

## Patient and public findings report 2021



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## What is Healthwatch Sunderland?

Healthwatch Sunderland is the independent local champion for people who use health and social care services. We're here to make sure that those running services put people at the heart of care.

By speaking to Sunderland residents, we aim to understand their needs, experiences (including examples of good practice) and concerns of accessing and using local health and social care services. This intelligence allows us to speak out on their behalf to local service providers, focusing on people's concerns about current services and ensuring they are listened to and addressed by those who are running services.

We encourage and work with local services to involve Sunderland residents in the changes to health and social care provision. The ultimate aim is to get things right with health and social care services which meet the needs of the local community now and in the future.



*We champion what matters to you  
and  
work with others  
to find ideas that work.*

*We are independent and committed  
to making the  
biggest difference to you.*



# Executive Summary

This evaluation was carried out with the aims of discovering and understanding patient's experiences of those services provided by All Together Better Sunderland (ATB) partners.

Across June and July 2021, Healthwatch Sunderland launched a survey to gather people's general experiences of using their local out of hospital health and social care services and spoke to patients of some services on a one-to-one basis.

This report covers the feedback received from those people who engaged and had used services during 2020 and up to June / July 2021. A total of 525 surveys were received with an additional 47 one-to-one interviews undertaken by the Healthwatch Sunderland team.

The purpose of this report is to share the findings with those organisations who make up the ATB alliance to help them identify what is working well and highlight those areas that need to be improved.

## Key themes/findings

### Community health and social care services

People's experiences with GP practices have predominantly been good. Highest levels of satisfaction were from those patients who had accessed either a nurse practitioner or a practice nurse appointment. However, the most common complaint we heard across all feedback related to people's difficulty of getting an appointment in the first place. Many people reporting they were unable to get through on the phone. When they did get through there were very limited appointments available, especially face-to-face.

Most people were happy with pharmacy services, and we received a lot of positive comments about district nurses and community equipment services.

### Medication and prescribing

268 survey respondents stated that they regularly take prescribed medication. Of these patients 50% would like a full medication review and 56% would be happy to have a remote medication review either by phone or video call. Healthcare professionals trusted the most to carry out the review were GPs and hospital specialist/consultant with pharmacists shown to be trusted the least.

### Recovery at Home

People reported high levels of satisfaction for this service. Many people reported the service responsive; staff caring and professional was believed to have helped to prevent attendance at the Emergency Department or hospital admissions.

## **Integrated Discharge Team**

Just over a third (34%) of survey respondents didn't feel involved in decisions made regarding their discharge from hospital. In addition, levels of satisfaction around the quality of support they received when leaving hospital was very mixed. Many of those who went straight home from hospital often reported that adequate support wasn't in place for them and this had a negative impact on their health and overall recovery. Whereas those who went into a care facility felt very supported and reported they felt they were making good progress due to the care they were receiving.

## **Next steps**

The feedback from this report and the six reports that look specifically at the results related to the Primary Care Networks will be shared with ATB, to provide robust information upon which to build future service responses.

The PCN reports will focus on experiences of those who have used services based in a particular PCN or with a postcode relevant to that geographical area.

The 6 PCN areas are:

- Coalfields
- Sunderland East
- Sunderland North
- Sunderland West 1 & Sunderland West 2
- Washington

Comments received from survey respondents on specific services will also be shared with ATB.

## Who are All Together Better Sunderland?

All Together Better is an alliance that began in 2015 with the aim of bringing together all providers and commissioning organisations in Sunderland to deliver the most personalised, pro-active, and joined-up care possible for people in the city.

By bringing health and social care teams together under one united vision, ATB aims to improve peoples' experiences of using health and care services and their health outcomes and supporting people to live longer with a better quality of life.

Working together as an alliance means that all partners are equal in standing and focused on working across organisations to do what is best for the person and for the whole health and care system.

Partners include:

- Sunderland Care and Support (SCAS)
- Sunderland Clinical Commissioning Group (CCG)
- Sunderland City Council
- Sunderland GP Alliance (SGPA)
- South Tyneside and Sunderland NHS Foundation Trust (STSFT)
- Cumbria, Northumberland, Tyne & Wear Foundation Trust (CNTW)
- Local voluntary and community sector

As we recover from the COVID-19 pandemic, ATB wanted to hear from people on matters that are the most important to them in the community where they live to ensure that community services are organised well, so people have a good experience of care. They also wanted to know what people think they do well and where they need to improve.

As an independent champion for people who use health and care services, Healthwatch Sunderland have supported ATB to carry out this work.

## Methodology

Methods used in the engagement with patients and service users included a mix of surveys and one-to-one interviews. Engagement ran for a 5-week period, during June and July 2021.

Survey questions were drawn up by ATB and were designed to gather people's general experiences of using community-based health and care services specifically over the past 12 months and were grouped around four specific areas. These were:

- Community health and care services
- Medication and prescribing
- Recovery at Home
- Integrated Discharge Team

Surveys were promoted via the Healthwatch Sunderland e-newsletter, social media channels, website and via their networks and contacts within the NHS, social care, and local voluntary and community sector. Many of the organisations kindly promoted the survey on their behalf through their own networks and social media links etc.

Surveys were available to complete online using Survey Monkey or as a paper-based- version which was supplied with a self-addressed envelope. In addition, people could call Healthwatch Sunderland where staff were available to assist in completing the survey over the phone.

Healthwatch Sunderland also supported a learning disability and autism advocacy group to complete the surveys via an online workshop. The team also facilitated an online meeting with a Dementia service to ensure the survey was accessible to their service users and carers. The survey was discussed in detail to ensure both Healthwatch and participants got the most out of their survey responses.

In addition to collecting patient feedback via surveys Healthwatch Sunderland worked alongside ATB staff to carry out 47 one-to-one interviews. ATB staff were able to identify suitable patients and gained consent from them to be contacted. Healthwatch staff contacted the identified patients who had recently used or were currently using services delivered by ATB. These included:

- Recovery at Home (Nursing)
- Recovery at Home (Lusci)
- Recovery at Home (GP visits)
- Hospital discharge
- Care home stays
- Farmborough Court
- Wound Clinics
- Intermediate Care Assessment and Reablement (ICAR)

- Community Integrated Team
- Social prescribing

Healthwatch Sunderland staff carried out semi structured interview with each patient that asked questions about a specific ATB service they were currently using. Prior to interviews taking place a guide was created, to guarantee that data collected was as comparable as possible.

Due to COVID-19 lockdown measures being in place, all interviews were carried out remotely. These were in the main by phone, although a small amount of Zoom calls were also made. It is acknowledged that these remote methods are not ideal for reaching some patients who are using ATB services.

## Findings

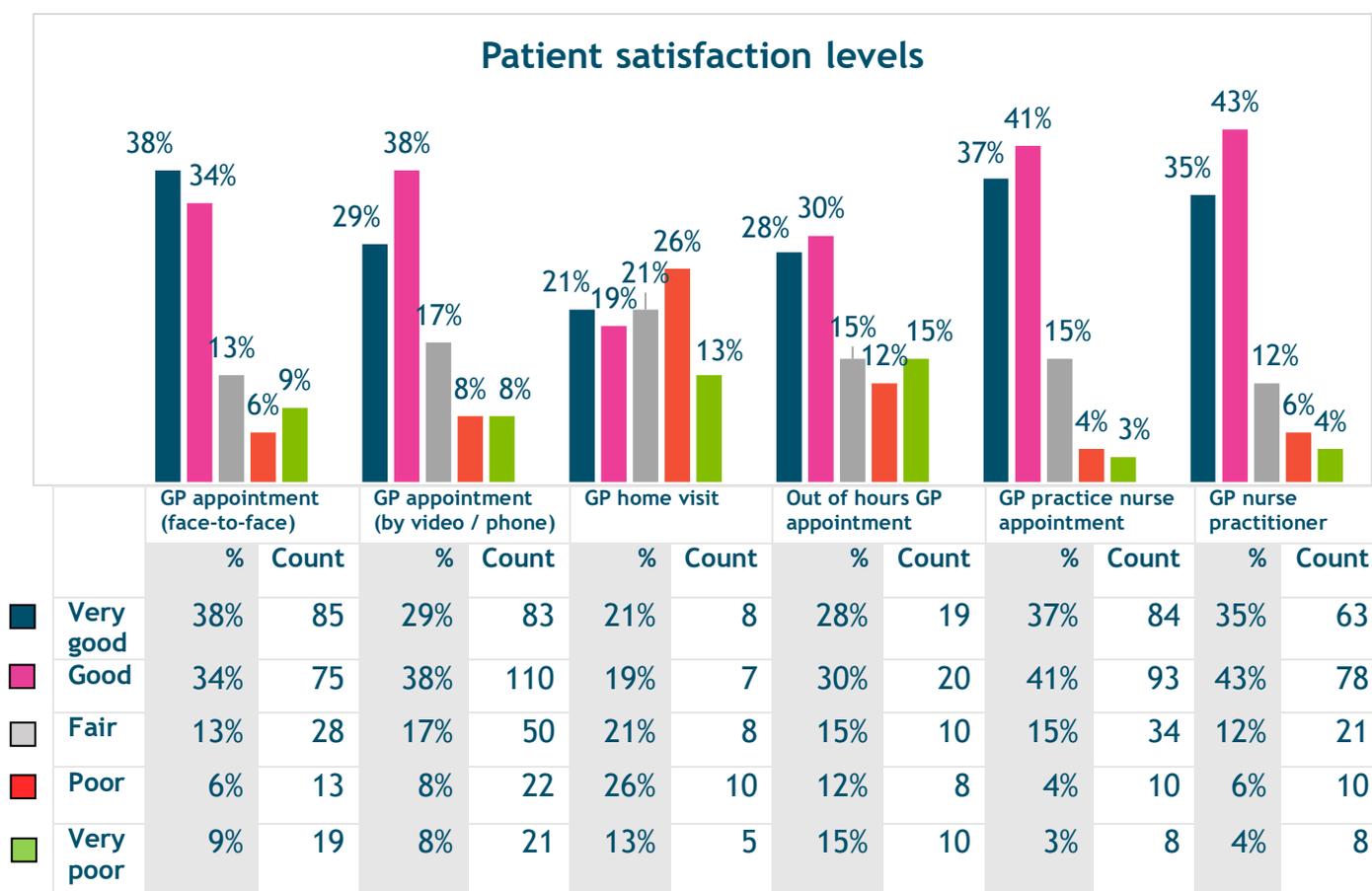
The findings of this report are based on the 525 people who responded to the questions found in the survey (see appendix 3) and the 47 people who took part in a one-to-one interview and answered questions related to a specific ATB service they are a service user or patient of. Please note that not everyone fully completed the survey, resulting in a higher number of responses to some questions compared with others.

