

Primary Care GP Access Survey Patient, Carer and Public Engagement

Nottingham North & East Clinical Commissioning Group

Feedback Report

September 2017





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Introduction

The following report details the feedback gathered from the Primary Care GP Access patient, carer and public engagement work that took place across Nottingham North East Clinical Commissioning Group (NNE CCG) between 18 June and 21 August 2017

The aim of this public engagement was to:

• Capture the views of as many of the Nottingham North and East Clinical Commissioning Group population as possible regarding access to general practice between 8am-8pm, at the weekend and access via technology

Information from the public engagement work will be used to inform the NNE CCG forward view delivery plan 2016/17-2018/2019 for transforming General Practice.

Return rate of survey

2,500 hard copies of the Primary Care GP Access Survey, designed for this engagement work were distributed across the NNE area. In addition, this survey was available online. The survey asked for opinion on:

- Travel to, and timing of, weekend appointments
- Travel to, and timing of, evening and early morning appointments
- Appointments via different types of technology
- Variation between different localities of these matters
- Equality and diversity data of respondents including additional support needs for vulnerable groups

506 people filled in the survey, which based on the number of hard copies distributed is over20% return rate. 10-15% is an average response rate for external surveys (ref. Surveygizo.com). Approximately 130 surveys were completed on line. Over 375 were completed in the local community and input manually.



How survey feedback is reported

The bulk of this report contains the results and feedback gathered from the GP access survey. For each of the first ten questions, the information is presented in graph and text format and a word cloud is included highlighting key comments.

Feedback recorded in the *any other comments* question in question 9 are included in this report and are recorded in table format. The comments are taken directly from each respondent's surveys and the comments have been grouped into themes for ease of understanding. The tables have been highlighted in pale blue to indicate clearly that these are the respondent's own words. Theme headings are in darker blue and have been added by the report writer.

Under each question the number of respondents who answered or skipped the question is noted.

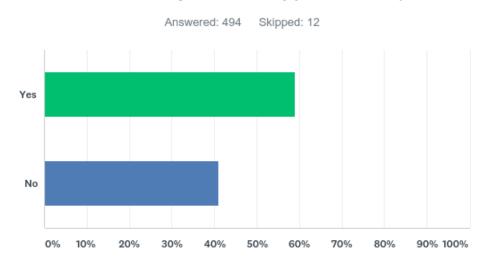
For each question, following this is a summary of the data.

For the equality and diversity questions, 11-19, the information is presented in graph and text format.

The final section pulls together the individual question summaries and, based on the feedback received, makes recommendations for how patient, carer and public engagement and communication can support the planning and roll out of GP extended hours.



Q1 Are you happy with how and when you access your GP practice? (i.e. where it is, opening hours, how you book appointments)



59% of respondents, 291 people, said yes, they were happy with accessing their GP 41% of respondents, 203 people, said no they were not happy with accessing their GP

For question 1 there was an 'other comments' option. 244 respondents chose to add other comments and they could make more than one point. The size of each word in the word cloud below indicates its frequency.



Q1 Are you happy with how and when you access your GP practice? (i.e. where it is, opening hours, how you book appointments)

Answered: 494 Skipped: 12

Appointments

Suitable Appointment Service

Long Wait to See GP Never get an Appointment Line

Routine Appointments Early Appointments

Surgery Own GP Phone Staff Doctor

Morning Weeks for an Appointment

Not

Available Book Weekend Hours Access Hard

Happy Required Opening Hours Takes 3 Weeks

Appointment Weeks in Advance Practice

Summary for question 1

By far the most common problem reported, was the length of time it takes to book and access routine appointments, with 155 comments recorded on this subject. This included having to wait many weeks for routine appointments and problems with having to phone the GP surgery at 8.30am to book a same day appointment. In addition, there were 10 comments about waiting too long for an appointment once at the surgery.

A further 63 comments were made about the need to extend opening times of GP surgeries. This was the focus of the survey so respondents had the opportunity to expand on this throughout the rest of the survey.



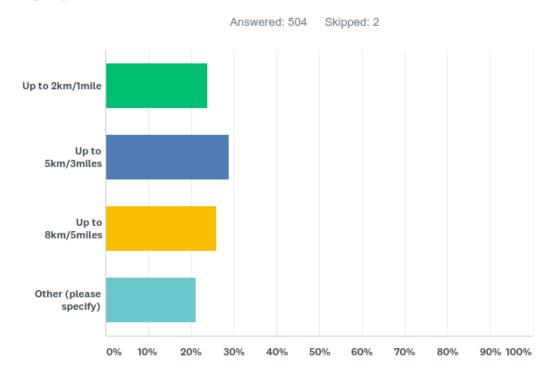
Approximately 20 comments were made on the difficulties of accessing the same GP and concerns around continuity of care.

