

Response to 'What does primary care look like for the next generation?' Inquiry by the Health and Sport Committee at the Scottish Parliament

Submission from the Scottish Youth Parliament
April 2019



Introduction

The Scottish Youth Parliament (SYP) represents Scotland's young people. Our vision for Scotland is of a nation that actively listens to and values the meaningful participation of its children and young people. Our goal is to make this vision a reality, in order to ensure Scotland is the best place in the world to grow up.

Our democratically elected members listen to and recognise the issues that are most important to young people, ensuring that their voices are heard by decision-makers. We exist to provide a national platform for young people to discuss the issues that are important to them, and campaign to effect the change they wish to see.

SYP's Values are:

Democracy - We are youth-led and accountable to young people aged 12 to 25. Our democratic structure, and the scale of our engagement across Scotland, gives us a mandate that sets us apart from other organisations.

Rights - We are a fundamentally rights-based organisation. We are passionate about making young people aware of their rights, and ensuring that local and national government deliver policies that allow those rights to be upheld.

Inclusion - We are committed to being truly inclusive and work tirelessly to ensure the voices of every young person from every community and background in Scotland are heard.

Political Impartiality - We are independent from all political parties. By working with all stakeholders, groups, and individuals who share our values, we can deliver the policies that are most important to young people.

Our approach

SYP welcomes the opportunity to respond to the 'What does primary care look like for the next generation' inquiry by the Health and Sport Committee (hereinafter referred to as 'the Committee') at the Scottish Parliament. This response is based on the findings of co-designed questions in the #WhatsYourTake survey prior to SYP's 68th National Sitting in Dalkeith, Midlothian, and the consultation workshop which took place on Sunday 17th March 2019.

[Please see page eight for a summary of SYP's recommendations to the Committee.](#)

The workshop was attended by thirteen [young people](#), called 'Health Care for the Next Generation' and co-produced by SYP including SYP's Health and Wellbeing Committee Convener Alice Ferguson MSYP, the Health and Sport Committee, the Scottish Parliament's Community Outreach Team and Committee Engagement Unit.

Through a series of interactive activities, MSYPs gave their views on the future of primary health care which are summarised below. By way of icebreaker, they each identified two types of professionals they think should work in a GP office if it had only two spare rooms. They moved on to a 'walking debate' on the pros and cons of technologies for the future of health care (video services and medical diagnosis apps) and then took part in a 'Dragon's Den' activity where in sub-groups they discussed ways in which technology could help provide primary health care in the future and pitched ideas to the plenary, voting with sticky notes on their favourite idea.

The #WhatsYourTake online survey was open from 15th February until 20th March, gathering [1136 responses](#) from young people aged 12-25 across Scotland, [from all 32 local authorities and our 11 national voluntary organisations](#) and various others representing a diverse range of communities of interest and lived experience (including different faiths, disabilities, care and carer experience, LGBTQI+, young farmers and young offenders).

It asked respondents (with both questions including a series of options as outlined below).

- **Which of the following technologies would you be happy to use to access health care in the future?**
 - Using Skype or FaceTime (or similar video service) for a General Practitioner (GP) appointment.
 - Having appointments sent by email / text / social media.
 - Using medical diagnosis Apps - with results sent directly to GP or hospital.
 - Receiving medical diagnostic test results by email / text / social media.
 - Having prescription notifications sent to your smartphone or tablet.
 - Using online forums to ask general health questions of your GP, dentist or other health professional.
 - Share information from health technology wearables, such as 'fitbits', with the NHS.
 - Other (please specify):



- **Which health professionals would you like to be able to see more of without having to go through your GP?** (The survey included brief descriptions of these roles).
 - Pharmacist.
 - Physiotherapist.
 - Practice Nurse.
 - Health Visitor.
 - Midwife.
 - Community Link Worker.
 - Occupational Therapist.
 - Speech and Language Therapist.
 - Mental Health Worker.
 - Paramedic.
 - Breastfeeding Support Worker.
 - Social Worker.
 - Other (Sexual Health Specialist Nurse, Alcohol and Drug Worker).

