



# The District Nursing Service:

People's experiences of using the  
service in Somerset



June 2021



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# Background

The District Nursing Service (DNS) in Somerset has developed to meet the needs of patients, enabling them to receive care at home and remain in their communities and out of hospital. The DNS can be involved with over 1,000 patients in a single day throughout Somerset.



It is estimated that during 2019, 24.6% of Somerset residents were over the age of 65<sup>1</sup>. As this older population in Somerset grows there is a greater demand on community services in the 'out-of-hospital' model. We want to ensure that the service provided is meeting the needs and expectations of our population in Somerset.

**“Out-of-hospital care describes any care that is not undertaken in a traditional hospital setting. This could include healthcare in the community, at the patient’s home, school or workplace, or at a GP practice.”<sup>2</sup>**

During meetings with the DNS, we determined there was increasing pressure on the service during Monday mornings and Friday afternoons, and that prospects for recruitment were limited with current working hours. Therefore, expanding the existing services to include weekends and evenings may have benefits, not only for patients but also for the service. These extended hours will provide employment opportunities to a wider base, including those who have caring responsibilities during traditional weekday working hours, but who are able to work in the evenings and at weekends.

## Overall aims of the project

Working jointly with the district nursing teams in Somerset, we have gained the views of those currently using the service.

We wanted to know what the current strengths and weaknesses were in the delivery of the DNS to patients in Somerset.

Through talking to people who use the DNS in Somerset we aimed to better understand people’s experiences of accessing the DNS (including referral, repeat and other visits).

By gathering public insight into how the DNS is currently delivered and how potential changes would be/are being received, we can better understand the impact of changes to access, such as digitalisation, on patients using the DNS.



More specifically, we wanted to explore areas such as, ease of accessing the service out of hours; people’s opinions on extending routine visits into the weekends and after 5pm (in line with the seven day working agenda); and how patients feel about the use of digital technology, for example, video consultations when accessing the service for advice.

We will use these experiences to directly influence Somerset DNS in the development and extension of the out of hours provision for district nursing.

<sup>1</sup> Somerset Intelligence: <http://www.somersetintelligence.org.uk/somerset-facts-and-figures/#PN>

<sup>2</sup> <https://www.healthy london.org/resource/hospital-care-standards-children-young-people/>

# What we did

- We met with the district team leads for Somerset DNS.
- We produced an online survey to record people's experiences of using the Somerset DNS in the past six months.
- The survey ran from 22 February until 11 April 2021.
- 2,500 information leaflets requesting people to take part in the survey, were distributed by District Nurses to those using the service across the county.
- Carers and family members of those using the service were also encouraged to take part.
- Participants were able to contribute either online, or by completing a consent form allowing one of our volunteers to call them and interview them over the phone.
- We promoted the survey through a press release, social media campaigns, volunteers, and through over 60 network organisations.

Healthwatch Somerset has a team of 34 active volunteers. 12 of our volunteers supported this engagement and contributed about 28 hours of their time. Their contributions included:

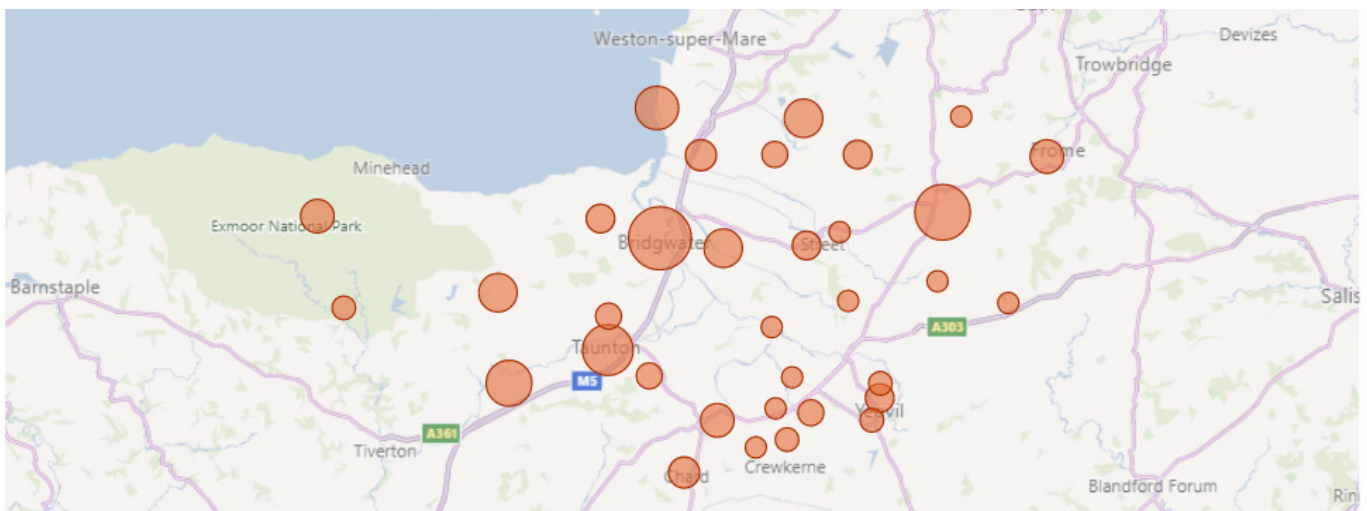
- Promoting the engagement through their networks, families, and friends.
- Interviewing consenting respondents over the telephone and recording their comments.
- Entering survey responses onto the survey website.

Volunteers reported that the calls were straightforward and enjoyable, each call took about 15 minutes to complete. In some cases, the interviewees revealed that they enjoyed the process as they do not have regular contact with many people.

"I had the usual chat and laughs - this lady is 90 years old and very happy with the DNS - these are the only people she sees and chats with."<sup>3</sup>

# Who we spoke to

We recorded experiences from 175 people throughout Somerset. A full breakdown of postcode data can be seen in **Appendix 1**.



<sup>3</sup> Quote from one Healthwatch Somerset Volunteer who carried out interviews.

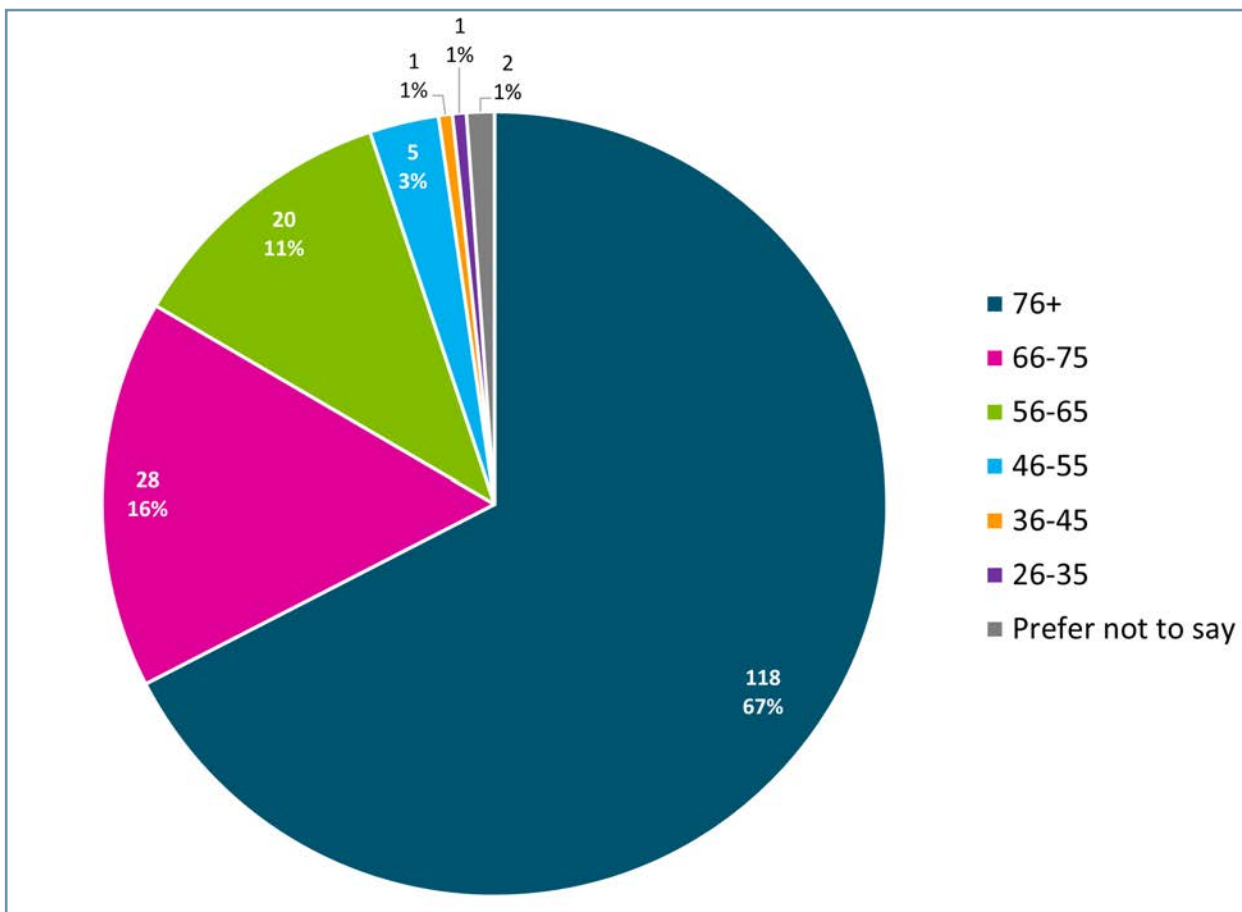
When asked 'Who are you completing this survey as?', 127 (73.8%) people did so as themselves or on behalf of someone using the DNS, while two (1.2%) people selected 'Other'.

