

What would a good experience of a health or social care service look like to you?

Stockport Joint Strategic Needs Assessment (JSNA)

Tuesday 12th May 2015

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I wave my wand and there appears
More of everything - save fear and tears
One phone call gets the chance to see
The friendly face of your GP
She uses 'doctor speak' to say
"I'll sort you out if it takes all day"
The pharmacy has what you need.
It works a charm and you've not paid
Or if you should need an operation
It's all explained and there's no waiting
A very old lady with childish ambition
Wants all to be happy and healthy and smiling.



- Anette Sutherland, resident of Davenport





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Healthwatch Stockport Joint Strategic Needs Assessment (JSNA)

Report from: Healthwatch Stockport Public Health Subgroup

Task group: Roy Oliver (Lead), Alan Watt, Tony Stokes, David Atkinson, David Moore, Dr Anand Dutta, Eve Brown, Mike Lappin, Peggy Hall and Sheelagh Peel with support from Gavin Owen and Kirsty Bagnall.

Report Date: May 2015

1. Introduction

Throughout the summer of 2014, Healthwatch Stockport was tasked with gathering the views of the public on what an ideal health care system should look like so as to contribute to Stockport's Joint Strategic Needs Assessment (JSNA).



Joint Strategic Needs Assessments (JSNAs) are assessments of the current and future health and social care needs of the community that could be met by the Local Authority, Clinical Commissioning Group (CCG), or NHS England. JSNA reports must be published and available to the local community to show what evidence has been considered and what priorities have been agreed and why.

The purpose of the JSNA is to improve the health and wellbeing of the local community and reduce inequalities for all communities. The core aim of the JSNA is to develop local evidence based priorities for commissioning.

Before describing the work carried out to support this piece of work, I would first like to congratulate Anette Sutherland on her poem, submitted as her response to what an ideal health & social care service looks like to her. Anette's poem really summed up many of the responses we received from the public on what we want from our local health & social care services. You can read the poem at the beginning of this report or watch a video of Anette reading out her poem by visiting our website www.healthwatchstockport.co.uk/JSNAreport. Secondly I would like to personally thank everyone for their hard work in making the publishing this report a success.

The majority of planning and management of the JSNA was conducted by five JSNA project leads; who formed the project steering group and planned the JSNA work programmes to monitor progress.



As Lead on the Healthwatch Stockport Public Health Subgroup, I took the role as one of the JSNA Project leads, providing an independent community perspective to the group.

Anand Dutta, Deputy Lead on Public Health for Healthwatch Stockport was appointed as project sponsor with the key link to the Healthwatch Stockport membership and Stockport Residents and Mike Lappin represents Healthwatch Stockport on the Pharmaceutical Needs Assessment Group.

The Healthwatch Stockport Public Health Subgroup, were used as the reference group for the JSNA. This group was the regular means by which local residents could inform the ongoing development of the JSNA.

In order to achieve the responsibility of representing the community perspective on local health and social care services to inform the JSNA, we worked closely with key staff from Stockport Council's Public Health to set up a project to collect information about what local people want from their health and social care services.

The decision was made to hold a consultation over the summer months to gather evidence of what people want from their local health and social care services.

We would like to thank all the people who took part in the consultation, your views will help to shape future services, improve the health and wellbeing of the local community and reduce inequalities for all communities.

Healthwatch Stockport is an independent consumer champion created to gather and represent the views of the public. Healthwatch plays a role at both national and local level and will make sure that the views of the public and people who use services are taken into account.

You can get in touch with us by calling on **0161 974 0753**, email us on **info@healthwatchstockport.co.uk**, text us on **07760 365 586**, tweet us at **@HWStockport** using the hashtag **#stockportjsna**, comment on our facebook wall or write to us at **Healthwatch Stockport, Copyrite House, 1 Levens Road, Hazel Grove, Stockport SK7 5DL**.

Roy Oliver
Lead Public Health
Healthwatch Stockport



2. Acknowledgments

The Healthwatch Stockport Public Health subgroup gives thanks to all the respondents who took time to complete our consultation.

In addition, we would like to thank the many organisations who supported us in circulating the survey as well as the many events we were invited to.

Thank you to Stockport Council, Public Health for inviting Healthwatch Stockport to get involved in the work. In particular, thanks to Donna Sager, Deputy Director of Public Health, Eleanor Banister, Head of Public Health Intelligence, Sarah Newsam, Head of Health & Wellbeing at Stockport Council and Catriona Duncan-Rees, Policy and Intelligence Manager at Stockport Council for their invaluable support.

