

Wingate Practice Patient Engagement

Patient engagement
June - July 2021

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Introduction

This report has been produced as a result of the initial public engagement and dialogue which took place in June and July 2021.

The purpose of this engagement was to hear directly from the registered patients at the Wingate Intrahealth practice. This relates to services for approximately 3,000 County Durham patients.

Intrahealth Wingate GP Practice is commissioned through an Alternative Provider Medical Services (APMS) contracting route. The contract was due to expire on 31 March 2021; however, due to the extraordinary circumstances imposed by the Covid-19 pandemic this has since been extended to 31 March 2022

NHS County Durham Clinical Commissioning Group (CCG) have therefore needed to instigate this process to enable future planning decisions to be considered that will enable these patients to continue to have access to appropriate Primary care Services.

The comments provided by these patients will help the CCG and NHS England to understand what is most important about GP service, access to this service and how we could deliver these services for patients locally in the future.

GP practices such as Wingate are contracted to provide NHS services and it is our responsibility as a Clinical Commissioning Group (CCG) to oversee those contracts and ensure patients in County Durham have the best possible service.

At the start of the engagement process there were two main scenarios that were being considered:

- The practice is re-commissioned through a new contract. This may involve a procurement exercise where the CCG invite suitable providers (including the existing provider) to continue the service
- The practice list is dispersed – this means that the practice could close and all the patients registered at the practice would need to register at another local GP practice

Engagement approach

Specific approaches to conducting this engagement were needed due to the persisting social distancing requirements as well as the focussed nature of the audience that we needed to engage with.

Working together with NHS England, the CCG prepared a patient letter, set of survey questions which were to be posted out to everyone registered at this GP practice for the chance to comment.

The CCG also included the opportunity for staff from the GP practice to assist in the development of the survey materials to ensure that they were informed and aware of the planned discussions that would be taking place as part of this process.

Included with the information provided to every registered patient was a freepost envelope to enable individuals to send their completed survey questions back to the CCG directly at no cost.

In addition, an online version of the same survey questions was set up and the information about accessing it was included with the patients' letter to provide a choice for how individuals preferred to contribute.

Contact telephone and email details were also provided to patients at both the CCG and the practice should they have any further questions or wish to discuss additional support needs so that they could participate too.

A [visual summary](#) of the scenario covered by the engagement as well as a [Frequently Asked Questions](#) document were also produced and published on the CCG website.

Due to the targeted nature of this conversation – with a specific registered GP population – the online survey link was not publicised on the CCG website. This was to help us ensure that we focused on capturing the views of the patients directly involved in this particular conversation.

A stakeholder briefing was also produced and circulated to the local councillors in the immediate surrounding areas to the Intrahealth Wingate practice for their information.

The engagement took place over a 6-week period between June and July 2021.

Engagement feedback

Included below is the summary of the feedback provided by the patients from the survey questions asked. Where possible, key themes and matters that arise from the responses will be highlighted for further consideration. However, it is not the intention or purpose of this document to provide conclusions from the feedback obtained.

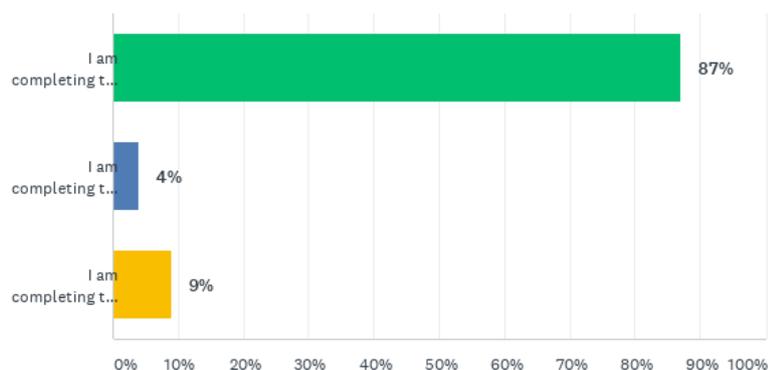
The purpose of this report and analysis is to appropriately present the findings from the patient engagement that have been collected.

In total, 821 responses were received for the survey. This represents XX% of the total registered population at the Wingate practice, providing a reasonable insight into the perspectives of these patients. Where different numbers of responses were received for individual questions, this information is provided in the subsequent analysis below.

1. Please tell us about you

In total 806 responses were recorded for this question. The vast majority, (87%) of the respondents were completing the survey questions for themselves n = 702.

There were also 32 responses (4%) from individuals who were responding for someone they care for that is registered at this practice.



Lastly for this question, there were 72 responses (9%) from a parent /guardian of a patient registered at this practice.

2. We want to know what is MOST important to you about your general practice... (Give a number 1 for most important through to 7 for least important)

In total, 677 responses were recorded for this question.

This question was asking the respondents to rank a range of aspects relating to their local GP practice service and help us understand what their priorities are from the range of options available.

The choices respondents needed to rank in order from 1 – 7, with 1 being the most important to them, were:

- Access to an appropriate clinician / range of staff
- Quality of care provided
- Distance to travel
- GP practice being accessible by public transport
- Being able to see the same person at the practice (continuity of care)
- Access to a pharmacy
- Opening times (such as evenings and weekends)

The graph (below) shows a composite of the responses for each of the seven categories. The coloured sections indicate the proportion of responses for that category for each of the various number rankings respondents gave them.

The category with the greatest response as '*number 1 importance*' (green areas) was 'Quality of care' – 51% (n= 317).

