

‘What Matters to You?’ Engagement Report

For Commissioning Engagement Cycle – Commissioning Intentions

1. Summary

This report highlights the engagement findings and recommendations during an engagement exercise completed between 25 June 2019 and 31 July 2019. The purpose of the ‘What Matters to You?’ engagement roadshow was to get people’s views on local healthcare services to ensure Wolverhampton Clinical Commissioning Group (WCCG) is commissioning the right services for the needs of the population. This work will inform and guide WCCG’s Commissioning Intentions (CI) for 2020/21.

The objectives are:

- To promote (along with other communications plans) the WCCG as an effective custodian of the local NHS that makes decisions in the best interests of local people
- Inform commissioning decisions using the engagement cycle and CCG Communications and Participation Strategy, to ensure they are focussed on the needs of service users and communities
- Influence commissioning of local services beyond health and care to make a real impact on wider determinants of health
- To define and provide a range of communications and participation products and methods to help people to:
 - learn about the different ways WCCG is commissioning health and care closer to home, online via the Patient Access App and gauge how people feel about health and social care working closer together and sharing patient records.
 - share their opinion with us.

The setting of CIs is an annual activity that seeks to ensure commissioners have a clear oversight for delivering their ongoing vision for improving local health outcomes, and to let providers know of the contractual changes that will be implemented in the forthcoming year.

CIs for WCCG have been aligned to the following:

- Operating Plan
- NHS Long Term Plan
- Five Year Forward View
- Primary Care Strategy
- Primary and community element of the Better Care Fund

2. Introduction

The aim of the ‘What Matters to You?’ engagement roadshow was to give Wolverhampton residents the platform to join in the National ‘What Matter’s to You?’ conversation with regard to local healthcare services and what they would like to see more of in the future.

WCCG took this opportunity to listen to local views and opinions and talk about the different ways WCCG is commissioning health and care closer to home, online via Patient Access App. It was also designed to gauge how local people felt about health and social care working closer together and sharing patient records.

3. Engagement approach and methodology

The engagement roadshow launched on Tuesday 25 June 2019 and the last event was held on Saturday 20 July 2019. The online survey closed on Wednesday 31 July 2019.

We used a variety of engagement methods and channels to secure residents' feedback, including:

- Online survey distributed electronically and mailed with freepost return envelope
- Public engagement events x11
- CCG website
- CCG twitter

WCCG also incorporated the NHS Big 70 Tea theme and promoted the public to say something they would like to thank the NHS for, using the hashtag #thankyouNHS.

The questionnaire was developed using Survey Monkey, and the online link was made available on the WCCG website. The online link also featured in our stakeholder letters to encourage people to take part in the survey.

Information on the engagement exercise was published on the WCCG website under the 'Talk to Us' banner. It had its own dedicated page of 'current engagement and consultations', which had 397 'hits' on the page, 137 'hits' on the news article, and 161 'hits' on the home page banner.

Frequent communications on WCCG's twitter account were published, introducing twitter polls where followers could answer certain questions taken from the survey online.

Other methods used to get stakeholders involved included:

- Press release
- GP bulletin
- Staff bulletin
- Practice nurse bulletin
- Patient partners
- PPG chairs
- Stakeholder list
- Wolverhampton Voluntary Sector news bulletin
- 11 public engagement events, which included six events at GP practices and five community events.

Date/ Time	Venue	Present
Tuesday 25 June 10:00-13:00	Thornley Street Surgery	Local residents, patients and interested stakeholders
Wednesday 26 June 10:00-16:00	Mayfield Medical Practice	Local residents, patients and interested stakeholders
Thursday 27 June 10:00-16:00	Penn Manor Medical Centre	Local residents, patients and interested stakeholders
Friday 28 June 08:00-14:00	Whitmore Reans Health Practice	Local residents, patients and interested stakeholders
Wednesday 3 July 10:00-12:30	The Hub at Ashmore Park IT training session	Local residents, patients and interested stakeholders
Thursday 4 July 09:00-14:30	Bilston Market	Local residents, patients and interested stakeholders
Friday 5 July 10:00-13:00	Spring Vale Library Stay and Play session	Local residents, patients and interested stakeholders
Monday 8 July 09:00-16:00	Showell Park Health Centre	Local residents, patients and interested stakeholders
Wednesday 17 July 09:00-15:00	New Cross Hospital	Local residents, patients and interested stakeholders
Saturday 20 July 12:00-16:00	International Fun Day Heath Town Park	Local residents, patients and interested stakeholders

4. Survey findings and participant responses

We arranged for 11 public events spread over a four-week period. A survey was used of nine questions (not including Equality & Diversity questions).

