

**Health and Care Working Together South Yorkshire and Bassetlaw
Hospital Service Review – Community Engagement**

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Summary

South Yorkshire's Community Foundation (SYCF) was tasked with assisting the South Yorkshire and Bassetlaw CCG to ensure that the Hospital Service Review (HSR) takes into account the views of the communities, which often cannot be reached by more traditional engagement approaches. The HSR wanted to take into account the voices of 'seldom heard groups' as defined by the CCG¹.

SYCF as a local grant making organisation, utilised its extensive network of charitable groups and projects to access the communities least likely to typically participate in this type of research. Those included: asylum seekers and refugees, BME communities, young people, young carers, LGBT and the elderly.

In total, 96 individuals from Barnsley, Rotherham, Sheffield and Chesterfield took part in this review. 9 place based focus groups, 2 drop ins and an online survey were conducted in order to reach the desired number of participants.

Research limitations

- Lack of translation of the survey into other languages was found to be the biggest barrier to full engagement. A simplified version of the survey was subsequently created by SYCF and used with non –English speakers and BSL users. The quality of the data gathered has however been affected due to the lack of availability of the survey in the languages spoken by targeted groups.
- Lack of sensitivity around the issues of the seldom heard groups. We had to adapt the gender question to avoid offence of the LGBT community who are likely to not identify themselves as simply 'male' or 'female' and therefore added the options of 'transgender' and 'other' to the survey.
- Lack of institutional trust - the groups often feel like their views are not truly valued and expressed concerns that they were only being asked to 'tick another box'. A Pakistani and Somali women support group said 'We only agreed to do this because it is yourself [SYCF] asking for help'.
- Language and terminology used within the online and paper based survey proved to be problematic, with many individuals struggling to understand some of the question. For example: gastroenterology, national guidelines, required standards and investigations.
- Most of the individuals consulted during this review were highly vulnerable for a variety of reasons. Many were not comfortable with an 'outsider' coming in to speak to them. This was tackled by bringing in project managers familiar to those consulted to sit with them and talk them through everything we were doing, before we started to ask questions.

¹ Seldom Heard definition provided by NHS Involvement 2017: 'Seldom heard' is a term used to describe groups who may experience barriers to accessing services or are under-represented in healthcare decision making. Traditionally, some of the groups identified in engagement activities include rural communities, black and minority ethnic (BME) groups, gypsies and travellers, lesbian, gay, bisexual and transgender, asylum seekers and refugees and young carers. However, in reality, teenagers, employees, people with mental health issues and many others may be considered as seldom heard, due to the fact engagement may not be straightforward.

Research activities

9 place based focus groups took place:

- 4 in Barnsley attended by 33 people
- 4 in Rotherham attended by 27 people
- 1 in Sheffield attended by 3 people

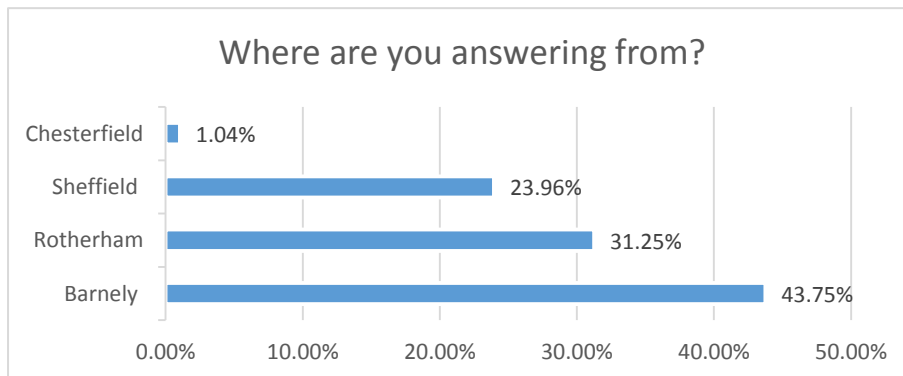
2 drop ins were held:

- 1 in Sheffield attended by 7 people
- 1 in Barnsley attended by 9 people

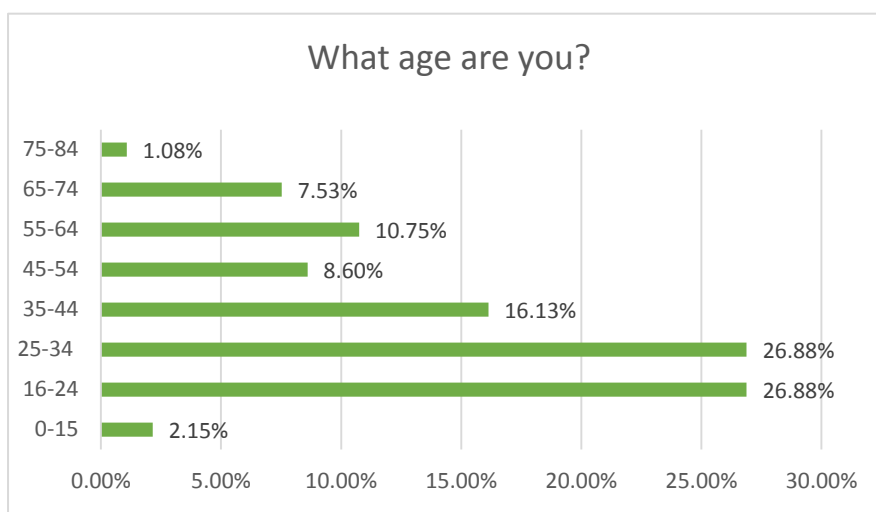
Online survey was completed by 17 targeted individuals

Total = 96

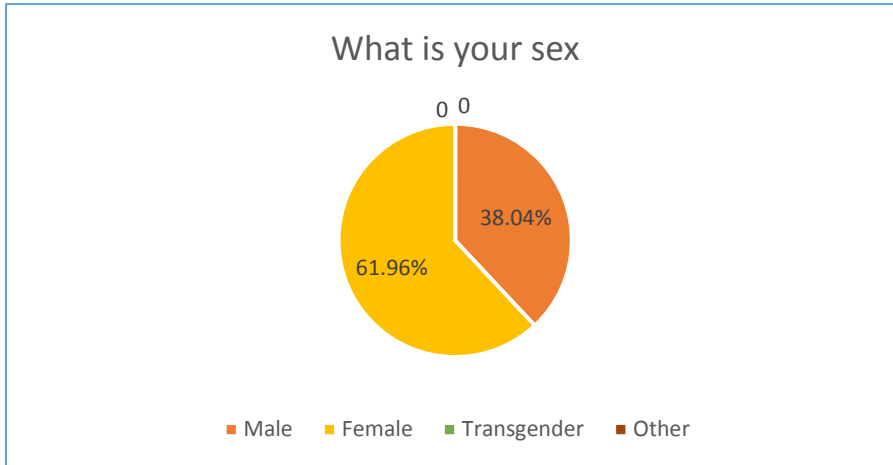
Participant demographic-



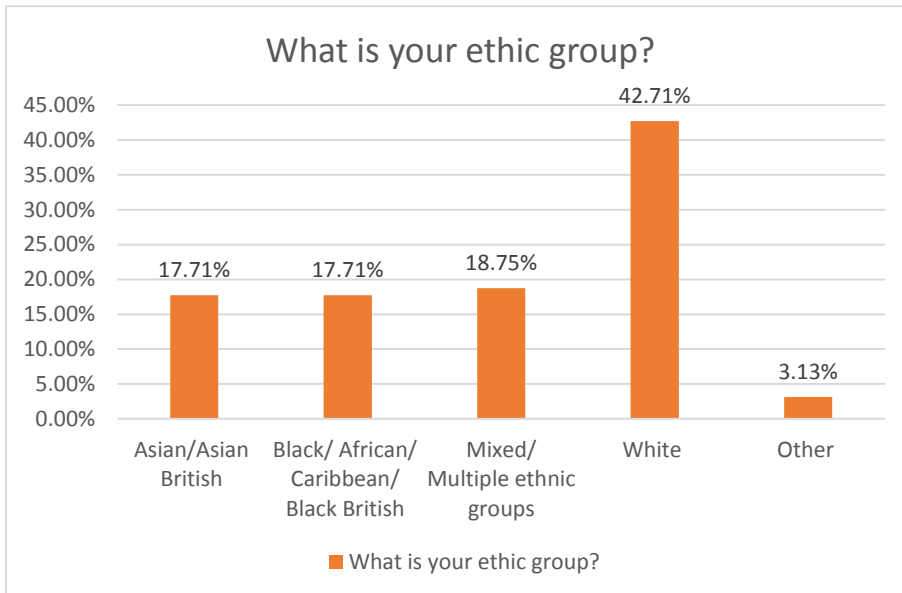
As requested by the CCG we focused our approach on Barnsley and Rotherham, rather than Sheffield. Resultantly the biggest proportion of responses came from those two areas.



We wanted to make sure that young people and vulnerable elderly had the opportunity to contribute to this review. We're pleased to see that the biggest proportion of respondents were between 16-24 and 25-34 years old, with a good representation from the 55+ community.



61% of all respondent were female and 39% were male. We included the options of 'transgender' and 'other' on the 13/11/2017 before send out to an LGBT support group, but only received two responses.



