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66 We have been [doing] what we enjoy most; getting out and speaking with York residents, whose voices we are here to represent. 99		
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Message from our Chair

Welcome to Healthwatch York's 2021/2022 Annual Report.



It's been another challenging twelve months which began when we were still working under government Covid-19 restrictions but, as we go

out to publication, ends in a

period when we have been able to do what we enjoy most; getting out and speaking with York residents, whose voices we are here to represent.

As a team we have said goodbye to valued colleagues and welcomed new ones. The world of health and social care is ever changing, and we have developed roles to enable us to adapt to these changes. We now have a dedicated information officer as well as a volunteers and engagement officer. These posts, alongside our

information guides, will support people to navigate their way through the health and care services in York.

We are proud of our partnership working and our connections across the statutory, voluntary, and private sector and our York community. Between us the team are members of over 40 different meetings and networks. We are using those partnerships to develop a voice network, York volCeS. The network will bring together professionals and the public to share their experiences, and to hear about what is happening locally - particularly important as we move into the new Integrated Care Systems across England from July 2022.

This year we undertook an extensive piece of research into NHS dentistry provision within York. Our reports received media coverage and were referred to by our MP in the House of Commons. Highlighting these local issues has fed into the national debate regarding the need to change how dental services are commissioned.

In response to local issues raised with us, we have begun producing snapshot reports which highlight concerns around a particular topic. Most recently we have circulated a report on access to GP surgeries. Whilst representing individuals' issues, the report opened meaningful conversations with GP practices, enabling

66 Between us the team are members of over 40 different meetings and networks. 99

us to fully understand the challenges they're facing and to discuss practical and achievable solutions to the issues raised.

I hope you will enjoy this Annual Report in which you will read about the team and the work that has been undertaken. I am proud to be the Chair of Healthwatch York and proud of the work undertaken by the team through such an everchanging environment. As we move into what will be another challenging year for many, we will continue to represent your issues and concerns and push for improvements within your local health and care services.

Janet Wright

Your health and social care champion

Healthwatch York at York CVS is based on a very simple idea – that the best people to help shape our health and care system are those who use health and care services.

We believe that by making sure people's experiences are right at the heart of decision making around health and care, we can make York work better for everyone. We can help you to find reliable and trustworthy information and advice.

We will:

- → Be responsive
- Understand what's really happening in relation to health and social care and speak up about it
- Use your words and stories to show the impact of services – good and bad
- Involve you in the work we do
- Champion your involvement in your health and care
- Work with existing partners
- Reach new people and partners

Our Mission



66 Healthwatch York puts people at the heart of health and social care services, enabling you to be heard.

We believe that together we can help make York better for everyone. 99



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Impact summary



experiences of health and social care services shared with us and logged...

...experiences that we then carried forward in our reporting and engagement work.



informative responses provided via our information and signposting service

237





attended by the team to advocate for changes in health and care, and capture user experience



bulletins and four magazines

circulated to local residents and professionals to inform the public of local services and system changes



published reports

sparking evidence based conversations with service providers and used to generate and inform wider discussions.



surveys published& nine promoted

inviting the community to contribute to improvements in local health and care services.





received up to date and trusted information

on local health and care issues by post or email (308 posted, 515 via email)

Publications

Our Mental health and dementia guides have been updated.

And a Christmas service list was published – helping professionals and the public to navigate local health and care systems.

Impact summary (continued)

And the team that makes it happen...



staff members:

(From left): **Emily, Roger, Siân, Olivia, Rachael,** and **Helen**.

Feedback received on our Mental Health Guide:

66 An employee was struggling with knowing how to best support a family member / child and was desperate for help. Your guide provided answers when others couldn't, and helplines and contacts which could help, and in this instance, was life saving! 99



What matters to you

GP snapshot report

Every month Healthwatch York reviews what people tell us about their experiences. This information is gathered via our signposting, information and advice work and our online feedback centre.

We also work in partnership with other organisations to hear what all communities across York are saying.

Worryingly, but perhaps unsurprisingly, we can see from our data that York residents' experiences of accessing GP services matches the trends found by Healthwatch England, The British Medical Association and NHS England.

View the report: www.hwy.link/GPsnapshot



GP snapshot report

What we did

In November 2021, we published a report highlighting your experiences of accessing GP services during the pandemic.

