



Frimley Health and Care



Focussing on the health and wellbeing needs of our community

A joint project engaging on the NHS England Long Term Plan and what it means for local people

In January 2019 the NHS Long Term Plan was published. As environments and society develop, the way that we all look after our health and wellbeing has to change so that in 10 years' time we have a service which can face the challenges of the future.

Healthwatch England, with funding distributed through the Care Quality Commission (CQC), funded local Healthwatch engagement activity based on this plan.

Local Healthwatch, coordinated by Healthwatch Bracknell Forest, worked with Frimley Health and Care Integrated Care System (ICS) to develop a bespoke survey for this area.

The Frimley Health and Care ICS is a group of organisations such as hospital trusts, GPs and local authorities, working together to provide the local population with a joined up health, care and wellbeing system.



Methodology

Rather than utilise the Healthwatch national survey, a bespoke local survey was developed focusing on 2 areas:

- Health and wellbeing
- Use of local services

Frimley Health and Care ICS partners felt that the health and wellbeing of the community was an important focus, as keeping people healthy can relieve pressure on local health and social care services. ICS partners wanted to understand how people looked after their own health and wellbeing, what community assets they utilised (such as leisure centres and the community and voluntary sector), where they obtained health and wellbeing information and advice and, finally, what were the barriers that prevented people from living a healthy lifestyle.

In the last 3 years there have been campaigns and promotions to get local people to use the right services, at the right time, with the aim to reduce inappropriate or unnecessary use of services – particularly of Accident and Emergency departments. Finding out what local services people have recently used and identifying where they obtain information and advice (if anywhere) before attending an Accident and Emergency department will help the ICS to focus further campaigns and possible allocation of resource to alternative services.

Methodology (continued)

The survey was split into four sections:

- Data protection information and consent
- Demographics
- Main survey questions
- Consent and contact information for those that wished to be connected with local Healthwatch

There was a total of 27 possible questions (depending on answers given)

The survey was designed and hosted on line, using SurveyMonkey and a paper version was available. An easy read version of the survey was requested and provided.

The survey was open from the 1st of May – 14th June 2019 and promoted by all partners on social media, websites, community events and mail outs.

Results of the survey

Data protection information and consent

1510 responses were received; 1421 online and 89 (paper and easy read formats).

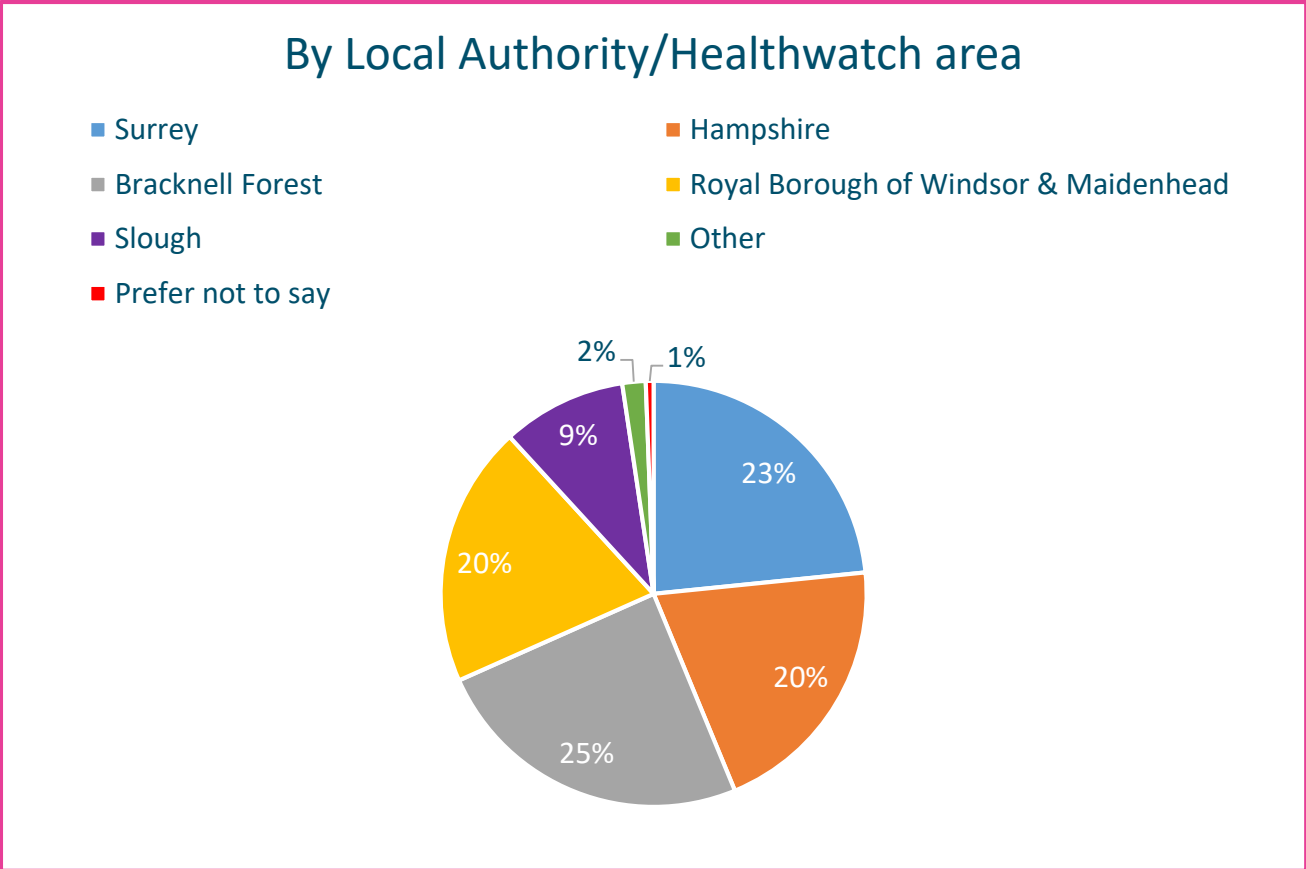
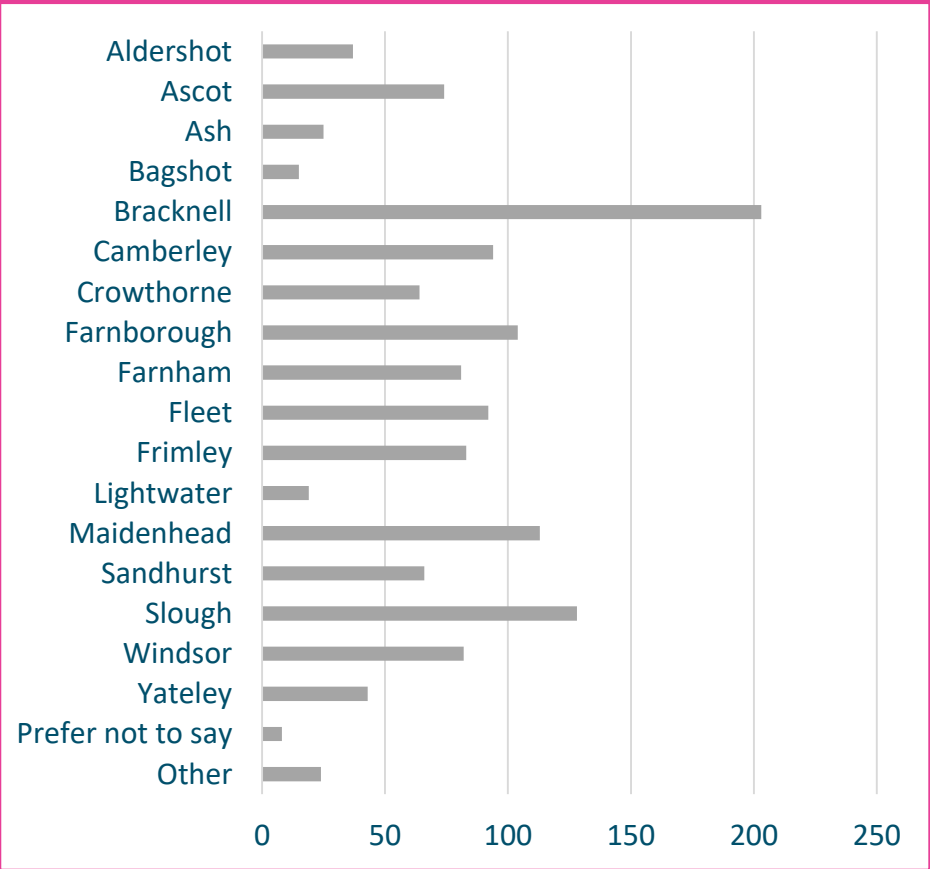
33 responses (2.19%) did not give consent to the use of their data and were taken by the survey software to the end of the survey. Therefore, this report is based on the answers of 1477 responses.

** Not all respondents answered all questions and 122 responses contained no answers beyond consent for use of data

Demographics

Location

1355 responses



Age

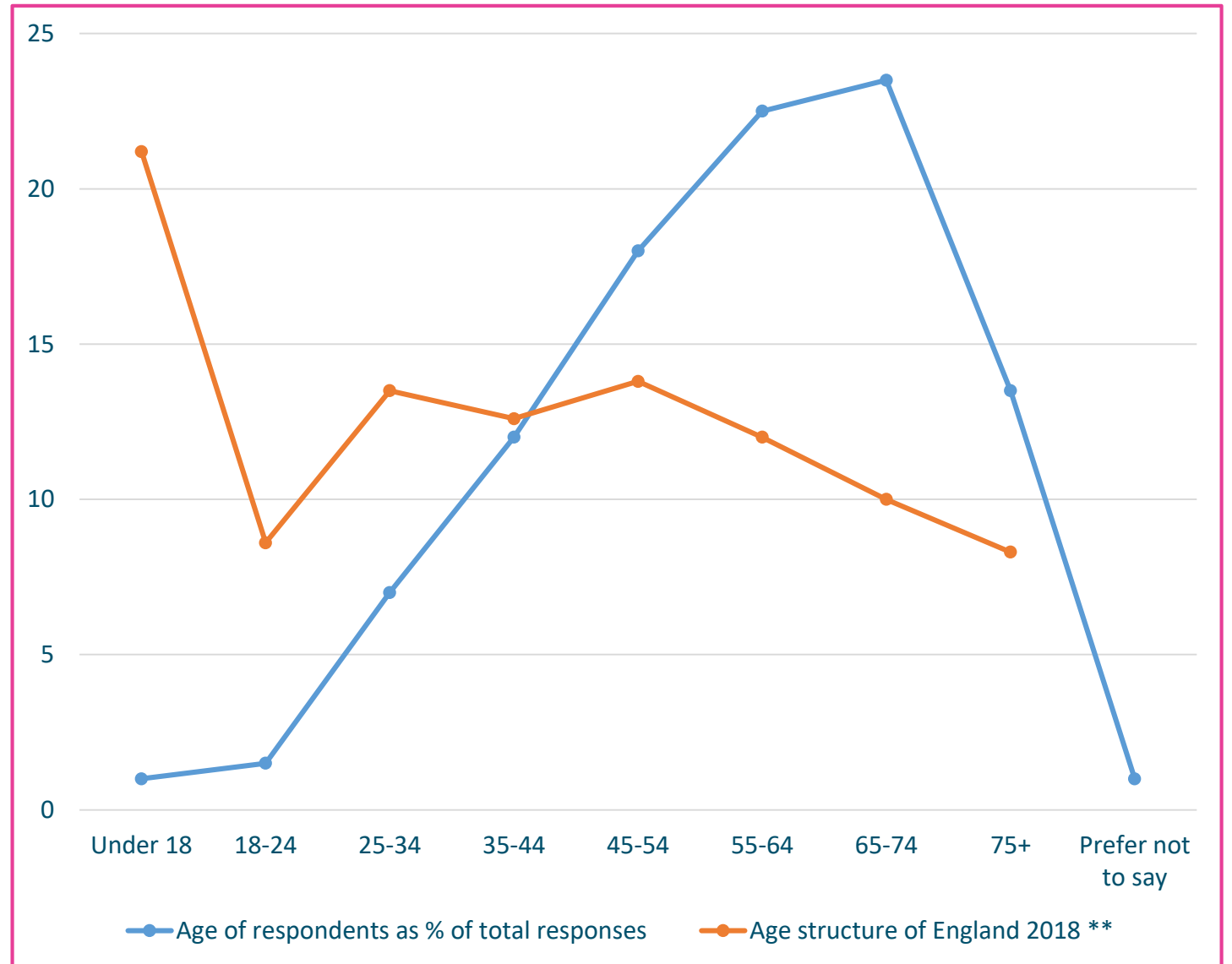
1355 responses

The ICS is defined around acute hospital provision in the north and south of the area, not by local authority or county borders. This makes sourcing demographic information difficult.

According to NHS England* the age structure is similar to England as a whole, although Slough has more children and more 25-40 year olds than average.

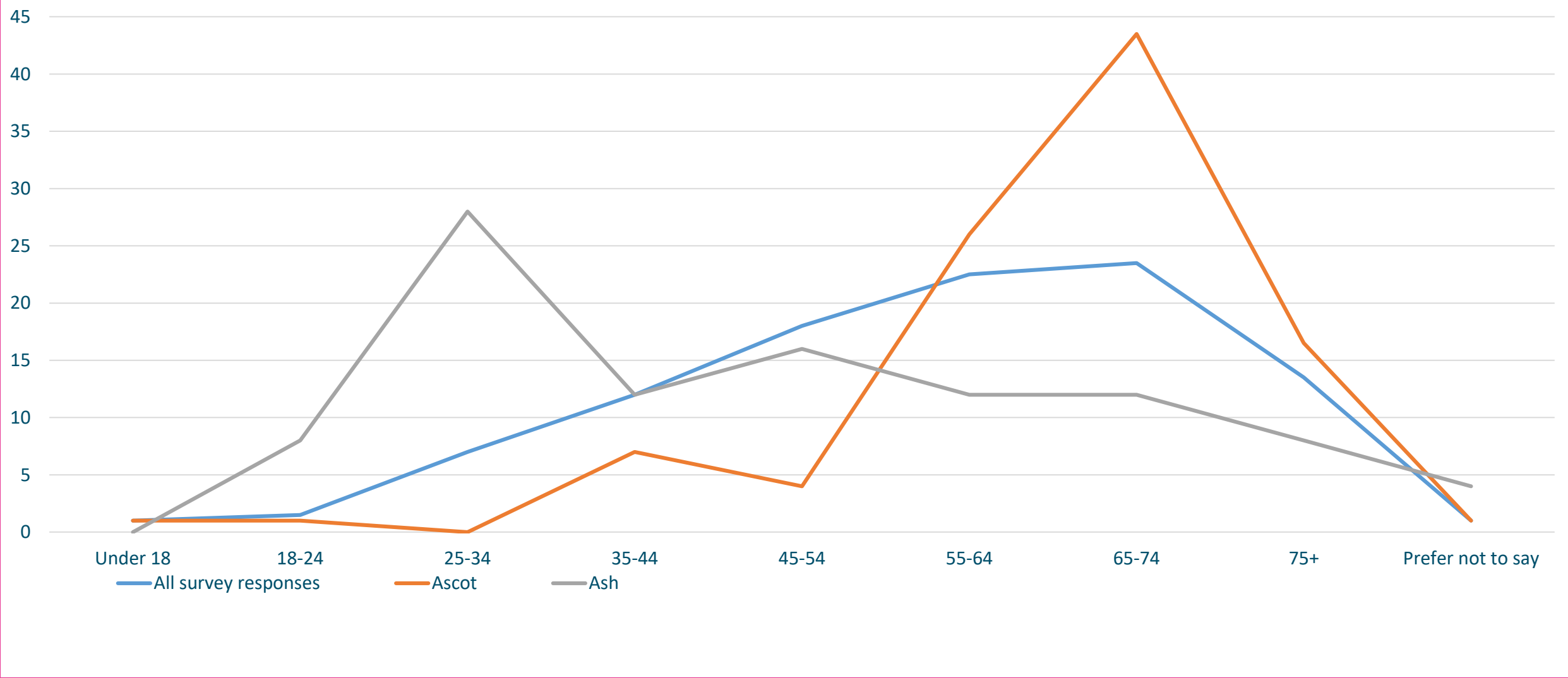
Age structure of respondents shows significant under representation from the under 35s and over representation from those aged 45 and over.

