

Isles of Scilly Health and Care Community Survey 2015 Report

Healthwatch Isles of Scilly October 2015 I think we are very fortunate in our health care here on the islands. 9 *

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Introduction

Healthwatch Isles of Scilly receives a small but steady number of direct comments, observations and queries about health and care services and we run short issue-based straw polls from time to time.

Now and then, we like to ask everybody about everything.

A universal survey is manageable for our population size and the response provides context to the day to day comments we receive.

We are pleased to report that the rating given for most services was good or better. There were some areas where this was not the case, and we make some conclusions and recommendations below.

Additional information was given via comments about services. We have summarised these for the report, and passed on all comments to the relevant service provider. We include their response, if given, in this report.

About the survey

We sent a copy of our survey to every household* on the islands in April 2015.

The survey was laid out in service sections and we asked people to rate a service which they or a member of their household had used in the last two years, and add a comment.

We sent out 953 surveys, and 255 were returned, giving us a response rate of 26.75%.

Everyone gave ratings in the sections appropriate to them. 866 additional comments were made in the sections on services and 229 in the section on wellbeing.

We asked for demographic information from respondents: age range, male or female, and whether they lived on St Marys or an off island.

We were interested to see if any of this made a difference to people's experience of health and care services, from the ratings they gave.

There was just one area where there was a clear indicator and that was how people in different age ranges rated their own health and wellbeing - see page 33.

However, in all other sections, we concluded that our sample size wasn't big enough. We found very little difference, in the ratings given to services, across demographic categories. We can't say that this means there is no difference, just that we don't have enough information to make a meaningful analysis.

The level of response in each section varied; this may indicate pattern of use, or reflect the needs of the people most likely to return a survey.

Local primary care services received the highest number of ratings and comments, which we might expect on basis of use; however, Local Authority Children's Services, for instance, received very few comments and yet we know these services are well used.

Looking at the demographic information, females aged over 41 and living on St Marys contributed the highest number of returns, but again, we are not drawing a conclusion!

^{*}we compiled a mailing list which is as accurate as we could make it, and advertised the survey widely.

Conclusions and recommendations



I think we get very good health care in Scilly but there is always room for improvement and we should strive to excel. \mathfrak{D}

We are very pleased by the response to this year's household survey, and consider that the results are a valid representation of islanders' experience and opinion.

It shows (as usual) a very high regard for local health services and NHS provision generally. There is also a degree of pragmatism about the services which can be provided locally to our small population, especially from limited Local Authority resources.

The majority of services were rated as good or better, with additional comments providing more detail about what works well, and what could be improved.

There were a few clear indicators of concern:

Local eye testing (p 7)

We followed this survey with a short online straw poll about choice and waiting times. It is evident that the local service cannot adequately meet the level of need, and we recommend that arrangements for the commissioning and provision of local eye testing are reviewed.

Availability of physiotherapy (p 11)

We recommend a review of provision across disciplines and providers, and consideration of a more flexible and joined up service, including falls prevention and rehabilitation, with increased use of local staff and facilities.

Adult mental health provision (p 12)

We are pleased that the issues we hear about are now being addressed in a co-ordinated effort towards improvement. However, we hear from people that what they want is access to on-island support, and there is no dedicated mental health practitioner on Scilly.

We recommend urgent consideration of a key worker post to provide individual and group support, with the appropriate governance and supervision in place.

<u>Arrangements on discharge from Treliske Hospital</u> (p 16)

The relatively small number of ratings and comments in this survey chime with what we hear elsewhere: confusion about arrangements and how to make them, on behalf of patients and staff.

We are working with Royal Cornwall Hospitals Trust as they review previously agreed protocols for Isles of Scilly patients in order to make the information clearer and more accessible.

Access to Child and Adolescent Mental Health Services, and consistency of provision (p 19)

A small number of people commented about this and we are pleased to see the response from Cornwall Foundation Trust that they are considering how they may address the issues raised. We will be following up with them with regard to progress.

Can you give us a quote?



igcap I think our health services are outstandingly good - better now than at any time. oldsymbol 9A grateful thanks to all concerned.



Sometimes excellent, sometimes could be better.



We asked people if there was anything they wished to highlight, and if so to give us a comment which we could publish in the report. 60 people provided a quote, and we've included some throughout this report. There simply isn't room to publish them all, but we are conscious that these are the things that people wanted to say 'out loud' so have provided a transcript to all commissioning and providing bodies.

Here is a summary and a few more examples:

Many people described the quality of health provision on the islands as very good, considering our location and the small size of our population. These comments are typical of many:

'The doctors, nurses, etc. are all excellent, also help is just a phone call away. We who live here are very lucky to have such a wonderful service.'

'Services on St Marys are very good compared to the rest of the country. You don't have to wait long for appointments and the staff are excellent. Our community services are doing an excellent job - we are very lucky.'

Criticisms and concerns were varied. There was a sense that organisational factors hamper provision and prevent truly integrated care; that sometimes services are disjointed and require 'major effort by the patient to obtain correct treatment' (this was said about follow up care). Others also felt that sometimes the onus was on the patient to pursue treatment.

Some people indicated where provision might be improved: female doctor; full time X-ray facility; eye tests; physiotherapy; dementia care; respite care and elder care generally; also more Practice Nurse and Community Nurse visits to off islands.

The survey covered a year when the midwifery service was provided through rostered locum cover, and one comment in this section acknowledged the logistical challenge of ensuring continuity. Most people considered the on-island service to be vital, and one person described the experience of giving birth at St Marys Hospital as 'incredible', and that it is 'an amazing facility'. There was some concern about off island arrangements; clear guidance has been issued by the service provider.

A few people observed that travelling for treatment is more onerous: 'Mainland treatment is so difficult for ongoing treatments like chemo.'

People commented on the difficulty and expense: 'It is a huge inconvenience; costs are greater than the £5 parity payment. We don't live in Cornwall and don't have friends and family in Cornwall. I am not able to 'ask a friend' to help me out.'

Others felt that reliable transport is an issue, particularly in winter: 'We are blessed in Scilly with excellent services in the Health Centre and the Hospital, and generous travel fares for mainland medical appointments. What we need is more reliable transport to the mainland, a regular passenger ferry for winter and a Penzance/Scilly helicopter service.'

The quality of care and treatment in the NHS was generally felt to be good. When all services work well together, people felt well supported:

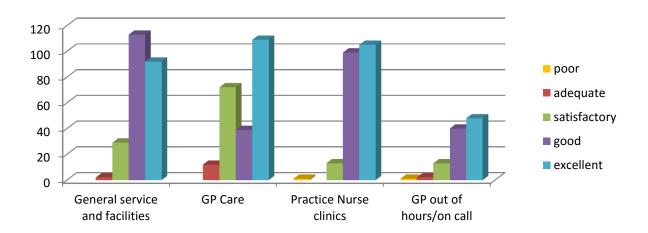
'Every day is a battle but my battle will be won. Thank you to everyone who has helped and supported me through this experience, I may still be fighting but your support and friendship helps me every day to get closer to a full recovery.'

