

HealthWatch Engagement report

In partnership with Portsmouth City Council's Research and Engagement Team

Produced by:





Introduction

Background and methodology

Earlier this year, in collaboration with the University of Portsmouth, Healthwatch Portsmouth produced a 62-page report titled 'The challenges facing Portsmouth residents: a community-based research study'. This report collaborated with Portsmouth residents to identify challenges and solutions to issues relating to health, education, housing, employment and political support. From this report, a one-page list of conversation starters, focusing on the solutions to issues raised, was produced by Portsmouth City Council's engagement team, alongside a simplified graphic version. These were used in community engagement events and conversations by the engagement team to understand whether Portsmouth residents agreed with these solutions, how they might be put into practice, and how they might best reflect the needs of a diverse city. Conversations were captured by the engagement team in an online qualitative survey.

Objectives

The main aims of the research are to:

- Find out whether residents agree with the challenges and solutions identified in Healthwatch Portsmouth's report
- Gather ideas for implementing solutions
- Understand how best to reflect the diverse needs of Portsmouth as a city
- Raise awareness for Healthwatch Portsmouth as an organisation, particularly amongst areas with higher IMD or groups with existing health concerns

Response rate

In total, the engagement team had 276 individual conversations.

Groups visited by the Engagement Team (i)

The Engagement Team focused efforts on visiting as many local groups and organisations as possible:

Buckland

- Buckland Area Housing Office - Council Rent and Council Tax Day
- Buckland Community Centre - Buckland Wellbeing Walk
- Buckland Community Centre - Buckland Community Café
- Buckland United Reformed Church - Createful Mental Health Support Group
- Buckland Community Centre - team meeting

City Centre

- Portsmouth Central Library - Cafe Drop-In Session

Cosham

- Cosham Community Centre - My Wonderful Yoga
- Cosham Community Centre - Cosham Craft Club
- Cosham Library - Reading Friends Group
- Community Kettle - Community Coffee Morning
- Community Kettle - Community Craft Session

Eastney

- Eastney Community Centre - Cafe Drop-In Session
- Eastney Community Centre - Community Bingo
- Eastney Community Centre - Testlands Summer Holiday Education

Fratton

- Fratton Community Centre - Fratton Friends Sowing Club
- Fratton Community Centre - Pathways Support Group
- Fratton Community Centre - Mama P's Community Café
- MAKE Aldingbourne Trust - Craft Drop-in

Landport

- Landport Area Housing Office - Council Rent and Council Tax Day
- Landport Community Centre - Community Coffee Drop-In
- Landport Community Centre - Co-op Employment Guidance
- Landport Community Centre - Enable Ability Careers Support

North End

- North End Library - Summer Holiday Craft Activity
- The YOU Trust

Groups visited by the Engagement Team (ii)

Paulsgrove

- Paulsgrove Community Centre - Paulsgrove Pantry
- Paulsgrove Area Housing Office - Council Rent and Council Tax Day
- Paulsgrove Community Centre Drop-In
- Paulsgrove Community Centre - Portsmouth Pulmonary Rehab Exercise Class
- Paulsgrove Community Centre - Smile Café

Portsea

- John Pounds Community Centre - Go Active Camp
- John Pounds Centre - Mobility For 50+
- Portsea Area Housing Office - Council Rent and Council Tax Day

Somerstown

- Somerstown Central (The Hub) - Cafe Drop-In Session
- Somerstown Area Housing Office - Council Rent and Council Tax Day

Southsea

- Albert Road
- Fawcett Road
- Havelock Community Centre - Crafts Group
- Portsmouth Carers Centre - Cross Cultural Men's Cooking Group
- Cycling Without Age
- Society of St James Recovery Hub
- Kingsway House - Society of St James Rough Sleeping Hub
- Palmerston Road
- Southsea Library drop-in
- St Margaret's Community Church Pantry

Milton

- Two Saints Portsmouth Resettlement Offices
- Two Saints Yew House Temporary Accommodation
- Two Saints Hope House Stage 1 High Risk Accommodation

The Engagement Team combined the HealthWatch survey with the door-knocking of hundreds of council flats in the following council-owned properties:

Somerstown

- Edgbaston House
- Halesowen House
- Handsworth House
- Ladywood House
- Longbridge House
- Oldbury House
- Sedgley Close
- St Paul's Road
- Stratford House
- Tipton House

Wymering

- Ashurst Road
- Chipstead Road
- Dymchurch House
- Herne Road
- Westerham Close

Landport

- Canberra House

Healthcare

- Healthcare needs to be **made more accessible** by:
 - Improving non-digital access and easy-to-use online systems
 - Improving access to healthcare professionals by recruiting, employing, and retaining more staff
 - Making it easier to find and book NHS dentists in the city
 - Improving and increasing the number of healthcare centres
- **Quality of experience** could be improved by
 - Better delivery of specialised care (e.g. mental health trained professionals)
 - Improving the manner of staff; more empathetic, reducing stigma or judgement
 - Making healthcare more inclusive
 - Continuing care into the home
 - Being considerate of needs in a hospital environment
- Ensuring a good **standard level of health**
 - Creating informed patients through education and communication
 - Promoting everyday health
- Considering **systematic and top-level** changes
 - Funding and privatisation
 - Ensuring the system is efficient

Management summary ii.

Education

- Offering support with **extra and future learning** for 16-18 year olds
- Supporting children with **SEND**
 - Increasing the number of teachers, particularly those with specialist training
 - Considering the school environment
 - Championing positive treatment and respect
 - Offering alternative ways of learning
 - Support to parents
- Ensuring that teachers, parents and students can all work together to **improve attendance** whilst supporting children
- Considering **financial support**
 - Reducing everyday costs for parents, subsidising enrichment activities, and offering free travel to students
 - Increasing funding for teachers, training, and higher education
- **Diversifying the curriculum** for children and increasing access to, and affordability of, **adult education courses**
- Considering changes to school functionality and approaches to student experience **to improve wellbeing**
- Helping people get the most out of education by providing **resources** for parents and **improving access** to schools and education

Housing

- Improving **social housing**
 - Providing more
 - Affordable housing
 - Offering needs-specific accommodation
- Supporting (private) **renters** and those **buying a home**
- Improving the **quality of housing** and placing more **restrictions on HMOs** and buy-to-lets
- Improving **access to information and services**
 - Non-digitally
 - Language inclusivity
 - Information in schools

Management summary iv.

