Primary & Community Health Services Community Priority Setting

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Background and Method

The health-care system is facing substantial challenges, which will impact patients' experiences and outcomes

Place-based approaches can complement the assets of the local community

Aims

- Refine the research priorities of the PCHS theme to align with local needs
- Assist locally appropriate understandings of the best ways to support patients, carers/families, and communities in KSS

We used elements of co-production and PCIE: ARC KSS Public Advisors acted as collaborators throughout.

3 x Focus groups, one each for Kent, Surrey & Sussex





Method



Thematic Analysis of transcripts revealed 3 themes with 3-4 sub-themes

Results: Community Priorities

Improving the 'front door' to the NHS

- Accessible and practical <u>booking systems</u>
- Meeting patients' physical accessibility needs
- Consider increase in technology on patient access

"sometimes I waiting on the phone for 45 minutes minimum just to be able to get through to somebody" "I've preferred the Covid way of doing things, with the telephone appointments being more readily available and video appointments being more readily available"

"On a very practical level I registered at a surgery that didn't have wheelchair access. It didn't occur to me that it wouldn't"

Results: Community Priorities

Addressing problems in the health care system

- <u>Funding</u> that meets patient need
- Addressing <u>waiting times</u>
- <u>Relations</u> b/w practitioners and patients
- Mitigating the impact on patients

"...it's not available any more [SLT summer support], it's just got stripped away. So I think there's little things like that that probably were of more value than was maybe realised when the people top down were making these big decisions" "There is that wider systems issue as well ... that actually affects the capacity of the primary care facilities to provide the services that they would normally provide"

"There's a lack of resources and also they don't know where to put older people, where they can get treatments and the support they need"

Results: Community Priorities

Further developing patient-centred care

- Improving engagement by <u>reaching out</u>
- Additional support in <u>alternative settings</u>
- <u>Personalised care</u> and involving with patients/carers in decisions
- Joined up care with services/family/carers

"sometimes services should come to people in their homes, thinking about the references to carers, are they coping? But when [you] see them, the patient in their own home, you may get an idea of whether they are coping"

"It's about creating situations where those different communities and specifically the marginalised groups ... feel comfortable in coming and sharing their opinion and their experiences and the issues that they're facing"

"The voluntary sector has been doing a lot of work, expected to do a lot of work, by the government, by the NHS. But the voluntary sector is, say, disparate and not very well pulled together"

Implications



 Community-led research has the potential to direct limited resources for health research towards a priority or public need



• We anticipate research driven by community priorities will have a bigger impact on patient outcomes



 The resulting themes align to the PCHS sub-themes: sustainable care for marginalised groups, integrated care, leftshifting care, creating a digital eco-system



 Results highlight the need for innovative solutions, an acceptance of **community, place-based** approaches, and **patient-driven** solutions

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Thank you for listening

NIHR Applied Research Collaboration Kent, Surrey and Sussex

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