# The value of listening

Healthwatch North Yorkshire Annual report 2023-2024



North Yorkshire



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## Message from our CEO, **Ashley Green**

Over the last decade, Healthwatch North Yorkshire has empowered thousands of people to share their personal experiences of care.

In sharing those experiences, members of the public have demonstrated the power they have to show what is and isn't working about our health and social care system. They have been pivotal not only in identifying the issues, but in highlighting how to make real and lasting change.

The last year has been another busy time for us. Our staff, trustees, and volunteers all deserve praise for their commitment and hard work. They have ensured that through listening to the public we help bring about better care for people.

It's been rewarding to see improvements in services and care due to actions taken by NHS commissioners, providers, and North Yorkshire Council based on our report recommendations. For example, enhanced independence through accessible health information, quick support for mental health issues at GP practices, and improved continence support. I thank those working in health and social care, as well as community organisations and volunteers for their valuable work.

We look forward to continuing our work which we set out in our ambitious three-year plan (2023-2026) to make sure people have a say about their care. I hope you find our annual report informative and useful, and I welcome the opportunity to work with you over the next year.



"We're here to represent the views of the public and their loved ones and improve care and services across North Yorkshire."

Ashley Green, Chief Executive Officer, Healthwatch North Yorkshire



## **About us**

## Healthwatch North Yorkshire is your local health and social care champion. We are independent.

We make sure health and care leaders, and 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 are:

- 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



## **Year in review** 2023-2024

## Reaching out:

### 3,626 people reached

People we spoke with and raised awareness about who Healthwatch are and how we can help



## 2,468 gave feedback

Spoke to us through our website, events, phone and surveys about health and social care issues

### Making a difference to care:

We published

### 22 reports

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



Our most popular report was

### **Continence** care

which highlighted the stigma over talking openly and the struggles people face accessing the support they need

### Health and social care that works for you:

We're lucky to have 35 outstanding volunteers who gave up their time to make care better for our community



We're funded by North Yorkshire Council

We currently employ

In 2023 - 24 we received £168,792 which is 0.6% more than the previous year.

4 staff

who help us with our work

## Our digital reach 2023-2024

### Website

### 35,260 webpage views

People accessed news about local health and social care services plus our advice and information articles

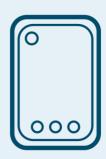
19,457 visits to our website



### Social media

We reached more people this year than ever to tell them about Healthwatch and how we can help

152,800 people reached on Facebook 3,900 people reached on Instagram



### **Email newsletter**

We sent out 15 newsletters about our local and national work as a people's champion

Our newsletters were opened a total of 4,718 times

Our most popular newsletter covered people's experiences of mental health services



## How we've made a difference nationally



We drew attention to the "hidden waiting list" created by delays to GP referrals



We took steps to get people the support they needed while waiting for planned care



We highlighted the increasing issues people have getting mental health support, contributing to the release of a primary care recovery plan



We called on the NHS to review and update the Accessible Information Standard to make sure everyone gets the care they need



Our "share for better care" campaign campaign encouraged more people to share their experiences to help improve care



We revisited the issue of maternal mental health, leading to updated quidance for GPs on six-week postnatal checks



The NHS ran a campaign around the NHS app and how it can help patients after we highlighted the need to increase confidence in the NHS



We highlighted the impact of the soaring cost of living on healthcare

## Your voice heard at a wider level **North Yorkshire**

We work with other local Healthwatch to ensure the experiences of over 615,000 people living in North Yorkshire influence decisions made about services within the NHS and social care.

### Hearing what matters to young people



Across Humber and North Yorkshire, we have been recruiting young community connector volunteers to listen to other young people's views.

We have also launched a survey, focusing on hearing experiences relating asthma, diabetes, epilepsy, oral health and mental health. This is part of helping NHS England make improvements to services, particularly in coastal areas. We have partnered with Coast and Vale Community Action to help us deliver this work across Scarborough.



### Making sure people feel equal

Local Healthwatch attended a workshop to help NHS organisations in Humber and North Yorkshire improve performance for people receiving care who have protected characteristics.

What are protected characteristics? The Equality Act 2010 sets out age, disability, gender reassignment, marriage and civil partnership, race, religion or belief, sex, and sexual orientation.

Our role was to assess and score evidence to influence fair treatment and equal care for all. This is part of an ongoing review by the local NHS, and we will be holding them to account to make sure this happens.