Good quality employment

- Improving **disability awareness** through training to improve understanding
- Considering **flexibility and adjustments**
 - Increasing accessibility through flexible working patterns
 - Making employment accessible for those with disabilities
- Prioritising **employee wellbeing**
 - Reasonable expectations of employees taking disabilities into account
 - Employee protection
- Improving **job opportunities** through job production, volunteering and making it easier to access information on employment services
- Helping people **get into the workforce**:
 - Improving training offers on the job, reducing the necessity for experience and qualifications
 - Improving wages and support for associated costs for people to go to work

Local political support

- Increasing **availability** of political representatives
 - Being present and visible in the community
 - Being contactable and responsive
- **Involving the public** in decision-making
 - Improving engagement with communities with more opportunities for them to get involved
 - Improving education around politics
- Show evidence of **taking action** on important issues
 - Better sharing of information
 - Better understanding of/ focus on community issues
- Improving the local **political system**, being **more inclusive**, and increasing **trust** in local politicians

Future research recommendations

Areas not sufficiently covered by conversations with the public at this stage of the research

Healthcare:

- Community centres as information shops
- Callback slots for GP phone appointments
- Information on dementia
- Specific facilities for calm quiet spaces in hospitals

Housing

- How social housing could better support single men
- Specific channels/ methods for sharing information with those who have been made homeless

Who we engaged with

- There is a generally good representation from all age groups, the highest response rate being from those aged 35-54
- Just 17% of respondents are carers whilst 83% are not
- A quarter of respondents have a disability, whilst 75% do not



Healthcare

166 respondents made comments on 'healthcare'

% indicates the proportion of respondents mentioning each topic as a percentage of the 166 commenting on 'healthcare'

Healthcare: conversation starters



Accessibility of

information and support

Alternatives to and accessibility of smart technology



GPs and local healthcare services

Improving access and getting the most out of them



Hospital facilities for calm quiet spaces

Patients with mental health issues and children with SEND



Mental health and wellbeing

Accessing information and receiving early-on help



NHS dentists

Access and appointments



Dementia

Information and support (for carers)

Booking appointments 7%

- **Smart technology needs to be improved to make booking easier**
 - Online system can be confusing, difficult, and time-consuming
 - Calling at 8am to book appointments is frustrating and ineffective
- **There should always be an option to speak to someone**
 - Alternatives need to be offered for those who are not as technologically advanced
 - Help should be on offer for anyone struggling to book appointments or complete forms
 - For example, neurodiversity may make it hard to fill out complex or long forms

*“The ability to **book** GPs/ local healthcare services/ **appointments virtually** rather than have to call up bang on 8am and get through the gatekeeper receptionist.”*

*“Online bookings segregate those who cannot navigate internet, there should be **someone who can help them on the counter** to book online GPs/ local healthcare services/ appointments.”*

Attending appointments 10%

- **Face-to-face appointments should be on offer to all**
 - Home visits for those who need them
 - Cannot always diagnose issues correctly over the phone
- **E-consults need to be better**

*“The digitalisation of services is a massive barrier. **Not everybody either can or wants to access** health services online.”*

Mental health and wellbeing: specialised care

Specialised care 26%

- **Need more professionals specifically trained in mental health issues**

Including: complicated mental health, substance misuse, ADHD, follow-on from CAMHS

- To enable intervention before people are really struggling/ the situation becomes unmanageable
- To reduce the waiting list for treatment like therapies
- Better training will lead to a better understanding of mental health for a more empathetic approach to reduce stigma and judgement

- **Ensuring care is tailored to individual needs**

- E.g. by bringing back matrons

- **Being able to request appropriate healthcare professionals**

- E.g. female doctors for female patients to better identify issues/ be more approachable



*“Mental health and substance abuse can coexist - need to treat those with both as there’s a **stigma** around those people.”*

*“Discrimination against mental health + homeless, they don’t get seen quickly if more complicated mental health problems. Only the extreme is when people get seen or get beds in centres - **shouldn’t have to get to the extreme.**”*

*“Women’s health, postnatal support, **specialist support around women’s health**, independent medical advocate who isn’t the GP.”*

Mental health and wellbeing: daily health



Buckland Community Centre – Buckland Wellbeing Walk

Promoting daily health as preventative healthcare

6%

- Encouraging people to be active to maintain everyday health
 - Promote active travel, like walking and cycling, for general wellbeing
 - Encourage children to ‘get outside for fresh air’
- Utilise families and communities
 - To support everyday mental health
 - To combat isolation and loneliness
- Improve healthcare education to ensure residents have a base level of knowledge

*“Help old people to be **less lonely**. More coffee mornings and opportunities for people to mix.”*

*“More education so **people can look after themselves** where appropriate.”*

Mental health and wellbeing: manner of staff

Manner of staff 10%

- **Promoting empathy, reducing stigma and judgement** for mental health issues and substance misuse
 - At all staff levels, down to receptionists
- **Understanding and attentiveness**
 - It may be difficult for patients to frequently repeat their stories
- **Listen to patients**
 - To ensure their care is personal to their needs
 - Support for female patients who feel they have been mis- or under-diagnosed
- **Taking all health problems seriously**, no matter the issue

*“Focus on **personal care** not just on conditions.”*

*“Receptionists be more **understanding and sensitive** to the people you’re talking to.”*

*“Women have to **fight for diagnosis/treatment**, told it’s a women’s problem.”*



Community Kettle, Cosham – Coffee Morning

GPs/ local healthcare services: healthcare professionals

Need more healthcare professionals

○ Recruiting and education

- 13% Make studying for healthcare professions free/ cheaper, more apprenticeships
- Raise wages and quality of work environment to attract more people
- Better training and upskilling (e.g. for pharmacists)

○ Employ more staff

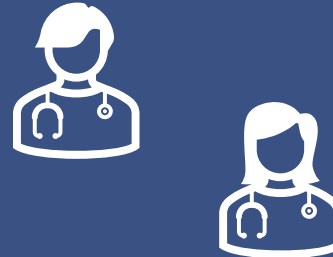
- 24% Qualified doctors, GPs
 - In GP surgeries
 - In hospitals

○ Better retention of staff

- 9% Improve working conditions
- Improve pay
- Listen to staff feedback about how to improve

○ Specialists

- E.g. in: cancer, surgeries, women's health/postnatal support



*“Increase employment by **making health care courses free and cheaper to study - more apprenticeships.**”*

*“**Waiting lists are too long** especially for mental health and specialised medical care (surgeries etc) and availability of GPs/ local healthcare services/ appointments are too scarce it's difficult to get an appointment with anyone without **having to wait a month.**”*

Increase accessibility of doctors

6%

- **Need to be able to see doctors** – have one in each GP surgery, rather than just nurses, or receptionists triaging patients

*“We need a **regular doctor.** We're being triaged every time we see a doctor which is inefficient and frustrating.”*

GPs/ local healthcare services: quality of care

Improving inclusivity 5%



- **Overcoming language barriers**
 - Interpreters, including for 111/999 phone lines
- **Knowledge of different body types/ “not just White bodies”**
- **Women’s health**
 - Improving attentiveness and knowledge so that women never have to fight to get a treatment/ diagnosis
- **Accessibility**
 - Take physical injuries and disabilities more seriously

*“Better curriculum focusing on **diseases for non-white people**. More translators for natal units with ESL parents.”*

*“Women are treated unfairly, **there’s more barriers to women receiving care than men**. Should be able to request a female doctor or nurse as they are more likely to appreciate women’s issues and not just brush them off.”*



