



Gypsy and Traveller Community experiences of healthcare in Oxfordshire

A Project Fund report

June 2016

**Carol Winton, Healthcare Advocate, seAp
Kate Hill, Team Manager, seAp**

Introduction by Healthwatch Oxfordshire

Healthwatch Oxfordshire is an independent organisation, established under the Health and Care Act 2012. It exists to find out about people's experiences of publicly funded health and social care, and to use that information to bring about improvements to these services in its local area. It gives the people of Oxfordshire a powerful voice in shaping decisions affecting vital services.

In 2014-2015, Healthwatch Oxfordshire set aside £25,000 a year to fund projects which would enable community groups and community based organisations to undertake small scale service evaluation projects with particular groups of services users. The aim of these studies is to gather intelligence about people's experience of care, particularly from seldom heard groups, and to produce reports which shed light on those users' experiences of services. Where appropriate, these reports contain recommendations from participants, or from the report authors, about how such services might be improved. They are also a means to celebrate examples of excellent care.

The views and opinions expressed in this report are those of the participants in the study, and of seAp. Healthwatch Oxfordshire will ensure that local providers and commissioners receive the report, and that they are alerted to the recommendations this group has made, and to the experiences the project participants describe. We will also follow up with those commissioners and providers on a regular basis, over time, in order to see what changes they make as a result. Finally we will report to the report authors, through our website and via the local media, on actions taken by providers and commissioners to deliver the report's recommendations.

Carol Moore - Executive Director



Contents	Page
Executive Summary	4
Key Findings	5
Recommendations	6
Issues faced by the Gypsy & Traveller community in Oxfordshire	8
1st phase – Consultations with Gypsy & Traveller community	10
2nd phase – Consultations with primary healthcare staff	16
Recommendations	19
Acknowledgements	21
Appendices:	22
i) Questionnaire for Gypsy & Travellers	
ii) Questionnaire for primary healthcare staff	

Executive Summary

seAp was awarded a grant from Healthwatch Oxfordshire to carry out a project looking into how members of the Gypsy and Traveller community in Oxfordshire access health services, and their experiences of the NHS. The project also looked at the experiences of the health professionals who treat and support the travellers to understand better the issues from their perspective.

seAp is an advocacy charity that has the NHS Complaints Advocacy contract in Oxfordshire to support members of the public if they have reason to make a complaint about their NHS care and treatment. We have been managing this service for over 10 years in Oxfordshire and have strong relationships with partner agencies within the NHS. Part of our remit is to engage with groups of people whose voices are 'seldom heard' so that everyone who is entitled to use the advocacy service is aware of it. We recognised that the Gypsy and Traveller community were less likely to raise a formal complaint, so their experiences were not known about. We therefore wanted to carry out this project to deliver group advocacy. Group advocacy is where a group of individuals present issues that are common to their group to raise awareness and affect change. The views of the group can be represented by an independent advocate, by the whole group or by one member of the group on their behalf.

To this end we spoke to a number of travellers, gathered their experiences to feed into the NHS so that this can be formally recorded and actions taken accordingly if necessary. seAp had already undertaken a similar project in Buckinghamshire in 2014 and had learned a great deal about how to engage with the Gypsy and Traveller community which served us well when approaching the community in Oxfordshire.

The project started in July 2015 and the following Gypsy and Traveller sites were visited:

- Ten Acre Park, Sandford, Oxford (Council owned) – 16 plots;
- Middle Ground Site, Wheatley (Council owned) – 16 plots;
- Furlong Site, Standlake (Council owned) – 16 plots
- The Beeches Site, Chadlington (privately owned site) – 20 plots

The plan for which sites to visit and how to make initial contact had to be amended after a frustrating start to the project. Initially, we approached the Health Advocate employed by Oxford Health NHS Trust to enable us to access the sites. As we had time limits to consider, and had already worked with the team in Buckinghamshire, we turned instead to Gary Brewer of Oxfordshire & Buckinghamshire Gypsy & Traveller Services to enable us to make that initial contact with the council sites.

Other leads we had for some of the private sites did not bear fruit and also contributed to the delayed start to progressing the work.

Questionnaires were sent by Oxfordshire Clinical Commissioning Group to all the GP practices serving the traveller sites we visited. We attended clinical staff meetings at Windrush Health Centre, Witney and The Leys Health Centre, Oxford to gain the views and experiences of primary healthcare staff who serve the Gypsy and Traveller communities at Standlake and Sandford respectively. We also contacted other GP practices at Chipping Norton, Witney and Wheatley by email and sent them our questionnaire to complete.

We spoke to 16 gypsy and traveller families and about 35 primary healthcare staff altogether.

