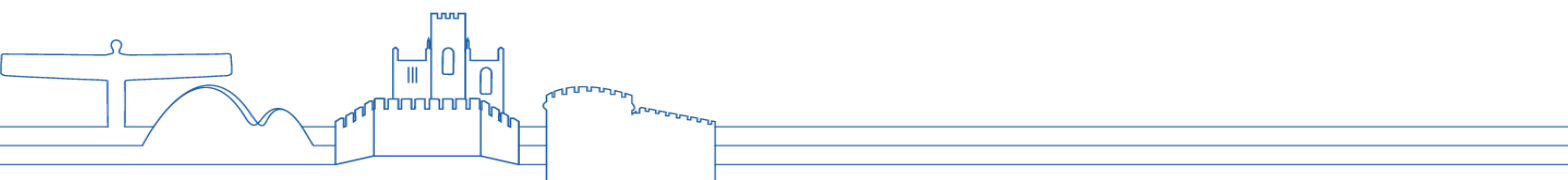




**North East and
North Cumbria**

Exploring patients' awareness and experiences of using digital solutions in GP practices

October 2022





This report was produced by Involve North East on behalf of North East and North Cumbria Integrated Care Board. We are an independent organisation who specialises in involvement and engagement. We work with integrity, ensuring people's voices influence the design of services they receive.

We have vast experience and expertise in gathering the views and opinions of patients, carers and the general public in relation to health services. For example:

- service evaluations
- changes to care pathways
- locating new services

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- Questionnaires – paper-based and online
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- Drop-in events
- Face-to-face and telephone interviews
- Focus groups
- Informal group discussions

For more information about the services we can provide please contact Andrew White on Tel: 0191 226 3450 or email: andrew@involve.org.uk. Visit our website at: www.involve.org.uk

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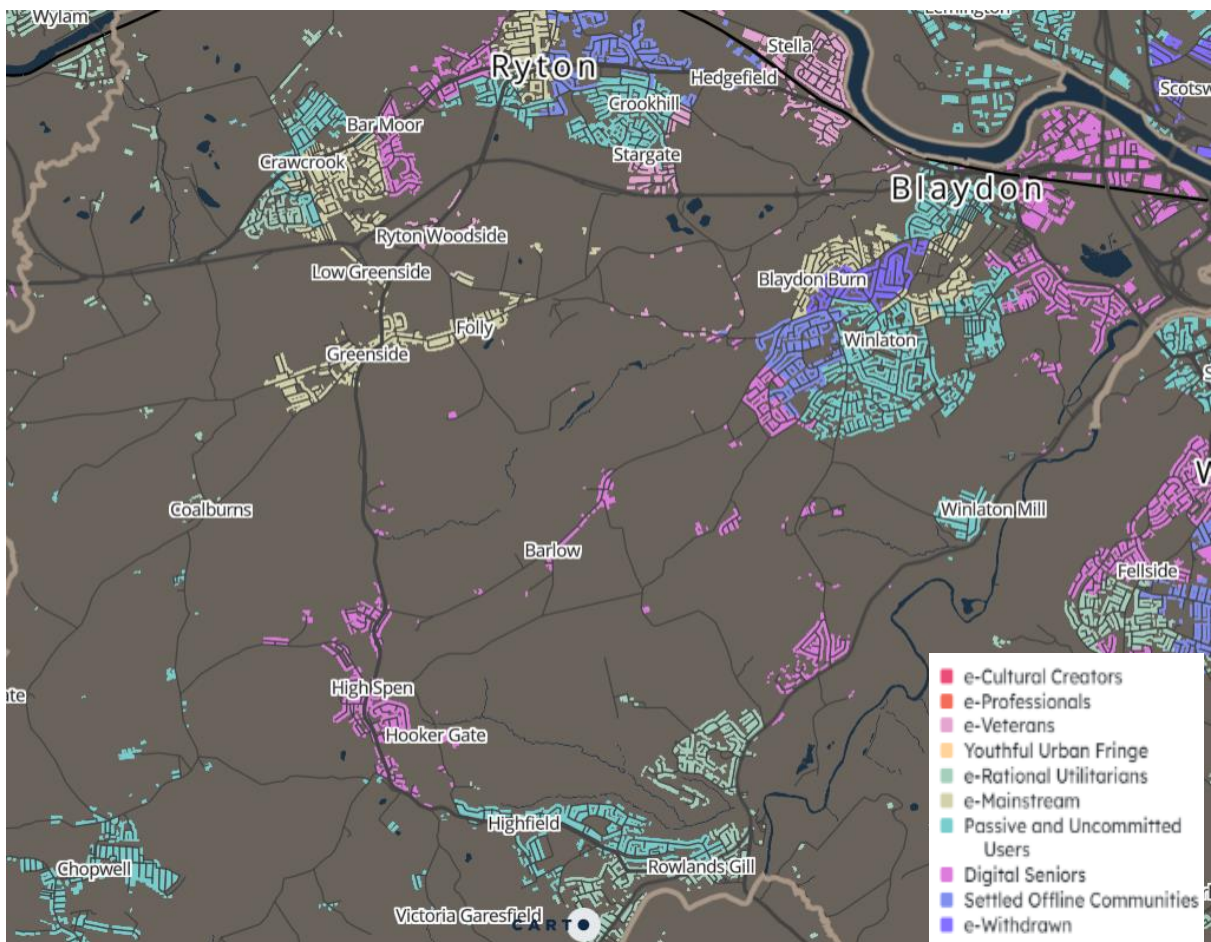
Introduction

- NHS North East and North Cumbria Integrated Care Board supports Primary Care Networks (PCN) operating across the region to engage and listen to patients at a local level.
- In line with the NHS Long Term Plan's ambition for the mainstreaming of digitally enabled care, one of Gateshead Outer West PCN's key priorities is the digital agenda.
- Following engagement work around patients' knowledge and use of digital services in 2020, the PCN is keen to understand current levels of knowledge and use to help inform the development of digital services in the future.

Digital context

- The map below shows the characteristics of residents of Outer West Gateshead in terms of their internet use, or lack thereof.
 - The predominant groups are passive and uncommitted users, digital seniors and E-mainstream.

Internet User Classification – Outer West Gateshead



Source: Consumer Data Research Centre

Key	Group	Description
	e-Veterans	• Affluent families, usually located within populations of mainly middle-aged and highly qualified professionals. • More likely to be frequent and experienced users of the Internet. • Engage with the internet using multiple devices and in a variety of ways. • Fairly mature users and as such they have higher levels of engagement for information seeking, online services and shopping, but relatively less so for communication and entertainment, particularly social networks or gaming.
	e-Rational Utilitarians	• High demand for internet services is constrained by poor infrastructure. • Undertake online shopping, particularly for groceries, search for information or access online banking rather than engage with social networks or gaming. • Tend to be late middle-aged or elderly and include a high percentage of retired home owners. • Preferred method of engagement with the internet is personal computers located at home, with low levels of mobile access.
	e-Mainstream	• Modal internet user characteristics drawn from a wide range of social echelons and most likely represent heterogeneous neighbourhoods. • Their level of engagement is average across most attributes, characterising the typical user.
	Passive and Uncommitted Users	• Many individuals have limited or no interaction with the Internet. • Few distinctive characteristics in conventional socioeconomic terms. • Rarely online, and most commonly report use once a week or less. • Access to broadband is well below average, and for those online, there is mild preference for access via smartphones. • Internet is typically used for social networks, gaming and some limited online shopping.
	Digital Seniors	• Ageing and predominantly White British, retired and relatively affluent. • Make average use of the internet, typically using a personal computer at home. • Despite being infrequent users, they are adept enough to use the internet for information seeking, financial services and online shopping, but less so for social networks, streaming or gaming. • Typically reside in areas where infrastructure provision is often limited.
	Settled Offline Communities	• Most are elderly, White British and retired. • Undertake limited engagement with the internet, they may have only rare access or indeed no access to it at all. • Any online behaviour tends to be through home computers rather than mobile devices and focused upon information seeking and limited online shopping rather than social networking, gaming or media streaming.
	e-Withdrawn	• Individuals who are the least engaged with the Internet. • Live in more deprived neighbourhoods characterised by less affluent White British individuals or areas of high ethnic diversity, high unemployment and social housing. • Highest ratio of people that don't have access or have access but never engage with the internet. • Lowest rates of engagement in terms of information seeking and financial services, as well as the lowest rate in terms of online access via a mobile device. • Higher than average access to Cable broadband which may suggest that some individuals have opted into broadband mainly for the TV-associated benefits. • It is possible that many people have opted out of online engagement, either because it is considered unnecessary or because of economic reasons.

Engagement activity

- Patients were surveyed during August and September 2022 and asked about their:
 - o Awareness of and preferred method for booking an appointment
 - o Awareness of accessing online health services
 - o Awareness of and preferred method for having a consultation
 - o Experience of having a non-face-to-face consultation
 - o Support needs around accessing online health services
 - o Experience of Gateshead Extended Access Service
 - o Experience of or support for conducting health checks at home
- Patient views were collected in a number of ways:
 - o A percentage of patients from each practice received a text invite to complete an online questionnaire; the survey link was also publicised across all GP practice platforms, local voluntary and community organisations and community Facebook groups.
 - o To ensure that patients who do not have online access were able to take part, practices distributed paper questionnaires. Local voluntary and community organisations were also approached to display a poster within their settings and their user groups were invited to take part in face-to-face engagement activities. We are grateful to the following groups who shared their views in this way:
 - Barmoor Hub Friendship Group
 - MHA Rowlands Gill Lunch Group
 - Rowlands Gill Women's Institute
 - Stargate and Crookhill Community Event participants
 - o Other question formats were also available upon request.
- 478 people shared their views (see Appendix 1 for profile of respondents) and taking the patient population as a whole, the data is representative with a confidence level of 95%.
- It should be noted however that examining the data by demographic groups shows a noticeably higher number of responses by females.
- The following is a summary of the findings of the survey.

Key findings

Online activity levels

- Four-in-five patients use online services or apps in their daily lives mirroring 2020 levels; use declines with age and disability, reflecting national patterns.
- One-in-five patients rarely or never go online and this supports Internet User Classification data which identifies passive and uncommitted users and e-Withdrawn groups (opting out of online engagement for economic reasons) within Outer West Gateshead.

Awareness and use of online services

- There has been a noticeable increase in awareness of the ways to access health information since 2020 however, over half of patients are unaware of Patient Access, just under half are unaware of their practice's website and over three-in-ten patients are unaware of the NHS website and NHS App.
- Over half of patients are aware that they can book appointments online although this is markedly lower than the 98.9% awareness of telephone and 79.5% awareness of in-person booking methods. Patients who prefer to book by telephone cite a lack of awareness of online booking as one reason for choosing to use the telephone.
- Online is the second most preferred method of booking an appointment behind the telephone and this has increased in popularity by nearly 6%, at the expense of the telephone.
 - For patients who prefer to book online, the fact that it is quicker than using the telephone is the main benefit, they also find it easy and accessible.
 - Patients preferring the telephone cite being able to speak to someone, explain their issues and book a convenient appointment; they feel it is quick, easy and accessible.
- In terms of consultations, there has been an increase in awareness of online consultations by nearly 10% but despite this, fewer than one-third of patients are aware of this type of consultation. Fewer than one-quarter of patients are aware of video consultations and one-sixth are aware of text interactions with their practice. Telephone appointments are most well-known by nine-in-ten patients.
- Face-to-face followed by telephone appointments are the preferred consultation methods and there has been an increase in preference for each (14% and 11%, respectively) although Covid may well have artificially lowered face-to-face preferences in 2020.
 - Patients preferring face-to-face consultations cite having a physical examination and being able to explain symptoms and issues more easily in person. Those preferring telephone cite accessibility, ease and speed.
- There has been a decline in preference for all other methods - patients preferring to have an online consultation number 2.9% and have decreased by 0.5% since 2020. Video consultations are preferred by 2.2% of patients and have decreased by 2.9% and only 1.1% of patients would prefer a text interaction.
- Despite falling preference figures there has been an increase in online consultations (28.3%, up from 7.1%) text interactions (19.2% up from 4.4%) and video consultations (3.6%, up from 1.6%) with patients generally reporting positive experiences.

Improvements to online services

- There is an appetite to use the online booking system but patients feel that it is currently restrictive, not offering a valid alternative to booking via the telephone; over 10% of reasons

given for preferring to book appointments by telephone highlighted issues with the online booking system.

- Patients report a lack of appointments, having to sign in every time they use the system, needing to have photo ID to register and not being able to book appointments for their children. A number of patients said that their practice used to allow online booking but it was no longer available or no longer worked or they had been told it was oversubscribed.

Supporting access to health services online

- Patients requested support to access health services online with a preference for in-person support within the practice; “how to” leaflets and videos would also be valued.

Face-to-face services

- Booking appointments in person and having face-to-face consultations are still very much in demand. Patients expressed a desire for face-to-face appointments to continue with some requesting a return to pre-Covid levels of availability.

Self-health checks

- The number of patients being asked to carry out health-checks at home has remained constant since 2020 with approximately one-quarter being asked to do so. The majority of those who have not conducted their own would be happy to do so providing they had thorough instructions and equipment provided. Those who would not, feel that they are not qualified to do so and would feel unsure as to the accuracy of the measurements provided.

Gateshead Enhanced Access Service (Extra Care Appointments)

- Over one-third of patients are aware of the Gateshead Enhanced Access Service.
- When all patients were asked if they would attend another local practice to have a GP appointment, one-third said that they would not, primarily because they are unable to or feel it would be too far to travel. However, the vast majority of those who have been offered an appointment in this way have accepted it.