174 members of the public completed the surveys:

- 91% filled in the survey by / for themselves
- 2% filled in the survey for someone for they were a carer
- 7% filled in the survey on behalf of someone in the family

Topics included:

- Range and views of healthcare services
- Views on how access to healthcare services can be improved
- Enquiry about willingness for healthcare record to be shared between health and social care professionals
- Enquiry about willingness to access services online or in the community

4.1 Range and views of local healthcare services

4.1.1 Q. Have you, a family member or a person you have cared for been in contact with any NHS provided healthcare service(s)?

- A. 99% of survey respondents said they had recently been in contact with an NHS provided healthcare service. Twenty-three services were mentioned with the top three services being GP surgeries, urgent care services and maternity services.

4.1.2 Q. Please tell us how you would rate the experience when you, a family member or person you have cared for accessed a healthcare service(s)

A. 41% of respondents said their experience had been good and 29% of respondents said their experience had been excellent.
7% of respondents said the service they/their family member received had not met their needs.

The table below shows the number of respondents who rated each service area as being excellent, good, fair, poor or not meeting their needs.

	Did not meet my needs	Poor	Fair	Good	Excellent
Adult mental health	1	5	5	11	9
Children's mental health services	0	2	0	1	1
Children's and young people's services	0	3	1	6	3
Diabetes support groups	1	1	4	11	2
GP surgeries	10	24	25	64	42
Maternity services	0	4	3	20	8
Physiotherapy services	0	0	6	17	10
Sexual health services	0	0	3	5	0
Urgent care services	6	9	7	31	21

4.1.3 Q. Please tell us the reason for your answer

A. Over half of respondents who said their experience of the healthcare service they received 'did not meet [their] needs' or was 'poor' were referring to their GP surgeries service. Key themes in responses are as follows:
- difficulty in accessing GP appointments (waiting times and booking)
- having to repeat story to GP/healthcare professional
- unhelpful attitude of GP receptionists

23% of respondents who said their experience of the healthcare service they received 'did not meet [their] needs' or was 'poor' were referring to urgent care services (A&E and Urgent Treatment Centres). Key themes were as follows:
- long waiting times to be seen in A&E and Urgent Treatment Centres
- lack of personal care and attention in A&E

4.2 Views on how access to healthcare services can be improved

4.2.1 Q. How do you think we can improve your experience and access to healthcare services?

A. Almost half of respondents (45%) who answered this question suggested ways that their experience and access to GP services could be improved. The top four themes were: make GP appointments more accessible; reduce waiting times for appointments; improve communication between healthcare professionals and improve attitude of staff (particularly GP receptionists).

Suggested improvements around urgent care services included: increase workforce; improve communication between healthcare professionals and stop people abusing A&E services.

4.3 Enquiry about willingness for healthcare record to be shared between health and social care professionals

4.3.1 Would you be prepared for your healthcare record to be shared securely between health and social care professionals?

A. Yes – 104 No – 30 Not sure/would need more info – 38

Of those who said 'No', five people stated that they did not think it would be safe to share information, four people gave privacy as a reason and four people said they didn't think it was necessary.

4.3.2 How would you feel about having more than one staff member (e.g. a district nurse and a social care professional) visiting you at the same time?

A. I **would not mind** being seen by multiple staff at the same time – 56%
 I **would mind** being seen by multiple staff at the same time – 9%
 I have no preference as long as I get seen quickly – 19%
 I have no comment – 16%

4.4 Enquiry about willingness to access services online or in the community

4.4.1 Q. How would you like to access healthcare services in the future?

	Yes, I would be prepared to	No, I would not be prepared to	Not sure/would need more information
I would be prepared to talk to a healthcare professional over the phone	65%	16%	20%
I would be prepared to book appointments, see my test results and view my healthcare record online	54%	26%	20%
I would be prepared to see my healthcare professional face to face for an appointment	96%	1%	3%
I would be prepared to have my GP appointments online	38%	38%	24%
I would be prepared to receive the care I need within the community at another nearby location	69%	11%	20%

There are mixed views about accessing healthcare services over the phone, online and in the community. The two areas where opinions differ the most are: willingness to book appointments, see test results and view healthcare records online, and preparedness to have an online GP appointment.

