

# Public views and experiences to inform the NHS Long Term Plan in Northamptonshire

## Summary version

Healthwatch Northamptonshire and  
Northamptonshire Health and Care Partnership

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September 2019

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## Background

The NHS has produced a Long Term Plan, setting out all the things it wants health services to do better for people across the country. For these plans to work, the NHS needs to shape local plans based on local needs.



The purpose of this report is to inform local health and care organisations about what people in Northamptonshire think and feel about local NHS services and what improvements could be made to how these services are delivered in the future. It draws on comments and feedback gathered at local events, including a public engagement event held jointly with Northamptonshire Health and Care Partnership (NHCP), and through responses to a survey that asked ‘What would you do?’ to improve services and inform the local plans. We heard from 300 people about what they wanted from local services in Northamptonshire.

# What matters most to people in Northamptonshire?

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# What matters most to people in Northamptonshire?

The key issues people identified across all themes were information/communication, access to services, community services, support and personalised or person-centred care

## *Information and communication*

- + Both the need for better communication between services and better communication with patients/the public was highlighted across all areas and conditions.

## *Access to services*

- + Faster access to services, particularly GP appointments, was the most important issue for survey respondents.
- + Those who spoke to us about mental health and autism also highlighted difficulties they had.

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# What matters most to people in Northamptonshire?

## *Community*

- + Across all themes, the **value of communities, local initiatives** and having **care and support close to home** was highlighted, particularly to help people stay well and age well.
- + People also wanted to be able to **stay in their own home** for as long as it is safe to do so, and felt that it was important that there should be **more care at home or close to home**.

## *Support*

- + Some people with a specific condition felt they **lacked support** and told us about having to **actively seek** advice and support.
- + Again, those talking about **mental health and autism** did not feel the support they received when they first tried to get help met their needs.

## *Personalised and person-centred care*

- + All themes mentioned the importance of caring for the whole person, treating them as individuals and having people's wellbeing at the centre.
- + People said that they valued having choice and a say about their care.

# What changes do people want to see? - The 'Big Ideas'

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# What changes do people want to see? - The 'Big Ideas'

The following suggestions for improvement were identified through our engagement activities:

## *Information*

- + Improve the flow of personal health and care information by introducing a 'health and care passport' to make it easier for people to access the right care in the right place at the right time.
- + Provide a single directory of local services, groups and activities that can support people's health and care needs, to be accessible to all (not just online).
- + Coordinate care to enable patients to move seamlessly through and between services and make pathways easier to understand.

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# What changes do people want to see? - The 'Big Ideas'

## *Community support*

- + Provide advice and support to guide individuals through their health and care journey and to help them access a range of services, according to individual need and choice. The role could be based on the wellbeing navigator or community connector roles that already exist locally.
- + Build 'buddying' networks linking older people in good health with those in need, providing friendship as well as support.
- + Develop community hubs that provided information and signposting to local services, both face-to-face and on the telephone.

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# What changes do people want to see? - The 'Big Ideas'

## *Carers*

- + Improve support for carers, who often have health needs of their own, to relieve pressure on the health and care system. Commission a county-wide carer support service based in local community hubs.
- + Ensure the voice of carers is heard and included in decisions about people's health and care.

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# What changes do people want to see? - The 'Big Ideas'

## *Personalised care*

- + Focus on the needs of the whole person to support people to stay well and live well, including physical and mental wellbeing and nutritional support.
- + Develop personalised mental health care plans to empower individuals and prevent crisis situations.
- + Provide mental health advocacy to aid people's access to health and non-health services.

## *Engagement*

- + Continue to engage with service users and the public to ensure they are involved with shaping improvements to local services.

# Watch an animation of the Big Ideas



[https://youtu.be/7z\\_qe0gfaAM](https://youtu.be/7z_qe0gfaAM)

# What we did

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# Joint engagement

With the Northamptonshire Health and Care Partnership we agreed to gather the views of people living in Northamptonshire around the key Partnership themes of ‘Choose well, Stay well, Live well’.

We asked people:

- *What would you do to create a positive lifetime of health, wellbeing and care in Northamptonshire?*
- *How can services make it easier for people to take control of their own health and wellbeing?*
- *What is important to you for your care and for the care in your local community?*



What does this mean to us?

