

Listening to Rural Communities in the High Weald

How residents in Crowborough, Heathfield, Wadhurst and surrounding areas experience health and care services as heard in June 2019.



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1. Acknowledgements

Thank you

We would like to thank everyone in Crowborough, Heathfield, Wadhurst and surrounding villages who supported us to listen and understand both what is working well with health and care services and what could be improved in the rural High Weald area of East Sussex.

Our special thanks too as always to our team of dedicated volunteers, who gave their time so generously to this activity and to Wealden District Council for all their support in hosting the Healthwatch 'Chatty Van' in numerous community locations and car parks.

Last but not least, to all our stakeholders and partners who joined the tour, without everyone's contributions we could not have achieved our third successful Listening Tour.

2. Executive summary

What is a Listening Tour?

Our Listening Tour is a programme of extensive engagement activity developed to generate diverse and inclusive public feedback on their experiences of health and care services, including the wider social determinants of health.



The tour makes use of a range of approaches to gather views and insights. It adds to the evidence and intelligence that already exists, expanding our understanding of people's interaction with and use of services.

Where we spoke to people

Over two weeks in June 2019, Healthwatch East Sussex visited various locations in the High Weald area of East Sussex. This attractive and largely rural area borders the counties of both Kent and West Sussex.

We spoke to people in the main towns of Crowborough, Heathfield and Wadhurst. We also visited villages in the surrounding areas including Eridge, Groombridge, Mayfield, Forest Row, Ticehurst, Burwash and Rotherfield.



Transect Walks

A familiar part of our pre-engagement activity is Community Observation Walks.

Following the Transect Walk principles, groups of people including staff, volunteers, professionals and interested local people come together to plan the activity within key towns or villages where the **Listening Tour** is taking place.

The aims are to observe where people go formally and informally to meet up and exchange information and to help identify where people, whose voices we seldom hear, interact with their community.

Collectively, the insight gathered and reviewed enables HWES to plan and prepare for targeted engagement and outreach to gather views from people whose voices we rarely hear. Not necessarily because they encounter any barriers to sharing their views, more simply because they are going about their daily lives and it is not a priority for them!

Chatty Van on Tour

To assist with the challenges of delivering a rural Listening Tour, we hired 'Chatty Van' from Healthwatch Cumbria. Chatty Van not only provided a comfortable, accessible space to talk to people and shelter from the rain; it helped to promote Healthwatch East Sussex as we drove around the county.



Our Findings and Overall Conclusions

We communicated with 10,000 people during the tour, including over 9,000 on-line through social media and 994 people face to face. 365 people also responded to our mini survey on the NHS and Adult Social Care, with 42 completing a more comprehensive set of questions

People in the Wealden area are emotionally attached to the NHS as a trusted brand and were therefore willing to engage in the activity and share their views.

In response to our short survey questions about the NHS, local people told us:

- The best thing about the NHS is that: *'it's free'*
- The worst thing about the NHS is: *'waiting times'* and
- The one change that would improve the NHS is: *'more staff'* and *'more funding'*

In response to our short survey questions about Adult Social Care, local people told us:

- Over half of them (57%) expected their family to care for them if they became frail or disabled.
- Two out of five (41%) expected that their family would pay if they needed to live in a care home.
- What one change would help you live at home for as long as possible?

The most frequent/common responses were: Better access to medical services to prevent conditions occurring; Home visits to ensure I was taken care of properly; More investment in social services; More support for rural doctors.

From this snapshot of responses, if you became frail or disabled, it was 'The Family' which received the most responses of who would 'look after you'. The council was fifth overall; However, when it came to who would pay if you needed to live in in a care home; the Council came third after 'Family' and 'Don't know'.

Prevention featured consistently in responses to how the NHS could save money.

The longer survey attracted a smaller number of people responding but provided a wealth of richer data for system leaders, local decision makers and providers to review. Key messages drawn from this are identified below.

The main services accessed by local people such as acute hospitals, local GPs, dentists and pharmacies were highly rated, with Pharmacies recording the most consistent positive responses overall. The local Community Hospitals at Crowborough and Uckfield were frequently mentioned as a **'valued asset'** to the community.

Not featuring so positively were access to Child Adolescent Mental Health Services (CAMHS), and some Adult mental health services, **especially for** people in crisis.

Adult Social Care received mixed responses, it was either ‘fantastic’ for some, or really disappointing for others. Where people and families had good interactions with social workers, it worked very well.

Communication or movements across geographical borders and different agencies featured quite strongly. This tour covered several geographical or operational borders, so this was not a surprise. For example, we heard in Ticehurst that *carers are opting to register with GPs in Kent because they could access appointments easier and more quickly.*

This report also includes a snapshot of people's experiences in accessing local NHS Dental services and Emergency Dental Services. This work is ongoing but has already identified some key areas where local dental practices can improve the quality of information they provide to patients, *especially those who need to access out of hours dental care.*

Local Pharmacies are identified as a valuable resource to the wider NHS system and Healthwatch can assist in promoting the use of consulting rooms.

According to our early intelligence, we expected to gather more feedback on NHS 999 response times. However, during this tour it did not feature strongly in the feedback we gathered. We did observe, on two occasions in Crowborough and Ticehurst, incidents where NHS 999 services were required. Responses were timely and gave no cause for concern, the care given (as observed) was exemplary. *We suggest that in Ticehurst the location of the Public Access Defibrillator is reviewed, or a second one installed at the village hall/recreation ground.*

A ‘High Weald Listening Tour One Year On’ event will be held in the summer of 2020 to review this report and to report back to local communities what has changed since this report.

All members of the public can share their views and what matters to them about the health and care services that they use at any time by contacting Healthwatch by telephone, email or online. There is no need for anyone to wait for Healthwatch to visit their local area.

Recommendations, learning and good practice

We anonymise peoples’ experiences (and have used other names) before sharing this valuable insight with those who plan, buy and provide local services, as well as with the local communities we visited.

This report does not contain recommendations, instead we invite decision-makers to look closely at the opportunities for learning and ask them to tell us what they will do to make their services work better for local people.

Our report is less about the ‘numbers’ of people we encouraged to share their views and give feedback, it is more about how our system uses the feedback effectively to improve services by making best use of the insight that we generate.

Opportunities for learning

- A lot of effort, time and resources has been spent collecting this insight. How will system leaders allocate equal effort and attention to ensuring it can be used to improve services?
- How will systems leaders act on the rich feedback gathered in this report?
- How do system leaders plan to act on the positive feedback and not just respond to the critical comments?
- How will system leaders ensure that public feedback is not disjointed or stands alone from efforts to improve the quality of care?
- How do system leaders plan to improve the experiences of people accessing services in different geographical boundaries?

Healthwatch East Sussex will invite system leaders to our ‘One Year On’ event in the summer of 2020 to discuss with the public the progress they are making on issues raised on our listening tour and in this report.

3. About the Area

Over two weeks in June 2019, Healthwatch East Sussex visited various locations in the High Weald area of East Sussex. This attractive and largely rural area borders the counties of both Kent and West Sussex.

The area falls within the Wealden District Council borders and is mostly within the High Weald Lewes & Havens Clinical Commissioning Group (CCG) area, with some overlap with the Hastings & Rother CCG area.

The High Weald area has a large number of elderly residents who enjoy relatively good health outcomes and life expectancy compared to other parts of the county and indeed the rest of the UK.

However, according to Public Health records, residents in the Wealden District ward of Hailsham East have the highest levels of health problems and disabilities in East Sussex at 39% compared to a 21% average across the county.

The High Weald has one of the lowest percentages of households able to access a GP within 15 minutes by public transport and has the lowest percentage of residents accessing East Sussex NHS general dental services.

Emergency admissions for accidents and injuries, and for falls injuries in older people are similar to the rest of the County. The High Weald has one of the lowest percentages of unpaid carers providing 20 hours or more care per week.

Chatty Van on tour

Crowborough was the first town we visited in the High Weald area. It is the largest and highest inland town in East Sussex, set within the High Weald Area of outstanding Natural Beauty and bordering the Ashdown Forest. Crowborough is situated just south of Tunbridge Wells on the A26, about halfway between London and the south coast, and can also be reached by train on the Uckfield line from London Bridge.

Our next location, **Heathfield** and surrounding villages also set within the area of outstanding natural beauty standing high on a ridge some 16 miles from the coastal resort of Eastbourne and 17 miles from the historic spa town of Royal Tunbridge Wells in Kent. It includes the villages of Waldron, Cross-in-Hand, Broad Oak, Old Heathfield and Punnetts Town.

Wadhurst lies 6 miles south east of Tunbridge Wells, and is popular with commuters. It has a busy High Street with good local amenities. At one time it was of great importance as a hub of the Wealden Iron Industry.

We also visited a number of smaller villages across the area with our Chatty Van, including Burwash, Burwash Common, Forest Row, Eridge, Groombridge, Rotherfield and Ticehurst.

