



**Together we're making  
health and social  
care better**

**Healthwatch Haringey  
Annual Report 2022-2023**

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020 8888 0579



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In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better.”

**Louise Ansari, Healthwatch National Director**

# Message from our Chair

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**Our job is to ensure that the voice of patients is heard by those who make decisions or provide both health care and social care – and to press for change on their behalf.**

Healthwatch is provided by statute in every English county or London Borough, and has existed for almost 10 years now. Our job is to ensure that the voice of patients is heard by those who make decisions or provide both health care and social care – and to press for change on their behalf.

In Haringey we have met this challenge in various ways over the years, but especially by looking at the evidence of inequality in our borough, seeking out those most disadvantaged, and highlighting their needs.

We have continued to do this this year, for example, by exploring the mental health needs of young people, their sexual health care needs, and the particular health concerns of ethnic minority women. This has been important work, which we know is already leading to change, as you will read in this report.

However, as we emerged from the COVID-19 pandemic, it became clear that access to care was a far more generalised problem that it has ever been, and this was nowhere more evident than in the difficulties widely experienced locally in accessing primary care.

locally in accessing primary care. We continued our work to strengthen the Patient Participation Groups (PPG's) in borough, working closely with the Primary Care Networks in Haringey to improve the way in which their practices relate to patients.

Healthwatch has fewer direct means of influencing health and social care strategically, under the new sub-regional Integrated Care System which became a reality this year. The PPG's however, have become a means by which patients can exercise some accountability, and we are pleased at the level of participation now being achieved.

We have also focussed on the importance of research in understanding the unmet needs of patients, especially in the mental health field. We continue to cement our relationship with Middlesex University's Health and Social Care Faculty, and to host its social work students on placement with us.

Once again, we thank the many volunteers who are our eyes and ears in the community, and our highly committed staff, for all their hard work during this busy year.

**Sharon Grant OBE**  
Independent Chair, Healthwatch Haringey

# About us

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Healthwatch Haringey is your local health and social care champion. From Tottenham to Wood Green to Highgate and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



## Our vision

A world where we can all get the health and care we need.



## Our mission

To make sure people's experiences help make health and care better.



## Our values

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

# Our year in review

## Find out how we have engaged and supported people.

### Reaching out



**720 people**

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

**203 people**

came to us for clear advice and information.

### Making a difference to care



We published

**7 reports**

about the improvements people would like to see to health and social care services.

Our most popular report was our

**Long COVID Report**

investigating local people's experiences of Long COVID to identify any gaps in the help they are being offered. The information gathered will support the development of services and system.

### Health and care that works for you



We're lucky to have

**51**

outstanding volunteers, who gave up their time to help improve health and care services for our community.

We're funded by our local authority. In 2022-23 we received

**£152,000**

Which is the same as the previous year.

We also currently employ

**6 staff**

two full time and four part time, who help us carry out this work.

# How we've made a difference throughout the year

These are the biggest projects we worked on from April 2022 to March 2023.

Spring

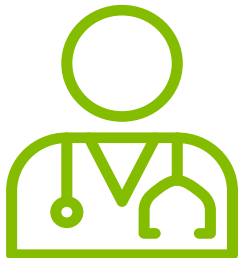


We engaged patients from the Hornsey Wood Green GP Practice, to seek views on a proposed relocation to Wood Green Shopping Centre, as part of the creation of an Integrated Health and Wellbeing Hub. Our May 2022 report summarised patient perspectives on the move, helping plans to move forward in a patient-centric way.



Haringey Patient Participation Group (PPG) Network discussed the role PPGs in the wake of the COVID-19 pandemic. A Clinical Commissioning Group survey had found only 50%, at most, of PPGs were running post-lockdown. Healthwatch engaged GP practices to push for PPGs to be restored more widely.

Summer



We launched our GP registration project, which aims to make it easier for refugees, migrants, people who are homeless, and other vulnerable communities to register with a GP practice. The project will mean more Haringey residents can register with a GP easily; and more Haringey GP practices join the Safe Surgeries Scheme.



Our Experts by Experience (E by E) Mental Health Board continued to meet monthly, exchanging experiences of services related to mental health, and engaging with service providers. It was confirmed that the members would be represented in the new structures established for the North Central London Integrated Care Board.



