

## November 2023

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### About us

We are the independent champion for people who use health and social care services in Royal Borough of Greenwich. We're here to make sure that those running services, put people at the heart of care.



Kiki Bourcha, Community Engagement Manager at Healthwatch Greenwich, on Thursday, joined the Learning Disabilities Carers' Social Group.

### What did we hear in November?

We heard from 441 Greenwich residents about their experience of health and care services.

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The Source, Horn Park

**“ They never provide us with any documentation. To us we are just rounding in circles as we feel they do not carry out instructions as we all agreed at the end of each meeting...**

Optimum Supported Housing

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## Community Engagement and Outreach

Healthwatch Greenwich went to Willow Dene coffee morning to talk to parents about their experiences with health and care services in Greenwich.

Parents said they really liked the quiet rooms at King College's Hospital, which helps kids feel better while waiting. They suggested having these rooms in other hospitals too, because they've been very helpful for children with special needs.

Parents shared feedback on changes they would like to see. One common issue they talked about was that sometimes doctors and nurses at GP practices don't look at patients' files. This means parents have to tell their stories and explain their medical problems over and over again. Parents think it's really important for doctors and nurses to look at patient's files before asking patients to repeat themselves.

Another important thing parents mentioned was that they want staff to get better training to help children with special needs, like autism and learning disabilities. They want doctors and nurses to know how to communicate better to take care of these kids. Parents said that doctors at GP practices should talk to both parents and kids, and explain things in a simple way so that children can also understand what's happening. When doctors or nurses ignore kids or don't explain things well, it makes families with special needs feel like they can't trust the healthcare professionals.

Parents also said they want their children to see the same healthcare professional every time they have an appointment. This makes kids and parents feel more comfortable and safer.

Waiting a long time for appointments with specialists in hospitals is a big problem too, because it delays important assessments for children with special needs. Parents also mentioned that some healthcare professionals don't understand autism very well and need to learn more about it.

At the Parents' Coffee Morning with Parent Power, they told us they liked the 111-helpline a lot because it gives quick and useful advice, especially in urgent situations.

Parents had great things to say about the Home Birth Team from Queen Elizabeth Hospital. They provided a good service and support for parents.

They praised the Vanbrugh Group Practice for going the extra mile and doing extra research to help their patients. But at another GP, there were complaints about not getting enough help. A mom of four said she didn't get the support she needed and had to go to A&E.

Some parents have trouble getting parenting advice. For example, one family shared they needed help with their three-year-old's toilet training. 111 told them to go to Urgent Care or their GP. They went to their GP who could not advise them and did not give refer them either. They ended up going to A&E.

Parents said communication at Queen Elizabeth Hospital was poor. A mom with premature twins said she didn't get information she needed from the paediatrician. While she got great support from a nurse, she still wanted better communication from doctors and easier access to test results. They said doctors at QEH could do better when supporting new parents.

### **Provider Response:**

#### **Response from Lewisham and Greenwich Trust**

"We are committed to improving at LGT, so we welcome feedback on our services. It is lovely to hear that the Home Birth Team is doing a great job for patients and we've noted the comments on communication. We encourage all patients to come to us directly with any feedback they have on our services so that we can listen, learn, and improve. Greenwich patients can reach us on 020 8836 4592 or [pals.qeht@nhs.net](mailto:pals.qeht@nhs.net)."

## What Greenwich residents are saying...

“ I went to the QEH the sleep clinic to have my snoring looked at.

**Good: Flexibility to return the equipment at QEH at unsociable hours to enable me to go to work.**

**Bad: I cannot get the readings because I cannot sleep with anything attached to me. I would rather have this done on the ward so that the nurses can watch over me.**

Queen Elizabeth Hospital

“ I use 'The Source' Tuesdays when medical person is there i.e. the nurse-practitioner. I spoke with the nurse and I get good advice about managing my Type II diabetes which is unstable. It's much better than my GP. I have to wait days to get an appointment.

