Keeping the Door Open – exploring more accessible GP services in North East Lincolnshire

Public Stakeholder engagement to gain views on ways to make GP services more accessible within North East Lincolnshire in the future

September to November 2016

Engagement Feedback Report
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Engagement Feedback Report

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Engagement Feedback

Keeping the Door Open Survey
Public Stakeholder engagement to gain views on ways to make GP services more accessible within North East Lincolnshire in the future

Introduction

The Clinical Commissioning Group in North East Lincolnshire want to ensure Primary Care services will continue to meet what is a growing local need well into the future.
The purpose of the ‘Keeping the Door Open’ survey was to gain views and opinions of North East Lincolnshire residents on how to make GP Services more accessible. It was also to inform the development of NELCCG Primary Care Strategy and respond to the NHS 5 Year Forward View as the Department of Health has told the local NHS that they would like to see GP services offered to local residents over 7 days.
Initially a group of Accord members were asked to discuss Primary Care and how it could work to ensure consistency and quality of core GP services; enhanced access to general practice, including 7 day access, aligned with new local urgent care model; and a greater focus on prevention in Primary Care at the Annual Accord Meeting in early September 2016.

The discussion group reviewed a draft of a leaflet that had been produced on the subject. The survey was to be developed to enable public engagement and members gave some helpful insights into how best to pose questions, present the survey and reach patient groups. The comments and views expressed in the discussion group were fed into the final version of the survey. Related questions were then created by North East Lincs CCG with public engagement taking place between September and November 2016 in the form of electronic and paper surveys with 134 responses being received.
The largest age group to respond were 45 to 65 years, 47%, with nearly a third of responses coming from the 65 to 74 year age group. A total of 69% of responses were from females.
The results of the survey reflect public opinion about current local Primary Care services throughout GP Practices including topics such as appointment making, staffing within Practices and travelling to and from their own GP Practices.
Themes and Sub Themes are also included below along with the question responses and include Equality and Diversity questions plus other information too.

The Department of Health has told the local NHS that they would like to see GP services offered to local residents over 7 days. We wanted to know what this means to people in North East Lincolnshire. We asked the public of North East Lincolnshire some questions in order to help us understand what mattered most about GP services and how we might develop quality, accessible services that are affordable and provide what local people need with the results of this survey below.

The public engagement was launched on 30th September 2016 and closed on 22nd November 2016.
Key Findings and Themes

Key Findings of feedback from the survey questions
A total of 134 people completed the survey with the most responsive age group being 45 to 64 years submitting 47% of survey replies. The results for the questions where respondents were asked to select options have been represented by the percentage (%) of respondents per question (not the total number of respondents for the survey) as not all respondents answered every question.

Just over half of respondents were generally satisfied with current opening hours and felt able to book a routine appointment at their convenience. However, the ability to fit in routine appointments around work commitments was specified as the main reason for wanting extended opening hours in evenings, early mornings and on Saturdays; Sunday opening was the least popular option. There is a willingness to travel within North East Lincolnshire in order to secure a more convenient appointment and a high proportion of respondents were willing to see a professional other than a GP, as long as they had the skills and experience to deal with their condition. Respondents also expressed a strong desire to adopt new ways of accessing advice, such as instant messaging, live chat and Skype.

The following were amongst some of the highest percentage answers given as feedback within the survey:
- 94.5% responded to say that they would like to use an instant messaging/live chat facility between themselves and a member of their GP Practice Team.
- Video/Skype/FaceTime appointments also scored highly with 86%.
- 89% of patients currently receive a face to face consultation within their Practice
- 72% of respondents currently access their GP Practice website too.
- 77% or people stated ‘they would not be willing to travel out of the NEL area for a routine appointment.
- 88% answered ‘Yes’ they would be willing to see a different professional, who is suitably qualified, instead of their GP.
- 71% replied that they were satisfied with the current GP service they receive.

Additional comments were asked for at the end of the survey and 33% of replies related to Appointments (the highest % of answers): Some respondents have experienced difficulty in getting through to make an appointment and also in making an appointment at a suitable time. 14% of comments were received on both topics of Communications/Customer service from Health professionals & administration staff.

Continuity of care, travelling to and from GP Practices and making appointments were also some of the main concerns within the survey. (All main themes/sub themes of the survey can be found on page 5).

The Keeping the Door Open survey feedback covers more in-depth information on themes, data & public opinion and takes into account all survey responses received.
## Themes
The 1002 comments from the open ended questions have been categorised and the main themes and sub-themes are set out below with more detailed information for each question following on.

