

Communicating changes to urgent health care services

Research with residents of Barking and Dagenham, Havering and Redbridge



Background

In November 2018, Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups (BHR CCGs) agreed a new model of care for community urgent care following a 14-week public consultation.

Listening to the feedback from local people and stakeholders, we committed to working with Healthwatch to develop further engagement work to support the agreed changes to current local services.

Particular focus will be given to south Ilford and south Hornchurch as there will be changes to how people will access urgent care services at Loxford Polyclinic and South Hornchurch Health Centre (from walk-in to bookable services via NHS 111).

We know from our extensive local research and engagement with local people that there is still confusion about what 'urgent care' means and what 'urgent care services' offer.

Patient representatives including Healthwatch have consistently told us that people find it difficult to understand what the different services offer – and this affects where they decide to go for urgent care if they can't see their own GP.

We also have a long standing commitment to engage with local people on how to improve the naming and descriptions of our local urgent care services to support residents to choose wisely.

In March 2019, the CCGs commissioned our three local Healthwatch organisations to undertake research that will inform our communications and engagement approach ahead of the start of the new community urgent care services for our area. It will also support the commissioning process that begins in 2019.

This is the third urgent care research project that we have worked with Healthwatch on. We continue to enjoy a positive working relationship with all three local organisations, and appreciate the support and expertise they bring to our engagement work.

About the research

Our research objectives

Building on previous engagement, feedback and research, the CCGs have commissioned research that will inform how the CCGs (working with local providers and partners) can develop a cost-effective communications and engagement plan to support the future changes in community urgent care services.

Our key objectives will be to:

- Increase awareness, uptake and confidence in NHS 111 which will reduce people going to A&E when they could be seen more quickly in the community
- Shape how we engage effectively with local people to support them with the specific changes to local services e.g. those living in south Ilford and south Hornchurch
- Provide insight into appropriate mechanisms, channels and language to engage with local people that take account of accessibility issues including language, disability and knowledge of the NHS

We wanted the engagement work to help to deliver:

- A proposal for simple but effective messaging on urgent care (including NHS 111) that has been shaped by feedback from engagement with local people. This will include feedback from testing examples of materials and messaging/channels e.g. posters, short films and leaflets with different audiences
- Proposals for a cost-effective communications and engagement approach that will mean local people (particularly those in communities or groups identified as priorities) understand how to access urgent care and understand the changes to local services
- Feedback on people's understanding of local services, why they have chosen a service recently and how to communicate what services are available in future.

Co-designing the research

The CCGs' communications and engagement manager worked with the three Healthwatch organisations to co-design the research approach and questions. Using the engagement brief as a basis, we agreed a simple survey that could be undertaken with individuals in a 1:1 interview and with focus groups or in a workshop setting.

This approach ensured we are able to compare the feedback across the three boroughs and understand any significant needs or differences that will be important to our communications and engagement work going forward.

This collaborative approach is now an established way of working between the CCGs and Healthwatch on urgent care. This is the third significant engagement project and each piece of work benefits from the shared knowledge and understanding of all those involved.

Each Healthwatch conducted the research in their respective boroughs and each produced a detailed report, which allows the CCGs to look at feedback across BHR and at a borough basis. Due to the numbers involved, it was not possible to scrutinise feedback at a primary care network or electoral ward level.

Target audiences

Based on previous engagement, local demographics and available data about usage of current urgent care services, we were particularly keen to hear from specific groups of local people in all three boroughs.

The following priority research groups were identified:

- People from newly-arrived communities or more transient communities
- Parents of young children (especially those aged 0 to 5)
- Older people (those aged 65+)
- Young adults (15 to 25)

In Redbridge and Havering, we also wanted to ensure that we meet our commitment of exploring how best to support those people living around Loxford Polyclinic and South Hornchurch Health Centre. We wanted feedback from a representative group of these residents in particular to focus on how best we communicate changes to their local services.

Recognising the challenge of this ask, we agreed with our Healthwatch colleagues that the research should include 1:1 interviews with target audiences in urgent care service locations including Loxford Polyclinic and South Hornchurch Health Centre.

We did not set a minimum number of people to be engaged with. However, we asked that priority groups should be well represented in the feedback, with no one group over-represented. Numbers needed to be sufficient to allow for informative analysis.

Healthwatch spoke with 617 people through a mix of 1:1 interviews (using a survey) and in focus groups.

