

EXPERIENCES OF THE EXPERIENCED SURVEY: PORTSMOUTH

There was a 31% response rate for the Portsmouth survey of 2,000 people aged 50 years and over. Of the 615 respondents 59% were female with a mean age of 70 (range 50-108 years). Over half of respondents lived with their spouse or partner (58%), one-quarter living alone (25%) with the remainder living with their family (11%) or with others (6%). Ninety-eight per cent of respondents noted their ethnicity as White UK.

A YOUR HEALTH

Respondents were asked to report on their general health, 26% stated that their health was "Fair or Poor", 35% "Good", and 39% "Excellent or Very Good". More than one-third of all respondents had a disability of long-standing illness (36%) with the majority having a carer available to them if needed (94%). The available carer for most would be a spouse or partner (65%), children were also available for twenty-one per-cent of respondents, five per cent another relative, seven per cent a friend or neighbour and for two per cent a formal caregiver would be available.

The majority of respondents did not need help with activities of daily living, 97% stated that they needed help with eating, 95% did not need help with getting to the toilet, 91% did not need help dressing, 88% did not need help with bathing, 93% did not need help moving or standing. The majority of respondents did not provide care for activities of daily living for others, 98% did not provide help for others with eating, 98% did not provide help for someone else with getting to the toilet, 98% did not provide help to someone else with dressing, 97% did not provide help to someone else with bathing and 97% did not provide help to someone else with moving or standing.

Nine per cent of respondents receive medical or other treatment for anxiety, depression or any other mental health problem and forty-four per cent have received treatment for high blood pressure, coronary heart disease, angina or coronary thrombosis.

B HEALTH AND COUNCIL SERVICES

Survey respondents were asked about the quality of health and council services in their area. One-fifth of respondents had contact with a doctor six times or more in the previous twelve months (20%), over one-fifth four to six times (22%), over one-third two to three times (34%), fifteen per cent saw a doctor once and ten per cent did not see a doctor in the previous year.

The majority of respondents were not asked their opinion about health or council services for older people in general in the previous 12 months (95%). Of those who were asked twenty-one per cent were asked by their GP, seventeen per cent by local health services, one-third by social services, eight per cent by university researchers and twenty-one per cent by others.

The majority of respondents did not think that older people in their locality have any influence over the planning of new health or council services (80%, 11% DK) or over monitoring the quality of current health or council services (81%, 11% DK).

Under two-thirds of all respondents felt that over the previous three years that the quality of health care provided by general practice, community nurses or hospital outpatient clinic has stayed the same (63%) with twenty-one per cent saying services had improved and twelve per cent saying services had worsened in this time.

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The majority of respondents had not been asked about the quality of their own medical or social care in the previous year (90%, 3% NA/DK). Of those who had been asked the majority were asked by their GP (63%), with fourteen per cent asked by local health services, twenty-one per cent by local social services and two per cent by others.

Most respondents felt that when using general practice, seeing a community nurse or visiting a hospital out-patient clinic that they could ensure that their dignity would be respected (88%), that they can discuss important or personal matters in private (90%) and that what they say about themselves is confidential (82%).

Over half of respondents had been given advice about staying healthy or maintaining your health, in the last 12 months, 46% received no such advice. Of those who received advice more than one-third were given advice by their GP (37%), twelve per cent received advice from the practice nurse, two per cent from hospital staff, less than one per cent from social services and voluntary organisations.

Of those respondents taking prescribed medicines regularly less than one-fifth had not had a medication review in the previous year (16% of 79% of total respondents who answered this question). More than half had a medication review by their GP (55%), five per cent by the practice nurse and three per cent by hospital staff. Some respondents had a medication review undertaken by more than one service.

The majority of respondents did not feel that older people get worse treatment than younger people in their area (81%), of the nineteen percent who did believe that age affected health and social services received four per cent experienced this personally, and six per cent had someone close experience this and ten per cent had heard of this happening. More than half of age discrimination occurred in a hospital setting (57%), a little over one-quarter in general practice (28%), twelve per cent in social services and three per cent from experience of other council services.

