

**Annual Report  
2014 -2015**



**Welcome to the second Healthwatch Camden annual report.**

**Healthwatch Camden is here for you to use your voice to have real power and influence.**



We are a valuable voice in health and social care in Camden. We give out information and advice and champion equality for local people. We have the power to influence the delivery and design of local services, and work in partnership with local organisations. We help shape local services not just for the people who use them, but also for anyone who might need to in future.

Our role is:

-  To make sure local people have a VOICE in health and social care services.
-  To support local people to make CHOICES in services.
-  To encourage CHANGE in services to make them better.
-  All our work is focused on these aims.

We have power - we were set up by an **Act of Parliament** and we are independent - a registered charity, with trustees who all live or work locally.

You can read our **strategic plan** about our plans and how we choose our priorities. We have made a lot of progress since our first year. In this report you will find details of what we've done, and the difference it has made.

**Frances Hasler, Director**  
**Dr Connie Smith, Chair**

**In response to a Healthwatch Camden report, Great Ormond Street Hospital for Children (GOSH) reviewed its food service and implemented positive changes. (See page 7)**



We talked to a lot of local families whose children have special educational needs or learning disabilities. They told us about the support services that are available to them in Camden. Our report to Camden Council, based on their views and experience, got a very positive response and is already making a difference (see page 8). Even better, we know that other organisations in the borough have seen it and are using it too. It led to some great partnership work with local organisations about short breaks. (See page 10)

Our outreach has put us in touch with a wide range of community groups and individuals. Through this we've been able to give people a bigger voice. (More details page 11)

We've championed the issue of mental health. We took a report to the Health and Adult Social Care Scrutiny committee. We made sure that mental wellbeing is a priority for the Health and Wellbeing Board (See page 10).

Our community forum in November was well supported. We were pleased to see such a diverse group of people taking part and we hope we've reflected the concerns of the people with learning disabilities, D/deaf people, carers and older people who took part in the forum on our plans for this year (See page 17).

Chikwaba Oduka said: **"It's great that the council is having reviews on sexual health services and thank you to Frances at Healthwatch for having mentioned our work."**

## 4 What we do: Talking to local people about health and social care services

**We spend a lot of our time out and about, talking to local people.**



In the past year we've had stalls at community events such as the Bangladeshi Mela, community festivals in Somers Town, Queen's Crescent, Kentish Town; and at varied places including Haverstock School, Chalk Farm 'Morrisons', and Centre 404.

We've met older people at the Abbey Community Centre, parents at Highgate Newtown, and young people at the African Health Forum. We've heard from Area Forums in Bloomsbury and Kilburn, and had good contact with Patient Participation Groups. We've been to events organised by the Clinical Commissioning Group (CCG), Age UK, and Camden Carers Service (CCS) to hear what local people have to say. Altogether we've met hundreds of people at events over the year.



**Altogether we've met  
100's of people  
at events over the year**

**We've involved local people in our steering groups for the 'Start here...' project and the Involvement Audit, and we've heard from them at our board meetings in public.**

## We've been working with local community organisations to hold focus groups on GP services and on healthy living services with people from Camden's varied minority communities.

The African Health Forum assisted by organising groups for young people. The young people chose to hold their groups at the barber's shop and the nail salon. They came from six different African countries and from the Caribbean.

### Here are some of the things they said:

**"Talk to your GP and express what you need, they are not fortune tellers."**

**"I would like regular check ups with my medication, to make sure I have the right ones for me."**

**"Healthiness is key. Being healthy keeps you strong for the whole family."**

We heard from older people at the Camden Chinese Community Centre. The Chadswell Community Centre organised a focus group on our behalf with Bangladeshi women of all ages.