On a positive note, approximately 20 comments were made highlighting how good the staff were with more than one reference made about successful triage systems run at certain GP surgeries.

Overall the feedback from question one tells us that although most respondents (59%) are happy with their GP surgery, there is room for improvement around booking appointments, waiting times and easy access to GP surgeries.



Q2 How far would you be willing to travel to see a GP or nurse at the weekend (this may be a different GP surgery, GP or nurse but will be in the North and East area-see map above)



24% of respondents, 120 people, said they would travel up to 2km/1mile 29%, of respondents, 43 people, said they would travel up to 5km/3miles 26% of respondents, 131 people, said they would travel up to 8km/5miles 26% 21%, 107 people, responded *other*



For question 2, there was an 'other comments' option. 107 respondents chose to add other comments and they could make more than one point. The size of each word in the word cloud below indicates its frequency.

Q2 How far would you be willing to travel to see a GP or nurse at the weekend (this may be a different GP surgery, GP or nurse but will be in the North and East area-see map above)

Answered: 502 Skipped: 2

Doctor Problem Drive Appointments Bus Route Rely
Emergency Walk in Centre Depends Practice
Miles Absolutely Necessary Travel Urgent
Transport Map Distance Stop Willing Difficulty
Far Think A&E

Summary for question 2

This feedback tells us that 53% of respondents would only be willing to travel up to 3 miles to see a GP or nurse at the weekend.

Of the 107 comments made, the most common (49) were made around public transport and availability of buses. 15 comments were made about the difficulty of travelling due to disability or limited mobility.

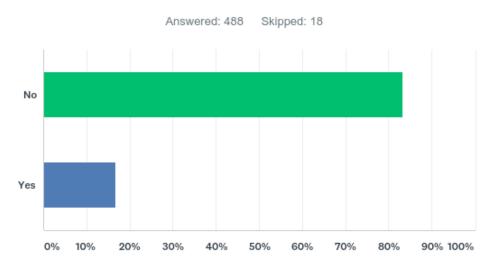


Approximately 16 comments referenced only travelling if it was for an urgent appointment, not for a routine one, and another 10 comments stated that it would depend on how ill people felt as to how far they would travel. A further 6 comments were made about concerns of continuity of care by having to see different GPs.

Several comments (6) were made that people should be willing to travel if care is required and that patients share the responsibility of accessing care.

The results for how far people will travel only gives a rough guide due to a very even split over the four answers. What the feedback clearly says is that available transport links and options will play a big part in the extended services being successful.

Q3 Would you need any support to travel to see a GP or a nurse at the weekend?



83% of respondents, 406 people, said no they wouldn't need support 17%, of respondents, 82 people, said yes, they would need support

For question 3, there was an 'other comments' option. 74 respondents chose to add other comments and they could make more than one point. The size of each word in the word cloud below indicates its frequency.



Q3 Would you need any support to travel to see a GP or a nurse at the weekend?

Answered: 486 Skipped: 18

Not at the
Moment Emergency Buses Not at Present

Travel Bus Service Drive Woudl Depends
Family Support Transport Arthiritis Husband Unless
Walking

Summary for question 3

The majority of respondents, 83% said that they did not require support to see a GP or nurse at the weekend. That said the remaining 17% made some serious points that need to be considered.

Of the 74 comments made regarding whether support would be required to get to the GP surgery at the weekend, 25 could be classed as *it depends*. Dependent upon how ill people were or how far they had to travel.

12 comments were made about needing support due to disability or mobility issues and a further 7 predicted they may need support in the future.

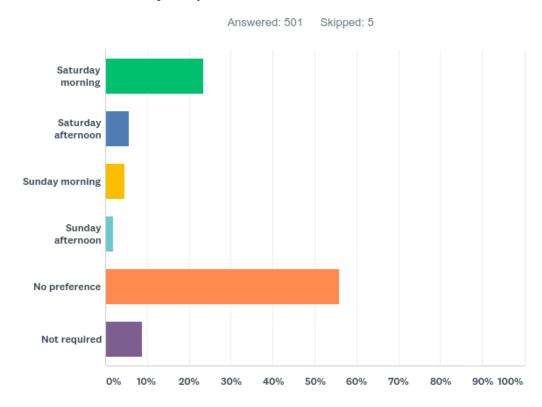
15 comments were made about not needing support due to having a car or family member to assist with travel.



This feedback shows us that future engagement may be required when proposals are in place to address these issues i.e. potential location of extended services. It also indicates that these respondents are potentially prepared to take some responsibility for accessing care in different places. As was indicated with question 2 comments, the feedback clearly says that the available transport links and options will play a big part in the extended hours services being successful.



Q4 What time would you prefer to see the GP or nurse at the weekend?