Patient views

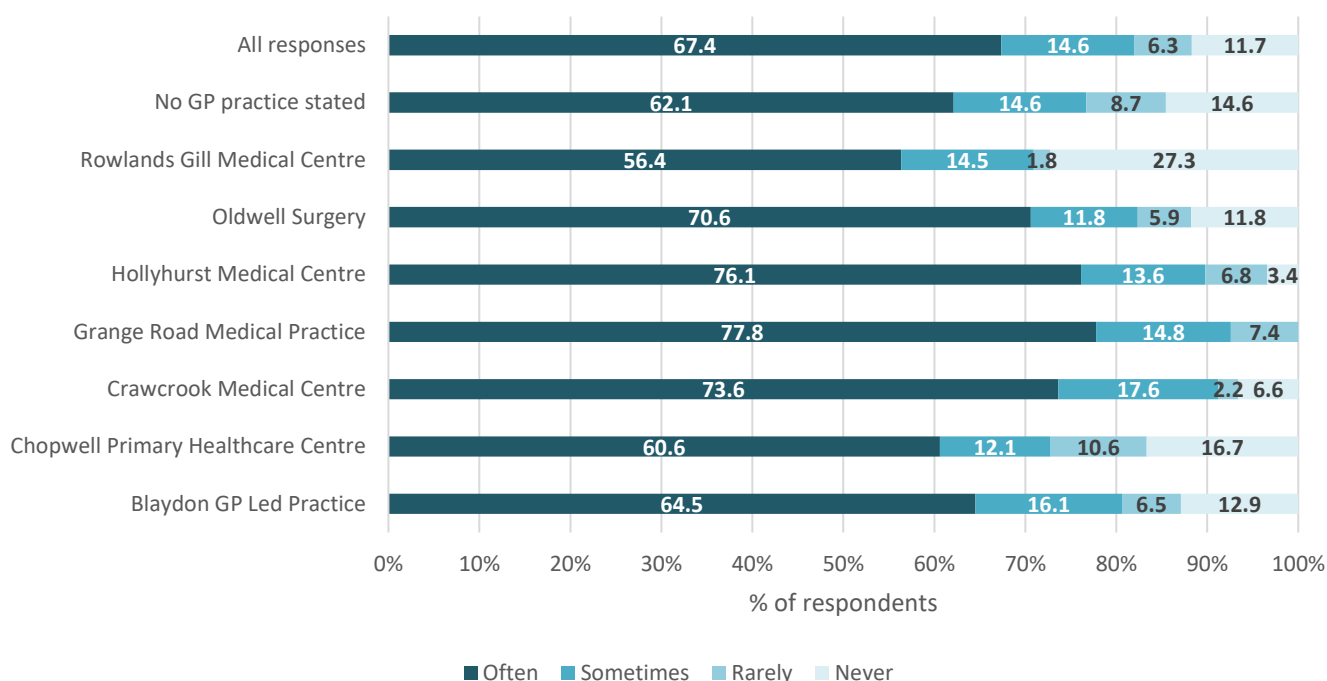
- The findings below represent the aggregated responses of 478 patients across the PCN.
 - This data has been cross-referenced where possible with responses from the 2020 survey.

Practice	No. of respondents	% of respondents	% difference to total PCN patient population*
Hollyhurst Medical Centre	88	18.4	+4.2
Crawcrook Surgery	91	19.0	-2.6
Chopwell Primary Health Care Centre	66	13.8	+6.2
The Medical Centre (Rowlands Gill)	55	11.5	-7.2
Grange Road Medical Practice	27	5.6	-7.0
Blaydon GP Practice & Minor Injuries/Illness unit	31	6.5	-3.5
Oldwell Surgery	17	3.6	-11.5
No GP practice stated	103	21.5	
Total	478	100.0	

*E.g. Hollyhurst Medical Centre patients account for 14.2% of the patient population of the PCN therefore their responses are slightly overrepresented

Use of online services in daily life

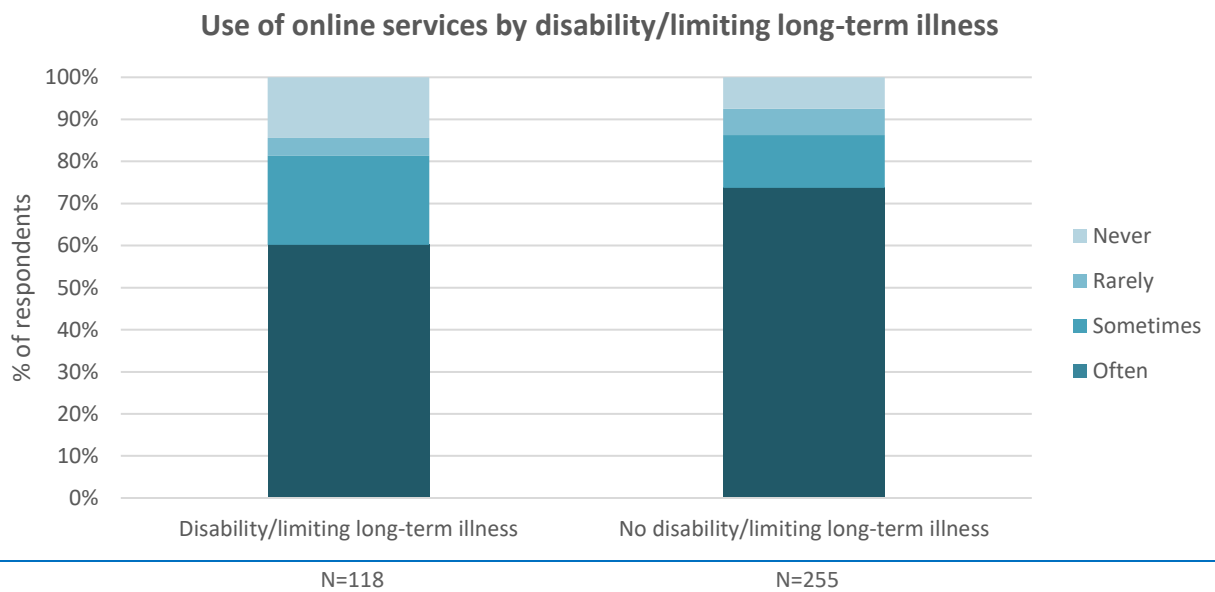
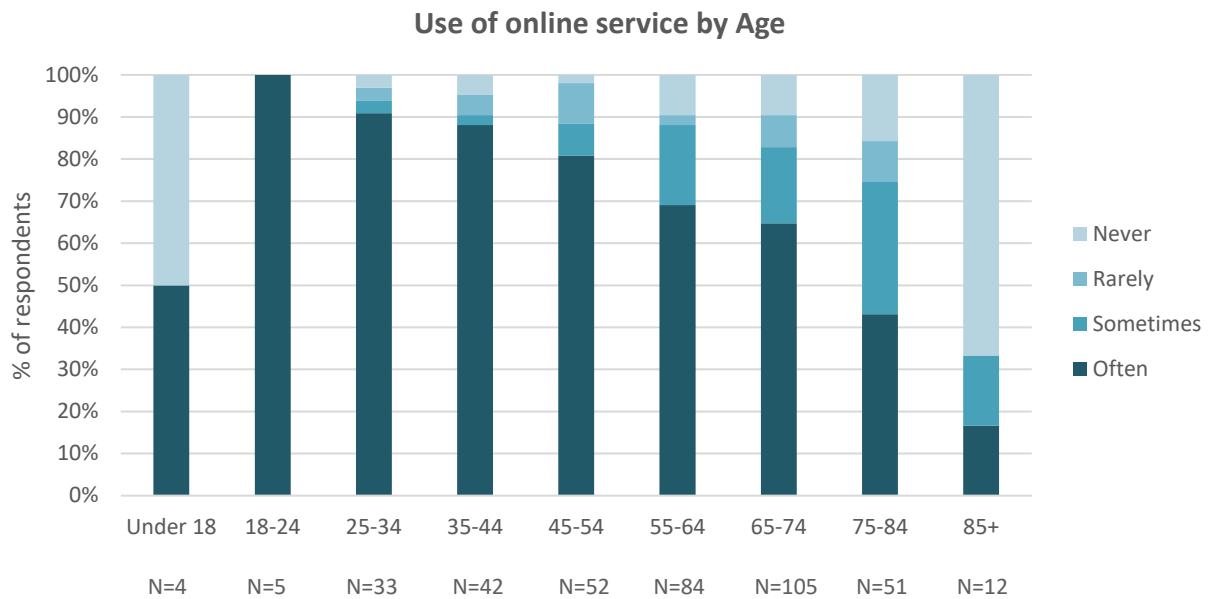
Do you use online services in your daily life?



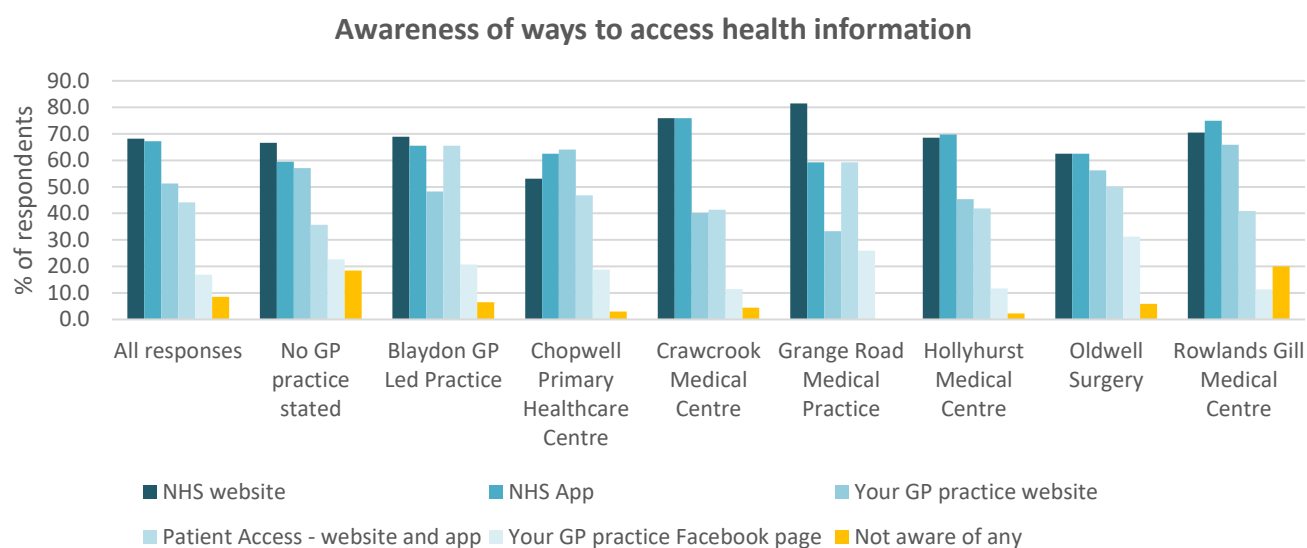
No. of respondents - 478

- Two-thirds (67.4%) of surveyed patients often use online services. However, for 6.3% online activity is rare and 11.7% never go online. This pattern reflects the 2020 patient survey findings suggesting that internet usage has not increased within the patient population.

- o Digital exclusion indicators (The Government Digital Service) identify older populations and those with an illness or disability as less likely to use the internet. The charts below show a decline in online activity with both age and disability.



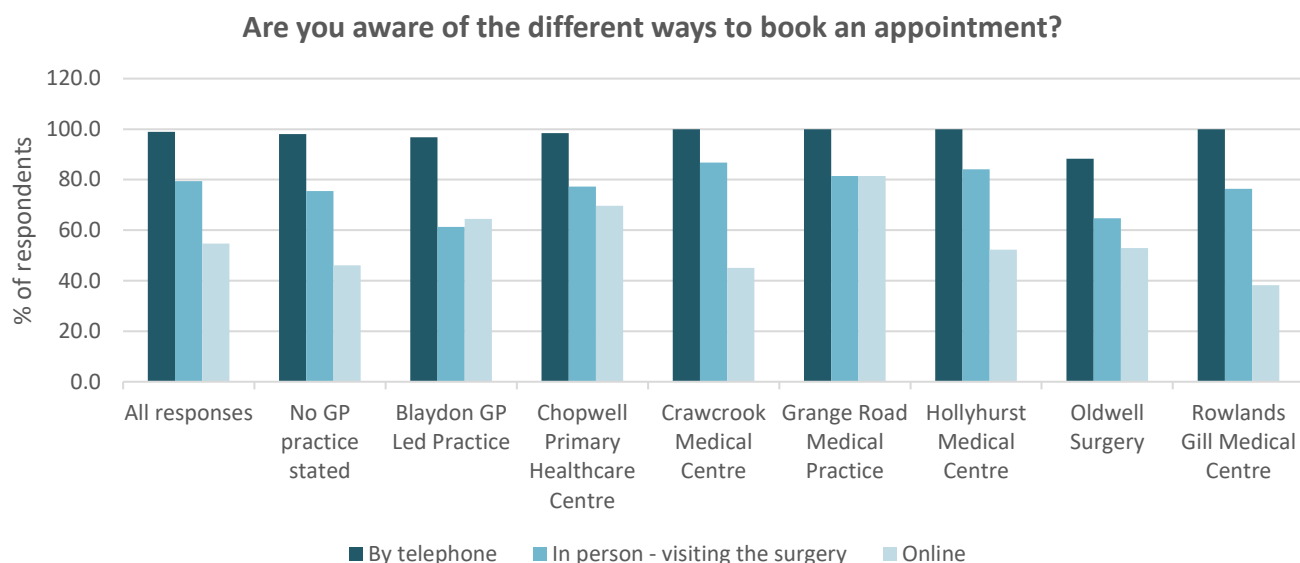
Awareness of ways to access health information



- Nine-in-ten patients (91.4%) recognise one or more information sources, similar to 88.2% of respondents of the 2020 survey although there has been an increase in the proportion of patients recognising each information source since 2020.
- The NHS website and NHS App are most commonly known as per 2020 findings although awareness of both have increased (NHS website 11.7% increase, NHS App 23.4% increase since 2020).
- Over half of patients are aware that their practice has its own website, an increase from two-fifths in 2020.
 - There is greater awareness amongst patients of Rowlands Gill Medical Centre (65.9% and Chopwell Primary Healthcare Centre 64.1%) and less awareness amongst Grange Road Medical Practice patients (33.3%).
- 44.2% are aware of the Patient Access website and/or app, an increase from 38.0% in 2020.
 - Awareness is greater amongst Blaydon GP Led Practice patients (65.5%) and Grange Road Medical Practice patients (59.3%).
- 16.9% of patients are aware of their practice's Facebook page (compared to one-in-ten in 2020).

