



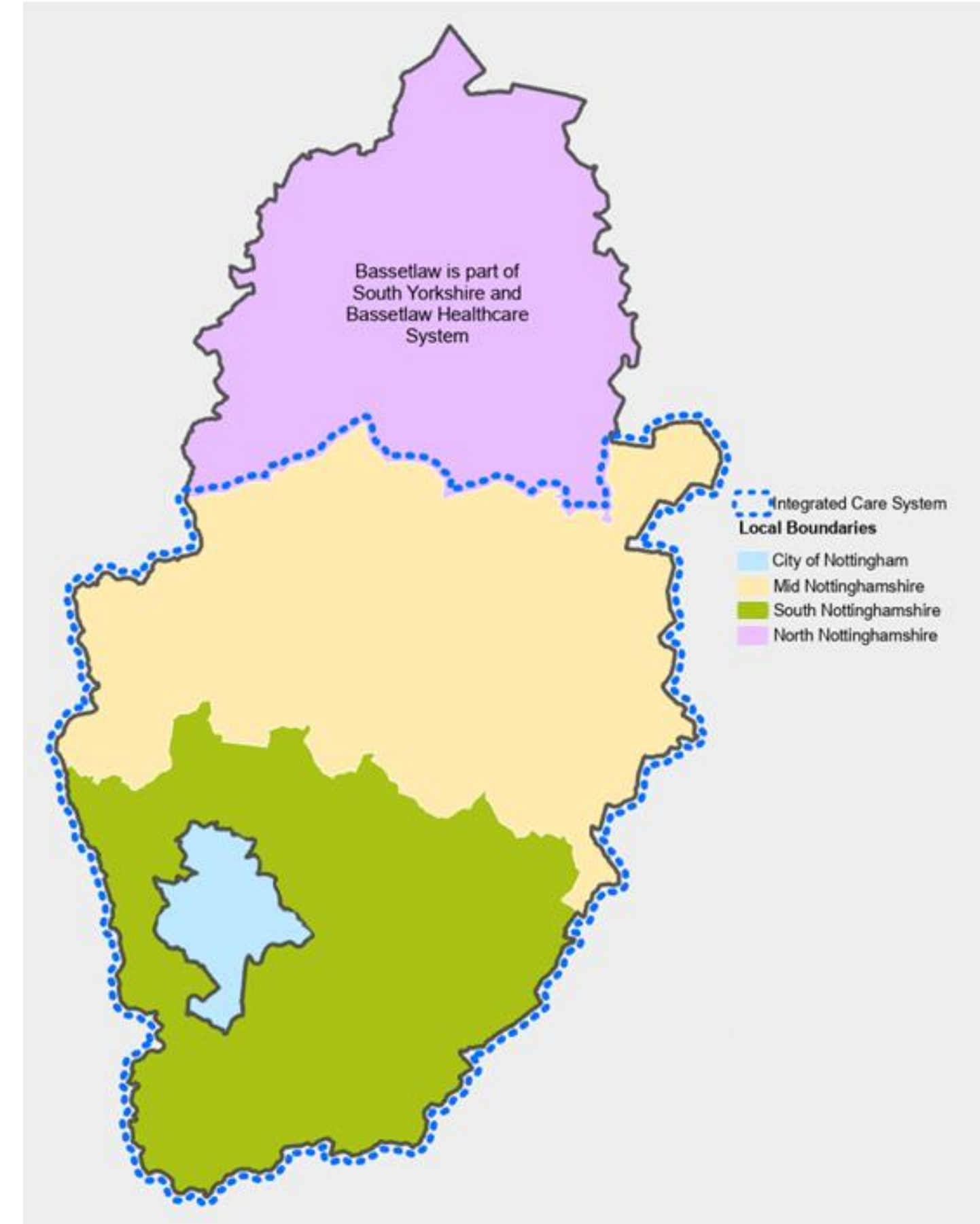
**Your Voice in
Health and
Care.**

Our purpose

- Established by Health and Social Care Act 2012.
- Independent patient and public champion.
- Part of the health and care quality assurance system.
- We listen to the seldom heard, and use data to highlight areas of concern
- We hold those with the power to make change happen to account for working openly and serving the needs of their communities.

