The value of listening

Healthwatch Greenwich

Annual Report 2023-2024







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"Over the last year, local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities."

Louise Ansari, Chief Executive at Healthwatch England



Message from our Co-chairs

We are pleased to present our Annual Report for Healthwatch Greenwich, highlighting our incredible work over this past year.

As the health and social care champions for the Royal Borough of Greenwich, we are dedicated to ensuring the needs of our residents are heard and prioritised in the design and delivery of local health and care services.

This year, we are proud of the diverse communities we have reached in our work. From exploring the experiences of ethnic minority carers to looking at the maternity care challenges for migrant and asylum-seeking women, we have championed the voices of those experiencing multiple health inequalities and advocated for their care. We have achieved our reach through meeting Greenwich residents in ways which are accessible to them, embedding ourselves within their communities and working with them to prioritise their experiences and needs in the development of local services.



"We target those living in the 20% most deprived areas in Greenwich and across the borough we focus on those with protected characteristics. This helps us champion the voices of people experiencing multiple forms of inequality and shape the direction of services in ways which are equitable for all."



Anu Massey

By using participatory methods, we have strengthened our reach into groups whose views on health and care services are underrepresented. Our dedicated team trained local people with lived experience of health and social care services to capture the experiences of their communities. This allowed us to work with communities who are frequently left out of health and care decisionmaking. Working in partnership with local people, we created community-driven solutions to improve people's experience of health and care services.

We are very proud of our work this year and our contribution to making services more equitable and accessible for all.

Anu Massey and David Thompson Co-Chairs of Healthwatch Greenwich Board



David Thompson

About us

Healthwatch Greenwich is your local health and social care champion.

We make sure NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice to ensure you get the care you need. We build strong relationships with local groups that trust us, working with them to create sustainable and more inclusive care. We prioritise those experiencing multiple inequalities and ensure services are accessible and equitable for all.

Our vision

Where every resident can access health and social care services they need easily and equitably and receive exceptional service.



Our mission

To listen to all those who use health and care services in Greenwich and ensure their needs are heard and prioritised in the design and delivery of health and care services.



Our values are:

 Listening: We listen to people, especially the most vulnerable, to understand their experiences and what matters most to them.



- **Empowering:** We empower and inform people to get the most from their health and social care services and encourage other organisations to do the same.
- **Influencing:** We influence those who have the power to change services so that they can better meet people's needs now and in the future.
- Partnering: We partner with communities, providers, commissioners and regulators to serve as the consumer champion for everyone who uses NHS or publicly funded health or social care services in Greenwich.

Year in review

Reaching out:

3,450 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

24,208 people

came to us for clear advice and information about topics such as mental health and the cost-of-living crisis.



Making a difference to care:

We published

101 reports and updates

about the improvements people would like to see in health and social care services.

Our most read report on our website was



Maternity care for asylum-seeking and migrant women in south east London

Challenges of asylum-seeking and migrant women include difficulty in navigating maternity services, poor staff communication, poor quality of care, and a lack of local support networks.

Health and social care that works for you:

We're lucky to have

67

outstanding volunteers who dedicated 212 days with the equivalent of £17, 468 of their time at the rate of the London living wage.



We're funded by our local authority. In 2023 - 24 we received

£145,000

which is 4% more than the previous year.

We currently employ

7 staff members (5.5 FTE)

who help us carry out our work.

Strengthening resident's voices

At Healthwatch Greenwich, our mission is to strengthen residents' voice in the design and delivery of health and social care services. Our monthly feedback report creates a dialogue between those who deliver services and residents using services.

Our feedback report provides a timely snapshot into the experiences of local people as they navigate health and social care services. We share this feedback with commissioners and providers and invite them to respond. Our collaboration with key decision makers helps us to advocate for change and improvements to services.

3,450 people

shared their experiences of health and care services with us this year.



Case study: Anna's experience

We supported Anna to share her story to get the help she needed.

Anna lives with a long-standing musculoskeletal condition and faces daily challenges. She relies on her partner, who doubles as her carer.

Recently, her health has got worse, leaving her in pain and with limited mobility, making it hard to carry out daily living tasks. When Anna went to a local hospital to get a CAT scan and an MRI to help diagnose the issue, she was told she would be referred to a neurosurgeon for further evaluation. However, she never received this referral, leaving her feeling helpless and frustrated.

