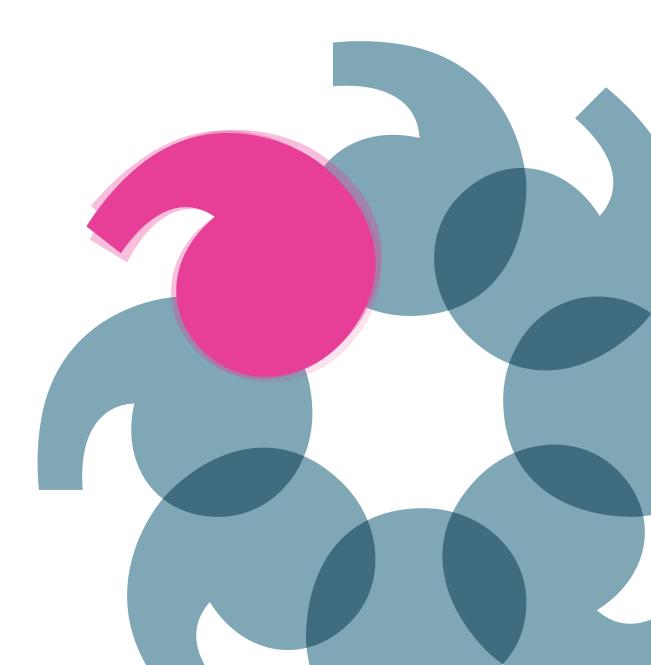


Community Health Services Community feedback regarding waiting times to access services



Healthwatch Islington

Healthwatch Islington is an independent organisation led by volunteers from the local community. It is part of a national network of Healthwatch organisations that involve people of all ages and all sections of the community.

Healthwatch Islington gathers local people's views on the health and social care services that they use. We make sure those views are taken into account when decisions are taken on how services will look in the future, and how they can be improved.

www.healthwatchislington.co.uk

Contents

Introduction	3
Who we spoke to	4
Services and waiting times	5
The impact of waiting	8
Quality of care	10
Frustration with systems	1
Additional feedback	12
Conclusion	13
Appendix	14

Introduction

Community health services provide a wide range of care. Although many of these services are provided in Islington by Whittington Health, most are delivered outside of a hospital setting, generally at a health centre or in your own home. Podiatry, health visiting, and physiotherapy are examples of community health services. These are not primary care services. They are accessed via referral.

Broadly speaking, the feedback Healthwatch receives about the quality of the services available in Islington is positive. However, people do report difficulties in getting access to them. That might mean, for example, a long wait between being referred to a paediatrician and seeing them for the first time. It might mean seeing a podiatrist less often than you need to because appointments are offered less frequently. Service users have also told Healthwatch of their frustration with poor communication from providers, and with appointment booking systems that can cause additional delays.

We decided to give users of community health services the opportunity to share their views about waiting times via a survey. Did they think they were waiting a long time for appointments? If so, what impact did that have on their health, if any? Did this in turn put pressure on other services?

We also wanted to learn whether waiting times were properly communicated, whether expectations were well managed, and what service users thought of the quality of the care they received.

Who we spoke to

Methodology

We designed an online survey that asked a series of questions about community health services. We asked respondents how long they had waited for their most recent appointment for the particular service they had been using. Follow up questions invited respondents to identify what impact, if any, the waiting time had had on their health and wellbeing.

A link to the survey was shared with the Healthwatch membership via email, and with a wider Islington audience via our website and social media channels. In addition, a paper version of the survey was made available at health centres across Islington where community health services were delivered. Copies of the paper survey were also distributed at community events attended by Healthwatch while the survey was active, for example the February meeting of the Islington Better Breathing Group, and at the Annual General Meetings of the Somali Speakers Women's Group and Al-Ashraf Women.

Of the 99 responses we received, 69 were both complete and from Islington residents. Of these, eight responses concerned GP or other primary care services, or did not identify a service. These were excluded, leaving 61 respondents. Four responses identified a health centre from which community health services were offered, without specifying the particular service that had been used. These responses were allowed.

Nine of the 61 respondents gave answers about a second community health service as well, meaning we analysed 70 sets of answers in total. 55 concerned services that respondents had accessed, or been waiting to access, within the last year. 13 concerned experiences that did not take place within the last year. Two sets of answers concerned experiences which may or may not have taken place within the last year (the respondents could not remember).