Thank you to the Healthwatch Stockport Events Representatives, Community Champions and Core Group who have been invaluable in supporting the collection of feedback from the public.

The support of all of our stakeholders has been invaluable.



3. Executive Summary

Below is a summary of the results received from the 224 respondents to the survey:

- The highest occurring topic, (38% of comments) was access to appointments, particularly primary care and GP appointments.
- 18% of people wanted good communication and information; about their own treatment, local services and general information about what is available.
- Attitude of staff and the ability of staff to listen were a high priority for many people with 17% of responses referring to attitude of staff in their comments.
- 15.5% of respondents referenced joined up and integrated services in their comments.
- Community services were mentioned within 15.5% of the comments made with doctors and hospital services were mentioned in 14% of responses.
- The majority of responses from LGBT young people were regarding the attitude of GPs to both their sexuality and age.
- The majority of responses from groups representing Black & Minority Ethnic (BME) communities were consistent with other comments received to the consultation although a comment was received on the lack of support for Asian people with mental health conditions.
- For people with a long term condition, access to appointments was important, particularly to identify when it is their time to see the doctor or nurse.
- Although we carried out consultations in the locations of Marple and Stockport Town Centre, there were no discernible differences between responses received from these areas compared to all responses to the consultation.



4. Consultation respondents



During the summer months, Healthwatch Stockport attended six externally hosted events and held two events of its own, contacted 22 identified community groups, covering all 9 Protected Characteristics (age, disability, gender reassignment, marriage & civil partnership, pregnancy & maternity, race, religion & belief, sex and sexual orientation) across a wide geographical range (see appendix iii).

Healthwatch Stockport also visited three groups to speak directly to their members about the consultation.

Overall, 5500 postcards were circulated throughout the local community, via targeted campaigning and circulating to various organisations.

The consultation took the form of a postcard, asking:



Imagine that you have a magic wand and could change the delivery of health & social care services in Stockport. Describe what a good experience of a health or social care service would look like to you in the box below.



People were also given the opportunity to reply using the twitter hashtag #stockportjsna, although only one person replied this way, the hashtag was widely shared across local networks via retweets of the original tweets. During the campaign, Healthwatch Stockport had over 1,700 followers on twitter.

Prior to the consultation period, Healthwatch Stockport attended four Rise to the Challenge events to carry out pre-consultation work. The results from these visits are included within this report. You can read more about the circulation of the survey within section 8 of this report. A blank copy of the postcard is available in appendix ii.

Overall, 224 responses to the consultation were received. The majority of respondents (56%) completed their postcards whilst at an event. Almost a quarter of respondents completed their postcards having received it from a targeted group.

During the consultation, many people responded with specific feedback regarding the use of local services, rather than describing what a good service would look like to them. Where appropriate, this feedback was used to identify what positive experience looked like. All feedback gained about people's experiences of local health and social care services was also fed into Healthwatch Stockport to help prioritise its work programme areas.



5. Key Findings

Many comments raised more than one theme, which is reflected in the total number of themes being greater than the number of comments received:

5.1 Responses to the Joint Strategic Needs Assessment Consultation



Access to Appointments

The highest occurring topic within the comments were access to appointments, with 38% of respondents referencing access in their responses.

- Ideally I would like to phone my doctors surgery at the start of the day and be able to get an appointment that day instead of 2 to 3 weeks hence.

Comments around access to appointments included more provisions for people with learning difficulties, access to dentists, hospitals and most frequently, access to GPs.

- Fast and easy access to primary care help when needed.
- To have quick access to treatment for me and my family also to be able to see my own records. Prompt access to help when needed.

Access to GP and hospital appointments, including same day access, the number of appointments available, waiting times, being able to see their own GP and opening times of GPs were all raised as important by respondents.

- We need a minor injuries/drop in/walk in centre in Stockport like in most other areas. You can never get in to see a practice nurse if you need a dressing...It works in other areas but Stockport closed theirs because you were supposed to go to GP, [then the GP has] no appointments.



Information & Communication

18% of people wanted good communication and information; about their own treatment, local services and general information about what is available.

- More information given on diagnosis and treatment
- It all works great and is there - just need to be more information on the services available.

