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North of England  
Commissioning Support

# Communications and Engagement Report

*Fens Medical Centre*

*Hartfields Medical Practice*

*Wynyard Road Primary Care Centre*

6 July 2016



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## Introduction

Fens Medical Centre, Hartfields Medical Practice and Wynyard Road Primary Care Centre are three of the 15 practices in the Hartlepool area and are based at the following sites;

- Fens Medical Centre, 434 Catcote Road, Fens Estate, Hartlepool, TS25 2LS
- Hartfields Medical Practice, Hartfields Extra Care Village, Hartfields Manor, Hartlepool, TS26 0US.
- Wynyard Road Primary Care Centre, Wynyard Road, Hartlepool, TS25 3DQ

Each practice has a contract which delivers essential, additional and enhanced services to a registered list of patients under an Alternative Provider Medical Services (APMS) contract. These contracts have been extended several times at various points. They are now due to end on 31 March 2017.

In-line with NHS England policy entitled 'Managing the end of time-limited contracts for primary medical services', each contract for Fens, Hartfields and Wynyard Road practices has been reviewed, in order to determine:

- Quality of the existing service;
- The need for each service in Hartlepool.

In 2014, an extensive engagement exercise was undertaken with stakeholders and a survey was sent to heads of households at the address of where each patient from the three practices was registered. A considerable amount of feedback was received both from stakeholders and from patients in support of their local practices although some did highlight areas of the services where improvements could be made.

On the basis of this feedback:

- the contract for Hartfields Medical Practice was extended until 31 March 2016;
- the contracts for Fens Medical Centre and Wynyard Road Primary Care Centre were extended to enable a more extensive engagement exercise to take place on the future primary care needs of patients registered at both practices.

Since then, NHS England has been out to the market for the provision of services for Hartfields Medical Practice. The service was offered to the market either as a new 5 year APMS contract or as a branch of an existing GMS/PMS contract. This exercise was unsuccessful. There were no bids from existing GMS/PMS contractors and only one APMS contractor. Therefore it was agreed that the current contract would be extended until 31 March 2017 to align with Fens Medical Centre and Wynyard Road Primary Care Centre contracts. This is because an increased patient population might be a more attractive procurement opportunity.

On 01 April 2016, NHS Hartlepool and Stockton on Tees Clinical Commissioning Group (the CCG) assumed responsibility for the commissioning of primary medical care services and is working closely with NHS England to determine the future of the three practices. The options



now available to NHS England and the CCG are:

1. Re-procuring and letting a new contract for each service on a like-for-like basis for each practice
2. Re-procuring a similar service but operated under a different service model (e.g. one contract with two or three sites)
3. Ending the contracts and supporting patients to register with other nearby practices.

This last option is unlikely because

- The practices serve a combined patient list of 7,168 patients with a high degree of health need: from an overall perspective, the health of people in Hartlepool is generally poorer than the England average. There have been changes in the registered list sizes since the initial desktop reviews were carried out which may indicate a growing level of demand.
- Planned housing development may lead to the need for additional general practice capacity in these areas in the future. There are a number of planning applications which have been approved or are pending which may result in an additional 208 houses being built south of Elwick Road, 1501 houses being built in the Rural West ward area, 1230 houses in Fens and Rossmere ward, 297 houses in Hart ward and 264 houses in Seaton ward. In addition there is limited public transport to the area where Hartfields Medical Practice is based.

## Can the current practices expand?

Potential to expand has been looked at – this involves assessing whether each of the current buildings for the practices have the space and are able to see a larger number of patients

- The Fens Medical Practice is not able to expand on the existing site
- Hartfields is not able to expand on the existing site
- Wynyard Road is able to expand its service on the existing site, but has poor parking availability and there is limited public transport in the area

## About each service

### *Fens Medical Centre*

The Fens Medical Centre is 0.39 miles away from Wynyard Road Primary Care Centre.

It delivers essential, additional and enhanced services to a registered list of 2,729 patients as at 1 April 2016 under an Alternative Provider Medical Services (APMS) contract.

The contract was originally commissioned under the Equitable Access to Primary Medical Care Scheme (EAPMC), and the contract was awarded to Gatehouse Limited. The contract commenced on 1 May 2008 for a period of five years. The contract was due to expire on 30 April 2013 and was reviewed in 2012 to determine future commissioning



intentions in the area. Since 2012, the contract has been extended several times.

Fens and Rossmere ward (where Fens is situated) has some social and health statistics which are better than the Hartlepool average.

There are also housing developments in the local area of the Fens practice which have either already been approved or are pending.

### ***Hartfields Medical Practice***

Hartfields Medical Practice is located in Hartlepool and delivers essential, additional and enhanced services to a registered list of 2,417 patients (as at 01 April 2016) under an Alternative Provider Medical Services (APMS) contract.

The contract was originally commissioned under the EAPMC scheme and the contract was awarded to IntraHealth Limited. In 2015/16 NHSE undertook an unsuccessful procurement process to secure a new contract for this practice.

Fens Medical Practice and Wynyard Road Medical Practice are within 3.29 and 2.92 miles of Hartfields respectively.

### ***Wynyard Road Primary Care Centre (PCC)***

The Wynyard Road Primary Care Centre (PCC) is a GP practice in Hartlepool that delivers essential, additional and enhanced services to a registered list of 2,022 patients as at 01 April 2016 under an Alternative Provider Medical Services (APMS) contract.

The contract was originally commissioned under the Equitable Access to Primary Medical Care Scheme (EAPMC), and the contract was awarded to IntraHealth Limited. The contract commenced on 01 May 2008 for a period of five years. The contract was due to expire on 30 April 2013 and was reviewed in 2012 to determine future commissioning intentions in the area. Since 2012, the contract has been extended several times.

Manor House ward, where Wynyard Road is situated, is amongst the 5% of the most deprived wards nationally.

## Approach to engage and then consult on potential models of delivery of primary care in each area

There are two stages to involving people in this process about how the model is developed and decided upon.

Phase 1 – pre-engagement (developing the model) and the subject of this report – is a targeted piece of engagement to check that the views on the service and what could be improved are still current. Questions were included in this stage about patient preferences for location and opening times and how important they consider continuity to be.

It was intended for this phase to provide reassurance to patients that GP services will continue, and to capture their views and answer any questions or concerns. The approach was sense-checked with Overview and Scrutiny members, Healthwatch Hartlepool and local councillors and the Primary Care Committee and through individual discussions with these stakeholders.

Phase 2 will be a formal consultation on the model developed as a result of phase 1.

## Summary of activity

Letters (Appendix 1) were sent to patients over 16 years of age registered with each practice to inform them of what was happening with the contract for these practices and the opportunity provided to give their views as part of the process. This also included information on how to feed back views (Appendix 2).

A survey (Appendix 3) was included with the letters and information, along with a freepost address for returning the survey and how to access the survey on-line. A telephone number was given to support anyone requiring further help to complete the survey. Details of the patient information sessions were also provided, together with an opportunity for patients to ask to participate in a focus group if they wanted to.

A stakeholder briefing (Appendix 4) was sent to local stakeholders giving information about how patients were being engaged, the background to the process and when the information sessions were taking place. A poster detailing how to register for the patient information sessions was sent to the practice to display. This was also sent to local pharmacies. The engagement activity was also published in the Hartlepool Mail on 6 June 2016.

Three patient information sessions (Appendix 5) were held in local community venues, where patients were provided with an opportunity to ask questions, make comments or express any concerns.

To ensure a minimum number of returned surveys, experienced researchers collected 350 surveys from patients of each practice, approaching people in each locality during the first fortnight of engagement to find out if they had completed the survey and asking them for their responses to the survey if they had not.

Patients and local stakeholders were promised they would receive further information about the next steps to secure their primary care service when the engagement period was over. Feedback from this first phase of engagement would be included with all other information used to develop options for the practices. A formal consultation would take place during July and August 2016 on the, as yet undecided, model for primary care in the area.

## Communications and engagement objective(s)

- To inform patients of the situation, to determine the sustainability of what is currently three practices with relatively small list sizes, and to reassure them that they will continue to be able to access primary care services
- To gather (sense check) what is already known about patient experience, suggestions, questions and concerns in a systematic way and respond to them
- To meet NHS legal duties for engagement, equality duties and best practice engagement and communications
- To counteract concerns that decisions will be made on purely financial/resource



terms rather than reflecting on patient concerns/feedback.

## Stakeholder engagement

MPs	Iain Wright MP	Briefing (+call)
Overview & Scrutiny Committee role Chair and Officer	Part of the Audit and Governance Committee  Councillor Ray Martin-Wells – Chair Joan Stevens - Officer	Briefing (+informal meeting)
Health and Wellbeing Board	Facilitator Amanda Whittaker Chair of the Board: Cllr Christopher Akers-Belcher	Briefing
Healthwatch	Margaret Wrenn Chair Christopher Akers-Belcher Manager	Briefing (+call)
LMC	Janice Foster Dr Julie Birch	Briefing
Local Councillors	<u>Fens &amp; Rossmere</u> Cllr Bob Buchan Cllr Alan Clark Cllr Jim Lindridge  <u>Hart</u> Cllr Paul Beck Cllr David Riddle Cllr Jean Robinson  <u>Manor House</u> Cllr Stephen Akers-Belcher Cllr Allan Barclay Cllr Marjorie James	Briefing

## Practice engagement

Representatives from NHS England have continued ongoing discussions as part of their day to day contract management with the practice. Copies of all patient letters, information and posters advertising patient information session opportunities were sent direct to the primary care lead or practice manager for each provider prior to the letter and information going to patients.



## Feedback from Patient Engagement in 2014

### *Engagement of patients of Fens Medical Centre in 2014*

Strong views were raised by stakeholders and patients regarding any potential loss of the Fens Medical Centre.

The views of 655 patients registered at the practice were represented in the survey to heads of households (23.5% of the number of patients on the registered list at the time).

**Positive comments:** Many positive comments (429) in response to accessibility of The Fens Medical practice outnumbered negative comments (83). Accessibility was one of the main reasons given when patients were asked what they value most about The Fens Medical Practice and why some patients moved to this practice. Quite a few things were listed that people felt made The Fens accessible, including: convenience/ closeness to home/ walkable distance; same day appointments/good appointments system; plenty of free car parking; extended opening hours and Saturday opening; friendly staff; and the practice is close to other conveniences such as the pharmacy and local shops. A number of respondents questioned the description of the practice in the consultation letter as not visible/accessible as they felt this location was very good, being near the shops/pharmacy and all being laid out on one floor.

**Accessibility:** patients thought that accessibility could be improved with: extended opening hours; making it easier to get a GP appointment and making sure appointments ran on time. A few people also suggested that a faster turnaround and more flexibility with access to appointments and the repeat prescriptions service would be valued.

Accessibility was very much an important consideration for choosing an alternative practice.

**Leave it as it is:** there were 361 comments saying how much the Fens service is valued and should be 'left as it is'. They stated that they could think of nothing that would improve the service offered by The Fens Medical Practice or expressed the wish to stay registered with this GP practice. Many asked for the practice to remain open due to it being close to where they live and many also complimented the service, using words such as 'excellent' and 'brilliant' to describe it.

**Patient experience:** over half of people responding (238) offered positive comments about patient experience. In comparison, only a handful (23) of negative comments were put forward. The most common words used to describe the practice were 'friendly', 'helpful', 'professional' and 'pleasant'. Words such as 'clean and tidy', 'helpful', 'understanding', and 'dedicated' were used to describe the workforce and the patient experience in general. People also felt that its smaller size meant that patients were known, were offered continuity of care and treated as individuals. Nearly half of the people suggesting improvements to patient experience suggested that larger premises would help.

**Quality of care:** There was considerable praise for the quality of current service. Approximately one third of all people responding (146) were satisfied with only a handful of concerns raised (5). The words 'individual', 'dignity', 'respect', 'caring', 'compassionate', 'extra mile' and 'friendliness' were used. Many felt confident with the ability of practice staff to prioritise urgent cases and the skill of the doctors in diagnosing conditions. Some people who had had a serious health condition



themselves or had a relative with a serious health condition shared their personal stories about what had made them feel so well cared for.

**Continuity of care:** people praising the continuity of care were in the minority (13) with almost 9 times more comments (97) focusing on the need to improve this, with some specifically mentioning the need to have a female doctor available and the need to cut down on use of locums.

**Additional services:** only a very small number of people (9) stated that they had moved to The Fens Medical Practice due to the specific services that were offered. These are listed below. One person required a Type 2 Diabetes clinic and would have liked this to be encompassed with their new practice.

### *Engagement of patients of Hartfields Medical Practice in 2014*

Previous engagement (2014) showed patients and stakeholders of Hartfields Medical Practice valued the services and were strongly supportive of keeping the practice as it is.

The views of 1021 people were represented in the survey to households (47% of the number of patients on the registered list at the time of the survey).

**Leave the surgery as it is:** respondents (719) could think of nothing that would improve the service offered by Hartfields or expressed the wish to stay registered with this GP practice. Many asked for the practice to remain open due to it being close to where they live, to delay the decline of the area and their perception of the quality and accessibility of alternative practices.

**Accessibility:** the ease of access of locality and to appointments was the main reasons given by patients (535) when asked why they moved to Hartfields and what they now value most about it. Although 71% accessed the surgery by car and valued the free, ample parking, the elderly and disabled population valued the benefit of locality and access and perceived that they would feel the impact of change more, especially those living in the attached retirement village.

Quite a few things were listed that people felt made Hartfields accessible, including: ample/free parking; close to home/not needing to rely on public transport; same day appointments/good appointments (and online) system; disabled access; and the practice being linked to the retirement village. Patients thought that accessibility could be improved with: extended opening hours; making it easier to get a GP appointment; parking and making sure appointments ran on time. Some of these improvements had only recently become a problem and some thought that they were easily rectified where some refuted the fact that parking is a problem. A few people also suggested that a faster turnaround of results and more flexibility the repeat prescriptions service would be of benefit.

