

NHS Long Term Plan

Lewisham

Engagement Report

whot
would you do?

It's your NHS. Have your say.

Aim of the research

The aim of the research was to obtain the views and (LTP) experiences of Lewisham residents to support the local implementation of the NHS Long Term Plan. We carried out local engagement and enabled people including seldom heard communities to have their say in how the NHS can better take care of them and how the care they received can be improved.

The engagement undertaken was part of a wider engagement coordinated by Healthwatch England. The findings will be shared with Our Healthier South East London (OHSEL) to help shape the local plan and support OHSEL's own engagement.

Methodology

The research was carried out across south east London including the London boroughs of Bromley, Bexley, Greenwich, Lambeth, Lewisham and Southwark. Each Healthwatch carried out individual engagement in their own borough. The findings were collated into one report summarising the themes across the region and shared with OHSEL. To read this report please [click here](#).

This report will focus on the experiences of Lewisham residents. We used a mixed methodology to gather feedback which consisted of two focus groups and surveys.

The topics of the focus groups were agreed with our local STP and focused on participants experiencing ill mental health and people with learning disabilities/Autism. In addition two surveys (one asking general feedback based on the LTP and one focusing on long term conditions) were filled out by over 250 residents and covered themes within the NHS Long Term Plan.

For the purpose of this report some names and identifying details have been changed to protect the privacy of individuals.

Summary of the Survey Findings:

A general survey was filled out by 241 people, additionally eleven people answered a specific conditions questionnaire, making a combined total of 252 responses from Lewisham residents to the NHS Long Term Plan.

A breakdown of equality and diversity data can be found in an attached appendix.

Healthy Life

Residents told us the top three aspects to help them live a healthy life are:

- “Access to the help and treatment I need when I want it”
- “Professionals that listen to me when I speak to them about my concerns”
- “Easy access to the information I need to help me make decisions about my health and care”

Access to help and treatment was also selected by the respondents when they were asked to prioritise what aspect was most important to them. The survey allowed the residents to provide free text comments which support their statements. The top themes people raised were:

- Easier and quicker access to GP appointments was of great importance for people in helping them live a healthy life. *‘Easier access to GP service, without waiting for long periods of time for advice regarding my health’*

- Access to sport and exercise facilities was considered vital in helping people stay well. Free access and or ‘affordable’ sport activities were highlighted as important. People also felt it was essential to provide ‘gentle’ exercises to suit those with reduced mobility. Respondents expressed their desire for women only and disability friendly sessions.
- People recognised and emphasised the importance of eating healthily. They would value having better access to affordable healthy food options and clear information on how to maintain a healthy balanced diet. *‘Consistent advice about healthy lifestyles [is needed] - there is so much out there in the media it is hard to know what is right.’, ‘...healthy food is expensive’, ‘Why is coke more cheaper than water? Why is fried chicken cheaper than salad?’*
- Limited mental health awareness was highlighted by respondents. They felt that there needs to be more understanding about mental health issues by professionals and a need for education on mental health from an early age. Prompt access to mental health services was also stressed as vital.
- Reduction of air pollution was also important for people who felt the pollution was having a negative impact on their health. People felt smoking in public spaces (including at bus stops) remains an issue and affects those with respiratory problems such as COPD. It was felt that smokers would benefit from greater support to help them quit.

Rate how important the following statements are to you when it comes to living a healthy life	Very Important	Important	Neutral	Not Important And/or Not Important at all
Easy access to the information I need to help me make decisions about my health and care	73.42%	21.94%	5.04%	0.00%
Having the knowledge to help me do what I can to prevent ill health	72.69%	21.85%	3.36%	0.42%
Access to the help and treatment I need when I want it	85.29%	11.76%	2.11%	1.00%
Professionals that listen to me when I speak to them about my concerns	79.06%	17.09%	3.42%	0.43%
For every interaction with health and care services to count; my time is valued	64.38%	25.75%	9.01%	0.86%

Manage and Choose Support

Top three aspects to help people manage their health and choose support are:

- “Communications are timely”
- “Choosing the right treatment is a joint decision between me and the relevant health and care professional”

- “I should be offered care and support in other areas if my local area can’t see me in a timely way”

“Choosing the right treatment is a joint decision between me and the relevant health and care professional” was selected by the respondents as the most important aspect for them to manage their health and choose support.