43 (25%) respondents described themselves as a carer or family member, giving their own experiences of the DNS.

96 (51.6%) of 171 participants identified themselves as female, 74 (43.3%) said they were male.

A full breakdown of respondents' demographic data can be seen in **Appendix 2**.

**Figure 1: Age distribution of all respondents**



## Key messages

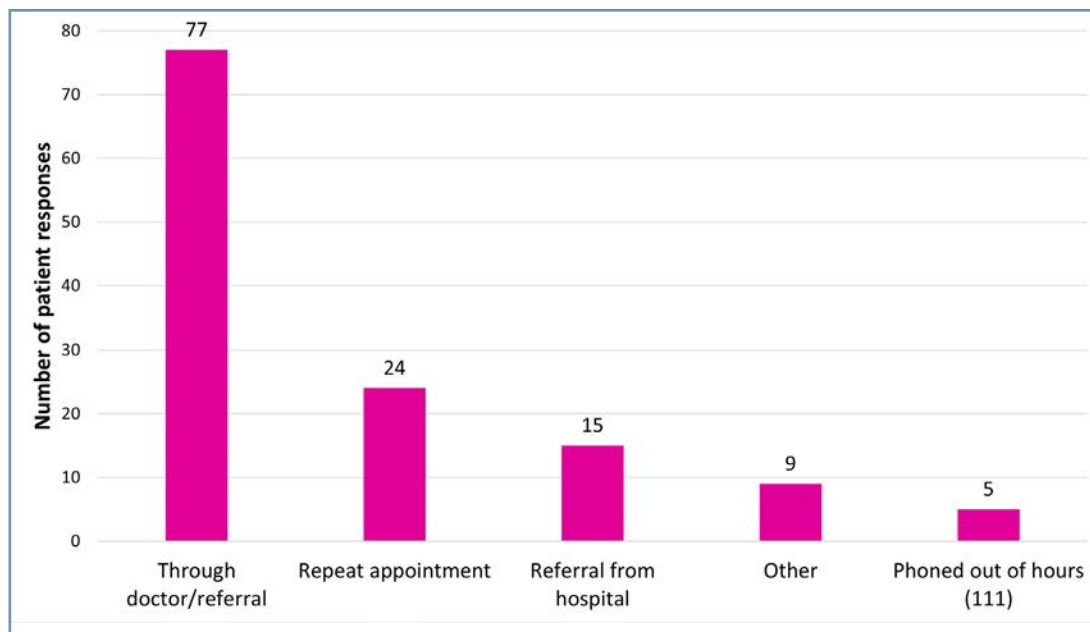
- 161 (93.6%) of 172 respondents rated the DNS as 'Very good'.
- 137 (79.2%) of 173 respondents said they would be able to manage a routine visit after 17:00 on weekdays
- 159 (91.9%) of 173 responses said they would be able to manage a routine visit on a Saturday or Sunday.
- Most people said they liked the DNS because they are friendly and helpful.
- 67 (51.5%) of 130 respondents selected one or more reason that indicate they are subject to digital exclusion.
- A small number of respondents had criticisms of staffing or service delivery.

# What people told us

## Making an appointment

131 patients responded to this survey question. Carers were not asked this question.

**Figure 2: How the appointment was arranged**



All 'Other' responses can be seen in **Appendix 3**.

## Appointment cancellations

19 (11%) people out of 172 said they had an appointment with the DNS cancelled or rescheduled in the past six months. Five of the reasons given were because the District Nurses did not have enough staff members or time to carry out the visit.

All reasons given by respondents can be seen in **Appendix 4**.

## Service times

Of the 174 participants answering the question '**Have you tried to access the DNS out of hours?**<sup>4</sup> 57 (32.8%) said they had. 51 of these people said their call was answered in a timely manner, while six said their call was not answered in a timely manner.

40 of 56 respondents said they were contacted by or referred to the DNS because they made a call out of hours.

A full breakdown of the responses to these questions can be seen in **Appendix 5**.

173 people responded to the question '**Would you be willing to have a routine visit by the District Nurse after 17:00 on weekdays?**' 36 people (20.8%) said that they would not be able to manage a visit from the DNS after 17:00 on weekdays.

<sup>4</sup> Out of hours is between 22:00 - 08:00 weekdays or anytime during weekends.

**Figure 3: Reasons given for not wanting a visit after 17:00 on weekdays**



Respondents were able to select more than one reason resulting in a higher number of reasons than number of people who said ‘No’.

‘Other’ reasons are listed in **Appendix 6**.

We asked, ‘**Would you be willing to have a routine visit from the District Nurse on a Saturday or Sunday?**’ and 159 (91.9%) of 173 answers said that they would be willing to manage a visit from the DNS at the weekend.

Six of those who were not willing to manage a weekend visit indicated this was because of ‘Other commitments - such as family members’; another six people gave ‘Other’ reasons, and two respondents did not give a reason.

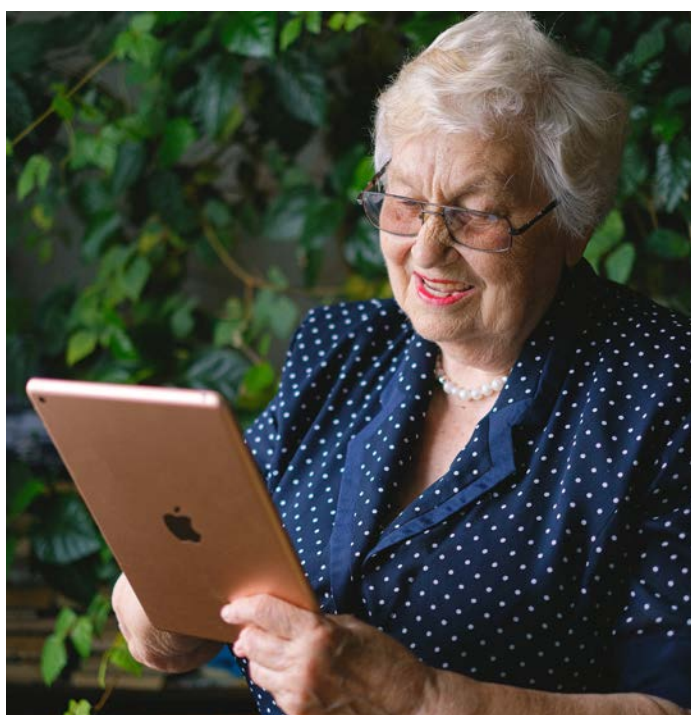
‘Other’ reasons are listed in **Appendix 7**.

