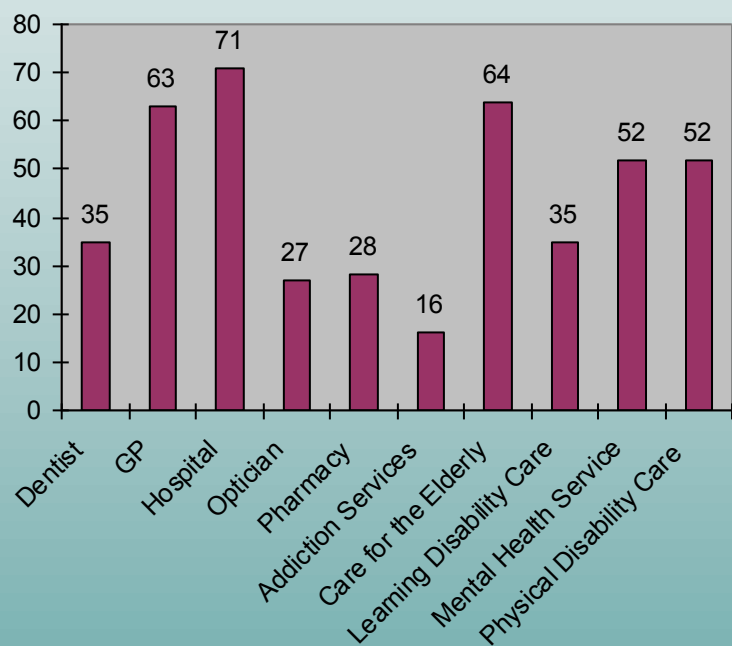
Membership of Derby LINK has progressed well over the past year; currently we have 436 individual and organisational members. Of these 168 are active volunteers, with a good spread of representation from all equality groups across the city.

We have developed a range of different roles for members to allow them to participate as much or as little as they would like. These roles provide a range of opportunities for involvement and offer a variety of volunteer experiences, they are: Member, Researcher, Ambassador, Representative, Authorised Representative and Committee Member.



Member Roles	Numbers
LINK Member	468
LINK Committee Member	14
LINK Researcher	40
LINK Authorised Representatives	31
LINK Ambassador	37
LINK Representatives	33

Which Health and Social Care Services are important to you?



Recruitment and Awareness Events

We have held regular recruitment and awareness events throughout the year at various Health Centres across the City. Royal Derby Hospital and Kingsway Hospital have been the main venues throughout. These events have been a valuable source of information gathering providing an outlet to raise awareness of Derby LINK but also allowing residents of Derby access to information and giving them an opportunity to let us know some of the issues that concern them with Health and Social Care.

Community events

We have attended many community events including coffee mornings, work shops, support groups, information events and staff meetings either to give presentations or as part of our engagement and promotional activity.

To reach as wide a section of the population as possible, the Derby LINK team decided to use a range of communication channels to raise awareness of issues and opportunities for involvement and promote the good work we have achieved so far.

The work has helped to raise awareness increase our membership and ensure we have good representation from communities and interested groups across the City.



Newsletter

One of the main methods of communicating with our members and the wider community is via our fortnightly newsletter. This goes out to around 400 groups and individuals, including providers and statutory partners. The newsletter carries information on upcoming events, opportunities for involvement, current consultations and latest news about health and social care services. We have received great praise for the newsletter, and its style and format have been copied by other LINKs nationally.

We provide paper copies for members who do not have computer access and most news items are copied to our website for wider publicity. Our feed back shows that we have a higher than average open rate for the electronic version of our newsletter .

Training

Volunteers play a vital role in Derby LiNk. Our aim is to meet the needs of our volunteers and provide all the training and support they request to help make the most of their volunteering opportunity.

Derby LiNk has developed training plans for their members, to enable them to fully participate in consultations, meetings, conferences and represent Derby LiNk.

Induction and Communication Training

Induction and communication training is offered to all new members, this training session gives our volunteers a better understanding of Derby LiNk, their role as a volunteer and the policies and procedures of Derby LiNk. Ensuring they have the necessary skills and the confidence to effectively carry out this important role.

The training session gives members a chance to raise any concerns they may have about volunteering with the project and on successful completion ensures members are fully covered and have the necessary ID to carry out LiNk activities.