Other comments acknowledged wider support:

'Caring neighbours and friendly fellow islanders help me to enjoy living in this beautiful place.'

Section One: Health

ISLES OF SCILLY HEALTH CENTRE



The ratings that people gave are shown above. Not everyone will have used all parts of the service; for instance 236 people gave a rating for 'general service and facilities', and 104 for 'GP out of hours/on call'.

The majority rating in every category was excellent or good.

There were 88 comments in this section, and they were largely positive, reflecting the ratings that people gave.



Where else in the country would a GP receptionist apologise for not being able to provide a doctors' appointment until later the same day. Just splendid!

Generally, people said that services are very good and accessible, and that staff are friendly, helpful and caring. A few people felt that there has been an improvement in the last year or two; particularly in diagnostics and health checks and in having a settled GP team.

Comments were mostly positive about GP care although some said this can be variable. While some people thought there was better consistency and continuity of care, one person said that seeing different doctors had been a problem. Another person would like to see a more holistic approach.

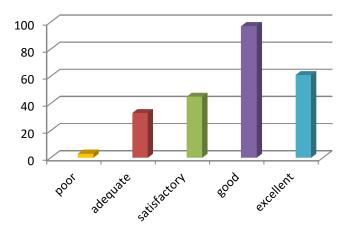
Several people said that the Practice Nurses are good, the only criticism being that there are not enough Practice Nurse appointments.

Reception facilities were rated as good, but there were 5 comments about lack of privacy. Most people said that reception staff are courteous and helpful. There was some criticism about patient information not being accurate or up to date.

Historically, people have often commented that appointments are easily and speedily arranged and this features again in this and the general comments section of this survey. However, in the small number of comments about appointments in this section, there were some observations that the waiting time seems to be getting longer for routine matters.

There were a small number of comments about arrangements for off island surgeries, mostly that capacity needs to be increased.

PHARMACY



The ratings show that most people think that the Pharmacy service is good or excellent (66% combined); however, additional comments highlight some issues.

There were 77 comments in total which give a mixed picture.

Many people say that the service is friendly, and that staff are knowledgeable and helpful.

The new pharmacy space received some negative comments. Three people said that the space is too small, with no privacy, and does not have a place to sit and wait.

Opening hours of the pharmacy received 16 comments: that opening hours are unsuitable for those who work, or have early or late GP appointments, and that collecting one's medication is therefore delayed. Suggestions include a later opening time during the week and additional hours on Saturday afternoon and Sunday. One person thought that an earlier opening time on Tuesday and Thursday, which are regular mornings for blood tests, would be helpful so people do not need to make a return trip if they need to collect a prescription.

Two people commented that as the GP Practice is now non-dispensing, pharmaceutical/ prescription services are not available when the pharmacist is absent or the pharmacy is closed.

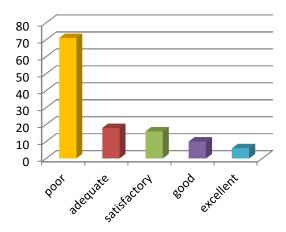
The prescription service received 25 comments. One person thought that there has been an improvement in the speed of the service. However, most comments related to repeat prescriptions and the length of time for a prescription to be processed, prescriptions not being ready, medication not always available and some instances of mistakes. A few people commented on repeat prescriptions being limited to one months' supply.

Some comments highlighted the necessity of multiple visits required to put in a repeat prescription and then to pick up, especially if it's not ready when expected; and the location of the Pharmacy is felt to be difficult for elderly people and off islanders. Some people asked if a collection point could be established in town, if only to drop off prescription requests.

Depositing prescription and collecting drugs is an issue.

(Nothing to do with Pharmacy staff, they are always helpful and pleasant.)

OPTICIAN



This service was rated overall as poor (59%).

58 people commented on the optician service.

8 people who have used the service thought that it was very good, however 2 of these also commented on the long waiting list.

Overwhelmingly, responses indicate a need for improvement. Most people observed that the waiting list is very long, and optician visits are not frequent enough to address this. Others described the service as irregular or ad hoc. Many people said they were not aware that there is a service or stated that it is non-existent.

There were several comments from people who had given up on getting an appointment in Scilly and made optician appointments on the mainland; a number of people referred to the cost involved. A few comments concerned the lack of regular check-ups or availability of appointments for children.

Healthwatch comment:

It is apparent from the comments in this section and the general section of this survey that people are generally very appreciative of the services provided at the Health Centre and feel that they receive good care. All observations, criticisms and suggestions from the survey (and praise!) have been passed on to the Practice and we will continue to discuss with them the issues that people have raised.

In particular we think people would like to see an improvement in the new systems at the pharmacy, and for some consideration to be given to more accessible pharmacy opening hours.

The response concerning the optician service is sadly reminiscent of the feedback we used to receive before the then Primary Care Trust addressed the matter by including responsibility for provision of 'a regular and reliable service' in the GP contract.

It is clear that this arrangement has not resolved the longstanding issues regarding provision of local eye tests, in terms of meeting need. We recommend that arrangements for the commissioning and provision of local eye testing are reviewed.

Response from St Marys Health Centre

Dr John Garman, Senior GP:

'In general we are very pleased with the results, whilst at the same recognising that we cannot be complacent and need to listen to feedback.

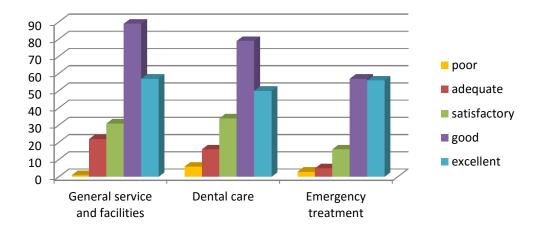
The biggest area of concern that I note is around the provision of optometry. Whilst it is pleasing that those who have been able to access the service have given very good feedback, we realise that there are difficulties around the waiting list. We are actively working on how to rectify this situation and have an ongoing dialogue with NHS England to look at reviewing the contract to ensure that it is sustainable. The waiting list is no longer growing and will hopefully be down to an acceptable level shortly, although given the way that optometry is funded, it is always going to be challenging to maintain this.

'I also note some of the comments around Pharmacy. There has been a lot of developmental work going on over the last year within the pharmacy, and it was very pleasing to note that the General Pharmaceutical Council recently awarded Helen and her team with a "good" rating. One of the areas we are working on is how prescriptions are processed, which will hopefully speed things up whilst giving a more fluent service for patients.

'In terms of the Health Centre feedback, again we are very pleased with the results - it is a testament to the staff and their hard work that patient satisfaction is high. What is particularly pleasing is that the Care Quality Commission gave us an "Outstanding" rating on our recent inspection.'



DENTAL PRACTICE



Up to 200 people left ratings in each category. The majority rating for all categories was good or better.

87 people also made a comment and these were largely positive.

A number of people described the service as excellent. Comments indicate that people appreciate having an NHS dentist who also provides emergency cover. The dentist in post is skilled in orthodontics and this is viewed as beneficial in children's treatment and care.