**Choose  
well**

**Stay  
well**

**Live  
well**

It's about your journey and experiences of care and support

To get to  
our vision  
for the  
county:

**A positive  
lifetime of  
health,  
wellbeing  
and care in  
our  
community**

Taking action before  
things happen

Making sure the right  
services and the right  
choices are available to  
help us look after our  
own health and prevent  
illness

Understanding the  
causes and getting the  
right treatment

Putting the right health  
and care services in  
place locally to detect,  
diagnose and treat  
illness as early as  
possible

Keeping you well  
supported and cared  
for

Providing the right care  
and support in the right  
place to help us to  
manage our health as  
we get older or live  
with long-term illness



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# Joint engagement event

We did this by:

1. Holding a joint community and stakeholder engagement event for the public and professionals. This event focused on the Health and Care Partnership Primary, Community and Social Care workstream priorities and certain conditions highlighted in the NHS Long Term Plan, particularly:
  - *Older age/ageing well*
  - *Care in my area*
  - *Mental health*
  - *Breathing (respiratory problems)*

The event discussions were led to develop headline ‘big ideas’ on how people can be supported to ‘choose well, stay well and live well’ in Northamptonshire.

# Watch the engagement event video online



[https://youtu.be/WMei\\_QAJvC4](https://youtu.be/WMei_QAJvC4)

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# Carers focus group and wider survey

We did this by:

2. Carrying out a focus group on the same priorities with a group of carers.
3. Sharing the two surveys used across the Healthwatch network nationally with as many people as possible.
  - *General survey - What would you do to give people more control of their care?*
  - *Survey for people with specific conditions - What would you do to give people better support?*

# Share your views and help make local NHS services better



**whot**  
would **you** do?

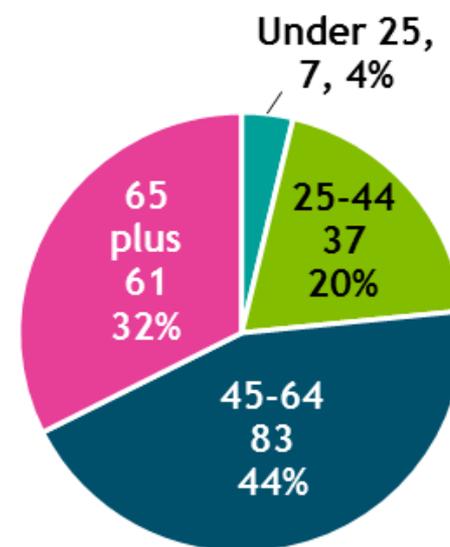
# Who we heard from

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# Who we heard from

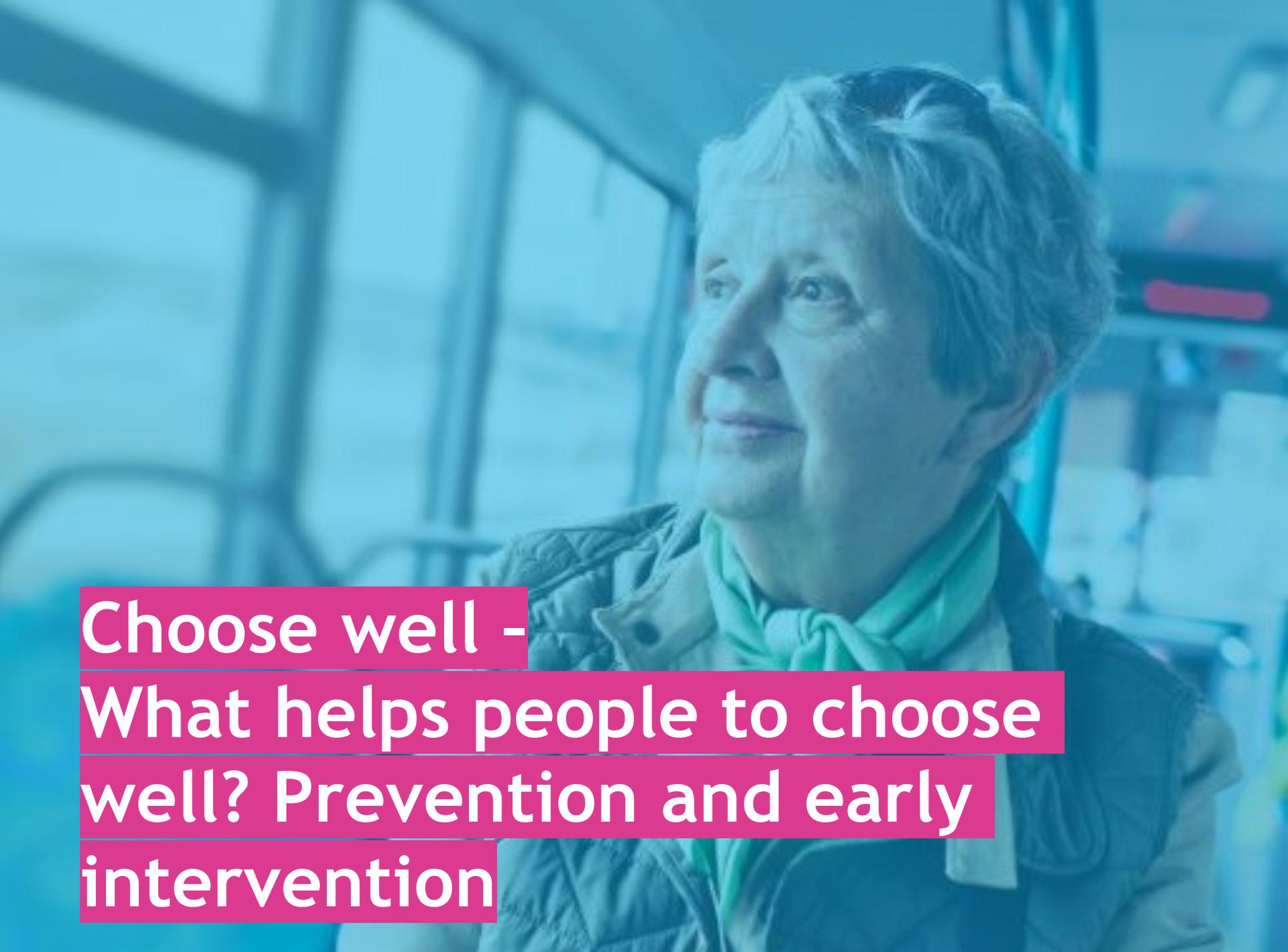
In total we heard from nearly 300 people:

- + 189 survey responses (143 general, 46 condition specific).
- + 88 engagement event attendees (members of the public, health and care professionals, Healthwatch Northamptonshire and NHCP staff).
- + 20 carers at a group supported by Northamptonshire Carers.
- + 77% of the people who completed a survey were age 45 or above.
- + 34% of survey responses came from someone who considered themselves to have a disability.
- + 18% of survey respondents said they were a carer.
- + 73% of the survey responses were from women.



# What we heard in more detail

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**Choose well -  
What helps people to choose  
well? Prevention and early  
intervention**

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# Choose well

## *What works well?*

- + People at the engagement event told us that the care they receive through the NHS is ‘generally good’.
- + They highlighted **technological developments** that make it easier for people to book appointments online and to support people to live independently in their own homes (e.g. personal alarm services).
- + People talked very positively about **supportive networks in some communities**, such as Rushden and Moulton, where the **voluntary sector organisations signpost people** effectively to the services and support they need.

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# Choose well

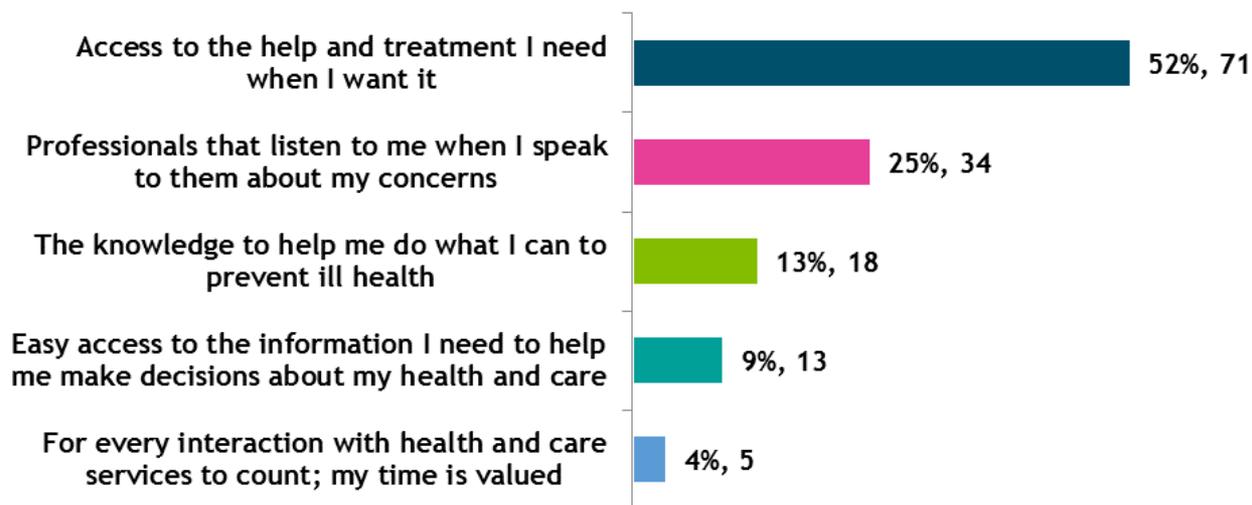
## *What could be better?*

- + A **directory of services** and **centralised information system**, which patients, professionals and the voluntary sector had access to. The directory should include county-wide and local services, and support should be available to help people use a directory.
- + **Community connectors** could play an important role in linking people to services and reducing social isolation.
- + **Access to services**, particularly **GP appointments and referrals to specialists**, was the biggest issue faced by survey respondents. Some people with a specific condition felt they **lacked support** or were not followed up on and had to **actively seek it**.
- + Maintaining and caring for the **whole person** to ensure continuity within their long-term care and ensuring all have access to patient records through a **‘patient passport’**.