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<td>Patient priorities</td>
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Keeping the Door Open Survey Feedback

Question 1 - 130 responses
Respondents were asked ‘Thinking about the current opening hours at your GP centre, can you see a health professional for urgent appointments when it is convenient to you?’

Accessibility to appointments was a concern for approximately 31% of responses with people finding it hard to make an appointment with a GP of their choice. Triage & GP diagnosis over the phone is available to patients although this doesn’t seem to be an area of choice for many. Urgent appointments are hard to come by and responses showed that a majority of patients have to wait longer than 24 hours for an urgent GP appointment of their choice.

Below are the most important words and phrases respondents used for this question. The larger the font size, the more important or significant the word.
Question 2 - 130 responses
Respondents were asked to think about the current opening hours at their GP centre, and answer the following question
‘Can you see a health professional for routine (for example a diabetes review or you have pain in your knee that’s been there a few weeks) appointments when it is convenient to you?’

A number of respondents to the survey had difficulty in obtaining a routine appointment when convenient for them although a majority said that it wasn’t a problem for them. Some patients commented on current arrangements used to book appointments at their GP Practices and that these arrangements were difficult to gain appointments from.

“The surgery won’t allow me to book a routine appointment in advance: they insist on me phoning in the morning for a triage telephone appointment which is very difficult as I work full time. The last two times I have requested an appointment to see a GP I have been given telephone appointments so I haven't actually seen a GP for some considerable time. I don’t feel this is good practice: signs & symptoms could be missed. “

“The surgery has to be contacted after 8am each morning. If you are lucky and get through then you have to accept the time given to you. If you have a preferred GP you cannot pre book an appointment “
Question 3 - 57 responses
Respondents who answered 'No' to Q1 or Q2 were asked why they find this difficult

- No appoints available when I need them
- Getting to the appointment - Public Transport
- Getting to the appointment - Lift from family, friends or Taxi
- Fitting in around work commitments
- Fitting in around my carer responsibilities
- Fitting in around school times/family responsibilities
- Unable to get through to the Practice to discuss my needs
- Unable to get an appointment because advised by Practice to go elsewhere
- My surgery does have emergency appointments but they are usually full
- Other (Please explain below)

Comments in respect of the above question from patients included having difficulty in obtaining convenient appointments due to reasons such as 9-5 work commitments, not being able to get through on Practice phone lines and a lack of available urgent and non-urgent appointments offered by Practices.

The largest response was 31% of respondents who said ‘No appointments available when I need them’ with the next most popular answer being ‘Fitting in around work commitments’
Question 4 - 130 responses
Respondents were asked which of the following are the most suitable times for them to visit a GP practice for routine, current and/or non-urgent appointments?

- During the week between 8.00am and 6.00pm: 42%
- During the week in the evenings: 25%
- On a Saturday - AM: 15%
- On a Saturday - PM: 5%
- On a Sunday - AM: 10%
- On a Sunday - PM: 5%
- I don’t have a preference: 20%
- Other (Please explain below): 5%

The most popular answer via the survey was “During the week between 8am & 6pm” where a majority (42%) chose is as a reply to this question.
Other responses to the question resulted in 25% of patients not having a preference with their suitability for an appointment time with 17% having preference to a weekday evening appointment.

Comments left by some of the 130 respondents were varied. A small number or respondents commented that the process of obtaining a suitable appointment was ok as they were retired. Comments relating to having weekday evening appointment preferences were that these people were employed and that it was difficult to get time off work to attend their Practices during work hours.
A small number of respondents commented that weekends and evenings would be preferable due to current work, weekend & and general family life commitments.

Below are the most important words and phrases respondents used for this question
The larger the font size, the more important or significant the word

Working Hours Phone Attend Afternoons
Mornings Fit Appointments
Work Commitments Retired Given
Evenings Care Surgery Husband Week Day
Question 5 - 128 responses
Respondents were asked which of the following are the least suitable for them

Over 40% of question respondents did not have a preference for this question. Least favourable appointment times would be before 8am (26%) and during the week between 8am and 6pm (16%). Comments made by respondents included “People work during these times and employers are not always flexible to allowing time off for appointments” & “I work full time so this is difficult” which was a recurring/similar theme on comments received back

“Normal working hours for me”

“As long as I can get an appointment, it doesn't matter when”

“Any time at the weekend is not suitable and getting from work during working hours can be difficult”
Question 6 - 122 responses

Respondents were asked what is most important when booking a routine, non-urgent health care appointment

A significant number of comments relating to this question referred to the importance of continuity of care when booking a routine, non-urgent appointment.

