Insights from local engagement on the NHS Long Term Plan
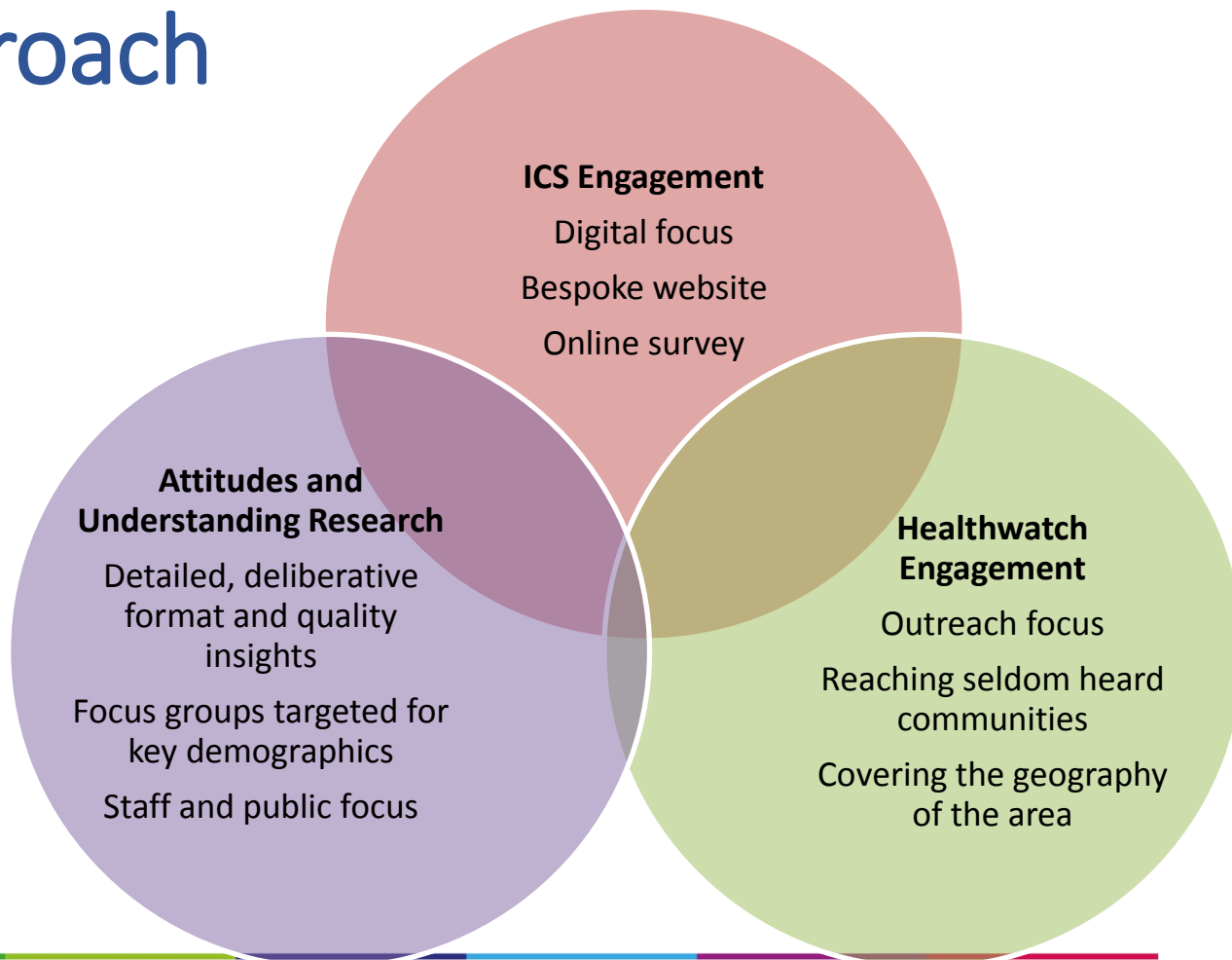
August 2019

Background

- The NHS Long Term Plan sets out the ambitions of the NHS in England for the next ten years

- Each local area has been asked to develop their own local plan setting out how they will implement the national strategy

- We have undertaken extensive engagement with our local population to understand what matters to local people in their health services and to inform the development of a local system plan – this will be the core plan for the area over the next five years

- We have spoken to over 1,000 people across Nottingham and Nottinghamshire in our engagement about topics such as mental health, urgent care, health prevention and more

Our approach

- The ICS has worked in partnership with Healthwatch Nottingham and Nottinghamshire to deliver an extensive programme of public engagement on the NHS Long Term Plan.

