



Borough of Telford and Wrekin

Health Scrutiny Committee

Thursday 25 April 2024

2.00 pm

Council Chamber, Third Floor, Southwater One, Telford, TF3 4JG

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Committee Members:	Councillors D R W White (Chair), O Vickers (Vice-Chair), N A Dugmore, S Handley, L Lewis, G L Offland, R Sahota, S Syrda and J Urey
	Co-optees H Knight, D Saunders and S Fogell

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7.0	Big Conversation	3 - 62
	To receive a report on the Big Conversation campaign from the Shropshire, Telford and Wrekin Integrated Care Board.	
9.0	Communications, Marketing and Engagement in the NHS	63 - 120
	To receive a report on communications, marketing and engagement in the NHS from the Shropshire, Telford and Wrekin Integrated Care Board.	

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**Integrated
Care System**
Shropshire, Telford and Wrekin



**Shropshire, Telford
and Wrekin**

Big Health and Wellbeing Conversation Engagement Findings: Telford Health Scrutiny

Agenda Item 7

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Director of communications and engagement

April 2024

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Introduction



Background and context

- In February 2023, NHS Shropshire, Telford and Wrekin launched a 'Big Health and Wellbeing Conversation' to help it understand what is affecting health and wellbeing and what would improve the experiences of local health and care services.
- To gather the views of the local community and stakeholders, we held a series of public events, focus groups, stakeholder events and an engagement survey.
- This summary presentation of findings details the different activities we conducted and presents the findings from the feedback shared.



Communications and involvement



Number of respondents

Engagement survey

2,681

(401 responses captured by our
voluntary sector partner)

Public events

242

Stakeholder events

Approx. 110

Audio recordings of people
wanting to engage in the Big
Conversation

75

People making personal
pledges to improve their health
and wellbeing

72

Targeted public engagement
(Seldom heard groups)

365

Summary of findings



Public events

Key finding:

Public were concerned about accessing services, appointment availability, and awareness of services.



Key themes from the targeted events

Consider the need to support patients while they are on waiting lists

Consider the need for easier access to information about patients' own health

Consider focusing more on mental health services

Concerns over the lack of provision of services locally

Face-to-face care is required for better diagnosis of certain conditions

Consider improving communications between services

Concerns over the difficulty of getting appointments with GPs

Summary of findings from the public events and targeted public engagement

Page 12

Concerns raised around difficulty accessing services

- Face-to-face care is sometimes required, especially for examinations and accurate diagnosis.
- Patients found it difficult to get an appointment.
- Patients stated there is variation in accessing services and seeing a doctor.
- Concerns over transport services were also raised.

Feedback on services

- Participants stated there is a need to raise awareness of where people can get the right type of support.
- Concern over the lack of provision and decline of local services.
- Consider the needs of vulnerable groups.
- Community services are useful (for example: group fitness classes, warm spaces, and local farms).

General feedback

- Participants stated services need to work together better.
- There is need for greater joined-up care and better communication across services.
- Confidence with technology differs among patients, with those low in confidence being more hesitant to adopt its use.

Stakeholder events

Key finding:

Improvements are required around staff retention and collaboration between providers and accessing health services.



Stakeholder events

Staff

- Ensure staff feel, safe, valued and supported
- Improve staff progression, development and training
- Support staff with their cultural and religious requirements
- Greater integration and collaborative working

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Improve access to services

- Enable people to access other support and services while they wait for services
- Greater focus on children and young people and understand their needs to give them the resilience to develop a trauma-informed system
- Focus on prevention and early intervention through continual support, helping avoid access only being granted at crisis point.

The operational system

- Improve how we record and use data
- Improve how we work together across the system
- Build and develop collaboration between providers, being sure to explain the benefits of bringing care closer to home
- More strategic investment.

Areas for improvement

- Clearly evidence the benefits of preventative work
- Pooled budgets could assist with ensuring proper support for prevention work
- Better use of IT and data
- Educating the workforce and the population
- Set up pilot schemes on a small scale, measure their impact and roll this out across the system.











Engagement survey

Demographic and geographical profile of respondents



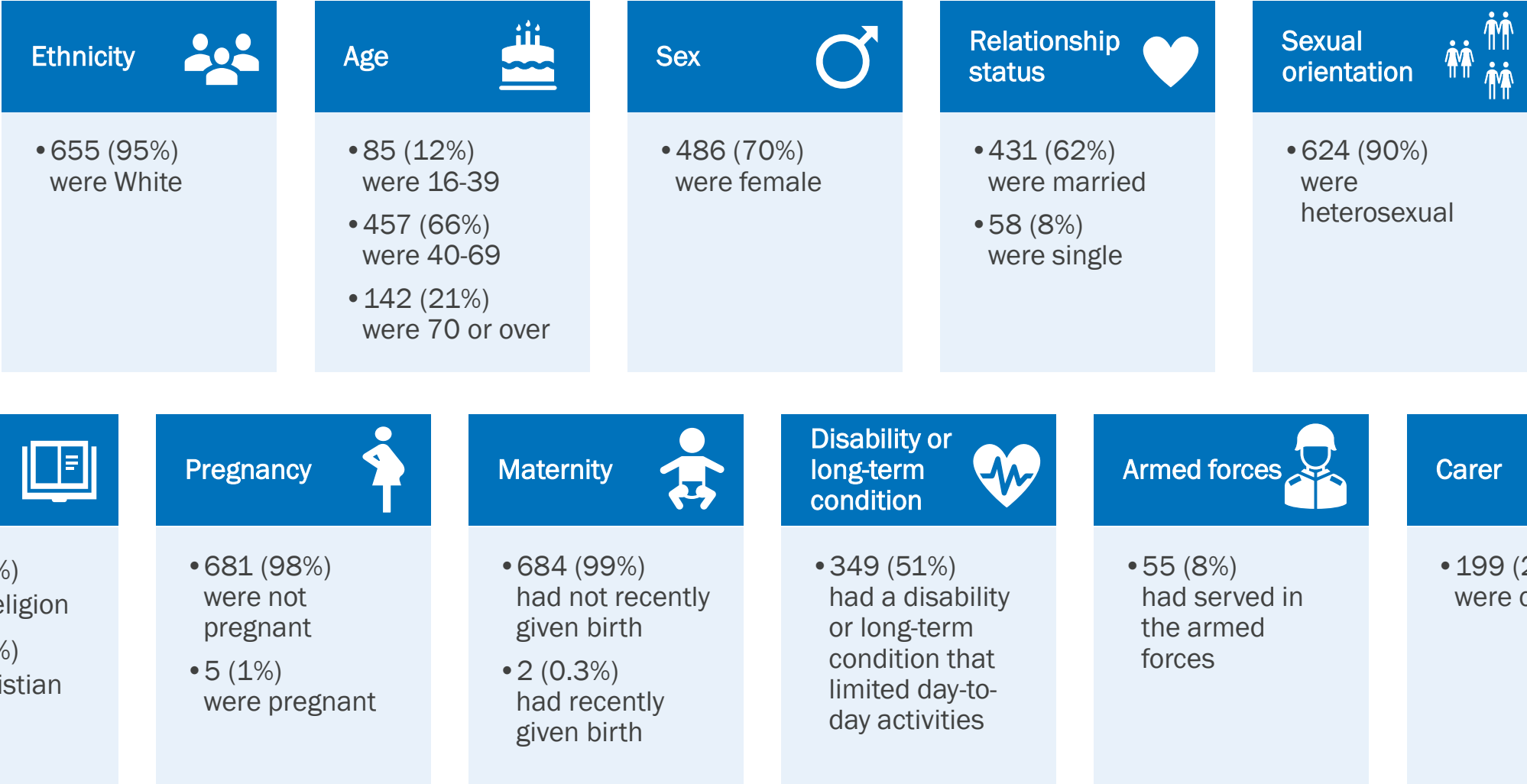
Demographic profiling

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<div><div>Ethnicity</div><div></div></div> <div><ul style="list-style-type: none">• 2,437 (93%) were White</div>	<div><div>Age</div><div></div></div> <div><ul style="list-style-type: none">• 592 (23%) were 16-39• 1,483 (57%) were 40-69• 517 (20%) were 70 or over</div>	<div><div>Sex</div><div></div></div> <div><ul style="list-style-type: none">• 1,763 (67%) were female</div>	<div><div>Relationship status</div><div></div></div> <div><ul style="list-style-type: none">• 1,594 (61%) were married• 285 (11%) were single</div>	<div><div>Sexual orientation</div><div></div></div> <div><ul style="list-style-type: none">• 2,311 (88%) were heterosexual</div>	
<div><div>Religion</div><div></div></div> <div><ul style="list-style-type: none">• 1,013 (39%) had no religion• 1,330 (51%) were Christian</div>	<div><div>Pregnancy</div><div></div></div> <div><ul style="list-style-type: none">• 2,460 (94%) were not pregnant• 126 (5%) were pregnant</div>	<div><div>Maternity</div><div></div></div> <div><ul style="list-style-type: none">• 2,480 (94%) had not recently given birth• 112 (4%) had recently given birth</div>	<div><div>Disability or long-term condition</div><div></div></div> <div><ul style="list-style-type: none">• 1,157 (44%) had a disability or long-term condition that limited day-to-day activities</div>	<div><div>Armed forces</div><div></div></div> <div><ul style="list-style-type: none">• 283 (11%) had served in the armed forces</div>	<div><div>Carer</div><div></div></div> <div><ul style="list-style-type: none">• 891 (34%) were carers</div>

Demographic profile overview: respondents from the Telford and Wrekin area

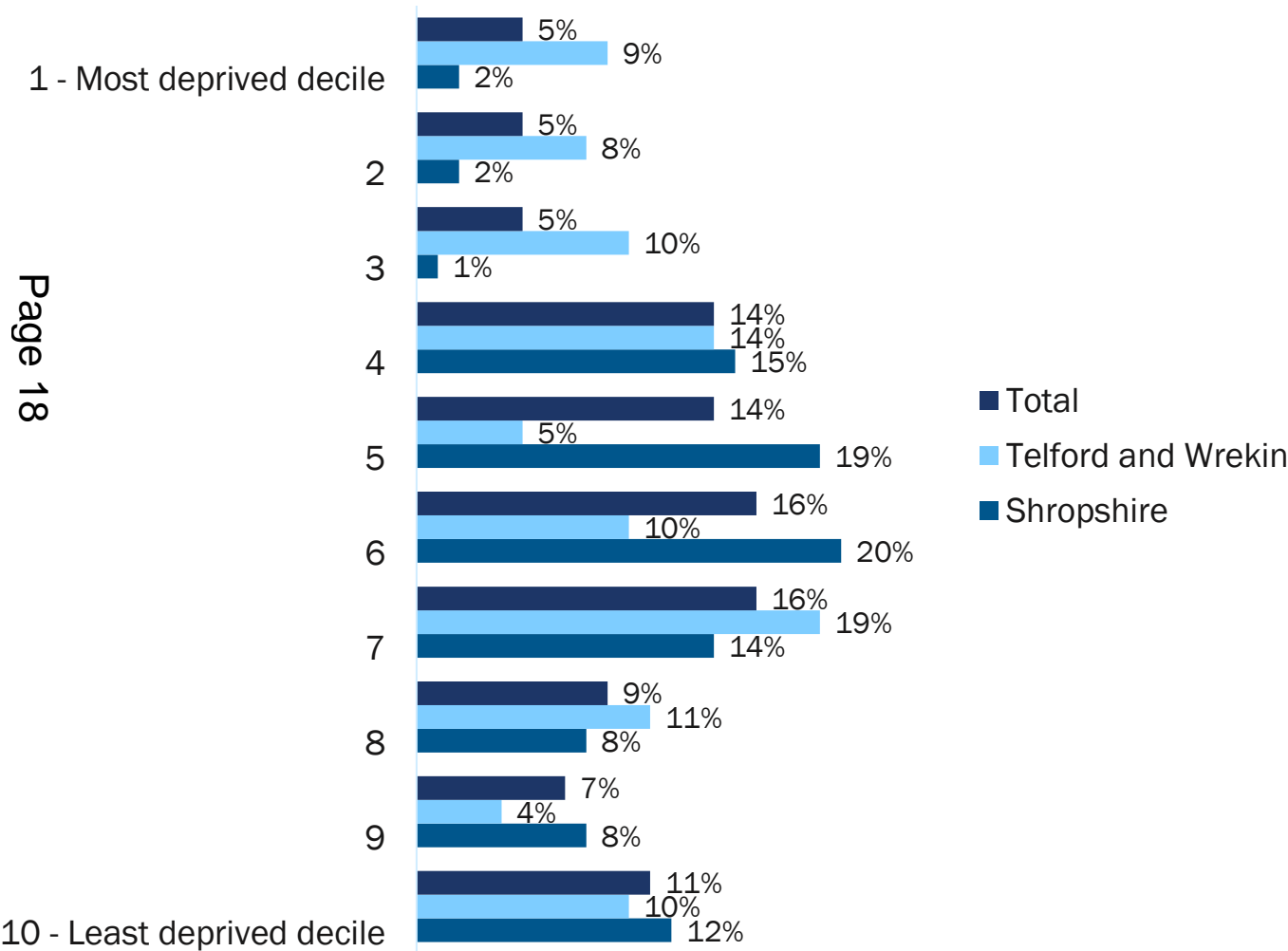
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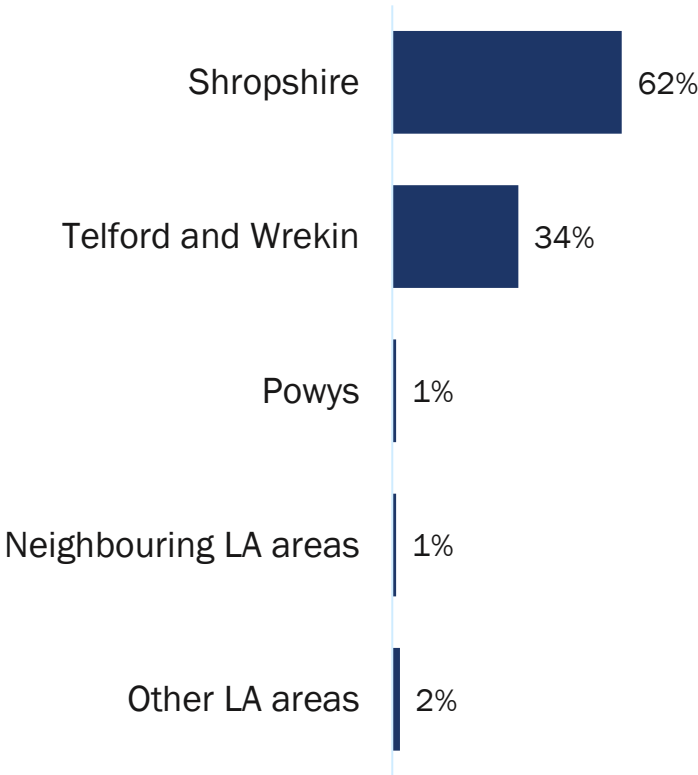
Engagement survey respondent geographical profiling

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Index of Multiple Deprivation



Local authority (LA)

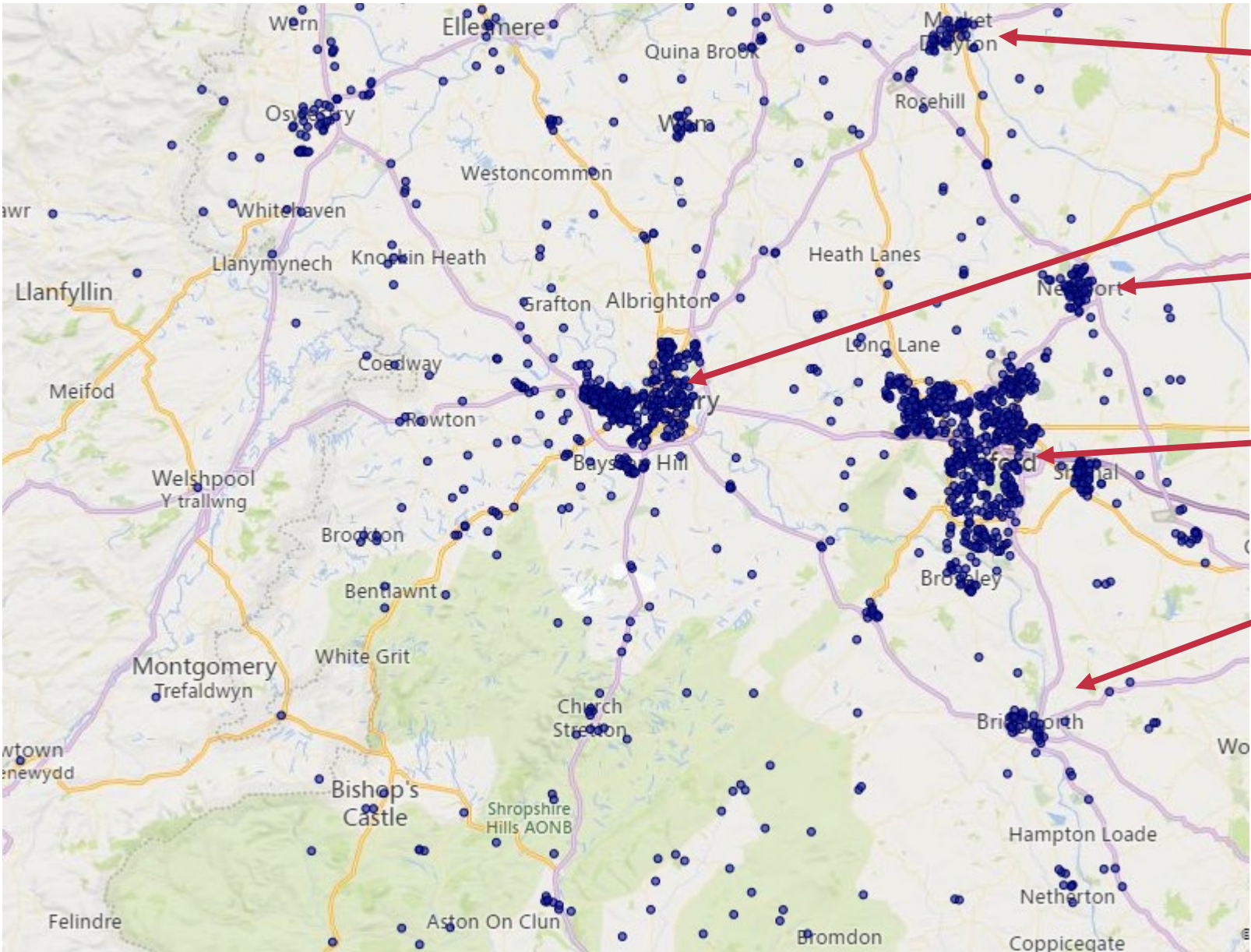


Index of multiple deprivation profiled from postcodes. Base: total – 1,992, Shropshire – 602, Telford and Wrekin - 58
Local authority profiled from postcodes. Base: 2,627

Engagement survey respondent geographical profiling

Postcode map showing the location of survey respondents across Shropshire, Telford and Wrekin

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Market Drayton

Shrewsbury

Newport

Telford

Bridgnorth

Experiences of using primary care services

Key finding:

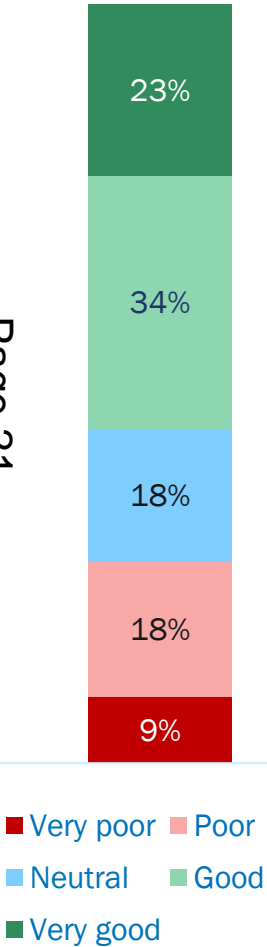
Out of all primary care services, GP services users have the most varied experiences.



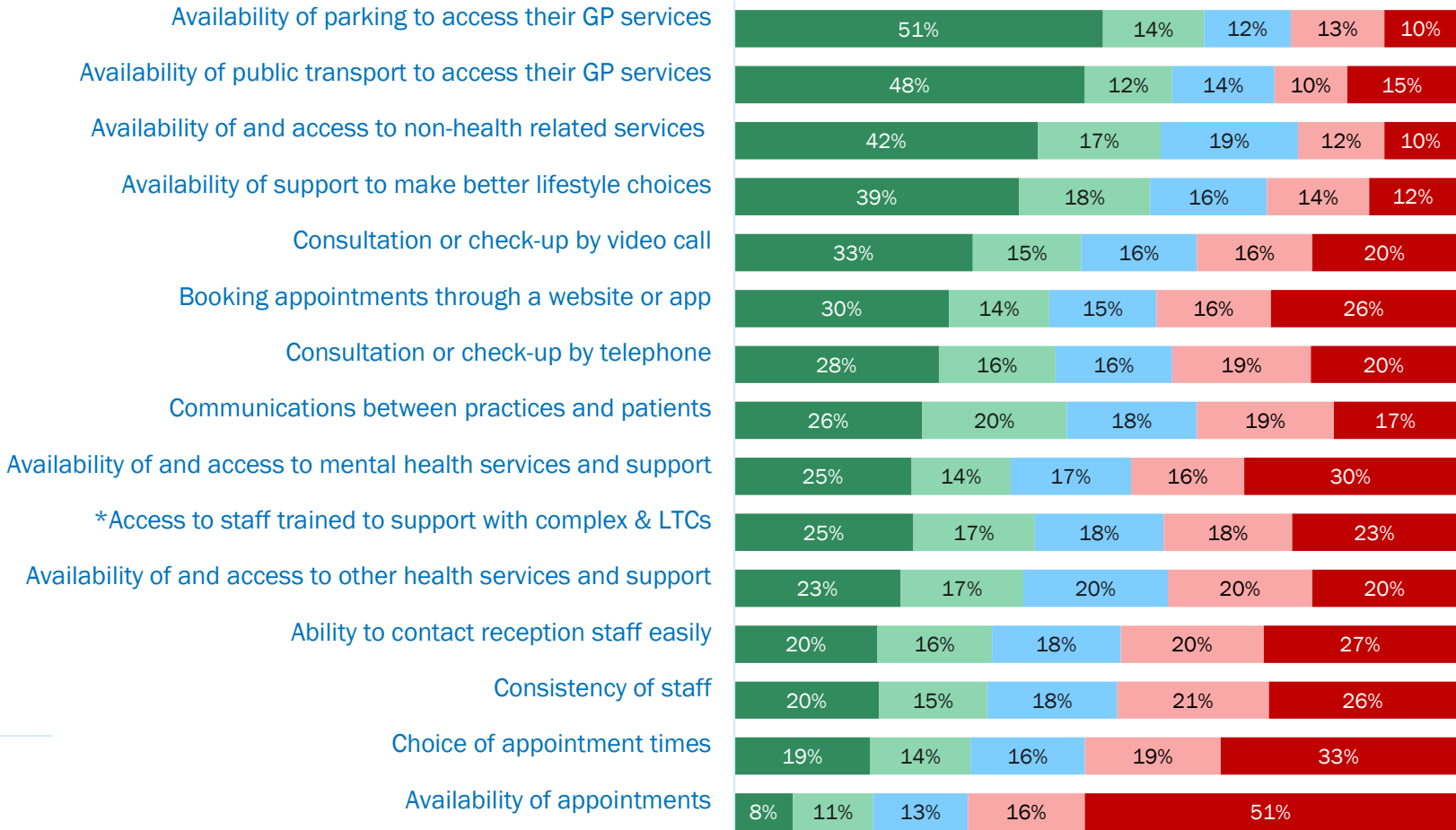
Experience of GP services

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Experience of GP services



Concerns over GP services



- 93% (2,445) are registered with a GP, 7% (182) are not.
- 1,210 (56%) rated GP services as good or very good, while 566 (26%) rated them poor or very poor.
- Most stated they were extremely concerned about the availability of appointments (1,343 / 51%), choice of appointment times (863 / 33%) and the availability of and access to mental health services (775 / 30%).

