

## Healthwatch Oxfordshire Update June 2018

### Patient voices...Our Story

A short video co-produced by the Luther Street Medical Practice Patient Participation Group, Healthwatch Oxfordshire and Luther Street Medical Practice staff. This video looks at the work of the PPG of Luther Street Medical Centre, Oxford, a GP surgery which specialises in offering primary care to homeless people. The four-minute film includes interviews with patients and staff at the practice, who describe how working with the PPG has brought improvements for people using the surgery. To watch the video, click [here](#).

### Stroke services and Early Supported Discharge

The following paragraphs reproduce experiences shared by people who have had a stroke and used health services. These have been gathered from the Healthwatch Oxfordshire Feedback Centre, a short survey and email contacts. Comments from a survey about Early Supported Discharge on the Healthwatch Oxfordshire website and feedback received via email over the past three months.

- Person was admitted in the early hours in early 2018. Examined by a Dr 4 hours later. TIA diagnosed on the basis of past history. Discharged 4 hours later (same day) following review by Physiotherapy and Occupational Therapy staff. Support by Bicester Community services and treated by physiotherapy for the following six weeks.
- A member of my family had a stroke just after Christmas and was in Abingdon hospital for nearly 4 months waiting for a discharge package. This was very hard for her as she desperately wanted to go home and was very aware that she was 'bed-blocking'. It has also meant that she became quite 'institutionalised' and since coming home is finding it very hard to adjust even though she is usually an extremely independent person. She now has a care package with care 4 times a day which is good. However, since leaving hospital all OT and Physio assistance stopped and she has not progressed and in fact she has gone backwards having had a couple of falls and hurting her leg. A doctor has been out to see her 3 times since arriving home. She had a letter to say that the Community Therapy Service would be coming out to assess her at some point. I rang them to find out when this would happen and voiced my concerns and they said that 70 clients were in front of her on the list and it would be weeks! Anyway, they must have thought about it and realised she was 'at risk' and thankfully we now have an OT assessment happening this week.

- My friend had a severe stroke early January and was admitted to the JR. And then transferred to the stroke hospital. He unfortunately died last Saturday. His wife has been through hell to get him a care package so that he could come home, but to no avail.
- Four years ago, I had a TIA. I phoned 111 and the system worked well. After the initial call, I was called back by a doctor who made an immediate appointment at the Abingdon Community Hospital. The doctor there made some checks and made an appointment there and then to attend the neurology department at the JR in 3 days' time. She also prescribed aspirin to minimize risk before the appointment. The JR phoned me the day before the appointment to tell me a bit about what would happen the next day and how much time it would take. I had a full battery of tests. Overall, I feel that everything went extremely [well] and I was treated with great courtesy. The link between the 111 service, OHFT (who run the community hospital) and OUHFT (who run the JR) was seamless. However, there was one minor link-up that could be made in an ideal world. As my symptom was temporary blindness I saw my optician on the day before my first JR appointment to rule out any possible eye problem. She gave me various tests. The JR repeated this test in a very low-tech way. In an ideal world, the optician's test results would have been passed on the JR.
- Had a minor stroke in September. They took me to the JR. Paramedics were excellent, care quick. Very kind and good at explaining things.
- Had third stroke and fell badly down stairs, smashed up leg, foot and ankle. In hospital and care home for 8 months. After 16 months just started to live a near normal life. **John Radcliffe. Star Rating: 5**
- No help, 2 hour wait. Poor disabled assess. My father was the patient, I am his daughter. I rang X-ray in advance and was told that staff were not allowed to push wheelchairs due to their backs. There was no porter. In March, Dad just managed the ramp with a few wobbles. It quite steep if the patient wears a splint, When we got there, people were standing and sitting on the floor. I asked if there were more chairs. I was told no. My father waited two hours for his x-ray and this is a long time for a frail 77 year old who had a stroke in 1969. We used to be able to book appointments and were told minor injuries patients etc are prioritised. Lots of the people waiting were elderly, the quality of care from the radiologists was good. **Abingdon Community Hospital. Rating: 1 Star**
- I was in this ward for just over three months after suffering a severe stroke and was very well looked after thanks to the NHS **Witney Community Hospital. Rating 5 Stars**

## Healthwatch Oxfordshire outreach activities

### Focus on OX4

As reported to the last HOSC meeting in April Healthwatch team has been in Oxford City - particularly in Cowley, Blackbird Leys, Rosehill and Littlemore areas. Over two weeks in January and February, we made face to face contact with over 450 people. Individuals were able to share their experiences through talking directly to Healthwatch staff, by using our freepost 'Tell Us' forms at the time, or by

completing a 'service review' on our website. We also spoke to individuals in more depth, at over 20 community groups we visited.

