

Healthwatch

Isle of Wight

Consultation feedback

A strong voice for local people on health and social care issues.



We want to build an organisation that people value and use.

October 2012

Introduction

In March 2012, the government introduced a new law (the Health & Social Care Act 2012) requiring each local authority area to set up a new organisation called Healthwatch, by April 2013.

Healthwatch Isle of Wight will help provide information and advice to Islanders about health and social care services, signpost people to services - so they understand the choice of care available - and involve people to help improve and shape these services in the future.

Healthwatch Isle of Wight will effectively act as a consumer champion, making the views and experiences of the local community known to the people making decisions about these services, both locally and nationally.

Some of the functions and roles that Healthwatch Isle of Wight will need to perform have been set out in law but the government has also said that it wants local authorities to be able to make some choices of its own about how it sets up the new organisation so that it can meet the needs of its local community.

Before we started looking for someone to set up Healthwatch Isle of Wight we asked the public for their views on how we can make sure this new organisation is something that people on the Island both want to use and value. The consultation document advised what Healthwatch Isle of Wight must do and invited the public to tell us their views about how this important organisation should be developed.

The consultation took place between 15 June and 16 July 2012. There were 275 responses received and this report contains the results of the consultation.

Key findings

Respondents were evenly split on whether they had ever tried to find out information and advice about health and social care services on the Isle of Wight with 50% saying 'no' and 47% saying 'yes'. Of those that had, the majority visited their GP (50%), searched the internet (43%), asked family and friends (27%) or visited hospital (24%) for information and advice about health and social care services. Of those that had found information or advice, the majority (74%) found it useful. They particularly found GPs knowledgeable and received good advice and information from family and friends, up to date leaflets and the internet.

When asked about what needed improving it was felt that information on websites was not easy to find, should be more up to date, in a style that is easy to read and understand without any jargon. There also needed to be more up to date leaflets without jargon in GP surgeries. Telephones needed to be answered by someone who knows about the services available or can signpost to the relevant service. They should have a polite manner and treat callers with respect and return calls when they say they will. Hospital and doctors waiting times needed to be improved and there should be a central point for advice and information.

Those that had not tried to find out information and advice about health and social care services on the Isle of Wight said that if they needed to they would go to their GP (68%), search the web (24%), visit a nurse (22%), ask family and friends (18%), go to the library (12%) or contact the council (11%).

Respondents were split on whether they felt that there were gaps in the information and advice currently available with 30% feeling there were gaps, 30% feeling there weren't any gaps and 40% didn't know.

When asked what they would like to see in place, respondents said more easily found, up to date, good, easy to read, consistent information and advice. There should be a one stop shop with an accessible information point (physical and on-line) providing a seamless service. It was also suggested there should be drop-in centres, a hot line with one phone number for all information and services which is manned by someone who has the correct, up to date information and advice. There should be a website with easy to access NHS information and services and a Healthwatch rep/advocate that you can see face to face.

When asked how they would ideally like Healthwatch Isle of Wight to provide information and advice on local services the majority advised through local GP's surgeries (53%), websites (48%), by post (47%) or by leaflets (41%).

The sorts of information and advice needed included details on what care and services were available, particularly dementia and respite care, how to complain, who to speak to, up to date information and leaflets, details of social activities and community groups, how to find information, signposting and face to face sessions.

The majority (67%) thought that the vision for Healthwatch Isle of Wight was right. Comments included that it would become the central hub for involving Islanders in health and social care issues on the Island and a central point of contact for people needing information, support and advice.

Respondents thought that the right mind-set had been adopted and that it had been realised there is a need for a much more open and accountable approach to the Island's health and social care requirements. They said that it was a good idea and would benefit others, involve lots of different groups supporting each other and sharing information. A central point of contact needed to be well advertised to allow people to know where to go to get information, help and advice or signpost where to go. However, this would only be beneficial if it was kept up to date and involved people who knew what they were talking about.

It was felt that voluntary and community organisations should work together in one building and share resources, information, values, build on knowledge and provide a seamless 'one stop shop'. It was also suggested that representatives should visit organisations to spread the word and network.

The majority of respondents would like to be involved/have their views gathered via surveys, the web, including posting views on-line, by attending drop-in sessions, face to face meetings, public meetings, through the post and by volunteering.

When asked what would make them want to share their views the majority said it would be because of needing advice and information (44%), a bad personal experience (39%), a good personal experience (32%) or being able to influence services (29%). In order to be involved they would require training, information about the subject matter, support to develop skills and experience.

When asked about what they would want to do as a volunteer, the majority (59%) didn't want to get involved. Of those that did, 18% would like to go out and about talking to people about their health and social care experiences, 15% would like to provide information and advice, and 14% would attend meetings to hear about local services plans or be an advocate.

The majority (59%) feel unable to have their say on local health and social care services at the moment, as they do not know who to contact in order to have a say or do not think anyone will listen.

The majority of respondents (69%) or members of their family had not used advocacy services. Of those that had, the majority had used the Advocacy Trust who they found very good, helpful and efficient. Some had used Age UK but had to call them a few times to get a response and found the service not to be as quick as they would have liked. Those that had used ICAS found them excellent, giving totally independent advice with no outside influences.

When asked about suggestions for improving advocacy services those who were unhappy with the service received said there needed to be more staff, that calls should be returned when promised and that they needed to operate within better time limits to make the service more efficient. Comments from those who were happy with the service received felt there should be additional advocates to help more people. They should make sure people know about the services available, offer larger print literature, have a one-stop shop for immediate advice, better training in information and advice for the advocate, staff that know what they are talking about, use totally independent people who are trained on the job and are also non judgemental, and with access to the information needed.

The majority of respondents (61%) felt that the NHS complaints advocacy should be a separate service. Comments included that it should be completely independent from both direct and indirect influences and had the makings of a strong and independent voice for health and social issues providing it values the independence from government and NHS/PCT influence. Also if complaints are dealt with independently it would lead to an improved complaints handling process.

Summary

When people want to find information and advice about health and social care services on the Isle of Wight they tend to visit their GP, search the internet, ask family and friends or visit the hospital.

Respondents would like to see any information on websites or leaflets being easier to find, more up to date and in a style that is easy to read and understand, without any jargon. They would like a central point of contact providing a seamless service for advice and information with one phone number to access all information and services. Respondents would also like this to be answered by someone in a polite manner, who has correct, up to date information and advice, or who can signpost to the relevant service and return calls when they say they will. It was also suggested there should be drop-in centres, a Healthwatch Isle of Wight representative/advocate that can be seen face to face.

Respondents would prefer Healthwatch Isle of Wight to provide information and advice through local GP's surgeries, by a website, by post or by leaflets. They particularly wanted details of dementia and respite care, how to complain, who to speak to, details of social activities and community groups, how to find information, signposting and face to face sessions.

Respondents thought that the vision for Healthwatch Isle of Wight was right but that the service would need to be well advertised and involve knowledgeable and experienced people. One of the barriers to people using the current services is that they do not know who to contact to 'have their say'.

It was felt that voluntary and community organisations should work together and that Healthwatch Isle of Wight staff/volunteers should visit other organisations to publicise their work and develop close working relationships.

The majority of respondents felt that the NHS complaints advocacy should be a separate service, staffed by knowledgeable advocates and totally independent of health services.

Healthwatch Isle of Wight should be one single place with a seamless service where Islanders can go to get advice and information.