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Foreword

Dr. Ian Holtby, Chair of Healthwatch Redcar and Cleveland

Welcome to Healthwatch Redcar and Cleveland’s first Annual Report. We are the new consumer champion for health and social care in this area and our aim is to put the voice of those who live and work in Redcar and Cleveland at the heart of health and social care services. The people we’ve talked to during 2013-14 are aware of the pressure local services are under but they also tell us that the health and social care system is still not as good at listening as it could be and that the lessons of Mid Staffordshire, Winterbourne View and Morecambe Bay still need to be embedded. As far back as 2009, Dr David Colin Thomé in his review of lessons learnt for the Healthcare Commission about Mid Staffordshire NHS Foundation Trust said:

PCTs (now CCGs) should be held to account for their responsibility for engaging patients and the public in design, delivery and quality assurance of health and care services, and for ensuring that the providers that they commission do likewise.

Primary Care Trusts (PCTs) have now been replaced by Clinical Commissioning Groups and although commissioners and providers of health and social care services are getting better at listening to those who use services, there is still a long way to go before we can say that patients and the public are being involved at the design and commissioning stages of health and care services. This is why our role in holding those who commission services to account through the Health and Wellbeing Board and Health Scrutiny is so important. We need to be contributing to early discussions about commissioning intentions and assessing progress on the Redcar and Cleveland Health and Wellbeing Strategy. In year two, I envisage that Healthwatch Redcar and Cleveland will make full use of its statutory powers to fulfil this part of its role.

2013-14 has been a busy and demanding first year for us all, during which we have succeeded in building a solid foundation for Healthwatch Redcar and Cleveland which I believe will serve the Borough well in the years ahead. I’d like to thank the staff of Healthwatch, Pioneering Care Partnership and my fellow Executive Board members for their time, energy and commitment to Healthwatch Redcar and Cleveland, and I’d particularly like to thank the individuals, groups and organisations who have joined us on this journey and are the real ‘Healthwatch Redcar and Cleveland.’

If you’d like to join in a conversation with me about Healthwatch Redcar and Cleveland going forward please feel free to get in touch at healthwatchredcarcleveland@pcp.uk.net

Our address is:
Healthwatch Redcar and Cleveland
Catalyst House
27 Yarm Road
Stockton-on-Tees TS18 3NJ
healthwatchredcarcleveland@pcp.uk.net

General office enquiries 01642 688312

Freephone 08081729559
for information and signposting to local health and social care services and support
Who we are and what we do

Our vision

Our vision for Healthwatch in Redcar and Cleveland is to be a strong, independent, trusted and effective voice and a champion for local people, influencing health and social care delivery and supporting people to access health and social care services. Healthwatch will strive to ensure the best possible quality and choice in health, social care and wellbeing services for the benefit of all living and working in the Borough.

Our objectives

Healthwatch in Redcar and Cleveland will:

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<td>1</td>
<td>Fulfil its statutory duties and functions, holding providers and commissioners of health and social care services to account where needed</td>
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<td>2</td>
<td>Operate as a corporate body, embedded in local communities</td>
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<td>3</td>
<td>Act as the local consumer champion, representing the collective voice of patients, service users, carers and the public, on statutory Health and Wellbeing Boards and robust challenge and scrutiny in the interests of its members and the citizens of Redcar and Cleveland</td>
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<td>4</td>
<td>Play an integral role in the preparation, reviewing and refreshing of the statutory Joint Strategic Needs Assessment and joint health and wellbeing commissioning intentions and strategies on which local commissioning decisions will be based</td>
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<td>5</td>
<td>Have real influence with commissioners, providers, regulators and Healthwatch England, using its knowledge of what matters to local people</td>
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<td>6</td>
<td>Report concerns about the quality of local health and social care services to Healthwatch England which can then recommend that the Care Quality Commission (CQC) take action</td>
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<td>7</td>
<td>Provide information to patients and public who need to find out about health and care services and promote informed choice in local health and social care services</td>
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<td>8</td>
<td>Support individuals to find the right information and independent advocacy, where needed, if they need help to complain about NHS or social care services</td>
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<td>9</td>
<td>Build on and utilise existing local engagement and signposting pathways and mechanisms rather than duplicating what is already in place</td>
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The Health and Social Care Act 2012 established Healthwatch as the new consumer champion for health and social care services for adults and children with the stated ambition ‘to achieve the best health and care services that are shaped by local needs and experiences’.

