

How your stories have helped to improve services

How Healthwatch uses your feedback

January 2025



info@healthwatchbrightonandhove.co.uk

We would like to extend our warmest thanks to everyone who has shared their story with us.

All feedback matters. Sometimes a single story can result in change.



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1. Summary

Healthwatch Brighton and Hove collects patient stories, experiences, concerns and ideas about health and social care all year round on a wide range of topics.

In this report, we describe what we have been doing with your feedback. It's through your feedback that we are empowered to act and to seek changes and improvements to services.

What we achieve on your behalf is delivered by six staff members and over 30 volunteers. It's also thanks to other local organisations who we work with, including Switchboard, Sussex Interpreting Services, Bridging Change, the Trust for Developing Communities and many more. And it's also thanks to our colleagues in <u>Healthwatch West Sussex</u> and <u>Healthwatch East Sussex</u>, our partners at local hospitals, NHS Sussex and Healthwatch England.

We've gathered your feedback by attending public and partner events, through surveys, face-to-face and telephone interviews, focus groups, social media and via our Helpline which is available online and over the phone.

Between 1st January to December 2024 our patient engagement has included 221 enquiries to our helpline (phone calls, feedback through our website and emails). The majority of people were raising a concern or complaint about a service but some people also sought advice and guidance about health and social care services. The five leading areas of concern which we are closely monitoring are:

- Poor hospital care including waiting times and poor communication around appointments – 48 comments.
- Poor quality of care from a GP 41 comments.
- Difficulties getting appointments with a GP 18 comments.
- Long waiting times for planned care 17 comments.
- Lack of an NHS dentist 17 comments.

23 people also made compliments about the health and social care they had received.

Between April and September 2024, Healthwatch Brighton and Hove staff and volunteers attended six events, speaking to 120 people with many of these people completing our engagement form to share their experiences of health and care services. You can read more in our <u>report</u>.

2. Some of the impacts that your stories have had

Within this report, we refer to a number of organisations who we have shared your stories with. To help you understand who they are, and how they use your feedback, we have provided some definitions and descriptions in an annex to this report.

GPs - Woodingdean Medical Practice

In July and August 2024, Healthwatch Brighton and Hove conducted a survey for patients registered with Woodingdean Medical Practice.

People told us:

"I have not tried to book an appointment recently because every time I have tried in the past, I have not been successful. I therefore attempt to treat myself." As a result of patients raising concerns over making GP appointments at Woodingdean Medical Centre - like the sentiment expressed opposite - Healthwatch Brighton and Hove spoke to local Commissioners of primary care services (which includes GPs), the Care Quality Commission (who regulate services) and we met with the Practice Manager. With their full support we undertook a patient survey.

Our survey explored awareness and opinion about changes the practice had already made and to test the appetite for new options, such as preferences for more phone appointments or more appointments offered in the future as opposed to the same day. 1,129 patients responded.

Key findings

Less than one half of patients were aware of the majority of changes the practice had already made. Awareness was low for being able to book appointments with a Social Prescriber Practitioner, or Clinical Pharmacist (15.5% aware), and Enhanced Access appointments (14% aware). Please see the Annex for definitions of these roles and services.

Few people knew about the following: where to find the tips 'to make the most of your appointment' published on the practice's website (9% knew); how to use the e-Consult function on the website (14.5% knew); how to subscribe to 'Practice news' via email (15.5% knew) or how to raise a comment about the practice (16.5% knew).

People showed a preference for phone appointments (63.5%) and to extend the period of appointments bookable in advance from 2 to 4 weeks (60%). 45% wanted more service updates from the Practice keeping them informed about the changes that may help them access care more easily and 38% were interested in video appointments.

Our recommendations to the practice included:

Increase patient awareness about the new initiatives and information available at the practice. We suggested that a review of the website may help with this.

Raise awareness of the Patient Participation Group and its role to patients and try to broaden its demographic profile.

Offer appointments both in advance and on the same day as well as more phone and video appointments.

Raise awareness of e-Consult and have this open on the website for longer.