We highlighted Anna's experience and as a result, Circle MSK chased up the hospital on Anna's diagnosis and referred Anna to a local pain clinic to help her manage her symptoms. Circle MSK further arranged an appointment for Anna to see one of their clinicians to help with her hands which are causing her a lot of pain.



When I inquired weeks later, calling my GP at Eltham Palace, they told me the musculoskeletal department hadn't even sent the referral to the neurosurgeon

- Anna

Helping 200 patients find a new GP

We supported 200 residents to find a new GP practice with the closure of Clover Health Centre. Our support ensured they were able to access the help they needed, minimising disruption to their care.

Our core priority is to support people to find reliable and trustworthy information and empower them to get the most from their health and social care services. In this project, we did both. We worked to help patients access the care they needed, tailoring our support to their needs.

Some patients could not access or navigate online registration forms. We provided those patients with the skills and equipment to support them with their registration. For people who speak English but it's not their first language, our multi-lingual volunteers supported them in translating and navigating complex registration forms. For patients with additional cognitive and sensory needs, we used their preferred methods of communication to support them. In working with a deaf resident, we used his mobile phone texting app to show him how to complete the online registration form.

Many of the residents we spoke to identified as being from an ethnic minority background, having complex needs, multiple morbidities or being in a higher age bracket. Navigating digital systems was difficult for many.

We listen to patients' experiences to understand the challenges they face in changing their GP surgery, including the anxiety and stress this causes. Our engagement with residents along this pathway demonstrated the value of tailored support to meet their needs. This is especially important for residents experiencing multiple inequalities and who may face additional barriers in using online registration forms and systems.

What is the impact?

We identified how the registration process could be simplified and made more accessible for patients.

Our recommendations included reminding practices that ID documents are not an essential requirement (unless patients want to access their records online), reviewing the age-appropriateness of questions asked to register a younger child – such as questions on alcohol consumption and smoking, and improving front desk communication styles.



Supporting reablement services to meet carers needs

We carried out a deep dive into the experiences of reablement services from a carer's perspective. Working in partnership with the reablement service, we highlighted ways to better meet carers needs.

Our Key Findings

The reablement experience was good for carers and had a positive impact on their loved one's mobility and confidence.

However, carers told us more could be done to meet their needs. This includes greater cultural awareness amongst reablement staff and providing carers with clear and comprehensive information to help prepare them for what to expect.

What is the impact?

We asked providers to:

- · Provide clear information about reablement services at hospital discharge.
- Review follow-up procedures after reablement to provide carers with information and signposting on further support services.

In addition to the above, providers will also include:

 Equality, Diversity, and Inclusion (EDI) training to reablement staff to increase understanding and meet cultural needs and preferences.



"[It is] a bit stressful for me because I've got male carers now all the time and because I'm a Muslim and I must wear a scarf and cover myself because sometimes they're here four times [a day] and there's no specific time that they'll come. it's difficult...."

- Carer

Working with Black and Ethnic Minority carers to put their needs at the heart of support services

Using a participatory research approach, we explored the experiences and roles of Black and ethnic minority carers.

Our 8 co-researchers, all carers and Greenwich residents, identified as People of Colour or from an ethnic minority background. Co-researchers joined us to shape the design and development of the project, including reaching out to other carers from ethnic minority backgrounds and interviewing them about their caring journey. Their valuable insight helped us to understand carers' experiences and advocate for their needs to be heard and prioritised in services.

Our Key Findings

Carers told us how difficult it is to navigate their roles and access support. Carers shared their frustration with the lack of simple, accessible information. In using support services, their experiences are often shaped by a lack of cultural sensitivity, leading to a distrust in these services to meet their needs. Moreover, judgment and stigma, whether based on race, disability or other factors, can lead to feelings of isolation and discrimination among carers, reducing their ability to seek help and support.

What is the impact?

Our work highlighted the need for more culturally sensitive and inclusive services to ensure ethnic minority carers get the support they need.

We asked providers to review existing carer support services and evaluate their effectiveness for ethnic minority carers. Our work has since been used to develop the Royal Borough of Greenwich joint adult carers strategy for 2023-2027.



"I feel that because I'm black and because of my language accent [they] are not giving me attention. I have to strive to get attention. Yeah, sometimes I have to even make a scene to get the attention that I require, that I'm not being respected enough because of my colour."

