# healthwatch Brighton and Hove

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Annual Report 2024–2025

# Unlocking the power of people-driven care

Healthwatch Brighton and Hove

# A message from Louise Ansari, Healthwatch Chief Executive



"The impact that local Healthwatch have is no accident. They're committed to championing people's voices and empowering their communities to share their experiences. They're changing the health and care landscape and making sure that people's views and experiences are central to making care better and tackling health inequalities."



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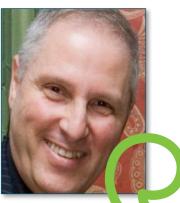
# A message from our Chair

### While we have continued to deliver core services this year, considerable bandwidth was devoted to the recommissioning of our services.

Happily, I can report that we were reappointed for an initial three-year period, from April 2025, with an option to extend the contract for a further two until 2030.

Our reappointment, against stiff competition, is a clear vote of confidence in our ability to continue delivering for the city and the skilful leadership of CEO, Alan Boyd. Alan oversaw the retender process, supported by our expert team.

There was equally stiff competition in the annual Healthwatch Impact Awards where we were up against 151 other Healthwatch teams. We were shortlisted twice and one of our projects, to improve patient transport in Sussex, won.



The project was recognised as an outstanding example of where the views and experiences of local people have been used to make care better and is an exemplar of collaboration across the Sussex region.

Since the last annual report, three board members, Howard Lewis, Alastair Hignell and Sophie Crowton, have stepped down and we thank them for their counsel over many years. Sadly, former board member Sophie Reilly died earlier this year. She had been a Healthwatch Brighton and Hove Board member for seven years and will be sorely missed by Healthwatch and family and friends.

The Board has been strengthened with the recruitment of Salma Ahmed and Vanessa Hollingworth. Both bring a wealth of healthcare and management experience to the organisation and will greatly support the effective delivery of our new contract.

**Geoffrey Bowden** 

## About us

# Healthwatch Brighton and Hove is your local health and social care champion.

We listen to what you think about local health and care services, share your views with decision makers and challenge them to make improvements. We can also help you find reliable and trustworthy information and advice.



#### Our vision

Everyone in Brighton and Hove has access to the health and social care services they need, when they need them, to live a healthy life.



#### **Our mission**

To ensure that everyone in the city knows about Healthwatch and understands that by sharing their experiences with us, they are helping to continually improve health and care services and making a positive difference for all.



#### Our values are:

**Inclusive**. We make sure that everyone's voices are included when decisions about health and social care services are made.

**Collaborative**. We work together with other groups and organisations to build strong relationships and make the biggest difference possible.

**Independent.** We are separate from the NHS, Local Authority and other organisations, enabling us to hold services to account and act as a critical friend.

**Open.** We are clear and transparent about our work, projects and priorities, explaining what we are focusing on and why.

**Compassionate.** We understand that everyone's experience is different, and we respond with humanity and kindness to each person's story.

# **Reappointed and recognised**

#### This year, we were reappointed to deliver the local Healthwatch contract for the city and won a national award for our work.

Following an intensive open procurement process run by Brighton and Hove City Council, we were reappointed from April 2025.

We were recognised in the national Healthwatch Impact Awards which showcase outstanding examples of where feedback shared from local people has been used to make positive changes to health and care support. We took home top honours for our joint work with Healthwatch East and Healthwatch West Sussex to improve patient transport in Sussex.

In addition to our win, we were also shortlisted for another project which simultaneously secured a nomination in the UK Customer Service Awards for our partnership work with University Hospitals Sussex NHS Foundation Trust.

We hope our win and nominations encourage more people in Brighton and Hove to come forward to share their experiences of health and social care.

"I am immensely proud of our team and all our volunteers that help us deliver for patients and service users in the city. The reappointment for a further three years, with an option to extend the contract until 2030, is a vote of confidence in our ability to continue delivering for the city."

Geoffrey Bowden, Chair of Healthwatch Brighton and Hove

"This project [Non-Emergency Patient Transport] really stood out because it shows exactly why listening to local people and acting on their views is key to helping unlock better health and social care services. Congratulations to everyone involved."

Louise Ansari, Chief Executive of Healthwatch England

"This award is greatly deserved and is a testament to the insight and knowledge that Healthwatch in Sussex brings to health and care services in the county, ensuring that we hear from and involve our population in all we do. Their contribution has been invaluable, and it has resulted in a service which will offer a range of new benefits to patients very soon."

Dr James Ramsay, Chief Medical Officer for NHS Sussex

Read more <u>Press Release</u> & <u>Awards Shortlist</u>





# Stakeholder quotes

# **Messages of support**

"Great work Alan, Jo, Kate, Katy, Lester, Will and all the volunteers."

"Absolutely brilliant! So deserved for all you did."

#### **NHS Sussex**

"That is excellent news. Congratulations to all of you. I look forward to the next few years working together. Amazing on the awards too!"

#### **Local hospital CEO**

"Healthwatch Brighton and Hove provides a great service in standing up for health services that serve our residents' needs. The recognition by the Healthwatch England Impact Awards of their excellent work, in collaboration with neighbouring services, is fully deserved. I congratulate them and thank them for the work they do."

"That's super news. I do recommend [Healthwatch] to residents."

"Congratulations on your success in winning a national award and in being reappointed to deliver the Healthwatch contract for the city. All down to the hard work of people at Healthwatch. So pleased for you and please pass on my congratulations to all those involved."

#### **Local Councillors**

"What an amazing piece of work. Congratulations to you all."

"Congratulations Healthwatch on your contract being reappointed."

"Congrats to the whole team – working hard to ensure people are heard."

#### Local Voluntary, Community and Social Enterprises

"Many congratulations to you all. I look forward to making a small contribution to the Team. I know how difficult the procurement process can be, and they made the right choice."

#### Healthwatch Volunteer





# Representing you at a wider level

Last year, we attended nearly 400 meetings. These provided updates on the health and social care system, allowing us to ask questions on your behalf and ensure decision-makers heard about your experiences.

Here are some examples of our work in Brighton and Hove this year:

## **Confirming annual health checks**



The government has set new objectives for NHS England in 2025, dropping some targets, including the goal for 75% of people aged 14+ with a learning disability to receive an annual health check.

We raised this at the city's Health and Wellbeing Board and received confirmation that NHS Sussex will retain the target, with campaigns underway to support the effort.

### Getting decision-makers to hear the patient voice



In February, the Health and Wellbeing Board received a report on children and young people's (CYP) mental health and wellbeing. We submitted a report sharing your insights and noted that no CYP had been invited to speak about their experiences.

Following our request for the board to hear directly from individuals, the April meeting included a well-received presentation by people with lived experience.

### **Ensuring services are reviewed**

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We attend a meeting which seeks assurance that patients are receiving safe, high-quality care. Your feedback, as illustrated in the story below, has raised concerns about ambulance services.

Our request for the committee to review 999 emergency ambulance performance was accepted. Although not commissioned by NHS Sussex, the service operates regionally, and performance was discussed in February 2025.

