

What are mental health and community services like for people living in Lancashire and South Cumbria?

Conversations with patients about their
experiences to help inform the upcoming
Lancashire and South Cumbria NHS
Foundation Trust Clinical Strategy

March 2021

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About Healthwatch and Healthwatch Together (HWT)

Healthwatch was established in April 2013 as part of the implementation of the Health and Social Care Act 2012.

Healthwatch England acts as the national consumer champion for all local Healthwatch organisations, enabling and supporting individual Healthwatch to bring important issues to the attention of decisions makers nationally.

A key role of each individual Healthwatch is to champion the views of people who use health and care services in their area, seeking to ensure that people's experiences inform the improvement of services. Healthwatch is constantly listening, recording, and reporting on the views of local people on a wide range of health and care issues, ensuring that people are able to express their views and have a voice in improving their local health and care services.

Healthwatch Together (HWT) consists of Healthwatch Cumbria, Healthwatch Lancashire, Healthwatch Blackpool and Healthwatch Blackburn with Darwen, working in collaboration together. It operates over the whole footprint of the Lancashire and South Cumbria Integrated Care System.

Introduction

The Lancashire and South Cumbria NHS Foundation Trust (LSCFT) is currently working on updating its Clinical Strategy. The LSCFT wanted to hear what has been working well in its services and which areas could be improved, directly from those individuals who use and access these services. This feedback would be combined with national data and previous academic research, to provide a picture of people's experience of the Trust's mental health and community services within Lancashire and South Cumbria and enable a comparison with the Trust's refreshed Clinical Strategy Engagement Principles.

The Director of Strategy for LSCFT commissioned HWT to undertake a project examining and analysing public views on local services. HWT is a collaboration of the four Healthwatch organisations; Blackpool, Blackburn with Darwen, Lancashire and Cumbria.

The responses that HWT receive will be measured against the Trust's Strategic Objectives, to produce a list of recommendations for LSCFT, to help inform and design its Clinical Strategy. The Trust's Strategic Objectives are:

1. **Service users** will be at the heart of our Trust and co-productions will enable recovery and well-being.
2. We will strive for the highest **standards** of quality in all our services.
3. We will deliver **safe** care, ensuring we learn lessons and continually improve and innovate.
4. Our **staff** will be attracted to come and stay at the Trust, as it is a great place to work.
5. Our services will be **sustainable** and deliver real value to the people who use them.
6. We will collaborate actively with **system** partners.

Methodology

Delay:

There was a considerable delay from the initial agreement of the Project Mandate and the eventual delivery of the project due to the COVID 19 pandemic. Engagement had been planned to be face-to face and clinic based but was changed to be virtual, using phone calls and on-line survey responses.

Design:

The project involved collecting qualitative data. An exploratory approach was taken to develop a deeper understanding of patient experiences.

Participants:

There were 74 respondents to the overall project, covering 8 LSCFT services.

Below is a list of the services, named in the original mandate, and the number of received responses:

- Dentistry - 10 respondents
- Inpatient unit (Older Adult Mental Health) - 2 respondents
- Home Treatment and Mental Health Liaison Team - 8 respondents
- CMHT Adults (Pennine) - 8 respondents
- CMHT Older Adults (North) - 6 respondents
- District nursing (Pennine) - 9 respondents
- Moving Well Service (Musculoskeletal Physiotherapy Service) - 10 respondents
- Impatient Unit (Adults Mental Health) - 7 respondents
- Specialist Triage Assessment and Referral Team (START) was included in this project. Helpful contact was made with the service manager but despite a number of referrals inviting patients to respond, no responses were received. (one patient responded initially but didn't answer when called).
- The Older Adult Rapid Intervention Treatment Team was included in this project. However, the service manager had been off sick at the time engagement, and an alternative name provided who then gave a further name. However, despite this perseverance by HWT, no patients' names were provided and thus no responses were received.

Additional CMHT (under 55) respondents:

A further 14 responses were gathered from people under 55 engaging with a range of CMHT services on the Fylde Coast. This was not included in the original mandate, but their insight is never- the less relevant and of value to this report.

Research objectives:

1. What does a good quality health service look like to the people living in Lancashire and South Cumbria?
2. What are their recent experiences of the services provided by LSCFT?

Data collection:

Having already amended the methodology as stated above, further refinement became necessary once the project started. Initially, the survey was available on SurveyMonkey for anyone who had used one of the above services to complete. However, it became apparent that some of the responses were not necessarily coming from people who had used LSCFT services. After communicating with the project commissioner, HWT decided to revise the methodology.

It was agreed that HWT should contact service managers requesting their support in identifying service users who would be willing to take part in the project. It was explained to service managers that HWT wanted to conduct telephone conversations with service users about their experiences to gain more meaningful feedback than online surveys. Service managers were provided with a research request letter explaining the aims and value of the project, a patient letter to pass on to consenting patients explaining the project and the value of their feedback and a copy of the proposed questions.

Service managers then spoke with patients, gained consent and permission for HWT to contact them to speak about their experiences, and then sent HWT patient contact details. HWT contacted consenting patients and input their survey responses into SurveyMonkey.

Respondents were asked the following questions:

