

Appendix 2: Engagement feedback

This appendix summarises HC2019 feedback received from:

- 9 open engagement events
- Paper and online forms and queries
- Workshops 1 & 2
- Market days
- Community group meetings
- Stamford Freshers Fayre

All of the detailed feedback received has been circulated to the Senior Responsible Officers for the system programmes to inform the development of Lincolnshire's Long Term Plan and also to shape their programmes and projects.

Feedback from open engagement events:

Since the campaign launch, we have held 9 Healthy Conversation 2019 events, advertised locally, for the public to attend drop in sessions between 2-7pm in the locations in the table below. These were hosted by a range of senior managers and clinicians, available to talk to the public and walk them around displays showcasing information and opportunities for involvement in prevention and self-care, integrated community care, mental health, hospital services, enablers (digital, workforce, estates), NHS Long Term Plan, travel and transport.

These events have been attended by 365 people and the core themes raised through direct verbal discussions and feedback forms were:

Date	Location	Key Locality Themes	No. of attendees
13/03	Boston	<ul style="list-style-type: none"> • Accessibility of stroke services in the future • Loss of services to Boston as a whole 	67
14/03	Louth	<ul style="list-style-type: none"> • Threat of hospital closure (this was an initial concern that alleviated once responded to) 	17
19/03	Skegness	<ul style="list-style-type: none"> • Accessibility of stroke services in the future • Loss of services to Boston as a whole 	20
20/03	Grantham	<ul style="list-style-type: none"> • Concern that A&E is being 'downgraded' • Urgent Treatment Centres and what they are 	129
20/05	Sleaford	<ul style="list-style-type: none"> • Lack of GP access • Lack of coordination following discharge from 	25

		hospital	
21/05	Gainsborough	<ul style="list-style-type: none"> Lack of GP access Financial difficulties when having to travel to visit family 	13
22/05	Lincoln	<ul style="list-style-type: none"> Financial difficulties for family members having to travel to hospital Professionals should be able see each other's notes to make it more streamlined for patient 	30
12/06	Stamford	<ul style="list-style-type: none"> Ensure links with North West Anglian NHS Trust for services in Stamford Grantham A&E closure overnight 	20
13/06	Spalding	<ul style="list-style-type: none"> UTCs essential to keep people out of A&E – need more in the county and even in Long Sutton 	44

Throughout all events, we consistently heard that the public are concerned about:

- Transport to services for patients and family
- NHS111 and its effectiveness
- EMAS and response times
- Issues of overburden on Lincoln County Hospital

Feedback from paper and online forms and queries:

We have received over 200 completed HC2019 feedback forms on various elements of the campaign via social media, telephone, email and forms at events and on our website. The detailed feedback has been circulated to programme Senior Responsible Officers and a summary of the key themes and suggestions for each of the services is provided below:

Acute Medical Services

Key themes:

- Capacity issues at Lincoln hospital – delays in being seen
- Length of time to get to hospital

Suggestions include:

- Airlift to specialist hospitals outside of Lincolnshire if case is too complex

Breast services

Key themes:

- Poor infrastructure and road networks causing access difficulties for patients and families who need to get to Lincoln
- Lack of confidence in Lincoln Hospital having sufficient capacity
- Preference of keeping services at Pilgrim

Diabetes, Self-Care and Prevention Services

Key themes:

- Variation in standard of diabetes care between GP Practices
- No infrastructure to support the communities, especially in Mablethorpe

Suggestions included:

- Focus on education and generational change
- Clinic appointments needed outside of working hours to reduce time needed off work
- Regular blood tests for everyone to alert people to problems before they arise

General Surgery Services

Key themes:

- Lack of confidence that current staff will be able to deal with more complex issues
- Team is mainly built up of agency staff meaning current service is not sustainable
- Journey will be too long for people in severe pain to travel
- Lack of signage around Grantham hospital currently

Suggestions include:

- To hold follow up clinics and monitoring in local hospitals

Haematology and Oncology Services

Key themes:

- Capacity/ issues of over burden on Lincoln hospital – overcrowded and poorly staffed, not enough beds
- Costly travel and parking that could cause hardship for both patients and their families when having to visit on such a regular basis
- Frequent cancellations and delays to appointments at present

Suggestions include:

- To have follow up appointments locally

Mental Health Services

Key themes:

- Really good care and support especially with autism
- Impossible to get appointment with CAMHS
- Lack of awareness on how to care for people with dementia and the care plans put in place by social services
- Additional community based services, enabling patients to stay at home with family