"My Dad had to go to A&E last night. When he explained that he couldn't leave my Mum as she has Alzheimer's they suggested he call 999 for an ambulance. They said there was no chance of an ambulance being sent."

**Helpline story** 



# Working together for change

#### We've worked with neighbouring Healthwatch to ensure people's experiences of care in Sussex were heard at the Integrated Care System (ICS) level and influenced decisions made about services delivered across the county.

Working with Healthwatch East and West Sussex this year, we achieved:

## A collaborative network of local Healthwatch



Funding from NHS Sussex Integrated Care Board enabled us to join key decision-making meetings, independently scrutinise services, and represent patient views.

NHS Sussex leaders welcomed our insight and responded to our challenges. For example, after we raised the patient need for clearer communication, they published information on <u>NHS</u> <u>dentistry</u> access and explained the various roles in <u>GP surgeries</u>.

## The big conversation



In 2024/25, the three Healthwatch teams ran 12 monthly digital polls to gather public views. We heard from 3,418 people, including 654 from Brighton and Hove.

Healthwatch Brighton and Hove led polls on Memory Assessment Services, Pharmacy First, outpatient letters, and NHS dentistry. Results (available on our website) have informed Integrated Care Teams, Neighbourhood Mental Health teams, and pharmaceutical needs assessments.

## Building strong relationships to achieve more



We used patient feedback to help shape the re-commissioning of the Sussex Non-Emergency Patient Transport Service (NEPTS). Patient views informed the service specification, leading to better communication, clearer eligibility, and improved signposting.

This work earned us the <u>Healthwatch England Impact Award</u> - the first joint winners.

In 2025, we plan to gather feedback from people using the new NEPTS service, delivered by EMED Patient Care from April.



# Information and signposting

Whether it's finding an NHS dentist, making a complaint, or choosing a good care home for a loved one - you can count on us. This year, 228 people have reached out to us for advice, support, or help finding services.

#### This year, we've helped people by:

- · Providing up-to-date information people can trust.
- · Helping people access the services they need.
- Supporting people to look after their health.
- · Signposting people to additional support services.



### **Reviews of temporary accommodation**

# Thanks to one person's feedback, Brighton and Hove City Council (BHCC) inspected accommodation for people experiencing homelessness.

The individual reported poor maintenance, limited accessibility, and felt the council wasn't listening. We escalated concerns to senior housing officials.

As a result, The Heathers was inspected and residents' views were gathered, highlighting minor issues which are now being addressed.

"The maintenance to the property and each tenant's room is very poor, which includes tenants with disabilities. The Council has been informed of this but are not concerned."

Resident

"Thank you for your email and the concerns you have raised. I have asked my team to carry out an inspection of the property and to chat to the tenants about any concerns they may have."

Head of Temporary & Supported Accommodation, BHCC

### Escalating concerns about delays to care

# At an engagement event, we heard from a patient who received a notification about a delayed hospital appointment.

After escalating this to our local hospital Trust, we learned that the endocrinology specialist was on long-term leave.

We also found out that the consultant ran a weekly osteoporosis/metabolic bone clinic, and that as an interim measure, new referrals were being sent to rheumatology. We were told that some patients faced 18-month waits to be seen in Eastbourne or were removed from waiting lists.

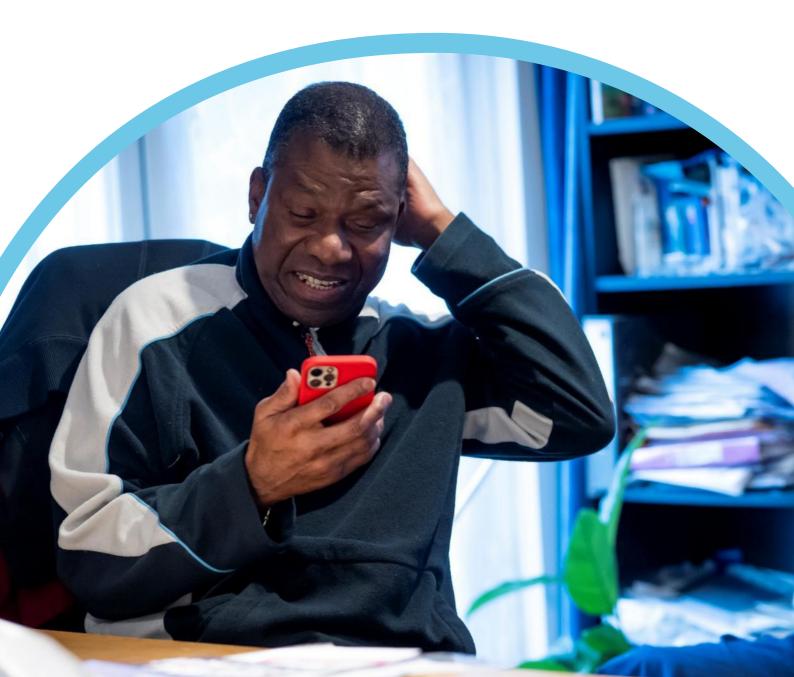
We escalated this to NHS Sussex, who commission the service, and received assurance that they were working with University Hospitals Sussex to resolve the issue. We shared this update with patients and continue to monitor the situation and push for change.

# Listening to your experiences

# Services can't improve if they don't know what's wrong. Your experiences shine a light on issues that may otherwise go unnoticed.

This year, we've listened to feedback from all areas of our community. People's experiences of care help us know what's working and what isn't, so we can give feedback on services and help them improve.

We bring people's experiences to healthcare professionals and decision-makers, using their feedback to shape services, improve care over time, and help us understand what work is being done, or is planned.



#### Here are some examples of our work in Brighton and Hove this year:

#### **Escalating concerns about hospital discharge**



#### We raised concerns with our acute Trust and NHS Sussex after hearing that frail, elderly patients had been discharged after midnight.

One case was reported as a safety incident to support learning and prevent recurrence. The hospital has since introduced a new discharge process and staff training. We shared this update with those who contacted us.

We also met with commissioners working to improve discharge and shared patient experiences to support this work.

#### **Clearer information about GP roles**

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# Patients told us they were booked for appointments with different staff, such as pharmacists, without being informed in advance.

We escalated this to Primary Care commissioners at our Integrated Care Board, who oversee GP practices. They have since issued guidance to all GP practices, advising best practice for explaining appointments with non-GP staff.

### **Investigating translation services**



We escalated concerns about dental services after hearing from a patient who had been offered an emergency appointment, but only if she could take a bilingual friend with her to interpret. The practice declined to book an interpreter.

Dental leads assured us that interpretation services should be booked where needed. They responded to our request to issue information to all dental providers about improving accessibility to interpreting and translation services, and a link to resources.

# Hypertension inequalities

# Improving outcomes for those most at risk of hypertension inequalities

We evaluated a programme that involved giving blood pressure checks and sharing knowledge about heart health in spaces such as food banks and with Black and Racially Minoritised (BRM) community groups.

#### What did we do?

We surveyed and interviewed people to see if they had learned more about blood pressure; whether their likelihood to monitor and treat high blood pressure had increased; if they were likely to make lifestyle changes; and to gather insight into barriers to having regular blood pressure checks.

