

NHS Long Term Plan

A report of evidence base collected by Healthwatch
Barnet

wh  **t**

would you do?

It's your NHS. Have your say.

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Introductions

For 2019, the population of Barnet is estimated to be 400,600 which is the largest of all the London boroughs. The borough's overall population is projected to increase by around 5% by 2030, taking the number of residents to approximately 419,200.

Mortality is considerably higher in the most deprived areas of the borough, compared to the least deprived. The life expectancy of people living in the most deprived areas of the borough are on average 7.6 years less for men and 7.9 years less for women than those in the least deprived areas.

For 2016/17, the recorded prevalence of coronary heart disease (CHD) for all ages in Barnet (2.5%) is significantly higher than the London average (2.0%). Compared with the other London boroughs, Barnet is ranked 7th highest on prevalence of CHD.

The recorded prevalence of stroke or transient ischaemic attacks (TIAs) in the Barnet GP registered population for 2016/17 is 1.3%, significantly higher than the London average (1.1%). This prevalence ranks Barnet 6th highest of the London boroughs. The rate of hospital admissions for stroke (all ages) in Barnet (177.8 per 100,000) for 2016/17 is significantly higher than the national (England) rate (169.2 per 100,000).

Only 31.3% of eligible people in Barnet received an NHS health check between Q1 2013/14 and Q4 2017/18. This proportion was the third lowest of all the London boroughs and significantly lower than the England average (44.3%).

Between 2015 and 2017, the cancer screening coverage in Barnet was significantly worse than the national (England) average for bowel, cervical and breast cancers.

In 2016/17, the recorded prevalence (all ages) of mental health problems (including schizophrenia, bipolar affective disorder and other psychoses) for Barnet is 1.01%, which is significantly higher than the rate for England (0.92%).

Between 2013-14 and 2016-17, the percentage of adult patients accessing dental care in Barnet was lower than both London and England.

For at risk individuals only 46.2% in Barnet received a flu vaccination during 2016/17, which was significantly lower than the averages for London (47.1%) and England (48.6%).

During April and May 2019 Healthwatch Barnet engaged 145 local residents in conversations about their experiences of health and care services and the potential future developments as outlined in the NHS Long Term Plan using:

- Healthwatch England survey (general) collecting 109 responses
- Healthwatch England survey (conditions) collecting 10 responses
- North London Healthwatch survey collecting 6 responses
- Focus groups attended by 19 participants

Healthwatch England Long Term Plan Survey (general)

Through a standardised survey, Healthwatch Barnet engaged in conversations with 109 local residents, seeking their feedback, views and opinions on:

- What would help individuals to live a healthy lifestyle
- What would help individuals to choose and manage the support they receive
- What would help individuals to keep their independence and stay healthy as they get older
- What would help individuals when interacting with the NHS

Helping you to live a healthy life

When asked the question what would enable them to live a healthy life, Barnet residents, who engaged in conversations with Healthwatch Barnet, were clear that **improved access to services and support** was key. This included primary and secondary care services.

- ‘Easier access to my GP’
- ‘Better access to NHS facilities’
- ‘Easier access to my doctor’
- ‘If I need help on health, it takes a long time’

In addition to improved access, with 85% of votes, local people indicated that the following were also ‘very important’:

- professionals that listen to me when I speak to them about my concerns
- having the knowledge to help me do what I can to prevent ill health
- easy access to appointments
- for every interaction with health and care services to count; my time is valued

