Department of Health: Our health, our care, our say – one year on

End of day report

27th March 2007

Aims of the event

Last year the Department of Health produced the White Paper on ‘Our health, our care, our say: a new direction for community services’. This was based on the ‘Your health, your care, your say’ consultation exercise in 2005 which included surveys, local listening exercises, regional events and a 1000 person Citizens’ Summit.

Last year we ran a follow up event called ‘Holding the Government to Account’. We reconvened over 100 participants from the original events. The aim of the day was to allow the DH to feed back on actions taken in response to the consultation and to explain why some proposals were not included in the White Paper, to assess whether participants thought the DH had listened and acted on what was said in the consultations and to seek views on priorities for delivery. At this event Patricia Hewitt promised to reconvene another event one year on to report back on the progress the DH had made, which is this event today.

Specifically, the event today was designed to:

- Refresh participants’ awareness of ‘Your health, your care, your say’ and the contents of the White Paper
- Enable participants to assess progress by informing them about steps taken to implement the changes
- Give participants the opportunity to discuss and debate progress to date, and to vote on priorities for the next 12 months
1. Introduction

Format of the event

The event ran from 11.45 - 3.30pm and comprised of a random and representative sample of 84 people, all of whom had been involved in one of the original ‘Your health, your care, your say’ events in Birmingham, Gateshead, Leicester, London or Plymouth. Participants sat on mixed tables, of 8-10, each table led by a table facilitator. The day was interactive, with a mix of table discussions, presentations of information from the front and paper polling.

Early on in the event participants heard from Secretary of State, Patricia Hewitt, and her ministerial colleagues Rosie Winterton and Andy Burnham, about the progress the Department of Health has made on the proposals in the White Paper. There were also some films showing some of the pilot schemes in action. Participants then discussed what they thought had gone well, less well and what needs to be a priority now. At this point, people voted on what they thought the top three priorities should be in the next 12 months.

Following this, Sir George Alberti, the National Director for Emergency Access, and Dr David Colin Thomé, a GP and the National Director for Primary Care gave their perspectives on why services need to change. Participants then discussed what is positive about the changes, what their concerns are and what would need to happen for their concerns to be addressed. There was also discussion on what would need to happen to make the transition go smoothly, what information would be required and how people would like to access this information. This was followed by a Q&A session to the panel of ministers.

Outcomes of discussion

Discussion 1: Reviewing progress and priorities for action

The discussions were wide ranging and many issues were raised, but three key points emerged:

- The changes and pilot projects are positive but there are questions about whether enough is being done to publicise the fact that they are available and let people know that change is happening.
- Are the new services and pilot projects reaching the people who need them the most? Is more support needed for some groups to enable them to take advantage of the new opportunities such as individual budgets? Participants are concerned that some people are still ‘falling through the gaps’ in services.
- Better access to GPs (longer hours, weekends) is critical.

After the discussion, a vote was held on priorities for action over the next 12 months and full results are show on the next page.

Discussion 2: Service change

Many tables were positive about the case for change and could see the benefits that the changes will bring. Looking forwards, there were three key points raised in the table discussions:

- High quality and consistent provision of services is critical – participants are keen to make sure that best practice is spread and appropriate training is offered to ensure consistency.
- Communication about the changes is critical: participants want to see information about new services to help people use new and existing services appropriately.
- Access remains a key concern and there is a need for reassurance on emergency care and 24 hour access.
Chart 1: Priorities for action over the next 12 months Base = All participants (84)
The top bar shows the total votes i.e. the number of times that option was chosen as one of the top three priorities and the lower bar shows the number of times the option was chosen as top priority.