

Engaging on our strategic priorities: **A summary of our 'Your health, your say' initiative**

January 2013



Introduction

NHS Scarborough and Ryedale Clinical Commissioning Group (CCG) is a new clinically-led organisation that will have responsibility for identifying and buying (commissioning) health services on behalf of 117,000 residents across Scarborough and Ryedale.

Over the last 12 months we have undergone a process to become an 'authorised' NHS organisation and, from April 2013, will control a commissioning budget of £145 million.

In preparation for this we have been working hard to identify areas of the health system which could be improved, based on the needs of the local population and an assessment of health inequalities. The health priorities that were identified during this process included:

- Early detection of cancer
- Cardiovascular (heart and stroke) care
- Care of the elderly (including long term conditions and end of life care)
- Mental health

This work has informed the development of a draft strategic plan that will guide our work over the next five years.

As we are committed to involving local residents in shaping how and where they receive care and treatment in the future, we wanted to give them an opportunity to tell us whether they agreed with our broad strategic priorities and also ask them about what factors are important to them when accessing NHS services.

Our approach

Our CCG has adopted the Government 'Customer Service Excellence' (CSE) standard as a framework for our engagement and consultation activities.

For this particular initiative, a short survey (appendix A) was developed which was hosted on our website (www.scarboroughryedaleccg.nhs.uk). Three public events were also held to give people the opportunity to meet with members of the CCG and talk through any issues or concerns they had. The three events were held in the following venues:

- Scarborough Library, Tuesday 6 November, 10am to 5pm
- Malton Library, Thursday 8 November, 10am to 2pm
- Eastfield Library, Friday 9 November, 10am to 2pm

The actions resulting from the recommendations in this report will help our CCG develop an in-depth understanding of our community, an appreciation of patients' experience and enable us to use the information as part of our decision making process when commissioning services.

We are the first to acknowledge that this piece of engagement has clear limitations. However, even though the focus of this initiative was very broad and not linked to any specific proposals, we felt it was a good first step in making people aware of our role and highlighting our key priorities.

How the findings will be used

This report is being presented to the Governing Body of the CCG as well as being made available to members of the public via the CCG website.

The key themes will be used to inform future public engagement activities and also to assist further development of our strategic plan.

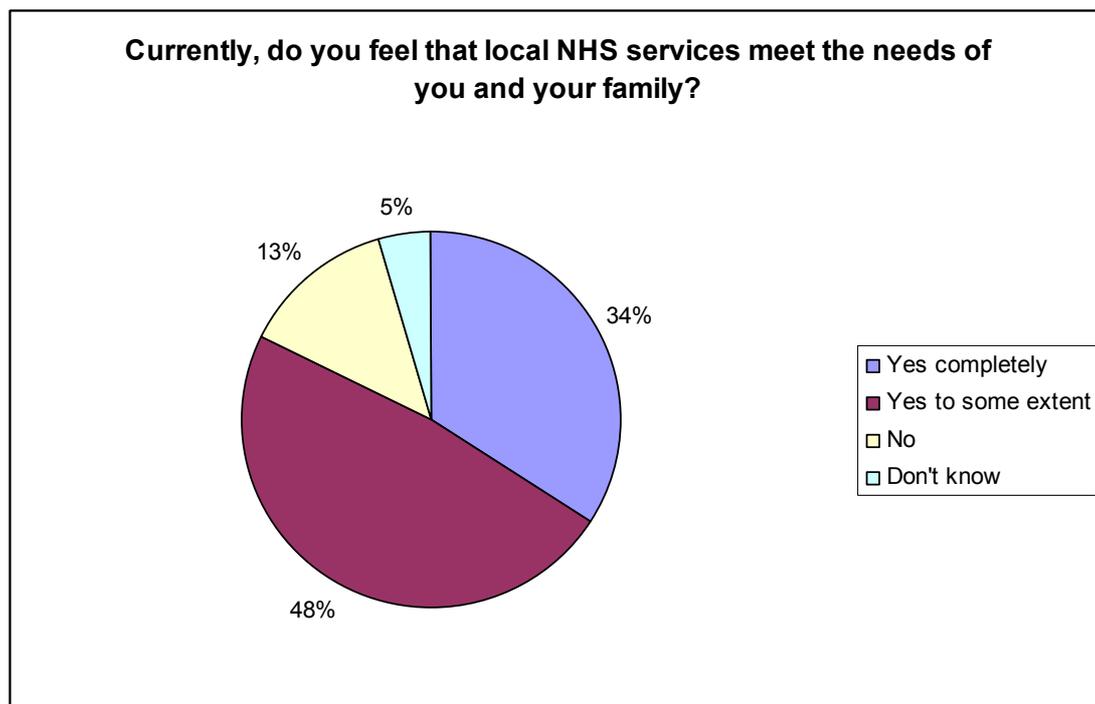
It should be noted that this is only the first step in our efforts to engage with members of the public about our ideas and plans for improving the quality and sustainability of local NHS services.

