

**St George's
Nursing Home
Enter and
View Visit**



22 May 2026

healthwatch
Wirral

Contents

Acknowledgement	3
Foundations of Quality.....	3
What is Enter and View?	3
Disclaimer	4
Purpose of Visit.....	4
Site Introduction	5
About St George’s Nursing Home	6
The Visit.....	6
Recommendations.....	15
Conclusion.....	15
Glossary.....	16
Distribution	16
Manager’s Comments.....	17
Social Value	19

Acknowledgement

Healthwatch Wirral would like to thank St George's Nursing Home staff, residents and families for their cooperation during our visit.



Foundations of Quality

"Foundations of Quality Improvement should always have what people tell us about their treatment and care at the heart of everything, as a system, that we plan and do. We must be able to evidence that all actions and decisions made come back to this, making certain that everyone feels respected, involved and valued at each and every part of the journey. We should all feel confident that we are either giving or receiving quality care."



Healthwatch Wirral, Age UK Wirral, NHS England and ECIST, Wirral System.

What is Enter and View?

Healthwatch has statutory powers and duties to carry out Enter and View visits to any site where regulated care is given. Local Healthwatch Authorised Representatives carry out these visits to health and social care services to find out how they are being run and can make recommendations where there are areas for improvement.



Section 221 of the Health and Social Care Act allows local Healthwatch Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP Practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service, but equally they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who use, or provide, the service first-hand.

Healthwatch can also be invited in by providers to seek a 'fresh pair of eyes' on their service and gain some external assurances that they are on the right track prior to their CQC inspections.

Disclaimer

The contents of this report are based on what the residents, staff and Manager told Healthwatch Authorised Representatives. The information within this report does not recommend or advocate on behalf of any service. Individuals should use a variety of information, such as CQC reports, when making a decision on where to reside and/or where to obtain care.



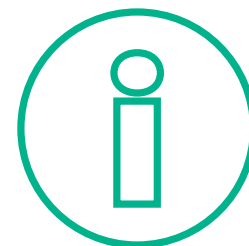
E&V visits are risk assessed and planned well in advance. Where situations occur such as unannounced CQC visits, Infection Prevention and Control issues (IPC), bereavement, safeguarding or suspension of the service for whatever reason – HWW’s visit and, ultimately, reporting processes may be affected.

Every endeavour will be made to provide balanced feedback before departure from the premises. If reflections from the Healthwatch Wirral Authorised Representatives (HWWARs) raise issues that were not addressed at the end of the visit, then a follow up call to advise the Provider will take place before the report is published.

Wording within the report which references a response from an individual may not be verbatim (word for word). The Provider comments at the end of the report is added unedited.

Purpose of Visit

This visit is not designed to be an inspection, audit, or investigation, rather it is an opportunity for Healthwatch Wirral to get a better understanding of the service by seeing it in action and talking to staff and service users and carers / relatives. The visits are a snapshot view of the service and what we observed at the time of the visit.



Healthwatch Wirral seeks to identify and disseminate good practice wherever possible. If during a visit, Healthwatch Wirral considers there may be a serious concern then this will be referred to the appropriate regulator. This also applies if we have safeguarding concerns and these will be referred to the Local Authority or Commissioner for investigation, and our visit will cease with immediate effect.

Once the report has been drafted by Healthwatch Authorised Representatives it will be sent to the provider which is the provider’s opportunity to add their comments, and which will be added verbatim to this report. After twenty days the report will be published.

Site Introduction



Care Home Address:

St George's Nursing Home
Croxteth Avenue
Liscard, Wallasey
CH44 5UL



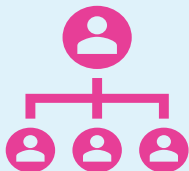
Setting Provider:

St George's (Liverpool) Limited



Date of Visit:

Friday 22 May 2026



Care Home Manager:

Mr Vibin Baby



Care Home Email and Phone Number:

Email: info@wallasey.stgch.co.uk
Tel: 0151 630 6754



Healthwatch Wirral Authorised Representatives

Laura Peter
Georgie Higgins

About St George's Nursing Home



Image Healthwatch Wirral®

The provider's website describes St George's Nursing Home as a friendly, family-run nursing home specialising in nursing, dementia care, elderly care and end-of-life care.