* www.England.nhs.uk/integratedcare/integrated-care-systems/frimley-ics/



** <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/august2019>

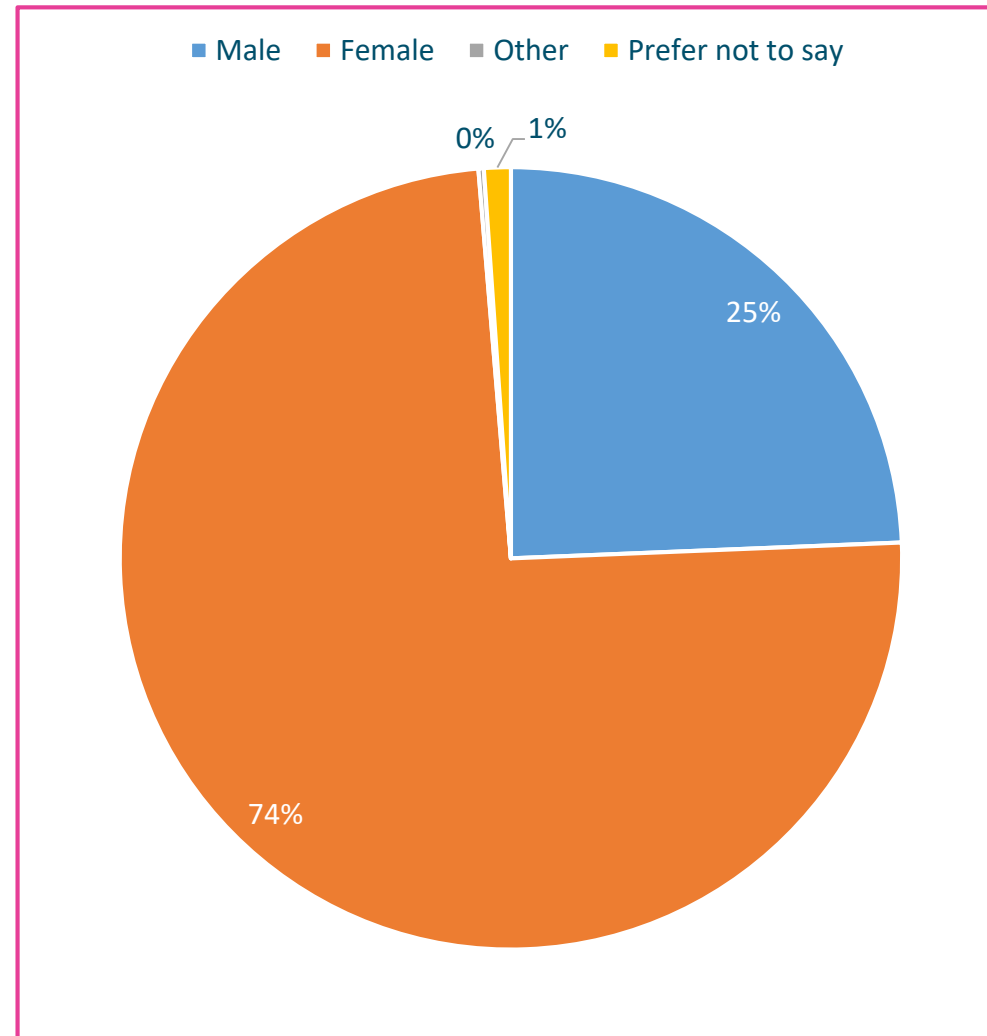
Age of respondents per area as a % - where there is significant* difference to the overall survey response distribution



*where there is a difference of 20% in distribution within at least one age bracket

Gender

1355 responses



Gender breakdown of England 2018*:

Male: 50.6%

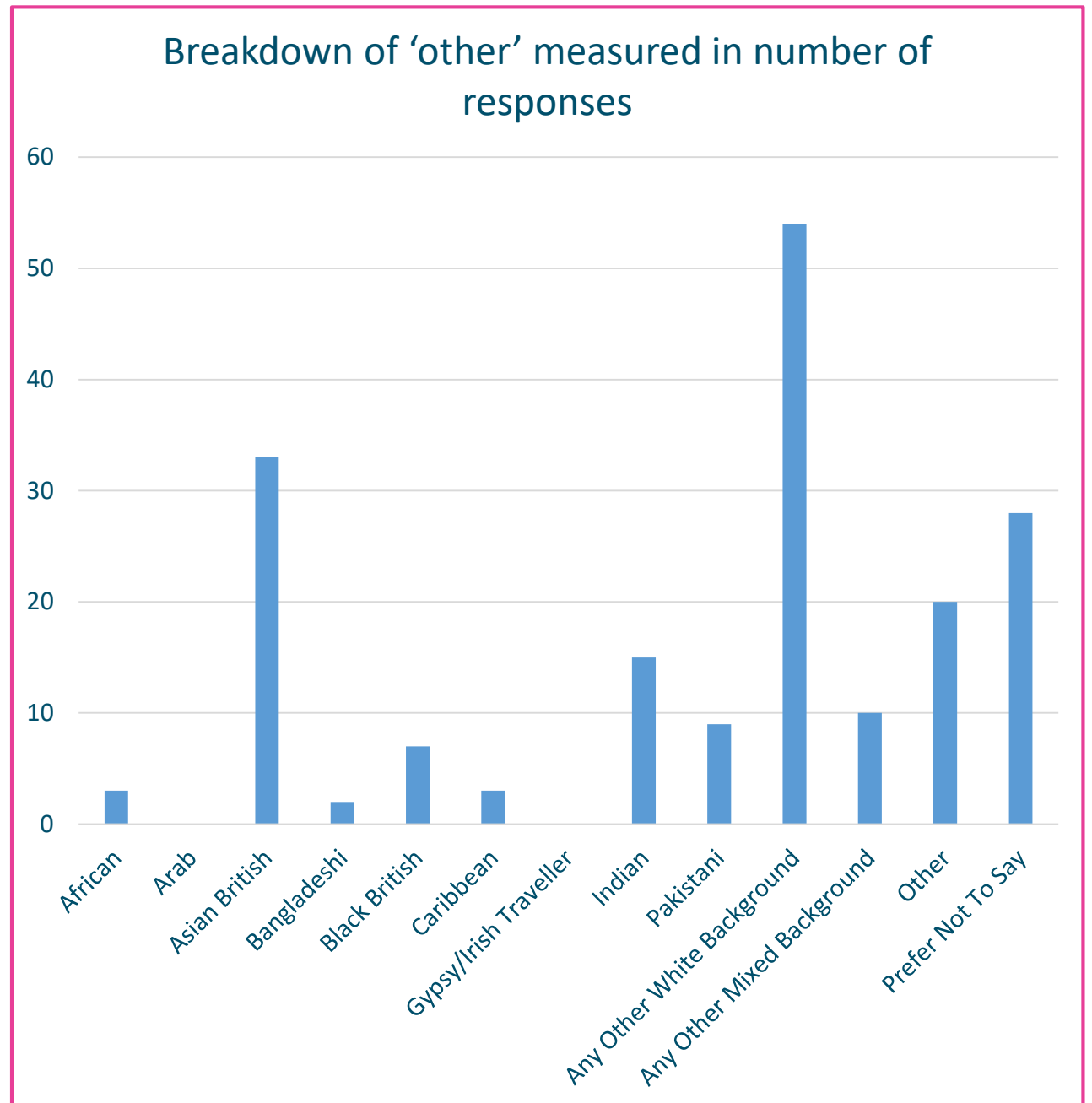
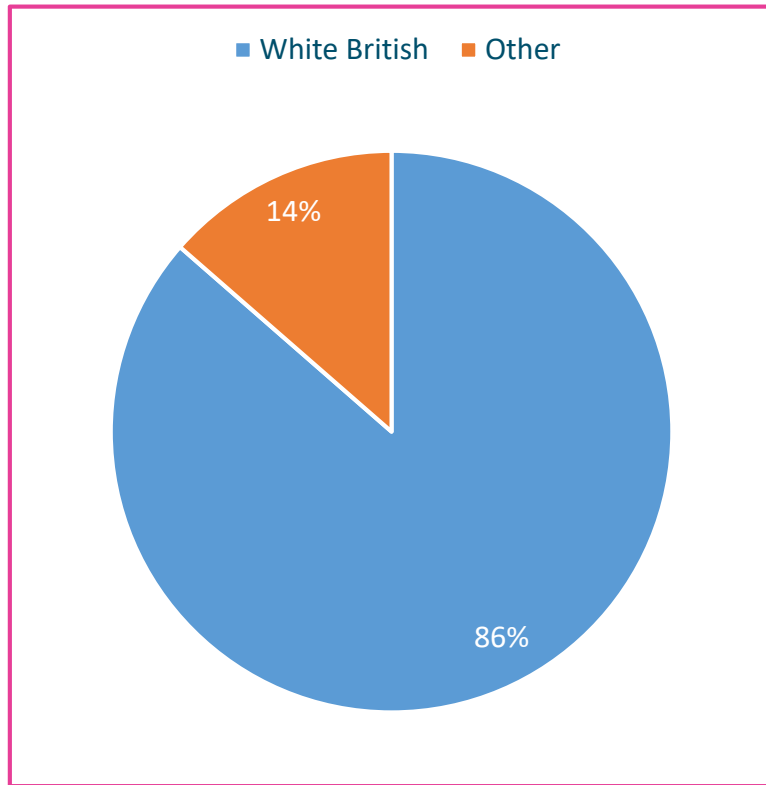
Female: 49.4%

**<https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/articles/overviewoftheukpopulation/august2019>*

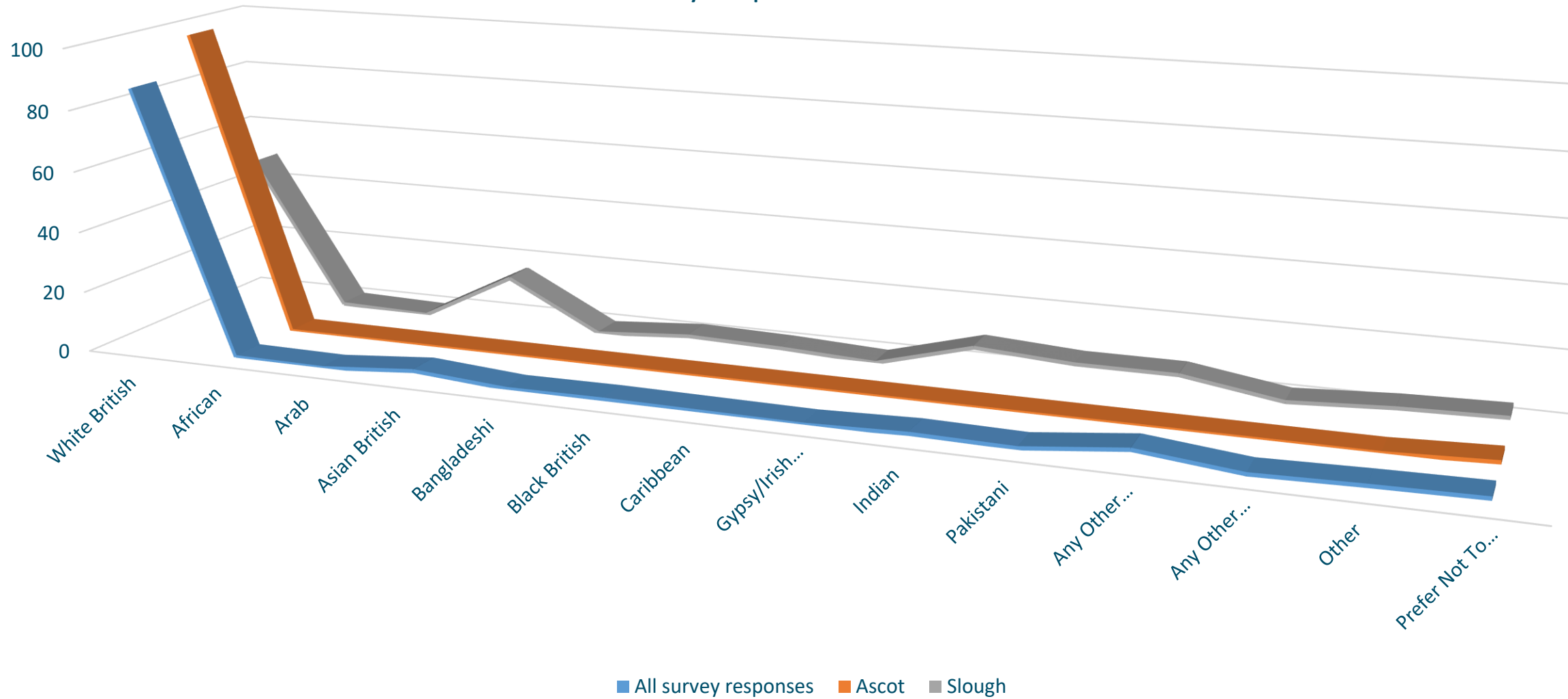
The 3 'other' responses were chosen in order to utilise the text box to express concern that biological sex was not used for this question, especially as it was a health survey. However the survey is not asking about services that are specific to a person's biological sex (i.e. prostate cancer) but is focused on an individual's experiences on keeping healthy and well - which could be influenced by their gender.

Ethnicity

1355 responses



Ethnicity of respondents by area as a % - where there is a significant* difference to the overall survey response distribution

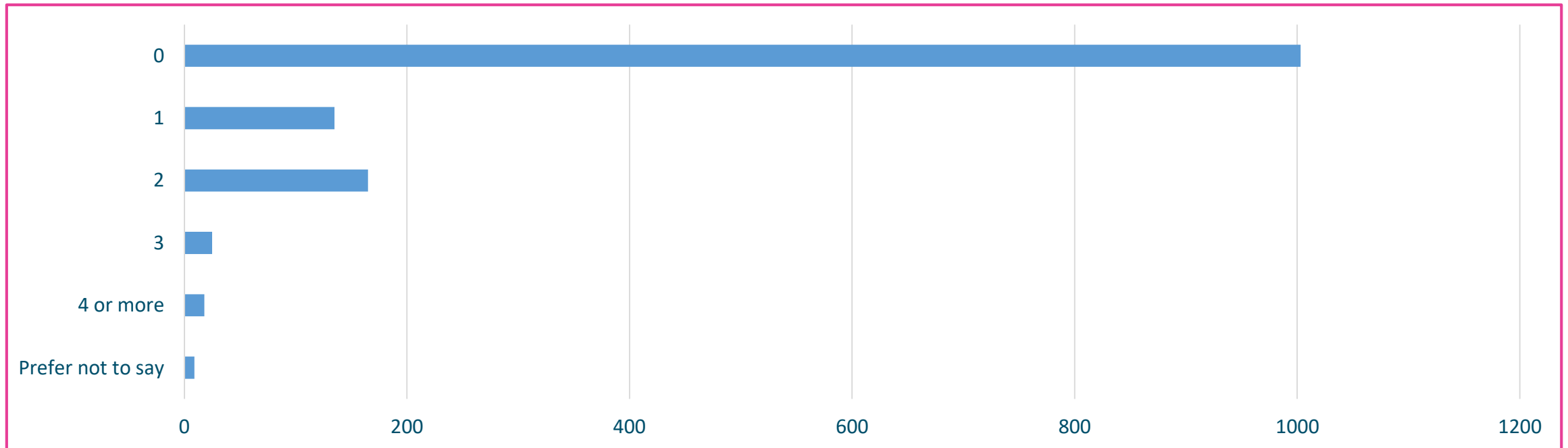


*where there is a difference of 10% in distribution within at least one category

Households with children

Respondents were asked how many children aged 0-18 lived in their household.

1355 responses

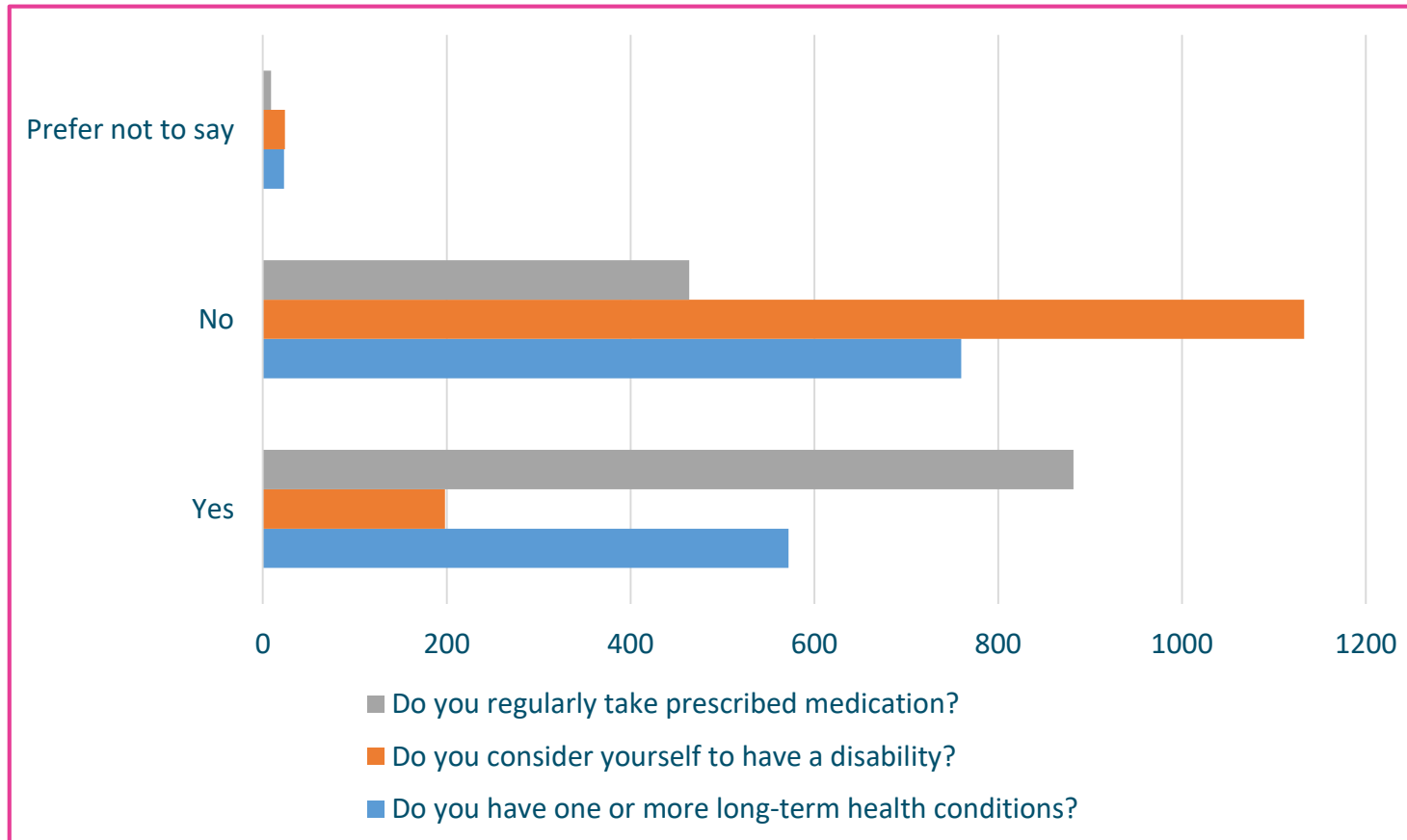


Looking at the responses by area, in all areas the majority of respondents lived in households without children; in Bagshot this was 93.5% (14 people) but in Slough only 51.5% (66 people). This correlates to the information we have cited previously concerning Slough; that it has more children than the national average.