Respondents had the opportunity to provide more detailed information about the topic. The main themes people raised were:

- Any treatment decisions should be the result of a strong dialogue between the professional and patient. Patients would like to receive clear information about treatment options, learning the pros and cons will help them make informed decisions. Using simple language and presenting results in ‘layman’s terms’ is important to ensure patients’ understanding. *‘I am currently deciding whether to have a surgery, and where, but it’s hard to find information about likely risks of the surgery, and also which surgeons/hospitals have the best outcomes.’*
- People felt they would like to spend enough time with the health professional to enable them to make informed choices about their treatment. *‘Information from health professionals rather than being presented with leaflets written in ‘easy to understand’ English - which usually leave one with more questions’*
- Patients would like professionals to recognise their individual needs and have enough time to look at them in a holistic way taking their medical history into consideration.
- The ability to choose a health professional as well as continuity of care is paramount. Having a good relationship with your health professional is key and could help them have a better understanding of the patient. It could also help them to agree the best type of treatment going forward.
- Other aspects mentioned were improved communication between services, improved access to GPs and specialist clinicians, longer appointments and support for carers.

Rate how important the following statements are to you when it comes to managing and choosing support	Very important	Important	Neutral	Not Important And/or Not Important at all
If I have a long term condition I decide how the NHS spends money on me	34.65%	32.02%	26.32%	7.02%
Choosing the right treatment is a joint decision between me and the relevant health and care professional	62.29%	28.39%	7.63%	1.69%
I make the decision about where I will go to receive health and care support	46.81%	38.72%	11.49%	2.98%
I should be offered care and support in other areas if my local area can’t see me in a timely way	59.57%	31.06%	8.51%	0.85%
I make the decision about when I will receive health and care support	48.09%	32.34%	16.60%	2.98%

My opinion on what is best for me, counts	53.19%	34.89%	10.21%	1.70%
Communications are timely	65.11%	28.51%	5.96%	0.43%
I have time to consider my options and make the choices that are right for me	58.65%	35.44%	4.64%	1.27%

Independence when Older

The top three aspects to help people to retain their independence and keep healthy as they grow older are:

- “I want my family and me to feel supported at the end of life”
- “I want to be able to stay in my own home for as long as it is safe to do so”
- “I want my family and friends to have the knowledge, to help and support me when needed”

Being able to stay in their own home for as long as it is safe to do so was selected by the respondents as the most important aspect that will help them to stay healthy when they get older.

- People felt it was important to know how to stay healthy to prevent ill health when they are older. Provision of this information in a reliable and accessible way would be appreciated.
- People would welcome support to maintain their healthy life by having free/affordable access to maintain their physical activities through the gym and other appropriate activities including access to parks. Support in maintaining a healthy diet was also highlighted.
- Access to high quality services including quicker access to GPs was essential when people get older. Improvement to access and quality of other services were also mentioned such as palliative care, and specialist dementia services. *‘To get treatment as quick as possible and not wait for weeks to get docs appt’.*
- The needs of disabled people including those with learning disabilities must be accounted for when providing support both at home and in care homes.
- Supporting people to live an independent life and stay at their home was key.
- Access to activities, social groups and community support is vital in helping people to be less lonely and thus improving their wellbeing. *‘Social groups/support groups to make me feel independent/support/not lonely’.*

Stay healthy when older	Very important	Important	Neutral	Not Important	Not important at all
I want to be able to stay in my own home for as long as it is safe to do so	76.50%	19.66%	2.99%	0.85%	
I want my community to be able to support me to live my life the way I want	54.11%	33.77%	10.39%	1.73%	1.73%

I want my family and friends to have the knowledge, to help and support me when needed	70.51%	23.50%	5.56%	0.43%	
I want there to be convenient ways for me to travel to health and care services when I need to	67.38%	27.47%	4.72%	0.43%	
I want my family and me to feel supported at the end of life	83.55%	12.12%	3.90%	0.43%	0.43%

Interaction with Local NHS

Top three themes were:

- “I have absolute confidence that my personal data is managed well and kept secure”
- “Any results are communicated to me quickly making best use of technology”
- “I can talk to my doctor or other health care professional wherever I am”

Being able to talk to their own doctor or another health care professional wherever they are was selected by the respondents as the most important aspect when interacting with the NHS.