## Your voice heard at a wider level Craven

We work with other local Healthwatch to ensure the experiences of over 50,000 people in Craven (covered by NHS services in West Yorkshire) influence decisions made about services within the NHS and social care.



### People's experiences of end-of-life care

We heard from 143 people who shared their and their loved one's experiences of receiving end-of-life care, to ensure we reached people who don't always feel heard.

From these experiences we produced a comprehensive report which highlighted a need, for example of a more person-centred approach and systems needing to be built for diversity and understanding people's different and individual needs. The experiences captured in the report will feed into the local NHS's work to assess people's needs and ensure the right care.



#### "Life on hold' - Neurodiversity report

Healthwatch and the West Yorkshire Voice created a report on neurodivergent people's healthcare experiences.

Most people said they feel like their lives are on hold while waiting for an assessment, diagnosis or support. Feedback from people with autism or attention deficit hyperactivity disorder has informed discussions with the NHS and we have agreed to continue to hear feedback from people who don't always feel a part of a conversation or having a say on their care.



## Listening to 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 those people and organisations responsible for providing and commissioning care.

### Getting people talking about continence

We published findings of the experiences the public shared with us about trying to access good continence care and how it was for them. Thanks to this insight, the NHS are working to simplify this process so people can better understand what to expect.

You shared worrying experiences with us that not enough people are talking. And more needs to happen to make sure continence is flagged at the earliest opportunity and pathways to diagnosis and treatment are as smooth as possible.

## 14 million people affected

by bladder and bowel health in the UK



#### What people told us about continence care

- Incontinence affects people of all ages and genders.
- There is a taboo around discussing it seriously, leading to embarrassment and jokes.
- Access to quality incontinence products varies.
- Public facilities often lack suitable toilets for all genders.
- The impact on mental health is often overlooked in care services.

#### What difference did your views and our report make?

- York and Scarborough Teaching Hospitals NHS Foundation Trust have introduced a tool for continence screening within 72 hours of a patient being admitted to hospital. It quickly determines the person's continence related needs.
- Harrogate and District NHS Foundation Trust have updated their website to contain information on how people can access continence services including self-referral. They also provide health promotion leaflets which people can access (including a contact phone number and the names of key staff involved in the specialist continence service).
- North Yorkshire Council will review the option for including continence poverty into their work for improving public health.

### Making mental health services better for you

With one in four people in England experiencing a mental health condition, people in North Yorkshire feel more needs to be done. We undertook a major engagement project across North Yorkshire to hear from people and to understand the challenges they faced in using and accessing mental health support.

#### How are our people feeling?

- People felt that services didn't always cater to individual needs and that a more person-centred approach was required.
- People felt that they had more complex lives with multiple issues affecting their mental health, from housing and finances to relationships and education.
- People were feeling passed between services and that this was causing more harm than good.
- People were ending up on multiple waiting lists and having to repeat their story to several different people, which was causing additional stress and anxiety.

#### Your feedback is helping make things change:

- New first contact mental health practitioners have been recruited across North Yorkshire, with plans to hire more throughout 2024 and 2025. These practitioners serve as the initial point of contact for mental health assessments.
- Community mental health groups in Harrogate, Scarborough, Selby Vale, and Hambleton and Richmondshire have used our report recommendations to plan their work and budget allocations.
- Pilot projects have been launched to support individuals with severe mental illnesses, including a link worker programme and an allotment-based project to boost confidence.
- Specialist roles for adult eating disorders and complex emotional needs have been introduced for early intervention access.
- Mental health hubs will be established in North Yorkshire to provide support to people.
- Tees Esk and Wear Valley NHS Foundation Trust, who provide mental health services across the county, is expanding services for individuals with eating disorders. This includes new early intervention roles and working with Beat to provide support and training.

## Three ways we have made a difference in the community

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

### Acting on what older people have told us

We have undertaken visits to care homes to ensure that those people who don't always have a voice are heard.



Our visits and reports have led care homes to implement new initiatives supporting more residents in physical activities, social events, and interaction. They have reassessed staffing levels to meet residents' needs and have prioritised updating and discussing care plans with family and carers.

