

		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of Richard Wills, the Director Responsible for Democratic Services

Report to	Health Scrutiny Committee for Lincolnshire
Date:	17 December 2014
Subject:	Healthwatch Reports

Summary:

On 1 December 2014, Healthwatch Lincolnshire published four reports: -

- 'Hear Our Voice' – Children and Young People in Lincolnshire
- The Impact of Patient 'Did Not Attend' Appointments at GP Surgeries in Lincolnshire
- Residents' Views of their Local Pharmacy Services
- Service Users, Patients and Carers Views on Mental Health Services (Interim Report)

The purpose of this item is to draw the Committee's attention to these four reports, so that they can be borne in mind as the Committee develops its work programme:

Actions Required:

To note that Healthwatch Lincolnshire has issued four reports on the following topics and to consider whether aspects of these reports could be taken forward in the Committee's work programme: -

- 'Hear Our Voice' – Children and Young People in Lincolnshire
- The Impact of Patient 'Did Not Attend' Appointments at GP Surgeries in Lincolnshire
- Residents' Views of their Local Pharmacy Services
- Service Users, Patients and Carers Views on Mental Health Services (Interim Report)

1. Background

On 1 December 2014, Healthwatch Lincolnshire launched four reports at an event in Sleaford, which was attended by Councillors Mrs Talbot, the Chairman of the Committee and Councillor Mrs Sue Ransome, together with the Committee's Health Scrutiny Officer.

At the reports are available on the Healthwatch Lincolnshire website:

<http://www.healthwatchlincolnshire.co.uk/public-documents>

Set out below is the Executive Summary and Recommendations from each report.

"Hear Our Voice" - Children and Young People in Lincolnshire

Executive Summary

Healthwatch Lincolnshire has a duty to listen to everyone in our county and children and young people are a very important voice. This work has been completed to investigate and report the health and care needs of children and young people and was undertaken for 2 reasons. Firstly, as an organisation we had already identified Lincolnshire's children and young people as a group that we needed to engage with better. Secondly, the need for this work was endorsed when the Care Quality Commission, following their inspection of 'looked after children' in Lincolnshire said they "felt children and young people should have a greater voice which should impact on commissioning, delivery and effectiveness of services".

Our work was developed in 2 phases. The first asked questions about children and young people's access to services and the second phase was built on the intelligence of the first findings. This looked more deeply into the themes and areas of concern which were important to young people, such as drugs and alcohol and the impact of social and mental wellbeing.

In total, 1,646 children and young people between the ages of 11 and 18 (plus a very small number of vulnerable young people up to 25) have supported this work by completing confidential anonymous surveys. This large response provides a robust set of data for Lincolnshire and it should be acknowledged that the findings in this report are based on 'their voice'.

There is much national evidence that demonstrates the concerns which have been acknowledged regarding the relationship between drug use and mental health problems among young people. This national, as well as local intelligence, was used as a benchmark throughout this report and referenced accordingly.

Our findings have led us to form 10 key recommendations which can be found at the end of this report. We believe this work demonstrates a growing need for careful review of services and the environments which our children and young people are exposed to. In particular, we have identified that:

- Smoking and alcohol use amongst our children and young people is higher than the national average with some worrying related issues which may suggest the need for further research. These additional issues include the number of children and young people drinking alone or asking strangers to buy their alcohol for them.
- Self-harm and bullying are key and consistent components of the information children and young people told us. We need to acknowledge that despite what our education system tells us about bullying not being tolerated in our schools within Lincolnshire, we still saw a 93.6% response rate which said children and young people who were bullied, were being bullied within our schools and colleges. This cannot be tolerated. This is in addition to the level of self-harm and the clear correlation between the likelihood of bullying leading to self-harm cannot be ignored.
- We also saw a 25% dissatisfaction rate with some of the more recognised services such as CAMHS, ChildLine and 111. This highlights a need to perhaps look further at how these services can be more effective and in turn encourage a more positive attitude towards them and greater use. However, it is important to recognise the comments where children and young people told us that the services work well for them. We have included some of these positive comments in this report.

