healthwatch
Barking and Dagenham

Feedback Report!

Have your say on the

Health and Wellbeing Strategy and the Clinical Commissioning Group's plans for 15/16 event.

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Background

This report has been compiled following a public event on Wednesday 21st January 2015. Healthwatch hosted the event to give local people a say on the Council's Health and Wellbeing Strategy and the Clinical Commissioning Group's plans for 15/16.

We would like to thank all those who attended and took part including delegates and colleagues who provided stalls in the market place session.

The CCG priorities

The CCGS vision is to improve health and health outcomes for patients and residents in Barking and Dagenham through clinical commissioning of sustainable, safe and high quality local services.

The Clinical Commissioning Group is responsible for commissioning hospital and community health services, including mental health services, for the local population. Each year it has to set out its plans for the future based in line with its financial position and making the best use of the resources they have.

The Health and Well Being strategy

Health and Wellbeing Boards aim to improve the lives of local people by making it easier for health and social care services to buy better services together - this is known as 'joint commissioning'. They are responsible for preparing a joint health and wellbeing strategy. These identify what services are needed to help improve people's health and set a local framework for the commissioning of health care, social care, public health services and other council services.

This report represents a collective response from the participants who attended the event on the 21st January 2015. Healthwatch Barking and Dagenham have no organisational view.

Copies of this report are available by contacting Barking and Dagenham Healthwatch on 020 8596 8200 or by emailing **info@healthwatchbarkinganddagenham.co.uk**

Copies may also be downloaded from our website where you can also see a short film made from the day **www.healthwatchbarkinganddagenham.co.uk**

Structure of the event

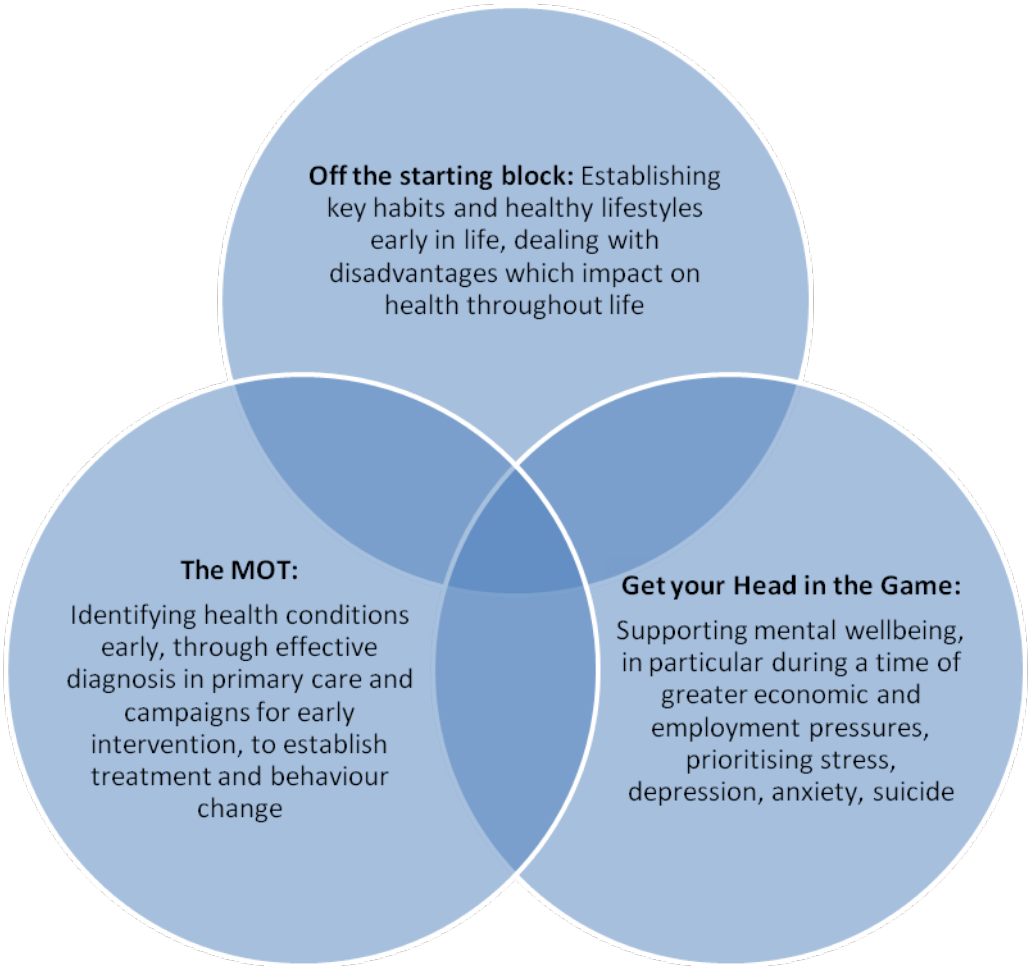
The event was attended by over 100 local residents and organisations. Marie Kearns Chief Executive Harmony House, Contract Manager Healthwatch, opened the event up by giving a brief as to what the day would consist of and importance of people having their say to contribute to CCGs priorities and the health and wellbeing strategy.