Many people commented positively on the dental team as being friendly and efficient and said they were well looked after. However, a number of people observed that the dentist is uncommunicative and said they would like to be given more information while receiving treatment.

6 people would like a dedicated hygienist service to be available.

4 people expressed concern that there is now only one dental nurse/administrator and that it can be hard to contact the surgery.

28 comments were about appointments. Many people said that emergency or urgent appointments are very promptly arranged, but an equal number said that routine check -ups involved a longer wait. Some respondents would like the practice to issue reminders for regular check-ups.

2 people commented on lack of locum cover when the resident dentist was ill.

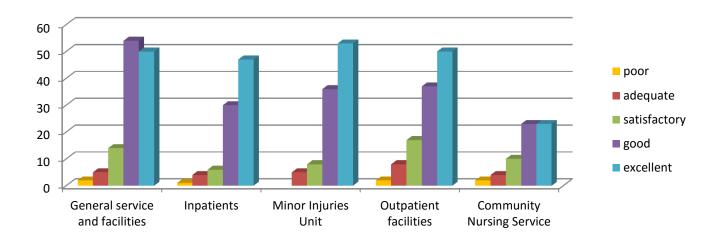
Healthwatch comment

'Lucky to have a good NHS dentist' is a common response when we run surveys, and the ratings show that the service is highly valued. At the time of the survey, the resident dentist had announced his retirement, and at the time of writing this report there is expected to be a period of locum cover until a replacement is appointed. One dental nurse post remains unfilled and there is some concern over this as well.

We are assured that access to routine and emergency dental treatment will be maintained; we suggest good ongoing information to patients about interim arrangements.

We asked PCH Dental for a response. They said they thought our summary is a fair reflection of the comments made, but had no other response at the present time.

ST MARYS HOSPITAL



Up to 125 people gave ratings in the categories above. In all categories the majority said services were good or excellent.

32 people added comments, which were generally very positive.

The level of care in all settings was considered by the majority to be excellent and nursing staff were described as caring and understanding, although 4 people said their experience varied.

2 people commented that the hospital is spotlessly clean, and the food was praised as well.

There was no criticism about inpatient care, and 4 out of 6 people said their treatment at the Minor Injuries Unit was very good. There were 2 adverse comments.

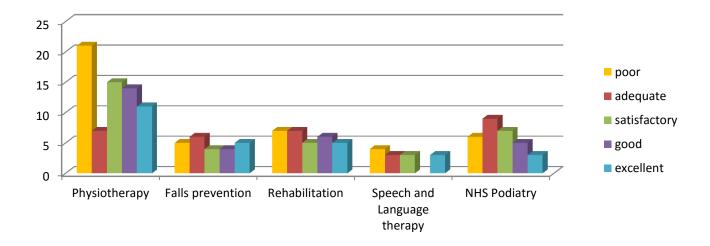
There were 3 comments about the Community Nursing Service which rated the service well, but one person thought that visits to the off islands were too infrequent.

Healthwatch comment

We generally receive very positive and appreciative feedback about services at the Hospital. We are pleased to note that the hospital and community nursing service continue to provide a hub both for an increase in treatment and care on-island, and in more integrated service provision.

I think that we are fortunate to have such a professional and caring NHS service in Scilly.

ADULT COMMUNITY HEALTH SERVICES



More people gave ratings for physiotherapy than other categories in this section. 40 people rated physiotherapy as satisfactory or better; 7 said it was adequate, and 21 said it was poor.

19 people also left a comment. Many people commented positively on their treatment and care, but the majority consensus was that physiotherapy is 'good when you can get it'. Over half of respondents said that there was a long wait for an appointment, or that the service was too often disrupted, or that the scheduled service was insufficient.

A very small number of observations were made about rehabilitation services, NHS Podiatry and other specialist services; ratings and comments were mixed.

Healthwatch comment

The physiotherapist visits weekly but the responses to the survey and other feedback indicate that people still wait some time for a first appointment and once on the list there is often a long gap between appointments.

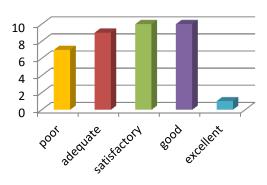
People often use the term 'Physiotherapy' to mean a number of things: the musculo-skeletal service, post-operative recovery, or treatment for injury. Intensive physiotherapy to aid recovery, or for chronic conditions, is not available on island and this leaves some patients unsupported.

The Council has agreed funding from the Better Care Fund for a part time post to enhance current provision.

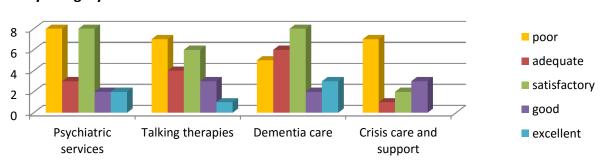
We recommend a review of provision across disciplines and providers, and consideration of a more flexible and joined up service, including falls prevention and rehabilitation, with increased use of local staff and facilities.

ADULT MENTAL HEALTH CARE

Experience of services, generally



By category

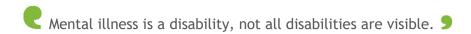


37 people gave a rating regarding their general experience and up to 24 gave ratings in the categories above. Whereas over half rated their experience generally as satisfactory or better, the majority rating in each category was satisfactory to poor.

17 people added a comment. The majority view was that provision on the islands is insufficient or inadequate.

Respondents cited poor follow up, lack of monitoring and continuing care, and patchy or poor support from mental health services. 2 people were critical of arrangements for people in a crisis.

1 person suggested that the 'Dementia Friends' programme is adopted in Scilly, and 1 person said that the volunteer-run Memory Café is excellent.



Healthwatch comment

We formed a mental health focus group earlier this year which met with local health and social care service staff to discuss their experiences and observations about mental health support.

The insights from these meetings are now being considered by a joint agency forum, with the continued input of the group.

We are pleased that the issues we hear about are now being addressed in a co-ordinated effort towards improvement. We are also aware that a protocol has been developed regarding safe care, and transfer where needed, of people experiencing a mental health crisis.

However, we hear from people that what they want is access to on-island support, and there is no dedicated mental health practitioner in that role on Scilly.

We recommend urgent consideration of a key worker post to provide individual and group support, with the appropriate governance and supervision in place.

Response from Outlook South West:

With regard to talking therapies, Outlook South West is the only agency which offers face to face sessions on St Marys, as well as telephone counselling.

Outlook South West told us that the measured outcome for patients from the Isles of Scilly is good (above average for Cornwall and nationally). Patient reported satisfaction with the service is high. However, there are issues around continuity of care due to cancelled face to face appointments. This might be due to travel disruption or because patients cancelled or did not attend. In 2014 and 2015, to date, 51% of all face to face appointments went ahead and 49% were cancelled (22% by patient and 27% by therapist).

In the same period, 72% of all telephone/skype appointments went ahead.