We will endeavour to undertake more focussed and in-depth engagement once we begin to implement our strategic plan.

Key themes

Question 1

Currently, do you feel that local NHS services meet the needs of you and your family?



When asked for their reasons why, responses to this question were somewhat varied. Some identified specific services such as Diabetes, Cardiac, Cancer, Transplant and Dementia as being good whilst others felt that Mental Health,

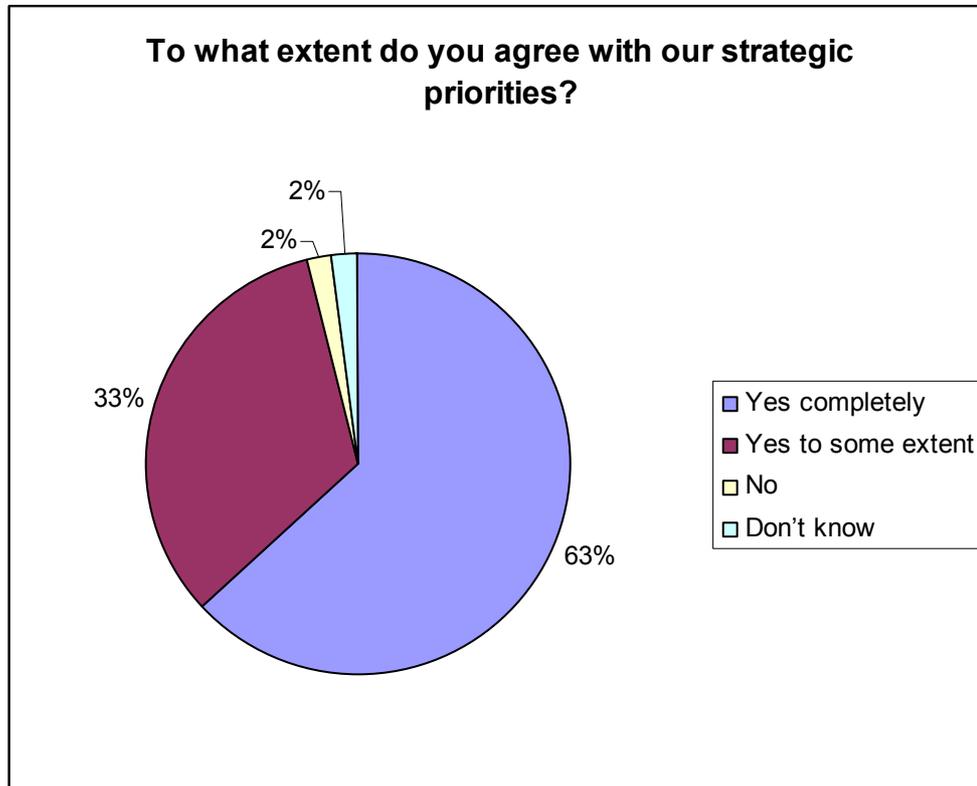
Autistic Spectrum Disorder and Chronic Pain Management services could be improved.

