



“I can only fight for so long - I’m tired.”
Homelessness and Health: Blackpool.

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Introduction to Healthwatch Blackpool

Healthwatch Blackpool is the independent consumer champion for Health and Social Care in Blackpool. We were established as part of the Health and Social Care Act 2012.

Our role is to bring the community voice to the attention of decision makers locally, to support improvements and ensure people's experiences are heard. We aim to listen and understand what it is like to access Health and Social Care services in Blackpool.

We are supported in our work by Healthwatch England, the national consumer voice for all local Healthwatch organisations. Healthwatch England enable individual Healthwatch to highlight important issues at a national level.



Thank you to all who have participated in this research. Your feedback has been, and will continue to be invaluable.

Rationale

In Summer 2020, Healthwatch Blackpool began an outreach research project engaging with people in Blackpool who were experiencing homelessness. This was in response to the COVID-19 pandemic and the emergency provisions put in place due to lockdown. This piece of work highlighted many concerns that people had for the future, with examples relating to mental health, treatment for their health needs and what long-term support will be available.

As a result, Healthwatch Blackpool made the decision to revisit this area and carry out a second project with people experiencing homelessness. The focus of this was to have further conversations to investigate some of the previous concerns that were mentioned last year. The overarching aim was to gather qualitative feedback to influence service design and reform.

Methodology

Design

Healthwatch Blackpool's Engagement Officer attended Homeless Health meetings chaired by the local Clinical Commissioning Group. Priorities for this research were established through discussions with various professionals from organisations who work with people experiencing homelessness daily. Examples of these organisations include Renaissance, Change Grow Live and The Ashley Foundation.

Following this, a draft set of questions were produced and scrutinised with Empowerment's Lived Experience Team Manager. The insight gained from co-designing the survey led to changes in the questions, such as the removal of scale responses for open text. The survey consisted of fourteen questions relating to health and social care, as well as six demographic questions.

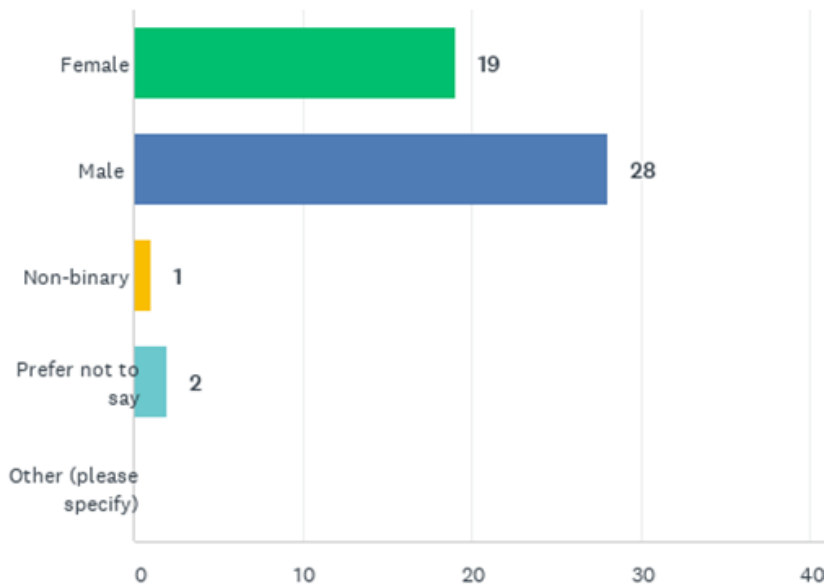
Procedure

A pilot project was conducted from the 26th-30th April 2021, in order to establish if the method and questions used were fit for purpose. Healthwatch Blackpool attended an activity session at Streetlife and a hub session at Blackpool Community Homeless Project. From the twelve responses gained during this pilot, it became apparent that completing the work in a conversational, unstructured manner yielded the best responses. The survey was completed verbally, with the Healthwatch representative making notes throughout.

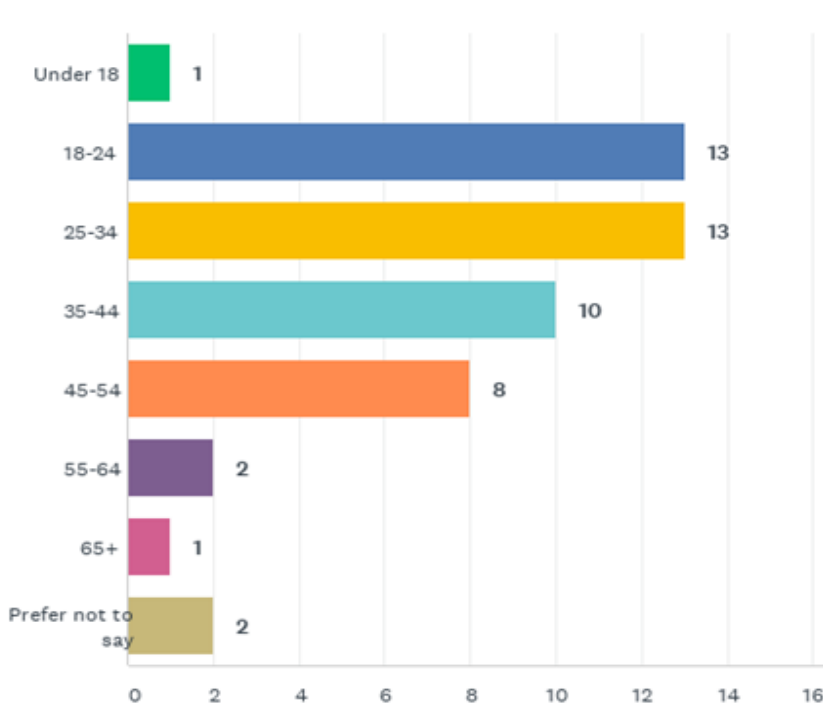
Methodology

Participants

Healthwatch Blackpool had conversations with fifty-two participants currently residing in Blackpool. The following graphs display information relating to the demographics of those who took part.

