

Update and key themes

March 2023



www.healthwatchnorthtyneside.co.uk

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1. April 22- February 23

This report provides a summary of the key work areas of Healthwatch North Tyneside and the issues residents have raised with us.

In December we launched two large scale consultations:

Caring In North Tyneside 2022 – Gather carers' views and experiences on behalf of the Carer's Partnership Board. We are working closely with North Tyneside Carers' Centre and other partners to deliver this. This closed on 12 February 2023 and we heard from 675 carers.

Have your Say 2022/23 – our annual survey of resident's views and feedback about local health and care services. This closes on 28 February 2023 and so far we have heard from 546 residents (26 Feb 2023)

Results from both consultations will be shared with partners and thereafter at future Health and Wellbeing Board meetings.

**3,177 people have shared
their views and experiences
so far this year**



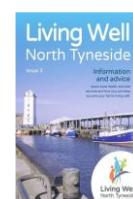
**2,186 people talked to us
at 85 events across North
Tyneside**



**580 people told us about
their views & experiences of
outpatients**

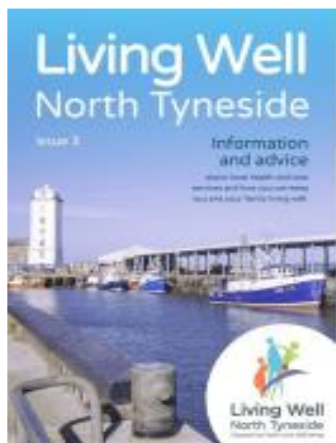


**99,000 Information
booklets
distributed since
March 22**



2. Providing Information

Healthwatch North Tyneside is commissioned to provide Information and signposting for local health and care services. Alongside providing an information service (available 5 days a week by phone, email, website and social media) we also lead particular campaigns to respond to gaps in available information which local people highlight to us.



2.1 Living Well North Tyneside booklets

95,000 copies of the third edition were posted through letterboxes of every house in North Tyneside during March and April 2022. A further 3,000 have been distributed through services and community settings, including the Warm welcome sites.

We are working with partners to agree whether a fourth edition should be prepared in spring 2023 and looking at different ways to distribute these to manage costs. Partners are keen to proceed but this depends on securing funding.

2.2 Living Well North Tyneside Website

Healthwatch North Tyneside is also an active member of **The Living Well North Tyneside Partnership**. VODA leads this project and has been working with Digital Pathfinders to respond to the feedback received since launch and make improvements to the way the site works. These improvements will be made in the coming months ahead of a campaign to raise awareness of the site.



The February Living Well Locally Board received a proposal that partners invest a further £6,000 in the IT development budget to make significant improvements to the layout of the website to make it more user friendly and to improve the search functionality. It is hoped this funding will be agreed in March 2023 so these important developments can get underway.

2.3 Supporting residents to resolve their issues

Here are some examples of how we have supported local people with their issues:

Raising a problem

We helped a North Shields couple to understand how to make a complaint about a private provider who had completed an autism assessment and a course of follow up support. The couple said they had 'been forced to go private because of the NHS waiting times for adult autism assessments'.

Breast screening appointments

A Whitley Bay resident contacted us to find out when she would be called for her breast screening appointment given it had been more than 3 years since her last check. We contacted North Tyneside's Public Health team to check for the latest information and they subsequently updated their webpage following delays to the roll out.

Signposting to other services

We met an older lady who lives in a 3rd floor flat. She said she feels very isolated, depressed, and unable to cope and was looking for a move to sheltered accommodation. Her flat also had very expensive night storage heating which she could barely afford. She had contacted her landlord who told her she would have to go online to register and 'bid' for available properties. We connected her with support from Age UK and her local library.

Finding a dentist

A resident from Wallsend was struggling to find a new NHS dentist following the closure of their practice. We advised about all the ways she could look for available practices and put her in touch with a practice we knew were taking on new patients in Benton. We also provided her with information on the registration process. She was able to register with the new dentist and thanked us for our support.

Contacting GP practices

We heard from several residents about confusion surrounding a new phone number for a GP practice. We raised this with the practice via the ICB and new communications were issued to users.

3. Healthwatch's key areas of work

3.1 Vaccine programmes

Since the launch of the Covid vaccine programme in December 2020, we have been supporting the delivery of the programme to inform and engage with residents. We are a member of the North Tyneside Vaccine Board and work closely with the Public Health team and ICB North Tyneside, alongside the services delivering vaccinations.

