

healthwatch

Oldham

Accessing NHS Services:

A review of accessing NHS Services from Oldham residents with an Eastern European background

March 2020

Background

Oldham has a growing population of residents with an Eastern European background. Anecdotal evidence suggests that some of these families struggle to access GP and dentist appointments and data collected by Health Innovation Manchester in 2018/19 highlights the higher than average numbers of Eastern European families attending Oldham's A&E services, often for issues relating to young children.

This review aims to learn more about the community's experiences of accessing health services and understand people's perceptions of how health services work and what is available.

In 2011, the census highlighted that less than 2% of Oldham's population were born in the EU (excluding the UK and Ireland), and of these most were born in Poland and very few from Eastern Europe. Since 2011 the number of Oldham residents born in Eastern Europe has significantly increased.

It is not clear why there is a higher than average number of people from the Eastern European community presenting at A&E. Some suggest it is reflective of the different healthcare system in countries such as Romania. However, there may be more obvious factors that influence where and when a family access NHS services. These factors could include language issues and translation services, childcare, knowledge of what is available, previous good/bad experience of using some NHS services and advice from others within the Eastern European Community.

In order to improve our understanding, Healthwatch Oldham invited 32 individuals/families to share their personal experiences and stories of accessing healthcare services.

We would like to thank all the families and members of Oldham's Eastern European Community for their help with this review and their willingness to take the time to talk to us.

Disclaimer: about our research

Please note that the stories within the report are subjective accounts by individuals given on the day they were interviewed and do not represent the views of Healthwatch Oldham. Healthwatch Oldham carries out research in line with accredited guidelines set out in Healthwatch England's Research Framework. We aim to identify what matters most to people and use our findings to ensure that people's voices influence and improve the quality of local services.

If anyone has any queries relating to the content of this report, please contact a member of the Healthwatch Oldham team via info@healthwatcholdham.co.uk.

What we did

Between June 2019 and January 2020 Healthwatch Oldham conducted a series of outreach sessions designed to obtain the views of Oldham's Eastern European community on their experiences of accessing GP and NHS hospital services.

We created a short survey and carried out 1 to 1 interviews at different times of the day and in different locations across the Oldham Borough including a mix of community and health venues. Some of the interviews relied on the support of a translator.

We asked people to tell us about the following areas:

- Knowledge of different NHS services and how to access them.
- Issues that influence a family to attend A&E rather than use other NHS services.
- Experiences of using NHS services and examples of what has worked well and what could be improved.
- Any cultural or family considerations that influence when services are accessed and if members of the family need to be accompanied.
- Peoples' perceptions of the NHS in the UK and if services live up to these expectations.

Key Findings

Families highlighted many positive experiences of using NHS services including the quality of care, friendliness of the staff and the fact that services are free at the point of access. Recurring issues for families include limited access to translation services, problems registering with NHS dentists and long waiting times for GP appointments. The following are some of the key themes identified in the feedback:

<p>Primary Care waiting times and knowledge of NHS services</p>	<p>Families highlighted GP waiting times as an issue. Many prefer to bypass primary care in favour of A&E rather than wait up to 3 or 4 weeks for a GP appointment.</p> <p>This was compounded by the fact that many who took part in the survey were not aware that they could go to the pharmacist for advice. In fact, of those who took part in the review, 78% did not know about the GP Out of Hours service and 50% did not know about the NHS 111 emergency service. Many families who did know about alternative urgent care services said they would not use the 111 service or Walk-in Centre because of language barriers and the belief that these services do not allow family members to translate on behalf of other family members.</p>
<p>Accessible Information</p>	<p>Families highlighted the lack of information and advice about NHS services in key Eastern European languages. This includes information about different urgent care options, advice about what to do in a crisis and who to contact out of hours.</p>
<p>Confidence in Primary Care Treatment</p>	<p>Families said they would sometimes attend A&E following a primary care appointment if they felt the GP was not dealing effectively with their presenting symptoms.</p> <p>Some families felt that GPs were reluctant to take their health concerns seriously and were frustrated if GPs did not refer them on for tests and/or investigations. Some families also felt that GPs were not very sympathetic and would often send them away with basic pain killers, whereas in other Eastern European countries, antibiotics would be prescribed as a matter of course.</p> <p>In these cases, patients present at A&E for a second opinion and in the belief that they will get a more thorough health assessment and quicker access to medical tests and investigations.</p>
<p>Expectations of UK health services</p>	<p>Some Eastern European families had different expectations of services so accessed them in the same way they would use health services in Romania.</p> <p>Families explained that in Romania they had similar access to a GP but the health system also offered direct access to specialist drop-in clinics for certain conditions e.g. Gynaecology, which patients could attend without going to the GP first. In these cases, the patient would be offered tests, scans etc which would incur a charge. By attending or 'dropping-in' to A&E some Romanian families feel they are accessing more specialist advice than that offered by their GP.</p> <p>Many of the families interviewed said that if their child became ill their first choice would be to attend A&E. This choice was influenced by GP waiting times of up to 4 weeks and a belief that they would be accessing more specialist care for their child in A&E.</p>

Translation services	<p>Most of the families who took part in the review highlighted the lack of translation services as an issue. Families were often restricted to when and where they could access health services if they were reliant on other family members being available to accompany them. As a result, many wait for the evening and present at A&E with their wider family to provide support for translation.</p> <p>Some GP services offer translation support however this usually needs to be booked in advance. This means that families have to wait even longer for a GP appointment, but for some, there is no alternative if they want to discuss a confidential issue and do not want another family member to be present to translate.</p>
Dental Services	<p>Many families highlighted the problems they face trying to register with a local NHS Dentist. Few NHS Dentists are taking on new patients in Oldham and many families struggle with transport to access dentists in other areas. This has resulted in several families presenting at A&E with dental problems.</p>

Main Recommendations

The Healthwatch Oldham recommendations are based on the experiences and feedback of Oldham's Eastern European Community who took part in this review. We are committed to ensuring that the voices of seldom heard groups can reach those who commission, design and deliver local services. The findings from this report will be shared with Oldham Cares Commissioners, the Urgent Care Partnership and the Emerging Communities Team in order to help shape health and social care services.

