



The Denny Review – Engagement Project

December 2022



www.communitydentalservices.co.uk



healthwatch
Central Bedfordshire

Content...



Introduction P3

Executive Summary P4

Methodology P9
- Distribution and selection Process

Demographics P11

Survey Results P12

Conclusion P30

Next Steps (Recommendations) P31

Thank You P33

Organisations involved P34

Appendix A - Survey questions P35

Appendix B - Comments P41

Introduction

Bedfordshire, Luton and Milton Keynes Integrated Care System (BLMK ICS) commissioned The Denny Review; *'A rapid evidence review of the health inequalities experienced by the local communities of Bedfordshire, Luton and Milton Keynes'* in April 2022. It aimed to improve its understanding of health inequalities in its local communities and good practice to address them. It identified priorities for areas of focus for engagement and co-production with individuals and communities to agree actions to reduce inequalities.

The Denny Review demonstrated that the wider determinants of health, including socioeconomic deprivation, psychological, cultural and individual factors affect health and wellbeing. All these factors intersect and have a cumulative effect on an individual, family, social group or community. The review evidenced that the communities affected by the health inequalities in BLMK include ethnic minority groups, including Gypsy, Roma, and Traveller communities, people living in deprived neighbourhoods, people with disability, and people experiencing homelessness, migrants, and LGBTQ+. These groups experience health inequalities from unfair distribution and the impact of wider determinants of health to access health care services.

The ICS aims to understand the nature, causes and potential solutions to inequalities in health through a whole-system approach to understand and inform and tackle health inequalities affecting BLMK local communities.

Working together on an action research project, Healthwatch Central Bedfordshire (HWCB), The Disability Resource Centre (DRC) and Community Dental Services (CDS CIC), known for the purposes of this report as 'the partners', engaged with residents, identified with physical and/or learning disabilities, of all ages inwards of deprivation, across Central Bedfordshire, Luton, Bedford Borough and Milton Keynes, to learn more about their experience of accessing health and social care services. Their feedback will help to improve services and better meet the expectations of people across BLMK.

Executive Summary

The project aimed to highlight the health inequalities for those that may be disproportionately impacted due to a physical and/or learning disability, living in deprived areas of Bedfordshire, Luton and Milton Keynes.

A survey was created and widely distributed which generated **1298** responses. In addition, within the survey, respondents were asked if they would be willing to take part in a more in-depth study, either a focus group or individual case study, and over **850** positive responses were received.

The survey questions sought to understand what specific services work well for individuals and which ones do not, and how those services could be improved. People were also asked what was most important to them in the way they are treated by healthcare professionals, and what they think are the barriers to accessing healthcare services that do not work so well for them. They were also asked how communications could be improved to access services more easily, and if they knew which preventative services were available to them.

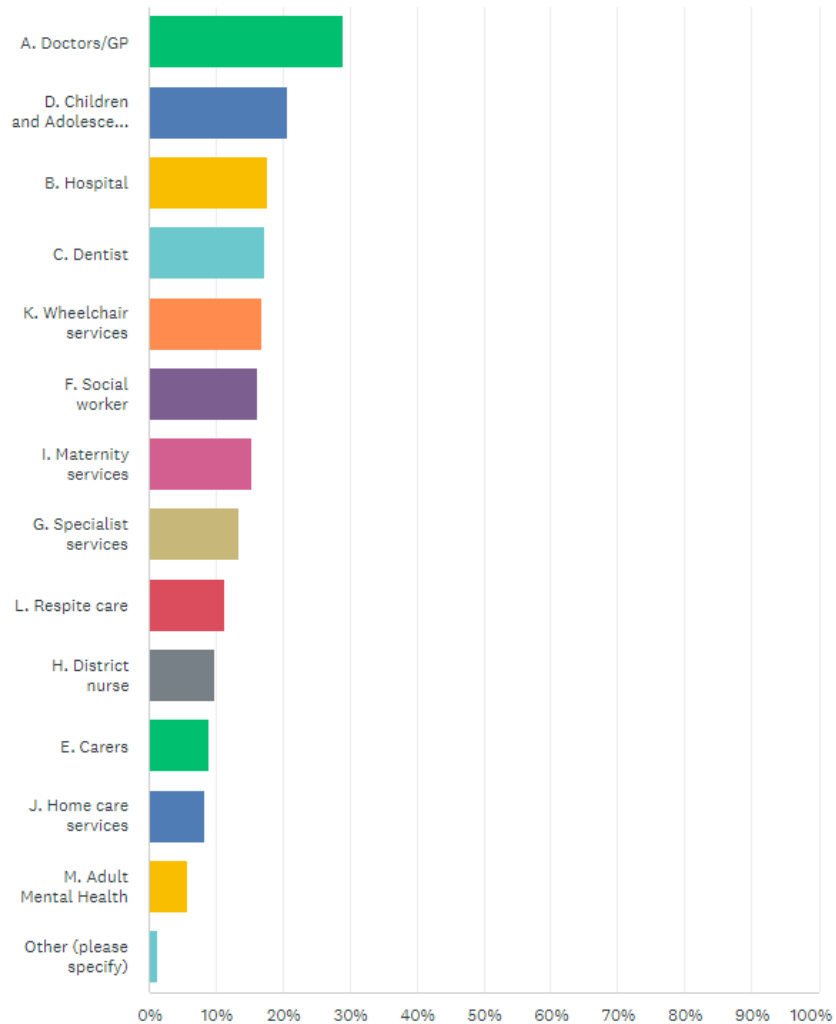
Responses to the questionnaires included both positive and negative feedback about accessing health and care services across Bedfordshire, Luton and Milton Keynes (BLMK). A full copy of the survey questions can be found in Appendix A.

The majority of negative feedback from service users related to GP services, which is unsurprising given current national concerns involving access for all patients to GP services, and the Children and Adolescent Mental Health Service (CAMHS), with **29%** of respondents selecting the Doctors/GP service, and **21%** CAMHS respectively.

See below a bar chart demonstrating the results of the question asking which services do not work well.

What specific services do not work well for you? (List all that apply)

Answered: 1,298 Skipped: 0



ANSWER CHOICES	RESPONSES	
A. Doctors/GP	29.04%	377
D. Children and Adolescent Mental Health Service (CAMHS)	20.72%	269
B. Hospital	17.64%	229
C. Dentist	17.18%	223
K. Wheelchair services	16.95%	220
F. Social worker	16.18%	210
I. Maternity services	15.25%	198
G. Specialist services	13.33%	173
L. Respite care	11.40%	148
H. District nurse	9.78%	127
E. Carers	8.86%	115
J. Home care services	8.40%	109
M. Adult Mental Health	5.86%	76
Other (please specify)	1.23%	16
Total Respondents: 1,298		

Additional comments with regard to this question included, ***“Doctors are generally still not dealing with patients.”*** and ***“Contacting and gaining an appointment with a GP is beyond a joke. This results in us having to visit hospital more with minor issues”***

Respondents were asked in what way services needed to improve (question 5). For Doctors/GP services, the two most popular responses were **‘easier access to appointments’** with 24.5%, and **‘staff to be more helpful’** with **22.6%**. The same two responses were also the highest for hospital services, with **24.6%** and **24%** respectively. One respondent commented, ***“My GP seems to rely on Ill to screen patients and arrange appointments. Also I am deaf so they don’t seem to understand that a phone appointment is useless, I need face to face but cannot get this”.***

In addition, the key statistics that stood out for us, were that **26.3%** of people responded saying that **‘more interpreters available’** is a needed improvement for hospitals, and **22.5%** responded saying that there needs to be **‘more available appointments with a Disability Champion’**. This may suggest a lack of understanding and disability awareness within this environment.

The majority of respondents (**30.2%**) clearly indicated they wanted to be **'listened to'**, closely followed by **'to be involved in decision making'** at **24.3%**, and **'to be treated equally'** at **19.4%**, as the most important ways in which they wanted to be treated by healthcare professionals. One respondent commented, ***"Not to be spoken to as if you are stupid. Talking over you as you are trying to explain. Dismissing your concern without even listening to you"***. A more in-depth study would need to be undertaken to better understand how service users and patients feel they are currently treated by healthcare professionals.