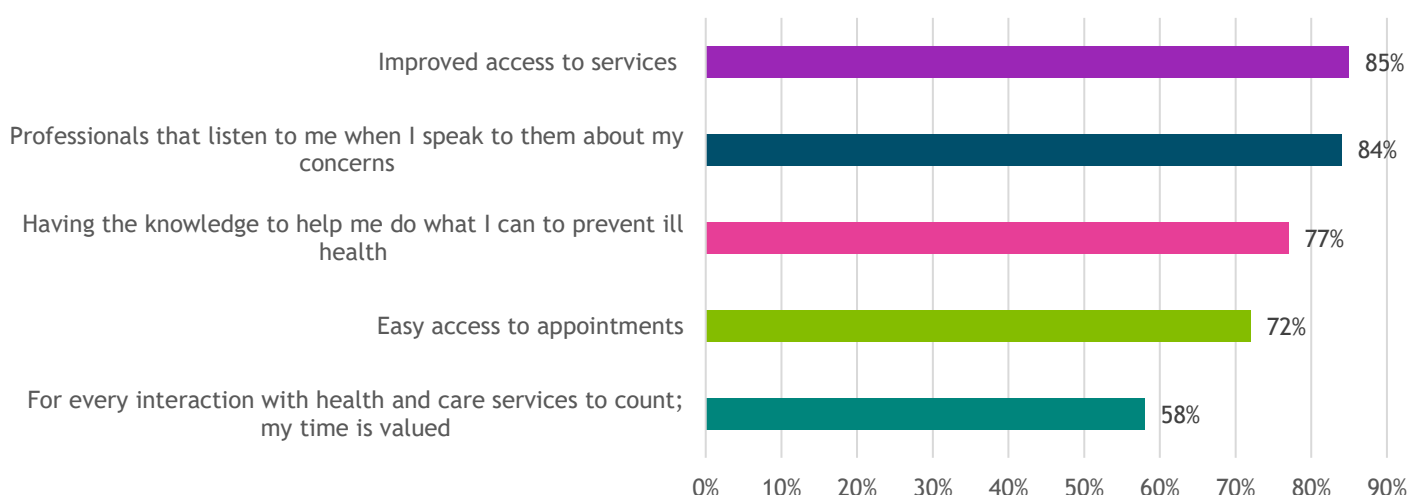


Figure 1. Priorities where investments should be made based on feedback from Barnet residents

12% of people approached by Healthwatch Barnet reported that more **integrated, personalised care** would help them. Individuals explained that they would like all the

care they receive to be more ‘joined up’ so that services can share information and results.

‘More “joined up” care and agreed on advice and support. This would be much better achieved if different practitioners talked meaningfully with each other’

‘Full and easy access to all my medical records for each professional that I have an appointment with.’

‘Choices and better connected services.’

‘Joined up communication’

Helping you to manage and choose support

In order to help individuals to manage and choose support, the NHS services of the future should be designed and delivered in a way that addresses the key criteria, as identified by people who engaged in conversations with Healthwatch Barnet:

Choosing the right treatment is a joint decision between me and the relevant health and care professional	68%
Communications are timely	67%
I have time to consider my options and make the choices that are right for me	58%
I make the decision about where I will go to receive health and care support	48%
I should be offered care and support in other areas if my local area can’t see me in a timely way	46%
My opinion on what is best for me, counts	42%
I make the decision about when I will receive health and care support	40%
If I have a long term condition I decide how the NHS spends money on me	31%

Importance was also given to:

- improving access to services
- better access to support and information
- improving staff attitudes

‘Easier access to healthcare professionals. I have a long term condition and sometimes I find it difficult to contact the healthcare professional. Phones are not always answered. If a voicemail is left sometimes don’t get a call back’

‘Easier access to GP and shorter waiting times to see specialists. More specialist nurses for long-term condition management’

‘Speedier access to health professionals, without having to wait a few weeks for appointments’

‘Given all information available’

‘A simply written summary to take away when difficult decisions or unexpected (or expected) bad news is given by GPs or hospital doctors’

Helping you keep your independence and stay healthy as you get older

Evidence base collected by Healthwatch Barnet is clear that people who shared their views want to be able to stay in their own home for as long as it is safe to do so with 81% of respondents choosing this option. This was closely followed by the need to ensure that health and care services are easy to reach (71% of respondents) and ensuring that there are right levels of support at the end of life (71%) of respondents.

