

whot

would you do?

It's your NHS. Have your say.

**The NHS Long Term
Plan Engagement
Programme 2019
Greenwich**

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About Healthwatch Greenwich

Healthwatch Greenwich is one of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act 2012. We have a dual role as champions of the rights of users of publicly funded health and social care services for adults and children, and to hold the system to account for how well it delivers services and engages with the public.

We collect feedback from people of all ages and from all communities. We do this through local voluntary sector organisations and community groups, through our feedback centre on our website, via social media and telephone calls, during listening sessions at patient and public service user meetings, events and drop-in sessions at a range of venues across the borough. As part of our remit to gather views, we also have the power to 'enter and view' services and conduct announced and unannounced visits.

Introduction

The NHS Long Term Plan sets out improved funding for the NHS (increase of 3.4% a year over the next five years, compared with 2% over the past five years) and opportunities for better outcomes as a result of redesigning patient care. The NHS will:

- Give people more control over their own health and the care they receive, encourage more collaboration between GPs, their teams and community services, by introducing 'primary care networks'. NHS organisations will work more closely with their local partners, as 'Integrated Care Systems', to plan and deliver services to meet the needs of local communities.
- Increase attention on prevention and health inequalities, offering more support to help people stop smoking, overcome drinking problems and avoid Type 2 diabetes, focusing on communities most affected by these problems.
- Increase the NHS workforce, training and recruiting more professionals and making the NHS a better place to work, so more staff stay in the NHS and feel able to make better use of their skills and experience.
- Increase the use of digital technology to provide easier access to services and health information and improve the planning and delivery of services based on patient and population data.
- Reduce duplication in how health services are delivered, use its buying power to get products at a lower price, and reduce spend on administration.

As part of a national survey, Healthwatch Greenwich were asked to gather local people's experiences and views on what the NHS can do to help them and their communities stay well and to make the support available better.

To do this in a consistent way and ensure good quality data collection, we used two surveys provided by NHS England (<https://network.healthwatch.co.uk/guidance/2019-02-27/nhs-long-term-plan-survey-questions>). One survey is designed for those with one or more long-term conditions and the other is designed for those not living with a long-term condition.

Summary of findings:

What matters most to people in Greenwich?

Through our community activity, survey and two focus groups we gathered the views of 155 Greenwich residents (143 via our questionnaire and 12 from our focus groups) on how health and care could be improved. Greenwich residents identified three recurring themes:

- Barriers to accessing health and care services
- Accurate and accessible information
- Services and facilities to help stay healthy.

Barriers to accessing health and care services

Residents told us it was not always easy to navigate services and get access to the care and advice they needed. Getting an appointment to see their GP could be difficult. Not all practices answered telephone calls quickly and, once they did, appointments were not always available within a week.

Many residents told us that the opportunity to use emails, apps or other digital methods to access health services would be welcomed - but only if this corresponded with the availability of more in-person appointments when required. Others told us that the use of more digital tools would be a barrier and make it harder for them to access health and care services, and some were concerned about how their data would be shared and data security.

With limited choice available, accessing support and services was also a challenge for those seeking care in their own homes or for family and friends.

Accurate and accessible information

Knowing who, or where, to go to for help and support on health and care matters was not always straightforward. Clinic and hospital appointments did not always carry the full location information and, if not already familiar with the building, could lead to unnecessary delays and frustration.

Greenwich residents with more complex health needs told us that a lack of accurate and accessible information made navigating multiple services difficult.

Although broadly aware of how to improve health and the need to make positive lifestyle choices, residents told us that finding information on staying healthy can be confusing. Information on the web sometimes made it difficult to know what to do. With so much information available through internet searches and on social media it's hard to tell which information is correct or reputable.

Services and facilities to stay healthy

Everyone we spoke to was aware of the need to take steps to stay healthy, or become healthier, but often felt it was difficult to do so. Barriers included the high cost of joining a gym and accessing other exercise facilities. Others spoke about the lack of access to affordable, healthy food (in comparison with the perceived easy access to convenience food and take-aways). Having the time to cook and prepare healthier foods is a challenge for many. Residents told us of the importance of linking mental wellbeing with physical health, but a lack of opportunities that offered both, such as community groups and organised activities in green or natural environments.

Recommendations

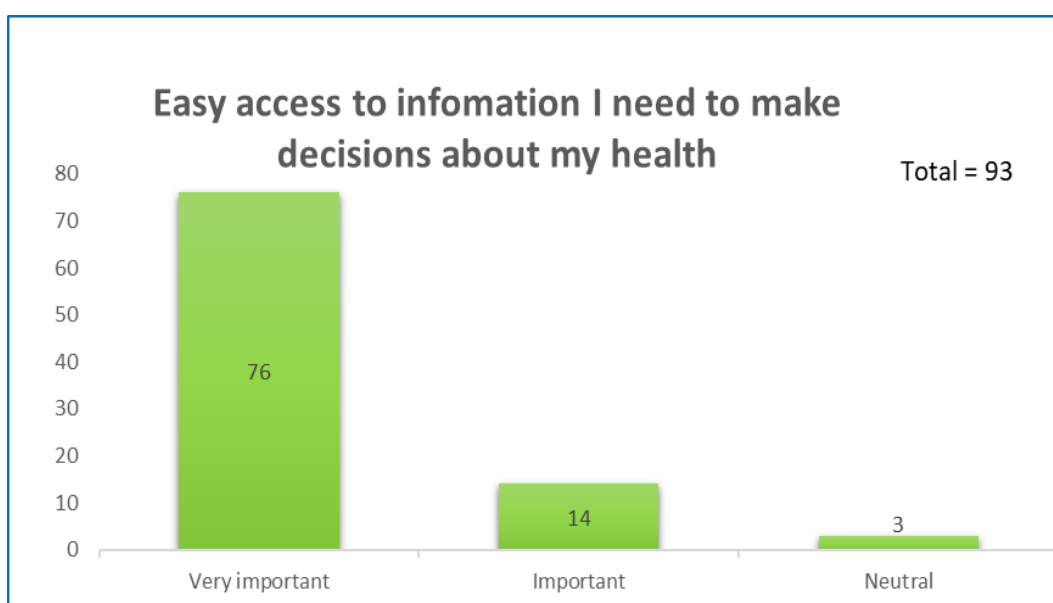
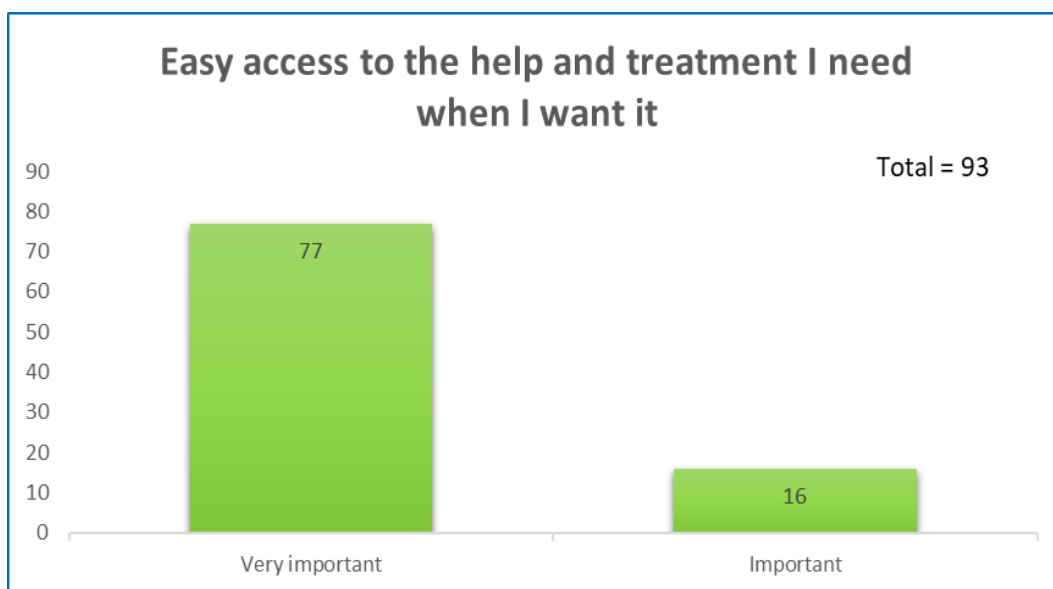
- 1: Wider range of digital tools to provide easier access to health advice and services.
- 2: Greater availability of 'same week' GP appointments to provide rapid access when needed.
- 3: Clearer signposting/easier access to information to help patients choose the service most appropriate for their needs.
- 4: More community-based support groups/services to help residents manage their own health and stay well.
- 5: Subsidised schemes to access activities/gyms/healthy diet choices to help people stay healthy for longer.