Long-term health conditions, disability and prescribed medication

Respondents were asked if they had one or more long-term health conditions such as diabetes, Parkinson's disease or depression. They were then asked if they considered themselves to have a disability. A further question asked if they regularly took prescribed medications.

1355 responses



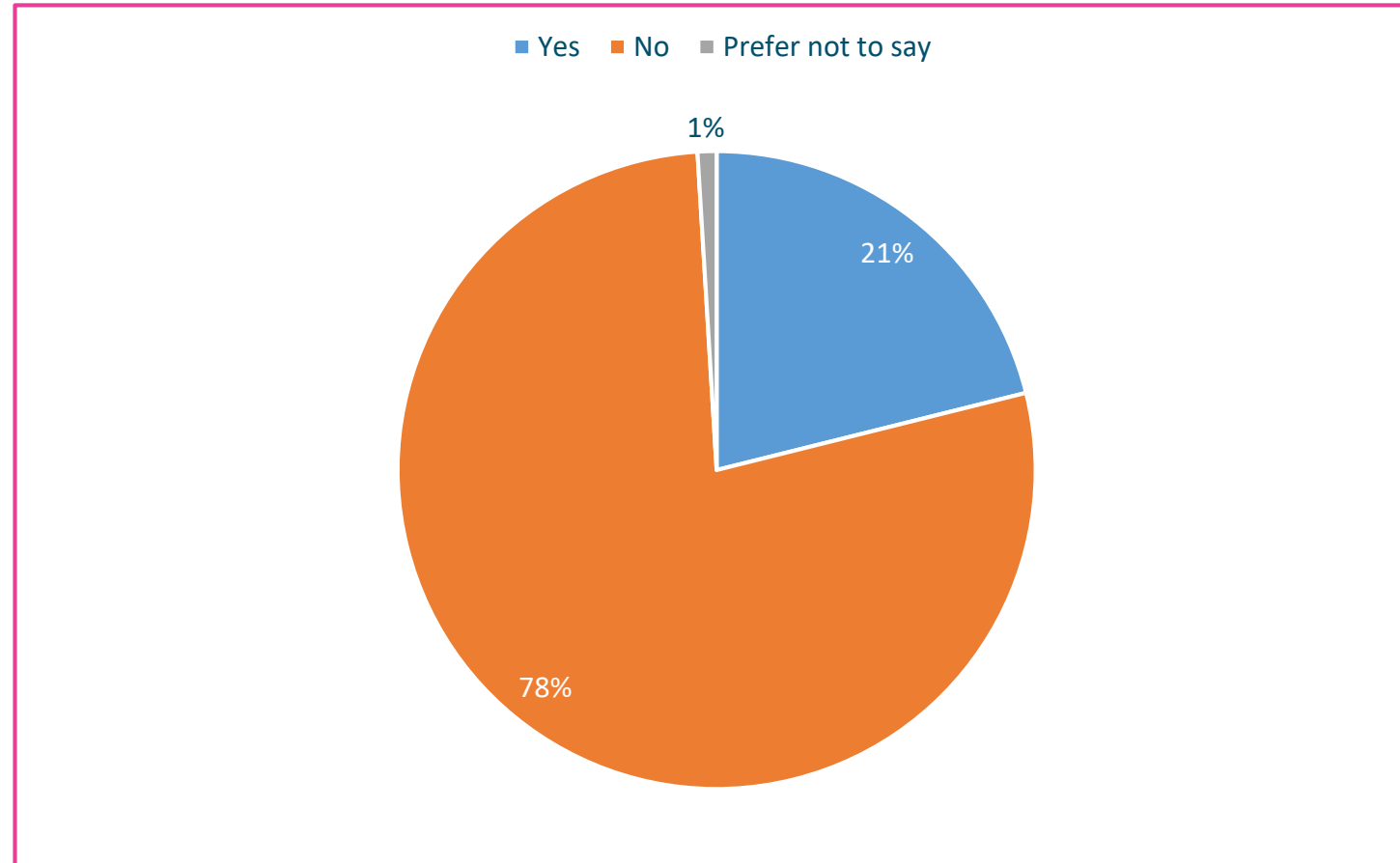
The results indicate that more people regularly take prescribed medication than identify with having a long-term health condition and/or a disability. Possible explanations include:

- Contraception
- Preventative medication e.g. statins
- People do not consider the reason they take medication is due to a long-term health condition (e.g. medication to reduce blood pressure)

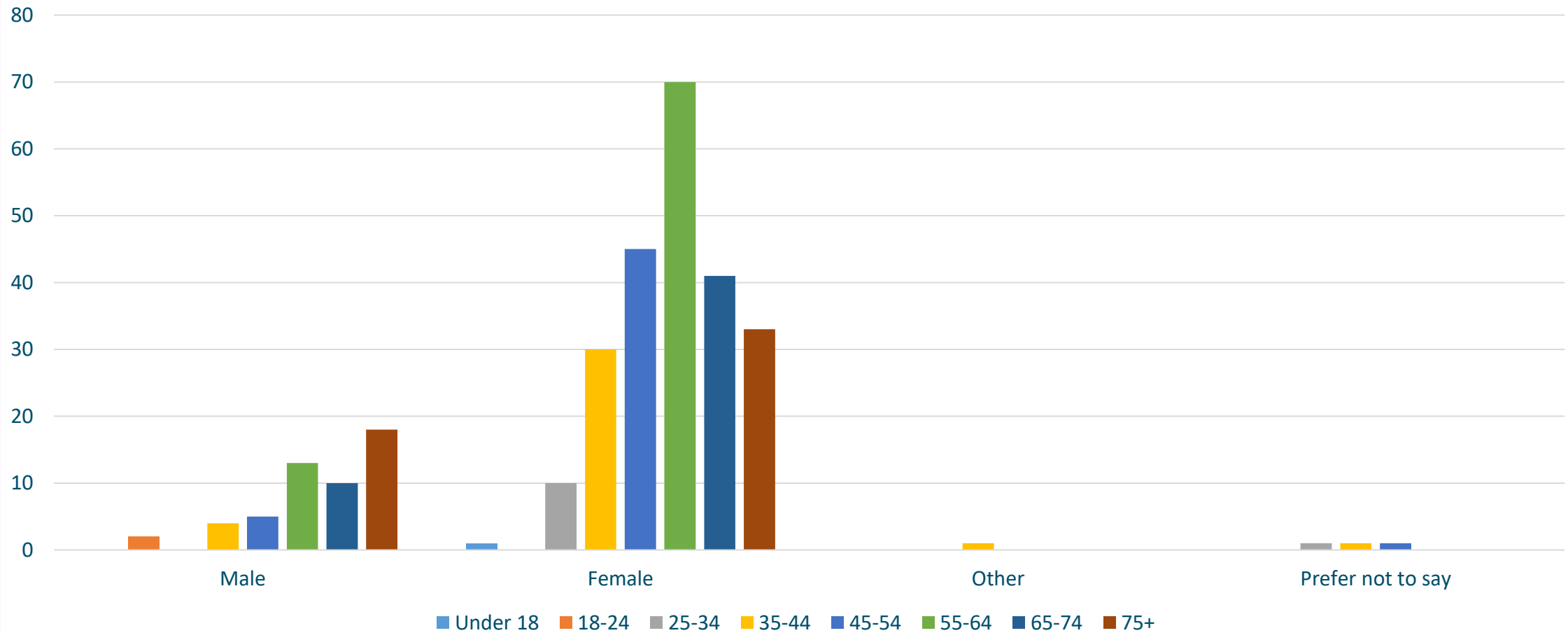
Unpaid carers

We asked people if they were an unpaid carer. This means they provide regular help, support or care for a family member or friend for no payment (excluding Carers Allowance)

1355 responses



Breakdown of the gender and age of people who identified as unpaid carers

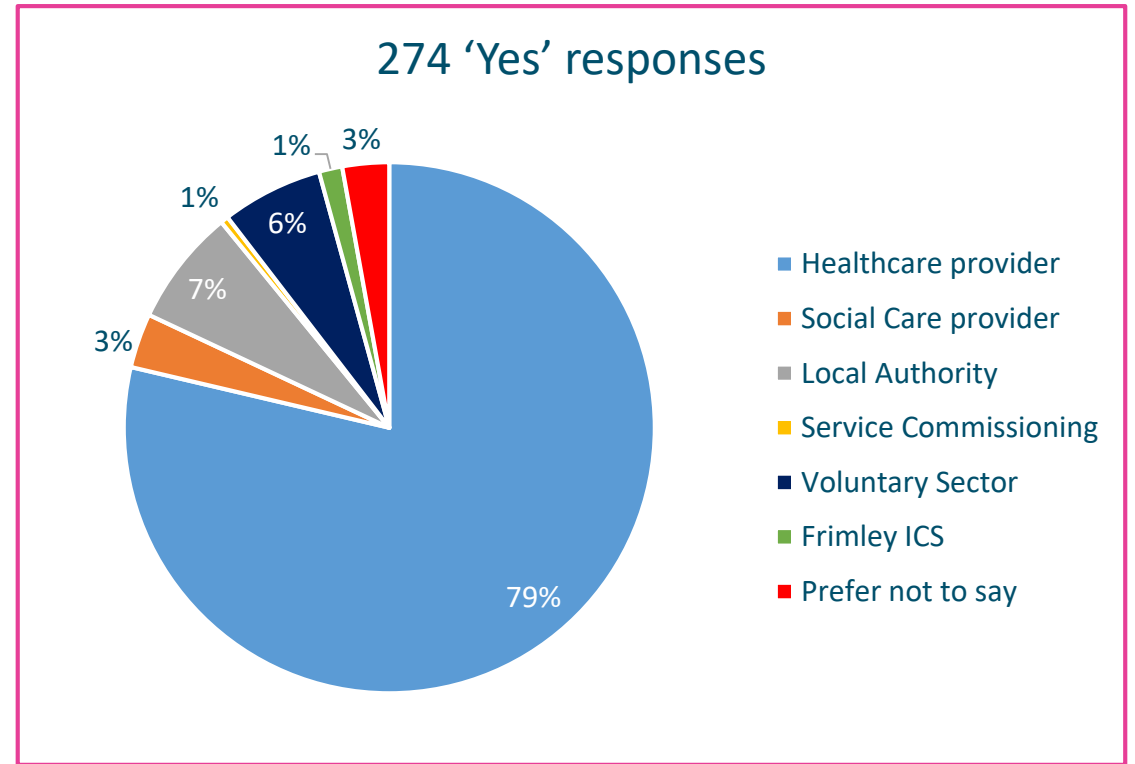
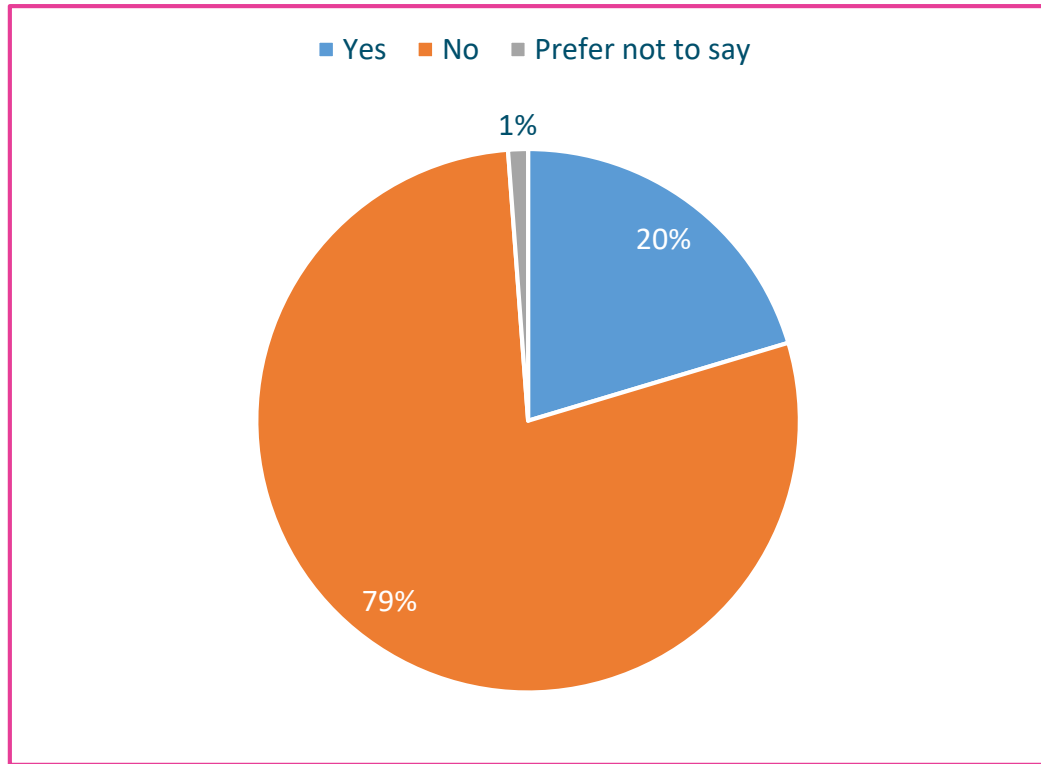


More females than males (3:1) responded to this survey; even taking this into consideration, significantly more females of working age identify themselves as carers than males.

Working for an organisation that forms parts of the Frimley Health ICS

We asked people if they worked for one of the organisations that make up the Frimley Health and Care Integrated Care System (ICS).

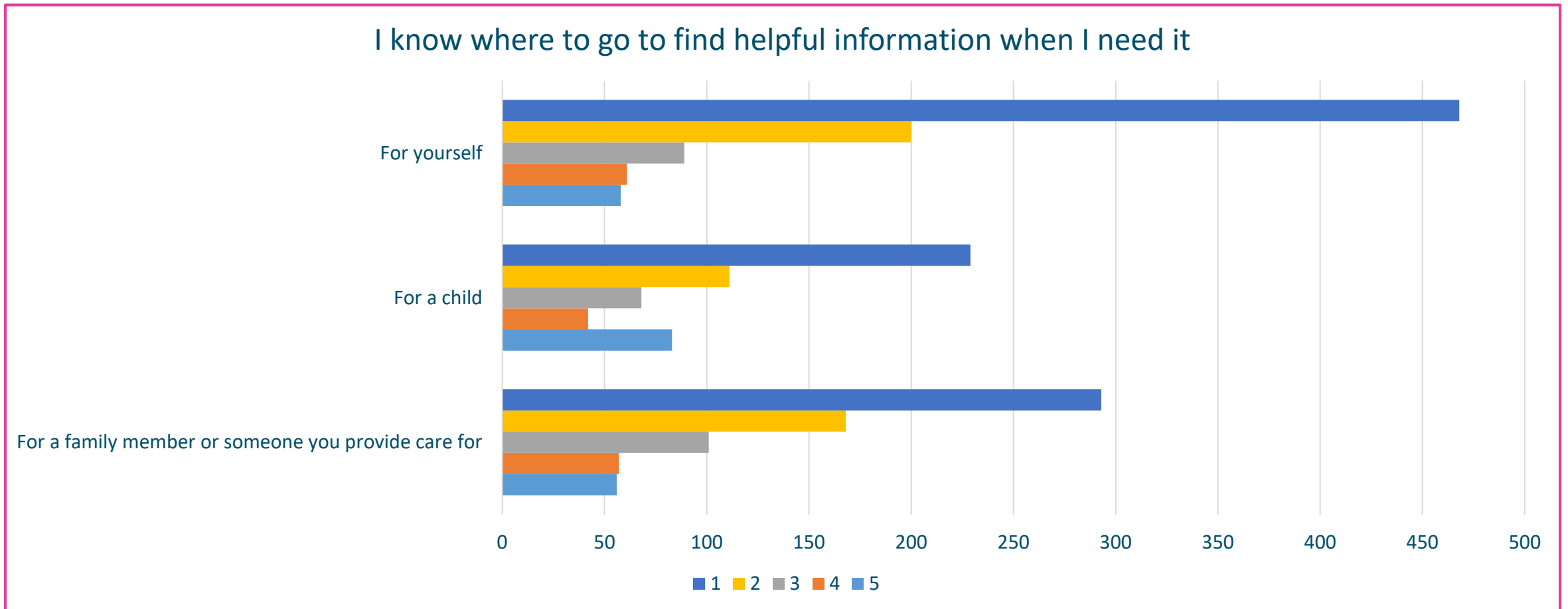
1355 responses



Main survey questions

When you/someone in your family/person you provide care for becomes unwell, do you feel confident in the following? (1 = most confident, 5 = least confident/do not use). Please answer all that apply.

