

the **BIG** conversation

27 September to
20 December 2019


**Summary
Feedback
Report**

bit.ly/NHSBigConversation



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The BIG conversation was launched on 27 September 2019 and ran until 20 December 2019. It was designed to help the CCG better understand what matters most to the local community, as well as asking for ideas from the community and clinicians that could help us to make savings in the future.

The BIG conversation was an important engagement activity, but not a formal consultation. It was designed to support the financial recovery plan and future commissioning, decommissioning, investment and disinvestment decisions and provide an insight into what matters most to our local people. It was also an important exercise in raising awareness of the costs of certain services, treatments and medications. We also wanted to help inform people of the options available to them when they need advice or treatment.

The BIG conversation was distributed widely across our region using a range of different media, print and meeting formats to enable us to reach the broadest cross section of our local community as possible.

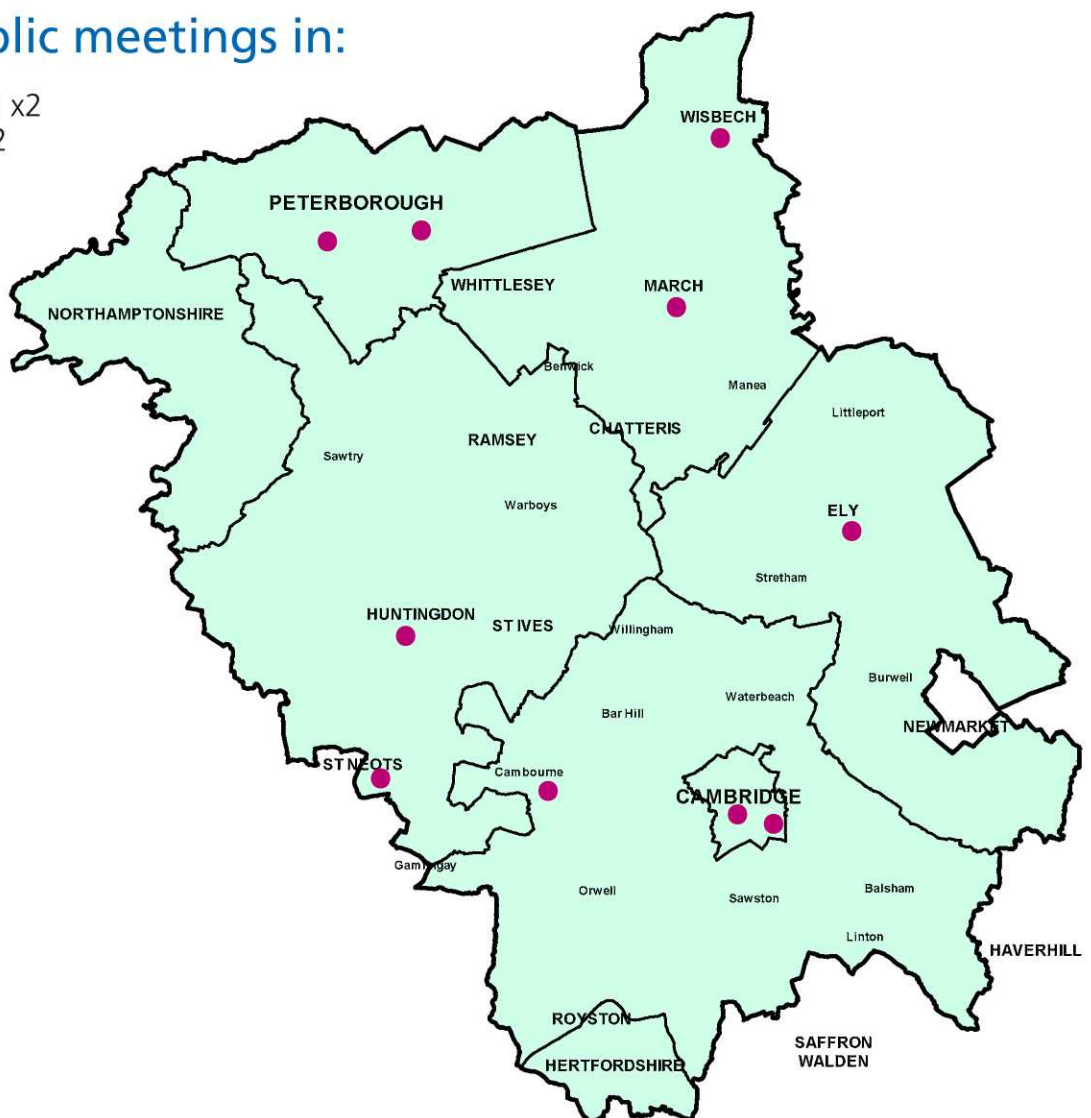
What we did

Printed copies of the BIG conversation and sent them to:

- GP practices
- Pharmacies
- Hospitals
- Minor Injury Units and Urgent Treatment Centre
- Other NHS and Council locations
- Libraries
- Local businesses
- Local charities and support groups
- Meetings and events.