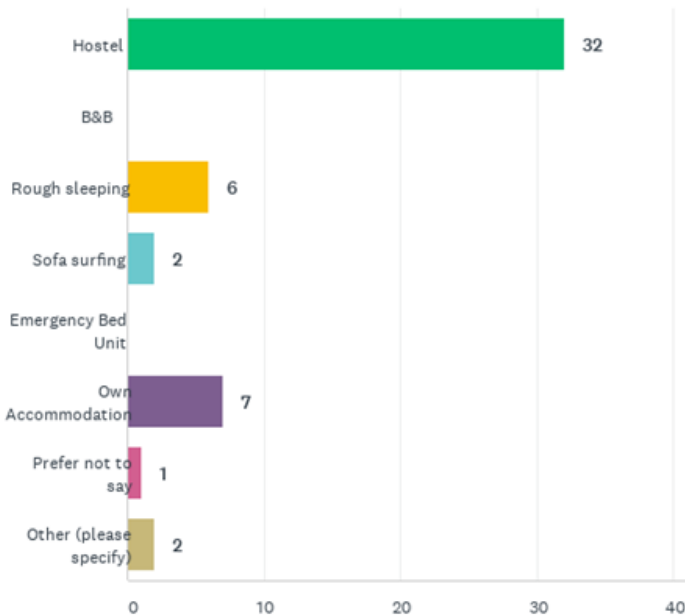


Gender of participants



Age of participants

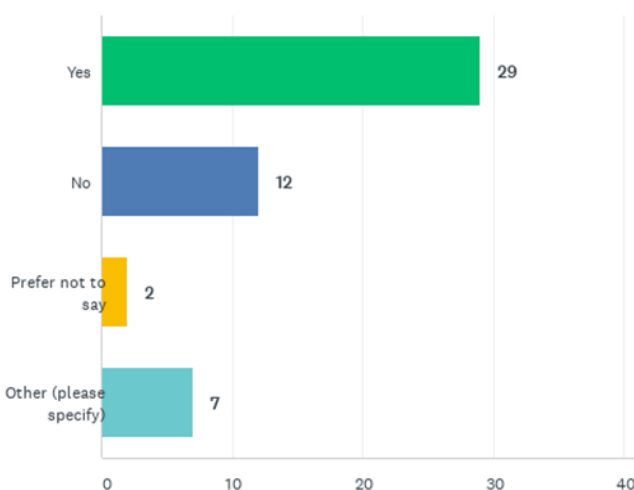
Where are you currently residing?



Those that responded 'Other' specified the following:

- Supported Accommodation
- Sofa Surfing then Own Accommodation

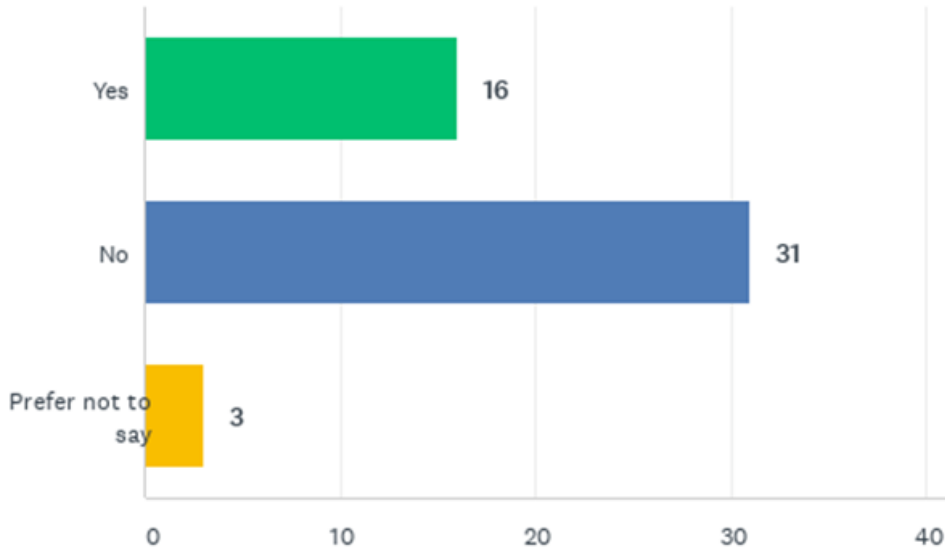
Do you feel happy with where you currently reside?