One of toughest goals was to ensure that ethnic minorities were given a voice. Despite the language barriers and difficulty of communication we are pleased to report that over half of all respondents were non-white, and at least 5 of those who selected 'White' we know were non-British.

Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?

Yes, limited a lot – 17.20%

Yes, limited a little – 11.83%

No – 66.67%

Prefer not to say – 4.30%

Results

Common themes in regards to the service as a whole

Overall positives:

- Friendliness, caring nature and professionalism of staff
- Average rating from non-English speakers was 3.3 out of 5

Overall negatives:

- Lengthy waiting times
- Lack of communication of information between staff and patients
- Lack of available interpreters

Common themes in regards to the five specific services researched

Below is a summary of the common themes which emerged from respondents taking part in the survey. Full results for each of the questions can be found in the results transcript in Appendix I.

- 1) **Care during pregnancy and mother-and-baby (Maternity)**
 - More staff members on hand is required
 - Information needs to be passed on effectively so that patients feel well informed
 - Need to ensure a calming and relaxing environment
 - Interpreters on hand for non-English speakers of British Sign Language users (BSL)
- 2) **Care when you need it unexpectedly (Urgent and Emergency Care)**
 - Universal agreement that a reduction of waiting times at A&E is needed
- 3) **Care for poorly children who need a hospital service**
 - Emphasis on creating a calming, safe and secure environment
 - Described by 3 participants as 'A home away from home'
 - Need for a better children's playing area with more toys to keep children happy and occupied while they're waiting to be seen or being treated
- 4) **Care for people who have a stroke**
 - More bed spaces needed so that people can be cared for as long as is needed and not released too quickly
 - Support for the family should be offered and information given to them
 - Better equipment
- 5) **Care for stomach and intestine condition including investigations (Gastroenterology and endoscopy)**
 - Pain relief needs to be administered in a timely manner
 - Not letting patients leave without a full diagnosis and treatment
 - Interpreters for non-English speaker and BSL speakers

All participants were also asked to rate the importance of 11 statements proposed in the online survey (Question 12) and paper survey (Question 6). The results are as follows.

On average all statements apart from one were considered to be 'Very important'. The only statement which on average gained the result of **3.76 out of 5** i.e. in between "Not the most or least important to me" and "quite important to me" was "*That the service does not cost more to run than it currently does*". This question received the highest number of responses "Not at all important to me" (7).

Please note: when talking to participants the understanding was that as this was in relation to the NHS, the higher cost would be incurred by the government not the individuals.

In order of priority (i.e. highest level of importance) the remaining statements were rated as follows:

- 4.71
That ALL people in South Yorkshire and Chesterfield, not just people who live in one part of the area, can see the same level of highly specialised doctors and nurses and have access to the best technology for their care.
- 4.67
That the service provides a wide range of training opportunities for trainees and supports all staff to develop their skills.
- 4.66
That there are enough qualified, permanent staff to run the service safely for patients.
- 4.65
That a service can run safely because the other services that regularly provide additional care around maternity, A&E, stroke, children's or gastroenterology are also provided.
- 4.63
That the care is as good as it national guidance says it should be and how we
- 4.59
deliver the care is as soon as other areas in the country.
- 4.57
That the service can offer care that's not just 9am-5pm Monday to Friday.
- 4.56
That staff, venues and equipment are used in the best possible way so that we aren't wasting valuable staff skills and resources.
- 4.56
That the service can meet required standards on waiting times.
- 4.53
That all patients can get to emergency services within 40 minutes by ambulance.
- 4.46
That the doctors see enough patients to practice their skills regularly.

Please turn to Appendix I for full results.

Further notes from specific demographic groups

The following community organisations helped us to reach seldom heard groups:

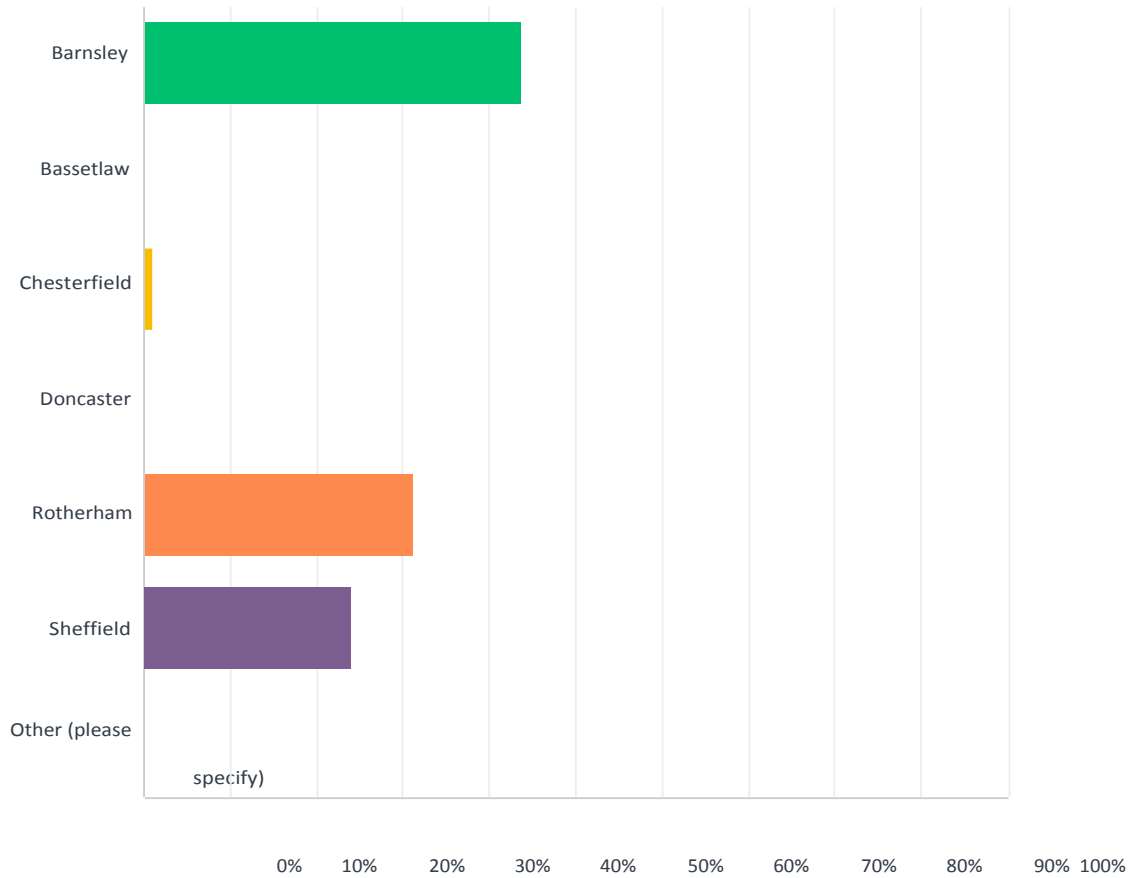
Community Group	Area	Beneficiaries	Further comments
JENGA CIC	Barnsley	Young mothers	Overall positive, concerns over waiting times and lack of doctors/ nurses available.
Refugee Council	Barnsley	Asylum seekers and refugees	The survey being English was described as a “nightmare” by the group organisers. We were told that if we want to know what they really think we need to have interpreters. Further quotes can be viewed in Appendix II Overall, the few who had direct experiences with NHS services, rated it as good.
VAB	Barnsley	Non-English speakers	The opinions voiced in this group we feel were influenced by the ESOL teacher. Language barriers here were the biggest issue and only 5 questions were answered. Some voiced frustrations over troubles getting a GP appointment but overall they wanted good treatment as quickly as possible.
RotherFed	Rotherham	Deaf and mute	Due to length of time it takes for dialogue to be translated into British Sign Language we only asked this group 4 questions. All of them agree that BSL interpreters should be more widely available and direct quotes can be viewed in Appendix II
United Multicultural Centre	Rotherham	Pakistani and Somali women	Biggest concern was lack of interpreter and the level and speed of care received. Sometimes they didn't feel comfortable seeing a male GP by themselves and weren't sure of possibility to bring chaperones. Suggested information leaflets in Urdu and Arabic would be helpful. Majority also concerned about the long waiting times and the harmful consequences of this.
Clifton Learning Partnership	Rotherham	Roma community and wider neighbourhood	Most were happy with the service received but agree it should be easier to get an appointment. Also concerns over the care received by relatives

			who had a stroke i.e. availability of beds and professionalism of home visitors.
The Rainbow Project	Rotherham	LGBT	
Sheffield Futures	Sheffield	Young people	“the survey is too difficult, talks about national guidance and required standard, but I don’t know what these are”
AGE UK	Sheffield	Elderly	

Appendix I – full research data transcript

Q1 Where are you answering from?