Their stated aim is to provide the residents with a comfortable home and deliver high standards of dignified, compassionate care. The service is managed by qualified staff who work to improve residents' quality of life, with an emphasis on recruiting trained, professional and caring staff and minimising the use of agency workers.

The provider describes its ethos as caring for residents as they would their own family, with a person-centred approach tailored to individual needs and preferences.

St George's Nursing Home is situated in a mixed-use, but mainly residential, road in the Liscard area of Wallasey. It is close to the main shopping area and Central Park, the largest parkland area in Wallasey.

The Home can accommodate up to 50 residents. At the time of the visit, 43 people were living there. The Directors currently operate two homes: St George's Wallasey and St George's Wigan.

The Visit

Environment

The main entrance is situated on a residential road, with several parking bays immediately outside for staff, visitors and contractors. Public transport links are convenient, with regular bus services available nearby.

The brick-built, two-storey building appeared to be well-maintained, with new-looking windows. There was a grassed area to one side of the building, and there is a garden at the rear which, at the time of our visit, was awaiting renovation.

General

The Manager outlined a substantial programme of renovation undertaken over the past two to three years. This has included roof works, electrical rewiring, new internal flooring, extensive replumbing, and a refurbishment of communal spaces and individual bedrooms. HWWARs observed that improvement work was continuing throughout the Home.

At the time of the visit, the Deputy Manager told us there were 43 residents. They currently have 12 residential beds, 14 nursing beds, and 24 Elderly Mentally Infirm (EMI) beds.

On arrival HWWARs were admitted through secure doors and welcomed by a member of staff and the Deputy Manager. We were asked to sign in using the *HR Sign-in Pad* located in the reception area.

We noted that the spacious reception area felt bright, airy, fresh, and clean, and was free of any potential obstructions. A post box was available for residents to use.

Notice boards in the reception area displayed key information, including staff photographs with their roles. Dementia-friendly signage was in place.

A display board showing an activities calendar was displayed, and we were told that two activity co-ordinators worked alternating shifts of four and three days to provide cover throughout week.

Calming music was audible in many of the communal areas we visited.

Video surveillance signage was displayed around the Home.

Day Rooms

The communal day rooms we visited appeared clean, tidy and fresh, with comfortable seating. HWWARs noted that chair spacing in day rooms could be improved to assist staff when they are caring for residents individually.

We noted that call bells were not within reach in the day rooms, and when mentioned to staff, we were advised that the residents there were not able to use them, and that staff would be present to support residents.

Dementia friendly signage was in place.

TVs were positioned within good sight for residents.

Corridors, Stairs and Lift

Corridors, hallways and staircases we observed appeared clean, tidy, fresh and well-decorated, with even flooring and good lighting. A large clock showing day, date and time was positioned in the main stairwell and visible from the reception area.

We noted that dementia friendly signage and emergency call bells were present in suitable locations.

There was an *Evac-chair* at the top of the stairs.

We observed that a keypad opening system was in place for service rooms, such as the laundry and sluice room (we noted that one service room did not have a keypad system). The doors we did observe appeared to be clearly labelled with appropriate signs.

A large, easily accessible, lift appeared fully operational, with emergency call button in place.

Bedrooms

Dementia friendly signage was placed outside each bedroom, including a photograph of each resident.

The bedrooms we viewed appeared clean, tidy and fresh, with good lighting and ventilation, and emergency help pullcords were provided.

Most bedrooms we visited did not have full ensuite bathroom facilities but were equipped with a wash-handbasin.