The Act aimed to strengthen the collective voice of patients, users of care services and the public through the establishment of a new structure known as Healthwatch. The Act established two Healthwatch new bodies:

**Healthwatch England** - a statutory committee of the Care Quality Commission

**Local Healthwatch** organisations to be commissioned by each Local Authority in England

Healthwatch replaced Local Involvement Networks (LINks) but retained all of its statutory functions, with some additional ones.

Healthwatch is unique in being the only non-statutory body with statutory powers and duties:

- The power to enter and view premises where health or social care services are provided (this power does not extend to premises that provide social care to children but Healthwatch is expected to gather views and experiences from children and young people in collaboration with local partners)

- Service providers and commissioners have a duty to respond to Local Healthwatch reports and recommendations within 20 working days - this also applies to providers of children’s social care services

“Commissioners and providers will have regard to the reports and recommendations and will have to be able to justify their decision if they do not intend to follow through on them.” Healthwatch regulations

- Local Healthwatch has a **statutory entitlement to a seat on the local Health and Wellbeing Board**

- Local Healthwatch has a **duty to provide information about health and social care services**

- Local Healthwatch can **escalate issues direct** to Healthwatch England (HWE) and through them, the Care Quality Commission (CQC)

- Local Healthwatch can also refer issues of concern direct to the Health Scrutiny Committee
The Local Government and Public Involvement in Health Act 2007 spells out the key activities each local Healthwatch is expected to undertake:

- promoting, and supporting, the involvement of people in the commissioning, provision and scrutiny of local care services
- enabling people to monitor and review care services
- obtaining the views of people about their needs for, and their experiences of, local care services
- making these views known through reports and recommendations about how local care services could be improved to those responsible for commissioning, providing, managing or scrutinising local care services

The Health and Social Care Act is very clear that an effective local Healthwatch will result in ‘the best health and care services that are shaped by local needs and experiences’. This outcome-based approach means that to be truly effective, local Healthwatch will need to operate effectively across four key ‘domains’ of activity (below):

<table>
<thead>
<tr>
<th>‘Voice’</th>
<th>Scrutiny and Accountability</th>
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<tr>
<td>Ensuring people’s voices are heard and influence the design, commissioning and delivery of health and social care services</td>
<td>Holding commissioners and providers of local health and social care services to account through representation on key strategic partnerships including Health and Wellbeing Board; power to Enter and View services; 20 day duty to respond to local Healthwatch reports and recommendations; power to escalate matters of concern to Healthwatch England, the CQC and Health Scrutiny Committee</td>
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<tr>
<td>Information and Signposting</td>
<td>Complaints</td>
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<tr>
<td>Providing information/ signposting about local health and social care services to enable people to make informed choices about services and support</td>
<td>Providing information/signposting to those wishing to complain about services including signposting to the NHS Independent Complaints Advocacy Service</td>
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Following a competitive tendering process, Pioneering Care Partnership (PCP) was awarded the contract for Redcar and Cleveland Healthwatch. PCP is a leading third sector health improvement organisation whose mission is to improve Health, Wellbeing and Learning for all.

PCP was Host organisation for County Durham LINk and also secured Healthwatch contracts in Sunderland, Middlesbrough and Stockton-on-Tees.

Healthwatch Redcar and Cleveland - ‘a network of networks’

The PCP model for delivery of Healthwatch in Redcar and Cleveland is based on the notion that it can only truly be effective in reaching as many citizens as possible if it works with and through established networks. This means that Healthwatch Redcar and Cleveland:

- builds strong links with local voluntary and community groups
- uses established community networks to share information, and to find out what matters to people
- sub-contracts specific projects to local partners with the right skills and local knowledge
- builds a bank of trained Healthwatch Information Volunteers who can be the eyes and ears of Healthwatch at grass-roots level
- champions the voices of those who are seldom-heard

Healthwatch Redcar and Cleveland - an inclusive organisation open to:
- individuals who live and/or work in Redcar and Cleveland
- local organisations and groups representing a diverse range of communities in the Borough and supported by
  - paid staff and volunteers with specific roles and responsibilities
  - a volunteer Executive Board providing expert leadership, strategic direction and feedback to the wider membership