Are you registered with a GP practice in Shropshire or Telford and Wrekin? Base: 2,627
Please rate your overall experience of the services you have used. GP services. Base: 2,153
Please tell us how concerned you are with the following aspects of GP services. Base: 2,627

*Access to health and care staff trained to support with complex and long-term conditions.

Experience of GP services – reasons for negative rating

Key themes:

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Concerns over the difficulty of getting an appointment (e.g. especially post COVID-19, appointments run out by 8:05 am) (192 / 22%)



Consider improving access to face-to-face appointments (e.g. instead of phone appointments) (106 / 12%), Concern over long waiting times to get an appointment (103 / 12%)



Consider providing easier and quicker access to appointments (e.g. short waiting times, avoiding having to call multiple times) (115 / 13%)

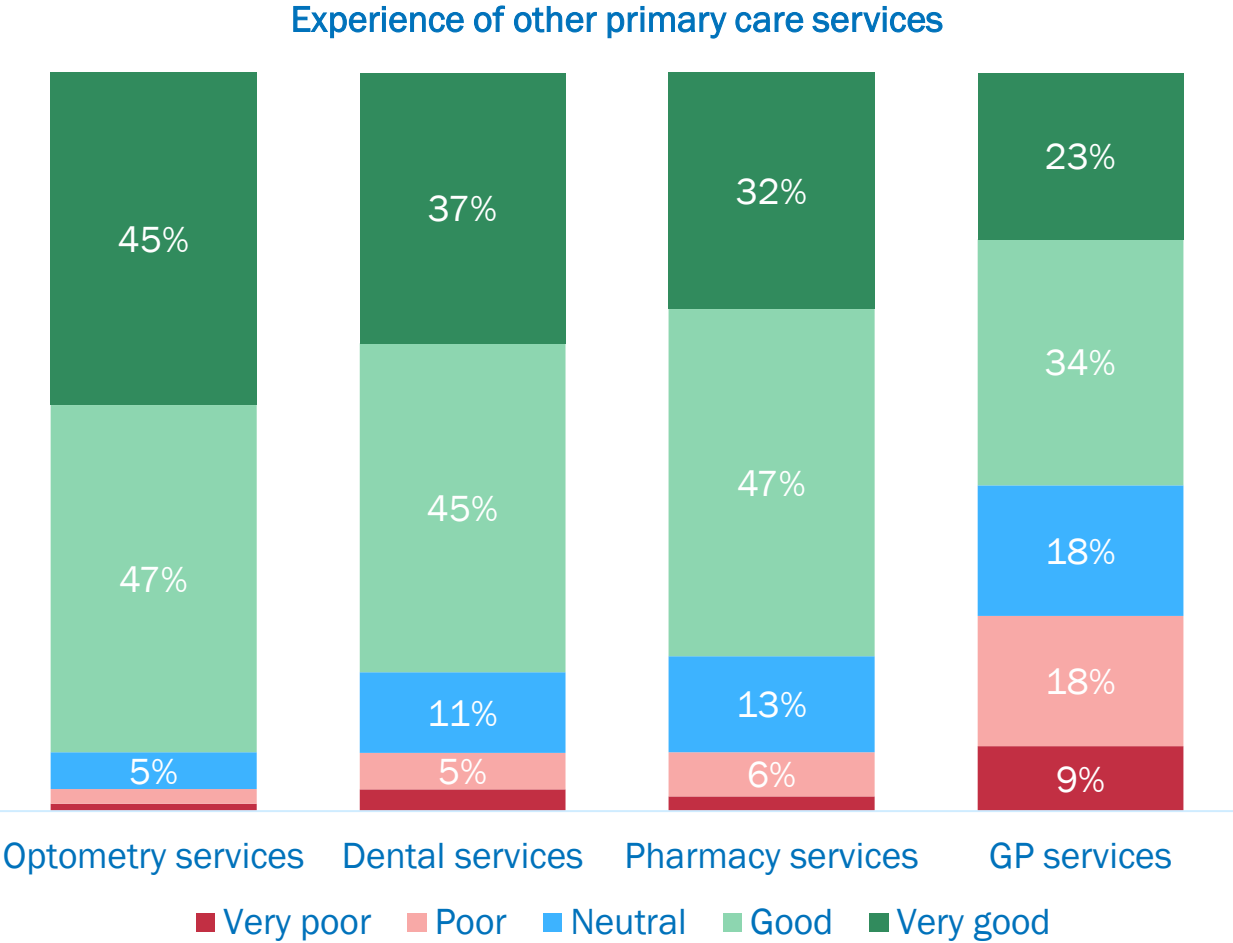
“Easier access to face-to-face and phone consultations”
(75 – 79, female, Shropshire)

“Improve appointment waiting times. I am waiting six weeks for an appointment”
(65 – 69, female, Shropshire)

“Being able to see my doctor when I want to. The surgery needs to open later in the evenings and weekends”
(60 – 64, female, Shropshire)

Experience of other primary care services - Total

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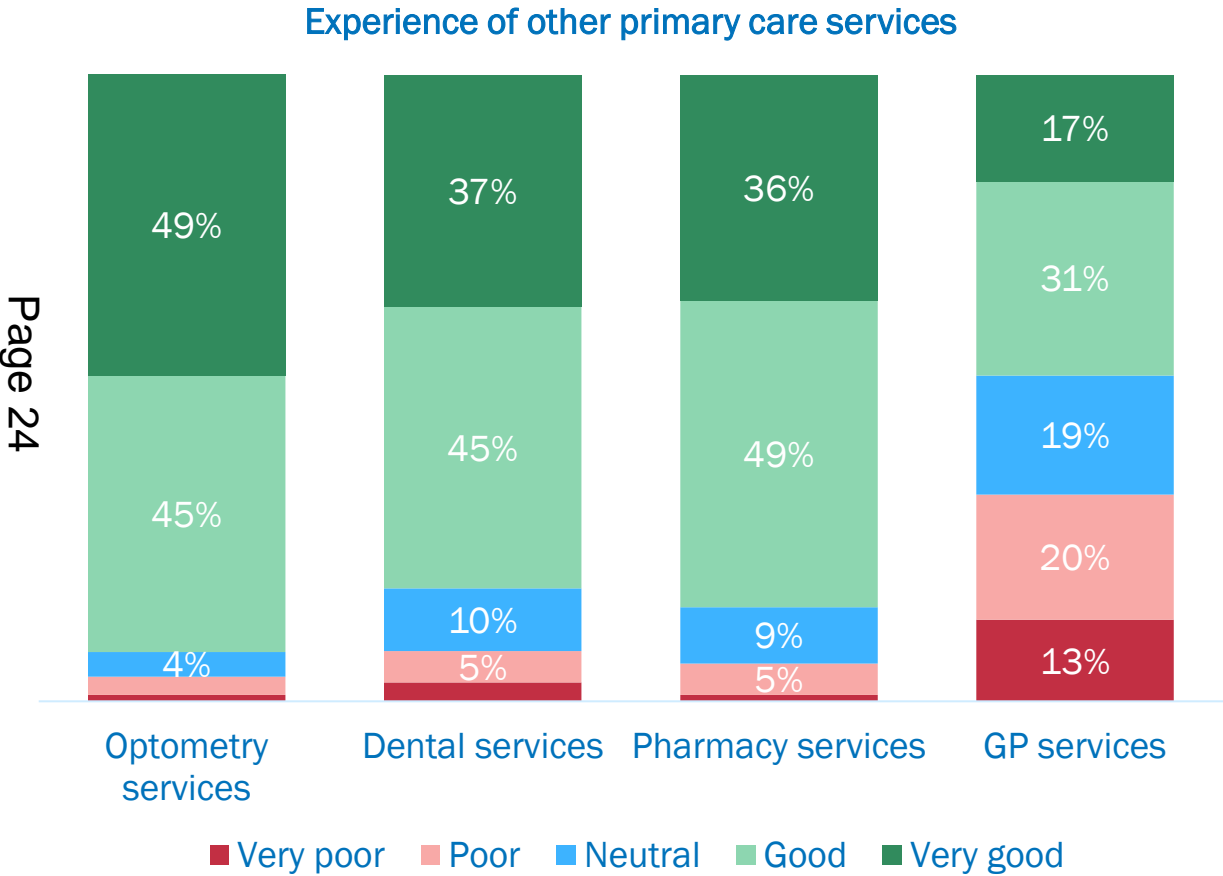


- 1,457 (79%) rated their overall experience of pharmacy services as good or very good, while 155 (8%) rated them poor or very poor.
- 1,028 (82%) rated their overall experience of dental services as good or very good, while 93 (7%) rated them poor or very poor.
- 738 (92%) rated their overall experience of optometry services as good or very good, while 20 (3%) rated them poor or very poor.
- 1,210 (56%) rated GP services as good or very good, while 566 (26%) rated them poor or very poor.

Please rate your overall experience of the services you have used. Pharmacy services. Base: 1,846
Please rate your overall experience of the services you have used. Dental services. Base: 1,258
Please rate your overall experience of the services you have used. Optometry services. Base: 807
Please rate your overall experience of the services you have used. GP services. Base: 2,153

Experience of other primary care services

– Telford and Wrekin



- 294 (48%) rated their overall experience of GP services as good or very good, while 200 (33%) rated them poor or very poor.
- 456 (85%) rated their overall experience of pharmacy services as good or very good, while 32 (6%) rated them poor or very poor.
- 323 (82%) rated their overall experience of dental services as good or very good, while 30 (8%) rated them poor or very poor.
- 252 (93%) rated their overall experience of optometry services as good or very good, while 8 (3%) rated them poor or very poor.

Please rate your overall experience of the services you have used. Pharmacy services. Base: 610
Please rate your overall experience of the services you have used. Pharmacy services. Base: 538
Please rate your overall experience of the services you have used. Dental services. Base: 394
Please rate your overall experience of the services you have used. Optometry services. Base: 270

Experience of other primary care services

– reasons for negative rating

Key themes:

Pharmacy services

Hourglass icon

Consider reducing waiting times for prescriptions, medication and queues (111 / 33%)

Pharmacy icon

Items out of stock including lack of substitutes (64 / 19%)

Frowning face icon

Poor service offered by staff (e.g. poor attitude, lack of knowledge, rude, unhelpful, unprofessional) (43 / 13%)

Dental services

Stack of coins icon

Dental services are expensive (22 / 11%)

Hourglass icon

Concern over long waiting times to find an NHS dentist (21 / 10%)

Hand holding heart icon

The service provided is poor (21 / 10%)

Optometry services

Hourglass icon

Concern over long waiting times (14 / 24%)

No entry sign icon

Concern over difficulty in accessing the service (6 / 10%)

Doctor icon

Concern over lack of follow-up appointments (6 / 10%)

Experience of other primary care services – reasons for negative rating

Pharmacy services

“Every time we go to collect prescriptions we have to stand and wait for 45 minutes. They need more staff to keep up with demand”.
(30 – 34, female, Shropshire)

Page 26 “Customer service training for pharmacy staff, increased access to medicines. Waiting 5 days for antibiotics with a raging throat infection is unacceptable”.
(55 – 59, prefer not to say, Shropshire)

“They are so rude, dismissive and unprofessional. When medication is not available they don’t tell you, and when you query it they just say they haven’t got it and you have to wait. Although I take 150mg of a specific tablet which were not available, they would not substitute them with 75mg which they did have in stock”.
(50 – 54, female, Telford and Wrekin)

Dental services

“Overall this service is too expensive making it unaffordable now for anything more than a filling”.
(65 – 69, male, Telford and Wrekin)

“NHS dentist became private and can no longer access an NHS dentist after 40 years of paying taxes and national insurance, that’s disgusting”.
(50 – 54, male, Shropshire)

“No dentist available across the county, lack of empathy is widely spread ...and the advice is unacceptable...paracetamol?! Really? Is that way I pay over £400 insurance every month to hear that? 111 service retiring your emergency call after 30 hours - system is broken”.
(35 – 39, female, no postcode provided)

Optometry services

“Been on waiting list following referral for over 3 years now. Signed consent form for surgery last September but still heard nothing”.
(60 – 64, female, Telford and Wrekin)

“Follow up appointments for Glaucoma referral running 4 months late at Shrewsbury. Needs way more clinics”.
(60 – 64, male, Shropshire)

“Absolutely need more trained staff and ones that aren’t rude and impatient”.
(60 – 64, female, Telford and Wrekin)

Key findings across sub-groups



Geography:

- Significantly more respondents living in the Telford and Wrekin area stated GP services were very poor or poor compared to those living in the Shropshire area
- Significantly more respondents living in the Shropshire area stated they were extremely concerned about the availability of transport to access their GP services, compared to those living in the Telford and Wrekin area.



Age:

- Of all the age groups, significantly more of those aged between 35 and 49 stated they were extremely concerned about the availability of and access to mental health services and support.



Ethnicity:

- Significantly more respondents from White ethnic backgrounds stated they were extremely concerned around the availability of appointments, compared to those from Asian / Asian British and Mixed / Multi-ethnic backgrounds.



Limitation in day-to-day activities:

- Significantly more respondents limited in their day-to-day activities stated they were extremely concerned about accessing health and care staff trained to support with complex and long-term conditions, compared to those not limited in their day-to-day activities



Deprivation:

- Significantly more respondents living in the most deprived areas (IMD quintile 1) stated they were extremely concerned about the choice of appointment times, compared to those living in less deprived areas (IMD quintile 4)
- Significantly more respondents living in more deprived areas (IMD quintile 2) stated they were extremely concerned about the availability of public transport to access their GP services, compared to those living in the least deprived areas (IMD quintiles 4 and 5).

Experiences of using secondary care services

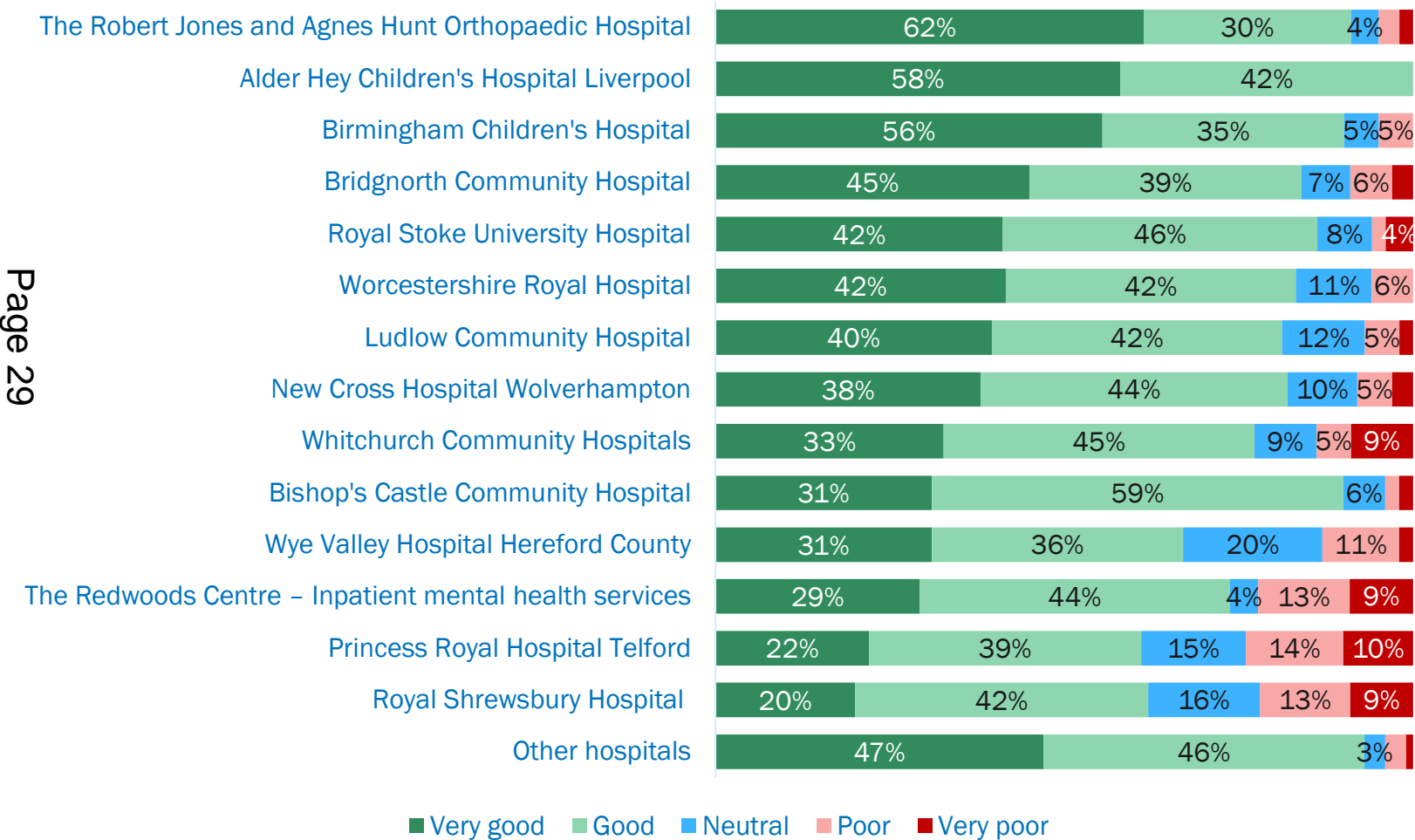
Key finding:

Proportionally more respondents rated their experience of Royal Shrewsbury Hospital and Princess Royal Hospital negatively.



Experience of secondary care services

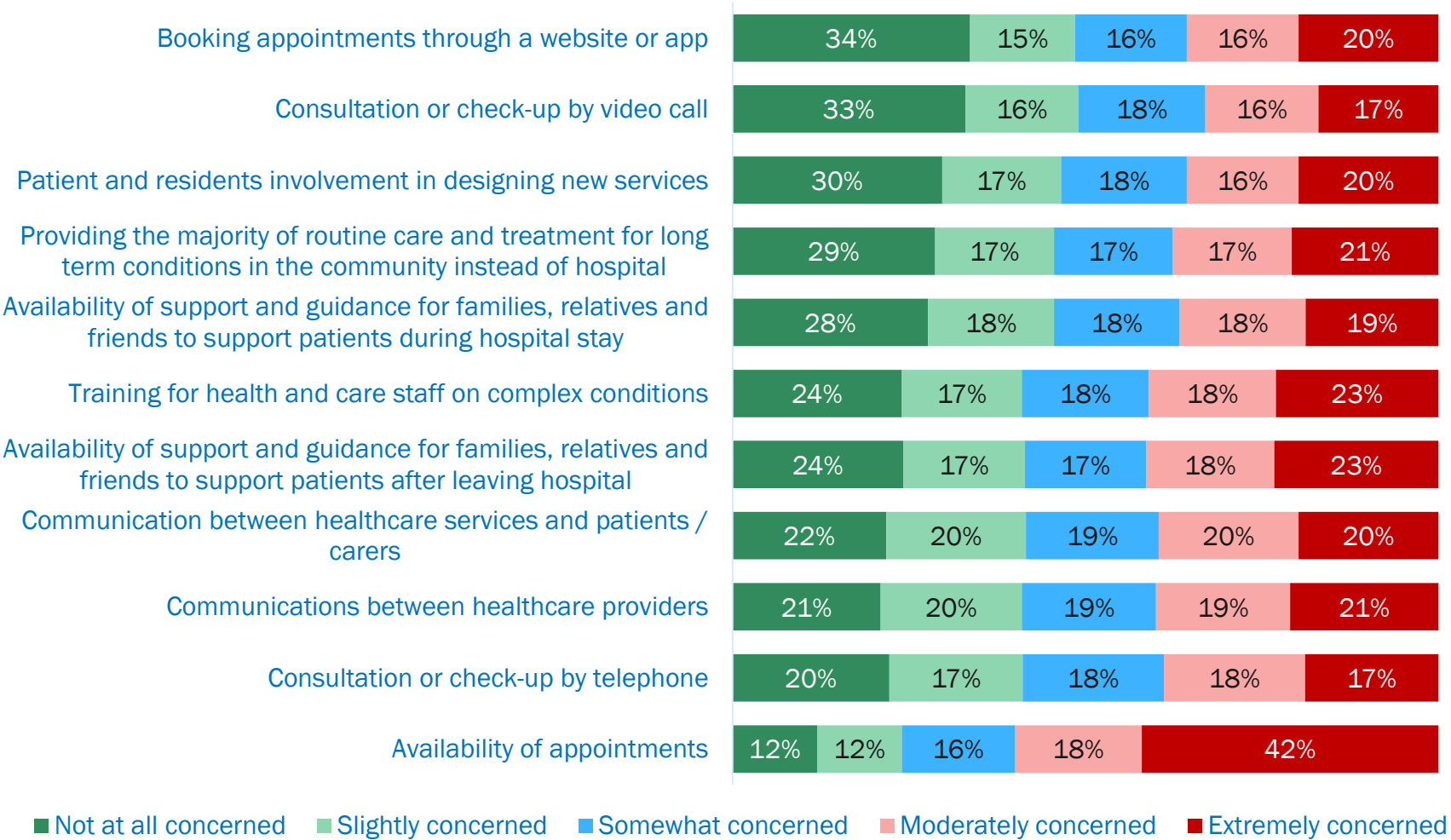
Experience of secondary care services



- Out of 2,174 who have used secondary care services, 1,320 (61%) respondents used the Royal Shrewsbury Hospital, 1,310 (60%) used the Princess Royal Hospital while 560 (26%) used the Robert Jones and Agnes Hunt Orthopaedic Hospital (RJAH).
- 12 (100%) rated Alder Hey Children's Hospital Liverpool as very good or good, while 510 (91%) rated RJAH and 39 (91%) rated Birmingham Children's Hospital as very good or good.
- 818 (62%) rated Royal Shrewsbury Hospital as very good or good, and 797 (61%) rated Princess Royal Hospital as very good or good.

Levels of concern around secondary care services

Concerns over secondary care services



- Most were extremely concerned about the availability of appointments (1,098 / 42%).
- Respondents were least concerned about booking appointments through a website or app (894 / 34%).

Experience of secondary care services – reasons for negative rating

Overview of key themes:

Concerns over
appointment waiting
times

Poor quality of care

Concerns over the
recruitment and
retention of staff, and
their attitude towards
patients

Lack of car parking
availability

Concerns over poor
communication

Experience of secondary care services – reasons for negative rating

Royal Shrewsbury Hospital: “Staff could show some interest in me as a patient. They lack motivation”.
(80 and over, male, Shropshire)

Princess Royal Hospital, Telford: “Easier access by public transport from Shrewsbury and back. There is only one consultant in the whole of Shropshire who sees patients with my condition and it is not his main job so appointments are difficult to get and he is overworked, so at least one more specialist in ME/CFS [myalgic encephalomyelitis / chronic fatigue syndrome] would be the minimum to improve things”. (70 – 74, female, Shropshire)

Ludlow Community Hospital: “I wasn’t offered an X-ray on my leg for a month, when I did get an X-ray a stress fracture was found but I wasn’t informed for another month! The physio put in a complaint”.
(55 – 59, female, Shropshire)

Ludlow Community Hospital: “More communication with patients family”.
(60 – 64, female, Shropshire)

Bridgnorth Community Hospital: “Staff should have qualifications to give antibiotics since Bridgnorth have lost their GP support, instead of us having to travel 18 miles to Telford”.
(55 – 59, female, Shropshire)

Bridgnorth Community Hospital: “Reception staff poor, only solution ‘bring him in’ to add to very busy department when all that was needed was a practice clinic appointment”.
(55 – 59, female, Shropshire)

Princess Royal Hospital, Telford: “Better staffing levels, waiting times, doctors that are easier to understand”.
(35 – 39, male, Telford and Wrekin)

The Robert Jones and Agnes Hunt Orthopaedic Hospital: “One of the best hospitals but waiting time to see consultants there is few years. Why are patients waiting 3 years for emergency back surgery? Like my friend. And after 3 years waiting, she was moved to Birmingham orthopaedic hospital where she is finally getting her operation hopefully soon”.
(30 - 34, female, Telford and Wrekin)

The Robert Jones and Agnes Hunt Orthopaedic Hospital: “Too many cancelled appointments”.
(70 – 74, female, no postcode provided)

Royal Shrewsbury Hospital: “Communication between staff and family members was non-existent. This needs to change. Also, please don't leave deceased patients in view of other patients”. (45 – 49, female, no postcode provided)

No responses were received for Bishop's Castle Community Hospital and Alder Hey Children's Hospital, Liverpool

You said your overall experience of [Hospital name] was [very poor / poor / neither good nor poor].

