Annual Report
2014/15
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I am hugely pleased & proud of how we have developed during this crucial year. The small staff team, ably led by Mark Rasburn, has done some great work & achieved well. I would like to that our Board & our growing team of volunteers who similarly contribute & achieve so much.

We have ensured our resident’s views have been listened to at a local, regional, and national level. This includes being invited to submit oral evidence to the House of Lords.

We have successfully designed and completed innovative engagement projects. Some of these have been used as an examples of good practice in national case studies.

We met all agreed targets last year, and in many cases surpassing by over achieved in some (e.g. more than double the amount of members).

All of our board meetings are held in public, which attracted over 100 residents and services to attend to ask questions to the Board and feedback their ideas.

We have offered leadership to other Healthwatch across the region & beyond. Healthwatch Blackburn with Darwen facilitates and organises the North West Healthwatch network between Chief Officers and Chairs, with myself Chairing each meeting.

We have worked alongside Blackburn College, BwD Clinical Commissioning Group, Health and Wellbeing Board, National Institute of Clinical Excellence, Care Quality Commission, & East Lancashire Hospital Trusts on behalf of citizens, patients & their family & friends.

So, in summary, a great start with a great set of teams, but much to do, everyone’s positive, constructive support & encouragement is much appreciated!

Sir Bill Taylor,
Chair
Healthwatch BwD C.I.C
Note from the Chief Executive

Our first year trading as an independent organisation has been extremely exciting, yet challenging. It has seen us grow and learn new skills, and engaged with sections of the community we had never really reached before. More importantly, it has seen us input local resident’s views at a local, regional, and national level; including the House of Lords.

The last twelve months have been an extremely challenging and exciting time for the organisation.

On the 1st April 2014 we separated from the previous host of Healthwatch BwD, The Carers Federation, and became an independent community interest company.

This was a new challenge for both the staff and myself. We went from having the support and guidance from a large charity to suddenly becoming completely self-sufficient.

We have been extremely fortunate to have a highly motivated and skilled Board. Their knowledge and experience enabled us to set-up the organisation and ensure its stability and ability to meet contractual obligations.

In the first few months the organisation went through a large restructure, ensuring we were able to deliver the statutory functions of a local Healthwatch and run as an independent company. We developed new staff roles for those who had transferred across, developed new Board roles, and developed a higher quality volunteering program.

I am proud to say that we have over-achieved the targets we set out for 2014/15, more than doubling the amount of company members we aimed to recruit.

We were invited to the House of Lords to present oral evidence to an All Party Parliamentary inquest. We have also been used as a case study of positive public involvement in a national Kings Fund review, as well as being used as one of only 15 local Healthwatch as an example of innovative engagement techniques.

This could not have been achieved without our motivated Board, Staff and Volunteers. I would like to take this opportunity to thank all of them for their hard work, dedication, and positive attitude to help us over-achieve our targets. I look forward to building upon this momentum, and continuing to improve the organisation into 2015/16.

Mark Rasburn
Chief Executive
Healthwatch Blackburn with Darwen
About Healthwatch Blackburn with Darwen

We are here to make health and social care better for local residents. We believe that the best way to do this is by designing local services around their needs and experiences.

Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience. We are the only body looking solely at people’s experience across all health and social care.

We are uniquely placed as a network, with a local Healthwatch in every local authority area in England.

As a statutory watchdog our role is to ensure that local health and social care services, and the local decision makers, put the experiences of people at the heart of their care.

Our vision

Our vision is to become a market leader within the local Healthwatch network. Our aim is to become one of the most effective local Healthwatch in the Country through developing unique initiatives and driving local improvements. We have started well, and will ensure we do not lose momentum. We will continue to progress and ensure we deliver the best service for our local residents.

We will continue to work closely with our partners in Blackburn with Darwen and the North West, having installed a culture within the organisation of collaborative working. This approach has been effective so far, so we will be continuing to improve how we work with local and national organisations.

Our strategic priorities

• Promoting and supporting the involvement of local people in the commissioning, provision and scrutiny of local care services.

• Enabling local people to monitor the standard of provision of local care services and whether and how local care services could and ought to be improved.

• Obtaining the views of local people regarding their needs for, and experiences of, local care services and importantly to make these views known.