The need for better communication between staff and their colleagues and between staff and patients/service users, so that everybody is well informed was highlighted several times:

- Communication between hospital staff so that all are informed of changes around patient needs, especially for the [older]/confused patients who cannot take everything in for themselves and communicate changes/needs to relatives/carers. This would improve services by 100%.
- Communication - communication - communication with patients.
- Hospital need to communicate and take notice of what the family say around end of life pathways.

Attitude / Listen

Attitude of staff and the ability of staff to listen were a high priority for many people with 17% of responses referring to attitude of staff in their comments.

Many of the comments focused on the responsibility of staff to care for their patients, wanting staff to be “compassionate and caring” and to “Make sure that people to provide care are ones who really care for others”.

- [A service] that is accessible to everyone, treats everyone with respect and takes time to get to the real issue. Staff who are caring, friendly and treat everyone with respect and listen to concerns.

Many respondents raised the need for health professionals to talk to patients as individuals with politeness and understanding.

- I would like doctors and health professionals to listen to you as an individual more and give you a bit more time so you don't feel rushed and not interested in.
- Listened to and take an interest. Nothing more annoying than a GP who is not listening. Give me time to speak to my GP.



Several people commented that they would like to see one person to support them through their journey of care. “It would be nice to have a consistent care package with a named staff/carer so that some form of relationship can be formed, having different people around can be unsettling.”

Phrases referring to empathetic care were used in many responses, with 13.5% of respondents using words such as, “Support”, “Understand”, “Speak”, “Listen to people” and “Empathy”.

- Empathy, respect, dignity, caring attitude and time, 5 things that anyone providing health and social care are 100% committed too at whatever level they are providing the service.

Integration

Joined up and integrated services was high on the agenda of 15.5% of respondents, with comments reflecting a need for services to work more closely together.

- Totally integrated with all service providers. Relying on a fully functional I.T. system which informs all providers about relevant data. More use of I.T. at point of delivery
- A service that was more joined up, integration of health as a wider issue than hospital and doctors. I think the NHS does a brilliant job as is - that funding should be locked as pensions are.
- Communication between professionals and service users in various appropriate forms. Multi-disciplinary team. Joint assessments.

Many comments also tied information, communication and integration together, wanting to be kept informed on their treatment, including where they are on waiting lists and all services providing treatment to be able to access information about their treatment.

A One Stop Shop to offer information on local services was also a priority for several respondents.

- One stop shop to identify who will help me to obtain the health and social care I need, plus help me get it.
- Where health and social care share the same building and staff develop better understanding of each other’s work. Where integration really means working together. No more silly useless talk of seamless services

The speed of access to care was also outlined, with many respondents wanting care to be provided quickly when needed so that “neglect or abuse is picked up straight away” and “Fast and easy access to primary care help when needed”.



Community Services

15.5% of responses mentioned community services in their responses.

Many respondents wanted services available in their communities, focusing on prevention to support people to stay in their own homes rather than progress to hospital services.

Some respondents raised concerns around funding for these services, with many stressing their importance within the health and social care system.

- Help to deal with health needs to be delivered in a different way, community services.
- Much more support for communities to better support people locally in their own communities.
- Preventative medicine where people's problems can be sorted out early without a stay in hospital. Look after people at home if possible so community care must be supported.

Doctors & Hospitals

Hospital Services received 14% of responses with Doctors being mentioned by 13% of respondents.

People spoke about Doctors generically, so it was difficult to ascertain whether this was GP or hospital doctors, however, running themes throughout the consultation regarding hospitals and doctors included:

- seamless services with support in the community to support people before their needs escalate
- the need for good communication: between staff and patients, staff and carers and between departments
- appointments that are timely and well organised

Discharge from hospital was a priority for many respondents', from discussions with patients, carers and families before discharge to the quality of after care provided.

- A discharge from hospital would involve discussion with patient and carer in an open and honest way. Options would be explained and discussions would be noted. No discharge would take place at night and people living alone would be escorted and supported.

Several respondents focused on the need for more support for older people both in the community and in hospital.

- First class facilities for older people and disabled people. Full training for care staff and all staff whatever position, accountable for their actions... 7 day a week hospital appointments, all equipment in use, scans MRI in full use 24/7. Prevention-quick diagnosis.