Answered: 96 Skipped: 0

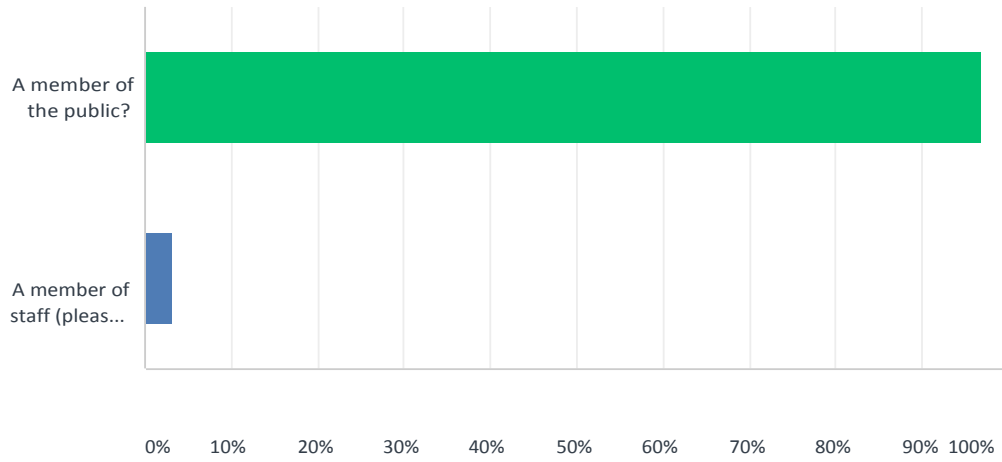


ANSWER CHOICES	RESPONSES
Barnsley	43.75%
Bassetlaw	0.00%
Chesterfield	1.04%
Doncaster	0.00%
Rotherham	31.25%
Sheffield	23.96%
Other (please specify)	0.00%
TOTAL	

#	OTHER (PLEASE SPECIFY)	DATE
	There are no responses.	

Q2 Are you answering as...

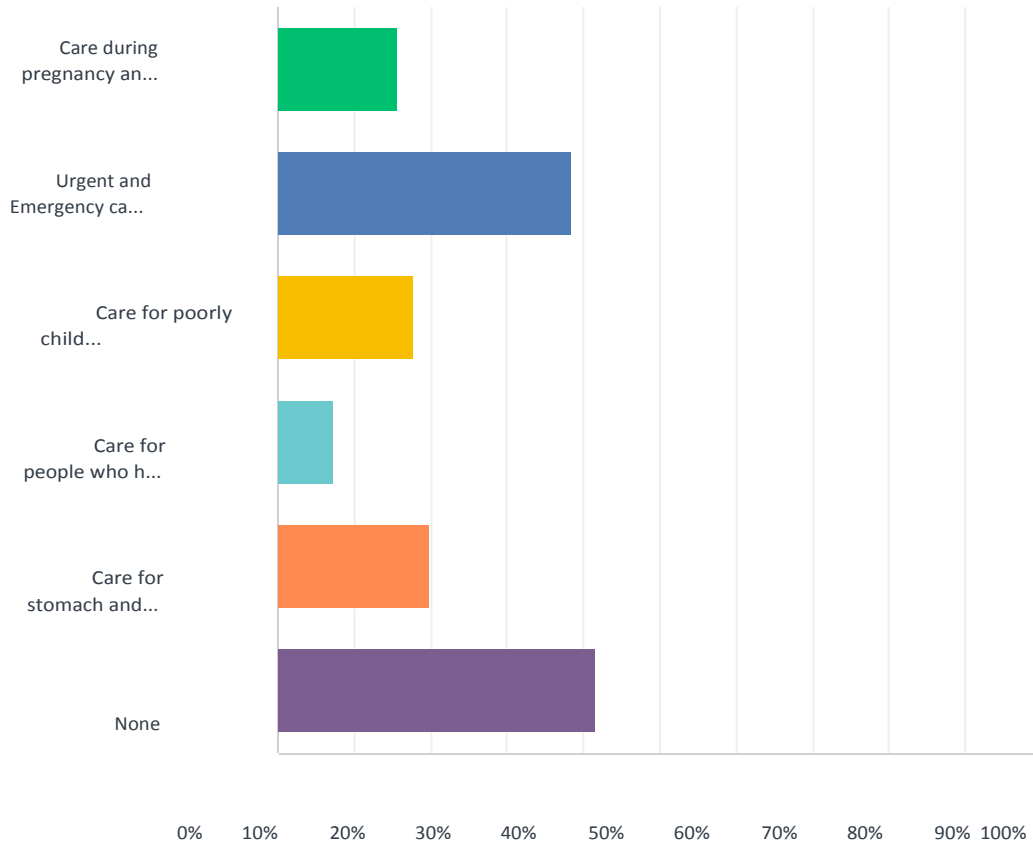
Answered: 96 Skipped: 0



ANSWER CHOICES	RESPONSES	
A member of the public?	96.88%	93
A member of staff (please specify your organisation - your answers will remain anonymous)	3.13%	3
TOTAL		96

Q3 Have you or a member of your family used (or worked in) any of the following services in the last three years? (please tick any that apply)

Answered: 96 Skipped: 0



ANSWER CHOICES	RESPONSES	
Care during pregnancy and for mother-and-baby (Maternity)	15.63%	15
Urgent and Emergency care (care when you need it unexpectedly)	38.54%	37
Care for poorly children who need a hospital service	17.71%	17
Care for people who have a stroke	7.29%	7
Care for stomach and intestine conditions	19.79%	19
None	41.67%	40
Total Respondents: 96		

Q4 Please tell us what made your experience of this service/s good
Some ideas might include: the nurses, doctors and other staff you met; the care you received; how easy it was to get an appointment; the information you were given; your understanding of what would happen next. Also please tell us about anything else that meant you had a positive experience.

Answered: 59 Skipped: 37

#	RESPONSES	DATE
1	My husband was in palliative care unit for 20 days. Wonderful set up. Staff are nice and kind (theoretically). from the very beginning all the facilities which were available they made everything unavailable for my husband	11/18/2017 11:05 PM
2	the care and follow up was very good	11/18/2017 10:44 PM
3	Don't know too much about it yet. My experience of the NHS has been mainly via local GP and dentist. Annual checkups for diabetes and hypertension	11/18/2017 10:28 PM
4	Empathetic conduct which provides active listening to patients.	11/17/2017 4:48 PM
5	when things went well this was due to good medical staff and people being able to understand what was being said to them (ESOL class collective response)	11/16/2017 11:33 AM
6	The quality and well skilled staff. Time, area and people are important when helping patients recover	11/16/2017 11:02 AM
7	Long waiting times in A&E, can be difficult waiting when agitated. Difficult to get to see GP at surgery, appointments not easy to suit. Better on medical/clinical, poor response to mental health crisis care	11/16/2017 10:59 AM
8	Staff were friendly and had time for you even though they were extremely busy. Had to wait but it wasn't too long	11/15/2017 6:41 PM
9	the nurses were very supportive and made me feel safe and secure	11/15/2017 6:38 PM
10	Staff attitude was great. I worked in the NHS and listening to staff and how much they care	11/15/2017 6:32 PM
11	if you are seen by appointment they are good	11/15/2017 5:25 PM
12	rated 3 out of 5	11/15/2017 5:22 PM
13	rated 4 out of 5	11/15/2017 5:18 PM
14	rated 5 out of 5	11/15/2017 4:51 PM
15	very knowledgeable A&E staff, consultant and surgeons	11/15/2017 4:39 PM
16	polite staff	11/15/2017 4:18 PM
17	excellent staff	11/15/2017 4:15 PM
18	its difficult to get an appointment at times and sometimes forever waiting for a referral to be seen	11/15/2017 3:50 PM
19	the care received from the midwife while pregnant was good and when I took my child to hospital the doctor/consultant on duty and nurses were friendly and helpful with information given	11/15/2017 3:46 PM
20	more information need to be given in Urdu and more staff on duty need to speak various languages	
21	Paramedics were amazing on the night trying to do everything that they could, however it took 3 ambulances and car to get the right equipment together. Throughout hospital stay the nurses were fantastic while we had to wait for results and tests to come back/wait for doctors.	11/15/2017 3:38 PM 11/14/2017 5:52 PM

22	rated 5 out of 5	11/14/2017 4:20 PM
23	rated 4 out of 5	11/14/2017 4:18 PM
24	rated 3 out of 5	11/14/2017 4:12 PM
25	n/a	11/14/2017 4:11 PM
26	rated 5 out of 5	11/14/2017 4:06 PM
27	rated 5 out of 5	11/14/2017 4:02 PM
28	n/a	11/14/2017 3:59 PM
29	rated 5/5	11/14/2017 3:58 PM
30	rated 4 out of 5	11/14/2017 3:56 PM
31	rated 3 out of 5	11/14/2017 3:55 PM
32	rated 2 out of 5	11/14/2017 3:32 PM
33	rated 2 out of 5	11/14/2017 3:12 PM
34	rated 2 out of 5	11/14/2017 3:11 PM
35	rated 4 out of 5	11/14/2017 3:09 PM
36	rated 4 out of 5	11/14/2017 3:08 PM
37	rated 2 out of 5	11/14/2017 3:07 PM
38	rated 2 out of 5	11/14/2017 3:05 PM
39	rated 2 out of 5	11/14/2017 3:04 PM
40	rated 3 out of 5	11/14/2017 3:02 PM
41	The service was not good. Rated 1 out of 5!	11/14/2017 3:01 PM
42	Pain management unit: excellent nurses, very caring, doctors explain all procedures and i never feel like I've been rushed	11/14/2017 2:50 PM
43	the staff were very helpful	11/14/2017 2:46 PM
44	they are really friendly	11/14/2017 2:43 PM
45	The people i saw when i gave birth 5 months ago was brilliant they made sure i was OK and made sure everything was OK with my baby	11/14/2017 2:41 PM
46	good	11/14/2017 2:03 PM
47	n/a	11/14/2017 1:54 PM
48	I'm OK with everything, it was perfect	11/14/2017 1:49 PM
49	My own experience of having a sonogram for stomach and intestine problems has always been positive as the staff have been very sensitive about the condition and my comfort. Information and ease of appointments were all good, the doctors carrying out the procedure said that all the team should undergo an endoscopy to see what patients have to go through. My father was taken to A and E at Northern General following a collapse in my house while visiting. The ambulance staff were very good and the doctors at the hospital were very thorough although my mother didn't think she received sufficient information.	11/14/2017 1:39 PM
50	Facilities available after a difficult birth; commitment of staff in different circumstances	11/14/2017 1:26 PM
51	The experience was made positive by the care that all the staff especially the support workers gave	11/11/2017 11:09 AM
52	hospital well signposted easy to find the right wards, well qualified doctors	11/10/2017 5:10 PM
53	Dietician at hospital was very thorough and gave excellent advice. Staff at minor injuries are always friendly.	11/8/2017 10:54 AM
54	Most of the staff very caring, helpful and patient	11/8/2017 8:50 AM