Quality of care was also identified as being the second '*most important*' category (dark blue areas) to 33% of the respondents (n = 208) to that question. These figures together show that 84% of the responses for this category placed it in the first or second ranking positions.

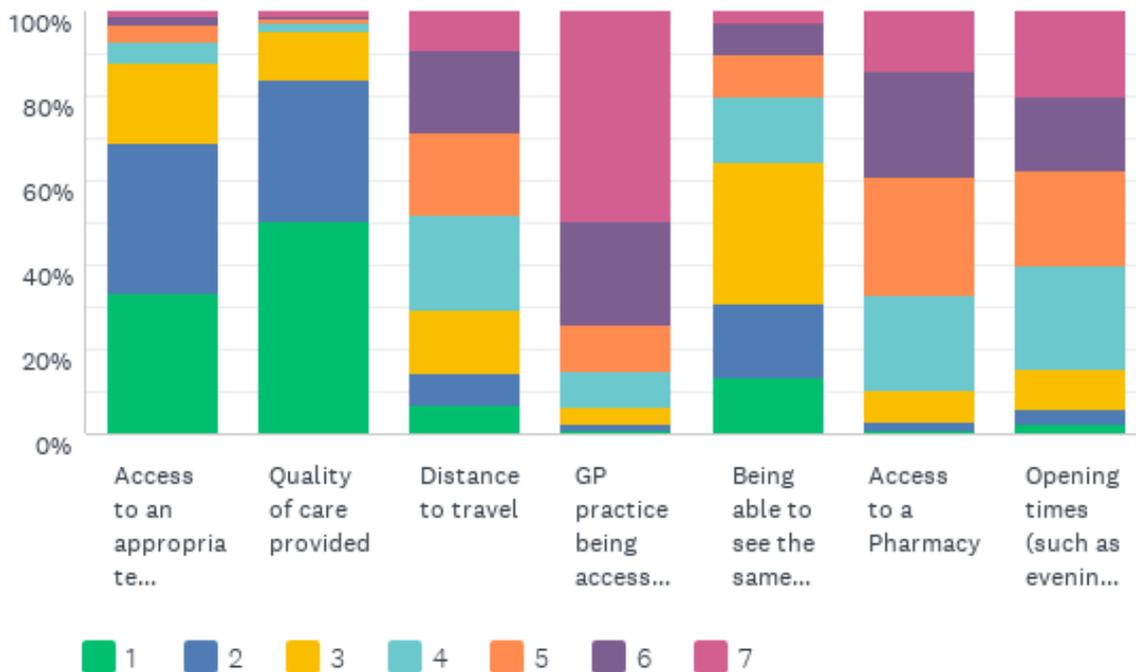
'Access to an appropriate clinician / range of staff' was identified as the number 1 priority category by 33% (n = 203) of the responses to that part of the question. 'Access to an appropriate clinician / range of staff' was also identified as the second priority category by 35% (n – 214) responses for that aspect.

Interestingly, only 14% (n = 81) responses, ranked 'Being able to see the same person at the practice' as their number 1 priority category. This category was chosen by the greatest number of respondents as their third '*most important*' priority with 34% (n = 173) of people making this selection.

The category with the highest level of response for being the '*least important*' (number 7 ranking) by these respondents was 'GP practice being accessible by public transport'. This is shown by the dark pink colour sections on the bars. This was ranked as 'number 7' in the priority order (i.e., least important of the choices presented) by 50% of the respondents (n = 289).

The choices relating to 'Access to a Pharmacy' and 'Opening times' were similarly scored in terms of the total proportion of responses ranking them as 6th and 7th priorities (purple and dark pink areas).

These categories received 39% and 38% respectively their responses for their combined responses of being the 6th and 7th priority categories from the survey.



3. Please indicate your preference for how you like to receive care / appointments from your GP practice?

With 1 = most preferred method through to 4 = least preferred method

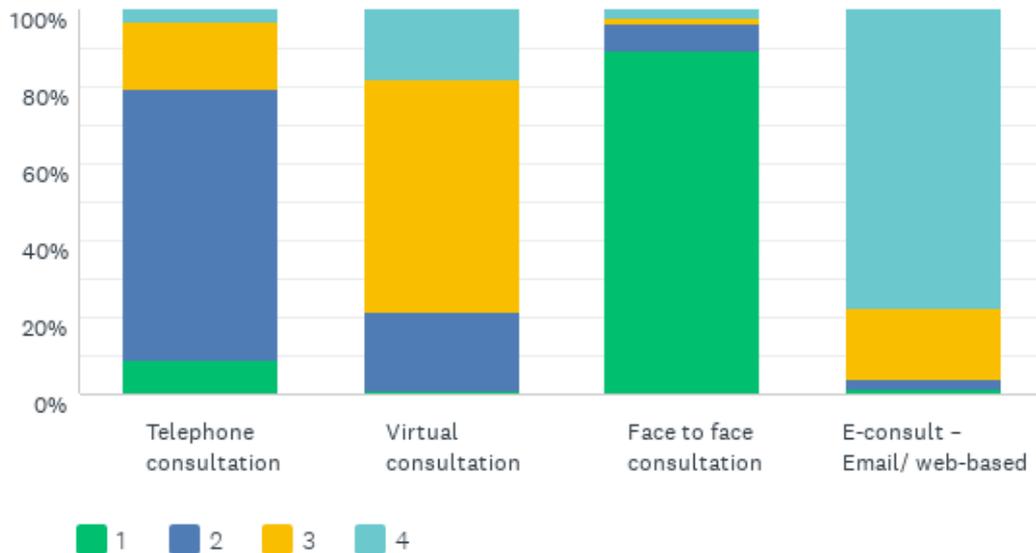
This question followed a similar format, asking respondents to prioritise the various options around accessing care. In total 776 people responded to this question.