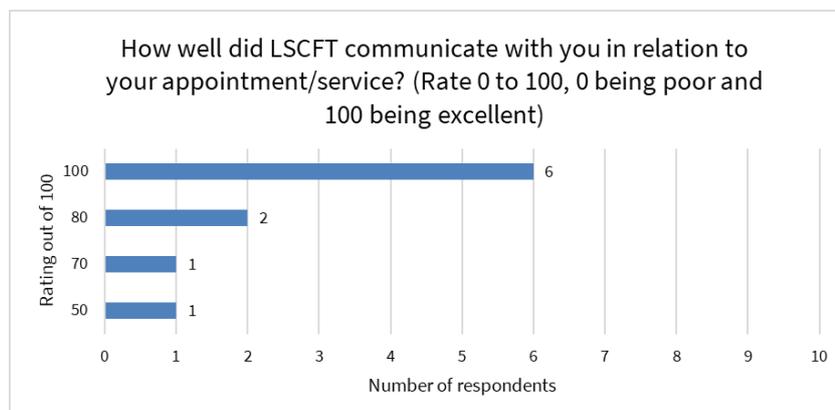
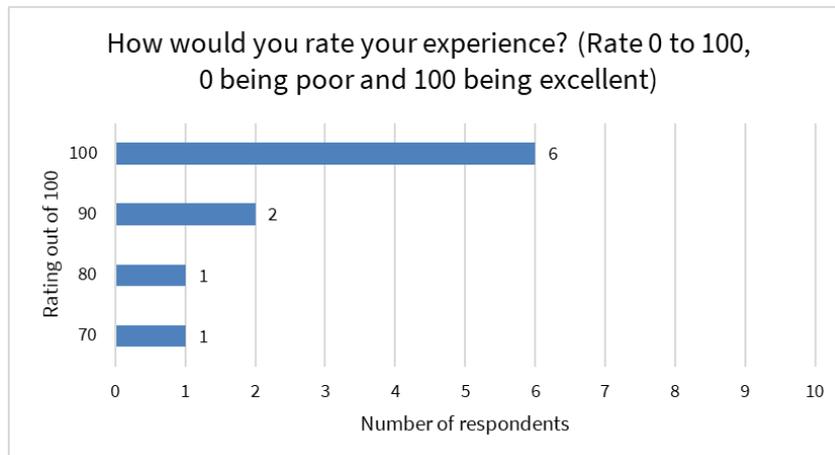
1. Which LSCFT Clinic/Department/Service have you recently accessed?
2. How would you rate your experience? (rate 0-10, 0 being poor 10 being excellent)
3. What areas of care and treatment LSCFT have provided, are you happy with?
4. What have LSCFT done well?
5. Are there any areas that have caused you concern?
6. Thinking about communication and customer service. Please rate how well LSCFT communicated with you in relation to your appointment/service (rate 0-10, 0 being poor 10 being excellent)
7. Is there anything LSCFT could have done better?
8. Was there anything missing from the service provided?
9. Please think about your experience with us from start to finish and tell us of any areas you think we could improve. For example, how LSCFT communicated with you and how easy it was to get to your appointments.
10. LSCFT would like to support people to take more control of their own health and wellbeing so that they can stay happy and healthy for longer. What support do you need to make this happen?

Data analysis:

Once all service users had been contacted, the data from SurveyMonkey was exported and HWT staff analysed the data by service. Themes were identified with positive and areas for improvements highlighted.

Dentistry

There were 10 respondents who gave their feedback on Dentistry services in Preston.



Summary

A common theme which emerged was the difficulty of getting an appointment. Many respondents stated that they struggled to get an appointment and faced long waiting times. There was poor communication when trying to get an appointment with patients often having to speak to multiple members of staff, which caused issues with accessibility and the ability to sort the patient's problems efficiently. However, there was good communication once an individual had obtained an appointment. Most patients stated that they felt informed, received a good quality of service, and felt safe due to the services following the Covid-19 regulations.

Positives

- Treatment is of good quality.
- Communication (once appointment is booked) is good.
- Good Covid-19 regulations.
- 70% of respondents did not have any concerns.

Areas for improvement

- To have more available appointments.
- To have shorter waiting lists.

“I am terrified of the dentist. They were reassuring, friendly and talked through everything they were going to do”

“The dentist treated me then and there. Due to Covid it was bang on really. They gave me options for treatment”

“The biggest thing they need to solve is not being able to get a dentist. People are waiting to get on the list, but they cannot get on. It is full. That is my biggest concern. That’s why I ended up calling the emergency list”.

“I had to make three phone calls to get what I needed. I called one; one said they would phone back; then I spoke to another dentist - I was on the phone for half an hour altogether. I felt stressed but I don’t know if that’s standard procedure. I explained my symptoms and one said the opposite to the other”.

Inpatient unit (Older Adult Mental Health)

There were 2 respondents who gave their feedback on the Older Adult Inpatient unit in Lancaster. This unit is a mental health unit.

Both respondents rated their experience 10/10. Both respondents also stated that communication and customer service in relation to their service was 10/10.

Summary

Both respondents did not think that the service needed to improve, and both stated that they were very happy with their experience of the service. Both respondents felt that their needs had been met.

Positives

- Staff are amazing at their job and show they care - they are good at listening, reliable and go out of their way to help.

Areas for improvement

- Both respondents stated that there was nothing which could be improved.

“They made sure I was safe. Safety was key”.

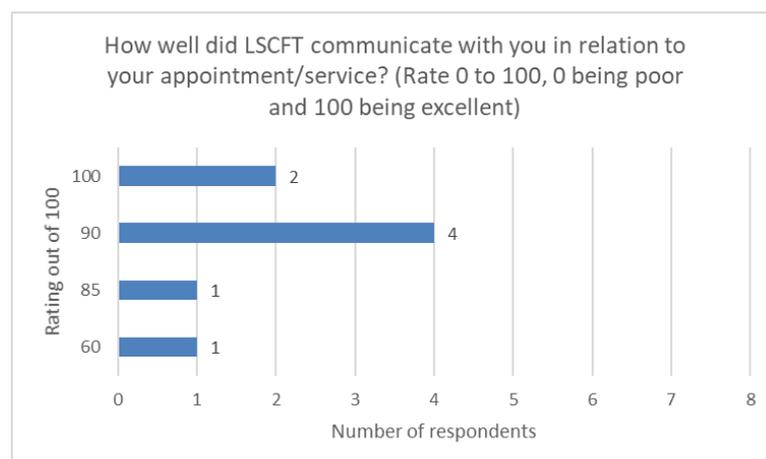
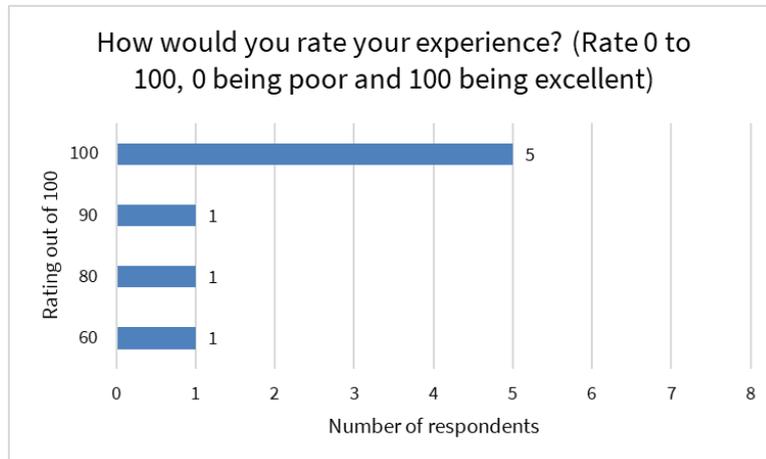
“They are always there, there is always someone to talk to. I have had some bad times and I can always count on them. In terms of communication, I have a few numbers that I can ring so if one doesn't answer, I have other numbers I can try”.

