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Rutland County Council

Catmose, Oakham, Rutland, LE15 6HP
Telephone 01572 722577 Facsimile 01572 758307 DX28340 Oakham

Meeting: ADULTS AND HEALTH SCRUTINY PANEL

Date and Time: Thursday, 14 September 2017 at 7.00 pm

Venue: COUNCIL CHAMBER, CATMOSE, OAKHAM,
RUTLAND, LE15 6HP

Clerk to the Panel: Corporate Support 01572 720922
email: corporatesupport@rutland.gov.uk

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Helen Briggs
Chief Executive

A G E N D A

APOLOGIES FOR ABSENCE

1) RECORD OF MEETING

To confirm the record of the meeting of the Adults and Health Scrutiny Panel held on 29 June 2017 (previously circulated).

2) DECLARATIONS OF INTEREST

In accordance with the Regulations, Members are invited to declare any personal or prejudicial interests they may have and the nature of those interests in respect of items on this Agenda and/or indicate if Section 106 of the Local Government Finance Act 1992 applies to them.

3) PETITIONS, DEPUTATIONS AND QUESTIONS

To receive any petitions, deputations and questions received from Members of the Public in accordance with the provisions of Procedure Rule 217.

The total time allowed for this item shall be 30 minutes. Petitions, declarations and questions shall be dealt with in the order in which they are received.

Questions may also be submitted at short notice by giving a written copy to the Committee Administrator 15 minutes before the start of the meeting.

The total time allowed for questions at short notice is 15 minutes out of the total time of 30 minutes. Any petitions, deputations and questions that have been submitted with prior formal notice will take precedence over questions submitted at short notice. Any questions that are not considered within the time limit shall receive a written response after the meeting and be the subject of a report to the next meeting.

4) QUESTIONS WITH NOTICE FROM MEMBERS

To consider any questions with notice from Members received in accordance with the provisions of Procedure Rule No 219 and No 219A.

5) NOTICES OF MOTION FROM MEMBERS

To consider any Notices of Motion from Members submitted in accordance with the provisions of Procedure Rule No 220.

6) CONSIDERATION OF ANY MATTER REFERRED TO THE PANEL FOR A DECISIONS IN RELATION TO CALL IN OF A DECISION

To consider any matter referred to the Panel for a decision in relation to call in of a decision in accordance with Procedure Rule 206.

SCRUTINY

Scrutiny provides the appropriate mechanism and forum for members to ask any questions which relate to this Scrutiny Panel's remit and items on this Agenda.

7) QUARTER 1 PERFORMANCE MANAGEMENT REPORT 2017/2018

To receive Report No. 141/2017 from the Chief Executive
(Report circulated under separate cover)

8) QUARTER 1 FINANCIAL MANAGEMENT REPORT

To receive Report No. 147/2017 from the Director for Resources
(Report circulated under separate cover)

9) PRIMARY CARE SURVEY REPORT

To receive Report No. 176/2017 from Sarah Iveson, CEO Healthwatch Rutland.
(Pages 5 - 34)

10) MENTAL HEALTH - CARE IN RUTLAND

To receive a presentation from Mark Andrews, Deputy Director for People, Rutland County Council

11) HEALTHWATCH CONSULTATION

To receive Report No. 174/2017 from Karen Kibblewhite, Head of Commissioning to agree the consultation with stakeholders regarding potential recommissioning options for Healthwatch.

(Pages 35 - 38)

12) PROGRAMME OF MEETINGS AND TOPICS

a) SCRUTINY PROGRAMME 2017/18 & REVIEW OF FORWARD PLAN

To consider Scrutiny issues to review.

Copies of the Forward Plan will be available at the meeting.

13) ANY OTHER URGENT BUSINESS

To receive any other items of urgent business which have been previously notified to the person presiding.

14) DATE AND PREVIEW OF NEXT MEETING

Thursday, 30th November 2017 at 7 pm

Agenda items:

1. LLR Integrated Points of Access Programme

Gateway review report of the LLR IPOA Programme and to outline the anticipated next steps

Mark Dewick, Programme Manager for Leicester, Leicestershire and Rutland Integrated Health and Social Care Points of Access Project & Cheryl Davenport, Director of Health & Care Integration

2. Quarter 2 Performance Management Report

3. Quarter 2 Finance Management Report

4. People Directorate: Fees and Charges - ANNUAL REPORT

5. Sustainability and Transformation Plan: Update – To receive an update from Tim Sacks, Chief Operating Officer, East Leicestershire and Rutland Clinical Commissioning Group

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TO: ELECTED MEMBERS OF THE ADULTS AND HEALTH SCRUTINY PANEL

Mrs L Stephenson (Chairman)

Miss R Burkitt

Mr W Cross

Mr C Parsons

Mr G Conde

Mrs J Fox

Miss G Waller

OTHER MEMBERS FOR INFORMATION

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ADULTS AND HEALTH SCRUTINY PANEL

14 September 2017

Primary Care Survey Report

Report of the CEO for Healthwatch Rutland

Strategic Aim:	<i>To inform health commissioners and providers about the views of Rutland residents on the services available to them at present, and, importantly, what they would value in the future.</i>	
Exempt Information	No	
Cabinet Member(s) Responsible:	Councillor Richard Clifton, Portfolio Holder for Adult Social Care	
Contact Officer(s):	Sarah Iveson, CEO, Healthwatch Rutland	Tel: 01572 720381 Email: sarah.iveson@healthwatchrutland.co.uk
Ward Councillors	N/A	

DECISION RECOMMENDATIONS

It is recommended that the Panel:

1. Notes the contents of the report.

1. APPENDICES

Appendix A – Primary Care Survey Report

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.

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Healthwatch Rutland

Primary Care Survey 2017



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Acknowledgements

Healthwatch Rutland would like to thank all those who responded to this survey.

We also would like to acknowledge the hard work of Healthwatch volunteers who distributed the survey; the GP surgeries, pharmacies and other locations that allowed the survey to be displayed on their premises; all those organisations which distributed the survey by email or newsletter, and Leicester University for its assistance.