Key Findings

The Gypsy and Traveller communities' perspective

- 1) There is generally high satisfaction from the Gypsy and Traveller community with health services locally, including the hospital and specialist services that were accessed. All individuals who spoke to us were registered with a GP but fewer with a dentist. There was praise for the NHS Stop Smoking service travellers had used.
- 2) The travellers were generally highly satisfied with the hospital maternity services in Oxford.
- 3) The travellers did not feel that they were treated differently by health staff because of their ethnic background though they did report a couple of experiences of prejudice and rudeness by healthcare staff. They did not always feel other patients had a positive attitude towards them.
- 4) There was a worry that the proposed closure of the Children's Centre in Chipping Norton and the subsequent withdrawal of the outreach worker who regularly visits them would have a huge impact on the families living on the Beeches site, Chadlington.
- 5) Many of the travellers were concerned that they are not getting to see a specialist quickly enough and that they have to wait too long to be referred to hospital or other specialist services. They were concerned about the length of time it takes to get a diagnosis and receive the necessary treatment. Some of the travellers were concerned about the length of time it takes to get results of tests.
- 6) There were many concerns expressed by the travellers about the appointment systems, for example time waiting for the phone to be answered, waiting times to see a GP, waiting times at the surgery, difficulties with speaking to a GP on the phone and not being able to get appointments for both parents and children at the same time. Some travellers were concerned about the appointment booking system, particularly the touch screen to sign in, which could be confusing for older patients and difficult to access for those with reading difficulties.
- 7) The travellers were concerned over the lack of visits from, and regular appointments with, health visitors.

- 8) The travellers raised concerns about the difficulties of getting to hospitals in Oxford by public transport and the difficulties of parking there if they go by car.

The Health professionals' perspective

- 1) The GPs explained that the travellers' concerns around the length of time it was taking to be referred to hospitals and other specialist services is a general issue with the referral system and is not specific to the Gypsy and Traveller community.
- 2) The GPs explained that travellers tend to expect appointments the same day. They felt the travellers used their service well in that they did not attend every time there was a minor health concern. However, they felt that a more planned approach by the travellers would enable them to make better use of the surgery especially to see their own doctor and get continuity of treatment. The GP practice staff felt this is possibly an issue of raising awareness among the Gypsy and Traveller community of the best ways to use surgeries.
- 3) The concern around a lack of visits and regular appointments with health visitors was in part shared by the primary healthcare staff and a suggestion was made that a keyworker system for traveller families may help to resolve this issue.
- 4) The GP practice staff said that the travellers tend to bring their children when they are quite ill resulting in higher use of accident and emergency and out of hours services than other patients.
- 5) The GP practice staff said that they occasionally had difficulties contacting travellers as generally travellers only had mobile phones and there were sometimes phone credit or reception problems.
- 6) The GP practice staff acknowledged that there seemed to be more literacy difficulties among the Gypsy and Traveller community, however staff identified these and supported them by reading out information or phoning instead of writing.
- 7) The GP practice staff were concerned about the difficulties of supporting travellers with mental health issues as there was a reluctance in the community to talk about this and ask for help.
- 8) GPs acknowledged that there is a higher incidence of respiratory problems in the traveller community which may be due to higher rates of smoking or due to the location of the traveller sites.

Recommendations

- 1) **Outreach Keyworker**

There is a strong need for a keyworker to be assigned to work between primary care services and traveller sites. Currently, there are regular visits from the outreach worker at the ACE Children's Centre to The Beeches site at Chadlington which provides this support. However, these services are at risk from cutbacks and their removal could disadvantage the traveller community further and leave them at risk. There is a health advocate who visits some Council owned sites but this is a limited service and not available throughout the county. There was a suggestion from the primary healthcare staff that the outreach keyworker could be based at a children's centre close to each of the

sites. The keyworker could carry out outreach work to the traveller sites to explain how the appointment system for their GP practice works and the different services on offer. The keyworker could enable the travellers to choose a booking system that best suits them as well as helping to encourage attendance at screening and other appointments on offer, reading letters and providing other support as required. We suggest that the outreach keyworker has a background in, or understanding of, mental health issues (see also Recommendation point 4).

2) Making GP practices more accessible

We suggest that the GP practices provide recorded messages on the phone for travellers, and other patients with reading difficulties, as this would help with some of the challenges around literacy levels. The information in these messages could include how to use GP practice appointment systems, the out of hours and A&E services. The GP practices could consult with representatives from the Gypsy and Traveller community, and those who know them well, such as the children's centres' support workers, to identify the best way to offer information and the best format for information leaflets to enable travellers with reading difficulties to access services.

We also suggest that where there are phone back services, the GP practices publicise them to the travellers and where phone back services are not available that GP practices consider offering one during busy times to help travellers access their service and ease the problem and worry of running out of phone credit.

GP practice staff could offer information sessions on the sites where staff can discuss with travellers any issues regarding access to health services and explain the benefits of routine screening and health checks to improve uptake of these services and help to prevent critical treatment being required later on.

3) Dental services

We suggest that further work is done to encourage travellers to register with a dentist, such as information sharing sessions held on the traveller sites to promote the local dental services that are taking patients, the dental plans available and their appointment systems. This work could either be done by the dental practices themselves or by the outreach keyworker.

4) Mental health issues

seAp feels that there would be value in carrying out further work with the Gypsy and Traveller community in Oxfordshire to gain a more detailed understanding of their concerns and issues in accessing healthcare, in particular more information on travellers' experiences and concerns with mental health services would be very beneficial.

