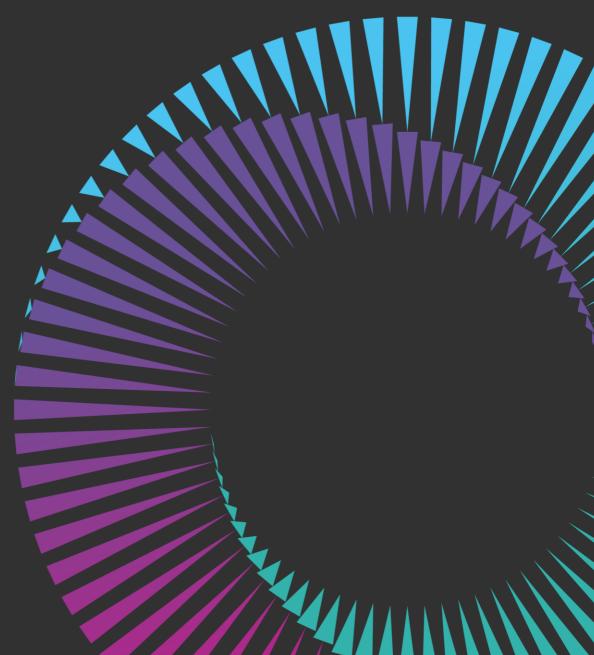


# High Oak Surgery move conversation report of findings

## Dudley Integrated Health and Care NHS Trust (DIHC)



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#### Table of Contents

1	E	хесι	utive summary	. 3
	1.1	Intr	oduction	. 3
	1.2	Со	mmunications and engagement	. 3
	1.3	Nu	mbers of respondents and participants	. 3
	1.4	Fin	dings	. 3
	1	.4.1	Feedback on services provided at High Oak Surgery	. 3
	1	.4.2	Feedback on the range of services at Brierley Hill Health and Social Care Centre 4	е
	1	.4.3	Feedback on Option 1a	. 4
	1	.4.4	Feedback on Option 1b	. 4
	1	.4.5	Feedback on the preferred option	. 5
	1	.4.6	Feedback on other ideas and suggestions	. 5
2	Ir	ntrod	uction	. 6
	2.1	Ba	ckground	. 6
	2.2	Nu	mbers of respondents	. 6
	2.3	Re	port authors	. 6
	2.4	Re	port structure	. 6
3	С	omn	nunications and engagement	. 7
	3.1	Co	llateral	. 7
	3.2	Pro	pmotional activities	. 8
	3	.2.1	Letters and communication to patients	. 8
	3	.2.2	Website and social media	. 8
	3.3	Fee	edback mechanisms	. 8
	3	.3.1	Survey	. 8
	3	.3.2	Engagement events	. 9
4	R	epo	rting methodology	10
	4.1	Su	rvey structure	10
	4.2	Ap	proach to analysis and presentation of findings	10
	4	.2.1	Area breakdown	10
5	R	espo	ondent profiling	12
	5.1	Ov	erview of respondents and participants	12
	5.2	De	mographic profiling	12
	5.3	Ма	pping respondents and participants	14
	5.4	Ind	ex of Multiple Deprivation (IMD)	14

6		Findir	ngs	15
	6.	1 Fee	edback on the services provided at High Oak Surgery	15
		6.1.1	Usage of High Oak Surgery	15
		6.1.2	Satisfaction with services	15
		6.1.3	Reasons for rating	16
	6.	2 Fee	edback on the range of services at Brierley Hill Health and Social Care Centre	18
		6.2.1	Satisfaction with the range of services	19
		6.2.2	Reasons for rating	20
	6.	3 Fee	edback on Option 1a	22
		6.3.1	Impact of Option 1a	22
		6.3.2	Reasons for impact	23
	6.	4 Fee	edback on Option 1b	26
		6.4.1	Impact of Option 1b	26
		6.4.2	Reasons for impact	27
	6.	5 Fee	edback on the preferred option	30
		6.5.1	Preferred option	30
		6.5.2	Reasons for preferred option	31
		6.5.3	Retaining a presence in Pensnett	33
		6.5.4	Outreach clinics in community settings	34
	6.	6 Fee	edback on other ideas and suggestions	35
		6.6.1	Ideas or suggestions	36
		6.6.2	Other information	38
	6.	7 Fee	edback from the events	40
		6.7.1	Feedback from the 9 November public event	40
		6.7.2	Feedback from the 23 November public event	40
		6.7.1	Feedback from the 30 November public event	41
	6.	8 Fee	edback from correspondence	41
7		Concl	usion	42
8		Apper	ndix A	43
	8.	1 Sui	rvey respondent overview	43
	8.	1 Eve	ent participant overview	44
9		Apper	ndix B	45
	9.	1 Sui	rvey respondent demographic profile	45
	9.	2 Eve	ent participant demographic profile	46