This was followed by a presentation from **Matthew Cole, Public Health Director, London Borough of Barking and Dagenham, who presented on the biggest challenges to health and wellbeing in our borough.** Matthews's presentation focused on the headlines below:

Getting serious about prevention and public health and concerns that dominate our thinking:

1. We need to address the fact that a significant number of our population is in poor health and our high premature mortality rates, especially from coronary heart disease, stroke, cancers and respiratory disease.
2. We need to develop and invest in primary, community and social care provision to deliver the 'better care outside the hospital' without which our hospital services are unsustainable.
3. We need to commission services for a rapidly changing population at every stage in their life/whatever their needs so that services keep pace with changing needs and numbers. This is particularly true when considering the new housing developments and the increasing child population.
4. We need to get serious about prevention, particularly in primary care – if we don't we will slip backwards in improving life expectancy and beneficial new treatments will be crowded out by the need to resource care for wholly avoidable diseases
5. We need to address unacceptable variations in quality of care and outcomes – particularly in primary care

Where we need to focus:



Things that have been done so far:

Matthew spoke about what has been done so far.

New opportunities to address these issues in 15/16:

- Updating our partnership Health and Wellbeing Strategy and plans
- Some real opportunities to improve primary care through changes to the way primary care can be commissioned next year.
- NHS to work with and support the Council in tackling health inequalities.
- Expanded roles for non-medical staff.
- New ways to organise how care is provided
- Continued focus on integration - bringing services together around the patient

Between the presentations, three patient's stories were narrated. These brought to life the challenges faced by patients in three different areas and ways in which they had been supported.

Patient story 1

Michelle is 32 and has a child. At the new born screening test, she was told that there were some problems with her child's hearing. Michelle then had to go to the audiology service with her child at Axe Street Child and Family Centre in Barking for further investigations. Both Michelle and her partner were told that their child was profoundly deaf. She says the service at Axe Street Child and Family Centre in Barking was very good. But she was told as it was the summer holidays she would have to wait until after the break, (which was 6 -8 weeks) before a deaf teacher would be able to meet with her and offer support. Michelle says that this was an emotional time for her and she needed support sooner and felt alone. Once she had meet the deaf teacher the support was fantastic and she truly feels that without this support she would not have known where to go. The deaf teacher helped Michelle access support groups and more. The service at Axe Street continues to be good.

