

2018 Annual Survey

Each year Healthwatch Northumberland sends a survey to its supporters and wider networks and this year a record 579 people responded giving Healthwatch Northumberland a wealth of information about their experiences of health and social care services.

The survey has nine questions about the types of services used, frequency of visits and with the opportunity to leave comments – hundreds of which have been reviewed to help Healthwatch Northumberland to understand what is happening in the county.

This report shares the themes which emerged from the survey. These have helped Healthwatch Northumberland prioritise its work for 2018 – 2019. We also hope that it stimulates debate and conversations between individuals, communities, those who plan and provide our health and social care services.

What you told us

65% of respondents said that their overall experience of health and social care was good or excellent over the last twelve months. This is a slight decrease since 2017 where 67% rated their experiences as good or excellent. 12% of respondents rated their service as poor compared to 6% in 2017.

"I don't use health and social care often but when I have it has always been good"

Service user

409 comments about this question were recorded and categorised into Health and Social Care. Many people had experiences with a number of services in a given time period and had good and bad experiences mixed together. For example, a long wait at the hospital followed by excellent treatment by a specialist.

"Apart from one incident for my partner, the care that we have received has been good. My partner was released from the A & E in Cramlington while suffering from a stupor after a blackout with no help getting home."

Service user

We have looked at the feedback and comments by the themes of Primary Care (GPs, dentists, ambulance etc.) Secondary Care (hospitals etc.), Social Care (care homes, support at home etc.), Mental Health (community and hospital services) and also looked at where people live within the county and what they say about themselves. These are set out from page five.

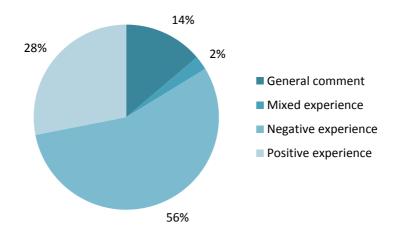


Over 400 comments were made in response to the question asking for specific experiences. We have looked at these comments across all services mentioned to understand:

- The general tone of sentiments expressed
- Sentiments about access to services and quality of services as key measures of patient and service user experience
- The balance of sentiments about specific service type

General tone of sentiments

The overall sentiments expressed about all services showed a 56% negative response.



Of the 28% positive comments the most often complimented were Primary Care services mainly GPs but also opticians and dentists. Northumbria hospitals also received positive feedback with specific mentions for Northumbria Specialist Emergency Care Hospital at Cramlington (NSECH), Wansbeck, Hexham and Alnwick. Berwick Infirmary was also valued highly although it was mentioned as part of negative comments about withdrawal of services and distances required to access services at other hospitals.

However GP appointments were a clear theme in the negative comments representing 25% of the total. The location of these services was not generally disclosed

"The appointment system at the doctors requires you to sit by the phone waiting. A single mum working full time with three children cannot do this."

Female service user



Access and quality of care

Most comments were about access which includes GP appointments, transport, waiting times and how well (or otherwise) people felt the communication with them went.

| | Positive | Negative | Mixed | General comment | Grand Total |
|--|----------|----------|-------|-----------------|----------------|
| Access to health and social care services | 81 | 205 | 10 | 36 | 332 |
| Quality of health and social care services | 34 | 23 | 4 | 13 | 74 |
| Total | 115 | 228 | 14 | 49 | 406 |

Again 33% of the negative comments related to GP appointments.

Although there were fewer comments about the quality of care in all services there was a clear sense of positivity and appreciation for the staff and the quality of care they provided. This was also reflected in the 'mixed comments'.

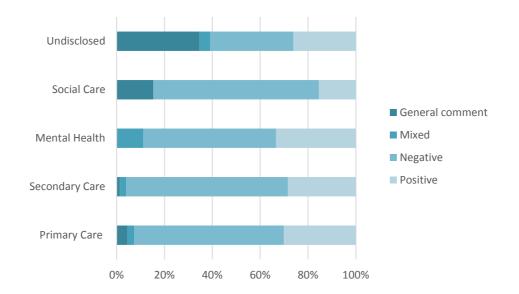
Balance of sentiments about service areas

Finally we looked at services by type – for example a hospital or mention of "home care services". We have kept the 'undisclosed' category here to show what people were saying in general about health and social care in Northumberland.

Each bar in the chart below represents the range of sentiments expressed about services mentioned in the category. The chart represents the balance of sentiments expressed for each service area. Each bar represents 100% of comments received, for example about primary care. Not all categories received the same number of responses and are therefore not directly comparable.

As can be seen people gave more definite feedback about their experiences in secondary care than general or mixed comments. Also where people were commenting generally about their experiences (the undisclosed services) there is more of a balance between negative and positive feelings.





"Great difficulty with the pharmacy when trying to get the flu jab in November - my own pharmacy no longer stocked it and was directed to another branch who said they couldn't do it (because they were too busy) so ended going to a third pharmacy!"