In putting this report together we must also recognise the work of the Children and Young People's Strategic Partnership (CYPSP) for Lincolnshire who have written the Children and Young People's Plan 2013-16. Also, the Lincolnshire Participation Action Group (LPAG) works to embed participation and inclusion of children, young people, parents and carers in the work of CYPSP and its delivery partners. Both bodies are working towards a positive future for all our county's children and young people and recognise issues such as bullying play an important part of a child's wellbeing. We hope the findings from our work will assist future children and young people's service design and delivery, helping to ensure those most in need of support will have the right help at the right time.

Healthwatch Lincolnshire has invited all partner agencies touched by this work to a presentation event on 1 December 2014. From this we hope we can achieve what the children and young people who were the main contributors to this piece of work hoped for - that their **voices will be heard** and influence services by putting "words into action".

Recommendations

From the findings within this report Healthwatch Lincolnshire has reflected on and detailed the following areas for concern where it is felt attention and action should be considered by providers and commissioners.

1. It was noted that **smoking** prevalence within Lincolnshire's children and young people is above the national average and therefore, Healthwatch Lincolnshire would like to better understand what public health, care commissioners and providers are working on which demonstrates reductions through action.
2. It would appear from the findings that the impact of **drugs** use is compounded as time progresses. Therefore, Healthwatch Lincolnshire would want to better understand from public health, care commissioners and providers which methods of early interventions, awareness and education have had best impact on young people's use of drugs and whether it is felt that further development of this work can impact further on the decline on children and young people using illegal substances.
3. Further related to **drug use and support**, we would like to highlight that 26% of our respondents were not happy with the support services available. It was not ascertained what specifically was felt to be unsatisfactory about the service but this may warrant further investigation.
4. **Alcohol** consumption amongst young people and children who responded (52.1%) was considerably above the national average of 45%. Furthermore, we noted that 3.2% of children and young people would ask a stranger to obtain the alcohol for them. In relation to both these elements we would seek response from public health, care commissioners and providers to understand what work is underway to tackle these issues and where they can demonstrate reductions; this is an area of concern particularly as it lends itself to potential safeguarding issues.
5. We noted that the number of respondents telling us that they are **drinking alone** was a concern, although we did not ascertain the frequency of those occurrences. In general we would like to raise this as an issue of concern with potential for further investigation. In addition, the reported lack of awareness highlighted the need for more local and national information on the safe levels and legislation related to alcohol consumption.
6. The feedback from the children and young people in this report provided alarming levels of reported **self-harm**. Healthwatch Lincolnshire believe this should be a priority for further investigation as current levels will potentially impact on future health and care services and the extended need for, and availability of, effective early intervention and support services.
7. Notably **self-harm and bullying** appears to have a correlation and high prevalence among children and young people in Lincolnshire and even more concerning is that 93.6% of those respondents told us that bullying they had

encountered had occurred within the school or college environment. This institution-based bullying needs to be addressed immediately as it impacts on our young people's lives and could potentially lead to future consequences. It would appear that the 'zero tolerance' policy that schools implement is not effective in stopping bullying in our educational environment and more needs to be done. Therefore, we would seek a response from the Local Authority and schools alike to work in partnership to look at this independent benchmark and work towards change.

8. Almost one quarter of our respondents stated that they were **young carers** and said they often felt unsupported or not listened to by professionals. Despite the large amount of work that has been developed around young carers there still appears to be a requirement to look deeper into these views of young carers to establish specific areas for improvement.
9. There is a general 30-35% dissatisfaction response with **national and local support services** including ChildLine and NHS 111. We as a health economy need to highlight this with the services that deliver, monitor and commission these services to acknowledge the views of young people and look to implement changes that will improve the experience and encourage the use of tools and support systems available.
10. There is also a notable reliance on using internet and mobile applications to **self-diagnose and access self-help**. While there isn't an issue with official sites where we know the information is up-to-date and monitored, there is concern that other non-regulated methods are often used. Lincolnshire County Council states that "locally, a lot of work is taking place with e-safety talks in schools by the Safeguarding Children Board (LSCB) and trained Police Community Support Officers (PCSOs). However, clearly there is more work to be done."

