

Goal D: Quality Care Centered around the Person

Health & Wellbeing Strategy Thurrock 2016-2020



GOAL D: Quality Care, centred around the person

1. Create four Integrated Healthy Living Centres
2. When services are required, they are organised around the individual
3. Put people in control of their own care
4. Provide high quality GP and hospital care to Thurrock

Aim

Our aim was to engage with and inform Thurrock residents of the refreshed Health and Wellbeing Strategy 2016-2021 for Thurrock.

Methods

To engage with Thurrock residents on Goal D we carried out a number of engagement activities to gather views on the four priorities as set out in Goal D (shown above). Within this engagement we informed people around the Health and Wellbeing Strategy Goal D and we discussed the Thurrock Clinical Commissioning Groups (TCCG) transformation plans which include the building of four Integrated Healthy Living Centres (IHLCs). We also spoke to a number of individuals around goal D by having informal discussions and noting their views. This was the method used in our December 2016 engagement at the Thurrock Community Hubs, please see Table 1.

We had a total of 256 surveys completed; questions were asked around TCCG transformation plans (Goal D). We had 20 online surveys completed and spoke to 25 people at Thurrock community hubs.

1. Engagement activities: July - September 2016
2. Informal engagement at Thurrock Community Hubs: December 2016
3. Online Survey - 29th November 2016 to 4th January 2017. Promoted through social media (Facebook and Twitter).

Informal Questions asked (at the community hubs)

We used a laminated page showing goal D and our questions as below. We asked people to pick some questions and share their answers/views with us which were noted down.