**Patient experience:** words such as 'personal touch', 'helpful', 'willing', 'listen', 'irreplaceable', 'friendly', and 'clean' were used (376 patients) to describe the workforce and the patient experience in general. A few patients identified improvements to workforce empathy and training needs which are covered in quality of care. Some also identified improvements that could be made around the layout of reception in relation to privacy.

**Quality of care:** Hartfields Medical Practice was praised by patients (322) for the quality of current service including thoroughness of examination and diagnosis (including



registration health check), treatment of long term conditions and the expertise of the doctors. 41 people stated they had moved to Hartfields based on its local reputation and words such as 'excellent', 'award winning', and 'reputation worthy' and 'professional' were used to positively describe it. Seven people were not in agreement and encouraged improvements in prescription and test result processes.

**Continuity of care:** about two thirds of comments on continuity care appreciated seeing their own doctor for each visit, whilst the remainder thought that this was an area for improvement. Patients wanted to see more permanent doctors with less reliance of locums. There were positive comments but nearly half of the patients responding (195) wanted assurance that their care plan would continue with any new practice.

**Additional services:** additional services at the practice were commented on positively about additional services offered. There were 107 comments by people saying they had moved to Hartfields due to the different services that were offered. Below are some examples of the current services offered that are valued. All of the improvements suggested related to how a local pharmacy would improve their experience of Hartfields.

#### *Engagement of patients of Wynyard Road Primary Care Centre in 2014*

Previous engagement showed that there were no concerns that were specifically raised regarding the future of Wynyard Road practice, however the number of responses was much lower. People were supportive of keeping the current practice

The views of 247 people were represented in the survey to households (13% of the number of patients on the registered list at the time of the survey, a very low response rate).

**Accessibility:** accessibility was a main reason given (by 112 patients) for the value attributed to the service provided by Intrahealth Wynyard Road Primary Care Centre.

A few things were listed that people felt made Wynyard Road accessible. The most popular reason was the ease of getting an appointment. A few people mentioned how friendly and helpful the staff are when making appointments. A few also mentioned that appointments tend to be on time. Many people also liked the convenience of it being close to where they live and some mentioned the usefulness of the pharmacy being close-by.

The small number of people that suggested improvements mostly mentioned that access to appointments and the timeliness of appointments could improve.

Accessibility was very much an important consideration for choosing an alternative practice and is covered later in the report.

**Leave the surgery as it is:** many patients (120) said how much the Wynyard Road service is valued and should be 'left as it is'.

They could think of nothing that would improve the service offered by Wynyard Road or expressed the wish to stay registered with this GP practice. A few people expressed concern that politicians and NHS managers should be wishing to close the practice down.

**Patient experience:** over a third of people responding (90) offered positive comments about patient experience. The majority of comments referred to the workforce and words such as 'friendly', 'helpful' and 'listened' were used most. People also valued the responsiveness of the GP practice when help is needed. In comparison, there were only a handful of negative comments (6) some of which related to workforce attitude.

**Quality of care:** approximately one quarter (63) of the comments praised the quality of care and only a small number of concerns about quality were fed back (9). The small number of negative comments mostly related to diagnosis or staff attitude. All of the staff were complimented within the positive comments and the words 'caring', 'helpful', 'listen', 'professional' and 'friendly' were used.

**Continuity of care:** there were a small number (37) patients who wanted to see continuity of care improved, with a number (5) of positive comments. Most people felt that more GPs were needed at the practice. A few comments related to the need for a female doctor and being able to see the same doctor. A handful of people (5) praised the continuity of care received from the staff and doctors.

**Additional services:** these were commented on by half a dozen people (6) with only 2 negative comments.

## How this information has been used

As a result of the views expressed by patients of the practices and local stakeholders about these primary care services:

- Information about the quality of care and any specific issues were fed back directly to the practices.
- Fens Medical Centre and Wynyard Road Primary Care Centre contracts were extended temporarily while a provider for the Hartfields Medical Practice was sought.
- NHS England then went to the market to try and procure a standalone service for the Hartfields Medical Practice. This has been unsuccessful.

# Patient Engagement 2016

## Patient Information Sessions

Patient information sessions were held in each practice area as follows:

Session 1: Wednesday 22 June 2016 attended by 4 patients and 2 councillors.

5.30pm – 6.30pm Throston Youth Project (Formerly Boys Welfare Centre), Wiltshire Way, Hartlepool, TS26 0TB

Session 2: Monday 27 June 2016 attended by 6 patients and 2 councillors.

10.00am – 11.00am Rossmere Youth Centre, Rossmere Way, Hartlepool, TS25 5EB

Session 3: Thursday 30 June 2016 attended by 6 patients.

6.00pm – 7.00pm Owton Manor Community Centre, Wynyard Road, Hartlepool, TS25 3LQ

Key feedback was concern that:

- the local residents' associations wanted to be more involved in this engagement exercise;
- people were concerned about older people, those with long-term conditions being engaged in the process;
- there were points raised about people being able to complete a survey and some comments about how attendees thought that the letter and questions were confusing;
- the local Patient Participation Groups would have liked to be involved as a group in this engagement exercise;
- there was concern about the impact of closure on accessing appointments in other practices; and
- the development of local housing in the area and how this would affect accessibility of appointments and services..

Feedback from these sessions is included in Appendix 5.

## Feedback from the focus group

A focus group was organised and facilitated by Groundwork North East and Cumbria and took place on the morning of 30 June 2016. People were asked if they were interested in participating in the focus group via the patient letter and information sent to each patient over 16 in each practice.

Three people attended.

Key points from the feedback were the support for continuing with Hartfields and the concern patients have about the whole process. A full copy of the notes from this session is included in



## Feedback from Healthwatch Hartlepool on behalf of a practice patient participation group

A draft report has been submitted by the chair of the Hartfields Patient Participation Group (PPG), written by Healthwatch Hartlepool in respect of the ongoing engagement with patients of the practice. Healthwatch and the PPG asked patients for their views. This is following concerns that were raised by the Patient Participation Group in relation to communication was received by patients from NHS England in November 2015.

They spoke to 43 patients about the letter from NHS England and commissioning timetable, and asked people to complete a survey. This engagement took place over a two-day period in December 2015.

The report concludes that

“ 4.1 Communications from NHS England to patients of the Hartfields Medical Practice regarding the process could have been clearer. A significant group of patients commented that they were either unaware that the recommissioning process was taking place or that after reading the patient letter from NHS England they were still unclear about the process and the potential implications for patients.

“4.2 There is still real concern amongst some patients (and particularly those who live in Hartfields Retirement Village) that the Centre will either close or relocate as a result of the current procurement exercise.

“4.3 Overall, patients are extremely happy with the quality of service they receive from Hartfields Medical Practice although significant concerns were raised about the lack of a permanent G.P and the subsequent use of locum doctors. Also, problems were highlighted around accessing same day appointments. It should however be noted that all feedback regarding consultations with locum GP's was very complimentary.

“4.4 The staff team at Hartfields Medical Practice is clearly held in very high regard by patients, as evidenced by frequent positive comments. Patients clearly do not want to lose current nursing and reception staff teams as a result of the procurement exercise.”

The recommendations are that the findings from the report are noted by NHS England, Hartlepool and Stockton CCG and those involved in the current service recommissioning process.

## Survey response numbers

The letters were sent to all patients in each practice aged over 16 at the time of the engagement period.

The total number of responses received by the close of the survey period was 2,596. Response rates varied between just under 29% from Wynyard Road patients, just over 38% from Hartfields patients and over 40% from Fens patients.

Methods	How surveys were returned			Response rates				
	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Online	104	1.46	40	1.46	48	2.01	16	0.80
Returned by patients	1442	20.22	718	26.18	512	21.41	212	10.62
Through independent researchers	1050	14.73	350	12.76	350	14.64	350	17.54
<b>Total response rates (calculated on numbers of patients sent letters in each practice)</b>	<b>2596</b>	<b>36.41</b>	<b>1108</b>	<b>40.39</b>	<b>910</b>	<b>38.06</b>	<b>578</b>	<b>28.96</b>

Total number of letters sent to each practice:

Fens	2743
Hartfields	2391
Wynyard Road	1996
Total	7130

### All percentages unless relate to

**The overall number of responses – 2956;**

**Fens – out of the 1108 surveys returned;**

**Hartfields – out of 910 surveys returned; and**

**Wynyard Road – out of 578 surveys returned.**

**This is to ensure the proportion of responses for each question is comparable**

Responses were made to the survey on-line, through paper copies sent via the Freepost address and through independent researchers commissioned to seek out patients from each practice closeby to the location of those practices. These were uploaded onto the online survey portal (two separate collectors were used to distinguish between the two methods). Paper copies were by far the most effective method for the practices of Fens and Hartfields, whereas the independent researchers required target of 350 patient surveys from Wynyard Road was more than the number returned by patients through the post.

Not all respondents chose to answer all the questions in the survey. Some patients made more than one comment in response to some questions, so total number of comments may exceed the total number of patients responding to each question in some cases.

A summary of the characteristics of people taking part in the survey, such as age, gender and ethnicity, is set out below. As there was potential to identify individuals from the patient information sessions, details of individuals were not recorded.



## Survey responses

### Question 1: In general, how long does your journey take from home to the current site of your GP service (door to door)?

The majority of patients responding to the survey reported that they take less than 15 minutes to get to the location of their practice.

Answer Options	Overall		Fens		Hartfields		Wynyard Road	
		%		%		%		%
Less than 15 minutes	2250	86.67	949	85.65	816	89.67	485	83.91
Up to 30 minutes	293	11.29	131	11.82	80	8.79	82	14.19
More than 31 minutes to 1 hour	32	1.23	18	1.62	7	0.77	7	1.21
More than 1 hour	1	0.04	0	0.00	0	0.00	1	0.17
<b><i>answered question</i></b>	<b>2576</b>	<b>99.23</b>	<b>1098</b>	<b>99.10</b>	<b>903</b>	<b>99.23</b>	<b>575</b>	
<b><i>skipped question</i></b>	<b>20</b>	<b>0.77</b>	<b>10</b>	<b>0.90</b>	<b>7</b>	<b>0.77</b>	<b>3</b>	<b>0.52</b>

## Question 2: How do you travel there?

Around half of Hartfields and Wynyard Road patients said they walk to the practice. A large majority of Fens patients walk to their practice. Hartfields patients had a larger proportion of patients responding who drive to their practice (just under half). In Wynyard Road, a quarter of the patients responding drive to the practice.

Answer Options	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Walk	1432	55.72	678	62.09	435	48.17	319	55.48
Drive in my own car	921	35.84	357	32.69	417	46.18	147	25.57
With a friend or relative in their car	209	8.13	73	6.68	68	7.53	68	11.83
By bus	155	6.03	66	6.04	37	4.10	52	9.04
Other (please specify)	88	3.42	22	2.01	56	6.20	10	1.74
<b><i>answered question</i></b>	2570	99.00	1092	98.56	903	99.23	575	99.48
<b><i>skipped question</i></b>	26	1.00	16	1.44	7	0.77	3	0.52

## Other ways people described travelling to the surgery

Comments from patients responding to all the surveys relate to use of a taxi, needing support and accessibility because of the need to use a wheelchair or a scooter and a few commenting that the patient is housebound so this question was not relevant to them. There was also a comment about lack of public transport to get to their surgery.

### Question 3: What is the most important thing to you about the location of the practice

The majority of patients responding to the survey from each practice stated the most important thing is being able to walk to the practice. Nearly a quarter of the responses specified a distance from home.

There were a number of patients responding who made comments about what would affect the distance they travel to their practice.

#### Fens

**Question 3: What is the MOST important thing to you about the location of the practice – please choose ONE option. It should be:**

Answer Options	Response Count	%
Within walking distance	664	59.93
On a bus route	124	11.19
Within ... miles of my home	266	24.01
Within ... miles of my work	4	0.36
Other	398	35.92
<i>answered question</i>		1058
<i>skipped question</i>		50
		95.49
		4.51

How far from home/ work?		
Response	Count	%
Within 1/4 mile	2	0.18
Within one mile	82	7.40
Within two miles	68	6.14
Within three miles	50	4.51
Within four miles	16	1.44
Within five miles	33	2.98
Within six miles	2	0.18
Within ten miles	10	0.90
Within fifteen miles	2	0.18
Within twenty miles	2	0.18

There were 266 people who specified how far from their home (one specified how far from work):

Patients responding also made comments about free /easier parking (12 -1.08%), being on a bus route (5 - 0.45%), being retired (59 - 5.32%) or not working (8 - 0.72%). There were comments about being local (3 – 0.27%) also.



**Question 3: What is the MOST important thing to you about the location of the practice – please choose ONE option. It should be:**

Answer Options	Response Count	%
Within walking distance	450	49.45
On a bus route	91	10.00
Within ... miles of my home	299	32.86
Within ... miles of my work	8	0.88
Other	376	41.32
<i>answered question</i>		848
<i>skipped question</i>		62
		93.19
		6.81

Response	Count	%
Within 1/2 mile	1	0.11
Within one mile	78	8.57
Within two miles	95	10.44
Within three miles	56	6.15
Within five miles	36	3.96
Within six miles	3	0.33
Within ten miles	19	2.09
Within fifteen miles	5	0.55
Within twenty miles	2	0.22

There were 299 patients responding who said how far a GP service should be from their home. Patients also made comments about free or easier parking (17 – 187%) and referred to ‘national’ (3 – 0.33%) in this comment section.

