Helping the Public Understand Changes in the NHS and Social Care

A Healthwatch Lancashire and Healthwatch Blackpool report evaluating the Healthier Lancashire and South Cumbria Change Programme ‘Understanding Changes in the NHS’ series of events.
Introduction

Healthwatch Lancashire and Healthwatch Blackpool are committed to listening to patients and members of the public. We make sure their views and experiences are heard by those who run, plan and regulate health and social care services. This is achieved through a core programme of work and speaking to individuals using services.

We understand that changes in the NHS are imminent and believe that users of services, patients and members of the public should have their voices heard by those who are planning and implementing service change. Additionally, we believe, that people of have the right to know what is changing, why it is changing and have the opportunity to ask questions about any plans directly to those who make decisions that affect our health and social care services.

Furthermore, while undertaking our core programme of work, our representatives have noted both a lack of awareness and a lack of understanding of any forthcoming changes. There is however a profound concern within our communities about the uncertain future of the NHS and adult social care.

With this in mind, Healthwatch Lancashire and Healthwatch Blackpool, in collaboration with Healthwatch Blackburn with Darwen, and Healthwatch Cumbria planned a series of public events. These events aimed to bring the leaders of the Lancashire and South Cumbria Sustainability and Transformation Partnership into our communities to inform users of services, patients and members of the public about the change programme, and to listen to their comments, concerns and feedback.

Healthwatch Blackburn with Darwen held an event at Blackburn Central Library on 29th June 2017 at 3pm-5pm. Healthwatch Cumbria will hold an event at a time to be confirmed.

This report details the event held by Healthwatch Lancashire at St Ambrose Church Hall in Leyland on 12th September 2017 from 6pm-8pm, and the event held by Healthwatch Blackpool in South Shore Community Centre in Blackpool on the 26th September 2017 from 6pm - 8pm.

Methodology

In October 2014, NHS England and its partner organisations published a ‘Five Year Forward View’. This was a national plan to improve both health and social care services. The document detailed ‘a new shared vision for the future of the NHS based around new models of care’. (www.england.nhs.uk/publication/nhs-five-year-forward-view)

In order to realise this vision for the future, in January 2016, NHS England instructed local NHS organisations such as hospital trusts and clinical commissioning groups along with local councils to come together across 44 regions. These organisations working together became Sustainability and Transformation Partnerships (STPs). As a result, services in both Lancashire and Blackpool are now under the Lancashire and South Cumbria Sustainability
Understanding Changes in the NHS January 2018

and Transformation Partnership, which is known as Healthier Lancashire and South Cumbria.

Healthwatch Lancashire and Healthwatch Blackpool chose to host events in community venues.

For the Lancashire event, considerations were made for geography and transport links and therefore the event was held in at St Ambrose church hall in Leyland as this was central to the Lancashire area, close motorway links and walking distance from bus and train routes, and has a small car park free of charge. The event was held on 12th September 2017 at 6pm-8pm. The speakers on the evening were;

- Neil Greaves (Communications and Engagement Manager)
- Dr Amanda Doyle OBE (Chief Clinical Officer at Blackpool Clinical Commissioning and Lead for Healthier Lancashire and South Cumbria)
- Dr Malcolm Ridgeway (Senior Responsible Officer for Primary Care, Healthier Lancashire and South Cumbria)
- Debbie Nixon (Senior Responsible Officer for Mental Health, Healthier Lancashire and South Cumbria)

The speakers were then joined by the following people to answer questions;

- Gary Raphael (Director of Finance, Blackpool Clinical Commissioning Group)
- Mark Pugh (Medical Director of Lancashire Teaching Hospitals)

For the Blackpool event, considerations were made for geography, transport links and tourism traffic (with the illuminations in mind) and therefore was held in South Shore Community Centre in Blackpool as this was a short distance from the motorway, is on several bus routes, is some distance from central Blackpool attractions, and had free on street parking available. The event was held on 26th September 2017 at 6pm-8pm.

The speakers on the evening were;

- Neil Greaves (Communications and Engagement Manager)
- Dr Mark Spencer (Senior Responsible Officer for Primary Care)
- David Bonson (Senior Responsible Officer for Urgent and Emergency)
- Gary Raphael (Director of Finance, Blackpool Clinical Commissioning Group).