Easier and faster access to health professionals including GPs was the most popular answer when people were asked to point out one thing that would help them to successfully manage their health and care. Consistency of care was also important. People felt that GP practices should tackle the issue of missed appointments, especially in light of current problems around access.

People also felt that the services should improve communication with patients including responding to patient’s queries (phone and email) and providing information about test results promptly. It was also important for different services to communicate with each other and share vital information such as test results and/or patient’s health information in a secure way.

‘All information on my health and care is held in one data file which is accessible by authorised professionals.’

Digital access that is consistent and up to date with technological advancements would help people maintain their health. It was important that patients were able to book online appointments and manage access to their online record in a reliable way. *Our GP surgery is supposed to have on-line option to make appointments but despite signing up for this, the service is unavailable when I try to use it.*

However, it is equally important to ensure equality of access for those who do not use technology and prefer other methods of communication. This is particularly crucial for elderly and those with reduced dexterity or with additional communication needs. One patient commented: *‘That there will always be a human to speak with, in regards to my health matter, and that it would not be only a data/digital process.’*

Interacting with NHS	Very important	Important	Neutral	Not Important	Not important at all
I have absolute confidence that my personal data is managed well and kept secure	68.78%	21.10%	8.02%	1.27%	0.84%
I can access services using my phone or computer	56.41%	34.19%	6.84%	1.28%	0.85%
I can talk to my doctor or other health care professional wherever I am	59.40%	27.35%	9.83%	2.56%	0.85%
I can make appointments online and my options are not limited	58.30%	30.21%	9.36%	0.85%	1.28%
Any results are communicated to me quickly making best use of technology	64.22%	30.17%	7.58%	0.43%	0.86%
I manage my own personal records so that I can receive continuity in care	44.83%	31.03%	19.40%	3.45%	0.86%
I am able to talk to other people who are experiencing similar challenges to me to help me feel better	39.32%	35.90%	19.66%	5.13%	0.85%

People were asked to rate which of the following statements were most important to them. Below is a breakdown of the answers:

What is most important to you to help you live a healthy life?

- *Access to the help and treatment I need when I want it*

What's most important to you to be able to manage and choose the support you need?

- *Choosing the right treatment is a joint decision between me and the relevant health and care professional*

What is the most important to you to help you keep your independence and stay healthy as you get older?

- *I want to be able to stay in my own home for as long as it is safe to do so*

What is most important to you when interacting with the NHS?

- *I can talk to my doctor or other health care professional wherever I am*

Count of What is most Important to you to help you live a healthy life?	
access to the help and treatment I need when I want it	88
easy access to the information I need to help me make decision about my health and care	43
For every interaction with health and care services to count; my time is valued	9
professionals that listen to me when I speak to them about my concerns	39
The knowledge to help me do what I can to prevent ill health	44

Count of What's most Important to you to be able to manage and choose the support you need?	
Choosing the right treatment is a joint decision between me and the relevant health and care professional	99
Communications are timely	17
I have time to consider my options and make the choices that are right for me	17
I make the decision about when I will receive health and care support	7
I make the decision about where I will go to receive health and care support	16
I should be offered care and support in other areas if my local area can't see me in a timely way	41
If I have a long term condition I decide how the NHS spends money on me	15
my opinion on what is best for me counts	13

Count of What's most Important to you to help you keep your independence and stay healthy as you get older?	
I want my family and friends to have the knowledge to help and support me when needed	34
I want my community to be able to support me to live my life the way I want	24
I want my family and me to feel supported at the end of life	24
I want there to be convenient ways for me to travel to health and care services when I need to	23
I want to be able to stay in my own home for as long as it is safe to do so	120