### Online consultations

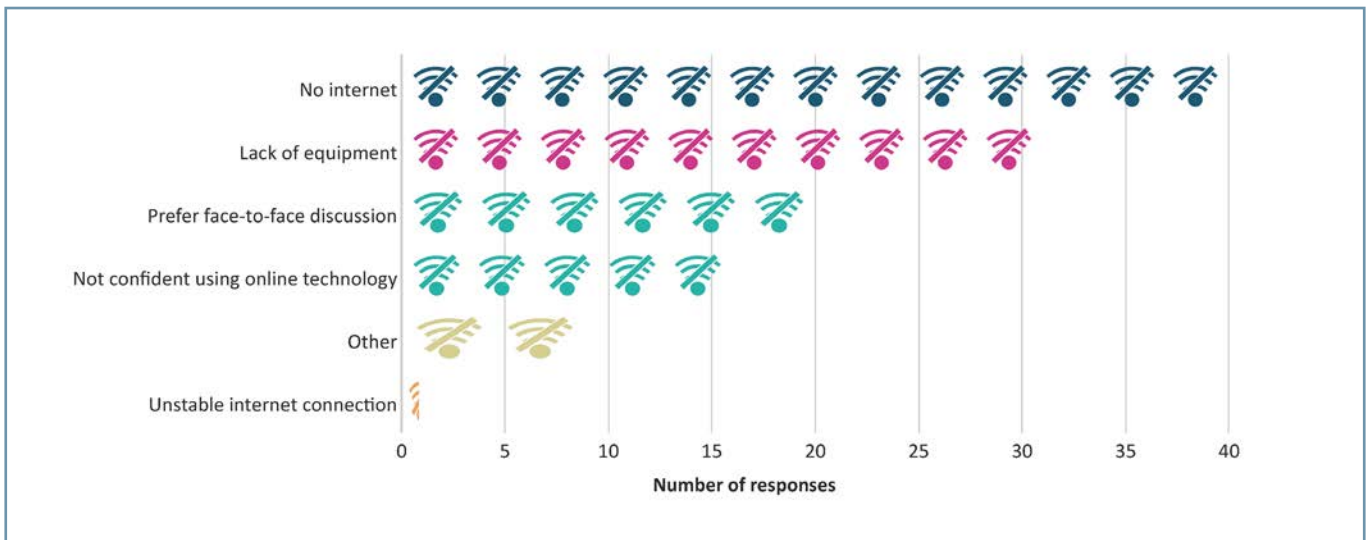
We asked patients who were answering as themselves, and those who were answering on behalf of someone using the DNS, if they would be willing to undertake an online consultation where appropriate. Carers were not asked this question.

130 patients responded to this question, 44 (34%) of these said they would be happy to undertake an online consultation.

86 respondents said they would not be willing to have an online consultation, the reasons for this are given in figure 2. The most common reason given for not wanting an online consultation was having no internet connection. ‘Other’ was selected by two people who did not state a reason.



**Figure 4: Reasons given for not wanting an online consultation**



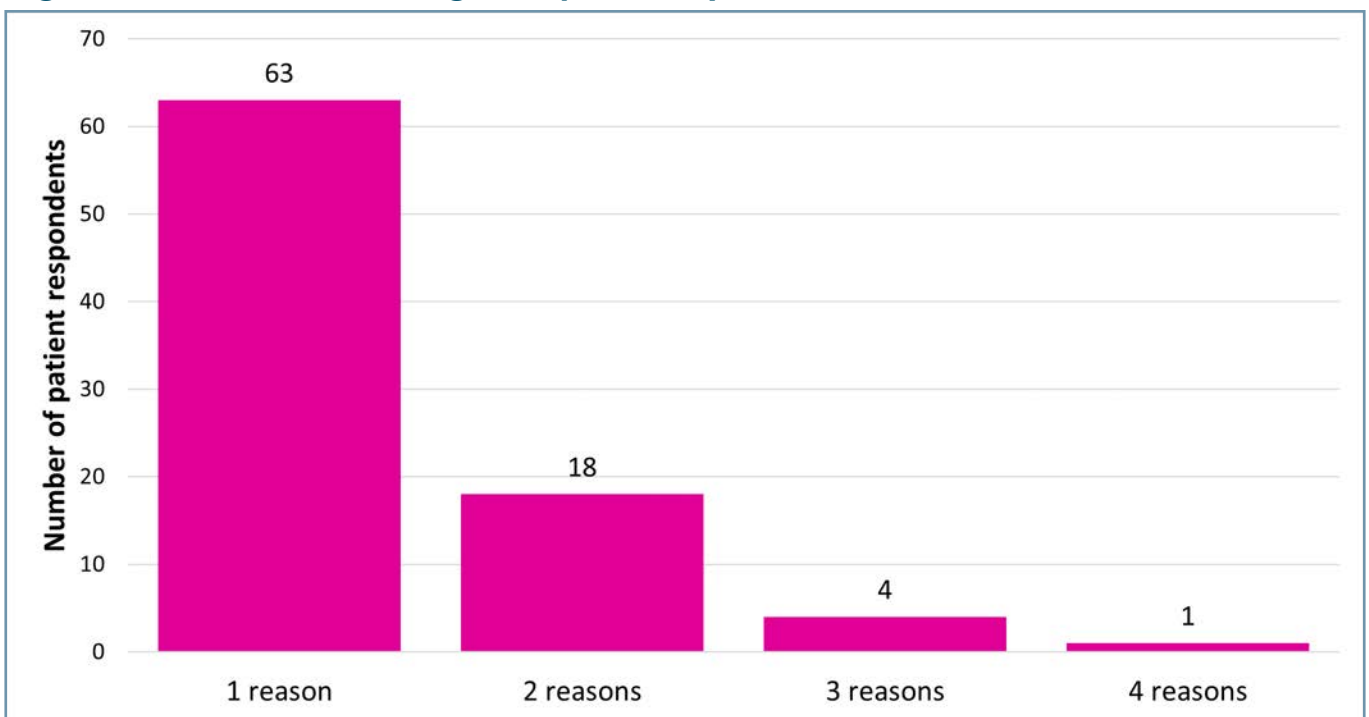
Respondents were able to select more than one reason resulting in a higher number of reasons than number of people who said ‘No’.

A list of the ‘Other’ reasons is listed in **Appendix 8**.

67 (51.5%) of 130 respondents selected one or more reason that indicate they are subject to digital exclusion.

20 (15.4%) of 130 respondents specified that they preferred a face-to-face appointment with the District Nurse.