More importantly, respondents viewed the biggest barriers to accessing services as the, **'difficulty in securing an appointment'**, **'long waiting lists'**, **'shortage of staff'**, and equally as important **'No disabled access'** and **'a lack of interpreters'**.

A mother commented, ***"I have a great doctors surgery that go out of their way to help my handicapped daughter. Sadly once seen by the doctor it takes months for a hospital appointment, even phoning the surgery to find out why"***.

Asked what could be done better to improve communication with patients, a fairly large majority of respondents would like **'hearing loops'** installed, closely followed by **'longer appointments'** and **'interpreter services'**, as mentioned earlier. Interestingly, **'Understanding individual needs'** was also popular which could be related to their particular disability.

Many people responded positively to awareness of preventative services, the most popular being **'Exercise and Active Lifestyles'**, closely followed by **'Screening Services'**, although one of the least well-known was **'Social Prescriber'** which may indicate that more promotional work needs to be instigated to help inform the public of self-management or self-care options available to them.

See a table of results for the most selected improvements and services on page 15.



Methodology

The partners gathered the views of the target group through a variety of methods designed to gather feedback about their experience and examples of best practice to share with BLMK ICS and key stakeholders.

Working with BLMK ICS we initially designed a short survey of qualitative and quantitative questions to gather feedback from local residents to explore the socioeconomic deprivation, psychological, cultural and individual factors of their experiences, including the barriers and aspirations for fair and accessible health and social care services. The survey was launched on 12th October 2022 and closed on 7th November 2022. A copy of the survey questionnaires can be found in Appendix A.

We also engaged with our existing volunteers with lived experience including DRC Experts by Experience, Carers Panel and Young Healthwatch.

We aim to follow up the launch of the survey with group and individual conversations within areas of deprivation across Central Bedfordshire, Luton, Bedford and Milton Keynes and to facilitate focus group discussions to further explore the key questions asked within the survey.

Distribution and selection Process

The survey was shared through a variety of channels:

- Our websites
- Our social media platforms
- Targeted emails to our distribution lists in excess of 8500 people
- Our newsletters
- Via Beds, Luton and Milton Keynes Integrated Care System (BLMK ICS) communication channels such as social media and regular Ebulletins
- Hard copy through community engagement
- Hard copies distributed to community and health settings
- Distribution via wider organisations including condition-specific, health and community organisations

Survey responses were collected via Survey Monkey which included demographic details, and whether they would like to volunteer for group and/or one-to-one sessions for a more in-depth study.

We received nearly 900 requests from those who indicated within the survey that they would like to take part in a case study. These individuals were subsequently sent an additional survey to determine the specific area of Bedfordshire, Luton or Milton Keynes (BLMK) they lived in. Selection will be based on whether they live in areas of high deprivation across BLMK. All participants who agree to take part in a focus group or case study will be offered a £25 gift voucher for taking part.



Demographics

Demographic questions were included in the survey relating to; age, gender, ethnicity and religion. People were also asked if they considered themselves to live with a disability or additional need, and whether they lived in Bedfordshire, Luton or Milton Keynes.

From the feedback received, interestingly **53.5%** of people who completed the survey were within the 18 – 30 age bracket. The second most popular age bracket was between 31 – 50, with **39.2%** of responses.

61.9% of people who completed the survey identified as being female, and **36.5%** identified as male. A very small minority of people preferred not to say (**10 people**), or identified as non-binary or intersex (**5 people each**) which made up **less than 1%** of respondents. However, **7 of the 10** people who selected non-binary or intersex were aged **18 to 30 years**. As the figure for this cohort of people is very low this could suggest that this group are vastly unrepresented when accessing services.

A range of ethnic groups were indicated in the survey although 'white/white British' was the most dominant at **76.4%**. Other ethnic groups represented were Black/Black British (**16.09%**), Asian/Asian British (**5.68%**), and Arab/Arab British (**0.63%**). Six individual respondents identified as multiple ethnicity groups or other, with responses either being mixed ethnicity or unknown.

79.1% of respondents indicated 'Christian' as their religion. Other religions represented were Hindu (**6.1%**), Jewish (**1.74%**), Muslim (**1.27%**), Buddhist (**0.95%**), and Sikh (**0.4%**). Two individual respondents selected 'other', with one person saying 'Spiritualis't and the other 'Islam'. However, the second most selected response was 'no religion' with **10.29%** and **130** responses.

More than half of the respondents who completed the survey (**54.8%**) indicated that they considered themselves to live with a disability or additional need, and **61.6%** of respondents were from the Bedfordshire area.

Data tables with full information have been added to the relevant questions in the survey results section of this report.

Survey Results

A total of 10 questions were asked in the survey relating to what specific health and care services work well for individuals and which ones do not, and how those services could be improved. People were also asked what was most important to them in the way they are treated by healthcare professionals, and what they think are the barriers to accessing healthcare services that do not work so well for them. They were also asked how communications could be improved to access services more easily, and if they knew which preventative services were available to them.

The results of the survey and each question are detailed below.

Question 1

Service users were asked what health and social care services have they used.

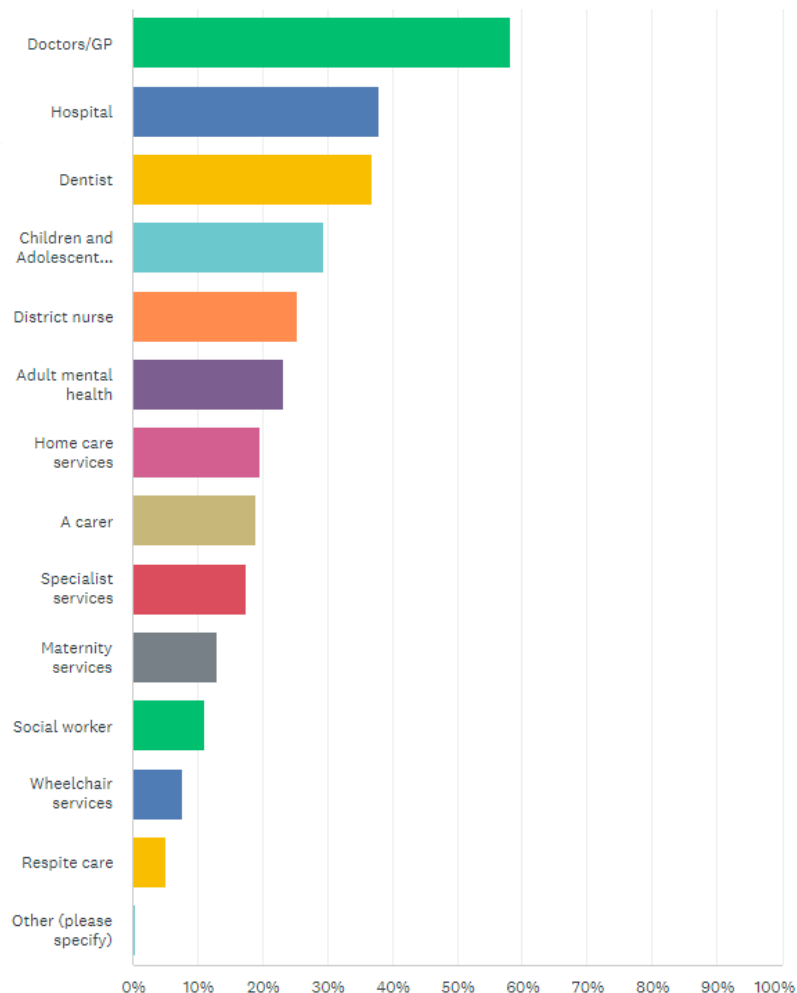
A range of healthcare services were indicated, but unsurprisingly the majority of respondents (**58.2%**) had accessed a GP Service. Many indicated that they had also accessed dental (**36.8%**) and hospital services (**38%**) too. Mental health services were also registered amongst the highest services accessed. Children and Adolescent Mental Health (CAMHS) services were accessed by **29.5%** of respondents, and adult mental health is accessed by **23.3%**

Over 25% of people had used the District Nursing services and many indicated using specialist services too (**17.4%**).