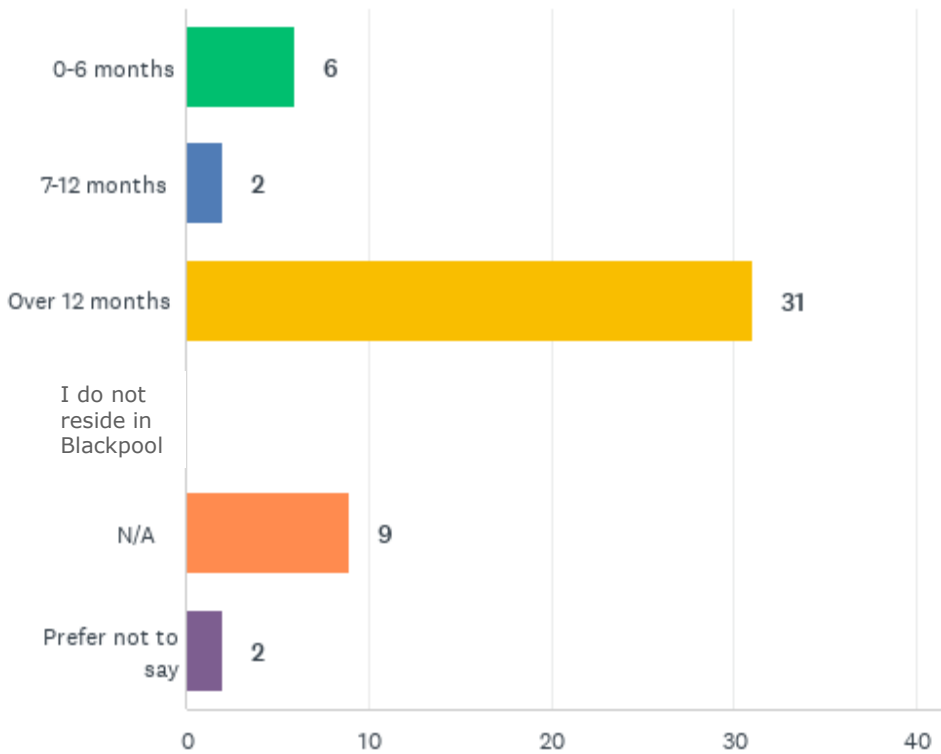
Those that responded 'Other' specified the following:

- *"Not really but it's better than being on the street"*
- *"Sometimes"*
- *"50/50"*
- *"Ish"*
- *"Not really but all the staff are brilliant"*

Are you from Blackpool?