Following this research, Healthwatch Lincolnshire would be interested in looking at any future commissioned work to further explore in more depth any of the specifics around these findings and recommendations.

We would like to draw the reader's attention to other work that Healthwatch Lincolnshire has undertaken which they may wish to cross-reference. Some of this work directly impacts on young people's perceptions and experiences of health and care services. These can be found within the reports produced for 'GP Do Not Attends' and 'Our Mental Health' reports.

The Impact of Patient 'Did Not Attend' Appointments at GP Surgeries in Lincolnshire

Executive Summary

From the commencement of Healthwatch Lincolnshire in April 2013, we have continually received a significant number of patient and carers feedback about access issues and services from their GP surgery. In particular "I cannot get an appointment with my GP" has been a very

common view shared with us. The following is a snapshot of some of the many individual comments we have received:

"Trying to get an appointment recently is hard to get, the system has changed and makes it harder for patients to get to see the same doctor twice"

"Waiting times on-line to get into GP surgery is minimum of 2 weeks to get an appointment. If you want to see your designated GP then you have to wait a month. If you call there are no appointments."

"Phoned early to book an appointment only to be told all appointments have been taken for that day and could not book for the following day"

Whilst we accept there are many factors as to why patients are experiencing difficulties getting an appointment with their GP eg national problem with GP and nurse recruitment, number of people living longer with long-term conditions. For this research work our attention was drawn (by the GP Surgeries) to one factor, which is the large number of patients failing to attend their booked appointment. This is becoming an increasing concern to many surgeries as it is seriously impacting their services. The following comment from one surgery summarises well the concerns of many:

"Although our DNA rate is low in comparison to some organisations it is still a colossal waste of clinical time, money and effort. In some cases patients book and DNA on the same day. There is also a cost to the remainder of our patients who have to wait for appointments"

Below is an extract from an article in the Lincolnshire Echo (March 2014), which clearly highlights from a professional's point of view DNA is a growing concern:

'Sunil Hindocha, Chief Clinical Officer at Lincolnshire West CCG, said: "The impact of DNAs is that the overall patient wait to see a GP or nurse is extended which could result in exacerbation of symptoms.'

"Missed appointments are a growing concern for surgeries across Lincolnshire. They equate to a significant amount of wasted medical hours."

"The issue is that access to GPs and nurses is a valuable, finite resource and patients who do not attend or who do not cancel are wasting appointments that could be offered to other patients."

"We routinely telephone patients booked for a 20 minute appointment with a nurse the night before their appointment to remind them to attend or to prompt them to cancel."

Patient David Mitchell, who lives in Lincoln's West End, said: "I attend City Medical Practice, where in January alone 240 people missed appointments. It's appalling. If people make appointments they should keep them."

You can read the full article by following this link:

<http://www.lincolnshireecho.co.uk/Time-wasters-clogging-surgeries-waiting-lists/story-20803799-detail/story.html#ixzz367BIXZjg>

Two areas of intelligence (patient concerns and GP surgery feedback) led Healthwatch Lincolnshire to focus our research on what the impact DNAs are having on GP surgeries in Lincolnshire.

Our key findings include:

- The average annual number of patient DNAs across GP surgeries in Lincolnshire is 184,224.
- The average annual cost of patient DNAs in Lincolnshire to the NHS is £6,632,000 (this figure is based on the King's Fund average cost for each GP appointment).
- The impact of DNAs is that the overall patient wait to see a GP or nurse is extended, which could result in exacerbation of symptoms.
- The highest number of recorded DNAs in one surgery was 454 in November and the lowest was 28 in March/April.
- 33% of patients admitted to forgetting to attend their appointment, even though:
 - 80% of GP surgeries in Lincolnshire have online booking appointment systems in place.
 - 60% of respondents have text message appointment reminders.

There is also concern as to what impact on the wider health community DNAs have. For instance, if a patient is unable to visit their doctor for

treatment, are they then presenting themselves at a walk-in centre or A&E, creating more demand on already overstretched services? If the culture of not attending appointments is growing, we must also consider how this affects hospital and other health services in Lincolnshire.