The overwhelming number one priority choice (green sections) from the responses was for 'face to face' appointments. This was chosen as the 'most preferred method' by 89% of the responses to that category (n = 684).

Telephone consultations were a clear second favourite method (dark blue section) of accessing appointments with 71% of the responses indicating this preference (n = 481).

Virtual consultations were identified as the third preference (yellow sections) with that being chose by 60% of respondents (n = 381).

The use of E-consult was shown to be the least preferred method of receiving care from these responses. The light blue section in the graph shows 78% of respondents (n = 496) identified this as being their fourth preference out of the options available.



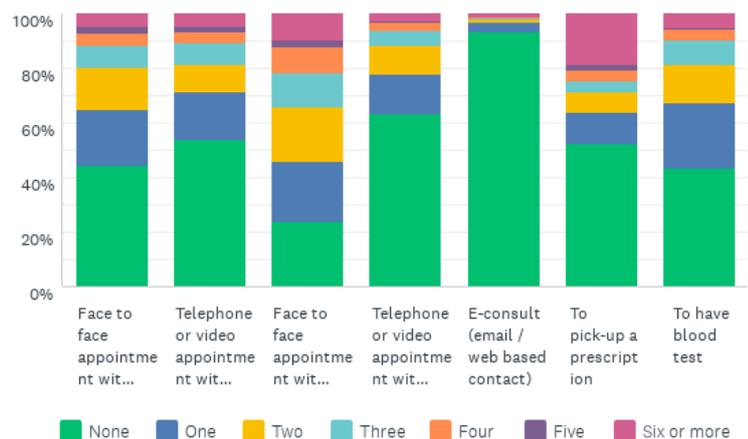
4. In general, over a six-month period, approximately how many times have you used your GP practice for any of these types of services?

This question was looking at the understanding the number of attendances patients had with particular services at the practice. The specific categories that patients had to identify whether they had used in the last six months were;

- Face to face appointment with a GP
- Telephone or video appointment with a GP
- Face to face appointment with a nurse
- Telephone or video appointment with a nurse
- E-consult (email/ web based contact)
- To pick up a prescription
- To have a blood test

From the responses provided to this question (n = 816), the highest level of interactions were 'face to face appointments with a nurse' – column third from left.

The green sections of the chart opposite, represent those respondents who stated that they had 'not used' that particular service in the last 6 months.



The responses indicated that 76% of the respondents (n = 597) had had at least one face to face appointment with a nurse in the last 6 months. Of these, 35% of these respondents (n = 268) had three or more face to face appointments with a nurse over the last 6 months.

From the responses, 424 individuals (57%) had at least one 'blood test' in the last 6 months. There were similar levels of respondents who had attended one or more 'face to face appointment with a GP', with n = 432 (56%).

Individuals who have responded also told us that 19% of them (n = 138) had attended to 'pick up a prescription' on '6 or more' occasions in the last 6 months.

5. Based on your experience, please rate the overall service that you have received, from excellent to very poor

This question was a follow-on from number four, asking respondents to help provide an indication of the experience they had from the service(s) they received. There were 813 responses to this specific question.

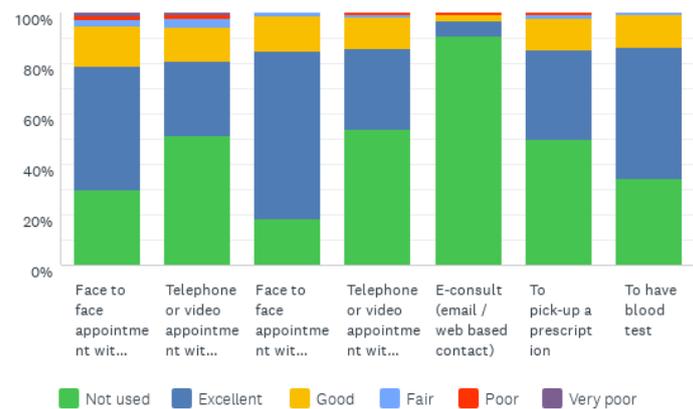
The first graph (opposite) in this section represents all of the responses, including the green areas showing those who had 'not used' the various services.

This shows us that from the respondents in the survey, 'face to face appointments with a nurse' are the main type of appointment that we have information about.