• Making reports and recommendations about how local care services could or ought to be improved. These should be directed to commissioners and providers of care services, and people responsible...
for managing or scrutinising local care services and shared with Healthwatch England.

• Providing advice and information about access to local care services so choices can be made about local care services.

• Formulating views on the standard of provision and whether and how the local care services could and ought to be improved; and sharing these views with Healthwatch England.

• Making recommendations to Healthwatch England to advise the Care Quality Commission to conduct special reviews or investigations (or, where the circumstances justify doing so, making such recommendations direct to the CQC); and to make recommendations to Healthwatch England to publish reports about particular issues.

• Providing Healthwatch England with the intelligence and insight it needs to enable it to perform effectively.

Healthwatch Membership
Everyone in the Borough, along with third sector organisations, is able to become a company member for Healthwatch BwD.

Members have a say on work priorities, and are able to vote at public meetings.

Number of Company members: 461

Female: 51%  Male: 34%

59% White British

35% Asian or Asian British

5% Other

Age:

- 16-24: 12%
- 25-34: 17%
- 35-44: 14%
- 45-55: 22%
- 55-64: 14%
- 65+: 15%

Residents requested regular updates: 1369

*Some company members did not provide full demographic information

(from left to right)

Ben Pearson - Project Coordinator
Claire Moran - Signpost and Information Officer
Lorraine Rile - Administrator
Sandra Leftly - Community Participant and Engagement Officer
Mark Rasburn - Chief Executive
Engaging with people who use health and social care services

Understanding people’s experiences

There are many methods used to obtain local people’s needs and experiences of health and social care services. All information gathered is added to our database, enabling us to spot trends and priorities to act upon.

We have utilised social media to engage with residents and services through Facebook and Twitter, attended community events, spoken to community groups, produced a radio advert which was played at all leisure centres hourly, spoken numerous times on Radio Lancashire, and received press coverage in the Lancashire Telegraph. We have run three ‘reverse graffiti’ campaigns, held several art sessions and with an art exhibition, had weekly drop-in meetings, given away promotional materials, and run monthly quiz competitions.

Our two most effective methods have been through our #personfirst project and our community Access Points.

#personfirst

The name ‘#personfirst’ was created by residents with non-physical disabilities. The #personfirst name has since been adapted to include all of our targeted engagement work, designed to obtain the views of the seldom heard, disadvantaged, and vulnerable residents. Below are the targeted engagement projects completed in 2014/15, with a detailed review of the projects on pages 18-24.

- Lesbian, Gay, Bisexual, and Transgender residents
- 50+ residents
- Young residents
- Asylum seekers and refugee groups
- Non-physical disabled residents
- Working residents
- Deprived neighbourhoods

Community Access Points

To complement our signposting service, we developed Community Access Points across Blackburn with Darwen, offering the service directly to those who may have not heard of Healthwatch. More information can be found on page 12.
As well as with designing a new volunteering program and training package we designed and ran a new Enter and View training package. This was open for all volunteers interested in joining our Enter and View team to attend.

Enter and Views are a method for Healthwatch to gather patient experience in real time, enabling us to speak with patients during their care pathway.

All Enter and Views are designed to meet the specific needs of each visit. Visits are conducted by either being part of a targeted piece of work or by following intelligence received from local residents.

Case Study: Hospital A&E Visit

In March and April 2015 Healthwatch completed Enter and Views at East Lancashire Hospital Trust following concerns highlighted by the Lancashire Telegraph regarding the A&E service at Royal Blackburn Hospital.

Staff and volunteers visited the Royal Blackburn Hospital at various times of the day to speak to patients, carers, and relatives using the service. The aim of the Enter and View was to understand if people knew about other services they could have accessed, what their experience was like at the Hospital, and improvements they would like to see. We also spoke to staff members, and made observations of the waiting area facilities.

Results found that 48% of those at A&E did not try and contact a GP before arriving, with 17% attending because they could not get a GP appointment.

76% felt confident to ask staff questions on their care.

Healthwatch BwD will continue to speak to patients at the Royal Blackburn Hospital to build up a detailed picture of patient experience at the Trust.

“The ambulance staff were amazing; they always are!”