- Carer

Maternity Care for Migrant and Asylum-Seeking Women

We partnered with the south east London maternity system to explore the experiences of migrant and asylum-seeking women as they navigate maternity care in south east London.

We worked alongside 8 women who all had experience using maternity care services and had recent experience of migrating to the U.K to design, run and develop the project. This insight helped us to understand the experiences of migrant and asylumseeking women and advocate for their needs to be heard and prioritised in services.

Our Key Findings

Our findings show the challenges migrant and asylum-seeking women face in accessing and receiving maternity care. A lack of simple and accessible information on service entitlements and how the health system works left women unsure of the services they could access, and in some cases, leading them to avoid seeking care. In using services, women felt they weren't being listened to and that they were getting a poorer treatment because of their ethnic backgrounds and migration status. Women also shared how they felt powerless to question decisions made about their care. Fearing that if they spoke out, they would get a poorer service or be refused service entirely. This left women feeling isolated, unsupported and distrustful. Feelings of emotional strain are worsened by a lack of family and friends in their new environment. In the absence of these networks, women found themselves isolated and struggling to manage the demands of pregnancy and young children.

What is the impact?

Through our important recommendations, the South East London Local Maternity and Neonatal System (SEL-LMNS) have committed to:

- Delivering cultural competence training for staff
- Making sure migrant and asylumseeking women know their rights with information available in multiple languages.



"During the time when I was still in labour, I wanted them to at least let me know what is going on and give me words like, everything is going to be okay. But instead, they will leave you without communication, sometimes they make me feel like I'm not even there...When you talk to them it will be like you are stressing them."

- Mother

Designing community-led approaches to improve mental wellbeing

We partnered with Royal Borough of Greenwich Public Health to organise a series of interactive workshops with local community leaders to identify ways to improve mental wellbeing.

Our Key Findings

The first workshop explored mental wellbeing experiences within local communities and their awareness of available resources. During this workshop, local community leaders discussed factors impacting people's mental wellbeing, including social, cultural, and financial factors as well as experiences of multiple forms of inequality.

Building on these findings, the second workshop focused on exploring factors important for mental wellbeing and identifying actionable approaches to increase awareness of mental wellbeing resources, including developing a local forum and nominating ambassadors to share information and signpost to relevant resources.

The third workshop identified practical approaches to empower leaders to work with their communities and increase awareness of existing mental wellbeing resources. During this workshop, leaders shared how a community forum might operate, what tasks might be undertaken by ambassadors and what support and funding might be required.

What is the impact?

As a result of our collaborative effort, public health is supporting the rollout of "Be Well" training amongst community groups.

"Be Well" will equip local ambassadors with the skills they need to promote mental wellbeing within their communities.



"... people might go onto the Internet, but they would just prefer going to community leaders. We still signpost. But they feel [the borough services] just aren't going to solve their problems, they trust leaders in the faith, culture, to solve their problems for them. But it becomes very challenging to help everyone."

- Community Leader

Working in partnership with people and communities

Over the past year, we have collaborated with health and care partners to facilitate a series of sessions with residents from across south east London. The primary focus of these sessions was to explore social prescribing, personal health budgets, and using co-production methods within the health and care sector.

Residents reviewed existing resources for social prescribing and personal health budgets and discussed ways to simplify this information and improve accessibility. Residents also shared their own experiences with personalised health budgets, and the barriers they face in accessing social prescribers.

Residents shared a need for clear, detailed, and tailored information about the support included in a personal health budget, and the need for specific guidelines on how different patient groups can access social prescribing. In addition, residents were unclear on who was responsible for performing social care assessments and if these were needed to access social prescribing. More accessible ways for individuals to meet with their social prescribers would be welcomed. Additionally, residents suggested a new name to reflect the true nature and benefits of this service.

Discussions on co-production were aimed to encourage a wider use of co-production methods across health and care in south east London. A key output from the group was the creation of materials that can be used to support co-production.

What is the impact?

The collaborative efforts over the past year have contributed to improving information on social prescribing and personal health budgets. Some of the co-production materials will be integrated into resources for engagement specialists within the South East London Integrated Care System (ICS).



Your voice heard at a wider level

We collaborate with other Healthwatch to ensure the experiences of people in Greenwich influence decisions made about services at South East London Integrated Care System (ICS) level.

This year we've worked with the other five Healthwatch across south east London to:



Feed in people's experiences to identify, shape, and develop the six South East London Integrated Care System priorities, the principles that underpin them and the ICS Integrated Care Strategy. We also provided support for this programme's community engagement.