56% of respondents, 280 people, had no preference for weekend opening times



23% of respondents, 117 people preferred Saturday morning 9% of respondents, 44 people, did not require weekend opening. 6% of respondents, 28 people, preferred Saturday afternoon 5% of respondents, 23 people, preferred Sunday morning 2% of respondents, 9 people, preferred Sunday afternoon

49 respondents answered more than one option, so although not recorded on the chart, these were captured in the other comments and are as follows.

Saturday morning and Sunday morning 25 people
Saturday afternoon and Sunday morning 1 person
Saturday morning and Sunday afternoon 3 people
Saturday morning and afternoon 10 people
Sunday morning and afternoon 1 person
Saturday and Sunday afternoon 2 people
Saturday and Sunday morning and Saturday afternoon 2 people

The respondents who recorded another option will already have had one option counted in the initial percentages (from the chart).

Summary for question 4

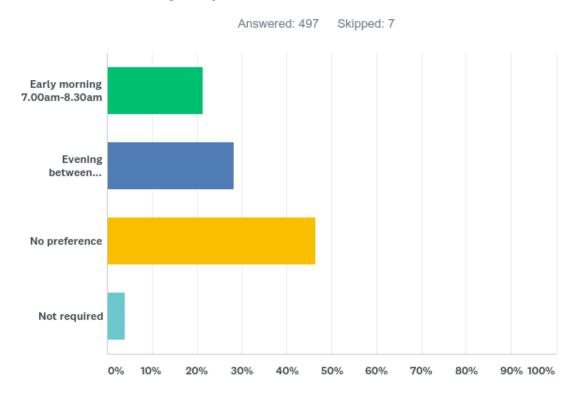
Most respondents (56%) have no preference for what time they access the GP surgery at the weekend. For those that did express a preference, the most popular time was Saturday morning, and the least popular time by far was Sunday afternoon (taking in to account the estimated numbers from the *other comments* section).

Only 9% of respondents said they had no need for weekend service, which leaves 91% of respondents saying there is a need.

This feedback indicates there is a certain amount of flexibility in planning services over the weekend from a patient and carer perspective, but that weekend opening is supported.



Q5 What time would you prefer to see the GP or nurse on a weekday?



21% of respondents, 106 people, said they would prefer early morning between 7.00-8.30am 21% 28% of respondents, 141 people, said they would prefer evening between 6.30-8.00pm 28% 47% of respondents, 232 people say they have no preference



4% Of respondents, 20 people, said these extra hours were not required.

16 out of the 17 additional comments stated that people would like early morning and evening appointments, which in the context of this question means no preference. In effect this adds another 3%, 16 people, to the no preference, taking it to 50%.

The other remaining comments wanted appointments between 9-10am. These already exist.

Summary for question 5

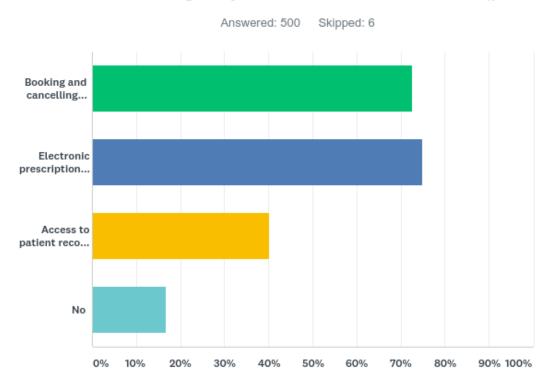
By far the largest percentage of respondents, 50%, had no preference as to whether they were seen between 7-8.30 am or 6.30-8pm with an even split between early morning 21% and evening 28%. With only 4% expressing these extra hours were not required this indicates that there is a desire for early and later appointments.

Only 4% of respondents said they had no need for extended weekday hours, which leaves 96% of respondents saying there is a need.

As with weekend hours, this feedback indicates there is a certain amount of flexibility in planning extended weekday hours from a patient and carer perspective, but that extended weekday hours are supported.



Q6 Have you heard of the following ways to access GP services (please tick all that apply)



Respondents could tick more than one answer, so percentages indicate the percentages out of the 500 respondents who answered. 73% of respondents, 363 people, said they had heard of booking and cancelling appointments online 75% of respondents, 375 people, had heard of electronic prescriptions 40% of respondents, 201 people, had heard of accessing patient records online



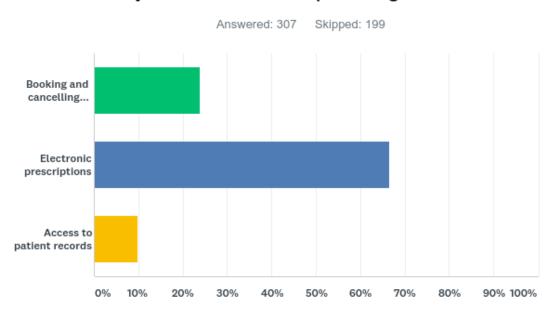
17% of respondents, 84 people, had not heard of any of the above.