### Here are some of the things they said:

**"Sometimes I feel very lonely so I come to this centre, but I would like to have someone to come to my house and give me company."**

**"I was given another person's medicine by the local pharmacy, it's only when I insisted that it was not mine they checked my details and realised they had given me the wrong medicine."**

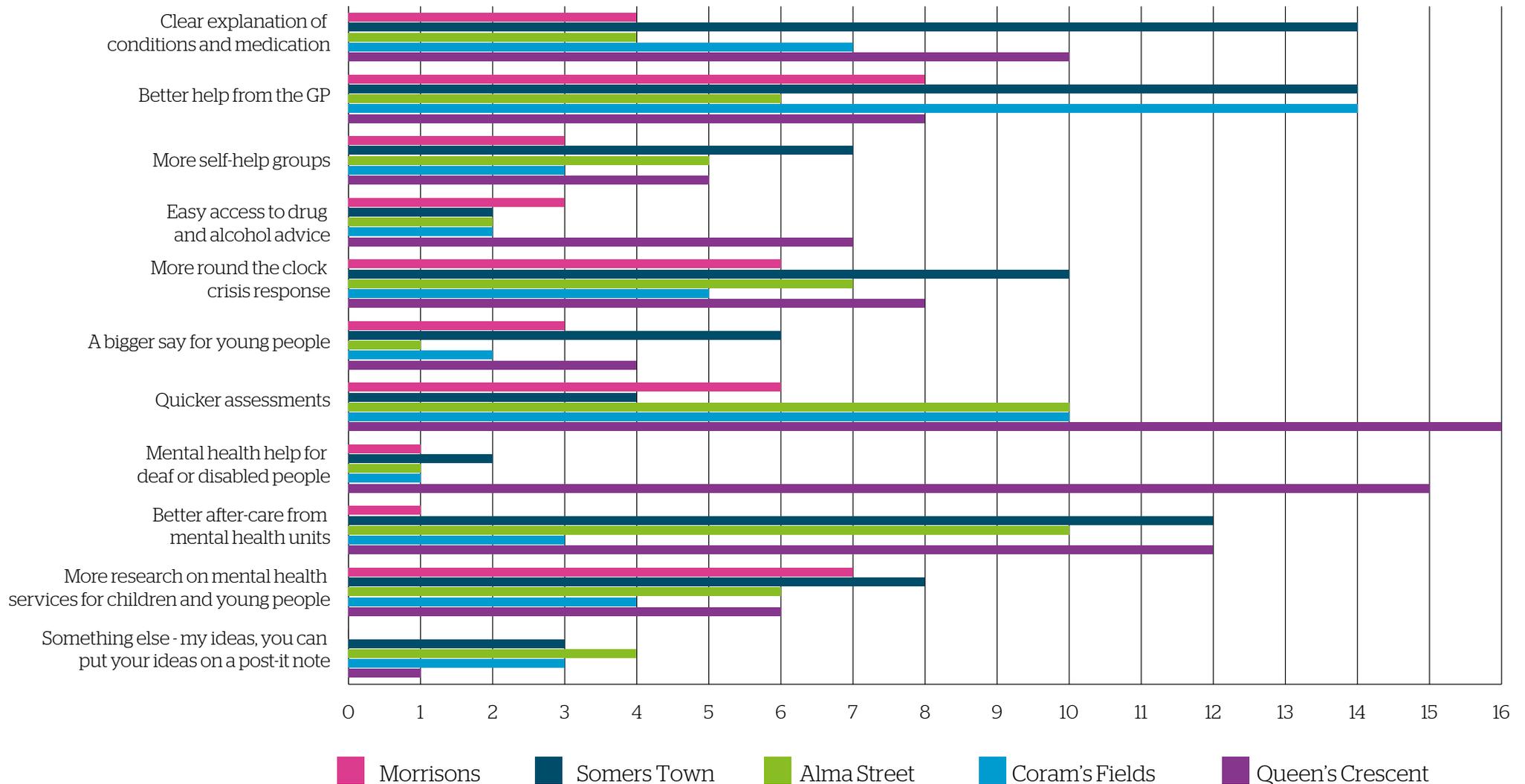


**"Every person cannot use online booking for appointments and repeat prescriptions."**

# What we do: What people tell us about mental health services in the community

We asked what was most important...and we had different responses at different places

The top three things I want to see action on are:





## We use what people tell us to make a difference

### Great Ormond Street Hospital for Children (GOSH)

In response to a **Healthwatch Camden report** (Food and Catering at GOSH – experiences of patients and their families), Great Ormond Street Hospital for Children reviewed its food service and implemented positive changes. Criticism of the quality of food offered to patients at Great Ormond Street Hospital prompted Healthwatch Camden to use its statutory powers of ‘enter and view’ to investigate how well the current catering

services at GOSH are meeting patients’ needs and preferences. The food that young people and adults eat in hospital has a huge influence on their treatment results. We recruited some parent volunteers to help with the visits. They found that the majority of patients and families were happy with the food and catering services at GOSH, but there was room for improvement.