The Source and GP Practice

“ Very frustrated that the nurse practitioner at 'The Source' does not see under 18s. When children are unwell and don't go to school, parents get universal credit sanctions and lose money. It would be much better if children could see nurse practitioner and parents could get advice promptly. The Source should offer more health and care signposting to families and children

The Source

### Provider Response:

Response from Oxleas NHS Foundation Trust

Oxleas currently provide access to a nurse with expertise in long term health conditions for adults at The Source, specifically to support the residents of the Horn Park neighbourhood. There is also a Charlton Athletic Community Trust Live Well coach based there on the same day to support a wide range of issues and care needs of the local residents. The Source is a fantastic asset for Horn Park residents, and we welcome feedback regarding the ongoing development of the service and will ensure these comments are shared within development forums where we review the scope of the service.

--Rachel Matheson, Associate Director, Oxleas

## ***“We just want what’s best for our daughter.”***

Mr. and Mrs. Junah migrated from Nigeria and lived with their daughter Betty until they were unable to cope any longer. Betty moved away from home because her parents couldn’t give her all the support she needed.

*“She behaves like she’s 12 and has anger and behavioural issues. We wanted the best for her, but it became very hard to handle her behaviour.”*

Betty, aged 23, now lives in supported accommodation. Betty has learning disabilities, autism spectrum disorder (ASD), epilepsy, and mental health issues.

Betty’s vulnerability means her parents worry about how she is being looked after and *‘adapting to different supported living homes was tough for her,’* said her father.

*“We want to know if that place is good for her, if she gets the support she needs. We request for updates, health plans, and reviews but they share nothing. There has been a lot of communication gaps right from the beginning of her staying in the project between us, the management, and staffs of the supported living, these had prompted a lot of meetings between ourselves, the staff of the supported living and the psychology team but they make changes without asking us or sharing any documentation. They never provide us with any documentation. To us we are just rounding in circles as we feel they do not carry out instructions as we all agreed at the end of each meeting...”*

Families can be a vital part of life for someone who needs care and support, and working well with them is an important part of person-centred care. When services communicate and listen to families and explore solutions together, outcomes for individuals can be improved.

Betty’s parents want more transparency over how decisions about Betty’s care are made but say they’ve been labelled as difficult for raising concerns.

*“We want to move our daughter to a different care home because we don’t trust the support she gets. They let her stay out until 3 in the morning, knowing how vulnerable she is”* explained Betty’s father. *“When we complain, they label us aggressive, but we just want what’s best for our daughter.”*

## **Provider Response:**

### **Response from Royal Borough of Greenwich**

#### ***How we assure the quality of Supported Living settings and act on any reported concerns?***

Health and Adults Services has a Quality Assurance Team which undertakes regular visits to all care homes and supported living services in the borough where we have placed residents. These quality assurance visits look at 15 aspects of service delivery including, the general state of the building, the quality of support plans and other documents, staff training, management arrangements and safeguarding. It specifically contains a number of residents focussed questions seeking direct feedback on their experiences of living at the service so that we can garner how they are supported on their chosen goals, choices and life experiences. Questions have been developed with an eye to positive cultures, person centred care and promotion of a good quality of life and well-being. The Quality Assurance Team does write to the families of people living in services to ask for their views of the homes however this is not an automatic exercise, but one based on the level/ability of the resident to have meaningful engagement and interaction that can take place during our visit. If we have interacted with the resident to a satisfactory level and feel that we have captured their voice at the service, then we would not question their autonomy but respect and record their views into our finalised provider report, therefore would not feel it necessary to contact next of kin or family on this occasion. Our quality assurance process includes a section on care plan audits which does query if support plans clearly identify goals & outcomes with the necessary progress being captured.

After each visit the service will receive a report setting out our findings and required or recommended actions to improve service quality. Where the visit has identified that further action is required a follow up visit will be arranged to check on the provider's progress implementing those actions. If we had immediate concerns these would also be flagged with the Community Learning Disability Team with the request for urgent care review.

***How operationally we support to ensure people are in places which support them to achieve their outcomes and what happens if the adult/their circle of support are unhappy with the setting they are placed in (where we commission their care and support)***

Our aim is to ensure our practice is person centred and takes in to account the wishes of residents and their family or circle of support where this is a appropriate.

We acknowledge that sharing information with families at the appropriate time, along with communicating with families when there are restrictions to what we communicate and can act on is an area of improvement. Our community learning disability operational teams are committed to focussing on this in the coming year.