## Autumn

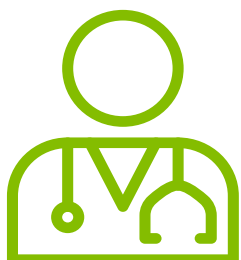


Our report on 'Young People and Mental Health: The Impact of COVID-19 and Lockdowns' showed young people were struggling with the impact and pressures of the pandemic and lockdowns on their mental health and wellbeing.



We were commissioned by the London Ambulance Service (LAS) to inform its five-year strategy development, drawing on local views and experiences through a survey, interviews, an online workshop and interaction with local service user reference groups.

## Winter



North Central London (NCL) Integrated Care System (ICS) commissioned all five local NCL Healthwatch, including Healthwatch Haringey, to deliver a 'Healthy Hearts' hypertension/blood pressure project. This involves Healthwatch Haringey offering and delivering free blood pressure checks to our local communities.



We were commissioned by Haringey Council's public health team to undertake a review of young people's sexual health services. We engaged with young people across the borough, including focus groups with asylum seekers, refugees and new migrants, and visited sexual health clinics and community pharmacies.

# 10 years of improving care

This year marks a special milestone for Healthwatch. Over the last ten years, people have shared their experiences, good and bad, to help improve health and social care. A big thank you to all our Healthwatch Heroes that have stepped up and inspired change. Here are a few of our highlights:

## How have we made care better, together?

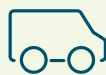
### Vaccine confidence

Our research exploring vaccine confidence with people from different backgrounds provided vital lessons for public health campaigns.



### Patient transport

NHS England announced improvements to non-emergency patient transport services thanks to public feedback.



### NHS dentistry

We continued to voice public concerns that improvements to NHS dentistry are too slow, leaving thousands of people in pain.



### NHS admin

We highlighted the negative impact poor NHS admin can have and recommended five principles for services to improve people's experiences.



### Waiting list support

After we and other organisations called for an urgent response to hospital waiting lists, and better interim communication and support, the NHS set out a recovery plan to address the backlog.



# Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.



# Barriers to GP registration

**Local people told us they found it difficult to register with some Haringey GPs as the reception staff insisted on proof of address or identification. This particularly impacted migrants and people who are affected by homelessness.**

A Haringey Welcome survey in 2019 found “...of 15 GP practices, 10 practices refused to register a patient if they had no formal ID”.

We teamed up with the NHS, Haringey GP Federation, Haringey Council and Haringey Welcome, Doctors of the World and community and voluntary sector organisations to encourage Haringey residents to register with a GP, even if they don't have ID or proof of address.



- We called and visited every Haringey GP practice, 'mystery shopping', to find out if they would register a new patient without proof of address or ID. We will also find out if practices offer an interpreting service and/or helped with completing the registration forms. We logged the amount of time it took to get through on the phone.
- We looked at the findings of other research into barriers to GP registration.
- We produced hard copy leaflets and posters in English and five community languages, letting people know their right to register with a GP.
- We worked with Doctors of the World to facilitate training for GP Practices into becoming a Safe Surgery.
- We sent a letter to all GPs and Practice Managers about the project, which included an offer of training for reception staff and top tips for easier registration. The letter was signed by Healthwatch Haringey; Councillor and Cabinet Member for Health, Social Care and Wellbeing, Haringey GP Federation; Haringey Welcome; North Central London Integrated Care Board (NCL ICB); Director of Public Health, Haringey Council; Doctors of the World UK.
- We provided online briefings for GP surgeries and the Voluntary, Community and Social Enterprise (VCSE) sector on request.
- We produced a report 'Barriers to GP Registration in Haringey' with key findings and recommendations.
- We shared our findings with partners and the wider VCSE.



## Our findings

- In the telephone mystery shopping: 24 out of 39 surgeries required proof of address; 30 out of 39 surgeries required ID
- In the in person mystery shopping: 20 out of 37 surgeries required proof of address; 20 out of 37 surgeries required ID.
- Only 10% of GP surgeries in Haringey told us on the phone they would register a patient without seeking proof of address or ID.