## 1 Executive summary

## 1.1 Introduction

Dudley Integrated Health and Care NHS Trust (DIHC) operates the High Oak Surgery. Before moving in March 2020, High Oak Surgery operated from a four-room modular portacabin in the Brockmoor and Pensnett ward of the Dudley Borough.

Since March 2020, the practice has been in Brierley Hill Health and Social Care Centre, a purpose-built, state-of-the-art centre offering greater clinical space and modern facilities for primary care.

This public conversation led by DIHC in collaboration with NHS Black Country Integrated Care Board (BCICB) is about the proposals for the future location of High Oak Surgery.

Two viable options were identified:

- Option 1a High Oak Surgery is retained at Brierley Hill Health and Social Care Centre as it is currently (a single-site solution)
- Option 1b A hub and spoke model with Brierley Hill Health and Social Care Centre as the hub, and some services provided in community sites in Pensnett.

## 1.2 Communications and engagement

A conversation document was produced to inform stakeholders of the proposals. The document was also available in a plain text, large print format, as well as audio and easy read versions. The survey was promoted through both print and online channels, including letters to patients, promotion on the Dudley Integrated Health and Care NHS Trust website and organic (free) and paid social media. Feedback was gathered via a survey, which had online, paper and easy read versions, and was available at engagement events.

## 1.3 Numbers of respondents and participants

The survey was live between Monday 17 October 2022 and Monday 5 December 2022 and received 87 responses. Three engagement events took place with a total attendance of 52 participants.

## 1.4 Findings

## 1.4.1 Feedback on services provided at High Oak Surgery

Respondents were asked: To what extent are you satisfied with the services you receive from the staff at High Oak Surgery? Overall, 36 (43%) respondents stated they were very satisfied or satisfied and 32 (38%) were dissatisfied or very dissatisfied.

When asked for the reasons for their satisfaction rating, the key themes were:

• Positive - Staff - Practice staff are professional and friendly (18 / 27%)

- Negative Access Concern over difficulties getting an appointment (17 / 25%)
- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (17 / 25%).

## 1.4.2 Feedback on the range of services at Brierley Hill Health and Social Care Centre

Respondents were asked: To what extent are you satisfied with the range of services available at Brierley Hill Health and Social Care Centre (BHHSCC)? Overall, 26 (31%) respondents stated they were very satisfied or satisfied and 30 (36%) were dissatisfied or very dissatisfied.

When asked for the reasons for their satisfaction rating, the key themes were:

- Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (17 / 32%)
- Neutral General Do not use services other than GPs (9 / 17%)
- Negative Access Concern over difficulties getting an appointment (8 / 15%); Negative - Access - Parking is inadequate (8 / 15%).

## 1.4.3 Feedback on Option 1a

Option 1a is that High Oak Surgery is retained at Brierley Hill Health and Social Care Centre as it is at the moment (a single-site solution). Respondents were asked: To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery? Overall, 13 (16%) respondents indicated that it would have a positive impact and 68 (81%) indicated it would have a negative impact.

Key themes raised were:

- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (40 / 58%)
- Observation Service provision Consider the need for a GP surgery locally (e.g. move High Oak Surgery back) (20 / 29%)
- Negative Specific groups Concern over access to practice for vulnerable patients (e.g. elderly, disabled) (17 / 25%).

## 1.4.4 Feedback on Option 1b

Option 1b is like 1a but with a 'hub and spoke' arrangement. Brierley Hill Health and Social Care Centre would be the 'hub' where all services are kept on a permanent basis. Some physically non-invasive treatments like long-term condition reviews, psychological therapies, health coaching, and health and wellbeing services would be provided in community sites in Pensnett. These sites could be current health facilities or community spaces.