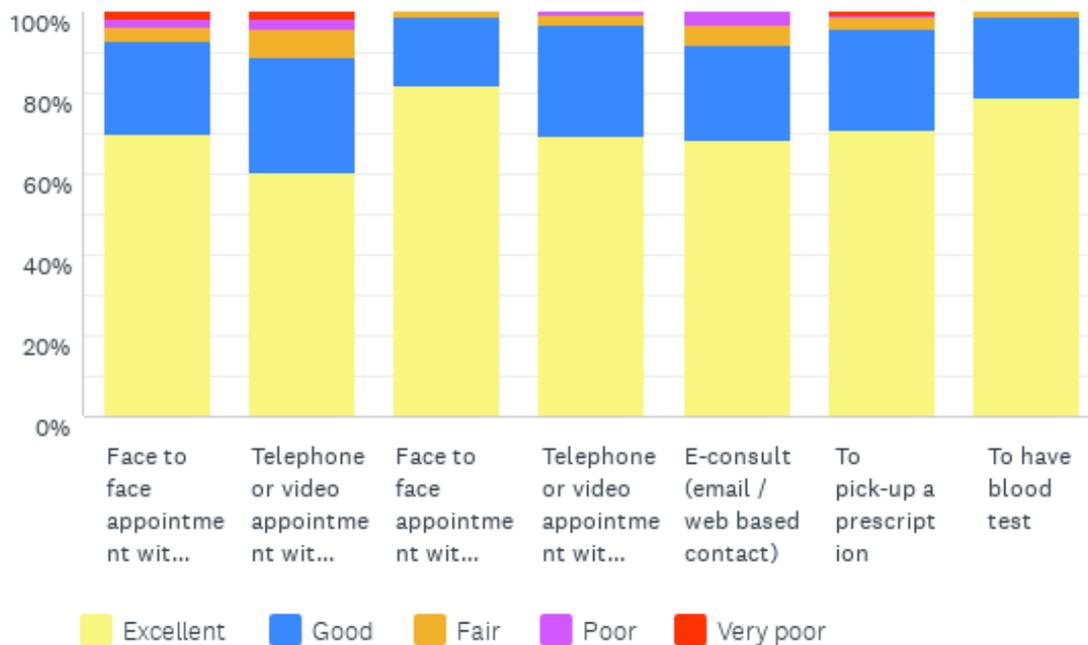
The second graph (below) shows the same question responses but with the 'not used' information removed.

The overwhelming responses from the patients at Wingate practice who completed the survey show that they feel the care they have received across the range of appointment types is 'excellent'.

The category with the highest response as 'excellent' is for 'face to face appointment with a nurse' with 82% of respondents (n = 525) giving this rating for their experience.



The ratings of 'excellent' were similarly high for Picking up a prescription – 71% (n = 264), face to face appointment with a GP – 70% (n = 387), E-consult – 68% (n = 43) and Telephone or video appointment with a nurse – 61% (n = 225).



Only three types of appointment had any responses for 'very poor', these were face to face appointment with a GP, n = 7, Telephone or video appointment with a GP, n = 5 and 'Picking up a prescription' n = 1.

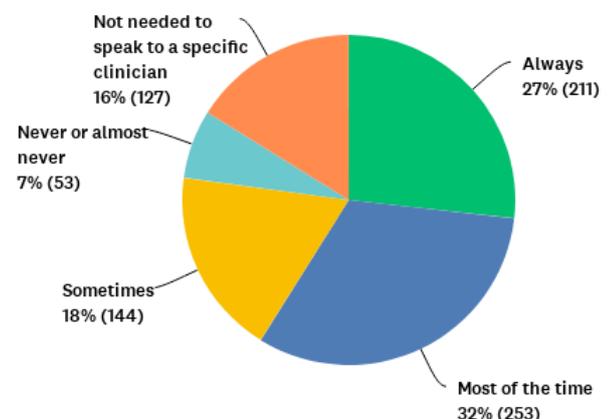
Also, two of the appointment types did not have any responses which described the experience as 'poor' or 'very poor', these were 'face to face appointments with a nurse' and 'to have a blood test'.

6. How often do you see or speak to a specific clinician in relation to care for a particular condition(s)? (Please select one answer)

This question is looking in more detail at the patients who speak to a named specific clinician as part of their care / treatment for a particular condition that they have. In total there were 788 responses to this question.

The graph (opposite) demonstrates that 27% (n = 211) of the responses obtained are from individuals who 'always' see the same clinician for a specific condition.

A further 32% (n = 253) stated that they see the same clinician 'most of the time'.



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

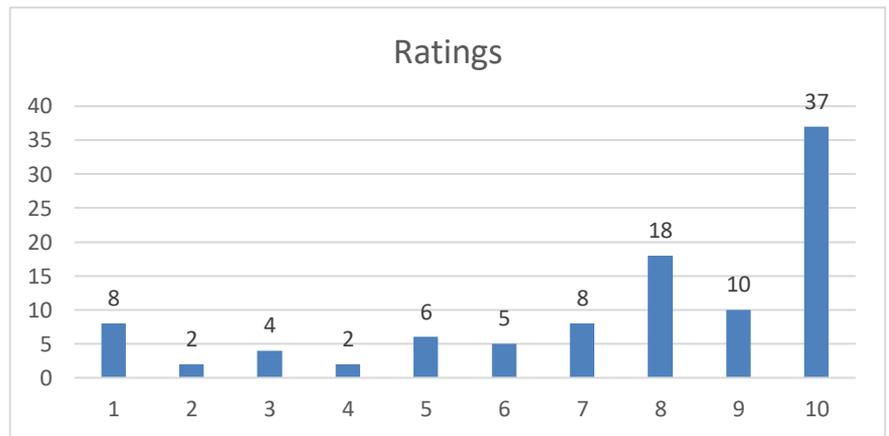
With 1 = Not important and 10 = Extremely important

To explore the matter of continuity of care further, this question was looking at rating how important respondents felt seeing the same clinician is for them when accessing primary care services at their local practice. There were 804 responses recorded for this question.

The graph shown opposite illustrates the spread of responses to question 7. The figures shown above each bar, indicates the percentage of the responses for that particular 'rating' of importance by the survey respondents.

As can be seen, 37% (n = 296) gave a rating of 10 - feeling that it was 'extremely important' to see the same clinician every time.