It is also important that the travellers have independent and confidential support to discuss mental health issues and are enabled to access mental health services. This work could be carried out by the outreach keyworker who should have a background in, or understanding of, mental health issues or could be carried out in conjunction with representatives voluntary sector

partners providing mental health services to provide the travellers with expertise and focused work.

Issues faced by the Gypsy & Traveller community in Oxfordshire

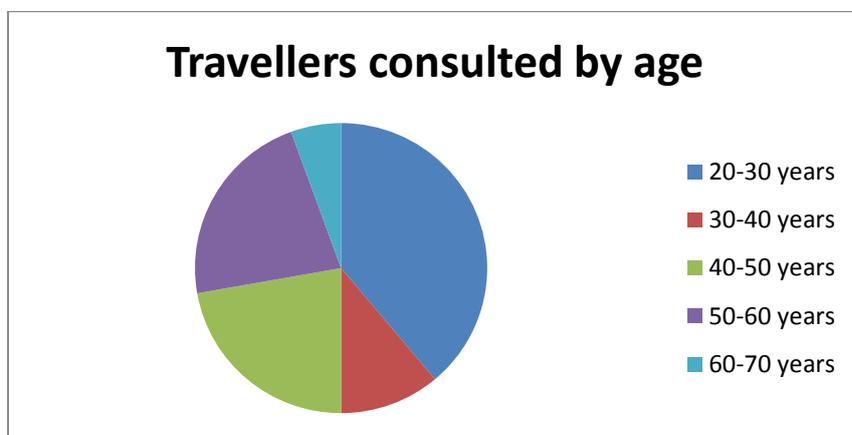
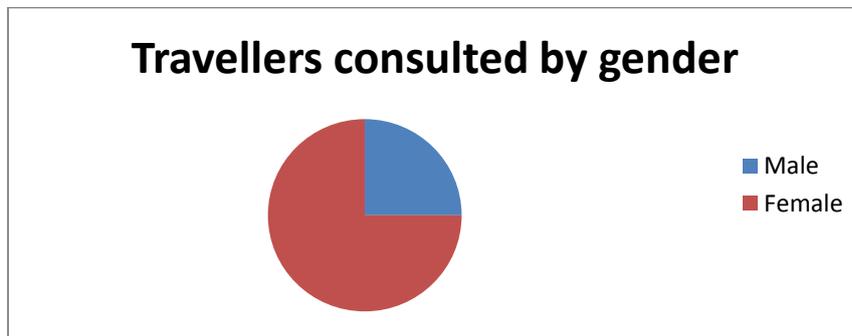
There have been other studies consulting the Gypsy and Traveller community around the UK, such as *Perspectives on primary care: the Roma Community in Bradford* by Healthwatch Bradford (2016). The issues raised are similar to the issues we found. In the Healthwatch Bradford study of the Roma Community's perspectives on primary care they found that most of the traveller community was very positive about the NHS services and almost all of them were registered with a local GP. However, very few of the travellers in that study were registered with a dentist. The Bradford Roma community also had issues with language and literacy and relied on their local community for help with reading letters.

The Gypsy and Traveller community in Oxfordshire told us that the main issues they faced were:

- lack of regular and reliable public transport from their site to local amenities and healthcare and this is made worse by the remote location of many of the traveller sites;
- cultural norms of the community that required women to be accompanied by others in the community when going out which meant they had to wait for friends and family to go with them to appointments;
- public attitudes and prejudice when attending hospital or GP surgeries; travellers told us that people can stare at them or be rude;
- distance and isolation from convenient amenities where they could access general health advice, such as baby clinics, pharmacies;
- literacy issues which made it difficult to access appointments, particularly at hospitals when they are notified by letter, and also difficulties of accessing the touch screen sign in system at GP practices;
- the location of Gypsy and Traveller sites which were often in areas close to major roads and motorways or near industrial areas. This meant that there was often a higher level of pollution around traveller sites and the travellers raised the concern that this led to higher incidence of particular health problems, such as asthma and other respiratory illnesses.

Other issues faced by the Gypsy and Traveller community, such as waiting times to get an appointment, long waiting times at surgeries and dentists, waiting times for test results and difficulties in getting referrals to specialists, are general issues faced by all other patients in the NHS system and not particular to the Gypsy and Traveller community.

We spoke to a wide age range of travellers across the sites, however there were more women than men available to speak to us on the sites when we visited. The following charts give a breakdown.



The travellers used a wide range of health services including:

- GPs
- cancer services
- cardiology
- paediatrics
- maternity
- orthopaedics
- paramedics (999 emergency service)
- occupational therapy
- midwife
- health visitor
- district nurse
- pain clinic
- palliative care nurses
- mental health services.

1st phase – Consultations with Gypsy & Traveller community

There is little data on the numbers of Gypsies and Travellers in the UK and the actual number is unknown. The 2011 census was the first time that Gypsies or Travellers could state their ethnicity on the form. In Oxfordshire there are 13 Gypsy and Traveller sites, 6 are Council owned and 7 are privately owned. The sites range in size from 5 plots to 40 plots and there are 208 plots in total across the county.