These experiences had been shared with us throughout 2021. The report captures real experiences from York residents. We also worked in partnership with York Carers Centre, York Mind and Community Voices York to capture further detailed experiences.

Findings:

- The use of telephone and online consultations has increased the number of appointments available.
- However, demand continues to outstrip supply.
- Although digital triage solutions are working well for some, they have increased the risk of deepening existing health inequalities.
- There is a need to publicise and encourage take up of evening and weekend appointments to improve access to health care for workers.
- → There is a need for clear 2-way communication between GP surgeries and patients, allowing for expectations and understanding to be set.
- → There is a need for carefully considered access for parents supporting children.
- There is still a need for face-to-face appointments, particularly for disabled people and those with complex health issues.
- Simple changes can be made to address health inequalities locally, which will lead to a healthier and happier community.

Lorna is deaf and has trouble booking a GP appointment:

66 I haven't been able to contact my GP as they don't allow emails or text messages, I cannot go into reception, and they don't have an online facility to contact them. 99

York Carers summarises the experiences carers face. With support, carers are eventually able to access the care they need.

66 Generally there is a feeling of being overwhelmed at the thought of getting an appointment.

This is mainly around constant changes to systems causing confusion. Carers are being told to ring on the day; are not able to book ahead; no [consideration is made toward] work / caring roles; there's a lack of available appointments.

Trying to obtain an appointment becomes such a task and can go on for days. 99





This has led to further work within our information and signposting service, around patient/practice relationships and expectation. Through understanding the systems at play, we're able to provide sensible and actionable recommendations that partners are happy to work with us on.

We've raised awareness around the practice/patient relationship and the need for improved communication. For example, following concerns around the closure of a local surgery, we contacted the surgery to gain an understanding of what was going on. The surgery was able to inform us that due to reception recruitment issues, the reception has been closed in the afternoons – but the surgery is still making phone and urgent face to face appointments. We were able to inform the community of this, and allay fears that the GP was reducing its services and reassure people that the surgery was offering services as usual.

We opened conversations with groups such as Age UK York who wanted to discuss their specific issues. Other networks have also reached out to us wanting to know how they can amend their systems to better meet the needs of those they serve.

The information has fed into further work around Accessible information conducted in partnership with Healthwatch North Yorkshire.

From these findings we recommended

hearing your views. That's why over the last

from all areas of the community a priority. This

allows us to understand the full picture, and

feed back to services to help them improve.

year we have made listening to feedback

- Make patients more aware of options for call backs during evening and weekend and promote the Top Tips on how to get the most out of digital appointments.
- Provide clearer information regarding the provision of interpreter services.
- Review provision of interpreter services through contract monitoring.
- Develop better information for patients about options in accessing healthcare, including details of AHP roles in Primary Care and the benefits of accessing these.
- Urgently review access to online services for parents.
- Work together with those facing greatest difficulty in getting GP appointments to understand what could work better for them.

Peer Research Cafe

A case study

In the Summer of 2021 we trained a small group of researchers in participatory action research methods. All the participants had lived experience of homelessness/ addiction or mental health issues.

The researchers were all part of the York Multiple Complex Needs Network and Good Organisation.

The group organised a 'pop-up cafe' based at Carecent (a breakfast centre for all homeless, unemployed or otherwise socially excluded members of our community) and worked alongside attendees of the cafe to discuss issues in an informal but purposeful and safe way.

The research involved mapping, timelines of a day in the life, deeper analysis of homelessness, physical and mental health and access to services. The data from the research was analysed and themed through the autumn and used to present at key strategic meetings.

Astrid Hanlon at Good Organisation said:

66 ...watching Roger facilitate and as a result, learning some of the participatory research skills was invaluable. In the process a trusted space evolved, relationships were built and some interesting, valuable and unexpected data was generated. It was also fun, fun to do and fun to get to know people."

"Creating a trusted space that we could do that in was a critical part of the process and we will continue to use the space to gather more data with the hope to feed into potential change; we are using the research data as a platform to discuss ways to develop strategies with high level decision makers."

Miles Goring (Research Volunteer) said:

A humbling yet inspiring piece of work which truly allowed the individual to emerge. We were not interested in the people as statistics, we got to know them as human beings.

"I felt no better, no worse but privileged that they gave their time to engage with us. Really enjoyed having fun with people. Trust and a feeling of ease to share some deeper experiences in a place that participants may not have previously felt safe to do so."