We focused on groups identified as most at risk of poorer outcomes (e.g. people from BRM groups, people who do not speak English as a first language, and people who experience deprivation).

We surveyed 91 and interviewed 21 people

*"If I'm being honest, there wasn't much advice given by the GP. And you did feel that it was rushed."* 

#### BRM community event attendee

"It's not their first language, so it's very difficult [at the GP]. It's very formal, whereas an event like [this] it was very inclusive."

BRM community event attendee talking about his peers



### Key things we heard

**Time** spent with outreach workers and the **type of event** were key factors in how much participants learned about heart health and blood pressure.



of interviewees **took new action** after sessions (e.g. saw their GP; started monitoring themselves; made lifestyle changes).

Discussions revealed the **importance of community outreach**, particularly within these groups, due to their convenience, difficulties accessing GP appointments and related time constraints, as well as poor awareness around heart health.

64%

of survey respondents believed they **knew more about what causes high blood pressure after the session**.

**Peer support and familiarity of outreach workers (which built trust)** were key enablers for having regular checks and improving blood pressure.

"[My outreach worker] is very supportive with people. I felt comfortable talking about that type of thing [health] with her because I've known her for years."



#### Food bank attendee

"If they had blood pressure checks regularly [at food banks], then I probably would check it. But I wouldn't say that I'd stop into the [GP] surgery just to go and check it."

#### Food bank attendee

#### What difference did this make?

Hypertension is one of the leading risk factors for cardiovascular disease and premature deaths, yet nearly 50% of people are unaware of their condition in the UK.

Our evaluation has increased awareness of the barriers which stop people from taking positive action to protect their heart health and ways to overcome them. Our findings will help support the development of future local projects that aim to identify and treat people with hypertension and reduce inequalities.

# Our work on General Practice

# Identifying challenges in obtaining NHS treatment for earwax removal

Over the last year, we received feedback from patients experiencing increasing challenges in obtaining NHS treatment for earwax removal.

### What did we do?

In November 2024, we ran a short survey asking people to share their experiences of seeking advice and treatment for an earwax problem, and 58 people responded.

The results reveal a mixed picture when it comes to finding information about and accessing earwax removal through GP practices. It was positive to hear that some local people managed to access earwax removal on the NHS, and that for most people, the quality of their treatment was rated as good.

However, we also heard that people are increasingly finding that their GP practice no longer offers earwax removal, and some people are having to resort to paying for treatment privately because they have no alternative.

## Key things we heard

**44%** of earwax problems had a **'significant' or 'severe' impact on people's lives**.

**56%** were offered an appointment for earwax removal at their GP.

**44%** were told their **GP does not perform earwax removal**.

"My GP doesn't currently provide this service, and they haven't told me where I can get earwax removal on the NHS for free."

#### Respondent

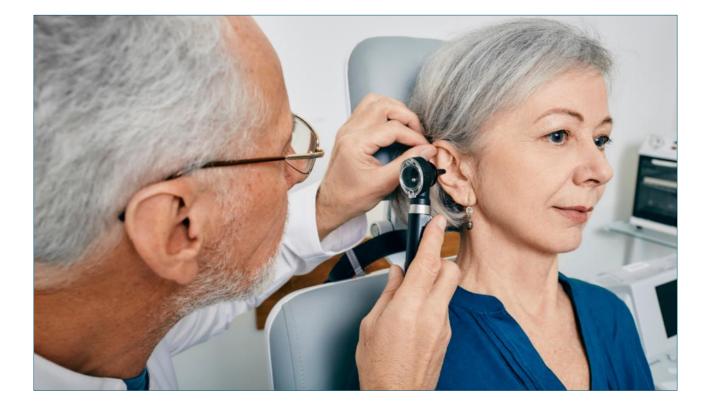
"The GP told me to put olive oil in my ears then go to a chemist and book for it to be removed. This was approximately £25 for each ear which I couldn't afford."

#### Respondent

"I was very disappointed that my GP surgery would not remove my earwax. I put up with the hearing loss and struggled in social events and avoided many situations because I couldn't hear."



#### Respondent



#### What difference did this make?

"We welcome this report from Healthwatch and thank them for their close work with patients. We know there is more work to be done in this area of healthcare, and plan to help improve experience and services for patients.

"We plan to implement the recommendations of this report, alongside other recommendations we have received about primary care audiology services, by working closely with GP practices and Primary Care Networks to improve knowledge of, and access to, audiology services among primary care staff and patients alike."

#### **NHS Sussex response**

Read more <u>Earwax Report</u>

## **Our work on General Practice**

## Woodingdean Medical Centre

Through our helpline, we heard that some people were finding it difficult to book an appointment at Woodingdean Medical Centre. East Brighton contains pockets of high deprivation, so it was important to hear from local people.

### What did we do?

We discussed patient concerns with NHS Sussex and the Care Quality Commission (CQC) and then met with the practice manager and Patient Participation Group (PPG).

With the practice's support, we ran a survey sent by text to all patients registered at Woodingdean Medical Centre and distributed questionnaires at local pharmacies.

We also attended the Woodingdean Carnival to speak to patients in person.

Our survey explored awareness about changes the practice had already made and tested the appetite for new options.

A total of 1,129 patients responded.

#### **Patient quotes**

"The greatest challenge is getting an appointment and doing the 8.30am rush."



"Can phone and book an appointment for the following day or two, if all appointments have been taken on the day you phone."

## Key things we heard

Less than one-half of patients were aware of the majority of changes the practice had already made, for example:

- Just 16% were aware that you can book an appointment with a Social Prescriber, First Contact Practitioner, or Clinical Pharmacist.
- 37% were aware you can book appointments via the NHS App.

#### About the appointment preferences:

- 64% showed a preference for phone appointments.
- 55% wanted to extend the period of appointments bookable in advance from two to four weeks.
- 38% showed a preference for video appointments.

"I have found the reception staff and doctors incredibly friendly, helpful and professional. I cannot speak highly enough of their compassion."

Patient

### What difference did this make?

The practice has told us that they will be implementing changes based on our research, including offering patients the choice of having a telephone appointment and requesting pre-bookable appointments up to two weeks ahead. We have shared our report with NHS Sussex commissioners and the Care Quality Commission (CQC) to support their oversight of the practice.

We will be running a shorter survey in 2025 to find out whether making an appointment has become easier and to see whether patients' experiences of booking appointments have improved.

"We are grateful to Healthwatch Brighton and Hove for organising the survey on behalf of our patients and the practice. We have responded to feedback and introduced prebookable appointments up to two weeks ahead and are happy to extend this further.

We continue to work on our website to help patients, and we acknowledge that further work is needed to make navigation to information easier. Improving appointment availability is an area we will continue to develop with the support of our PPG, patient feedback, Healthwatch and the local commissioners."

Woodingdean Medical Centre



Read more Full Report

# Our work with hospitals

## Enter and View of the Fracture Clinic at the Royal Sussex County Hospital

We used our legal power to Enter and View services to visit the Fracture Clinic in the Louisa Martindale building, following helpline feedback.