1. Information and Guidance

Develop a programme of NHS information and advice translated into a range of key Eastern European languages. The programme could include leaflets and talks explaining the different health services, how to register with a GP and dentist, where to get advice and where and when to access urgent care services. Use flow charts to guide families through treatment pathways and self-care and ensure services reach out to Eastern European communities in key community locations such as the Honeywell Centre and the Church of the Nazarene.

2. Digital Support

Explore options for the development of a phone app to give general advice on health conditions available in a range of Eastern European languages. This information could be disseminated via Schools, Churches, Community Groups, GP Practices etc. The App could also form part of the information pack that the Emerging Communities Team is preparing to give Eastern European people on arrival in the Oldham area.

3. Primary Care Networks

For areas with high Eastern European populations, consider developing an enhanced children's offer coordinated within the Primary Care Network/Cluster that includes an Eastern European language translation service, and a Child Health Promotion programme that invites children in for regular health and development checks. The health checks could provide a great opportunity to share information about NHS and urgent care services and how to access them.

4. Education and Awareness Raising (to manage expectations)

Develop a promotional campaign to raise awareness that children under 5 can get same-day appointments with the GP. This can be promoted through the planned leaflets and health checks and by training members of the Eastern European community to volunteer to educate others on healthcare options.

5. Language Barriers

Some of the community struggle with the English language which impacts on how and when they access health services. We recommend working with English language providers to offer classes delivered in key community venues used by Oldham's Eastern European Community that also include childcare. This will help to address the concern of some mum's who said that due to commitments with young families they find it difficult to attend classes.

6. Translation Services



Promote the translation function on the Royal Oldham Hospital (ROH) website. The ROH uses Browsealoud which is an accessibility tool designed to help visually impaired users and those who may need to read a website in another language. It means that their PDF documents such as Patient Information Leaflets are now available in audio form in various languages. By clicking on the orange Browsealoud icon (pictured left) on the website's main homepage people can

listen to an audio version of the page and translate into different languages. You can access it on the link provided below:

