



Making Time for Everyone

Easier-to-access routine family health services for the future

Report

NHS North Lincolnshire Clinical Commissioning Group

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1. Introduction

GP services in North Lincolnshire are becoming busier and evidence suggests that patients are often facing difficulties in accessing routine appointments with GPs. There are many pressures faced by GP services across the country, such as difficulties in the recruitment and retention of GPs and practice nurses, an ageing population, and the ever increasing number of people managing long-term conditions requiring access to GP services.

In April 2016, NHS England published the 'General Practice Forward View', which commits to an extra £2.4 billion a year being spent to support general practice services by 2020/21. These additional funds will improve patient care and access and invest in new ways of providing primary care.

From April 2018, North Lincolnshire CCG will receive more funds to provide additional GP services outside of normal practice opening times, in line with NHS England's commitment to provide GP services over seven days a week.

Given the pressures faced by GP services, it is impractical and unaffordable to provide GP services continuously seven days a week. However, North Lincolnshire CCG want to look at ways of making it easier and more flexible for people of all ages in the area to access GP services for routine (non-urgent) advice or treatment. The CCG, therefore, wished to consult with patients to understand demand for services and their views and experiences to feed into the design of a new service specification to extend access to GP services from April 2018 and to inform the public about proposed changes. This included gaining an understanding of whether patients want to access services during the evening or at the weekend and would attend a different practice to do so, see another healthcare professional instead of a GP when appropriate, and use technology such as Skype, 'apps' and online symptom checkers for advice and appointments.

The CCG commissioned Enventure Research, an independent research agency, to undertake a survey with patients across North Lincolnshire to understand their experiences of making GP appointments and their views, perceptions and attitudes in regards to designing the new service specification.

The survey was hosted online and patients could also complete a paper copy if they wished. The survey was promoted by GP practices using posters, newsletters, and websites and was linked on the CCG website and social media pages.

In addition, the CCG held events, discussions and drop-in sessions with members of the public in the North Lincolnshire area to understand their views and perceptions in depth.

The data from the online and paper surveys was collated by Enventure Research to analyse and produce this independent report commenting on the results and feedback provided. In total **611 responses** were received in the consultation, providing a robust sample size to draw results from. The CCG also provided Enventure Research with the feedback from the events, discussions and drop-in sessions to analyse alongside the findings from the survey.

The findings from the consultation will help inform North Lincolnshire CCG's decision making in regards to the future reconfiguration of GP services in the area.

2. Key findings

2.1 Appointment times

More than a third of survey respondents (35%) said that it was a problem for them to see a health professional for routine appointments when it is convenient for them. This was higher amongst working age respondents compared to those of retirement age.

Those who said they had problems getting appointments when it was convenient for them were asked why it is difficult. The most cited reasons were there were no appointments available when they needed them (82%) and that it was difficult to fit appointments in around work commitments (53%). This was corroborated by participants at the events, discussions and drop-in sessions who thought that people who worked full-time or had children at school often struggled to attend appointments during normal practice opening hours.

Survey respondents were also asked to explain their answer further and 47% of those who gave an answer said that appointments fill up too quickly or are too hard to get. At the end of the survey, a quarter (26%) also said that it was difficult to get appointments or that they had to wait for a long time to get them when they were asked if they had any further comments.

The most popular times for appointments are in the evenings during the week (49%) and on Saturday mornings (41%) and these were particularly high amongst working age respondents. The next most popular time was during the week between 8am and 6.30pm (40%), which was most popular amongst those aged 65+ (62%) and those who had a disability (47%). Most participants at the events and discussions felt that GP practices should offer at least a six day service, if not a seven day service. Some suggested, however, that appointments in the evenings and during weekends should be reserved for those who work full-time during the week, those who have children who are at school and those who are reliant on transport provision from friends or family members who work full-time during the week.

Respondents were also asked when is least convenient for them to visit their GP practice. The least convenient appointment time for respondents was before 8am (39%) and this was particularly high for those aged 65 and above (50%). Participants at events and discussions who were of retirement age said that it took them a while to organise themselves in the morning and, therefore, would find it difficult to attend early morning appointments.

A third of respondents (33%) said that during the week between 8am and 6.30pm was least convenient for them and this was highest amongst those aged 25-44 (51%) and 45-64 (37%).

Four in ten (39%) respondents said that fitting in appointments around their work hours was most important to them when booking a routine, non-urgent health care appointment, and again this was highest amongst those aged 25-44 (55%) and 45-64 (49%). In contrast, for those aged 65 and above the most important thing was seeing the health professional of their choice (46% of those aged 65+ compared to 27% overall).

2.2 Accessing routine appointments

Almost four in ten (37%) survey respondents said they would not be willing to travel to another GP centre for routine, non-urgent appointments for a more convenient appointment. This was highest amongst those aged 65 and above (49%). By contrast, larger proportions of those aged 18-24 (82%), 25-44 (73%) and 45-64 (67%) would be willing to travel to another GP centre for a more convenient appointment. These survey findings were corroborated by feedback from the events, discussions and drop-in sessions. However, it would be dependent

on factors such as time taken to travel to there, and the availability and convenience of car parking arrangements. Some event, discussion and drop-in session participants said they would be willing to have a routine appointment at another practice, but if it was for an urgent health problem they would want to go to their usual practice.

Survey respondents who were unwilling to travel to another GP centre were asked to identify their concerns. Over half (53%) were concerned that another team or centre would not know them. This was highlighted by some of the participants at the events, discussions and drop-in sessions who worried that another practice would not have access to their medical history. A further 43% of those who were unwilling to go to another GP centre said it was because it would create travel difficulties for them. This was discussed by event and discussion participants who felt that those who relied on public transport such as buses, taxis or on walking would have the most difficulties with accessing another GP practice. Although the survey found that only a small percentage of respondents usually travel to their GP practice by bus (3%) or taxi (2%), a quarter usually walk (25%).

Respondents were asked to identify what was most important to them when accessing routine, non-urgent primary care appointments. The most popular response was seeing a health professional at a suitable time or day (31%) and this was highest amongst those aged 18-24 (59%) and those aged 25-44 (42%). This was followed by 27% saying that it was important that they saw a qualified health professional who was equipped to deal with their condition.

Only a handful of respondents said they needed support when attending an appointment (7%). However, 16% of those who were aged 65+ and 19% of those who had a disability said they needed support.

Respondents were asked how long they would be willing to spend travelling to a routine, non-urgent appointment during the evening or on weekends within North Lincolnshire. The survey found that only a small proportion would be willing to travel for more than 30 minutes (7%). Four in ten (41%) said they would be willing to travel for up to 15 minutes and 52% for 16 to 30 minutes.

2.3 Seeing another health professional

Nine in ten survey respondents (89%) said they would be willing to see a different health professional who is suitably qualified instead of their GP. The majority of event, discussion and drop-in session participants explained they would be willing to see another health professional as this would ease pressure on GPs. It might also mean that they could access appointments at more convenient times and have a longer appointment with another health professional than they normally would with their GP. Some suggested that they would be happy to be advised by their GP practice's receptionist as to whom they should see. Some also stressed that patients should be able to choose who they see, as for some continuity of care is important, particularly for those with long-term conditions.

A tenth (11%), however, would not be willing to see another health professional instead of their GP and this was particularly high amongst respondents who had a disability (16%). Respondents who would not be willing to see another health professional were asked why this was. The most popular reason was that another health professional would not know them personally (30%), followed by that they would not understand the patient's condition (23%) and uncertainty that they would have the right qualifications (21%).

Those who were willing to see another health professional other than a GP were asked how far they would be prepared to travel. Only one in eight (12%) would travel for more than 30 minutes.

Although the majority of event, discussion and drop-in session participants would be willing to see another health professional, there was a general consensus that this was only appropriate in certain circumstances. Participants explained that for urgent or certain health issues patients would want to see someone they knew and trusted.

Respondents were asked to identify which health professionals they would prefer to speak to about medications and medical aids. Three-quarters of respondents (74%) said they would prefer to speak to a GP about medications, but this was a much smaller proportion in relation to medical aids (47%). Instead 80% of respondents would prefer to speak to a nurse or other allied health professional about medical aids, but only 42% would prefer to speak to a nurse or other allied health professional about medications. Six in ten (63%) would prefer to speak to a pharmacist about medications, but far less about medical aids (32%). Only one in eight would consult with NHS Choices or NHS111 in relation to medications (12%) or medical aids (12%).

Some participants from the discussions, events and drop-in sessions said they were not aware that pharmacists were able to carry out medication reviews. Many said they would consider using this service as long as the pharmacist they saw knew their medical history.

2.4 Information and advice from GP practices

The survey found that almost three in ten respondents (28%) were not satisfied with ways to get advice from their GP practice. This was particularly high amongst those aged 25-44 (34%).

Respondents were asked to identify the ways they currently use to access information or advice from their GP practice and which they would like to use in the future. More than nine in ten (94%) said they currently have face-to-face appointments and almost six in ten (56%) use telephone appointments. A further fifth (22%) use the practice website and 15% access their record online.

Almost six in ten (57%) said they would like to use online access to their records in the future and half (50%) would like to use email to access information and advice. Four in ten would use a symptom checker (39%), or an instant messaging or a live chat facility (41%). Almost four in ten would have appointments using video, Skype or FaceTime (37%).

In line with the survey findings, most participants from the events, discussions and drop-in sessions were open to the idea of using technology to access health and care advice and support in some situations. Many of the participants had access to the internet at home and had smartphones and tablets. They felt increased use of technology could benefit patients who had mobility and disability issues and found it hard to get to their GP practice. Carers also agreed that technology such as Skype, FaceTime, apps and practice websites could benefit them, negating the need to attend their practice with the person they care for.

However, some participants pointed out that not all patients have access to the internet, a smartphone or tablet, or feel comfortable using technology in relation to using their health and would prefer to see a GP face-to-face. Therefore, an increased use of technology would not benefit everyone.

Respondents were asked if they thought it was a good idea for the CCG to explore the use of 'apps', symptom checkers and other technology to help people feel confident about making decisions about their own or their family's health. Almost four in ten (38%) thought it was a good idea and this was highest amongst those aged 18-24 (68%) and 25-44 year olds (51%). However, 31% felt it was not a good idea and 24% were not sure.

Some event and discussion participants had experience of researching advice and information related to their health and care online, but there was a low awareness of the NHS Choices Symptom Checker and the NHS111 service.

2.5 Out of hours support

Three-quarters of respondents (75%) said they knew how to obtain support out of hours when their GP practice is closed. However, this meant that a quarter (25%) do not know.

3. Consultation overview

3.1 Consultation objectives

The aim of this consultation was to inform and involve patients, the public and other stakeholders in regards to the reconfiguration of access to GP services across North Lincolnshire. Within this overall aim, the objectives were to:

- Raise awareness of the proposed reconfiguration of access to GP services
- Understand demand for extended access
- Determine the extent to which patients are willing to travel to other practices for extended access and speak to healthcare professionals other than GPs
- Understand the extent to which patients may use technology such as Skype, symptom checkers and apps to access medical advice and support
- Evaluate patients' views, opinions and comments in regards to the reconfiguration

The consultation will determine:

- A set of principles for extended access to GP services for patients
- Priorities for GP services in the future
- The vision for the service in the future

3.2 Questionnaire

The questionnaire was designed by North Lincolnshire CCG and Enventure Research and asked the following:

- Difficulties in getting routine appointments at convenient times
- Most and least suitable times for routine appointments
- Willingness to travel to other GP practices for convenient appointment times
- Mode of transport used and support need for getting to appointments
- Willingness to see a healthcare professional other than a GP when appropriate
- Satisfaction with current ways to get advice from practices
- Willingness to use technology to access appointments and advice
- Awareness of out of hours support

A copy of the questionnaire leaflet can be found in the **Appendix**.

3.3 Methodology

The survey was administered in paper and online format. Patients were able to pick up the questionnaire form from their GP practice, and once completed either return it to one of the practices or post it back using a pre-paid postage envelope.

The consultation questionnaire was also available for patients to complete online, with access available through the CCG website, GP practice websites and social media. The survey was also promoted via newsletters and posters.

In total there were **611 responses** collected from the public – 451 responses (74%) came from the online survey and 160 responses (26%) came from the paper survey.

Qualitative consultation feedback was also collected from a number of discussions, events and drop-in sessions across North Lincolnshire, where members of the public had their feedback recorded. For the majority of these discussions, the same core questions and topics from the survey were used to elicit responses.

Qualitative feedback was collected and recorded at the events and locations below.

Figure 1 – Discussion feedback

| Event name / location | Date | Number of attendees |
|-------------------------------------|----------------|---------------------|
| Winterton Seniors' Forum | 10 August 2017 | 21 |
| Westcliffe Drop-in Centre | 15 August 2017 | 10 |
| North Lincolnshire PPG Chairs Forum | 16 August 2017 | 9 |
| Carers' Advisory Panel | 31 August 2017 | 14 |

Feedback was also received at Brigg Market and Ashby Market in August 2017.

3.4 Interpretation of the consultation feedback

3.4.1 Interpreting data from the survey

This report contains tables and charts that present consultation results. In some instances, the responses may not add up to 100%. There are several reasons why this might happen:

- The question may have allowed each respondent to give more than one answer
- Only the most common responses may be shown in the table or chart
- Individual percentages are rounded to the nearest whole number so the total may come to 99% or 101%
- A response of between 0% and 1% will be shown as <1%.

As the survey was completed by a sample of patients (611 people), and not the entire North Lincolnshire population (around 167,500 people), all results are subject to sampling tolerances.

For example, when interpreting the results to a survey question which all respondents answered (611), where 50% of respondents in the sample responded with a particular answer, there is a 95% chance that this result would not vary by more than +/- 4 percentage points had the result been obtained from all of the patients registered with both practices¹.

As a self-completion questionnaire was used, not all respondents have answered all questions. Therefore, the base size (the number of people answering) varies for each question.

To compare results by area of North Lincolnshire, gender, age group and disability, statistical analysis has been undertaken. This allows us to be confident that any difference between scores is real and is not due to chance. These analyses have only been carried out where the sample sizes are seen to be sufficient for comment. Where sample sizes were not large enough, subgroups have been combined to create a larger group. Results between subgroups have been tested at a 95% confidence level.

¹ This is an example only and does not reflect any of the questions asked in the survey.

There were a few open-end questions in the survey which allowed respondents to write their own responses rather than tick a box. To analyse these answers and present them in an understandable way, responses to the open-end questions have been sorted into a number of categories and themes, allowing them to be visually presented as charts.

Throughout this report, those who took part in the survey are referred to as 'respondents'.

3.4.2 Interpreting feedback from focus groups, workshops, discussions, open sessions and events

When interpreting qualitative research feedback, which for this research has been collected via discussions, drop-in sessions and events, it is important to remember that these findings differ to those collected via a quantitative survey methodology. Qualitative findings are collected by speaking in much greater depth to a select number of participants. Notes were made from these discussions, drop-in sessions and events to draw out common themes.