Local Healthwatch is independent of central and local government with its own legal powers and sets its own work programme to reflect the concerns of the local community.
The available funding for Healthwatch Redcar and Cleveland delivery in year one was £129,554

On 1 April 2013, Healthwatch Redcar and Cleveland entered into a licensing agreement with Healthwatch England to use its trademark and branding toolkit on all Healthwatch Redcar and Cleveland materials, including those related to its statutory duties, activities and powers.
Key achievements for Healthwatch Redcar and Cleveland in year one 2013-14 include:

- Efficient LINks legacy handover and transfer of staff
- Full audit of LINk legacy issues as part of managing the transition from LINk to Healthwatch
- Effective mobilisation phase meaning that on 1st April 2013 Healthwatch Redcar and Cleveland was open for business
- National branding guidelines for licensed from Healthwatch England
- Redcar and Cleveland Healthwatch-specific promotional materials designed, printed and distributed
- ‘Back office’ set up to maximise efficient support to operation of Healthwatch Redcar and Cleveland
- An ambitious Project Delivery Plan for year one with key tasks, targets and milestones agreed, signed off by PCP and Local Authority commissioners and delivered on time and on target
- A brand-new Healthwatch Redcar and Cleveland Information and Signposting service operational from 1 April 2013 offering a Freephone number to anyone who needs information about local health and care services
- Development of a comprehensive pathway for signposting people who wish to complain about their services, nothing similar existed locally previously. This has been welcomed by many commissioners and providers of services
- Major programme of awareness raising activities targeted at potential Network membership and stakeholders with more than 68 events and activities undertaken across the Borough
- Targeted recruitment drive to build the Healthwatch network of both organisational and individual members with year one targets exceeded by at least 50%
- Interim arrangements to fill places on key strategic partnerships including Health and Wellbeing Board in place from 1 April 2013 with smooth transition once Board members in place
- Successful launch of the Healthwatch Network including online and offline events and opportunity to influence our year one Work Programme
- Successful campaign to recruit, fill and train for key volunteer roles on the Executive Board and Information Volunteers
• A skilled and effective Executive Board in place, recruited through a robust, open and transparent process which included a role descriptor and core competences followed by comprehensive Board induction, skills audit and development opportunities

• Executive Board meeting regularly and Board members hold places on key strategic partnerships including Health and Wellbeing Board

• Programme of meetings for Chair of Healthwatch as part of induction and seat on Health and Wellbeing Board

• Detailed and comprehensive Work Plan signed off by the Executive Board based on robust analysis of feedback from the membership and the citizens of Redcar and Cleveland and, a process for prioritising of issues by the Healthwatch Redcar and Cleveland Board which takes account of priorities identified in the local Health and Wellbeing Strategy, Local Authority and Clinical Commissioning Group commissioning plans and other key strategic documents which impact on the health and Wellbeing of the people of Redcar and Cleveland.

• More than 100 partners, stakeholders and member organisations are actively promoting Healthwatch Redcar and Cleveland through their networks- extending our reach significantly. This includes organisations and groups working with older people and those whose voices are seldom heard

• We have enabled 190 individuals whose voices are seldom heard to share their experiences with us and help us highlight inequalities in their health and/or care services

• Healthwatch Redcar and Cleveland has a distinctive website and social media presence including a dedicated Facebook page and a Twitter feed with 360 followers

• Robust governance arrangements, including comprehensive policies and procedures, are in place which ensure accountability to both the Healthwatch Redcar and Cleveland membership and the citizens of Redcar and Cleveland

• A comprehensive public awareness campaign to let the citizens of Redcar and Cleveland know about our Information and Signposting service which included a major media campaign, press releases, leaflets, posters, promotional items, handy reference cards and information kits. Coverage included local and regional print and digital media. To date over 2000 leaflets have been distributed

• Development of strong relationships with commissioning colleagues on the Health and Wellbeing Board based on mutual respect and genuine commitment to partnership working
Volunteers

Volunteers are central to the work of Healthwatch Redcar and Cleveland. During 2013-14 they have been actively involved in two key roles as:

- Healthwatch Redcar and Cleveland Executive Board members
- Healthwatch Redcar and Cleveland Information Volunteers

Volunteers fulfilling these roles are active members of Healthwatch Redcar and Cleveland and must live and/or work in the Borough. As members, they play an important role in:

- telling Healthwatch Redcar and Cleveland and other stakeholders about their own experience of services
- collecting and sharing feedback about services from their own communities and networks with Healthwatch Redcar and Cleveland and other stakeholders
- setting the work programme and priorities for Healthwatch Redcar and Cleveland
- representing Healthwatch Redcar and Cleveland in a range of settings where care services are being discussed
- ensuring the good governance of Healthwatch Redcar and Cleveland

Volunteers are involved in the work of Healthwatch Redcar and Cleveland through:

- Membership of the Executive Board and representing Healthwatch on key Strategic partnerships & boards
- The Healthwatch Network - which debates and identifies issues for the Healthwatch Annual Work Plan and nominates Executive Board members
- Task and Finish Groups - carrying specific project work linked to the Annual Work Plan and the local Health & Wellbeing Strategy and through Individual volunteer roles as:
  - Information Volunteers
  - Enter & View Representatives
There are clear descriptors for each volunteer role with Healthwatch Redcar and Cleveland who undertook a pro-active campaign to recruit a broad-based group of volunteers to join its Executive Board and act as Information Volunteers during 2013-14.

Healthwatch Redcar and Cleveland has a volunteer Executive Board of seven members and a trained cohort of 10 Information Volunteers. These volunteers come from a range of backgrounds including those whose voices are seldom heard. Healthwatch Redcar and Cleveland is now recruiting and training 6 Enter and View Representatives to carry out visits in line with its work programme for 2014-15.

All Healthwatch Redcar and Cleveland volunteers are provided with training, supervision, support and out of pocket expenses and Healthwatch Redcar and Cleveland recognises volunteer contributions formally through certification and an awards ceremony.

Additionally, Information Volunteers gain skills, confidence, knowledge which will increase their potential employability. Towards the end of 2013, the Healthwatch Redcar and Cleveland Executive Board undertook a tailor-made Skills Audit to assess their additional training or development needs.
One of Healthwatch Redcar and Cleveland’s first priorities was to recruit lay people and volunteers to its Executive Board. The role of the Board is to provide strategic oversight and good governance to Healthwatch Redcar and Cleveland and ensure it delivers its strategic objectives. Specifically its role is to:

- To agree priorities and sign off the annual work programme based on feedback from Healthwatch Redcar and Cleveland members
- Receive reports and recommendations from Task and Finish Groups
- Oversee Enter and View activity in line with the work programme, receive reports and recommendations and escalate where necessary to Healthwatch England
- Oversee the proportionate and judicious exercise of other statutory duties and powers held by Healthwatch Redcar and Cleveland
- Ensure that the annual work programme takes account of Health and Wellbeing Board, Joint Strategic Needs Assessment and Clinical Commissioning Group priorities and is used to inform the annual commissioning intentions of these partners
- Authorise requests for Healthwatch Redcar and Cleveland representation on other strategic boards relevant Healthwatch Redcar and Cleveland business
- Ensure the views of the wider Healthwatch Redcar and Cleveland membership are fully considered by the Board and that feedback is regularly provided to the Healthwatch network about how the Board makes decisions and sets priorities

**Activities**

<table>
<thead>
<tr>
<th>Statutory activities as defined by s221 of the Local Government and Public Involvement in Health Act 2007</th>
<th>What we’ve done so far...</th>
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<tr>
<td>Promoting, and supporting, the involvement of people in the commissioning, provision and scrutiny of local care services</td>
<td>Two open Network Forum meetings were held in June 2013 with another in January 2014 offering members an opportunity to share experience and influence Healthwatch work programme priorities. To date, 200 individuals or organisations have contributed specific feedback on issues of concern</td>
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<td>Enabling people to monitor and review care services</td>
<td>Detailed analysis and feedback report summarising feedback from Network Forum events disseminated and on website and used to inform board decisions about Work Programme priorities</td>
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<td>An update on emerging themes is planned for a Health and Wellbeing Board meeting in 2014-15</td>
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<td>Open/ongoing opportunities for members and the public to provide feedback through website, feedback forms and via Freephone number to Information and Signposting Service</td>
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Obtaining the views of people about their needs for, and their experiences of, local care services including:

- people under 21 or over 65
- people who work or volunteer in the Healthwatch Redcar and Cleveland area
- people from diverse backgrounds and sectors of society
- people from groups whose voices are seldom heard by those responsible for commissioning, providing, managing or scrutinising local care services