<https://www.pat.nhs.uk/our-hospitals/the-royal-oldham-hospital/>

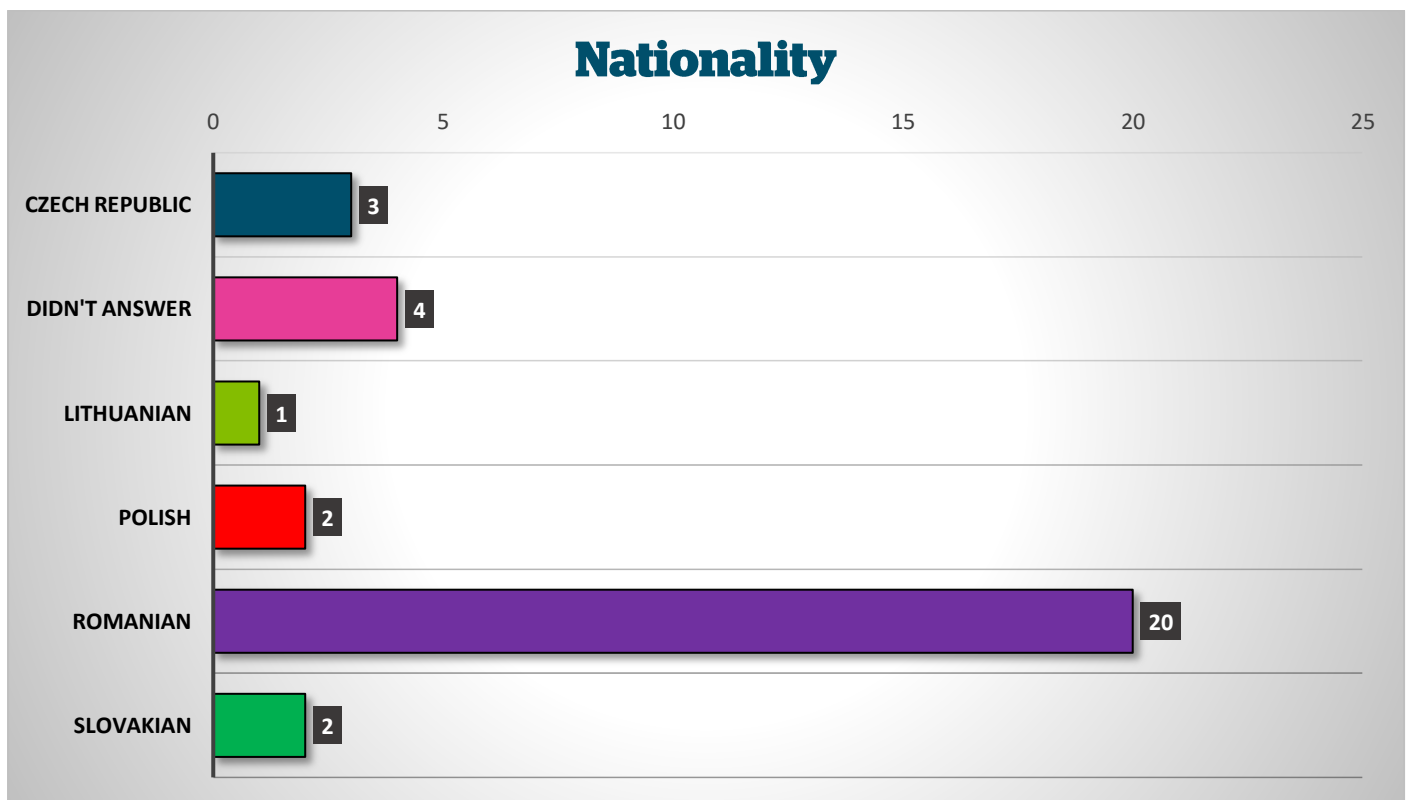
Detailed Findings

Where did we obtain people's views?

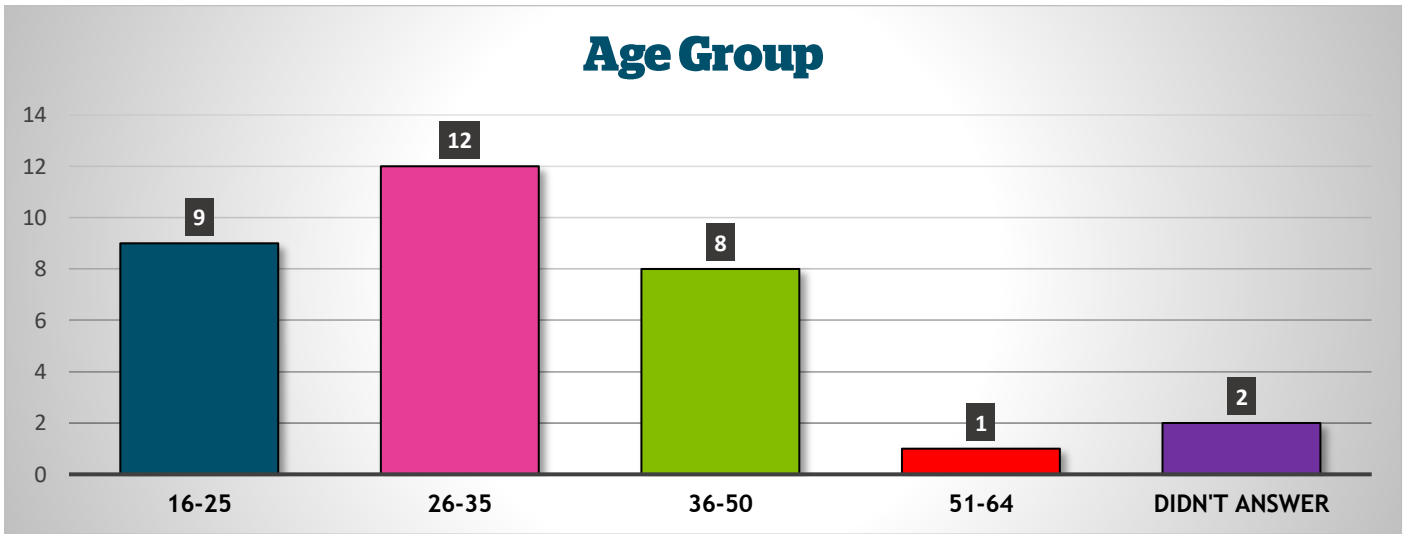
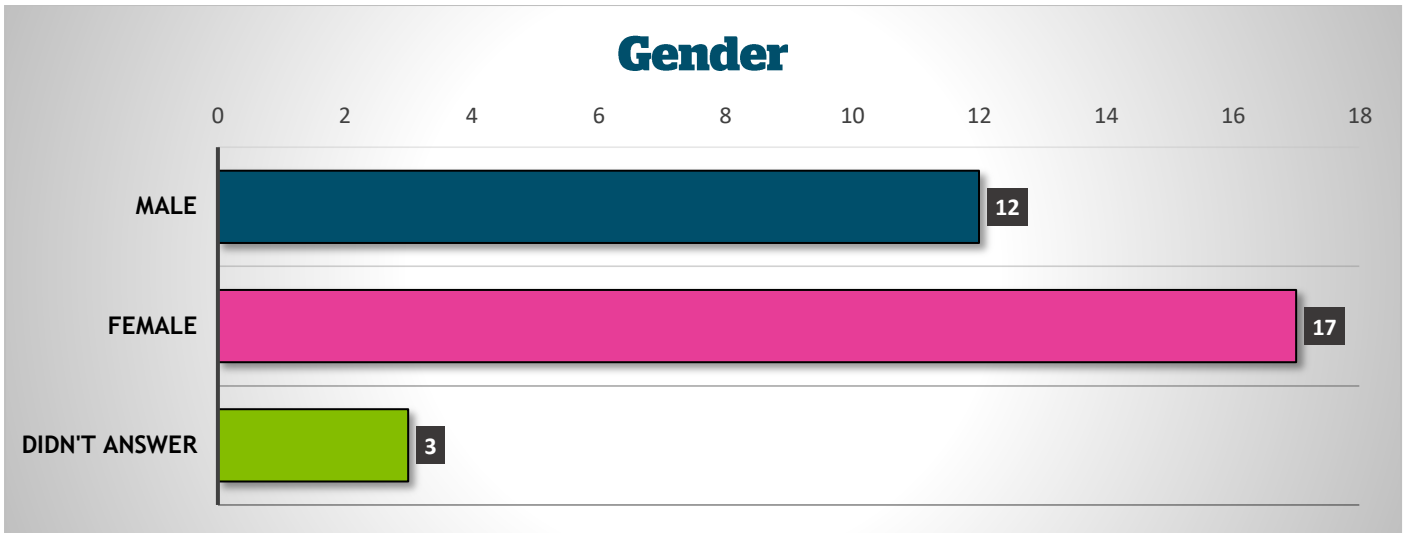
Venue	No. of surveys completed
Honeywell Centre	14
Sun Valley Medical Practice	2
Church of the Nazarene	11
Oldham College	2
Royal Oldham Hospital A&E (Emergency) Department	3

