

## Healthy Liverpool Public Engagement Summer 2015

NHS Liverpool CCG Governing Body 10 November 2015





#### **Aims**

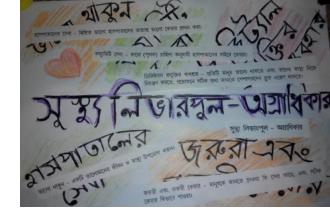


- Awareness
- Case for Change
- Capacity
- Views to inform development
- Diversity

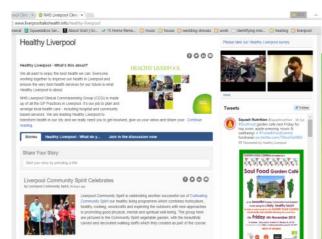


#### Methodology

- Reach / Diversity / New voices
- 60 on street stalls
  - 8322 given info of which
  - 996 returned surveys
- New engagement website
  - 3207 visitors
  - 1819 actively engaged
- 15 community partners engaged
   2566 people
- Total directly engaged = 14,097
- Twitter... 557,000 people







#### সুন্থ লিডারপুল – আপরি ফি মরে ফরের ?

আমি জিপি সার্জারীতে ফোন করি কিন্তু আমি সাহাব্য পাইনা, ফোন লাইনণ্ডলো ব্যস্ত, নো এপোরেন্টমেন্ট, দুঃখিত লেডি বলেন। আমি এখন সাহাব্যের জন্য কোথার যাব ?

আমি চাই আমার স্বাস্থ্য, চিকিৎসা আমার নিয়ন্ত্রণে থাকুক, আমার স্বাস্থ্যে কি যেন সমস্যা, দরা করে আমাকে উপার বলুন, আপনি কিডাবে সাহায্য করতে পারেন ? আপনার স্বাস্থ্য সেবা কি আমার স্বাস্থ্যের জন্য সুপরিকল্পিত ?

এই ঔষধ নিতে, এই ট্যাবলেট নিতে, এই ইনজেকশ্যান, এই অপারেশন, গুধুমাত্র আমি যদি জানতাম এই দিনটির কথা যখন আমার জীবন অসুস্থাতার ছেরে গেছে। আমি কি করতে পারতাম এটা প্রতিরোধ করার জন্য ? আপনি কি করতে পারতেন সাহায্যের জন্য ? আমি এখন কিডাবে এই অসুস্থা জীবন নিয়ে বাঁচবো ?

যদি এটি ভালো কাজ না করে, ডাক্তাররা ফোন দিবেন,
কে ভাবছিলো এই দিনটি আসবে।
কম্পিউটার আমার গঙ্প বলতে পারে, আমি কে, আমার স্বাস্থ্য সমস্যা কি।
আমরা কি চাই কম্পিউটার আমাদের দেখাগুনা করুক অথবা আমরা কি এখনও চাই মানুষ কথা বলুক ?

আমার হৃদস্পন্দন পরিমাপ করতে মোবাইল ফোন.

আমি বাঁচতে চাই আমার নাতি-নাতনী খেলতে দেখতে,
আমি ডালো ও সুস্থ্য হতে চাই, আমার নাতি-নাতনীদের সাথে খেলতে
আমি স্বপ্ন দেখি, অসুস্থ্যতা কোন ব্যাপার নর।
লিডারপুল শহর হচ্ছে আমার জন্য যেখানে আমি এইওলি করতে পারি
সুস্থ্য লিডারপুল ইহাই কি আমি চাই।







# NHS Liverpool Clinical Commissioning Group

### **Community Engagement**

- People with disabilities / sensory impairment / learning disability
- Older people / children and young people
- Asylum seekers and refugees
- BME groups
- People experiencing health inequalities
- Carers
- 11 languages, braille, sign





**GP appointments** - concerns and frustrations over waiting times and challenge of making appointments.



**Out-of-hours** appointments in GPs and hospital requested by many and felt important to increase access and reduce pressure on A&E



Poverty stops people accessing physical activities and making healthy choices. Poverty/access to services varies across city and impacts greatly on health.