889 responses



I know where to go to find helpful information when I need it

The majority of respondents, when looking for information for themselves, are very confident/confident - with just over 76% scoring themselves a 1 or a 2. However 13.5% did score themselves as a 4 or a 5 (the least confident). This cohort of people were reviewed to see if there were any significant characteristics such as age, gender etc.

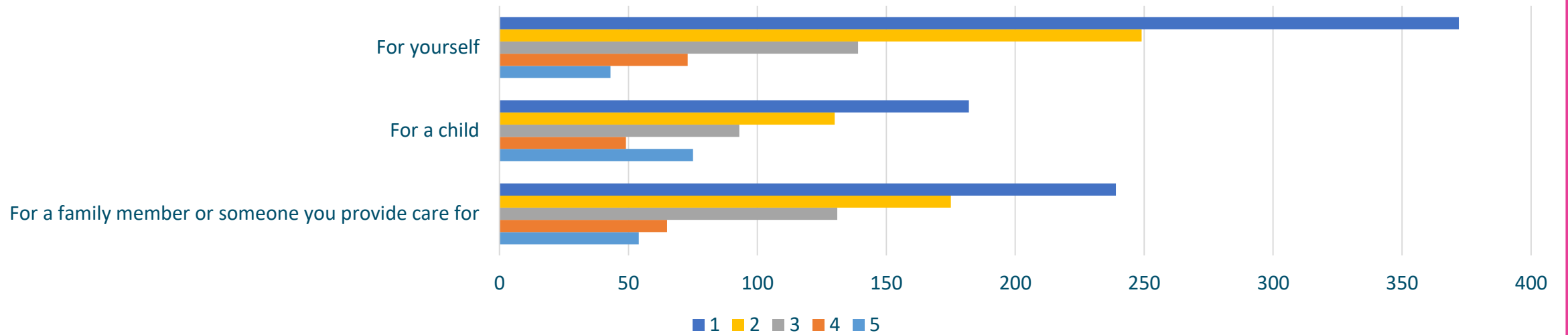
With regards to age, when comparing this cohort to the age distribution of the survey as a whole, 7% were aged 75+ when this age bracket made up 13.5% of overall survey respondents – so lower than expected.

22.5% of the cohort were respondents who worked for an organisation that forms part of the Frimley Health and Care ICS. Although not significantly different than the percentage of respondents across the survey as a whole (20.5%) – it could have been assumed that this would be lower - given their employment.

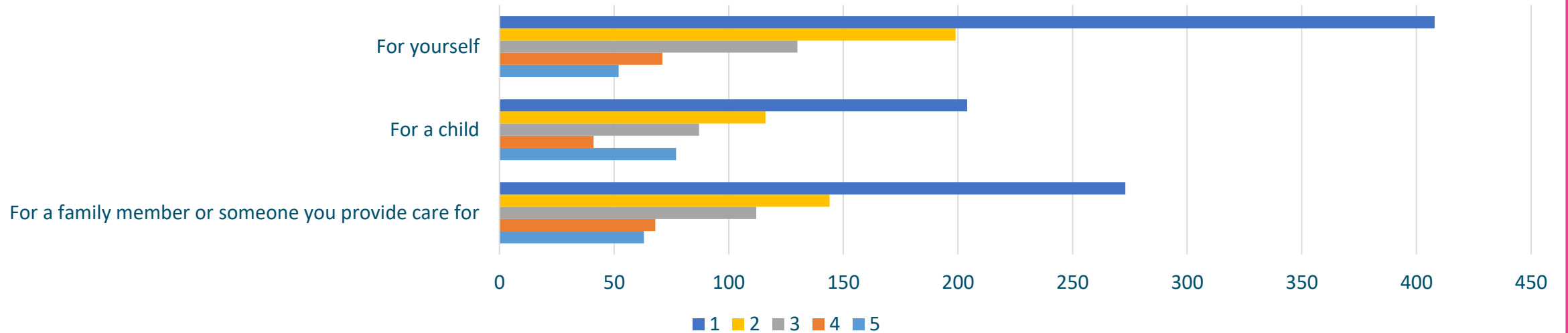
When finding helpful information about a child, family member or person cared for, there was not such a high level of confidence. For finding information for a child 63% scored themselves as very confident/confident (1 or 2), for a family member or cared it was 68%.

13.5% of people scored themselves as the least confident (a 4/5) when finding helpful information for a child. Of these, more than half (57.5%) scored themselves at a higher confidence level when finding information for themselves, 40% scored themselves at the same level and the remainder (2.5%) scored themselves lower.

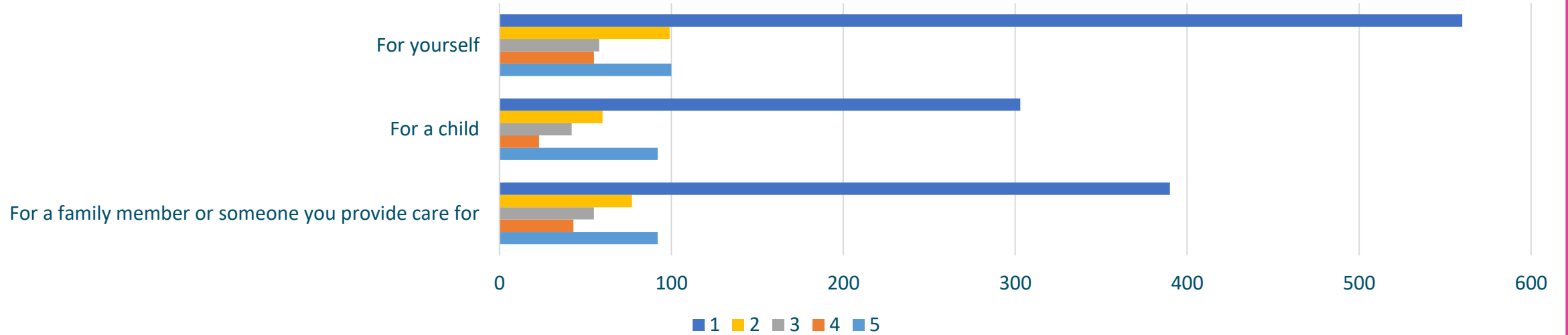
I know which service is the most appropriate for me/us



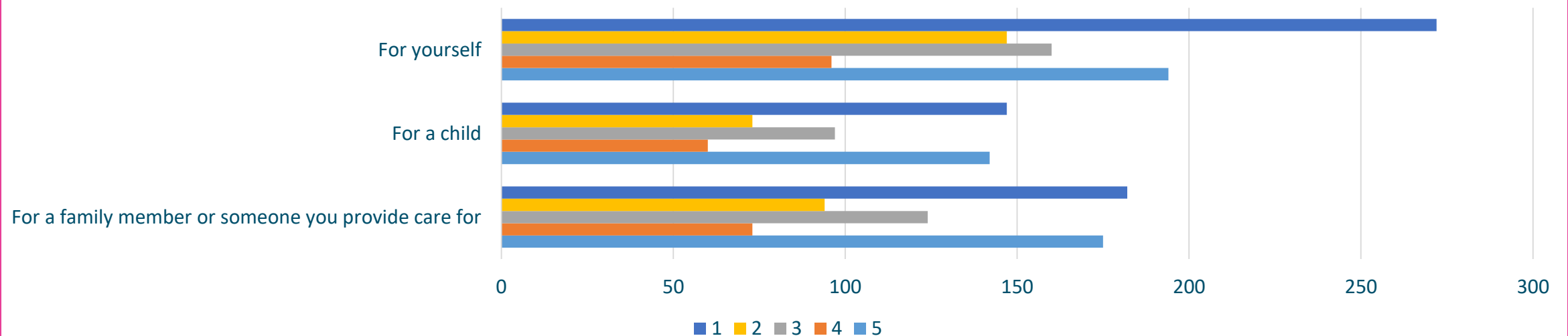
I know how to contact and access the service that I/we need



I use digital technology (internet, apps, email, skype etc.) to find helpful information when I need it



I use digital technology (internet, apps, email, skype etc.) to make contact with the service I need



I use digital technology (internet, apps, email, skype etc.) to make contact with the service I need

Despite the high levels of confidence reported using digital technology to find information, this is not reflected in the use of digital technology to make contact with services. 363 people (41% of people who responded to this question) scored themselves with a 4 or 5 in at least one category (for yourself, for a child or for a family member/person cared for).

Of these, 308 scored themselves low in all of the categories they were answering.

But there were a cohort of people who, while scoring highly in regards to contacting services for themselves, when making contact with services for a child and/or a family member they scored gave low confidence scores.

For a child – 23 people

For a family member/cared for – 8 people

For both categories – 18 people

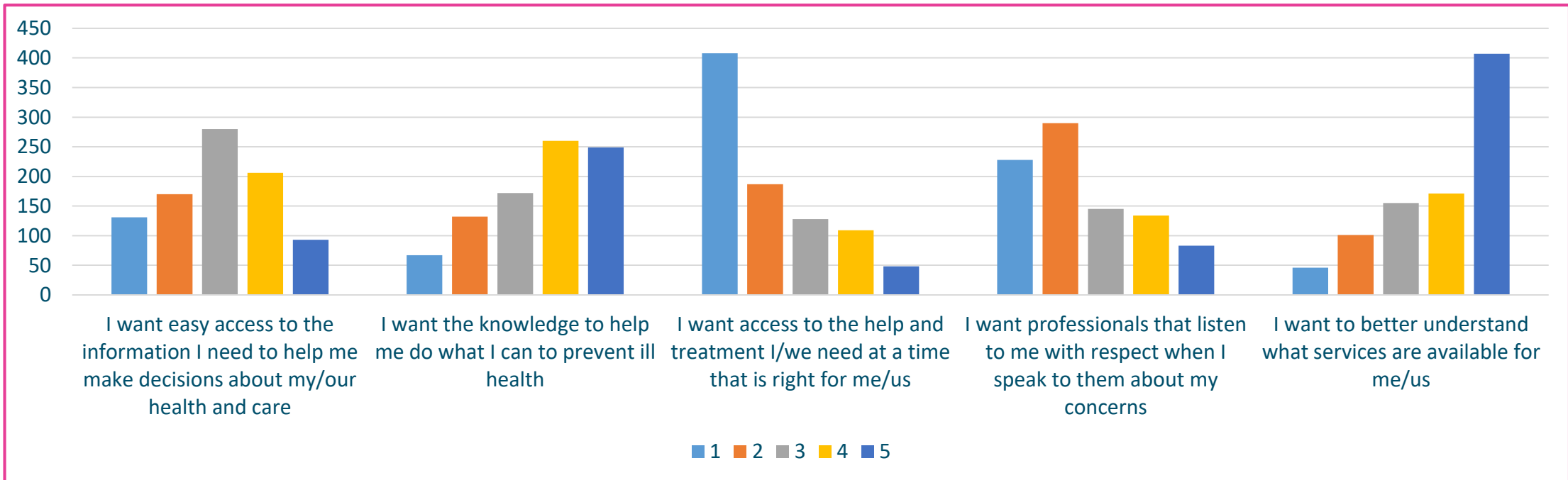
Explanations for this may include:

- the majority of online services for patients are for adults
- Access of records by persons other than the patient usually require formal permission (LPAs etc.)

Thinking about you/your family/person you provide care for, please rank the following statements in order of importance to you. (1 = most important, 5 = least important)

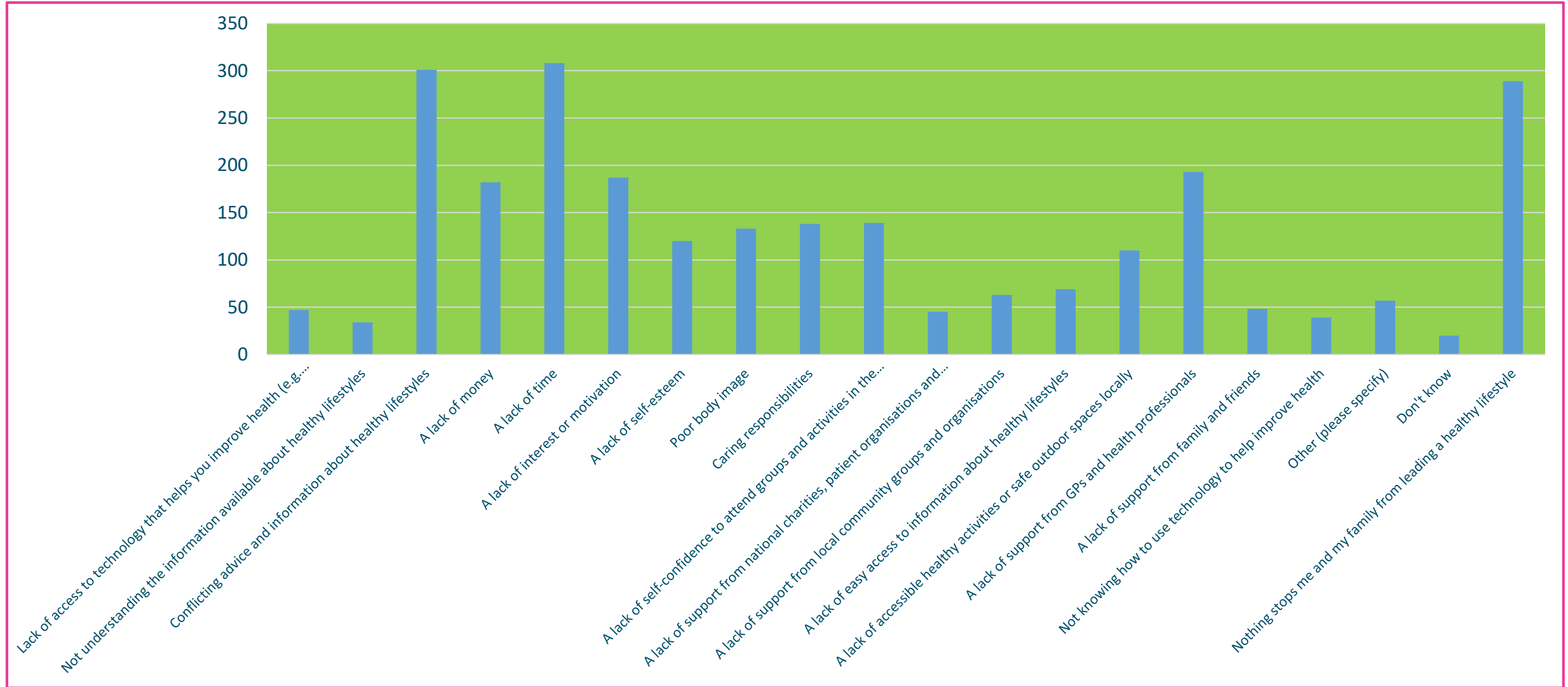
880 people responded

This question caused the most difficulties both in incomplete survey results (e.g. more than one answer being given the same ranking) and also in feedback from respondents who stated that all or the majority of statements were of equal importance to them.



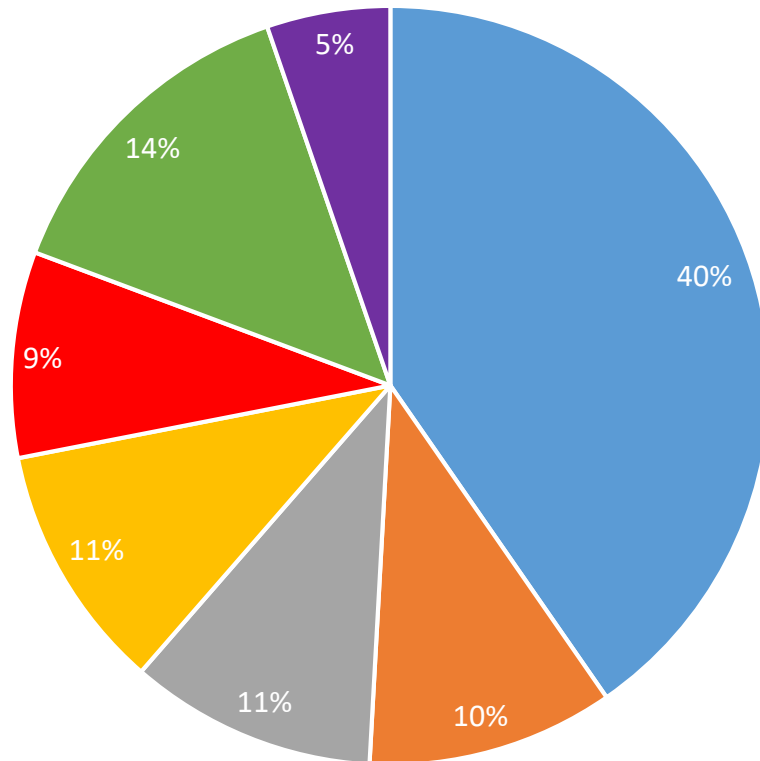
What, if anything, stops you and your family leading a healthy lifestyle?

895 people responded



Breakdown of 'other' responses

- Disability/ill-health
- Transport
- Tiredness/fatigue
- Answer not relevant to question
- Work
- Willpower
- Other



"I don't drive, so I do not have easy access to baby clinics. I live in Crowthorne, the nearest clinic (weigh in) is 1 hour walk. No easy access by public transport."