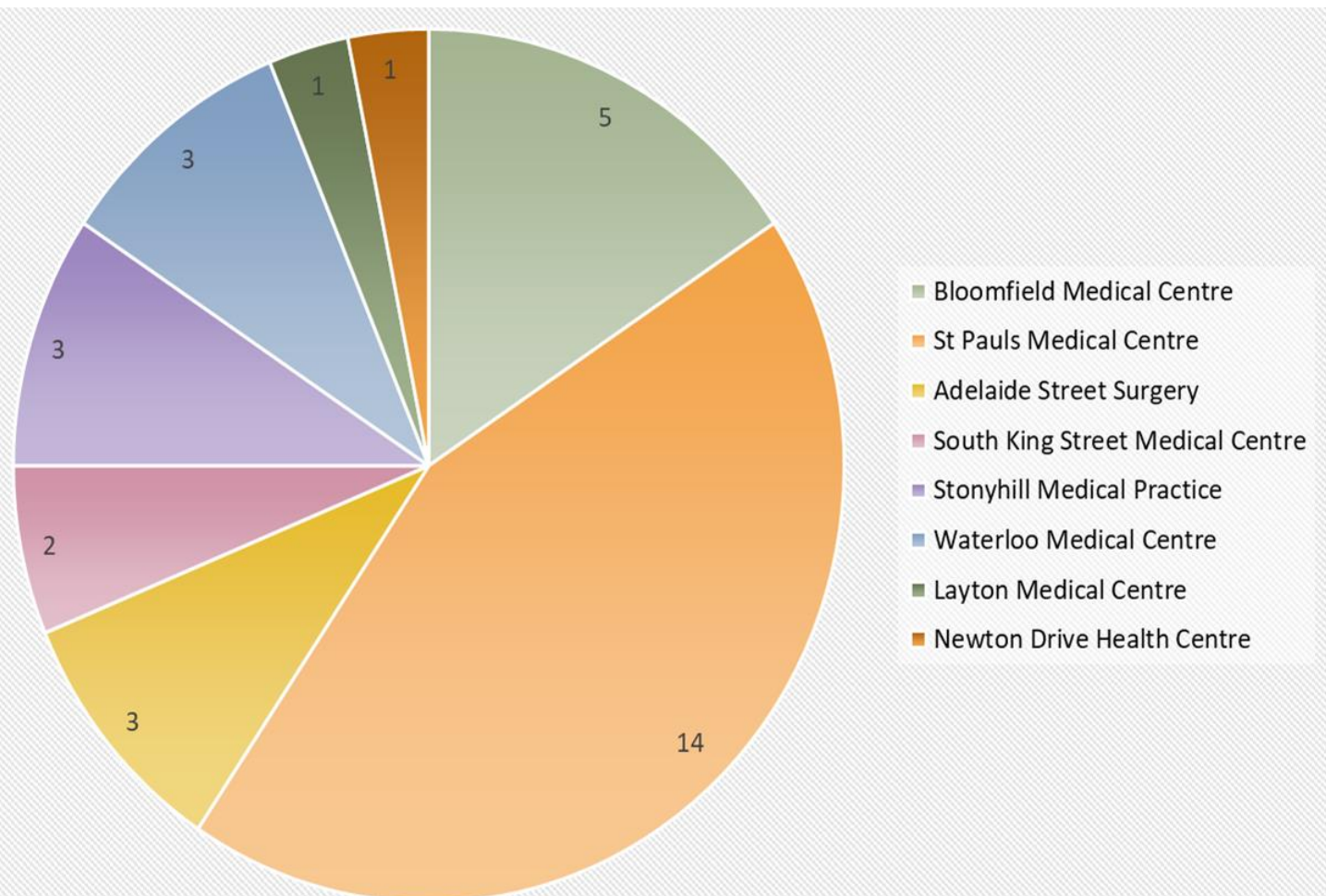


How long have you been in Blackpool?



Feedback on GP Practices

Some participants discussed using GP services within the last 6 months. For those who stated the GP Practice they are registered with, the data is displayed below.



St Pauls Medical Centre

The sentiment of the feedback was divided equally between positive and negative.

+ *"I like them. I always get seen quick."*

+ *"They help if I need it."*

+ *"Service was alright, 10 minutes to get in."*

- *"The experience is not good enough. I ring them and I have to wait for about a week for an appointment. I don't understand the Doctor and the way they speak/explain things I don't understand."*

- *"They're useless and offer no support."*

- *"The service is slow. I have been in once but never met the Doctor after being there 10 months."*

Bloomfield Medical Centre

Similarly, the responses relating to this GP Practice were mixed. A couple of the patients of this GP did not specify whether their experience of the service was positive or negative.

+ *"It was good and I got an appointment easy. All has been good."*

+ *"The transfer was pretty easy."*

- *"They are terrible. He likes to talk about himself."*



Adelaide Street Surgery

The feedback provided by two of the respondents was positive, whilst the other was neutral.

+*“They are good with me. I have spinal problems and they referred me for an MRI at the walk-in centre and on to the hospital.”*

+*“Nothing bad to say.”*

-*“Just recently got a GP- Adelaide Street. Need an appointment but waiting for them to get all the medical records.”*

Stonyhill Medical Practice

One of the responses about this Practice was positive, but the other two were negative.

+*“Was at Stonyhill before which was better.”*

-*“I have tried to access my GP at Stonyhill but can't get in touch with them. It can be up to two weeks waiting for an appointment.”*

-*“I won't go any more. Feel like I'm pestering when I speak to GP about my depression so I stopped bothering.”*



Waterloo Medical Centre

Two of the responses referring to this GP Practice contained the participants views on the service, although it was not clear whether the overall opinion was positive or negative.

-“It’s really good. Having to ring up the practice at 8am is irritating but I understand why they have to do it. It’s so difficult to get an appointment.”

-“It’s too far away.”

South King Street Medical Centre

Both of the responses about this Practice were of a positive sentiment.

+“Rang up and got a physical appointment on the same day. Doctor examined my back and put me at ease.”

+“Easy to register- just fill in a form. Seen a nurse who looked at my height and weight.”

Layton Medical Centre and Newton Drive Health Centre

The two participants registered with each of these GP Practices did not provide any feedback on the service.



Feedback on Hospital/A&E

Of the forty-six respondents who have accessed a health and social care service in the last 6 months, sixteen of those have visited hospital. More specifically, six participants directly referenced visiting A&E.



There were an equal amount of positive and negative experiences, with the key themes listed below:

- Inconsistent quality of care.
- Pregnancy and birth.
- Easy access to a high standard of care.
- Lack of support for mental health patients.

Inconsistent quality of care

Feedback suggests that the quality of care noted by patients fluctuates, and this appears to be dependent on the reason for visiting hospital. For those who have visited with both physical health and mental health needs, their experience differs with each.

*“I have been to the hospital to A&E. I tore the ligaments and muscles in my leg. I was seen quickly and the service was good... I have been to the hospital for my depression and anxiety after my accident. They were sh*t. They didn’t understand and were telling me things from other people’s perspectives, but what about my perspective? That’s someone else, that is not me.. I ended up walking out.”*

“BTH for my mental health, had taken an overdose so can’t really remember how my experience was. I think it was alright. The mental health side was better than the physical side.”

The above experiences suggest that the standard of care varies, irrespective of whether the need is physical or mental.



Pregnancy and birth

Two of the participants recalled their experience of attending hospital during pregnancy and subsequently giving birth.

“Hospital being pregnant and giving birth. Experience was ok. No support during pregnancy, I passed out in hospital and they wouldn’t allow my partner in or tell him if I was ok. If my partner would have been allowed to support me in the side room then this would have reduced my anxiousness.”

“Been in Blackpool Victoria Hospital for a C-section. I found the staff very challenging, judged me and interrogated me because I am under social. They asked me to do things which I didn’t see them asking other Mums to do and that made me feel judged.”

The feedback provided by these respondents highlights areas of concern within hospital maternity services, particularly relating to emotional support available for those who are pregnant and experiencing homelessness.



Easy access to a high standard of care

Some participants relayed positive experiences when visiting hospital.

