

**Telford & Wrekin  
Local Involvement Network**



# **Interim annual report**

**1 April 2012 – 31 December 2012**



## **The LINK: what it is and what it does**

The primary purpose of the Telford & Wrekin Local Involvement Network (LINK) is to find out what people think about local health and social care services and to use this information to improve the way that services are planned, commissioned, delivered and reviewed.

By collecting first-hand accounts of health and social care from service users, carers and patients the LINK is able to put forward practical proposals which illustrate how existing services can be improved and gaps in provision addressed in ways that are cost-effective.

The area within which each LINK operates is based on the boundaries of the unitary authority that is responsible for providing social services. That is why in this area there is one LINK covering the Borough of Telford and Wrekin and another LINK covering Shropshire. Telford & Wrekin LINK covers:

- Telford South (Coalport, Ironbridge, Madeley, Sutton Hill, Coalbrookdale, Tweedale, Woodside)
- Telford Central (Lawley, Dawley, Lightmoor, Aqueduct, Hollinswood, Town Centre, Randlay, Stafford Park, St George's)
- North West Telford (Wellington, Shawbirch, Dothill)
- Telford North East (St George's, Priorslee, Oakengates, Ketley, Leegomery, Hadley, Hortonwood, Trench, Donnington, Wrockwardine Wood)
- Newport and the rural area of north Telford.

Local involvement networks were set up in 2008. They will be replaced throughout the country by new local organisations known as Healthwatch from 1 April 2013.

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## Introduction

Over the last four years the LINK has concentrated its resources on giving the whole community a stronger voice, making sure that the views of local people have been listened to and reflected in the way that health and social care services are planned, commissioned and delivered in Telford and Wrekin. Many examples of the differences that have resulted directly from our activities in 2012 are highlighted in the pages that follow (a fuller list covering the years 2008–2013 can be found in the appendix to this report). You can also read about how we have tackled the specific goals that were identified as priorities at our annual general meeting in June.

However, as a result of the sweeping changes being introduced by the Health and Social Care Act 2012 the LINK will cease to function on 31 March 2013. Its place will be taken by Healthwatch Telford & Wrekin, one of 152 local Healthwatch organisations which will become operational across the whole of England from April 2013. A summary of the LINK's programme of activities from January through to the handover to Healthwatch in April is on page 16.

As this is the final annual report of Telford & Wrekin LINK it is an appropriate time to reflect on what we have done well, and also on what has been less effective. Firstly, the good news. This report contains a long list of changes that have improved services for local people. This goes to the very heart of what LINKs are for. None of this would have been achieved without the contribution of the Central Management Group and the battalion of other volunteers who have supported our work as authorised visitors and community champions. To all of these people I extend a very warm thank you.

A particularly noteworthy success has been Telford & Wrekin Youth LINK, which was initiated in 2011 by Rebecca Dove, the LINK's community engagement worker. The health and care needs of younger people are often not given their due importance by those responsible for providing services and it is of great credit to Youth LINK that it has shone a very bright spotlight on this issue. The LINK's youth development worker, Catherine Pert, has much to be proud of in the work she has done with Youth LINK, along with the members of the group. All of this work will need to be continued by the local Healthwatch, and I very much hope that it can be built on to provide the residents of Telford and Wrekin with an even better service.

So what are some of the things we have not done well? The LINK depends on the motivation, goodwill and energy of its volunteers but when local involvement networks were first launched across the country there was no national publicity drive to tell the public about the scheme. I have a particular regret that there is very little knowledge about the LINK among local people — and in this regard I regret that the public of Telford and Wrekin is not well-served by its local press: neither the *Shropshire Star* nor the *Telford Journal* have seen fit to cover meetings of local health and social care bodies in recent years (apart from the occasional hospital board meeting) and because of this the public are much the poorer in their knowledge about what is done on their behalf. This lack of awareness is not confined to the general public: at a recent meeting with over 20 representatives from a local NHS provider fewer than one-third of those present said they had “a working knowledge of LINKs”.

Another area in which we have been less than successful has been in engaging the harder-to-reach members of our community, particularly those from the black and ethnic minority communities. Again, this is an issue which will need to be considered by Telford & Wrekin Healthwatch.

Finally I would like to express my personal thanks and those of the Central Management Group to the host team for all their support and hard work over the years: we would not have achieved what we have done without them. We wish them well for the future wherever they, and we, may be.

Dag Saunders  
Chair, Telford & Wrekin LINK

### **For more information**

If you have any questions about the LINK's activities over the last four years we would be pleased to hear from you (our contact details are on page 18). And if you are interested in becoming a community champion or taking part in surveys or focus groups — or you are a local organisation with an interest in improving health or social care services — please do email, call or write to us and we will ensure that your contact details are given to Healthwatch Telford & Wrekin.