Summary for question 6

Almost 75% of respondents have heard of both online appointments and electronic prescriptions while online patient records are much less well known with only 40% of respondents being aware and 17% of respondents not having heard of any of these services. It would be useful to look at the demographics of who these 17% are for any future engagement or communications work, and to see where information about these services is missing.



Q7 If you ticked any of the first three boxes in Q6, please say which services, if any, you use. If you said no to Q6 please go to Q8



Of the 73% of respondents, 362 people, that had heard of booking and cancelling appointments online 24%, 73 people, use them Of the 75% of respondents, 374 people, that had heard of electronic prescriptions 67%, 204 people use them Of the 40% of respondents, 201 people that had heard of online access to patient records 9%, 29 people, use them

The additional comments for this question tell us that:

18 respondents used all three of these services



- 13 respondents used the online appointment system AND electronic prescriptions
- 3 respondents used the online appointment system AND accessed patient records online
- 3 respondents used electronic prescriptions AND accessed patient records online

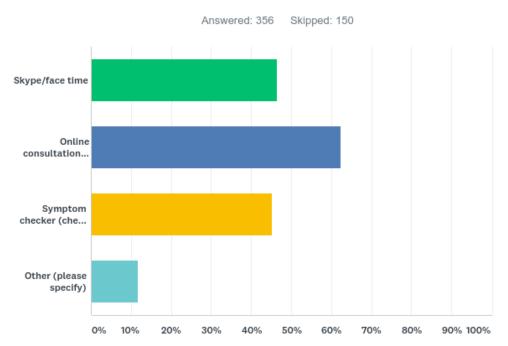
2 additional comments stated the respondent would use electronic prescriptions if their GP surgery offered that service.

Summary for question 7

It is evident from this feedback that respondents are much more familiar with the online booking system and electronic prescriptions than they are with accessing patient records online. This information also shows us that awareness does not necessarily translate into people using these services.



Q8 Which of the following would you be happy to use for an appointment with your GP or practice nurse? (please tick all that apply)



46% of respondents, 164 people, would be happy to use Skype/Facetime 62% of respondents, 221 people, would be happy to have an online consultation 45% of respondents, 161 people, would be happy to use symptom checker 12% of respondents, 42 people, ticket the *other* box The size of each word in the word cloud below indicates its frequency.



Q8 Which of the following would you be happy to use for an appointment with your GP or practice nurse? (please tick all that apply)

Answered: 355 Skipped: 149

Prefer Phone Consultation Telephone Phone Call Face to Face Happy Email

Summary for question 8

For each of the three methods, Skype/Facetime, online consultations and symptom checker, between 45%-62% of people would be prepared to use each of the methods. This suggests that there is an appetite for these online methods and 6 comments in the *other* section back this up.

The feedback also tells us that a very similar percentage of respondents are not keen to access services via these technologies and these needs and concerns would need to be addressed to support any roll out of these technologies for GP access.

The *other* comments also show that are some issues that would need further engagement and communication for these methods to be embraced fully and successfully. Of the 67 other comments 42 people had no interest, no access to computers or wanted face to face contact and 21 people expressed concerns about the problems and perceived dangers of online services.



Question 9 was simply 'Any other comments?' 225 respondents chose to add other comments as detailed below. Respondents could make more than one point. The word cloud illustrates the frequency of words used.

Q9 Any other comments

Answered: 225 Skipped: 281

Questions Worse Internet Register Staff Irrelevant
Electronic Prescriptions Answered
Face to Face Paramount Doctor CCG
Appointments Training Morning
Dangerous Service Q6-8
Not have a Computer Following Care
Receptionist Living with Partner Retired Option
GP Surgeries



A selection of the comments are below:

Require more accessibility

I pay over £170 per month NI contributions - equivalent to private health care. NHS should be more accessible and shorter waiting lists

GP surgeries should have extended hours/weekends to allow greater access

We now live in a modern community where retailers work and open every day Why does it have to be different for the doctor's surgery? So, I'm all for longer extended GP services

I think it's really good and important to extend opening hours as well as capacity to ensure demand and differing needs of patients are accounted for. But I also understand that resources are strained and finite in the NHS and so I understand you can't do everything and please everyone all the time - I hope others understand this as it is tough times. I also would like to see our important NHS staff being looked after and protected during their quest to try to cater adequately for patients - staff are people too and I worry that all too many staff will suffer stress and burden, which is bad for them as individuals but will serve to strain the service provision even further due to huge amounts of staff illness. I hope things settle down in time. Take care all :-)

Most of the private sector has seen a shift to accessibility of opening times and all-weekend opening to fit with the changing working patterns of modern life.... why can't GP practices not follow suit?