Areas for improvement included offering greater variety and availability of culturally appropriate foods. An Asian family commented that they were offered: “No Asian vegetarian food, only jacket potato, pizza or chips.”

We also received feedback from patients and their families that meals were late at times or not always ordered, and we saw some confusion around who was responsible for checking that meals were delivered on time. Following the report, GOSH agreed to take action to implement our recommendations.

### Mother tongue outreach

Healthwatch Camden is keen to make sure that the full range of Black Minority Ethnic and Refugee (BMER) communities in Camden get the opportunity to share their views and experience on health and social care. We’ve made contact with a wide range of local community groups, and we’re gathering views and passing them on to the right places.

- A key topic emerging from the African health group was sexual health, in particular men who have sex with men. We shared their insights with a Health and Adult Social Care Scrutiny panel on sexual health, resulting in the African Health Forum being invited to attend the panel and give evidence. They were pleased with this contact, it gave them a direct voice.

Bangladeshi women told us about difficulty getting good advice on prevention of ill health and also mistakes in referrals or prescriptions, among other concerns. We shared their concerns with the Health and Adult Care Scrutiny Committee and are working in partnership with this committee on a project to review health and wellbeing in the Bangladeshi community in Camden.

### Children's services report

Healthwatch Camden found that information, advice, and access to services for children with special educational needs and disabilities in Camden can be "hit and miss".

**Our report** (Specialist children's services in Camden: experiences of local families) had real impact.

Six of our recommendations had a very direct impact in driving change. Camden Council is now developing an abbreviated version of the Personal

**"Parents whose children have undiagnosed conditions struggle to access services because they don't have a name,"** said one parent who was interviewed as part of the survey.

Another parent told us: **"We're fed up of repeating our child's symptoms at every appointment. We need a system to ensure the different professionals are aware of the individual's needs."**

Profile, as a Single Page Profile. This will be of real benefit to families of children with SEND, the need for such a tool was a key finding from our research.

Other recommendations Camden Council took up include taking action to ensure that the available networking opportunities are clearly advertised to parents. This will benefit the families who told us that networks of other parents play a vital role in providing informal

support and that it can be hard to find and access such networks, especially for families of pre-school children and for those without a "statement".

**"...It has been helpful to have a Healthwatch representative attend our children with complex and additional needs children's trust commissioning group."**  
(Martin Pratt, Director, Children, Schools and Families, Camden Council)



## People living with HIV/AIDS in Camden

Another group of people who we've talked to are people living with HIV/AIDS. A key point was that people get bounced back and forth between specialist HIV services and the services that are not specific to HIV/AIDS (like GPs and mental health services) that people living with HIV/AIDS also need to use. We heard that these different types of services need to join up better. We shared our research findings, along with specific recommendations, with all the different bodies that have a role to play in providing care, treatment and support to people living with HIV/AIDS in Camden. Jonathan O'Sullivan, Assistant Director of Public Health in Camden said the report was 'welcome and timely'.

## Focus on mental health

During our outreach work, people told us that they are concerned about local mental health services. To find out more about local people's views on this subject, we undertook a poster survey of public opinion on mental wellbeing.

### People told us:

They want their GP to be able to help them with mental health issues. They also want good information about conditions and medication. Many are concerned about the speed of assessments and after care from mental health units. We also found distinct concerns - for example at one event, the issue of mental health services for deaf and disabled people came up as a strong priority. We found a widespread awareness that poor mental health is common, and a view that people who experience mental illness have a direct or indirect

impact on the wellbeing of those who know them, support them, or live close to them.