Additional Themes

In addition to the points identified above, the following themes were identifiable throughout the comments:

- **Equality** - 10% of comments mentioned the need for equitable services to all.
- **Spending & Privatisation** - There were concerns raised throughout the consultation regarding spending, cuts and privatisation. Many of the respondents who raised funding were concerned about the lack of money available and the need to fund support services. Spending, funding or privatisation was mentioned by 9% of respondents.
- **Older People** - 9% of respondents mentioned older people in their comments. The majority of these comments called for more support and care for older people. Many of these comments were received during events from adults of working age.
- **Training & Professionalism** - 8% of comments covered the training and professionalism of staff.
- **Mental Health** - 7% of comments mentioned mental health. Parity of Esteem, where mental health conditions are treated the same as physical health conditions was mentioned several times as well as many of the issues raised above around access to appointments, integration of services etc.



5.2 Specific Demographic Responses to the Joint Strategic Needs Assessment Consultation

Several Healthwatch Stockport member groups were specifically targeted, based on the information they had provided when joining the organisation, to ensure a wide range of demographic representation from across the borough. Due to the number of respondents, the three demographic areas where we are able to identify specific needs were Lesbian, Gay, Bisexual and Transgender (LGBT) youth, Black & Minority Ethnic (BME) communities and long term conditions (Stroke).

LGBT Youth

The majority of responses from LGBT young people were regarding the attitude of GPs to both their sexuality and age.

Consistent with other responses, many respondents within this demographic wanted good communication and trust between patient and their GP. In particular, many respondents within this demographic wanted consistency when visiting their GP.

- Having a doctor you can trust. I don't want to 'come out' to every doctor.

However, others felt that they did not mind having different GPs, as long as they were treated with respect and assumptions on their sexuality or partners were not made. There was a general feeling that doctors should be made more aware of LGBT issues.

Although there was general agreement that sex education within schools had improved, there were some concerns that some schools only covered heterosexual relationships.

As young people, many commented that they wanted to be reassured by their GP and listened to. During our visit, one group member explained that she went to her GP with a concern several times by herself, being 'brushed off' and only when she had gone with her parent, she was then taken seriously and diagnosed.

- My doctor has told me I am being melodramatic and to "grow up". I wouldn't talk to her about LGBT issues.

BME Communities

The majority of responses from groups representing Black & Minority Ethnic (BME) communities were consistent with other comments received to the

consultation. The majority of comments received focused on timely GP and hospital appointments and better communication between services

- Efficient, fit for purpose, value for money and dedicated to equality of services.



- How people who don't speak English are treated [and] spoken to. Research is needed to understand the needs, barriers faced by different communities. Understanding the communities in Stockport - changing communities. Looking at how access for homecare is, availability of support suitable/meet needs of diverse communities.

Specific to the BME Community, a comment was received on the lack of support for Asian people with mental health conditions. Comments were also received on services being culturally sensitive.

Long Term Conditions

The Stroke Association supported the consultation by circulating the postcard to their members. Responses from members of the The Stroke Association are consistent with other comments with many responses focusing on access to appointments.

For people with a long term condition, access to appointments was important, with a focus on more support for patients to identify when it is their time to see the doctor or nurse.

- Waiting rooms. Get numbered ticket on arrival (to preserve confidentiality) show number on screen is easier for those with Aphasia or hearing problems than loudspeaker announcements.
- The electronic board displays the patient's name, doctors name and surgery room number. [It] is displayed too quickly for some stroke patients.

Geographical

Although consultations were carried out in the locations of Marple and Stockport Town Centre, there were no discernible differences between responses received from these areas compared to all responses to the consultation.



6. Conclusion



In keeping with feedback received by Healthwatch Stockport over the years, attitude of staff and the ability of staff to listen were a high priority for many people. This is not surprising, as Healthwatch Stockport is well aware of the importance of staff attitude as to whether a person's experience of a service is positive or negative. We know that a negative or neutral experience can become a positive experience based solely on a friendly staff attitude.

Access to GP appointments came out on top, with a focus on same day access, the number of appointments available, waiting times, being able to see their own GP and opening times of GPs. Although mentioned, evening or weekend appointments didn't feature highly within the responses.

Unsurprisingly, good communication and information was raised frequently in responses, with respondents wanting better communication about their own treatment, local services and general information about what is available.

With budgets being reduced and public expectations rising, integration is high priority for commissioners and providers or local services; to make the most of resources available to them and to provide a streamlined patient experience. Therefore, it is encouraging that many respondents referenced joined up and integrated services in their comments.