## The differences made to local services by the LINK in 2012 — a summary

Some of the differences made in the last nine months as a direct result of Telford & Wrekin LINK's activities include:

- ✓ **a review of staffing levels and procedures at the Princess Royal Hospital.** Additional improvements included the replacement of worn carpets and a new bed for birthing partners, and the refurbishment of the outdoor play area used by young in-patients. All of this resulted from visits undertaken on our behalf by lay visitors.
- ✓ **improvements to residents' welfare at two care homes.** Trip hazards identified during a visit to one care home were rectified. At another home an activity co-ordinator was appointed after we expressed concern that the activities being provided were insufficient to meet the residents' needs.
- ✓ **better information for blind and partially sighted patients at Shrewsbury and Telford Hospital NHS Trust.** The trust has committed itself to providing information for blind and partially sighted patients in their preferred format. This will ensure that patients who are visually impaired do not have to rely on family, friends or colleagues to read their personal correspondence about appointments or test results.
- ✓ **improvements to the signage at the Redwoods Centre, the new acute psychiatric hospital.** South Staffordshire and Shropshire Healthcare NHS Foundation Trust has agreed to display more prominently the availability of hearing loops for use by patients and visitors who are hard of hearing. On the wards, beds have been repositioned to ensure that patients can more easily reach the alert buzzers when they require assistance.
- ✓ **establishing new patient participation groups at 16 medical practices.** These groups have carried out surveys and held focus groups to help identify priorities based on patient feedback. Patient representatives from 20 medical practices across Telford have also started meeting to share ideas about how they can work together to improve access to health care.
- ✓ **helping mental health service users to identify changes needed to improve the quality of care they receive from their doctor, the hospital and community mental health services.** The LINK is ensuring that the agreement to address the issues raised at a meeting arranged by service users with the commissioner, the main service provider and the local MP are implemented by early summer 2013.

In addition, young people involved in Youth LINK have helped to evaluate the tenders for the provision of sexual health services in Shropshire and Telford and advised a number of commissioners and service providers about the barriers that prevent access to out-of-hours care. They also took part in the 'round table' of service users which acts as a sounding board for the newly-formed Clinical Commissioning Group.

## The LINK's priorities for 2012/13

At its annual general meeting on 21 June 2012 the following six issues were endorsed as the key priorities for Telford & Wrekin LINK in 2012:

- Priority 1: Countdown to local Healthwatch
  - Priority 2: Youth LINK
  - Priority 3: Patient participation
  - Priority 4: Donnington VOICE
  - Priority 5: Adult social care
  - Priority 6: Using the LINK's statutory powers to scrutinise local health and adult social care services
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### Priority 1: Countdown to local Healthwatch

To raise public awareness of the forthcoming changes to the way that patients and carers can influence the way that health and social care is planned, commissioned and delivered.

Between April–December 2012 the LINK:

- worked with Telford & Wrekin Council and NHS Telford & Wrekin to raise public awareness of the changes taking place nationally, regionally and locally
- provided information on the passage of the Health and Social Care Bill through Parliament to individuals and local organisations, including the Voluntary Sector Partnership Board
- contributed to a stakeholder event and two workshops on the tendering process for local Healthwatch
- represented West Midlands LINKs on the executive committee of the National Association of LINKs Members, the Healthwatch Transformation Board and the Department of Health Programme Board for Local Healthwatch
- invited Dr Michael Innes, a local GP and chair of the Clinical Commissioning Group, to make a presentation entitled "Changing the face of healthcare in Telford and Wrekin" at our annual general meeting
- co-hosted a workshop about the importance of Parliamentary democracy and citizen engagement in decision-making which was attended by David Wright MP.

### The difference we made

The LINK has helped to achieve a more effective transition from LINK to local Healthwatch by:

- making the civil servants involved in drafting the legislation more aware of the needs and aspirations of patients and service users (as a consequence of which Dag Saunders, chair of the LINK, has been appointed as one of only three patient representatives on Healthwatch England)
- using our experience and insight to shape the specification for the local Healthwatch service.

## **Priority 2: Youth LINK**

To investigate what young people think about local healthcare services. (This work is being supported by the National Children's Bureau, which was commissioned by the Department of Health to help 15 Healthwatch 'pathfinders' in England to develop good practice.)

Between April–December 2012 Youth LINK:

- used the character of 'Sherlock Bones: Health Detective' to engage with young people to help them identify issues with healthcare services and assist him in 'cracking the case'
- ran a 'world café' event at Hadley Learning Centre in which 20 young people took part
- presented the findings of the out-of-hours care survey to the Urgent Care Network
- evaluated the appropriateness of literature provided by the NHS, the local authority and voluntary organisations to inform young people about the services available locally
- organised a stall in Telford town centre to promote awareness of World Mental Health Day. This led to 42 young people taking part in a survey about mental health needs and their experiences of using local health services
- helped to evaluate the tenders for the provision of sexual health services in Shropshire and Telford.

