



BROMLEY CIVIC CENTRE, STOCKWELL CLOSE, BROMLEY BRI 3UH

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DATE: 13 September 2023

HEALTH AND WELLBEING BOARD INFORMATION BRIEFING

Meeting to be held on Thursday 21 September 2023

This briefing will only be debated if a member of the Committee requests a discussion be held, in which case please inform the Clerk 24 hours in advance indicating the aspects of the information item you wish to discuss.

- 1 ALCOHOL NEEDS ASSESSMENT (Pages 3 - 10)**
- 2 HEALTHWATCH BROMLEY PATIENT EXPERIENCE REPORT - Q1 2023-24 (Pages 11 - 50)**

Members and Co-opted Members have been provided with advanced copies of the Part 1 (Public) briefing via email. The Part 1 (Public) briefing is also available on the Council website at the following link: <http://cds.bromley.gov.uk/ieListMeetings.aspx?CId=559&Year=0>

Copies of the documents referred to above can be obtained from
<http://cds.bromley.gov.uk/>

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Report No.
ACH23-044

London Borough of Bromley

PART ONE - PUBLIC

Decision Maker: Health and Wellbeing Board

Date: 21st September 2023

Decision Type: Non-Urgent

Title: Alcohol Needs Assessment

Contact Officer: Jonathan Walker, Head of Public Health Intelligence and Performance
Tel: 020 8313 4753 E-mail: Jonathan.Walker@bromley.gov.uk

Chief Officer: Dr Nada Lemic, Director of Public Health

Ward: All

1. Reason for report

1.1 Alcohol treatment and recovery services for Bromley residents are commissioned by the London Borough of Bromley.

1.2 In 2023 the service is due to be reprocured.

1.3 As part of the re-procurement process, a needs assessment/analysis of needs is carried out to assess the needs of the local population to ensure the new service meets these needs adequately.

1.4 The paper will provide a summary of the needs assessment, with a full report also available upon request..

2. **RECOMMENDATION(S)**

The HWB is asked to note the report on the alcohol needs assessment.

Impact on Vulnerable Adults and Children

1. Summary of Impact: Many consume alcohol in quantities which increase health risks including mental health, and cause social issues, both in their own families and in society. Alcohol use can also have a huge impact on a child's development and their ability to grow up in a safe home. This needs assessment considers vulnerable adults and children throughout, and the multiagency work required with alcohol services to keep these individuals safe.
-

Transformation Policy

1. Policy Status: Existing Policy
 2. Making Bromley Even Better Priority (*delete as appropriate*):
 - (1) For children and young people to grow up, thrive and have the best life chances in families who flourish and are happy to call Bromley home.
 - (2) For adults and older people to enjoy fulfilled and successful lives in Bromley, ageing well, retaining independence and making choices.
 - (5) To manage our resources well, providing value for money, and efficient and effective services for Bromley's residents.
-

Financial

1. Cost of proposal: Not Applicable
 2. Ongoing costs: Not Applicable
 3. Budget head/performance centre: N/A
 4. Total current budget for this head: N/A
 5. Source of funding: N/A
-

Personnel

1. Number of staff (*current and additional*): N/A
 2. If from existing staff resources, number of staff hours: N/A
-

Legal

1. Legal Requirement: Statutory Requirement Provision of alcohol services is a statutory requirement, and this needs assessment is an essential part of the process to procure these services
 2. Call-in: Not Applicable
-

Procurement

1. Summary of Procurement Implications: This needs assessment has contributed to the recent re-procurement of alcohol treatment and recovery services
-

Property

1. Summary of Property Implications: N/A
-

Carbon Reduction and Social Value

1. Summary of Carbon Reduction/Sustainability Implications: There is a social impact of alcohol use toward which this needs assessment contributes an understanding.
-

Impact on the Local Economy

1. Summary of Local Economy Implications: There is an economic impact of alcohol use toward which this needs assessment contributes an understanding.

Impact on Health and Wellbeing

1. Summary of Health and Wellbeing Implications: The prevalence of alcohol use and its consumption is considered together with the morbidity and mortality associated with it. The needs assessment aims to quantify where unmet need exists and how services can better work together to support people with varying vulnerabilities.
-

Customer Impact

1. Estimated number of users or customers (*current and projected*): >1000 directly, but many more indirectly
-

Ward Councillor Views

1. Have Ward Councillors been asked for comments? No
2. Summary of Ward Councillors comments: N/A

3. COMMENTARY

Alcohol Needs Assessment Executive Summary

Alcohol is consumed widely, often in non-harmful quantities. However, many consume quantities which increase health risks, including mental health, and cause social issues, both in their own families and in society. Alcohol consumption patterns vary by age, gender, deprivation, and many other demographic variables. The Covid-19 pandemic has also changed alcohol consumption and alcohol-related morbidity trends nationally. Local authorities are responsible for the commissioning of alcohol treatment and recovery services, and this needs assessment aims to make recommendations to meet unmet alcohol need in Bromley. It should be consulted alongside the Substance Misuse Needs Assessment (SMNA) for commissioning purposes, as drug and alcohol services are commissioned together – the Bromley Drug and Alcohol Service (BDAS).

There is very little data about alcohol consumption at a local level, except AUDIT-C and AUDIT screening data from primary care for adults. However, there are limitations to this including selection bias and reliability of responses. In addition, AUDIT-C has shown an increase in non-drinkers and a decrease in the highest alcohol risk groups from 2019/20 to 2021/22, with AUDIT indicating an opposite trend. Therefore, this data should be taken with caution. It should also be noted that there are significant gaps in AUDIT screening. It has been estimated that there is an 86% unmet alcohol-treatment need in Bromley (82% nationally). Nationally, more men than women drink more heavily, and the proportion increases with age. There is also a higher proportion of people drinking in more deprived areas.

In young people, local intelligence comes from the School Health Education Unit (SHEU) survey. This shows alcohol consumption in Year 10 students has reduced from 2019 to 2021, but this data should be treated with caution due to the impact of the Covid-19 pandemic and the self-reporting nature of the survey. Nationally, alcohol consumption in young people has reduced since 2003. Similar to adults, in general, a higher proportion of boys drink earlier, more heavily, and more regularly. Alcohol consumption also increases with age, however a higher proportion of girls than boys drink in the 13-15-year-old group. In addition, young people who smoke, take other drugs, or play truant are more likely to drink alcohol. Where there is parental alcohol consumption in the home, young people are more likely to drink.

With regard to alcohol-specific morbidity in Bromley, there were 1434 admissions in 2021/22, 64.2% of who were men. The 55-64-year-old age group has the highest proportion of admissions, with the most common cause for admissions being mental and behavioural disorders due to use of alcohol and alcoholic liver disease, specifically alcoholic cirrhosis. Alcohol-specific morbidity increases with deprivation, at over 3-times the rate in the most deprived groups compared to the least. With alcohol-specific deaths, there has been a decrease since 2014-16. The majority are in men and in ages 55-64-years old, similar to morbidity. Alcoholic liver disease was the most common cause of death, contributing to 76% of alcohol-specific deaths in 2017-2021.

This needs assessment also evaluated the current alcohol treatment and recovery service. In the last five years, there has been an increase in new alcohol-related presentations in BDAS. Referrals often come from the person themselves or their family/friends, with very few referrals from statutory services even though many service users have significant vulnerabilities. Of note, the percentage of referrals from primary care has reduced since 2018/19, perhaps as a consequence of the Covid-19 pandemic. The majority of service users are men, with the highest proportion of service users being 40-49-years-old. The proportion of service users in the Criminal Justice System has reduced over the last few years, as has the proportion of those employed. 60.5% of service users had a co-occurring mental health issue in 2021/22.

In the young person service, Bromley Changes, alcohol contributes to the second largest proportion of service user presentations, after cannabis. The majority of referrals come from the Youth Justice System and health settings. Unlike adult services, there are very few referrals from “family, friends & self”. In 2021/22 these made up 2% of the referrals. Most service users are male. Many had significant vulnerabilities, with 70% having more than one vulnerability listed.

An important part of this needs assessment was to engage with stakeholders and partners about their perception of unmet need in Bromley. Many stakeholders were also consulted in the SMNA, particularly charitable and voluntary organisations. In speaking to these stakeholders, many themes emerged. These included the vulnerabilities these organisations serve, including mental illness, abuse, isolation, crime, unemployment, veterans, safeguarding issues, and learning difficulties.

The alcohol-related harms were also explored which included significant physical and mental health issues, and social issues such as family breakdown, children going into care, losing housing, neglect, abuse, educational issues, and employment loss. The stakeholders also gave methods to increase BDAS engagement, including outreach work, geographical location, times the service is accessible, and closer work with statutory services. Finally, the relationships between the stakeholders and BDAS was explored and how these could be improved, which included training, partnership working, and reciprocal agreements.

In analysing all the data and information presented in this needs assessment, unmet needs were identified and 21 recommendations were formed, some with significant overlap with the SMNA. The recommendations were categorised into 6 areas and the table below presents the progress already achieved in implementing the recommendations and their use in the re-procurement process.