1. Rutland Primary Care Summary - Executive Summary

Survey Objectives

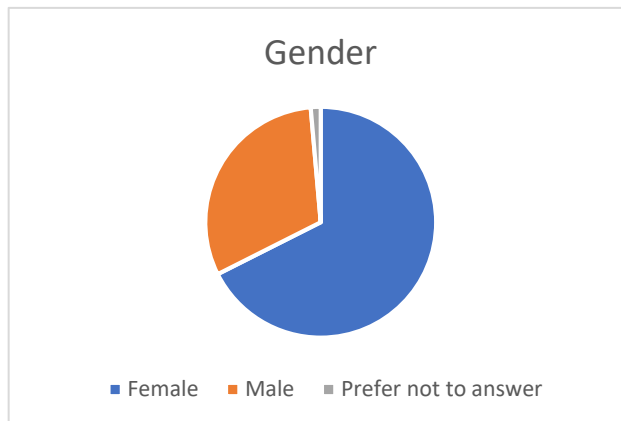
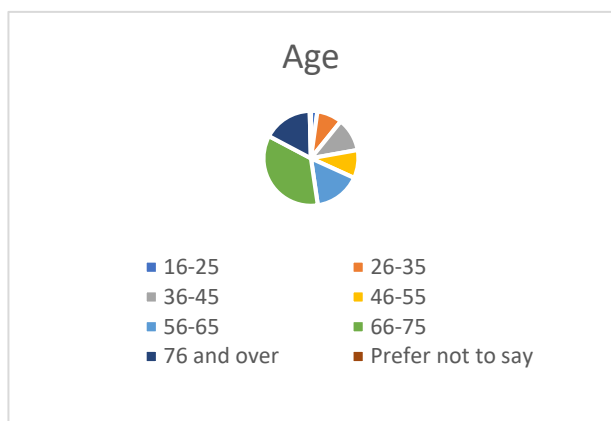
This survey was planned as a joint collaboration between Healthwatch Rutland and East Leicestershire and Rutland Clinical Commissioning Group (ELRCCG). Both organisations were keen to know what Rutland people feel about primary care services.

The survey was undertaken by Healthwatch Rutland in January 2017. Its purpose was to inform health commissioners and providers about the views of Rutland residents on the services available to them at present, and, importantly, what they would value in the future.

Who contributed to the survey?

750 people responded to the survey. This represents just over 2.0% of the adult Rutland population (assuming a population of 37,369 from the 2011 census).

The largest group of respondents was aged 66-75 and more women responded than men. Just under 10% of respondents described themselves as disabled.



Methodology

Survey design was developed by a joint editorial group supported by Healthwatch volunteers who are former academics experienced in survey techniques.

The survey was promoted via local media and social media. It was also sent out electronically to all Healthwatch Rutland members and other organisations such as the Rutland Lions and U3A forwarded the survey link to their membership. In addition, local schools and Rutland County Council advertised the survey in their newsletters. Hard copies of the survey were available at all Rutland GP practices (including satellite village practices), some pharmacies and other locations such as village shops. The survey ran from the 4th of January to the 1st of February 2017.

Demographic information of the survey respondents is detailed below:

Age:

16-25	2%
26-35	9%
36-45	11%
46-55	10%
56-65	16%
66-75	35%
76 and over	17%
Prefer not to say	0.4%

The survey was available in Easy Read format, large print and braille to ensure accessibility.

Gender:

Female	68%
Male	31%
Prefer not to say	1%

The majority of data was recorded via electronic survey forms but, in addition, hard copy surveys were input into Survey Monkey with the assistance of Leicester University.

Self-described as disabled:

Yes	10%
No	89%
Prefer not to say	1%

Quantitative data are shown in this report in tables and/or graphs. Percentages are rounded to one decimal place (except demographic data). Qualitative data, in the form of comments supplied by respondents, were analysed using thematic analysis. Conclusions have been drawn where possible.

It should be noted that not all respondents answered all of the questions in the survey. When analysing questions by practice, not all respondents named their practice, and a couple of participants answered from practices outside the scope of this survey.

Key Messages from Rutland People about Primary Care Services

Overall Experience of General Practice

- On average, GP surgeries used by Rutland residents scored well on patients' overall experience of their services, and fairly well on patients' satisfaction with appointment availability.
- Very appreciative views were expressed about people's experience of general practice especially at Uppingham (including Barrowden and Ketton), Empingham, Market Overton and Somerby and Stamford. Oakham Medical Practice scored lower on patient satisfaction with the overall experience of services. Patient views are summarised on pages 7 to 11.

- Accessing appointments is a concern for many. The survey highlighted particular concern amongst Oakham Medical Practice patients about the availability of appointments.
- There is public concern over the capacity of GP services in Oakham with its growing population and a wish to either expand existing capacity or set up a second practice to meet demand.

News ways of working in general practice

- People are happy to see healthcare professionals other than GPs. (Practice Nurses scored particularly highly, however there is a lack of clarity over the role of Health Care Assistants).
- People prefer face to face communication but, if this is not possible, then most would use the telephone to communicate with their healthcare professional.
- We were, however, struck by the significant number willing to try other methods of communication.
- Most people would find it acceptable or ideal to visit another GP surgery or community hospital to see specialists or receive tests normally done in hospital and said they were prepared to travel up to ten miles to another GP practice or community hospital.
- Many people, especially older members of the community, told us that they are concerned about transport to GP services.

Urgent Care Services

- Many people are unaware of where Urgent Care services are and when they are open.
- Those who used the urgent care facilities reported a positive experience of them.
- People feel that Urgent Care provision could be improved by:
 - increased information about the services provided,
 - longer opening hours,
 - reduced waiting times,
 - improved prescription and diagnostic facilities,
 - a service that is less confusing to navigate.

Mental Health Services

- It is worrying that just under half of those who had received mental health services felt their overall experience of the service was *poor* or *very poor*.
- People felt services could be improved by:
 - increasing staff (particularly community based local staff),
 - improving availability of services in Rutland,
 - reducing waiting times for appointments and treatment.
- People also felt that communication could be improved and that more mental health training should be provided for GPs and other healthcare professionals.

- People said that improvements could be made to create more joined up working between practitioners.
- People felt that more emphasis should be placed on prevention and early intervention for mental health issues.

Emergency Ambulances

- People commented positively on the staff's professionalism, care and compassion when dealing with the public.
- Call response times and long waits in Rutland remain a major concern.

Non-emergency Transport

- People's experience of non-emergency transport was mixed with slightly more people reporting a positive experience than a negative one.
- People felt services could be improved with more information, communication and a reduction in waiting times.

Dentistry

- A large proportion of people responding used private dental services.
- Some people said they were unable to obtain NHS dental services in Rutland.

Community Pharmacy

- Most people who responded had had very positive experiences of community pharmacy services in Rutland.
- People said that services could be improved by:
 - increased communication between GPs and pharmacies,
 - improving repeat prescription systems,
 - reducing waiting times in pharmacies,
 - increasing opening times.

Health Information

- People use a variety of ways of accessing health information and are aware of 111.
- Via the internet, Google is the most frequent port of call for initial information.
- Other internet sites, including NHS websites, are also used.

Future Health Care in Rutland

- Nearly half of those that responded commented on the need for future health care services in Rutland to include one or more of the following:
 - the continued use of Rutland Memorial Hospital,
 - improvements to local GP services, including an additional practice in Oakham,
 - additional local healthcare services to avoid the need to travel out of County.