**What is the MOST important thing to you about the location of the practice – please choose ONE option. It should be:**

Answer Options	Response Count	%	
Within walking distance	293	50.96	
On a bus route	91	15.83	
Within ... miles of my home	148	25.74	
Within ... miles of my work	1	0.17	
Other	191	33.22	
<i>answered question</i>		533	92.21
<i>skipped question</i>		45	7.79

Response	Count	%
Walking distance	7	1.21
Within one mile	17	2.94
Within five miles	29	5.02
Within four miles	8	1.38
Within six miles	4	0.69
Within two miles	41	7.09
Within three miles	31	5.36
Within eight miles	8	1.38
Within ten miles	14	2.42
Within 15 miles	2	0.35

Patients responding made comments about free or easier parking (12 - 2.08%) having a local service 2 (0.35%), not working (4 – 0.69%) and being retired 5 (0.87%).



## Defined areas in all responses

Many place names given referred to where people work and accounted for the greater distances although they did not state this in their response:

Billingham, Brenda Road, Dalton Park, Defined areas, Dock, Durham, Easington, Gateshead, Greatham, Hartlepool, Hartlepool & Tees Valley, Hartlepool Headland, Hartlepool Hospice, High Tunstall School, Hough Lane, Houghton Le Spring, Middlesbrough, Parade Shops (Fens), Peterlee, Rosmere, , Seaham, Seaton Carew, Seaton Lane

## Comments

Many people returning the survey by post wrote a number of comments which did not relate to miles from the practice. These are set out below.

- Positive comments about each surgery
- Accessible for my children
- Chemist nearby retired
- Distance not important
- Engineering
- Local
- Nearest GP Practice
- None as long as Doctor good
- Out of town
- Recently changed surgery so I could pass it on a daily basis travelling to and from workplace.
- Student
- Work offshore Scotland

**Question 4: Which of the following opening times would make it easier for you to see or speak to someone?**

Over 60% of patients in all practices (and more than 65% of patients in Fens and Hartfields) want opening times between Monday and Friday from 8 am until 6 pm.

Answer Options	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Monday - Friday, 8am - 6pm	1706	65.72	735	66.34	621	68.24	350	60.55
Monday - Friday mornings only	91	3.51	46	4.15	21	2.31	24	4.15
Monday - Friday, afternoons only	156	6.01	50	4.51	56	6.15	50	8.65
Evenings/weekends	447	17.22	195	17.60	147	16.15	105	18.17
Other, please say when	156	6.01	63	5.69	52	5.71	41	7.09
<i>answered question</i>	2556	98.46	1089	98.29	897	98.57	570	98.62
<i>skipped question</i>	40	1.54	19	1.71	13	1.43	8	1.38

**Other comments**

Most comments included a range of times repeating the above (ie all of them, 24/7 or anytime). Saturday or Saturday mornings was also mentioned.



**Question 5: When is it most important to patients to see or speak to a GP?**

For most (nearly half of all patients) the important time for a patient at one of the practices to see or speak to a GP was sometime on a weekday morning.

When is it most important for you to see or speak to a GP? Please tick only ONE box								
Answer Options	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Weekday mornings	1199	46.19	533	48.10	416	45.71	250	43.48
Weekday afternoons	462	17.80	187	16.88	168	18.46	107	18.61
Evenings/weekends	543	20.92	231	20.85	176	19.34	136	23.65
Other time? Please say when	339	13.06	129	11.64	134	14.73	76	13.22
<b><i>answered question</i></b>	<b>2543</b>	<b>97.96</b>	<b>1080</b>	<b>97.47</b>	<b>894</b>	<b>98.24</b>	<b>569</b>	<b>98.96</b>
<b><i>skipped question</i></b>	<b>53</b>	<b>2.04</b>	<b>28</b>	<b>2.53</b>	<b>16</b>	<b>1.76</b>	<b>9</b>	<b>1.57</b>



As there was a possibility that this preference may have arisen due to the need for urgent care, further analysis of question 5 shows that the proportion of people needing to see a GP on a weekday morning is not different to the general proportions of people (male or female) with a long-term condition or disability, or people who care for someone with a long-term condition or disability. The majority of patients live in the same areas where half of each practice population resides.

Patients with	Overall	% of total response	% of Q5 total	Fens	% of total response from Fens	% of Q5 total	Hartfields	% of total response from Hartfields	% of Q5 total	Wynyard Road	% of total response from Wynyard Road	% of Q5 total
Total Q5	1199	46.19		533	48.10	100.00	416	45.71	100.00	250	43.25	100
Female	722	27.81		327	29.51	61.35	249	27.36	59.86	146	25.26	58.4
Male	431	16.60		179	16.16	33.58	151	16.59	36.30	101	17.47	40.4
A long term condition or disability	441	16.99		167	15.07	31.33	163	17.91	39.18	111	19.20	44.4
Who care for someone with a long term condition or disability	143	5.51		64	5.78	12.01	50	5.49	12.02	29	5.02	11.6
Pregnant or has a child under 2	75	2.89		22	1.99	4.13	22	2.42	5.29	31	5.36	12.4
Parent or guardian	275	10.59		114	10.29	21.39	103	11.32	24.76	58	10.03	23.2
Proportion of patients by practice in TS25				474	42.78	88.93				234	40.48	93.6
Proportion of patients by practice in TS26							299	32.86	71.88			

**Question 6: When is it most important for patients to see or speak to a nurse?**

For most (again nearly half) of all patients said the most important time to see or speak to a nurse is a weekday morning.

<b>When is it most important for you to see or speak to a nurse? Please tick only ONE box</b>								
<b>Answer Options</b>	<b>Overall</b>	<b>%</b>	<b>Fens</b>	<b>%</b>	<b>Hartfields</b>	<b>%</b>	<b>Wynyard Road</b>	<b>%</b>
Weekday mornings	1233	47.50	545	49.19	430	47.25	258	44.87
Weekday afternoons	470	18.10	201	18.14	163	17.91	106	18.43
Evenings/weekends	494	19.03	205	18.50	164	18.02	125	21.74
Other time? Please say when	319	12.29	119	10.74	125	13.74	75	13.04
<b><i>answered question</i></b>	2516	96.92	1070	96.57	882	96.92	564	98.09
<b><i>skipped question</i></b>	80	3.08	38	3.43	28	3.08	14	2.43

**Question 7: How often do you see or speak to the GP you prefer?**

The majority of patients overall and for each practice said that they see the GP they prefer to see some of the time.

How often do you see or speak to the GP you prefer?								
Answer Options	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Always or almost always	387	14.91	112	10.11	137	15.05	138	23.88
A lot of the time	468	18.03	141	12.73	192	21.10	135	23.36
Some of the time	926	35.67	451	40.70	305	33.52	170	29.41
Never or almost never	504	19.41	257	23.19	153	16.81	94	16.26
Not tried at my GP surgery	222	8.55	104	9.39	95	10.44	23	3.98
<i>answered question</i>	2507	96.57	1065	96.12	882	96.92	560	96.89
<i>skipped question</i>	89	3.43	43	3.88	28	3.08	18	3.11

**Question 8: How important it is to patients to see the same GP every time?**

Patients rated seeing the same GP highly in all three practices.

How often do you see or speak to the GP you prefer?												
Answer Options	1 - Not at all important	2	3	4	5	6	7	8	9	10 - Very important	Rating Average*	Response Count
Overall	95	44	58	63	246	147	272	465	319	781	8.64	2490
Fens	40	20	27	21	115	70	123	230	132	275	8.48	1053
Hartfields	38	13	15	23	88	54	99	173	118	252	8.59	873
Wynyard Road	17	11	16	19	43	23	50	62	69	254	9.02	564

**Question 9: How often do you see or speak to the nurse you prefer?**

Overall, patients said they see or speak to the nurse they prefer all of the time (or almost always), however Fens patients said only some of the time, which is raised overall by Hartfields and Wynyard Road patients who always or almost always see the nurse they prefer.

How often do you see or speak to the nurse you prefer?								
Answer Options	Overall	%	Fens	%	Hartfields	%	Wynyard Road	%
Always or almost always	716	27.58	167	15.07	391	42.97	158	27.34
A lot of the time	498	19.18	211	19.04	185	20.33	102	17.65
Some of the time	670	25.81	376	33.94	168	18.46	126	21.80
Never or almost never	209	8.05	129	11.64	29	3.19	51	8.82
Not tried at my GP surgery	414	15.95	182	16.43	112	12.31	120	20.76
<i>answered question</i>	2507	96.57	1065	96.12	885	97.25	557	96.37
<i>skipped question</i>	89	3.43	43	3.88	25	2.75	21	3.63

**Question 10: How important it is to patients to see the nurse they prefer**

Responses from people showed that this is less important to them than seeing a preferred GP, the average rating for this between 6.18 (Fens) and 7 (Hartfields).

On a scale of 1-10, how important is it for you to see the same nurse every time?													
Answer Options	1 - Not at all important	2	3	4	5	6	7	8	9	10 - Very important	Rating Average	Response Count	Skipped
Overall	224	108	83	96	376	188	261	376	222	563	6.63	2497	99
Fens	117	62	42	42	183	83	107	155	78	191	6.18	1060	48
Hartfields	60	30	25	33	112	65	92	143	92	224	7.00	876	34
Wynyard Road	47	16	16	21	81	40	62	78	52	148	6.88	561	17

### Question 11: Elements of service – what patients say is important to them

Patients were asked what is most important to them about their general practice. They were given the opportunity to either rank six options (see below) or to choose which of them are most important. This was done by showing a number 0 through to 5 against each item.

It was anticipated that some patients would choose to indicate more than one high important value (particularly those returning the paper copy surveys themselves).

(0 being least important, 5 being most important).

#### *Fens*

Answer Options	0 – Least important	1	2	3	4	5 – Most important
Quality of care	114	57	127	89	118	563
Location	215	132	76	93	141	411
Opening times	314	110	60	115	182	287
Access to a doctor	123	50	52	115	207	521
Access to a nurse	196	106	129	172	190	275
Continuity of care	256	105	138	138	88	343

### Hartfields

Answer Options	0 – Least important	1	2	3	4	5 – Most important
Quality of care	55	39	89	93	101	515
Location	207	92	65	94	130	304
Opening times	221	91	75	119	160	226
Access to a doctor	58	48	52	97	233	404
Access to a nurse	106	82	114	177	187	226
Continuity of care	147	149	127	89	110	270

### Wynyard Road

Answer Options	0 – Least important	1	2	3	4	5 – Most important
Quality of care	54	60	72	63	75	241
Location	165	55	47	51	57	190
Opening times	104	63	54	81	100	163
Access to a doctor	68	53	69	90	119	166
Access to a nurse	74	59	104	92	90	146
Continuity of care	124	96	52	63	100	130



### *Relative preferences of Fens, Hartfields and Wynyard Road patients for elements of the service*

Table showing average rank of importance given by patients to each element of service.

<b>Average ranking</b>	<b>Overall average</b>	<b>Fens</b>	<b>Hartfields</b>	<b>Wynyard Road</b>
Quality of care	<b>4.66</b>	<b>4.62</b>	<b>4.09</b>	<b>4.26</b>
Access to a doctor	3.85	3.98	3.22	3.54
Access to a nurse	3.67	3.56	3.05	3.80
Location	<b>4.60</b>	<b>4.68</b>	<b>4.01</b>	<b>4.03</b>
Continuity of care	3.92	3.82	3.38	3.80
Opening times	3.68	3.68	3.14	3.47

#### **Working it out**

What is most important to patients in each practice overall is worked out by weighting the numbers of responses (multiplying them) by giving a value to the response.

Each value is multiplied by 1,2, 3, 4, 5, 6 (since there were 6 items, not 5) , then divided by the total number of responses made to the question. This gives a relative rank of what is important to respondents, as shown in the table above and the chart below.

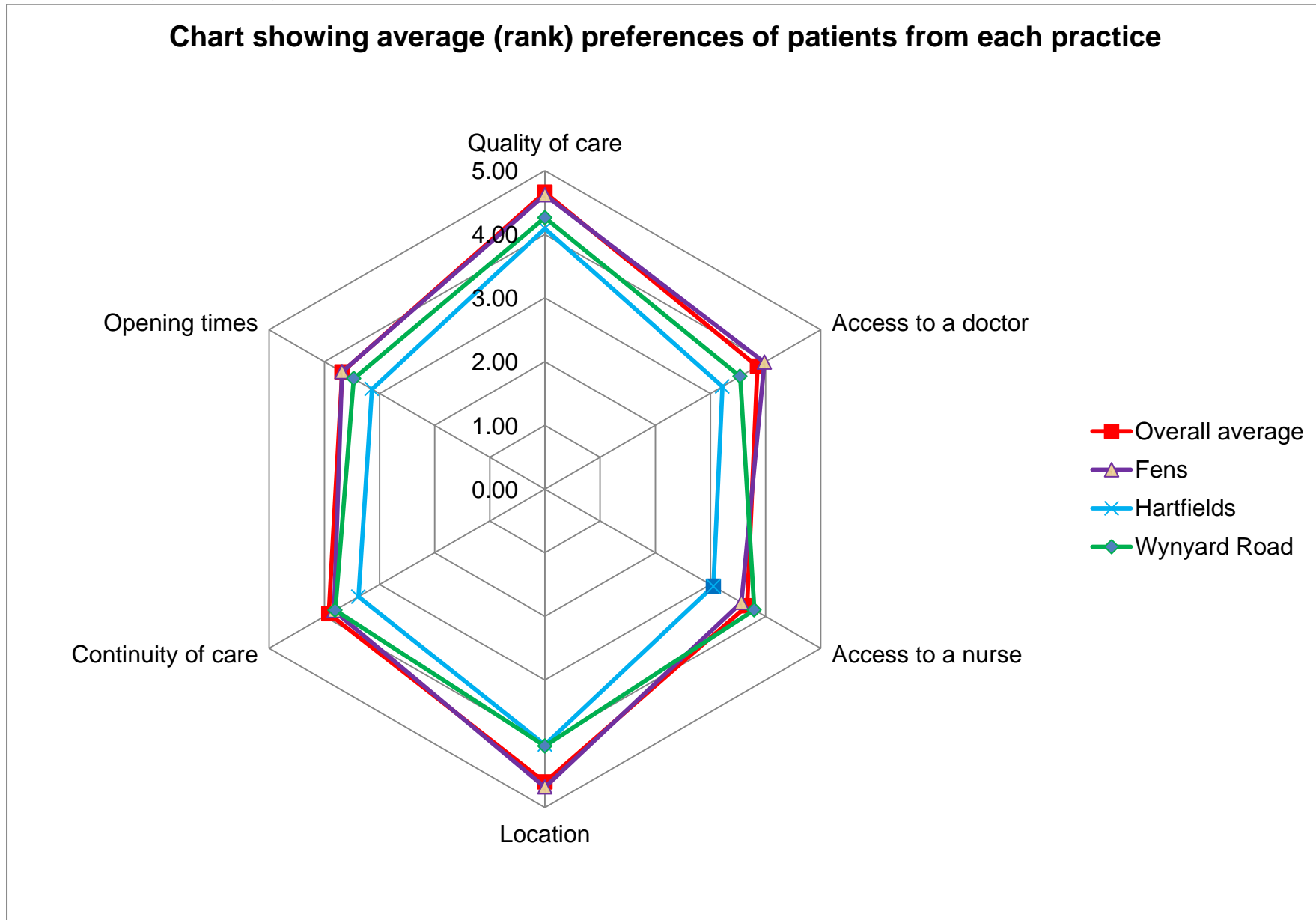
#### **What this shows**

With the exception of Fens' patients, overall ranking is highest for quality of care, although there is little difference between the most important and second most important element of service identified by patients, with is location.