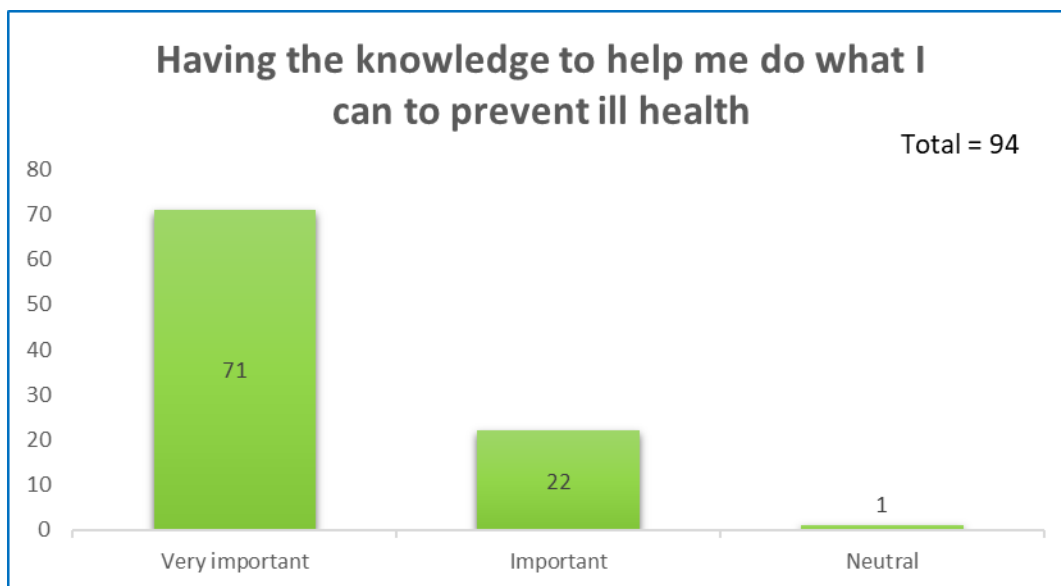
General survey report

What do I need to live a healthy life?

When asked to rate the most important factors to living a healthy life the top three answers were:

- 1: Access to the help and treatment I need when I want it, with 83% of respondents ranking it very Important
- 2: Easy access to information to help make decisions about my health and care, with 82% of respondents ranking it very Important
3. The knowledge to help me prevent ill health, with 76% of respondents ranking it very Important.





When asked, “If there was one more thing that would help you live a healthy life, what would it be?” responses included easier access to healthy food at an affordable price and the time, ability and confidence to cook from ‘scratch’. Greenwich residents said the cost of ready-made, highly processed, instant meals are often cheaper than more healthy alternatives. Few people have the time to shop for more healthy choices and not everyone has the time to cook. Using gyms to be more active is expensive and not everyone lives near a green space they can easily access. Living busy lives is stressful, making it harder to make more healthy lifestyle choices.

Healthy diet

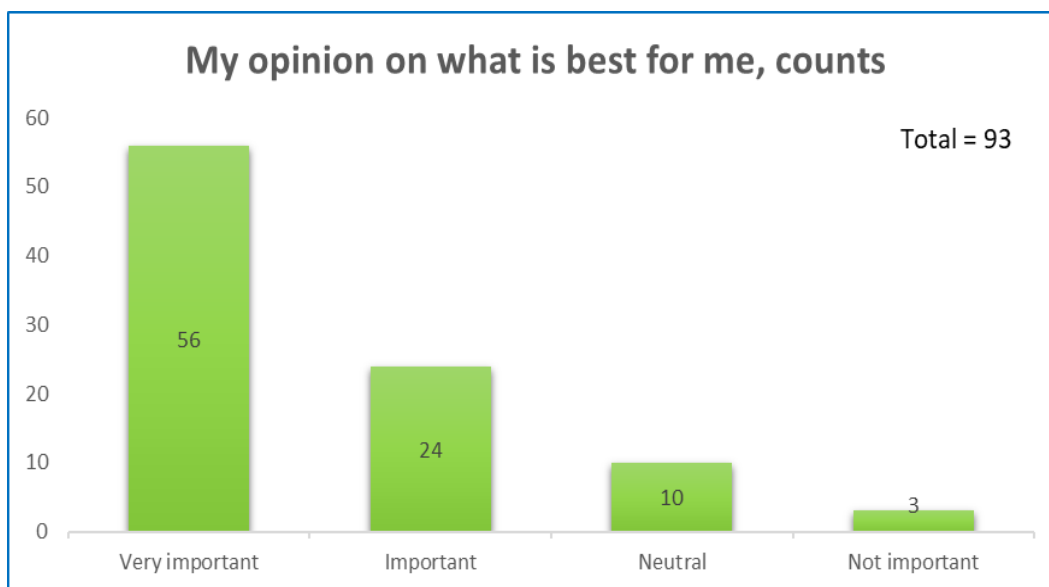
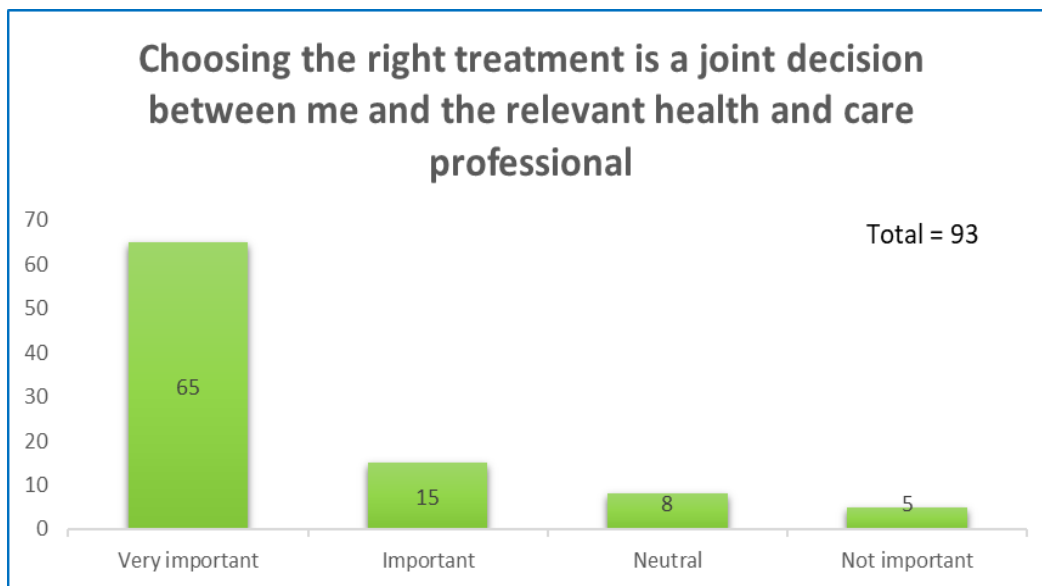
Greenwich residents said it is much easier to find and buy a takeaway than fruit, vegetables or other healthier food choices. One resident pointed out that a single banana costs 25p+ in smaller supermarkets, making buying fruit for a family expensive. In comparison, cheap, convenience, pre-packaged, highly processed meals are convenient options. Overall, awareness of what choices to make and what foods are healthy is clear but the means to make changes is limited.

Being active

Greenwich residents said the cost of gym memberships is too high. Using gyms and exercise classes on a regular basis is too expensive and not everyone has easy access to a park or green space they can use for free. Air pollution and crossing busy roads to access parks and gardens put some people off using these facilities. Many comments suggested the need to make radical or significant changes to increase physical activity rather than making small changes in everyday routines. Residents were aware of the need to be more physically active, but the means of doing so are limited.

Wellbeing

Linking good mental health with good physical health is very important. Residents said low mood, or when feeling stressed, led to being less physically active. We were told being outside and experiencing nature is a good way of improving both psychological and physical health, particularly through group activities. A chance to make friends or meet neighbours and others in the local community while taking part in some form of physical activity would be welcomed.



When asked to name one more thing that would help them to manage and choose how the NHS supports them, Greenwich residents said being listened to, easier access to GP appointments (and other services), longer consultation sessions, regular health checks and more use of digital technology, such as via mobile apps.

Being listened to

Greenwich residents with more complex health needs told us they did not always feel fully listened to when discussing health and care options with professionals. Some residents said they did not feel their care and treatment was always tailored to their needs and experiences. This reduced confidence in their healthcare professional and made it harder for them to comply with treatment advice or attend referrals and follow-up appointments.

Greenwich residents with more complex health needs told us they want more time to speak to their GP. We were told that 10 minutes is hardly long enough to discuss one health concern. For those with more than one health issue, 10 minutes is inadequate and being told to make another appointment was viewed as an inefficient use of the time of healthcare professionals and patients. Some patients told us they had requested double appointments and been refused.

GP access

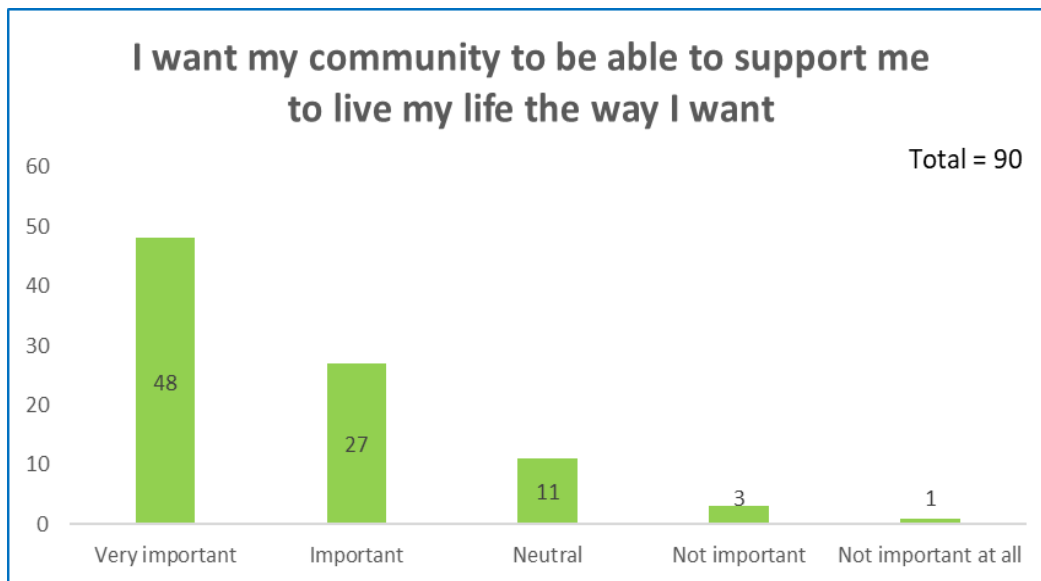
Easier GP access is an issue for many who took part in our survey and for those we spoke to as part of our wider engagement. Not getting through on the telephone in a timely manner and being put in an automated holding system for a lengthy period is a source of frustration and anxiety. One Greenwich resident told us about her experience of being in an automated queuing system and being told she was number 21 in line to be answered. She did not wait and took her daughter to A&E instead.