4. Transect Walks



A familiar part of our pre engagement activity is Community Observation Walks - following the **Transect Walk** principles.



Groups of people including staff, volunteers, professionals and local people come together to plan a route within key towns or villages where the activity is taking place to:

- observe where people go formally and informally to meet up
- how the community communicates, for example through posters advertising general health and wellbeing events and groups that bring people together
- identify areas of deprivation where people's voices may be less heard



For this Listening Tour, **Crowborough** and **Mayfield** locations were randomly selected for our pre-tour walks.

Crowborough



In Crowborough two routes were identified; a short town centre route taking in the Leisure Centre and a longer hike to include Jarvis Brook which is of particular interest because of:

- Proximity to Main line railway station
- Areas of deprivation
- Levels of social housing and higher levels of street crime compared to the more affluent areas of Crowborough around The Warren.
- Jarvis Brook <https://www.ilivehere.co.uk/crime-statistics-east-sussex-jarvis-brook.html>
- The Warren: <https://www.streetcheck.co.uk/crime/tn61ub>

On the shorter town walk, lots of activity and footfall was observed at the Leisure Centre site, from not only people accessing the Centre itself, but the surrounding amenities including outside gym, running track, dog walks and playing field. All observed good footfall and local people willing to engage in conversation.

There was lots of community information leaflets including:

- Fire Safety Checks
- CPR in the community
- Walking football



In the High Street itself, the group made contact with a local information shop for young people 11 - 25 years 'Clued UP' see link [here](#) A key resource offering town centre based drop-in facility, support in a non-school environment and Healthy living advice.

Local Pharmacist Beacon Pharmacy, Boots and CP Chappell were visited to promote HWES information and raise awareness of consulting rooms for day to day medical advice. See link to [Four things your pharmacist can help you with](#)

Our start and finishing location was [The Community Centre](#), in Pine Grove, this group spent time reviewing the wealth of information available on site as part of their activity.

On the longer walk to Jarvis Brook, there were lots of residential streets leading off the main access road. This was one long straight road (B2100 Crowborough Hill) described by one member of the group:

'Big Houses - No people!'

Other recorded observations:

- the Police Station looked '*run down*' and opening times were not readable
- some Bus Stops were not clearly marked and not all had shelters or bus times
- Observers recorded '*Poor Air Quality*' due to the high volume of traffic
- Some care homes were observed on route, mostly of good appearance

This is not a route many local residents would walk regularly. However, there is a Junior School closer to Crowborough Town and a Dental and GP Practice in Jarvis Brook itself, so there would be footfall generated at certain times of the day.

The area is serviced by a small Sainsburys Local, a community hall and charity shops. There are also a small number of independent shops and services such as furniture, Jarvis Brew and Bikegoo.

There is also (*not visited on this route*) a further Dental practice located in the industrial estate passed the station.

The railway station has main line access to London Bridge Station and Uckfield. This provided us with opportunities to engage with working-age commuters during the Listening Tour.

Mayfield



Mayfield is a historic, pretty and rural village in the heart of the North Weald. The starting point was the Community Centre, where the Mayfield and Five Ashes Community Services staff (known as MayFacs) are based. They are a very knowledgeable and well-established community resource in the area, through which organisations like Healthwatch can connect with grass roots rural communities.

The village presents as an 'affluent' part of the county. We know from Public Health data the High Weald has one of the lowest percentages of unpaid carers providing 20 hours or more care per week and emergency admissions for accidents and injuries, whilst falls injuries in older people are similar to the rest of the county.

Reported crime levels up to September 2019 would appear high (when viewed over the year), however, 81% of crime levels in this area resulted in no further action. https://www.police.uk/sussex/EW1NH6/crime/stats/#crime_trend

Two teams set off covering either side of the long High Street, which was the main focus of the Observation. Off the main High Street there are lots of narrow residential **streets** and a car park.

The Pink Cabbage café was a busy 'meeting point' for locals, mostly women at the time of our visit. However, it was very inaccessible if you have issues with mobility or are a wheelchair user.

The Pharmacy had out of date posters on display, there were other posters for stress and anxiety but no out of hours information. We observed lots of steps, potential risk of falls and the group witnessed one resident lose their footing coming out of the pharmacy.

On the opposite side of the road, there was a local convenience store, MACE, and a thriving pub, The Middle House, as well as evidence of an active Women's Institute group in the village.

Other local groups and societies included:

- Scouts and Guides HQ
- Mayfield Festival Choir
- Mayfield History Society
- Mayfield Bonfire Society
- Mid-week youth club
- Mayfield Parish council

Other observation points

Some bus stops were only accessible by steps. The main road is narrow and becomes easily congested with limited passing places. It was St George's Day and the flag of St George was raised. A Healthwatch East Sussex Poster was spotted raising awareness of the NHS Long Term Plan.

Those taking part in the activity included:

- Healthwatch East Sussex staff
- Clinical Commissioning Group (CCG) Project Officer
- Engagement Manager from the Sustainability and Transformation Partnership (STP)
- Healthwatch East Sussex volunteers
- Interested local residents

Total Observers: 8 (All but one observer participated in both activities, a new observer joined the afternoon activity in Mayfield).

Conclusions

Community Observation Walks provide valuable insight into local communities, seen through different lenses. A local resident will observe things in their village or town differently to that of an officer from a Clinical Commissioning Group (CCG) or a resident living in a different town or village.

Collectively, the insight gathered and reviewed enables HWES to plan and prepare for targeted engagement and outreach opportunities to gather views from people whose voices it usually does not hear. This is not necessarily because they encounter any barriers to sharing their views, more simply because they are going about their daily lives and it is not a priority for them.

5. Crunching the Numbers

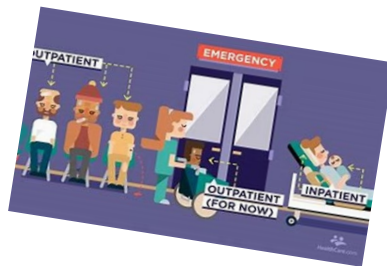
During this tour we reached over 10,000 people through:

- Providing our messages to over 9,000 via social media and other forms of digital engagement.
- Having face-to-face conversations with 994 people, people including 460 people that accepted Healthwatch information but could not stay and chat.
- Our engagement team attended 23 different events across 16 different locations.
- We visited 7 local NHS Dental Practices and 4 Community Pharmacies (Wadhurst, two in Crowborough and Heathfield).
- Our Chatty Van travelled over 1,000 miles around the High Weald area promoting Healthwatch East Sussex.

6. We Listened to the views of

- 407 local people who completed our mini and more detailed surveys.
- 460 people were engaged, but who were too busy to complete the survey.
- 62 people when we visited several dental practices in the area.
- 41 people through collaboration with [Action in rural Sussex](#) (AirS), as an additional outreach project.
- 4 Community Pharmacists were visited.

TOTAL 994 people face-to-face



7. Working with Partner involvement

Promoting the tour

We were delighted to work with a diverse range of **twenty-five partners** including statutory organisations such as East Sussex County Council staff (including Policy Development Officers, Adult Social Care Safeguarding team,) local Voluntary & Community Sector groups and private sector businesses.

Our particular thanks go to Wealden District Council for their support arranging parking for the Chatty Van.

Partners engaged with and promoted Healthwatch East Sussex materials via their own media as well as directly to their service users or customers.



Examples of partner involvement during the tour:

- Taking part in person at our Chatty Van events - engaging members of the public with questionnaires, promoting Healthwatch functions.
- Committed to hosting Healthwatch feedback pods and distributing questionnaires/surveys to their service users.
- Offering their community or public space for Healthwatch information and display stands.
- Allowing Healthwatch to post information and notices on their private Community Facebook groups.
- Offering to share Healthwatch notices via their own social media channels.
- Inviting Healthwatch to meet and listen to service users at their own venues or regular events
- Publishing Listening Tour information and how to get involved in their own newsletters for the communities they serve.



Partner List High Weald Listening Tour 2019

- Wealden District Council
- Parish Councils: Withyham, Mayfield
- Ditch the Slippers (Crowborough & surrounding villages)
- Care for the Carers
- seAp
- Crowborough Leisure Centre
- Sainsburys Heathfield
- Waitrose Heathfield
- Memory Moments (Ticehurst & Crowborough)
- Heatherview Care Home (Crowborough)
- Wadhurst Manor Care Home
- Locality Link workers
- HWLH CCG
- Crowborough Community Centre
- Clued up info (Crowborough)
- Mayfacs (Mayfield & Five Ashes Community Services)
- Beacon Academy Secondary School, Crowborough
- Ashdown Primary School, Crowborough

- Groombridge pre-school
- Carillon Cottage (Wadhurst)
- 4 local community Facebook groups (Withyham, Wadhurst, Mayfield, Groombridge)
- Action in rural Sussex

Total = 25

Also:

- 7 Dental Practices - Riverview, Crowborough Dental, Mermaid Dental, Heathfield, Oak Lodge, Lantern House, Mayfield Dental Centre.
- 4 Community Pharmacies (in Crowborough, Ticehurst and Heathfield)
- East Sussex Fire and Rescue Service (meeting rooms, engagement by operational staff)
- Crowborough Foodbank & Wealden CAB (contact but no direct engagement)
- Active in Recovery (Engaged but group lost funding & closed before tour began)
- Age Concern Heathfield
- Transect walks participants - Total of 8 participants took part in both activities.

