

## Healthwatch Merton

### **Improving Healthcare Together – Group discussion with BAME residents in Merton**

#### **Introduction**

Healthwatch Merton engaged with:

- A group of five BAME residents, aged between 45 – 62. Three were of Asian British background, and one each of African and Caribbean heritage. Four were female, one was male. The session was held on Friday 19<sup>th</sup> October at the Vestry Hall, London Road, Mitcham, CR4 3UD.

#### **Priorities / Main Criteria for ‘Good Healthcare’**

Participants felt they were well served with hospitals locally – thanks in part to the area being very densely populated and diverse. Linked to that, accessibility is a priority (as it is in other groups), and St George’s Tooting especially was deemed easy to get to (although it had expensive parking). There is a ‘blessing and curse’ element however; St George’s is a major trauma centre on people’s doorstep – but with such a wide catchment area for emergency cases, its more routine appointments can sometimes be cancelled or delayed.

Staff attitude was important, and most were seen to be doing their best in ‘difficult circumstances’. Mental health was cited as one example; people attending A&E with mental health problems caused greater stress for both those patients and the staff who are not necessarily specially trained. On the positive side, local hospitals are familiar with Sickle Cell Anaemia and other conditions associated with specific ethnic groups.

A quick, efficient and pragmatic booking system has helped people be seen for appointments more quickly than at first expected.

#### **What Needs Improving Most?**

The system was generally felt to be ‘creaking’ and the discharge system especially.

*‘Attitude of the staff is great, but the discharge system is dreadful – I’ve had it at St Helier, St George’s and Kingston. You get told ‘you’re ready to go’, they take your bed and you can wait for hours waiting for a consultant sign-off or for medication. It’s so inefficient.’*

As noted, capacity was generally seen as an issue, with overcrowding and long queues in A&E and a system operating at full capacity.

*‘We’re blessed with good specialisms and trauma services at St George’s, but that has knock-on effects as your operation might be postponed if a new emergency arrives.’*

Also, there are specific mentions that special needs (Learning Disabilities and Autism) or elderly residents are not prioritised.

### **The Principle of Integrated and Site-Focussed Acute Services (prefaced by overview of safety / modernity / funding issue)**

As found with other participants, the need for change was generally understood and generally the priorities were the right ones - focussing on patients, staff and quality of service delivery.

The infrastructure was generally considered in need of updating.

*'There is not a great deal of leverage on the St Helier site, but it is an old building and in need of updating. But there are transport and access issues with the site more generally.'*

Participants already thought that Sutton Hospital had closed many of its services, and although most wouldn't necessarily use it, it was an under-used asset.

### **Potential Solutions – Acute Services only at Epsom, St Helier or Sutton Hospitals**

Because participants felt they were already quite well served with local health services, they felt any of the proposed changes wouldn't really affect them – although there was concern that it may impact on capacity.

*'If you do move acute services from St Helier, people would probably just switch to St George's, Kingston or [Croydon University] Mayday.'*

However, they acknowledged it would affect a considerable number of people and had to be managed carefully.

*'It's only around 5 miles or so from St Helier to the next hospital with acute services - but think of the number of people in those 5 miles. You want somewhere local and accessible for these services. It's also an emotive issue locally.'*

Concern around Epsom in part reflects the less diverse demographics that it caters for.

*'I would be concerned that Epsom Hospital would be able to meet my cultural needs in terms of food, language and cultural sensitivity.'*

*'Epsom is not a London Borough so it's not even in the psyche. It appears further than it might actually be. I think it would be the fifth choice if asked.'*

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