

# Community services review

Summary engagement report

April 2016

together  
with you



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## Introduction

This report outlines how NHS Southport and Formby CCG has been involving residents in the review of the community services and how the feedback has helped to inform its Shaping Sefton vision of community centred health and care, as set out in the CCG's 5 year strategy.

Community services is one of the eight programme areas in in the CCG's blueprint for transformation.

In particular, the report focuses on the most recent phase of engagement, which invited all Southport and Formby residents and communities to share their views and experiences of community health services.

As part of the ongoing service developments, these views and experiences will help the CCG and providers plan for the changing needs of patients into the future.

## Engagement overview

To support the development of the vision for community centred health and care, the CCG has already been carrying out a range of engagement activities and pieces of work to ensure that the views of Southport and Formby residents, patients and partners have been captured and considered as part of ongoing developments and in the redesign of specific service specifications. Some of these include:

- **Big Chat 4 and 5 public events (2014/15)** - these focused primarily on talking together with residents about providing health services closer to home, gathering people's experiences of current community services and what should be considered in their future development
- **Community services mapping (2015)** – the CCG undertook a Sefton wide engagement scoping exercise and collated all relevant feedback to capture key themes and service specific feedback. This took account of the Sefton Strategic Needs Assessment Consultation Report , other Sefton Council consultations, Healthwatch engagement reports, service level engagement /consultations and generic community engagement with minority groups
- **Engagement and Patient Engagement Group input (2014 -16)** – the membership of this CCG group includes key Sefton partners who have been informed and contributed to the ongoing blueprint programme developments and engagement planning
- **Equality Impact Assessment (2015)** – to support the most recent phase of engagement, this key piece of work highlighted any risks that proposed changes might pose for Sefton residents - specifically minority groups - and helped to inform the development of the engagement approach

These exercises helped the CCG to develop its bank of evidence and identify key themes to support the development of the community services blueprint and service level specifications.

In brief, these include:

- Joined up, patient centred care
- Care closer to home with services under one roof
- Continuity of care and the importance of relationships with clinicians
- Importance of a knowledgeable and skilled workforce
- Effective communication at all levels, between services and with patients
- Flexible and varied appointment systems
- Good transport links to health care centres and venues
- Easy access to community information and support

### Latest engagement phase - December 2015 to 31 March 2016

The aim of the latest phase of engagement was to inform residents of the community services review and re-procurement, and provide an opportunity for people to share their experiences of these services which would be considered as part of the ongoing service developments.

Before developing the engagement approach, the CCG carried out a rigorous assessment of each proposed community services programme to assess what level of change was being proposed. This concluded that there were no significant changes to patient care as a result of the re-procurement and that the proposed changes related to how services were organised, managed and run. Therefore formal consultation was not required.

The Equality Impact Assessment advised that there would be a limited impact for the general population but highlighted that minority groups may not easily access information about the review or have the opportunity to comment and inform service developments.

Taking account of the assessment and advice, the CCG developed the following engagement approach, which was reviewed by the CCG's Equality and Diversity lead who considered it suitably robust:

- A population wide engagement supported by a communications exercise and an online survey
- Targeted face-to-face engagement and liaison with minority groups to obtain comments, views and any specific issues that had not yet been captured. This was supported by the opportunity to complete a hard copy version of the survey
- Accessible engagement options which included availability of the survey in large print and easy read formats and the option to request a hard copy version and return via the CCG's Freepost address

The CCG used all communication channels and networks to cascade information and raise awareness of the engagement, and all partners and stakeholders were informed of the approach and plans.

## Engagement analysis

The analysis below provides an overview of the survey findings and the key themes emerging from these and the group meetings and events.

### Overview of survey responses

The survey asked people to tell us about their experiences of specific community services, where these were received, how they rated the service, what made the experience a good or bad experience and where improvements could be made. A detailed analysis of the survey responses can be found in Appendix A.