### **The difference we made**

By encouraging young people to speak up about healthcare, Youth LINK was able to influence decisions being made by commissioners in areas such as the provision of sexual health services. It also focused attention on the prevalence of self-harm among young people revealed by the mental health survey, which found that:

- 40.5 per cent of young people agreed that self-harm has become more accepted in schools as "something everybody does"
- 78.6 per cent know a young person who has self-harmed
- 40.5 per cent know a young person who is depressed.

Youth LINK has started to discuss these issues with the commissioner for mental health services and will examine them further at the workshops that are being held in February 2013 with the National Children's Bureau.

Youth LINK also raised awareness of the role played by young people in translating complex health information for members of their family who do not speak English. This prompted the primary care trust to remind all local health professionals of the translation services available for producing correspondence in Polish and other languages.

Youth LINK's success in engaging their peers in discussions on out-of-hours urgent care and mental health services was acknowledged by an award from the Telford & Wrekin Council for Customer Service.

As a result of Youth LINK's activities young people are more knowledgeable about service planning and procurement, and commissioners are more likely to involve them in service reviews or decision-making in the future.

### Priority 3: Patient participation

To encourage the local community to get involved in the patient participation groups (PPGs) being set up by medical practices in Telford so that everyone has an opportunity to influence the quality of healthcare provision locally.

Between April–December 2012 the LINK:

- worked closely with the primary care trust to support the patient groups that have been set up by 22 medical practices in Telford
- worked closely with seven practices (Donnington, Hadley, Ironbridge, Limes Walk (Oakengates), Sutton Hill, Wellington, and Woodside) which were keen to develop activities with wider groups of service users within their localities
- introduced health outreach workers from the Community Health Enterprise Centre to patient representatives and practice managers
- worked in partnership with Telford MIND to evaluate how well services in community and acute settings are meeting the needs of people with a range of mental health conditions
- organised two events for representatives from each of the 22 PPGs to help them identify issues of common interest to inform and influence the priorities of the Clinical Commissioning Group.

#### The difference we made

At **Donnington Medical Practice** people with long-term conditions such as diabetes and heart and respiratory problems, as well as the parents of children with autism and Asperger syndrome, were encouraged by the PPG to take part in the health forum and identify services where improvements are needed. The commissioners and service providers who attended these meetings described them as “invaluable”.

At **Ironbridge** the PPG persuaded more people to come forward to help distribute a patient survey in the community, thereby reaching more people than previous attempts which had relied on a ‘virtual’ patient group that could only be accessed online. The **Limes Walk** PPG has championed the provision of health information in different languages and supported calls for a dedicated clinic for young people.

At **Sutton Hill** the need for improvements to the quality of care provided for people with mental health conditions by all health services were raised with the commissioner by service users from across Telford. This resulted in a commitment to review the services provided by the crisis team and care ‘pathways’ with family doctors, the out-of-hours service (Shropdoc) and the crisis and home treatment teams based at Castle Lodge, as well as the providers of acute services at the Redwoods Centre, the aim being to establish a more seamless service.

At **Wellington** the PPG made the practice aware of local expertise in arts therapy for people with dementia. This led to the commissioner agreeing to fund a trial project in the area.

At **Woodside** the PPG organised an event with the Alzheimer’s Society to raise awareness of dementia and to encourage more local people to seek diagnosis and support. It has also recruited new patients’ representatives from a range of diverse and vulnerable groups.

## **Priority 4: Donnington VOICE**

To provide an opportunity for everyone who lives in Donnington and Donnington Wood to have a say about their community and become a community health champion.

Between April–December 2012 the LINK:

- established a local steering group to oversee the way the project is run
- started to collect information about the needs and aspirations of the local community through events, focus groups, social media and surveys
- encouraged local people who would like to ‘speak up’ for Donnington to take part in the Community Development and Health Course run by Telford College
- set up the Donnington Health Forum to provide a regular opportunity for local people to share their experiences of managing long-term conditions with commissioners and providers
- organised an event in partnership with Donnington Medical Practice and its PPG for around 30 people with neurological and rheumatoid conditions. This was attended by representatives from the Rheumatoid Arthritis Group, STABLE (Supporting Those Affected By Lifelong Epilepsy), Brainwave, the Patient Advice and Liaison Service, the Telford & Wrekin Health Improvement Team, Impact Alcohol Advisory Service, the West Mercia Ambulance Service, and the Red Cross Help-at-Home scheme
- hosted a lunch event for 12 people with diabetes at which Diabetes UK (Telford branch) contributed valuable information about managing the condition and staying healthy, and a podiatrist provided practical advice about diabetic foot care
- invited the parents of children with autism to identify services that work well — and those that need to improve — at a session on autism and Asperger syndrome which was presented by Autonomy, a local organisation. The commissioner for mental health services also took part in the discussion.

