

Report to the Oxfordshire Joint Health Overview Scrutiny Committee

September 2024

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1. Healthwatch Oxfordshire reports to external bodies

For all external bodies we attend our reports can be found online at:

<https://healthwatchoxfordshire.co.uk/our-reports/reports-to-other-bodies/>

We attend **Oxfordshire Place Based Partnership** meetings under Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB). We work together with the five Healthwatch groups at place across BOB ICB to give insight into committees at BOB ICB wide level, including BOB ICB Quality Committee, BOB ICB Health Overview Scrutiny Committee and BOB Integrated Care Partnership (BOB ICP).

2. Update since the last Health Overview Scrutiny Committee (HOSC) Meeting – June 2024:

Healthwatch Oxfordshire reports published to date:

All the following reports published since the last meeting can be seen here:

<https://healthwatchoxfordshire.co.uk/reports> All reports are available in **easy read**, and word format. (Note: Election purdah guidance from Healthwatch England delayed publication of some reports until July). Since the last meeting we published the following reports based on focused insight gathering:

- **Eye Care – people’s experience of eye care services in Oxfordshire (Sept 2024)** including views on primary and secondary care – appointments, information and communication, referral to a specialist service, quality of care, and support to manage an eye condition – with 141 respondents. People were generally positive about their experiences of appointments at eye care services: 68% responded ‘good’ or ‘very good’ for ‘availability of appointments’, 64% for ‘waiting time for an appointment’, and 73% for ‘convenience of appointment time’. People were slightly less positive about their experiences of travelling to appointments, costs of care, and referrals. We heard that availability of appointments at the Oxford Eye Hospital (Oxford University Hospitals NHS Trust – OUH) was generally good, although people also experienced cancelled appointments, difficulty with transport and attending early appointments, busy waiting areas, and long waits to be seen. Some were frustrated at not being able to receive outpatient eye care at their local health facility.

Patients rated aspects of service quality highly, citing excellent experiences of care at the Oxford Eye Hospital. Most staff were viewed as considerate, kind

and caring, with some providing outstanding care. However, crowded outpatient waiting areas, delayed appointments, and a perception of inadequate staffing left some people dissatisfied and concerned about patient safety.

We heard that communicating with the Oxford Eye Hospital was often difficult, especially about appointments and hospital arrangements. Appointment letters were sometimes poorly written, confusing, or contained incorrect information, others were not patient-friendly or were not adapted to people with additional needs. Feedback on how well eye care professionals explained eye tests and medical procedures was generally positive for both private and NHS providers.

The report was shared with OUH and BOB ICB for response, OUH developed an action plan in response to the recommendations, BOB ICB had not responded to the report at the time of publication.

➤ **Supporting oral health in children under 10 (July 2024)**

In September 2023, Buckinghamshire, Oxfordshire and West Berkshire Integrated Care Board (BOB ICB) funded Healthwatch Bucks, Healthwatch Oxfordshire and Healthwatch Reading to undertake a community-based research project to understand some of the challenges that parents and caregivers face when looking after the **oral health of children under 10 years old**. The project was supported through the Core20PLUS5 Connectors initiative, a national NHS programme working to reduce health inequalities. The three Healthwatch teams each recruited and trained five 'Community Connectors' who interviewed parents and caregivers in their community about their children's oral health. Together the three Healthwatch organisations heard from 215 parents and caregivers. Families who contributed their views included parents and caregivers of children with and without special educational needs and disabilities (SEND).

We published a series of reports – one joint report to BOB ICB and a report aimed at the Oxfordshire system. Responses and report can be seen here: <https://healthwatchoxfordshire.co.uk/our-work/research-reports/>

- **Community Participatory Action Research (CPAR2) (July 2024)** The final report <https://healthwatchoxfordshire.co.uk/reports> and accompanying film https://youtu.be/5_P3MMGUirl of work by community researchers from Oxford

Community Action was published in July- highlighting views of people using community food services in OX4 and the **impact of cost of living**. This was presented to key stakeholders and system leaders at the CPAR 2 South-East showcase event on 6th June in London. An event to share the findings will be held in October. Healthwatch Oxfordshire was the host organisation for the community researchers, providing on the ground support and mentoring for their research over the year.

