

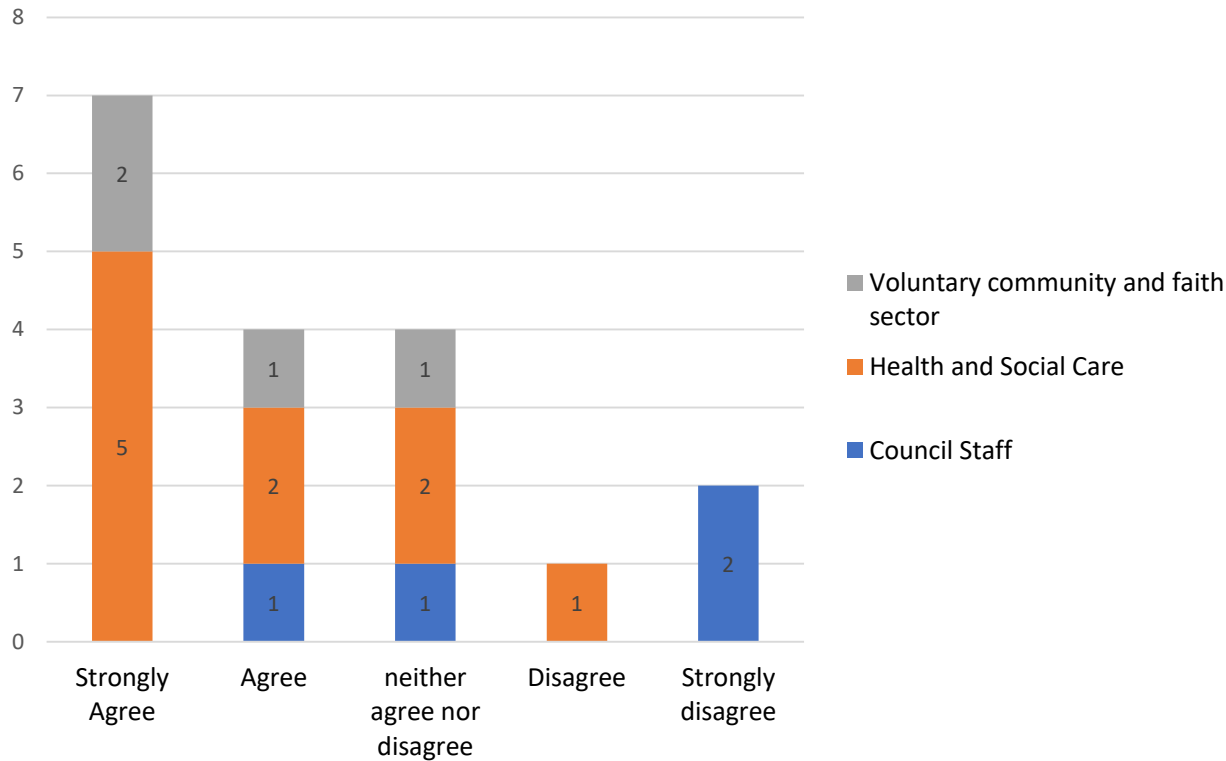
# Workplace Survey Analysis – Health and Social Care, VCFS, and Council Staff

A total of 18 people answered the 31 questions in the survey:

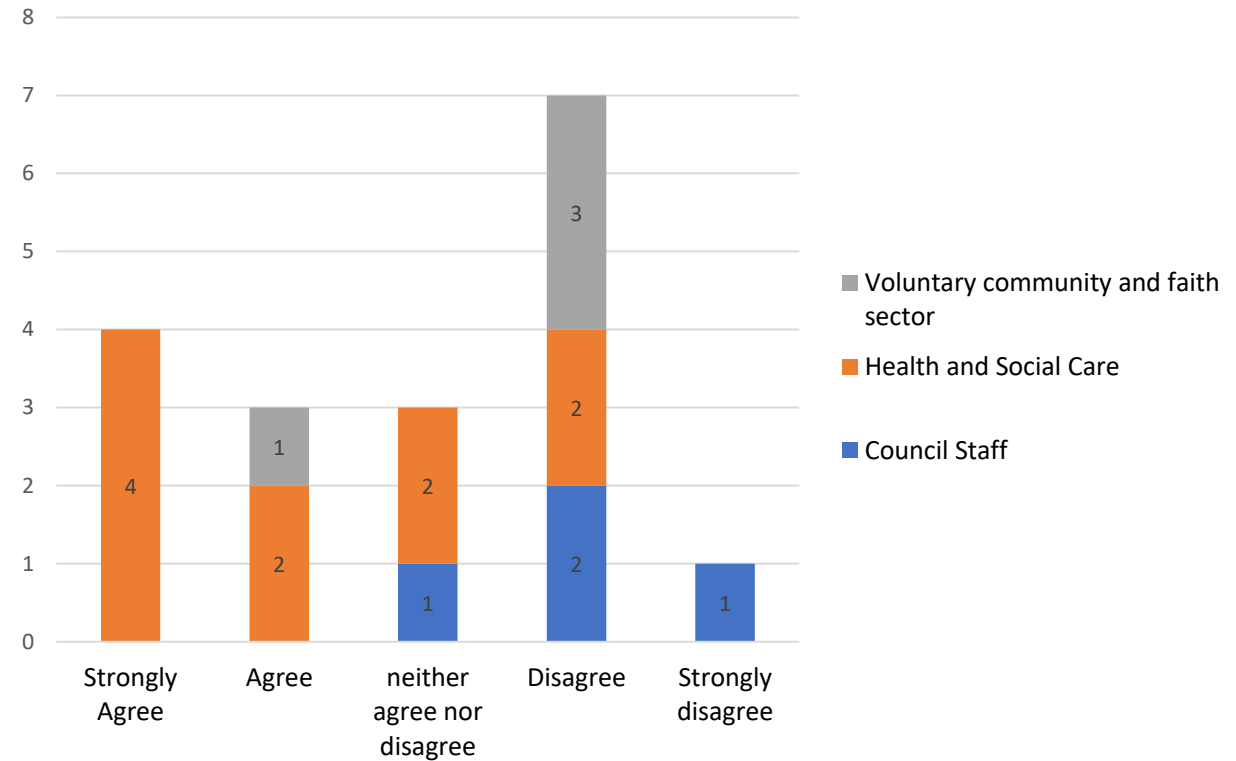
- 4 Council Staff
- 10 Health and Social Care Staff
- 4 Voluntary Community and Faith Sector Staff

# Q2. I am aware of the health and wellbeing support roles in Newham

### Social Prescribing Link Worker



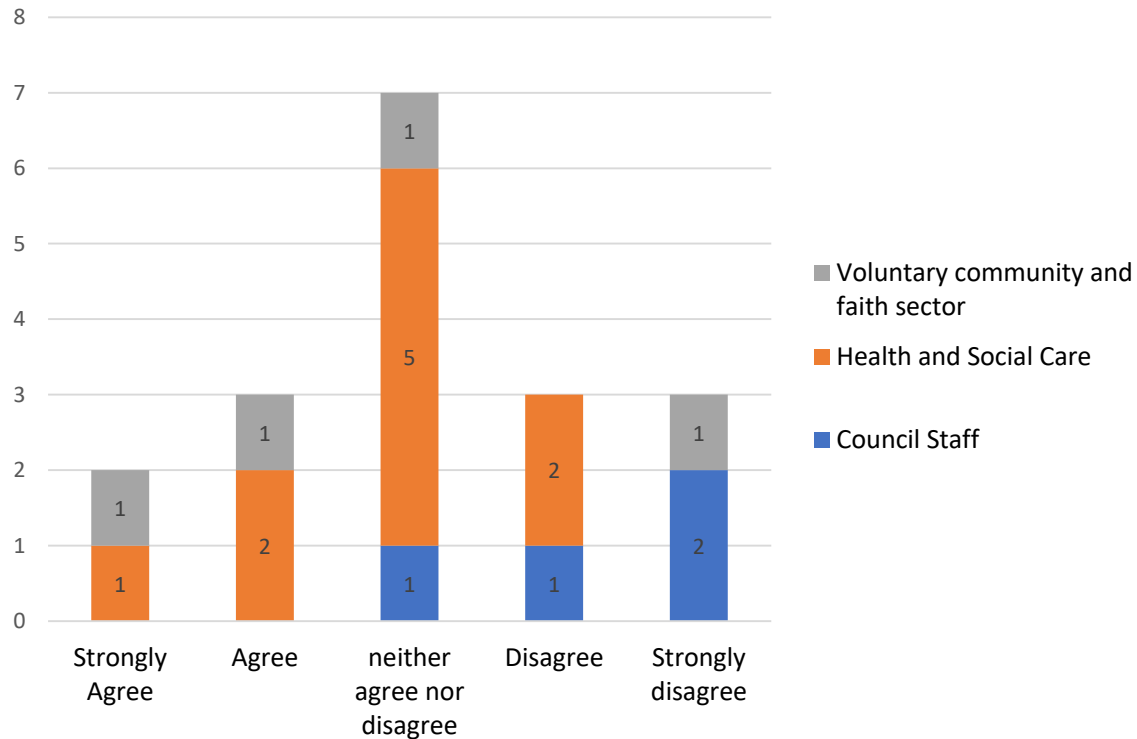
### Health and Wellbeing Coach



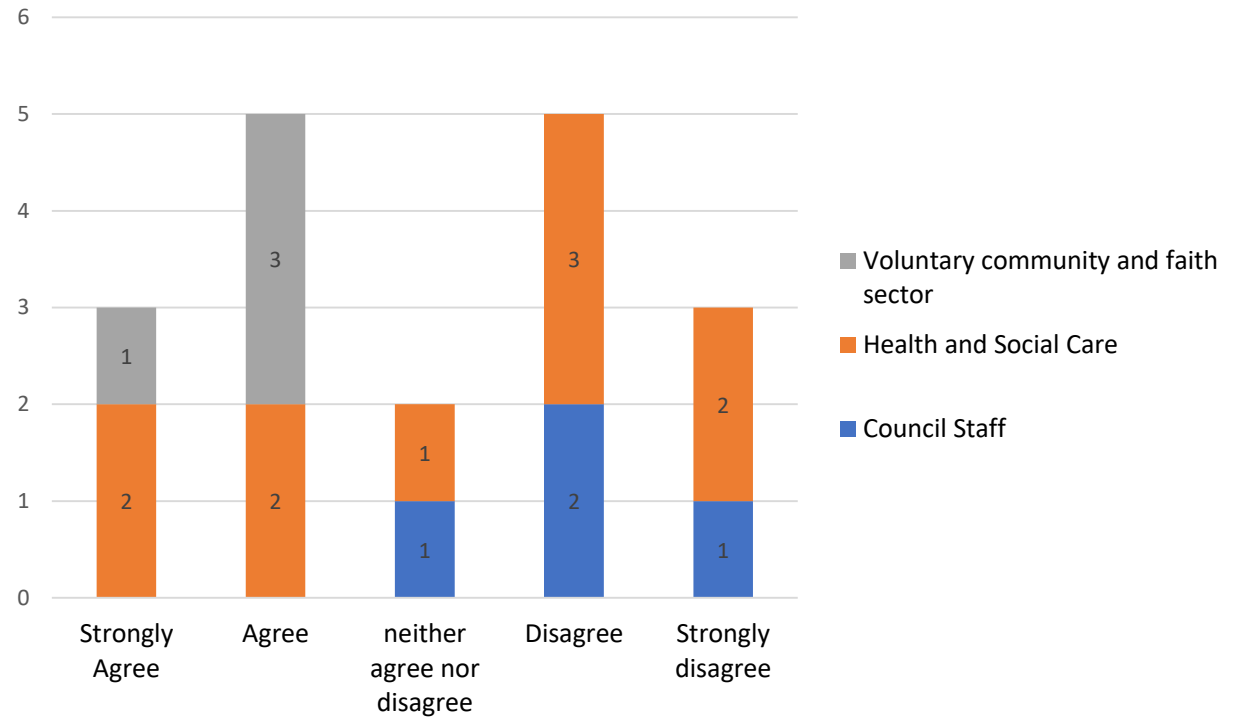
# Q2 cont. I am aware of the health and wellbeing support roles in Newham



## Health and Social Care Navigator



## Community Connector

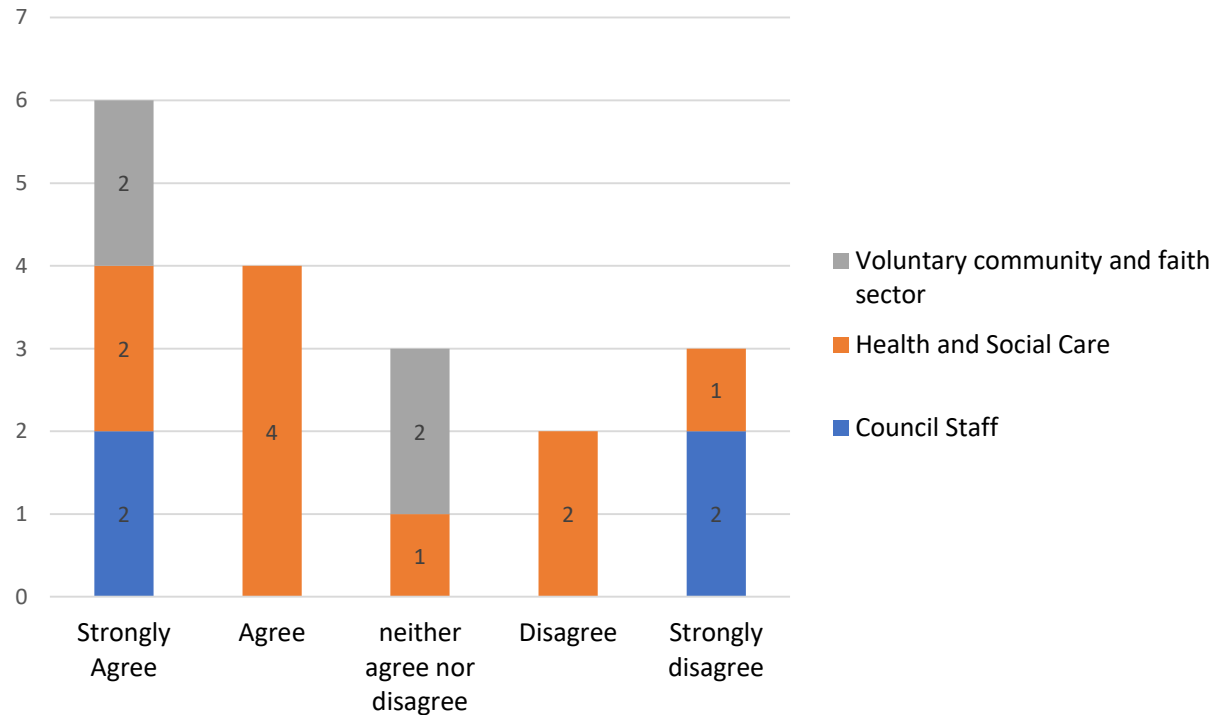


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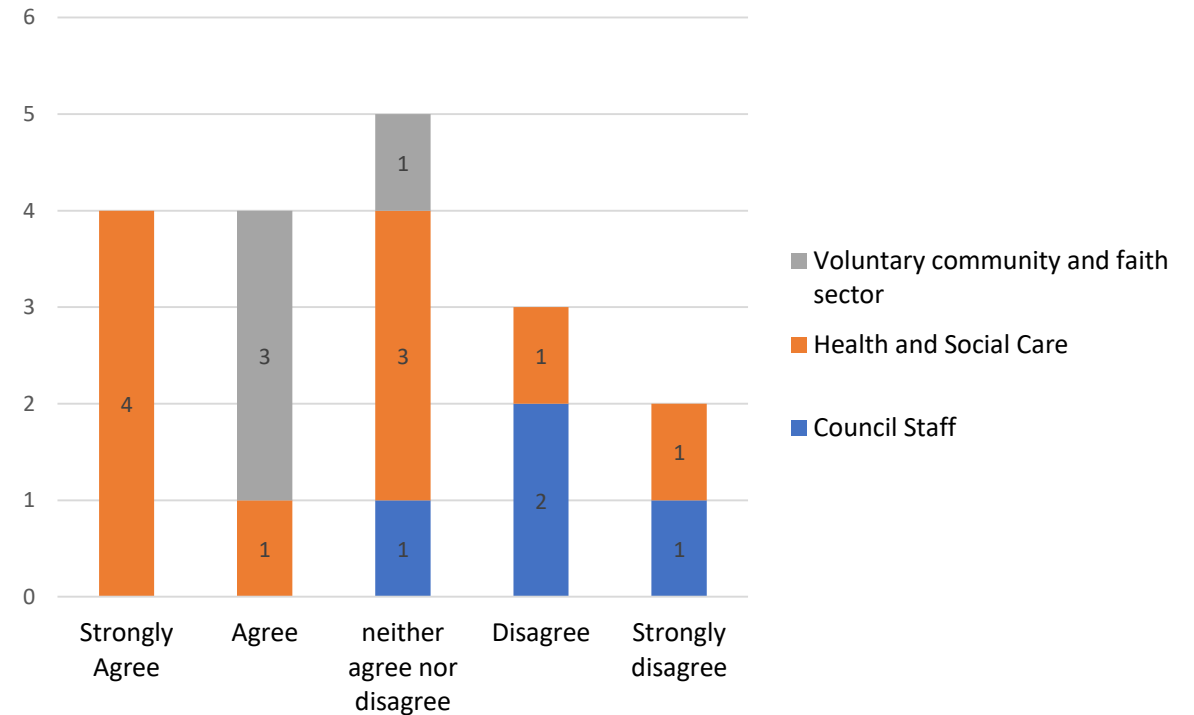


# Q2 cont. I am aware of the health and wellbeing support roles in Newham

## Community Neighbourhood Link Worker



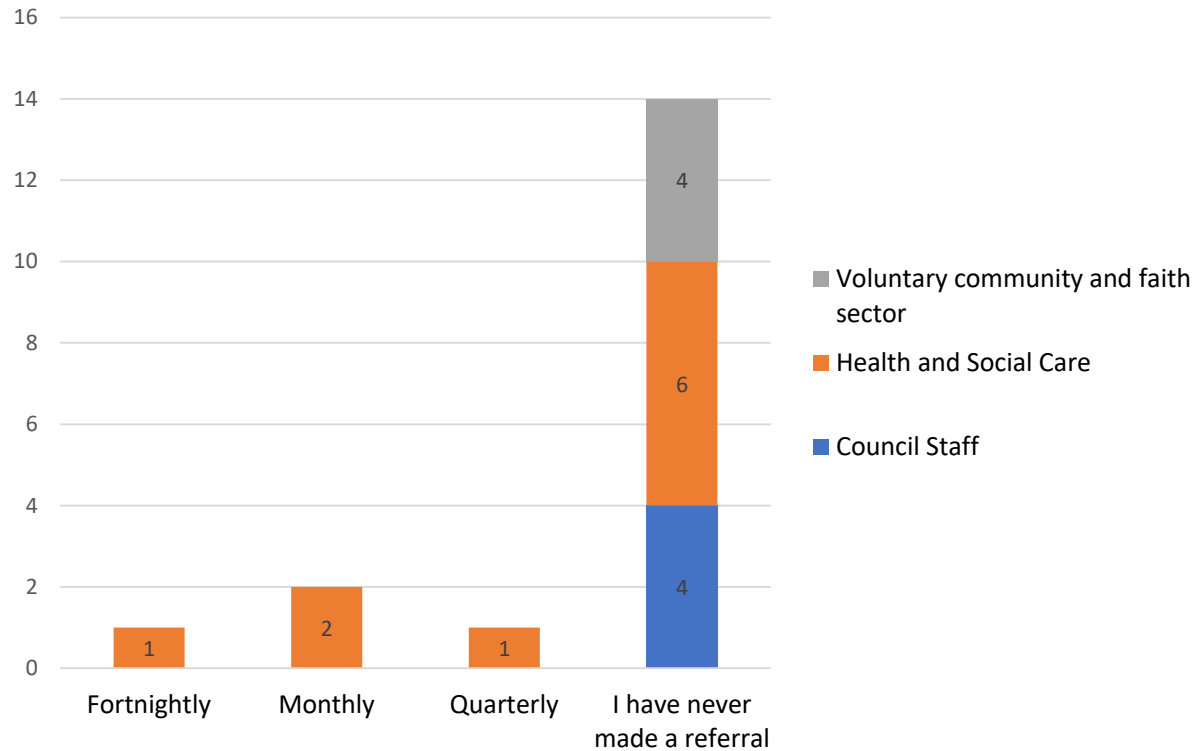
## Care Coordinator



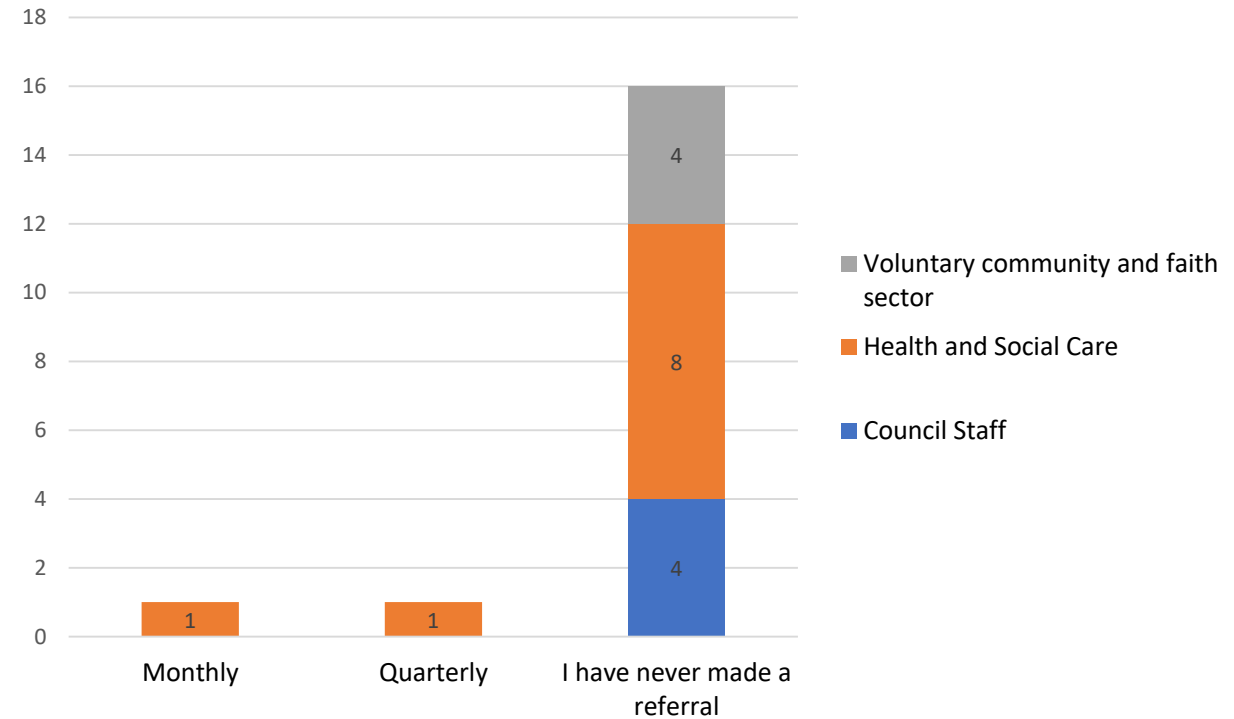
# Q3 How often do you refer a person to a health and wellbeing support role?