At home care/ continuation of care 6%

If received treatment (e.g. in hospital), care needs to continue afterwards or when they get home

- Physical injuries/ disabilities (e.g. surgeries)
 - Actual help to get home
 - Duty of care once released – ensuring elderly or homeless have somewhere to go
 - Post-surgery care
- Mental health care
 - Support after receiving CAHMS

*“When I broke my pelvis I was given no help with my mobility after I got of hospital. **There was no aftercare**. There was no discharge plan.”*

Community engagement

- Official -



Eastney Community Centre – Community Bingo



Landport Community Centre – Community Coffee Drop-In

Creating informed patients 8%



- **Accessing information**
 - Ensuring people know where to go
 - Making information easier to find
- **Accessing support**
 - Knowing what support they can access
 - Knowing what type of support is best for them
 - Knowing when to see a GP and when to access other forms of support
- **Basic healthcare education**
 - Empowering people to improve their base level of health through knowledge
- **Informing patients about their conditions**
 - Keeping them up-to-date and 'in the loop'

*"We need people to know that **they don't always need to speak to a GP**. We need to educate people that it's not only GPs who have specialisms in the issues they are facing."*

*"Too many places to go to, **it gets confusing**, we expect too much from health services. Not enough information for people who don't use smart phones etc."*

*"If you don't know who to get in touch with it can be difficult to get help, so making things easier for people to **know who to turn to** would be great."*

*"Everything needs to **be more transparent** - tell people everything that is going on with them."*

Improving routes of access

- **Extend opening hours to later in the evening**
 - Walk-in centres and hospitals (e.g. St Mary's) – reduce pressure on Queen Alexandra in the evenings
 - GP surgeries – improve ability to find suitable appointment times
- **Offer drop-in sessions/ appointments**



12%

Increasing number of healthcare centres

- **Improving experience of care**
 - To reduce waiting lists
 - To improve facilities on offer
 - e.g. more mental health clinics
- **Improving geographical accessibility**
 - More local facilities so people don't have to travel far
 - Smaller hospital services
 - Localised access to community nurses
 - Community spaces
 - Mobile NHS services
 - More outreach services

“A hospital in Southsea.”

“More mobile services like the breast cancer screening van.”

“More outreach for minority communities informing them of healthcare initiatives.”

Community engagement

- Official -



Paulsgrove Community Centre – Smile Café



Paulsgrove Community Centre – Pulmonary Rehab
Exercise Group

NHS dentists 8%



- **Low availability**
 - Need more NHS dentists in the city
 - Increase NHS funding for dentists
 - Make all dentist work free/ reduce number of private dentists
- **Access**
 - Make easier to access
 - Make easier to make appointments
- **Improve ease of finding specifically NHS dentists**

“Higher national insurance contributions instead of the cuts the last government made to try.”

“Difficult to find a dentist that is NHS- had to go through a university one.”

*“Crisis for dentists, not many NHS dentists so bring back more **NHS funded dentists.**”*

*“Hospitals don’t accommodate **SEND** needs especially accident and emergency.”*

*“Make things **a lot quicker.** Drug users can't wait for hours for things to happen.”*

*“Waiting in a **full waiting room** triggers some people.”*



Hospital facilities for calm quiet spaces 3%

- **Special Educational Needs and Disabilities**
 - Generally need more provisions for those with SEND
 - Better support in hospitals according to needs
- **Make sure waiting area and time is appropriate**
 - For those in mental health crises who may have triggers
 - For those dealing with addiction

Other conversations: systematic and top-level changes

Funding 16%

- **Increase funding**
 - Spend more money on GPs
 - Increase money to the frontlines, rather than management
 - To areas in demand e.g. mental health
- **Assess current spending**
 - Increase tax contributions
 - Stop privatising parts of the NHS
- **Involve public in decision making about funding**

“Return money to the NHS to the levels before. Stop selling off bits of it.”

*“Far more funding for the NHS, **raise taxes** on wealth and assets to fund it.”*

Privatisation 2%

To enhance effectiveness

- **Make some parts of NHS private/ charged**
 - e.g. cheaper medicines
 - Operations
- **Only offer NHS for UK-born citizens**

“An end to end social and healthcare system.”

*“The speed of GPs/ local healthcare services/ appointments - **no one in need should be waiting 10 hours** to get help.”*

Creating a more efficient system 16%

- **Reducing wait times needs to be a key priority**
 - Having to wait longer can cause more issues
 - Issues with getting prescriptions on time
- **Accessing healthcare**
 - Viable alternatives to visiting hospitals
 - More avenues to speak to professionals
- **Better management**
 - Less top-level management; redirect funds to where needed
- **Holistic and fully integrated system**

Community engagement

- Official -



Palmerston Road, Southsea



The YOU Trust



Cycling Without Age



Education

132 respondents made comments on 'education'

% indicates the proportion of respondents mentioning each topic as a percentage of the 132 commenting on 'education'

Education: conversation starters



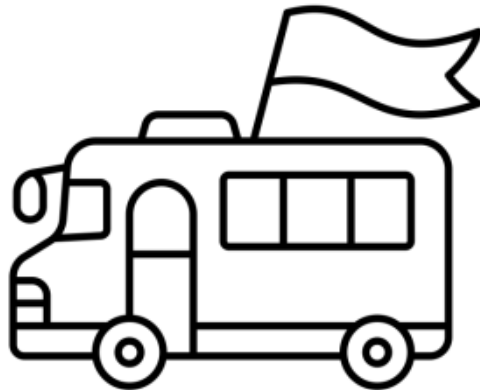
Young people (16–18-year-olds)

How can they be supported with information on education?



Attendance

Support for parents to improve attendance



School costs

Support for parents to pay for holiday clubs, school trips, courses, and bus fares



SEND

Support for families and children with SEND

16-18-year-olds: information and learning

Extra learning 7%

- Vocational training opportunities
 - Practical apprenticeships
 - e.g. woodworking
- Should try to keep young people in school for longer
- More support for those who are over- or under-achieving

“Extra learning for 16 to 18s. Keep them **in school longer.**”

“Uni is expensive, **reduce tuition fees**, more **degree apprenticeship** because you get the experience and qualifications.”

Future learning 7%

- Apprenticeships
 - Encourage more to explore vocational routes, not just university
- Career advice
 - Encourage social care careers to boost uptake
- University
 - Help students to get in
 - Reduce fees to make more accessible
 - More degree-apprenticeships
 - Gives education and experience



Landport Community Centre – EnableAbility Careers Support

Support from school staff 21%



- **Generally need more teachers**
 - Hard for teachers to manage 30 students when some have additional needs
 - More teachers – increase teacher to student ratio
 - Need more learning assistance/ mentors/ designated staff for SEND/ learning difficulties
 - Enough staff to provide 1 to 1/ individual support
- **Specialist training for staff**
 - To improve knowledge and tailored support
 - Training for spotting neurodiversity in children – to speed up diagnoses
 - Need to increase budgets for staff training
- **More research into how staff can support additional needs**
 - e.g. neurodiversity, learning difficulties, dyslexia
- **Assign time and resources to assess children** who may have additional needs

*“Many children aren't learning to their full potential, either because they're **distracted** by neurodiverse peers or because those peers **aren't receiving the support they need** due to the lengthy and challenging process of obtaining a diagnosis. Additional funding is needed to help teachers manage a class of 30 students with varying needs.”*

“More support for staff to be able to work with kids with specific needs.”