Suggestions included:

- More information required for parents about what services are available, especially online
- Improve links (transition) from children to adult services
- Improve flexibility of CBT appointments for those who work
- More information is required about what support is available in times of a mental health crisis – A+E seems too often to be the only option
- Share updates on mental health patients with the police so they have an understanding on how to deal with the individual

Primary Care Services

Key themes:

- Interface between GPs and other services – so patients do not have to tell their story multiple times
- Lack of availability for appointments

Suggestions included:

- Charge patients if they (do not attend) DNAs booked GP appointments
- Communicate all options for appointments as patients don't always need to see a GP
- Suggestion that one 'carer' cares for all of the people in one area; this would give more caring time and cut down on travel

Stroke Services

Key themes:

- 'Golden Hour' not achievable from some parts of the county
- Consideration of population need by locality before determining locations of service
- No mention of step down / rehabilitation
- Ambulance response times are poor – assurance needed
- Capacity issues – overburden on Lincoln hospital
- Loss of service at Pilgrim Hospital

Suggestions included:

- Scope how to link mental health support and stroke community rehabilitation
- Transport issues need addressing before any services are relocated

Technology and Innovation

Key themes:

- Welcome e-consultations to avoid concerns regarding transport/reducing the NHS' carbon footprint
- Refreshing to hear; innovative thinking, digital is the future
- Due to cyber-attacks, how safe is the 'digital system'?
- Many people do not have access to the internet and will need alternative options
- Areas of poor broadband and poor mobile phone signal
- Shouldn't need to keep re-telling your story/medical history

Suggestions included:

- Patients holding their own records and notes like in France
- Other communications needed such as face to face and local newspapers

Travel and Transport

Key themes:

- Issue isn't the hospitals but travelling to them – poor road networks and lack of public transport
- Early appointments not achievable when using public transport
- Costly travelling across the county to hospitals further away
- Hardship to patients and families by having to take additional time off work to travel further
- Can't always rely on family and friends
- Community transport sometimes unreliable
- Unable to get back from hospitals if taken by ambulance

Suggestions included:

- Inter-site transport - provision of shuttle between hospitals or accommodation for family to stay
- Development of a driver volunteer scheme
- Direct trains between Boston, Skegness and Lincoln
- Routes and times clearly displayed at all bus stops
- Introduction of a travel helpline

Urgent and Emergency Care Services

Key themes:

Grantham

- Grantham is on major road and rail links and needs an A&E open 24/7
- New housing developments with increasing local population
- Travelling time is not within the 'golden hour' from parts of the county, especially for those without their own transport
- Poor road networks and lack of public transport, especially in rural villages
- Ambulance availability and response time concerns
- Capacity issues – overburden on Lincoln Hospital
- Inability to get back from hospitals if taken by ambulance
- Lack of transport to attend another A&E during the night
- NHS 111 and its effectiveness

Suggestions included:

- If people call NHS 111, Grantham Hospital needs to be the first option
- Educate the public on how not to abuse the NHS
- Patients need to be clearly informed about the UTC's capabilities and limitations
- Free shuttle bus or volunteer transport to hospitals from main train and bus stations and between hospitals

Stamford (proposal)

- Great service in Stamford Hospital, would like an extended service
- Support for UTC in Stamford to reduce need to travel elsewhere for emergency care
- UTC will reduce the pressure on surrounding hospital

Suggestions included:

- Increase in population anticipated therefore need extended access to urgent care 7 days a week
- Hospital could provide additional outpatient and emergency clinics

Women's and Children's Services

Key themes:

- Lack of transport if service is moved Lincoln
- Length of time taken to get to Lincoln in an emergency is too long
- Loss of services at Boston and the desire to retain women's and children's at Pilgrim

Suggestions included:

- The need for an easier way to access community Paediatrics before children's education is affected
- To send out clearer communication about the situations concerning women's and children's services at Pilgrim hospital

Feedback from Grantham and Boston workshops 1 and 2:

Lincolnshire's NHS held workshops, open to all, in Grantham on 19th June and Boston on 27th June. Two further workshops were held on 9th and 10th October in Grantham and Boston.

In the June workshops clinicians and staff were involved in discussions with attendees about the key themes relating to the ongoing Acute Services Review in the county which had emerged from previous engagement. This focused on the proposed changes to services for women's and children's and stroke services in Boston and Urgent and Emergency Care in Grantham and also travel and transport for each of the services.

This feedback summarises the main points and issues raised during conversations. Our subsequent response to those Frequently Asked Questions (FAQs) and scenarios which emerged during the workshops is attached as appendix 4.

At the follow-up workshops in October, attendees were provided with the feedback from the June workshops and along with staff and clinicians were asked to:

1. Review and sense check the feedback and suggest amendments
2. Make suggestions about how these messages and scenarios could be communicated more widely with the public
3. Raise any outstanding concerns

Main themes raised at Grantham workshops:

- Service and staffing provision within the proposed Urgent Treatment Centre (UTC) and how this may impact other hospitals
- How any proposed changes might affect other wards and services at Grantham Hospital
- Healthy Conversation 2019 engagement process prior to consultation and involvement of those with protected characteristics
- NHS 111 service provision and performance
- NHS support offered to disadvantaged patients, especially for travel and transport
- Access to services and inadequate public transport provision in areas
- East Midlands Ambulance Service (EMAS) service provision, performance and the 'golden hour'

Main themes raised at Boston workshops:

- Travel times and ambulance transfers to Lincoln Hospital
- Treatment times for patients suffering a stroke
- East Midlands Ambulance Service (EMAS) performance and targets
- Advertising of engagement events and provision for those not able to attend
- Additional travel needs of friends and families if paediatric patients moved to other hospitals
- Options being consulted on for women's and children's services
- Recruitment, retention and availability of staff to deliver services in Boston Hospital
- Rural funding for Lincolnshire
- Stroke care in the community

Feedback from market days:

During the months of September and October we visited 12 localities across Lincolnshire where we spent time at local markets and supermarkets, speaking to members of the public. Leaflets were handed out to 416 people and the core themes that were raised (through direct verbal feedback and formal forms) were:

Date	Location	Key Locality Themes	No. of leaflets	No. feedback forms
04/09	ASDA, Lincoln	<ul style="list-style-type: none"> • Generational change - need to educate the young on self-care and prevention • Bring back nursing apprenticeships 	105	6
05/09	Waterside, Lincoln	<ul style="list-style-type: none"> • Lack of public transport from rural areas • Delayed waiting times at Lincoln Hospital 	96	4
23/09	Skegness	<ul style="list-style-type: none"> • Lack of patient note reading • Cancellation of appointments without the patients being made aware 	18	4
01/10	Gainsborough	<ul style="list-style-type: none"> • Teaching children how to lead a healthy lifestyle • Nursing careers need to be made more attractive 	4	3
02/10	Sleaford	<ul style="list-style-type: none"> • Importance of integrated 	12	0

		community care and neighbourhood working		
04/10	Long Sutton	<ul style="list-style-type: none"> • Staff shortages at Johnson Hospital • Same day available appointments at your GP practice 	53	3
10/10	Horncastle	<ul style="list-style-type: none"> • Encouraging to see NHS staff out in the heart of local communities • Happy with the local GP practice 	21	7
11/10	Stamford	<ul style="list-style-type: none"> • Good to see the NHS out and about, make the NHS seem more accessible and friendly to approach and talk to • Would like to see more mental health support 	26	3
17/10	Mablethorpe	<ul style="list-style-type: none"> • Coming to our local market is better than holding events that many may not be able to get to • Access to GP appointments • Lack of mental health services 	32	14
18/10	Alford	<ul style="list-style-type: none"> • Young people should be educated on healthier lifestyles and prevention to save money • Difficulty in booking GP appointments 	18	5
23/10	Louth	<ul style="list-style-type: none"> • Lack of personalisation when visiting the GP • The NHS should charge for missed appointments 	21	5
24/10	Bourne	<ul style="list-style-type: none"> • People are abusing A&E, we need to re-educate people on what it is for • The NHS should embrace technology 	9	1

Across the county, we consistently heard that the public are concerned about:

- Access to GP appointments
- Waiting times in hospitals
- Educating the younger generation on self-care and prevention
- Making sure the NHS is not abused, re-education on what services are for

Feedback from community group meetings:

Throughout HC2019, we have also attended a range of community groups and meetings to raise awareness of HC2019, promote opportunities for involvement and gather feedback about their experiences and any issues or concerns.

The feedback is summarised below:

GPs and primary care:

- Preference for email or text reminders for appointments rather than letters (which can be delayed) and then the appointment is missed, which then looks like the patient Did Not Attend.
- Still experiencing difficulties getting appointments and would like to be told when booking an appointment if it is with a nurse rather than a doctor to manage expectations.
- Some concerns that health visitors are not contacting all new parents and some may be missed.

