

Focus group with 8 carers for people with cancer, 27th July 2017

This was one of the focus group discussions that fed into the [full report](#) for the 'Big Conversation' engagement for the Bradford local plan.

Focus groups were structured by four broad headings:

PROTECT: what are the services that matter most to you? What's 'too good to lose'? Where are our 'red lines' for change?

GROW: what is working well that we could do more of?

CREATE: what are the new ways of working, or new services that would meet local needs for health and wellbeing?

REDUCE: what can we stop doing, or do less of? What can we compromise on in order to protect/grow/create the things that matter most?

PROTECT

- GPs and hospitals
- Support from Bradford Cancer Support - specifically for carers- helps people keep caring and is a life saver and we need more of it
- Activities and support for cancer patients
- Emergency response
- Patient Transport Service
- Wheelchair service

REDUCE/COMPROMISE

- 111 cannot diagnose over phone, had to wait 3 days for call back
- Pre-medical appointments when operations are cancelled
- Services overlapping and professionals are not co-ordinating the visits between them
- Goldline service is not working effectively
- Reduce the number of hospital appointments for oxygen
- Despatch the correct ambulance, experienced 3 ambulances turning up to the property at one time
- Cancer support nurse does not return phone calls

GROW

- Social activities for cancer patients
- Offer sit down exercise classes within NHS and not just the voluntary sector
- Sit and wait for same day GP appointments
- Some GP services are really good and should be the same for everyone e.g. GP gave cancer patient direct contact number

- Support for carers
- Specialist nurses
- Train more nurses, doctors, medical staff- should not have to pay for training. They need to have a home grown workforce.
- Continuity of care
- Improve sharing records - information should be passed between services and we should have access to online records.
- Community matrons are giving a brilliant service
- Bradford Royal Infirmary (BRI) staff attitude needs to be improved; they need to be more compassionate, caring and respect patients. However the ambulance service attitude is very positive.
- Keep patients and carers fully informed during the care pathway
- Improve the communication between the staff and patients
- Reduce the time waiting for operations and scans as this causes has an impact on mental health of cancer patients
- GP going the extra mile and obtaining an update from cancer patient
- Lived experience highlights the gaps in support
- Provide support equipment for patients in the home e.g. oxygen equipment
- Airedale staff treat the cancer patients with dignity and with compassion
- Other hospitals to adopt the Butterfly scheme which is currently at Airedale Hospital
- Concerned that if people are going to be charged for ambulance call out for people that have fallen in the home will result in more deaths. People will be reluctant to contact the ambulance service

CREATE

- More services available out of hours
- Health MOTs for people, especially for carers which will enable them to continue with caring
- Recycle unopened bandages and medicines
- Medication reviews
- Single blood test done to check for everything rather than lots of different test and appointment. Use a process of elimination
- Reduce the waiting times for appointments and scans
- Walk in clinics to offer overall assessment
- Increase the number of nurses and doctors

Other themes

Carers felt that they are not listened to and early intervention would increase health outcomes for cancer patient and reduce the cost to the NHS.

They discussed the importance of a wellbeing assessment to ensure their health is not compromised whilst caring for their loved ones. Many of the carers had experienced poor quality care and bad attitude whilst visiting the BRI and as a result they would try and avoid having to go there.

Challenges getting GP out of hours.