Qualitative findings are not meant to be statistically accurate, but instead are collected to provide additional insight and greater understanding based on in depth discussion and deliberation, something not possible to achieve via a quantitative survey. For example, if the majority of participants at an event hold a certain opinion, this does not necessarily apply to the majority of the population.

Throughout this report, those who took part in discussions, drop-in sessions and events are referred to as 'participants'.

4. Detailed Findings

4.1 Respondent profile

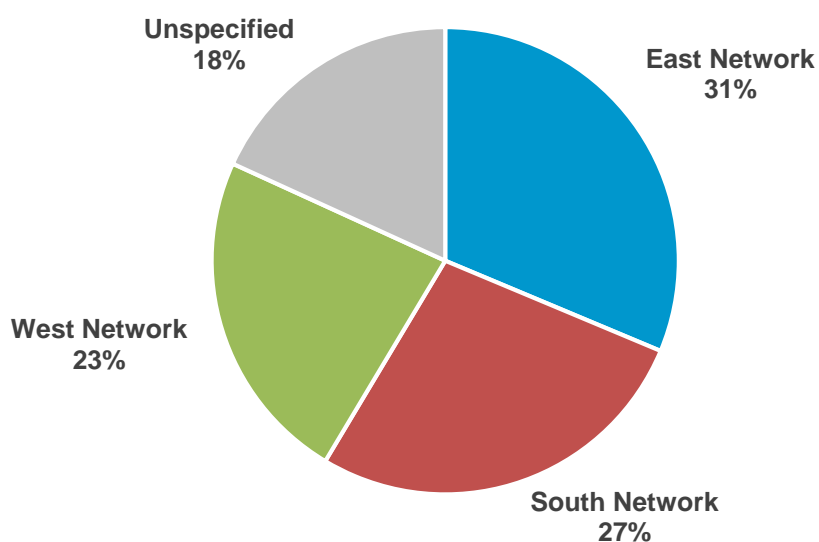
The consultation asked respondents to identify the practice with which they were registered. As can be seen below, there was a spread of different GP practices that patients were registered with. Almost a fifth of respondents (18%) said they were registered with another practice not listed below or did not provide a response to the question.

Figure 2 – GP practice
Base: Asked to all (611)

| GP practice | Count | Percentage |
|------------------------------------|-------|------------|
| Ancora Medical Practice | 36 | 6% |
| Ashby Turn Primary Care | 19 | 3% |
| Barnetby Medical Centre | 6 | 1% |
| Bridge Street Surgery | 24 | 4% |
| Cambridge Avenue Medical Centre | 46 | 8% |
| Cedar Medical Practice | 13 | 2% |
| Central Surgery Barton | 33 | 5% |
| Church Lane Medical Centre | 23 | 4% |
| Hibaldstow Medical Practice | 8 | 1% |
| Ironstone Centre | 7 | 1% |
| Kirton Lindsey Surgery | 34 | 6% |
| Riverside Surgery | 47 | 8% |
| South Axholme Practice | 54 | 9% |
| The Birches Medical Practice | 8 | 1% |
| The Killingholme Surgery | 11 | 2% |
| The Oswald Road Medical Surgery | 18 | 3% |
| Trent View Medical Practice | 33 | 5% |
| West Common Lane Teaching Practice | 18 | 3% |
| West Town Surgery | 8 | 1% |
| Winterton Medical Practice | 54 | 9% |
| Other or unspecified | 111 | 18% |

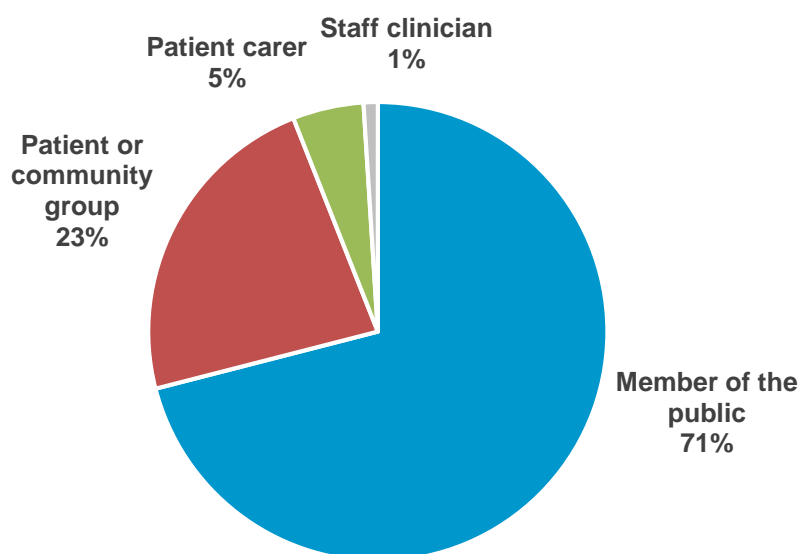
GP practices fall within three networks in North Lincolnshire. Three in ten responses came from the East Network (31%), just over a quarter from the South Network (27%) and 23% from the West Network. Almost a fifth (18%) of responses could not be mapped to a network as the respondent did not identify their GP practice.

Figure 3 – North Lincolnshire Network
Base: All (611)



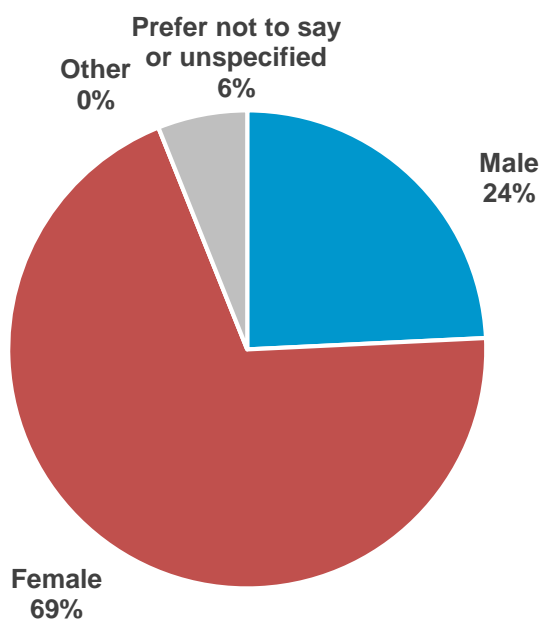
The majority of respondents said they were a member of the public (71%), a patient or a member of a community group (23%), or a carer of a patient (5%). Only 1% said they were a staff clinician.

Figure 4 – Capacity responding
Base: Asked to all (591)



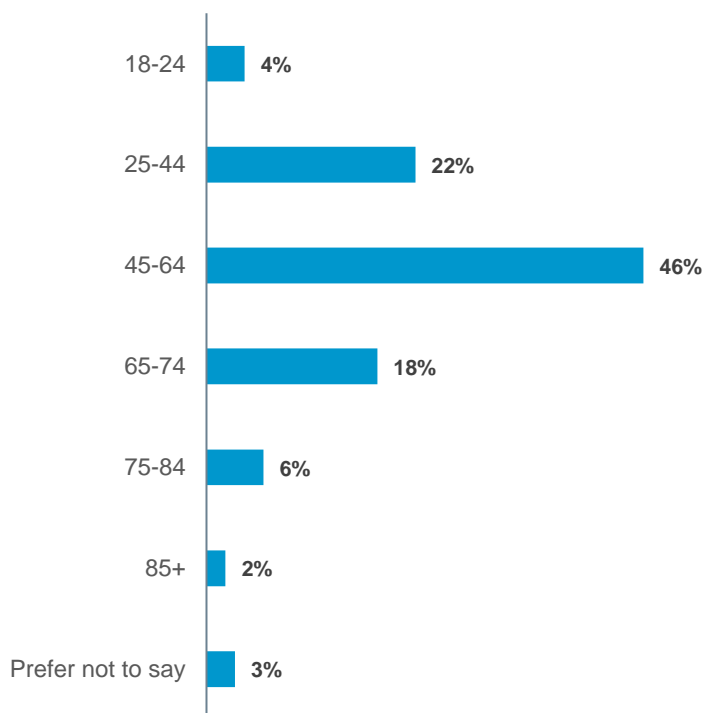
Seven in ten respondents were female (69%) and a quarter were male (24%). Six per cent did not specify their gender.

Figure 5 – Gender
Base: Asked to all (611)



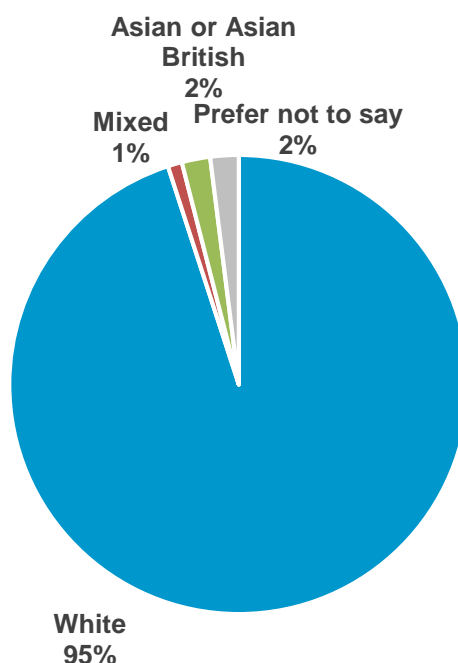
A quarter of respondents (24%) were under the age of 45 and 26% were aged 65 or above.

Figure 6 – Age
Base: Asked to all (587)



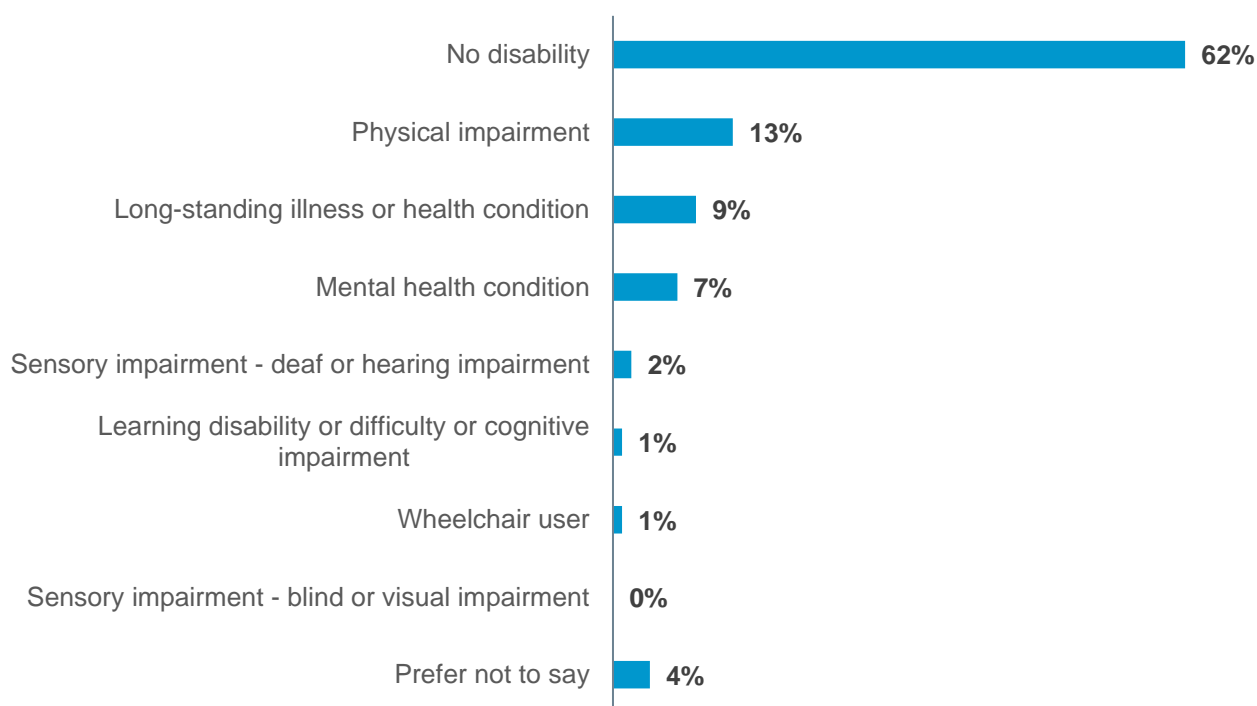
The majority of respondents were from a White ethnic background (95%).

Figure 7 – Ethnic Group
Base: Asked to all (587)



Almost four in ten (38%) respondents said that they had a disability or impairment. One in eight (13%) said this was a physical impairment and one in ten (9%) had a long-standing illness or health condition.

Figure 8 – Disability
Base: Asked to all (581)

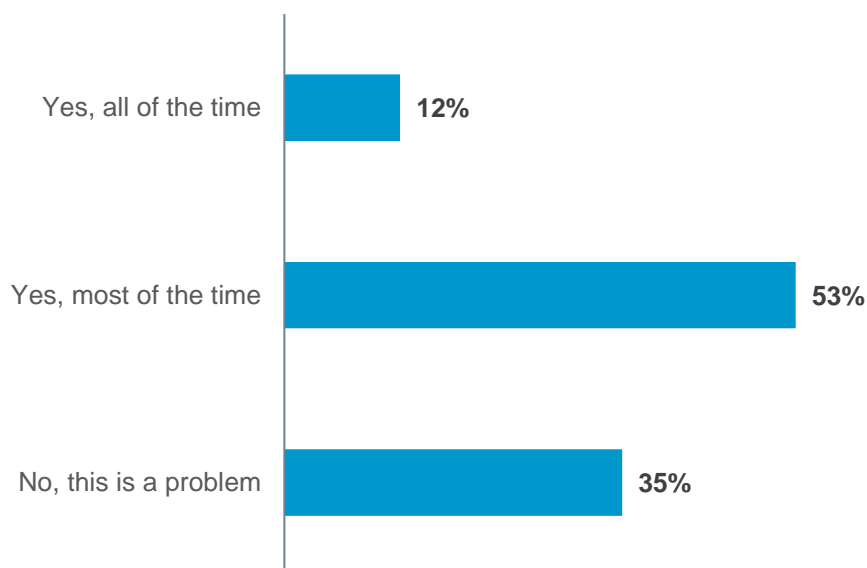


4.2 Appointment times

Respondents were first asked to think about the current opening hours of their GP practice and whether they can see a health professional for routine appointments when it is convenient. Just over half (53%) said they could most of the time and 12% said they could all of the time. However, more than a third (35%) said that getting an appointment was a problem for them.

Figure 9 – Thinking about the current opening hours at your GP practice, can you see a health professional for routine appointments when it is convenient for you?