Booking appointments

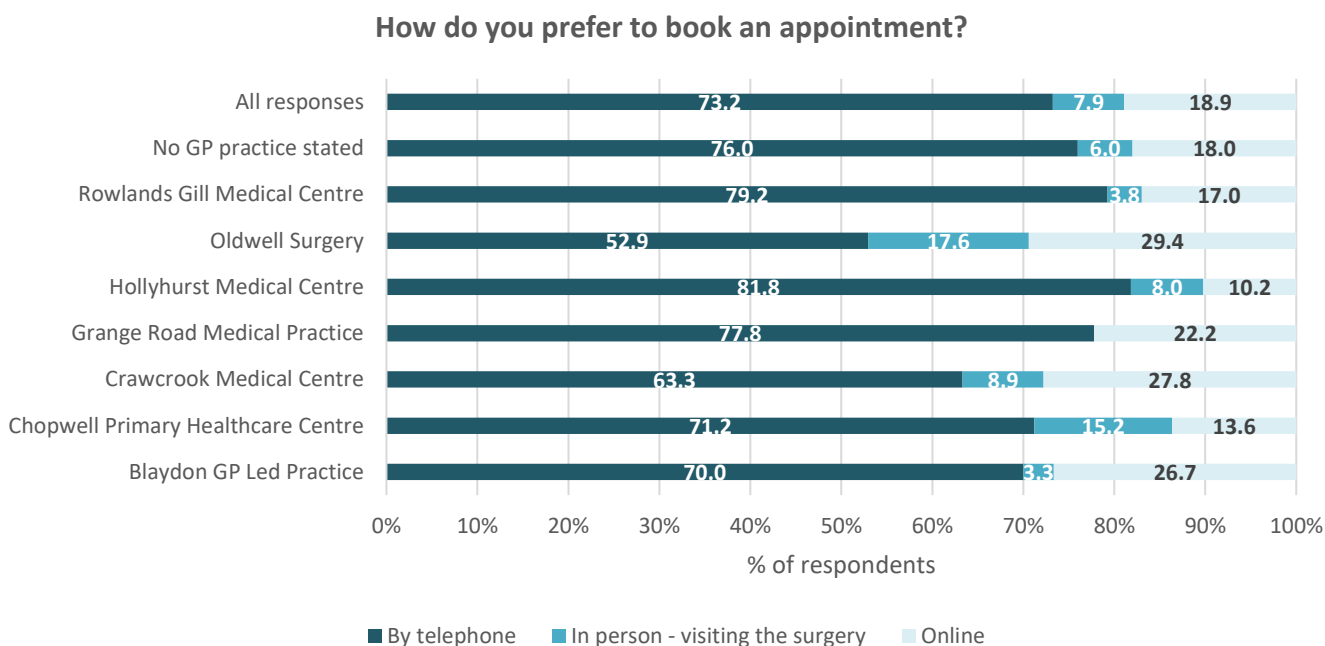
- Awareness of methods



No. of respondents - 375

- o 98.9% of patients are aware that they can book appointments via the telephone.
- o 79.5% know they can book an appointment by visiting their GP practice.
- o Over half (54.7%) know that they can book online.
 - This is most well-known by patients of Grange Road Medical Practice (81.5%) and least well known amongst patients of Rowlands Gill Medical Centre (38.2%).

- Preferred method



No. of respondents - 471

- o Making an appointment by telephone (73.2%) is the preferred method for the majority of patients, this compares to 80.3% in 2020.

- Patients of Hollyhurst Medical Centre (81.8%) and Rowlands Gill Medical Centre (79.2%) are more likely to prefer to book this way.
 - o 18.9% prefer to book online, an increase from 13.1% in 2020.
 - Patients of Oldwell Surgery (29.4%) and Crawcrook Medical Centre (27.8%) are more likely to prefer to book online.
 - o 7.9% prefer to visit the practice to make an appointment compared to 4.5% in 2020.
 - Patients of Oldwell Surgery and Chopwell Primary Healthcare Centre are most likely to prefer this type of appointment.
- Reasons given for preferred method

Reasons for preferring to book by telephone	No. of respondents	% of respondents
Benefits of speaking to someone		
Want to speak to a person	54	19.4
Can explain things	20	7.2
Can give you options and arrange a convenient appointment	17	6.1
Get confirmation that appointment is booked in	14	5.0
Want personal contact	8	2.9
Feel like you are guaranteed an appointment	4	1.4
Accessibility of method		
Easy	62	22.3
Quick	26	9.4
Accessible method	20	7.2
Problems with booking online		
Online appointments less/never available	19	6.8
Don't like/can't use internet	11	4.0
Online booking doesn't work/not flexible	11	4.0
Didn't know could book online	10	3.6
Don't know how to book online	6	2.2
Other methods not considered		
Habit/always used this method	27	9.7

No. of respondents - 278
Respondents could give more than one reason

- o Patients highlighted the benefits of physically speaking to someone when citing reasons for preferring to book by telephone.
 - Some stated that they simply like to speak to a person, they feel that it gives them the opportunity to explain their issue, they can discuss appointment times and availability and can get a verbal confirmation of their booking.

“Because I much prefer human contact, the ability to arrange a mutual time for a visit.”

“Like to make sure I speak to people in person.”

“I prefer speaking to someone for better options and reliability.”

“You feel reassured that the appointment is booked when speaking to an actual person.”

“You know that by using telephone that the correct information is given and recorded.”

- The accessibility of telephoning was also highlighted; patients feel it is easy, quick and accessible to those who work or have mental or physical issues which would prevent them using other methods.

“It’s easier and less time consuming.”

“As we’re in our 80s it’s easier.”

“I can call from my mobile as well as my home phone.”

“Health care needs to be delivered in a medium that suits all for it to be inclusive. The telephone is an inclusive medium.”

“Have a social phobia.”

“As a full-time worker, I have limited time to spare to attend the surgery just to make an appointment.”

- o Others cited issues with booking online and in particular they feel that online appointments are scarce.

“There appears to be less appointments online.”

“Online often has no appointments available and so it’s easier just to phone.”

“I have tried using NHS app which was not of any use as a 16 week wait for an appointment is inadequate to say the least.”

“I would prefer to book online however there has never been any appointments available whenever I require one so the next best option is by telephone as it is convenient.”

- o They feel the system does not work well or is inflexible, highlighting:

- Difficult to use
- Not currently available
- Does not work
- Have to sign in every time I use it
- Need photo ID to register
- Cannot book appointments for children

- o Some people do not like to or cannot use the internet whilst others simply did not know online booking was possible or how to do it.

“I can’t trust online as I’ve had problems in past.”

“I’m not able to do online as I can’t work apps.”

“Not confident with any online services.”

“This [telephone] is the only way I thought I could make an appointment, apart from going into the surgery. I didn't know I could do it online.”

“I didn't know online was an option I would use this moving forward.”

“I also don't know how to access the online portal to be able to book online.”

Reasons for preferring to book in person	No. of respondents	% of respondents
Benefits of speaking to someone		
Like to speak face to face	12	35.3
Can give you options and arrange a convenient appointment	3	8.8
Can explain things	2	5.9
Problems with booking by phone		
Quicker than phone	11	32.4
Accessibility of method		
Easy	4	11.8
Accessible method	2	5.9
Problems with booking online		
Don't like/can't use internet	3	8.8
Online appointments less/never available	1	2.9
Other methods not considered		
Habit/always used this method	1	2.9

No. of respondents - 34
Respondents could give more than one reason

- o Patients who prefer booking in person like to speak with practice staff face-to-face; they can offer appointment times and things can be explained.
- o One-third of respondents felt it was quicker than using the phone and for some it was an accessible method. Four people highlighted issues with booking online.

“I like person to person contact and can often discuss matters better than remotely.”

“I prefer this method as it is more personal and I can discuss any issues that I may have with the medical staff prior to the appointment.”

“Don't have to wait on phone whilst someone takes an age to answer.”

“Sometimes in a huge queue waiting to get through on phone.”

“I don't like doing stuff online.”

“Often hard to get through on the telephone. Would prefer to book online but whenever I try it says no appointments available to book.”

Reasons for preferring to book online	No. of respondents	% of respondents
Accessibility of method		
Easy	26	34.2
Accessible method	13	17.1
Don't have to speak to anyone	4	5.3
Problems with booking by phone		
Quicker than phone	40	52.6
Benefits of online		
Can see myself what is available	10	13.2
Prefer online but not many appointments available	8	10.5
Didn't know I could book online but want to	2	2.6

No. of respondents - 76

Respondents could give more than one reason

- o Patients who prefer to book appointments online cite its ease and accessibility for workers and those with limited time in particular.
- o Others highlighted problems with booking by telephone, especially the long waiting times on hold.
- o Some like having the information available to view themselves whilst others highlighted a lack of appointments using this method.

“Easier and you can see yourself what is available instead of having to take time going over the phone arranging a day and time available.”

“Easier to do online while multi-tasking e.g. looking after my family, getting everyone ready for school. However usually I end up ringing for urgent appointments which aren't online as kids usually get things which are more acute and can't wait a few weeks for routine appointments. This is hard as I need to remember to keep an eye on the time for the phones opening while getting myself and everyone else ready.”

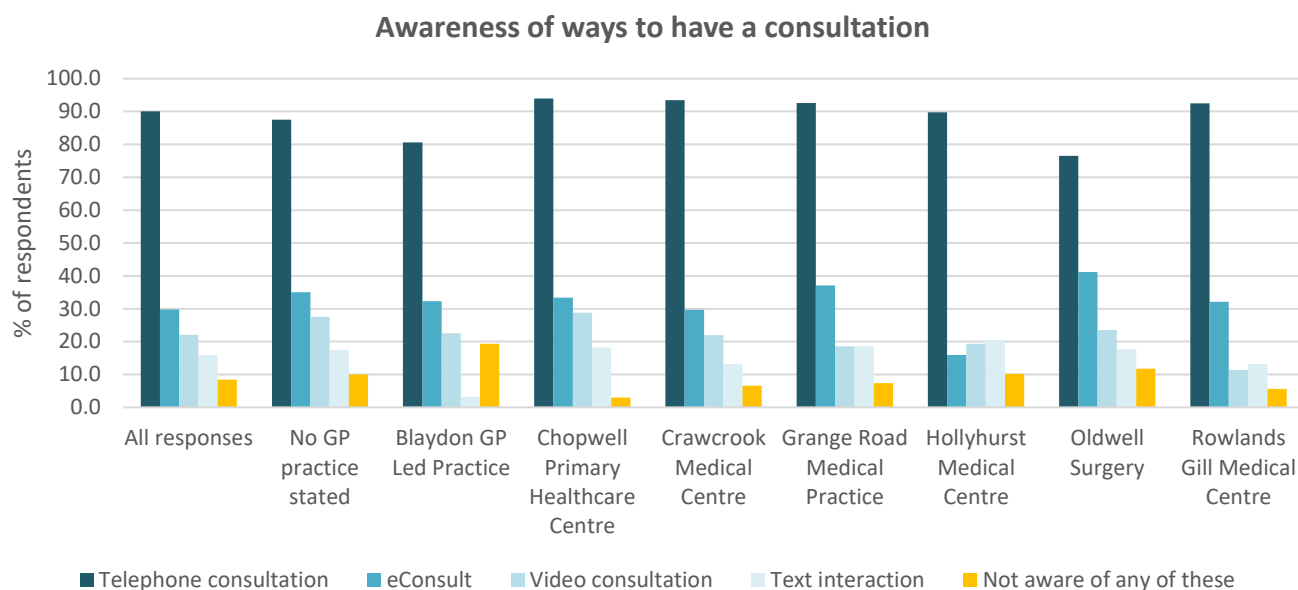
“Trying to get through on the telephone when at work and you only have certain length of break and at specific time of break means it is often impossible to make an appointment. I've been on hold and in a queue for 20mins.”

“I work I can't sit on hold for an age trying to get through, especially to find out there are no appointments. My practice used to allow online bookings, now they don't. It's a backwards step.”

“If it were possible, it would be more convenient, but whenever I've tried there have never been any appointments available.”

