

Healthwatch Milton Keynes Business Plan 2025–26



Activity Priorities

Our activities

The views and experiences that residents of Milton Keynes, and those who use our health and social care services, share with Healthwatch Milton Keynes about the challenges they face when accessing health and care services are well reflected in the priorities of Milton Keynes Health and Care Partnership (MK Deal) and the BLMK ICB (BLMK Health and Care Strategy).

To determine our activity priorities for the year, we ask our residents to tell us what they feel HWMK should prioritise. We analyse our evidence base of reported concerns by patients, service users, families and carers and the service areas that they have been most affected by. We then ask the residents of MK to tell us how important each of those service areas are and where we should focus our engagement activities, and scrutiny.

Residents' top six priorities for the year ahead are:

Access to Primary Care – GPs, Dentists and Pharmacies

Emergency services – A&E, Urgent Care Services and Ambulances

Adults Mental Health

Social Care

Preventative Health – health screenings and vaccination services

Chronic conditions support – e.g. Diabetes and Heart Disease

How we measure Impact and Outcomes

We achieve positive change for residents in many ways using different activities and strategies. These are known as the seven Outcome Domains.

Governance and oversight – we improve focus on an issue affecting people such as at local Scrutiny committees where commissioners or service providers are held to account

Strategic planning and decision-making – we improve how residents are involved

Service design, improvement and quality – changes are made because of the evidence we present

Involvement and co-creation – residents get to shape what their services look like

Safety and regulatory effectiveness – our evidence results in services being made safer

Good communication in health and social care – communication to people is improved

Shifting the culture and agenda towards listening – a problem for people is now being prioritised because of our work

Our priorities 2025–26

Care in the Community



Our community conversations and communications will focus on the Top Six priorities that people have told us are most important to them. We will use your experiences to inform the design of neighbourhood working models, future commissioning of community and mental health services, and monitor the quality of care.

Improving System Flow



The new Integrated Discharge Hub is being designed with real-time feedback from patients being discharged from hospital with packages of support in place. Using their experiences we aim to influence changes to discharge pathways that improves people's care, avoids the risk of being readmitted to hospital and helps free up beds.

Enter and view



With health and social care providers under ever increasing pressures of high demand on their services and squeezed budgets, the power of Healthwatch MK to Enter and view services and speak to you directly about your care is vital. We will be active across GP practices, the hospital and increasing the focus on enabling people receiving care at home to have a voice.

Our priorities 2025–26

Care in the Community

Residents have told us that there are six areas of care that really concern them in MK:

- Access to Primary Care – GPs, Dentists and Pharmacies
- Emergency services – A&E, Urgent Care Services and Ambulances
- Adults Mental Health
- Social Care
- Preventative Health – health screenings and vaccination services
- Chronic conditions support – e.g., Diabetes and Heart Disease

Here at Healthwatch MK we are involved in many areas where we can influence and effect positive change to services with the evidence of resident experience and needs. Our focus will be on ensuring voices are heard and services are designed with people's needs at the centre of areas where service transformation or service change is being planned, such as neighbourhood models.

Key activities

- Delivery of 4 outreach roadshows
- Planned and opportunistic community events
- Four digital surveys
- Attendance/presentations to the MK Health and Care Partnership and the Health, Housing and Adult Social Care Scrutiny Committee
- Awareness, Advice and Information Campaigns through our communications

Key Performance Indicators

- 500 respondents to surveys
- 1000 people connected through roadshows and events
- Demonstrable increase in digital engagement

Outcomes

- Residents can see clear evidence of the issues that matter to them being raised and challenged by Healthwatch Milton Keynes
- Residents can see clear evidence of how those who pay for and provide health and care services work to improve care and the experiences of care
- Residents can access information to help them understand their rights to care, where they can get support and how they can better support themselves through self-care

Our priorities 2025–26

Improving System Flow

We start the year 6 months in on an 18-month project working with patients being discharged from hospital on what is known as pathway 1 and 2 via a newly established Integrated Discharge Hub (IDH).

This hub brings hospital staff, community care teams, social care, housing and the VCSE together to ensure patients have high quality, well planned and supportive discharge and post discharge care. By interviewing patients who have been recently discharged we're informing the establishment of the hub to make sure it works for people, improves their experience of care and reduces the risk of being readmitted to hospital.