Total = 24

Action in rural Sussex (AirS) - AirS were commissioned to help us deliver a programme of additional outreach in areas of the High Weald where people may not normally come across Healthwatch East Sussex. AirS were able to distribute material and complete listening tour surveys in a range of places, including local voluntary groups and businesses.

The areas AirS covered were:

- Stonegate
- Burwash
- Burwash Common
- Nutley
- Frant
- Hartfield

A total of **41 completed mini surveys** were returned from this outreach. The analysis is included in our main findings. From all this engagement, the use of 'Chatty Van' and undertaking leaflet drops in residential areas we have been able to raise awareness and the profile of HWES, plus increase our contacts.

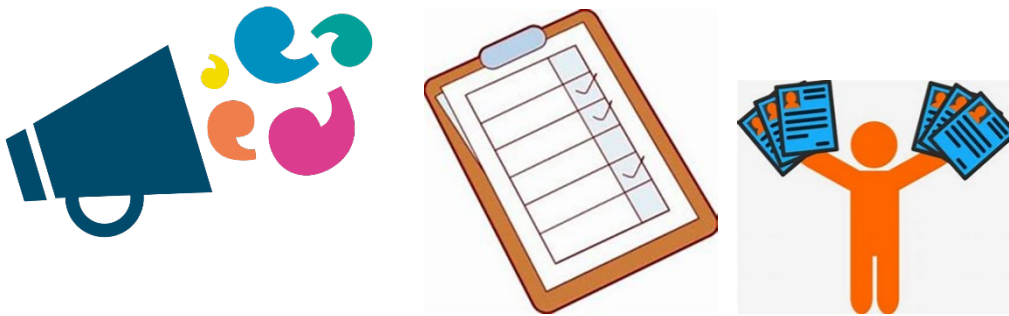
We received positive feedback from local people commenting they had seen ‘Chatty Van’ around. Lots of people, when Chatty Van was parked up were naturally inquisitive and came over to find out [‘What is Healthwatch?’](#)

8. Our Findings - Responses to the mini survey

How did people share their feedback with us?

We asked people to complete a short mini survey relating to the NHS and Adult Social Care (ASC) or spend more time to complete a longer survey about their experiences using services or those of the person they cared for.

365 people completed our Mini Survey. Not every respondent answered every question.



(See our mini survey questions in Appendix 1)

Top responses were identified from analysing key words people used.

When asked ‘What is the best thing about the NHS?’

#1 IT’S FREE!



The most common response identified by **117 people (31%)** included ‘**Free at the point of entry**’ or similar references i.e. ‘you do not have to pay’.

Some of the comments received were of peoples overwhelming gratitude for the NHS; that we are fortunate to have the NHS and that it is available to all. Seven individuals spoke about how the NHS ‘saved their life’.



#2 ACCESSIBLE TO ALL

61 (16.3%) people used various words to describe 'Access to the NHS' including:

- Always there at the point of need (11)
- Accessible (15)
- Always there for everyone (11)
- There in a crisis (14)
- Range of services available (7)
- Seen at the point of need (3)

Key words that particularly stood out in this section, included how reassured people were to know that in an emergency, if they fall seriously ill or are in a crisis, they would receive a great service! (Physical health care).

#3 DEDICATED STAFF

- **41 people (11%)** said 'The Staff' all received very positive praise; plus
- **18 people (5%)** specifically mentioned great GP's in the area.

#4 QUALITY OF SERVICE

- **22 people (6%)** referenced the quality of care and treatment, plus
- **15 people (4.1%)** mentioned brilliant local NHS services at Crowborough & Uckfield hospitals; and;
- **14 people (3.8%)** specifically mentioned positively the care they received at Tunbridge Wells Hospital at Pembury.

#5 NOTHING!

- **10 people (2.75%)** used this section to feedback that 'Nothing' was good about the NHS.

When asked 'What's the worst thing about the NHS?'

#1. WAITING TIMES



92 people (24.5%) listed 'waiting times generally' plus a further...

- **19 people (5.1%)** mentioned waiting times to see a GP
- **19 people (5.1%)** mentioned 'Lack of GP appointments available'
- **13 people (3.5%)** listed long waits for referrals to hospital, with 5 mentioning 'long lists' to see a Consultant; and
- **7 people (1.9%)** identified long waits in A&E specifically.



#2. UNDERFUNDED



- **34 people (9.3%)** described 'lack of funding', 'failed' and 'let down'

#3. UNDERSTAFFED



- **23 people (6.1%)** mentioned more staff were needed with an equal split between Doctors and Nurses.
- **16 people (4.3%)** referenced how busy the NHS is, pressures and overstretched staff.

#4. LACK OF COMMUNICATION/INFORMATION



- **16 people (4.3%)** listed lack of communication and information
- **10 people (2.7%)** mentioned poor administration
- **5 people (1.3%)** mentioned difficulty entering 'the system' if you live in another county
- **5 people (1.3%)** listed repeatedly cancelled appointments
- **5 people (1.3%)** mentioned that it was a 'complicated system'

#5. NOTHING NEGATIVE TO SAY!!!!

- **14 people (3.8%)** said they had nothing negative to say!

An interesting point for commissioners and providers is that poor quality of care featured very low in people's perception of the worst aspects of the NHS with only one comment on poor quality of care!

...being discharged too early due to pressure on beds and nurses.

This affects the quality of care

Hovering just below the Top Five...

Several comments around:

Too political, bureaucratic, target driven and wastes money (including highly paid managers!); and

People's perceptions that the NHS is exploited, overused, overuse of medication, open to abuse i.e. people not turning up for appointments, taken for granted, available to all including people who have not made any financial contributions.

What one change would improve the NHS?

Again, lots of individual suggestions were gathered, the **Top Five** responses in this section according to how often key words were recorded included:

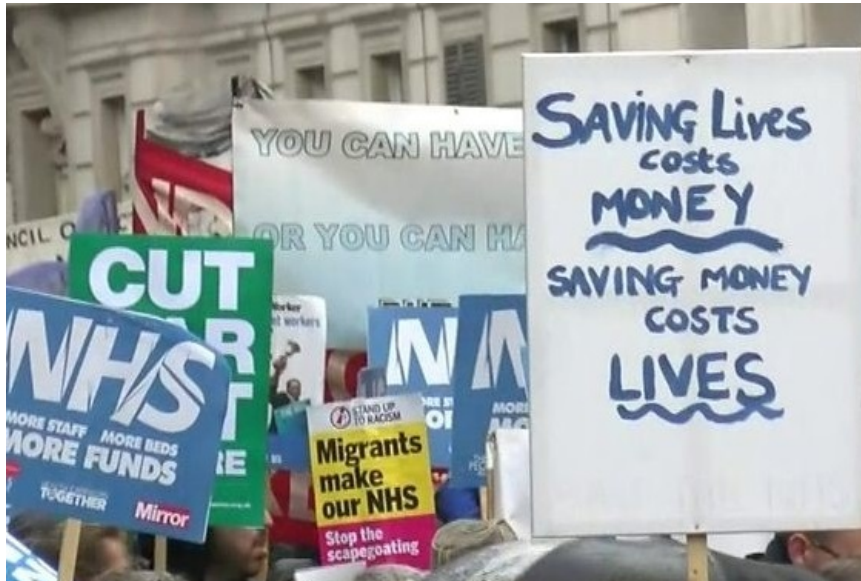
#1. MORE STAFF

An equal split between Doctors, Nurses and Healthcare Assistants.



- Linked to this was to value NHS staff more, with 16 responses and better staff training for Doctors and Nurses, 6 responses.
- **19 people (5.1%)** also suggested the NHS could cut down on administrators and highly paid managers to fund more frontline staff; adding that those 'managing', should manage more efficiently!

#2. JOINT TOP WITH MORE FUNDING



- There were additional references to funding for more/better equipment provided by **5 people (1.3%)**, with suggestions that increases in funding should be allocated to provide more frontline staff.

#3. IMPROVE ACCESS TO GPs

24 people (6.4%) suggested the NHS should improve access to GPs

Comments included:

GPs should open more at weekends

GPs should have longer time to spend with patients

Longer GP opening hours to prevent people having to go to A&E

More prevention centres/hubs

Reduce waiting times to see a GP

Linked to this, the NHS should introduce a charging system for GP and some hospital attendances.

- **16 people (4.3%)** suggested that a charging system should be introduced
- a further **8 people (2.1%)** suggested the government should increase Income Tax and National Insurances contributions to provide additional funding for the NHS.

