

# NHS Rotherham Clinical Commissioning Group

Primary Care Committee – 10<sup>th</sup> January 2018

## Patient Engagement – GP Access Questionnaire

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### Purpose:

To brief the group on the outcome of the patient questionnaire and outline proposed next steps.

### Background:

At the November Primary Care Committee we were tasked with gauging patient opinion on GP access. A questionnaire was created that sought views on a range of options including; in hours appointments at the patient's own practice, additional hours at their own practice, hub provision, and online / video consultation. It also collected basic demographic information to allow us to ensure responses were representative of the population as a whole.

There was an unprecedented response to the questionnaire; 1,736 in total from Rotherham residents, having been shared widely on social media and distributed via practices MJOG accounts. 65% of those who completed the questionnaire were in either full or part-time work, 25% were retired, 7% were carers, and 17% identified as having a long term condition (LTC). We are confident this gives good representation of the Rotherham population. However, as noted later in the paper, there is evidence that less practices in the central and south areas sent out the questionnaire via MJOG therefore we have less representation from this area of Rotherham.

### Analysis of key issues and of risks

The responses demonstrate a preference for improved access within practices:

Which of these would you be most likely to use - please choose the three most important to you: (1 being the most important, 3 the least)

Answer Choice	1	2	3	Response Total
1 Your GP opening before 8 am (extra morning hours)	122	133	167	422
2 Your GP opening after 6.30pm (extra evening hours)	279	183	118	580
3 More routine appointments at your GP practice	297	160	106	563
4 More emergency appointments at your GP practice	188	146	95	429
5 A 'hub/central venue' (north, south or central) on Saturday morning for emergency appointments	60	63	50	173
6 A 'hub/central venue' on Saturday morning for routine appointments	90	84	87	261
7 A 'hub/central venue' on Sunday morning for emergency appointments	106	66	48	220
8 A 'hub/central venue' on Sunday morning for routine appointments	109	122	121	352
9 An online/videocall GP service during the evening/between 6pm-9pm??	73	70	94	237
10 An online/videocall GP service on Saturdays	45	84	59	188

11	An online/videocall GP service on Sundays	169	213	307	689
12	Something else – please tell us	155	30	142	327

Approximately 25% of respondents also provided additional free text comments:

- 11% of people comment on difficult access in some way, and a number of these mentioned the difficulties of working and accessing routine appointments – for example blood tests and smears;
- Comments referring to the access issues for working people count for 2-3%;
- Just over 1% flag continuity as a problem; this is likely to be an issue for people with LTCs;
- Just over 1% tell us they are currently satisfied;
- 1% comment on reception staff – rudeness, questions seen as intrusive etc.;
- Around 50 respondents refer to telephone access – split between it being hard to get through and wanting better telephone access;
- There are also several comments around wanting more online facility and some people want a drop in type service.

In terms of hub provision, a combined total of 75% of patients said they would be prepared to travel up to 5 miles to access a hub for a routine appointment but not for an emergency – it may be that we didn't word this question well enough to allow patients to distinguish between a primary care emergency appointment and an actual 'emergency'. This figure may also reflect the high number of working respondents, as they were more likely to be open to technological solutions as well as travel for access.

When we split the postcodes into areas served by the existing hubs (north, central, and south), some differences in response do occur. Those in the central area of Rotherham have less presence for routine appointments but want improved access on Saturday mornings. They are also less willing to travel, with most wanting services within 2.5 miles. Those in the north and south are more likely to choose in-hours access at their own GP as a priority, but those in the south are open to travelling further to services – this may be a reflection of the more rural nature of south Rotherham.

For people who identify as having LTCs, 60% indicated a strong preference for improved access at their own practice, with almost 25% of comments citing continuity of care as being important.

Most people find a telephone consultation acceptable, and a third of patients would actively welcome this option. More than half would accept a video call, though they would prefer face to face, and only a third would accept email consultation.

There are gaps in the representation of patients when the postcodes are analysed; there were significantly more responses from the S66 postcode areas and fewer from the centre and south of Rotherham. We can see from MJOG usage that practices in those areas didn't send the questionnaire to their patients.

### **Next steps:**

The responses demonstrate patients prioritising more appointments at their own practice, extra evening appointments and more emergency appointments, though a significant proportion are open to technological solutions too. It is therefore proposed that we achieve this by developing a rapid access application to enable patients with straightforward conditions to be managed remotely and quickly freeing up capacity in practices for those requiring face to face consultations. It is also proposed to review the utilisation of the hubs

following increased marketing to establish demand and where required, to extend provision to support in-hours capacity. We have also asked practices to indicate if they would have capacity to provide more early morning and evening appointments but to date, the information returned has not been sufficiently reliable to inform a decision. We will continue to work with LMC colleagues to understand the commitment practices can make to improving access. Initial discussion has taken place with LMC colleagues regarding the proposed way forward and they were supportive of understanding more regarding how an Application can support the system.

**Recommendations:**

That the committee notes the results of the questionnaire and the proposed next steps.