What next

The practice responded to our report and patient feedback by



"We always want to give priority to face to face appointments as we believe this is better for patient care however patients can always request their telephone appointments as an alternative. We have responded to feedback and introduced pre-bookable appointments up to 2 weeks ahead and are happy to extend this further. We continue to work on our website to help patients and we acknowledge that further work is needed to make navigation to information easier."

We have shared our report with NHS Sussex commissioners and the Care Quality Commission (CQC). We will be repeating the question about whether making an appointment has become easier or more difficult to see whether patient's experiences of booking appointments has improved.

<u>Read our report</u> <u>Read CQC's report on the practice</u>

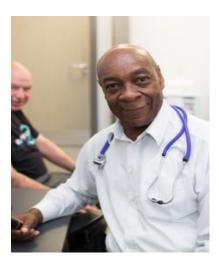
We continue to collate your feedback about GP services across the city

and use this is flag concerns or questions to those who are responsible for overseeing changes to Primary Care across the city and with the CQC. We monitor reports published by the CQC to look for any local practices which have received poorer ratings and we share your feedback with CQC to help them conduct their inspections.



If you have any questions, stories - good or bad about your local GP service, please let us know by contacting

info@healthwatchbrightonandhove.co.uk



Emergency accommodation

In June, we we're contacted by a resident of The Heathers (4-5 Lower Rock Gardens, BN2 IPG), citing several issues. Whilst it is listed as a B&B, Healthwatch Brighton and Hove are advised that it provides emergency accommodation for people experiencing homelessness. Content from the letter is included below:

People told us:

"This place is an emergency accommodation for the street homeless, but I find it very poor accommodation. The accommodation does not have any furniture, it is difficult to get in and out of your own personal room door, tenants are not allowed visitors, which includes carers and support, there is no access for people with disabilities, and the maintenance to the property and each tenant's room is very poor, which includes tenants with disabilities. Brighton and Hove City Council has been informed of this, but they are not concerned about the situation."

What happened?

We were aware of a story published in the <u>Argus</u>, where part of a ceiling fell onto a man who was housed in Percival Terrace, Marine Parade, which is also emergency accommodation. The man suffered a spinal injury and a minor traumatic brain injury. A similar incident happened in August last year. The <u>ceiling in a block of</u> flats used as emergency accommodation for homeless people in Grand Parade, Brighton, collapsed on residents as they slept during the night. Based on this intelligence, we escalated our concerns to the Council (Head of Homelessness, Head of Temporary & Supported Accommodation and Assistant Director for Housing Needs and Supply). As a direct result of our escalation, the Heathers was inspected and the views of residents about the accommodation were collated. This highlighted some minor issues which are now being actioned.



If you have any questions, or wish to share your own story, please let us know by us at <u>info@healthwatchbrightonandhove.co.uk</u>

Enter and View: Fracture Clinic at Royal Sussex County Hospital

Healthwatch Brighton & Hove undertook an Enter and View visit to the fracture clinic at the Royal Sussex County Hospital.

What happened?

On 28th August 2024, one volunteer representative and one Healthwatch staff member conducted an Enter & view of the Fracture Clinic at the Royal Sussex County Hospital. We decided to visit after receiving feedback regarding issues with booking appointments and outpatient letters.

The team talked with five patients and their relatives and asked for their views and experiences of the Fracture Clinic including appointment booking, imaging, communication and appointment letters, the virtual fracture clinic, and their experience overall. They were also free to discuss any aspects raised by the patients they met.

Key findings

A number of positive findings were identified during their visit:

The clinical care, the efficiency of the service, and the environment (aside from signage) were praised by patients.

Patient praise for staff awareness of neurodiversity.

The environment felt calm, clean, organised, and tidy.

Different types of seating for different needs was provided. This included low softer seating and high-backed chairs with arm rests.

Our suggestions for improvements included:

Improvements to the booking system.

Staff IT training to reduce the chance of mistakes on appointment letters.

Clearer signage to find the clinic.

Considerations for patients with dementia (such as clearer distinction between walls, doors, and floors).

A hearing loop at reception.

People told us:

"Although there were issues with the signage, it has only been a good experience. Good efficient service."