+ *“I went to hospital for a blood clot in my right lung and cellulitis. I was seen quickly and it was positive.”*

+ *“They gave me an epidural in my back and a nerve block. It wasn’t a success so I have an operation scheduled in July for my back in Chorley for specialised treatment. It was really good and easy to book.”*

+ *“I went to A&E and I was there for three hours. I found the quality of care to be good.”*

+ *“Blackpool Victoria Hospital. Experience has been ok, I have a sunflower lanyard which helps, I wear it all the time.”*

+ *“I went to A&E after having a heart attack. The quality of care was really good. I had a CT scan and an MRI. Found out I have angina and hardening of the arteries.”*

This demonstrates the importance of hospital services operating as efficiently as possible, in order to provide the best level of care.



Lack of support for mental health patients

Three participants have shared negative experiences when attending hospital, suggesting mental health support is unsatisfactory.

-“I visited the hospital twice to get help with my mental health but they turned me away.”

-“With the hospital, my experience was bad they didn’t help me at all. I needed the help as I am a self-harmer, tried to kill myself but they just told me to go home.”

-“Was in Blackpool Victoria and Preston Hospital. The Vic was better but I am now crippled with trauma and won’t even go to the doctors now.”

Two issues are highlighted within this feedback. The first concern relates to patient’s being refused support for their mental health, whilst the other refers to a lack of mental health support following a hospital admission.



Feedback on Mental Health Services

Many of those we conversed with have accessed or tried to access support for their mental health. This feedback was predominantly negative, although there were some areas to be celebrated. In particular, four positive responses made mention of Streetlife and the counselling service they offer, as shown below.

+ *“Had a chat with someone at Streetlife. It was a productive conversation because I was sober and they were approachable, felt like I could trust them.”*

+ *“Streetlife counselling- it’s alright but can get a bit boring”*

+ *“Accessed through Streetlife. It’s good.”*

+ *“Spoke to a counsellor at Streetlife, it was good.”*

Key themes

- Struggles with access
- Issues with rapport
- Dissatisfaction with medication
- Crisis

Struggles with access

Many of the participants who have tried to access mental health support referenced having problems with qualifying for support, complicated pathways and long waiting times.

-“Haven’t been able to access the support I need. It seems to take a very long time to get help and the system is far too complicated”

-“Struggling at the minute, lack self-confidence, going through a break up and sometimes I don't want to be here anymore. On waiting lists for support, my doctors, Horizon and The Ashley Foundation staff have all referred me for support but I'm still waiting. It's like you have to go to prison to get support and get things done. No help, not aware of any places I can get help quickly”

-“I'm currently trying to access services. GP made a referral and I'm on a 6 month long waiting list to see a psychiatrist.”

-“I tried to access Supporting Minds but when I filled it out I didn't get enough points to be able to.”

Issues with rapport

Another concern frequently mentioned by participants was that of being unable to trust mental health professionals, and struggling with the therapeutic relationship.

- “Don’t know who to trust. Will I even be listened to? I would only access mental health support now if they actually build up trust and listen to me.”

- “I’m now under the Gateway where I see a nurse once a week. They’re alright but the nurse talks about her own issues which I don’t like. It feels more like a counselling session for her than me sometimes.”

- “I accessed Supporting Minds. Only went twice as she spoke more about herself and her cats. Didn’t make me feel welcome.”

Dissatisfaction with medication

Some participants have had problems with the medication for their mental health.

- “I’ve been told to keep carrying on with my mental health medication for another two weeks for two years now with no review. Want to treat the root cause as don’t like relying on medication.”

- “I’ve never had counselling only ever had medication. I was 6 years of age when I first started having anti-depressants because I tried to take my own life.”

Crisis

The feedback provided by some of the respondents suggests there are areas for improvement with the support available when in crisis.

-“I’ve used the crisis team, they’re alright to talk to but I have to explain everything all over again each time.”

- “I’ve used mental health support for the last 15 years but I still don’t have a clear diagnosis or understanding. I think I need urgent support. I am alcohol dependent and I have been in and out of prison. I often feel suicidal and self-harm. I don’t feel like I’m getting the support I need at all.”

- “I don’t know of anywhere that helps or gives support when in crisis, wouldn’t know where to go.”

- “In November last year, I was really struggling with my mental health and they gave me some medication but that was it. I then had a complete breakdown at the start of 2021 and was put in the Phoenix Centre for a bit which helped.”

- “Awful. Went to the hospital and he said I had to leave and couldn’t be seen. I was being aggressive outside (hitting the wall) but only because I really needed help and no one was listening. That’s the only way I know how to get heard.”

Suggested areas for improvement

Participants who discussed their experiences with mental health support were asked if they had ideas of how these services could improve. The following recommendations were made.

Seven responses referred to access:

- **Reduction in waiting lists** - *“The waiting lists are the worst because people wait for so long to get any help and then because they are getting no support try to commit suicide. This is what I did because I had no help to deal with my trauma. I think there needs to be more funding because so many people are sat waiting for help.”*
- **Quicker crisis response** - *“Respond quicker to provide support when it is urgently required.”*
- **Easier access to support, particularly for those escaping abuse and/or with deep seated issues** - *“I was trying to be seen for 28 months and just kept being put back to square one when I had to move.”*

Eight responses referred to staff manner:

- **Less judgement of people who are homeless and struggling** - *“In the past they’ve put me down and talked through me, literally sit there and they’re just looking through me.”*
- **More approachable staff** - *“Can only open up to some staff not others.”*
- **For people to feel heard and respected** - *“I need someone to actually listen.”*

Suggested areas for improvement continued.