## **Provider Response:**

### **Response from Oxleas Adult Learning Disability Directorate**

Whilst we acknowledge that these challenges are with multiple providers, Oxleas Adult Learning Disabilities Directorate are sorry to hear about the difficult experiences of this family in a case where the psychology team from the Greenwich Community Learning Disability Team have been involved. For reasons of confidentiality, we are not able to directly address comments raised, but we thought this would be a useful opportunity to share some information in terms of some of the ways we work to support relationships between families and providers in the hope of offering clarity and reassurance.

It is a complex process when families reach a point where they consider the need for their loved ones to move into supported living. Our health team often plays an important role in supporting the transition process when service users move into a supported living placement. Psychologists can help to support positive dialogue and communication between service users, families and providers at this time and when there are challenges.

One way they do this is by facilitating "network meetings" where they make sure everyone has a chance to speak and try to privilege the voice of families as much as possible. In these meetings they try to support families and providers to understand each other's concerns and to find solutions. In most cases this works well, and we often receive positive feedback. Occasionally people have very different ideas that are hard to reconcile and if these meetings do not help, we try to find other ways to enable positive communication.

## **Dentistry in Greenwich**

Last month we shared high level findings from our dentistry survey. This month, we have continued our analysis focusing on the differences between groups in Greenwich.

## **Methodology**

We surveyed 161 Greenwich residents using face-to-face interviews to understand their opinions about local dental services. Our sample was a good reflection of the diversity of Greenwich residents.

<b>Ethnicity</b>					
Asian, Asian British	Black, Black British	Mixed ethnic groups	White(any)	Other ethnic groups	Prefer not to say
12	71	17	54	2	5
161					

<b>Gender</b>		
Woman	Man	Prefer not to say
113	44	4
161		

<b>Disability/long term condition (LTC)</b>		
Living with disability or LTC	Not living with disability or LTC	Prefer not to say
26	130	5
161		

<b>Age</b>				
Under 24	25-49	50-64	65+	Prefer not to say
19	86	30	23	3
161				

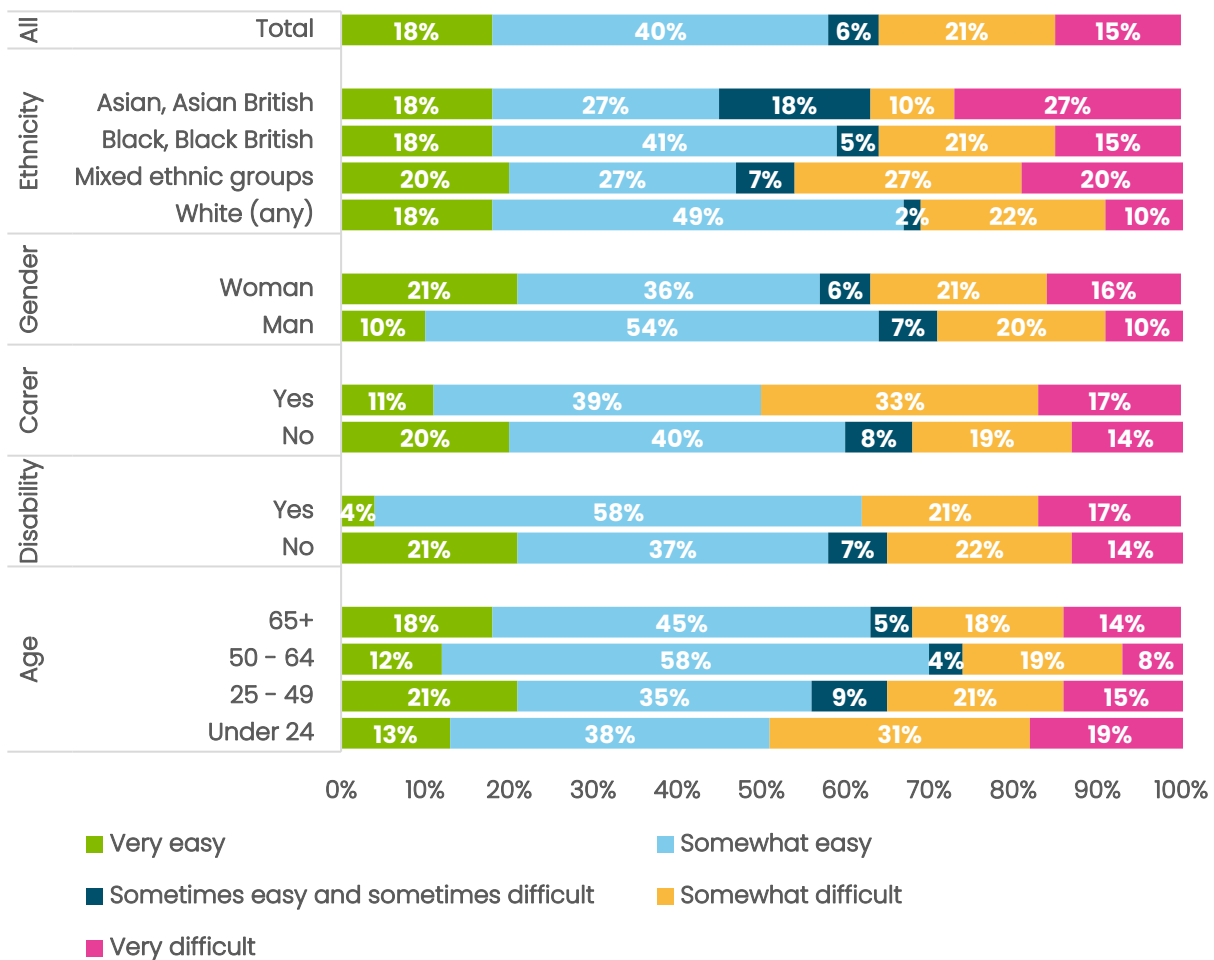
<b>Carer</b>		
Carer	Not a carer	Prefer not to say
20	129	12
161		

