Community Engagement & Intelligence

U3A Saltburn

2nd November 2018

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We attended Saltburn Community Centre on Friday 2nd November 2018 to deliver a presentation to the University of the Third Age group (U3A), to give an overview of local Healthwatch. We used this opportunity to distribute targeted surveys to gather views and experiences of local health and social care services and provide the opportunity for attendees to identify themes that were important to them.

U3A provides an opportunity for those who are retired and semi-retired to share and gain new interests and knowledge. It supports the setting up and running of activity groups, offering a space for people to remain engaged with each other and their local community. The group currently supports around 60 groups and over 800 members across the district. On the day, around 120 of these members were present and 84 completed the 'Share Your Experiences - Shape Our Priorities' survey.

The surveys targeted several key issues associated with the older population, based on research; this included accessible appointments, appropriate care, the 'digital move', independence, isolation within the community and future care. The survey aimed to explore these key themes by the gathering both qualitative and quantitative information. Questions included; which services have been used in the last 12 months, how regularly these are used and how satisfied the service users are with staff and treatment received. Data was also collected regarding their confidence in accessing services, whether there is enough community support available, concerns for future care, and their personal priorities in health and wellbeing. We also provided the opportunity to share both positive and negative experiences of health and social care services.

Community Information and Intelligence

The feedback we received from the group on their experience of services was as follows:

- The majority of U3A members found booking their appointments "Easy". Some respondents outlined the positives of using alternative methods and digital initiatives, e.g. the online booking system, and the automatic patient reminder message.

- Where the respondents did experience problems, this was usually with the initial telephone call. Issues included; having to call very early in the morning and being unable to get through due to a busy telephone line, waiting times for initial appointments and follow up appointments, and difficulties accessing their own/preferred GP.

- Transport was regarded as a barrier to accessing services; this included a reliance on family members, public transport and the availability and cost of car parking at services, particularly hospitals.

- In terms of appropriate care, issues included not having enough consultation time, "rushed" appointments, long waiting times for test results and discussions with the GP. Two respondents detailed how they had an ongoing problem that couldn't be solved by the GPs or nursing staff and felt the process for follow up referral was delayed.

- The level of appropriate care received and attitude of staff was considered to be "helpful". However, there were also time restraints placed on the level of help, as respondents noted that staff were available only "sometimes", and "not always".

- The digital move had a clear divide in our respondents. Out of the alternative methods to accessing services, the phone and online services were the most likely to be used, while the majority of respondents said they would "never use" Skype and video calls. The use of text was also less likely to be chosen.

- The majority mentioned that they do feel confident in using online services, while out of those that didn't, some still tried to use them, there was a suggestion that they would feel more confident with more guidance, while others stated that they don't like to use them and have never tried.

- Some respondents had missed appointments in the past due to forgetfulness, highlighting the benefits of sending of reminders to service users to support them to attend their appointments. Rearranging appointments wasn't considered to be difficult by the majority. For those who did find it difficult, this was linked to a strain on service provision, suggesting a long waiting time for the next available appointment.

- The respondents could be perceived as being independent, as they were recognised as visiting services on their own and being confident to do so, however there were concerns about how this independence would continue as they got older. The levels of confidence also varied between the residents from "pretty" to "fairly". Priorities included; "keeping the mind active and keeping fit and healthy".

- Isolation was not reported to be a problem by the majority, and respondents said there was enough community support for them, however a large majority mentioned that they didn't need support at the present time and therefore the level of support available was currently unknown. One individual noted that they were "confident enough to look and ask, but felt many people are shy", suggesting that community support is out there but may not be easy to find.

- Respondents noted the effect of their family members living far away, and how this could impact on their health needs in the future. Two respondents didn't know of any support services which highlights the need for information and signposting, while another two didn't think that there is enough available for their needs; one respondent linked community support being needed to take the burden off family members, such as his wife. Highlighting the role of the family in care.

- While the majority of respondents weren't concerned "at the moment", they did express some concern for their future care. This was in relation to financial worries; how they would personally afford future care but also nationally in terms of the NHS and funding of services. Getting older in general was a concern, in terms of their decreasing health and abilities and the desire to remain actively independent with the ability to socialise. In terms of the services, respondents were worried about the care on offer and the waiting times as their health conditions would develop with age. Care was often related to family members, which was a concern for those respondents who noted their families lived far away.

- Positive experiences included being "well looked after" and "very good and very helpful" comments about doctors and nursing staff. One respondent also detailed how the information they received from their GP was "excellent".

- Negative experiences involved delays in getting appointments, test results and a diagnosis. The extent to this was reflected in an individual explaining they discharged themselves, and another respondent describing have sepsis that was spotted just before it was too late. The staff were also described as being "overstretched" suggesting respondents felt they hadn't been given enough attention. The car parks at hospitals were also highlighted in a negative way, with regard to availability of parking spaces and the cost.

- The most popular priority was that of access to services, and this included being able to see their own GP, having services delivered properly, and reduced waiting times. Quality of care was also a high priority; with particular reference to services being delivered adequately and a suggestion of better pay for carers to ensure the quality of staff. Another priority given was to receive information in relation to illnesses and availability of services.

- Other priorities given were in relation to the concept of 'active ageing': wanting to remain fit and healthy and keep the brain active. There was also concern about the need for more facilities to enable this and to prevent becoming old and frail, especially for those whose families weren't nearby.

Summary of Intelligence

- Respondents felt they can struggle in the process of making appointments, with issues such as waiting times, making phone-calls and getting access to their preferred GP.
- Digital resources split opinion in terms of whether respondents would use the alternative methods, and if they would feel confident using them to access services. Telephone and online services were the most likely to be used, while Skype and video calls were much less likely to be an option. Highlighting that some more guidance could be useful to support people to be more confident.
- Some respondents noted how digital moves such as the online service and the sending of reminders helps to ease the process of booking appointments. However, there are some people who may not be interested in the digital move at all; further work could be done to highlight the benefits of using online services.
- Community support needs to be more prevalent within society so that everyone has knowledge of what services are available and how to access them, this could be visibly linked to and showcased in NHS services so that people are aware, prior to there being a need.
- There is a now vs. future aspect to many of the problems; while respondents said that there wasn't an issue at present, they raised a concern as to how this would be impacted as they get older.
- The respondents recognise the benefits of keeping fit and healthy and keeping the brain active, this reflected in their desire to maintain an active lifestyle to prevent problems in future care.

Acknowledgements

We would like to thank the members of the Saltburn U3A group for providing us with this feedback.

We will share this intelligence with relevant stakeholders to ensure that the views of the people we spoke to are included in the decision making to improve patient experience and access to services.