Below is an overview of these responses:

- The survey was open from December 2015 - 31 March 2016. Over this time 72 survey responses were received with 85.5% of respondents commenting as patients and 6.5% as carers of patients
- The age range of respondents was from 36 to over 75 with 47% between the ages of 56 and 75, and 37% over the age of 75. 22% of respondents considered themselves to have a disability, 90% were of a white British background and 95% identified as being heterosexual
- The survey captured 117 individual views and experiences of services, although only 92 of these were community health services, the others related to GP, hospital and community support services. The services most commonly listed were phlebotomy, district and community nursing and podiatry
- The majority of the service experiences were delivered in health centres (72%) with 14% in GP practices, 12% at home at only 2% in residential or nursing home settings
- Overall, the service ratings were positive with 89% of respondents rating their experiences as good to excellent, and the remaining 11% rating their experiences poor to average
- The survey asked what was good and bad about people's experiences. Location and friendly and knowledgeable staff were identified as the two most common factors contributing to a 'good experience' and poor communication and appointment systems the two most common issues resulting in a 'bad experience'
- Co-ordination of care and communication were cited as the most important areas for improvement

### Targeted stakeholder group meetings

As recommended by the Equality Impact Assessment, the CCG engaged with local minority groups and organisations to promote the community services review and related engagement and procurement processes. This involved collaboration with partners and attendance at 16 meetings and events. Through these channels, the CCG spoke to approximately 355 people and cascaded approximately 750 surveys.

Appendix B lists these stakeholder group meetings and events for information.

## Key themes and issues

The key themes and issues from all the activities described on page 4 were analysed and are summarised below.

### Location

Many patients felt it is important to have easily accessible services that are close to home, particularly older patients and those with long term conditions who may have difficulties travelling. 61% of respondents to the question 'what makes a good experience' cited this as one of the key factors, and several groups discussed the importance of local community services near to where people live and work. One survey respondent said: 'For me using our local clinic is so convenient and it also means I am not wasting time travelling further afield to reach the relevant service.'

Overall, the pattern of service ratings is similar for all locations with the majority of ratings from good to excellent, other than for services delivered in 'residential/nursing home settings' where there is a distinct lack of data. Only 2 responses were received in this category.

To confirm this pattern, a larger data set would be required for all locations and significantly more feedback from patients receiving care in residential and nursing home settings.

### Transport

People expressed frustration with the current public transport network and the limitations of the ambulance transport system. In particular, the infrequent bus services to Southport and Ormskirk Hospital and services to some local GP practices and health centres were an issue, particularly for Formby residents. This was discussed at several meetings and was raised by individuals at events and through comments in the survey. One survey respondent commented that 'transport to services is a major problem for people accessing services' and a discussion at one meeting highlighted the unaffordable costs of taxi fares and the increasing demand for volunteer drivers co-ordinated by the VCF sector.

### Appointment systems

Issues with booking systems, referral to treatment times and the number and length of time between appointments were the most common concerns raised. Although the overall response rate to the question 'what made it a bad experience' was low, appointment systems were identified as the most common issue particularly in relation to the most frequently used services eg; podiatry and physiotherapy.

### Continuity of care

Patients value being treated by - and building a trusting relationship with - the same clinician. A common complaint is the need to repeat information and the perception that new clinicians may not have access to the full patient history. Comments in the survey referred to the anxiety of not knowing who would arrive when receiving treatments at home, and concerns that 'the full story' was not always known.

## **Friendly and knowledgeable staff**

67% of respondents to the survey reported that this was the most important aspect of a 'good experience' with dedicated, hardworking staff seen as central to the quality of the service delivery.

## **Joined-up care**

Fragmented systems between different services and providers was raised as an issue with 34% of survey respondents identifying this as the most important area for improvement - patients 'don't want services fragmented between different service providers'. Comments and examples were provided in the survey which referred to the importance of timely, well coordinated interventions from different services and effective communication between staff in different organisations, particularly for those patients with long term conditions.

## **Continuing support**

This was an important key theme from both the survey feedback and group discussions. Highlighted were the importance of ongoing clinical support - where required - and the availability of locally based support services and organisations providing information and emotional/ practical support. This was seen as particularly important for patients with mental health issues and long term conditions.

## **Lack of information and understanding of community services**

This was discussed at several meetings and evidenced from the 21% of irrelevant survey responses. Unless people had first hand experience of specific services, they were generally unaware of the variety of community services and what they were for. At several meetings, it was suggested that these services and their availability should be more widely publicised, including those that accepted self-referrals.

## **Effective communication**

The importance of this at all levels and stages of a patient's journey was apparent from the survey, as it figured as one of the key factors that contributed to a 'good experience' but also a 'bad experience' if lacking. It also ranked as one of the key areas for improvement with 32% of respondents highlighting this.