2. Survey Analysis

2a. Questions 1-7 are about the services you get from GP surgeries

Question 1 - Please rate the services at your GP surgery

742 people responded to this question with the following results across Rutland:

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	2.6%	11.6%	22.7%	33.8%	29.2%
Appointment Availability	17.0%	19.7%	23.2%	23.3%	16.9%

The results were also analysed by practice:

Oakham Medical Practice (347 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	4.3%	21.4%	34.8%	29.2%	10.1%
Appointment Availability	32.8%	32.2%	22.9%	10.5%	1.5%

Market Overton and Somerby (79 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	1.7%	3.4%	11.9%	37.3%	45.8%
Appointment Availability	7.1%	5.4%	35.7%	32.1%	19.6%

Uppingham Medical Practice (188 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	0.0%	1.6%	11.3%	38.7%	48.4%
Appointment Availability	0.6%	6.6%	19.1%	33.9%	39.9%

Barrowden and Ketton (13 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	0.0%	7.7%	7.7%	7.7%	76.9%
Appointment Availability	0.0%	0.0%	15.4%	30.8%	53.9%

Empingham Medical Practice (67 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	0.0%	1.5%	9.0%	29.9%	59.7%
Appointment Availability	0.0%	4.6%	28.8%	40.9%	25.8%

Stamford Surgeries (18 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	0.0%	0.0%	16.7%	44.4%	38.9%
Appointment Availability	5.9%	5.9%	29.4%	47.1%	11.8%

Kendrew Barracks Medical Centre (17 respondents):

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	0.0%	0.0%	29.4%	52.9%	17.7%
Appointment Availability	0.0%	29.4%	11.8%	41.2%	17.7%

Conclusions:

This data show that on average GP surgeries used by Rutland residents scored well on patients' overall experience of their services, and fairly well on patients' satisfaction with appointment availability.

Oakham Medical Practice scored lower on patient satisfaction with the overall experience of their services.

Importantly, this survey highlighted a concern amongst Oakham Medical Practice patients about the availability of appointments.

Question 2 - Based on your recent experience, please tell us how your GP services could be improved

The results of this question were also analysed by GP practice. Thematic analysis was used. Themes were identified and the number of people commenting on the themes were counted. Example quotes can be seen in *pink* below.

Oakham Medical Practice:

279 patients registered at Oakham Medical Practice responded to this question. There were 12 positive comments:

"It's already good!"

The analysis showed that people thought that the availability of appointments was a problem (84 people), with an additional 35 people commenting about the difficulty in seeing their doctor of choice. This was a particular issue for people with long term conditions or in the middle of treatment. An additional 17 people commented that the booking system for making appointments was problematic, in particular not being able to book appointments in advance for ongoing treatments:

“Trying to get an appointment is extremely difficult.”

“To be able to see the same GP throughout treatment for a particular problem.”

“I need an appointment regularly every 3 months with a nurse. However, Oakham Medical Practice can only manage to put together a rota for one month ahead. This is very frustrating.”

75 people commented negatively about the phone system and difficulties in getting through to the practice. A further 51 people commented that they felt that more staff were needed, both clinical and administrative as the surgery appeared “overwhelmed”:

“Telephone system needs attention. Holding for 40 minutes to make an appointment is poor.”

25 people specifically felt that another practice was required in Oakham:

“The population of Oakham is growing fast, but there is only one surgery for increasing numbers of patients. The doctors do a really wonderful job but there is a need for a second surgery now.”

16 people commented that they had encountered problems with prescriptions being delayed in arriving at the pharmacy. There were particular problems with repeat prescriptions noted:

“Repeat prescription turnaround time is appalling. 2 to 3 weeks according to my pharmacy and our experience.”

13 people commented that services could be improved by increasing the hours of the surgery, especially by having appointments available at weekends. 13 other people commented about a lack of space at the surgery in particular a lack of parking available for patients.

27 people commented negatively on some of the reception staff, and felt that customer service could be improved. A further 4 people commented that they felt there was a lack of privacy at reception when discussing personal information with reception staff.

Market Overton and Somerby

37 people commented on services at Market Overton and Somerby practices (satellites of Oakham Medical Practice). There were 13 positive comments:

“Our experiences are first class. It would be hard to find area of improvement.”

The only theme that emerged for improvement at Market Overton and Somerby was that 9 people felt that appointment availability could be improved.

“Shorter wait for available appointments.”

“Would like to see more appointments.”

Uppingham Medical Practice:

120 people registered at Uppingham Medical Practice answered this question. There were 31 positive comments:

“The Uppingham Surgery provides an excellent service, good support staff, nurses, excellent doctors, helpful triage and appointment system available online and by phone.”

20 people commented that the appointment system could be improved:

“Simpler appointment making.”

“Could make it easier to make advance appointments. I work out of the area.”

“Make it easier to book routine and non-urgent appointments ahead of time rather than having to call in the morning.”

13 people commented that they thought the wait for phones to be answered was too long:

“Easier contact - phone lines exceptionally busy.”

Barrowden

16 people commented on the services at Barrowden surgery (a satellite of Uppingham Practice). 10 of these commented that an improvement would be to increase the surgery hours and number of appointments.

“Increase in surgery times in Barrowden.”

Empingham Medical Practice

46 people registered at Empingham Medical Practice responded to this question. There were 16 positive comments.

“Our GP surgery is excellent due to its ease of appointments, friendly accommodating reception staff and expertise of GPs who are also quick to refer when necessary.”

4 people commented that improvements could be made to the availability of appointments.

“Appointments could be quicker than they are, but we always get an emergency appointment if we need it.”

The remaining comments revealed no themes.

Other Practices

Patients registered at practices in Stamford, and at Kendrew Barracks, also supplied responses to this question. However, sample sizes (13 for Stamford Practices and 7 for Kendrew Barracks) were too small to provide themes.

Conclusion:

There were particular concerns about access at Oakham Medical Practice with people describing concerns about telephone access, lengths of wait for an appointment and the feeling that capacity should be increased either at Cold Overton Road or by establishing a second practice in another part of the town. Several suggestions were received for the possible location of an additional practice.

There were appointment concerns elsewhere but not on the same scale. There was a desire for a different system for booking routine appointments.

Question 3 - Are you willing to see one of the following health practitioners rather than a GP if it is appropriate for your needs? (Tick ALL that apply)

743 people responded to this question.

Answer Choices	Responses
Only GP	21.4%
Practice Nurse	92.7%
Healthcare Assistant	48.9%
GP Registrar (GP in training)	67.2%
Pharmacist	63.5%

Conclusion:

Most people are willing to see a health practitioner other than a GP. In particular, people responded that they were willing to see a nurse practitioner when it was appropriate for their needs (92.7%). The lowest response rate was for people's willingness to see a Healthcare Assistant. Anecdotal information given to Healthwatch Rutland is that the public do not understand this professional title and therefore are less confident about seeing a Healthcare Assistant. Either the public need to be better educated, or consideration should be given to the titles given to health practitioners to inspire public confidence.

Question 4 - Please tell us how likely you are to use one of these alternative ways of communicating with your GP or Healthcare professional

739 people answered this question.

	Definitely Not	Very Unlikely	Unlikely	Likely	Very Likely
Telephone Conversation	3.3%	5.5%	5.8%	45.9%	39.6%
Email	18.2%	14.0%	17.4%	32.3%	18.0%
Video Consultation	25.1%	19.0%	21.6%	21.6%	12.8%
SMS (Text message)	30.4%	14.2%	21.9%	23.7%	9.7%
Typetalk *	54.6%	20.7%	17.6%	3.6%	3.5%

* Typetalk is a text-to-voice or voice-to-text relay service for those who cannot talk or hear on the phone

The most popular method of communicating with GPs and healthcare professionals was by telephone. People were divided on the use of email to communicate. People were less likely to use video consultation or SMS and were most unlikely to use Typetalk.