The cafe is still meeting and gathering more data to help inform the York Poverty Truth Commission and feed into strategic thinking in a number of health and social care related networks across the city.

66 A humbling yet inspiring piece of work which truly allowed the individual to emerge. 99

What matters to you

Dentistry: Gaps in provision

Since Healthwatch York started in 2013, you have been raising your concerns about dentistry with us.

In 2018 we published 'Filled to Capacity: NHS Dentistry in York a Report Based on Local People's Experience', our first dentistry report that found it was difficult to access NHS dental care in the city.

At that time 46% of people that responded to our survey reported that they couldn't find an NHS dentist that was taking patients and 45% of people who had been looking for an NHS dentist said they had been trying for over two years.

This appeared to be an issue across all demographics, regardless of age, ethnicity and gender.

Gaps in Provision, January 2022: www.hwy.link/Dentistry



Dentistry: Gaps in provision

In July 2021 we published 'NHS Dentistry - A Service in Decay?' which exposed a continuing decline in access to NHS dentistry in the city.

Volunteers and staff at Healthwatch York contacted all 39 practices in the city. At the time of the research in May and June 2021 we found that no practice in York was currently accepting new NHS adult patients. We called for urgent and rapid reform of NHS dentistry.

What we did

In the Autumn of 2021 we launched an online survey for people in York about their experiences of accessing NHS dentistry in the city and complemented this with outreach sessions at a variety of locations including Carecent and Red Tower. We undertook focused conversations about dentistry from September to November 2021.

Some of what we found

- → In our 2018 survey we asked, 'do you have a dentist'? 84% of those who answered this question said they had a dentist. This represents a decline over 3 years of 30%.
- → Those respondents who did not have an NHS dentist were asked why this was so. In 2018 46% of people replied that they 'couldn't find a dentist taking on NHS patients'. In 2021 this had risen to 71%, an increase of 54%.

66 I've tried 20 dentists, but got nowhere. Over the last 12 years my teeth have been falling out and it's now difficult to eat properly. 99

66 I was in a lot of pain and couldn't get to see a dentist last year, I tried and tried, but got nowhere, so I thought #%** it! I'll pull it out". I used salt water and it healed up eventually. 99

When did you last see a dentist? (156 respondents)

There was a large increase in the percentage of respondents who had not seen their dentist for:

	2018	2021	% increase
Within the last 2 wks	13%	7%	
3 weeks to 1 month	14%	11%	
2 to 3 months	23%	10%	
4 to 6 months	25%	9%	
7 to 12 months	10%	10%	
1 to 2 years	5%	15%	200%
2 to 3 years	3%	22%	633%
Only in emergencies	3%	9%	200%
I don't	3%	6%	100%

From these findings we recommended:

- Rapid and radical reform of the way dentistry is commissioned and provided
- Reform commissioning to tackle the twin crises of access and affordability
- Improve the clarity of the information about NHS dentistry
- Use dental practices to support people's general health

As a result

We've shared your views and our findings with local decision makers; continuously raising this as a significant local issue.

This includes conversations with our local MP who brought our research to Parliament's Question Time.

We've developed a clear pathway for people to access the NHS dental treatment that is available; that includes identifying those who are accepting patients on waiting lists, helping people to understand when they should use 111 for emergency care, directing people towards the community dentistry who may be eligible.

Through our Information and Signposting service we've been able to help direct those in need of NHS dental care. This has resulted in children and adults understanding their eligibility for use of the community dentist which means they've been better able to manage their own oral health around other conditions.

We've also been able to give a picture of the long term impact to health and wellbeing when individuals are unable to access affordable care, making the issue much more personal. This has resulted in conversations with our local MP who is currently exploring initiatives to addressing the issue. We will continue to push for rapid and urgent reform within dentistry.

A Service in Decay, July 2021: www.hwy.link/Decay

Working together as a Network

Healthwatch York is part of the Healthwatch Network. Healthwatch England looks at all Network data to highlight shared concerns. Here's what the wider network achieved through April 2021 to March 2022.