### **The difference we made**

As a result of their involvement with Donnington VOICE a number of local residents have become more involved in the PPG and have helped to devise questions for the annual patient survey. Several others have become involved with Diabetes UK.

Members of the local community are planning four events in Donnington in February and March to provide further opportunities to influence the way local services are delivered.

## **Priority 5: Adult social care**

To produce a response to the government's White Paper on the future of adult social care that is informed by what is best for the people of Telford and Wrekin.

Between April–December 2012 the LINK:

- submitted a joint response to the Department of Health consultation on the draft Care and Support Bill, taking into account feedback from partner organisations including Listen not Label and the Mental Health Forum
- responded to Telford & Wrekin Council's first Quality Account for adult social care
- worked closely with Listen not Label, Taking Part, the Red Cross and Age UK to help develop the Telford & Wrekin Mental Health and Wellbeing Commissioning Strategy Action Plan 2010–2015
- helped to develop the draft policy for the joint self-assessment validation process of services for adults with learning disabilities (which will be subject to public consultation in 2013)
- helped to organise a celebration of World Mental Health Day based on the theme of 'investing in mental health' in collaboration with Listen not Label, the mental health trust, and other statutory and voluntary sector service providers throughout Telford and Wrekin.

### **The difference we made**

The importance of the local knowledge and expertise that local voluntary organisations bring to service delivery has been reflected in the development of an 'outcomes-based' commissioning framework. Service users are also being involved in designing the new statutory framework for adult safeguarding and this has enabled them to draw attention to the lack of regulation and scrutiny in relation to domiciliary care.

Responding to concerns that not everyone has access to the internet the LINK has successfully lobbied health and social care organisations to make information and advice more readily available in supermarkets, libraries and GP surgeries, which is essential if vulnerable people are to exercise choice and control over their care. Information about the welfare reforms is now being routinely provided to advocacy organisations enabling them to 'cascade' the information to service users.

Involving service users with learning disabilities or mental health conditions in the planning and design of local services — using 'No health without mental health' as a mantra to help prevent stigma and discrimination — is increasingly becoming the norm.

## **Priority 6: Using the LINK's statutory powers to scrutinise local health and adult social care services**

To visit premises where health and social care services are delivered, especially hospitals and care homes. To comment on the Quality Accounts published by the acute, community and mental health provider trusts. To seek information from commissioners and providers to enable the LINK to scrutinise health and social care services, and to promote diversity of representation and equality of access.

Between April–December 2012 the LINK used its statutory powers:

- to formally comment on the draft Quality Accounts published by the three NHS trusts that provide acute, community and mental health services in our area: Shrewsbury and Telford Hospital Trust, South Staffordshire and Shropshire Healthcare NHS Foundation Trust and Shropshire Community Health NHS Trust
- to make a total of 24 visits to premises where health and social care services are delivered:
  - 12 visits to the Royal Shrewsbury Hospital to meet patients receiving general medical care as well as specialist support for diabetes, vascular and urological conditions, and intensive care and rehabilitation. We also visited the maternity and medical assessment units and wards providing gynaecological treatments, colorectal surgery, and chemotherapy (see table 1 on page 14)
  - eight visits to the Princess Royal Hospital to ask patients with heart disease or breathing problems, or who have had a stroke, about their experience of the quality of care. We also visited the Paul Brown Day Hospital, which provides rehabilitation, and the accident and emergency department (see table 2)
  - four visits to residential and nursing homes: St George's and Lake View in Telford, and Bowbrook House and Lymehurst in Shrewsbury (see table 3).

Seven of the visits were undertaken jointly with authorised representatives of Shropshire County LINK. Only nine of the 24 visits were announced in advance. Around half the visits were to wards and premises not previously visited; the remainder were repeat visits to check that issues identified as needing attention on earlier visits had actually been addressed.

As well as using its statutory powers to enter and view premises the LINK contributed to providers' quality assurance systems by providing independent scrutiny of their services. Two LINK representatives who sit on the Patient Experience and Involvement Panel took part in a number of patient-led assessments of the care environment, which led to immediate action being taken to address the issues they identified. A LINK representative was also invited to provide the 'patient perspective' in the annual Patient Environment Assessment Team inspection.

LINK representatives also acted as independent lay observers in the Essential Standards Reviews which are carried out by staff and governor members of the South Staffordshire and Shropshire Healthcare NHS Foundation Trust. In 2012 they visited Elm House and the Redwoods Centre where they met patients on Holly ward, which provides assessment and care for people with dementia (see table 4). Six weeks after the opening of the Redwoods Centre (which has replaced Shelton Hospital as the acute in-patient facility for people from Shropshire, Telford and

Powys) they requested a tour of the premises to familiarise themselves with the layout and the services provided there.