# Choose well

*“Being able to access GP appointment within an acceptable timeframe. Having to deal with the ‘care navigation system’ for appointments is stressful and deflects me from seeing who I need for my complex medical issues. I manage routine coughs and colds, etc. myself but when I do need my GP, it’s a series of hoops and barrels to get through. And often not successful, which results in seeing a GP who is unfamiliar with my history. Previous system was fine.”*

What is most important to you to help you live a healthy life?





**Stay well -  
What helps people to stay  
well? Assessment, diagnosis  
and treatment**

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# Stay well

## *What works well?*

- + At our engagement events, we heard about improvements to **diagnostics and patient self-care**.
- + **Technological advancements** were welcomed, although it was pointed out that some developments are **not accessible to all**.
- + Being able to **access support from other healthcare professionals at the local GP surgery** was another positive development that people valued.
- + People with specific conditions gave some examples of having received **prompt and positive treatment**.

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# Stay well

## *What could be better?*

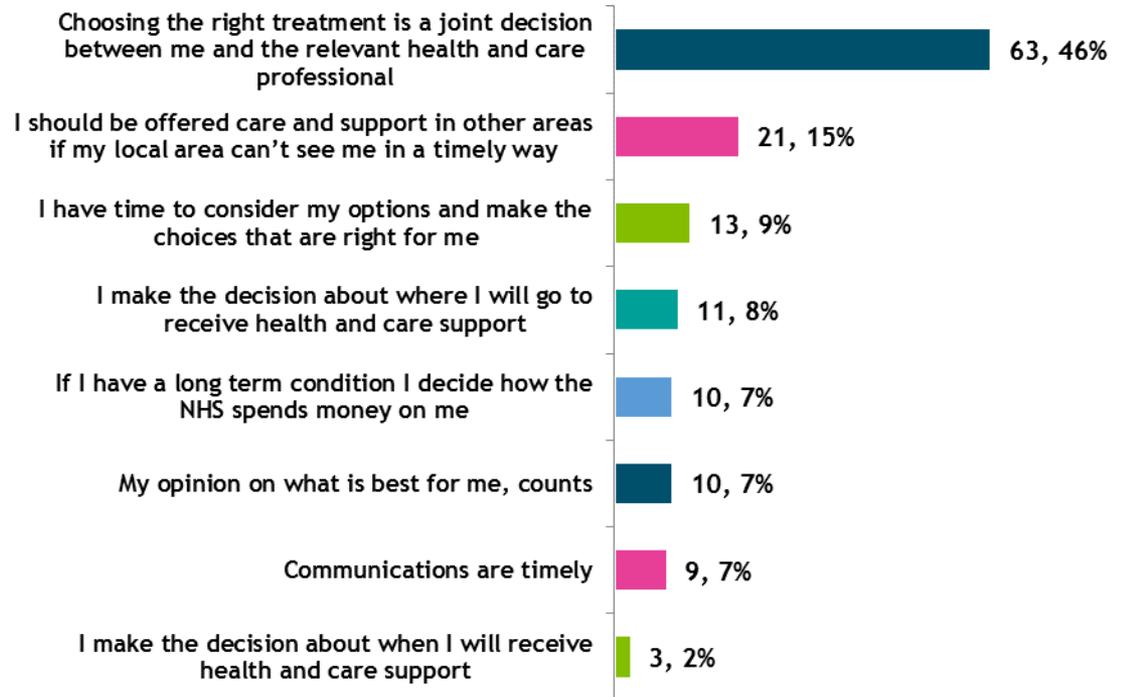
- + Again, people at the event suggested **better information about services**, such as a county-wide facility which can signpost to services and social support.
- + A **shared care record** or ‘health and care passport’ that an individual can hold and can be accessed and understood by all relevant parties and **better communication and coordination between services**.
- + The needs of patients should be fully understood, and they should have a **choice** and be allowed to **move with ease through systems and services**.
- + **Individual care plans** could be used to avoid crisis situations, and people should be treated holistically with **wellbeing** at the core of health and care.
- + **Community hubs** that could serve as a central point where people can go to meet other and understand all services available to them.
- + Survey respondents said they want to be **involved in decisions** about their treatment, receive **timely communications** and have **easier and quicker access** to services.
- + Some people suggested having **longer appointments** so they could be listened to. There were some suggestions for **more follow-up** when it came to ongoing support.

