



“Healthy Voices”

#SpeakUp

July 2019



Introduction

At Family Voice Sheffield we support mums from schools in the Nether Edge, Lowfield and Sharrow areas. We run classes that build mums' trust and confidence. We hold community events at 'Common Ground' in Nether Edge and give one to one support for families too.

Often the women we work with do not know how to express negative feedback. They tend to say that everything is OK - even when it isn't. There are many barriers that can get in the way of being able to express problems that have been experienced.

All the women involved in this project have English as a Second Language. This is a big barrier; being able to give negative feedback but not knowing the 'polite' words to do it or the culturally appropriate way of doing so. This can prevent people from saying anything at all.

Most of the women originate from countries where they would have a much lower expectation from their health service than we have in the UK. So although they may experience problems - they wouldn't necessarily see them as problematic.

The racism some women experience is part of everyday life, and most incidents do not get reported even in a consultation like this). Victims may often prefer to ignore and forget it. This also prevents many women from building up trust with someone who is not from their cultural community.

We build up relationships with women so that we understand each other well, are comfortable in each other's company and gradually we build up a valuable trust. It is in this trusting environment that most of this project took place - in our "English Conversation Class", which is more like a Mums Coffee morning.

Aim

The aim of this project was to give a voice to women whose opinions are not often heard.

At Family Voice Sheffield we work with isolated women to help them understand that they can take control over the experiences they have, both in and outside of the family and household. The project took place in July 2019.

Where did we hold the consultations and how did we do it?

We spoke to a total of 44 women through 5 sessions in 2 conversation classes, at an exercise and health class, and at our summer party.

a) 4 sessions in the Conversation Class in Nether Edge Primary School.

These sessions were an introduction to the women about why their opinions are important. We discussed with the group why some women don't have their voices heard. They talked about how difficult it can be to give negative feedback.

We taught some vocabulary about appointments, health centres, what happens once they are there and the names of different roles of people who work there.

We discussed the questions together as a group before working one to one with a volunteer / staff member to fill them in.

b) One session at the English Conversation Class in the Sharrow Old Junior School.

This session was a shorter version of what we did with the above group.

c) With women who attend our exercise and health classes.

Some older women with Urdu/Punjabi as their first language filled in their forms one to one with someone in Family Voice, who has the same first language, and who has been leading their weekly healthy exercise classes. Most do not attend any other activities/groups all week - and the fact that they came to our summer party shows the trust we have built up with them.

d) those who attended our summer party.

Before our summer party we worked with a group of volunteers, with relevant language skills, on how to go through the questionnaires with women one to one, in a conversational style, in order to get the most accurate responses.

Staff and volunteers managed to reach many women who were new to this project in this way.

Who did we speak to?

We spoke to a total of 44 women;

- a) Conversation Class in Nether Edge School: we worked with 19 different women. All were mothers (except one lady who has not long been in the UK since having come over from Pakistan to get married in Sheffield.) These women were from Pakistani, Bengali, Hungarian, Spanish, Iraqi, Iranian & Sudanese backgrounds. These are women who we have mostly been working with for years who trust us, are regular attenders and are open to learning in such a safe environment.
- b) Conversation Class at the Sharrow Old Junior School: we spoke to 4 women - Bulgarian, Sudanese, Congolese and Pakistani.

- c) Exercise and health classes at Common Ground, Nether Edge: we spoke one to one to 10 ladies.
- d) Summer Party at Common Ground, Nether Edge: 11 ladies sat down with our community volunteers to discuss the questions.

19 of the women from groups c) and d) were of Pakistani heritage, 1 was Indian and 1 Filipino.

The age range of the women we spoke to were as follows:

- 7x in the 30s.
- 3x in their 40s.
- 4x in their 50's.
- 7x in their 60's.

Key findings

We asked women questions about 3 areas - GP, dentist and pharmacy.