What do you think could be done to improve your overall experience? Base: 1 - 469

Experience of secondary care services – reasons for negative rating

Whitchurch Community Hospital: “Better physiotherapy, treat the patient, not everyone is the same. Again patient focus poor”.
(70 – 74, male, Shropshire)

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Whitchurch Community Hospital: “Have more availability for blood testing. Having to get frequent blood tests for chemo I had to travel to Shrewsbury or Telford, as I wasn't capable of booking far enough ahead to get an appointment in Whitchurch. When I did get an appointment in Whitchurch the blood letter would try and insist on using my left arm which has poor veins, and hurt a lot. When she did use my right arm, which has a really obvious vein it still was more painful and uncomfortable than any of the appointments I had elsewhere”.
(40 – 44, female, Shropshire)

The Redwoods Centre – inpatient mental health services: “The acute wards need a complete overhaul from the top down. Inhumane treatment, lack of communication with family, traumatic experiences for patients, unsafe and uncaring. I would never want my son to go there again”.
(55 – 59, female, Shropshire)

The Redwoods Centre – inpatient mental health services: “Nurses need to spend more time with patients”.
(50 – 54, female, Shropshire)

Worcestershire Royal Hospital: “Personally its too far to travel I think we should have a large hospital in Ludlow”.
(55 – 59, female, Shropshire)

Other hospital: “Waiting times must be reduced. More common-sense organisation needed - appalled at lack of it in A&E for example. Waiting room stuffed full of people but doctors sitting round chatting doing very little - even remarked upon by their colleagues. Someone needs to get a grip of it and sort it”. (75 – 79, female, Shropshire)

New Cross Hospital, Wolverhampton: “Lack of communication between hospital and doctors, the fact that we were sent there when our local hospital is the Princess Royal in Telford”.
(40 – 44, female, Telford and Wrekin)

Birmingham Children's Hospital: “Waiting times to be seen. A&E at breaking point. Communication between hospitals and shared notes etc”.
(35 – 39, female, Telford and Wrekin)

Key findings across sub-groups



Geography:

- Significantly more respondents living in the Telford and Wrekin area rated their experience of services at Princess Royal Hospital as very poor or poor, compared to those living in the Shropshire area.
- Significantly more respondents living in the Telford and Wrekin area stated they were extremely concerned about consultations or check-ups by telephone and booking appointments through a website or app, compared to those living in the Shropshire area.



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Age:

- Significantly more respondents aged over 65 stated they were extremely concerned about consultation or check-ups by video call, compared to those aged under 50.

Limitation in day-to-day activities:

- Significantly more respondents not limited in their day-to-day activities rated their experience of services at Bridgnorth Community Hospital as very good or good, compared to those limited in their day-to-day activities.



Deprivation:

- Significantly more respondents living in the most deprived areas (IMD quintiles 1 and 2) stated they were extremely concerned about booking appointments through a website or app, compared to those living in less deprived areas (IMD quintiles 3, 4 and 5).



Ethnicity:

- Significantly more respondents from Asian / Asian British ethnic backgrounds stated they were extremely concerned about the availability of support and guidance for families, relatives and friends to support patients during hospital stays, compared to those from Mixed / Multi-ethnic backgrounds.

Summary of findings on experiences of secondary care

Out of 2,174 respondents using secondary care services, most stated they have used Royal Shrewsbury Hospital. 62% of respondents rated their experience positively, and 22% rated it negatively.

The Princess Royal Hospital was rated positively by 61% of respondents and negatively by 24%.

The hospitals receiving the highest positive ratings were Alder Hey Children's Hospital and the Robert Jones and Agnes Hunt Orthopaedic Hospital.

Key areas of concern include the availability of appointments, training for health care staff around complex conditions, the availability of support for relatives and friends on how to support patients after leaving hospital, long waiting times, poor quality of care and lack of car parking.

Suggestions to improve respondent's experience of secondary care services were around recruiting more staff, improving the care provided, and improving the communication between staff and patients.

Experiences of community services

Key finding:

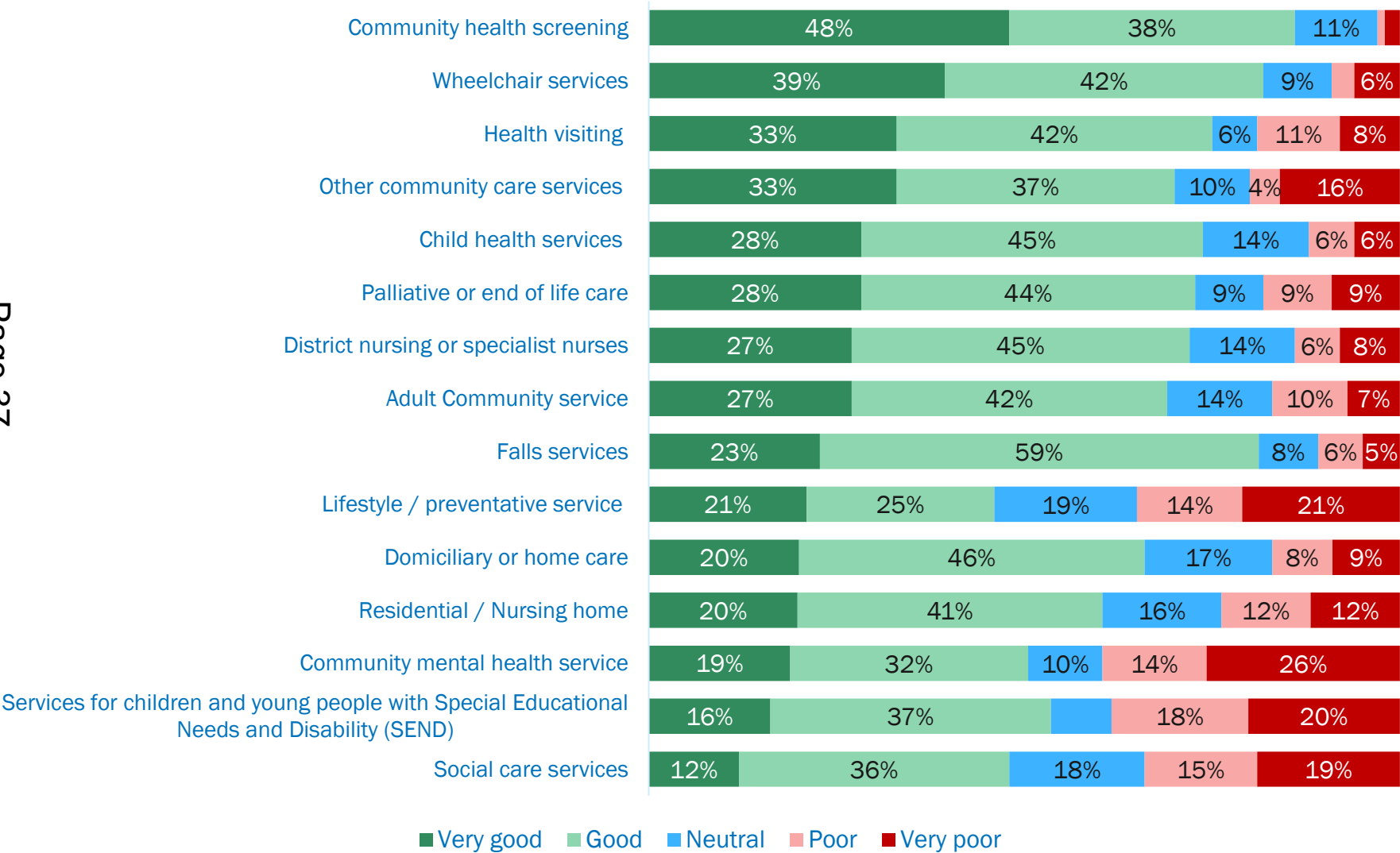
Most community services are rated positively.



Experience of community services - Total

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Experience of community services

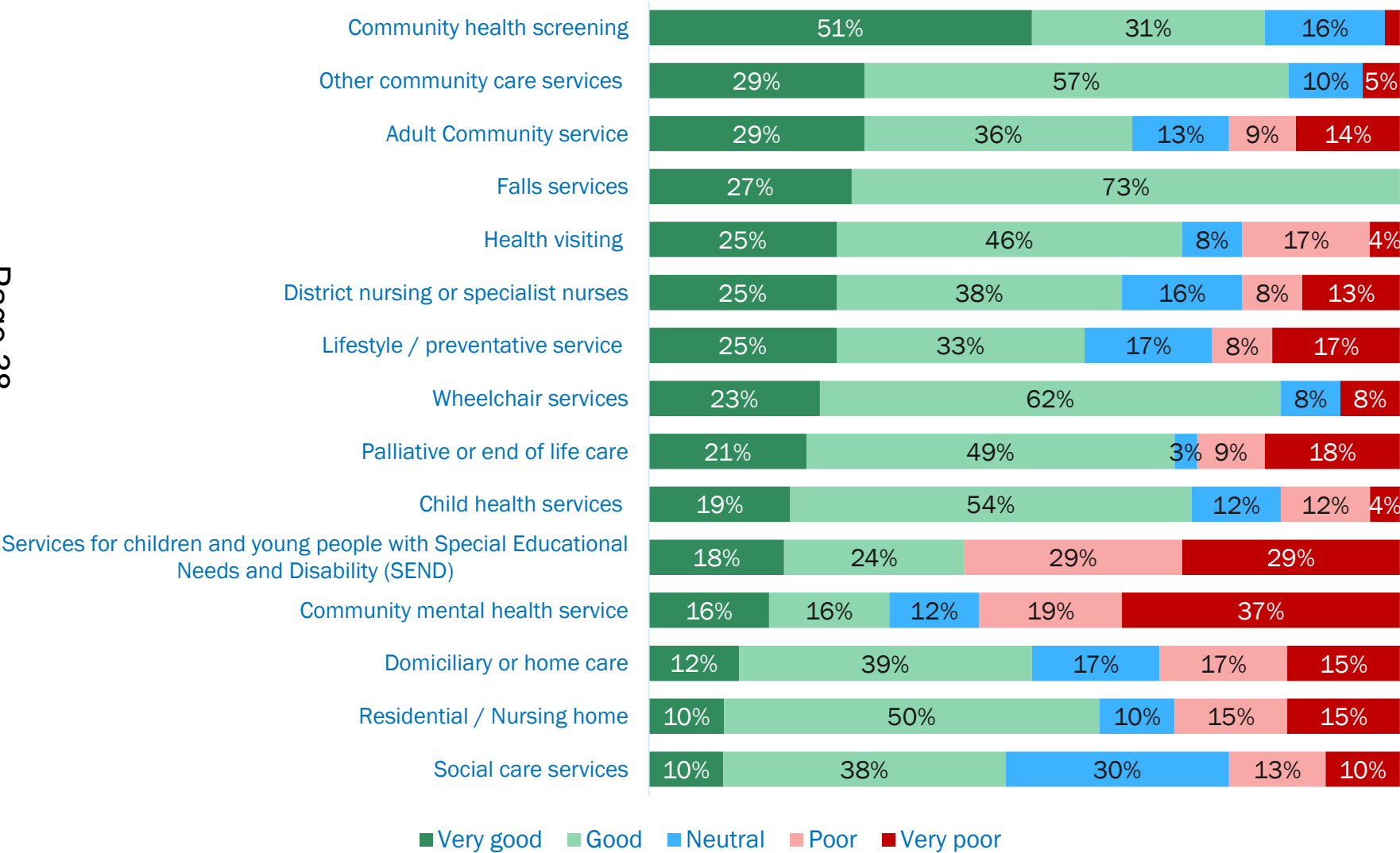


- A total of 794 used the community services, of which:
 - 141 (86%) rated community health screening as very good or good
 - 71 (82%) rated falls services
 - 27 (82%) rated wheelchair services as very good or good
- Respondents rated community mental health services (57 / 40%) as very poor or poor
- Services for children and young people with Special Educational Needs and Disability (SEND) (38 / 38%) were rated as very poor or poor.

Experience of community services – Telford and Wrekin

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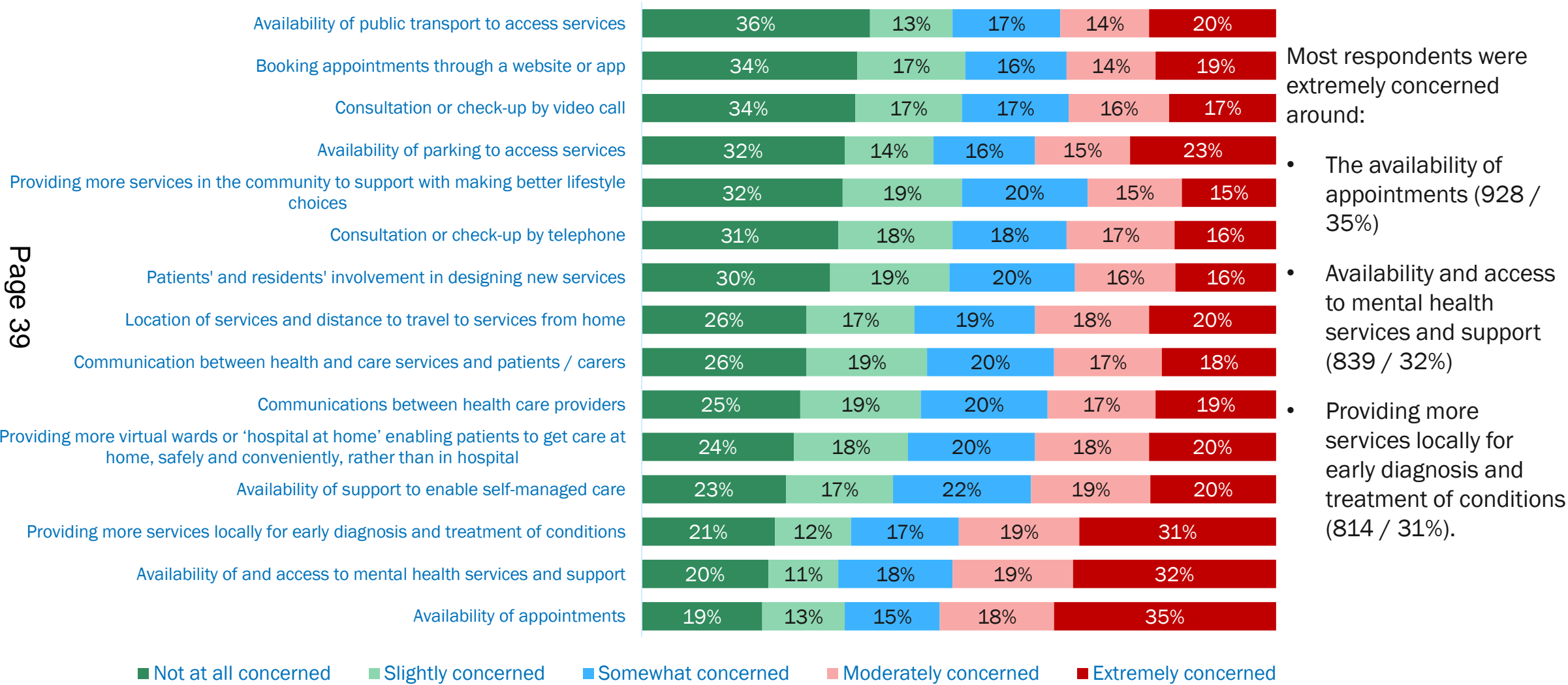
Experience of community services



- A total of 208 respondents used the community services, of which:
 - 11 (100%) rated falls services as very good or good
 - 18 (86%) rated other community care services as very good or good
 - 11 (85%) rated wheelchair services as very good or good.
- Respondents rated services for children and young people with Special Educational Needs and Disability (SEND) (10 / 59%) as very poor or poor, and community mental health services (24 / 56%) as very poor or poor.

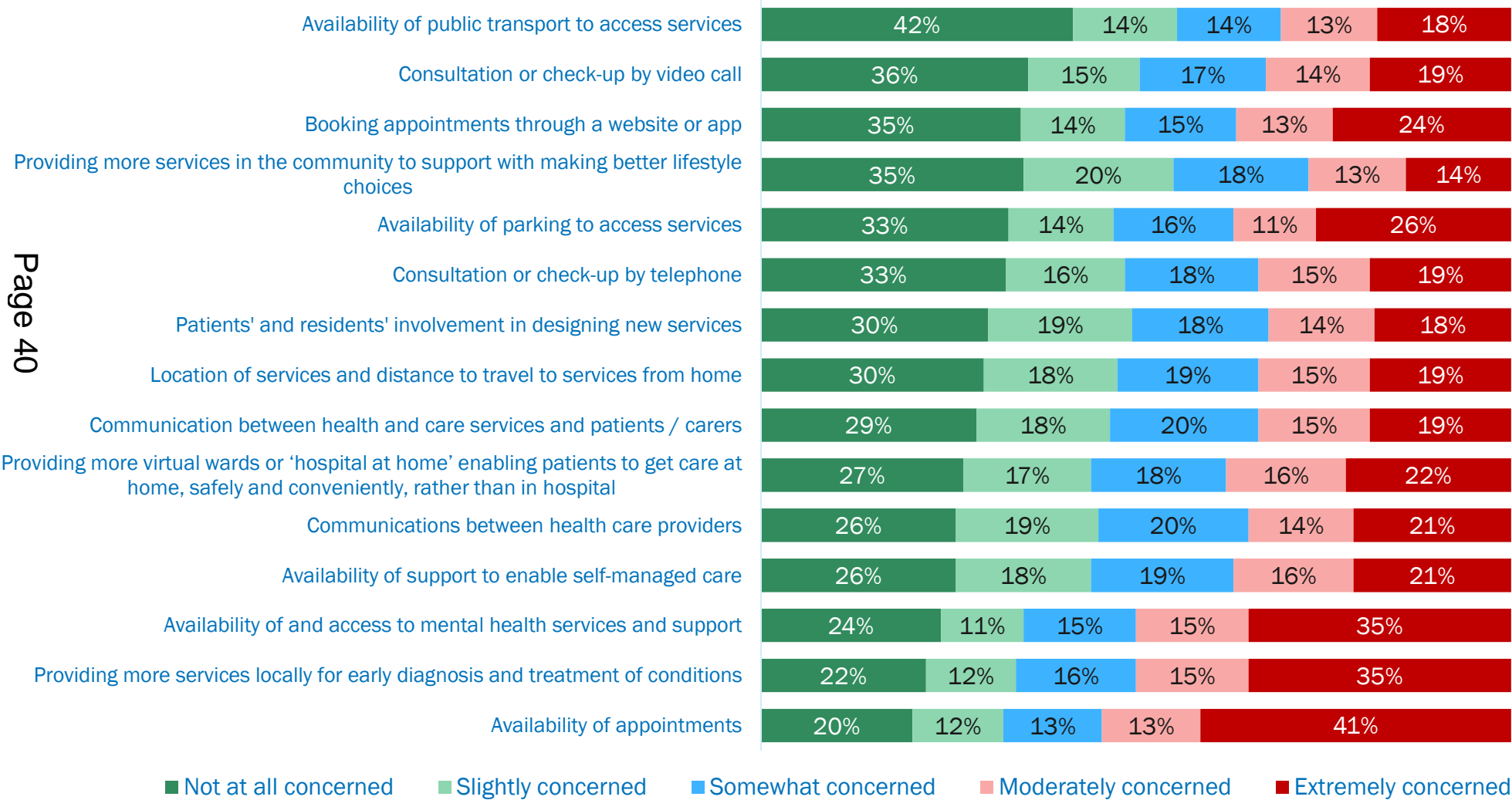
Levels of concern around community services - Total

Concerns over community services



Levels of concern around community services – Telford and Wrekin

Concerns over community services



Most respondents were extremely concerned around:

- Availability of appointments (285 / 41%)
- Availability and access to mental health services and support (242 / 35%)
- Providing more services locally for early diagnosis and treatment of conditions (240 / 35%).

Experience of community services – reasons for negative rating

Overview of key themes:

Difficulties getting appointments and long waiting times

Poor quality of care

Concerns around staff attitude and quality of service (e.g. attending appointments late)

Concerns around the lack of home visits

Lack of community screening services

Concerns around limited grants for wheelchair services

Experience of community services – reasons for negative rating

Key themes:

Child health services



Need for more available appointments
(6 / 22%)

Services for children and young people with special educational needs and disability (SEND)



Concern over long waiting times
(9 / 27%)

Adult community service



Concern over difficulty getting an appointment
(8 / 15%)

Palliative or end of life care



Concern over lack of support and care
(8 / 32%)

Domiciliary or home care



Concern over staff not turning up to the appointment
(7 / 18%)

District nursing or specialist nurses



Concern over lack of home visits (e.g. nurse doesn't turn up)
(12 / 24%)

Health visiting



Concern over lack of care and support
(7 / 30%)

Falls services



Concern over quality of care (e.g. patient fell under their supervision)
(4 / 36%)

Community health screening



Need for more screening services (e.g. more general screenings, walk-in screenings)
(3 / 25%)

Community health screening



Concern over long waiting times
(3 / 25%)

Experience of community services – reasons for negative rating

Key themes:

Community mental health service



Concern over long waiting times (e.g. waiting for years)
(20 / 32%)

Residential / nursing home



The care received was poor
(9 / 29%)

Social care services



Concern over difficulty getting the help needed (e.g. mental health support, home support)
(16 / 29%)

Wheelchair services



Wheelchair grant is insufficient
(3 / 60%)

Lifestyle / preventative service



Concern over lack of support and care
(9 / 31%)

Other community care services



Concern over lack of support
(6 / 40%)

Experience of community services – reasons for negative rating – Telford and Wrekin

Community mental health service:

“Extremely long waiting lists and same inappropriate treatment plans offered by untrained staff unable to diagnose”.

(50 – 54, female, Telford and Wrekin)

Lifestyle / preventative services:

“Would prefer face-to-face not very good with doing things on computer. So would prefer seeing someone face-to-face”.

(55 – 59, female, Telford and Wrekin)

Adult community service:

“More appointments or more time with specialist”.

(80 and over, male, Telford and Wrekin)

District nursing or specialist nurses:

“More staff”.

(55 – 59, male, Telford and Wrekin)

Domiciliary or home care:

“Complete lack of coordination between services and commissioning needs to be done properly”.

(75 – 79, male, no postcode provided)

Key findings across sub-groups



Geography:

- Significantly more respondents living in the Telford and Wrekin area stated they were extremely concerned about consultations or check-ups by telephone and about booking appointments through a website or app, compared to those living in the Shropshire area.



Age:

- Significantly more respondents aged under 35 rated palliative or end of life care and community mental health services as very good or good, compared to those aged between 50 and 64.



Limitation in day-to-day activities:

- Significantly more respondents limited in their day-to-day activities rated community mental health services and services for children and young people with Special Educational Needs and Disability (SEND) as very poor or poor, compared to those not limited in their day-to-day activities.



Deprivation:

- Significantly more respondents in more deprived areas (IMD quintiles 2 and 3) stated they were extremely concerned about the location of services and distance to travel to services from home, compared to those living in the least deprived areas (IMD quintile 5).



Ethnicity:

- Significantly more respondents from White ethnic backgrounds stated they were extremely concerned about the availability of, and access to, mental health services and support, compared to those from Mixed / Multi-ethnic and Asian / Asian British ethnic backgrounds.

Summary of findings on experiences of community services

Out of 794 respondents using community services, most stated they have used adult community services (26%) and district nursing or specialist nursing services (26%).

Community services with the highest positive ratings were community health screening, wheelchair services and health visiting services. While services with the highest negative ratings were community mental health services, services for children and young people with special education needs, lifestyle / preventative services and social care services.

Key areas of concern include the availability of appointments, availability and access to mental health services and support, providing more services locally for earlier diagnosis and treatment, long waiting times, lack of care, staff not turning up to appointments and lack of home visits.

Suggestions to improve respondent's experience of community care services were to ensure more appointments are available and the need to provide more screening services.