Table 1. Alcohol Needs Assessment Recommendations

Categories of Recommendations	Commissioning Response
Improving data collection	A Data and Intelligence Sub-Group is set up to support the Combatting Drugs and Alcohol Partnership and as a direct response to this recommendation. This is a multi-agency group, led by Chloe Todd, Consultant in Public Health, with the aim of improving data recording and sharing for the purpose of developing a local performance and outcomes framework.
Improved partnerships	Established the Combatting Drugs and Alcohol Partnership (CDAP). This is a strategic group tasked to oversee local implementation of the national drug strategy, From Harm to Hope. It is led by Nada Lemic, Director of Public Health with representation from key partners. Key priorities aligned with the national strategy have been agreed and supported by 5 delivery sub-groups: <ul style="list-style-type: none"> • Substance Misuse & Criminal Justice System • Drug and Alcohol Related Deaths • Local Drug Information System (LDIS) • Data and Intelligence • Prevention
Improved outreach	These include Youth Justice Service, Probation, Mental Health Services (Community and Acute locations) with

	MoUs in place with YJS and Oxleas. Further outreach will be considered and agreed during mobilisation of the new re-commissioned service.
Justice system	A Substance-Misuse & Criminal Justice System Sub-Group, led by Amanda Munford, Public Health Programme Manager, has been set up with representation from key partners including CGL, police, probation, public protection. The multi-agency approach is focusing on improving continuity of care and treatment of those individuals involved in the criminal justice system.
Children	Further transformation will be considered and discussed with the new provider of BDAS. A Prevention Sub-Group focusing on children and families will be set up.
BDAS (access and transition)	A programme of work will be considered and agreed with the new provider during mobilisation once the contract award is finalised in October 2023.

4. IMPACT ON VULNERABLE ADULTS AND CHILDREN

This needs assessment considers vulnerable adults and children throughout.

5. TRANSFORMATION/POLICY IMPLICATIONS

Making Bromley Even Better ambitions 1, 2, 5

6. FINANCIAL IMPLICATIONS

Not applicable

7. PERSONNEL IMPLICATIONS

Not applicable

8. LEGAL IMPLICATIONS

Provision of alcohol treatment and recovery services is a statutory requirement of local authorities. This needs assessment is an essential part of the process to procure these services.

9. PROCUREMENT IMPLICATIONS

This needs assessment has contributed to the recent re-procurement of alcohol treatment and recovery services.

10. PROPERTY IMPLICATIONS

Not applicable

11. CARBON REDUCTION/SOCIAL VALUE IMPLICATIONS

There is a social impact of alcohol use toward which this needs assessment contributes an understanding.

12. IMPACT ON THE LOCAL ECONOMY

There is an economic impact of alcohol use toward which this needs assessment contributes an understanding.

13. IMPACT ON HEALTH AND WELLBEING

The prevalence of alcohol use and its consumption is considered together with the morbidity and mortality associated with it and subsequent health inequalities that might exist.

14. CUSTOMER IMPACT

Vulnerable adults and children. Likely to impact thousands in the consideration of needs and service provision, both directly and indirectly

15. WARD COUNCILLOR VIEWS

Not applicable

Non-Applicable Headings:	FINANCIAL IMPLICATIONS; PERSONNEL IMPLICATIONS; PROPERTY IMPLICATIONS; WARD COUNCILLOR VIEWS
Background Documents: (Access via Contact Officer)	Alcohol Needs Assessment (August 2022)

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Q1 Patient Experience Report

Healthwatch Bromley
April – June 23



Contents

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Layout of the report

This report is broken down into five key sections:

- Quarterly snapshot
- Experiences of Hospital Services
- Experiences of GP Practices
- Experiences of 'Other' Services
- Appendix

GPs and Hospitals have been given dedicated sections as we ask tailored questions about these services when carrying out engagement. These are the top two services we receive most feedback about. Each of these sections highlight good practice and areas of improvement.

This report functions as a standardised general overview of what Bromley residents have told us within the last three months. Additional deep dives relating to the different sections can be requested and are dependent on additional capacity and resource provision.

Introduction

Patient Experience Programme

Healthwatch Bromley is your local health and social care champion. Through our Patient Experience Programme (PEP), we hear the experiences of residents and people who have used health and care services in our borough.

They tell us what is working well and what could be improved allowing us to share local issues with decision makers who have the power to make changes.

Every three months we produce this report in order to raise awareness about patient experience and share recommendations on how services could be improved.

Methodology



Carrying out engagement at **local community hotspots** such as GPs, hospitals and libraries



Encouraging conversations on **social media** and gathering **online reviews**



Providing promotional materials and surveys in **accessible formats**



Training volunteers to support engagement across the borough allowing us to reach a wider range of people and communities

Being independent helps people to trust our organisation and give honest feedback which they might not always share with local services.

Between April and June 2023, we continued to develop our PEP by :

- Finalised a patient experience report template following feedback from external partners.

Q1 Snapshot

This section provides a summary of the number of experiences we collected during April – June 2023 as well as breakdown of positive, negative reviews per service. We analysed residents star rating of their overall experience to get this data (1* and 2* = negative, 3* = neutral, 4* and 5* = positive)



658 reviews

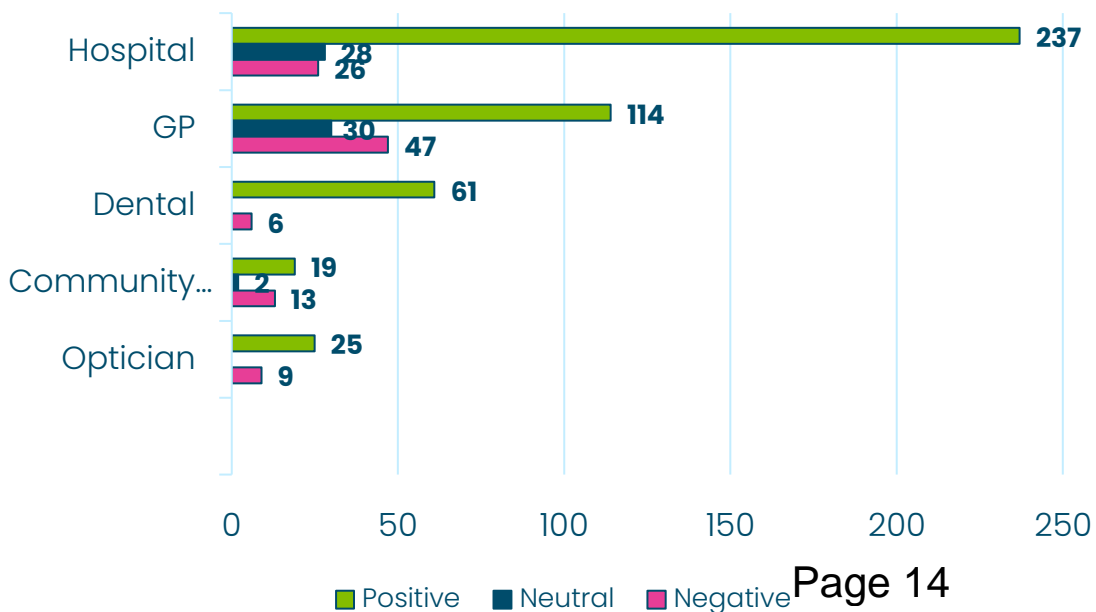
of health and care services were shared with us, helping to raise awareness of issues and improve care.

65 visits

were carried out to different local venues across the borough to reach as many as people as possible

Top 5 Service Types	No of Reviews	Percentage of positive reviews
Hospital	291	81%
GP	191	60%
Dental	67	91%
Community Health	34	56%
Optician	34	74%

Sentiment of Reviews



Experiences of Hospital Services



Rehabilitation Unit	LG
ite	
ord Ward	LG
	1
rd	1
riends	G
Offices	2
	LG
le Ward	G
es Unit	LG
sport	G
	LG
py Outpatients	2
oehampton CMHT	G
	G
gnostic Centre Reception	
on Clinic (Sexual Health/GUM)	2
	1
	1
	G
ite	LG

What people told us about hospital services

"The staff are helpful, good explanation is given."

"To use a more person-centred approach."

"Personalised easy to access and parking is good."

"Parking is rubbish, lack of disabled bays."

"I feel confident in the way my treatment plan is being addressed."

"No aftercare - not even a visit to my flat, no equipment given to me."

"The staff are lovely and kind, compassionate."

"Lack of communication with departments, process not individual."

Hospital Services

No. of Reviews	291
Positive	237
Negative	26
Neutral	28

Questions we asked residents



As part of our new patient experience approach, we asked residents a series of questions which would help us better understand experiences of access and quality.

The questions we asked were:

Q1) How did you find getting a referral/appointment at the hospital?

Q2) How do you find getting through to someone on the phone?

Q3) How do you find the waiting times at the hospital?

Q4) How do you find the attitudes of staff at the service?

Q5) How do you think the communication is between your hospital and GP practice?