### **The difference we made**

The LINK's comments on the three sets of Quality Accounts emphasised the need for more comprehensive information about the range of services available locally, and requested that future reports contain less jargon. We also asked the three trusts to ensure that patients and service users are able to become more involved in determining their care plans.

In 2012/13 the LINK's activities led to a number of notable improvements to patient safety, staffing levels and the overall quality of care. The most noteworthy of these are highlighted on page 6.

Concerns raised by the LINK about the acoustics at the Redwoods Centre remain under investigation but the mental health trust has given a commitment that these will be satisfactorily addressed.

## **LINK representation on national, regional and local strategic forums in 2012/13**

### **National strategic forums**

- National Association of LINKs Members National Executive
- Department of Health Healthwatch Programme Board

### **Regional strategic forums**

- Strategic Health Authority Patient Revolution
- West Midlands Trauma Network

### **Local strategic forums**

- Telford & Wrekin Council Health Scrutiny Committee
- Joint Local Authority and NHS Health and Wellbeing Board
- Shrewsbury and Telford Hospital NHS Trust Patient Experience and Involvement Panel
- Shrewsbury and Telford Hospital NHS Trust Stakeholder Conferences
- Urgent Care Stakeholder Network
- Mental Health Provider Forum
- Mental Health Commissioning Board
- South Staffordshire and Shropshire Healthcare NHS Foundation Trust Community Engagement Forum
- Shropshire Community Health NHS Trust stakeholder events (patient participation in the organisation's plans to become a foundation trust)
- Telford Clinical Commissioning Group Patients' Roundtable
- Telford Referral and Quality Service pilot programme.

**Table 1. Visits to the Royal Shrewsbury Hospital in 2012**

Date of visit	Ward number	Ward name	Announced?	Shropshire County LINK
02.03.12	21	Chemotherapy	No	
02.03.12	25	Colorectal	No	
12.03.12	19	Maternity (antenatal)	Yes	
12.03.12	20	Maternity (delivery)	Yes	
10.04.12		Coronary care	Yes	✓
10.04.12	32	Gynaecology	No	✓
07.05.12	22E	Diabetes/general medical	Yes	
07.05.12	25	Colorectal	No	
22.05.12	26	Vascular/urology	No	
22.05.12	22S	Rehabilitation/complex discharge	Yes	
21.11.12		Intensive care area	No	✓
21.11.12	19	Maternity (antenatal)	No	✓
21.11.12	20	Maternity (delivery)	No	✓

**Table 2. Visits to the Princess Royal Hospital in 2012**

Date of visit	Ward number	Ward name	Announced?	Shropshire County LINK
07.03.12	15	Elderly care	No	
07.03.12	6	Coronary care	No	
12.04.12	4	Stroke care	No	
12.04.12		Paul Brown Day Hospital	Yes	
14.05.12		Accident and emergency	Yes	
24.05.12	6	Coronary care	Yes	
24.05.12	9	Respiratory medicine	No	

**Table 3. Visits to residential care and nursing homes in 2012**

Date of visit	Name of home	Announced?	Shropshire County LINK
14.08.12	Lymehurst	No	✓
27.09.12	Bowbrook	No	✓
16.11.12	St George's	Yes	
13.12.12	Lakeview	No	

**Table 4. Other visits (not using statutory powers)**

Date of visit	Name of premises	Announced?	
21.06.12	Elms House	No	Essential standards review with SSSFT
07.11.12	Redwoods Centre	Yes	Tour of new facilities
06.12.12	Redwoods Centre	No	Essential standards review with SSSFT
Various dates	Royal Shrewsbury Hospital Princess Royal Hospital		Patient-led assessment of the care environment inspections

## **Other issues the LINK maintained an interest in during 2012/13**

### **The reconfiguration of mental health and acute hospital services**

Between April–December 2012 the LINK:

- monitored the modernisation of mental health services by seeking feedback from service users and carers about the quality of care being provided in the community and the capacity of the acute psychiatric in-patient facilities at the Redwoods Centre and Castle Lodge (the community psychiatric in-patient facility) [Note. The LINK's scrutiny has led to the service commissioner being required formally to explain the delays in the implementation of the Next Steps strategy which had been subject to public consultation in 2010. It had been agreed that there would be a mid-term review of the roll-out of the service in summer 2013.]
- called the mental health trust and the commissioner to account for failings in the design of the new Redwoods Centre which have led to excessive noise levels throughout the premises
- provided the 'patient perspective' at a number of strategic forums, including the acute trust's Patient Experience and Involvement Panel, the patient and community forum established by South Staffordshire and Shropshire Healthcare NHS Foundation Trust, the Shropshire Community Health NHS Trust stakeholder event, and the Joint Local Authority and NHS Health and Wellbeing Board
- reminded the trust of the commitment given by the chief executive during the consultation in 2010/11 to ensure improved access to the two hospital sites for users of public transport.