"Lack of balance between work/life."

"Activities for over 50s are always in the day when a lot of people still work at that age.."

"As I'm deaf I don't find it easy to join in groups."

"While not wanting to be dismissive of health and lifestyle concerns, I also want to lead a life! Following every bit of advice won't actually make me live longer, it will just feel like it!"

"Severe lack of decent mental health care for teenagers."

"More respite to care for disabled child to be able to exercise."

"Conflicting media information, something is good for us, then it's bad!"

"Processed food and supermarket labelling that is not clear (no traffic lights etc.)"

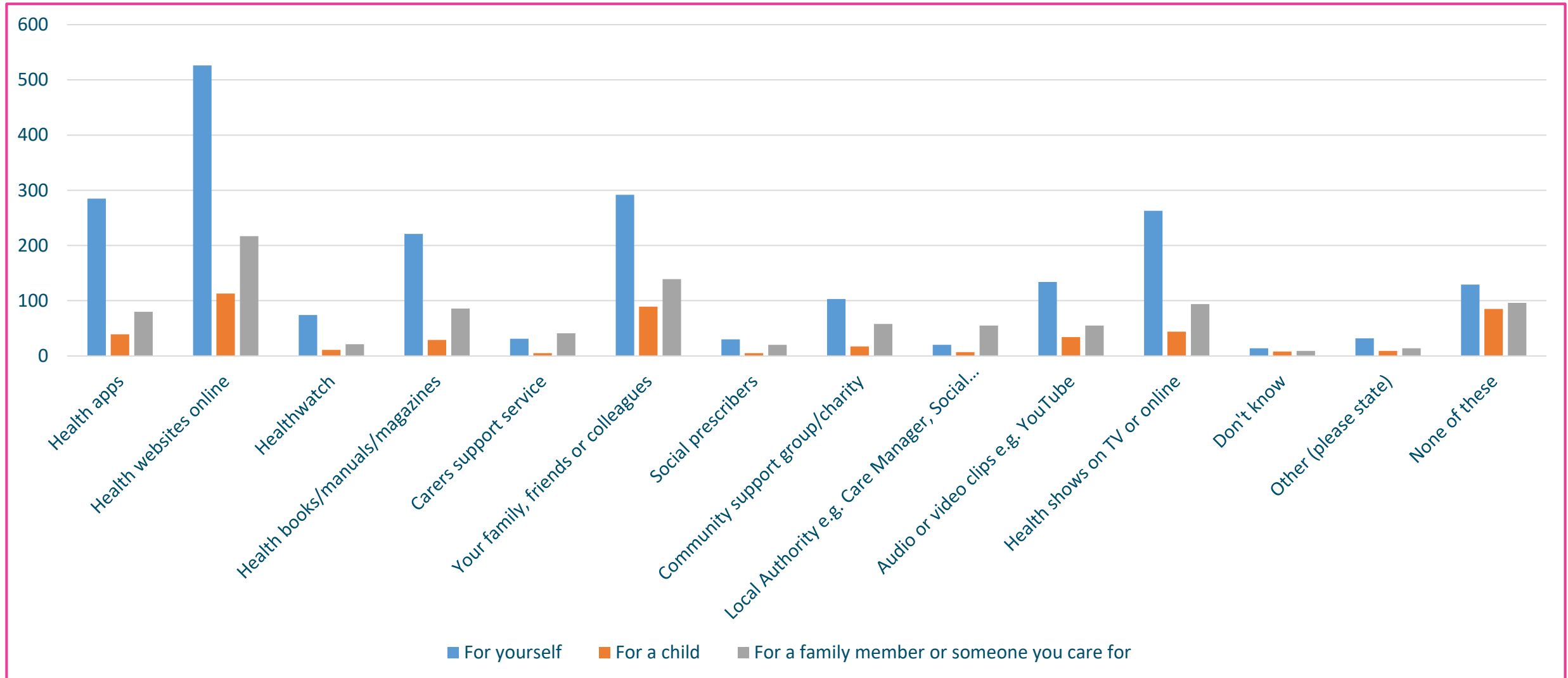
"Having to work extra hours for no pay to be able to provide the level of patient care I would be happy with myself."

"I find repeatedly that physical health practitioners have no concept of the effects of a psych condition on its impact on healthy living."

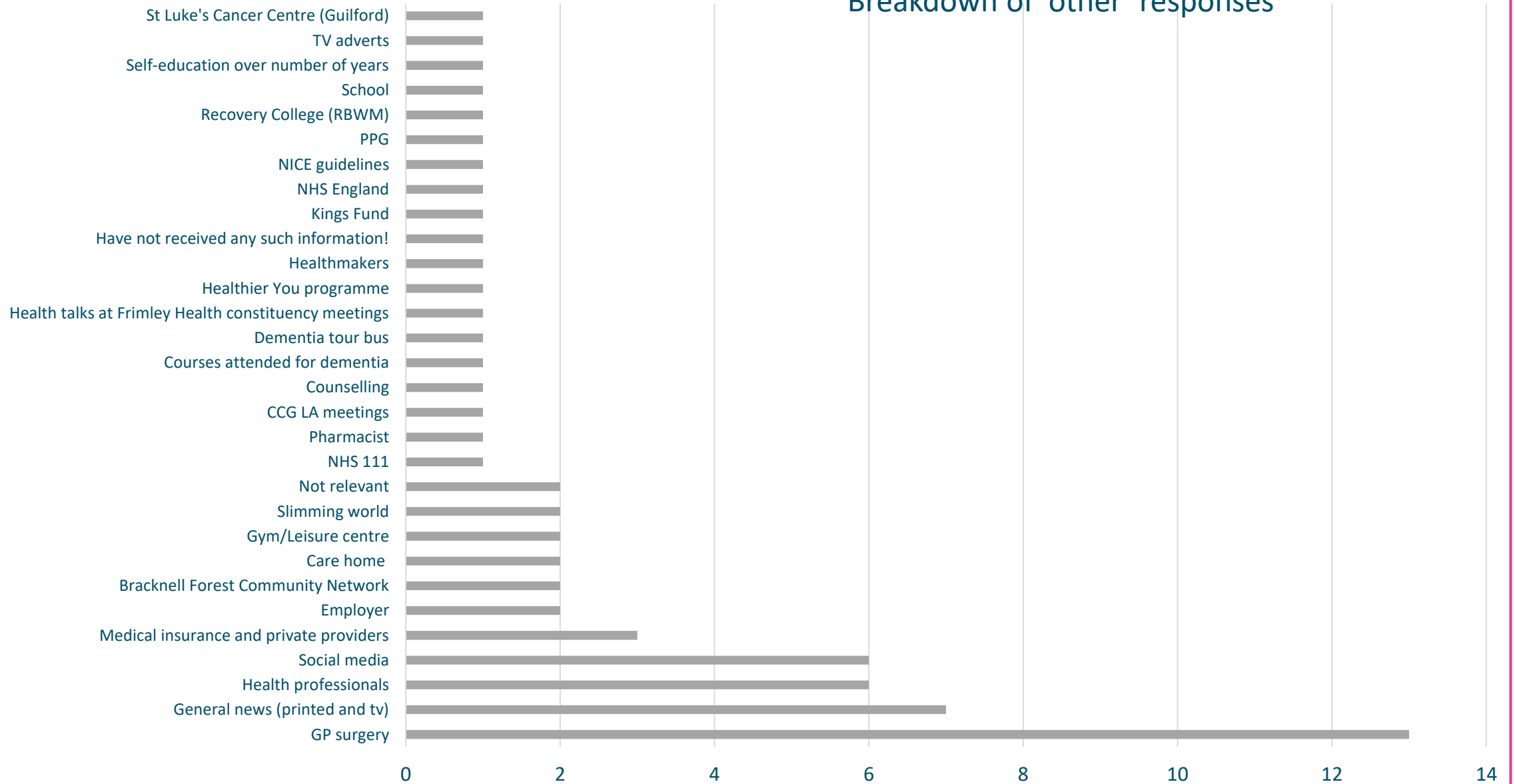
"What stops us from having a 'healthy life style' is long-term ill health".

In the last six months from which of the following sources, if any, have you received information or advice on how you and your family can stay healthy and well? (Select all that apply)?

895 people responded



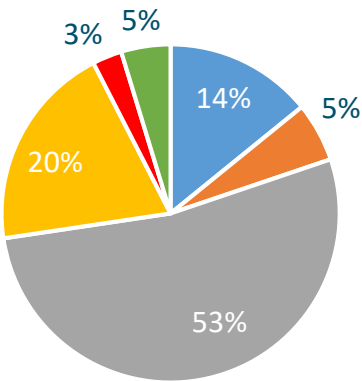
Breakdown of 'other' responses



Local information and advice services – breakdown by area

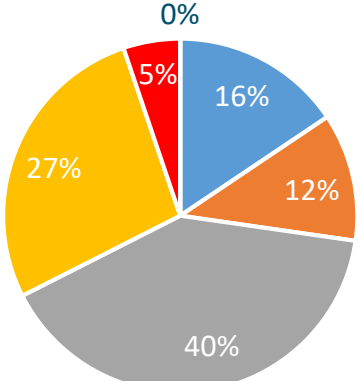
Healthwatch
106 responses

- Surrey
- Hampshire
- Bracknell Forest
- RBWM
- Slough
- Other



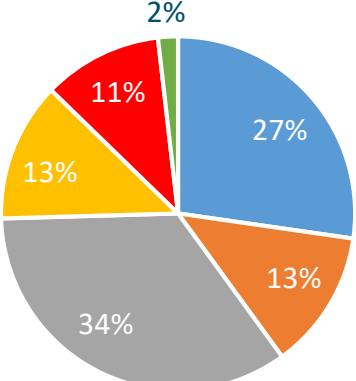
Carers Support Service
77 responses

- Surrey
- Hampshire
- Bracknell Forest
- RBWM
- Slough
- Other



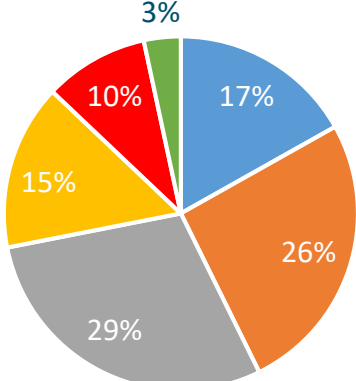
Social Prescribing
55 responses

- Surrey
- Hampshire
- Bracknell Forest
- RBWM
- Slough
- Other



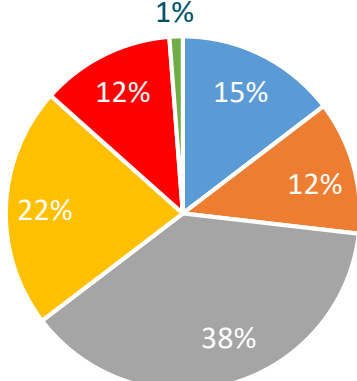
Community Groups
178 responses

- Surrey
- Hampshire
- Bracknell Forest
- RBWM
- Slough
- Other



Local Authority
82 responses

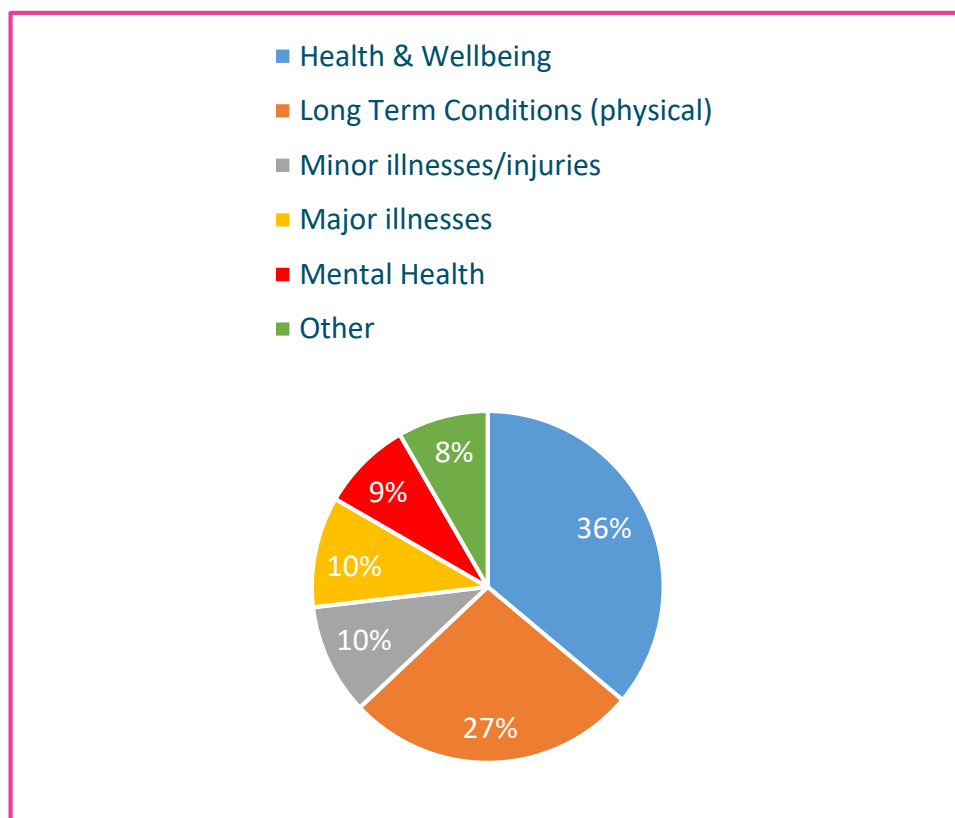
- Surrey
- Hampshire
- Bracknell Forest
- RBWM
- Slough
- Other



Is there anything you would like to tell us about the information or advice you received? (if possible, please give details of the source of the information and how it did/didn't help)

377 people responded (generating 384 comments)

108 people told us about what they were seeking information and advice on:



Health & Wellbeing

Advice on healthy eating, weight loss and management, exercise, smoking cessation, alcohol information, supplements and alternative therapies.

Long Term Conditions (physical)

Finding out more about condition, symptoms, progression, treatment. Finding online support groups and helplines.

Minor illnesses/injuries

Looking up information to self-diagnose, treatment and information about when to seek medical attention.

Major illnesses

Looking up information both before and after diagnosis, support groups and helplines.

Mental Health

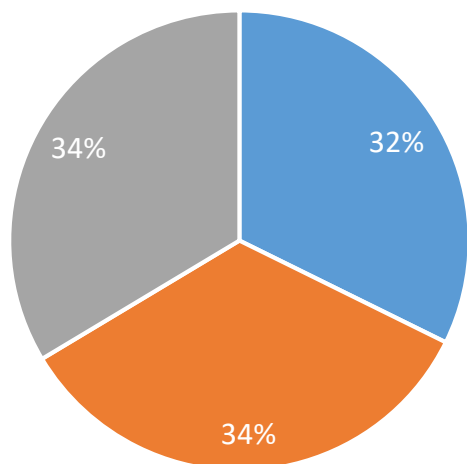
Seeking sources of help and support, dementia, stress management, counselling and therapy services.

Other

Checking medication dosage and side effects, menopause, pregnancy advice, social activities, social care providers and Travel Clinics.

Sentiment of the comments

■ Positive ■ Neutral ■ Negative



“Pharmacist was really helpful , I didn't realise you could access the pharmacist until I saw an NHS advert.”

“YouTube Video about lower back pain has led me to undertaking remedial exercise everyday that reduces the pain.”

“The (dementia) bus is a great way to experience what dementia is like.”

“Regular newsletters helpful and reminders of own health responsibility.”

“The help and advice I receive from the Specialist Nurse (Parkinson's) is excellent. Her guidance re: medication is reassuring and gives me confidence.”

“I check symptoms (and gp's diagnosis) on www.nhs.uk to see whether there is any sensible information which would help me to help myself. I find it informative, balanced and useful.”

“A lot of information available on the internet does not have any scientific or other information to back it up.”

“Sometimes there are too many access routes, too much information, too many services. You can end up ignoring all of it and just speaking to someone that has had a similar experience to you to get advice.”

“Sometimes its too difficult to read - as not in layman's terms - all in medical terminology.”

“Social services not at all helpful, just focused on money and not the individual.”

“I don't want advice about how I can save the NHS money by doing it all myself with the help of the overstretched 3rd sector and under qualified community prescribers.”

“What I find is that healthy eating/diets vary and depend what the latest fad is or what a celeb. is doing.”