How many patients are failing to attend their outpatient appointment and what is the cost to that service? Feedback from United Lincolnshire Hospital Trust is indicating patient DNA is a serious issue for their organisation.

Our findings have provided real evidence of the impact of patient DNA to our GP Services across Lincolnshire. The next steps must surely be for statutory organisations to provide better awareness and understanding of 'Did Not Attends' to their patients, particularly in relation to firstly, the cost to the NHS and secondly, the implications to other patients.

Alongside the impact of this problem, we recognise there are many other factors to DNA:

- Some people have personal barriers causing them to DNA such as caring responsibilities or health problems. We were told by one person that their mum in her eighties was caring for her husband and as a result was not able to attend 2 GP appointments. The practice wrote to this lady suggesting she would be struck off due to not attending the appointments. Another example was a patient with mental health problems, some days getting out of bed and getting to the doctors is just "too difficult to cope with".
- One patient told us he walked into a packed GP waiting room to be informed there was at least a 30 minute waiting time and as a result he walked out as he had limited time available. (This does not excuse him failing to inform the reception staff of his intention to leave.)

The remainder of our report provides in-depth information of the research undertaken by Healthwatch Lincolnshire to support the production of this report and includes conclusions and next steps.

Recommendations

- On 1st December 2014 Healthwatch Lincolnshire will present the findings of this research to the NHS England Area Team; Lincolnshire East, South, South West and West Clinical Commissioning Groups; GP Surgeries (GPs and Practice Managers); Public Health; Lincolnshire Health and Wellbeing Board, Lincolnshire Health Scrutiny Committee to enable them to consider the overall impact of DNAs in Lincolnshire. Following this report we would look to the relevant organisations from the above group to consider a range of possible actions required to help improve the situation.
- We would recommend that one such action should be a campaign to provide better education to patients of the impact of missing appointments. Offending

patients need to understand that they should be held accountable when they DNA.

- Patient use of electronic appointment systems may need to be considered, both from a perspective of access, but also where on-line appointment systems are being abused.
- Patients with a genuine reason for DNA eg carers should be supported if they are experiencing difficulties attending their GP appointment. Reassurances by GP practices that support mechanisms are available and in place for patients with personal barriers must be given.
- Further work is required to consider the barriers patients face when wishing to cancel their GP appointment. What is working well for some practices with limited DNAs could be mirrored by others.
- Healthwatch Lincolnshire will work with a range of local media sources to present the key findings of this report, but it must be the wider health economy who support the overall media messages.
- Following this research work, Healthwatch Lincolnshire would welcome commission opportunities to undertake further research looking more in- depth at why patients are failing to attend appointments.

Residents' Views of their Local Pharmacy Services

Executive Summary

Community pharmacies provide an important role within health care provision in Lincolnshire. Whether this is for repeat medications, over the counter treatments, supply of health care equipment or health advice.

A recent review of pharmaceutical service provision in Lincolnshire by the Lincolnshire Pharmaceutical Needs Assessment Group agreed that availability and access to community pharmacies differs across the county. For instance, there are many rural areas where dispensing-only services are available, but not the additional range of services offered by community pharmacies. However, it was felt that residents of Lincolnshire are adequately served by providers of dispensing services, both in urban and rural areas.

There has been national growing debate and consultation as to the role community pharmacies could play in helping to provide minor treatment centres to help alleviate some of the pressures on services such as A & E. But would local people prefer to visit their pharmacist than their GP for help with minor injuries? This report starts to look at whether patients really would visit their local pharmacy for minor treatments and other services.

On 19th October 2014 the BBC News headline reported:

Treating Common Illnesses at Pharmacies 'could save NHS £1Bn'

Treating common ailments like coughs and colds at community pharmacies could save the NHS over £1bn a year, the Royal Pharmaceutical Society claims. A study carried out by the body concluded such a move would reduce the number of accident and emergency visits by 650,000 and GP consultations by 18m. While minor ailment centres are common in Scotland and Northern Ireland only a third of English pharmacies have them. The RPS is now calling for them to be rolled out across England. They said the clinics - which could also deal with eye problems, stomach ailments like diarrhoea and aches and pains - could ease the pressure on an overburdened NHS as well as save money.