- With online appointments becoming the norm, our top tips helped professionals and patients get the most out of digital appointments.
- → When people struggled to see their GP face-to-face, we asked the NHS to confirm this right for all patients, resulting in updated guidance to practices.
- → We supported the #BecauseWeAllCare campaign which saw 54,000 people come forward to tell Healthwatch about issues they faced with services.
- → To support the COVID-19 vaccination programme we talked to different communities to understand their

- → Healthwatch urged the Government to act after reporting a 452% increase in people struggling to see an NHS dentist.
- From running advice lines to delivering medication, Healthwatch volunteers helped combat COVID-19.
- Healthwatch quickly alerted regulators about care homes using 'Do not attempt to resuscitate' forms without consent.
- Teaming up with the British Red Cross, Healthwatch called for improvements to make leaving hospital safer during the pandemic.



Financial summary

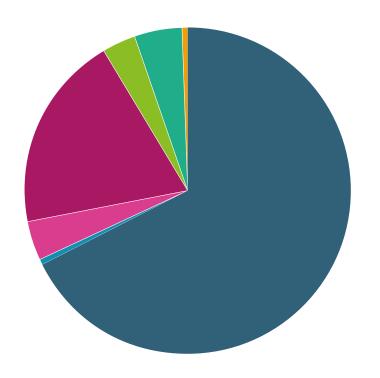
1st April 2021 to 31st March 2022

Income

City of York Council	£122,898
Other grants & contracts 1	£20,680
Total	£143,578

Expenditure

Total expenditure Underspend for the year 2021/22	£137,273 £6,305	
Unrecoverable VAT on Purchases	£671	
Office running costs 🕖	£6,551	
Legal and professional fees 📵	£4,310	
York CVS management fee 5	£26,611	
Marketing, printing, reports 4	£5,577	
Meetings and events 3	£770	
Staff salaries and expenses 2	£92,783	
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Notes:

- Other Grants & Contracts made up of:-£10K NHS App income of which £9.3k is to be spent in 22/23; £2k CYC Income for Mental Health Guide Publication; £1.2k Income for CQC Recruitment Board which is ongoing; £3.8k earned income from hosting the Census Support; and £3.7k from Lankelly Chase for CareCent.
- 2. Staff salaries and payroll support, expenses and training
- 3. Costs of venue hire and associated costs for meetings and events
- 4. Costs of producing publications, and promoting Healthwatch York

- 5. Payment to York CVS covering accommodation costs, financial, IT, telephones and administration
- Cost of legal and professional fees, including Project Evaluation and HR, where needed to support Healthwatch York
- 7. Computers, Website and online feedback centre, including accessibility software, office costs including freepost, equipment and stationery

There was no reimbursement of expenses incurred by volunteers during the year - no face to face volunteer activity undertaken during the pandemic.

Strategy

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

Future priorities

Top priorities for 2022-23

- Improved access to mental health care, with a focus on crisis care
- 2. Improved access to primary care, with a focus on accessible information
- 3. Maintain pressure for rapid and urgent reform within dentistry
- 4. Patient voices are deeply embedded in local decision making

Next steps

The pandemic has shone a stark light on the impact of existing inequalities when using health and care services, highlighting the importance of championing the voices of those who all too often go unheard.

Over the coming years, our goal is to help reduce these inequalities by making sure your voice is heard, and decision makers reduce the barriers you face, regardless of whether that's because of where you live, income or race.

The way we work

How we involve people, including volunteers, in our work.

Our Healthwatch board consists of voluntary and health care representatives. Their role is to provide direction, oversight, and scrutiny to our activities. Our Steering Group ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Through 2020/21 the Steering Group met and made decisions on matters such as risk assessment and management, key partners we should be involving across our work, and volunteer recruitment. Each member has an area of expertise, offering an informed view.

Your feedback is vital to help shape our priorities every year.

- We draw information from the issues we log, our feedback centre, information from the networks and forums we attend, and our event and engagement work.
 - We're also aware of local and national initiatives including Healthwatch England, City of York Council, and CCG/ICS interests. We come together as a team to discuss these. Trends/topics are noted and discussed in team meetings each month.
- We also keep note of, and regularly discuss, the local and national environment, agendas, initiatives, changes and priorities.
- 3. From this information we list all of the key topics.

- 4. We then plot priorities by mapping the key topics against expectations from others and whether the topic had appeared on an agenda or was an opportunity to create a new one.
- Considerations are made around organisational capacity, ensuring any new projects sit alongside and/or feed into existing activities.
- 6. We then score the top priorities against things such as: does it fit with our aim, do we have the skills to make an impact, do we have the resources, can we describe the long term/short term outcome.
- With the information gathered, we explore what the wider issue is under the priority and, with consideration to organisational skills and capacity (as identified in step 6), identify an area of focus.
- 8. Set intended outcomes and, through theory of change, establish the activities necessary to achieve outcomes.
- The priorities are publicised across our communication and engagement channels offering opportunity for comment.
- 10. Comments are discussed as a team and amendments made.
- 11. Activities and strategy are discussed with the steering group (Our board comprised of local VCSE representatives).

During 2020/21 we have been available by phone, by email, provided a webform on our

66 The pandemic shone a stark light on the impact of existing inequalities when using health and care services. 99

website, provided a feedback centre/rate and review system, attended virtual meetings of community groups and forums, provided our own virtual activities and engaged with the public through social media.

We've also amended our approach to inviting a 'call to action' – you can see this in our approach to social media and bulletins.

We are committed to taking additional steps to ensure we obtain the views of people from diverse backgrounds who are often not heard by health and care decision makers. This year we have done this by, for example, assessing our demographic reach in our engagement and research. We're also in the consultation phase of our new EDI strategy. As a result of this, we've begun to hold hybrid meetings which has already received positive feedback with people appreciating that this can be easier for those in rural localtion and with unpredictable health conditions.

We've also developed a new website with accessibility features such as text size and colour and readability features. We will be asking representatives of different community groups to comment on the accessibility.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We publish it on our website, making use of the accessibility features. We also post this out to people and can have it printed in different formats.

Recommendations and requests

This year, due to the COVID-19 pandemic, we did not make use of our Enter and View powers. Consequently, no recommendations or other actions resulted from this area of activity.

There were no issues or recommendations escalated by our Healthwatch to Healthwatch England Committee and so no resulting special reviews or investigations.

Our volunteers

We're lucky to have 23 outstanding volunteers, who dedicate their free time to improving local health and care services. Thanks to their knowledge and skills, we're able to spread our reach across York and improve the way we do things as a team.

Helped people have their say from home

carrying out surveys over the telephone and online.



1

Contributed to change to our internal systems and supported with administration



Created digital content on our website
and social media.



We hold annual volunteer meetings

and regular tea and chats with our volunteers



Monthly information bulletins for volunteers

share what's happening in health and care locally and nationally.



Assisted as part of 'Readers Panels'

Checking local services'
publications to make them
more people focused and
easier to read. Provided a
Readability Panel who review
publications from services
including York Hospital and
City of York Council to help
improve their accessibility.



Carried out website and telephone

reviews for local services on the information they provide and assessing their accessibility.



Continue with the local volunteering efforts

supporting those who were selfisolating.



66 Chatting with members of the public and giving them the opportunity to voice their experiences in using health & social care services and seeing changes made.

Lesley, Engagement Volunteer

66 I telephoned all York dental practices to enquire if there were slots for NHS patients.

I must say, I was disappointed to receive negative answers from all practices, including those that had NHS contracts when I worked as a dentist (some years ago now!).

I had no idea of the struggle to find an NHS dentist in York and felt sure there would be a couple of practices, at least, who would have been able to hold an NHS contract! 99

Research volunteer

Do you feel inspired?

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

01904 621133

healthwatch@yorkcvs.org.uk www.healthwatchyork.co.uk



Information & signposting

A case study

We received a call from the sister of a mum of 3 children, one of whom had autism.

Her 6-year-old had a broken arm that wasn't healing well. They needed IV antibiotics three times a day for several weeks.



They were given two options; stay in hospital or come in twice a day for appointments at 6am and 11am with a district nurse visit in the afternoon for the third dose.

Mum did not have a car, does not live close to the hospital, and was concerned about how she could manage all the appointments and her other children. Her only childcare was her mother who was already doing as much as she could to support her daughter. She was also worried about how much sleep any of them would get with this arrangement.

Our team provided information from other hospitals about their IV antibiotics at home programs, including a training information pack from a Yorkshire and Humber children's hospital, and encouraged her to discuss whether this was an option with PALS (Patient Advice and Liaison Service).

We discussed the potential barriers to doing this, including how hard some parents find it to be injecting their child. She felt confident having read all the information that this was something she could do, and contacted the hospital.

They agreed, she received training, successfully began administering the drugs at home, and the family were able to spend Christmas together at home.

66 We discussed the potential barriers to doing this, including how hard some parents find it to inject their child. 99



Advice and information

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. We are committed to providing the information you need in whatever format you need.

66 Talking to Healthwatch York was very helpful. It was a joy to realise I am not alone. 99 Feedback received on our information and signposting service:

66 Thank you for your very honest and detailed reply - I really appreciate it and the realism of the response.

I have tried most of the dentists you mention, but will try the other two and maybe at least find out which has the shortest waiting list. If no luck there, I will make a complaint to NHS England.

Thank you and the rest of Healthwatch for also pushing politically to try and get this difficult situation sorted out. 99



Healthwatch York Representation

We use many methods to encourage people to share their views on health and care

This year the focus has been on dentistry, dementia, GP access, and care home staffing. Our work on these issues has led to wider media attention. It's not unusual for local TV, Radio, and Press to be calling us for comments and interviews. This helps more people hear about our work, encourages them to share their experiences. This further strengthens our push for change.

66 Healthwatch York are a well-informed presence at system level; they are connected across the city and we value being able to connect with them."

- Miles Goring and Astrid Hanlon, LIFE

2021-2022 Outcomes

As a team, we are active participants in over 45 Networks and forums. Here are some examples of how we use your voice to help shape health and care decision making.

Health and wellbeing board

They bring to the table their expertise in asking the right questions in an intelligible way. Healthwatch York has a skill of asking deep questions and extracting the information needed from service users for strategy development.

- Cllr Runciman, Chair of York Health and Wellbeing Board

York Safeguarding Adults board

Here we contribute to local Safeguarding decision making and strategy. We're keeping the local health and care services informed of service experience and sharing best practice to ensure safeguarding is personal to you.

Your voice, your words.

Work with the CCG

When the CCG procured the adult autism and ADHD service, we relied heavily on Healthwatch York to reach people and to be a critical friend; for example, to ensure that we are accessible.

As a commissioner, I am reassured that there are opportunities for the voices of people who use services to be heard.

Ensuring that the Dementia Collaborative was able to continue was a real example of Healthwatch York's influence, particularly their ability to facilitate contributions to the Dementia Strategy.

- Sheila Fletcher, CCG

Work with CYC

We are able to let people know that if they want to have input into the way services are developed, we can signpost them to Healthwatch.

As health services begin another large re-organisation, Healthwatch has an important role to play in helping to keep people like me in the loop, so I can understand the new structures and help people in the community to understand them too. 99

- Wendy Kent, York Explore

Our work with other Healthwatch

1t has been an enjoyable and constructive experience building a positive working relationship with Healthwatch York. We are starting to see the impact of our collaboration, for example through our joint working on dentistry and accessible information.

 Ashley Green, Chief Executive, Healthwatch North Yorkshire

Listening to carers of people with dementia

In February 2022 we published 'Dementia Support - Listening to carers of people living with dementia in York'.

Key issues in the report included; diagnosis, access to services/support after diagnosis, longer term support, how services work together, planning for the future, activities and socialising and being listened to. The full report will be available this summer.

The report has helped inform and shape the draft dementia strategy and action plan for York. The initiative is being led by the City of York Council and NHS Vale of York CCG.

The findings of the report were presented to York Health and Wellbeing Board on the 16th March:

www.hwy.link/YHWB_dementia

and shared with the multi agency dementia strategy working group to help inform their work. The council has confirmed they will hold responsibility of overseeing the dementia strategy and action plan going forward. In the absence of further funding and with the work of York Dementia Collaborative, we've been able to keep the conversations about the involvement of people with dementia alive in the city.

The publication of a second report focusing on the experiences of people living with dementia is planned for the summer of 2022.

How to get in touch

Pop in and see us at:

Healthwatch York 15 Priory Street YOI 6ET

Send us a letter:

Healthwatch York FREEPOST RTEG-BLES-RRYJ 15 Priory Street YO1 6ET

Visit our new more accessible website

which includes an E-reader and can translate information into different languages:

www.healthwatchyork.co.uk

Give us a call

01904 621133

Or **WhatsApp** us a voice note on: **07512342379**

You can also email us:

healthwatch@yorkcvs.org.uk

Twitter: @healthwatchyork **Facebook:** @healthwatch.york

Instagram: hw_york

Linkedin: Healthwatch York

If you need information provided in a different format – let us know, we're happy to help.