Fens patients gave location slightly higher scores and this shows in the average ranking of what is most important to them.

Location also comes out strongly as the second most important element of service for patients from the Hartfields and Wynyard Road practices.

Chart showing the average rank preferences and lean towards each element of the service by practice:



## Demographics of respondents to the survey

### Question 12: Please state your gender

More women than men responded to the survey in each practice.

#### Fens

Answer Options	Response Count	%
Male	430	38.81
Female	619	55.87
Prefer not to say	3	0.27
<i>answered question</i>	1052	94.95
<i>skipped question</i>	56	5.05

#### Hartfields

Answer Options	Response Count	%
Male	349	38.35
Female	521	57.25
Prefer not to say	4	0.44
<i>answered question</i>	874	96.04
<i>skipped question</i>	36	3.96

#### Wynyard Road

Answer Options	Response Count	%
Male	262	45.33
Female	298	51.56
Prefer not to say	1	0.17
<i>answered question</i>	561	97.06
<i>skipped question</i>	17	2.94

### Question 13: Please state your age

More responses were received in the 65-75 age groups in the Fens and Hartfields practices. In Wynyard Road responses, the highest number of responses is in the 55 – 64 age group.

#### *Fens*

The highest number of responses were from the 65-74 year old age group for this practice (154 – 13.90%). There were 10 (0.90%) responses from people aged under 18 years old (0.90%). There were 28 (2.53%) responses from people in the 18-24 year old age group. A further 86 (7.76%) responded from those aged between 25 and 34. For the age groups between 35 and 64 there were between 9.12% and 10.38% of the total number of responses for each group from people registered with this practice.

Age Group	Response Count	%
Under 18	10	0.90
18-24	28	2.53
25-34	86	7.76
35-44	101	9.12
45-54	107	9.66
55-64	115	10.38
65-74	154	13.90
75-84	99	8.94
85 and over	26	2.35
answered question	726	65.52
skipped question	382	34.48

#### *Hartfields*

The highest number of responses was from people aged 65 – 74 years of age (110 – 12.09%). There were just 4 (0.44%) responses from those under 18 and 27 (2.97%) aged between 18 and 24 at the time of the survey. Between the ages of 25 and 64, there were between almost 9% and just under 11% responses for each age group. There were 112 (12.31%) responses from people aged over 75.

Age Group	Response Count	%
Under 18	4	0.44
18-24	27	2.97
25-34	81	8.9
35-44	101	11.1
45-54	96	10.55
55-64	99	10.88

Age Group	Response Count	%
65-74	110	12.09
75-84	79	8.68
85 and over	33	3.63
answered question	630	56.86
skipped question	280	48.44

### *Wynyard Road*

The highest number of responses was from people aged between 55 and 64 (75 – 12.98%). There were 10 (0.90%) responses from people aged under 18 and 47(8.13%) responses from people aged 18 to 24 years old. For the age groups between 25 and 74, there were responses from approximately 12% of the total responses from the practice in each group. There were 60 (10.38%) responses from people aged 75 and over.

Age Group	Response Count	%
Under 18	2	0.35
18-24	47	8.13
25-34	74	12.80
35-44	74	12.80
45-54	70	12.11
55-64	75	12.98
65-74	67	11.59
75-84	52	9.00
85 and over	8	1.38
answered question	469	81.14
skipped question	109	18.86

## Question 14: What is your marital status?

Over half the patients responding to Fens and Hartfields practices were married, in Wynyard Road, there is a higher proportion of single patients. In both Fens and Hartfields there are over 10% of patients responding who are widowed.

### Fens

Answer Options	Response Count	%
Married	610	55.05
Single	149	13.45
Divorced	83	7.49
Widowed	135	12.18
Separated	17	1.53
Civil Partnership	24	2.17
Other: living with someone (one person getting divorced)	31	2.80
<b>answered question</b>	<b>1049</b>	<b>94.68</b>
<b>skipped question</b>	<b>59</b>	<b>5.32</b>

### Hartfields

Answer Options	Response Count	%
Married	510	56.04
Single	136	14.95
Divorced	59	6.48
Widowed	123	13.52
Separated	7	0.77
Civil Partnership	20	2.20
Other : living with someone	17	1.87
<b>answered question</b>	<b>872</b>	<b>95.82</b>
<b>skipped question</b>	<b>38</b>	<b>4.18</b>

### Wynyard Road

Answer Options	Response Count	%
Married	261	45.16
Single	142	24.57
Divorced	55	9.52
Widowed	42	7.27
Separated	22	3.81
Civil Partnership	30	5.19
Other - living with someone	6	1.04
<b>answered question</b>	<b>558</b>	<b>96.54</b>
<b>skipped question</b>	<b>20</b>	<b>3.46</b>

**Question 15 (Ethnicity): please state which ethnic group you consider yourself to be**

Most people (over 75%) responded they are “White British” “White” or “English”.

**Fens**

Declared ethnicity	Response Count	%
British	159	14.35
English	109	9.84
Polish	2	0.18
Scottish	1	0.09
White	211	19.04
White British	524	47.29
<b>answered question</b>	<b>1006</b>	<b>90.79</b>
<b>skipped question</b>	<b>102</b>	<b>9.21</b>

**Hartfields**

Declared ethnicity	Response Count	%
British	111	12.20
Caucasian	1	0.11
English	82	9.01
European	1	0.11
Irish	3	0.33
Philipino	2	0.22
UK	1	0.11
Welsh	1	0.11
White	93	10.22
<b>White British</b>	<b>516</b>	<b>56.70</b>
<b>skipped question</b>	<b>394</b>	<b>43.30</b>

**Wynyard Road**

Declared ethnicity	Response Count	%
American	1	0.17
British	71	12.28
English	149	25.78
Indian	1	0.17
Polish	7	1.21
Scottish	1	0.17
White	36	6.23
White British	262	45.33
<b>answered question</b>	<b>528</b>	<b>91.35</b>
<b>skipped question</b>	<b>50</b>	<b>8.65</b>



**Question 16 (religion or belief): please tell us your religion or belief:**

**Fens**

Please tell us your religion or belief:		
Responses	Response Count	%
Agnostic	2	0.18
Anglican	0	0.00
Athiest	14	1.26
Baptist	6	0.54
Christian	75	6.77
Church of England	430	38.81
Jehovah's Witness	3	0.27
Methodist	5	0.45
None	117	10.56
Other	13	1.17
Protestant	7	0.63
RC / Catholic	189	17.06
Spiritualist	1	0.09
Uncategorized	0	0.00
URC	2	0.18
<i>answered question</i>		1028
<i>skipped question</i>		80

**Hartfields**

Please tell us your religion or belief:		
Responses	Response Count	%
Agnostic	1	0.11
Anglican	1	0.11
Athiest	6	0.66
Baptist	1	0.11
Christian	57	6.26
Church of England	393	43.19
Church of Scotland	1	0.11
Methodist	2	0.22
Non-conformist	1	0.11
None	107	11.76
Other	5	0.55
Protestant	4	0.44
RC / Catholic	135	14.84
Spiritualist	1	0.11
<i>answered question</i>		715
<i>skipped question</i>		195



### Wynyard Road

Please tell us your religion or belief:		
Responses	Response Count	%
Agnostic	1	0.17
Athiest	7	1.21
Baptist	1	0.17
Christian	20	3.46
Church of England	253	43.77
Jehovah's Witness	1	0.17
Methodist	1	0.17
Muslim	2	0.35
None	140	24.22
Other	2	0.35
Protestant	2	0.35
RC / Catholic	66	11.42
Unsure/ undecided	4	0.69
	<i>answered question</i>	500
	<i>skipped question</i>	78

**Question 17: Do you consider yourself to have a long-standing illness or disability?**

All practices show that 30% or more of patients have a long-standing illness or disability.

**Fens**

Do you consider yourself to have a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	334	30.14
No	706	63.72
<i>answered question</i>	1040	93.86
<i>skipped question</i>	68	6.14

**Hartfields**

Do you consider yourself to have a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	285	31.32
No	583	64.07
<i>answered question</i>	868	95.38
<i>skipped question</i>	42	4.62

**Wynyard Road**

Do you consider yourself to have a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	180	31.14
No	374	64.71
<i>answered question</i>	554	95.85
<i>skipped question</i>	24	4.15



## Question 18: Do you care for someone with a long-standing illness or disability?

Over 12% of patients responding are carers in Fens and Hartfields practices, less so in Wynyard Road (nearly 9%).

### Fens

Do you care for someone with a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	137	12.36
No	893	80.60
<i>answered question</i>	1030	92.96
<i>skipped question</i>	78	7.04

### Hartfields

Do you care for someone with a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	114	12.53
No	751	82.53
<i>answered question</i>	865	95.05
<i>skipped question</i>	45	4.95

### Wynyard Road

Do you care for someone with a long-standing illness or disability?		
Answer Options	Response Count	%
Yes	51	8.82
No	498	86.16
<i>answered question</i>	549	94.98
<i>skipped question</i>	29	5.02

### Question 19: How would you describe your sexuality?

Overall, there were nearly 90% of people who said they were heterosexual/straight , 2 people stated they were Bisexual, 16 people stated their sexuality as gay or lesbian, and 121 said they preferred not to say.

### Question 20: Are you pregnant or do you have a child under two years old?

By far the largest percentage of patients responding to the survey who were pregnant at the time or have a child under two years old was in the Wynyard Road practice, with 14%. In Fens and Hartfields, only between around 4% and 7% fall in this category.

#### Fens

Are you pregnant or do you have a child under two years old?		
Answer Options	Response Count	%
Yes	52	4.69
No	960	86.64
Prefer not to say	10	0.90
<i>answered question</i>	1022	92.24
<i>skipped question</i>	86	7.76

#### Hartfields

Are you pregnant or do you have a child under two years old?		
Answer Options	Response Count	%
Yes	65	7.14
No	785	86.26
Prefer not to say	7	0.77
<i>answered question</i>	857	94.18
<i>skipped question</i>	53	5.82

#### Wynyard Road

Are you pregnant or do you have a child under two years old?		
Answer Options	Response Count	%
Yes	81	14.01
No	458	79.24
Prefer not to say	5	0.87
<i>answered question</i>	544	94.12
<i>skipped question</i>	34	5.88

## **Question 21: Have you undergone gender reassignment?**

### ***Fens***

There was 1 respondent who stated they had undergone gender reassignment, 6 who stated they preferred not to say.

### ***Hartfields***

There were no responses submitted from anyone stating yes to gender reassignment. There were 11 responses from people who preferred not to say.

### ***Wynyard Road***

There was one response from a respondent who stated they had undergone gender reassignment. There were 5 responses from people who preferred not to say.

**Question 22: Please tell us the first 4 or 5 characters of your post code**

*Fens*

Post code	Response Count	%
TS2	6	0.54
TS3	1	0.09
TS4	1	0.09
TS21	0	0.00
TS22	3	0.27
TS23	1	0.09
TS24	11	0.99
TS25	978	88.27
TS26	43	3.88
TS27	3	0.27
answered question	1047	94.49
skipped question	61	5.51

*Hartfields*

Post code	Response Count	%
DH3	1	0.11
SR28	1	0.11
TS6	2	0.22
TS20	2	0.22
TS22	1	0.11
TS23	1	0.11
TS24	65	7.14
TS25	46	5.05
TS26	675	74.18
TS27	76	8.35
TS29	1	0.11
answered question	871	95.71
skipped question	39	4.29

*Wynyard Road*

Post code	Response Count	%
TS4	1	0.17
TS22	4	0.69
TS23	0	0.00
TS24	7	1.21
TS25	517	89.45
TS26	18	3.11
TS27	4	0.69
TS28	2	0.35
answered question	553	95.67
skipped question	25	4.33

Additional analysis on how long it currently takes patients from each practice to get to the surgery (question 1) , and how they get there shows that those who take less than 15 minutes to get to their practice are also the larger proportion of people who walk to the practice, although some do drive.

