

EQUITABLE ACCESS OUTCOME OF THE CONSULTATION PROGRAMME October 2008

The consultation process

The Equitable Access consultation ran from 2nd June to 24th August 2008. Over 3,000 consultation documents and questionnaires were sent out to key stakeholders, groups and local people. They were asked what services they wanted in the new GP practices and the new GP led health centre, as well as when they should be open. They were also asked to suggest ideas about services to meet their needs and preferences.

The main elements of the consultation were:

- A self-completion questionnaire integrated into the consultation document
- An online questionnaire
- 10 public meetings to get the views of local people, especially in Hodge Hill, Kingstanding and Washwood Heath where the new GP practices will be located.
- 2 meetings with local Older People's Reference Groups
- Presentation to the Health Overview and Scrutiny Committee

Responses were provided face to face, by post, email and on line. 126 people returned questionnaires, 2 people sent in letters and 159 people attended consultation meetings.

Responses came from all areas of the PCT and all age groups, but the majority of respondents were aged over 60 years and defined themselves as white.

Attendance at the public meetings ranged from 1 to 33 people. The proposals were also taken to the local Older Peoples Reference Groups and the Polish community to get their views, as well as the Health OSC meeting on 23rd July.

All the responses were analysed by the Health Services Management Centre at Birmingham University and discussed at a special meeting of the Equitable Access Board on 29th August

Outcome of the consultation

New GP Practices

Responses to the questionnaires suggest that the most important services in a GP practice should be:

- cardiovascular disease screening
- cervical and breast screening
- healthy lifestyle advice.

The least popular were substance misuse and alcohol misuse services and young persons/teenager clinic.

GP led health centre

The most frequently chosen service was the foot care clinic. Also given priority was cardiovascular disease screening and proactive mental health support.

Those considered least important were pregnancy testing and smoking cessation

Those who responded to the questionnaires made a large number of suggestions of their own for services they considered important. These could be divided into the following groups:

- improvements to bring quick and easy access to care and provide a personalised service
- the provision of specialist services (such as for people with mental health problems, skin screening for sun damage, chiropody, and physiotherapy)
- the provision of preventive and well being services
- holistic services such as complementary therapies
- making improvements to existing services
- the provision of advice and information. *“The need to know where to go for help - after a lifetime of being fit and healthy I became a primary carer and for some time coped unaided – eventually it became obvious I needed help – where from?”*

GP services

The most frequently chosen suggestions were:

- 1st - telephone consultations with GPs.
- 2nd - more female GPs
- 3rd - drop in sessions were third.

Least chosen were interpreters.

GP Led Health Centre

The most frequently chosen suggestions were:

- 1st - drop in sessions
- 2nd - telephone consultations with GPs
- 3rd - support groups

The least chosen suggestion was again interpreters.

Improvements suggested mainly concerned easier ways of making appointments, and about better access for elderly people. *“Much longer opening times and a better improved appointment system which makes it easier and quicker to see a GP; Also flexibility to be able to see a different GP in the same practice if don't feel comfortable with one you have”*. There were also suggestions about additional services, including men's' health services and chiropody.

The meetings, and to some extent the questionnaires, raised possible problems with the new services. These included:

- Communication between a patients' GP and the health centre if both are used
- Risk associated with different services operating at the same time in the same building. For example mother and baby or young person clinics running at the same time as drug and alcohol rehabilitation services. *"Special cases like drugs and alcohol abuse or any abuse should be treated in special centres by specialists trained in these jobs"*
- Abuse of the service from people seeking second opinions, from illegal immigrants and from those obtaining false prescriptions

The most popular suggestion for extended opening hours was for Saturday opening with weekday evenings in second place.

Several themes emerged from the general comments:

- concern about the location of the new services
- repeated comments about the importance of easy access both in terms of transport and in booking appointments.
- Dissatisfaction with current access to GP appointments in some areas of BEN PCT.

This produced two different types of comments, one supportive of the new proposals in the hope that the situation would improve and the other asking why funds could not be spent on improving current services rather than setting up new ones.

- concern over the implications and likely knock on effects of the new services was expressed in worries about whether the new health centre would force existing GP practices to close, and about whether they would have to move from their existing practice.

Support for existing GP services was evident, but there was also support for the proposals.

These changes would be beneficial for the whole community eg people at work, students away from home, WELL DONE! NHS changes for the 21st century. Many thanks.

How will the outcome of the consultation impact on the development of these new primary care services?

The feedback from the consultation was included in the Invitation to Tender document that went out to shortlisted bidders on 18th September 2008. This document outlines what is required from potential providers in terms of services, opening hours etc. Formal tenders must be returned to the PCT by 13th November.

The feedback from the consultation was taken into account when developing the service specifications for the 3 new GP practices and the new GP led Health Centre.

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