Key activities

- Liaise with the IDH to ensure the smooth transfer of consent records and details to contact patients, and their families/ carers.
- Conduct interviews with patients post discharge
- Provide routine insight reports to the Improving System Flow steering group evidencing experience trends and making recommendations for improvements

Key Performance Indicators

- Interview 10–15% of all patients being discharged on Pathway 1 and 2 (based on average reported figures of 255 patients per month)
- Quarterly report presented to ISF Programme Board

Outcomes

- Local service leads are provided with insight and recommendations into how system flow transformation, including the integrated discharge hub is operating from the patient perspective.
- Residents can see how the effectiveness of Integrated Discharge Hub has been monitored and evaluated on behalf of patients, and their carers.
- We can evidence a positive influence on the way services are designed, because of patient feedback

Our priorities 2025–26

Enter and view

We will continue to use our legislative powers to undertake Enter and view visits to a range of services across Milton Keynes. Working in strategic partnership with the Quality Monitoring Team at Milton Keynes City Council (MKCC) we will undertake targeted visits to Care Homes and residential settings based on level of concerns raised by residents and their families, MKCC quality team and CQC inspectors. We will be seeking agreement on levels of activity in home care and supported accommodation settings (see projects in development for further details)

We will continue to plan Enter and view visits in GP services and Milton Keynes Hospital

Key activities

- Identify and agree a schedule of Care Home and Home Care visits with MKCC Quality Team using the [Joint Protocol](#)
- Identify and agree a schedule of GP Practice visits against Primary Care priority objectives, and ICB Primary Care lead for MK
- Identify and agree Enter and view activities in Emergency and/or secondary care based on sentiment of feedback from residents
- Engage Enter and view volunteers to participate in visits
- Ensure copies of all Enter and view reports are issued to MKCC, Board of Trustees, BLMK ICB, CQC and HWE
- Register for direct access to HWE Reports Library and upload reports to the portal
- Provide the Board of Trustee with information of compliance against recommendations from Enter and view reports

Key Performance Indicators

- 10–15 visits in care homes (inclusive/additional to agreed target in Home Care/Supported living settings – TBC)
- 5 GP Practice visits
- 2 emergency and/or secondary care providers

Outcomes

- Residents can see clear evidence of acknowledgement and response to Enter and view reports which demonstrate clear commitment to addressing any areas of poor experience in services visited
- Residents and families of those living in Care Homes, or in receipt of care at their residence can see clear evidence of provider acknowledgement and response to Enter and view reports which demonstrate clear commitment to address any areas of poor experiences

Activity areas – in development

Healthwatch Milton Keynes remains responsive to the local system as much as our resource allows within activity years. We enter every project year with a plan of activities, but additional work may be considered throughout the year. This could include responding to:

- Changes in national health and social care policies that affect local people
- Service changes such as a closure or reduction of a service
- Significant concerns raised by residents about specific services
- Requests by commissioners and service providers for support with engagement
- Requests by the CQC, Healthwatch England or the local Scrutiny Committee to review an area of service provision and resident experiences
- Tough issues we have identified and are tracking as an area for achieving change which advances through the delivery of our activities

In 2025–26 there is the potential for the following activities:

Project in development: End of Life and Palliative Care

Project Timescales: April 2025 – March 2026

This 12-month activity, funded by BLMK ICB provides resources for the Healthwatch Milton Keynes Chief Executive Officer, in their capacity as a non-voting member of the BLMK Board of the ICB to act as **BLMK ICB's End of Life Champion**. Chairing bi-monthly programme boards of voluntary and statutory sector stakeholders of palliative and end of life care. Supporting stakeholders to work in partnership to transform the early identification of support and the quality and effectiveness of palliative and end of life care for residents across BLMK. Part of this work will include resident engagement in Milton Keynes.

Project in development: Enter and view in home settings

Project Timescales: To be agreed

Healthwatch Milton Keynes has worked with the Quality and Compliance Team at Milton Keynes City Council to develop and agree a joint protocol that will support contact with isolated residents received care in their own homes or support living accommodation to share their experiences of care.