“Staff are good listeners; they take their time with you - it is good to be listened to”

“I can't praise them [staff] enough, I see them as my friends”

Home Treatment and Mental Health Liaison Team

There were 8 respondents who gave their feedback of the Home Treatment and Mental Health Liaison Team in South Cumbria.



Summary

All respondents praised the staff they had been in contact with. It was evident that staff treat their patients with care, compassion and understanding. Patients seem to trust the staff which enables them to feel confident to talk to staff about their thoughts and feelings. Patients feel like they are being listened to. Many respondents spoke about how quickly they got an appointment when they were at a very low point and in need of support. Regarding communication, some patients expressed how due to the pandemic they have received a mix of both face-to-face appointments and phone/video appointments and these respondents stated that they like this mix. There were no areas of concern expressed by any respondents. Responses were mixed in regard to medication; with some respondents feeling informed about the medication, they were taking (one respondent stated that they were given an information leaflet about their medication) and some respondents being unsure about whether the dose they were on was right for them.

Positives

- Understanding and caring staff.
- Not rushed - time to sit and talk.
- Mix of face-to-face appointments and video/phone appointments was well received.
- Given an appointment quickly (a matter of days).
- Respondents felt informed.

Areas for improvement

- Ensure appointments are on time.
- A small number of respondents felt like their wish to change treatment was not acknowledged and they had to 'push' for a change to happen.

“They are there when you need them. I was seen quickly; I got a next day appointment”.

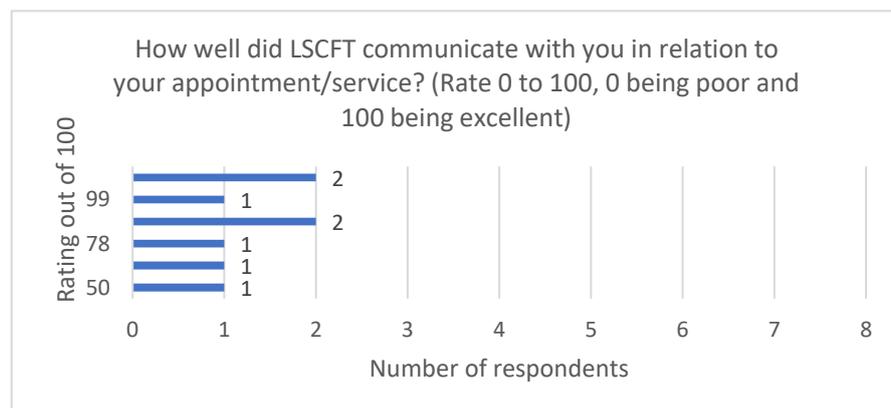
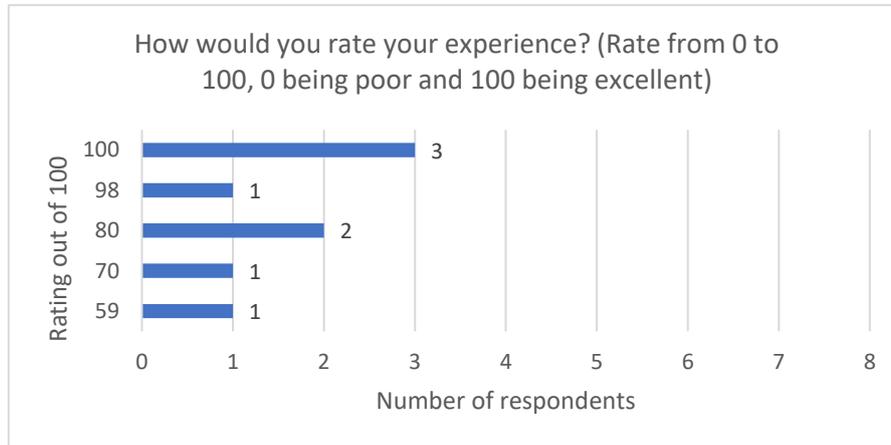
“Building up a relationship with same person. I feel relaxed seeing same person. They have my basic medical notes, but I feel better to just express how I feel and feel better to cry. I trust every one of them”.

“It was quite disorganised...I had a longer wait than expected. My appointment was 2.00pm but was seen at 2.45pm”

“Overall, 10/10 they are really good. They take their time, they don't rush you, patient and compassionate, no time limit at all - can be there 30 minutes, 1 hour plus sometimes, doesn't matter”

CMHT Adults (Pennine)

There were 8 respondents who gave their feedback on the CMHT Adults services in the Pennine (East Lancashire - Burnley and Pendle) area.



Summary

Overall, respondents seemed happy with the service/treatment they had received. All respondents had good experiences with staff, with comments made about how friendly and supportive they were. Respondents also felt listened to by staff. A comment received explained how a respondent had found a Senior psychologist dismissive about their problems, but this was addressed by more junior members of staff. Views about communication were mixed; it seems communication is good during treatment/care but could be improved in terms of appointments running late/changing. Responses were also mixed in regard to medication with some respondents feeling happy with their medication and some not.

Positives

- Community mental health team helpful in signposting to support to help get life back on track e.g., life skills courses, housing support.
- Team are supportive and friendly.
- Despite having to have remote appointments, the team have given great support.

Areas for improvement

- Peer support groups would be helpful - Having constant support and someone to talk to and normalise mental health issues.
- Support for carers - even just checking that they are ok would be helpful.
- Involve carers more in care plans.
- Support to live more healthily would be beneficial for mental and physical health - diet and exercise.
- Be consistent - make sure you keep appointments and communicate if these need to be changed.
- Support to access life skills courses would be beneficial - some respondents had received this and found it helpful, so increasing awareness so more people have access.

“They listen to you and support you and it’s great that they are available 24 hours a day”

“Not sticking to appointment times all the time - e.g., said will call on a Friday and I’d have to chase on a Monday so without support over the weekend”.