Where people told us they received positive information from

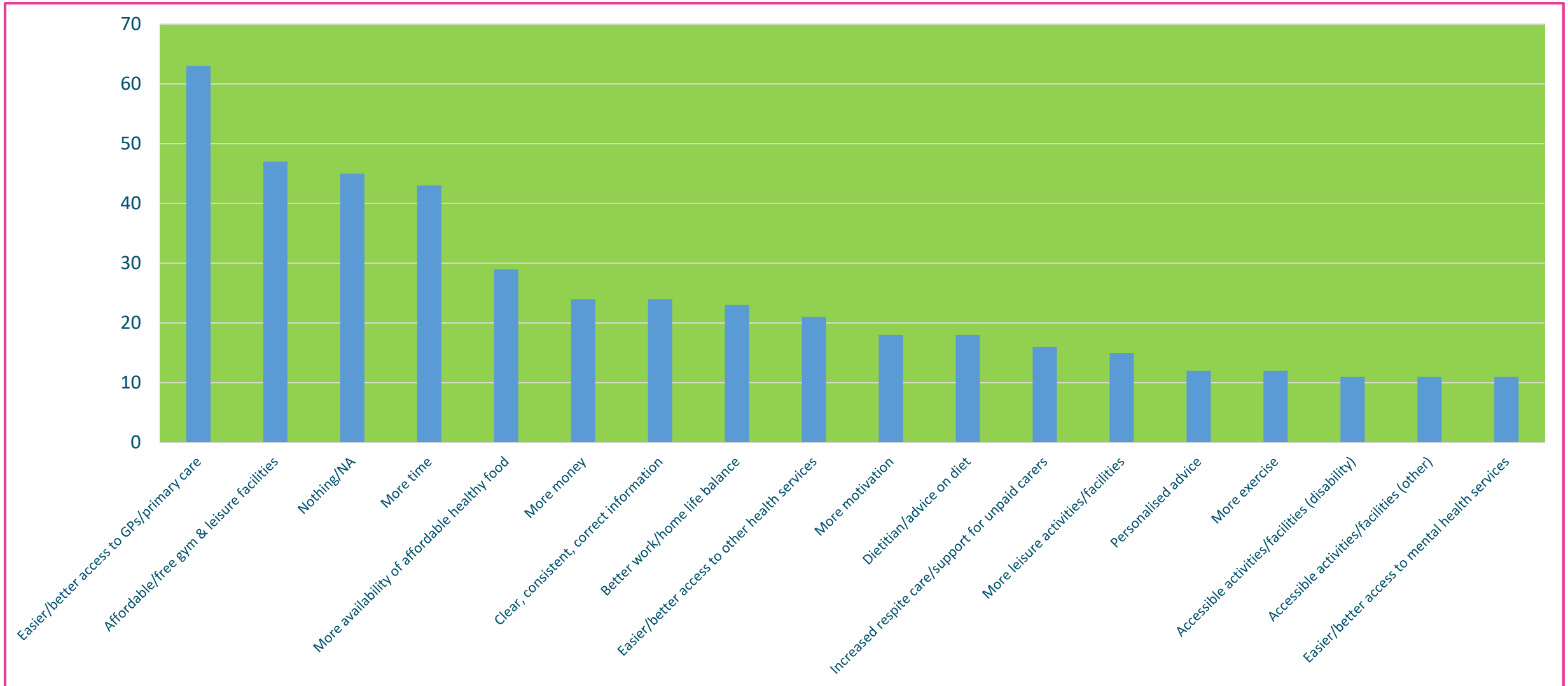


Where people told us they received negative information from



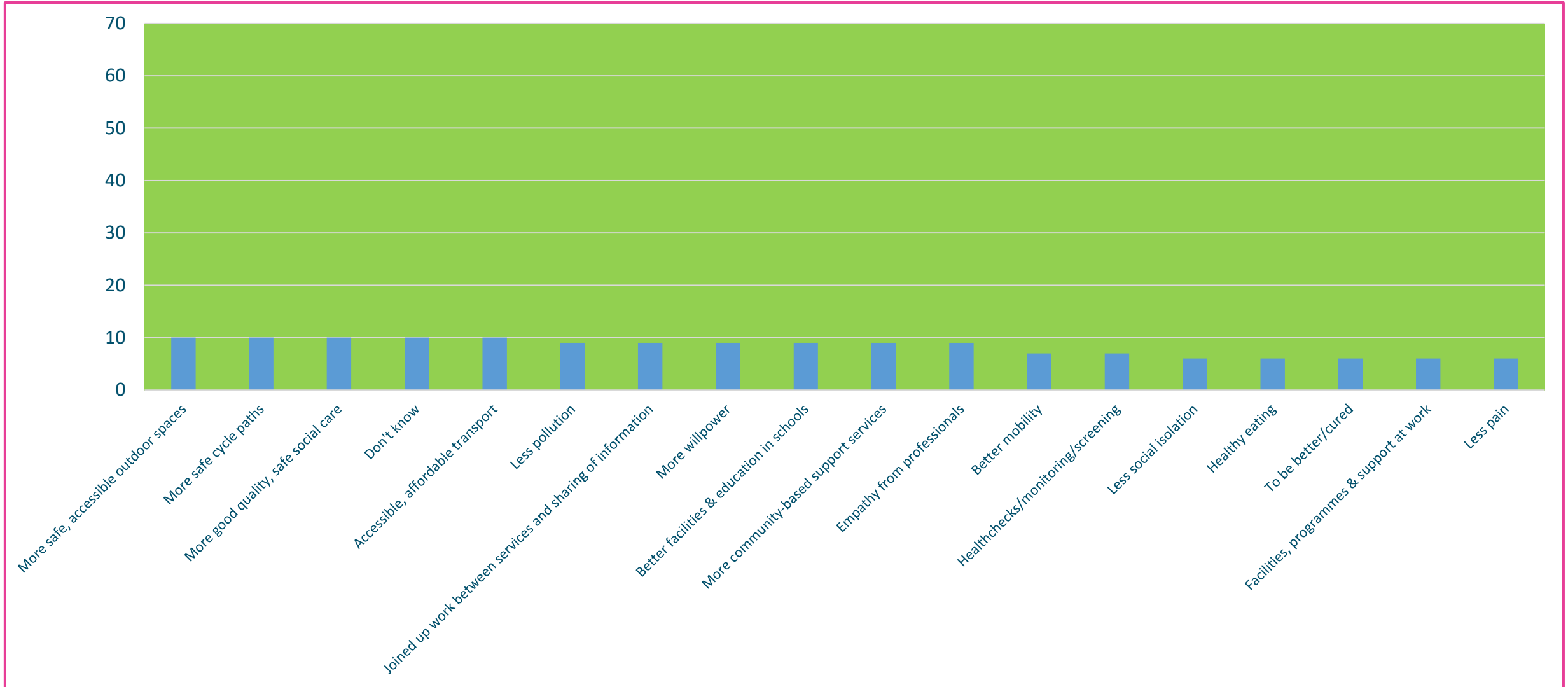
If there was one more thing that would help you and your family to live a healthy life, what would it be?

525 people responded (generating 671 comments)



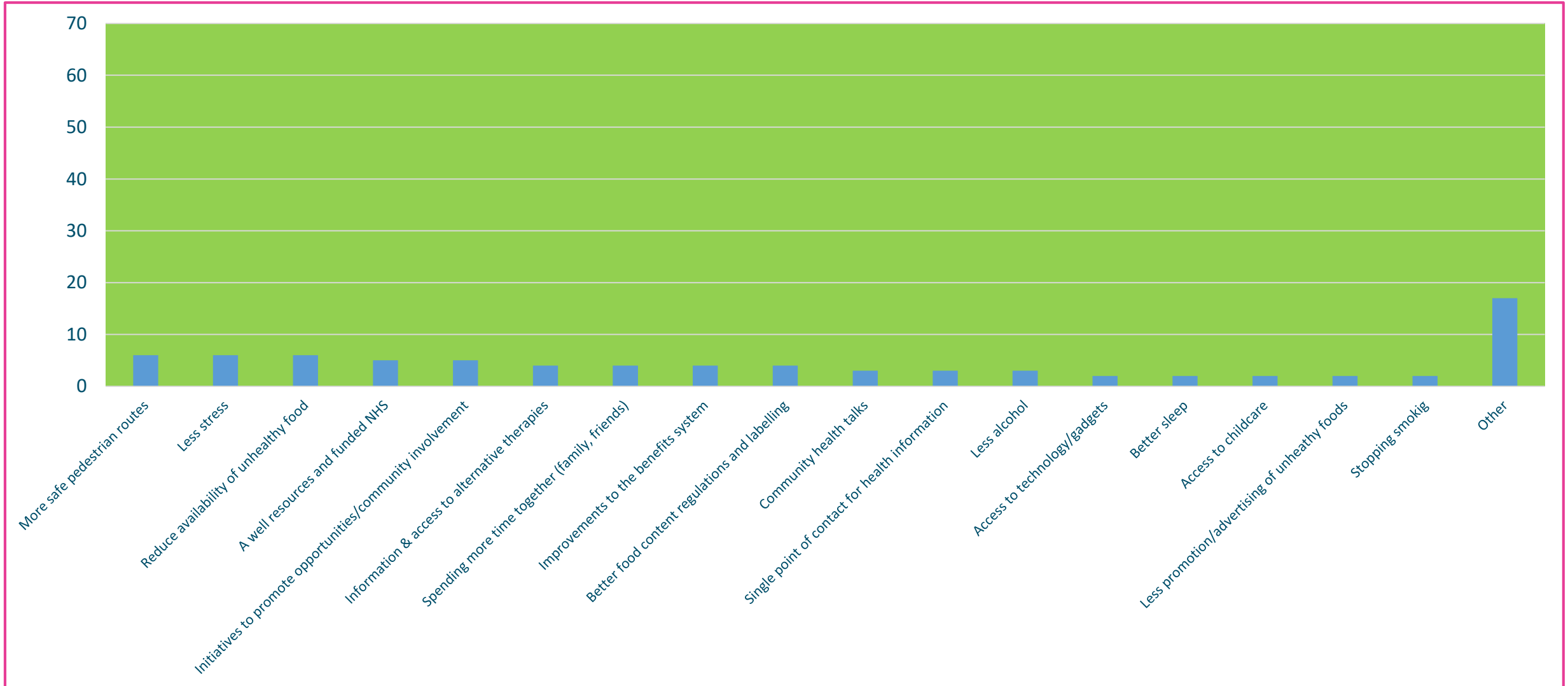
If there was one more thing that would help you and your family to live a healthy life, what would it be?

Continued....

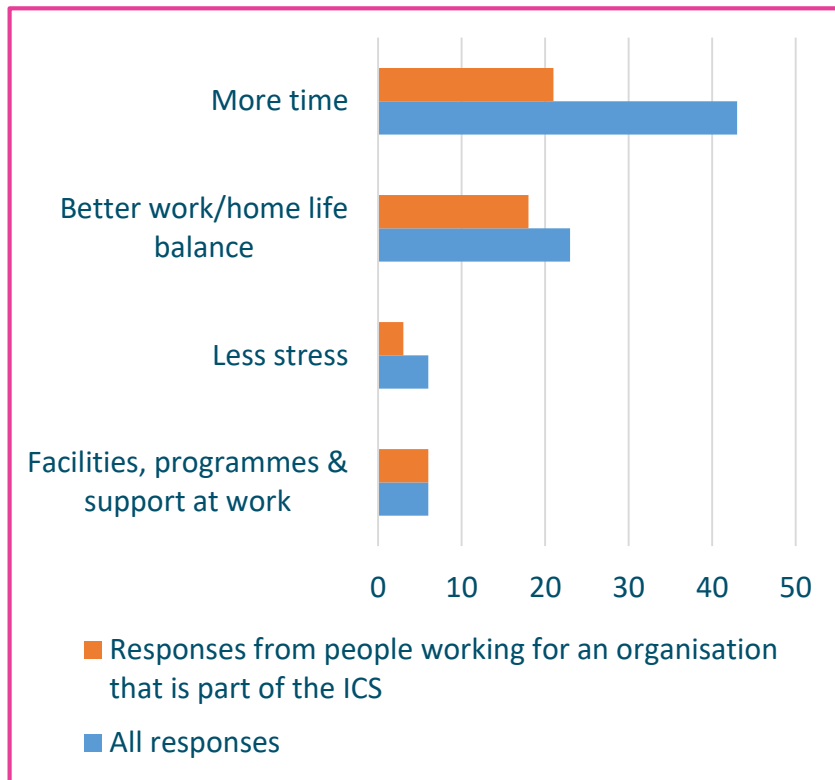


If there was one more thing that would help you and your family to live a healthy life, what would it be?

Continued....



The potential impact of work on health and wellbeing



“Having to work extra hours for no pay to be able to provide the level of patient care I would be happy with myself.”

In the earlier question *What, if anything, stops you and your family leading a healthy lifestyle* of the 308 people who responded with a **lack of time**, 65% were of working age (18-64) and 22.5% were of working age and unpaid carers.

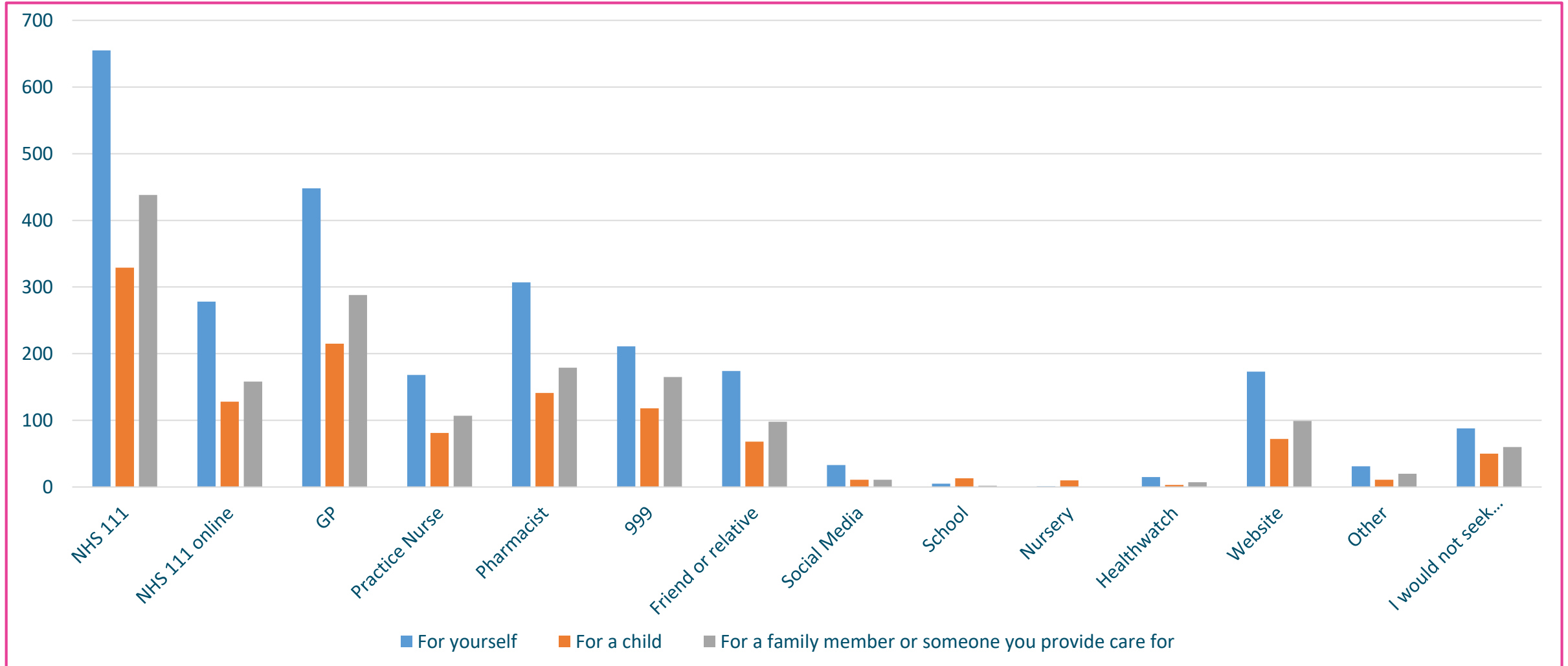
When looking at the responses for *If there was one more thing that would help you and your family to live a healthy life* more time, better work/home life balance, less stress and facilities, programmes & support at work are all linked to employment.

People working for an organisation that is part of the ICS represent 33.5% of the total number of people aged 18-64 who responded to this survey. Therefore the percentage of people working within the local health and social care economy in these **one more thing....** responses is higher than would be anticipated.