Respondents were asked: To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery? Overall, 21 (26%) respondents indicated that it would have a positive impact and 47 (59%) indicated it would have a negative impact.

Key themes raised were:

- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (19 / 33%)
- Positive General Option 1b is a good idea (e.g. better than Option 1a) (9 / 16%)
- Neutral General More details about Option 1b are required (e.g. location of community sites) (7/ 12%).

## 1.4.5 Feedback on the preferred option

Respondents were asked: Which is your preferred option for High Oak Surgery? Overall, a greater proportion of respondents preferred Option 1b (31 / 76%), compared to Option 1a (10 / 24%). When asked why, the key themes were:

- Observation General Neither option is viable (30 / 43%)
- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (23 / 33%)
- Observation Access Option 1b provides better access to services (9 / 13%).

Respondents were asked: To what extent do you agree or disagree with the following statement: a continued presence in the Pensnett area is required, especially for those with mobility or travel issues. Overall, 71 (87%) respondents strongly agreed or agreed, while 3 (4%) disagreed or strongly disagreed.

Respondents were asked: To what extent do you agree or disagree with the following statement: outreach clinics where you can see health and care professionals in community settings would be of value. Overall, 50 (67%) respondents strongly agreed or agreed, while 10 (13%) disagreed or strongly disagreed.

## 1.4.6 Feedback on other ideas and suggestions

Respondents were asked: What other ideas or suggestions do you have about how we deliver these services? Overall, the key themes were:

- Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (22 / 49%)
- Negative Specific groups Concern over access to High Oak Surgery for vulnerable patients (e.g. elderly) (4 / 9%)
- Observation Demographics Consider demographics in Pensnett (e.g. deprivation, growing population) (4 / 9%).

Respondents were asked: Finally, is there any other information you wish us to consider which you have not yet mentioned? Overall, the key themes were:

- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (11 / 30%)
- Negative Communication Concern over poor communication and engagement with service users about the changes (7 / 19%)
- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (4 / 11%); Negative Specific groups Concern over access to surgery for vulnerable patients (e.g. elderly) (4 / 11%).

## 2 Introduction

This report presents the feedback from the High Oak Surgery move conversation.

## 2.1 Background

Dudley Integrated Health and Care NHS Trust (DIHC) operates the High Oak Surgery. Before moving in March 2020, High Oak Surgery operated from the Pensnett site for 16 years. It is a four-room modular portacabin in the Brockmoor and Pensnett ward of the Dudley Borough, with little staff administration and reception space and limited car parking.

Since March 2020, the practice has been in Brierley Hill Health and Social Care Centre, a purpose-built, state-of-the-art centre offering greater clinical space and modern facilities for primary care including access to wider services such as physiotherapy and podiatry. It is also co-located with the extended hours access hub, the clinical hub and other health and care services.

This public conversation led by DIHC in collaboration with NHS Black Country Integrated Care Board (BCICB) is about the proposals for the future location of High Oak Surgery.

Two viable options were identified:

- Option 1a High Oak Surgery is retained at Brierley Hill Health and Social Care Centre as it is currently (a single-site solution)
- Option 1b A hub and spoke model with Brierley Hill Health and Social Care Centre as the hub, and some services provided in community sites in Pensnett.

## 2.2 Numbers of respondents

The survey was live between 17 October 2022 and 5 December 2022 and received 87 responses. Three engagement events took place with a total attendance of 52 participants.

## 2.3 Report authors

Dudley Integrated Health and Care NHS Trust (DIHC) commissioned NHS Midlands and Lancashire Commissioning Support Unit's (MLCSU's) Communications and Engagement Service to coordinate the independent analysis of the feedback from the engagement and to produce this report.

## 2.4 Report structure

This report is structured into the following sections:

- Introduction
- Communications and engagement
- Reporting methodology
- Demographic profiling
- Findings
- Conclusion
- Appendix.

## 3 Communications and engagement

This section is a summary of the communications and engagement activities that took place to promote the conversation and generate participation.