A) GP:

- 45% of women had someone else to make their GP appointment for them
- 39% said it wasn't easy to get an appointment at the GP
- 45% said they have a receptionist who understands their first language
- 57% said the receptionists were friendly or very friendly
- 58% were not happy with how long they have to wait
- 74% were comfortable or very comfortable while waiting
- 42% women had used an interpreter or language line at the GP
- 26% women said they didn't understand what the GP was saying
- 16% said the GP had never explained anything about how lifestyle can affect their health

We feel the key issues are:

- Many women do not find it easy to get an appointment.
- Many use GP receptionists who speak their first language and this is much appreciated.
- The waiting time isn't acceptable to most of the women.
- Most women felt safe in the waiting room although one woman told a story of a patient being racist once, this now makes her feel scared whilst waiting.
- Most women who need it are accessing an interpreter or language line at some point. However, although interpreters are being used, they are clearly not always effective as many patients do not understand the advice from their GP.
- One woman said she couldn't understand the tannoy call for patients and it would be much easier if it was a real person.

- Despite our efforts to educate mums about lifestyle problems in the community, 16% say their GP has never said anything to them about food or exercise.

B) Dentist:

- 57% women had someone else to make their dentist appointments
- 86% said they were happy with how quickly the dentist answered
- 86% said it was easy to get an appointment
- 15% had requested a female dentist
- 60% hadn't met a receptionist who could speak their own language
- 37% said they had met a receptionist who could speak their own language
- 83% said their dentist receptionists were friendly or very friendly.
- 10% were unhappy about the waiting times at the dentist
- 1 woman was very uncomfortable in the waiting room - with 2 more who were middling. 88% were comfortable or very comfortable
- 10% had used language line or an interpreter at the dentist.
- 16% didn't really understand what the dentist was doing.
- 50% of the women had asked the dentist to stop when it hurt, 50% hadn't.
- 93% said their dentist explained to them how to look after their teeth.
- 36% had had to go back because the dental work hadn't worked or hadn't been done properly.

We feel the key issues are:

- Despite 57% needing to get someone to make their appointment for them only 10% had used language line or an interpreter.
- Generally women are much more satisfied by the customer service they receive at the dentist than with the GP.
- A large number of women - 96% - said they'd received advice on how to look after their teeth - this is very reassuring.
- It is disturbing to see that 36% felt they'd have to go back to their dentist because the work hadn't been carried out properly. We are aware that there are many different standards of dentists in the area and different volumes of complaints. We are concerned that the feedback on these services is not being taken seriously.

C) Pharmacy:

- 88% didn't know about the minor ailment service.
- 56% had never asked their pharmacist to look at a medical problem.
- 81% had never used the private consultation room in the pharmacy.
- 69% of respondents get repeat prescriptions for themselves or someone in the family.

- None of the respondents who got repeat prescriptions ordered these on-line. 58% did it by phone. 42% went into the GP surgery. None of the respondents who got repeat prescriptions found this hard.
- 100% respondents found the receptionist patient and friendly.

We feel the key issues are:

- There are many barriers to accessing the Minor Ailment Service, of which filling in the form is a major one. Although many families who already face barriers to improving their health would benefit from this service, there is a lack of awareness of its availability.
- Over half the families had never made full use of the support available at the pharmacy. We know that many families are quick to make a GP appointment for minor illnesses, if they can be encouraged to use their pharmacy instead it could give them the reassurance they need more easily and reduce waiting times at their GP.
- It is very telling that none of the respondents who got repeat prescriptions booked them online. As there is a trend for moving services online, there is clearly a lot of work to be done before this is a feasible transition in this scenario.
- All respondents found their dentist receptionists patient and friendly. This is an incredible achievement and something the area can be very proud of.

Recommendations

We recommend that more work is done in communities to build trust with those who can support people to have their voices heard; the stronger the trust the more honest the responses. We have put many hours, paid and unpaid, into this project but it still feels like we could have done more to get more accurate and detailed results. It takes time and care to do this with integrity.