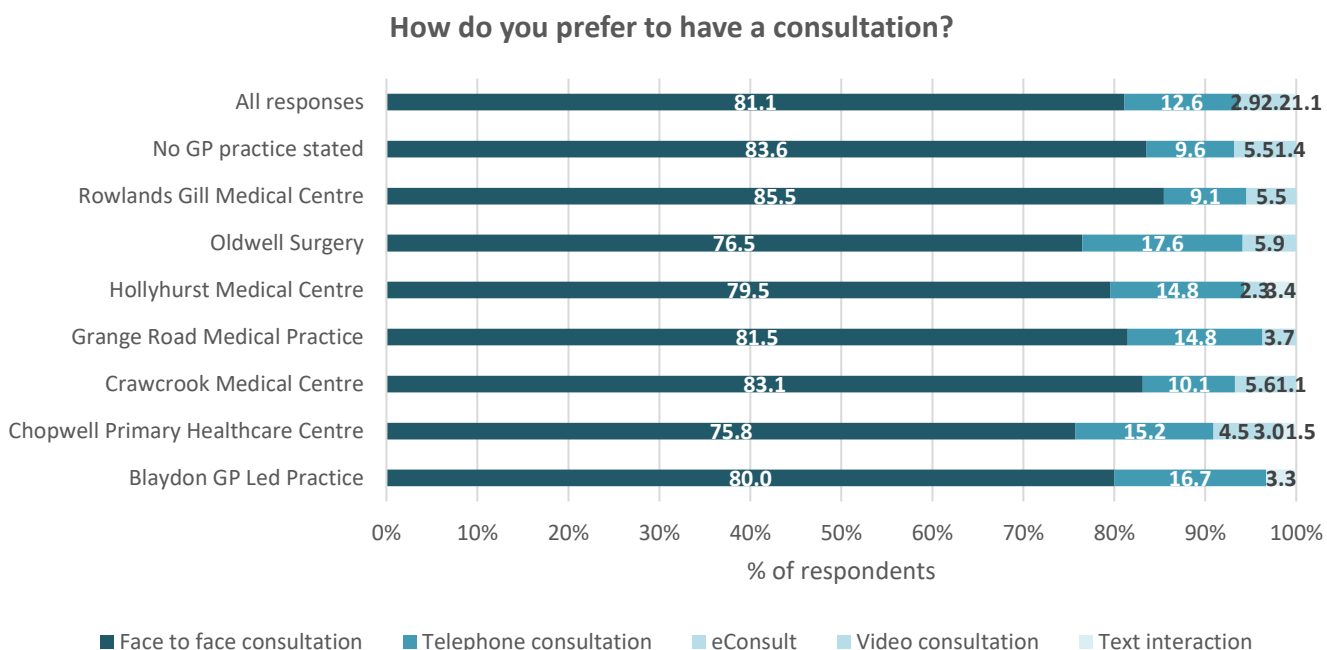
Consultations

- Awareness of ways to have a consultation



- o Almost nine-in-ten patients (91.6%) are aware of alternatives to face-to-face consultations, in keeping with the 2020 findings of 89.6%.
 - Those who did not know of alternatives are more likely to come from Blaydon GP Led Practice with 19.4% (6) of patients.
- o The vast majority know that their practice offers telephone consultations (90.1%) compared to 89.6% in 2020.
 - Telephone appointments are less well known amongst patients of Oldwell Surgery (76.5%)
- o Nearly one-third (29.8%) know that you can have an appointment via eConsult which is a noticeable increase on 2020 findings at 20.4%.
 - Patients of Oldwell Surgery are more likely to be aware of this method (41.2%) of consultation and patients of Hollyhurst Medical Centre less so (15.9%).
- o Over one-fifth (22.1%) of patients are aware of video consultations. This figure has not changed noticeably since 2020 when 23.9% of patients indicated they were aware of this option.
 - Chopwell Primary Healthcare patients have greatest awareness of this method (28.8%) whilst patients of Rowlands Gill Medical Centre have the least awareness (11.3%).
- o 15.9% of patients are aware that they can have text consultations, up on 9.1% in 2020.
 - Awareness is particularly low amongst Blaydon GP Led Practice (3.2%, one patient).

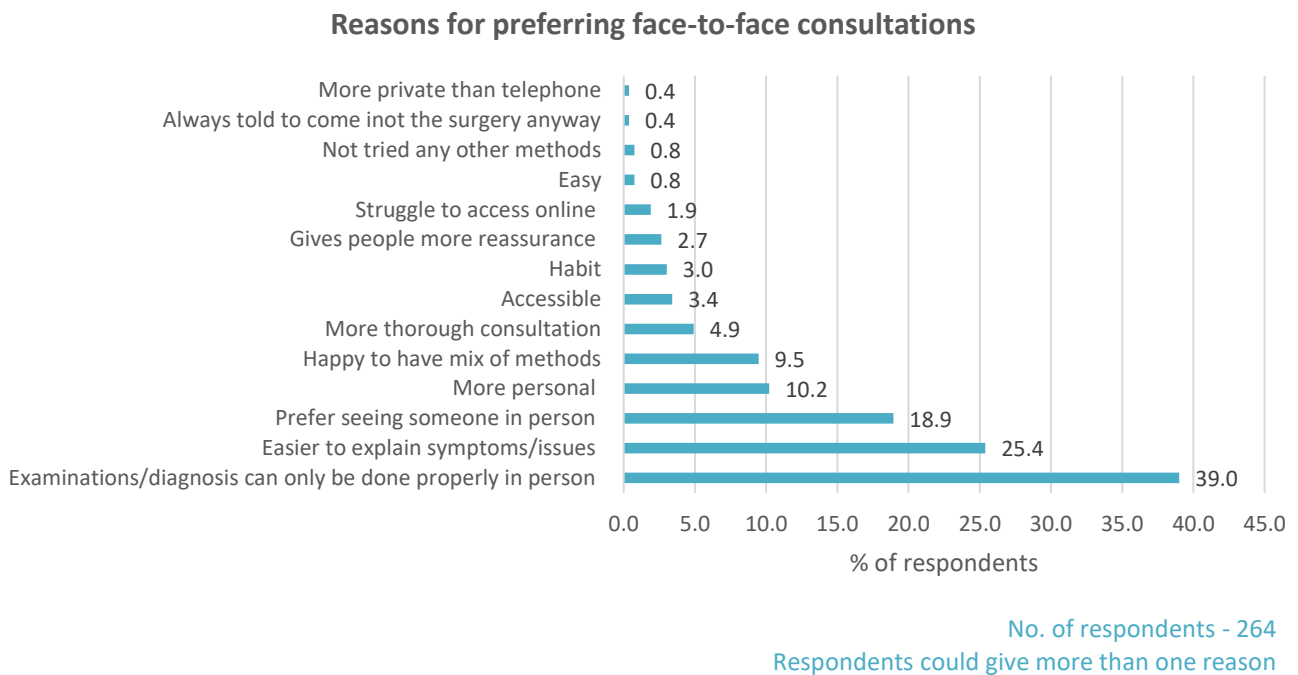
- Preferred consultation method



No. of respondents - 445

- o Having a face-to-face consultation was the preferred method for 81.1% which is noticeably higher than the 2020 findings of 67.1% of patients.
 - Patients of Rowlands Gill Medical Centre are most likely to prefer this method (85.5%) and patients of Chopwell Primary Healthcare Centre least likely (75.8%).
- o 12.6% prefer a telephone consultation compared to 23.1% in 2020.
 - Oldwell Surgery patients are more likely to choose telephone appointments (17.6%) whilst Rowlands Gill Medical Centre patients are less likely to prefer using the telephone (9.1%).
- o 13 people (2.9%) would prefer eConsult (3.4% in 2020).
- o 10 people (2.2%) would prefer a video consultation (5.1% in 2020) and 1.1% (5 people) a text interaction (0.4% in 2020).

- Reasons given for preferred consultation method



- o For patients who prefer a face-to-face appointment, the main reason is that physical examinations can be conducted and therefore they feel an accurate diagnosis/treatment plan can be made (39.0%).
- o One-quarter (25.4%) feel it is much easier to explain their illnesses or problem this way.
- o Some simply prefer to see someone in person or feel it is a more personal experience.
- o 9.5% feel that although they prefer this type of consultation, they would be happy to use a different method when appropriate.

“The doctor can see you and I feel that it’s a better way to show and explain things so the doctor can see first-hand, truer diagnosis.”

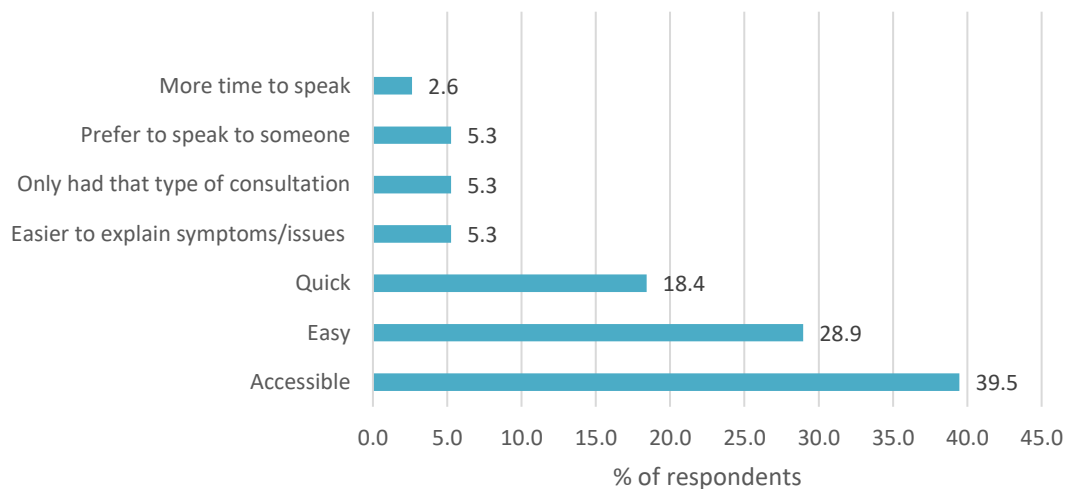
“Most times I’ve needed to see a doctor or nurse, the condition has needed a physical examination. This couldn’t be done any other way. If I were needing just test results etc., then phone or video would be fine”

“I believe that it is difficult for any health professional to make a thorough examination and assessment of my health issue without seeing me face to face. Telephone consultations particularly are terrible.”

“There is no nuance and real interaction with other avenues.”

“It is the only way to explain where a pain is and if there is a rash or spots they need to be seen as photos don’t give true size colour or if inflamed. Plus doctor can see if you are depressed down in the dumps or generally in a not good place.”

Reasons for preferring telephone consultations



No. of respondents - 38

Respondents could give more than one reason

- o Not having to disrupt work or leave the house was the main reason given by patients who prefer telephone consultations. For patients with disabilities or a lack of transport it suited them best.
- o Some responded that it was simply easier and quick.

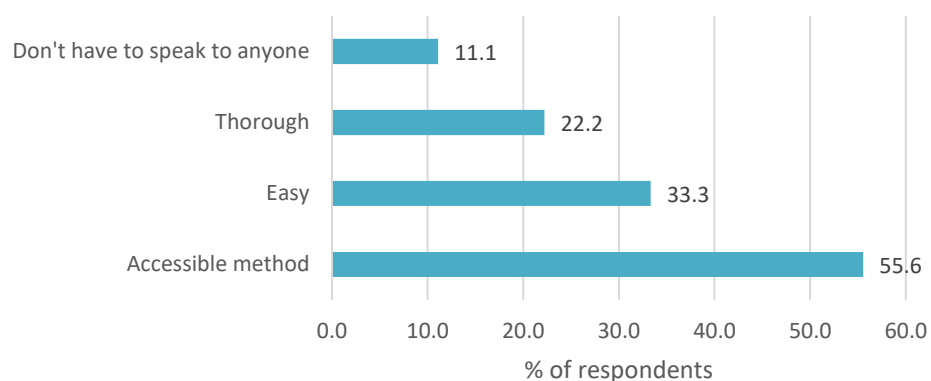
“I can have an appointment without taking time off work.”

“Social phobia.”

“I can still talk to a GP properly but don’t have to leave home.”

“This is a quick easy option.”

Reasons for preferring online consultations



No. of respondents - 9

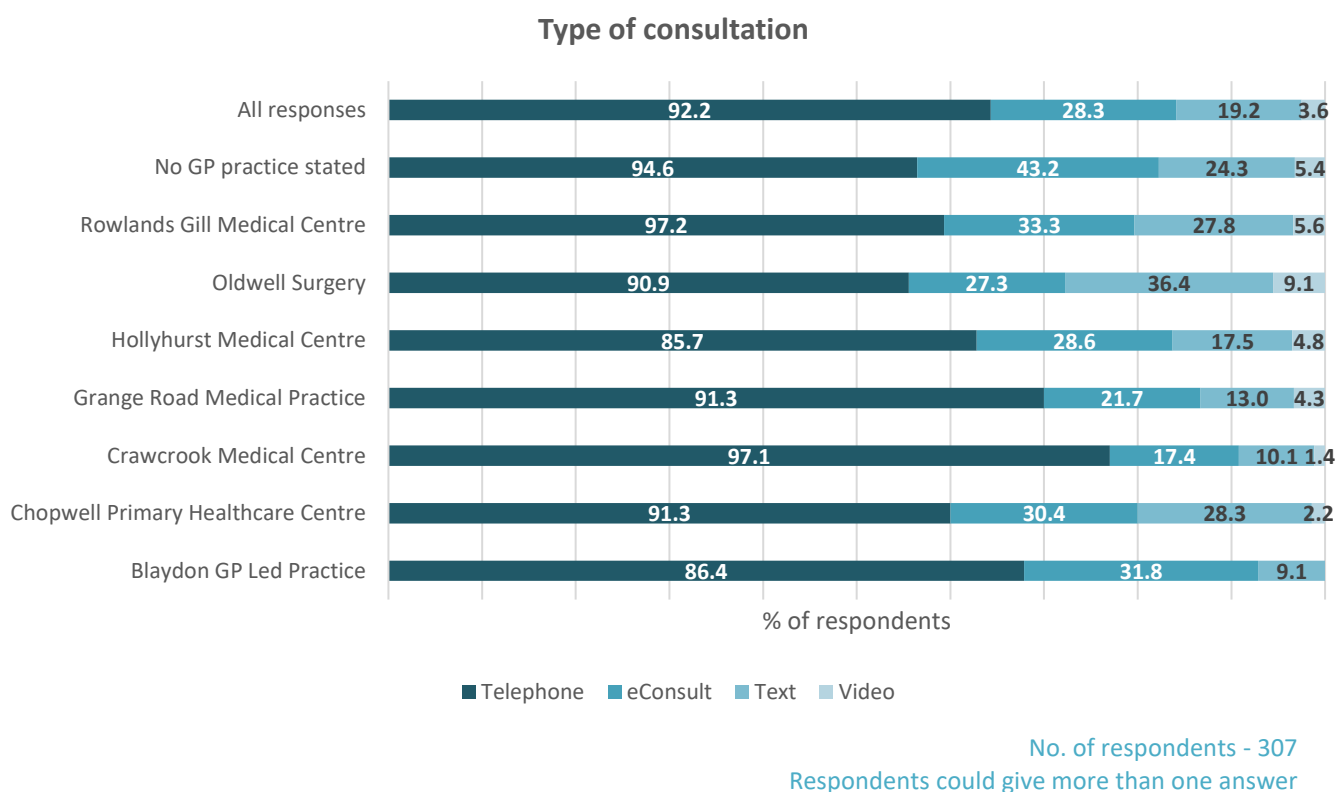
Respondents could give more than one reason

- o Those who preferred to use eConsult felt it was more accessible as it can be done at any time, it is easy to explain in writing and upload photos.