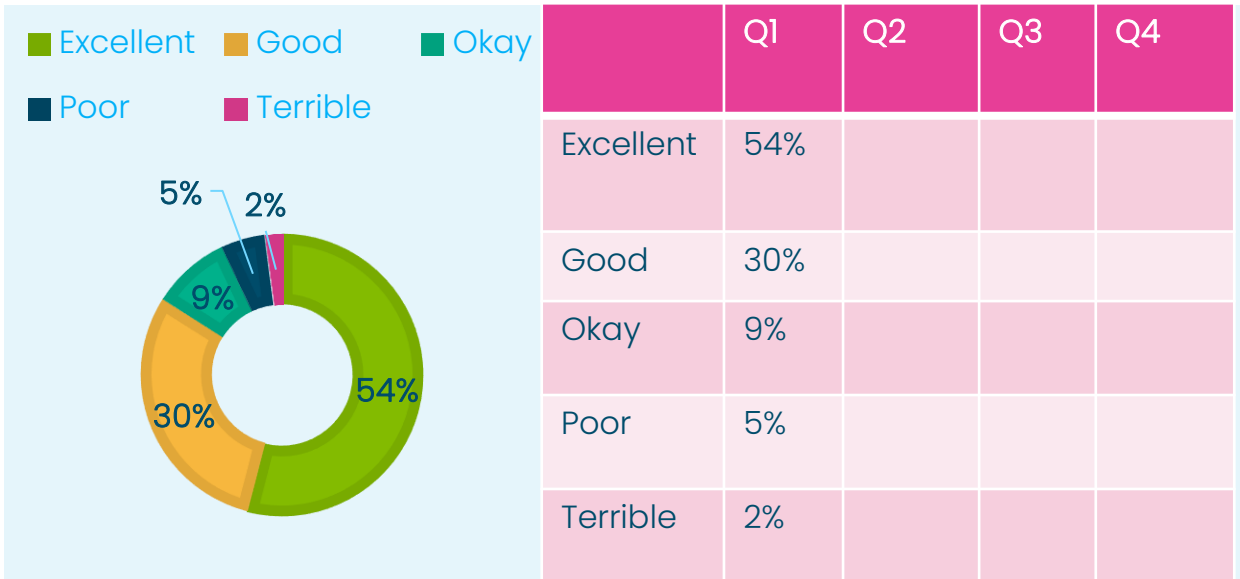
Q6) How would you rate the quality of treatment and care received?

Participants were asked to choose between 1-5* (Terrible – Excellent) for all questions.

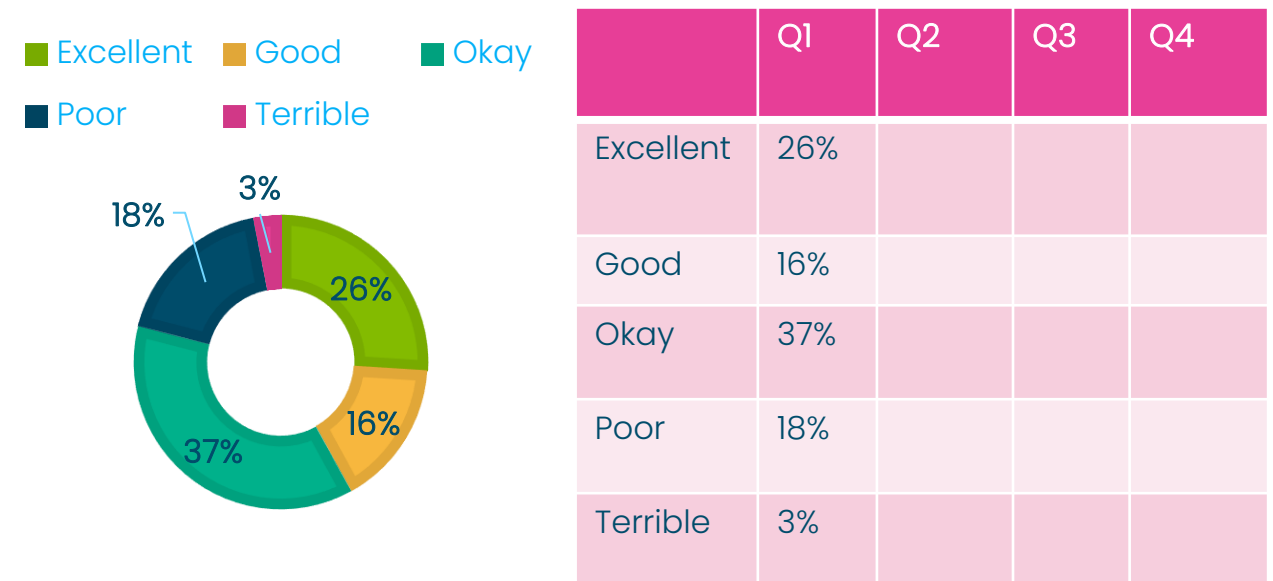


Access and Quality Questions

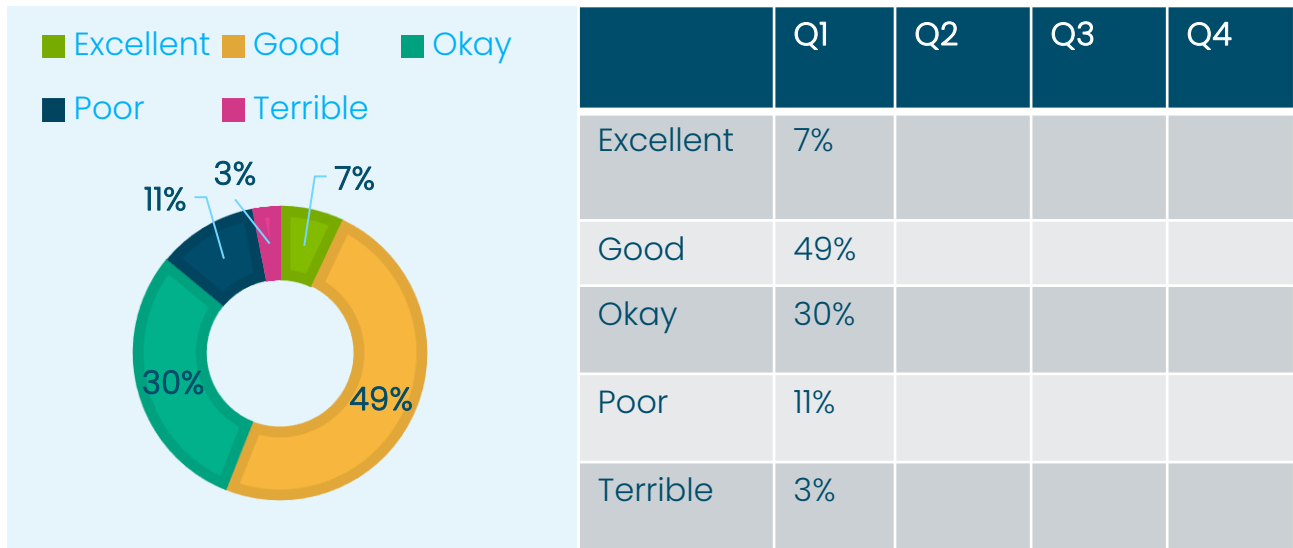
Q1) How do you find getting a referral/appointment at the hospital?



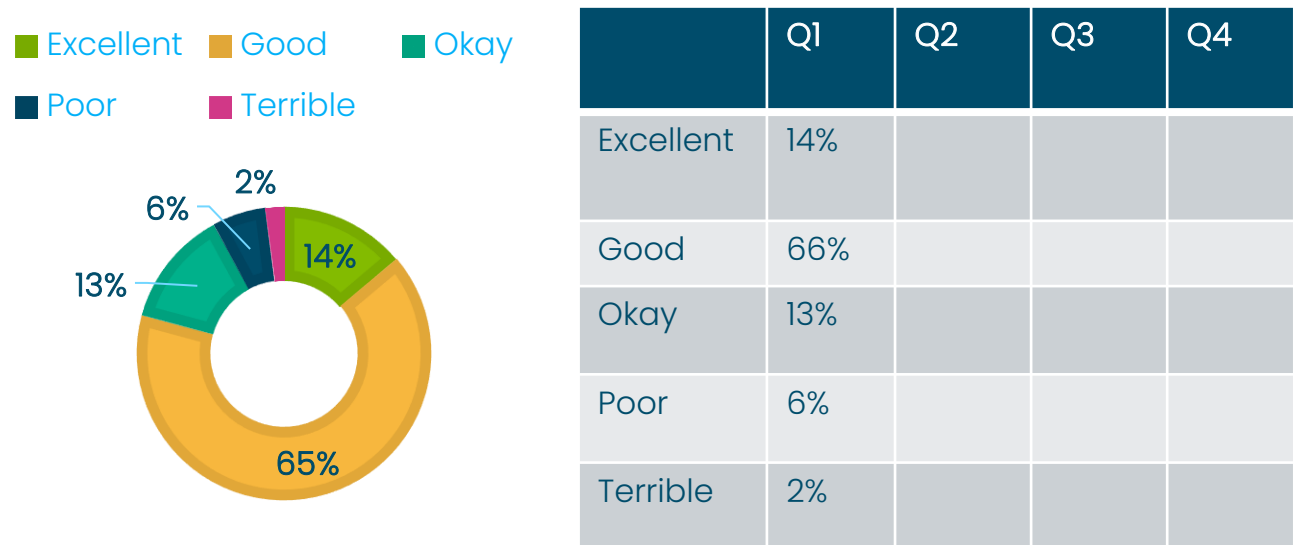
Q2) How do you find getting through to someone on the phone?