*“More realistic **tailored support** in schools.”*

School environment 4%

- **Create safe and welcoming environment**
 - Sensitive to varying needs
 - Support in settling in
 - Tackling bullying
- **Reasonable adjustments**
 - Non-mandatory attendance
 - Without proper care, school days can be more difficult for neurodiverse children
 - Reduces pressure on child and parents
 - Staggered timetables
- **School structure**
 - Smaller classrooms to improve quality of learning
 - More special needs schools



*“I don’t believe in person attendance should be mandatory for everyone considering the **lack of neurodiverse care and awareness** in education, it’s difficult for people struggling to even want to go.”*

*“Make more effort to **settle in neurodiverse children** into new environments and school.”*

*“Focus on the **specific needs of the individual** not just the diagnosis.”*

*“More **awareness for other kids in school** – teach kids about non visible disabilities.”*

Treatment and respect 3%

- **Staff to student**
 - Listen directly to students
 - Focus on individual needs of children, not making assumptions
 - Being adaptable and tailoring support
- **Student to student**
 - Teach children about non-visible disabilities to increase understanding
 - No tolerance for bullying

SEND: learning and out of school support

Different ways of learning 7%

- **In the classroom**
 - Broader styles of educating
 - Accommodate children with additional needs or learning difficulties
 - Be adaptable
 - Tailor to neurodiverse needs
 - More 1 on 1 teaching for those who struggle
- **At home education**
 - To help those who do not thrive in classroom environments
 - Support parents to find qualified teachers who offer in-house sessions

*“Curriculum isn’t suited for every child - **not every child can sit in a classroom.** Needs to be broader to accommodate all children - more resources to do different types of learning”*

*“Qualified english and maths teachers that are willing to do **in house teaching** for those who are unsettled in a class environment.”*

*“More funding and training for **SENCOS**, a lot of them **won’t work with parents well.**”*

*“**Teach parents how to help our children with learning disabilities.**”*

Parents 6%



- **Involving parents**
 - Keeping them informed
 - Working with them to better support children and find out what support they need
 - SENCOs need more training on this
- **Supporting parents**
 - Make support free
 - Providing information for parents
 - Out of home provisions e.g. learning at home
- **Guidance for other parents**
 - How to support children with disabilities

Community engagement

- Official -



MAKE Aldingbourne Trust – Craft Drop-In



Eastney Community Centre – Testlands Summer Holiday Education

Be more understanding/ relaxed 2%

- **Combine with neurodiversity support**
 - Shouldn't be mandatory due to lack of support in school
- **Mental health issues**
 - Sensitivity to how mandatory attendance can impact mental health
- **More relaxed about sickness**
 - Trust and allow parents to know when their child is too unwell to attend schools



*“Attendance is not **communicated to parents** properly, need more teacher and parent communication in order to support children.”*

*“If your child genuinely has **mental health issues**, sending them into school when they are feeling so desperate makes you feel worse as a parent, but you **have no choice now** or you will be fined and eventually sent to court, yes children need to be in school but it's about **making that environment feel safer** and they don't at the moment.”*

Better approach to improving attendance 3%

- **Schools should be stricter on truanting**
- **Better communication with parents**
 - Teachers should be contacting parents when students have unauthorised absences

Costs for parents and school funding

Financial support 8%

- **Everyday/ essential school costs**
 - Stationery
 - School should provide these
 - Uniform is expensive
 - Bring down cost
- **Enrichment activities should be free or subsidised**
 - Clubs/ after school activities
 - Could be volunteer run
 - School trips
- **Help with transport costs**
 - Free bus travel

*“School **uniform is too expensive**, school should provide the children with **pens and pencils** instead of children needing to purchase their own.”*

*“**Fully funded school trips** offered to all pupils unless their behaviour would compromise a school trip.”*

*“Train and pay teachers better. **Attract the very best people to teach.**”*

*“**Budgets for staff training** - especially secondary schools, staff don’t support LD properly, they aren’t trained and this causes damage.”*

Funding

- **For teachers**
 - Attract and retain more teachers
 - To reduce class sizes
 - Attract better qualified teachers with higher salaries
 - To improve education quality
- **For training and specialised care**
 - SEND resources and knowledge
 - Mental health in children – help with stress and anxiety
 - Supporting vulnerable children (who may ‘act out’)
- **Higher education**
 - Reduce/ remove tuition fees
 - More funds for vocational training

Improving educational offer

Diversifying the curriculum

○ Teach more everyday life skills in schools

7%

- Basics of the household
 - Cooking, cleaning, repairs, sewing
- Money management
- Social skills
- *How to learn, not just what to learn*

○ Subjects/ clubs

17%

- Learning clubs
- Forest school
- Diverse histories
- Ensuring that creative and artistic subjects are of equal importance as STEM
- Teaching more about religion
- Out of school activities and clubs

*“Don’t under value **life skills** and stop everything being academic.”*

*“Work with local businesses, independent schools and local communities to use resources available to **enrich state education.**”*



North End library – Craft Drop-in

Adult education 7%

○ Access

- Increase the amount and type on offer for older students
- Affordability
 - Make education at colleges free/ subsidised for those over 25
 - Make education free for all

○ Promote and encourage uptake of courses

○ Digital skills

- Improve access to digital hubs for older residents

Student-focused

○ Reduce stress

6%

- Exams
 - Less focus on targets
 - Removing unnecessary ones
 - Removing for young ages
- Uniform requirements
- Less pressure from Ofsted
- School therapists and wellbeing coordinators

○ Improve behaviour

8%

- Better discipline in schools
 - Support teachers to enforce rules and appropriately discipline students
- Tackle bullying
 - Racial bullying
 - Bullying of neurodiverse children

○ Inclusivity

2%

- Language - make easier to access English language lessons
- Integration programmes
- Teaching tolerance and celebration of other cultures

“Less focus on exam targets for primary schools kids and more of a focus on making sure they holistically reach targets for reading writing arithmetic.”

*“More positive spin on immigrant children - opportunities for these children to **share about their culture.**”*

School setup/ functionality 15%

○ Spaces in schools

- Communal learning spaces
- Mobile libraries
- Safe spaces

○ Times

- Start later
- Open schools in evening for children to access

○ Smaller class sizes

○ Ban phones

Other education-focused conversations

Parents 4%

- **More support and resources for parenting**
 - “Teach parents to be better parents”
 - Knock-on effects for behaviour and attitude in school
- **Support for educating**
 - Education should start at home
 - Help parents understand how to educate their children
 - Resources

Accessing schools and education 6%

- **End catchment areas**
 - Allow parents true choice of schools
 - End postcode lottery
- **Financial access to education**
 - Should always be free
 - Against private schools
 - Unpaid carers should not lose their allowance when studying full time
- **Build more schools**



Eastney Community Centre Café – Drop-in



Housing

123 respondents made comments on 'housing'

% indicates the proportion of respondents mentioning each topic as a percentage of the 123 commenting on 'housing'



Social housing

How could it work better for all kinds of local people and families?