### Community health and social care services

People’s experiences of using community-based health and social care services were mixed and dependent upon which of the services they had used.

#### GP practices

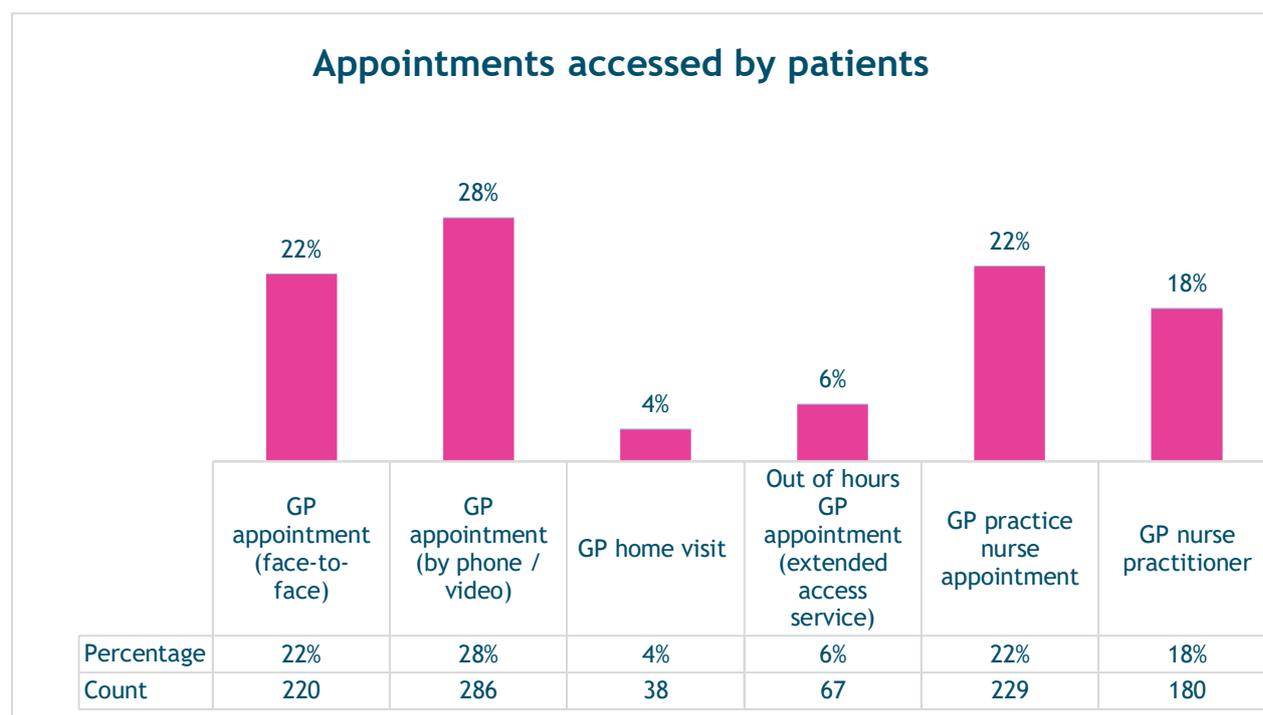
395 people stated they had used their GP over the past year. People were asked to rate their experiences of services used and were invited to give feedback on multiple appointments attended over the past 12 months. This result in 1020 pieces of feedback in total, the results of which can be seen below:



Satisfaction levels of those experiencing a GP appointment by video or phone were high, with most people rating it as either very good or good. Levels of satisfaction were also very similar with those who had accessed a GP face-to-face appointment or an appointment with the GP practice nurse or GP nurse practitioner.

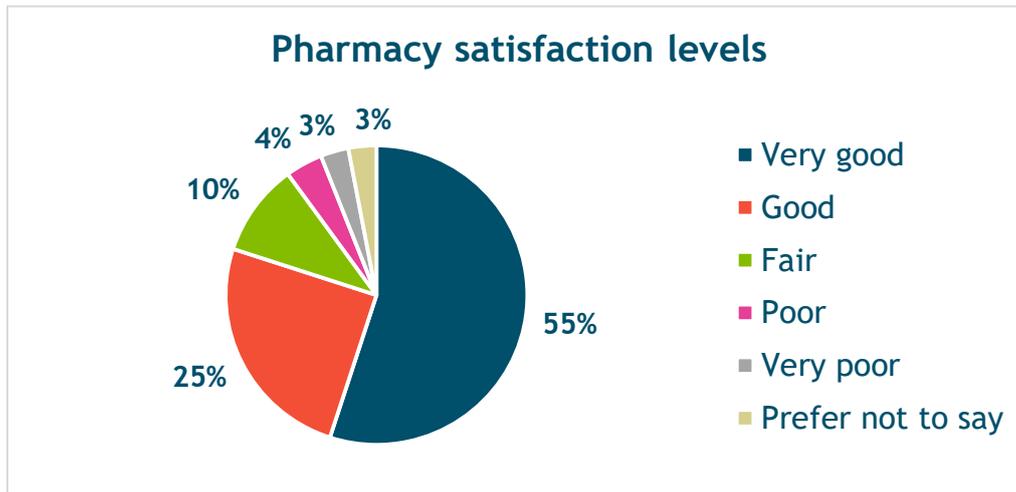
In comparison, levels of satisfaction from those who had used GP home visiting, or the extended access service were lower.

Due to the pandemic most appointments people had accessed were appointments with their GP by video or phone (28%) followed by appointments with their GP face-to-face (22%) or an appointment with their GP practice nurse (22%).



## Pharmacies

People were asked if they had made use of a local pharmacy service over the past year. 365 people replied to say they had used one or more local pharmacies, with people being able to rate up to 3 pharmacies. When rating their experiences of using them, 80% of all ratings received were either very good or good.



People reported that they have, in absence of access to some services, started to use their pharmacies more over the past year.



**“Have relied on pharmacy services. No issues with the services encountered.”**

(Female aged 55-64)

**“I have electronic prescriptions ordered online and sent virtually to the pharmacy who dispense and deliver this so quickly - well done Medichem at Vilette road - you are fantastic!”**

(Female aged 45-54)



Other survey respondents commented that they have had good experiences of their pharmacies and GP practices working well together.



**“GP practice and local pharmacy work well together in my experience.”**

(Female aged 35-44)

**“GP service and pharmacies have worked well together to deliver services.”**

(Female aged 55-64)



## Other services

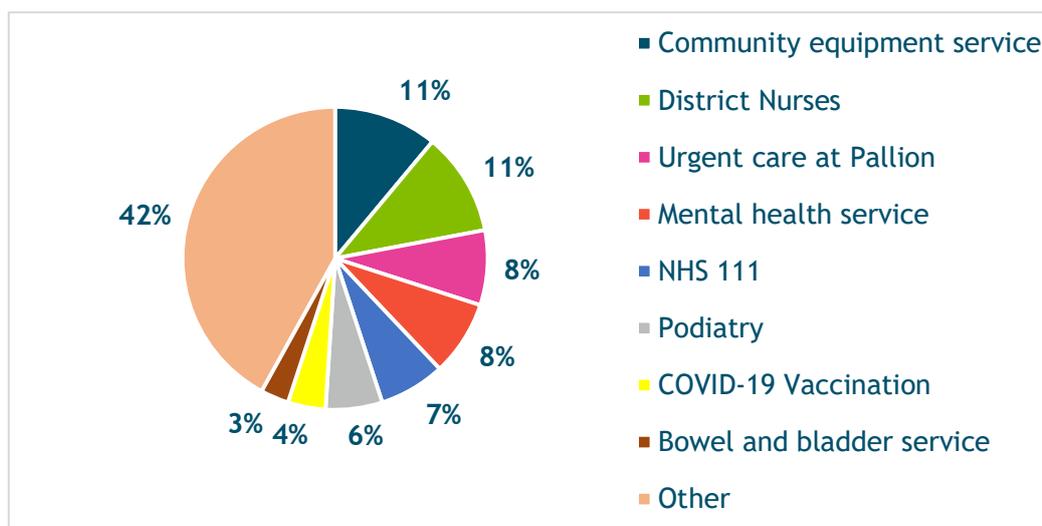
When looking at satisfaction levels of all other services, a range of responses were received. Please see the table of results below:

	Very good		Good		Fair		Poor		Very poor		Total responses
	%	Count	%	Count	%	Count	%	Count	%	Count	
NHS 111	27%	26	28%	27	23%	23	16%	16	6%	6	98
Covid 'Hot Hub' service (testing) at Houghton Primary Care Centre	30%	9	30%	9	26%	8	7%	2	7%	2	30
Urgent Treatment Centre (Pallion Health Centre)	21%	16	32%	25	25%	19	11%	8	11%	8	76
Bowel and bladder service	29%	11	35%	13	14%	5	8%	3	14%	5	37
Mental health services / talking therapies	34%	22	20%	13	8%	5	13%	9	25%	16	65
0-19 years' service (health visiting/school nursing)	31%	9	24%	7	22%	6	6%	2	17%	5	29
Community / district nursing services	33%	17	29%	15	18%	9	10%	5	10%	5	51
Community Acquired Brain Injury Service (CABIS)	14%	2	29%	4	21%	3	15%	2	21%	3	14
Community podiatry services	36%	16	27%	12	16%	7	7%	3	14%	6	44
Community dermatology service	32%	6	26%	5	16%	3	5%	1	21%	4	19
Community physiotherapy	28%	9	32%	10	9%	3	9%	3	22%	7	32
Community dietetics (speaking to a dietician about your diet / nutrition)	50%	13	19%	5	8%	2	8%	2	15%	4	26
Community speech and language therapy	58%	10	18%	3	6%	1	6%	1	12%	2	17
Community respiratory services	35%	6	6%	1	23%	4	18%	3	18%	3	17
Community end of life care services	36%	5	7%	1	14%	2	29%	4	14%	2	14
Community equipment/wheelchair services	38%	14	16%	6	19%	7	16%	6	11%	4	37
ICAR, Houghton le Spring	18%	2	27%	3	27%	3	10%	1	18%	2	11
Farmborough Court	25%	3	17%	2	25%	3	8%	1	25%	3	12
Hospital discharge service (health or social care support to go home)	19%	5	14%	4	26%	7	22%	6	19%	4	26
Urgent care nursing service	40%	10	12%	3	28%	7	4%	1	16%	4	25
Home visiting service	35%	9	19%	5	23%	6	8%	2	15%	4	26
Luscii service (remote monitoring using technology)	21%	3	30%	4	21%	3	14%	2	14%	2	14

Social prescribing practitioner - a person who supports you to access different community and voluntary sector services	19%	3	12%	2	31%	5	19%	3	19%	3	16
Wound care hub at Washington Primary Care Centre	25%	4	31%	5	13%	2	18%	3	13%	2	16
Wound care hub at Houghton Primary Care Centre	10%	1	30%	3	20%	2	10%	1	30%	3	10
Wound care hub at Riverview Health Centre	40%	7	24%	4	12%	2	6%	1	18%	3	17
Wound care hub at Silksworth Health Centre	10%	1	30%	3	30%	3	10%	1	20%	2	10
Wound care hub at Springwell Health Centre	22%	2	22%	2	22%	2	12%	1	22%	2	9
Wound care hub at Southwick Health Centre	41%	5	17%	2	17%	2	8%	1	17%	2	12

As part of the survey, people were invited to comment on the services they had used and were asked to share which they were most satisfied with:

**Which of the community services that you rated in the table above were you most satisfied with?**



126 responses were received and the three services that people specifically commented on most and were most satisfied with were the District Nurses, Community Equipment Services and Urgent Care at Pallion. Many people commented that they were responsive and provided good care.



“Community district nurses, good response time and have always given good care and advice.”

(Female aged 55-64)

“Equipment/wheelchair services. They realised what I would need and delivered it promptly.”

(Male aged 75+)



Positive opinions on the district nurse teams were also reiterated by those people who took part in the interview process. All those who spoke to the Healthwatch Sunderland team were happy with the service and gave high praise to the nurses supporting them with some commenting that their conditions were improving. No one indicated any areas of the service needed improving.



“I have no faults whatsoever. My wounds are healing well, and they are happy with me. Everything is good, I have all the support I need.”

(Female aged 55-64)

“The nurses are brilliant - I can't complain. They are always happy and smiling, I am really pleased with the level of service I get. I can't fault the service. If it wasn't for the nurses, I wouldn't be alive, they deserve all the praise in the world.”

(Male aged 75+)



Positive comments were also received about the Urgent Treatment Centre at Pallion.



“Urgent treatment centre - seen within a reasonable amount of time, very professional service, made my daughter feel at ease, very good treatment, and advice.”

(Female aged 25-34)

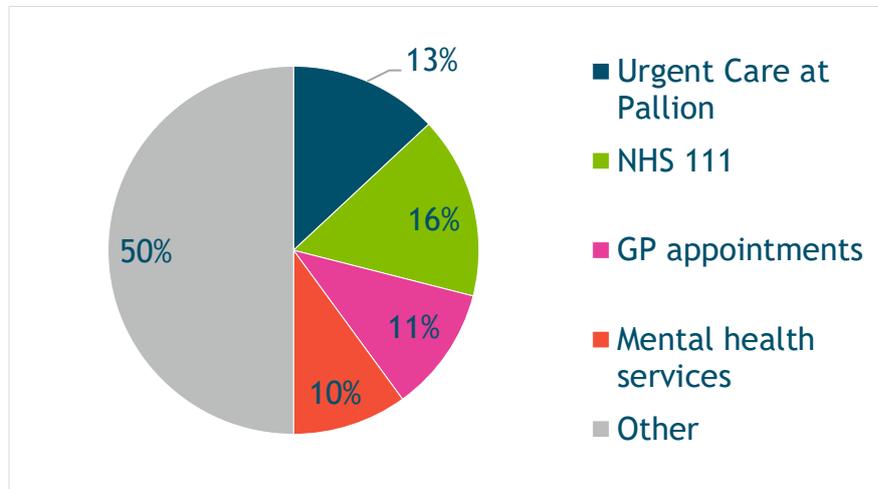
“Pallion Urgent Care - able to have an x-ray - extremely quickly. Nurse was very efficient and caring.”

(Female aged 45-54)



As part of the survey, people were also invited to comment on the services they had used which they felt needed improving:

**Which of these community services that you rated in the table above do you feel needs to be improved?**



91 responses were received and the three services that people specifically commented on the most and were least satisfied with were Urgent Care at Pallion, NHS 111 and GP appointments.

Many people feeding back on Pallion Urgent Care, reported negatively on quality of the treatment and care received.



“Pallion walk in centre as when we used it, we waited hours and when finally seen it was like they seem to do little care and rush you out with pills.”

(Female aged 45-54)

“I ‘hurt’ my elbow, waited at A&E for ages, saw two staff members and then told I should be in Pallion Health Centre. Went to Pallion Health Centre and was sent back to A&E. I later had two operations on my elbow and had an artificial elbow fitted.

(Female aged 65-74)



People's common concerns with the NHS 111 service were with waiting times to get through on the telephone and quality of the service received.



**“NHS 111. At a time when it is so difficult to access urgent care or GP advice. After a serious fall I required advice and referral to urgent care. I called 111 and was dismayed to be in a queue with estimated wait of 40 minutes. This happened again and again. In trying to keep any A&E visits to a minimum I would expect this service could prove invaluable if staffing improved.”**

(Female aged 55-64)

**“NHS 111 - unnecessary escalation to emergency ambulance when actually required referral to afterhours service.”**



(Female aged 45-54)

Those who felt GP practices needed improving, mainly commented on availability and access to appointments, especially the lack of available face-to-face appointments.

**“GP contact has been shocking for elderly family members, waiting for an hour in queue and then cut off. I have witnessed elderly parents neglecting health issues as they feel unable to access a GP or practitioner and scared to risk hospitalisation as the prospect of not having family in to visit is unbearable.”**



(Female aged 55-64)

Frustrations around GP access were also one of the main areas survey respondents commented about when they told us what one thing the NHS could do to improve community services in their local area. Around 26% of all comments received stated that it was important to have access to GP appointments when needed and access to GP surgery appointments should be flexible.



**“Make more appointments available for GPs. I don't want to ring up every day to see if there is space. Have never been informed of out of hours appointments, I've had to ask.”**

(Male aged 65-74)

**“Return the GP service to being a first line of contact, investigation and treatment. Improve its accessibility and ensure patients are seen face-to-face in a timely manner.”**



(Female aged 65-74)

People also told us what they felt health or care community services could do to support their daily life. Lack of GP access was mentioned many times, as was seeking those out in the local community, who may be vulnerable such as the elderly, those with mental ill health, disabilities, or long-term health conditions. People suggested that services need to do more to identify these groups and support them in ways that will promote better health and wellbeing.



**“Maybe check in on patients with lifelong conditions, to see how they are managing.”**

(Female aged 45-54)

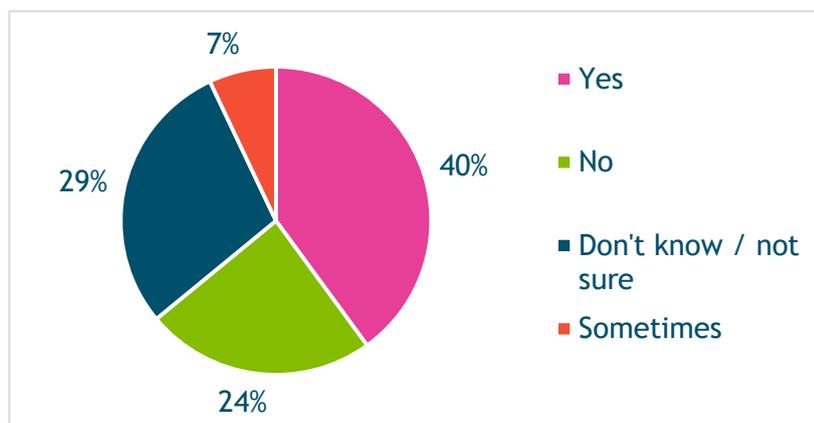
**“More regular reaching out to patients rather than waiting for the patient to contact them.”**

(Female aged 25-34)



People’s feedback on whether they thought health and care staff work well together was mixed, with a high number of people commenting that they did and didn’t agree with this.