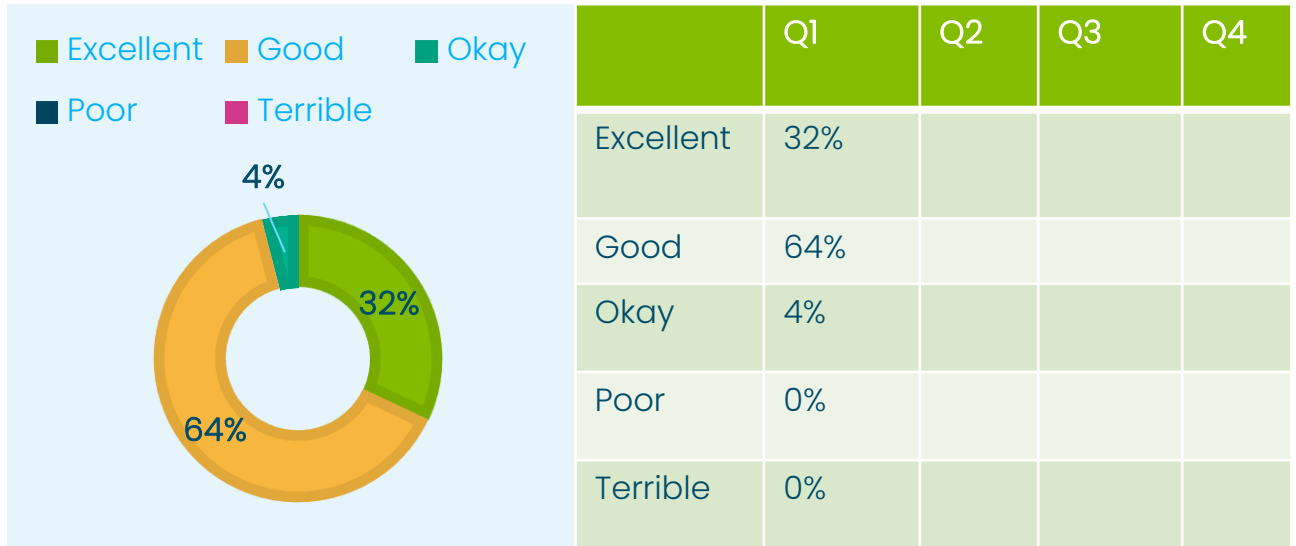
Q3) How do you find the waiting times at the hospital?



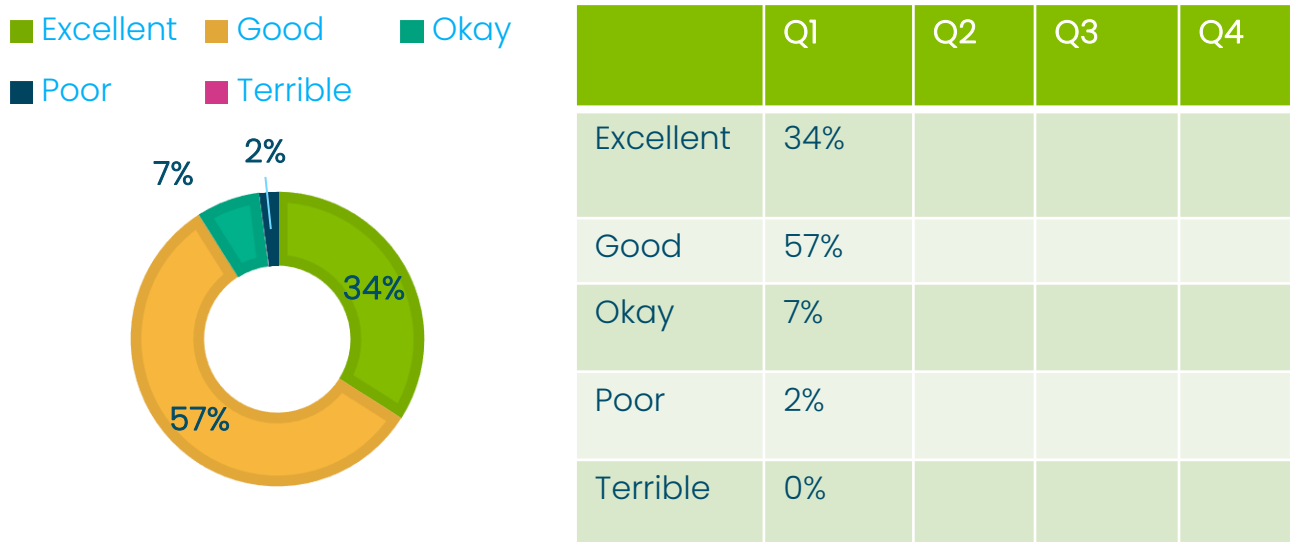
Q4) How do you think the communication is between your hospital and GP practice?



Q5) How do you find the attitudes of staff at the service?



Q6) How would you rate the quality of treatment and care received?



Thematic analysis

In addition to the access and quality questions we also ask two further free text questions (*What is working well?* and *What could be improved?*) to help get a more detailed picture about Hospital services.

Each experience we collect is reviewed and up to 5 themes and sub-themes are applied. The charts below show the top 5 positive and negative themes received between April and June 2023 based on the free text responses received.

Top 5 Positive Issues	Total count
Staff attitudes	112 (92%)
Communication with patients	91 (86%)
Quality of treatment	79 (93%)
Appointment availability	66 (89%)
Treatment and care – experience	39 (78%)

Top 5 Negative Issues	Total count
Waiting times	42 (68%)
Communication with patients	15 (14%)
Car parking	10 (56%)
Treatment and care – experience	10 (20%)
Communication between services	8 (20%)

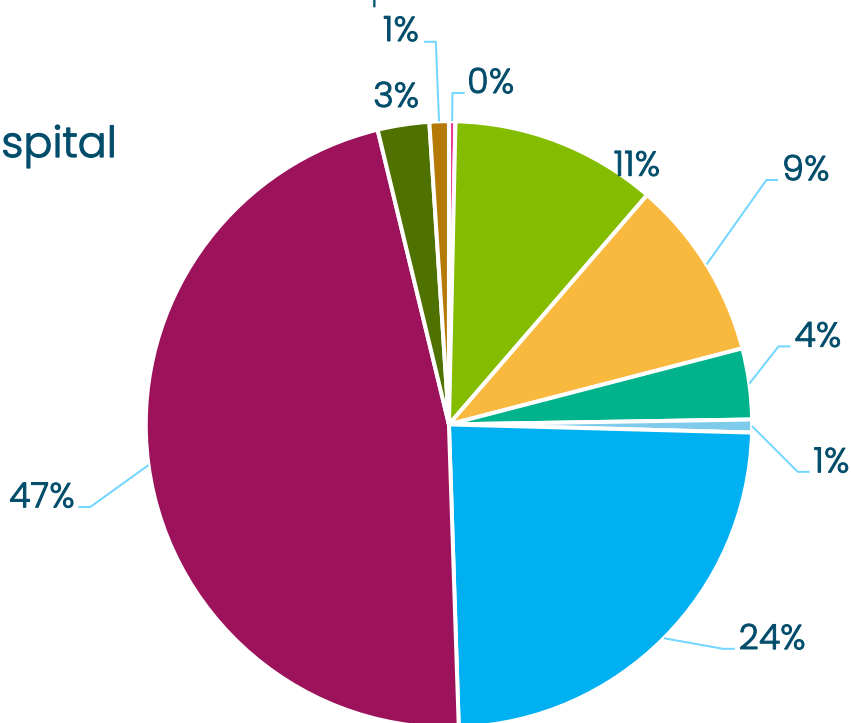
Hospital Trusts

Bromley residents access a variety of different hospitals depending on factors such as choice, locality and specialist requirements. During the last three months we heard experiences about the following hospitals:

- Princess Royal University Hospital
- Orpington Hospital
- The Sloane Hospital
- Chelsfield Park Hospital
- King’s College Hospital
- Queen Mary’s Hospital
- University Hospital Lewisham
- Beckenham Beacon
- Maudsley Hospital

Between April – June, the services which received the most reviews were Princess Royal University Hospital and Orpington Hospital. We collect patient experience through different methods including face-to-face and online engagement. Compared to the previous quarter, January – March, PRUH continues to receive the largest number of reviews. The number for Orpington have also increased as we have visited both hospitals once a week for the past three months.

Total Reviews per Hospital



- Beckenham Beacon
- The Sloane Hospital
- Maudsley Hospital
- Princess Royal University Hospital
- University Hospital Lewisahm
- Chelsfield Park Hospital
- King's College Hospital
- Orpington Hospital
- Queen Mary's Hospital

In order to understand the variance of experience across the hospitals we have compared the ratings given for the snapshot access and quality questions covered in the previous section. Please note that each question has been rated out of 5 (1 – Terrible 5 -Excellent)

Positive ■ Neutral ■ Negative ■

Name of Hospital	ACCESS (out of 5)			QUALITY (out of 5)		
	To a referral/ appointment	Getting through on the phone	Waiting Times	Of Communicati on between GP and Hospital	Of Staff attitudes	Of Treatment and Care
Princess Royal University Hospital	4.2	3.6	3.3	3.8	4.2	4.2
Orpington Hospital	4.4	3.1	3.7	3.9	4.3	4.2

We have also identified the top 3 positive and negative themes (based on free text responses) for Princess Royal University and Orpington Hospital, where we have received over 50 reviews.

Hospitals	Overall Rating (Out of 5)	Top 3 Positive Issues	Top 3 Negative Issues
Princess Royal University Hospital No of reviews: 136	3.8	<ul style="list-style-type: none"> 1. Communication with patients 2. Staff attitudes 3. Quality of treatment 	<ul style="list-style-type: none"> 1. Waiting times 2. Communication with patients 3. Car parking
Orpington Hospital No of reviews: 70	4	<ul style="list-style-type: none"> 1. Staff attitudes 2. Convenience / Distance to travel 3. Communication with patients 	<ul style="list-style-type: none"> 1. Waiting times 2. Management of service 3. Appointment availability

What has worked well?