- This includes:
  - a) Public engagement by the ICS communications and engagement team, through digital and face-to-face channels
  - b) Public engagement by Healthwatch through face-to-face channels
  - c) Understanding and Attitudes Research by social research agency Britain Thinks, delivered through a series of focus groups with staff and members of the public.

- While each of these elements includes a different focus, the programme is underpinned by core themes and questions
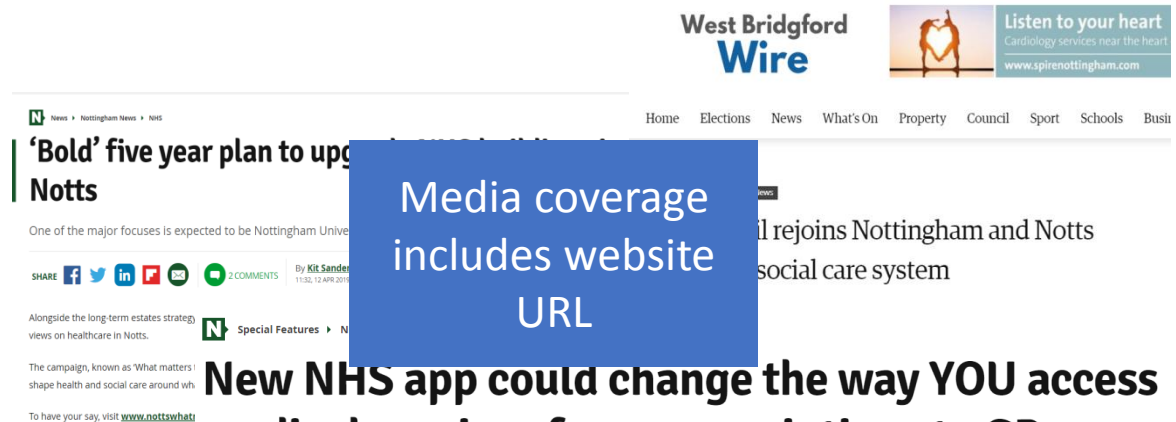
Value added through a mixed approach

ICS Engagement

Digital focus

Bespoke website

Online survey

Attitudes and Understanding Research

Detailed, deliberative format and quality insights

Focus groups targeted for key demographics

Staff and public focus

Healthwatch Engagement

Outreach focus

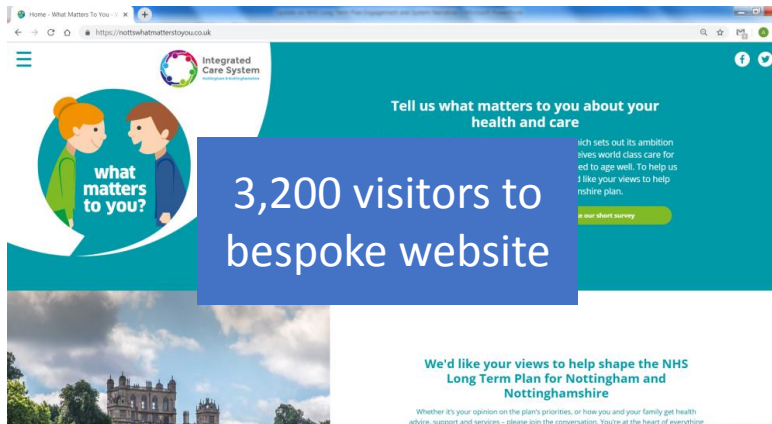Reaching seldom heard communities

Covering the geography of the area

Engagement questions

- Within all of our engagement we have discussed the priorities within the NHS Long Term Plan in three ways:

    a) Understanding how important each priority is to people;

    b) Understanding what matters most to people within each priority;

    c) Discussing the priorities in terms of hypothetical 'trade-offs' e.g. investment in prevention versus investment in treatment, to generate debate.