What we cover and where

- All health and social care services that are publicly funded.
- Diverse population of over 1½ million across Nottingham City and Nottinghamshire.
- Focus on seldom heard groups and health inequalities.



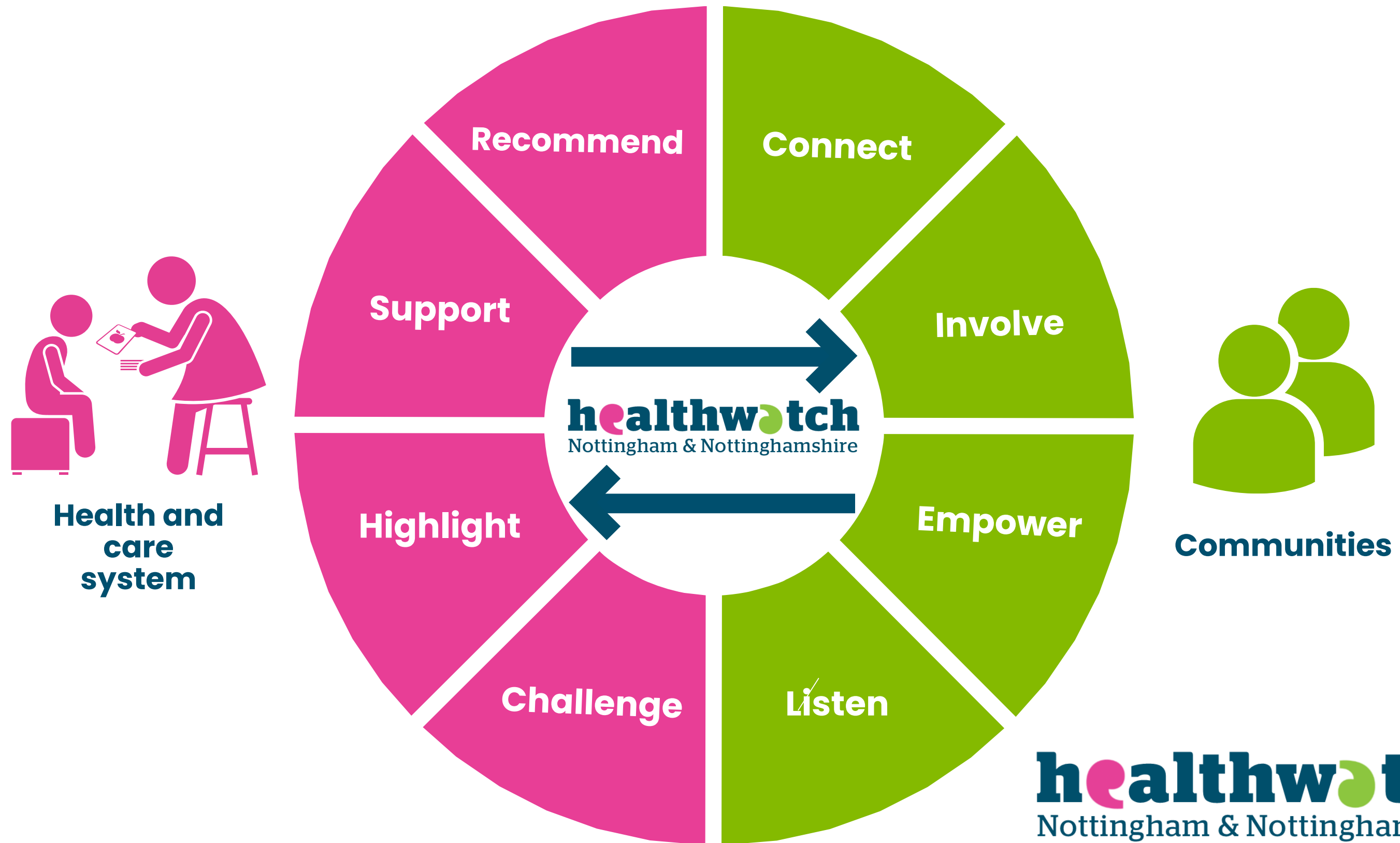
Our remit

- Obtain views of patients, service users and the public.
- Influence the planning and delivery of health and social care services that work for people.
- Provide feedback and information to help people navigate the health and care system.
- Hold commissioners and service providers to account.