101 people added comments to Question 4 which allowed for a more in-depth understanding of these results using a thematic analysis.

A large proportion of people noted that they felt that face-to-face communication was better and were willing to walk into the GP surgery to speak to someone rather than other methods of communication. There was a lack of confidence of practitioners being able to diagnose over the telephone.

“A face to face appointment is better to show and explain symptoms and receive better diagnosis”

One person highlighted the difficulty people with hearing issues may have with telephone conversations rather than face to face. Another commented that as their hearing was failing, they could foresee a time when Typetalk would be useful rather than the telephone.

Most people were not aware that methods of communication other than the telephone were available. If they are, or become available, many people would be prepared to try them. However, some people commented that due regard needs to be given to limitations on using some of the technology.

- Some people said that they were not confident using technology.
- Some people noted that they didn't have the necessary hardware available (webcams etc).
- Some people noted the lack of mobile coverage in parts of rural Rutland (for text messages).

Conclusion:

Many people are concerned that other methods of communicating with their GP or Health Professional would replace the ability to have a face to face appointment. Of the suggestions of alternatives covered by this survey, most people preferred to use the telephone to communicate. However, a significant number of people were willing to try other methods of communication, if they became available as long as the concerns noted above were addressed.

Question 5 - Thinking about routine appointments, how acceptable would it be to visit another GP surgery or community hospital (e.g. Rutland Memorial) for any of the following:

737 people responded to this question.

	Unacceptable	Only as a last resort	No opinion	Acceptable	Ideal
To see a doctor from another practice who is a specialist in your condition	3.1%	7.5%	1.2%	56.3%	31.9%
To attend a specialist clinic	1.1%	3.2%	1.2%	56.0%	38.6%
For tests or treatment which would normally be done in hospital	1.4%	3.9%	1.9%	52.1%	40.7%

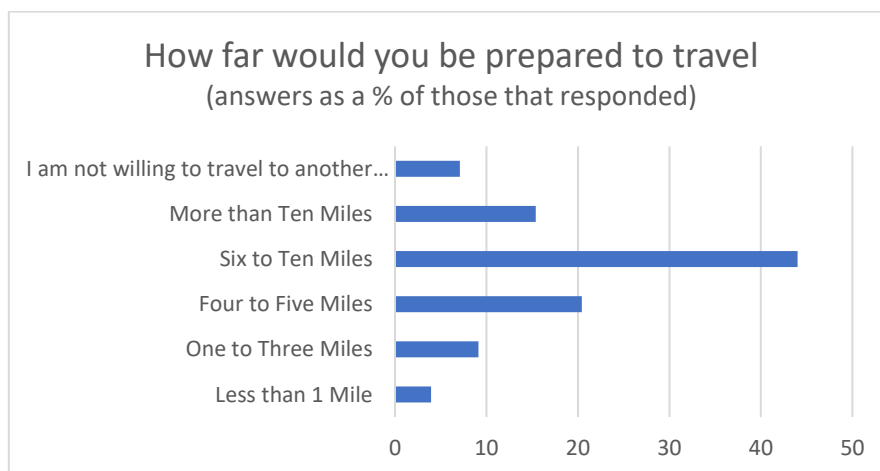
Conclusion:

Most people found it acceptable or ideal to visit another GP surgery or community hospital to see specialists, attend a specialist clinic, or for tests or treatment that would normally be done in hospital.

Question 6 - How far would you be prepared to travel to another GP practice or community hospital for the services in Q5 above?

Conclusion:

Most people responded that they were prepared to travel up to ten miles to another GP practice or community hospital to access the services listed in question 5.



Question 7 - Do you have any concerns about getting to GP surgeries in your area (for example the number of surgeries available, where they are, availability of transport to get to surgeries or anything else?)

720 people responded to this question. 537 respondents had no concerns (74.6%), 183 respondents had concerns (25.4%). The results were analysed by practice:

GP Practice	Total replies to question 7	Number of respondents with concerns	% of respondents who have concerns
Oakham Practice	338	103	30%
Uppingham Surgery	183	33	18%
Empingham	66	14	21%
M Overton/Somerby	53	11	21%
Stamford Practices	52	9	17%
Barrowden	11	1	9%

People also commented on this question to allow for a better understanding of the issues of getting to GP surgeries in their area. Data was thematically analysed by GP practice.

Oakham Medical Practice

128 people registered at Oakham Medical Practice added additional comments.

47 people commented on problems with transport in getting to their GP. This included comments on limited parking and problems accessing public transport if they don't drive. Some commented that they used the voluntary service available through Voluntary Action Rutland:

“Not enough parking, especially disabled parking which is often used by people without a blue badge.”

“Car not always available and rubbish bus service. I live in a village.”

30 people commented that as capacity at Oakham Medical Practice was felt to be insufficient for local needs, additional GP services were needed in the town:

“Many new housing estates built and in planning stage. 1 GP surgery is not enough as is evident by the lack of available appointments when needed.”

“Oakham surgery cannot cope with the number of patients currently and more houses are being built so the area needs more doctors, bigger premises or another surgery in town.”

8 people mentioned concerns over transport to the surgery as they got older and driving was no longer an option:

“While I can drive it is not a problem, but would be if unable to drive.”

Uppingham Medical Practice

48 people registered at Uppingham Medical Practice added additional comments.

The main theme identified was concerns over transport. 36 people commented on transport issues; 18 people were concerned for themselves and others if they couldn't drive; 12 people commented on a lack of public transport options; 2 people commented on transport generally and 4 people commented that the Uppingham Hopper had been useful and was missed now that it was not available:

“At present, I can drive and have a car. I am 74 and concerned that if/when I cannot drive it will be difficult.”

“Poor public transport if I was not able to drive for some reason.”

“No concerns for myself personally; I have my own transport. I am concerned on behalf of elderly family and friends, however, who cannot walk to the surgery in its new position and who were reliant on the Hopper Bus which has now ceased to operate.”

Empingham Surgery

23 people registered at Empingham Medical Practice added additional comments.

11 people commented on transport issues. 6 of these specified that they were concerned about transport when age made it more difficult to drive and 5 people commented on limited access to public transport:

“Not at present, but possibly as I get older and can't drive the 6 miles to the surgery.”

“Getting there, no buses after 6pm, taxis expensive, voluntary vehicles have to be booked in advance.”

Other Surgeries

Patients registered at practices in Stamford, Kendrew Barracks and Barrowden also supplied responses to this question. However, sample sizes (16 for Market Overton and Somerby, 14 for Stamford Practices, 2 for Kendrew Barracks and 3 for Barrowden) were too small to provide themes.

