

NHS Long-Term Plan Summary Document

Healthwatch Stoke-on-Trent and Healthwatch Staffordshire



It's your NHS. Have your say.





Recommendations

- Focus on prevention including identification of priority areas based on population health together with long-term financial investment and a clear line of accountability for achieving positive change.
- Health and Care services to develop a joined-up approach to communication and information provision for all members of our communities so that they are enabled to keep themselves well whilst taking account of Data Protection legislation.
- Community assets that alleviate loneliness or promote communities should be considered, monitored and recognised as integral to the overall approach. This includes engaging the third sector in a meaningful way and accepting that financial investment is needed in the third sector if a gap cannot be met by health and care services.
- Transport should be understood as a key determinant of health, especially in rural communities. It should be at the heart of planning beyond the placement of health and care services and done so jointly.
- Carers should be supported to fulfil their role and services such as respite given higher priority.
- Access to mental health should be improved and recognition of possible mental health conditions be considered when diagnosing conditions.
- The use of technology in healthcare should be a choice, addressing the needs of patients who may not be comfortable with it but maximising opportunity for those that are.
- Easier access to test results and information where appropriate so that patients can become active participants in their care.
- Improved communication between services and move towards an integrated, digital system.
- GP reception staff should be trained to communicate with young people and other vulnerable groups to enable them to feel more confident to engage. This should form part of Care Navigation training where delivered.
- Every effort should be made to ensure continuity of care in all settings, especially with at-risk groups and young people for whom the building of a relationship is important.
- The NHS' comprehensive service should extend to residential care and care homes, providing simple access to services such as physio's, occupational therapists, dentists and district nursing, hearing specialists and others.
- Staff training in care homes should be key priority for the NHS as well as increased supervision of establishments where required.

Executive Summary

Background

Healthwatch promotes the involvement of people in the commissioning of health and care services locally. It monitors the standard of provision of these services and produces reports and recommendations as to how and what services ought to be improved. Healthwatch is the voice of local citizens and well embedded in the community to ensure that it is well placed to listen and make sure their views are heard.

With growing pressure on the NHS such as an ageing population, more people living with long-term conditions and lifestyle choices affecting people's health, changes are needed to make sure everybody gets the support they need. The NHS has produced a Long-Term Plan¹, setting out the measures it intends to take to address changing need.

What We Did

This report is the result of collaboration between Healthwatch Stoke-on-Trent², Healthwatch Staffordshire³ and Healthwatch England⁴. Its purpose is to share the views of the general public when asked about Health and Care across the Stoke-on-Trent and Staffordshire Sustainability and Transformation Partnership⁵ (STP) footprint. It is the result of engagement with the public about the NHS Long Term Plan. It focuses on areas related to the Long-Term Plan including:

- How to help people have a healthy life
- How to help people manage and choose the support they need
- How To help people keep their independence and stay healthy as they get older
- How people would like to interact with their local NHS
- Peoples experience of getting help and support
- How to improve Health and care support after initially seeking help
- How expectations of care are met at each stage

Responses about the above areas were gathered in surveys.

In order to avoid duplication and to identify gaps in engagement we asked the STP to identify two areas in which they would benefit from further public feedback. They identified:

- Young People
- NHS in the Care Home

Responses for these two areas were gathered in Focus Groups.

Our Goal

Healthwatch is determined that the NHS Long-Term Plan is shaped by significant public engagement. This report is an important tool in this and part of ongoing engagement with NHS leadership. Not only is this intended to influence decision making locally it also forms part of a larger national dataset that can be used by Healthwatch England to influence decision makers.

¹ https://www.england.nhs.uk/long-term-plan/

² http://www.healthwatchstoke.co.uk

³ http://healthwatchstaffordshire.co.uk/

⁴ https://www.healthwatch.co.uk/

⁵ https://www.twbstaffsandstoke.org.uk/

Our Findings:

Our respondents answered two questionnaires. One with general questions relating to their opinions on how best to keep them well, and another more focussed upon people with specific conditions, their experiences and views on how to improve services. They also participated in focus groups relating to Young People and NHS in Care Homes.

People told us that the most important things are that:

- They can access treatment when they want
- Professionals listen to them when they talk about their concerns.

"Services are not joined up... District Nurse can't see when the hospital last changed the catheter for example, and I don't always remember" - Respondent

Prevention/Self Care

Our respondents express a desire to be involved in their own care and repeated the need
for better information provision to help them do this, such as timely communications.
They are also keen to prevent ill health, with many respondents making suggestions as to
how preventative services can be improved. Healthwatch is keen to see preventative
services given a priority and a move away from reactionary services becoming more than
an aspiration.

Communication

Many of those who responded to this survey express a desire to be partners in their own care. Through comments shared and survey responses they describe a desire to be listened to and communicated with in a way which enables this. Many are happy for this to be enabled by technology too, although this does not suit all. Technology is also suggested as a means for agencies to communicate better. Respondents want organisations to be able to adequately share information needed to keep them well, such as the sharing of test results. However, they also suggest that the management and security of data is of paramount importance to them.