## Our recommendations

- Practices should remove the requirement for ID and proof of address when registering new patients.
- Practices should brief all reception staff regularly that failure to provide documents should not prevent patient registration.
- Practices should consider inviting Healthwatch Haringey to deliver our 30-minute online briefing for practice staff on removing barriers to patient registration.
- Practices should ensure reception staff are aware that immigration status should have no impact on access to GP services, and that anyone in England can register with a GP.
- Practices should assure reception staff that they will not be held personally liable for any consequences of incorrect information being supplied by patients.
- Practices should engage with Doctors of the World with a view to accessing training and becoming a Safe Surgery.
- Practices who are already committed to becoming a Safe Surgery should clearly display posters and leaflets.
- Safe Surgeries should offer new and existing staff regular training and / or reviews to ensure all staff understand their responsibility to remove barriers to registration.
- Reception staff should be made aware of the resources available for translation / interpretation when registering new patients, and should always offer these when requested by a new patient who seeks help with the registration form.
- Practices should ensure through training that all staff are aware the residency questions on the GMS1 form are optional.

- Practices should consider enabling the new 'Register with a GP surgery' system for online registration as a way to make it easier for people without documents to register.
- Practices should ensure through training that all reception staff are aware of the different methods of registration offered at their surgery. Practices who do not offer in-person registration with a hard copy form should consider if this represents a barrier to registration for the digitally excluded.
- Practices who only allow patients who live in the catchment area to register should consider making an exception for people who are homeless.
- Practices who took a long time to answer our calls should review their staffing and telephone systems.
- Practices should ensure all reception staff are aware of the role of Healthwatch Haringey.

## What difference will it make?

### This project will mean:

- More Haringey GP practices follow NHS guidelines on registering patients;
- More Haringey residents can register with a GP easily;
- More Haringey GP practices join the Safe Surgeries Scheme. Within the life of the project an additional two surgeries have committed to becoming a Safe Surgery (Increasing from 26 to 28).

We are committed to a review in 2023 to discover if positive changes have been made.

# Young people's mental health project

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Young people have been heavily impacted by COVID-19 and the subsequent lockdowns – disruptions to schooling and education, uncertainty over exams and results, fewer employment prospects, not being able to socialise with friends and family, and having to stay in. This has had a negative affect on young people's mental health and wellbeing, with increased levels of stress, anxiety, and mental ill health.

In 2021, Healthwatch Haringey published an initial report on the impact the pandemic and lockdowns had on young people's mental health and wellbeing. In 22/23, we explored further some of the issues highlighted in that earlier report, through focus groups with young people in Haringey aged between 15 and 24 years.



## Learnings

- Living through COVID-19 and lockdowns had meant a lot of lifestyle changes for young people, and there were positive and negative aspects to this. The worst aspects included being stuck inside, unable to see friends and family. Positives included extra time to spend with immediate family, building stronger bonds
- Improvement in mental health state: Young people's mental health state is a lot better now than during the period of lockdowns. The majority of participants had moved from feeling "very bad" or "bad" to feeling "very good" or "good". Yet, even now, 42% of participants still feel just "ok" or "bad".
- Tools to improve mental health: Young people talked about seeing, talking to, and spending time with, family and friends, and how important these support networks of family and friends were in terms of maintaining good mental health.
- College support: Young people said they would be confident and comfortable speaking to college staff, including form tutors and teachers, if they (or a friend) were experiencing mental health issues. Young people also had ideas about what more they would like in place in college to support them to have good mental health, including mental health classes/workshops, and drop-in sessions in the college setting

- Home / community mental health support: While family and friend support networks were critical, young people also talked about social workers and youth workers, as well as youth centres and community centres. Young people of faith talked about priests and imams, churches and mosques. Lower down the list were NHS services – GPs and nurses – but mental health services, organisations or charities were not mentioned. Online apps and social media were considered part of the problem, rather than the cure
- The future: Some young people felt positive about their future, and were excited to be going on to further education, feeling hopeful and confident. But others felt anxious, stressed, and worried about impending exams and next steps.

## Our recommendations

### Recommendations to schools and colleges:

1. More of a focus on mental health within the core curriculum – raising awareness, challenging stigma, and signposting to mental health organisations and services
2. Safe spaces (quiet room/rage room) within the school/college – somewhere to have time out when needed
3. A referral process, and access to, professional mental health services
4. Drop-in sessions/clinics/appointments with mental health services within their school/college.