See the full table of services and results below.

What health and social care services do you / have you used? (Please tick all that apply)

Answered: 1,298 Skipped: 0



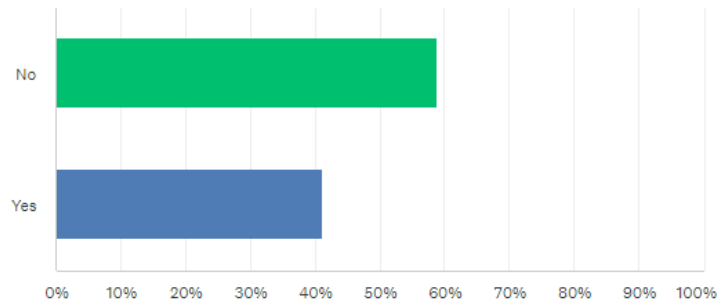
Question Two

Service users were asked if they knew of other health and care services available to them which had not been listed in question one.

Interestingly the result of this question indicated that respondents were mainly unaware of any other services, with just **40%** saying they **did** know of health and care services other than those listed. This meant that **59%**, a fairly large majority of respondents, were **not** aware of other services. This would suggest that there is a need for an industry-wide marketing campaign to raise awareness.

Do you know which other health and care services are available to you beyond those listed in question 1?

Answered: 1,298 Skipped: 0



ANSWER CHOICES	RESPONSES
▼ No	58.94% 765
▼ Yes	41.06% 533
TOTAL	1,298

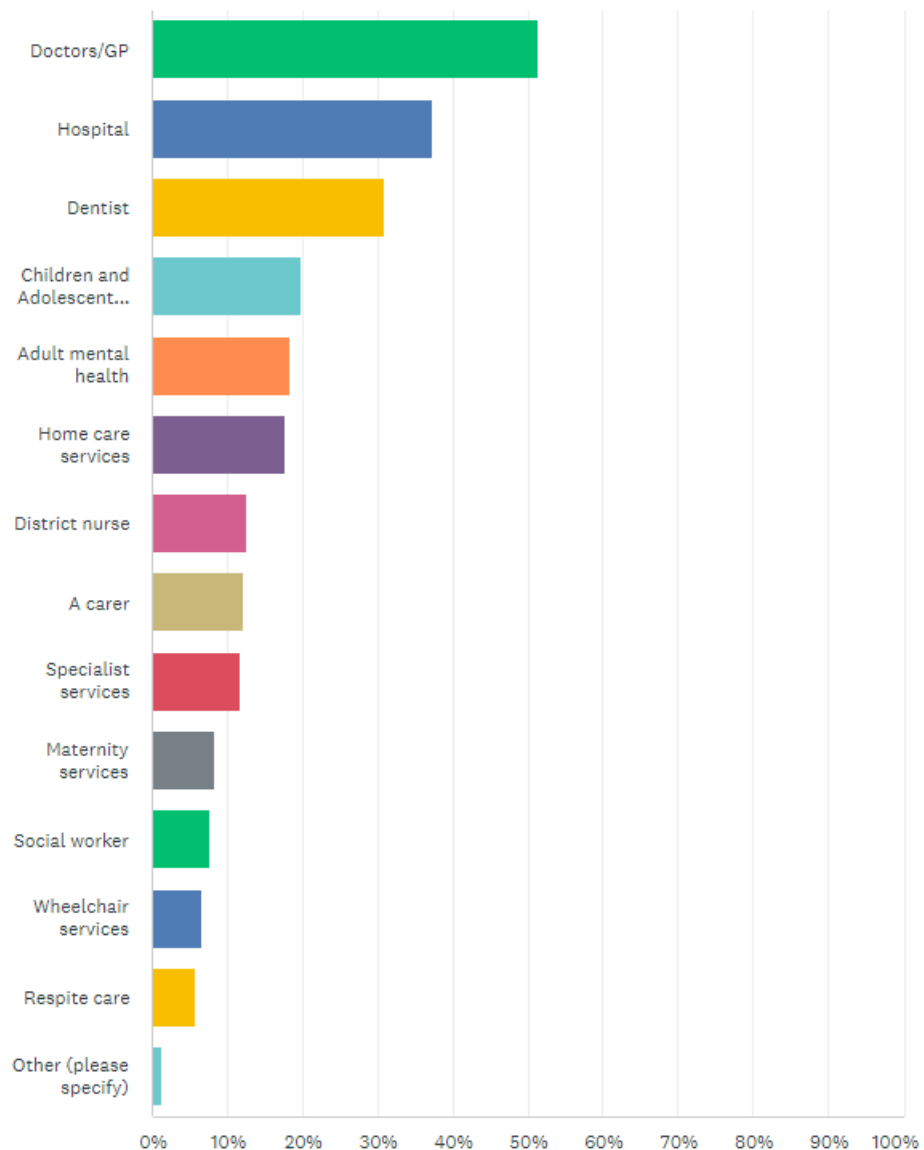
Question 3

We asked service users which specific services work well for them, and to select one or more that applied to them.

The four most popular responses were the Doctors/GP (**51.3%**), the hospital (**37.3%**), the dentist (**31%**), and the Children and Adolescent Mental Health Service (CAMHS) (**19.8%**). These results are of particular interest when reviewed in line with responses to question 4. It would appear that as wheelchair services only received **6.6%** of the votes, this could indicate that either the service is not used by many people, or it is well used and people are not happy with its level of service. Either way, there is something to explore there.

What specific services work well for you? (List all that apply)

Answered: 1,298 Skipped: 0



Question 4

This question was the opposite of question 3, as people were asked what specific services do not work well for them. Again, they had the option to select one or more services that applied to them.

Surprisingly, and in contrast to the responses in question 3, the top four most popular answers were the same as in question 3. Doctors/GP received **29%** of the votes, Children and Adolescent Mental Health Service (CAMHS) **20.7%**, hospital services **17.6%**, and dentist services **17.2%**. This shows a very mixed opinion of the services people access but would also indicate that these services are used by many people who are not entirely happy with the quality of service provided.

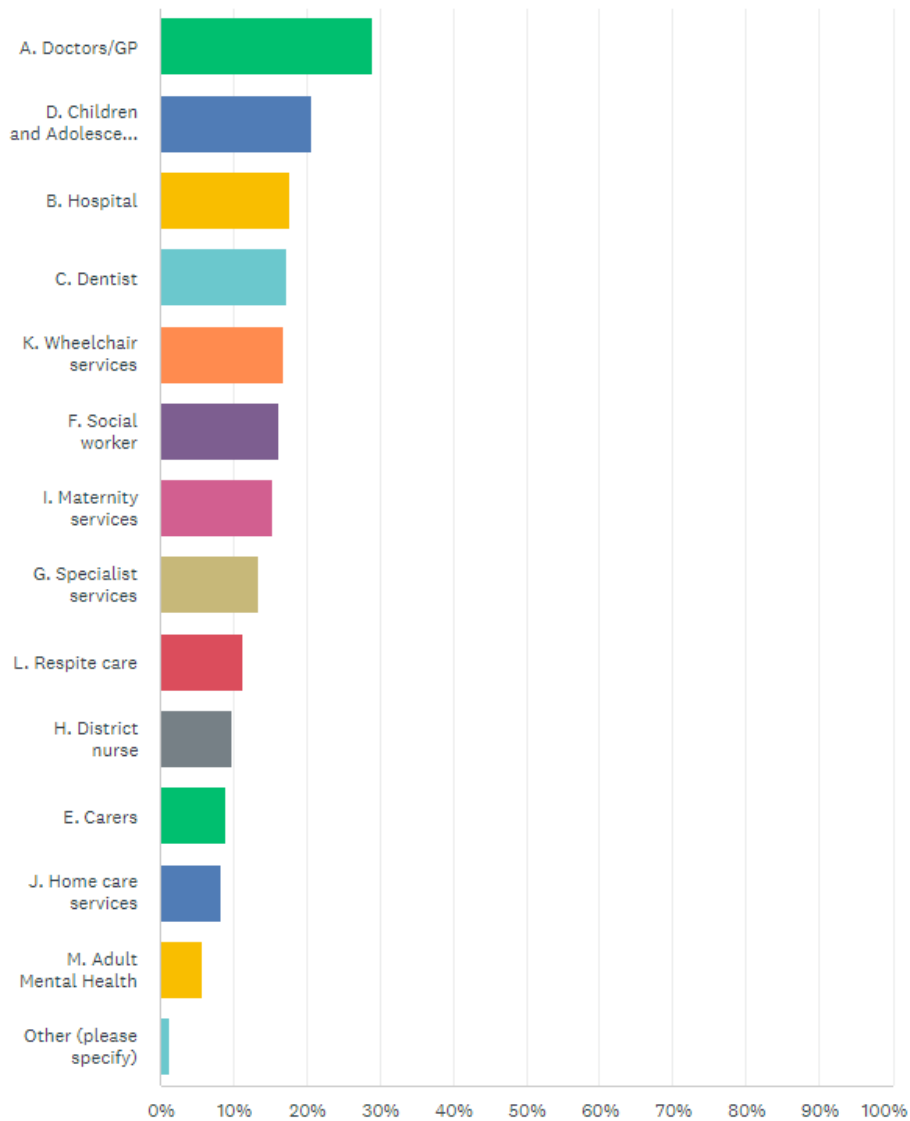
Additional comments were received about the Doctors/GP service in particular, with a reoccurring theme, summed up by one service user, as follows, ***“GP appointments need to be easier to arrange and more admin staff to actually answer the phone instead of long waits to get through with irritating music to listen to.”***