A total of 32 surveys were completed through 7 outreach sessions. Some of the venues were visited more than once and The Honeywell Centre and Church of the Nazarene were the most popular locations for people to complete the survey. Also, we held a small targeted focus group to discuss the survey which included some members of the Chai Ladies Group along with an interpreter at Hathershaw College. Their feedback has been included with the direct responses from the survey.

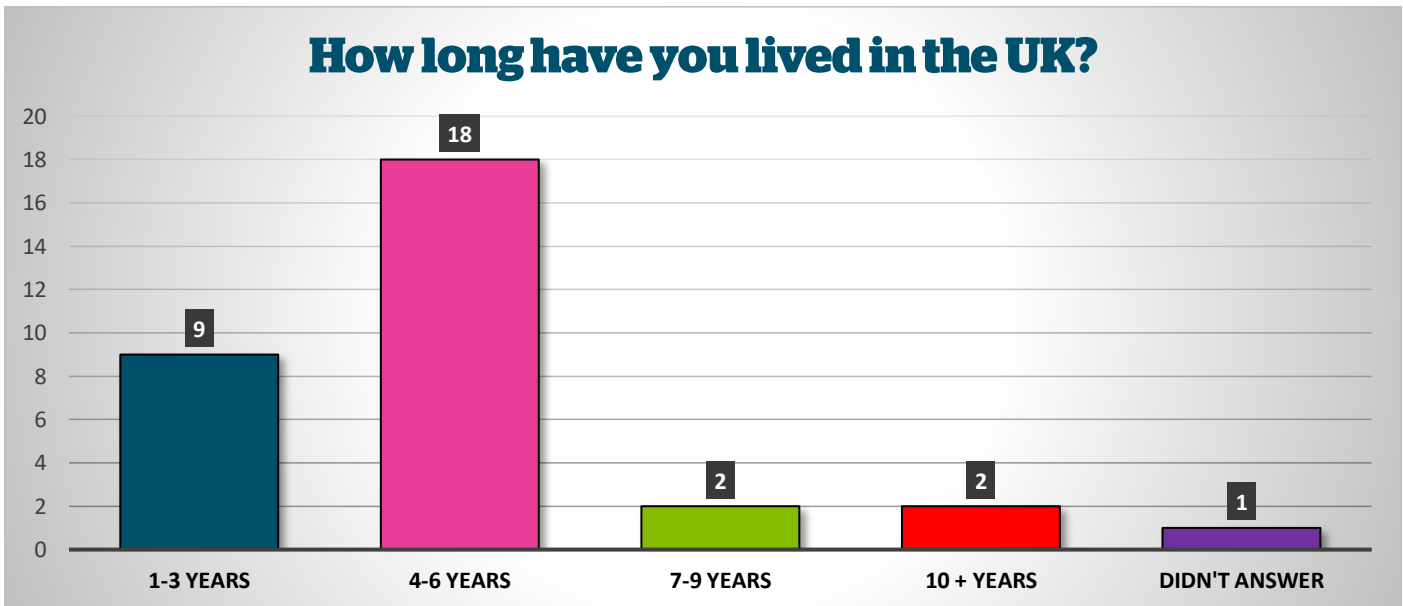
Profile of respondents



Of those who responded the most common nationality was Romanian at 63% (20) with other nationalities including the Czech, Lithuanian, Polish and Slovakian.