“Everybody is very busy and the least amount of time waiting in the surgery is preferable. A visit to the GP often takes a lot of time and does not enable full time workers the flexibility to visit, often having to wait for holidays/take time off or wait weeks if not a month to get a late afternoon appointment.”

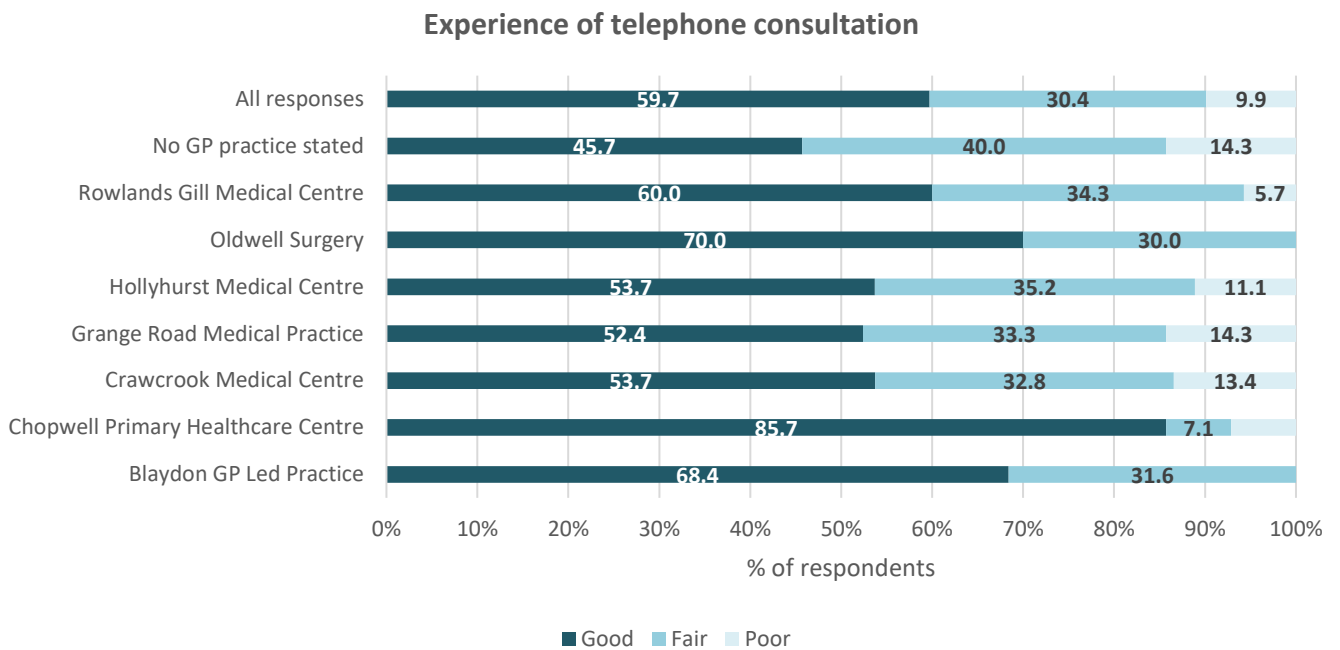
“I find this the most convenient, using for myself or my children. You can put all your information in, upload pictures if needed and then someone gets back to you in a day or so. When I tried to use the eConsult option recently, my GP website said it wasn't available. I ended up having to take my 3 young children to a face-to-face appointment, not ideal.”

- o Eight patients prefer video consultations citing accessibility in fitting it around work, not having to leave their house, time saving and ease.
 - o Being able to be seen visually was also mentioned.
 - o One patient prefers text conversations. They like being able to write their message as their autism means they are very literal in face-to-face conversation and sometimes misunderstood.
- Experience of non-face-to-face consultations
 - o 376 patients have had consultations within the last 12 months.



- o 92.2% have had a telephone consultation compared to 99.5% in 2020.
 - Telephone consultations are most likely in Crawcrook Medical Centre (97.1%) and less likely in Hollyhurst Medical Centre (85.7%).

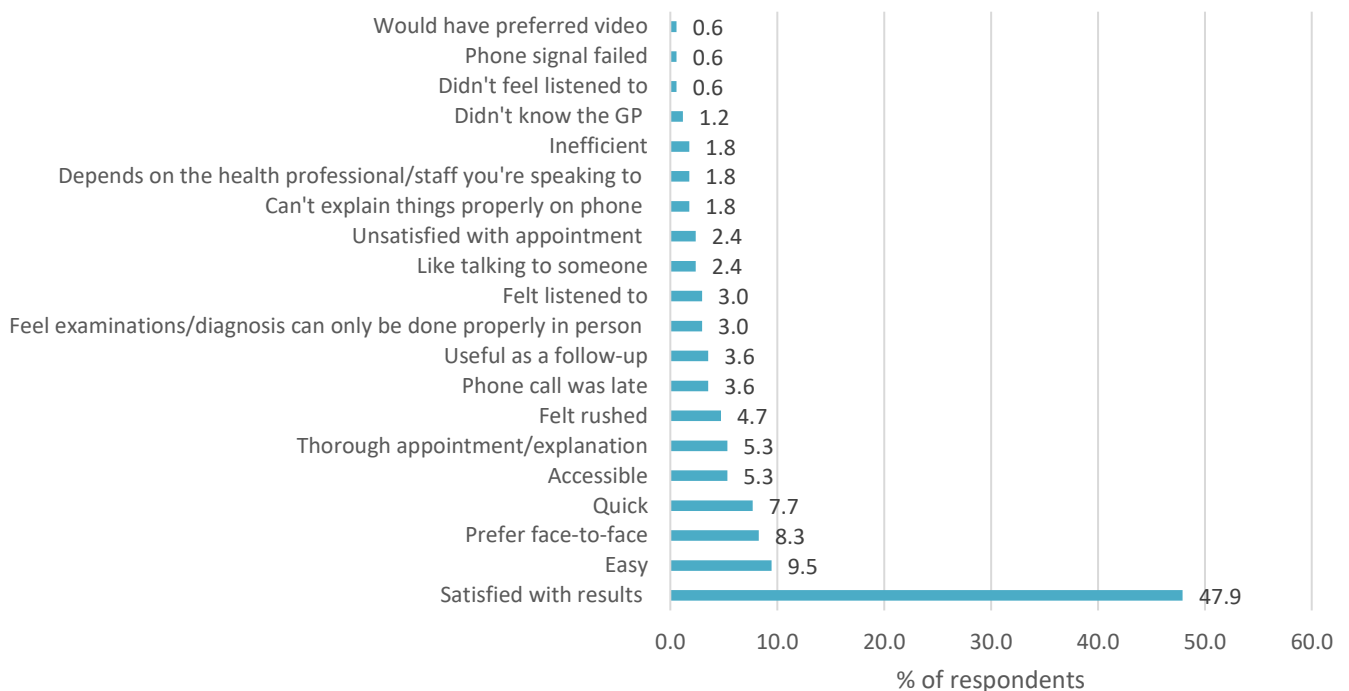
- o 28.3% of patients have had an online consultation, up from 7.1% in 2020.
 - Patients of Rowlands Gill Medical Centre are more likely to have a consultation this way (33.3%) and patients of Crawcrook Medical Centre, less likely (17.4%).
- o 19.2% have had a text interaction, up by from 4.4% in 2020.
 - Text interactions are more common within Oldwell Surgery (36.4%) and less so within Blaydon GP Led Practice.
- o 3.6% of patients have had a video consultation up from 1.6% in 2020.
- o Patients rated their experience of consultations by telephone, eConsult, video or text.
 - 91.6% of these experiences were positive with respondents rating them either 'good' or 'fair.'



No. of respondents - 283

- Of the 283 patients receiving a telephone consultation 59.7% felt the experience was good and 30.4%, fair, compared to 70.3% and 20.3%, respectively in 2020.
 - Patients of Chopwell Primary Healthcare Centre are more likely to report positive experiences (92.8%).

Telephone - reasons for good/fair rating



No. of respondents - 169

Respondents could give more than one answer

- Patients were satisfied with the results of the consultation and felt that the process was quick and easy efficient, the consultation went well and issues were resolved.
- However some still felt they would prefer a face-to-face appointment.
- Patients did not have to leave their homes or work although some who have hearing difficulties struggled with this consultation method.

“Informed decisions, accurate information gained, progress.”

“Consultation was precise and covered what was required.”

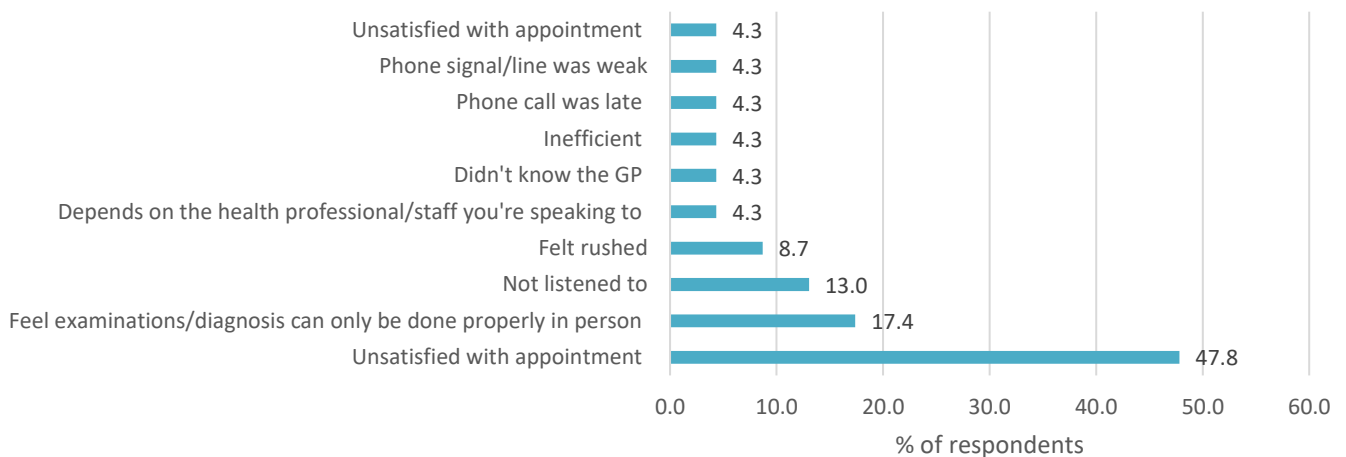
“No examination required, just medical evaluation. Worked fine.”

“I felt that with the nature of the consultation I would've preferred a face-to-face appointment.”

“Because I was at work and couldn't get the time off but needed the appointment.”

- Twenty-eight patients rated their telephone consultation poor, with 23 giving reasons for this.

Telephone - reasons for poor rating



No. of respondents - 23
Respondents could give more than one answer

- Nearly half (47.8%) were not satisfied with the appointment. They felt they did not receive help, their condition could not be explained fully on the phone or their symptoms were misunderstood.

“They relied very much on my own analysis of my health.”

“Unable to get GP to understand issue. Particularly as the main issue was that I had lost my voice.”

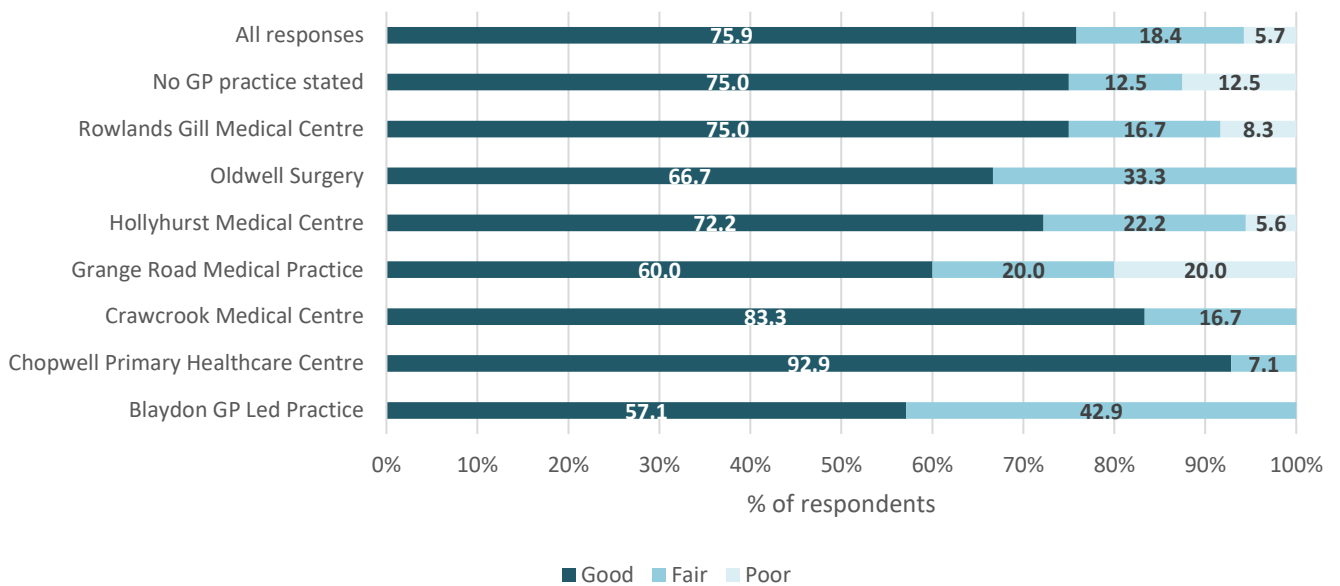
“Palmed off, can't possibly know if my condition was serious or not.”

- Others felt that they needed a physical examination.