The key themes in order of the most frequent responses:

- Delays in diagnosis and in consultant reports to GPs resulting in delays in referrals and treatment. Extra delays can result from waiting for appointment letters
- GP Practice services differ greatly throughout the area in areas such as customer care, opening times, making appointments.
- Communication / respect and dignity
 - Personal touch is lacking with too much emphasis on inputs and outputs
 - Consultants' poor attitude to older patients in some cases – 'they listen but do not hear'. Staff should communicate and collaborate with the patient in their diagnosis and treatment.
- Unacceptable cuts at a local Minor Injuries Unit (Malton) means no access to services after 5pm or at weekends.
- Mental Health services are poorly resourced and difficult to access, with a lack of therapy services
- Cuts in staffing and funding can mean local department closures and loss of local clinics which could mean patients and families may need to travel further.

Question 2

To what extent do you agree with our strategic priorities? (listed in introduction)



Question 3

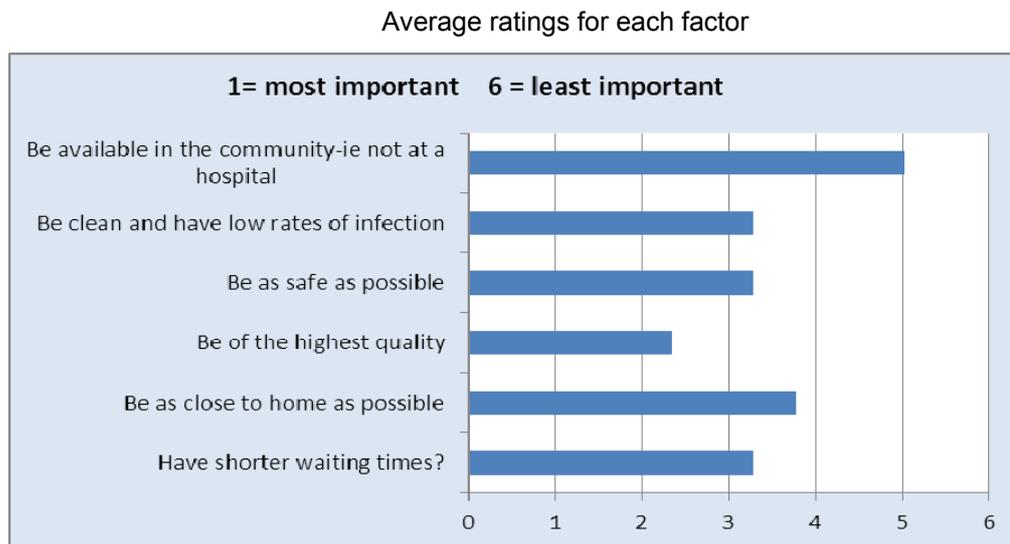
Are there any priority areas not mentioned that you think should be included?

The key themes in order of the most frequent responses:

- Children's services
- Chronic pain management
- Preventative health care

Question 4

We may need to make changes to current services in order to fulfil our priorities. We would therefore like to know what factors are important to you when accessing health services.



Therefore, in order of importance:

1. Be of the highest quality
2. Be as safe as possible
3. Be clean and have low rates of infection
4. Be as close to home as possible
5. Have short waiting times
6. Be available in the community – ie not at hospital

Question 5

Are there any other factors not mentioned above that you feel are important?

The key themes in order of the most frequent responses:

- Effective communications and clear information between patients and staff
- Patient choice for treatment either at local hospital or at GP surgery
- Partnership working with other organisations to provide effective integrated care
- To be treated with respect and dignity at all times for all patients including those with protected characteristics

Question 6

What do you feel is the single most important thing we can do to achieve our vision of 'improving the health and well-being of our communities'?