13 year old A&E Patient
Providing information and signposting for people who use health and social care services

Healthwatch Blackburn with Darwen offers a signpost and Information service throughout the borough at our regular Access Points. This enables residents to have easy access to information on local health and social care services.

Through these Access Points we also encourage discussions about local services, promote Healthwatch BwD, and listen to people’s views and experiences.

Our Access Points are set up to enable residents who may not know about Healthwatch BwD, or other local services, the opportunity to be engaged.

We have engaged with 1028 residents at our Access Points

An up-to-date database of local services is taken to all Access Points to provide instant information, but for complex cases a member of staff will conduct further research and contact the resident (s) within 3 working days.

“\[The Credit Union always listens to its Members, so it’s great that Healthwatch BwD comes in regularly and values the input of our Members & volunteers by listening to their concerns & experiences. We are working together to improve the potential futures for the local community.\]”

Cameron Ashton, Jubilee Tower Credit Union

115 residents were signposted to local services
We currently have twelve regular Access Points across the borough. The Access Points are situated in various settings around the borough, maximizing the opportunity to engage with local residents from all the different areas.

Our aim is for the Access Points to be accessible to all, particularly those hard to reach and people who do not tend to engage with other services. Each Access Point has a different footfall, from young families to the elderly. This ensures we are targeting a wide variety of local residents.

Top 4 signposted services

<table>
<thead>
<tr>
<th>Service</th>
<th>Signposted</th>
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<tbody>
<tr>
<td>Independent Complaints Advocacy</td>
<td>17</td>
</tr>
<tr>
<td>BwD wellbeing service</td>
<td>11</td>
</tr>
<tr>
<td>BwD Community &amp; Voluntary Service</td>
<td>10</td>
</tr>
<tr>
<td>Local Dentist</td>
<td>6</td>
</tr>
</tbody>
</table>

We link in with other services for signposting, currently sharing an Access Point at Darwen Town Hall with Your Support Your Choice. We also attend regular partner meetings with other partner services to ensure a collaboration approach.

**Weekly and fortnightly Access Points**

<table>
<thead>
<tr>
<th>Blackburn</th>
<th>Darwen</th>
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<tbody>
<tr>
<td>Job Centre Plus</td>
<td>Darwen Library</td>
</tr>
<tr>
<td>Barbara Castle Way Health Centre</td>
<td>Darwen Health Centre</td>
</tr>
<tr>
<td>Royal Blackburn Hospital</td>
<td>Darwen Leisure Centre</td>
</tr>
<tr>
<td>Blackburn Market</td>
<td>Darwen Credit Union</td>
</tr>
<tr>
<td>Asda</td>
<td>Darwen Town Hall</td>
</tr>
<tr>
<td>Your Support Your Choice</td>
<td>Central United Reform Church</td>
</tr>
<tr>
<td>Wesley Hall</td>
<td></td>
</tr>
</tbody>
</table>

*Our signpost officer supporting Macmillan outside Darwen Town Hall*

**Workplace Engagement**

Through our workplace engagement we were able to provide a signpost service to staff during work hours. We would like to thank BT and Graham & Brown for inviting us to provide support and information for their staff. More information can be found on page 24.
Influencing decision makers with evidence from local people

Producing reports and recommendations to effect change

Over the past year Healthwatch BwD has produced a number of reports with the views and experiences of local residents.

Examples of how these reports have effected change are below:

**Mental Health**

Our report looking into the experience of residents being discharged from Mental Health Services was widely circulated to mental health providers and their staff. The finding of the report have been implemented in the Mental Health Crisis Concordat, and will help improve services on a local and regional level.

This report has also been used to guide a planned Care Quality Commission inspection of Lancashire Care Foundation Trust, a leading provider in Mental Health services in the Borough.

**LGBT**

Our Lesbian, Gay, Bisexual and Transgender (LGBT) report has been well received, and used by the Lancashire Clinical Support Unit to train front line GP staff in equality and diversity. The report has also started the process for all LCFT sexual health services to sign up to a charter mark to improve services.

On a regional level, the report has been presented to NHS England’s Patient, Carer and Public advisory Group, with the findings being used as examples of best practice for providers.