Using technology to provide and access health and care services

Key finding:

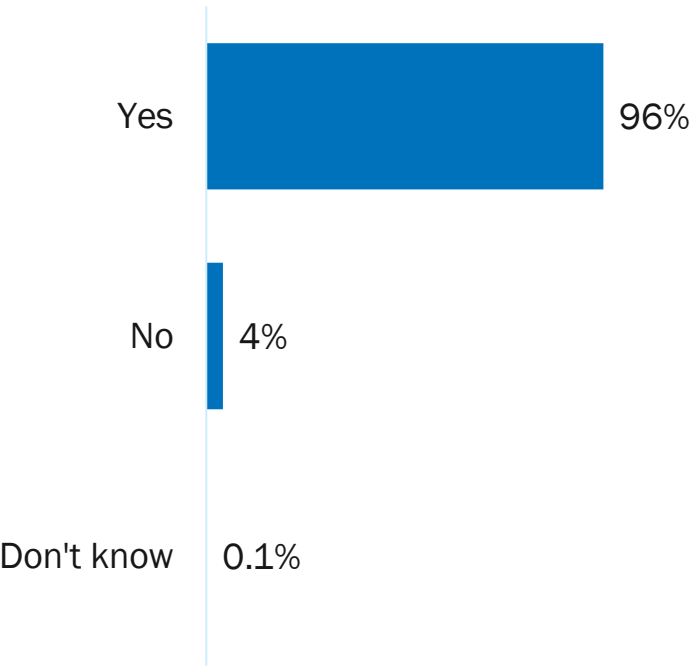
Opinions are split on the use of technology to access health and care services.



Using technology to provide and access health and care services

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Access to broadband at home



Other locations respondents have access to internet



Home of a family member or friend
(1,683 / 64%)



Pubs, cafes or restaurants
(1,323 / 50%)

Tasks done the most online or via an app



Order medication
(1,552 / 59%)



Book health appointments
(1,326 / 51%)

What makes respondents feel more comfortable using technology



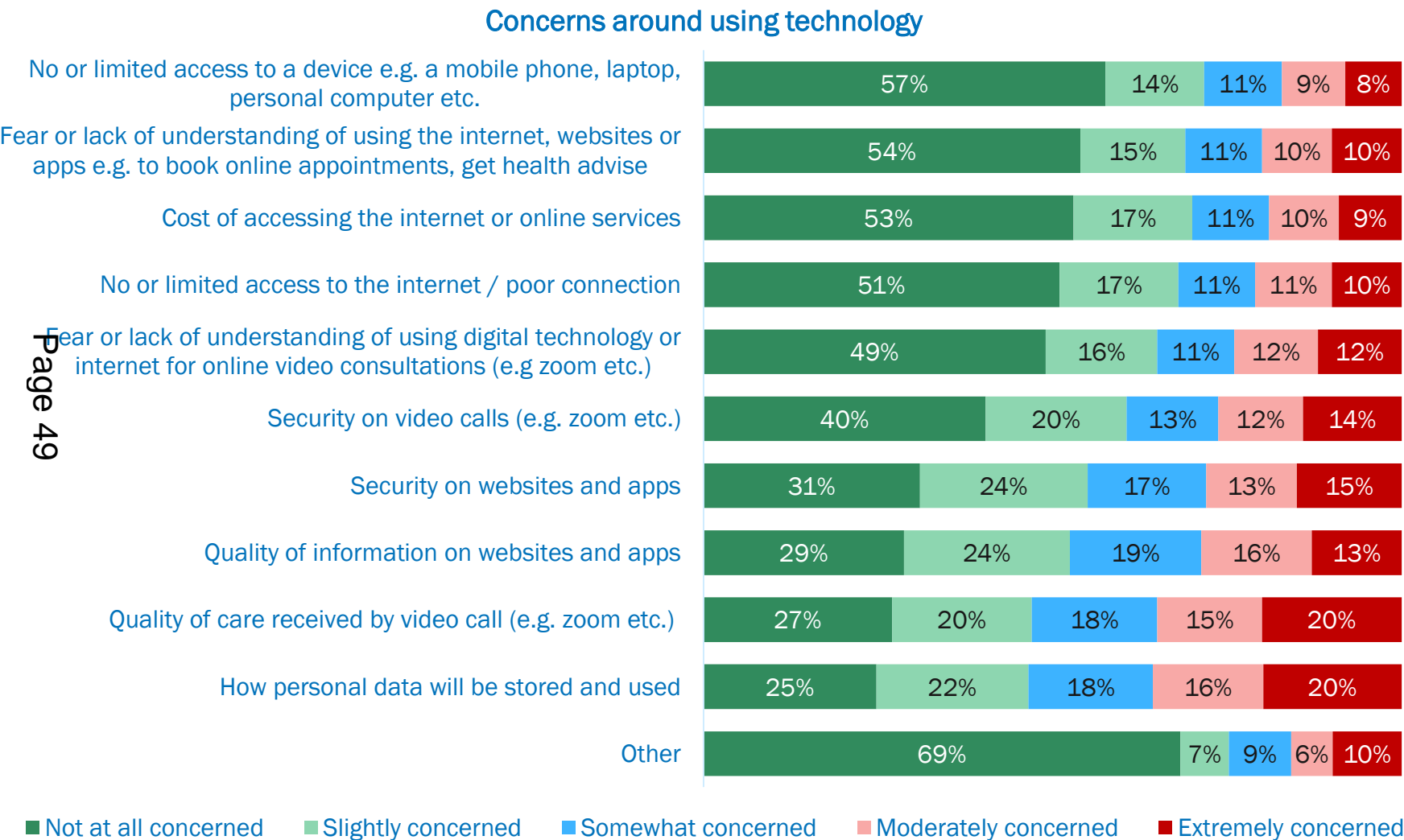
Written instructions
(807 / 42%)



Video instructions
(532 / 28%)

Do you have broadband at home? Base: 2,627
Do you access wi-fi in any of these locations? Base: 2,627
Which of the following have you done online or via an app? Base: 2,627
How could we make you feel more comfortable using technology to access health and care services? Base: 1,931

Levels of concern around using technology to provide and access health and care services



- Most respondents were extremely concerned about how personal data would be stored and used (520 / 20%) and the quality of care received by video call (513 / 20%).

Key findings across sub-groups



Geography:

- Significantly more respondents living in the Telford and Wrekin area stated they were extremely concerned about fear or lack of understanding of using the internet, websites or apps and about the quality of care received by video call, compared to those living in the Shropshire area.



Age:

- Significantly more respondents across all ages stated they were extremely concerned about fear or lack of understanding of using the internet, websites or apps, compared to those aged between 35 and 49.



Limitation in day-to-day activities:

- Significantly more respondents limited in their day-to-day activities stated they were extremely concerned about the quality of care received by video call, compared to those not limited in their day-to-day activities.



Deprivation:

- Significantly more respondents living in less deprived areas (IMD quintile 4) stated they were not concerned about the security of video calls, when compared to those living in the most deprived areas (IMD quintile 1).
- Significantly more respondents living in the most deprived areas (IMD quintile 1) stated they were extremely concerned about the security on websites and apps, compared to those living in all other areas (IMD quintiles 2, 3, 4 and 5).



Ethnicity:

- Significantly more respondents from Mixed / Multi-ethnic and Asian / Asian British ethnic background stated they did not have broadband at home, compared to those from White ethnic backgrounds.

Summary findings

Out of 2,627 respondents, 89% stated they have a smart phone that can access the internet, while 70% stated they have a personal computer or laptop.

Most respondents stated they access the internet using their smartphones, tablets or personal computer or laptop. Respondents either use their own broadband at home, the broadband at a family member's or a friend's house, and at pubs, cafés or restaurants.

The tasks that were most commonly completed online or via an app are ordering medication, booking health appointments, and finding information about medication.

Suggestions for making respondents more comfortable using technology to access health care services included providing written or video instructions.

Key areas of concern around using technology to provide and access health and care services included how personal data would be stored and used, quality of care received through virtual methods, and the security of websites and apps.

Living well and self-care

Key finding:

GPs are considered the best people to provide advice and guidance on self-care and how to make lifestyle changes.

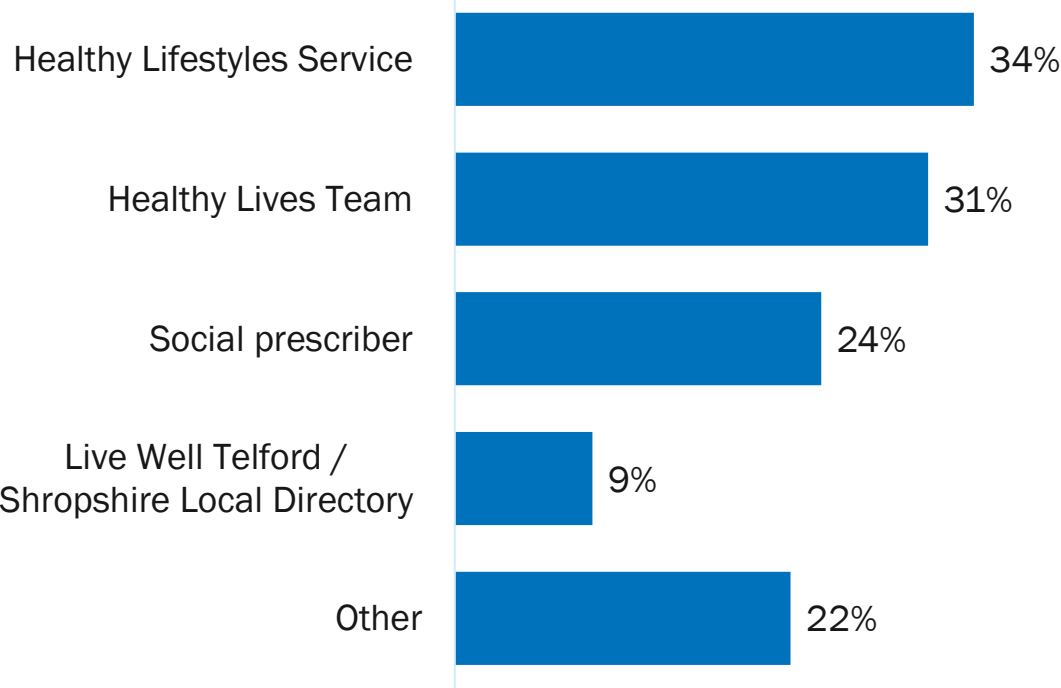


Living well and self-care - Total

Best services at providing advice



Services used for self-care or make lifestyle change

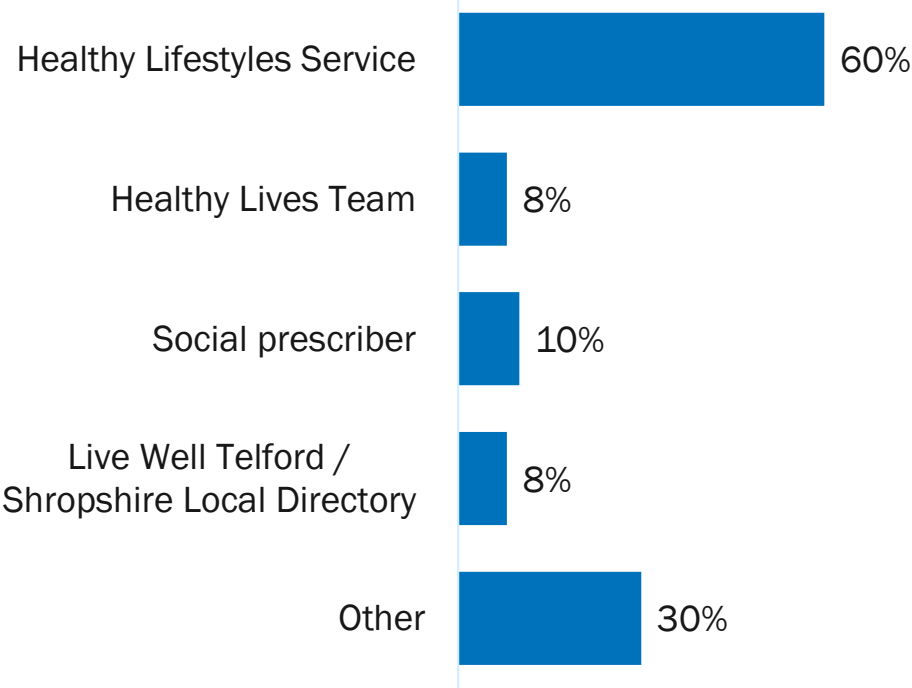


Living well and self-care – Telford and Wrekin

Best services at providing advice



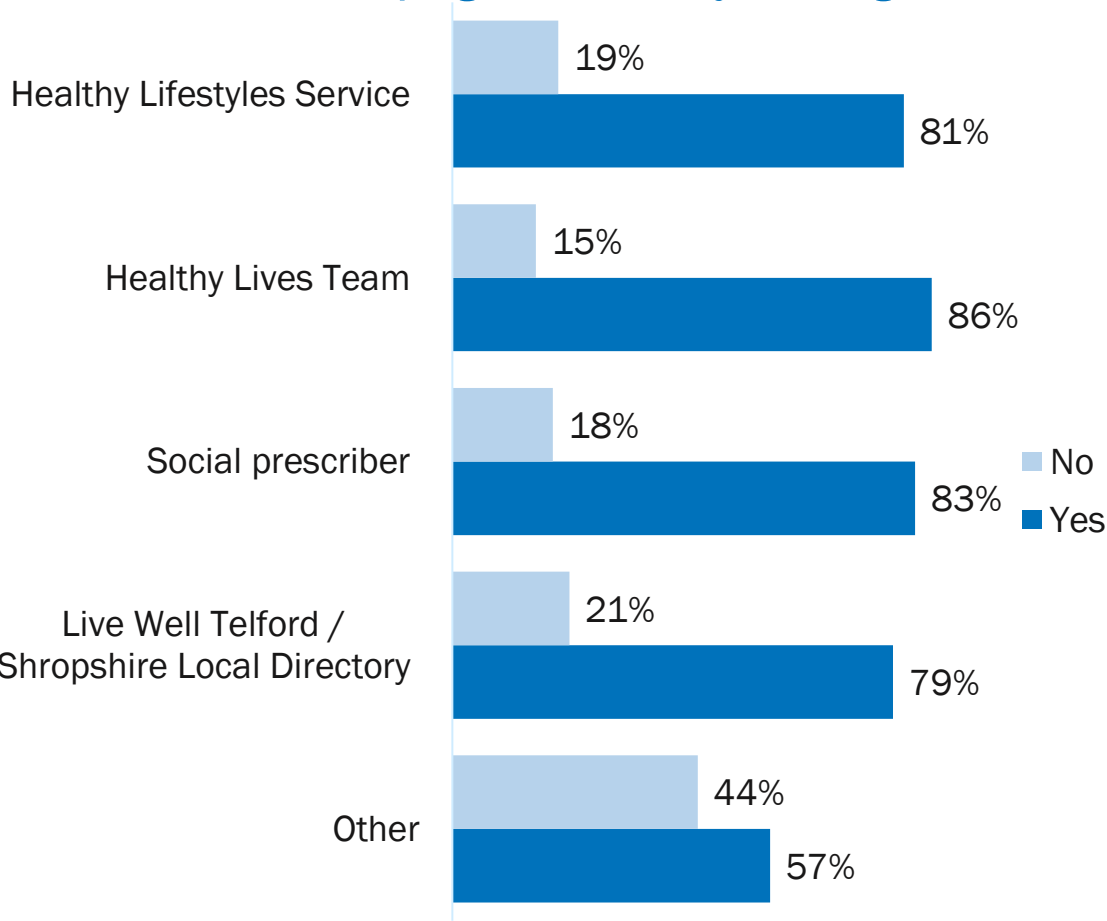
Services used for self-care or make lifestyle change



Living well and self-care - Total

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Was the service helpful at providing self-care advice or helping with a lifestyle change?



NHS signposting to service to support with self-care or make lifestyle changes



Yes
(496 / 19%)



No
(2,131 / 81%)

Where to access information, advice and support for self-care and healthy lifestyle



GP practice
(1,439 / 55%)



Social media
(1,410 / 54%)

Did the service support you to make a lifestyle change? Base: 167 – 43
Over the last 2 years has the NHS signposted you or someone you care for to support for self-care or to make lifestyle changes? Base: 2,627
Where would you like to access information, advice and support for self-care and healthy lifestyles? Base: 2,627

Key findings across sub-groups



Age:

- Significantly more respondents aged over 50 stated they did not receive support for self-care or to make lifestyle changes, compared to those aged under 50.



Limitation in day-to-day activities:

- Significantly more respondents not limited in their day-to-day activities stated the support received from Healthy Lifestyles Services helped them to make a lifestyle change, compared to those limited in their day-to-day activities.



Deprivation:

- Significantly more respondents living in lesser deprived areas (IMD quintiles 2, 3, 4 and 5) stated they did not receive support for self-care or to make lifestyle changes, compared to those living in the most deprived areas.



Ethnicity:

- Significantly more respondents from Mixed / Multi-ethnic and Asian / Asian British ethnic background stated they were signed posted for support to self-care or to make lifestyle changes in the last two years, compared to those from White ethnic backgrounds.

Summary findings

Most respondents stated their GP, other health professionals and their pharmacists were the best professionals from whom to get advice for self-care and making a lifestyle change.

Out of 2,627 respondents, 19% were signposted to self-care advice or support to make a lifestyle change, while 81% did not receive support.

Out of 496 respondents who received support, most stated they received it through the Healthy Lifestyles Service, Healthy Lives Team and social prescribers. Most respondents stated the Healthy Lives Team and social prescriber services helped them to make a change.

When asked where they like to access advice and support to self-care and make a lifestyle change, most respondents highlighted their GP practice or social media.

When asked how respondents could make a lifestyle change, the most commonly raised themes were around doing more physical activity and eating a healthy diet.

Recommendations and Next Steps



Recommendations

The insight and intelligence gathered should be used to inform commissioning intentions, service development plans and strategies. Further qualitative research may be required to understand some of the views in more detail, especially with sub-groups.



Keep people informed about appointment availability and waiting times and support them if required. Improve communication with patients and between services, review patient travel requirements to access care, especially those from deprived communities.



A recurring theme from the feedback was respondents' difficulty in accessing appointments across all services. This could be addressed through greater access to virtual services like online booking systems and video/telephone appointments.



Explore how we can raise awareness of services to help people live well and look after themselves. Ask more services and front-line staff to share information about these services with their patients during consultations.



Although the findings showed that many people have internet access, there is a need to explore how people who cannot access the internet can be given the same opportunities to access services and those that are not confident are supported.



A recurring theme from all the feedback channels was episodes of poor-quality care received by patients across primary, secondary and community services. We need to understand more what patients consider a 'high-quality' service and share this learning among organisations and staff.



Next Steps

The insight and intelligence gathered should be used to inform commissioning intentions, service development plans and strategies. Further qualitative research may be required to understand some of the views in more detail, especially with sub-groups.



Data has been broken down to PCN level and provided to PCN clinical leads



Data has been broken down by provider and provided to Directors of strategy and patient participation leads



Data is being used to inform Integrated Neighbour Teams development and the ICB rural health strategy



Data has been provided to the relevant commissioning team and is being reviewed to identify any gaps that may require further engagement.

Next Steps

Continue to develop our partnership approach to engagement work with LAs and VCSE to ensure we reduce duplication, increase capacity, maximise resources, and better meet the needs of our residents.



Refresh the Integrated Care Strategy and Joint Forward Plan in light of the insight gathered via the Big conversation.





**Integrated
Care System**
Shropshire, Telford and Wrekin



**Shropshire, Telford
and Wrekin**

Thank You

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Shropshire, Telford and Wrekin: ‘Think Which Service’

April 2024

Agenda Item 9

Organisational Objectives

- Rising COVID-19 numbers, high demand for services, lack of capacity in the community
- Urgent and Emergency Care, community and GP services were all under considerable pressure
- Around half of people who visited A&E could have been treated at another service e.g. a Minor Injury Unit (MIU) or Urgent Treatment Centre (UTC)
- Unprecedented pressure resulted in lengthy ambulance handover delays and poor patient care

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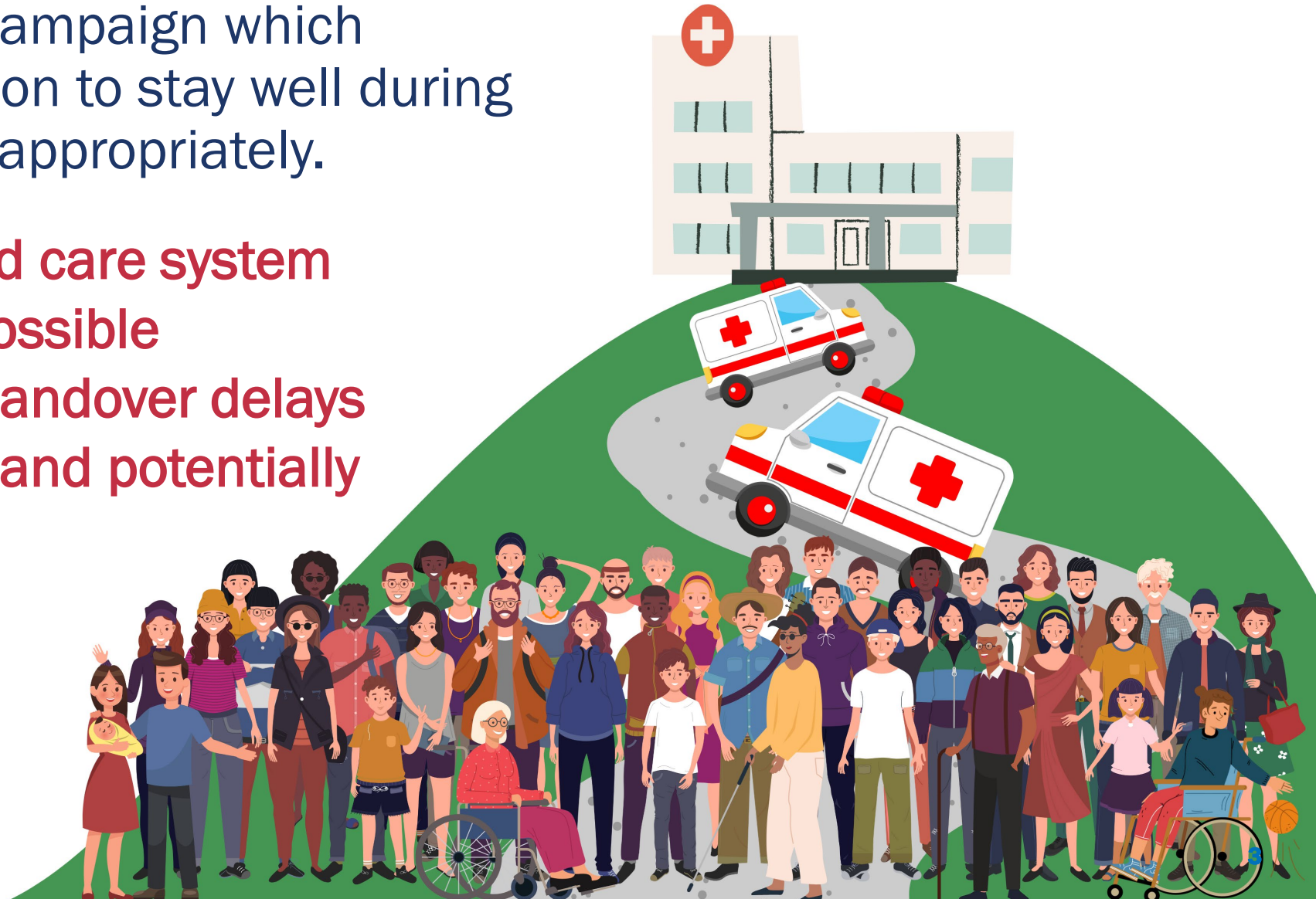


Communication objectives

We needed to create a campaign which empowered our population to stay well during winter and use services appropriately.

- Ensure our health and care system ran as smoothly as possible
- Reduce ambulance handover delays
- Improve patient care and potentially save lives.