Ambassador and Representative Training

One of the aims of LiNk is to engage with as many different groups and individuals as possible. To help with this we have devised the roles of Ambassador and Representative.



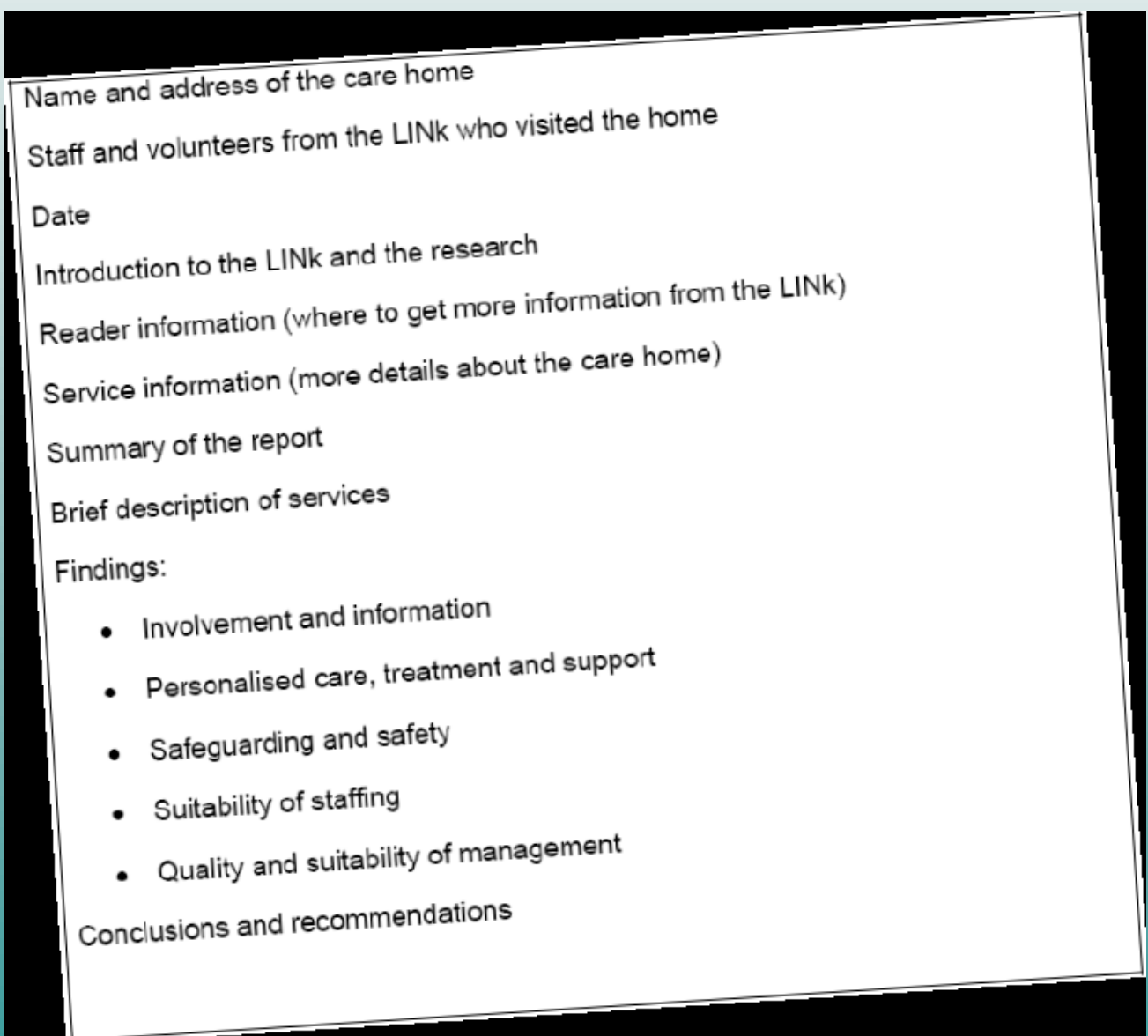
Members who undertake these roles agree to attend meetings or events and feedback any information or developments whilst also raising issues on behalf of LiNk and the wider community.

Enter and View training

The Enter and View training is compulsory training for Derby LINK members who wish to qualify as Authorised Representatives, and take part in enter and view visits of health and social care premises.

Only members who have successfully completed our induction training are eligible to take part. On completion of training, a CRB check for members is submitted.