“I feel I was just given pain killers when really I need someone to have a proper look into my symptoms.”

“Did not help as my condition needed to be seen not talked about. Did not happen at the time I was given, so my anxiety increased, thinking I had the wrong day/time/ had been forgotten.”

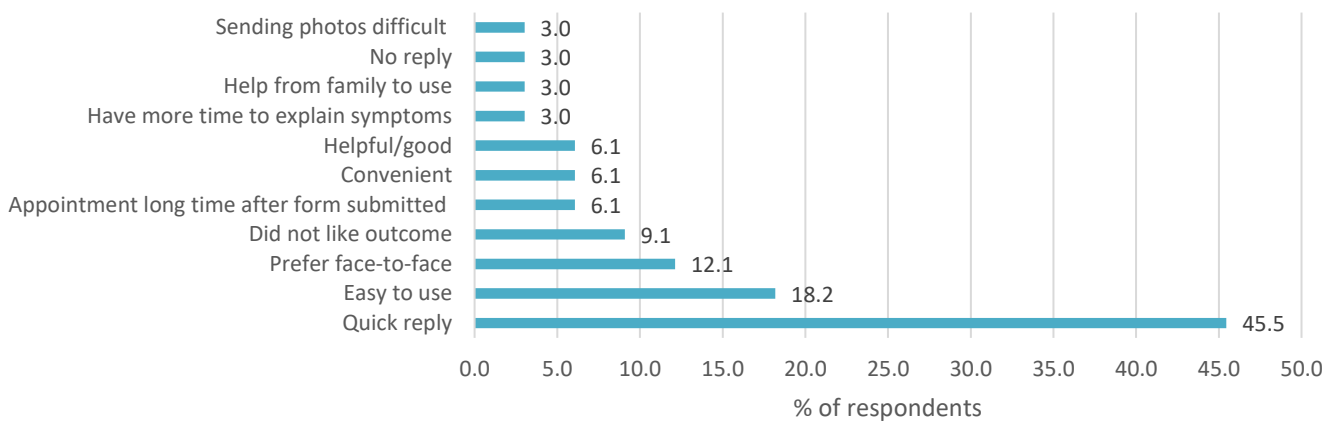
Experience of eConsult consultation



No. of respondents - 87

- 94.3% of patients who had a consultation via eConsult, feel the experience was good or fair.
 - Patients of Chopwell Primary Healthcare Centre are more likely to report a positive experience (100.0%, 14 patients).

eConsult - reasons for good/fair rating



No. of respondents -33

Respondents could give more than one answer

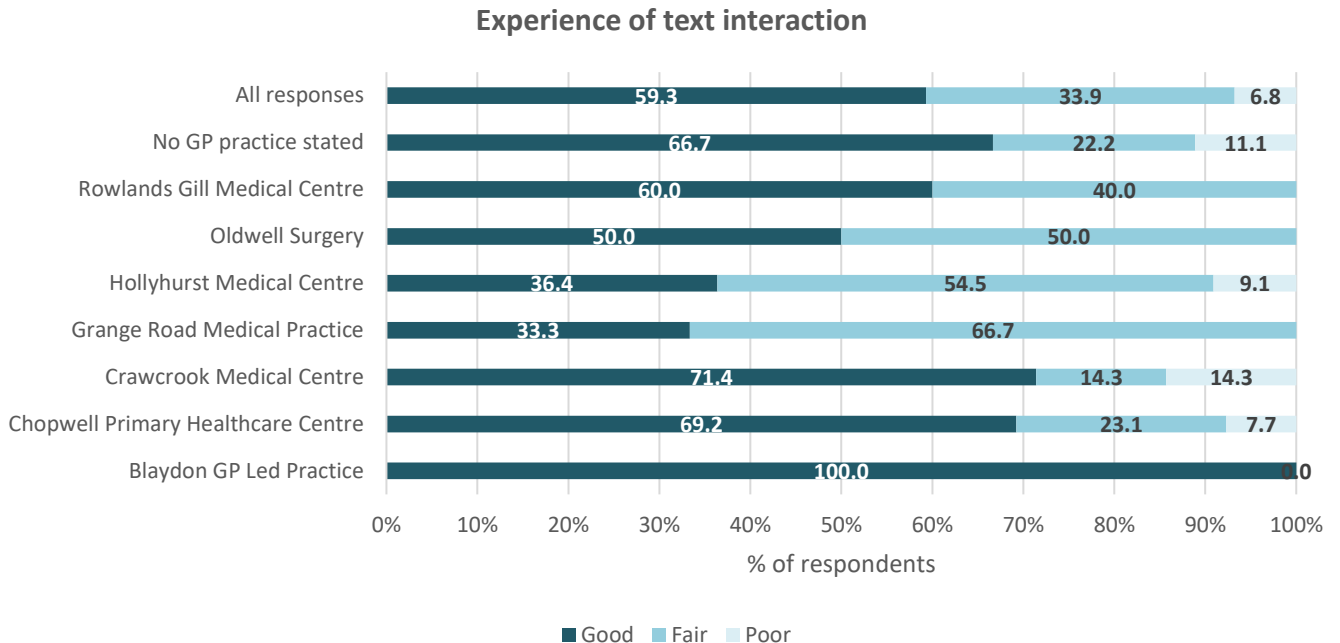
- Patients liked the prompt response to their inquiry in particular and felt it was an easy system to use.
- However some still felt they would prefer a face-to-face appointment.

"Sent form. Received a response in about three hours with a solution."

"Easy to do and reply good and timely. Arranged face-to-face very quickly."

“I may miss something when writing down what I am explaining, only downfall to this. If face-to-face a doctor may remind me of something I have missed.”

- Three people gave reasons for a poor rating with two stating that they never got a response to their submitted form and another was unhappy with the outcome of the consultation.



No. of respondents -59

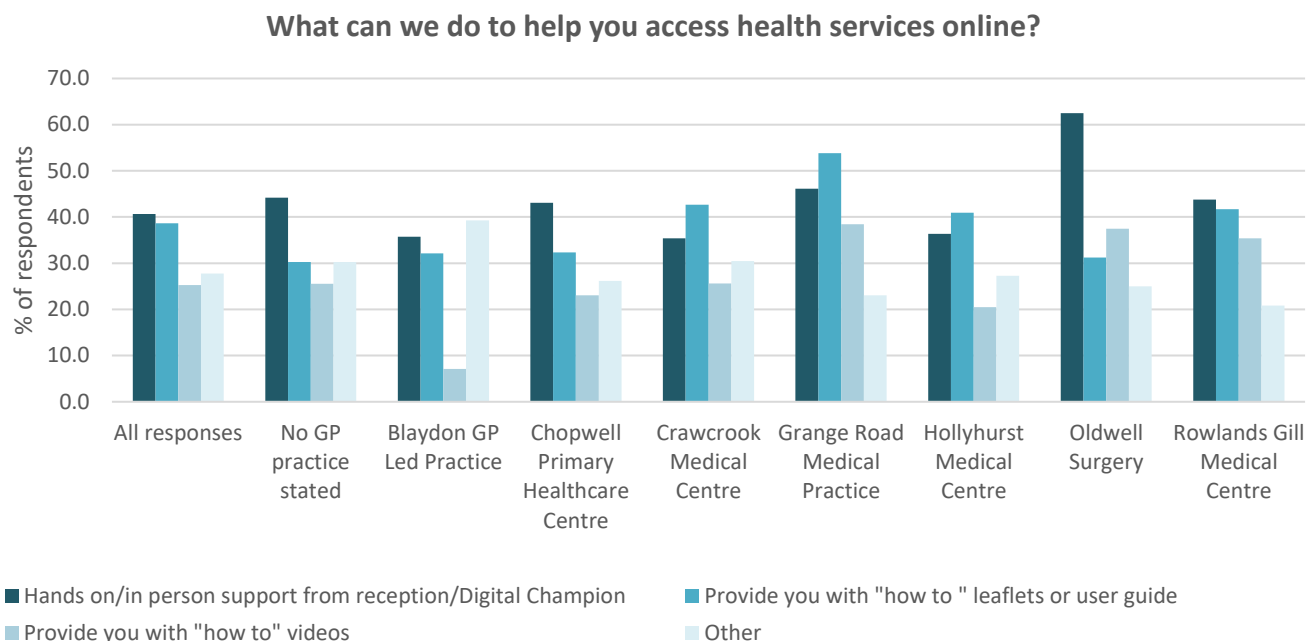
- 93.2% of patients who had a text interaction felt the experience was good or fair.
- 11 patients gave reasons why and in particular found it quick and easy although two felt that the response was slow.
- Two reported a poor experience and both felt that there was not enough information provided in the message.

“Information is not explicit enough and can be frighteningly misunderstood.”

- Eleven patients reported having video consultations and for all this was a positive experience.

“It was a minor illness and was diagnosed and fixed quickly.”

- Encouragement to access consultations via telephone, video, text or eConsult



No. of respondents -396

- o 40.7% of patients feel that some hands on/in-person support within the practice would be beneficial to them.
 - Patients of Oldwell Surgery would appreciate this most.
- o Providing "how to " leaflets or user guides would also be useful for 38.6% of patients.
 - Grange Road patients would appreciate this method most.
- o Providing "how to" videos would be useful for one-quarter (25.3%) of patients.
 - This would be less well received amongst patients of Blaydon GP Led Practice (7.1%).
- o 110 patients (23.0%) indicated that there are other ways to encourage take-up of these services although:
 - 24 suggested there was enough support or that nothing should be done.
 - 15 patients stated that they do not use the internet and are not interested in going online.
- o 26 patients suggested:

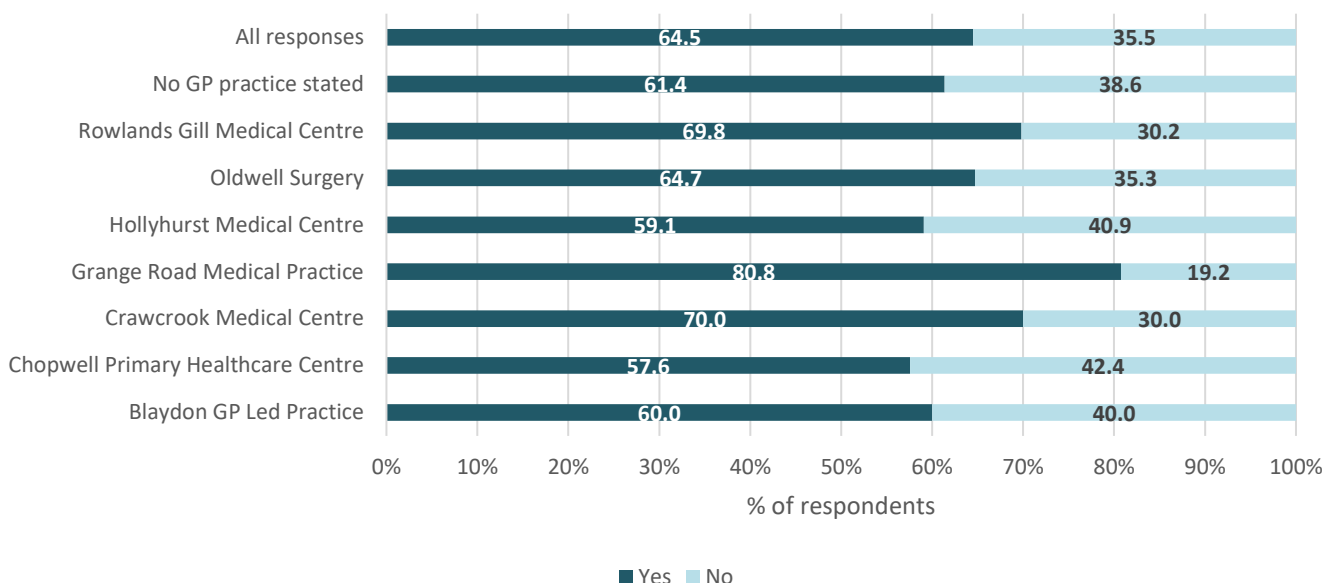
Suggestions to help patients access health services online	No. of respondents
Be able to book appointments online	7
Ensure online services are user friendly	6
Have further information available	5
Ensure information goes out everyone	4
Email information out to patients	2
Help via family	2

No. of respondents - 26

Respondents could give more than one suggestion

- Gateshead Extended Access Service (Extra Care Appointments)
 - o Patients were asked about their awareness of this service and their willingness to access appointments at local GP practices other than their own.

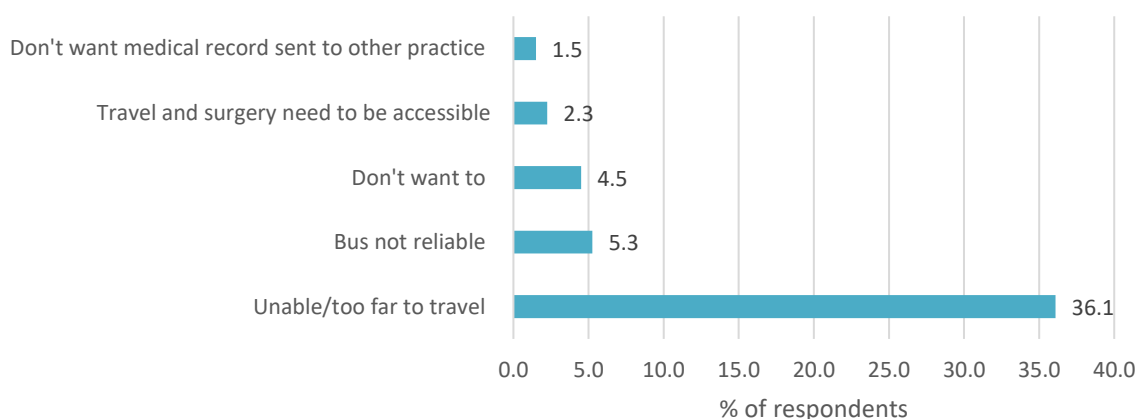
Would you attend another local practice for a GP appointment?



