

Statement from Healthwatch Birmingham on Birmingham Women's and Children's Hospital NHS Foundation Trust Quality Account 2021/22

Healthwatch Birmingham and Healthwatch Solihull welcome the opportunity to provide our statement on the 2021/22 Quality Account for Birmingham Women's and Children's NHS Foundation Trust. We welcome that the Trust has been clear in its assessment of its position, in particular the areas where it has performed well and areas needing further improvement. We acknowledge that Covid-19 continues to have a significant impact on the Trusts activities and on how the Trust delivers its services. We agree that prioritising patients on the waiting list correctly is crucial as this has an impact on patients' wellbeing and outcomes. Indeed, the experiences we have heard point to concerns about long waits and the impact these have had on service users. We are pleased to see that the Trust has carried out a risk assessment for those on the waiting list to aid prioritisation and activity levels have been increased where needed.

We welcome the work that the Trust has carried out over the past year to meet the priorities set. In particular, we are pleased to see the following developments under patient experience:

- the development and the launch of the Trusts patient experience framework for 2022 -2024;
- co-production with children to improve their navigation through wards and departments; and
- piloting of the cultural competencies programme.

Over the past year we have worked with the Trust on various activities to support the Trust in its patient experience and engagement activities. Especially, in ensuring a focus on amplifying the voice of patients, carers and families whose views and insights are seldom heard in healthcare. We are pleased to have worked with the Trust in recruiting their new Patient and Families Ambassador for inclusion and diversity that will ensure that the service is responsive to all patient and family's needs.

Over the past year, Healthwatch Birmingham shared the findings of its study into children and young people's access to FTB services. We are pleased with how responsive the Trust has been to these findings and how it has engaged with young people to work on the improvements needed. We note the various activities that have taken place to improve FTB services including investment to enable the expansion of capacity within the services (e.g., ADHD, urgent care, referral management centre). The demand for mental health services has grown over the past few years as the impact of the pandemic on people's mental health has become more evident. With many calling Healthwatch Birmingham's information and signposting line for information on how to access mental health services. We are pleased to see the launch of a Quality Improvement project to look at alternatives following the identification of challenges brought on by the growth in





non-face-to-face contacts. Whilst we appreciate the Trusts focus on the impact of non-face-to-face contact on prescriptions and medicines, we believe the focus of the review should be wider than that.

Over the year, Healthwatch Birmingham has received insight about people's experience of accessing the service and receiving care using non-face-to-face contact (e.g., through telephone, video calls etc). The use of non-face-to-face contact for citizens to enhance their use of health and care services is a good thing. However, the experiences we hear demonstrate that use of these have a real potential to lead to health inequality. For people with sensory disabilities or those for whom English is not their first language, the use of non-face-to-face contact can be both enabling and a barrier to accessing services. On the other hand, NHS Digital observes that one in ten people in England lacks basic digital skills and nearly six million people have never used the internet. Therefore, the number of people digitally excluded is significant and needs to be taken into account when looking for alternative options. We would like to read in the 2022/23 Quality Account how the Trust has taken these issues into account in the Quality Improvement project alongside issues of prescriptions and medicines. Healthwatch Birmingham would like to see varied methods of engaging and enabling access to health care.

We note the transformative work that the Trust is carrying out for FTB services to improve pathways into the service. Healthwatch Birmingham looks forward to supporting the Trust in this work and we would like to read the improvements this has made in triaging children and young people effectively in the 2022/23 Quality Account.

In regard to patient experience, we note that improvements are needed in FFT response rates, especially for FTB who saw the highest drop in response rates from 96 in January 2022 to 19 in March 2022. Similarly, the Women's hospital has also seen a drop-in response rate from 258 in January 2022 to 165 in March 2022. However, we welcome that the Trust is collecting demographics to aid a deeper dive into the data allowing comparison of experience between different groups. We hope that this will aid the work of the staff more generally but also the Patient and Families Ambassador for inclusion and diversity as they lead on this work. We are also pleased to see that the FFT platform is enabling staff to access real-time feedback that can be shared and used by teams and departments.

We note that communication, clinical treatment and the behaviour of staff continue to be the key themes for FFT, PALS contact, and complaints across the Trust. We believe that the Trust needs to do more work to understand what the underlying concerns are with issues like communication. This would enable the Trust to develop the right interventions to address this.



Healthwatch Birmingham agree with the priorities for the Trust for 2022/23. We recognise many of the issues from our own engagement with the public and we will continue to work with the Trust to support this focus.

Andy Cave

CEO

Healthwatch Birmingham