We held public meetings in:

- Peterborough x2
- Cambridge x2
- Huntingdon
- Wisbech
- Cambourne
- Ely
- St Neots
- March.



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We were invited to lots of meetings to talk about the BIG conversation:

- Greater Peterborough Patient Forum
- Cambridgeshire Public Service Board
- Cambridgeshire Area Patient Forum
- Healthwatch, Peterborough Area Health and Care Community Forum
- Healthwatch, Hunts Area Health and Care Community Forum
- Self-care week – Moat House Surgery, Warboys
- Self-care week – Peterborough City Hospital
- Self-care week – Addenbrooke's Hospital
- Self-care week – Hinchingbrooke Hospital
- Peterborough Sikh Gurdwara, celebration event
- Arthur Rank Hospice
- Healthwatch, Fenland Area Health and Care Community Forum
- Peterborough Dementia Network Group
- Cambridge Mosque
- St Ives Alzheimer's Society
- We supported Healthwatch to hold two community panels.

We used social media:



Facebook



Instagram



LinkedIn



Twitter

- especially Facebook groups for local areas.

We contacted the local media with press stories and interviews about the BIG conversation

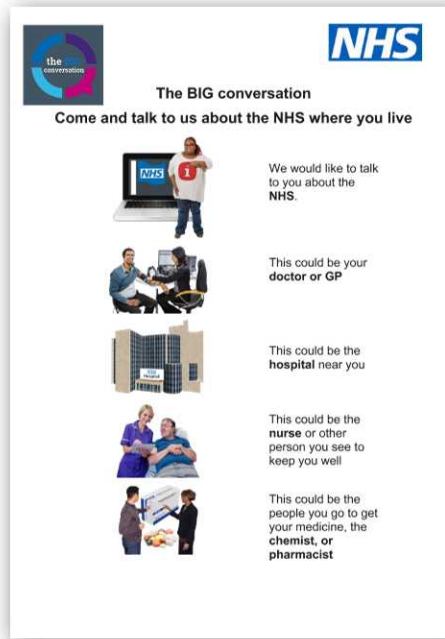
The Cambridge medical students went out onto the streets of Cambridge to meet their future patients and talk about the BIG conversation

We used internal communications to talk to all of our staff. Those staff then took the BIG conversation out to other groups and clubs that they belong to.

We used other council and NHS internal communications channels to talk to staff in other organisations



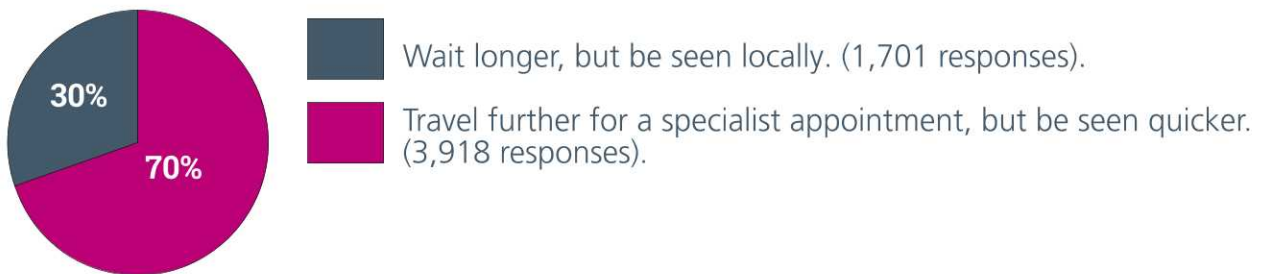
We created a digital marketing toolkit for other people to use to raise awareness of the BIG conversation.