When looking at the wheelchair services results, it was the fifth most selected option, with **17%** of the votes. In question 3 it was selected only 86 times, but in this question, it was selected 220 times. This would indicate that more people are not happy with this service compared to those that are.



What specific services do not work well for you? (List all that apply)

Answered: 1,298 Skipped: 0



ANSWER CHOICES	RESPONSES	
A. Doctors/GP	29.04%	377
B. Hospital	17.64%	229
C. Dentist	17.18%	223
D. Children and Adolescent Mental Health Service (CAMHS)	20.72%	269
E. Carers	8.86%	115
F. Social worker	16.18%	210
G. Specialist services	13.33%	173
H. District nurse	9.78%	127
I. Maternity services	15.25%	198
J. Home care services	8.40%	109
K. Wheelchair services	16.95%	220
L. Respite care	11.40%	148
M. Adult Mental Health	5.86%	76
Other (please specify)	1.23%	16
Total Respondents: 1,298		

Question 5

In this question, we asked service users to tell us what they thought needed to be improved for each service. We listed possible improvements, and the service users could select the letter of the service that required improvement the most (see chart below).

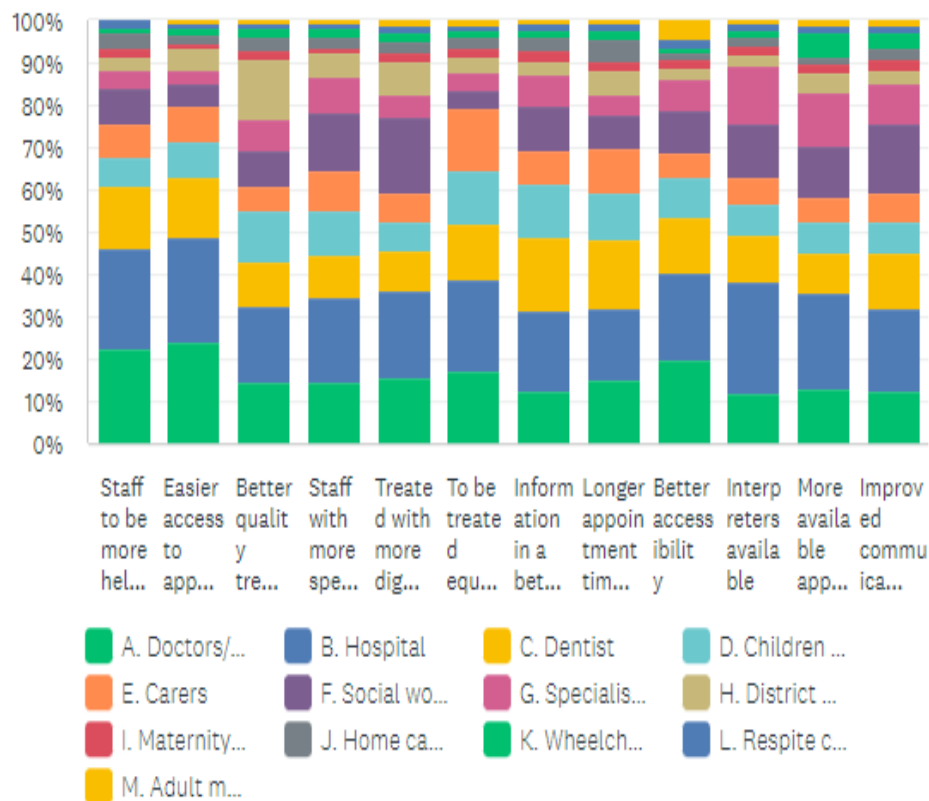
In addition to the analysis of this question on page six, another statistic that stood out specifically was the **18.9%** and **17.3%** of votes from people that would like to see the hospital and dental services have information in a better format to help them understand, e.g. large print. This indicates a disadvantage to service users who have a visual impairment. This perhaps links to another stand-out statistic, with **21.7%** of people stating they wish to be treated equally within the hospital service, indicating a possible need for development in equality, diversity and inclusion.

Once again, a fairly large percentage of people (**26.3%**) would also like more interpreters available within hospitals to better support those whose first language is not English.

Select the letter of the service (from question 4) next to the way these services could be improved. For example, if the improvement to the Doctors/GP service is to have better accessibility, then select A next to this improvement. Only select those reasons that apply to you

Answered: 1,298 Skipped: 0

Select the relevant letter and service



	A. DOCTORS/GP	B. HOSPITAL	C. DENTIST	D. CHILDREN AND ADOLESCENT MENTAL HEALTH SERVICE (CAMHS)	E. CARERS	F. SOCIAL WORKER	G. SPECIALIST SERVICES	H. DISTRICT NURSE	I. MATERNITY SERVICES	J. HOME CARE SERVICES	K. WHEELCHAIR SERVICES	L. RESPITE CARE	M. ADULT MENTAL HEALTH	TOTAL
Staff to be more helpful	22.59% 281	23.95% 298	14.31% 178	6.83% 85	8.12% 101	8.44% 105	4.10% 51	2.97% 37	2.57% 32	3.22% 40	1.21% 15	1.45% 18	0.24% 3	1,244
Easier access to appointments	24.43% 311	24.67% 314	14.30% 182	8.41% 107	8.33% 106	5.34% 68	2.83% 36	5.26% 67	1.41% 18	1.96% 25	1.41% 18	1.18% 15	0.47% 6	1,273
Better quality treatment	14.65% 182	17.79% 221	10.95% 136	11.76% 146	6.04% 75	8.45% 105	7.25% 90	14.01% 174	2.25% 28	2.98% 37	2.09% 26	1.21% 15	0.56% 7	1,242
Staff with more specialist training	14.68% 182	20.24% 251	9.68% 120	10.48% 130	9.92% 123	13.47% 167	8.31% 103	5.73% 71	1.29% 16	2.66% 33	2.02% 25	1.05% 13	0.48% 6	1,240
Treated with more dignity and respect	15.95% 196	20.26% 249	9.68% 119	7.00% 86	6.59% 81	17.90% 220	5.45% 67	7.65% 94	2.36% 29	2.28% 28	2.44% 30	1.63% 20	0.81% 10	1,229
To be treated equally	17.20% 211	21.68% 266	13.12% 161	12.63% 155	14.67% 180	4.24% 52	4.32% 53	3.75% 46	2.28% 28	2.20% 27	1.55% 19	1.39% 17	0.98% 12	1,227
Information in a better format to help you understand, e.g., large print	12.83% 155	18.87% 228	17.30% 209	12.50% 151	8.20% 99	10.10% 122	7.53% 91	3.23% 39	2.57% 31	3.31% 40	1.24% 15	1.57% 19	0.75% 9	1,208
Longer appointment times (for more support time)	15.29% 189	17.07% 211	16.02% 198	11.00% 136	10.60% 131	7.93% 98	4.85% 60	5.83% 72	1.78% 22	5.26% 65	2.02% 25	1.86% 23	0.49% 6	1,236
Better accessibility	19.80% 243	20.86% 256	12.80% 157	9.54% 117	5.87% 72	9.86% 121	7.66% 94	2.53% 31	2.36% 29	1.30% 16	1.30% 16	1.71% 21	4.40% 54	1,227
Interpreters available	12.27% 146	26.30% 313	10.76% 128	7.39% 88	6.39% 76	12.61% 150	13.70% 163	2.61% 31	2.18% 26	2.02% 24	1.51% 18	1.68% 20	0.59% 7	1,190
More available appointments with a Disability Champion	13.37% 162	22.52% 273	9.16% 111	7.59% 92	5.61% 68	12.46% 151	12.46% 151	4.79% 58	2.15% 26	1.57% 19	5.69% 69	1.49% 18	1.16% 14	1,212
Improved communication	12.40% 151	19.46% 237	13.22% 161	7.47% 91	6.90% 84	16.58% 202	9.44% 115	2.71% 33	2.71% 33	3.04% 37	3.20% 39	1.97% 24	0.90% 11	1,218