# Stay well

*“Being referred to the right place in a timely manner, not waiting until you get worse and then sending you somewhere.”*

*“Communications between services and departments needs to be better. Too often the patient is reliant on themselves knowing specific information to aid their healthcare professional, and this information should have already been shared between services.”*

## What is most important to you to manage and choose the support you need?





**Live well -  
What helps people to live  
well? Ongoing care and  
support**

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# Live well

## *What works well?*

- + People at the engagement event were able to cite examples of good ongoing care and support, particularly **peer support** for people with mental health and breathing conditions that can inspire and encourage recovery.
- + The best examples of good practice were where **communities and professionals are working together, with voluntary sector organisations** playing an important role, for example in making contact with older patients following their discharge from hospital.

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# Live well

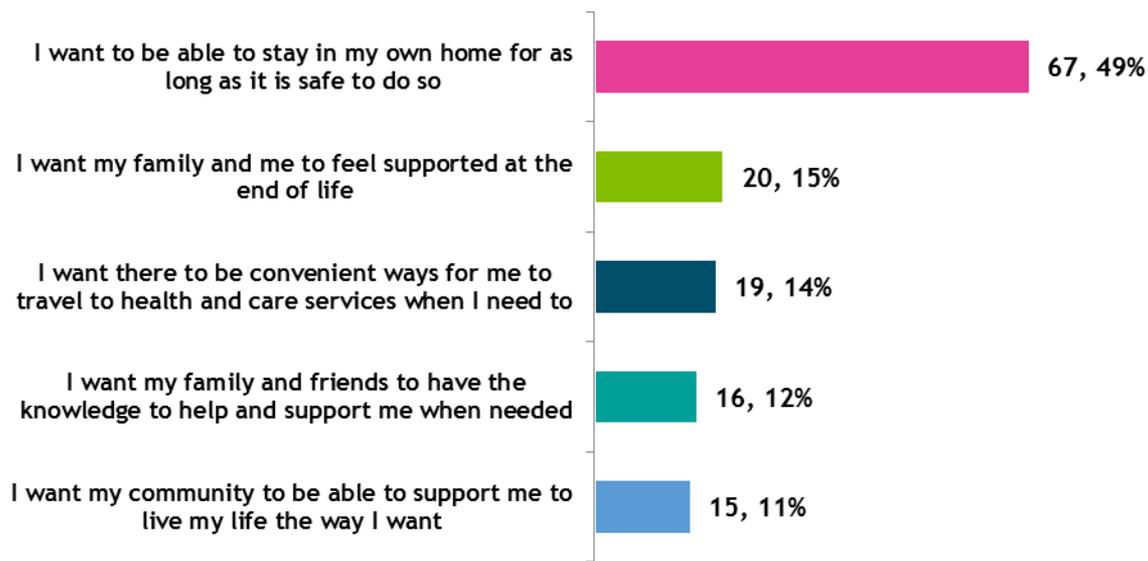
## *What could be better?*

- + Again, **centres** that could give **information and advice**, including the ability to **triage** people, using the right people at the right time, would help people, as would a **single directory of services**.
- + **Care coordinators** and **health and care passports** would also help people to live well.
- + Building **befriending** and **'buddying' networks** within communities would help people support each other and connect with local services.
- + Having **advocates** speak on behalf of individuals across the entire 'system', including health, social care, Department of Work and Pensions, police, etc. could help support many people who are struggling with mental health and help them gain control of their lives, ultimately lowering the risk of crisis.
- + It was also felt important to ensure that people have **choices and a say** in their health and care services.
- + Survey respondents thought that being able to **stay in their own home** for as long as it is safe to do so was important and that there should be more **care at home, community support initiatives** and **information**.

# Live well

*“Older people need contact with the outside world especially as many are women living on their own and may have family abroad. Cutting services to rural communities for transport, for example, due to money saving is a mistake if you want our older people to be connected... Loneliness caused by isolation is one of the biggest problems for older people who live in rural, cut-off communities.”*

**What is most important to you to help you keep your independence and stay healthy as you get older?**



A woman with long dark hair and glasses is sitting at a table in a meeting. She is looking to the left with a thoughtful expression, resting her chin on her hand. The background shows other people in a meeting setting, slightly out of focus. The entire image has a blue tint. A pink rectangular box is overlaid on the lower left side of the image, containing the text "Mental health" in white.

**Mental health**

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# Mental health

## *What works well?*

- + **Crisis cafes** and contact telephone numbers were highlighted at the engagement event as something that helped support people with a range of problems, as did a **listening service** that is available for people who are anxious when visiting a GP practice.
- + It was thought that **social prescribing** would help reduce social isolation and **voluntary groups** frequently helped people into work or to feel they had a purpose.
- + The county **suicide review and prevention group** was also mentioned as a positive thing.