The Deputy Manager told us that residents may bring their own furnishings if they wish, and that televisions and radios can be supplied by the home if desired.

Bathrooms

The communal bathrooms and toilets we viewed had been recently refurbished to a good standard, and appeared clean, tidy and fresh, well-lit with appropriate flooring, and had emergency help pull cords in situ. The Manager told us they had specifically installed toilets and washbasins that were designed to be easy to clean around.

HWWARs noted that there were no hot water warning signs by the sinks in the newly refurbished bathrooms. When HWWARs mentioned this, we were advised by the Manager that the taps were thermostatic, so could not emit water above a certain safe temperature. However, the Manager added that safety signs had previously been in place before refurbishment, and they would consider reinstating them.

Kitchen

The kitchen appeared clean and well-maintained and was equipped with suitable commercial equipment. We were informed by the Cook on duty that they are proud to maintain a hygiene rating of 5. HWWARs could not see the rating displayed and suggested this could be beneficial.

The Cook spoke positively of how much they enjoyed working there, and described how they felt residents' meals and food provision was of a high standard, with individual needs and wishes accommodated wherever possible.

Laundry

HWWARs were unable to view the laundry room during the visit. However, the Management Team advised us that recommended Infection Prevention Controls (IPC) procedures were followed, including an 'in and out' system for dirty and clean clothing and linens. The Home is equipped with two industrial washing machines and two industrial dryers.

We were advised that staff recommended to families to use the commercially-available *Attach a Tag* device for easy, safe and secure identification of individual's clothing.

We were informed by the Deputy Manager that some families prefer to do their loved one's laundry at home, which staff support where requested.

Dining Rooms

The dining rooms viewed appeared clean, tidy, fresh and pleasant. The plentiful tables and chairs appeared to be of good quality. There also appeared to be sufficient space for residents to move around safely.

Lighting, heating, ventilation all appeared in good working order, and the entrances and rooms were free from trip hazards.

Portable call bells were in the dining rooms to support resident safety, and dementia-friendly signage was displayed in all these areas.

Health and Wellbeing

The staff were observed treating the residents with dignity and respect. Interactions between staff and residents appeared friendly and helpful, and residents appeared comfortable and well-tended to.

The home has a dedicated place as a hairdressing salon, and HWWARs were told that a hairdresser visits every two weeks and a podiatrist visits every six weeks.

We were informed that the two activity co-ordinators organised a range of activities around the home at varied times, including reading club, crafts, bingo and fitness activities such as

chair exercises, boxing and Zumba. Residents could also take part in group outings to cinemas, theatres, parks and shops, and some residents go to a luncheon club at the local Serpentine Church. The staff adapt risk assessments for activities to everyone.

We were told by the Manager that the Home does not have its own transport, but that a family member of a resident was willing to help facilitate residents being able to go out in his accessible vehicle.

GP and Dental Access

GP Access

HWWARs were told that new residents were informed about their options for GP registration and access. The Home has developed a positive relationship with local GP Surgery *Earlston and Seabank Medical Practice*, which operates as part of *Miriam Primary Care Group*. This also enables access to their facilities at Miriam Medical Centre in Birkenhead.

The Manager informed us that a GP visited monthly, and a Paramedic from *Miriam Primary Care Group* visits weekly.

Pharmacy

The Deputy Manager advised that the Home had recently changed their pharmacy provider to *McKeevers Victoria Central Pharmacy* at Mill Lane, Wallasey. They reported that this arrangement works better, compared to their previous provider, because of its proximity and dependability.

HWWARs were informed, by the Deputy Manager, that staff sometimes experienced issues when residents are discharged from hospital, such as receiving updates to medication and documentation that appeared to have not been updated. St George's Staff then always double-check with relevant services to ensure residents were safely cared for.

Dentistry Access

The Manager advised HWWARs that new residents were informed about options for dental registration and access. Oral health care assessments were completed as part of care planning, with care plans reviewed monthly.