GP:

- 1) Surgeries should continue to prioritise employing staff who speak community languages. It makes a huge, positive difference to those who have English as a Second Language and increases confidence.
- 2) More work needs to be done to make Language Line and Interpreters more effective. Many patients still do not understand the information being given to them. This could also involve more training for GP's on how to communicate with someone who might be isolated and have English as a Second Language.
- 3) More GP's need to talk to women about their lifestyle and how it might be affecting their health. Women from traditional backgrounds give GP's great status and their advice has a greater impact than that from other sources.

Dentist:

- 4) More access to community languages is needed in dentists through employing staff who speak them and wider use of effective interpreters.
- 5) There needs to be more visible regulation of dentists in areas where there are vulnerable communities. This will ensure that dental work is of an acceptable standard and enable families to be aware of practices that do not perform well.

Pharmacy:

- 6) Keep GP and 'over the phone' repeat prescriptions - be aware that many families still do not use the internet for such things.
- 7) Families need to know more about the services pharmacists can provide. This will reduce the burden on GPs and benefit the families themselves.
- 8) Families need to know more about the Minor Ailment Scheme. It is not well publicised and is hard to access. This is unfair for those who are already disadvantaged and for whom it could help the most.



About Healthwatch Sheffield

Healthwatch Sheffield is the city's local consumer watchdog for health and social care services. The organisation exists to help adults, children and young people to influence and improve the way health and social care services are designed and run in the city. Healthwatch Sheffield is completely independent from the NHS and Sheffield City Council.

About the #SpeakUp grants

In 2018/19 Healthwatch Sheffield ran a small grants programme called 'Speak Up'. Sheffield-based voluntary and community sector organisations were invited to apply for a small grant of up to £1,000 to run consultation and engagement activities. Organisations were asked to relate their projects to one of the aims and priorities in the 2018 - 2020 Healthwatch Sheffield ['Together for Good' Strategy](#).

The programme was designed to enable local organisations and community groups to gather views and experiences of health and social care services from Sheffield residents, especially from those who do not traditionally have a voice. The aim is to ensure that health and social care decision makers in the city hear from a diverse range of people about their experiences of services.



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Health Watch Speak Up Main Questionnaire

1. GP / doctor

Who calls the GP to make an appointment? _____

Is it easy to make an appointment with GP?



Does the receptionist ever speak your language?



Is the receptionist friendly and patient?



How long do you have to wait in the reception area?



How comfortable/safe do you feel waiting in the reception area?



Have you ever used language line or an interpreter at the GP? Yes / No



Do you understand what the GP is saying?



Does the GP explain how different food and exercise (lifestyle) could help?



2. Dentist

Who calls the dentist to make an appointment? _____

Is it easy to make an appointment with your dentist?



Does the receptionist ever speak your language?



Is the receptionist friendly and patient or impatient and stressed?



How long do you have to wait



in the reception area?



How comfortable/safe do you feel waiting in the reception area? Ever been any probs while waiting?



Have you ever used language line or an interpreter at the dentist? Yes/No

Do you understand what dental work the dentist is doing or does s/he just do it?



Have you ever asked the dentist to stop because it hurts? Yes / No

Does the dentist explain how to look after your teeth (when, how, floss etc) or does he just say bye!



Have you had to go back to the dentist because the work has broken or needed fixing again because it was done badly? Yes / No

3. Pharmacy



1. Have you signed up for the “minor ailment scheme” for free medicines and consultations? **Yes / No**
2. Have you ever asked your pharmacist to look at anyone’s problem / illness? **Yes / No**
3. Have you ever used the private patient room with your pharmacist?

Yes / No



4. Does anyone in your family have a repeat prescription? **Yes / No**
5. How do you order your repeat prescription? **Online / by phone / at GP**

6. Is it easy to order a repeat prescription?



7. Is your pharmacy helpful and patient?



No name needed.

Your age: Your ethnicity:

Your first language: