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| <b>Committee(s):</b>  | <b>Date(s):</b>        |
| Health and Wellbeing Board (for information)  | 31 Jan 2014            |
| Health and Social Care Scrutiny Sub Committee   | 4 Feb 2014             |
| <b>Subject:</b>   | <b>Public</b>          |
| Healthwatch City of London Update   |                        |
| <b>Report of:</b>   | <b>For Information</b> |
| Chair Healthwatch City of London  |                        |
| <p style="text-align: center;"><b>Summary</b></p> <p>The following is Healthwatch City of London's first regular update report to the Health and Wellbeing Board as agreed from the last Board meeting in November 2013. It was agreed that the report would cover updates on recent activities and member feedback.</p> <p>This report covers the following points:</p> <ul style="list-style-type: none"> <li>• Healthwatch City of London response to the Call for Action consultation</li> <li>• Barts Health Trust</li> <li>• Healthwatch City of London GP survey</li> <li>• Outcomes and Impact assessment of Healthwatch City of London.</li> </ul> |                        |
| <p><b>Recommendation(s)</b></p> <p>Members are asked to:</p> <ul style="list-style-type: none"> <li>• Note this report, which is for information only</li> </ul>  |                        |

## **Main Report**

### **Background**

1. Healthwatch City of London was established on 1<sup>st</sup> April 2013. In the nine months to date, the organisation has established contacts with residents and developed a membership base. We have begun the process of establishing the areas of health and social care that local residents and the worker population have highlighted as being important to them.

### **Current Position**

2. Healthwatch has begun establishing working relationships with the major health providers - Homerton University Hospital, and the hospitals comprising the Barts Health Trust, the East London Mental Health Trust, the City and Hackney Clinical Commissioning Group (CCG) and UCL Health Partners, as well as having planned visits to University College Hospital this year. The Corporation of London has been very helpful in assisting with access and representation on committees such as on the Adult Advisory Group and Safeguarding Group, and their support has been appreciated by the staff team.

3. Regular meetings are planned for 2014, between Healthwatch members, residents and workers in the City of London, as well as with the Homerton and Barts Trust.
4. Detailed below are some activities and member feedback from the last three months.

- **Healthwatch City of London response to the Call for Action consultation**

The Call for Action consultation was brought to the attention of the Health and Wellbeing Board in 2013. Healthwatch City of London consulted its membership and after consultation with our members Healthwatch City of London has identified the important features for service users and included these in the attached report as well as summarising the below:

- Patients want better access to primary care and fuller weekend services as well as access to more joined-up care.
- Any changes can only be implemented through close cooperation with patients.
- A greater focus is needed on preventing ill-health both for public benefit and for cost-effectiveness.
- London is a leader in mental health innovation which should be a priority in provision of resources.
- Patients want 7 day access to services provided near their homes and places of work. This is especially important for Healthwatch City of London bearing in mind the working population of upwards of 400,000, who also work at weekends. Pharmacies are also an important element.
- A growing and ageing population with increasing long term will require better primary care and more integrated care.
- Only about 12% of patients with long-term conditions have been told they have a care plan.
- Research and education need to be better integrated.
- More resources need to be dedicated to health education.
- Individuals need support, instruction and consideration to enable them to take more responsibility for their own health.
- Greater support and instruction in the use of technology is needed to enable people to book online and use online facilities.
- Ease of appointments, effective treatments and considerate aftercare are the areas that make the biggest difference to improving patient experience.
- Improved training for hospital staff is needed.

- **Barts Health Trust**

Along with the other Healthwatch organisations in areas that geographically aligned with Barts Health Trust, Healthwatch City of London has been pressing for clarity on future services for residents of the City of London. In particular we have focused on how the financial pressures will impact on local delivery. We continue to have a regular meetings and correspondence with Barts Health Trust

*The responses to these are included in the main report which is attached.*

- **GP Survey**

This survey was conducted in October and November 2013 and the results will be fed back to NHS England and local services. There were 16 responses to the survey in total.

- 30% of responses were from workers in the City of London
- 60% of responses were from residents in the City of London
- 10% of responses were from parents who did not indicate that they were either workers or residents in the City.
- With regards to the location of the GP practices under discussion, 63% were in the City of London and 37% were located outside the City of London.