Workforce:

- It would be good to upskill and increase staff recruitment by being 'attached' to a training hospital
- Staff not well looked after as employees, for example having to supply their own refreshments including tea bags; "how do we expect to fill our vacancies when we are not looking after the ones we've got!"

Technology:

- Welcomed the use of technology such as the care portal, as not having the correct notes in front of the doctor or consultant was very frustrating for some of this group.
- Not sure about using the phone for 'facetime' but liked the idea of having a hub to go to (for example at a GP practice) where people can be supported to log onto e-consultations etc. It was also felt the elderly would embrace this as it means less travel and less costs.

Supporting engagement with hard to reach groups:

- Suggestions provided on how to support deaf / blind people to attend health events such as providing transport and translation into braille etc.

- People with sight or hearing loss struggle with access to services, access to GP appointments, optometrist appointments and dentist appointments and travel to appointments. Often no interpretation service is offered and patients have to sit with a doctor and write notes between them.
- Making a doctor's appointment is usually via phoning the practice- not everyone has access to the online services so it would be useful to introduce text for deaf patients.
- An example was provided of an elderly couple who have sight difficulties and needed to travel by train for a hospital appointment which lasted 10 minutes but they were out of the house for 9 hours.
- One query was raised about how someone will book appointments etc. once they go deaf as they already have an amplifier and still struggle to hear.

Travel and transport

- Travel was a concern for the majority of the group in south Lincolnshire for both GP and hospital visits. Their nearest hospital is Grantham, but a lot of the time they are sent to either Boston or Lincoln for appointments/treatment. This can be extremely difficult for those who do not drive as there is only one bus into Lincoln or they have to pay for a taxi.
- Alternative suggestions include volunteer driver schemes and patients only have to pay for the mileage.
- Frustration with Thames Ambulance Service Limited (TASL) which is now no longer accepting a patient who has been using it previously for six years.
- Some people are often not given a choice of which hospital they would like to go to for treatment and the majority agreed they would travel out of county if it meant receiving treatment quicker.
- In Peterborough they run a service where paramedics, occupational therapists and nurses visit the frail and elderly if ill or had a fall – this team prevents that patient going into hospital and keeps them in their own home.

Feedback from Stamford Freshers Fayre:

On 10th September we attended Stamford Freshers Fayre and received 31 completed surveys, from which we heard the following:

The most important things respondents would like to see improve with the NHS are:

Mental health services – prevention is better than cure, over-stretched and hard to access, not advertised enough locally

GP appointments – improved access, ability to book in advance and more telephone appointments

Being taken seriously – important to be respected like adults are

If they wanted to find out more about NHS services they would use the following methods:

Online	20
Ask your GP	17
Friends and family	14
Hospital website	11
Support group	6
Social Media	6
Email	4
Welfare officer	2
Local press	1

Feedback from the Acute Services Review survey and The People's Partnership Acute Services Review engagement with hidden and hard to reach communities

The Acute Services Review survey was closed on 31st August 2019 following six months of engagement. These results have been analysed and reported into the Lincolnshire NHS system to ensure it informs the next stage of the acute services review programme and informed the emerging options being considered for full public consultation.

The Lincolnshire NHS organisations also commissioned a local specialist, The People's Partnership, to undertake a specific piece of engagement work, in order to ensure our Healthy Conversation 2019 exercise captured the views and concerns of hidden and hard to reach communities across the county. This was an important addition to our established engagement work for a number of reasons:

We were aware that the range of engagement events and activities we publicised to the general public and patients were not always appropriate for people with protected characteristics. This might be because the level of noise could prohibit full involvement, or anxiety about participation in such a group may inhibit and prevent attendance for example.

We know that people with protected characteristics have an important voice, and can often be particularly impacted by any potential service changes. It is important that we seek these voices out in order to ensure they are represented.

The People's Partnership undertook a detailed, and bespoke engagement in order to understand these views. This meant utilising their established networks, and developing new, in order to reach the people often missed. Our survey was adapted to become meaningful and understandable to the audiences we approached, and time was spent to ensure that the purpose was understood.

The following document details the outputs from this exercise, information which is being incorporated into our next stages of development and service review alongside all other outputs of our engagement events and surveys. The full analysis and reports are available at appendices 4 and 5.