Greenwich residents told us they often had to wait for a week for an appointment. Of those we spoke to, many said that anything beyond 3 days was too long to wait. One person we spoke to was so fed up, he had stopped trying to make a GP appointment and (whenever he needed medical advice) simply used urgent care or other facilities instead.

Some residents said they would like their GP surgery to offer regular, annual, health checks. We were told about similar schemes operated by private healthcare providers that offered an 'MOT' type of check-up for patients that incorporated guidance and advice on how to stay healthy as well as picking up early indications of 'something not quite right'.

Digital access

Some residents want more digital technology to access health and care information and advice. Booking appointments and receiving prescriptions via mobile phone apps, using email or text to get information and having consultations via telephone or Skype would be welcomed by some. For others, using digital technology is a barrier, making it harder to access information and advice. The use of digital technology is a concern for some Greenwich residents with little or limited English. Others told us they don't have the skills or confidence or equipment to use digital technology (not everyone has a smartphone). They told us they would find it harder to get the health and care information and help they need. Some residents told us they felt increasing use of technology is a way of saving money and not a good way of addressing demand for services.



When asked what else would help them stay independent and healthy for longer, residents said it was important to have community based care and support services and to be able to find care workers to receive the support they need to remain independent.

Community based care

Getting the right community-based support is a concern. We were given examples of Greenwich residents struggling to find and access support services for themselves and, more commonly, for relatives and friends they were looking after or supporting. Nearly all the stories shared with us were from those looking after others with dementia and/or with mental health issues such as depression and loneliness. We were told there are not enough support groups and day centres. Where provision is available it was sometimes difficult to access - not everyone can use public transport and not everyone has the confidence to join a group.

One way to keep healthy and independent is to use a bespoke or more tailored service. Residents said that having access to a personal trainer or just a walking buddy would make a big difference. Access to a wider range of local community activities would help too - not everyone likes or would use gym facilities. Yoga, meditation, dance classes and even a 'Greenwich Strictly Come Dancing' would tempt some residents to stay as healthy as possible as they get older.

Care workers

Friends and relatives of those needing care in their homes told us that, with a limited pool, finding care workers was a challenge. It was hard to find the right person or someone they felt completely comfortable with. We were told that strict time limits for care workers means that just getting basic care tasks completed is a challenge, often leaving no time for anything else like simply sitting down together and having a chat.

Residents told us they want:

"More services should be available in the community"

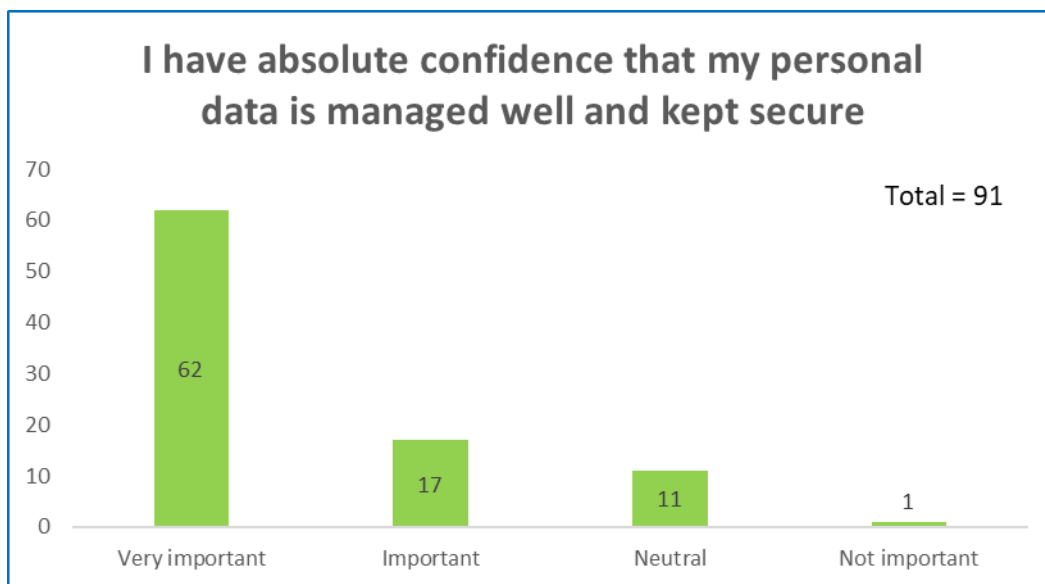
"Free access to a personal trainer to keep my muscles strong and prevent frailty!"

"More availability of care workers"

How do I interact with my local NHS?

When asked “What is most important to you when interacting with the NHS,” the top two answers were:

- 1: Ensuring that the NHS is keeping their personal data secure (87% rated as important or very important)
- 2: Being able to communicate with their healthcare professional regardless of location (87% rated as important or very important).



When asked for further comments, we were told that more technology should be used to streamline information sharing and record keeping to improve continuity of care.

Like earlier comments, residents said technology would make services more accessible; for example, more online options for making appointments and getting basic health

information and advice from their GP surgery. However, some residents worried about security and how secure their personal information would be when shared electronically. These residents want an improvement in the sharing of patient information between departments and clinicians but they are also worried that their data might be less secure.

Residents want:

“Better use of technology across the NHS. There should much more that is standardised and mandated; linked systems allowing access to patient records”

“Better communication of my care between hospital and community services”

“Online consultation with a GP from my own practice”

“Access to NHS doctors and treatment details online.”

Specific conditions report

A total of 39 residents completed a questionnaire. Many were living with mental health issues, autism, learning disability and a variety of other health complaints including diabetes and arthritis.

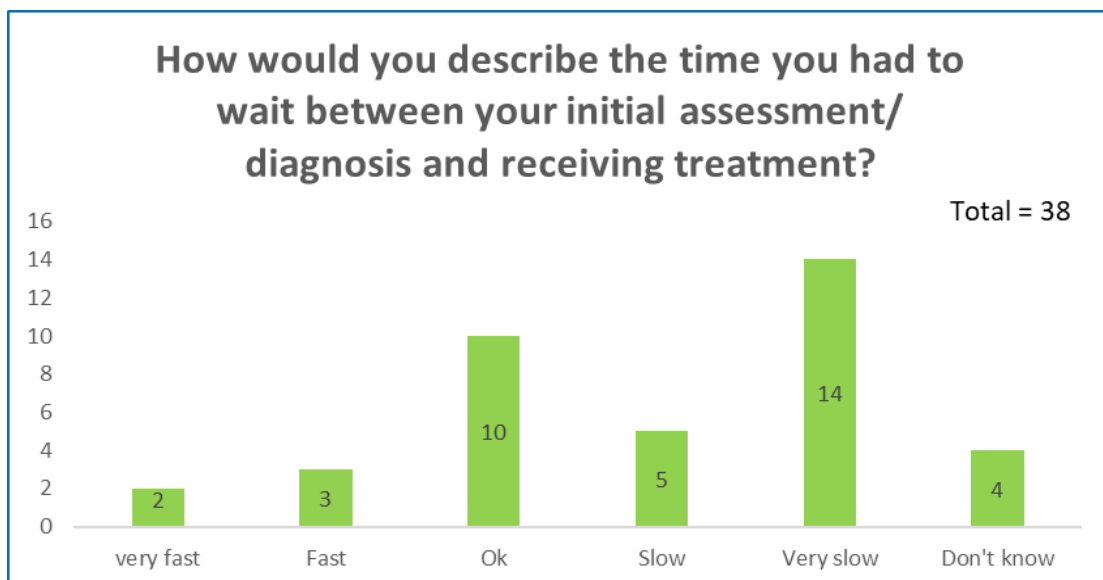
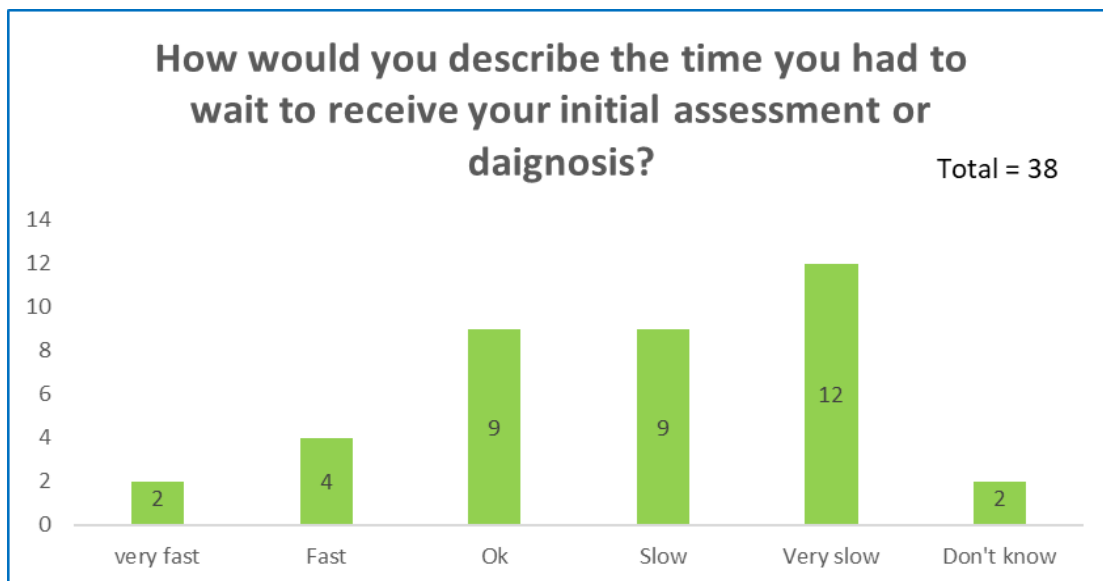
We were told:

- There are long waiting times between referrals and assessments
- There is a lack of crisis support services in the borough as well as a lack of long-term support, particularly for patients with less severe mental health problems and
- Timeliness of communication between professionals and patients is inconsistent and (for some) too slow.

