



news

healthwatch Islington

The doctor will see you now

The key relationship most people have with the health service comes via their GP.

When people approach us with something to say about health or care, [almost half of the time](#) they'll want to talk about their doctor. General practice is at the heart of the health service. It's vital that everybody has equal access. As a result of our work with communities that don't have English as a first language, more GP practices are now using interpreters and more people know they can ask for interpreting support for their appointment.

The women from Jannaty (above), a group based in Finsbury Park, have shared their experiences of primary care as part of the 'Diverse Communities

Health Voice' project. There's more on that inside. We've also published [a report in which older members of the Latin American community give their views on accessing GP services](#).

But not all barriers to access are due to differences in language and culture. Some people aren't able to travel to see their doctor. We've been into [11 local care homes to gather views on the GP services that are delivered on site](#). We also hope our work on [Healthcare travel costs](#) helps those on low incomes travel to referred GP appointments more easily. If you're interested in the big picture for general practice in Islington, there's a community meeting in June. Details are on the back cover. Come along and have your say.

Spring 2016

Diverse Voices

Workshops based on how to identify early symptoms of cancer would be excellent because right now I don't know any symptoms!

Locals give their views on the big issues in health and care at (from left to right) the Islington Bangladeshi Association on Caledonian Road, Jannaty in Finsbury Park, and IMECE Women's Group in Newington Green.



9 black and minority ethnic organisations, 373 participants, 15 key questions about local health services

Healthwatch is leading a partnership of local organisations working with communities that don't have English as a first language. Many members of these communities need an interpreter when they go to hospital or visit their doctor. Indeed multiple barriers have to be overcome in order for these individuals to access services. In addition, their views on the treatment they receive rarely find their way to the ears of commissioners. The 'Diverse Communities Health Voice' partnership gave us the opportunity to get the voices of these service users heard.

Between October of last year and January of this we helped each of our partners to host three themed focus groups. The first of these looked at hospital services and patient choice. The second looked at primary care and extended hours GP provision. The third was about the support people

felt was still needed in the community to help them take care of their own health.

We did not just gather feedback. We wanted to give something in return. We gave guidance to any participants struggling to access the health services they needed. Our partners also shared health information in their community languages to ensure that all participants were more informed about their rights. We produced [EasyRead guidance on accessing interpreting support, specifically for visits to the doctor](#). We've had this translated into Arabic, Turkish, Spanish and Greek.

“Health is an underlying issue for many of the women we work with, but very often they don't see it as a priority. They come here because of their housing or welfare benefits issue, but they also suffer from depression, [poor] mental health etc. This project has given the opportunity to look at their health.

Many of the women also really appreciated being consulted, as often they don't feel quite understood because of the language and cultural barriers.”

Kurdish and Middle Eastern Women's Organisation



I can say that most of the clients that have taken part in the focus groups, are now in a better position to understand their rights and entitlements. For example, they now all know that they have a choice about which hospital to go to receive treatment.

Eritrean Community UK

All the feedback we gathered was condensed into a report which we presented to Islington Clinical Commissioning Group (CCG) at the end of March.

- ▶ Although members of these communities may undertake ESOL classes (English for Speakers of Other Languages) this is not necessarily sufficient to allow them to understand information about their health, or to communicate effectively with their doctor or with other health care professionals. Language was repeatedly raised as a barrier throughout the focus group sessions. Clear information about statutory healthcare services needs to be translated into community languages and made available in community settings. This information needs to stress the availability of interpreting services.
- ▶ It is also important that there are good systems in place for gathering feedback on the quality of these interpreting services.
- ▶ Healthcare professionals and frontline staff should be supported to be more aware of the needs of immigrant communities and the barriers they may face in accessing services.
- ▶ There were cases where patients who needed a referral were not given one. This is an issue that Healthwatch has come across before, but it is particularly challenging when language barriers make it hard for patients to assert themselves with their doctor.
- ▶ Grass-roots organisations working within these communities have built trust and rapport with residents. The CCG should work with these organisations to extend the delivery of its prevention and early intervention programmes. This would help to reduce health inequalities.
- ▶ You can read the full report '[Black and minority ethnic groups accessing services in Islington](#)' on the Healthwatch Islington website.

Pan-Islington Patient Group



The Pan-Islington Patient Group was set up by Islington Clinical Commissioning Group (CCG) to talk to the local community about what should be commissioned, and about the quality of local services. Healthwatch is supporting the group.

The next meeting is on 13 June from 6 till 8pm at Resource for London, 356 Holloway Road N7 6PA. There will be brief presentations from Paul Sinden, Director of Commissioning and Dr Katie Coleman, Vice Chair of the CCG. There will be opportunities for questions and answers and plenty of discussion. Manor Gardens Health Advocacy Project and Every Voice, two local organisations helping the patient group to include feedback from black and minority ethnic communities, will also be there.

- ▶ Feedback from previous meetings highlighted a need for more GP appointments at more flexible times. As a result the CCG has increased the time available for evening and weekend appointments by 60 hours per month.
- ▶ Everyone is welcome. Please let Healthwatch Islington know if you are planning to come along so we can make sure there are enough seats and refreshments.

Healthwatch steering group meetings

The next meeting of the steering group is on 28 June from 6 till 8pm at the Manor Gardens Centre, Training Room, 10 Manor Gardens N7 6LA

Following that, the steering group meets again on 16 August, again from 6 till 8pm. These meetings are open to the public. Please let us know if you intend to come along.

Our contact details

You can visit our website to give feedback on any health and social care services you use, and get information about other services that are available. If computers aren't for you, you can call us, or write a letter. You won't need a stamp.

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