### Do you think different health and care staff work well together in your local area?



300 responses were received to this question and whether people responded either positively or negatively, most people agreed that communication and partnership/joined up working were key factors to enable staff to work well together.

“Yes, they collaborate together and communicate to provide high quality care and support to customers/patients to remain independent as possible in their own homes.”

(Female aged 45-54)

“A recent experience of a relative indicated that communication between hospital and community services could have been much better.”

(Male aged 55-64)

“They work well, but the lack of communication is frightening.”

(Male aged 24-34)

## Social prescribing

As part of the one-to-one interview process the Healthwatch Sunderland team also spoke to 4 patients, specifically asking them to feedback on their recent experience of using the social prescribing service. Patients were from the North, East, West 1 and West 2 areas of the city.

All those who had used the service gave positive feedback on their experiences. People commented that the service was supportive and that the Prescribers were knowledgeable.



**“The Social Prescriber is a really good role and has worked really well for us. The support is still ongoing and is yet to be fully resolved but we are progressing well and we would not be where we are without the Social Prescribers support.”**

(Male aged 45-54, carer of social prescriber patient)

**“We are very happy with the support she has received, so nothing to be improved upon. We would just like to say thanks.”**

(Female aged 25-34)



## Wound care hubs

As part of the interview process the Healthwatch Sunderland team spoke to five patients who had used the wound care hubs across the city. Feedback was positive and people commonly told us that the service helps with continuity of care and they liked the proximity of the hubs location to where they lived.



**“When it was the district nurses who dressed my wounds there was no continuity of care. Now at the wound hub there is. I normally see the same nurse. The centre is only a short bus ride away from home and it takes about the same time it took me to walk to the GP practice.”**

(Male aged 65-74)

**“The continuity of care works well - I normally have the same two nurses, who know me, know what is wrong with me and how to care for me.”**

(Female aged 55-64)



## Medication and prescribing

**50% of people who regularly take medication would like a full medication review. Professionals trusted the most to carry out the review were GPs and hospital specialists/consultants.**

268 people responded to say that they regularly take prescribed medication. Of these 54% stated they hadn't had any medication changes over the past 12 months. People gave reasons as to why they thought this was. Most believed this was due to either their health which had remained stable, so no changes were necessary, or because of COVID-19 restrictions they were unable to have an appointment with their GP to carry out a review.



**“No change required as routine check-ups confirmed no change in the conditions.”**

(Female aged 55-64)

**“I think the doctors are too busy or it's not a priority to review.”**

(Male aged 45-54)

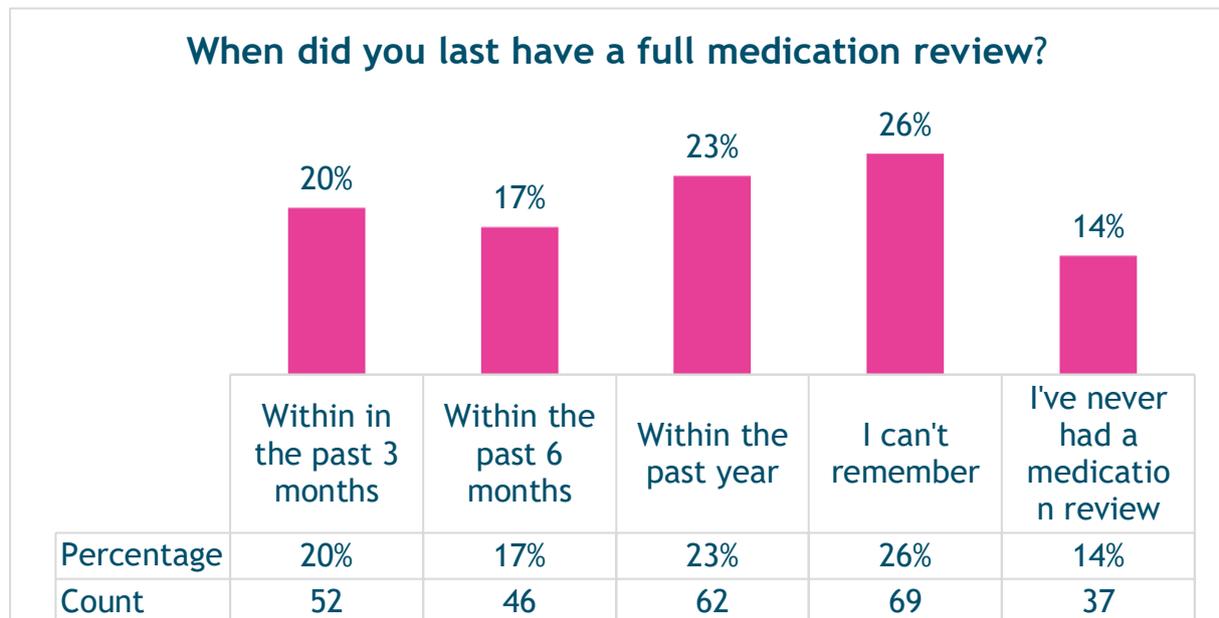
Of the 46% whose medication had changed, most cited they believed the reasons were because of changes in their medical condition/s.

**“Because I had blood tests done and it was noted I may be anaemic, so a new pill was added to my list.”**

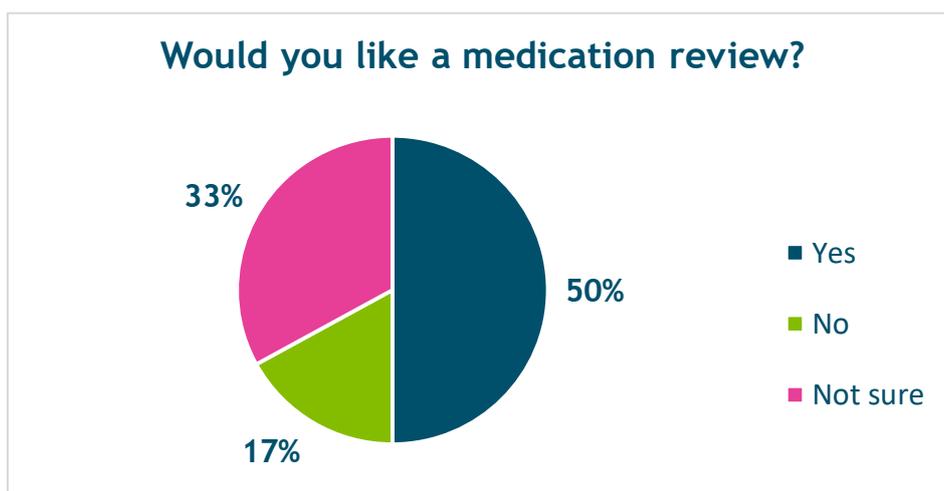
(Female aged 65-74)



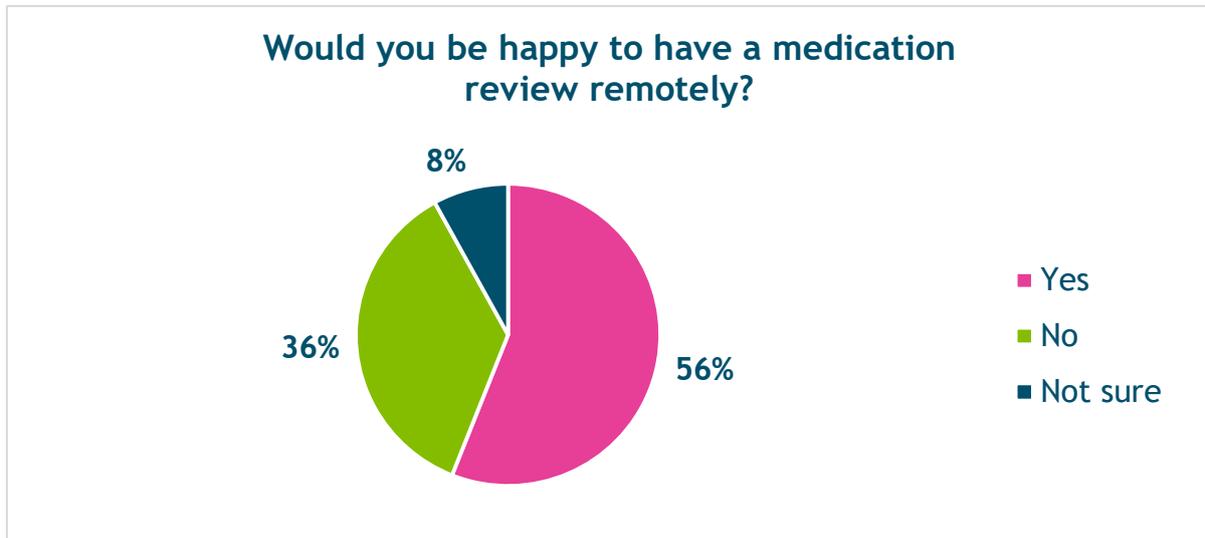
A total of 60% of those people who were taking prescribed medication, said they had received a full medication review by a professional within the past year and the remainder of people (26%) either couldn't remember when they had last had one or 14% of people had never had a medication review.