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# Mental health

## *What could be better?*

- + People told us that it was **difficult when seeking help** for mental health issues, often resulting in ‘numerous calls to a succession of professionals in order to obtain the right type of care’. This could be **particularly difficult for people on benefits**.
- + **Carers reported difficulties in accessing appropriate support** at a time of mental health crisis, and feeling unable to keep family members safe in A&E.
- + None of the people with a mental health condition who completed the specific condition survey felt the **support they received when they first tried to get help** met their needs. They also found **access to ongoing support** difficult.
- + We heard about **problems with transitions from child to adult mental health services**, and problems with some **healthcare professionals not having sufficient awareness and understanding** of mental health issues.
- + Access to mental health services should be easier for people using illegal drugs and **waiting times** could be improved.

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# Mental health

## *What could be better?*

- + **Better communication and promotion** of what help is available, including support in **schools**, would help patients choose and receive the right services.
- + Information should have a **clear and simple message**. It was also felt important to make all people aware of how to **recognise points of crisis** and triggers of suicide.
- + **Personalised care** was felt to be important, where professionals **treat individuals rather than conditions**. **Patient passports** would help. Once people find what works for them there needs to be more **support** in helping them to achieve this.
- + People thought that **support should be available locally**, and services that work well should be made available across the county.
- + Services should cater for **different cultural backgrounds**. **Permanent advocates** to speak on behalf of people would help many.

A blurred medical scene with a doctor in the foreground and a patient in the background, overlaid with a blue tint. The doctor is wearing glasses and a stethoscope. The patient is lying on a table, and their hands are visible. The overall image has a soft, out-of-focus quality.

**Breathing**

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# Breathing

## *What works well?*

- + The engagement event highlighted the benefits of people being able to **self-refer** to services and the positive developments in the county where **professionals, groups and other stakeholders are coming together** to look for improvements and **alternative ways** to help people manage breathing issues, some of which are already available.

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# Breathing

## *What could be better?*

- + At the event it was felt that **non-medical support for people would be beneficial**, including intervention services that are led by experienced patients and peers offering support and plans of action. Maintaining **good relationships** between patients, carers and professionals will ensure consistency and continuity of care.
- + **Joined up communication** between services and systems and **information about pathways** and services that steers clear of confusing jargon would help people know what is available. Identifying who is not already connected in communities would help.
- + **Focusing on every part of people's wellbeing**, ensuring flexible services, offering alternative care and support and delivering clear messages to maintain choice and exploring how incentives could help people stay well.



**Ageing well**

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# Ageing well

## *What works well?*

- + At the event the **voluntary sector** was valued for being able to identify the most vulnerable people in communities and help them to stay well.
- + There were good **befriending** schemes, particularly in some rural areas.
- + It was also felt that **acute care** itself was excellent and that **care navigation** at GP practices was valuable (although more was needed).
- + Telecare/personal alarm buttons were given as an example of **technology** that helps older people live independently.
- + The (dementia) **memory assessment service** was also highlighted as something that works well, particularly as patients are assessed at home, as were the new rooms designed for people with dementia in A&E.
- + Phone calls to older people recently discharged from A&E to offer support was another example given of a recent positive initiative.

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# Ageing well

## *What could be better?*

- + A **directory of services** and **online and physical places to access information** (from one source, including social and wellbeing services) were again things suggested.
- + **Social prescribing** and health and care professionals **knowing what services are within the community**, including people who could provide **advice**, would help.
- + A healthy **'age well' information pack** was suggested, which could include information about opportunities to integrate and maintain social wellbeing, as prevention and early intervention.
- + The **community** plays an important role in supporting people to age well and itself **needs support** to meet this responsibility.
- + Wider **wellbeing support** from the county, such as access to parks and recreation, and facilities where people could go for support to directly address social isolation and social prescribing.
- + **Public transport** schemes and services within the community and improved access to technology in towns and rural areas to help people access services.
- + It was felt that **more dementia specialists** were required in hospitals and dedicated commissioning of **paid carers**.
- + Investing in **technology** could also help elderly people live well at home and reduce dependence on carers.



Care in my area

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# Care in my area

## *What works well?*

- + At the engagement event it was felt that **GP support** was generally good, people cited examples of GP practices offering same day appointments, and there had been recent improvements locally in the services available to people as well as the access through technology, such as online booking.
- + There were also examples of **active and caring communities**, where there were opportunities to bring together groups and agencies to jointly support people, and examples of **charities and voluntary sector organisations** having good links and the ability to signpost.
- + At the event **school immunisations** was given as an example of a service with a good structure that was well managed and had good communication.
- + It was also felt that people are taking more responsibility for **self-care**.