“Some mix ups with timings of appointments with psychiatrists - changing appointment times last minute”

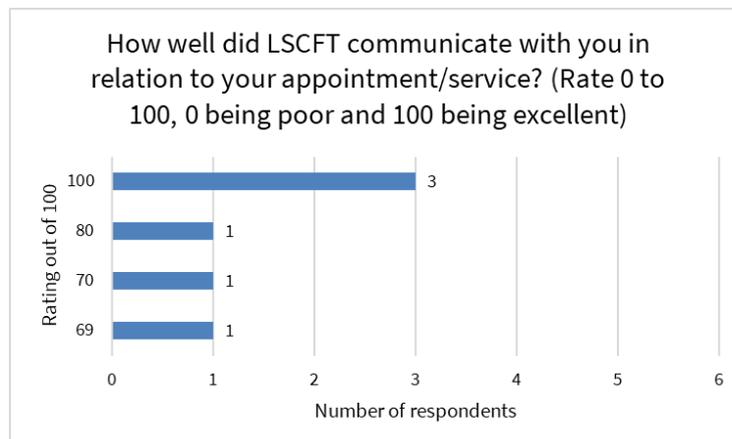
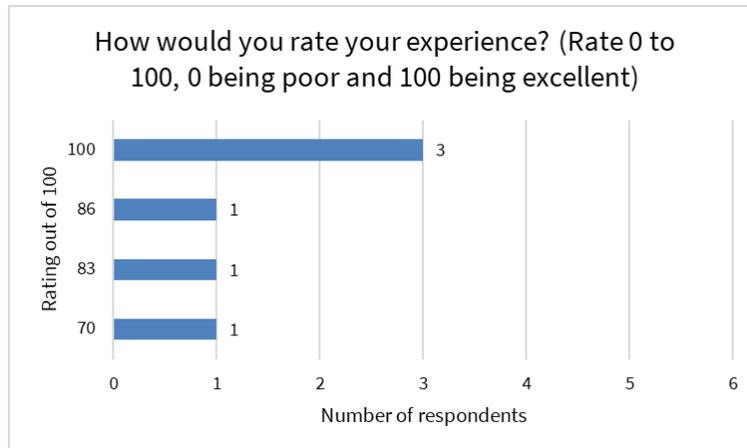
“Would be great to have a peer support group and staff to attend to share experience”.

“My only fault is they haven’t involved my carer which is my husband during the pandemic which would have helped. Or checked in with him to see how he’s doing”.

“Life skills and help with just managing everyday living would help”.

CMHT Older Adults (North)

There were 6 respondents who gave their feedback on CMHT services in the North Locality (Fylde Coast and Blackpool).



Summary

Overall, most patients have had a good experience with the Older Adults CMHT service, with few concerns and areas of improvement. Responses were mixed regarding experiences with staff; some respondents found staff helpful and friendly, with some respondents stating that they found staff unhelpful and often did not listen to their concerns. A small number of respondents expressed how they did not feel like staff have been matched well with them and that the service did not change staff members so that patients had someone which they liked. Many patients stated that there is always someone to contact if they had a problem. Respondents stated that they felt informed and supported with their medication. The involvement of family and carers was mixed, with some respondents praising the service for offering support to family and carers and informing them in the patients care, and other respondents stating they wish their family and carers were more involved.

Responses about this service has highlighted areas of good practice as well as patient concerns. Responses about staff were mixed with some service users

finding them helpful and friendly, and others finding them unhelpful. Respondents stated that they felt informed and supported with their medication. Feedback about the involvement of family and carers was also a mix of positive and negative experiences.

Positives

- Friendly staff.
- Always a number to call for support.
- Support with medication.
- Support to family/carers.

Areas for improvement

- Staff to listen to patients and understand their concerns, to trust how patients are feelings (including their physical health concerns).
- Ensure staff are matched well with their patients and if not, be flexible to change staff members so patients feel happy with who they are interacting with.
- Improve communication with patients and family/carers as well as other services including the police.

“The Consultant spoke to me in third person, whilst I was stood there and sent me out of the room”.

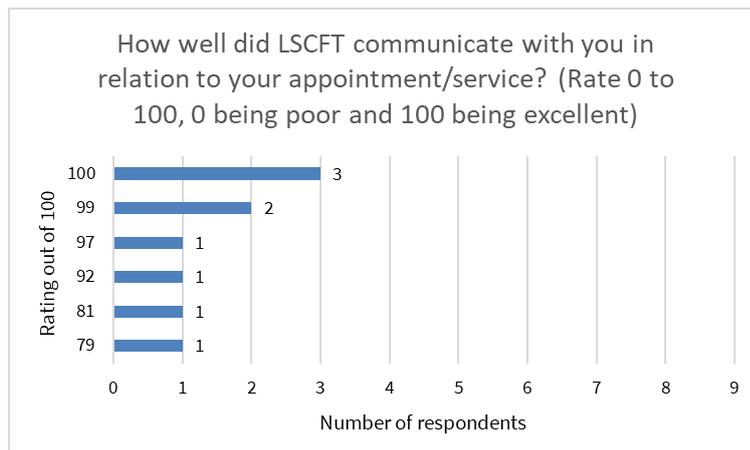
“If she needed anything throughout the week, she could reach her coordinator and he always answered. If she were stuck with her medication, she would ring the mental health helpline that was provided by the team and they would help her”.

“Some professionals need to learn to listen, really listen to the person. Don't brush things under the carpet”

“Always punctual and on time, whether that be face to face or a telephone”.

District Nursing

There were 9 respondents who gave their feedback on District Nursing (North) services in Pennine Lancashire.



Summary

The respondents are very happy with the service, and praised how helpful, friendly, and professional the staff are, even when under pressure. The patients also reported that the district nurses would keep the respondents informed if there were ever any changes. It was mentioned that respondents would like appointments solely with the dedicated District nursing team as other teams are not always up to the same standards, but it was recognised that this is not always feasible with the capacity the district nurses have. There was an issue raised with the length of the time slots for home appointments being too long and thus restrictive to the individual.

Positives

- District team incredibly helpful, friendly, and professional.
- Individuals feel well informed (call in advance if there any changes).

Areas for improvement

- Reduce the time slots for home appointments (12 hours are too long and restrictive for patients).
- Treatment from other nurses is not of the same standard (which is an issue when the district nursing team do not have capacity).
- Help to signpost individuals to other support in the community when possible.

“Always have a smile although they're under pressure - really friendly team.”

“Very friendly and so professional. They're really careful and patient.”