It would be an advantage to have a local surgery open all day, every day, but given the current shortage of GPs and lack of available appointments I'd be afraid of making the service worse

Accessibility for early appointments

I have always been treated well. But I am a carer and have problems with early appointments

My surgery has early morning appointments which is great when you work but I was very unwell at one point and found that these early appointments difficult to attend e.g. up most of the night in pain then alarm goes off at 6.00 in time for a 7.30 appointment

At our surgery, we have an excellent triage system which involve a telephone conversation with a doctor and an appointment that day should it be needed. I also used early (7am) appointments a lot when I was still working - a service our practice has offered for many years and a real bonus for those who need it.

Accessibility at weekends

Mostly require appointments @ weekend for the children. As an emergency

I do believe doctors should be available at weekends because we never know when we are going to need one Jesus healed the sick on the Sabbath

Accessibility around work and school

Please make sure that GP services are available for everyone considering that people are working and kids have to miss school for appointments

Particularly for people who work Monday-Friday, it would be much easier if there were appointments available in the evenings and at weekends; not everyone has flexibility in shifts and it shouldn't be necessary to book time off work for appointments

A worker's appointment system that gives working people priority at certain times.

Early am or evenings good for people who work but weekend totally unnecessary. Will cost too much for benefit

Accessibility for patients and reduction in use of inappropriate services

Combining resources to offer 7 day a week primary care services is essential to give patients a satisfactory appropriate local service and reduce the need for patients to inappropriately go to walk in centres or as a last resort go to A & E. Individual GP practices are overwhelmed by the high and rising need for primary care needs and the only way forward is by combining the resources from locality practices for extended hours services

Most of the private sector has seen a shift to accessibility of opening times and all-weekend opening to fit with the changing working patterns of modern life.... why can't GP practices not follow suit?

The second table captures comments that express concerns about extended services.

Weekends not required

Early am or evenings good for people who work but weekend totally unnecessary. Will cost too much for benefit

Do not find any need for GP to be open weekends

Extended hours not required

Not sure 7day services are needed-especially if serviced by the same work force (already very busy)

Don't think weekend appointments and late evenings are relevant or needed as if an emergency doctors would visit or you dial 999

I don't think you need 7-day GPs if there is adequate out of hours services at weekends.

I think NEMS offer an excellent OOH service

Revert to old system of GP on call evening and weekend.

When I first registered with this practice, 25 years ago, I was a full-time working mother and they opened on Saturday am. That was wonderful. Now that I am retired weekdays are OK

Concern for existing services/staff

It would be an advantage to have a local surgery open all day, every day, but given the current shortage of GPs and lack of available appointments I'd be afraid of making the service worse

I've answered these questions on the assumption that 7 -day service would be achieved at no detriment overall for example I would not wish to see this happen if it involved a downgrade of the present weekday service

Stretching limited resources over 7 rather than 5 days is stupid. Continuity of care should be paramount

I think Sundays should be for genuine emergencies. I am concerned to see [unclear] to Drs and nurses maximised BUT also concerned that they have adequate time off and have support of a large enough team to deliver the extended service

Doctors already work hard enough and long hours

I think the staff work adequate hours. There is life outside work

Our GPs and nurses work long enough hours in the week -earlies and lates to accommodate most people

There aren't enough GPs/nurses/resources to provide current hours/meet current demand. Please don't stretch the service any more thinly. This idea is ludicrous

Who will give service GPs are working more than full time during week. They need time for their families, use NEMS or GP services at QMC

I don't think surgeries should be open 7 days. 6 days maybe. Doctors need a break too. How can they function and be able to treat patients properly if they don't get a break? We do need to cut waiting times but we need to be sensible too

Rather than shuffling GPs into new shifts, and then losing staff during the week, please ensure staff are employed to cover appropriately.

I don't see the point in making GP's more tired, or creating appointments at weekends as this will lead to fewer appointments in the weekdays as there is a finite resource. Even when I worked full time I still managed to see a GP when necessary

Our GPs and nurses work long enough hours in the week -earlies and lates to accommodate most people

Summary for question 9

Approximately 46 comments were made about accessibility;

9 comments were made about access for early and late appointments, weekend opening and access to appointments around work and school time.

8 comments stated there was no need for weekend or extended hours.

17 comments expressed concern for the existing staff and services and how extended services could negatively impact them

5 respondents were either unhappy with staff or have suggestion for how staff training could be improved.

13 comments expressed dissatisfaction with waiting and appointment times

11 other comments were made

Overall these comments echo the responses given throughout the survey. There was an even split in the comments in this category in support of extended services and concerns for extended services. There were a lot of comments about concerns for the staff and overstretching an already existing service



This feedback tells us that it is important not to treat extended hours and the problem with appointments as two separate issues. It clearly is one and the same too many respondents and unless this is addressed it appears that it will impact negatively on the role out of extended service.