Base: Asked to all (605)



Subgroup analysis

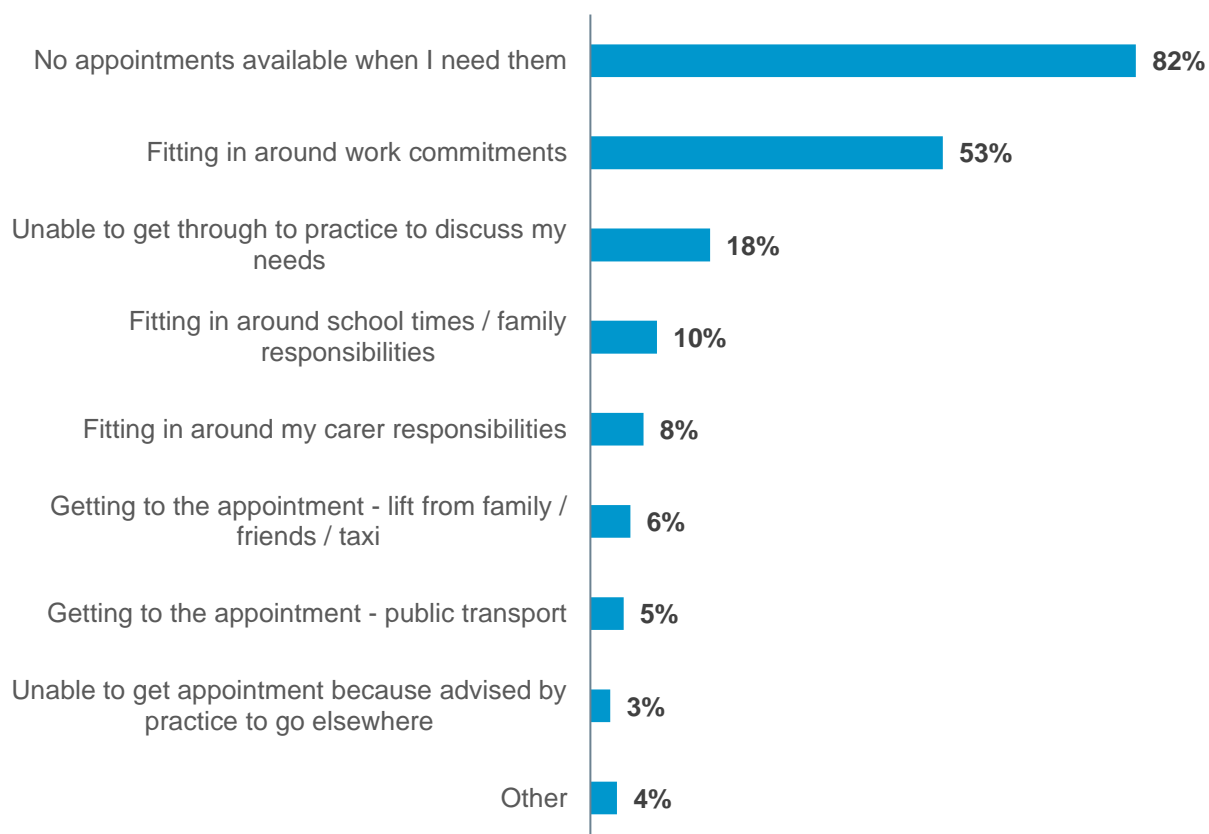
Subgroups more likely to say they think **it is a problem** for them to see a health professional for routine appointments when convenient (35% overall) included those who were aged 25-44 (48%) or 45-64 (38%) compared to those aged 65+ (22%)

Those who said that it is a problem for them to see a health professional for routine appointments when it is convenient were asked why it is difficult for them.

The most cited reason was that there were no appointments when needed (82%). This was followed by problems with fitting appointments around work commitments (53%). Almost a fifth (18%) said that they were unable to get through to their practice to discuss their needs.

Figure 10 – Why is this difficult for you?

Base: Asked to those who said it was a problem getting an appointment (211)



Subgroup analysis

Subgroups more likely to say there were **no appointments when they need them** (82% overall) included those who were female (87%) compared to those who were male (72%)

Subgroups more likely to say they had **problems fitting appointments around work commitments** (53% overall) included those who did not have a disability (63%) compared to those who did (38%)

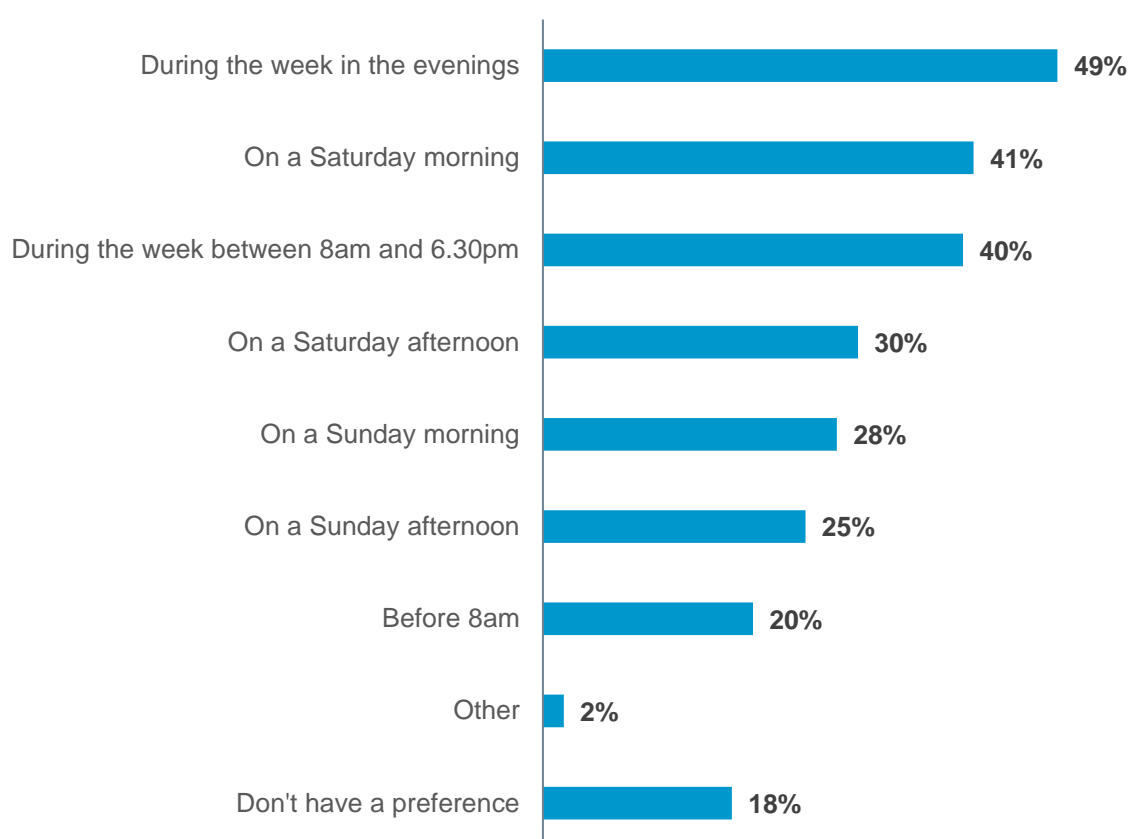
Respondents were asked to further explain their answer and provide a comment. The most common theme was that respondents felt that appointments often filled up too quickly and it was often difficult to get any appointment (47%). This was followed by 39% saying that their work commitments meant they could not get an appointment or that there were not enough appointments outside of their working hours.

Respondents were asked to identify the most suitable times for them to visit a GP practice for routine, current and / or non-urgent appointments. Respondents were able to select as many times as they wished from a list.

Around half of respondents (49%) said that during the week in the evenings was suitable. This was followed by Saturday mornings (41%) and a further four in ten (40%) indicated that during the week between 8am and 6.30pm was suitable. Three in ten (30%) said that Saturday afternoon was suitable and 28% chose Sunday mornings. A quarter (25%) thought that Sunday afternoons were suitable for them and 20% before 8am. Almost a fifth (18%) said they did not have a preference.

Figure 11 – Which of the following are the most suitable times for you to visit a GP practice for routine, current and / or non-urgent problems?

Base: Asked to all (608)



Subgroup analysis

Subgroups more likely to say that **during the week in the evenings** was suitable (49% overall) included those who:

- Were aged 18-24 (68%), 25-44 (68%) or 45-64 (55%) compared to those aged 65+ (18%)
- Did not have a disability (54%) compared to those who did (37%)
- Were based in the West Network (55%) or South Network (49%) compared to the East Network (38%)

Subgroups more likely to say that **Saturday mornings** were suitable (41% overall) included those who:

- Were aged 25-44 (53%) or 45-64 (45%) compared to those aged 65+ (26%)
- Did not have a disability (46%) compared to those who did (32%)

Subgroups more likely to say that **during the week between 8am and 6.30pm** was suitable (40% overall) included those who:

- Were aged 65+ (62%) compared to those aged 25-44 (27%) and 45-64 (35%)
- Had a disability (47%) compared to those who did not (36%)
- Were based in the East Network (47%) or the South Network (43%) compared to the West Network (32%)

Subgroups more likely to say that they **did not have a preference** (18%) overall included those who were aged 65+ (28%), particularly in comparison to those aged 25-44 (9%)

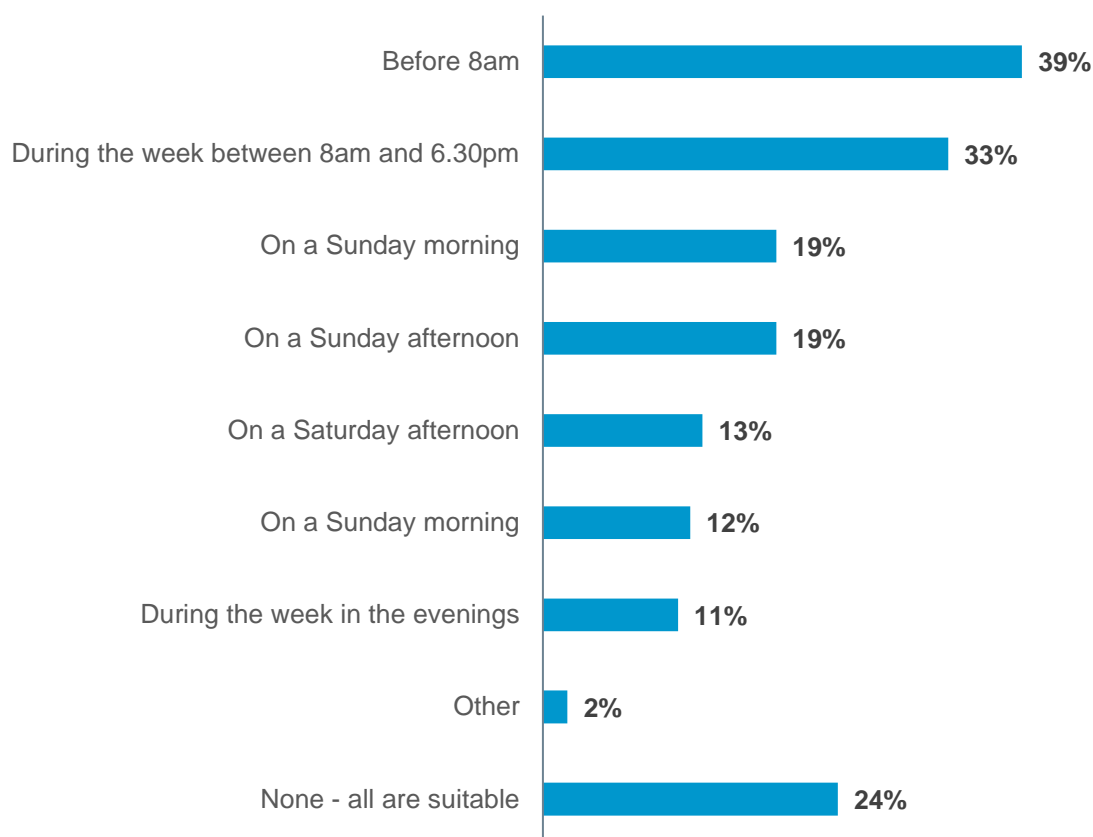
Respondents were asked to explain their answer. Almost half (47%) said that their work commitments prevented them from finding an appointment time that was convenient for them or that there should be more appointments outside of their working hours. A further 37% explained that they could attend appointments at any time as they were retired, not working, worked part-time or had a flexible working pattern.

Respondents were then asked to identify the least suitable times for them to visit a GP practice for routine, current and / or non-urgent appointments. Respondents were able to select as many times as they wished from a list.

Four in ten (39%) said that before 8am was least suitable. This was followed by during the week between 8am and 6.30pm (33%), Sunday mornings (19%) and Sunday afternoons (19%). By contrast only 11% said during the week in the evenings was not suitable and 12% in relation to Saturday mornings. A quarter (24%) said that all of the times were suitable for them.

Figure 12 – Which of the following are the least suitable times for you to visit a GP practice for routine, current and / or non-urgent problems?

Base: Asked to all (604)



Subgroup analysis

Subgroups more likely to say that **before 8am** was not suitable (39% overall) included those who:

- Were aged 65+ (50%) compared to those aged 25-44 (34%) and 45-64 (34%)
- Had a disability (49%) compared to those who did not (34%)

Subgroups more likely to say that **during the week between 8am and 6.30pm** was not suitable (33% overall) included those who:

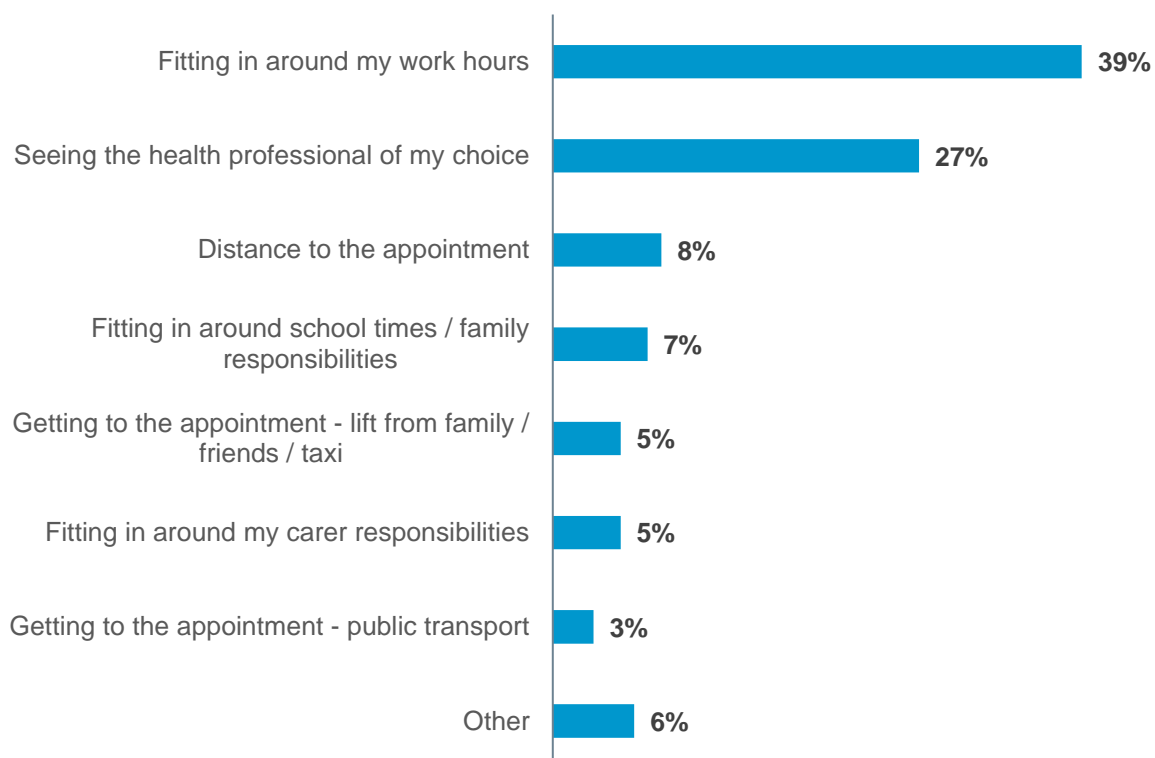
- Were aged 25-44 (51%) and 45-64 (37%) compared to those aged 65+ (7%)
- Did not have a disability (39%) compared to those who did (23%)

Respondents were asked what was most important to them when booking a routine, non-urgent healthcare appointment.