### **Children's health and wellbeing, especially those with disabilities**

Between April–December 2012 the LINK:

- worked closely with local voluntary organisation Parents Opening Doors to raise awareness of the needs of families caring for children with disabilities
- organised an event on autism and Asperger syndrome which enabled parents to meet with the commissioner as part of the Donnington VOICE Health Forum.

### **Hospital discharge arrangements**

Between April–December 2012 the LINK:

- worked with Telford Senior Citizens' Forum to collect the first-hand experiences of discharge arrangements from 150 elderly patients and their families. These findings formed the basis for recommendations for improvements which will be presented to commissioners and providers in spring 2013.

### **The Mid Staffordshire Hospital Public Inquiry**

Between April–December 2012 the LINK:

- continually reminded statutory bodies about the importance of involving patients, service users and their carers in decision-making, especially in regard to patient safety and quality assurance issues.

## **The Equality Delivery System**

Between April–December 2012 the LINK:

- helped to evaluate the extent of compliance with the Equality Act by NHS organisations using qualitative and quantitative data
- represented patients, service users and carers on the Joint Shropshire and Telford Primary Care Trust Equality Delivery System Steering Group
- helped in the planning of events to raise awareness of the Equality Act so that community and voluntary organisations can help NHS organisations to identify priorities and monitor outcomes.

## **Accessible information**

Between April–December 2012 the LINK:

- supported the West Telford Visually Impaired Group's request for correspondence from the Ophthalmology and Patient Access Centre to be made available in the format preferred by individual blind and partially-sighted patients.

## **The LINK's workplan for January–March 2013**

Telford & Wrekin LINK will cease to function on 31 March. Despite this we have a very full programme of activities planned for January, February and March, including:

- visiting premises where healthcare or adult social care is provided, including the Lake View residential care home in Telford, Castle Lodge community mental in-patient health unit, and the accident and emergency department at the Princess Royal Hospital
- continuing to support the work of practice-based patient participation groups
- organising two health forums in Donnington about: (1) inequalities in health outcomes, and (2) improving access to health services for young people
- taking part in two workshops with the National Children's Bureau to underline the importance of the participation of patients and service users in improving the quality and safety of services
- organising a series of conferences on access to health services for young people that will be run by Youth LINK
- raising awareness of the new 111 service for access to non-urgent care that will be introduced nationally in March 2013
- preparing commentaries on the Quality Accounts that will be published by all local NHS service providers in the early summer.

We will also be supporting the transition from the LINK to Healthwatch by producing a series of 'LINK legacy' documents to ensure that the knowledge, expertise and insights gained since 2008 are not lost. These will include a patient participation 'toolkit' containing advice on running a health forum, influencing commissioners and providers, methods for involving people, monitoring and evaluation, and how to deal with equality, diversity and cultural awareness issues.

## LINK membership 2012/13

### Central Management Group (elected members)

Trevor Dickenson (until August 2012)	Lilian Owens
David Edwards	Lorraine Parkes
Muriel Fellows	Dag Saunders (chair)
Anthony Glover	Richard Shaw
Jean Gulliver (vice-chair)	Jayne Stevens
Tina Jones	Gaynor Stevens
Tanya Love (from September 2012)	Derek Tremayne
Julie Mellor (from September 2012)	Martyn Withnall (until October 2012)

### Authorised representatives

Christine Alford	Gwen James
Brian Begley	Sue Jenkins
Jacky Bowyer	Lilian Owens
Christine Choudhary	Lorraine Parkes
Annette Deakin	Gaynor Stevens
Hayley Dyson	Gerry Stokes-Harrison
Muriel Fellows	Audrey Thompson
Anthony Glover	Derek Tremayne
Jean Gulliver	Ken Whitcombe
Jo Havell	Paula Whitcombe

### Community champions

Belinda Ezeazu	Jenny Shaw
Joy Lilley	Ken Whitcombe
Natasha Rocket	Paula Whitcombe

### In memoriam

**Trevor Dickenson** — Trevor died in hospital on Friday 3 August 2012 following a cardiac arrest a few days earlier. A member of the Central Management Group since May 2011 and chair of the Patient Participation Steering Group since January 2012, Trevor was also chair of the Shropshire Disability Network.

**Caroline Bond** — Caroline died in mid-July 2012 as a result of complications following a stroke. Caroline was an authorised representative of Shropshire County LINK who had taken part in several joint visits to health and social care premises organised jointly with Telford & Wrekin LINK.