2b. Questions 8-13 are about Urgent Care (these are services to support you if you need healthcare urgently i.e. it cannot wait until a GP appointment the next day, but the situation is not life threatening i.e. not bad enough to require Accident and Emergency with or without an ambulance.)

Question 8 - Are you aware of the following services you can use when you have an urgent healthcare need (tick ALL that you know about)

728 people responded to this question. In ascending order the people were aware of the following services:

- 94.6% were aware of the NHS 111 telephone number
- 83.4% were aware of Pharmacy support
- 82.7% were aware of GP Practice during opening hours
- 65.3% were aware of out of hours GP services
- 55.4% were aware of Urgent Care Centres

Conclusion:

As only just over half of respondents were aware of Urgent Care Centres, this suggests that work is needed to increase public awareness in Rutland of this type of healthcare, and when and where it should be accessed.

Question 9 - Do you know where your nearest Urgent Care Centre is? (i.e. for urgent but not life-threatening care)

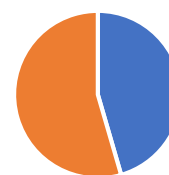
743 people answered this question.

54.5% **did** know where their nearest Urgent Care Centre was.

Conclusion:

This again suggests that too many people are unaware of Urgent Care Centres (45.5%) and where they are located.

Aware of nearest Urgent Care Centre?

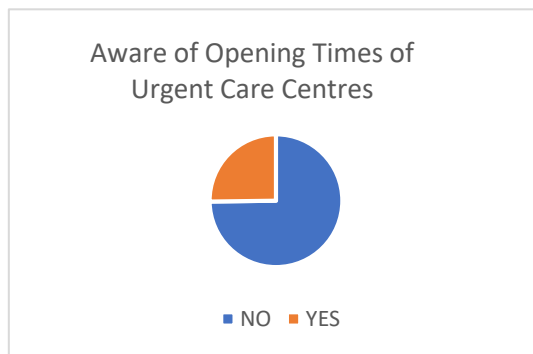


■ Do Not Know ■ DO Know

Question 10 - Do you know the opening times and services of this Urgent Care Centre?

735 people answered this question.

25.2% were aware of the opening times of their Urgent Care Centre



Conclusion:

This data suggests that even if people are aware of the location of Urgent Care Centres, they are not aware of the opening times. It appears that more information is required by the public for them to be confident in understanding the availability of Urgent Care Centre support.

Question 11 - Have you used the services available at this Urgent Care Centre? If you have please tell us how your overall experience was:

245 people responded to this question. The overall experience of Urgent Care Centres used by Rutland residents was:

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	2.7%	5.7%	18.8%	40.8%	31.8%

Conclusion:

Most people were happy with the Urgent Care Centre they accessed.

Question 12 - Based on your experience, please tell us how Urgent Care Services could be improved.

187 people responded to this question.

Analysis showed that 26 people reported a positive experience.

“On my visit services were excellent” (Loughborough).

“Effective, kind and very helpful - no need to improve in my experience” (Rutland Memorial Hospital).

The remaining 161 people responded with a negative experience or opinion on how services could be improved.

Thematic analysis of the responses showed that the most frequent comment regarding how services could be improved was increasing the information available about where Urgent Care Centres are, what services they do and don't provide and their opening times (38 responses).

“Raising awareness of services.”

“Am not sure what services it covers now. When I called recently I was sent to the surgery. I thought it was for minor illness and injuries, but that seems to have changed.”

“Publish and keep up to date opening times.”

Many people also commented that waiting times (16 responses), and some commented that communication to patients during their wait (4 responses) could be improved.

“Long waits could be reduced.”

“Better communication when waiting.”

A recurrent theme was that people believed that Urgent Care Centres should be open for longer (21 responses) and should have more staff on duty to reduce waiting times (15 responses).

“Open for longer hours.”

“More staff so a reduced waiting time.”

Many people (23 responses) believed services could be improved by increased prescribing options and particularly by improved diagnostic availability. A number of people wrote about being unable to access X-Ray services at Rutland Memorial Hospital, even when it was being advertised as available. Some people thought that better equipment would reduce the requirement for being referred to A&E.

“The injury involved (broken glass) required an x-ray, could basic urgent care X-ray facilities be available at Oakham?”

A number of people spoke of confusion over accessing their Urgent Care centre in Oakham. In particular some people did not understand why an appointment had to be made through the local GP or through 111. People queried why a 'walk in centre' is not provided.

“Had to register at Oakham medical practice, as registered at another practice. Then go back to the hospital. Seemed unnecessarily silly.”

All 187 anonymised responses are available on request from Healthwatch Rutland.

Question 13 - Do you feel you have enough information to help you decide where to go if you require urgent health care?

728 people answered this question.

33.7% answered that they **did** have enough information
 39.4% answered that they **didn't** have enough information
 26.9% answered that they **were not sure** if they had enough information

Conclusion:
 As 66.3% either did not have enough information to help them to decided where to go to access urgent health care, or were not sure, it appears that more information is needed by the public to be able to make informed choices about where to access appropriate health care.

2c. Questions 14-16 are about Mental Health Services (In most cases, these are services you would be referred to by your GP. There are some services to which you can self-refer such as services for drug problems or alcohol problems, as well as some psychological therapies.)

Question 14 - Have you used mental health services in the last 12 months? If not please go to Q17. If you have please tell us how your overall experience was

72 people responded to this question. The overall experience of mental health services used by Rutland residents in the last 12 months was:

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	19.4%	25.0%	28.8%	22.2%	12.5%

Conclusion:
 Just under half of respondents (44.4%) felt their overall experience of the service was poor or very poor. This data suggests that improvements are needed in mental health services.

Question 15 - Which services have you used?

67 people responded to this question. Of those, 48 listed specific services that they had used and 3 confirmed they had self-referred.

Of the remaining responses, people either mentioned a nonspecific service (8 responses) or a negative experience or opinion on how services could be improved (6 responses). 1 was unreadable and 1 marked not applicable.

The specific services mentioned were as follows:

- GP (6 responses)
- Let's Talk Wellbeing/ Cognitive Behavioural Therapy/Counselling (17 responses)
- Psychiatrist/Psychologist (5 responses)

Community Mental Health/Psychiatric Nurse (4 responses)
PIER Team (Psychosis Intervention & Early Recovery) (1 response)
Memory Clinic (3 responses)
CAMHS (6 responses)

Residential/inpatient Care (including Bradgate Unit & Agnes Unit) (4 responses)
Nonspecific Adult Services (2 responses)

3 people commented on the lack of interest and support from their GP and others commented on the lack of help and support generally.

“Not personally but a member of the family received no support either in hospital or the community services thereby aggravating the situation.”

“My family experience with mental health care has been non existing. The word service should not be used.”

“Due to the lack of local mental health services available - NONE! The only options given are in the middle of Leicester which when you work are impossible to make, get cancelled last minute - when you are sitting there! There should be local provision especially where there is no good local public transport.”

2 people commented on the very long waiting times when accessing CAMHS.

Question 16 - Based on your experience, please tell us how mental health services can be improved.

