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| A blue and green curved line  AI-generated content may be incorrect.  **Work Programme** |
| **April 2025 – March 2026** |

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**STATUTORY REQUIREMENTS OF A LOCAL HEALTHWATCH**

**1.** To obtain the views of local residents on health and social care services, to help shape the delivery and improve the quality of the design and commissioning of services.

**2.** To make recommendations to service providers and commissioners in developing, designing, shaping, and improving the quality-of-service delivery.

**3.** To support the involvement of local residents in the designing and commissioning of local services.

**4.** Provide information and advice to inform local residents on choices available to them.

**5.** To escalate findings to local commissioners and providers and nationally to Healthwatch England along with recommendations for service change.

Introduction

**About us**

Local Healthwatch organisations are established under the Health and Social Care Act 2012 to be a champion for people using health and social care services. Healthwatch Bedford Borough is hosted by Engaging Communities Solutions CIC (known as ECS) - a community interest company with a focus on delivering Healthwatch, social research and advocacy services. Healthwatch Bedford Borough (HBB) will elevate the voice of health and social care service users and ensure they have an opportunity to speak and be listened to about their concerns and praise of their health and social care experiences.

We will ensure the views of the public and people are considered by those who commission and provide services.

**Our responsibilities**

By law, all local Healthwatch are required to:

* Provide information and signposting about health and social care services.
* Monitor concerns and complaints.
* Enable people to feed back about their experiences of health and social care services.
* Collate information and compile reports about people’s experiences and views.

Local Healthwatch have the benefit of a national umbrella organisation, Healthwatch England, from which HBB receives support. Healthwatch England collects intelligence from the Healthwatch network, identifying national themes and producing reports on common areas of concern. They can raise issues at a national level.

**We will meet our responsibilities by:**

Listening to people from all communities in Bedford borough; helping to involve people in decisions about their care and how it is delivered, giving people information to make choices about their health and care and working in partnership to make change happen.

Healthcare decisions affect diverse groups of people, so it is essential that all voices are heard - not just those of professionals or the majority population. Listening to people from all communities means creating processes that recognise and respect differences in culture, language, religion, socioeconomic status, gender identity, disability, and lived experience.

**Why it matters:**

1. **Equity** – Different communities often face unequal access to care or have unique health needs. Listening ensures those differences are addressed.
2. **Trust** – Involving patients, families, faith and community representatives builds stronger trust in healthcare systems.
3. **Relevance** – Policies and services are more effective when shaped by the actual experiences of those they serve.
4. **Cultural Respect** – Recognising traditions, beliefs, and values ensures care is delivered in ways people feel comfortable accepting.
5. **Better Outcomes** – Research shows that when patients and communities participate in decisions, health outcomes improve.

**Priority areas from April 2025 to March 2026**

Across a 5-week period in February and early March 2025, Healthwatch Bedford Borough conducted a Priority Listening Survey, speaking with local people about what they wanted us to focus on for the next 12 months. **We received 461 responses**, which helped us determine our work priorities for the year ahead.