## Equality and diversity considerations

During 2015, as part of the equality delivery systems assessment, the CCG undertook an extensive engagement exercise with national, regional and local organisations which represented the views and interests of people and communities who share protected characteristics.

The outcome of the exercise highlighted a range of issues and barriers that need to be addressed throughout the health economy in Southport and Formby.

Groups and organisations strongly advised that new providers work to address the issues that were raised which include the following key areas:

- Understanding cultural and language barriers associated with race
- Ensuring organisations understand and address needs of the LGTB community
- Organisations robustly implement reasonable adjustments

As part of the ongoing engagement of community services these issues have been raised. The equality and diversity issues raised in this recent phase of engagement were as follows:

### **Disability access to health centres and GP practices**

Sefton Access Forum discussed this at length and recommended that automatic doors be installed at all practices and centres and the use of taped barriers be reconsidered as these can be difficult to negotiate and raise issues of dignity for wheelchair users.

### **Wheelchair availability in residential and nursing homes**

Feedback from nursing homes patients highlighted issues with wheelchair availability and how this can prevent patients accessing services in the local community.

### **Computerised and telephone appointment systems**

Several minority groups discussed the challenges that patients with learning disabilities and mental health issues have using these systems and the importance of other options and the availability of appropriate support.



## Other key considerations

- Given the low response rate to the survey, which equates to 0.6% of the total Southport and Formby population, the results of this engagement should be considered alongside existing intelligence and previous engagement feedback
- As only 1.5% of survey respondents had received care in a residential or nursing home setting, further patient experience data may be required to review delivery of services in this setting
- This report does not include service specific feedback. Any changes to specific services in the future should take account of the service level feedback received in this and previous rounds of engagement
- In addition, providers and commissioners would need to consider the impact for patients of any service specific changes and the level of engagement required to fulfil statutory consultation and Public Sector Equality Duties (PSED) as recommended in the Equality Impact Assessment. Depending on the degree of change and the impact for patients, providers may be responsible for the management and reporting of related patient engagement processes.

## Conclusions

The feedback from this recent phase of engagement confirms and supports the findings from previous engagement and other available intelligence.

However, it has identified that generally people do not understand what community services are, what services are available and how these are accessed.

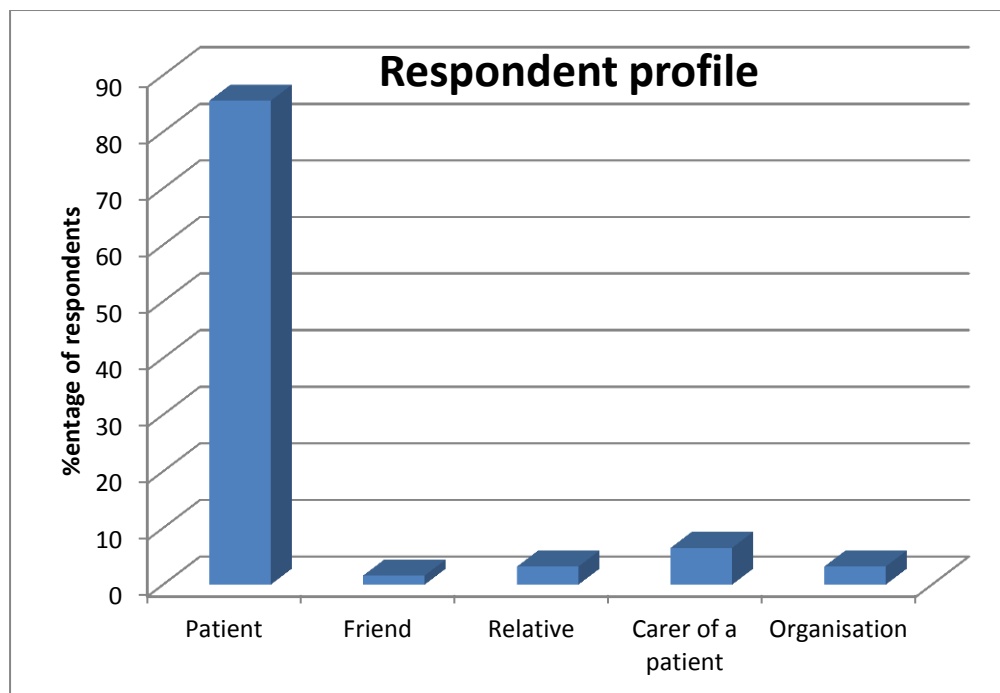
It has been recommended by several groups and individuals that information on these be more readily available and more actively promoted, particularly focusing on referral options.