Background information of survey respondents

The majority of respondents are at school (87%) and aged 12-14 (49%) and 15-17 (42%). 55% of respondents are female, 45% were male, 2% identified as non-binary and 1% prefer to use their own term. 13% of respondents belong to black, Asian and minority ethnic groups.

Which health professionals would you like to be able to see more of without having to go through your GP? (see above for options in full).

Most survey respondents would like to be able to access a **Mental Health Worker** through their GP. Including thirty-three collective classroom responses, support for this option was at 59%. Pharmacist (40%) and Physiotherapist (42%) were the next popular options.

'I feel mental health support NEEDS to be made easier to access for everyone, especially young people. If someone wants to talk about their mental health they should be able to access a specialist in a quick and easy manner without having to go through multiple channels and waitlists beforehand.'

Other options specified / suggested in the online survey included 'Sexual Health Nurse / Specialist', 'Alcohol and Drugs Worker', 'Optician', 'Podiatrist', 'Chiropractor' and 'Gender Identity Clinics'.

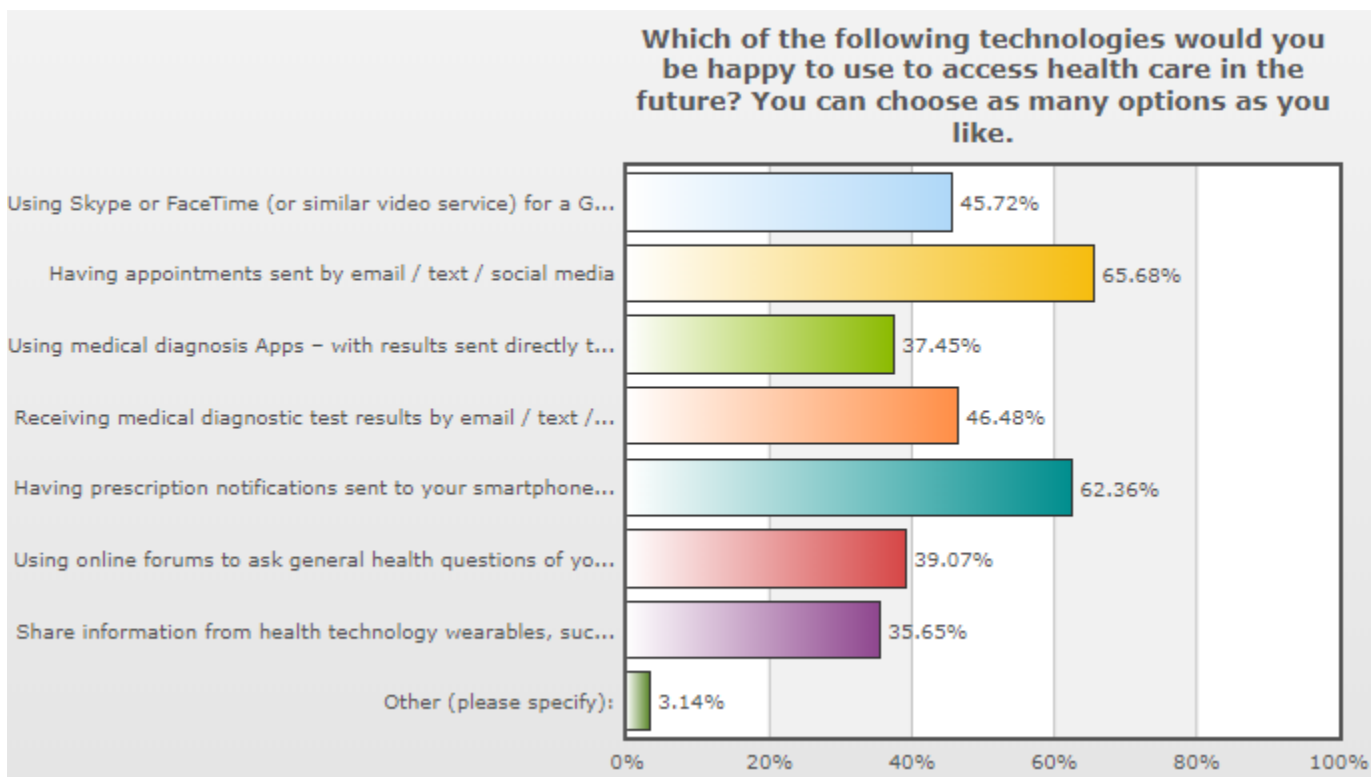
Some respondents detailed their answers expressing that 'GPs perhaps shouldn't be dealing with cases of mental health'; they 'should retain their role as gatekeeper to other services'; attending the Doctor's is a long process; and peer-support for mental health is preferable to seeing a GP.