When asked how long they had to wait between assessment and diagnosis, more than half described the wait as either slow or very slow. Several described wait times anywhere between 5 weeks and more than 2 years, with little to no communication from services during this period.

After accessing help and support, most were positive about the professionals they spoke to and the quality of care they received. When asked ‘what worked well’, residents listed support teams, care workers, and (for some) frequent and timely communication with clinics and receiving appropriate care and treatment soon after diagnosis. For some services, the wait time between diagnosis and treatment is slow, with half the respondents describing the wait as either slow or very slow.

Residents completing our specific conditions survey reported ‘lack of information’ as a significant barrier to accessing services. We were told it was difficult to know what services are available and how they worked. Many found it difficult to access and obtain information about what support is available. Moreover, not all had access to internet services and some said they did not have the skills to find information this way.



Key issues in focus

In addition to the survey, Healthwatch Greenwich with Oxleas ResearchNet carried out in-depth focus group research in two groups with 12 participants. All members of our focus groups had been diagnosed with mental health issues for some time. In addition to mental health difficulties, all were living with other conditions including asthma, diabetes, epilepsy and learning disabilities.

Keeping well

Many spoke movingly about their experiences and often just wanted healthcare professionals and the wider community to acknowledge that they are in pain. *"[It's like] a roller-coaster that you can't get off,"* said one.

When asked how the NHS could help them manage their own health and wellbeing, all felt they would struggle to take more control. All felt they would not be able to manage on their own. One person described taking control of their own wellbeing as, *"Taking a great deal of courage - it would be difficult. I would not know where to start."*

Many said a key factor for them in keeping (psychologically) well is the ability to find safe, community, spaces where they can come together to help and support each other, such as a community café and peer support groups.

Providing information

Many said it was really hard to navigate the health and care system and a map, flowchart or directory for service users would help them. Knowing who and where to go to, for what, would reduce time and frustration when trying to access services. Some said it would increase efficiency for services by reducing time spent with patients who have (inadvertently/inappropriately) gone to the wrong person. We were given examples of service users going to the 'wrong' service because they did not know who they should go to and then feeling upset, angry or irritated because this service could not meet their needs.

We were told that putting more information online may be helpful for some but for others it would make accessing information harder. Not everyone has access to a computer, the internet or even a smartphone. Others may need support and help to understand online information. *"This can only work if all information was available in the format that meets the needs of the patient,"* said one.

Barriers to accessing services

Members of our focus groups told us they want a holistic, person-centred, tailored approach to mental health. They said they receive a 'one size fits all' service that did not always take into account their needs. One person shared that, at times, he just needs someone to talk to, but his support care package does not allow this.

Many felt that priority was given to those newly diagnosed and those who had been diagnosed for some time did not get the same level of access to support. All said they wanted better access to physical and emotional support, regardless of how long ago they had been diagnosed.

Accessing and receiving help from adult services had become harder. We were told that the criteria to access support has become more challenging to meet. All said it is important that users are fully engaged and central to the planning process before any changes are made.

Those from BAME communities using mental health services told us professionals often lacked knowledge and understanding of cultural issues affecting their mental health, leaving them feeling unsupported. Said one person: *"I think the BME people who live in Greenwich need more professionals in the mental health services with our own background to understand our specific problems..."*

Many with chronic illness or disabilities reported ongoing difficulties with the DWP that caused them a great deal of stress and financial difficulty, making it even more difficult for them to access support. Having housing and financial problems has a major impact on physical and mental health. As one person commented: *"The agencies employed by the DWP [should] operate more fairly. I have had two work capability assessments ... after a lot of struggle and stress, including having my benefit stopped unfairly ... It also puts additional pressure on the NHS as it costs the consultants and GPs time to send in reports that are no different to the last time."*

Provider Response

The Greenwich Clinical Commissioning Group (CCG) made the following statement in response to the report findings:

"NHS Greenwich CCG welcomes the Healthwatch report 'What would you do? It's your NHS. Have your say. The NHS Long Term Plan programme 2019.' which offers valued insight into how Greenwich people experience health services, and views on how the NHS can help them and their communities stay well and improve available support.

The Greenwich strategy aligns well with the NHS Long Term Plan and we are implementing plans for greater integration and collaboration with Greenwich partners. This will enable us to address themes highlighted in the report including overcoming barriers to accessing health and care services, helping people to navigate and understand the health and care system, and supporting people to stay healthy.

We are committed to working with Healthwatch Greenwich, Greenwich people and our service providers to address the useful recommendations in this report, and to continually improve."

-Neil Kennett-Brown

Managing Director NHS Greenwich CCG

Methodology

Our general and specific conditions surveys were carried out over 2 months, April and May 2019. The surveys were available online, advertised via the Healthwatch Greenwich website and social media channels, as well as being circulated via other local organisations such as the Greenwich CCG and the Lewisham & Greenwich NHS Trust. Paper surveys were also available to complete at public outreach events.

Our survey received 143 responses (94 general, 39 specific conditions) and 12 people took part in our two focus groups.

Six people attended the first focus group, three men and four women. Two of the women attending had transitioned from CAMHS. The group was ethnically diverse with four participants from BAME communities.

Six women, with a variety of backgrounds and ages, came to our second focus group.

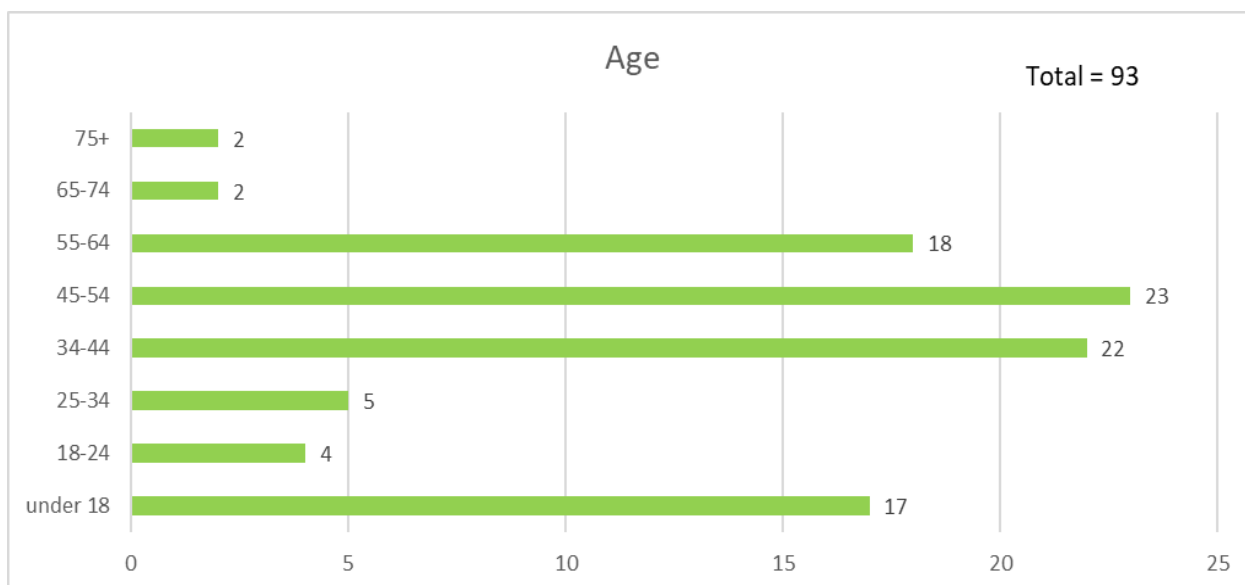
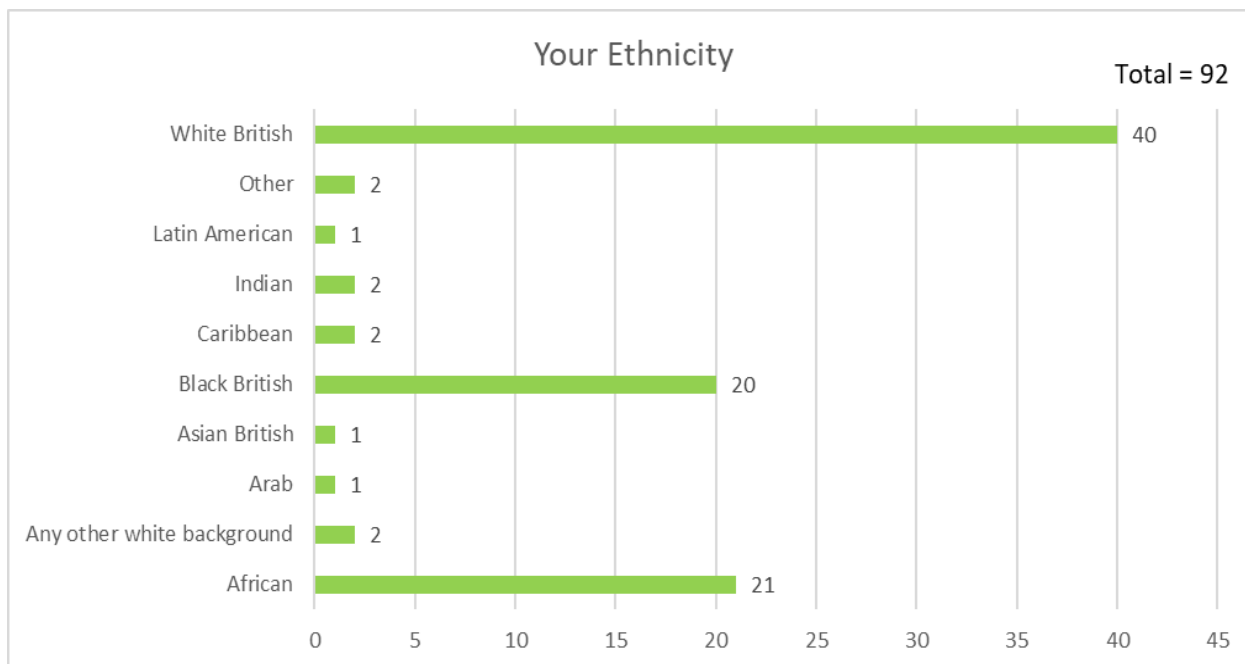
All members of both focus groups had been diagnosed with mental health issues for some time.

