

**what**  
**would you do?**

It's your NHS. Have your say.



**NHS Long Term Plan**

**Be Cancer Safe Event**

**Wednesday 27<sup>th</sup> March 2019**

---

# 1 Introduction

---

## 1.1 Description of the focus group/engagement activity

### Be Cancer Safe Community Engagement Event

Be Cancer Safe is a social movement across the region which aims to raise awareness of cancer and increase the number of people diagnosed earlier. Whether you are a community group, an organisation with paid staff or just a member of the public with an interest in championing messages linked to cancer. They hosted a Community Engagement Event at New York Stadium in Rotherham and invited Healthwatch Rotherham along.

## 1.2 Acknowledgements

Jo Farey, Diana Faid, Voluntary Action Rotherham

---

# 2 What was the purpose of the activity/session?

---

## 2.1 Purpose

The purpose of the focus group was to ensure that Rotherham residents

- are aware of the NHS Long Term Plan
- to understand what is important to Rotherham residents
- to find out how we can best improve local services
- to ensure that the voice of Rotherham residents are heard

## 2.2 What did you do?

We pre-arranged to attend the Community Engagement Event. We took along, banners, leaflets, information on the Long Term Plan and hard copies of the SY&B Survey.

During the networking opportunity we gathered a small group of residents and they took part in an activity where we gave each person 20 billion pounds and asked them if they were in charge of the NHS where would they spend the money.

- **Clinical Priorities** – cancer, cardiovascular disease, maternity and neonatal health, stroke, diabetes, respiratory care.
- **Resources** – finance, productivity, staffing
- **Acute Services** – urgent treatment services, GP led facilities, multi-disciplinary clinical assessment.
- **Primary & Community Care** – Primary Care Networks, digital services, developing fully integrated community based healthcare.
- **Mental Health & Learning Disabilities** – Children & Young People, transitions of care, community mental health treatment, 24/7 support.

This saw many residents interacting with each other, who had not previously met – deciding on how to spend that amount of money is very thought provoking and sometimes you need to question your decision!

## 2.3 Results of the activity/session(s)

Personal experience played a big part in where residents spent their money, many who had experience of cancer were happy to place their money into Clinical Priorities but then it was pointed out that unless the resources are there, there will be very little point in putting money into clinical priorities. At the end of the session we revealed the results and discovered that the cash was shared;

Clinical Priorities – 24%

Resources – 23%

Acute Services – 12%

Primary & Community Care – 13%

Mental Health & Learning Disabilities – 28%

This showed how mental health services are at the forefront of everyone's mind as it is national news and there is a big suicide prevention campaign which has recently been set up in Rotherham.



Completing NHS LTP Surveys!

All ready for the focus session!

### Feedback from people who took part

“Under resourced and over stretched by budget cuts – putting people at risk”

“We need to be treated like individuals, it is not a one size fits all”

“I have more problems getting in to see a doctor now than ever before”

“Without resources the other services wouldn’t be available in Rotherham”

“If we put money into communities it may prevent the person needing acute services”

### Feedback from staff/volunteers who took part

It was a really good event, well organised with good speakers, interesting subjects and plenty of time for networking. I feel it helped to raise the profile of Healthwatch with residents and other organisations.

I feel the activity worked well and drew residents to the table, much easier to engage with residents by giving them money instead of a leaflet! – Also because they had to make the decision where to spend the money it really made them think that it’s not as easy as it may sound.

## 2.4 Conclusion

It is important that we speak to a variety of residents to discover what the NHS means to them and what they would like to see happening with health and social care services. Many of the residents realise that there is no blank cheque and the money has to be spent wisely to ensure we can provide a good health service to future generations. Many of the decisions taken are personal and reflect that individuals experience of the NHS, for example if a resident had experienced heart problems and had received good care they would in the first instance place their 20 billion into **Clinical Priorities** as a pay back for the good care they received in their hour of need. Once we opened up the conversation and other people had their say often the money would

then be divided – many commenting that there was not enough money to go round the different priorities. The exercise definitely made residents think about the enormity of the task being faced by NHS England.

## 2.5 Data and information summary

Please complete the table below with all the info gathered from your focus group/engagement session

Date of Focus Group/Engagement Session	Wednesday 27 <sup>th</sup> March 2019
Group name	Be Cancer Safe, Community Engagement Event.
Description of the group or session	To inform residents of the Long Term Plan, and to ensure that their voice is heard at a national level when the changes are being implemented.
Life stage – (Starting Well, Living Well, Ageing Well)	Living Well, Ageing Well
No. of attendees	300+ (30 took part in the activity)
Theme area (Mental Wellbeing, Choice and Control and Independence, Care near where you live)	General
Was it a condition specific session – if so please identify the specific condition	N/A
What were the key outcomes	<ul style="list-style-type: none"> <li>• 300+ residents in Rotherham feel that they have been able to have their say on the NHS Long Term Plan and that their voices have been heard.</li> <li>• 300+ residents of Rotherham are now well aware of Healthwatch and its activities.</li> <li>• Contacts established for future engagement and networking.</li> <li>• Information on findings from the event and comments to be passed back to local CCG, Healthwatch England and RMBC Health &amp; Wellbeing Board</li> </ul>