What is most Important to you when interacting with the NHS	
Any results are communicated to me quickly making best use of technology	21
I am able to talk to other people who are experiencing similar challenges to me to help me feel better	12
I can access services using my phone or computer	24
I can make appointments online and my options are not limited	35
I can talk to my doctor or other health care professional wherever I am	72
I have absolute confidence that my personal data is managed well and kept secure	39
I manage my own personal records so that I can receive continuity in care	7

Focus Groups Findings

Two focus groups were carried out in Lewisham to find out people's experience of issues relating to the NHS Long Term Plan.

Local Healthwatch agreed two themes for engagement with Our Healthier South East London, who are responsible for developing the strategy. They were mental health and people with learning difficulties.

Mental Health

A focus group was organised with Quo-Vadis Trust who provides social housing, care & support for people in south east London living with mental health challenges. It was open to all residents with experience of mental health illness. 13 people attended the session. Below is a summary of the themes discussed.

Prevention, Staying Well and Accessing services were themes that interlinked together.

Feedback from participants on what would help them to stay well and prevent ill health centred around two main issues:

- Access to help when first presenting with mental health
- Access to support to maintain wellbeing after an onset of ill health.
- Access to help when first presenting with mental health.

Our findings suggest that access to help when first presenting with mental health issues is an area for improvement. Many have not been referred to appropriate services, or informed of treatment options in a timely manner. It would be helpful for professionals including GPs to provide immediate support to patients who present with mental health issues for the first time. **'It takes a lot courage to seek help'** and asking for help is not easy for many people, especially men. Negative experiences and not being listened to or referred for further help may discourage people from asking again. This in turn may result in people developing more serious issues and

presenting at a later stage of their illness. A participant with chronic mental health said ‘When I stick my hand out, and asked for help. No one did anything.’

Case study

During the focus group a parent and carer of someone with mental health illness gave an account of their child’s experience.

Josh (not his real name) is in his mid 20’s and has been experiencing mental health issues and became very ill. He went to his GP twice to ask for help. He prepared himself for those visits and had some family support to encourage him to go. When he finally saw his GP, he found 10 minute appointments too short to articulate himself and express clearly that he needs help. During one of his visits he was presented with a leaflet, but Josh is dyslexic so the leaflet wasn’t an appropriate way to support Josh in finding help. Following the two visits to the GP he still was not offered any help.

Josh continued to experience ill health which worried his family. However, following his negative experience when he visited the GP, Josh did not want to go back.

Josh was fortunate to have a close family member who encouraged him to go to see a doctor again and ask for help one more time. This time Josh’s luck changed, and he saw a junior doctor who seemed to be more aware of mental health issues. The GP recognised that Josh was struggling and as a result Josh was referred to obtain further help.

This was a turning point for Josh. Because of his age, the ill health and the risk, he was fast tracked to obtain support. Since this referral, Josh has received a good level of care.

Josh now receives treatment from the community mental health team and has a very supportive care coordinator. Despite still waiting for the IAPT service which he would prefer to access sooner, he is feeling better and learning how to manage his condition.

Josh’s story has turned out positive, however it highlights the barriers to accessing help. He was ‘lucky’ to be seen by a professional who was knowledgeable around mental health and referred Josh to treatment. However, in the words of one of the focus group participants ‘luck should have nothing to do with it’. To help remove the factor of ‘luck’, and in light of mental health care being moved to the community, it was felt that GPs should be trained to understand mental health issues and how best to refer and support patients. The training could also help improve consistency in quality of care provision.

- Access to support to maintain wellbeing after an onset of ill health.

Preventing the deterioration of health for people who have long term mental ill health was also discussed amongst participants. It was pointed out that ongoing support was an important aspect to keeping well after an onset of ill mental health and hospitalisation. Those who were left without support or no follow ups felt anxious because they were unsure about how to best care

for themselves. One participant who was in a mental health hospital and then released without adequate follow up support felt that counselling might have helped them from deteriorating again, but they were not aware that they were eligible at the time. **‘It’s fixed, off you go!’ ‘You hope for the best’** were the words they used to sum up his experience.