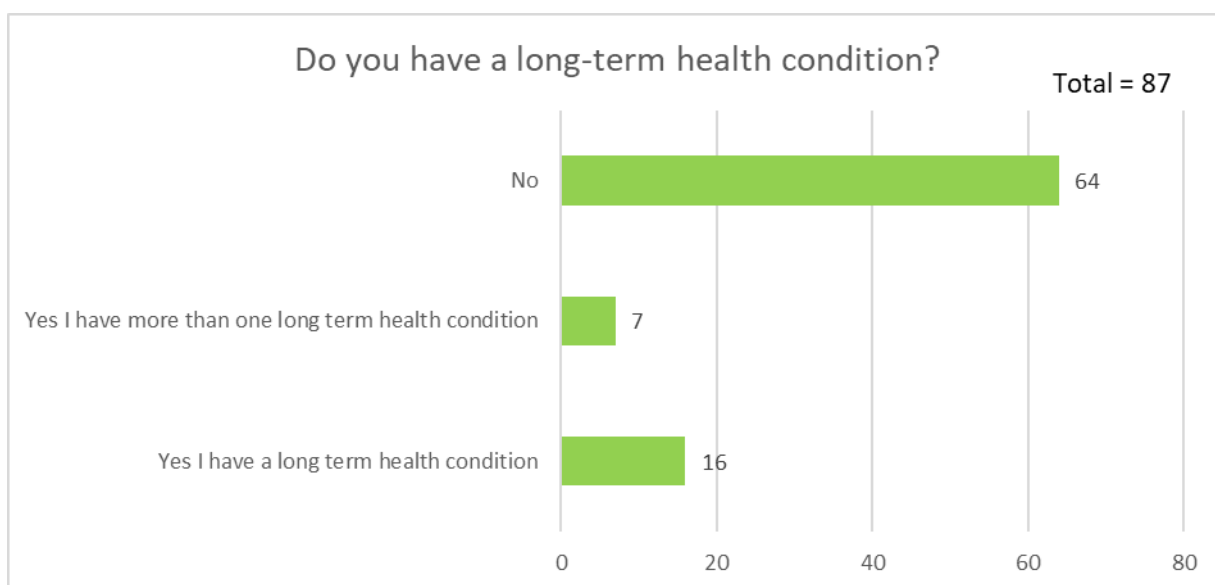
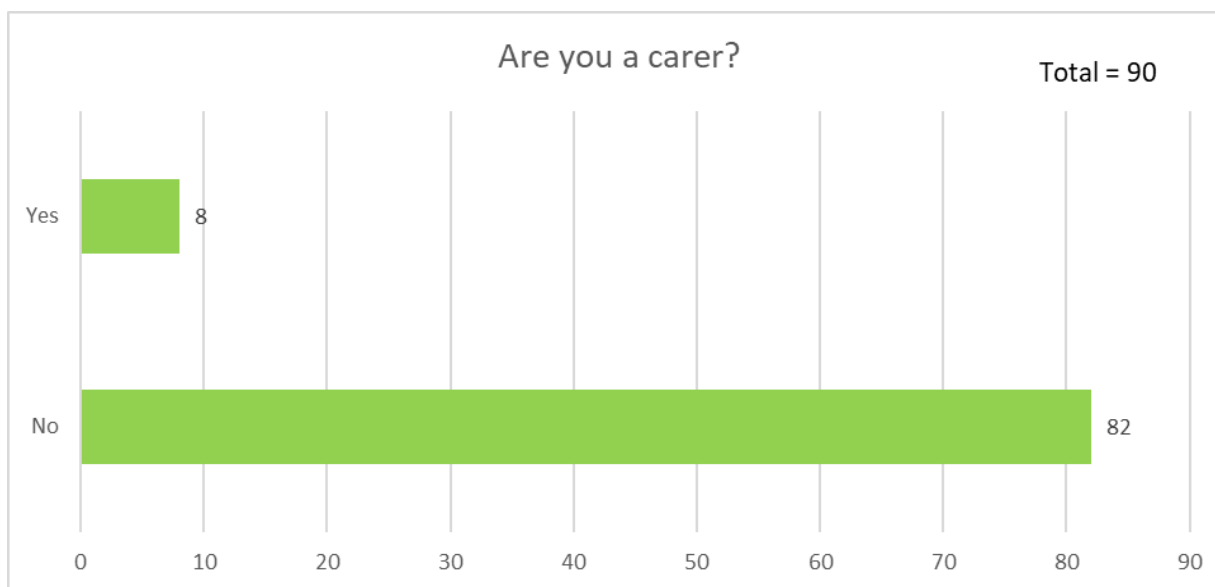
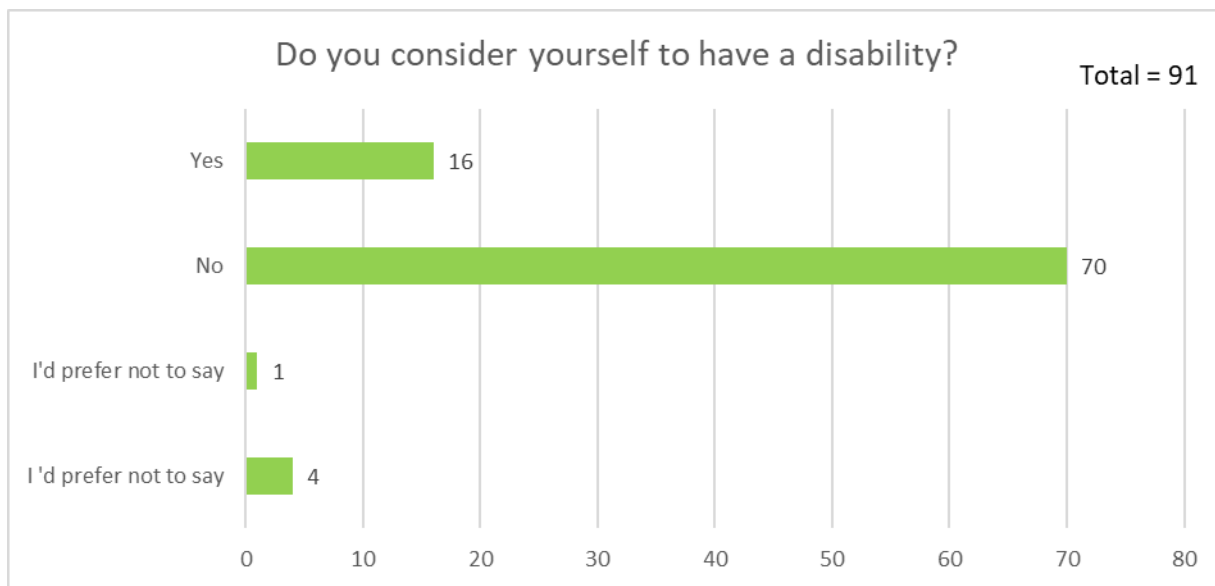
In addition to mental health difficulties, all were living with other long-term conditions including asthma, diabetes, epilepsy and learning disability.