Age of respondents

17 & under	18-24	25-49	50-64	65-79	80+	Did not say	Total
0	0	9	17	23	4	8	61

Sex of respondents

Female	Male	Did not say	Total
42	11	8	61

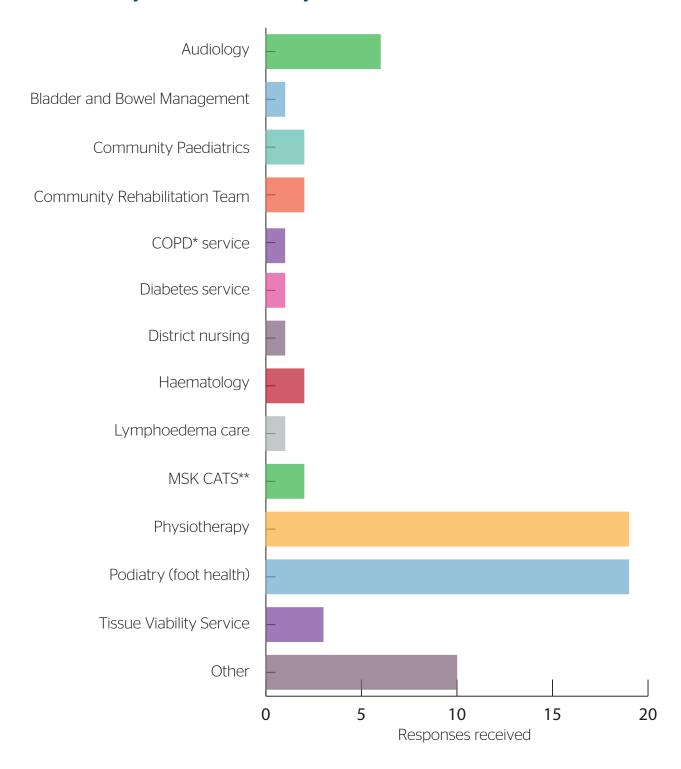
Ethnicity of respondents

Asian/ Asian British	2
Black/ Black British	5
Mixed	1
White British	35

White Irish	1
White Other	7
Any other ethnicity	2
Did not say	8
Total	61

Services and waiting times

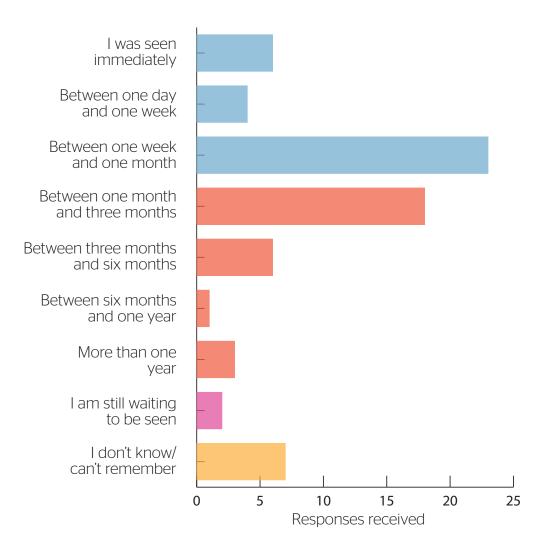
Which community health service did you use?



Other: Bingfield Health Centre 3, Holloway Health Centre 1, iCope 1, Mental health services accessed via the Whittington 1, Bone density Clinic 1, Unspecified 3 (for these three the answers given to later questions indicated that community health services had been used)

^{*}Chronic Obstructive Pulmonary Disease **Musculoskeletal Clinical Assessment and Treatment Service

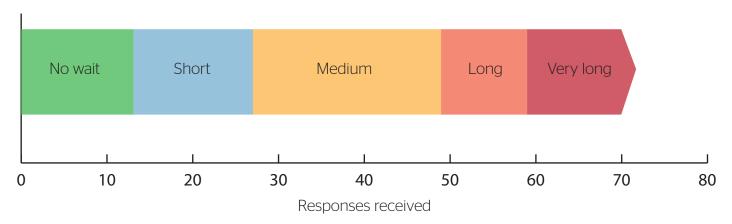
How long did you wait for your most recent appointment?



Respondents said that they were seen immediately eight times. For example, one respondent reported being given an emergency podiatry appointment on the same day they accessed the service. It is possible that some respondents choosing this answer to this question were describing the time they spent waiting on the day of the appointment itself.