## Social Prescribing Link Worker



## Health and Wellbeing Coach

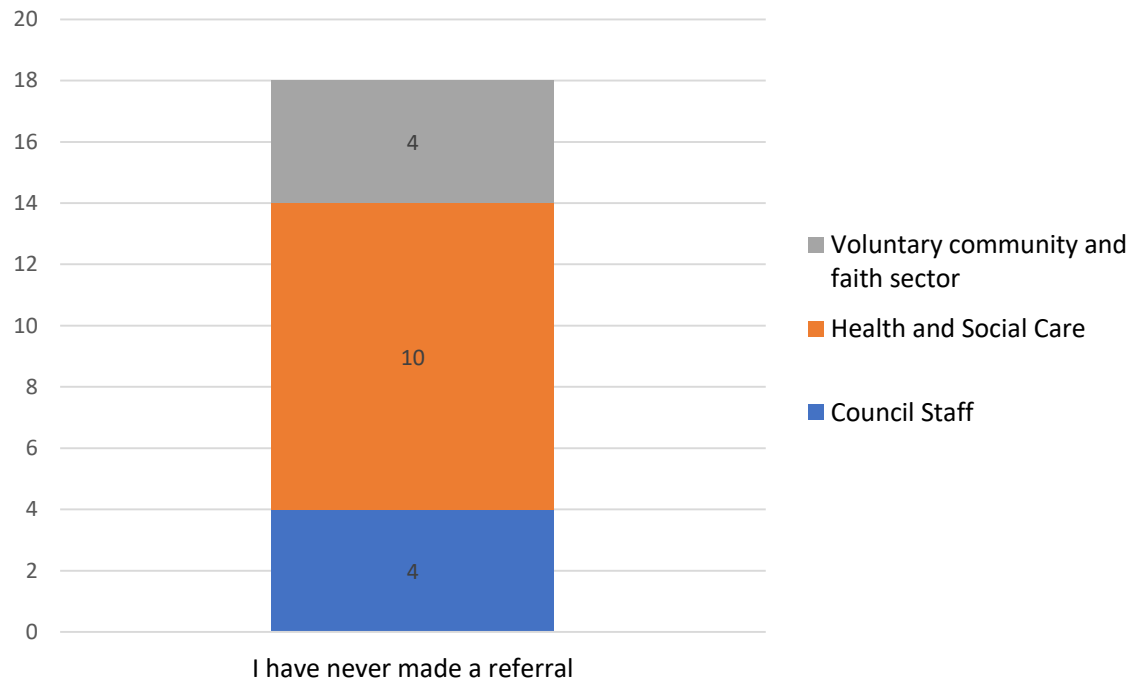


**WE ARE NEWHAM.**

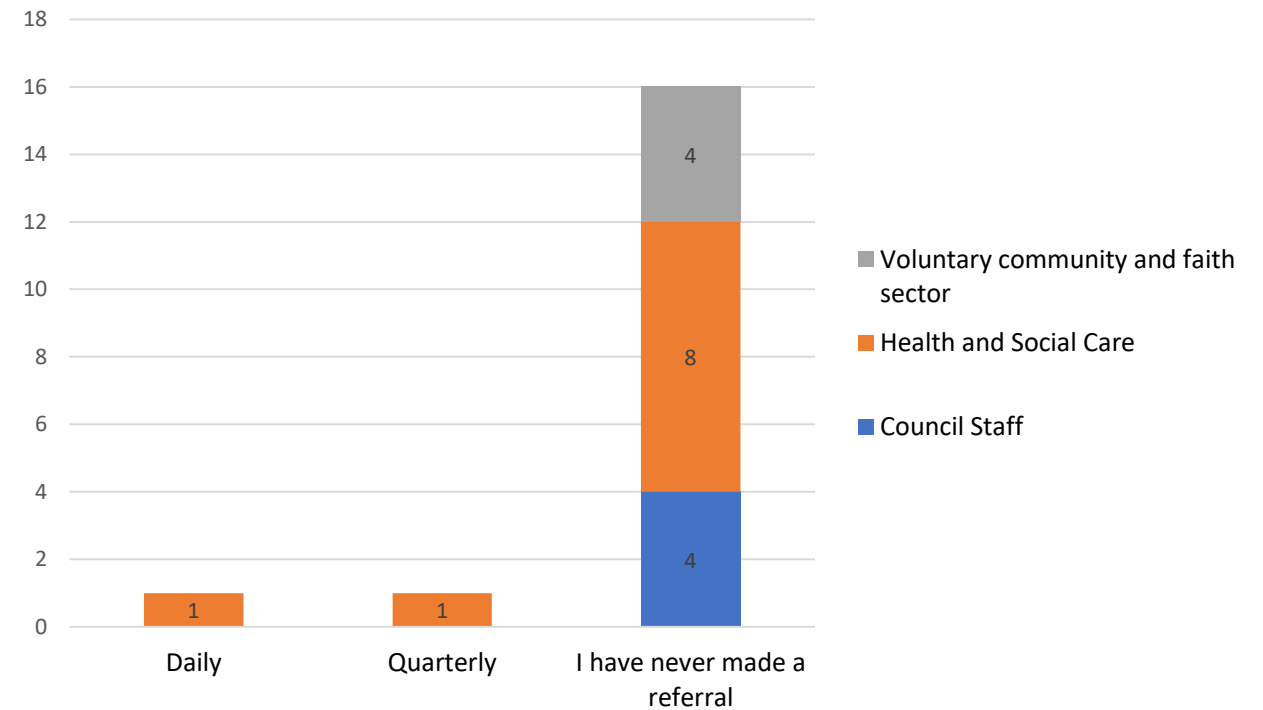


# Q3 Cont. How often do you refer a person to a health and wellbeing support role?

## Health and Social Care Navigator

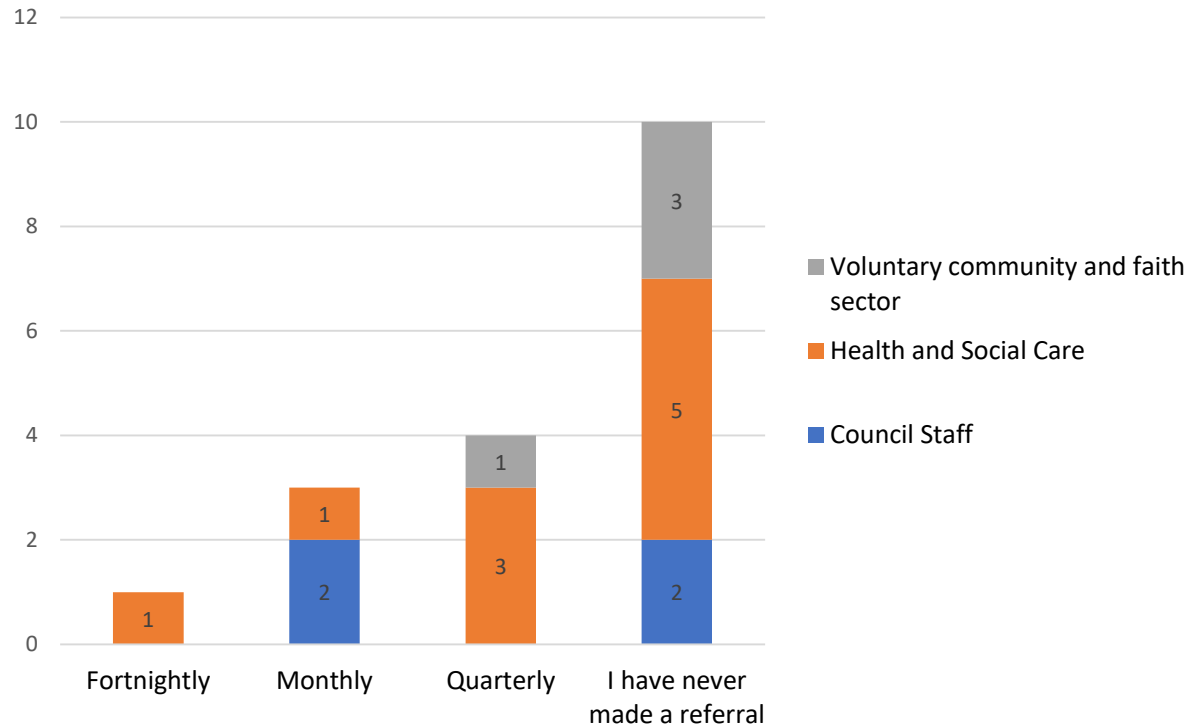


## Community Connector

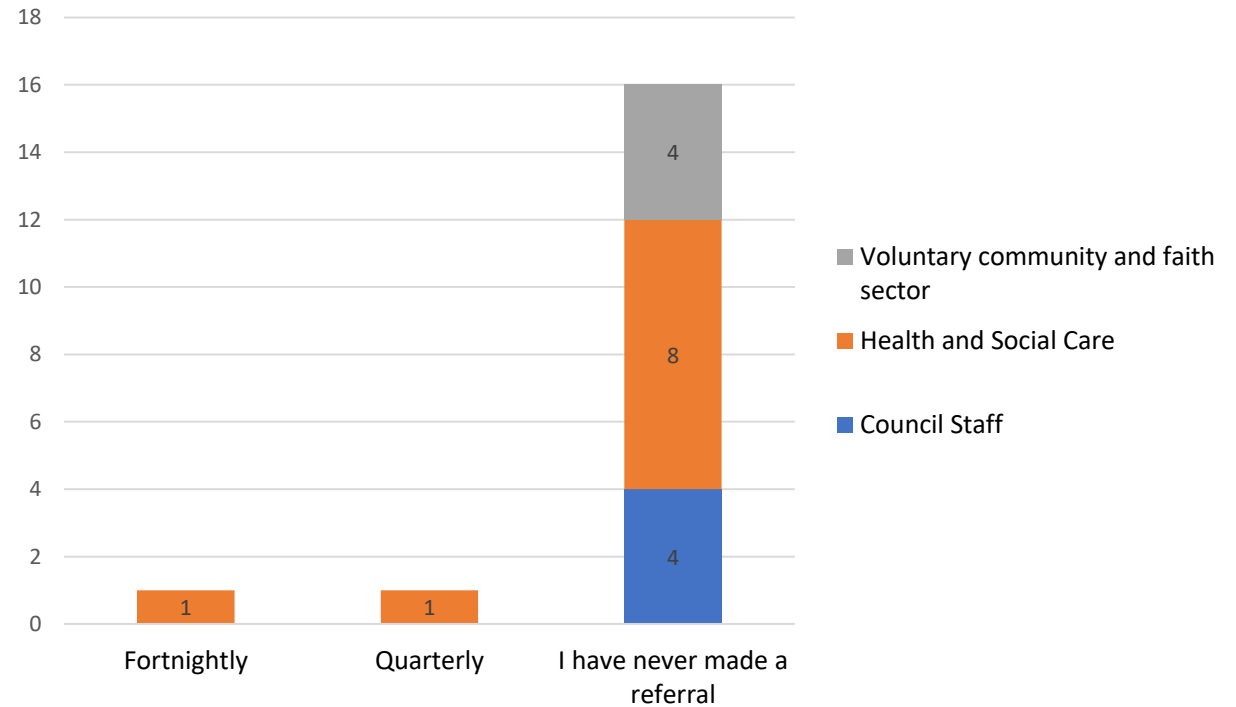


# Q3 Cont. How often do you refer a person to a health and wellbeing support role?

## Community Neighbourhood Link Worker

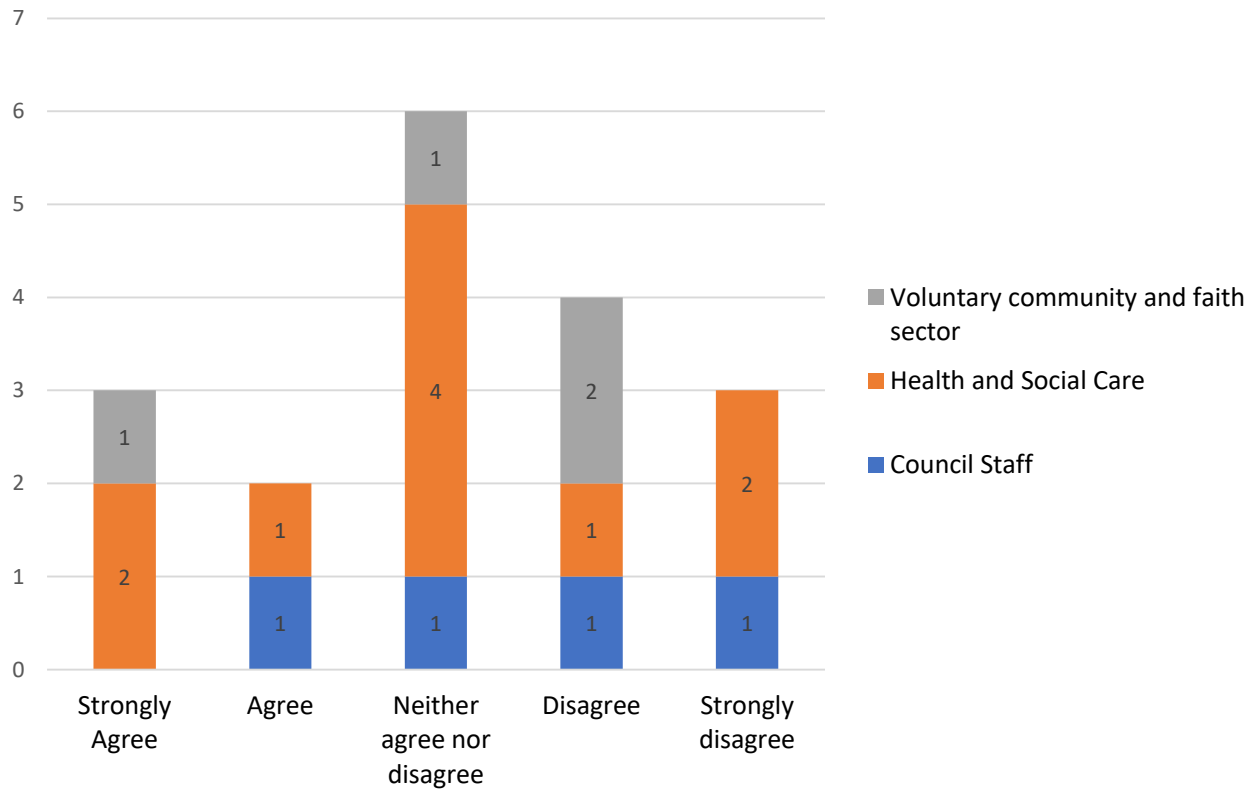


## Care Coordinator

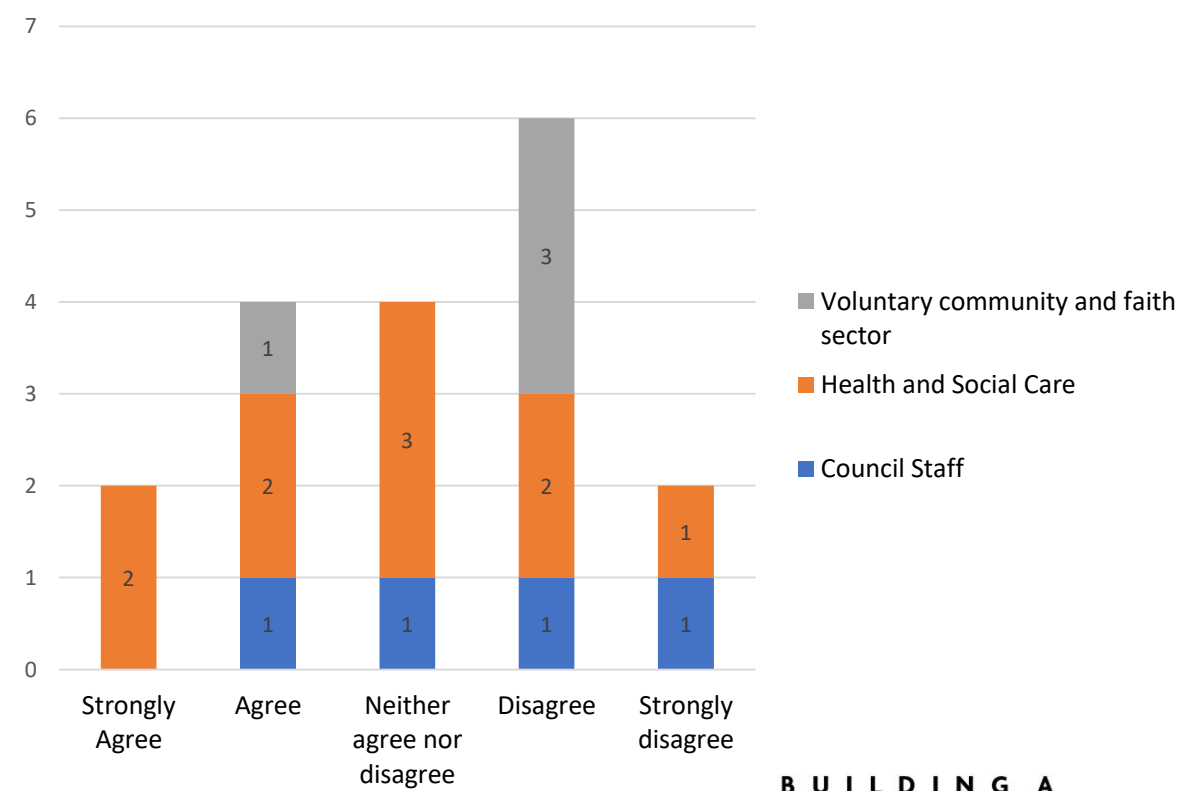


# Q4. I understand the differences between of the six health and wellbeing support roles

### Social Prescribing Link Worker



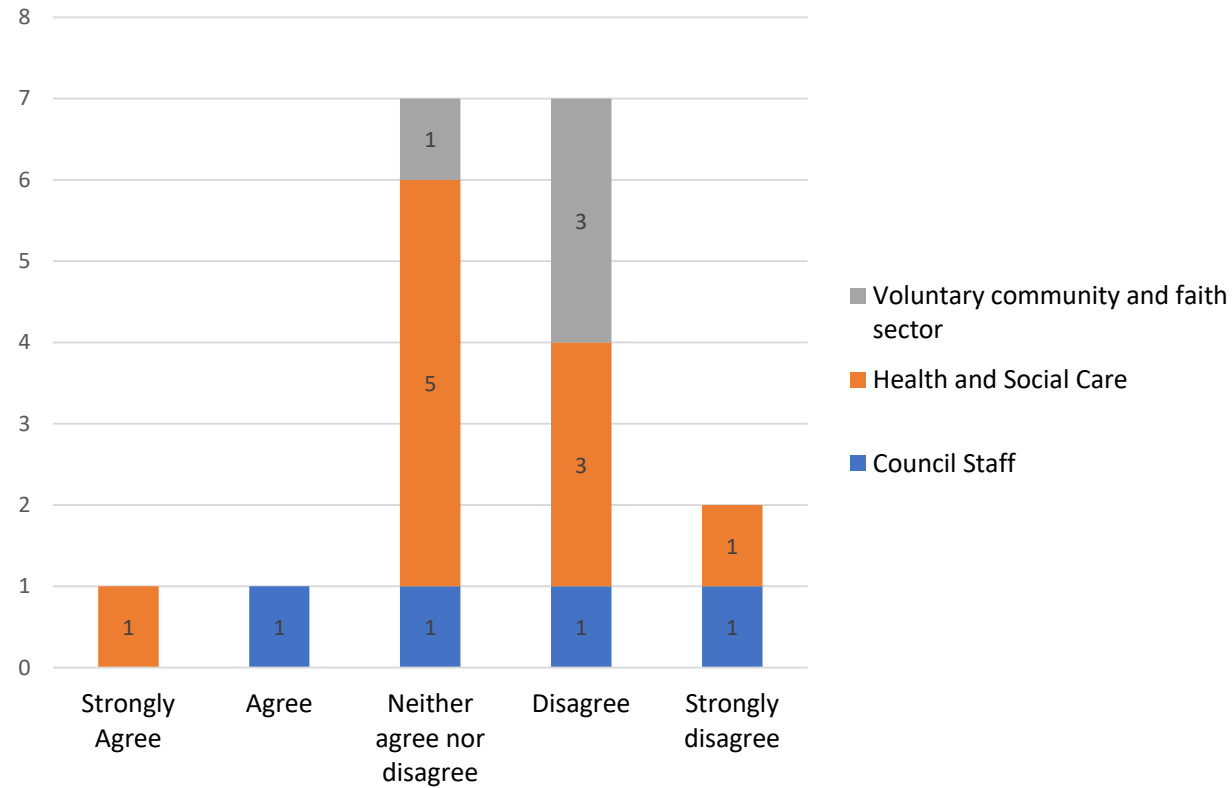
### Health and Wellbeing Coach



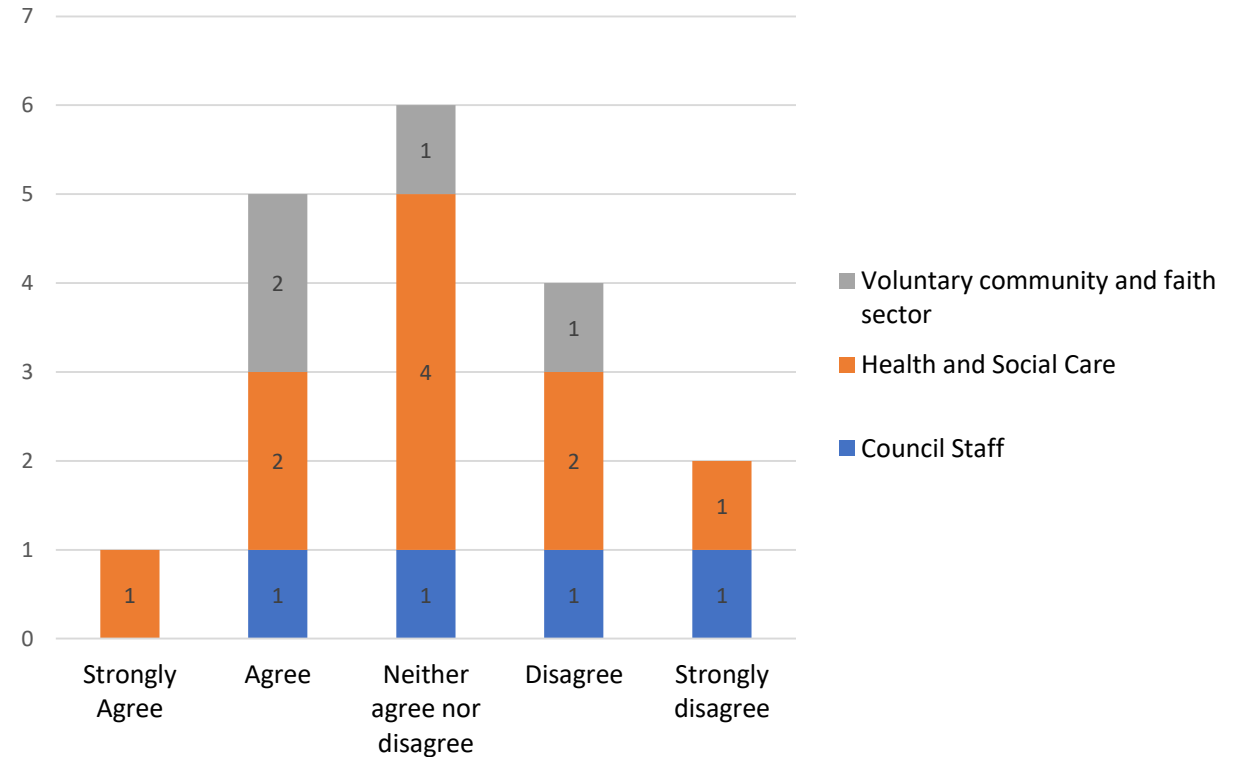


# Q4 Cont. I understand the differences between of the six health and wellbeing support roles

## Health and Social Care Navigator

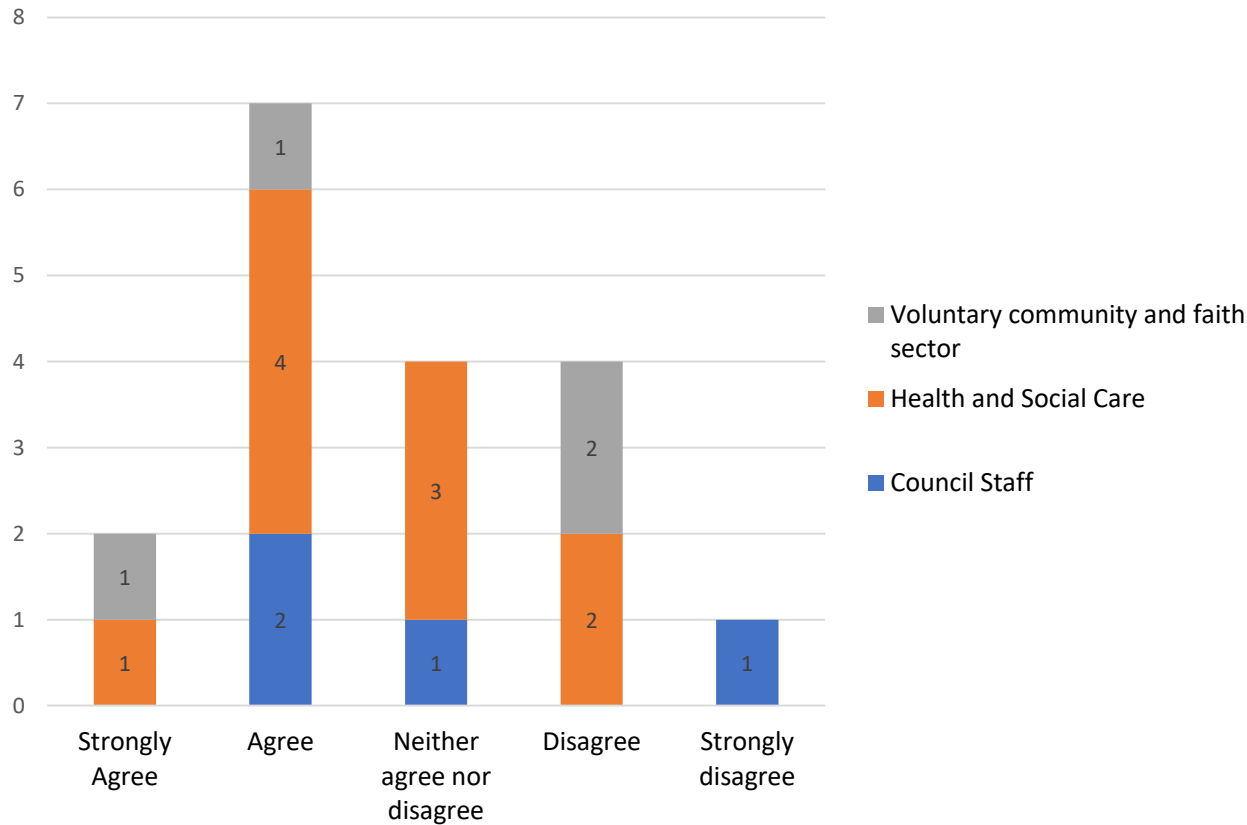


## Community Connector

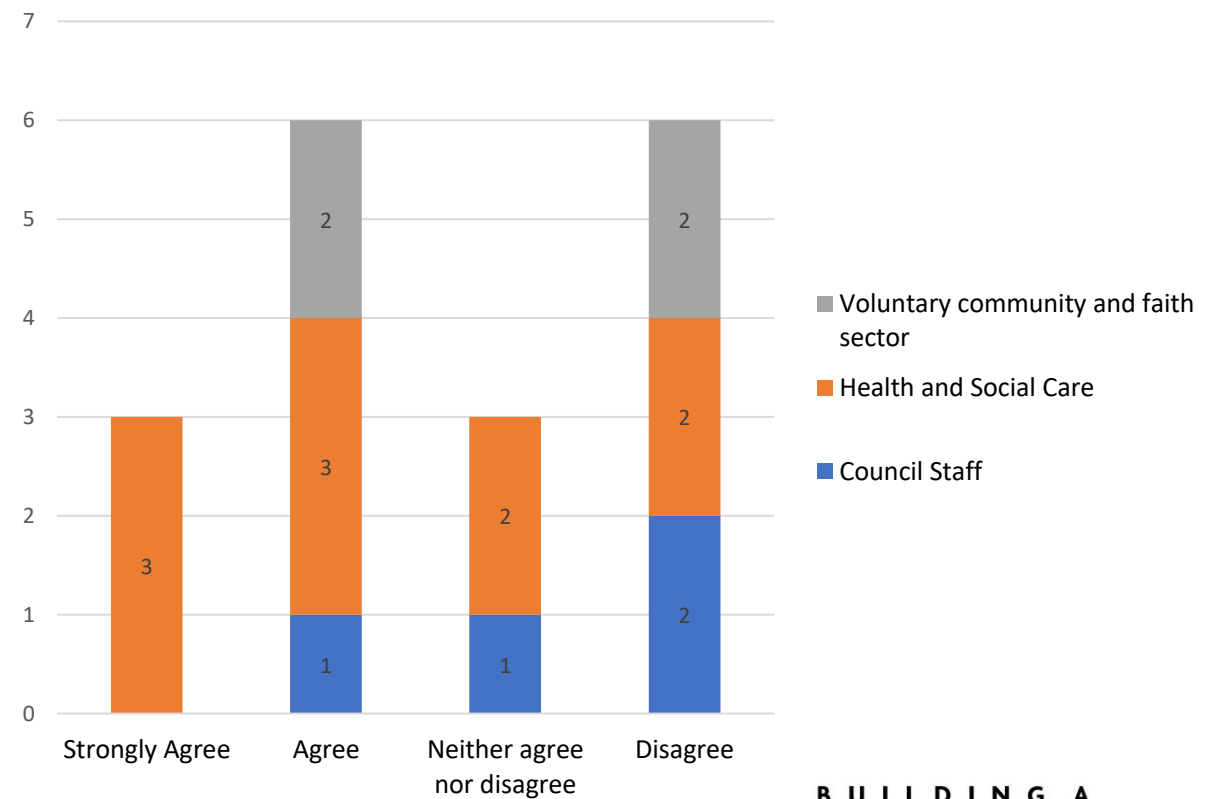


# Q4 Cont. I understand the differences between of the six health and wellbeing support roles

## Community Neighbourhood Link Worker



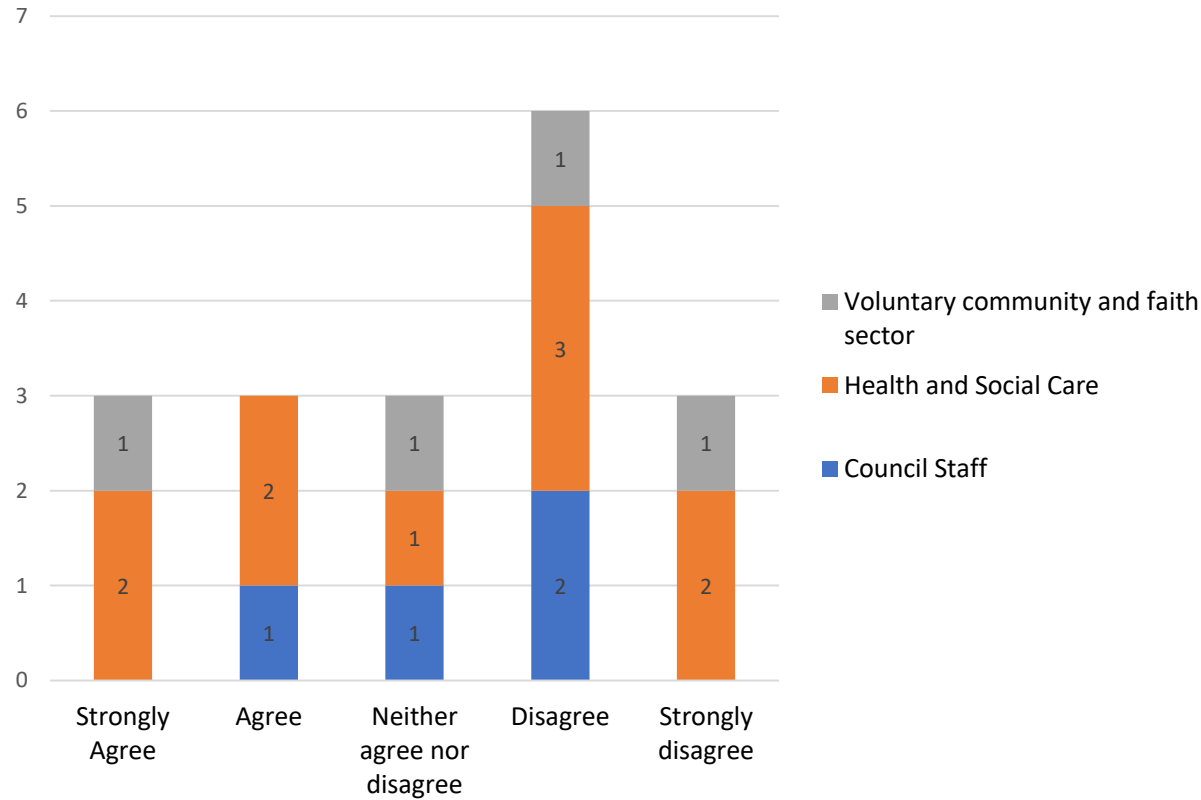
## Care Coordinator



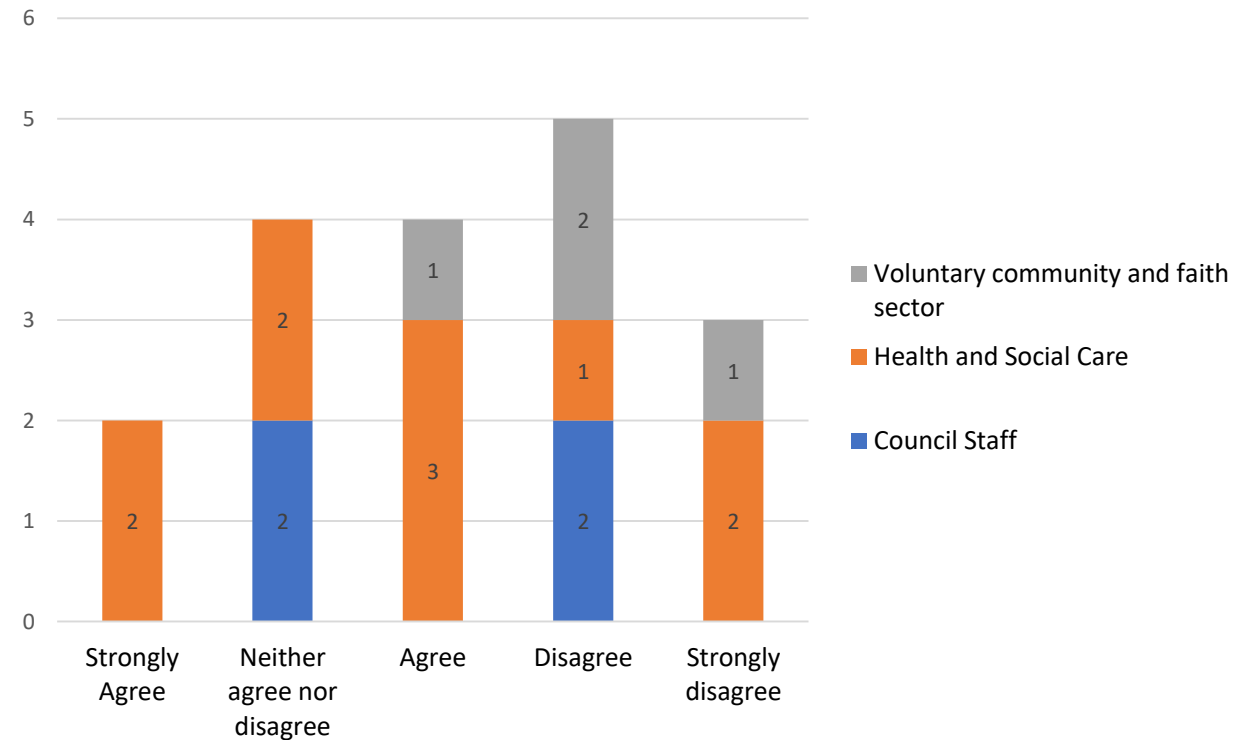
# Q5. I understand the aims and purpose of the health and wellbeing support roles and what they offer residents.