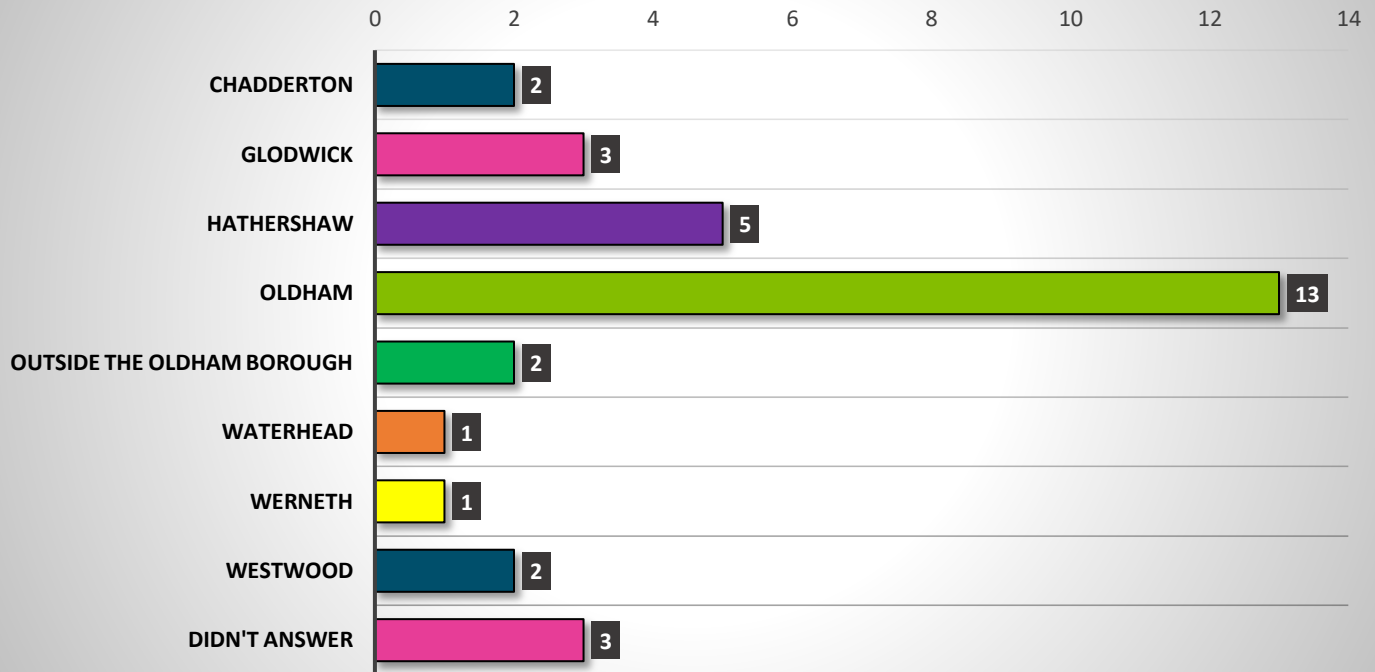


There was a relatively even split between men and women taking part in the survey and of those who responded 90% (29) were aged under 50 and 38% (12) were aged between 26-35.



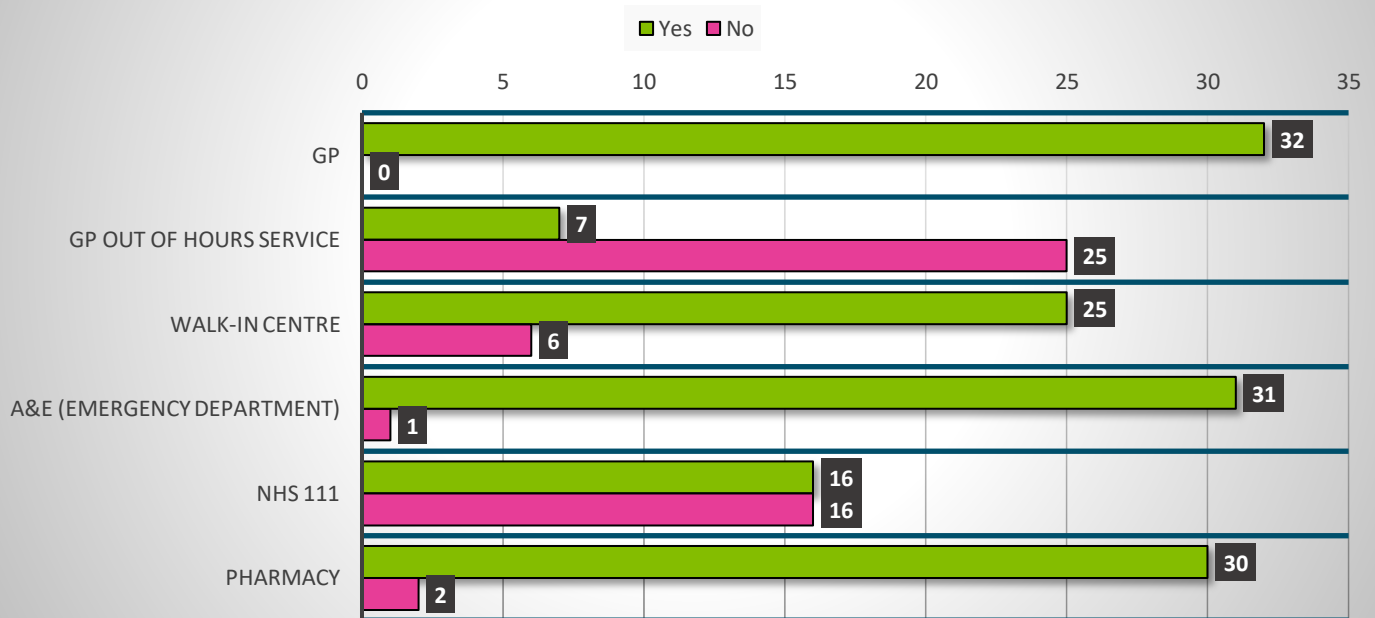
Of those who responded 56% (18) had lived in the UK between 4 and 6 years and only two people had lived in the UK for more than 10 years.

Town or Area you live in



Most of the respondents 50% (16) live in the central areas of Oldham and Glodwick.

Are you aware of the following services and how to access them?



When asked if they were aware of specific services, almost everyone was aware of GP and A&E services and how to access them. Of the other services 78% (25) did not know about the GP Out of Hours Service and 50% (16) of people did not know about the NHS 111 service.

What do you know about these services and how to access them?

GP availability is an issue
Not aware of services
Waiting times too long across services
Appointment availability is poor
GP was good
Translation hinders service access
All services are accessible
Used all these services

Response breakdown:

Not aware of services	8	All services are accessible	1
Waiting times too long across services	7	GP was good	1
Appointment availability is poor	2	Translation hinders service access	1
GP availability is an issue	2	Used all these services	1

We asked people if they were aware of the different urgent care services and their understanding of what each one provides. Of those who responded 42% (8) said that they were not aware of all services available to them and some said they did not know about the different types of treatment, advice and support offered by their pharmacist. Families highlighted the need for information and advice to be available in a range of Eastern European languages.