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# Care in my area

## *What could be better?*

- + People answering the surveys particularly felt that **access to GP appointments** needed to be improved.
- + At the engagement event, it was felt that **waiting times** could be improved and that more services, such as **podiatry and alternative services**, should be run from **GP practices**, and that access to service should be **consistent** across the county.
- + The importance of looking after the **whole person** and considering all their symptoms was flagged.
- + At the event it was felt that people sometimes **struggled to understand the care choices available to them and how to access them**.
- + They also felt that **information** that GPs had was often out of date and that clinical jargon was used.
- + An **information 'hub' and liaison person** were suggested to explain what services are available and different care pathways, as well as information about patient experience/engagement and events.

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# Care in my area

## *What could be better?*

- + A need for advice and community projects about **healthier lifestyles** was also highlighted, including education for schools and families.
- + The survey and event raised the need for **better communication between services** and departments/teams and **better access to and sharing of patient records** to assist the flow of information.
- + An **integrated care system** and **better partnerships with Third Sector organisations** was also suggested, which could be achieved through social prescribing. **Funding** for the voluntary sector was felt to be vital to support this.
- + Concern about the **isolation of people** without families and those living in rural areas was voiced, particularly regarding them accessing services with a **reduction in public transport** in some areas.
- + A greater amount of **care in the community and care at home** was suggested, including support for carers.
- + Building a bigger and better **sense of community** by maintaining and developing social connectedness was also suggested.



Carers

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# Carers

*Carers can play a key role in supporting people to stay well, access services, and participate in activities and community life. To do this they need to be valued and communicated with. At the carers' focus group, people spoke to us mostly about their experiences or the person they care for receiving healthcare in community settings and acute hospitals.*

## **What works well?**

- + People told us about positive experiences of a prompt response to a mental health crisis by the GP and arrangement of therapeutic input at the patient's own GP surgery. This meant that the person did not need to travel to unfamiliar places, thus reducing the likelihood of further complications.
- + Some carers reported hospitals and social services working well together to ensure there is support for both carer and patient upon discharge.

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# Carers

## *What could be better?*

- + We heard multiple stories of **difficulties around discharge from hospital**, where carers were not fully involved in decisions and where family members were discharged from hospital without proper assessment of their needs or adequate notice to carers of the arrangements.
- + People also told us of problems around medication upon discharge, and how difficult it was to resolve prescription queries or errors made by hospital pharmaceutical services once home from hospital.
- + Among some people there was a lack of awareness of other services available, such as the NHS 111 telephone service for urgent medical problems.

**Autism**



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## In focus - Autism

Only four people completed the specific conditions survey about autism, but their experiences highlighted common difficulties with getting an assessment and diagnosis and ongoing care and support. People felt passed from service to service and it was suggested that services needed to work together better, and recognise the difference between autism and mental ill health.

These experiences mirror the more detailed findings from our 2018 report ([www.healthwatchnorthamptonshire.co.uk/asdandadhdreport](http://www.healthwatchnorthamptonshire.co.uk/asdandadhdreport)) that found the process of seeking a diagnosis of, and help for, Autism Spectrum Disorders and Attention Deficit Hyperactivity Disorder often takes so long and is so fragmented that children and their families are left struggling.