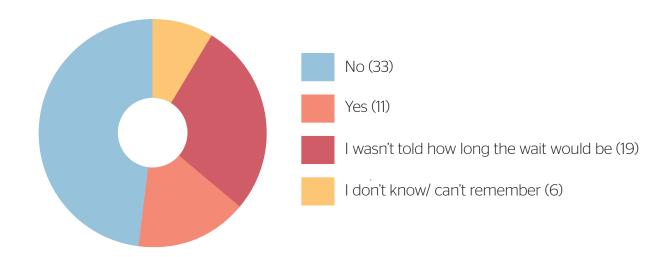
It is difficult to draw too many conclusions from the data on the amount of time people reported waiting, as the appropriate frequency of appointments will vary between services, and between service users. However, some of the waits of three months or more do suggest that it is difficult to access some of these services.

Which of these best describes the length of time you waited?



More than one third of responses described short waits or no wait at all to access community health services. Slightly under a third described medium length waits. Slightly under a third described waits which were either long or very long.

Did you have to wait for longer than you were told you would have to?



Where respondents were told how long they would have to wait to access the service, three times out of four they did not have to wait any longer than that. One time in four they did have to wait longer.

However, on 19 occasions respondents were not told how long they would have to wait to access the service. This is a significant proportion of the total number of responses received. This suggests that there are improvements that providers need to make in terms of communicating effectively with patients who are waiting to access their services.

The impact of waiting for an appointment

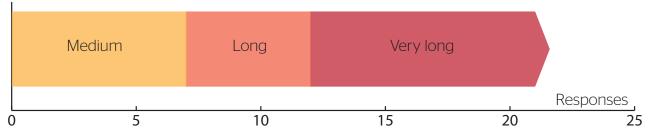
'I was advised by my GP that the wait was so long for physiotherapy if I could afford it I would be better off going private. I had previously had physio at the Whittington and found it very helpful. This time I have carried on without physio but it's meant lots more disrupted sleep with nerve pain, and taken ages to recover.'

Respondent 44

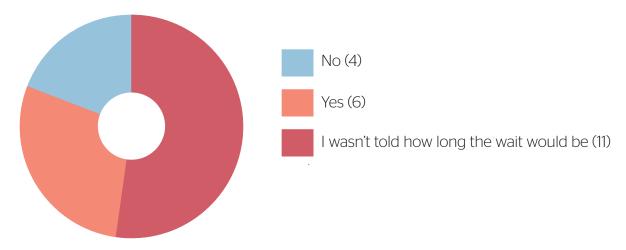
- Most respondents who reported any kind of impact as a consequence of waiting a long time to access services reported more than one impact. That is, they reported negative health impacts combined with reduced quality of life, and (less often) the need to access other services as a consequence. In total 30 of the 70 responses we received reported at least one of these impacts.
- ▶ 21 responses identified a negative health impact caused by having to wait for an appointment.

The total number of survey responses we received is quite small, compared to the number of users of community health services in the borough. It is not appropriate to make too many assumptions about service users as a whole on the basis of these responses. However, examining how those who identified a negative health impact answered the other survey questions suggests that negative health impacts are associated with longer waiting times, and with poor communication about waiting times (a significantly higher proportion of this group were not told how long their wait would be).

How did respondents reporting negative health impacts describe the length of time they waited?



Did respondents reporting health impacts have to wait longer than they were told they would have to?



Pain and restricted mobility were the most common health impacts identified.

'My mobility suffered longer than was needed', Respondent 35

'I am 90 years old and cannot cut my own toe nails so they were very long and curled under and hurt.' Respondent 15

'Mobility and exruciating pain like walking on pebbles under both feet and nails digging into the sides of adjoining claw toes.' Respondent 57

'My joint problem did not improve.' Respondent 68

▶ 25 responses reported quality of life being adversely affected because of the wait. In addition to reiterating issues with pain and restricted mobility that had been reported in response to the question about health impacts, the emotional impact of having a condition that wasn't being treated, and the inconvenience of waiting were identified. It is fair to assume that where providers fail to communicate effectively with service users, these problems will only be exacerbated.

'Constant headache and fear of stroke occurring' Respondent 26

'I was frightened by my surprise diagnosis of being pre-diabetic and wanted to find out more and start a programme as soon as possible. I was frightened and confused and not sure what was in store for my future, so it made planning ahead difficult.' Respondent 80

Though the pain I was experiencing was very gradually improving, without proper treatment the tendon problem I had was making it hard for me to do daily tasks and to do my work as a music therapist properly.' Respondent 31

'I was having trouble hearing' Respondent 40

'Loss of sleep' Respondent 66

'Putting on weight while unable to exercise affects many areas of life - mobility, self esteem, energy, joints and sleep pattern' Respondent 76

Nine responses reported having to access other care and support services because of a long wait to receive community health services. Named services included GPs, Accident & Emergency, hospital imaging departments (for scans), and community services. Two respondents reported seeking private treatment as a consequence of the wait.