## 3.1 Collateral

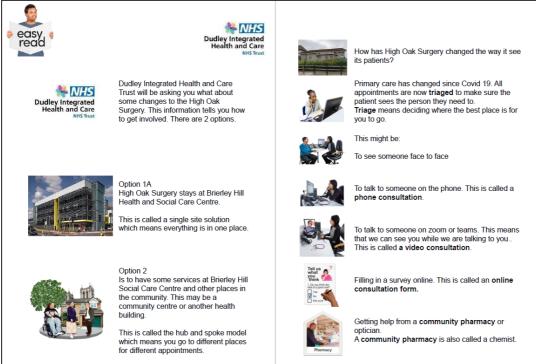
A conversation document was produced to inform stakeholders of the proposals. Figure 1 shows the document.

Figure 1. Conversation document



The conversation document was also available in a plain text, large print format, and audio and easy read versions. Figure 2 shows the easy read version.

#### Figure 2. Easy read document



Information was also available as an audio file and in alternative languages on request.

## 3.2 Promotional activities

The survey was promoted through both print and online channels.

#### Letters and communication to patients 3.2.1

A letter was sent to the households of all registered patients to provide information on the conversation and encourage them to complete the survey.

In addition, 393 letters were sent to patients aged 16-25, and 33 letters were sent to patients with learning difficulties or autism. This was also followed up with an SMS message to this cohort.

#### 322 Website and social media

The conversation was promoted on the Dudley Integrated Health and Care NHS Trust website and social media channels. Between 17 October and 5 December 2022, DIHC received 3,357 organic Twitter impressions and 789 organic Facebook impressions.

The Black Country Integrated Care Board (ICB) also promoted the conversation across their social media channels, including nine separate tweets on Twitter with 1,514 impressions in total and three Facebook posts with a total reach of 687 people.

A paid social media advert was run on Facebook and Instagram from 17 October to 30 November, targeting Pensnett and the surrounding area. This had 150,915 impressions and a total reach of 57,819. An advert with the same targeting was also run on the Nextdoor app - this had a reach of 300 people.

Table 1 shows the website analytics during the engagement period.

Table 1. Website analytics					
Page	No. of views	No. of users			
Homepage	2,659	1,640			
High Oak Public Conversation landing page	796	409			

## 3.3 Feedback mechanisms

#### 3.3.1 Survey

Feedback was gathered via an online survey, easy read survey and hardcopy paper version. Figure 3 shows a print screen of the easy read survey.

Figure 3. Easy read survey



## 3.3.2 Engagement events

Feedback was gathered at three public events. Table 2 shows the public events that took place.

Table 2. Engagement events

Date	Location	No. of attendees
9 November 2022	Brockmoor	22
23 November 2022	Brockmoor	5
30 November 2022	Pensnett	25

Drop-in sessions were also arranged. Table 3 shows the details.

Table 3. Drop-in session		
Date	Location	No. of attendees
20 October 2022	120 High Street, Pensnett	14
24 October 2022	Brierley Hill Health and Social Care Centre	0
26 October 2022	120 High Street, Pensnett	3
1 November 2022	Brierley Hill Health and Social Care Centre	0
4 November 2022	Brierley Hill Health and Social Care Centre	0
7 November 2022	120 High Street, Pensnett	0
10 November 2022	Brierley Hill Health and Social Care Centre	0

In addition to these events, the following engagement opportunities were also arranged:

- Attendance at Your Home, Your Forum (c. 25 attendees) on 31 October to promote the conversation
- Commissioned Healthwatch Dudley to hold focus group with registered patients with a learning difficulty registered with practice
- Commissioned Dudley Council Voluntary for Voluntary Service (CVS) to hold a young person's workshop.

## 4 Reporting methodology

This section outlines how the feedback has been analysed and reported on.

## 4.1 Survey structure

Table 4 explains the structure of the survey and which respondents were asked each question.

#### Table 4. Survey questions

Question	Respondents asked these questions
Section one: tell us who you are	All respondents
Section two: your existing experience of using High Oak Surgery	High Oak Surgery patients (and those responding on behalf of a patient)
Section three: our proposals for the future location of High Oak Surgery	All respondents
Section four: about you (demographic profiling)	All respondents

The easy read survey had the same questions as the main survey with all responses being combined for analysis purposes.

## 4.2 Approach to analysis and presentation of findings

The survey used a combination of 'open' free-text questions for respondents to make written comments, and 'closed' questions where respondents 'ticked' their response from a pre-set list of responses. Closed question responses are shown as percentages. These may not add up to 100% due to rounding or respondents being able to select multiple options. The 'base' figure refers to how many respondents answered the question.

Open responses received to the survey have been read and coded into themes. This is a subjective process, where the responses to each open question are read and the key themes (codes) identified to create a code frame. The code frame is then used to code all responses to that question, by assigning responses to codes.

The findings section breaks down the survey questions by the following variables:

- Area (shown in the charts)
- Ethnicity
- Age
- Disability day-to-day activities limited
- Disability or long-term health condition
- Whether respondents are carers.

## 4.2.1 Area breakdown

This report presents responses broken down by area. This has been profiled using respondents' postcodes. Most responses were received from the Brockmoor and Pensnett ward. Due to this, postcodes have been profiled by Middle-Layer Super Output Area

(MSOA). MSOAs are statistical geographies created for the Census that are smaller than wards<sup>1</sup>.

Table 5 presents the profiled MSOAs. Neighbouring MSOAs with low base sizes are combined for the analysis.

Table 5. Profiled MSOAs				
Profiled MSOAs	Proposed areas for report			
Brockmoor and Woodside	Brockmoor and Woodside			
Pensnett and Kingswinford East	Pensnett and Kingswinford East			
Russell's Hall	Russell's Hall and Eve Hill			
New Dock and Eve Hill	Russell's Hall and Eve Hill Brierley Hill and Wordsley and Amblecote			
Brierley Hill				
Wordsley and Buckpool				
Amblecote East				
Dudley Wood and Saltwells	Dudlov Wood and Notherton			
Netherton	Dudley Wood and Netherton			
Lower Gornal and the Straits	Lower Gornal and the Straits			
No postcode provided	No postoado / upoblo to profilo			
Unable to profile	No postcode / unable to profile			

Figure 4 presents a map of the MSOAs. MSOAs with no responses are shown in grey text.

#### Figure 4. MSOAs Upper Goma and Ruito Lower Gornal and the OW Straits Dibdale idale **New Dock** & Eve Hill g Kingswinford ksford North Wall Heat 120 High Street Pensnett Russells Hall Pensnett & Wall Heath Kingswinford ings East Brockmoor Netherton & Woodside Netherton Kingswinford South Brierley Hill Health & Social Care Wordsley and Centre **Dudley Wood** Brierley Hill **Buckpool** & Saltwells **Brierley Hill** Hawbush arry Amblecote Bank blecot East

<sup>&</sup>lt;sup>1</sup> <u>https://houseofcommonslibrary.github.io/msoanames/</u>

## 5 Respondent profiling

This section presents a profile of survey respondents and event participants.

## 5.1 Overview of respondents and participants

This section presents the data from the survey and events combined. Please see Appendix A for separate tables.

Table 6 shows all survey respondents and event participants completing the demographic profiling questionnaire as an individual. Additionally, all these respondents stated they were patients or members of the public.

Table 6. Are you responding as:

	No.	%
An individual	103	100%
A formal response from an organisation	-	-
Base	103	

Table 8 shows that 96 (93%) survey respondents and event participants were registered patients of High Oak Surgery.

Table 7. Are you a registered patient at High Oak Surgery?

	No.	%
Yes, I am a registered patient	96	93%
I was a registered patient of High Oak Surgery but am not any more	2	2%
No, I have never been a registered patient of High Oak Surgery	5	5%
I am completing the survey on behalf of a registered patient	-	-
Base	103	

## 5.2 Demographic profiling

Table 9 presents a profile of survey respondents and event participants combined. Please see Appendix B for separate demographic profiles.

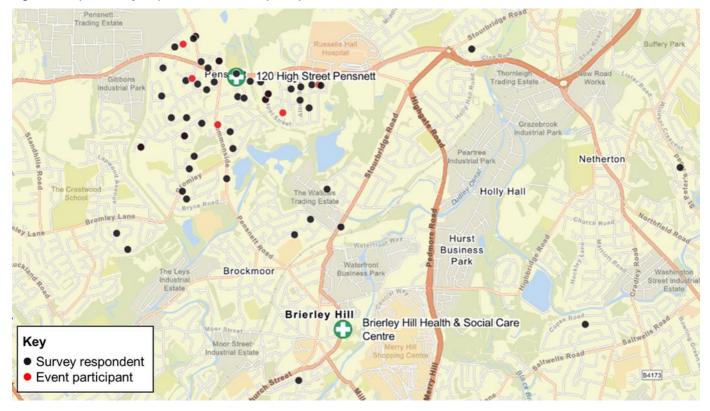
#### Table 8. Demographic profiling (survey respondents and event participants combined)