“ I like to see the GP that I have seen on a number of occasions and knows my health file.”
“ I think it is good to see the same person who knows you”, “ I believe sticking to the same professional saves time as you build up a rapport” and “Seeing my regular GP gives me continuity of care and I feel knowing my GP makes it easier to discuss problems” are an example of comments received. Fitting in around my Work Hours was another popular answer (32%) within the survey.

Below are the most important words and phrases respondents used for this question
The larger the font size, the more important or significant the word
**Question 7 - 127 responses**

Respondents were asked if they would be willing to travel to another GP centre for routine, non-urgent appointments with a health professional for a more convenient appointment

<table>
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<th>Yes - Willing to travel</th>
<th>57%</th>
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<tr>
<td>No - Not willing to travel</td>
<td>43%</td>
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57% of the 128 respondents stated ‘YES’ they would be willing to travel to another GP Centre.

Some felt that this would be more convenient for working people as there would be a better opportunity to make an appointment to fit around working hours.

Others believe that all GPs provide a professional service and for routine appointments, such as, blood tests, blood pressure checks and flu jabs, they would be prepared to travel a reasonable distance to make a quicker appointment.

Although some patients prefer to see their own GP, it was generally accepted that this was not always possible and that for a routine appointment they would be prepared to see an alternative GP at a different practice as long as their medical records were available.

43% said they would not be willing to travel to another GP Centre, further comments in Q8.

“*If an urgent or deemed urgent situation I would wish to be seen as soon as possible and if this was the only way for that to happen then yes I would travel*”

“*I have a car so I am able to do this easily but I would not be happy to do it with no car as I don't know how far I would be expected to travel*”
Respondents who answered ‘No’ were asked what would be their main concerns

- Continuity of care is important to most respondents and having a trusted and familiar GP is a key factor to some people who said they would prefer to visit their own practice for more personal specialist medical needs rather than a different GP who might not deliver the same quality of service. Many put a significant value on the trust and confidence which develops between patient and all staff at the practice which they feel should not be disregarded.

- Potential difficulties with travelling to another practice were also highlighted. It was felt that availability and access to public transport could be stressful, for example, for an older or disabled person or for a parent travelling with an unwell child. Weather conditions could be an added barrier to accessing public transport and some journeys would not be direct to the destination and would require one or two changes of public transport.

![Pie chart showing responses to Question 8]

- Any other reasons (please explain in the box below)
- I don’t believe that other teams/centres could deliver the same quality of service
- It would create travel difficulties for me
- Another team/centre won’t have access to my records
- Another team/centre won’t know me
Question 9 - 128 responses

Respondents were asked which is more important to them when accessing routine, non-urgent primary care appointments

- 33% of respondents felt it a priority to see the most suitable health professional equipped to deal with their condition and a further 24% believed that it is important to see a GP who is familiar with personal conditions and treatments.

- 10% stated that a suitable time-frame is a priority and a further 5% that a suitable time and day was important. Comments indicated that making appointments at a suitable time is very challenging for certain groups of people, such as, working people, people with disabilities, carers, single parents and those people with no support.

- 6% of respondents wanted their GP to be at a location close by, without the need to travel, though general comments reflected that some people feel that flexibility is required when accessing routine appointments and are happy to trust in all healthcare professionals to access medical records and provide the right care.
Question 10 - 123 responses
Respondents were asked how do they normally get to your usual GP practice and do they require support when attending an appointment

Many of the 123 respondents stated that their methods of getting to their appointments depended on their personal circumstances for each appointment and this was reflected in the multiple responses from each individual.

A great majority (91) of respondents stated that they usually or sometimes travel by car to their appointments and 11 of these are driven by friends, family members or carers.

31 respondents usually or sometimes walk to their appointments, depending on weather and support required.

Public transport is usually or sometimes used by 10 people and taxis are used by 9 people. Only 2 respondents usually or sometimes used a bicycle and 1 sometimes used voluntary transport.

6 people stated they require support when attending an appointment to help and support them with mobility issues or communications and a car is the mode of transport used in these cases.