**Figure 5: Number of reasons given by each respondent**



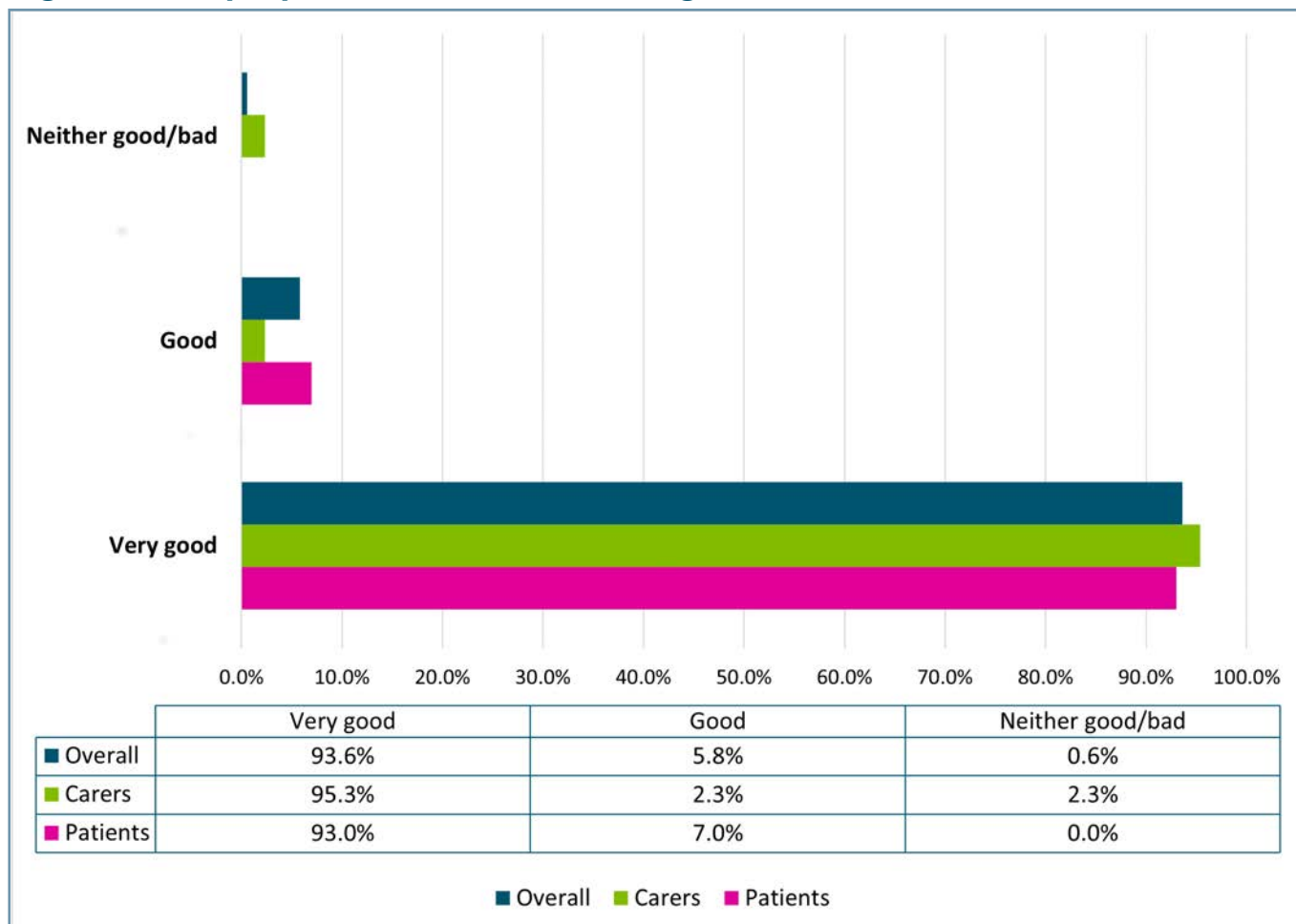
## Overall service rating

172 (98.3%) of 175 respondents gave a rating for the DNS.

Nobody gave a rating of 'Bad' or 'Very bad'; three people did not give a rating.

Statistically there is no significant difference between carer and patient's responses.

**Figure 6: How people rated the District Nursing Service**



### Key: colour coding of quotes in this report

Patients using the DNS  
(or answered on behalf them)

Carers/relatives of someone  
using the DNS

## What people like about the DNS

Overall, the DNS is well liked and appreciated by both patients and carers. Comments showed that the attitude of the majority of District Nurses was caring and professional.

“Always cheerful. Always give you the feeling they are very competent. Get the feeling that they will always be there when you need which is very reassuring.”

“They were very kind and caring at whatever time of the day or night that we needed them. Always professional but friendly.”

152 out of a total 170 comments mentioned that they found the DNS friendly, helpful, or caring.

“Friendly, efficient and very helpful to have home visits. I could not attend a clinic twice a week!”

“We have been very grateful to have the District Nurse Team available to help our elderly father during a period of illness over the last few months. It is excellent that the nurses can be called out to help when required, meaning that Dad could receive medical attention without having to leave his house. All of the nurses have been extremely professional, kind and caring.”

56 comments out of 170 included how people found the DNS to be reliable and/or efficient.

“The girls are always lovely. Very kind. Treatment is efficient and appropriate. They even take their shoes off when coming in. We had our Covid jabs at home.”

“They are efficient and have great knowledge on different wounds and the appropriate treatment for this. They will explain and advise on other ways to effectively improve healing of wounds and assist in preventing first and treatment second. Which has helped in minimising pressure sores and other ailments.”

22 comments from 128 patients, and two from 42 carers, indicated the importance of the face-to-face engagement and support from the District Nurses.

“They are a huge support and go over the top to assist with any medical concerns or problems and have on many occasions been able to allay fears that something may be wrong. We would feel totally lost and abandoned without the contact we have with them. They are invaluable.”

“The DN always have a chat with me. The only other people I see are the care staff that come into me 5 days a week.”

“The service is brilliant - they give me the confidence to carry on caring for my husband. I couldn't manage without them - can't speak highly enough of them all.”



A separate breakdown of both patient and carers responses can be seen in **Appendix 9**.

## What people did not like about the DNS

Patients told us what they did not like about the DNS, ten of these comments related to appointment times including those that were missed.

“Would be helpful to be given a window (time slot) for scheduled visits. For example, 08:30-12:30 as they all arrive at different times ranging from 09:00 to 16:00 and that makes it difficult to schedule any essential activities (for my daughter who lives with me as my primary carer).”

“Nothing at all except sometimes when you don’t know when they are coming.”

Seven patients indicated they would prefer to see the same District Nurse or a consistent group of District Nurses to improve the continuity of their care.

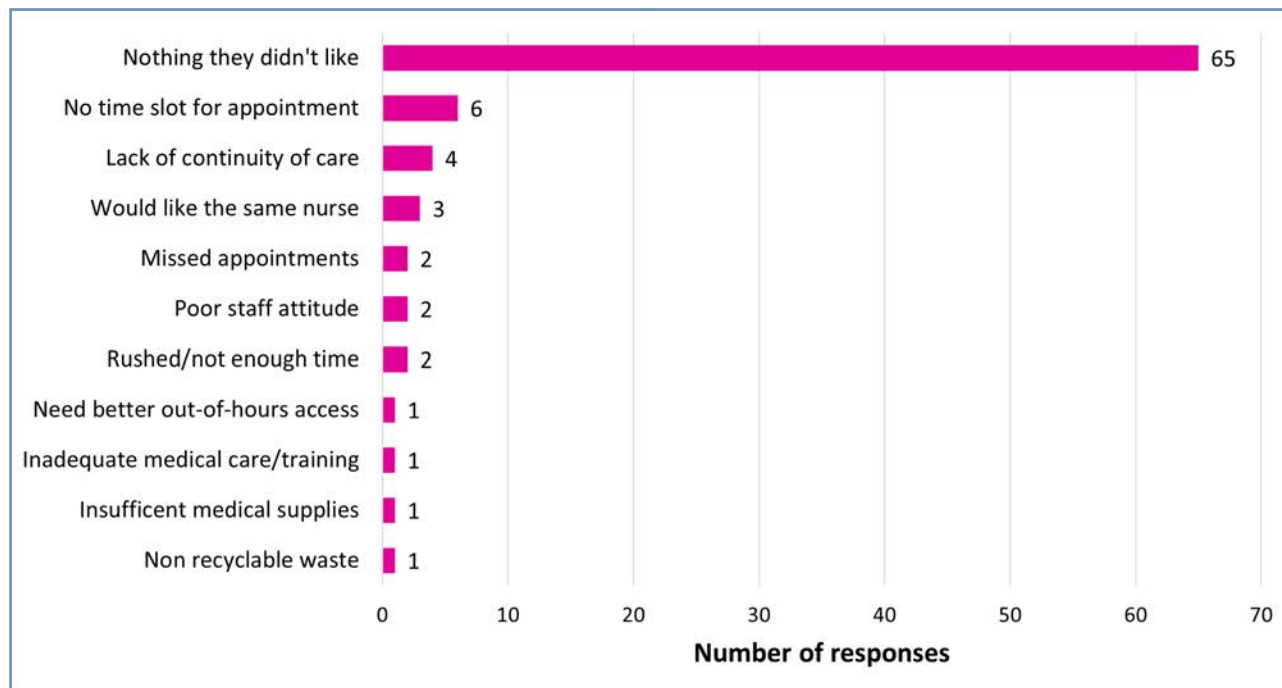
“We know it’s not possible, but my husband would like to see the same nurse more frequently.”