It is concerning that a high number of LGBT young people who were consulted felt that communication was an issue with their GPs, particularly that a high proportion of young LGBT people felt they were not listen to or taken seriously.

Pivatisation was worrying to a number people spoken to during the consultation. Some people voiced opinions that privatisation had gone too far whilst others felt they were not getting enough information.

Overall, the responses received during the consultation generally supported the priorities for local health & social care services.

- Healthwatch Stockport would encourage local service providers to take the findings of this report into account when planning future services..

Healthwatch Stockport will continue to monitor the public's feelings on these issues at the events we attend over the coming months.



7. References

2012 Update of Key Trends, Stockport JSNA 2011, September 2012

<https://www.mystockport.org.uk/Resource.aspx?ResourceID=207>

Priorities and Key Findings, Stockport JSNA 2011 & 20th Annual Public Health Report, April 2011

<http://stockportccg.org/wp-content/uploads/2012/01/09.02-2011-JSNA-Priorities-and-Key-Findings.pdf>

Public Health in Stockport, Presentation given by Donna Sager, Deputy Director of Public Health and Eleanor Banister, Head of Public Health Intelligence, 2014



8. Circulating the Survey

Overall, 5500 postcards were circulated to the local community, via targeted campaigning and using the Healthwatch Stockport database. Postcards were circulated to Healthwatch Stockport members, community centres, day centres, children's centres, dentists, GP practices, ophthalmic practices, pharmacists, sheltered housing, social clubs, supported housing, voluntary organisations, working men's clubs, leisure centres, Patient Reference Groups, care homes, schools and nurseries.

Prior to launching the consultation, Healthwatch Stockport attended four Rise to the Challenge Events hosted by Stockport Council. "What matters the most to you when using a health or social care service" was asked during events.



Healthwatch Stockport attended the following external hosted events to collect feedback during the consultation period:

- Saturday 21st June - Marple Carnival
- Tuesday 24th June - Signpost Stockport for Carers Carer's Day
- Saturday 19th July - Stepping Hill Hospital Back to the future - open day
- Saturday 19th July - Hazel Grove Carnival
- Saturday 26th July 2014 - Stockport Carnival
- Tuesday 12th August 2014 - Celebrating Diversity Day

On Tuesday 15th July and Wednesday 27th August two Panini Football Sticker swap events were held. During the events, families were offered the opportunity to get together to swap Panini Football Stickers while gathering feedback for the JSNA. The second event was a huge success and received local media coverage.

The Healthwatch Stockport Public Health Group identified 22 Healthwatch Stockport member groups based on the information they had provided when joining the organisation. The following groups were specifically targeted to ensure a wide range of demographic representation from across the borough:

- African & Caribbean Community Association
- Age UK Stockport
- Beechwood Cancer Centre "Beanie" Group
- Bluebird Care Stockport South
- Service User Network Stockport (SUNS)
- Stockport Progress & recovery Centre (SPARC)
- Cheadle Heath Community Association.



- Evron Centre/Oasis for Carers
- Muslim Welfare Centre
- Signpost For Carers
- Stockport Maternity Services Liaison Committee
- Laywood Women's Group
- Carers of Adults with Learning Disabilities (CALD)
- Mellor Society
- Action for Sick Children
- Alzheimer's Society
- Walthew House
- Indian Association
- Parents in Partnership
- Gatley & Cheadle Diabetes Support Group
- Wednesdays LGBT Youth Group
- Ebony & Ivory
- Stockport Advocacy

There was a high level of local press coverage during the campaign, with five local publications running with the first press release (appendix iv) and three running with the second regarding the Panini Sticker Swap events.

Local press coverage of the work was as follows:

- *Have a Say on improving town's health services*, Stockport Express, July 2014
- *Have a Say on improving town's health services*, Stockport Times East/West, July 2014
- *Volunteer Roy Leads the Way*, Stockport Independent, July 2014
- *Healthwatch Leads the Way on Health & Wellbeing*, Viewpoint Newsletter, August 2014.
- *Swap your Panini Stickers*, Manchester Evening News, August 2014
- *Big Sticker Event by Watchdog*, Stockport Express, August 2014
- *Swappers Swarm for Football Stickers*, Stockport Independent, September 2014

Articles on the work were also regularly published within the Healthwatch Stockport own bi-monthly newsletter, *Healthwatch News*.