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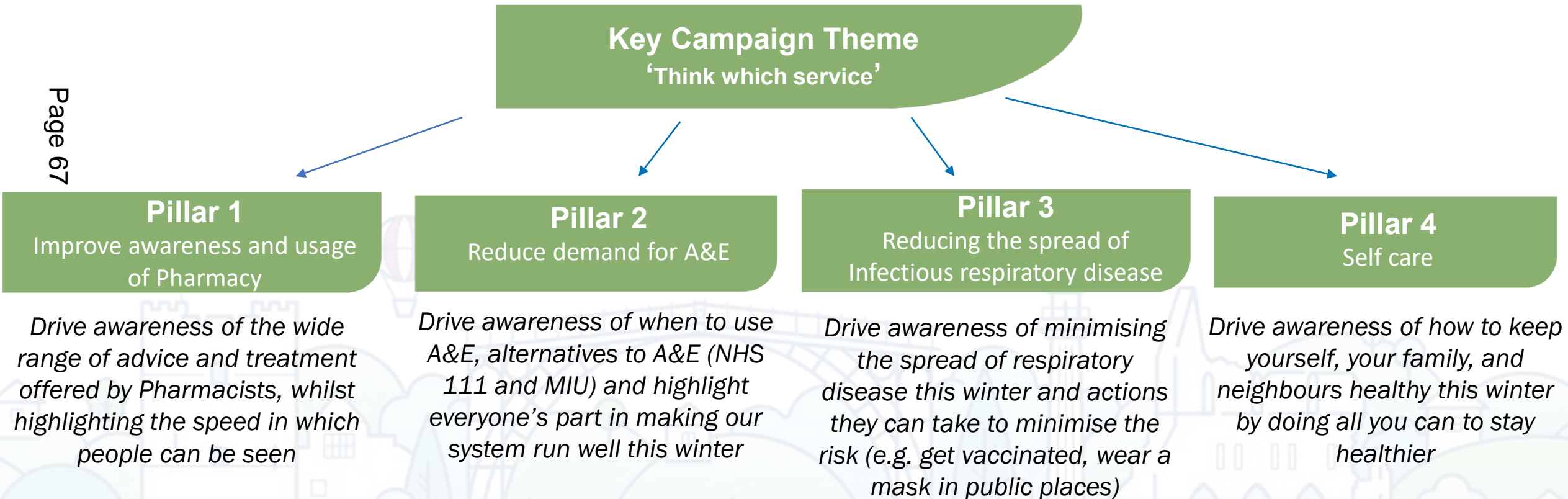
Our Approach



Approach - Reaching our four Audience Pillars

We developed one overarching key campaign brand, building on national existing messaging. This has then been drilled down into four individual campaign messages, using data intelligence, targeting the right audience and using channels most appropriate for that audience.

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Pillar 1: Improve awareness and usage of Pharmacists

Primary Care have been under significant pressure, and we know that this is important for the populations that we serve. We also know that pharmacists are under-utilised in our area, and we wanted to understand people’.

Across July 2022 we conducted 421 interviews and surveys (with residence, pharmacist and GPs) within the STW system to gain fresh insight on the role, view and barriers to using pharmacy.

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Our key findings were:

- Although there is high awareness of the overall offer of Pharmacists a significant proportion of the area are not aware that their pharmacy offered advice and treatment of minor ailments and a significant minority needs educating on the scope of advice and treatment offered
- The highest rated benefit of a pharmacist was the fact that no appointment was needed followed by faster answers
- Satisfaction with functional issues was high but lowest satisfaction was ability to talk in private and there is strong agreement that it is important to speak with someone but agreement was lower for ‘my pharmacist is easy to approach’.

Drive awareness of the wide range of advice and treatment offered by Pharmacists, whilst, highlighting the speed in which you can be seen.

Pillar 2: Reduce demand for A&E

- Between April and June 2022, we saw approx. 37,000 attendances at A&E across PRH and RSH. Attendances are coded indicating the cause and the level of severity of the attendance.
- Where an attendance is fully coded, the most common causes are **soft tissue injuries and wounds (20%), fractures and dislocations (11%), cardiovascular (11%), medical specialties (10%) and infectious diseases (9%)**.
- There are three codes that indicate either minimal or no investigation or treatment was necessary (i.e 'low cost' attendances). **In STW we consistently see over half of attendees fall into these categories.**
- Our low cost attendances are more likely to happen in the evening, and are slightly more prevalent amongst our younger, and less affluent populations.
- Soft tissue injuries drive a significant volume of our attendances, but they also drive a disproportionately high number of our 'low cost' attendances, with between 75% and 80% being categorised as such each month. The other high-volume diagnoses do not replicate this, and broadly align with wider behaviour.

Drive awareness of when to use A&E, alternatives to A&E (NHS 111 & MIU) and highlight everyone's part in making our system run well this winter

Pillar 3: Reducing the spread of Infectious respiratory disease

As we go into the colder months, viruses such as flu and COVID are more likely to spread quickly when we're all crowded together. Cold weather can make some health problems worse and even lead to serious complications, especially for those aged 65 and over.

High incidences of COVID puts additional pressure on our hospitals, so this winter, it is more important than ever to get vaccinated and help protect yourself and your loved ones.

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We can reduce the spread of respiratory disease by:

- Keeping Vaccinations and Boosters up to date (Flu and Covid)
- Hygiene: Hand washing
- Staying home when ill
- Masks (in some settings)

Drive awareness and need of minimising the spread of respiratory disease this winter and actions they can take to minimise the risk

Pillar 4: Self Care and maximising your wellbeing

We can raise awareness of important self-care techniques that will help people and their families to stay well and help ease pressures on local NHS services:

Key messages

- Simple steps include eating well, taking daily vitamins, and staying active
- Wrapping up warm whilst you're out and about this winter
- Stocking up on self-care essentials (over the counter medicines, at pharmacies and supermarkets, help relieve many common symptoms of illness)
- Look after yourself, your loved ones, and your neighbours, and get the right care in the right place (NHS111 etc.)

Drive awareness of how to keep yourself, your family, and neighbours healthy this winter by doing all you can to stay healthier

Initial insight



Survey method

An online survey was conducted between 12th and 31st December 2022. The objective of the insight was to gain a better understanding of public awareness of the range of urgent and emergency services* available to them and how they choose to access care.

The findings from the survey were used to inform the campaign design, messaging and delivery.

The survey comprised two methods of generating completes:

- Panel: The survey was placed on an online commercial panel
- Organic: The survey was distributed to local patient communities.

The following sample sizes were generated:

Sample	Completes
Panel	305
Organic	260
Total	565

**Respondents were provided a definition at the start of the survey of what was meant by urgent care.*

Integrated Care System
Shropshire, Telford and Wrekin

NHS
Shropshire, Telford and Wrekin

One week left to have your say!

We want your views on how you access NHS urgent and emergency services in Shropshire, Telford and Wrekin.

Take part via our online survey.

HELP US, HELP YOU

Integrated Care System
Shropshire, Telford and Wrekin

NHS
Shropshire, Telford and Wrekin

Not long left to have your say

We want your views on how you access NHS urgent and emergency services in Shropshire, Telford and Wrekin.

Click the link in the text to complete our short survey, open until 31st December.

Key Insights

1. GPs are considered the principal source of urgent care during surgery hours
2. Out of hours urgent care choice is more varied and males are more likely to consider A&E/999
3. People have heard of MIUs and UTCs, but there is a lack of knowledge
4. There is a need to actively promote use of MIUs and UTCs in surgery hours
5. Knowledge of NHS 111 needs to be improved (particularly online services)
6. Opinion of NHS 111 is only moderate and the benefits are not compelling
7. The over 65 are least likely to choose pharmacy for urgent care
8. The NHS dominates sources of media for health, but the market is fractured
9. A quarter are hesitant about the COVID-19 vaccine

Our Strategy

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We have an audience that lacks trust in 111 and by association other services outside of GP and A&E – Phase 1 must therefore be about building trust back up

**BUILD CONFIDENCE IN
SYSTEM**



**EDUCATE ON HOW TO
USE THE SYSTEM**



**SHOWCASE SUCCESS
OF THE SYSTEM**

Once trust is established, we can then start to deliver an education campaign. This campaign can be content heavy – allowing the user to build their knowledge through engaging messaging

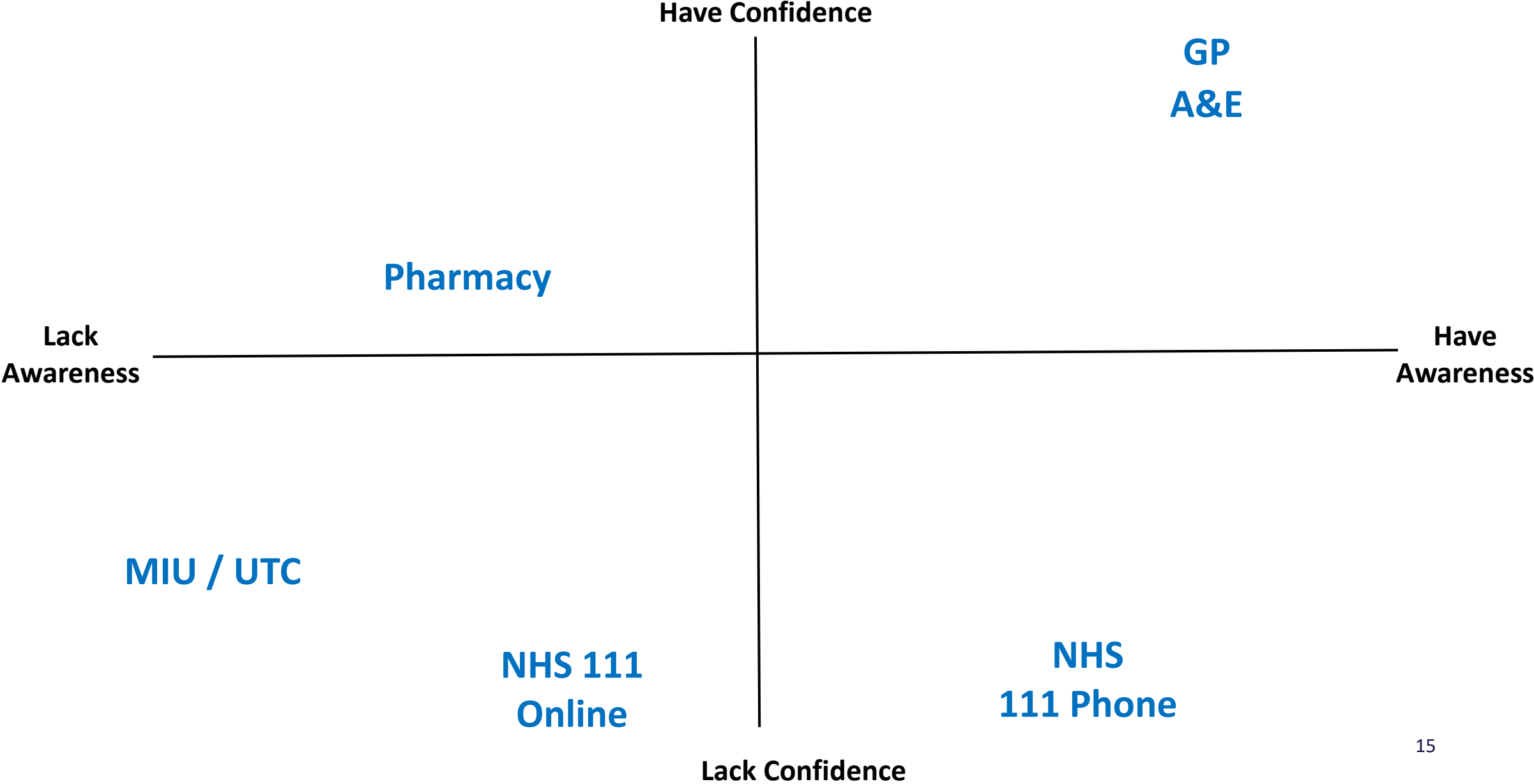
Our final stage of the funnel is Success. This in turn builds back trust and re-affirms our education messaging to showcase what has been learnt and actioned has delivered good results.



CURRENT

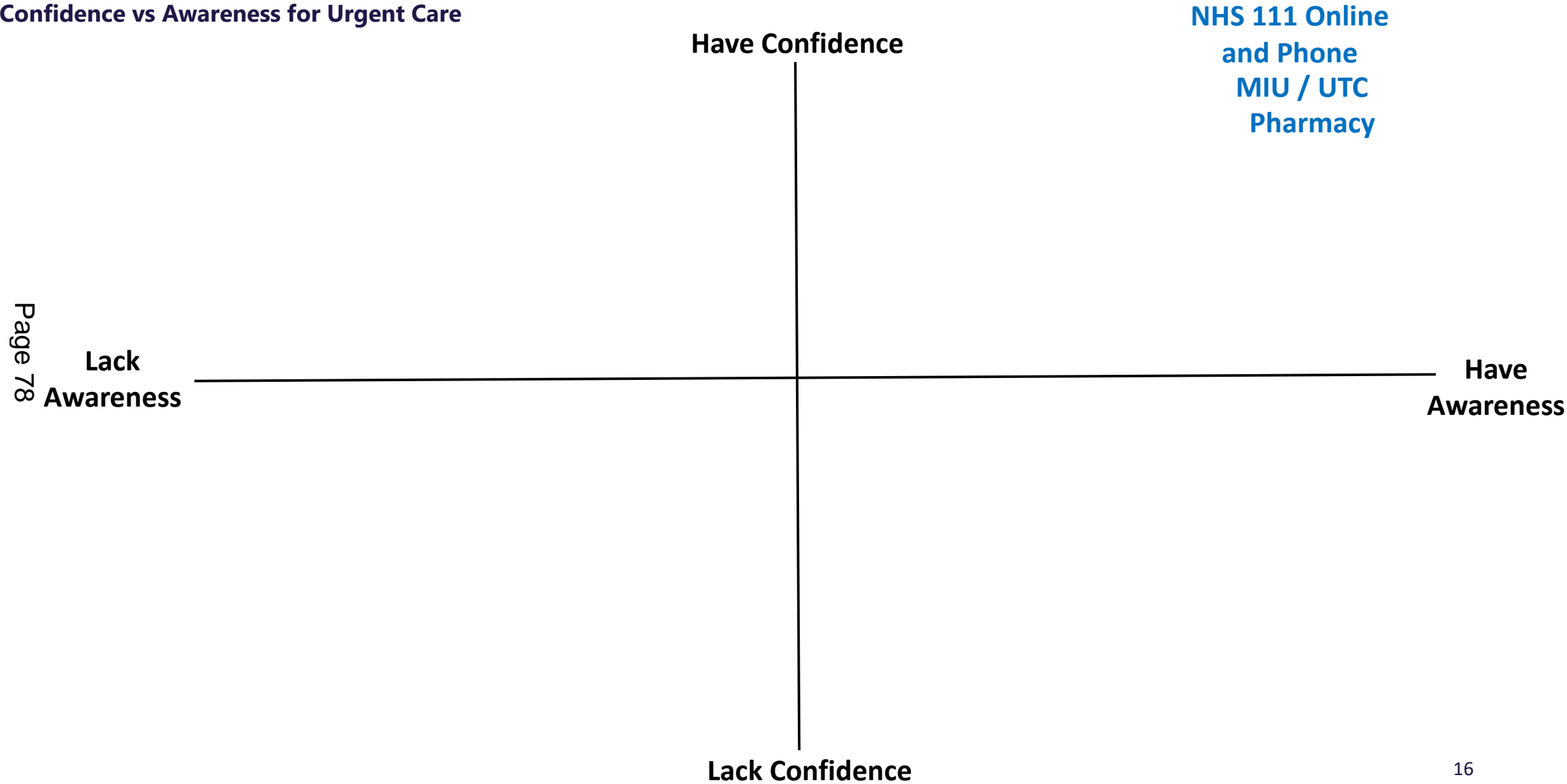
Confidence vs Awareness for Urgent Care

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Desired

Confidence vs Awareness for Urgent Care



Delivery



PR Activity

Whichurch Herald

01/02/2023

[Shrophire: New campaign to help ease pressure on NHS](#)

NHS Shropshire, Telford and Wrekin

01/02/2023

[Think which service? New NHS campaign helps people to get quicker urgent care](#)

NHS Shropshire, Telford and Wrekin

10/04/2023

["Think which service" during the upcoming industrial action](#)

Shropshire Live

11/04/2023

[TV personality, Dr Ranj Singh urges residents to 'Think Which Service'](#)

Celebrity Angels

12/04/2023

[Dr Ranj Singh – An Important Message for NHS Service Users](#)

NHS Shropshire, Telford and Wrekin

05/05/2023

[Dr Ranj Singh, teams up with local NHS, urging residents to 'Think Which Service'](#)

Shropshire Star

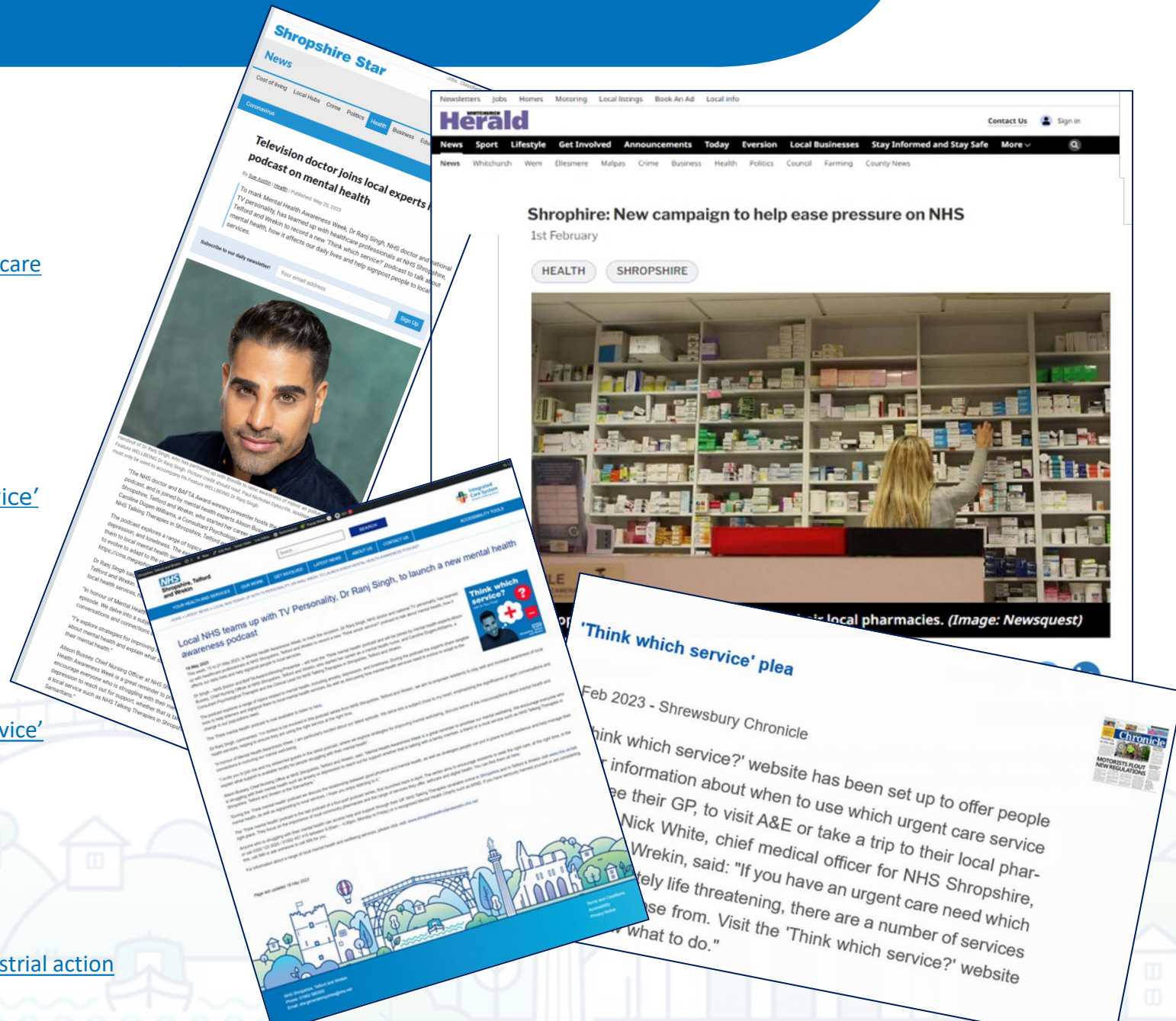
20/05/2023

[Television doctor joins local experts in podcast on mental health](#)

NHS Shropshire Telford and Wrekin

11/07/2023

[Resident urged to use health and care services wisely ahead of planned industrial action](#)



Educate on how to use the system (1)

- Bus interiors
- Leaflet drop – 28,000 households, postcodes in close proximity to MIUs and to ‘high dependency’ A&E user areas

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Educate on how to use the system (2)

- Outdoor and digital
- 4 executions Self help, Pharmacy, MIU and NHS 111 Online

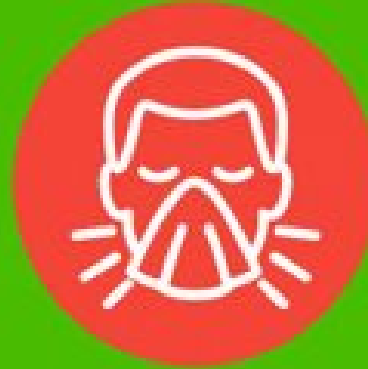
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Think Pharmacy
before GP

Your pharmacist can
provide confidential advice
and treatment for a range
of common illnesses.
With no appointment
necessary.



Skin rashes



Coughs & Colds

NHS

Shropshire, Telford
and Wrekin

Visit [thinkwhichservice.co.uk](https://www.thinkwhichservice.co.uk)

HELP US,
HELP YOU

Building Belief

- Outdoor and digital
- 4 executions 2x MIU, Pharmacy and NHS 111 Online



'Think' Podcast Series

A series of four episodes where each ep delves into one of the 4 pillars. Educating listeners on the correct services to use to get the right care, as well as how to look after yourself.

Promoting the podcast series across a defined period

- Social Media Discoverability campaign reaching core audience demographic across a defined time frame, based on the number of podcasts created and the release strategy.
- Targeting optimised to reach the most relevant audience across all content, driving engagement and action.

Features:

- Paid social campaign with generalised targeting allows one audience to be reached for the entire campaign duration
- Audiogram creative & thumbnail image provided for the series.
- Fully optimised ads on Facebook and Instagram.



Campaign landing page

NHS Shropshire, Telford and Wrekin

Integrated Care System

YOUR HEALTH AND SERVICES | OUR WORK | GET INVOLVED | LATEST NEWS | ABOUT US | CONTACT US | ACCESSIBILITY TOOLS

HOME > YOUR HEALTH AND SERVICES > THINK WHICH SERVICE?

Think which service?

Think which service?

If you find yourself in need of medical help, there are a range of NHS services available depending on your need. We have put together a guide for which NHS service to choose from when you need help, to ensure you get the right help, at the right place, as quickly as possible.

check the Bank Holiday opening times of your local pharmacy, please visit the NHS website or click here.

Think which service? Podcasts

- Think 111 before A&E
- Think Minor Injury Units before A&E
- Think Pharmacy before GP
- Think self-help and self-care
- Think vaccinations for complete protection

As pressures continue to mount on our local health and care services, knowing which service to use and when will make sure everyone in our local community gets the right help at the right time.

If more of us think about which service to use first, just like our residents did in their stories below, we'll help free up emergency care for those who need it the most.

- Read Oli's story
- Read Lisa's story
- Read Mia's story
- Read Harry's story

By simply thinking about which service to use before acting, we can help to make sure everyone in our local community gets the right help at the right time.

Remember, 999 and A&E are for emergency, life-threatening illnesses only.