“It would be better if I saw the same nurse or same couple of nurses for continuity purposes. It would save having to explain my situation every time a different nurse attends.”

Two people made comments about poor attitudes from some District Nurses.

“I found some of the nurses rude and patronising. In fact my daughter was with me during one visit and was shocked by a nurse’s rudeness. We complained about this and the nurse in question no longer visits me.”

**Figure 7: What patients did not like about the DNS**



11 carers told us about things they did not like about the DNS; five of these comments mentioned that they would prefer the same District Nurse or a consistent group of District Nurses to improve the continuity of care for the people they cared for.

“Person I care for doesn’t like all the different nurses too much as too many changes and each nurse doesn’t see the problem each week.”

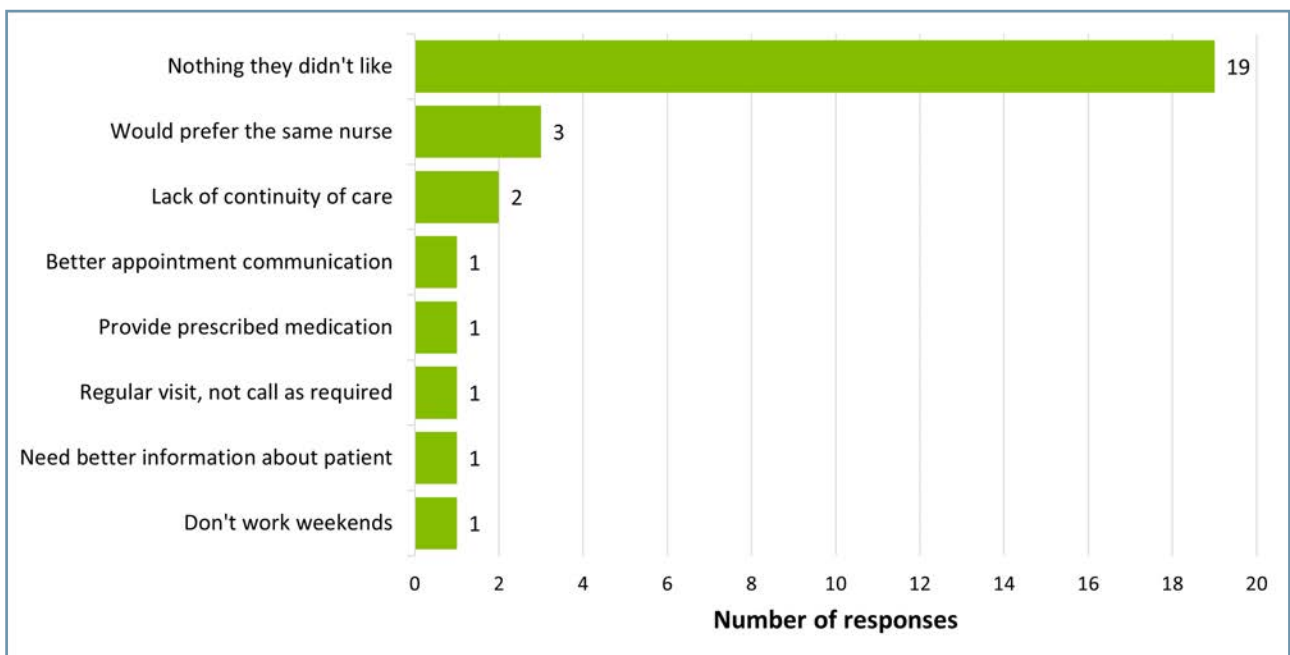
“Recently the DNS has altered - for some reason the teams have been rearranged. We can receive ‘relief’ staff who don’t know us at all. Sometimes they are not even a District Nurse. I understand the teams are also very unhappy about this rearrangement. My husband and I rely on the staff knowing us well as that reassures us both, but that is no longer the case. It’s rather upsetting.”

“I would prefer a bit more communication to discuss my mother’s needs etc.”  
 “Some refuse to clear up the mess; they make saying it’s not their job to do this.”

One carer mentioned that they would like more direct communication from the DNS.

A single comment was made by a carer about some District Nurses not clearing up before they leave.

**Figure 8: What carers did not like about the DNS**





## Changes to the DNS people would like to see

When asked ‘Is there anything else the DNS could offer you to be supported at home?’ 93 of 117 comments by patients and carers said that no additional support was required.

Nine patients, out of 117, responding to the question requested further information about their condition and/or signposting to possible services that may support them with their condition/rehabilitation.

Three people requested a time slot for their appointments.

A breakdown of these requests/suggestions can be seen in **Appendix 10**.

A total of 104 people (patients and carers) responded to the question ‘In addition to what you have told us, are there any other changes to the District Nursing service you would like to see?’

71 people said there were no other changes they would like the DNS to make to their care.

11 comments requested a time slot for appointments and a further eight comments requested better communications regarding appointment times, cancellations, and changes.

“Only that it would be quite useful to know what time the nurses are coming.”

“Would prefer to know the day and time of their arrival.”

“More idea of a specific time slot would be nice but understand this can’t always be possible.”

Eight comments suggested that extending service hours or more District Nurses were needed to meet demand as visits were sometimes rushed, delayed, or cancelled because of this.

“It would be good if they extended their hours it might be less stress on the nurses trying to fit everything in.”

A breakdown of these requests/suggestions can be seen in **Appendix 11**.

“The area they cover at night is too large or there is not enough nurses on duty at night.”

# Recommendations

1. It is clear throughout the experiences we gathered that the current service provided by Somerset District Nurses is very well received by patients, their carers, and family members. Maintaining and building on this level of service should be at the heart of any proposed changes to the DNS.
2. Increasing the hours of service, so that routine visits can take place during weekends and evenings where appropriate, would be beneficial for both service users and staff. Consideration into the suitability of the appointment day/time must be given on an individual basis to maintain equal access for all.
3. The data suggests that, at present, any move to digital appointments would need to be sympathetic of those who are digitally excluded, such as those who do not have an internet connection or a device for accessing the internet.
4. Investigate the possibility of introducing a time slot system such as AM or PM where capacity allows, this would be especially useful for patients with memory loss or mental confusion.
5. Improving continuity of care<sup>5</sup> by providing a consistent nurse, or group of nurses, for long term service users and those with cognitive impairment, should be given significant consideration.

## Next steps

During this engagement, it became apparent that feedback from those working within residential homes and supported living facilities were not included in the distribution of leaflets by the DNS. It was agreed that these experiences would be gathered through two online forums during May 2021, and a supplementary report with these findings will be published later this year.

We aim to co-ordinate further engagement with the service users of the DNS service within the next twelve months to help us assess how, or if, this report has influenced changes to the delivery of the DNS in Somerset.

Our findings will be presented to the Somerset DNS and Somerset Health and Wellbeing Board; the report will be published on our website and shared with Healthwatch England.



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<sup>5</sup> Continuity of care is the experience of care over time. It could mean seeing the same healthcare professional each visit, having a good therapeutic relationship with your healthcare professional, and/or having a seamless experience if accessing more than one service for the same condition

# Stakeholder's response



**Somerset**  
NHS Foundation Trust

**Somerset NHS Foundation Trust**  
**Gillian Cook RD, Neighbourhood Service Lead, Taunton Creech Medical Centre**

“Somerset NHS Foundation Trust is about to commence a transformation process for the District Nursing Service in Somerset and our patients’ voice is at the centre of this work. This report containing feedback about our District Nursing Service from patients and carers across the county will be invaluable as we move through this transformation process and it will positively influence our future service. We want to thank Healthwatch Somerset for carrying out this work; it has been an excellent example of collaborative working that will ultimately inform our future services.”