People told us:

"I am autistic and don't like enclosed spaces. But the imaging team has always been very supportive, although it's a difficult process, they have always been aware of my needs and made it as easy as possible. Staff are aware, engaged, and supportive of neurodiversity."

What next?

We shared our findings with the hospital and presented this at a meeting with staff. Many of our findings and recommendations can be easily implemented bringing benefit to hundreds of future patients and staff. Our local trust has actively welcomed and supported these visits and we are grateful to them and everyone involved for their collaboration.

<u>Read more about our visit</u>



If you have any questions, or wish to share your own story, please let us know by contacting Katy at

katy@healthwatchbrightonandhove.co.uk

Hearing your voice through our monthly polls

In February 2024, we started to run brief polls (typically asking just six questions) working with our neighbouring Healthwatch in East and West Sussex. Each Healthwatch takes the lead with a poll and, at the present time, Healthwatch Brighton and Hove have led one on Memory Assessment Services, another on Pharmacies (based on the Pharmacy First initiative) and a further one on outpatient letters. We share all the poll results with NHS Sussex and Council and other partners.

Memory Assessment Services (MAS)

Key findings:

53 people from across Sussex shared their views with us. We heard:

Around one quarter (27%) had waited or are currently waiting over 6 months for their first appointment with the MAS.

People told us:

"A timelier assessment process - from the moment of referral to the actual appointment was too long and prevents the process of treatment."

"A dedicated contact for someone to contact with any questions." The majority were very satisfied or satisfied (53%) with the information they received before their first visit to the MAS.

People had received help from a support service such as the Alzheimer's society (38%) and a named person they could phone or email (30%). However, 23% received no support.

In terms of the recent temporary reduction of services in some areas of Sussex (from January to end of March 2024), 22% said it negatively affected the support that they needed and delayed their appointment at the MAS (20%). However, one-third were not aware (32.5%) and 22% said the temporary closures had no impact.

What happened

Your feedback on MAS built on our previous work on dementia in <u>2023</u> and supported us in escalating our findings with <u>HERE</u> (who provide the MAS in Brighton and Hove), with Brighton and Hove City Council commissioners and at the Integrated Care System Patient Experience Committee. These meetings have ensured that your voices and experiences were shared with those in charge of making decisions about MAS services. We continue to discuss long waiting lists with HERE and are learning more about their planned work to reduce these.

We also shared the results with the <u>Sussex Partnership Foundation Trust</u>, who deliver some MAS services (not in Brighton & Hove). We received a response from their Chief Executive thanking us for the report and promising to feed the results into their new strategy, which they have been developing this year and which will set their priorities for the coming years.

Read our report

Pharmacy First

In July 2024, the three Healthwatch teams in Sussex sought people's experiences of using pharmacy services. This was due to the recent expansion in services provided by pharmacies and the launch of 'Pharmacy First' in January 2024 which you can read more about <u>here</u>

People told us:

"They need to advertise all of the services they offer as most are unknown by the public."

"Rottingdean Pharmacy has recently closed down out of the blue and I now have to go to Woodingdean and get two buses or Peacehaven."

"None - happy with my pharmacy overall, although queues are sometimes quite lengthy."

"Better coordination with hospital and surgery."

Key findings

483 people from across Sussex shared their views with us, including 72 people from Brighton and Hove:

69% of Brighton residents knew they could get a flu vaccine at a pharmacist whilst 57% were aware of blood pressure checks. 61.5% were aware of access support for sore throats and 52% for earaches. In addition, 51% were aware that infected insect bites could be treated by a pharmacist. Uptake of new pharmacy services by residents of Brighton and Hove was low. Use of some pharmacy services ranged from just 0-9%. However, 27% of respondents had used blood pressure check services and 55% had used flu vaccination services.

For Brighton residents, the numbers saying they would use NHS 111 services rather than going to a pharmacy was higher than the Sussex average, at 37%.

Brighton residents were generally satisfied with the services offered by pharmacies. However, 73% of Brighton residents had been affected by a lack of available medication in pharmacies and 34% by pharmacy opening hours - both these levels were higher than the Sussex average.