In Autumn 2022, 97 people shared their experiences of the Autumn booster programme for Covid and flu. We identified that some people were struggling to get a vaccine, particularly in North Shields. We worked with the NHS and council to arrange mobile vaccination buses and promote these to local residents. During November and December, the mobile vaccine units delivered 16 sessions across North Tyneside and 463 people received their jabs.

We are working with NHS North Tyneside and the Public Health team to investigate attitudes to other vaccination programmes in North Tyneside- particularly those aimed at older people – including pneumonia, and children's vaccinations.

3.2 Breast screening

We are focusing some of our activities on understanding women's health issues during 2022/23. We decided to focus on the breast screening programme in North Tyneside as we heard that there was lower take up than in previous years and local residents told us that the programme was working less well than in previous years. Annex 1 provides a summary of the report and findings, the full report is available <https://healthwatchnorthtyneside.co.uk/report/breast-screening-programme-report-nov-2022/>. The suggested actions are being considered by North Tyneside's Cancer Prevention Network.

3.3 Health inequalities

The board has received our report about the Equally Well strategy and implementation plan. We continue to 'mine' the data gathered and feed this into discussions with providers and decision makers.

The community groups involved have been sharing positively with us how the Equally Well consultation exercise has sparked the people involved to take action themselves.

We are currently working with some of the organisation's involved in the exercise to identify practical solutions to digital inclusion as part of North Tyneside's digital inclusion strategy work. This will be paid from NHS Transformation funds and will contribute to North Tyneside's digital inclusion strategy due to be shared in March 2023.

3.4 Outpatients and Patient Initiated Follow Up

NHS England is encouraging the rollout of patient initiated Follow up approaches to outpatient appointments. This gives patients the opportunity to arrange follow up appointments themselves as and when needed, rather than following a fixed set of appointments. We have worked with our sister organisation, Healthwatch Northumberland, and Northumbria Healthcare Foundation Trust to gather views of planned changes to the way some outpatients appointments are delivered. We heard from 580 people and have shared these findings with the Trust with a view to publishing information in the coming months.

3.5 Community Mental Health Transformation

We have been commissioned to support the Community Mental Health Transformation Programme to involve local people in the design and delivery of the programme. We lead this work with Launchpad North Tyneside. The focus of this work so far has been around:

The creation of a 'Crisis Café/ Safe Haven' as part of the out of hours crisis support services in the Borough. Service users are helping to decide the location, opening hours and what is involved in this new service. You can read more about service user and carer feedback

<https://healthwatchnorthtyneside.co.uk/news/community-mental-health-transformation-update/>

Ongoing support for people with more complex mental health challenges has been identified as a real gap by service users, carers and professionals involved in mental health services. We are currently working with a group of 10 residents with lived experience and statutory partners to design a new service that will better support people to live well, connect to their communities and get the support they need. From this work a range of other issues have emerged that are being further investigated by the programme team.

3.6 Social care

We are hearing more about people's experiences of social care including self-funding, local authority funded and Continuing Health Care funded arrangements.

Key issues appear to be:

- Challenges sourcing providers of care packages, including people being placed in residential care when a suitable home care was not available.
- Support and information for carers.
- Resolving quality issues.
- Support for people paying for their own care.

In addition, we are commissioned by North Tyneside Council to help them to understand people's experiences of their adult social care support. We conduct detailed interviews with selected service users from different teams to understand how person centred the social care services are. Feedback has been broadly positive about the role of social workers and the relationships they form with their clients.

3.7 NHS system change and service user voice

We are working with the 13 Healthwatch organisations across the North East and North Cumbria ICS footprint to work with the ICS to ensure local people's voices are heard in the new arrangements and that the statutory role of Healthwatch is understood. A representative of the Healthwatch Network will have a seat on the ICB (non-voting).

We have successfully secured funding from the ICB to support the Healthwatch Network to work with the ICB at area ICP (North of Tyne and Gateshead for us) and region wide and are putting a new structure in place. Healthwatch North Tyneside has been leading these negotiations and will be holding the funds on behalf of the Healthwatch Network in the North East and North Cumbria.

More locally we are working closely with our neighbours at Healthwatch Northumberland and Healthwatch Newcastle and Gateshead regarding common themes across our North of Tyne and Gateshead area.

4. Key themes in the feedback gathered so far this year

Issues we have raised with providers and decision makers:

Urgent response to falls – Through the Aging Well board and directly with NEAS we have been raising concerns about long waits for lower priority ambulance calls including trips and falls. This has been an issue throughout the year, with recent pressures on the ambulance system exacerbating the issue.