### Fens

Time taken to get to practice	Walk	Drive in my own car	With a friend/ relative in their car	By bus	Other
Less than 15 minutes	608	319	58	23	17
Up to 30 minutes	59	35	13	31	3
More than 31 minutes to 1 hour	8		2	11	
(blank)	3	3		1	2
<b>Total</b>	<b>678</b>	<b>357</b>	<b>73</b>	<b>66</b>	<b>22</b>

- Of those patients who stated they take 15 minutes to get to the practice: 608 (54.87%) walk and 319 (28.79%) drive .

### Hartfields

Time taken to get to practice	Walk	Drive in my own car	With a friend/ relative in their car	By bus	Other
Less than 15 minutes	415	373	57	23	47
Up to 30 minutes	15	41	10	12	7
More than 31 minutes to 1 hour	3	1	1	2	
(blank)	2	2			2
<b>Total</b>	<b>435</b>	<b>417</b>	<b>68</b>	<b>37</b>	<b>56</b>

- Of those patients who stated they take 15 minutes to get to the practice: 415 (45.60%) walk and 373 (40.99%) drive.

### Wynyard Road

Time taken to get to practice	Walk	Drive in my own car	With a friend/relative in their car	By bus	Other
Less than 15 minutes	287	129	59	23	3
Up to 30 minutes	31	18	9	22	6
More than 31 minutes to 1 hour	1			6	
More than 1 hour				1	
(blank)					1
<b>Total</b>	<b>319</b>	<b>147</b>	<b>68</b>	<b>52</b>	<b>10</b>

- Of those patients who stated they take 15 minutes to get to the practice: 287 (49.65%) walk and 129 (22.32%) drive.



**Question 22 and question 2: Post codes and how people currently travel to the practice**

*Fens*

Post code area	On a bus route	Within ... miles of my work	Within walking distance	Within ... miles of my home	(blank)	Grand Total
Blank	4		35	14	7	60
TS0S				1		1
TS2			2			2
TS2			1			1
TS21				1		1
TS22			2	1		3
TS23			1			1
TS24	4		1	4	2	11
TS25	112	3	597	228	38	978
TS26	4		21	16	2	43
TS27		1		1	1	3
TS2L			1			1
TS2N			1			1
TS3A			1			1
TS4			1			1
Grand Total	124	4	664	266	50	1108

There are 597 (53.88%) people from TS25 who currently walk to the practice.

## Hartfields

Post code area	On a bus route	Within ... miles of my work	Within walking distance	Within ... miles of my home	(blank)	Grand Total
Blank	2	1	20	12	4	39
DH3		1				1
SR28			1			1
T224			1			1
T23J			1			1
TS20			2			2
TS24	7	2	21	26	9	65
TS25	9	1	11	20	5	46
TS26	72	2	363	197	41	675
TS27	1	1	27	44	3	76
TS29			1			1
TS6			1			1
TS60			1			1
Grand Total	91	8	450	299	62	910

There are 363 (39.89%) people who stated they currently walk to the practice who live in TS26.

### Wynyard Road

Post code area	On a bus route	Within ... miles of my work	Within walking distance	Within .. miles of my home	(blank)	Grand Total
Blank	6	0	8	5	6	25
TS22	2			1	1	4
TS24	4		1	2		7
TS25	70	1	281	131	34	517
TS26	8		1	7	2	18
TS27	1		1		2	4
TS28				2		2
TS4			1			1
Grand Total	91	1	293	148	45	578

There are 281 (48.62%) people who live in TS25 who currently walk to the practice.

**Question 23: Are you a parent or guardian (or grandparent) who generally has to accompany a child or young person to their GP appointment?**

**Fens**

Answer Options	Response Count	%
Yes	253	22.88
No	784	70.89
<i>answered question</i>	1037	93.59
<i>skipped question</i>	71	6.41

**Hartfields**

Answer Options	Response Count	%
Yes	267	29.34
No	608	66.81
<i>answered question</i>	875	96.15
<i>skipped question</i>	35	3.85

**Wynyard Road**

Answer Options	Response Count	%
Yes	160	27.68
No	391	67.65
<i>answered question</i>	551	95.33
<i>skipped question</i>	27	4.67

## Conclusions

Patients who responded hold each of these services in high regard.

### Getting there

The majority of patients responding to the survey reported that they take less than 15 minutes to get to the location of their practice.

Around half of Hartfields and Wynyard Road patients said they walk to the practice. A large majority of Fens patients walk to their practice. Hartfields patients had a larger proportion than the other practices of patients who said they drive to their practice (just under half). In Wynyard Road, a quarter of the patients responding stated they drive to the practice.

There some comments from patients who are housebound, who receive most of their services at home (usually to say these questions did not apply to them and their need for accessibility of wheelchairs for example).

Comments from patients responding also include using a taxi, needing support and accessibility because of the need to use a wheelchair or a scooter and a few commenting that the patient is housebound so this question was not relevant to them. There was also a comment about lack of public transport to get to their surgery.

### Location

The majority of patients responding to the survey from each practice stated the most important thing is being able to walk to the practice. Nearly a quarter of the responses specified a distance from home.

There were a number of patients responding who made comments about what would affect the distance they travel to their practice.

Most patients want their service within one or two miles of where they live, certainly within three miles.

### Opening times and availability of GPs and nurses

Over 60% of patients in all practices (and more than 65% of patients in Fens and Hartfields) want opening times between Monday and Friday from 8 am until 6 pm.

For most (nearly half of all patients) the important time for a patient at one of the practices to see or speak to a GP was sometime on a weekday morning.

There was a possibility that this preference may have arisen due to the need for urgent care. Further analysis of question 5 shows that the proportion of people needing to see a GP on a weekday morning is not different to the general proportions of people (male or female) with a long-term condition or disability, or people who care for someone with a long-

term condition or disability. The majority of patients live in the same areas where half of each practice population resides.

For most (again nearly half) of all patients said the most important time to see or speak to a nurse is a weekday morning.

The majority of patients overall and for each practice said that they see the GP they prefer to see some of the time.

Patients rated seeing the same GP highly in all three practices.

Patients said they see or speak to the nurse they prefer all of the time (or almost always) in Hartfields and Wynyard Road. However, Fens patients said they see the nurse they prefer some of the time, which raised the overall result for the three practices taken together.

Responses from patients showed that seeing a nurse is less important to them than seeing a preferred GP (with an average score of over 8 for all practices), the average rating for seeing the same nurse being a score of between 6 and 7.

### **Ranking of elements of each service**

With the exception of Fens' patients, overall ranking is highest for quality of care. However in the case of Fens' patients, there is little difference between the most important and second most important element of service identified by patients, which is location. Location is a close second for both Hartfields and Wynyard Road patients.

Additional analysis on how long it currently takes patients from each practice to get to their surgery location (question 1) , and how they get there, shows that those who take less than 15 minutes to get to their practice are also the larger proportion of people who walk to the practice, although some do drive.

### **Demographics and responses from different Protected Groups**

There was a reasonable response rate, helped by the independent researchers particularly in the Wynyard Road practice area.

The demographics of patients who responded to the 2016 survey was broadly reflective of the proportion of both patients registered at the practice in older age groups (Fens and Hartfields) and a younger population with more single / live alone households (Wynyard Road). Other demographics were also all broadly reflective of numbers of different Protected Groups that can be seen in a practice population group.

Healthwatch commented in their report that a significant group of patients out of the 43 involved commented that they were either unaware that the recommissioning process was taking place in December 2015 and there were concerns expressed by patient participation group and residential group representatives that this situation continues.

There is also still real concern amongst some patients (and particularly those who live in Hartfields Retirement Village) that the Centre will either close or relocate as a result of the current procurement exercise.

## **How the responses compare to the 2014 engagement feedback**

There were 2569 individual responses in 2016 and 1392 responses in 2014. The methods and questions for each project differed (for example individual patients and interviewer responses in 2016 and heads of household and supported through volunteers in 2014). This is because generally, the opportunity to complete surveys separately is considered better practice than asking one member of the household to represent one set of responses on everyone's behalf.

The questions also differed; however the themes reflect the same views – most people want to remain with their service at the existing location. They value their local primary care service. Quality of care is considered high in all practices, although there are comments about improvement in terms of continuity of service given by GPs and nursing staff for all three practices.

## Appendix 1 – patient letter

Patient

### Important Information about your GP Practice

As you are registered with the **[name of practice]** I am writing with some important information about your practice.

You may already know that the contract for services provided by your doctor, and at **[name of practices]** are due to end on 31 March 2017. This means we need to look at how these services are delivered in the future.

We carried out a survey of patients in these three practices in 2014, and we want to find out whether your views have changed over the last two years, and particularly what is most important to you in terms of your general practice.

This is a first step towards deciding how services might be delivered, and once we understand the views of as many patients as possible, we will develop plans for services which continue to meet local need, and will formally consult on our plans over the summer. We will write to you again when this happens.

If you do have any questions, comments, or would like some more information you are welcome to:-

- come along and see us at one of our information sessions (dates below);
- attend a focus group, and/or

An information sheet is attached, showing how you can ask questions and raise concerns.

We would also be grateful if you could complete the enclosed questionnaire and return in the envelope attached, or complete it online at **[link]**



## Patient Information Sessions/Focus Groups

**If you would like to attend an information session or a focus group  
Please register by telephoning 0191 3742795 or email [NECSU.comms@nhs.net](mailto:NECSU.comms@nhs.net)**

	When	Venue
Session 1	Wednesday 22 June 5.30pm – 6.30pm	Throston Youth Project (Formerly Boys Welfare Centre), Wiltshire Way, Hartlepool, TS26 0TB
Session 2	Monday 27 June 10.00am – 11.00am	Rossmere Youth Centre, Rossmere Way, Hartlepool, TS25 5EB
Session 3	Thursday 30 June 6.00pm – 7.00pm	Owton Manor Community Centre, Wynyard Road, Hartlepool, TS25 3LQ

In addition, you can also contact Healthwatch Hartlepool, who is the statutory independent consumer champion for users of health and social care services, to discuss any concerns or questions you may have. They can be contacted on **01429 288146** or go to [www.healthwatchhartlepool.co.uk](http://www.healthwatchhartlepool.co.uk) for more information.

In the meantime, there will be **no changes** to the services you receive.

Yours sincerely

**CCG**

## Appendix 2 – patient information sheet

### 1. What does this mean for me as a patient?

You will continue to receive a service from a doctor locally. There will be no change to the range of services you receive, although there may be a change to where you attend and the times you can see your doctor or nurse.

### 2. How can I have a say or ask a question?

We want you to have the opportunity to tell us what is most important to you in relation to your general practice.

You can do this by any or all of the following methods:-

#### ***Fill in a survey***

Complete the attached survey and return in the freepost envelope attached, or complete it online [\[link\]](#), by 30 June 2016. If you need help with the survey, or you know someone who does you can call 0191 3742795.

#### ***Come to a patient information session***

Call 0191 374 2795 or email [NECSU.comms@nhs.net](mailto:NECSU.comms@nhs.net) to register. The session dates are at the end of this letter.

#### ***Take part in a group (focus group)***

An independent voluntary and community sector organisation will run this, if enough people want to attend. We will let you know when, if you tell us you are interested on the above number.

#### **Healthwatch Hartlepool**

Healthwatch Hartlepool is the statutory independent consumer champion for users of health and social care services. They will listen to, advise and speak up on behalf of consumers. Telephone them on 01429 288146 or go to [www.healthwatchhartlepool.co.uk](http://www.healthwatchhartlepool.co.uk)

#### **Other opportunities**

We have asked some independent researchers to ask people locally about their views.

#### **Additional support to ensure everyone can have their say**

If you or someone you know wants to provide face to face feedback, but is unable to attend one of the planned patient information sessions or focus groups due to mobility, accessibility or transport reasons, or requires help to complete the survey, please send the details to [NECSU.comms@nhs.net](mailto:NECSU.comms@nhs.net) or ring 0191 374 2795. We will make arrangements to contact you or the person you inform us about to ensure they can have their views heard.

## Appendix 3 – the survey

### [Fens Medical Centre] OR [Hartfields Medical Practice] OR [Wynyard Road Primary Care Centre] PATIENT SURVEY

You have received this survey because you are a patient at **The Fens Medical Centre, Hartfields Medical Centre, or Wynyard Road Medical Centre.**

NHS Hartlepool and Stockton on Tees Clinical Commissioning Group, working with NHS England, are reviewing the way in which services for patients in these **practices are delivered. Your responses will help us understand what is most important** to you about the GP practice service you receive.

All responses are confidential. You can use the freepost address below to return your survey, or you can complete it online [LINK](#)

The deadline for responses is **Monday 30 June 2016.**

**The freepost address to return the survey is:**

**FAO: Comms and Engagement, FREEPOST RLSH-KHYU-YREH, North of England Commissioning Support, John Snow House, Durham University Science Park, DH1 3YG**

This is included on an envelope with your survey.

**If you would like help to complete this survey, please contact 0191 374 2795.**

## Survey questions

### Location

1. In general, how long does your journey take from home to the current site of your GP service (door to door)?

- |   |  |
|---|--|
| <input type="checkbox"/> Less than 15 minutes | <input type="checkbox"/> More than 31 minutes - hour |
| <input type="checkbox"/> Up to 30 minutes     | <input type="checkbox"/> More than 1 hour            |

2. How do you travel there?

- |   |  |
|---|--|
| <input type="checkbox"/> Walk                                   | <input type="checkbox"/> Drive in my own car |
| <input type="checkbox"/> With a friend or relative in their car | <input type="checkbox"/> By bus              |

Other .....

3. What is the MOST important thing to you about the location of the practice – please choose ONE option.

It should be

- Within walking distance
- On a bus route
- Within ..... mile(s) of my **home**
- Within ..... mile(s) of my **work**

Please tell us the area where you work

.....