The report, which was produced in partnership with Lancashire LGBT, has helped the organisation set up and run regular support and social groups in the Borough; something they had struggled to set up previously. More information can be found on page 21.

**Young Residents**

Our report into youth experience has been taken up on a national level, with Healthwatch BwD one of three local Healthwatch directly invited by the All Party Parliamentary Group to present oral evidence to the sexual health inquiry. This ensured we were able to present the views of local residents at a national level at the House of Lords. More information can be found on page 20.

Our Chief Executive, with Healthwatch Manchester, after speaking at the House of Lords
All reports are sent to the senior representatives of providers and commissioners, including the leader of BwD Council, Director of Public Health, Chair of the Overview and Scrutiny Committee, and the Chair of the BwD Clinical Commissioning Group. The reports are always shared with our local CQC team, and submitted to Healthwatch England.

All of our reports and findings are made public on our website, and promoted within the voluntary and community sector.

To ensure patients’ voices are heard at a decision making level, Healthwatch BwD is a member of a number of partnership Groups and Boards within Blackburn with Darwen, Lancashire, and England.

At these meetings a member of staff will attend with all the relevant information residents have shared with us, and ensure these voices are heard and used to influence strategies and commissioning.

The Chair of Healthwatch BwD sits on the Health and Wellbeing Board. Papers are shared with the Chief Executive to ensure the Chair is able to inform the Board of what local residents have told us directly. It also ensures Healthwatch is able to highlight residents’ concerns, and support engagement and consultations to ensure residents have a strong voice in decision making. For example, Healthwatch BwD was involved in the consultation and engagement of the Board’s Pharmaceutical Needs Assessment.

**Member:**

- 50+ Partnership
- Advice For All
- Asylum and Multi-Agency Forum
- Better Together
- British Institute of Human Rights
- Dementia Action Alliance
- East Lancashire Hospital Trust’s Patient Experience Group
- Facing-up Steering Group
- Health and Wellbeing Board
- Healthy Ageing
- Integrated Strategic Needs Assessment
- Mental Health Crisis Concordat
- Pharmaceutical Needs Assessment
- Professional Network Meeting
- Safeguarding Board & Communication Committee

**Attendance as a non-member**

- Overview and Scrutiny Committee
- Lived Experience Network
- Healthier Lancashire

**Footprint of influence**

- Blackburn with Darwen
- Lancashire
- England
Putting local people at the heart of improving services

Volunteers play a vital role within the organisation. We have developed a number of volunteering opportunities within the organisation to ensure local people are able to be involved in the work that we do.

Our volunteer opportunities comprise of:

**Board Director:** Focusing on strategic planning, developing working protocols and policies, and managing the strategic direction of Healthwatch BwD.

**Enter & View Team:** Visiting health and social care services to observe the service and speak with staff and patients/residents to find out about their experience.

**Task Group Member:** Have a say in the operational work, suggest Enter and View visits, ask questions to service providers, and develop research and targeted pieces of work.

**Representing Healthwatch within the Community:** Speak to residents, community groups, service providers, and inform them about Healthwatch BwD.

**Help with office jobs:** Help with mailing out our newsletter, copying documents, organising files, or contacting services.

**Reading Group:** ensuring there are no factual errors, or spelling and grammatical errors within draft reports.

**Art Attack:** residents draw their experiences of local services

**North West Ambulance Service presenting to our members at our open Board meeting**

**Local Primary School Pupils at one of our community engagement events**
Working with others to improve local services

Healthwatch BwD works closely with the local community and voluntary sector. All engagement projects have been completed in partnership with third sector organisations. Our report on ‘falls in older people’ was produced with the 50+ partnership, our LGBT report was produced with Lancashire LGBT, our mental health discharge report with Lancashire mind, and our youth engagement with Blackburn College. Utilising the skills, knowledge, and network these organisations have has been an integral part for the success of these reports.

We receive the full inspection calendar from the Care Quality Committee in the region. All relevant public experience gathered is shared with the CQC, with inspectors contacting Healthwatch to help them shape their visit.

We have also participated in a focus group held by the CQC to help shape inspections of Lancashire Care Foundation Trust, ensuring the views we have gathered can be utilised during the inspections.