It is also clear that it will be important to clearly communicate key messages to patient and carers around what impact extended hours may have on the existing services and staff. It would be of use to consider engagement with staff around extended hours and share this with patients and carers where appropriate

Question 10 asked: What is your postcode? We need this so we can make sure the right GP services are available in each area

The table below group's postcodes collected in the survey into numerical groups (rather than listing individual postcodes) then lists the area that this covers and the number of postcodes recorded for that area.

Several of the postcodes are out of area for the area this survey covers. The postcodes that are in area are marked in red. The number of respondents for each postcode is recorded in the right-hand column of the table.

POSTCODE	AREA	NUMBER
NG2	OUT OF AREA Nottingham City Centre, Sneinton, The Meadows, West Bridgford	1
NG3	NG3 area covering the areas of Carlton, St Ann's, Mapperley, Gedling.	19
NG4	NG4 area covering the areas of Carlton, Gedling Village, Netherfield	59
NG5	NG5 area covering the areas of Sherwood, Arnold, Bestwood, Carrington, Top Valley, Rise Park, Nottingham	124
NG6	OUT OF AREA NG6 area covering the areas of Bestwood Village, Bulwell, Old Basford, Nottingham.	6
NG8	OUT OF AREA NG8 area covering the areas of Aspley, Wollaton, Whitemoor, Bilborough, Nottingham	3
NG9	OUT OF AREA NG9 area covering the areas of Beeston, Stapleford, Lenton Abbey, Chilwell, Trowell, Broxtowe	2
NG11	OUT OF AREA NG11 area covering the areas of Clifton, Ruddington, Gotham, Nottingham	2
NG12	OUT OF AREA NG12 area covering the areas of Cotgrave, Radcliffe on Trent, Keyworth, Rushcliffe	1
NG14	NG14 area covering the areas of Calverton, Lowdham, Gedling	85
NG15	NG15 area covering the areas of Hucknall, Ravenshead, Newstead, Ashfield.	127
NG16	NG16 area covering the areas of Kimberley, Eastwood, Nuthall, Langley Mill, Pinxton, Selston, Awsworth, Ironville, Jacksdale, Underwood, Brinsley, Watnall, Broxtowe.	42
NG17	OUT OF AREA NG17 area covering the areas of Sutton-in-Ashfield, Kirkby-in-Ashfield, Stanton Hill, Skegby	4
NG21	OUT OF AREA NG21 area covering the areas of Rainworth, Edwinstowe, Clipstone, Newark and Sherwood	1
NG25	OUT OF AREA NG25 area covering the areas of Southwell, Newark and Sherwood	7

None	No postcode given	13
Other/unknown		10

Summary for question10

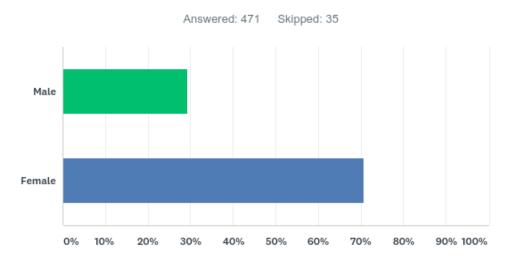
90% of postcodes fall within the NNE area 5% of postcodes were out of area 3% of respondents gave no postcode 2% of postcodes were unknown or other

Of the 90% of postcodes within area 4% were NG3 -Carlton, Mapperley, Gedling 11% were NG4- Carlton, Gedling, Netherfield 25% were NG5- Arnold 17% were NG14- Calverton, Lowdham, Gedling 25% were NG15- Hucknall 8% were NG16 -Eastwood

Summary for question 10

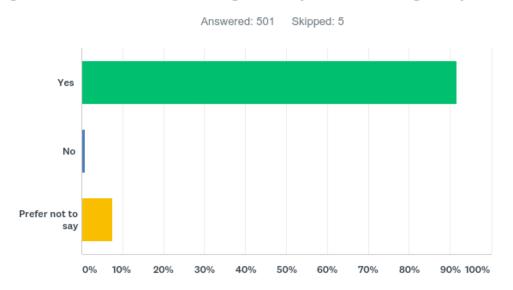
Given the limitations of this survey, the results will only give us an idea of what is happening by area as it is far from an exact science. There may be some respondents that fall under one postcode but access services in a different area. Postcodes within one group i.e. NG15 will not all fall within the NNE area. For the percentages listed immediately above therefore the areas that come under NNE have been highlighted in red.