### Recommendations to mental health services, CAMHS\*, charities and organisations:

1. Work in partnership with schools and colleges so students are readily able to access these services quickly and easily through referral
2. Drop-in sessions/clinics/appointments within school and college settings
3. Tailored communications, designed for young people, about their services – setting out what services are available and how to access them
4. Ensure young people-friendly communications are widely promoted and distributed at schools, colleges, youth centres, community centres, places of worship.

\*CAMHS (Child and Adolescent Mental Health Services).



## What difference did it make?

- Provided important insights regarding the mental health of young people in the community, and how they engage with health services – contributing to future commissioning of mental health services in the borough
- Raising awareness among local schools and colleges, by sharing the insights from our research into the mental health of students
- Highlighting to VCS organisations the lack of awareness of mental health services among young people, and methods to better engage this demographic.



# Young people and sexual health project

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Healthwatch Haringey was commissioned to consult and engage young people on their current views of sexual health services in the borough and ask them of their aspirations and needs to improve their future experiences.

We chose to work on this project as the COVID-19 pandemic saw a growing concern of residents not being able to access primary care services, and this is a way of gaining insight into the broader experiences that 15 to 24-year-olds face when accessing front-line care.



We used four main methods of engagement:

- 1. Online survey** – this was publicised on a poster displayed at the two young people’s sexual health clinics, Healthy Living Pharmacies, Haringey Council’s public health team, Haringey Council services working with young people, Haringey Sixth Form College, The College of Haringey, Enfield and North East London (CONEL), and a range of organisations working with, and supporting, young people.
- 2. Visiting sexual health clinics** – at Morum House and Lordship Lane in November 2022 and January 2023. We spoke with staff and young people attending the clinic.
- 3. Focus groups** – with asylum seekers/refugees/new migrants on young people’s views on sexual health services at Phoenix Community Care and with health and social care students at CONEL.
- 4. 1-1 interviews** – conducted over the phone with a young person who was part of Haringey Council’s Young Adult Service in January 2023.

## Our recommendations

Our research empowered young people to voice their opinions and thoughts on sexual health services and provide actionable recommendations to improve their services, including:

- 1. Awareness** – There should be more work done with young people to promote sexual health services so they know what is available, where to go and how to access them with a focus on using websites and social media. This can be done through a website and a leaflet listing sexual health services in the borough, including sexual health clinics, and pharmacies, by showing their location on a map and a QR code or link directing young people to access more information about sexual health.
- 2. Outreach and engagement** – There should be a greater promotion and presence of good quality information of young people's sexual health services with a strong focus on outreach in schools and colleges, dedicated young people's sexual health clinics in a youth-friendly, welcoming and inclusive space and delivering information through websites and social media, backed up by SMS text messages and email.
- 3. Sexual health clinics** – The dedicated young people's sexual health clinics should be open access with better signage outside the clinics using logos, pictures, and graphics to show what it is and what services are offered. The clinics should be delivered in a youth-friendly, welcoming and inclusive environment for young people only.

## What difference did it make?

Haringey Council asked Healthwatch Haringey to conduct this project as part of plans to commission young people's sexual health services going forward. The findings regarding awareness and experiences of services, as well as aspirations, wants and needs for the future, are being used to create a user-centred service requirement, to commission more fit for purpose and effective services for the borough.

We shared our draft report with the Haringey Council Public Health Team in February 2023, and will publish the final report to circulate to partners and stakeholders in the coming months.

# Ways we've made a difference

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.



## Creating empathy by bringing experiences to life

Alongside a number of other Healthwatch in London we focused on a project of people not getting the right help when they need social care support.

As we know, social care can change lives, but people do not always get the support when they need it or in a way that works for them. The project aimed to address barriers and inequalities in social care by focusing on people's experiences at different points in their care journey.

We supported this by conducting an interview in February 2023 with a resident who had a physical disability and was awaiting a social care needs assessment. The individual was in the earliest stages of the application and helped us understand the key themes and challenges faced when seeking support from the social care system.