#4. IMPROVE COMMUNICATION

- **8 people (2.1%)** suggested improving communication within NHS systems would make a significant improvement
- a further **8 people (2.1%)** went on to say more communication with local councils and joining up of services will also bring about improvements.



#5. IMPROVE EFFICIENCY

- **12 people (3.2%)** suggested the NHS could work more efficiently, especially in A & E departments and accessing appointments.
- Linked to improving A & E services, **8 people (2.1%)** suggested the misuse of A & E departments by some patients should be addressed and that a charging system should be introduced to discourage people misusing the service.

Adult Social Care

Questions about Adult Social Care services were also asked in the same mini survey, with the following responses being received:

Q.1 If you or someone you care for become frail or disabled, who would look after you?

Family	Friends	NHS	Council	Nobody	Other	Don't Know	Total
207	31	53	21	9	7	37	365
57%	8%	14%	6%	2%	2%	10%	

Q.2 Who would pay if you needed to live in a care home?

Family	Friends	NHS	Council	Nobody	Other	Don't Know	
119	1	25	42	5	39*	62	293
41%	0%	9%	14%	2%	13%	21%	

* most common response here was 'myself'

Q.3 - What one change would help you live at home for as long as possible?

14 people (3.8%) responding commented in this section

Live healthier when I was younger - less alcohol.

Having someone to come and assist/visit to ensure I was safe and taken care of properly.

Better access to medical services to prevent conditions occurring.

More support for rural doctors in rural areas.

Someone to look after me.

More investment in social services.

9. Our Findings - Responses to the Rural Survey

A total of 42 people completed the full Listening Tour survey. (See Appendix 3)

- 11 (26%) of people said they care for a family member or friend and 5 (12%) said the cared for person was an adult.
- All but four people lived in the rural Listening Tour area.
- 42 (100%) of people were registered with a GP; and 34 (94%) individuals had access to an NHS Dentist.

When asked ‘Have you used local health and care services in the past six months?’

- 34 people (81%) said Yes
- 2 individual’s (5%) said No
- 6 people (14%) provided no response.

When asked which local services you have you used?*

- 31 people (74% of respondents) identified their Local GP
- 23 people (55% of respondents) indicated their Local Pharmacy
- 22 people (52% of respondents) indicated their Local Dentist
- 12 people (29% of respondents) indicated Acute hospitals, such as outpatients' departments, Clinics and A&E.

** Please note, respondents were able to provide more than one answer.*

When asked if you know where your local Minor Injuries Unit is located?

- 29 people 69%% said Yes. Of these:
 - 13 said Crowborough
 - 12 said Uckfield
 - 2 said Lewes Victoria Hospital
 - 2 said East Grinstead
- 4 people (9.5%) said No
- 3 people (7.1%) said they did not know what a minor injuries unit was.
- 6 people (14.3%) did not complete the question

Some respondents gave more than one answer. There is a good local knowledge of community hospitals.

When asked which acute hospital you use?

- 10 visits to Eastbourne District General Hospital (EDGH), some returning patients
- 5 visits to the Conquest Hospital in Hastings, including 1 at the Maternity Unit
- 2 visits to Tunbridge Wells Hospital at Maidstone
- 1 visit to the William Harvey Hospital, Ashford
- 1 visit to the Princess Royal Hospital in Haywards Heath
- 1 visit Uckfield Community Hospital

Only 3 people reported use of Adult Social Care services, such as social work, occupational therapy or home care and a further 3 people listed *Adult Mental Health Services*. Those accessing Adult mental health services did so in Eastbourne, Uckfield and Crowborough Hospitals.

We asked if you find it easy to access the information and advice you need about health and care services?

- 9 people (21%) Strongly Agreed
- 16 people (38%) Agreed
- 4 people (10%) Disagreed
- 2 people (5%) Strongly Disagreed

Example responses:

Referred by GP - worked smoothly.

Usual scenario of difficulty in getting to see preferred GP.

Dental Problem over a Bank Holiday, unable to travel and no telephone service available...

Mostly trying to get support and help for my daughter who has on-going mental health issues - it has been appalling.

Initial difficulty to access Mental Health Services in East Sussex via GP as our post code is in Kent.

These responses largely represent the people we engaged with during the Listening Tour. They are quite well informed about services in their local community, are engaging well with Health services, with only a small number engaging with mental health services and even smaller number with Adult Social Care (ASC) services.

Over half of the people said they regularly used dental services in the area. During the Listening Tour Healthwatch East Sussex visited seven dental practices providing NHS treatment to understand more about people's experiences accessing NHS dentist

treatment. Research prior to the tour indicated people have mixed experiences not only accessing treatment but when they attend, they sometimes receive poor quality of care. Appendix 2 in this report summarises what we learnt when we visited local practices.

Local pharmacies were also used. Examples indicated that local people used pharmacies for clinical advice as well as for medication. Four local pharmacies were visited to encourage pharmacists to display posters about HWES and to promote the use of consulting rooms.

Interestingly in this section people spoke about accessing acute services at Eastbourne District General Hospital and the Conquest Hospital in Hastings. This was identified by 15 (35%) of the 42 respondents. This is surprising as High Weald Lewes Haven area patients are traditionally thought to access services in Brighton, Haywards Heath and Tunbridge Wells.

The next section of the survey looked at:

a) Are you able to access the right care and support?

- 10 people (24%) Strongly Agreed
- 9 people (21%) Agreed
- 5 people (12%) neither Agreed or Disagreed
- 5 people (12%) Disagreed
- 2 people (5%) Strongly Disagreed
- 2 people (5%) Not applicable.
- 9 people (21%) provided no response.

Some comments:

ASC [Adult Social Care] has been fantastic helping me get support for my Granddad at home with occupational therapy.

CAMH a nightmare to access and virtually impossible! Health in Mind unable to offer basic counselling for anxiety and passed me to paid services I cannot afford.

Mental health issues seriously lacking financial and care support (and medical issues). If my family hadn't been here to support my child, I honestly think they wouldn't be here today!

b) Do you feel you have a choice over which health and care services you use?

- 5 people (12%) Strongly Agreed
- 5 people (12%) Agreed
- 11 people (26%) Neither Agreed nor Disagreed
- 2 people (5%) Strongly Disagreed
- 2 people (5%) Not Applicable)17 (40%) people did not complete the question

Comments:

Not always a choice available.

It's a take it or leave it situation in health.

The Dentist is NHS which I chose.

Choice over Pembury or East Grinstead, no choice over GP.

c) When you contact services, do they know who you are?

- 5 people 12% Strongly Agreed
- 8 people 19% Agreed
- 8 people 19% Neither Agree nor Disagreed
- 3 people 7% Disagree
- 6 people 14% Strongly Disagree
- 1 person 2% responded that it was 'Not Applicable'
- 11 people (26%) did not complete the question

Comments:

Give up with this one because no one listens anyway.

Depends on who answers the phone.

I see the same GP and Dentist each time.

In A&E they accessed record immediately.

My husband's story is complex, I always have to tell it for him despite referral letters.

The survey went on to ask people to think about the services they had used in the last six months and how satisfied they had been with the services they used.

The most frequently used services were

Local GP

- 15 people (36%) were Very Satisfied
- 10 people (24%) were Satisfied.
- 2 people (5%) were neither Satisfied nor Dissatisfied
- 1 person (2%) was Dissatisfied
- 1 person (2%) was Very Dissatisfied
- 13 people (31%) did not complete the question

Local Dentist

- 13 people (31%) were Very Satisfied
- 6 people (14%) were Satisfied
- 2 people (5%) were Neither Satisfied nor Dissatisfied
- 21 people (50%) did not complete the question

Local Pharmacy

- 13 people (31%) were Very Satisfied
- 9 people (21%) were Satisfied
- 20 people (48%) did not complete the question

Acute hospitals such as outpatients, clinics and A&E

- 4 people (10%) were Very Satisfied
- 6 people (14%) were Satisfied
- 1 person (2%) was neither Satisfied nor Dissatisfied
- 1 person (2%) was Dissatisfied
- 30 people (71%) did not complete the question

Lesser used services

Responses in this section were either very low or received no responses. There was some response received on Adult Social Care, Community Services, Adult Mental Health Services and Home-Based Services.

Those services that received no responses included Children's Services, Child and Adolescent Mental Health services (CAMHs) and services provided by Voluntary and Community Sector (VCS) organisations.

However, the insight gathered from comments people gave are of interest and include:

Local pharmacist very good for advice on medication and have time.

Medics seem more interested in the test results than how my husband is coping.

Feel like I get nowhere fast either for myself or child(ren), feel like you aren't listened to and the services aren't available.

Need better communication/understanding between services about who can do what? GP referred me to A&E for mental health, they referred [back] to GP, who then sent me back to mental health team.

What worked well for you and why?

Dental and Pharmacy are punctual, polite, available and professional.

Written information from local pharmacists informative, helpful, detailed and staff very efficient.