Below is a list of the key positive aspects relating to hospitals between April and June 2023.



Quality of Treatment

The number of positive reviews, rated 'Good' or 'Excellent', for quality of treatment and care in hospitals was 91%. Most people who attended their appointments were happy with the treatment provided.



Staff Attitudes

Regarding staff attitudes, the positive feedback shared - rated 'Good' or 'Excellent' - was 96%. The majority of people were happy with the clinical and non-clinical staff when they accessed the hospital for treatment.



Communication with Patients

80% of people gave an 'Excellent' or 'Good' review when asked how the communication is between their hospital and GP practice. People also left positive comments related to verbal communication and treatment provided by the hospital staff.



Treatment and Care Experience

In terms of treatment and care received, 75% of the reviews were positive. In general, people who attended the hospital had a positive experience and were satisfied with the treatment and care provided by the hospital.



Quality of Staff - health professionals

93 % of reviews left regarding the quality of the healthcare professionals were positive. The people who attended their local hospitals were happy with the communication and the treatment they received.

What could be improved?

Below is a list of the key areas for improvement relating to hospitals between April and June 2023.



Waiting Times

Regarding waiting times 42 people left negative feedback. Those who were waiting to be seen were unhappy with the long waiting times to be seen by a healthcare professional.



Treatment and care-experience

20% of reviews shared were negative regarding people's treatment. Comments were related to being unhappy with the care provided and their experience when attending their local hospital.



Communication with patients

The number of negative reviews related to communication with patients was 14%. Whilst most people shared positive feedback, some service users were unhappy with hospital communication with patients, for example treatment explanation and verbal advice.



Communication

The number of negative reviews was 20% regarding communication between services. This generally relates to a lack of communication around referrals and poor communication between a patient's GP practice and the hospital.



Car parking

10 people left negative reviews related to car parking facilities at the hospital. Comments included issues around paying for parking and that it should be free in hospitals and trying to find parking spaces can be a nightmare.

Equalities Snapshot

During our engagement we also ask residents to voluntarily share with us information about themselves such as gender, age, ethnicity etc. This allows us to understand whether there are differences in experience based on personal characteristics.

This section pulls out interesting statistics we found when analysing overall experience ratings (1=Terrible 5= Excellent). A full demographics breakdown can be found in the appendix.



Gender

Overall, the feedback from men (83%) and women (84%) was similarly positive. The majority of feedback that was shared was provided by women (125) and 64 respondents identified as a man.



Age

Of the 173 respondents that were happy to share their age, positive feedback was left by the majority. Only 5 negative reviews were from people whose ages ranged from 55 – 84. The majority of feedback that was shared was from people aged 65–74 (41). The lowest number of responses said they were 18–24 or Under 18(8 total).



Ethnicity

172 respondents shared their ethnicity and the majority of feedback shared was positive. White: British / English / Northern Irish / Scottish / Welsh was the largest ethnicity (150), and the only negative feedback (4%) was left by this group.



Long Term Condition

Out of 171 respondents, the majority of feedback shared was positive (80%). 54 people said that they have a disability and 56 people said they had a long term condition (LTC).

Experiences of GP Practices



What people told us about GP Practices

"The surgery is very good, treat me very well."

"Receptionists need training to be more personalised."

"Good quality of care."

"I have had to battle with receptionists to get an appointment with a doctor."

"Staff are very helpful."

"Trying to order a prescription from [the surgery] was one of the worst health experiences I have had of late."

"The doctors are good, easy for me to get to.."

"More doctor appointments rather than seeing nurses."

GP Services

No. of Reviews	191
Positive	114
Negative	47
Neutral	30



Questions we asked residents

As part of our new patient experience approach, we asked residents a series of questions which would help us better understand experiences of access and quality.

The questions we asked were:

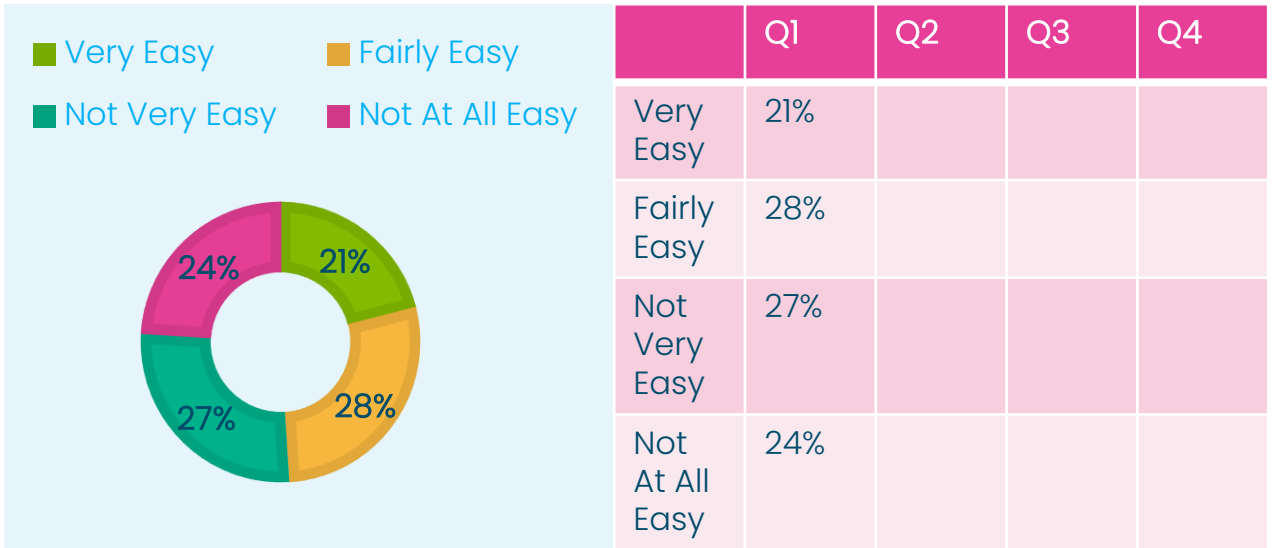
- Q1) How do you find getting an appointment?
- Q2) How do you find getting through to someone at your GP practice on the phone?
- Q3) How do you find the quality of online consultations?
- Q4) How do you find the quality of telephone consultations?
- Q5) How did you find the attitudes of staff at the service?
- Q6) How would you rate the quality of treatment and care received?

Please note that for Question 1 and 2 the options we provided matched those of the national GP Patient Survey (Very Easy – Not at All Easy) to allow our data to be comparable with the NHS data.

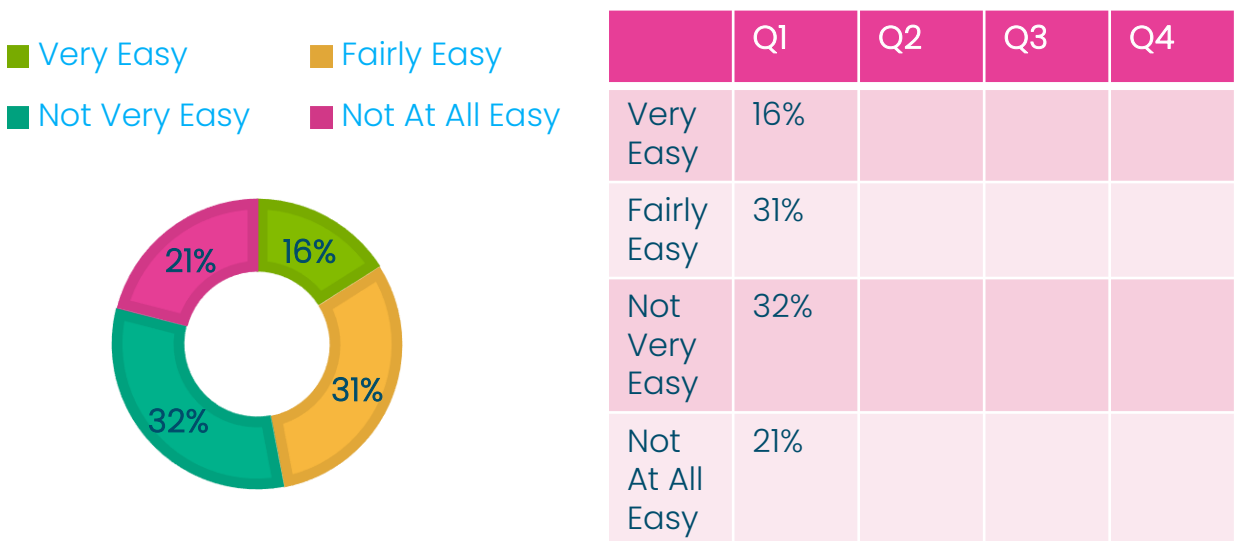
Participants were asked to choose between 1-5* (Terrible – Excellent)