Fitting appointments in around work hours was most important for four in ten (39%), followed by seeing the health professional of their choice (27%).

Figure 13 – What is most important when booking a routine, non-urgent health care appointment?

Base: Asked to all (607)



Subgroup analysis

Subgroups more likely to say that **fitting in around work hours** was most important (39% overall) included those who:

- Were aged 25-44 (55%) and 45-64 (49%) compared to those aged 65+ (5%)
- Did not have a disability (49%) compared to those who did (22%)

Subgroups more likely to say that **seeing the health professional of their choice** was most important (27% overall) included those who:

- Were aged 65+ (46%) compared to those aged 25-44 (13%) and those aged 45-64 (27%)
- Had a disability (33%) compared to those who did not (23%)

Respondents were asked to explain their answer. Three in ten (31%) said that being able to see their usual GP or their GP of choice was important. This was followed by 22% saying that not having to take time off work or getting an appointment outside of work hours was important.

Qualitative feedback

Most participants at the events, discussions and drop-in sessions agreed that there is demand for appointments outside of the current opening times of GP practices. The survey findings corroborated this. There was a general consensus that people who would benefit the most would be those who work full-time, shift workers and people with children who needed to fit appointments around work and school time. They perceived that it was currently difficult for working people to get appointments at their GP practice. This was corroborated by the survey finding that those of working age were more likely to say they had a problem with booking appointments at convenient times.

It's very difficult to see a GP in working hours. Our practice doesn't let you make an appointment in advance, you have to ring on the day and try and get one, but I have to give a week's notice to get time off work. You don't know when to book time off because you don't know when you can see your doctor.

Ashby Market

Most of the attendees at the events, discussions and drop-in sessions, however, were retired and so pointed out that they themselves do not struggle to get to appointments.

We are all retired, so we can go in the day time.

Winterton Seniors' Forum

As also seen in the survey, some participants would be willing to have an appointment on Saturdays and some on Sundays, although the latter is less popular as some view it as a 'day of rest'. The majority thought that all practices should at least offer a six day service, if not a seven day service and some felt that appointments on Saturdays and Sundays should be reserved for those who work full-time during the week or for parents with children at school. However, a few of the participants were reliant on friends and family members who themselves work to take them to GP appointments and so would also want these appointment times.

Most participants said they would attend an evening appointment, however in the summer only. They would not like to have an evening appointment if it was during the winter months and it was dark. Carer participants also suggested that evening appointments could be slightly harder for them to get to either for themselves or the person they care for. Some at the events, discussions and drop-in sessions pointed out that their GP practice had trialled evening appointments and they were popular.

Well, our practice tried three evenings and they were always fully booked.

PPG Workshop

Morning appointments would be welcomed by a few who attended the Westcliff Drop-in Centre. However, all participants who attended the Carers' Advisory Panel and the Winterton Seniors' Forum and some from the PPG Workshop said they would not want an early morning appointment as it took them a long time to organise themselves in the morning. The survey also found that those aged 65 and above were most likely to say that appointments before 8am were not suitable for them.

When you get older it takes longer to get organised in a morning, so late mornings are much better.

Winterton Seniors' Forum

Being an OAP, before 10am would be an absolute no no.

PPG Workshop

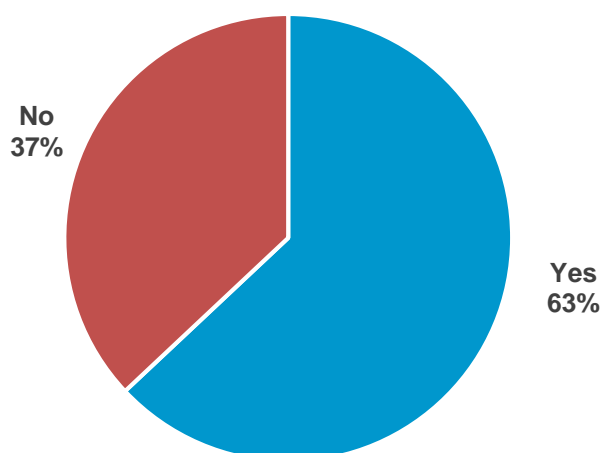
4.3 Accessing routine appointments

Respondents were asked if they would be willing to travel to another GP centre for a more convenient appointment with a health professional.

Just over six in ten (63%) said they would be willing, but this leaves almost four in ten (37%) who would not be.

Figure 14– Would you be willing to travel to a GP centre other than your own for routine, non-urgent appointments with a health professional for a more convenient appointment?

Base: Asked to all (609)



Subgroup analysis

Subgroups more likely to say that **they would be willing to travel to another GP centre** for a more convenient appointment with a health professional (64% overall) included those who:

- Were aged 18-24 (82%), 25-44 (73%) and 45-64 (67%) compared to those aged 65+ (51%)
- Did not have a disability (72%) compared to those who did (52%)

Subgroups more likely to say that **they would not be willing to travel to another GP centre** for routine, non-urgent appointments with a health professional for a more convenient appointment (37% overall) included those who:

- Were aged 65+ (49%) compared to those aged 18-24 (18%), 25-44 (27%) and 45-64 (33%)
- Had a disability (48%) compared to those who did not (28%)

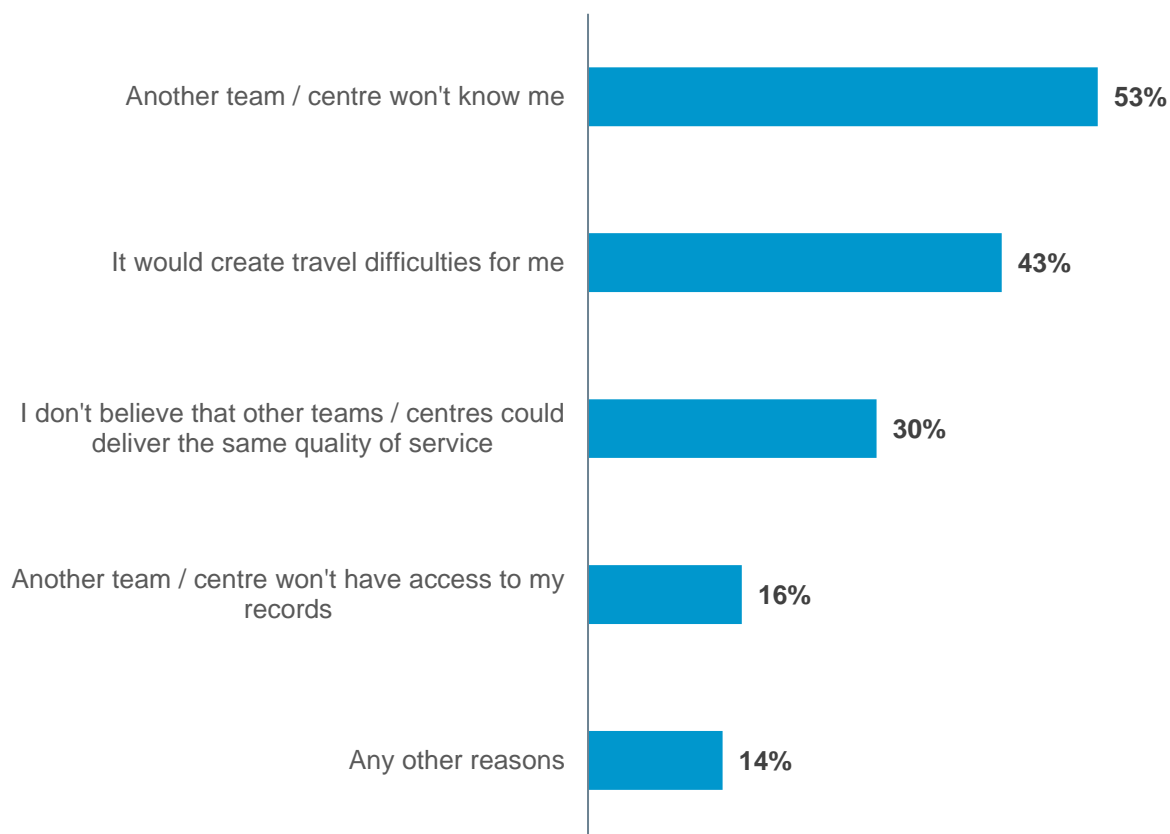
Respondents were asked to explain their answer. A fifth (22%) said that they preferred to see their own GP or a GP at their own practice. This was followed by respondents saying they were willing to travel as long as it was not too far (16%) or that they would have difficulties with travelling, because, for example, they could not drive and relied on public transport or walking (15%).

Respondents who said they were unwilling to travel to another GP centre for a more convenient appointment were asked to identify their concerns, choosing from a list.

Over half expressed the concern that another team or centre would not know them (53%). A further four in ten (43%) said it would create travel difficulties for them and three in ten (30%) did not believe that other teams or centres could deliver the same quality of service. One in six (16%) also worried that another team or centre would not have access to their patient records.

Figure 15 – What are your main concerns?

Base: Asked to those who would not be willing to travel to another GP centre (221)



Respondents were asked what is most important to them when accessing routine, non-urgent appointments.

Three in ten (31%) said that seeing a health professional at a suitable time and on a suitable day for them was most important. This was followed by 27% saying that seeing a qualified health professional who is equipped to deal with their condition was most important. A further 17% felt that seeing a qualified health professional within a suitable timeframe was most important and a further 17% said it was seeing a qualified health professional that they know. Only 6% felt that seeing a qualified health professional at a suitable location for them was most important.

Figure 16 – Which is most important to you when accessing routine, non-urgent primary care appointments?

Base: Asked to all (606)



Subgroup analysis

Subgroups more likely to say that **seeing a qualified health professional at a suitable time / day** was most important (31% overall) included those who:

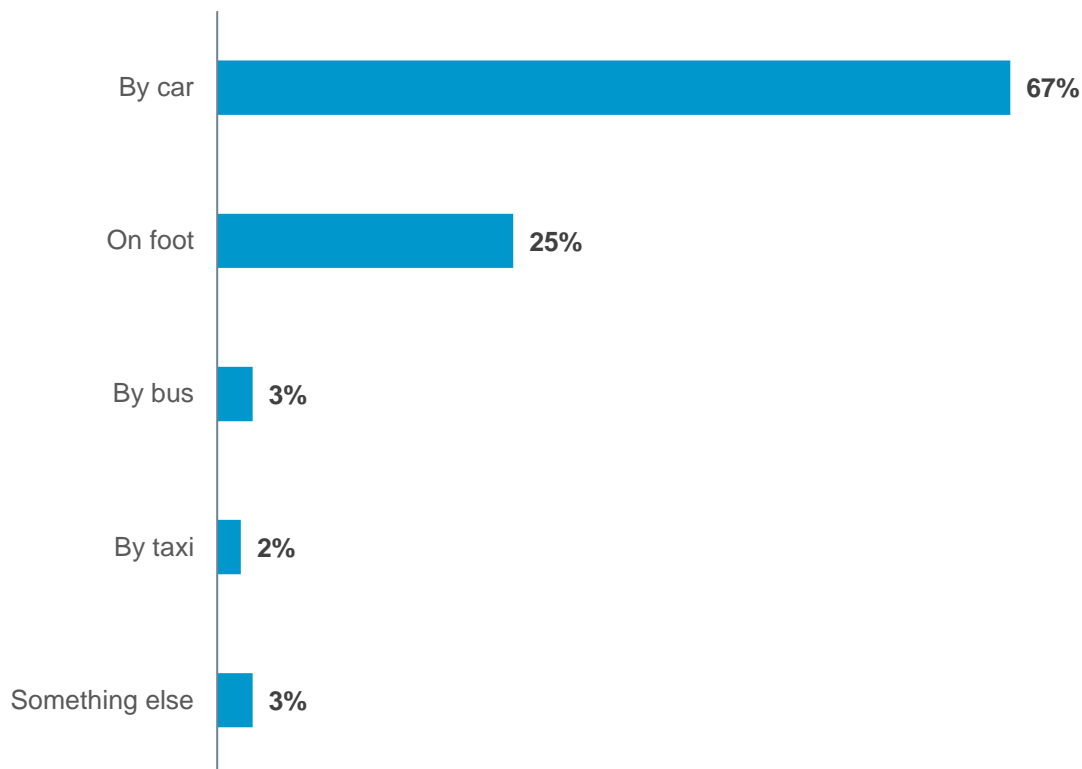
- Were aged 18-24 (59%) and 25-44 (42%) compared to those who were aged 45-64 (30%) and 65+ (21%)
- Did not have a disability (35%) compared to those who did have one (26%)

Subgroups more likely to say that **seeing a qualified health professional that they know** was most important (17% overall) included those who had a disability (25%) compared to those who did not (13%)

Respondents were asked to explain their answer. A fifth (20%) said that they wanted to be seen quickly or that it was difficult to get an appointment.

Respondents were asked how they normally travel to their usual GP practice. The survey found that two-thirds (67%) travel by car and over a quarter (25%) by foot. Relatively small proportions travelled by taxi (2%) or by bus (3%).