## **The host organisation**

Telford & Wrekin Council has been the LINK's host organisation since April 2012 following Staffordshire University's decision not to seek an extension to its contract to provide support services.

## **The hosting service**

In 2012/13 the LINK's support services have been provided by:

- Linda Seru, director of the hosting service
- Rebecca Dove, project manager for patient participation
- Catherine Pert, administrator and Youth LINK development officer
- David Hayes, systems administrator
- Leah Tirmizi, project manager for Donnington VOICE (until December 2012 after which this role has been shared between Catherine and Rebecca)

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## Appendix

### The impact of Telford & Wrekin LINK's activities, 2008–2012

#### 2008

**What we did:** Shropdoc survey

**The benefit:** Home visits to patients who are unable to attend the accident and emergency department or Shropdoc's centre at the Princess Royal Hospital were agreed as a 'variation' to the out-of-hours care contract

**Outcome:** Improved patient care and safety

#### 2010

**What we did:** Visit to the Royal Shrewsbury Hospital maternity unit

**The benefit:** Women staying on the maternity unit at the Royal Shrewsbury Hospital had a more pleasant stay because a redecoration programme was agreed following feedback from patients. Safety cords were replaced with the correct colour-coding

**Outcome:** Improved patient care and safety

**What we did:** LINK survey

**The benefit:** Clearer information was provided about the reconfiguration of hospital services when feedback indicated the public's limited awareness of the changes being proposed

**Outcome:** Improved information for patients

**What we did:** Use of the LINK's statutory powers and referral to the Overview and Scrutiny Committee

**The benefit:** Following the closure of Lime Ward a commitment was given by South Staffordshire and Shropshire Healthcare NHS Foundation Trust that patients, their families and their advocates would be consulted before action was taken in future

**Outcome:** Stronger patient voice

**What we did:** Patient survey of renal services

**The benefit:** Patients with kidney conditions were given improved access to counselling at the Hamar Centre at the Royal Shrewsbury Hospital. A newsletter was produced for patients receiving dialysis and their families, and information was provided about the support available from voluntary organisations

**Outcome:** Patient choice and improved care

**What we did:** **NHS Telford & Wrekin pharmaceutical needs assessment**

**The benefit:** Details of what the local community would like local chemists to provide contributed to the planning and commissioning process

**Outcome:** Service planning and improvement

**What we did:** **NHS Telford & Wrekin cataract survey**

**The benefit:** Feedback from people with experience of the cataract service was used to inform the primary care trust's ophthalmology review and led to enhanced care and support. Blind and partially-sighted patients supported the proposal to relocate to Euston House

**Outcome:** Service planning and improvement

**What we did:** **Care Quality Commission review of adult social care**

**The benefit:** Service users highlighted the need for more information about the introduction of personal budgets and other changes in social care when they met the Care Quality Commission inspectors

**Outcome:** Improved information and communication

**What we did:** **'Big changes to the NHS' LINK roadshow**

**The benefit:** Local people contributed to a national consultation about equity and excellence (the health White Paper) when the LINK roadshow visited local shopping centres, community centres and libraries. The chief executive of the primary care trust, the chief officer of Age Concern and a family doctor answered queries raised at a 'Question Time'-style event organised by the LINK to raise awareness of the changes being proposed

**Outcome:** Stronger patient voice

## **2011**

**What we did:** **Visit to Ward 15 at Princess Royal Hospital**

**The benefit:** Unacceptable nursing practices identified by LINK visitors led to a safeguarding review and an increase in staff numbers, including a 'modern matron' and new ward manager appointed to oversee improvements to the quality of care

**Outcome:** Improved patient care and safety

**What we did:** **Supported West Telford Visual Impairment Group campaign**

**The benefit:** Telford's first eye clinic liaison officer was appointed to provide early intervention and support for individuals when registering as blind

**Outcome:** Improved patient care

**What we did:** **Shrewsbury and Telford Hospitals reconfiguration review**

**The benefit:** A patient representative ensured a more balanced approach — without LINK's contribution the sole perspective of the review would have been clinical

**Outcome:** Stronger patient voice

**What we did:** **Youth LINK unscheduled care survey**

**The benefit:** The Unscheduled Urgent Care Stakeholder Group took the experiences of young people into account when planning improvements to out-of-hours care services

**Outcome:** Improved service planning

**What we did:** **Attendance at NHS Telford & Wrekin board meetings**

**The benefit:** Greater openness and transparency in decision-making as a result of the LINK challenging the rationale for so many reports not being discussed in the public sessions of board meetings

**Outcome:** Stronger patient voice

## 2012

**What we did:** **Feedback about the quality of care on Ward 26 at the Royal Shrewsbury Hospital**

**The benefit:** Additional drip stands were purchased to replace the makeshift equipment being used. Staff were reminded to make diabetic patients aware of the availability of snack packs