The speakers all took questions from the attendees.

Throughout each event a Healthwatch representative recorded the questions asked of the panel by the public to assess trends and themes and ensure all the questions were offered and evidenced. This report aims to provide an overview of these trends and themes with original questions being included in the appendix.

This report also includes feedback on the events provided to us by those that attended. The Healthwatch Lancashire event was attended by 37 people and the Healthwatch...
Blackpool event was attended by 21 people. Members of the public who attended the events were provided with a feedback form along with information relating to their local Healthwatch in order to assess the effectiveness and quality of the event.

**Acknowledgements**

Healthwatch Lancashire and Healthwatch Blackpool would like to thank members of the public for attending the event, providing us with feedback and for sharing their comments, questions, and concerns with us and with Healthier Lancashire and South Cumbria.

Healthwatch Lancashire and Healthwatch Blackpool work collaboratively with Healthwatch Blackburn and Darwen and Healthwatch Cumbria in order to best serve the population of Lancashire and South Cumbria.

Healthwatch Lancashire and Healthwatch Blackpool would like to thank the speakers and panels at each of the events along with staff at Healthier Lancashire and South Cumbria Change Programme for their time and support.

**Section 1 – Summary**

**Lancashire Event**

The event in Lancashire was attended by 37 members of the public and had a panel of six senior staff to present and answer questions.

Overall, most people who provided us with feedback thought the event was ‘good’ (62%). The most useful parts of the event, based on feedback was split between the question and answer session, the presentations, hearing from specific members of the panel and receiving general information about the Sustainability and Transformation Partnership. From the people who provided us with feedback, most found the least useful part of the event were other members of the audience dominating the conversation.

**Blackpool Event**

The event in Blackpool was attended by 21 members of the public and had a panel of four senior staff to present and answer questions.

Overall, most people who provided us with feedback thought the event was ‘good’ (67%) with the rest describing the event as ‘excellent’ (33%). The most useful part of the event, based on the feedback received was the question and answer session. People who provided us with feedback said the least useful part of the event was an under representation of social care on the panel.

Across Lancashire and Blackpool over 70 questions were put to the leaders of the Sustainability and Transformation Partnership which had a wide range of themes and topics. 19% of questions focused on the Sustainability and Transformation process itself, 16% questions around staffing, 14% around service changes.
Statement from Sheralee Turner-Birchall, Chief Executive of Healthwatch Lancashire and Healthwatch Blackpool

“The ‘Understanding Changes in the NHS’ events gave members of the public an opportunity to find out more about the work of the Healthier Lancashire and South Cumbria Sustainability and Transformation Partnership (STP), known as Healthier Lancashire and South Cumbria.

“These events were not only a great opportunity for the public to find out what changes are taking place to health and social care, but also to ensure that local people’s views were heard when it comes to changing how care is delivered locally and how it affects them. It is important, however, that the engagement doesn’t stop at these events.

“The people who reside in Lancashire and Blackpool are a great source of intelligence in helping us to understand the specific needs of their own towns and communities. It is your voice that is the most important and must be heard and acted on at the centre of any proposed changes.

“It’s crucial that the public continue to have their say and we encourage you to keep talking to us about the STP and leaving your feedback with Healthwatch Lancashire and Healthwatch Blackpool.

“As the public’s voice on health and social care, we will continue to represent your views to the Healthier Lancashire and South Cumbria Change Programme and challenge and scrutinise their work.”

Kindest regards,

Sheralee Turner-Birchall
Chief Executive, Healthwatch Lancashire and Healthwatch Blackpool
Section 2 - Feedback about the event from audience members

1. We asked, “Which event did you attend?”
   (23 people answered)

![Bar chart showing the percentage of attendees from Blackpool and Leyland.]

- Blackpool: 43%
- Leyland: 57%

2. We asked, “How did you hear about the event?”
   (23 people answered)

![Bar chart showing how attendees heard about the event.]

- Email from Healthwatch: 64%
- Social Media (Facebook or Twitter): 14%
- In the Press (i.e. Newspaper, radio, etc): 45%
- Word of Mouth: 21%
- Other: 9%

Other - 9% “At a health fair.”