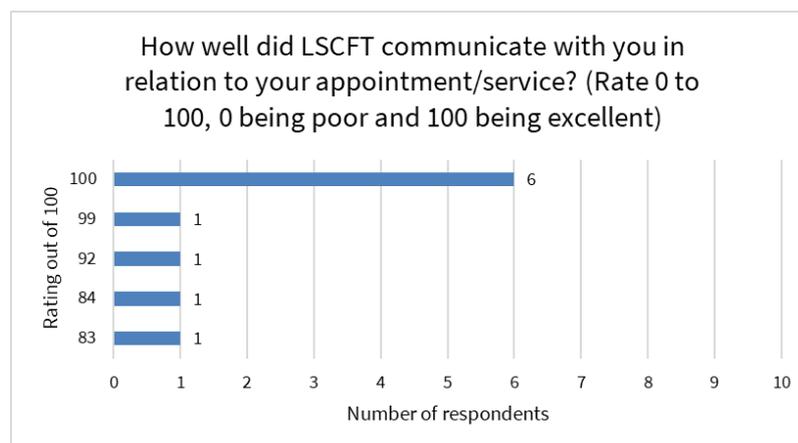
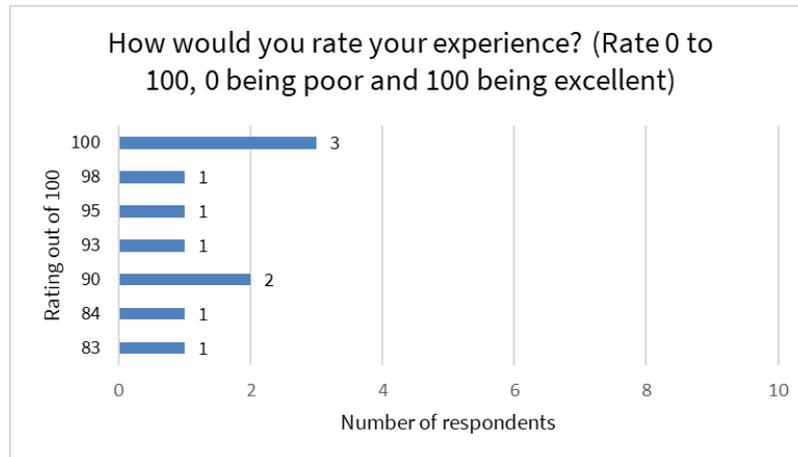
“They communicate well with me and always ring me if they need to change an appointment time.”

“More visits would be great but that's being totally selfish!”

“However, when I was having normal dressing you never knew what time they were going to come out - just given a 12-hour slot so it's quite restrictive.”

Moving Well Service (Musculoskeletal Physiotherapy Service)

There were 10 respondents who gave their feedback on the Moving Well Service in Central and West Lancashire.



Summary

The respondents seem to be mostly happy with the service which is provided, and communication is a key aspect of the service which works well. There was a mixed response regarding the face-to-face versus virtual support. Some respondents are missing the face-to-face support element (though did acknowledge that it was necessary to reduce contact during the pandemic), whilst others actually preferred this new virtual method of receiving support.

Positives

- Communication is good.
- Staff are caring, kind and professional and exceed expectations.
- Quick and timely appointments and support.
- Parking is excellent (free of cost, ample disabled spaces, and located close to the building).

Areas for improvement

- Signposting to other services and information which would benefit the individual (i.e., financial support)
- Maintaining the cleanliness standards (which overall seem to be good, but it is key to not become complacent)

“The care, the concern and the speed that they come back to you is amazing. They ring her so quickly and are on it.”

“Really well organised, feels as though nothing is too much trouble for them and they are all very polite.”

“Very approachable and reachable- easy to contact.”

“There was a slight element of face-to-face contact missing which was replaced with a phone call, however, this was necessary given coronavirus and was completely understandable.”

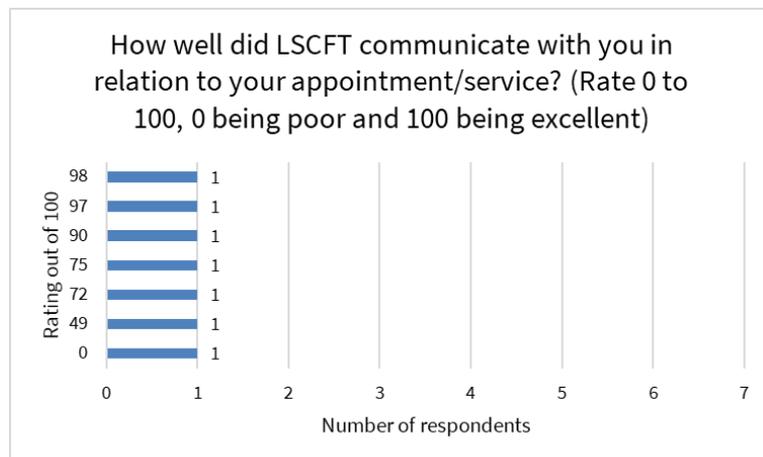
“The parking is amazing, really close to the door. So clean and so easy. Loads of disabled toilets.”

“One occasion, with a member of staff and not hand washing etc. I was confident in sharing my experience and this was sorted.”

“Doesn't know what benefits she is entitled to... If they could provide support with this then this would improve her overall wellbeing.”

Impatient Unit (Adults Mental Health)

There were 7 respondents who gave their feedback on the Central and West Lancashire Adult Inpatient Unit and the Chorley Adult Inpatient Unit.



Summary

It was made apparent from the conversations that a number of the respondents had been inpatients in other units previously therefore ensuring appropriate exit strategies for inpatients is important. Staff were often praised for being kind and helpful, however, it was indicated that the service was understaffed or mainly staffed with students which caused issues for the respondents. Many areas that were causing the respondents concern did not particularly follow any themes, but there was a clear disparity in levels of satisfaction.

Positives

- Kind, considerate and very helpful staff.
- The food was good.
- Feel safe and looked after.
- The unit provides a good structure with weekly activities.

Areas for improvement

- Issues with other patients on the ward being disruptive.
- Understaffed:
 - The staff are always very busy and don't have time to stop and discuss issues or to have a quick chat.
 - Staffing is mainly by students so when asking for something they say they cannot do it as they are not equipped to do so.
 - Lack of consistent engagement between patients and medical staff
- Communication is not always good, as there are instances of respondents receiving mixed messages or care coordinators being swapped without the patient's knowledge or it was not always made clear to the patients on how they are being assessed.
- More fitness and/or life skill related activities (or generally aiming activities to be more appropriate based on the patient)

“Everything has been good - food, kind staff and helpful and considerate.”