## Thank you



Healthwatch Somerset would like to thank everyone who took the time to contribute their views and experiences throughout this engagement.

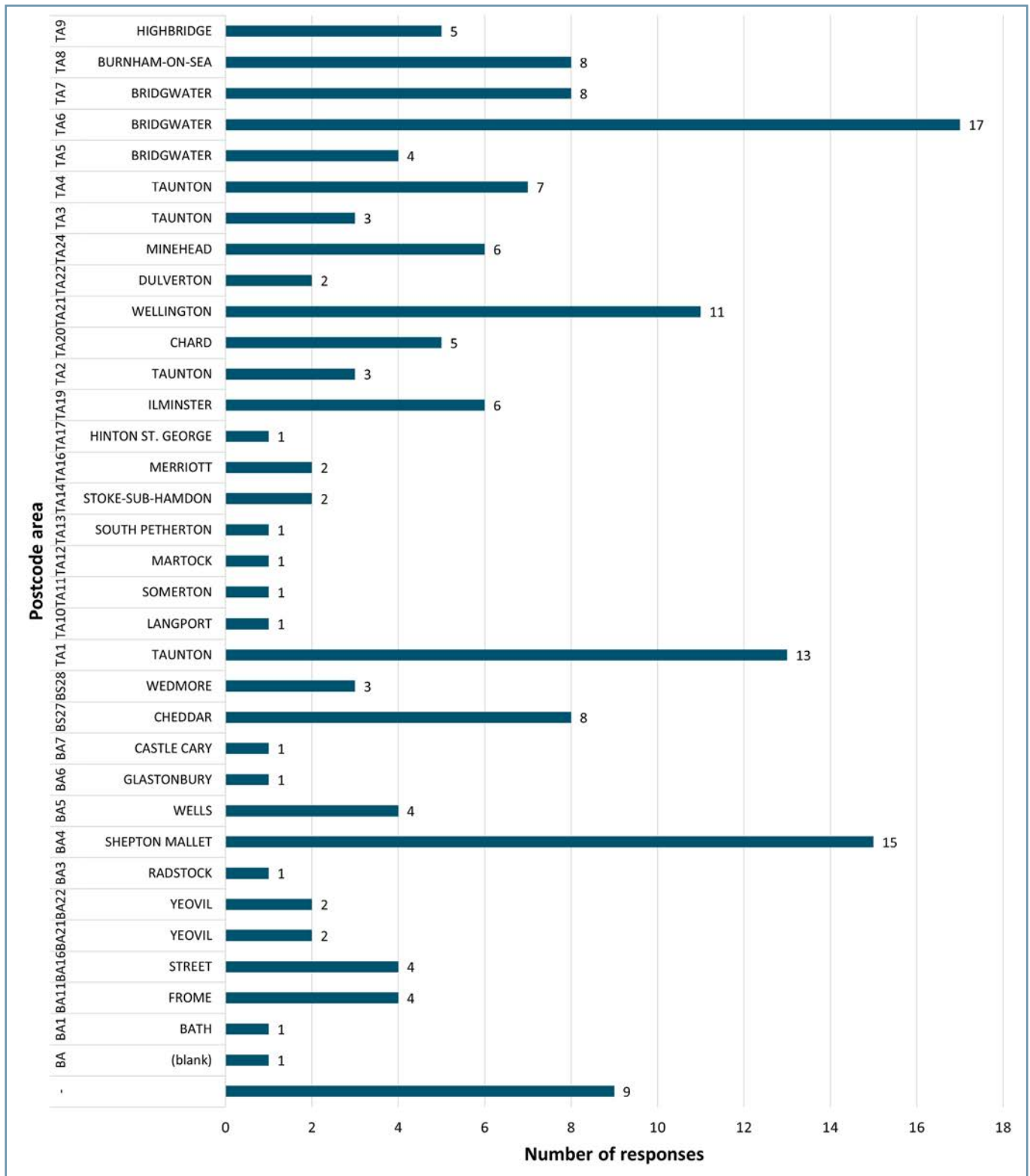
Additional thanks must be given to our dedicated volunteers, Somerset District Nursing Service, and the numerous voluntary and community sector organisations who helped to support the engagement activity.

Without their support we would not have been able to reach such a targeted audience or achieve such comprehensive coverage of Somerset county.

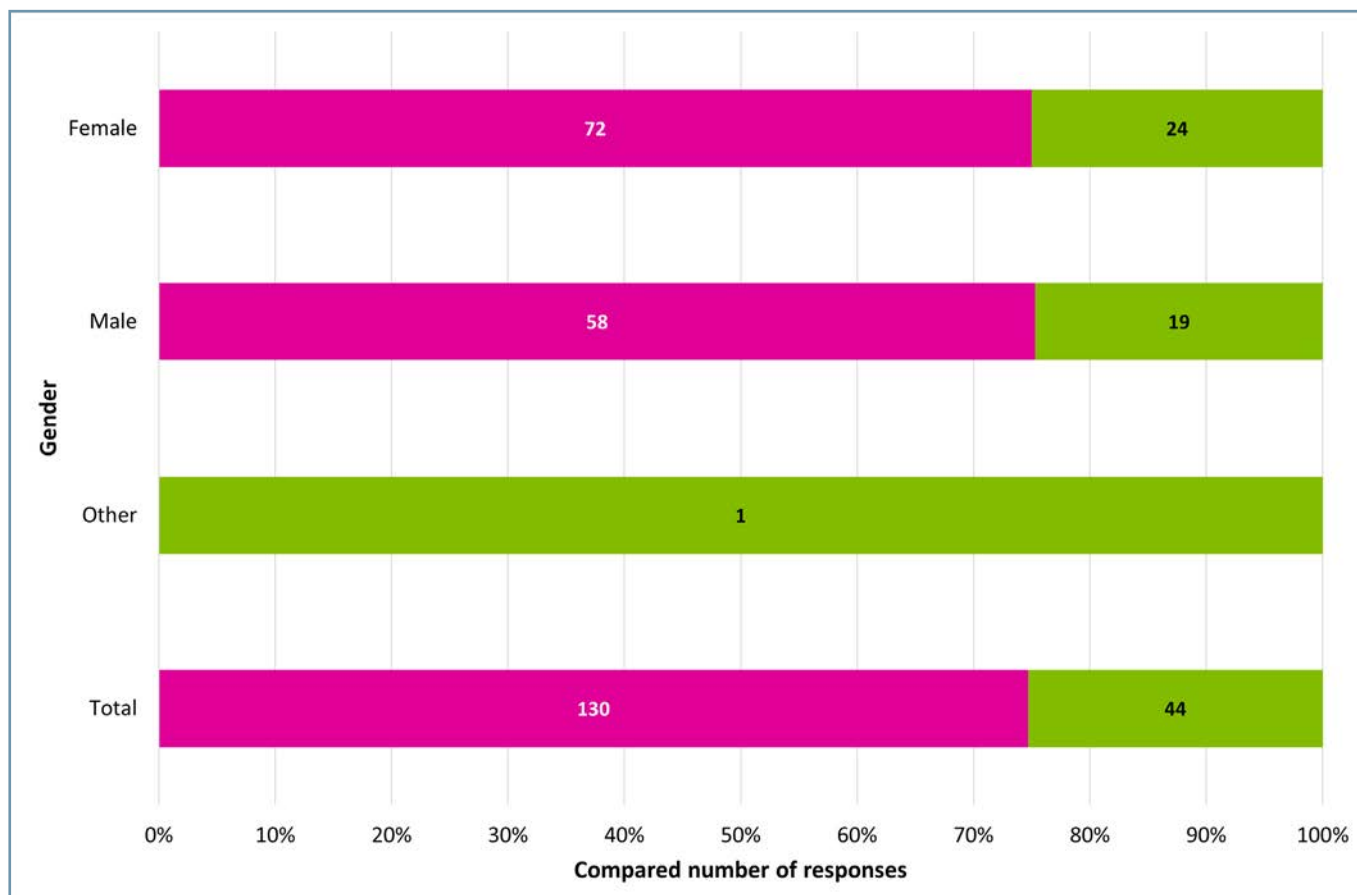


# Appendices

## Appendix 1. Survey responses by postcode



## Appendix 2. Demographics



## Appendix 3. Booking appointments - other methods

Phone the number I have been given.
Called having found phone number online.
Whilst visiting husband.
Can't remember - but think I phoned 111 & they (DNS) got back to me. If I need the District Nurse they come along to see me. via the clinic.
I phoned the District Nurse to replace a catheter, and have been referred to the District Nurse by my doctor.
NHS 111 and doctor referral.
By my carer who visits daily after I'd rang GP and no one came.
Via the carers.

