1. Introduction

Improving access to Primary care and General Practice (GP) is a key aspect of the South East London Sustainability and Transformation plan (STP). GP practices across Bexley are working together to improve GP services by creating more appointments, reduce waiting times and make sure residents have access to quality of services across the Borough. The new service will be available between 8a-8pm, seven days a week, and will enable GP practices to refer patients to the service, either when the practice is closed, for example at the weekend, or if the practice does not have an appointment available.

Bexley’s Clinical Commissioning Group (CCG) is currently working with GP practices across Bexley to explore how the new service will be provided. Residents input is identified as a key aspect in this process to ensure the new service meet local needs. Healthwatch Bexley was subsequently invited to undertake a rapid engagement with local residents during a period of two weeks to gather feedback on the new proposals.

This document presents the views and comments obtained by residents in Bexley during 18th November to 4th December 2016. Healthwatch Bexley were provided with the questionnaire by the CCG and made some minor changes prior to the engagement to include questions such as “How far would you travel to see a doctor?”; “How do you usually travel to doctor appointments?” and “Would you access GP services at the weekend for non-urgent reasons?”.

In total, Healthwatch Bexley obtained the views of 200 residents, which resulted in 180 completed questionnaires. The questionnaires which were excluded were completed by residents whose GP is not in Bexley. The views and feedback collected during this engagement will feed into the service specification of this new service.
2. Results of the Survey

The information from the survey will be illustrated through graphs and charts. Answers to questions that were open ended have been thematically analysed and coded (Q3-Q14).

Q1. What is your age?

<table>
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</tr>
<tr>
<td>66-75</td>
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<tr>
<td>Over75</td>
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Q2. What is your gender?

<table>
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<tr>
<td>Male</td>
<td>0</td>
</tr>
<tr>
<td>Prefer not to say</td>
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</table>

Q3. Are you registered with a GP practices? If so, which one?

The graph illustrates the main practices listed in the survey. 12% of participants did either not state which GP they were registered with or just listed the road name or individual GP.
Q4. How do you usually travel to your Doctor’s appointment?

The majority of respondents travel to their GP practice by foot (52%) followed by car (48%) and bus (21%).

Q5. How far would you travel to see a Doctor?

This question attracted a variety of responses and the results demonstrate that ease of access, e.g. by public transport, as well as the time and distance travelled may determine residents choice of accessing the new service. The current mode of travel, Q4, indicates that walking is the most common means of accessing own GP.

Q6. Would you access GP services at the weekend, i.e. Saturday and Sunday, for non-urgent reasons?

Half of the respondents, 50%, stated they would not access the GP for non-urgent appointments at weekends. Most comments related to accessing on Saturday and Sunday if
there was “a need” or due to “work commitments”. Some respondents stated they would access urgent care or NHS 111 during weekends.

Q7. When you call your GP surgery, is it acceptable to be transferred to another service? Eg NHS 111. What would be important? (e.g. immediate transfer, no answerphone, call waiting).

One third of respondents (33%) said they would not like to be transferred to another service when contacting their GP practice for an appointment, with almost another third (29%) stating it would be acceptable if the transfer was immediate.
Q8. Would it be acceptable for your GP practice to advise you that you will be called back? And if so, what timescale is needed for a ‘good’ service for a call back from a clinician? (e.g. one hour, two hours).

One fifth of respondents said “Yes” to be called back by their GP practice, with almost half of the respondents (47%) stated that a call back within up to one hour would be an acceptable time frame for the GP practice to call back.

Q9. Do you have strong views about who should assess you over the telephone? (e.g. a doctor, a nurse, a trained receptionist).

Over half of the respondents, 55%, stated they would like to be assessed by a GP on the telephone, with 34% reporting being satisfied with a nurse. A receptionist/trained receptionist attracted an equal amount of responses for and against assessment over the telephone.
Q10. Do you think it is important for the doctor or nurse treating you to have access to your health records and history?

The majority of the respondents, 92%, stated they think it is important for the GP or Nurse to have access to their health records and history.

![Access to health records chart]

Q11. We think there are a range of benefits patients will get from the new service. Which ones would benefit you most? Which would you be most interested in?

Participants were encouraged to tick all that apply in this question. GP services at the weekend, followed by reduced waiting times and being directed to the right service for your health condition attracted the most ticks, with more appointments and GP services in the evening generating large responses too.

![Patients benefits chart]
Q12. Can you think of any drawbacks to the proposed service? Is there anything you are concerned about?

Around half of the respondents left comments to this question. The majority of concerns related to:

- The location / travel problems – time / distance of travel
- Quality of service – high demand, availability of appointments, waiting times, abuse of service, lack of staff to cover
- Not knowing the Doctor / seeing your regular Doctor
- Doctors being over worked,
- The experience / knowledge/ qualifications of the GP's / healthcare staff not being as good
- Access to medical records, doctors not having access to records / know your background

Q13. We also need to consider how best to tell local people about the changes and the new service. Where do you get information about health services from? Where would you look for information? (Can you recall seeing posters on buses or at bus stops?)

This question attracted a variety of responses. Respondents appear to obtain a lot of information directly from their GP practices, either through posters, leaflets of letters. Some respondents recall the advert for “Flu jabs” and seeing these advertised on public transport and buses. Social media was also mentioned as a means of accessing information, in addition to online resources e.g. NHS website and News e.g BBC.

Q14. Do you have any other comments?

This question attracted comments from 57 respondents and comments varied widely. On the whole, the majority of comments related to being supportive of extending GP access for evenings and weekends.
A number of residents expressed a lack of information about the forthcoming changes and stressed the importance of the new services being communicated clearly and widely to residence in Bexley:

“Services need to be better promoted. I get most of my info from Diabetes meeting”.

A number of respondents expressing concerns about the capacity and work load for GP’s to be able to provide a good quality service:

“as long as GPs are getting enough rest to provide a good service” and “I feel GPs should be allowed time off like the rest of us”.

The quality of the news service attracted a number of comments, including seeing your own doctor, particularly for vulnerable people:

“I think that trying to speed up and improve services is a good thing. We do need to ensure that those less able (elderly those with an LD, Autism etc.) are adequately supported in the new arrangements. They may know their doc, their surgery and staff and struggle if referred elsewhere”.

Other respondents reported being satisfied with their current GP practice and did not see a need for a new service:

“I am perfectly happy with the service I get from my GP surgery. We already have late evenings”.

Respondents felt the new service must be well organised, adequately staffed and ease the current difficulties of booking an appointment, particularly on the day appointments but acknowledged the improvement in access the new service may have on people who have work commitments.

3. Conclusion / Recommendations going forward

I. Transfer to another service, e.g. NHS 111 should not involve waiting

II. Call back from a professional should be within one hour

III. Location of 7 day services need to take into account public transport access