Healthwatch Stockport [May 2015]



9. Distribution

This report will be distributed to the following:

- Director of Stockport Public Health
- Local Authority Quality Team
- Health and Wellbeing Board
- Health & Wellbeing Scrutiny Committee
- Adults and Housing Scrutiny Committee
- LA contracting department
- Stockport Safeguarding Board
- Stockport Clinical Commissioning Group
- Care Quality Commission
- Healthwatch England
- Voluntary Organisations

African & Caribbean
Community Association
Age UK Stockport
Beechwood Cancer Centre
"Beanie" Group
Bluebird Care Stockport South
Service User Network
Stockport (SUNS)
Stockport Progress & recovery
Centre (SPARC)

Cheadle Heath Community
Association
Evron Centre/Oasis for Carers
Muslim Welfare Centre
Signpost For Carers
Stockport Maternity Services
Liaison Committee
Laywood Women's Group
Carers of Adults with
Learning Disabilities (CALD)
Mellor Society

Action for Sick Children
Alzheimer's Society
Walthew House
Indian Association
Parents in Partnership
Gatley & Cheadle Diabetes
Support Group
Wednesdays
Ebony & Ivory
Stockport Advocacy

- Healthwatch Stockport website www.healthwatchstockport.co.uk



Appendix i - About Healthwatch Stockport

Healthwatch is an independent consumer champion created to gather and represent the views of the public. Healthwatch will play a role at both national and local level and will make sure that the views of the public and people who use services are taken into account.

Healthwatch Stockport is a membership organisation run by volunteers with an interest in health & social care.

They are supported by a team of staff to offer help to members carrying out activity on behalf of the organisation. Healthwatch Stockport is part of a network of other local Healthwatch organisations including Healthwatch England, a national body.

Healthwatch Stockport has been given powers in legislation to help them carry out their role.

These include being able to:

- Enter & View places where publicly funded health and social care takes place;
- Promote and support local people to be involved in monitoring, commissioning and provision of local care services;
- Obtain local people's views about their needs for and experience of local care services;
- Tell agencies involved in the commissioning, provision and scrutiny of care services about these views;
- Produce reports and make recommendations about how local health and care services could or should be improved;
- Have a seat on the local authority statutory Health & Wellbeing Board where they are an important contributor to the local work on reducing health inequalities;
- Help Healthwatch England carry out its role as national champion by telling it about the views and experiences of local people;
- Work with Stockport FLAG, who provide the information and advice function to signpost people to appropriate services.



Appendix ii – JSNA Postcard

hospitals GPs care homes dentists pharmacists home care opticians day centres

healthwatch
Stockport

Imagine that you have a magic wand and could change the delivery of health & social care services in Stockport. Describe what a good experience of a health or social care service would look like to you in the box below.