## Social Prescribing Link Worker



## Health and Wellbeing Coach

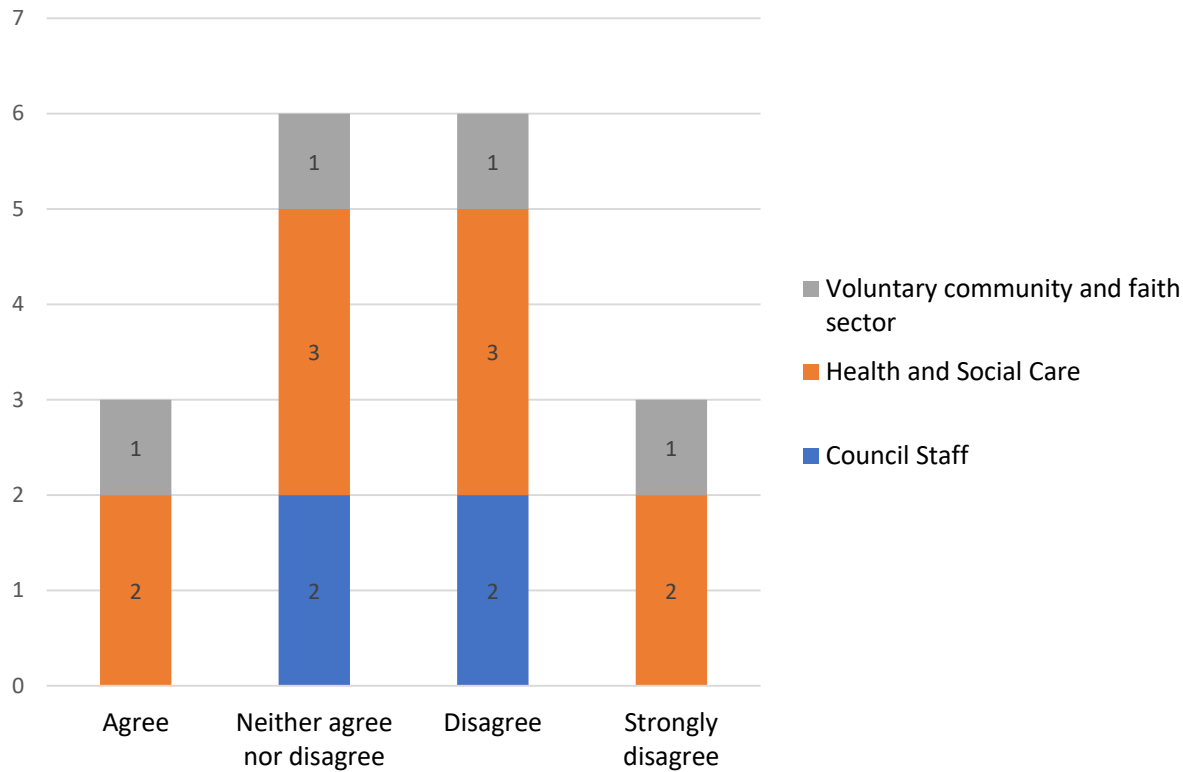


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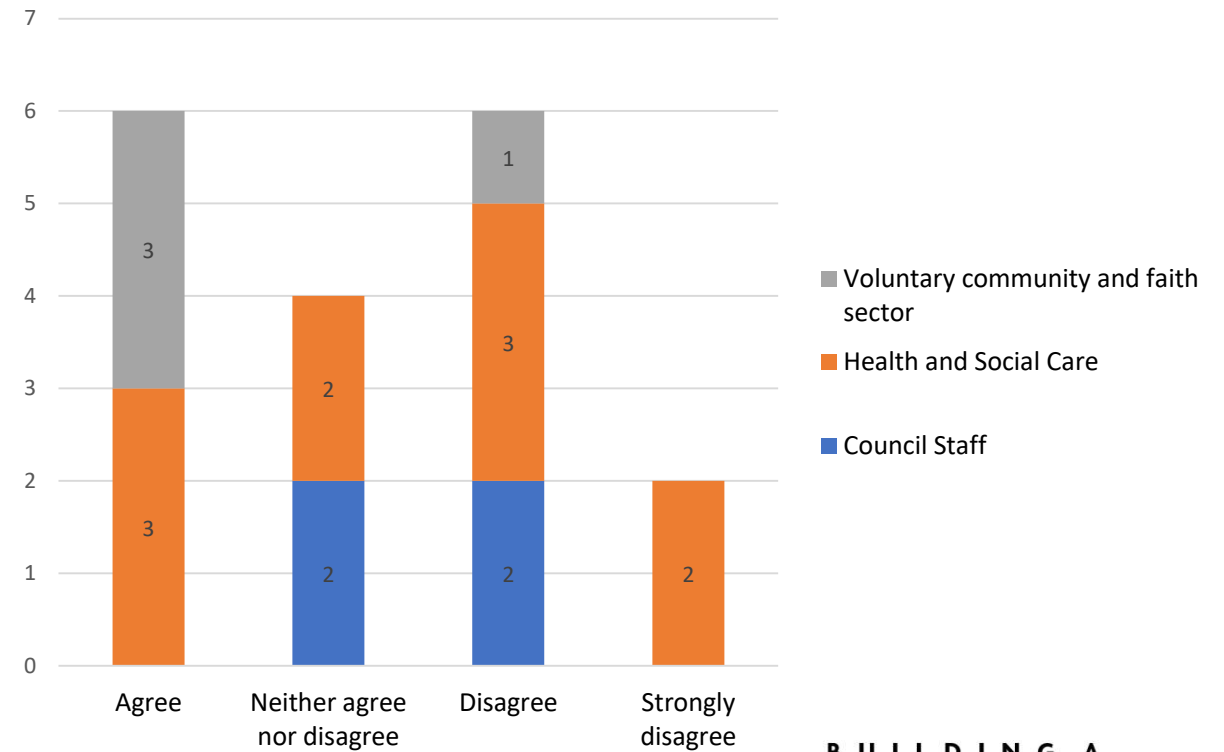


# Q5 Cont. I understand the aims and purpose of the health and wellbeing support roles and what they offer residents.

### Care Navigator

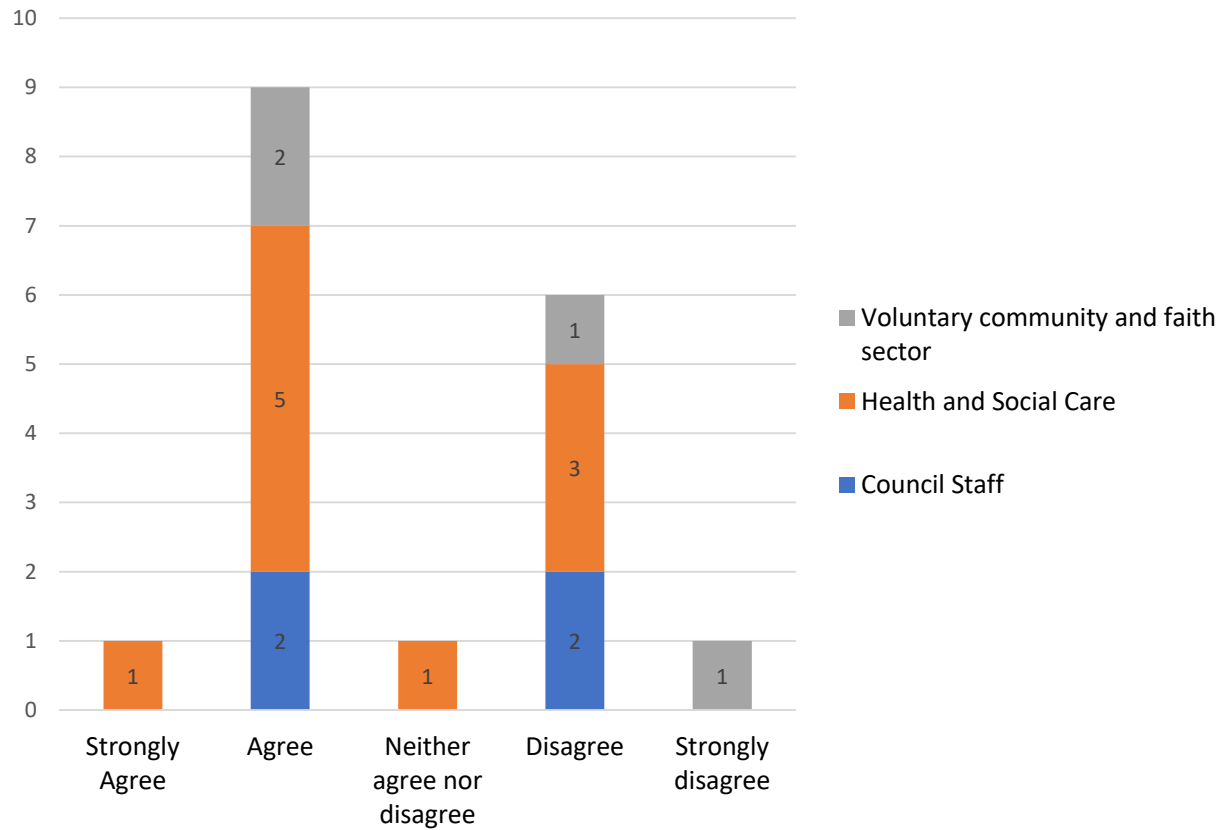


### Community Connector

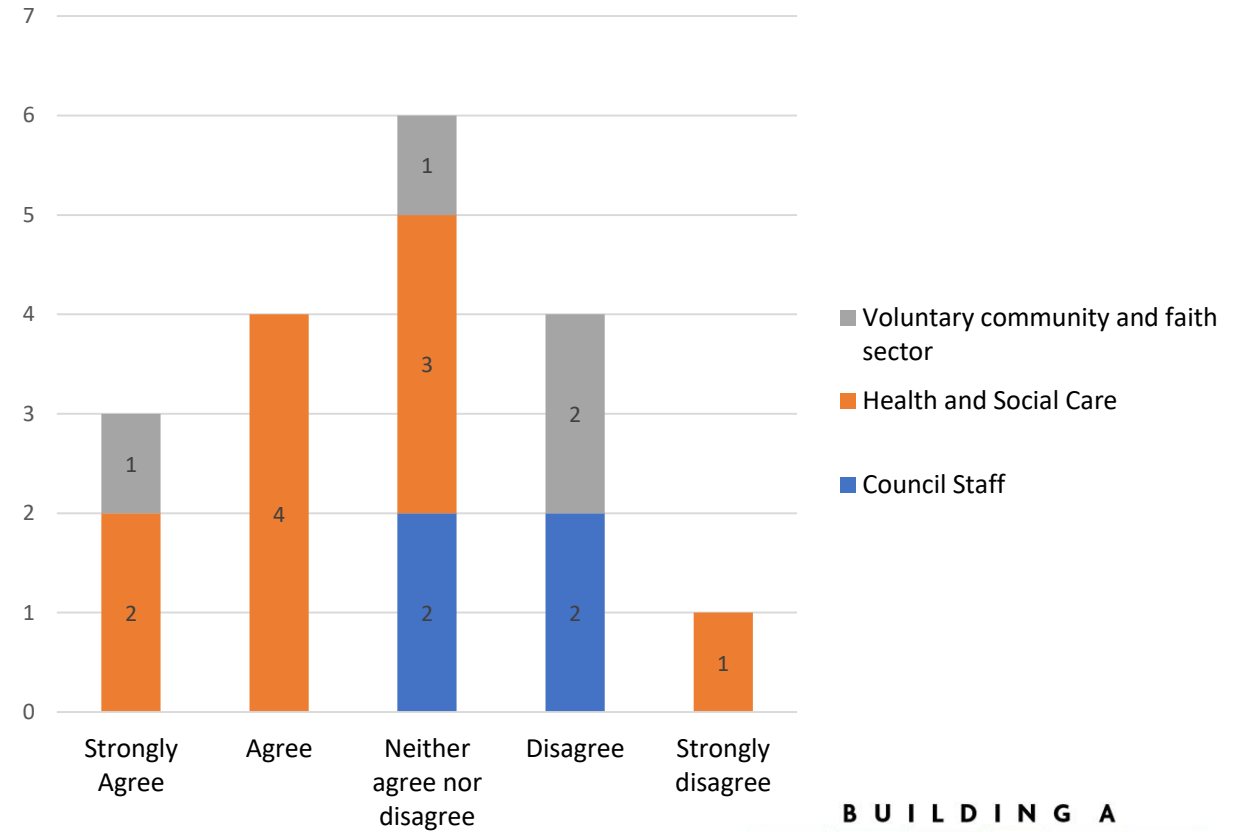


# Q5 Cont. I understand the aims and purpose of the health and wellbeing support roles and what they offer residents.

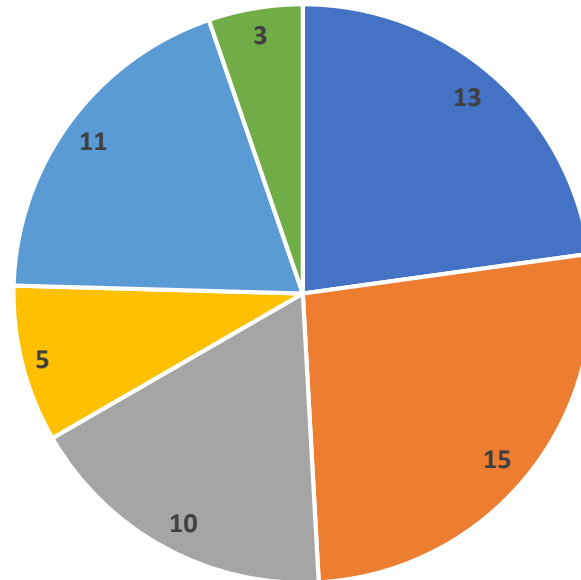
## Community Neighbourhood Link Worker



## Care Coordinator



# Q6. Which of these do you feel best describes the purpose of the health and wellbeing support roles? Select those you feel are the most appropriate.

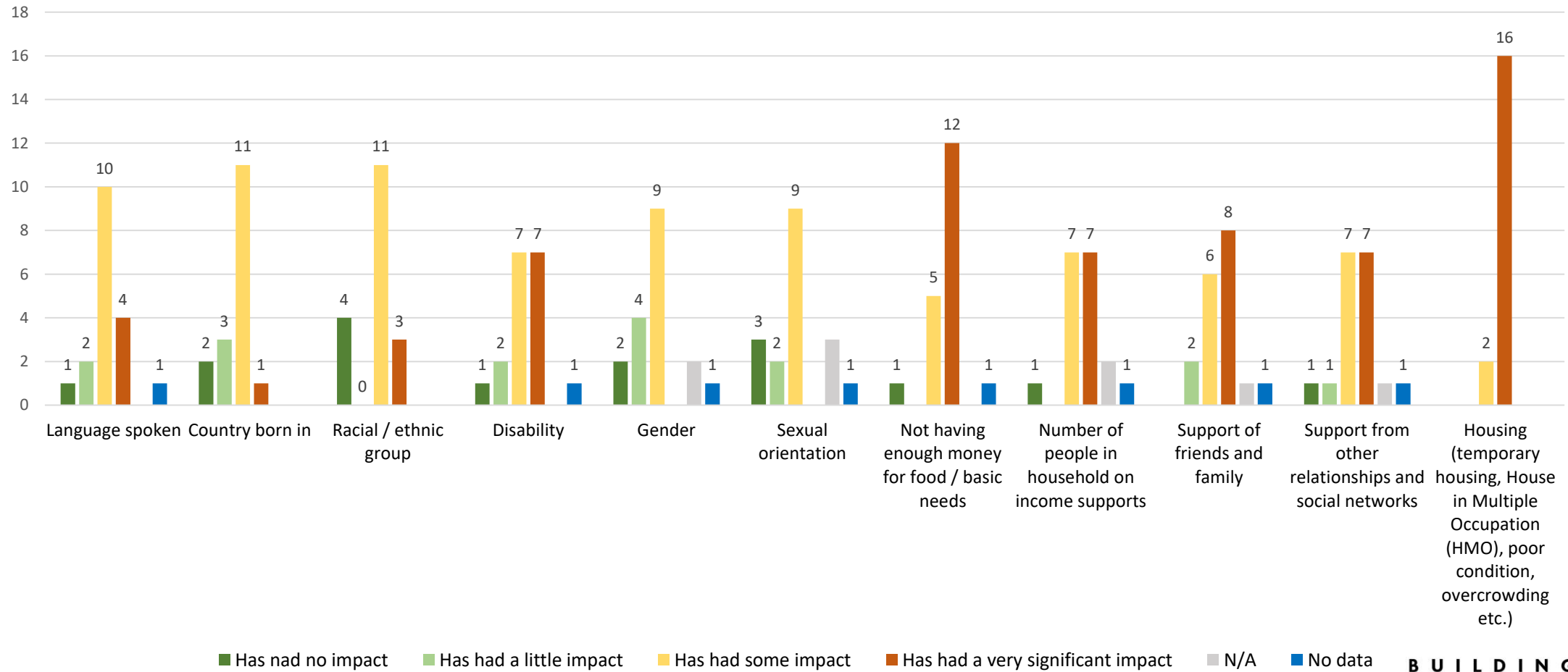


'Other' included:

- 'Supporting people to be more connected to their community and avoiding loneliness'
- 'Role dependent'
- 'Other'

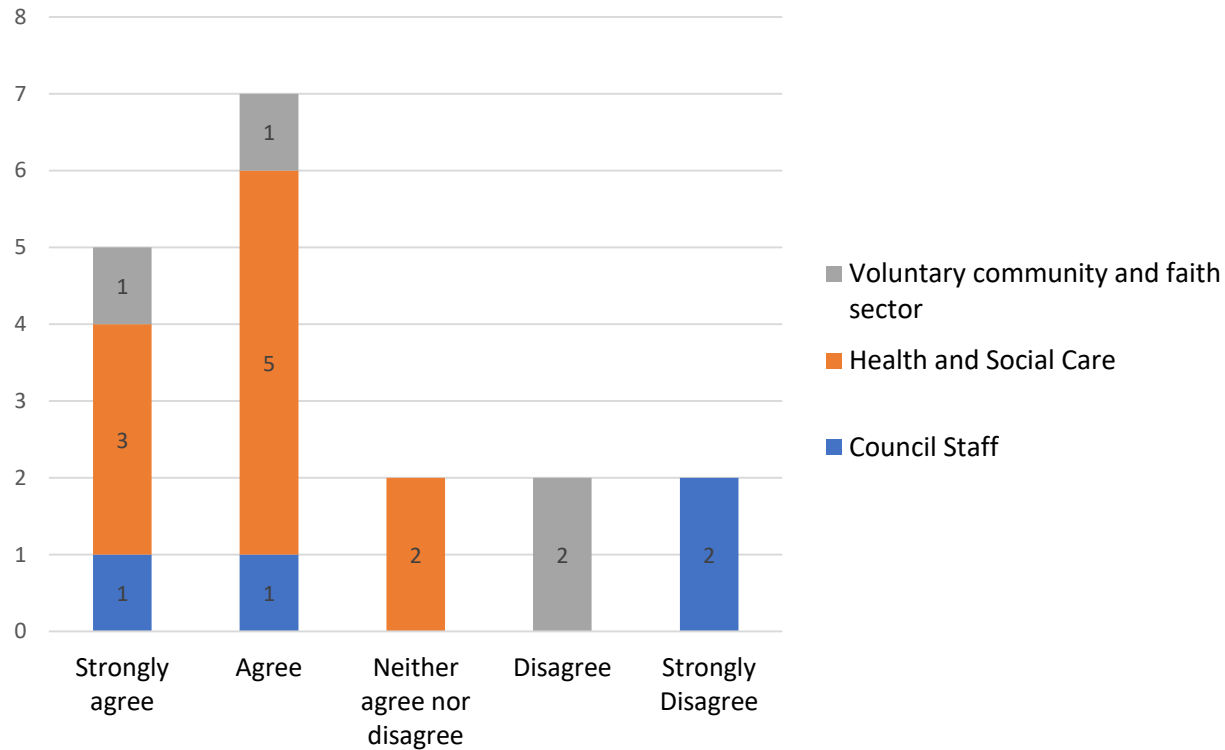
- Signposting
- Helping people take care of their health and wellbeing by connecting them to activities and support in the community
- Working with people to create personalised wellbeing plans based on what matters to them
- Developing wellbeing action plans for people based on their patient notes
- Preventing non-clinical issues from escalating into the need for formal health and social care support
- Other

# Q7. To what extent do you feel the following have an adverse impact on the health and wellbeing of the residents you see?

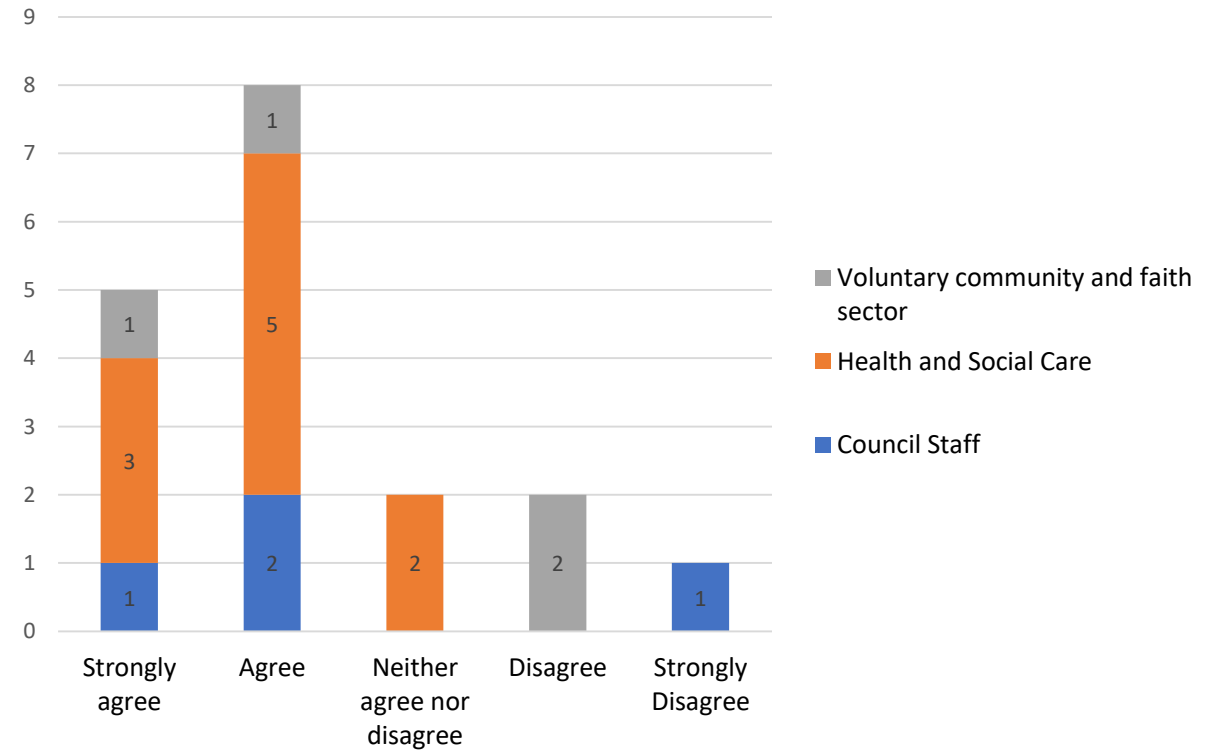


# Q8. I am aware of the six components of the NHS Comprehensive Model of Universal Personalised Care.

## Shared decision making



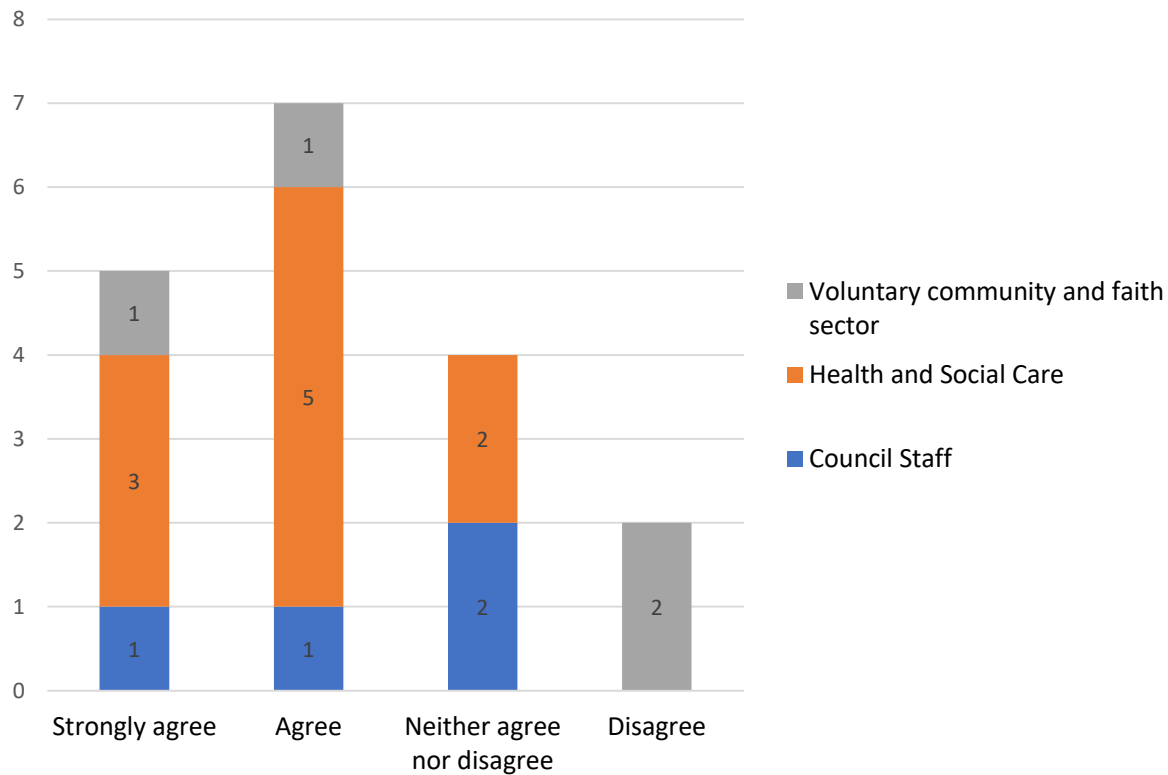
## Personalised care and support planning