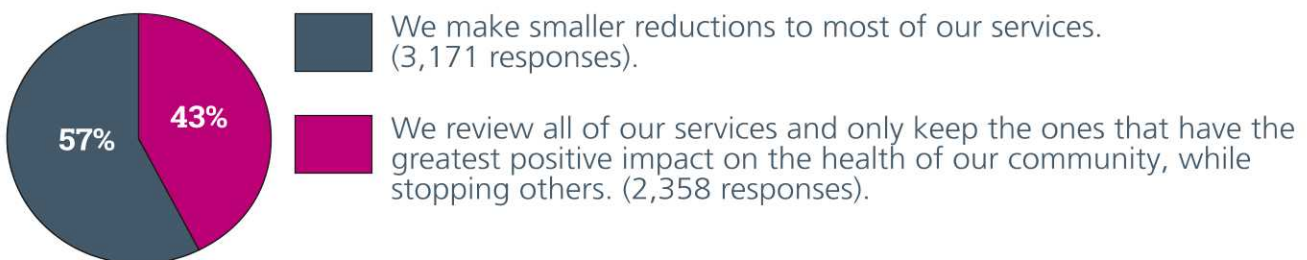
Activity	Responses
Survey responses	5,732
Public meeting attendance	91
Organisation responses	1
Community values panels	30
Facebook comments	128
TOTAL	5,982

What we were told

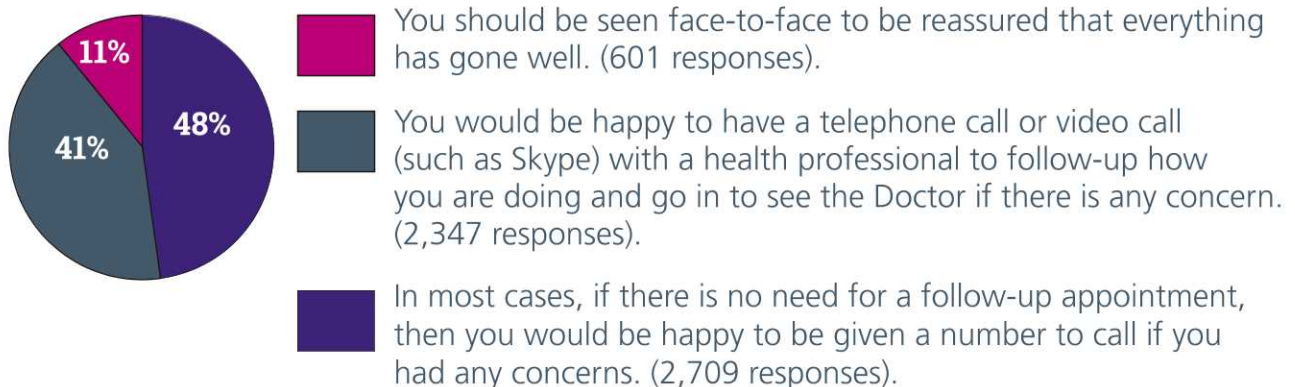
Q1 If you needed to be seen by a healthcare professional, would you rather...



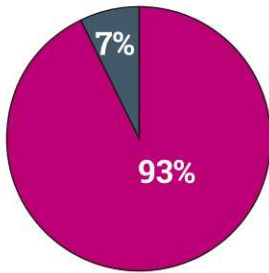
Q2 Thinking about all of the services that we fund and the savings we need to make, would you rather...




Q3 We spend millions of pounds on routine follow up appointments after a treatment or a procedure. If everything has gone well, do you think...



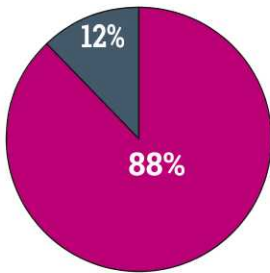
Q4 We spend £5.3 million on medications each year that could be bought over the counter rather than via a prescription. Often these medicines are cheaper to buy over the counter than it is to pay for a prescription. Given the constraints on NHS finances, do you think that...




 We should continue to prescribe anything people need and reduce other healthcare services. (404 responses)

 We should only prescribe items that cannot be readily purchased over the counter to enable the money to be spent on other healthcare services. (5,235 responses)

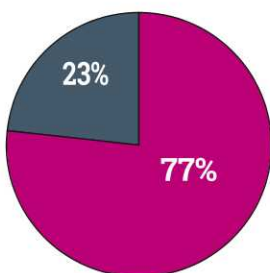
Q5 Like many other areas we have busy A&E departments and sometimes we struggle to see the most urgent cases quickly. Do you think...



