



North East London

healthwatch
Waltham Forest

What does good care look like to people in Waltham Forest?

DRAFT Community Conversation Findings
November 2023



Waltham Forest Community Conversation

We asked local people open-ended questions about what **good health and care means to them**. At community events and in focus groups we helped local people to draw out what their own vision of good care would look like.

We took what they told us and started to identify themes, these themes eventually developed into **four pillars of good care**, or four aspects of what makes the difference between good care and inadequate care. We also looked at **the wider issues that impact good care at a society level**- the wider determinants



The resulting framework, informed by what local people said, can be used by stakeholders to develop their own success measures and evaluation tools.

Introduction to the framework

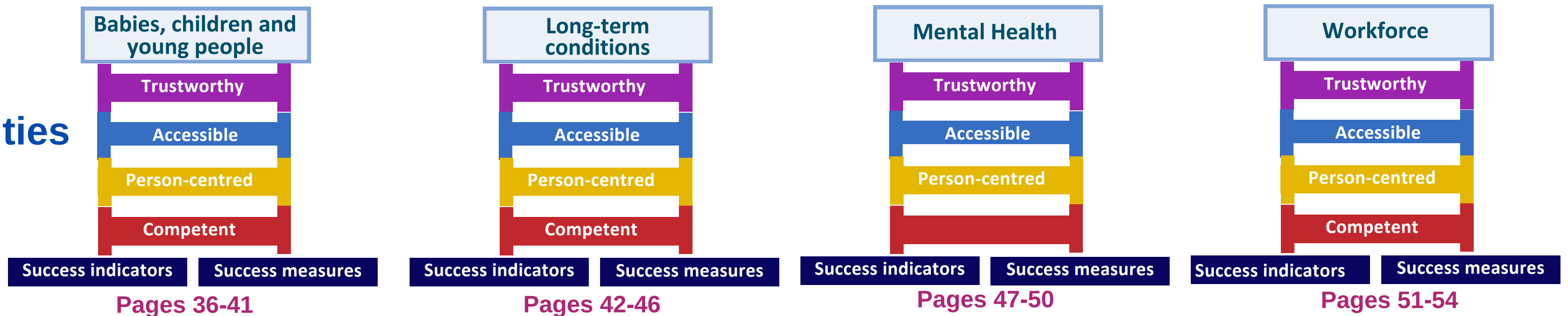
What does good care look like?
Pages 4-7



What people told us

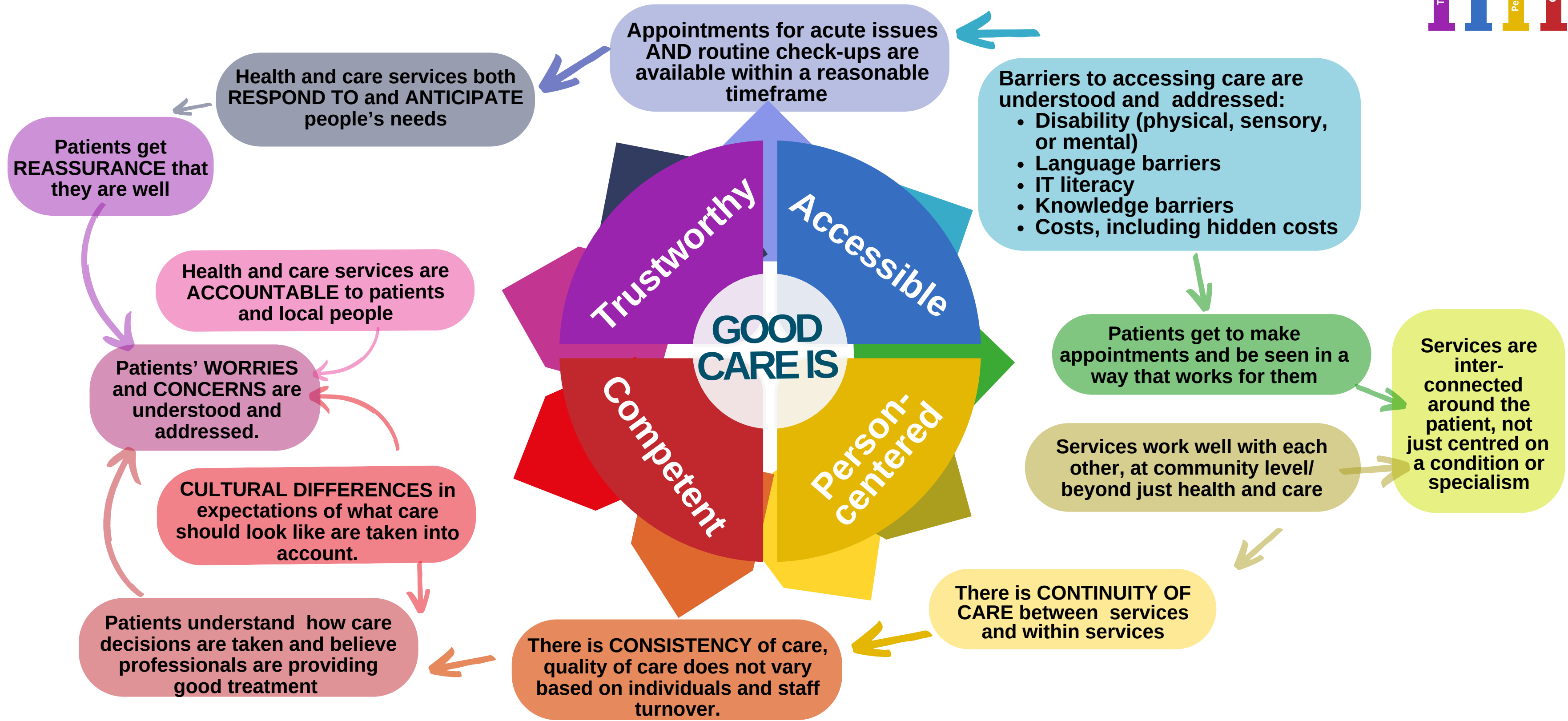


Priorities



We hope to make this report and the dataset as adaptable as possible; different sections of it can be used either separately, in conjunction with each other or with additional data. The aim is to use it as a framework from which people led success indicators and measures can be developed. There is still a lot of work to do.

What does good care look like?



What does good care look like?



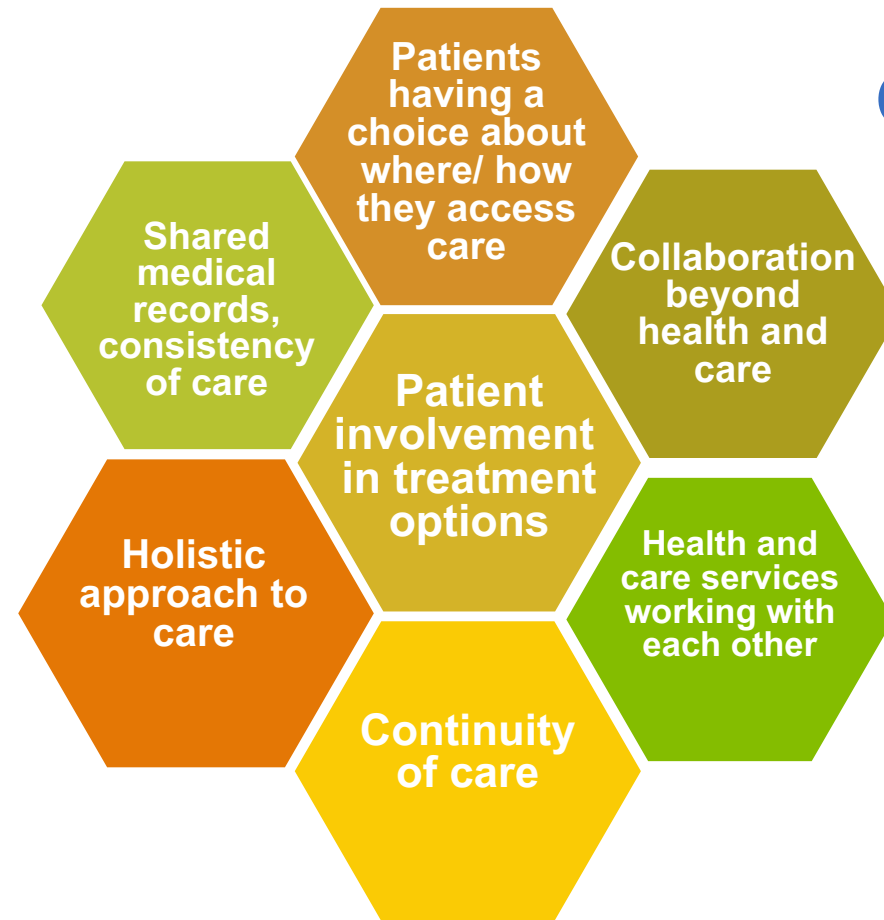
Good care is: trustworthy



Good care is: accessible



Good care is: person-centred

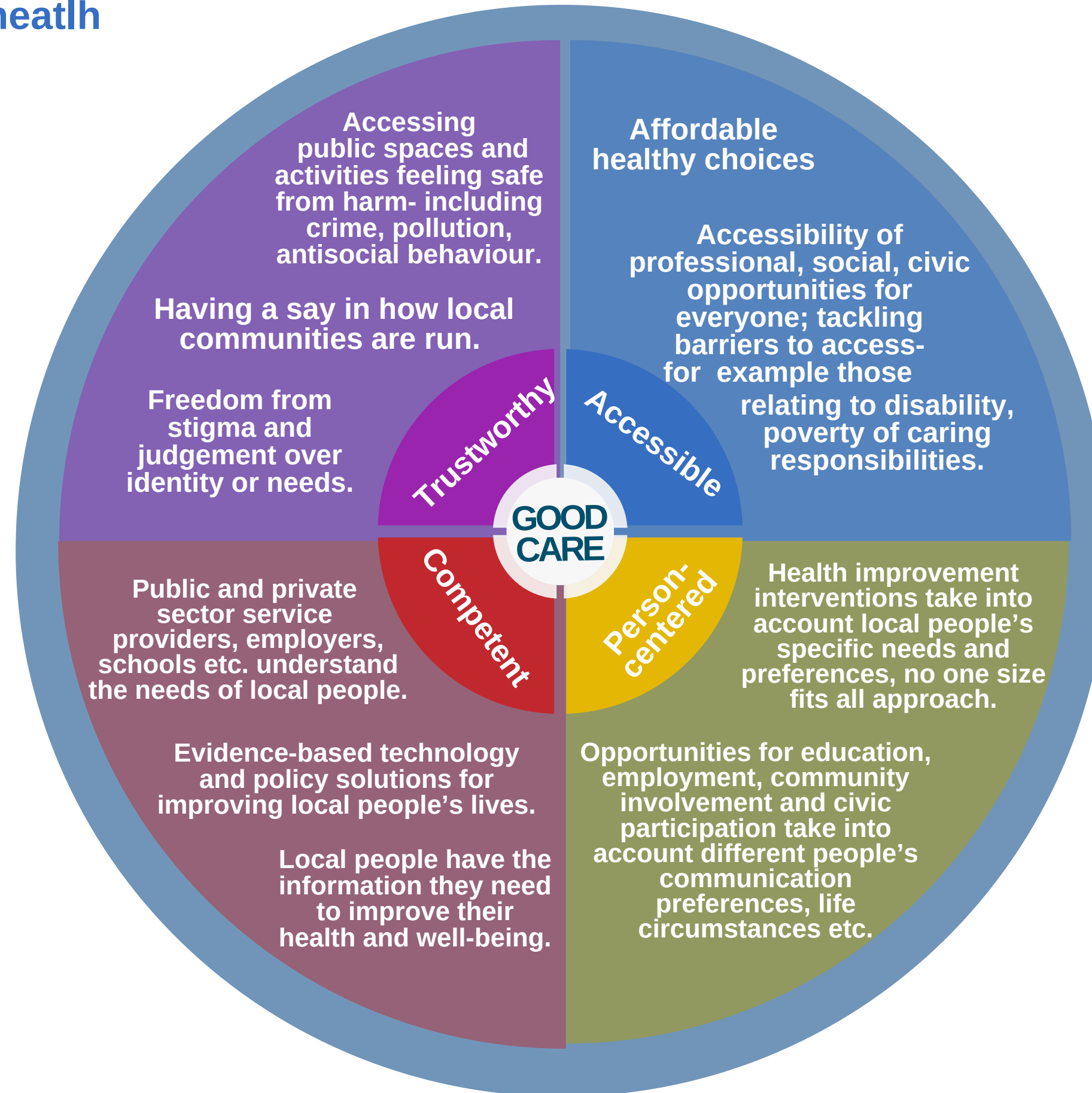


Good care is: competent

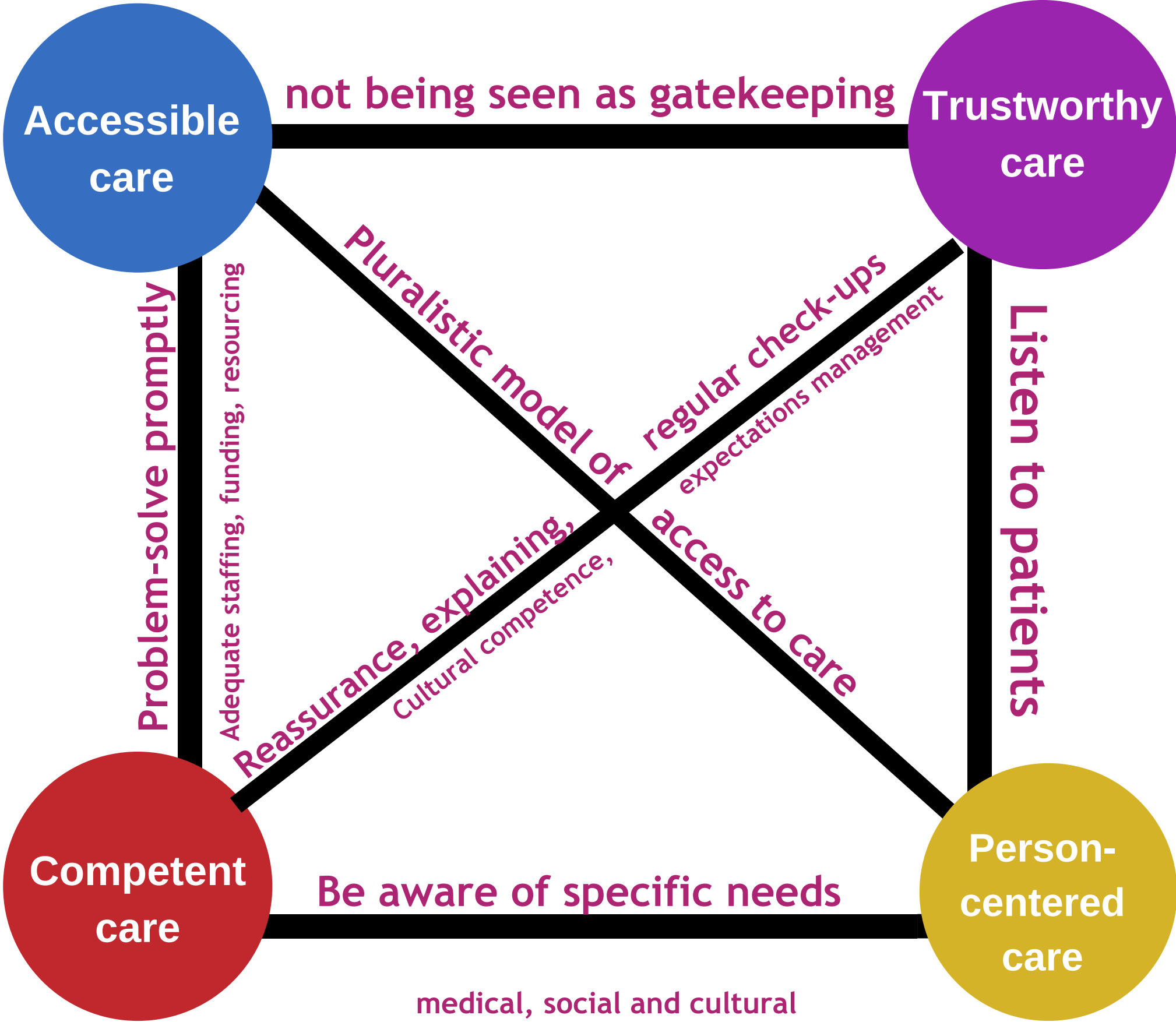


What does enabling everyone to thrive look like?

The wider determinants of health



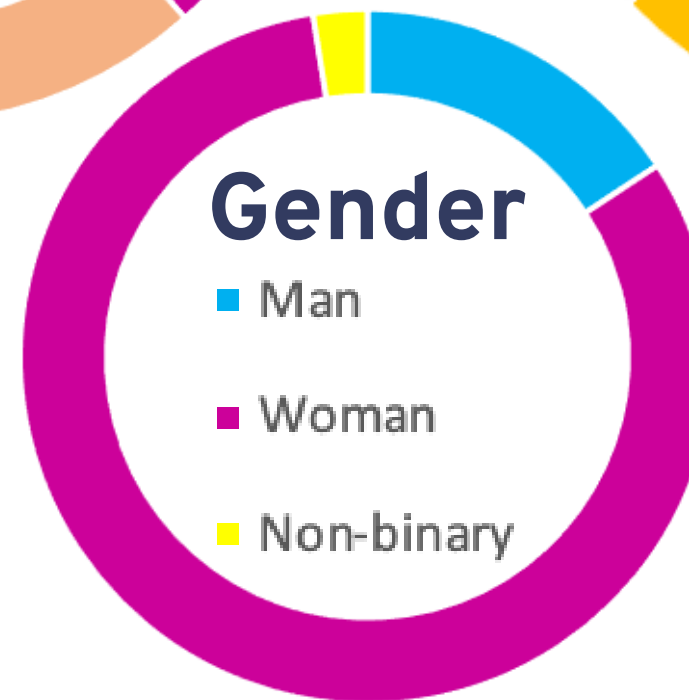
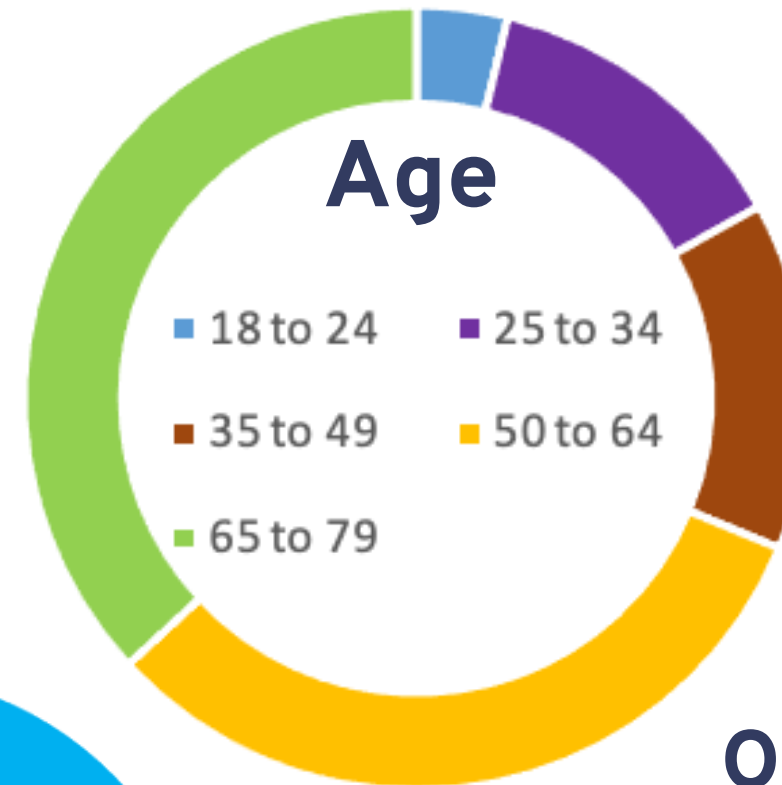
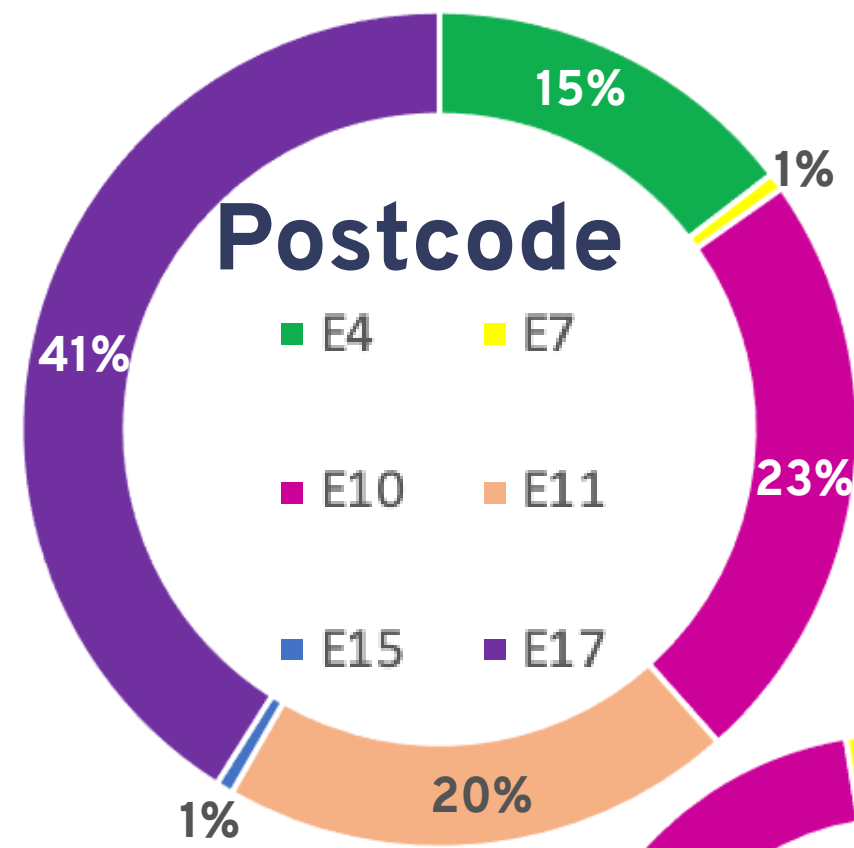
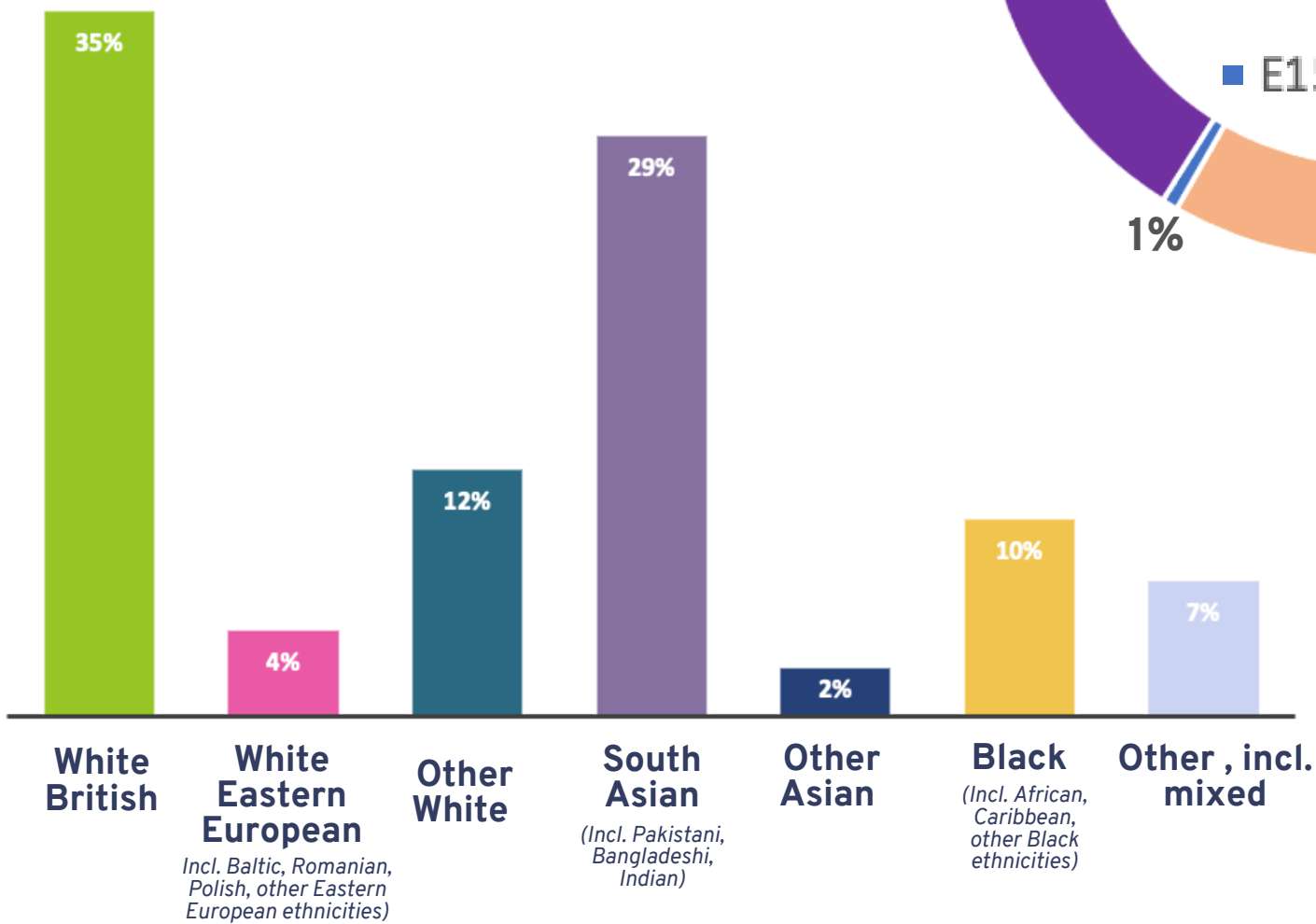
The four pillars interconnect and impact each other.



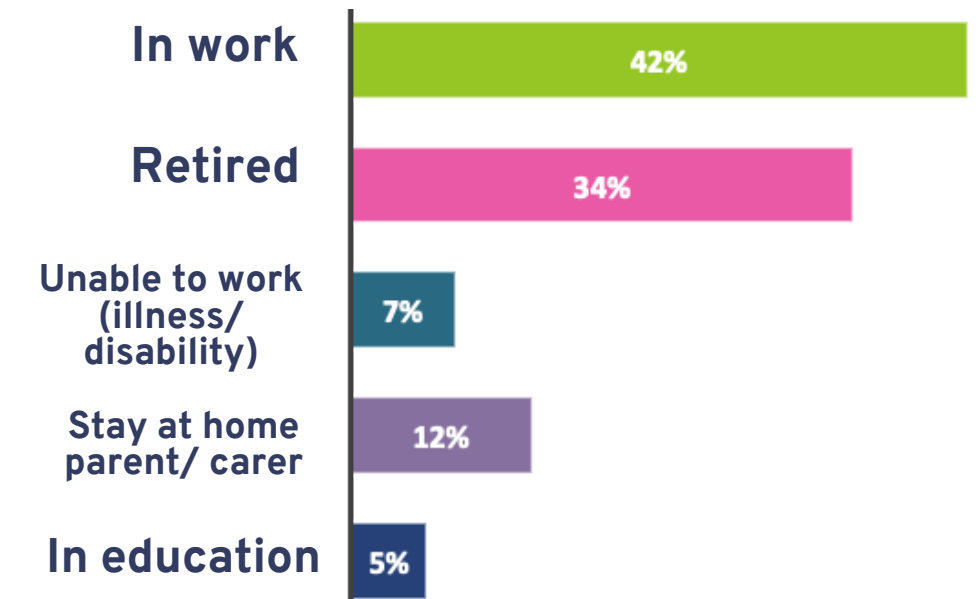
Demographics

136 respondents

Ethnicity



Occupational status



98%

were registered with a GP

91%

had used health or care services in the last 12 months

16%

were parents of a child/ children aged under 18

13%

were carers for an adult loved one or family member

32%

were digitally excluded

16%

were disabled

7%

were neuro-divergent

63%

had a long-term condition

9%

were LGBT

37%

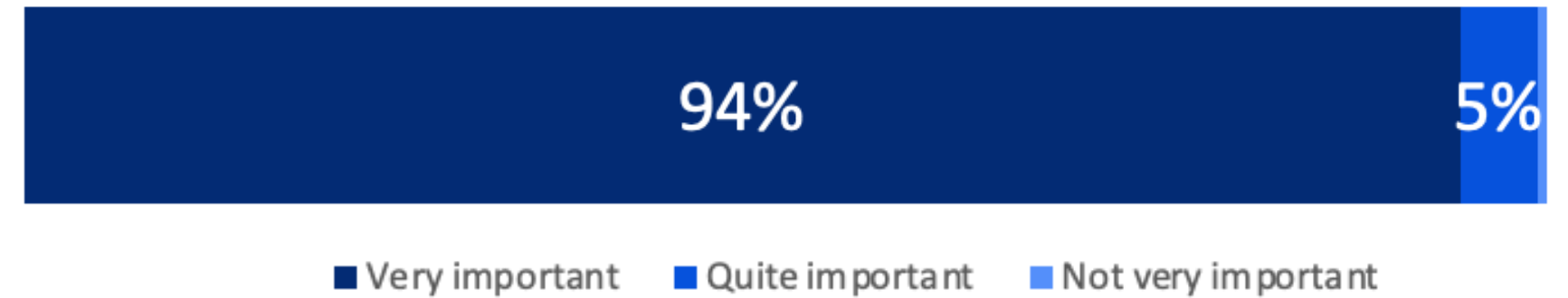
were struggling financially or just getting by

Accessible

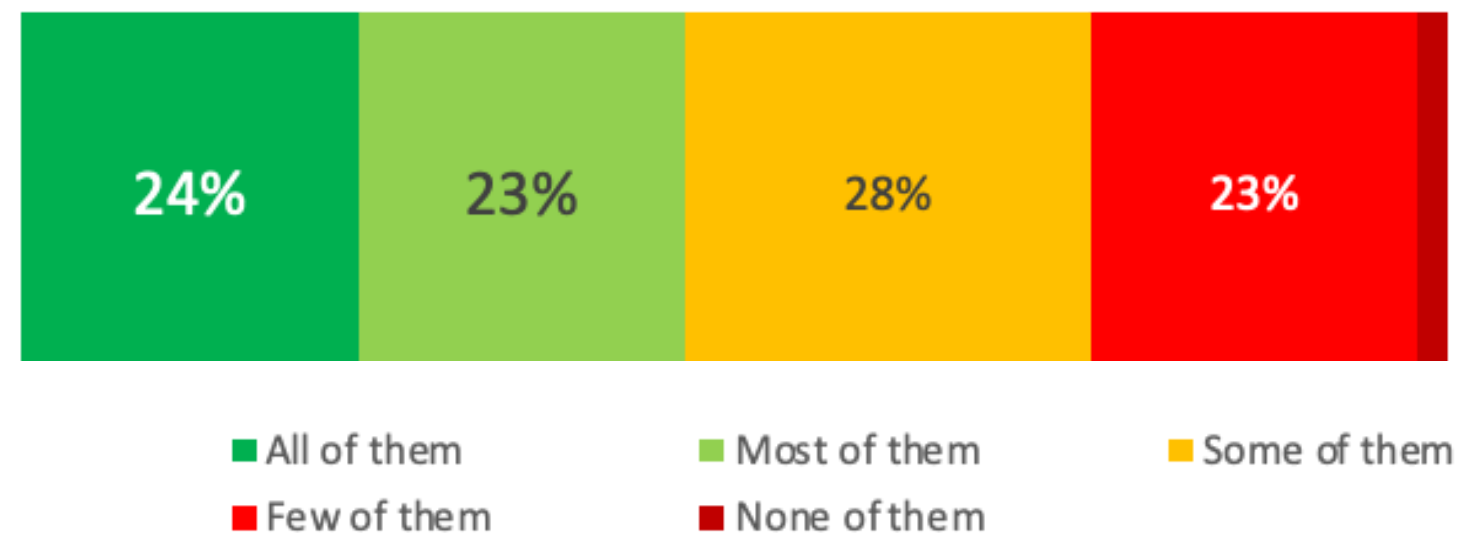


117 mentions from 81 respondents

How important is it for you:
Getting the care you need when you need it?



Professionals looking after me: are available to provide the care I need when I need it



Compared with North East London total, Waltham Forest respondents were **about as likely** to find they can access the care they need, when they need it.

What would indicate **accessible** care?

Patients can reliably access both routine and urgent care within a reasonable time frame, commensurate with their clinical urgency.

There are multiple equally reliable ways of booking appointments, taking into account both the needs of those who are most comfortable using online services and of those who are digitally excluded.

Services are available locally or within reasonably commuting distance; the needs of patients who don't drive are taken into account; and at different times, to meet the needs of patients who work full-time, as well as those who work irregular shifts/ non-standard hours and those with caring responsibilities.

All health and care services that patients need are free or affordable; no one has to go without necessary care because of the cost. Hidden costs of care are taken into account and minimised (for example: the cost of transport to healthcare facilities or of accessibility equipment).

Services understand and accommodate the needs of disabled patients; including awareness of mental health-related disability, and of complex needs arising from multiple forms of disability; as well as understanding and taking steps to mitigate any other forms of barriers to accessing care (language barrier, digital exclusion, general literacy, knowledge of the system, cultural issues, domestic violence).

Making healthy lifestyle choices is realistic for all; for example, people on low incomes and those who cannot cook for themselves still can have a healthy diet; exercise classes are available for those with limited mobility who can only handle gentle physical activity etc.

“

Better access to GP appointments, nothing more stressful than being on re-dial just to get into a queue. Plus on line appointments get taken so quickly.

What would NOT happen?

Patients going to A&E for issues that could have been dealt with by a GP or walk-in centre.

Over-stretched telephone lines, associated with a one size fits all booking system.

Patients paying for private healthcare they struggle to afford, because NHS care is too difficult to access.

Patients going without the care they need (dental treatments, domiciliary care, etc.) because they cannot afford it, or because they struggle with the process of accessing it.

People feeling that their personal circumstances (income, daily schedule, working conditions, physical limitations) force them to make unhealthy choices instead of healthier ones (for example making unhealthy diet choices because they can't afford healthier ones).

Competent

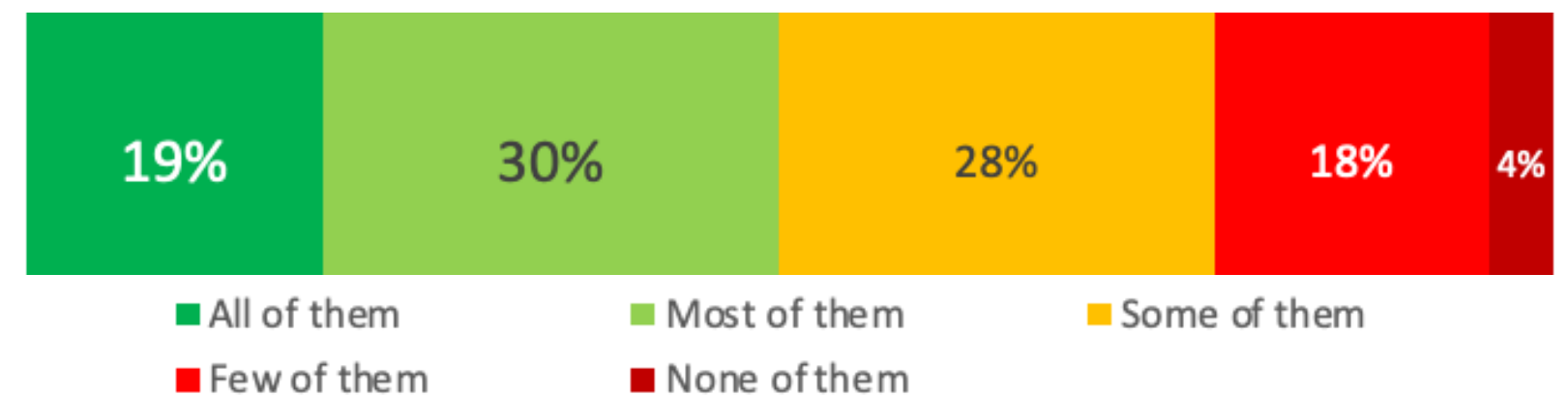


27 mentions from 23 respondents

How important is it for you:
Being cared for by people who understand my specific needs



Professionals looking after me:
Understand my specific needs



Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find they are looked after by professionals who understand their specific needs.

What would indicate **competent** care?

Competent

Professionals providing health and care services have up-to-date, in-depth knowledge of the conditions they are treating.

Professionals providing health and care services have a good working knowledge of patients' conditions, even outside their area of specialty, to the extent they impact patients' access to care, care needs and general wellbeing.

Professionals providing health and care services have a good working knowledge of health inequalities, social inequalities and cultural issues that may influence patients' access to care.

Patients are diagnosed accurately and within a reasonable timeframe; necessary investigations are available to ensure the accuracy of the diagnosis process.

Patients receiving treatment informed by the NICE guidelines, and by the latest evidence-based developments in medical science.

Local people having a good level of knowledge about keeping themselves healthy and well.

Employers, schools, public services and local businesses knowing how to ensure they provide a healthy environment.

You need expert information to be understood. You need to know what you're talking about. It's knowing where you are in the system, how long it will take and what's appropriate to do while you wait. Provide services according to NICE guidance. It seems they can't do that at the moment because of money, staff or lack of knowledge.

What would **NOT** happen?

Excessively long waiting times for diagnosis/ investigations.

Admin issues affecting the diagnosis process, e.g.: lost test results.

Misdiagnosis as a result of superficial consultations/ poor knowledge.

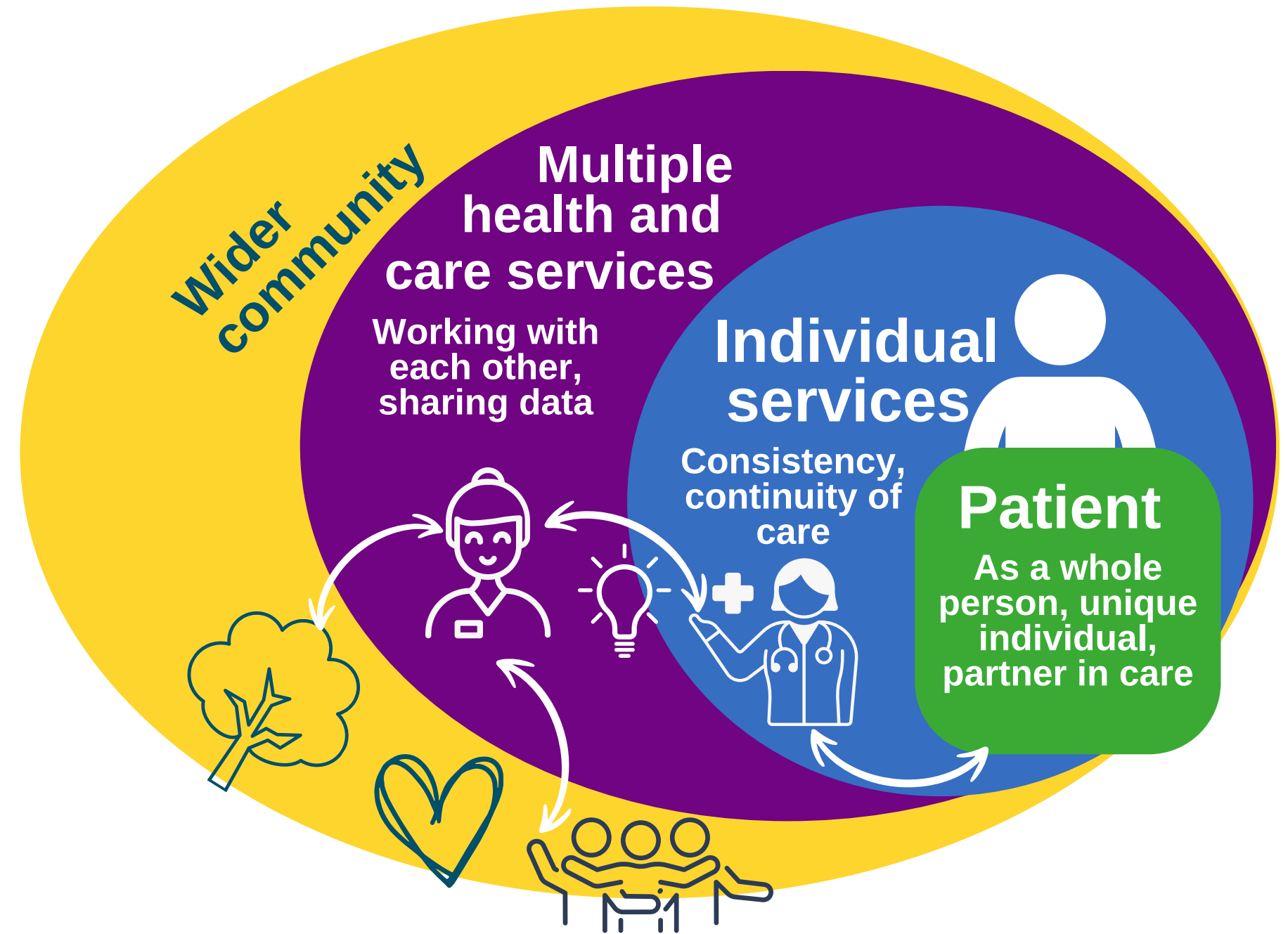
Lack of support with symptoms during an ongoing/ potentially long diagnosis process.

Clinical decisions being taken based on factors such as budget constraints or professionals' own cultural biases, rather than clinical need and scientific evidence.

Ineffective public health/ prevention interventions at a wider social level.

Local people making decisions about their own health based on incorrect information or pseudoscience.

Person-centred



42 mentions from 35 respondents

How important is it for you:

Person-centred

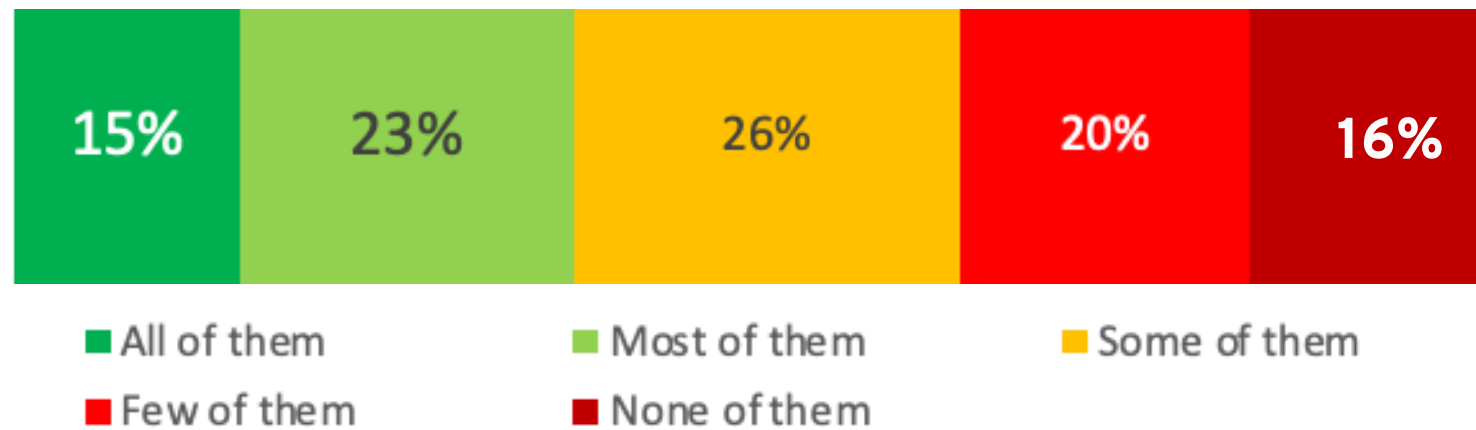
Knowing that different services supporting you work well together



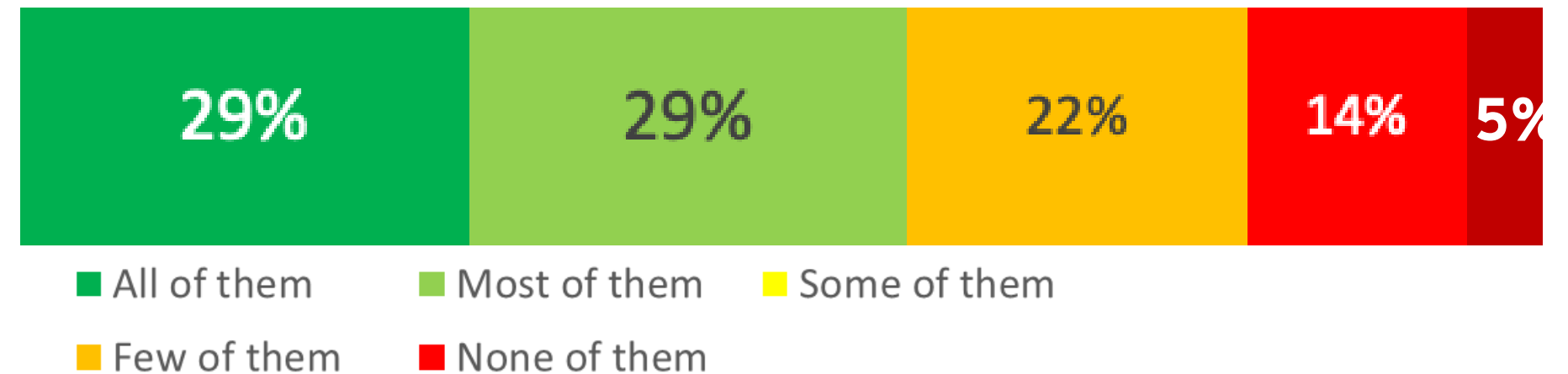
Being involved in decisions about your own care



Professionals looking after me: Work well together



Professionals looking after me: Involve me in decisions about my own care

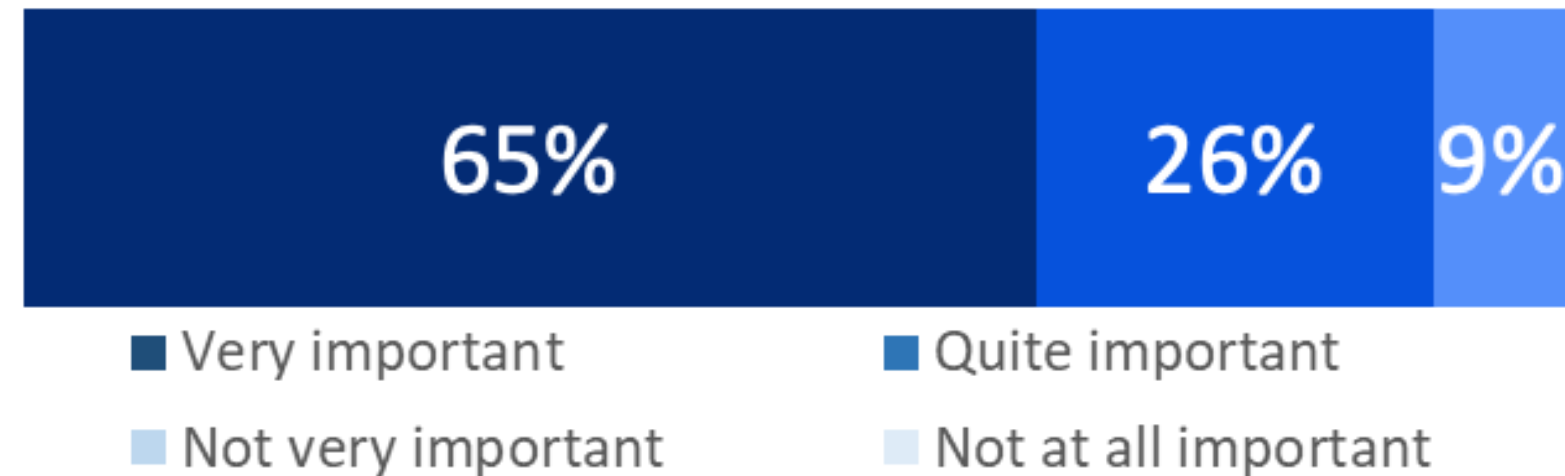


Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find that professionals looking after them work well together.

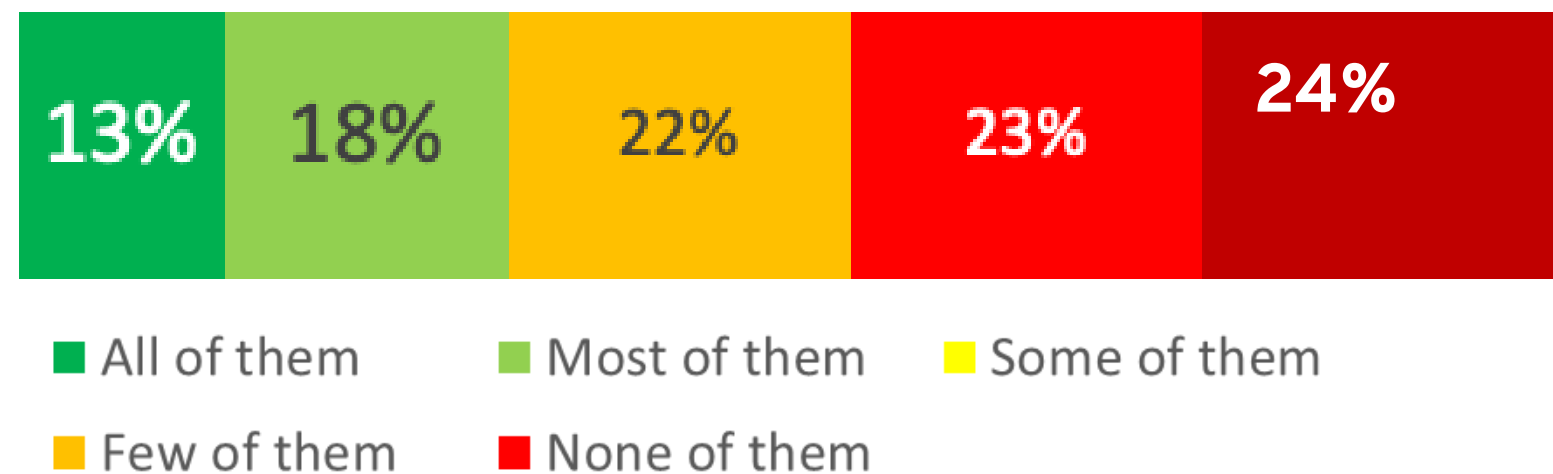
Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find that professionals looking after them involve them in decisions about their own care.

How important is it for you:

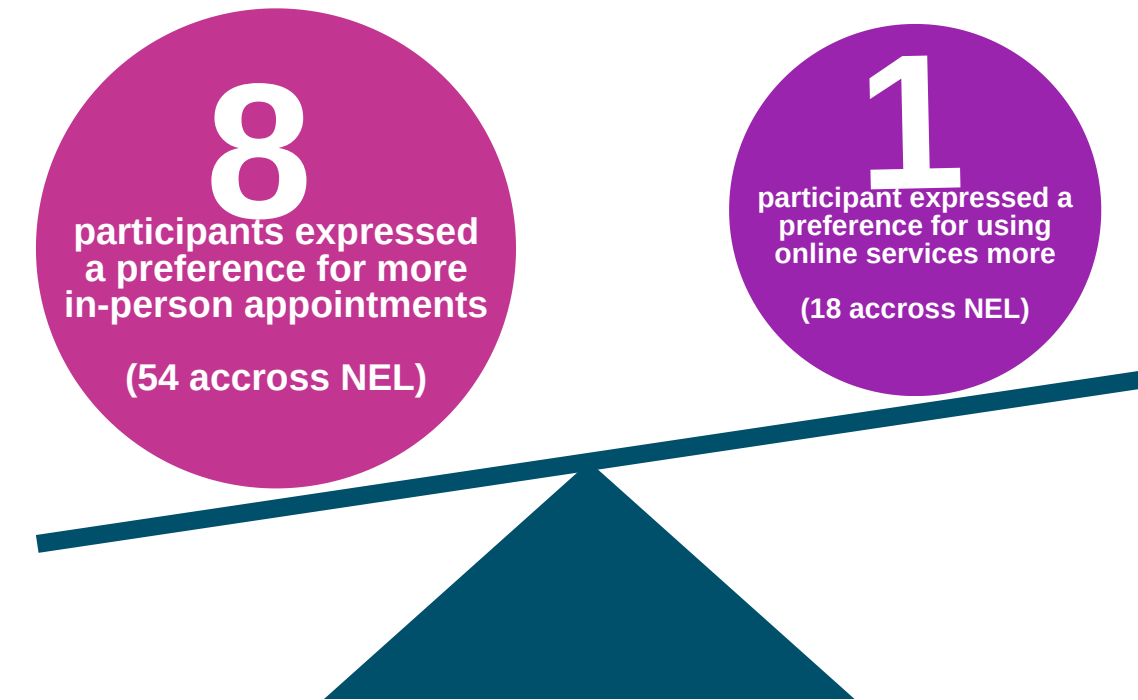
Not having to tell your story or explain the same issue lots of times to lots of different people.



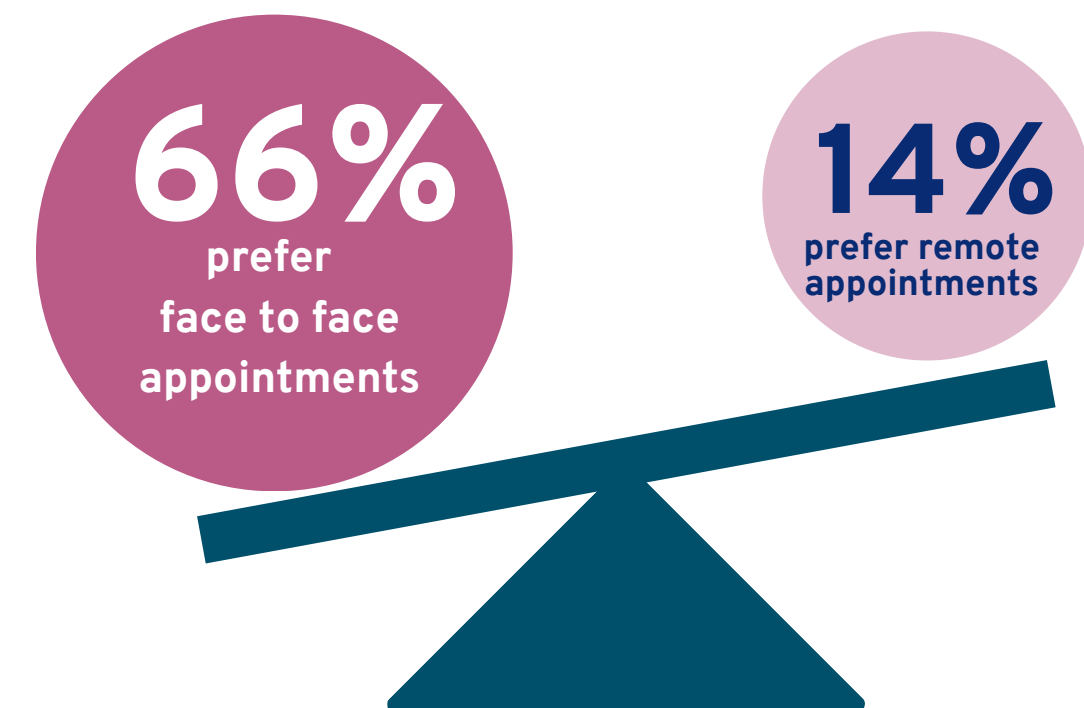
Professionals looking after me communicate with each other, so that I don't have to repeat myself



Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find that they can avoid repeating themselves.



This is consistent with previous findings from the GP Extended Hours Survey on Waltham Forest residents



We have previously analysed data on where and how patients want to access GP appointments. Findings are consistent with the findings of this survey.

Patient Profiles

Prefers to be seen in person

In-person local

- Needs in-person appointment within their local area
- Older people, digitally excluded
- South Asian
- Some disabled people, particularly those with sensory impairments or whose disabilities are severely limiting.
- People in low incomes, who may not afford internet access, nor further travel.

45%
of
respondents

Only willing to travel up to 30 min

In-person will travel

Highly values in person appointments and is willing to travel for them

- Young people, aged 18-24
- Living more than 30 minutes from GP; transient, likely to move within the borough/area
- In work, who may be able to access care near their workplace rather than their home.
- White other than British ethnic groups; Latin American ethnic groups.

28%
of
respondents

In this respect, Waltham Forest respondents are similar with North East London total.

Virtual

- Seeks to avoid travelling to see a GP, but willing to have remote appts
- Some disabled people; especially those with mobility impairments or relatively well-managed, stable chronic conditions.
- Some neurodiverse people, including autistic people & those with mental health conditions.
 - Aged 25 to 49
 - Parents, especially working parents.

16%
of
respondents

Flexible

Happy to have virtual appointments or to to a GP

- Roma ethnicity if not digitally excluded.
- Some neurodiverse people, including some autistic or diagnosed with ADHD.
- Already living further away from GP
 - **LGBT patients**

12%
of
respondents

Willing to travel 30+ min

Prefers being seen remotely or doesn't mind

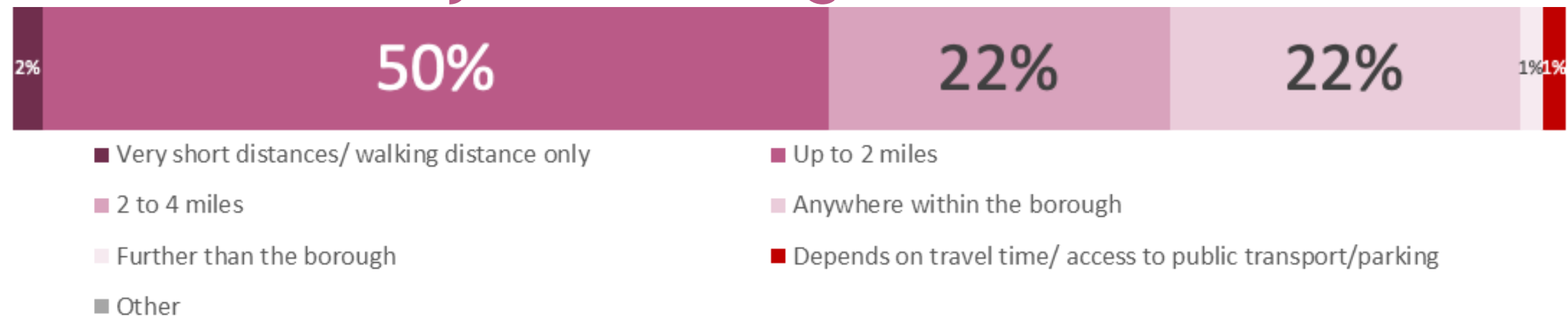




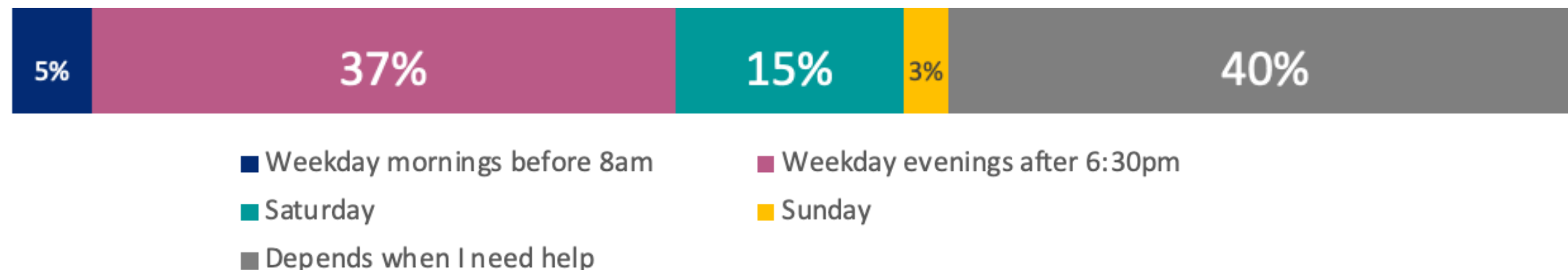
How long would you be willing to travel to see a GP?



How far would you be willing to travel to see a GP?



When would you need out of hours appointments the most?



What would indicate **person-centred** care?

Patients get to see the same medical professional consistently (for example the same doctor or midwife), as much as it is practical. Otherwise, when patients see different medical professionals within the same service or there is a staff turnover, notes and patient records are passed down and read. Quality of care remains constant regardless of who is delivering the care.

Referrals between different services are issued as needed and processed promptly; services share medical records and information seamlessly.

Health and care services are actively working with the wider community to promote holistic patient health - social prescribers, the voluntary sector etc.

Health and care professionals give patients clear options for treatment or care, presented objectively with pros and cons; empowering them to make informed decisions. Patients feel treated as a partners in their own care; and like medical professionals are interested in their own desired health outcomes.

Health and care professionals take a holistic approach to patients' health rather than examining conditions and symptoms in isolation.

Patients get a choice about where and how they access care or public services (using online services, having remote consultations or doing everything in person).

Information is available in a variety of formats and outreach channels

Employers, recruiters and schools consider work-life balance and fitting around workers' and students lives; processes for workforce recruitment and career development look at the worker holistically.

Person-centred

“

Often health care providers give contradictory information which is frustratingly vague and confusing .

What would NOT happen?

Patients receiving contradictory information from medical professionals.

Patients feeling like the level of care they receive is dependent on whom they get to see on any given day.

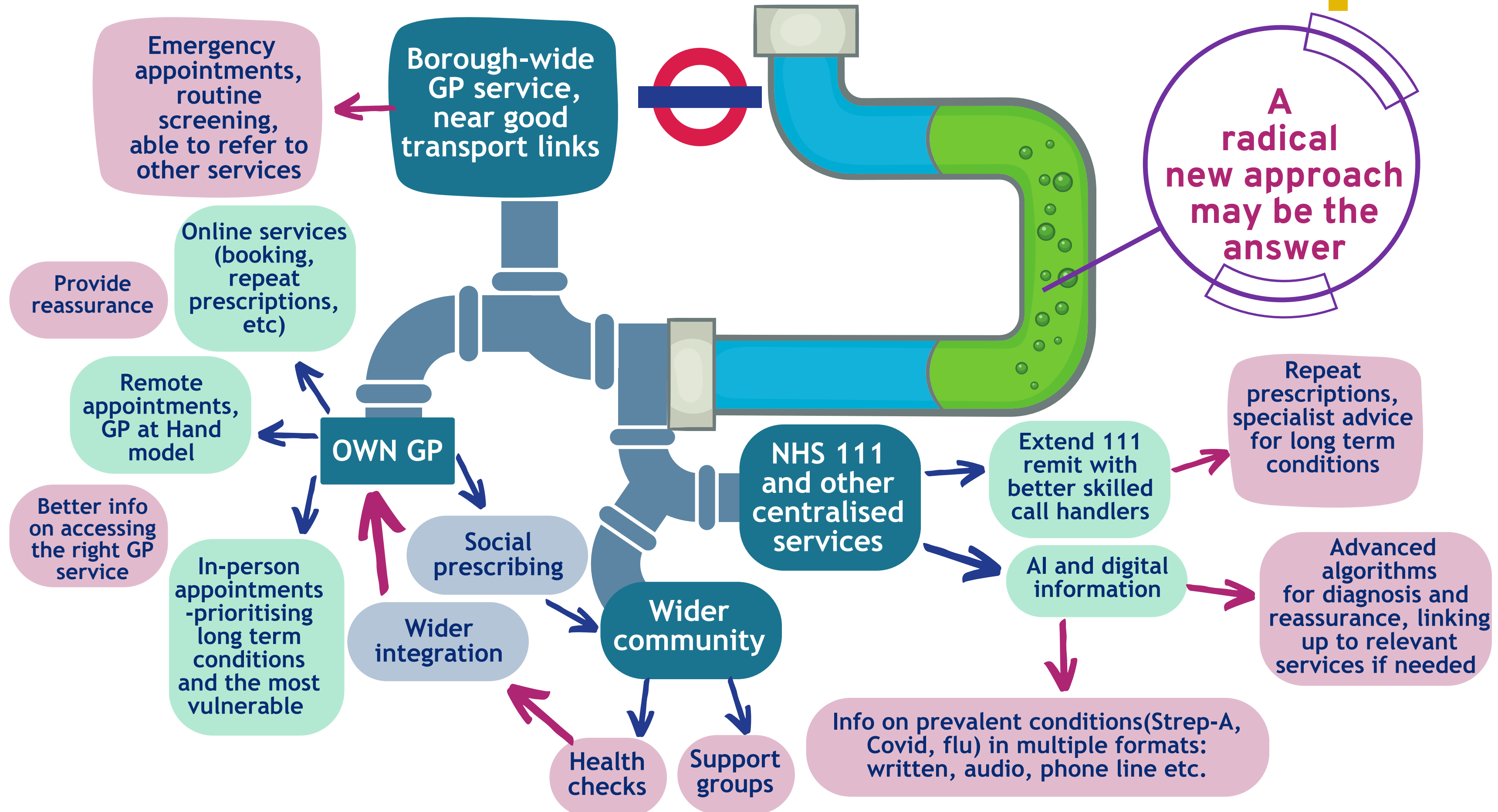
Patients having to repeat information that should be in their medical records or notes already.

Patients feeling like they are passed around between services with no actual help.

Patients only being allowed to discuss one symptom or condition per appointment.

Unblocking the pipeline

Person-centred



Trustworthy

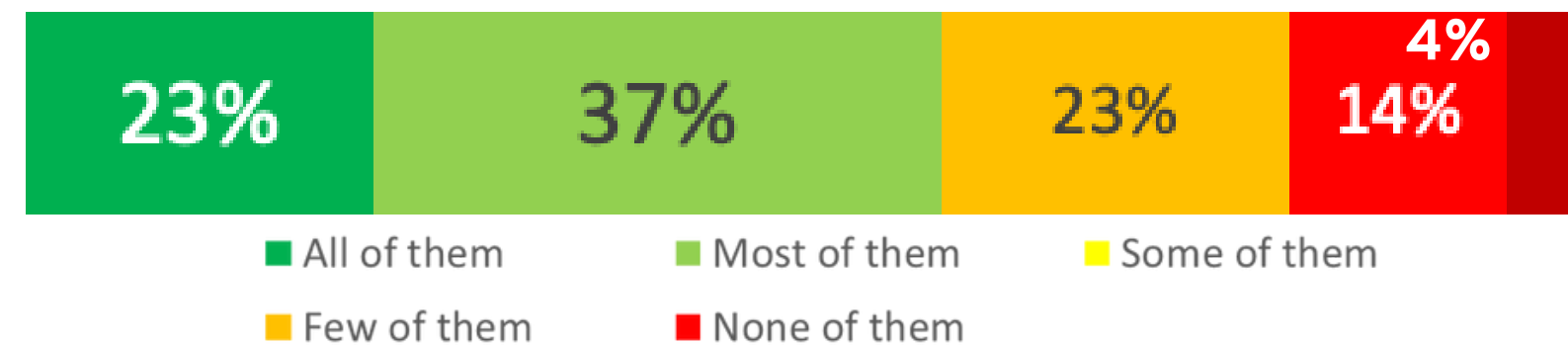


41 mentions from 46 respondents

How important is it for you: Receiving information in a way that's easy to understand



Professionals looking after me: give me information that's easy to understand

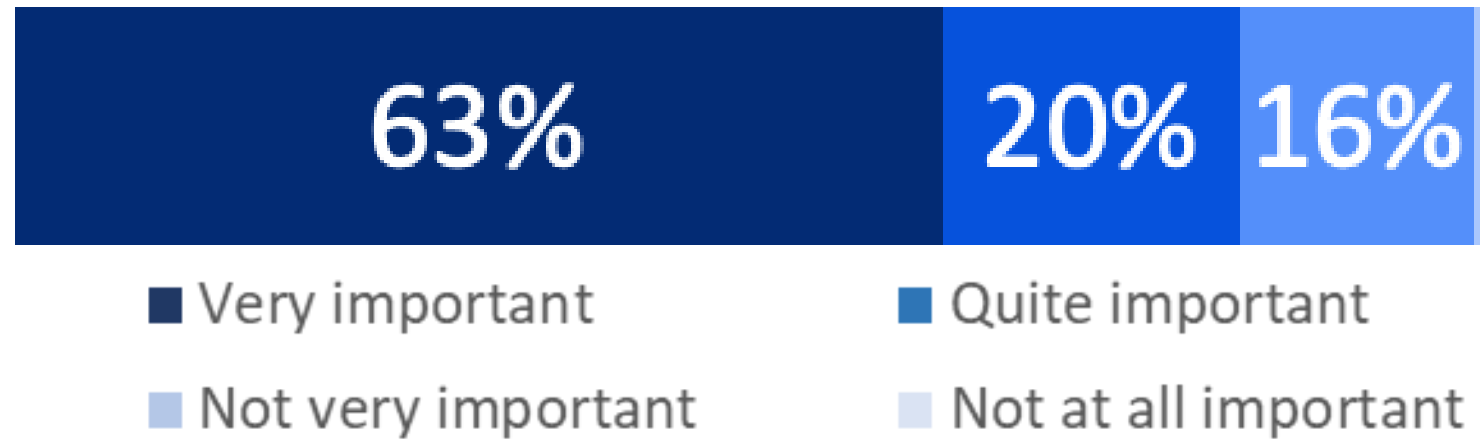


Compared with North East London total, Waltham Forest respondents were **about as likely** to find that they receive information that's easy to understand.

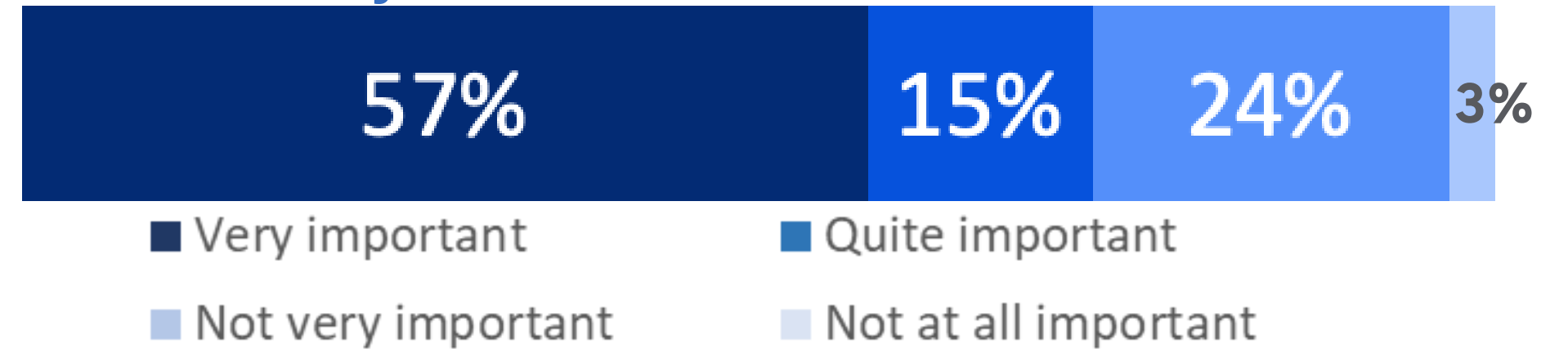
How important is it for you



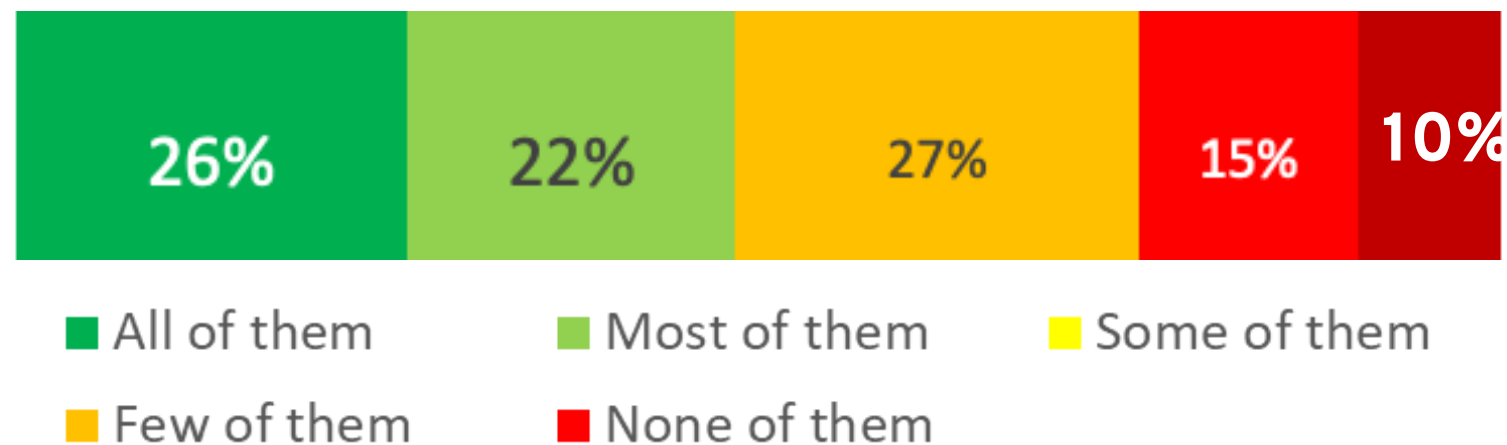
Being looked after by people who understand your beliefs and values.



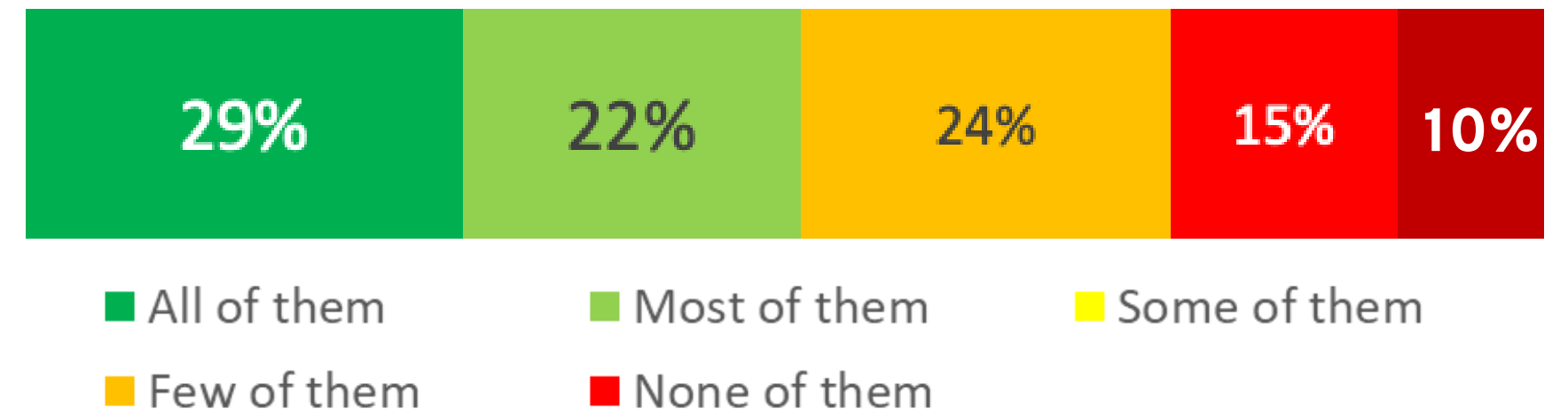
Being looked after by people who understand your culture.



Professionals looking after me: understand my beliefs and values



Professionals looking after me: understand my culture



Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find that they receive information that's easy to understand.

Compared with North East London total, Waltham Forest respondents were **slightly less likely** to find that they receive information that's easy to understand.

What would indicate **trustworthy** care?

Patients feel listened to and reassured that their problems are taken seriously by care professionals; they feel that they are given adequate time.

Health and care services proactively engage with patients and ask about what is important to them.

Patients communicate with professionals about their care, in a honest, straightforward manner; understanding why they are offered a certain course of action.

Patients have someone they can turn to for competent advice, reassurance and prevention; they know whom they can turn to if they are worried about specific aspects of their health.

There is a straightforward and transparent process for accessing care.

Patients have access to routine check-ups in order to feel fully reassured that their health is good.

Services demonstrate accountability and act upon feedback received from patients.

In the family, workplace and community, local people feel comfortable talking about their health needs with no fear of judgement or stigma.

Local people feel safe from harm in their local community; they are comfortable using local amenities/facilities and engaging with their neighbours.

Trustworthy

“

Generally people are helpful, however what tends to be missing in hospital consultations is explanation: what might be wrong; what tests are being done and why; what the tests can tell you; and what the pathway then is.

What would **NOT** happen?

Patients feeling like they are fobbed off or their concerns are dismissed.

Patients feeling that they are treated like a burden; feeling discouraged from seeking care or asking questions.

Consultations feeling more like a tick-box exercise than a consultation.

Patients perceiving admin staff as gatekeepers or relating to them in an adversarial way.

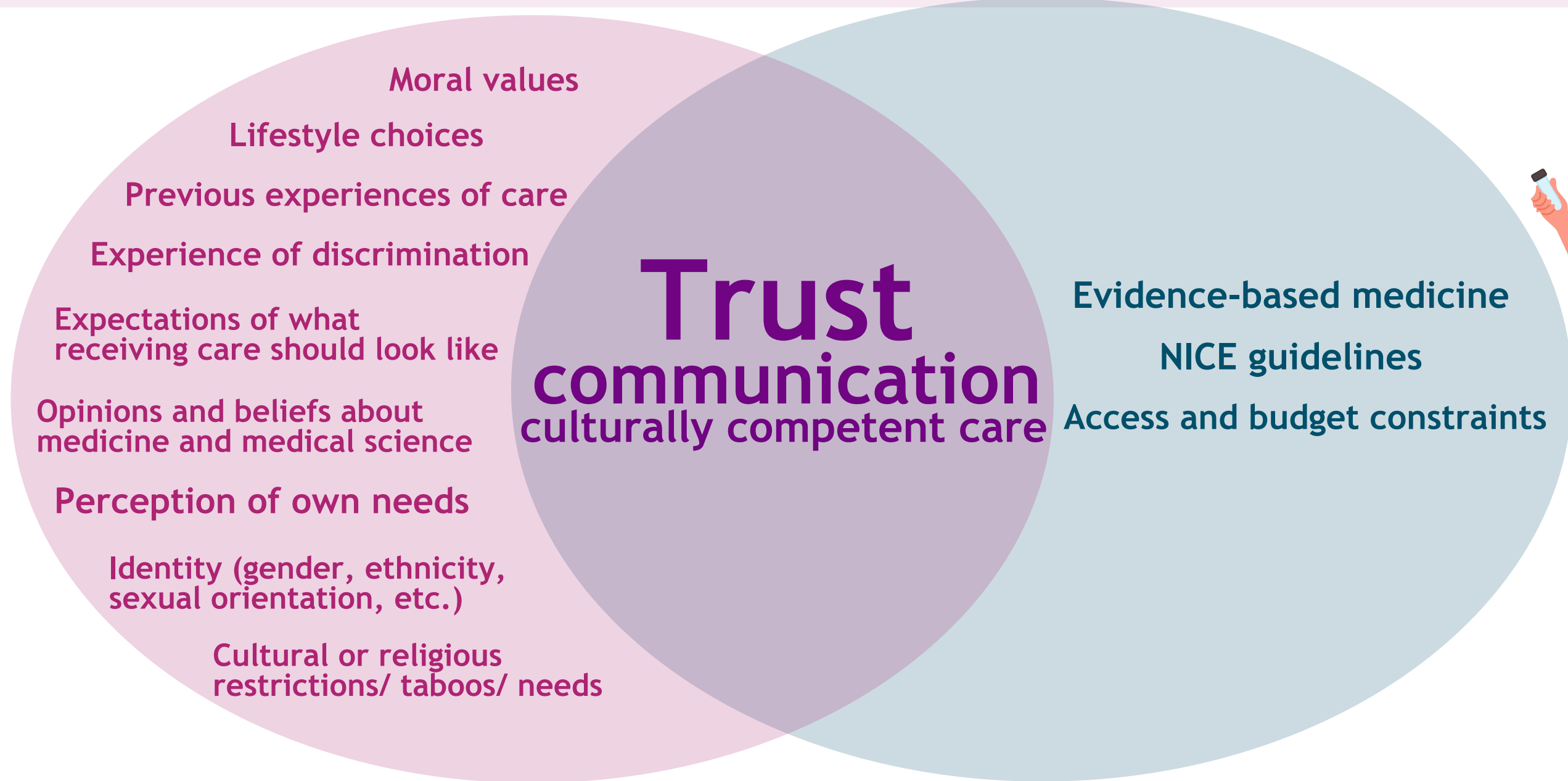
Workers feeling reluctant to ask for sick leave or necessary adaptations at work, fearing discrimination or judgement.

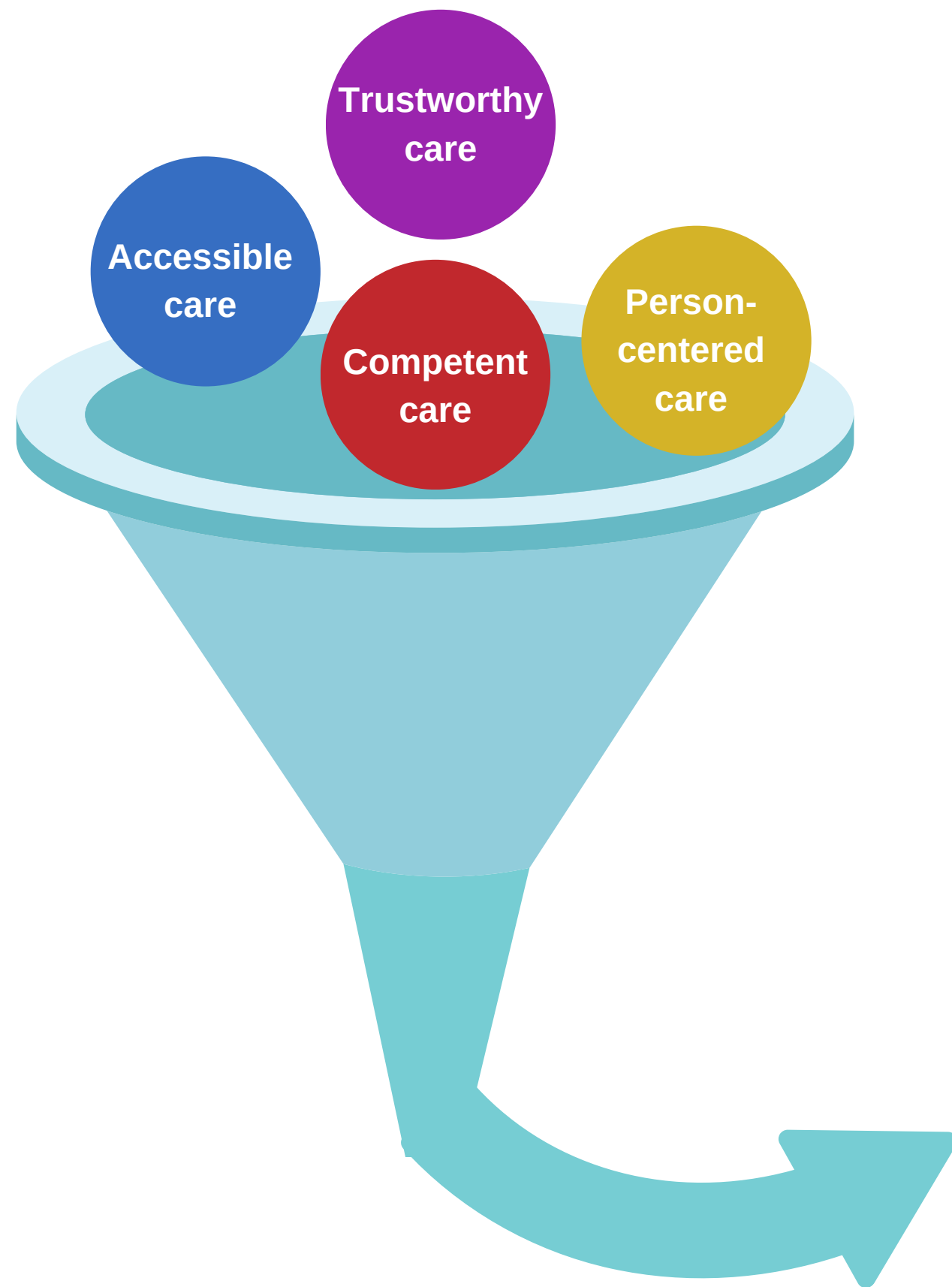
What about cultural competence?

A note on engaging with local people on their beliefs and values

Trustworthy

In some situations, rather than asking local people about their culture, beliefs and values in relation to health and care services, an alternative way of framing the question would be to address their **expectations in relation to the care they receive**. This could in turn inform culturally competent care.

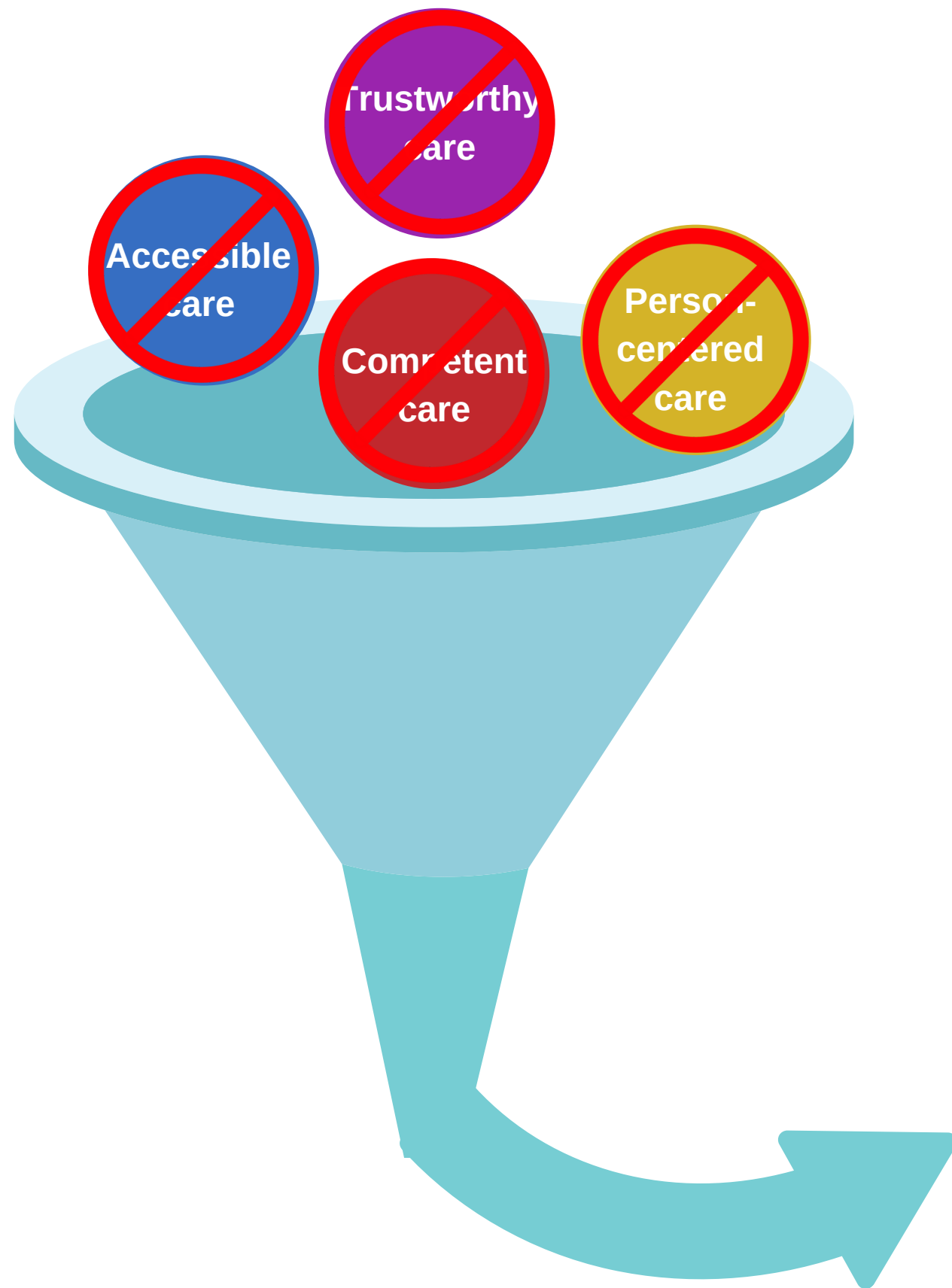




What does good care look like?

Good care has good consequences

- Local people feel **empowered** to live full healthy lives, to look after themselves and families. They feel **heard** and **reassured**. They worry less about their own health.
- **Children and young people** have a good start in life.
- People with **long-term conditions** manage them well. They are able to work and/or contribute to society in other ways. They are able to engage with others and do things they enjoy.
- **Older people** stay healthy and active for longer. They maintain a good level of independence.



What does good care look like?

Bad care has bad consequences

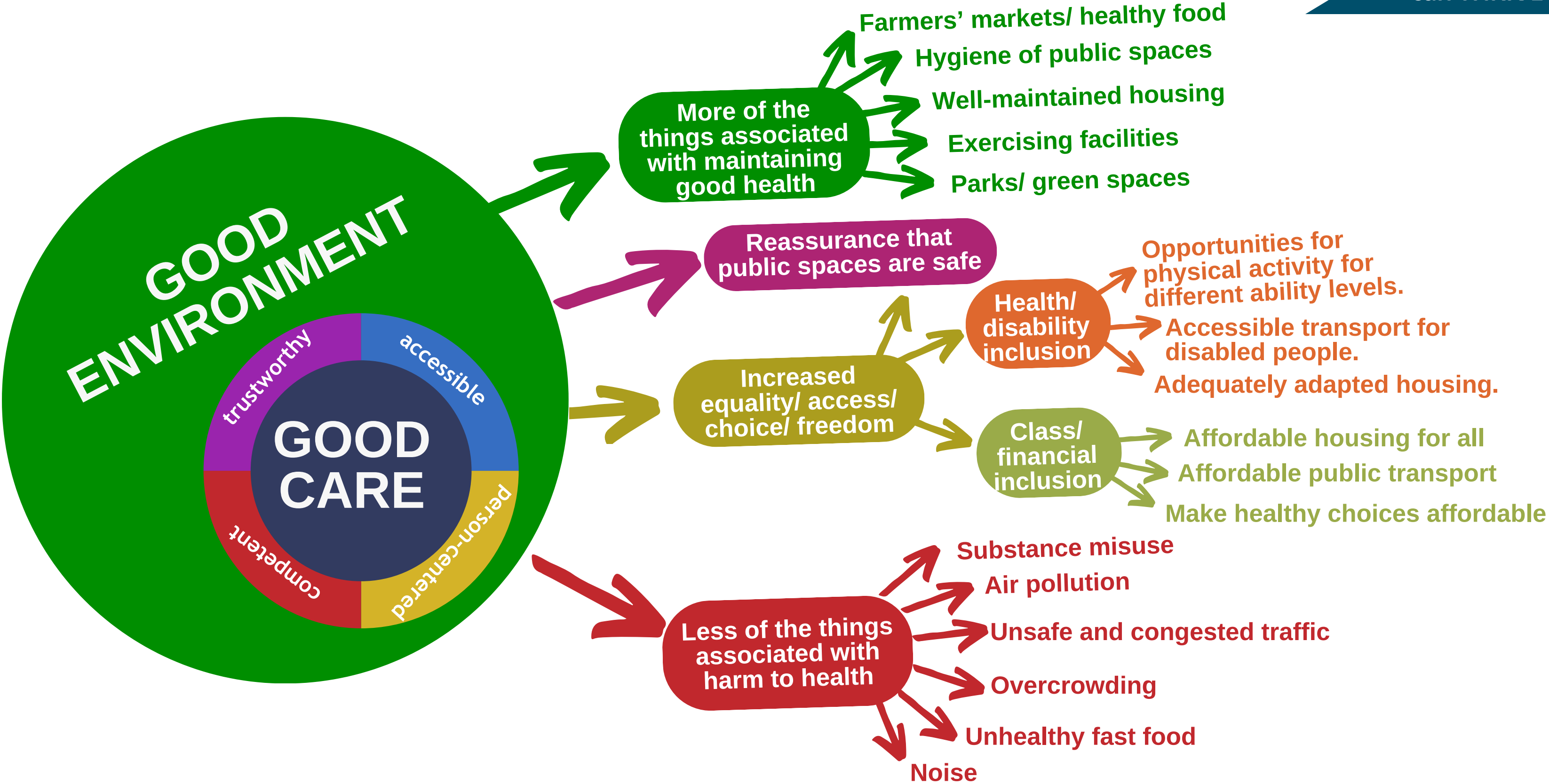
- People **worry about their health**, as they don't have the knowledge to assess their own level of health or deal with specific symptoms; and they don't have a reliable source of advice.
- People **distrust** doctors and the treatments they prescribe; they may see the health and care system as defined by **gatekeeping** and doing the bare minimum. As a result, they may turn to alternative sources of care and/or reassurance, including those which may be pseudoscientific or harmful.
- Conditions that **would have been more easily treated** or controlled at an early stage worsen.
- People with **long-term conditions**, especially as they age, leave the workforce earlier and experience higher risks of social isolation.

What could make care **accessible, competent, person-centred, trustworthy** in Waltham Forest

- ➔ **Make primary care available on a non-appointment basis (through walk-in centres, urgent treatment centres etc.)**
- ➔ **Provide local residents with the opportunity to receive health checks and bring up questions and concerns about their health. These could be geared towards the general population or specific groups (older people, small children, long-term conditions etc.) and take place in GP surgeries or in a community-based setting.**
- ➔ **Improve record-sharing between different NHS services, especially between GPs and all other services.**
- ➔ **Improve provision of social prescribers and links between GPs and community/ advice/ voluntary resources.**
- ➔ **Give patients more choice about booking and accessing medical care in different ways (remotely or in person; improve booking systems by making them more flexible.**
- ➔ **Improve availability of parking at Whipps Cross hospital.**

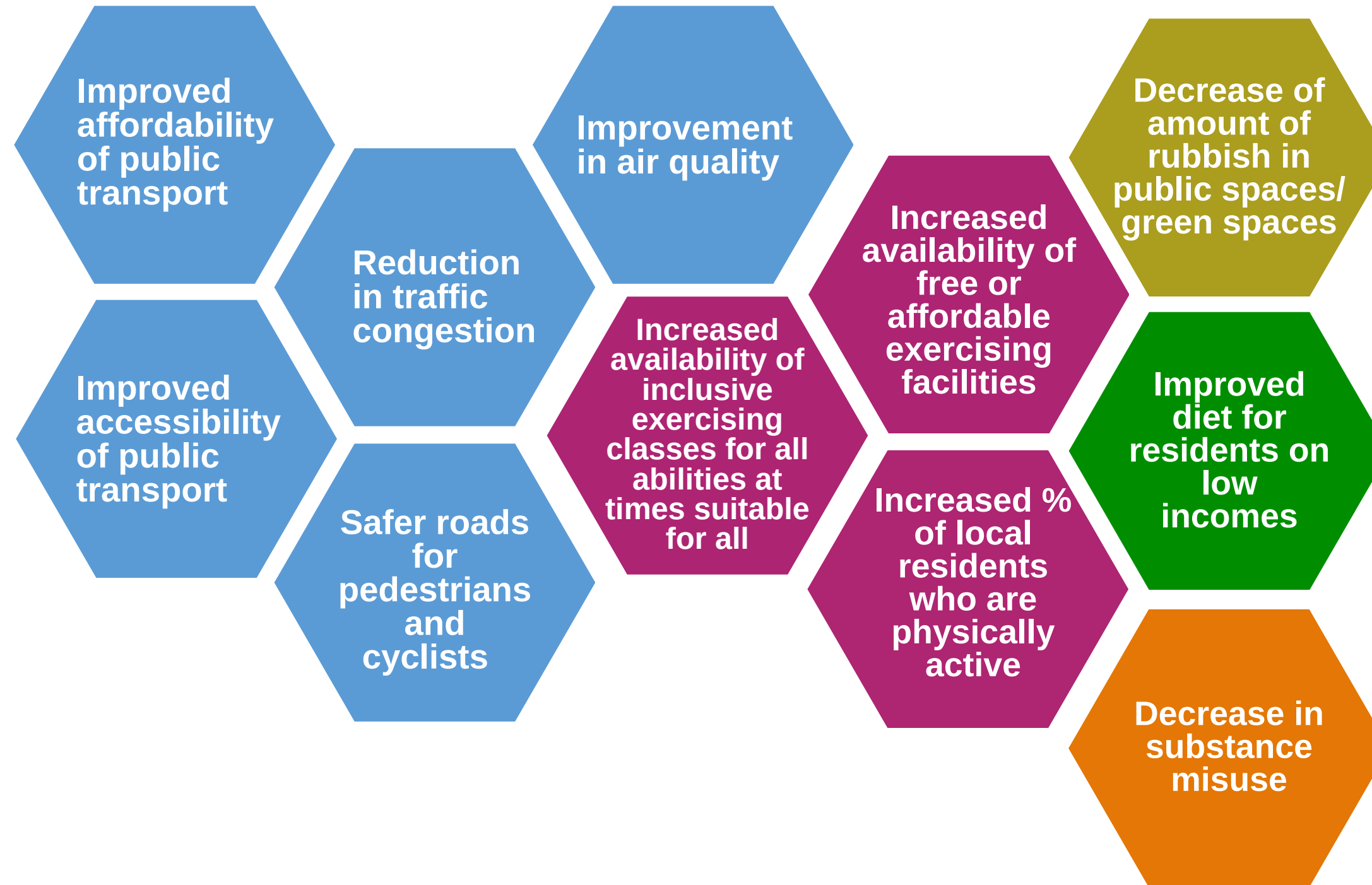
What does a healthy community look like?

Everybody
can THRIVE



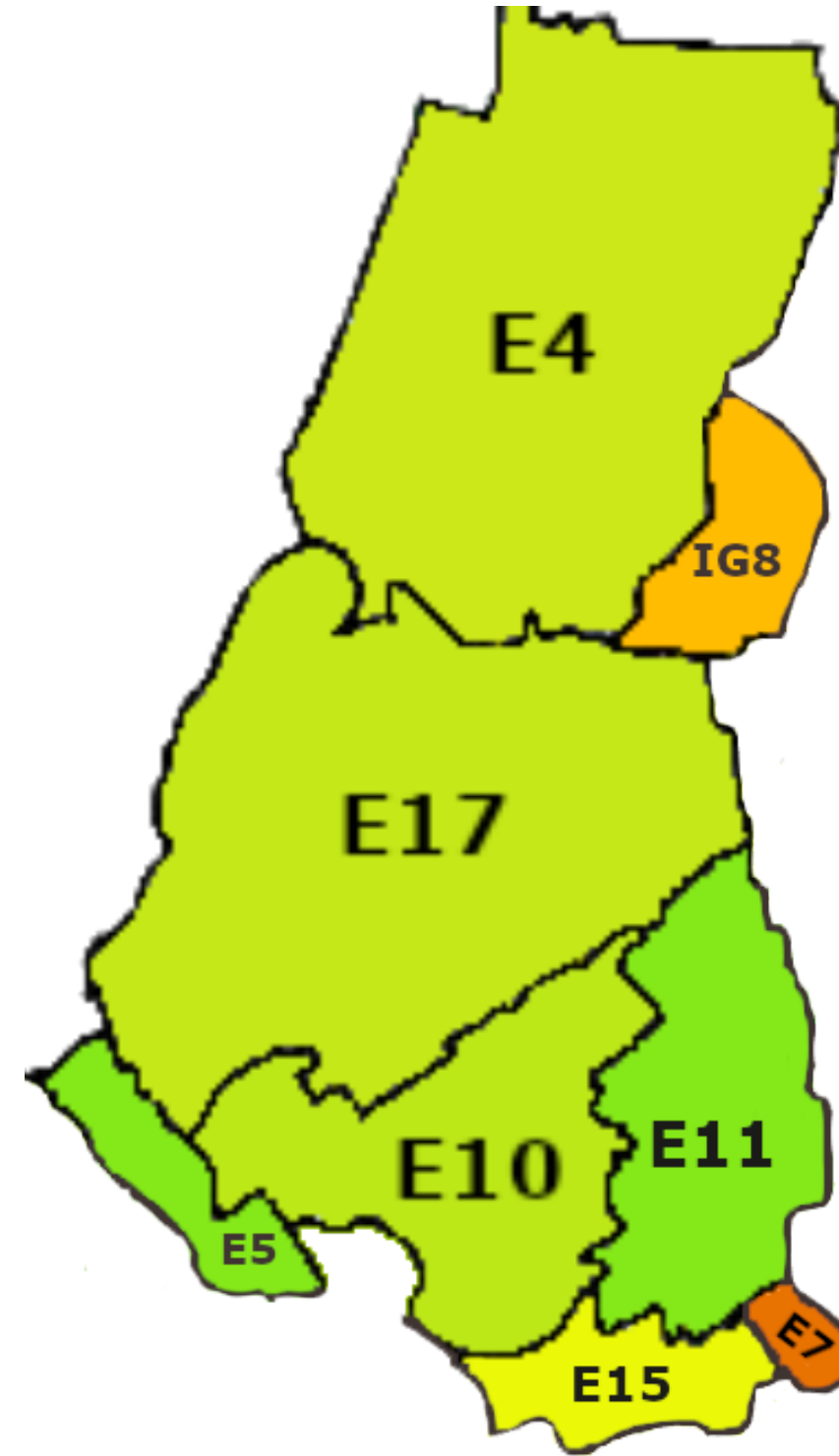
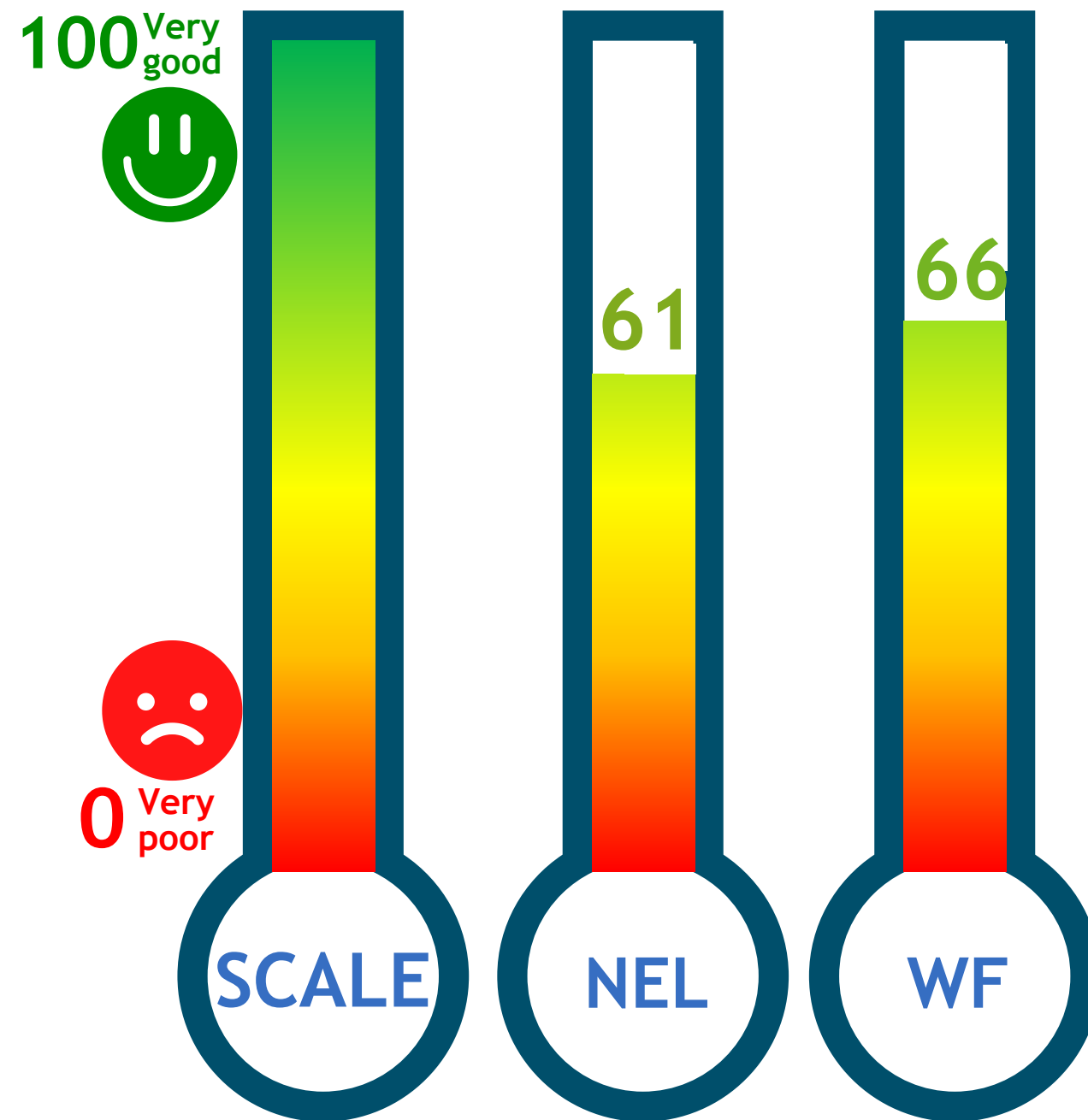
How to measure the health of the wider community based on what matters to local people

Everybody
can THRIVE



My neighbourhood is a place where I can live a healthy life- *survey respondents*

Everybody
can THRIVE



What could create **healthier communities** in Waltham Forest

Everybody
can THRIVE



Make gyms and other exercising facilities accessible for more groups that currently don't use them; especially older people, those who cannot exercise strenuously or need gentler exercise; people on low incomes who would struggle to afford membership at the current market rates; and women who prefer to exercise in women-only spaces.



Tackle road traffic gridlock and generally discourage unnecessary driving to reduce air pollution.

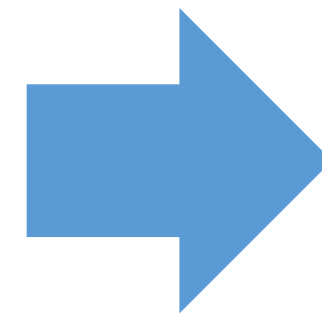
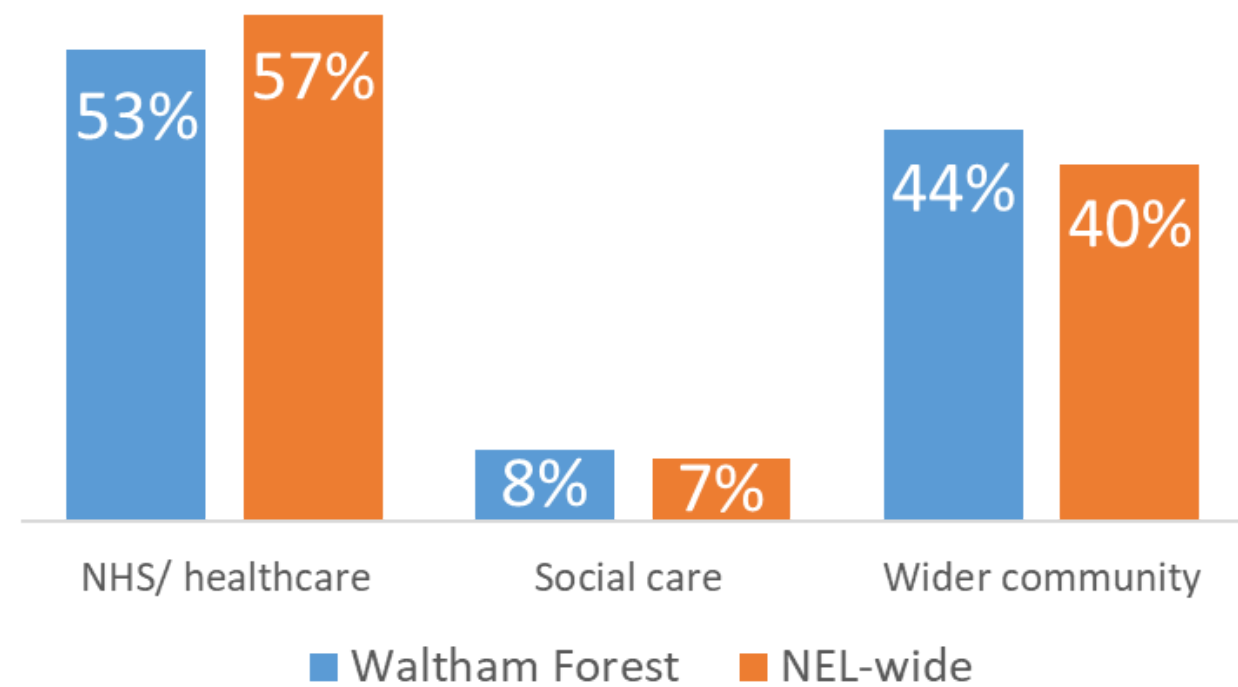


Tackle homelessness- provide better support to those who are currently homeless, as well as to those in poverty who may be at risk of becoming homeless without adequate support.

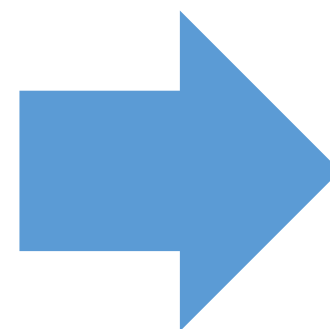


Crack down on drug trafficking; offer multidisciplinary support (health, social care, housing support etc.) to those affected by substance misuse and addiction.

What changes would make an immediate positive difference to people's lives?

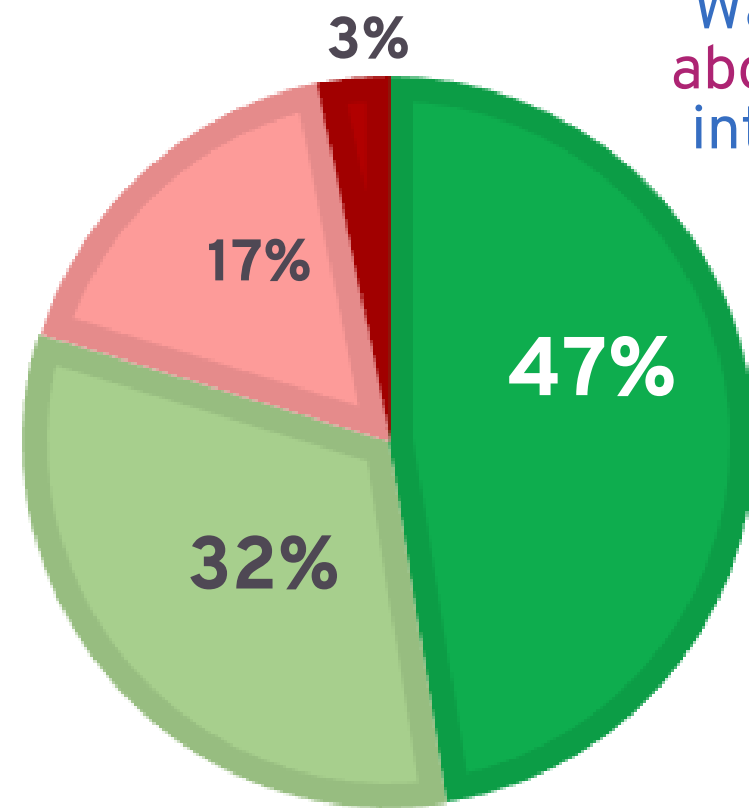


Most mentioned healthcare change: improve access to primary care, especially to GP appointments.



Most mentioned wider community change: improve access to exercising facilities.

How interested would you be about having information available where you live about living a healthy life? - *survey respondents*



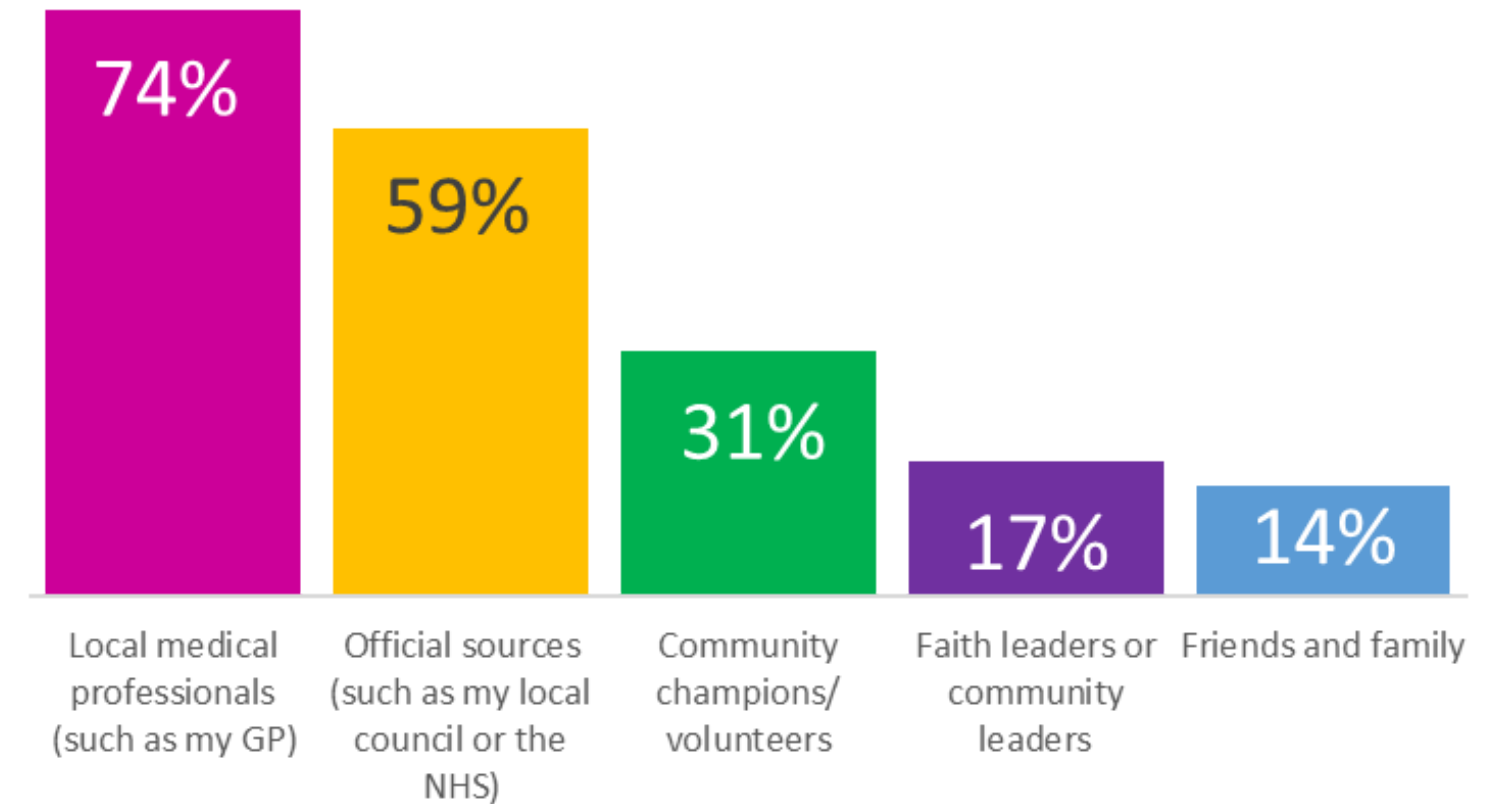
- Very interested
- Fairly interested
- Not very interested
- Not at all interested

Waltham Forest residents were **about as likely** as NEL total to be interested in information about healthy living.

56%
of those not interested said they already had enough information.

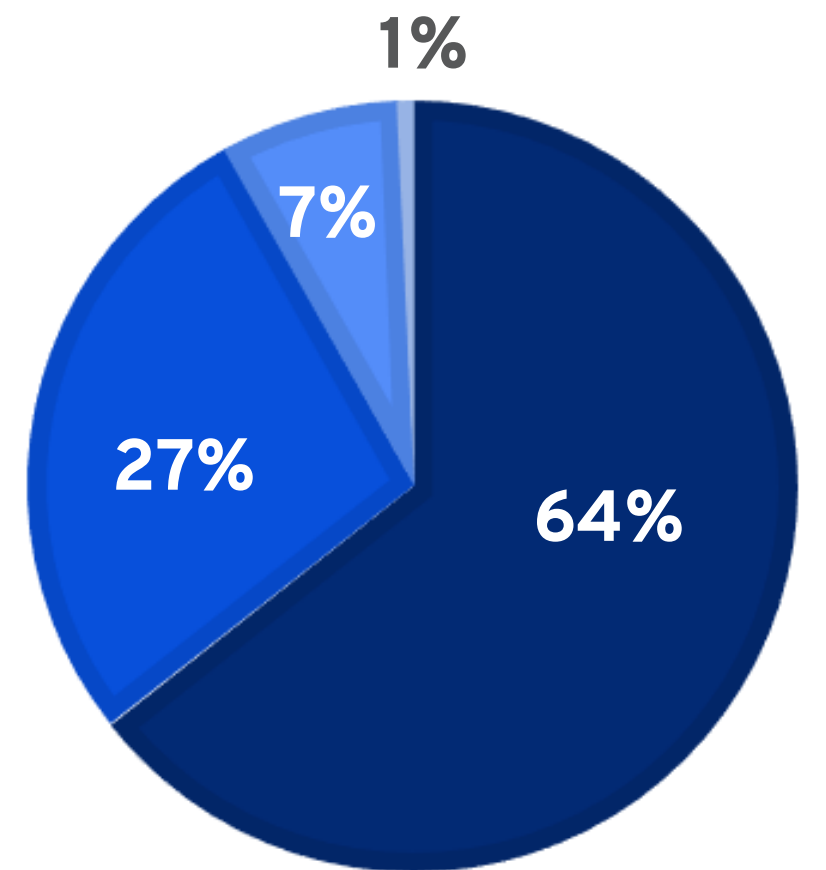
19%
of those not interested said the obstacles they face to living a healthier life cannot be tackled with just information.

Whom information should come from according to those who would like to receive info



Waltham Forest residents were **more likely** than NEL total to want information coming from **local medical professionals** or from **faith or community leaders**.

How important is it for you to have a say about how local health and social care services are run? - *survey respondents*



- Very important
- Fairly important
- Not very important
- Not at all important

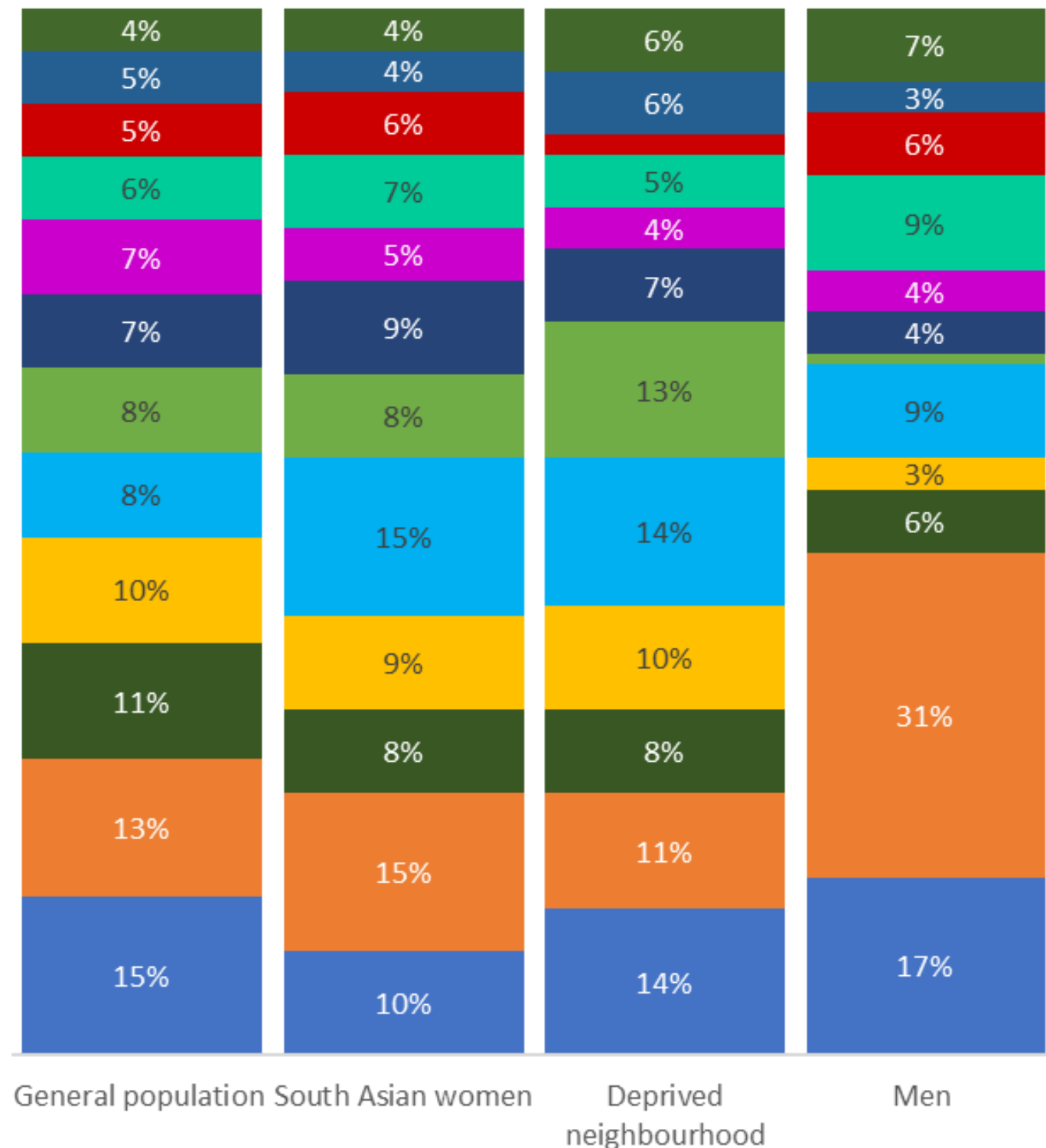
Compared with North East London total, Waltham Forest respondents were **slightly less likely** to believe it is important to have a say.

What would help local people be more involved in shaping health and care services:

- Inform local people about involvement opportunities**
- Be flexible in terms of dates/time and medium; consider accessibility**
Accommodate those who prefer to take part in meetings and those who prefer to give feedback in writing; those who are digitally excluded and those who prefer online communication; those who work full-time and those with limited ability to travel.
- Consider the specific expertise individuals can bring**
Professional experience, lived experience, transferrable skills.
- Consider financial incentives/ paying for expertise**
- Show local people how their involvement is making a difference**
Offer clarity on how their data will be used; demonstrate accountability; publicise "You Said/We Did" results

Participative budgeting - *community roadshows*

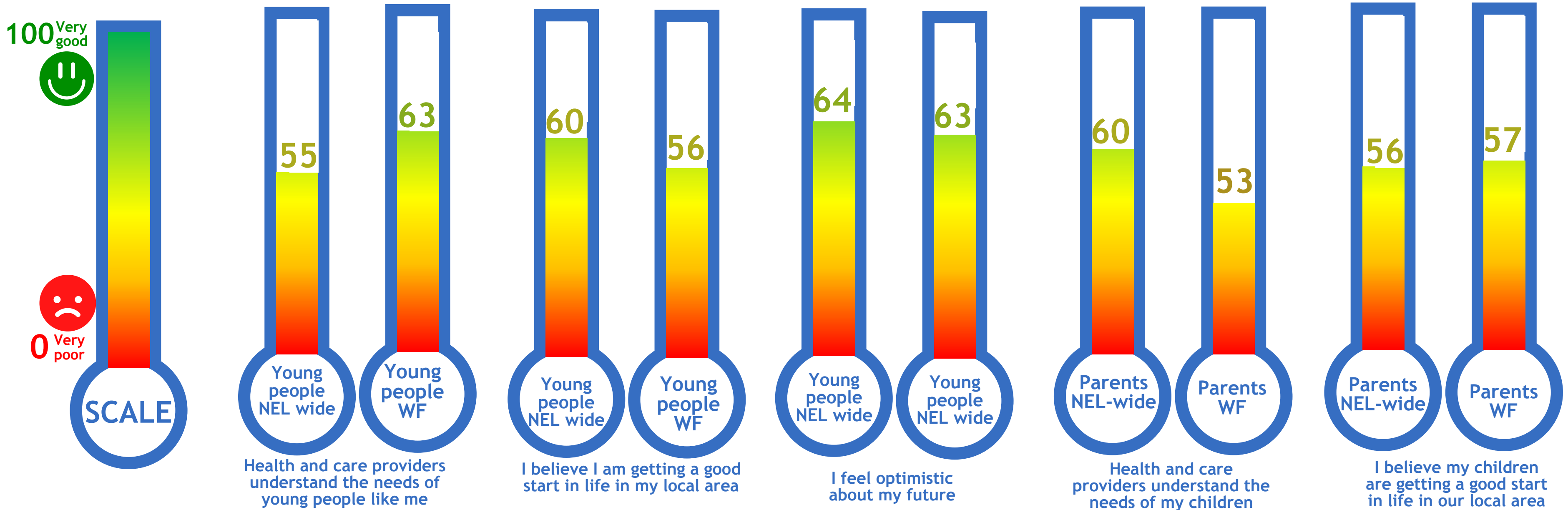
We engaged with local people at community events targeting different populations- including food bank users in a deprived area, Asian women, men of different ages and ethnicities. They were asked to engage in a participative budgeting activity, distributing limited resources towards various issues and priorities.



- Improving hospital discharge experience
- Addressing childhood obesity
- Providing information about how to keep yourself healthy
- Supporting community organisations
- Joining up care across partners
- Creating a healthy local environment
- Supporting people with long term conditions
- Supporting older people
- Preventing long term conditions
- Supporting people with cancer
- Access to GPs and dentists
- Mental health support

- **Primary care, access to mental health support and care for older people were prioritised consistently across groups.**
- **Men placed the highest importance on primary care; and also a higher importance on mental health; but less importance on either the prevention or care aspects of long-term conditions.**
- **Asian women placed more importance on supporting older people.**
- **The deprived neighbourhood group placed more importance on long-term conditions; this could be related to a higher prevalence of long-term conditions among those in poverty; but less on providing health-related information, which could indicate that the obstacles they face to healthy living cannot be fully addressed through information alone.**

Priority: babies, children and young people



Priority: babies, children and young people

What young people want from health and care services

- ➔ Trustworthy sources of information about healthy lifestyles
- ➔ Routine check-ups/ screenings/ blood tests
- ➔ Mental health and wellbeing support; faster access to mental health services; holistic mental health support
- ➔ Awareness of mental health-related disability; signposting and integration
- ➔ Services that are easy to use (streamlined admin), with reasonable waiting lists; simplified access/paperwork
- ➔ Non-judgemental, empathetic professionals you can be open with; communicating sensitively
- ➔ Younger social workers and friendly space them can put them at ease
- ➔ Medical professionals that speak to them in an age appropriate way from as early as possible, not just to their parents
- ➔ Respect for their confidentiality and privacy
- ➔ Health professionals that do not dismiss young people's concerns and symptoms, especially those that make them stressed or self-conscious; not having their concerns dismissed because of age.
- ➔ Social prescribing; working within the community
- ➔ Continuity and integration of care when transitioning from child/adolescent to adult health services; without a need for restarting the referral process.
- ➔ They place a high importance on health and care workers being fairly paid and having a good work environment

Priority: babies, children and young people

What young people want from schools

- ➔ Holistic/ interdisciplinary teaching
- ➔ Better security/ protection/ safe environment.
- ➔ School-based mental health support.
- ➔ Opportunities to learn about different career paths, including for those who are not academic over-achievers.
- ➔ Work experience. Opportunities to build employability skills.

What young people want from their local communities

- ➔ A strategy to address poverty, especially food poverty and housing poverty/homelessness;
- ➔ Better awareness of the different types of abuse and support for abuse victims.
- ➔ More after-school clubs particularly aimed at young men, as a violence prevention strategy.
- ➔ Work experience. opportunities to build employable skills.
- ➔ Better promotion of community organisations/ charities offering relevant services.
- ➔ Safety from bullying, harassment, robberies and gangs.
- ➔ Connection, motivational community; encouragement to pursue dreams
- ➔ Open green spaces, spaces for physical activity and sports
- ➔ Disability inclusion

Priority: babies, children and young people

What parents want from health and care services

- ➔ Easily accessible/ availability of appointments
- ➔ Quick access to urgent primary care (same day or walk-in); a dedicated helpline for paediatrics advice/
- ➔ Single point of access for children's services
- ➔ Local children's hub providing health checks; for older ages (from primary school onwards) continue to provide routine health checks and health information in a regular basis, possibly in a different setting.
- ➔ Better continuity/ consistency of care in the provision of postnatal health visitors, especially for vulnerable families and those with mental health issues; better non-judgemental breastfeeding support; continuity of care/ support from birth to school age. Extend Home Start to older ages
- ➔ Nutrition, mental health and family education for parents and children; access to antenatal/ parenting classes, including for those on low incomes.
- ➔ Multicultural staff reflecting the diversity of local areas
- ➔ Signposting service connecting to community resources
- ➔ Holistic/ community-connected support for families with special needs or vulnerabilities.
- ➔ Better support for children with special educational needs in schools.
- ➔ Better, more accessible child and adolescent mental health services
- ➔ Mental health support and health education in schools.



70%

of parents didn't have anyone to turn to for advice on supporting their children to grow healthy and well.

Waltham Forest parents were less likely than NEL total to have someone.

Priority: babies, children and young people

The good care model

Accessible

Babies and children can get same-day GP appointments or be seen on a walk-in basis.

Health and care services for children and young people take into account school schedules when offering appointments.

Children's centres, family hubs and youth clubs are in every neighbourhood.

Parenting classes, activities for children, families and young people are free or affordable.

It's easy and convenient for children/ young people to stay physically active and feel healthy.

Competent

Young people and new parents have access to impartial, evidence-based advice on living a healthy lifestyle.

All services working with new parents, babies, children and young people have a good awareness of mental health in the context of parenthood, childhood and youth respectively.

All services working with new parents, babies, children and young people have a good awareness of learning disabilities and neurodivergence.

Person-centred

Transition between child and adult specialist health services (for example from CAMHS to a Community Mental Health Team) is straightforward and happens without disrupting access to care for young adults; patients are not required to undergo complex bureaucratic processes or tell their story from the beginning all over.

Health services, social care, schools and community organisations work together and signpost to each other.

Trustworthy

Routine health checks for babies and children are available in hubs, children's centres or GP surgeries, providing reassurance to parents.

Young people get to access care and speak about their concerns to professionals that take them seriously, respect their dignity and their confidentiality; they get to ask about sensitive topics such as mental health or sexual health without fear of being judged.

Young people's health concerns are being taken seriously and not dismissed.

How to measure success for babies, children and young people based on what matters to young people and parents



Recommendations for **babies, children and young people** in Waltham Forest



Improve access to community healthcare services, such as postnatal nurses, family health visitors and youth mental health services.



Provide better support to families struggling financially (including with housing and employment that works around families).



Improve availability and affordability of childcare/ nurseries.



Improve access to support around SEND and neurodivergence.



Involve young people in informal educational activities - including on healthy living topics; involve young people in volunteering; provide opportunities for them to socialise.



Provide spaces for unstructured play physical activity, such as parks, gyms, playgrounds and courts for playing sports.



Engage children in physical activity at school.



Improve availability of healthy food; reduce the amount of unhealthy fast food available in supermarkets and local takeaways.

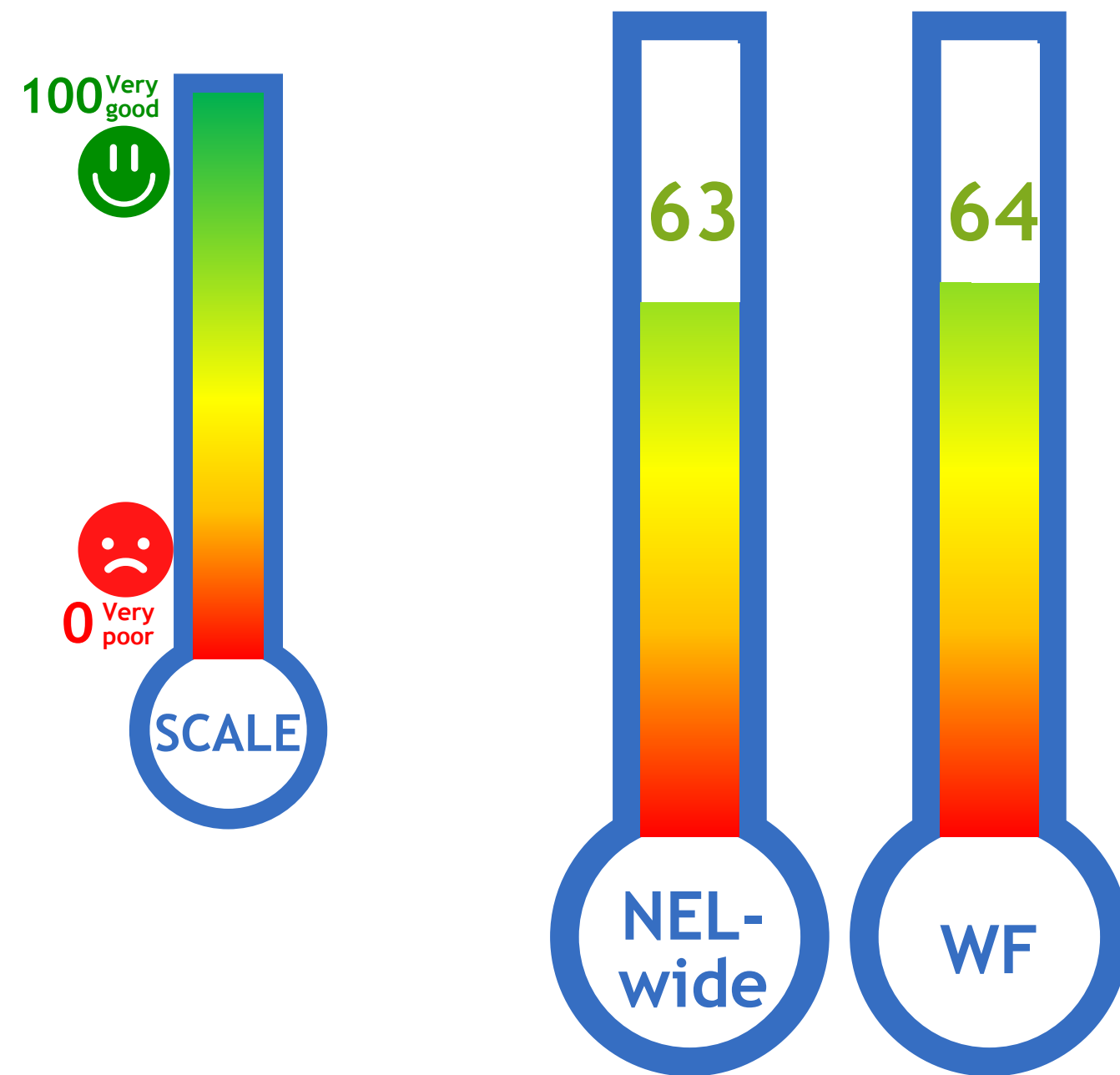


Introduce comprehensive health education in schools, covering not just sex education but also topics such as first aid, cooking healthy meals, mental health awareness and understanding the NHS.

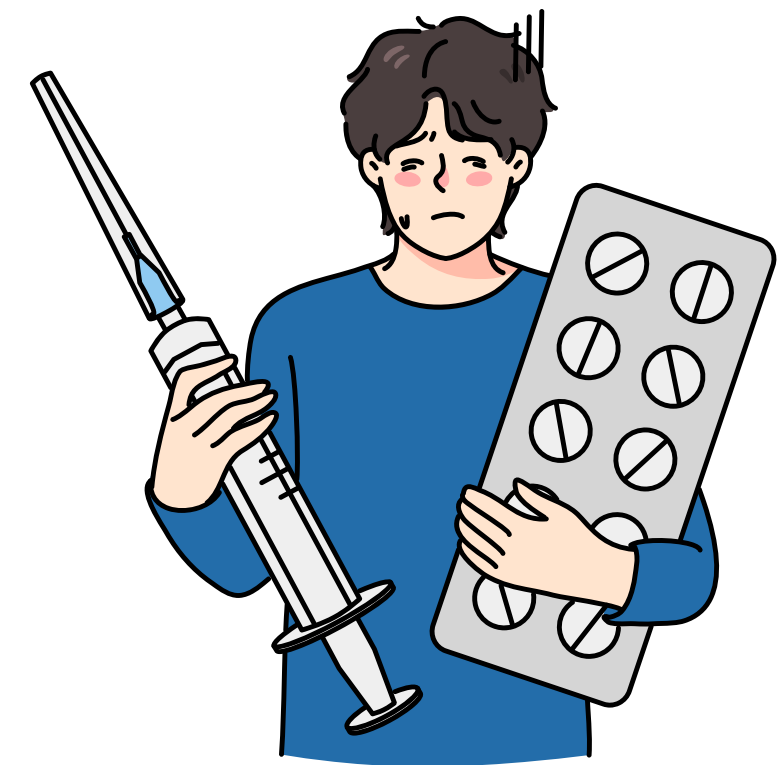
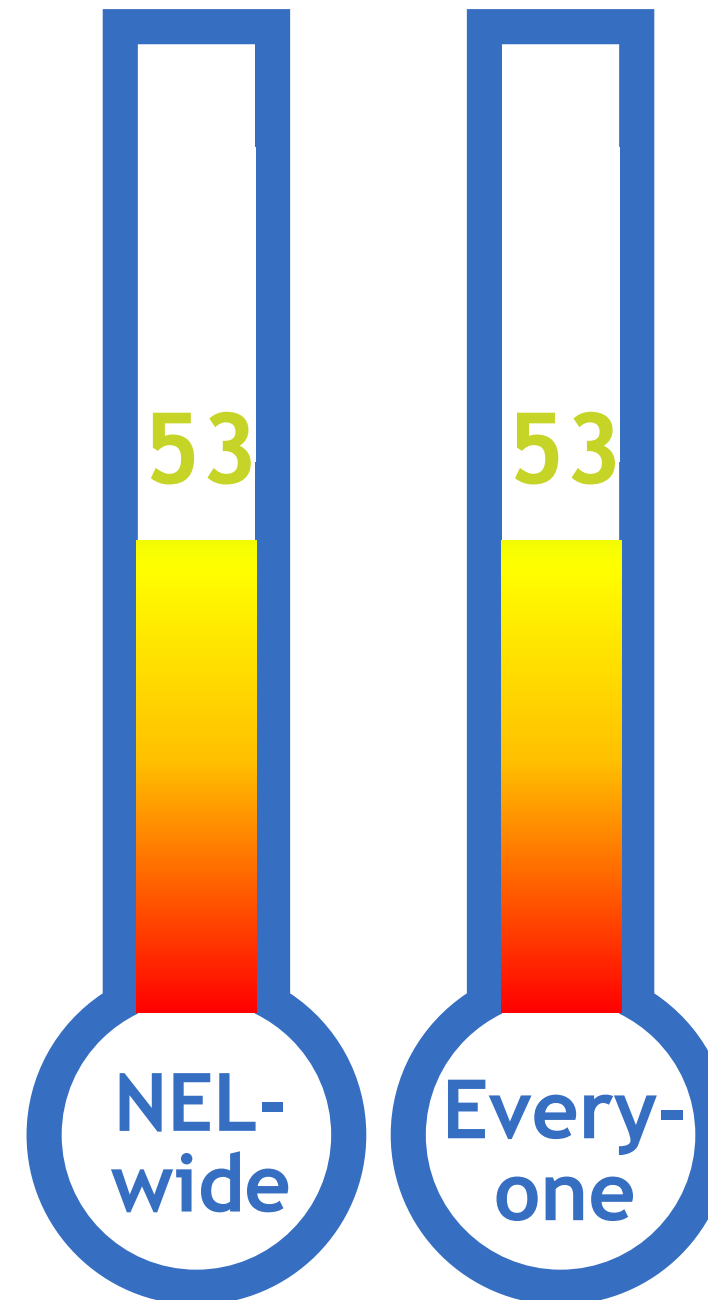
Priority: long-term conditions

Survey respondents with long-term conditions

I am able to manage my long-term condition well



I am receiving good care for my long-term condition



Priority: long-term conditions

The good care model

Accessible

People with long-term conditions have a reliable way of getting specialist advice when needed (for example: a helpline dedicated to their specific condition)

GP routine appointments are scheduled ahead of time and available.

Practical help solutions to empower people with long-term conditions to manage their lives and live well are available, including to those on low incomes.

Opportunities to socialise and/or be physically active are accessible to all.

Competent

Health and care providers understand long-term conditions; including how different conditions and co-morbidities may impact each other.

Impartial, evidence-based advice on self-care and managing long-term conditions is available in the community.

Patients experiencing new symptoms are diagnosed promptly and reliably.

Person-centred

Primary care, specialist health services and wider community support are connected with each other.

Patient records are shared between services; referrals are processed smoothly and efficiently.

There is a single point of access for patients with a long-term condition (could be GP surgery, care navigator or community hub).

Patients are treated holistically, not each condition in isolation (especially for those with multiple conditions)

Trustworthy

Patients have access to routine check-ups and reviews, in order to understand the progress of their condition, make sure they are well and improve self-care ability.

Patients in the process of being diagnosed or those experiencing new symptoms are taken seriously, listened to and supported to manage in the meantime,

Patients feel comfortable asking for adaptations or flexibility in the workplace; they can thrive in their careers despite their conditions.

Priority: long-term conditions

What makes the difference between those who manage their long-term condition well and those who manage them badly?



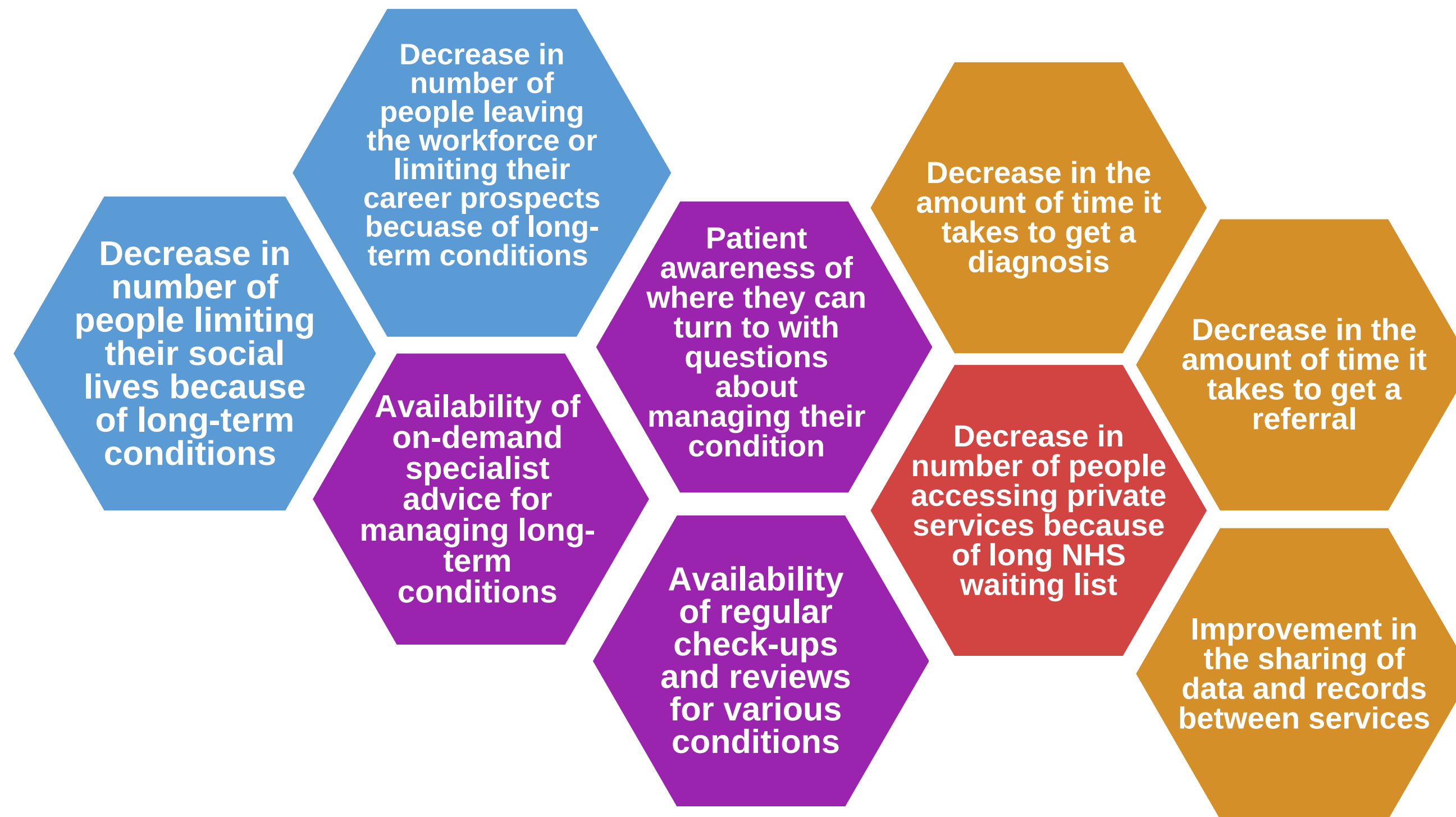
I'd like to be regularly assessed with the doctors to review my health condition and offer more support with other lifestyle choices that could help me better manage my health condition.

I have arthritis in both knees and have essentially been fobbed off. I've been on the same medication for anxiety for 10 years with no review or discussion, or even regular blood pressure tests as required by the type of meds I'm on

My condition is being monitored well; I know how to get in touch with my team if I need to, and I've been informed about future treatment options, and my opinions were listened to. The only criticism I have is the amount of time it took to have my thyroid tested. It took seeing a locum to be sent for thyroid blood tests-previous doctors hadn't picked up on it, even though I had many obvious symptoms.

It's a constant battle to get appointments, to ask for services, to be proactive in remembering the need for next steps in diagnosis and treatment.

How to measure success for long-term condition support based on what matters to people with long-term conditions



How care could be improved for people with **long-term conditions** in Waltham Forest



Improve access to primary care/ GPs; offer longer and more flexible appointments to patients experiencing co-morbidities.



Provide routine specialist check-ups to give patients reassurance and ensure care plans are up to date.



Improve cooperation between medical, social and community services in order to provide patients with necessary adaptations and other forms of support.



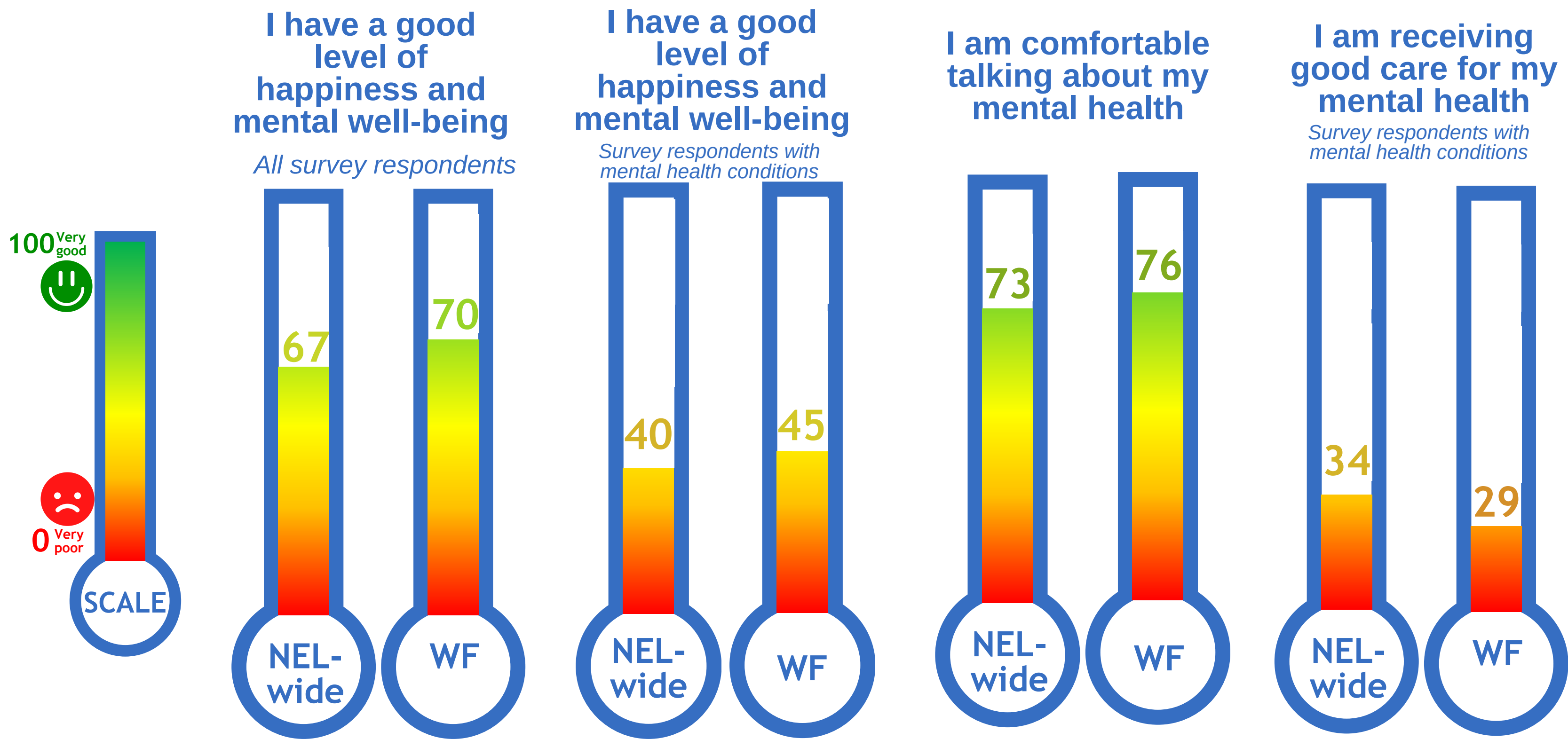
Provide better self-management advice, on an ongoing/ as needed basis. This could include specialist helplines and peer support groups.



Take a more holistic approach/ treat the person not the disease.



Priority: mental health and well-being



Priority: mental health and well-being

The good care model

Accessible

People can access therapy, specialist services (such as an ADHD diagnosis) or other forms of support (such as emotional support groups for mothers or grief counselling) within a reasonable time frame.

Health and care services understand stigma around mental health and difficulties some people may have in seeking help.

Therapy and counselling are available in a variety of community languages.

Competent

Health and care providers, including those not working directly in mental health, understand various mental health conditions and how they can impact access to care.

Health and care providers understand the link between physical and mental health.

Employers, school and community stakeholders have knowledge of how to promote well-being for all at a wider social level.

Person-centred

A variety of evidence-based treatment options are available (for example: multiple types of therapy rather than just CBT)

Health and care services work closely with the wider community to tackle issues such as poverty and social isolation on people experiencing mental health issues.

Mental health is understood in a wider social context, not only from a strictly clinical point of view.

Trustworthy

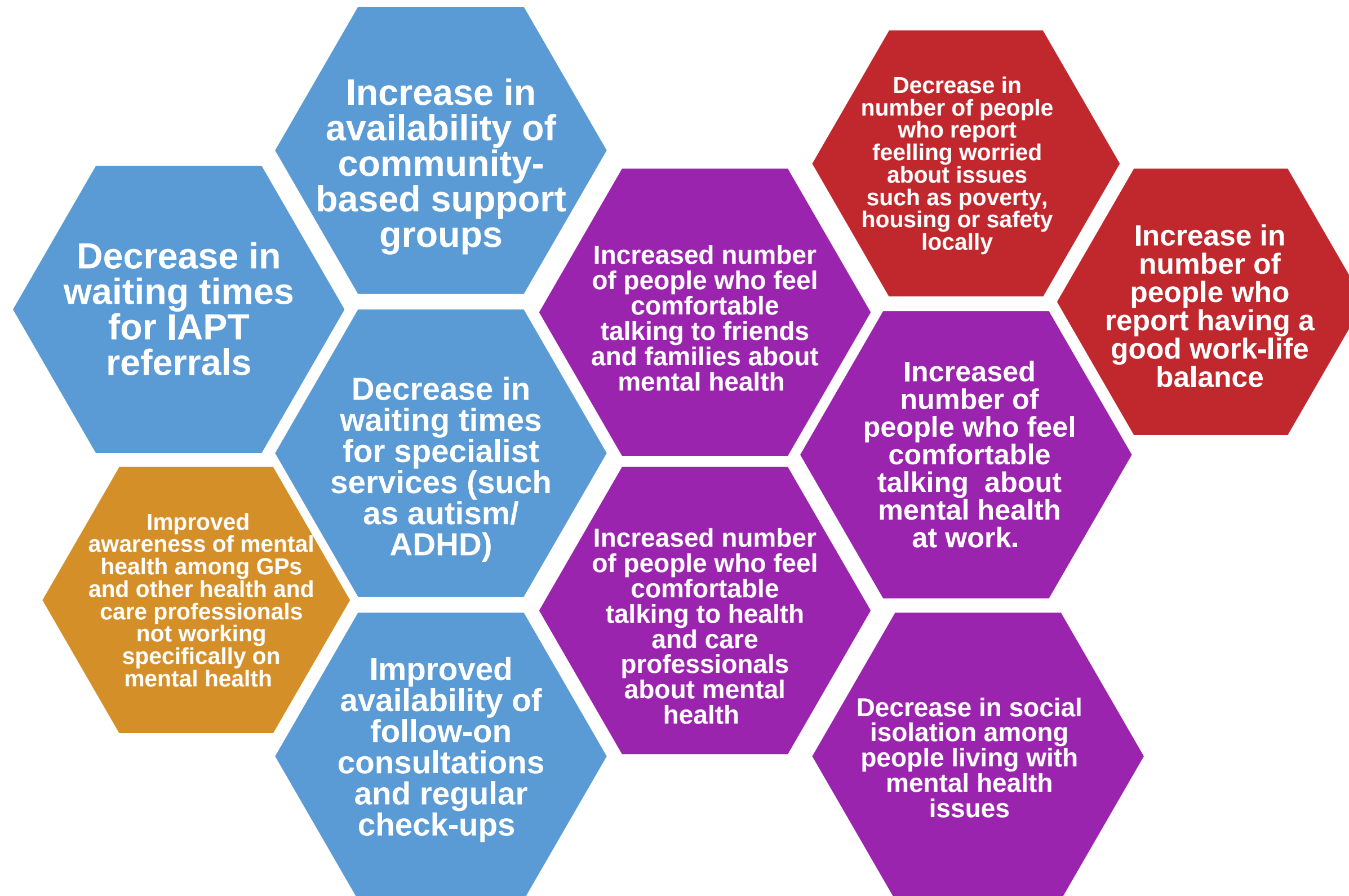
Patients accessing services for mental health are supported long-term in a proactive way; follow-on support is available and routinely offered.

Patients can talk to health and care professionals about their mental health needs without fear of stigma or being dismissed.

Routine health check-ups (for example: for new parents, for people with long-term conditions, for the elderly) include questions on mental health and well-being.

Local people feel comfortable talking about mental health.

How to measure success for mental health and well-being support based on what matters to local people



How care for **mental health and well-being** could be improved in Waltham Forest

- ➔ Reduce waiting lists for diagnosis and therapy.
- ➔ Offer better access to long-term counselling and therapy, for those in need of more than six weeks of CBT; and therapy/counselling options other than only CBT.
- ➔ Increase awareness of mental health among health and care professionals not specialised in mental health (such as GPs, GP reception admin staff, social workers, midwives, pharmacists etc.)
- ➔ Improve access to GPs, particularly to in-person appointments- for people experiencing mental health issues.
- ➔ Improve access to community social and leisure activities for people on low incomes; particularly for older people.
- ➔ Provide targeted support to disabled people and their carers; including both mental health care and practical support. Provide similar targeted support to new parents.

Priority: workforce and employment

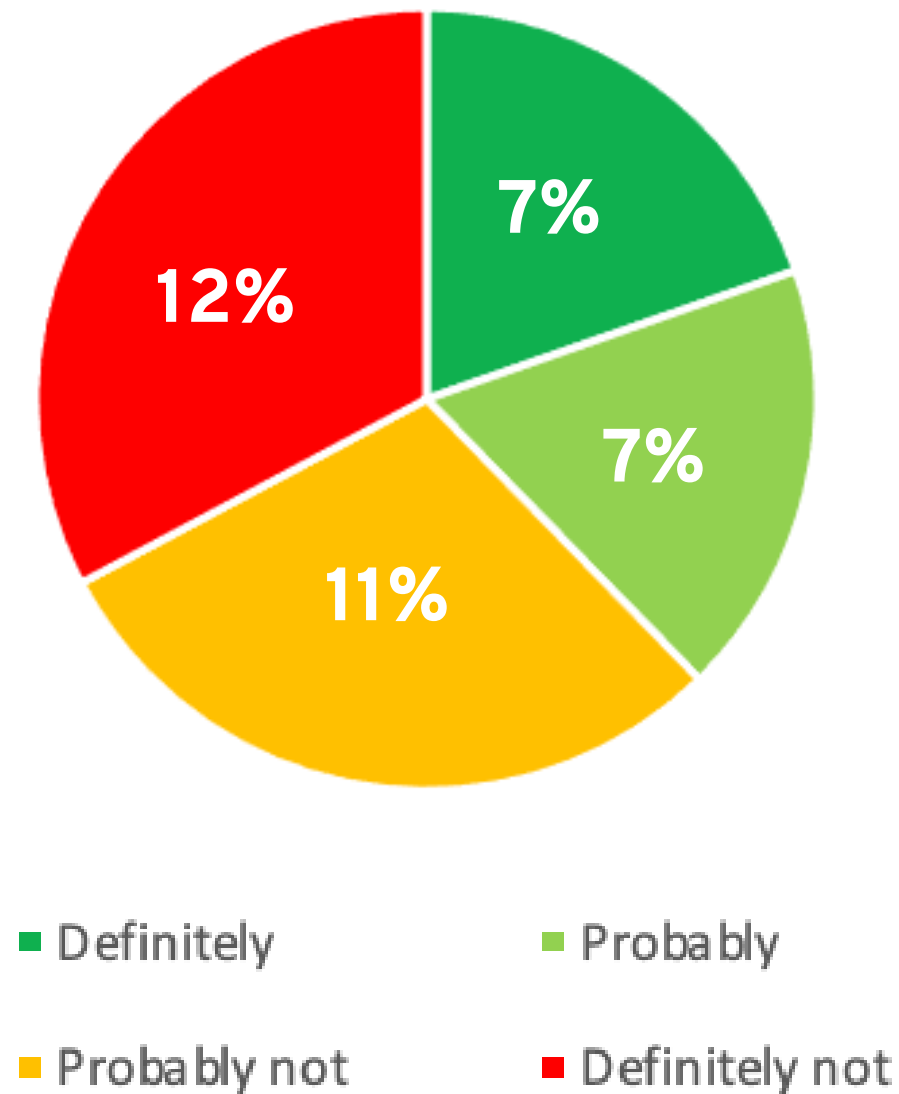
What kind of support would people need for a health or social care career?

- Pathways to training while getting paid (such as apprenticeships); availability of free training; less reliance on volunteering/ unpaid work for gaining experience.
- Mentoring and shadowing opportunities from people with experience in the field; information on qualifications needed for specific jobs; support in matching existing or transferrable skills with job opportunities. Job cafes and open days.
- Work experience in partnership with schools; career advice in schools not exclusively focused on high academic achievers.
- A clear and realistic career progression path; a living wage at entry level.
- Workers having a say in how their workplace is run/ management accountability to workers.
- Better connections with the local community (shops, community centres, faith groups) for advertising jobs, training opportunities and mentoring.
- ESOL training for immigrants with health and care experience in their countries of origin.
- Disability-friendly workplaces, including for those with mental health related disabilities.
- Accommodations for working parents and carers, especially single parents.

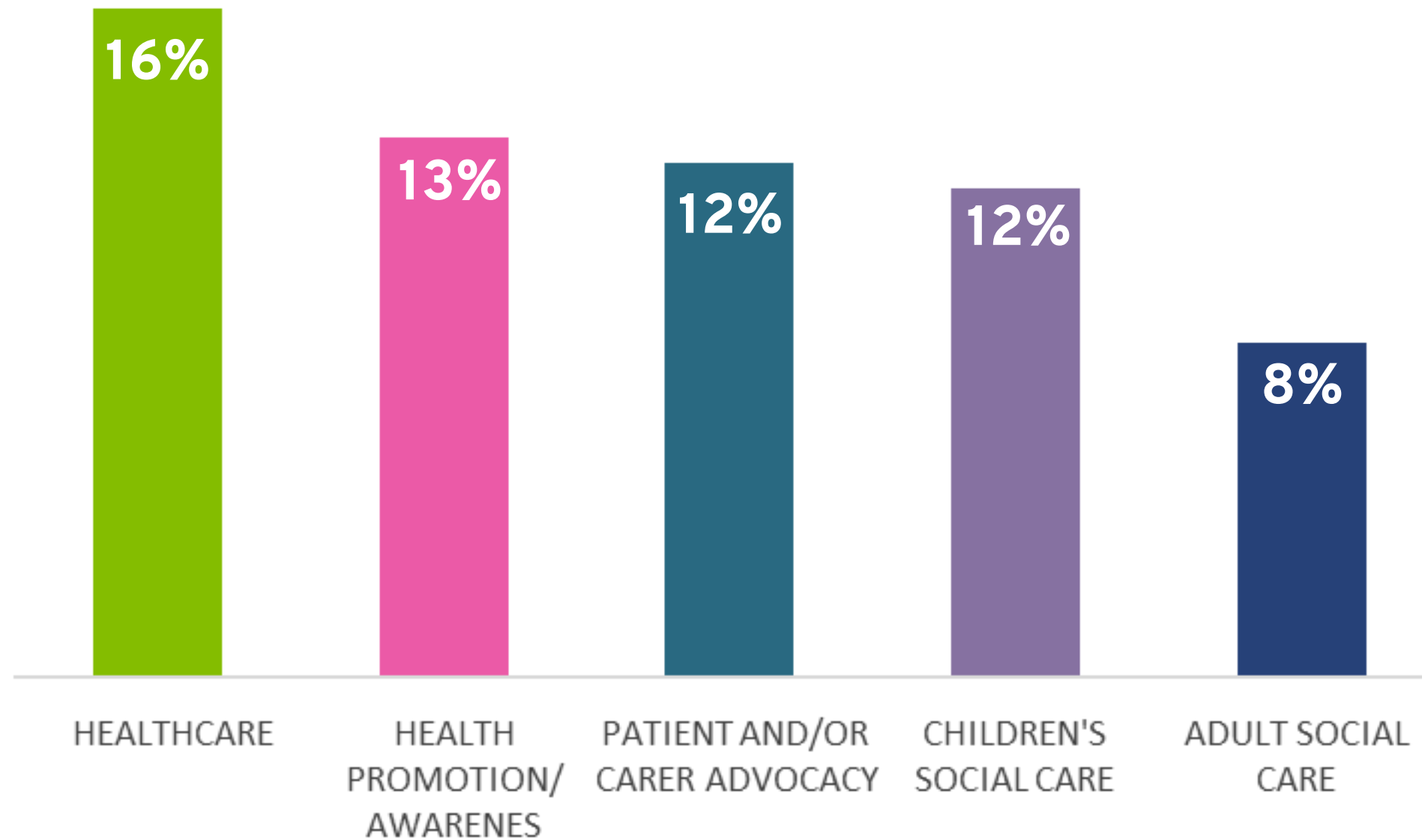
Priority: workforce and employment

Volunteering

More than half of survey respondents would potentially be interested in volunteering locally.



60% of those interested in volunteering would be interested in health and care volunteer work.



Priority: workforce and employment

The good care model

Accessible

People can train/qualify professionally and earn at the same time; entry-level jobs pay a living wage.

Workplaces offer flexibility and adaptations for those who need it (disabled, parents, carers etc.); including those with mental health related disabilities.

ESOL classes are available for those with employable skills from abroad.

The job advertisement and recruitment process is designed with diversity in mind, tackling obstacles faced by under-represented groups.

Competent

Understanding of health inequalities/holistic approaches to health is built into training for all health and care professionals.

Health and care professionals feel supported and empowered to do their jobs to the highest possible standard of quality.

Knowledge is shared through mentoring and shadowing; ; support in matching existing or transferrable skills with job opportunities.

There are comprehensive guidelines about how to qualify for specific professions.

Person-centred

There is a good level of flexibility and work-life balance, to the full extent of what the nature of the job allows.

Schools, universities and training providers work together with employers to train local people in the right skills and connect skilled workers with relevant jobs.

Career advice in schools doesn't focus exclusively on academic high achievers.

Workplaces establish connections with the local community (shops, community centres, faith groups) for advertising jobs, training opportunities and mentoring; jobs are advertised where the community is rather than expecting jobseekers to know where jobs are.

Trustworthy

Workers have a good level of job stability.

There is a clear and realistic career progression path.

People can talk about their needs in the workplace, including their mental health needs, and ask for flexibility or adaptations without fear of discrimination or judgement.

Workers feel appreciated and believe they are making a difference

Priority: workforce and employment

What success would look like



What next