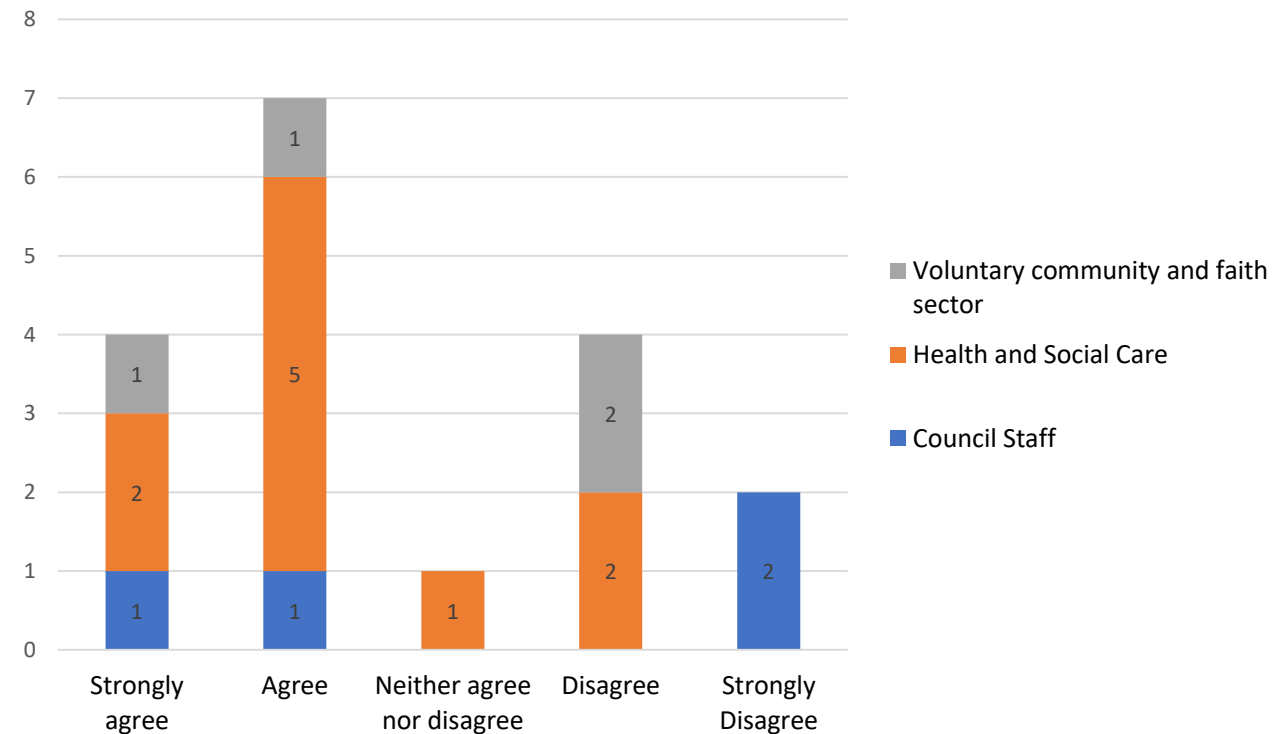


# Q8 cont. I am aware of the six components of the NHS Comprehensive Model of Universal Personalised Care.

## Enabling choice, including legal rights to choice

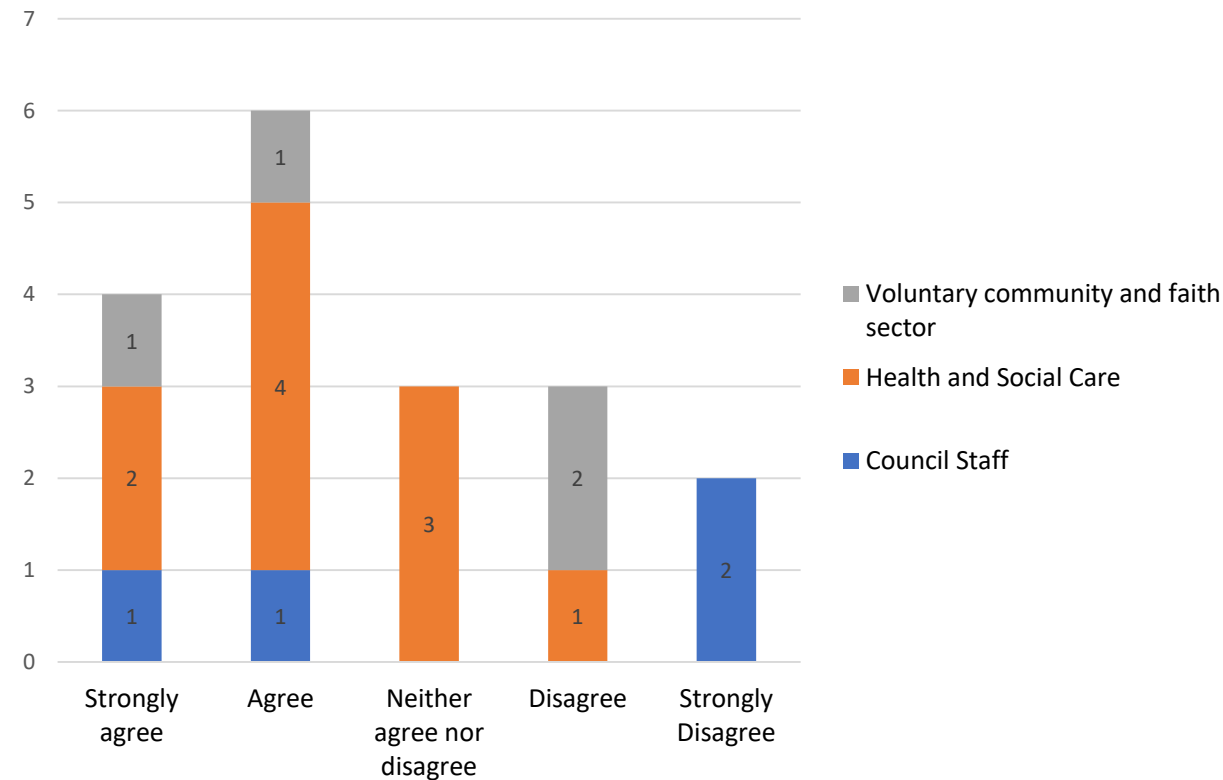


## Social prescribing and community-based support

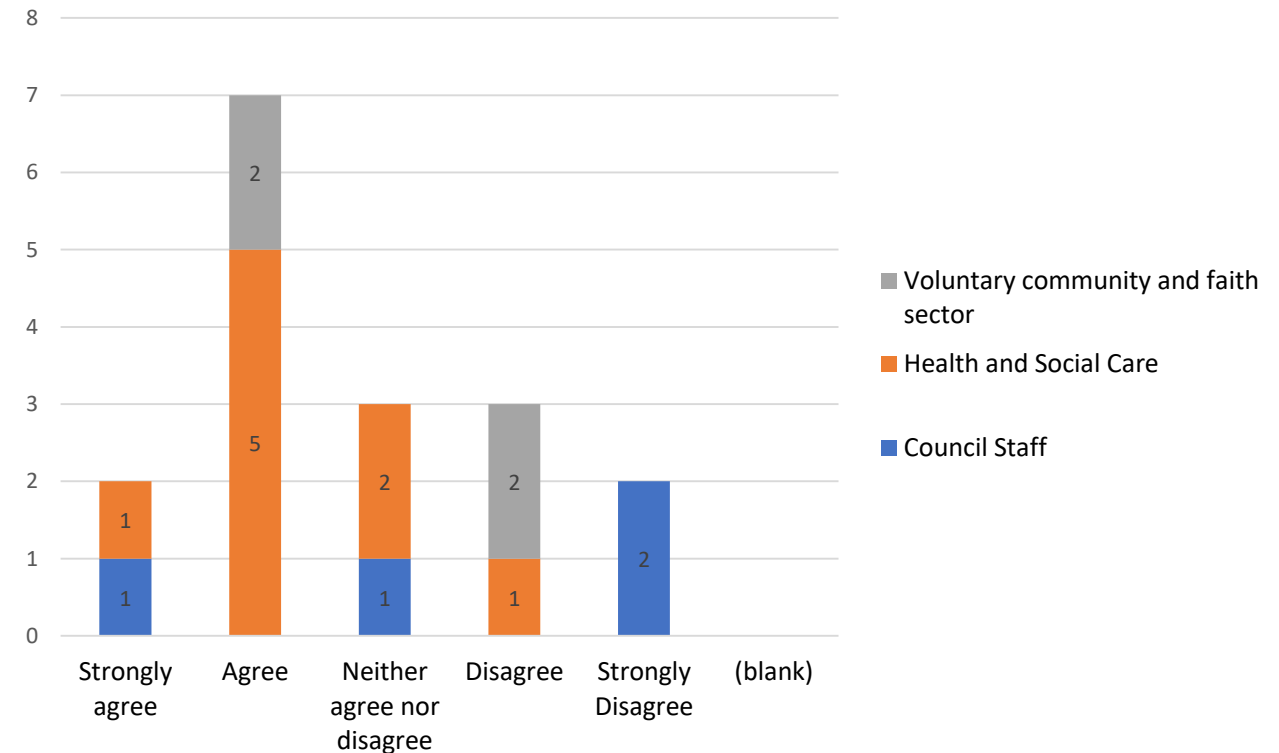


# Q8 cont. I am aware of the six components of the NHS Comprehensive Model of Universal Personalised Care.

## Supported self-management

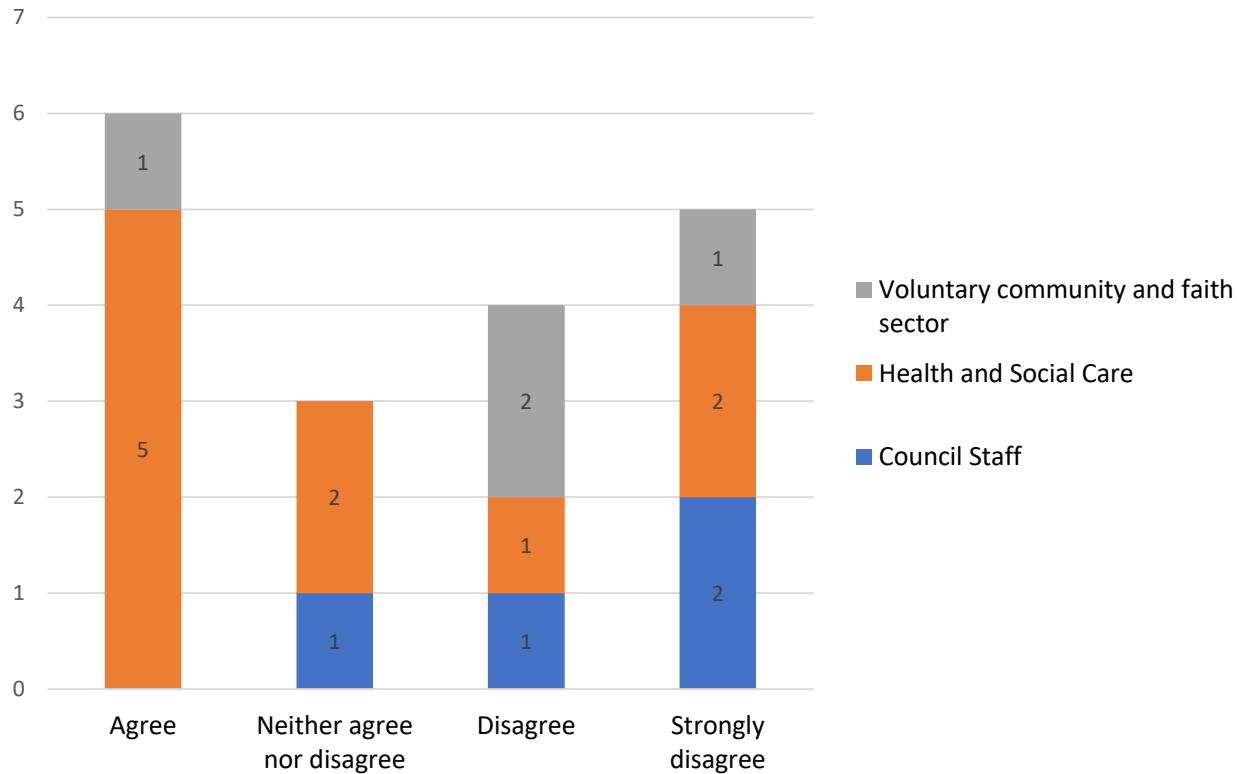


## Personal health budgets and integrated personal budgets

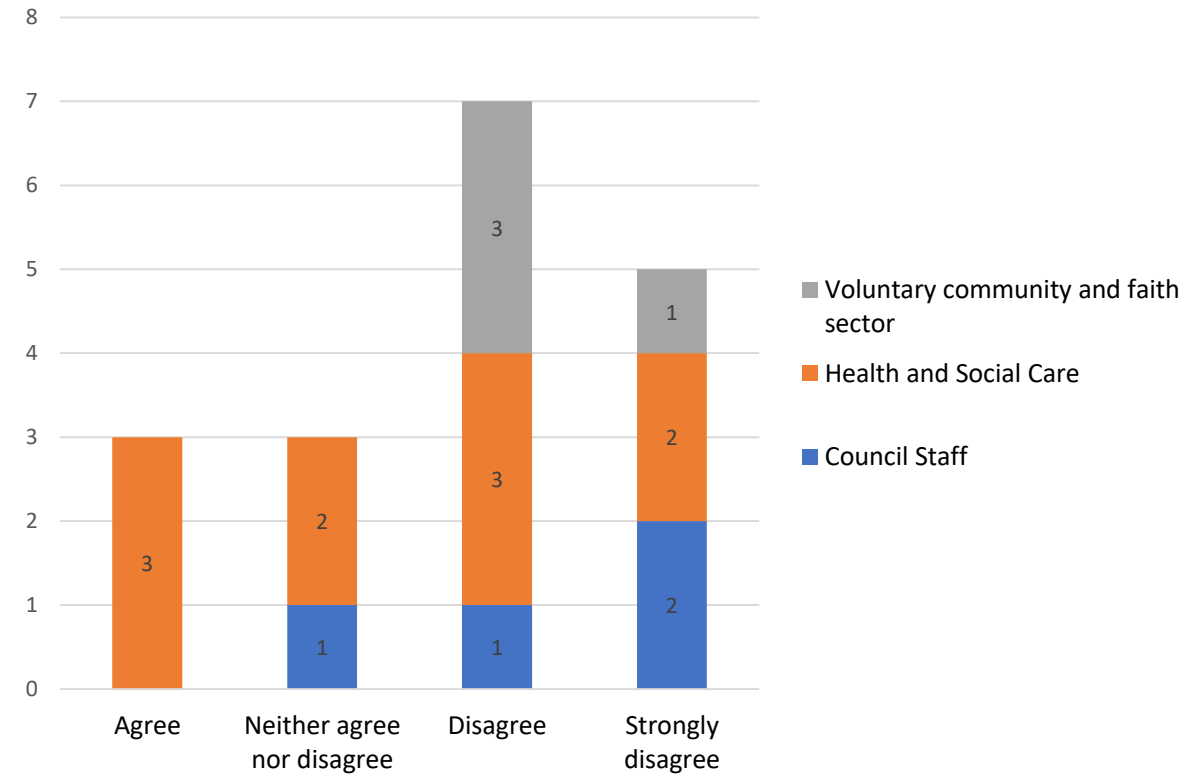


# Q9. I know the referral criteria when I need to refer a resident to the health and wellbeing support roles.

## Social Prescribing Link Worker

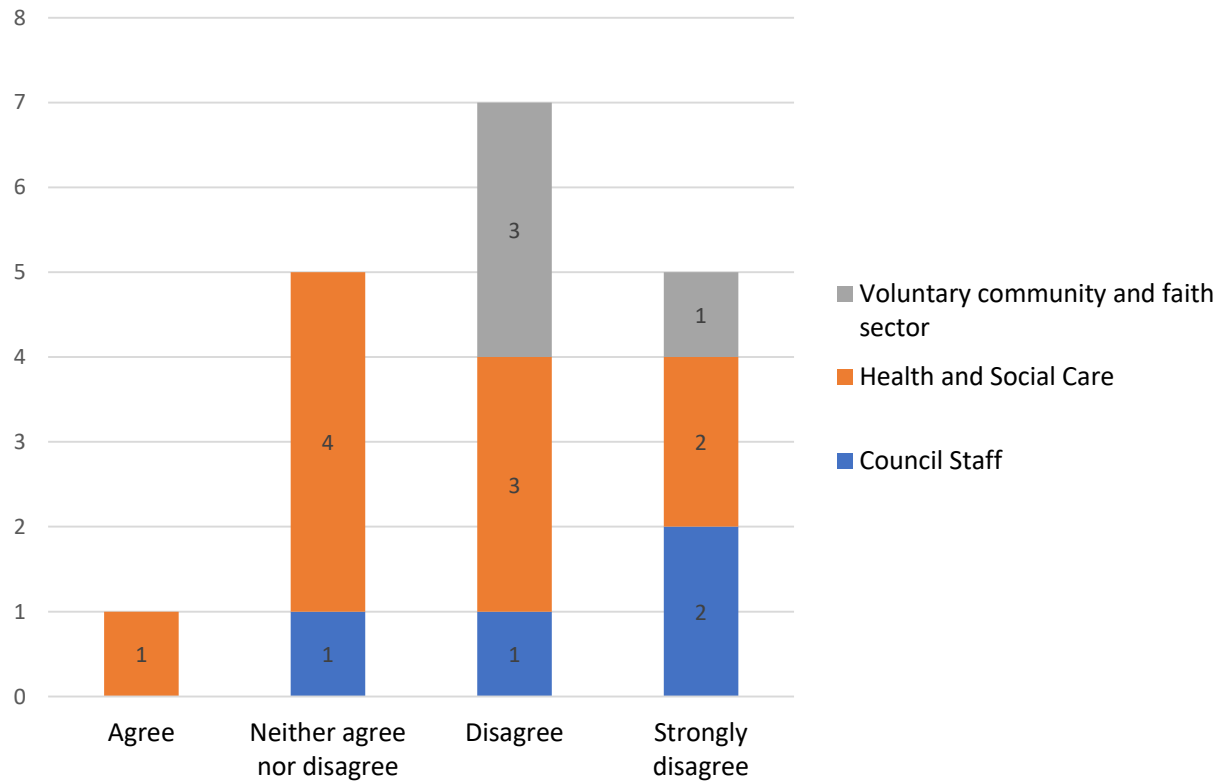


## Health and Wellbeing Coach

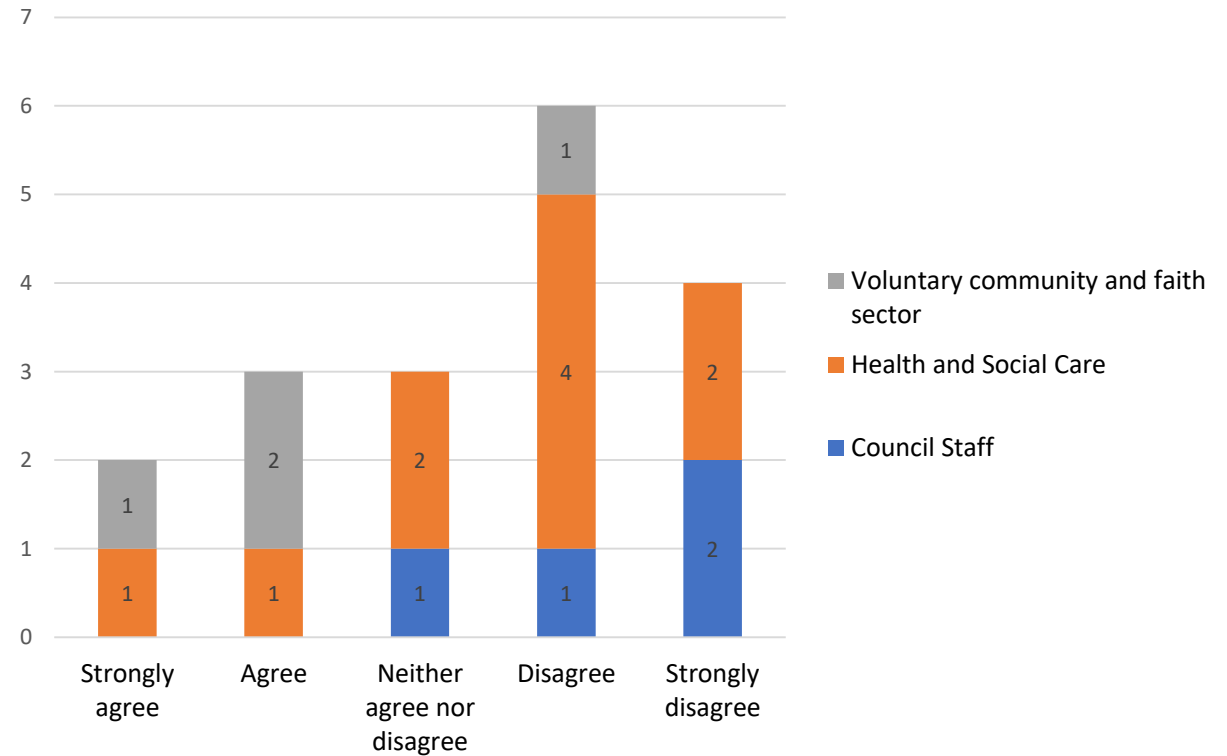


# Q9 cont. I know the referral criteria when I need to refer a resident to the health and wellbeing support roles.

## Health and Social Care Navigator

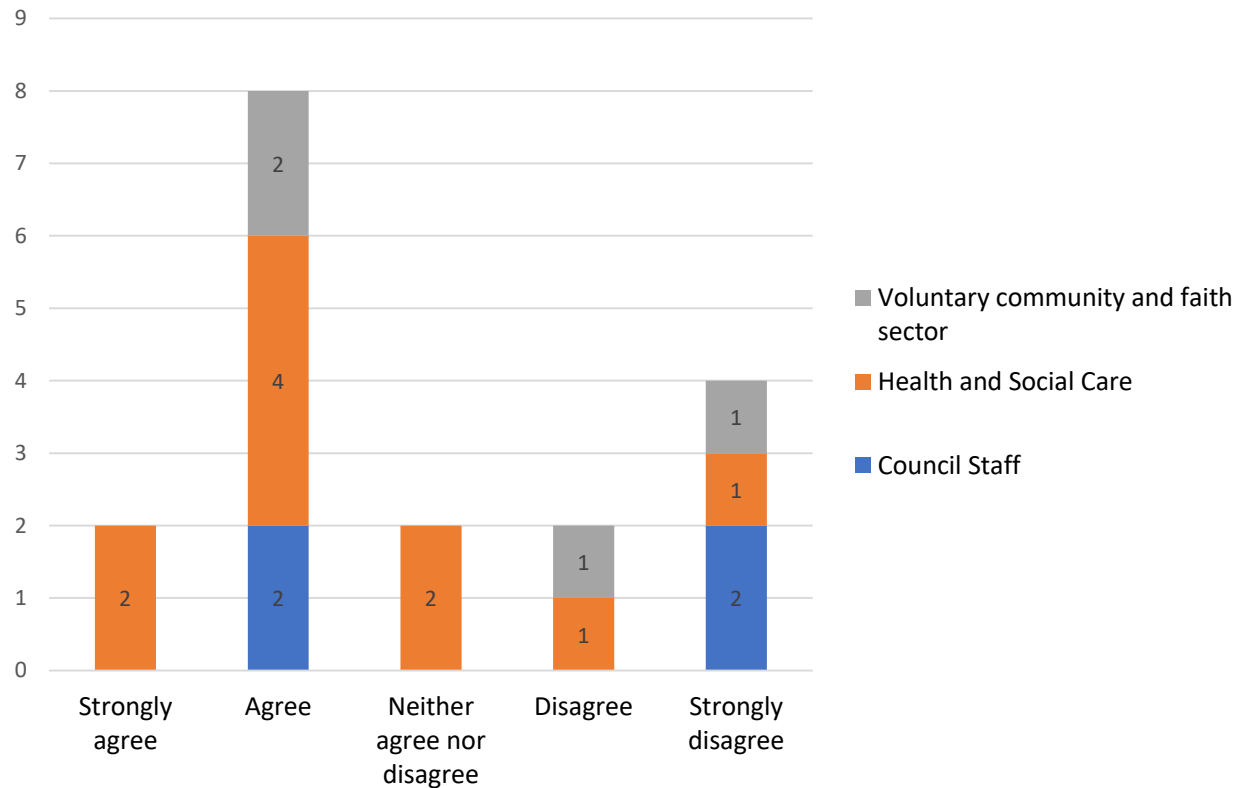


## Community connector

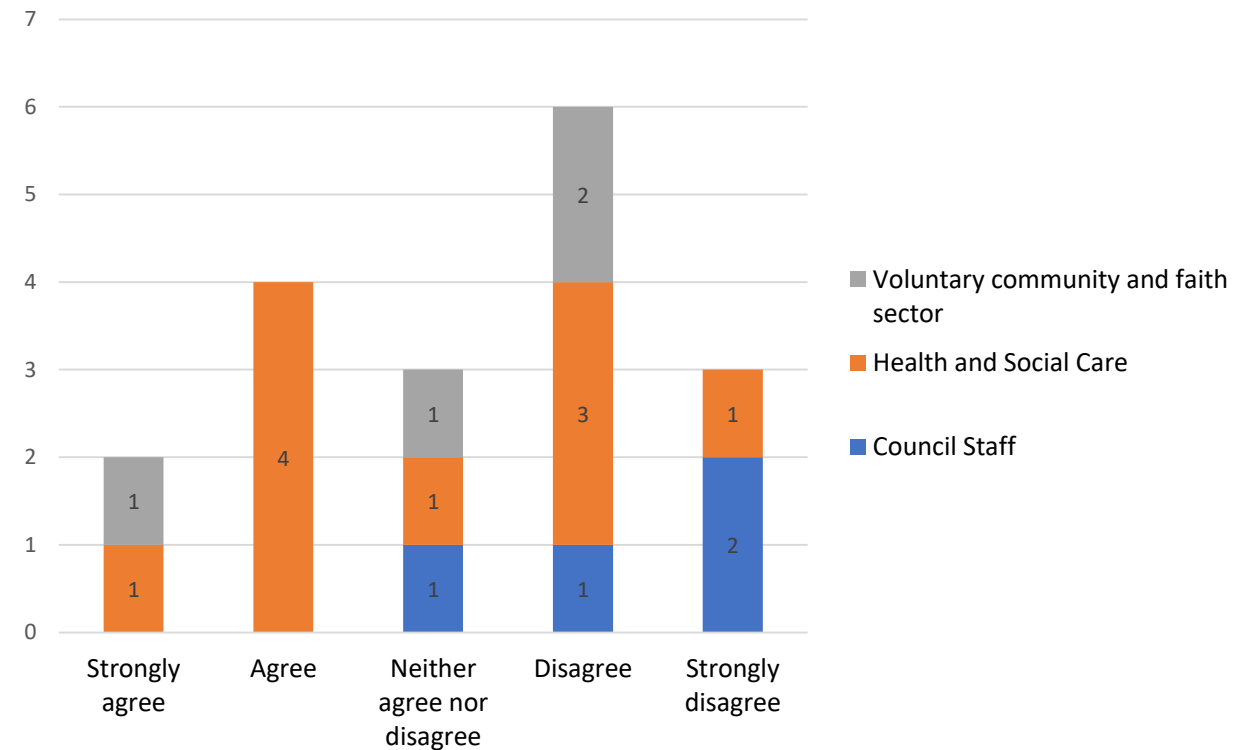


# Q9 cont. I know the referral criteria when I need to refer a resident to the health and wellbeing support roles.

## Community Neighbourhood Link Worker

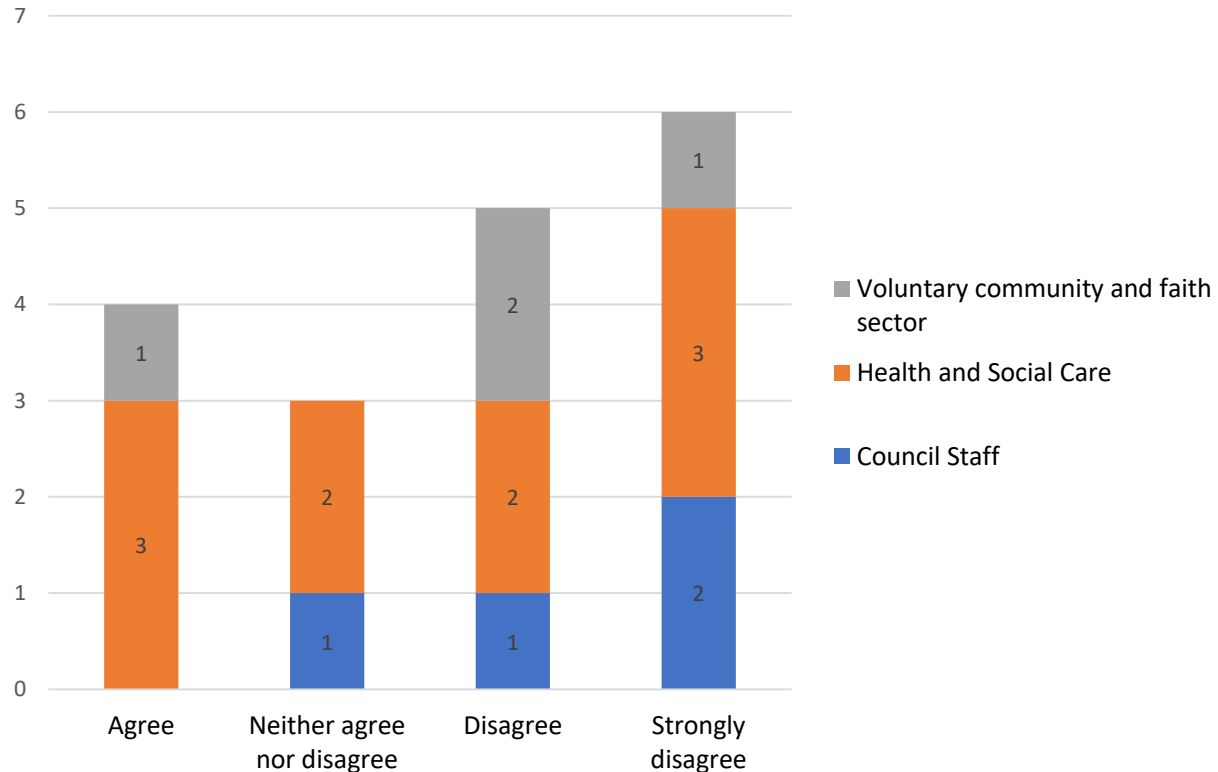


## Care Coordinator

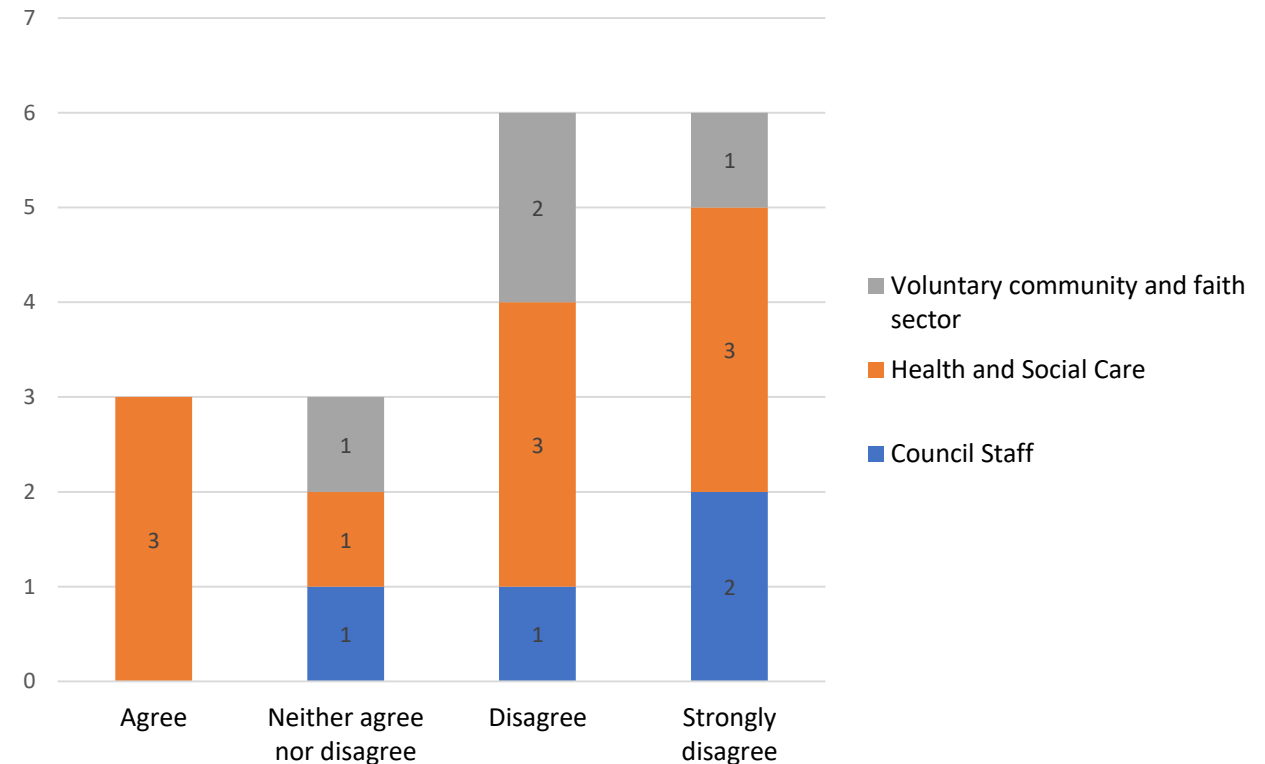


# Q10. I know how to make a referral when I need to refer a resident to the health and wellbeing support roles.

## Social prescribing link worker



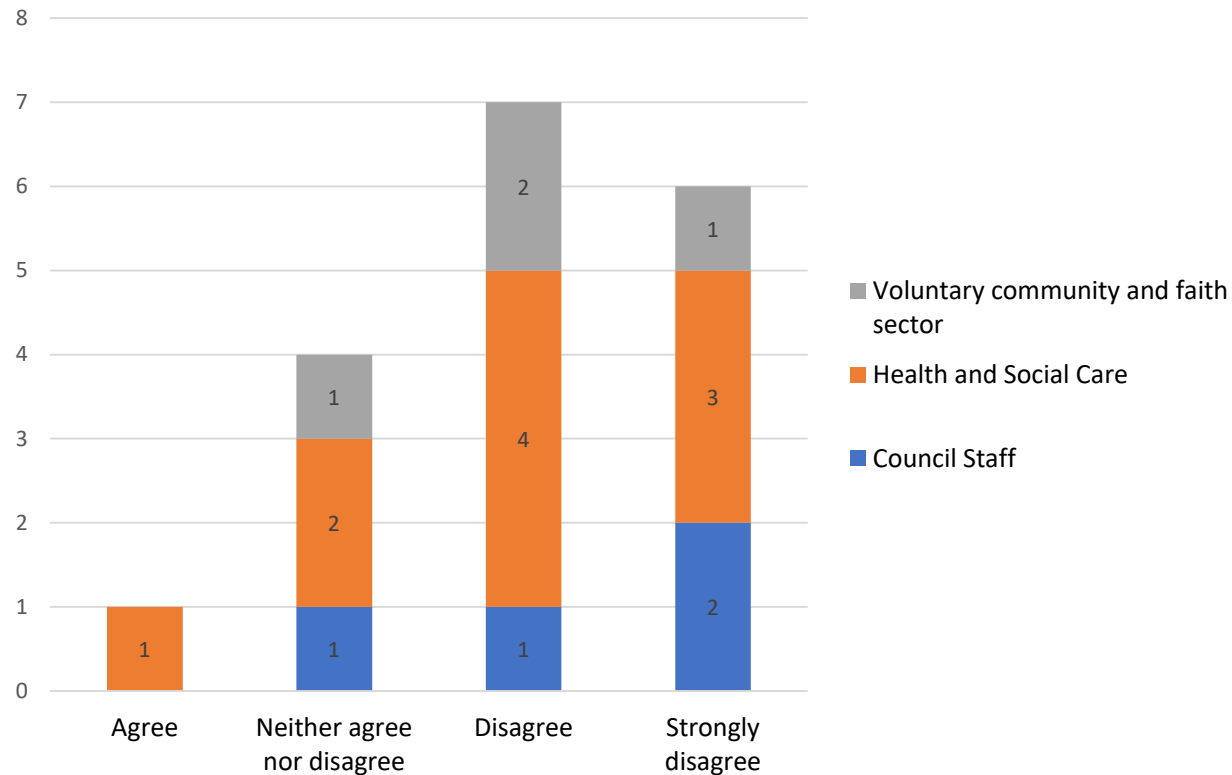
## Health and wellbeing coach



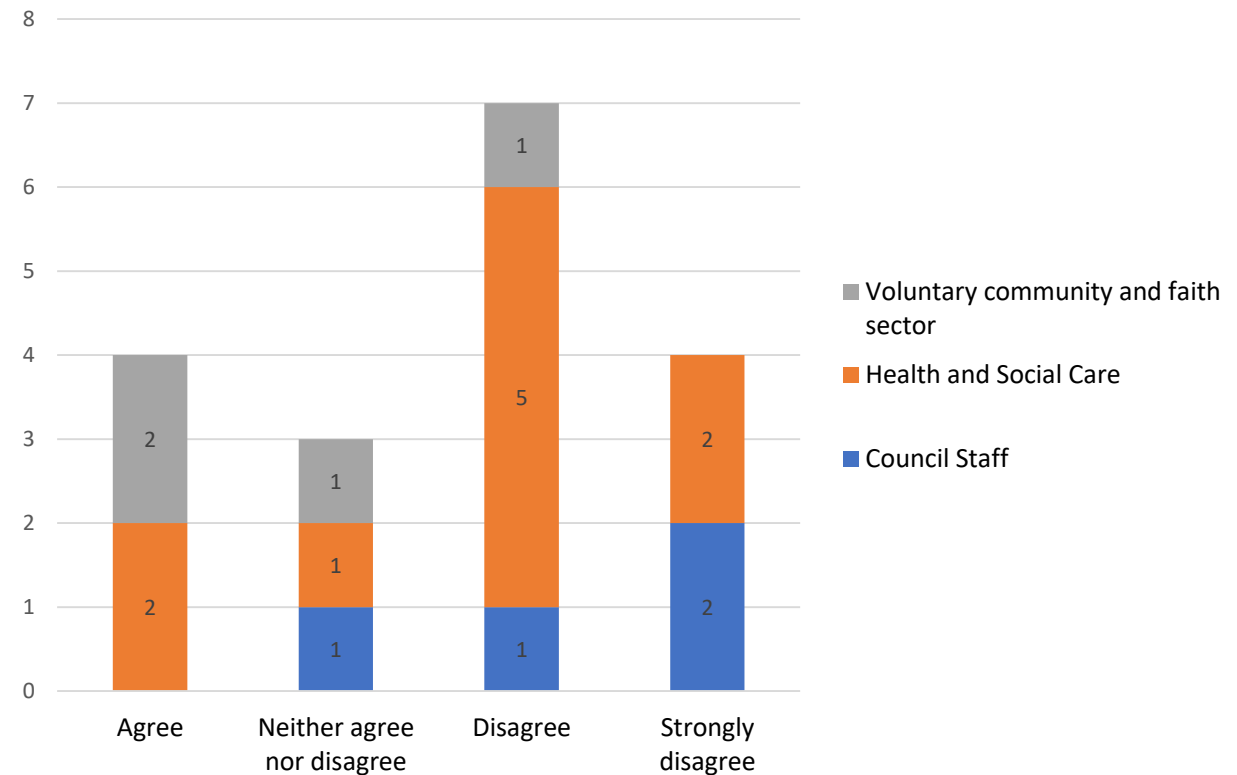
# Q10 cont. I know how to make a referral when I need to refer a resident to the health and wellbeing support roles.



## Health and social care navigator



## Community connector

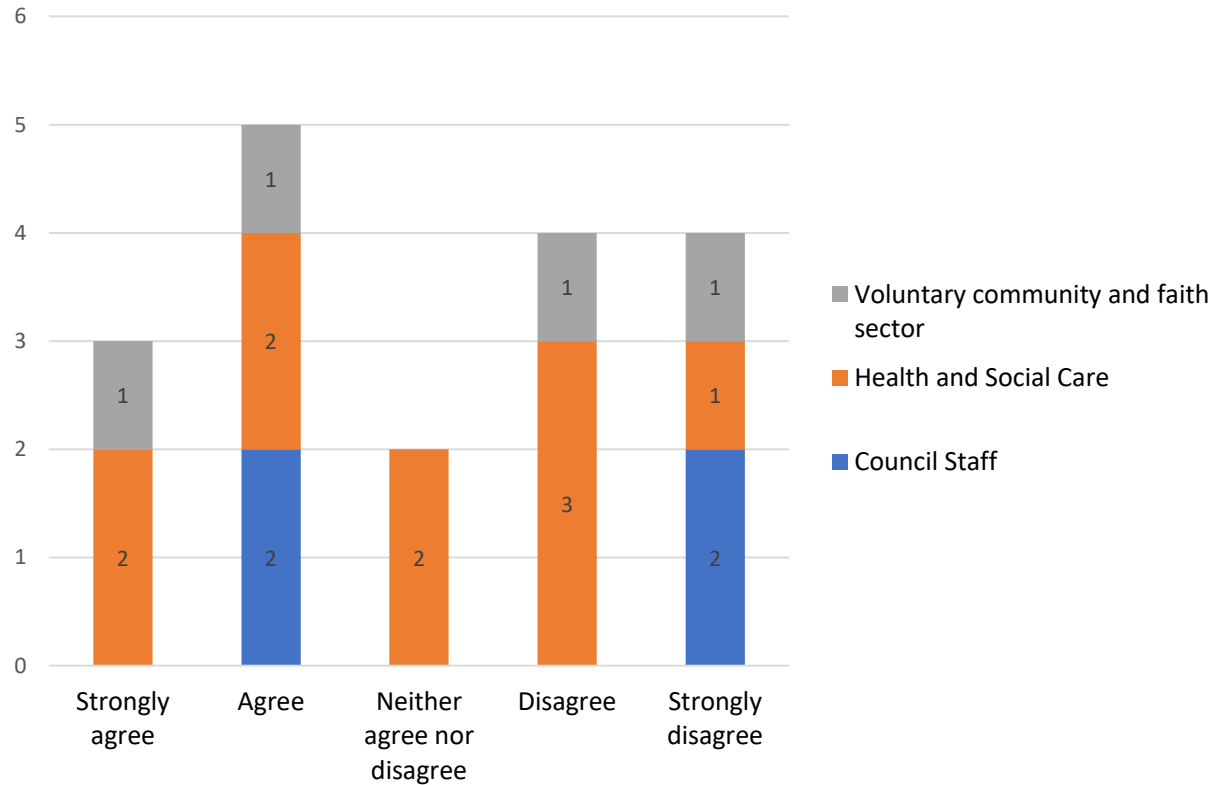


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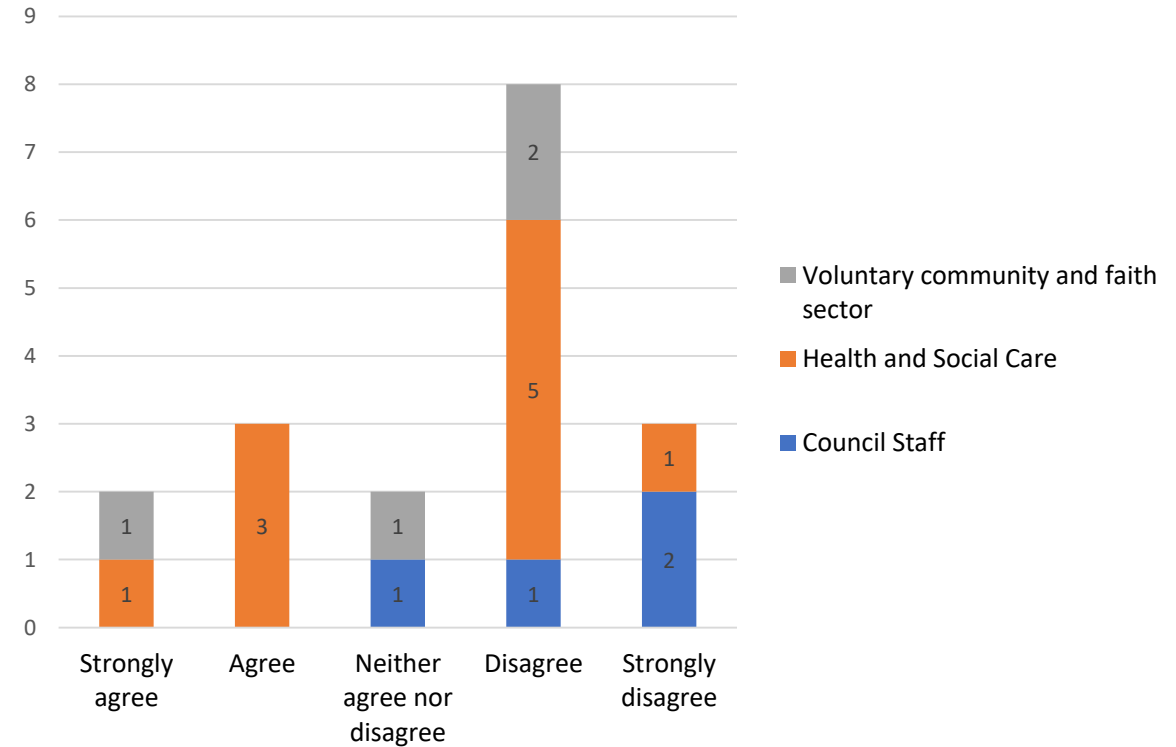


# Q10 cont. I know how to make a referral when I need to refer a resident to the health and wellbeing support roles.

## Community neighbourhood link worker



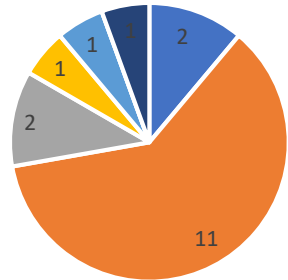
## Care coordinator





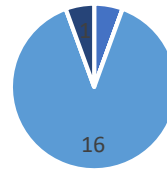
# Q11. What is the best method for contacting residents?

When making a routine appointment with the resident



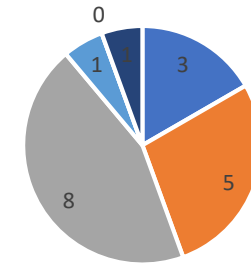
■ Letter ■ Phone ■ Text ■ Email ■ Face to Face ■ Video Call ■ No data

When discussing sensitive information with resident about their support or the management of their situation



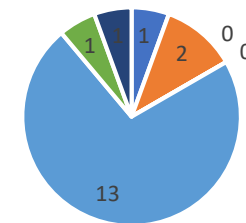
■ Letter ■ Phone ■ Text ■ Email  
 ■ Face to Face ■ Video Call ■ No data

When confirming or reminding the resident about the time and date of an appointment



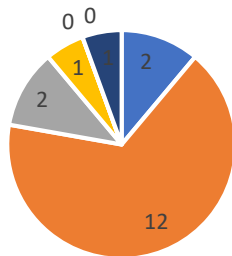