Healthwatch Lincolnshire have facilitated an in-depth survey of Lincolnshire residents which asked them why they use their local pharmacy, what additional services they would find useful and what is their perceptions and experiences of the staff and environment offered by the local pharmacy. The purpose of this work was to provide important feedback to the various local and national community pharmacy agendas.

As part of our research we also interviewed a local pharmacist, we feel the views of pharmacists will be vital if there is to be an increase or change in the services they offer.

Below is a summary of what the 115 respondents told us:

- 66% of them said they use the pharmacy to pick up prescriptions
- 36% said they use the pharmacy because it is convenient
- Only 8% said they use their local pharmacy for help with minor ailments
- Only 4% go to the pharmacy for health advice
- Overall staff satisfaction was rated as good with an average of 80.55% of respondents scoring fairly good to very good.
- There were some issues raised with the supply of medication, this reflects feedback Healthwatch Lincolnshire has received during the past year.

- Only 64% of people rated as good, having somewhere available where they could speak without being overheard, we believe confidentiality is essential in all NHS services.

The main contents of this report provides further details of the results from the completed surveys and the transcribed interview with a local pharmacist. At the end of the report is a number of recommendations we feel require further action.

Recommendations

From the results of this research we believe the following areas require further action:

- Confidentiality - it appears there needs to be more emphasis placed on local pharmacy services to provide areas in which customers can talk in confidence. On behalf of Lincolnshire residents, we would be keen to know what actions are in place to offer confidential areas within all local pharmacies.
- Waiting areas and waiting times - this was one area that did not score as high as it should. Patients need to be comfortable when having to wait. There should be sufficient seating and clear indications as to how long waiting times will be for people. Healthwatch Lincolnshire is keen to know how many local pharmacies have sufficient customer seating and offer information as to waiting times for collection of prescribed medications.
- Awareness campaigns - at present there appears to be a low take-up of patients using their local pharmacy for help with minor injuries or with long term conditions. In addition, there was a significant number of respondents suggesting they would like to be able to have more information from their local pharmacy for areas such as healthy eating, obesity, alcohol, mental health, travel health and diabetes. The indication was that the preferred method of awareness was through in-store posters or flyers/information leaflets. We would recommend all local pharmacies have in place awareness campaigns that provide a 'drip feed' of information.
- Listening and speaking to pharmacists - from the one interview we have done, it is clear that whilst there is support from pharmacists to implement a range of additional services at local pharmacies, there needs to be a much larger consultation with pharmacist to listen to their concerns and agree what training and support they would need.
- Communications with GPs - there appears to be some disconnect between the GPs and the pharmacy services. Better communication routes between the two would benefit all.

- Healthwatch Lincolnshire would be keen to work with the PNA or NHS England Area Team for any additional commissioned work required as a result of this report.

Service Users, Patients and Carers Views on Mental Health Services (Interim Report)

Executive Summary

This report is being presented by Healthwatch Lincolnshire as an interim overview of results from our research to date. However, we are not yet finished with our research and feel, due to the level and complexity of mental health conditions, it is important to offer a range of engagement opportunities for people to input into this work.

From our organisations start in April 2013, concerns about mental health services have been consistently raised with us by service users, patients and carers. In 4 out of the past 5 months, we have analysed mental health services to be in our top 5 reported themes.

Our research work is being delivered in three stages:

- **Part One** - In Spring 2014 we completed a very broad piece of work which looked at a general view of services and support, by asking a small group of people to complete a paper-based survey (23; 16 females and 5 males). This first piece of work also provided us with introductions and opportunities to meet with a number of mental health support groups and their users and carers, which gave us a chance to have some early informal discussions. The key messages from this initial work was:
 - Improved information to GPs and other health care providers for people with mental health conditions about support available is required.
 - More access to help eg more available CPNs and out-of-hours/weekend support.
 - The level of respondents that have self-harmed indicates a need for more information to be gathered, especially in relation to preventative and support services.
- **Part Two** From the end of September to early November 2014 we designed and electronically distributed an in-depth survey (a small number of paper-based surveys were distributed). This survey looked at mental health services from both the perspective of current users of services and those people waiting to enter the assessment and treatment pathways. 126 people completed the questionnaire (over

300 people started but failed to complete it). The results of this survey are included in this report.