Below are the most important words and phrases respondents used for this question. The larger the font size, the more important or significant the word

Lift, Wheelchair, Taxi, Carer, Support, Public Transport, Walk, Own Transport, Drive, Present, Bus, Struggle, Husband
Question 11 - 125 responses

Respondents were asked how far they would be willing to spend travelling to a routine, non-urgent appointment at evenings or weekends within North East Lincolnshire

90% of respondents stated they would be willing to travel up to 30 minutes to a routine appointment and the remaining 10% willing to travel over 30 minutes.

Respondents were asked to answer ‘yes’ or ‘no’ to an additional question: “I would be willing to travel to an appointment out of area (not in NEL)”

103 people responded to this question and of these 23% responded ‘Yes’ they would be willing to travel out of area for a routine appointment, of these, 9 people felt that it would be dependent on the type of condition and specialist treatment required and also on the distance.

77% people stated ‘No’, they would not be willing to travel out of area for a routine appointment, travel time, distance and poor public transport being the stated reasons.

Below are the most important words and phrases respondents used for this question. The larger the font size, the more important or significant the word
Question 12 - 129 responses
There are other professionals who can deal with some problems that patients might traditionally have seen their GP for in the past. For example, a physiotherapist could see you for back or knee problems. A pharmacist could see you for your regular medication or minor ailments. Respondents were asked if they would be willing to see a different professional, who is suitably qualified, instead of their GP?

| Yes - 88% | No - 12% |

88% of respondents stated they would be willing to see a suitably qualified professional instead of their GP.

Many have had previous experience of seeing an alternative health professional and were confident that practice nurses, pharmacists, physiotherapists, chiropractors, chiropodists are all suitably qualified to provide this service. It was suggested that patients might be seen quicker if willing to see someone other than the GP. Some people who said yes, added that it would depend on their condition and how far they would have to travel.

12% stated they would not be willing to see a suitably qualified professional instead of their GP, all of these respondents felt that their GP provides the continuity of care they need and is better qualified to treat them. Two people with long term conditions commented that they would feel more comfortable discussing confidential health matters with a trusted GP,

“I think this is a really good idea. As I know how busy our GPs are this actually put me off going to see them, as I always think that my condition is not severe enough. On a couple of occasions I would have been in much better health had I seen my GP earlier. I did see a commissioned physio for a recent shoulder injury. This was at my local surgery and then at another one in the area when a convenient time could be arranged. This was a fantastic service and I made a very quick return to full mobility. “

“As long as the professional is relevant to the problem it would be ok “

“I'm convinced that a significant portion of a GPs list doesn't need their particular skills and expertise . The patient should be allowed/encouraged to see other health professionals. Receptionists should be better trained to assist in this area. “
**Question 13 - 125 responses**

In reference to Q12, respondents were asked how far they would be willing to spend travelling to see a suitably qualified health professional instead of their GP within North East Lincolnshire.

83% of respondents stated they would be willing to travel up to 30 minutes to a routine appointment and the remaining 17% willing to travel over 30 minutes.

Following this question, respondents were then asked to state ‘Yes’ or ‘No’ to the following statement - “I would be willing to travel to an appointment out of area (not in NEL)”

94 people responded to this statement and out of these 17 said ‘yes’ they would travel to an appointment out of area, and another 10 said ‘yes’ if referred by a professional or to receive a more specialist treatment not available locally, and 2 would travel a short distance.

67 respondents stated that they would not be willing to travel to an appointment out of area, 3 people specified travel difficulties as their reasons.
Question 14 - 45 responses
Respondents who said 'No' to Q12, were asked what concerns them most about seeing another professional?

Of the 31% who responded ‘Other’ in the chart above, a slight majority stated that travelling further would cause personal difficulties, quoting potential challenges could be extra travel costs and travel time incurred for patients who are feeling unwell, who do not drive or who are unable to drive due to medical conditions.
Others felt that trust in their GP and continuity of care is important and there was a concern that personal medical history might not be readily accessible if travelling to another Health professional.

"Travel. I don’t drive."

"It would depend on the nature of my health and well-being. Trust and continuity is important."

...
Respondents were asked who they would rather speak to if they wanted advice about any medications or medical aids.

The chart illustrates that the most patients would seek advice from a Pharmacist or a GP or other Health Professional and less likely to call the Single Point of Access (SPA) or NHS Choices/111. However, many commented that they would rather have had a multiple choice for this question as it would depend on the nature of the advice required and that some medical conditions could require advice from more than one health professional. However, all indicated that they would prefer to get advice from a qualified person. The health professionals in order of preference included, pharmacist, GP, nurse, physiotherapist, occupational therapist.