 You should always be seen at A&E if you go there and you shouldn't be turned away. (686 responses)

 We should redirect people to other NHS services if you go to A&E and do not have a serious injury or illness that needs to be dealt with as an emergency. (4,973 responses)

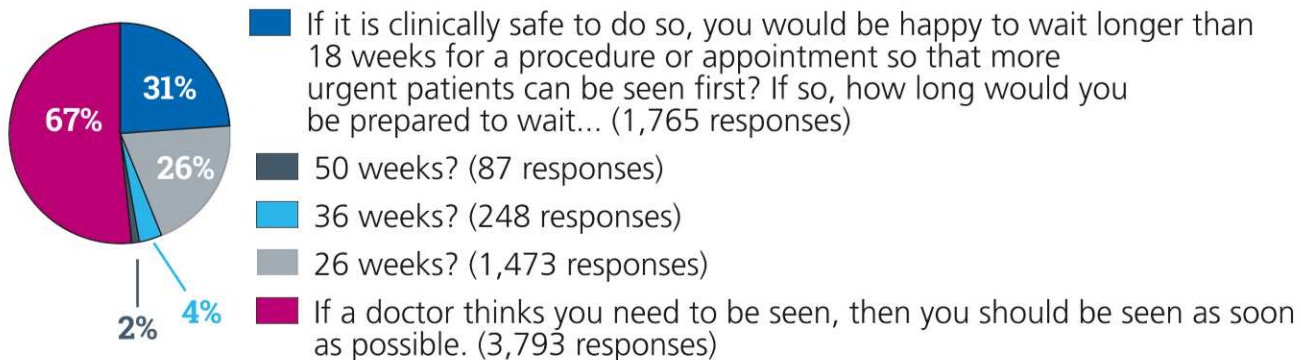
Q6 Research shows that by living a healthy lifestyle – for example not smoking, maintaining an active lifestyle and healthy weight, and not drinking too much alcohol – you can reduce your chances of suffering from a number of illnesses and diseases, such as cancer, diabetes and heart disease. Given these facts, do you believe...



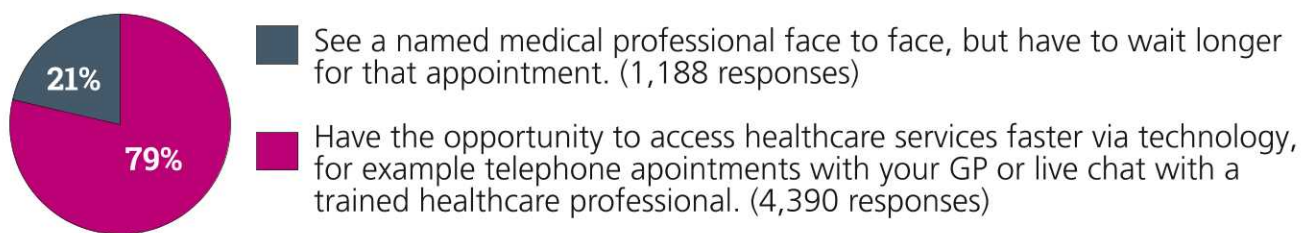
 You should be able to access whatever services you need, even if you do not make lifestyle changes that would help to manage your condition better. (1,312 responses).

 You should be set targets to improve your own health, such as stopping smoking, reducing your weight or alcohol consumption, before having planned operations. (4,329 responses)

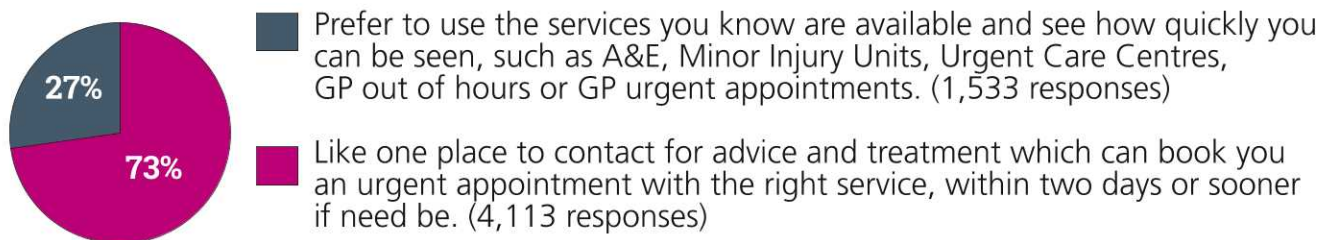
Q7 Due to medical advances and people living longer and with more complex diseases we are seeing a big increase in the numbers of hospital referrals and planned operations. There are a number of reviews into how waiting lists are managed. Do you think...