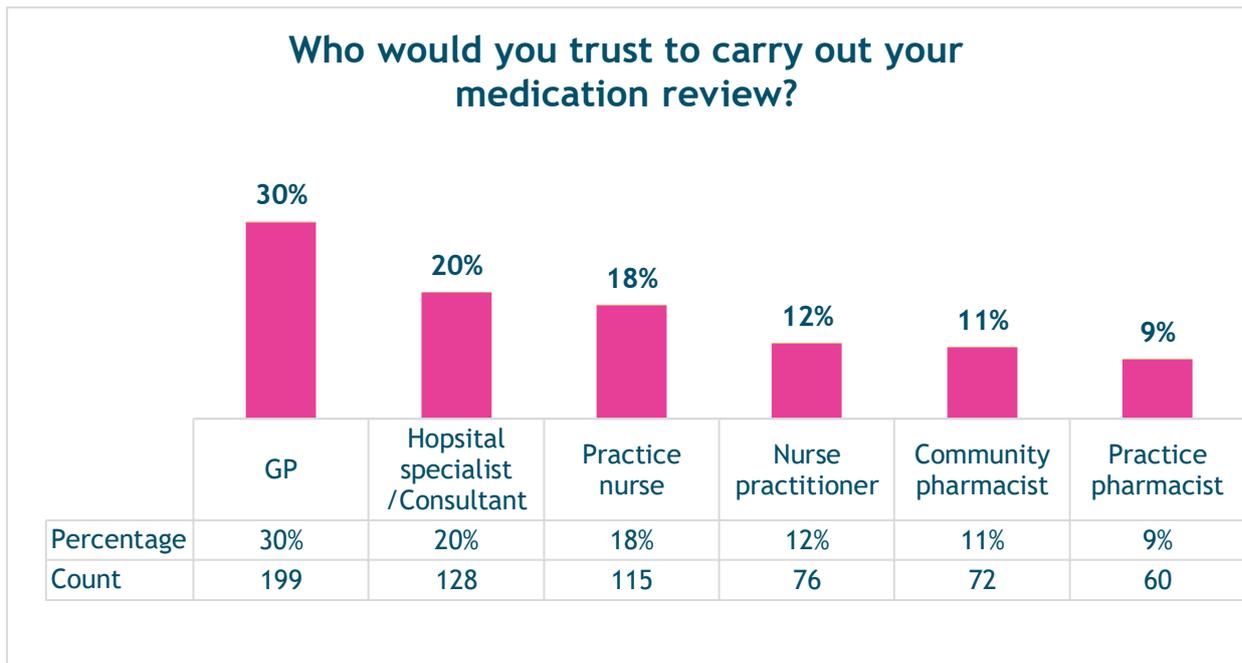
When asked if they would like a medication review the majority of people (50%) answered yes, 17% people answered no and a further 33% were unsure.



56% of people when asked, would be happy to have a remote medication review either by phone or video call.



People were asked who they would trust to carry out the review and were asked to tick all that applied. 650 responses were received with most people choosing their GP or hospital specialist/consultant. In comparison pharmacist were opted for the least.



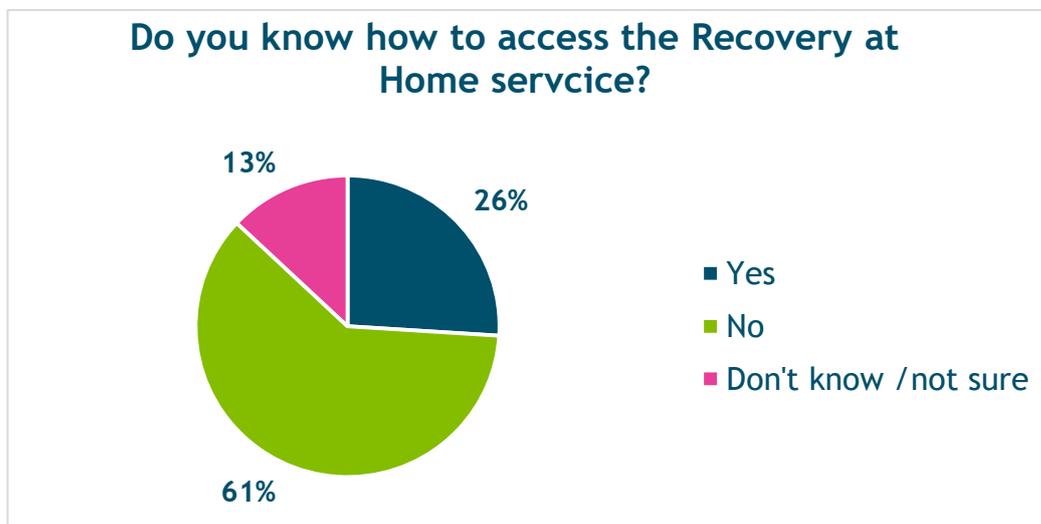
## Recovery at Home service

### Most people found the service responsive and helped to prevent hospital admissions.

The 'Recovery at Home' service in Sunderland operates 24 hours a day, seven days a week. The team respond quickly when people become suddenly unwell. It aims to help people stay well at home without the need to go to hospital.

374 people responded to questions in the survey on the Recovery at Home service, of these 75% of people when asked, hadn't heard of the service.

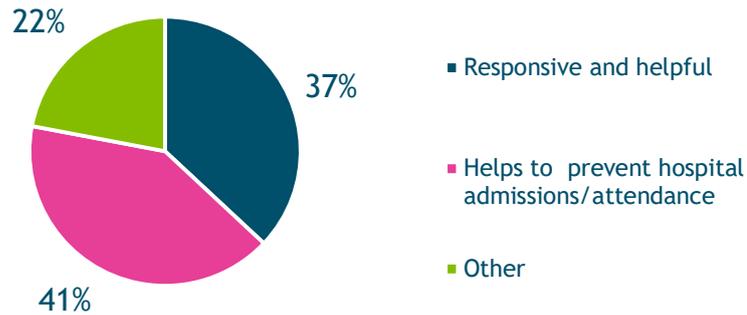
The majority of people (61%) when asked didn't know how to access the Recovery at Home service, 26% agreed that they did and a further 13% were unsure.



59 people said that they or one of their family members was using the Recovery at Home service and when asked what they thought worked well with the service many people were positive about it and gave comments linked to the following themes:

- It helped to prevent hospital admissions,
- Aids the patients to recover at home in more comfortable surroundings,
- Helps to promote people's independence,
- Is responsive and helpful.

### What works well with Recovery at Home service?



“They supported my relative after discharge from hospital to regain independence. He would have let everyone run around after him, but they were great to empower him to be independent rather than rely on support.”

(Female aged 25-34)

“Responsive service and good to know it’s there for people with long term conditions when they get poorly as can be difficult to get GP practice appointment and if person already known to Recovery at Home service - it is another avenue for support without having to take a frail elderly person to A&E unnecessarily.”



(Female aged 55-64)

People who were interviewed on a one-to-one basis and were specifically asked about their experience of the Recovery at Home service, also gave positive feedback about the service. Of the 14 patients the Healthwatch Sunderland team spoke to who using of the Recovery at Home service, all but one gave positive comments. These positive comments echoed those who fed back about the service in the survey. They again said that services were responsive and helped to prevent them from going into hospital.



“This service has definitely stopped me from going into hospital so much. I was in hospital and they told me they could treat me at home, and I jumped at the chance. There is only me and my wife at home you see. They came out every day for 7 days until I was feeling better. Everything worked like clockwork. They are all really nice girls.”

(Male aged 75+)

The one negative comment related to the patient not being happy at the several hours wait for a visit from a nurse.

All five patients who a Healthwatch staff member spoke to about the Luscii service, gave positive comments. Again, the common themes were that the service had helped to prevent hospital admissions and staff were helpful and responsive. In addition, these patients also added that the service helps to provide them and their family security and reassurance.