Comments included:

“Wasn’t aware of all services, especially that pharmacies can give medical advice.”

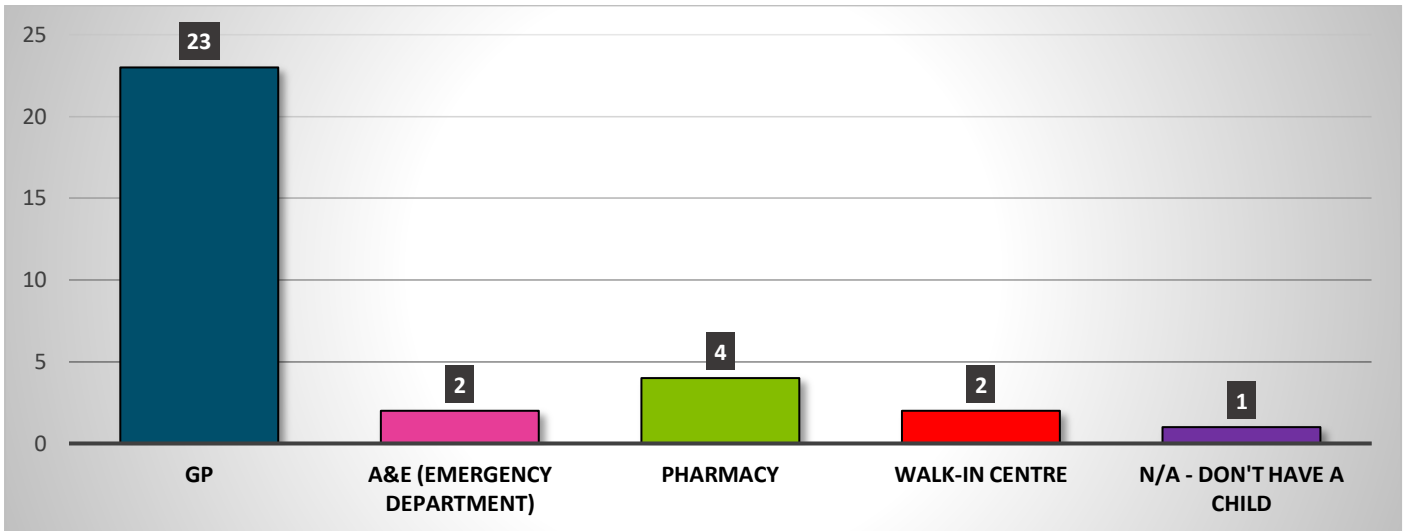
“Wish I had known about all services sooner”

“Waiting way too long in A&E and for GP appointments”

“Didn’t know about all services and thought pharmacy was just for getting prescriptions.”

“Need information on all services.”

If you or your child becomes ill where would you go first?



We asked families which services they thought they would access if they became ill or their child was ill. Of those who responded 72% (23) said that they would go to their GP first for advice if they could get an appointment.

"Would always try to access GP initially - seems the right thing to do."

"Use pharmacy first as difficult to get GP appointment same day."

"Problem to book GP appointment. Maybe 3 or 4 weeks in the future."

"I speak very little English and translators not immediately available, so this is a problem."

"Difficult to get a GP appointment."

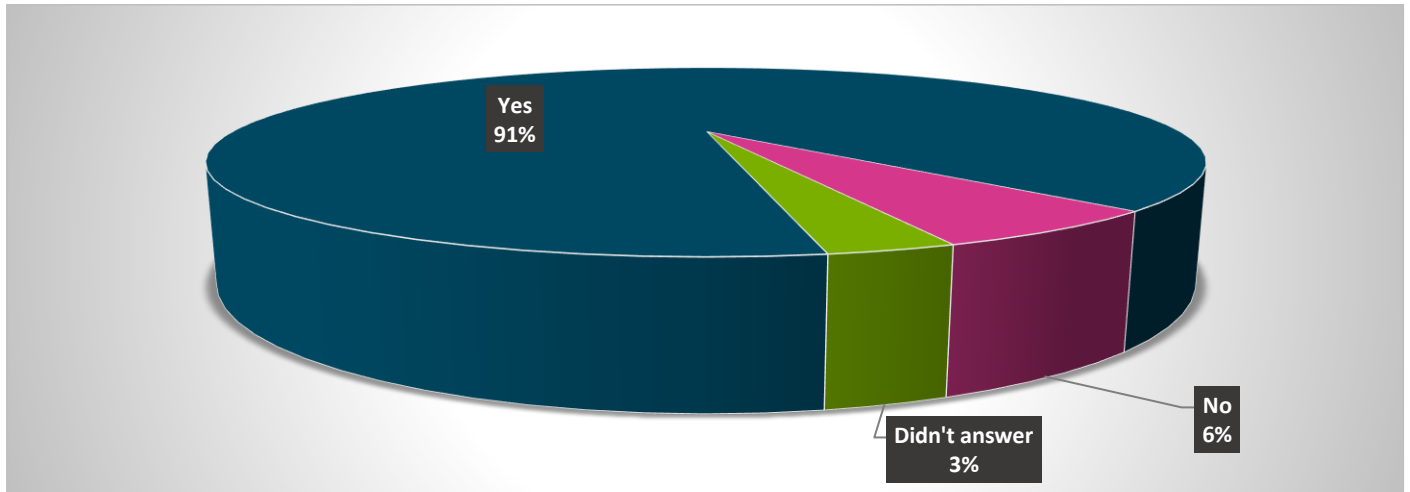
"Talking and making appointments can be difficult sometimes."

