

Healthwatch Oxfordshire Report to Health Overview Scrutiny Committee February 2020

Since the last HOSC meeting in November 2019 Healthwatch Oxfordshire has continued to listen to people about their experiences of health and social care services in the county. The following give an overview of our activity and plans for 2020.

- 1. Mental health
 - HWO has taken a broad, cross cutting focus on mental health services throughout 2019, integrating the theme across all projects including within questionnaires for Armed Forces Families, Boaters.
 - We undertook a total of **19** separate 'Enter and View' visits to explore people's views of mental health services delivered under the Oxfordshire Mental Health Partnership (OHMP). This included visits to Oxford Health acute mental health wards, voluntary sector services provided by OMHP and Adult Community Mental Health Teams, Day Hospitals. We spoke to a total of **84** service users, and **88** staff during these visits.
 - We had **132** responses to our mental health questionnaire, and a further **38** from health professionals working in mental health services.
 - Related Enter and View Reports are displayed on Healthwatch Oxfordshire website on an ongoing basis as ready.
 - Final report pulling together all mental health themes will be completed by March 2020
 - Themes are emerging include:
 - Much support is 'life saving' and helpful. People value professionalism, empathy, and understanding from staff, including GPs and mental health professionals. Services like the Haven are really welcomed for supporting people in crisis.
 - People are aware that staff are stretched, and that services are underfunded, and this is of concern - including to staff who would welcome an Oxford weighting to help with the high costs of living in the county.
 - Other comments have included, long waiting times to access support, even if in crisis, long waits for specialised support in particular Complex Needs, long waits between initial contact and start of support, limited amount of sessions and desire to have more face to face support.
 - Others have highlighted need for more support with autism and mental health, more support in transition from Children and Adolescent Mental Health Service to adult support.
 - Still more improvements to be made with communication across OMHP services to support continuity of care.
 - Need for more focus on action to understand and act on Black, Asian and Minority Ethnic (BAME) access and barriers to mental health support.



2. Other mental health and wellbeing early 2020:

We continue to try and focus on areas of health inequality

- January March 2020 Healthwatch Oxfordshire will be working with community networks in Oxford to understand more about how **BAME community view mental wellbeing and mental health support**. This will build on the work carried out in 2018-19 on Men's Health and continue to work with this group and within the wider community. A report will be produced in Spring 2020.
- February June 2020 plan to work with **Sunshine Centre in Banbury** to explore parents and young families' views of **emotional wellbeing support for 0-5 years old children**. This will take the form of focus groups and gathering stories as well as a wider questionnaire.
- Will be carrying out further Enter and View visits to **Response** sites from April on.

Other relevant:

- East Oxford United representatives presented to a **webinar** in December for **Diabetes UK** about Healthwatch Oxfordshire and East Oxford United joint work on Men's Health. The theme of the webinar was 'How we can work in partnership with Black, Asian and Ethnic Minority Communities to improve diabetes awareness and care?'
- Oxfordshire Wellbeing Network (OWN) see separate report.
- 3. Healthwatch Oxfordshire targeted themes:
- Access to health and social care by **families of serving military personnel** in Oxfordshire with both outreach and questionnaire. 87 people responded to the questionnaire and **final report due February 2020**.
- 47 boaters and bargees responded to our questionnaire on access to health and social care in Oxfordshire. Final report to be launched on 26th February 12-2 p.m. with a stakeholder meeting and round table discussion to be held at Tooley's Boatyard, Banbury.

4. OX12 Framework Stakeholders Reference Group

Healthwatch Oxfordshire has been attending the OX12 Framework Stakeholders Reference Group as an observer. In January we reported to the Health and Wellbeing Board our key observations, this report is attached as Appendix A.

5. Looking forward January 2020 onwards:

- Healthwatch Oxfordshire will take a focus on people's experiences of and vision for **Social Care** across the county.
- Research into Oxfordshire County Council policy change for **financial assessments** is moving ahead. Questionnaires due out early February 2020, aimed at gathering views about review process and impact for adults receiving



care. It is planned, as part of this work, to facilitate focus groups to learn how the County can better communicate with people about financial assessments and personal contributions. This will be carried out as an additional piece of work over and above Healthwatch Oxfordshire contract.

- January 2020 will see the launch of a questionnaire to hear about people's experiences of '**Chemists and getting prescriptions**'- we have picked up on some issues here through our on the ground visits and via our website.
- Targeted outreach across the county to ensure we hear pressing or upcoming themes, and ensure we hear from and build relationships across diverse and 'seldom-heard' communities.
- Continue to monitor views via Healthwatch Oxfordshire website and on the ground conversations, including on Healthshare MSK service where we continue to hear issues with the administrative and communication processes.
- Continued development of OWN network and support for Patient Participation Groups.
- 6. Feedback on NHS services via Healthwatch Oxfordshire Feedback Centre

We continue to receive reviews of specific services via our website feedback facility. Table 1 below shows the number of reviews by service between November 2019 to January 2020 (since last report). We have had the 56 reviews on the following services:

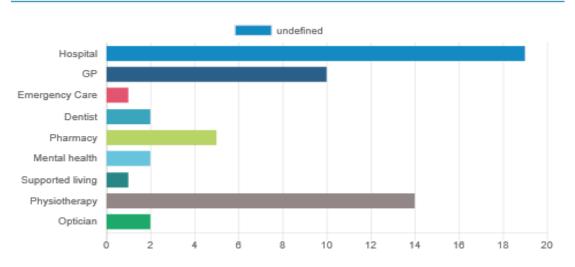


Table 1Feedback Centre - Number of reviews by serviceNovember 2019 - January 2020

6.1. Healthshare MSK

We received 14 reviews about Healthshare MSK service (average star rating 2).