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When something is complicated and needs to be explained to the resident



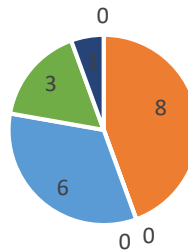
■ Letter ■ Phone ■ Text ■ Email ■ Face to Face ■ Video Call ■ No data

When cancelling or rescheduling an appointment with the resident



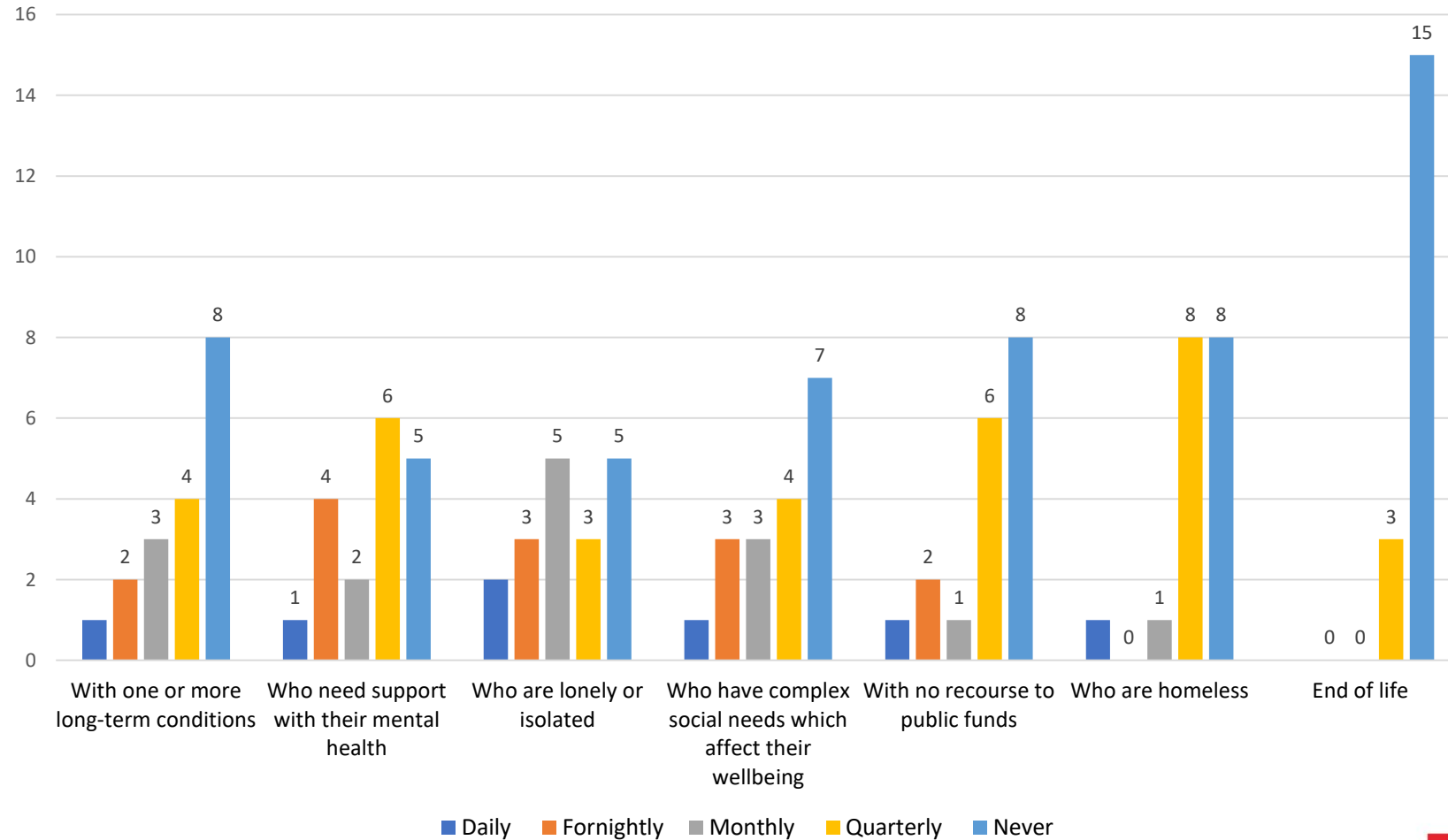
■ Letter ■ Phone ■ Text ■ Email ■ Face to Face ■ Video Call ■ No data

When having a routine discussion or catching up on the residents support or management of their situation



■ Letter ■ Phone ■ Text ■ Email ■ Face to Face ■ Video Call ■ No data

# Q12. Please identify the residents groups you are referring to the health and wellbeing support roles and the frequency? Estimate where appropriate.



## Q13. Are there other groups of people who you refer that we have not included in the previous question? Please identify these groups and indicate the frequency seen



- I don't work in a frontline role, therefore so not meet residents to refer
- not my role
- not at the moment - but this maybe due to lack of information about these services and how they can support our residents
- Suicidal younger people
- Any one who accessed the Mental Health first aid if Newham residents. Employees who had a Stress Risk Assessment
- disabled people; families with multiple disabilities; families with members who they believe have a disability but the needs that are not being properly assessed
- Traveller community

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# Q14. Please identify groups of people who would benefit from health and wellbeing support but who are not currently accessing the services and why this is the case.



- Minority ethnic groups, disabled people, poor mental health
- Main carers
- same as previous answer
- not my role
- Those whose first language is not English
- Carers - they don't have time or anyone to cover whilst they go and do something!
- Those people who need with accessing community resources - people who cannot leave their home, or who are excluded due to language (both spoken, written and sign language), those who do not get access to information (especially digitally excluded due to comms needs or lack of tech/knowledge).
- single mothers or fathers
- Many seniors who don't know about the services offered
- Many people would benefit from these services. Currently I am only doing immunisations, smears and dressings. When I do review I will begin signposting
- Homeworkers with mental health problems due to isolation who are not picked up because they don't know about the facilities
- There are disabled people in Newham who are not getting the help and support they need
- Traveller community

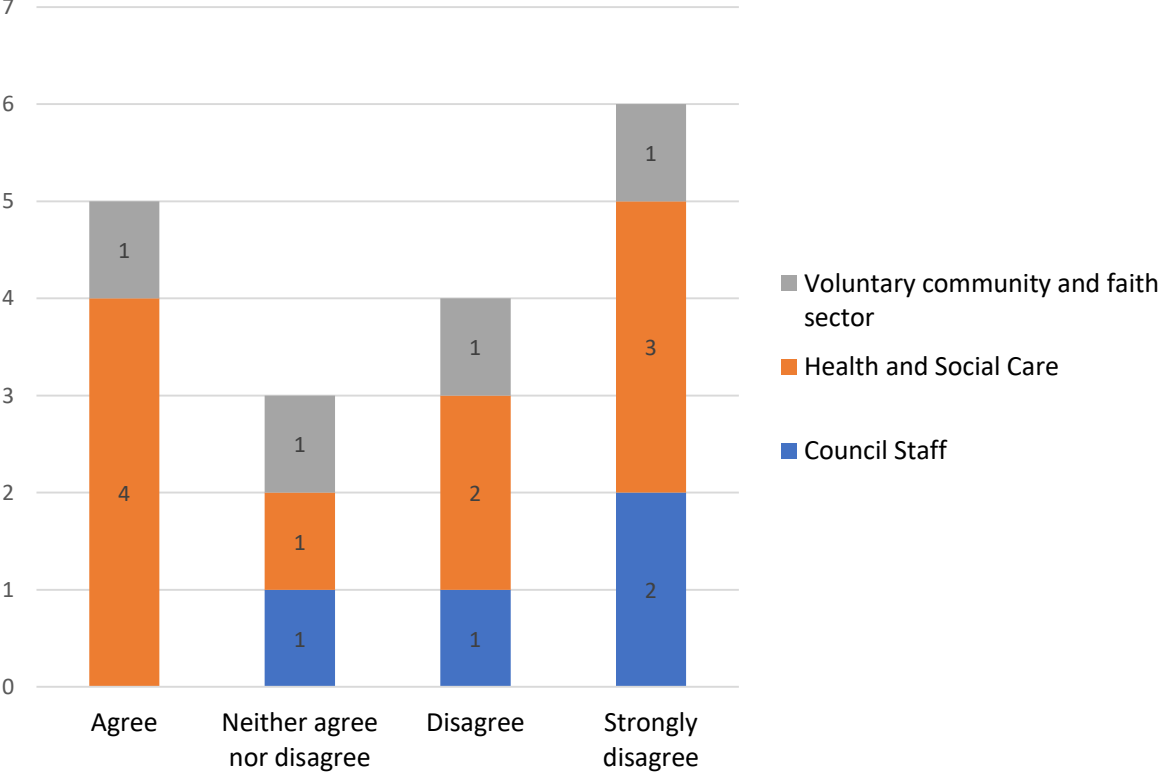
**WE ARE NEWHAM.**



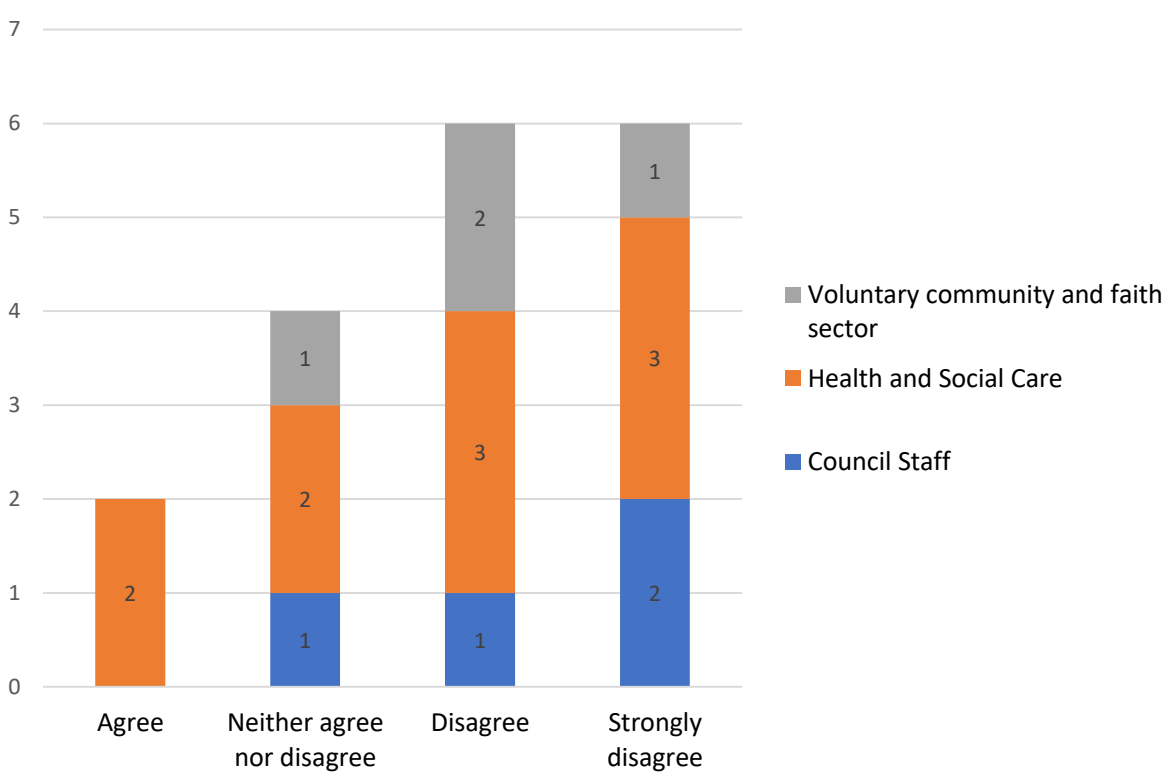
# Q15. I have access to all the right information to enable me to refer a resident.