Patient story 2

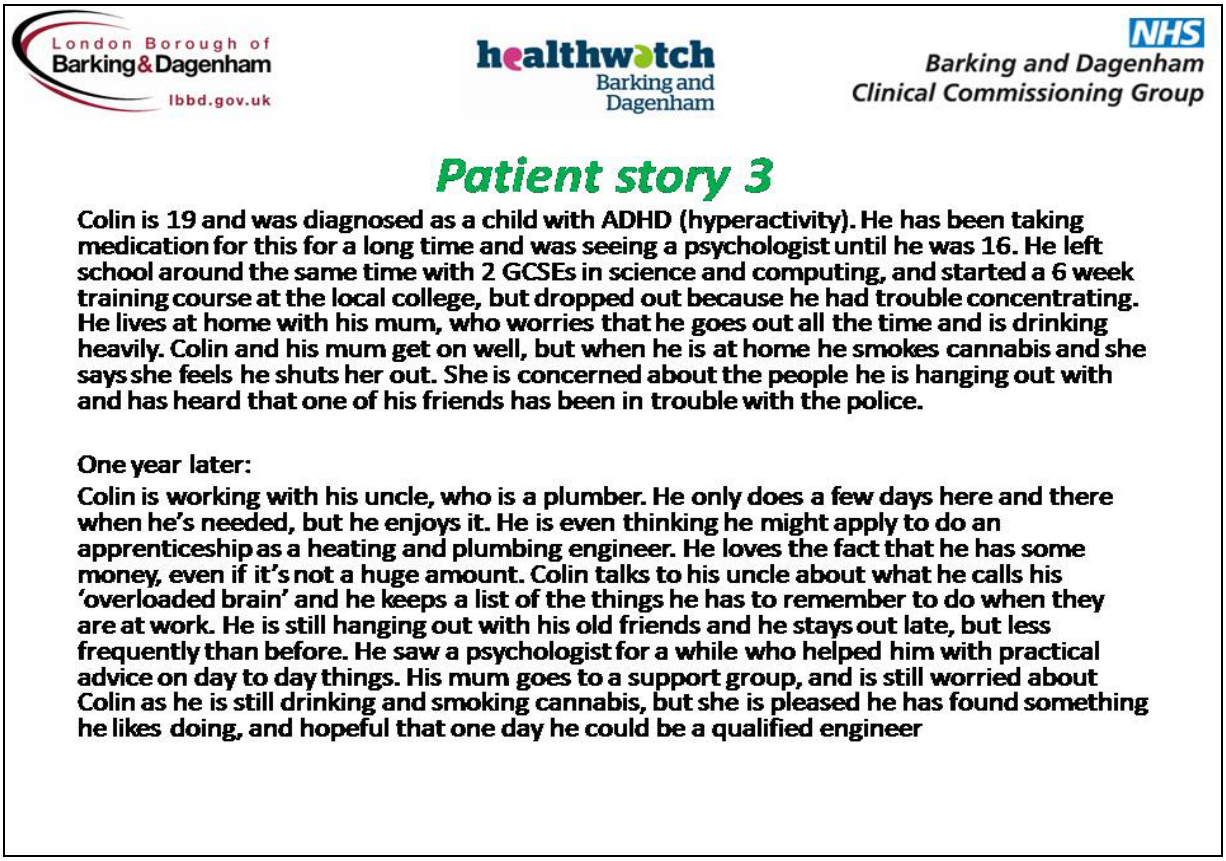
Mrs Ware 84 lives with her husband Ron 86.

In August this year, Mrs Ware had a problem with fluid in her legs. She could not get out of bed and while she'd had similar problems with fluid in her legs before, this time she'd also contracted an infection called cellulitis.

The Wares went to see their doctor and the problem was quickly diagnosed. Given that this was an infection, her doctor was clear that, if possible, Mrs Ware should avoid going to hospital.

After making sure that Mrs Ware was able to recover at home, care was arranged via the Intensive Rehabilitation Service. A team including physiotherapists, social services and the district nurse have come in to help.

Social services help her get up in the morning and ready for bed in the evening. They have provided a rubber mattress that stops bed sores and a cushion for her chair. The physio meanwhile is "hard work and he does push me" to do the exercises. Three weeks after being completely unable to get out of bed, she is able to move around using a walking frame. More importantly, her mind "is back to normal because that went," due to the dehydration she was suffering from. Mrs Ware adds: "The nurse is very good – she'll order things and they'll be at the chemist the next morning."



The second presentation was given by **Dr Jagan John Clinical Director, Barking and Dagenham CCG and local GP,** gave an explanation of what the CCG have done this year and the challenges to the borough from a clinical perspective. The headlines of his presentations were:

Some of the things that we have been working on in 2014 and things we still need to do

Integrated care - Joining up health and social care through the Better Care Fund

- We have put some of our budgets together across the council and the NHS and will be making decisions about how we spend that money together so we get the best benefit for patients
- We have been working together across health and social care to support people at home and prevent people needing hospital
  - Intensive Rehabilitation Service,
  - Community Treatment Team,
  - Integrated Health and Social Care Teams
  - Enhanced care in nursing homes

- We have been successful in reducing the number of emergency admissions for conditions where people can be treated at home – we are on track to meet our target of 363 fewer admissions this year compared to last year and we have reduced the number of injuries due to falls. But we need to work even harder next year to join up and improve care to continue to make progress
- Improving hospital discharge processes to make sure care and support is organised for people when they are ready to leave hospital – we are keen to get your views about people getting the equipment they need after a spell in hospital.
- We are working together and with carers to make sure that carers get the support they need – in particular through the Care Act and the new Carers Strategy

Primary care transformation

- **Health 1000** - the Health and Wellbeing Practice
    - Launching in January a new 'super' GP practice seeing people with multiple conditions mostly in their own homes
- **GP 'access hub'** extended hours evening and weekends based at BCH from January.
- We are one of the top performing boroughs for ensuring vulnerable people get their **flu jabs**
- Improving primary care cancer care particularly for lung cancer – **Macmillan GPs** are working to raise awareness of cancer and help get people diagnosed more quickly so they have a better chance of treatment. This includes a review of lung cancer patient journey in each practice and review with practices of the way in which they identify and manage patients with cancer with related training and support.