## Appointments

Ease or difficulty of getting an appointment is mostly evenly split but the majority of people say that getting an appointment is somewhat easy. Our survey found:

- Younger people under 24 tend to find it more difficult (50% somewhat or very difficult) while this decreases for those above 25 (over 50% somewhat or very easy).
- There is also a divide based on ethnicity. 67% of white respondents find it somewhat or very easy, compared to 45% of Asian respondents and 47% of respondents from mixed ethnic groups.

### How easy or difficult is it to get an appointment?

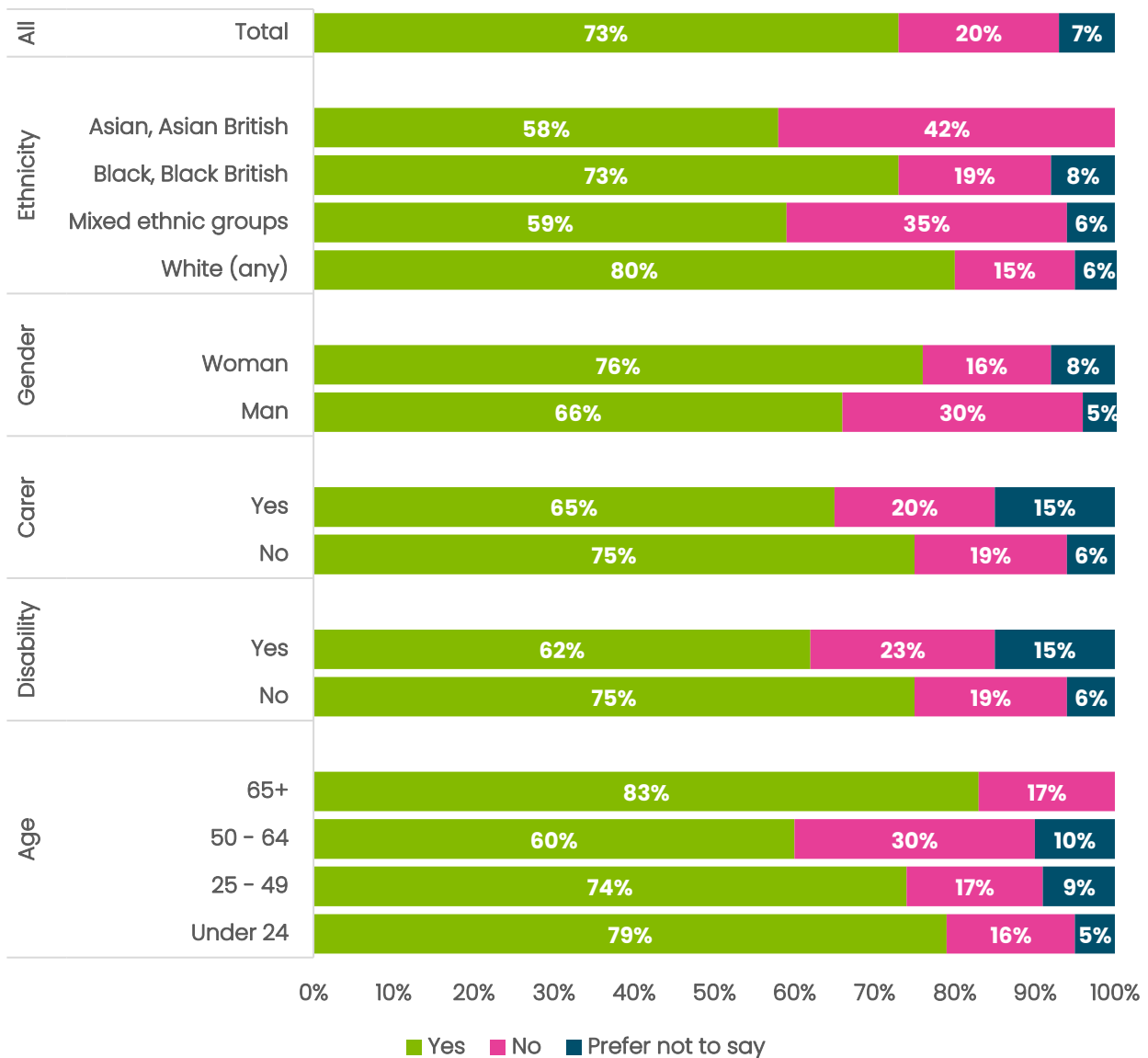


### Have residents seen a dentist in the past two years?

Most people have seen a dentist in the past 2 years (73% overall). This is the case in almost all demographic groups but with some variations.

- Only 60% of 50–64-year-olds did. This is the lowest percentage out of all demographic groups.
- Women were more likely to have seen a dentist than men (76% vs 66%) and white and black respondents were more likely to than Asian and mixed ethnicity respondents (80%, 73% vs 58%, 59%).