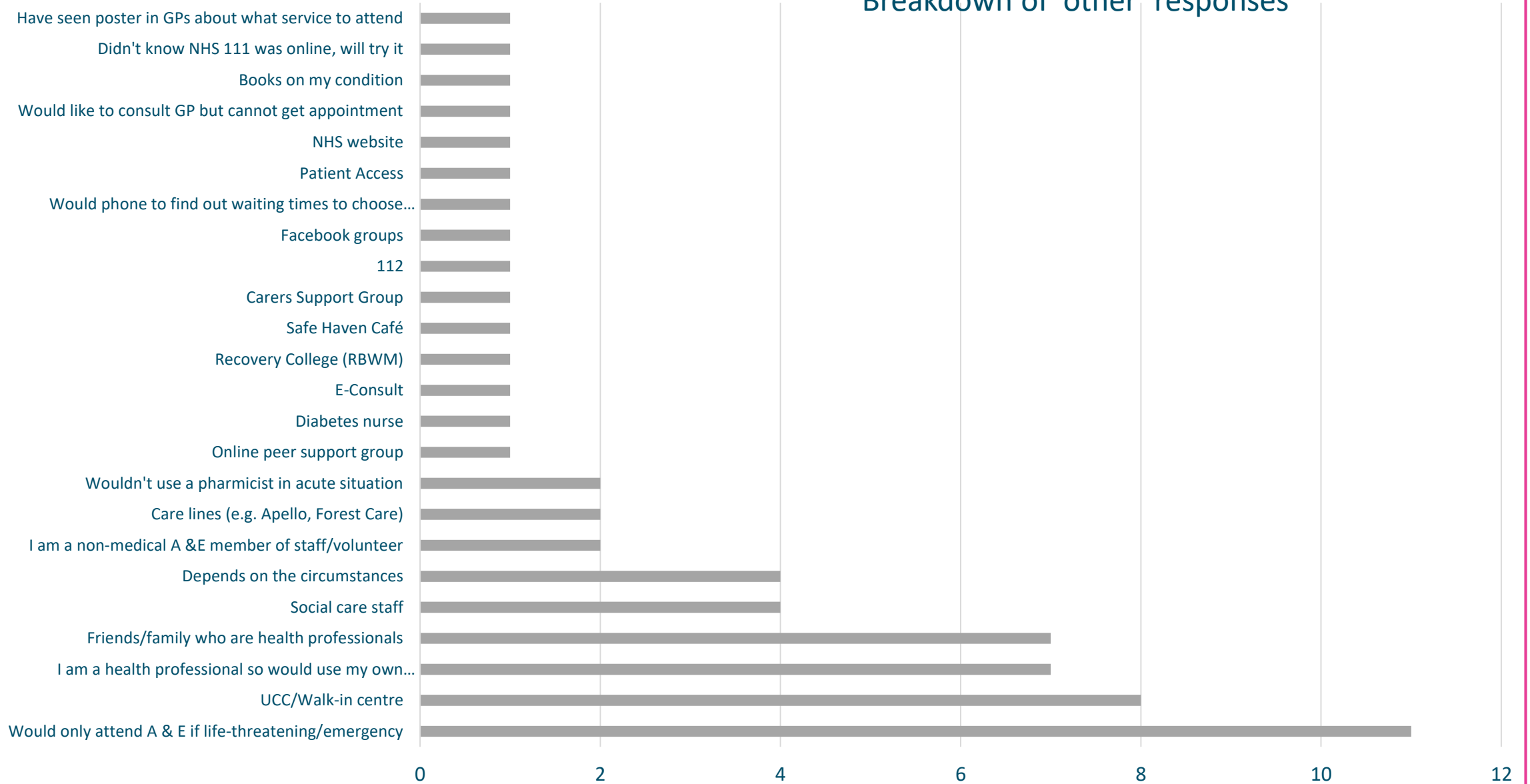
People cited long hours, pressure of responsibilities and commuting as contributing factors.

If you were considering going to Accident and Emergency, where would you seek advice or information before making the decision to attend? (select all that apply)

895 people responded

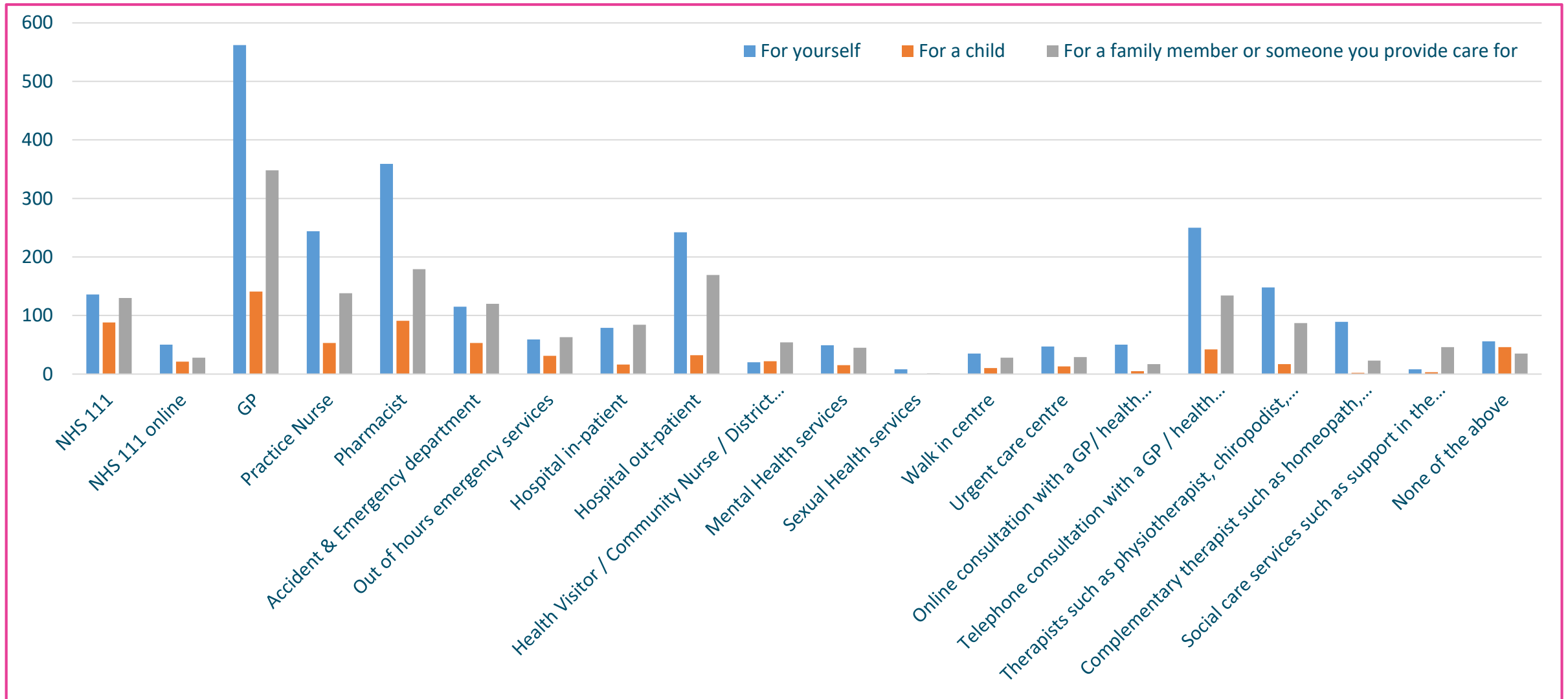


Breakdown of 'other' responses



Have you/someone in your family/person you provide care for used any of the following services in the past six months? (select all that apply)

895 people responded



Thinking about your most recent experiences of health and care, please tell us one thing that worked well.

716 people responded (generating 832 comments)

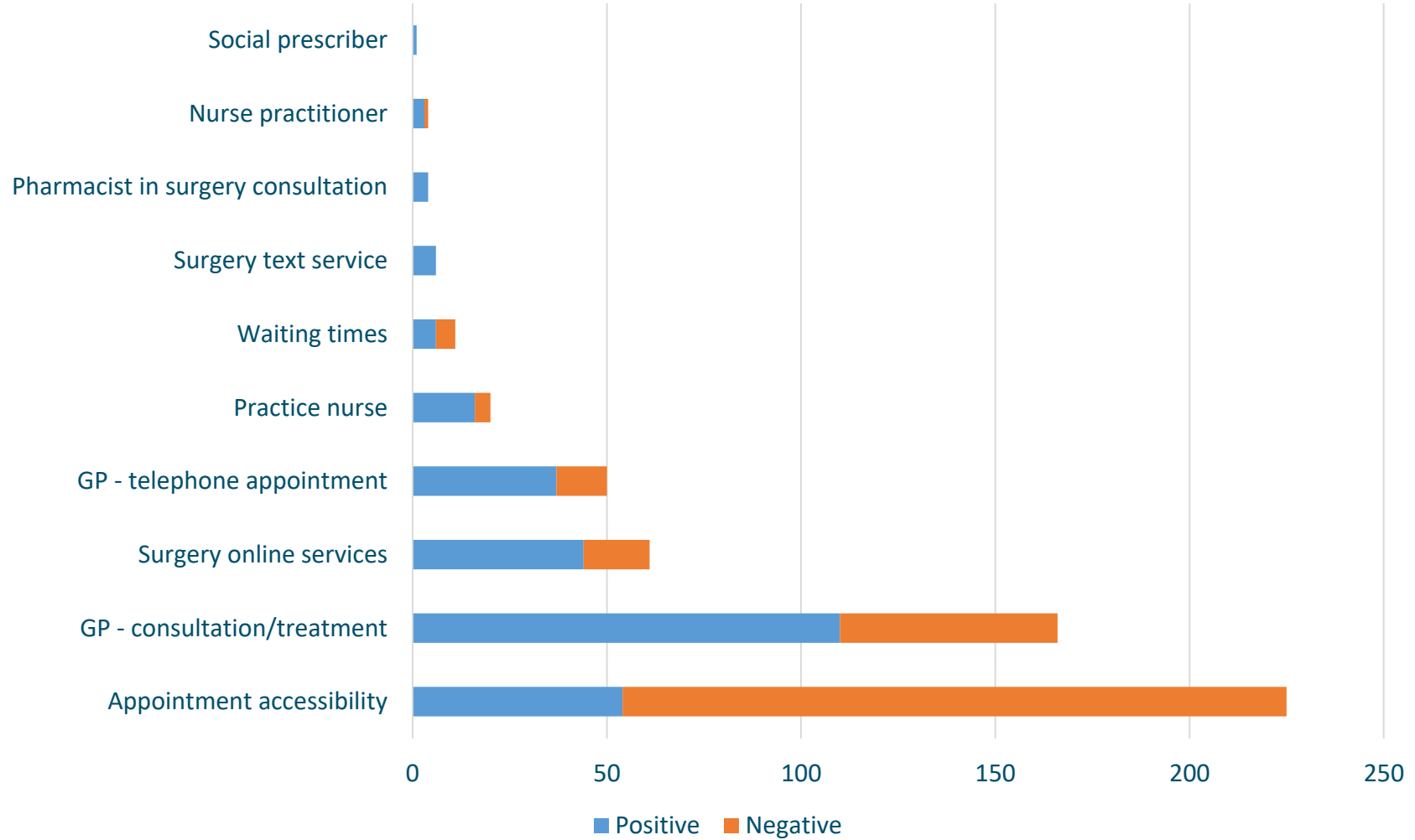
Thinking about your most recent experiences of health and care, please tell us one thing that could have been better.

683 people responded (generating 764 comments)

The responses for these two questions have been coded into 45 categories and grouped into 5 over-arching themes. The responses (what worked well, what could have been better) have been presented together for easy comparison.

Please note the different axis value (dependent on response rate) between each themed graph

Comments about GP surgeries



With a minimum of 1,984 interactions with GPs and/or surgeries reported, it is not surprising that the majority of comments received were about GPs and associated services and professionals.

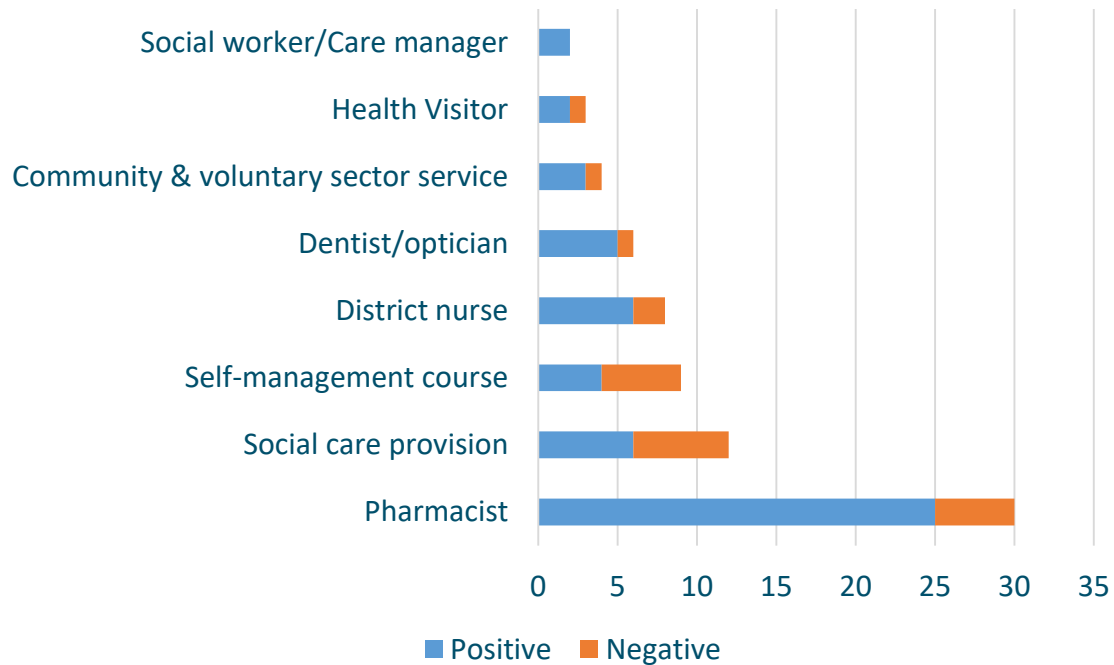
The majority of comments received about telephone consultations (74%) were positive with people commenting that they thought they were an efficient use of both GP and patient time; particularly for minor issues and queries. Where people thought this was an area that could do better there was an almost equal split between people who wanted physical face-to-face consultations and people who had other concerns such as: not being able to have a more specified time which would allow them to plan – especially if they were busy at work etc. and wanted to talk in private, missing visual conversation clues (skype and other video talk applications were suggested) and accessibility for those with hearing and other communication issues such as autism.

With online services again the majority of comments received (72%) were positive. Where the comments indicated the service could do better these were mainly about the limitations of the service (such as the type of appointments available to book and with what professional) and what functions are available; which vary depending on the surgery.

“E-consult is used at my surgery. It is an excellent way of contacting the GP and getting a speedy response.”

By far the majority of comments where respondents identify an area that could do better within GP practices, is appointment accessibility. 171 people felt this was an area that had issues and needed to be better. People told us about the difficulties obtaining same-day appointments (not being able to get through on the telephone or queueing at the surgery at 8am), unhappiness with triage systems and difficulties booking routine and follow-up appointments in advance, while others told us that they were not able to book appointments at times that suited them or that took into account their other responsibilities; working, being parents, being unpaid carers.

Comments about other primary care services, community and social care support



What worked well? – “Pharmacy based flu jabs”

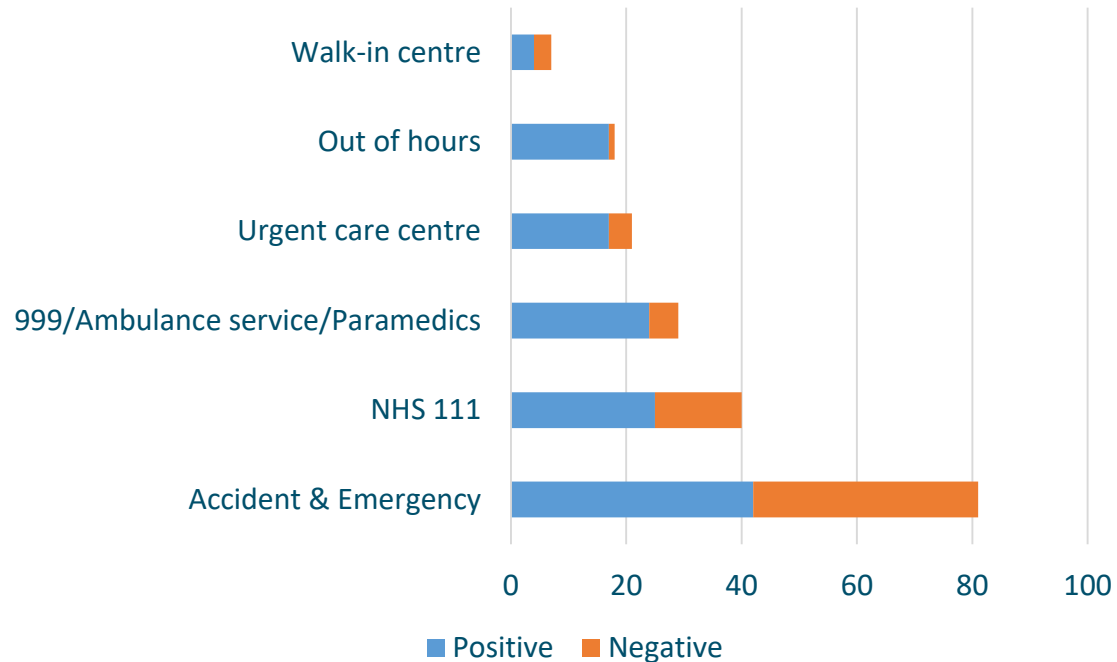
What could be better? – “Seminars that are bookable on specific conditions i.e. What to expect as you reach certain ages, managing joint pain, things to look for/be aware of, etc...”

The small amount of people that, in an earlier question, stated they, a child or family member had used a social care service in the last 6 months was low (57) which could explain the low number of comments about these services.

Given the many different types of social care delivered by local authorities, private care companies and the community and voluntary sector and the number of unpaid carers and the number of people aged 75+ who responded to the survey, the small amount of people who said they have used social care services and the low number of comments about them is unexpected.

People found the self-management course useful; the comments highlighted that frequency, length and expanding the types of condition covered by these would improve them.

Comments about same day and urgent care services



“Walk-in centre was clean and efficient. Knew how to treat a child with autism.”