Kevin Simpson, Clinical Psychologist and Partner with Outlook South West:

'We do acknowledge the difficulties and complexities of delivering services on the island which is why we are keen to continue discussions and working with you to improve the situation as best we can. This is also why we are working on opportunities for people to have video-conferencing sessions in some circumstances. We are also investigating an online therapy solution which allows patients to continue working (self-help) in-between sessions, as well as receiving feedback and reviews from therapists online. The iCam video sessions are very close to being available and the online therapy tool is something we are hoping to have in place within a matter of months.'

Response from IOS Adult Social Care

Gareth Peters, Officer for Adult Social Care:

'The community's concerns regarding consistent access to Mental Health services and support with living with mental health needs on the Isles of Scilly are reflected in this survey. This survey is valuable feedback about what is working well and what isn't.

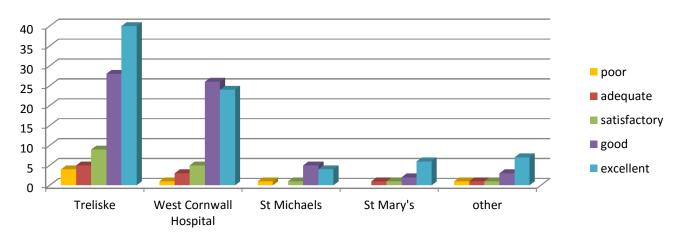
'We are pleased that the excellent memory café is highly regarded and that some people have had a good experience of services generally. The Council and health commissioners agree that we need to improve services and this is reflected in our work plans.

We have already begun work with the Alzheimer's Society on supporting the islands to become a dementia friendly community and are close to agreement on a crisis protocol for people experiencing a mental health crisis. We are improving communication with the mental health providers by setting up regular meetings and creating easy access to video links with therapists for local residents if planned visits are delayed due to the weather.

'We will continue to meet with Mental Health service users and their carers on the islands using the new clinical forums set up by Dr Garman where feedback is used to help improve what we do.'

GOING TO HOSPITAL

OUTPATIENTS APPOINTMENTS



When we asked people to rate their experience of attending an outpatient appointment, the majority rating for all locations was excellent or good.

179 people gave a rating.

52 people also left comments, and these were positive overall.

The responses indicate that people appreciate prompt arrangement of appointments, and good information and advice. A number of comments described staff as friendly, helpful and caring. Several people however were critical of a long wait for their 1st appointment.

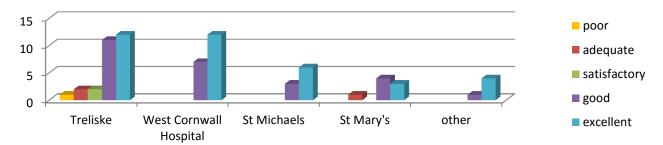
Some people referred to appointment times which were difficult or not possible to attend in a day, or of late running clinics leading to worries about return transport.

In some instances, people reported that hospital staff had been most helpful in accommodating these circumstances, whereas others said there was no appreciation of islanders' travel constraints.

Several people observed that they appreciated, or would appreciate, appointments held in Penzance or on St Marys; or they queried the need for a face to face consultation.

If I find mainland appointments a problem then people 20 years older than me in poorer health would find it even more of a problem.

DAY CASE SURGERY OR PROCEDURE



69 people gave a rating in this category, the overwhelming majority (91%) being excellent or good, across all locations.

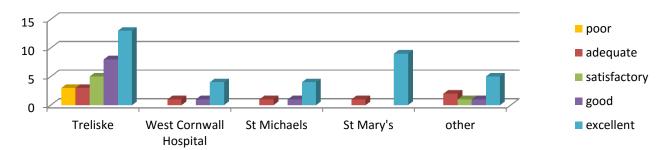
18 people added a comment.

All observations about treatment and care were positive.

1 person highlighted poor advice regarding arrangements for staying away overnight after their operation.

2 people said that they had waited a long time for surgery.

INPATIENTS



Of 63 ratings given in this category, 56% were excellent, 27% good or satisfactory, and 17% adequate or poor.

17 people also left a comment, and these were more mixed.

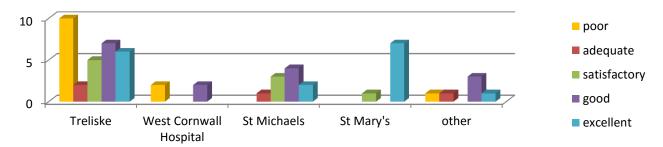
7 people said they had received good or excellent care.

3 people said they experienced delays due to lack of available beds. 2 people were critical of patient care. Other adverse comments concerned poor communication and continuity of care.

There were some comments throughout the survey about appropriate care settings for young people, which can be summarised by the following quote:

16-18 year old care in hospital really needs proper procedures in place - 'grey area' is not a satisfactory answer.

LEAVING HOSPITAL: arrangements for your discharge or transfer



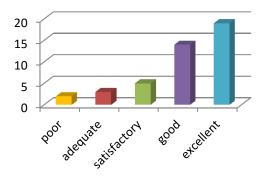
Ratings were mixed in this category. Of 58 ratings given, 30 concerned Treliske. Of these: 18 were satisfactory, good or excellent; 2 adequate or satisfactory; and 10 were poor. Numbers were very low across the other locations.

26 people gave a comment, and these indicated that in the main patients made their own arrangements, many citing lack of assistance or knowledge of IOS travel booking procedures at the hospital.

Some people commented on lack of co-ordination on discharge, regarding communication, medication or transport, though others said this had all worked well.

A few people thought that they were not adequately assessed as to their fitness for discharge.

FOLLOW ON CARE



There was a wide range of services cited by people who left a rating, so we have collated the figures for all locations and practitioners.

43 people rated this category, of whom 77% said it had been good or excellent.

16 people left comments, which were mixed. Many people were happy with their follow up care and said it was reassuring. Some, however, felt not enough was offered.

Healthwatch comment

It is very pleasing to see that most people rated their experience of going to hospital for consultation or treatment as good or better, and to hear praise for hospital staff and the level of care provided. Mainly, critical comments concern waiting times and poor coordination of arrangements for appointments, discharge, or follow up care.

In many cases, travel and transport factors were a feature in adverse comments.

We were interested to see how the location of outpatient appointments was represented in the ratings given.

Royal Cornwall Hospitals Trust provides us with data on the time and location of appointments at their clinics. The latest figures show that about 52% of appointments are held at Treliske, 21% at West Cornwall,

9% at other mainland locations, and 18% on St Marys.

There is broad agreement in the NHS about locating appointments 'closer to home', and there is consensus about reducing the need for IOS patient travel. Given the responses in this section and elsewhere that people find mainland appointments difficult to manage, especially further away than Penzance, we will continue to press for a change to the 'default' arrangements which are currently in place.

The other issue we wish to highlight is about arrangements for travel and transport on discharge. Islanders have to co-ordinate an unusually complicated journey, and will not have the ready assistance of family or friends nearby. The RCHT Patient Transport Office or St Marys Hospital will need to make the flight booking under the travel warrant scheme, and can also provide information about arranging surface transport. It is important that ward staff understand this and give the correct information. We are working with Royal Cornwall Hospitals Trust as they review previously agreed protocols for Isles of Scilly patients in order to make the information clearer and more accessible.