Borough	1:1 interviews	Focus groups	Total
Barking and Dagenham	105	38	143
Havering	139	56	195
Redbridge	146	133	279
Total	390	227	617

Each report contains details of the demography of participants, where interviews were held, and details of the focus groups or workshops undertaken by each Healthwatch organisation.

What did the research tell us?

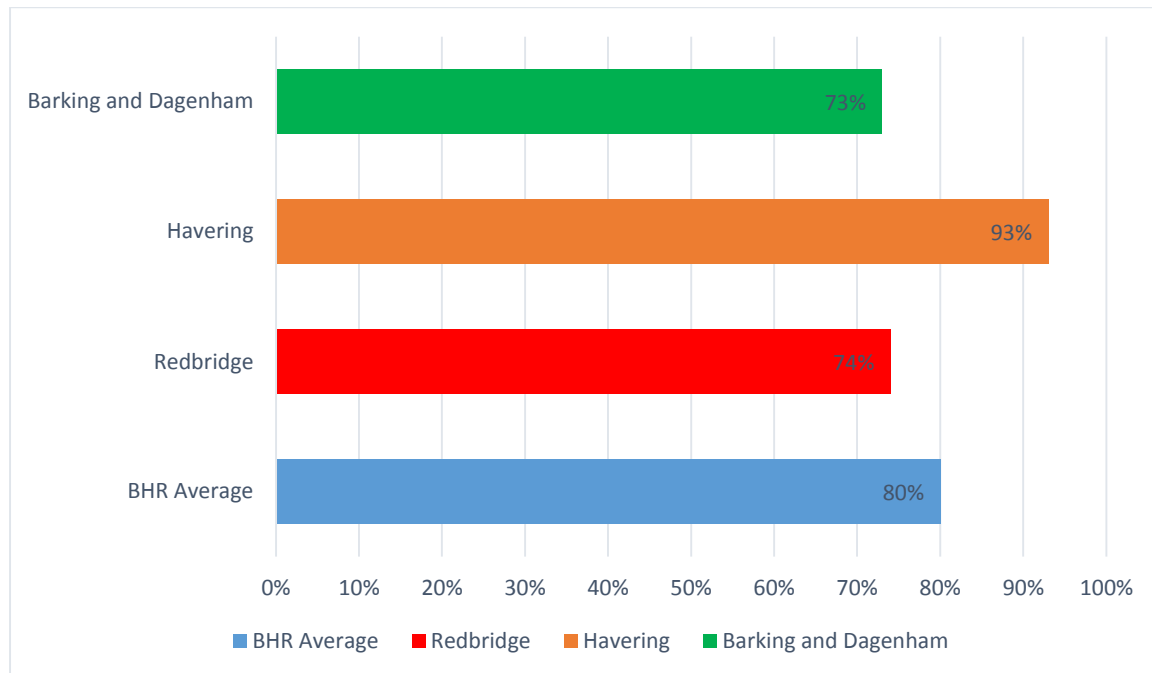
Key headlines

- The vast majority of people who had used NHS 111 were positive about the service they received when they used the service
- People who had used NHS 111 were aware that they now speak to medical professionals (doctors and nurses) as well as the trained advisors
- The feedback supported the use of a multi-format communications strategy, using a mix of digital, print and increased face-to-face opportunities (including health professionals speaking to community groups)
- The evidence showed that we need to continue to explain the difference between 'urgent care' and 'emergency care' to help people make the most appropriate choices
- There was strong need to consider communications with people who are unable to speak English, including improving the translation offer made to people when they do call NHS 111
- The research provided a positive case study of the impact on an engagement session with young people and their increased awareness of NHS 111 and likelihood of using the service
- Useful but mixed feedback on existing communications materials which will inform our communications approach going forward, including:
 - Need to simplify key messages e.g. focus on promoting NHS 111, refer to shorter waiting times
 - What information is seen as most important e.g. contact number, locations
 - Be clear on what services offer to help people understand when and how they can access them
 - GPs and other healthcare professionals are key to engaging with local people – whether through screens or notice boards at practices
 - Use of images of people (professionals or patients) is important, and using local people is viewed as likely to be more effective than generic images

What did local people say?

Awareness of NHS 111

We wanted to check current awareness of NHS 111, following up on similar measures in previous engagement work. This provides NHS partners with a useful 'pulse check' on local awareness following last year's launch of a new NHS 111 service in North east London and the national NHS 111 publicity campaign.



Building on previous engagement, this shows a consistently high level of awareness of NHS 111, although the feedback from Redbridge participants shows a decline in awareness from the results in engagement work from 2018.

