

Quarterly Intelligence review - November 2018

Healthwatch uses intelligence to help inform its activities. We analyse feedback provided by the public and consider insight provided by other agencies to develop a picture of current health issues in Brighton and Hove. We then assess these issues using a prioritisation tool to identify those that we believe should be included in our workplan.

The November 2018 review identified 13 key health issues for Brighton and Hove. We used a combination of Public Health Brighton's Joint Strategic Needs Assessments (JSNA) and analysis of our own data gathered from the Healthwatch Information line, Brighton Pulse and feedback provided from Representatives attending strategic meetings to identify these priorities.

For each of these issues the report documents the rationale for making it a priority, outlining the evidence behind its inclusion. The report also discusses the level of priority Healthwatch decided to assign the issue and the current activities and recommended actions related to it.

1. Obesity

Evidence

High levels of obesity across age groups in Brighton and Hove: 13% of 10-11 year olds obese; 49% of adult population overweight or obese compared to 64% in England.

Discussion

Obesity is an ongoing national issue of concern with high incidence in Brighton and Hove but lower than national level. Preventive work in primary care, particularly schools and GP services, important in addressing issue. Social prescriptions important in this area along with encouragement of physical activity and healthy diets through city wide targeted programmes e.g. Ageing Well Service.

Outcome

Priority 6/10

Healthwatch will monitor preventive work in this area encouraging the use of evidence-based interventions to encourage healthy diets and physical activity. This issue can be raised at strategic health boards e.g. Health and Wellbeing board and Health Overview and Scrutiny board (HOCS) and in commissioning work.

2. Mental health

Evidence

Higher than average levels of mental health issues and suicides in Brighton and Hove compared to England. Particularly high prevalence of mental health issues for older people; 16% of people aged 60+ depressed, increasing to 21% for those aged 80+.

Discussion

The performance of mental health services is an issue of national concern. There is particular concern about access to primary mental health care and quality of treatment available. Access to Children and Adolescent Mental Health Service (CAMHS) is an issue of particular concern in Brighton and Hove.

Outcome

Priority 9/10

Healthwatch is currently scoping a potential service review on primary mental health care to be conducted in 2019. We are also planning to strengthen our representation on strategic mental health boards and our involvement in scrutiny of the secondary care service provided by SPFT.

3. Sexual health

Evidence

Highest rates of new STI diagnosis and HIV prevalence outside of London.

Discussion

A health issue of particular concern in Brighton and Hove. The issue requires effective preventive work – health campaigns and sex and relationships education in schools – as well as an accessible and effective sexual health service. Healthwatch has concerns about service provided at the Claude Nicol Centre (SHAC East) in regards to environmental conditions, appointment wait times on day of consultation and the quality of service received by patients.

Outcome

Priority 8/10

Healthwatch is currently scoping sexual health needs and services provided in Brighton and Hove with a view toward identifying a suitable project to be done in 2019.

Healthwatch is also currently in communication with SHAC East regarding a complaint and will be sharing intelligence about the performance of this service with strategic partners in the city.

4. Disabilities and impairment

Evidence

19% of school students with identified disability in Brighton and Hove compared to 15% in England

Discussion

The accessibility of health and social care services for children and young people is an issue of particular importance in Brighton and Hove. Previous projects and feedback from individuals has suggested that services are often not effective in accommodating the needs of those with disabilities. The Healthwatch programme, Community Spokes, funded a research project in 2016 which highlighted the problems encountered by individuals with Asperger's condition in accessing primary care services.

Outcome

Priority 6/10

Disabled access to GP practices in the city was part of the 2018 GP review and this will be repeated in the forthcoming 2019 GP review. The issue will also be monitored by Healthwatch representatives on strategic boards in the city.

5. Cancer treatment and screening

Evidence

Cancer screening rates all lower than England e.g. 70% for breast screening compared to 77% in England.

Long waits for first treatment (RTT): 20% of patients with urgent GP referral wait longer than 62 days for first treatment and 15% of referrals from a cancer screening service (CCG Quality report, April 2018).

Discussion

There are ongoing concerns about screening rates and the waiting times for treatment. Breast screening rates are a particular concern with 30% of women invited for screening not being screened.

Outcome

Priority 8/10

Healthwatch has patient representation on Cancer Action Group and Surrey, Sussex Cancer Alliance and Cancer and Planned Care Delivery Board. A Learning Group on Cancer was held in 2017 to scope possible projects in this area. Young Healthwatch will be conducting a Listening Lab on cancer services for young people early in 2018.

6. Musculoskeletal conditions

Evidence

High numbers of hospital admissions for musculoskeletal conditions; 14 per 1000 non-emergency hospital admissions e.g. back pain, shoulder pain, hip and knee pain. Increasing life span and high prevalence of obesity are likely to increase incidence of these conditions.

Discussion

This issue is likely to be an increasing problem in Brighton and Hove with aging population and high incidence of obesity. **Outcome**

Outcome

Priority 5/10

Healthwatch conducted an evaluation of the BHCC's Equipment and Adaptations service in 2017. Healthwatch is committed to support preventive work in this area through city wide programmes that encourage physical activity such as the Ageing Well Service.