Q11 Gender



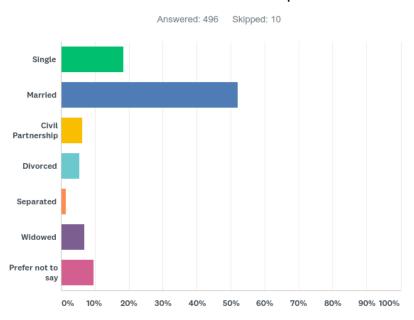
30% of respondents, 138 people, identified as male 70% of respondents, 333 people identified as female

Q12 Is your gender the same as the gender you were originally assigned at birth?



92% of respondents, 459 people said they had the same gender as when they were born 1% of respondents, 4 people, said their gender was not the same as they were assigned at birth 7% of respondents preferred not to say

Q13 Marital/Civil Partnership Status



18% pf respondents, 91 people, are single

52% of respondents, 258 peoples, are married

6% of respondents, 31 people, are in a civil partnership or living together. An additional 7 people stated they were living together in other comments

6% of respondents, 27 people, are divorced

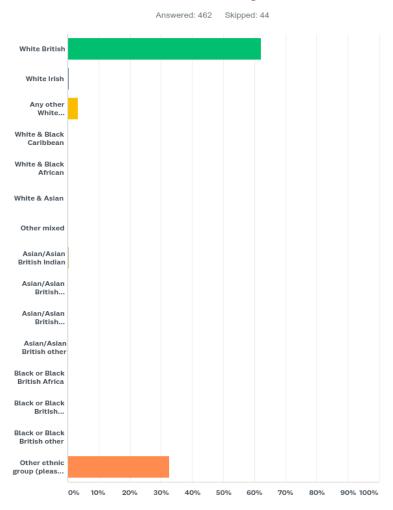
1% of respondents, 7 people, are separated

7% of respondents, 34 people, are widowed

10% of respondents, 48 people, preferred not to say



Q14 Ethnic Origin



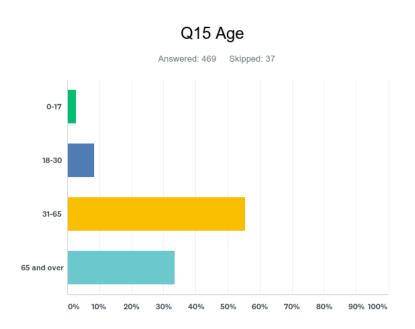


62% of respondents, 287 people, identified as White British 0.5% of respondents, 2 people, identified as White Irish 3% of respondents, 15 people, identified as white other 0.5%, of respondents, 2 people identified as Asian/Asian British Indian

1 person each identified as White and Black Caribbean, White and Black African, White and Asian, Other mixed, and Black or British Black Caribbean.

32% of respondents, 151 people identified as other. This include many who identified as British or English

Question 15

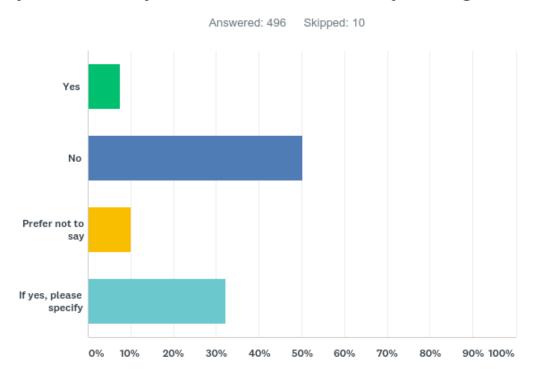




3% of respondents, 13 people, were 0-17 8% of respondents, 39 people were 18-30 55% of respondents, 260 people, were 31-65 34% of respondents, 157 people were 65 and over

Question 16

Q16 Do you consider yourself to have a disability or long term condition?





7% of respondents, 37 people consider themselves to have a disability 50% of respondents, 249 people, do not consider themselves to have a disability 10% of respondents, 50 prefer not to say

160 respondents added comments regarding their disability. The size of each word in the word cloud below indicates its frequency.

Q16 Do you consider yourself to have a disability or long term condition?