Provide representation on 16 ICS and ICB Boards, Committees, and Groups. Through this participation, we ensured an independent voice for the public, and highlighted to decision makers and providers the insight and intelligence gathered by Healthwatch in Bromley, Bexley, Lewisham, Southwark, Lambeth and Greenwich.





Develop south east London Healthwatch webpages, bringing together key Healthwatch reports in one place to facilitate health commissioners' access to people's views, experiences, stories, and recommended solutions.

Champion digital inclusion across south east London programmes and services so that as technology use becomes more widespread, the reality of digital exclusion, which many people face, is mitigated.



Putting your voice at the heart of health and care decision-making

We work closely with the Healthier Greenwich Partnership (HGP) to ensure that the voices of people in Greenwich are at the heart of decisions made about health and social care services.

We bring the voices of patients, families, and carers to the HGP, providing insights and evidence-based recommendations that help shape the direction of local health and care services. As a community advocate, we represent the needs, preferences, and experiences of residents in discussions and decision-making processes. Our participation in partnership meetings and working groups helps to ensure service development prioritises the needs and expectations of local people. We monitor and report on the quality and accessibility of services and do independent reviews and evaluations to identify issues and trends that may affect care. We share these findings with the HGP.

Our forward-thinking helps highlight areas requiring attention and supports the Partnership in addressing service gaps and quality concerns.



An important part of our role is to review policies and initiatives developed by the HGP to ensure they reflect the real-world experiences of Greenwich residents. As the champion for those who use health and care services in Greenwich, our role is to provide constructive feedback to the HGP. We don't just highlight the issues. We draw attention to the things we have seen that work well, giving insight into good practices and offer practical ways to improve services to best meet people's needs. By doing so, we support the HGP in enhancing the quality and accessibility of services, ultimately contributing to better health outcomes for all.

Joy Beishon, Chief Executive Officer, Healthwatch Greenwich



Listening to your experiences

Services can't make improvements without hearing your views. By sharing your experiences with providers, we have held them accountable. Focusing on your individual stories, our case studies help commissioners and providers understand the real-world impact of health and care services.

Our case studies help identify where things are working well and gaps for improvement.

"We're a patient-focused NHS Trust working hard to improve the experience of our patients, which is at the heart of everything we do. We really welcome feedback that allows us to reflect on progress made and opportunities to drive further improvements. We know that wait times and basic admin mistakes are frustrating for patients and we are always sorry to hear when we haven't got this right. It's great to read such positive feedback for our dermatology teams and our A&E colleagues though and we are delighted to read about such great service"

- Louise Crosby, Chief Nurse at Lewisham and Greenwich NHS Trust

Ronan's Experience: "This experience was so horrible for him, he doesn't want to go back."

Ronan, of South Asian heritage, has learning disabilities and autism and lives in supported accommodation. He had an appointment for dental treatment at Guy's and St. Thomas'. Though he made it to the hospital, the process was highly stressful and lasted over 8 hours due to delays. Despite the stress, Ronan didn't get the care he needed.

Ronan's autism requires a very structured schedule. Stepping out from the routine causes him anxiety. Ronan struggles to communicate when upset and may harm himself out of frustration. Emma, his care worker, has been taking him to the dentist. The dentist referred him to Guy's and St. Thomas' for multiple treatments in one appointment, to avoid repeated distress.



"It's like you've let a balloon down and all the air's gone out of it, all the worry and anxiety it caused him for nothing. This experience was so horrible for him, he doesn't want to go back."



Emma, Ronan's carer

Getting the appointment was tough: "It took months. We eventually got an appointment a year and a half after the first referral." For the appointment, Ronan would need sedation, posing a risk if he had to return home by public transport. Emma was worried: "Ronan has disabilities, but no one offered help with transport. They didn't care, but I wasn't taking no for an answer."

Emma arranged hospital transport, but on the day, there were delays with no communication from the transport team. Ronan became anxious about his appointment. "When the transport eventually came, they said that another 3 people still needed to be picked up." This made them late, but they managed to get in.

At the hospital, specialist disability nurses explained the procedures: "They sat down and asked Ronan questions, waiting for him to reply. He found it comforting, but there wasn't any easy-read information. They asked him to repeat information back, but he couldn't answer."