The key themes in order of the most frequent responses:

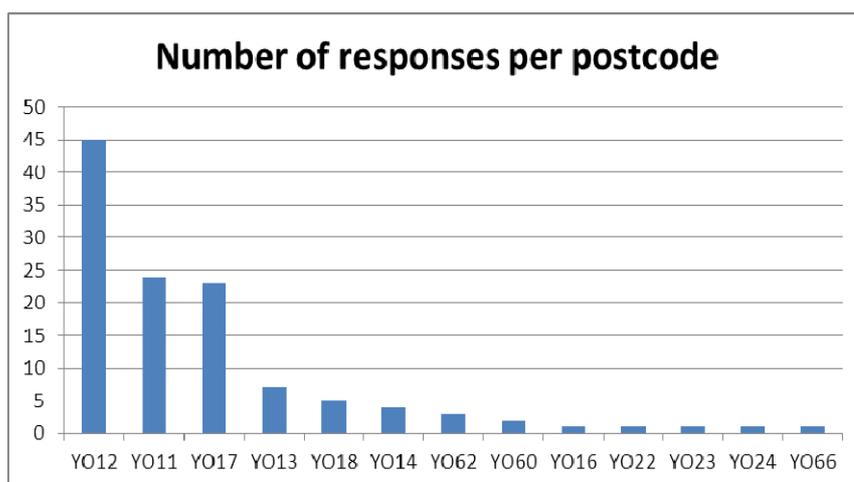
- Clear, open and honest communication and collaboration between staff and patients on health care and treatment
- To promote healthier lifestyles and preventative care by educating children and adults to take responsibility for their own health and well-being
- Local health services for local people including those in rural areas
- Cut waste by reducing paperwork, postage, unnecessary prescriptions, utilities and transport
- Expand early detection programmes, such as cancer checks

Engagement equality data

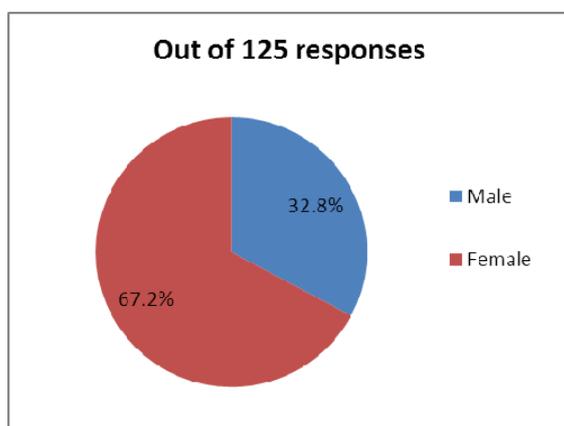
A combined total of 137 responses were received for both the online survey and the three consultations.

Localities of participants

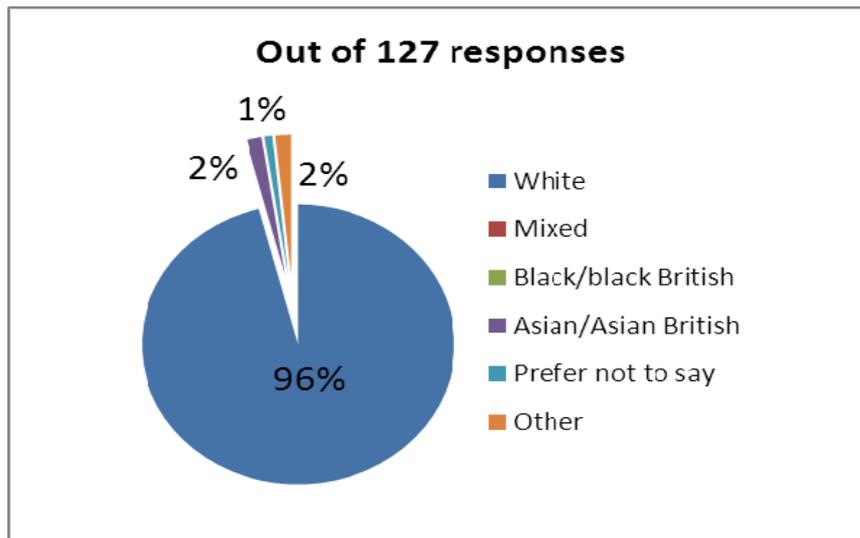
The chart below illustrates the number of responses from each postcode area.