Please note, percentages have been rounded to the nearest whole number and therefore do not add up to 100%.
3. We asked, “How would you rate the venue?”
(23 people answered)

![Graph showing venue ratings](image)

Please note, percentages have been rounded to the nearest whole number and therefore do not add up to 100%.

**Comments about the venue in Leyland**

“The room got rather warm throughout the event.”

“Good size room that was packed full, however it was too hot and the Brownies and Guides in the room across were very noisy!”

“A little noisier at one point but I didn’t know whether this was from inside or the other groups in the building. It was not really a convenient location for me to travel to at night I would have preferred one in my area. However, it was easy to find.”

**Comments about the venue in Blackpool:**

“The venue was accessible and there was enough room for everyone that came. The only problem I had was parking, and the building did not say South Shore community Centre so I kept driving past. Sometimes at events, it is difficult to hear what people are saying due to echo from the room, however this was not the case for this event, which was great.”

4. We asked, “Did you find the presentations informative?”
(22 people answered)

![Graph showing presentation informativeness](image)
Comments about the event in Leyland

“They were very generic with no direct purpose or use for general members of the public. So what?”

“Informative but a bit wrapped up in jargon. For instance, there was an assumption that I would know what the STP was (Plan or Partnership). I still don’t know why/how it works together or why that man was upset it was now a partnership and not a plan?”

“It would have been helpful though if they were a little less strategic. I would of liked to hear more ideas about how services can be changed/adapted to be better for the public.”

“Short informative good points.”

“Good visuals, well explained. Thanks for the handout.”

“The presenters believe they can transform the NHS in spite of the realities of business and human nature.”

“Presentations were fairly informative.”

Comments about the event in Blackpool

“Interesting plans.”

“Very informative, interesting, concise. I particularly liked that they didn’t go on for long and that they all had something different to offer.”

“The interactions and quality of responses from the panel was excellent.”

“Good mix of presentations with overview of STP, primary care and community perspective.”

“Very clean, great delivery - easy to understand.”

5. We asked, “Which part of the event did you find most useful?”
(22 people commented)

41% of comments related to the question and answer sessions being the most useful part of the event

36% of comments related to the presentations being the most useful part of the event, half of which relate to the presentations generally, and half of which relate to a presentation about a specific topic or from a specific speaker

23% of comments related to a the most useful part of the presentation being general information, updates and explanations about what Healthier Lancashire and South Cumbria is and why changes are happening

Comments about the event in Leyland

“Hearing from the people in charge about what is happening and why.”

“Presentations.”

“The question and answer session.”

“The reasons why the health service was trying to change - in response to the economic and demographic climate.”

“The Presentations.”
“Answers from the panel to public questions gave a much better insight into the positive effects of proposed changes for people than the presentations did.”
“Presentation by Amanda Doyle.”
“Mental Health.”
“Amanda’s presentation.”
“The presentations.”
“Questions from the floor and real observations from experienced people.”
“Hearing what the STP is all about.”
“An overview.”

Comments about the event in Blackpool

“The audience having the chance to ask their questions.”
“The chair of the meeting giving an NHS update.”
“Question and answer time. The panel were good at answering questions.”
“The presentations.”
“The discussion on interaction between Health and Social Care.”
“Opportunity to ask questions and raise issues for the panel and STP to consider moving forward.”
“Questions and answers since they raised interesting untouched topics.”
“Dr Mark Spencer’s talk about primary health services.”
“Lots of time for questions and short presentations - excellent.”

6. We asked, “Which part of the event did you find least useful?”
(17 people commented)

53% of the comments about what was the least useful part of the event related to other members in the audience. This was predominantly at the event in Leyland, and regarding the relevance of the questions being asked and the dominance of some members of the audience

12% of the comments related to the presentations or specific parts of the presentations being the least useful part of the event. From the feedback about the least useful part of the Blackpool event

12% of comments related to an under representation of social care

Comments about the Leyland event

“The audience speaking over the speakers when they were trying to answer questions.”
“Question and answer part as it was dominated by a certain group of people.”
“The presentations at the start.”
“The politics rather than finding out how I am going to get to see my G.P. and why the community groups that delivered services such as weight management have now lost their funding because the CCG has given the contract to the Local Authority.”
“Interruptions from people in the audience. Heightened voices and unpleasantness was uncomfortable to view at times. Other members of the audience left or appeared really uncomfortable.”