The workshop participants in their icebreaker identified Mental Health Worker and Practice Nurse as their preferred medical professionals to be at their GP's office if it had only two spare rooms, even though support for the 'Practice Nurse' was low (17%) on the online survey.

Other options which received at least one vote were:

- **Paramedic** (this option was preferred by a young carer who has needed paramedics close by in the past).
- **Midwife** (for rural areas, without easy access to the maternity unit at a hospital, this could increase safety - 'they are specialists')
- **Occupational Therapist** - (increased accessibility could help get people who have had difficulties get back into work. One young person commented that services are too spread out).
- **Community Link Worker** - ('they have more of an all-round insight into your health' and could link up with social work which would be really beneficial to the community.)

Which of the following technologies would you be happy to use to access health care in the future?



Online survey responses from #WhatsYourTake survey

As can be seen above, **having appointments sent by email / text / social media and prescription notifications sent to your smartphone or tablet were the preferred responses** from the #WhatsYourTake survey. 'Having appointments and prescriptions sent through texts/notifications would be a huge help to young people with busy lives.'

In the 'other please specify' comments box (chosen by 3.14% of respondents), respondents suggested postal communication in cases where access to internet is lacking, online or App appointment booking facilities and official NHS forums.

Other comments included views that young people would prefer to have a face-to-face Doctor's appointment or personal / human interaction, concerns over access to WiFi in rural communities and by older people, and lack of access to 'fitbits', for example:

- *'Using technology takes away the human aspect of health.'*
- *'Though 'fitbits' and the like could be beneficial, not everyone has access to them, so care would have to be taken to ensure the system doesn't rely on them.'*

Views were provided that 'Apps have been shown to be inaccurate and cannot replace assessment by a qualified healthcare professional' and 'people may need support when they find out certain results.' Someone suggested an opt-out/opt-in function for receiving prescription notifications sent to their smartphone or tablet. Security concerns were also raised as regards hacking and prescriptions being modified which could seriously risk the recipient's health. Many young people related their answer to their lived experience or that of their families':

- *'E.g. I have type 1 diabetes it would be great if the data gathered from my smart device for example from my mobile phone or from my Apple Watch could instantly be shared on Diasend so my diabetes team at Ninewells Hospital know instantly know what is going on with my diabetes.'*
- *'I think that the influence of technology would greatly benefit many people, perhaps those who are elderly and who are not as mobile as others. I also think that these services would enable people (eg. receptionists, ect.) who work for the NHS more time to be spent on more important issues and would benefit the running of the NHS in general.'*

Those endorsing online forums liked the anonymity of being able to inquire about an embarrassing health issue online first, in order to get the advice and confidence to see their Doctor.

During the walking debate at the workshop, MSYPs supported **video services such as Skype or FaceTime (or similar video service) for a General Practitioner (GP) appointment** with six MSYPs voting 'for' this option, with three MSYPs 'neutral' and 'against' respectively. MSYPs felt video services favoured young people living in rural or remote areas as well as young people with disabilities or mental health problems, making it easier to attend a GP appointment.