Access was also raised as an issue for people who need ongoing support with their mental health. It was felt that there should be immediate access to someone people could talk with instead of being prescribed medication. Prescription is not always the answer. Many felt that it would be beneficial to have a mental health professional such as psychiatrist or psychologist in GPs or other community settings. This could help problems from escalating and becoming more serious. Lack of access while suffering with mental health and not being able to obtain support has a domino effect on other aspects of people’s life such as their ability to sustain employment, risk of losing housing, relationship and family breakdown, social life etc.

A good care coordinator plays a pivotal role in supporting people with ongoing mental health issues. Participants shared both positive experiences of exceptional coordinators and others shared negative experiences. Those who provided positive experiences felt their care coordinator continued to have a positive impact on their wellbeing.

People also appreciated support from organisations such as Quo Vadis Trust and other national mental health charities. They felt they are an excellent way of feeling listened to and supported in their recovery.

Medication was an issue that many have raised. Many felt that the services are too quick to prescribe without looking at patient’s holistic needs. They felt that access to additional support in the form of therapy or activities (sport, mindfulness, learning, hobbies) would help them manage their mental wellbeing and have beneficial effects on their health.

‘Many people know what helps them. It should be a joint decision’ said one participant who stressed that the treatment options should be discussed and agreed with the patient.



Case study

Amy (not her real name) has been diagnosed with Bipolar disorder. She has now been discharged from services and is able to manage her condition. Amy looked back at what were the key factors that contributed to her recovery.

Amy feels that immediate access to help when people first experience signs/symptoms (symptoms) of mental ill health is vital. She worries that currently it is difficult to access GP appointments which is often the first “port of call” for many people suffering with mental health. She also feels that receptionists may not understand that people could need urgent help when experiencing symptoms of ill mental health. Many GP receptionists ask patients why they want to see a GP. Due to lack of privacy in many local GP surgeries this question may deter them from accessing help. Delayed access may in turn contribute to people developing more serious conditions and potentially ending up in hospital.

Amy reflected on what helped her recover and stay well. She said that the main contributing factor to her recovery was having an excellent consultant psychiatrist that she saw for six years.

‘They knew me and taught me a lot. The worst thing is to have to start with someone new.’ She [The consultant] knew me and my family. She knew my history and that was the key for me to getting better. Amy said that the biggest help was to have very intensive, daily support from the health professionals she knew. The professional would see Amy every day helping her understand her symptoms and ways to manage them. The consistency and intensity of support helped, as at the beginning Amy would ‘give in’ to the symptoms. Having someone visiting her and reinforcing positive actions and reiterating mechanisms to help self care were life changing for Amy. Since this very intensive support Amy has had no need to access services. ‘I couldn’t do it before. I just went with it. It happened through education. Frequent enforcement of it.’

During the course of Amy’s recovery she sought help from national charities and attended their local support groups. ‘It takes a lot of years to understand the condition. I had no idea what symptoms to look for.’ Now Amy knows her condition and triggers, she feels empowered to manage her condition and stay well.

Amy also stresses the importance of accessing help from charities if you were feeling uncertain and apprehensive. They are experienced in listening to people and helping with ideas on how to help maintain mental health wellbeing and keeping out of hospital. ‘Doing things’ such as gardening and other activities helps Amy keep well.

The key aspects to Amy’s recovery were:

- Consistency of good quality care and health professionals,
- Trusting relationships with empathetic and supportive professionals,
- Appropriate support to suit patient’s needs,
- Learning about the conditions, triggers and self management
- Access to activities and peer support groups
- Quick access to support through primary care

Mind and body

Focus group participants feedback was mixed. Some pointed out that their mental health has not been taken into account when they accessed services through A&E. One patient who attended A&E as a result of self harming was only treated for physical injuries, although his injuries were a result of his ill mental health. His mental health was overlooked and he was discharged after his physical health improved.