“Constant interruptions from the floor that bore no relevance to the STP.”

“The people on the back row.”

“The members of the public who like the sound of their own voice.”

“Anecdotes.”

“Clearly people attended to hijack the meeting! People were not asking questions that were in the remit of the panel.”

“The audience side tracking the presentations and questions.”

Comments about the event in Blackpool

“There should have been a representative from Social Care.”

“The chair of the meeting often using a word I totally dislike.”

“Some of the questions people asked, but this is out of anyone's control.”

“It was all useful.”

“It was all good. It might have been useful to have had someone representing social care and Local Authority services are they not part of the STP?”

“The video because the panel covered the information.”

7. We asked, “Were all your questions answered?”
(22 people answered)

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Yes: 89%
No: 11%
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Please note, percentages have been rounded to the nearest whole number and therefore do not add up to 100%.
8. We asked, “If not, what are your outstanding questions?”
(8 people answered)

Comments from the event in Leyland

1. “How are the STP going to protect the services that small community groups now deliver? They said they are working with the voluntary and faith groups but the group I went to lost their funding from West Lancs CCG to Virgin Care and West Lancs Borough Council who are now delivering the weight management classes. How are they going to share good practice to each other and will they make other counterparts accountable for following good practice. E.G. Blackpool CCG said the GP practice doesn’t make their patients start phoning at 8 am to try to get an appointment and they speak to everyone to find out if they need an appointment so I would like my GP practice to adopt that procedure. A friend of mine ended up in A&E last night as she has been vomiting and unwell all day. She couldn’t get a GP appointment and was told she had to wait until after 6pm to get an emergency doctor calling out. After four calls to 111 through the evening the ambulance service sent her into A&E at 10pm because of her heart fluctuations. Perhaps if she had been seen earlier she could have been treated at home or sent in earlier instead of suffering all day.”

2. “I want to know how much the STP process is costing, and where the transformation money comes from.”

3. “I’d like to ask why GP’s expect the hospital to prescribe mediation even though the hospital consultant has stated in a letter what is required.”

4. “There are too many unanswered questions and no concrete plans.”

5. “Can some targets be set and then achievements demonstrated by numbers?”

Comments from the event in Blackpool

1. “A brief idea but not full idea of what total plans are.”

2. “Will there be targeted projects focusing on specific issues e.g. in East Lancashire there is a concern for high numbers of children and young people (0-29) accessing A&E. Will the STP be doing targeted projects to find out more about this before changes take place.”

3. “All question very well answered.”
9. **We asked, “What is most important to you about the NHS?”**  
*(22 people answered)*

This word cloud illustrates the most commonly used words from comments to the question “What is most important to you about the NHS?”. The cloud gives greater prominence to words that appear more frequently in the comments we received.

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**Comments from the event in Leyland**

“Remaining a publicly owned service that is free at the point of access.”

“That is remains free/low cost. That it is accessible e.g. - not long waiting times for appointments. That we invest in current trained staff, and provide opportunities for others.”

“It remains free at the point of access but that access to services is dramatically improved!”

“That it gives access to the majority of people quickly and efficiently locally. That it cares about people.”

“Good care and a quick and reliable service, as convenient as possible.”

“Free at the point of access and excellence in some areas.”

"Access to communication."

“Remains free.”

“That the staff listen to me and deal with my problems to the best of their ability.”

“Free at the point of service for ALL. Totally in the public sector.”

“Being able to access care with relative ease.”

“Delivery of services by specialists, and improved quality of health.”
Comments from the event in Blackpool

“That the NHS work together with Social care to make services better.”

“That it is free.”

“That they start to truly focus on upstream (preventative and community) issues rather than further investing in hospital services.”

“Quality of the service.”

“Quality of continued service to meet changing needs of the population.”

“Them going along with my petition about changing doctors titles to help make it clearer for everyone and the NHS.”

“Primary Care.”

“1) The public concerns valid or not are taken in a serious manner. Changes to NHS are not fait accompli by the great and good. 2) THAT THE NHS REMAINS PUBLIC.”