Back to 'Your Health And Services'

Page last updated 29 June 2023

- Landing page contained key information about the different services available
- Links to other services – e.g. MIU pages
- Case studies

Campaign Laydown

	Campaign assets	Timings
Door drop	Leaflet	Distributed w.c 13th Feb
Digital	Microsite	Launched January
	Social (Meta)	Jan – 16 weeks
	Digital display	Feb – 12 weeks
	E-marketing	Jan, March, May
OOH	Bus	30th Jan 4 weeks
	6 Sheets	30th Jan - 4 weeks
	Radio	6th Feb – 8 weeks
Other	Podcast	May 2023

Post campaign Research



Survey method

A pre/post survey was conducted with the following fieldwork dates:

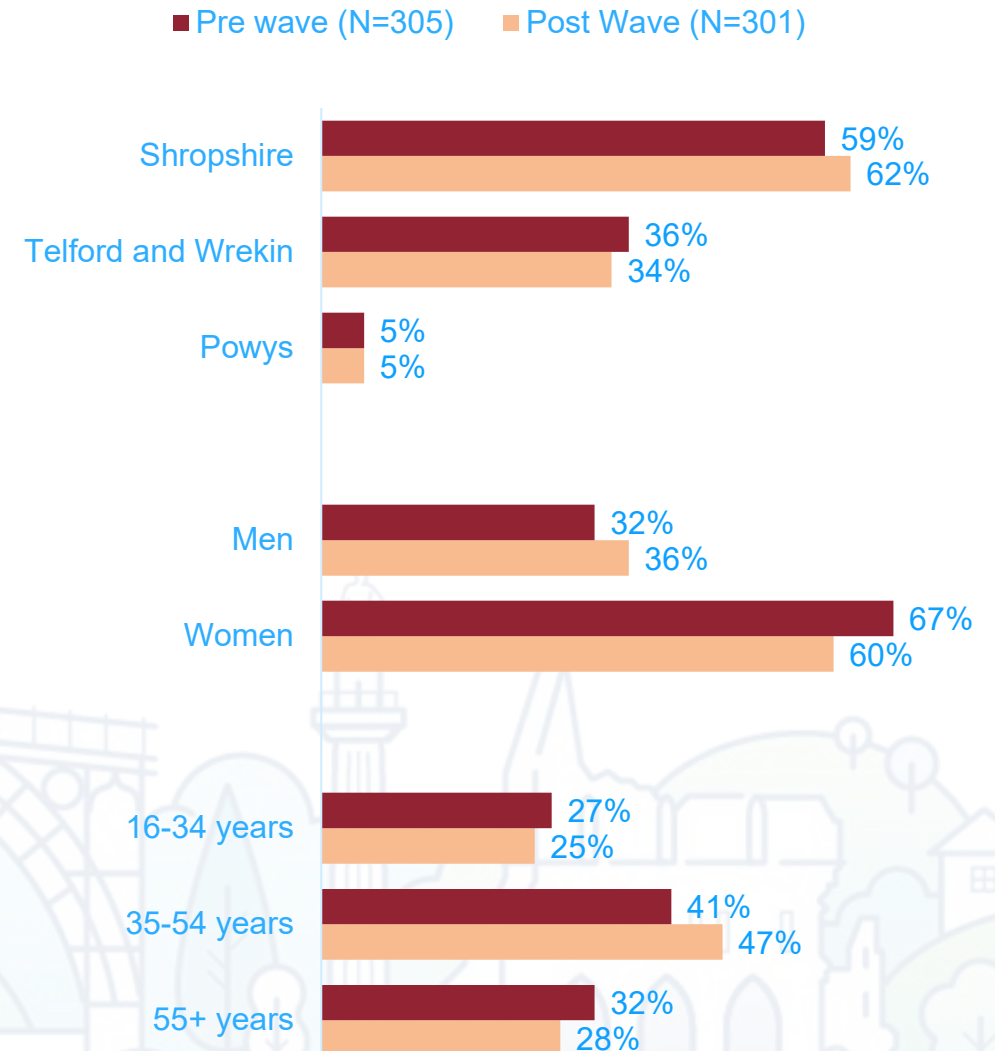
- Pre-stage: 12th to 31st December 2022.
- Post stage: 14th to 24th April 2023

The post stage survey was conducted using a commercial online panel only. For comparison, only the data from the panel in the pre campaign research was compared

The following sample sizes were generated:

Sample	Completes
Pre-stage (panel only)	305
Post stage (panel only)	301

Profile of completes



Campaign materials tested

When Oli sprained his wrist, he knew to visit his local Minor Injuries Unit (MIU) and avoid a long wait in A&E

Read Oli's story and find out which services your MIU offers at Thinkwhichservice.co.uk

Think which service?
Find out which service in Shropshire, Telford and Wrekin can best help you.

SELF CARE	111.NHS.UK	PHARMACIST	GP	MINOR INJURY UNITS	999 A&E
Common ailments and illnesses Minor cuts and grazes, bruises and minor sprains, coughs and colds	Need help fast and it's not an emergency? Feeling unwell? Unsure? Anxious? Need help?	Health advice and over the counter medicines Fever, stomach upsets, bites, stings, headaches, aches and pains	Symptoms that won't go away Ear pain, back pain, stomach pain	Minor injuries Sprains, fractures, minor burns, skin infections, minor eye injuries	Life threatening emergencies Loss of consciousness, severe breathing difficulties, heavy bleeding

Thinkwhichservice.co.uk

Ed had a persistent temperature and stomach bug.

But got immediate help by using NHS 111 online.

Ed knew by using NHS 111 online he'd get the right advice and treatment, quickly.

Read Ed's story and find out how NHS 111 online can direct you to the right advice and service Thinkwhichservice.co.uk

Harry fell while hiking and broke his arm.

But his local Minor Injuries Unit (MIU) had him home with his feet up by dinner time.

Harry knew by going to an MIU he would avoid a long wait in A&E.

Read Harry's story and find out which services your MIU offers at Thinkwhichservice.co.uk

Lisa woke up with an eye infection.

But got treatment and advice from her local pharmacy by lunchtime.

Lisa knew she didn't have to wait for a GP appointment as a pharmacist could help.

Read Lisa's story and find out which services your pharmacy offers at Thinkwhichservice.co.uk

Mia had a persistent temperature and tummy bug.

But her mum got immediate help by using NHS 111 online.

Mia's mum knew by visiting 111.nhs.uk she'd get the right advice and treatment, quickly.

Read Mia's story and find out how 111.nhs.uk can direct you to the right advice and service.

Thinkwhichservice.co.uk

Think NHS 111 online

Not sure what to do? Go straight to NHS 111 for medical help and advice.

For urgent help when it's not an emergency.

Search NHS 111 online to avoid A&E wait times, no matter what time of the day.

Visit thinkwhichservice.co.uk

Think Pharmacy before GP

Your pharmacist can provide confidential advice and treatment for a range of common illnesses. With no appointment necessary.

Coughs & Colds

Skin rashes

NHS Shropshire, Telford and Wrekin

Visit thinkwhichservice.co.uk



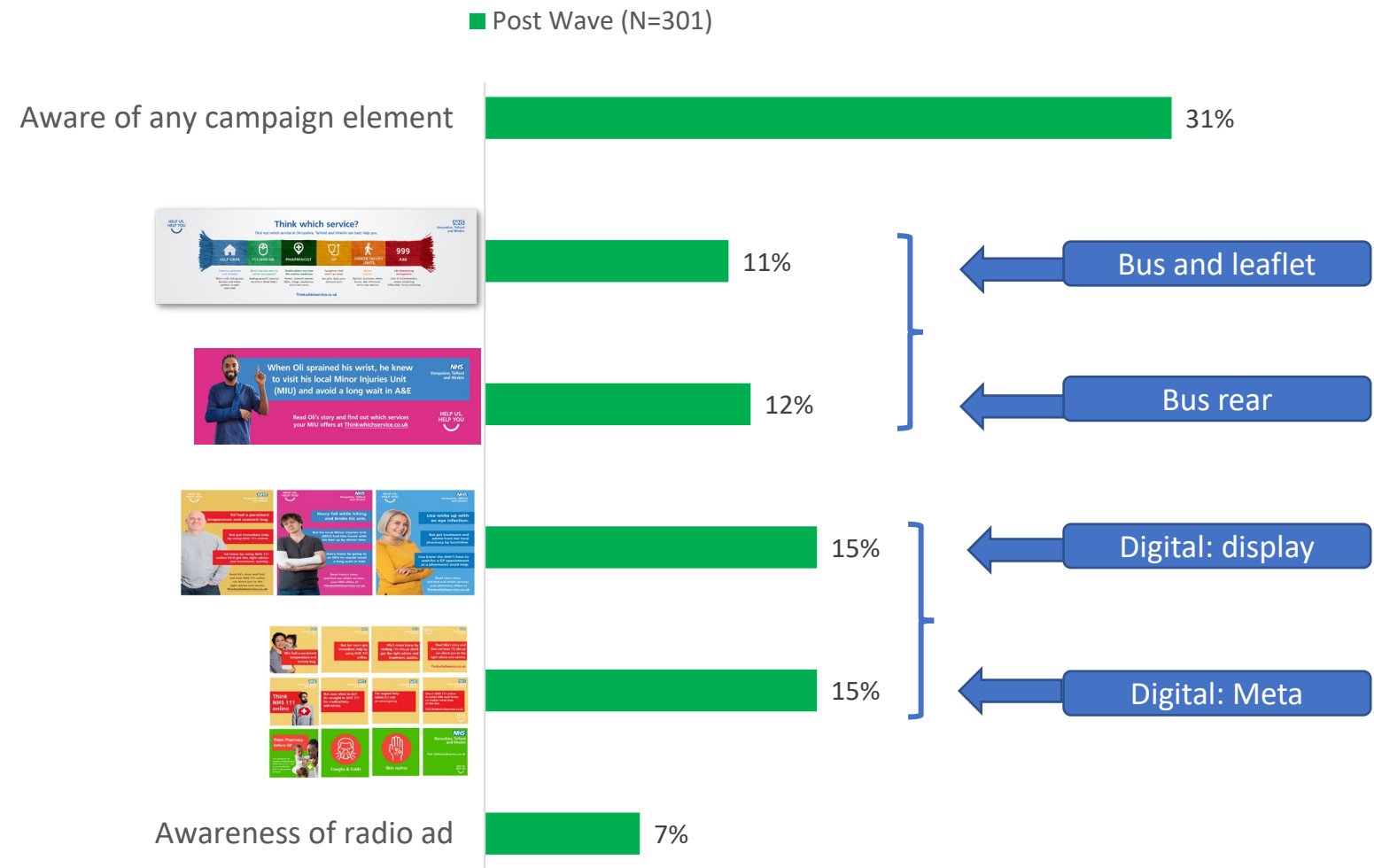
Post research findings



**Key Fact 1:
Recognition of the
campaign is
relatively high**

About a third of respondents saw the campaign

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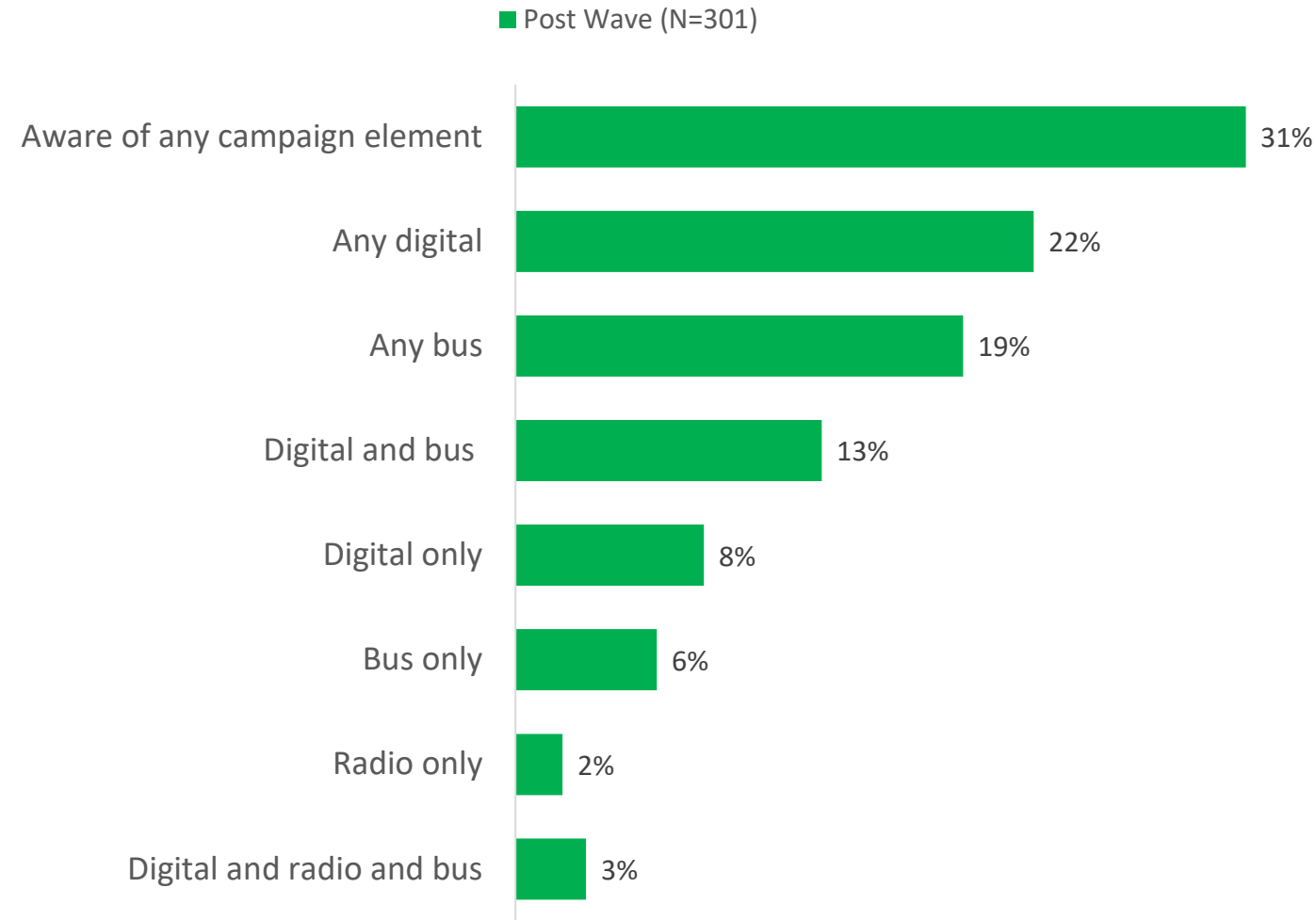


- Overall awareness of the campaign was relatively good, with approximately a third of all respondents (31%) having seen at least one of the campaign elements.
- Awareness of posters (either physical or digital) received broadly similar levels of awareness.
- Awareness of the radio adverts was the lowest of all the campaign elements at 7%.

Have you ever seen/heard this advert before?

The digital and bus campaigns contributed roughly equally to awareness

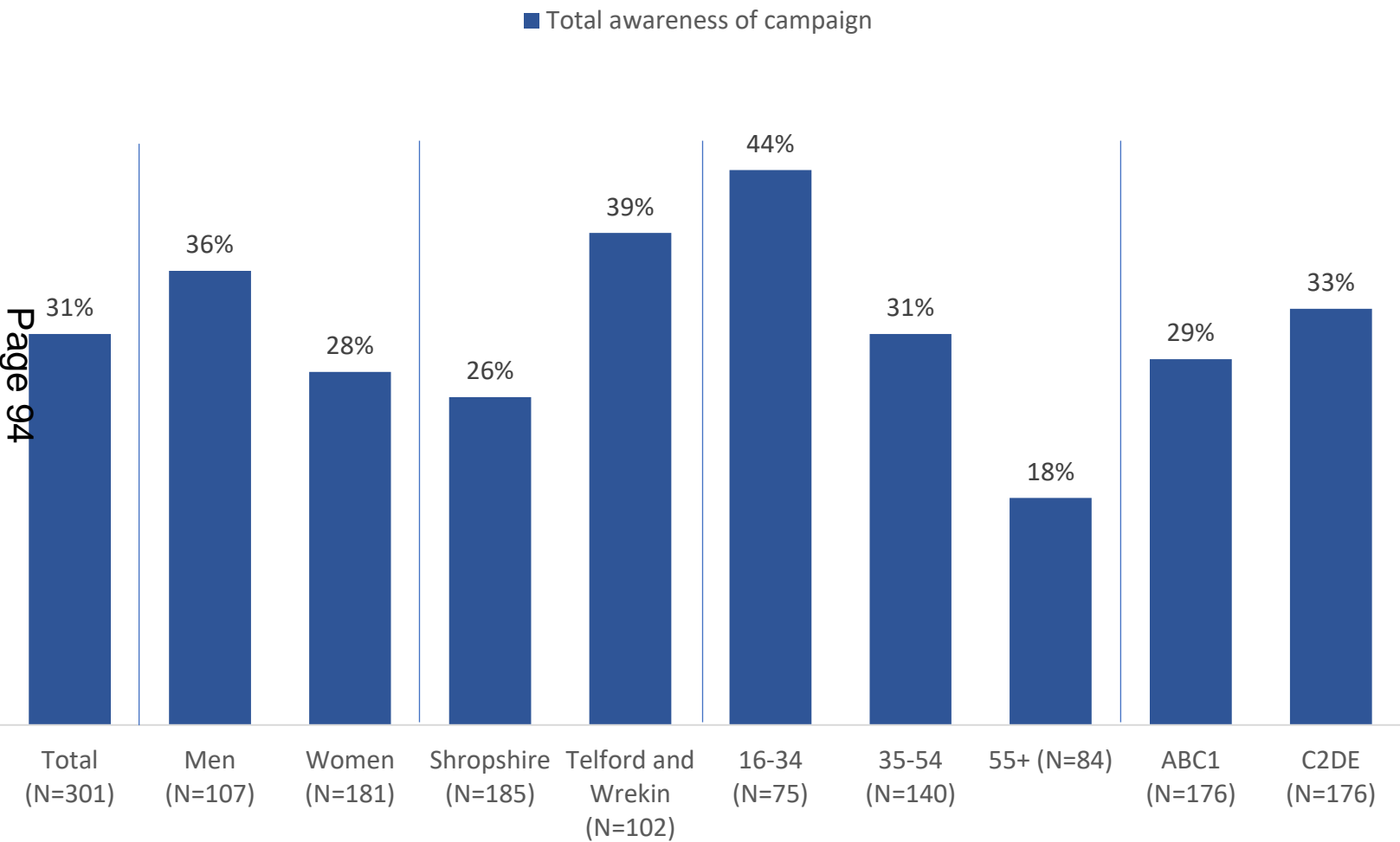
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- The digital and bus adverts generated the most awareness, with the digital adverts generating slightly more awareness than the bus adverts.
- Many respondents were aware of multiple elements of the campaign, with over half of those aware of digital or bus being aware of both (13%).
- A tenth (3%) of those aware of the campaign were aware of all three elements (bus, digital and radio).
- The radio adverts added little additional awareness. Only 2% **only** listened to the radio advert, with the remainder of those who listened to the radio advert also being aware of either digital or bus.

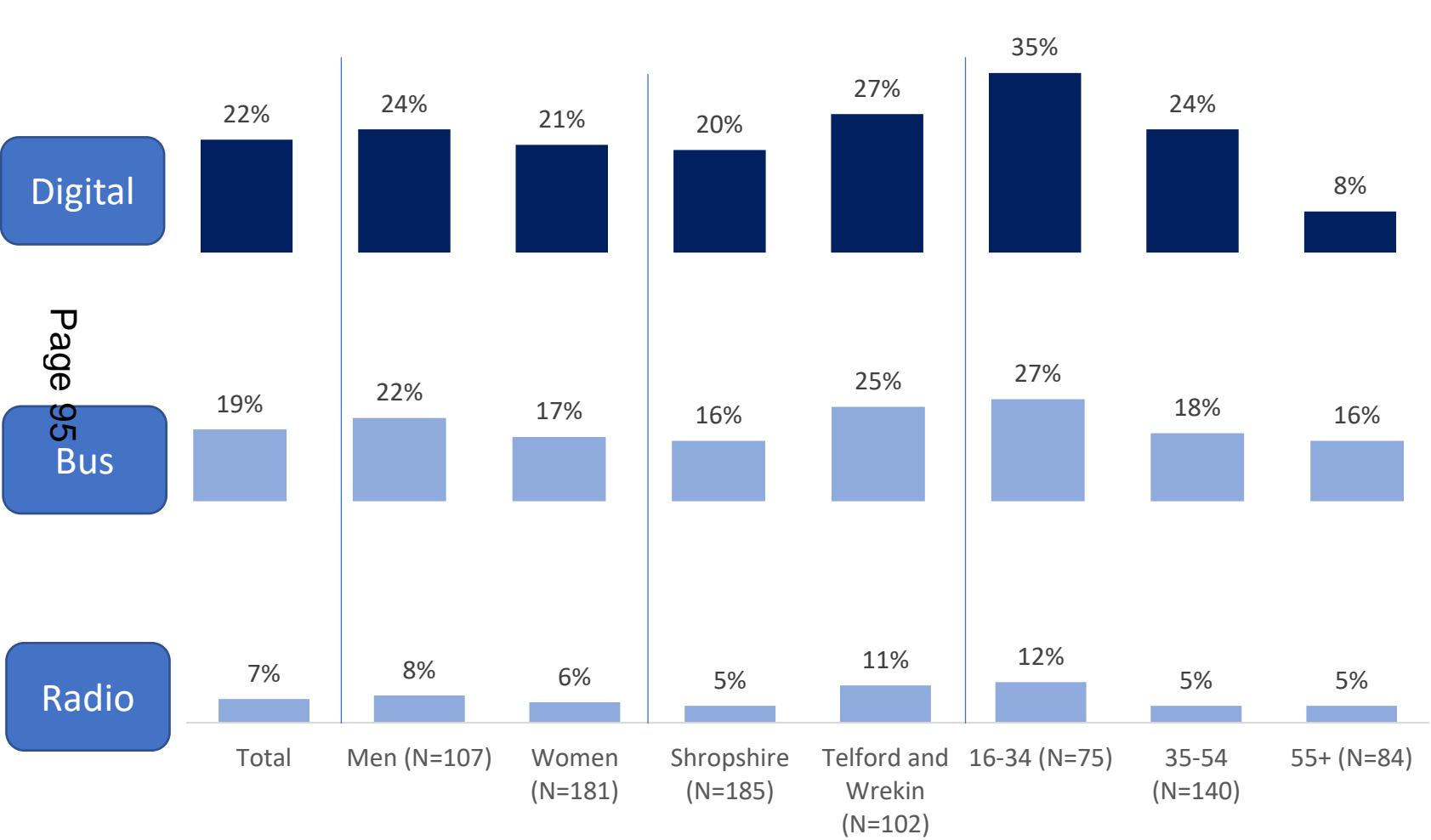
Have you ever seen/heard this advert before?

There was a strong relationship between age and awareness



- Levels of awareness varied markedly by demographic groups.
- The largest relationship was with age, with awareness declining significantly with age. Those aged 16-34 years (44%) were over twice as likely to see the campaign as those aged 55 years or more (18%)
- Men (36%) were directionally more likely to have seen the campaign than women (28%).
- Respondents in Telford and Wrekin (39%) were significantly more likely to have seen or heard the campaign than those in Shropshire (26%).
- There was little relationship between awareness and SEG.

