

healthwatch Middlesbrough



Strengthening Voices Report 13th July 2016

Introduction

Healthwatch Middlesbrough held their annual event on Wednesday 13th July 2016 at Acklam Green Centre. The main purpose of the event was to present Healthwatch's third annual report and to gather opinions from the public through workshop activities on how they wanted to engage with the providers of health and social care services. The 'Strengthening Voices' event attracted over 60 people ranging from service users, family members, carers, service providers and staff from the Clinical Commissioning Groups, Local Authority and NHS England.

Attendees heard three presentations on developments to health and social care in the area. Professor Paul Crawshaw, Chair of Healthwatch Middlesbrough gave an overview of Healthwatch's work and developments over the last year followed by Edmund Lovell who gave an update on 'The Better Health Programme'. June Johnson also gave a presentation on 'The STAR Scheme'. Attendees had the opportunity to ask questions following each of the presentations.



Professor Paul
Crawshaw -
Chair of
Healthwatch
Middlesbrough



Edmund Lovell -
Communications Lead
Better Health
Programme
NHS North of England
Commissioning
Support



June Johnson -
Operational
Manager of STAR
Scheme

After the presentations, attendees took part in some workshop activities discussing and feeding back information on how they wanted to receive information and be informed of changes as well as how they wanted to feedback their views and experiences to service providers, commissioners etc.

Workshop Activity 1 - How do you want to receive information & be informed of changes?

The most reoccurring theme discussed amongst the attendees at the event was the importance of tailoring communication strategies to the target audience. This may involve identifying different ways to inform individuals of changes and developments to local health and social care services. By identifying a target audience and having a greater awareness of the needs of these individuals, more people will be able to be informed of local changes.

A large proportion of the older population do not have access to or know how to use computers and mobile phones therefore emails and information on websites etc. is not easily accessible. For these individuals, preferred methods of communication include; simplified literature / leaflets in the post, adverts and posters in Doctors waiting rooms as well as individual phone calls from people they trust e.g. organisations such as Age UK. A leaflet drop round care homes was also suggested as a route to improving the knowledge and awareness of not just the residents but family, friends and care home staff too.

Better utilisation of TV screens in GP surgeries was also encouraged by attendees at the event. The TVs can be used to advertise and provide information to patients whilst sat in the waiting rooms. The self-service check-in screens could also be utilised so patients can give feedback about the service they have received that day or a voting system put in place to rate their satisfaction. In addition to this, better utilisation



of frontline staff was also recommended e.g. when a patient visits the GP surgery to pick up a prescription or book an appointment, the receptionist could use this as an opportunity to discuss any relevant changes, promote public consultations and provide information and leaflets to patients.

Additional ideas discussed included the use of picture boards or 'information packs' to be made available in GP surgeries for patients to pick up and take away to read at their own leisure. By doing this, patients will not feel rushed to read all the information available to them in the surgery when attending their appointment. Information packs could also be placed in hospitals, dental practices and 'information hubs' to ensure a large proportion of people are reached.

When using emails, texts and social media (Facebook and Twitter) to send and promote information, a method which is highly preferred by young people, it is important that the information is written in a way which targets these individuals e.g. using appropriate language and not too much information. Giving people incentives to complete surveys and leave feedback via this route is also recommended. It is also important to incorporate different approaches depending on who this information is aimed at e.g. individuals with learning disabilities would

need simplified literature. Ensuring leaflets, posters etc. are kept up to date and any 'old' information is discarded to prevent confusion is also important.

A mobile app was also suggested as a way of involving younger people. Individuals would receive regular notifications leading them to find out more information. Photographical barcodes which individuals can scan with their smartphones was also a popular method of communication, these could be placed on prescription bags, posters etc. if people wish to be directed to a webpage to find out more information. An information directory webpage could also be an idea to use. By having all the information and updates put onto a website which people can access as and when they need would be highly favoured.

The importance of using current resources in the community to target individuals is also vital to inform individuals of changes to services. The use of the Voluntary, Community and Social Enterprise (VCSE) sector and organisation such as Healthwatch would be of huge benefit to circulate information and messages therefore the development of relationships and links with this sector is imperative. By linking in and working with the VCSE sector, information can easily be passed on by trusted groups and individuals to service users and the public through their services, community groups, newsletters and events. In addition to this, the use of adverts and publications in free newspapers and magazines would also be of benefit when trying to reach the public.