### Getting services to involve the public

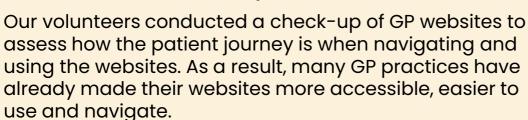
Services need to understand the benefits of involving local people to help improve care for everyone.



We worked with Medequip, who supply equipment and aids to help people live more independently at home and after coming out of hospital. They have committed to improving communication and delivery timescales, improve staff training, and ensure that the equipment provided meets the needs of the user.

### Improving GP websites over time

Change takes time. We work with services to consistently raise issues and call for improvements to be made.







## Hearing from all communities

Over the past year, we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently to gather their feedback and make sure their voice is heard, and services meet their needs.

### This year we have reached different communities by:

- Getting people to share their experiences to make more people aware of why it's important to give feedback about their experiences of using health and social care services.
- Spoke with people across rural areas to hear why they're struggling to access the care they need, including veterans and people living with neurodiversity.
- We heard from older people and those living with dementia as part of our visits at care and nursing homes, hearing about experiences and how things can be improved.

**GP practice sees** patient satisfaction improve



#### Trialling a new way of working to improve access to a doctor in Skipton

Dyneley House Surgery in Skipton is improving doctor access for 14,000 patients by having doctors work alongside care coordinators to provide advice and support.

This new approach has shown positive results, with patients reporting increased confidence in accessing the right care. Staff relationships have also improved, leading to better patient care and more manageable call volumes with reduced wait times.



"By creating a closer working system for our care coordinators and clinicians we've been able to make sure that all the patients that need our help are consistently getting the quality of service they deserve.

"With support from the doctor, our care coordinators are able to make early decisions, prioritise patients with the most urgent health needs, ensure patients see the most appropriate clinician or are signposted to alternative services.

"This service has freed up GP time, so they can focus on more complex patients and still see the high numbers of people coming through the doors."

- Dyneley House Surgery

### Supporting a healthier Selby

Thanks to local feedback, those responsible for improving health and well-being in Selby Vale, are setting out priorities around reducing health inequalities; focussing on mental health, frailty and ageing well.

Healthwatch North Yorkshire and Up for Yorkshire heard how people felt about good health, their experiences of keeping themselves healthy, and their interactions with healthcare providers.

#### Your feedback has helped

- More funding and support for those experiencing health inequalities to participate in physical activity locally.
- Our findings also contributed to the insight gathering for a new plan (North Yorkshire Joint Health & Wellbeing) from 2023 to 2030.

## Creating person-centred care in Scarborough, Selby and Malton

NHS services have taken steps to make care better for those patients who are most in need after work by local Healthwatch to listen.

There are ongoing challenges in urgent and emergency care services, including ambulance delays, long waits in A&E, and a significant number of postponed operations and appointments in England. This is compounded by limited GP access, inconsistent care, travel difficulties, confusion about urgent care options, and communication issues.

This situation is reinforced by a national picture of 819,000 operations, procedures and appointments in England having been postponed over the last year, adding to the 7.5 million people nationally waiting to start routine hospital treatment.

#### You said, we did

Local hospitals and GPs in York, Scarborough, Malton, Whitby, and Selby are working together to improve healthcare services. A new GP out of hours contract has been agreed and York Hospital will now run urgent treatment centers across York & North Yorkshire. They now share a health record system to improve communication and cooperation. This service has been in operation since April 2024.

### Breaking down the barrier of rurality

It's essential that care is not only available, but that people can access it



With a population of over 615,000 spread across a vast area, with only eight towns having more than 10,000 residents, this presents challenges for residents in terms of accessing services, dealing with isolation, and transportation.

Public research conducted by us and York St John University examined how rurality impacted people's access to health and social care.

#### How your views are changing things

Rurality is being brought to the forefront of NHS and North Yorkshire Council's plans to make things better.

- The local NHS in Harrogate & district is working to reducing rural health inequalities, including reducing long waiting times in rural locations, with a particular focus on dementia patients.
- In Hambleton and Richmond, the NHS is trialling a project to group hospital appointments by postcodes, piloting clinics in village halls, allowing self-referrals, and improving coordination between NHS and community organisations.

### Making information accessible to all

Over the last year we have continued to champion the views of those people who often struggle to access, understand and receive their health and social care information in a way that meets their needs.