These included:

- Lack of accessible information about social care services.
- The system being difficult to navigate, especially if the applicant needs help with using digital technology.
- The system is rigorous, and social care is not always tailored to individual needs.
- Concerns about anxiety and mental health when applying for social care support.
- The impact COVID-19 had on care services.

The interview transcript was shared with Healthwatch England, who will use the findings with decision makers to influence change, leading to better support for people using social care.



## Creating empathy by bringing experiences to life

Alongside a number of other Healthwatch in London, we were asked by London Ambulance Service (LAS) to engage local people in a short consultation to help inform a more user-focused strategy for LAS for 2023–2026.

The questions looked at what the LAS is getting right, and areas for improvement in emergency and urgent care; how to work with other parts of the healthcare system to improve care; and how to better contribute to life in London.

People were encouraged to share their experiences and perceptions of the service, through a combination of surveys, a dedicated workshop, and discussion at existing stakeholder forums such as the Reference Groups of the Haringey Joint Partnership Board.

Healthwatch were asked to write a letter to LAS including the key themes emerging from the engagement. Drawing on resident experiences and insights, we recommended:

1. Investing in staff – addressing pay, training, equalities, recruitment, and retention.
2. Investing in equipment including ambulances, medical equipment, and IT equipment. Ensure it is well maintained and technologically advanced.
3. Ensuring the patient records system is as joined up as possible with hospitals, GPs, mental health services.
4. Making sure patients are given access to their own records.
5. Ensuring disabled people are accommodated and services are adjusted to meet their needs.

Combined with the work of fellow Healthwatch services across London, our collective recommendations have helped to inform a more user-focused strategy for LAS to 2026.



## Getting services to involve the public

We continue to bring service users together to share experiences, good practice and common challenges in health and social care services.

This includes our quarterly Patient Participation Group (PPG) Network, bringing together the PPGs that all GPs are required to provide for both practice staff (including GPs) and patients to meet, and our monthly Experts by Experience (E by E) Mental Health Board, bringing together service users from all five North Central London boroughs.

Both forums host regular presentations from North Central London Integrated Care Board (NCL ICB), NHS Trusts and pharmacy leads, services commissioned by local authorities, and relevant voluntary, community and social enterprise (VCSE) sector organisations.

Thanks to the engagement of the PPG Network and E by E Board, Healthwatch Haringey has helped to:

- Raise the importance of PPG functioning as part of the Care Quality Commission (CQC) GP inspection process. The Healthwatch Haringey Chair has written a letter to engage the CQC, North Central London Integrated Care Board, the London Medical Association, MPs and the GP Federation on this issue
- Ensure service user representation in the new governance structures created for mental health for the ICB. E by E members are represented on these new structures, including the Mental Health Service Review Programme Board and the Mental Health Service Review Implementation Steering Group
- Explaining the availability and services of social prescribing link workers, ensuring patients are aware of and use the service in their local Primary Care Networks.



**By raising patients' concerns we secured improvements in how we book appointments and saw the development of an online repeat prescription service.**

**Rutland House PPG member**



The Mental Health EbyE Reference Group have helped to promote empowerment and service user voice and choice in the development and transformation of services to ensure they are fit for purpose based on patient needs. They have helped us to shape the future of health services, and support us to design services to suit the needs to the patient.

**Carolyn Piper**

**Head of System Programme Management**

(Mental Health, Children and Young People, Learning Disabilities and Autism)

NHS North Central London ICB





## Improving care over time

Throughout the second half of 2021, we worked with our neighbours and colleagues at Healthwatch Camden, Healthwatch Enfield, Healthwatch Barnet, and Healthwatch Islington to investigate local people's experiences of Long COVID.

We covered residents in the North Central London Clinical Commissioning area (now NCL ICB). Collectively, we spoke to over 300 local people, via online surveys, 1-2-1 interviews, and community focus groups. The people we spoke to described the different ways Long COVID has affected them, physically, mentally and socially.

The report was published in April 2022, and a Haringey-specific report produced in June 2022, with recommendations aimed at improving healthcare for those with Long COVID.

In September 2022 NCL ICB shared the changes which have been made to NHS services. Thanks to recommendations from Healthwatch, patients with Long COVID are now assessed at face-to-face appointments with their GP, and together they create a plan to manage their condition. North Central London NHS has developed a single point of access for all Long COVID services, so the GP may consider referring patients here for onward care if needed.