Social prescribing link worker



Health and wellbeing coach

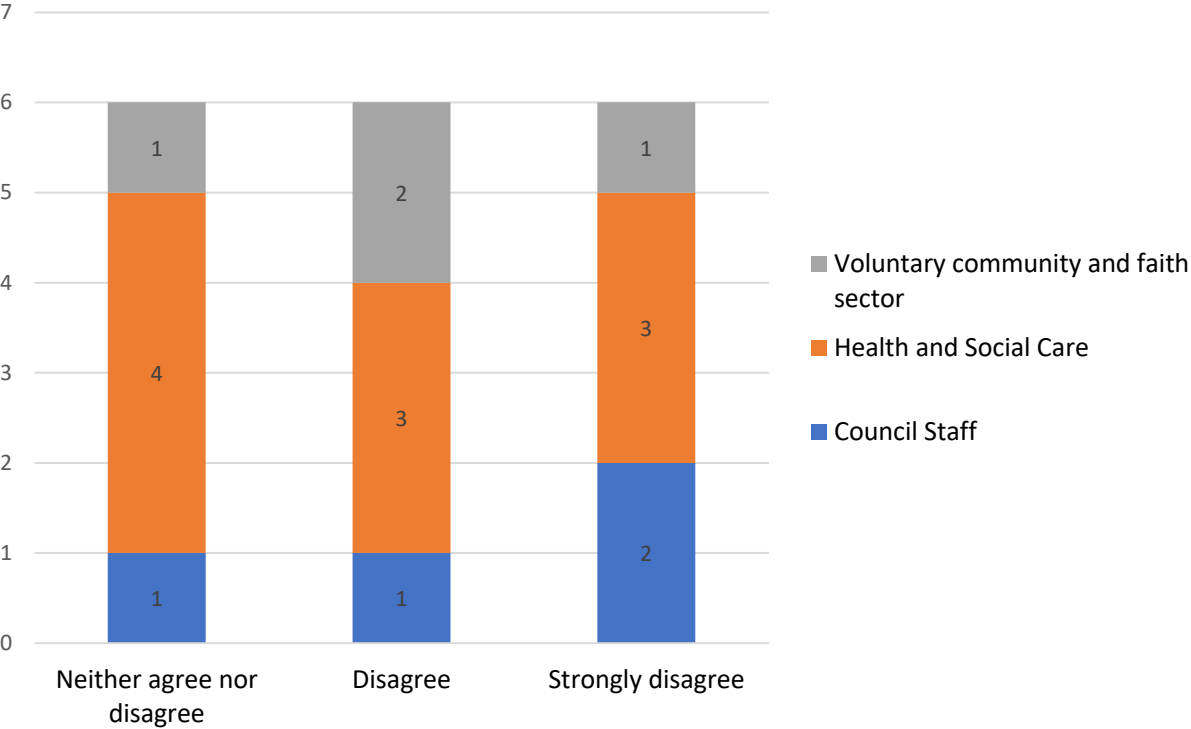


**WE ARE NEWHAM.**

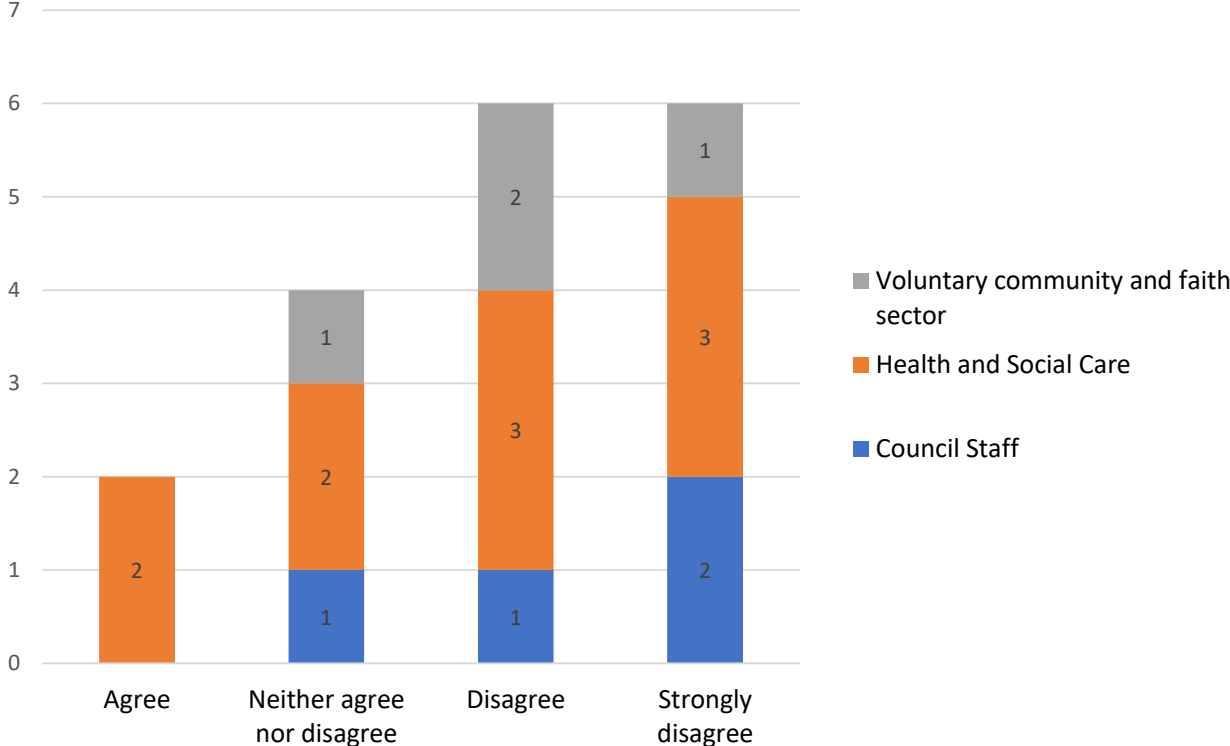


# Q15 cont. I have access to all the right information to enable me to refer a resident.

### Health and Social Care Navigator

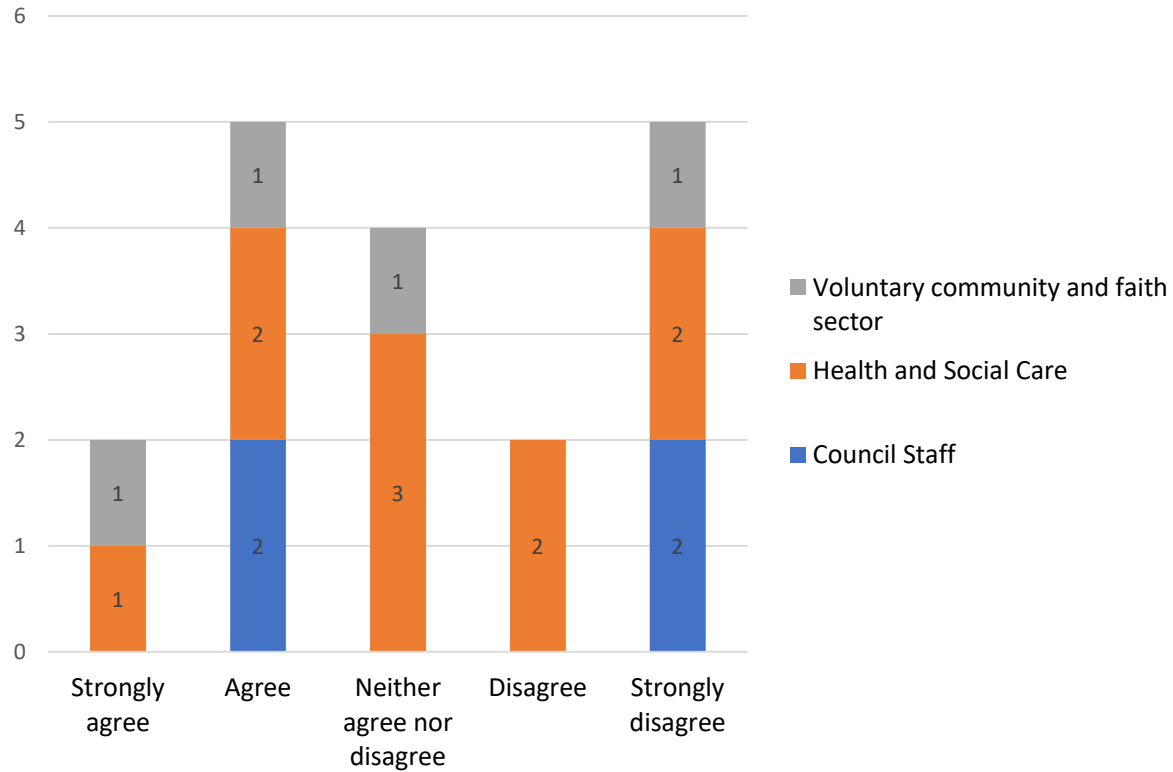


### Community Connector

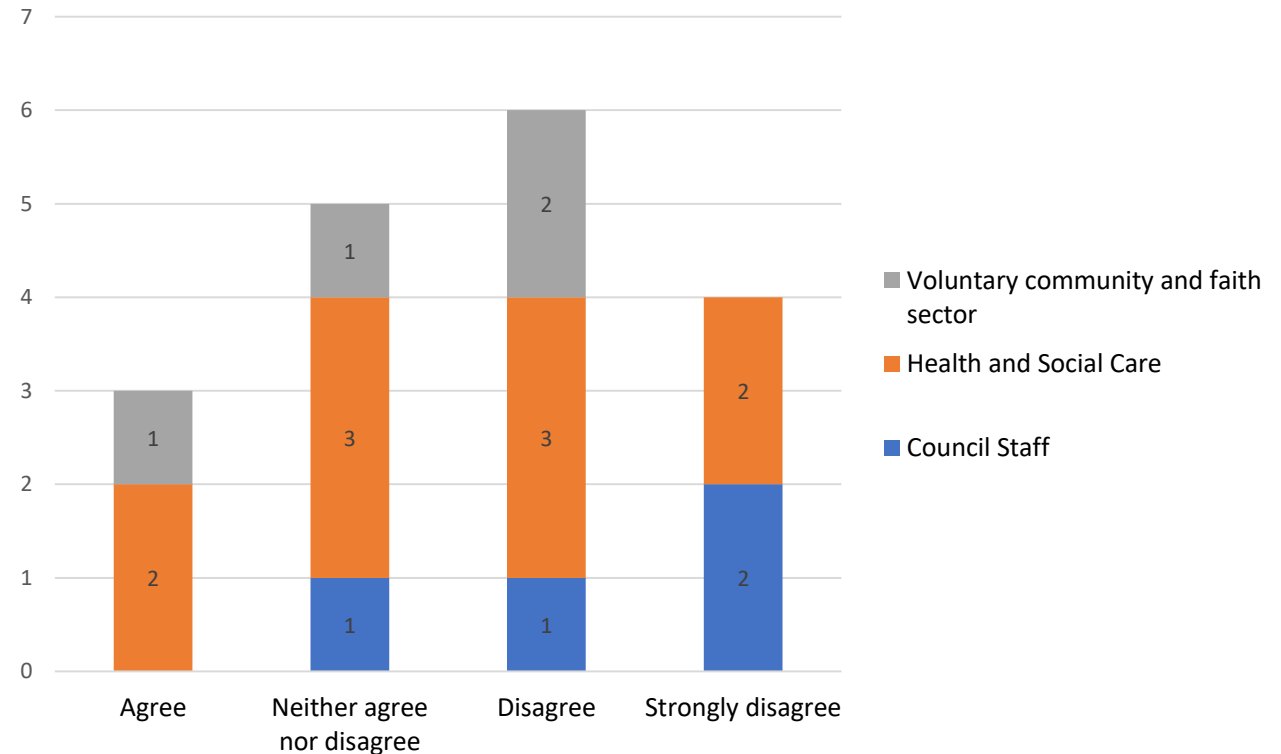


# Q15 cont. I have access to all the right information to enable me to refer a resident.

## Community neighbourhood link worker



## Care coordinator

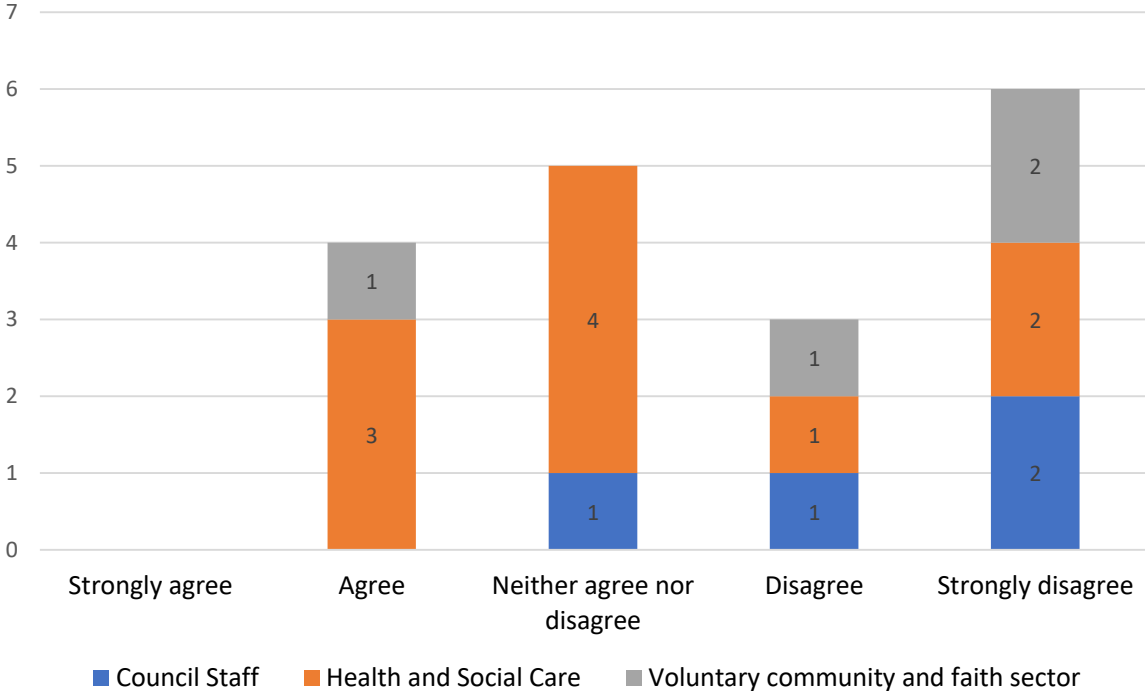
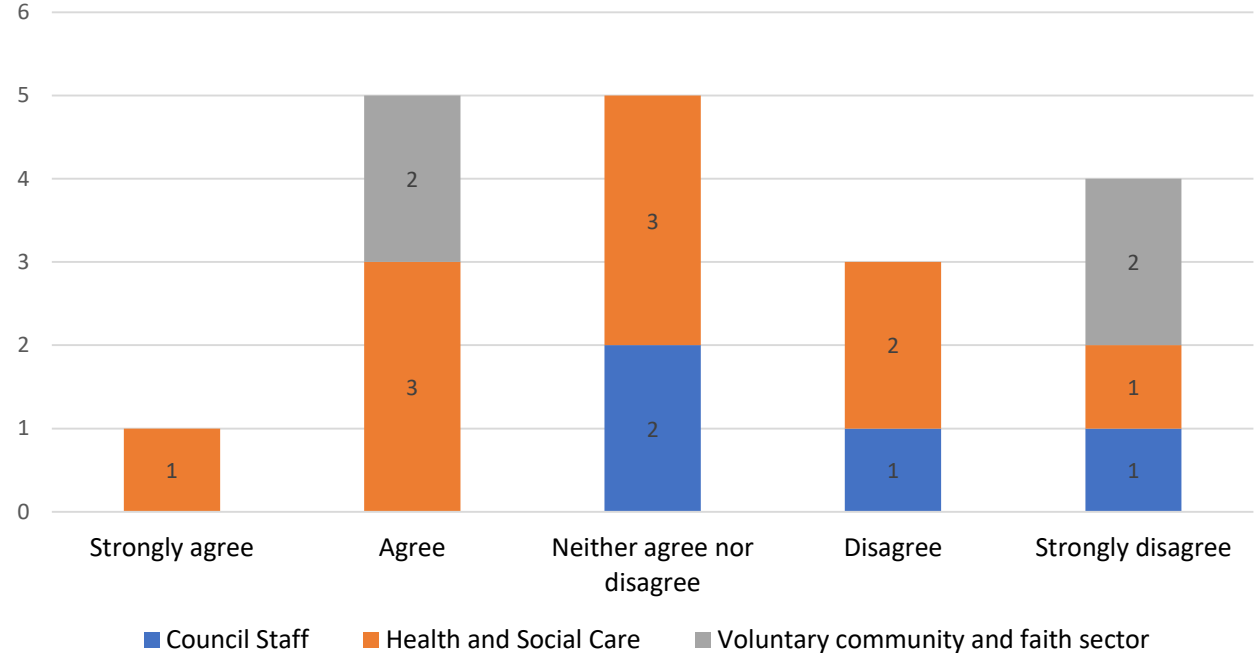


# Q16. How strongly do you agree or disagree with the following statements?



I find it easy to explain the purpose of the health and wellbeing support roles to residents and how they can benefit from them

I understand what the health and wellbeing support roles do to support residents

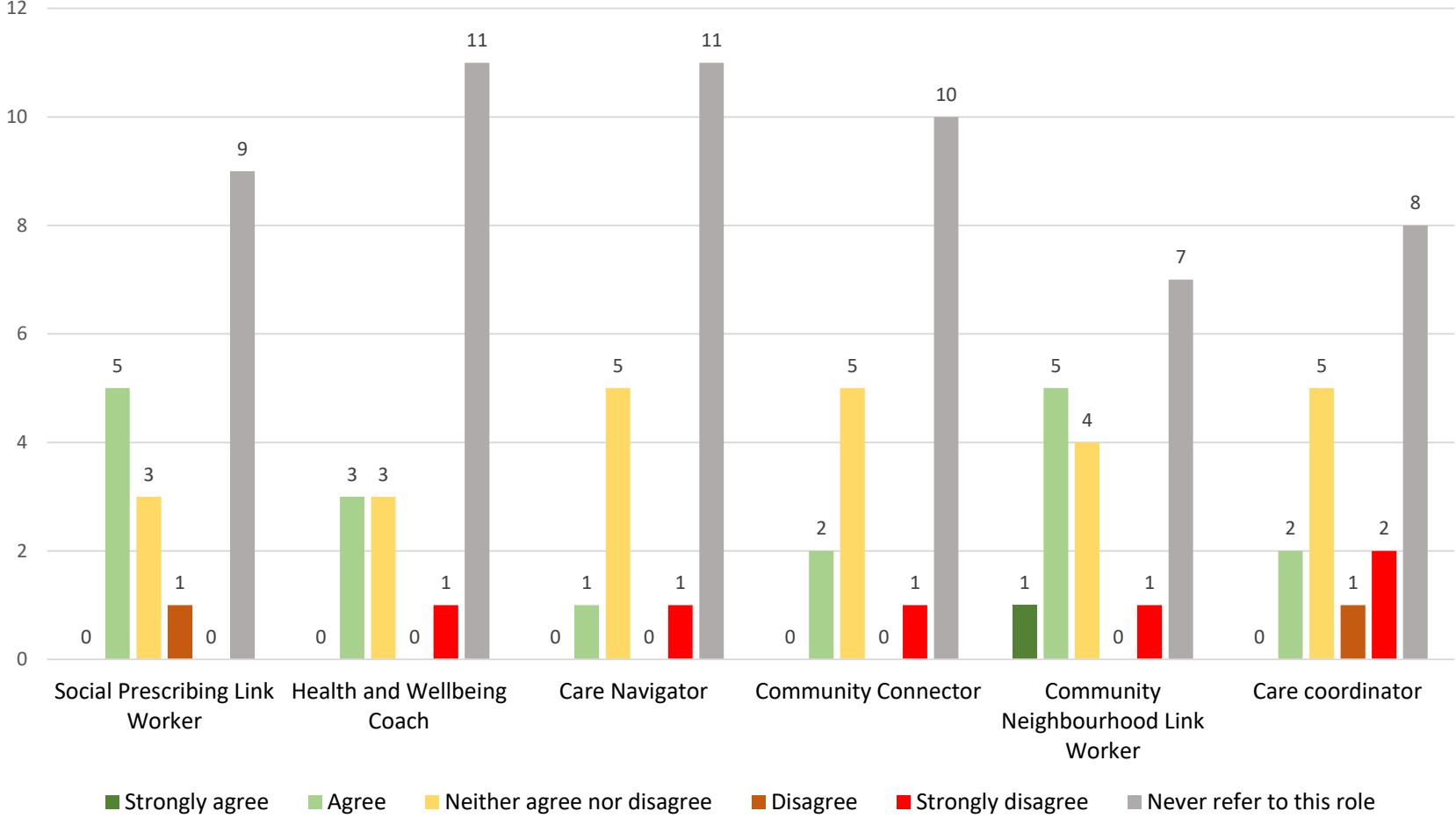


**WE ARE NEWHAM.**



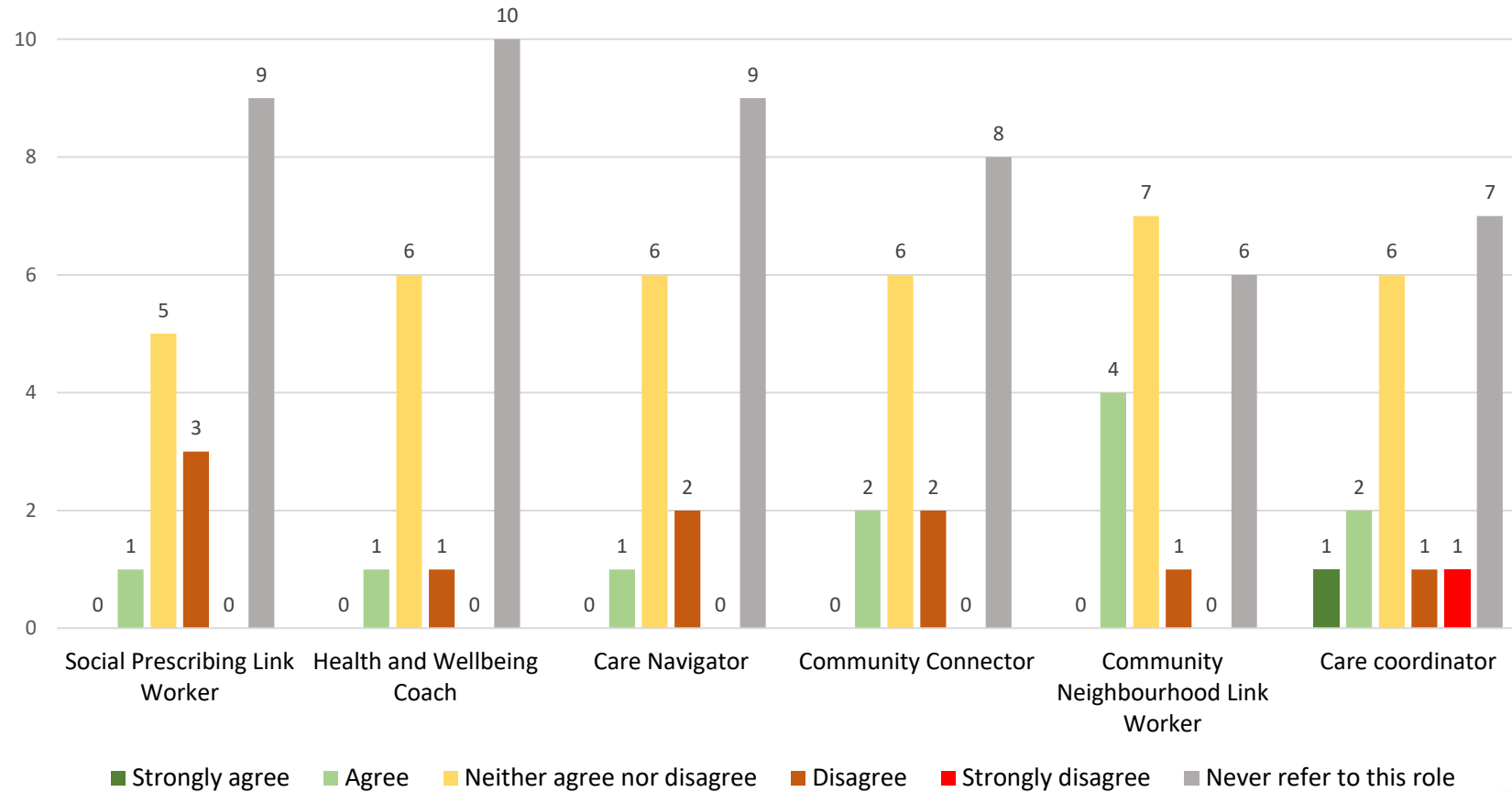


# Q17. The health and wellbeing support teams respond quickly to the referrals I make to them

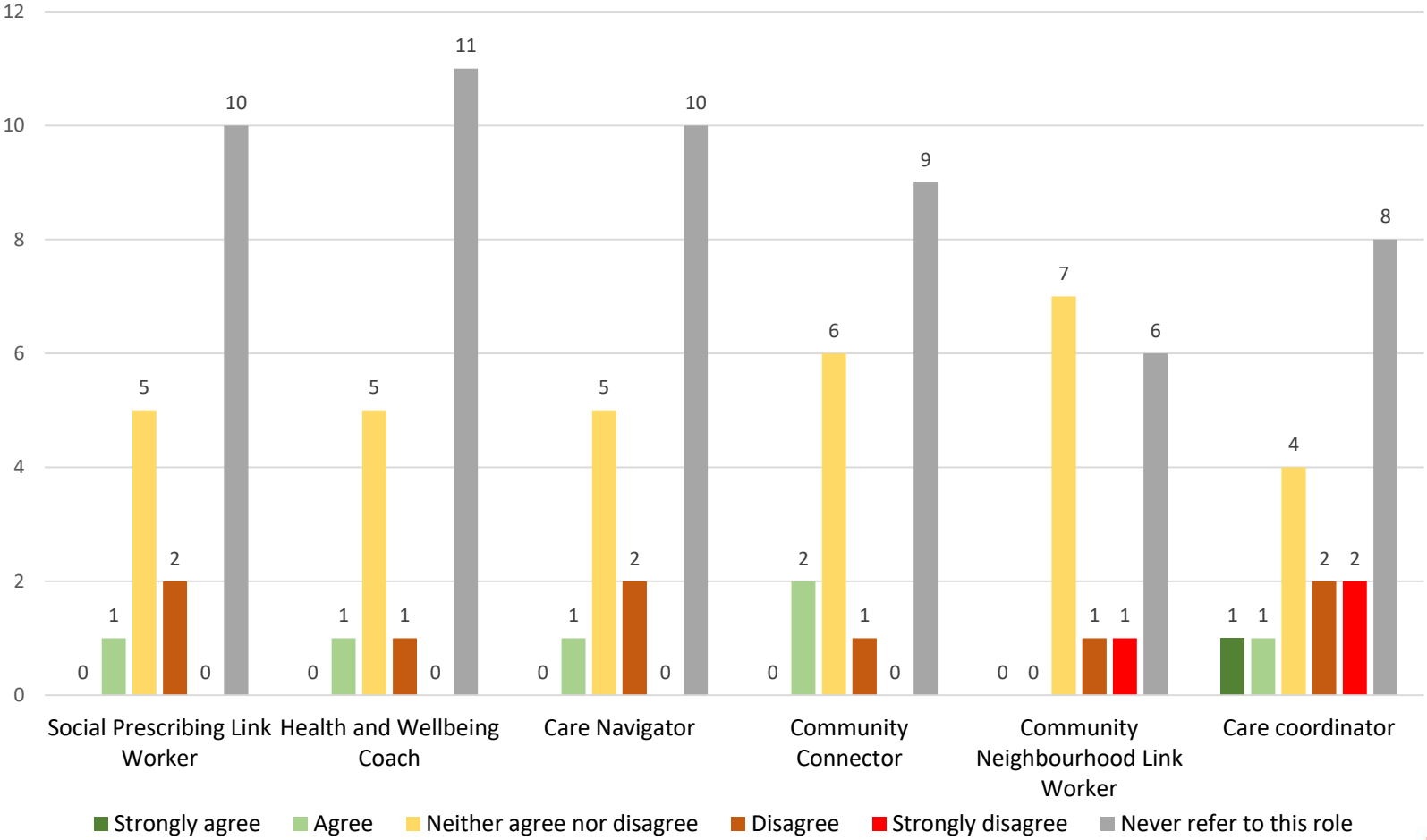


# Q18. The health and wellbeing support teams inform me about whether the person I referred attended their initial appointment.

12



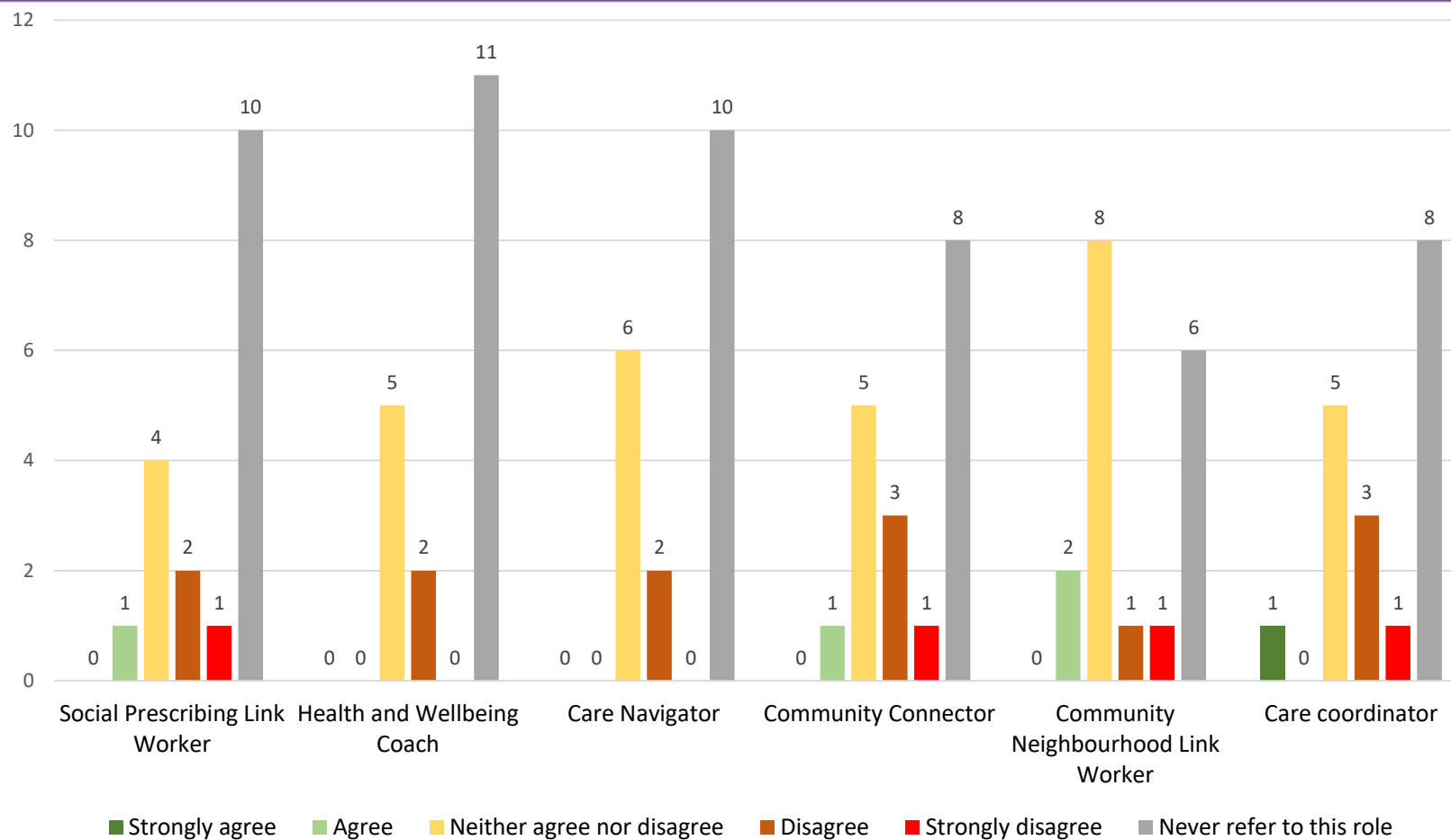
# Q19. The health and wellbeing support team let me know when the person I referred is discharged from the service



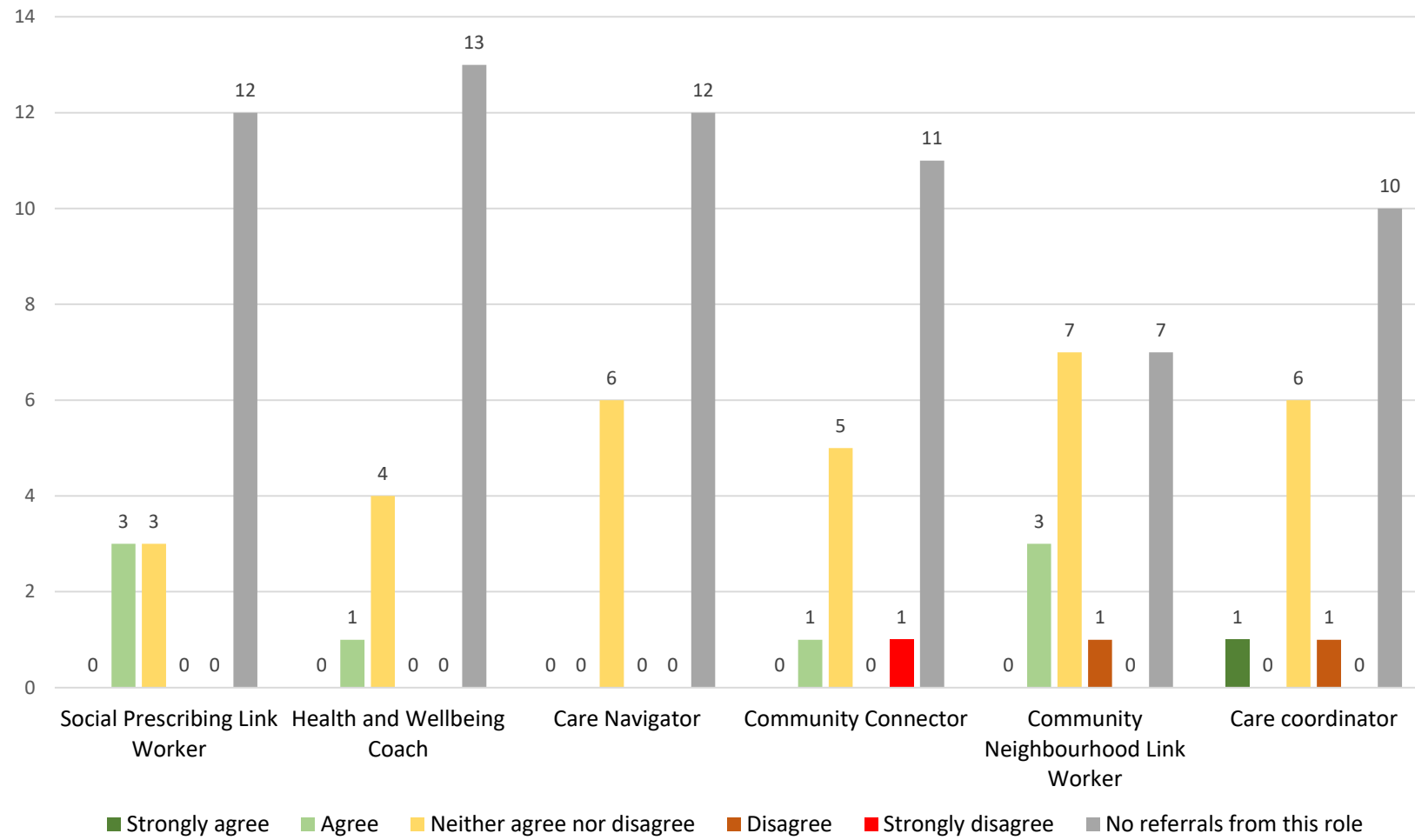
**WE ARE NEWHAM.**



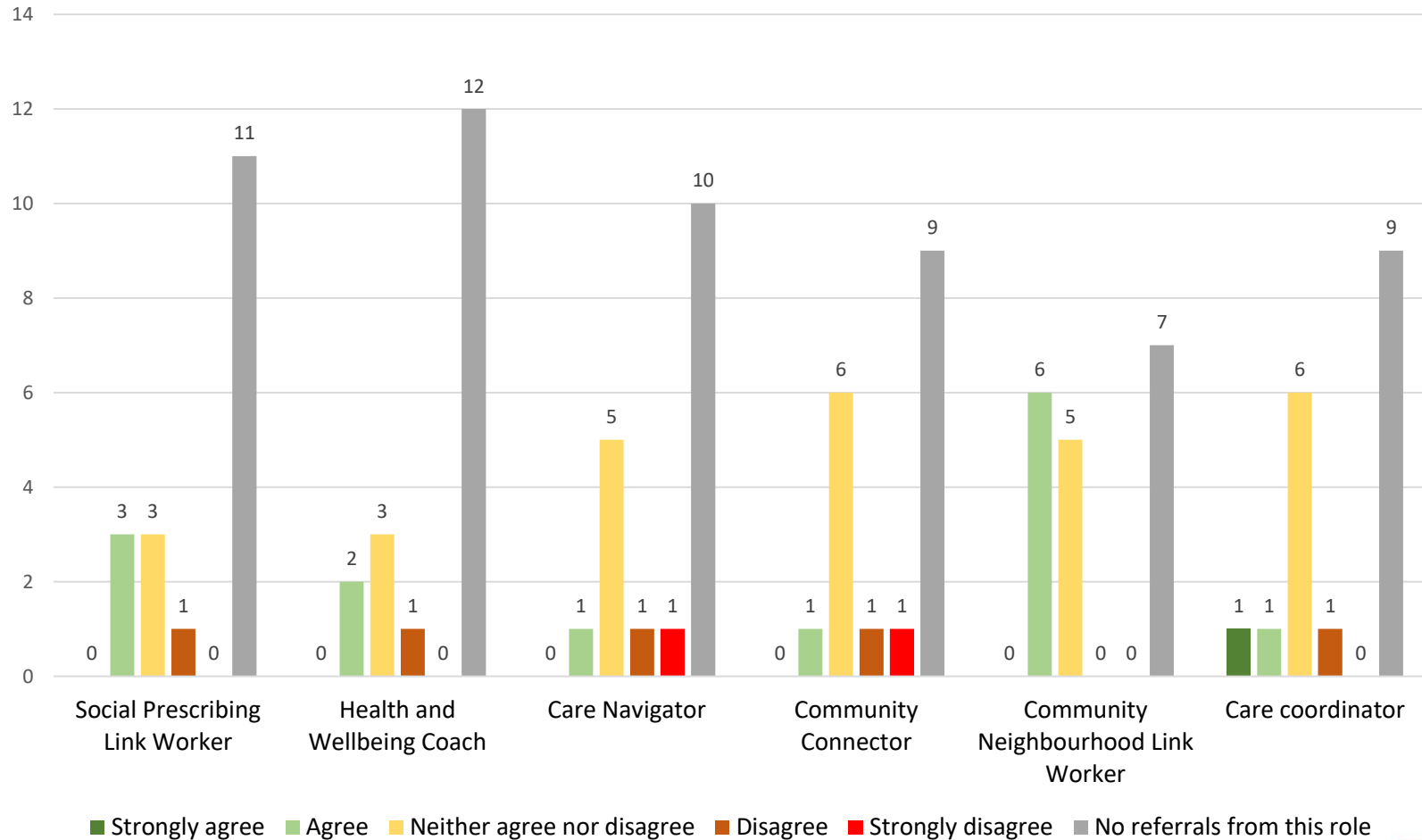
# Q20. The health and wellbeing support team let me know the impact the support and action plan has had on the person I referred.