Information and housing services

Better access, including non-digital and for those who are homeless

Social housing: quantity and affordability



Providing more housing 37%

Building more (social) housing is the most requested solution from residents

- **Housing crisis in Portsmouth**
 - There are not enough houses for everyone
 - Social housing stock needs to be increased
 - There is a long waiting list for social housing
- **Repurposing buildings**
 - Utilise existing, empty and/or abandoned buildings to provide housing

*“Build more houses and **more accessible for the homeless** eg. a gov work program where they receive free accommodation.”*

*“I would focus on implementing policies that **promote affordable housing development** and provide support for first-time homebuyers. By creating more affordable housing options and offering assistance programs, more people could have access to suitable housing.”*

*“Everyone needs a home whoever they are. **Build more properties.** Use old properties to offer more accommodation.”*

*“Looking around Portsmouth there are so many **abandoned buildings** that have been untouched for years and could be an effective way of housing many people.”*

Affordable housing 16%

Many residents emphasise that the city needs, specifically, more affordable housing

- **More council housing**
 - To help those struggling afford a place to live
 - Programs to offer free/ low-cost accommodation to get people back on their feet
 - Cheaper council housing
- **More affordable rental properties**
- **More affordable properties to purchase**

Social housing: type of accommodation

Needs-specific accommodation 15%

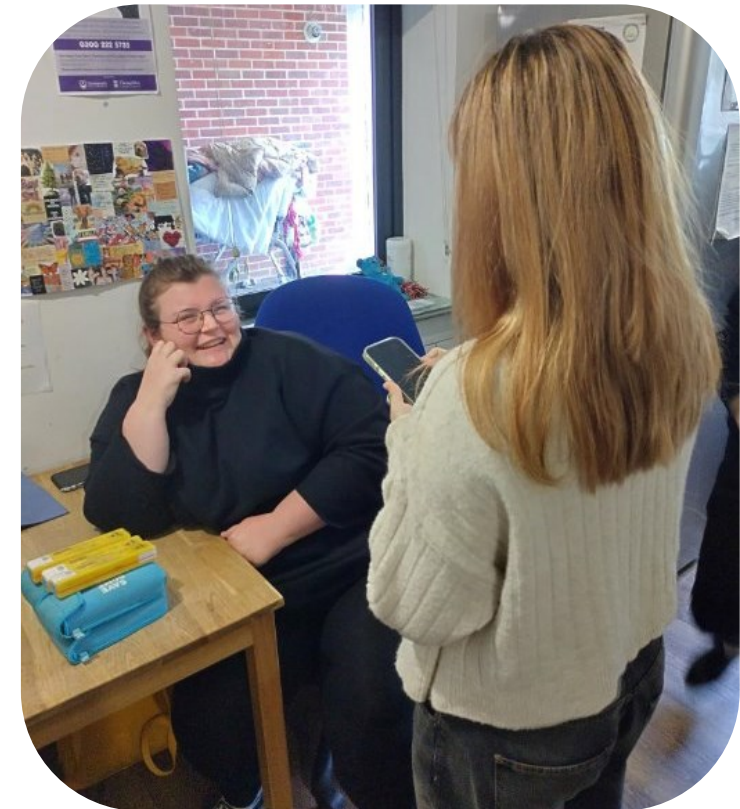
Not just about having enough social housing, but about having the right type of housing to support varying needs

- **Vulnerable people**
 - Mental health issues
 - Addiction
- **Families**
 - To accommodate larger families
 - Reduce overcrowding
 - Accommodate needs of those with SEND children
- **Street homeless**
 - Emergency, temporary or easily accessible accommodation to get people off the street
 - Knock-on improvements for health and wellbeing
- **Disabilities**
 - Long waiting list for those with specific disability-related needs
 - Physically disabled
 - Learning difficulties
- **Elderly**
 - Suitable accommodation for elderly needs

“Recovery Hub works well for me. It would be good if probation, the council and housing worked together better.”

*“More available accommodation to meet their **support needs**. Mental health housing.”*

*“There are not enough places for **people with learning difficulties** to live. The waiting list is five years for people with learning difficulties to find a home.”*



Kingsway House – Society of St James Rough Sleeping Hub

(Social) housing: support for residents

Support for (private) renters 16%

- **Financial**
 - Rent controls and caps for affordable properties
 - Assistance with required deposits and admin fees
- **Landlord regulation**
 - End no-fault evictions
 - Improving quality of properties (see next slide)
- **Maximising properties on offer**
 - Stop affordable properties only being available to students

*“It's so **difficult to get on the housing ladder**. The sums of money now needed as a down payment to own your own home are completely unrealistic.”*

*“Probably make it easier for working families to get help with getting a home and put in a **stop cap on rent increase** within the private sector.”*

*“If you have to **no fault evict tenants** then you cannot turn that property into a HMO or Airbnb for two years you can only use it yourself.”*

Support for buying a home 8%

- **Affordability**
 - Lower deposits
 - Regulate affordable housing developments
- **Programs**
 - Help to save for deposits
 - Help-to-buy
- **Guidance and support for first time buyers**
 - Particularly for young people

(Social) housing: rental properties

Improving overall quality of housing 16%



- **Social housing**
 - Not just *more* social housing but more *good quality* social housing
 - New homes should be built to a better property
 - Better process and efficiency of repairs
 - Quality of insulation and heating processes
- **Private sector**
 - Enforce landlords to repair properties to sufficient standards
 - Encourage landlords to update and refresh properties
 - More penalties for low quality housing
 - New housing needs to meet regulations
 - e.g. Passivhaus standards

*“They don’t repair things in council housing. Improve the **quality and maintain it better.**”*

*“Fine landlords for not providing **accurate care of their properties** being rented out.”*

“Ban third+ homes and heavily tax second homes.”