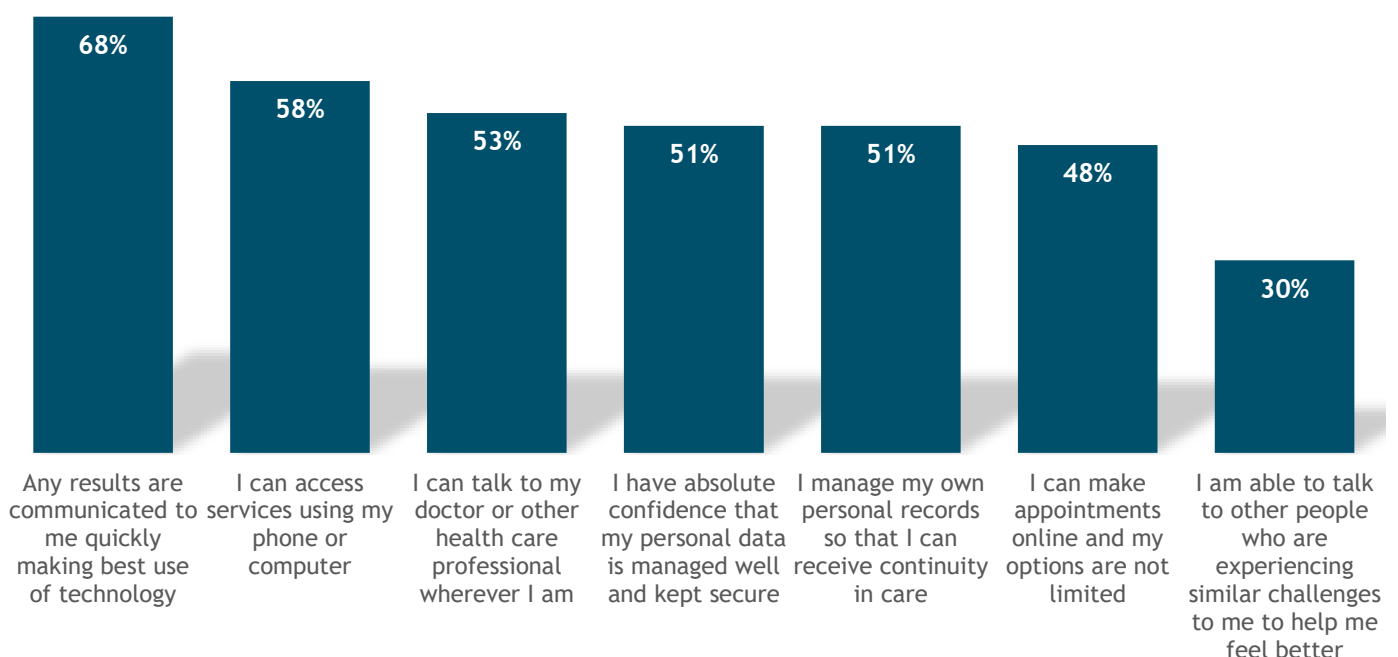
The important role of the family and the community in supporting individuals to remain independent as they get older was also recognised. 61% and 58% of respondents have respectively indicated that relatives and their peers could play a role in extending the period a person is able to stay in their own home. However, this is subject to them having the right knowledge, skills and resources.

‘Knowing who to turn to for what and knowing that they know you and will respond.’
 ‘Access to a team of professionals to discuss issues and their solutions as they arise’
 ‘To be able to access health professionals outside of the surgeries which are so busy for advice etc. Maybe a drop in somewhere local.’
 ‘Better healthcare support in the community.’

In addition, 33% of Barnet residents engaged in the research reported that having **better access to support and/or care and/or care in their own community** (and if need be, at their home) would help them retain their independence and live healthily for as long as possible.

Helping you interact with your local NHS

Barnet residents who shared their views about NHS services of the future were clear that there is a need and an appetite to utilise technology:



According to feedback collected by Healthwatch Barnet, the success of any technology-based solution to delivering healthcare services will heavily depend on the NHS' ability to improve access to services.

'To have easier access to professionals when having concerns that may just need a lifestyle change. A standard appointment booked online can be 3 weeks ahead'

In focus: cancer screening and general Long Term Plan feedback

On 8th May 2019, Healthwatch Barnet held a focus group to seek residents' views on cancer screening and the Long Term Plan. The session was attended by 9 people¹ from the Farsi speaking community and predominantly female in make-up.

The session was structured in a way to enable local people to share their experiences of accessing NHS services and what could be done to improve their quality. This was followed by a conversation about cancer screening.

