



Public Engagement Summary Highlights

Sustainable Hospital Services for the People of East Cheshire & Stockport

May 2022

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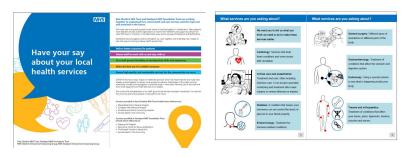
Engagement: Report of Findings

The listening exercise ran for 6 weeks from 21 February 2022 to 2 April 2022

273 responses received

Methodology

- Stakeholder briefings
- Press and media releases
- Engagement documents including easy read
- Dedicated engagement microsite
- Social media
- Dedicated telephone line
- Postal and online survey
- Internal staff communications channels
- 17 pieces of correspondence were received





Two posts per week over the six week exercise highlighted different calls to action and encouraged involvement

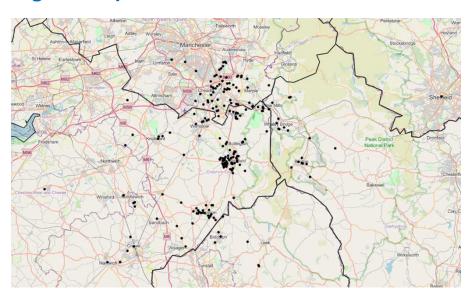


2,163 unique page views and 1,403 new visitors to the site

Respondents Profiles

	No.	%
Patient	97	36%
NHS employee	93	34%
Member of the public	41	15%
Carer	24	9%
From another public sector organisation	7	3%
Other (please specify below)	7	3%
From a health-related group, charity or organisation	1	0.4%
From a non-health voluntary group, charity or organisation	-	-
Base	270	

Geo-mapping of responses: Higher responses in East Cheshire



Demographics

- 9% non-white British
- 4% non heterosexual
- 9% currently pregnant
- Broad range of ages (low response from under 25s)
- 10% have a disability (5% mental health condition)
- 42% carers
- 2% armed forces veterans
- 14% male
- 83% female (2 trans or other)

Index of Multiple Deprivation (IMD)

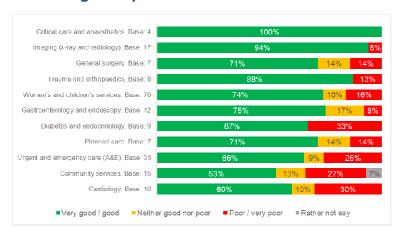
The IMD is the official measure of relative deprivation for small areas in England, with the most deprived 10% of small areas categorised as '1' while the least deprived 10% of small areas are described as '10'.

IMD decile	No.	%
1	3	1%
2	8	3%
3	23	8%
4	17	6%
5	13	5%
6	10	4%
7	30	11%
8	19	7%
9	38	14%
10	60	22%
No postcode provided	32	12%
Postcode unable to be profiled	20	7%
Base	273	

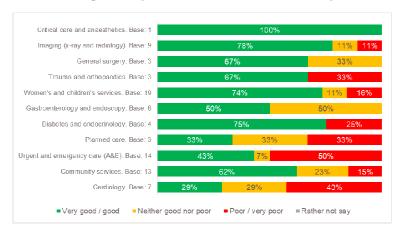
Service Ratings

How would you rate your experience of accessing and using the following services?

Service rating – respondents from the East Cheshire area



Service rating – respondents from the Stockport area



- · Generally, services tended to be rated positively.
- · Critical care and anaesthetics and imaging were rated most positively in both areas.
- Diabetes & endocrinology and cardiology were rated least positively in East Cheshire
- A&E and Cardiology were rated least positively in Stockport
- The highest levels of responses were for women's and children's services in both areas

Please note that the number of respondents (base) are low for many services.