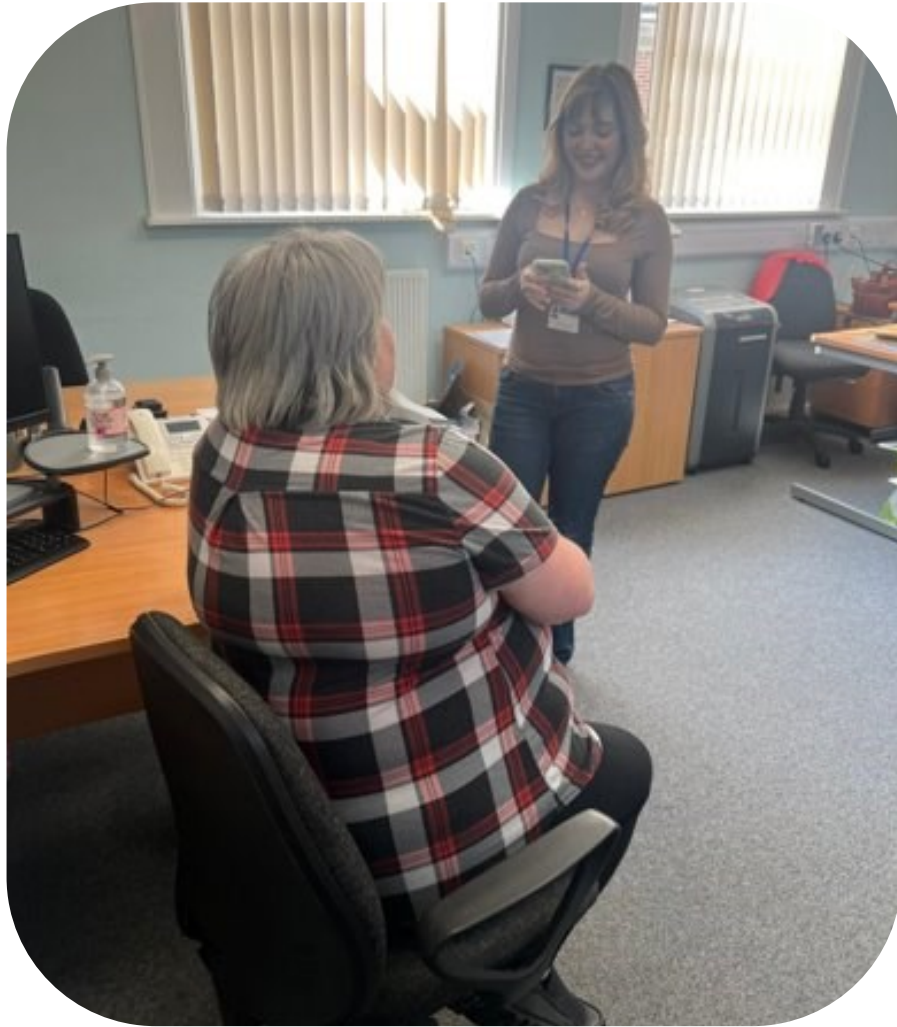
*“Get rid of HMOs as they aren’t maintained by the council and **purely to make money.**”*

Target HMOs and buy-to-lets 9%

- **Rentals shouldn’t be a profit-making process**
 - Restrict number of homes individuals can buy to let, to help bring property prices down
 - Housing developments should be affordable/ not profit-based
 - HMOs are solely to make money
- **HMO restrictions**
 - Stop HMOs altogether
 - Restrict the number allowed in any one area
 - More regulations on HMO landlords from the council
 - Crack down on illegal HMOs

Community engagement

- Official -



Two Saints Portsmouth Resettlement Office



Society of St James Recovery Hub

Access to information and services



Non-digital 4%

- **Online resources are not accessible to all**
 - Not everyone knows *how* to use IT or the internet
 - Not everyone has *access* to IT or the internet
- **Information and services need to be more accessible**
 - Cannot only exist online
 - Process and applications need to be simplified if online
 - Have more people available to talk to
 - Outreach so people know where to go

*“It’s very difficult for someone who is **homeless and has no connection to anyone or no digital access** to understand how they can get themselves out of this situation (...) more effort should be put into making resources more accessible.”*

*“Guarantee **interpreters** and resources for social housing for people with limited English.”*

Language inclusivity 2%

- **Language should be simplified on applications and forms**
 - Easy to understand English
- **Interpreters required**
- **Resources need to be accessible to those with English as a second language**

*“There’s also not enough support for these people as we aren’t **taught how to understand housing, bills etc in school.**”*

Early intervention 2%

- **Start sharing information in schools**
 - Teach housing money management to reduce likelihood of homelessness
 - Increase awareness of what support may be available



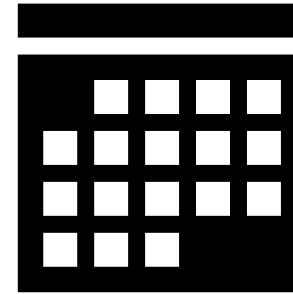
Good quality employment

98 respondents made comments on 'good quality employment'

% indicates the proportion of respondents mentioning each topic as a percentage of the 98 commenting on 'good quality employment'



Disability awareness training
in the workplace



Flexibility and adjustments
To help more people get into work

Disability awareness: understanding

Training to improve understanding

11%

- **Of disabilities**
 - Including non-visible disabilities
 - Neurodivergence
 - Learning difficulties
 - Physical disabilities
- **Support for companies**
 - Helping employers understand what support is on offer for employees with disabilities
 - Increase job opportunities through knowledge and confidence that they could be supported
- **Of mental health and addiction**
 - Ability to implement adjustments where needed
 - Finding jobs that work for them too
 - Reducing stigma
 - Increasing empathy through knowledge
 - Outreach programmes

*“People don't understand **disabilities that they can't see**. Some people with certain disabilities can do fantastic jobs in lots of different areas if they are **properly understood and properly supported**.”*

*“People turn you away from a job as soon as they find out you've got a learning difficulty. Training should be included in jobs. Employers need to know **they can access support** for people with learning difficulties.”*

*“Less stigma. Get people to **understand addiction and criminal histories** better.”*

Flexibility and adjustments: accessibility

Working patterns 10%

- **Offer more flexible working to all**
 - Hybrid and remote working
 - Four day working weeks
 - Results driven rather than strict 9-5
 - Not all are suited to the 9-5
- **Adjustability and leniency**
 - Be more structured around a person's capabilities
 - Allow adjustments to help people with varying needs work more efficiently
 - Longer breaks if needed
 - Helpful for parents/ single parents too
 - Allow flexibility in working times for school pickups

*“Australia introduced 6 month/year contracts for adults with different needs where they could work for that time period whilst **shadowing a colleague** - then decide whether they get the job at the end - this gives them work experience.”*

*“24% of the UK has a disability, yet no change has been made in our working hours to support and accommodate this. Working hours should be a lot be **lenient** and should be **specifically structured around the persons capabilities.**”*

Making employment accessible 9%

- **Schemes to help people with disabilities get jobs**
 - More places like MAKE that employ those with disabilities
 - Work shadowing schemes
 - Incentives for businesses to have a more disability-representative workforce
- **Help with admin for jobs**
 - Writing CVs
 - Interview coaching
- **More job opportunities for those who struggle with the 9-5 structure**

Reasonable expectations in the workplace 7%

- **Those with disabilities/ mental ill health**
 - Job roles should only cover what they are capable of
 - Appeal to their strengths
 - Ability should be determined by the employee
- **Wellbeing over production**
 - Reduce expectations of long working hours to complete tasks
- **Pay should reflect...**
 - Required experience and qualifications for the role
 - Overtime