Some participants shared negative stories of miscommunication in regards to being prescribed medication by their GP practices.

One participant complained about his GP stopping his medication without his knowledge. This was only discovered by the participant's key worker after realising he was not taking his medication. Another participant said that his GP told him 'We don't deal with your mental health issues'. Another patient described how he complained to his GP about the negative impact of his medication to later discover he was prescribed exactly the same medication, disregarding the patient's initial complaint.

It was felt that the services especially GP practices and A&E staff would benefit from more education on how to best support patients with mental health. One participant felt practice nurses don't have the knowledge 'They steer away as they may not know what to do about it.'

Outpatients

Focus group participants were generally happy with their outpatient appointments and most had a good experience of interacting with their psychiatrist.

However, participants complained about long waiting times when accessing Lewisham and King's College Hospital. One patient shared his experience of accessing A&E. He felt he was in a 'turmoil', yet was asked to wait for a couple of hours. He eventually left without being seen and as a result was admitted to a mental health hospital soon after. Other comments that were covered earlier implied that mental health is not often shortly dealt with when patients present with both mental and physical conditions at A&E.

Learning Disabilities

Healthwatch Lewisham engaged with members of Lewisham Speaking Up, a charity for people with learning disabilities, about different aspects of the NHS Long Term Plan. 21 adults with learning disabilities attended the group.

Prevention

Participants of the group were aware of the importance of a healthy balanced diet and healthy lifestyle. Their key workers, family and carers play a key role in encouraging and supporting them to change their eating habits and improving their wellbeing. Many accessed the help of a dietician which they found helpful.

The group provided a mixed response when asked if they consumed at least five portions of fruit and vegetables each day, however most were aware of the benefits and associated it with being healthy. One participant also said 'eating healthy makes you happy'. The main reason for not eating fruit and vegetables was because they did not like the taste. Participants who were more independent explained that their doctors encourage them to eat balanced diets and provide information about low fat options. Some participants were supported by their carers to lose

weight and as a result gained confidence. Participants were also encouraged to lose weight by health professionals/or carers.

Most of the group participants did not smoke cigarettes or any form of tobacco. Three members had managed to successfully give up. They had quit because they felt smoking cost “too much money” and wanted to live healthier. One gentleman cited his friends’ support as a key factor for helping him to quit. Several people have successfully given up drinking alcohol or significantly reduced the amount consumed.

Importance of exercise was appreciated with many participants giving examples of a variety of physical activities they take part in including walking, swimming, Zumba, dance class, Taekwondo and the gym. People who were exercising including those who needed carer’s support felt empowered and happy. Group participants who were more independent also exercised regularly in order to remain healthy. One participant who uses a wheelchair and Zimmer frame felt a sense of achievement after being supported by a physiotherapist and staff at a home he lives in.

Outpatients

We asked the group to share their experiences of using local NHS services. Several people were critical of their GP practices because of how long they had to wait for their appointments. A carer also shared her negative experience of supporting a patient with support needs who often gets really anxious when waiting.

“My appointment is always last; I need to regularly talk to staff to ask why.”

“Get there especially early and still have to sit for over an hour. You only get 10 minutes to chat. Long queues for reception desk. Sick and tired of it, people would turn up way after me and get seen before me. I’ve changed doctors because of it.”

The group shared several stories of struggling to get the correct medication from their pharmacies. Lack of communication between services had caused patients to unnecessarily visit their pharmacy to pick up a prescription when the medication was unavailable.

“We shouldn’t have to fight for medication, I know there is so many people, but the people should get the treatment they need.”

Participants felt that although most GP’s are friendly, they don’t quite understand how to interact with someone with learning disabilities. Doctors often used words that were unfamiliar to patients or that patients did not fully understand. “Rather than talking in jargon, it would be better if they used pictures”. When accessing health services people appreciated being clearly explained who they will see and why. This would help them to be reassured and improve their experience. Clearer, jargon free communication supported by pictures would improve understanding. Accessible written information that people could take home would be beneficial and would help people remember it.