### **Key Findings**

- The overall level of satisfaction was far higher for the practice within the City of London rather than for those located outside the City with 90% of City residents/workers commenting that their practice was either “Very Good” or “Good”. Practices outside the City did not receive any “Very Good” results but a third of respondents commented that their practice was “Good”. This is a good indication of satisfaction of the services provided within the City of London.
- The 111 service is being greatly underused with none of the City practice respondents saying they had used it for the health conditions featured in the survey and only 10% of respondents from practices outside the City said they had used it for ‘choking, chest pain or blacking out’ with 40% for that question still calling 999.
- Those registered at practices outside the City were more likely to use the 111 service with 40% having used it at some point compared to 20% from those registered within the City.
- People registered at the City practice use their practice much more with 80% having visited their GP in the last 6 months compared to 66% outside the City. This is reflected in the generally higher levels of satisfaction for the City practice which means that people are more likely to visit the surgery.

- Appointments at the City practice were booked using a variety of methods such as on the phone, in person or online whilst 100% of those booking at practices outside the City used the phone. Again, this is a positive sign that the City practice is finding a variety of ways to encourage bookings which is resulting on greater use of the services and higher levels of satisfaction. 70% of those booking at the City practices said they found it either Very Easy or Easy to get an appointment compared with only 16.5% of those outside the City saying it was Easy to book and no respondents saying it was Very Easy.

### **General Comments**

- Reception staff often encourage patients to call on the day to book an urgent appointment rather than waiting for a particular doctor to be available. Some doctors are very popular and difficult to see.
- The Neaman practice is described as outstanding by one respondent.
- One City resident described their GP, team and reception staff as understanding, professional and dedicated. Another said that the City GP practice had excellent doctors, staff and receptionists.
- There were requests for more slots outside working hours from some City residents and a request that doors should not be shut during the lunch break. It was also mentioned that reminders about flu jabs would be useful. Evening and weekend clinics were described as insufficient.
- The Hoxton surgery was described as satisfactory with a personal and reassuring service and trustworthy relationship between patients and doctors. Interaction between patients who attend PPG meetings indicates equal levels of satisfaction.
- A complaint was made from a resident outside the City that reception staff were unhelpful to those with English as a second language and could offer better advice on the services rather than referring patients to A&E or the walk in centre.

### **■ Survey Conclusion**

- This survey indicates the high satisfaction of patients for the Neaman Practice based in the City and the high attendance could be due to the fact that the practice is the main source of services for the City. Further investigation is required to identify the GP practices outside the City boundary and to work with the appropriate borough Healthwatch in raising the satisfaction level for patients using those facilities.
- The 111 service is still not being accessed to its full extent but this is not a problem just within the City of London. This is a problem throughout the London Boroughs and the country.

- Future work will include Community Services – what is available, who uses them and what are the gaps to ensure that patients in the City have an accessible and seamless service in spite of many services being based outside the City boundaries.

- **Outcomes and Impact Development**

The outcomes and monitoring framework has been agreed with the Corporation of London. This will be used to demonstrate the progress that Healthwatch City of London is making in terms of its role as the consumer champion for Health and Social Care. The framework is included in the attached report. The Healthwatch City of London mission is summarised below:

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| Healthwatch City of London understands its purpose and external stakeholders understand the purpose of Healthwatch City of London. | Healthwatch City of London mission statement developed with involvement of stakeholders through consultation with local communities. | Local communities can understand the purpose of Healthwatch City of London and know how to contact it reflected through annual survey of needs identification and numbers of appropriate referrals to Healthwatch by phone, email, letter, social media, newsletter entries or website visits and .personal referrals when giving talks and presentations. |
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## Conclusion

5. This is the first report to the Health and Wellbeing Board. The draft priorities for 2014 will be agreed at the Healthwatch Board Development day in January and circulated for consultation in February. After input from members the priorities will be finalised in February 2014. The future reports will identify progress on the priorities agreed by the membership of Healthwatch City of London, and any urgent items that are identified as part of the routine work of the organisation.

## Appendices

- Appendix 1 - Report to the City of London Health and Wellbeing Board on Healthwatch City of London recent activities

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