**What do
we do?**

How we make a difference

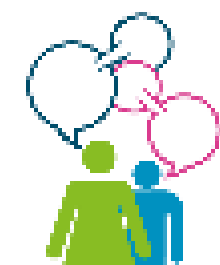
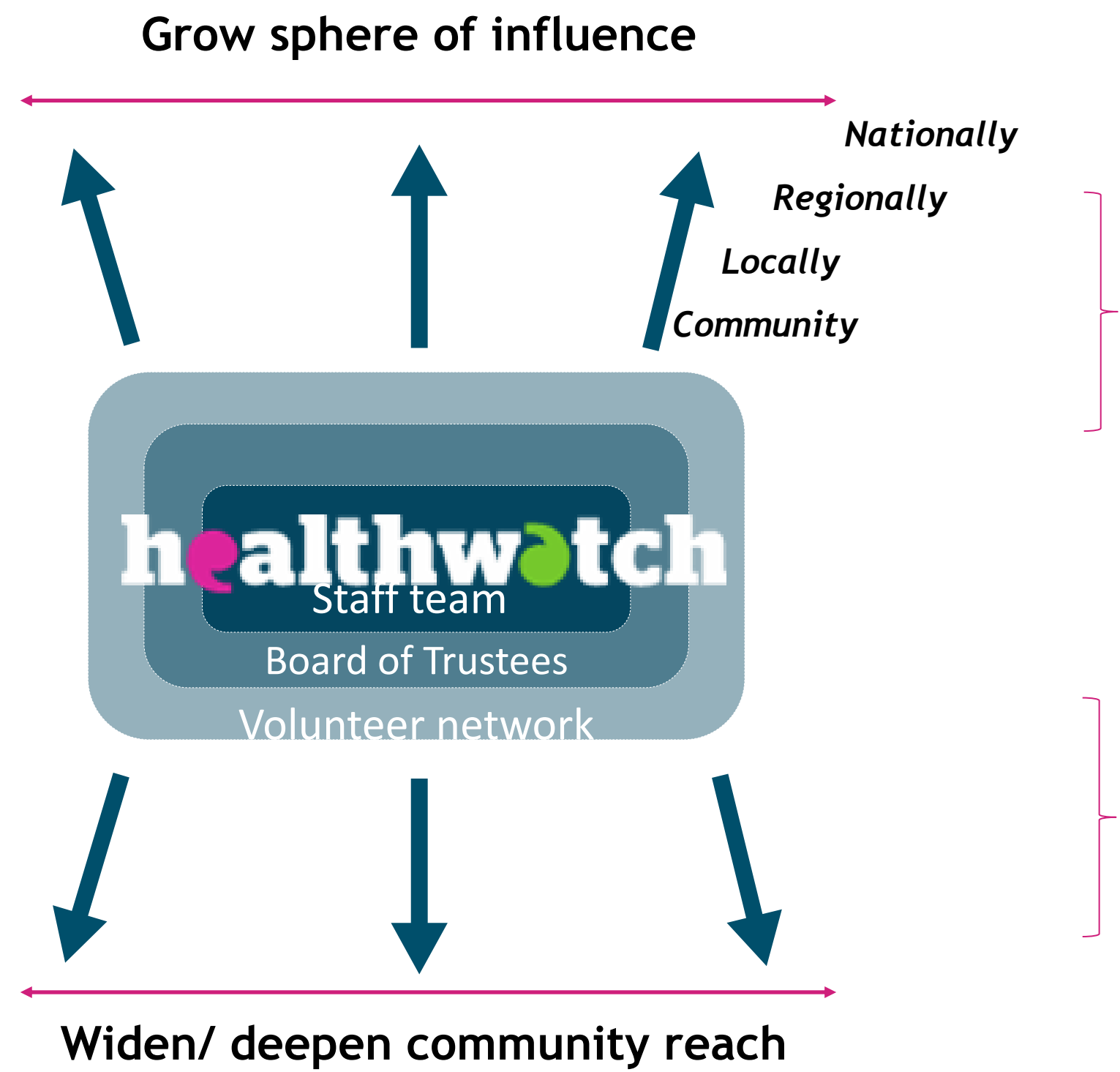