My GP is excellent but almost impossible to get an appointment, Horder Centre very good for exercise class for joint pain.

Did not have to wait too long for appointments at the hospital.

Our Practice is well run with regular GPs.

Having all the information in one place was very helpful.

Triage Nurse cut down time factor - seen very quickly. Receptionist could access electronic info instantly.

After care post heart surgery.

The A&E assessments were expertly done, the care on the ward at the Conquest was very competent, my mother was quite cheerful as a result.

I work in the NHS, I have massive insight, but I deal with lots of people who get left behind...

Not everyone who shared comments named the service specifically therefore these responses cannot be individually attributed to a service.

What would you want to change and why?

Nothing until I went to Kings College Hospital and experienced never having to wait except on one occasion - 10 minutes for a scan. If one very busy hospital can do this, why can't they all?

Larger premises for the Practice so more services could be offered locally.

Where do I start...GPs and doctors and consultants' attitudes!

To be able to book a longer appointment if there is more than one problem

Would like a modern combined Medical Centre in Mayfield.

Mental Health needs a complete overhaul, when people leave hospital there should be support and help for them to get their lives back together, this does not happen, to be honest it's a disgrace!

The ability for patients to get appointments more easily.

Level and accuracy of information could be improved (Maidstone hospital).

Dental costs too high.

GP appointment system, better access for people on low income who can't afford computer/on-line have to travel (costly) and manage health and disabilities'.

Don't overbook clinics.

10. Feeling a part of your community

Our Listening Tour methodology includes reaching deeper into local communities to ask people if they feel part of their community, whether they can influence decisions that affect the local community, and can they make positive changes.

This is what people said:

Do you feel part of your community?

- 13 people (31%) Strongly Agreed
- 10 people (24%) Agreed
- 8 people (19%) neither Agree nor Disagree
- 4 people (10%) Disagree and
- 1 person (2%) Strongly Disagree.
- 0 people (0%) felt that the question was not applicable
- 5 people (12%) did not complete the question

A selection of reasons people gave for feeling part of their community:

Facebook groups such as Heathfield Community Group allow my generation to keep in touch with everyone.

Groombridge has a strong community ethos.

My health and disability make it hard for me to engage.

Small friendly village - Cousley Wood, large friendly village, Wadhurst, I also volunteer which helps integrate into village life.

Sense of neighbourliness - informal meetings with neighbours, exchange veg, cycle rides chit chat.

I don't feel able to get involved with the local community.

It is important to consider that a number of people responding are actively involved in their community and declared they were Parish and District Councillors, active members of their Patient Participation Group (PPG) at their GP surgery and/or involved with other groups and societies locally.

There are untold numbers that are not actively engaged and experience isolation and loneliness and whose voices we rarely hear, as one person said:

‘My health and disability make it hard for me to engage’.

11. Influencing your community

I can influence decisions that affect the local community

- 3 people (7%) Strongly Agreed
- 13 people (31%) Agree
- 14 people (33%) neither Agree nor Disagree
- 3 people (7%) Disagree
- 2 people (5%) Strongly Disagree
- 1 person (2%) felt that the question was not applicable
- 6 people (14%) did not complete the question

Comments included:

I keep at it but not sure I am listened to.

Yes, via Facebook Community Groups.

'In a small way to help people.

The local Parish Council is very active.

I am given the opportunity by the Parish Council and I am on the committees of several local organisations.

Can people make positive changes when they are involved in their local community?

- 7 people (17%) Strongly Agreed,
- 18 people (43%) Agreed
- 7 people (17%) neither Agree nor Disagree
- 2 people (5%) Disagree and
- 1 person (2%) Strongly Disagree.
- 1 person (2%) felt that the question was not applicable
- 6 people (14%) did not complete the question

Some of your views included:

It is always a struggle with authority and stagnation. I have been involved in community projects such as fundraising for local youth centre and medical transport service, very worthwhile.

The community I live in seriously affects me and my children's holistic wellbeing and safety and I need to get moved asap.

Burwash is a community where many people actively support as much as they can.

Problem is not enough people do things, lots of talking, but only a few do things.

Yes, but it depends on the area of influence.

12. Our Findings - Carers responses to the rural survey

A total of 11 people declared they care for a family member or friend

Those responding on behalf of the person they cared for provided the following insight:

The cared people reside in the following towns and villages:

Crowborough (3), Uckfield/Hailsham/Alfriston (3) Heathfield (1) Kingston (1) Polegate (1) Rottingdean (1) and Groombridge (1)

- 10 people (91%) of the cared for people were registered with a GP.
- 7 people (64%) of the cared for people were registered with a Dentist.
- 9 people (82%) knew where their local Minor Injuries Unit is.
- 10 people (91%) said the cared for person had used health and care services in the last six months.

How long do you spend each week supporting the cared for person (unpaid)?

- 4 people (36%) identified Between 1 and 19 hours a week
- 2 people (18%) identified Between 20 and 49 hours per week
- 2 people (18%) identified 50 or more hours per week
- 3 people (27%) did not complete the question

Which services have you used in the last six months?*

- 10 people (91%) indicated a Local GP
- 9 people (82%) indicated a Local Pharmacy
- 5 people (45%) indicated Acute hospitals
- 4 people (36%) Adult Mental Health Services
- 4 people (36%) provided 'Other' responses (Community Nurses, MIU, Adult Social Care, CAMHs, Eastbourne District General Hospital)

** Please note, respondents were able to provide more than one answer.*

How frequently have you visited services in the last six months?

- 5 people identified Local GP between 2 and 6 visits
- EDGH (1), Crowborough hospital (1) between 1 and 4 visits
- Local Dentist (3 responses) between 1 and 2 visits
- Local Pharmacy (4 responses) up to 6 visits
- Out of area Pharmacy (2 responses) Lewes and Brighton

Services including Community Support, Adult Social Care, Adult mental health services and services provided by the voluntary and charity sector all received one response. A carer had visited a voluntary sector service on 24 occasions and was very appreciative of this service (not named).

Is it easy to access the information and advice you need on services for the person you support?

Comments

A first-class GP who believes in prevention rather than cure.

Every location we visit has professionals who provide excellent advice.

Things have improved enormously since my relative moved into residential care. Prior to that it was very difficult to get the help we needed.

ASC are a waste of space - arrogant, rude, disinterested and you have to know your stuff to get them to actually do anything!

When I contact services on behalf of the person I look after, they know who we are and I don't have to repeat our story:

- 4 people (36%) Strongly agree
- 1 person (9%) Neither Agrees nor Disagrees
- 4 people (36%) Disagree
- 1 person (9%) Strongly Disagrees
- 1 person (9%) did not complete the question

Comments

Doctors are familiar with the case, not always care services.

A nice thought but not in my experience.

GP surgery/pharmacy/minor injuries have all been easy to reach.

Depends who answers the phone, they change a lot.

Satisfactions levels

People were mostly satisfied or very satisfied with services used in the last six months at GPs, Dentist, Acute Hospitals, and local pharmacies received consistently the most positive responses from a low response rate to the following questions:

What worked well for the person you care for and why?

Local aspect is great, very accessible at all times of the week (minor injuries) Pharmacy open late once a week, never had trouble obtaining meds/advice.

Nothing apart from my GP.

Local volunteer/care group give a structure to the day and association.

Eventually got all the meds and care needed (91 in October), but it took 2 years of hard work and stress. After a spell in hospital in April 2018 we finally got a social worker who understood and really helped getting full time care!

Doing it myself and nor relying on 'services' to 'help'. Ease of access.

What worked well for you as a carer and why?

All appointments and advice have worked well.

Knowing my stuff (i.e. the law, local policy) and putting my foot down - in writing and copying in MP's etc.

Nothing except the help and support from a family member!

It wasn't until we had a good social worker that the process worked! Prior to that trying to work with the NHS, carers, local government was really difficult - and we are a well-educated family!

What people said they would want to change and why?

More help in mental health crisis as I feel very vulnerable.

Accessible services, people who give a damn - genuinely - not jaded, tired, dismissive people. More funding for many of these stretched services.

A more detailed example:

More involvement for social services and social workers. We had one at the beginning when my elderly parent was first diagnosed with Parkinson's, but it took months to arrange care! When they became worse and was in hospital a year later everything changed. Also, they were in hospital in Brighton, lived in East Sussex (close to Brighton Border) and there was confusion under which Local Authority they came under. It was not until we self-funded respite care in Ringmer, that we got anyone's attention, it was a very difficult time indeed!

Whilst this part of the survey generated a low volume of returns, a few people used the opportunity to share their frustrations about experiences they encounter trying to get the right level of support for the people they care for, often describing disjointed pathways, struggles and stresses and the value and benefit of experienced social workers to easing those frustrations for carers. Therefore, HWES will use the insight (not the numbers) to achieve greater influence in service planning on behalf of local people.