"GPs won't help, not giving treatment that I feel we require."

We then looked in more detail at the services people were accessing for treatment and the reasons why.

Have you or your family ever used A&E?

Of those who responded 91% (29) said that they had used the Emergency Department for themselves or a family member compared to only 6% (2) who had not used it.



Why did you attend A&E?

Whilst 72% said they thought they would go to their GP first for advice when we looked at where people presented for treatment we found that only 56% (18) went to their GP for treatment in the first instance and 44% (14) presented directly to A&E for treatment. As you can see from the comments below, families gave several reasons for why they attended A&E in the first instance. It's unclear from the feedback given why there is this difference in people's choice of service. The circumstances that people have presented in these comments are all very different and a clear theme cannot be identified as to the reason for this contradiction in accessing the correct service.

"Problems with liver, vomiting for 4 hours. Numerous visits to the GP without being given any treatment."

"Thurt my wrist recently (2 days ago) and don't have a GP as don't know how to get one."

(waited for the evening because) "Needed someone to look after the children."

"Attend A&E if I feel tests are needed."

"Couldn't wait for a GP appointment."

"GP Advised me to go, would only attend for an emergency."

"I don't have a GP".

"Went to GP surgery with sick 1 year old and couldn't get an appointment so went to A&E"



Of the 91% (29 people) who stated that they had attended the Emergency Department, 76% (22) said that they took a family member with them whilst 24% (7) said that they attended the Emergency Department alone.

Why did/didn't a family member accompany you?

"Mother, daughter husband and niece to interpret." (No interpreters in A&E)

"Husband for support."

"Wife - to help translate"

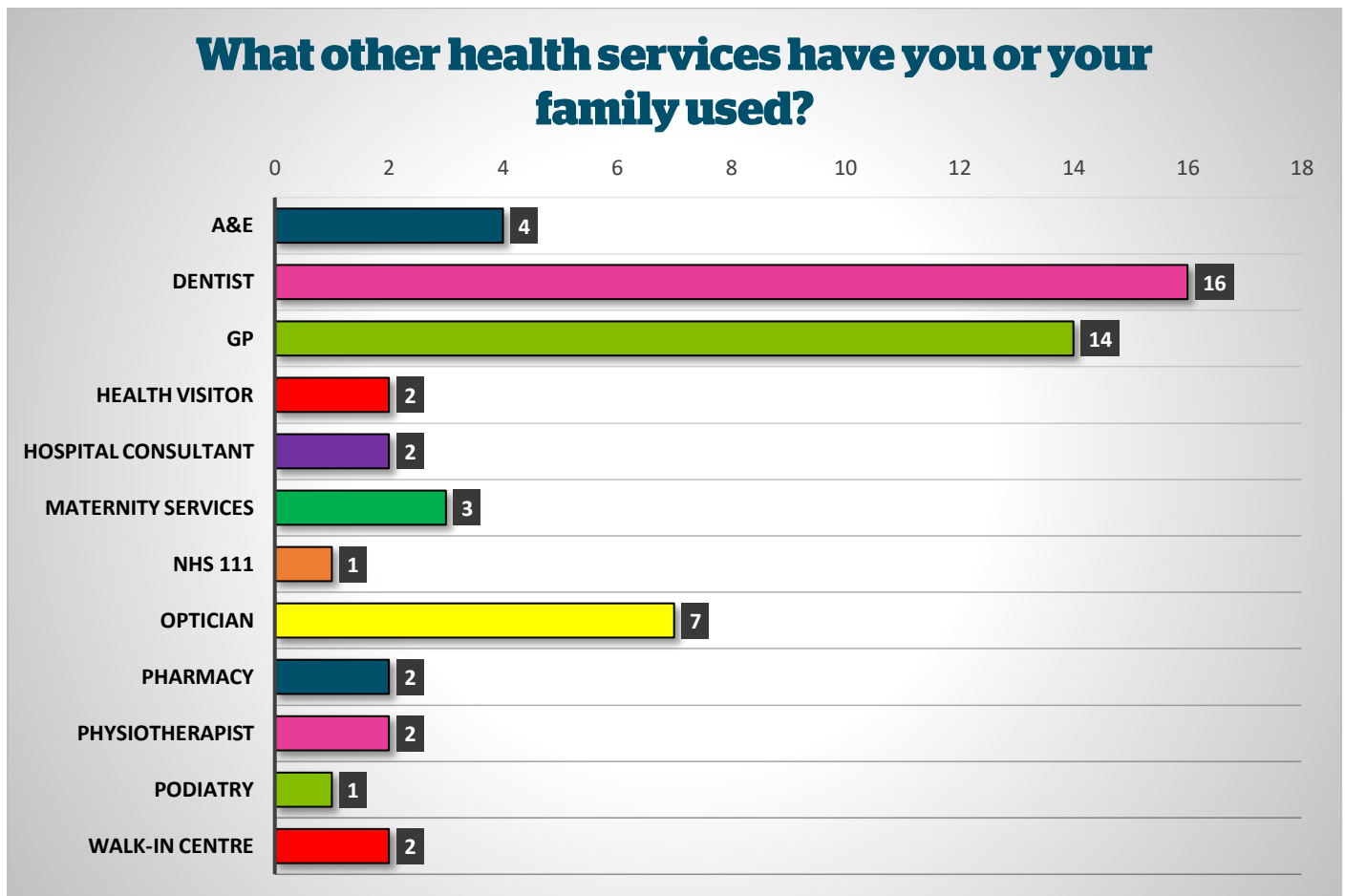
"Waited for my husband to come home to drive me to A&E".