Mental health - lack of priority for MH, wellbeing, stress - concern about difficulty accessing good mental health services – felt vital issue overlooked in HLP.

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#### Key messages continued...



Better education and awareness raising is needed to improve health, encourage better lifestyle choices and increase understanding of how to use health services appropriately



Health services need easily available interpretation/translation facilities, need to be culturally appropriate and ensure all staff are trained to be sensitive to the needs of different communities.

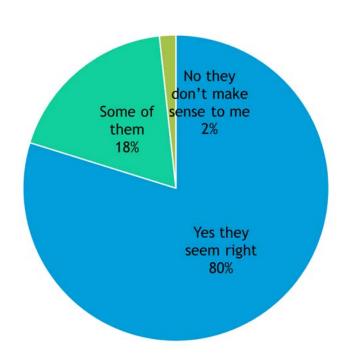


Some frustration at lack of concrete plans and felt statements were vague, no 'how'. Some questions people didn't feel had info to answer.

# Recognising the issues facing Liverpool

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- Overall people agreed
- BUT Elements missing
  - mental health low HLP priorities
     limited funding & support available
  - poverty and health inequalities
    - social issues
    - services dependent on postcode
    - poor diets and poor choices leading to ill-health
- Those who were unsure felt didn't have enough information to answer





### Benefits for People



- a) Liverpool people should enjoy better health equally across the city and similar to other parts of the country.
- People will find better support for staying healthy and avoiding ill health
- c) Feel supported and empowered to take control of their health and in particular a better quality of life for people with long term health conditions and mental health issues.
- d) More assessments, tests and treatments available nearer to people's homes
- e) Person-centred care more bespoke, effective and joined up care between health and care professionals across different organisations
- f) People should receive the best standard of care wherever they live in the city, wherever and whenever they receive care and treatment

- g) Patient experiences of care should be consistently high in hospital and community settings
- Emergency and hospital services will be coordinated and delivered in ways that achieve the best results
- i) Liverpool's health and care system will be ready and able to support the next generation
- Liverpool people will be involved in continuous improvement of prevention, diagnosis, treatment and care services.



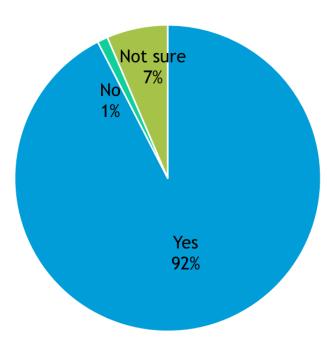
#### TRANSFORMING THE HEALTH OF OUR CITY

بهداشت لیورپول– بر ای بهبود بهداشت شهرمان



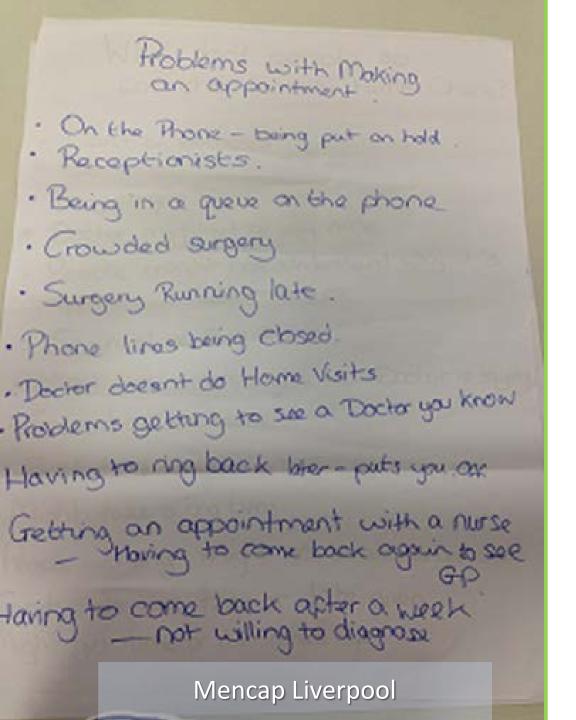
#### 92% Support Benefits...but

- Mental health prioritise and improve
- services must be patient centred and empower the individual to take control of their health
- services can disempower people
- need joined up approach to healthcare
- health education important included in schools
- concerns around funding and possible cut backs
- those unsure were so due to lack of info in statements