Operational improvements:

- **Strengthen communication** – *“To receive a reply from services.”*
- **Follow up with actions** – *“For things to be followed through, nothing ever does.”*
- **Preparation prior to an appointment** – *“Read the notes on the system before an appointment so they’re prepared and not making assumptions when the information is already there.”*

Other improvements:

- **Establish a system that ensures people are not repeating their life experiences multiple times to different professionals within the same service.**
- **More staff members that have specialist knowledge to certain mental health conditions** – *“The nurse can’t even explain to me about my conditions so how am I supposed to be able to understand and deal with them myself.”*
- **A designated contact within the service** – *“I would prefer an assigned doctor as I don’t like opening up to several doctors about my past and mental health.”*

Feedback on Dentistry

Ten participants raised issues with accessing an NHS dentist, along with feedback on dental provision such as an emergency dentist and the gum clinic.

The positive feedback received is listed below.



+*“Dentist- I’m visiting in a couple of weeks”*

+*“Gum Clinic at Whitegate Drive- it was sound”*

+*“I usually access required services via The Bridge. I've had standard medical attention (broken finger, teeth issues etc...) and all problems have been fixed ok.”*

Negative feedback regarding dentistry

- *“I don't have a dentist and I have a calcium deficiency so have issues with my teeth, I'm in no pain though so can't be seen by the emergency dentist.”*
- *“I've been struggling to find an NHS dentist.”*
- *“Tried to access a dentist for ages but haven't been able to get one. I lost 3 of my front teeth when I hit my head off a bike and can't afford to get a plate. The roots of my old teeth are still in the gums. I have the rest of my teeth and I hate it I'm so self conscious so I decided to make my own teeth from a YouTube video I watched. I bought a bag of thermoplastic beads off eBay for £5 and heat them up in hot water then make them in the shape of teeth and stick them in my gums with glue. They last anywhere between 1 day and 2 weeks but nicotine gets stuck to them. I have to dip mine in coffee or tea first to dye them a bit so they aren't really white.”*
- *“I went to an emergency dentist at Whitegate Drive. Made to wait five days in agony with an abscess and they left half a tooth/fragments in my mouth. Still have no fixed NHS dentist and have been searching for two years with receding gum disease.”*
- *“Can't get a dentist and will go to extreme measures to sort my tooth out- feel like getting my mate to punch it out so that I'll get treatment for it.”*



Negative feedback regarding dentistry

There are multiple concerns evident in the responses provided by participants, with the most predominant being the lack of access to an NHS dentist. In addition to this, the measures people are willing to take as a result of not having a dentist exhibit the desperation felt.

Another of these concerns focuses on the emergency dental provision. This service is available to people who are not registered with a dentist and require emergency treatment. The feedback indicates that a participant has had inadequate treatment from this service, and a second participant has been unable to access the service for their dental issues.



Feedback on Pharmacies

Participants were asked how they have found accessing their prescriptions over the last 6 months.

After conducting a sentiment analysis of the responses, eighteen people had a positive experience, eleven people had a negative experience and two responses were neutral. Nineteen participants do not access a Pharmacy, due to not having a prescription.



The key themes are listed below:

- Length of waiting time.
- Travel time.
- Methadone.
- Queues.

Length of waiting time

The positive feedback received was largely due to prescriptions being ready on time. However, for participants who had negative experiences, many reported long waits for their prescription and the medication not being prepared.

+ *“I collect my antidepressants from St Pauls. They are always on time.”*

+ *“I ring up and collect my prescription from Whitworth’s next door to Waterloo Medical Centre. It’s always been ready.”*

+ *“I collect them from Morrison’s at Squires Gate and they are no problem. My prescription is always ready and they are very good. They do not leave me waiting too long when I am in there as I am not very good on my legs and they recognise this.”*

- *“They say my prescription will take 48 hours but they go over that time. 5 days ago they misplaced my meds so they’re trying to rush it through.”*

- *“When I go to the pharmacy after 2 days to pick it up it’s not there sometimes.”*



Travel time

Some participants referenced issues with the location of their nominated pharmacy.

- “Hard because it’s at Whitegate Drive where I pick them up and I have to walk there.”
- “Been murder, been having to travel to the other side of Blackpool to get my prescription.”
- “Problematic. I’m registered with a GP in Fleetwood and accessing prescriptions has been a constant issue. GP has advised changing nominated pharmacy to one in Blackpool”

Methadone

For those participants who access the Pharmacy for methadone, their responses were varied.

- +“Get my methadone prescription which is all good.”
- “Not so good with my methadone. On 90mls last 4 months it’s been fine and has been holding me for 24 hours but I’m using more recently as it’s not holding me. I think it’s because I’ve gone from a Boots chemist to a Lloyds chemist and the taste has changed so maybe it’s not as strong.”
- “Get methadone which has been harder during covid. Because I have no GP I wasn’t supposed to get methadone but Horizon have overridden this. I get methadone from Cohens chemist which is alright.”