TV and local radio adverts would also be encouraged as a method of communication. By giving updates and promoting information at peak times on the radio, this will help to ensure a wide reach. Good times for this would be before 9am and after 5pm when people are often travelling to and from work and tend to listen to their local radio station. Using the local hospital radio station would also be useful as individuals who spend time in hospital tend to regularly listen to this during their stay and updates given via this route would be favoured by these patients.

It is also important to consider advertising and promoting information in areas which members of the public frequently visit which may not directly involve health and social care services including; shopping centres, large chain supermarkets, citizen advice bureaus, cafes, libraries, schools, youth clubs, churches, community centres and bus stations. Holding community events e.g. coffee mornings and visiting local community groups, events and festivals would also be a useful way of sharing information. It was also raised that there is a need for a community hub in a central location for individuals to access to find out information about services. All adverts and posters displayed in these areas should have a bold headline which catches the eye and in an easy to read format.

Individuals who are visually impaired require information in a format which is clear and easy to understand, in large print or braille and individuals who are hearing impaired would benefit from a British Sign Language (BSL) speaker visiting

community groups to share information and changes. In addition to this it is important to have information available in different languages as this is often found to be a barrier for seldom heard groups.

When planning on holding public consultations, the ideal time to hold these would be during the day as older, vulnerable people are much less likely to attend on an evening. However, it is also important to arrange alternative times for these events to ensure everyone is accommodated e.g. those who work and parents. The location and venue should be easy to access and on local bus routes. Adverts for these events should be sent out well in advance to allow people to make the necessary arrangements to attend.



It is hugely important for members of the public to hear information from individuals they trust. This may be their social worker, housing group, health visitor, community group lead, carer, community nurse or family member so targeting these individuals would be of huge benefit when sharing information as this would encourage two way feedback.

Workshop Activity 2 - How do you want to feedback your views and experiences?

Members of the public described various ways in which they would like to feedback their views and experiences of local health and social care services, which highlighted that preferences varied depending upon the age group of the individual.

Young people tend to prefer giving feedback online through websites and via social media. Emails and links to online surveys tend to be very popular. The option of sending feedback to providers or completing surveys via text message or mobile apps was also highly favoured by young people. Suggestions of ways to feedback information also included via young children's groups e.g. parent and toddler groups or school newsletters as these are ideally placed for parents to hear about updates and give feedback about local health and social care services which they may currently be using or need to use in the future.

The older population tend to prefer giving feedback face to face to someone they trust or via a telephone conversation so there would be no need to write anything down or use any form of technology. Older people also tend to prefer to share their views and experiences during public consultations and drop-ins in GP surgeries, dentist etc. In addition to this, providing feedback through the VCSE sector with the use of advocates, experts by experience or 'signposting champions' was also an avenue which should be used to gather feedback. VCSE Groups, community groups, key workers, community health centres and teams as well as

the fire service who are ideally placed in the community to support individuals especially the elderly in giving feedback about a service.

Sharing information via service provider newsletters would also be a useful method to use. Providing updates with regards to developments to services in the area with the option of feeding back information if individuals wish to do so would also be beneficial e.g. via email address / free phone line.

It is important to be aware of cultural and language barriers when looking to receive feedback from seldom heard groups, by providing questionnaires and feedback forms in different languages, this will ensure that everyone's voices are heard. It is also important that joined up working and strong relationships are built between other organisation especially those who work with individuals who have disabilities, are young carers or those who access mental health services as the services the individuals use are ideally placed to gather feedback from individuals and feed this back to the Commissioners, Public Health and Local Authority on their behalf.



Promoting success stories to members of the public is also highly encouraged. Sharing feedback and updates on 'you said, we did' will encourage people to give more feedback in the future by demonstrating how their voices have been listened to and resulted in change to a particular service.

Sending questionnaires and feedback forms which are short and simple to complete in the post with a freepost envelope was also a popular method of communication. In addition to this hard copies of questionnaires in GP surgeries, dentists, hospital restaurants was also suggested. Feedback boxes could also be placed in health and social care service waiting areas so individuals can fill out and post their feedback.

It was also felt that there needs to be more opportunities for individuals to feedback information including workshops and public events. With a heightened presence of these in the community, it would encourage more people to attend. In addition to this, it is of great importance to instil confidence in the public that their feedback, good or bad, is welcomed and acted upon appropriately. If individuals do not feel that their feedback is being listened to and considered then this will result in them being less likely to engage in the future.

Conclusion

Effective communication and engagement with the public is vital in informing, influencing, and proposing changes to local health and social care services. Engaging with the public must involve varying methods of two-way communication and ensuring relationships are built and maintained resulting in a positive impact on public knowledge, involvement and confidence as well as strengthening the reputation of an organisation.

Acknowledgements

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