I can't exercise as my heart rate goes up and I get chest pain and feel so exhausted after a short amount of slow walking. I am so down a lot of the time, feel guilty for not working and sad about missing so many of my usual social activities. My relationship is suffering as I'm so down and not at all fun.

**Haringey Resident**



# Advice and information

If you feel lost and don't know where to turn, Healthwatch is here for you. In times of worry or stress, we can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one.



## Hospital cancellation

Ade\* contacted us, very distressed about the fact that his operation at the North Middlesex University Hospital had been cancelled nine times in the last year. This delay had also had negatively affected his mental health. We contacted North Middlesex University Hospital Patient Advice and Liaison Service (PALS) and relevant professionals to understand the reasons of the delay, and make sure the patient was offered a date for his surgery.

After a few more cancellations, the surgery finally took place, and it was successful. Ade was extremely grateful for Healthwatch's intervention:



Once again, I would like to thank you and the Healthwatch Haringey team for your support. I am in no doubt that this operation has finally happened because of your persistent enquiries regarding my surgery cancellations with [North Middlesex University Hospital] PALS.

**Ade, Haringey resident**

## Hospital complaint

Bill\* contacted us regarding a complaint he had made to Whittington Health's Patient Advice and Liaison Service (PALS) regarding the care his wife has received and an operation that she was supposed to undergo.

We wrote to PALS and the hospital complaint investigator dealing with the complaint on several occasions, chasing a reply to the complaint raised whilst liaising with Bill to keep him informed.

We had to chase for a reply several times during a period of three months. Bill finally received a satisfactory reply to his complaint and his wife's operation went ahead successfully. Therefore, he decided not to escalate his complaint, as he had initially indicated.

## GP de-registration

Irene\* contacted us because she was unable to register her son with a GP practice since birth, and therefore could not get him an appointment. The GP practice was asking her to re-register online, but the registration attempts kept getting refused by the online system. Irene needed an urgent appointment as her son had a serious skin condition.

We wrote to the GP practice Manager to address the issue. As a result, Irene was contacted and she was able to register her son and obtain an appointment.

## GP registration and proof of address

Elif\* contacted us because a GP surgery had refused to register her, as she did not have proof of address. This goes against NHS guidelines and policies.

We contacted the GP surgery Practice Manger and addressed the matter. The issue was solved, and Irene was able to register.

Healthwatch Haringey has been working on Safe Surgery project and raising awareness on this issue. GP practices must commit to tackle barriers to ensure that everyone is able to access healthcare.

\*Names have been changed to protect confidentiality.

# Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving. Our volunteers support us in many different ways, from sharing experiences of health and social care services at meetings and in reference groups, to using these views to influence those who run services.





## Marylyn

My journey as a Healthwatch Haringey volunteer continued with training for the Healthy Hearts hypertension/blood pressure project in October 2022. The focus is on encouraging Haringey residents to have their blood pressure checked.

I combined my own experience as someone with a history of high blood pressure and a professional background in nursing to encourage and enable individuals to have their blood pressure checked and recorded in an informal setting.

Participating in this project not only allows me to engage local people but to also listen to their stories.



## Georgie

I worked at the Whittington Hospital in 1977 and as I have lived in the area for many years, it has been my 'go-to' hospital ever since.

When Healthwatch Haringey asked me to be part of the PLACE (Patient-Led Assessment of the Care Environment) audit of the Whittington in 2022, I was really pleased to get involved. These visits set out to assess the non-clinical aspects of care including cleanliness and food – always a hot topic! As a team of staff and patient assessors, we were able to see how a wide range of hospital services work.

I learned much about the inside of care delivery in this setting, but also like to believe our feedback made a positive contribution so the hospital could learn from us too.



## Chris

Volunteering with Healthwatch Haringey for me is learning about Health and Social Care services in Haringey, and passing on that knowledge to help others.

This year I've helped with patient-led hospital assessments, been a 'secret shopper' for the registration process in Haringey GP surgeries, and taken residents' blood pressure at an over 50s group.

I've met lots of good people and really enjoyed volunteering with Healthwatch Haringey over the past 10 years.