"Mental illness is the most prevalent, lifelimiting condition and warrants priority attention. Prevention and early intervention for young people, in particular, should be prioritised"





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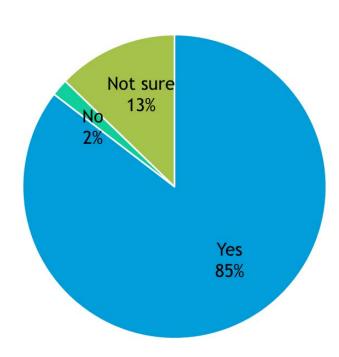
Problems with GP access noted by all participant groups, including people with Learning Disabilities. This group also recognised sometimes people will go straight to Hospital, or won't go to a GP with mild symptoms because of difficulties making GP appointments.



# 85% agree services need to change - and commented...

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- improvements in waiting times and appointment systems at GP surgeries with longer opening times
- mental health needed to be included would have a positive impact on other areas of an individual's life
- variations in both quality of care and access to services depending on where you live
- lifestyle awareness and incentives could help
- for minority who disagreed and commented, lifestyle changes more important than change to services
- for those unsure they wanted more information before they could decide





#### Programme Level Feedback



"Not just physical activity other factors have to be considered, loneliness, deprivation, housing conditions, support mechanisms. More to be put into place to enable individuals to sustain connections and maintain healthy lifestyle which will combat illness and mental health state. The environment around us dictates our lifestyle."

- 70% see Living well as essential to improve health
- 92% supported proposals in the Community programme
- 52% saw Digital essential to improving health
- 85% supported the Hospital proposals 13% unsure
- 94% supported the proposals for Urgent Care



### Implications and Risks



- More detail needed in all proposals to enable transparent engagement
- Concerns about HLP applying a central cuts and privatisation agenda
- Poverty, stress and anxiety noted to lie behind a lot of unhealthy choices - diet noted by many but absent from HLP
- Social factors influencing health -seen as hugely important emphasis needed on how social model of health included in HLP
- Education and awareness needed in every level of all 5 areas –
  interest in public and personal responsibility and joining with NHS to
  improve health
- Avoid inference older people present a burden
- Concerns expressed about changes to Liverpool women's
- Training for people to be culturally, age and disability sensitive and aware is required to enable access / better experience
- Interpretation and translation offered by providers has been described as a significant barrier in this and other engagement activity and needs to be systematically improved

# Programme implications and risks



- GP access and appointment systems will be high interest - need to review what 7 day access proposals likely fit with people's expectations and needs
- Evening and weekend appointments seen as important for primary and secondary care to improve and to reduce impact on A&E
- More priority needed on mental health, wellbeing and stress - needs to come through in all 5 areas
- Digital aspect of plans least consistent views fears are that technology would replace human contact and that health records won't be safe

#### Recommendations



- HLP programme boards consider detailed feedback and recommendations and make adjustments to plans
- 2. More detail essential for all areas subject to engagement Jan-Mar
- 3. All programmes to review contribution to improved mental health, social model, education and awareness
- 4. Review outcomes against benefits include health inequalities
- 5. Improve how explain tackling health inequalities
- 6. Articulate positions around cuts, privatisation and personal ownership/control of health
- 7. Articulate hospital vision more clearly esp. re women's
- 8. Review translation and interpretation offered by providers via contract meetings/other means
- 9. Greater training in all care providers re appropriate support for equalities groups
- 10. Need to understand and record stress/anxiety / wellbeing and link to social model of health/neighbourhood collaborative

- All HLP programme boards to consider detailed results of engagement for their area Nov/Dec.
- Appropriate action to be taken to respond to issues raised in programmes
- Findings circulated to participants and other stakeholders
- December GB consider proposals for HLP engagement Jan-Mar 2016
- Engagement starts 16<sup>th</sup> Jan