HWES listens to all comments, comment journeys can be followed at [‘Every Comment Counts’](#). There are learning opportunities for system leaders, decision makers and providers in these powerful comments. Recent studies of how hospitals collect and use feedback show that while thousands of patients give hospitals their comments, their reports are often reduced to simple numbers. Part of our role as local Healthwatch is to ensure patient, carer and public comments are listened to.

Feeling part of your community and influencing your community - on behalf of the person you care for...

The person I support feels part of the community and they feel able to influence their community. The responses are low (11 respondents). Most disagreed with statements in the survey, but there was a mixture of positive and negative comments, including

Comments

Going to dementia groups are a big help, volunteers are excellent.

Always listened to and offered good advice from friendly helpful professional.

Loved one lives in a nursing home and family members visit every day . I’m sure I could join a community group or attend Council meetings, but I have no time!

Do you have to pay a financial contribution towards help with daily living needs for someone you support? Five respondents said Yes and five did not know.

If the person being cared for needed extra support, most respondents said they would get more information about costs from ESCC or the internet. DWP and Care for the Carers were also mentioned.

13. Our Findings - Additional feedback gathered

For people who did not want to take part in our survey, but wanted to share a view, our 'Speak Out/Your Voice Counts' leaflets were offered. They can be completed anonymously if people wish and they have a 'Freepost' return address pre-printed. These leaflets are readily available in the community, in GP Practices and most hospitals.

A Total of 13 'Speak Out/Your Voice Counts' leaflets were completed with the following feedback:

Never get to see the same Doctor twice, notice up saying you will get a named GP but doesn't happen.

Never had an NHS Dentist, always paid!

Would like a bit more communication with the District Nurse.

Moved GP to over the border in Kent as its easier to get an appointment (shorter waiting times) Plus there is a pharmacy in the practice, as a carer I need access to timely GP appointments' (formally with practice in Wadhurst).

Mermaid Dental Service - Excellent!

Blood test for statins has to be booked 3 months in advance (Saxonbury).

Kent and Sussex should work better together given where hospitals are located

3hrs for SECAmb to respond - you call Kent NHS 999, sometimes Fire Service turn up as Ambulance Trust has no capacity to respond and patient is deteriorating.

Obstetrics at Princess Royal Hospital (PRH) noticeable decline in after care (and delivery) over life of 4 children in 10 years.

I went to visit my elderly mother in hospital (Pembury) but was told I had to wait 3 hours until visiting started, I live 1.5 hours away it isn't fair.

Very Good service from GP - Ashdown Medical Centre' (aged 84 years).

Beacon Surgery staff rude (i.e. Reception not GP) - changed practice as a result.

Appts system at Pembury - keep losing information, been waiting 9 months, was told I didn't turn up - I was sitting in the waiting area, given appt for November now, should have been June!

Forest Row Medical Centre used to be excellent - now failing in my view, difficult to get same day appointments, usual tactics don't work - call in, ring etc. Had fall in last 2 years was sent to Pembury in Kent, long journey.

Poor experience with dentist in Uckfield, in agony for 48 hours with swollen face and infected gums (Wisdom tooth) eventually got an emergency appt, waited 45 mins, saw dentist who was very rude and abrupt - rushing me out of the surgery! As an emergency patient knew I was in pain, should have been more sympathetic, examination over in 30 seconds, - gum infection, need antibiotics, told to make another appt for a full examination to refer to hospital to remove the wisdom tooth, no pain relief, no info re care given, Paid £22 for appt, £9 for script, back again for another examination £22 No help, NOT VALUE FOR MONEY Poor!

a Dentist in Jarvis Brook left me mid-way through treatment, with my mouth clamped open to check I was in receipt of working tax credits! Unbelievable!

In all our different methods for gathering feedback, there are references to **people's** experiences accessing NHS Dentists. This theme is consistent with our early intelligence gathered from people in Heathfield and Mayfield before the Listening Tour:

- some critical reviews posted on HWES Feedback Centre
- public feedback regarding difficulty in 'registering' with a Dentist; and
- references in the NHS Long Term Plan referring to improvements in oral care services for children (section 3.44 Starting Well Core Initiative), but scant evidence of patient experience in this area.

Given this early intelligence, HWES decided to include in its Listening Tour a programme of planned Enter & View visits to Dental Practices offering NHS treatment in the tour area as a pilot exercise, prior to rolling out a full programme of engagement in 2020.

A summary of the findings associated with this can be found in Appendix 2.

14. Key Findings

- During the two weeks of the Listening Tour in June 2019, Healthwatch East Sussex asked almost a thousand members of the public from the High Weald for their views on the NHS and Adult Social Care services, as well as their experiences of health and care provision more widely. Local health and care professionals, service providers and volunteers were also engaged.
- Pharmacies received the most consistent praise on the quality of the services they provided. This included their roles in providing medication, offering clinical advice and signposting to other health services. The ability to engage with a pharmacist on a 'walk-in' basis or without an appointment was viewed as a particularly positive feature.
- It was clear from meeting people face-to-face and their responses to the surveys that NHS services were greatly valued. Strengths identified were the quality of the care received, the universal access to services and being 'free' at the point of use [excluding dental services].
- Responses to the longer Listening Tour survey¹ indicated that the most commonly used health and social care services were GPs, pharmacies and dentists. Approximately a third of survey respondents had also used an Acute hospital, outpatient department, clinic or A&E.
- Over three-quarters of the long survey respondents indicated that they were satisfied or very satisfied with the Acute Hospital Services, GPs, Dentistry, Pharmacy and Community Services they had accessed over the previous 6 months. The Community Hospitals at both Crowborough and Uckfield were also mentioned as valued community assets.
- Some negative issues related to NHS services were identified through the Listening Tour. These included challenges in obtaining appointments (particularly for GPs) when required, long wait times for procedures or referrals and limited communication, especially between different service providers. Challenges in obtaining timely access to Child Adolescent Mental Health services (CAMHs) and some Adult mental health services were also provided.
- Those engaged in the Listening Tour identified a number of areas in which they felt NHS services could be improved. The most common responses were a desire for more health professionals and additional funding in order to provide a greater number of frontline staff, more equipment and improve facilities. Access to GPs was a key area where improvements were sought. This included expanding the opening hours and

¹ 42 responses were received to the long Listening Tour survey 2019.

days on which they operate as well as a preference for longer appointments and shorter waiting times.

- An overwhelming majority of patients at seven dental surgeries in the High Weald and the Emergency Dental Service clinics serving the area were positive about the care they received. This feedback was captured through a combination of surveys, mystery shopper and Enter and View activity.
- Issues raised regarding dentists included a lack of awareness amongst some patients about treatment costs and how these differed, the ability of surgeries to cater for those with disabilities and the provision of spaces in which to hold confidential discussions.
- Also, the information provided by high street practice websites and out of hours phone messages varied significantly, with both potentially being inaccurate and/or difficult to navigate. This may impact on people's ability to access Emergency Dental Services when required. Healthwatch East Sussex would recommend that phone and website information be included in statutory rating of services by the regulators.
- Adult Social Care services received mixed responses, with both negative and positive experiences and examples being identified.
- When asked about future Social Care provision and 'who would look after them or someone they care for if they became frail or disabled?', 'Family' was identified by over half of the respondents (57%) to the short survey², compared to 14% for the NHS and 6% for the Council. A further 10% indicated that they 'Didn't Know'.
- Similarly, 'Family' was also the most common response when asked 'who would pay if people needed to live in a care home?' being identified by 41% of respondents. The next most common responses were the Council (13%), Other (13%), NHS (9%), Nobody (2%) and Friends (0%). Significantly, 21% indicated that they 'Didn't know' who would pay in these circumstances.
- When asked what would help people to live at home for as long as possible, comments largely orientated around better access to medical services to prevent conditions occurring, more support for rural doctors and more support for social services.

² 365 responses were received to the short Listening Tour survey 2019.

15. Contact Details

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Disclaimer

This report relates to findings observed on the specific dates set out in the report. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time.

A final version of this report will be publicly available by March 2020 by publishing it on our website and circulating it to Healthwatch England, CQC, NHS England, Clinical Commissioning Group/s, Overview and Scrutiny Committee/s, and our local authority.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format, please contact us at the address above.

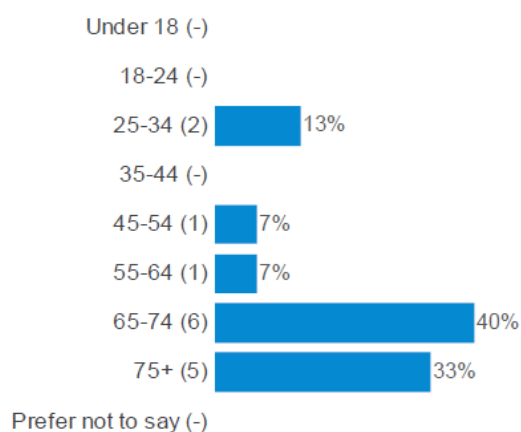
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16. Appendix 1 - Equalities Monitoring

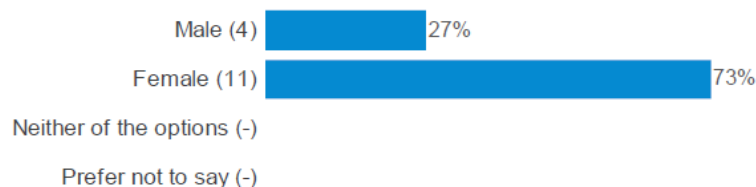
In order to gain feedback from a diverse range of High Weald residents during the Listening Tour, most of our responses were gained through a mini survey which did not record equalities information. However, we successfully spoke to a wide cross-section of the local community through the wide range of venues we used, such as transport hubs, shopping centres, community centres and health facilities.

