Healthwatch Cambridgeshire and Peterborough
Information and Signposting Report

Purpose

1. This report sets out background and themes from the information and signposting service during 2019-20 (to end November 2019) and identifies current challenges.

Key issues

2. Information and Signposting activity and themes are summarised in sections 8-13. Our most common contacts are for concerns and complaints. This is reflected in who we most refer people to.
3. Engagement events bring in the majority of experiences, see sections 14-15.
4. What people contact us about, and how we support people is in sections 16-17.
5. Service development is covered in sections 18-20.
6. Challenges for the service are in sections 21-25. These include a lack of information about patient pathways, consent issues and responses to patients' concerns and complaints.

Action required by the Board

7. The Board is asked to:
   - note the report.

Author

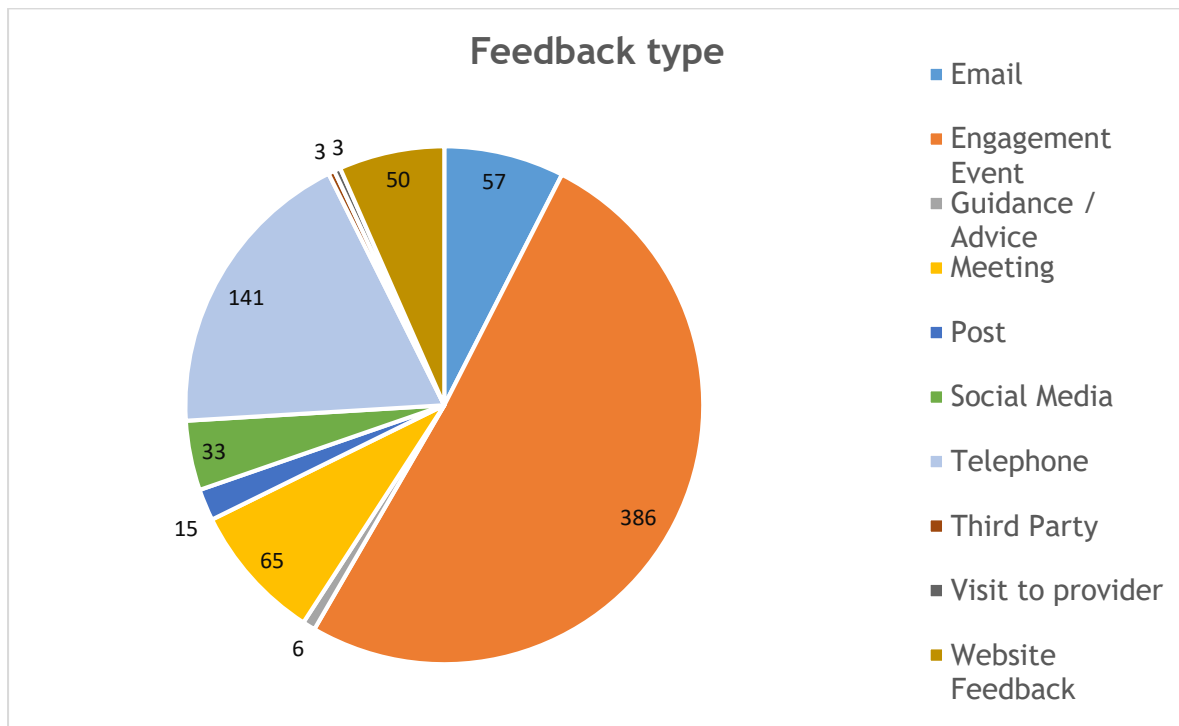Julie McNeill, Information Manager

15th January 2020

Experiences and signposting activity during 2019-20

8. From April 2018 onwards, patient experiences have been recorded on the Healthwatch CiviCRM system.   This data is presented in the Chief Executive's report every two months.

9. Enquiries continue to cover a broad sweep of services

10. Directors are sent a regular briefing reflecting themes. Staff, Directors, commissioners, providers and regulators also receive regular reports of summarised and anonymised feedback.

11. Themes identified include some which we identified last year as well:

   - Gaps in services: People find they are 'too ill' or 'not ill enough' to access existing services. Particularly a problem in mental health services.
   - Difficulties in seeing GPs in a timely fashion.
   - Lack of NHS dentists, and concerns about quality of NHS dental work and the NHS/private divide.
   - Increase in people facing long waits for treatment in some services, often with poor communication from providers.
   - Problems with admin processes leading to inaccurate appointment information.
   - Patients waiting a long time for a response to complaints, and not being kept sufficiently informed.
   - Lack of capacity in domiciliary services, impacting on peoples' experiences of care and in some cases resulting to unsafe discharge.

12. The most common query was from people wishing to make a complaint. Also, people often ask how to get access to medical records. People wanted to understand what information had been recorded in their records, whether that information was correct, and what could be done if it was not correct.

13. From April-Nov 2019, 351 signposts were made to organisations or websites. The three highest number of signposts were to these organisations:

Patient Advice & Liaison Services/ Patient Experience Team from each NHS provider/CCG/NHSE Customer Services	63
NHS website (formerly NHS Choices)	24
Total Voice (provide advocacy)	22

How people contact us about their experience

14. The pie chart illustrates the various ways in which people share their story with us

Feedback type

Legend
Email
Engagement Event
Guidance / Advice
Meeting
Post
Social Media
Telephone
Third Party
Visit to provider
Website Feedback

Values shown: 57, 386, 6, 65, 15, 33, 141, 3, 3, 50

15. The use of a standard survey for engagement events provides most of the feedback. We are working with the engagement team to ensure that the information people share in this way is of a good standard. Sometimes we have not been able to log the information as we cannot link it to a specific service.

What people contact us about

16. There are a wide range of issues people contact us about. Some are very complex, involving a range of services and it can be difficult for people to sometimes identify what they want to sort first.

17. Although we do not do casework, we have, on occasions, provided a little bit more support or made direct contact with service on someone's behalf with their consent. We do this when:
   - we judge the situation is particularly urgent
   - the person is needing a bit of extra help to navigate the system
   - much wider/more serious system issues are indicated

Information and signposting service development

18. We have trained volunteers around good practice in obtaining consent when collecting stories from people. More work is planned to ensure all volunteers can benefit.

19. Anne Aldred, the Information and Signposting Officer, has been attending a small number of engagement events to trial the benefits of providing information and signposting 'on the spot'. This will be developed further in 2020.

20. Progress has been made in capturing feedback from group settings such as Community Forums.

Challenges

21. Complex commissioning arrangements make it unclear who provides or commissions a service. Patient 'pathways' are often spoken about but finding out the detail is tricky. If we do not know what should happen, it is difficult to judge if a patient's experience is the norm.

22. We hear from patients who want services to improve for others but are reluctant to raise issues whilst undergoing treatment. Sometimes responses from PALS are not as helpful as people hope for.

23. Some people wait a long time for a response to their complaint, and sometimes they are not being kept informed about the progress of their complaint.

24. Our changes to consent around GDPR means that on occasions we cannot log information because people have withheld consent.

25. It is not always clear how much of a direct impact on service change we can legitimately claim.