



**Integrated
Care System**
Nottingham & Nottinghamshire

Integrated Care Partnership: Insight Report

October 2024

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1 Executive Summary

1.1 Introduction

In line with guidance from the Department of Health and Social Care¹ (DHSC), in March 2024, the Integrated Care Partnership approved the refreshed Nottingham and Nottinghamshire Integrated Care Strategy².

To support the implementation of the Strategy and maximise its impact, work has continued across the system to continuously listen to our population to obtain key insights and intelligence from people and communities across Nottingham and Nottinghamshire. This report provides the Partnership with a summary of the activities and findings of work from across the Integrated Care System (ICS).

1.2 Key Findings

1.2.1 What's important to citizens?

National insights

- Hospitals and healthcare have risen from fourth to first place in public concern, increasing from 25% in August 2023 to 35% in May 2024, surpassing inflation, the economy, and environmental issues.
- The Cost of Living continues to be a significant concern for citizens.
- 50% of the British public rate the quality of healthcare that they and their family have access to as either “good” or “very good”, and only 19% rated as “poor” or “very poor”.
- 53% of people think that mental health is one of the biggest health problems facing the country. This figure has increased by 10% since the prior recording in 2022.
- There are concerns about social care: around half of people (48%) aren't confident that a friend or family member would receive a good standard of care in a care home, however, overall around the same amount (46%) believed that they would.

Local insights

- The civil unrest which took place in August 2024 across the England has resulted in joint stakeholder meetings being arranged in Nottingham and Nottinghamshire to learn more around what needs to be done alleviate the fear of our underserved communities:
 1. Community leaders felt strongly that more specialist intervention needs to be funded to involve young people influenced by the unrest and to work with perpetrators and victims.
 2. There is concern that schools are under supported and need advice from the government on what to do for students facing hate crime and challenging those who hold harmful and Islamophobic views.
 3. There was a consensus that the unrest was driven by islamophobia and Muslim people are not feeling safe in their community, but there was fear also felt by people with learning disabilities and members of the LGBTQ+ communities.
 4. Citizens wanted to know what is in place for people at risk of radicalisation.
 5. The police were keen to understand more about why people are hesitant to report hate crime.
- Donna Ockendon's review of maternity care at Queens Medical Centre and Nottingham City Hospital continues. Within the maternity improvement programme, NUH have a number of specific projects, including culture and engagement, to address feedback from women and families.

¹ [Guidance on the preparation of integrated care strategies - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/guidance-on-the-preparation-of-integrated-care-strategies)

² [Integrated Care Strategy 2023-27 \(healthandcarenotts.co.uk\)](https://www.healthandcarenotts.co.uk/integrated-care-strategy-2023-27)

- Healthwatch Nottingham and Nottinghamshire (HWNN) gathered the following insights from people and communities and have worked with local services to make improvements:
 - a) Diabetics using insulin to manage their diabetes found that it was distressing being an in-patient in hospital. Patients did not feel they were in control of managing their own insulin usage and instead, were dependant on nursing staff to provide injections.
 - b) A research project that aimed to understand people's experiences of accessing and using Specialist and Community Mental Health Services in Nottingham & Nottinghamshire highlighted gaps in various areas of care between how service providers think they are doing and how the service users perceive or experience it.
 - c) A member of the public reported stress associated with the carers assessment.
 - d) HWNN received communication concerning a group of older people with vision loss who reside in a rural part of Nottinghamshire. HWNN visited and heard directly from a group of older people with vision loss who reside in a rural part of Nottinghamshire on some of the challenges they were facing in accessing appointments in their local GPs and the added stress of vision loss and digital exclusion which made booking appointments online or on the phone difficult.

1.2.2 Timely access and early diagnosis of cancer

Local insights

- There was a range of experiences regarding the clarity of explanations when individuals were referred for diagnostic tests: 63% felt completely informed, while 25% understood to some extent, and 12% did not receive an explanation they could understand.
- Many felt adequately informed about their upcoming tests: 91% felt received all necessary information.
- The waiting period for test results varied. 79% considered the waiting time appropriate, while 15% found it slightly too long, and 5% felt it was significantly too long.
- The majority of respondents expressed that they had experienced a high level of privacy when receiving their test results (96%).
- 80% stated that the diagnosis information was explained in a way they could understand, while 19% felt it was only to some extent, and 1% did not find the explanation understandable.
- 84% completely agreed that their cancer treatment options were explained to them in an understandable manner.

National insights

- Evidence suggests that fear of change in one's body image begins before surgery or other treatments, and express concern about these changes will have a negative impact on patients' quality of life and may result in depression, anxiety and overall psychological distress
- There is a disruptive impact of cancer on the social networks of some patients for reasons related to their ability to engage with social activities, and for not re-engaging with people with whom they lost connections while accessing the treatment.
- Cancer may cause substantial psychological distress as well as mental health disorders conditions. The most common mental health disorders include major depressive disorder, generalised anxiety disorder, adjustment disorder, panic disorder and post-traumatic stress disorder
- One of the implications facing cancer patients is the financial hardship that results from being diagnosed and living with cancer.

- Carers of people with cancer experience negative financial impact and negative impacts on both physical and mental wellbeing.

1.2.3 Understanding the needs of children, young people and families

Local insights

- Small Steps Big Changes' (SSBC) focus on diversity, for example by consulting with fathers or including Parent Champions from different ethnic backgrounds, helps create services that are inclusive, culturally sensitive and accessible.
- A key learning of the SSBC programme is that service user experiences should help frame care delivery models. This insight helped professionals adapt their language, approaches and service offer to better align with community needs.
- SSBC coproduction approach created collaboration between families and service providers. Service offer becomes more aligned with the needs of the community by empowering and involving parents in service design. The lived experiences of parents provide insights that enhance the relevance and accessibility of services, making them more effective and tailored to local needs
- Young people with Special Educational Needs and Disabilities informed us that the outcome that would be most important to them in their life would be education that can meet their needs, independence, feeling supported, opportunities, having nice things/ good life and job/employment.
- Through the Nottinghamshire County Council Shadow event, 370 children and young people felt that mental and physical health, school, waiting times, cost of living, vaping, crime and healthy lifestyles were worrying them the most.

2 Next steps

The Integrated Care Partnership are asked to consider the insight contained within this report and to support the findings in the further development of our Integrated Care Strategy. The report highlights several points for discussion:

1. What factors could help restore or maintain trust in local health and social care services?
2. What role can the ICS have in healing divisions and developing long-term social cohesion?
3. How can local communities, especially those most affected by the unrest, have a greater voice in the ICS?
4. How can the ICS support NHT to deliver their Integrated Improvement Plan?
5. How will the ICS ensure an ongoing dialogue with people and communities regarding their mental health and services that support them?
6. How well are mental health and emotional support services integrated into cancer care?
7. What more can social care and VCSE organisations play in providing holistic support to patients and their families affected by cancer?
8. To what extent does the Integrated Care Strategy meet the needs of those who provide unpaid care?
9. How can system partners work together to promote cancer prevention, raise awareness of symptoms, and encourage healthy lifestyles in communities at higher risk of cancer?
10. How do we continue to understand the needs of children, young people and families?
11. How can system partners effectively communicate with children, young people and families?
12. How can the ICP address concerns we are hearing from our children, young people and families and embed these into our Integrated Care Strategy?