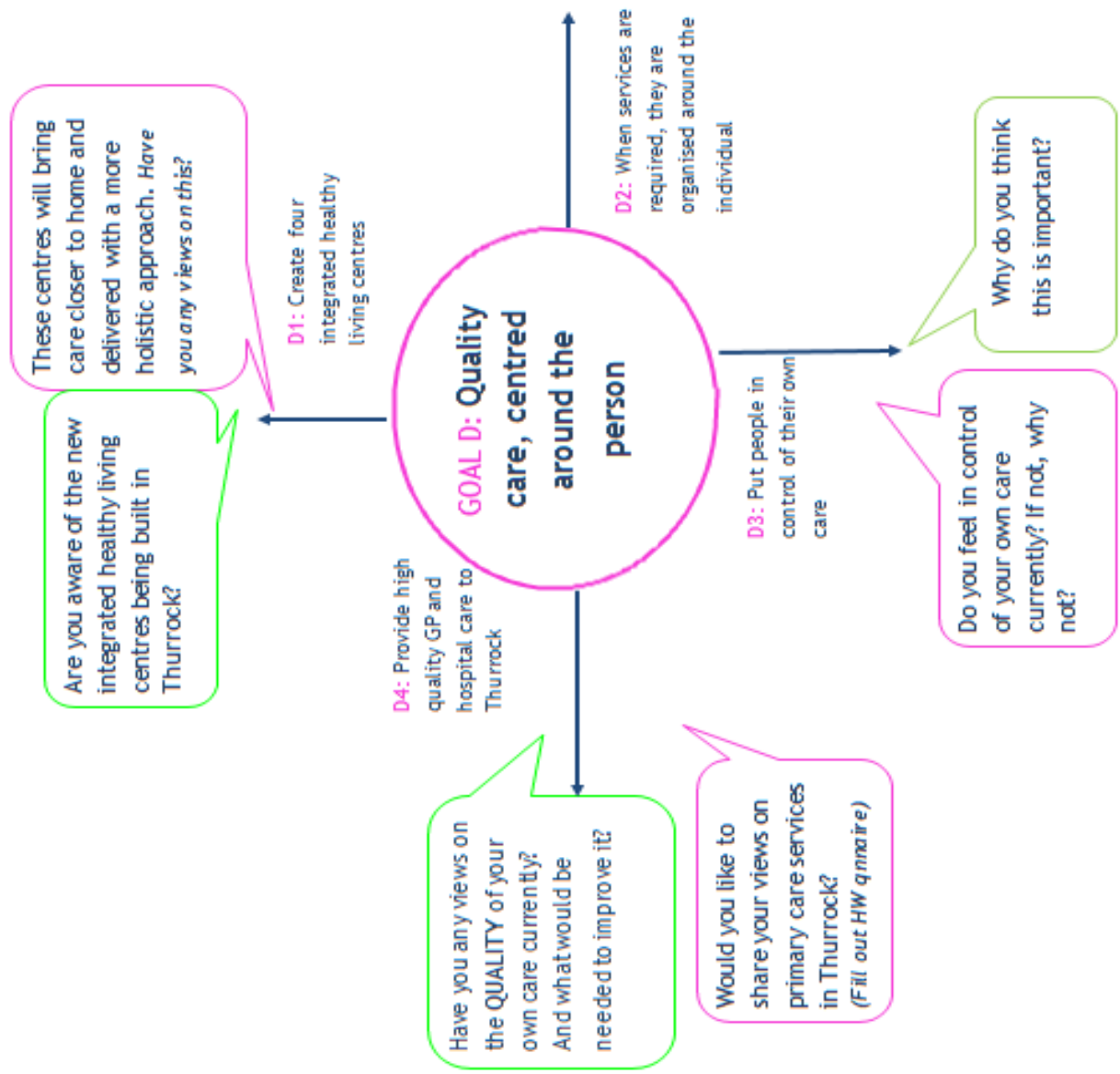


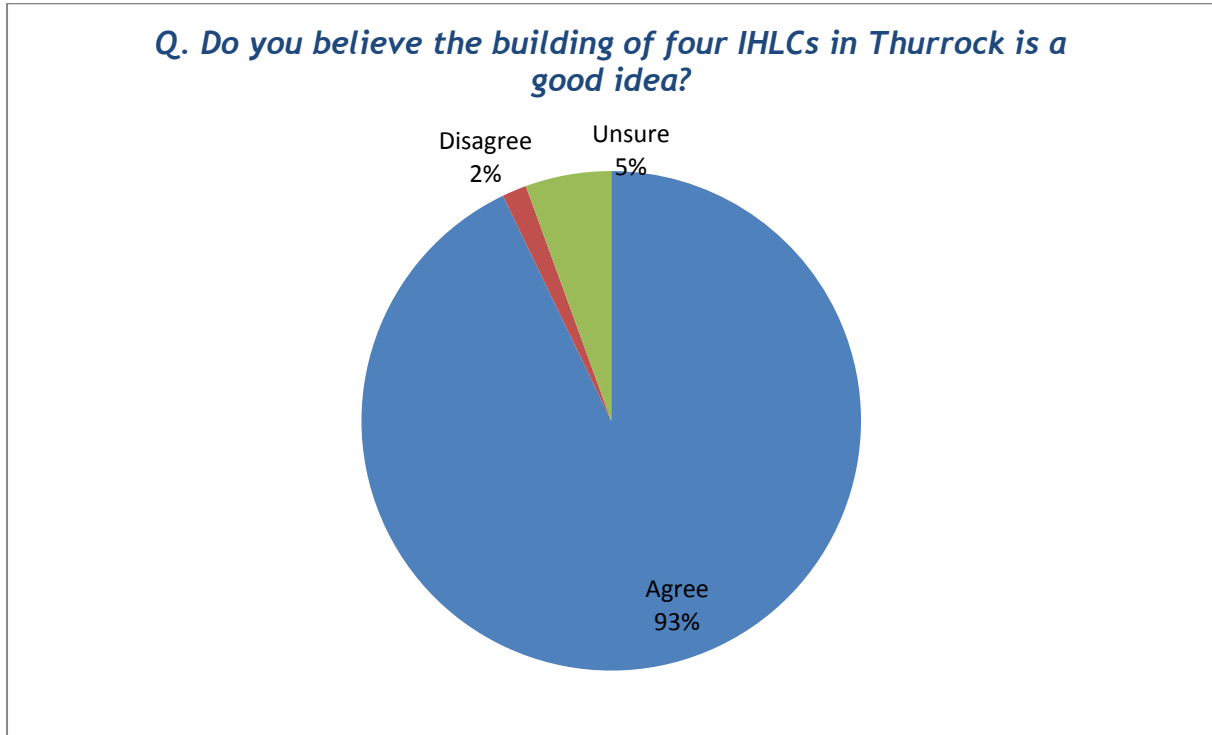
Table 1: Engagement for Goal D

Engagement using surveys			
Date	Area	Group or Event	Description
July to Sep 2016	Thurrock Borough-wide	17 Sheltered Housing Complexes (SHCs) were visited across Thurrock	Healthwatch Thurrock visited SHCs to speak to local residents. A coffee morning or afternoon was prearranged to facilitate this.
26/07/2016	Grays	Big Lunch Event	Community summer event Healthwatch Thurrock attended
02/08/2016	Aveley	Aveley Library Coffee Morning	Healthwatch Thurrock drop in
04/08/2016	Tilbury	Tilbury Forum	Healthwatch Thurrock attended this forum
09/08/2016	Tilbury	Tilbury Fest	Community summer event healthwatch Thurrock attended
17/08/2016	South Ockendon	South Ockendon Hub Family Fun Day	Community summer event healthwatch Thurrock attended
22/08/2016	Grays	Stroke club	Healthwatch Thurrock visited the stroke group
24/08/2016 02/09/2016 07/10/2016	Tilbury	Tilbury Hub	Healthwatch Thurrock drop in to speak with local residents.
05/09/2016	Grays	Over 50's club, Cowdray Hall	A club Healthwatch Thurrock attended
08/09/2016	Grays	Over 60's Club Thurrock Rugby Club	A club Healthwatch Thurrock attended
19/08/2016	Grays	BATIAS Zero Five Club	A club for adults with learning and physical disabilities. Healthwatch Thurrock attended to discuss goal D.
22/09/2016	Orsett	Thurrock Council for Voluntary Sector /Healthwatch Thurrock Event	An event to showcase the work the voluntary sector in Thurrock had been involved over the last year, co-hosted by Healthwatch Thurrock
Engagement using informal methods			
Date	Area	Group or Event	Description
02/12/2016	Tilbury	Community Hub	Healthwatch Thurrock drop in
06/12/2016	Grays	Community Library	Healthwatch Thurrock drop in
13/12/2016	South Ockendon	Community Hub	Healthwatch Thurrock drop in

Results

D1: Create four Integrated Healthy Living Centres

We initially asked people about their views on the creation of four IHLCs in Thurrock.