Queues

Similarly, the feedback relating to queues within pharmacies was mixed. In the most part, responses suggest the queues have been manageable. Despite this, some people have experienced long waits.

+ *“It’s been absolutely fine, the queues aren’t too bad and it’s all understandable.”*

+ *“Good it’s been easy. It’s ready within a few hours and the queue goes down quick.”*

+ *“Cohens allow two people in at a time but the queues haven’t been bad.”*

- *“I have to queue now.”*

- *“I get my prescription from Well Chemist, I have to queue for about an hour.”*

- *“Sometimes I have to wait in queues, so I leave and go back another day.”*

Generic positive feedback

+ *“Cohens have been brilliant. They use the blue script and have respect.”*

+ *“I pick them up weekly and have no problems.”*

+ *“No problem, really good, the staff are friendly and know me.”*



Feedback on Cancer Screening

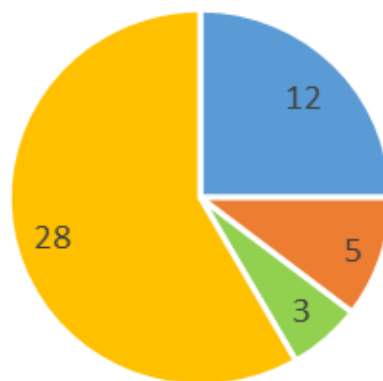
Participants were asked the following in relation to cancer screening:

- Are you offered any screening?
- If yes, do you attend and are there any barriers to attending?

The graph below displays the eligibility of participants for three types of screening.



Respondents Eligibility for Screening



- Number of respondents eligible for Cervical Screening
- Number of respondents eligible for Breast Screening
- Number of respondents eligible for Bowel Screening
- Number of respondents not eligible for any screening

Cervical Screening

Of the twelve participants eligible for cervical screening, four have been offered screening and eight have not received an invitation to be screened.

The feedback put forward by the participants who have been offered cervical screening portray a range of views.

+ *“I get screening, I had my smear 2 weeks ago and it was a positive experience. It’s obviously not comfortable but it went well and I have nothing to worry about. I will definitely go again next time I’m told to.”*

+ *“Yes I’ve been offered screening, I’ve been sent them through the post and address has never been an issue.”*

- *“Yes I’ve been offered some screening, a smear, but don’t go, I don’t like having it done or feel comfortable to go.”*

- *“Yes I’m offered screening but don’t go. Rather not know, don’t want bad news.”*

Those who have not received an invitation for cervical screening were either sofa surfing, rough sleeping or in hostels.

- *“Don’t have any screening or health checks. Can’t get hold of me to book them. Think I might be offered them through the post but don’t get any as it goes to an old address that I had to leave.”*

- *“I’m not offered any screening.”*



Breast Screening

Two participants have previously been invited for breast screening, out of a possible five that are eligible.

A female participant who was living in a hostel age 65+, said the following:

“I don’t get any screening for cancers or anything like that, I don’t have any checks.”

Bowel Screening

Similarly, one participant had received an invitation for bowel screening, whilst two participants have not.

+*“I have had a screening for bowel cancer four times.”*

-*“Not been offered any but my address my GP has for me does need updating.”*

Barriers to attending screening

Some responses suggested possible reasons as to why people may not attend a screening appointment, or even receive an invitation in the first instance. Examples of such barriers include not feeling comfortable, not having their up to date address and not wanting bad news.

“The barriers are being told when the appointments are and actually getting an appointment. With everything else going on in my life this isn't something I think about.”



Feedback on other services

A handful of participants referred to other services when providing feedback.

These included:

- Sexual health
- Opticians
- Horizon/ Renaissance
- Health Bus
- Social services/Families in need
- Medication reviews



Sexual health

Several participants raised feedback concerning access to sexual health screening. Overall, these experiences were mostly positive.

- + *“Get sexual health screening at the hostel.”*
- + *“Because of my sexuality I’m screened every 3 months at walk in centre and renaissance.”*
- + *“Sexual health screening offered at streetlife, I found out about chlamydia and got treatment through this. Didn’t know that the symptoms I was having were chlamydia until I got the test done.”*
- + *“Sexual health clinic, every 3 months I get a sexual health check.”*
- *“Been offered sexual health screening but chosen not to have it as feel as though don’t need it.”*
- *“Tried to access online for sexual health (ordering test kits) but got no response. Still waiting.”*

Opticians

Two participants discussed very different experiences of accessing an opticians.

- + *“Been to the opticians the other week, the Royal Opticians in Layton. It was a face to face appointment and it was good.”*
- *“I want to access an opticians but don’t know if I can afford it or where to start with it.”*



Horizon/Renaissance

Almost all of the feedback put forward about Horizon and Renaissance was positive, with eight participants referring to this service in conversation.

+*“Horizon - it was alright. Renaissance help me with my methadone, gender identity and sexuality.”*

+*“Horizon- I was closed as a case 2 weeks ago, I feel like I don't need help for my drinking anymore and they thought that too, I'm on the right side now.”*

+*“Horizon was a good experience.”*

+*“Horizon is really good.”*

-*“Horizon- wasn't as in depth as I thought it would be.”*

Health bus

“I find the health bus staff really friendly and like this service.”

Social services/Families in need

“I work with social services and families in need and find them very helpful.”