Of the few respondents who stated that they would contact SPA, some were reluctant to use this service as their primary choice, one individual stating ‘NHS Choices and SPA are not qualified professionals and can only signpost’.

“I go to my pharmacist with most questions as he is very knowledgeable and has more free time the doctors surgery. He knows my tablets regime and is prepared to look things up. And isn’t afraid to recommend when I need to see GP. I would always recommend see pharmacist first as GP times are limited.”

“I don’t mind who I speak to as long as they are suitably qualified and accessible.”
Question 16 - 122 responses

Respondents were asked if they are satisfied with the ways in which they can get advice from their Practice at the moment.

| Yes - 71% | No - 29% |

71% of respondents stated they are currently satisfied with the ways they can get advice from their Practice. Many felt this was attributed to the helpful staff, such as, GPs, nurses, receptionists and pharmacists, listening to patients concerns and providing appropriate advice quickly or signposting to other more suitable services. Some also stated that advice was also available over the telephone and in written literature.

29% who are not currently satisfied with the ways they can get advice from their Practice. Some had found from their experience that advice can be conflicting from different members of staff and some advice could be more clearly explained. Some respondents stated that they prefer to see the same health professional for continuity of care and this is hindered by poor availability of appointments or call back appointments with their regular GP or nurse. Some suggested that appointments may be rushed due to staff shortages in busy Practices.

Difficulty in making appointments is a recurring theme. Some respondents reporting that the telephone is often constantly engaged from 8am. Some respondents felt uneasy about reception staff asking personal questions and making decisions about the type of appointments the patient requires. A few suggested that medical assessments should not be made by unqualified and sometimes unfamiliar staff. ‘They are not qualified professionals so should not be in a position to triage appointments’ said one respondent.

“ It would be helpful to speak to a health practitioner on occasion but not necessarily a doctor. This isn't offered at present. “

“ I am able to order prescriptions online at a time to suit, telephone call back from GP when I call with concerns. Only downside is the ability to access medical appointments at weekends/late evening in local town as children especially always seem to become worse at evenings/weekend “
**Question 17 - 127 responses**
Respondents were asked to consider the following ways of accessing information or advice from your GP Practice team.

- **Face to Face**
- **Telephone Appointments**
- **Email**
- **Symptom Checker**
- **Video/Skype Appointments/FaceTime**
- **Instant Messaging/Live Chat Facility**
- **Practice Website**
- **Online access to your medical records**

![Bar chart showing percentages of respondents using different methods now and which they would like to use.](chart)

**Respondents were asked which they are able to use now and which they would like to use**
As identified in the chart, respondents use all methods of accessing advice; the most common method stated as face to face, followed by Practice website and telephone appointments. However, when asked what they would like to use, these three methods greatly decrease and are replaced by technology, such as, Instant messaging/Live chat, Video/Skype appointments, Email, Symptom checker and Online access to medical records.

There is a clear contrast between the responses to both of the questions asked which could indicate that patients are willing to obtain their advice remotely in the future rather than visiting their practice.
**Question 18** - 126 responses
Respondents were asked if they know how to obtain support when their Practice is closed (Out of Hours).

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<th>Yes - 83%</th>
<th>No - 17%</th>
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From the 126 responses, 83% stated they know how to obtain support out of hours and 17% stated they did not know.

**Question 19** - 49 responses

Respondents were asked to add any additional comments they may feel relevant to this survey:

- 33% Appointments
- 14% Communications
- 14% Customer service from Health professionals & administration staff
- 6% Continuity of care
- 6% Travel/transport
- 6% Patient responsibilities
- 12% Questionnaire feedback (unrelated to this survey)
- 8% General health service comments/Spoilt responses (unrelated to this survey)

Of the 49 responses, 33% made additional comments around appointments and 14% around communications.

Some respondents have experienced difficulty in getting through to make an appointment and also in making an appointment at a suitable time. It was suggested that the appointment system could be more flexible or provide a walk-in system which would benefit those patients who face barriers in attending the GP Practice because of other personal commitments, such as, work, family and caring responsibilities. A comment was made regarding abuse of appointments which could contribute to the long waits to see a GP and another suggested that patients should be provided with a list of routine treatments a nurse can provide to ease the burden placed on GPs.

Some felt that, although some people are keen to use technology instead of face to face consultations that consideration should be given to patients with hearing or speech difficulties when arranging telephone appointments and also to people who are unable to use technology or prefer to speak to someone face to face.
A further 14% of respondents expressed that they were satisfied with the customer service provided from the health professionals and administration staff at their practice. 6% valued continuity of care and felt that sending patients to see a GP out of area should be discouraged.