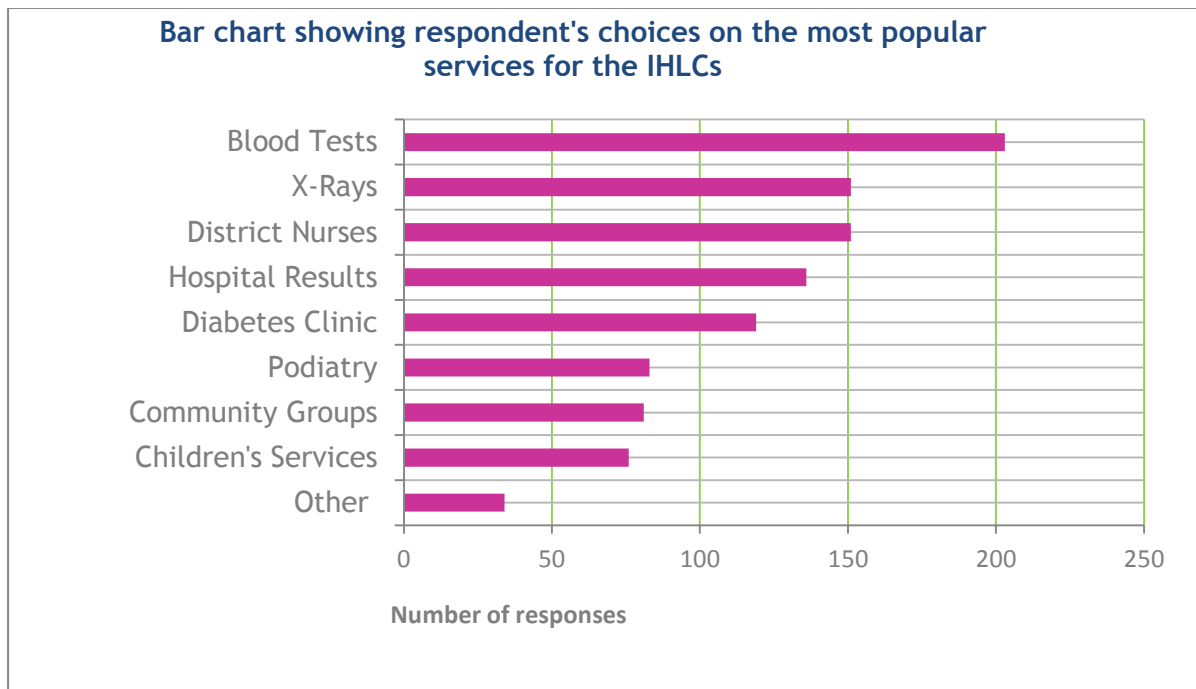


A total of 252 people responded to this question, of which **93% (234)** agreed that the IHLCs are a good idea. Only **2% (4)** disagreed with the idea whilst **5% (14)** were unsure. Responses to this question evidence an overall consensus that the creation of four new IHLCs in Thurrock is a good idea and wanted by Thurrock people.

Some of the concerns that Thurrock residents voiced were themed around:

- The staffing for the new IHLCs
- The funding for the IHLCs
- Transport to the IHLCs if not local to them
- Whether the IHLCs would provide services for people that don't live close by but are still a Thurrock resident

Q. What top 3 services would you like to see in the IHLCs?



From the responses gathered and represented by the Bar Chart above, *blood tests* appear to be the most popular service respondents would like to see in all the IHLCs, followed by *X-rays* and *District Nurses* with *Hospital Results* ranking fourth. This shows that having the blood test services in the IHLCs is viewed as beneficial to community members.

“I am concerned about transport to these centres. Living in South Ockendon I cannot get to the centre in Purfleet. There is also the issue of cost, how do we get to these centres?”

South Ockendon Resident

“Where are all these doctors coming from for these new health centres?”

South Ockendon Resident
(Helford Court, SHC)

D2: When services are required, they are organised around the individual

We asked individuals for their views on how services are arranged and provided:

Q. Efforts are being made to ensure services are more organised around the individual, and people are treated more holistically when they become ill. Is this how you have been treated in the past? Have you any views on this?

Many individuals expressed they felt the care they had received from healthcare services in the past wasn't very holistic. People discussed the communication between care services, the lack of resources and time, and inconsistencies with care pathways.

Views from Thurrock residents below:

- “In the main I and probably most other patients have never been treated holistically in the past. GP's never have had the time. In fact a notice exists in most practices “only one problem at a time”, so exactly the opposite of holistic. So what will change? The number GP's in Thurrock needs to be expanded; I know you agree with this. I think being treated holistically will be an investment of time in a patient that will in the future, save GP time and be better for patients by improving the quality of their care.”
- “I have generally been pleased with the health services that I have received including my GP & specialist referrals. I have not required social care assessment or services. If I felt that I was not being treated on the basis of my individual needs I would consider a complaint to health/social care services. I am strongly committed to the NHS & believe currently that the service is under great pressure as well as with reduced Local Authority funding of social care, & that this will impact on the quality of any integrated service created in Thurrock.”
- “I applaud the theory of co-ordinated (holistic) care for the individual. However, I fail to see where the resources will be found to make it work in practice without impacting on current services. This should minimise delays in processing patient needs. This should result in patients receiving timely care to meet their individual requirements.”
- “No. I don't think enough time has been taken to see what needs some patients have. Some people may be struggling and might need advice to help them to make life a bit easier.”
- “No this is not how I have been treated. There is currently no consistency/follow up/alternative routes or treatment plans - frankly I find the whole experience hit and miss which is not really something you want when it comes to your health. It's extremely important that people feel like they matter whatever the issue with

their health. Sometimes just a friendly follow-up would be sufficient to make people feel like they were not a number and more of a person.”