The Manager reported ongoing difficulty in accessing timely dental care for residents. HWWARs discussed local dental treatment options, including the Specialised Dental Service operated by Wirral Community Health and Care NHS Foundation Trust (WCHC), and urgent dental treatment available via the NHS Emergency Dental Service for Cheshire and Merseyside.

Safeguarding

The Deputy Manager advised HWWARs that they felt their current processes and systems were effective in helping to keep both their residents and staff safe through regular, effective,

monitoring, clear escalation pathways, training, and ongoing audits. The Deputy Manager reported that they believed their system was robust, but they also recognise that striving to make continuous improvement was essential, and their focus was on maintaining safe, responsive and person-centred care always.

HWWARs were told that there were some safeguarding concerns in the last 12 months, which were reported to the Local Authority. The Deputy Manager stated that, whilst initially they experience some issues with obtaining responses or outcomes, this had improved and they felt the reporting process was good.

Where action was required, the Deputy Manager stated that a Strategy Meeting resulted and one-to-one instructions were provided.

Falls

The Deputy Manager told us that the number of falls has remained consistent with the previous year, and that St George's takes steps to prevent and manage falls through provision of suitable equipment, professional support, appropriate referrals and regular medication reviews.

HWWARs were told that falls were recorded in incident reports and are followed up through the assistance of the *SafeSteps* falls prevention App, and by updating behaviour charts.

The Deputy Manager reported that the local community Falls Prevention Team has been helpful in supporting the staff with management of falls.

HWWARs were told that community-provided walking aids, and other assistive equipment, were regularly reviewed, and the Home ensured obsolete equipment was returned to providers or disposed of appropriately.

Care Plans

HWWARs were told that residents and families contributed to care plans; they attended care plan meetings and discussed the residents care needs.

HWWARs were told that, to ensure care plans reflect the residents needs and wishes, the Home's staff conducted timely reviews, with family and resident involvement, and that their regular nursing team discussions also contributed towards person-centred care planning.

HWWARs were told that care plans were updated and maintained by the staff using an effective online programme.

The Deputy Manager mentioned to HWWARs that they had found the NHS Continuing Healthcare (CHC) Fast Track programme useful, as it had streamlined processes for providing immediate, fully funded and top-up NHS care for individuals with rapidly deteriorating conditions.

Infection Prevention Control

HWWARs were told that the Home's processes in place for testing residents for infection following travel to or from hospital were only if:

- their residents displayed respiratory symptoms
- the hospital confirmed an exposure or outbreak
- their residents had been on a ward where infectious illness was present
- the Home was experiencing an outbreak
- the resident was considered highly vulnerable

HWWARs were told that staff at the Home took preventative measures to avoid the outbreak/spread of *Clostridium Difficile* by ensuring:

- prompt identification and monitoring of residents with symptoms of diarrhoea
- isolation and barrier-nursing methods were conducted
- staff use PPE appropriately
- strict soap-and-water hand hygiene practices were adhered to
- safe laundry and disposal procedures
- enhanced cleaning with chlorine-based and sporicidal products
- cleaning and disinfection of shared equipment.

HWWARs were advised that the staff at the Home identified UTIs through:

- checking for signs and symptoms, such as confusion or agitation
- regular observation checks, including temperature, fluid intake, urine output and checking residents' general wellbeing.

We were also informed that staff would escalate to the GP Practice, where necessary, and that their staff have undertaken the *Dip or Not to Dip training*.

Complaints

HWWARs were told that all residents, relatives and staff were made aware of the Home's complaints policy and procedures.

HWWARs were informed that commissioners and relevant stakeholders would be informed of any upheld complaints, and they would be informed of the outcomes.

Resident Engagement

We were unable to engage with any residents at the time of our visit.

Families

HWWARs were informed that staff at the Home engaged with residents' families through;

- family meetings
- care plan meetings

- following the Home's nomination of a "Resident of the Day", where communication of any updates to residents' families would be ensured.