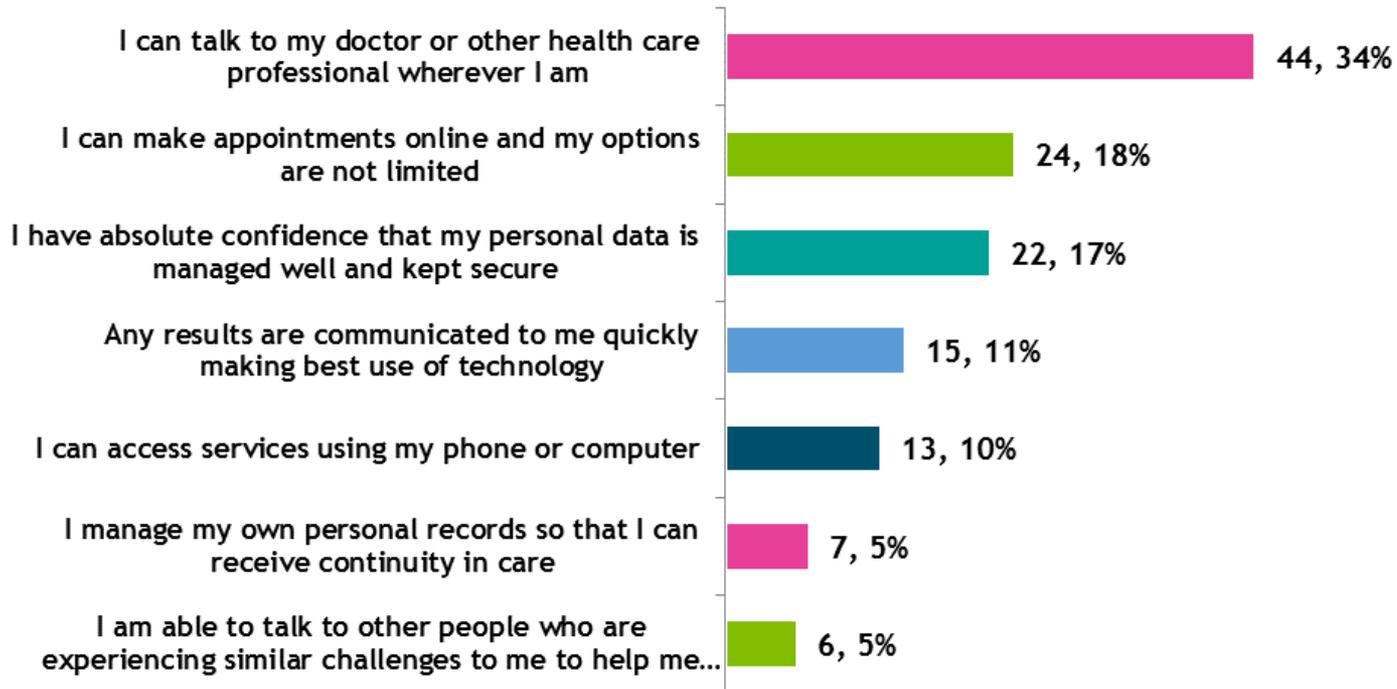


**Engaging people**

# Engaging people in health service delivery

- + When interacting with the NHS, 34% thought that the most important thing was being able to talk to their doctor or other health and care professionals wherever they were.

## What is most important to you when interacting with the NHS



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## What people expect during service change and transformation

- + At our engagement events people told us they want to be involved in conversations about improving health and social care services, and that we needed to maintain the momentum for participation and involvement.
- + We heard that innovations need to be tried and tested fully before being rolled out across the county.

*“I’d rather be invited to a fundraising event, or be asked to plan one in my area to help me feel I’m making a difference than be invited to an event during work hours... What is the agenda, what are the goals from the event, what good would I have attained from taking a day from work, what difference would I have made? Having someone act upon and learn from and promote positive real change is important for me.”*

*“I want an end to initiatives which promise all these things yet only do so on paper. Don’t put them in place unless they are meaningful.”*

# Next steps

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## Next steps - Northamptonshire Health and Care Partnership

*Healthwatch Northamptonshire and Northamptonshire Health and Care Partnership (NHCP) have worked collaboratively to engage on the national NHS Long Term Plan requirements. This included the public engagement event held in May 2019. This listening event was highly successful and provided much insight into people's experiences of and priorities for local NHS and social care services.*

*The findings of this report have been presented to NHCP and below is its response and next steps.*

*Here in Northamptonshire, we're responding to what our local people and stakeholders are telling us about the way in which they want to receive their health and care. We welcome the thorough feedback that this report provides and are working with it as we continue our listening journey.*

*The public views and experiences expressed in this report will, as part of a wider programme of engagement, inform the development of Northamptonshire's response to the NHS Long Term Plan requirements. They give us further valuable insight to make sure that we are all working to address the feedback of our community. This will support us in developing co-ordinated, responsive strategic priorities and objectives across our Partnership.*

## Next steps - Northamptonshire Health and Care Partnership (cont.)

*The “Big Ideas” generated and agreed at the Choose Well, Stay Well, Live Well community engagement event have been shared with colleagues across all NHCP workstreams. NHCP’s Collaborative Stakeholder Forum has taken on the responsibility to ensure that the “Big Ideas” are interwoven with the shaping and delivery of local health and care transformation through the work of NHCP.*

*Conversations and engagement with our community will continue as, together with our stakeholders across the county, we develop our local response to the NHS Long Term Plan, called the Northamptonshire Health, Care and Wellbeing Plan. This will serve as a single strategic plan for the future of health and social care in our county, incorporating a refreshed strategy for Northamptonshire’s Health and Wellbeing Board.*

*During the autumn of 2019 we will provide further opportunities for our community and stakeholders to share their views on health and care in the county and be guided by national, mandated timelines in order to produce and publish the plan.*

## Next steps - Healthwatch Northamptonshire

*Following this successful joint engagement, Healthwatch Northamptonshire will continue to work with NHCP and others so that people in Northamptonshire can share their views to inform the development of health and care services in the county.*

*We will share this report with the providers of health and care in Northamptonshire and, as members of the Collaborative Stakeholder Forum and Health and Wellbeing Board, we will encourage all organisations involved in the planning and delivery of health and care to use the priorities of the public highlighted in this report to ensure services meet people's needs.*

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Read the full report, big ideas and find out more



[www.healthwatchnorthamptonshire.co.uk/whatwouldyoudoreport](http://www.healthwatchnorthamptonshire.co.uk/whatwouldyoudoreport)

Newsletter sign up: <http://eepurl.com/bQBEbD>



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