- We shared our findings with the Health and Wellbeing Board and the Health and Adult Social Care Scrutiny Committee. Mental wellbeing is now one of the priorities of the Health and Wellbeing Board, and a mental health scrutiny panel has been set up.
- During the year, Camden and Islington NHS Foundation Trust, which provides acute and community mental health services in the borough, had an inspection from the Care Quality Commission. We shared what people told us with the lead inspector. We took part in the Quality Summit following the inspection, and have been following up with meetings at the Trust with service users and with senior staff.

## 10 What we do: Working with others to make a difference

### **Children's services survey**

Throughout our specialist children's project, we worked closely with community organisations, in particular the Parent Partnership Parent Carer Forum and specialist voluntary organisations, such as KIDS and Elfrida Rathbone. We heard that there are fears about the future of the short breaks service. So we collaborated with six local voluntary organisations to survey the families affected and sent a report (**Short breaks provision in Camden: Parent survey results**) of our findings to the council, as a response to their consultation on short breaks.

### **Black Minority Ethnic and Refugee (BMER) Mental Health Summit**

We collaborated with Voluntary Action Camden and Camden and Islington NHS Trust to hold a 'summit' event, bringing service users, providers, commissioners and campaigners together to talk about the issues in mental health for BMER people in

Camden. We identified problems, but the event also produced a lot of positive ideas on what works, for example:

**"Providing services in community settings, enables professionals to see people in a more 'everyday' context; could help to reduce stigma."**

The event resulted in the setting up of a men's group for service users, and to continuing work at the Trust to engage young Black men in accessing crisis services.

### **Working on wellbeing**

We're a member of Camden's Health and Wellbeing Board, which brings together strategic partners to tackle health inequalities and to support integrated services. We lead the Stakeholder Engagement Group, a sub group of the board, co-ordinating and strengthening the engagement work of all the partners. Our representative, Alison Lowton, is supported by our

Director, who is a member of the officer's group that meets between board meetings to plan agendas and to follow up agreed actions.

### **Using national networks to achieve more**

Healthwatch Camden is part of a national network of local Healthwatches, supported by Healthwatch England. We contribute to Healthwatch England debates and share our findings with them. Through this, there has been a national spotlight on complaints processes (something we worked on last year). We also work with other local Healthwatches. For example we were able to share what D/deaf service users told us at an event at the London Assembly, where our colleague, Emma Whitby, from Healthwatch Islington spoke on behalf of London Healthwatches. We have joined with colleagues from four nearby local Healthwatches to get a stronger voice in local planning.

## **Involvement Audit**

Increasing and improving the way that people using services can have influence over how those services are designed and delivered is what Healthwatch Camden is here for. These days, most organisations involved in health and social care are keen on the idea of involving their service users and there is wide recognition that listening to local people is a good way to improve local services. But it's not always easy to involve people in ways that are really useful and meaningful.

We decided to do some work to help assess the quantity and quality of some of the service user engagement work that is being done by different organisations in Camden. The Camden Clinical Commissioning Group (CCCG) and the Camden and Islington NHS Foundation Trust both agreed to work with us to develop a method for evaluating user engagement

projects. We've spent time developing, agreeing on and testing out a method to assess whether the work they are doing to engage their service users is being done well and is making a difference. We call this our Audit of Involvement and the results will be ready to share this summer.

When we've completed testing our method, we plan to share it with other organisations who are interested in making sure that their engagement work is as good as it can be.



## 12 What we do: Supporting choice



**Healthwatch Camden provides information, by phone, by email and via our regular updates to help people get the best from local services. This year we started work on our ‘Start here...’ online information guide, to help people find their way around the huge number of helpful websites locally and nationally.**

Some of this work is straightforward - for example, a person wanting to know where to find a good local home care agency. But much of it is about helping people to get their rights in services. This can take a lot of time.

### **Mr Smith (not his real name)**

Mr Smith is an elderly man who lives alone. He came to us because he had been taken off his GP's list after a misunderstanding with the receptionist. He had not seen a doctor for over a year. He was scared to approach a new GP as he thought he would be labelled as a bad patient.

We helped him to check the feedback on local practices on NHS Choices. His chosen practice was not taking new patients. We made phone calls to the CCG's primary care team, who helped us to find a practice suitable for him. It is further away than his last GP, but he was pleased to have a new doctor.



