

Engagement intelligence and insight form

This proforma has been created to record engagement activity in the East Riding of Yorkshire, allowing insight and intelligence gathered to be shared across the East Riding Health and Care Committee work programmes (see 15.).

No patient/public/client identifiable information (other than work related names and contact details) should be included.

Please send your completed proforma to hnyicb-ery.pmo@nhs.net

Thank you

1.	Name and organisation	Emma Shakeshaft, Humber and North Yorkshire ICB
2.	Aim of engagement	Using the annual Carers Event in Hull, the Integrated Care Board Communications team spent time listening to local carers, and those being cared for, about their experiences, what they would like to see on NHS websites like Let's Get Better and what one thing might improve access to care.
3.	Date of engagement exercise	12 June 2024
4.	Type of engagement: (survey/focus group/visit/conversation/ co-production session/workshop)	We used a stand at the event to facilitate discussions
5.	Which area of the East Riding does this focus on?	Though primarily centred on Hull – carers from the surrounding East Riding areas were present. The learning and insight from a carers point of view is universal.
6.	Which group(s) did you engage with	There were around 200 individuals at the event, and we interacted with around 30 people - from asking for a simple comment to having in-depth conversations
7.	How many people were involved (if known)	Around 30 people interacted with the stand.
8.	Please give a headline summary of intelligence gathered What information would you like to see on NHS websites - for example, the ICB's "Let's Get Better" website? <ul style="list-style-type: none"> • Carers peer support contacts • A central hub for carers • What kind of help do you get if you are registered as a carer – registering as a carer at GPs. 	

- Access for organisations to apply for funding to continue to keep charity groups going.
- Trauma informed information and how to access.
- Transport help. What is available?
- Courses we can do to fit around caring and how to access them.
- Who will look after my cared for person if I am ill?
- Financial advice for carers - how much does health and care cost - estimated costs of day centres.
- Access to things like life coaching - why can't we have a career, social life etc like everyone else.

What one thing would you want to change about access to health services as a carer?

- We need more GPs.
- Greater flexibility for appointments for carers at GPs
- GP appointments not being online only for booking.
- Being told to ask a neighbour to book online appointments.
- Think about digital exclusion – offer choices so we don't have to rely on family members who are more digitally aware.
- For GPs to recognise Carers more
- Carers own needs to be looked after.
- Not feeling listened too, poor communication makes life harder.
- Not having to wait for hours in A&E with patient who has a letter from a GP only to have the GP diagnosis confirmed 8 hours later!
- Valuing the parents' knowledge when booking/trying to book an appointment.
- All electronic systems to be linked, especially health and social care.
- Appointments for carers, what about having flexibility accessing other GP practices within PCN?
- Things to be adapted for people with a learning disability – easy read – reasonable adjustments.
- Need a service for children and young people similar to the Jean Bishop Centre
- Better access to hydrotherapy pools for mobility/wheelchair users
- Easier access to support for carers.
- Consistency of care
- Appropriate environments for people with additional needs.
- Needing to give permission for information on cared for person. If they cannot do this, (capacity, mute etc.) it makes it difficult.
- Having appointments together with our cared for person so we don't have to go twice.
- I previously registered as carer but has not made a difference with the GP practice.
- More respite
- Brilliant support – how Symphonie – two staff members came to house and built trust and do Annual Health Checks – need more like this.
- Carers shouldn't just be defined as carers, need more options in life to be happier in themselves.
- Hull's Jean Bishop centre has been amazing – need to raise awareness of how to access.

The case studies are Hull-focused but some of the issues could be seen as universal for carers and those cared for:

Case study one:

Spoke to a long-term carer (in 60s) for her sister who has health complications herself. She has recognised the need to be proactive with her health and lifestyle, following a cancer operation, to be able to care for her sister. She has had a full health check-up from her doctor who diagnosed she was coeliac. As a result, she had completely changed her diet and lost four stone in weight. She struggles to find places to eat gluten free. She tries to take her sister on holiday twice a year and is grateful to disability friendly places in Blackpool and wishes there were more places like the one she visits where she feels that the family isn't a burden.

She says she gets very good support from her practice which is at Wilberforce Health Centre – The Quays.

Case study two

This was a woman in her late 30s who has a 15-year-old son with an acquired brain injury that has left him with a learning disability, serious trauma and trust issues. She describes her son's needs as 'niche' and that she is living with the guilt of the shaking injury which happened because of domestic abuse by her former partner. 'His trauma is my trauma'.

She praised the unique outreach service that the Oaks surgery have that has taken time to build trust with her son to be able to carry out his annual health check. She described it as a 'non-healthcare professional' approach. Which has worked well. He is unable to have eyesight tests or dentist appointments as he attacks some health professionals he doesn't know. In terms of her own life – she describes her life as being lost in herself with no time to live for herself. she hasn't been able to have a career and thinks whether she would like a job stacking shelves to escape from the day to day caring (she also has a 6-year-old son). I wondered if she had been getting counselling or career advice. She has been on a few courses for parents and takes an interest in new developments in social care and fostering. She feels she needs more than IAPT that she has had in the past.

She said the Hull area is well provided with local groups which she is thankful for but still feels she and her son fall through the gaps a bit. She thought that health clinics at the charity groups her son was familiar with would be a good idea.

The safeguarding lead has taken her details to be able to speak with safeguarding and carers forum on her behalf. She might make a good candidate for the Voices of Lived Experience.

Case study three

A lady caring for her husband in his 60s who had a Marfleet GP.

She wanted very much to have hydrotherapy sessions for him but the only thing available was the pool at Frederick Holmes which was not suitable for him getting in and out as a tall man.

We talked about the Jean Bishop Centre as her husband is fairly frail and she said she would speak with her GP about a referral if he was suitable.

9.

Did your activity involve:

(a) People with protected characteristics:

<https://www.equalityhumanrights.com/equality/equality-act-2010/protected-characteristics>

(b) People from inclusion groups *(This includes people who experience homelessness, drug and alcohol dependence, vulnerable migrants, Gypsy,*

There were a number of people present who shared their comments with protected characteristics in terms of their age, race and disability (but no obvious inclusion groups.)

	<i>Roma and Traveller communities, sex workers, people in contact with the justice system and victims of modern slavery.)</i>	
10.	Other partners involved	Hull Carers Forum
11.	How could this be followed up?	The safeguarding lead has taken details for case study 3 to be able to speak with the carers forum on her behalf. She might make a good candidate for the Voices of Lived Experience.
12.	Contact details for follow up	Emma.shakeshaft@nhs.net
13.	Reports/links/further info	N/A
14.	FOR OFFICE USE Do we have BI data that supports this insight? Provide links	
15.	Which Health and Care Committee work programme(s) is it best aligned to? a. Bridlington Place-based Programme b. Inclusion Groups c. Complex Case Management d. Integrated Neighbourhood Teams e. Weight Management f. Rural and Coastal Communities	Integrated Neighbourhood Teams Rural and coastal communities
16.	Uploaded to JSNA database	Yes/no date

Who completed the form: Emma Shakeshaft

Date: 9 July 2024