## Sally

I've been a Healthwatch Haringey volunteer for the past 10 years. I have been part of the PLACE (Patient-Led Assessment of the Care Environment) teams that go into NHS hospitals to conduct inspections of patient facilities. This gives an interesting insight into how hospitals work.

I have also been the Healthwatch Haringey patient representative on the Quality Assurance Board at the North Middlesex University Hospital for a number of years. I learn something new at every meeting I attend, which helps keep my brain active!

# Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Income		Expenditure	
Funding received from local authority	£152,000	Staff costs	£130,000
Additional funding	£47,500	Operational costs	£19,500
		Support and administration	£50,000
Total income	£199,500	Total expenditure	£199,500

## Top three priorities for 2022–23

1. Revisiting GP access and identifying improvements made, or areas for further work.
2. Care home transitions.
3. Helping to improve support for young carers.

## Next steps

Having worked well with a broad range of community groups and demographics in Haringey, we will be going further to make sure all voices are heard – building links with seldom heard groups, and convening residents who are particularly excluded and most likely to experience poor health outcomes.

# Statutory statements

Healthwatch Haringey is run and managed by Public Voice, a Community Interest Company (CIC).

Healthwatch Haringey uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.





# Statutory statements

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## The way we work

### Involvement of volunteers and lay people in our governance and decision-making.

Our Healthwatch Board consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community. Through 2022/23 board met six times and made decisions on matters such as the impact of housing on resident health and wellbeing, the impact of care home closures on local residents, and growing challenges in safeguarding for local residents and service users.

## Methods and systems used across the year's work to obtain people's views and experience

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of using services. During 2022/23 we have been available by phone, email, provided a webform on our website and through social media, as well as attending meetings of community groups 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, highlight it in our newsletter, and send it out to stakeholders, partners and residents. We ensure there are a small number of printed copies available.

## Responses to recommendations

We had no providers who did not respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

## **Taking people's experiences to decision makers**

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us.

We ensure wider public involvement in deciding our work priorities. We listen to concerns and challenges raised directly with Healthwatch Haringey through local people contacting us by phone and email for help and support. The most common issue over the last year has been access to GP services, and we have carried out a number of projects with the aim of improving access to primary care.

We also listen to the concerns and challenges raised by our service user groups - our Joint Partnership Board, our Reference Groups, our Experts by Experience Board, and our Haringey Patient Participation Group Network, and take our insight and experiences to decision makers in North Central London Integrated Care System and Haringey Council to bring about service improvement.

## **Health and Wellbeing Board**

Healthwatch Haringey is represented on the Haringey Health and Wellbeing Board by Sharon Grant OBE, Chair of Healthwatch Haringey. During 2022/23 our representative has effectively carried out this role by attending all the Health and Wellbeing Board meetings which were quarterly, and by being actively engaged in discussions on the Integrated Care System (ICS).

Project / Activity Area	Changes made to services
<p><b>Engagement of senior stakeholders (Eye Care)</b></p>	<p>Healthwatch CEO, alongside Healthwatch Enfield and the Royal National Institute of Blind People, engaged the North Central London Integrated Care Board and the CEO of North Middlesex University Hospital regarding eye care provision, reflecting the local need for such services. As a result of our efforts, the hospital has committed to employing an Eye Care Liaison Officer to meet local demand and improve eye care provision.</p>
<p><b>Young people's mental health (Mental Health)</b></p>	<p>Based on Healthwatch's study of young people's perspectives on mental health and use of services, it was decided to:</p> <ul style="list-style-type: none"> <li>• Increase focus on mental health in the core curriculum;</li> <li>• Provide safe spaces in educational settings to relax/calm down;</li> <li>• Offer drop-in sessions with mental health services in schools / colleges.</li> </ul>
<p><b>Young people's sexual health (Sexual Health Services)</b></p>	<p>Our study into young people and sexual health services identified areas to improve access and better tailor services to meet user needs. These included:</p> <ul style="list-style-type: none"> <li>• Improving the websites of existing sexual health services to make them easier to navigate, as well as the phone lines and appointment systems.</li> <li>• Advice on providing information, signage, and offering welcoming and inclusive spaces.</li> <li>• Encouraging delivering outreach in schools and colleges.</li> </ul>