Volunteers are an essential part of Healthwatch Camden's work. They help us gather views at community events, carry out 'mystery shopping' and other visits to services, and of course our board of trustees are all volunteers, too.

This video tells you how you can get involved (find link on page 19).



## Some of our volunteers are very local:

- Clara lives not far from our office, and was working in a care home for people with dementia when she started to volunteer for us. She helped with mystery shopping to follow up our report from last year on complaints information in GP surgeries. Clara says: "Being a mystery shopper has helped me to gain confidence in communicating with other people."
- Some of our volunteers have been involved for a long time. Tizzy says: "I've really enjoyed continuing to volunteer at Healthwatch Camden, it's given me the opportunity to help my local community."

- Some of our volunteers come from far away - Hideomi came on a study placement from his home in Tokyo, Japan. He carried out research (interviews, observations) about how well the available healthy living support meets the need in Camden. Hideomi said: "Camden provides good services but it does not always make it easy for people to find them." Since his project, the council has started work on a more joined-up service for healthy living support.

# 14 A week in the life of Healthwatch Camden

**A typical week includes lots of contact with people who use services, with voluntary and community organisations and with local providers and commissioners.**

**Some weeks include national contact - most of our work is very local to Camden, but we are always keen to learn from what people are doing elsewhere, to bring the best of it back to Camden. As an example, in the first week of November, we:**

took part in a Health and Housing Summit organised by Camden's Health and Wellbeing Board (HWB). The summits are linked to the HWB's aim of stimulating shared planning and developing new ways of working.

took part in a 'co-production' workshop at Camden and Islington NHS Trust, looking at the plans to put mental health workers into GP surgeries.

met with 'Clean Break' (a women's project working with ex-offenders) to talk about volunteering.

met with South Sudanese women to plan our mother tongue focus groups.

talked to two user-led organisations, Visually Impaired in Camden and British Deaf Association, about working with them as partners on our GP communication access project.

Went to learning disability organisation, Elfrida Rathbone Camden to talk about gaps in advocacy services.

worked on our 'Start here' ... online guide.

continued to develop our information resources, which includes publishing our weekly digest of information, and responding to phone calls.

met the Head of Patient Participation for NHS England, to share ideas on personal budgets and integrated personal commissioning.

took part in a round table discussion at the Kings' Fund, about the Better Care Fund and integrated services.

**We're run by local people. All of our board live or work in Camden and most of our staff live here - three grew up here.**

There are six people on Healthwatch Camden's board. They range in age from twenties to seventies. This year, all are women (although we'd welcome some men, and we'll be recruiting new members during 2015).

Newest board member, Rachel, says:

**"Since I have been working in Camden, I've come to see residents' resilience, and their enthusiasm for Camden. Healthwatch Camden can bring people and organisations together, and have open, constructive and participatory discussions about how to improve health and social care."**

During 2014/15, Healthwatch Camden had some staff changes. We have 3 full time, and 3 part time permanent staff. We also had a project worker (Len Lauk) for part of the year.



