

Views of young people about the use of technology in the NHS

Findings from a focused discussion with sixth form students

April 2020



1 Introduction

Healthwatch Coventry has the role of representing the interests of patients and the public in NHS services by gathering views and feedback and taking this to those who run and plan services.

The Healthwatch Coventry Steering Group added this work to the Healthwatch Coventry work plan as a follow up piece of work to the findings in the report *NHS Long Term Plan - what people told us was important Coventry report*¹.

The aim was to:

1. Find out more about what people think about the use of technology in the NHS
2. To consider how communication and engagement with patients and the public is working in GP services. GP practices are grouping together into primary care networks and therefore it is important to consider patient/public perspectives in the light of this.

We gathered views through a public survey receiving 469 responses from Coventry residents and through three focused discussion groups. One was with a group of Black, Asian, Minority Ethnic (BAME) women and the other with parents of children with Special Educational Needs (SEND). 23 people took part in these.

This report gives the findings from our third discussion with a groups of sixth form students. This focus group was postponed from its original date.

The other reports associated with this piece of work can be found at:
www.healthwatchcoventry.co.uk/using-technology-nhs-care

2 What we did

15 young people participated in the focus group on 12 March 2020. The group was made up of 16-18 year-old students.

There were nine females and six males. Their ethnicity was disclosed as: nine from White British communities, two Sri Lankan community members, two from the local Pakistani community and one from the Indian community as well as one student who described themselves as being from a mixed heritage background.

The facilitator explained the role of Healthwatch locally. They also explained what NHS services included and gave examples of some of these e.g. GP services, hospital services and all of the services that are provided in a hospital setting, dental services, community based health services etc.

¹ www.healthwatchcoventry.co.uk/nhs-plans-what-you-would-do

The nature and extent of confidentiality was explained, following Healthwatch and the school's policies. It was highlighted that no personal information was required for the purpose of this session and if anyone wanted to talk about their personal experiences, they could do so without explaining the reason they used a service. For example having a GP appointment but not saying what for, going for a blood test but not why. No identifiable personal experiences of using healthcare services were recorded.

3 Findings

As an icebreaker students were asked: *“What technology do you use daily? And what do you use it for?”*

Students said they used technology for social interaction and for schoolwork:

- Technology used daily for social interaction include WhatsApp, social media (the most popular being Instagram), video calling, instant messenger. Some apps were used, WhatsApp being the most popular. MSN Chat was widely used in the group. Snapchat app was used for image-based communication and sending photos.
- Laptops were used occasionally, mostly for schoolwork.
- Whilst the students knew what apps are used for, several popular social media platform apps were used by the group but no one in the group had heard about the NHS App.

This led to a follow up question asking the group how positively or negatively they felt about these ideas including:

- the NHS app for booking appointment slots and seeing summary care records etc
- online web chat or video calls for doctor's appointments
- records (your health records) being more connected so that different organisations providing NHS care can see them

13 participants felt positively about this. The remaining two did not say.

In addition the group raised these points:

- Concerns around privacy/security of information
- Barriers - access to home based technology (students didn't feel that this was a barrier in the school environment)

The group was asked if they felt there was a language barrier for them or their peer group. They did not think there was a language barrier in terms of speaking different languages, but some people may not feel comfortable speaking on the phone as most of their non face-to-face communication is achieved through text-based communication.

The group were asked what they liked about these ideas? The group found this quite difficult to focus on and more readily thought about the challenges and difficulties it may present for them.

Only one positive comment was highlighted: that some people might not be able to go into the doctors due to commitments in school or work - might prefer a video call in their lunch break.

Challenges identified were:

- One participant said they prefer face to face as when its personal information it makes a difference to know that person is in front of you and you have their attention
- Physical barrier - patient might not feel comfortable talking on the video call, when it's something they don't normally do.
- Should be more options and choices of communication other than just technology each person should be allowed to choose the way that works for them
- Technology can go wrong, something else needs to be in place for these times, a backup plan, otherwise there might be a delay getting the right treatment
- Time and money spent on technology might not be useful for everyone - not everyone will benefit from it like older people
- Flexibility is important for everyone, more choices.

The group was asked if they had been to an appointment that they did not think was worth it?

- A participant said they had gone to see a GP as was concerned about something, when they got there, they were told by the doctor it was not important and the GP gave the patient a printout of information. The patient felt it was not worth attending the appointment as they could have got the same information without attending.
- Another participant shared their experience of visiting their GP. The patient informed the GP of their symptoms, the doctor 'google' searched it only to inform the patient what they already knew and had already googled it before the appointment. They had missed time away from school for this appointment and received no outcome/no new information from what they already knew. The GP told them to do something that the patient had already tried and not worked. The patient then asked the doctor if they have a specific service available at the GP practice and was advised that the surgery did not provide this service. The patient then spoke to the receptionist who told them that the surgery did provide this service and booked the appointment for the patient. The patient felt they were told misleading information and that the doctor was not knowledgeable.

- Most participants said they don't usually book their medical appointments by themselves as normally parents do it for them, although one participant booked and attended optician appointments independently
- *"If there was an app that would that give you more independence to book it"?* - all agreed yes it would make it easier
- One participant said they do not always know if they need a doctor's appointment when they have possible symptoms and for this reason always double check with their mum first. To help young people to become more independent in knowing how to/what appointment to make when they have health concerns was discussed. Having a flow chart was suggested which could provide choices/options of what they could do along with directional arrows pointing out which action to take to help make a decision. This would allow young people to have more independence and choice.
- Seven participants agreed they were concerned about their data. Their concerns were who would have access to it, how would the person know this and how safe and secure was their personal information.

The group were asked if they thought appointments could be done in a different way? They said:

- Getting a GP appointment needs to be done differently. Waiting times and getting GP appointments. Some GP's have online booking system but not all
- Urgency to always call at 8'oclock to get appointment, it's not always possible, busy mornings in family home, getting ready for work and school.
- It was agreed by the group that booking hospital appointments in advance, managing appointments and bookings by an App would be helpful and may encourage them to do it for themselves
- UHCW - blood test appointments are very long
- Need to have other options not just web-based options /some other way to access services, need to have different options as different things suit different people for different reasons.

Conclusions

This group of 16-18 year olds expressed some concerns which were similar to those of the other age groups we gathered information as part of this piece of work. They called for flexibility in approaches to meet the needs of individuals and different circumstances and expressed concerns about security of personal information, for example in health records.

This group had a preference for using Apps. There was not a preference for using video technology for appointments.

Understanding which service to use and what it is appropriate to use them for was an issue and an interesting suggestion was made about how to help young people navigate such decision making as they move to independence and adulthood.

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