➤ **Patient Participation Groups (PPG's) in Oxfordshire – (July 2024)**

In January and February 2024, we carried out a survey to hear from people involved with PPGs in Oxfordshire. We wanted to hear about how PPGs are running, what is going well, what challenges PPGs are facing and what support they need.

We wanted to help identify where that support can be provided and by whom. We heard from 78 people representing 35 Patient Participation Groups and GP practices across Oxfordshire. PPGs can support communication between practices and patients, but they do this best when they are supported by effective communication from the health system and supported to connect with other PPGs.

➤ **Enter and View Visits**

Since the last meeting we made one Enter and View visit to the OUH Discharge Lounge.

We published the following reports (<https://healthwatchoxfordshire.co.uk/our-work/enter-and-view/>) on Enter and View visits to the following services:

- Health Visitor Service at Bluebell Centre, Didcot (July 2024)
- The Surgical Emergency Unit at John Radcliffe Hospital (July 2024)

All published Enter and View reports are available here:

<https://healthwatchoxfordshire.co.uk/our-work/enter-and-view>

and information [https://healthwatchoxfordshire.co.uk/wp-](https://healthwatchoxfordshire.co.uk/wp-content/uploads/2024/01/Enter-and-View-easy-read-information.pdf)

[content/uploads/2024/01/Enter-and-View-easy-read-information.pdf](https://healthwatchoxfordshire.co.uk/wp-content/uploads/2024/01/Enter-and-View-easy-read-information.pdf)

Our current work:

- We have a live survey on **Women's Health** services here: <https://www.smartsurvey.co.uk/s/womenshealthservices/>
- We closed our survey to hear from the public on **experience of leaving Hospital (discharge)** in the last twelve months <https://healthwatchoxfordshire.co.uk/news/leaving-hospital/> a report on our findings will come to HOSC in November (see below for some initial findings).
- We continue ongoing outreach to groups and events across the county, including hospital stands, community groups and events e.g. play days, community events, and have been focusing on hearing about hospital discharge, men and women's health, as well as general listening.
- We published formal letters and responses here: <https://healthwatchoxfordshire.co.uk/news-and-events/correspondence/> including: Comment on Quality Accounts (Oxford University Hospitals NHS Trust -OUH, South Central Ambulance, Oxford Health and Sue Ryder), and a letter to BOB ICB in response to proposals for a revised operating model.
- We attended a meeting in June to discuss the Children's Trust Board which has not met for over a year – we would like HOSC to note we would like to see a clear pathway for re-establishment of a functioning Board and its essential focus on children and young people.
- We have received a report from Keep the Horton General outlining women's experiences of birth and note the ongoing discussions. We have sought assurance from OUH and commissioners (BOB ICB) that they are responding to the issues raised within this report.

Healthwatch Oxfordshire Annual Impact Report 2023-4

On 2nd July we held an online event showcasing our work during 2023-24. The full report, Easy Read summary and video of the event presentation can be found here: <https://healthwatchoxfordshire.co.uk/report/healthwatch-oxfordshire-annual-impact-report-2023-24/>

3. Key issues we are hearing from the public:

We hear from members of the public via phone, email, online feedback on services (<https://healthwatchoxfordshire.co.uk/services>), and when out and about. This enables us to pick up and raise with health and care providers and commissioners

on emerging and current themes. Below are some examples of comments from the public on different issues.

Some of the themes we have been hearing include GP appointments, NHS dentistry, problems accessing interpreting support, access to podiatry care.