Only five out of 25 respondents aged 75+ said they would be willing to book appointments, see test results and view healthcare records online or have an online

GP appointment. This may be due to the generation not being as familiar with technology.

4.5 Was the survey a good representative sample of the population?

Gender: 60% of people surveyed were female, 38% male and 2% preferred not to say. According to the 2015 mid-year population estimates, there are 50.7% females and 49.4% males in Wolverhampton.

We surveyed more women than men. This maybe because of the venues we chose or the possibility that more women were interested in sharing views about healthcare services.

Age: 1 (1%) respondent was under 16 years old
 4 (2%) respondents were aged 16-24
 21 (12%) respondents were aged 25-34
 68 (39%) respondents were aged 35-59
 46 (27%) respondents were aged 60-74
 25 (15%) respondents were aged 75+
 7 (4%) respondents preferred not to give their age

A good spread of ages with over half of respondents likely to be in employment. However, we didn't get many responses from the age groups 16 years and under, and 16-24. This could be because of the venues we attended and the times we attended them.

Ethnicity:

	Responses	Percentage
Arab	1	1%
Asian or Asian British	25	14%
Black or Black British	19	11%
Chinese	1	1%
Mixed dual heritage	5	3%
White or White British	101	57%
Other	12	7%
Prefer not to say	10	6%

Other ethnicities included:

- African-Caribbean
- Black American
- Eastern European
- Irish
- Mixed South African
- Pakistani
- White European

Figures from Wolverhampton Equalities Analysis in 2014 show the population as 64.5% White or White British and 35.5% as Black Ethnic Minority (BME) communities. Our survey respondents were 57% White or White British and 35% BME communities. We therefore achieved a good representative population for the survey.

Where were the survey respondents from?

The first part of the respondent's postcode:

WV1	14
WV2	12
WV3	16
WV4	25
WV5	2
WV6	13
WV8	1
WV9	1
WV10	33

WV11	12
WV12	3
WV13	4
WV14	28
Other	8

Other postcode prefixes included:

- DY8 (Stourbridge, but treatment at New Cross)
- Walsall (x5 including WS11, 1S15, WS9 and WV32) but all had treatment in Wolverhampton.

We had a good spread of survey respondents, with the top four postcodes represented being WV10, WV14, WV4 and WV3. Only eight of those surveyed were from neighbouring areas.

4.6 Is there anything else you would like to tell us about healthcare services in Wolverhampton?

General comments: Positive: 18
Negative: 18

Negative comments mainly focused on resource issues within the NHS, waiting times and inequalities for those from disadvantaged backgrounds. There were also some comments relating to quality of care and people abusing and misusing services.

Acute services: Positive: 3
Negative: 7

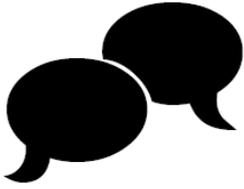
Three out of the seven negative comments related to car parking fees.

Primary Care services: Positive: 18
Negative: 23

Most negative comments were around access to GP services and issues with online services (particularly the Patient Access App). However, positive comments suggest that there is a willingness to use online services, access healthcare in the community and be seen by other healthcare professionals. See question 4.4 for respondents' willingness to access services online or in the community.