- “My father in law is now receiving this kind of support; however, it has taken almost 8 years of his incapacity for this to now be effective. My Parents in Law have had a considerable cost involved in buying items that should, I believe, have been available to them. His GP has prioritised and taken care of his needs. This aspect is working well. Everyone's needs are different and a personal plan is crucial.”
- “No (I haven't been treated holistically), lack of integration. Computer systems are different for different parts of NHS. E.g. recently saw out-of-hours doctor as soon as I was very ill. We got sent to A+E, but had to go over what was wrong again as A+E don't have access to out-of-hours doctors system. Reduce time trying to explain everything to different departments/fields. All information needs to be available to all people involved in care. Very frustrating for families to have to keep going over the sameness information all the time.”
- “I can't access services now. So things are only going to get worse. If I can't get my GP to do a referral to a sleep clinic then what hope do I have?”
- “No. To the NHS patients are just numbers. Dignity, respect, proper treatment is lacking.”
- “The last 3 GPs I have had were struck off please can something be done to improve GP care in this area. Because there has been not social or health care of any quality in this area I think reaching out to people who have never had any type of help before is going to be difficult. As Tilbury is growing so fast please let us not forget the disabled and elderly which are also increasing but seem to be slipping through the cracks.”
- “To provide holistic care, there needs to be better co-operation between GP's, Consultants, nurses etc. Care remains fragmented, as communication between consultants and other healthcare professionals is poor. To maximise wellbeing, the assessor needs to understand how different diagnosis interact with each other and the affect this has on patients. Different diagnoses are seen as separate and the treatment normally only deals with one diagnose and this sometime will have an adverse effect on other conditions.”
- “Have not had a problem previously that needed such treatment. Most patients contact within the NHS is through their GP. As long as treatments are linked through GP's, unless they have been hospitalised through an emergency, (where the treatment might be arranged by the hospital), then as long as the patient is kept informed and has an input into their treatment this could work.”

- "We are always told that the patients come first but at the moment with the pressures on NHS services the patient is being neglected. We have to get back to the interests of patients and how they are treated."

D3: Put people in control of their own care

Q. Thinking of your future as an older person, what choices will be most important to you?

Themes that emerged (in order of weight /most common theme first):

- 1) Adequate health services
- 2) Independence at home
- 3) Better affordable home care
- 4) Good transport
- 5) More personalised care
- 6) Having social life
- 7) More local information e.g. Health & Community Services
- 8) Good care and closer to home
- 9) Staying healthy and fit
- 10) More support for sheltered accommodation e.g. bring back the wardens

Q. What matters most to families and carers within the Health and Social Care remit?

The themes that people discussed around this question were as follows (in weight order):

1. The quality of care provided

- Good quality of care
- The right care
- Personalised care
- Early access to services/treatment

2. Family network

- Support for the family members
- Keeping the family members informed
- Keeping costs low to the family e.g. car park fees
- Who to go to when you don't have family?

3. The health and social care system

- Join up services between health and social care
- Services provided locally

"Doctors knowing their patients and their health needs and having good accessibility to it Not waiting 3-4 weeks sometimes up to 8 weeks for an appointment."
Thurrock resident

- Support and advice services
- Good transport links
- 4. Dignity in care**
 - Dignified care
 - Ensuring the patient understands their care requirements
 - Choice over decisions being made
- 5. Improved Social Care Services**
 - Better social care services
 - More consistency with care workers
 - Accessing home social care

Q. What concerns, if any, do you have about developing joined up health and care in localities?

The concerns and views voiced were centred on the following themes (in order of weight most common theme first):

- 1) Public awareness of local services
- 2) Accountability
- 3) Financial responsibility and funding cuts
- 4) Transport concerns

We also asked:

Q. Efforts are being made to make sure people have more control over their own care. Have you any thoughts on this?

Views from Thurrock residents below:

- “There is Self-Care initiative by NHSE designed for patients to use the pharmacist and use over the counter remedies for minor ailments rather than visit their GP. These remedies should be made free for those who do not pay for medication so would be more likely to use them.”
- “Great in theory, but in practice my fear is some individuals will not be sufficiently informed or willing to accept individual responsibility.”
- “I think people should have more control over their own care which would which would make them feel more comfortable and not be in a situation where they have no choice.”

- “Yes, it is essential, provided that systems are in place to monitor and people are not left to cope alone.”
- “Sounds OK, but patients don't always know what's good for them.”
- “Put people in control sounds sensible, but people need to understand their conditions and how the conditions interact with each other: this can be very complex and some people will not be able to make an informed choice. More education and time with patients will be required to reach this goal.”
- “I think the money pressures on the NHS will have an effect on this type of program. People will need support with this and I wonder if we will have enough of the right people to help with this type of program.”

D4: Provide high quality GP and hospital care to Thurrock

We spoke to Thurrock residents about the concerns they may have around the quality of the health services.