"The [Fracture Clinic] staff were friendly and working hard but they seemed let down by the online systems, and more work was being created because of poor comms and appointment booking processes."



### Recommendations

Observations and patient feedback were generally very positive, but the following improvements were recommended:

- Clearer signage to the clinic, more parking information in letters, better support for patients with dementia (i.e. clearer contrast between walls, doors, and floors), a hearing loop, handrails, and a larger clock are needed.
- Improving staff IT training to ensure accurate appointment letters, and booking system adjustments, could enhance patient and staff experience.



# What difference did this make?

We shared our report with the Care Quality Commission (CQC) and discussed our findings with hospital staff, who added them to their 'Impact Tracker'. This helps us monitor how our recommendations are being acted on through regular meetings.

New booking systems have been developed, signage has improved, and further environmental adjustments are under way.

Read more Full Report

## Patient-Led Assessments of the Care Environment (PLACE)

This year, our volunteers visited hospitals run by two NHS Trusts to assess the environments where care is delivered.

This work is known as Patient-Led Assessments of the Care Environment.

### What did we do?

We visited departments across the Royal Sussex County Hospital, Royal Alexandra Children's Hospital (RACH), and the Sussex Eye Hospital.

We also visited Mill View Hospital. We shared feedback to support improvements as part of the national NHS PLACE programme.

"Some older areas are not in a good state of repair and appear to have been designed to cope with a much lower level of patient activity and are overcrowded and cramped. Standards of cleanliness and maintenance are nonetheless high, and patients I spoke to were complimentary about the levels of care they were receiving and were positive about the food."



Patient assessor at the Royal Sussex County Hospital

### Key things we found

#### **University Hospitals Sussex Foundation Trust**

- Areas that performed well and received positive patient feedback included: the Lawson Unit (specialist HIV centre), Maternity, Vascular, and the RACH Emergency Department.
- Areas that needed some improvement included: the Endoscopy department which needs new floors to remove trip hazards, and the Cancer Centre which has a large crack in the ceiling allowing water in.

#### **Sussex Partnership Foundation Trust**

• We visited Mill View Hospital which was clean, although tired in places, and food was generally of good quality. Some issues related to smoking areas and food from our previous visits had been largely addressed.

Read more <u>USHx</u> & <u>SPFT</u> reports

# Our work with hospitals

## Improving patient communication at University Hospitals Sussex – 'Mystery Shops'

As part of our outpatient focus, we developed a Communication Charter.

University Hospitals Sussex used this to shape their Welcome Standards programme, introduced in 2023-24, which has included staff training on delivering good customer service.

To review the training's impact, we 'mystery shopped' reception staff, observed staff/patient interactions and interviewed patients about their experiences.

### **Findings and recommendations**

Main reception at the Royal Sussex County Hospital in the Louisa Martindale building:

**Overall, very positive**. Recommendations included having opening times of services to hand and ensuring a member of staff is always facing the entrance, ready to assist.

#### Emergency Department reception at the Royal Alexandra Children's Hospital:

**Overall, positive.** Recommendations included providing more instruction on what was going to happen (and the specific rooms patients could sit in, e.g. the adolescent room) and giving an even warmer welcome.

#### Main Reception - Royal Sussex County Hospital

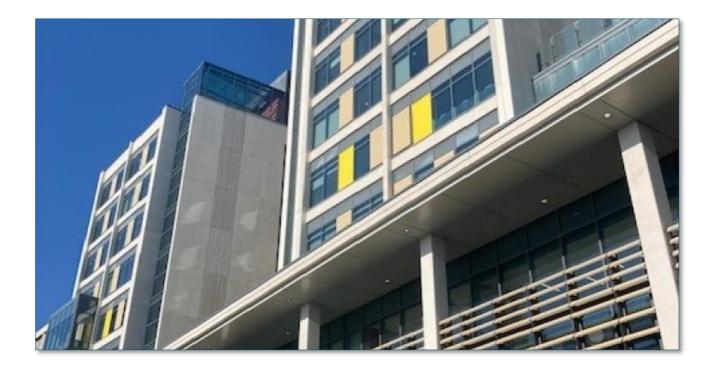
"[The receptionist was] very kind, relaxed and friendly and went out of her way to help."



#### Emergency Department Reception - Royal Alexandra Children's Hospital

"I'd like a bit more interaction from staff. A more comforting receptionist would be very welcome."





#### What difference did this make

A video produced by University Hospitals Sussex (UHSx) demonstrates the value of the new training on Welcome Standards. This includes a special thanks to Healthwatch for being the co-creator and reviewer of the Welcome Standards. <u>Watch the video</u>.

The project was shortlisted for the <u>UK Customer Satisfaction Awards 2025</u> in the Best Customer Service Partnership category.

We were also finalists in the Healthwatch England Impact Awards 2025.

We plan to visit more reception areas throughout 2025.

"Our Welcome Standards programme, which was borne out of the communication charter developed by Healthwatch Brighton and Hove ... is now a significant programme of training and selfevaluation... We have been able to deliver demonstrable and quantifiable improvements as a result."



Director of Patient Experience, Engagement & Involvement University Hospitals Sussex

Read more <u>Results Summary</u>

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## Dementia care experience

# People affected by dementia and their experience of inpatient and outpatient care

We interviewed people affected by dementia and/or their carers about their experiences of attending hospital - either as inpatients or outpatients - across University Hospitals Sussex NHS Foundation Trust.

## Key things we heard

Overall, the **care received was described as being 'good'**. Steps which were identified to improve people's experiences were:

- · Involving both the carer and dementia patient in care decisions.
- Recognising the importance of the carers accompanying the dementia patient at all possible opportunities.
- Minimising the movement of the patient within the hospital, which could be distressing.
- Having 'everyday', short, informal conversations between staff and carers/dementia patients appeared to make a real difference to people's experiences.

"Doctors and nurses went by getting on with their job. I suppose my overall impression was that it would have been lovely if the people walking by had been a bit more smiling. Relaxed. [Asking] 'How are you?'."

Respondent



### What difference did this make?

Insights from the hospital experiences of patients and their carers will inform the development of University Hospitals Sussex's five-year Dementia and Delirium Strategy. Including the patient voice will ultimately help improve experiences for individuals and their loved ones.



# Speaking to people who receive home care to understand their experiences

Our volunteers regularly interview people receiving homecare services that are fully or partly funded by Brighton and Hove City Council. We report our findings monthly so they can share them with the care providers and assess service quality and safety.

This year, our volunteers **spoke with 225 people**.

Although they remain largely positive about their carers and care packages, satisfaction levels have dipped slightly compared to the previous year. Significantly, the number of complaints has increased, and the council is working with the specific providers to address the concerns.

## Key things we heard

- **92% 207** people 'agreed' or 'strongly agreed' that they were happy with how their carers treated them  **previously 95%**.
- 86% **194** people felt the help they got from providers was 'very' or 'extremely useful'  **previously 90%**.

86 people had made a complaintpreviously 28%.