- We also asked people 'What do you think is the best thing about the NHS?' to understand people's priorities without prompting or context

Tell us 'What matters to you?' about your health and care

www.nottswhatmatterstoyou.co.uk
#NottsWhatMattersToYou

what matters to you?

Engagement Activities

3,200 visitors to bespoke website

Social media activity has reached over 70,000 people

50 Face-to-face events in communities

Media coverage includes website URL

www.healthandcarenotts.co.uk   @NHSNottingham   Tell the NHS what matters to you

Responses and reach

- 1015 Survey responses

- 50 Community events

- 58 in-depth interviews/focus groups participants

- 3,200 website visitors

- Social media reach of >70,000

Over 1000 responses from members of the public, patients and staff to inform and validate our choices.

Key insight 1

Public views about priorities and pressures within the system are strongly influenced by the national media narrative on the NHS or of personal experience of services

"I do know that A&E is at crisis point. It's all over social media, people put up their experiences, on the news there are people being left in hallways. People who have died at home because ambulances aren't able to get to them."

Key insight 2

People most value having a free at the point of need healthcare model, frontline staff and the accessibility of services within the NHS

"My neighbour collapsed on a bank holiday – they said you'll wait a while, and then the ambulance was there within 3 minutes. You can't do better than that."

Key insight 3

There is widespread support for urgent and emergency care and mental health, which are among the system's top priorities

"You go and they give you anti-depressants. If you're strong enough you go back, and after a long long wait, they give you six weeks of counselling. Then after that you're referred to someone else. As soon as your allotted time's up it stops. My time's now up, so I'm back on a waiting list. While I'm on that list I just go downhill. The thing with mental health is that it doesn't just end."

Key insight 5

People are broadly supportive of a focus on preventative activity, with some reservations

"Everybody already knows all that. Everybody knows how to live a healthy life, it's whether you choose to or not, it's up to the individual. Yes they should still advertise walking and quitting smoking and all that. But nobody wants it shoved in their face 24/7."

Key insight 6

There are mixed and ambiguous views about personalisation, choice and control

"I do have choice. Particularly with MS, because it's such a difficult condition to deal with and treat, I've chosen what medicine I take, and what I don't want. That's been my own personal choice. They were presented to me and I was told the for and against various drugs, the side effects, and then it was my choice."

Key insight 7

There is only lukewarm support for digital innovation in healthcare and a lack of understanding of the value of digital technology to improve access

"Some people haven't got internet. The people who use services the most – the elderly, young children. So investing in [Skype appointments] might not work"

Key insight 8

The public are mostly uninterested in hearing about system change, unless it directly impacts on access to services

"Give them more time to spend on patients. It's big for GPs – after 10 minutes, they are rushed out. It's almost robotic. If you have 2 ailments, you have to book another appointment."

Key insight 9

Staff are concerned about diminishing resources and increasing demand

"There are ever-increasing numbers of patients coming through the door, but not enough leaving at the end of the system... The capacity to manage the volume is not increasing at the same rate of the volume. "

Key learning points

- Protecting free-at-the-point-of-need healthcare and support for staff are the key things people want to see from the NHS

- There is clear support for two of the system's proposed top priorities: Urgent and Emergency Care and Mental Health

- People understand the need for financial control but also perceive that the system is under pressure and has diminishing resources

- There is some support for the Prevention agenda but this needs to be balanced with messages around treatment improvements too and reassurance around effectiveness

- Some people like the idea of choice and control of their healthcare but this is dependant on context

- Workforce is a critically important theme that needs to be front and centre of our plans

- There is less support for digital transformation – it is the least supported and least well understood of all the priority areas discussed

Next steps

- We are currently sharing the findings of our engagement and asking people to help guide us in how best to incorporate these into our local system plan

- Our local system plan will be submitted in draft form in September with the final submitted in November

- Our local system plan will set out our priorities for improving health and wellbeing over the next five years – it will be informed by the insights we have drawn from our engagement on what matters to local people

- We are working closely with Healthwatch on integrating our findings with our local system plan and will also be identifying areas that we want to explore further with local people