Most respondents gave details of the hospital and department they had attended, so providers will be able to see where things have worked well, and not so well.

Response from Royal Cornwall Hospitals Trust

Beverley Balin-Bull, Patient Experience Manager:

'Thank you for inviting our comment on the findings relevant to Royal Cornwall Hospitals Trust (RCHT) from your Healthwatch Isles of Scilly Community Survey. The transcripts and summaries are very helpful to us in knowing what we do well and where we could improve and we greatly appreciate the time taken by the islands' residents to provide this feedback.

'It was also a real pleasure to visit the islands last week (23rd & 24th September) with my colleague Sally Shipley, and thank you for all you did to make our visit not only worthwhile but also pleasurable. It was a really valuable insight to see the facilities on St Mary's for ourselves, and the visit really made us appreciate the difficulties that can occur regarding access to services and medical travel. We fully took on board some key messages about the importance of discharging patients at a time of day when they can make all their connections to get home, promoting the use of telemedicine, point of care testing, and we also understood that some patients could return sooner given the level of support and intervention that can be provided locally.

We will of course write up a report of our visit which we will share with you before working on some of the actions we agreed. Some of those actions we hope will directly impact on the findings of the community survey.'

Jon Stratton, Consultant Physician and Governance Lead for Division of Medicine:

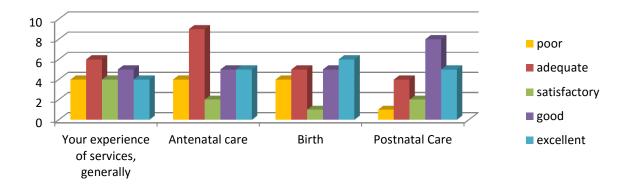
'We take on board the findings, especially concerning outpatient appointments and medical travel, but would like to point out that many specialities acknowledge the issues faced by island residents and bespoke arrangements are commonplace. Whilst medical specialists often make 3-4 monthly visits to the islands, some are offering telemedicine to avoid unnecessary travel.

'Patients who have had Transient Ischaemic Attack (TIA) are at risk of stroke and need to come to the mainland TIA clinics. If they are triaged as low risk we try to see them in the Penzance clinic, however if they are triaged as high risk they need to be seen within 24 hours so have to be seen wherever a clinic is being held. The specialist stroke nurses do travel over to see patients on their caseload.

'For people who need pacemakers, whenever possible we implant devices that can be interrogated remotely to reduce the number of necessary mainland clinic attendances for pacing checks. There may need to be provision of domiciliary pacing checks in the future for patients who cannot travel.

'There are three eldercare clinics on the islands every year but these are sometimes cancelled at last minute due to lack of patients needing to be seen. Endocrine clinics are also held.'

MATERNITY SERVICES



Up to 25 people gave ratings in each category, above. There was a fifth category: other care and support, which was unrated.

22 comments were made about maternity care, which echo the mixed picture given by the ratings.

12 respondents addressed the absence of a permanent resident midwife for a year, which was covered by visiting midwives on rota. While many said that they received good care, all but two spoke negatively about a lack of continuity, describing the service as inconsistent, and that availability of essential or accurate information and advice was poor. Some women said that at times the arrangements made them feel let down or caused stress.

4 women described their experience as difficult or 'not good'.

4 people commented about postnatal care: 2 said it was excellent, 2 said it was poor; however the majority of ratings were good or better.

A number of people said that having a permanent midwife service on Scilly is 'vital', 'essential' or 'invaluable'.

Response from Royal Cornwall Hospital Trust

Jan Walters, Women's and Children Divisional Director/Head of Midwifery)

'There was indeed mixed feedback about maternity care which was perhaps to be expected as the survey was undertaken during the year long period when there was no resident midwife.

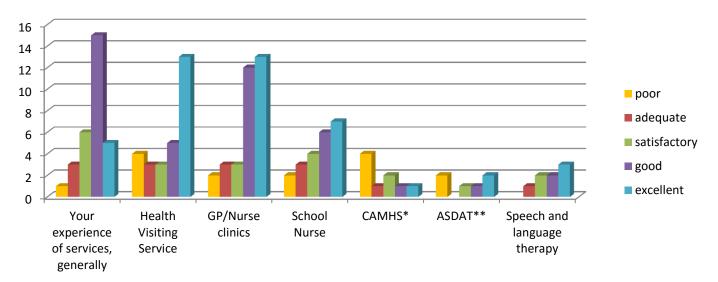
'We struggled to replace the retiring midwife because despite being successful twice in recruiting to the Isles of Scilly, we were let down by the lack of affordable housing. When the Council agreed that the post of midwife was essential to the islands this did help to ease the pressure but even now we have to subsidise housing at a cost of £500 per calendar month.

'We did explore a joint appointment of Health Visitor/Registered Midwife, which could have been full time and would help with recruitment, but unfortunately, as there is already a Health Visitor on the islands, this wasn't a possibility.

'We did provide full midwifery cover to the islands during this gap, which in turn put pressure on the mainland service, and this was fully acknowledged by Healthwatch.

Thankfully there is a resident midwife now in post so these concerns have been resolved.'

CHILDREN'S HEALTH SERVICES



^{*}Children and Adolescent Mental Health Services

Up to 33 people gave a rating in the categories, above. Over half said their experience of services generally was good or better. All categories had a majority rating of satisfactory, good, or better, except mental health and autism disorder services.

18 people also provided a comment.

There were positive comments in a number of categories, particularly the Health Visiting Service. There were a few criticisms across services about delayed diagnosis or lack of support where it had been hoped for or expected.

3 people commented on the CAMHS service, all said that it was not consistently available although 2 said it was excellent when they were able to get it.

Response from Cornwall Foundation Trust:

Janet Hart, Head of Patient Experience

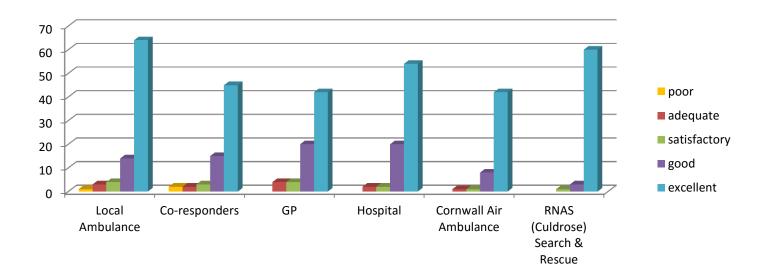
'We welcome the Healthwatch Community Survey 2015 report, and believe that you have produced an accurate and fair summary of what people living on the islands have told you.

'We would like to comment as follows:

- CAMHS senior managers are liaising with the CAMHS team based at Bolitho House Penzance, via Consultant Child and Adolescent Psychiatrist Dr Liz Myers, to understand the team's thoughts about how the service can improve its working with patients living on the Isles of Scilly.
- Consideration is being given to organising a telephone conference with key colleagues to discuss and devise strategies in supporting colleagues on the islands.
- Consideration is also being given to further surveying patients and staff on the islands in order to gain additional feedback, which will help to inform service improvements.'