55	Maternity - very good care, midwives and potential staff monitored me through a period of time there were concerns over the baby's growth and then reducing of amniotic fluid - care given was always prompt friendly and professional. Hospital care give at the birth was very good, I was there during a quiet time and had a trainee midwife with me more or less throughout. Emergency - Baby (15 months)	
56	taken by ambulance to Children's A & E. very quick ambulance response, straight through to doctors. Again care given was timely, professional and caring.	
57	I stayed in hospital one week. During the day care was overall good but information given poor. At night care was negligent. After leaving hospital I had one follow appointment and a colonoscopy. I was never given the information I needed and did not get follow on care	
58	managed to see a doctor after 2 and a half hours	11/3/2017 12:50 PM
59	The care I got was good but getting throw to the doctor and waiting is bad	11/1/2017 1:52 PM
59	My son needed treatment for stomach problems which eventually turned out to be stomach ulcers. His doctor was very helpful. After conducting tests, he phoned him at home to say that his condition was very serious and that he had to admit himself into hospital without delay. The doctor phoned my son at around 5 pm and my son admitted himself to hospital for treatment about three hours later and stayed in hospital for one week when his condition improved.	10/31/2017 11:34 PM

Q5 Please tell us if you think there is anything we could have done differently or better. Again you could use the ideas from question 2, but also please tell us about anything else that is important to you or a relative.

Answered: 50 Skipped: 46

#	RESPONSES	DATE
1	Palliative care unit in Northern General Hospital deprived my husband by the brutal instruction of the Senior Registrar there named Hanna so other staff members remained quiet for the sake of their jobs. Registrar instructed not to give food, not to mobile and not to drain fluid from abdomen. with everyday mental abuse, "you're a lying, lying person, do not drink do not eat, you don't need to"	11/18/2017 11:05 PM
2	Perhaps more practical advice, or a group, on how to manage everyday problem. The 'Would you recommend this hospital text was annoying: text only, no permission; no email alternative, or post; too early in the process would have been better at patient discharge.	11/18/2017 10:44 PM
3	Better public information via community groups etc	11/18/2017 10:28 PM
4	I have experienced assumptions from professionals regarding my sexual orientation.	11/17/2017 4:48 PM
5	Language interpreters would be helpful, either by volunteer interpreters or via the telephone, as many people don't understand English well enough. More signage (e.g. drawings rather than word if possible for non-English speakers) around the hospital so people can find their way more easily. (ESOL class collective response)	11/16/2017 11:33 AM
6	Adolescent urgent mental health care needs to be there at the very time of need not 2 or 3 months later when the problem has escalated.	11/16/2017 11:18 AM
7	see the patients as soon as possible especially when they need attention the most	11/16/2017 11:02 AM
8	Not geared up for mental health emergencies. As a carer it is very hard to cope sometimes as hospital staff not very aware of needs. No real emergency, quality crisis care should be available. On general issues much better. Not always a good response from all GPs very inconsistent response	11/16/2017 10:59 AM
9	rounds of tea and food took a long time and seeing a doctor	11/15/2017 6:38 PM
10	bad managers	11/15/2017 6:32 PM
11	long delays at A&E, went in with my grandson as he had mouth sores, was able to eat and needed antibiotics. We were simply told to keep doing what we were doing and come back in 7 days. my grandson was struggling with pain and we wished they had given us antibiotics during the first appointment	11/15/2017 5:25 PM
12	Waiting times are too long. My son was taken to hospital by ambulance during the holidays and we had no way of getting back as there was no buses or taxis.	11/15/2017 5:22 PM
13	Waiting times with a child are too long. There's nowhere to breast feed a baby in the waiting area. I was there for 6 hours and couldn't comfortably feed my baby who was getting uncomfortable and impatient. My dad has a stroke and the carers weren't very empathetic or pleasant On maternity ward when I was giving birth I felt like I had to always ask them lots of questions because no one was telling me anything	11/15/2017 5:18 PM
14	great delay, 12 hours waiting	11/15/2017 4:43 PM
15	A great delay in being treated for sepsis. Late administration of IV drugs and great delay in given morphine. I nearly lost my life	11/15/2017 4:39 PM
16	I was only given gas and air during labour on the labour ward, I was given pain relief after many many hours after consultant saw me	11/15/2017 4:32 PM
17	my child was given 6 hours to wait, then further 8 hours to wait, we eventually went home	11/15/2017 4:27 PM
18	i had a stroke i was sat waiting for a few hours uncomfortable seating, not anywhere to lie down or rest	
19	great delay at A&E 12-16 hours delays, more doctors consultant needed, bad lighting, bad seating,	
20	cramped conditions	

21	I have an ulcer in stomach and my dr/gp has not treated me as I wait for hospital to treat me. I am suffering pain, illhealth as I wait for hospital appointment	11/15/2017 4:08 PM
22	quick service, available to be seen sooner	11/15/2017 3:50 PM
23	I think the play area for children there should be more toys to play with while waiting to be seen	11/15/2017 3:46 PM
24	as mentioned above	11/15/2017 3:38 PM
25	Kept family informed of everything	11/14/2017 5:52 PM
25	rated 5 out of 5	11/14/2017 4:04 PM
26	BSL interpreters	11/14/2017 3:12 PM
27	BSL interpreters	11/14/2017 3:11 PM
28	BSL interpreters	11/14/2017 3:08 PM
29	BSL interpreters	11/14/2017 3:07 PM
30	BSL interpreters	11/14/2017 3:05 PM
31	BSL interpreters	11/14/2017 3:04 PM
32	BSL Interpreters	11/14/2017 3:02 PM
33	BSL Interpreters	11/14/2017 3:01 PM
34	Fracture clinic: service very poor, long waiting times, never get to see the same doctor so always have to give explain my history every time. I feel uses a lot of time on my history rather than exploring procedures that are going to be done	11/14/2017 2:50 PM
35	i had to wait a very long time to be seen. then at half 9 at night was sent to a different hospital to get my lip sewn up by a cosmetic surgeon as there wasn't one available in the other hospital	11/14/2017 2:46 PM
36	get more doctors and nurses in so you are not waiting as long in A&E	11/14/2017 2:43 PM
37	Nothing really, everyone was really friendly and helpful.	11/14/2017 2:41 PM
38	sometimes it take a long time to get an appointment. My son has Mediterranean Fever. but he has to wait a long time for a GP/hospital appointment	11/14/2017 2:03 PM
39	I think it is better	11/14/2017 1:57 PM
40	n/a	11/14/2017 1:54 PM
41	none	11/14/2017 1:49 PM
42	My mother in law had a couple of mini strokes. she was confused about what was happening and my sister in law had to ask several times about it. The main concern for my father and mother in law was that wards they were staying in over night were distressing and didn't get much sleep because of the noise. Also, waiting for long periods of time before seeing the doctor on the day of release is upsetting and disruptive.	11/14/2017 1:39 PM
43	n/a	11/14/2017 1:26 PM
44	Their would be nothing you could have done better other than give the staff the money and recognition they deserve	11/11/2017 11:09 AM
45	the attitude of reception staff has a big impact on the patient and there well being. It is important to be as welcoming and inviting to each person as possible to help them feel more at ease	11/10/2017 5:10 PM
46	A&E is distant and inaccessible. Staff often seem distant and uncaring	11/8/2017 10:54 AM
47	Sadiy, this government is determined to destroy, dismantle and sell off our NHS. Since Brexit referendum, we are not going to have enough staff (of all levels and training). Already can see the difference	11/8/2017 8:50 AM
48	Maternity - not seen a lot by the midwife as it was my second baby. It seemed very long between check ups, although at one of the check ups issues were identified and I was referred to the hospital straight away, After the birth, they forgot to give me my toast and drink but it was a change over of staff and I went home pretty soon after the birth is that wasn't that big of a deal (although I was rather hungry as had not eaten during the day of the birth!)	11/7/2017 11:11 AM
49	Not have wards where at night all staff are agency staff. This was a pre theatre ward. Offer patients opportunity to ask questions For different venues like hospital, gp, to communicate better	11/6/2017 7:53 AM
50	completely different system where access to health advice is available within a week. After diagnosis more information on the illness, the ability to speak to a health practitioner to discuss any concerns would be highly recommended and should be available as a matter of course	11/3/2017 12:50 PM

Q6 In your opinion what would be the most important thing we could do to make care during pregnancy and for mother-and-baby (Maternity) the best it could be?