Those who chose to be 'neutral' felt that this already happens in some areas, and were not sure if this option would be viable in terms of affordability. Those 'against' video services felt that they would miss the personal 1:1 interaction; that physical interaction would be difficult and could affect diagnoses resulting in more second opinions being sought; it could result in greater waiting times due to connectivity problems; there could be issues in areas with a lack of internet; and people with anxiety may not want to access video services.

MSYPs were also predominately against having medical diagnosis Apps with nine voting 'against', one 'neutral and two 'for'. They expressed concerns over misdiagnoses through miscommunication and that information given objectively through an app could 'make symptoms seem so much more serious than they actually are. There was discussion over how seriously a diagnosis provided in this way would be taken, with one young person saying, 'as long as you don't take it as gospel'. There were concerns over whether the NHS would be permitted to share data in this way, however, others pointed to 'Patient Access' for booking appointments used in some practices which has a unique log-in, and suggested that this could be part of any App.

Arguments for Apps highlighted the benefit particularly for young carers, as they are not always able to speak to a professional when they need to, especially when they are caring for themselves and sometimes multiple family members. Some MSYPs felt like an app would give reassurance to those not comfortable with speaking to health professionals or want to find out information they would not require a full appointment for. MSYPs thought it could cut down waiting times.

On healthcare Apps more generally, MSYPs recommended that Apps be developed through consultation with health professionals and patients; that these could be very useful for improving mental health outcomes; that security and privacy is ensured; that healthcare professionals and medicine keeps up with new technological developments; and that since healthcare Apps may not suitable for everyone, a flexible approach to their introduction should be adopted.

Dragon's Den

Two ideas in the dragon's den activity received the most votes. These were the following, in order of preference of the participants who voted for their preferred option after the presentations using sticky dots:

1) A mental health app (Received eight votes)

An App could be developed that you input quantitative data about how your mental health is. This would track if your wellness is increasing or decreasing using a daily log and daily mood scores. It would offer immediate support, for example, if you're having a panic attack, it would offer tools to help with that. It would contain music / playlists to help you when you are feeling distressed. Your GP / Mental Health Nurse would have access to it to check in on you without an appointment. This would ultimately be a prescribed safe space to take with you wherever you go. It will allow young people to physically see themselves improving, which is empowering.

2) A 'multifunctional health App' (Received four votes)

This App would contain a sleep, period, mood, blood pressure tracker, and a medication list and notifications to take medication as required. You would be taking control of your own health using data, which you would be happy to share with health professionals. By using the App, you knowingly agree to consent to your data being shared with health professionals. You would be empowered, accountable to yourself and in control - this could improve self-help so you visit the Doctor's less, but also provide them with more information about your health.

Summary recommendations from SYP

The Scottish Youth Parliament recommends that...

- Young people should be able to access a specialist health support more easily through their GP, especially a Mental Health Worker.
- In the future, healthcare appointments should be sent by email / text / social media and prescription notifications sent to your smartphone or tablet to benefit young people with busy lives.
- Optional video services such as Skype or FaceTime (or similar video service) for a GP appointment should be considered for the future to support young carers, young people living in rural or remote areas as well as young people with disabilities or mental health problems, making it easier to attend a GP appointment.
- Medical diagnosis App's should not form a mandatory part of primary health care in the future due to concerns over mis-diagnoses due to the lack of physical assessment, miscommunication, accessibility and a lack of human interaction.
- Opt-in healthcare App's should be developed to help make young carer's lives easier and a mental health App should be developed to empower young people with mental health difficulties.
- Healthcare App's should be developed through consultation with health professionals and patients; that these could be very useful for improving mental health outcomes; that security and privacy is ensured; that healthcare professionals and medicine keeps up with new technological developments; and that since healthcare Apps may not suitable for everyone, a flexible approach to their introduction should be adopted.

Should you wish to meet with us or update us on how the findings will feed into your work, please do not hesitate to get in touch with us using the details below. We hope you have found this engagement with SYP influential, informative and valuable.

Contact and visit us:

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