Primary care transformation programme lead by NHS England in 2015 – focus on investment, consistent quality, tackling health inequalities, improved access and more local influence through co-commissioning

Mental health

- Did you know you can self refer for free and confidential talking therapies if you are feeling stressed, anxious, low in mood or depressed? We have some of the lowest waiting times for this service (less than 2 weeks) and one of the best recovery rates in London. We still have some work to do with NELFT to make sure we are getting enough people being

referred so they can benefit. Your views on how we can do this appreciated.

- We are getting better at identifying people with dementia early so they can get the help they and their families need. We have met our target early this year and are on course to reach the national target of 67% diagnosis rate early too.
- We were successful in getting more money for early intervention in psychosis related services - with better 24/7 crisis line support, extended opening for access team and improvements in support for children and young people
- Lots still to do for next year to improve access, choice, prevention and recovery

Children and Young People

- Special Educational Needs – we have been working with health professionals, children's services and education to ensure that children with special educational needs and disabilities get the right input swiftly from everyone to meet their needs.
- The child and adolescent mental health service (CAMHS) has improved the rate of children and families attending appointments by working with them to improve communication
- A number of GP practices will be testing the benefit of working more closely with Children's Centres and Health Visitors at their practices to improve support for parents – making sure families get early support when they need it on health and other issues.

We still have much to do to work together to improve how we work together to support families early, tackle childhood obesity and support mums to breastfeed

Both presentations were well received. There was question and answer session allowing participants to ask specific questions.

The second part of the day was an interactive "market place" session. Colleagues from a whole range of organizations came along and provided stalls to give information to participants about their services and projects. The following organizations were represented at the market place: NELFT mental health services – Improving Access to Psychological Therapies, (IAPT), the Big White Wall, Substance Misuse Services, London Borough Barking and Dagenham, Food Waste project, Healthy Living Services, Smoking Cessation services, Early Years services, Child and Adolescent Mental Health Services, Voiceability, Healthwatch, CVS, Macmillan Cancer Care, NELFT community health services including Community Treatment Team and the CCG Patient Engagement Form

Participants had the opportunity to look around the stands, take information about the services and talk to colleagues there as well as give feedback.

There was a number of ways that participants could have their say:

- Roaming reporters: Reporters including Dr. Jagan John, Matthew Cole and Sharon Morrow, Chief Operating Officer, Barking and Dagenham CCG, Manisha Modhvadia, Healthwatch Officer went around speaking to participants about what they thought needed to be addressed and what was working well in the borough.
- Feedback room: In the feedback room where participants could sit, write down their views or speak to some of the other facilitators of the event.
- Video room: The video room provided the opportunity for participants to record their views on video tape.
- Feedback form at the end of the event.

The day was interactive, aiming to capture the views of the local community to influence the CCG priorities and the Health and Well Being Strategy.

KEY THEMES

A number of key themes emerged from the day, summarised below. These themes have been collated from both the "question and answer session" and from the notes and comments taken from the interactive session and feedback sheets.

Equipment and aids

- Participants felt that equipment and aids in good condition should be re used. This a waste of resource, especially when some equipment such as walking frames, can be easlily disinfected, cleaned and reused.
- There appears to be ineffiencies in social care regarding equipment in regards to wheelchairs and commodes.
- Service users are not given enough information about what to do with equipment once they no longer need it. No information was given as to where to send back equipment.

Mental Health

- There was a mix of experinces about mental health services, some participants felt that mental health and physical health are not addressed as having an impact on one another, both seem to be addressed seperately by professionals and services. However a few participants commented on having good treatment for both their mental and physical health.
- There was feedback given on long waiting list for psychology care in mental health.
- The DELTA (can we spell this out?) project is working well, it's getting people to talk together.

Intensive Rehabiliation Teams

- There were both positive and negative views about the Intensive Rehabilitation Teams. Some participants felt that there was no real choice given to patients as to whether they wanted to be treated at home or in hospital, others felt there was choice available

- Some participants felt that the rehabilitation at home could be rushed and service users left feeling like there is no time to ask questions about their rehabilitation.

Hospitals

- Some participants felt that waiting for an outpatients appointment for 8 months is too long ,12 weeks is more reasonable.
- It was highlighted that the wait for physiotherapist services can be very long, an example was given of over 6 months.
- The issue of ingrowing toe nails in children was also raised. Problems accessing this service means that some children are having to go hospital to have this treated.