Answered: 496 Skipped: 10

Active Thyroid Glaucoma Cancer Leg Ulcer

Mental Health Osteoporosis COPD Osteoarthiritis

Chronic Cholesterol Pain Learning Disability

Diabetes Atrial Fibrillation Asthma

Long Term Arthiritis Epilepsy Depression

Hypertension Problems Poor Eyesight

Blood Pressure ADHD Spinal Mobility Anxiety

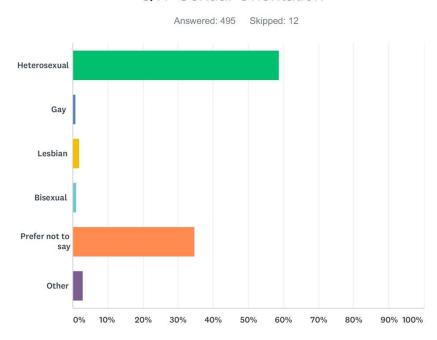
Heart

Condition

NHS Nottingham North and East Clinical Commissioning Group

Question 17

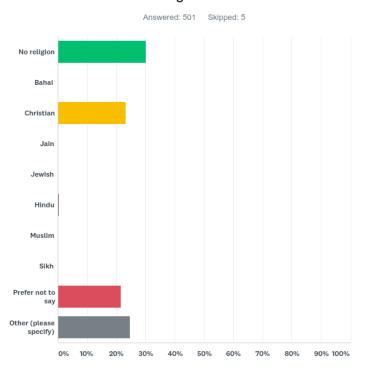
Q17 Sexual Orientation



59% of respondents, 290 people identified as heterosexual 1% of respondents, 4 people, identified as gay 2% of respondents, 9 people, identified as lesbian 1% of respondents, 5 people, identified as bisexual 34% of respondents, 172 people preferred not to say



Q18 Religion or Belief



30% of respondents, 151 people, said they had no religion or belief 23% of respondents, 116 people, identified as Christian 25% of respondents, 124 people, said other 21.5% of respondents, 108 people, preferred not to say

0.5% of respondents, 2 people, identify as Hindu

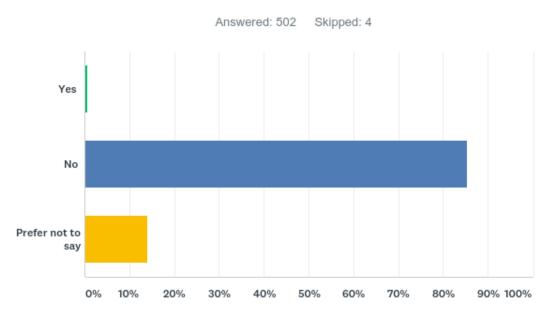
124 respondents commented what religion or belief they held. The size of each word in the word cloud below indicates its frequency.

Q18 Religion or Belief

Answered: 501 Skipped: 5

Atheist Baptist Roman Catholic Humanist Methodist Pagan Agnostic

Q19 Are you currently pregnant?



0.5% of respondents, 3 people were pregnant 86% of respondents, 429 people, were not pregnant 14% of respondents, 70 people, preferred not to say

Overall summary and recommendations

This final section pulls together the individual question summaries and, based on the feedback received, makes recommendations for how patient, carer and public engagement and communication can support the planning and roll out of GP extended hours.

- 91% of respondents say there is a need for weekend GP services and 96% say there is a need for extended weekday hours. This indicates there is currently good support for extended services. It is highly recommended that patients, carers and the public are kept engaged and informed throughout this process.
- This feedback indicates there is a certain amount of flexibility in planning services over the weekend and extended weekday hours. It is recommended that patients, carers and the public are kept engaged and informed as the proposal for extended hours are developed.
- It is recommended that extended hours and the problem with booking appointments are treated as two parts of one issue, rather than two separate issues.
- Key messages to patients, carers and the public regarding what impact extended hours may have on the existing services and staff need to be clearly communicated. It may be useful to share positive comments and concerns from any staff engagement about extended hours with patients, carers and the public.
- Key messages to patients, carers and the public regarding which services people will be expected to travel for at the weekend, need to be clearly communicated throughout the roll out of extended services.
- Public transport links and options will play a big part in the extended services being successful. It is recommended that patients, carers and the public are kept involved and informed regarding potential locations for GP weekend opening.
- Most respondents said that they did not require support to see a GP or nurse at the weekend. However, comments were made about needing support due to disability or mobility issues and several respondents predicted they may need support in the future. We need to bear in mind the ageing population and take note that this need may increase and consider it in any plans.



- The feedback shows further engagement will be required once plans are in place i.e. potential location(s) for extended services. At this stage respondents have been asked to comment on an idea and should be asked to comment further when they can be better informed about detailed proposals.
- The feedback tells us that respondents are much more familiar with the online booking system and electronic prescriptions than they are with accessing patient records online. It is recommended that further communication is undertaken with patients, carers, the public and with GP surgeries if the uptake of accessing patient records online is to be increased.
- The feedback tells us that many people are fearful of being *left behind* as access to services seemingly becomes more virtual. It is recommended that communication messages are clear that this is not the case and existing methods will still exist, or alternatively if existing methods are to change then it is recommended to engage with people as to how best they can be supported.
- The feedback regarding Skype/Facetime, online consultations and symptom checker shows us there's a split between those that are keen to embrace these technologies to access services and those that are not. There are many comments highlighting concerns and safety issue around this. It is recommended that patients, carers and the public are kept engaged and informed if this area of access develops, particularly with regards to safety concerns.
- Throughout the planning of extended services, it is recommended that patients, carers and the public are involved and engaged, and where that it is not possible that they are kept informed.

Report researched and written by Emma Whatson, NNE CCG Public Engagement Manager, October 2017