All requests made to commissioners and providers for information requests were responded to, including East Lancashire Hospital Trust, Lancashire Care Foundation Trust, NHS England, three local GP’s and one dental service.

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Healthwatch BwD in Numbers

<table>
<thead>
<tr>
<th>Website</th>
<th>3710 website visits</th>
<th>2607 unique visitors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Twitter</td>
<td>1308 Followers</td>
<td>1,181,800 retweet reach</td>
</tr>
<tr>
<td>Facebook</td>
<td>563 likes</td>
<td>10,764,719 post reach</td>
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Access Points

1028 residents engaged with
Targeted Engagement

Over the course of the year we have engaged with three distinct target groups in Blackburn with Darwen to gather their views and experiences of local Health & Social Care services. Using a variety of engagement methods allowed us to gather people’s views in ways best suited to the target group, whilst making Health & Social Care relevant & engaging for all.

#personfirst launched with an exhibition of artwork & engagement findings from our targeted engagement projects. In 2014/15 this involved Asylum Seekers & Refugees, those with Non-Physical Disabilities, and working residents in Blackburn with Darwen.

It is also the start of something new. A body of work which we will build upon over the following year with a number of different groups. All of which will ultimately be putting the person first in relation to their views & experiences regarding Health & Social Care.

#personfirst did not come about by a group of professionals sat around a table. Its ownership belongs to those who have attended our workshops over the previous months, those who have shared their experiences, and those who have created individual, imaginative and informative pieces of art.

What is next?

‘personfirst will continue to do just as it says over the following year. We look forward to this body of work growing and ultimately allowing the voice of Blackburn with Darwen residents to become louder in relation to their views & experiences regarding Health & Social Care.

We plan to make best use of social media, vlogging & other engagement methods to make #personfirst relevant, engaging & exciting for all particularly those currently disengaged, unaware or disinterested.
Case Study One

Small Area Engagement

The Small Area Engagement project targets neighbourhoods within the Borough with high levels of deprivation.

Blackburn with Darwen is the 17th most deprived Borough in England, with 8 neighbourhoods amongst the 1% most deprived nationally.

2011 Census

The project involves a door to door survey which asks residents their views on local health and social care services. Using the door-to-door technique ensures local residents who may not usually engage with local services get the opportunity to have their voice heard.

Following on from the survey, a community event is held in a local primary school to inform parents of local services available to them within their local community and the Borough. Games and competitions are provided to keep the children engaged.

Within 2014/15 Healthwatch BwD completed four small area engagement projects in each of the neighbourhoods in Blackburn with Darwen.

Over 500 local residents were engaged with, with 418 questionnaires completed and 98 people attending the events.

Schools involved were Griffin Park Primary School, Our Lady of Perpetual Succour Highercroft, and Avondale Primary School in Darwen. At these Events the following third sector organisations attended to provide information and support:

- Oral Health Team
- InDiGo
- Community Restart
- Re:Fresh
- Health Trainers
- Carers Service
- Your Support Your Choice.

Key points from the research found that in all areas over 90% of respondents who had used the 111 service thought it was good. In the South of the Borough 53% of people only attended the dentist when having trouble with teeth or had never been to the dentist.

The results from this engagement were given to the local services mentioned, to help them understand the concerns and feedback from local residents.
Case Study Two
Youth Engagement

Over the last two years Healthwatch BwD has worked in Partnership with Blackburn College to engage with young people in the Borough, successfully engaging with over 1500 young people in that time.

This year, 6 student volunteers were recruited to develop a research project to engage with other young people around Mental Health and Wellbeing, GP’s, and Sexual Health Services.

In total, 391 young people shared their views of local provision. The student volunteers engaged with young people in a College setting, in Blackburn Town Centre, and in other youth settings. Along with the young people, 30 college tutors took part in the research to tell us their experience with dealing with young people who come to them for support.

The research found that 45% of the young people engaged with were satisfied with the service provided by their GP. Some of those that were not satisfied informed us they were aware of their information being shared with third parties and their parents without their consent.

This has lead to issues around trust and confidentiality, and may result in young people not being open and honest with their GP for fear of personal information being shared.

71% of young people felt there was not enough information or support about Mental Health available should they need it.