This training session is specifically designed for better understanding of legislation, government directions, the process of a visit and the reporting system we use. In this session, group work, group discussions and different case studies are planned to give members in-depth understanding of issues and highlight the importance and sensitivity of these visits.



The image shows a tilted photograph of a white report form. The form is titled 'Enter and View' at the top. It contains several sections for recording information from a visit to a care home. The sections are: 'Name and address of the care home', 'Staff and volunteers from the LINK who visited the home', 'Date', 'Introduction to the LINK and the research', 'Reader information (where to get more information from the LINK)', 'Service information (more details about the care home)', 'Summary of the report', 'Brief description of services', 'Findings:' followed by a bulleted list of five points, and 'Conclusions and recommendations'.

Enter and View

Name and address of the care home

Staff and volunteers from the LINK who visited the home

Date

Introduction to the LINK and the research

Reader information (where to get more information from the LINK)

Service information (more details about the care home)

Summary of the report

Brief description of services

Findings:

- Involvement and information
- Personalised care, treatment and support
- Safeguarding and safety
- Suitability of staffing
- Quality and suitability of management

Conclusions and recommendations

Care homes

Every LINK has powers to 'Enter and View' any premises that provide health or social care services. We provide training for our members on the legislation and procedures associated with an Enter and View visit.

Derby LINK members discussed how we should use these powers and focus on how we would help improve services within Derby, members decided to use our powers to speak to residents of care homes about their experiences of living in the homes. We later expanded this to include visitors and staff members' views of the homes to give a more rounded view.

We have visited most of the care and residential homes in the city and recorded the views of hundreds of residents, their visitors and the staff of the homes.

A report is compiled of each visit which, once approved by the home, it is shared with NHS Derby City, Derby City Council and the Care Quality Commission (CQC).

These reports have been very well received and resulted in Derby LINK being invited to take part in a national learning set with CQC on how LINKs can share information gained. This has culminated in Derby LINKs Enter and View report template being included in the CQC *A guide for LINKs* publication in June 2011.

Additionally CQC compliance inspectors now access these reports prior to carrying out formal inspections to gather a fuller picture of services offered.





Throughout the year we took part in working with the CQC as part of the LINKs/Healthwatch national development project.

The development project aims to:-

- Develop further tools and guidance for Healthwatch to use in recording and sharing information with CQC about the quality and safety of health and social care services
- Explore the information local Healthwatch will be likely to share with Healthwatch England and how CQC can work with Healthwatch England to manage this information
- Pilot options for how and when CQC and LINKs/Healthwatch should work more closely together on CQC inspections and LINKs' enter and view visits, to make better use of information from people who use services, and produce guidance and protocols for use by LINKs/local Healthwatch.
- Maintain effective two way dialogue between CQC and local Healthwatch pathfinders and regional networks of LINKs/local authorities to help us shape the development of CQC's relationship with LINKs/local Healthwatch, and how we work with Healthwatch England

Research Report

In the past year, from April 2012 to March 2013 the majority of Derby LINKs work plan has been involved with the transition from Derby LINK to Healthwatch Derby.

Enter and View

The Enter and View Program consisted of two revisits to residential and nursing homes where recommendations were made at the initial visits.

Representatives from the Derby LINK staff team and volunteers were also involved in contributing to the development of national guidance around Enter and View coordinated by Healthwatch England.



Case Studies

Derby LINK were involved with a number of patient experience case studies around hospital discharge and domiciliary care services which contributed to the development of a standard procedure in handling patient experience to use as Healthwatch Derby.

Integrated Lifestyle Questionnaire

In June, Derby LINK members were invited to share their views and feed into the development of an intervention around Integrated Lifestyle and Behaviour Change by NHS Derby City.

Accessing NHS Services in Residential Homes

In July, after a national publication about people in care and the level of access they have to NHS services by the CQC which outlined a number of issues, Derby LINK conducted a study with local residential and nursing homes to ascertain if these difficulties were typical of Derby City. The study examined access to GP's, dentists, opticians, pharmacies and a range of rehabilitative services.

A total of 86 surveys were sent to residential and nursing homes in the city.

Although the results were positive, due to only a third of homes responding, Derby LINK felt that the subject of accessing NHS Services required further investigation

as the results are at odds with what has been heard anecdotally recommending that questions around access to NHS Services are incorporated into the Enter And View Visits to gather a more detailed understanding of the difficulties experienced by residential and nursing homes.