“Ensuring that everyone who need to use it gets the best care possible without the system being abused. We need to raise awareness of what different services are for in order to reduce time wasting within the service.”

“Prevention - growing communities to support wellbeing. Access to services High quality and easy to access services.”

10. We asked, “Overall, how would you rate this event?”
(22 people answered)

Please note, percentages have been rounded to the nearest whole number and therefore do not add up to 100%.
Section 2 – “You Said...”

Trends and themes from questions

At each event, following the presentations (which lasted in each case for around 30 minutes) questions were then taken from members of the audience. In addition, Healthwatch Lancashire and Healthwatch Blackpool had a number of questions to scrutinise the panel. During the question and answer part of each event a Healthwatch representative recorded all the questions that were asked by members of the public. These have been themed for clarity and a full list of questions can be found in the appendix on page 15.

**Sustainability and Transformation Process**

19% of questions asked related to the process of transforming services and making them sustainable. Most of these questions related to how members of the public would be consulted with and what any changes might mean for patients. Questions were also raised about who the STP is accountable and responsible to. Further questions were asked about how success will be measured and how long these the process will take.

**Staffing**

16% of questions asked related to staffing. The questions mostly related to how the STP will recruit the staff they expressed are needed during the presentations, and around training and the associated costs of training new or existing staff.

**Service Change**

14% of questions asked related to how services will be changed. Many questions related to the referral processes and that this process does not currently work well. Other questions related to previous ways the NHS was split i.e. Foundation Trusts and concerns about new ways the NHS is being split i.e. Accountable Care Systems and Local Delivery Plan Footprints. Further questions related to how the STP will get the “basics” right.

**Finances**

11% of questions asked related to finances. Most questions related to how much the sustainability and transformation process is costing and where this money is coming from. Other questions related to appropriate use of public money particularly between local councils and the NHS.
Social Care
9% of questions asked related to social care. Questions mostly related to ensuring equal emphasis is given to social care when redesigning health services. The other main topic of questions related to staffing, particularly around gaining quality staff and retaining them via increasing pay and training.

Primary Care
9% of questions asked related to primary care. Most questions related to general practice (G.P. Services) and particularly to GPs working in partnership and how the STP will solve problems around accessing appointments. Praise was given to community nurses and concerns raised about how these services will be supported during service changes.

Partnership Working
9% of questions asked related to how health and social care organisations will work together and with other organisations. Most questions related to how the organisations involved in the STP would work with other statutory or local authority organisations such as benefits, housing, education, transport etc. Other questions related to how information and particularly records will be shared across different health partners.

Privatisation and Cuts
7% of questions asked related to whether there were plans to privatise or make cuts to NHS services. Most questions related to whether patients will have to pay for services that are currently covered by the NHS, and whether services that are currently available will be cut and closed. Further questions related to whether the STP is working towards an American style system and what services will be privatised locally.

Prevention
6% of questions asked related to preventative health strategies. Most questions related to the funding and, in particular, if there is enough funding set aside for prevention programmes. Other questions related to how the NHS will work with public health authorities and how members of the public will be consulted on these strategies.

Hospitals
1% of questions asked related to care in hospitals. These questions related to how quickly hospitals would wish to discharge elderly patients to the community.
Demographics

Healthwatch Lancashire and Healthwatch Blackpool request information about the personal characteristics of the people we survey. This forms part of our intelligence about the appetite local people have for engaging in conversations about health and social care. We can also use this intelligence to highlight groups we may not be reaching and could therefore be seldom heard and may need reaching in more innovative ways.

11. We asked, "What is the first part of your postcode?"
(20 people answered)

<table>
<thead>
<tr>
<th>Postcode</th>
<th>Blackpool</th>
<th>Leyland</th>
</tr>
</thead>
<tbody>
<tr>
<td>PR4</td>
<td>29%</td>
<td>0%</td>
</tr>
<tr>
<td>PR26</td>
<td>14%</td>
<td>0%</td>
</tr>
<tr>
<td>FY5</td>
<td>14%</td>
<td>0%</td>
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<td>PR2</td>
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<td>L40</td>
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<td>0%</td>
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</tbody>
</table>