“I think that the staff are very helpful...This is the first hospital that I have felt safe in.”

“They swap my care coordinator all the time. I was supposed to have a CPA today and no professionals turned up.”

“It's a bit noisy! Can be disruptive and noisy and I can get a bit scared when patients are throwing chairs etc. They could do with some more staff.”

“Could do with more staff to be honest but I'm conscious that this is a common issue.”

Specialist Triage Assessment and Referral Team (START) - Adult

There were no responses received for the Specialist Triage Assessment and Referral Team (START), despite numerous attempts made by Healthwatch Together to engage with this service. There was 1 consenting patient, however, despite trying, contact was not able to be made with them.

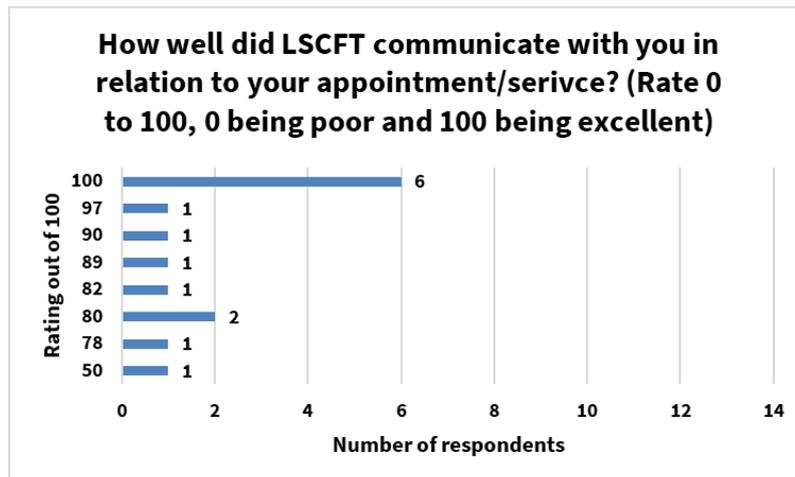
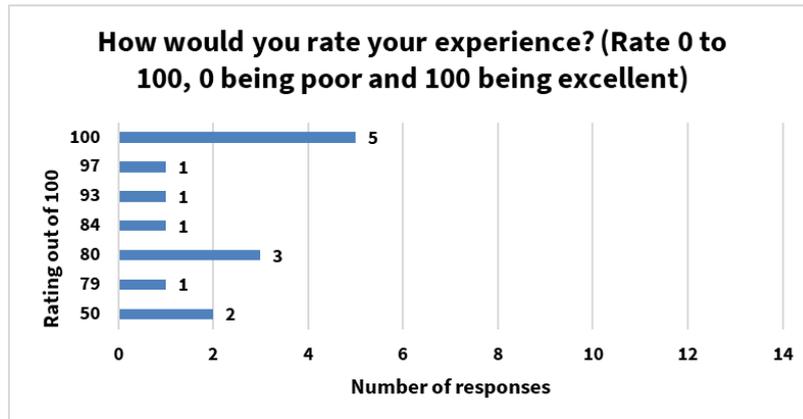
Rapid Intervention Treatment Team (RITT) - Older Adult

There were no responses received for the Older Adult Rapid Intervention Treatment Team, despite multiple efforts made by Healthwatch Together to engage with the service. Email and phone contact was made but there was initial difficulty in communicating with the appropriate staff members who could then gain patient consent. The project commissioner was informed of this and helped to try and increase engagement with the project, but no engagement was received.

CMHT (under 55) Adults (North)

Initially, the focus was on older adults and their experiences of CMHT services. However, it was evident that the service managers we were in contact with, managed all adults who attended CMHT services and so the decision was made to include the findings from these respondents too as they offer further insight.

There were 14 respondents, under the age of 55, who gave their feedback on CMHT services in the North Locality (Fylde Coast and Blackpool).



Summary

There was a mixed response from those who used this service. Some individuals had few to no criticisms at all, whilst others have had a bad experience with the service. The majority of respondents mentioned that the staff are caring, efficient, contactable and actually listen, and have managed to maintain this contact throughout the pandemic despite the challenges. But a common comment made by the respondents was that the waiting lists for the service were too long. Another issue that was highlighted from the conversations was that some respondents have been treated by multiple different staff members which has caused a range of issues.

Positives

- Majority of staff (especially social inclusion team) listen, and are caring
- Ring individuals to let them know what time there are coming to their homes
- Individuals with specific contact numbers and names feel well connected
- Despite the challenges of the pandemic have been good with phone call/virtual appointments (but face-to-face does seem to still be the preferred option)

Areas for improvement

- Waiting times to join the service are too long
- A desire for weekend support (other than the emergency line)
- Consistency of the same staff, as constantly being seen by different staff members cause issues
 - Staff are not able to know everyone and their personal situations but this results in 'text book' help rather than personalised support
 - Quality of help fluctuates with different staff members

“Feeling listened to is the most important part. Sits and takes the time to chat through things.”

“The support over the phone has been invaluable and they have adapted so well to the new methods of communication.”

“Lots of staff don't read notes before come so I have to re tell my story. I like to see the same person, it's always someone different. Never the same member of staff.”

“The waiting time to get into the service is very concerning, took around a year...She had to massively fight to get the help.”

“When she saw a psychiatrist in person, she said it is too black and white- not realistic of life as she was treated like she is out of a text book rather than with a personalised approach...all they understand is text book answers that they want to blanket across every patient rather than working to individually identify issues and create a pathway forward.”

Conclusion

We received 74 responses across 8 LSCFT services. Although response rate was low for some services, respondents have given invaluable feedback and themes for each service have emerged which have given insight into good practice and areas for improvement for each service to help inform the upcoming LSCFT Clinical Strategy.

Dentistry

There were 10 respondents for the dentistry service. Feedback revealed the issues around trying to get an appointment and long waiting times as well as the communication issues which patients receive when trying to get an appointment. However, once an appointment is obtained, communication and quality of service was up to an excellent standard.

Inpatient unit (Older Adult Mental Health)

There were 2 respondents for the Older Adult Inpatient Unit. Although there were only 2 respondents for this service it has been shown that staff are caring and friendly. No improvements were given.