Seventeen per cent of respondents in the last 12 months needed to contact the NHS at night or at weekends, of those who accessed this service half said that they were helped a lot, in the right way (50%), twenty eight per cent felt that the help received was satisfactory but could have been better and twenty three per cent felt that they were not helped enough.

Less than one-fifth of respondents had attended an Accident or Emergency Department in the last 12 months (15%), of those who accessed this service the majority said that they were helped a lot, in the right way (69%), twenty-one per cent felt that the help received was satisfactory but could have been better and ten per cent felt that they were not helped enough.

Eighty-five per cent of respondents had not experienced an overnight stay in hospital in the previous year, of the fifteen per cent who had an overnight stay nine per cent had one instance of a hospital stay, three per cent had two or three instances of an overnight stay and three per cent had three or more instances of an overnight stay.

C BEING IN HOSPITAL

One-fifth of the questions on experiences of hospital care and discharge related to the respondent (20%, 80% missing values represent those who have not been in hospital, or cared for someone who had been, in the previous 12 months). With 91% of the respondents feeling that inpatient treatment could not have been avoided. Whilst in hospital 77% felt that their care and treatment was sensitive to their views, beliefs or preferences, 71% that their care was

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personalised, 68% that the care was designed to involve them in making decisions about future care and 72% that this care was designed to promote independence.

Less than two-thirds of respondents felt that on leaving hospital that this was timely and well-organised (65%), fifteen per cent that discharge was timely but badly organised, seven per cent that discharge was premature but well organised, seven per cent that discharge was premature and badly organised, five per cent that discharge was delayed but well organised and one per cent that discharge was delayed and badly organised.

D RECEIVING SOCIAL SERVICES

The majority of respondents or the person that they may care for are not currently receiving social services (89%). the eleven per cent receiving social services described their assessment as relevant helping the respondent to do what they want (89%), comprehensive covering all needs (86%), confidential (94%), careful in judging risks (86%), respectful of dignity (93%), clear in explaining rights to the services (84%), clear about charges for services (80%), open and honest giving a clear plan of the care package (79%), thorough with someone checking up on the service (81%), helps as much as necessary but does not do things the respondent can do for themselves (90%).

Respondents were asked if the care package they or the person they care for receive met all needs (81%), matches the care plan (85%), promotes independence (93%), is respectful of dignity (92%) and helps the respondent do as much as they can for themselves (92%).

E LOCAL COUNCIL SERVICES

Less than three-quarters of respondents felt that library services are easy to get to (71%; 25% of respondents did not answer this question (DNA)), less than two-thirds felt that library services are open at convenient times (61%; 35% DNA) and more than half that library services are well-staffed (57%, 42% DNA), and that library services are a good source of information (59%, 40% DNA).

More than half of respondents felt that leisure centres are easy to get to (52%, 34% DNA), less than half that leisure centres are open at convenient times (46%, 53% DNA), over a third that leisure centres are well-staffed (35%, 64% DNA), and more than one-quarter that leisure centres are attractive to older people (27%, 68% DNA).

One-third of respondents felt that educational activities are easy to get to (33%, 61% DNA), over one-quarter that educational activities are open at convenient times (26%, 71% DNA), just over one-fifth that educational activities are well-staffed (21%, 77% DNA) and one-fifth that educational activities are relevant to older people (20%, 76% DNA).

Seventy per cent of respondents felt safe going out on their own in their area (10% NA/DK), sixty four per cent felt that they could get help for someone else if they knew that they were being badly treated (19% NA/DK), just over half felt that if they wanted to complain that they would be listened to (52%, 23% NA/DK), less than half felt that if they needed some advice about their home or about moving in later life that they could get it from the council (44%, 27% NA/DK) and less than two-thirds that the local council is able to offer advice about heating or insulating the respondents home (61%, 22% NA/DK).