# Q21. Referrals are sent to me by the health and wellbeing roles in good time to enable me to support residents

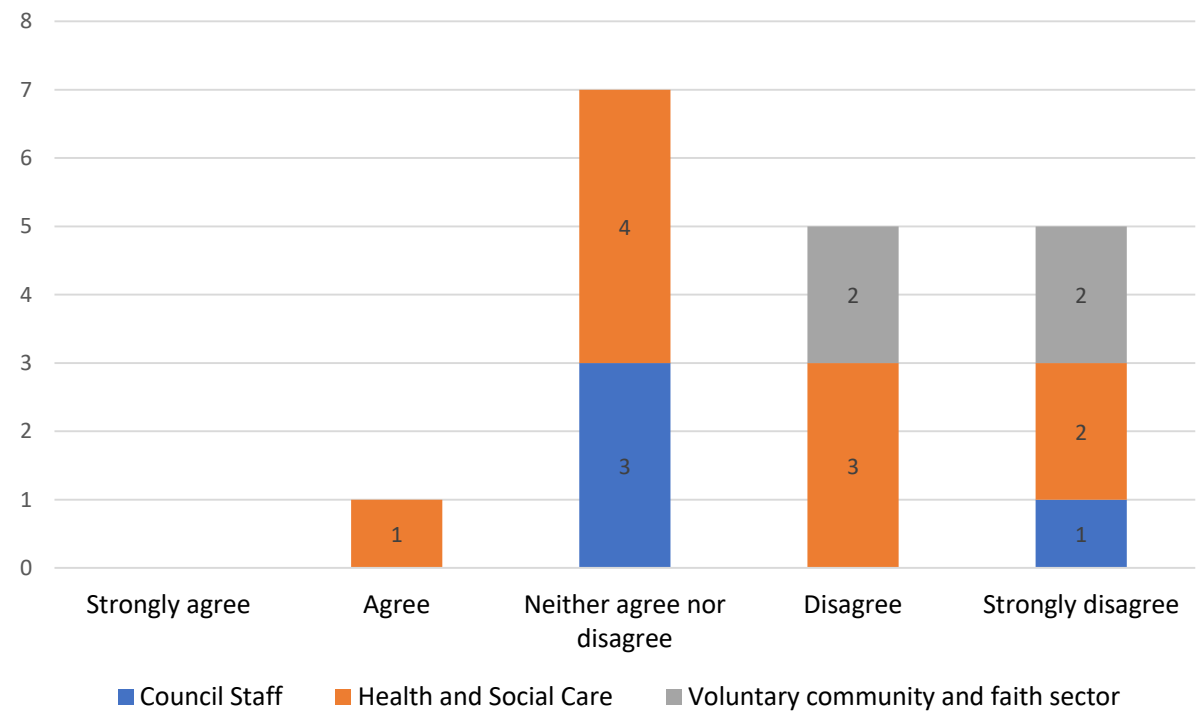


# Q22. I am provided with the right information by the health and wellbeing roles to understand resident's needs so I can plan consultation.

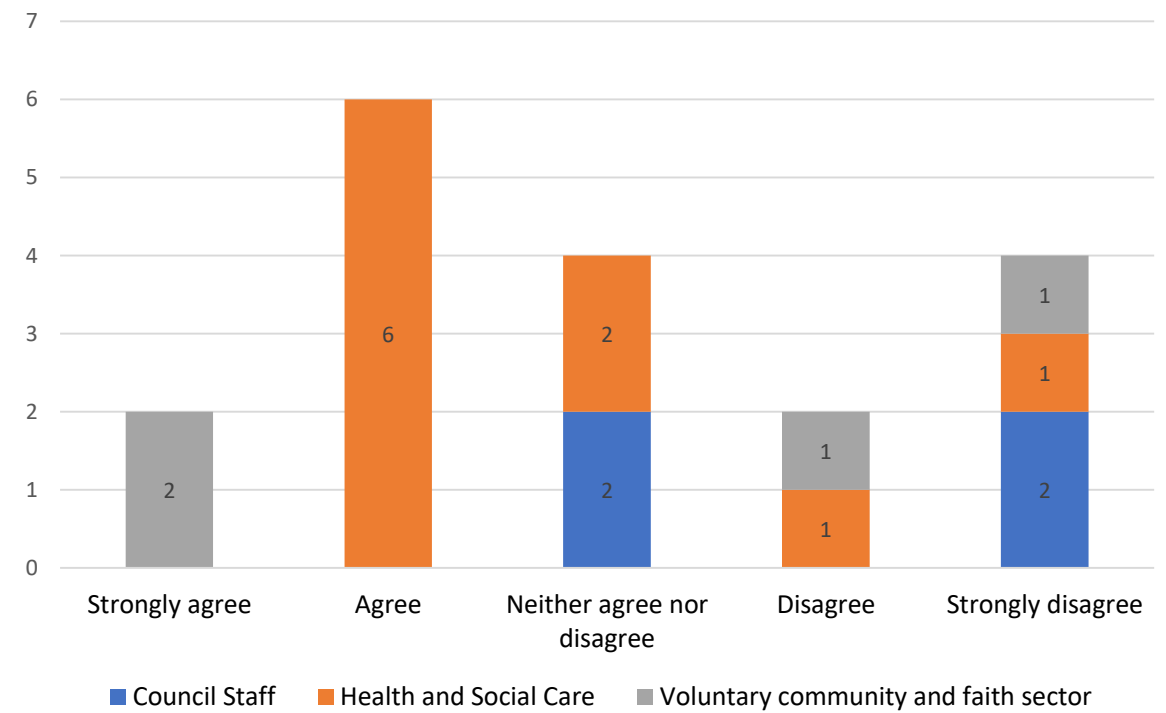


# Q23. How strongly do you agree or disagree with the following statements?

The health and wellbeing support roles and processes for accessing them are clear and easy to navigate

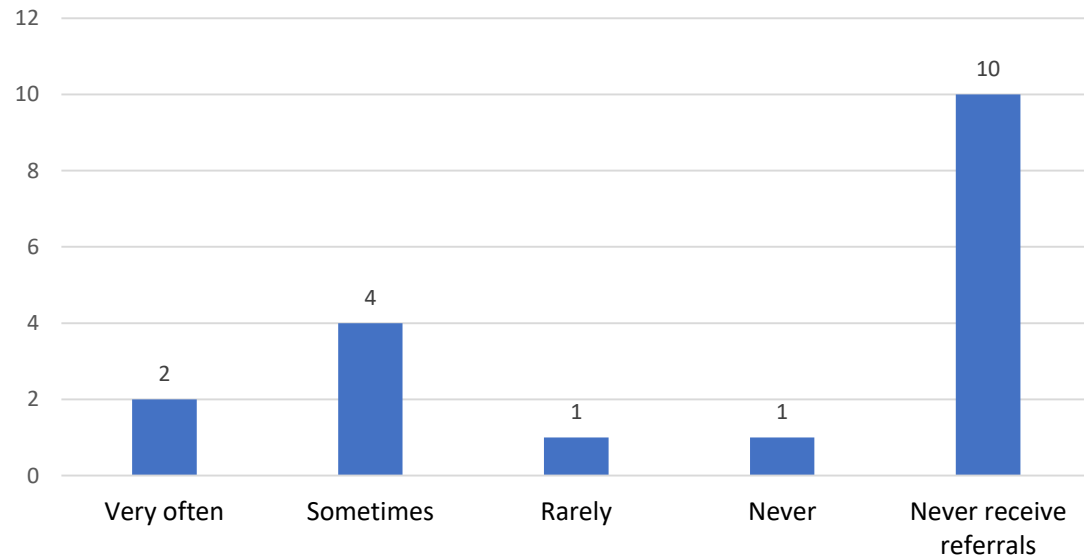


I understand that many of the services and activities health and wellbeing support roles connect residents to are provided by the voluntary sector

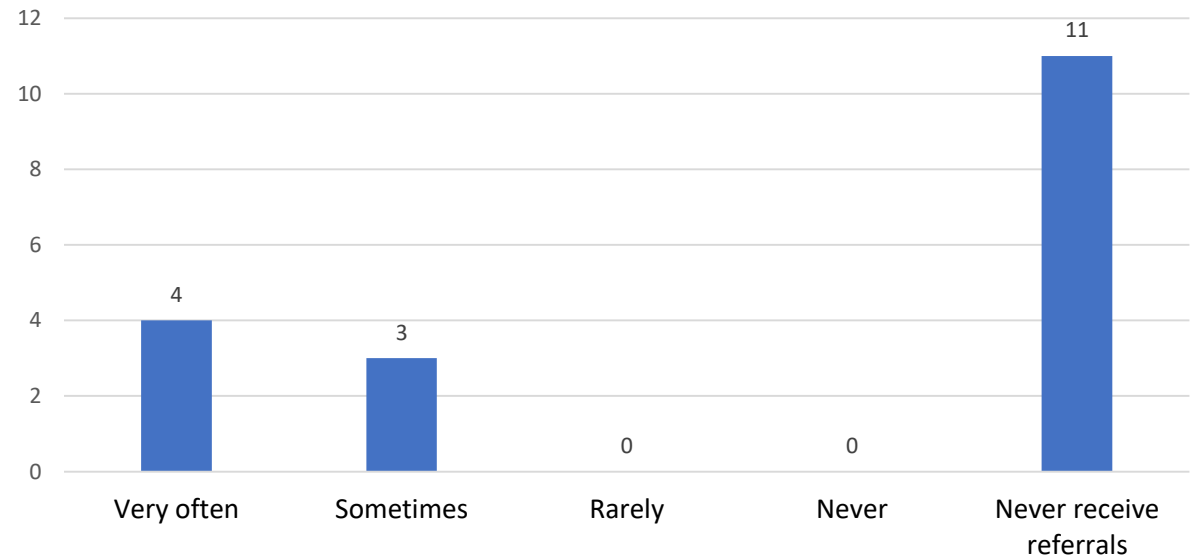


# Q24. If you receive referrals from the health and wellbeing roles, please indicate the frequency you feel is most appropriate for each of the following statements.

### How often do you receive referrals from health and wellbeing support roles?



### How often are these referrals appropriate given your referral criteria?

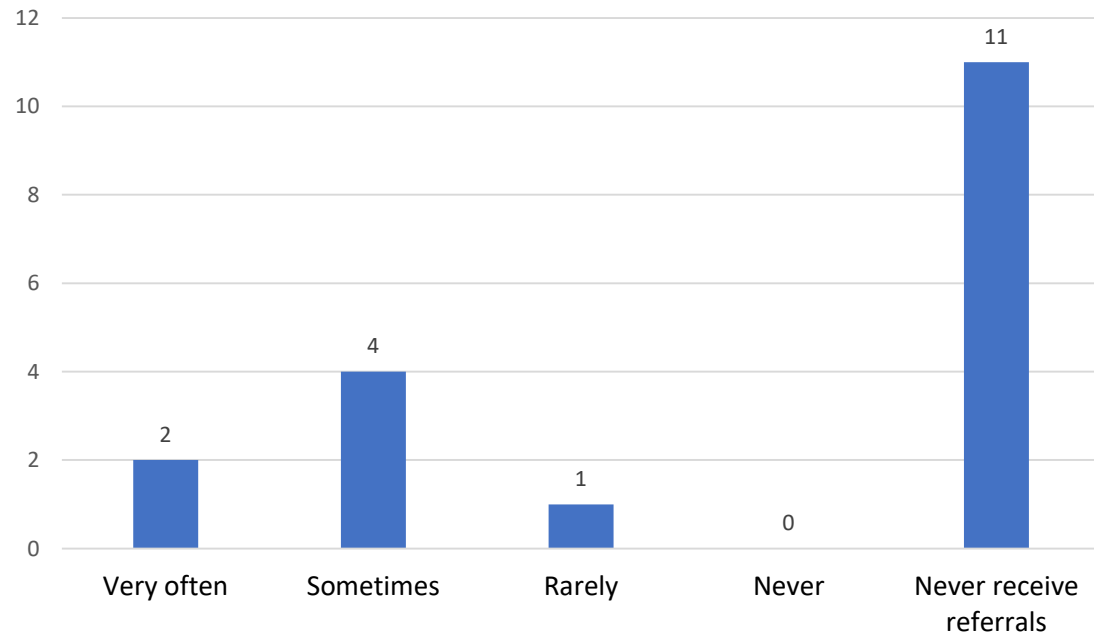




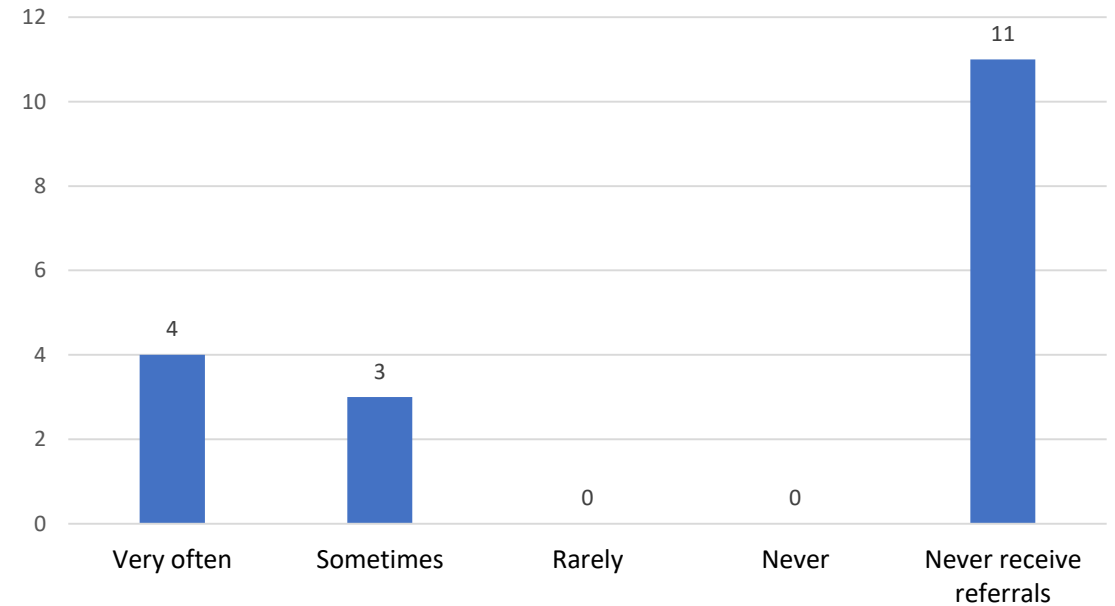
# Q24 Continued. If you receive referrals from the health and wellbeing roles, please indicate the frequency you feel is most appropriate for each of the following statements.



Do you feel referrals you receive could be made earlier in the resident journey?



Do you feel the health and wellbeing support roles provide sufficient information in their referrals to you?

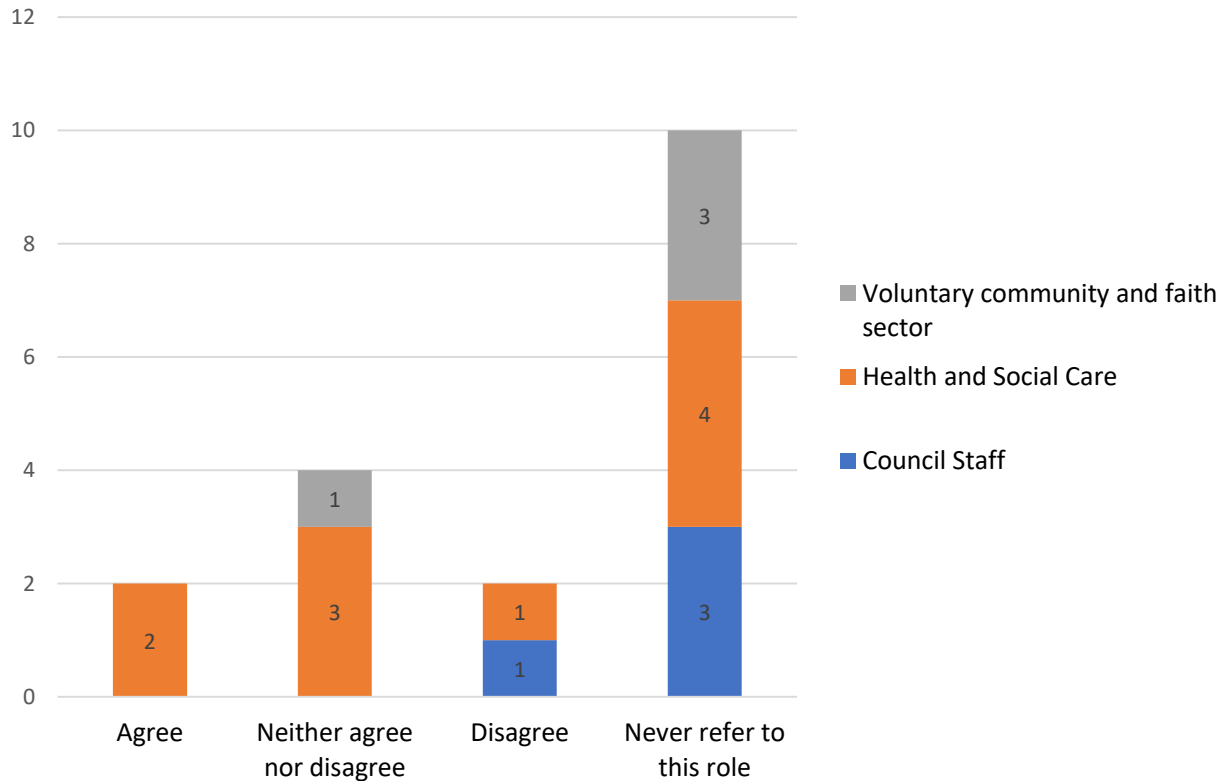


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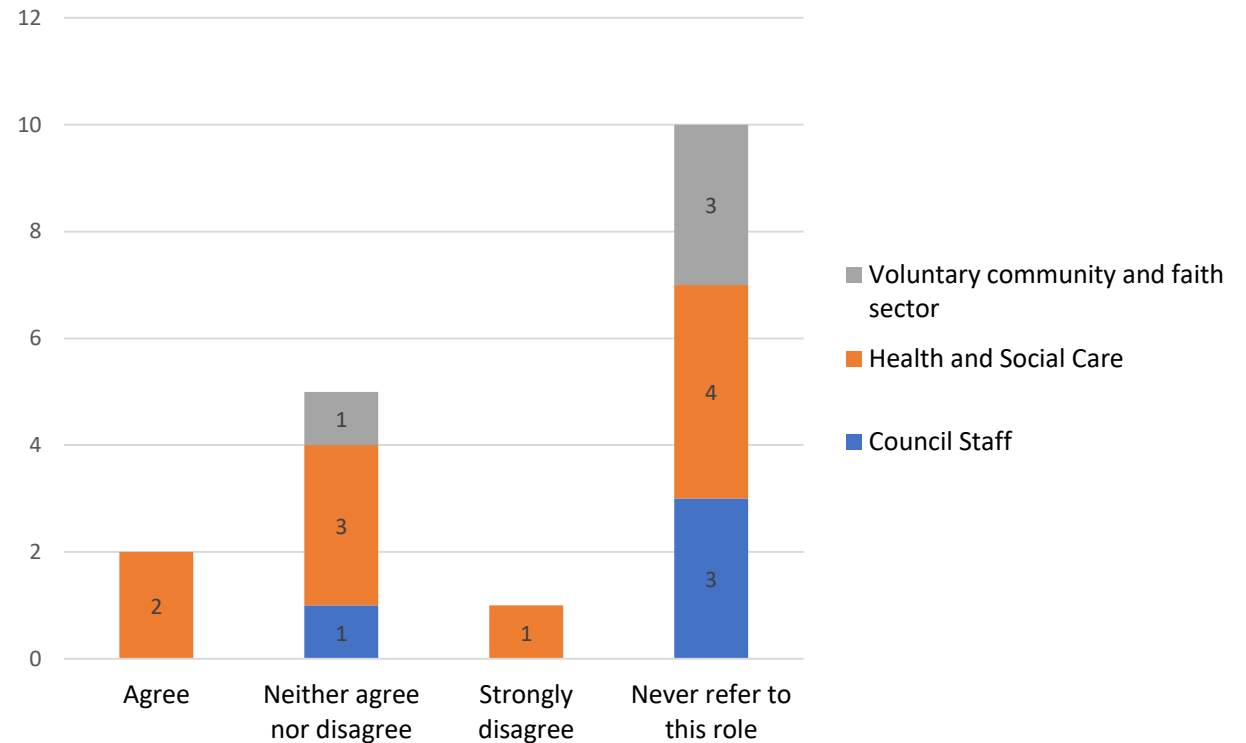