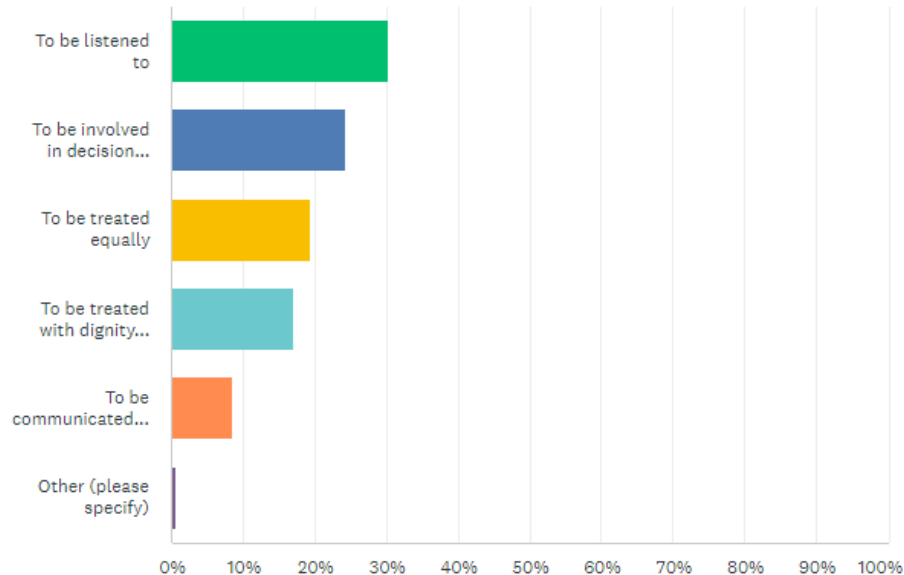
Question 6

To further understand how service users would like to be supported, we asked what is most important to them in how they are treated by healthcare professionals.

The most selected option was that they wanted **“to be listened to”** with 30.2% of the votes. One person added an additional comment for this question stating that she is not listened to properly by the Doctor’ and Dental services. This may be linked to why people voted for longer appointment times for Doctors/GP and Dental services in question four, receiving **15.3%** and **16%** of the votes respectively.

What is most important to you in how you are treated by healthcare professionals?

Answered: 1,298 Skipped: 0



Question 7

To consolidate our understanding of questions that focused on issues that stopped people from using healthcare services, we asked them to tell us their biggest barriers to accessing different services.

They were asked to select a maximum of three options. The two most selected options were 'cannot get an appointment' (**40.6%**) and 'long waiting list' (**41.2%**), which does consolidate service users' frustrations, based on feedback and analysis in previous questions. The third most selected option was 'a shortage of staff', which received **26.4%** of the votes.

Other noticeable statistics that stood out were 'no disabled access', 'lack of disability awareness shown by staff', and 'lack of interpreters', which were all selected by over **20%** of respondents. This links to the data highlighted in previous questions. Less than **1%** of service users selected the option, 'there were no barriers'.

ANSWER CHOICES	RESPONSES	
▼ Long waiting List	41.22%	535
▼ Cannot get an appointment	40.60%	527
▼ Shortage of staff	26.35%	342
▼ Lack of disability awareness shown by staff	21.19%	275
▼ Lack of interpreters	20.80%	270
▼ No disabled access	20.34%	264
▼ Do not meet eligibility criteria	17.80%	231
▼ Poor Communication, e.g., language used (terminology), lack of signage etc..	10.32%	134
▼ Digitally excluded	9.32%	121
▼ Unsuitable opening hours	7.94%	103
▼ Other (please specify)	Responses 0.77%	10
▼ There are no barriers	0.46%	6
Total Respondents: 1,298		

Question 8

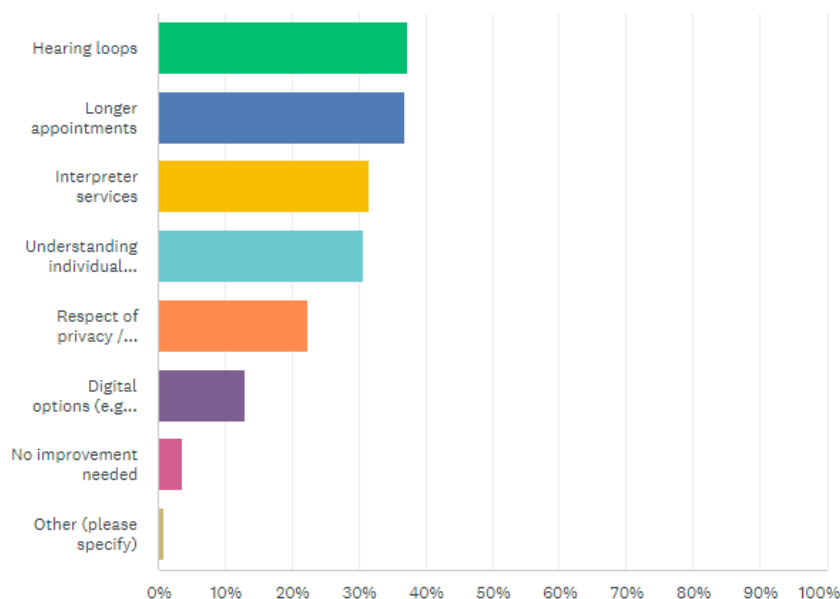
For this question, we wanted to know what possible solutions could be looked at in relation to communication. We asked what can be done better to improve communication with patients, Carers, and relatives.

Respondents could select one or more options, whichever they felt would apply to them. The two most selected options were ‘hearing loops’ (**37.2%**) and, again linking to appointment issues as a reoccurring theme, ‘longer appointment times’ (**37%**). One service user left an additional comment in answer to this question, **“Not rushing – taking time to explain terminology”**.

Closely following ‘longer appointment times’, was ‘interpreter services’ at **31.6%**, and ‘understanding individual needs’ at **31%**.

What can be done better to improve communication with patients, carers and relatives? (Tick all that apply)

Answered: 1,298 Skipped: 0



Question 9

To further explore which services people are aware of that can help prevent a decline in their health and wellbeing, in question 9 we asked people to indicate, from a list of services, which preventative services were known to them.