82 people responded to this question. Of these, 13 either had no experience or gave no opinion as to how services can be improved. Of the remaining 69 respondents, analysis showed that only 2 people reported a positive experience but also commented on having to travel long distances to access services:

“Generally, I think services are brilliant but it is very difficult for me to get to the nearest ADHD clinic it takes two hours and two buses since I don’t drive.”

“Seemed quite satisfactory but involved some travel which could be an added problem for those without access to transport.”

The remaining 67 people responded with a negative experience or opinion on how services could be improved.

Thematic analysis of the responses showed that the most frequent comment regarding how services could be improved was the need for more staff, particularly in the local community, and better availability of services in Rutland (22 responses). Many people also commented that waiting times for accessing services were too long (13 responses) and that more training was needed for both GPs and other practitioners (7 responses).

“I work with clients in mental health and know there are not enough services.”

“I have two relatives with mental health problems. My son in Peterborough has bipolar disorder and is stable on medication but has NO community support (apart from me). My wife has now had two very serious life-threatening (i.e. suicidal) depressions, the last about a year ago. She only got better because (a) I am a doctor and could chase care and (b) we could afford to be seen privately by an expert in Cambridge.”

Some commented that communication with patients could be improved and that there should be a more joined up approach between practitioners working on the same case, with better integration and sharing of information.

A number of people spoke of a lack of understanding from counsellors and other practitioners, particularly GPs (7 responses) and the need to discard the “tick box mentality”.

Some people specifically spoke about having a dedicated GP or other professional or “listening service” at the surgery which can be accessed immediately if appropriate.

People thought that the focus should be on prevention and early intervention, rather than having to wait to receive appropriate help at the point patients reach crisis or need to be sectioned. One person spoke of the need for *“more humanity in the care of the mentally ill”*.

Conclusion:

A theme of considerable concern on the part of those experiencing the service runs through replies to questions about mental health services. These concerns need to be addressed.

2d. Questions 17 and 18 are about Emergency Ambulance Services (these are the services in response to a 999 call for help.)

Question 17 - Have you needed to call an emergency ambulance for yourself, a family member or someone else in the last 12 months? If you have, please tell us how your overall experience was:

149 people answered this question.

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	11.4%	15.4%	12.8%	20.8%	39.6%

Conclusion:

Most people (60.4%) rated their overall experience of emergency ambulance service as good or very good.

Question 18 - Based on your experiences, please tell us how emergency ambulance services can be improved?

128 people answered this question to allow for a deeper understanding of their experiences of emergency ambulances.

19 people commented positively on the service generally,

“Excellent Service”

A further 10 people commented positively on the ambulance personnel including first responders,

“when the ambulance arrives, the people were fantastic.”

“First responders were excellent and quick, as in a small village ambulance services seems slow.”

Overwhelmingly the comments showed that people were dissatisfied with the response times in Rutland (50 people). An additional 19 people commented that more ambulances and staff were required and 6 people commented that more locally-based ambulances were required to speed up response times. 9 people commented that delayed handovers at A&E meant that ambulances were held up at hospital and unable to get back on the road. In total 84 people commented on slow response times.

“My dear Granny who is 99 has fallen twice this year. The first time which was in August, the ambulance took 2.5 hours to get to her and the second time which was in November, it was over 8.5 hours. The first time that she fell she broke her arm and the second time she broke her hip. As I’m sure you’ll agree, neither of these are acceptable whatsoever.”

4 people also commented that it would be beneficial for patients to have an estimate of when an ambulance might attend, and for this information to be updated if it changed.

Conclusion:

People have a lot of praise for the professionalism, care and compassion shown by ambulance staff. However, response times in rural Rutland remain a major concern.

2e. Questions 19-20 are about Non-Emergency Transport Services (this is transport for patients to and from routine healthcare appointments arranged via the NHS, e.g. ARRIVA)

Question 19 - Have you used non-emergency transport services in the last 12 months? If you have, please tell us how your overall experience was:

24 people answered this question.

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	20.8%	16.7%	12.5%	33.3%	16.7%

Conclusion:

People’s experience on non-emergency transport was mixed with slightly more people reporting a good/very good experience (50%) rather than a poor/very poor one (37.5%). 12.5% found the service satisfactory.

Question 20 - Based on your experience, please tell us how non-emergency transport services could be improved.

31 people answered this question allowing them to comment more fully.

3 people commented positively,

“OK as is.”

11 people commented that wait times were too long or that journey times were too long or that more drivers were needed. 2 people commented that communication was poor.

7 people commented that they did not know about this service,

“More transparency is required as to the availability of this service. What does one do when discharged from Kettering A&E on a Sunday morning with no transport in my pyjamas? I had to get a taxi which cost £97”.

In addition, 4 people commented on this in terms of voluntary services such as those available through Voluntary Action Rutland and other voluntary organisations, showing that there is confusion about the NHS non-emergency transport service.

Conclusion:

It appears that there is confusion about the NHS non-emergency transport service and there would be benefit in information being more readily available to the public. In addition, waiting times need to be addressed and improved communication would be welcomed.

2f. Question 21 - Dentistry. Do you have an NHS dentist in Rutland? If not, please state where you get dental services below

392 people answered no to this question out of the 750 that responded to the survey. They accessed private dental services across Rutland and the surrounding area (e.g. Leicester, Stamford etc although a few were still registered at distant locations - London, Staines and Southampton).

Most people just responded with where they received dental care. However, some people added detail which showed that they felt that there was not enough NHS provision in Rutland and they were unable to access services:

“Private- Stamford couldn't find NHS service in Rutland.”

“Not registered at any as no Nhs places available.”

“Not in Rutland I have to travel back to my NHS Dentist in Nottinghamshire.”

“I am on waiting lists at 3 practices and have been so for over 6 months. I haven't had dental care in over 10 years as I cannot get onto an NHS list.”

3 people specifically commented that they could not afford private dental treatment and were unable to access NHS services:

“Haven't been able to afford to attend the dentist for approximately 5 years.”

“I can't afford to go to the dentist so I haven't been for years. I live on benefits and the benefit I receive does not cover dental treatment or prescriptions.”

“I can't afford to go to the dentist. My children are registered with nhs dentist.”

Conclusion:

52.2% of those surveyed did not have an NHS dentist. Some people commented that there was not enough NHS dental provision in Rutland and this was of particular concern for those on a limited budget who did not access dental services at all because they found it too expensive. Provision of NHS dental services in Rutland requires further investigation.

2g. Question 22 - Pharmacy - please rate your experience of your local pharmacy service (chemists)

705 people answered this question.

	Very Poor	Poor	Satisfactory	Good	Very Good
Overall Experience	1.6%	4.8%	19.7%	34.3%	39.6%

Conclusion:

This showed that the vast majority of people (73.9%) had a good/very good experience of pharmacy services in Rutland.

260 people chose to add additional comments.

56 people commented positively on their experience,

“Our local pharmacies and pharmacists are excellent.”

In particular, of the 56, 13 people commented positively about the late-night pharmacy in Oakham,

“Oakham late night pharmacy in my opinion is top class.”