"He wanted the appointment and usually remembers things well, but was so stressed from the transport delay. He was physically exhausted and hungry. We didn't get any letter about precautions, if he could eat, needing a consent form, or any other information."

The nurses decided Ronan couldn't consent to the procedures and postponed the appointment until he could provide written consent from a family member.

Emma doesn't know when Ronan will get a new appointment and worries about him returning to the hospital: "It's like you've let a balloon down and all the air's gone out of it, all the worry and anxiety it caused him for nothing. This experience was so horrible for him, he doesn't want to go back."

Fayola's Experience: "I need help, Minika needs help, but no one is helping us."

Fayola, a Nigerian mum, lives in Thamesmead with her husband and five children, including 20-year-old daughter Minika, who has autism and complex medical conditions like epilepsy, diabetes, and kidney disease. Last winter, left without heating by their housing provider, Minika ended up in the hospital. At the hospital, Minika and Fayola felt alone and helpless once again.

Despite her challenges, Minika is a happy young woman who enjoys going to a day centre, listening to music, and making TikTok videos. Staying warm and taking multiple medications help Minika manage her condition.

In November, Fayola's boiler stopped working, leaving the family without heating. Despite repeated calls and explaining Minika's medical vulnerability, their housing provider refused to schedule an emergency repair. Even Minika's day centre reported she was shaking and keeping her jacket on, but the urgent repair did not happen.

Fayola took Minika to the Queen Elizabeth Hospital, where the staff admitted her immediately. "She was shaking because the cold got to her so badly, she wouldn't stop... she won't take her medication, speak or respond to me, or even move. Usually, she's always talking, making videos, and listening to music. She's lost 8 kilos because she isn't eating. If I showed you a video of her before, you'd be very surprised."



"I'm so angry because all of this has been caused by the housing association. If they had sorted this out, my daughter would not be here... She is angry and irritated, sitting here not talking or responding and dribbling. She's never done this before."

Fayola, Minika's mother

Minika spent over two months in the hospital, with Fayola staying to look after her. Fayola said, "I'm so angry because all of this has been caused by the housing association. If they had sorted this out, my daughter would not be here... She is angry and irritated, sitting here not talking or responding and dribbling. She's never done this before."

Fayola slept beside her daughter's hospital bed in a reclining chair. "I am just stuck here for nearly two months watching her, looking after her. I am trying to keep her moving, get her up and sit her on the chair. I don't want her to get weak. I've only been home once in all this time because they [the ward staff] had someone come to watch her, but they've told me they're too short-staffed on the ward to do that now, so I can't have a break ... I need help, Minika needs help, but no one is helping us."



Hearing from all communities

Over the past year, we have worked hard to make sure we hear from as many people we can in our local area. We work with communities to gather their feedback and make sure their voice is heard.

This year we have reached communities by:

- Outreach: We work with community organisations and cultural centres, and grassroots groups that represent residents whose voices often go unheard.
- Reaching people where they are: We speak to Greenwich residents where they are, including local libraries, community centres, leisure centres and shopping areas.
- Inequalities: We focus our efforts to hear from those living in the 20% most deprived areas in Greenwich and we prioritise people experiencing multiple inequalities.
- Representation and diversity: We actively promote diversity in our staff team, volunteer pool and board membership to create an organisation that reflects the ethnic, cultural and linguistic diversity of Greenwich.
- Partnerships: We foster collaborations with community leaders, faith-based organisations and local support groups, and we participate in community forums.
- Multi-channel approach: We include multiple ways for people to reach and engage with us including social media, phone calls, emails, and in-person meetings.
- Communication skills: We reach out and provide information in community languages, using the support of our multi-lingual volunteers and staff.



"For wheelchair users, we can't have breast screening because we can't stand. What other measures are in place for people like us, I can't even access gym services, they always promise things, but nothing is done"

-Resident



Advice and Information

If you're feeling worried or stressed, our free, confidential information and support service can help you understand your choices and get the help you need. Whether you're looking for an NHS dentist, picking a good care home for a relative, or making a complaint, we're here for you.

Here are some examples of how we've helped people this year:

- Understanding rights and responsibilities: We've helped people understand their rights and the responsibilities of their local health and care providers.
- Finding resources: We've signposted families to resources on childhood vaccinations and helped carers of people with dementia access local support networks.
- Digital access: We've supported residents who lack digital access to get hold of their medical records.



