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Overview

What was the Big Conversation?

In 2016, the Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH) held some events to listen to the views of patients and carers. These sessions were based on the Trust's Listening into Action approach and invited attendees to discuss ways services can work together and provided an opportunity for services to listen to patient and carers ideas for improvement. Although smaller events had been held in North Lincolnshire focusing on RDaSH services, Healthwatch North Lincolnshire noted that an event had not been held to capture views on other health and social care provision in the area.

Healthwatch North Lincolnshire worked with the RDaSH Membership and Engagement Facilitator to provide local residents with an opportunity to suggest new ways services can work with them to improve their experience as patients or carers. The Big Conversation was held on 8th November 2016 at The House conferencing centre in Scunthorpe.

The event was held to enable patients and carers to tell us things that have worked well and how services could be improved. Participants could talk about any health and social care service they have used in North Lincolnshire, not just those provided by RDaSH.

The Big Conversation Event

Who attended?

The Big Conversation was publicised widely across North Lincolnshire. Healthwatch asked key contacts in the local community to spread the word about the event and asked health and social care staff to encourage those using services to attend and share their views. There were 46 people who attended, however many of these were health and social care professionals or those working in other public services. All except five attendees had signed in as a member of an organisation or group, with some of these being from patient advocacy groups such as Patient Participation Groups.

How did attendees rate the event?

Those who attended were asked to complete an evaluation sheet after the event to assess how useful they felt it had been.

The overall rating of the event was high, with 96% giving the event a 4 or 5 rating where 5 is high and 1 is low. The majority of attendees felt that the day had been a good use of their

time, with 89% rating this 4 or 5. Finally, 85% gave the event 4 or 5 for how they felt using this engagement methodology would help services to improve joined-up working as partners in the delivery of quality care.

Bearing in mind that the proportion of attendees who were service users rather than those working in services was low, the comments made on the evaluation form suggested that those working in services valued the opportunity to discuss ideas with others and were optimistic that positive change could be made to services in North Lincolnshire.

Attendees felt that they were part of a networked health community and that services shared similar challenges. There was a feeling of a willingness to co-operate and it was apparent that services had shared goals. Disappointment was expressed around a lack of representation from service users at the event.

Themes from the Big Conversation

Where have you felt listened to and involved in decision making around your care in the past?

The key theme arising from this question was around choice. Reflecting on their own experience of accessing health and social care services participants felt involved and listened to when they were given choices about their treatment where appropriate, rather than being told what would happen.

People felt it should be acknowledged that patients were not medical experts, but this shouldn't stand in the way of involving them. Things being explained in lay persons terms and being honest and open were felt to contribute to feeling involved.

In a busy health or social care environment the patient can sometimes feel that consultations are rushed. Having time to listen and discuss further follow up contact with a patient was said to make a patient feel they were involved in their care.

It was felt to be important that people were given responsibility for their own care and that patients might feel more involved in decision making about their care if some of the responsibility lies with them. The health and social care community are already recognising that service users are experts in their own care and their perspective is valuable.

How could we all work together as partners to improve this experience?

The key theme arising from this question was the need for a central point of access for the patient in the community, so that they can obtain information to support their health care needs themselves but also gain referral to the best course of treatment if required. It was felt that the GP practice could be the hub for this to take place, and that the surgery should be the place people could access not just an appointment with a GP, but to have their wider health and social care needs met. These aspirations fit well with the integration of services and considerations being made locally for hub models of care.

It was also suggested that not all staff hear patient stories or feedback on the patient experience. The focus should move away from a blame culture, to one where we are looking for ways to learn from patient experience. This learning should not just be for those planning and managing services, but health and social care professionals on the front line. Local Trusts already have work underway to ensure learning from patient experience is embedded across all staff levels.

The use of shared technology between services was highlighted as a way to improve patient experience. As services become more integrated, systems to share information will be required and the need for this is being recognised in plans for developing local health and care services. It is recognised that this relies on the pace of development of differing and complex health and social care IT systems and that integrating technology is a huge challenge, however the benefits of sharing information were felt to be important for improving how services work together.

Where do we go from here?

What does public participation in this event tell us?

Perhaps one of the most positive outcomes of holding the Big Conversation event was a clear demonstration of commitment on the part of health and social care professionals in North Lincolnshire to work together to improve services for the local community. It has shown that those working in services in North Lincolnshire which support our local community are keen to talk to each other, to discuss commonality and to find ways to learn from each other and develop services.

At a time where pressures on NHS and social care have increased and services are moving towards integration and place based care, it is reassuring that there is enthusiasm and appetite for joint working and for understanding the patient's perspective of care.

What was shared at this event was a disappointment that holding a Big Conversation event only went some way towards achieving the aim of hearing the views of those using services, however it was positive that services were ready to listen.

Patient and public involvement challenges

This event was a valued opportunity for health and social care professionals to discuss common issues and although the number of 'general public' attending was low, there was some input from the patient and service user perspective.

The challenge now is how to facilitate engagement with those accessing services and set up ways to have a dialogue that those providing services can access and learn from.

Asking people to attend an event hasn't resulted in a good turnout, but that doesn't necessarily mean people are not willing to enter into a conversation, big or small. Some reasons for poor representation from those accessing services could be that we are trying to enter into conversation with people who:

- Don't often access services, so feel their views wouldn't be valued and are irrelevant

- Do access our services, but are satisfied and think that we only want to know about negative experiences
- Do access our services, but have already told someone their views so they don't see the value in telling their story again
- Have things to share with us, but don't want to do this face to face and attend an event
- Didn't know the event was taking place

Recommendations from Healthwatch North Lincolnshire

The next stage in facilitating an on-going conversation, is for all health and social care organisations to adapt their approach to patient and public involvement to suit different groups of people in our community.

- Everyone accesses health and social care at some point in their life. It might not be them that need care right now; it could be a relative or dependent. Everyone is likely to have a view they can share at some point. Most people will have visited a GP surgery, so most of us have experience as consumers of health care. All health and social care providers in North Lincolnshire need to communicate this message.
- Healthwatch and local health and social care providers are not just interested in hearing about what has gone wrong or when people don't get the service they need. It is really important to tell us when things go wrong and most care providers and Healthwatch already have ways in which people can alert us to this. What we would also like to do is hear about what is working well and ideas for improving things. We hear less of this and need to equally publicise how people can tell us this.
- We all need to provide ways for people to have a conversation that they are comfortable with. Most service providers and Healthwatch are happy to go along to places where people meet to hear their views. We are all developing engagement plans to ensure that those who don't shout the loudest can still be heard. Some people will be happy to communicate with us in writing and they may prefer to remain anonymous and that is okay. Some people will be happy to use social media; others might want to pick up the telephone to have their conversation. We can carry on the 'Conversation' whenever people are ready and we need to communicate this offer clearly.

Healthwatch North Lincolnshire is looking at ways to ensure we have a presence in the local community. This will involve outreach sessions and getting out to talk to people. We all need to raise awareness not just about our services, but awareness of ways in which people can talk to us. We need to clearly communicate the message that health and social care providers in North Lincolnshire are ready to listen not just to concerns and complaints, but to hear about what works well and listen to ideas for making things even better. Healthwatch North Lincolnshire will continue to work with local service providers to support them to adopt this approach to patient engagement.

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