Our key aims are:

1. Making the views and experiences of members of the general public known to health and social care providers;
2. Enabling local people to have a voice in the development, delivery and equality of access to local health and social care services and facilities;
3. The promotion of high standards by health and social care providers
4. Providing training and the development of skills for volunteers and the wider community in understanding, scrutinizing, reviewing and monitoring local health and care services and facilities
5. Hold commissioners and service providers to account

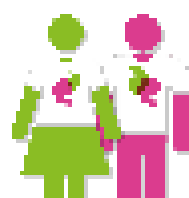


Making an impact by growing our influence and reaching communities



Channels of influence

- Health and Wellbeing Boards
- Health Scrutiny Committees
- Safeguarding Boards
- Integrated Care Partnerships
- Clinical Commissioning Group
- NHS Trusts
- Adult Social Care
- Public Health



Community mission

We reach out to listen to communities and raise their concerns to those who can make decisions. We prioritise those who face health inequalities, the vulnerable, the disengaged and seldom heard.

What is 'Enter and View'?

Legislation

Health and Social Care Act 2012: Part 5, Public Involvement and Local Government and established through legislation under Part 6, Section 4 of the NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulation 2013.

'Enter and View' is the opportunity for authorised representatives:

- To go into health and social care premises to hear and see how the consumer experiences the service
- To collect the views of service users (patients and residents) at the point of service delivery
- To collect the views of carers and relatives of service users
- To observe the nature and quality of services - *observation involving all the senses*
- To collate evidence-based feedback
- To report to providers, CQC, Local Authority and NHS commissioners and quality assurers, Healthwatch England and any other relevant partners
- To develop insights and recommendations across multiple visits to inform strategic decision making at local and national levels.



Key benefits of 'Enter and View'

To encourage, support, recommend and influence service improvement - by:

- Capturing and reflecting the views of service users who often go unheard, e.g. care home residents
- Offering service users an independent, trusted party (lay person) with whom they feel comfortable sharing experiences
- Engaging carers and relatives
- Identifying and sharing 'best practice', e.g. activities that work well
- Keeping 'quality of life' matters firmly on the agenda
- Encouraging providers to engage with local Healthwatch as a 'critical friend', outside of formal inspection
- Gathering evidence at the point of service delivery, to add to a wider understanding of how services are delivered to local people
- Supporting the local Healthwatch remit to help ensure that the views and feedback from service users and carers play an integral part in local commissioning
- Spreading-the-word about local Healthwatch.



What a difference a year makes



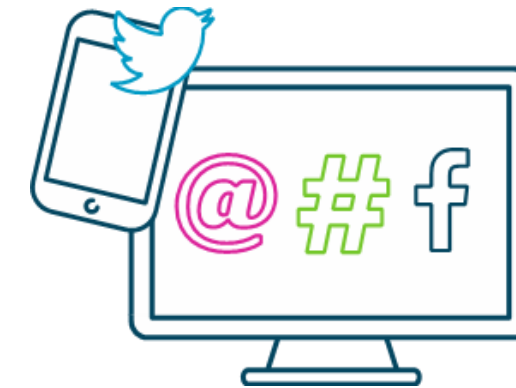
343 people shared their health and social care story with us.



We had 49 active volunteers who helped to carry out our work. In total, they gave 1133 hours.