"It was tough because so many things I didn't understand. I didn't have the experience of being a carer. I didn't know about a lot of information. It was not really clear to me.... Because the truth of the matter is that all the information you need is not available, it's not really out there... you're struggling to get information..."

-Carer



Enter and View

Here at Healthwatch Greenwich, one of the things we do is visit health and social care services. These visits are called 'Enter and View'.

The Health and Social Care Act (2012) allows us to do this in any publicly funded service, like hospitals, care homes, GP surgeries, and even dentists and pharmacies.

Our staff and volunteers go to these places to see what it's really like for the people who use them. They talk to patients, residents, their families and carers to understand their experiences.

By visiting these places, we can find out what works well and what needs improvement.

Shining a Spotlight on Care Homes

Last year, we visited 11 elderly and nursing care homes and made recommendations on how they could improve the lives and wellbeing of residents. This year, we followed up with these care homes and used our observations and our conversations with residents, families, and staff to take a deep dive into the quality of care.

We identified the following themes:

- Care home residents in Greenwich cannot always access dental care easily. We have worked with commissioners and providers to improve dental outcomes for care home residents.
- Access to a range of tailored and interesting activities is vital for the wellbeing of
 residents in care homes. Activity coordinators play a key role in supporting care
 home residents to engage and interact with these activities. However, not all activity
 coordinators have training available to maximise resident's engagement.
- Family members play a crucial role in the care of their loved ones, offering ongoing emotional support and advocating for their needs. Care homes must develop ways to communicate with families in a more regular, accessible and inclusive way, ensuring that they are kept up-to-date on the wellbeing of their loved ones.
- Engagement with the wider community promotes emotional and mental well-being and creates a more inclusive space for residents. By providing resources and connections with the wider community such as local schools and groups, providers can support this engagement.
- Ethnic minority residents are under-represented in Greenwich care homes. This may be because some ethnic minority communities have younger age profiles. However, it may also highlight barriers to accessing care and the lack of cultural inclusivity in care homes. We have called on commissioners to look into the reasons behind this underrepresentation.





Learning disabilities care homes, supported living and respite facilities

This year, we made 5 Enter and view visits to learning disability care homes, supported living, and respite facilities. We spoke to residents, families and staff and used observations to understand what it's like for those living there.

Families told us:

- Forming relationships and trust with residents is vital for staff to meet their needs and ensure their wellbeing. Families shared their concerns over staff turnover and the impact this had on their loved one's care. Changes in key workers created uncertainty and anxiety for both residents and families.
- It is important for care homes to be transparent and communicate clearly with families about the care of their loved ones. This includes providing detailed information on daily activities, key staff assigned to their care, and information on staff capacity. This is especially important for families of residents with additional needs who may have difficulty expressing their needs and satisfaction with care. By sharing this information, care homes can provide greater assurance for families.

Staff told us:

 Residents have different personal budgets which affect the kinds of activities they can afford to engage in to maintain their wellbeing and enhance their social skills. However, we found that not all care homes provide alternative, low-cost activities for residents with limited budgets to enjoy.

For more information on our insights into these care homes, select the links below or search 'Enter and View Report' on our website.

Location	Link
Lodge Hill 167	Enter and View Report: 167 Lodge Hill Healthwatch Greenwich
Lodge Hill 169	Enter and View Report: 169 Lodge Hill Healthwatch Greenwich
Kemsing Road	Enter and View Report: Kemsing Road Respite Service Healthwatch Greenwich
58 the Village	Enter and View Report: 58 the Village Healthwatch Greenwich
101 Royal Hill	Enter and View Report: 101 Royal Hill Healthwatch Greenwich



Volunteering

We are supported by a team of incredible volunteers whose enthusiasm, perspectives and innovative ideas contribute significantly to our mission and help us grow and adapt in an ever-changing environment.

Our volunteers told us:

- · They enjoy being part of a team of like-minded people with a shared purpose and making a tangible difference for the community is fulfilling.
- · They value the experience they gain in community development activities, research and analysis, communication skills, and advocacy.
- Volunteering in the community helps to hone their interpersonal skills and has broadened their understanding of the NHS and social care system.
- They're more confident in their job search after volunteering with us.



Sekinat Taiwo

I joined Healthwatch Greenwich last year wanting to lend my voice to the community.