**“Using the Luscii system is definitely keeping me out of hospital. 2019 was a bad year for me and the nurses sorted out a change of medication and got me onto the Luscii programme and with more regular checks things started to look up for me. I feel I am being checked on and looked after well. I can pick up the phone at any time and know there is support available. I have the reassurance I need. My wife has also benefitted as she doesn’t worry so much about me.”**

(Male aged 65-74)

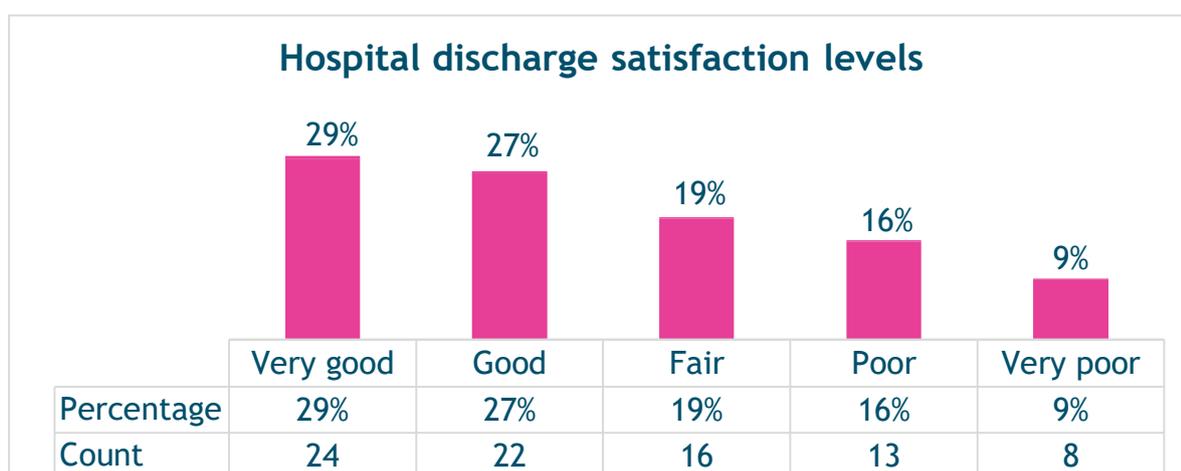


## Integrated Discharge Team

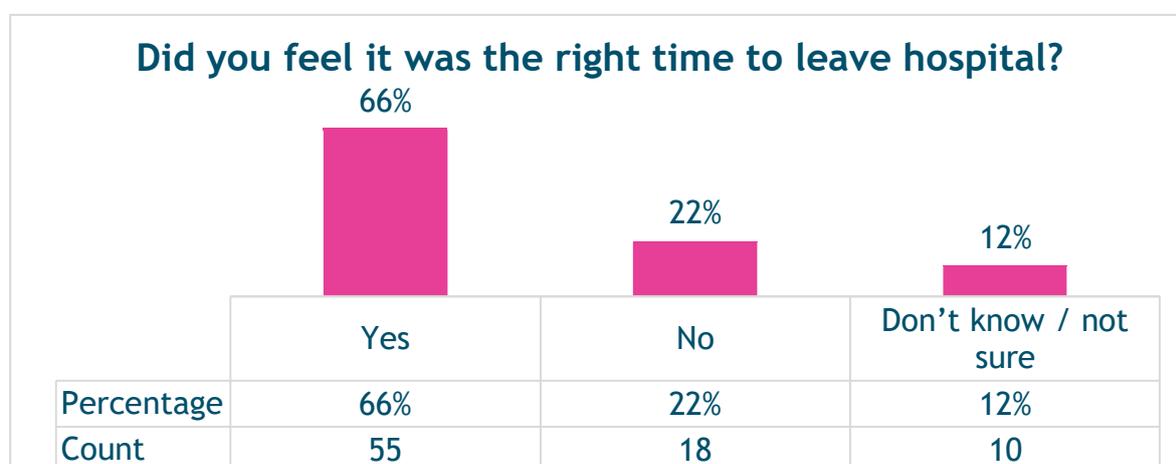
56% of people who had been in hospital rated their experience of being discharged as very good (29%) or good (27%), however 34% of people didn't feel involved in decisions made.

The 'Integrated Discharge Team' helps patients to get safely back home after a stay in hospital. People can go straight home, or to another care setting with the right support in place to help them get well.

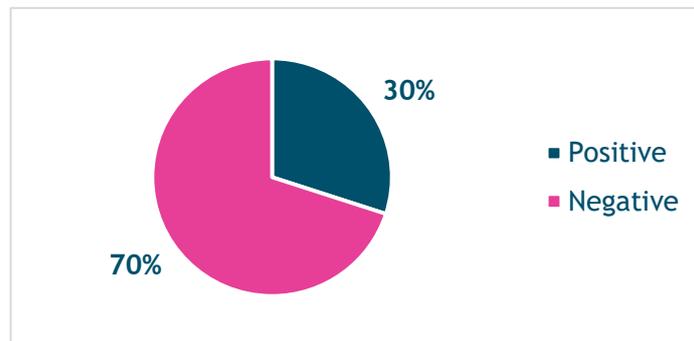
83 people completing the survey responded to say that they or a family member had been an inpatient in Sunderland Royal Hospital in the past 12 months and rated their experiences of being discharged. Of these people, 92% went straight home and the remainder went to another care facility including ICAR, a local care home or St Benedict's Hospice.



When asked if they felt they had been discharged at the right time, the majority (66%) replied they did with many commenting that they had only expected to be in hospital for a short period of time.



56 people made further comments about the timing of their discharge from hospital, these were mostly negative.



**“I was in Sunderland Hospital in June 2020. On that occasion, front-line - ambulance, reception and ward staff were superb. Follow-up after discharge has been brazenly appalling. Re. Q32 What care plan??**

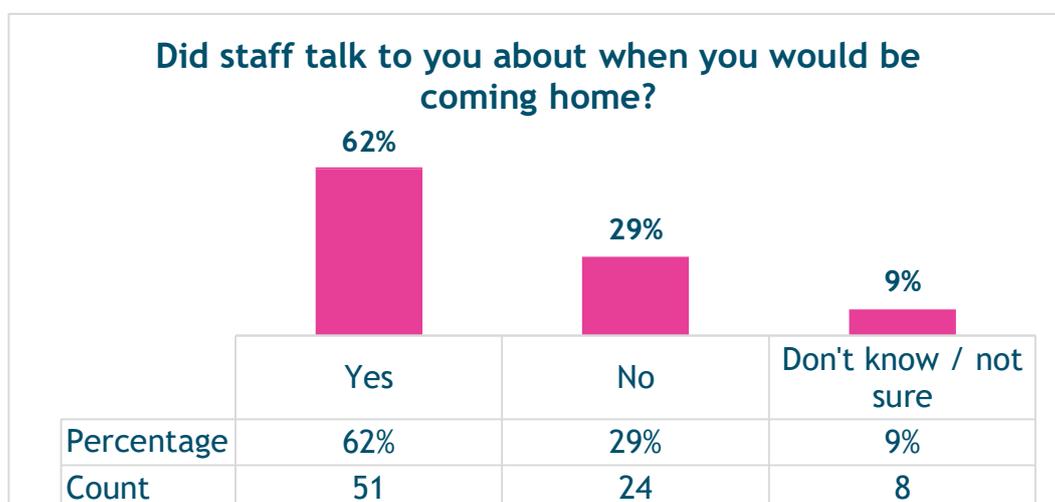
(Male, aged 65 - 74)

**“No coordination with social services. No discharge care package in place on discharge. Patient expected to look after themselves over the weekend until social services could assess the following week.**

(Male, aged 45 - 54)



62% of those who had a hospital stay replied when asked, that staff had talked to them about when they would be going home. With a further 29% replying no and 9% unsure.



People were asked to provide any additional comments they wished to make. Many of the comments received about the hospital discharge process were negative and related to those who felt they or their family member had been discharged from hospital too soon.



**“A loved one was discharged not because they were well but because there were no available beds.”**

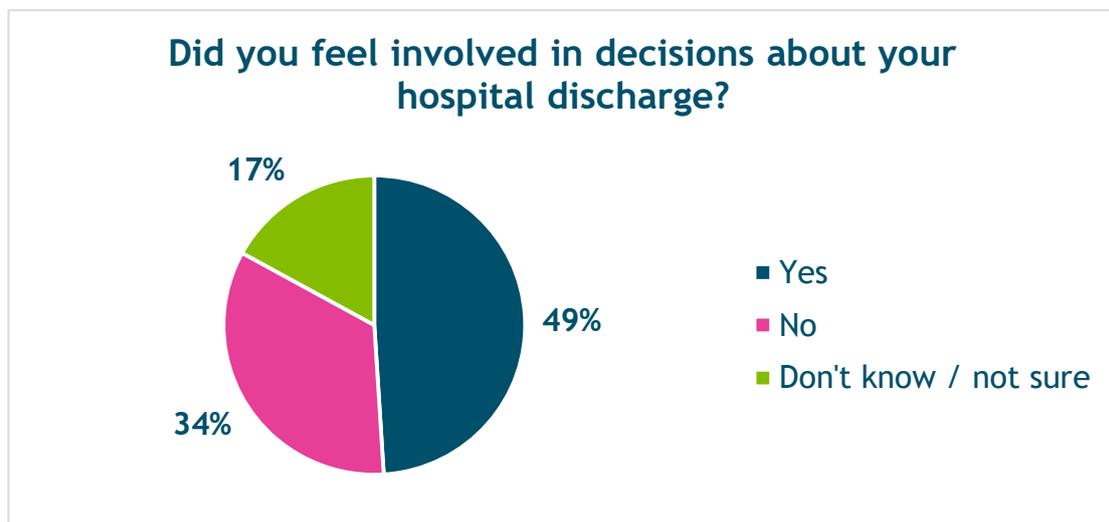
(Female, aged 25-34)