'[I accessed a] private physio as it was an acute pain affecting my total well-being and ability to function.' Respondent 43

Perception of the quality of care

How would you rate the care you received when your appointment took place?



I suspect most, if not all services, are fine if you don't need to use them a great deal, which I don't. The podiatry clinic in Islington is great, but I do worry what would happen if I developed other, long term conditions which had a detrimental affect on my feet. Would I feel the same way?'

Respondent 50

Three quarters of responses rated the care that was received when their appointment took place as excellent or good. The subset of 21 responses where waits were described as 'long' or 'very long' were less enthusiastic but not markedly so (15 of the 21 responses rated the care they received as excellent (4) or good (7) or ok (4)).

'The physiotherapy service at Finsbury Health Centre was excellent' Respondent 28

'I asked for a follow up when I lost the hearing aid fitting - no problem. It was also no problem asking for new batteries' Respondent 69

Those that did not rate the care highly tended to do so on the basis of a bad experience on the day. Two rated the care as poor or very poor on the basis of it being hard for them to access, so weren't really rating the care they eventually received. For others, there was some evidence of poor communication being an issue.

'Little information was given about the problem. I felt that I was totally unimportant. My pain was not considered worthy of the time of the practitioner.' Respondent 35

'There has been no regular follow up.' Respondent 29

Frustration with systems

Treceived a letter on the 18th of January, dated 29th December, telling me that I had an appointment on the 16th of January. When I phoned Hornsey Street Health Centre I was told that they had had a series of no shows for the same reason, people had received their appointment letters too late. I phoned Whittington Health and was given another appointment in February. There was no apology for the late arrival of the original appointment letter.'

Respondent 20, January 2018, discussing the podiatry service

In August and September 2016 Healthwatch Islington visited each of the health centres offering podiatry, and talked to the service users about their experiences. This was when we first learnt of problems with appointment letters arriving with service users after the appointment date had already passed, causing much frustration and needless additional waiting time. We recommended back in 2016 that Whittington Health (who deliver the podiatry service in Islington) review and improve the system by which appointment letters are sent out.

The feedback given above suggests that any action Whittington Health may have taken in the meantime to address this problem has not been effective.

There was also feedback critical of the Central Booking System, through which access to numerous community health services is managed. In particular one respondent felt that it was problematic that patients were expected to wait to be sent the date of upcoming appointments. There was no way to tell if you had been been forgotten about, or had simply not been sent your appointment yet. Her comment describes a system that is reactive rather than proactive. (Capitalisation that follows is respondent's own)

'[I was] referred to a different clinic without prior knowledge or agreement. No appointment [is] booked unless a call is made to central booking. After waiting almost a month you call central booking only to THEN have an appointment booked. The appointment can then be weeks away, meaning your monthly treatment rolls into TWO MONTHS. Have turned up for prior arranged appointment on several occasions to be told clinic cancelled - usually no reason given.' Respondent 52

Another respondent gave feedback suggesting that the systems for allocating appointments for community health services could be more robust:

'In the five years overall, the treatment I have received in my podiatry appointments is excellent. But I have only one bad experience in the few years. I've had to wait more than 12 weeks for an appointment on several occasions, which is quite annoying. I occasionally believe I have been forgotten.' Respondent 32

Healthwatch attended a meeting of the Islington Better Breathing Group at the Bingfield Health Centre in February 2018. Anecdotal feedback from the group suggested a high degree of satisfaction with the COPD (Chronic Obstructive Pulmonary Disease) service, which was reported as being easy to access. One member of the group contrasted that with her experience of using the podiatry service, which she said was much harder to access.

Additional feedback

At the November 2017 meeting of the Islington Patient Group, general feedback about community health services was shared by local residents and health professionals via table discussions. This was not a response to the survey questions specifically, but the feedback does complement many of the observations made by survey respondents.