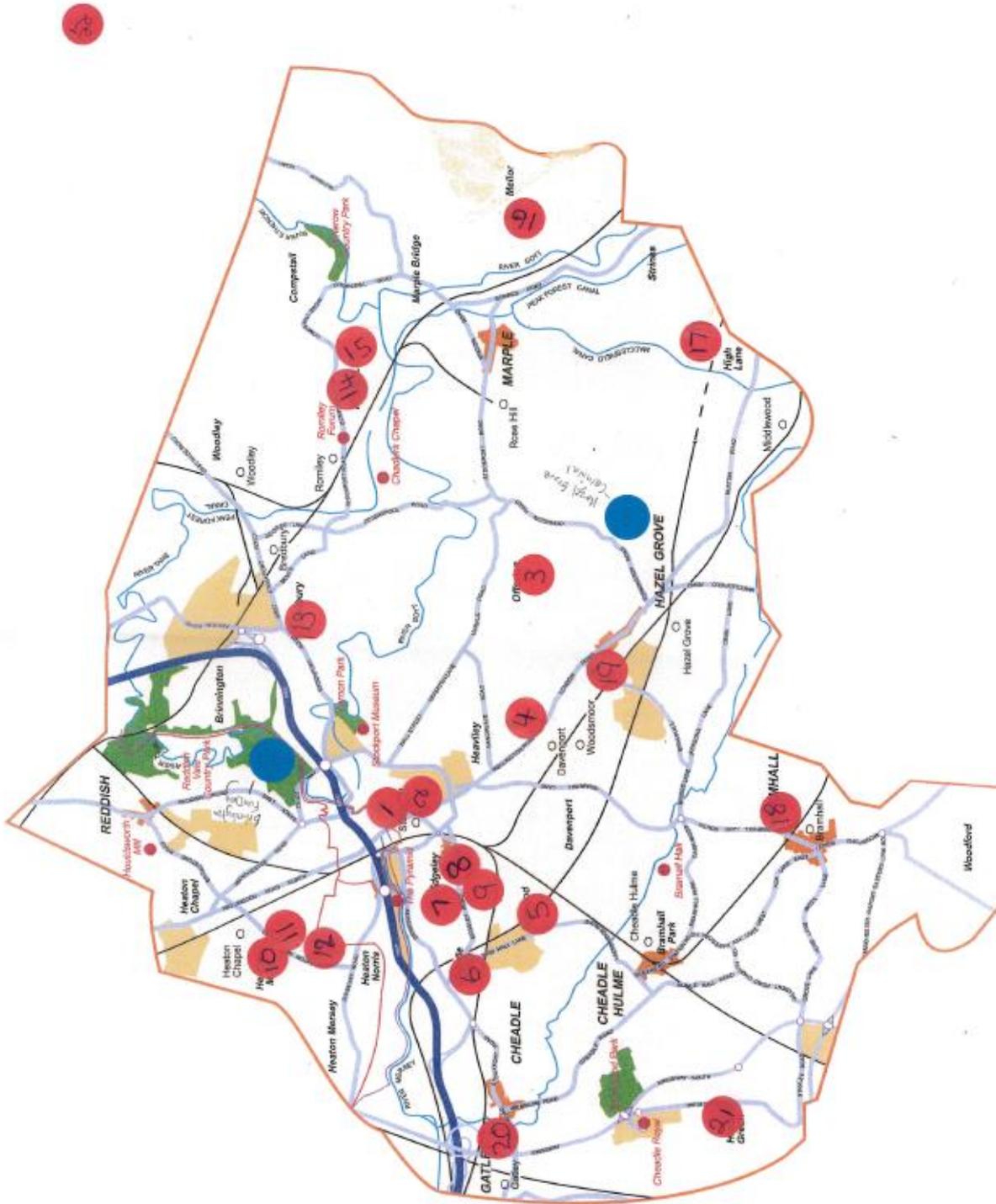
Just add your response above and pop this postcard in the post (no need to use a stamp) or tweet your response with the hashtag #stockportjsna by 1st September 2014 to be in with a chance of winning a £50 shopping voucher.

For more information visit www.healthwatchstockport.co.uk/jsna

pharmacists home care opticians day centres hospitals GPs care homes dentists



Appendix iii – Mapping of targeted community groups





Appendix iv – Healthwatch Leads the way on Health & Wellbeing

PRESS RELEASE

27th June 2014

Healthwatch Leads the way on Health & Wellbeing

A Hazel Grove resident has been chosen to represent the community in meetings with health bosses to improve the services available to support local people.

Roy Oliver, a volunteer member of Healthwatch Stockport, will spend his summer collecting views from Stockport residents about local services, through a series of events, group visits and a specially designed competition.

These views will then be fed back to bosses at Stockport Council and Stockport CCG to help them when they are designing local health and social care services.

Roy said, “As an independent organisation created to gather and represent the views of the public, Healthwatch want to make sure that the voice of local people is heard by the top bosses commissioning these services.

We want to know what you want from your local services as this is a real opportunity to shape the way they are designed.”

As part of the work, Roy and his volunteer team have designed a postcard competition to find out what a good experience of a health or social care service looks like to residents of Stockport. The prize is a £50 shopping voucher.

The aim of the work - called the Joint Strategic Needs Assessment (JSNA) - is to help health bosses find out the factors that impact on the whole community’s health & wellbeing.

The work will help to design a local health and social care system which will improve the health & wellbeing of the local community and reduce inequalities for all ages.

To request a copy of the postcard, or to speak to Roy about visiting your group, call 477 8479 or email info@healthwatchstockport.co.uk. You can also enter the competition by tweeting your answer along with the hashtag #stockportjsna.



Appendix v - Costings for Healthwatch Stockport involvement in JSNA

Printing of Postcards	£	402.26
Cost of postage	£	22.42 (freepost return)
	£	220.50 (circulation)
Prize voucher	£	50
Volunteer/Staff time	£	337.05 (events)
	£	481.50 (office)
Total	£	<u>1513.23</u>

[Ends]