Figure 17 – How do you usually get to your usual GP practice?
Base: Asked to all (610)



Subgroup analysis

Subgroups more likely to say that **they travelled by car to their GP practice** (67% overall) included those who:

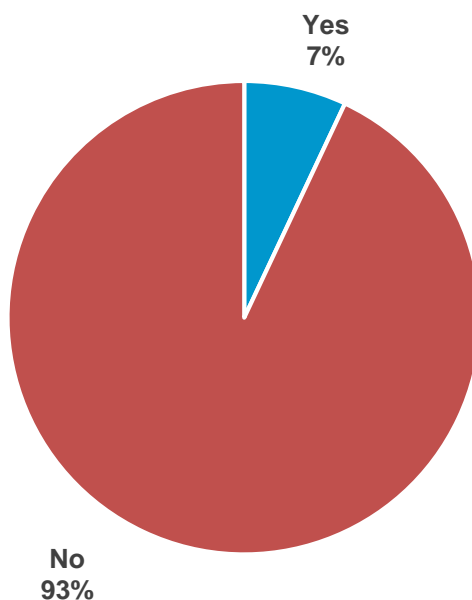
- Were aged 25-44 (72%) compared to those who were aged 65+ (60%)
- Did not have a disability (72%) compared to those who did (57%)

Subgroups more likely to say that **they travelled on foot to their GP practice** (26% overall) included those who were based in the West Network (31%), particularly compared to those who were based in the South Network (19%)

Respondents were asked if they needed support to travel to an appointment. The majority said they did not (93%), but 7% said they did.

Figure 18 – Do you require support when attending an appointment?

Base: Asked to all (608)



Subgroup analysis

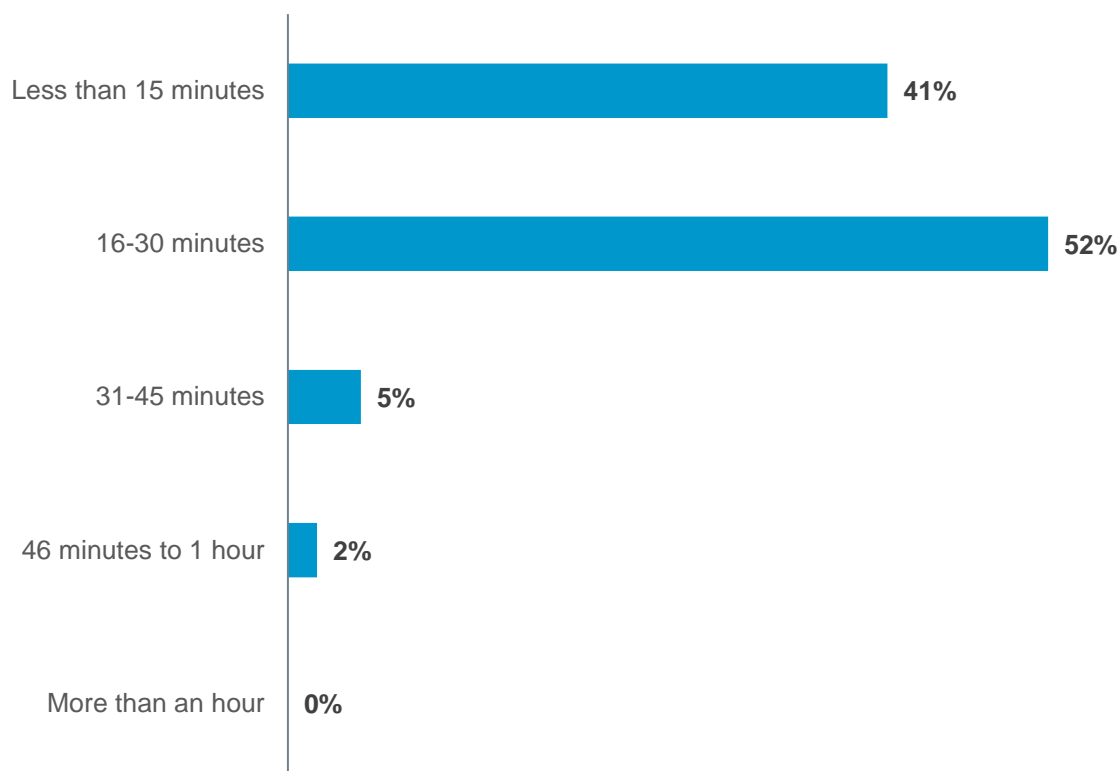
Subgroups more likely to say that **they require support to attend an appointment** (7% overall) included those who:

- Were male (11%) compared to those who were female (5%)
- Were aged 65+ (16%) compared to those aged 45-64 (4%)

Respondents were asked how long they would be willing to spend travelling to a routine appointment in the evenings and on weekends within North Lincolnshire.

The survey found that only a small proportion of respondents would be willing to travel for more than 30 minutes (7%). Four in ten (41%) would be willing to travel for less than 15 minutes and just over half (52%) for 16-30 minutes.

Figure 19 – How long would you be willing to spend travelling to a routine, non-urgent GP appointment at evenings or weekends within North Lincolnshire?
Base: Asked to all (606)



Subgroup analysis

Subgroups more likely to say that **they would be willing to travel for more than 30 minutes** (7% overall) included those who were male (14%) compared to those who were female (6%)

Qualitative feedback

In line with the survey findings, participants of a working age would be willing to travel to another practice for a more convenient routine appointment that fitted around their working hours. However, this would depend on the location of the practice, the time taken to travel there and the availability and convenience of parking for those who drive.

If it was a long way to go, that would be a barrier.

Winterton Seniors' Forum

Most participants who were retired or were carers would not want to go to another practice. This is in line with the survey finding that those aged 65 and above were least willing to attend another practice for a routine appointment. Some participants, for example, had concerns such

as their medical records not being available at another practice or a different GP who did not know them having a different opinion to their usual GP.

I wouldn't want to go to another practice because different doctors have a different opinion of your illness.

Winterton Seniors' Forum

Some also felt that they would always want to attend their own practice for a routine appointment, but suggested they would be willing to go another practice for a more urgent appointment.

I think it's more that people would travel if it is urgent and not routine. You register with a GP practice that is easy and convenient to get to and is mostly near to your house. You would make an exception to travel if it was urgent and you needed to be sorted. Otherwise, I would not travel.

Carers' Advisory Panel

However, there was a general consensus that those who drive would find it easiest to travel to another practice. Participants felt that those who relied upon public transport, on taxis or on walking, would find it more difficult.

I have to walk there and I can't walk very far so I couldn't get to another practice.

Winterton Seniors' Forum

It helps with families' needs but is only easier if you have the means to get there.

Winterton Seniors' Forum

Participants focused on buses in particular, suggesting that travelling on buses in the evening with children would be difficult, some rural areas do not have good bus links, buses only run at certain times and they can be cancelled in adverse weather conditions, such as heavy snow.

For me, it's getting there. I have to go with the bus timetables.

Winterton Seniors' Forum

Travelling could be really difficult because between Barton and Goxhill there is not a regular bus service.

PPG Workshop

A lot of rural places don't have buses.

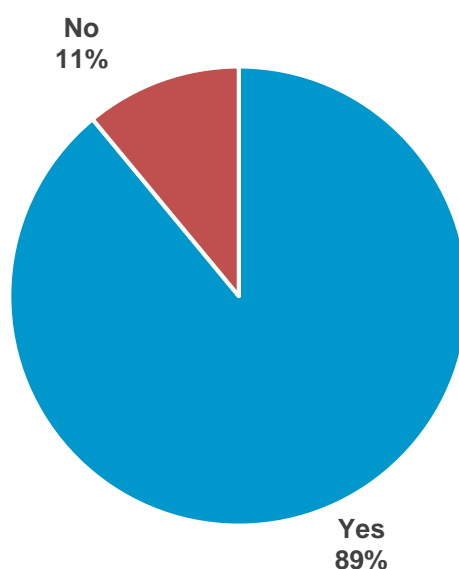
PPG Workshop

4.4 Seeing another health professional

Respondents were asked if they would be willing to see another health professional who is suitably qualified instead of their GP if it was appropriate. The majority (89%) said that they would be willing and 11% would not be.

Figure 20 – Would you be willing to see a different health professional, who is suitably qualified, instead of your GP?

Base: Asked to all (610)



Subgroup analysis

Subgroups more likely to say that **they would not be willing to see a different health professional** (11% overall) included those who had a disability (16%) compared to those who did not (7%)

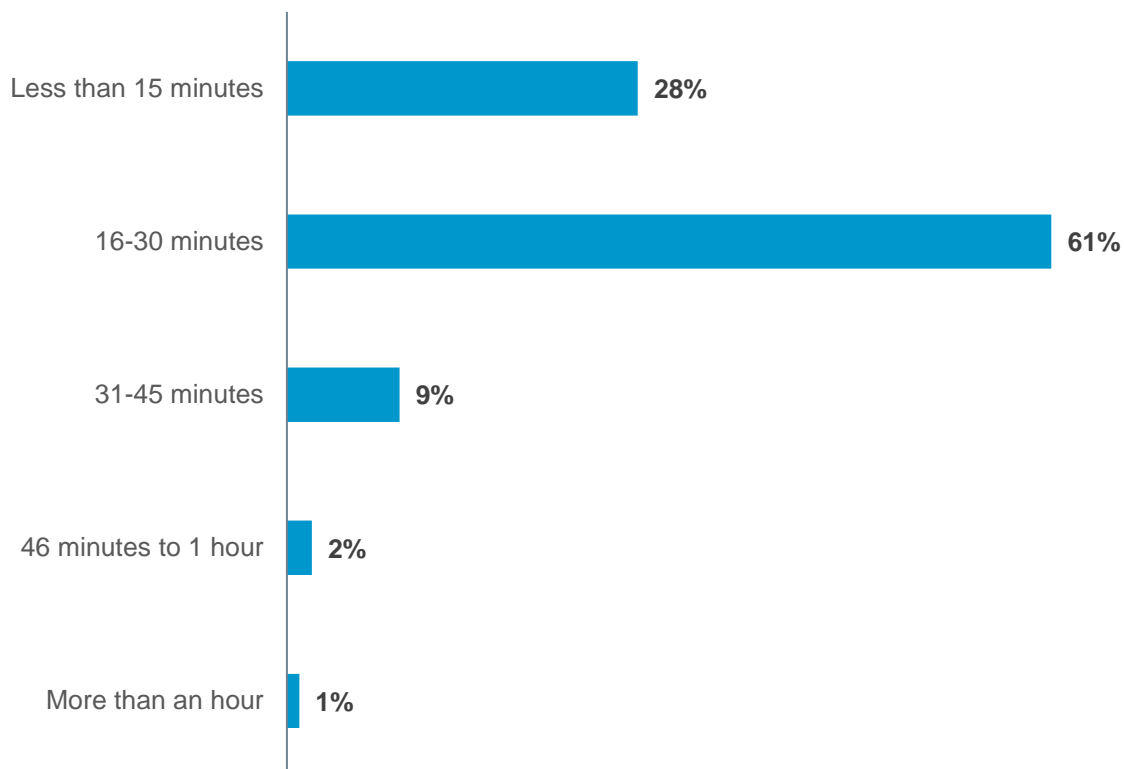
Respondents were asked to explain their answer. A fifth (21%) said they did not mind who they see as long as the health professional has the relevant expertise or qualifications. This was followed by a further fifth (20%) who said that they had seen another health professional in the past and had had a good experience.

Those who said they would be willing to see another health professional were asked how long they would be willing to spend travelling to see them within North Lincolnshire.

Nine in ten respondents (89%) said they would be willing to spend up to 30 minutes travelling to see another health professional. Three in ten (28%) would be willing to spend less than 15 minutes and 61% for 16-30 minutes. Only 12% would be willing to spend more than 30 minutes travelling.

Figure 21 – How long would you be willing to spend travelling to see a suitably qualified health professional instead of your GP within North Lincolnshire?

Base: Asked to those who would be willing to see another health professional (542)



Those who said they were not willing to see another health professional were asked to identify their biggest concern, choosing from a list.

Three in ten (30%) said that they were concerned that the health professional would not know them personally. Just under a quarter (23%) felt the health professional would not understand their condition and 21% would not be sure that they would have the right qualifications. One in seven (14%) said that they would not trust any professional other than a GP.

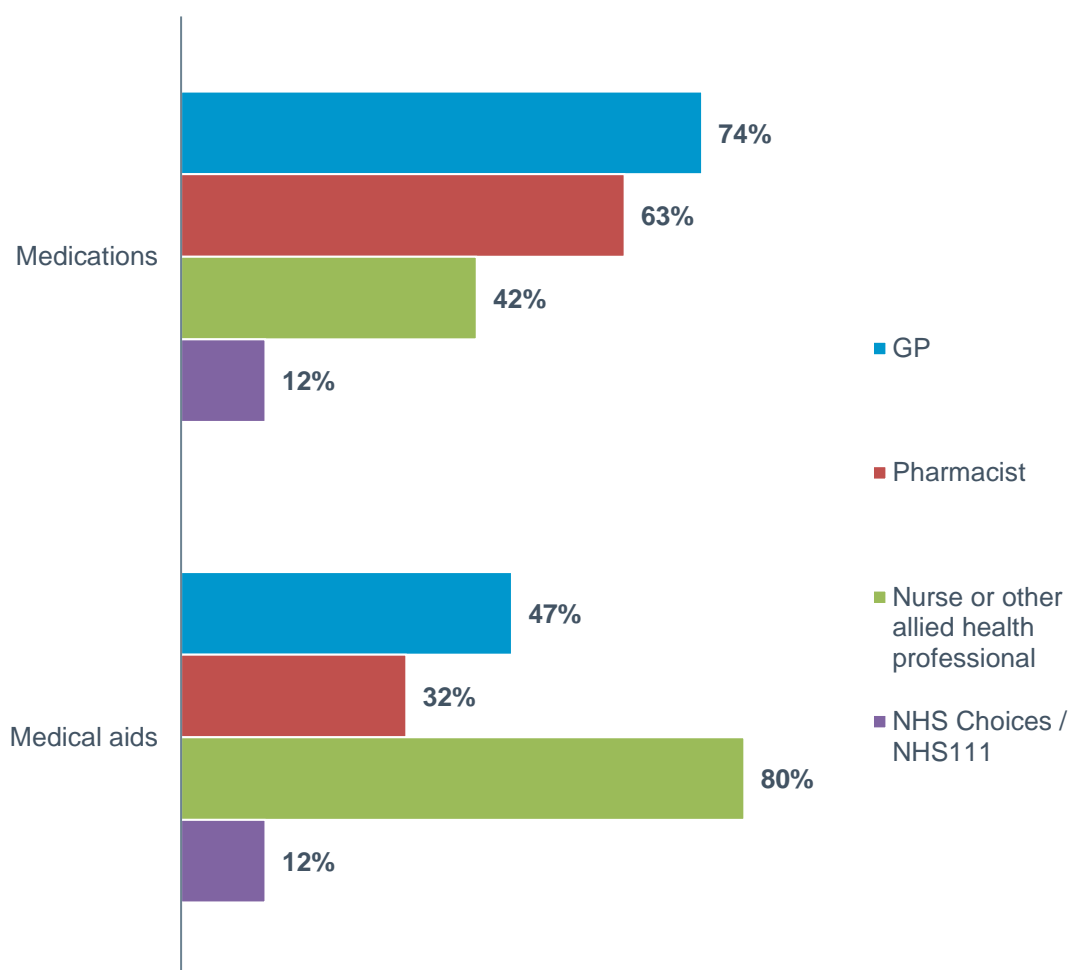
Figure 22 – What concerns you most about seeing another health professional?
Base: Asked to those who were not willing to see another health professional (66)



Respondents were then asked to identify which health professional they would prefer to speak to about medications and about medical aids.