No. of respondents – 414

- o Nearly two-thirds (64.5%) of patients would attend another local practice for a GP appointment if offered.
 - Patients of Grange Road Medical Practice would be most likely to accept an appointment (80.8%) and patients of Chopwell Primary Healthcare Centre, least likely (42.4%).
- o 35.5% of patients would not attend another practice and gave reasons for this.

Reasons for not using Extra Care appointment



No. of respondents – 133

- o For over one-third (37.6%) of patients, it is important for them to be seen by their own GP with whom they have a relationship and history.
- o Either being unable to travel or feeling that it would be too far for them to travel was another common response (36.1%).
- o Some people said that they do not drive and therefore would struggle to get to another practice and some feel that their GP practice is close by and therefore more convenient.

“My GP knows me, not just a list of problems but as a person.”

“I feel that staying with my regular practice the staff know me and my medical history. Going to another practice I would feel uncomfortable as I would not be familiar with the staff or their procedures.”

“My own doctor knows me and my medical history. Is a complete stranger going to know what medications will suit me? Will they know what side effects anything they prescribe will have on other medications I’m taking and how I might react? My own doctor does.”

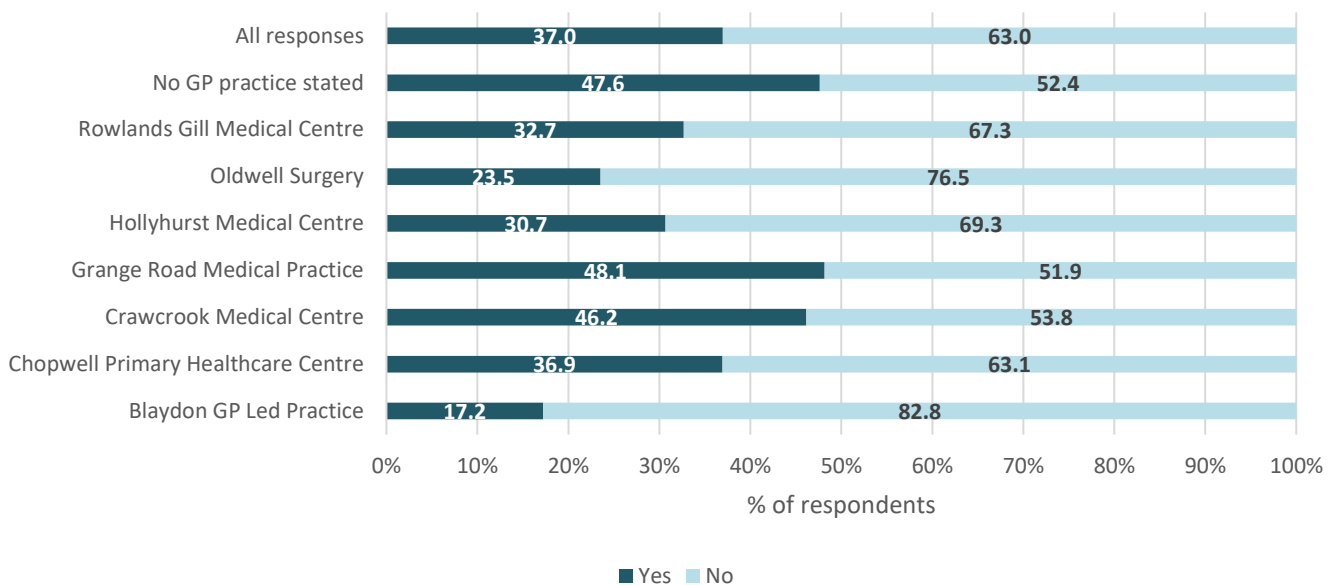
“I would prefer not to have to travel further to an appointment when I should be able to get one at my own practice.”

“Don't wish to travel - there is a surgery in my village.”

“Difficulty getting transport, not being able to walk very far without stopping due to COPD [Chronic obstructive pulmonary disease].”

“How would you get there if you didn't drive? Buses aren't reliable.”

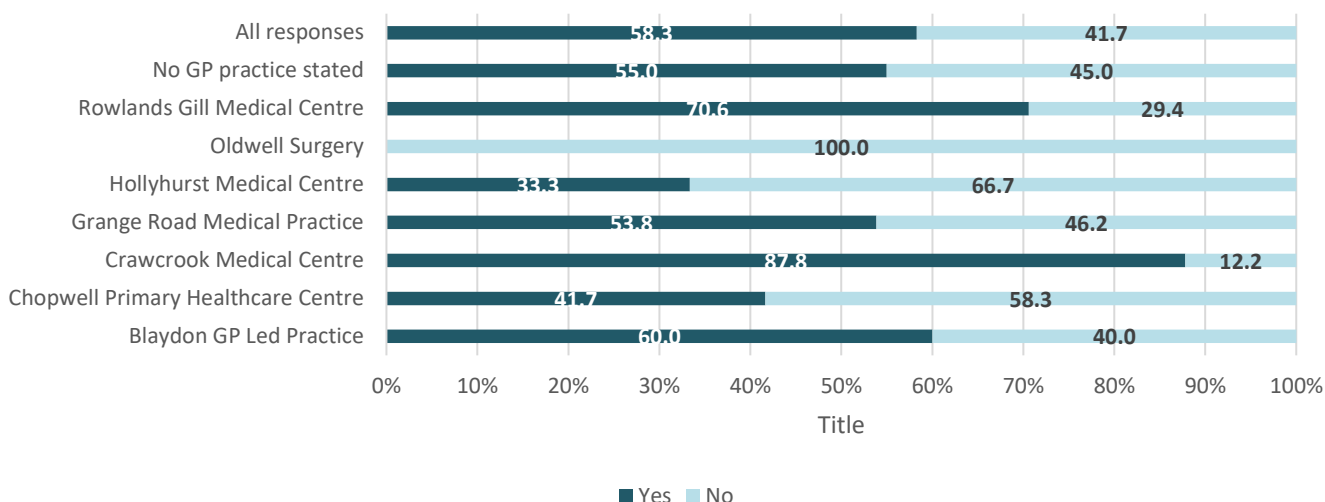
Awareness of Gateshead Extended Access Service



No. of respondents – 411

- o Over one-third (37.0%, 152) of patients are aware of the Extended Access Service.
 - Awareness is greatest amongst patients in Grange Road Medical Practice (48.1%) and lowest amongst patients of Blaydon GP Led Practice.
- o 88 patients have been offered appointments via this service.
 - Patients are more likely to come from Crawcrook Medical Centre (87.8%).

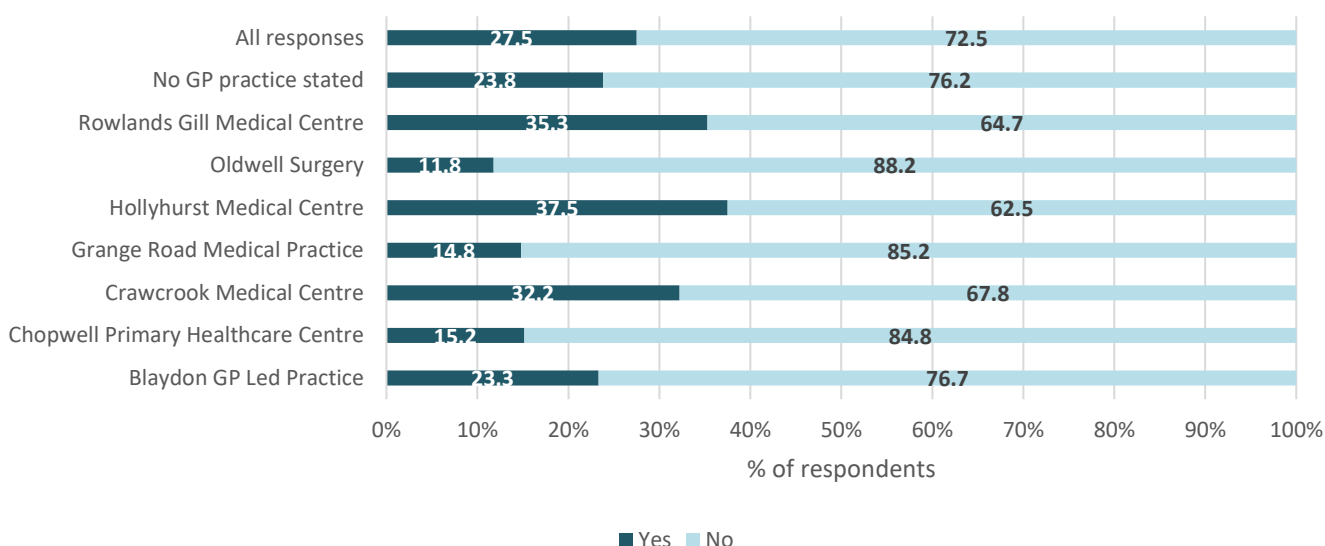
Have you been offered appointments there?



No. of respondents – 151

- o Of the patients who were offered appointments via the Service, 94.0% accepted the appointment.
 - Those who did not take up the appointment felt unable to travel or stated that they did not have time to travel there.
- Health checks
 - o Patients were asked about their awareness of, and willingness to, conduct self-health checks.

Have you ever been asked to do self-health checks?



No. of respondents – 411

- o Just under one-quarter of patients (23.3%) had been asked to conduct their own health checks by their GP practice, this is in keeping with the 2020 figure of 24.0%.
 - Patients of Hollyhurst Medical Centre (37.5%) and Rowlands Gill Medical Centre (35.3%) are more likely to be asked to conduct checks.

- o Patients have carried out checks for:

Health checks carried out	No. of respondents
Blood pressure	93
Blood glucose	2
Peak flow	1
Pulsometer	1
Stool sample	1
Temperature	1
Urine sample	1
Weight	1

No. of respondents - 97

Respondents could give more than one answer

- The majority of experiences were positive:

Experience of self-health checks	No. of respondents	% of respondents
Positive		
Okay	34	34.7
No problem	20	20.4
Fine	17	17.3
Easy	9	9.2
Good	9	9.2
Do regular checks already	3	3.1
Clear instructions provided	2	2.0
Negative		
Needed to purchase equipment	3	3.1
Didn't like doing it	2	2.0
Didn't do it	1	1.0
Didn't understand why I had to do it	1	1.0
Equipment not available from practice	1	1.0
Need more information on when we are allowed to do it ourselves	1	1.0
Stressful	1	1.0
Wanted reassurance results were being viewed by a health professional	1	1.0
Wasn't confident doing it	1	1.0

No. of respondents - 98

Respondents could give more than one answer

- o Those who had not carried out any checks were asked how they would feel if they were asked to do so.

Feelings if asked to carry out self-health checks	No. of respondents	% of respondents
Positive		
Fine/okay/no problem	163	56.2
Fine if equipment provided by practice	35	12.1
Fine if clear instructions provided	23	7.9
Happy/good idea	22	7.6
Regularly do it myself anyway	6	2.1
Unsure		
Depends on the health check	4	1.4
Would need reassurance results were being viewed by a health professional	2	0.7
Negative		
Not happy	44	15.2
Would want professional to do it	19	6.6
Unsure the results would be accurate	8	2.8
Would be anxious	3	1.0
Couldn't do it	1	0.3

No. of respondents - 290

Respondents could give more than one answer

- Most patients would be happy to carry out checks. They would like comprehensive instructions and the equipment provided by the surgery, although some patients already have their own personal equipment.
- Those who would not be happy, felt that a professional who is trained should carry it out.
 - Some felt they would not trust the result if they were asked to carry it out.

“As I haven’t had medical training, I would not be very happy and rather short changed. Why aren’t the blood pressure machines up and running and regularly maintained in the practices and then there wouldn’t be a need for people to do this. This would really upset and humiliate people who are unable to do this themselves.”

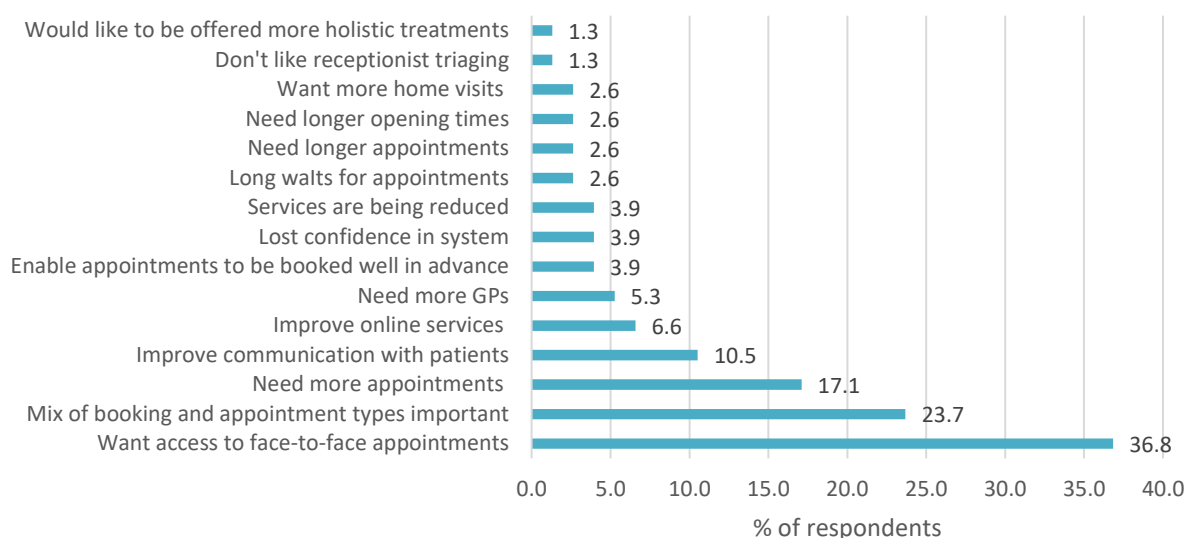
“I would not be confident it would be a correct reading etc. and feel this would allow for too many mistakes and misdiagnosis, and feel it’s a disgrace to be asked to do this.”