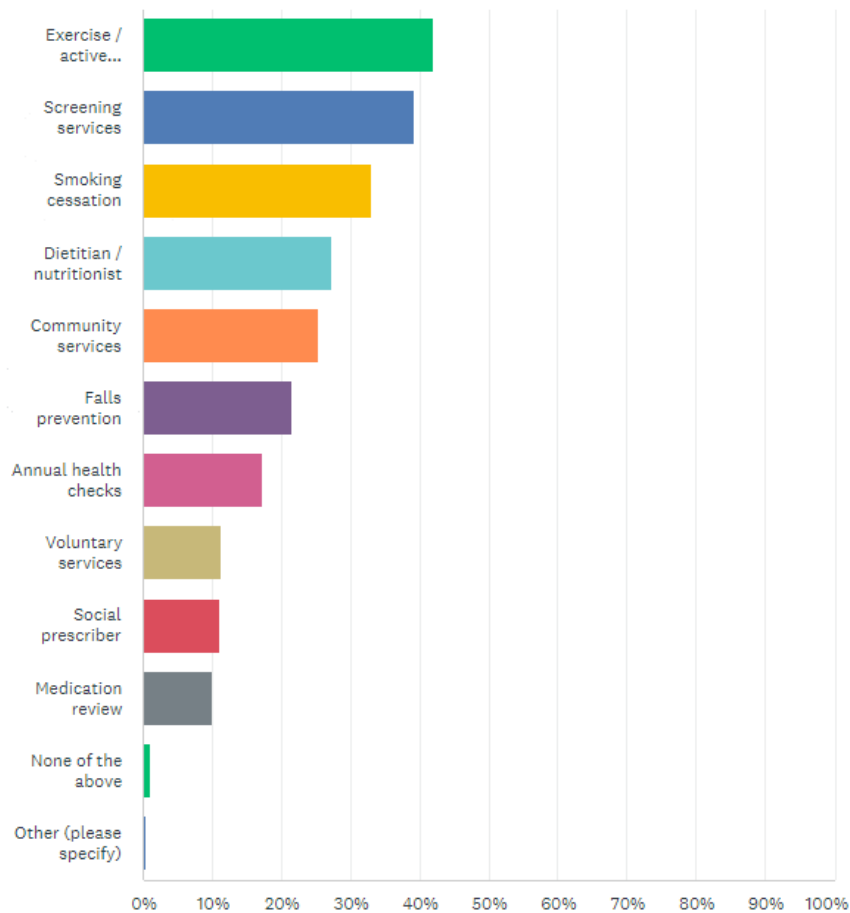
Respondents could select one or more choices from the list given, and the most well known was 'Exercise / Active Lifestyle' with **42%** of service users choosing this option, closely followed by 'Screening Services' (**39%**) and 'Smoking Cessation' (**33%**). The least well-known preventative service was 'Medication Review' which only **10%** of respondents chose, this was closely followed by 'Social Prescriber' and 'Voluntary Services' (**11%**) each. As Social Prescribers are able to connect people to community groups and statutory services for practical and emotional support, it is concerning that the majority of respondents were unaware of this unique service.

As an additional comment, one service user said, ***"Better and more professional medical services will bring the greatest guarantee to our health"***, and another said, ***"Some help, any help, would be appreciated"***.



Which services are you aware of that can help prevent a decline in your health and wellbeing? (Tick all that apply)

Answered: 1,298 Skipped: 0



ANSWER CHOICES	RESPONSES
Exercise / active lifestyle	41.91% 544
Screening services	39.29% 510
Smoking cessation	33.13% 430
Dietitian / nutritionist	27.27% 354
Community services	25.35% 329
Falls prevention	21.57% 280
Annual health checks	17.26% 224
Voluntary services	11.40% 148
Social prescriber	11.17% 145
Medication review	10.09% 131
None of the above	1.16% 15
Other (please specify)	Responses 0.39% 5
Total Respondents: 1,298	

Question 10

People were asked if there were any other comments they would like to include about their experience of health and care services.

Of the many comments given, some were about the support they need now, one service user said, ***“Need to get More mental health support, Autism support, and hard of hearing support, and there is a lack of supported employment to secure permanent employment for disabled people”***. Another service user was frustrated with the lack of support for their disability, they said, ***“My condition is rare so the doctor knows little about it. I am often left with GPs that make assumptions about my rare genetic disorder based on their medical training x years ago. Medical science has changed since and the way my condition is conceptualised and treated by my consultants is changing all the time. They are blocking my access to a healthy life because they are so out of date”***

Other comments from service users were about lack of communication, ***“Having the stress of getting finance demands to pay towards care because my PIP was increased, given an extra £120 and now they want £400 a month. I’m on universal credit for disability and can’t afford this. So now I’m going to have to cancel my care and there is no social worker to help with any of this. Disgusting that no one is communicating with me about this, so I have no option but to cancel the care I need”***.

Another service user was very clear about how they feel they are spoken to by healthcare professionals, they said, ***“Not to be spoken to as if you are stupid. Talking over you as you are trying to explain. Dismissing your concern without even listening to you”***.

Unfortunately, the majority of comments were negative which is a reflection of the frustrations many service users have experienced when accessing health and care services. A full list of comments received can be found in Appendix B.

Question 11

To further explore their experience of health and care services, respondents were asked, following completion of the survey, if they would like to take part in an individual case study and/or focus group.

90% of respondents answered 'yes' to this question which is a staggering response. As we were particularly interested in speaking to individuals who live in areas of high need, a further survey was developed to determine the area individuals resided.

Questions 12 – 17

The remainder of the survey referred to demographic questions such as age, gender, race/ethnicity, religion, location, and whether respondents considered themselves to live with a disability or additional needs. Answers to these questions can be found on page **9-10** of this report under 'Demographics'.

Respondents age

ANSWER CHOICES	RESPONSES	
▼ 18 to 30 years	53.54%	680
▼ 31 to 50 years	39.21%	498
▼ 51 to 65 years	3.23%	41
▼ 66 to 79 years	1.81%	23
▼ 13 to 17 years	1.26%	16
▼ 12 years or under	0.47%	6
▼ 80 to 89 years	0.31%	4
▼ 90 years or over	0.08%	1
▼ Prefer not to say	0.08%	1
TOTAL		1,270

Respondents gender

ANSWER CHOICES	RESPONSES	
Female	61.88%	784
Male	36.54%	463
Prefer not to say	0.79%	10
Non-binary	0.39%	5
Intersex	0.39%	5
Prefer to self-describe	0.00%	0
TOTAL		1,267

Respondents race/ethnicity

ANSWER CHOICES	RESPONSES	
White / White British (including any white ethnic group)	76.42%	969
Black / Black British (including African, Caribbean, or any other black ethnic group)	16.09%	204
Asian / Asian British (including any Pakistani, Indian, Bangladeshi, Chinese, or any Asian ethnic group)	5.68%	72
Prefer not to say	0.71%	9
Arab / Arab British (including any other Arab ethnic group)	0.63%	8
Multiple ethnicity groups / Other (please specify)	Responses 0.47%	6
TOTAL		1,268

Respondents religion

ANSWER CHOICES	RESPONSES	
Christian (including Catholic, Protestant and all other Christian denominations)	79.10%	999
No religion	10.29%	130
Hindu	6.10%	77
Jewish	1.74%	22
Muslim	1.27%	16
Buddhist	0.95%	12
Sikh	0.40%	5
Other (please specify)	Responses 0.16%	2
TOTAL		1,263

Respondents living with a disability or additional need

ANSWER CHOICES	RESPONSES	
Yes	54.76%	690
No	34.37%	433
Prefer not to say	10.87%	137
TOTAL		1,260

Respondents area they live in

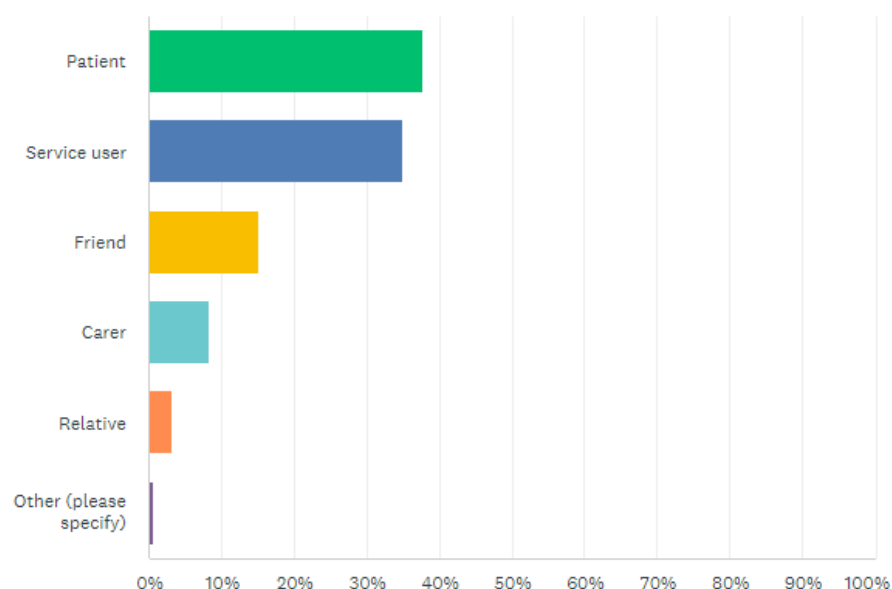
ANSWER CHOICES	RESPONSES
Bedfordshire	61.56% 780
Luton	26.12% 331
Milton Keynes	11.76% 149
None of the above	0.55% 7
TOTAL	1,267