12. We asked, “What is your gender?”
(23 people answered)

<table>
<thead>
<tr>
<th>Gender</th>
<th>Blackpool</th>
<th>Leyland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>50%</td>
<td>15%</td>
</tr>
<tr>
<td>Female</td>
<td>50%</td>
<td>85%</td>
</tr>
<tr>
<td>Trans*</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Other</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

13. We asked, “Is this the same as the gender on your original birth certificate?”
(22 people answered)

<table>
<thead>
<tr>
<th>Gender</th>
<th>Yes</th>
<th>No</th>
<th>Prefer not to say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blackpool</td>
<td>89%</td>
<td>0%</td>
<td>11%</td>
</tr>
<tr>
<td>Leyland</td>
<td>92%</td>
<td>0%</td>
<td>8%</td>
</tr>
</tbody>
</table>

14. We asked, “What is your age?”
(23 people answered)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Blackpool</th>
<th>Leyland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 16</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>16-24</td>
<td>20%</td>
<td>46%</td>
</tr>
<tr>
<td>25-34</td>
<td>40%</td>
<td>0%</td>
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<tr>
<td>35-44</td>
<td>0%</td>
<td>8%</td>
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<tr>
<td>45-54</td>
<td>20%</td>
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<td>0%</td>
<td>23%</td>
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<tr>
<td>65-74</td>
<td>0%</td>
<td>8%</td>
</tr>
<tr>
<td>75-84</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>85+</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Prefer not to say</td>
<td>0%</td>
<td>0%</td>
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15. We asked, “What is your ethnicity?”
(23 people answered)

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Blackpool</th>
<th>Leyland</th>
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<tbody>
<tr>
<td>White</td>
<td>90%</td>
<td>92%</td>
</tr>
<tr>
<td>British</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Mixed</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Ethnicity</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Asian</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>British/</td>
<td>0%</td>
<td>0%</td>
</tr>
<tr>
<td>Black</td>
<td>0%</td>
<td>0%</td>
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<tr>
<td>Asian/</td>
<td>0%</td>
<td>0%</td>
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<td>Black</td>
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<td>0%</td>
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<td>British/</td>
<td>0%</td>
<td>0%</td>
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<td>Caribbean/</td>
<td>0%</td>
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<td>African</td>
<td>0%</td>
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<tr>
<td>Other</td>
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<td>0%</td>
</tr>
<tr>
<td>Ethnic Group</td>
<td>10%</td>
<td>8%</td>
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</table>

Other Ethnic Group - Leyland 8% White/Irish
Blackpool 10% Pakistani/Irish
Appendix

Questions raised to and by Healthwatch Lancashire and Healthwatch Blackpool

Prior to the events, Healthwatch Lancashire and Healthwatch Blackpool staff and volunteers devised a list of questions they felt would be important to put to the leaders of the Healthier Lancashire and South Cumbria Change Programme.

- What is an STP?
- What do the proposals mean for patients and service users?
- How does it affect staff?
- How will the STP improve recruitment of staff, both for health and social care?
- How will the STP make sure staff recruited have the skills, attributes and experience to carry out their roles effectively?
- How will social care be given the equal emphasis to health care?
- How long will these changes take?
- Will NHS care be effectively complimented by social care and public health?
- How is the local infrastructure, e.g. transport, education, housing etc involved and considered within the STP?
- How is the STP making sure it gets the basics right first?
- Is the STP about downsizing, cost cutting and closures?
- How does change in Lancashire and South Cumbria effect and fit in with a national health and social care changes?
- What skills, attributes and experiences qualify the STP leaders to plan and carry out these changes?
- Is this plan coming too late as services across the area are already seeing funding and service cuts?
- Are the services going to be made sustainable (i.e. see financial changes) before they are transformed?
- What does success look like? How will we know if it’s been achieved?
- How can I be involved? When can we expect consultations to take please and how will I find out about it?
- How are you going to ensure that patients and service users across the Lancashire and South Cumbria have equal services despite being in different Local Delivery Plan Footprints?
- What formal consultation will take place? When will this happen?
- Will I have to pay for services?
- How much will these change themselves cost? Why can’t this money be put into existing services?