Medication reviews

A greater number of participants stated they do not have a medication review as opposed to having them. In some instances, no context was given and therefore it is not possible to assume whether a medication review is required in such cases.

The following feedback highlights good practice.

+ *“Yes I’m offered a medication review and had one 2 weeks ago. I needed the dosage putting up and it was done over the phone, I’m happy with the outcome.”*

+ *“They do my medication reviews when they do my bloods for diabetes.”*

+ *“Had my methadone reviewed not too long ago.”*

+ *“Offered medication reviews- I go to these and like them because the meds are working better now they’ve increased the dose from 15mg to 20mg after the review.”*

+ *“I have med reviews and annual health check every 12 months.”*

+ *“I get medication reviews once every 2 months. I’m on mirtazapine, sertraline and methadone. All good.”*



For those who are disappointed by the lack of medication reviews they have received, the subsequent criticisms were shared.

- *“The lady did two reviews for my medications however I have not been offered anymore since. She sometimes does them over the telephone.”*
- *“I am never contacted for medication reviews and the last time I had a review was when I was in jail. I have been on my medication almost 6 months and it is up to me to get in contact with them if I think my doses need altering.”*
- *“I have not been offered any medication reviews. I do not think my tablets are strong enough but I haven't been asked to come in.”*
- *“No med review since February, supposed to be every 2 months and it was meant to be in April. I chased it up and told they don't have the staff to do it.”*

Physical health checks

Some individuals reported positive experiences of having physical health checks by their GP or Horizon.

- + *“The GP get in touch to review my leg and usually send a letter through. They are good at staying in touch.”*
- + *“I have been offered to go for a BMI check and full body health check through my GP. I have been offered a programme to help me lose weight.”*
- + *“Yes- I have health checks with horizon every 6 months where they check my blood, heart etc...”*



Impact from this project -

Signposting

During the engagement process, Healthwatch Blackpool staff and volunteers signposted individuals to the relevant organisations where appropriate. For example, for individuals who were not registered with a GP, they were supported by Healthwatch Blackpool to make telephone enquiries to the practice of which they had expressed an interest of joining.

Furthermore, those who stated that they did not know of any mental health support or crisis support locally were given information on these provisions in the format they desired, whether that be handwritten, verbally or via text message.

Onward referrals and follow ups were also carried out where it was deemed necessary.

Impact from this project -

Mental Health

As the engagement in Blackpool was nearing completion, the data relating to mental health services was analysed, in order for the feedback to inform a task and finish group chaired by the local CCG. Included in this analysis were the 41 responses we had collated at that point in time.

This multi-disciplinary mental health team will specifically cater for people who are experiencing homelessness and will provide holistic support, with a Lived Experience peer support element.

As a result of presenting this feedback in the group, it was decided that regular further engagement should be maintained going forward to ascertain whether there has been an improvement in service provision. We concluded as a partnership that it is also important to determine if the new service fulfils the current unmet need, so adjustments can be made if necessary.

In terms of the issues raised relating to staff manner towards people experiencing homelessness, a suggestion was made for a lived experience staff member from Empowerment to have a seat on the interview panel for the positions in this service. The purpose of this will be to assess suitability to the role, with the ultimate aim being to employ individuals who have the non-judgmental and approachable nature required to engage with those who will use the service.

Impact from this project -

Cancer Screening

Additionally, when having conversations with people experiencing homelessness, it quickly became apparent that very few had accessed cancer screening. Healthwatch Blackpool and a Commissioning Officer for Planned Care and Cancer met with both a Screening and Immunisation Manager and Coordinator from NHS England and Improvement to discuss this trend.

Upon meeting, it came to light that it is very difficult to access cancer screening with No Fixed Address, thus explaining the findings. From what we understand, the reason for this is the national database requires an address to send the invitations to, and so without an address they cannot be sent out. This also means that they do not have an address to send the results to. The national database is a computer based system, so there does not appear to be any tracking of what happens to those who do not have a registered address.

The Healthwatch Blackpool staff member and Commissioning Officer both put forward an argument for this being unacceptable and requiring change. As a collective, we came to the conclusion that we would aim to establish a pilot on the Fylde Coast that should enable those with No Fixed Address to have the opportunity of being screened where eligible. Healthwatch Blackpool's role within this pilot will be to share our data from the project about access to screening and barriers for people experiencing homelessness.

Impact from this project -

Dentistry

After completing the engagement in Blackpool, members of the Healthwatch Blackpool team met with Senior Primary Care Managers in NHS England and Improvement to discuss the issues with accessing NHS dentistry for people experiencing homelessness.

This discussion resulted in a meeting being established between relevant partners in order to determine how to drive a solution forward. Consequently, a scoping exercise is underway led by Fylde Coast Medical Services, with the aim of setting up a pilot project following this.

Healthwatch Blackpool continue to raise the issues we consistently hear around NHS dentistry access in the hope that positive action will happen as a result.

Acknowledgements

Healthwatch Blackpool would like to thank all those who shared their views and experiences in order to influence service change. The positive impact from this project has been made possible because of you.

We would also like to thank all the organisations who facilitated visits and supported us with the planning and co-ordination of this project.

Get in Touch:

If you would like to discuss any of the information contained within this report with a member of the Healthwatch Blackpool team, please do not hesitate to get in touch.

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