Transport costs and the cost of living – We take every opportunity to raise concerns about transport costs for residents and the impact this is having on people's health and wellbeing. This includes: cost of taxis for people who rely on them, access to public transport to key services and car parking at hospitals and other key sites. As a result of our feedback, one GP practice has agreed to support necessary taxi costs if a patient is required to be seen at a different site.

Continuing health care and care package issues – we have raised individual cases with North Tyneside Council and ICB North Tyneside when people approach us about challenging situations with care packages, delays to services or people appearing to not be getting the quality support they need.

Connections between primary and urgent care – With systems under pressure, we continue to highlight the relationship between primary care and urgent and emergency care. People tell us that they often feel forced to access urgent and emergency care services because they cannot get support within primary care services. Planning for these services needs to be considered together.

Follow up contact with 111/999 – We have raised residents' concerns about waiting for support from 111 and 999 and a suggestion from some residents that they would like a way to be able to contact 111/999 with an update that is separate to the main numbers. NEAS are looking at systems used in other regions.

User and carer involvement – We continue to champion user and carer involvement in service development and strategies including the updating of the Mental Wellbeing in Later Life Strategy refresh.

Initial feedback from our annual survey

At the point of writing, our annual survey asking people about their views and experiences of health and care services in 2022 is about to close. We have heard from 546 residents and their feedback will be shared with commissioners and providers.

Initial analysis of the data collected so far indicates:

Quality of care is high – Generally people tell us that they value the quality of care and score this highly.

Staff are doing their best – People appreciate the pressure on staff and for the most part think that staff are doing a very good job. When strikes are mentioned, people told us they support the action although they are disappointed by the impact.

Delays and cancellations are an issue – 50% of respondents told us that their treatment or care had been affected by delays, cancellations or other problems with access.

Waiting times are a real concern for some specialism and services – We are getting a picture of challenges within particular services.

Sense that services are getting worse – over 50% of respondents told us they felt services last year were worse than the previous year. It seems many people expect services not to work well and are resigned to poorer quality than they would like.

Some people are paying for private treatment because of delays – several people have told us that they have paid for private treatment at NHS and private facilities, due to waiting times and delays. Separately, we have heard wide concerns about limited access to NHS dental treatment and ‘feeling forced to go private’.

Cost of living crisis impacting on health and wellbeing – whilst many people have told us that cost of living has had limited impact, others have shared very difficult stories about cutting their heating; becoming virtually housebound because they can not afford to join in activities; cancelling gym, swimming and other activities; access to nutritious/high quality food and impact on stress and mental health.

Transport continues to be a concern for many – Cost of living impacts and affordability has been highlighted as well as reliability and access to public transport. Access to hospitals has been particularly highlighted, but also access to more local services (GP, pharmacy etc).

5. Key work coming up for Healthwatch North Tyneside

- Deliver a project with North Tyneside Council to understand the experiences of **care homes during Covid** to record and acknowledge experiences and identify lessons for the future from residents, families and providers.
- Set up and deliver a project to understand people's experience of **hospital to home** in North Tyneside to identify what is working well and what could be better.
- Conclude **digital inclusion** engagement activities.
- Develop research project for **audiology** services in North Tyneside and Northumberland with Healthwatch Northumberland and The Newcastle Upon Tyne Hospitals NHS Foundation Trust.
- Analyse carer's experiences through **Caring in North Tyneside in 2022** and share findings.
- Conclude our **annual survey**, analyse and share findings.
- Develop **learning disability and autism** focused engagement activities funded by North Tyneside Council.
- Continue **Community Mental Health Transformation** work.
- Identify priorities for **2023/24 Healthwatch work programme**.

Annex 1 – Breast Screening report summary

During the evidence gathering exercise, we worked closely with the Public Health team at North Tyneside Council and providers to provide regular feedback about what people were telling us and highlight ways services could be improved. This included ways that the invitation system could be improved, issues about parking and issues that individual women raised with us about their personal situations. Several changes to the breast screening programme were implemented during the time this survey was open. Some of these were as a direct result of the feedback gathered here.

The Breast screening programme is designed and commissioned nationally, and there is limited local control of how some elements are delivered.