"Main carers are all excellent, office staff very responsive - couldn't do anything better."

#### Service User

38%

"Complained about having male carers as she wanted female careers for privacy and dignity reasons given her age."



Homecare Check volunteer

## What difference did this make?

We requested **20** service reviews and **34** requests for additional support / information. We also raised **three safeguarding concerns**.

Our reports played a key role in helping the council monitor the experiences of people receiving home care and supported efforts to maintain high standards across providers - and held them accountable when these standards weren't met.

Read more Homecare Report

# Healthcare for young children

## Parents and carers of young children share their experiences of accessing health care

Last year, the Care Quality Commission (CQC) commissioned us to hear from parents and carers of children aged 5 and under, to better understand their needs and support the CQC's engagement plans. We have tracked the impact this project has made.

#### What did we do?

We gathered feedback through a survey and follow-up conversations, hearing from 136 parents and carers. This included those with children who have Special Educational Needs and/or Disabilities (SEND), and those who are LGBTQIA+ or from Black and Racially Minoritised groups.

"My daughter has waited 2.5 years and has another year of waiting to see a speech therapist and this has impacted her confidence and ability to make friends." **Parent of a five-year-old** 



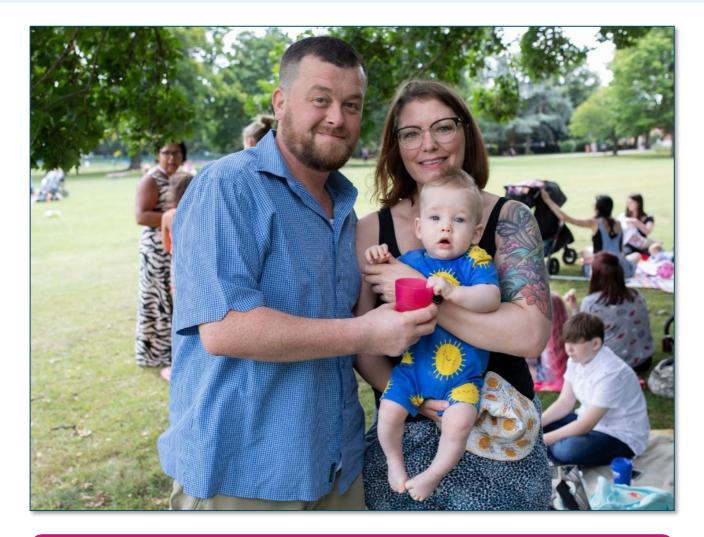
"The dentist was really kind at the first appointment to get him used to the dentist... I have nothing bad to say about dentists and the routine appointments are easy to get."

#### Mother of three-year-old

"When my daughter was born, I looked into getting her on a list and was told there was a four year wait!" **Mother of one-year-old** 

### Key things we heard

- People faced challenges with accessing appointments: booking GP and dental appointments.
- There were lengthy waiting lists for specialist referral appointments and assessments for neurodiversity.
- Difficulties were experienced with attending services e.g. due to having a child with special educational needs.
- High costs were sometimes associated with attending appointments and parenting support groups, including travel costs.
- A lack of emotional support was offered to new parents.



## What difference did this make?

#### Response from Care Quality Commission (CQC)

Project insight was reviewed by CQC in 2024 and helped to inform their thinking around people's experiences of health and care, and to support products such as their State of Care report and thematic reviews.

CQC told us they raised awareness of the project internally, and staff feedback was that they found the insight compelling, particularly for conducting similar projects with local Healthwatch organisations and wider voluntary sector organisations. The project was also shared with CQC staff to help supplement their training around engaging with the public, highlighting the expertise and relationships held by local Healthwatch organisations.

The project has also provided valuable experiences and insight about how people access care, which the CQC has told us will support their future regulation of services.

Read more <u>Project Report</u>

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# Young Healthwatch

## Vaping and young people with Special Educational Needs

We worked with local charities, <u>Amaze</u> and The Parent Carers' Council (<u>PaCC</u>), and <u>Brighton and Hove City Council</u> to better understand the experiences and beliefs of young people under 25 with Special Educational Needs and/or Disabilities (SEND) around vapes and vaping, as little is currently known about this group.

### What did we do?

We conducted a desktop review to consolidate information on young people's experiences with vaping and provide context for the project. 12 reports were reviewed and summarised, drawing mainly from national data.

## Key things we found

- Vaping rates among 11–17-year-olds **appears to have stabilised** since 2022, following a steady increase from 2013.
- National evidence suggests young people often vape to manage stress and anxiety, indicating a link with mental health.
- Research shows a **strong association** between ADHD symptoms and vaping among adolescents.

"Vaping by those with SEND is not straight forward. The following should be considered; poor processing, communication and language challenges, OCD behaviours, use of things like vapes for stimming purposes, collecting colourful vapes, sensory need."

*"It's very hard to argue when your child states they need to vape for their mental health when they have a history of self-harm."* 

# **B**

#### **Quotes from parents**

#### Next steps:

We are analysing results from a survey for young people and one for parents and carers, alongside outcomes from focus groups and interviews.

We will share our research and findings with council leads developing a Joint Strategic Needs Assessment for children and young people with SEND, and mental health practitioners in schools to raise awareness of vaping, as well as with those leading the Children and Young People's Asthma Transformation across Sussex.

# Views of LGBTQIA+ young people about accessing care

In 2023, we commissioned <u>ru-ok?</u> (Brighton and Hove's Young Persons' Drug and Alcohol Team) to engage with LGBTQIA+ young people about barriers to accessing services. Our project continues to drive meaningful change.

## What did we find out?

Feedback from young people made it clear they want professionals to understand the broader experiences of LGBTQIA+ individuals, including how other services have - or haven't - supported them.

In response, the young people created a toolkit and a suite of videos (currently being finalised) to help those working with children and young people provide better, more informed support.



#### What difference did this make

Since publication, the toolkit has been shared at an Adolescent Service Day and with professionals in Youth Justice, Family Functioning Therapy, Social Work, and Adolescent Exploitation teams. It has also been distributed to all local agencies working with adolescents.

Ongoing discussions are exploring wider sharing with trainee social workers, the police, and local universities. This work has also supported ru-ok? in updating their assessment tool to create more welcoming spaces and improve staff understanding of gender and transitioning.

Learn more Full <u>Report</u> & <u>Toolkit</u>

## **User-testing of the Health Counts survey**

# Health Counts is a health and wellbeing survey of Brighton and Hove residents, conducted every 10 years.

It asks questions about people's health, lifestyles, and overall wellbeing. The data helps inform decisions about what services and support are needed to meet local needs and tracks how health inequalities have changed over time.



## What did we do?

We supported the University of Brighton in user-testing the survey to ensure the questions suited the diverse groups within our city. We consulted 22 people. This included people for whom English was not their first language, a range of age groups, Black and Racially Minoritised groups, people at a foodbank in Whitehawk, and people from the travelling community.

### Key things we heard

Through wide consultation with local people and several voluntary sector organisations, questions were modified based on user feedback.