I took a few courses as part of my induction process at Healthwatch Greenwich, and these have helped me in my career. Volunteering at Healthwatch Greenwich has improved my confidence in the working space and has reshaped my knowledge about the healthcare system in the UK. The team also does well by sharing opportunities with me and checking on my career progress. I have worked on some projects which have developed my research and communication skills, such as:

- Supporting patients access new doctors after the closure of Clover Health Practice.
- · Conducting surveys with people to understand their experiences of dental services in Greenwich.
- Representing Healthwatch Greenwich at International Women's Day and speaking to residents about our work.
- Helping conduct snap surveys to understand resident's experiences of health and care services.



Sekinat wanted to lend her voice to the community



Samson S. Sadeko

Growing up as a kid, I cannot quite remember what I dreamt of becoming—a pilot, a medical doctor, or an engineer. But one thing I was sure about, even then, was making impact in my immediate environment.

Coming to the UK in 2022, one thing that was part of my plan was to join a volunteering organisation in my community. I wanted to actively participate in programmes aimed at helping and supporting people. One thing I appreciate about HWG is their dedication to not only the people we support but the upskilling of volunteers like me. They actively enrolled us in various online trainings, demonstrating their commitment to improving health and social welfare in the borough. A huge thank you to the team for this fantastic work!



Samson shares his journey of discovering his passion and making a difference to his community through volunteering



Mia Mikala Ofori

Joining Healthwatch Greenwich as a volunteer has been a new and enjoyable experience. The reason why I decided to volunteer was to help support my local community and better understand the issues that our communities face.

I have learnt different skills at Healthwatch Greenwich, including how to approach people confidently and conduct surveys with them to understand their experiences. As an Outreach volunteer, I have worked with parents to understand their experiences of the NHS and have worked with women to understand their experiences of screening. I have also taken part in notetaking for a workshop which has helped improve my listening skills. Being part of such a supportive and friendly team has helped immensely with my confidence and has improved my teamwork skills. I look forward to working with the team on new projects and to continue to grow my experience.



Mia is studying Human Resource Management in Greenwich and is working with us as an outreach volunteer.



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



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Message from our CEO

We are proud to present this year's Annual Report for Healthwatch Greenwich, celebrating the outstanding achievements and dedication of our staff, volunteers, and Board Members.

Over the past year, we have been relentless in our efforts to ensure that the voices of Greenwich residents are not only heard but also prioritised in the design and delivery of local health and care services. Our mission is driven by the belief that every individual deserves exceptional care, regardless of their background or circumstances. By engaging directly with residents, gathering their feedback, and working closely with health and social care commissioners and providers, we contribute to a more inclusive and responsive health and care system.

This year, our outreach has included multiple communities, emphasising the importance of inclusivity in our work. Our participatory methods have empowered local people to capture and share their experiences, leading to community-driven solutions that enhance the quality of care. By embedding ourselves within these communities, we have fostered trust and collaboration, enabling us to gather authentic insights and drive meaningful change. By prioritising the experiences of those living in the most disadvantaged areas and focusing on those with protected characteristics, we have championed the voices of those who often have the poorest health outcomes.

Our collaborative efforts have not only amplified resident voices but also fostered meaningful changes in the health and care landscape in Greenwich. By working in partnership with local people, providers, and commissioners, we have made a significant contribution in improving the accessibility and quality of services for all. We remain committed to our mission of ensuring that every resident can access the health and social care services they need easily and receive exceptional care. Our journey continues, guided by the feedback and experiences of the people we serve.



"This report reflects our commitment to advocating for equitable and accessible services, emphasising the importance of listening to those who often go unheard."

Joy Beishon, Chief Executive at Healthwatch Greenwich





Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Our income and expenditure

Income		Expenditure	
Annual contract from RBG	£145,000	Expenditure on pay	£268,245
Additional income*	£267,725	Non-pay expenditure	£33,352
		Office and management fees	£33,397
Total income	£412,725	Total expenditure	£334,944

^{*}Additional income sources: Care quality Commission, Healthwatch England, Oxleas NHS Foundation Trust, RBG Public Health, Lewisham and Greenwich NHS Trust, Greenwich Health, and South East London ICS

Next steps

Over the next year, we will keep reaching out to every part of our community so that those in power hear their views and experiences.

Out top three priorities for the next year are:



Children and Young People

Children and young people face significant health disparities related to accessing health and social care services, that can have lasting consequences. Children and young people often get limited support while waiting to access care and treatment. We will work with residents, communities, commissioners, and providers to increase equity in access and close the gap in health outcomes. We want to ensure that every child and young person in Greenwich can lead a healthy life.