We would like to thank the residents of North Tyneside for sharing their views, the services involved for listening to what people are saying and particularly the Public Health team at North Tyneside Council who have prioritised improving this screening service for residents. Our thanks also go to our partners for their support in sharing the survey, our volunteers for helping to gather feedback from the public, and the staff of the mobile screening unit at North Tyneside General Hospital for giving our survey to people attending their screening appointments.

Highlights of the information gathered

People were grateful to have access to the screening process and felt the experience was very good. For most people, the process ran smoothly from start to finish, information was clear and accessible, and the staff were kind, reassuring and efficient. However, for some, the booking process was difficult and the choice of venues was inconvenient for both travel and parking.

It is clear from the feedback that the service makes a significant effort to reduce barriers to participation. The invitation/ booking process was improved during the survey period, and many people said it was easy to change their appointment time or venue to a more convenient one.

Those not invited to participate in the programme would like to be better informed of when to expect their screening and notified of delays. There is an appetite for widening the scope of the programme and/or sharing the

reasoning for the cut-off points and publicising how to access the service for people outside the age range.

- There is a strong sense from the people that responded that they wanted to access the screening programme. Although we know from our wider engagement activities that people less keen on the screening programme did not complete the survey.
- Of 314 people responding to the survey, 64% (200) had been invited to participate in the breast screening programme. Of those invited, 75% (147) tried to book an appointment.
- The programme is generally felt to be of very high quality and people are grateful to have the opportunity to participate.
- Ratings are very high for all aspects of the process:
 - Being invited – **4.6** out of 5 stars
 - Booking an appointment – **4.5** out of 5 stars
 - Attending an appointment – **4.8** out of 5 stars
- Methods of invitation changed during the survey period. The majority felt that all worked efficiently. There are examples, however, where people have been contacted multiple times by several different agencies.
- A small number of people were frustrated by difficulties making phone and online bookings, or about the appointments that were available. Many more people said these systems could be improved.
- Some people told us that they were contacted on multiple occasions by different teams 'chasing them up' to book an appointment. Some of these chase up calls were to people who had not been invited or had already booked their appointment or had been screened. Data from North Tyneside Council's public Health team indicates that 30% of the 936 women they spoke to had already booked their appointment.
- Responses were particularly positive about staff at screening appointments. People felt staff were kind, reassuring, respectful and efficient.
- Comments suggest that the screening process itself runs smoothly and efficiently.
- Travel and parking concerns were mentioned as a cause of worry when attending appointments.
- Some people would like to be able to access screening outside the age criteria of the programme. Not everyone was aware this could be requested.
- People would like to know when their screening is due.

- Responses from 25% (50) who did not book an appointment show 15 were put off by problems with access (either booking or venue) or previous bad experiences.

Suggested actions

The following suggested actions are based on what we have heard from local residents, including the responses to the survey. They aim to improve the experience of the screening programme for local residents. We recognise that some of these actions would take significant re-design of the screening programme at a much broader scale than North Tyneside and highlighted which actions we think are within the control of the local system.

Local System

1. Continue to remain open and responsive to feedback, particularly that which may put people off participating in the programme.
2. Continue to monitor invitation and booking systems, so they work efficiently for users. In particular, continue to offer timed appointments at first contact with a resident rather than asking them to contact the service to make an appointment – this change was introduced due to local lobbying by partners to this project.
3. Improve coordination of the invitation process to improve take up of screening opportunities. Currently, Public Health teams, GP Practice teams and the Screening Programme team all work from copies of the same patient list which is not automatically updated between the three teams. This can result in some individuals being invited multiple times or invited after they have already been screened.
4. Review the location of venues across the borough, considering travel, free parking and accessibility, and including clear instructions on where to go and where to park. Since this survey closed, an additional screening unit has been sited in the Whitley Bay area.
5. Review the staffing of the booking line to ensure users get a consistently prompt response to their enquiries.
6. Invest in an online booking/change booking system that allows people to select a time and venue that works for them, rather than the online form that generates a call back from a member of the booking team. Look at

ways this could be integrated with other online and app developments within the NHS. This exists in other parts of England.

7. Improve information about the practicalities of an appointment – choice of venues, public transport, location, parking arrangements, support with travel costs etc – at the point of invite.
8. Continue to support the staff teams to provide the high level of care we have heard about.

National

9. Consider re-designing the trigger for people being called for a screening appointment so it is based on when an individual is due rather than the programme being focused on the rolling programme of GP practices as is currently designed. This would help people to know when they are due as an individual and avoid women who switch practices missing out.

Local and National

10. Improve the availability of information about the screening programme and how to access screening outside the age criteria of the programme.