Three-quarters of respondents (74%) said they would prefer to speak to a GP about medications. However, the proportion of respondents who would prefer to speak to a GP about medical aids was a lot smaller (47%). Six in ten (63%) respondents would prefer to speak to a pharmacist about medications, but for medical aids this was also a lot smaller (32%). Instead the majority of respondents (80%) indicated that they would prefer to speak to a nurse or other allied health professional about medical aids. However, only four in ten (42%) would speak to a nurse or other allied health professional about medications. Only one in eight would prefer to consult with NHS Choices or NHS111 in relation to medications (12%) or medical aids (12%).

Figure 23 – If you wanted advice about any medications or medical aids, who would you prefer to speak to?
Base: Asked to all (606 / 596)



Respondents were asked to explain their answers. A fifth (22%) said that they were happy to speak to all of the health professionals listed or did not mind who they spoke to.

Qualitative feedback

In line with the survey findings, the majority of participants would be willing to see another healthcare professional instead of their GP, with most referring to a nurse practitioner. There was a general consensus that this would ease pressure on GPs to a certain extent, as it may mean that people could access appointments at more convenient times to them and some hoped that other healthcare professionals would have more time for them than their GP.

If we could see a nurse practitioner, I would prefer to see her sometimes. They seem to have more time for you.

Winterton Seniors' Forum

Some suggested that they would trust a GP practice receptionist to advise them on which health professional they should see.

However, there was a general consensus that this would not be appropriate in certain circumstances, for example if the problem was urgent or for certain health issues where the patient would want to see someone they knew and trusted.

If I had something severe, I would want to see a doctor, but if it wasn't I would see a practitioner.

PPG Workshop

The severity of the case would alter your opinion.

PPG Workshop

It depends on the situation. Sometimes you want to see a doctor when it's personal and your own doctor knows you.

Winterton Seniors' Forum

However, some participants stressed that it is important that people are able to see the health professional they wish to see and that they have continuity of care, without needing to re-explain their medical history. This was particularly important for those with long term conditions.

Most people want to see their own doctor and nobody else.

PPG Workshop

It is important that you can see a health professional of your choice. People feel more comfortable seeing the same person and having that continuity. You feel at least they are aware of your history. If you see someone fresh, you don't have time to explain everything.

Winterton Seniors' Forum

If it is for a long term condition, we want to see the same person.

Carers' Advisory Panel

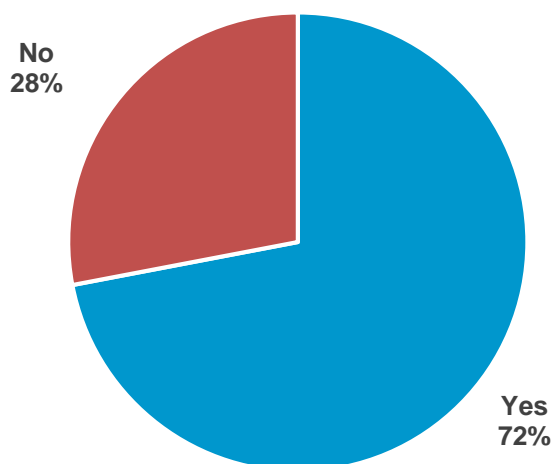
Some participants who attended the Westcliff Drop-in centre were not aware that pharmacists were able to carry out medication reviews. The majority would consider using this service, as long as the pharmacist knew their medical history.

4.5 Information and advice from GP practices

Respondents were asked if they were satisfied with ways to get advice from their practice. Seven in ten (72%) said they were satisfied, but 28% said they were not.

Figure 24 – Are you satisfied with the ways in which you can get advice from your Practice at the moment?

Base: Asked to all (606)



Subgroup analysis

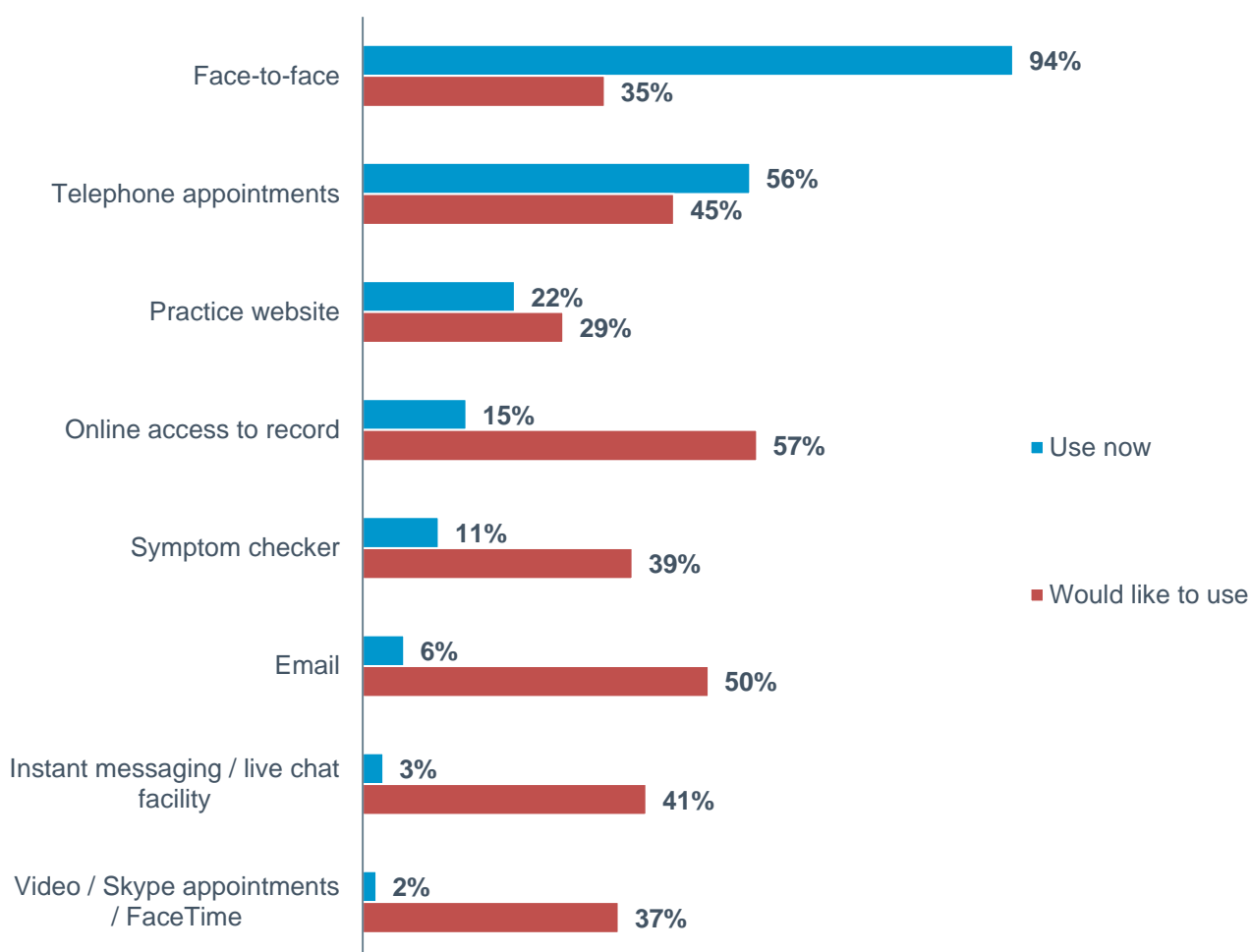
Subgroups more likely to say that **they were not satisfied with ways to get advice from their practice** (28% overall) included those who were aged 25-44 (34%), particularly compared to those aged 65+ (22%)

Respondents were asked which ways of accessing information or advice from their GP surgery they currently use and which they would like to use. Respondents were asked to choose as many methods as applied for each.

More than nine in ten (94%) said that they currently access information or advice from their GP surgery face-to-face and 56% said they used telephone appointments. A further fifth (22%) said they use the practice website and 15% access their record online. Smaller proportions use symptom checkers (11%), email (6%), instant messaging or live chat facility (3%) and video, Skype or FaceTime (2%).

Almost six in ten (57%) said they would like to use online access to their record in the future and half (50%) would be willing to use email. Over four in ten (45%) would use telephone appointments and 41% instant messaging or a live chat facility. Four in ten said they would also use a symptom checker (39%) and 37% video, Skype appointments or FaceTime.

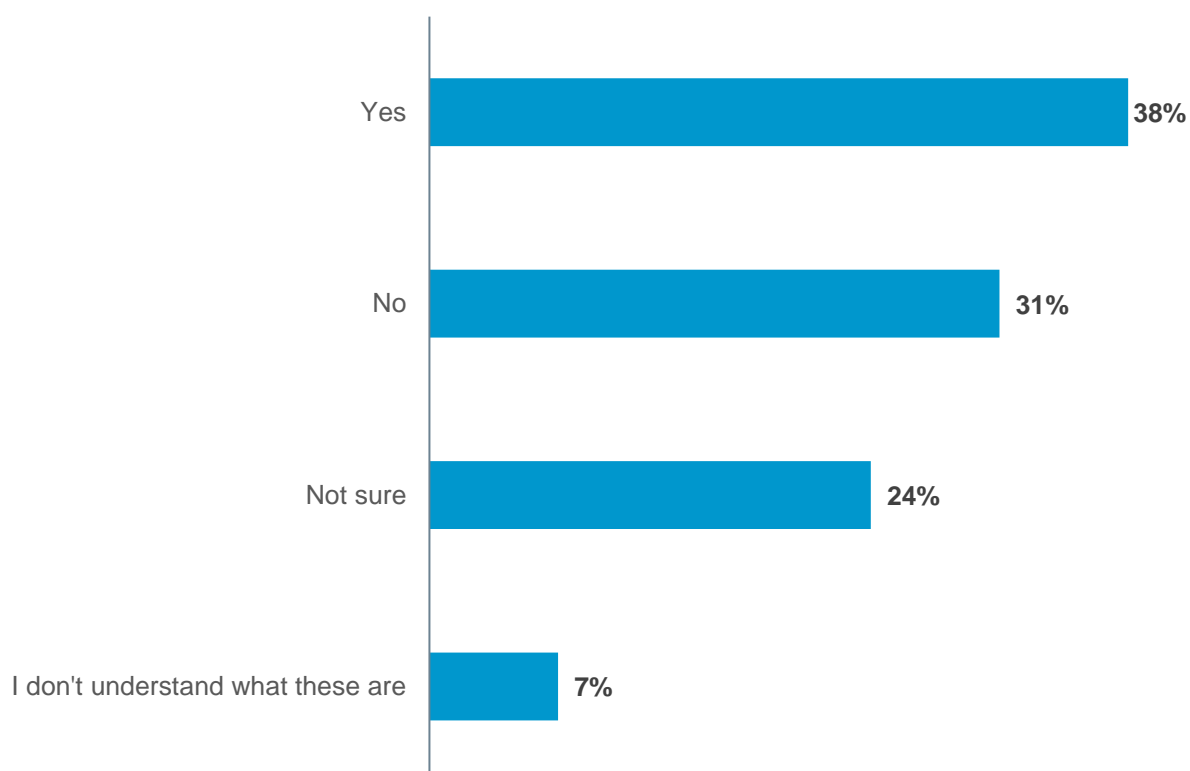
Figure 25 – Which are you able to use now and which would you like to use?
Base: Asked to all (579 / 485)



Respondents were then asked if they thought it would be a good idea for the CCG to explore the use of ‘apps’, symptom checkers and other technology to help people feel confident about making decisions about their own or their family’s health.

Almost four in ten (38%) thought that it was a good idea, but three in ten (31%) did not. A further quarter (24%) said they were not sure and 7% said they did not understand what ‘apps’ or symptom checkers were.

Figure 26 – Do you think it would be a good idea for us to explore the use of ‘apps’, symptom checkers or other technology to help people feel confident about making decisions about their own or their family’s health?
Base: Asked to all (608)



Subgroup analysis

Subgroups more likely to say that **it is a good idea to explore the use of ‘apps’, symptom checkers and other technology** (38% overall) included those who were aged 18-24 (68%) and 25-44 (51%) compared to those who were aged 45-64 (35%) and 65+ (30%)

Subgroups more likely to say that **it is not a good idea to explore the use of ‘apps’, symptom checkers and other technology** (31% overall) included those who were aged 45-64 (34%) compared to those who were aged 25-44 (22%) and 18-24 (18%)

Respondents were asked to explain their answers. Over a quarter (27%) said that they did not have smartphones, internet access or were not comfortable with technology or thought that there would be others in that position.

Qualitative feedback

In line with the survey findings, most participants were open to the idea of using technology to access health and care advice and support in some situations. Many participants had access to the internet and used technology such as tablets and smartphones.

I would use something like Skype if it was appropriate.

PPG Workshop

Some participants said that they had experience of researching matters related to their health online, but there was a low awareness of the NHS Choices Symptom Checker and the NHS111 service. Some suggested that they would trust advice they found online as long as it was NHS advice. A few had visited non NHS websites in relation to their health in the past, but did not trust the advice provided.

Some participants also felt that using technology for health related advice and support could particularly benefit patients who had mobility or disability issues and would find it difficult to attend their GP practice. These patients would be able to access support from the comfort of their own homes.

Some participants had experience of booking appointments online using their GP practice website. These participants highlighted the benefits of being able to book appointments online over booking them by telephone, such as being able to book them outside of practice opening hours.

The good thing is that online is open 24 hours, so you can go on and get an appointment at any time and don't have to wait on the phone.

PPG Workshop

Carers all agreed that using technology such as Skype, FaceTime, 'apps' and practice websites would be useful to them as it would mean that they did not have to leave the house and take the person they were caring for with them to their GP practice.

However, not all patients have access to the internet, have a smartphone or tablet, or feel comfortable using technology in relation to their health, particularly those who are elderly. These participants would rather see a doctor face-to-face at their GP practice.

If you look at national statistics, only 37% of people have a mobile phone.