The Manager informed us that they had previously arranged coffee mornings to introduce discussions sensitively and compassionately around end-of-life care, and they were hoping to continue this, moving forward.

Staff

HWWARs were told that there were 76 staff employed overall.

On a day shift, there would be a 1:4 ratio of staff to residents, with:

- 2 nurses
- 13 care staff
- 1 activity co-ordinator
- 1 cook
- 1 kitchen assistant
- 1 laundry assistant
- 2 domestic staff
- 1 handyperson
- 2 office staff
- 2 members of the management team.

During the visit, HWWARs noted that staff on duty appeared happy to be working there, and were very helpful, and there appeared to be good level of staff supporting and attending to residents. HWWARs noted that staff appeared to have a good level of rapport together as a team. HWWARs were told by staff; "I love working here".

On a night shift, HWWARs were told there would be a 1:6 ratio of staff to residents, with:

- 1 nurse
- 1 senior carer
- 7 care assistants.

For nurse and HCA cover overnight, the Home also ensured that 1 senior carer stays until 8:30pm, and 1 starts at 6:30am.

Staff Engagement

The Care Home Manager told us he had worked at the home for 9 years. The Deputy Manager mentioned she has worked there for 4 years, and were both Wirral residents.

HWWARs were told by the Management Team that they undertook staff supervisions quarterly, or more frequently if needed.

HWWARs were told by the Deputy Manager that all mandatory training had been undertaken by their staff in the last twelve months, including Data (Use and Access) Act (DUAA) and Oliver

McGowan training. HWWARs were informed that staff had completed the *Six Steps* training, and that it continued to prove very useful.

HWWARs observed numerous staff certificates on display around the reception and office areas demonstrating that training had been completed.

HWWARs were told by the Deputy Manager that the Management Team attends the Wirral Care Home Forum.

Family Engagement

HWWARs were informed that staff at the Home engaged with residents' families through;

- holding family meetings
- care plan meetings
- following the Home's nomination of a "Resident of the Day", communication of any updates to residents' families would be ensured.

We were told by the Manager that most of the residents were from Wirral and their families lived locally, which meant that many family members were available to take their loved ones out on outings, et cetera.

Although HWWARs were unable to engage with any families at the time of our visit, we were shown several of the many 'Family Satisfaction Surveys' that had been completed by residents' families these all had positive comments and feedback. HWWARs were told the surveys were circulated to residents' families to complete every three months, and the Management encourage completion of these on a regular basis.

We were told that family members can stay with their loved ones during end-of-life care and there was provision for pop-up beds for family members to make use of, if required.

We were informed there was an open-door policy for visiting the Home so that visitors can come at any time convenient to them during the day, and mealtimes were not protected so that family members can visit to support their loved ones during mealtimes, if they wish.

Community or Other Support

HWWARs were told by the Deputy Manager that the Home's staff were aware of the Urgent Care Response Service, and their experience of this service was that it helps in preventing hospital admissions.

HWWARs were told that the Home's staff were aware of and had used, the Teletriage Service and their experience was that they found Teletriage teams were always helpful – especially at weekends and during the night shifts.

The Deputy Manager told us that it was helpful to them to have access to *GPConnect*, an NHS digital service that securely connects Care Homes to GP medical records, as it allowed authorised care staff to view critical, real-time

health data, such as medications, allergies, and recent GP encounters, directly within their Digital Social Care Record (DSCR) systems, reducing reliance on phone calls and paperwork.

Plans Moving Forward

HWWARs were told that the Management Team at the Home wished to further strengthen partnership working with their residents' families, with GPs, Community Teams and with Urgent Care Services to achieve more supportive and responsive care.

HWWARs were told that the activities co-ordinators and Management Team were looking into implementing more meaningful activities for their residents.

The Manager informed HWWARs that work will continue on the building to further improve individual residential rooms, bathrooms, staff areas and external areas, with a full renovation of the rear garden area due to start imminently. We were told by the Manager that they will be having a resin surface fitted in the garden which they feel will be safer for the residents. There were plans to clear and improve other areas to the rear of the building, including removing temporary storage containers to improve access and provide more car parking spaces.

HWWARs were invited by the Manager to return to visit the garden once renovations were completed, hopefully towards end June 2026.

HWWARs were told that the Management Team would be willing to share plans with other Care Homes, as best practice.

Recommendations

- Chair spacing in day rooms could be improved to assist staff when they are caring for residents individually.
- Hot water signage for taps in bathrooms could be replaced.
- Consider increasing the visibility of the Food Hygiene Rating for visitors and professionals.
- Consider taking part in future Healthwatch Wirral surveys for Care Homes Managers.
- Display Healthwatch Wirral leaflets and information relating to the Feedback Centre for staff and families. This enables the Care Home to gather independent feedback regularly and is a source of evidence for contract meetings and CQC inspections.

Conclusion

At the time of our visit, there were unfortunately no opportunities to speak with residents.

HWWARs were able to ask the Care Home about their processes for reporting safeguarding concerns and falls. The Care Home was able to reassure the HWWARs that the workforce were aware of the correct procedures to follow.

Overall, St George’s Nursing Home appeared to provide a caring environment, with clean, comfortable spaces that reflect the plans for ongoing improvements. During the visit we observed residents being treated with kindness, dignity and respect.

Glossary

CHAP	Care Home Assistant Practitioner
CQC	Care Quality Commission
Evac-chair	Specialist equipment that allows staff to help people with mobility issues safely exit a building during an emergency evacuation.
GP	General Practitioner
HCA	Health Care Assistant
HR	Human Resources
HWWARs	Healthwatch Wirral Authorised Representatives
HWW	Healthwatch Wirral
IPC	Infection Prevention Control
LA	Local Authority
NHS	National Health Service
RGN	Registered General Nurse
RM	Registered Manager
UTI	Urinary Tract Infection
WCHC	Wirral Community Health and Care NHS Foundation Trust
EMI	Elderly Mentally Infirm
CHC	NHS Continuing Healthcare
DUAA	Data (Use and Access) Act
DSCR	Digital Social Care Record
[...]	Indicates that information has been omitted for anonymity.

Distribution

Healthwatch Wirral submits the report to the provider for comment, and once comments are received and added to the report, the report will be sent to the Commissioner and CQC. Healthwatch Wirral publishes all Enter & View reports on its website and submits to Healthwatch England in the public interest.

Manager's Comments

Comment Box

Chair spacing in the day rooms

At the time of your visit, one of our dining rooms was being used temporarily as an additional lounge area during the warmer weather because it benefits from air conditioning, whereas our main lounge does not. This temporary arrangement inevitably affected the usual spacing of chairs. We appreciate this observation and will continue to ensure seating arrangements are regularly reviewed to maximise residents' comfort whilst maintaining sufficient space for staff to safely provide individual care.

Call bells within communal areas

The communal lounges are supervised by staff 24 hours a day, ensuring residents have immediate access to assistance whenever required. In addition, fixed nurse call points are available throughout all communal areas.

Many residents using the communal lounges are supported with sensor mats or other appropriate monitoring systems which immediately alert staff should a resident attempt to mobilise independently. This enables staff to respond promptly while supporting residents according to their assessed needs and risks.

Our nurse call system is also portable and can be detached from residents' bedrooms where appropriate. If an individual resident wishes to have a personal call bell whilst using another area of the home, we are able to provide this. We regularly provide portable call bells for residents spending time in the garden and will continue to assess individual needs to ensure suitable arrangements are always in place.

Comment Box

Keypad access to one service room

We noted the observation regarding one service room not having keypad access. Following an internal review, we have been unable to identify which room this referred to, as our service rooms are secured appropriately according to their function and associated risks. If you are able to clarify which room was observed, we would be grateful, as this would allow us to review the area further and consider whether any additional security measures would be beneficial.

Food Hygiene Rating display

Our Food Hygiene Rating of **5** is displayed at the main entrance to the home, where it was installed by the Environmental Health Officer following our inspection. We appreciate the suggestion regarding visibility and are happy to display an additional copy outside the kitchen to make the rating even more accessible to residents, visitors and professionals.

Once again, thank you for your visit, your constructive observations and the overwhelmingly positive report. We value the important role Healthwatch Wirral plays in supporting quality improvement across health and social care services, and we appreciate the opportunity to showcase the commitment and dedication of our staff.

We look forward to continuing to work positively with Healthwatch Wirral and welcoming you back to St George's Nursing Home in the future.

Social Value

Measuring Social Value

Social Value is a broader understanding of value. It moves beyond using money as the main indicator of value, instead putting the emphasis on engaging people to understand the impact of decisions on their lives. The people's perspective is critical.

Organisations will always create good and bad experiences, but on balance should aim to create a net positive impact in the present and for a sustainable future. They should measure their impacts and use this understanding to make better decisions for people.

Social Value UK, 2024



How Healthwatch Wirral demonstrates Social Value

Healthwatch Wirral (HWW) is dedicated to ensuring how Providers meet Social Value standards. Our social value commitments aim to put people's perspectives first when supporting vulnerable individuals, economic pressures, and promoting environmental sustainability.

Vulnerable People, Economic Pressures, and Environmental Sustainability

People experience vulnerability at different points in their lives, which can increase and decrease over time. During our Enter and View (E&V) visits, we aim to understand the needs of vulnerable people who live in Care or Residential Homes.

During our visits, we discuss with the Providers their training practices, how they support both staff and families, and where they would signpost or refer to when supporting a person's clinical or non-clinical needs. We offer suggestions and recommendations to help ensure the Provider is utilising all available care and support resources. Our aim is to ensure that residents are allocated the right care at the right time, and to avoid unnecessary trips to A&E if the situation can be managed effectively for the person where they live.

By utilising our knowledge of the care system, we can assist Providers and members of the public in navigating what can appear like a complicated system. This includes directing them to the appropriate services like the Urgent Community Response Team, or GP Enhanced Access appointments, et cetera.

Providing the correct care in the right place and time can ensure a positive experience for residents while reducing pressures on the health and care system. Effective communication between providers, carers, and residents (such as promoting available clinical and non-

clinical services) enables Care Providers to utilise the support they need more effectively.

HWW promotes Wirral InfoBank <https://www.wirralinfobank.co.uk/> which provides an online directory of provisions available across all sectors (clinical and non-clinical). We also promote HWW's Feedback Centre <https://speakout.healthwatchwirral.co.uk/> to ensure people can leave feedback about their experiences. This helps influence the design, commissioning, and deliverance of care to better reflect the needs of the community.

HWW ensures it is as paperless as possible. However, it is vital that everyone gets information in a format that is suitable to them. Our website is available in different languages and audio, and we share Public Health's commitment to addressing inequalities by providing documentation in different formats and languages.

We have adopted a culture of seeking assurances in relation to:

- Quality and Equality of care.
- Clinical and non-clinical support and treatment.
- Equality Impact Assessments.
- Coproduction and integrated commissioning.

We engage health and care Commissioners and Providers in discussions about how effectively they collaborate to deliver integrated, seamless care and support for people, families, carers, and the workforce. Coproduction is integral to achieving meaningful social value.

We prioritise using local services and providers for all our administration, office and operational needs, ensuring that our finances are spent locally. Whenever possible, we utilise free premises and have sponsored local sports clubs for women and children. Additionally, we support HWW staff by being Mindful Employers and providing equipment to meet the needs of individuals.

Healthwatch Wirral CIC 2025



healthwatch Wirral

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