From the answers to this question, 8% (n = 63) respondents gave a rating of 1, feeling that it was 'Not important' to see the same clinician every time.

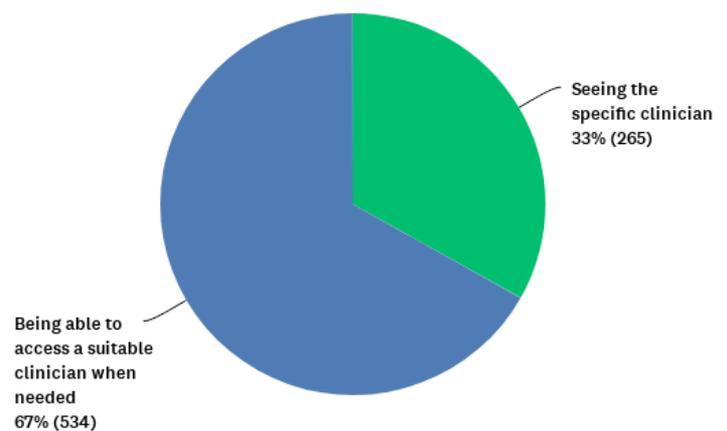


8. Which is more important to you – Seeing a specific clinician or being able to access a suitable clinician when needed?

This question continued the investigation relating to the requirements of these patients and their priorities around accessing the same clinician or suitable clinician when needed. There were 799 responses to this question.

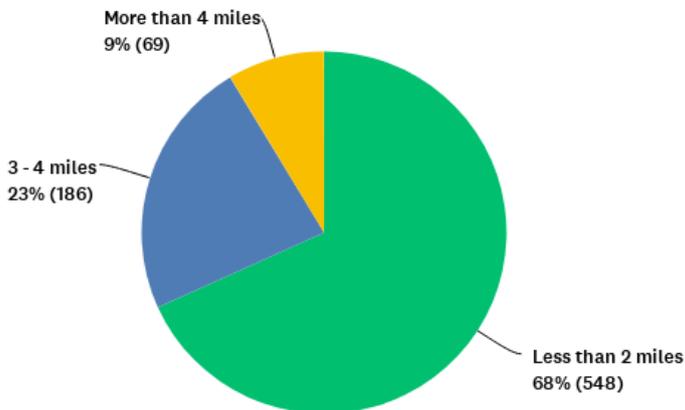
The responses, shown in the chart opposite, indicate that a third of the people who completed the survey feel that seeing a 'specific clinician' is the more important than accessing a suitable clinician.

The remaining 67% (n = 534) indicated that for them 'access to a suitable clinician' was more important.



9. How far do you currently travel to access the GP practice services in Wingate?

In total there were 803 responses to this particular question.



When looking at the distance the registered patients of this practice travel currently to access these services, we can see that over two thirds (68% or n = 548) travel 'less than 2 miles'.

Almost a quarter of the respondents (23% or n = 186) indicated that they travel between 3 – 4 miles to access this service. With the remaining 9% of respondents travelling 'more than 4 miles'.

10. How do you normally travel to your GP practice?

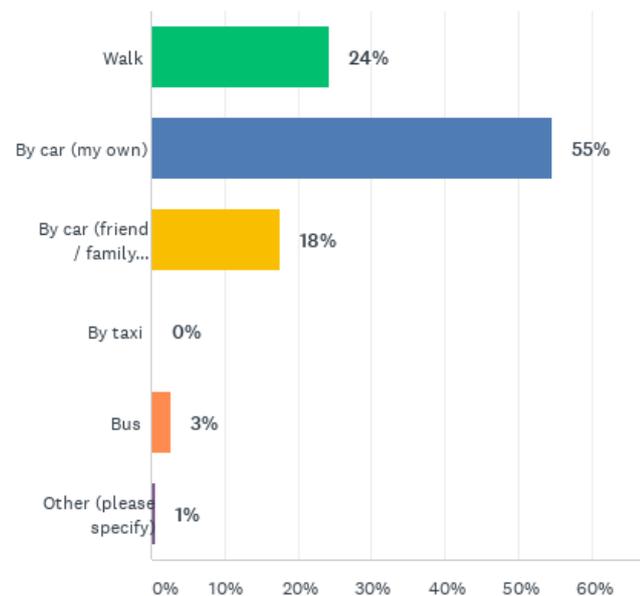
This question continued to investigate the information relating to travel for the respondents. This question had 805 responses.

The data tells us that the main mode of transport used by the survey respondents to access their GP practice is 'by car (my own)'. This was the identified mode of transport for 55% of the responses (n = 440).

Nearly a quarter of the responses (24%, n= 195) indicate that they are able to travel / access the GP practice services by walking.

Only 3% of the respondents identified that they use a 'bus' to travel to the GP practice (n = 22). This likely links back to the answers to 'question 2' and partly explains why the priority regarding the practice being accessible by public transport scored so lowly in that question.

There were five 'other' responses to this question. One of these stated they travelled by 'bus', one that they travel by 'pedal bike', with the remaining three identifying that they receive 'home visits'.



11. We want to know, what is the MOST important thing to you about the location of your local GP practice

(Give a number 1 for most important through to 6 for least important)

Following a similar format to previous questions, respondents were asked to rank what is important to them regarding the location of their GP practice. In total there were 716 responses to this question.