What happened

Our poll results were shared with NHS Sussex who advised they are working on a performance improvement plan including some targeted communications and engagement and that our findings could inform those communications.

The results were also discussed at the Community Pharmacy and Public Health Forum in October and we have been told they will be very helpful when considering updates to the Brighton <u>Pharmaceutical Needs Assessment</u> (PNA) and recommendations. Healthwatch were subsequently invited to join the PNA and a Community Pharmacy Group. We are discussing with NHS Sussex what further engagement we might do in this area to understand why uptake of services is so low.

Read our report



If you have any questions, or wish to share your own story, please let us know by contacting <u>info@healthwatchbrightonandhove.co.uk</u>

Digital attitudes from older people from Black and Minoritised Ethnic backgrounds

With funding from the Kent, Surrey and Sussex Clinical Research Engagement Network, we explored digital exclusion among older people from Black and Minoritised Ethnic backgrounds. 22 people aged 65 or older were recruited with help from Bridging Change and Sussex Interpreting Services.

People told us:

"I have this problem, the doctor called me, and he asked me to send him a video. But I had never done this to take a video and send it over. That was the problem for me so in the end I went face-to-face." "Most of us don't use online and we are suffering. I don't have all the technology for health things, people I know are being left behind. You try the phone to make a quick appointment and you have to say it's urgent otherwise they say go online, which I can't."

Key findings

Most people, although had a mobile, were using this solely to make phone calls or text. There was a particular problem in accessing emails on a mobile.

People have a sense of distrust with technology, especially when conducting financial transactions or when sharing personal information.

Most people did not learn about digital technology at the time the internet was emerging. Families, friends and some professional 'drop-ins' have been valuable sources of advice and assistance. When learning, because of what people attributed to their age, a step-by-step approach with a slow pace, to learn only what was essential, was seen as more favourable to a 'crash course'.

Being able to read letters, messages, emails and use of the NHS App was impossible for those for whom English was not spoken or was their second or third language.

What happened?

We produced a one-page summary of the report which was offered to all research participants.

We plan Follow-up with bridging change about how best to reduce digital exclusion within this community based on the project findings.

The project identified 3 champions who agreed to act as future advisors in 'research studies related to ageing' - this will further the representation of black and Minoritised ethnic people in research.

Project findings were presented at the British Geriatric Society Conference (2024).



If you have any questions, or wish to share your own story, please let us know by us at Lester@healthwatchbrightonandhove.co.uk

Cervical screening

We were commissioned to interview a woman who was hesitant towards cervical screening. Our interview found barriers stopped them from going for a screening which included a lack of compassion from some clinicians, a mistrust of the NHS in relation to women's health, and health anxiety (worried about receiving bad news). Interviews were also done by other Healthwatch teams across England. This contributed towards a Healthwatch England <u>report on</u> <u>cervical screening</u>. The report outlined findings from these interviews together with a survey of 2,400 women who were hesitant about cervical screening. Healthwatch England made a series of recommendations to policymakers on how to improve uptake and to help meet the target of eliminating cervical cancer by 2040.

Dentistry

In response to your ongoing concerns raised with us about access to NHS dentistry, we worked with a local MP to ask questions in parliament on your behalf. Your experiences have ensured that government Ministers have been made aware of the impacts on your health and wellbeing. Read our report <u>here</u>. We will be reviewing NHS dentistry again in 2025.

Emergency department at the Royal Sussex County Hospital

In July, we collated your patient feedback in response to ongoing concerns raised about the environment of the Emergency Department (ED) at the Royal Sussex County Hospital (RSCH), which is part of University Hospitals Sussex NHS Trust (UHSx). Whilst staff were routinely praised by patients for the care they provided, our report summarised individual stories and concerns.

In several cases, the examples highlighted the external pressures on our local ED e.g. some people were attending ED whilst waiting for urgent care or treatment following a GP referral (this relates to the long waiting lists in Sussex for appointments) whilst other patients attended ED as they were unable to get a GP appointment.