Question 18

To get an indication of whether the service user, a patient, Carer, friend or a relative had completed the survey we asked respondents to select their answer from the list given. Results showed that the majority of respondents considered themselves a patient (**38%**) or a service user (**35%**) when completing the survey. Only **15%** described themselves as a 'friend' who was completing on behalf of a patient or service user, **8%** considered themselves a Carer and **3%** a relative.

Please select whichever most applies to you. I am completing this questionnaire as a:

Answered: 1,270 Skipped: 28



Conclusion

We received a very good response to the survey which provided a wealth of quality feedback from service users, patients, Carers and their family members who access health and social care services.

Many additional comments were provided in answer to the set questions, with some of them being highlighted throughout this report. It clearly shows the depth of feeling particularly for those that are unhappy with service provision.

From the responses received, the main issue that needs to be addressed is the need for an easier booking process for Doctors/GP services, and longer appointment times, which is unsurprising. However, evidence can also be seen of health inequalities for those that may be disproportionately impacted due to a physical and/or learning disability. For example, the Deaf community need 'face to face' appointments with their GP, and hospital consultants, but are struggling to do so due to the current appointment systems and the impact of long waiting lists. In addition, the majority of people would like to see more Interpreters available in GP and hospital settings to help support them, and to be able to more easily secure an appointment with a Disability Champion.

Another barrier to service provision highlighted within the survey, in addition to securing an appointment and lack of Interpreters, was the lack of disabled access to premises. Clearly, this only has a major impact on people with a physical disability and may not affect, or even be a consideration for the able-bodied, but it is preventing disabled people from accessing the services they need.

In addition, evidence showed that service users were unhappy with how they are treated by healthcare professionals, highlighting the importance of being listened to, and always being involved in decision-making. A key requirement was to be treated equally, and therefore to vastly reduce health inequalities, this needs to be a priority for all commissioners and providers of healthcare services. In conclusion, the majority of people would like to experience more understanding of their individual needs when accessing health and care services, to improve services and better meet the expectations of people across BLMK.

Next Steps

Those respondents who indicated they would like to take part in a more in-depth focus group or individual case study, were sent an additional survey to determine the specific area of Bedfordshire, Luton or Milton Keynes (BLMK) they lived in. Selection for the focus groups and individual studies will be based on whether they live in areas of high deprivation across BLMK. All participants who agree and are chosen to take part will be offered a £25 gift voucher. We intend to hold the focus groups and individual interviews in January 2023, and a further report will be produced showing the results of their experience.

From the initial survey results given in this report, follow-up actions need to be discussed by key stakeholders to address the health inequalities highlighted and to prevent people from being disproportionately impacted due to a physical and/or learning disability.

Initial feedback suggest further consideration should be given to the following areas:





Interpreters – Hospitals Trusts to urgently review the provision of Interpreters within the Trust to determine quantity and availability to ensure patients' needs are catered for. In addition, all service providers to comply with Accessible Information Standards (AIS) to ensure that interpreters are readily available, and to be more proactive in ensuring they are available when and where required, for as long as required.

Better access to Interpreters would increase a Deaf person's confidence, and reduce anxiety before and during an appointment with a health and/or social care professional.



Disability Champions – Healthcare professionals to receive training and guidance to understand the role of a Disability Champion and be prepared to offer more appointments to service users who may benefit from this service.



Healthcare Professionals – training and recruitment to include 'listening to patients/service users' to better understand their needs and to make adjustments where necessary to enable better access to services.



Hearing Loops – installed across all healthcare establishments.



Disability Access – urgent review of **all** healthcare premises to ensure disability access is available at all times.



Industry-wide marketing campaign – to raise awareness for more self-care/self-management and the availability of support services or preventative services available to the public.

Thank You

Healthwatch Central Bedfordshire (HWCB), The Disability Resource Centre (DRC) and Community Dental Services (CDS CIC) would like to thank all the residents who took the time to complete the survey, and who took part in a focus group, or more in-depth case study, to share details of their experience of accessing health and care services.

We would also like to thank our colleagues from the Denny Review who commissioned this project and for their continued support throughout the process.



Organisations involved:

Healthwatch Central Bedfordshire (HWCB) are part of a network which aims to ensure that the views and feedback from patients and carers are an integral part of the design and delivery of local services.

Healthwatch Central Bedfordshire is the local consumer champion promoting choice and influencing the provision of high-quality health, social care and wellbeing services for all across Central Bedfordshire. We are independent, professional and the voice of local people.

The Disability Resource Centre (DRC) is a charity led by people with lived experience that has those affected by health and disability at the centre of its decision-making. Their vision is to empower people of all ages with pan-disability, health conditions, mental ill-health and carers to fulfil their potential and aspirations. The cornerstones to the services are professional, emotional and practical support including information and advice, equipment, training, employment support, wellbeing, and personalisation services

Community Dental Services CIC (CDS CIC) is an employee-owned social enterprise delivering special care, paediatric dentistry and Oral Health improvement across Bedfordshire, Essex, Norfolk, Waveney, Lincolnshire, Leicestershire, Nottinghamshire, Derbyshire, Oxfordshire and in Her Majesty's Prison services in Norfolk, Suffolk and Hertfordshire.

We are a referral only specialist dental service, bringing dental care to people who cannot be treated in general dental practice; including patients who have learning disabilities, mental health, or are in situations or locations that traditional dental services cannot reach. Our social purpose is to *'improve oral health in evermore communities'* we serve.

Appendix A

- Survey questions

1. What health and social care services do you / have you used? (Please tick all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Doctors/GP | <input type="checkbox"/> Adult mental health |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> District nurse |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Maternity services |
| <input type="checkbox"/> CAMHS | <input type="checkbox"/> Home care services |
| <input type="checkbox"/> Carers | <input type="checkbox"/> Wheelchair services |
| <input type="checkbox"/> Social worker | <input type="checkbox"/> Respite care |
| <input type="checkbox"/> Specialist services | <input type="checkbox"/> Other (please specify) |

2. Do you know which other Health and care services are available to you?

- Yes No

If you answered yes to this question, please give an example:

.....