Hospital Discharge

In August, after the success of Derby LINKs Hospital Discharge Report: Examining the Experiences of Staff Regarding Hospital Discharge to Care and Residential Homes in Relation to the Hospital Discharge Policy in Derby and the subsequent production of a new Standard Operating Procedure – Transfer of Patients from Acute Care to A Care Home Setting by Derby Royal Hospital, Derby LINK conducted a second study examining the experiences of health care professionals, at both residential and nursing homes, regarding the process of a patient's discharge from hospital to a care home, in terms of appropriate discharge, medication, awareness, involvement and support, information and communication. One concern the hospital outlined as part of the previous study was that residential and nursing homes may have misinterpreted the definition of 'discharge'; in order to ensure that the term was understood a note was included on the survey stating 'the hospitals definition of discharge relates to somebody who had been admitted to a ward, wasn't a day patient and wasn't waiting assessment'.

The Derby LINK Hospital Discharge Survey was open for four weeks. It consisted of 33 multiple choice questions as well as spaces for respondents to leave comments. The survey was posted to a total of 86 residential and nursing homes in the city with freepost envelopes. A total of 25 responses were received, resulting in a 29% response rate for the study.

The results indicated some improvement in regards to hospital discharge to residential and nursing homes compared to 2011, however there were still concerns particularly around the timing of the discharge, ensuring the dignity and respect of the patient, and ensuring that medication was correct at all times.

Dementia Refresh Strategy

During August and September, Derby City Council and Southern Derbyshire Clinical Commissioning Group conducted a refresh in the Joint Derby City Dementia Strategy, seeking the views and experiences of people with dementia and their carers. This was done through a series of community engagement events, inviting people to take part in discussions.

Derby LINK members assisted the CCG and DCC in facilitating these community engagement events throughout the city.

End Of Life Care

Derby City Council and partners in the NHS held an event in October for people to contribute to the development of the 'End of Life Care within Residential Homes for People with Dementia' project.

Derby LINK members took part in the conversations leading to development of a good practice toolkit.

Healthwatch Derby Consultation

Derby LiNk conducted the Healthwatch Derby Consultation from July until November which consisted of a series of engagement events and two surveys; inviting individuals and organisations to comment on the development of local Healthwatch.

In total, over 2000 people were spoken to at over 15 engagement events. Two surveys were disseminated through these engagement events and also through a variety of local networks.

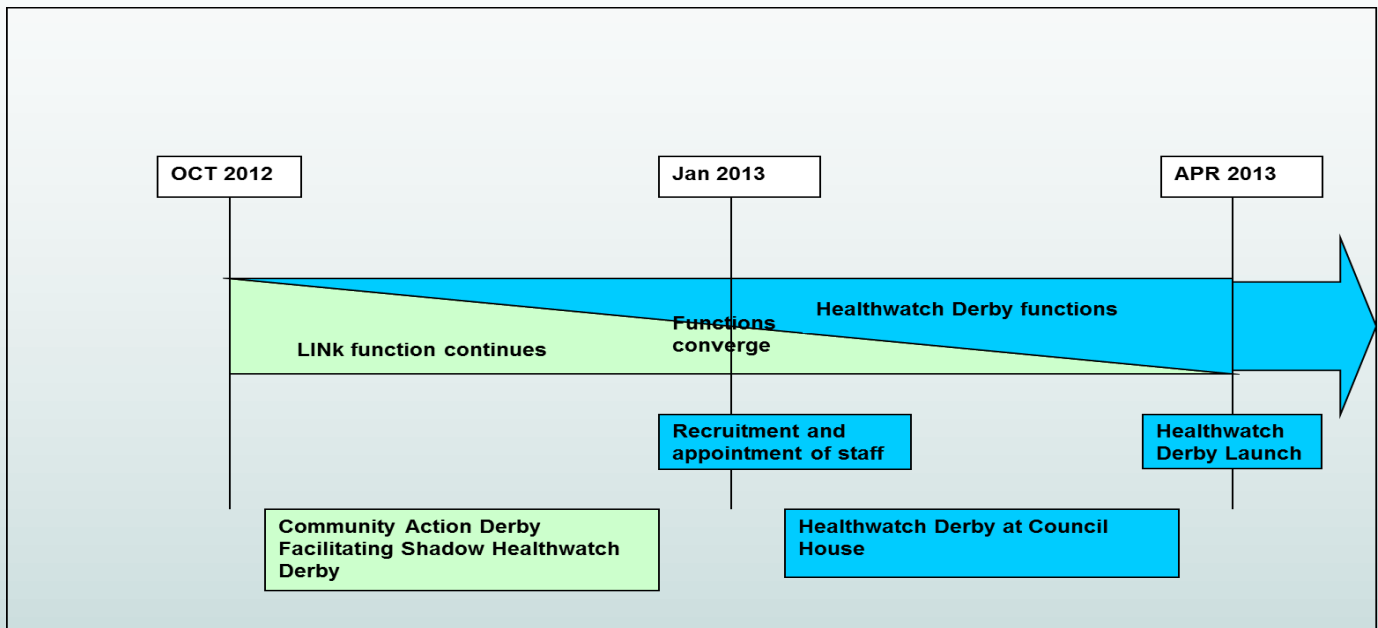
The top 5 areas people thought Healthwatch Derby should concentrate on were GP's, Hospitals, Mental Health services and care for the elderly.