In total, we collected 315 'Tell Us' forms, in which people told us about their experiences both of specific services and broader health provision and pathways.

The report on this activity has been circulated to all HOSC members and an electronic version is available by following this [link](#).

We heard that while people valued the dedication of health and care professionals, there were serious worries about a few healthcare related issues, including:

- Waiting times for GP and other appointments;
- Perceived barriers to dental treatment, either due to price or lack of available service;
- Concern about pressure on health services owing to new housing developments such as that planned for the edge of Littlemore;
- Factors such as public transport and debt which can have an adverse effect on health.

The findings of the report will now be shared with the county's health providers, commissioners, community groups and other bodies, including Oxford City Council.

## Wantage

During May the Healthwatch team spent three weeks in Wantage. We had stalls at 8 outreach venues including Wantage market, Tesco's at grove, and Wantage leisure centre. Held Voluntary Sector Forum for Wantage groups, and visited Wantage Blind social club, Women's Institute, and local toddler group amongst others. A full report will be published in mid-July.

## Healthwatch at hospital

Healthwatch Oxfordshire has held a monthly outreach stall at one of the four Oxford University Hospital NHS Trust sites between January and April 2018. After visiting each of the four hospitals we have made contact with and heard from 191 people. This has opened up a good opportunity to hear from patients and visitors and make staff aware of Healthwatch Oxfordshire and what we do. Common themes coming through from people are transport / parking causing delays to appointments and stress; difficulties in accessing the sites by public transport; administrative delays / poor communication between departments; and staff are "excellent, easy to talk to, polite, helpful, efficient".

When we have come across concerns that require an immediate response from the hospital we have duly communicated them to the appropriate director.

## Voluntary Sector Forum

### Wantage

The May Forum was held in Wantage to coincide with the Healthwatch Wantage town events. It was attended by 26 people being mainly Wantage based groups. Three themes appeared from the Forum:

1. Community support services run by Oxfordshire County council

2. Transport
3. Social care e.g. care homes and care at home

A full report will be available on our web site by the end of June.

### Social Prescribing

As reported to the earlier HOSC meeting the March Forum meeting focussed on social prescribing with speakers from the Oxfordshire Clinical Commissioning Group and patient participation groups involved in social prescribing initiatives throughout the county. Social prescribing is defined as “a means of enabling primary care services to refer patients with social, emotional or practical needs to a range of local, non-clinical services, often provided by the voluntary and community sector.” How it is delivered varies across the country. A full report is now available on our web site by following this [link](#)

Having listened to the discussions and comments from representatives of the voluntary sector at the forum, Healthwatch Oxfordshire recommends the following:

1. Better cross system working - We urge Oxfordshire Clinical Commissioning Group, Oxfordshire County Council, Oxford University Hospitals NHS Foundation Trust and other system providers involved in different social prescribing initiatives to work together to have a more coordinated approach to social prescribing across Oxfordshire.
2. Better engagement with the voluntary sector - There needs to more engagement with the voluntary and community sector to enable small, medium and large groups to enable them to understand how they can get involved with social prescribing. Groups need information on whom they need to contact and what the procedures are to get involved.
3. Learning from other social prescribing initiatives - We urge the Oxfordshire Clinical Commissioning Group and partners to draw on lessons learned about social prescribing from other parts of the country to ensure they offer appropriate support to the voluntary sector. This is important to enable the voluntary sector to have the capacity to play the vital role envisaged for them in the social prescribing plans for Oxfordshire

### YouthWatch

The next Forum is planned for September / October and as part of our YouthWatch activity we will be listening to voluntary sector organisations working with / supporting young people.

### HOSC MSK / Healthshare Task and Finish Group

Healthwatch Oxfordshire has been actively communicating with both Healthshare and Oxfordshire Clinical Commissioning Group since September 2017. We are currently collating all feedback to inform the HOSC Task & Finish Group of what people are telling us.