Answered: 29 Skipped: 67

#	RESPONSES	DATE
1	n/a	11/17/2017 4:48 PM
2	No one had anything to say about this (ESOL class collective response)	11/16/2017 11:33 AM
3	Pregnant women are most likely to fall ill, giving them best quality care could prevent this. Do regular check up etc.	11/16/2017 11:02 AM
4	not sure	11/16/2017 10:59 AM
5	not keep them waiting all day and check records properly so you don't give wrong medication	11/15/2017 6:45 PM
6	reassuring the mother and always being there for her and the baby	11/15/2017 6:38 PM
7	keep close contact with the family, make a good bond with mum so she feels comfortable	11/15/2017 6:29 PM
8	do it carefully and thoroughly with a polite attitude	11/15/2017 6:25 PM
9	make it more comfortable for people who need to stay in	11/15/2017 5:22 PM
10	keep people informed all the way through	11/15/2017 5:18 PM
11	interpretation, kind caring staff	11/15/2017 4:32 PM
12	more doctors and midwives	11/15/2017 4:27 PM
13	interpreters, labour ward, friendly maternity staff	11/15/2017 4:15 PM
14	more exercise classes for pregnant women and more awareness of pregnancy	11/15/2017 3:46 PM
15	a home from home. Make them both feel safe and secure, as it is the baby's first home and would need soft and warm things.	11/14/2017 2:56 PM
16	that mother and baby are OK, food needs to be out quicker	11/14/2017 2:41 PM
17	Constant access to the services needed (24 hrs)	11/14/2017 2:13 PM
18	I don't know	11/14/2017 2:06 PM
19	Provide more information about health and hospital services available	11/14/2017 1:49 PM
20	No idea. I was happy with the service when I gave birth at Bartsley Hospital	11/14/2017 1:46 PM
21	more staff to support during pregnancy and during birth and for mother and baby	11/14/2017 1:30 PM
22	more staff	11/14/2017 1:26 PM
23	Ensure parents and families are support throughout the process and ensuring that parents feel reassured throughout any difficulties	11/11/2017 11:09 AM
24	Ensure the wards is very clean and tidy, the walls and environment are calm and relaxing. Ensure there are separate wards for the louder nosier babies so they don't stress out other families.	11/10/2017 5:10 PM
25	Effective communication with mother at each stage about what's happening and her rights	11/8/2017 10:54 AM
26	See above. Keep NHS public and nationalised	11/8/2017 8:50 AM
27	Ability to see midwives/health care workers frequently during that time either through drop in/ arrange appointments. I do think this is already good, but maybe more appointments for mothers not having their first baby.	11/7/2017 11:11 AM
28	Listen to the patient	11/6/2017 7:53 AM
29	no idea	11/3/2017 12:50 PM

Q7 In your opinion what would be the most important thing we could do to make care when you need it unexpectedly (Urgent and Emergency Care) the best it could be?

Answered: 43 Skipped: 53

#	RESPONSES	DATE
1	simplification on where to phone or go, based on symptoms not diagnosis	11/18/2017 10:44 PM
2	Ensure open communication, to discuss time delays etc. This would provide reassurance.	11/17/2017 4:48 PM
3	waiting times need to be shorter. There should be security at certain times due to the number of drunken patients, who often behave badly. (ESOL class collective response)	11/16/2017 11:33 AM
4	Locally available. Staff to give the care!!!	11/16/2017 11:18 AM
5	more staff if required	11/16/2017 11:02 AM
6	cut waiting times and ensure when you do see someone they are the right person with the right skills	11/16/2017 10:59 AM
7	to be nicer and not to be waiting all day	11/15/2017 6:45 PM
8	better facilities in waiting areas	11/15/2017 6:41 PM
9	have someone who comes around and checks on the patients	11/15/2017 6:38 PM
10	quicker seeing times	11/15/2017 6:32 PM
11	contact family if needed	11/15/2017 6:29 PM
12	shorter time frames of response and the same as above	11/15/2017 6:25 PM
13	reduce waiting times	11/15/2017 5:22 PM
14	reduce waiting times	11/15/2017 5:18 PM
15	consultant asap	11/15/2017 4:32 PM
16	see them quickly, more comfortable seats, beds sooner, more doctors	11/15/2017 4:27 PM
17	more beds, comfortable seating	11/15/2017 4:18 PM
18	cut waiting times urgently, administer medication sooner	11/15/2017 4:12 PM
19	cut waiting times	11/15/2017 4:08 PM
20	when a child is unwell we should be able to be seen as soon as instead of waiting	11/15/2017 4:03 PM
21	more people on service so its quicker to be seen	11/15/2017 3:50 PM
22	more staff on duty and if possible everyone should be able to be aware of basic first aid at home	11/15/2017 3:46 PM
23	shouldn't have to wait for a long time to be seen	11/15/2017 3:38 PM
24	Keep patient informed/not waiting around to worry	11/14/2017 5:52 PM
25	Make sure that the supplies needed are always stocked up and ready when needed.	11/14/2017 2:56 PM
26	making sure time is taken to fix a broken ieg instead of rushing things and making future problems	11/14/2017 2:50 PM
27	Have more staff working and have someone in for every emergency possible	11/14/2017 2:46 PM
28	get more doctors and nurses in so you don't have to wait as long	11/14/2017 2:43 PM
29	they need to concentrate on one person and be quicker getting people in and out	11/14/2017 2:41 PM
30	trained doctors available 24hrs not nurses. reduced waiting times	11/14/2017 2:13 PM
31	Make it easy service and faster	11/14/2017 2:06 PM
32	Updating the patient and family on a regular basis of the situation	11/14/2017 1:39 PM
33	more staff and quicker waiting times	11/14/2017 1:30 PM
34	Ensure that the services are available and easily accessible when needed	11/11/2017 11:09 AM

35	have more staff on board the team so patients are not waiting hours to be seen when it should be emergency car. revise the waiting area system to a more inclusive one so patients no what is happening when they are sitting down and don't feel left.	11/10/2017 5:10 PM
36	Bedside manner. At least give the impression of caring about a patient.	11/8/2017 10:54 AM
37	See above	11/8/2017 8:50 AM
38	Not sure - my experience was very good.	11/7/2017 11:11 AM
39	Treat you promptly	11/6/2017 7:53 AM
40	outsource the services to most western european countries where the services are of a much higher quality and not under resourced	11/3/2017 12:50 PM
41	Quick waiting times	11/1/2017 3:22 PM
42	Tell you over the phone what medication you need or if you haven't got it go to hospital and get seen	11/1/2017 1:52 PM
43	My son's doctor was fantastic in the manner that he contacted my son. The consequences would have been serious had he not done so. I cannot ask for anything better and I'm full of praise for this doctor	10/31/2017 11:34 PM

Q8 In your opinion what would be the most important thing we could do to make care for poorly children who need a hospital service the best it could be?

Answered: 33 Skipped: 63

#	RESPONSES	DATE
1	in general, involve relatives and friends in the care where possible	11/18/2017 10:44 PM
2	Appropriate support for parents and care givers to ensure they can provide a sufficient system support to their children	11/17/2017 4:48 PM
3	It would be good if parents could stay with their poorly children, if children could stay with their poorly parents (ESOL class collective response)	11/16/2017 11:33 AM
4	Staffing and immediate availability.	11/16/2017 11:18 AM
5	they probably need passporting through	11/16/2017 10:59 AM
6	make them feel at home	11/15/2017 6:45 PM
7	ensuring family can stay with them	11/15/2017 6:41 PM
8	making them feel comfortable and safe and have lots of people taking care of them	11/15/2017 6:38 PM
9	friendly environment	11/15/2017 6:32 PM
10	as home like as possible. Things should still be fun	11/15/2017 6:29 PM
11	no discrimination, equality for all, no personal grudges	11/15/2017 6:25 PM
12	create a designated feeding area	11/15/2017 5:18 PM
13	toys, a place to lie down, soft comfortable seating	11/15/2017 4:32 PM
14	a bed, attend to them earlier, more doctors	11/15/2017 4:27 PM
15	good treatment, activities	11/15/2017 4:15 PM
16	the same as above and more toys for children to play with in play area	11/15/2017 4:03 PM
17	same again	11/15/2017 3:50 PM
18	more staff on duty and playing equipment for children to play	11/15/2017 3:46 PM
19	more staff on duty should have quick service	11/15/2017 3:38 PM
20	if children are ill and won't be getting better make them comfortable in their surroundings and you could get a children's entertainer or organiser to do activities with them to keep them busy.	11/14/2017 2:56 PM
21	good service	11/14/2017 2:50 PM
22	follow up offered every time	11/14/2017 2:13 PM
23	Don;t put them in queues or waiting for long	11/14/2017 2:06 PM
24	as above and creating a calming environment for children whilst they are at the hospital	11/14/2017 1:30 PM
25	Make sure all children and young people feel safe and secure with reassurance and care aswell as ensuring that families are able to be with their children and understand what's happening along the way	11/11/2017 11:09 AM
26	ensure the walls and environment are appropriately fitting for children, keep various fun toy in the area so they don't get board	11/10/2017 5:10 PM
27	Effective communication with parents about what is happening at each stage	11/8/2017 10:54 AM
28	As above	11/8/2017 8:50 AM
29	Enough hospital staff to be seen quickly.	11/7/2017 11:11 AM
30	Have specialist staff	11/6/2017 7:53 AM
31	don't know	11/3/2017 12:50 PM
32	Get more doctor and nurses	11/1/2017 1:52 PM

Q9 In your opinion what would be the most important thing we could do to make care for people who have a stroke the best it could be?