*“The job itself should also take into account everyone’s **capabilities.**”*

*“Reasonable expectations in job applications, is a degree required? And if so, **raising wages.**”*



Portsmouth Central Library Café – Drop-In

Employee protection 4%

- **End zero-hour contracts**
 - Negatively impact mental health
 - Unfair to the employee
- **Better job retention and opportunities for progression**
- **Ensure minimum wage is liveable**

*“Empower **trade unions** and end zero hours contracts.”*

Need more jobs 6%

- **Attract more businesses to the city**
 - Offer better business rates
- **Support existing businesses**
 - Many are closing down
 - Number of jobs opportunities on offer are decreasing

Volunteering 2%

- For those not needing to work
- For younger people to gain more experience

*“**Knowing where opportunities** are when not linked to any service or communities is difficult - make info more accessible with **newsletters and poster.**”*

*“Make it easier for **people with disabilities**, I have to go into the centre every 2 weeks even though I’m disabled.”*



Landport Community Centre – Co-op Employment Guidance

Availability of information on employment services 11%

- **Make easily findable/ contactable**
 - More advice centres
 - Helplines
 - Advertisement
- **Ensure accessibility**
 - Need to be more accessible for those with disabilities
- **Better communication for those who don't know where to go**
- **Career support**

Helping people into the workforce

Experience and training 19%

- **Improve workplace training**
 - Programmes
 - Continue training and upskilling
- **Collaborative training from local businesses**
 - With colleges
 - Online learning resources
- **Increase opportunities by...**
 - Reducing necessity for experience
 - Hard to get experience if no one will give you a chance without it
 - Reducing necessity for qualifications unless required
- **Work experience**
 - Particularly for low-income areas
 - Break the cycle of poverty

*“Introducing **work experience** for kids that are in high poverty areas.”*

*“Teach people **how to learn.**”*

*“I’d say a key thing would be to partner with local businesses, **colleges and online learning platforms** to provide affordable, flexible training programmes to the long term unemployed.”*

*“More **training on the job** rather than qualifications.”*

*“Poorer people slotted into unskilled jobs, **train them with experience** so they can get better jobs.”*

Through education 13%

- **In schools**
 - Teach workplace applicable skills
 - Build motivation to work in students
- **Qualifications**
 - Make it easier and cheaper to gain qualifications
 - e.g. cost of attending university
 - Translation of relevant foreign qualifications to reduce duplication of training

Helping people into the workforce, continued

Financial support

○ Higher living wage

10%

- Cost of living is higher
 - Should reflect inflation
- Health and wellbeing are being sacrificed due to limited income

○ Costs to be able to work

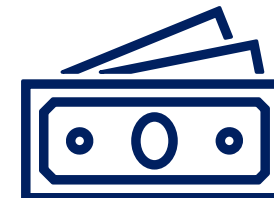
8%

- Travel costs
 - Bus passes
- Childcare costs for parents

“Due to the increase in hyperinflation people are unable to meet needs and wants (which are also necessary in being healthy and happy) in fear of being homeless. People who aren’t as well off will do things like not put their heating on in the British winter or miss meals to make rent. This should not be a way of living, you should earn enough to live even on minimum wage.”

*“Jobs need to pay more and **childcare needs to be more affordable.**”*

*“**Travel passes** no matter what age as this stunts a lot of people who have to travel to jobs.”*



Community engagement

- Official -



Pathway Support Group – Fratton Community Centre



Community Kettle, Cosham – Craft Session



Local political support

82 respondents made comments on 'local political support'

% indicates the proportion of respondents mentioning each topic as a percentage of the 82 commenting on 'local political support'

Political support: conversation starter



Local MPs and councillors

Be more available

Involve public in decision making

Show they're taking action

Present and visible in the community 29%

- **Physically**
 - People may not even know who their councillor is
 - Allow residents to put faces to names
 - Need to be visible on the everyday scale, not just at big events
 - Walk about in the community and be approachable
 - In all areas of the community to reach variety of people
- **Online**
 - Increase online presence to engage with people
 - Media needs to be interactive to improve engagement

*“Do people know **who** their politicians are and **how to contact** them?”*

*“Not many **opportunities to go speak to them** - would want somewhere accessible in order to go talk to them .”*

*“Politicians only appear when big events come up, not here **every day**. They need to be **more accessible**.”*

*“Get people **meeting their local politicians** more often. We need to be able to match faces with names.”*

*“Make the way we engage with politics more video based and **interactive media** rather than all being written.”*

More responsive/ contactable 18%

- **How to contact**
 - Inform people on how to contact their local politicians
 - Make it easier to contact them
 - Accessibility
 - Increase their availability
- **Responsiveness**
 - Respond to people when they get in touch
 - Be better at listening to people properly about issues raised

Involve public in decision-making

Improve engagement with communities

32%

- Increase opportunities to get involved
 - Meetings in community space
 - Invite public to discuss issues
 - Drop-in events
 - Door knocking to talk to residents
 - Should be on councillors to initiate engagement
 - Work with charities
- Education
 - Schools and outreach programs
 - Help people understand how politics impact their lives
 - How they can get involved in local politics
 - Teach people how politics work

*“Community spaces for people to **meet their politicians** and **work together with them** on decisions.”*

*“Have politicians regularly **door knock** people and ask them what one thing would they would like fixed and then fix it.”*

*“More local events from politicians. **Drop in sessions** to make politics more accessible.*

*“People need to be **helped to understand** the link between politics and their everyday lives.”*



St Margaret's Community Church Pantry

Sharing information 7%



- **Their work**
 - What their policies are
 - Manifestos
 - Campaign literature
 - What work they are already doing
 - How they are implementing changes suggested by the community
- **The community**
 - Things going on in the community and how to get involved

*“Sometimes politicians are not properly educated around poorer people and their plights, they **don’t fully understand.**”*

*“A **higher wage** for councillors to enable people from **lower income backgrounds** to devote their time to it without it clashing with employment.”*

*“Not enough information on what **work they do.**”*

*“Inform people on **what’s happening.**”*

*“Further rules on campaign literature and manifestos. They must contain **actual policies** and not just character endorsements from more famous MP’s or manifestos that are just ‘I’m not X party.’”*

Understanding of/ focus on community issues

4%

- **Need to be better educated on issues**
 - Listen to those who have relevant experience
- **Real life experience/ relatability**
 - Should live in the wards they represent
 - Increase funds to allow a more diverse array of people to become councillors
- **Prioritise improvements to community, rather than winning elections**



Carers Centre, Southsea – Cross Cultural Cooking Group



Paulsgrove Community Centre – Drop-In

Improvements to the system



○ Functional amendments

7%

- Regional mayors
- Smaller areas of responsibility
- Have politicians/ councillors in term for longer so they have a chance to get things done
- Voting
 - Proportional representation voting systems
 - Make voting mandatory

○ Raising trust in politicians

15%

- Being more involved with the public
 - Visible and engaging at the community level
- Do not always feel genuine and relatable
- Improving trust will increase likelihood to vote
- Accountability
 - Enforcing codes of conduct
 - Deliver on promises made to the public