^{**}Autism Spectrum Disorder Assessment Team

EMERGENCY RESPONSE



Up to 86 people gave a rating in the categories, above. We asked people to rate services which they or a member of their household had used in the last 2 years, and we suspect that some people did not base their entry on actual experience.

The results might therefore, in part, reflect the very high regard in which health emergency services are held, generally. We think this reveals that people have confidence in these vital services.

34 people added a comment, and these mostly related to their own experience.

Over three quarters of comments were very positive, across all categories, with a number of people mentioning RNAS Culdrose specifically. Cornwall Air Ambulance was also described as a lifeline, but 2 people commented on the lack of a facility to take a non-medical escort.

Local co-responders and ambulance crew also received praise. 3 people thought that there should be increased paramedic cover, or more crew available to cover more than one call out at a time.

At the time of the survey, the Star of Life ambulance boat had been out of service and 2 people commented about this.

Any other comments about health services?



I think physiotherapy would be appreciated with more frequent visits. Also, eye testing is difficult to arrange in Scilly, almost a year before appointments. X rays should be done asap in Scilly, as before.

42 people left a comment in this section.

About half simply said that their experience had been very good. Many people said we are lucky or fortunate in our health provision. Others used phrases like 'well served', 'caring', and indicated that they had confidence in health services. Local services are highly regarded, and positive comparisons were made with services elsewhere.

Three people are looking forward to increased X-ray provision on island.

Criticism was generally thoughtful and constructive.

Some people referred to 'niggles' or failures in systems which could be sorted out.

One person felt that problems were often due to lack of time and resources in the NHS; others referred to cancelled procedures; and another to having to pay privately for a procedure not available with the NHS. Two people said that care should be more holistic with better liaison between orthodox and complementary practitioners, or between clinical care and activities like yoga or pilates.

One person felt it was important to provide an annual skin cancer screening clinic. One person said accommodation provision for patients undergoing cancer treatment is needed, with patients paying something towards costs.

Throughout the survey, people often told us that they had been treated well and with care and attention, although this wasn't always the case.



I'd like to be treated with some understanding and respect. 🤊





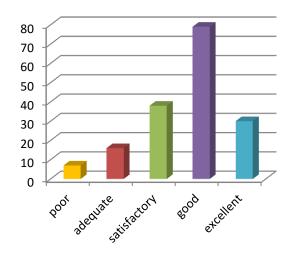
Section Two: Medical travel and transport

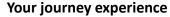
More people (130) made comments in this section than in any other subsection of the survey.

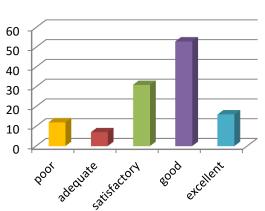
Ratings were given in 6 provided categories while observations were for the most part about the experience generally (28), coordinating treatment and travel (38), and booking travel and a travel warrant (39). Other comments concerned: mobility issues (10); escort provision (8); arrangements on leaving hospital (4); and off island travel (3).

There was generally a contrast between the way people rated the experience, and the smaller number of additional comments. Often people gave a rating in the top three, and added a qualifying comment.

Your experience, generally







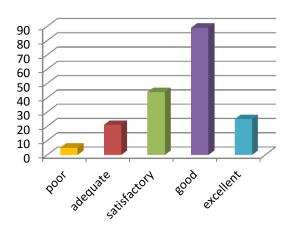
The majority rating (64%) for the experience, generally, was good or excellent.

However, many comments referred to 'weather permitting' and/or increased difficulty in winter. Comments indicate that the £5 medical warrant system is appreciated but some people addressed the need to reduce patient travel (and cost to the NHS) by providing more facilities for appointments, including by video link, and treatments on the islands.

Some respondents said that systems worked well for them. Others said the experience was stressful, and the process needs attention, including availability of flights, coordinating transport and appointment times so the trip is 'doable' in a day, and arrangements for travel after surgery.

When asked about their journey experience over half of respondents rated it good or excellent but the ratio was narrower - 58% said good or excellent, to 42% who said satisfactory, adequate or poor.

Arrangements for appointments/admission



There was a marked contrast in the ratings given in this category and the story which emerged from additional comments.

114 out of 184 people (62%) rated arrangements for appointments/admission as good or excellent.

38 people gave their observations about coordinating treatment and travel. These overwhelmingly described the difficulties involved and referred to the time and financial cost to the patient.

Many respondents felt that there is still too little awareness of the travel constraints on IOS patients. Getting to and from an appointment in a day, other than in Penzance, was described as difficult and stressful; and more problematic in the winter if there is a reduced flight schedule.

Some noted that onward public transport is not always straightforward or well-timed and so there may be additional costs for private transport.

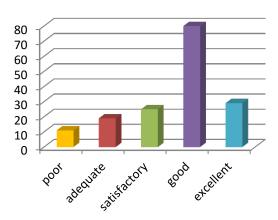
A majority of respondents commented that an overnight stay is often necessary and that this becomes expensive.

4 people left comments about their experience on leaving hospital: all were about a lack of understanding and help in making complicated arrangements, and feeling vulnerable.



Appointments still have no conception of travel time and difficulty even in summer time. Treliske appointments before 11 am or after 2.30 pm make day trips unlikely with no financial help for overnight accommodation.

Arranging travel and a travel warrant



109 out of 164 (66%) people rated the system for arranging travel and a travel warrant as good or excellent.

Additional comments were more mixed. 10 respondents said that booking through the Patient Transport Service at Treliske is good and has improved, or is an improvement on the 'old system'. 1 person said it is variable; another that processes are not followed consistently.

17 people referred to problems getting through on the phone or having to wait for a call back, or leaving details for the booking to be processed later which gives less choice over flights. Some people added that delays in processing a booking resulted in flights no longer being available. However, staff were described as pleasant and helpful.

There were a few further comments about limited flight availability, arrangements for changing bookings, and 3 comments about a need for better patient information about how to arrange medical travel as this is not something everyone will do regularly.

Regarding criteria for an escort warrant, 8 people made observations that they themselves or some categories of patient have been, or may be, disadvantaged by not being allowed an escort.

Response from Royal Cornwall Hospital Trust

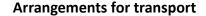
Jayne Martin, Head of Patient Services:

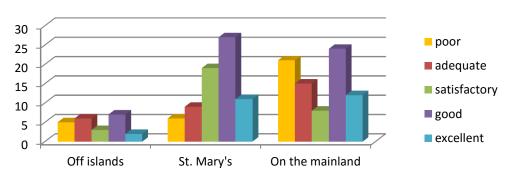
'We continue to work to improve medical travel and whilst we have covered many of the issues on numerous occasions there are still some trends apparent in the feedback, for example being difficult to get through to Patient Transport Services (PTS) or staff being busy when they get through, and we are still seeing that some appointment times at RCH are making it difficult for people to attend and return on the same day.