A carer at the focus group criticised doctors’ unwillingness to let carers talk on behalf of the patient. She explained that occasionally people with learning disabilities are unable to understand the doctor. She felt that in those cases, it would be more beneficial if the carer could communicate with the GP.

One member of the group felt that health professionals often underestimated people with learning disabilities. “Staff don’t think you can do it, so don’t suggest certain things, they make an assumption. Just give us a chance to put a foot in the door, give me a chance to share my views”.

Participants shared positive experiences of accessing hospital services. Hospital staff were commended for being friendly and for providing clear treatment explanations. A gentleman praised the Ophthalmology department at St Thomas' hospital for helping diagnose his visual impairment. He thanked the staff for being so nice and explaining his condition with a helpful easy read booklet.

"I went to Accident and Emergency department because my iron was low. I was taken to Ambulatory care. They book you for an appointment quickly. Staff were nice and explained everything."

"Visited the hospital a week ago and staff were friendly, they have sent the results to my doctor. They will contact me when they have them."

However, one person disagreed and felt that communication at University Hospital Lewisham could be improved. "Doctors in hospital need to explain what they are doing better. During my last visit, they stuck a needle in my arm, and I don't know why? It was painful." Having injections was quoted 'as scary' for many patients and extra support and reassurance during procedures requiring injections would be beneficial.

Improving communication and providing clear explanation of what is going to happen, when and who they will see would improve experience of people with learning disabilities.

The group felt that it is helpful to have someone or a family member to support them when going to appointments. One gentleman was frustrated that his stepdad wasn't allowed to ride in the ambulance with him.

Access to appointments

Participants told us that they were frustrated with the lack of available appointments at their GP practice. They shared similar stories of spending significant amounts of time waiting on hold, to either not get through or to be only able to book appointments two weeks away. The primary methods for booking appointments was either by phone or by visiting the practice. None of the group knew how to book online appointments.

"Can't get through to my doctor. Always on the answer phone, never call me back. Don't know how to book online."

"Takes 30 mins-60 mins to get through and then the appointment is 2 weeks away."

"Sometimes it is easy, sometimes difficult. Depending on the times it can make it difficult. More difficult if an appointment is early."

"Find it easier to go into practice to book an appointment. Staff are friendly and sometimes send letter reminders."

Participants who required support in booking and managing their appointments valued the support received.

The group were unaware of the Lewisham GP Extended Access service. The service was set up to ensure everyone has improved access to GP services including sufficient routine appointments at evenings and weekends to meet locally determined demand, alongside effective access to out of hours and urgent care services. A participant received a text message about the service but did not understand the content. They felt it would have been easier for a doctor to explain the message.

One group member told us that they had missed several appointments, because she doesn't remember them. All participants agreed that they would prefer health services to provide text or phone call reminders about their appointments.

It was suggested that practices could issue tickets which would contain full appointment details, like those provided by dental practices. They also would appreciate receiving appointment reminders the day before. Participants would appreciate support to inform them it's their turn for an appointment. Some find it difficult to read the current signage.

Screening

A number of the group were knowledgeable about health screenings and have accessed them. When responding to the questions many group participants also confirmed they have accessed health checks. A woman had experienced screenings for breast and bowel cancer. She was seen straight away. She found them to be “okay” but the bowel screening was “bloody painful”. This sentiment was also shared by another participant.

“Had a smear test last week. “Uncomfortable but it is good to know what is going on in my body. Doctors will get my results, but I can't remember if they told me if I'd get them.”

A gentleman had attended the hospital for a heart test. They described the nurse as being helpful and assisted them by placing stickers on his chest before receiving an electrocardiogram. He is still waiting for test results.

Lack of test results was an issue raised by several participants. “If everyone just communicated in the NHS, we wouldn't have these issues. Everyone should get letters; we shouldn't have to chase them for our results.”

Specific Conditions survey findings

Alongside the general survey analysed earlier, eleven people filled in a survey focusing on long term conditions and themes within the NHS Long Term Plan. Six of the eleven surveys related to mental health conditions.

It was felt that due to the small number of the surveys, the analysis will focus on the mental health responses.