We began by attending the Gypsy and Traveller Service Multi-disciplinary meeting to introduce the project to those organisations already visiting the sites and to make contact with people who could help us access the sites and meet the travellers. We made contact with Gary Brewer, Service Manager, Oxfordshire & Buckinghamshire Gypsy & Traveller Services and he arranged for us to visit the Council sites at Sandford, Wheatley and Standlake. We are very appreciative of the support we received from Gary Brewer and all the staff in the Gypsy & Traveller Services.

We visited 4 sites (68 plots in total) at Sandford, Standlake, Wheatley and Chadlington and spoke to 16 traveller families. Three of these sites are under the local authority and one was a private site. Initially we had planned to visit different sites but had to change our approach after difficulties making contact. We would like to do more work with private sites to understand better the needs of these communities. There are literacy difficulties in the traveller community so in order to enable the travellers to access the consultation and gain the most from our visits we had discussions with the travellers and then asked questions from the questionnaire at the end to fill in any gaps. However, we also had time limits or there were only a few travellers on the site so we were not always able to get answers to all the questions on the questionnaire. In addition, when we pre-arranged to be on site the travellers who had arranged to see us were not always there.

Visit 1: 23 October 2015 – Ten Acre Park, Sandford

We first visited the Sandford site on 7 October 2015 with Gary Brewer and Peter Gammond from the Oxfordshire & Buckinghamshire Gypsy & Traveller Services to introduce ourselves and the consultation project. We spoke to several of the travellers who came to pay their rent and handed out information leaflets on seAp's NHS advocacy service. We had a positive response from four travellers who said they would be happy to speak to us about their experiences of NHS healthcare services. We arranged to visit again on 23 October 2015 in the morning to speak to these travellers in more detail. Unfortunately, when we arrived on that day only one of the travellers we had arranged to meet was on the site. We spoke to him and then walked round the site to introduce ourselves to other travellers and spoke to them about their experiences. We spoke to 4 travellers in total that day – 1 man and 3 women. Three of them used GP services at Donnington Health Centre and one used The Leys Health Centre.

Their experiences were varied:

- They had all had positive experiences at the GP surgeries although one traveller said they had to wait a long time for the staff to answer the phone and that they had spent three days trying to get through on one occasion.
- Two other travellers said they had problems getting appointments with their GP and that they had to wait a long time for an appointment and could not get one straight away.
- One traveller said that they felt the appointment and other systems were confusing for older people, especially those with dementia, and said that the touch screen system to sign in was not good for everyone, especially those with reading difficulties.
- One traveller said that there used to be a walk-in service at their GP surgery which was no longer available and it is now appointments only which was not as good.
- One traveller said that she felt welcomed in the GP surgery and the receptionists were good.
- One traveller had a heart condition and said his GP was very good and called him regularly to check on him and he gets regular appointments. The heart nurse also visits him on the site. He said that the hospital services were very good, although he did have a problem on one occasion when he waited for three hours for an appointment and was then told it was cancelled. However it was sorted out quickly and he got his appointment the same day. He had also used the ambulance service and said it was very good and came straight away.
- All the travellers we spoke to were registered with a dentist and generally their experiences were good.
- Three travellers had had experience of using the John Radcliffe Hospital and all said they had positive experiences there.
- One female traveller had a son with special needs and said the paediatric services at the John Radcliffe Hospital were brilliant and she could not fault them. She also used the Speech and Language Therapy services, the Community Paediatrician, Occupational Therapy services, other allied health services and the school nursing services. She had praise for all of them and said that the services in Oxford were better than the services she had received elsewhere. She was due to move with her son out of county and she was concerned about whether she would get the same quality of care for him there as she had received in Oxford. She also said that the service she received at her dentist was excellent and he was very good with children with special needs. She had experienced a problem with one GP where a health problem was misdiagnosed. She found that GP rude and unhelpful, however this was only one GP and the others were good. She changed her GP and is happy with the new one.

- One traveller said that the midwife who had attended her in maternity in hospital was not nice and she thought about complaining but did not do so in the end.

Visit 2: 9 November 2015 – Middle Ground, Wheatley

We walked around the site with Gary Brewer to introduce ourselves and ask the travellers about their experiences of health services. We spoke to 3 travellers – all women. Their experiences and the issues they raised were:

- All the travellers we spoke to were registered with a GP. Two were registered with Morland House Surgery, Wheatley, one traveller did not specify where she was registered.
- The travellers reported problems with getting appointments and waiting times in the surgery before they saw their GP. One traveller said she had to wait for an hour in the surgery before she saw the doctor on one occasion.
- One traveller said that they cannot speak to their GP on the phone which would be helpful and that it can be a three day wait to get an appointment.
- Two travellers said that the GPs and receptionists were very nice and they did not think the problems were to do with the staff themselves but they blamed the health service systems.
- One traveller said that she had not experienced prejudice or discrimination from the GP surgery staff, however the public can be rude and stare at travellers. She said she has walked out of the waiting room because people have been rude to her.
- One traveller had a son with special needs and said that there used to be a specialist health visitor who came to the site but that stopped and she does not see the health visitor any more. She said she gets little help with her son. She said that she has had to wait a long time for test results from the GP.
- One traveller was registered with a dentist, the others did not specify if they were registered. The traveller who was registered said she had problems getting appointments with her dentist and on one occasion was waiting two hours before she saw the dentist.
- One traveller had been admitted to John Radcliffe Hospital and said she had a good experience of the health service there. She said, however, that there were problems referring her for an operation and she had to wait a year before she got her operation. She has been waiting months for an appointment with the Pain Clinic and has had to wait a very long time for another operation. She has also had appointments at the Churchill Hospital and the Nuffield Orthopaedic Centre (NOC). She said the service at the NOC is getting better now. She said there are problems with parking at the Churchill Hospital, it is an ordeal just to get there and it takes ages to get a space.