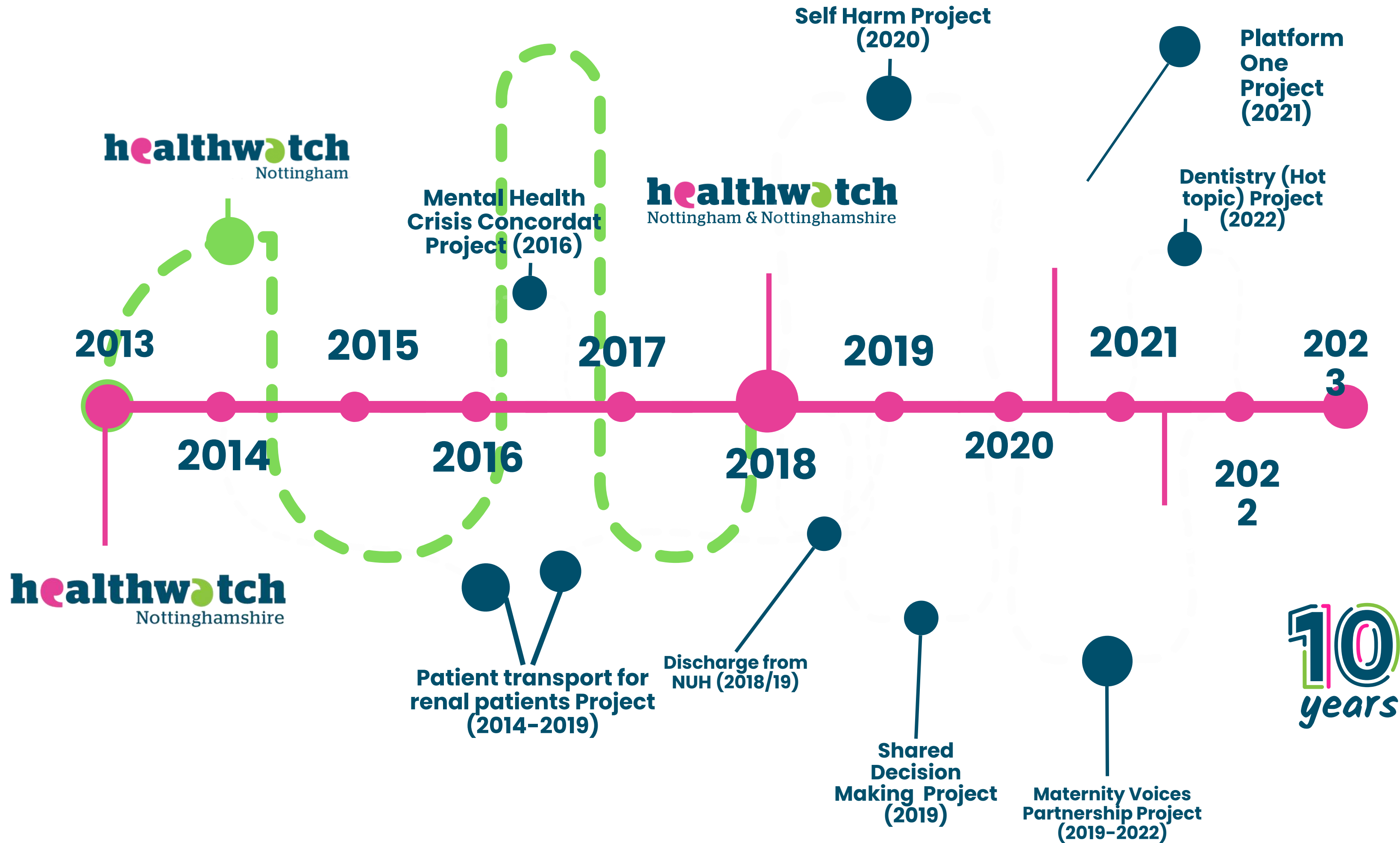
We visited 106 locations to understand people's experiences of care. From these visits, we made 48 recommendations for improvement.



We reached 59,842 people through our social media channels



3566 people accessed Healthwatch advice and information online or contacted us with questions about local support.



10
years

Benefits of Connecting

Healthwatch Nottingham and
Nottinghamshire & NHS Trust Public
Governors

Integrated Listening

With the implementation of the ICS, there is a renewed need to listen to people and communities in a holistic way – listening together; listening to the whole of peoples' experience and feeding back in an integrated way.

Connecting with each other and our communities

Greater communication, collaboration and cooperation between Public Governors and HWNN to support 'integrated listening' will support the ICS to deliver on its aims, and includes:

- Listening together/collaboratively
- Listening to people's whole experience, not just one part of it
- Integrated feedback.

Proposal

We propose that Councils of Governors (through their Lead Governors) and Healthwatch explore how best to enhance our communication and relationship to:

- Enable us to fulfil our individual statutory roles more effectively
- Share and combine insights
- Feedback our combined insights through our feedback channels
- Share resources to achieve our statutory requirements
- Contribute to the health improvement aims of the local ICS.



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