'Access to PTS is an issue; however we are looking at putting Netcall in place (call handling software) so that even if someone can't get through immediately they will be in a queue rather than just hearing an engaged tone.

'There does need to be an improved awareness of the role of the PTS office and what can be reasonably expected. Nick Masters, the Transport and Travel Manager, has made sure that there is a standard procedure to be followed for all IOS ticket requests. Therefore comments about inconsistency are a concern and I wonder if these comments reflect recent events or relate to before the new procedure was implemented? We do have FAQ's which have previously been circulated via Healthwatch.

'I attended the Health Overview and Scrutiny on the island on the 4th August in relation to escorts and that meeting went well. Our draft guidance will be considered by them again on the 15th October. In particular, issues around escorts for chemotherapy treatment should have been resolved under the current system of pre-approval. '



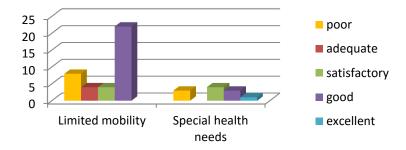


It is clear from the ratings given in each category that there is a range of opinion about transport arrangements for off islanders, and for everyone when they get to the mainland.

About half of all comments in the medical travel section concerned the difficulty in making travel arrangements to attend hospital in a day trip, due to the restrictions of flight schedules and onward transport.

3 people added a comment about off island transport: 1 said it has not been a problem, 2 referred to difficulty in booking the Medical Launch, which would be their preference.

arrangements for people with limited mobility /special health needs



A small number of people left ratings in this section, most said that arrangements for people with limited mobility were good.

Ratings for arrangements for people with special health needs were divided between good, satisfactory and poor, with 1 rating of excellent.

10 people also left a comment. 8 concerned difficulties in boarding and alighting from the planes for people with limited mobility, including patients who are elderly, infirm or on crutches post-op.

1 person praised the expertise of staff at Lands End, and 1 person who required the chartered stretcher plane and ambulance said they were well looked after.

I would like not to travel so much to have my medical needs met. 9

Healthwatch comment

Queries and comments about medical travel comprise the bulk of feedback to Healthwatch and we are not surprised that people had plenty to say about it in the survey. The comments here also broadly reflect what we hear about all the time.

It is encouraging then to note that when asked to rate their experience the majority in nearly all categories gave a rating of good or better.

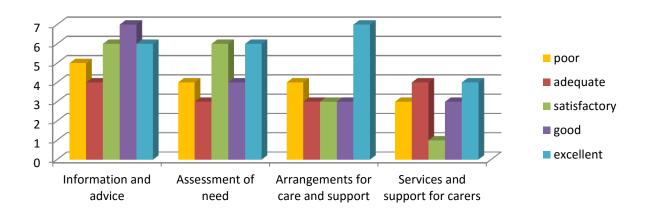
A number of agencies, including Healthwatch, NHS Kernow, Royal Cornwall Hospitals Trust, local services and Isles of Scilly Steamship Group, have been working together for a number of years to monitor and improve the systems in place for all aspects of medical travel and transport of goods. At the time of this report there has been a change to summer and winter schedules, allowing for an earlier first flight. Progress has been made on a review of travel warrant administration and clear escort criteria.

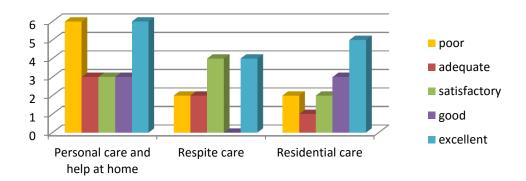
Activity is co-ordinated within the joint IOS Medical Travel and Transport Group which meets every two months. It is administered and co-chaired by Healthwatch and receives the ongoing commitment of all partners.

Medical travel is a fact of life, and although people accept it as such, it is often an uncomfortable or expensive experience. We are pleased to see a move towards reducing the need for patient travel and will continue to monitor this trend.

Section Three: Community and Care

ADULT SOCIAL CARE





Up to 28 people gave ratings across the categories, above. Although the picture is mixed, the majority rating was satisfactory or better in nearly all categories.

14 people left a comment.

3 people were positive about the care they or their relatives received. 3 people felt information was not made available widely enough. Others felt there were not enough facilities available or support on offer, and 1 person suggested improved liaison between health and social care.

Healthwatch comment

The relatively small number of ratings and responses, and the mixed picture they reveal, make it difficult to draw any clear conclusions.

We are aware that there is now much closer joint working between health and social care and suggest better information is needed about who to contact for support and about what is available across services.

Response from IOS Adult Social Care

Gareth Peters, Officer for Adult Social Care:

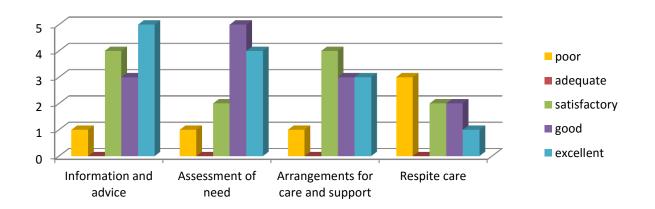
'I'd like to thank members of the community for taking the time to let us know what they think of the services we are providing. We are really pleased that some people think we are providing an excellent service.

'The carers at Park House are a dedicated team and make a real effort to get to know the people they support. We have had difficulties recruiting staff to meet the increasing demand for care at home and sometimes this has meant we have not been able to be as flexible as we want to be.

'Having access to good information and advice about services is really important. We have been working with Healthwatch to create a directory of services and contacts which will be available in both paper and online. We are also working with the islands' carers to provide an improved support network and emergency plans if the carer becomes unwell.'



CHILDREN'S SOCIAL CARE

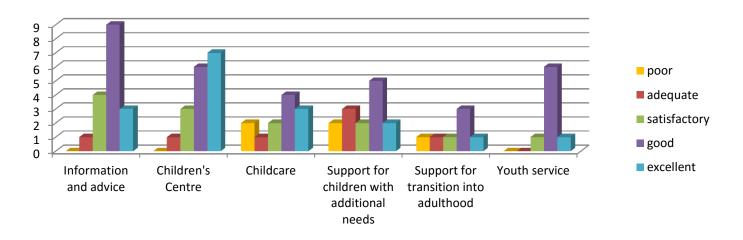


Only 13 people provided a rating about children's social care, and 5 added a comment.

The majority rating in all categories was good or better, with the exception of respite care.

2 people also left a comment that there is 'no respite care', although 1 person said that services had been creative in this respect.

CHILDREN'S SERVICES



Up to 17 people gave a rating across the categories, above. In most cases the majority rating was good or better.

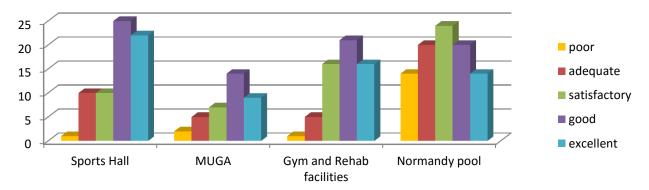
17 people also left a comment. People said that the support they had received from services was excellent or good. 3 people had praise for the youth support service in particular.