Activity areas – in development

Project: Women's Health

Project Timescales: To be agreed

Healthwatch Milton Keynes is a valued strategic partner of the ICB's Women's Health Research and Hub development team. Over the last three years they've welcomed the insight and evidence we've provided on the experiences of women in Milton Keynes regarding menopause, mental health, health inequalities and disabilities and used it to design services in Milton Keynes that meet women's needs. We will continue to provide this support where resources allow and support the generation of much needed funding for women's research and services. This could include additional events to increase opportunities for women to share their needs and experiences of care.

Project: Patient Participation Groups

Project Timescales: Ongoing

In April Healthwatch Milton Keynes launched a Patient Participation Toolkit, developed in partnership with local PPGs and Healthwatch Central Bedfordshire. The toolkit is a practical guide for PPGs to assess their effectiveness, how well their membership represents the demographics of the patient cohort and how they can develop a more representative group. We are keen to support PPGs who are just starting out, stalling or keen to diversify their representation to roll out and test the toolkit and will be looking for key opportunities to partner up.

Project: Carers

Project Timescales – Ongoing

Milton Keynes City Council have awarded new providers with the contract for carers support services in Milton Keynes and Healthwatch MK and the MKCC Adult Health, Housing and Social Care Scrutiny Committee are keen to understand how the experiences of adult, young and parent carers are impacted under the new service. With the scrutiny committee keen to review the impact of change in 12 months time, we'll be developing this project in the coming months.

Activity areas – in development

Project: GP access

Project Timescales: Ongoing

Funding source: Core grant with potential for funding from other sources

Poor sentiment about GP access is one of the top issues we hear about from residents. The 'Modern General Practice' model was rolled out across GP practices and saw improved phone systems installed, and digital triage methods created to combat the 8.30 telephone appointment rush. Digital registration was enabled by NHS with the aim of ensuring that no-one faces barriers to registering with a GP without ID or proof of address.

Thousands of additional appointments have been made available, pharmacies are offering extra services and additional roles such as physios, social prescribers and paramedics are working in practices, but that negative sentiment isn't shifting. Residents complain of being forced to use digital when they can't or don't have the means to, and that digital triage is being shut down so regularly that it is an ineffective way to access support. Health professionals say that there are too many people who go to the wrong service, filling up appointments that could have been resolved elsewhere or putting pressure on services because of not accessing preventative support such as vaccinations.

We'll continue to monitor experiences shared with us and our activities to address poor experiences will include:

- Routine reporting on themes of poor experiences, such as being prevented from accessing appointments because of digital exclusion, to the ICB GP contracts monitoring team
- Monitoring the impact of the recent national rule that digital triage systems need to stay open during practice opening times
- Providing residents with information and tips about how to best navigate care when you need it

Roadshows

This year, our targeted engagement outreach will be delivered in and around existing voluntary and community groups and events. Based on feedback from our resident priorities survey, and local health inequalities concerns roadshows will be prioritised across the following themes and people:

| Period | Theme | Residents |
|--------------|--|--|
| April – June | Care in the community Mental Health Health Inequalities | Refugees |
| July – Sept | | People experiencing homelessness |
| Oct – Dec | | To be designed by resident forum in July |
| Jan – March | | To be designed by resident forum in December |

| Period timeframes | Activities |
|---------------------------------|--|
| Launch – 3 weeks | We'll map the project, establish partners and locations for the activities and design specific questions with community leads |
| Activities – 4 weeks | Roadshows – gathering and collating feedback |
| Analysis – up to 5 weeks | Drafting reports and undertaking relevant meetings with professionals to receive the findings and recommendations for response |
| Close of period | Full report with findings, recommendation and professionals' responses published |

Milton Keynes Health and Care Partnership, also known as the Health and Wellbeing Board are working together on a **Neighbourhood working** vision that aims to see by 2028 health, social care, emergency services, education and VCSE to name a few working closer together in our own neighbourhood to provide better and more tailored support for residents.

So, as well as asking commissioners and providers who hold responsibility for the experiences of the target resident groups and the services they need, and use, our draft reports will be sent to wider stakeholders to comment on the report. Our ambition is that this approach will ensure that more professionals, who touch the lives of the people we hear from, have a greater opportunity to think about and comment on what their services could do to support them in the future and make important connections with each other to do so in partnership.