The Accessible Information Standard is a law to make sure people who have a disability, impairment or sensory loss are given information they can easily read or understand. We have highlighted the daily challenges for those with communication needs to get the accessible healthcare information they're entitled to. This has led to improved rights and, crucially, more people being able to exercise those rights and get the support and information they need.

#### We have asked that:

- Services are held accountable for fully delivering the standard.
- Every health and care service has an accessibility champion appointed to lead their service's accessible policy and delivery.
- Better technology and systems are available so patients can update services with their communication needs.
- People with communication needs are involved and can regularly give feedback on their experiences to ensure continuous improvement.
- Training is made mandatory for all health and care staff.

People feel communication in the NHS is slow, inefficient, and lacks empathy. The NHS needs to prioritise quicker access and better customer service for booking appointments and answering questions.

### How your views are changing things

- The NHS in Harrogate have produced an easy-read format for their friends and family test and feedback forms for patients, carers, children and young people.
- The NHS in York and Scarborough produce letters for patients using a system called Synertec in a person's preferred format automatically. The system automatically creates large print, Easy Read and other versions based on a person's need.
- The NHS in South Tees now provide hospital passports for patients, their families and carers to improve patient' information



## **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 or making a complaint – you can count on us.

This year we've helped people by:

- Providing up-to-date health & care information that people can trust
- Helping people access the services they need, such as community transport
- Supporting people to access NHS dentistry
- Supporting people to look after their health during the continued costof-living crisis

**Making NHS** dentistry better and fairer



A new recovery plan has been created to ensure that people have clear, accurate communication about their care – and get to see a dentist.

The NHS and the Government published a plan in February 2024 to improve (recover) NHS dentistry, setting out a new focus on prevention and good oral health in young children, and an expansion of the dental workforce.

Evidence from across North Yorkshire tells us that people on low incomes, children and women, have particularly found it difficult to get an NHS dental appointment. But your feedback is helping to change things.

### The power of your feedback so far

- £50 million extra funding from NHS England to support dentistry.
- NHS dental practices were asked to complete a survey from NHS England to make the case for new dental services by providing up-todate information on unmet patient needs and workforce capacity.
- NHS dentists will be given a 'new patient' payment of between £15-£50 (depending on treatment need) to treat around a million new patients nationally who have not seen an NHS dentist in two years or more.
- A new 'Smile For Life' programme will be rolled out across England to offer parents and parents-to-be advice for baby gums and milk teeth, with the aim that by the time children go to school, every child will see tooth brushing as a normal part of their day.
- Dental vans will help deliver dental treatment to people in rural and coastal areas, including North Yorkshire.
- New NHS dental practices have been opened in Scarborough, Whitby, Helmsley and Thirsk.



## 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.

#### This year our volunteers:

- Reviewed GP websites, looking at how easy to use, up-to-date and accessible they were to help see improvements made across all GP practice websites in North Yorkshire.
- Supported our project on mothers' experiences of community postnatal care, mapping out mum and baby groups across North Yorkshire and looking at what literature is available and where the gaps are.
- Carried out visits to care and nursing homes to hear about people's experiences as part of our enter & view visits.
- Introduced more people to Healthwatch, and listened to experiences and suggestions for change so providers can act on them.



"I wanted to volunteer for an organisation that gave me new experiences. The Healthwatch North Yorkshire team give me the ability to complete tasks that give me a connection to the community and a sense of purpose. I now understand the unique issues locally.

I enjoy helping people and making a difference. The health and social care sector is so important for everyone, and I appreciate the opportunities that Healthwatch has given me to listen to diverse communities and promote local voices and opinions to try and make care better."



Sally Healthwatch volunteer



"My colleague suggested I volunteer as she felt I had something to offer. Over 20 years I had undertaken several health and social care related projects. I felt volunteering would be an exciting thing to do with my knowledge and skills.

"It has allowed me to still feel involved in the health and social care sector, but from the other side of the fence. I've had to look at issues as a person accessing services rather that someone who delivers services. It's been a steep learning curve, but it's been one that I have enjoyed and found fulfilling."



Lesley Healthwatch volunteer

### Do you feel inspired?



We are always on the lookout for new volunteers, so please get in touch today.

www.HealthwatchNorthYorkshire.co.uk/Volunteer

**©** 01423 788 128



## Finance and future priorities

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

Our income and expenditure reflects a planned spend from our reserves of £43,189.