It's important to note the feedback from Barking and Dagenham about a lack of knowledge by participants from a community group, and mixed experience of the translation service that NHS 111 offers callers who do not speak English or prefer to talk in another language.

Where did you hear about NHS 111?

Feedback from all three boroughs showed local people had heard about NHS 111 from a variety of sources. Family and friends were the most common source, with posters in GP practices and social media also rating highly across all participants.

This supports our current approach of using a wide range of channels, and also supports the understanding that personal recommendation (usually based on a positive experience) is an influential factor.

This recognition of communications activity can be linked to the launch other national NHS 111 campaign in 2018 which has formed a core part of the national winter communications campaign. Locally, the CCGs and our local health and social care partners have also worked in co-ordination to support the national campaign and promote NHS 111 across our three boroughs.

Experience of NHS 111

Of those that provided feedback on their experiences of using NHS 111, the majority of responses were positive

- Redbridge – majority 'positive, 18 good, 9 very good and 2 x excellent (out of 79)
- Barking and Dagenham – majority were positive
- Havering – 50% 'good or very good' with only 5% 'dissatisfied'

A few participants in Barking and Dagenham reported concerns that the phone was not answered quickly enough or that they had not been offered a translator.

To build greater confidence in our services, we need to ensure that patient experience matches what we say they can expect. This is particularly important, given that friends and family are a trusted source of information and their experience will influence others.

“Who did you speak with?”

The new NHS 111 service for North East London launched last August, and the service includes a Clinical Advisory Service (CAS). Made up of GPs, nurses, paramedics and pharmacists, these health professionals will speak with people who are identified by the NHS 111 trained advisors as needing to speak to someone.

We wanted to see if people recognised they were speaking to a GP or nurse as this is a new element of the service. Research participants were asked if they had spoken to a healthcare professional (GP or nurse) when they called NHS 111.

This helped to check local people's understanding of the improved NHS 111 service by testing their recognition that a health professional was involved in their call.

Participants from all three boroughs were able to tell us they had spoken with a doctor or nurse, and the results are very much in line with our ambition for the service (with a target of at least 50% of calls being dealt with by the CAS team).

The table below summarises the responses.

	% who knew they spoke with a doctor	% who knew they spoke with a nurse
Barking and Dagenham	36.5%	11%
Havering	67%	26%
Redbridge	27%	17%

More work is needed to let people know they are likely to speak with a doctor or nurse (or other health professional as the service expands). This will help build trust and confidence in NHS 111.

This is supported by Redbridge Healthwatch's commentary about participants responding positively once this was explained.

Publicising and promoting urgent care services including NHS 111

One of our key objectives was to gather feedback from local people about where they get information about NHS 111, and where they would look for or find information. This will help us to focus our communications strategy and ensure we make best use of available resources and opportunities.

It was clear from the feedback that GPs and other health professionals will play a key role in helping to raise awareness of NHS 111 and other urgent care services.

Across all three boroughs, the most popular option for promoting NHS 111 was via information screens or notice boards at GP surgeries and other health care premises.

People also told us that they wanted to see more GPs and health professionals speaking with community groups to explain services like NHS 111 and how it can help patients. This was consistently popular across all three boroughs.

There's clear evidence from the feedback from the Redbridge focus group with young people and with the community groups sessions in Barking and Dagenham that this would be both welcome and very effective.

Promoting changes to services

The clear feedback from participants was the need to provide simple and accurate information at an early stage and make sure the changes are clear and what this means

Being seen quickly was important to participants – this is one of the key benefits to patients from the move to making more bookable urgent appointments available through NHS 111.

Face to face communications with community groups, especially those that support people unable to speak English was also highlighted, as was the need to make information available in different formats.

Again, the role of GPs and health professionals ranked highly, with information in practices and other local centres remaining a preference, closely followed by doctors visiting community groups.

Case study/ pull quote

“68% of all respondents in Barking and Dagenham said that having local doctors, nurses or health professionals visit local groups would help to encourage local people to use NHS 111 when they need urgent medical advice

“Individuals who struggle with English felt that face to face communications about NHS 111 would help them to better understand what it can be used for.”

Healthwatch Barking and Dagenham report

Use of local NHS staff in communications materials including short films and social media activity was also seen as a way of localising the message and making it more effective.

Testing communications materials

We asked Healthwatch to test examples of existing communications materials that are in use locally and nationally. The selection was made through discussions between the CCGs and the three Healthwatch leads.