- One traveller's daughter was admitted to John Radcliffe Hospital and she had problems parking there to visit her daughter. She said there are no buses to the hospital from the travellers' site and it is a long way to walk. However, she complained to the hospital about the problems she had experienced when visiting her daughter and the hospital staff contacted her to apologise and she did not have to pay her parking ticket.
- When telling us about the prejudice she had faced, one traveller told us "when you are a traveller you just have to bear it."
- One traveller has a bad heart and on one occasion the ambulance was called to her in an emergency. She said she had a very positive experience of the service, did not feel there was any prejudice and felt she was not treated any differently because she was a traveller.

Visit 3: 10 November 2015 – The Beeches, Chadlington

The Beeches, Chadlington, is a privately owned site so we had to make different arrangements to visit there as it is not a site that is managed or visited by the Oxfordshire & Buckinghamshire Gypsy & Traveller services. We made contact with Sarah Saxby at the ACE Children's Centre in Chipping Norton, who visits the site regularly. She arranged for us to visit when she was there and to meet several of the travellers. We met with 5 travellers and their children – 4 women and 1 man. The issues and experiences they raised were:

- All were registered with a GP surgery in Chipping Norton and their experiences were varied.
- One traveller said the GP service was really good.
- One traveller said it was the worst system for appointments at the surgery and that she often waited all day to be called back.
- One traveller had a very bad experience at the surgery and said when her baby daughter had tummy problems she went to the GP but kept being sent away. She said there were big problems with the appointment system and that she had waited in the surgery for one and a half hours on one occasion to see the GP.
- One traveller said that the appointment system had got worse since the two surgeries in Chipping Norton had merged together and the waiting time for appointments was worse.
- The travellers felt that there was a general problem with the appointment system for everyone and did not think it was any different because they were travellers.
- One traveller said when she is in the surgery the staff are lovely. She said that the district nurses from the surgery are very good and visit older people on the site. They came out on one occasion to check on people when the power was cut and they brought a generator with them.

- One traveller had had a very bad experience with her GP to get a specialist product on prescription for her youngest baby that had been available to her older children. She was told she would have to pay for it and they could not have it on prescription any more. She was told it would cost her £53 to buy the product and they could not give it to her on prescription because they did not have the budget to do so. She said there were long delays in getting appointments and this had a huge impact on the baby's well-being. Her son was crying every day during this time. She complained and started a petition and contacted the Prime Minister, David Cameron, who is their local MP. In the end she succeeded in getting the product for free on prescription.
- Two travellers had used the NHS stop smoking service and said that it was really good.
- One traveller had been into the Horton General Hospital, Banbury, and said the staff there were rude and she felt they were racist to her because she was a traveller. She said the nurses would not let them wait inside when her sister was in hospital and they had to wait outside in the rain. She said they had made a complaint to the hospital but had not heard back. However, she did say that the maternity services at the Horton Hospital were very good and the staff were lovely. She said she had been to John Radcliffe Hospital and they were "brilliant and very nice people."
- One traveller had experiences in the mental health services, however she did not want to tell us about this in front of the other travellers. We tried to get this information later, but unfortunately we were unsuccessful.
- All the travellers praised the service they received from the ACE Children's Centre and from Sarah Saxby. They said the sessions she runs are very helpful. Sarah had run a first aid course on the site and the travellers all thought it was good and they learned a lot.

Visit 4: 7 December 2015 – Furlong site, Standlake

Gary Brewer arranged for us to visit the site at Standlake which is a Council owned site. We spoke to 4 travellers – 2 women and 2 men. Their issues and experiences were:

- All the travellers were registered with a GP either at Windrush Medical Centre or Nuffield Health Centre in Witney. They had mixed experiences at their surgeries.
- One traveller said that they thought the service at Windrush Medical Centre was very good and they had no problems.
- One traveller rarely used the GP service and had no opinions on it.
- Travellers expressed dissatisfaction with getting referrals to specialist services and this is illustrated by these three examples:
 - (i) One traveller was not happy with their GP service at Nuffield Health Centre and said they would prefer to be registered at Windrush Medical Centre.

They said the appointment system is poor, they have to wait a long time to get an appointment and do not always see their own GP so have to repeat their history over again. They said there were problems with GPs investigating persistent symptoms as the GPs do not refer to specialists but keep treating symptoms even when someone is in pain. Her child had a health problem and was in pain. The pain persisted and her child was not referred to a specialist. Eventually she took her son to A&E at the John Radcliffe Hospital where a sample was taken, the results came back quickly and her son got a diagnosis and proper treatment.