Transport was highlighted as a concern by 6% of respondents. It was suggested that patients who do not drive, have poor mobility or who live in rural areas could have difficulty in attending an appointment at another location because of poor access to public transport to some Medical Centres and sometimes no other means to travel.

6% of respondents commented on self-care, adding that patients should be encouraged to take responsibility of their own health wherever possible.

The remaining 19% were comments unrelated to the content of the survey.

Other general comments received unrelated to the survey

There were several responses which were not relevant to the questions asked or were not meaningful. These responses have been collated and the main categories are as follows.

Healthcare professionals
11 people made general comments stating their satisfaction and willingness to see all healthcare professionals.

Local hospital and GP services
6 responses indicated that current GP and hospital services function well and were a little suspicious that there could be relocation of local services, possibly based on the outcome of this survey. One of these respondents stated that ‘We already have a well-functioning GP-OOH, there is no need to travel, you’d struggle to find that level of quality delivered by local GPs anywhere else.’ One respondent would prefer walk-in service at GP practices and one suggested that a more holistic service should be provided locally.

Appointments
4 respondents felt that they could be flexible when making appointments or had used telephone consultation.

Pharmacies
3 people commented on pharmacies, one respondent felt that the DN40 area does not have adequate pharmacy cover in evenings and at weekends which is a concern for patients who do not have access to transport for the 12mile round trip. ‘It is a shame that within a town as large there is not a GP based within a pharmacy which is open longer hours.’
Equality and Diversity Information

Question 20 - 115 responses
We want to shape services around the diverse needs of our population. Are there any issues you think we need to consider in relation to diverse needs (For example: Race, Gender, Disability, Age, Sexual Orientation & Religion & Belief)?

This question included 16 responses to “Other”.

The largest response within this part of the question was in relation to access to services. Varied responses included people’s views on access to local services such as that people within North East Lincolnshire should have the same access to services, the creation of better out of hours facilities available to residents living within a DN40 postcode, more privacy within GP Practices within Waiting Rooms, translators for non-english speaking residents and that all GP Practices need to be able to provide a fair and equitable service to everyone. Views were also provided that is little consideration for the difficulties of disabled people and those with chronic illnesses accessing GPS and that Carers would benefit longer app’s and preferential times to work around sitters.

All views and opinions from the survey results will be reviewed for all questions.
Question 21 - 123 responses
In what capacity are you replying?

In response to this question most responses received were from Members of the public = 68% followed by Patient or community group = 23% Staff / Clinician = 4%
Patient Carer = 3%
Other (Carer/member of the public & Volunteer) = 2% made up the remaining responses.
No responses were received for Partner Organisation = 0%

Question 22 - 116 responses
What is the first part of your post code?

99% of responses stated that they lived in North East Lincolnshire with 1% of responses living out of the area.
91% of responses to this question stated White - British, with 7% stating ‘Prefer Not To Say’. The remaining 2% stated ‘White Irish’ and ‘White - Any other White’

Results show that the gender split of survey participants was as follows: Male = 25%, Female = 69%, Prefer Not To Say = 4% and Non-answers = 2%
Question 25 - 117 responses
Sexual Orientation

Results show the sexual orientation split of survey participants was as follows:

- Heterosexual/Straight = 88%
- Gay/Lesbian = 2%
- Bisexual = 1%
- Prefer Not To Say = 9%

Heterosexual/Straight = 88%, Gay/Lesbian = 2%, Bisexual = 1% with 9% of responses Preferring Not To Say

Question 26 - 119 responses
Age Range

The age range of survey responses were as follows:

- 25 to 44 years = 13%
- 45 to 64 years = 47%
- 45 to 74 years = 30%
- 75 to 84 years = 7%
- Prefer Not To Say = 3%

There were no survey responses from people between the ages of either 18-24 years and 85 years plus.
In reply to this question responses were received as follows:
Christian 64%
Jewish 1%
Prefer not to say = 12%
Other (* Please specify) = 22%
*Answers included = Atheist, Roman Catholic, Humanist, Agnostic, Methodist, Messianic, Non-Believer and None
No survey responses were received for Buddhist, Muslim, Sikh or Hindu.
**Question 28 - 117 responses**

Do you consider yourself to have a disability?
(Please click the most appropriate option/s)

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

Varied answers were received for this question as some responses received one or more answers per individual survey.