

# Health & Wellbeing Board

## Buckinghamshire

### Healthwatch Bucks quarterly update

**Date:** 22nd June 2023

**Author/Lead Contacts:** Zoe McIntosh, Chief Executive, Healthwatch Bucks

**Report Sponsor:** John Meech, Chair, Healthwatch Bucks

**Consideration:**  **Information**       **Discussion**  
 **Decision**       **Endorsement**

Please indicate to which priority in the Joint Local Health and Wellbeing Strategy, [Happier, Healthier Lives Strategy \(2022-2025\)](#) your report links to.

Start Well	Live Well	Age Well
<input type="checkbox"/> Improving outcomes during maternity and early years	<input type="checkbox"/> Reducing the rates of cardiovascular disease	<input type="checkbox"/> Improving places and helping communities to support healthy ageing
<input type="checkbox"/> Improving mental health support for children and young people	<input type="checkbox"/> Improving mental health support for adults particularly for those at greater risk of poor mental health	<input type="checkbox"/> Improving mental health support for older people and reducing feelings of social isolation
<input type="checkbox"/> Reducing the prevalence of obesity in children and young people	<input type="checkbox"/> Reducing the prevalence of obesity in adults	<input type="checkbox"/> Increasing the physical activity of older people

None of the above? Please clarify below:

Healthwatch Bucks is your local health and social care champion. We make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care.

### 1. Purpose of report

Healthwatch Bucks is the Local Healthwatch for Buckinghamshire. We are one of over 150 independent Local Healthwatch organisations set up by the government under the Health and Social Care Act 2012. Our role is to ensure that health and social care services put the experiences of people at the heart of their work. The report outlines the projects we have been working on over the last quarter.

## Healthwatch Bucks update

Start Well

Live Well

Age Well

June 2023

**This paper summarises recent project work we have undertaken in relation to health and social care services, as aligned with the priorities of the Joint Health & Wellbeing strategy.**

## Live Well

### Young Onset Dementia

Following the publication of our report on Young Onset Dementia, we have received a joint response to our recommendations from Bucks Council and Bucks ICB. The report and response can be accessed [here](#).

The recommendations in our report have been incorporated into the recommendations from the Bucks Council Health and Social Care Select Committee report 'a Rapid Review of support for people living with dementia and their carers' in Buckinghamshire'.

### Early intervention for Eating Disorders: youth engagement in Buckinghamshire

Oxford Health asked to gather views from diverse and lesser heard groups of young people on FREED –First Episode Rapid Early Intervention for Eating Disorders.

FREED is a targeted service for 16 to 25-year-olds who have had an eating disorder for three years or less. There are support services for eating disorders available to people of all ages in Buckinghamshire. However, young people getting help for eating disorders through FREED get rapid access to professional support.

#### What we did

The views that we heard were not from FREED service users. The people we spoke to had never heard of FREED.

We ran a series of five focus groups during December 2022 and January 2023. We worked in partnership with:

- **SV2G (St Vincent and the 2nd Generation)** – an African and Caribbean Arts and Heritage organisation based in High Wycombe. SV2G offers a range of creative arts and heritage programmes that empower and develop young people of various diverse backgrounds.

- **Khepera CIC** – a health and wellbeing organisation supporting young people and their families.

Focus group facilitators explained the FREED service model to young people before asking questions.

In total, thirty-three young people took part in these sessions.

## Key findings

- Overall, young people would recommend the FREED service to others.
- There was a concern that FREED service delivery times were too long and that a triage approach could work better i.e., call within 48 hours and simultaneous assessment.
- Young people were more likely to speak to a friend rather than go to a doctor if they thought that they had an eating disorder.
- A fear of being labelled would stop people from seeking professional help.
- There was stigma around prescribed medication.
- Gender-neutral communication for promoting the FREED service was preferred.

## Our recommendations

We recommended that Oxford Health NHS Foundation Trust, Community Mental Health Teams, enhance awareness by:

- Developing referral partnerships with youth organisations in Buckinghamshire
- Linking with local educational and training providers
- Distributing FREED leaflets in General Practices across Buckinghamshire. First point of contact in the health care system is likely to be in General Practices
- Targeting FREED promotion in community settings such as youth clubs, leisure centres, further education colleges
- Using digital platforms to inform young people, educators and local organisations about the service.

## Communicating with young people about FREED

We recommended that the FREED service should use:

- **Gender-neutral** images and language. The younger generation is more open and accepting of gender fluidity. This also breaks down stereotypes that only females experience issues with eating
- **Positive words** to inform young people about the FREED service with choices and alternative paths to seek help

- Increased emphasis on **talking treatments**. There are no specific drugs to treat eating disorders. However, focus groups highlighted a fear of being put on medication as part of the treatment process
- Clear messaging about **confidentiality** and handling of personal information.

You can read the report and the response from OHFT [here](#) .

## GP surgery care when you're deaf, Deaf or hard of hearing

**We wanted to find out about the experiences of people who are deaf, Deaf or hard of hearing when they try to access care from GP surgeries.**

The aim of our research was to identify health inequalities that might affect deaf, Deaf and hard of hearing people so we could make recommendations on tackling them.

### What we did

We asked people about their experiences of booking and attending appointments at their GP surgery in Buckinghamshire. In line with SignHealth guidance, we used the terms 'Deaf', 'deaf' and 'hard of hearing' as follows when we designed our research questions and reported our findings.

- deaf – used to describe or identify anyone who has a severe hearing problem
- Deaf – used to refer to people who have been deaf all their lives, or since before they started to learn to talk
- hard of hearing – used to describe people with less severe hearing problems.

We developed a survey which was online from 7 February to 30 April 2023. This was publicised via social media, as well as via community and service providers' newsletters. We also held three focus groups.

Altogether, 90 people who were deaf, Deaf or hard of hearing told us about their experiences of accessing GP surgery care in Bucks.

### Key findings

We received feedback about a range of issues. People highlighted challenges they had faced with basic communication, making appointments and attending appointments.

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- Few people knew they could ask for their GP records to be 'flagged' with their communication needs
- Many were frustrated by having to remind people inside the surgery (and then in secondary care if they were referred) that they had a degree of hearing loss
- Few Deaf people had experience of British Sign Language (BSL) interpreters in a GP surgery. They said it took too long to book, and/or that Sign Live or similar apps were not generally used
- Many people who are hard of hearing, deaf or Deaf find making appointment by phone or receiving speech calls from GP surgeries difficult
- While several people asked family members, friends and/or social workers to help them book appointments and/or communicate with medical staff, some felt this did not allow them to keep aspects of their medical history private
- Some people told us that not being able to communicate in a way that suited them left them confused, frustrated, ill-informed or they felt the experience affected their self-esteem in a negative way.

### Our recommendations

We recommended that BOB ICB should encourage Buckinghamshire GP surgeries to sign up to the Healthwatch Bucks Deaf and Hearing Loss GP Practice Charter. This sets out a commitment to reducing inequalities in access to GP surgery care that may affect people who are deaf, Deaf or hard of hearing.

The Charter should be displayed in GP practices and on their websites. By signing up to the Charter, practices would help demonstrate that they are committed to meeting the requirements of the Accessible Information Standard.

You can read the report [here](#).

### Local awareness of Community Pharmacies

Our current research project will focus on community pharmacies. We want to find out how much local people know about the services they offer, as well as learn about Bucks residents' experiences with using those service. We are doing this both face to face and online. To complete the online version please click [here](#).