Analysis of the remaining comments showed four major themes. Firstly, 33 people commented on problems with communication between their GP and pharmacy which caused them difficulties,

“More communication from surgery - I have an email telling me I can collect drugs from Boots Pharm but the prescription wasn't sent! More long phone calls to practice.”

“Improved liaison with surgery to avoid delayed or lost prescriptions.”

Secondly, 25 people commented on long waiting times at pharmacies.

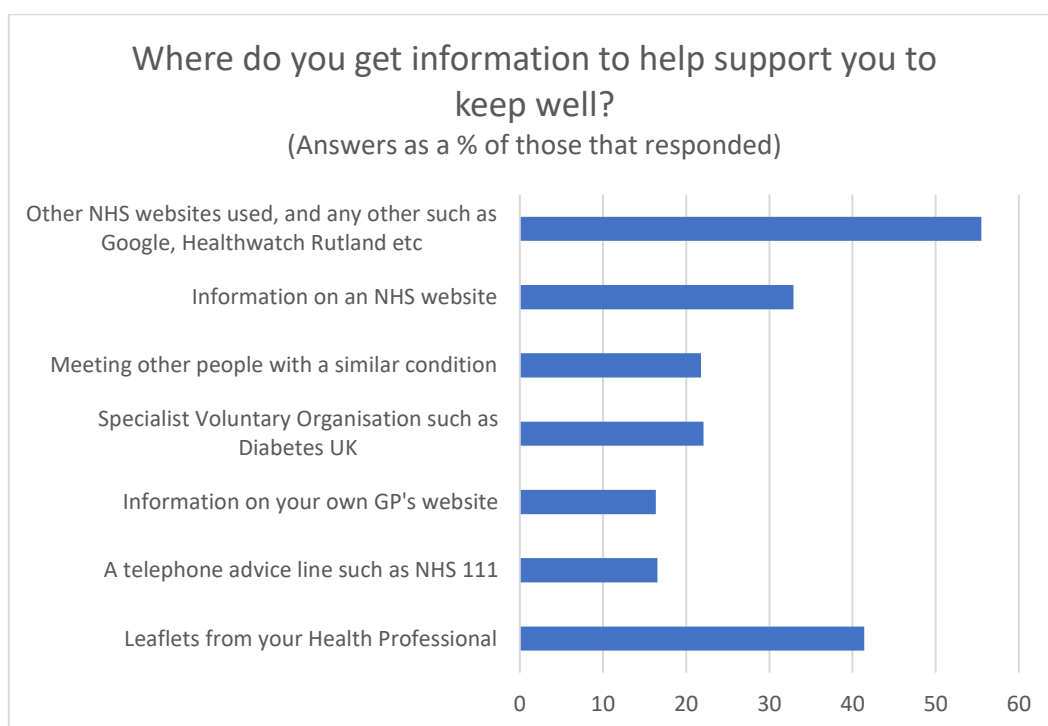
Thirdly, 24 people commented on general problems with repeat prescriptions,

“collecting repeat medication is a nightmare.”

Finally, 18 people commented that services could be improved by increasing the opening times of local pharmacies especially at weekends and public holidays.

2h. Question 23 - Information - Where do you get information to help support you to keep well? (Tick all that apply)

611 people responded to this question.



339 people provided additional comments to the final option (Other NHS websites used, and any other such as Google, Healthwatch Rutland etc). These comments showed that the largest number of people used Google (110 people). 56 people used NHS websites such as NHS Choices or NHS Direct. 11 people used friends and family for advice, especially if there was a medical professional in the family. 10 people used Healthwatch Rutland for information and 8 people used TV, newspapers and magazines to find information. Other sources of information mentioned included: Patient.co.uk, Arthritis research, CF Trust, Parkinson's UK, Lupus UK, Medscape, BBC Health, Local Council Office, Gov.uk, Boots website, Youtube, Web MD, Facebook support groups, University Hospitals Leicester and the King's Fund.

2i. Question 24 - Other health services in the community - is there anything else you would like to tell us about your experiences of healthcare including improvements you would like to see in the future?

298 people responded to this question. Of these, 20 either had no experience or gave no opinion as to how services can be improved. Of the remaining 278 respondents, only 24 reported a positive experience. Of these, the following services were specifically praised:

- Rutland Memorial Hospital ("RMH") (9 responses)
- Local GPs & Nurses (4 responses)
- Uppingham Surgery (3 responses)
- Local hearing & eye tests (2 responses)
- Midwives (1 response)
- NHS Dentist (1 response)

The remaining 254 people responded with a negative experience or opinion on how services could be improved.

Thematic analysis of the responses showed that the most frequent comment regarding future services related to RMH and its continued use (35 responses). Some people commented specifically about its potential closure and the negative effect this would have on local residents.

"Oakham hospital is a godsend"

"We need to keep our Rutland Memorial Hospital especially for patients who have been discharged from main hospitals and are not fit enough to go home in the short term. Do not underestimate the wellbeing of those patients who can have visits from local friends and relatives"

"I fear for the loss of beds at Rutland Memorial. It is a life saver for older people and prevents bed blocking in large hospitals"

"... Oakham is a fantastic resource for our rural community with limited transport routes. It is indispensable."

Many people spoke of a general need for more services and requirement for health care professionals in the local community (28 responses), with specific mention being made of difficulties accessing the following:

- Ear syringing (5 responses)
- Dentists (4 responses)
- Podiatry (4 responses)
- Physiotherapy (2 responses)
- Chiropody (2 responses)
- District Nurses (2 responses)
- End of life care (2 responses)

A number of people spoke of a lack of help and support for those suffering mental health problems and the need for more funding and early intervention (7 responses).

Many people also spoke of difficulties with travel and the need for better transport links (6 responses).

“... I am concerned that local facilities may be removed resulting in long and sometimes difficult journeys for those wishing to access them”

Some people also commented on delays in accessing services (4 responses) and that communication could be improved resulting in a more joined up approach between practitioners, with better integration and sharing of information (10 responses).

Many people commented on the need for an additional GP practice locally (20 responses) with others mentioning improvements being needed to local GP services generally, including longer opening hours, access to GPs in the evenings and at weekends, being able to see your own GP and better availability of appointments (18 responses). Some people specifically referred to improvements being needed at Oakham Medical Practice (6 responses).

“Another surgery is urgently needed now Oakham is overwhelmed with such an increase in the population”

A number of people also expressed concern about the lack of local care for the elderly, particularly given the increase in the elderly population (7 responses)

“I think it is very important, with an increase in an ageing population that services are kept as local as possible. The more local the services, the easier it is to maintain close relationships in the community... especially important to the elderly..”

“Older I get, the more scary lack of information, ease of access, distance to travel and lack of support gets!”

Conclusion:

Nearly half of those that responded commented on the need for future health care services in Rutland to include one or more of the following:

1. the continued use of Rutland Memorial Hospital;
2. improvements to local GP services, including an additional practice in Oakham;
3. additional local healthcare services to avoid the need to travel out of County.