We provided feedback on every page of the survey, suggesting the rewording of several questions to make them easier to understand and respond to.



## What difference did this make?

The user-testing made a powerful contribution to the success of the Health Counts survey, which achieved a sample of 16,729 across Brighton and Hove, or 7.2% of the resident population aged 18 years or older.

Healthwatch worked with council officials in planning the launch event of the results in June 2025 and will conduct further analysis of the data to provide detailed local insight.

Learn more <u>Summary & Full Report</u>

## Hearing from diverse communities

Every year we evaluate our projects and reviews of health and care services to see how effectively we have engaged with the general population of the city and its diverse communities.

### What did we do?

We reviewed equalities data from 15 projects, engagement reports, and helpline records, totalling 2,174 responses.

This included information on age, sex, gender identity, ethnicity, sexual orientation, religion, disability, carer status, and Armed Forces affiliation. We compared our data with Brighton and Hove census figures to assess how effectively we are reaching diverse communities.

#### People we engaged



## What difference did this make?

Our equalities data is instrumental in showing how well we are doing in hearing views from diverse communities across the city. This assessment feeds into our <u>Engagement Plan</u>, helping us identify which groups we need to prioritise over the next year, while recognising the intersectionality of people's experiences.

For example, our review showed we are effective in reaching people who self-describe as being women (two-thirds of those who we engaged with last year). As a result, over the next year, we are undertaking a project to hear more about the health and social care needs and experiences among people who self-describe as being men.

# Events attended, what we heard

# Staff and volunteers attend events to hear from you and share what we do

We attended **11 events** this year, reaching over 250 people. These events help us connect with more individuals, hear their views, and raise awareness of our work.

Common themes we heard about were GP access and long waits for hospital care.

We also heard that people want better integration of services:

"Health and social care need to be properly integrated so that people aren't stuck in hospital."

#### And accessible services:

"When I was pregnant, I went to hospital to give birth, but they had no interpreter to support me to communicate with the midwives."

#### How did this support our work?

The events supported our projects, enabling us to speak in person to people about GP access at Woodingdean, use of digital technology amongst Black and Racially Minoritised groups, and vaping amongst children and young people - you can read more about these in this report.

We shared feedback with commissioners and providers of care.

#### What difference did this make?

After attending a Deaf Health event, we made our website more accessible and uploaded a video with BSL interpretation that explains who we are and what we do.

We also offer SignLive via our website, enabling people with hearing loss or difficulties to share their views with us more easily.

## Read more Reports for <u>Sept 2024</u> & <u>March 2025</u>

# Social Value & Climate Commitments

## Social Value is about the positive impact we want our organisation to have on local people and communities. We are also committed to contributing to our city's wider environmental goals.

For both areas, we've published five-year plans and, from next year, will share detailed progress updates alongside a summary in our 2025-26 annual report.

#### **Social Value**

- We attended an Age and Dementia Friendly training session, identifying actions to become a <u>dementia friendly</u> organisation.
- We met with 'Hourglass', a UK charity focused on the abuse and neglect of older people. Their Independent Domestic Violence Advisers collaborate in a bid to tackle domestic abuse in Sussex, and we are exploring their training offer to raise staff and volunteer awareness.
- We issued volunteer newsletters and arranged volunteer 'get togethers'.
- We continued to offer varied volunteering roles, flexible placements including for university students, and continued to recruit diverse people.
- Our policies ensured staff with caring responsibilities could work flexibly.
- We continued to offer hybrid working, flexible hours, and a free Employee Assistance Programme. All staff were paid at least the Living Wage.

#### **Net Zero**

- We published our plans to become carbon neutral by 2030.
- We met with Community Works, who recently achieved their Investors in the Environment Bronze Award. They have shared good practice to improve our own plans.
- We met with a local Sustainability Consultant who has reviewed our strategy and offered help with our carbon reporting.
- We are partnering with the Trust for Developing Communities and 20 local VCSE (Voluntary, Community, and Social Enterprise) to deliver a <u>Lottery-funded Climate for Communities Project</u>.

# Showcasing volunteer impact

Our fantastic volunteers have given an estimated 4,155 hours - **over 173 days** - to support our work. Thanks to their dedication to improving care, we can better understand what is working and what needs improving in our community.

#### This year, our volunteers:

- · Visited health and care services to help them improve.
- Attended meetings, forums and community groups to listen and promote our work.
- Provided advice and signposting for local people.
- · Collected feedback and supported service users to share their views.
- Reviewed patient literature and contributed to focus groups.
- Supported our communications strategy, as well as offering guidance on our policies.



# Showcasing volunteer impact

## At the heart of what we do

# Volunteers play a central role in helping people have their say on health and social care.

From capturing service user experiences to representing us at key events, our volunteers are truly at the heart of what we do in Brighton and Hove. By engaging different communities and acting as our 'eyes and ears', they continue to help champion people's needs and improve local care.

In their own words, what is it like volunteering with Healthwatch Brighton and Hove?

"I've been volunteering for a number of years, but this year helped more with the Homecare project. It means working closer with other volunteers, albeit online, which has been really enjoyable.

It's very humbling to see how much care and time other volunteers give, and how knowledgeable we all are collectively."



Elaine

"It's lovely to work with a supportive team and the work I do on leaflet reviews is a real education.

I have learned so much that I am able to share with family and friends.

The enjoyment in being a volunteer is, in large part, due to the support and encouragement of the Healthwatch team."



Lynne

"I was part of the team that recently undertook the Enter and View patient interviews at the Emergency Department at Royal Sussex County Hospital. The Healthwatch team ensured we were fully briefed and supported, with a strong sense of teamwork and professionalism.

Any concerns I might have had about patients being unwilling to talk vanished instantly and we got some vital and detailed feedback from people who were happy to chat and grateful to have their views recorded."



Judi

"In the past year, I have been involved in Homecare Checks and PLACE assessments. I have been volunteering with Healthwatch since 2020, and I love how it feels like we are a team and a big family.

Everyone that I have met through this volunteering role has been friendly, and supportive. I feel very safe and love everything that Healthwatch represents in the healthcare industry."