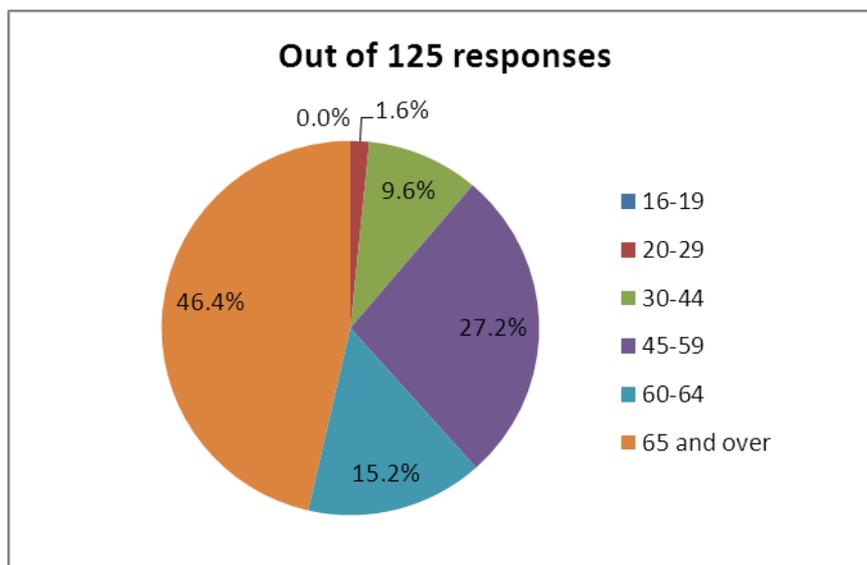
Gender of participants



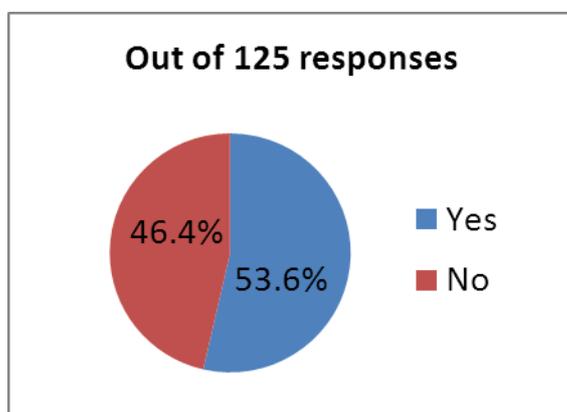
Ethnicity of participants



Age of participants



Long term illness or disability perception of participants (yes or no)



Summary and recommendations

It was clear from speaking with members of the public the strength of feeling towards keeping NHS services local and that many are fearful about losing services in the future; particularly in light of the financial challenges currently being faced.

Privatisation was a key topic of conversation at the three events. CCG members were able to provide reassurance and clarity on this issue as it was evident that many held misconceptions about how the CCG would work in the future and that there was a threat to local NHS services from private providers.

This face-to-face contact was useful in itself and many people commented on how beneficial it was to be able to discuss issues in this way.

In terms of the responses to the survey, it is encouraging that the vast majority of respondents agreed with the priority areas set out in the strategic plan and that over three quarters feel that current NHS services meet their needs at least to some extent.

However, some members of the public found it difficult to prioritise factors that are important to them when accessing health services (question 4), and many said it was dependent on what kind of treatment or service they were accessing (for example, having shorter waiting times would be more important when it was treatment for a critical condition).

What is clear from the responses is that quality and safety are generally seen as being more important than providing services close to home or in the community. This may be a theme the CCG wishes to consider when making decisions around future NHS provision and that quality and safety should always come first.