**Other** .....

4. Which of the following opening times would make it easier for you to see or speak to someone?

**Please tick only ONE box**

- |   |   |
|---|---|
| <input type="checkbox"/> Monday – Friday<br>8am – 6pm       | <input type="checkbox"/> Monday – Friday<br>Mornings only |
| <input type="checkbox"/> Monday – Friday<br>Afternoons only | <input type="checkbox"/> Evenings/<br>Weekends            |
| <input type="checkbox"/> Other please say when .....        |   |

5. When is it most important for you to see or speak to a GP?

**Please tick only ONE box**

- |  |   |
|--|---|
| <input type="checkbox"/> Weekday mornings                  | <input type="checkbox"/> Evenings/ weekends |
| <input type="checkbox"/> Weekday afternoons                |   |
| <input type="checkbox"/> Other time? Please say when ..... |   |



6. When is it most important for you to see or speak to a nurse?

Please tick only ONE box

- Weekday mornings       Evenings/ weekends
- Weekday afternoons
- Other time? Please say when .....

7. How often do you see or speak to the GP you prefer?

- Always or almost always
- A lot of the time
- Some of the time
- Never or almost never
- Not tried at my GP surgery

8. On a scale of 1-10, how important is it for you to see the same GP every time?

Not at all important

Very important

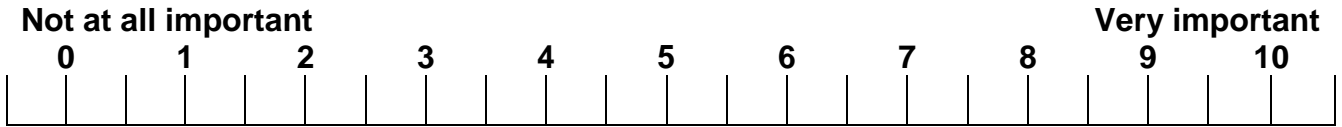


9. How often do you see or speak to the nurse you prefer?

- Always or almost always
- A lot of the time
- Some of the time
- Never or almost never
- Not tried at my GP surgery



10. How often do you see or speak to the nurse you prefer?



11. We want to know what is MOST important to you about your general practice.  
Please say which is most important by giving a number between 0 and 5,

**5 being MOST important, 0 LEAST important.**

Quality of care	
Location	
Opening times	
Access to a doctor	
Access to a nurse	
Continuity of care	



## About you

You do not have to answer if you do not want to.

12. Please state your gender

Male       Female       Prefer not to say

Please state your age .....

13. What is your marital status?

Married       Widowed  
 Single       Separated  
 Divorced       Civil Partnership  
Other .....

14. Please state which ethnic group you consider yourself to be:

.....  Prefer not to say

15. Please tell us your religion or belief:

.....  Prefer not to say

16. Do you consider yourself to have a long-standing illness or disability?

Yes       No

17. Do you care for someone with a long-standing illness or disability?

Yes       No

18. How would you describe your sexuality?

Heterosexual or straight       Prefer not to say  
 Bisexual      Other .....

19. Are you pregnant or do you have a child under two years old?

Yes

No

Prefer not to say

20. Have you undergone gender reassignment?

Yes

No

Prefer not to say

21. Please tell us the first 4 or 5 characters of your post code (please note this does not identify a street or house)

eg such as .... TS3 6 or NE15 8

--	--	--	--	--

22. Are you a parent or guardian (or grandparent) who generally has to accompany a child or young person to their GP appointment?

Yes

No

**Thank you for completing this survey**



## Appendix 4: Stakeholder briefing

### Background and previous engagement description.

#### Plus:

On 01 April 2016, NHS Hartlepool and Stockton on Tees Clinical Commissioning Group (the CCG) assumed delegated responsibility for the commissioning of primary medical care services and is working closely with NHS England to determine the future of the three practices. There is now a need to engage with local patients and stakeholders to determine the future service specification for these local GP services with a view to re-procuring services before the end of the current contract extension on 31 March 2017.

This could potentially be one larger contract which would fit with the national strategy of moving towards larger practices which is deemed to be more sustainable within the financial model available. There is likely to be changes to the way the GP services are contracted and there may be a change to the provider of the services as a result of the tender process.

However, there will **not be** changes to the range of services the new provider has to deliver - all GP practices need to deliver the same primary medical services irrespective of the contract type. There may also be changes to the practice premises from which services are delivered.

The main reasons the CCG has decided to do this is because:

- While there are other practices nearby, they do not have the capacity to take on more patients from these practices;
- There are particular health needs in the local communities.
- It supports the national and local strategy of larger practices to ensure sustainability and enable the commissioner and provider to explore new models of care that help address the pressures faced by General Practice currently;
- It supports the developing local strategy for General Practice which is focussed on ensuring the sustainability of General Practice in the area in the future.

### Communication and Engagement

The CCG and NHS England has written to patients registered with each practice to reassure them that there will be no changes to the range of services delivered.

It also explains the pre-engagement process and includes a patient information sheet, and survey with an option to attend the following patient information sessions to raise any questions or provide comments and attend a focus group run by a local community and voluntary sector organisation. They will be asked to participate in the consultation once a new model has been developed.

There will also be on-street surveys, since there is concern that many patients in some areas in these localities may not return the paper surveyor complete it online.

<b>Patient Information Sessions</b>		
	When	Venue
Session 1	Wednesday 22 June 5.30pm – 6.30pm	Throston Youth Project (Formerly Boys Welfare Centre), Wiltshire Way, Hartlepool, TS26 0TB
Session 2	Monday 27 June 10.00am – 11.00am	Rossmere Youth Centre, Rossmere Way, Hartlepool, TS25 5EB
Session 3	Thursday 30 June 6.00pm – 7.00pm	Owton Manor Community Centre, Wynyard Road, Hartlepool, TS25 3LQ

As part of the process, the CCG and NHS England would like to engage with the patient population and local stakeholders to ensure they understand what is planned, and have the opportunity for any queries to be clarified and to share what is important to them in relation to these proposals.

The CCG and NHS England will also engage local stakeholders in a discussion about what the model could look like, based on the 2014 feedback and additional feedback during May 2016.

## Appendix 5 – patient information sessions

Each session was opened and introductions made by Mrs Harrison. She explained that all patients over the age of 16 were sent a letter, patient information and a survey. They were also to attend one of the patient information sessions to give their feedback and views.

Over 2,000 surveys had been completed and returned prior to the patient information session, around half from on-street surveys.

Session 1 - Wednesday 22 June 2016, 6.00pm – 7.00pm, Throston Youth Project

Present:

Four patients (including one Patient Participation Group member and one Bishop Cuthbert Residents Association member)

Councillor Paul Beck, Hart Ward

In attendance:

Ms Ali Wilson, Chief Officer, NHS Hartlepool and Stockton CCG

Ms Wendy Stephens, Primary Care Contracts Manager, Cumbria and the North East, NHS England

Miss Kelly Wilson, Primary Care Business Manager (GP Team), NHS England

Mrs Sam Harrison, Senior Communications & Engagement Manager, North of England Commissioning Support

Ms Lynne Cooke, Communications & Engagement Assistant, North of England Commissioning Support

Miss Natalie Whitworth, Groundworks North East – Independent scribe

Comments were made that this was an impressive amount of surveys [that had been returned]. One patient asked what was coming back in the surveys. Mrs Harrison explained that these are yet to be analysed, so it was too early to tell what the themes were.

Ms Wilson informed the group that she had wanted to come along in person to hear what patients had to say about local GP practices. Previous engagement was carried out back in 2014, and from that, the CCG acted on the information gathered. They did look for a new provider to run the contract at Hartfields Medical Practice, but unfortunately this was not successful therefore they are looking at the contracts for Hartfields Medical Practice, Fens Medical Centre and Wynyard Road Primary Care Centre. Ms Wilson wanted to know from patients if anything has changed from the last time the engagement was carried out, i.e. what was important? etc. Ms Wilson wanted to stress that this work would be an add-on to other previous engagement work, and not instead of.

The Patient Participation Group representative said she had been told that IntraHealth did want to continue as the provider, however the bidding process made it impossible for them

to secure this. Ms Stephens explained that the current contract has been extended until March 2017. She was unable to discuss details of individual bids, however she could say that certain criteria is set for bidders to meet which are based on quality of service to be delivered and also including some based on finance. Unfortunately, bids that do not meet this criteria are deemed to be unsuccessful.

Ms Stephens said that local practices were also given the opportunity to deliver the service as a branch surgery. Someone said that there are general concerns that a provider could decide to close a branch surgery “further down the line”. Ms Stephens explained that a provider could not decide to do that on their own, only the CCG can make that decision following submitting an application..

Ms Stephens explained the differences in the different type of contracts that some providers have. Someone commented that five years is not long, and this may be what is putting providers off bidding for the contract. Another person also asked “why can’t you make the contract longer to make it more attractive to providers?” Mrs Wilson and Ms Stephens agreed that this was something that could be considered in the future.

Councillor Beck commented that “Hartfields is a superb establishment, it’s one of the best in Hartlepool.” He also said that he is concerned about the frail and elderly and that they will not be in a position to travel to a distant surgery. He also said his other concern is about the number of new developments to the local area, with “500 new homes are expected to be built”

A patient who works for Bishop Cuthbert Residents Association suggested that the practice promote and advertise themselves, within the local community and suggested an information sheet about the practice could be included in new homebuyers welcome packs. “This may increase the footfall for the practice.” Ms Stephens said that if they did this, they would have to include all local practices in this and that there are strict rules about how a GP practice can advertise itself.

The representative from the Residents Association told those present that the Association would be holding a community day on 27 August. She suggested this would be a good opportunity to promote the practice and invited anyone who would like to come and do this, to come along. She also suggested doing a leaflet drop to encourage people to join the practice and asked if this would make a difference to the work that is going on. Mrs Wilson explained that the CCG and NHS England really need to hear from existing patients who are already registered at the practice.

One of the patients observed that some people who are living in the communities around Hartfields do not know that it is there. This includes young families on the estate. There was a brief discussion about the possibility of developers including information about Hartfields Medical Practice in ‘welcome packs’ for new residents again. Ms Stephens explained that there are strict rules as to how a practice can advertise for new patients. They are only allowed to say that they are there and are accepting new patients.

Patients present had concerns about the availability of appointments: “It’s difficult to get immediate appointments at this and any other practice, if services merge this would increase the problem 2 or 3 fold”.

Ms Wilson explained that there is a national shortage of GPs, not only in this area, but in the country. Doctors coming out of medical school are not choosing to be GPs, and the few that are, are attracted to bigger practices, as they are better for their careers. This shortage of GPs; this all adds to the current issues of finding a provider for these primary care services.

A patient also raised his concern about parking: “If we have to move to Throston Medical Centre, where would we park? The parking around there is a massive issue. Hartfields has great parking facilities”.

Ms Wilson asked the group what other services they would like (that they are currently not getting).

One patient said “I don’t go very often, but I can’t do anything but praise the staff in the practice, especially Dr [name]. [name] on reception is great, the first person you see when you walk in is so important”.

Another patient said “I think it’s good how doctors are talking to patients over the ‘phone to see if they need an appointment, but will see them if they need to.”

The group then had a short discussion about the One Life Centre (walk-in element) and their different experiences. One said “it’s atrocious and I had a really bad experience”. Another said “I’ve heard good and bad reports about it” and another said “we only get to hear about the bad things, never the good things”. Ms Wilson confirmed that there are practices based within the One Life Centre (who get really good feedback), and she explained that the walk-in service is a separate service.

One suggestion by a patient was to make better use of the practice nurses. “ They can deal with non urgent appointments”. One patient commented: “I’d rather see a practice nurse than a doctor”.

Ms Wilson commented that many GP practices have multi-skilled teams, as sometimes a GP may not always be the best person to see in a practice for particular individual needs.

A patient went on to comment about problems booking appointments: “You can only ring at 8am and 1pm, by the time you get through the appointments have been taken up”

Another patient commented further that “patients never get to see the same GP twice, and ...patients want continuity.” “If it’s a one off appointment, you’re not bothered about who you see, but if you have a long term condition or a recurring ailment it would be good to see the same GP so that you don’t have to keep repeating your story”.

Another patient said that her husband had to push quite hard for a referral he wanted, but got it in the end and was impressed at the speed the referral was made, and how quick he got an appointment – she said it is an “excellent service”. Ms Wilson explained that for some patients who do not use services regularly, they are often quite surprised at the speed of services as most are seen within 18 weeks.

With regards to the survey, one patient wanted it noted that he thought question 11 was quite confusing, saying it is not clear if someone responding had to rate each option out of 5 or rate them overall out of 5. He explained that he rated them all out of 5. He thought this problem would “skew” the responses. Mrs Harrison commented that patients had completed the surveys in both ways and could choose to. Ms Wilson explained that either way, when the responses are analysed, the feedback would still show what is important to patients and will not change what people say. His concerns would be taken into consideration for the analysis and report.

Councillor Beck said that since the last survey (in 2014), he had been receiving concerns from elderly patients about their lack of confidence in doctors who did not understand their needs or problems. He said “this isn’t always to do with a language barrier, they are concerned they are not being understood”. Ms Wilson said that it was to be hoped that a GP would repeat back to the patient his or her understanding of what the patient had said at the end of their consultation. The GP should confirm with the patient what they understood the issues to be and agree with the patient what their priorities are and agree the course of treatment. Ms Wilson said “It’s important that the GP has a good rapport with a patient, and that they can give them confidence in their abilities. GPs need to have good communications skills.”

One patient commented that “Throston Medical Centre is thriving” and asked “do they not have any issues?” Neither Ms Wilson nor Ms Stephens said they were aware of any issues (although no practice is perfect). Ms Wilson agreed there are quite a lot of patients registered with that particular practice.