Leah

#### Be part of the change.

If you've felt inspired by these stories, talk to us today and find out how you can be part of our lovely volunteer team. www.hwbh.co.uk

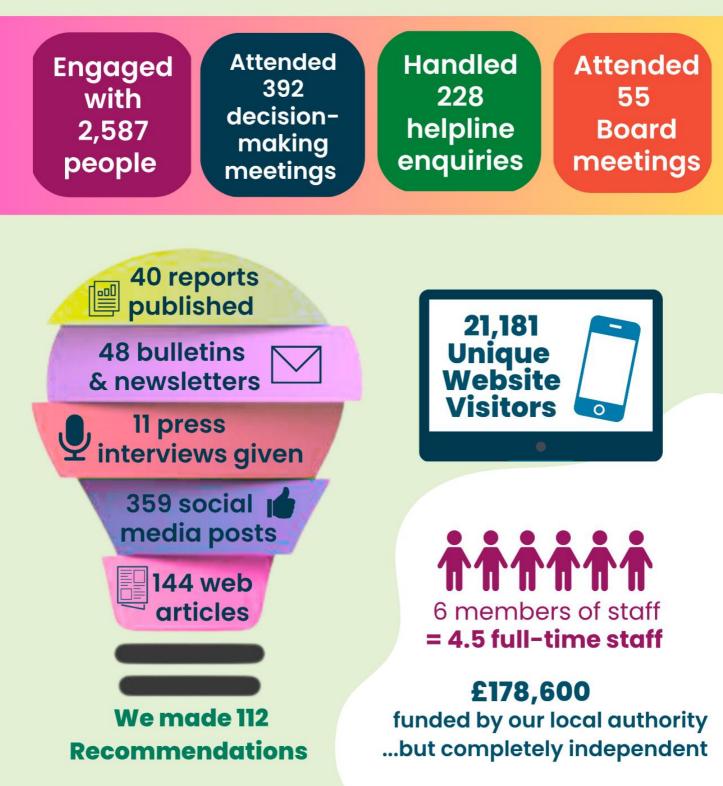
01273 234 040



office@hwbh.co.uk

## **This Year**

# **41 volunteers**, including **11 volunteer Board Members**, and our **staff team** have...



#### **Our Board of Directors are all volunteers**



**Geoffrey Bowden** Chair



Dr Khalid Ali



Angelika Wydra



Gillian Connor



Christopher Morey



Salma Ahmed



Vanessa Hollingworth

#### Goodbyes

**Howard Lewis**, **Christine D'Cruz**, **Alastair Hignell** and **Sophie Crowton** stood down as Directors this year. We would like to thank them for their time, professionalism, experience, insight and contribution to our work.

Sadly, former board member **Sophie Reilly**, died earlier this year. She had been a Healthwatch Brighton and Hove board member for seven years and will be sorely missed by the team, her family and friends.



#### Thank you

#### Throughout this year we were lucky to have 49 authorised representatives able to review services, attend decision-making forums, and speak up for patients and care service users.

This team was comprised of 41 volunteers, including Directors, and six members of staff (4.5 full-time). Thank you to everyone who contributed to our mission.

Abigail Bandtock Adaeze Ezeugwa Alan Boyd Alistair Hignell Angelika Wydra Barbara Loman Bharti Mistry Bob Deschene Brigid Day Chris Jennings Christine D'Cruz Christopher Morey Clary Collicutt **Conor Sheehan Elaine Crush** Elaine Foster-Page Eli Lewis Fran O'Neill Geoffrey Bowden **Gillian** Connor Hilary Martin Howard Lewis Ian Bretman Jason Furbank Jo Dorey

John Gough Judi Holly **Kate Jones** Katy Francis Khalid Ali Leah Ashley Lester Coleman Lynne Shields Mazzie Sharp Michelle Kay Mike Holdgate Neil McIntosh Nicholas Gorvett Paul Koczerzat Pauline O'Halloran **Richard Williams** Salma Ahmed Simona Pinto Sophie Crowton **Stewart Moysey** Sue Seymour Sylvia New Vanessa Hollingworth Will Anjos

#### Our staff team

Alan Boyd Chief Executive

Will Anjos Project Coordinator

Kate Jones Project Coordinator **Dr Lester Coleman** Head of Research

Katy Francis Project Coordinator

**Jo Dorey** Project Support Officer



Left to right: Jo, Will, Kate, Alan, Lester and Katy.

"My first year has been brilliant and a real education. I come from community arts, so learning from the staff team and our incredible volunteers is a welcome opportunity, especially when everyone has such a wide breadth of knowledge from across the sector."



Jo joined us in July 2024 to support our volunteers and comms strategy.



## Message from our Chief Executive

#### I am delighted that this year, Healthwatch Brighton and Hove Community Interest Company (CIC) was re-appointed to deliver Healthwatch services for the city.

I am also immensely proud of the breadth and quality of work described in this year's report and the impact it is having. Our 2024 Impact Award (shared with colleagues in Healthwatch East Sussex and Healthwatch West Sussex) and other nominations recognise the work we do on behalf of local people.

The credit and my thanks go to my skilled staff team and our dedicated volunteers (including those who moved on this year), as well as to partners who support our work for all their tireless efforts.

"I am deeply concerned about the potential loss of an independent organisation which represents patients, amplifies their voices and has powers to act and hold services to account."

#### Alan Boyd, CEO

**Looking ahead and the future of Healthwatch.** The NHS 10-year plan is expected to set out bold ambitions for improvements against a backdrop of significant cuts to our Integrated Care Board. From 2026, a new Mayor for Sussex is expected to oversee a duty for local authorities to tackle health improvement and health inequalities. Delivering resultant changes will require significant joined-up working and different ways of working.

This month, we heard that an independent review by Penny Dash of patient safety across the health and care landscape has recommended closing down Healthwatch England and local Healthwatch.

We await the final report, but I am deeply concerned about the potential loss of an independent organisation which represents patients, amplifies their voices and has powers to act and hold services to account. For over 12 years, we have proudly supported communities, achieving improvements and changes on their behalf. Our learning and insight has been at the core of this, cocreating solutions which are then embedded into successful service design and provision. Failing to listen and respond to population needs risks poor patient experience.

**Alan Boyd** 

## We published 40 reports this year describing our work and your experiences of health and social care services.

They are all available on our website – click the links below to view. This list does not include an update to our <u>Vision, Mission and Values</u>.

No	Reports	Date
1	Healthwatch Brighton and Hove Annual Performance Report 2024/25 (1st April 2024 and 31st March 2025)	16/04/2025
2	People affected by dementia and carers' experiences of hospitals in Sussex	31/03/2025
3	Patient Communication at the Royal Sussex County - Mystery Shopping of the Welcome Standards	25/03/2025
4	<u>Healthwatch Brighton and Hove Public Engagement Events:</u> <u>October 2024 - March 2025</u>	25/03/2025
5	Your experiences of accessing Neurodevelopmental Services	20/03/2025
6	Healthwatch visits Mill View Hospital as part of the PLACE programme	10/03/2025
7	Report on experiences of treatment for earwax in Brighton and Hove	05/03/2025
8	Your experiences of NHS Dental services in Brighton & Hove and Sussex-wide	17/02/2025
9	A review of digital access to health and care 2020-2024	10/02/2025
10	Insight and intelligence on Children and Young People's (CYPs) mental health and wellbeing	06/02/2025
11	Vaping and young people with Special Educational Needs and Disabilities: desktop review	06/02/2025
12	How your stories have helped to improve services	28/01/2025
13	Your experiences of cancer screening	14/01/2025
14	Healthwatch Brighton and Hove six-month Performance Report (1st April 2024 to 30th September 2024)	18/12/2024
15	Your experiences of adult social care services	18/12/2024
16	<u>Enter and View report:</u> <u>Fracture Clinic at Royal Sussex County Hospital, August 2024</u>	14/11/2024
17	Your experiences of hospital outpatient appointment letters	11/11/2024
18	Parents and carers of children 0 – 5 years old - views of accessing children's healthcare in Sussex	11/10/2024