PPG Workshop

Older people cannot use the internet but it's the older ones going to the doctors the most.

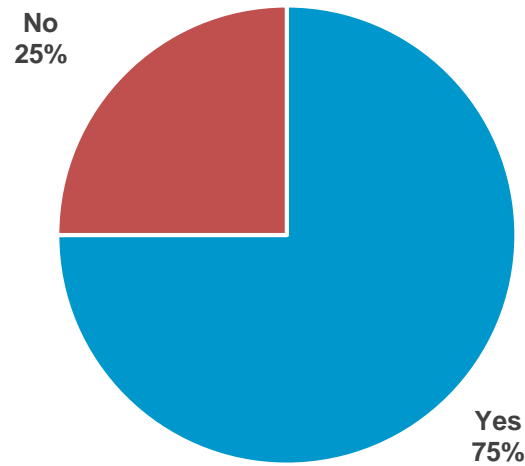
Winterton Seniors' Forum

4.6 Out of hours support

Respondents were asked if they knew how to obtain support when their practice is closed. The survey found that three-quarters (75%) did know, however, this leaves a quarter (25%) who do not know.

Figure 27 – Do you know how to obtain support when your practice is closed (Out of Hours)?

Base: Asked to all (607)



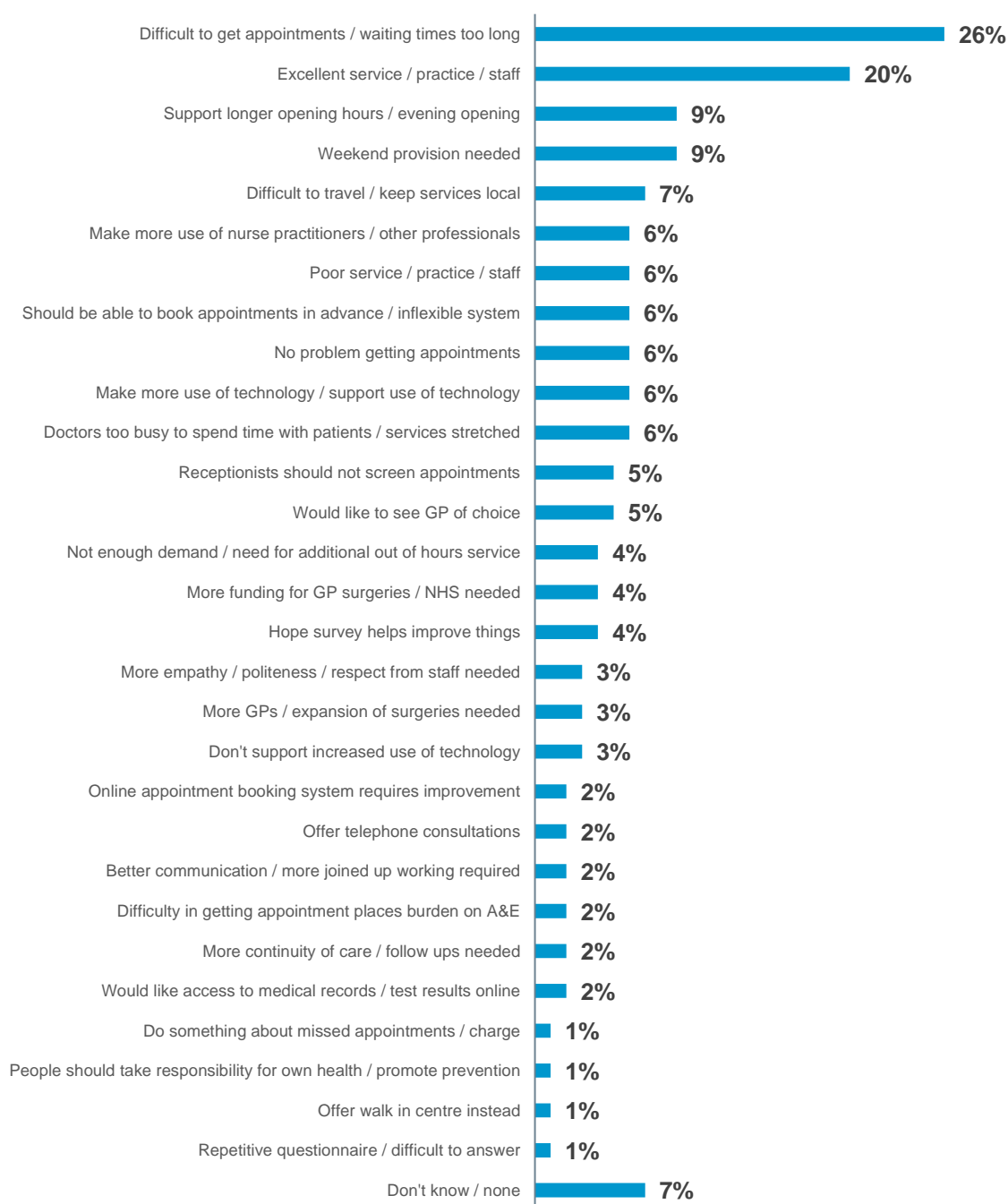
Subgroup analysis

There were no subgroup differences observed

4.7 Additional comments

At the end of the survey respondents were asked if they had any additional comments. These were grouped together and themed. A quarter of respondents (26%) said that it was difficult to get appointments or that they had to wait for a long time to get appointments. This was followed by 20% praising the excellent service or the staff at their GP practice. The full range of themes is displayed in the chart below.

Figure 28 – Please add any additional comments below that you feel are relevant to the questions within this survey
Base: Asked to all (188)



5. Conclusions

5.1 Many people find it difficult to access routine appointments at convenient times, particularly those who work

More than a third (35%) of survey respondents said it was a problem for them to see a health professional for routine appointments when it is convenient for them. This was particularly high amongst working age respondents.

The most cited reasons for finding it a problem were that there were no appointments available when people needed them (82%) and that it was difficult to fit appointments in around work commitments (53%). Participants at the events, discussions and drop-in sessions thought that people who worked full-time or had children at school found it difficult to get appointments when it is convenient. Survey respondents also complained that appointments filled up quickly and there were often none available (47%). At the end of the survey, a quarter (26%) also said that it was difficult to get appointments or that they had to wait for a long time to get appointments when they were asked if they had any further comments.

Four in ten survey respondents (39%) said that the most important thing for them when booking an appointment was fitting it around work hours.

5.2 Evening and Saturday morning appointments would be popular

The most popular times for appointments are in the evenings during the week (49%) and on Saturday mornings (41%) and these were particularly popular amongst working age respondents. Many event and discussion participants felt that GP practices should offer a six day service at least to accommodate those who work during the week or have children at school.

Current opening hours (during the week 8am to 6.30pm) were popular amongst those of retirement age (62%) and those who had a disability (47%). However, a third (33%) of all respondents said these hours were least convenient for them and this was highest amongst those aged 18-24 (43%), 25-44 (51%) and 45-64 (37%).

5.3 Although many would be willing to travel to another GP practice for a more convenient appointment, a substantial number would not

Six in ten respondents (63%) would be willing to travel to another GP practice for a more convenient appointment. However, almost four in ten (37%) would not be willing to travel to another GP practice for a more convenient appointment. This was highest amongst those aged 65 and above (49%). By contrast larger proportions of those aged 18-24 (82%), 25-44 (73%) and 45-64 (67%) would be willing to travel to another GP practice. However, event, discussion and drop-in session participants highlighted that this would be dependent on the location of the other GP practice, the time it takes to get there and availability and convenience of parking. Three in ten survey respondents (31%) also said that when accessing routine, non-urgent appointments it was most important that they see a health professional at a suitable time and day and this was again highest amongst those aged 18-24 (59%) and 25-44 (42%).

Survey respondents who would not be willing to travel to another GP practice identified their concerns as another centre or team not knowing them (53%) and travel problems (43%). These concerns were also identified by event and discussion participants. The survey also

found that a quarter of respondents (25%) usually travel to their GP practice on foot. These people would have difficulty accessing another GP practice.

5.4 Very few people would be willing to travel for more than 30 minutes to access an appointment during the evening and on weekends

The survey found that only a small proportion of respondents would be willing to travel for more than 30 minutes (7%) to access an appointment during the evening or on weekends. Four in ten (41%) said they would be willing to travel for up to 15 minutes and 52% for 16 to 30 minutes.

5.5 Most people would be willing to see a different health professional who is suitably qualified instead of their GP, however they have to be located nearby

Nine in ten (89%) survey respondents said they would be willing to see a different health professional other than their GP. However, it would be important that that the health professional is suitably equipped to deal with their condition (27% survey respondents said this was important to them when accessing routine appointments) and that patients are able to choose who they see (27% survey respondents said this was an important consideration when booking appointments). This was corroborated by event, discussion and drop-in session participants. Although the majority would be happy to see a different health professional to ease pressure on GPs, they highlighted that continuity of care was important and that patients should be able to choose who to see. However, many said they would trust advice from a GP practice receptionist as to who they should see.

The survey also found that only one in eight (12%) of those who were willing to see another health professional would be prepared to travel for more than 30 minutes.

5.6 However, some would be unwilling to see another health professional as they would not want to see someone they did not know and trust, or someone that did not know their medical history

A tenth of survey respondents (11%), however, would not be willing to see another health professional and this particularly high amongst respondents who had a disability (16%). Respondents who would not be willing to see another health professional were asked why this was. The most popular reason was they would not know them personally (30%), followed by that they would not understand their condition (23%) and uncertainty that they would have the right qualifications (21%).

5.7 Most people would prefer to speak to a GP about medications, but a nurse or other allied health professional about medical aids

Three-quarters of respondents (74%) said they would prefer to speak to a GP about medications, but this was a much smaller proportion in relation to medical aids (47%). Instead 80% of respondents would prefer to speak to a nurse or other allied health professional about medical aids, but only 42% would prefer to speak to a nurse or other allied health professional about medications.

5.8 Many people prefer to speak to a pharmacist about medications

Six in ten (63%) respondents would prefer to speak to a pharmacist about medications, but far less about medical aids (32%). Some participants from the discussions and events said they were not aware that pharmacists were able to carry out medication reviews. Many said they would consider using this service as long as the pharmacist they saw knew their medical history.

5.9 A substantial number of people, particularly younger people, are not satisfied with ways in which they can get advice from their GP practice

The survey found that over a quarter of respondents (28%) were not satisfied with ways to get advice from their GP practice. This was particularly high amongst those aged 25-44 (34%).

5.10 Many people are open to the idea of using technology to access information and advice and see the benefits, however these would not suit everyone

Almost six in ten (57%) survey respondents said they would like to use online access to their records in the future and half (50%) would like to use email to access information and advice. Four in ten would use a symptom checker (39%), or an instant messaging or a live chat facility (41%), and 37% would have appointments using video, Skype or FaceTime.

Most participants from the events, discussions and drop-in sessions were also open to the idea of using technology to access health and care advice and support in some situations. They felt increased use of technology could benefit patients who had mobility and disability issues and found it hard to get to their GP practice. However, some participants pointed out that not all patients have access to the internet, a smartphone or tablet, or feel comfortable using technology in relation to their health and would prefer to see a GP face-to-face.

5.11 A significant number of people think that developing an ‘app’, symptom checker or other technology to help people feel confident about making health related decisions would be a good idea and would use it

Respondents were asked if they thought it was a good idea for the CCG to explore the use of ‘apps’, symptom checkers and other technology to help people feel confident about making decisions about their own or their family’s health. Four in ten (38%) thought it was a good idea and this was highest amongst those aged 18-24 (68%) and 25-44 year olds (51%). The survey also found that four in ten (39%) would use a symptom checker in the future.

5.12 Although the majority of people know how to obtain support out of hours, a significant number do not

Three-quarters of respondents (75%) said they knew how to obtain support out of hours when their GP practice is closed. However, this meant that a quarter (25%) do not know.

Appendix – Questionnaire

Making Time for Everyone – easier-to-access routine family health services for the future

Survey

NHS North Lincolnshire CCG is looking for the views and experiences of local people to contribute to designing a new service specification for a contract to operate extended access GP practice services from April 2018. This is not about urgent care, which is served already by the GP Out of Hours Service.

Background

GP services are getting busier and patients tell us that they sometimes find it difficult to get an appointment with a GP. Like most areas of the country, there are difficulties in recruitment and retention of GPs and practice nurses with some approaching retirement age.

Additionally our population is ageing and more people are now managing one or more serious long term health conditions so need to see GPs or nurses more often.

The national NHS has also committed to offering general practice services over seven days. However, it would not be affordable to open up all of our GP practices seven days a week. Doing this would also make things extremely difficult for practices, as they already have problems recruiting new doctors and nurses as outlined above.

Introduction

From April 2018 additional funds will be invested to provide more routine appointments for GP services in North Lincolnshire outside normal practice opening times seven days a week. This will be in addition to any extended hours already offered by your GP practice.

The CCG needs your help to ensure that this additional investment is used wisely to meet patient demand and we would value your views on **four topics** around how you might use these additional GP extended hours services.

Timing of Extended Hours Appointments

- Given the shortage of doctors and nurses it is important that clinicians undertaking extended hours have their time fully used
- We need to know when peak use of the service is likely to occur and when there will be little demand
 - For example, would you be prepared to book an appointment early in the morning, in the evening or at the weekend?
 - Are there any times that you would not consider making an appointment?
 - Are you just as likely to book an appointment on a Sunday afternoon as a Saturday morning?
- Your answers to these questions will help us to invest additional resources to best effect

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Service Location

- It is not practical to offer additional extended hours appointments at each of our 19 GP practices
- Although you may not see a health professional from your own practice, extended hours staff will have access to your health records
- With the limited funding available it is possible that in the first year the new service could need to be provided from a single central location
- From April 2019 it is hoped to expand to at least three locations across North Lincolnshire
- We therefore will need to know how far you would be prepared to travel to attend an extended hours appointment

Remote Access to Primary Care

- To provide an additional option for accessing primary care appointments we are exploring the use of telephone and Skype consultations
- We need to know whether you would be prepared to book a remote access appointment
- In particular, would it be more convenient for you to book a remote access extended hours appointment than travelling to a central location?
- And would you be prepared to use an NHS approved app (piece of software for your mobile phone) to access health advice?

Range of Healthcare Professionals

- It is not always necessary to book an appointment to see a GP
- It may well be more appropriate for you to see an advanced nurse practitioner, a practice pharmacist or a physiotherapist
- We need to know how you feel about booking primary care appointments with a range of healthcare professionals
- In particular, would you be prepared to see a clinician other than a doctor for an extended hours appointment?

The survey will take about 20 minutes to complete, if you need more space for any of the answers please use an extra piece of paper and please reference the question number you are commenting about. If you have accessed this survey online and would prefer a hard copy version of the survey please call us on 0300 3000 563 or email nlccg.embrace@nhs.net and we will post it out to you; you can fill it in and return it to us by Freepost (no stamp required).