Income		Expenditure	
Annual grant from Government	£168,793	Expenditure on pay	£182,391
Additional income	£26,617	Non-pay expenditure	£38,934
		Office and management fees	£17,274
Total income	£195,410	Total expenditure	£238,599

## **Additional funding**

### What we received

Who funded us and the purpose of it	Amount
<b>Healthwatch England</b> For organising and hosting a Healthwatch Yorkshire and Humber event	£2,800
West Yorkshire Health and Care Partnership (an integrated care system) For continued work to listen to experiences and ensure the public's voice is heard at meetings with the NHS	£5,000
West Yorkshire Health and Care Partnership For end-of-life care project work (a report of experiences and recommendations)	£650
Humber and North Yorkshire Health and Care Partnership Work on recruiting volunteer community connectors to listen to young people's experiences of healthcare	£12,500
York Health and Care Alliance Hearing people's experiences of urgent treatment centres to help providers make improvements	£2,450
Medequip For listening to local people's experiences of the equipment and aids service to help them improve their service for people living more independently at home and after returning from hospital	£2,900

## **Next steps:** Our future priorities



Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

We will listen and learn from patients and the public to make care better.

- We will complete our review of community and at home postnatal care for mothers after birth, exploring the availability and quality, with a specific focus on understanding mothers' experiences.
- We will work with the farming community to hear what health and wellbeing issues affect them, what the barriers are for accessing health services and explore what would facilitate them to seek help sooner.
- We will expand our reach and awareness, so more people know about us via digital communication and through the expansion and development of our volunteer network.
- We will continue our visits to care homes across the county to ensure some of the most vulnerable people are heard and their feedback and experiences are acted upon.



"Local Healthwatch have shown what happens when people speak up about their care, and services listen. They are helping the NHS unlock the power of people's views and experiences, especially those facing the most serious health inequalities."

Louise Ansari, Healthwatch England





## Statutory statements

Healthwatch North Yorkshire, 55 Grove Road, Harrogate, HG1 5EP

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

### The way we work

#### Involvement in our governance and decision-making

Our Healthwatch board of trustees consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny of our activities. They ensure that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2023/24, they met six times and made decisions on matters such as staff and trustee recruitment, policy and finance review, and procurement for our current Healthwatch contract.

We ensure wider public involvement in deciding our work priorities.



### How we heard people's experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services. During 2023/24, we have been available by phone, and email, provided a web form on our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this report is made available to as many members of the public and managers in the NHS and North Yorkshire Council as possible. We will publish it on our website, share it via our monthly newsletter, promote it via social media, have printed copies available for people and share the report with volunteers and community organisations.

### The way we work

### Responses to recommendations

We have worked with health and social care providers to ensure our reports are acknowledged and acted on. Despite challenges due to the complexity of the system (with multiple health providers and two integrated care systems), we have received responses from most of our providers and commissioners. Any outstanding responses, such as from NHS hospital trusts or integrated care systems, have been escalated.

The only report without a response (from the NHS or North Yorkshire Council) is our rural health inequalities report from October 2023. No issues were escalated to Healthwatch England committee, resulting in no additional reviews or investigations.



Why people living in our rural areas struggle to access the care needed



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

We ensure that people who can make decisions about services hear about the insights and experiences that have been shared with us. For example, we share a monthly insight register of public feedback with organisations such as North Yorkshire Council, acute & mental health NHS services, primary care, Care Quality Commission. This is alongside sharing Healthwatch reports.

We also take insight and experiences to decision-makers at integrated care systems (<u>Humber and North Yorkshire Health and Care Partnership</u> and West Yorkshire Health and Care Partnership (Includes Craven). We also share our data with Healthwatch England to help address health and care issues at a national level.



## Visits to care homes

We have a legal power to visit hospitals and care homes and see them in action. This is called 'enter and view'.

It offers a way for us to meet some of our statutory functions and to identify what is working well with services and where they could be made better.

#### **What Healthwatch do:**

- Visit and gather views of the residents and patients, their relatives and the experiences of the services provided.
- Observe the ongoing care being provided for the residents and their interaction with staff and their surroundings.
- We ask for a response from to our recommendations with actions that are being taken or are planned to be and when these will take place.