## Appendix 4. Cancellations

Reasons given for appointment cancellation/rescheduling.

I'm sorry I am unsure of the exact date.
I had coronavirus.
To make it that the nurse only had to come to the village I live in once rather than twice.
Cancelled. Hospital arranged for dressings by District Nurse, but suggested as I wasn't housebound could visit the nurse. However the Vascular reinstated due to my immobility.
Not at home that day.
No specific reason given.
Once or twice - the District Nurse just said if I needed them they would come along. Just that it's healed up now.
I cancelled the appt and it was rescheduled for me.
Not sure, but not a problem for him.
Rescheduled. Due to not enough nurses. Happens often.
The District Nurse missed out visiting me one night - can't remember the date.
Because of Covid, too busy.
They rang to let her know and ask if they could come later in the day.
Because I wasn't feeling well.
District Nurse didn't think warranted a visit on that day.
Once was a staffing issue and another time they forgot my mother, not sure of the date.

## Appendix 5. Accessing the DNS out of hours

Question	Answer	Patient	Carer	Total
Have you tried to access the District Nurse service out of hours, (between 22:00 - 08:00 weekdays or anytime during weekends), for your relative/the person you care for?	Yes	36	21	57
	No	94	23	117
Was your call answered in a timely manner?	Yes	33	18	51
	No	3	3	6
Were you contacted by/referred to the District Nurse Service because of your call out of hours?	Yes	27	13	40
	No	8	8	16

## Appendix 6. Visit not wanted after 17:00 on a weekday

Inconvenient after 17:00. Always need to know rough time of visit during day.
Prefer not to.
Her husband passed away on 26 Feb, would still like to answer on his behalf.
No longer applicable, person using the service has since died.
Would be awkward but would be able to accommodate it if adequate notice of them coming.

## Appendix 7. Visit not wanted on a weekend

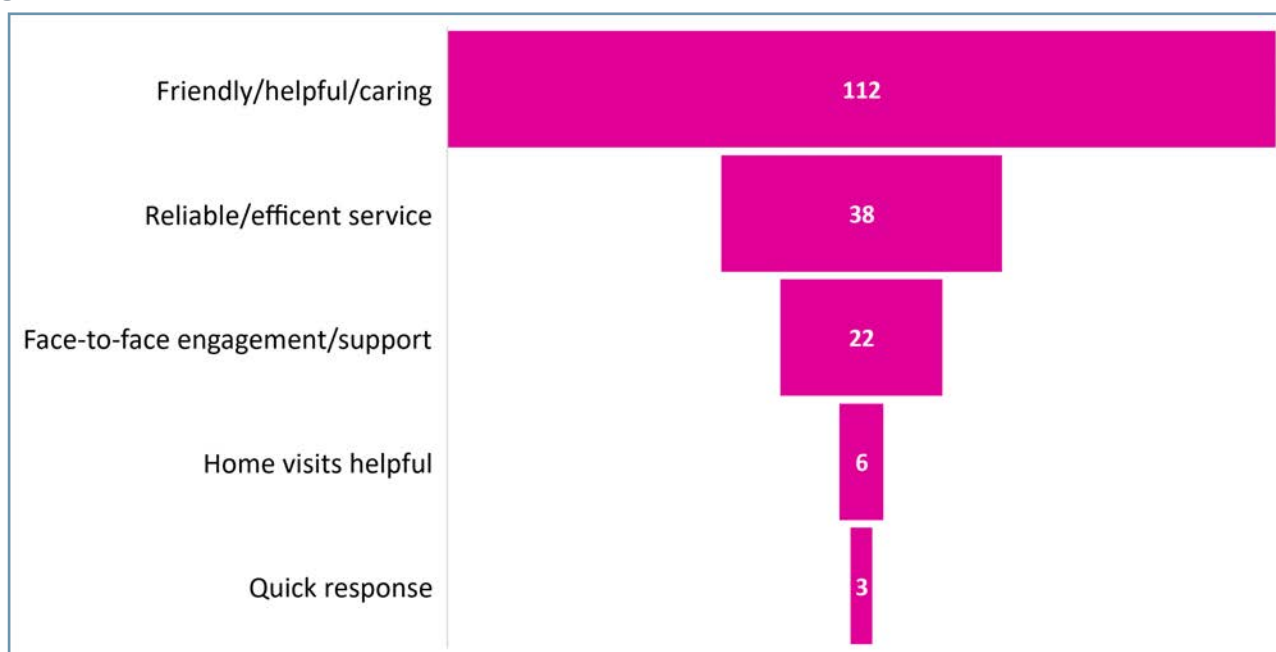
Due to blood samples having to be taken and sent away. However happy to have visits on a Sat and Sun to dress ulcer on my ankle.
Too busy.
Not convenient if my daughter is not here.
Happy with weekdays.
They don't work weekends.
No longer applicable, person using the service has since died.

## Appendix 8. Online consultation not wanted

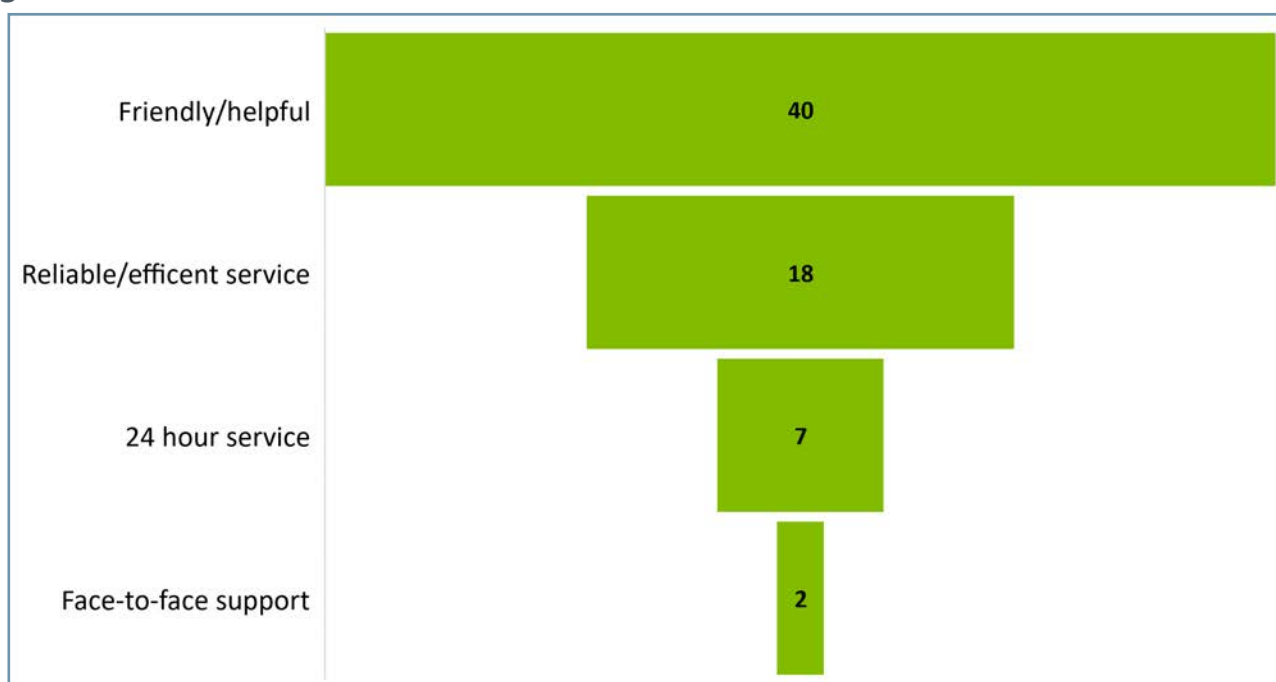
I need a daily insulin injection.	Hard of hearing.
No computer internet access.	Eyesight not good so would prefer telephone.
Unsure how that would work with my issue.	No longer applicable.
My condition needs treatment not just consultation.	