Relating to this HOSC meeting agenda feedback includes:

- **Discharge from hospital** – our full report will be shared with HOSC ahead of its November meeting. Preliminary findings from 149 members of the public and 88 health and care professionals include:
 - People were mostly happy to get home from hospital. They valued having in-depth and thorough conversations with health and social care professionals about getting home and managing their recovery.
 - There are some challenges around communication about discharge – for example, we heard that patients and their families are not always kept up to date about what is happening, and some were confused about what to expect and what they were entitled to in terms of care and support after getting home. Some people felt that they needed more information about follow-up medical care and who to contact if problems arose.
 - There are also some challenges around home care provision – such as lack of continuity in carers, wide time windows for care visits, and communication problems with carers and care providers.
 - We heard that unpaid carers value being involved and listened to in decision-making. They told us about the impact that looking after someone after discharge has had on their lives and wellbeing. Most of the unpaid carers we heard from said they had not been offered support.
 - Health and care professionals told us that the new Discharge to Assess (D2A) pathway is helping to move people out of acute hospitals more quickly, and the use of multidisciplinary and multiagency teams has improved communication and increased referral quality – but there are still some gaps in communication between services.
- **Medicines**

Some indication from the public about issues with medications, capacity demand on pharmacy, including long queues and waits, prescriptions missing, poor stock supply

– including for common medications, and ADHD meds, and longer waits for medication:

- *“Getting meds from chemist or lack of them. I am Diabetic and used to get a weekly injection and the chemist cannot get them so have not had for months now” (Signposting call, June 2024)*
- *“The staff are really lovely face to face and get everything sorted out if you attend but if you are relying on them for regular deliveries of correct medication, please be very careful. Medication is rarely without errors in some form. They do dosset boxes weeks in advance so if you have changes made it can be weeks before things get corrected again”*
- *“The pharmacy is totally inadequate for the amount of people using it. This results in very long waits. They quite often do not have the medication you need and have to wait days for it to arrive. This has resulted on numerous occasions of going elsewhere”*
- *“Pharmacy is no longer able to meet the demands of the 10,000 or so people living in area. They struggle to get pharmacists and sometimes have to close for the day due to not having a dispenser. Repeat prescriptions are not dealt with promptly. The shop is small and cramped with poor stock levels, and regularly has a queue of customers”*
- *“We have used the pharmacy for several years, but this year they stopped supplying one medication (name) that my wife took, and on one or two occasions we even had trouble accessing statins of the correct dosage. In the case of the [medication], we tried several other pharmacies without success, finally managed to get it elsewhere” (Feedback centre review)*
- *“lack of stock of common prescription medication” (Feedback centre review)*

➤ **Adult Mental Health**

- Some feedback on access to community mental health services: common themes are that it can be difficult to get support – for example referrals are rejected or calls are not returned, and perception that you have to be at acute risk before getting support – and that the care

available does not meet people's needs. We heard several experiences of people being referred back and forth between different services.

- *"It's really hard to get any sort of treatment unless you hit crisis point. Help, when it is provided, is inconsistent and short term."*
- *"My son has ADHD and autism and is now in transition to adult services and support - but no support and I don't know where to go - he keeps getting passed from a to b to c"*
- *"The Crisis team are great, but clearly lack resources, they do their best within the constraints they have, but the ADMH Team - It is likely the same problem, they lack resources and so prioritise who they feel will benefit most"*

We also heard positive reviews of support including Warneford Hospital. We also attended a My Life My Choice Health Voices Group to hear about mental health support for people with a learning disability – and challenges for support for people with autism.

Connect Health MSK services

We have started to hear more mixed feedback from the public about Connect Health including challenges with communication, getting appointments, and longer waiting times for MSK services:

- *"I had a referral from the GP. I was able to get an appointment after six months, in December. I had to wait for another appointment. We phoned in February and were told to call at the end of May. In mid-May I received a letter saying that I had been removed from the waiting list. It is difficult to accept and impossible to understand at all. It's stressful! They knew I was waiting for a date and did nothing to help me".*