7. Dementia

Evidence

4.3% of people aged 65+ in Brighton and Hove have dementia, the same level as England.

Discussion

The number of people diagnosed with dementia is likely to increase as the population lives longer. By 2030 it is estimated 63% of the population in Brighton and Hove will be 60+ (JSNA, 2018). Health and social care services need to be sensitive to the particular needs of patients with dementia.

Outcome

Priority 6/10

The care of patients with dementia in local care homes was an issue considered in the care home review conducted by Healthwatch in 2016. The care packages provided to patients with dementia is also a key issue for the Hospital Discharge project currently in progress. Healthwatch representation at the BHCC's Care Governance Board and the Adult Safeguarding Board also proactively monitors the care provided to this population.

8. Multiple Long term Conditions (MLTC)

Evidence

53% of people 50-54 years have one or more long term condition; significantly higher rates for under 60s in deprived areas.

Discussion

This is an issue of increasing concern in Brighton and Hove with data showing high prevalence and strong correlation between physical conditions and mental health issues. Brighton and Hove Public Health are shortly publishing a JSNA on this issue.

Outcome

Priority 8/10

Healthwatch will review the findings of the JSNA report published later this year. The current Hospital Discharge project will provide insight on the efficacy of care packages for patients living with multiple long term conditions. The report from this project is expected early 2019.

9. Older person falls and hip fractures

Evidence

Higher admissions to hospital and incidence of hip fractures for older people than national average: rate of emergency hospital admissions for 65+ 2,529 per 100,000 compared to 2,114 for England; 306 hip fractures for people 65-79 compared to 265 for comparable local authorities.

Discussion

This issue is closely related to the efficacy of care packages for older people living at home. Key issues are the quality of support provided to vulnerable older people and the efficacy of home equipment and adaptations.

There is also concern about how emergency services are responding to fall incidents. SECAMB may be assigning falls as low priority leading to long waits for victims.

Outcome

Priority 7/10

As for MLTCs, the Hospital Discharge project will provide insight on this issue, identifying whether falls is a major cause of readmission after discharge. The findings of the Healthwatch evaluation of the BHCC's Equipment and Adaptations service in 2017 are also relevant to this issue.

Healthwatch will proactively review findings of Hospital Discharge project and new intelligence gathered on issue.

10. Macular degeneration

Evidence

High incidence of macular degeneration among older people; 164 per 1000 for people aged 65+ compared to 123 per 1000 average for comparable local authorities.

Discussion

Difficult to identify why this issue would be prevalent in Brighton and Hove. It may be useful to consider the efficacy of eye screening services provided to older people.

Outcome

Priority 6/10

The Hospital Discharge project may provide insight on this issue. No other current plans to examine this issue.

11. GP service

Evidence

Ongoing closure of GP practices and fewer GPs serving patients in the city. Consistently lower numbers of GPs serving patients than England average: 128 FTE GPs serving 317,976 registered patients (NHS Digital, June 2018); 2487 registered patients per FTE GP compared to 1783 for England.

Increasing negative feedback on primary care mental health service; difficulty accessing service and low quality and short duration of service provided.

Discussion

An ongoing issue of concern for Brighton and Hove that Healthwatch has been closely monitoring for last two years. Practice closures and declining numbers of GPs in city lead to GP review in 2017. Low GP capacity is likely to lead to access problems for patients, e.g. long waits for appointments, and increasing pressure on A&E service.

Outcome

Priority 10/10

An issue of some urgency. Another GP review covering all practices in the city is planned for 2019, starting in new year. Healthwatch is actively monitoring number of FTE GPs in the city and this has been raised by HW representatives at the Health and Wellbeing Board and Health Overview and Scrutiny Committee (HOSC).

Scoping for a primary care focussed mental health project currently underway. Project examining experiences of patients expected in 2019.

12. Dental service

Evidence

High number of complaints about dentists received by Healthwatch. Common issues raised include lack of clarity in determining what is covered by NHS treatment and poor quality treatment. CQC has raised concerns about access/quality of dental care provided to residents in care homes.

Discussion

Complaints about dentists are widespread nationally. There is a lack of clarity of information on what is covered by NHS treatment and when private treatment is applicable.

Outcome

Priority 8/10

Healthwatch is currently starting a review of dental care in care homes. Visits to care homes are expected early in 2019 with a final report expected in the spring.

13. A&E

Evidence

Ongoing problems at RSCH A&E with long waits for treatment and ambulance handover delays; 16% patients waiting more than 4 hours for treatment.

Discussion

This has been an ongoing issue of concern and has been closely monitored by Healthwatch. The pressures on A&E are likely to be related to limited emergency provision in primary care and difficulties some patients have in accessing their GP.

Outcome

Priority 9/10

Reviews of the A&E service have been conducted in all of last three years and a further one is planned for 2019.