No	Reports	Date
19	Your experiences of hospital discharge	04/10/2024
20	Healthwatch Brighton and Hove Public Engagement Events: April - September 2024	30/09/2024
21	Patient views about Woodingdean Medical Practice	19/09/2024
22	Your experiences of using eye care services	18/09/2024
23	Healthwatch Brighton and Hove Communications Plan, March 2024 - April 2026	10/09/2024
24	Healthwatch Brighton and Hove Engagement Plan 2024-27	10/09/2024
25	Our workplan for 2024/25	12/08/2024
26	Your experiences of using pharmacy services	06/08/2024
27	Patient feedback about the Emergency Department at the Royal Sussex County Hospital, July 2024	31/07/2024
28	Your experiences of using eConsult	22/07/2024
29	Mystery shop of the translation facility at the Royal Sussex County Hospital, March 2024	17/07/2024
30	Healthwatch Brighton and Hove - Annual Report 2023-24	05/07/2024
31	Equalities Impact Assessment 2023-2024	27/06/2024
32	Young people share their views on barriers to accessing services	25/06/2024
33	Your experiences of being seen by a Physician Associate	11/06/2024
34	Stakeholder Survey 2024	20/05/2024
35	Understanding the use and attitudes of digital technology among ethnic minority elders in Brighton and Hove	09/05/2024
36	Views about Memory Assessment Services (MAS)	08/05/2024
37	Enter and View Report: The Emergency Department at the Royal Sussex County Hospital March 2024	
38	<u>Helpline enquires to Healthwatch Brighton and Hove:</u> <u>April 1st 2023 – March 31st 2024</u>	15/04/2024
39	Healthwatch Brighton and Hove Annual Performance Report, April 2023 - March 2024	08/04/2024
40	<u>Supporting the development of our local Emergency Department - The</u> <u>Second Workshop</u>	02/04/2024

## Finance and future priorities

We receive funding from our local authority under the Health and Social Care Act 2012 to help us do our work.

#### Our income and expenditure:

Income		Expenditure	
Annual grant from Government	£178,600	Expenditure on pay	£186,929.74
Additional income from project work	£29,000	Non-pay expenditure	£10,391.98
Other income	£18,792.44	Office and management fee	£23,999.93
Total income	£226,392.44	Total expenditure	£221,321.65

### Additional/other income is broken down into:

- £1,000 received from Healthwatch England for work on a project exploring the experiences of GP care amongst trans, non-binary and intersex people.
- £5,000 from a local charity to support engagement work on hypertension.
- £13,000 received from Brighton and Hove City Council to deliver our Homecare check project (on social care).
- £10,000 from the University Hospitals Sussex Charity for developing a series of Mystery Shops.
- £2,405.60 earned in bank interest.
- £340 miscellaneous.

#### Integrated Care System (ICS) funding:

Healthwatch across Sussex also receive funding from our ICS to support new areas of collaborative work at this level, including:

Purpose of UCS funding	Amount
To support activities at Sussex level, Healthwatch Brighton and Hove received:	£10,000
Legacy funding to support a one-year Sussex-wide Strategic staffing role, operating across the three Sussex Healthwatch teams, which ended in May 2025.	£6,046.84

#### Next steps:

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

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

#### Our priorities for the next year are:

Over the next year, we will focus on delivering against our <u>engagement plan</u> and responding to the results from our <u>equality impact assessment</u>. We will do this by reaching out to those we hear less from, including people from diverse backgrounds, especially people in the most deprived areas of Brighton and Hove, those who are experiencing health inequalities, men, younger people and people from Black and Racially Minoritised communities.

- 1. We will aim to deliver the projects we have identified through our planning and prioritisation process, which involves the views of the public.
- 2. We will continue to work together with a range of partners to widen our understanding of people's experiences of using health and social care services.
- 3. We will also continue our collaborative approach with Healthwatch in Sussex, and the wider Healthwatch network, whilst maintaining our focus on supporting the residents of Brighton and Hove.

### **Statutory statements**

Healthwatch Brighton and Hove, 113 Queens Road, Brighton BN1 3XG. England.

Healthwatch Brighton and Hove 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 currently consists of seven members who work voluntarily 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 2024/25, the Board met five times and made decisions on matters such as agreeing budgets, the appointment of new directors, and agreeing workplans. We ensure wider public involvement in deciding our work priorities.

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

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services.

During 2024/25, we have been available by phone and email, provided a web form on our website and through social media, and attended community group meetings and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, promote it through our newsletter and social media, and share it with all Councillors and key partners (including the Health and Overview Scrutiny Committee, the Health and Wellbeing Board, and the Integrated Care Board (ICB)). For environmental reasons, we will only provide hard copies upon request.

#### **Responses to recommendations**

Providers and commissioners of services responded to our requests for information or recommendations. We escalated to the Healthwatch England Committee outputs from our commissioned project work (as described in this report) and matters relating to local pharmacy provision (for information), GP funding, dentists (which resulted in Parliamentary Questions being submitted) and queries around what Local Authority 'devolution' and ICB mergers might mean for Healthwatch. We also raised concerns about 'out of area' social care placements to the Healthwatch network to support local discussions on this topic.

#### Taking people's experiences to decisionmakers

We ensure that those who make decisions about services hear the insights and experiences shared with us.

In our local authority area, we share information with decision-makers, including those on the Health and Overview Scrutiny Committee, the Health and Wellbeing Board, Place Delivery Group (which oversees the implementation of Integrated Care Teams), Mental Health Oversight Board, and Joint Strategic Needs Assessment group. We also sit on the city's Adult Safeguarding Board and our volunteer Chairs the Safeguarding Adults Review Board.

We provide insight to decision-makers in Sussex Health and Care. Working with Healthwatch teams across Sussex, we attend the Quality Patient Experience Committee, Quality Governance Improvement Group, Primary Care Commissioning Group, and Local Dental Committee. We also meet regularly with the Care Quality Commission (CQC) and local hospital trusts to share insight. Our data is also shared with Healthwatch England to support national work, including reports on cervical cancer and GP care experiences among Trans, Non-binary and Intersex (TNBI) people.

We are committed to hearing from people from diverse backgrounds who are often underrepresented. This year, we partnered with local voluntary and community groups to reach people in areas of higher deprivation (East Brighton) and children with Special Educational Needs and Disabilities. We also amplified the voices of people at risk of homelessness through work with our local council.

#### **Healthwatch representatives**

Healthwatch Brighton and Hove is represented on the Health and Wellbeing Board by our CEO, Alan Boyd. During 2024/25, our representative has effectively carried out this role by providing insight on matters being discussed and constructively challenging system priorities and targets.

#### **Enter and View**

Location	Reason for visit	What you did as a result
Hospital services - fracture clinic	Patients raised concerns	Wrote a report with recommendations – the service followed up on these to make improvements.
Hospital services - Emergency Department	Patients raised concerns	Wrote a report with recommendations – the service followed up on these and we raised them with CQC and our ICS to feed into wider intelligence and action plans.



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