Answered: 33 Skipped: 63

#	RESPONSES	DATE
1	perhaps advice the helpful information like what to expect	11/18/2017 10:44 PM
2	Communication and person centered approach	11/17/2017 4:48 PM
3	Give the public more information about the signs of stroke and what we should or shouldn't do if we see someone with these signs (ESOL class collective response)	11/16/2017 11:33 AM
4	Local Stroke specialist emergency and after care and therapies.	11/16/2017 11:18 AM
5	after care critical to ensure a fuller recovery, need attention immediately before any discharge	11/16/2017 10:59 AM
6	make them feel welcome and at home and listen to them	11/15/2017 6:45 PM
7	have comfortable beds and someone who is reassuring and have someone who keeps checking on them	11/15/2017 6:38 PM
8	personalised support	11/15/2017 6:32 PM
9	allow family to stay close	11/15/2017 6:29 PM
10	to understand the signs and know how to handle the situation	11/15/2017 6:25 PM
11	polite house visitors, more places in hospital so that people are not being sent home too soon	11/15/2017 5:18 PM
12	cut waiting times	11/15/2017 4:43 PM
13	a bed, xray sooner, tests sooner, treatment	11/15/2017 4:32 PM
14	a bed, more doctors	11/15/2017 4:27 PM
15	beds, warmth	11/15/2017 4:18 PM
16	more beds	11/15/2017 4:15 PM
17	cut waiting times	11/15/2017 4:12 PM
18	more doctors, more beds	11/15/2017 4:08 PM
19	better equipment and more staff on duty, more training required	11/15/2017 3:50 PM
20	better equipment and more staff needed on duty	11/15/2017 3:46 PM
21	if it's impossible for them to speak you could have some paper and pen and that way or if not you could try and communicate with sign language	11/14/2017 2:56 PM
22	talk to family more and explain	11/14/2017 2:50 PM
23	trained doctors available at all times, signposting with regards to next steps, available to family members and patients.	11/14/2017 2:13 PM
24	I don't know	11/14/2017 2:06 PM
25	as above	11/14/2017 1:39 PM
26	Employ more staff and ensure wards have the correct equipment to help with patients who have lost mobility, speech or movement due to the stroke. Also ensuring that there are enough rehabilitation bed spaces	11/11/2017 11:09 AM
27	ensure they are treated with proper care not left or forgotten once medication has been given	11/10/2017 5:10 PM
28	Effective communication with patient about what is happening at each stage	11/8/2017 10:54 AM
29	As above	11/8/2017 8:50 AM
30	Enough hospital staff to be seen quickly	11/7/2017 11:11 AM
31	Have follow up care and not leave it to family	11/6/2017 7:53 AM
32	outsource to germany much better care and services	11/3/2017 12:50 PM

Q10 In your opinion what would be the most important thing we could do to make care for stomach and intestine conditions including investigations (Gastroenterology and endoscopy) the best it could be?

Answered: 26 Skipped: 70

#	RESPONSES	DATE
1	in mine and my husbands experience of investigations and endoscopy were done with proper explanation before, during and after with great care and cancer detected	11/18/2017 11:05 PM
2	more customer feedback at point of service	11/18/2017 10:28 PM
3	n/a	11/17/2017 4:48 PM
4	No one had anything to say about this (ESOL class collective response)	11/16/2017 11:33 AM
5	Enough qualified staff and availability early detection.	11/16/2017 11:18 AM
6	not sure	11/16/2017 10:59 AM
7	by seeing/finding out what's wrong and not leaving without knowing what's wrong for months	11/15/2017 6:45 PM
8	don't discharge them straight away if you don't find the problem try and find alternatives and try and keep the patient calm and in less pain	11/15/2017 6:38 PM
9	support pre and post procedure	11/15/2017 6:32 PM
10	make hospital appointment as quick as possible	11/15/2017 6:29 PM
11	do it carefully and thoroughly and to the best of your ability	11/15/2017 6:25 PM
12	pain relief, we need more doctors	11/15/2017 4:27 PM
13	interpreters/translators	11/15/2017 4:12 PM
14	start treatment when requirement/ pain relief	11/15/2017 4:08 PM
15	better equipment to have a look at what's going on inside the stomach	11/15/2017 3:50 PM
16	better equipment to have a look inside the stomach and staff need to care more and be gentle	11/15/2017 3:46 PM
17	good service	11/14/2017 2:50 PM
18	I don't know	11/14/2017 2:06 PM
19	My experience was very good	11/14/2017 1:39 PM
20	Helping people retain their dignity as much as possible	11/14/2017 1:30 PM
21	Thorough investigation of patients with longstanding or complex complaints, before writing it off as 'just IBS'.	11/8/2017 10:54 AM
22	See above	11/8/2017 8:50 AM
23	Enough hospital staff to be seen quickly, small waiting times for appointments.	11/7/2017 11:11 AM
24	Give information and advice and enable patients to feel supported	11/6/2017 7:53 AM
25	outsource to Sweden and Norway to provide services much better	11/3/2017 12:50 PM
26	My son, because he's an adult discharged himself when he thought he felt better. This was against the family's wishes and medical advice. I wish hospitals had the power to override a patient's decision to discharge themselves if medical opinion is against self discharge.	10/31/2017 11:34 PM

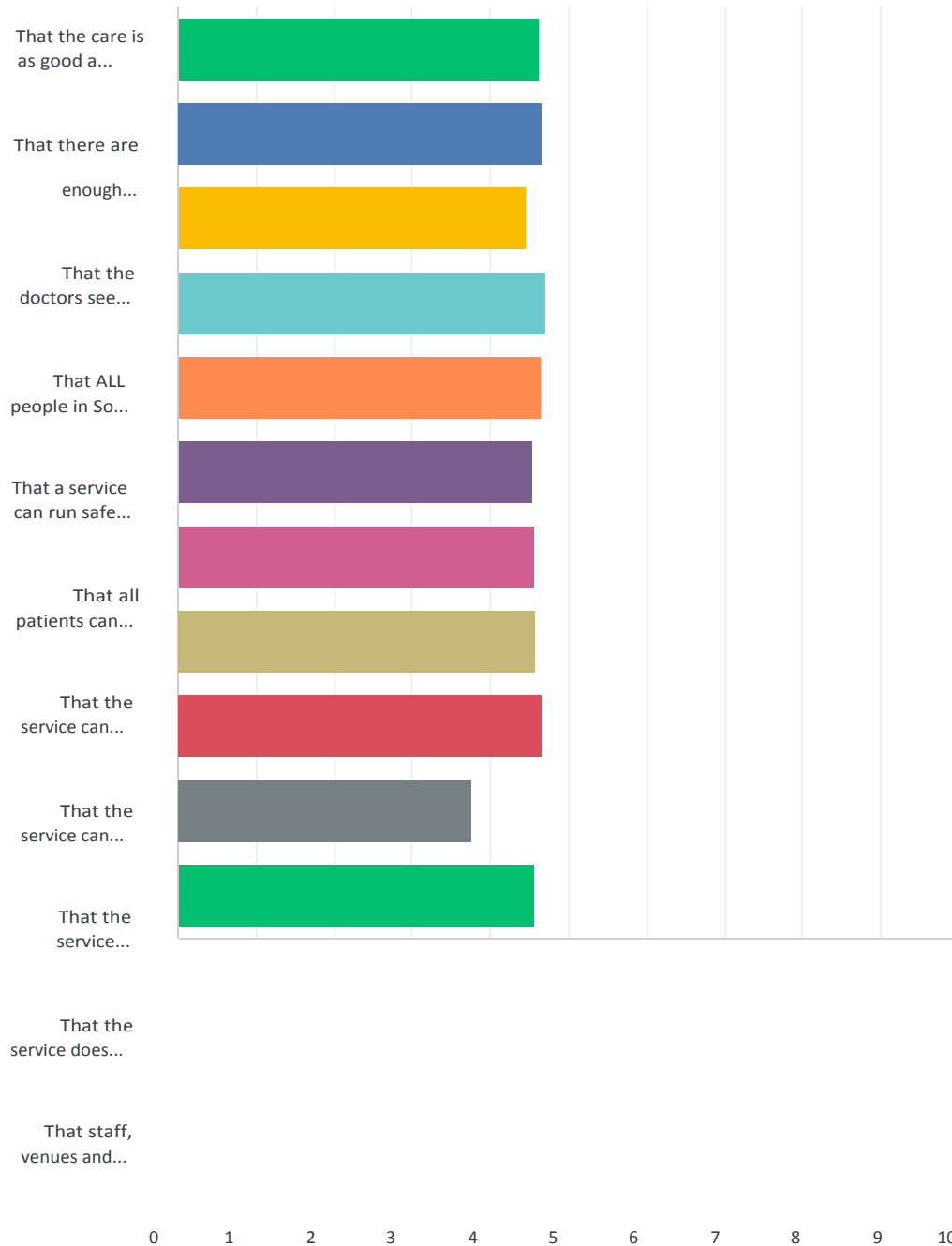
Q11 Have you had or seen any examples of excellent care anywhere else? If so please tell us about it:

Answered: 23 Skipped: 73

#	RESPONSES	DATE
1	Liverpool Royal Hospital	11/18/2017 10:44 PM
2	No, but very probably exists	11/18/2017 10:28 PM
3	None	11/17/2017 4:48 PM
4	In most countries, private healthcare is far superior to public healthcare which suffers from lack of resources. Private care is costly, however. One learner said that in Hungary in a public hospital it took 5 days to see a GP, then just 5 days to see a specialist, then around 5 days to have his knee operation, which was done well and it was not private but free healthcare. (ESOL class collective response)	11/16/2017 11:33 AM
5	Sadly no.	11/16/2017 11:18 AM
6	Pool Hospital Stroke Services good. Poor though after discharge, no speech support after first few weeks of discharge	11/16/2017 10:59 AM
7	CF UNIT	11/15/2017 6:45 PM
8	no	11/15/2017 6:32 PM
9	Fitzwilliam Ward, Rotherham	11/15/2017 4:39 PM
10	Northern General Hospital	11/15/2017 4:32 PM
11	Chesterman Wing, Sheffield Northern General	11/15/2017 4:15 PM
12	Fitzwilliam Ward Rotherham General Hospital	11/15/2017 4:12 PM
13	surgeon was excellent	11/14/2017 2:46 PM
14	i visit Sheffield Hallam teaching hospital 4 weekly for Tysabri infusions for my Multiple Sclerosis. The staff there remember patients by name and have excellent customer relations. They answer questions where possible and signpost if they aren't qualified to answer.	11/14/2017 2:13 PM
15	Barnsley	11/14/2017 1:56 PM
16	SUDAN	11/14/2017 1:54 PM
17	In Egypt, it was a private pregnancy service.	11/14/2017 1:49 PM
18	My family live near Adderbrookes Hospital in Cambridge, On the few occasions they needed emergency treatment they didn't have to wait too long and the follow up treatment needed were done quickly and my family were kept informed and treated well.	11/14/2017 1:30 PM
19	CFS/ME clinic in Nether Edge. They make every effort to be as accommodating and accessible as possible to their patients, taking into account the difficulties they face. They are proactively helpful, offering help and support. They are validating and empathetic to a patient community that often faces skepticism in the medical community.	11/8/2017 10:54 AM
20	n/a	11/7/2017 11:11 AM
21	No	11/6/2017 7:53 AM
22	no I have not and that is the problem with health services	11/3/2017 12:50 PM
23	I had very good surgery at The Royal Hallamshire Hospital last year in November on my hydrocell. The only downside to the successful surgery was that I was discharged on the same day because of lack of bed space when I was in excruciating pain.	10/31/2017 11:34 PM

Q12 When all the options are put forward we will need to rate them. We will look all the options and consider which aspects people feel are important (these are listed below). Please could you tell us how important the following are to you:

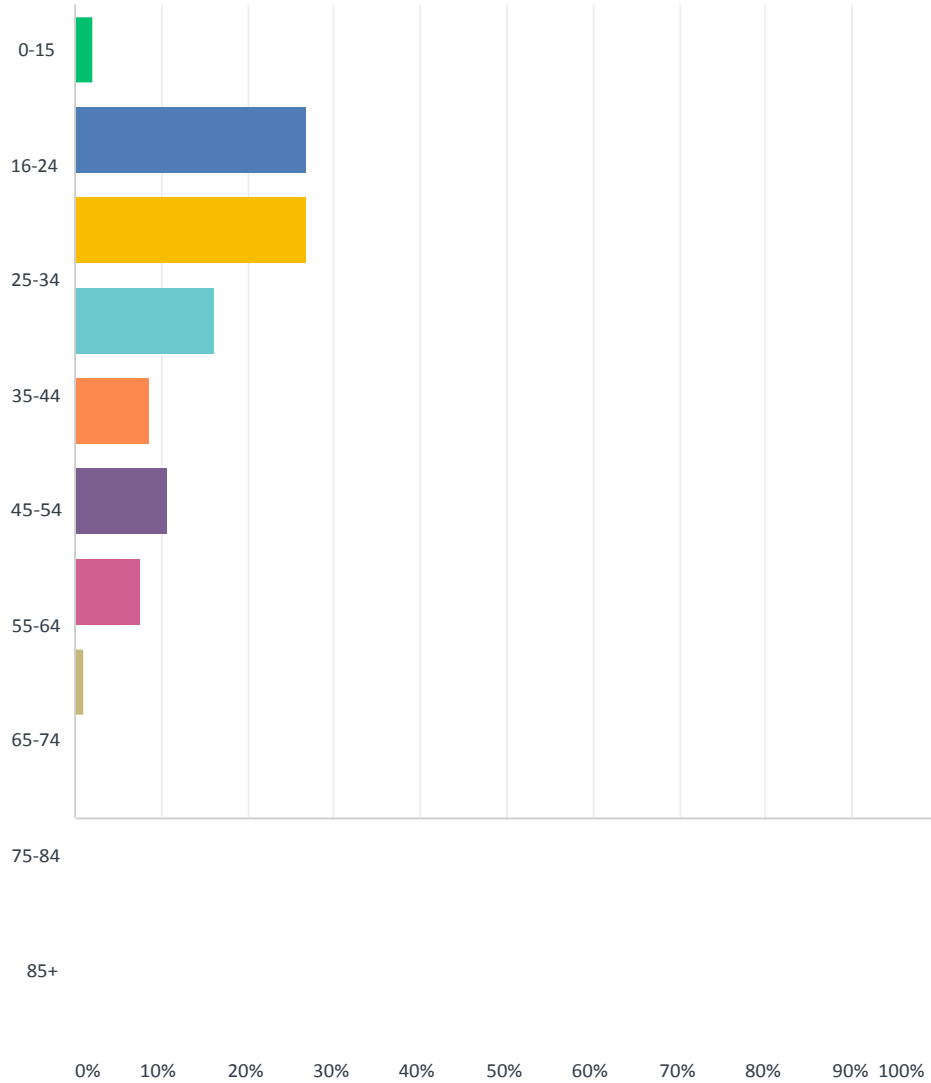
Answered: 79 Skipped: 17



	NOT AT ALL IMPORTANT TO ME	NOT THAT IMPORTANT TO ME	NOT THE MOST OR LEAST IMPORTANT TO ME	QUITE IMPORTANT TO ME	VERY IMPORTANT TO ME	TOTAL	WEIGHTED AVERAGE
That the care is as good as national guidance says it should be and how we deliver the care is as good as other areas in the country	2.63% 2	2.63% 2	5.26% 4	7.89% 6	81.58% 62	76	4.63
That there are enough qualified, permanent staff to run the service safely for patients	1.32% 1	2.63% 2	5.26% 4	10.53% 8	80.26% 61	76	4.66
That the doctors see enough patients to practice their skills regularly	5.26% 4	2.63% 2	7.89% 6	9.21% 7	75.00% 57	76	4.46
That ALL people in South Yorkshire and Chesterfield, not just people who live in one part of the area, can see the same level of highly specialised doctors and nurses and have access to the best technology for their care	2.67% 2	1.33% 1	2.67% 2	9.33% 7	84.00% 63	75	4.71
That a service can run safely because the other services that regularly provide additional care around maternity, A&E, stroke, children's or gastroenterology are also provided	0.00% 0	1.33% 1	5.33% 4	20.00% 15	73.33% 55	75	4.65
That all patients can get to emergency services within 40 minutes by ambulance	3.90% 3	1.30% 1	7.79% 6	11.69% 9	75.32% 58	77	4.53
That the service can meet required standards on waiting times	0.00% 0	2.60% 2	9.09% 7	18.18% 14	70.13% 54	77	4.56
That the service can offer care that's not just 9am-5pm Monday to Friday	3.95% 3	2.63% 2	2.63% 2	11.84% 9	78.95% 60	76	4.59
That the service provides a wide range of training opportunities for trainees and supports all staff to develop their skills	1.37% 1	2.74% 2	1.37% 1	16.44% 12	78.08% 57	73	4.67
That the service does not cost more to run that it currently does	9.33% 7	9.33% 7	18.67% 14	21.33% 16	41.33% 31	75	3.76
That staff, venues and equipment are used in the best possible way so that we aren't wasting valuable staff skills and resources	0.00% 0	2.70% 2	9.46% 7	16.22% 12	71.62% 53	74	4.57

Q13 What age are you?