## Appendix 9. What people liked about the DNS

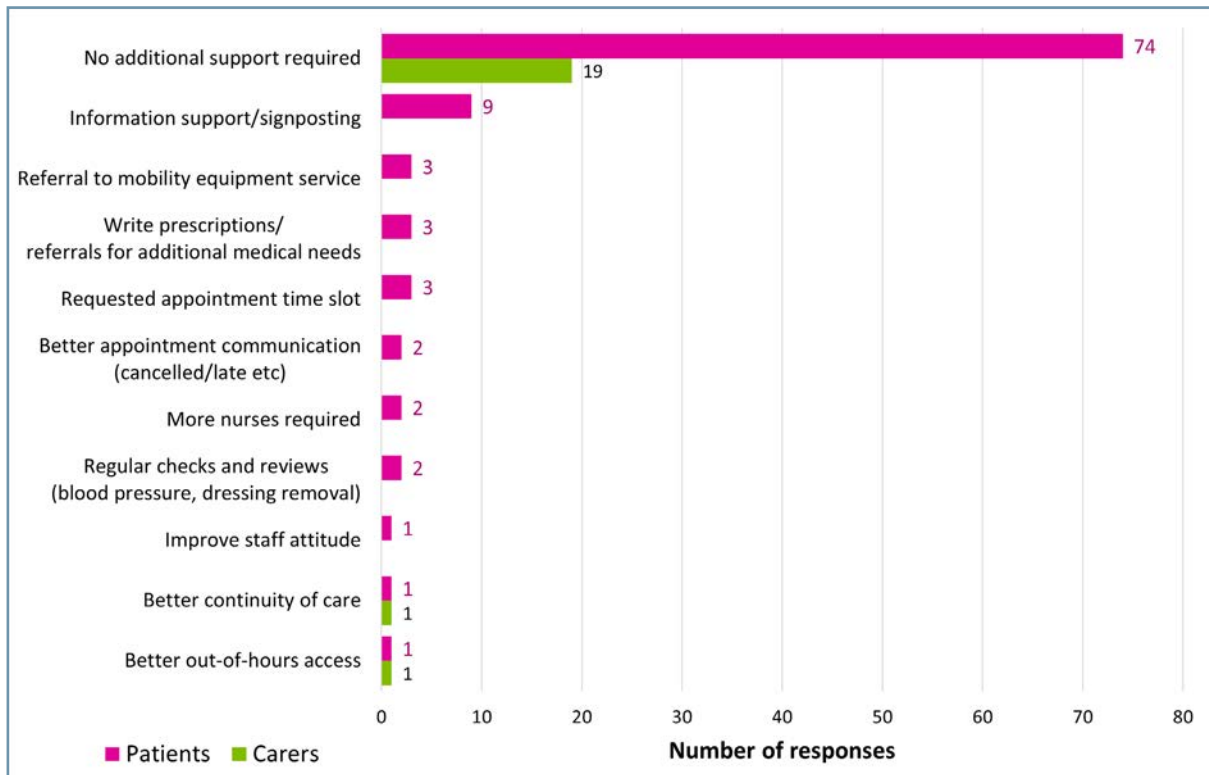
**Figure 1. Patients**



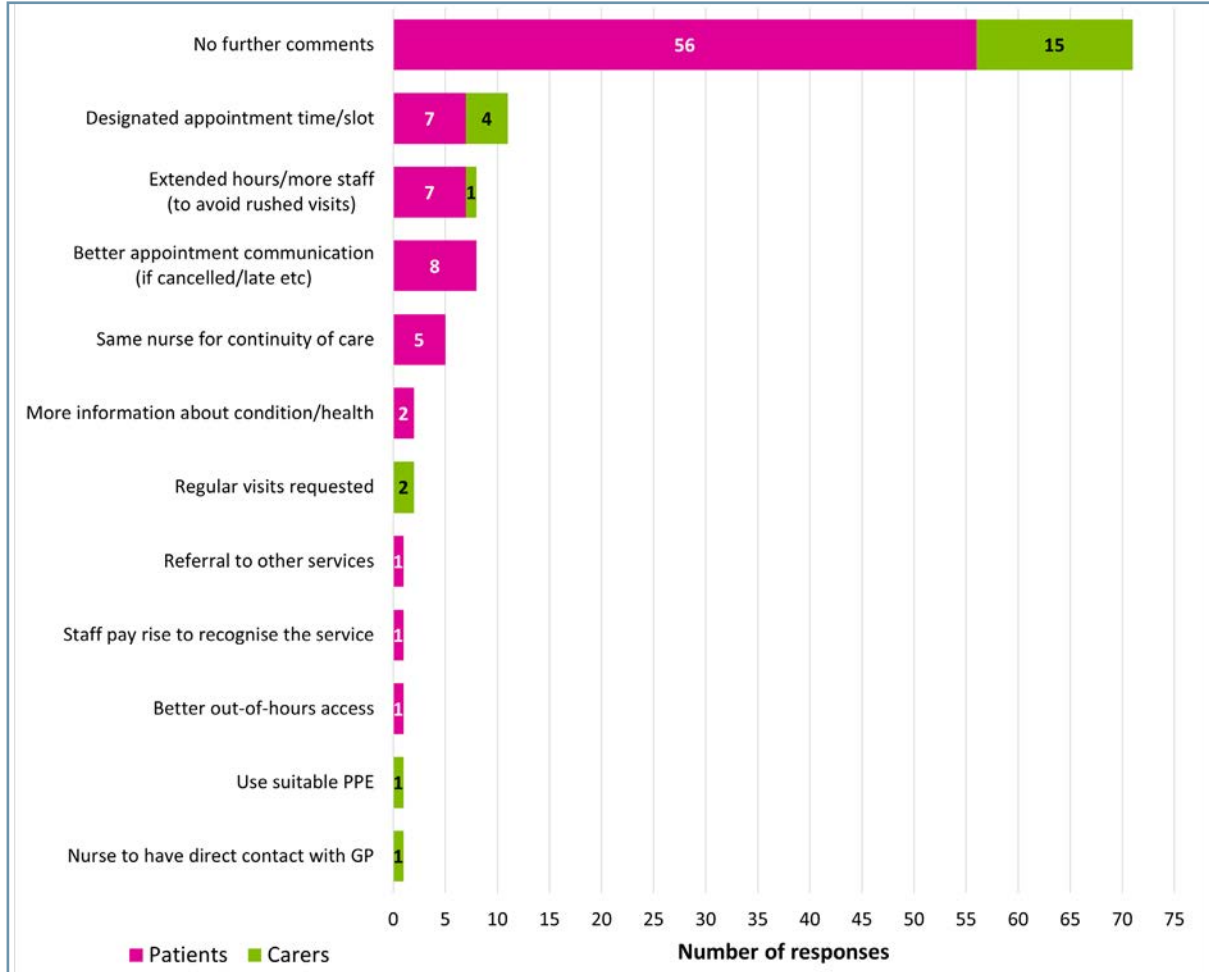
**Figure 2. Carers**



## Appendix 10. Supporting people at home - things to offer



## Appendix 11. Other suggested changes



## Why not get involved?



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