Information Provision

Recent moves towards initiatives such as Social Prescribing suggest a real move towards
answering some of the concerns raised by respondents about information provision.
Information provision across the STP patch is piecemeal. Healthwatch is keen to see that
information provision forms part of forward planning with clear ownership and leadership
attached to it. It should also consider groups particularly affected by information
provision, such as those with hearing loss, represented in the cohort included in this
report.

Maintaining Independence

• As they get older, our respondents want to be secure that their family will be helped to support them at the end of life and want to remain in their own home for as long as possible. To help them to remain independent, they want services to be accessible and transport links ample, especially in rural communities. They identify access to services such as respite, community care and help in the home as important tools in remaining well. What they say also echoes earlier work done by Healthwatch Stoke-on-Trent in which over 75s explained the importance of social factors such as measures that alleviate loneliness or community action⁶.

Those with Long-Term Conditions

• Of those who answered the condition specific survey, just under a third of them said that their initial attempts to access help met their needs and quarter of them described their overall experience of getting help as positive. Half of respondents who sought support for more than one condition said this made it more difficult to access. A third of respondents described waiting times as ok and a quarter said this didn't improve much when waiting for specialist help. Many of these comments relate to mental health, an ongoing theme throughout this report. A third of patients described their access to ongoing care as ok and a quarter said that this met their expectations. Although respondents described the communication between organisations as well as between staff and patients as the main cause for their dissatisfaction; it is notable that throughout this feedback, access and communication are mentioned more than anything else.

"Communication hasn't kept up with modern best practice and relies too heavily on letters, is restricted to office hours and departments don't communicate well with each other."

Young People

• Young people described some good experiences, such as the use of emergency services and the general care they have received. They reflected wider concerns of society, highlighting waiting times as a concern, and again communication. In this though, the nuances changed with this group. Many of the waiting comments relate to accessing mental health services with long waits described, others about getting appointments with their GP. Also highlighted is the critical importance of continuity of care in this group with many describing difficulties communicating with staff in primary care. Things are easier for young people in a clinical setting if they have a relationship with those treating them, something becoming particularly less frequent. They make useful suggestions, such as the use of Skype to alleviate the anxiety of attending primary care. However, for this group more than any they feel a difficulty in explaining mental health problems to reception staff. Healthwatch feels that although recent work done on the impact of initiatives such as Care Navigation showed that most do not mind the interaction with receptionists, there should be special recognition in training for this group if this is not already present.

"GP is pretty good, they know that I am a young carer."

⁶ https://www.healthwatchstokeontrent.co.uk/wp-content/uploads/2018/04/HW-Stoke_Brinsley-Befrienders_Staying-Well.pdf

Care Homes and NHS Provision

When talking about NHS in care homes, respondents spoke positively about much of the
care they receive and how hard staff work. They mention appreciating things like dentist
and GP visits. They expressed concern about access issues such as to things such as
physio, hearing specialists and questioned why district nurses do not go into care homes.
To improve things, they suggest staff training as a top priority and more supervision of
care in homes by the NHS. Respondents mention specific training to support staff in
keeping resident's mobile and active as well as the potential for reducing urine
infections.

"Access to chiropodists, dentist, hearing specialist ad hoc and hit and miss. Not all homes provide this."

Next steps

This has been a large piece of work and a valuable insight into opinions of the public about their health and care. They provide many ideas for service improvement and this only furthers the case for service user engagement in the future development of health and care services across the STP⁷ patch. Both Healthwatch Stoke-on-Trent and Staffordshire will continue to support in this work.

This report has been shared with STP Leads. Sir Neil McKay, Together We're Better Chair, said:

"The independent voice provided by Healthwatch Staffordshire and Healthwatch Stoke-on-Trent is a crucial part of the Together We're Better partnership. This very welcome report, which captures the views of local people on what they want to see change in health and care following the publication of the NHS Long Term Plan, will form a key building block in the development of our refreshed Five Year Plan, due out in the autumn. We thank Healthwatch Staffordshire and Healthwatch Stoke-on-Trent for carrying out this work."

The clear recommendations set out in this report will be strongly represented by Healthwatch Stoke-on-Trent and Healthwatch Staffordshire in their strategic roles. The themes outlined by respondents can also form part of Healthwatch workplans for the near future. We will endeavour to report against them and be accountable to the public who have taken the time to contribute towards this work.

Read more about this and view the full report at-

https://www.healthwatchstokeontrent.co.uk/ltpreport/



Tel: 01782 683080



Email: info@healthwatchstoke.co.uk



Twitter: @healthwatchSoT



Facebook: Healthwatch Stoke-on-Trent



Linkedin: Healthwatch Stoke

⁷ https://www.kingsfund.org.uk/topics/integrated-care/sustainability-transformation-plans-explained