Access and Quality Questions

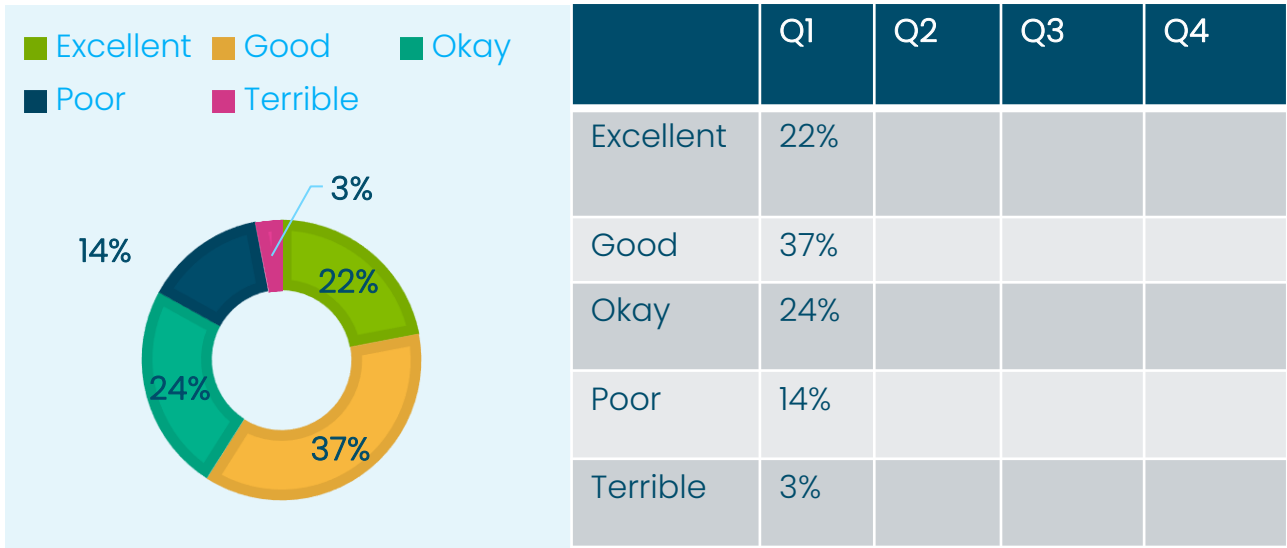
Q1) How do you find getting an appointment?



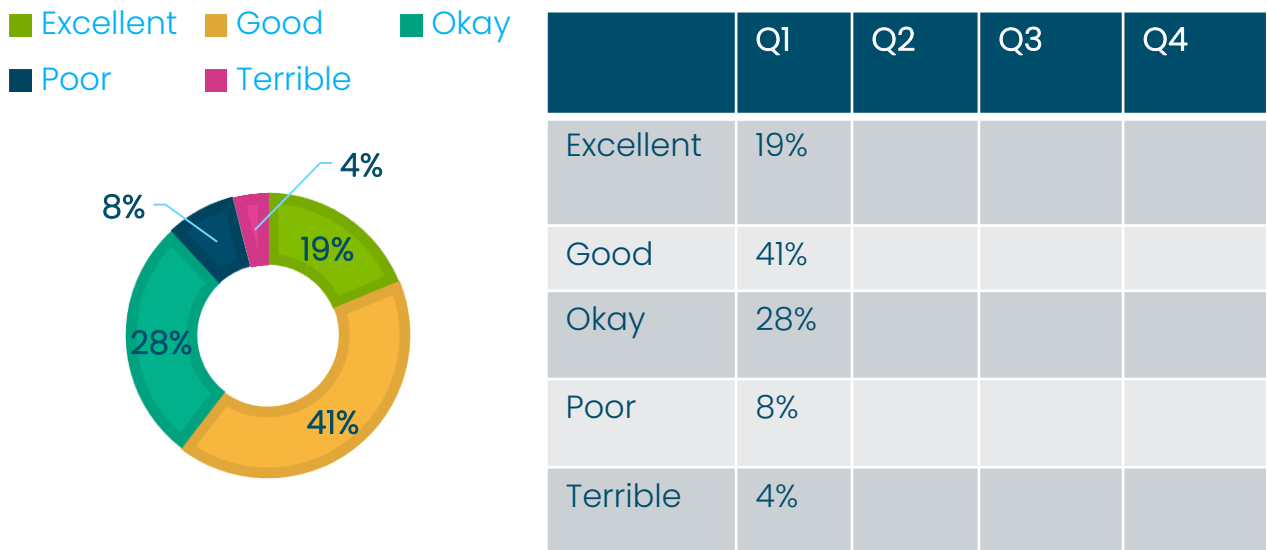
Q2) How do you find getting through to someone at your GP practice on the phone?



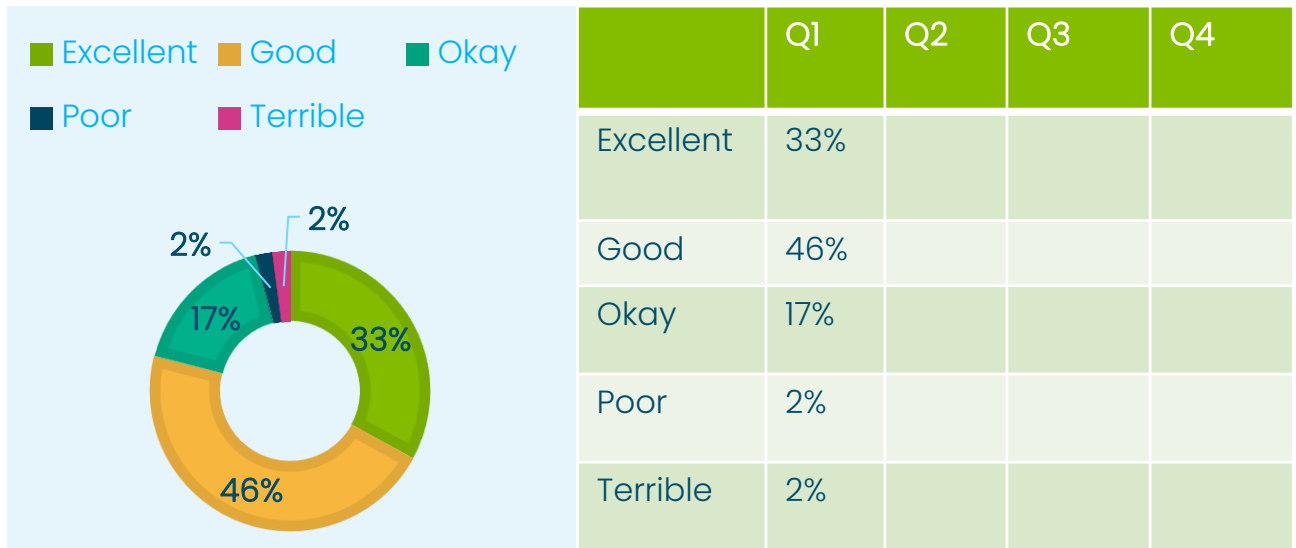
Q3) How do you find the quality of online consultations?



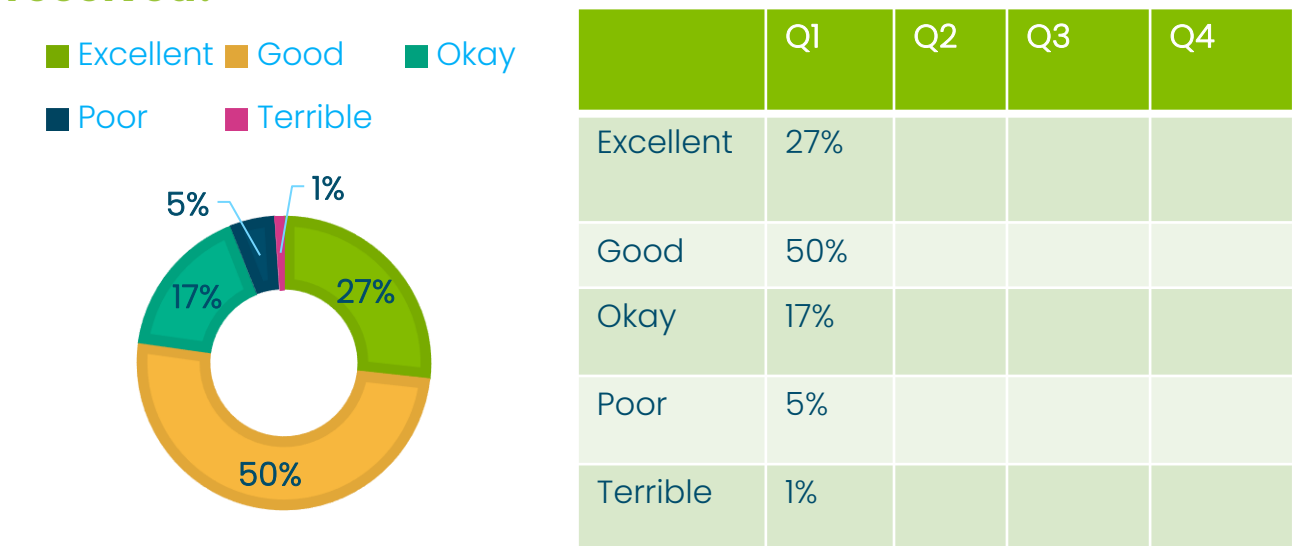
Q4) How do you find the quality of telephone consultations?



Q5) How did you find the attitudes of staff at the service?



Q6) How would you rate the quality of treatment and care received?



Thematic analysis

In addition to the access and quality questions we also ask two further free text questions (**What is working well?** and **What could be improved?**) to help get a more detailed picture about GP practices.

Each experience we collect is reviewed and up to 5 themes and sub-themes are applied. The tables below show the top 5 positive and negative themes received between April and June 2023 based on the free text responses received.