3. What specific services work well for you, e.g., GP surgery? (List all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Doctor/GP | <input type="checkbox"/> Adult mental health |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> District nurse |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Maternity services |
| <input type="checkbox"/> CAMHS | <input type="checkbox"/> Home care services |
| <input type="checkbox"/> Carers | <input type="checkbox"/> Wheelchair services |
| <input type="checkbox"/> Social worker | <input type="checkbox"/> Respite care |
| <input type="checkbox"/> Specialist services | <input type="checkbox"/> Other (please specify) |

4. What specific services do not work well for you (List all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Doctor/GP | <input type="checkbox"/> Adult mental health |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> District nurse |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Maternity services |
| <input type="checkbox"/> CAMHS | <input type="checkbox"/> Home care services |
| <input type="checkbox"/> Carers | <input type="checkbox"/> Wheelchair services |
| <input type="checkbox"/> Social worker | <input type="checkbox"/> Respite care |
| <input type="checkbox"/> Specialist services | <input type="checkbox"/> Other (please specify) |

5. Select the letter of the service (from question 4) next to the way these services could be improved. For example, if the improvement to the Doctors/GP service is to have better accessibility, then select A next to this improvement. Only select those reasons that apply to you

- Staff to be more helpful
- Easier access to appointments
- Better quality treatment
- Staff with more specialist training
- Treated with more dignity and respect
- To be treated equally
- Information in a better format to help you understand, e.g., large print
- Longer appointment times (for more support time)
- Better accessibility
- Interpreters available
- More available appointments with a Disability Champion
- Improved communication
- Other (please specify)

6. What is most important to you in how you are treated by healthcare professionals? (Please tick all that apply)

- to be listened to
- to be involved in decision making
- to be treated equally
- to be treated with dignity and respect.
- to be communicated with in a way that suits me
- Other (please specify)

7. What are the biggest barriers to you accessing different services? (Select up to 3 options)

- Cannot get an appointment
- Shortage of staff
- Long Waiting List
- No Disabled Access
- Lack of Disability Awareness Shown by Staff
- Unsuitable Opening Hours
- Digitally Excluded
- Do Not Meet Eligibility Criteria
- Lack of Interpreters
- Poor Communication, e.g., language used (terminology), lack of signage etc.
- Other (please specify)

8. What can be done better to improve communication with patients, carers and relatives? (Tick all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Hearing loops | <input type="checkbox"/> Digital options (e.g., text message, video conferencing) |
| <input type="checkbox"/> Interpreter services | <input type="checkbox"/> Understanding individual needs |
| <input type="checkbox"/> Longer appointment | <input type="checkbox"/> No improvement needed |
| <input type="checkbox"/> Respect of privacy / Confidentiality | <input type="checkbox"/> Other (please specify) |

9. Which services are you aware of that can help prevent a decline in your health and wellbeing? (Tick all that apply)

- Screening services
- Smoking cessation
- Exercise / active lifestyle
- Dietitian / nutritionist
- Community services
- Voluntary services
- Social prescriber
- Falls prevention
- Annual health checks
- Medication review
- Other, please state

10. Are there any other comments you would like to include about your experience of health and care services?

.....

.....

11. Would you like to take part in a case study and / or a focus group to share further details of your experience?

Name:

Email:

ABOUT YOU (only add service user details):

12. What is your age category?

- 12 years or under
- 13 to 17 years
- 18 to 30 years
- 31 to 50 years
- 51 to 65 years
- 66 to 79 years
- 80 to 89 years
- 90 + years
- Prefer not to say

13. How would you describe your gender?

- Female
- Male
- Non-binary
- Intersex
- Prefer not to say
- Prefer to self-describe
- Self-description:

14. Which race/ethnicity best describes you?

- White / White British (including any white ethnic group)
- Black / Black British (including African, Caribbean, or any other black ethnic group)
- Asian / Asian British (including any Pakistani, Indian, Bangladeshi, Chinese, or any Asian ethnic group)
- Arab / Arab British (including any other Arab ethnic group)
- Prefer not to say
- Multiple ethnicity groups / Other (please specify)

15. Select which best describes your religion?

- Christian (including Catholic, Protestant and all other Christian denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Buddhist
- No religion
- Other (please specify)

16. Do you consider yourself to live with a disability or additional needs?

- Yes
- No
- Prefer not to say

17. Please select whichever most applies to you. I am completing this questionnaire as a:

- Service user Patient Carer Friend Relative
- Other (please specify)

Thank you for taking part in this survey

Appendix B

- Comments

Withdrawal of services for the disabled will not be continued as private treatment is very expensive, as little or no disposable income/ cash

Be sure to go to a regular hospital

Make sure you choose the hospital you usually go to

Better and more professional medical services will bring the greatest guarantee to our health

I feel it is necessary to choose a more appropriate way to communicate with patients in a variety of ways

Dentist services (teeth pulling, over 2 years wait) is dire. GP access is awful. Hospital wait time (6 months for neurologist) is a joke

When there was cut backs, I was left stranded with no support with my father back in 2015. The social workers were quite rude & difficult to deal with. It was impossible to get a social worker order assigned, an agency social worker visited my father on one occasion in a care home, he was unable to communicate his needs. It appeared to be a tick exercise, to show action was done. He died in 2019 from bladder cancer. The hospital did Not seem to ask why he was ill and sent us on a wild goose chase. The care system is broken. The worrying aspect younger staff make decisions which are incorrect because of lack of experience & double checked by senior staff.

It's extremely difficult to get appointments with all services within a timely manner.

Some help any help would be greatly appreciated

Respite care facilities are too few and too costly. I am in my 80 s and sole carer for my disabled husband. I receive Â£80 per month carers allowance. 1 week respite care will cost me £900+!!!

Show compassion to individuals really choose the most appropriate support.

Insufficient care at present for my daughter who has been suffering with knee pain for over a year now. She has had a ultrasound scan and MRI and a Bakers Cyst was found she can hardly walk now due to healthcare professionals not deciding on the next plan of action.

My condition is rare so the doctor knows little about it. I am often left with GPs that make assumptions about my rare genetic disorder based on their medical training x years ago. Medical science has changed since and the way my condition is conceptualised and treated by mu consultants is changing all the time. They are blocking my access to a healthy life because they are so out of date

My husband and I have repeatedly been let down by social services. Hospital communication needs significant improvement for those with dementia. There needs to be closer communication between professionals, for people who live in Central Beds but whose GP is in Buckinghamshire and whose nearest hospital is L&D, or other cross county issues.

Contacting and gaining an appointment with a GP is beyond a joke. This results in us having to visit hospital more with minor issues.

Need patient contact in GP to diagnose illness or injuries

All health care and hospitals communicate with each another

More alternative treatments and easier access to living requirements.

Lack of social care, support & facilities, signposting etc in Dunstable area.

Having the stress of getting finance demands to pay towards care because my PIP was increased, given an extra £120 and now they want £400 a month. I'm on universal credit for disability and can't afford this. So now I'm going to have to cancel my care and there is no social worker to help with any of this. Disgusting that none is communicating with me about so no option but to cancel the care I need

Quicker, referrals when advised by professionals and able to get to see or speak to doctor to enable this.

GP appointments need to be easier to arrange and more admin staff to actually answer the phone instead of long waits to get through with irritating music to listen to.

I would like to see mature reception staff who listen well and experience.

Need to get More Mental Health Support and need to get Autism Support and Hard of Hearing Support and lack of Supported Employment for secure Permanent Employment for Disabled People which I am now on Zero Hours Contract while on Universal Credit insecure employment and thinking moving to Scotland or Republic of Ireland because they got stronger worker employment rights up there in these countries compared to East of England

My GP seems to rely on III to screen patients and arrange appointments. Also I am deaf so they don't seem to understand that a phone appointment is useless, I need face to face but cannot get this

Need more long term support for CFS / ME patients and more understanding when having appointments with this condition

Lack of thorough overall review during year following stroke

Have not had very good communication between social workers and my family

Train staff to be more friendly and mainly improve customer service as we are human as well.

Lack of duty of care

I have a great doctors surgery that go out of their way to help my handicapped daughter. Sadly once seen by the doctor it takes months for a hospital appointment even phoning the surgery to find out why.

Not to spoken to as if you are stupid. Talking over you as you are trying to explain. Dismissing you concern without even listening to you

More help for autism children

Just to say that the Surgeries need to employ and train people properly for their jobs. To make front of house staff more friendly, helpful and knowledgeable. I accept that the Surgeries are under a lot of pressure but so are the patients who are trying to access their services.

Please add disability transport services (bus drivers and escorts) to the list

Stop using medical jargon and treat people according to their individual needs.

They need to more diverse

They seem to be disjointed with different communication systems ie electronic records and the information is often not shared between the different services involved with the same patient.

Have to continually remind staff that a hoist is required

Haematology at L&D is frustrating I am changing hospitals to the one where I am at Uni.

Being told that there are NO appointments after having been waiting on the phone for a long time

Generally all health practitioners do their best to be helpful. However, you can hear in their voices how frustrated they are with the limitations put upon them, due to lack of staff or other resources.

Mental Health Services were very challenging. Different healthcare professionals, so no continuity.