Other healthcare services
(NHS 111, WMAS, WIC, UCC): Positive: 3
Negative: 4

Some of the range of comments received:

	<p>NHS works for me and my family. If you use the NHS properly then it works.</p> <p>I am unwell and access the NHS frequently, I would like improved access and better consistency of care.</p> <p>I tried the Patient Access app but the system wasn't great - only select appointments and when clicked on the appointment was no longer there so phoned up GP practice and all appointments had gone.</p>	
	<p>The NHS is understaffed and I feel like I'm not getting the service fast enough.</p> <p>Excellent service - I've lived in Walsall and Burton on Trent and the services in Wolves are very very good.</p> <p>I once had to phone the GP practice 95x to get an appointment, ended up being 3rd in a queue and then all appointments had gone.</p>	
	<p>My GP practice is excellent they have given so much support for my son who had complex disabilities, who sadly passed away last November, and for my daughter who has mental health issues following an abusive relationship.</p> <p>If I had help setting up online GP appointments then I would use that.</p> <p>NHS standard has dropped.</p>	
	<p>People need to stop abusing the NHS - it upsets me when people moan about the NHS.</p> <p>Many people are severely disadvantaged by virtue of age, ethnicity, poverty and unfamiliarity with the workings of the NHS.</p> <p>Where are services based - booklet to every household needed.</p>	
	<p>GP doesn't offer choice appointment at referral.</p> <p>NHS 111 doesn't work for diagnosing over the phone, hard for the professionals to make decisions over the phone.</p> <p>Put more money into services and stop 'rationing' care by putting arbitrary rules in place when there is no clinical reason to do so.</p>	
	<p>I feel like I have to plan my illnesses!</p> <p>Excellent NHS111 service. Use Patient Access App to monitor cholesterol and also get good advice on app.</p> <p>Patient Access App has no NHS reference to it or branding- it has made a few people I know reluctant to use it because they think it's a scam.</p>	

	My current GP service is staffed by locums, there's no consistency in care and treatment required.	
	Both myself and partner have had better than good services from the Heart & Lung department, the Respiratory Clinic and Deansley Centre, Surgical department of New Cross Hospital.	
	GP appointments okay, but only available during the day when I'm at work.	
	Wolverhampton health care/commissioning and planning seems to have quick fix responses which are poorly thought out at times.	
	Are the mental health services getting as much attention as medical etc needs?	
	It can be complicated to login online with a username code and not your actual name.	

5. Recommendations to influence the Commissioning Intentions for 2020/21

5.1 Range and views of local healthcare services

Almost all (99%) had been in contact with an NHS provided healthcare service and 70% of them stated that the service they received was good or excellent. From a quality perspective this is good, however further work should continue to maintain and further improve quality of all services procured by the CCG.

A range of services were mentioned (23), however Primary Care continues to be the first healthcare service accessed in the community with 38% of respondents having accessed this service recently.

Recommendation: Further work should continue to maintain and further improve quality of all services procured by the CCG.

5.2 Views on how access to healthcare services can be improved

Main issues were around waiting times and access to services, particularly GP appointments. Feedback suggests people aren't aware of extended access evening and weekend appointments and that receptionists are unhelpful.

Recommendation 1: The CCG should look at ways of promoting extended access to increase uptake of evening and weekend appointments and ensure GP practice staff are comfortable signposting and booking alternative appointments.

5.3 Enquiry about willingness for healthcare record to be shared between health and social care professionals

60% of people surveyed said they would be happy for their health record to be shared between health and social care professionals. Those unhappy for records to be shared (17%) gave the following reasons: unsafe to share information, privacy and it being unnecessary. 22% said they were unsure/would need more information.

Recommendation: To provide information to patients to reassure them that processes are in place to keep their data safe when sharing information between healthcare professionals.

5.4 Enquiry about willingness to access services online or in the community

65% of respondents said they would be prepared to talk to a healthcare professional over the phone and 69% said they would be prepared to receive the care they need within the community at another nearby location. Less people said they would be willing to access services online to book appointments and check their healthcare record (54%) and even fewer people said they would be willing to have a GP appointment online (38%).

Recommendation 1: The CCG and its member practices should promote consultation types (such as telephone and video consultations) and continue to promote the availability of GP appointments at hub venues as another route to access primary care.

Recommendation 2: Further work should be done to explore digital services and its uptake in Wolverhampton.

5.5 Survey respondents

We noticed that we didn't get many responses from the age groups 16 years and under, and 16-24. This could be because of the venues we attended and the times we attended them.

Recommendation 1: During early 2020, source local Children and Young People (CYP) groups to attend to engage with CYP on 'What Matters to You?' and other mental health and wellbeing areas.