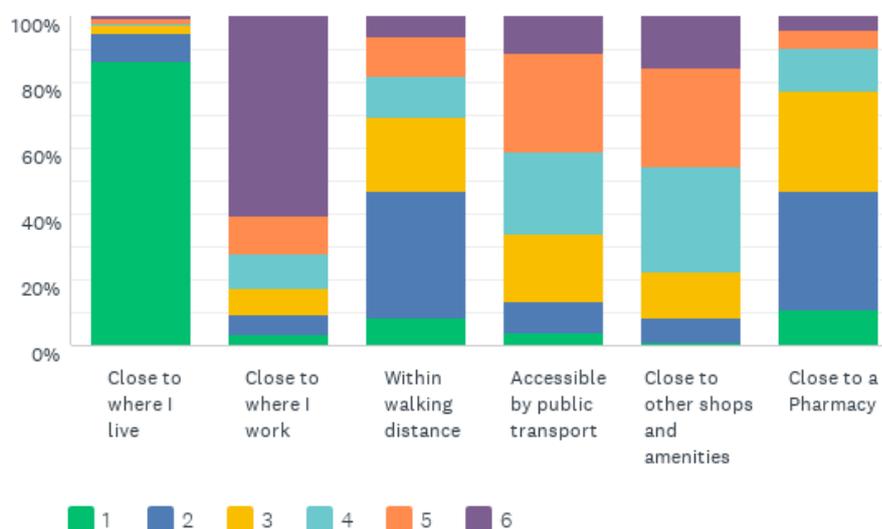
As can be seen in the chart opposite, the category that was ranked as the 'most important' (score of 1 – green sections) was that the GP practice is 'close to where I live'.

This was chosen as the most important aspect to do with the location by 86% (n = 566) of the responses to that category.

The next two categories with high levels of prioritisation were 'within walking distance' and 'close to a pharmacy'.

The choice of 'within walking distance' was chosen as a first choice by 9% (n = 43), as second priority choice by 38% (n = 188) and third priority choice by 23% (n = 112).

Similarly, the choice of 'close to a pharmacy' was chosen as a first choice by 11% (n = 62), as a second priority choice by 36% (n = 199) and as a third priority choice by 31% (n = 171).



12. Are there any suggestions for improvement at your GP service?

The final service specific question in the survey was open ended to allow respondents the opportunity to highlight any potential improvements at their local GP practice from their perspective. There were only 290 responses to this question from the 821 overall respondents to the survey.

There were a number of areas covered by the responses to this question and the views and experiences of patients. In total there were 105 comments (36% of the responses to this question) that specifically related to suggestions regarding areas that could be considered for improvements.

In terms of any specific areas identified for improvement as the question was looking for the following came through from the responses.

There were 33 responses (11%) that related to the view of patients that "*another doctor is desperately needed*" and that they felt it would be better to "*provide permanent GPs, do not rely on Locums*".

Other topics that came through from the responses related to the opening times/ accessibility of appointments outside of 'office hours'. There were 24 comments specifically related to this subject (8%). For these patients it is important that there are "*more late-night appointments for people who work during the day*".

There were six specific comments received which related to frustrations regarding prescriptions. These covered matters such as "*prescription requests have been submitted but not processed and not available when needed*" as well as one comment stating that "*they nearly always miss an item off in 6 months they got it right once*".

In addition, there were two comments regarding greater ability to order and manage prescriptions online.

Included in the comments provided, there were six (2%) that directly related to "*rude and unfriendly*" reception staff. One of these comments in particular stated how they "*often have to battle with [receptionists] to get an appointment*".

There were also a range of comments that touched on matters regarding elements of communication.

This communication may have been between administrative and medical staff or more commonly in the comments about the lack of feedback to patients on results of tests or investigations. There were six comments that did highlight the fact that they thought more could be done to help share information with patients rather than them having to chase it up themselves. These comments also included three which related to the delays on the phone system with having to listen to the long message or just being able to get through to speak to a member of staff.

The remaining 179 comments (62%) provided to this questions included a wide range of positive responses to the staffing and levels of care that the patients had received. This included comments from people such as "*absolutely professional and efficient service would not like to move to another service within my area based on the information from friends/ family who have horrendous problems compared to myself*".

Other comments include similar statements of support such as "*this service is brilliant! All staff are excellent. I feel 100% trust in staff and always feel heard and cared for. No not change the service*".

Equality monitoring questions:

The remaining questions were optional and included as part of the equal opportunities monitoring included as part of this process.

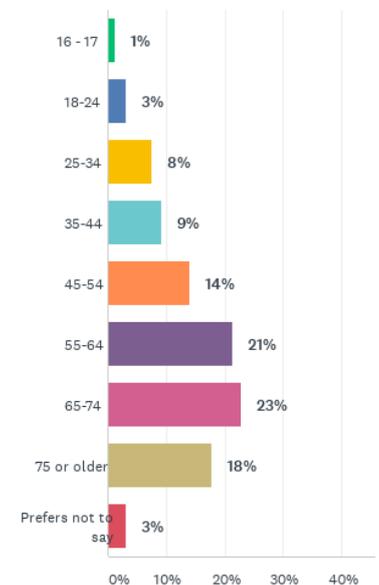
Q13. How old are you?

The graph opposite shows the distribution of the ages of the survey respondents. There were 776 responses to this question.