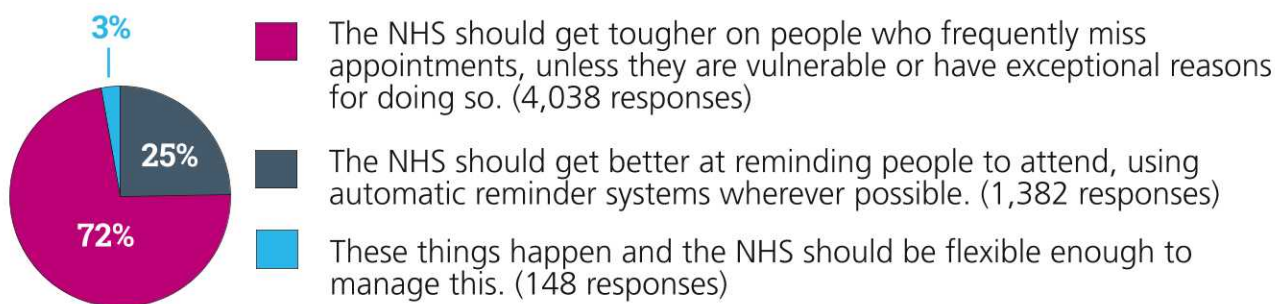
Q8 Looking at how we use technology, would you prefer to...



Q9 When you feel unwell, but it is not an emergency, and you need to see someone to talk about it, would you:



Q10 Nearly eight million hospital appointments were missed across the country in 2017/18. Each hospital outpatient appointment costs around £120, which means almost £1 billion worth of appointments were missed - the equivalent of 257,000 hip replacements or 990,000 cataract operations. Almost 1.2 million GP hours were wasted because people did not turn up to their appointment - that's the equivalent of 600 GPs working full time for a year. Do you think...



The key themes that people told us about when we met them, or they wrote to us during the BIG conversation were:

- That we should get tougher on people who consistently miss appointments unless they have a valid reason. People also think we should charge people who consistently miss appointments unless they have a valid reason (this is not something the NHS would do as all NHS services are free at the point of use)
- We should use technology more, for appointment reminders by text and email to avoid people missing their appointments and enable people to cancel appointments easily if necessary. Also, for follow-up appointments by telephone or video call to avoid unnecessary travel. People also want us to consider using video calling for GP appointments for those who are happy with this type of service.
- We should only prescribe medicine that cannot easily be bought over the counter. Only people with exceptions should be prescribed things that are easy to buy and inexpensive.

- We should turn people away from our A&E departments if they don't have an urgent or emergency need. Or, we should triage them at the front door and redirect people to the right service to suit their needs whether that is a GP appointment, a pharmacist or just give them some advice and reassurance.
- We should be improving access to mental health services, particularly for children and young people. People still find it difficult to know where to go when mental health services are needed.
- We should improve GP services. Some people felt that all GP practices should have the same appointment booking systems. People felt that there should be more GPs as it gets harder to get an appointment in some areas.
- There should be more NHS staff trained as nurses, midwives and GPs. People felt that services were pressured as there are not enough clinical staff.
- People felt that the NHS should be the same throughout the country with no regional differences.
- People told us that we should carry on overspending and not cut services as there were not enough as it is. That the Government should be funding the NHS fully in every area without regional differences.

If you would like to read more about the feedback we received during the BIG conversation our full feedback report can be found on our website here:

<https://www.cambridgeshireandpeterboroughccg.nhs.uk/get-involved/the-big-conversation/>

If you would like information in another language or format, please ask us.

Pokud byste požadovali informace v jiném jazyce nebo formátu, kontaktujte nás

જો તમને માહિતી બીજી ભાષા અથવા રચનામાં જોઈતી હોય તો, કૃપા કરી અમને વિનંતી કરો.

Se deseja obter informação noutra idioma ou formato, diga-nos.

Jei norėtumėte gauti informaciją kita kalba ar formatu, kreipkitės į mus.

Jeżeli chcieliby Państwo uzyskać informacje w innym języku lub w innym formacie, prosimy dać nam znać.

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