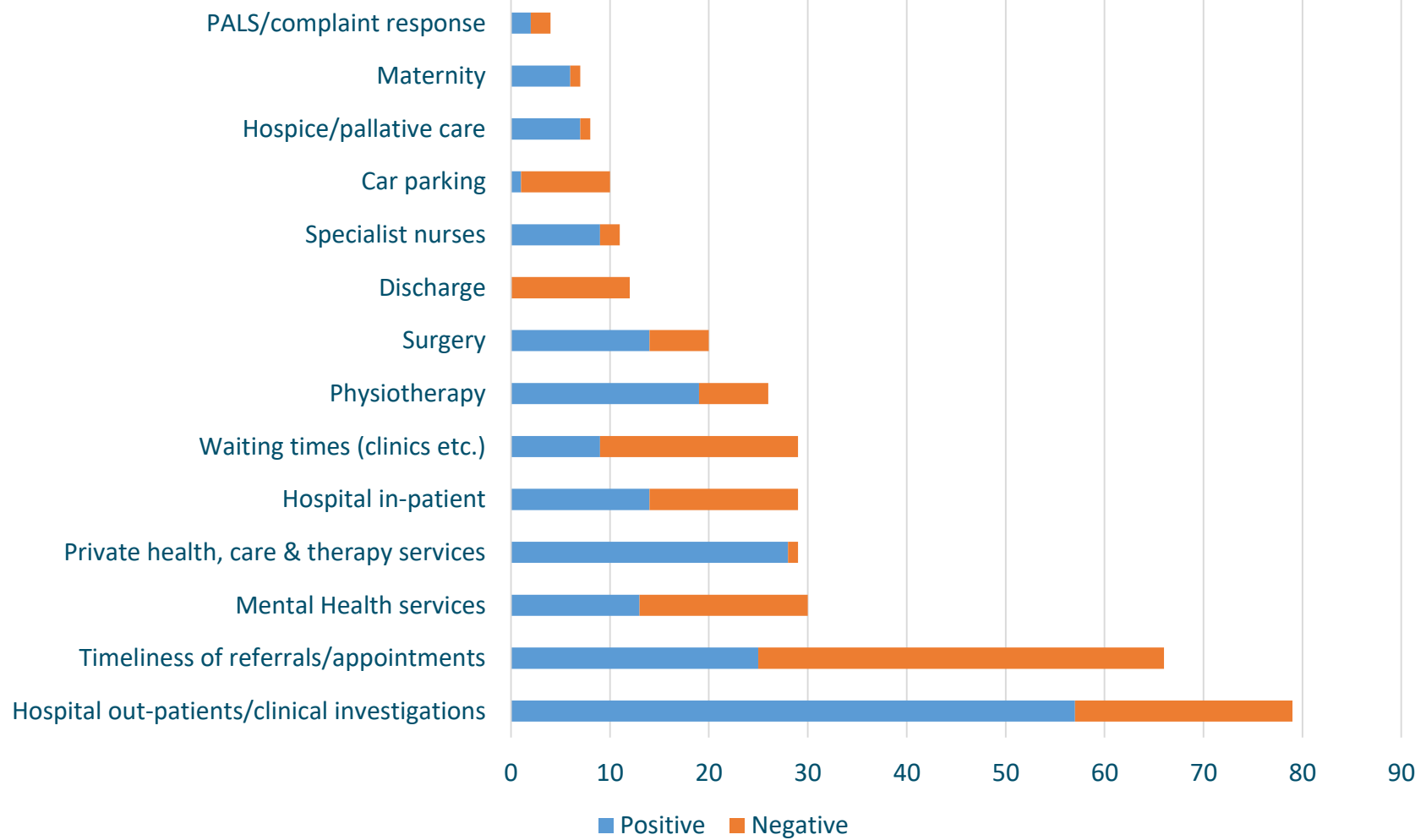
“I said no to a procedure (A & E) because I wanted a chaperone. He was not happy and it made me uncomfortable.”

9% of people who told us they have used the NHS 111 service (telephone or online) commented on the service. The majority of these comments (62.5%) were about the service doing well with people commenting they received the information or access to another service promptly using this route (e.g. out of hours doctors appointment, emergency ambulance). When people indicated that the service could do better it was mainly because they felt the ‘script’ or process was too long winded or they were unhappy with the service they were signposted too (e.g. make an appointment with your own GP).

There was a high level of satisfaction and praise for the 999 and emergency service.

People’s experiences with Accident and Emergency departments were mixed with many praising the treatment and care received. Areas where people said there could be improvements were waiting times (both to be seen and between tests and investigations), attitudes of staff, staff shortages and issues with the waiting room area. 3 people said they had been misdiagnosed.

Comments about hospital and secondary care services



“Cancer support is excellent. All those that I deal with give consistent information. No conflicting advice. This is important, as mixed messages would lead to a lack of confidence in the advice given.”

“Cancellation of an op. Small op but lots of discomfort. Cancelled at the last minute after a long wait. I went privately in the end. Same consultant but the next week.”

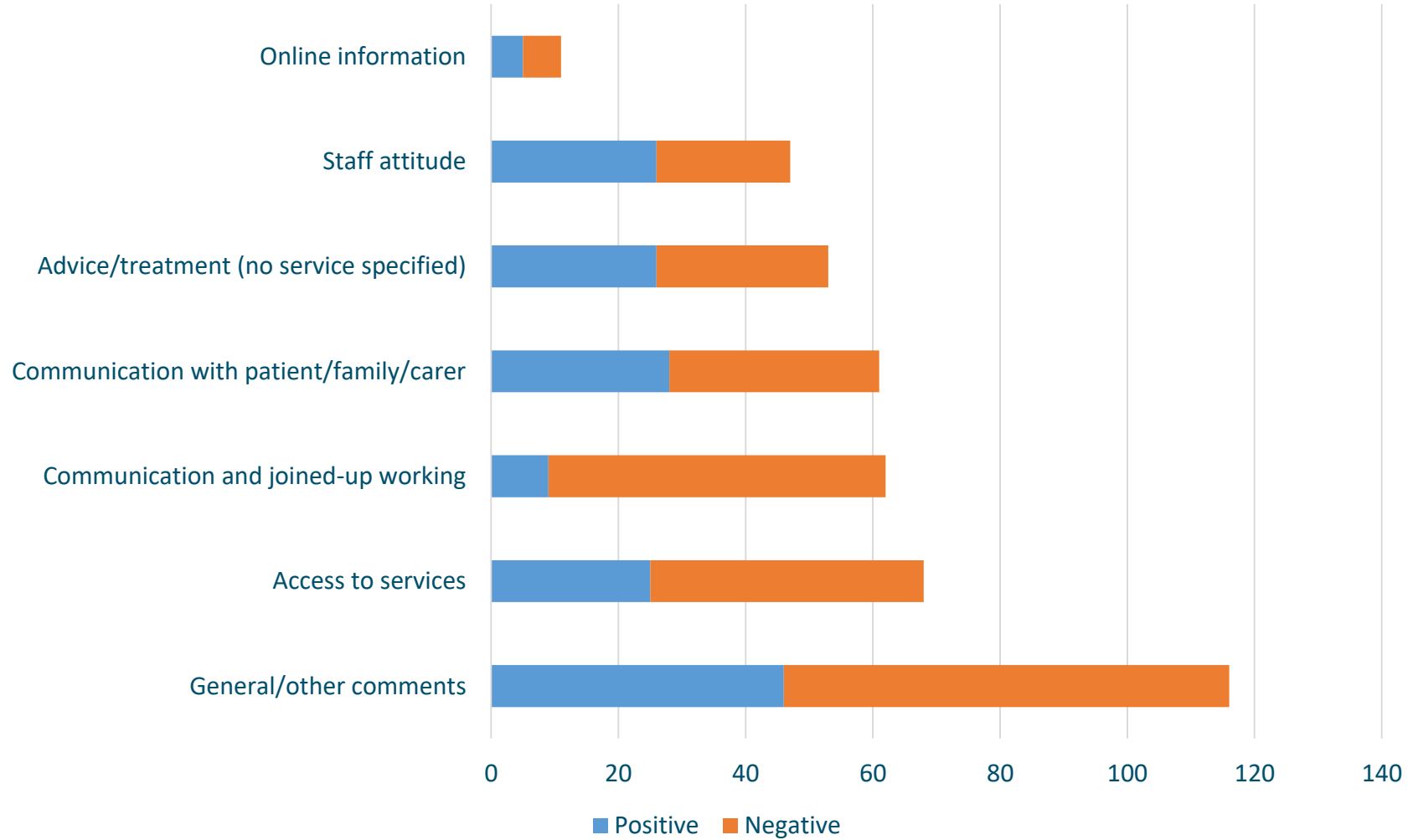
All the comments received specifically about discharge from hospital indicate this process could have been better. The responses are closely linked to another category (in the following graph) *communication and joined-up working*.

Twenty people commented about the surgery they have recently undergone. Comments described an excellent experience with the surgery itself but some people indicated that it could have been better due to cancellations of surgery, often at short notice, and with the aftercare.

Hospital in-patient experiences received mixed comments. Concerns were raised about staffing levels, particularly at weekends, and the impact this had on care received - including monitoring and observations not carried out as frequently as they should be. Two people felt that the care and support of their family member with dementia could have been improved.

62% of people who told us about their experience of referrals to specialist services and clinical investigations felt that the process could have been faster. Once attending hospital though, 72% of people highlighted this as an area where services did well. When they reported it could do better they mentioned they felt rushed in the appointment, that the consultant did not seem to have read their notes or reasons for referral and, in some cases, did not even seem engaged with the patient. They also mentioned that some clinics felt chaotic which then also had an impact on waiting times.

System-wide and general comments



47 people told us about staff attitudes. Although 55% of these told us about good experiences and interactions, 45% reported these could be better. It is apparent from the comments that staff attitude can completely change a person's whole experience.

Linked to staff attitude was communication with patients/families/carers. Most people understand that sometimes clinics can be delayed or that issues cannot be resolved immediately. If time is taken to convey these messages it reduces negative impact and gives people realistic expectations. People gave positive comments where they felt included in discussions and decisions about treatment and management of their condition.

Communication also needs to be timely. Withdrawal of audiology services from Windsor was mentioned negatively by 5 people – both in terms of communication but also the impact on their access to services. People from Windsor also mentioned their difficulties accessing Walk-in/Urgent Care centres.

“Patronising of patients is not acceptable.”

“Smear test, educational talk with the nurse who made me feel comfortable and at ease”

“In the hospital some of the consultants were really helpful and explained everything to me with regards to what I was going through.”

“I don't like the fact that I received a letter which stated hearing aid services were being withdrawn from Windsor and they needed the reply of where I would be choosing to go by the date stated - which was two days away from when I got the letter.”

“At a recent follow-up appointment with a consultant urologist we had positive discussion about continuing treatment where I was able to decide what the next steps should be.”

57 people commented on the advice or treatment they were given that could not be attributed to a specific service. 4 people did say that they did not like just being told to search for more information on their condition online; they would appreciate some more specific signposting such as sites to visit. One person suggested being shown videos to demonstrate aftercare procedures (such as sinus washing). Frimley Park Hospital and the NHS have official YouTube channels.

85.5% of the comments received about communication and joint working between different departments and services of the system were about needing to improve. This also impacted on other areas such as discharge and referrals. Some comments (including from those working within the system) suggested that improvement in this area would not only improve patient experience but also the system's efficiency.

“Was given new style adrenaline pen and not shown demo model.”

“Am not sure the AE dept. could /did access my medical records.”

“Need better integration between services at CMHT and GP. Drugs from CMHT have caused weight gain and diabetes, but no holistic approach available.”

“My husband had recently had severe side effects of a drug. Our PD nurse very helpful liaising with us, consultant and GP.”

“Most of the poorer care comes from terrible communication and misinterpreted information”
(from someone who works within the system)

“Virtual IBD clinic saved me having to take time off work for an appointment.”

“Too much emphasis on having to phone which is very difficult when one is deaf.”

“A physiotherapist referral for my son at Farnham Centre for Health. Efficient service and local to us.”

“Social services have been unwilling to provide care services based on needs assessment - rather they limit it due to cost.”

“I would like the clinics to be more accessible in Windsor. Sometimes I have to travel to Bracknell, Frimley and Slough.”

“Services are good when you can get them but we all know they're under resourced and it shows in the length of time you have to wait. The staff aren't the problem, it's the lack of them.”

“Great service. Excellent treatment!”

Access to services (excluding GP surgeries which were detailed separately) generated 67 comments.

36% of these were positive with mentions of online clinics, on the day urgent care services, the Farnham Integrated Care Centre, walk in x-ray facilities, mental health drop-in facilities and Bracknell Forest Community Network (as a way to access other community support).

64% said access to services could be improved with mention of travel clinics, sexual health services and specialist dentist services. Wider access issues such as geographical location (Windsor), distance to specialist hospitals (London, Oxford), access for people with disabilities and lack of affordable public transport were also mentioned.

Connecting with local Healthwatch

Would you like to sign up to your local Healthwatch?

896 people responded

Yes	291
No	437
I am already signed up	168

Respondents were asked for their postcode so that their contact details could be passed to the correct service. Not all respondents provided this and reminder emails have been sent. To date 202 people have been connected to their local service. The remaining 89 email addresses will be deleted by the 14th August 2019 if no postcode received.

Summary of key findings of the survey

Below the key findings of the summary are summarised. This will help shape future engagement work and the work plan of the ICS and individual partner organisations.

- Residents of Slough, men and those under 35 were under represented in the responses received.
- More people regularly take prescribed medication than identify with having a long-term condition and/or a disability.
- 286 people identified themselves as unpaid carers (21% of respondents). Of these, 155 were working age females.
- 20% of respondents said they worked for one of the organisations that make up the Frimley Health and Care ICS.
- 76% of people rated themselves as very confident/confident in respect of knowing where to find helpful information for themselves when unwell.
- There were lower levels of confidence reported when looking for information for an unwell child or family member/cared for.
- Results did not show any positive impact on confidence levels of knowing where to find helpful information for those respondents working for an ICS partner organisation.
- Despite the high levels of confidence reported using digital technology to find information, this is not reflected in the use of digital technology to make contact with services, particularly in regards to a child or family member/cared for.
- Respondents indicated that access to the help and treatment they need at a time that is right for them and professionals that listen to them with respect are more important to them than understanding the services available to them, access to information and knowledge to prevent ill health and to make decisions about care.

- The top three barriers people identified that prevented them from leading a healthy lifestyle were:
 - A lack of time
 - Conflicting advice and information about healthy lifestyles
 - A lack of support from GPs and health professionals
- In the previous six months, the top three sources of information accessed on staying healthy and well were:
 - Health websites online
 - Family, friends or colleagues
 - Health apps
- The top three topics people told us they were seeking information and advice on were:
 - Health and wellbeing
 - Long-term conditions (physical)
 - Minor illnesses/injuries
- The top three things identified that could help people live a healthy life were:
 - Easier/better access to GPs/Primary care
 - Affordable/free gym & leisure facilities
 - More time
- The survey results indicate a negative impact of work on health and wellbeing.
- The negative impact of work was higher than expected on people working for an organisation that is part of the ICS.
- When asked where people would seek advice and information before deciding to attend an Accident and Emergency department, the top three responses were:
 - NHS 111
 - GP
 - Pharmacist

- When asked what services people had used in the last six months, the top three responses were:
 - GP
 - Pharmacist
 - Hospital out-patient
- People were asked, based on their most recent experiences, to share things that worked well and also things that could be better. The majority of comments received concerned GPs and associated services and professionals. This was not surprising given the high number of interactions previously reported (1,984). The greatest number of positive comments (110) were about the consultation and treatment received. The greatest number of comments where there could be improvement (171) were about appointment accessibility.
- Looking at comments on other services, areas where comments about improvement were equal to or greater than positive comments were:
 - Social care provision
 - Car parking (hospital)
 - Discharge from hospital
 - Waiting times (hospital clinics)
 - Hospital in-patient
 - Timeliness of referrals/appointments
- Looking at comments about the system as a whole, the area with the greatest number of comments about improvements in relation to the number of positive comments is 'communication and joined-up working'. (9 positive comments compared to 53 comments about improvements needed).
- 291 people expressed an interest in further engagement with their local Healthwatch service.

Quote on behalf of the Frimley Health and Care Integrated Care System

The partners in Frimley Health and Care are in the process of developing our 5-year strategy for the Integrated Care System. This is an opportunity for us to collectively develop our strategy and ambitions, with shared priorities to focus our collective energy, and make sure the way we work together will enable us to deliver. Working collaboratively with all our partners in the system, our intention is that the Frimley Health and Care system Five Year Strategy will be developed through high levels of engagement. It will reflect local needs, issues and priorities and be ambitious for our population and system. It will tackle the wider determinants of health and wellbeing for our population and it will be rooted in evidence - decisions will be based on what people tell us, alongside good data and intelligence.

Working with our Local Healthwatch to engage with our local community and to produce a bespoke survey has been a key part of this engagement. The response rate was one of the highest in the country and along with the focus groups and attendance at community events held to support specific community groups, this provided us a great deal of insight into the views and opinions of our local population.

The results of this work are now being used to help shape our strategy for the next five years. Alongside our stakeholder engagement and insight work we have a detailed picture of the health, care and wellbeing priorities of local people and those that work as part of the system. Through a dedicated engagement programme – our ‘Inspiration Station’, we have shared the results of the survey that formed a key part of the discussions. We will continue to ensure that the voices of local people are captured as we move into the next phase of delivering and implementing our new strategy and we see Healthwatch as playing an important role in this.

We are committed to providing up to date information and further opportunities for involvement. For up to date information please see the Frimley Health and Care website: <http://www.frimleyhealthandcare.org.uk>

We would like to extend our thanks to everyone who completed and engaged with the survey and our local Healthwatch and Frimley Health and Care ICS partners for their work in the designing and promoting of the survey.'

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Andrea McCombie
Healthwatch Bracknell Forest
September 2019