Witness Name: Louise Barry CEO Healthwatch Cheshire
Statement No.: [XXXX]
Exhibits: [XXXX]
Dated: 14.02.2024

THIRLWALL INQUIRY

WITNESS STATEMENT OF LOUISE BARRY CEO HEALTHWATCH CHESHIRE

I, Louise Barry, will say as follows: -

1. Healthwatch Cheshire West (delivered by Healthwatch Cheshire CIC) engages widely with local communities to raise awareness of our role and activities. We interact with people who access health and care services in Cheshire West and Chester through a range of methods including: general engagement in public spaces; attendance at meetings of community groups and support services; Care Community meetings; our feedback centre located on our website; surveys; Enter and View visits; A&E Watches; engagement events relating to health and care etc.

2. Additionally, Healthwatch leaflets and posters (also surveys where applicable) are left in public places such as libraries, community centres, GP surgeries, pharmacies and hospital outpatient and A&E departments to direct people to us, and to raise awareness about the ability to feedback on services.

3. Our interactions with the public allow them to share their experiences of health, care, and wellbeing and prevention services. Feedback, both positive and negative, is forwarded on to individual providers. General findings on themes are shared and discussed at strategic meetings at local community, borough, and Cheshire and Merseyside levels to help inform service delivery and strategic conversations relating to planning and quality. Reports on surveys, projects, Enter and Views etc are published on our website.

4. Where appropriate or requested, people are supported through signposting to enable them to either independently direct queries and complaints to both health and care services, or to receive support from the Healthwatch team to further their enquiries. Any potential safeguarding concerns are raised and logged with the appropriate channels.

5. With specific respect to health services, Healthwatch Cheshire have delivered the NHS Independent Complaints Advocacy Service (ICAS) since 2017 as part of our Local

Authority commissioned contract. NHS ICAS follows a prescribed staged route of support and intervention at each stage of a complaint.

6. The service has a dedicated advocate who holds an ICAS Qualification in Independent Advocacy – Diploma Level 3. Members of the wider staff and volunteer team provide additional capacity to the service including provision of first point of contact information on what the service can help with; signposting people to self-help tools; and referring people on to the advocate where appropriate.

7. People are directed to the service via conversations and/or leaflets at engagement activities; through telephone enquiries; emails; and via our website. Local NHS Patient Advice and Liaison Services (PALS) are also aware of the Healthwatch delivered ICAS service for signposting purposes.

8. Our ICAS published information states that:

9. *When your health care is provided by the NHS you are allowed to make a complaint using the NHS complaints procedure. An NHS complaint might include something that happened during care or treatment at a: Hospital; GP Surgery; Dentist; Pharmacist; Optician; NHS funded care home.*

10. *Healthwatch Cheshire CIC offers an NHS Independent Complaints Advocacy Service (ICAS). ICAS advocacy works within the NHS complaints regulations and can help you to use the NHS complaints procedure to have your voice heard. The NHS Independent Complaints Advocacy Service is: Free; Independent; Confidential.*

11. *An ICAS Advocate provides practical support and information to people who want to make an NHS complaint. This might mean providing you with information so you can pursue a complaint by yourself or work with you to make your complaint.*

12. *Advocacy is about helping people to speak up for themselves so an advocate will not tell you what to do. An advocate will work with you so that you feel confident to make a complaint. An advocate can help you with writing letters; Prepare you for meetings and go to these with you; Contact and speak to people within the health service on your behalf.*

13. Copies of our leaflet, and various documents that make up a Self Help Information Pack are available on our website for downloading including: ICAS Leaflet; Self Help Information Pack; Writing an NHS Complaints Letter; What to expect from a resolution meeting; and Obtaining Medical Records Information. https://healthwatchcwac.org.uk/what-we-do/help-making-a-complaint/

LB/1: INQ0012964 LB/2: INQ0012966 LB/3: INQ0012968 LB/4: INQ0012967 LB/5: INQ0012965

14. In addition, the website also outlines how to make a complaint about Healthwatch:

15. *Individuals and organisations have the right to express their views about the performance of Healthwatch Cheshire West and the way in which it conducts its business. Anyone who is dissatisfied with any aspect of the service delivered by Healthwatch Cheshire West can make a complaint under Healthwatch Cheshire West complaints policy. We will treat both concerns and complaints in the same way.*