Top 5 Positive Themes	Total count
Quality of treatment	56 (80%)
Staff attitudes	50 (71%)
Communication with patients	26 (63%)
Staff attitudes – health professionals	21 (88%)
Booking appointments	19 (34%)

Top 5 Negative Themes	Total count
Getting through on the telephone	53 (65%)
Appointment availability	39 (63%)
Booking appointments	35 (63%)
Communication with patients	15 (37%)
Staff attitudes – administrative staff	10 (43%)

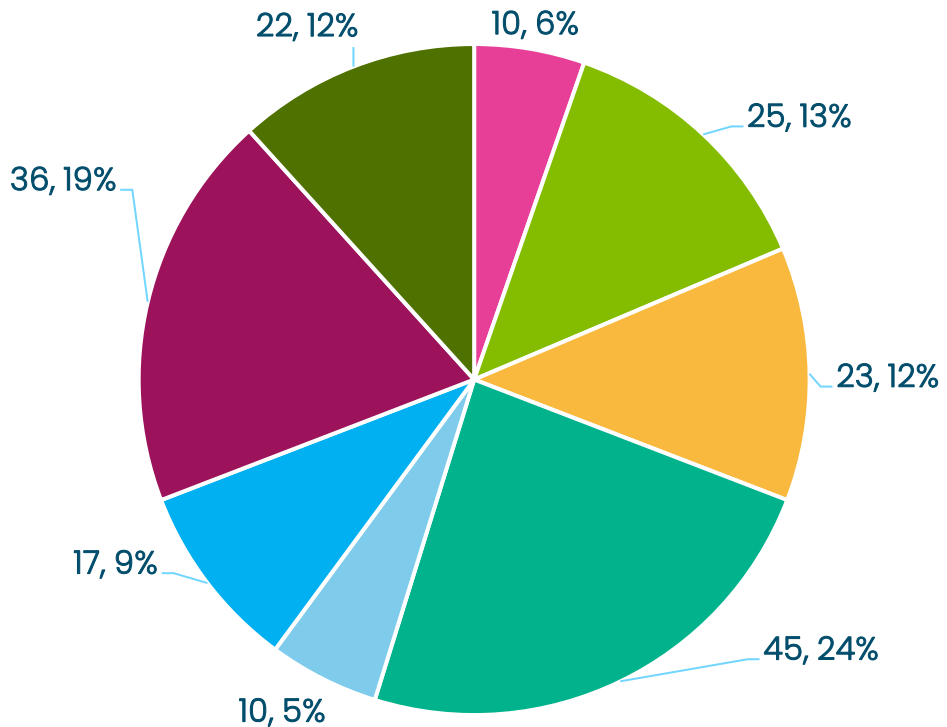
Primary Care Networks

Primary care networks (PCNs) are groups of GP practices within the same area which work together to support patients. Within Bromley there are **8 PCN'S** covering the borough. These are:

- Beckenham
- Bromley Connect
- Crays Collaboration
- Five Elms
- Hayes Wick
- MDC
- Orpington
- Penge

Between April – June, the services which received the most reviews were Five Elms and Orpington PCN. This quarter the PCN which received the most reviews was Orpington and last quarter, January – March, it was Bromley Connect.

Total Reviews per PCN



- | | | |
|--|--|--|
| ■ Beckenham | ■ Bromley Connect | ■ Crays Collaboration |
| ■ Five Elms | ■ Hayes Wick | ■ MDC |
| ■ Orpington | ■ Penge | |

PCN Access and Quality Questions

In order to understand the variance of experience across the borough we have compared the PCNs by the average star ratings given for the snapshot access and quality ratings in the previous section.

Please note that Access has been rated out of 4 (1 – Not at All Easy – 4 Very Easy) and Quality is out of 5 (1 – Terrible, 5 – Excellent)

Each average rating has been colour coded to indicate positive, (green) negative (pink) or neutral (blue) sentiment.

Positive ■ Neutral ■ Negative ■

PCN NAME	ACCESS (out of 4)		QUALITY (out of 5)			
	Getting an appointment	Getting through on the phone	Of Telephone consultation	Of Online consultations	Of Staff attitudes	Of Treatment and Care
Beckenham	1	2	4.5	4.5	4.5	4
Bromley Connect	2.7	2.4	3.3	3.4	3.7	4.1
Crays Collaboration	2.4	2.3	3.6	3.6	3.8	3.7
Five Elms	2.5	2.5	3.8	3.8	4.2	4
Hayes Wick	3	3	4.2	N/A	5	4
MDC	1.9	1.9	4	4.2	4.3	4.5
Orpington	2.2	2.3	3.5	3	3.8	3.7
Penge	2.9	2.8	3.5	4.3	4.4	4.3

PCN Themes

We have also identified the top 3 positive and negative themes for each PCN.

Primary Care Network	Overall rating	Top 3 Positive Issues	Top 3 Negative Issues
Beckenham No of reviews: 10	4	1. Quality of Care/Treatment	1. Booking appointments
		2. Staff attitudes – health professionals	2. Getting through on the telephone
		3. Quality of staff – health professionals	3. Staff attitudes – health professionals
Bromley Connect No of reviews: 25	3.5	1. Quality of Care/Treatment	1. Booking appointments
		2. Staff attitudes	2. Getting through on the telephone
		3. Getting through on the telephone	3. Communication around prescriptions
Crays Collaboration No of reviews: 23	3.1	1. Staff attitudes	1. Getting through on the telephone
		2. Staff attitudes – health professionals	2. Appointment availability
		3. Quality of Care/ Treatment	3. Booking appointments
Five Elms No of reviews: 45	3.5	1. Staff attitudes	1. Appointment availability
		2. Quality of Care/Treatment	2. Getting through on the telephone
		3. Booking appointments	3. Booking appointments
Hayes Wick No of reviews: 10	2.9	1. Staff attitudes - administrative	1. Appointment availability
		2. Treatment experience	2. Accessibility and reasonable adjustments
		3. Appointment availability	3. Booking appointments
MDC No of reviews: 17	3.6	1. Communication with patients	1. Getting through on the telephone
		2. Staff attitudes – health professionals	2. Appointment availability
		3. Staff attitudes	3. Booking appointments
Orpington No of reviews: 36	3	1. Quality of Care/Treatment	1. Getting through on the telephone
		2. Communication with patients	2. Appointment availability
		3. Staff attitudes	3. Communication with patients
Penge No of reviews: 22	4	1. Communication with patients	1. Getting through on the telephone
		2. Staff attitudes	2. Appointment availability
		3. Quality of Care/Treatment	3. Quality of appointment – telephone consultation

What has worked well?

Below is a list of the key positive aspects relating to GP practices between April and June 2023.



Quality of treatment

56 people highlighted the positive experience they had in terms of the quality of treatment. People expressed how impressed they recently had been with the service they had received at their GP practice.



Staff attitudes

50 people shared positive feedback about staff attitudes, both administrative and clinical. Service users found healthcare professionals were 'kind' and caring when listening to their health concerns.



Communication with patients

26 people were satisfied with the care they received from a GP practice and commented on good levels of communication as well as clear treatment explanation from healthcare professionals.



Staff attitudes – health professionals

21 people left positive feedback about staff attitudes, specifying healthcare professionals. Residents found clinical staff to be 'responsive' and 'supportive' when accessing a GP practice.



Booking appointments

19 people shared positive comments related to access a GP practice and being able to book an appointment easily over the telephone and/or online.

What could be improved?

Below is a list of the key areas for improvement relating to GP practices between April and June 2023.



Getting through on the telephone

53 people said getting through to their GP practice using a telephone can be difficult. People shared their frustrations at being unable to get through to a receptionist when trying to book an appointment and long waiting times of over 30 minutes.



Appointment availability

39 people shared negative reviews on the challenges with appointment availability at a GP practice. Service users felt that some receptionists were less empathetic, and unfriendly at times, and found that it could be difficult at times to book an appointment.



Booking appointments

Similar to the comments above, 35 people commented that it can be difficult when trying to book an appointment over the telephone and / or online. Waiting times to book an appointment with a health care professional.



Communication with patients

We received 15 negative comments related to communication. Some people felt that they weren't being listened to by their GP practice or that information should be clearer for patients when discussing a diagnosis or treatment.



Staff attitudes – administrative staff

10 people left negative reviews related to staff attitudes, specifically administrative staff. Comments included rudeness over the telephone, lack of support trying to book appointments, and poor communication.

Equalities Snapshot

During our engagement we also ask residents to voluntarily share with us information about themselves such as gender, age, ethnicity etc. This allows us to understand whether there are differences in experience based on personal characteristics.

This section pulls out interesting statistics we found when analysing overall experience ratings (1=Terrible 5= Excellent). A full demographics breakdown can be found in the appendix.



Gender

Most of the feedback, from individuals there were happy to share their gender, was positive (67%). 121 people shared their gender and the majority of those responses identified as female (96).



Age

Most reviews across all ages were positive. The largest numbers of negative reviews (30%) came from 55-64 year olds, followed by 45-44 and 75-84, both with 13%. 128 people shared their age on our feedback forms. The largest number of reviews came from people aged 25-34 (27) and 35-44 (24).



Ethnicity

122 people shared their ethnicity on our feedback forms and the majority of responses were positive. White: British / English / Northern (87) was the largest ethnic group.



Long Term Condition

Out of 125 people, that completed the monitoring information pages on our form, 15 said they had a disability and 38 said that they had a long term condition (LTC). Most of the feedback shared was positive.