Questions asked by members of the public at the event in Leyland

- Is the suicide prevention consultation event on 13th September 2017 open to public?
- If “general practice is falling over” how do you make it work?
- Why has the “plan” become a “partnership”?
- Who is the STP accountable to?
- The NHS was split into NHS foundations trusts which were autonomous and individual, and now they’re being put back together. Was it a mistake in the first place?
- Who is the STP responsible to?
- These events are talking shops, what difference will events like this make?
- Is our health service going the way of America where everything works in silos?
• I have to repeat myself because the health care professionals don’t have access to my medical records. How is this going to be solved?
• Where are the finances coming from for this STP?
• Where are all the necessary GPs coming from?
• Referral management centres don’t work, referrals come back to the GP’s who send them. How will the referral process be improved?
• What are the plans in our footprint to privatise the NHS?
• What is the criteria for getting the transformation grant?
• When you go to the doctors you can’t get an appointment, how will the STP change this?
• How are you going to work more closely with others like housing, education, and the Department for Work and Pensions?
• Is there anything you can do like fine people who miss their appointments?
• Is there a charge for GP’s visiting you at home?
• The amount of time an elderly person has to regain independence after being hospitalised (with something like a stroke or a fall) is said to go down to as little as 28 days, how true is this?
• Could care workers go on first aid courses so they don’t have to take up NHS time?
• Could there be specific care homes for elderly people with mental health conditions other than dementia?
• Are STP’s to become Accountable Care Systems? What are Accountable Care Systems? How do they work, particularly around procurement?
• How and will we support health and wellbeing across Health and Social Service?
• There are so many levels and bands of staff, lower bands of staff can’t administer drugs, why can’t they be trained?
• How will there be continuity of staff for patients?
• Can you change contracts to say that training doctors and nurses have to stay within the NHS?
• The bursaries have stopped for student nurses at a time when we haven’t got enough nurses and tuition fees have risen. Are there any plans to support student nurses, or reimburse them for working in the NHS?
• People who have been nurses previously need to pay around £6000 to reregister to practice again, what support will there be with this?
• How much is the STP process costing?
• Where is the transformation money coming from?
• Why do GP’s expect the hospitals to prescribe medication even though the hospital consultant has stated on the letter what is required?
• Why are there no concrete plans?
• Can some targets be set and then achievements can be demonstrated by numbers?

Questions from the event in Blackpool
• One of the panel said, “We think we know what those things are”, in reference to what things can be done to recruit more staff and in particular younger doctors. What are they?
• What is happening around social care? How as an STP are you working with local authorities on social care?
• How are you going to work with housing and true communities to make changes?
• If you can’t get social care right, you won’t get anything else to work. Several homes around here [Blackpool] were closed. You’ve got to be serious and pay for the care and for the staff. How are you going to make it work?
• I lost my partner in January. Community staff could not have been better. Surely extra money can be put into these services. There’s so much to do and not enough staff. How can this service be supported?
• The word “doctor” stays stuck on people’s minds. If this was changed for example to “health consultant” it would more explicitly say what you’re seeing someone for. What do you think about this?
• Do you think enough is being spent on preventative health?
• Will there be more funding on prevention?
• I like what I’m hearing, but millions of pounds are spent on vanity projects. The council are in debt so good luck getting money out of them! For example, money being spent on the tower brings in tourists which is fine, but other projects are just vanity projects and its useless. How will you work together?
• You say GP’s in Fleetwood work together, have GP’s been asked if they want to be a part of this? Have 100% said they will support it? It will make a difference if they’re training practices, won’t it? There are still one or two training projects in Blackpool.
• One of the things that has come out of tonight is that if the system got the basics right, people would engage. How are we going to do that?
• Care is not seen as a career, it’s something people do because they can’t get a job or because care homes will take anyone. It could appeal to more people but it’s the pay. It’s very basic. Also, other people want to stay with families, but benefits like state pensions have to be adjusted down. How can the STP work to change this?
• When a person is a carer and a pensioner it is seen an overlap. Is this able to change?
• There is a minefield between health and social care. The meteoric seems to be on measurable outcomes. How do the and who makes the attitudinal change to services?
• In an ideal world where appointments are longer, if I asked to see a consultant would I still be able to see the consultant.
• If the consultants are coming to the GPs, would this make appointments much quicker to get?