# Project Together Community Health Connect – Focus Group Outcome

The focus group discussions were held both in person and online last week, on the 22nd and 26th of February 2026. The in-person session took place at the office of the Greater Rushmoor Nepalese Community Charity, located near Aldershot town centre in Rushmoor and, whereas online focus group took place on Zoom. 16 individuals from the Nepalese community in Rushmoor participated, with 11 attending in person and 5 joining online. Participants with different age ranged attended, with the majority being 50 and older.

The focus group discussions were around the participants experience of accessing the healthcare system, GP and Frimley Park Hospital and address health inequalities faced by this underrepresented community in Rushmoor and explore their preference for better and improved healthcare services.

The discussions were centered on participants' experiences with the local healthcare system, including GP services and Frimley Park Hospital. The aim was to identify the challenges participants face and explore their preferences for better and improved access to healthcare services.

The total of 10 questions were asked during the focus group, providing us with valuable insights on this topic. The findings are listed below:

## 1. How would you describe your overall experience with the healthcare system in Rushmoor?

The younger and older generations had different experiences when it comes to accessing healthcare services. Participants from the younger and middle-aged groups who are digitally proficient generally felt that their overall healthcare experience was positive as they can easily use online services or the NHS app. In contrast, most participants from the older generation found their experience challenging, mainly due to language and digital barriers.

## 2. What are the main challenges you face when accessing healthcare services?

### Language Barriers

Language is a significant challenge for those who do not speak or write in English. They are mainly from older adults and middle-aged cohorts.

### Communication Issues

Even with interpreters, older individuals often struggle to communicate their problems. Some interpreters do not explain procedures properly, and patients, particularly wives receiving language support, often do not ask questions. This results in them not knowing what checks were done or what appointments they had. Many Gurkha veterans' wives rely on their husbands and family members to communicate their issues to health professionals or interpreters.

**Transportation Difficulties**

Transportation is another challenge, especially when traveling outside Rushmoor and Frimley Park hospital. Navigating to different hospitals outside these areas can be difficult, and taking a taxi is expensive. One participant mentioned encountering an older couple at a hospital in Guildford who had arrived by taxi but were unsure how to get back home. He offered them a ride, and they were very pleased and relieved.

**Transportation affordability**

Older people with bus passes cannot use their free bus service before 9:30 am for early morning hospital and GP appointments. Additionally, those living in Farnborough face limited bus services in the morning, making it difficult to reach their appointments on time. Some raised financial concerns about this as taxis are expensive for them.

**Time Off Work for Translation Support**

Participants working full-time mentioned that they have to take holiday leave or time off work to support their parents or relatives by accompanying them to appointments and providing translation assistance.

**Triage Questions**

Some participants found it challenging to answer triage questions on phone due to limited vocabulary.

**GDPR and Confidentiality**

Participants willing to support their relatives or help community members who have no family support felt restricted by GDPR and confidentiality regulations, making it difficult for them to provide the needed help.

**Digital Incompetency**

Digital barriers are also a challenge for those who are not proficient in using the NHS app to book appointments and order prescriptions online. They also cannot read or open text messages. Some participants mentioned that their GP doesn't provide written prescriptions, making it difficult to remember and order the prescription.

**Lack of Awareness About Interpreter Rights**

Most participants felt that the Nepali community, especially older adults, are unaware of their rights to get interpreter services at the NHS.

**Additional Pressure on Nepali speaking staff**

Some participants who worked in healthcare settings shared that Nepali-speaking staff face greater pressure compared to their non-Nepali-speaking colleagues. In addition to

their regular duties, they often provide language and other support to assist Nepalese clients. They felt that they were performing their job plus additional tasks to support Nepalese clients, and this extra effort was rarely acknowledged by their employer. There were no additional incentives provided to recognise the extra work they did.

**3. How easy or difficult is it for you to register with a GP in Rushmoor?**

**Deregistration from GP when on a month longer holiday**

Many elderly Nepali individuals and frequent travelers to Nepal face deregistration from their GP practices due to perceived disengagement. This is especially problematic for those living alone, as they may miss important correspondence. Upon returning to the UK, they often discover their deregistration when trying to book an appointment, facing language barriers and lengthy re-registration processes that delay essential healthcare access.

**Myths about NHS registration among International Nepalese Students and Skilled Workers**

Many International Nepalese students and Skills workers are unaware that they are entitled to free GP services, mistakenly believing they must pay despite having already covered the healthcare surcharge in their visa application. Frequent address changes due to work or study add to the confusion about where to register, leading to delays in accessing healthcare.

**Long waiting lists for NHS dental services**

For those who have recently moved to the area, there are long waiting lists for dental registration. One veteran shared that he has been on the waiting list since retiring in 2021 and has yet to receive an appointment, highlighting a critical gap in healthcare access for those who have served in the armed forces.

**4. What has been your experience with booking appointments with your GP?**

Individuals with language barriers and limited digital skills face challenges in booking GP appointments due to both language and digital obstacles. This also impacts their family members and relatives who assist them, as they must adjust their work schedules or take leave to accommodate uncertain appointment availability.

Additionally, the 7-day expiry on online registration links creates further barriers for those unfamiliar with digital systems, leading to delays and repeated booking attempts. In contrast, tech-savvy individuals find it easier to book appointments online.