Experiences of 'Other' services



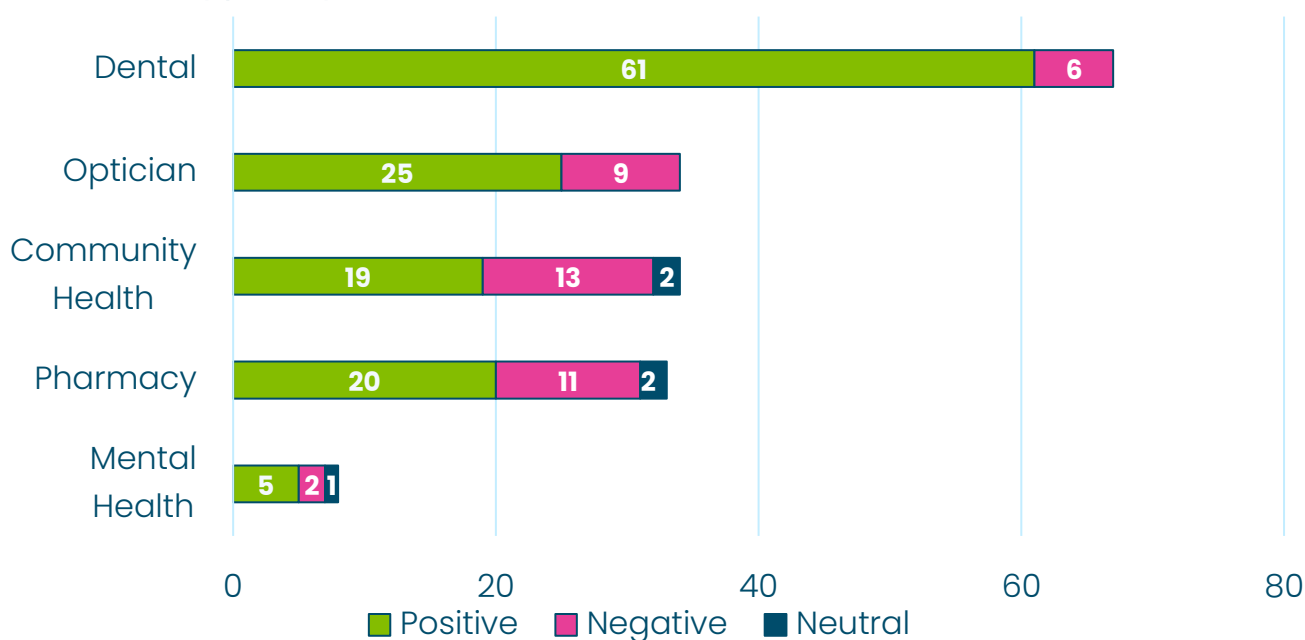
Experiences of 'Other' services

In addition to asking specifically about GPs, Hospitals and Dentists we also give the opportunity for people to share experiences about any other public health or care service asking them what is working well and what could be improved.

This section provides of positive, negative reviews per service. We analysed residents rating of their overall experience to get this data (1* and 2* = negative, 3* = neutral, 4* and 5* = positive)

Service Type	No of Reviews	Percentage of positive reviews
Dental	67	61
Community Health	34	19
Optician	34	25
Pharmacy	33	20
Mental Health	8	5

Service Type by Sentiment



We've produced a list of good practice, areas of improvement and recommendations relating to dentists between January – March 2023.

Dental – What has worked well?



Treatment and care

53 people gave positive feedback about their experience accessing a dental service. Comments included excellent treatment and care provided by both non-clinical and clinical staff.



Staff attitudes and professionalism

38 people left positive comments about staff attitudes and professionalism at a dental service. Comments included support, clear communication, and excellent customer care and treatment.

Dental – What could be improved?



Management of service

A small number of people (3), left negative feedback related to the management of the dental service. People commented on more clarity around service costs and affordability. They would like to see better communication prior to a dental appointment.



Waiting times

Most of the responses we received were very positive about waiting times and the quality of care and treatment provided when accessing a dental practice. However, a small number of people (2) were unhappy with the waiting times (punctuality and queuing on arrival).

We've produced a list of good practice, areas of improvement and recommendations relating to dentists between January – March 2023.

Community Health – What has worked well?



Treatment and care

8 people were happy with the treatment and care they received and left a positive reviews about accessing a community health service. People commented on how staff remembered their names and give service users a lot of support.



Staff attitudes

11 people left positive comments about staff attitudes and the support and care that they received when accessing a community health service. Comments included how helpful staff are, provide a lot of attention, give good advice and are friendly.

Community Health – What could be improved?



Treatment and care - experience

7 people left negative feedback regarding their experience, in terms of treatment and care, when accessing a community health service. Some comments were left regarding improving staff training to ensure that health care professionals understand their patients and listen to their needs.



Waiting times

A few comments(4) were shared with our team that were about negative experiences with waiting times to be seen by a healthcare professional when accessing community health services..

We've produced a list of good practice, areas of improvement and recommendations relating to dentists between January – March 2023.

Optician – What has worked well?



Treatment and care – experience

13 people gave positive feedback about their experience accessing a dental service. Comments included the quality of treatment and care received, and healthcare professionals being thorough and providing an excellent service.



Staff attitudes

16 people left positive comments about staff attitudes and professionalism when visiting an optician. Comments included continuous service user support, friendly and helpful staff.

Optician – What could be improved?



Management of service

A few respondents (6), left negative feedback regarding the management of the service. Comments included issues with prescriptions and incorrect eye tests, and miscommunication related to notification for glasses being ready to collect.



Treatment and care – experience

Most of the responses we received were positive about staff attitudes and the treatment received when visiting an optician. However, a few comments (5) were left relating to poor treatment and care provided by staff. Comments included lack of communication, increasing costs affecting people's wellbeing, and poor customer service.

Appendix



Demographics

Gender	Percentage %	No of Reviews
Man(including trans man)	30%	102
Woman (including trans woman)	70%	237
Non- binary		
Other		
Prefer not to say	1	0%
Not provided		
Total		340

Ethnicity	Percentage %	No of Reviews
White: British / English / Northern Irish / Scottish / Welsh	80%	250
Irish	0%	1
Any other White background	4%	14
Asian British	3%	9
Chinese	0%	1
Indian	1%	2
Pakistani	0%	1
Black British	4%	11
African	1%	4
Caribbean	1%	2
Any other Black / Black British background	0%	1
Black African and White	0%	1
Black Caribbean and White	0%	1
Any other Mixed / Multiple ethnic groups background	1%	2
Any other ethnic group	4%	13
Total		313

Age	Percentage %	No of Reviews
Under 18	1%	4
18-24	3%	9
25-34	12%	40
35-44	13%	41
45-54	10%	31
55-64	14%	45
65-74	21%	67
75-84	17%	55
85+	9%	29
Prefer not to say		
Not provided		
Total		321

Disability	Percentage %	No of Reviews
Yes	23%	71
No	76%	239
Prefer not to say	1%	2
Not known		
Not provided		
Total		313

Demographics

Long-term condition	Percentage %	No of Reviews
Yes	50%	156
No	48%	150
Prefer not to say	1%	3
Not known	2%	6
Not provided		
Total		315

Sexual Orientation	Percentage %	No of Reviews
Asexual	2%	7
Bisexual	0%	1
Gay Man	0%	0
Heterosexual/ Straight	95%	308
Lesbian / Gay woman	0%	0
Pansexual	0%	0
Prefer not to say	2%	8
Not known	0%	0
Not provided		
Total		324

Religion	Percentage %	No of Reviews
Buddhist	0%	0
Christian	40%	123
Hindu	2%	6
Jewish	1%	2
Muslim	3%	8
Sikh	0%	0
Spiritualism	1%	2
Agnostic	1%	3
No religion	52%	159
Prefer not to say	1%	3
Other religion		
Total		306

Pregnancy	Percentage %	No of Reviews
Currently pregnant	2%	4
Currently breastfeeding	4%	6
Given birth in the last 26 weeks	5%	9
Prefer not to say	2%	3
Not known	1%	2
Not relevant	86%	141
Total		165

Demographics

Area of the borough	Percentage %	No. of reviews
Beckenham Town & Copers Cope Ward	6%	18
Bickley & Sundridge Ward	4%	13
Biggin Hill Ward	3%	10
Bromley Common & Holwood Ward	16%	52
Bromley Town Ward	9%	29
Chelsfield Ward	2%	5
Chislehurst Ward	4%	14
Clock House Ward	0%	0
Crystal Palace & Anerley	3%	11
Farnborough & Crofton Ward	5%	15
Hayes & Coney Hall Ward	1%	3
Mottingham Ward	1%	2
Orpington Ward	24%	75
Penge & Cator Ward	2%	7
Plaistow Ward	0%	1
Shortlands & Park Langley Ward	3%	8
St Mary Cray Ward	2%	6
St Paul's Cray Ward	3%	10
West Wickham Ward	2%	6
Out Of Borough	6%	18
Total		318

Unpaid Carer	Percentage %	No of Reviews
Yes	5%	14
No	95%	286
Prefer not to say	0%	1
Not provided		
Total		301

Employment status	Percentage %	No of Reviews
In unpaid voluntary work only	1%	2
Not in employment & Unable to work	10%	32
Not in Employment/ not actively seeking work - retired	49%	155
Not in Employment (seeking work)	3%	10
Not in Employment (Student)	2%	5
On maternity leave	6%	20
Paid: 16 or more hours/week	24%	77
Paid: Less than 16 hours/week	4%	12
Prefer not to say	1%	4
Not provided		
Total		317

healthwatch

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