

Patient Revolution 2015 – key themes – web copy

The raw feedback we collected at events we held in Clare, Bury St Edmunds and Newmarket on 15 July have been put into key themes. Our intention is to look at all these areas carefully, and prioritise those we can do. We will report our progress against these themes in January 2016.

The major topics this year were:

- 1. healthcare in the community**
- 2. caring for the elderly (particularly those with dementia)**
- 3. better joint working, including between hospitals, GPs and the voluntary sector**
- 4. access to services out-of-hours**
- 5. sharing information**
- 6. mental health**
- 7. encouraging a healthy lifestyle**
- 8. use of resources**
- 9. better use of technology**

1 Healthcare in the community

- Nurses need support as workloads are high
- More time could be allowed to see patients or travel
- Patients need more continuity
- Bring more services into the community and communicate that
- More clinics in the community (i.e. x-ray and ultrasound)
- Need care coordinators for when leaving hospital
- Investigate access to alternative therapies, i.e. acupuncture

2 Caring for the elderly, particularly those with dementia

- Peer support makes it easier, such as a buddy system
- Should not keep reminding patients of their condition
- Need a one-stop-shop
- More information on how to recognise dementia
- Patients should have access to joined-up approach following diagnosis
- Patients need care for themselves, not individual specialities
- Care homes should consider complex needs, family, and unnecessary hospital trips
- Investigate using Skype to talk to health professionals
- Alarm necklaces are very useful – should be rolled out further
- More work could be done to reduce prescribing in care homes
- Staff in care homes cannot administer insulin to diabetics
- Having animals in care homes or own homes can be therapeutic and reduces loneliness

3 Better joint working

GPs

- Reduce times waiting for appointments
- Use Skype/Facetime to reduce appointments
- Patients' needs could be met with the least number of visits – single visit should cover multiple complexities
- Improve working with hospital staff
- Improve mental health training
- Mental health support is inconsistent and medication is prescribed too soon
- Promote patient-led peer groups
- Lack of GPs in Haverhill
- Promote mental health link worker

Hospitals

- Appointments do not match the needs and distance of the patient – can be given 7am appointment when they live 20 miles away and rely on public transport
- Share information with the patient
- Improve working with GPs
- Stop using jargon
- Ensure people are well fed in hospitals
- Staff should put themselves in patients' shoes
- Need better communication at discharge and a single point of contact
- Healthcare professionals should also be encouraged not to smoke, eat unhealthily or drink

VCS

- Further improve working with voluntary sector
- Can help to train NHS staff (i.e. Mencap could train GPs on mental health)
- Support VCS to identify people's needs

4. Access to out of hours services

- Support is not available locally – involves travelling
- Improve OOH coverage in every town
- Little sexual health help provided
- Should be able to access clinics at unsociable hours
- Increase staffing budget

5 Sharing information

- Patients need reassurance about confidentiality
- Records should be shared electronically
- Patients should have total access to their record
- Children need to be taught more about healthcare and conditions
- Improve working across county boundaries and other agencies
- Records should be shared electronically but different systems don't talk to each other

6. Mental Health

- Link workers should be accessible through GP and part of wellbeing contract
- Use voluntary and charitable sector better
- Improve understanding of mental health within the NHS
- Make sure those with learning disability have improved continuity
- Explore recovery colleges
- Reduce stigma and give patients more confidence to share their stories
- Improve young people's resilience
- Patients should be able to self-refer to link workers

7. Healthy lifestyle

- Young people need to be taught about healthy lifestyle
- Not enough interaction between schools and NHS
- People should be encouraged to do things that benefit their health – medication is not always the answer
- Self-management is important
- Patients need to have health goals

8. Resources

- Improve communication on what is spent and what the costs are
- Resources should be targeted at public health needs
- Ensure more prevention rather than cure, and more education
- Reduce wasted medications
- People must take responsibility for themselves
- Missed patient visits waste a lot of resource
- Improve communication and sharing between different services
- Support work to improve transport

9. Better use of technology

- Improve training for all to identify deterioration in those they're caring for
- Promote self-care apps
- Skype/Facetime to reduce GP appointments
- Support package should accompany Skype and be used for urgent and acute care
- Social media to encourage peer support – educate older people to use
- Social media to reach young people and address cyber bullying
- Virtual clinics