## Appendix A: analysis of survey responses

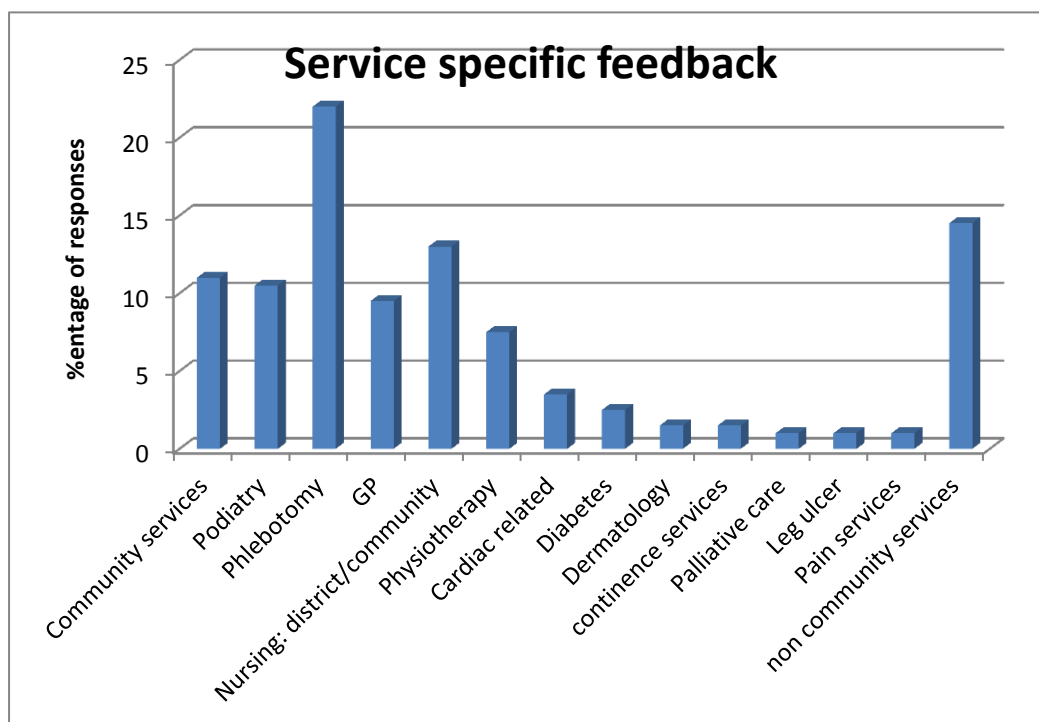
From December 2015 – 31 March 2016, 72 survey responses were received

117 service specific experiences were received, 92 of these were community services and 25 were non-related eg; GP and hospital services.

### Survey respondent profile:

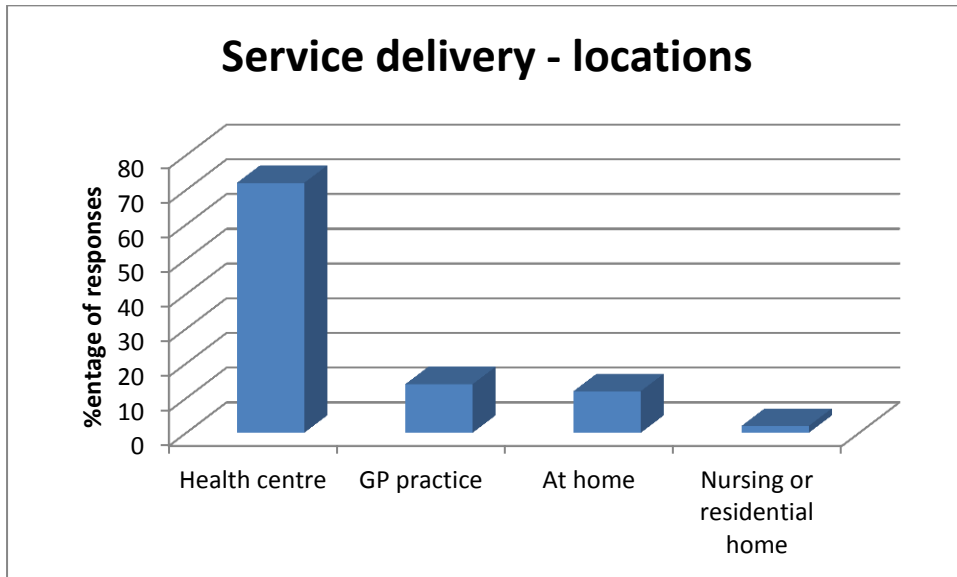


### A breakdown of responses by service:



(Further collation and analysis of the survey responses includes only those that refer to relevant community services)