Healthwatch routinely monitors what is happening at the Emergency Department and we share our feedback with University Hospitals Sussex Trust, NHS Sussex (our Integrated Care Board) and the Care Quality Commission to support their ongoing improvement programmes of work. The hospital always captures our feedback from our Enter and View visits and uses these to try to make changes. You can read more by <u>clicking here</u>.

Annex - list of definitions

Commissioners and commissioning. Commissioning is the process of planning, agreeing and monitoring health and social care services. Commissioning is undertaken by a range of organisations who make decisions based on the health-needs of local people which is informed by your experiences. Commissioners are employed to gather intelligence, make decisions, award contracts and monitor performance. Services can be commissioned for a few thousand people, while for rare disorders, services are secured nationally. Find out more about <u>who commissions NHS services</u>.

Clinical Pharmacists conducts medication reviews, provides medication advice to healthcare professionals and patients, optimises medication, translates medicines national policies into local implementation and adopts a whole system approach to medicines management.

e-Consult is a clever bit of software that allows you to quickly and safely get help and advice from your own doctors and GP practice online, for free, from anywhere. eConsult is a form-based online consultation & triage platform the collects your medical or administrative request and sends it through to your GP practice to triage and decide on the right care for you and everyone else.

Enhanced Access services at GP practices. From October 2022, your GP practice will have started to offer improved access to appointments and other general practice services. This 'enhanced access' means:

- GP services will be providing appointments until 8pm on weekdays, and from 9am-5pm on Saturdays as a minimum.
- Appointments will be both bookable in advance and available for same day (and able to be cancelled by the patient remotely).
- A mix of services will be available within these additional hours with access to the range of health professionals working in the primary care team.
- There will be a choice of ways to access appointments depending on clinical need, such as telephone, video appointment, online consultation, or face to face.

If a face-to-face appointment is needed, this will be at a GP practice in the local area – this may not be at your own GP practice, but at another nearby. The exact mix of what is provided through this enhanced offer will be determined based on local health needs, current usage of out of hours services and the views of patients.

Integrated Care System (ICS) ICSs came into force on 1 July 2022, replacing Clinical Commissioning Groups. For Sussex, the ICS is called Sussex Health and Care which serves a population of more than 1.7 million people. Our ICS works in <u>partnership</u> across Sussex, as well as within and across the populations of Brighton and Hove, East Sussex and West Sussex. Our ICS's ambition is to bring more integrated and joined-up services to people, to ensure they receive the best possible experience and are supported to maintain their health. We attend many meetings run by our ICS where we use your feedback to support decisions.

NHS Sussex. The ICS includes a new Integrated Care Board called <u>NHS Sussex</u> that aims to improve the way the NHS plan and pay for local services, and to better support local NHS organisations to give people the care they need. We routinely meet with colleagues at NHS Sussex where we discuss your concerns and identify projects to explore these in more detail.

Patient Participation Group. A PPG consists of patients who wish to be involved in a local GP practice, taking an active role in developing local health services

Pharmacy First was launched on 31st January 2024, enabling highly trained pharmacists to assess and treat patients for seven conditions without the need for an appointment or prescription:

- Sinusitis
- Sore throat
- Earache
- Infected insect bite
- Impetigo
- Shingles

• Uncomplicated urinary tract infections in women (under the age of 65) This major expansion of pharmacy services will give the public more choice in where and how they access care, aiming to free up 10 million GP appointments a year nationally.

Primary Care. Primary care services provide the first point of contact in the healthcare system, acting as the 'front door' of the NHS. Primary care includes general practice (GPs), community or high street pharmacy, dental services, and optometry (eye health) services.

Primary Care Network. A PCN is where a group of GP practices work together with community, mental health, social care, pharmacy, hospital and voluntary services in their area to meet the needs of local people.

Providers. The NHS is made up of a wide range of organisations specialising in delivering different types of services for patients. Providers include GPs, Dentists, NHS Trusts, Local Authorities and many more. We share your experiences directly with providers.

Social Prescribing. Social Prescribers connect people to non-medical community-based activities, groups and services that meet their practical, social and emotional needs, including specialist advice services and the arts, physical activity and nature. Their role is to help people identify issues that affect their health and wellbeing when co-producing a personalised care and support plan.

Get in touch



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