Making these views known through reports and recommendations about how local care services could or ought to be improved to those responsible for commissioning, providing, managing or scrutinising local care services

<table>
<thead>
<tr>
<th>Healthwatch Redcar and Cleveland is represented on the following Boards:</th>
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<tr>
<td>- Health and WellbeingBoard</td>
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<tr>
<td>- South Tees CCG Improve Reference Group and Advisory Group</td>
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<tr>
<td>- Patient Experience Forum South Tees NHS Trust</td>
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<td>- North East Ambulance Service</td>
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Participation in sub regional Healthwatch activity:

- Healthwatch staff attendance at Regional Healthwatch Leads meetings
- Jointly convened with other Tees and Sunderland Healthwatchs a regional round table meeting with Healthwatch England
- Joint meeting with Healthwatch Middlesbrough to discuss CCG commissioning intentions

9 events or activities specifically targeted at those voices which are seldom heard and have enabled individuals to share their experiences with us and help us highlight inequalities in their health and/or care services

68 relationship meetings with statutory/other stakeholders to raise awareness and understanding of Healthwatch

15 training sessions delivered to professionals and front line workers to raise awareness of Healthwatch

10 local Information Volunteers trained to extend reach into local communities and get feedback about issues of concern

Comprehensive communications strategy and materials for wide dissemination to the citizens of Redcar and Cleveland about the Information and Signposting service

Intelligence and data collection from all contacts with Information and Signposting service to identify trends and patterns in local service provision
Reports and recommendations

It is too early to assess the impact Healthwatch Redcar and Cleveland has had on the commissioning, provision and management of the health and care services including improvements to those services. We held a joint event with Middlesbrough Healthwatch to co-ordinate a response to South Tees CCG’s Commissioning Intentions for 2014-15 from our membership and a detailed response from the CCG was received. We will continue to monitor this during 2014-15. We also sent a letter to South Tees CCG requesting information about Improving Access to Psychological Services (IAPT) and received a response within 20 days.

During 2013-14, Healthwatch Redcar and Cleveland did not make any recommendations to the CQC or the Healthwatch England committee of the Care Quality Commission about reviews or investigations which required attention. While the first Work Programme for Redcar and Cleveland was being agreed, no Enter and View visits by Authorised Representatives were planned and no requests for visits from third parties such as the Care Quality Commission, the Health and Wellbeing Board or Health Scrutiny were made to us. We anticipate there will be visits during 2014-15 aligned to the Annual Work Programme and Enter and View representatives are currently being trained to carry out these visits.

Redcar and Cleveland Health and Wellbeing Board

Healthwatch Redcar and Cleveland have been welcomed as an active and equal partner in the Health and Wellbeing Board.

Recruitment to the role of Healthwatch Chair involved a detailed role description and core competences which ensure the Chair understands their duties and responsibilities and can exercise these effectively and appropriately on behalf of members and the citizens of Redcar and Cleveland. A comprehensive induction programme for the Chair was arranged which included meetings with key partners on the Board.
Challenges

There have been some challenges during our first year of operation including:

- Healthwatch start-up coincided with major changes in the configuration of health service commissioning, particularly the establishment of Clinical Commissioning Groups and Public Health moving into local authorities. The role of NHS England in commissioning primary care services proved to be a particularly complex and challenging issue for many.

- Many commissioners and providers of health care services were unclear about the role of Healthwatch, particularly in relation to complaints and disseminated incorrect information suggesting that Healthwatch would investigate or handle individual complaints about services.

- Healthwatch England were slower than anticipated in developing their ‘offer’ to local Healthwatch which meant that each local organisation had to invest scarce time and resources in developing local tools, processes and protocols including those for performance management, board recruitment and volunteer training.

- Development of a new Information and Signposting service was particularly challenging as it was dependent on the accuracy of third party data and there was no clear pathway for co-ordinating information relating to complaints in the new environment. This had to be developed by our Information and Signposting Officer before we could confidently direct people contacting us for information.

- A key challenge was communicating the Healthwatch Redcar and Cleveland ‘network of networks’ model to members and stakeholders as it was significantly different to that of the Local Involvement Network (LINk). Governance arrangements were also different to those of the LINk and new and different relationships had to be built with statutory partners who had been accustomed to direct involvement in LINk governance.