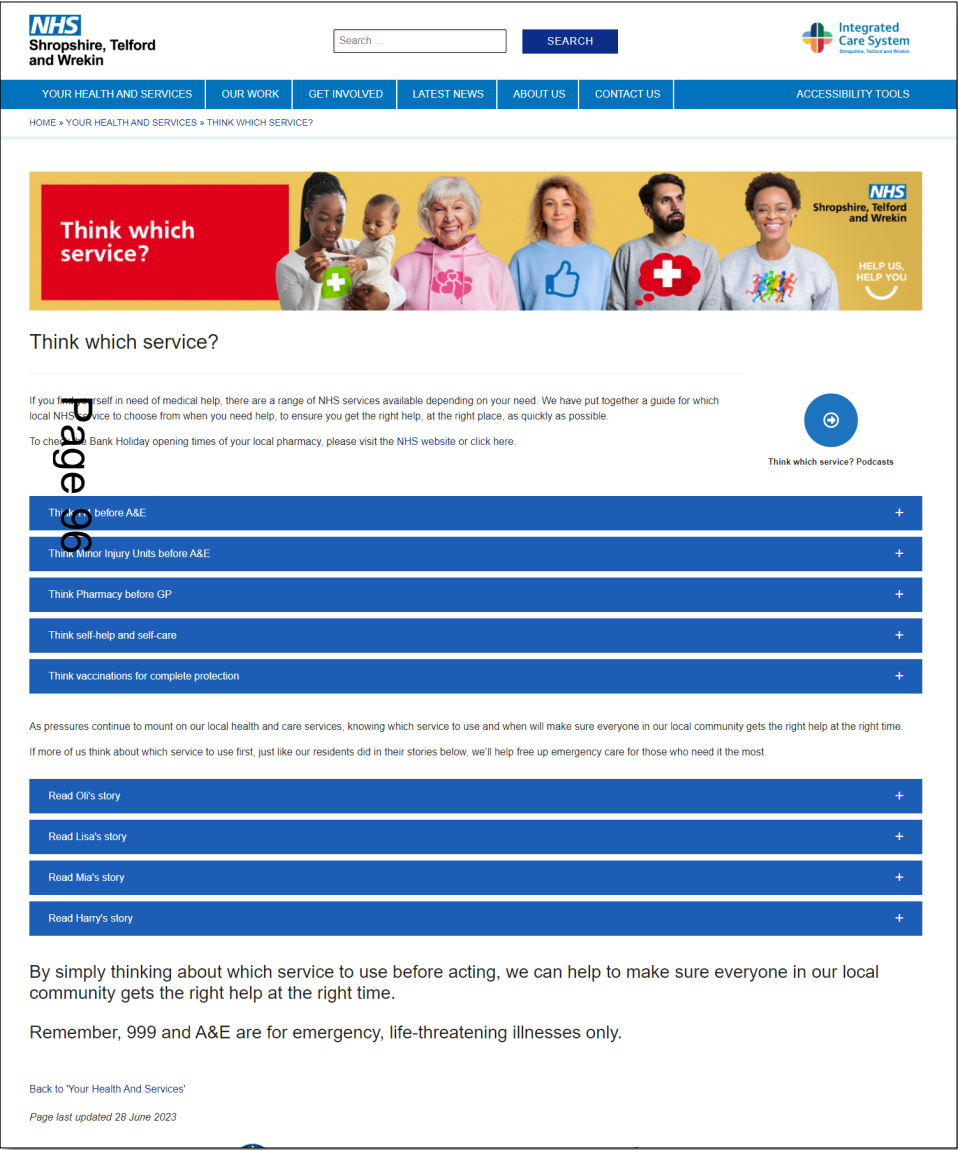
Awareness was low among older respondents for all elements



- All elements of the campaign received slightly higher levels of awareness among men.
- Higher levels of awareness were also achieved in Telford and Wrekin than in Shropshire.
- By age, awareness of digital had a very strong correlation with age, with markedly higher awareness being achieved among the 16-34 year old group than older respondents.
- For the 16-34 year old group and the 35-54 year old group digital generated the highest level of awareness.
- However, for the 55+ group the bus adverts generated the highest level of awareness (double that of the digital). Digital also added no additional awareness to the 55+ group with none being aware of digital only. (Radio did add some awareness among the 55+ group, with 20% of those aware only being aware of radio only).

Web stats

1 Jan 2023 - 30 Apr 2023



New users
3,714

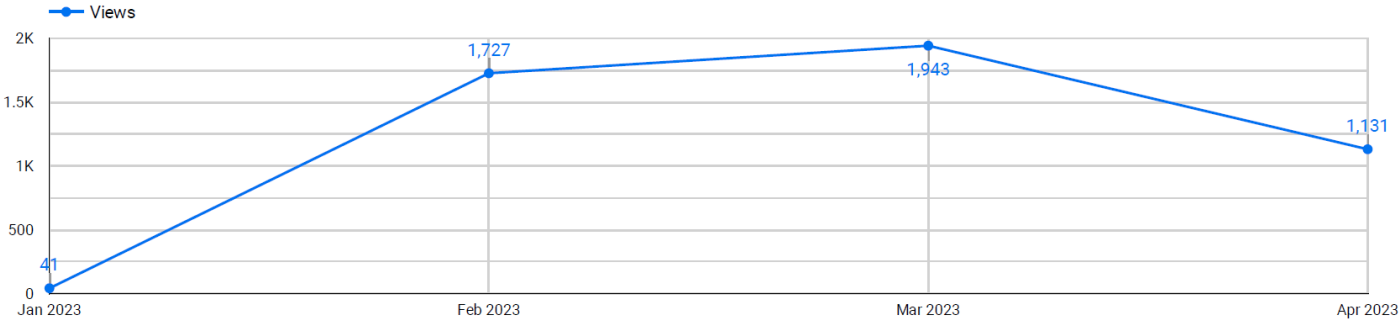
Active users
4,002

Engagement rate
20.92%

Sessions
4,451

Event count
14,587

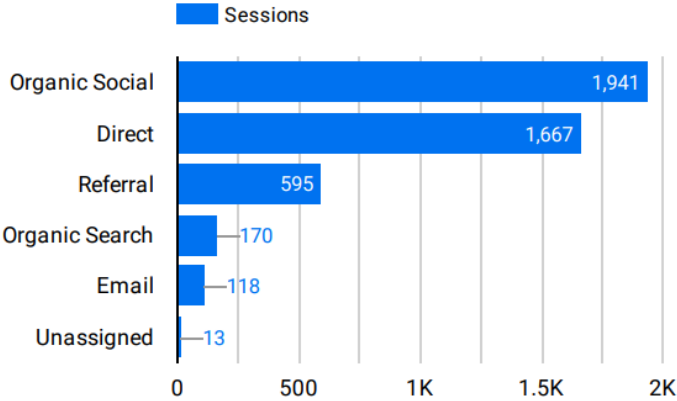
Event count per user
3.64



Page title	Sessio...
1... Think which service? - NHS Shropshire, Telford and Wrekin	4,283
2... Think which service? New NHS campaign helps people to get quicker urgent care -...	217

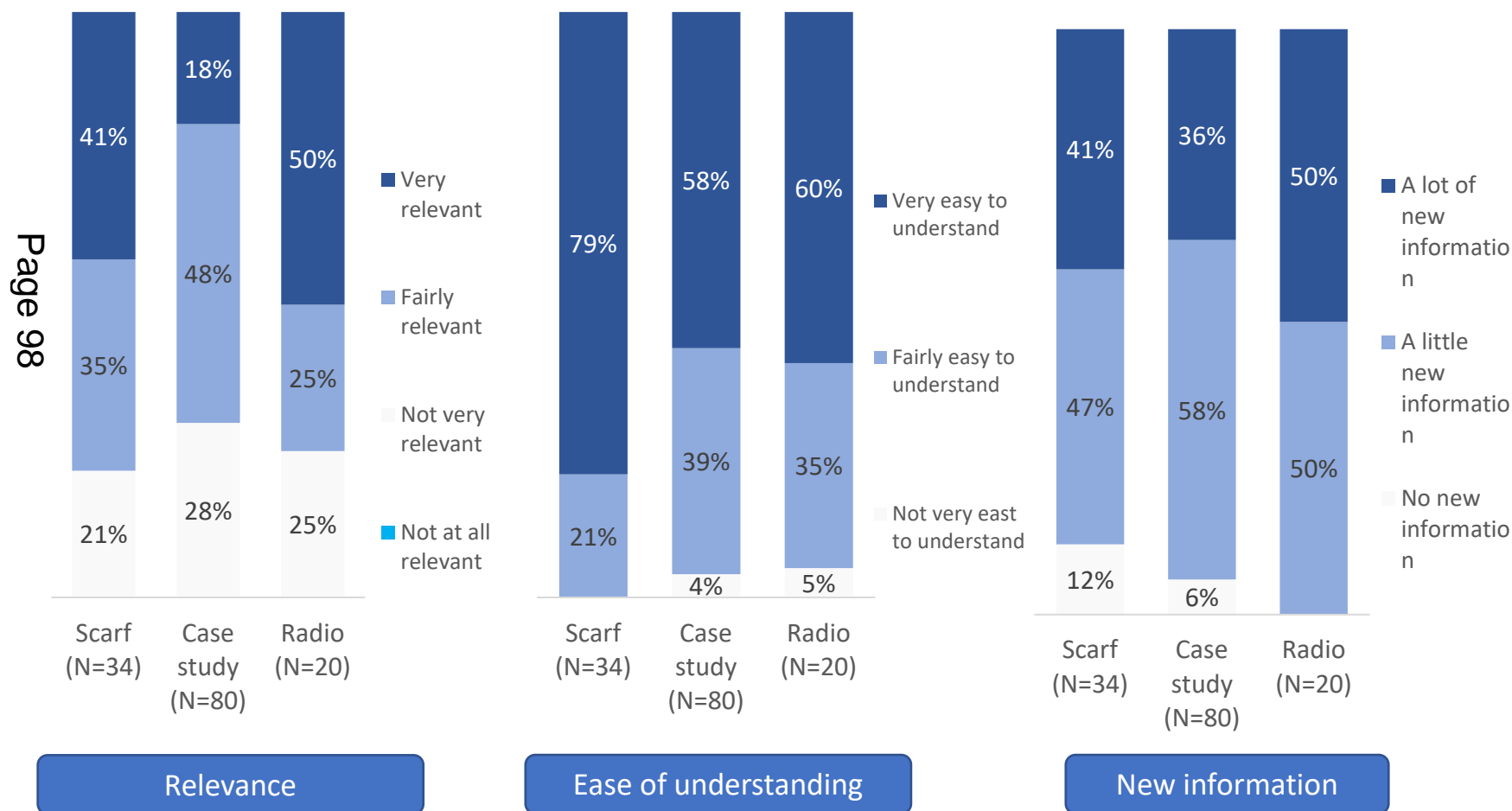
Grand total 4,451

1 - 2 / 2 < >



Key Fact 2:
**Sentiment towards
the advert was good,
with the scarf advert
performing best**

The scarf advert was particularly well received.



- Sentiment to the individual elements of the campaign was positive.
- All adverts were seen to be *easy to understand* and contained *new information*.
- While base sizes for the scarf (N=34) and radio adverts (N=20) were low, reactions to these adverts were extremely positive.
- The scarf advert was particularly seen as being *easy to understand*.
- The relevance of the case study ads was slightly lower and this could be due to the fact that each advert contained a specific health condition, which may not be perceived as being relevant to respondents.

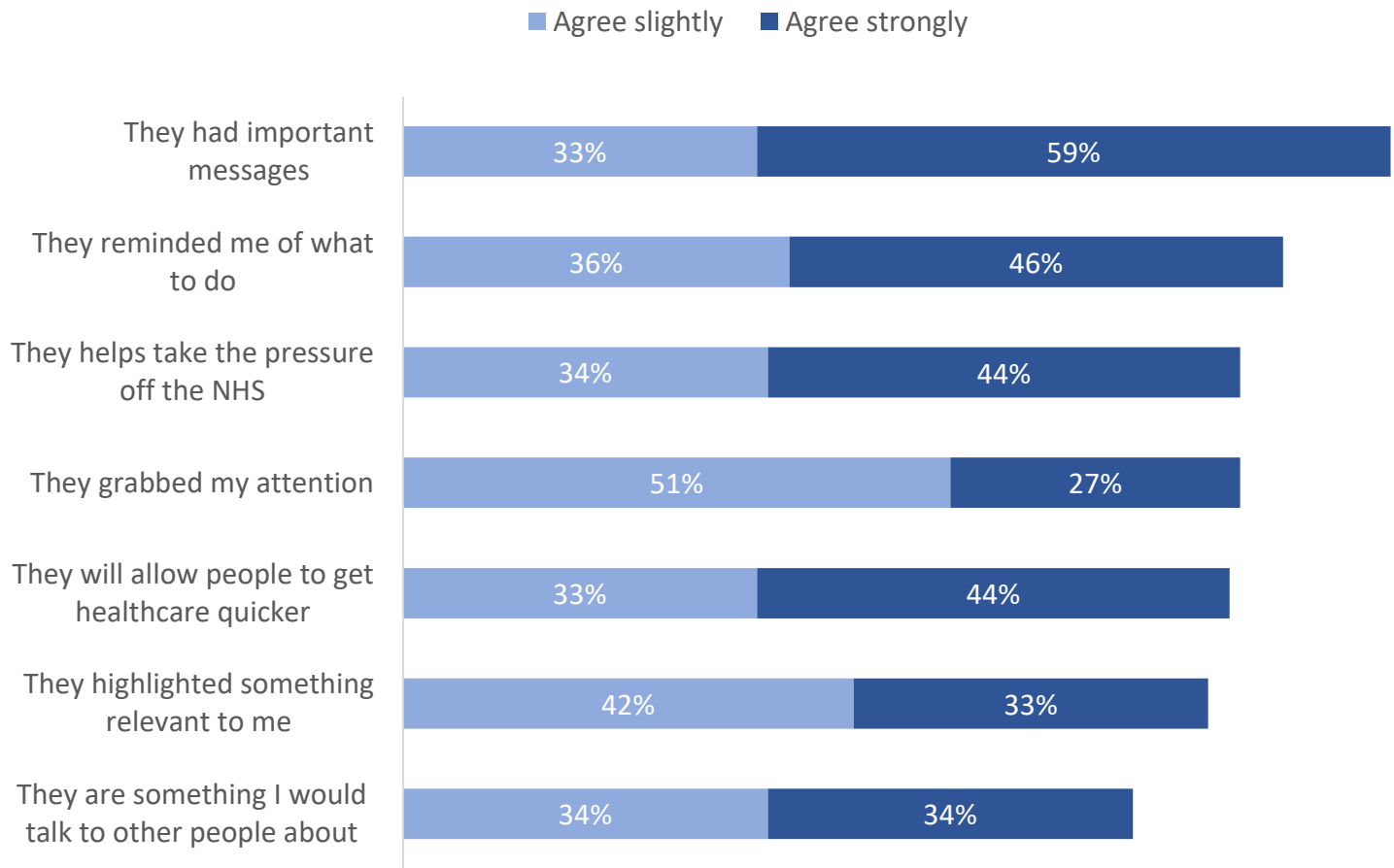
How relevant was this advert to you? How easy to understand was this advert? Which of these statements best describes how informative the advert was to you?

Base= all who saw advert (see chart for sample size)

Sentiment towards the adverts were positive



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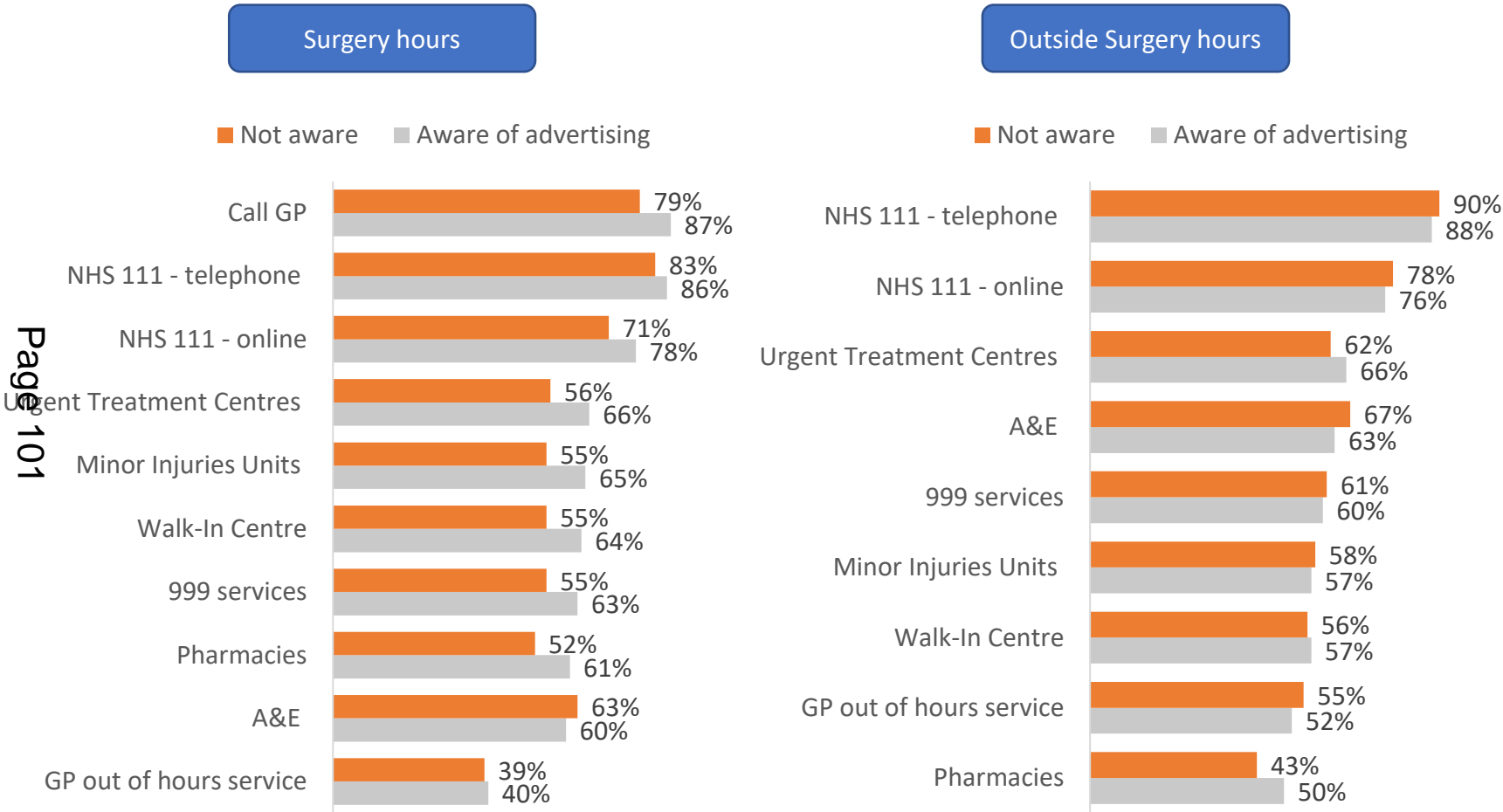
- The campaign was received favourably by those who saw it.
- They felt that it had *important messages* (92%) and *reminded them what to do* (82%).
- The adverts were also perceived to improve out comes for both the individual (*allow people to get healthcare quicker* (77%)) and the NHS by *taking pressure off* (78%) and *allow people to get healthcare quicker* (77%).

Thinking about all the information that we have shown you, how much do you agree or disagree with comments other people have made about this information?

Base: all respondents aware of campaign (N=89)

Key Fact 3:
**The advertising
campaign helped
expand consideration
for NHS services during
surgery hours**

Those aware of the campaign have a wider consideration set during surgery hours



- There is some evidence that those who were aware of the campaign would consider a wider range of NHS services **during surgery hours**.
- They were particular more likely to consider *Minor Injury Units (MIUs)* and *Urgent Treatment Centres (UTCs)*
- Those aware of the campaign were also more likely to use *NHS 111*, in particular *NHS 111 online*.
- However, **outside of surgery hours** there was virtually no impact in consideration.

Post research Summary



Summary - Adverts

- Awareness of the campaign was reasonably high with almost **a third (31%) of all respondents being aware of at least one element of the campaign.**
- **The digital and bus elements of the campaign generated the most awareness**, with digital generating slightly more awareness than the adverts located on buses.
 - Radio generated very little additional awareness, with the majority of those aware of radio also being aware of the digital or bus adverts. However, **radio did generate some incremental awareness among those aged 55+.**

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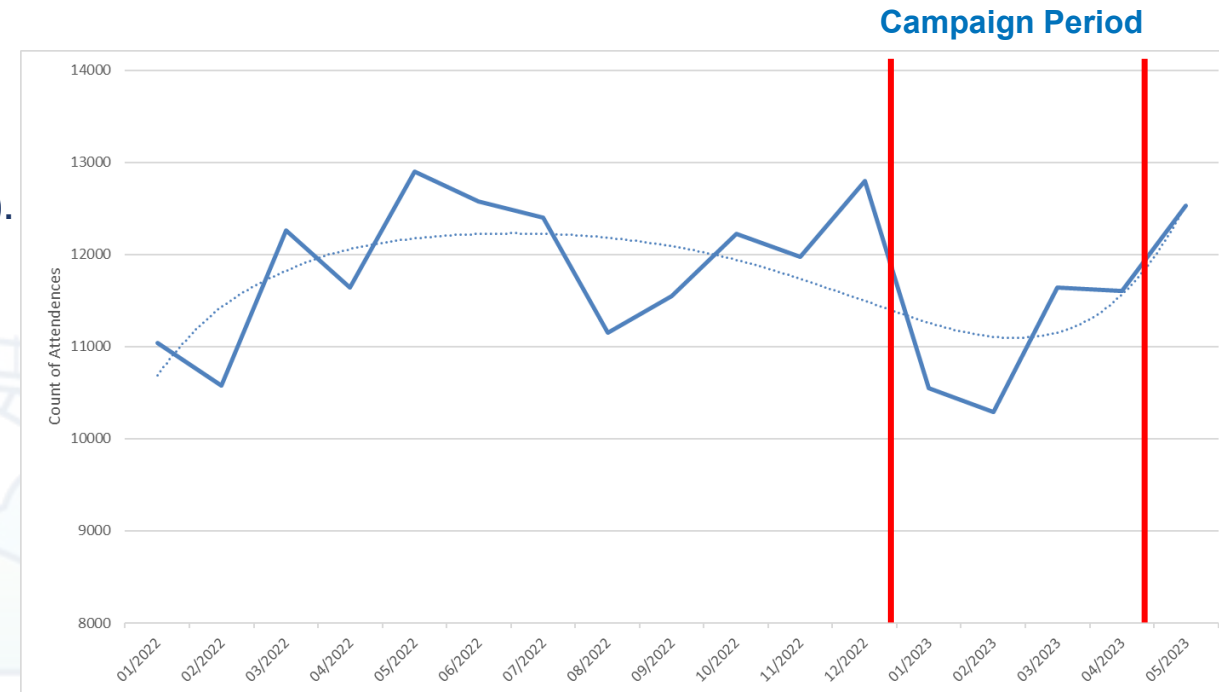
- Awareness of the digital adverts correlated very strongly with age, with **younger respondents (16-34 years) achieving much higher levels of awareness than older respondents.** Despite awareness of digital being much lower among 35-54 year olds it still generated the highest levels of awareness.
- Awareness of all campaign elements were lower among 55+ years, but in contrast to younger respondents bus rather than digital generated the most awareness (almost twice as much as digital).
 - **Sentiment towards the adverts was positive.** They were thought to be *easy to understand* and also achieved high levels of *relevance*.
 - They were also rated as providing *important messages* and *new information*.
 - The adverts were perceived to improve outcomes both for patients (*allow people to get healthcare quicker*) and the NHS (*helps take the pressure off the NHS*).
 - Sentiment was lower in Telford and Wrekin where the *relevance* of the adverts was rated lower.

Outcomes: Activity Figures



Accident & Emergency

- Attendances at both of our acute hospitals have been lower than the previous year for most of the last 12 months. However, 3 of the biggest drops were in **January 2023 (6% lower)**, **February 2023 (6% lower)** and **March 2023 (9% lower)**, against an average of around 1-3% for the rest of the year.
- There was sustained decline in attendances over the campaign period across **all three age brackets (18-40, 41-64 and 65+)**, most notably amongst the 65+ bracket.
 - For those aged 65+ attendances dropped from 3004 attendances in December to 2596 in February. This is a 13.5% reduction. The other age groups saw around a 10% reduction.
- We didn't see a similar trend in previous years**, and our January 2023 attendances across all three groups were lower than any other month since at least April 2019 (excluding initial Covid period).
- Attendances arriving by ambulance remained flat during this time. **The drop in attendances was driven by those arriving by their own transportation.** Similarly, the decline was most notable in those discharged, rather than being admitted to hospital.