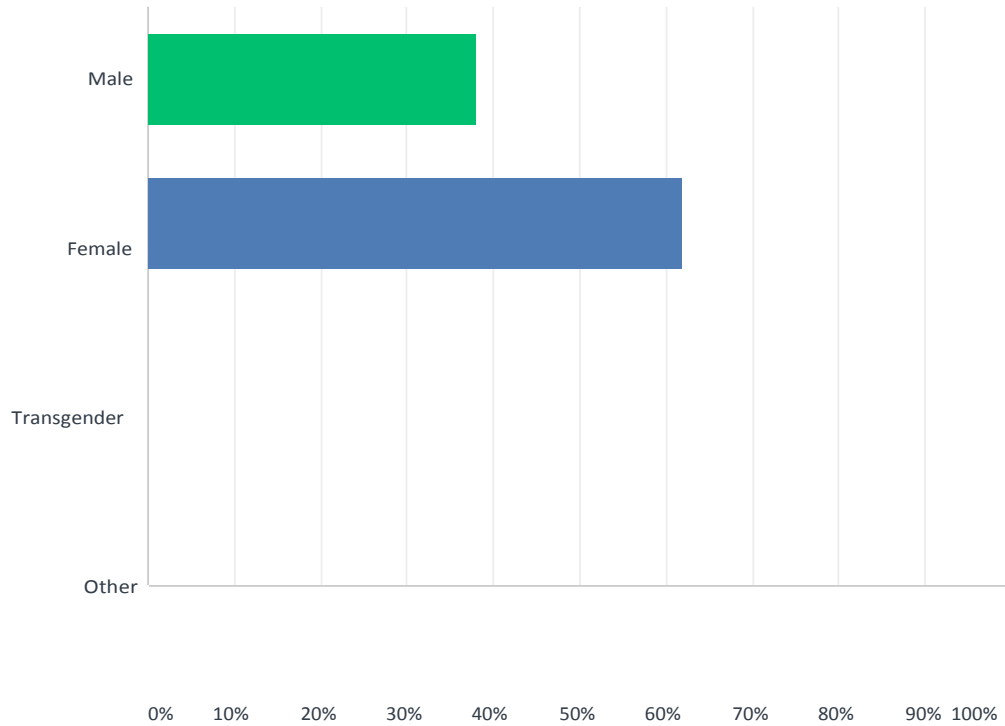
Answered: 93 Skipped: 3



ANSWER CHOICES	RESPONSES	
0-15	2.15%	2
16-24	26.88%	25
25-34	26.88%	25
35-44	16.13%	15
45-54	8.60%	8
55-64	10.75%	10
65-74	7.53%	7
75-84	1.08%	1
85+	0.00%	0
TOTAL		93

Q14 What is your sex?

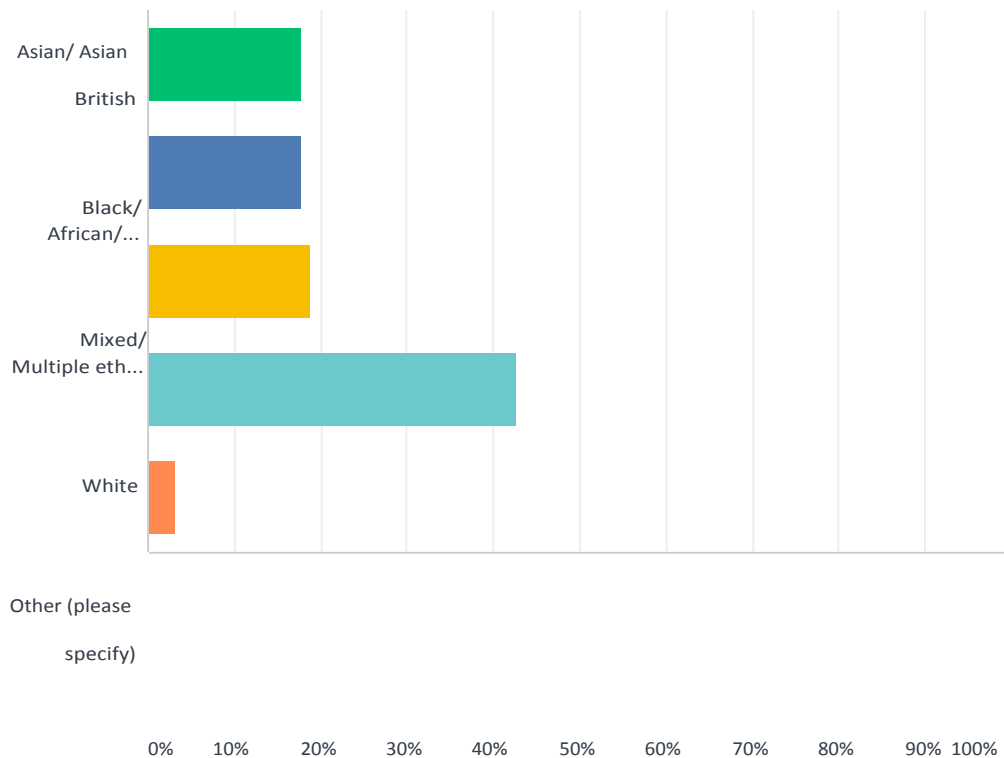
Answered: 92 Skipped: 4



ANSWER CHOICES	RESPONSES	
Male	38.04%	35
Female	61.96%	57
Transgender	0.00%	0
Other	0.00%	0
TOTAL		92

Q15 What is your ethnic group?

Answered: 96 Skipped: 0

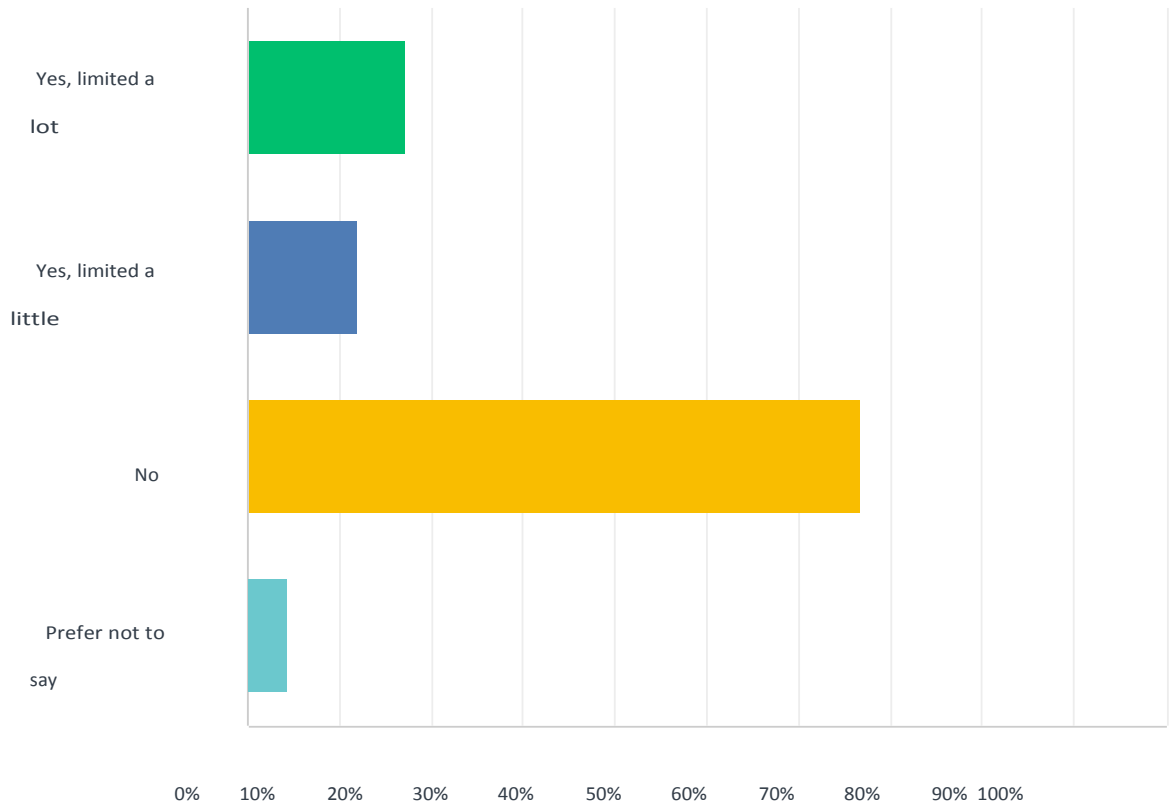


ANSWER CHOICES	RESPONSES	
Asian/ Asian British	17.71%	17
Black/ African/ Caribbean / Black British	17.71%	17
Mixed/ Multiple ethnic groups	18.75%	18
White	42.71%	41
Other (please specify)	3.13%	3
TOTAL		96

#	OTHER (PLEASE SPECIFY)	DATE
1	eritrena	11/14/2017 1:56 PM
2	Sudan	11/14/2017 1:54 PM
3	Russian	11/14/2017 1:49 PM

Q16 Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months? (please include any issues or problems related to old age)

Answered: 93 Skipped: 3



ANSWER CHOICES	RESPONSES	
Yes, limited a lot	17.20%	16
Yes, limited a little	11.83%	11
No	66.67%	62
Prefer not to say	4.30%	4
TOTAL		93

Appendix II – direct quotes

RotherFed, Deaf Community

“They know I’m deaf yet when I go back for follow ups etc. there’s never an interpreter available. I shouldn’t have to ask every time”

It feels like our deafness is often used as an excuse to not offer us urgent appointments

“Sometimes told that it’s only a short 5 minute appointment, so I won’t need an interpreter, but I’m left not understanding my test results”

VAB, non-English speakers

“Language interpreters would be helpful, either by volunteer interpreters in the hospital or via the telephone, as many people don’t understand English well enough”

“More signage (e.g. drawings rather than words for non-English speakers) around the hospital so people can find their way more easily”

United Multicultural Centre, Somali and Pakistani women

“When I went to A&E the wait for so long I nearly lost my life as I couldn’t properly explain what was wrong, there was no interpreters on hand and no available doctors to be seen quickly”