16. *This Policy does not cover: Complaints or concerns about the NHS, which should be dealt with through the NHS complaints procedure. Complaints about the provision of social care services which should be dealt with by Cheshire West and Chester Council.*

17. *In the first instance we would encourage you to raise a concern, or complaint, or to provide feedback on our service informally. Providing information or correcting misunderstandings or misconceptions at this early stage may enable the issue to be successfully resolved. You may do this by phoning the office on 0300 323 0006 or by emailing us at info@healthwatchcheshire.org.uk*

18. Healthwatch Cheshire West NHS ICAS records show that since 2017, 707 direct approaches have been made to us for further information and support regarding complaints in Cheshire West and Chester. (These are in addition to general conversations that may occur in our wider engagement activities in the community). Approaches can include initial advice on the service; clarification of the complaint; direction to self-help materials; signposting etc. 130 of these approaches were in relation to CoCH. Overall, 124 progressed on to become clients with cases being further managed. 38 of these related to the Countess of Chester Hospital.

19. Breakdown of annual figures below. To note, these are new clients; caseloads at any time can vary given that support for complaints can run over multiple months and across years.

Year	Approaches made in year to Healthwatch Cheshire West ICAS	Approaches made in year re: CoCH	New clients in year- Healthwatch Cheshire West ICAS	New clients in year - CoCH ICAS
17-18	44	14	34*	13
18-19	69	12	11	1
19-20	112	23	25	7
20-21	131	16	9	1
21-22	149	26	19	6
22-23	118	24	14	6
23-24 to 26.01.24	84	15	12	4
TOTALS	707	130	124	38

20. Each individual complaint has a differing level of complexity. Outcomes to complaints include: Resolved - known to us to have been resolved to the client's satisfaction; Ceased activity - stopped activity with us, this could be at any point in the process where the client feels they have had sufficient support to take their next step, or where it is apparent that we can no longer offer further support e.g. activity with the Parliamentary and Health Service Ombudsman, or legal proceedings with a solicitor. No further contact - despite approaches from us, there has been no further contact from the client.

21. ICAS records show that one approach for information and support regarding CoCH maternity services was made to us in 2019, and that this matter was resolved without our further input. No complaints have been received regarding CoCH neonatal care.

22. To deliver our role effectively, Healthwatch Cheshire works as an independent organisation within the structures of health and care across Cheshire, and more latterly Cheshire and Merseyside. This partnership working ensures that our reports and thematic findings are welcomed and responded to at strategic, operational planning and delivery levels.

23. Our activity results in a wealth of information relating to the challenges, concerns or positive experiences people have when accessing health and care services. In turn, this allows us to bring informed challenge and perspective in to conversations with decision makers. Recent years has seen this approach to collaborative working become further embedded and respected overall, however changes in personnel and structures in health and care can adversely impact this.

24. Healthwatch Cheshire West continually engage in and around Cheshire, including the catchment area for patients accessing the Countess of Chester Hospital. The insight and intelligence we gather through our range of methods drives and informs our future activity. Quarterly reports regarding our overall activity are submitted to our Local Authority commissioners, and in recent years a public copy of each quarterly report is posted on to our websites.

25. Our records show that from 2016 Healthwatch Cheshire West became aware through meetings attended, or minutes received, that a decision had been made by Countess of Chester Hospital NHS Foundation Trust in relation to neonatal services temporarily changing the admission arrangements for the neonatal unit to focus predominantly on lower risk babies who are born after 32 weeks; that the decision had been taken with the support of the regional Cheshire and Merseyside Neonatal Care Network; and that the Trust had asked for an independent review of the neonatal service from the Royal College

of Paediatricians and Child Health and The Royal College of Nursing, and this was expected to be completed by the end of September 2016.

26. In 2017 Healthwatch Cheshire became aware initially through news channels that the independent, clinical review into neonatal services at the Countess of Chester carried out by the Royal College of Paediatrics and Child Health had been published. At the same time, we were made aware through a statement issued by the Trust, that the matter had now been referred to Cheshire Police: '*The Trust and its doctors have continuing concerns about the unexplained deaths and are very keen to understand that everything possible has been done to help determine the causes of death in our neonatal unit between June 2015 and June 2016. As a hospital we have taken the clinical review as far as we can. We have now asked for the input of Cheshire Police to seek assurances that enable us to rule out unnatural causes of death.*'

27. In 2018 media and system partners reported that the police had issued a statement relating to criminal behaviour and Lucy Letby. Healthwatch Cheshire was never contacted about the issues, and only learned of them in the media.

28. On becoming aware of the concerns regarding the neonatal unit we revisited our records of comments that we received from the public dating back to 2013 (held on differing databases and system files over time) to ensure we did not have any information that we felt would be pertinent to the investigation in to the neonatal unit at the Trust. Additionally, we spoke with Healthwatch Team members to appraise them of the situation and asked them to raise any concerns or queries that may arise directly with myself as CEO.

29. We continued to have a presence and attend meetings and committees where the overall quality of health services were discussed e.g. Health and Wellbeing Board; Health Overview and Scrutiny Committee; CCG/ICB Quality and Performance meetings; CoCH Patient Experience Operational Group. At no point were we invited for comment or party to meetings or information relating to the police investigation.

30. After the verdict was announced, we re-forwarded comments we could see held on databases that had been received regarding maternity services at the Countess of Chester hospital covering 2014-August 2023 to members of the CoCH Executive team. This list covers 61 comments that cover maternity in general, with the majority of comments being positive.

31. There are 2 comments received relating to June 2015 – June 2016: *'Happy with health care since moving from North Wales. Good maternity services.'* And I&S

I&S

32. Subsequent further exploration of old records has highlighted one comment between June 2015 and June 2016 sourced from an embedded document that makes reference to the neonatal unit as part of their overall maternity experience recorded as: 17.05.2016 '*Lady was due to deliver on the 25th Dec and her waters broke, there was no room at the Maternity Centre Countess of Chester so she was taken to a ward. She saw no midwife and she had a urine infection. She had an emergency caesarean and her new born was taken to the Neonatal for observation. All this had an impact on the young lady who is here without any parents around her to assist, she was told the maternity unit was full and closed.*'

33. Whilst Healthwatch Cheshire West have had no cause to escalate concerns relating to neonatal or maternity services, there are occasions where concerns relating to other areas of the Countess of Chester Trust have been escalated and actions taken.

34. Examples of this would include our A&E Watch and Enter and View activity, and a specific example where concerns raised by the public during Healthwatch engagement were directly shared with the then CEO of the Trust resulting in an action plan for development and improvement at Ellesmere Port Hospital

35. Anecdotally, we know that people have, and do find it difficult to navigate the NHS complaints system, particularly if they feel they need to do this without independent support. Most recently we have been approached with a query regarding a complaint where they have discussed that, despite the complaint not being directly linked, the media profile of the Letby Case and the Thirlwall Inquiry has made them realise that they can complain.

36. Since taking over the delivery of the ICAS contract in 2017, we can see an increase in the numbers of people approaching us to discuss potential complaints and seeking the support of the service in the round.

37. The ICAS service is in addition to the core activities of a local Healthwatch. During the time we have held the contract we have made inroads in to raising the profile of Healthwatch Cheshire West locally, and the associated ICAS service. Also, during this period there has been an increase in awareness raising of the issues and concerns our public face in

relation to health and care services via both our local insight and intelligence reporting, and Healthwatch England's representation of local Healthwatch findings.

38. In our reflections on not receiving any complaints about the Neonatal Unit at the CoCH, we know that our activities over the years have included places where we believe there could have been opportunity for issues to be raised with us including, engagement in the Countess of Chester Hospital foyer; CoCH Enter and View visits; A&E Watches; attendance and involvement with local Maternity Voices Partnerships; engaging within local Childrens Centres; CoCH Patient Experience meetings. However, we also acknowledge that this case related to a very specific area, and that concerns and details were not widely known or shared with the public.

39. Whilst we can evidence over time increased closer working across health and care services, with Healthwatch having more presence and influence through our contribution in key health and care meetings, and through our public reports, the Letby case has raised the question as to why we only found out about the concerns from the media, and not from system partners.

40. Despite the range of locations and activities Healthwatch Cheshire West are involved in, we are conscious that more could always be done to raise the profile of Healthwatch locally and nationally. We will continue to work with local system partners; our Cheshire and Merseyside Integrated Care Partnership; and Healthwatch England to build on opportunities for clearer continuing public awareness, and to give particular attention to how professionals who deliver services are aware of what we offer.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed: PD

Dated: _____14.02.24_____