Q. Have you any views on the QUALITY of your own care currently? And what would be needed to improve it?

Many people we spoke to expressed that they were happy with the GP and hospital care they receive. However many people did express concerns which were centred on the following themes (in order of weight most common theme first):

- 1) Recognising a lack of healthcare professionals working in Thurrock
- 2) Improved waiting times
- 3) Not having confidence in the Healthcare and Social Care System
- 4) Querying the quality of care provided
- 5) Querying where new healthcare staff will come from
- 6) Concerns over transport to these new centres
- 7) Querying the funding for the transformation plans
- 8) Recognising the benefit of care being provided closer to home

“Having just changed my GP I was pleasantly surprised at the quality of the consultation I received. I did however wait an hour past my appointment time to be seen. This is not acceptable in a well-run practice.”

Stanford Le Hope Resident

I consider the quality of my own care at present to be very good. My concern is on the problem of recruiting staff to the correct levels to maintain a safe and effective service for patients.

Grays Resident

Services are not integrated enough. Services take too long to access. Took 3 years to get my son who has Down Syndrome to be referred to the right agency to support him. It should never take that long, appalling failure of NHS services.

Thurrock Resident

Summary

For engagement on Goal D, we spoke to Thurrock Residents about the Health and Wellbeing Strategy and the Transformation Plans set out by the TCCG which include the development of four new IHLCs for Thurrock.

As the findings show, people overwhelmingly agree with the Health and Wellbeing Strategy Goal D and TCCG plans to improve health and care in Thurrock. People recognise the need for a more joined up approach with care delivered closer to home providing benefits to those who are accessing and using the care services. The majority of people we spoke believed the IHLC are a good idea with **93%** of people saying yes. From the responses gathered around which services people would like to see within the new IHLCs, blood testing was the most common request. X-rays and District Nurses were also high up on people preferences. Local blood testing would improve many people’s health services experience, especially those who require regular blood tests and check-ups, who are often experiencing the most ill health and have the most difficulty travelling far.

Thurrock residents did express a number of concerns around health and care services in; people’s greatest concerns were around the current lack of healthcare professionals working in Thurrock. It is known that there is a shortfall of GP’s in Thurrock currently, this has led to growing waiting times and difficulty getting GP appointments hence *“improved waiting times”* and *“accessing services made easier”* being high up on the agenda when

people were asked what one thing they would change about the health and care system. Other concerns were about access to the new IHLCs for those, in particular East Tilbury, South Ockendon, Bulphan and Horndon on the Hill, who do not live in an area where the centres are being built. Addressing public transport to these areas must be considered. It is hoped that the IHLCs will be able to address the shortfall in GPs in Thurrock and go some way to making accessing services in Thurrock easier.

The quality of that care in both health and social care was also a concern. Some people expressed they felt a lack of confidence in the overall system, stating comments such as “we’ve had promises like this before”. To address this, good communication is essential to inform residents of the changes going on and providing reasoning behind such decisions. Part of our work at Healthwatch Thurrock is to inform people living in Thurrock about these changes and giving them the opportunity to share their view.

Recommendations

Below please see the recommendations which are based on what Thurrock people have told us during the period of engagement for Goal D.

Priority	Recommendation
<p>D1. Create four Integrated Healthy Living Centres</p>	<ul style="list-style-type: none"> • Keep people in Thurrock informed about the IHLCs. The TCCG are already carrying out a newsletter but ensure people are kept informed in other ways. People want to know how staff will be recruited and about the funding for the IHLCs. • Review the transport system in Thurrock to consider people who don’t have private transport and need to get to hospital or an IHLC. • Ensure a good strategy for staff recruitment and retention in the IHLC.
<p>D2. When services are required, they are organised around the individual</p>	<ul style="list-style-type: none"> • Make it easier to book and cancel Primary and Secondary Care appointments in Thurrock.

<p>D3. Put people in control of their own care</p>	<ul style="list-style-type: none"> • Use Local Area Coordinators or other voluntary sector workers as a means to helping people get “on-line” with patient access. This enables people with online access to book appointments, order prescriptions and view their medical records.
<p>D4. Provide high quality GP and hospital care to Thurrock</p>	<ul style="list-style-type: none"> • Prioritise increasing the numbers of healthcare professionals in Thurrock which will have a great impact on quality of the health and care services provided. Ensure a good strategy is put in place for recruitment and retention of healthcare professionals in Thurrock.