A total 15 people responded to the equality monitoring form linked to our main survey. Shown below is a section of the highlights of response.

How old are you?



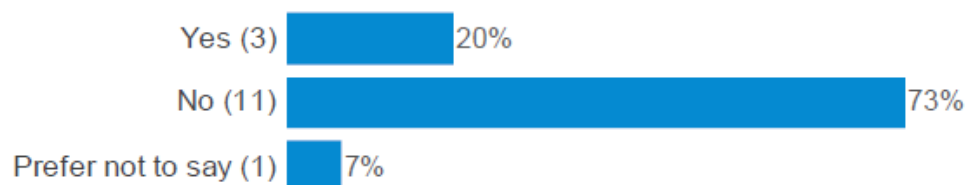
Are you?



93% (14 people) declared their sexuality as 'Heterosexual' with one declaring themselves as 'Gay'

All respondents declared themselves either 'White British' or 'White Irish'.

Do you consider yourself disabled, as set out in the Equality Act 2010?



Where people declared that they did have a disability, one person said that this was a Physical Impairment and the two other respondents said they had a long-standing illness.

Where people were asked about if they felt that there were clear gaps or barriers which made access difficult to access the services that they used, one comment related to accessing mental health support as the main barrier.

Are you a carer or have caring responsibilities which you are not employed for?



17. Appendix 2 - NHS Dental services in the High Weald



This is the first time that Healthwatch East Sussex (HWES) has undertaken Enter & View (E&V) activities at NHS dental practices. The focus of this work was to obtain the views of people who use dental care services about their experience of accessing information and NHS treatment both for routine appointments and out of hours care.

This came about as early intelligence via multiple sources indicated some people in Heathfield and Mayfield shared critical reviews of their experiences:

- The quality of NHS care
- Accessing NHS dentists; and
- Understanding the banding charges (what's available) for [NHS dental treatment](#)

Possible barriers to accessing treatment were also explored such as

- Travel
- Affordability
- Disabled access.

Enter and View visits to NHS Dental services in the High Weald



Eight practices offering NHS treatment were randomly selected, in order to provide geographical spread and representation of both rural and more urban areas of High Weald, and practices that are part of a larger group and independent practices (4 of each).

We included some practices where critical reviews had been left, others with no reviews and the remainder from our Mystery Shop research on the quality of information they provided on their website about accessing NHS dentist services.

A scoping meeting was called with Authorised Representatives (including volunteers with dental expertise) to draw out themes from the feedback and to agree a key line of enquiry (methodology) the visits should follow; which included:

- Availability of NHS dentists in the area
- Availability of Out of Hours emergency dental care in High Weald area
- Ease of registration

- Affordability of NHS Charges
- Prepayment/deposit requirement for appointments
- Physical access to dentists - many practices involves stairs
- Anxiety about receiving dental treatment; and
- Satisfaction levels with treatment received

(Visits to the Emergency Dental Service in Eastbourne took place in August 2019).

The dental practices selected were:

Heathfield

- Heathfield Dental Practice (Colosseum Dental group)
- Oak Lodge Dental Practice (Independent)

Crowborough

- Crowborough Dental Clinic (Colosseum Dental group)
- Mermaid Dental Care (Simply Bright group)
- Ashdown Dental Practice (Independent)

Rural areas

- Forest Row (Dentistry for You group)
- Mayfield Dental Centre (Independent)
- Lantern House Dental Practice, Wadhurst (Independent)

Activities covered by the project were as follows:

- Enter & View activity at each dental practice (one practice declined to take part)
- Enter & View activity at Eastbourne Emergency Dental Service (EDS)
- Mystery shopping of dental practices out of hours voice message
- Mystery shopping of dental practice websites

Pre-visit questionnaires were sent to all dental practice managers. All but one was completed and returned either at the Enter & View visit or beforehand.

Key Findings

Enter and View - High Street Dental Practices

Almost all dental practices engaged positively with the Enter & View activities despite having no previous experience of the process.

- Around 9 in 10 patients were advised to attend for an examination at least once a year and around three-quarters would see the same dentist each time.
- Just over half of respondents understand what is included in each NHS treatment band but only a third of those who did not can recall having this explained to them; this **suggests** the dental team could be more explicit in ensuring patients do understand what is included.
- Almost 9 in 10 patients have treatment options clearly explained to them but not quite two-thirds are given a copy of the treatment plan to take away.
- It is almost a 50:50 split on patients who see a Dental Hygienist.
- An overwhelming **96% are happy** with their NHS treatment.
- Patients aged 35 years and over appear more likely to attend for dental appointments at the times we visited, with the largest group of attendants being aged between 35-44.
- As far as it can be interpreted, data suggests that the average time taken to travel to the appointment was 12 minutes and the average miles travelled to the appointment was 4.3 (this is working on the assumption that where 'less than a mile' was stated, this was taken to equal 0.5 miles for ease).

The Enter & View activities provided a useful snapshot of those who are engaged with their high street dental practice. (4 patients were attending for the first time). However, it provides little insight to those who are not.

Exploring barriers to engagement with dental care needs is an area HWES is keen to pursue in other settings e.g. public spaces, including social media channels.

- For example, affordability of NHS charges as a barrier can only be assessed by engaging with those who are not accessing regular dental care.
- Only one out of 57 respondents indicated that they were exempt from NHS charges which seems surprisingly low. (further data analysis is required)
- This E&V activity has contributed to HWES knowledge of and building links with local dental committees/professional bodies overseeing dental practices.

Emergency Dental Services at Ian Gow House, Eastbourne.

What is the Emergency Dental Service (EDS)?

The Emergency Dental Service is only able to provide temporary dental treatment to assist patients out of pain until they can seek care from a high street dentist. The service operates a strictly by appointment only service, any patient that attend without a telephone appointment will not be seen but asked to contact the clinic by telephone. Appointment lines can become very busy at the start of a session (can be as many as 60 calls queuing!)

During a two-week period in August, Authorised Representatives (ARs) visited the NHS Emergency Dental Service (EDS) located at Ian Gow House in Eastbourne for six sessions. (evenings and at the weekend). Each clinic has six appointment slots available, occasionally seven patients can be seen depending on need).

A total of 36 patients completed our survey just over a quarter had self-referred to the service, finding the details of the service through internet searches.

- 61% had tried to seek alternative help before attending the service i.e. by contacting their own dentist (59%).
- 86% had been experiencing dental problems for up to one week, 69% of patients had access to a regular NHS dentist and 53% attended regular dental check-up appointments (47% were not).

Patients not accessing regular dental treatment listed the following reasons:

- Anxious/uncomfortable 56%, Cost 13% Other 25%;

Some comments why patients not accessing regular dental care included:

- loads horror stories when a teenager of being treated by dentist
- can't get registered; and
- never really had a problem

88% of patients were aware of the charging system for EDS

100% of patients interviewed said their treatment options were fully explained for this visit and 97% of patients felt their problem was dealt with appropriately.

This is important to emphasise given the criteria of what constitutes as a 'dental emergency'.

There were lots of positive comments added feely by patients which included:

'excellent service'

5*

'a pleasant experience because staff were so nice'

'really good'

'very good dentist'

Further visits are planned to Lewes and Hastings which will inform a larger report that will be published as a separate report later in the year.

What could also impact the demand of the EDS is the quality of the information patients access out of hours, when they are trying to seek help. For that reason, we looked at information displayed in High Street practices and undertook a short mystery shop activity of the recorded messages practices use to signpost those requiring out of hours dental assistance.

Mystery Shopping - Out of Hours voice messages

Phone calls were made to each dental practice during out of hours periods. The following points were noted:

- Number of rings to get through
- Volume & tone of message
- Opening hours included?
- Emergency signposting to NHS?
- Location of EDS?
- Contact number of EDS?
- Private OOH options?
- Possible for patient to leave a voicemail?

The emergency numbers provided via the voice messages were also tested, in order to check for accuracy and the information available to the caller having made contact.

Only 1 practice (Oak Lodge, Heathfield) out of 8 gave good quality information on all above enquiry bullets. Correct locations and phone numbers for all 3 EDS sites in East Sussex were provided, as well as detailed information about their private emergency service including what costs would be involved. Finally, the phone message voice quality was good, clear, appropriately paced and friendly sounding.