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| **Strategic/organisational** | | |  |
| **Aim** | **What are we going to do** | **Measure of success** |  |
| To improve strategic oversight of the organisation | * Recruit new board members with skills and experiences that can contribute to the development of the organisation * Ensure volunteer base reflects socio-economic and demographic of the borough population * Professionalise how the board delivers its required function | * Increase the numbers of our ISAB members * Improve the skills and experience of our ISAB members * Reflect demographics * To undertake a board assessment * Ensure the ISAB receives the necessary training and support to fulfil its role during the year. |
| Increase volunteer base | * Recruit volunteers that reflect our local population | * Increase numbers of active volunteers * Increase hours of volunteer contributions |
| Increase visibility and accessibility to the organisation | * Develop organisational values that will support our local population * Increase visibility of ISAB meetings * Improve reputation of the organisation * Review communications profile and management | * Improve accessibility and visibility of board through increased meeting events and borough locations * Improved public attendance at meetings * Increased contacts of outreach work * Increase an organisational awareness rather than individual relationships * Increased reputational presence |
| **Operational** | | |  | |  |
| **Aim** | * **What are we going to do** | * **Measure of success** |
| Access to safe quality and timely mental health provision  Improved local personal provision of mental health services | * Build on strong relationships so that providers are receptive to Healthwatch intelligence * Make sure our intelligence is used by providers to develop services * Support providers through our outreach work | * To see a reduction in mental health associated complaints * Experience increase in positive comments on mental health service provision * Active HBBs participation in mental health transformation planning |
| Act as a barometer of the hospital discharge process | * Engage with local authority on HD process and intelligence understanding * Engage with Bedford hospital in intelligence understanding * Engage with advocacy services to develop impactful intelligence on discharge process * Ensuring both provider and commissioner have access to the same data | * Reduction in patient complaints over hospital discharges * Increase in patient feedback |
| Contributing to compassionate, empathetic end-of-life care | * Share intelligence with end-of-life transformation commissioners and providers offering palliative care services | Increase positive experiences of those using palliative care and end-of-life services:   * Capture the experience of good deaths by looking at control and autonomy in decision-making about care, treatment, and where they die. * Freedom from pain and suffering – exploring how symptoms are managed effectively, so physical and emotional suffering is minimised. * Dignity – Understanding whether loved ones feel the patient was treated with respect, privacy, and compassion. * Closure – Looking into whether opportunities were provided to say goodbye, resolve relationships, and attend to spiritual or personal matters. * Support for loved ones – Capture the experience of family and friends to see whether they felt included in the process and receive guidance and support. * Peaceful environment – Understanding whether the person died in a setting they were comfortable with (e.g., at home or in hospice). * Consistency with cultural beliefs and values – Understanding whether the death aligns with the person’s cultural, religious, or personal views. |
| Attend statutory committees | * Senior attendance at statutory committees of Health Overview and Scrutiny Committee and Health and Wellbeing Board | * Recorded attendance and active participation in discussions |
| **Projects** | | |
| **Aim** | **What are we going to do** | **Measure of success** |
| Unpaid carers tender | Facilitate focus group on behalf of local authority to support development of tender specification for unpaid carers support | * Production of focus group report * Development of a ‘quality’ question for tender document |
| Palliative care/End of Life (EoL) Care | Facilite a focus group on behalf of the BLMK ICB to understand how the current approach impacts on people’s lives from specific communities   * Explore how local residents understand, experience, and want to be communicated with about EoL care options and to co-produce practical outputs that support both communities and clinicians in having better conversations. * Look at how people who have been through the process think the approach could be improved * Look at the role of the voluntary and community sector in supporting people through the EoL process * Explore how people would like to be involved with monitoring EoL care in the future * Look at what type of information people would like to receive and how this should be communicated * Aim to destigmatise death and dying through education and open conversations * Understand local people’s knowledge of of EoL pathways and advanced care planning * Explore whether BLMK ICB and providers of EoL care use culturally and religiously appropriate and sensitive communications | * To engage participants in open dialogue in a safe space in relation to what was good or bad and to expand on the context * To measure the impact of their experience. Participants will discuss what could have been different to make their experience(s) better. * Identify learning gaps in how residents and clinicians approach EoL conversations with particular observation to terminology and sociolinguistics. * To ensure loved ones have their voices heard * Highlight health inequalities, ensuring cultural and religious perspectives are built into EoL system planning utilising HBBs language skills. * To reflect on views from carers/relatives on:   -at which point(s) in the EoL journey feedback should be sought  -how the information should be requested  -how families want to be kept informed  -how information about what will happen during the EoL journey will be given   * Report findings into the relevant ICB EoL steering groups to shape comms and workforce education training programmes. |
| Additional funded projects | * Healthwatch Bedford Borough will look at opportunities to take on additional funded projects or pieces of commissioned work that are aligned with our mission and values. | * To generate additional income of 10% of the contract value to help sustain the current contract delivery and enhance the delivery offer |

**Supporting patient experience**

As well as our annual priority projects, HBB will continue to deliver its objectives supporting patient experience.

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| **Strategic/organisational** | | |  |
| **Aim** | **What are we going to do** | **Measure of success** |  |
| Enter and View Programme | The Enter & View schedule is determined by intelligence received, follow-up actions from previous visits and following discussion with the CQC. | * Undertake required 12 visits * Exceed to a stretch target of 24 * To publish intelligence/insight reports on a regular basis. |
| Public Feedback | We will encourage the public to give feedback on their experiences of using local health and social care services. | * To collect the experiences of 1,000 people between April 2025 and March 2026 * Regular reports to the Independent Strategic Advisory Board (ISAB) * Reports will be published based on the intelligence we receive from members of the public and sent to the relevant Boards, commissioners and Contract Monitoring Officers. |
| Visibility and accessibility | We will ensure our services are widely available, accessible and promoted in a range of formats.  Our media platforms will provide regular updates on engagement topics, service delivery changes and enable networking with other organisations. | * To see an increase in engagement numbers through Facebook and Instagram. * To ensure that the website is updated regularly with relevant topics and issues. * To launch our first official TikTok account to consider the needs of the younger population. |
| Volunteers | In playing an essential role in the delivery of HBB services, we will aim to recruit, upskill and value volunteers, providing opportunities for social inclusion, skills and confidence development, and support routes into employment | * Increase volunteer base * Measure positive impact of volunteering with HBB |
| Community Outreach & Engagement | Continuing to seek the views of people, HBB will visit a range of community groups and outreach events to seek patient and public opinions and views.  HBB will seek to engage with hidden communities such as people with learning disabilities and/or Autism Spectrum Disorder (ASD), people living with mental illness and people with sensory impairment.  We will use a range of engagement models including virtual | * To undertake 120 outreach activities   . |

**Linking Healthwatch Bedford Borough to BLMK priorities**

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