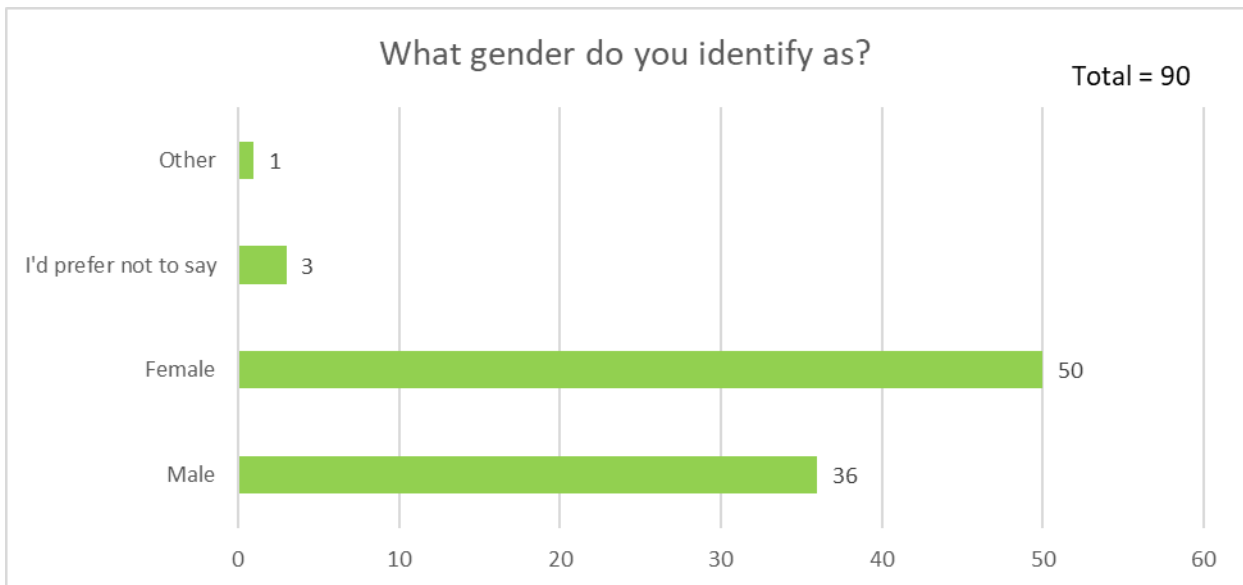
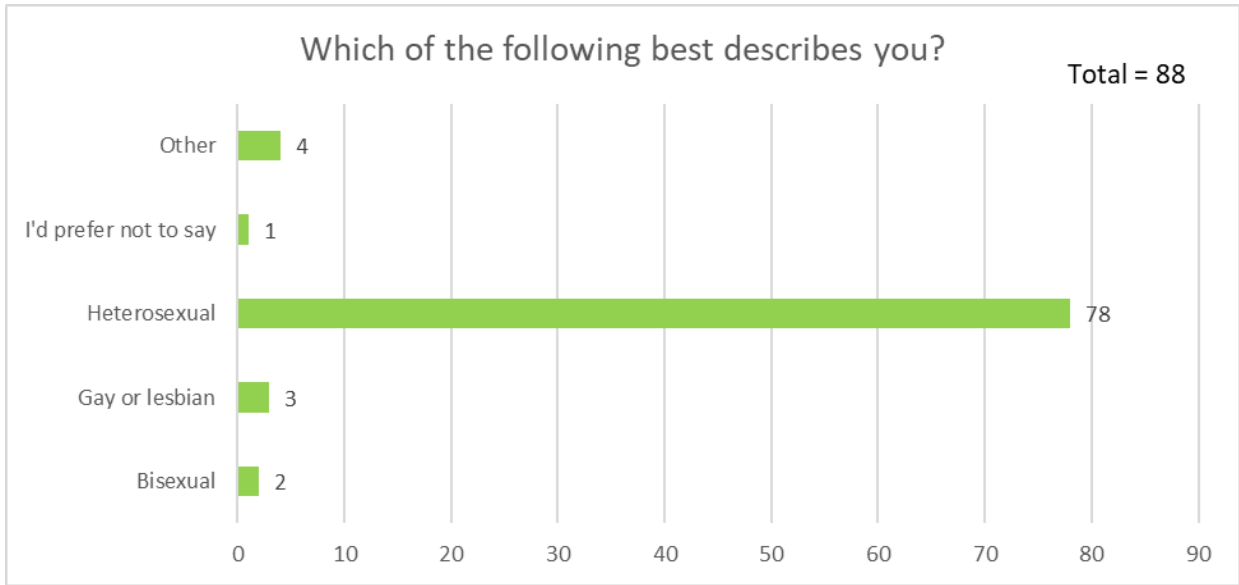
Not all of those who completed our surveys shared their demographic information with us.

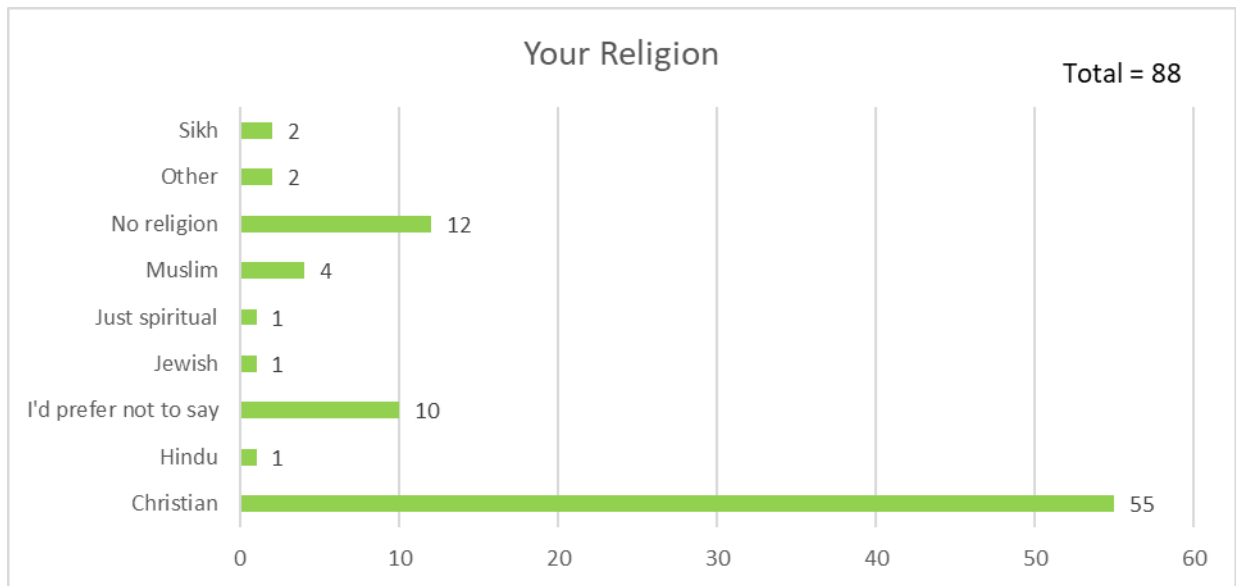
Demographic information

General survey data

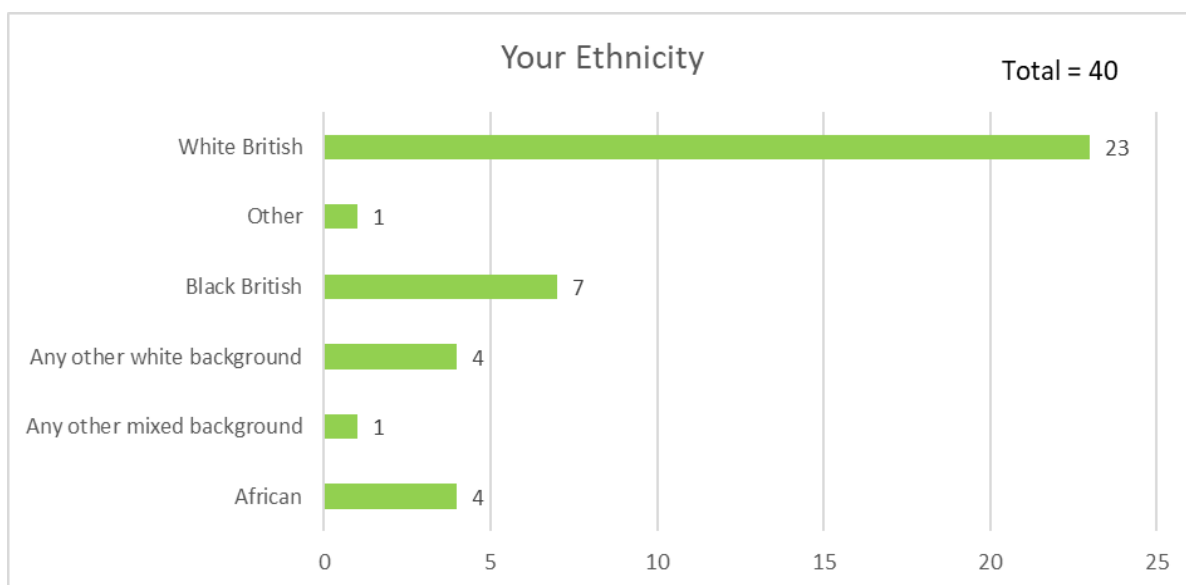
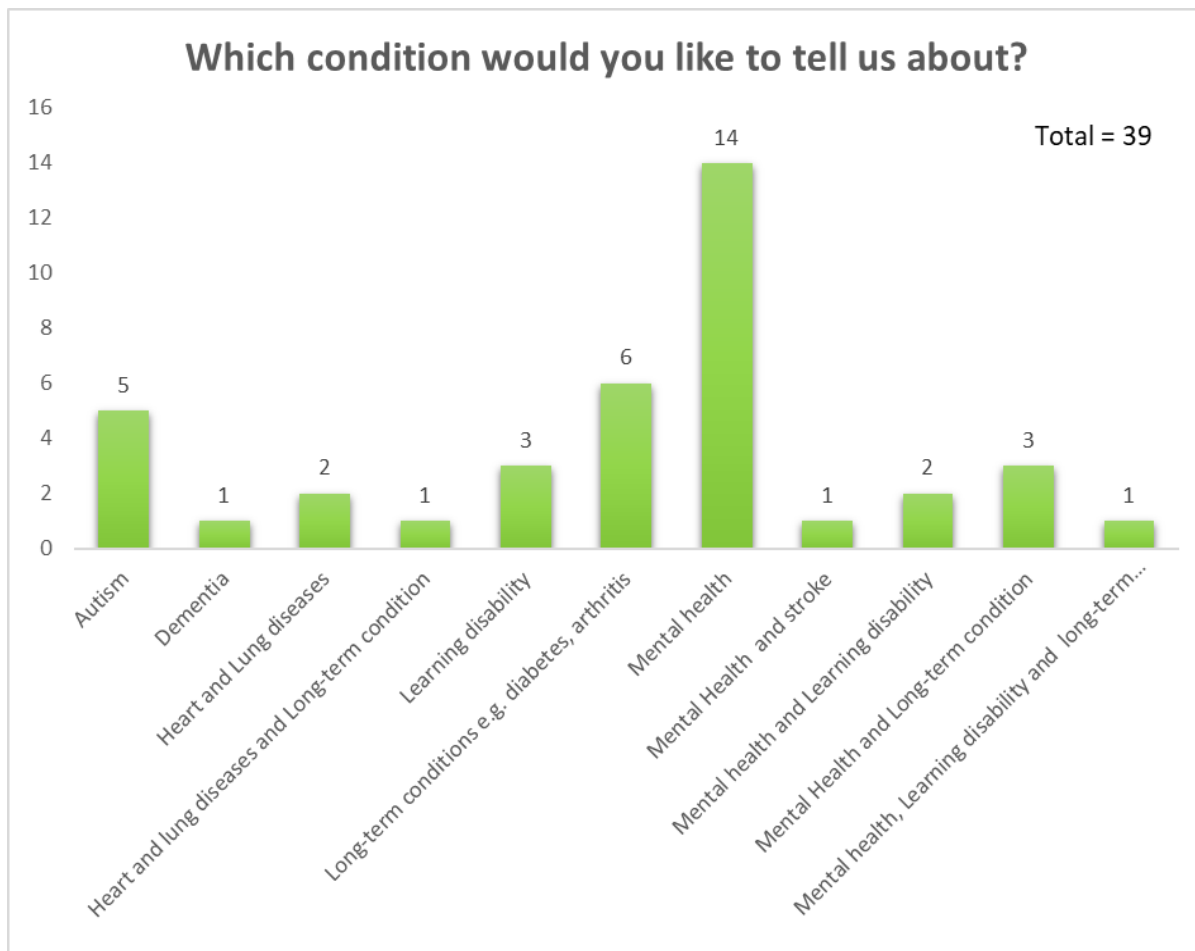


