Health and Wellbeing Board
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Access to information, advice and support priority - Consultation

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1. Summary

1.1 This report presents the main themes arising from consultation of outcome 5 priority, make it easier for the public and professionals to access information, advice and support priority within the Health and Wellbeing Strategy.

1.2 Members of the stakeholder alliance were invited to engage with the online discussions as well as respond independently via email consultation. The views by one group represented on the Stakeholder Alliance may not concur with that of other groups or JSNA intelligence. Therefore this report should be used in conjunction with the JSNA summary for outcome 4, and other previous consultation.

1.3 Links have been made with the Building Health Partnership work. One of their key priorities is improving access to information and advice. The BHP is developing a 'map of maps' that is envisaged as a single porthole for accessing databases and websites with relevant health information.

2. Recommendations

2.1 The Health and Wellbeing Board:
   a. Set up a process to identify governance arrangements of the 'map of maps' (part of the Building Health Partnerships work) and consider the appropriateness of the Health and Wellbeing Board taking ownership of this work in the future.

   b. Discuss and consider the challenges highlighted in this report and determine the best way for the Board to make progress on improving access to information and making services more seamless, for example how will the board make progress on:
      i.   Ensuring those not digitally included can still have good access to information, advice and support.
      ii.   Addressing health literacy issues and considers this in supporting more individuals in Shropshire to adopt self-help measures.
      iii. Ensuring that this priority is linked appropriately with other Health and Wellbeing priorities such as Assistive Technology/ Telehealth-care.

REPORT

2. Why is this priority important in Shropshire?

- Service users and carers often find it hard to access advice and support they need.
- The current system places the onus on them to understand and navigate the system.
- Clinicians and other professionals sometimes do not know what support for service users is available and where to go for it.
- Increasing personalisation and patient choice means that people need to have access to information about the full range of options available.

Consultation

3.0 The following themes have arisen, following analysis of online discussions and consultation responses:

3.1 Existing Services that support this priority

Concerns were raised through the Alliance about coping with the health demands of 306,100 citizens, many of which may not be health literate, who live over 1235 square miles.

Public, Professionals and VCS
Some of the organisations that support the public with this priority (not an exhaustive list) include the following: A4U, Citizens Advice Bureau, library services, Shropshire Referral Assessment Service, POhWER – NHS Complaints Advocacy Scheme, Age UK, Shropshire Independent Advocacy Scheme, Independent Living Partnership, Shropshire Youth, PALS SaTH, SCHT, RJAH, SSFT, churches and RCC Carers.

There are also existing directories including the Adult and Social Care Health Directory, Family Information Service and Shropshire Council Community Directory.

Some of the responsibility to provide information is statutory, for example the Family Information Service has responsibility for ensure that Shropshire Council is meeting the requirements of the Childcare Act 2006 – which is the duty to provide information, assistance and guidance to parents and carer of children and young people between 0-19.

Some of the organisations that support health professionals in terms of signposting patients include the following: SaTH library services, SCHT Library & Knowledge Service, RJAH Health Library, SSSFT Library & Knowledge Services. The CCG are currently running the Community and Care Coordinator pilot aimed at improving access to information for both professionals and patients at GP practices.

3.2 Better promotion of information resources

- **Part of the work of the Building Health Partnerships includes the development of the 'map of maps'** which brings together current directories, stakeholders groups and patient groups into one place (web based 'map'). One of the key aims of this project is to make the language meaningful to both professionals and to members of the public. An issue discussed at a recent meeting was identifying who would host the overall services directory locally with the potential of this being outside the Council's remit.

- **Ensuring those who are digitally excluded** can still access information, advice and support is important, particularly as broadband can be poor in certain areas of Shropshire and many may not be able to afford IT equipment. Therefore the need to publish a directory of services is greater in Shropshire and should be considered.

- **Part of better promotion of information resources requires up to date and accurate information** which also necessitates individuals taking responsibility as well as inviting organisations to regularly feed into it the information resource, making it proactive rather than reactive.   It was felt there is already an abundance of existing information but the challenge is establishing a sensible governance structure that gives accurate and safe advice/ information for individuals.

- **Training of front line advisors is important** to support people accessing the information they need. In this light, it was felt information, advice and support should be delivered by trained, qualified and knowledgeable professional who work in a multi-agency way, sharing good practice with partner service providers.

3.3 Issues arising and promoting good end to end service for the patient

- **Combatting the assumption that people know, understand or remember what they have been told** should be addressed in the action plan of this priority and it was suggested advocates should be given a clear route to follow (for more detail, see 5).

- **Barriers to accessing services, information and advice** include geographical, technological and social exclusion and it was felt this should be tackled by the Health and Wellbeing Board.

- **Discharge from hospital was identified as a particular issue in terms of some patients feeling 'abandoned'.** To overcome this, it was felt that everyone involved in care should better understand what happens next at the point of discharge.   A pack of information could be provided at a relatively low cost pulling together all relevant material for specific cases e.g. *''what you can expect from the NHS or Social Services''*.   Another solution suggested was to map patient pathways to identify gaps and work to resolve; also that early intervention on return home and continuity of care offered in hospital for stroke victims would provide a wealth of benefits.