**“Sent home two hours after surgery, zero after care received.”**

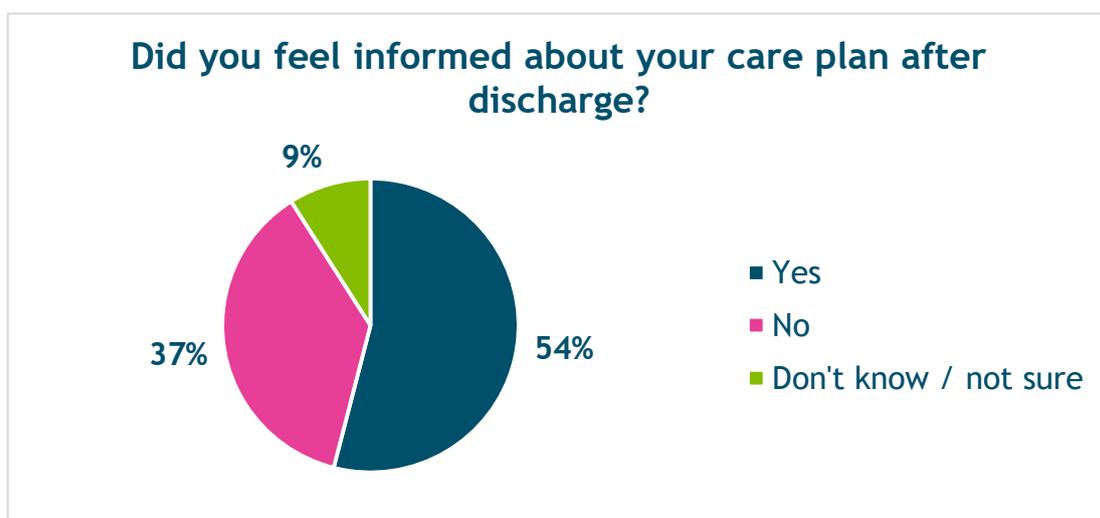
(Female, aged 35-44)



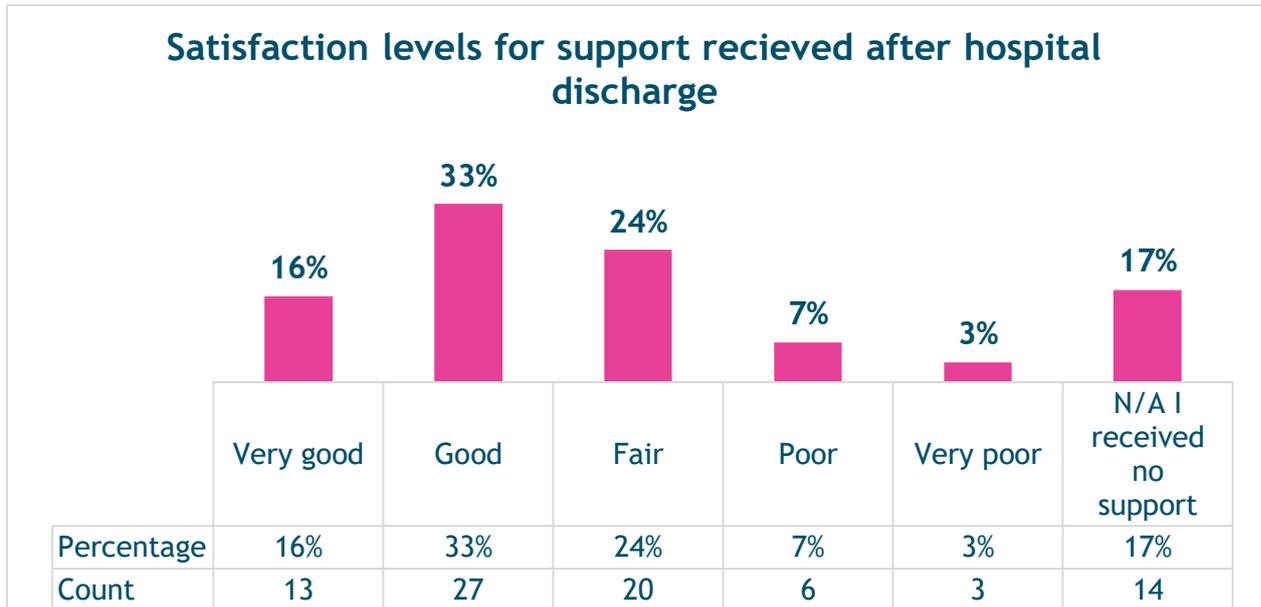
Slightly less than half of the people (49%), completing the survey stated that they had felt involved in decisions made about their discharge from hospital.



Just over half (54%) of people when asked felt involved in their care plan after discharge.



There was a mixed response when survey respondents replied about the quality of support they received when leaving hospital.



Some of the comments received included:



**“Not all equipment was in place when returned home, resulting in being confined to bed for 4 weeks until some of the equipment was delivered.”**

(Female aged 55-64)

**“No coordination with social services. No discharge care package in place on discharge. Patient expected to look after themselves over the weekend until social services could assess the following week.”**



(Male aged 45-54)

In contrast, during the interview process those 8 patients the Healthwatch team spoke to who had been discharged from hospital and were either in a local care home, Farmborough Court or ICAR, were mainly positive about their experience and the follow up care they were receiving. People commonly talked about feeling supported by the staff at these services, with many commenting that their health and condition had improved because of the care they had received.

 “I am really happy here with the people, the place and the care I receive. The care is fantastic! I am being kept informed about my care and have been included in my discharge decisions. There are changes which need to be made at home before I can leave.”

(Female aged 75+, patient at Farmborough Court)

“Excellent staff, I am amazed at the attitude, bright, friendly, positive attitude towards me. I couldn’t walk but I am now walking with a frame.” 

(Female aged 75+, patient at ICAR)

Despite feeling well cared for and involved in the decisions around their hospital discharge, many of these patients also commented on the impact COVID-19 had on their stay in the home or rehabilitation centre. Many told us that they had struggled with isolation due to the restrictions that were in place.

 “I’ve progressed a lot since I came in here 8 days ago. I wish my wife could visit me in my room and not have to stand at the window. We understand why she can’t come in but in all 3 hospitals she could, and it makes a difference to how you feel.”

(Male aged 55-64, patient at Farmborough Court)

“I am well looked after, although I am extremely lonely due to the isolation period.” 

(Male aged 75+, patient at Holy Cross)

## Conclusion

The aims of this evaluation were to find out which services require improvements, what people think is working well and what is most important to them in the community where they live. Armed with this intelligence, service providers can use it to ensure that community services are organised well, ensuring people have a good experience of care.

The findings, based on feedback received has shown those areas that are working well and with the highest levels of satisfaction which are the Recovery at Home service, district nurses, pharmacies and community equipment services. People have told Healthwatch Sunderland that these service areas rank highly as they feel they offer good support, involve them, offer choices, and can be easily accessed by themselves and their family.

People expressed that they understand the pressures services have been under due to COVID-19 restrictions and have praised staff for their continued support. However, findings found that people felt least satisfied with access to face-to-face GP appointments and involvement in decisions made around the hospital discharge process and the quality of support received when leaving hospital.

Although people weren't dissatisfied with not having had a medication review over the past year, 50% of those on regular prescribed medication would value a full medication review. 30% of all ratings received for who they most trusted to carry out their medication review, were for the GP and the least number of ratings received were for the practice pharmacist (9%).

Finally, people told us what was important to them in the community in which they live. Many people commented that they would like to see more support offered to the most vulnerable in their community. It was suggested that health and care services need to be proactively seeking these individuals out and support them in ways that will promote better health and wellbeing.

# Appendices

## Appendix one - Participant Profiles

We gathered feedback from 525 patients and/or service users who completed the survey. Not everyone completed the section requesting their demographics as these were made optional, of those who did:

- 83% of people were completing the survey for themselves and 17% on behalf of someone else.
- 78% of survey respondents were female.
- Survey respondents lived in the following geographical areas:

Area	Count
Sunderland East	144
Sunderland West	124
Sunderland North	96
Washington	82
Coalfield	77

- 7 respondents were pregnant or had been pregnant over the past year.
- Most people were either married or single.
- 53% of people had a disability or a long-term health condition.
- The majority were heterosexual or straight with 2% identifying as Bi/bisexual, 1% as Gay/lesbian and 1% Asexual.
- 97 respondents had primary or secondary caring responsibilities for someone with a disability and/or a health condition.
- Those who shared their ethnicity were mostly White British (93%) followed by 3% who were Asian/Asian British, 1% who were Black/Black British and 1% who were mixed race.
- 31% of people stated they had no religion and most people (62%) stated they were Christians. 4% stated they were Muslim and 3% another religion.
- Ages of respondents is as follows:

How old are you?	Percentage
16-17	1%
18-24	3%
25-34	8%
35-44	13%
45-54	21%
55-64	25%
65-74	17%
75 or older	10%
Prefer not to say	2%

## Appendix two - Survey



## All Together Better patient and public involvement survey

### Help us improve community health and care services in Sunderland

#### Introduction

The NHS in Sunderland is working with health and care partners as part of an alliance known as All Together Better. They want to improve health and care services. Their aim is to make sure our community services are organised well so people have a good experience of care. As an independent voice for those who use these services Healthwatch Sunderland is supporting this work and ensuring that people's views are listened to and feedback.

As we recover from the COVID-19 pandemic, All Together Better want to hear from you. Please complete their short survey. Tell us what matters most to you about health and care services in the community where you live. They would also like to know what you think they do well and where they need to improve.

Please answer this survey if you live in Sunderland and have recently used any community health and care services. This means all services outside of hospital. By recent we mean during 2020 and up to the present day.

The survey should take no longer than 5-10 minutes to complete.

Healthwatch Sunderland take your privacy seriously. The information you provide on this form will be stored electronically. Your comments will be shared with All Together Better, healthcare providers and Healthwatch England, to help them improve services. Please note the information you provide will be kept confidential, except that anonymised quotes may be used.

## Section 1: Community health and care services

All Together Better want to improve health and care services in our local communities. By 'local' we mean the specific place or area in Sunderland where you and your family live. GPs and other health and care staff want to improve how they work together. We know there is always room for more improvement.