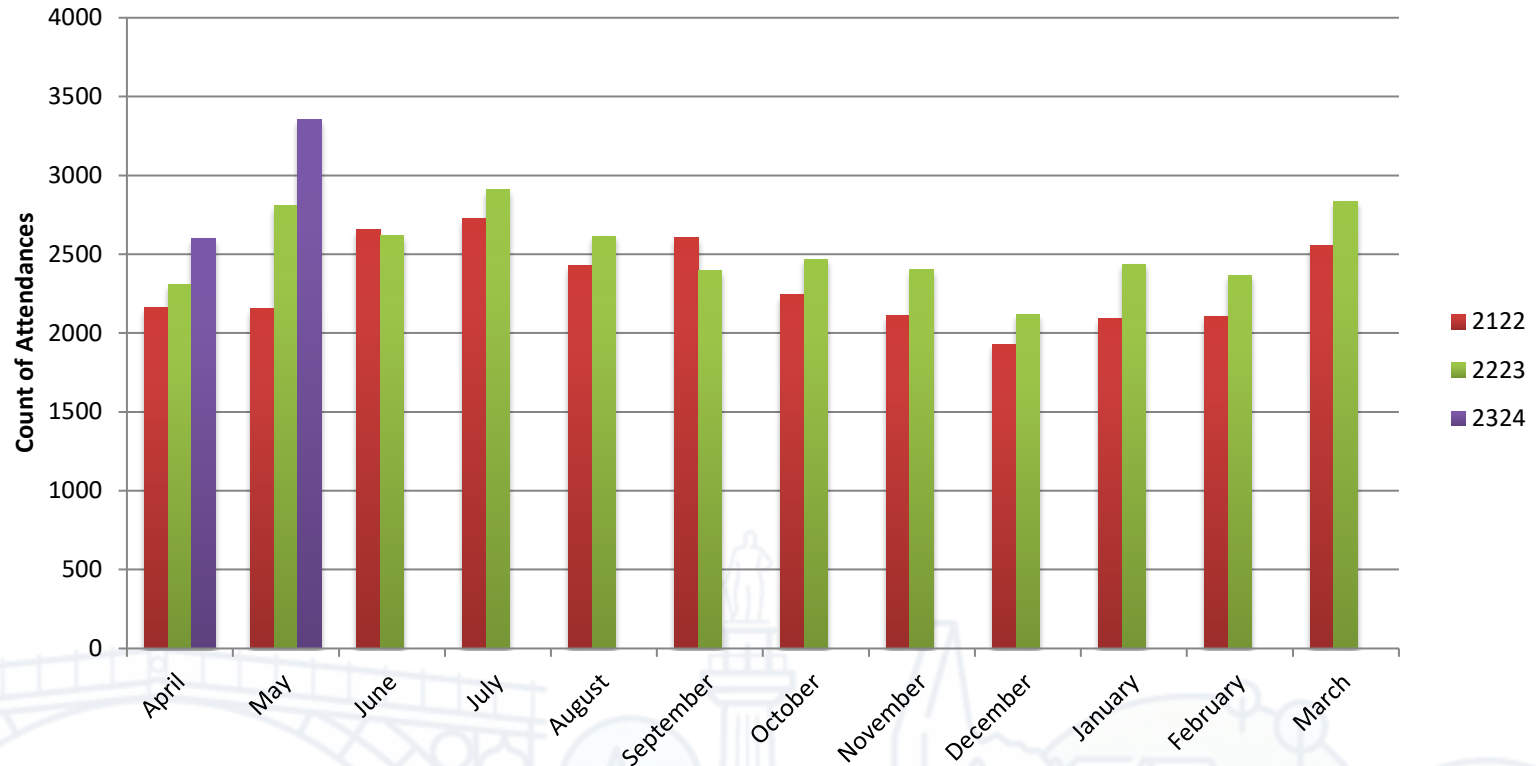
Minor Injuries Units

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- Throughout the last twelve months, attendance at our MIUs has been between 6% and 10% higher than the previous year. During the campaign period, we saw larger uplifts vs the comparative month of the previous year of:

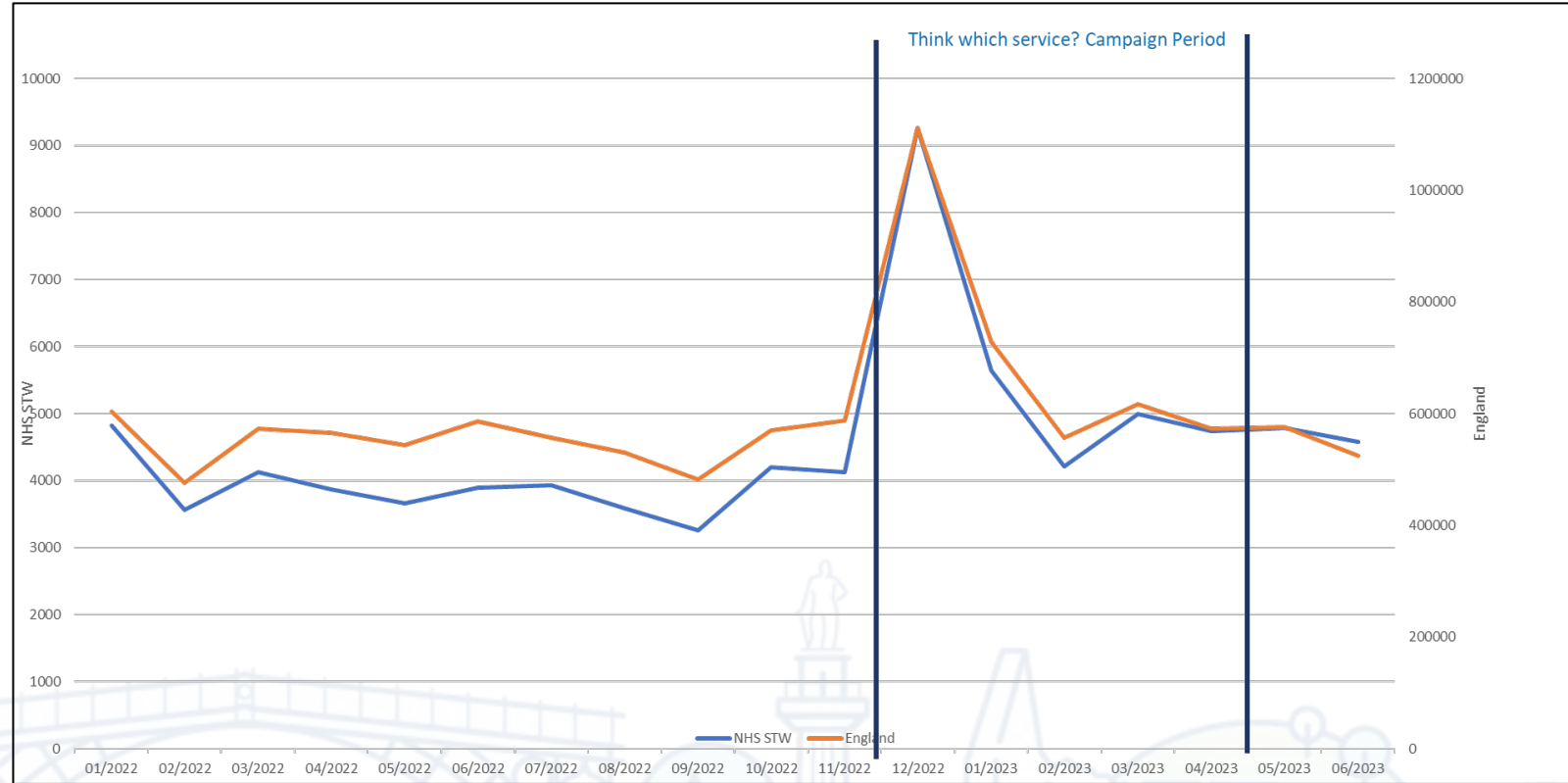
January +16%
February +12.5%
March +11%
April +12.5%

- These increases are largest in the 11-17 and 18-40 age groups.
- Compared to 12 months ago, attendees are slightly more likely to attend based on their own decision, rather than an external referral such as NHS111.



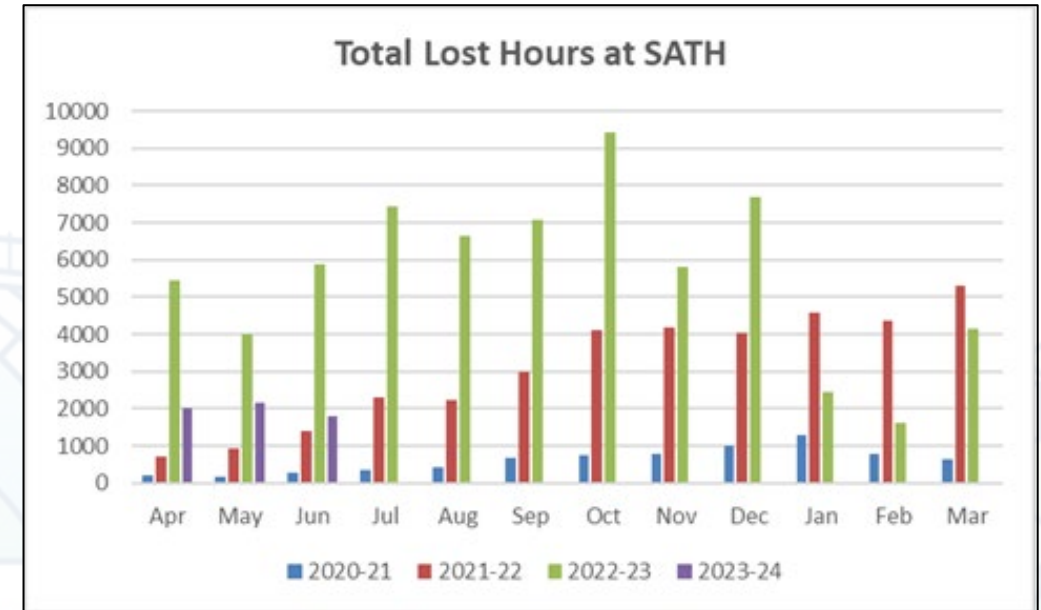
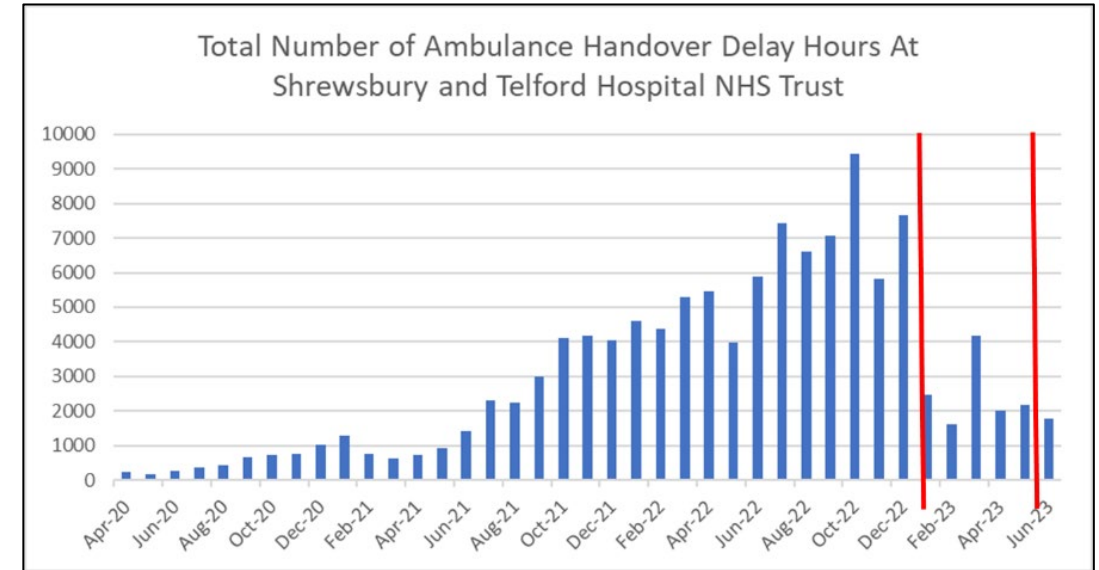
NHS 111 Online activity data

- Between February 2022 and November 2022, STW index far below England, compared to January 2022 baseline. E.g. June 2022, England saw traffic that was only 4% below their January 2022. For Shropshire, Telford and Wrekin, this was 19%.
- This pattern switches from December 2022, after which STW begin to consistently 'outperform' England for 111 online traffic, consistently higher for the last four months



Ambulance Handover delays

- The campaign launched at the same time we faced our worst ever months for 'lost hours'. From September–December 2022 we lost a total of 30,000 ambulance hours at our two hospitals.
- Following the launch of the campaign, from Jan – April 2023, we saw an immediate reduction in lost hours, dropping to 10,246 lost hours.



- The activity data tells us that during the campaign period:
 - Fewer people attended A&E, and more people attended MIUs compared to previous years
 - People were more likely to attend MIUs based on their own decision rather than an external referral, compared to historical trends. This implies improved decision-making and education on choice of where to seek urgent or emergency care.
 - There was a notable increase usage of the NHS 111 online service when compared to the preceding months and England average
 - There was a significant reduction in lost ambulance hours



Think which service 2023 Campaign Refresh



Think Which Service 2023: Local Health Professionals

Research showed our 2022 campaign delivered high awareness but there was a need to drive a deeper knowledge of the services. For 2023, we introduced a suite of engaging videos, delivered by healthcare professionals, to drive more understanding of which services to use.

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PHARMACY



GP



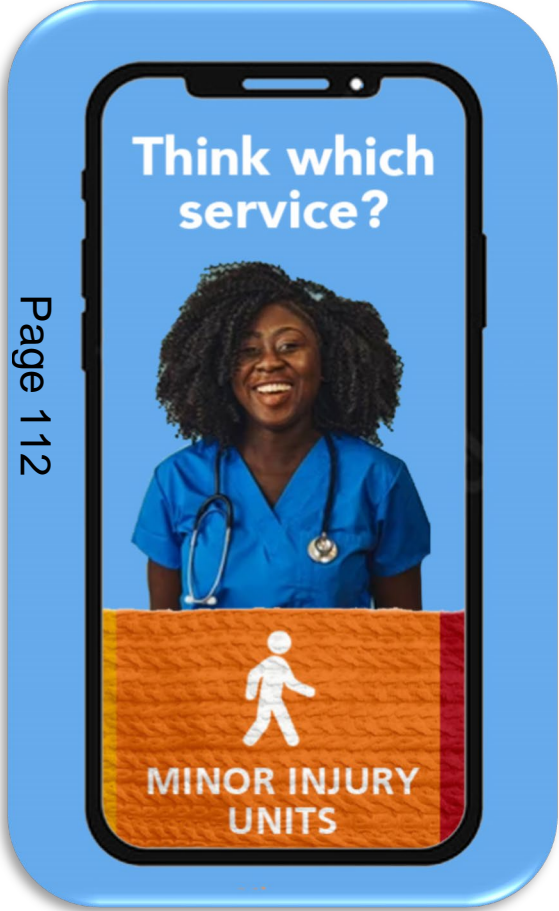
MINOR INJURY
UNITS



999
A&E

Digital Campaign Messaging

Videos produced involving seven local healthcare professionals



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SELF CARE/GP	MIU	PHARMACIST	NHS 111	A&E
<ul style="list-style-type: none">• What to have in your medicine cupboard and first aid kit• Tips for staying well• Children’s health	<ul style="list-style-type: none">• What they are• Why to use them• Benefits• Where they are	<ul style="list-style-type: none">• What to use them for• Why to use them• Benefits	<ul style="list-style-type: none">• What services it provides• When to use it• Benefits	<ul style="list-style-type: none">• When A&E should be used• Reassurance on strike days



Campaign refresh

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Digital display – motion video

Community Engagement – Ad Van



- An Ad van visited 6 high-footfall locations across the system displaying key campaign content to educate the public on how to use services appropriately,
- Locations were selected based on hospital activity data and local knowledge – informed by council public health teams
- There was also community outreach – Engagement teams handing out leaflets and having conversations with the public.



Pharmacy Bag

Key messages on over 60,000 pharmacy bags across STW in Oct and Feb (2x 4 weeks)

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Think self-help and self-care

Stock up on painkillers, cold & flu medicine, rehydration & anti-diarrhoea solutions, antihistamines & antiseptic cream.

SELF CARE

Contact NHS 111 online or by phone if you're worried about any symptoms

Thinkwhichservice.co.uk

Think which service?

Common ailments and illnesses

Need help fast and it's not an emergency?

Health advice and over the counter medicines

Symptoms that won't go away

Minor injuries

Life threatening emergencies

SELF CARE

111.NHS.UK

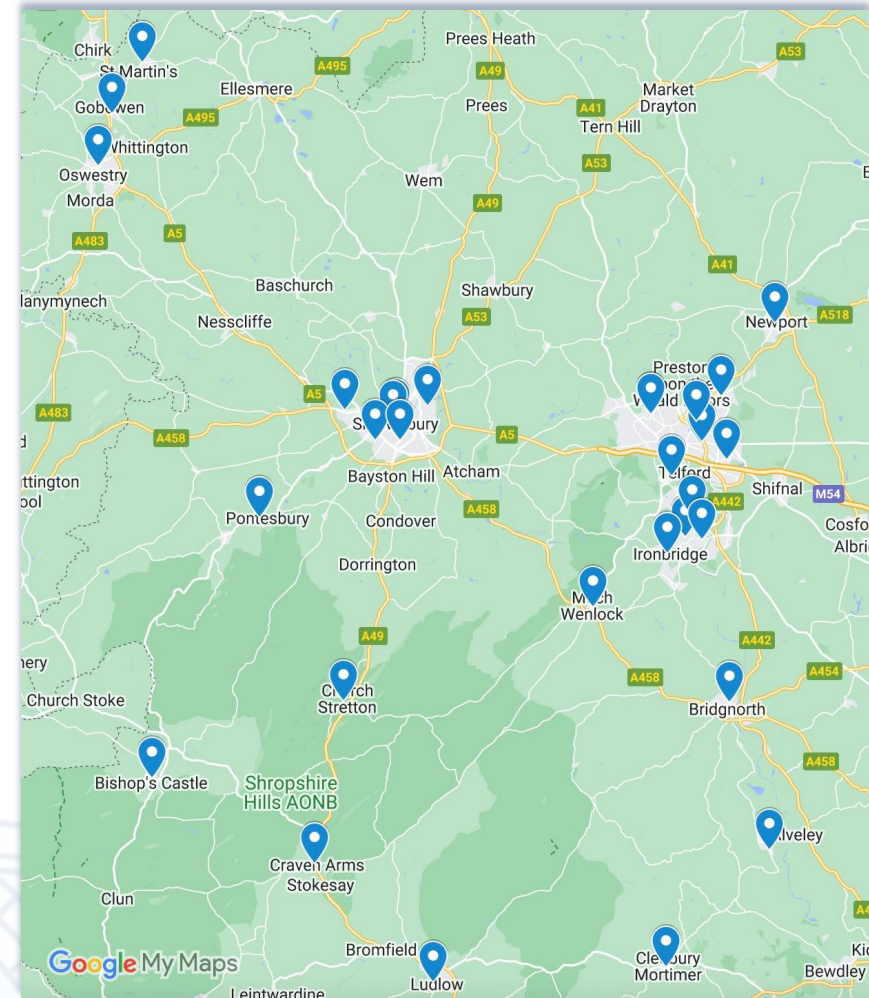
PHARMACIST

GP

MINOR INJURY UNITS

999 A&E

Thinkwhichservice.co.uk



Covering 32 Pharmacies across STW
Targeting an older population: 45+

In-Home advertising

- Static and TV creative to convey the messaging
- Across Sky & Virgin, CTV / C4 and ITVX VOD we could reach 95% of all households in STW
- We targeted specifically rural areas and high UEC usage postcode: SY8, SY7, SY9, DY14, WV16 and LD7
- Environmentally powerful. Speak to people in their own home
- High dwell time for the messages





Podcasts



Bus Adverts

Our local health and care professionals provide you with the right support and quickest medical help in Shropshire, Telford and Wrekin.

Find out which service you should use to get the right support and quickest medical help in Shropshire, Telford and Wrekin.

Think self-care for good mental and physical well-being

I'm a local GP, here are my top self-care tips:

- Stay active, eat well, and spend time outdoors
- Contact your local council if you are worried about money, struggling to pay bills or buy food
- Connect with others and check on older or unwell neighbours, friends and family
- Keep a stocked medicine cabinet
- Get COVID-19 and flu vaccinations if eligible

GP Telford and Wrekin

NHS 111 Call Handler

Think Pharmacist for the right advice and medication for your condition

I am a community pharmacist. We are highly qualified and knowledgeable experts.

All pharmacies in Shropshire, Telford and Wrekin have private consultation rooms and can provide treatment and some common conditions without seeing a GP. Speak to your pharmacist if you have:

- Sinusitis
- Sore throat
- Earache (children)
- Infected insect bites
- Impetigo
- Shingles
- Urinary tract infections (women)

Pharmacist Shrewsbury

Think NHS 111 online if you're not sure what to do

I am an NHS 111 call handler. Call NHS 111 or visit 111.nhs.uk for:

- Prompt guidance, keeping GP Practices and A&E free for those who need them most
- 24/7, 365 days a year, quick advice for non-life-threatening medical issues
- Emergency face-to-face appointments with a healthcare professional
- Assistance with repeat prescriptions or emergency supply
- Emergency dental support
- Emergency mental health support

Think Minor Injury Units (MIU) before A&E

I'm one of the Emergency Care Practitioners at a local MIU. We treat various minor injuries without the A&E wait times:

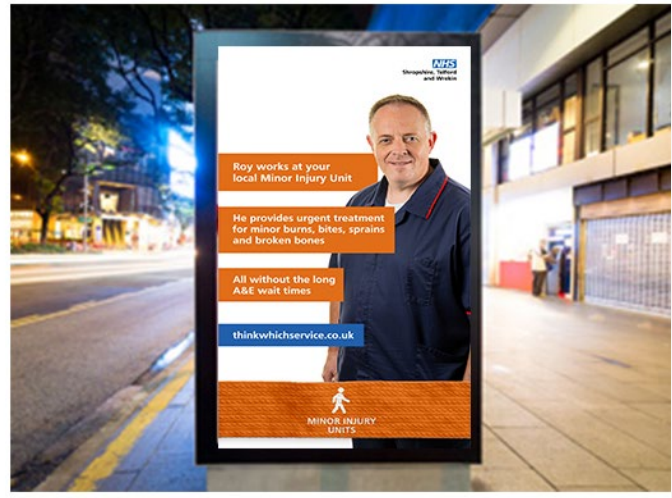
- Bites and cuts
- Foreign bodies in the eyes, nose and ears
- Fractures (5 years and above)
- Minor burns and head injuries (with no loss of consciousness)
- Soft tissue injuries and wound infections

Visit us and keep A&E free for life-threatening emergencies.

MIUs are in Bridgnorth, Ludlow, Whitchurch, and Oswestry Health Centre.

Emergency Care Practitioner Bridgnorth MIU

Door drop to every home in Telford and Wrekin



Digital Displays



Thunderclap

The 2023 winter campaign started with a 'Thunderclap', with all system partners posting exactly the same content at exactly the same times. A week prior to the launch, a thunderclap social media toolkit was provided to all partners which contained social media copy, images, hashtags and a schedule.

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Wednesday, 18 October 2023 - Launch Day

Time	Image	X (Twitter) copy	Facebook / LinkedIn copy
9am	<i>Think Which Service Launch - Nick White</i> 	Today, we launch our #winter campaign #ThinkWhichService. To find out how you can help, WATCH Dr Nick White our Chief Medical Officer discuss how to look after yourself and others, and access the right services, for the right help fast. www.thinkwhichservice.co.uk	Today, we launch our #winter campaign #ThinkWhichService, urging residents to use services wisely as we head into winter. To find out how you can help, WATCH Dr Nick White our Chief Medical Officer discuss how to look after yourself and others, and access the right services, for the right help fast. www.thinkwhichservice.co.uk
10am	<i>Motion video: Scarf</i> 	Our new #ThinkWhichService campaign launched today. Remember to look after yourself and others this #winter. #ThinkWhichService is right for your needs. To find out more and for self-care tips visit www.thinkwhichservice.co.uk	Our new #ThinkWhichService campaign launched today. Remember to look after yourself and others this winter. #ThinkWhichService is right for your needs. To find out more and for self-care tips visit www.thinkwhichservice.co.uk
11.30am	<i>Scarf Graphic</i> 	Shropshire, Telford and Wrekin #NHS and local #councils join forces to launch new awareness campaign ahead of winter, to help residents know how to find support and which service to use at the right time for help & advice www.thinkwhichservice.co.uk #ThinkWhichService	Shropshire, Telford and Wrekin #NHS and local #councils join forces to launch new awareness campaign ahead of winter. The campaign aims to help ensure residents know how to find support and which service to use at the right time for help and advice. For more information visit www.thinkwhichservice.co.uk #ThinkWhichService



**Integrated
Care System**
Shropshire, Telford and Wrekin



**Shropshire, Telford
and Wrekin**

Thank you

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