- **Shropshire Carers Forum** is a coordinated approach to supporting carers including signposting carers to advice, access and support. Some anxieties witnessed from carers included uncertainty as to where a person with a long term condition (e.g.Asperger syndrome) would get a meaningful carer assessment. There is also the Shropshire Rural Community Council Carers Support Service which provides information, advice and support for carers across Shropshire; RCC are currently in the process of evaluating the Carers Support Service

- **The Alliance suggested that the CCG include a clause in their contract specification with providers** requiring service delivery organisations to make access to information easy and services seamless. This would ensure that providers help patients and their relatives/ carers by guiding them to useful information (on line or otherwise); supporting patients to manage their own recovery.

- **It is important that the Board set strategic objectives, priorities, targets and performance indicators** for the delivery of information, advice and support. Part of this involves engaging with all relevant stakeholders (services users and non-service users) in

the design, planning, delivery, quality assurance and evaluation of the service providers, which are all key to the delivery of this priority.

3.4 Solutions making it easier for the <u>public</u> and <u>professionals</u> to access information, advice and support

Public

- **First time abbreviations should not be used in health literature and better online search functionality should be adopted**. Promotion of materials should be jargon free and user friendly.   The stakeholder alliance suggested having downloadable self- help apps with Google map directions including parking charges, bus routes etc. instead of a more traditional online directory. Existing example were also cited including a 'social care jargon' buster, which contains 52 of the most commonly used social care words and phrases; providing plain English explanations of commonly used terms.

- **A Health and Social Care Literacy Strategy to address the above was suggested** which would seek to engage organisations, professionals, policy makers, communities and individuals in a multi-sector way, helping to exploit information assets in order to improve health literacy.

- **Each time a publically funded Shropshire based organisation produced web enabled material,** which can enhance better health and social care, it was suggested this should be disseminated to other Shropshire based organisations.

- **We should utilise existing services** such as the GP outreach service which exist in 5 GP surgeries across Shropshire. Giving patients access to information and advice services in their community/ GP practice at the point they need it is essential.

- **Community Care Coordinator** posts should be continued and expanded. It was reported on the alliance that referrals to CCCs are increasing with them operating in over 20 GP surgeries in Shropshire and their role in signposting is critical.

- **Shropshire CCG Long Term Conditions Programme** is looking at creating a 'hub' that will identify and distribute information to professionals and a network of peer support groups including training materials, videos, podcasts etc. for patients.

Professionals

- **For professionals it was suggested there should be an instant access online to a directory of organisation** listed under each condition which will potentially help facilitate a more seamless patient journey.

- **Commissioners would like to better understand the availability of local VCS services** and the VCS would like to find it beneficial to learn more about each other. In order to address this, a project has been established under the banner Building Health Partnerships (referred to earlier).

5. Risk Assessment and Opportunities Appraisal
(NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)

Stakeholder Alliance	Impact	Mitigation
Online mechanisms can be misused or become inappropriate if not monitored properly (no evidence of this so far)	There is a **low** chance of this occurring as membership is controlled by the moderator, and posts are monitored by the moderator and can be removed. Anyone in breach of the terms of engagement will be removed from the Alliance.	**Term and conditions** of joining **Closed forum** that require invitation to become member and declare what role/ organisation from.
Opportunities	**Impact**	**Action**
Stakeholder Engagement	Potential **high positive impact** on the HWBB understanding of the communities we serve	Continuing to engage with our communities through numerous methods

6. Background

5.1. All members of the stakeholder alliance with a relevant interest in this priority were invited to take part in the discussions. Members were encouraged in the first instance to post their comments on the online forum to stimulate discussion but some individuals preferred to respond to the consultation via email.

7.0 Health and Wellbeing Calendar of Engagement

Following a number of Health and Wellbeing related consultations taking place, the Shropshire Together partnership team has coordinated a calendar of engagement for this year and early 2014. This has been coordinated including input from Shropshire CCG, Public Health and Healthwatch. The following have been planned which relate directly to priorities within the Health and Wellbeing Strategy: assistive technologies, healthy weight launch and dementia workshop. It is intended that the calendar of engagement will provide links to the consultation findings within the Shropshire Council Joint Strategic Needs Assessment website pages.

Over the past few months, Karen Higgins, Lead for Patient Involvement at Shropshire CCG has led on Focus on Health, which trains leaders of communities to run focus groups themselves in their own community or in their relevant field of health. The findings arising from the focus groups will help form the basis of an online survey about the priorities of the Health and Wellbeing Strategy. This will be circulated at the end of October and will feed into January's Health and Wellbeing Stakeholder annual conference.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)   **CCG Outcome Indicator Pack – on the website**   **Everyone Counts – on the website**
Cabinet Member (Portfolio Holder)   Cllr Karen Calder
Local Member
Appendices