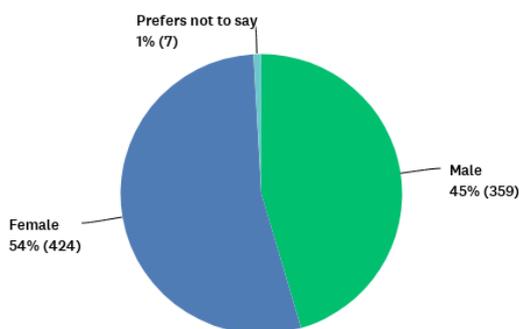
As can be seen, the single greatest response 23% (n = 177) came from those patients within the 65 – 74 age category. Closely followed by the 55 – 64 age category with 21% (n = 165) of the responses.

Only 1 % of the respondents were within the 16 – 17 age category, this relates to 10 individual responses.

In total, 62% of the responses to this survey question (n = 480) were above the age of 55.



Q14. How do you identify?



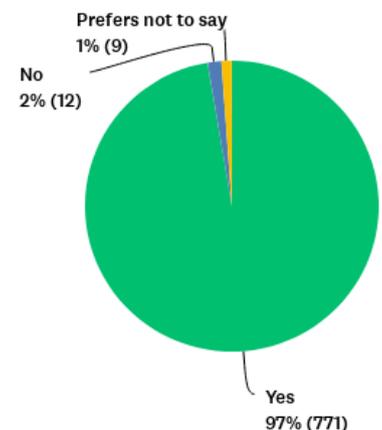
This question captured information about whether respondents identified as 'male', 'female' or did not wish to disclose.

There was a relatively even split between the respondents to this question (n = 790) who identified as male 45% and female 54%.

Q15. Does your gender identity match your sex as registered at birth?

This question was answered by 792 of the survey respondents.

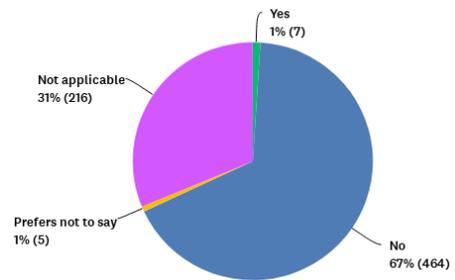
The overwhelming majority of respondents identified that their gender identify matches their registered sex at birth – 97% stating 'yes'.



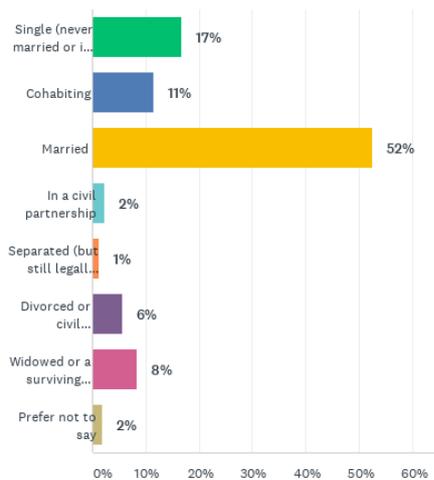
Q16. Are you currently pregnant or have you been pregnant in the last year?

This question was answered by 779 of the survey respondents.

Only 1% (n = 7) identified that they had been pregnant in the previous year.



Q17. Are you currently...?



This question asked participants about their current status in relation to marriage, civil partnership or another appropriate categorisation.

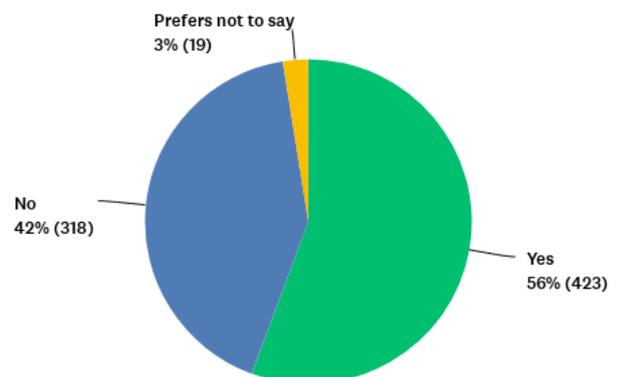
This question was answered by 780 respondents.

Q18. Do you have a disability, long-term illness, or health condition?

We also asked respondents whether they identified as having any disability or long-term health condition / illness.

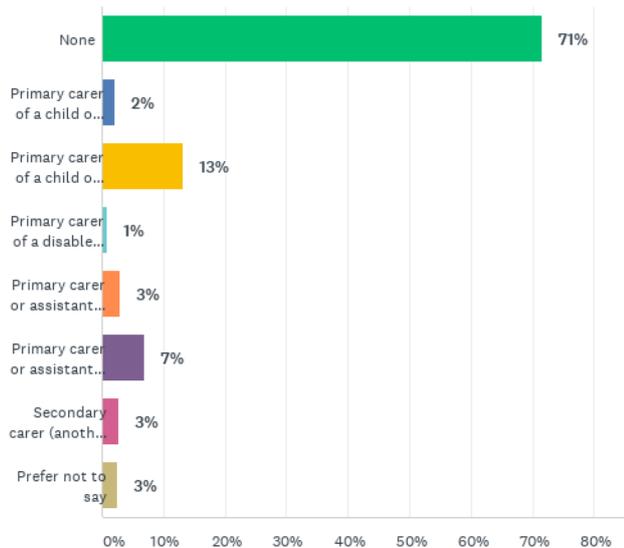
This question was answered by 760 participants.

As shown, 56% (n = 423) respondents did identify as having one of these conditions. As respondents did not need to specify whether which category they identified as having this does not give us any further insight into the range of needs of those who responded to this question.