Feedback from Islington Patient Group about community health services

- ▶ Poor access to British Sign Language Interpreters across community health services
- Services are great once you're through the red tape. Patients' mental health needs and Learning Disabilities also have an impact on the accessibility of services
- Once you're in the system, front line staff are effective, but the process to get in is difficult
 - Appointment times often clash with school commitments for young people,
 - Carers needs are not always taken in to consideration,
 - Accessing services is more complex if you're near a border.
- Lack of clarity regarding funding of procedures, IT could be better used to help users and staff. The phlebotomy service is good at Highbury Grange.
- Occupational Therapy and Physiotherapy services would be improved if they were more personalised and patients were better communicated with (Triaging people at the point of referral was suggested)
- Communication between patients, GPs and the community health services is a problem. Some of these systems and pathways are not fit for purpose, it's been going on too long,
- Podiatry the clinician tells you they'll see you in eight weeks, and then the appointment actually comes through four months later.

Feedback from General Practice staff about community health services

- Waiting lists are long
- Visits can be late or missed
- It's hard to get through to the services on the phone
- Lack of continuity of staff especially a problem for the more regular longer term services
- One GP asked whether there was any possibility of having a method of real time communication with community services (such as district nursing) as delay in information can result in a duplication of services. It would be helpful if GPs could be updated as soon as the service has been provided.

Conclusion

- The survey findings demonstrate that long waiting times to access community health services can and do have a negative impact on people's health and on their quality of life.
- Negative impacts on health and quality of life may well also be associated with poor communication about waiting times.
- Where negative impacts were reported, in some cases additional pressure was placed on Accident & Emergency, on other hospital departments, and on GP services

Where demand for community health services outstrips supply, there will always be long waiting times to access some of those services. It is hard to do anything about that, particularly in a climate where health services in general are under considerable financial pressure.

However, it is possible to do something about the small inefficiencies that make waiting times even longer, and more stressful, than they need to be.

For example, many people want to be proactive in taking charge of their own health. But the appointment booking system as it currently works does not empower them. Patients are expected to wait to be sent the date of their next appointment. If for some reason they have been forgotten about, or slipped through the net somehow, there is no way for them to know. They end up having to wait beyond the length of time in which they could have reasonably expected to receive their appointment date before they can tell there is a problem. At this point they can contact the provider to find that they haven't been booked onto the system yet, and the wait to be sent the date of their appointment begins again from the start. An initial acknowledgement message would be one way to reassure patients that they have definitely been booked onto the system. Patients who didn't receive an acknowledgement would then be able to query this with the provider much earlier in the process, which would eliminate much of the additional waiting time.

It is also important that the problem with appointment letters arriving after the date of appointments is properly resolved. This has been an ongoing issue.

Finally, service users should always be told how long they will have to wait for their appointment. This is especially important if the wait is likely to be long. Uncertainty can exacerbate emotional distress, particularly if it makes service users feel that they have been forgotten.





Community health services questionnaire

Community health services are accessed via a referral. Most are provided outside of a hospital setting, for example at a health centre or in your own home. Examples include:

servi Lang Heali Asses	ology, Bladder and Bowel Management, Cardiology, Community COPD service, Diabetes ce, District nursing, Haematology, Lymphoedema Care, Physiotherapy, Podiatry, Speech and uage Therapy, Tissue Viability Service, Children's community health services at the Northern th Centre, Community health services delivered by Islington Outlook, Muscoskeletal Clinical ssment and Treatment, Nutrition and Dietetics, Community Matron, Family Nurse Partnership, th Visiting, Wheelchair service. Which community health service did you use? (please use a separate form for each)
2. Wai	Did you use it within the last year? Yes No Don't know
wai	iting times
3.	How long did you wait for your most recent appointment?
	I was seen immediately Between 6 months and a year
	I was seen within a week
	Between a week and a month I'm still waiting to be seen
	Between 1 and 3 months Don't know/can't remember
	Between 3 and 6 months
4.	Did you have to wait longer than you were told you would have to?
	Yes I wasn't told how long I'd wait
	No Don't know/can't remember
5.	Which of these best describes the length of time you waited?
	No wait Short wait Medium wait Long wait Very long wait

The impact of waiting for your appointment If you had to wait for your appointment, we are keen to understand what effect that had on you. If it had no effect we are keen to learn that too. If you have already said that you didn't have to wait please skip to question 9 6. Was your health (or your child's health if it was a children's service) affected because you had to wait for your appointment? Yes No Don't know/can't remember If yes please say how: 7. Did you have to access other care and support services because of the wait? Don't know/can't remember Yes No If yes please say which services: 8. Was your quality of life affected by having to wait to be seen? Yes No Don't know/can't remember If yes please say how: Quality of care 9. How would you rate the care you received when your appointment took place? Excellent Good OK Poor Very poor Any other comments you'd like to make about the care you received: We would really appreciate it, if you could also provide the following information: Your gender: Your age: Your ethnicity:



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