# Q25. My experience of referring residents to other health and wellbeing support roles has always been positive.

## Social prescribing link worker

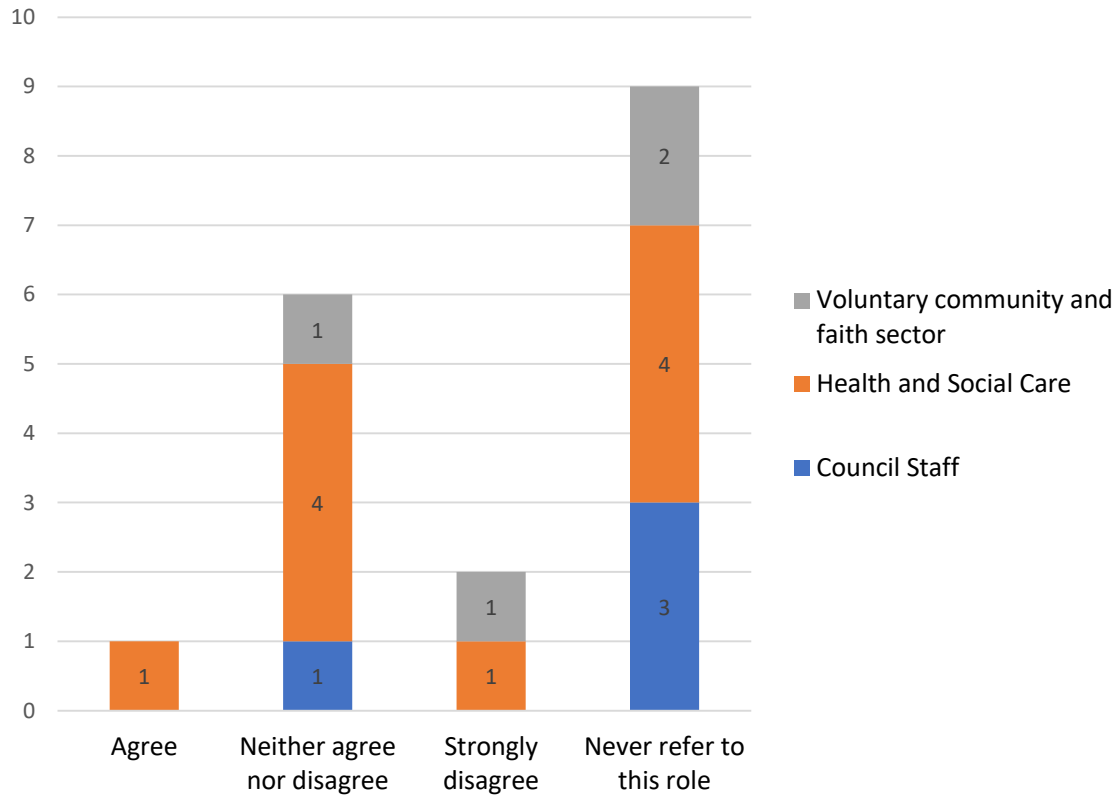


## Health and wellbeing coach

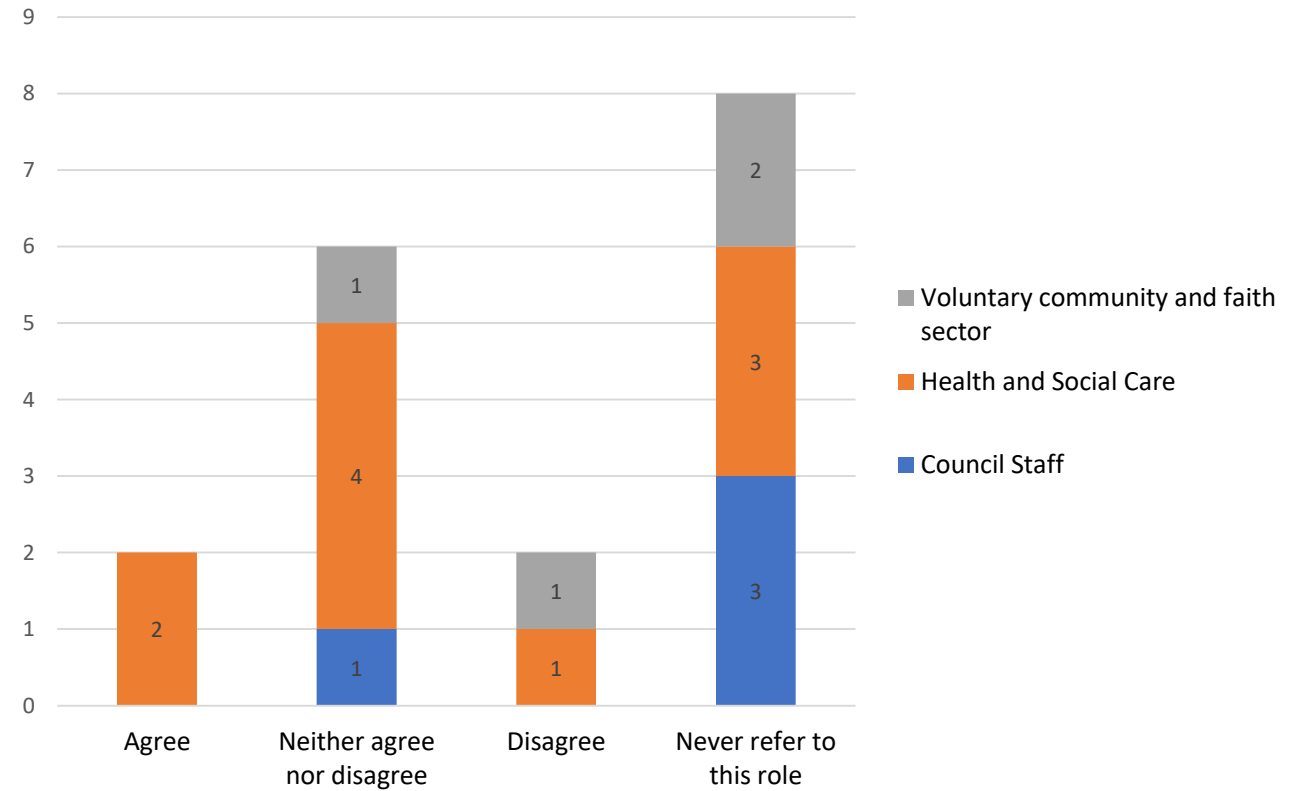


# Q25 cont. My experience of referring residents to other health and wellbeing support roles has always been positive.

## Care navigator

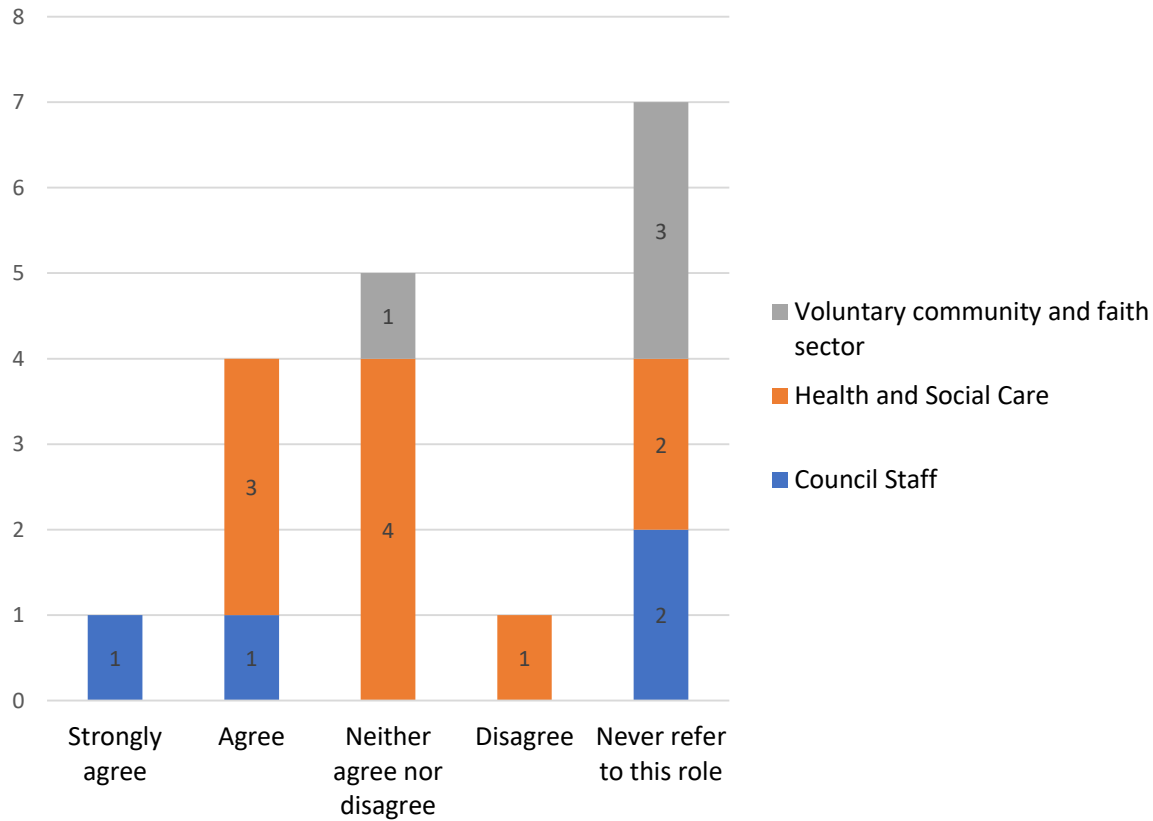


## Community connector

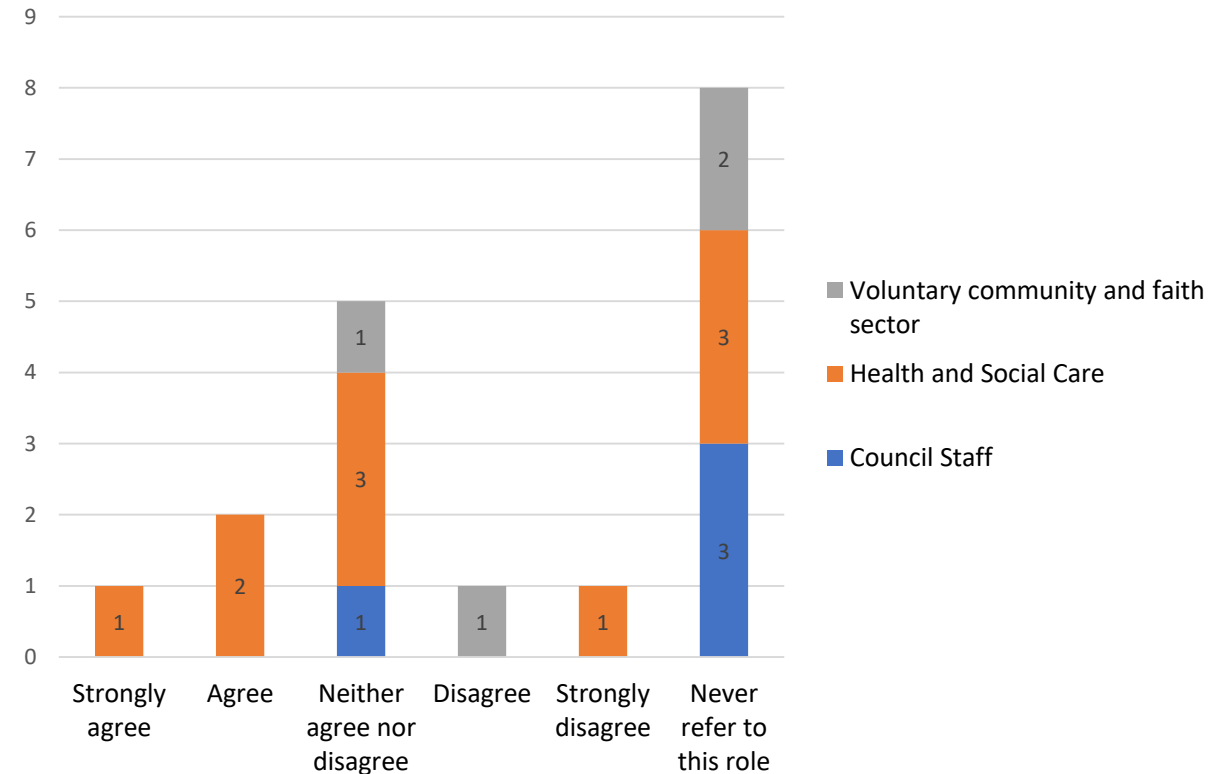


# Q25 cont. My experience of referring residents to other health and wellbeing support roles has always been positive.

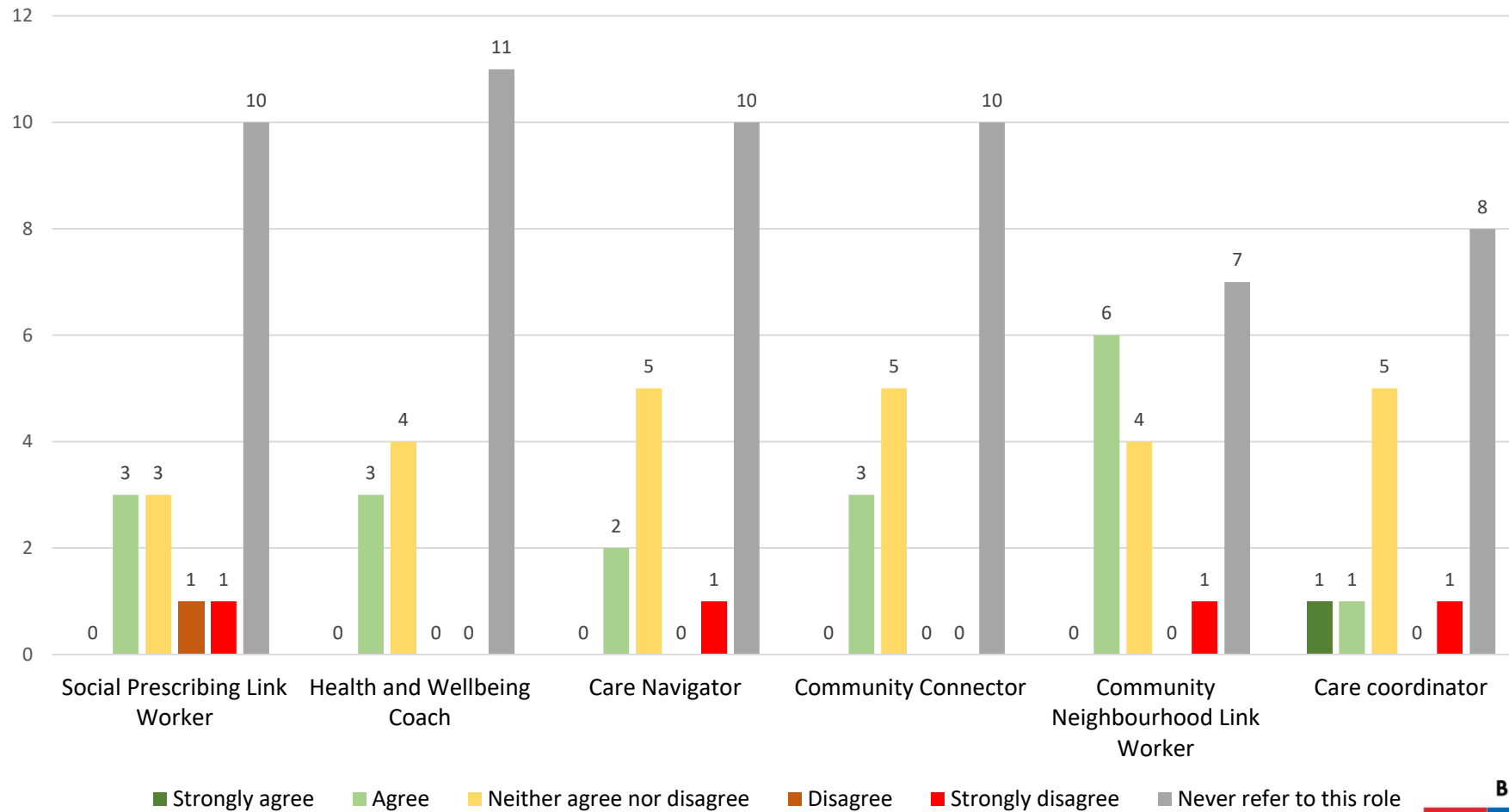
## Community neighbourhood link worker



## Care coordinator

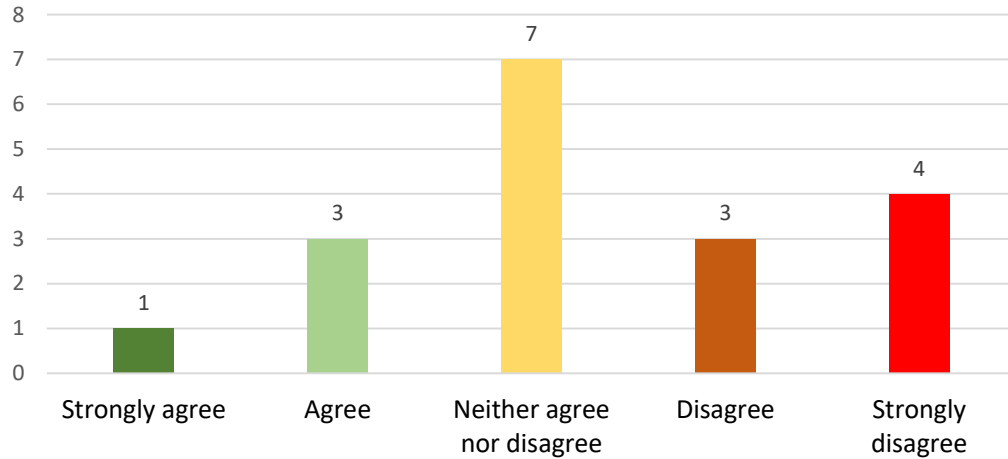


# Q26. The services provided by the other health and wellbeing support roles is appropriate to the needs of the residents that I refer to them.

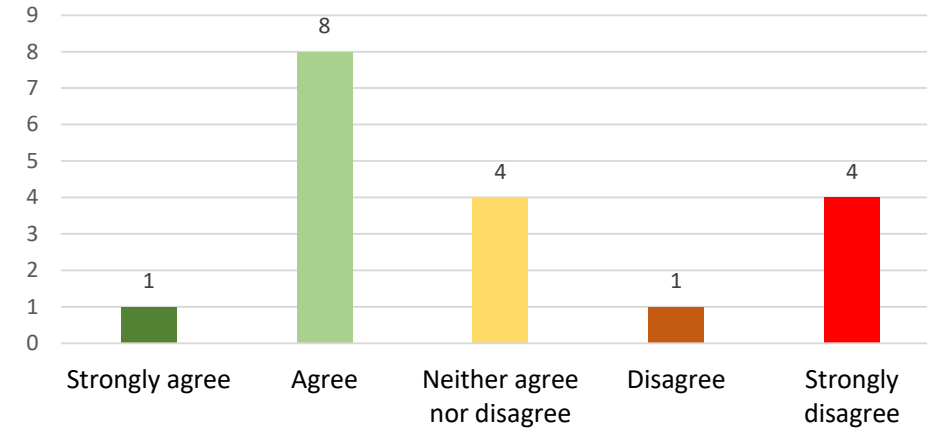


# Q27. How strongly do you agree or disagree with the following statement?

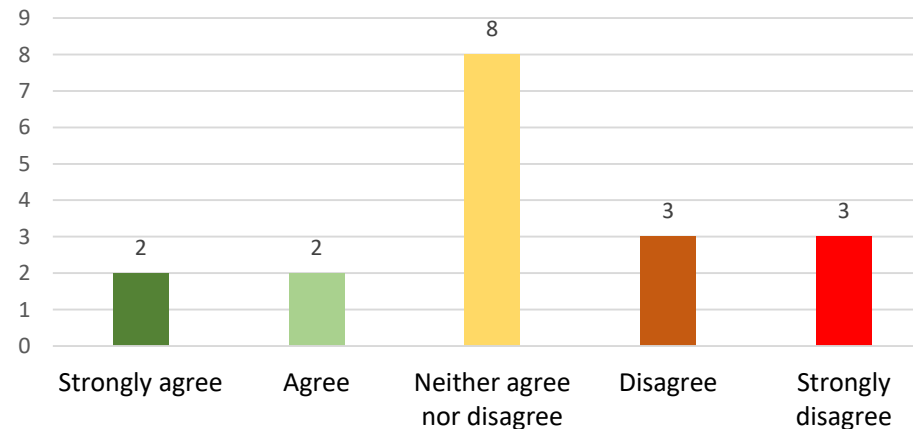
We are referred residents we would not ordinarily see until their issue were more advanced



Overwhelmed health service is inappropriately referring residents to us



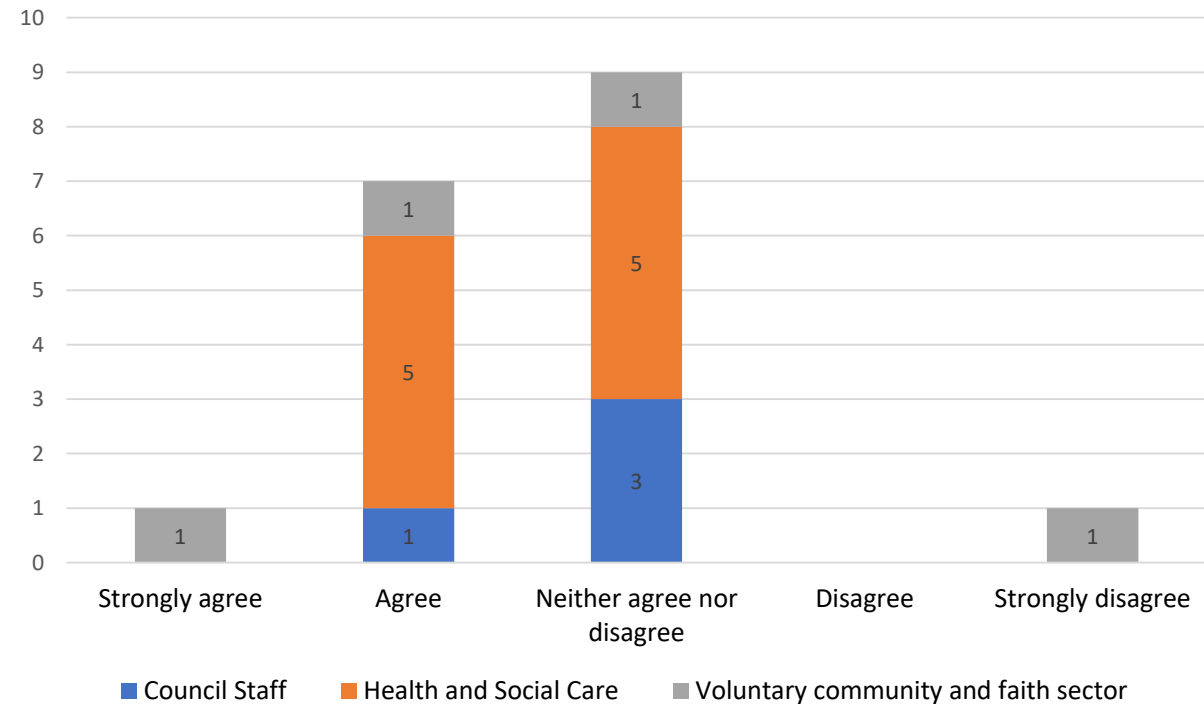
Referrals from health and wellbeing support roles creates additional work but which is manageable



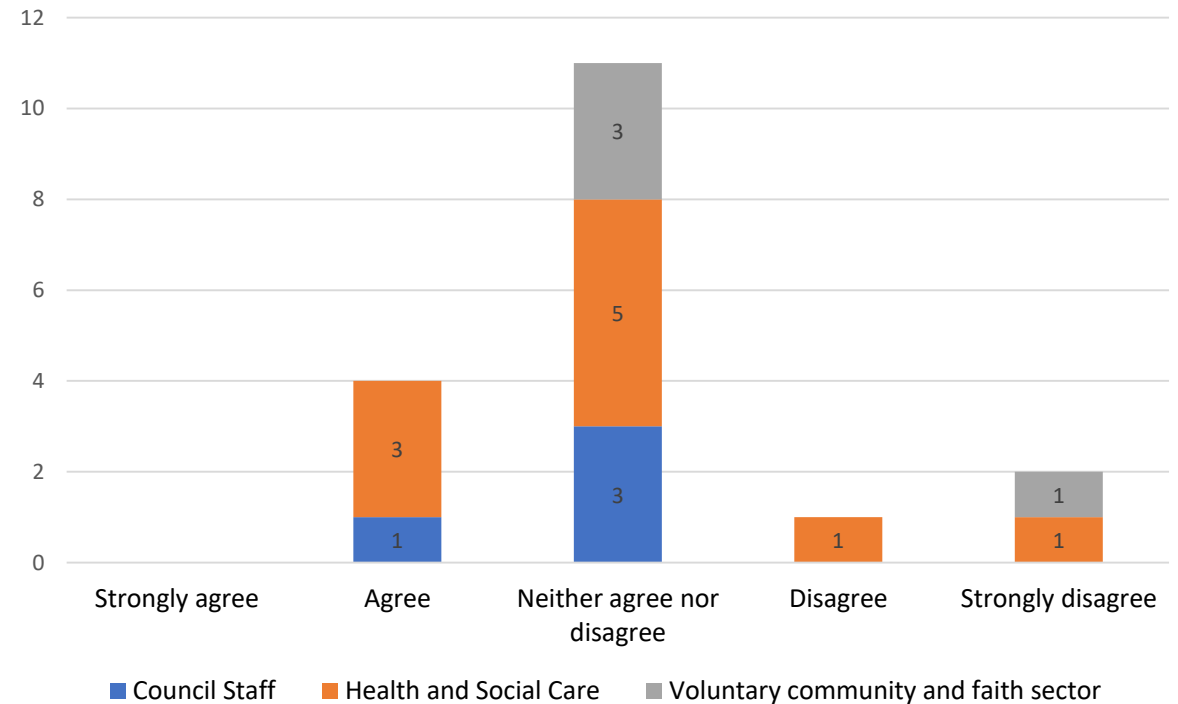
# Q28. How strongly do you agree or disagree with the following statements?



The support from the health and wellbeing roles and the services that my patients were connected to have had a positive impact on their health and wellbeing



The impact of the health and wellbeing support roles on residents has reduced the pressure on my service area

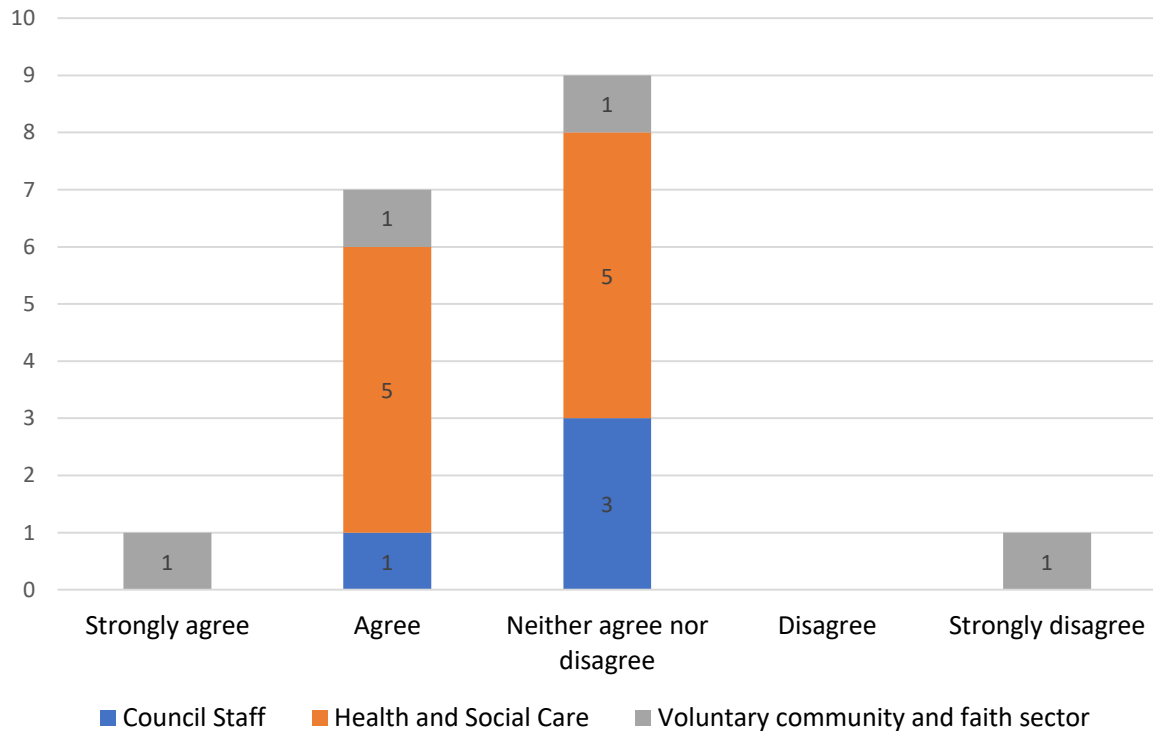


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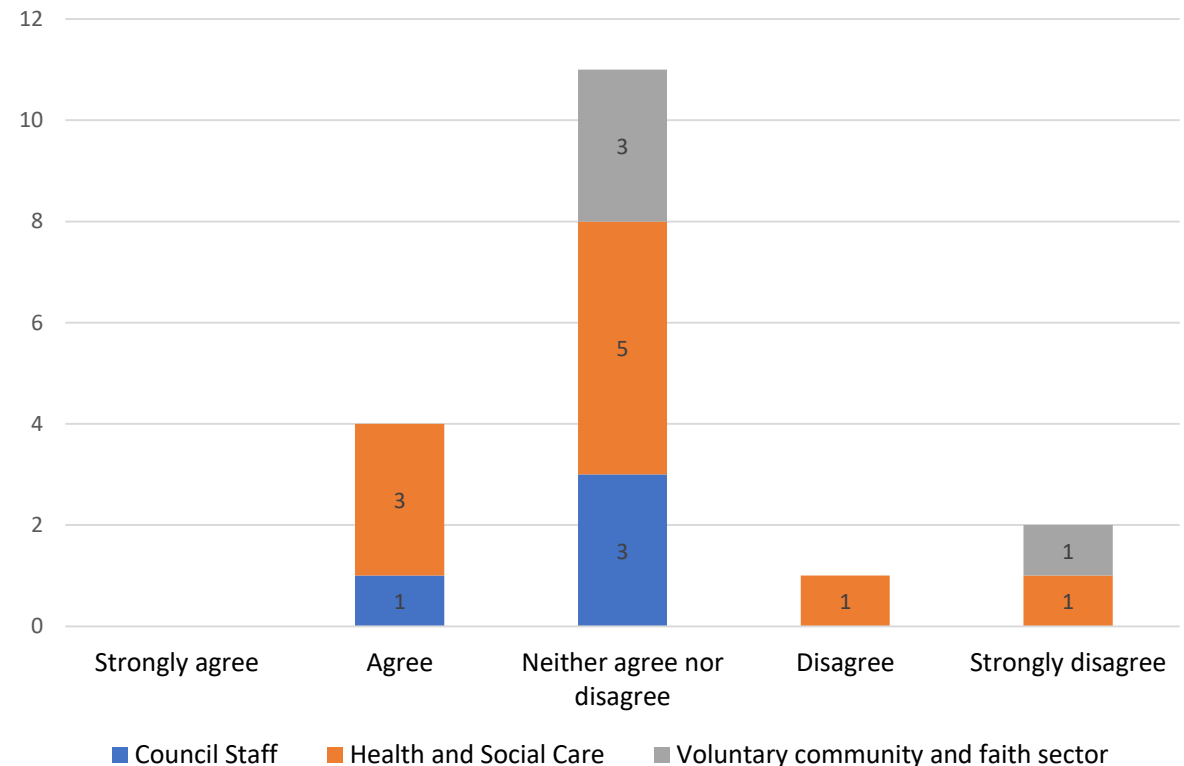


# Q29. How strongly do you agree or disagree with the following statements?

The support from the social prescriber and the services that my patients were connected to have had a positive impact on their health and wellbeing

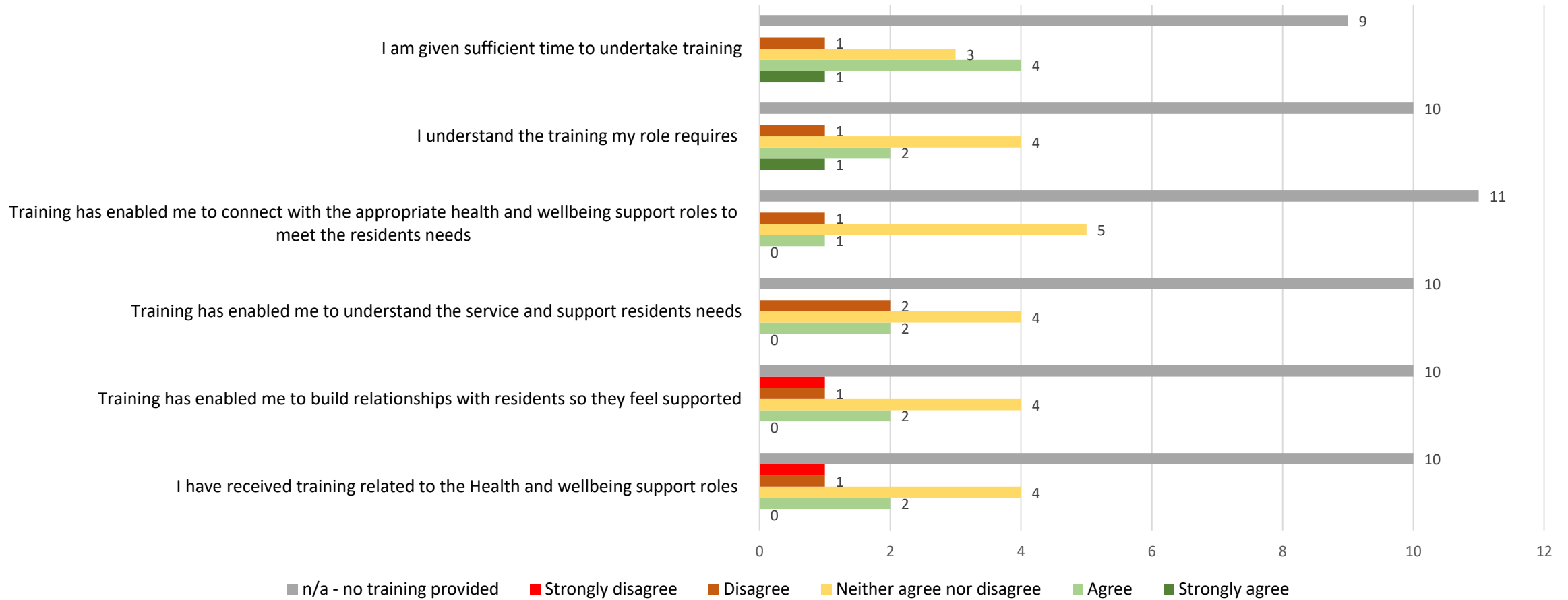


The impact of personalised care roles on residents has reduced the pressure on my service area





# Q30. Reflecting on the training you have received, how strongly do you agree or disagree with the following statements?



## Q31. Is there an area of training that you would benefit from but don't currently have access to?

Of the 18 respondents, 8 recorded answers:

- To understand health and wellbeing roles
- would like to know more about health and social wellbeing teams out there
- Trusted Assessor Course/Training
- never had any training in this regard
- Peer supervision
- Training re these roles and how they work together and the differences between them. I do not understand why we have 6 teams rather than 1 integrated team for everyone.
- All
- Learning more about these roles will be useful for when I need them