Q19. Do you have any caring responsibilities?

As part of the monitoring question, individuals were asked if they had any caring responsibilities from a wide range of circumstances.



The category of caring responsibility with the highest response (13%, n= 100) was for someone who is caring for a child or children between 2 – 18 years of age (yellow)

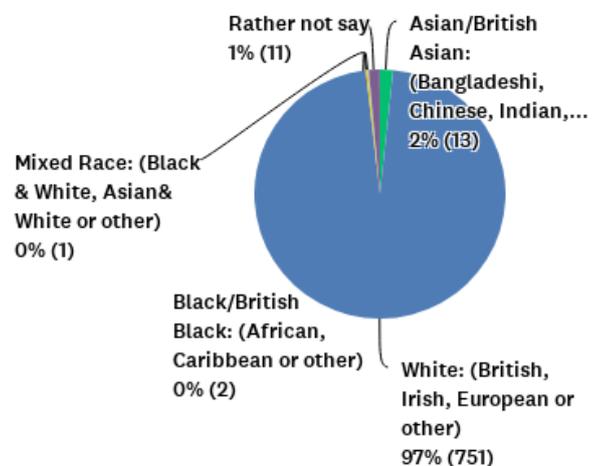
The second largest caring responsibilities of the respondents related to caring for an older person – aged 65 or over with 7% (n = 52) of the responses (purple).

There were two other caring categories which both recorded 3% of the respondents as fulfilling. These were, Primary care for a disabled adult (orange) and as a secondary care (dark pink).

Q20. Which race or ethnicity best describes you?

From the race and ethnicity categories available, 97% identified as White (British, Irish, European or other) which related to 751 of the responses to this question. In total there were 778 responses to this question.

A total of 2% (n = 13) people identified as Asian/ Asian British. With two individuals identifying as Black/ Black British and one individual identifying as Mixed race.

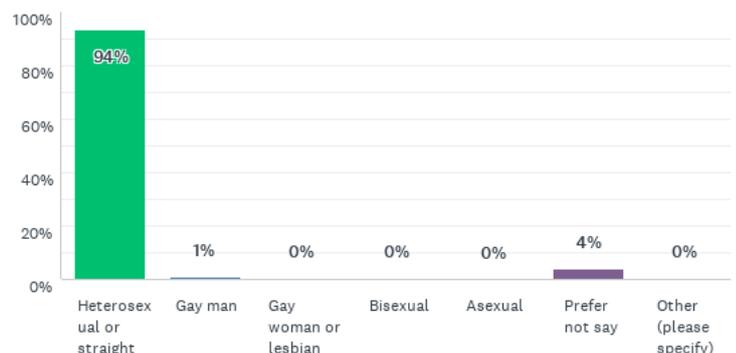


Q21. Which of the following terms best describes your sexual orientation?

This question was answered by 770 people. It informs us that of those, 93% (n = 720) identify as heterosexual.

Of the other responses, 1% (n = 9) identify as a Gay man, three identify as a Gay woman or lesbian, three as Bisexual and one as Asexual.

A further 4% (n = 32) answered the question but by 'preferring not to say'.

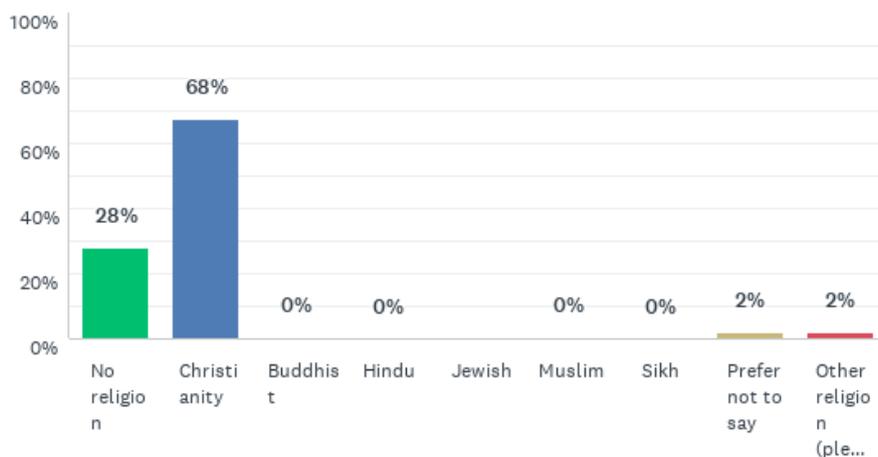


Q22. What do you consider your religion to be?

The final question of the survey was answered by 780 individuals.

From this, 68% (n = 527) consider their religion to be Christianity. There were also 28% (n = 219) who considered themselves to have no religion.

Other responses included 3 people identifying as Buddhist, two as Muslim and one as Hindu.



In the responses received, 10 people selected 'other' as their response to this question. This included two specific mentions for 'C of E', one specific mention of 'Methodist' and others who did not specify their responses.

Next Steps

The information provided as part of this patient survey and the themes it has identified will be provided to the Primary Care team.

This information will be included as part of the specific considerations that are taken Primary Care Commissioning Committee within the CCGs Governance structures. This committee is charged with delivering the organisations responsibilities in relation to the provision of Primary Care (GP practice) services across County Durham.

Depending on the decisions taken through this governance structure, further patient and stakeholder engagement or consultation may be required to explore further plans and proposals in relation to the provision of Primary Care services to these patients in County Durham.