Home Treatment and Mental Health Liaison Team

There were 8 respondents for the Home Treatment and Mental Health Liaison Team. Respondents described staff as caring, compassionate, and understanding. A large number of respondents spoke about how quickly they were given an appointment when they needed one. A mix of face-to-face and phone/video appointments in the pandemic has been received well. Responses were mixed regarding medication with some feeling informed and others being unsure about whether their dose was suitable. No areas of concerns were expressed.

CMHT Adults (Pennine)

There were 8 respondents for the Adult CMHT service. Overall, respondents seemed happy with the service/treatment they had received. Staff were described as friendly and supportive. Comments made about communication were mixed; with good communication during care/treatment but room for improvement in terms of communication around appointment times. Responses were also mixed in regard to medication with some respondents feeling happy with their medication and some not.

CMHT Older Adults (North)

There were 6 respondents for the Older Adult CMHT service. Responses about this service has highlighted areas of good practice as well as patient concerns. Responses about staff were mixed with some service users finding them helpful and friendly, and other finding them unhelpful. Respondents stated that they felt informed and supported with their medication. Feedback about the involvement of family and carers also included a mix of positive and negative experiences.

District nursing

There were 9 respondents for District Nursing. The respondents are very happy with the service, and praised how helpful, friendly, and informative the staff are, even when under pressure. However, feedback did identify an issue with the length of the time slots for home appointments being too long and thus restrictive to the individual.

Moving Well Service (Musculoskeletal Physiotherapy Service)

There were 10 respondents for the Moving Well service. The feedback shows respondents to be mostly happy with the service, highlighting communication as a key aspect of the service which works well. There was a mixed response regarding the face-to-face versus virtual support, with some respondents missing the face-to-face interaction and others preferring the new virtual methods.

Inpatient Unit (Adults Mental Health)

There were 7 respondents for the Adult Mental Health Inpatient Unit. It was highlighted that the food provided by the facility was good and that it felt safe. Also, the respondents often praised the staff for being kind and helpful, however, it was indicated that the service was understaffed. There were other areas that caused the respondents concern such as disruptiveness of other patients and some communication issues.

Specialist Triage Assessment and Referral Team (START)

No responses were received for this service, despite efforts made to engage from the HWT team. HWT received contact details for 1 consenting patient, but contact could not be made.

The Older Adult Rapid Intervention Treatment Team

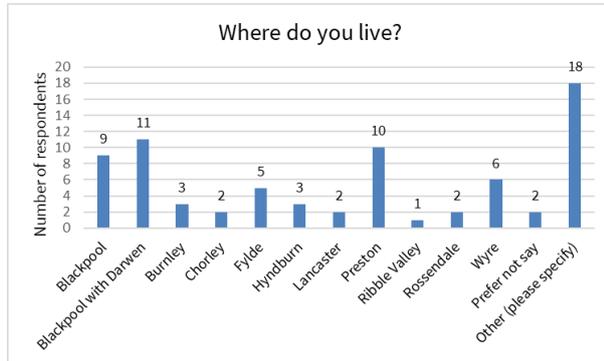
No responses were received for this service, despite efforts made to engage from the HWT team.

CMHT (under 55) Adults (North)

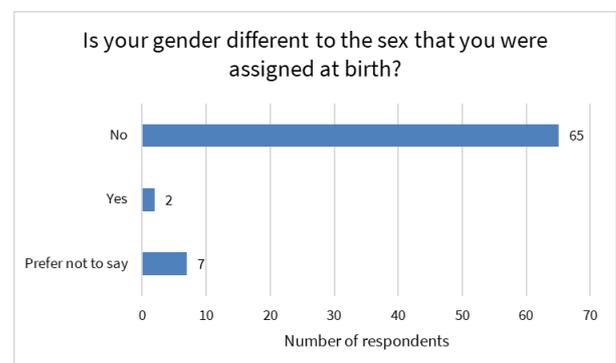
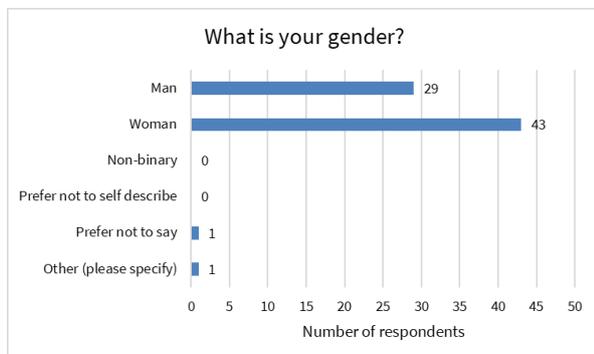
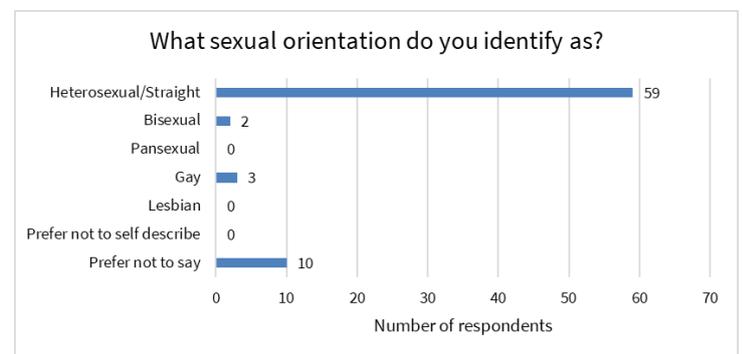
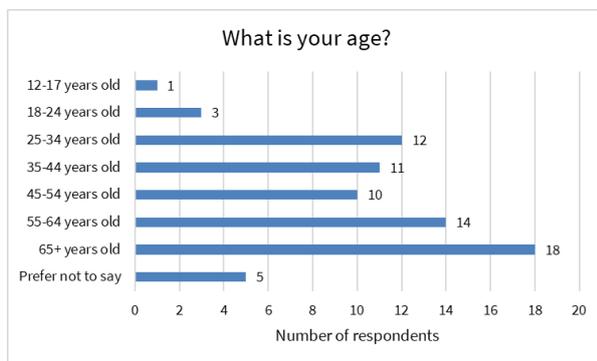
There were 14 responses under the age of 55, from the CMHT Adult service. The feedback that the respondents gave was rather diverse on this service, but there were still a few themes identified. The staff were often praised for being caring and listening, as well as raising to the challenges of delivering the service during the pandemic. But a few issues were highlighted, predominately the long waiting lists and the inconsistency of the same staff members treating one individual.