Pharmacy Customer

"Able to speak to who I needed to speak to quickly and get the advice I needed"

Undisclosed service user

In the next section we will look at the themes which emerged for each of the service areas of:

- Primary Care
- Secondary Care
- Social Care
- Mental Health

Mental Health services are a Healthwatch Northumberland Strategic Priority and therefore receive a particular focus.



| The Doctor First GP appointment system received many favourable comments but lost confidence from those who could not access a GP due to distance or opening hours and the difficulty of telephone consultations for people in work. Comments received about pharmacies were mixed. Most negative comments related to the long waiting times in cramped conditions. Others felt that their pharmacy delivered an easy to |
|--|
| access good service. The main themes for dental services were around access particularly in rural areas where long distance travel is necessary. On the whole positive comments focused on dentists being punctual, ease of appointments and good text messaging reminder services. Opticians faired positively with the majority of comments positive saying their optician was easy to use with good availability of appointments. |
| Where experience of using an emergency ambulance was recorded the main concern was about the waiting time to receive an ambulance which ranged from two hours to over five hours. In other areas of the survey respondents have commented on the efficiency of the service and the caring staff. The 111 service received very few comments but comment was made on the length of time it took for call back or help to get to the patient. Patient Transport received fewer comments than last year but the issue is often an underlying part of wider issues around access to all health and social care services. Negative comments were received |
| |

"Staff booking ambulance saying I can't travel with her when I control the powerchair."

Carer



Primary care cont'd

What are we doing?

- We have shared our findings with the Northumberland Clinical Commissioning Group (CCG) and service providers such as North East Ambulance Service (NEAS) and with GP practices. We will be seeking further patient feedback during the year.
- From ongoing feedback it appears many of the positive comments about the 'Doctor First' system relate to a particular surgery in Northumberland. If this is the case, we are encouraging all concerned to share best practice to improve services where people are unhappy with them.
- This survey was carried out before the Patient Transport Service eligibility criteria were changed in April 2018. Since then there has been a drop in negative feedback and we will continue to monitor and discuss with NEAS at quarterly meetings.

"Having to travel to doctor and dentists is difficult especially as there is no public transport on weekends for working parents"

Parent and service user



| Secondary care | |
|--------------------|--|
| Emerging themes | Access and coordination of services across different hospital services and sites, with long travel times to 'central' hospitals for routine investigations and tests was a concern to respondents. Services at North Tyneside General Hospital received negative comments about distance to travel and communication Car parking charges have improved for some respondents but still receive negative comments. |
| Ongoing themes | Respondents quoted long waiting times at Northumbria Specialist Emergency Care Hospital (NSECH, Cramlington) across the survey. Local hospitals, where identified, had many positive quotes around friendly, knowledgeable staff and easy access. Positive responses also indicated that people were happy with the quality of their care |
| What are we doing? | We have shared our findings with Northumberland CCG and Northumbria Healthcare NHS Foundation Trust. We are in discussions Northumbria Healthcare NHS Foundation Trust about talking to people using NSECH to gather more feedback and develop insight on people's views on waiting times. Our aim is to do this in late 2018 before winter pressures set in. |

"My partner had to have a scan...he got sent to a hospital in Newcastle which wasn't easy as we live in Berwick upon Tweed and don't drive."

Hospital Service User



| Social care | |
|------------------------|--|
| Emerging themes | Problems were reported with accessing social care whether due to availability, making contact with the correct service in a timely way or the associated costs. |
| Ongoing themes | Respondents reported difficulties accessing appropriate home care services that are reliable, with consistent staffing and where adequate time is allowed for appropriate care. |
| What are we doing? | We are conducting primary research with Carers Northumberland to explore people's experiences of getting care at home. The survey was carried out by people receiving a service and highlighted where changes to scheduling and communications could be made. |
| | We have provided initial feedback to the commissioner and provider of home care services, Northumberland County Council and Age UK Northumberland. Each organisation was supportive of the findings and continuing to work with us as the project develops. A second survey will be done to see what changes |
| External opportunities | The Social Care Green Paper has been moved back from July to November. We, along with other local Healthwatch in the network will be seeking views from services users and their carers to feed into the ensuing consultation/engagement. |

"I look after my disabled (relative) who receives home care services. The carers are excellent but it is very difficult to talk to the relevant person in the office about times of calls etc. These are sometimes altered but no one thinks to tell me! Respite care: I have only had 1 week of from looking after my (relative) in nearly 8 years. No respite care seems to be available either privately or public."

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"My friend had to be moved to a new care home following an incident in the home and I thought this whole process was handled disrespectfully and without due consideration of his needs."