Criticism, where made, was about not enough childcare provision on the islands, and a lack of inclusion workers to support children with additional needs.

The amount of feedback overall is too small for us to comment on.

COMMUNITY SERVICES

Sport and leisure facilities:



Up to 92 people gave a rating in the categories, above.

Most facilities were given a majority rating of good or better: Sports Hall 81%; MUGA 61%; and Gym and Rehab facilities 63%.

The largest number of ratings concerned Normandy pool and these were more mixed: good or better 37%; satisfactory 26%; adequate 22%; and poor 15%.

36 people left a comment.

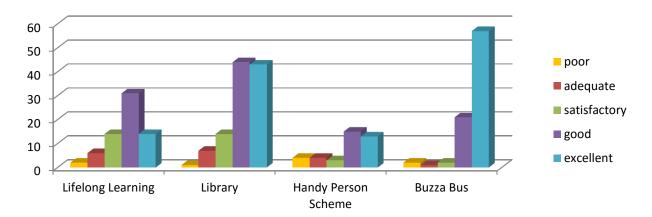
10 referred to the Sports Hall and Gym. Some said that opening times could be improved or that sessions were cancelled without notice. 2 people would like more fitness classes to be held. 2 people said the facilities were too expensive.

26 comments were about Normandy pool.

Many people thought it was a good facility but some said the sessions they had attended had finished or changed to times which they could not manage.

A number of people said the pool is too small, and/or the changing facilities are poor.

Other community services:



Up to 109 people gave a rating in the categories above.

The Library received the highest number of ratings and 71% said it was excellent or good.

12 people added a comment and these were largely appreciative of the new facilities. 2 people mentioned that the computer administration system hadn't been working and 3 people would like longer opening hours, or hours which would suit working people.

67% of people who rated the Lifelong Learning service said it was excellent or good.

Only 4 people made a comment, 2 of whom would like to see a wider variety of courses on offer.

72% rated the Handy Person Scheme as excellent or good.

Buzza Bus also received a high number of ratings and of these 94% were excellent or good. A few people left a comment, these were also largely positive.

Healthwatch comment

Community facilities and services are an important part of provision in helping people to maintain good health and wellbeing.

We are pleased to pass on the ratings and observations made by our survey respondents, and to note the generally positive message they carry.

Any other comments about social care & community services?

19 people made a comment in this section.

A number of people said that services and staff are good, but many referred to the challenge of improving provision given limited resources. Funding, low pay, housing, and 'excessive administration' were cited as factors.

Most people were concerned about provision for older islanders: home care, residential care and care for people with dementia; as well as easier access to activities and facilities.

Social care and community services on the off islands were felt to be poor.

Response from Council of the Isles of Scilly

Aisling Hick, Senior Officer for Services to our Community:

'Thank you to all who took time to let us know what you think of Local Authority services. We are glad to see that feedback is generally positive but we are always trying to improve services so we really value comments which are more critical. There are some really useful comments here, particularly around children with additional needs, carers services, information and guidance, childcare provision and so on, that we have already identified as areas for development and have included in our annual service plans.'



How do you rate your own Health & Wellbeing? Overall Very Poor (1%) Poor (3%) OK (29%) Good (51%) Excellent (16%) 26-40 years old 41 - 65 years old 66+ years old Very Poor (5%) Poor (0%) Very Poor (1%) Poor (4%) Very Poor (0%) Poor (6%) OK (14%) Good (33%) OK (29%) Good (55%) OK (31%) Good (52%) Excellent (48%) Excellent (12%) Excellent (11%) Source: Healthwatch Isles of Scilly Community Survey 2015



Section Four: Your health and wellbeing

In this section of the survey, we asked people to rate their own sense of their health and wellbeing, tell us which services most supported them, and what would make a difference.

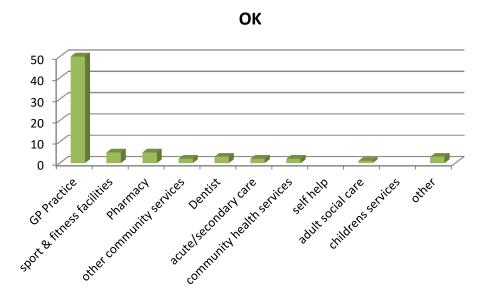
227 people gave a rating:

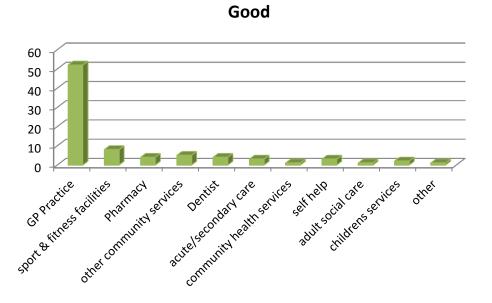
Very poor 2 (1%); Poor 9 (4%); OK 66 (29%); Good 115 (51%); Excellent 35 (15%).

The picture was similar across most demographic factors, apart from one clear difference: nearly half of people in the 26 - 41 age group rated their health and wellbeing as excellent, but a slightly higher percentage in this group rated it as very poor compared to other age ranges.

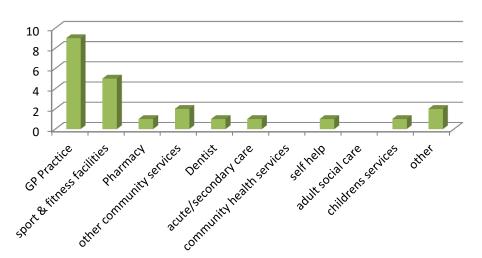
(We didn't receive any returns from people under 26.)

When we asked people to list the services which most supported them, their responses looked like this: (numbers in the poor/very poor categories were too low to report on.)





Excellent



When we asked what would make a difference, people cited a wide range of factors, with little correlation to how they had rated their own health and wellbeing.

A few people had said that self-help and care are important to support health and wellbeing, and there was a nod to that in this section too, i.e. joining clubs or getting organised to go to the gym.

There were suggestions that the sports hall and gym could offer more classes or options for the 'middle aged and still working' - i.e. more general fitness activities in the evenings. A number of people asked for 'a better, larger swimming pool'.

Some common themes emerged about health provision - better access to the optician service, physiotherapy, and mental health therapies. There was also a call from a few people for a female doctor in this section.

Improved midwifery provision was mentioned, as at the time of the survey there had been a year of rostered locum cover.

People suggested that more sight/hearing tests, scans, or consultations could be delivered on island, and others talked about improving on the experience and cost of medical travel to the mainland.

A few people said that more resources for elder care provision and improved support for carers is needed. We note the response from Gareth Peters, Officer for Adult Social Care, on page 28.

Better communication between services to improve continuity of care, and better information about services was felt to be important.

Some people said being 10 or 30 years younger would make a difference!



Community Survey 2015

Gleaner House, Porthcressa St Marys Isles of Scilly TR21 0HW

01720 423027 contact@healthwatchislesofscilly.co.uk www.healthwatchislesofscilly.co.uk