**Outcome:** Improved patient care and safety, dignity and respect

**What we did:** **Involvement in new-build project at the Royal Shrewsbury Hospital**

**The benefit:** Patients with impaired mobility or a visual impairment who use the new Lingen Davies cancer unit have benefited from improved accessibility due to design suggestions made by LINK representatives

**Outcome:** Improved service planning

**What we did:** **Supported the establishment of patient participation groups**

**The benefit:** Eighteen medical practices set up patient participation groups in 2012 taking the total number of active PPGs in Telford to 22. They have carried out surveys and published action plans based on priorities identified by patients

**Outcome:** Stronger patient voice and improved service planning

- What we did:** Visit to the Princess Royal Hospital maternity ward
- The benefit:** Increased staffing at night. New mattress for bed in partners' room
- Outcome:** Improved patient care and safety. Improved support for carers
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- What we did:** Shrewsbury and Telford Hospital NHS Trust Patient Experience and Involvement Panel
- The benefit:** Recommendations from the Patient Environmental Assessment Team mini-inspections at the Royal Shrewsbury Hospital and the Princess Royal Hospital in which LINK members have been involved have resulted in 'on-the-spot' improvements in cleanliness and care
- Outcome:** Improved patient care and safety
- 
- What we did:** Walking the wards with a commissioner
- The benefit:** The play area at the Princess Royal Hospital was refurbished when it was identified as being not fit for purpose by a LINK member taking part in the 'walk the wards' initiative
- Outcome:** Improved patient care and safety
- 
- What we did:** Raised awareness of Parliamentary democracy
- The benefit:** Fifteen local people attended a session run by a LINK community champion on ways of influencing Parliament
- Outcome:** Stronger patient voice
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- What we did:** Involvement in the Telford Referral and Quality Service pilot scheme
- The benefit:** The LINK provided the 'informed patient voice' to assist in the introduction of a streamlined assessment scheme by local GPs to support patients who need a specialist referral
- Outcome:** Improved patient care and safety, and improved service planning
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- What we did:** Donnington VOICE
- The benefit:** Improvements identified in meetings with commissioners at the Donnington health forums by people with diabetes, other long-term conditions and autism will improve service planning and delivery
- Outcome:** Stronger patient voice

## 2013

**What we did: West Telford Visual Impairment Group campaign**

**The benefit:** As a direct result of support for the campaign from the LINK's community champions appointment letters will in future be issued in the format preferred by blind and partially sighted patients

**Outcome:** Patient choice and dignity

**What we did: Patient participation in GP surgeries**

**The benefit:** The involvement of a broad cross-section of patients in patient participation groups has led to the needs and wants of the community being prioritised in the action plans of medical practices

**Outcome:** Stronger patient voice

**What we did: Visits to social care premises**

**The benefit:** An activities co-ordinator has been appointed by the Lake View Care Home. St George's Residential and Nursing Home has improved the presentation of its activity programme to residents and families

**Outcome:** Service user choice and enhanced support

**What we did: Joint inspections of the hospital wards**

**The benefit:** Improvements to seating and signage in the outpatient ward

**What we did: Visits to hospital premises**

**The benefit:** Staffing levels and the way that care is provided on the maternity ward at the Royal Shrewsbury Hospital have been reviewed as a direct result of feedback given to LINK visitors by patients. New furniture and equipment have improved the comfort and safety of patients. Training for consultants and nurses who look after patients with dementia has been introduced. Staff are more aware of the signs of potential abuse and the use of safeguarding procedures

**Outcome:** Patient care and safety, dignity and respect

**What we did: Youth LINK activity**

**The benefit:** Sherlock Bones: Health Detective has helped eight young people to gather evidence from other young people about their experiences of local healthcare services, including out-of-hours care, family doctors, mental health and sexual health services

**Outcome:** Stronger patient voice

**What we did: Youth LINK activity**

**The benefit:** Three members of Youth LINK sat on the evaluation panel for the tender to provide sexual health services in Shropshire, Telford and Wrekin

**Outcome:** Stronger patient voice

**What we did: Youth LINK activity**

**The benefit:** Forty-three young people took part in a survey about mental health and self-harm, the findings of which were given to the commissioner for mental health and children's services

**Outcome:** Improved service planning

**What we did: Youth LINK activity**

**The benefit:** The Youth LINK representative on the Clinical Commissioning Group's PPG raised the issue of the needs of the Polish community to receive health information in their own language. As a result, the primary care trust issued a reminder to all medical practices about the translation service that is available for producing letters and reports in all the languages spoken in the local community

**Outcome:** Improved patient care and safety, dignity and respect, and improved service planning