(ii) One traveller had children with health problems and has been taking them to the GP for a while without resolution or referral to a specialist. This situation continues even though her daughter is no better and is very distressed.

(iii) Another traveller also had a problem with getting a referral to a specialist. Some years ago she had been going to see the GP for a year with a certain health issue. The GP did not refer her to a specialist. After a year she then attended a clinic at the John Radcliffe Hospital and her health issue was looked at and the doctor said it would have been better if she had been referred earlier. She also said that she has to wait a long time to get an appointment, on one occasion she had to wait two weeks to see a GP and she does not always see her own GP. She said they do not give enough tablets in one prescription so she has to keep going back for repeat prescriptions which costs her money and time in travelling. She said she has to wait for results of tests and she has to keep ringing in as they do not inform her automatically, costing her money in phone calls. She said there was a problem with getting family appointments as she cannot have one appointment for her to speak to the GP about her health problems and her children's problems at the same time so she has to make two appointments and go back twice.

- One traveller praised the health visitors and said it was a good service although they only visit for about 10 days following the birth of a baby.
- One traveller had heart problems and cancer and said the GP was very good and responded to him promptly when he needs to see him. He said there was no waiting for appointments and he had no problems with attitude from staff or the public, everyone was very nice. He said that the John Radcliffe and Churchill Hospitals and the Nuffield Orthopaedic Centre were all very good and the staff were very helpful. He had no problems with waiting times to get an appointment or waiting to see the doctor when he was at the hospital.
- All the travellers had used health services at the John Radcliffe Hospital and said they were very good.
- One traveller had used the paramedic ambulance service. He was taken to the John Radcliffe Hospital. He said the paramedics and all the staff and facilities at the John Radcliffe Hospital were very good.

- One traveller praised the maternity services at the John Radcliffe Hospital. She had her son there by Caesarean Section and said all the staff and facilities were very good.

2nd phase – Consultations with primary healthcare staff

In order to facilitate the consultations with primary healthcare staff we made contact with Labli Bakht, Equalities and Access Commissioner, Oxfordshire Clinical Commissioning Group and met with her to discuss our project. Labli offered to contact the GP practices that served the traveller sites we were visiting and sent them our questionnaire. The GP practices were:

- The Leys Health Centre and Donnington Medical Practice, Oxford, serving Ten Acre Park, Sandford.
- Morland House Surgery, serving Middle Ground site, Wheatley.
- Chipping Norton Health Centre serving The Beeches site, Chadlington.
- Windrush Medical Centre and Nuffield Medical Centre, Witney, serving Standlake site, near Witney.

We had a prompt and positive response from the Windrush and Nuffield Medical Centres and from The Leys Health Centre. We arranged to visit Windrush Medical Centre to meet with the clinical staff there at their weekly meeting and arranged to do the same at The Leys Health Centre in Oxford. The questionnaire for primary healthcare staff was emailed to the GP practices we did not manage to visit, however we did not receive any replies. We are aware of the pressures on practice staff, particularly over the winter period, and we are very appreciative of the support they gave us.

Visit 1: 22 January 2016 – Windrush Health Centre, Witney

We met with about 25 staff from the health centre including the Practice Manager, GPs, health visitors, palliative care and district nurses. We fed back to them the issues that the travellers had raised from the Standlake site. The primary healthcare staff's views and experiences were:

- They said that there is less planning ahead in the traveller community and that travellers tend to expect to have an appointment the same day or next day. This can make it difficult for the travellers to see their own GP each time and end up seeing a different doctor each time. The GPs would prefer that the travellers have a more planned approach to healthcare so that there is more continuity and means the travellers would not have to repeat their history each time. The staff acknowledged that the less planned approach may be to do with the culture and lifestyle of the traveller community.

- The GPs said that the less planned approach means that it is difficult to offer double time appointments on the day to deal with both parents and children's healthcare issues because of the way the appointment system is set up.
- The GPs acknowledged that the travellers tend to consult them more than other patients and are high users of the services. They felt that the travellers mainly used the health services appropriately.
- The GPs said that the travellers tend to present as more forceful than other patients, they do not want to feel they will be fobbed off and want to be taken seriously. This can mean that consultations can be a little difficult.
- One GP raised the issue of the out of hours service which he worked on. He said that demands from travellers for this service are high and that they tend to walk in and want to be seen at once. He felt that it was more difficult to manage the needs of the travellers in the out of hours service.
- To overcome the issues with the out of hours service, staff suggested there is more information given to travellers about the 111 service and this awareness raising could be done via the children's centre. (Eynsham Children's Centre staff visit the traveller site.)
- The staff said that there were a lot of mental health issues among the traveller community and it can be hard to open a dialogue to support them with this.
- There had been a low uptake of immunisations in the past but it was better now. Staff thought this may be due to a whooping cough outbreak on the site and then all the travellers came with their children when they realised there was an immunisation that could help them avoid it.
- The staff said that there were issues with travellers remembering to attend appointments.
- It was acknowledged that there were literacy difficulties in the traveller community and this impacted on their ability to read letters and prescriptions. Staff supported the travellers by reading letters and prescriptions to them or by checking that there was someone on the site who could read to them. In those instances staff would highlight the important parts of the document for someone else to read. They said that often children would read documents for their parents. Staff felt that travellers may not always attend hospital appointments because they could not read or understand the hospital letters.
- To overcome the issues of reading and access to information, staff suggested that the travellers use the Choose & Book system that can be done over the phone. There is also a text reminder service where the practice can send reminders out 7 days and 24 hours before an appointment. This can be set up when the travellers check in to make an appointment at the practice.
- Generally, GPs and healthcare staff do not visit the site on a regular basis, it tends to be as necessary.
- The health visitors and district nurse who visit the site acknowledged that it can be scary when they first go on the site as everyone gathers round their