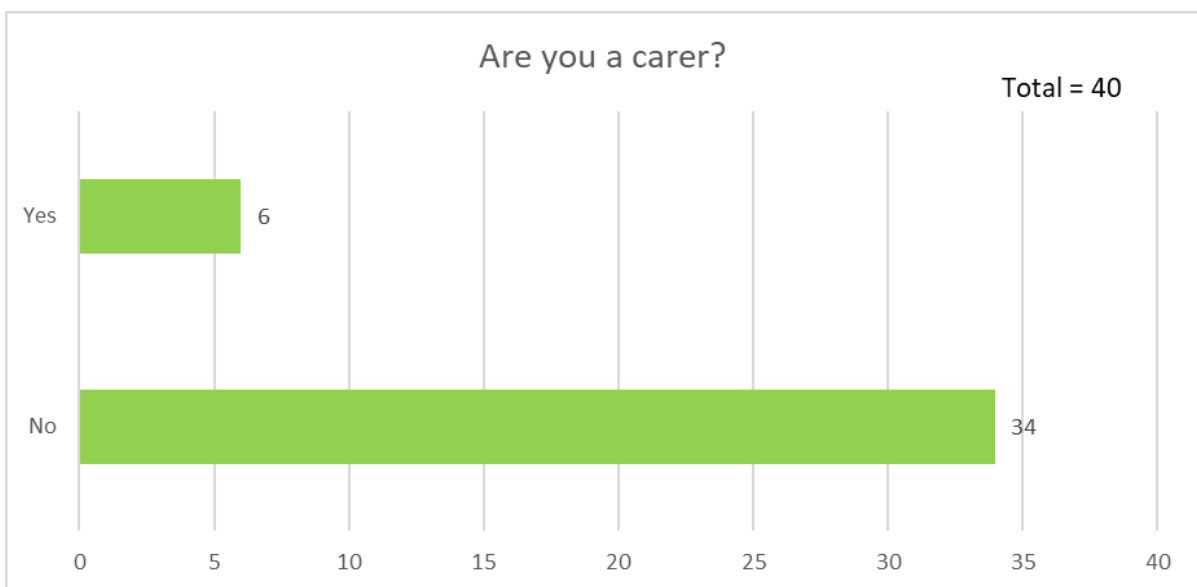
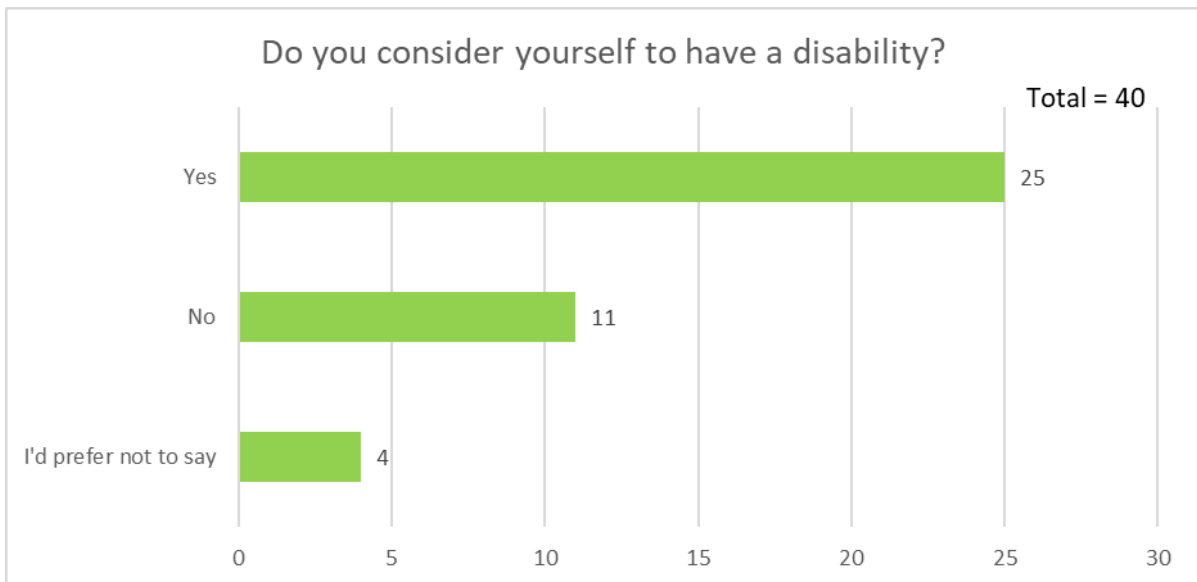
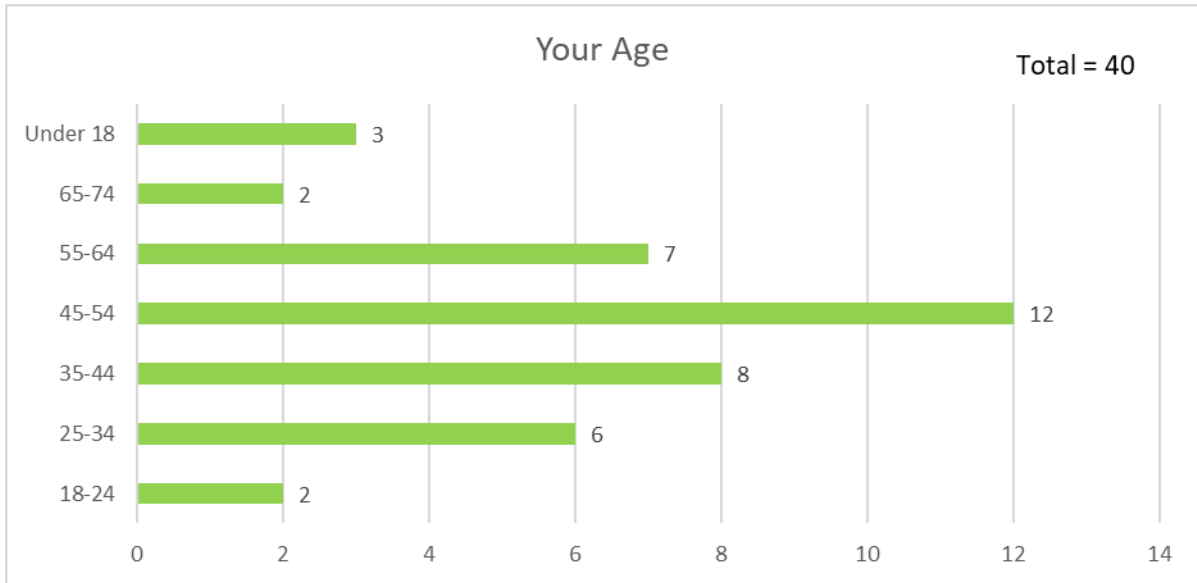