"My brother took me."

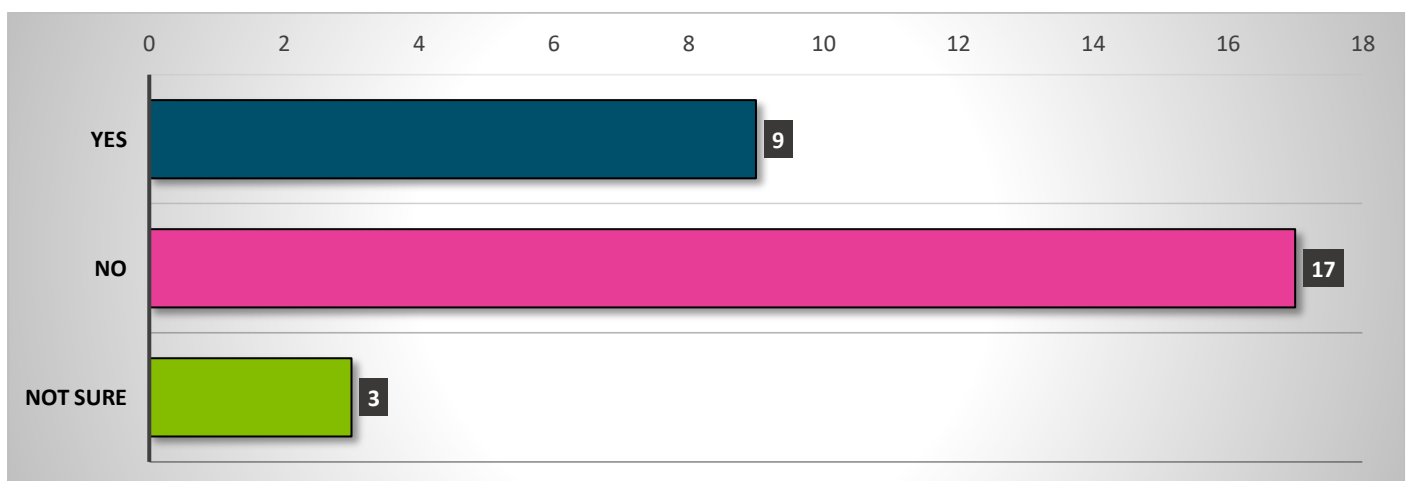
"Wife stayed at home to mind my children."

"Needed a family member to help translate".

We asked why family members did or did not attend the A&E department. Most attended the appointment with another family member to offer support with translation.



Are the health (NHS) services in the UK what you expected?



We asked people if NHS services in the UK were what they expected. Of those who responded 53% (17) said they were not what they expected, and the NHS service was more complicated than the system in Eastern Europe. Families were often frustrated by long delays for GP appointments or when they felt the GP was not taking their concerns seriously or sending them for tests. Translation services linked to GP practices were also an issue as these needed to be booked in advance so patients often had to wait even longer for a GP appointment.

Comments included:

"Didn't think it would be at all like this. Thought it would be easier to get translation services, this sometimes causes a delay when waiting for treatment. The system seems more complicated and very different than expected. The GPs seem to just want you to take paracetamol."

"GP can be good; however, they can't always understand, and you have a longer wait for an appointment if booking a translator. If it's a confidential condition you don't always want a family member to interpret."

"There are differences between GPs in Romania in relation to blood tests. UK GPs not keen to do."

"Maybe, not sure? Some gaps in service but like that in Slovakia."

"No, long waiting times, GPs not sympathetic and reluctant to do tests."

"No, we need more appointments quicker and translators."

"No - I don't like the system; they don't do tests."

What do you think works well?

Kind staff
Good service
It's free
Good medical knowledge

Happy with everything
Good communication
Well qualified staff

We asked people what they felt worked well with NHS services. The most common answers were that it's a free service, good quality and that the staff are kind.

Comments included:

"Free medical service."

"Pharmacy service - gives good advice and explains about medication well."

"Nurses, Doctors etc are very caring and knowledgeable."

"Well qualified people in all NHS areas."

"Free prescriptions for children and parents on low income. Also free treatment and good care."

"Very kind people with good medical knowledge"

What do you think could be improved?

Waiting times
Better service
Appointment availability
Translation services
Diagnosis investigation
More staff
Dentists to be cheaper
Sympathetic staff

Response breakdown:

Appointment availability	11
Translation services	7
Better service	5
More staff	5

Waiting times	4
Sympathetic staff	2
Dentists to be cheaper	1
Diagnosis investigation	1

We asked people what they thought could be improved. The most common answer was about the availability of appointments and translation services.

“Waiting times at GP and A&E are too long. No interpreter when I or my family have visited. However, they allow family to interpret.”

“More appointments to be available.”

“Waiting times generally long which with children who aren't very patient can be difficult.”

“Medics to be willing to send for tests when requested. My wife has headaches for 5 years – awaiting checks for 5 months. In Romania you can pay for tests reasonably cheaply, MRI etc. I am going on holiday soon to Romania and will arrange for MRI for wife whilst there.”

“Interpreters to be available. We need more promotion and education on all primary NHS services as this would change the decision I make for treatment choices in future.”

“More appointments and more tests to be available.”

“Translators to be available more regularly. More GP appointments.”