Printed materials

Participants were asked to look at:

- An NHS 111 poster (national campaign material)
- A poster from a neighbouring borough explaining changes to a walk-in service
- An information leaflet that provides parents of young children with advice and signposting information

Responses were mixed but generally positive on all three examples. For example, while participants in Havering



preferred poster 1 as it used real people and felt the image of a nurse “added an air of authority”, those in Barking and Dagenham were more positive about the use of diverse animated characters which they felt made it more eye-catching and engaging.

Feedback ranged from comments on typography and imagery to suggestions about what information needed to be emphasised, e.g. that NHS 111 is free to call and making the number more prominent.

There were also a range of suggestions of what information would be important to include in posters and other materials to help local people understand the service offered, what was available, and how to access urgent



care services.

Comments on the information leaflet reflected that it included more information than a poster, but it was helpful to see suggestions from participants on when and where it should be available to be of use to parents.



How does this deliver against our objectives

Feedback from this engagement will help to shape our ongoing communications plans for urgent care services, in particular targeted communications to support local people with changes to local services.

- A proposal for simple but effective messaging on urgent care (including NHS 111) that has been shaped by feedback from engagement with local people. This will include feedback from testing examples of materials and messaging/channels e.g. posters, short films and leaflets with different audiences.
- Proposals for a cost-effective communications and engagement approach that will mean local people (particularly those in communities or groups identified as priorities) understand how to access urgent care and understand the changes to local services.
- Feedback on people's understanding of local services, why they have chosen a service recently and how to communicate what services are available in future.

Across all three boroughs, it was positive to see that the feedback was in line with best practice communications principles. There were also some specific recommendations that will help us to consider and meet local needs and to improve the quality and effectiveness of our communications materials.

These include:

- Ensure we explain exactly what NHS 111 (and other urgent care services) can offer. Make sure the messages are simple and accurate
- GPs and other health professionals can play a significant role in our communications and engagement work. We need to look at how we involve them directly in patient engagement and work with practices and their staff to share information with patients
- When preparing for changes to urgent care services, it's important to share information well ahead of the change to make sure people are aware in advance
- Use NHS staff (nurses and doctors) in communications materials, whether print, digital or film format. Where possible, use local people
- Aim to reflect the diversity of our community in the communications materials

Case study: Information films

Healthwatch Redbridge also asked young adults at three focus groups for their feedback on two films that promote NHS 111. The [first film](#) was produced by NHS England as part of the national NHS 111 campaign and the [second film](#) was produced by BHR CCGs in early 2018.

The participants provided positive feedback on both films. The national NHS 111 film was preferred by most participants, although the involvement of a local GP in the 2nd film was seen as positive.

Importantly, Healthwatch Redbridge noted: "After seeing this video, all respondents in one of the focus groups said they would use the NHS 111 service".

- Consider what additional support or actions are needed to support those who do not speak English or feel confident about using health services. This includes looking at how we work with community groups to reach into our communities.
- More focused promotion on the availability of interpretation services with NHS 111 – and work with the NHS 111 team to ensure this is offered more proactively to callers.

Next steps

All the feedback and learning from this research will be built into our communications and engagement planning around urgent care services in particular but across our communications and engagement strategy.

The CCGs are currently working on the first stage of implementing the new model of care for community urgent care in Barking and Dagenham, Havering and Redbridge. We are currently working on phase 1 – the commissioning of four Urgent Treatment Centres.

We will ensure changes to these services are communicated effectively and in advance of changes at specific sites, and we look forward to working with Healthwatch to plan and shape communications materials to support these changes.

BHR CCGs will share the feedback directly with local providers e.g. the NHS 111 service, and also with the NHS England communications team

Locally, we will look at all the feedback and ensure this is reflected in our ongoing communications and promotion of NHS 111, working with colleagues across North east London in particular.

Thank you

We would like to thank the three Healthwatch teams for their support and advice on this project. In particular, we'd like to mention Manisha Modhavia at Healthwatch Barking and Dagenham, Ian Buckmaster at Healthwatch Havering and Naina Thaker and Miranda Peers at Healthwatch Redbridge.

Thank you also to our local partners who hosted the Healthwatch research teams including PELC, Healthbridge GP Federation, the Hurley Group, and the many community groups who welcomed them.

Finally, we'd also like to thank all those participants who shared their views and experiences for taking the time to talk with our Healthwatch colleagues.

