healthwatch

NEAS Clinical Strategy Engagement Report Healthwatch Hartlepool

Contents

Contents]
1. Healthwatch Organisation	2
2. Event Details	2
3. Key Objectives	2
4. Event Structure	2
5. Participant Engagement and Feedback	3
6. Demographics	6
7. Recommendations for NEAS	7
8. Overall Summary and Conclusions	8
9. Attachments	8

1. Healthwatch Organisation

- Name: Healthwatch Hartlepool
- Contact Information: Stephen Thomas stephen@healthwatchhartlepool.co.uk

Telephone - 0800 254 5552

2. Event Details

- Event Title: Your Voice Counts Tell Us About the Northeast Ambulance Service
- Event Date: Tuesday 15th October (12pm 1.15pm)
- Event Location: Greenbank, Hartlepool TS24 7QS
- Type of Event: Presentation by Christopher Akers-Belcher (CEO Healthwatch Hartlepool followed by group discussion and workshop)
- Number of Attendees: In total 22 people attended the event and completed questionnaires.

3. Key Objectives

What Were the Main Goals of the Event?

- Objective 1: To gather feedback on NEAS services, including 999 calls, NHS111 advice, and patient transport.
- Objective 2: To understand how NEAS services are meeting community needs.
- Objective 3: To encourage participants to suggest improvements for NEAS services.

4. Event Structure

Agenda Overview:

The session took place at Greenbank in Hartlepool on Tuesday 15th October (12pm – 1.15pm) and followed the format shown below –

- 12:00 PM: Registration and Welcome.
- 12:10pm: Presentation Christopher Akers-Belcher (CEO Healthwatch Hartlepool
- 12.20pm: Any questions?

- 12.30pm: Group discussions and small group working
- 1:00pm: Completion of questionnaires
- 1.15pm: Final comments and close

5. Participant Engagement and Feedback

How Did Participants Engage? -

- Initial presentation, which identified key objectives for session and scope of NEAS role and functions
- Group questions and comments
- Facilitated large group discussion
- Small group discussions, personal experiences and scenarios
- Completion of questionnaires
- Any final questions and next steps

Comments

The group discussion was lively and inclusive and a wide personal experiences of NEAS services were aired and discussed. Suggestions were also received as to how NEAS services could be further developed and improved going forward.

Key Topics Discussed:

- 999 Emergency Services:
- 7 people had experience of the 999 service, some personal, some via a family member.
- Overall, respondents reported a positive experience of service delivery.
- Respondents' top priority for 999 services was overwhelmingly speed of the response time.
- Words and phrases used to describe paramedics included "brilliant",
 "professional", "reassuring", "kind and respectful", "considerate", "well trained",
 "understanding", and "lst class".
- Participants generally reported calls had been handled efficiently and compassionately and that response times had been good. – "response times for 999 are generally good in our area.

- Call handlers were said to be "caring", "compassionate" and "listened". They also kept callers informed of what was happening and how long it was going to be before the ambulance arrived.
- Respondents felt that the service was very dedicated and professional, but "under resourced".
- Most respondents said that they would not necessarily be taken to hospital if they
 made a 999 call, and that it would depend on circumstances and paramedic
 assessment. Others however said that they would expect to go to hospital as they
 would only phone 999 in an emergency or life threatening situation.

NHS111 Service:

- 12 people reported having experience of contacting the 111 service either personally, or via a member of their family.
- Overall, respondents reported a largely positive experience of the service, although delays in getting through by telephone and lengthy waiting times when an ambulance was required were reported (for example after falls). - "I called 111 and after 30 minutes gave up".
- Words and phrases used to describe paramedics included "kind", "considerate",
 "understanding", "knowledgeable", "respectful", "polite"and "helpful".
- Several respondents commented that the 111 service had booked appointments for them or family members at Urgent Care, which meant they were seen as soon as they arrived at Urgent Care
- Respondents reported that they received call backs from call handlers advising of waiting times for ambulances or other services.
- Staff were generally considered to be very professional, well trained and an asset to the service. However, 1 person did feel that a paramedic who had attended following a 111 call had been dismissive.
- Respondents reported that the advice received from call handlers was appropriate, helpful and delivered in a friendly and supportive manner.
- Several people commented that the number of questions asked by call handlers was excessive and in some instances off putting.

 Some respondents commented that referrals could be improved, particularly in cases where mental health was an issue. Information flows back to GP were said to be occasionally problematic, resulting in delays in follow up care, support or treatment.