**5. How accessible are hospital services for you and your family?**

Almost all participants agreed that navigating to the right department at Frimley Park Hospital is challenging. Those with language barriers struggle to read signage, and the lack of assistance causes stress and delays in reaching their appointments.

Many participants mentioned showing their appointment letter to any staff they encounter to find the correct department. However, some no longer receive appointment letters and takes note of the appointment details over the phone, which can lead to confusion, mistakes, missed appointments, and arriving at the wrong location.

**6. Have you faced any challenges in getting referrals to specialists or hospital treatments?**

Many participants reported difficulty understanding the referral process, unsure of the next steps for follow-ups or further treatment, leading to delays in care. One of the participants shared that his wife was seen at the hospital for an eye condition three months ago and is still waiting for further treatment, but is unsure whom to contact, as their GP surgery has stated they cannot assist. Language barriers make it harder to explain symptoms, increasing the risk of miscommunication and referral delays. The uncertainty and prolonged wait times cause anxiety and frustration, prompting some patients to seek treatment abroad, which complicates their long-term care in the UK.

**7. What has been your experience with emergency healthcare services?**

Most participants agreed that contacting an ambulance is difficult due to the lack of Nepali-speaking staff in emergency services, coupled with challenging triage questions. Those with limited English often struggle to communicate their symptoms effectively, which affects how their condition is assessed and prioritised, leading to delays and long waiting times.

One participant shared her experience of being asked by a paramedic team to help locate the home of an elderly patient while she was out dog walking. She knocked on doors and visited local shops, eventually finding someone who recognised the patient.

**8. What are your beliefs about the healthcare system in the UK compared to Nepal?**

Most participants appreciate the UK healthcare system for its structured approach to screening, thorough medical investigations, and effective communication through infographics and patient leaflets. While investigations may take longer, they are comprehensive, and patients have treatment options after results. However, some find Nepal's healthcare system more convenient for urgent care, as private hospitals offer instant appointments for consultations, tests, and treatments at an affordable cost, whereas long waiting times in the UK, especially for specialist referrals, can lead to frustration and delays in receiving treatment.

**9. What improvements would you see in GP and hospital services in Rushmoor?**

**Simplified Consent Process**

Implementing an easy process for obtaining consent and fulfilling data protection and confidentiality requirements

**Trained Interpreters**

Ensuring that interpreters are not only trained but also knowledgeable about Nepalese culture and the broader challenges faced by the community. This includes being patient with communication issues, assisting with language barriers, providing time for explanations, and checking if the patients understand everything and have any questions.

**Preferred Communication Methods**

Using letters for those with language barriers and text messages for those who are digitally competent.

**Interpreter Alerts on Patient Records**

Adding alerts to patient records indicating the need for an interpreter, so it is provided without the patient having to request it.

**Proactive Approach to mitigate challenges**

Recognising the challenges faced by community members and proactively providing solutions rather than reactive ones. This proactive approach should be integrated into local services through collaborative efforts between charities and healthcare providers, such as the Gurkha Welfare Trust, GP and hospitals.

**Acknowledgment of Nepali speaking staff efforts**

Recognising and appreciating the extra effort and time put in by Nepali-speaking staff dedicated to assisting Nepalese clients with translation. Hiring dedicated staff to support Nepalese clients with translations could enable Nepali-speaking employees to focus on their primary roles more effectively or providing incentives for the additional work they do for these clients.

**Appointment Booking at Reception**

Allowing appointment booking at the reception, similar to dental practices will make easy for those with digital barriers and unable to book on phone or an NHS app. This would provide equitable support, ensuring equal access for everyone.

**Reintroduce Buddy Scheme in Frimley Park Hospital**

Many participants mentioned that they get lost and struggling to find the right department for their appointments at Frimley Park Hospital. They suggested reintroducing the buddy scheme with trained volunteers to help patients navigate the hospital. This scheme was very helpful to most patients before it was discontinued from COVID-19.

**Localised Screening Locations such as, breast screening**

Providing local screening locations for older people would help mitigate their transportation challenges.

**10. Are there any specific healthcare services or programs you think should be introduced for the Nepalese community?**

**Dedicated Nepali speaking helpline**

Establish a dedicated phone line or standard number to press at entry point which connects directly to Nepali-speaking staff, ensuring clear and effective communication.

**Collaborative Referral System**

Develop a collaborative referral system with various organisations to ensure a holistic approach to healthcare. Provide written information detailing the referral process and available services.

**Comprehensive Guidance Booklet**

Create a comprehensive printable guidance booklet that outlines all available healthcare services and their functions. These booklets should be available at GP, hospitals, and local services.

**Community outreach progamme**

Implement community outreach initiatives from NHS healthcare services to engage the Nepalese community more effectively. These programmes would improve the dissemination of health-related information and help build trust within the community.

**Key Reflections**

Hosting the focus group discussions was a valuable experience, allowing us to hear directly from community members facing significant challenges due to their protected characteristics and various barriers. The most impactful insight was the suggestion to adopt a proactive approach to support this community, aiming to alleviate their challenges and prioritise equitable access to healthcare services to ensure health equality.

Moving forward, we are committed to implementing these proactive measures by fostering collaboration with NHS and charities to address the needs of the community effectively.