1. Are you completing this form as a carer to someone who uses services?

- No I'm completing it on behalf of myself
- Yes I'm completing it on behalf of someone I care for

2. What is your full postcode?

3. Have you recently used your GP practice?

- No
- Yes If yes please state the name of your GP practice and rate the services used below (rate all that apply)

Name of GP practice

	Very good	Good	Fair	Poor	Very poor	Prefer not to say
GP appointment (face-to-face)	<input type="checkbox"/>					
GP appointment (by phone / video)	<input type="checkbox"/>					
GP home visit	<input type="checkbox"/>					
Out of hours GP appointment (extended access service)	<input type="checkbox"/>					
GP practice nurse appointment	<input type="checkbox"/>					
GP nurse practitioner	<input type="checkbox"/>					

4. Have you recently used your local pharmacy service?

Yes

No

If yes, please state the name of the pharmacy services used and rate them below (name up to 3 pharmacies used)

Name of pharmacy used	Very good	Good	Fair	Poor	Very poor	Prefer not to say
<input type="text"/>	<input type="checkbox"/>					
<input type="text"/>	<input type="checkbox"/>					
<input type="text"/>	<input type="checkbox"/>					

5. Please see a list of services below. Please rate those services recently used or if you have not used any services below go to question 8.

	Very good	Good	Fair	Poor	Very poor	Prefer not to say
NHS 111						
Covid 'Hot Hub' service (testing) at Houghton Primary Care Centre						
Urgent Treatment Centre (Pallion Health Centre)						
Bowel and bladder service						
Mental health services / talking therapies						
0-19 years service (health visiting / school nursing)						
Community / district nursing services						
Community Acquired Brain Injury Service (CABIS)						
Community podiatry services						
Community dermatology service						
Community physiotherapy						
Community dietetics (speaking to a dietician about your diet / nutrition)						
Community speech and language therapy						
Community respiratory services						

Community end of life care services						
Community equipment/wheelchair services						
<b>Intermediate care / rehabilitation in a community hospital bed at either:</b>						
ICAR, Houghton le Spring						
Farmborough Court						
Hospital discharge service - health or social care support to go home						
<b>Recovery at Home service:</b>						
Urgent care nursing service						
Home visiting service						
Luscii service (remote monitoring using technology)						
Social prescribing practitioner - a person who supports you to access different community and voluntary sector services						
<b>Wound care hub at either:</b>						
Washington Primary Care Centre						
Houghton Primary Care Centre						
Riverview Health Centre						
Silksworth Health Centre						
Springwell Health Centre						
Southwick Health Centre						
Other - please state below:						

6. Which of the community services that you rated above were you **most satisfied** with? Please tell us the name of the service and explain why in the box below.

7. Which of these community services that you rated above do you feel **needs to be improved**? Please tell us the name of the service and explain why in the box below.

8. Do you think different health and care staff work well together in your local area?

- Yes
- No
- Don't know / not sure

Please explain your answer above

9. If there was one thing the NHS could do to improve health and care community services in your local area, what would it be?

10. What else could health or care community services do to give you more support in your daily life?

## Section 2: Medication and prescribing

11. Do you take any regular medication prescribed by your GP? (other than the contraceptive pill)?

- Yes

No (Please go to question18)

12. Has your prescribed medication changed over the past year?

Yes

No

Don't know / not sure

13. Why do you think this is?

14. When was the last time a healthcare professional did a full review of all the medicines and tablets you are taking?

Within the past 3 months

Within the past 6 months

Within the past year

I can't remember

I've never had a medication review

15. Would you like to have a medication review?

Yes

No

Don't know / not sure

16. Would you be happy to have a medication review remotely - either by telephone or video?

Yes

No

17. Who would you trust to do this? Tick all that apply

- Practice pharmacist
- GP
- Nurse practitioner
- Practice nurse
- Community pharmacist
- Hospital specialist/consultant

### Section 3: Recovery at Home service

The 'Recovery at Home' service in Sunderland operates 24 hours a day, seven days a week. The team responds quickly when people become suddenly unwell. It aims to help people stay well at home without the need to go to hospital.

18. Have you heard of the 'Recovery at Home' service?

- Yes
- No
- Don't know / not sure

19. Do you know how to access the 'Recovery at Home' service?

- Yes
- No
- Don't know / not sure

20. Have you or any of your family used the 'Recovery at Home' service? (If no please go to question 23.)

- Yes
- No
- Don't know / not sure

21. If yes what works well about the 'Recovery at Home' service?

22. How could the 'Recovery at Home' service be improved?

#### Section 4: Integrated Discharge Team

The 'Integrated Discharge Team' helps patients to get safely back home after a stay in hospital. People can go straight home, or to another care setting with the right support in place to help them get well.

23. Have you, been an inpatient at Sunderland Royal Hospital in the past 12 months?

- Yes
- No (Please go to question 31)

24. If yes would you rate the experience when being discharged from hospital?

- Very good     Good     Fair     Poor     Very poor

25. Did you feel it was the right time for you to leave hospital?

- Yes
- No
- Don't know / not sure

Please explain your answer above

26. During your hospital stay, did staff talk to you about when you would be going home?

- Yes
- No
- Don't know / not sure

27. Did you go straight home from hospital or somewhere else?

- Straight home
- To another care facility (Please state where in the box below)

28. Did you for feel involved in decisions about your discharge from hospital?

- Yes
- No
- Don't know / not sure

29. Did you feel informed about your care plan after discharge?

- Yes
- No
- Don't know / not sure

30. How would you rate the support you received after being discharged from hospital?

- Very good
- Good

- Fair
- Poor
- Very poor
- N/A I received no support

31. Please use the box below to leave any additional comments you wish to make about your experiences of using health and care services in your local community.

### Equality Monitoring Questions

We are asking these questions because we want to make sure that we have asked lots of different people for their views. You do not have to answer these questions if you do not want to but we hope you will complete them.

#### 1. How old are you?

- |                                  |                                  |  |
|----------------------------------|----------------------------------|--|
| <input type="checkbox"/> 16 - 17 | <input type="checkbox"/> 35 - 44 | <input type="checkbox"/> 65 - 74           |
| <input type="checkbox"/> 18 - 24 | <input type="checkbox"/> 45 - 54 | <input type="checkbox"/> 75 or older       |
| <input type="checkbox"/> 25 - 34 | <input type="checkbox"/> 55 - 64 | <input type="checkbox"/> Prefer not to say |

#### 2. Which one of the following best describes your gender?

- |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Male                     | Female                   | Other                    | Prefer not to say        |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

If you describe your gender with another term, please provide this here:

.....

#### 3. Are you currently pregnant or have you been pregnant in the last year?

- |                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|
| Yes                      | No                       | Prefer not to say        | Not applicable           |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

#### 4. Are you currently...?

- |   |  |
|---|--|
| <input type="checkbox"/> Single (never married or in a civil partnership) | <input type="checkbox"/> Separated (but still legally married or in a civil partnership) |
|---|--|

- Cohabiting  Divorced or civil partnership dissolved
- Married  Widowed or a surviving partner from a civil partnership
- In a civil partnership  Prefer not to say

**5. Do you have a disability, long-term illness or health condition?**

- Yes  No  Prefer not to say

**6. Do you have any caring responsibilities? (Please tick all that apply)**

None	<input type="checkbox"/>
Primary carer of a child or children (under 2 years)	<input type="checkbox"/>
Primary carer of a child or children (between 2 and 18 years)	<input type="checkbox"/>
Primary carer of a disabled child or children	<input type="checkbox"/>
Primary carer or assistant for a disabled adult (18 years and over)	<input type="checkbox"/>
Primary carer or assistant for an older person or people (65 years and over)	<input type="checkbox"/>
Secondary carer (another person carries out main caring role)	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>

**7. Which race or ethnicity best describes you? (Please select one box only)**

White (British, Irish, European, other)	<input type="checkbox"/>
Mixed race (Black & white, Asian & white, Other)	<input type="checkbox"/>
Asian/Asian British (Bangladeshi, Chinese, Indian, Pakistani, other)	<input type="checkbox"/>
Black/ British Black (African/Caribbean/ Other)	<input type="checkbox"/>
Gypsy or Traveller	<input type="checkbox"/>
Prefer not to say	<input type="checkbox"/>
Other, please state	<input type="checkbox"/>

**8. Which of the following terms best describes your sexual orientation?**

- Heterosexual or straight  Bi/bisexual  Prefer not say
- Gay / lesbian  Asexual  Other

If you prefer to use another term, please provide this here:

.....

**9. What do you consider your religion to be? (Please select only one)**

- |              |                          |        |                          |                   |                          |
|--------------|--------------------------|--------|--------------------------|-------------------|--------------------------|
| No religion  | <input type="checkbox"/> | Hindu  | <input type="checkbox"/> | Sikh              | <input type="checkbox"/> |
| Christianity | <input type="checkbox"/> | Jewish | <input type="checkbox"/> | Prefer not to say | <input type="checkbox"/> |
| Buddhist     | <input type="checkbox"/> | Muslim | <input type="checkbox"/> | Other religion    | <input type="checkbox"/> |

If you answered other, please provide your religion here:

**Many thanks for completing this survey, we value your time and feedback.  
Please return this survey to the address below or in the SAE provided.**

**CLOSING DATE FOR SURVEYS IS 11<sup>th</sup> JULY 2021**

**If you require this document in another format such as  
large print, easy-read, braille, audio, or a different language please get in touch on:**

**Healthwatch Sunderland, Hope Street Xchange, 1-3 Hind Street, Sunderland, SR1 3QD  
0191 514 7145 [www.healthwatchesunderland@pcp.uk.net](mailto:www.healthwatchesunderland@pcp.uk.net)**