Project / Activity Area	Changes made to services
<p><b>GP registration project (GP Services)</b></p>	<p>Having reported on people’s experience of registration processes across GP practices in Haringey, the published research will be used to ensure more Haringey GP practices follow NHS guidelines on registering patients; more Haringey residents can register with a GP easily; more Haringey GP practices join the Safe Surgeries scheme. We created materials to inform people of their registration rights in English and five other languages predominant in Haringey.</p>
<p><b>Reaching out to vulnerable, seldom heard and diverse individuals and communities (GP Services / Mental Health Services)</b></p>	<p>Following our investigation of ethnic minority women’s experiences of accessing and using health and care services in 21/22, Healthwatch and the community groups met with the ICB in November 2022 to reflect on what actions have been taken to improve access. These included:</p> <ul style="list-style-type: none"> <li>• Signing up 50% of Haringey practices to the Safe Surgeries scheme.</li> <li>• Ensuring availability of face-to-face appointments where clinically required or requested.</li> <li>• Additional funding of interpreting services, Language Line access, and capacity building of Voluntary, Community and Social Enterprise (VCSE) sector organisations.</li> <li>• Commissioning of mental health training for VCSE from Mind in Haringey.</li> </ul>

Project / Activity Area	Changes made to services
<p><b>Experts by Experience mental health group</b></p>	<p>The E by E Mental Health Reference Group have helped to promote empowerment and service user voice and choice in the development and transformation of services to ensure they are fit for purpose based on patient needs. The group helps shape the future of health services. By supporting NCL ICB to design services to suit the needs to the patient, they help to:</p> <ul style="list-style-type: none"> <li>• Improve quality of care;</li> <li>• Promote better health;</li> <li>• Shape the development of the core offer for mental Hhealth services;</li> <li>• Develop the strategic vision for NCL ICB;</li> <li>• Ensure that information shared is jargon free and uses plain English;</li> <li>• Develop 'Crisis Houses' and Crisis Cafes in North Central London.</li> </ul>
<p><b>Patient Participation Group network</b></p>	<p>We strengthened and diversified patient representation on Haringey PPGs. Thanks to the engagement of the PPG Network, Healthwatch Haringey has helped to:</p> <ul style="list-style-type: none"> <li>• Raise the importance of PPG functioning as part of the Care Quality Commission (CQC) GP inspection process.</li> <li>• Explain the availability and services of social prescribing link workers, ensuring patients are aware of and use the service in their local Primary Care Networks.</li> <li>• Provide greater knowledge amongst patients of changes to primary and secondary care.</li> <li>• Provide patients with the opportunity to feed back to healthcare managers in the NHS about how they are experiencing the service.</li> </ul>

### Healthy Hearts Blood Pressure Project

Our team has engaged and trained seven local community groups in how to provide independent blood pressure checks, as well as giving residents information and signposting to relevant services. This ensures that the community is able to continue offering checks sustainably via the VCSE, beyond the lifetime of the Healthy Hearts project – identifying those with high readings and risks, signposting, and supporting with prevention.



The healthy hearts project has been truly worthwhile in Haringey. It is another means for underserved residents to access health services within the community. Residents have said they are pleased to have access to a blood pressure check and want to take positive steps to improve their health. Many have said they hadn't accessed services in a long time. These types of programmes alleviate pressures on NHS services which may be under strain and get help to people where they are, in community settings. They equip communities with knowledge and behaviour change which can lead to better health outcomes.

Karina Sale  
Engagement Manager  
North Central London Integrated Care Board



# Contact us



Telephone: 020 8888 0579



Email: [info@healthwatchharingey.org.uk](mailto:info@healthwatchharingey.org.uk)



Visit us: [www.healthwatchharingey.org.uk](http://www.healthwatchharingey.org.uk)



Follow us on Twitter: [@HWHaringey](https://twitter.com/HWHaringey)



Like and Follow us Facebook: [HealthwatchHaringey](https://www.facebook.com/HealthwatchHaringey)



Write to us:  
Freepost RTXY-BSRB-RCSS  
Healthwatch Haringey  
Tottenham Town Hall  
Town Hall Approach Road  
London  
N15 4RX