**A breakdown of service delivery locations:**



**Average service ratings:**



**Average service ratings by location:**



**‘What made it a good experience?’**



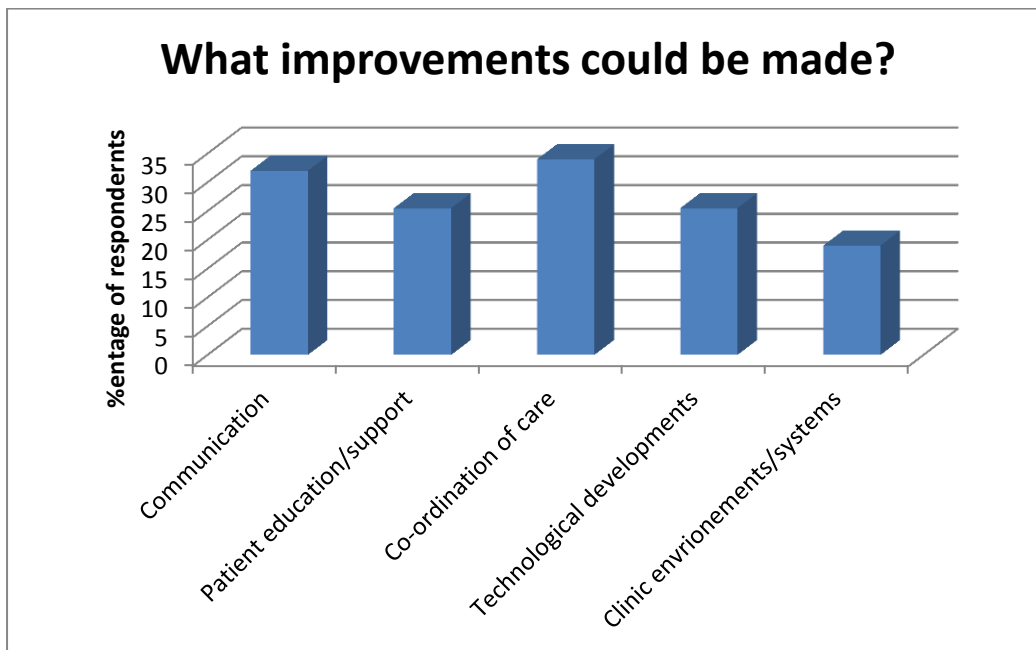
There was an 89% response rate to this question.

### What made it a bad experience?'



There was a 51% response to this question.

### 'What improvements could be made?'



There was a 40% response rate to this question.

## Appendix B: key stakeholder groups, meetings and events

Stakeholder groups, meetings and events
Embrace and In Trust Merseyside - LGTB communities
Equal Voice - BME communities, CVS
Healthwatch Community Champion Group
Healthwatch Steering Group
MacMillan Health & Wellbeing Event
Migrant Worker Group (ESOL)
One Vision Housing/Sovini - working age people
Parkinson's Society - Southport and District Branch
Road Safety Partnership - Road Safety event for Senior Road Users -
Sefton Ability Network - all disability groups
Sefton Access Forum (SAF) – physical access for disabled people
Sefton Alzheimer's Society
Sefton Consultation and Engagement Panel – Sefton Council
Sefton Dementia Action Alliance
Sefton Health & Social Care Forum
Sefton Library services
Sefton Mental Health Service User Forum
Sefton Opera (Older Persons Enabling Resource & Action) - Beat the Blues event
Sefton Partnership for Older Citizens (SPOC)
Sefton Pensioners Advocacy Centre (SPAC), Southport
Sefton Pensioners Advocacy Centre (SPAC), Formby
Young Advisers and other youth groups - Sefton CVS
Multiple Sclerosis Society - Sefton branch

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