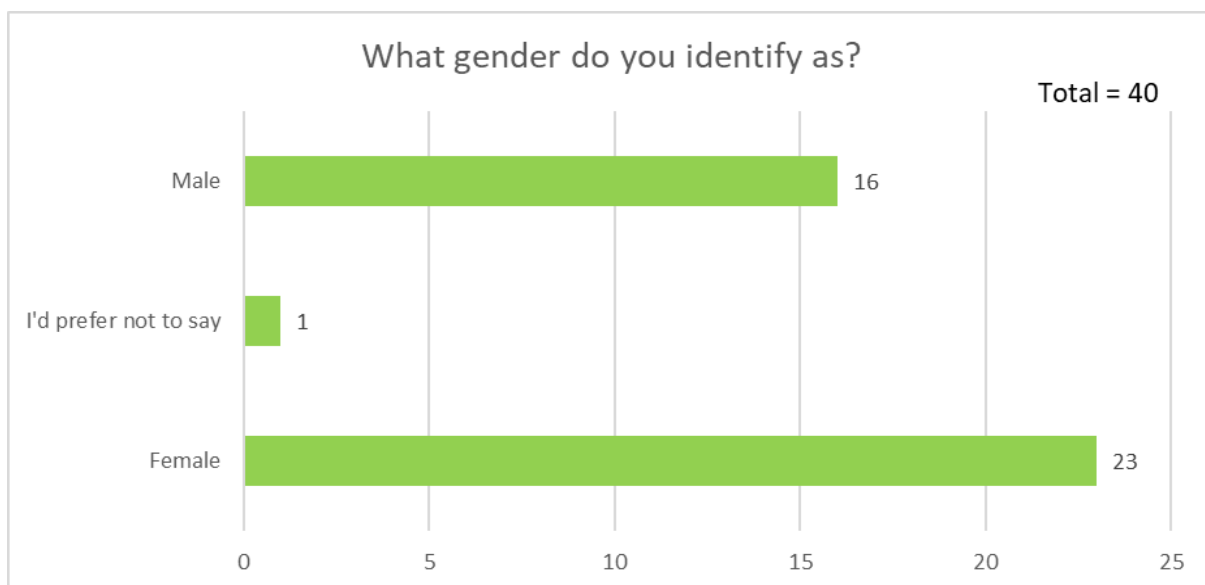
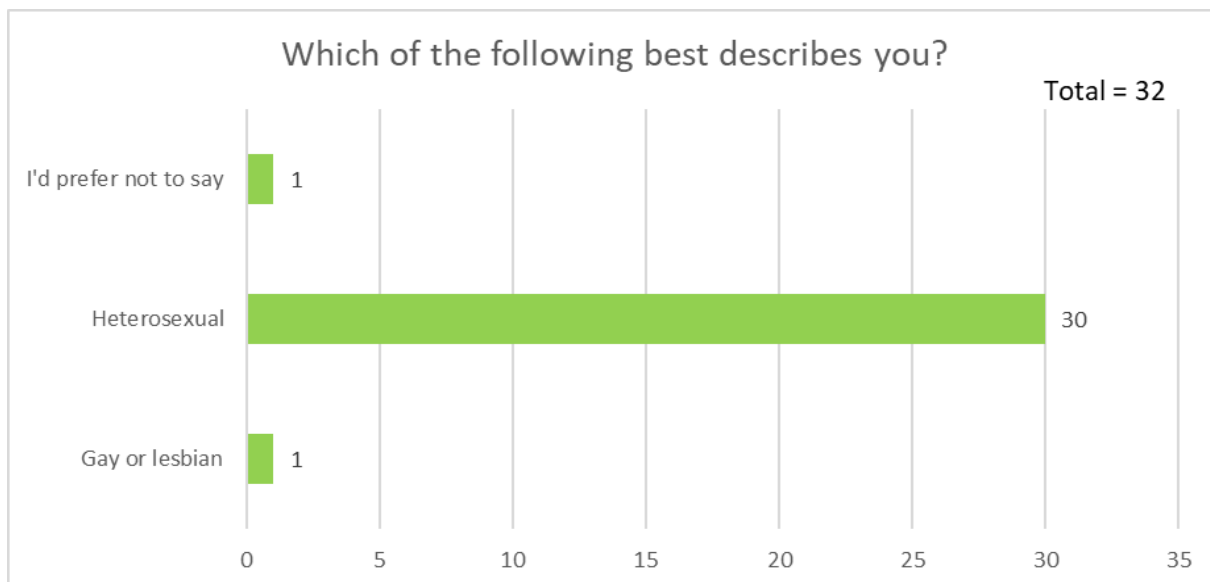
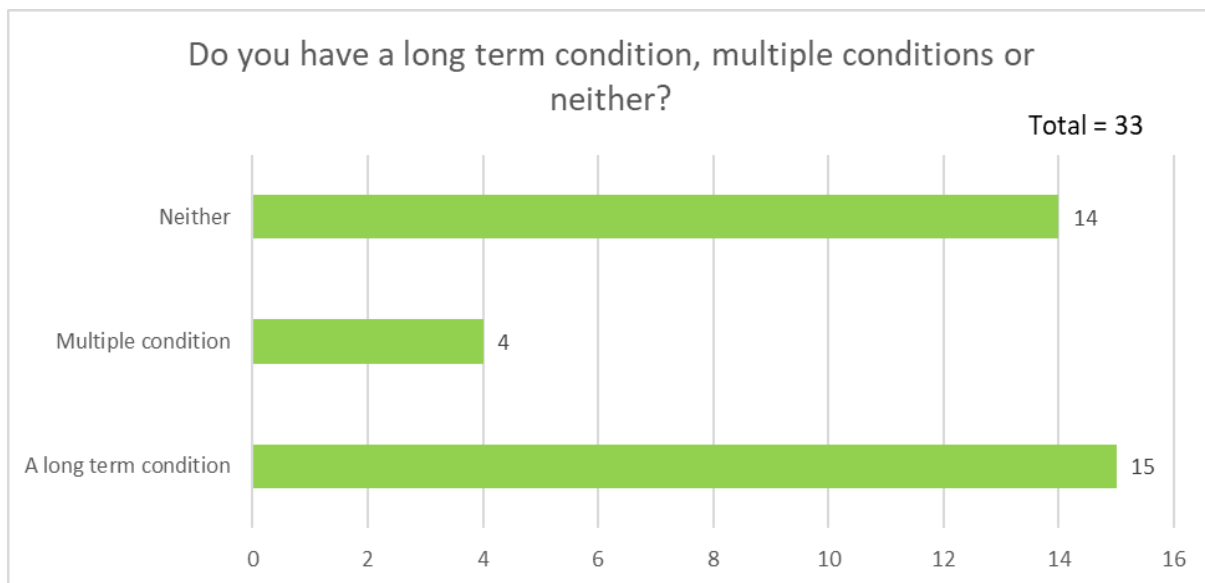


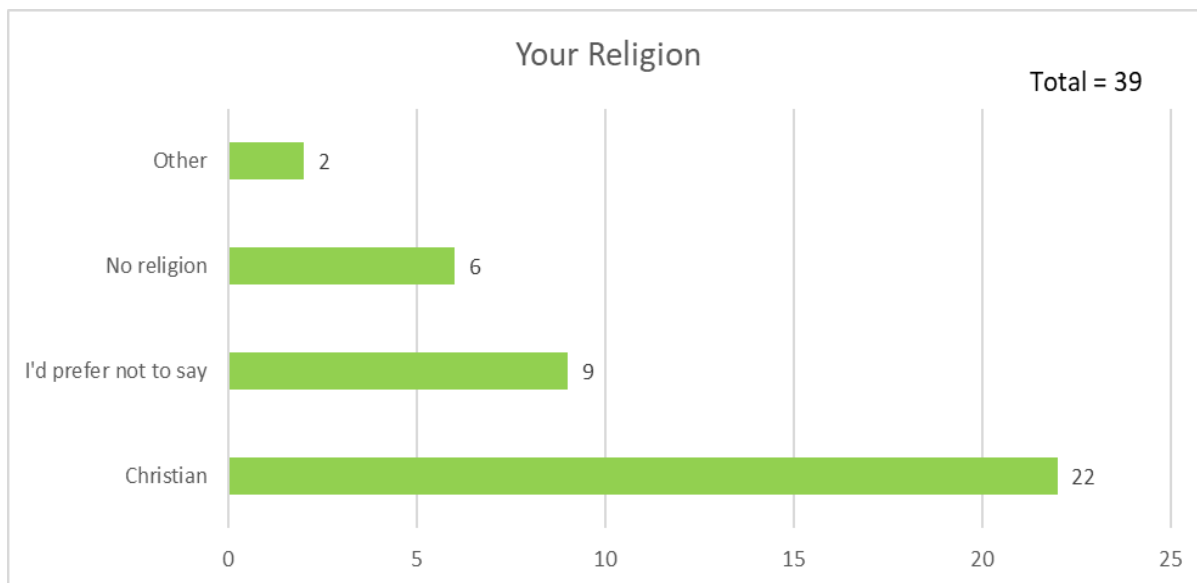


Specific conditions survey data









Acknowledgements

We would like to thank all those who gave their views to inform this work.

We are grateful to those GPs that gave us access to speak to their patients and to Oxleas ResearchNet, which allowed us to speak to their service users.

We would like to especially thank our Healthwatch volunteer, Josephine Ero, for her work in collecting the survey data.

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