“I wouldn't feel particularly happy since, again, self-reporting is less reliable than it being done by an unbiased professional with the proper equipment and training.”

Other comments

- Patients took the opportunity to provide other comments and in particular asked for improved access to face-to-face appointments, acknowledged a need for a mix of booking and appointment methods to accommodate all patients, and also requested increased availability of appointments.

Other comments



No. of respondents - 76

Respondents could give more than one comment

“Not having any faith in telephone diagnosis by the doctor we must return to the pre-covid situation of face-to-face consultations.”

“GPs are becoming more and more remote and it can be very frustrating when you are feeling ill and there is no easy way of getting in to see anyone. I can't be alone in putting off a visit in the hope that it will just sort itself out in the end...I've lost confidence in the system.”

“Like everyone else, I want to see my doctor face-to-face when there's something wrong with me, it really is that simple! On a personal note I haven't seen a doctor at my own or any other surgery for two and a half years, this is not because I haven't been ill it's because I now feel totally neglected and betrayed by every single person at our practice, the feeling is one of having to jump through numerous hoops to be met by brick wall after brick wall simply while trying to make an appointment [and this] has been enough to put me off for life.”

“Online services are generally good but need face-to-face for more serious conditions or where diagnosis is not straight forward. Online services need to be available quickly to be an attractive alternative to face-to-face.”

“Whilst I acknowledge that there is scope to offer a mixed mode of options, they should not be at the detriment of being able to have a face-to-face appointment if the individual feels that their symptoms require one.”

“I realise it's important to look at alternative ways to serve so many patients.”

“I am always happy to try new ways to get health advice that will free up GP time.”

“It’s more about timely appointments being available than the method of booking. Booking online would be great but if the next appointment is two or three weeks away it’s still unsatisfactory overall.”

Recommendations

- The following recommendations are based on the combined responses of all patients across all seven GP practices.
 - There is however some variation in the findings when examining the data by individual practice which should be considered when planning future services to ensure that they meet the needs of the patients they serve.

Key recommendation

- Internet user classifications show passive and uncommitted users and e-Withdrawn groups (opting out of online engagement for economic reasons) within Outer West Gateshead. Our findings support this pattern with nearly one-in-five patients stating that they rarely or never go online. Moreover, nearly three-quarters of patients still prefer to book their appointments by telephone and four-in-five prefer a face-to-face appointment. There has however been an upturn in awareness of online health information, eConsult and text services and a willingness to use online services if available and appropriate.
 - It is suggested that practices continue to offer and develop telephone, online and text bookings and consultations but guarantee that face-to-face appointments will remain. This will ensure equity of access for those who cannot or will not use other methods.

Identifying patients with internet access

- Mirroring national patterns, there is a decline in internet usage with age and disability. If the PCN wishes to grow the number of patients using non-traditional methods of booking and having consultations it is suggested that:
 - An audit of patient contact information is carried out to identify patients who do not have an email address or mobile telephone number recorded. These patients should then be targeted to gather this information. This could be a one-off exercise or could be asked during every patient contact with the practice.

Raising awareness

- Although improving, the findings showed a lack of awareness of methods to book and have consultations and access health information sources.
 - A comprehensive communications plan should be developed to address this and it is imperative that it takes into account the requirements of all patients including those with disabilities and whose first language is not English to ensure that the communications produced are accessible to all.
- Booking appointments online
 - Although there is good awareness of the use of the telephone and visiting the practice to book an appointment, just under half of patients do not know that they can book online and when citing reasons for preferring to book by telephone, they highlighted a lack of knowledge of this method and how to use it.
 - It is suggested that an advertising campaign is developed to raise awareness amongst patients of online methods of booking. Communications should cover:
 - The benefits of booking online – own time/anywhere/multitasking etc.
 - How to book an appointment
 - How to access the service

- Who can access the service – can you book appointments for your children?
 - Consider using patients as case study examples of why you should book online
- Methods of having consultations
 - There is good awareness amongst patients of telephone appointments and although an increase on 2020, fewer than one-third are aware of online consultations. Fewer than one-quarter of patients are aware of video consultations and only one-sixth are aware of text interactions with their practice. This translates to the type of consultations patients have had within the last 12 months and although there has been an increase in online consultations and text interactions, the proportion of patients having each type of consultation is 28.3% and 19.2% respectively.
 - It is suggested that an advertising campaign is developed to raise awareness of the alternative methods to face-to-face appointments. Communications should cover:
 - There are a number of different ways to have a consultation
 - Face-to-face appointments will remain but may not always be the most appropriate method
 - Offering a variety of methods enables patients choose a method which best suits their needs
 - A variety of methods enable GPs and Nurses to work more efficiently and carry out more appointments
 - The system is secure, your data is safe and is not shared with other organisations
 - What each method is, what to expect/limitations and when it would be beneficial in a simple step-by-step format
 - Reassurance that follow-up face-to-face appointments will be arranged if deemed necessary
 - You do not need to be computer savvy to use this and you are never too old to learn
 - The campaign could take the form of videos, static online information and posters and should be advertised widely: on practice websites, information screens and in waiting areas, Facebook, via direct mail (letter and email), via key stakeholder organisations and other health professionals e.g. Health Visitors
- Health information
 - There has been a noticeable increase in awareness of the ways to access health information since 2020 however, over three-in-ten patients are unaware of the NHS website and NHS App, just under half are unaware of their practice's website and over half are unaware of Patient Access.
 - It is suggested that an advertising campaign is developed to raise awareness amongst patients of these services which if accessed by more patients could reduce pressures on GP practice services. Communications should cover:
 - The benefits of using each
 - How to access them
 - Who can access them

Improvements to booking online appointments

- Patients want to access appointments as quickly and easily as possible. There is appetite to use the online booking system but patients feel that is currently restrictive and is forcing them to use other methods to book appointments. They feel that when accessing the system there are often no appointments or very few appointments available but they can get an appointment when they phone or visit the practice. Others mentioned having to sign in every time to use it, needing to have photo ID to register and not being able to book appointments for their children. A number of patients said that their practice used to allow online booking but it was no longer available (mentioned most frequently by Crawcrook Medical Centre patients) or no longer worked or they had been told it was oversubscribed.
 - o It is suggested that all GP practices within the PCN offer an online booking service via a standardised, user-friendly and accessible platform and that all available appointments are bookable via the system so that patients and staff both see and can book the same appointment slots. Patients should complete a triage process ahead of them being able to access and book appointments.
 - o Consider allowing other ways to verify the patient if they do not have photo ID.
 - o In order to try to continually improve this service it is suggested that an exit survey be sent to patients to gauge their experience of the system and whether they were able to book an appointment.

Support to access health services online

- Online access is not free, there is a cost to using the internet which excludes those in poverty.
 - o Explore whether there is local funding available to help people get access to devices to use online services and raise awareness with patients.
 - o Explore what community resources (e.g. computers in libraries) are available for patients to use and share this information with patients.
 - o Ensure that any online systems used by the practices work on older operating systems – mobile phones, laptops and tablets.
- Educating patients
 - o Two-fifths of patients would like some hands on/in-person support within their practice.
 - o Over one-third of patients would like "how to " leaflets or user guides.
 - o One-quarter of patients would like "how to" videos.
 - It is suggested that these materials are considered to help support patients to use online services and if developed, should be promoted across all channels and leaflets distributed to all patients. Materials produced should include versions formatted to be accessible by those who don't have English as a first language or who have a disability.

Self-health checks

- The number of patients being asked to carry out self-health checks at home has remained constant since 2020 with approximately one-quarter being asked to do so. The majority of these experiences have been positive. The majority of patients would be happy to carry out their own monitoring at home providing they had thorough instructions and equipment provided. Those who would not, feel that they are not qualified to do so and would feel unsure as to the accuracy of the measurements provided.
 - o It is suggested that any planned increases in this area would require information sharing to explain to patients what it would entail, that equipment would be provided by the practice and training given, and crucially that patients have the option to opt out.

Gateshead Enhanced Access Service (Extra Care Appointments)

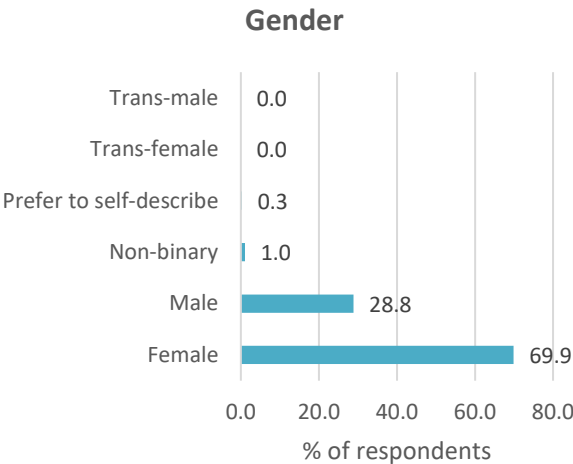
- Over one-third of patients are aware of the Gateshead Enhanced Access Service. When asked if they would attend another local practice to have a GP appointment 35.5% said that they would not, primarily because they are unable to or feel it would be too far to travel, although the vast majority of those who have been offered an appointment in this way have accepted it.
 - o If there is a desire to increase the number of patients using this service it is suggested that:
 - An advertising campaign is developed to raise awareness. Communications should cover:
 - o What it is
 - o The benefits of the service to patients
 - o When it will be offered
 - o Where appointments will be offered
 - o Who will carry out consultations
 - o That staff will have access to your medical records
 - Patients using the service are provided with:
 - o Information on the practice's location
 - o Information on how to access the practice by road and public transport

Appendices

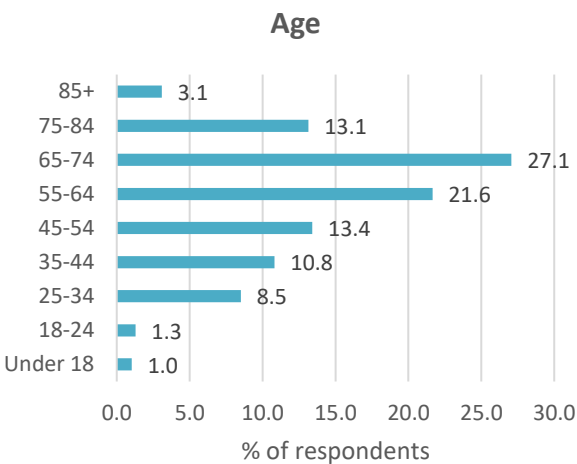
Appendix 1: Profile of all respondents

Please note that not all respondents chose to complete these questions.

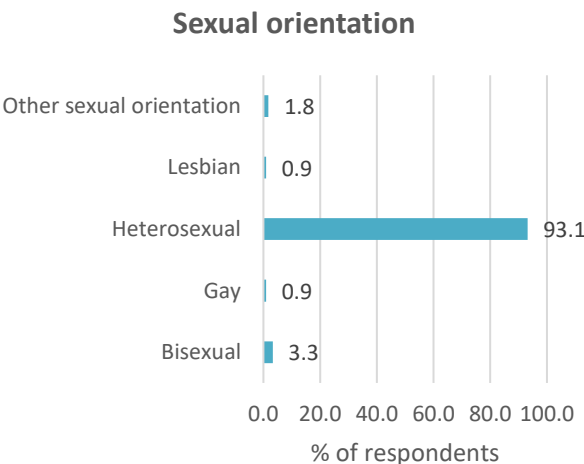
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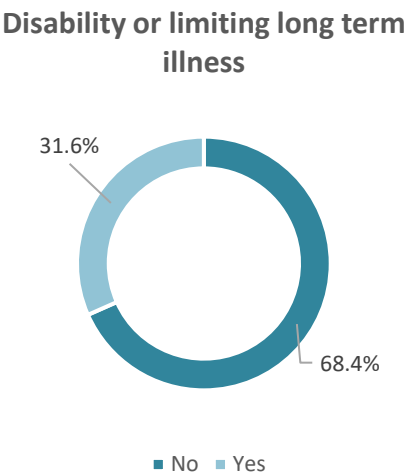
No. of respondents - 385



No. of respondents - 388

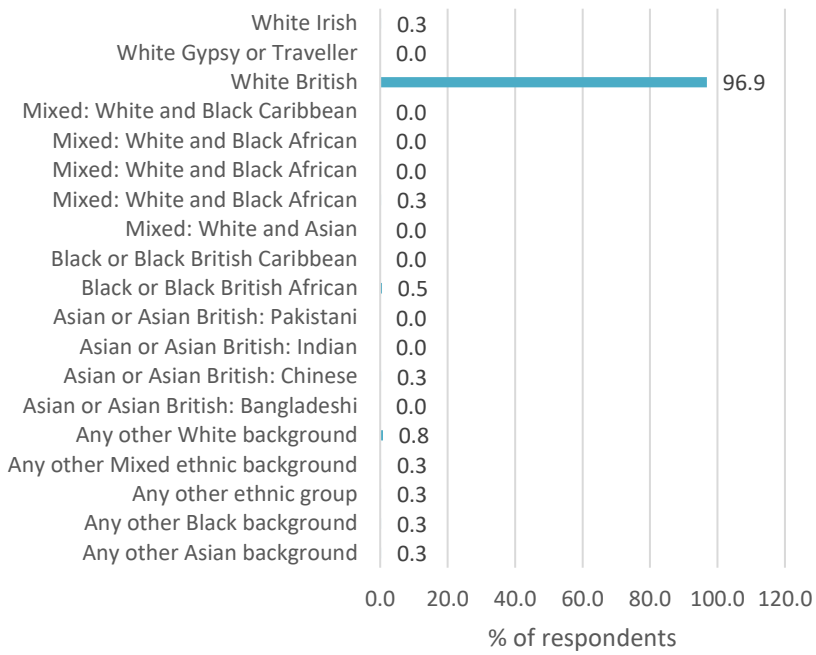


No. of respondents - 335



No. of respondents – 373

Ethnic background



No. of respondents - 384