



ALLIANCE Insight

People at the centre



Interim Report

September - November 2020

People at the Centre

This interim report aims to provide you with information on the progress of the People at the Centre Programme.

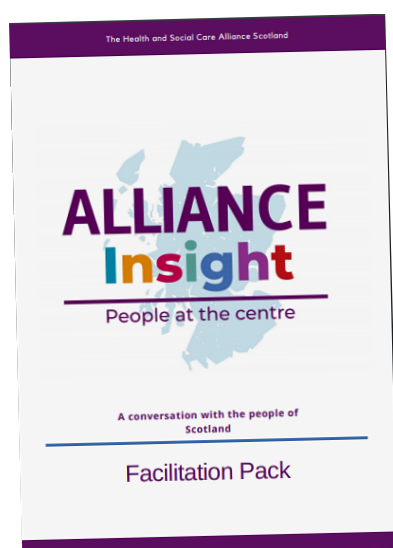
A series of national and local online events, surveys, discussion groups, partnership activity and case studies have contributed to rich insights into people's experiences, priorities and areas for focus for remobilisation and renewal of health services.

In order to inform decisions about the remobilisation and renewal of health services, this programme of activity has been designed and delivered at pace from August to November 2020 and is now being analysed to report in early 2021.

Geographical reach

Through a range of engagement activity, the programme engaged with people from Shetland to South Ayrshire and everywhere in between.

Our aim was to engage and speak to as much of Scotland's population as possible, with a particular focus on those whose voices aren't heard as often. Through partnership with Healthcare Improvement Scotland and Scotland's third sector, we were able to engage with people from all 45 Integration Authorities and Health Boards across rural and urban communities.



The story so far

600+

local community groups connected with

7+

diverse methods of engagement during COVID-19

45

Integration Authority and Health Board area representation across a suite of engagement activity

459

survey responses and open call contributions from individuals across Scotland in a 4 week period

4

targeted events with Inclusion Scotland, Disability Equality Scotland, individuals experiencing long-Covid and Scotland's BAME and Faith Communities

200+

people of Scotland attended 5 ALLIANCE Conversation events held in partnership with Healthcare Improvement Scotland

30+

case studies received

550+

third sector organisations engaged with

Partnership and engagement

Partnership working

Working together with partners to develop and refine effective engagement activities has been a central principle of this work.

Here are just some of the examples of how we've worked with partners to create an inclusive and diverse programme of activity:

- Partnered with HIS - Community Engagement to develop and deliver 5 national Conversation events and liaised with the 31 Integration Authorities and Health Boards to support their involvement in this engagement programme.
- Supported Aberdeenshire HSCP and NHS Grampian to deliver an event which brought together members of their Acute Leadership Team and people with lived experience.
- Currently working with Scottish Care and Care Inspectorate to capture the views and experiences of adults who live in care homes or who access care at home support.
- Worked with Inclusion Scotland to develop Easy Read materials and involve People Led Policy Panel members in a bespoke event for individuals who have experience of social care support.
- Held an event in partnership with Disability Equality Scotland to capture the views and experiences of disabled people.
- HIS - Community Engagement supported specific events held for Carers in Dumfries & Galloway, long term conditions group in Orkney and a Diabetes support group in Western Isles.

Engaging differently

Our engagement approach has been flexible and varied to promote inclusivity and accessibility in challenging times.

Engagement took various forms so that people could share their views in ways that were accessible, convenient and flexible for them. This included an online survey, open call for contributions, 1:1 interviews, case studies and online events. HIS - Community Engagement also supported people to participate through 1:1 telephone conversations and through collaboration with East Lothian HSCP, we were able to support face-to-face engagement in flu clinics as well.

We worked with our member organisations and supported them and many other organisations to reach out to the groups they work with to share information and hold events of their own. We were overwhelmed by the enthusiasm to take part. We heard from many hundreds of people including carers, people with long-term conditions, third sector professionals and people of ethnic minority background. We spoke to people of all genders, age groups, across all equality groups as well as those experiencing health inequalities. A module of questions for the Citizen's Panel will also add to this engagement..

Emerging insights

The below shares an insight into people's health and wellbeing during the COVID-19 pandemic, the true breadth, complexity and nuance of which will only be captured in the final report of the programme.

What has worked well?

There have been many examples and experiences shared with us which demonstrate the good practice taking place to support and keep people well during the pandemic.

Pharmacy Services

Of the services available people have praised pharmacies, as well as the collaboration between GP practices and pharmacists. The availability of prescriptions to be delivered straight to people's homes, the speed with which people have been able to access emergency prescriptions and repeat prescriptions have all been mentioned positively during engagement activity. Whilst some participants noted the pressure pharmacies have been under due to over-subscription of their services, people's experiences have been overwhelmingly positive.

"My pharmacy stepped up and brought my repeat prescriptions to me. That was brilliant and made life easier for me." - Participant

"Pharmacy staff to be commended" - Participant

What has not worked so well?

Whilst there have been many positive experiences shared, there have also been examples where the principles of Realistic Medicine have not been adhered to.

Not an equal partner in care

A significant concern expressed by people is that they were not sufficiently consulted or involved when their care was postponed and received no support on replacement care options or the implications of a lack of care on their health and wider wellbeing. This included but was not limited to chronic pain clinics, asthma clinics, diabetes clinics and follow up care after surgery. People recognise that decisions had to be made at pace, however, the lack of involvement or consultation about decisions related to their rights to equal care has been distressing.

"Although it's understandable that the pandemic has impacted the service it's really worrying me that my health could be negatively impacted due to withdrawal of services and proper doctors appointments." - Participant

Emerging insights

The impact of the pandemic on mental health

People have also shared with us how the pandemic has impacted their mental health and wider wellbeing.

It is clear from the responses we have received that the pandemic has had a significant negative impact on people's mental health. People have commonly reported that they have felt abandoned, isolated and powerless during this time. Some participants have shared how their pre existing mental health problems have been exacerbated by the stress of the pandemic, as well as reduced access to services; particularly face to face counselling, where virtual services have been reported as a less effectual alternative. For others their mental health has deteriorated as a result of isolation, lack of contact with support systems and feelings of neglect.

"Very isolated. Completely abandoned. No one cares" - Participant

"Mental health is usually a significant part of our clinical workload, but we have seen a further significant increase in the volume of mental-health related presentations (those with existing mental health issues worsening, and many developing new mental health difficulties)."

Submission from GPs working at "the Deep End"

What matters to people?

When asked what matters to them, people feel strongly about having access to services that recognise and respond to their unique needs.

"Appropriate and prompt treatment when people need it - one size does not fit all" - Participant

Through our Community Resilience Best Practice Case Studies we have captured many examples of statutory services, community organisations and individuals working in partnership to design and deliver services which have effectively supported people's health and wellbeing. Lessons can be learned from these examples which clearly highlight the importance of a collaborative and integrated healthcare system, which involves people and communities as active and empowered partners.

"The collaborative approach was highly successful and ensured person-centered care continued to lead decision making. As a result of the positive impact of the Community Hub on patients, their families and staff, it will become a permanent feature of our Glasgow Hospice services as new levels of normality start to emerge." – Marie Curie