Themes by Service

	Cardiolo gy	Critical care and anaesthetic s	Community Services	Diabetes and endocrinolo gy	Gastroente rology and endoscopy	General surgery	Imaging (X- ray and radiology)	Planned care	Trauma and orthopaedi cs	Urgent and emergency care (A&E)	Women's & children's services
No of Respondents	38	28	72	30	39	34	49	41	38	88	141
Red = Negative	Access – Waiting time for services is too long (9 / 28%)	Staff were professional and friendly (5 / 25%)	Consider the need for adequate staffing (11 / 21%)	Ensure appropriate staffing (e.g. specialist expertise) (6 / 26%)	Services provided are good (16 /49%)	Services provided are good (9 / 36%)	Staff were professional and friendly (14 / 37%)	Concern over waiting lists to access care e.g. backlog (7 / 28%)	Services provided are good (6 / 20%)	Services provided are good (19 / 26%)	Quality of care was good e.g. antenatal, postnatal care (34 / 29%)
Amber = An observation	Staff were profession al and friendly (7 / 22%)	Services provided are good (5 / 25%)	Communica tion with patients requires improvemen t (10 / 19%)	Services provided were poor (5 / 22%)	Staff are professional and helpful (11 /33%)	Ensure appropriate staffing (4 / 16%)	Services provided are good e.g. efficient (14 / 37%)	Communicat ion with patients requires improvemen t (6 / 24%)	Waiting time for services is long (6 / 20%)	Concern over long waiting time to be seen (14 / 19%)	Staff were professional and helpful (33 / 27%)
Green = Positive	Services provided are good (5 / 16%).	Consider greater support for staff (e.g. recognition) (3 / 15%).	Staff were helpful and friendly (8 / 15% Observation Increased provision of services is required (8 / 15%)	Concern over lack of specialists e.g. endocrine consultant, adult diabetologist (5 / 22%).	Ensure adequate staffing e.g. more staff, share specialists knowledge (5 / 15%).	Ensure greater integration between healthcare providers (4 / 16%).	Concern over long waiting time for services e.g. availability of appointment s (9 / 24%).	Services provided are good (5 / 20%).	Ensure provision of trauma and orthopaedic services locally (5 / 17%) Ensure sufficient resources and capacity to meet demand (5 / 17%).	Concern over inadequate staffing (e.g. lack of staff) (10 / 14%) Staff were professional and helpful (10 / 14%).	Consider the need to reopen maternity unit at Macclesfield Hospital (23 / 19%)

Positive Feedback

Across the different services, the recurring positive themes were that staff were professional and helpful and that the services were good.

Macclesfield
District General
Hospital provides
excellent service
to the local
community and
services
should remain so!

Felt I was given true informed choice. Excellent communication using non medical language.

Really clear, practical advice and support

I think planned care works to the best that it can, whilst dealing with a huge and ever increasing backlog

Excellent service, quick to diagnose skin cancer and refer to specialist.

I had a surgical procedure as a day patient. All of the staff I encountered were very friendly & professional. They looked after me really well and put me at ease.

I have personally accessed diagnostic services in the cardio respiratory team and strongly feel services like this should be provided locally.

Used [A&E] lots of times personally and with my children. Fantastic resource and vital for the growing population of Congleton and Macclesfield. Again to travel over 20 mins would be unacceptable. This service is essential and should be local

The experience and expertise of the trauma and orthopaedic services within the Trust are high.

Communication between A&E trauma and the orthopaedic department could be improved.

So good to be able to access all the test I require in one trust. Not travelling to different trust to see different people.

Telephone and face to face appointments with caring consultant.

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Areas for Improvement

Key recurring negative themes were:

- Communication with patients requires improvement
- Long waiting times to access services
- The need for adequate staffing was also highlighted

Travel and transport

The main travel method was by car (236 / 87%), and the average travel time to an NHS site was 26 minutes. Key issues identified were around difficulties parking at hospitals and lack of adequate public transport options.

Maternity at Macclesfield

Concern was also raised over the lack of maternity services provision, with respondents highlighting the need to re-open the maternity unit at Macclesfield District General Hospital.

SHH Wards very busy, which meant that I was left for long periods on my own with no communication about what was happening

Too long waiting times

There is hardly any public transport, car parking is horrendous I have witnessed what happens when aftercare is not followed up in a timely manner. It means we have little faith in the service offered at our local hospital

Lack of staff often covering multiple areas which not only impacts on patient safety but also the well being of our staff and clinicians.

Cardiology should be provided in a specialist centre such as Manchester

I am very happy with the service I have received from all the staff at Knutsford and Macclesfield.

However, I think it's appalling that the maternity unit is not open so I will not be able to give birth in my local hospital. I will have to travel to a hospital that I have never visited before and will be cared for by staff I have never met. Also the antenatal classes are not running locally at the moment for no good reason. I feel let down.

Next Steps

- The Case for Change will go through internal and external governance processes and will be in the public domain from 30th June 2022
- Clinicians will consider the engagement responses and public views at workshops to be held during the summer
- There will be an options appraisal process, which will include engagement with staff, patients and carers to develop proposed solutions into viable options
- NHS Regulators and Health Overview & Scrutiny Committees will consider the process and the proposals for change which may result in formal consultation