77% of tutors informed us that they have had to deal with a student’s mental health, 97% of all tutors asked stated that mental health training would be helpful in the workplace to help support students that may come to them for help.

Through the findings from this project, Healthwatch was one of three to submit oral evidence at the House of Lords at the All Party Parliamentary Group on Sexual & Reproductive Health’s Accountability Inquiry into Standards in Sexual & Reproductive Health.

Written evidence was also submitted and accepted by the national Youth Select Committee Mental Health inquiry.

A signposting poster has been developed for the college by Healthwatch BwD with key contact numbers for students to find help.

Taking key issues forward, Healthwatch will develop a specific research project around young people’s attitude towards GP confidentiality.
There is an estimated population of 10,324 Lesbian Gay Bisexual and Transgender (LGBT) people in Blackburn with Darwen.

Previous research has stated that LGBT people tend to lead less healthy lifestyles and experience additional health inequalities including a higher risk of poor mental health, alcohol or drug misuse, eating disorders and attempted suicide than non-LGBT people.

We partnered up with Lancashire LBGT to develop a research project to fully understand the needs of our LGBT residents.

Although the sample for this research was small, there were some significant issues raised which correspond with research conducted nationally on the barriers which LGBT people experience when accessing health and social care.

The main finding is that not all LGBT people are ‘out’ about their sexual orientation or gender identity to health and social care professionals.

This is significant for the following reasons:

- A GP may know a patient throughout their lifetime but not be aware of the potential health inequalities that a person faces.
- People who are caring for LGBT people in their own home as well as those who provide support to LGBT carers will have a significant aspect of that person’s identity and life history hidden from them and thus not know the whole person and understand how to fully support them.

The findings from this research have been used by the Lancashire Clinical Support Unit to train staff in GP surgeries, and sexual health services looking to sign up to a ‘charter mark’ to make their services more LGBT friendly.

It has also enabled Lancashire LBGT to set-up and run a regular support network in the Borough for local LGBT residents.
Impact Stories

Case Study Four

Asylum Seekers and Refugees

As part of our targeted engagement with the Black, Minority and Ethnic community we developed a project to engage with Asylum Seekers & Refugees in the Borough.

Weekly drop-ins at both Wesley Hall & Darwen United Reformed Church allowed us to build up a trusting relationship with Asylum Seekers & Refugees, and allowed us to engage in an environment which they feel comfortable. This approach has also allowed us to work collaboratively with partner organisations.

Through the use of facilitated workshops and activities, we have created a trusting environment in which 60 Asylum Seekers & Refugees have shared their views and experiences whilst accessing our Information & Signposting function.

“Wesley Hall is a very accepting & inviting community of people. Healthwatch’s presence has really helped, and we have built up a really good relationship with those that attend. One lady is now much more confident accessing her GP after speaking with us, I look forward to attending every week for a coffee and a chat”

Healthwatch BwD Volunteer

Following on from this, we now have a weekly Healthwatch ‘Bite Size’ session at Darwen United Reform. This enables us to inform them of relevant services and information which may support their health and social care.

The results from the engagement has since been documented, and Healthwatch BwD have been in contact with providers to highlight the concerns and experiences of their patients.

Healthwatch have been a breath of fresh air in our English Club at the Darwen Drop In. They present their 5-minute ‘health bites’ at the end of every session, which are very useful and meaningful for the service users”

Roz Myers, English Club Teacher

Staff and residents at one of our workshops. One of many techniques used to gather resident’s experiences
Case Study Five

Non-Physical Disability

We launched our Non-Physical Disability Engagement in January at our Your View Your Voice group, and continued with regular workshops, meetings and art activities for over 35 local residents.

Participants have been able to share personal stories along with sharing their views on wider issues affecting those with Non-Physical Disabilities. Opening up the medium of telling their story and presenting their views has created a real sense of ownership amongst those who have been involved.

As a result of the engagement with residents with Non Physical Disabilities we have been able to use participant’s artwork to create engaging posters voicing the views & experiences raised. These colourful, easily accessible and communicative posters create a catalyst for conversation allowing for engagement to continue.

To ensure these stories were heard, we produced a film of local residents telling their story first hand. This film sent this through to all providers and commissioners.

We have also been able to identify trends in which we can focus future targeted engagement and key themes around. For instance, reviewing the training which staff receive in care settings.