Another patient commented that Hartfields has “much better parking and facilities compared to Throston Medical Centre. Why can’t you close Throston and move their patients to Hartfields?” Ms Stephens said that neither NHS England nor the CCG is able to make any practice close under those circumstances; Throston currently have a contract in perpetuity.

There was a question asking for the contract to be longer: “Can you make the contract 10 years instead of 5?”. Ms Wilson and Ms Stephens confirmed this is something they will look into.

Someone asked “why are new providers not attracted to the practice?” Ms Wilson said that “It’s difficult to say, some practices who have less than a 6,000 patient list are struggling to secure new providers. A lot of current GPs don’t want the stress of running a practice due to the responsibilities involved, they’d rather be just employed by them.”

Councillor Beck commented that even though there are new people moving into the locality, they may wish to remain registered at their the current Hartlepool practice to make sure they receive continuity of service.

Mrs Harrison reaffirmed that the engagement period would end on 30 June and that the report on the feedback to the CCG and NHS England is due to be submitted on 4 July. A formal consultation is planned to start on the week commencing 11 July to 5 September, but that “at this stage, we have no idea of the basis of the consultation until all the feedback has been received”.

The patient from the Residents Association said she is going to look into

“getting the word out about the practice, so that local residents are aware of its existence and to encourage them to register.”

Ms Wilson summarised the priorities of the group so far:

- To be seen straight away or at least have a telephone call with a doctor
- Have access to a range of different types of health professionals within the practice
- Continuity of GPs for patients with long term conditions, repetitive ailments and the elderly
- Have a longer contract, again for continuity to help build good patient relationships and will help attract other providers

Ms Wilson said she is enthusiastic about getting the message out there that Hartlepool is a great place to live and work, as this may also encourage more GPs to work in Hartlepool. She said “If this practice closed, it will be a great shame for the community”.

Councillor Beck said that there are concerns from local people about the additional pressures of asylum seekers and refugees into the area and their fears this may put a strain on local services with a “knock on effect” on the NHS.

Ms Wilson explained that it is the CCG’s job to marry up what patients’ needs are, to what realistically can be done”.

One of the patients asked “why can’t we pre-book appointments anymore?” Ms Stephens explained that different practices run their appointment systems in different ways.

One patient commented that “Lloyds pharmacy for Hartfields lets the practice down. Prescriptions aren’t there or ready when they are supposed to be, which means repeat visits, which is annoying and inconvenient. There is also a lot of wastage with drugs, as many people are just stock piling drugs and costing the NHS a lot of money which could be used in other areas.”

Someone asked “What will happen if the practice is closed? Will there be enough capacity with other local practices to take the current 3,500 patients?”. Ms Stephens explained that

generally, that if a practice does close, the situation is reviewed and capacity in the local area is taken in to consideration.

A further question was asked about how would local practices cope? Ms Stephens said that it was not being contemplated yet and assured those present that whatever happens, all patients will be provided with primary care services.

Ms Wilson and Mrs Harrison thanked everyone for attending.

## **Session 2**

### **Monday 27 June 2016, 10.00am – 11.00am, Rossmere Youth Centre**

In attendance:

Matt Brown, NHS England

Wendy Stephens, Primary Care Contracts Manager, Cumbria and the North East, NHS England

Laura Brunton, NHS Hartlepool and Stockton-on-Tees CCG

Sam Harrison, North of England Commissioning

Lynne Cooke, NECS

Lauren Henry, Groundworks North East – Independent scribe

There were 6 patients present (including 1 Fens Residents Association member) and 2 local councillors.

The session was opened and introductions were made.

It was explained that all patients over the age of 16 have been written to and have been invited to attend one of these sessions or complete the survey to provide their feedback and views. Currently over 2,300 surveys have been completed and returned, some of these were from on street surveys. The previous engagement work carried out in 2014, will be added to this engagement, and the group were reassured that none of that was being forgotten about. The purpose of this session is to listen to what people have to say, and to see if anything has changed since 2014.

NHS England informed the group that the contract for Fens Medical Centre (FMC) was due to end in March 2017 after being extended. Now decisions need to be made on what happens next, therefore it's important that NHS England and the CCG know what is important to patients. It was explained that a new provider was sought for Hartfields Medical Centre, but that this was unsuccessful, so now they are looking at procurement for the three local practices.



Matt Brown explained a little about how the different types of contracts work, and that FMC has a time limited contract, therefore there is no choice but to go out to seek a new provider, but appreciated how this is frustrating and unsettling for patients.

One patient commented that he understood the need for the review and was pleased that all the feedback from 2014 was still being taken into consideration. He didn't think that any of the concerns or priorities from 2014 had changed. He expressed concerns about financial viability and was worried that NHS England weren't making a viable offer for companies to tender.

Question - All three practices are important, how would other practices in the town cope with 7,000 extra patients, when services are already under pressure?

Matt explained that the aim is to get value for money for the tax payer, whilst making the offer attractable for tenders. Part of the offer is the length of the contract. Providers tend to be attracted to the longer contracts, therefore it's not just about the money. Terms and conditions also need to be considered. It needs to be a viable practice and there is no financial benefit in not having these practices, as there is no incentive financially. NHS England are currently looking at having a minimum 5 year contract, this should help in terms of recruitment for GPs. Three year contracts are no longer an option.

Question – Between the three practices, Fens has the most patients at the moment. Is there an amount of patients to make it viable?

NHS England response – Potential bidders do usually look at larger practices, the more patients the better as they get paid per patient. Usually a practice with less than 2,000 patients is very difficult to secure a provider for, as it is unlikely it would receive any bids. By bringing the three practices together, it may make the contract more attractive for potential bidders, but even with a patient list of 5,000 or below, it will be difficult to secure a bid, but not undoable.

Question – There is a major housing development being built in the area very soon, has this been taken into consideration?

NHS England response – Yes, this has been taken into account. We tend to find that buyers for the new houses will be migrating from another part of Hartlepool rather than them being new patients.

Question – In the current climate (with the news of us leaving the EU) will contracts be affected?

NHS England response – Currently funding is provided based on approximately £80 per patient, there will be no immediate changes to that, but the future is unknown and there will be challenging times ahead for us based on the economy.

Under the strategic direction, the CCG will be looking to focus models of care aimed at preventing patients from being admitted to hospital.

Question – There are a significant amount of Europeans living in the town, what would happen if we lose these?

NHS England response – We are currently living in uncertain times.

Question - Is there a contingency?

NHS England response – National contract is in place but this doesn't affect local work or this engagement. The strategic direction is to invest more money into primary care.

Question – If you combine practices, for example, Wynyard and Fens, what about size, facilities and accessibility etc. has that been considered? What would the process be?

NHS England response – With regards to premises, NHS England work with NHS Property Services who do the modelling. Due to where it is, it would not be possible to extend FMC building, and there is no spare space within the building. This building is not owned by the NHS either, it is owned by a private landlord.

Wynyard Road Primary Care Centre does have a lot of space and it is being looked at how services can be delivered. Estates are being consulted to see how this could be utilised.

Question – Could Fens be used like a satellite base for Wynyard?

NHS England response – There are different ways of doing this. National money is available for estates but first the future model needs to be decided upon, before deciding upon estates.

NHS England said “It would be good to have one procurement, keeping Fens and Wynyard Road, would be ideal and have both surgeries under one management”

It was commented that you couldn't move Fens patients to Wynyard Road, as a lot of patients live within walking distance of FMC or live on a bus route, where it is easy to get a bus to it. The Wynyard Road practice is too far to walk to and it isn't easy getting public transport to it. This would then put pressure on the other practices within the town, where people can easily get a bus to.

Question – We hear that some GP's are moving to Australia. Will you have enough GP's to staff the practices?

NHS England response – GP workforce is a challenge, particularly in the North East. The government are putting money into training more GPs, however this will take time. They are exploring how they can get GPs back into the workforce who may have left, and also to encourage new doctors to become GPs to help with this problem. The CCG confirmed that GP recruitment is a top priority.

It's important to create an attractive package, to make sure doctors have diverse and learning opportunities with good connections, and that it's not just about the money.

Patient comment: “Fens was transformational, it stopped patients from having to travel further. A lot of people moved to Fens as they have problems with the their previous surgery”

“We moved to the practice as it was easy to get to and the chemist is just around the corner, which is very convenient and it works well. If it changes, it will inconvenience a lot of people”

“I’ve learnt a lot this morning”

Question - £80 per patient, what is that? It doesn’t seem like a lot.

NHS England response – Broadly, GPs are paid about £80 per patient. A lot of patients never visit their doctor, however some need more complex care. Practices can earn extra money through quality initiatives and also by offering enhanced services. They also don’t have any rent and rates to pay out, £80 is the flat fee.

A discussion took place about future 7 day access to GP services, and how local GP practices would need to work together to deliver this, as smaller practices are unable to do this on their own.

Question – How do GP Federations affect this?

NHS England response – That shouldn’t impact this work. Federations are a fairly new entity and are about sharing resources i.e. one larger practice opening on a Sunday for another practices patients. Looking at how they can work collectively. It could help create more stability in the area, which makes it more attractive. These are self created, NHS England and the CCG are not linked with them.

Matt suggested to the group about going on to the Kings Fund website, and watch the ‘day in a life of a GP’ video. This offers great insight into what pressures GPs face.

Question – Would potential providers have to tender for all three practices?

NHS England response – Yes, we anticipate that the three will come collectively.

Question – Could it end up being owned by someone like Virgin, like the One Life Centre?

NHS England response – It would be offered to the open market. All GP practices are classed as private businesses, therefore any local practices or someone like Virgin could bid for it. Existing staff would have the opportunity to transfer their employment to the new provider if they choose to.

It is expected there will be one contract but it’s not known yet if this will be delivered over 3, 2 or 1 sites. NHS England explained that they tell the provider how many patients the service needs to be provided to and over how many sites. These sessions are to help form the model that goes out to consultation.

Question – Will it be based on what patients want?

NHS England response – Mostly, but there are also different factors to take into consideration i.e. estates etc.

It was explained that this is a two stage process. Looking at what people are saying now and from what they said back in 2014, then there will be a period of formal consultation, where patients will be asked the same questions again.

Question – Do you think you will get a bidder?

NHS England response – The honest answer is, we don't know. It needs to be a good, attractive package.

Matt asked the group if there is anything else that patients want to know?

Patients are worried about continuity and access.

One patient complained that he was unable to get an appointment for two weeks. It was explained to him that different practices run different appointment systems.

Having a combined site i.e. a branch set up would mean patients could be seen at another practice if the branch was closed. There would be better employment opportunities under one contract.

A telephone triage system is good as patients can speak to a doctor and then they can decide if they need to be seen or not.

NHS England explained that they don't usually dictate appointment systems to providers, but if a lot of patients are saying the same thing and there are strong feelings for something, they could add it in as a clause into the contract, but they need to be careful not to be too descriptive as it may put bidders off. It was confirmed that the successful bidder would be chosen on quality, therefore if there was only one bidder, but they did not meet the quality standards, they would not be awarded the contract.

One patient who is also a member of the Fens Residents Association, said that the letters that were sent out two years ago caused a lot of worry, and created an exodus. They were then left to reassure people, as they had thought that the practice was closing and they would not be able to join another. He had to explain to them that you can't be refused unless you are on the dangerous patients register. He said he thought the patient letter was a lot more subtle this time and worded much better. He asked that with this and future work on the consultation, that the NHS are mindful to reassure patients that no one will be left without access to primary care. He was disappointed that the resident association had not received the stakeholder briefing, as last time they were heavily involved with this. He was reassured that his contact details would be added to the stakeholder list and the stakeholder briefing didn't contain much more information than the patient letters and information. He confirmed that their July newsletter is just about to go

out, which reassures residents/patients that there will be no imminent closure to the practice.

The councillors asked if it would be possible to receive an interim update once this engagement work has been completed. It was confirmed that they would be provided an update via email.

“People still want a surgery in Fens that they can walk to, it might not be the same set up as it is now, but still want a service with no charge in parking”

Has the impact on the local community been considered if this practice were to close? Many people visit the shops on their journey to and from the practice, they also engage with each other, so they could be potentially losing a social side as well.

It was explained that the building that the Fens and Hartfields practices are in are not owned by the NHS, they are owned by a private landlord therefore if these were still needed, negotiations would need to take place, which they currently are. Wynyard Road has a long term contract.

One of the attendees commented “It is imperative that we keep all three practices open”.

### **Session 3: Thursday 30 June, 6pm to 7pm, Owton Manor Community Centre**

In attendance:

Ms Wendy Stephens - NHS England

Mrs Sam Harrison – North of England Commissioning Support

Mr Andrew Robinson – North of England Commissioning Support

Ms Leah Remington – Groundwork North East and Cumbria

There were 6 attendees, all confirmed that they were registered patients at one of Fens, Hartfields or Wynyard Road practices.

Introductions were made and background given. It was explained that engagement had taken place in 2014 around the practices, but that Hartfields had been unsuccessful in finding a new provider. The contracts for the practices were then temporarily extended, with all contracts now being due for renewal.

The aim of the current engagement is to get patient views and give people the opportunity to express any concerns. Attendees were asked if there were any initial questions to start the discussion.

Question: What factors are being considered and is the focus purely on patient numbers?

NHS England response: Patient numbers is one of the factors considered. These are considered from the date the practices opened to factor in growth. There are 3 contracts with small patient lists, with just over 7,000 patients in total. The previous experience showed that few providers want to deliver a service with such small numbers of patients. Numbers are always a factor, but also issues like housing growth, patient population and willingness of providers to provide the service are taken into account.

Question: Are the social and demographic aspects of the area also considered? The geographical location of 2 of the practices is close – if one is closed and not the other, consideration will need to be given to the facilities as a priority.

NHS England response: Premises will be one of the considerations. Demographics will also be looked at, along with public health data around health inequalities and deprivation.