car. However, when the travellers get to know them they are very welcoming and it is easy to access the site to see people.

- The palliative care staff also reported that they had a positive experience on the site and there were no problems with access. They said that the travellers sometimes expect more than staff can offer.
- Staff said that the Standlake site is quite a static site and travellers do not tend to move on much from there. They felt it was a better supported site than others elsewhere.
- Generally, staff felt that the travellers would benefit from more information and raising awareness of the best way to use the healthcare services.

Visit 2: 5 February 2016 – The Leys Health Centre, Oxford

We met with about 10 staff from the health centre including the Practice Manager and GPs. We fed back to them the issues that the travellers had raised from the Sandford site. The staff's views and experiences were:

- They explained that they had a duty doctor role in the practice so the doctors will see other patients even if they are not their patient.
- Staff said that they also found the traveller community expect more of the health service than other patients and expect to see a GP straight away when they contact the practice.
- They said that travellers use the A&E and out of hours services differently to other patients and can use these services inappropriately.
- They said that traveller parents tend to bring their children later than other patients so the children are often quite ill before they see a doctor which may account for the higher use of out of hours services in the traveller community. Staff said that there is a higher incidence of respiratory problems among traveller children which may be due to higher rates of smoking among the parents or the situation of the traveller sites. (Some sites are situated close to major roads, such as motorways, or industrial areas.)
- Staff said that management of chronic diseases can be poorer among the traveller community.
- They said that travellers often do not attend routine follow-up appointments, so doctors are not always able to maintain regular reviews of conditions, such as asthma, and that this would benefit them more than waiting for another flare up.
- Although the travellers on the Sandford site are quite a settled community and tend to stay for years, staff did raise concerns about lack of continuity and difficulties in following up on safeguarding, immunisation and other issues with children when they move around the country.
- Staff said they also found that the travellers have a less planned approach to health care and that they are less likely to take up regular health checks, such as mammograms, smear tests, etc.

- They said that they often have problems getting in touch with the travellers. The main method of contact with travellers is by phone but often the travellers do not call back when the GP or practice staff leave a message. Staff are not sure why this is and suggested it may be problems with mobile phone reception or maintaining credit on the phones. Staff said that travellers can then end up contacting the out of hours or A&E services when the practice is closed.
- Staff said that there were communication issues in the traveller community, such as lower literacy levels or heavy dialect which some staff found difficult to understand. They said that they support travellers with literacy difficulties, however they acknowledged that the patient information leaflets were not easily accessible for those who had reading difficulties.
- They said that there were mental health issues among the traveller community but it was difficult to engage with travellers to support those patients with continuing care and long-term treatment.
- Staff said that travellers tend to use the health visitor service more than other patients, however there were no health visitors at the clinical meeting so it was arranged we would send a questionnaire to the health visitors by email following the meeting which we did. Unfortunately, due to pressure of work in the practice, we did not receive any replies.
- GPs do not visit the traveller sites any more and the health visitors and nurses only visit as necessary.
- Staff raised the question whether it was more difficult for travellers to access healthcare services or was it down to the less planned lifestyle in the traveller community. There was a suggestion that the traveller community should have a keyworker who could liaise between health services and the travellers, attend appointments with them, provide information and raise awareness among travellers about the best way to use health services, help identify illness early on, particularly in children, and perhaps be a health advocate for the travellers. It was suggested a keyworker could also liaise with the local children's centre.
- The general view among staff was that the travellers should come to the GP practice and use their services more.

Recommendations

1) Outreach Keyworker

There is a strong need for a keyworker to be assigned to work between primary care services and traveller sites. Currently, there are regular visits from the outreach worker at the ACE Children's Centre to The Beeches site at Chadlington which provides this support. However, these services are at risk from cutbacks and their removal could disadvantage the traveller community further and leave them at risk. There is a health advocate who visits some Council owned sites but this is a limited service and not available throughout

the county. There was a suggestion from the primary healthcare staff that the outreach keyworker could be based at a children's centre close to each of the sites. The keyworker could carry out outreach work to the traveller sites to explain how the appointment system for their GP practice works and the different services on offer. The keyworker could enable the travellers to choose a booking system that best suits them as well as helping to encourage attendance at screening and other appointments on offer, reading letters and providing other support as required. We suggest that the outreach keyworker has a background in, or understanding of, mental health issues (see also Recommendation point 4).