Supporter of service user



| Mental health | | | |
|------------------------|---|--|--|
| Emerging themes | There were a small number of responses regarding mental health services and the majority were negative and focused on the lack of provision in the North Northumberland area. | | |
| Ongoing themes | Comments centred on long waiting times to access the few services available and the suitability of services Children and young persons are still facing problems gaining access to timely support. | | |
| What are we doing? | We are currently seeking feedback from young people and their carers about mental health provision, especially Tier 1 general information resources and will look to incorporate feedback from this survey into this work. | | |
| | We plan to publish an insight piece following engagement with a small group of young people on this initial phase of work in the forthcoming months and to do further direct engagement. | | |
| | We are making contact with people who use or have used mental health services and the network of support organisations and groups to ensure that people know how share their experiences with us. | | |
| External opportunities | The Care Quality Commission is launching a campaign in October to push for young people to share their experiences with services to help them improve. This could provide an opportunity for us to join forces and support wider work. | | |
| | Stakeholders are increasingly interested in using user feedback to inform service change in this area, in particular to test out whether or not the Mental Health Forward View is achieving the outcomes intended. | | |
| | Healthwatch England wants to know more about parents' experience of mental health support when planning to get pregnant, during pregnancy, at the birth of a child and afterwards. Experiences shared with Healthwatch Northumberland will go towards this national work. | | |

"Referrals for my (teenage family member) to CYPS made by Social Worker and GP were rejected despite high level of need. Insistence on referral going to Primary Mental Health first increases length of wait."

Carer



Where did our information come from?

We asked for demographic information to check that Healthwatch Northumberland is reaching all sections of the community particularly groups of people whose views may be seldom heard. For a Northumberland this includes people who live and work in sparsely populated rural areas.

Demographics include postcode, gender, age, ethnicity, disability, sexuality and religion.

The majority of responses were from Alnwick, Morpeth and Rothbury areas and the majority of postcodes were reached by the survey. Future surveys and engagement will aim to reach out to people in the following areas:

NE19 – Otterburn to Capheaton

NE44 - Riding Mill and Broomhaugh

NE18 - Stamfordham

NE13 – Seaton Burn and Dinnington

NE69 - Bamburgh

TD12 – Etal to Scottish Border

CA8 - Gilsland and Greenhead

DH8 - Blanchland

The survey reached females, the working age population and a mix of western religions. We also gained responses from the LGBT+ community and hope to build on this with presence at Northumberland Pride and other events throughout 2018.

We need to improve our reach to males, young people and those from black Asian and minority ethnic backgrounds (BAME). Work in engaging with more BAME communities has started in the Cramlington and Blyth area.

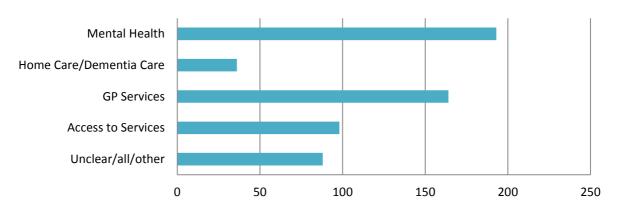
A significant number of respondents told us about their disability. Many people have multiple conditions and this may be a factor in comments made about travel and the importance of coordination for repeat appointments. Accessibility is a key issue for people accessing health and social care services and the people who need these services most can have additional needs like those detailed above. It is a Healthwatch key value to make sure that people who have additional needs or disabilities are heard and valued by the commissioning bodies.



Priorities for 2018 - 2019

As part of the survey, respondents were asked to rate the priorities that Healthwatch Northumberland should investigate in 2018-19. The five priorities were mental health services, dementia care services, home care, GP services and access to services.

What Do You Think Should be Priorities for Healthwatch Northumberland in 2018-19



Two clear issues that emerged from the priorities were mental health services and GP services. Throughout the survey comments around mental health services have focused on the lack of provision and the suitability of services. Healthwatch Northumberland is currently working around mental health provision and young people and will look to incorporate feedback from this survey in their work.

GP services are a great priority with respondents talking about the need for a good accessible GP being the key to further health care treatment if required. Residents of Northumberland see the GP as being the first point of contact for most health care especially in rural environments and areas with aging populations. We will discuss the findings of this survey, particularly the way in which appointment systems are managed with the organisations which commission the services to see if there are opportunities to spread the learning from where patients say it works well for them.

Dementia care and mental health provision did have some cross over of views in the comments section of this question due to the nature of the condition.



Conclusions

The purpose of taking an annual survey is to provide a way for people in Northumberland to share their experiences of using the county's health and social care services. As with all surveys it provides a snap shot at a particular point in time, but what it also shows what is important to people and it is clear from the findings that there is a deep appreciation of the services we do have and especially the people who work in them.

Even where there is the greatest concern - getting a GP appointment, it is clear this stems from valuing a local primary care service as the basis of managing health and wellbeing.

Healthwatch Northumberland will therefore use the findings from the annual survey and the feedback from our work all year around in conversations with those organisations which buy and provide services with a view to making services better for the people of Northumberland.