Or if you'd rather talk through your answers with someone over the phone, call the above number and we will make arrangements to do that with you.

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Before completing this survey you may wish to read our leaflet **Making Time for Everyone – Easier-to-access routine family health services for the future**, which gives more information about why we are talking to people.

Q 1 Thinking about the current opening hours at your GP practice, can you see a health professional for routine appointments (for example a diabetes review or you have pain in your knee that’s been there a few weeks) when it is convenient to you? *(Please tick one answer)*

| | | |
|------------------------------|--------------------------|------------------------------|
| Yes, all of the time | <input type="checkbox"/> | <i>Please answer Q3 next</i> |
| Yes, most of the time | <input type="checkbox"/> | <i>Please answer Q3 next</i> |
| No, this is a problem for me | <input type="checkbox"/> | <i>Please answer Q2 next</i> |

Q 2 If you answered ‘No’ to Q1 above, why is this difficult for you? *(Tick all that apply)*

| | | |
|--|--------------------------|--|
| No appointments available when I need them | <input type="checkbox"/> | Please comment to help us understand why you have selected the answer you have |
| Getting to the appointment – Public Transport | <input type="checkbox"/> | |
| Getting to the appointment – lift from family/friends/taxi | <input type="checkbox"/> | |
| Fitting in around work commitments | <input type="checkbox"/> | |
| Fitting in around my carer responsibilities | <input type="checkbox"/> | |
| Fitting in around school times/family responsibilities | <input type="checkbox"/> | |
| Unable to get through to the Practice to discuss my needs | <input type="checkbox"/> | |
| Unable to get an appointment because advised by Practice to go elsewhere | <input type="checkbox"/> | |
| Other – please explain | <input type="checkbox"/> | |

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| Q 3 Which of the following are the <u>most</u> suitable times for you to visit a GP practice for routine, current and/or non-urgent appointments? <i>(Please tick all applicable times)</i> | | |
|--|--------------------------|--|
| Before 8.00am | <input type="checkbox"/> | Please comment to help us understand why you have selected the answer you have |
| During the week between 8.00am and 6.30pm | <input type="checkbox"/> | |
| During the week in the evenings | <input type="checkbox"/> | |
| On a Saturday - AM | <input type="checkbox"/> | |
| On a Saturday - PM | <input type="checkbox"/> | |
| On a Sunday - AM | <input type="checkbox"/> | |
| On a Sunday - PM | <input type="checkbox"/> | |
| I don't have a preference | <input type="checkbox"/> | |
| Other – please explain | <input type="checkbox"/> | |

| Q 4 Which of the following are the <u>least</u> suitable for you? <i>(Please tick all applicable times)</i> | | |
|--|--------------------------|--|
| Before 8.00am | <input type="checkbox"/> | Please comment to help us understand why you have selected the answer you have |
| During the week between 8.00am and 6.30pm | <input type="checkbox"/> | |
| During the week in the evenings | <input type="checkbox"/> | |
| On a Saturday - AM | <input type="checkbox"/> | |
| On a Saturday - PM | <input type="checkbox"/> | |
| On a Sunday - AM | <input type="checkbox"/> | |
| On a Sunday - AM | <input type="checkbox"/> | |
| None – all are suitable | <input type="checkbox"/> | |
| Other – please explain | <input type="checkbox"/> | |

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| Q 5 What is <u>most important</u> when booking a routine, non-urgent, health care appointment? (Please tick one answer) | | |
|--|--------------------------|--|
| Distance to the appointment | <input type="checkbox"/> | Please comment to help us understand why you have selected the answer you have |
| Getting to the appointment – Public Transport | <input type="checkbox"/> | |
| Getting to the appointment – lift from family/friends/taxi | <input type="checkbox"/> | |
| Fitting in around my work hours | <input type="checkbox"/> | |
| Fitting in around my carer responsibilities | <input type="checkbox"/> | |
| Fitting in around school times/family responsibilities | <input type="checkbox"/> | |
| Seeing the health professional of my choice | <input type="checkbox"/> | |
| Other – please explain | <input type="checkbox"/> | |

| Q 6 Would you be willing to travel to a GP centre other than your own for routine, non-urgent appointments with a health professional for a more convenient appointment? (Please circle one answer) | | |
|--|----|--|
| Yes | No | Please comment to help us understand why you have selected the answer you have given |

| Q 7 - If you answered 'No' to Q6, what are your main concerns? (Tick all that apply) | | |
|---|--------------------------|--|
| Another team/centre won't know me | <input type="checkbox"/> | |
| Another team/centre won't have access to my records | <input type="checkbox"/> | |
| It would create travel difficulties for me | <input type="checkbox"/> | |
| I don't believe that other teams/centres could deliver the same quality of service | <input type="checkbox"/> | |
| Any other reasons - please explain | <input type="checkbox"/> | |

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| Q 8 Which is <u>most important</u> to you when accessing routine, non-urgent primary care appointments? (Please tick one answer) | | |
|---|--|--|
| Seeing a qualified health professional at a suitable time / day for me | | Please comment to help us understand why you have selected the answer you have given |
| Seeing a qualified health professional at a suitable location for me | | |
| Seeing a qualified health professional I know | | |
| Seeing a qualified health professional within a suitable timeframe | | |
| Seeing a qualified health professional who is equipped to deal with my condition/s | | |
| Something else – please explain | | |

| Q 9 How do you usually get to your usual GP practice? (Please tick one answer) | | |
|---|--|--|
| By car | | |
| On foot | | |
| By bus | | |
| By taxi | | |
| Something else – please explain | | |

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Q 10 Do you require support when attending an appointment? *(Please circle one answer)*

| | | |
|-----|----|--|
| Yes | No | If yes, please tell us what support you need |
|-----|----|--|

Q 11 How long would you be willing to spend travelling to a routine, non-urgent GP appointment at evenings or weekends within North Lincolnshire? *(Please tick one answer)*

| | | |
|----------------------|--------------------------|--|
| Less than 15 minutes | <input type="checkbox"/> | |
| 16-30 minutes | <input type="checkbox"/> | |
| 31-45 minutes | <input type="checkbox"/> | |
| 46 mins to 1 hour | <input type="checkbox"/> | |
| More than an hour | <input type="checkbox"/> | |

Q 12 There are other professionals who can deal with some problems that patients might traditionally have seen their GP for in the past. For example, a physiotherapist could see you for back or knee problems. A pharmacist could see you for your regular medication or minor ailments.

Would you be willing to see a different health professional, who is suitably qualified, instead of your GP?

(Please circle one answer)

| | | |
|-----|----|--|
| Yes | No | Please comment to help us understand why you have selected the answer you have given |
|-----|----|--|

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Q 13 If you answered ‘Yes’ to Q12, how long would you be willing to spend travelling to see a suitably qualified health professional instead of your GP within North Lincolnshire?
(Please tick one answer)

| | | |
|----------------------|--------------------------|--|
| Less than 15 minutes | <input type="checkbox"/> | |
| 16-30 minutes | <input type="checkbox"/> | |
| 31-45 minutes | <input type="checkbox"/> | |
| 46 mins to 1 hour | <input type="checkbox"/> | |
| More than an hour | <input type="checkbox"/> | |

Q 14 If you answered ‘No’ to Q12, what concerns you most about seeing another health professional?
(Please tick one answer)

| | | |
|---|--------------------------|--|
| Not sure they have the right qualifications | <input type="checkbox"/> | |
| They don’t know me personally | <input type="checkbox"/> | |
| They don’t understand my condition | <input type="checkbox"/> | |
| I wouldn’t trust any professional other than a GP | <input type="checkbox"/> | |
| It may cost more if I am given a prescription | <input type="checkbox"/> | |
| Other - please explain | <input type="checkbox"/> | |

Q 15 If you wanted advice about any medications or medical aids, who would you prefer to speak to?
(Tick all that apply)

| | A GP | Nurse or other allied health professional such as a physiotherapist | Pharmacist | NHS Choices / NHS 111 | Please comment to help us understand why you have selected the answer you have |
|--------------|--------------------------|---|--------------------------|--------------------------|--|
| Medications | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Medical aids | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

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Q 16 Are you satisfied with the ways in which you can get advice from your Practice at the moment? *(Please circle one answer)*

| | | |
|------------|-----------|---|
| Yes | No | Please comment to help us understand why you have selected the answer you have given. |
|------------|-----------|---|

Q 17 Please consider the following ways of accessing information or advice from your GP surgery team. Which are you able to use now and which would you like to use? *(Tick all that apply)*

| | Use Now | Would like to Use |
|---|---------|-------------------|
| Face to face | | |
| Video/Skype appointments/FaceTime | | |
| Telephone appointments | | |
| Instant messaging/live chat facility | | |
| Email | | |
| Practice website | | |
| Symptom checker to provide advice and recommendation about how you could treat yourself or where you should seek treatment if necessary | | |
| Online access to your record | | |

Q 18 Do you know how to obtain support when your Practice is closed (Out of Hours)? *(Please tick one answer)*

| | |
|------------|--|
| Yes | |
| No | |

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Q 19 Do you think it would be a good idea for us to explore the use of “apps” (small programmes you can use on your mobile phone), symptom checkers or other technology to help people feel confident about making decisions about their own or their family’s health?
(Please tick one answer)

| | | |
|-----------------------------------|--|--|
| Yes | | Please comment to help us understand why you have selected the answer you have given |
| No | | |
| Not sure | | |
| I don’t understand what these are | | |

Q 20 Please tell us which GP Practice you are registered with as a patient *(You don’t have to answer this if you would prefer not to)*

Q 21 Please add any additional comments below that you feel are relevant to the questions within this survey.

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Equality and Diversity & You

The following questions are about equality, diversity and about you. Information will be used for equality and diversity monitoring purposes only.

You are under no obligation to provide this information

Q 22 We want to shape healthcare services around the different needs of our population (For example: Race, Gender, Disability, Age, Sexual Orientation & Religion and Belief)

Is there anything you think we need to consider in relation to the diverse needs of local people? (Please tick one answer)

| | | |
|-------|--------------------------|------------------------------------|
| Yes | <input type="checkbox"/> | |
| No | <input type="checkbox"/> | |
| Other | <input type="checkbox"/> | Other - Please explain your answer |

This section is optional and you do not have to answer the questions below. However, these questions are to help us to find out whether our engagement is fair and inclusive and reaches the whole population of North Lincolnshire.

About you

Q 23 In what capacity are you responding?
(Please tick one answer)

| | |
|--------------------------|----------------------------|
| <input type="checkbox"/> | Member of the public |
| <input type="checkbox"/> | Patient or community group |
| <input type="checkbox"/> | Patient Carer |
| <input type="checkbox"/> | Partner organisation |
| <input type="checkbox"/> | Staff Clinician |

Q 24 What is the first part of your postcode?

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Q 25 To which group do you consider you belong?

| | |
|--------------------------|---|
| <input type="checkbox"/> | White - British |
| <input type="checkbox"/> | White - Irish |
| <input type="checkbox"/> | White - Any other White background |
| <input type="checkbox"/> | Mixed - White and Black Caribbean |
| <input type="checkbox"/> | Mixed - White and Black African |
| <input type="checkbox"/> | Mixed - White and Asian |
| <input type="checkbox"/> | Mixed - Any other Mixed background |
| <input type="checkbox"/> | Asian or Asian British - Indian |
| <input type="checkbox"/> | Asian or Asian British - Pakistani |
| <input type="checkbox"/> | Asian or Asian British - Bangladeshi |
| <input type="checkbox"/> | Asian or Asian British - Any other Asian background |
| <input type="checkbox"/> | Black or Black British - Caribbean |
| <input type="checkbox"/> | Black or Black British - African |
| <input type="checkbox"/> | Black or Black British - Any other Black background |
| <input type="checkbox"/> | Chinese |
| <input type="checkbox"/> | Prefer not to say |

Q 26 Are you...?

| | |
|--------------------------|-------------|
| <input type="checkbox"/> | Male |
| <input type="checkbox"/> | Female |
| <input type="checkbox"/> | Transgender |

| | |
|--------------------------|------------------------|
| <input type="checkbox"/> | Prefer not to say |
| <input type="checkbox"/> | Other (please specify) |
| <input type="checkbox"/> | |

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Q 27 Do you consider yourself to be...?

| | |
|--------------------------|-------------------------|
| <input type="checkbox"/> | Heterosexual / Straight |
| <input type="checkbox"/> | Gay / Lesbian |
| <input type="checkbox"/> | Bisexual |
| <input type="checkbox"/> | Prefer not to say |

Q 28 Which of the following age ranges are you in?

| | |
|--------------------------|-------------------|
| <input type="checkbox"/> | 18-24 |
| <input type="checkbox"/> | 25-44 |
| <input type="checkbox"/> | 45-64 |
| <input type="checkbox"/> | 65-74 |
| <input type="checkbox"/> | 75-84 |
| <input type="checkbox"/> | 85+ |
| <input type="checkbox"/> | Prefer not to say |

Q 29 What is your religion or belief?

| | |
|--------------------------|-----------|
| <input type="checkbox"/> | Christian |
| <input type="checkbox"/> | Buddhist |
| <input type="checkbox"/> | Jewish |
| <input type="checkbox"/> | Muslim |
| <input type="checkbox"/> | Sikh |

| | |
|--------------------------|----------------------|
| <input type="checkbox"/> | Hindu |
| <input type="checkbox"/> | No religion |
| <input type="checkbox"/> | Prefer not to say |
| <input type="checkbox"/> | Other Please specify |

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Q 30 Do you consider yourself to have a disability?

Please tick the most appropriate below

| | |
|--------------------------|---|
| <input type="checkbox"/> | No disability |
| <input type="checkbox"/> | Physical impairment such as difficulty moving your arms or mobility issues |
| <input type="checkbox"/> | Wheelchair user |
| <input type="checkbox"/> | Sensory impairment such as being blind or having a visual impairment |
| <input type="checkbox"/> | Sensory impairment such as being deaf or having a hearing impairment |
| <input type="checkbox"/> | Mental health condition such as depression, dementia or schizophrenia |
| <input type="checkbox"/> | Long-standing illness or health condition (e.g. cancer, HIV, diabetes, chronic heart disease or epilepsy) |
| <input type="checkbox"/> | Learning disability or difficulty (e.g. Dyslexia) or cognitive impairment (e.g. autistic spectrum disorder) |
| <input type="checkbox"/> | Prefer not to say |

Thank you for your time spent completing the survey. Your views & comments are appreciated.

*If you wish to post this completed survey to us please use the following **Freepost** address:*

***FREEPOST RSSJ-SABB-KKUZ
North Lincolnshire CCG Primary Care
5 Saxon Court
Europa Park
Grimsby
DN31 2UJ***