Primary Care

GPs are the first point of contact for most people when they develop symptoms of ill health. Despite campaigns to redirect people as appropriate to other services, such as community pharmacies, GP teams continue to play a vital frontline role. However, GPs are struggling to meet the demand for more complex care, creating barriers for residents. We will continue to collaborate with residents, communities, and primary care to understand challenges and work together on solutions.



Queen Elizabeth Hospital

Queen Elizabeth Hospital (QEH) is a key institution our community, delivering comprehensive medical services to residents. We will work with QEH to gather insight on patient experiences and satisfaction. We will carry out Enter and View visits across wards and departments to get a comprehensive view of patient experience. We will investigate what works well and where services can improve from the perspective of patients and their families. We will support quality improvements, promote transparency, and help the Trust in its mission to deliver exceptional health services to the community.



Statutory Statements

Healthwatch Greenwich, 9-11 Gunnery Terrace, Woolwich Arsenal, **London SE18 6SW**

Healthwatch Greenwich uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Board consists of 8 members who work on a voluntary basis to provide direction, oversight and scrutiny of our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2023/24, the Board met five times. You can see the minutes from these meetings on our website, in the page titled 'Our Board', or visit https://healthwatchgreenwich.co.uk/our-board to see more.

Methods and systems used across the year to obtain people's experiences

We want to hear from everyone about their experiences with health and social care services. That's why we offer many ways to get in touch:

- Our popular Enter and View program lets us visit services to see residents care firsthand.
- We work directly with people to design research projects, using co-production and peer research.
- You can reach us by phone, email, web form, social media, and at community meetings.
- We make sure everyone can access our findings. All reports are published on our website, and we share key points on social media and through email marketing.





The way we work

Taking people's experiences to decision-makers

We ensure that decision-makers hear about the experiences of residents and the information they share with us. We also share our data with Healthwatch England to help address health and care issues at a national level

We share our findings and feedback at various meetings, committees, boards and steering groups to ensure residents' voices and the information they provide reach decision-makers.



These meetings include:

- Healthier Greenwich Partnership (SEL ICS)
- Greenwich Joint Commissioning Board (SEL ICS)
- Health Inclusion Steering Group (SEL ICS)
- Safeguarding Adults Board (Royal Borough of Greenwich)
- Carers Partnership Board (Royal Borough of Greenwich)
- Health Inequalities Steering Group (Lewisham and Greenwich NHS Trust)
- Patient Experience Committee Meeting (Lewisham and Greenwich NHS Trust)
- Greenwich Home First Operational Project Group (Oxleas NHS Foundation Trust)
- Quality Update (Oxleas NHS Foundation Trust)
- · Health and Wellbeing Board
- Dementia Action Group
- Local medical council.
- RBG Health and Wellbeing Board
- · Community champions steering group.
- Health and Adult Social Care Scrutiny Panel.



Healthwatch representatives

Joy Beishon, CEO, represents Healthwatch Greenwich on both the Royal Borough of Greenwich Health and Wellbeing Board, and at the Healthier Greenwich Partnership (our integrated care partnership in Greenwich).

During 2023-24 our representative carried out various roles, ensuring that the voices and experiences of Greenwich residents are heard and considered during board discussions and decision-making processes.



These include:

- · Contributing to the development of strategies, policies and plans that aim to improve health and wellbeing outcomes for Greenwich residents.
- Holding commissioners and providers accountable by monitoring the implementation of decisions made, scrutinising the delivery of services, and advocating for improvements based on residents' experiences and feedback.
- Collaborating with other stakeholders on the Health and Wellbeing Board, including public health, acute trusts, social care providers and community organisations.

Healthwatch Greenwich is represented in the South East London Integrated Care System by Folake Segun, director. This includes representing our organisation on a wide variety of boards and committees:

- Integrated Care Board (ICB) planning and finance committee
- ICB quality and performance committee
- Interim digital governance group
- ICS system quality group
- ICB engagement assurance committee
- ICS population health and equity partnership advisory group
- ICB equalities committee
- SEL local care record governance board
- ICS information governance group

Folake Segun and Graham Head, Vice Chair Healthwatch Southwark, represent the Healthwatch in south east London on the CS Data Usage Committee.

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