Question: Will these factors be looked at individually for each practice, or collectively for all 3? Will the factors just be considered at this one specific point in time? The Hartfields estate 'grows by the minute,' and in 5 years' time it will be likely to be double the size.

NHS England response: As well as looking at the number of patients registered, housing growth is also considered. However, not everybody living in new houses will necessarily register with these practices.

Question: There are plans to build 2,000 homes on the west side. Is there also a plan for a new medical centre to serve these homes?

NHS England response: There are no current plans for a new medical centre.

Question: Isn't there a medical centre included on the plans for the new housing?

NHS England response: It is common for developers to include medical provision on housing plans. However, there is no guarantee that such medical provision will be commissioned.

Comment: If there is the option of another medical centre, thought should be given to Fens.

NHS England response: Consideration is being given as to how best serve the whole area now and into the future.

North of England Commissioning Support comment: There will be a public consultation over the summer on what the future could look like. This will take place over a period of 7-8 weeks. The timetable is driven by the contract end dates.

Comment: I am disappointed that there has been no engagement with the local residents' association. The Chair of Bishop Cuthbert hasn't been involved. I am also disappointed that there has been no engagement with the patient participation groups at the practices.

North of England Commissioning Support response: Information had been sent to all three practices, and other opportunities to engage are also available. However, it is also recognised that the patient participation groups want to take part in discussions, and we will give a commitment to make sure they have the opportunity to do so going forward.

Comment: the onus should be on you [the NHS] to contact us [the patient participation groups].

North of England Commissioning Support response: All patients had been written to with information about how they can get involved.

Comment: That isn't the point.

Question: Will NHS England and the CCG 'keep on doing this until they get the right answer?' The patient participation group in Hartfields is very active and it feels 'odd' that we [the PPG] should be 'ignored.'

North of England Commissioning Support response: The practice managers have been made aware of opportunities for people to get involved. Direct contact details for patient participation group members are not available due to issues such as confidentiality. However, there is a commitment to make sure patient participation groups are involved going forward.

Comment: 'Ali Wilson knows who we are.'

North of England Commissioning Support comment: An assumption was made that information would be passed to patient participation groups by the practices. However, that has obviously not been the case. That situation will be rectified going forward.

Comment: Information should be sent to every patient, but people don't always feel competent or able to be involved. Where there is a democratic structure [such as patient participation groups] it's an obvious conduit. This should be looked into – the patient participation groups and residents' associations shouldn't have to 'shout.'

North of England Commissioning Support response: Patient participation groups are on the list of stakeholders. Apologies that the assumption has been incorrectly made that information would be passed to patient participation groups via the practices.

NHS England comment: Local councillors have also been involved, but it is acknowledged that some groups may not have received the information in relation to the engagement. If there are any ideas of how to better engage / who to engage with, these would be very welcome. However, practices have been written to, posters have been put up and patients have been written to.

North of England Commissioning Support comment: There have been concerns that some patients may not have had the opportunity to complete the questionnaire, so door-to-door surveys have also been conducted. This has included at least 350 door-to-door surveys

per practice area and, in total, over 2,000 surveys have been received from patients to date.

Comment: There has not been a poster for the focus group in the practices. Patients need to know if information has been sent to the practices.

NHS England response: A letter was sent to all registered patients. This asked people to respond if they were interested in attending a focus group.

Comment: This wasn't made clear in the letter, and no dates were given in the letter for the focus group. Once again the onus was put on patients to find out about it. It is also 'crazy' that the focus group has been held on the same day as the patient information session.

Question: Have the practices been meeting needs since 2007/8 or are there gaps that need to be filled?

NHS England answer: Delivery against the contracts has been looked at, including any gaps. NHS England is working closely with the CCG and looking at this as part of the review. Service delivery has been very good, but there is also the need to hear what patients think.

Comment: I describe myself as an 'occasional user.' I have had a good experience, but I wonder about others.

NHS England response: Generally what we find is that there are issues around continuity of care / workforce and access to GPs. Practices are struggling to get GPs, and access to GPs is an issue that is often raised.

Comment: I have seen different GPs over a longer period of time, but there has been continuity of care provided by the locum contract. The continuity of care with locums has been good and systematic. It is not just about the individual GPs, it is also about how the practice organises continuity of care. This also depends on reception staff – at Wynyard Road the reception staff are excellent and have good training. They work as a team with quality and commitment.

Question: Can we have clarity that nobody is committed to go ahead with the contracts for any of the three practices?

NHS England response: We do not know at this time. Part of the exercise is to look at the three practices to see how they can go forward. Hartfields is a small list, and it's difficult to get providers. Contracts have end dates, and it's not possible to keep extending them – procurement law doesn't allow it. It might be more likely to get a provider by combining Fens and Wynyard Road but at this point we are not sure of the model.

Question: Could the current provider run all three practices?



NHS England response: Not necessarily. An exercise will be undertaken that will score providers against clinical criteria. If a new provider is given the contract, existing staff will be given the opportunity to transfer to the new provider.

Comment: This all seems 'a bit up in the air.'

NHS England response: At this point it is.

Question: Who is currently running Hartfields?

NHS England response: Intrahealth.

Question: Is there any performance data for the practices on the CQC website? Have there been any recent CQC inspections in the practices?

Comment: Fens was inspected about 3 weeks ago. Patients could be left 'high and dry' if the situation is left 'up in the air' for a prolonged period of time.

NHS England response: People will be kept informed and there will be a public consultation on what the future of the practices might look like. Following the consultation, the CCG will make a decision, which will then be followed by procurement. Patients will be kept informed as the process progresses.

Question: Will we be in the same position in two years' time?

NHS England response: The contracts can't generally be extended again. Procurement is now required. It is hoped that a longer contract could be procured – possibly a nine year contract with the opportunity to extend this if the quality is good and patients are happy. In theory it is only possible to procure a 5 year contract, but work is being undertaken nationally to extend that.

Comment: 7,000 patients could have to find another GP if this doesn't prove successful.

NHS England response: The CCG will need to determine what to do in that situation. If unsuccessful, an extension would normally be granted, but this is time limited and then the process would have to be repeated.

Question: How many patients are registered at each practice?

NHS England response: Fens 2,729, Hartfields 2,417 and Wynyard Road 2,022.

Comment: Fens has the highest number, but there isn't a great deal of difference.

North of England Commissioning Support comment: Historically, more engagement has come from Fens patients. That is also the case with the patient surveys currently being returned.

Comment: I disagree with that.

North of England Commissioning Support response: Initially there has been a peak of Fens patients responding to the patient surveys.

Comment: When the survey came out for the previous work, there was an event where carers helped people to complete the surveys. There wasn't the opportunity to do that this time, as letters were sent through the post. The population in the Hartfields area has special needs due to its demographics. The patient participation group could have supported this. A lot of information needs to be communicated.

North of England Commissioning support response: Analysis of the surveys will show whether those providing feedback are in the same proportion as the population demographics.

Comment: There is an ageing population in every area now. Older people should be offered help to participate.

Comment: Patient participation groups are very active and have good access to patients, but they can't do anything if they don't know what's happening. The next patient participation group meeting isn't until September, but the groups would be willing to have an extraordinary meeting.

North of England Commissioning Support question: How much notice would be required?

Response: A meeting could be arranged with 1 weeks' notice.

Comment: Some parts of the patient survey are confusing. For example, patients were asked to rate what they thought was important about the practice on a scale of 1 to 5. The use of the 1 to 5 scale confused a lot of people.

North of England Commissioning Support response: That won't make a difference to proportions but the difference in the way people had responded will be considered.

Comment: It was a good question to include in the survey, but it was asked in a way that was hard to understand.

NHS England question: Did Healthwatch look at the survey before it went to patients?

North of England Commissioning Support response: No, they saw the letter, but not the survey. This will be picked up going forward.

North of England Commissioning Support question: Does anybody have any further concerns they want to discuss?

Response: Agree that Hartfields reception staff are 'second to none.' The patient participation group has a great relationship with both the clinical and non-clinical staff.

NHS England question: How is the continuity of staff and use of locums?

Response: The practice has struggled with that. They would have liked to keep some of the staff, but they were on a contract. The problem is a nationwide shortage of GPs.

NHS England comment: Unfortunately some doctors don't want to be GPs now.

Comment: That could be down to the pressures put on GPs.

Comment: There is no excuse for not conversing with people. For example, Healthwatch went and took time to talk to older people living in care homes – they didn't just put information through the door, they spoke to people. More effort is required to engage effectively.

North of England Commissioning Support question: Is there information in the Healthwatch report that would be relevant to be considered as part of this process?

Response: The report is in the public domain and can be used if required.

North of England Commissioning Support question: Has anybody seen the engagement report from the work done 2 years ago? The previous report is full of information and feedback that people gave in relation to the practices. This information and feedback will also be used now as part of the current engagement. As this was fairly recent, and most people don't change their GP very often, it wouldn't be right not to include it.

NHS England comment: Currently, not even all training places for GPs are being filled. It may be more attractive to some doctors to work in hospital settings, and some people don't want to become GPs as much as they used to. This could be because they don't want the additional pressure of being independent contractors. New contracts now encourage different types of provider, but even these don't want to do it as much. It is a difficult situation, and the national view from the Department of Health is that GP practices should be bigger going forward to help them survive.

Question: What will the difference be if 7,000 people are put into the same practice, where there are still 4 GPs?

NHS England response: A lot more is involved within the practice than just seeing a GP.

Comment: It won't make any difference to whether patients can see a GP. The NHS 'lives in a cloud generated by the Government.' The whole ethos of GP recruitment should change.

NHS England response: There are moves towards change. The NHS Forward View sets out a five year vision to make GP practices sustainable.

Comment: However much GPs are paid, they don't want to come to the North East.

NHS England response: This is a national problem, not just in the North East. Sunderland has recently recruited eight GPs by being more creative. However, some GPs don't want

to be salaried to a practice – they want more freedom to do what they want to do as locums.

Comment: The NHS should put pressure on the Government to do something about this.

NHS England response: That is being looked at.

Comment: It is a similar situation in dentistry and physiotherapy.

North of England Commissioning Support response: It is not possible to comment on national policy.

Question: Who has control over the training of doctors?

NHS England response: It is the responsibility of Health Education England to oversee the long-term future of training of clinicians.

Comment: The problem is that it is all science-based at A-level. Often people good at science are not always good ‘people people.’

North of England Commissioning Support response: Rounded individuals are being sought.

Comment: Progress is slow. We were talking about this sixty years ago.

Comment: I don't agree that it would be better combining the three practices. There would be problems around parking and people would have to travel further. Patients should be able to access GP practices easily without becoming distressed.

NHS England response: Although there might be one contract, the service could still be delivered from the different sites. There are different possible models.

Comment: People don't like changing their GP practice and they should have easy access.

NHS England response: Access will remain local, but each practice operates its appointment system differently.

North of England Commissioning Support comment: Where one person thinks something works well, another person is likely to think that it doesn't. There needs to be some flexibility.

Comment: Doctors prefer being in practice with other doctors – especially when they are younger – but they don't necessarily have to be in the same building.

North of England Commissioning Support question: Are there any further questions?

There were no further questions.

NHS England comment: The main points from the discussion are as follows:

- The people being engaged, and the way they are engaged, should be looked at
- Geographical location and being close to the GP practice is important
- Consideration should be given to how the creation of one big practice could affect access
- Factors such as new building development need to be taken into account going into the next stage.

NHS England question: Would anybody like to add anything else?

Comment: High level of satisfaction with Wynyard Road.

Comment: The same level of satisfaction exists for Fens and Hartfields.

Comment: Please make sure that everybody is kept informed going forward, both as individual patients and also as patient participation groups.

NHS England comment: Everybody present will be kept informed and contacted re the next stage of the process.

## Appendix 6: Patient Focus Group

Fens ,Hartfield and Wynyard Care Practices

Thursday 30th of June

Focus Group Notes

Present

Angela Hughes

Heather Collins

Donna Deleu

Scribe – Natalie Whitworth ( Groundwork North East and Cumbria )

Too soon for a focus group, as questionnaires were only sent out two weeks ago.

We feel the decision has already been made, just going through the motions.

Where will residents from the new housing estate go?

You cannot expect elderly or disabled to travel, it is too much for them.

There are people that would like to join Hartfields practice, however with all the uncertainty are now waiting to see what happens, as they do not want to be moved should they come. What can we say or do to encourage people

Lots of people are asking at the Hartfields if they should look for another practice, we have lots of apprehension about the whole process.

Hartfields is handy for the elderly at the residential home on the estate; it would be difficult for them to travel anywhere else.

Fens's building is not fit for purpose it is an old dental practice, very run down, will this be renovated if any changes are in place?

Hartfields has a very good appointment system unlike others and provides an excellent service

Quite a lot of young families attend Hartfields why should they travel with babies?

The doctor at Hartfields is very good however he is not permanent, the current contract is putting of potential doctors.

Where will 6000 patients go?

Wynyard and Fens could merge they are closer to each other

The focus groups need to be promoted more; lots of people did not know about them, in fact Hartfields received the poster a day after one of the groups had taken place. The questionnaires and introduction is too long winded, needs to be condensed and it is exactly the same as what we have had previously, so there is a chance people might not fill it in.

There is a patient group that would be good to consult with about this.

You might have issues with regards to feedback from Wynyard patients as they are not very vocal.

Need to take into consideration there are no buses after 7 in Hartlepool.

Why has the survey been repeated?

Patients are starting to get fed up and just want a decision made, we all just want to know what is happening this has gone on for too long now.

We don't feel like the receptionists at the practices have been kept in the loop about the process and feel the best way forward for further consultation would be to do this and give us enough time to engage with patients going forward. We are the best position to encourage people to give you their feedback about what they would like to see happen.

Out of all three practices we would like Hartfields to stay and continue as it is.