We now have a monthly art engagement group who came up with the #personfirst project name, and we plan to incorporate this group into future targeted engagement projects.

Through this work, we have adapted our volunteer training package and recruited our first volunteer with learning disabilities to act as a community champion.

Posters made by local residents with Learning Disabilities.
Case Study Six

Working Residents Engagement

As part of our targeted engagement we approached a number of businesses to offer support to their staff through our signposting function.

We have built up a good relationship with workplaces locally, and have worked particularly close with Graham & Brown, a local wallpaper manufacturer, and visited the Blackburn BT office.

We visited workplaces over lunch, which has given the working population an opportunity to share their views & experiences regarding their health and social care.

Our information & signposting function has also proved vital in these locations, especially for those working 9-5. Visiting these workplaces ensures we are able to inform them of what support is available during their working hours.

Although a number of employees in the work force were not residents of Blackburn with Darwen their views were taken if they use local services. We were also able to signpost them to their local Healthwatch where requested.

As an outcome of our engagement we have been asked to continue regular lunch time drop-ins at Graham & Brown and have supported a number of residents in accessing information & services best suited to their needs.

A large workforce now knows the role of Healthwatch and how to contact us should they need our service. We also continue to work closely with partner organisations allowing us to increase our reach and broaden our relevance.
Our plans for 2015/16

Opportunities and challenges for the future

We have highlighted key priorities and objectives for the new financial year. These priorities have been selected through trend analysis from this year’s engagement processes and data collected.

Key topics:
- Cancer provision and knowledge of services
- Out-of-work residents Mental Health and Emotional Wellbeing
- Time spent by care staff, and the support delivered in older residents homes
- Confidentiality and confidence of Young people accessing GP services

#personfirst

Young People: We will extend our regular engagement with the college to engage with Primary School and High School students, Young Offenders, and NEETs (Not in Education, Employment, or Training). Through working in partnership with key organisations we will find out key issues of using local services, inform young people how to access services, and offer specific volunteering opportunities to improve their skills and experience.

Physical Disabilities: Finding out the key issues residents with physical disabilities face, focusing predominately on conditions without large third sector support, including those with arthritis and fibromyalgia.

Pubs, bookies, and butty shops: We will be looking to engage predominantly with men who spend the majority of their days in these establishments during the hours of 9-5. This will be done to find out key issues they face and provide our signposting facility to those who may not know what services are available to them.

Healthwatch North-West Network: We will continue to Chair and Facilitate the North West Chairs and Chief Officers meetings, helping the network to share best practice, support each other, and discuss regional and national issues.

Human Rights: In partnership with the British Institute of Human Rights we will continue to offer support and training to local organisations and support people with mental health issues and/or capacity issues.

National Institute for Health and Care Excellence (NICE): We have agreed to work with NICE to develop a tool kit to enable ourselves and all other local Healthwatch to better utilise NICE resources.
Our governance and decision-making

Healthwatch BwD Community Interest Company Board of Directors

The Healthwatch BwD Board of Directors are responsible for the strategic direction of the organisation, and oversee the running of the company. This includes overseeing the Finances, Human Resources, Technology, and back-office functions. Each Board member has a designated specialty and responsibility, ensuring their skills and experience are best utilised.

All Board members are volunteers, and are committed to a minimum of one day a month for Healthwatch BwD duties.

At these Board meetings service providers were invited to present on key recent issues, enabling the Board and residents to directly ask questions to services.

Over the five meetings the Board invited organisations to present from the following:

- The Better Care Fund
- Keogh Report
- North West Ambulance Service
- Pharmaceutical Needs Assessment
- BwD Public Health Localities
- East Lancashire Hospital Trust Winter Planning and A & E Services.

The Board met five times in public in 2014/15, attracting more than 100 residents and service providers to be in attendance and ask questions to the Board.

From left to right:
Top: Chair Sir Bill Taylor, Vice Chair: Abdul Mulla, Ashraf Karbhari, Helen Humphries, Ian Clark
Bottom: Mahek Christi, Paula Woodruff, Vivian King, Yasemin Beygo
How we involve lay people and volunteers

Healthwatch BwD uses a number of different methods to ensure lay people and volunteers are involved in relevant decisions and the governance of the organisation.