Location	Example of recommendation and action taken
Scorton Care Village	<ul> <li>Recommendation: Update the decoration in Elizabeth House and include dementia friendly elements, including colour contrast on toilet seats, switches, and rails.</li> <li>Actions taken to date:</li> <li>Elizabeth House has an action plan in place to improve the decoration and dementia elements, this includes creating five new bedrooms, a laundry section, staff/training room, administration office, maintenance section.</li> </ul>
<u>Hambleton Grange</u> <u>Care Home</u>	<ul> <li>Recommendation: Encourage agency staff to wear name badges to help the residents interact with them.</li> <li>Actions taken to date:</li> <li>The home has introduced name badges for all agency staff. Additionally, recruitment and reliance on agency staff has reduced.</li> </ul>
Scarborough Hall Care Home	<ul> <li>Recommendation: Review mealtime protocols and staffing levels to ensure sufficient staff are available in the dining room throughout the meal rooms.</li> <li>Actions taken to-date:</li> <li>Staff rotas have been reviewed at lunchtime to ensure no staff have dinner breaks during resident mealtimes, as well as host staff being available to help during mealtimes.</li> </ul>



Location	Example of recommendation and action taken
Rosedale Nursing Home	<ul> <li>Recommendation: Review the staff well-being support policy to ensure that appropriate and relevant support is offered to the team and some concerns about workload addressed.</li> <li>Actions taken to date:</li> <li>The home has reviewed this policy and has put in place a huge range of rewards and support for employees.</li> <li>The rewards manager is planning to visit the home to explain all the rewards on offer.</li> </ul>
<u>Saint Cecilia's</u> <u>Nursing Home</u>	Recommendation: Evaluate staffing levels on weekends, holidays, and during shift handovers to ensure consistent care.  Actions taken to date:  • This was assigned to the manager and clinical lead who now reviews the staffing dependency tool every Friday.

Location	Example of recommendation & action taken
<u>The Mill House</u>	<b>Recommendation:</b> Enhance room signage for better recognition and accessibility. Consider adding local-themed decorations to connect residents to their surroundings.
	Actions taken to date:
	<ul> <li>They have memory boxes next to each bedroom door to hold items such as photographs that mean something to the resident to help them identify their room There is a name plague on each door, but the residents respond better to the memory boxes and room numbers to help them find their rooms.</li> </ul>
	<ul> <li>If a resident needs a larger sign on their door, then this is something that they put in place for them.</li> </ul>
Mount Vale Care Home	Recommendation: Ensure that activities are accessible to all residents with an interest in participation and look for opportunities for one-to-one interaction for those unable or unwilling to participate in group activities.  Actions taken to date  • Work closely with the provider of 'Oomph' which was created to bring personalised wellbeing to every care home resident, partnering with experts in areas including dementia, mental health and arthritis. Oomph has a specialist range of content and activities, such as Zoo Lab, Instructor Live and Arthritis Action, Archery UK, amongst others.  • Upon admission, individuals provide their life history and communicate with their next of kin / family and friends to incorporate their past into their hobbies. Care plans are personalised to reflect individuals' needs and capabilities for tailored activities.

### Healthwatch helping you to be heard

Healthwatch North Yorkshire is represented on the North Yorkshire Council Health and Wellbeing Board by Ashley Green, Chief Executive Officer. Ashley also meets with the <u>Humber and North Yorkshire Health and Care</u> Partnership and West Yorkshire Health and Care Partnership to bring the people's experiences and recommendations for change to the decisionmakers to act on it.

### 2023 - 2024 reports

Report
<u>Enter and View – Scorton Care Village</u>
Being healthy: Ideas and reflections from Selby
Enter and View – Hambleton Grange Care Home
Enter and View – Scarborough Hall Care Home
Why it's time to talk about continence
Public's experiences of mental health services
Healthwatch shares insight into experiences of mental health support (Craven and West Yorkshire)
Insight into the public's health and care views
<u>Enter and View – Rosedale Nursing Home</u>
Why people living in our rural areas are struggling to access care
Enter and View - Saint Cecillia's Nursing Home

#### **Report**

What are people's experiences of urgent care?

GP websites health check

Making aids and equipment services work better for people

Focus on winter – your experiences of health and care (West Yorkshire and Craven)

Insight into your health and care views

People's experiences of end-of-life care (West Yorkshire and Craven)

<u>"Life on hold" – Neurodivergent people and healthcare experiences</u> (West Yorkshire and Craven)

Hospital care (West Yorkshire and Craven)



## healthwatch North Yorkshire

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