Comments were about long waiting times, communication and administrative procedures.



'Told appointment within 12 weeks. After 16 I emailed to ask about it. Offered same day (cancellation) in Henley or Dec 23, another 6 weeks. If not possible then maybe March. Asked about cancellation options - no cancellation system! Just try calling on the day! Unbelievable'.

'Had a scan 2 September, still waiting results 23 December, after having made several telephone calls'.

'Very good clinicians but a very long wait to be seen and awful rooms at The Ramsay centre - no privacy and small'.

We plan use our Enter & View powers to visit at least one Healthshare site in the next few months. This will enable us to hear from more people about their experiences and seek responses from Healthshare to our findings and recommendations.

6.2. Reviews on Hospitals

(7 Churchill, Horton 5, John Radcliffe 3, Bicester Community and Nuffield)

Overall positive reviews about the treatment and care of patients and professionalism of hospital staff.

'Very professional staff. Reassuring and thorough review. Pleasant and helpful' (Bicester-Cardiology)

'Eye Hospital for Type 2 Diabetes, really good and helpful and clear - feel very well looked after' (John Radcliffe).

'The staff were very busy but every single one of them gave me exemplary care. As an ex NHS staff member I was treated how I used to treat my patients, with professionalism and compassion'. (Churchill)

However, some negative reports, about 'transfer of care' and follow up waiting -

"...how on earth can it happen that an ambulance is dispatched to take an elderly patient back home, and on arrival decide that they can't 'lift' them (no real lifting was required) and help them back into the house and to bed, and so return them to hospital?! They were treated like a parcel for delivery, not a human being'.

'I have been waiting for a follow up appointment after a MRI Scan in September 2019, after promising appointments before Christmas and me having to chase up admin staff for updates. I have now been told they are unable to book me in for a future appointment therefor dealing with a rare condition with no information and no care of symptoms I have now.'

6.3. Pharmacy 5 reviews (Lloyds and Boots)

Highlighting some issues with prescriptions which we have also been picking up when speaking to people when out and about, we going to look into this in more depth in 2020 initially via an online questionnaire.



Appendix A - OX12 Framework Stakeholders Reference Group

Text taken from slides presented to HAWB January 2020

Background

Healthwatch Oxfordshire attended the OX12 Stakeholder Reference Group (SRG) to observe the process.

Initiated as the Healthwatch Oxfordshire (HWO) Trustees wanted assurance that the process c/would deliver what it promised:

- Cost to system
- Capacity of system to deliver and replicate across the county
- Commitment to involvement from community
- Co-design outcomes

Observations

- SRG chaired by independent community leader
- Expectations of Save Wantage Hospital managed in a positive way, without loosing sight of the issue
- Framework Team always represented at SRG and listened to and responded to SRG concerns re communication, information, gaps in community involvement
- Framework Team 'grew' into the process as relationships built with SRG
- Building solutions event opened up to more than the SRG good
- SRG members involved in working groups apart from Clinical and Care Forum - never understood why this is
- Good data collection / sharing event would have like to see more SRG members there

Observations

- Takes time and actions to build relationships and trust in the community
- Small actions can destroy trust and relationships this quickly
- 'Sustainable primary care as a key enabler' (The Oxfordshire Clinical View) but one of the biggest challenges to this - the GP building - was not part of this work
- Role of SRG and relationship with Framework Group in whole process needs to be clarified especially in reporting back to HAWB & HOSC
- No tangible change/development after a lot of time, effort, and toil over a 12month period

Comments

• SRG and Framework Group have learned along the way especially around communication - both internally and externally these lessons must be applied in future activity



- The Framework approach when fully evaluated by external evaluator must including process, outcomes, cost, SRG views
- Evaluation of the process must start at the beginning
- Replication of this approach must take into account:
 - Capacity, and capability of volunteers, and costs to volunteers
 - Recognise that the approach must be designed to meet the demographics of the community including production of communication materials, levels of community involvement, representation across the community

Sustainability

Observing the amount of time, staff commitment, and guessing at the cost of associated resources required to deliver the framework it is unlikely that the system has the capacity to deliver more than one project at a time.

Focussing on a small area means that where County wide issues/solutions are identified e.g. CAHMS, community hospitals, these are not addressed during the Framework process.

It is not clear where the leadership and resources are for maintaining momentum to ensure that good ideas and embryonic solutions are continued to be developed.