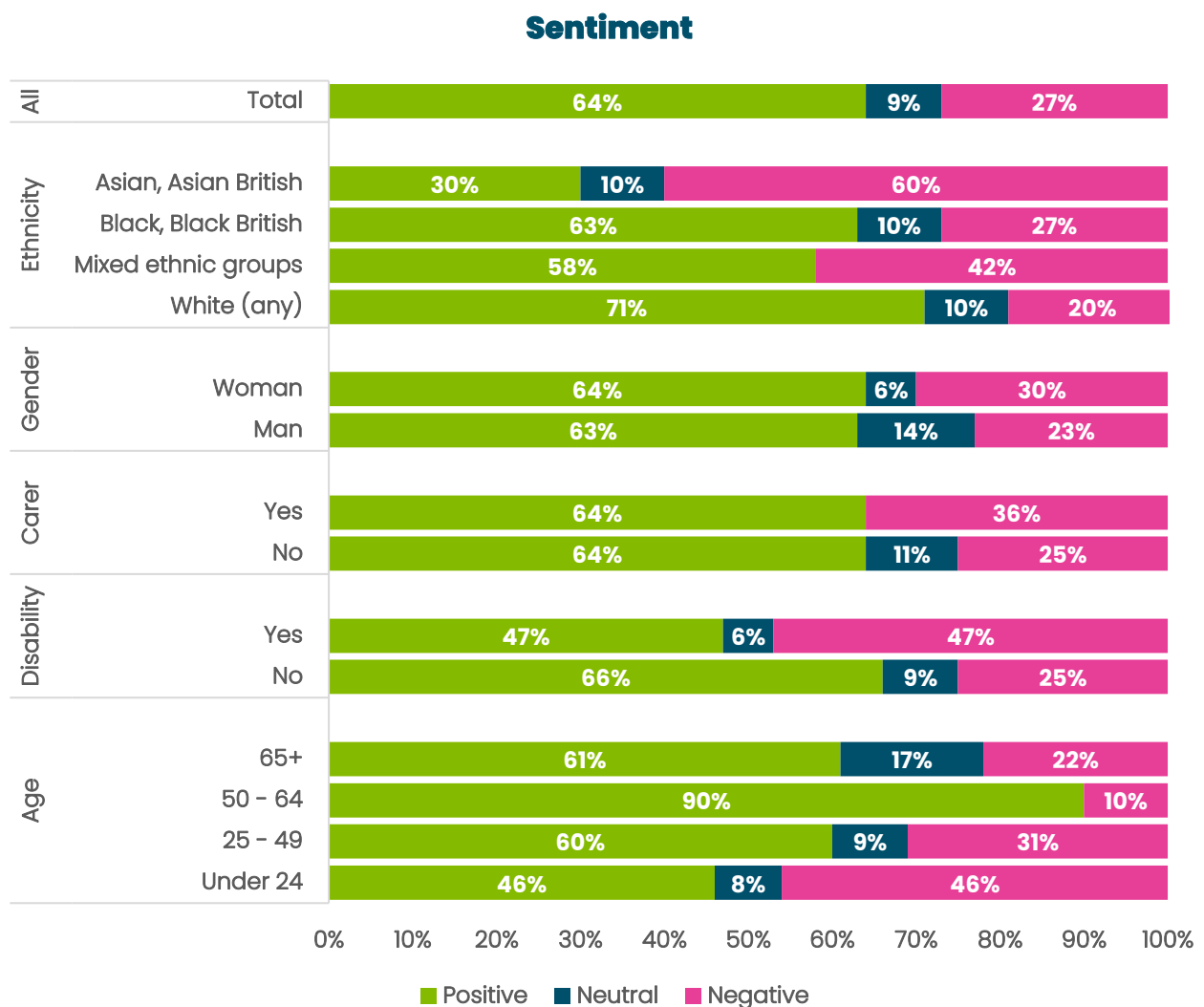
### Have you seen a dentist in the last 2 years?



## Sentiment

Sentiment is positive, which is consistent amongst most demographic groups. The difference in sentiment is based on the age of the respondents, disability status and ethnicity. Our survey found:

- There is a 41 percentage point gap in positive sentiment between white and Asian respondents. White and black respondents seem to have a more positive sentiment overall compared to Asian and mixed ethnicity respondents.



## **Summary**

Age and ethnicity seemed to be the main source of variation, with younger or Asian/mixed ethnicity respondents finding it more difficult to get an appointment and having a less positive sentiment towards their dental surgery.

## **Response from Healthwatch Greenwich to South East London LDC**

We thank the South East London Local Dental Committee for their comments. We look forward to working with them to better understand the disparity between groups in their experiences of local dental services. In addition, we are heartened to see the rise in the number of children accessing oral care and dentistry services across South East London. Healthwatch Greenwich recognises limited dental capacity is a national issue and is constrained by NHS commissioning guidelines. We note that LDC has raised the issue of the term 'registration' in our dentistry report shared last month. While we appreciate this term is not accurate, however it is widely used and understood by patients as a way of describing their relationship with their dental practice. We welcome the suggested recommendations from the LDC and look forward to working in partnership with them to widen access and increase equity to dental services in Greenwich.

## Next Steps

We follow up on all concerns or issues raised.

We work with commissioners, providers, regulators, and service users to understand where services are working well and where further development is needed.

## Contact Us

For more information on our feedback report, or to request it in large print or easy read format, contact:

- [Chandan@healthwatchgreenwich.co.uk](mailto:Chandan@healthwatchgreenwich.co.uk)
- Telephone: 020 8301 8340
- Email: [Info@healthwatchgreenwich.co.uk](mailto:Info@healthwatchgreenwich.co.uk)
- Website: <http://www.healthwatchgreenwich.co.uk/>
- Twitter: [@HWGreenwich](https://twitter.com/HWGreenwich)
- Facebook: [healthwatchgreenwich](https://www.facebook.com/healthwatchgreenwich)