**Frances Hasler**  
Director



**Carl Mills**  
Business Co-ordinator



**Lindi Maqhubela**  
Communications Manager



**Shelly Khan**  
Community Engagement and Volunteer Manager



**Anna Wright**  
Policy and Insight Manager



**Peter Joseph**  
Volunteer Co-ordinator

## Board of directors



**Connie Smith**



**Elisa Alvares**



**Alison Lowton**



**Pam Hibbs**



**Claire Barry**



**Rachel Killick**

# 16 How we have used our resources

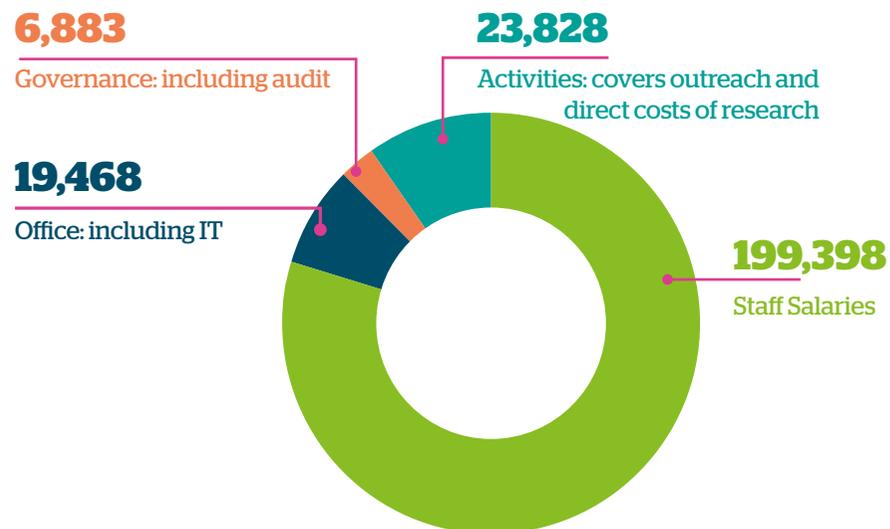
Healthwatch Camden started with a two year grant from the London Borough of Camden. This was our second year. We will be getting a further two year grant in 2014/15.

## 2014/15

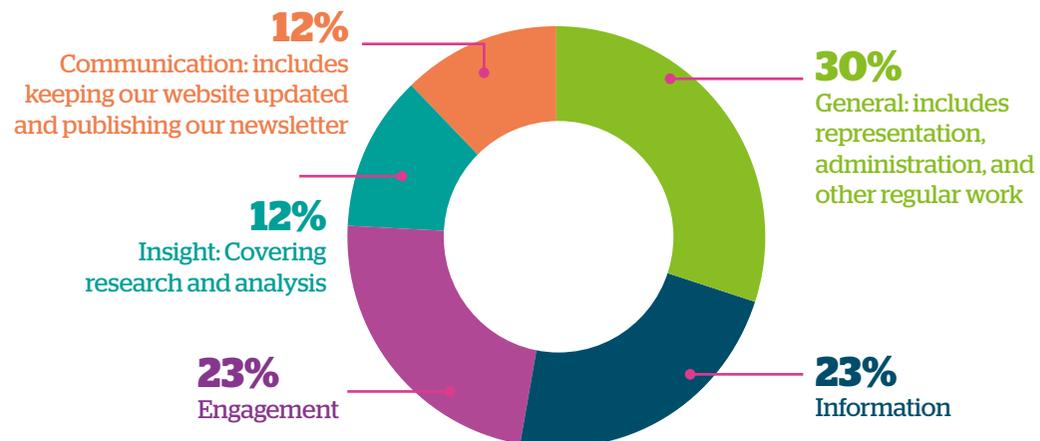
<b>Income</b>	Comprising £257,432 grant from Camden Council and £24 bank interest	£257,456
<b>Expenses</b>	See details - right/below	£249,577
	Surplus for year	£7,879
	Funds carried forward from 2013/14	£57,737
<b>Balance</b>	Includes funds earmarked for projects which will be completed in 2015	£65,616

These figures are unaudited

## How money has been spent



## Staff time



Budget cuts are a major area of concern. We heard that the implications of the impending cuts are causing anxiety and affecting people's health and wellbeing. We've used what parents told us to respond to the council's consultation about proposed cuts to the short breaks programme. We'll continue to look at the impact of proposed cuts and make sure that the council is taking people's views into account.

There's concern about the wellbeing of mental health in-patients. We are planning some 'enter and view' visits to mental health inpatient services. We will work with Camden Borough User Group to make sure we are checking the things that matter most.

People reported a general lack of deaf awareness among the community, and difficulties in having conversations with health professionals via a British Sign Language (BSL) interpreter. They said

that the mental health of D/deaf people is the area needing greater attention. We will include the concerns of D/deaf people in our future work on mental health. We've worked with other local Healthwatches to train some D/deaf people as 'enter and view' volunteers.

The challenge around communication with GP practices for people with learning disabilities and people with visual impairments, as well as for D/deaf people was also raised as a concern, and we're carrying out research into communication access at GP surgeries.

People said that the way in which GP practices provide services for patients with mental health issues needs improving. We'll be checking on how well the new mental health services in GP surgeries are working.