- **Part Three** - We will be facilitating a large number of county-wide focus groups from December to February 2015. The same questions will be posed to each group and the results of their feedback will be used to complete our final report. We are inviting all provider and commissioner organisations to be involved in Part Three of this work.

Whilst carrying out routine engagement with other groups of people, Healthwatch Lincolnshire discovered some similar themes:

- Poor service co-ordination between social care and Lincolnshire Partnership NHS Foundation Trust.
- Lack of continuity in key workers.
- Short notice cancellation of case reviews.
- Gaps in provisions in some areas of the county eg the south.
- CAMHS, Child and Adolescent Mental Health Services - we have received many comments about the support offered by CAMHS.

Our interim findings have highlighted the following areas that we suggest require further work:

- Better support for carers who are looking after people with mental health conditions.
- Better understanding and support from other health care providers eg GPs.
- Better support for ex-military personnel.
- Waiting times for assessment does not appear to be meeting the needs of patients.
- Review of some existing services should be considered as many users did not rate them highly.
- Assessment of the process for handling formal complaints.
- Process of discharge from hospital or care facility needs to be improved.
- Specialist support services - do these meet the needs of users and carers?

Healthwatch Lincolnshire have raised concerns with Lincolnshire South West CCG and Lincolnshire Partnership NHS Foundation Trust about the large number of patient and carer issues regarding access to and treatment from mental health support services in Lincolnshire. In early November 2014 all 3 organisations met to start discussions about how services can be improved. We hope in the coming months to building on this partnership

Conclusions and Next Steps

The findings within this report highlight some very good experiences of mental health support services in Lincolnshire, which is encouraging for all concerned. However, it must be recognised that there are some key areas of concern raised by service users, patients and carers which we believe will require further research. These themes include:

- Waiting times - previous intelligence has suggested there is a continuing problem with waiting times for mental health assessment. The findings from Part Two of our survey confirm problems.
- Current services - 4 of the current services available to support people with mental health illnesses were rated as poor in 50% of the respondents view. Further work is needed to ascertain why they feel this.
- Complaints - less than 10% of respondents were very satisfied with the outcome of a formal complaint they have made. Healthwatch England have recently published a report that addresses the complexity of complaints and calls for more simplified process, to read the report access <http://www.healthwatch.co.uk/resource/my-expectations-raising-concerns-and-complaints-report>

Discharge from hospital or care - 80% of our respondents were unsatisfied with the discharge process. This replicates national concerns raised about unsatisfactory discharge and readmission.

- Carers - caring for any sick or disabled relative is a very stressful and major commitment. It appears there should be much more support offered for those families that are having to care for family members or friends with long term or severe mental health conditions, particularly where the caring is an older person.
- GPs and other support services - respondents highlighted the need for more support and recognition from the doctor or other health care services. This recognition should be for children, young people, adults and older people accessing support.
- Special mental health support services - whilst many respondents highlighted services such as 24/7 telephone support, crisis team and counsellors as important to help them with their illness, there needs

to be consideration as to why respondents don't consider STEP, recovery college, HIPS, Green Light Team, day care and day hospital, DART, CAMHS and buddying serviced specialist psychological services as important.

- Ex-Military - 2 of our respondents directly highlighted the need for more support for ex-military personnel, this suggests there may be a need to work with partner agencies to look at what services might need to be put in place.

2. Conclusion

The Committee is invited to note that Healthwatch Lincolnshire has issued four reports on the following topics and to consider whether aspects of these reports could be taken forward in the Committee's work programme: -

- "Hear Our Voice" – Children and Young People in Lincolnshire
- The Impact of Patient 'Did Not Attend' Appointments at GP Surgeries in Lincolnshire
- Residents' Views of their Local Pharmacy Services
- Service Users, Patients and Carers Views on Mental Health Services (Interim Report)

3. Consultation

This is not a consultation item.

4. Background Papers

No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

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