- Understanding of the scope and statutory basis of local Healthwatch’s scrutiny and accountability function has proved in some cases to be quite limited and it has been important to show how we can complement, rather than duplicate, other scrutiny and challenge activity undertaken by stakeholders.

Dissemination

This Annual Report will be signed off by the Executive Board and shared with the membership at an open meeting before being sent to Healthwatch England as laid out in Healthwatch regulations by the end of June 2014.

The Annual Report will be widely disseminated via our website, e-bulletins, our membership and key stakeholders and will be available in special formats on request. Copies will be made available specifically to:

Healthwatch England
The Care Quality Commission
NHS England
All Clinical Commissioning Groups which fall within our local authority area
The Overview and Scrutiny committee of the Council
Redcar and Cleveland Borough Council
Priorities 2014-15

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<tr>
<th>Cancer Care and Support · follow-up services</th>
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<tr>
<td>Transition from Child and Adolescent Mental Health Services (CAMHS) to Adult Mental Health Services AMHS</td>
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<tr>
<td>Waiting list issues in relation to Talking Therapies/ IAPT Services (Improved Access to Psychological Therapies) about why people may not engage with the service.</td>
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**We also need to:**
- Review our current work plan to monitor progress and impact and take account of new trends and issues raised
- Undertake a gap analysis of our current membership and run a targeted recruitment campaign to address these gaps
- Continue our work to involve children and young people in the work of Healthwatch
- Recruit and train further cohorts of Information Volunteers
- Recruit and train Enter and View representatives for visits aligned to our work programme
- Provide feedback to the Health and Wellbeing Board on current trends and issues and raise our profile with the Board in terms of our scrutiny and accountability function
- Continue to develop our positive and complementary working relationship with Health Scrutiny
- Continue our targeted programme to raise awareness of information and Signposting service in Redcar and Cleveland
- Build upon our relationship with Care Quality Commission Inspectors and managers and improve our capacity for supporting them in their role

Case studies

**Nature of enquiry**
Caller’s father (80 years old) in James Cook University Hospital and being discharged into intermediate care. A bed was found for him at a local Middlesbrough service and arrangements were made for his transfer. The transfer was cancelled at the last minute as he pays his council tax to Redcar and Cleveland Council. Had to stay in hospital for another day until a bed was found for him in a Redcar location, his daughter lives in Middlesbrough and was angry that when 3 beds were available in Middlesbrough, he had to stay an extra day in hospital and confused as to why where he pays his council tax should make a difference.

**Action taken**
Advised caller to contact PALs (Patient advice and liaison service) at James Cook University Hospital.
**Nature of enquiry**
Caller has a granddaughter aged 16 who has birthmark from her navel down her leg. She had courses of laser treatment when aged 2 and aged 13. GP has referred her twice for additional treatment but it has been refused both times due to funding issues. Grandmother would like to know why this is being refused and what she can do about it.

**Action taken**
Contacted CCG to enquire about appeals process - given contact at North of England Commissioning Support Unit who explained that if patient has been refused treatment due to funding, a letter would have gone to the GP with details of how to make an appeal. Appeals can be only made through GP/consultant and if new or additional information can be supplied. If appeal is unsuccessful a complaint can be made - not about the appeal decision, only about process. Informed grandmother of above by telephone.

**Nature of enquiry**
Complaint against GP at X GP practice. Over course of 2 years caller had been visiting doctor with pain and later discovered gall stone. This had travelled and required gall bladder removal. This was only discovered when a different doctor requested a scan. Pain had caused caller to lose many days at work through sickness. Has made a complaint to the surgery and received a response which has not proved to be satisfactory. The Practice gave out-of-date information to the caller about options for making a complaint.

**Action taken**
Informed caller of NHS England complaints procedure and ICA who can offer support. Sent details of both in post to caller. Caller was also considering taking legal action. Informed we are unable to signpost to a solicitor but that Citizens Advice Bureau would be able to help. Caller informed me she already had a solicitor in mind.
Healthwatch Redcar and Cleveland
Catalyst House
27 Yarm Road
Stockton-on-Tees TS18 3NJ

Contact us:
healthwatchredcarcleveland@pcp.uk.net

General office enquiries
01642 688312

Freephone 08081729559 for information and signposting to local health and social care services and support

This information can be made available in large print, Braille, audio and other languages