To involve lay people and volunteers in the delivery of Healthwatch we have created an inclusive and open volunteering program, and run monthly Your View Your Voice meetings which are open to anyone who would like to speak to staff and volunteers to share their experiences.

All decisions made by the Board are done at their public Board meetings, and allow members and local residents the opportunity to have a say on our governance, ask questions of the Board, and ensure the organisation is transparent and open.

Your View Your Voice

Your View Your Voice (YVYV) is a monthly workshop, currently running from Café Hub in Darwen & Your Support Your Choice in Blackburn. Each month the workshop has a different theme, allowing the discussion of individual issues at greater length. This can then be fed into our targeted engagement projects and influence future themes.

The project also allows for a peer support function to be formed from attendees who may be going through or experiencing similar issues. We plan Your View Your Voice workshops to increase in regularity whilst also being placed in theme relevant locations each month.

Topics covered to date include ‘An Introduction to Healthwatch’, ‘Volunteering’ and ‘Disability’. We have an eclectic range of health & social care themes planned for YVYV workshops over the following year. A number of these will link in closely with national themes, campaigns and partner work plans. Unlike our targeted engagement projects YVYV workshops run and are promoted on a monthly basis which allows for flexibility to address current and pressing issues. We hope Your View Your Voice becomes the go to place for residents to voice their views and experiences in Blackburn with Darwen.

Anmol Mulla, a Healthwatch Board Director, engaging with local residents during a college event
Volunteer Involvement

Volunteer Engagement meetings are held on a monthly basis for all volunteers involved in community engagement, allowing them to be involved in the development and implementation of current and future engagement projects.

We use volunteer’s personal experiences and expertise in varying areas of Health & Social Care to develop our projects. This allows projects to be developed with democracy, informatively & relevance at heart.

Along with generic community engagement volunteers, we currently have a Learning Disability Champion Volunteer and hope to increase champion roles in a number of distinct areas over the coming year; the first one being Youth Champions in schools and the wider youth community.

How lay people have supported commissioning, provision, and management of local services

Through our community access points, YVYV workshops, targeted engagement projects, and generic engagement activity we have gathered the views and experience of local residents.

This information is anonymised and collated in our engagement database, enabling the organisation to spot trends and highlight common concerns. This anonymised intelligence is then shared with providers and commissioners on a monthly basis to help shape local

‘Healthwatch BwD is a key partner of Your Support Your Choice & Care Network. Collaborating with them means greater reach for local residents, ensuring they access the right health and social care provision. They are effective, dynamic and are making a fantastic contribution to the local health and social care landscape through meaningful and creative project delivery. It is a joy working alongside the whole team.’

Partner Relations and Marketing Coordinator, Your Support Your Choice

‘I was quite low & depressed before volunteering but now I keep busy and meet some fabulous people. I’m in a positive place now and my confidence has grown, the world has lifted from my shoulders and I’m working towards better things’

Healthwatch Blackburn with Darwen Volunteer

Staff delivering specialist training to our Learning Disabilities Community Champion
## Financial information

### INCOME

<table>
<thead>
<tr>
<th>Description</th>
<th>£</th>
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<tbody>
<tr>
<td>Funding received from local authority to deliver local Healthwatch statutory activities</td>
<td>160,000</td>
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<tr>
<td>NHS England Care.Data Engagement</td>
<td>10,000</td>
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<tr>
<td>National Lottery Awards for All</td>
<td>9747</td>
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<tr>
<td>Blackburn with Darwen Council Locality Engagement</td>
<td>4995</td>
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<td>British Institute of Human Rights Project Involvement</td>
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<td>Bank Interest</td>
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<td><strong>Total income</strong></td>
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### HEALTHWATCH EXPENDITURE

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<th>Description</th>
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<tr>
<td>Office costs</td>
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<td>Staffing costs</td>
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<td>Direct delivery costs</td>
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<td><strong>Total expenditure</strong></td>
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<td>Balance brought forward</td>
<td>14,192.99</td>
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We will be making this annual report publicly available by 30th June 2015 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, BwD Clinical Commissioning Group, BwD Overview and Scrutiny Committee, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format please contact us at the address above.