Derby Deaf Forum

Derby Deaf Forum held an event in March providing the chance for the deaf community to find out information about health and social care services and open up a dialogue between the community and service providers.

Derby LiNk members assisted the forum by helping to facilitate 4 focus groups at the event.

Healthwatch Derby has developed from Derby LINK



Derby Link worked with a steering group made up from Derby City Council, Southern Derbyshire Clinical Commissioning Group, Derby City Primary Care Trust to help develop Healthwatch Derby.

All local authorities need to have a local Healthwatch as laid out in The Health and Social Care Act 2012 and Healthwatch Derby will be in place on April 1 2013.

Healthwatch Derby is the **independent consumer champion**, a Watchdog, for the people of Derby for all Health and Social Care Services

It aims to:

provide local people with access to all the local health and social care decision-makers.

Give service users a national voice through Healthwatch England.

Promote the duty of local providers of health and social care services to listen to your views, experiences and expectations.

provide evidence which will be used to influence the policy, planning and delivery of public funded health and social care services by gathering and analysing the local community view

Overview and Scrutiny Commission (OSC)

We have developed a good relationships with our local Overview and Scrutiny Commission (OSC). We have agreed a policy for working together and sharing information which has worked well to date and we are looking at how this relationship will develop as we move towards Healthwatch.



Formal requests

In 2012–13 we have not made any formal requests for information from NHS services. This is due to the excellent relationship we have developed with the trusts who, in our experience, have been more than happy to share information and resources without recourse to formal action. We hope to continue and further develop these relationships as we move towards Healthwatch

Finance Report

Budget 2012-2013		Monitoring 2012-13					
BUDGET 2012-2013 £	BUDGET 2012-13 Additional £	Budget total	To- £	Spend April - Sept 2012	Spend Oct-Dec 2012	Spend - Mar 2013	Totals
COSTS:							
STAFFING COSTS:							
LINK Co-Ordinator	14,000	16,048	30,048	13,733.16	6,866.58	9,182.44	29,782.18
LINK Officer	12,000	11,640	23,640	10,769.06	5,819.40	5,819.40	22,407.86
LINK Researcher	4,800	10,890	15,690	4,666.62	5,444.40	5,444.40	15,555.42
TOTAL Staffing Costs							
	30,800	38,578	69,378	29,168.84	18,130.38	20,446.24	67,745.46
Premises & Office Running Coats	6,200	5,511	11,711	5,605.86	3,621.54	3,446.24	12,673.64
Staff Travel & Other Costs	498	200	698	425.03	35.50	608.00	1,068.53
Publicity & Communications	500	0	500	306.00	77.73	99.90	483.63
Members Expenses	1,200	600	1,800	1,002.65	495.35	822.93	2,320.93
Management & Core Support Fees	3,840	990	4,830	1,156.00	1,156.00	2,312.81	4,624.81
TOTAL Other Costs							
	12,238	7,301	19,539	8,495.54	5,386.12	7,289.88	21,171.54
TOTAL PROJECT COSTS							
	43,038	45,879	88,917	37,664.38	23,516.50	27,736.12	88,917.00



healthwatch
Derby



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