Patient Transport:

- Experience of patient transport services was quite limited, (only 3 respondents)
 but was generally quite positive.
- Staff were again viewed as a great asset to the service, and described as "kind", "helpful", "supportive", "knowledgeable" and "friendly".
- The service is viewed as being valuable and important by those who use PTS.
- Respondents felt that information about patient transport services needs to be improved. It was generally considered to be a good service if you had been made aware of it and met the eligibility criteria to access the service.
- More investment needed in the service and in promoting the availability of the service. Getting to and from hospital appointments is enormously difficult for some patients with mobility disabilities and certain long term conditions.
- Opportunities should be taken to publicise other transport related services and the assistance patients receiving benefits can receive with transport costs.

Top Concerns Raised:

- Waiting times for some call categories are too long.
- More resources (funding) are needed in terms of both staff and vehicles.
- More regular information and communication should be made available to improve public awareness of what to expect when calling either 999 or 111. This should include materials at GP surgeries and other health outlets as well as media-based campaigns.
- Greater collaboration with mental health services in both statutory and voluntary sectors is needed to ensure access to mental health services is as timely and effective as possible. Mental health staff should be a constant within the call service.

- More work is required around improving handover times at hospitals, (particularly
 at times of high pressure/demand) with a view to reducing delays and
 ambulances being taken out of circulation until a bed becomes available.
- Waiting times for 111 calls can be too long, and some respondent's reported ending their call due to the length of time waiting to be answered.
- Standard questions asked during 111 calls should be reviewed with a view to streamlining the process for patients in some circumstances.

Positive Feedback:

- Generally, the feedback about 999, 111 and PTS was very good.
- Feedback relating to NEAS staff, both front line and within the call centre was positive. Staff are generally considered to be polite, considerate, caring and knowledgeable.
- Staff are viewed as being well trained and highly professional in their approach to patient care and support. They are generally seen as being the organisations biggest asset.
- Response times for 999 calls was viewed to be very good.

6. Demographics

• Age Groups:

Under 18 (0) 18-24 (0) 25-34 (1) 35-44 (3)

45-54 (4) 55-64 (3) 65-74 (4) 75+ (7)

• Gender Breakdown:

Female (17) Male (5)

• Ethnicity Breakdown:

White British (22)

Disabilities

Yes (7) No (14) Prefer not to say (1)

Health Conditions:

Yes (11) No (10) Prefer not to say (1)

7. Recommendations for NEAS

Suggestions for 999 Emergency Services:

- Further consideration (and investment) is needed to minimise handover delays
 at hospitals which result in delayed patient access to hospital care. This also
 prevents ambulances from immediately returning to service thus putting
 additional strain on the service, particularly at times of high demand.
- NEAS should consider developing a regular programme of communication across the region, in order to raise public awareness of the roles of 999 and 111 services.

Suggestions for NHS111:

- Consideration should be given to ways in which the length of time taken for patients calls to be answered at times of high demand can be reduced.
- The questions that patients are asked during the 111 triage process should be reviewed to ascertain whether there are occasions in which less questions could be used.
- Patient waiting times for ambulances in non-life threatening situations can on occasions be excessive, and every opportunity should be sort (including additional investment) to improve this situation.

Suggestions for Patient Transport:

- The availability of PTS services is more widely publicised, and GPs are more proactive in making patients aware of the availability of the service.
- Opportunities are taken to raise patient awareness of circumstances in which assistance is available with transport costs when accessing hospital appointments.

Other Issues

 NEAS should develop a communication and engagement strategy which seeks to develop greater mutual understanding and engagement with community and voluntary sector partners, and in particular, those providing support with mental health.

8. Overall Summary and Conclusions

Top 3 Findings:

- 1. Participants were generally appreciative of the services NEAS provide, and in particular the caring professionalism demonstrated by both ambulance crews and call handlers. Staff were considered to be knowledgeable, well trained and a key service asset.
- 2. Response times for 999 calls were generally considered to be very good, but
 waiting time to get through to call handlers when making 111 calls can be
 excessive. Waiting times for non-urgent ambulance support can also be
 prolonged (e.g. falls) causing considerable distress for the patient concerned.
- 3. Consideration should be given to improving ongoing communication and
 patient information strategies to ensure patients/public are fully aware of all
 services (including PTS) and how/when they should be accessed. Particular
 attention should also be given to developing links with CVS sector and in
 particular, organisations providing mental health support.

9. Attachments



Submitted By:

Stephen Thomas, Development Officer, Healthwatch Hartlepool

Date:

28.10.2024

healthwatch

Healthwatch Darlington Limited c/o Tandem Hub, Morton Park Business Training Centre Morton Park Way DARLINGTON DL1 4PJ 01325 380145 or 07525237723

Email: info@healthwatchdarlington.co.uk Website: www.healthwatchdarlington.co.uk