All the others provided OOH/EDS information of varying degrees of accuracy, or consistency of signposting as follows:

- 1 practice (part of a large chain) provided no information at all. "All our staff are currently busy, please hold" on a loop, with an option to press #2 & leave a message only offered after a full 45 seconds of ringing tone.
- 2 practices gave the correct phone number for Eastbourne EDS but said the service was in Hailsham.
- 2 practices provided phone numbers for services other than direct EDS lines;
- i) Lewes Victoria Hospital general phone no. which, via an automated message signpost to the Lewes EDS number);
- ii) Dental Helpline, an 0300 number which is an automated service. It offers press button options (press 1 for Eastbourne, 2 for Hastings etc)
- 2 practices gave only 111 as contact for OOH, with no other information about EDS locations or access.

- None of the East Sussex High Weald dentists situated near the county border provided any information in their phone messages about Kent or West Sussex EDS for patients who might live in the neighbouring county.

A similar activity looking at what information is available on individual websites is also being undertaken to fully report on how patients access high quality information.

The full report will generate its own recommendations and learning to share with policy makers, providers and commissioners, however from early assessment of data reviewed, particularly around access to information, HWES would recommend that:

Patients can access clear, consistent and up to date information via dental practices out of hours voice messages and websites. Bearing in mind the increasing digitisation of public access to health-related information and services, HWES would recommend that phone and website information be included in statutory rating of services by the regulators.

18. Appendix 3 - Listening Tour Survey

Healthwatch East Sussex Listening Tour June 2019



Tell us about your experiences of Health and Care Services

Healthwatch East Sussex is continuing our three-year programme of engagement across the county, with our Listening Tour visiting Crowborough and surrounding areas in June 2019. This tour helps us maintain a presence across the county and allows us to engage with communities where they live. We aim to collect a wide range of views and experiences and invite you to take part by answering our short questionnaire.

We are interested in your personal experiences of health and care.

We have a separate questionnaire for you to use if you would like to answer questions on behalf of someone you care for as a family member or friend.

You have the opportunity to let us know if you would like to receive updates on our Listening Tour or on Healthwatch East Sussex. We also ask you to provide some equality monitoring information to help us to ensure that we are fulfilling our statutory duties for engagement.

If you would like this survey in another format or would like help to complete it, please contact us on:

enquiries@healthwatcheastssussex.co.uk or call 0333 101 4007

The information you provide will be kept securely, not used to identify you in any way and will only be used for the purposes you have consented to in line with our privacy and data protection policies which you can view here: www.escv.org.uk/home/privacy

Q1 Are you happy for Healthwatch East Sussex to use the answers you give to inform their work (your answers will remain anonymous)

- ☐ Yes
☐ No

Q2 Do you care for a family member or friend?

- ☐ Yes
☐ No

Q3 Would you like to complete a survey on behalf of someone you care for?

- ☐ Yes
☐ No

Background information

Please tell us a little bit about the services that you have accessed in the last 6 months

Q4 Please tell us which town or village you live in

Q5 Are you registered with a GP?

- ☐ Yes
☐ No
☐ Prefer not to say

If you said 'Yes', which GP surgery are you registered with?

Q6 Are you registered with a Dentist?

- ☐ Yes
☐ No
☐ Prefer not to say

If you said 'Yes', which Dentist are you registered with?

Q7 Do you know where your local Minor Injury Unit is?

- ☐ Yes
☐ No
☐ Don't know what this is

If you said 'Yes', which Minor Injury Unit were you referring to?

Have you used local health and care services in the last six months?

By health and care services we mean: hospital services such as outpatients, clinics, A&E; community health services such as GPs, dentists and community nurses; adult social care services such as social work, occupational therapy, and home care; children's services such as social care and disability services; and voluntary and charity sector health and care services.

Q8 Have you used local health and care services in the last six months?

- ☐ Yes
☐ No (skip to Q27)

Q9 Which local health and care services have you used in the last six months? (please tick all that apply)

- | | | | |
|---|--------------------------|--|--------------------------|
| Acute Hospital services such as outpatients, clinics and A&E | <input type="checkbox"/> | Children's Services such as social care, childrens disability services | <input type="checkbox"/> |
| Local GP | <input type="checkbox"/> | Adult Mental Health Services | <input type="checkbox"/> |
| Local Dentist | <input type="checkbox"/> | Child Adolescent Mental Health Services | <input type="checkbox"/> |
| Local Pharmacy | <input type="checkbox"/> | Voluntary and charity sector health and care services | <input type="checkbox"/> |
| Community services such as community nurses or Minor Injury Unit (MIU) | <input type="checkbox"/> | Home based services | <input type="checkbox"/> |
| Adult Social Care services such as social work, occupational therapy, home care | <input type="checkbox"/> | Other | <input type="checkbox"/> |

If you said 'Other' please tell us which service(s) you have used here:

Please tell us *how often* and in which *town or village* you have used these services below (where applicable)

Q10 Hospital services such as outpatients, clinics and A&E

Q11 Local GP

Q12 Local Dentist

Q13 Local Pharmacy

Q14 Community services such as community nurses or Minor Injury Unit (MIU)

Q15 Adult Social Care services such as social work, occupational therapy, home care

Q16 Children's Services such as social care, childrens disability services

Q17 Adult Mental Health Services

Q18 Child Adolescent Mental Health Services

Q19 Voluntary and charity sector health and care services

Q20 Home based services

Q21 Other

Your experience of using services

Thinking about the services you've used in the last six months, how much do you agree or disagree with the following statements:

Q22

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
I have found it easy to access the information and advice I need about health and care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please briefly give us a reason for your answer here:

Q23

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
I've been able to access the right care and support when I need it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please briefly give us a reason for your answer here:

Q24

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
I've had a choice over which health and care services I use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please briefly give us a reason for your answer here:

Q25

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
When I contact my services they know who I am and I don't have to repeat my story	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please briefly give us a reason for your answer here:

I am satisfied with the services I receive

Are you satisfied with the services you have received in the last 6 months

	Very Satisfied	Satisfied	Neither Satisfied nor Dissatisfied	Dissatisfied	Very Dissatisfied	N/A
Q26 Acute Hospital services such as outpatients, clinics and A&E	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local GP	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local Dentist	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Local Pharmacy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community services such as community nurses or Minor Injury Unit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adult Social Care services such as social work, occupational therapy, home care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children's Services such as social care, children's disability services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adult Mental Health Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Child Adolescent Mental Health Service	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Voluntary and charity sector health and care services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Home based services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please briefly give us a reason for your answer(s) here:

Transforming services

Thinking overall about your experience of using health and care services locally, please tell us:

Q27 What worked well for you and why?

Q28 What would you want to change and why?

Your Community

Q29 Feeling a part of your community

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
Do you feel a part of your community?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Tell us more?

Q30 Influencing your community

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
I can influence decisions that affect the local community	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Tell us more?

Q31 Making a change in your community

	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree	N/A
When people in this area get involved in their local community, they can really make positive changes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Tell us more?

Accessing care in the future - you or your family

Q32 Do you have to pay a contribution towards help with daily living needs if you or a relative needs care and support?

- ☐ Yes
☐ No
☐ Don't know

Q33 If you need extra support, where would you go to find out information about costs?

- ☐ East Sussex County Council
☐ NHS
☐ Internet Search
☐ Don't Know
☐ Other

If you said '**Other**' where would you go?

Q34 When would you want to know about any costs for extra support needed by you?

- ☐ Before I find out what help is available
☐ At the point when I find out what help is available
☐ After I find out what help is available
☐ I don't want to know
☐ Other (please specify)

If you said '**Other**' when would you like to know?

Get involved

Your feedback will help us to provide better services designed around the needs of local people.

If you would like to receive more information about Healthwatch East Sussex or are interested in taking part in a case study about your experiences using services, please let us know and provide your contact details. We will only contact you about the options you have selected and we will not pass your information onto any third party organisation.

If you would like more information about how we process information, including your personal details, you can view our privacy policy here:
<http://www.escv.org.uk/home/privacy>

I would:

- ☐ Like to take part in a case study about my experiences
- ☐ Like to receive a copy of the Healthwatch East Sussex Wealden Listening Tour report when it is published
- ☐ Like to receive more information about the work of Healthwatch East Sussex
- ☐ Be interested in volunteering for Healthwatch East Sussex
- ☐ Like to be entered into a prize draw for a chance to win a Love2Shop gift card (terms and conditions below)

Please leave your email or postal address here:

Thank you for taking part in the survey. You can find out more information about Healthwatch East Sussex by visiting:
www.healthwatcheastsex.co.uk
Prize Draw terms and conditions:
www.healthwatcheastsex.co.uk/competitiontermsandconditions

Healthwatch East Sussex Information and Enquiry Service
Telephone: 0333 101 4007
Email: enquiries@healthwatcheastsex.co.uk