3. Conclusion

The people of Rutland have responded to this survey, and in doing so have shown how much they value good local healthcare services. It is hoped that this survey will be used by commissioners and providers when making decisions about healthcare services for Rutland people. Commissioners and providers have all stated that the patient voice is central to all that they do; the information in this survey allows them to use patient views in their discussion on improving services and planning for the future.

Healthwatch Rutland is willing to share any of the anonymised data, (including respondents' comments) with commissioners and providers.

Produced by Healthwatch Rutland
c/o Rutland Community Hub
Lands' End Way
Oakham
LE15 6RB
Tel: 01572 720381
Web: www.healthwatchrutland.co.uk
Email: info@healthwatchrutland.co.uk

Healthwatch Rutland is operated by Healthwatch Rutland Community Interest Company. It is a not-for-profit organisation established to serve the community of Rutland (no. 08943486)

ADULTS AND HEALTH SCRUTINY PANEL

14 September 2017

FUTURE OPTIONS FOR HEALTHWATCH PROVISION

Report of the Director for People

Strategic Aim:	Meeting the health and wellbeing needs of the community	
Exempt Information	No	
Cabinet Member(s) Responsible:	Mr R Clifton, Portfolio Holder for Health and Adult Social Care	
Contact Officer(s):	Karen Kibblewhite, Head of Commissioning	01572 758127 kkibblewhite@rutland.gov.uk
	Mark Andrews, Deputy Director for People	01572 758339 mandrews@rutland.gov.uk

DECISION RECOMMENDATIONS

That the Scrutiny Panel:	<p>1. Offers views on the future provision of Healthwatch in Rutland;</p> <p>2. Recommends points of consideration in Cabinet’s decision on this matter.</p>	
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1 PURPOSE OF THE REPORT

1.1 To enable discussion of the future provision of Healthwatch services in Rutland and inform Cabinet’s decision on the model of Healthwatch to be commissioned from 1st April 2018.

2 BACKGROUND

2.1 Healthwatch services were established in April 2013 under the Health and Social Care Act 2012, as an independent consumer champion for health and social care with the aims of providing communities with a voice to influence and challenge local health and social care provision, and of signposting people to information which enables them to make informed choices about health and social care services. The functions which Healthwatch are required to provide are set out within the legislation and statutory guidance.

2.2 Each local authority area is required to have a Healthwatch service, in addition to Healthwatch England which operates at national level. Local Healthwatch are required to be independent organisations able to employ their own staff and involve volunteers.

- 2.3 The service is currently provided for Rutland by Healthwatch Rutland, a Community Interest Company, with an annual grant of c£66,000.
- 2.4 There have been significant changes to health and social care over the past few years and these will continue with the further implementation of health and social care integration and the Sustainability and Transformation Plans (STP). The STP for Rutland sits within a footprint of Leicester, Leicestershire and Rutland.

3 OPTIONS FOR FUTURE PROVISION

- 3.1 The current grant agreement runs to 31st March 2018. Provision will need to be made for a service to start from 1st April 2018 in order to meet the Council's statutory requirements.
- 3.2 The following sets out some of the range of options for future provision and is designed to inform the discussion. It is recognised that there may be other options which the Panel may wish to suggest.

3.3 Grant or Contract

- 3.3.1 The current provision has been funded as a grant on a rolling year on year basis.
- 3.3.2 Whilst a grant enables funding to be given direct to a provider of choice, across our other providers we are reducing those funded by grants and moving to contracts via a procurement process to ensure that funding is awarded in a fair and transparent manner, that any able and willing provider has the opportunity to bid, and that providers are held to consistent levels of rigour and accountability.

3.4 Models of Provision

- 3.4.1 **Rutland-specific Healthwatch** – Retain a single Healthwatch for Rutland. This would enable a focus to be retained solely on Rutland's needs and specific community issues. It would allow for Rutland to engage with both the Leicester, Leicestershire and Rutland STP, and with the Peterborough and Cambridgeshire STP given the considerable level of service users accessing health services within that area.
- 3.4.2 **Leicester, Leicestershire and Rutland (LLR) Healthwatch** – Jointly procure and hold a single contract across LLR. Healthwatch commissioners from Leicester and Leicestershire have approached Rutland with a view to commissioning Healthwatch across LLR in future. This approach would fit with the STP footprint, and could potentially reduce duplication where health services operate across LLR and enable economies of scale.
- 3.4.3 **Joint Working Arrangement** – The provision of three separate contracts in each LLR authority, but with a requirement to share specific areas of work between all three Healthwatch providers. This would enable a focus to be retained for each local authority area, but reduce duplication where health services operate across LLR.
- 3.4.4 **Joint Healthwatch Provision with another Local Authority** – Procurement of a Rutland specific Healthwatch to result in the provision in Rutland jointly with a neighbouring local authority, either as a sub-contract of an existing Healthwatch or as an extension to an existing Healthwatch contract. This would support

increased resilience to the existing provision and potentially reduce duplication where health services are shared, for example Peterborough and Lincolnshire.

4 CONSULTATION

4.1 Service User Engagement

4.1.1 In order to consider views from both existing and potential service users of Healthwatch, a six-week survey was undertaken across LLR. This was available online, as hard copy within local GP surgeries and libraries, and a drop-in session was held at the Council offices on 6th September.

4.1.2 The survey posed 4 proposals and asked respondents to agree or disagree and for comments on each:

- a) A joint LLR Healthwatch provision;
- b) To retain a portion of the funding budgeted for Healthwatch to commission specific investigations and consultations;
- c) To require a focus on a volunteer programme to add skills and capacity;
- d) A focus on engaging views from seldom heard groups and the use of innovative methods, including social media and links with community representatives.

4.1.3 The survey closed on 8th September and initial findings will be tabled at the Scrutiny meeting.

4.2 Soft Market Testing

4.2.1 To explore the market of potential providers, a soft market test was undertaken jointly with Leicester and Leicestershire. Four responses were received and all indicated that they would be willing and able to provide Healthwatch services in Rutland either as a stand-alone provider or as part of a consortium.

4.3 Providers were also asked their views on a number of areas including: opportunities and challenges to delivering an LLR Healthwatch provision; ensuring independence; service users' expectations of Healthwatch; and potential outcomes for the contract. Responses to the Soft Market Test will be considered when developing the model.

5 NEXT STEPS

5.1 Comments from Scrutiny, along with the responses to the engagement survey (once fully analysed and collated) and the responses to the Soft Market Test, will inform the development of the recommended models for Healthwatch provision from April 2018. The models will be tabled at Cabinet in October for:

- i) a decision on the model of provision;
- ii) agreement for either the procurement of the model or the award of a grant.

6 CONCLUSION

6.1 Scrutiny are asked for their views on the future provision of Healthwatch to inform the model and commissioning approach.

7 BACKGROUND PAPERS

7.1 There are no additional background papers to the report.

8 APPENDICES

8.1 No appendices.

A Large Print or Braille Version of this Report is available upon request – Contact 01572 722577.