Feedback gathered at the focus group suggests that residents who attended it experienced challenges around:

- accessing NHS services with difficulties booking GP appointments and home visits alongside long waiting times at the local Accident and Emergency
- equality of access to NHS services as inconsistencies in relation to waiting times were highlighted
- lack of communication and co-ordination between different health services and teams, e.g. GPs and hospital teams relating to patient records and test results
- availability of support and services available for older people and carers contributing to limited patient choice

To improve the quality of services on offer, the NHS Long Term Plan, according to suggestions of local people, should focus on:

1. health literacy and prevention, e.g. education and awareness, cheaper exercise
2. improving coordination between services
3. increasing staffing levels and addressing issues of retention
4. improving accessibility of services so that local people can access appointment and services quicker

Cancer screening

All people who attended the focus group organised by Healthwatch Barnet were clear that cancer screening aims to detect cancer before symptoms appear. Some received letters about screening programmes whilst others were given verbal reminders by their GP when attending the surgery for something else.

There was a recognition that breast cancer and cervical cancer screening receive a lot of publicity, but that **bowel and prostate cancers screening is not as widely advertised or understood.**

Barnet residents who shared their views with Healthwatch Barnet highlighted there is some confusion about:

- ages at which screening for different types of cancer should be undertaken
- whether regular screening is harmful

To improve uptake of cancer screening programmes in Barnet, it was suggested that:

¹ The session was attended by individuals identifying as: 7 female, 2 male, 3 ESOL, Ethnic backgrounds: Asian/Middle Eastern/ Asian British).

- information used to promote screening should be reviewed so that it is more transparent. The format should be considered to make the information more visual and potentially include statistics. Location of screening centres should be included alongside ensuring that the information is in a format accessible to different groups and communities
- screening should be offered in the evening, at weekends and through mobile clinics
- information about screening programmes and self-checking should be disseminated through different channels including in schools and through working with communities, for example in a mosque
- text message reminders, not just letters, should be used to remind individuals about cancer screening programmes
- consideration to extend age of screening should be given

In focus: Learning Disability and NHS experience

On 13th May 2019, Healthwatch Barnet held a focus group which was attended by eleven people who are members of Barnet Mencap. Two attendees were female and nine, male. Residents who attended the session shared their experiences of accessing GP appointments and of having an annual NHS health check².

Only 31.3% of eligible people in Barnet received an NHS health check between Q1 2013/14 and Q4 2017/18. This proportion was the third lowest of all the London boroughs and significantly lower than the England average (44.3%). Patients with a learning disability are eligible for an annual NHS health check at their GP surgery but Barnet Data analysis suggests that people who shared their feedback, face challenges about receiving consistently high quality of primary care in Barnet. Some individuals told us about getting *'enough time with the GP. That the GP is patient and takes time listening'* whilst others felt less confident about asking for more time. Not all participants had been offered double appointments to discuss their healthcare needs.

Of the eleven attendees, four knew what an annual health check was and two had been offered one.

All participants but 1 would like to have a LD annual health check and the one participant who didn't want one said it was because they don't know what it involves. Participants cited concerns that the GP would not understand their concerns or listen sufficiently to them as a reason why they might not attend a health check.

One attendee said *'when not going with a carer, I may need more time but feel less confident to ask' for it'*

The introduction of the Accessible Information Standard on 1st August 2016 placed a requirement on NHS providers to meet the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss. However, based on feedback gathered by Healthwatch Barnet, people with Learning Disabilities hardly receive information in Easy Read or using a language they can understand.

Of those asked, only two suggested they understand the letters sent to them and that it was never in Easy Read format. A typical response was *'I need information in easy read to understand it'*.

Finally, attendees were asked 'Do you feel you understand your GP and your GP understands you?' This prompted a mixture of positive and but it was felt that those with learning disabilities felt the need to have someone else with them to be understood. One patient said *'GPs don't listen to everything you have to say; they will only focus on one thing'* while another was clear that *'you need someone you know to back you up'*.

² <https://www.nhs.uk/conditions/learning-disabilities/annual-health-checks/>