Recommendation 1 – provide the opportunity for regular face-to-face discussion and demonstrate progress

Following the positive feedback received about the format of the events it is recommended that the CCG facilitates further opportunities for members of the public to meet CCG members and discuss issues face-to-face.

Not only will this give the CCG a more human, personal touch but also give it the opportunity to demonstrate progress made with implementing its strategic plan. Many people said that whilst they value the opportunity to give their views, they wanted to hear about what action had been taken as a result.

The CCG could take a 'you said, we did' approach, by preparing case studies demonstrating how patient feedback had been used to inform change.

Clearly there are resource implications of undertaking face-to-face meetings too often; however, the CCG may wish to consider holding a public drop-in session twice a year at an accessible venue.

It should be noted that the CCG will meet with members of the public when seeking their views about specific issues or proposals as part of their ongoing patient and public engagement strategy.

Recommendation 2 – produce clear and timely communication

A key theme in the survey responses is around the importance of clear and timely communication with patients.

Whilst some of this is not within the control of the CCG (ie direct clinician to patient communication), the CCG does have the power to make information available about why a particular service may have changed or why a patient needs to access it in a different way.

The CCG should therefore attempt to be as open and transparent as possible when making any changes to services by producing suitable patient information materials that clearly explain the rationale for the change.

A good first step towards achieving this will be to produce a simple overview of the strategic plan, once further development has been undertaken.

Recommendation 3 – give members of the public the opportunity to get involved and have their say

Many members of the public who we spoke with at the events were interested in staying in touch and having the opportunity to have their say over future CCG decisions.

One way to facilitate this, and to help deliver the CCGs ambitions around achieving customer service excellence, would be to develop a membership model where members of the public can sign up to get involved in discussions about specific issues.

By asking people what aspects of healthcare they are interested in when they register will enable the CCG to segment the population and better understand the requirements of each segment. A segment may be determined in terms of demographics (such as age) or interest (such as Mental Health).

Recommendation 4 – attempt to engage with younger audiences

As only 10 percent of respondents were under the age of 45, the CCG may wish to consider what alternative methods they could use for engaging younger audiences in their decision making process.

This may become easier when seeking the views about a particular issue that holds more relevance to a younger person, such as around Mental Health or substance misuse.

Appendix A: Survey

Your opinion of current NHS services

1. Currently, do you feel that local NHS services meet the needs of you and your family?

- Yes completely
- Yes to some extent
- No
- Don't know

Please explain your answer:

Identifying our priorities

Whilst maintaining current health services in the area, we have started to produce a plan for the next four years which sets out our priorities and the changes we will need to make to achieve them. So far, we have identified the following priority areas based on an assessment of local needs:

- Early detection of cancer
- Cardiovascular (heart and stroke) care
- Care of the elderly (including long term conditions and end of life care)
- Mental health

2. To what extent do you agree that these four areas should be a priority?

- Yes completely
- Yes to some extent
- No
- Don't know

3. Are there any priority areas not mentioned above that you think should be included?

Please give details:

4. We may need to make changes to current services in order to fulfil our priorities. We would therefore like to know what factors are important to you when accessing health services. Please rank these options in order of importance to you, with 1 being most important and 6 being least important.

- Have short waiting times
- Be as close to home as possible
- Be of the highest quality
- Be as safe as possible
- Be clean and have low rates of infection
- Be available in the community – ie not at a hospital
- Other (please state)

5. What do you think is the single most important thing we can do to achieve our vision of ‘improving the health and wellbeing of our communities’?

Please give details:

About you

6. What is your postcode?

7. Are you:

- Male
- Female

8. What is your ethnic group?

- White
- Mixed ethnic group
- Black or Black British
- Asian or Asian British
- I prefer not to say
- Other

9. How old are you?

- 16-19
- 20-29
- 30-44
- 45-59
- 60-64
- 65 or over

10. Do you consider yourself to have a long term illness or disability?

- Yes
- No

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