Education and information

- Participants highlighted that there is a lot of information available in the community; however people are still unaware of certain services.
- There should be continued promotion of the services, workshops and information events should be happening more than once a year in different community settings.
- Information about accessing services needs to be widely available.
- There is a general lack of co ordination, co operation and communication between services and professionals.
- Partcipants from this event said they were happy to volunteer in GPs and other community settings where they can patients to other servcies.

Children and young people

- It was felt that families and individuals need to be made aware that children's centre are a community hub that can support all ages from young to old.
- Improve services for young people in supported housing and homeless and living independently.

Home services

- To ensure that home services are providing what the patients need, patinets need to be involved in monitoring services.

GP services

- There was postive feedback received from some participants about their GP Practice, for example it was expressed that the service of a GP practice was good and access to appointments was not a problem.
- Some participants highlighted the fact that there was still problems with accessing GP appointments
- There is an issue with Primary care practices. Some GPs open their doors at 8.30 but their phone lines open later. By the time people get through on the telephone all appointmnets including urgent appointments are gone. What about the elderly, housebound and those who get to the GP to queue up. This needs to be addressed.
- It was felt that although the intention is there to improve diagnosis of cancer in the borough, waiting times for seeing a GP initially are too long and time is crucial when it comes to certain illnesses.
- There should be better customer service at GP practices. Training including awareness for reception staff and GPs.
- At this event members of the Alzemiers society said that they are willing to offer free training to Gps.
- It was felt that reception staff need to be able to identify those service users who have a learning disability so they can adapt the language they use when they communciate with the service user.
- Sycamore Trust said they have a programme which can be rolled out to GPs to offer training in regards to service users who have autism or a learning disability.

Other comments

- Smaller service user led community groups able to provide support services but prevented by commissioning process.
- When will personal Health budgets be introduced in LBBD?
- Support to people who are discharged from Community Rehabilitation Team of supporting them getting a job.
- Better community nursing services with continuity of nurses who feel well supported and encouraged to increase knowledge but also have enough time to spend with patients.

Conclusions

The feedback will contribute to inform the commissioning priorities and the outcomes of the Health and Wellbeing Strategy. In conclusion the main areas highlighted were:

- Access to GP appointments needs to be addressed for example; some GPs open their doors at 8.30 but their phone lines open later which means people who are unable to get to their GP practice are unable to see their GP.
- Consideration needs to be given to re using aids and equipment. It was felt that some equipment can be cleaned easily and should be re used.
- There needs to be clear communication with the public about current services. Participants felt this is crucial if the borough wants to improve the health and well being of local residents.
- Physical health and mental health are seen as separate health issues by services and professionals rather than having an impact on each other.
- There were both positive and negative comments in regards to the Intensive Rehabilitation Teams. Some participants felt that there is a clear choice when choosing to stay at hospital or going home and others felt that there is no real choice.

How did the event go?

Overall feedback from participants was positive. A breakdown of the comments made are below:

What did you learn today?

- We have learnt about Health improvement.
- Priorities across different services.
- Reasons behind strategic plan.
- Interesting, if worries, stats on local Health
- Something about future plans/strategy
- About primary care
- Following discussion with CVS, Macmillan GP and AS
- Macmillan GPs working with CVS to target information about cancer great idea generated today.
- Dr John not knowing the services available in Children Centre
- Children Centre provides services for older people! I never knew.
- Range of services in borough. What they do it terms of support etc.
- Health of borough is not as good as it should be.
- Felt optimist that people in authority are doing something about it.
- Listen treatment of physical and mental health.
- That CCG cannot answer a lot of questions.
- Improve access to GPs wait time is too long for appt/call on the day system not fair or practical
- We learn lots of thing about Health.
- Very interesting statistic from Matthew Cole.

- New initiative discussed by Dr John sound beneficial.
- Interesting in regarding having all services from local GPs.
- Treating people at home and not in hospital.
- Residents must be more vocal negative and or positive
- Only a voice can improve things.

How useful was this event?

- Very good.
- Very-fast for networking.
- Good to hear plans for the borough but need to see action.
- Informative
- Very, I have been able to rethink and find out about the future of our Services
- Very useful I am a parent and event co-ordinate of South East Hub. Parent forum based in Leys Children centre.
- Everything I have taken I will take back to groups and promote health and well being exercise etc.
- Very useful of informative. Annual event and think about conducting events for specific purpose in Mental health etc separately
- Excellent event-good mix of stall holders and public and professionals-well done.
- Very helpful
- Everybody was friendly. Well organised