Demographics

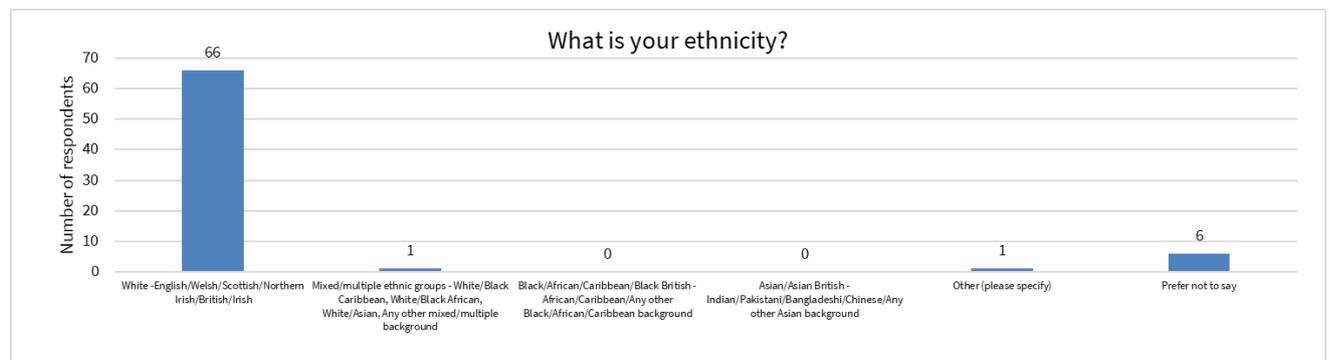
Total of 74 responses.



Other (where do you live?) includes:
Ambleside, Kendal, Ormskirk, NFA,
Leyland, Barrow-in-Furness, Ulverston,
Penwortham, Clayton le Woods,
Ecclestone, Bamber Bridge, Longridge.



Other (what is your gender?) includes: Identifies as both man and woman.



Other (what is your ethnicity?) includes: Muslim.

List of Recommendations

- HWT projects are not generally carried out using demographic targets and are more focused on seeking responses from people willing to be engaged with. However, it was noted that 89.2% percentage of respondents identified as White -English/Welsh/Scottish/Northern Irish/British/Irish and 79.7% of respondents identified as heterosexual/straight. Only 5.4% respondents were younger than 24 years of age.
LSCFT may wish to consider exploring some specific demographic groups for feedback so that there is a higher representation of certain groups.
- Build co-production into all services to ensure a person-centred approach across the trust.
- Ensure consistent standards of quality of care and treatment.
- Manage patients' expectations of care effectively.
- Involve carers and family in patients' care plans as much as possible where it is appropriate (carers and families are relied on to provide support - do they understand? can they do it? etc).
- Increase multi-agency working and link more closely with other agencies and the voluntary sector to ensure safe and appropriate referrals into community support.
- Aim to implement consistency of allocated case workers (patients reported that the frequent changes led to inconsistencies - and in some cases alternative case workers did not show up, damages confidence and reduced 'personalisation').
- Reduce time slots from 12 hours to a more reasonable length (e.g., 4 hrs, morning, or afternoon).
- Continue mix of phone/video and face to face.
- Improve appointment booking processes.

HWT also suggests that LSCFT may wish to consider how the findings of this project can inform:

- LSCFT Clinical Strategy.
- LSCFT operational systems, policies, and procedures
- LSCFT staff training modules.

Appendix 1: Reference request letter sent to service managers.

Dear _____,

We are writing from your local Healthwatch. We are working with Lancashire and South Cumbria Foundation Trust to hear what it is like for patients who access their services.

We are currently carrying out a piece of work to feed into the clinical strategy and we want to speak to your patients to understand what is working well and what could be better. The feedback from this engagement piece will be independently evaluated and will help to inform Lancashire and South Cumbria Foundation Trusts upcoming clinical strategy. Healthwatch Together want to ensure that patient experience is at the heart of the strategy.

Coronavirus and restrictions have meant that Healthwatch are unable to carry out usual methods of engagement. We have developed an online survey however; feel that this alone is not enough to really showcase experience. We are writing today to ask for your support in engaging with patients via telephone.

We have included a patient letter explaining the importance of their feedback. We would be grateful if you could circulate this to your patients so that we can ensure that feedback is representative of the various services that Lancashire and South Cumbria Foundation Trust offer.

Healthwatch are interested in speaking to people from a wide range of backgrounds and are grateful for any support you can give in engaging with service users.

We are hoping that with consent you could speak to patients and ask them if they are happy to be contacted by their local Healthwatch.

We do not want to create additional work for you and appreciate the pressures currently. However, we would very much appreciate it if you could collate a list of names and contact phone numbers of participants who have consented to share their experience with local Healthwatch.

Kind Regards

Appendix 2: Patient letter.

Hello,

You are receiving this letter because we believe you may be engaging with services provided by Lancashire and South Cumbria NHS Foundation Trust (LSC NHS FT) or have done so in the past.

As you may know, the Trust delivers a very wide range of services, which include:

- Dentistry services
- Clinics, community, and nursing services
- Children and young people's mental health and physical health services
- Learning disability services
- Family health services
- Sexual health services
- Mental health services
- Older people's services
- Hospital services

Like many organisations LSC NHS FT are keen to know what is working well and what would be better. This is so that they can improve what they do and how they do it.

Lancashire and South Cumbria NHS Foundation Trust are currently working on a Clinical Strategy. The strategy has been designed to shape their overall approach, with consideration to patient journey and experience.

We would like to invite you to respond to a telephone conversation, designed to find out about your experience of services and clinics delivered by LSC NHS FT.

The Trust has asked Healthwatch Together to independently carry out a telephone consultation and analyse its results. Our independence means you can feel more confident to describe your experience and share your ideas without worrying about this having any impact on any treatment you may be having just now.

The Trust has asked us to do this work because it is committed to try to make things better for its patients. LSC NHS FT is interested in ideas for improvement and would like to hear what helps to make patient experience great.

Healthwatch Together are keen to gather as many responses as possible and will welcome all of your views, good or bad. We will be writing a report summarising all of the responses. Please be assured that we will only use this information for this purpose.

Should you wish to be contacted by your local Healthwatch and take part in a telephone call, confirm your consent to participate with_____.

Kind Regards