○ Improving inclusivity

4%

- Less discrimination
- Higher focus needed on tackling inequality
- Accessibility in the system for people with disability

*“Strictly **enforce code of conduct** for councillors, any discriminatory behaviour bans you from standing as a councillor. Ensure that anything local politicians say in private or public can be used against them for the code of conduct.”*

*“It’s all **performative.**”*

*“I feel shut off from it all because **I think they all lie.**”*

*“I also believe political candidates should be more involved with the public, this will help them **understand what people actually want** and need and also **raise trust** in the people voting. This will then increase the amount of people voting as a lot of **young people have realised that no one running is trustworthy** or able to prove they can do what they say.”*



Future research

Based on conversation starters extracted from stage one of the research, the following areas could benefit from further exploration:

Healthcare

- Community centres as information shops for local support and groups
- Callback slots for phone appointments
- Information on dementia
- Specific facilities for calm quiet spaces in hospitals

Housing

- How social housing could better support single men
- Specific channels/ methods for sharing information with those who have been made homeless

Future research on specific subject areas should aim to engage with those with direct personal experience of relevant topics.

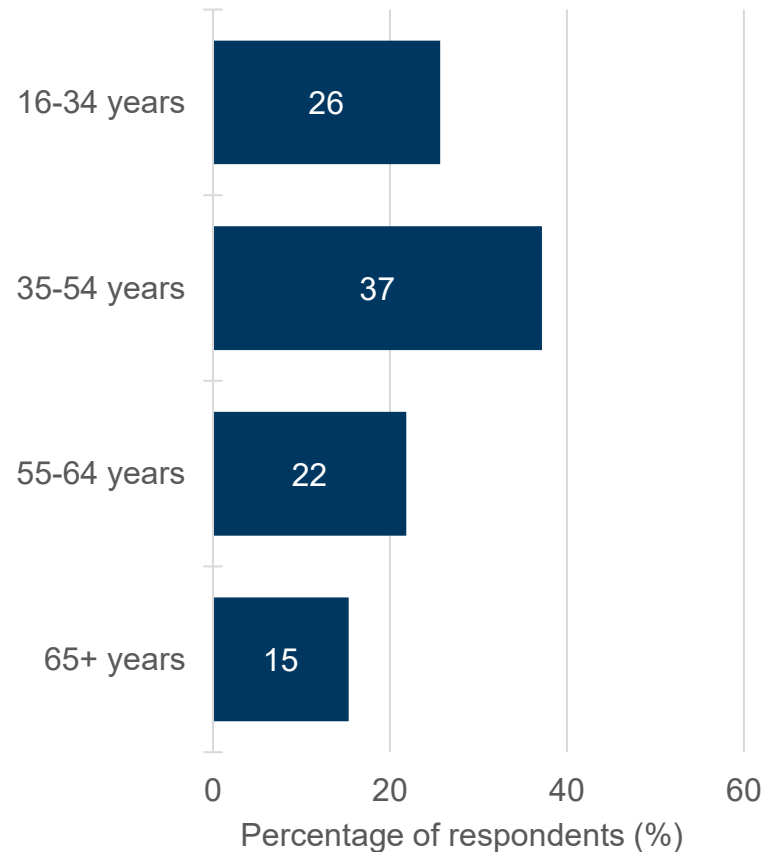


Sample demographics

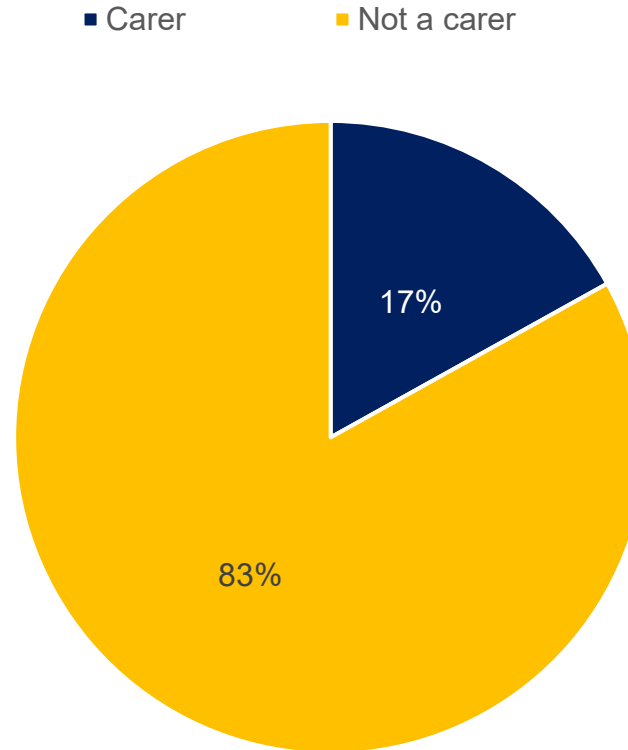
Age, carers, and disability

- Official -

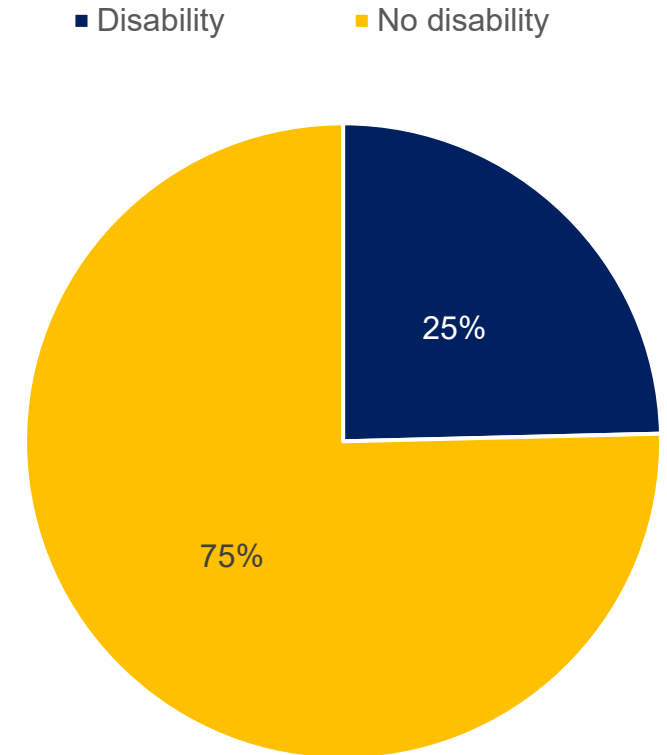
Q: **'What is your age group?'** | Base: Total sample (261)



Q: **'Are you a carer?'** | Base: Total sample (260)



Q: **'Disability.'** | Base: Total sample (260)



- There is a generally good representation from all age groups, the highest response rate being from those aged 35-54
- Just 17% of respondents are carers whilst 83% are not
- A quarter of respondents have a disability, whilst 75% do not