Five out of six people who described their experience of using mental health services felt they had a negative experience, however one patient who accessed dementia support services described their experience as positive.

Below are the key themes that emerged from the experiences described:

- It was felt that support from the GPs in relation to mental health should be improved. More knowledge on the topic, and information about where to access adequate help is needed. A holistic approach of treating people's mental health is necessary. Medication should be used to support recovery but not the primary treatment.
- People felt more ongoing support and follow up for people experiencing mental health is needed.
- Respondents accessing IAPT service felt a more thorough assessment would assist in ensuring the right support and treatment is given to help the recovery.
- Quick access to low level support services such as IAPT would help patients recover quicker. One patient described waiting over three years before being finally listened to and offered help. During the long wait to access support, their health deteriorated to the point where they needed to access secondary care services.
- There is a need for in-depth treatment that is suitable in intensity and length to help people recover instead of helping them to ‘get by’. One person sought IAPT support three times and only started seeing results after intensive private therapy. This person felt that

the service took credit for providing adequate support however the patient did not feel fully recovered following the treatment and was ‘just given antidepressants’. It was felt that it was important to shape services to help people ‘resolve the issues for the long term, rather than just putting a sticking plaster on things and hoping people will cope.’

- 30 minutes to 1 hour was the preferred time people are willing to travel to receive a quick and accurate diagnosis.

Conclusion

The main issue identified through the analysis of our surveys and focus groups was access to GP appointments. Easier and quicker access to the primary care services was of great importance for people in helping them to live healthy lives.

Participants were aware of the positive impact a well-balanced diet and physical activity can have on their lifestyle. It would be helpful for Lewisham residents to sustain a healthy lifestyle with the availability of free or reasonably priced sport activities. People would value affordable healthy food options and clear information on healthy balanced diets. Air pollution was highlighted as having an impact on the health and wellbeing of residents.

Lewisham residents felt that choosing the right treatment should be a joint decision between patients and the relevant health and care professionals. It was important to have access to clear information about treatment options to make informed decisions. To ensure effective care, continuity of health professionals is key.

When older, people want to be supported to be able to stay at home for as long as possible. People also appreciated the importance of connecting with others and staying active by taking part in various activities that supported their mental and physical wellbeing. Access to support groups was mentioned as beneficial in helping manage people’s health and wellbeing.

Improvements in communication were important to people including:

- Improved communication between patients and professionals
- Improved communication between services.
- Improved digital access to match technological advances would be valued. However, to ensure equality of access, the system should take into account those who do not use technology.

Quick access to support was sighted as critical in order to prevent people’s mental health from deteriorating. It was suggested that primary care professionals would benefit from training to help better support people with mental health issues. In addition this may help GPs spot symptoms when people first present at services with mental health which could improve initial diagnosis and referrals. Extending training to secondary care health professionals would help improve patient’s experience and ensure their mental and physical care are treated equally.

For those who experience mental ill health felt it was important to ensure provision of follow up care and an ongoing support. The role of a good, available and responsive care coordinator was necessary in ensuring a high level of treatment.

It was felt that the IAPT service would benefit from providing a more thorough assessment which would lead to a better diagnosis and suitable treatment. It would be helpful for the intensity and length of the treatment to increase in order to achieve full recovery.

Other important factors of good mental health care were:

- Consistency of good quality health care and professionals,

- Trusting relationships with empathetic and supportive professionals,
- Appropriate level of support to suit patient's needs
- Learning about the symptoms, triggers and self-management of their condition
- Easy access to support and care when needed

Participants with learning difficulties were aware of the importance of a healthy lifestyle. Their key workers, family and carers play a key role in encouraging and supporting them to change their eating habits and improve their wellbeing.

Waiting time for appointments was highlighted as an issue. Being given clear information about their treatment options and knowing which health professional they are going to see is important to people with learning disabilities.

An improvement in communication by primary care professionals would be welcomed. A reminder of booked appointments would be welcomed in accessible formats.

The role of the support worker/carer and family was appreciated and valuable in supporting people in managing their health and wellbeing.

Appendices