2) Making GP practices more accessible

We suggest that the GP practices provide recorded messages on the phone for travellers, and other patients with reading difficulties, as this would help with some of the challenges around literacy levels. The information in these messages could include how to use GP practice appointment systems, the out of hours and A&E services. The GP practices could consult with representatives from the Gypsy and Traveller community, and those who know them well, such as the children's centres' support workers, to identify the best way to offer information and the best format for information leaflets to enable travellers with reading difficulties to access services.

We also suggest that where there are phone back services, the GP practices publicise them to the travellers and where phone back services are not available that GP practices consider offering one during busy times to help travellers access their service and ease the problem and worry of running out of phone credit.

GP practice staff could offer information sessions on the sites where staff can discuss with travellers any issues regarding access to health services and explain the benefits of routine screening and health checks to improve uptake of these services and help to prevent critical treatment being required later on.

3) Dental services

We suggest that further work is done to encourage travellers to register with a dentist, such as information sharing sessions held on the traveller sites to promote the local dental services that are taking patients, the dental plans available and their appointment systems. This work could either be done by the dental practices themselves or by the outreach keyworker.

4) Mental health issues

seAp feels that there would be value in carrying out further work with the Gypsy and Traveller community in Oxfordshire to gain a more detailed understanding of their concerns and issues in accessing healthcare, in particular more information on travellers' experiences and concerns with mental health services would be very beneficial.

It is also important that the travellers have independent and confidential support to discuss mental health issues and are enabled to access mental health services. This work could be carried out by the outreach keyworker

who should have a background in, or understanding of, mental health issues or could be carried out in conjunction with representatives voluntary sector partners providing mental health services to provide the travellers with expertise and focused work.

Acknowledgements

We express our grateful thanks to the following for their work and support to us with this consultation project:

All the travellers on the sites we visited.

Gary Brewer, Oxfordshire & Buckinghamshire Gypsy & Traveller Services.

Peter Gammond, Oxfordshire & Buckinghamshire Gypsy & Traveller Services.

Sarah Saxby, ACE Children's Centre, Chipping Norton.

Labli Bakht, Oxfordshire Clinical Commissioning Group.

Fergus Campbell, Oxfordshire Clinical Commission Group.

Morag Keen and all the staff at Windrush Medical Centre.

Dr. Milly Rogers at the Nuffield Health Centre.

Susan Renn, Allie McArdle and all the staff at The Leys Health Centre.

Chris Bean, Chipping Norton Health Centre.

Nollag McGrath, Morland House Surgery, Wheatley.

Kanika Lang and Carol Moore, Healthwatch Oxfordshire.

Appendices

i) Questionnaire for Gypsy & Travellers

GYPSY & TRAVELLER COMMUNITIES' EXPERIENCES OF HEALTHCARE IN OXFORDSHIRE

Questions for Gypsy & Traveller Communities

- 1) Age.....
- 2) Gender: (please tick) Female Male
- 3) Are you registered with a GP? Yes No
- 4) Which health services do you use or have used in the past? (please tick)
Hospital A&E Midwife Health Visitor Dentist
Other services you use (community mental health, stop smoking, etc.)
- 5) Where do you go first when you have a problem with your health?
- 6) Do you find it easy to use health services?
- 7) What is your experience of using health services?
- 8) When did you last use a health service?
- 9) What would stop you from going to a health service and why?
- 10) What helps you to use the health services and why
- 11) What is good about the health services?
- 12) What is not good about the health services?
- 13) How could things be done better by the health services?
- 14) What changes would you like the health services to make?
- 15) Do you feel listened to and respected by doctors and other health staff and do you have good working relationships with them?

ii) Questionnaire for primary healthcare staff

GP SURGERY STAFF'S EXPERIENCES OF WORKING WITH THE GYPSY & TRAVELLER COMMUNITIES IN OXFORDSHIRE

Questions for GP Surgery staff

- 1) GP surgery address.....
- 2) Gypsy & Traveller community you work with.....
- 3) Your job role.....
- 4) How many (approx.) travellers do you see a week?.....
- 5) How often do you visit the site/s?.....
- 6) What has been your experience of visiting the sites?
- 7) What issues have arisen and how do the travellers use the GP services, e.g. do they use the service appropriately or do they need to be signposted to other services?
- 8) If there are issues, what would help the traveller communities access GP services more appropriately, e.g. more information about other services?
- 9) Are there other health professionals in your practice who also visit/see the travellers and can we speak to them as well?
- 10) Are you aware of any specific issues that may hinder access to services, e.g. reluctance to seek help with specialist services such as mental health, lack of awareness of services such as 111, minor injuries units, literacy levels, etc. If so, how do you deal with this and do you have any suggestions to improve access?
- 11) Do you have any suggestions for improving the experience of healthcare services for the travellers and also for healthcare staff in GP practices?
- 12) Anything else you would like to say?

Thank you for your time in completing this form.

Kate Hill – kate.hill@seap.org.uk

Carol Winton – carol.winton@seap.org.uk