Local people asked us to pay attention to the particular issues involved in residential care provision for elderly, mentally ill and deaf and blind people. We'll be carrying out 'enter and view' visits to older people's residential care homes.

The Care Act will mean big changes in the way that health and social care services are delivered. We'll be looking at the implications of these changes for local people and checking that the Care Act changes are helping to make health and social care join up better.

## 18 Other information

Healthwatch Camden's remit is set out in law and we have to tell you how we have used our powers - even if we haven't used them this year. This includes letting you know that:

- We didn't make any recommendations to the Care Quality Commission (CQC) to undertake any reviews or investigations (although we did share feedback from local people with CQC when they were planning inspections).
- There were no providers or commissioners who did not respond to our requests for information within the specified 20 day period.
- We have an established method for setting priorities, which starts with the feedback we get from local people. Further details are on our website [healthwatchcamden.co.uk](http://healthwatchcamden.co.uk)
- The Healthwatch logo is a registered trademark and is protected under trademark law. Healthwatch Camden use the logo in accordance with a trademark licence agreement and no contractors have used the trademark this year.

### **How we will share this report**

We will publish this report on our website as well as printed copies. We'll also publish an easy read version. We'll let people know about the report in our regular weekly information e-bulletin, in our quarterly printed newsletter, via a press release and via the VAC weekly bulletin. We will also take copies of the report to events that we attended. As with everything we do, we'll also promote this on Twitter and on our Facebook page.

On this page, you will find links that accompany pages in this document.

## Page 2 Foreword

Link to BSL video on 'About Us' page

[www.healthwatchcamden.co.uk/about-healthwatch](http://www.healthwatchcamden.co.uk/about-healthwatch)

We have power - we were set up by an Act of Parliament

[www.healthwatch.co.uk/sites/healthwatch.co.uk/files/20130822\\_a\\_guide\\_to\\_the\\_legislation\\_affecting\\_local\\_healthwatch\\_final.pdf](http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/20130822_a_guide_to_the_legislation_affecting_local_healthwatch_final.pdf)

You can read our strategic plan here

[www.healthwatchcamden.co.uk/sites/default/files/260115\\_strategic\\_plan\\_update.pdf](http://www.healthwatchcamden.co.uk/sites/default/files/260115_strategic_plan_update.pdf)

## Page 4 What we do

BSL video on Local People's involvement

[www.healthwatchcamden.co.uk/local-peoples-involvement](http://www.healthwatchcamden.co.uk/local-peoples-involvement)

## Page 7 Making things happen

In response to a Healthwatch Camden report. (Food and catering GOSH experiences of patients and their families)

[www.healthwatchcamden.co.uk/sites/default/files/food\\_and\\_catering\\_gosh\\_experiences\\_of\\_patients\\_and\\_their\\_families\\_-\\_final\\_report.pdf](http://www.healthwatchcamden.co.uk/sites/default/files/food_and_catering_gosh_experiences_of_patients_and_their_families_-_final_report.pdf)

The report (Specialist children's services in Camden:

experiences of local families) [www.healthwatchcamden.co.uk/sites/default/files/specialist\\_childrens\\_services\\_experiences\\_of\\_families\\_-\\_final\\_published\\_version\\_1.pdf](http://www.healthwatchcamden.co.uk/sites/default/files/specialist_childrens_services_experiences_of_families_-_final_published_version_1.pdf)

## Page 10 Working with others to make a difference

A report (Short breaks provision in Camden: Parent survey

results) [www.healthwatchcamden.co.uk/sites/default/files/finalshort\\_breaks\\_report\\_-\\_with\\_camden\\_response\\_for\\_publication.pdf](http://www.healthwatchcamden.co.uk/sites/default/files/finalshort_breaks_report_-_with_camden_response_for_publication.pdf)

## Page 13 Working with volunteers from our community

Link to how you can get involved BSL video:

[www.healthwatchcamden.co.uk/get-involved](http://www.healthwatchcamden.co.uk/get-involved)

# Annual Report 2014 -2015

Healthwatch Camden thanks all the people who contributed to this report, and who have supported us this year.



© Healthwatch Camden is grant funded by the London Borough of Camden



Healthwatch Camden is a registered charity, number 1152552

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