Ethnicity			participants combined) Sexual orientation		
White: British	85	87%	Heterosexual	72	79%
White: Irish	-	-	Lesbian	-	-
White: Gypsy or traveller	-	-	Gay	-	-
White: Other	-	-	Bisexual	-	-
Mixed: White and Black	-	-	Other		
Caribbean			Other	1	1%
Mixed: White and Black African	-	-	Prefer not to say	18	20%
Mixed: White and Asian	-	-	Base	91	
Mixed: Other	-	-	Relationship status		1
Asian/Asian British: Indian	1	1%	Married	46	46%
Asian/Asian British: Pakistani	_	-	Civil partnership	-	-
Asian/Asian British: Bangladeshi	1	1%	Single	8	8%
Asian/Asian British: Chinese	-	-	Divorced	5	5%
Asian/Asian British: Other	-	-	Lives with partner	11	11%
Black/Black British: African	-		Separated	1	1%
Black/Black British: Caribbean	-	-	Widowed	15	15%
Black/Black British: Other	-		Other	-	-
Other ethnic group: Arab	-		Prefer not to say	13	13%
Prefer not to say	- 11	11%	Base	99	1370
	98	1170	Pregnant currently	99	
Base			Yes		
Age category		Ι	No	01	060/
16 - 19	-	-		81	86%
20 - 24	3	3%	Prefer not to say	13	14%
25 - 29	1	1%	Base	94	
30 - 34	3	3%	Recently given birth		
35 - 39	10	10%	Yes		0.00/
40 - 44	6	6%	No	82	86%
45 - 49	2	2%	Prefer not to say	13	14%
50 - 54	5	5%	Base	95	
55 - 59	7	7%	Health problem or disabil		
60 - 64	14	14%	Yes, limited a lot	25	26%
65 - 69	12	12%	Yes, limited a little	21	22%
70 - 74	11	11%	No	50	52%
75 - 79	4	4%	Prefer not to say		
80 and over	15	15%	Base	96	
Prefer not to say	4	4%	Disability		
Base	97		Physical disability	16	24%
Religion			Sensory disability	9	13%
No religion	19	20%	Mental health need	10	15%
Christian	58	61%	Learning disability or difficulty	-	-
Buddhist	-	-	Long-term illness	10	15%
Hindu	-	-	Other	2	3%
Jewish	-	-	Prefer not to say	27	40%
Muslim	1	1%	Base	67	
Sikh	1	1%	Carer		•
Any other religion	1	1%	Yes - young person(s) aged under 24	2	2%
Prefer not to say	15	16%	Yes - adult(s) aged 25 to 49	-	-
Base	95		Yes - person(s) aged over 50 years	10	11%
Sex / gender		1	No	61	68%
Male	27	27%	Prefer not to say	17	19%
Female	60	61%	Base	90	1070
Transgender	-	-	Armed services	00	
Non-binary	-		Yes	1	1%
Prefer not to say	- 11	11%	No	83	86%
				- 03 - 13	
Other	1	1%	Prefer not to say		13%
Base	99		Base	97	

## 5.3 Mapping respondents and participants

Figure 5 presents a map of survey respondents and event participants.

Figure 5. Map of survey respondents and event participants



## 5.4 Index of Multiple Deprivation (IMD)

Table 10 shows the IMD breakdown of survey respondent postcodes. The IMD is an official measure of relative deprivation for small areas in England, with the most deprived 10% of small areas categorised as '1' while the least deprived 10% of small areas are described as '10'.

Table 9. IMD breakdown					
IMD decile	No.	%			
1	23	26%			
2	24	28%			
3	8	9%			
4	2	2%			
5	17	20%			
6	-	-			
7	-	-			
8	2	2%			
9	-	-			
10	-	-			
No postcode provided	9	10%			
Postcode unable to be profiled	2	2%			
Base	87				

## 6 Findings

This section presents the survey and event findings. It is split into the following sub-sections:

- Feedback on the services provided at High Oak Surgery
- Feedback on the range of services at Brierley Hill Health and Social Care Centre
- Feedback on Option 1a
- Feedback on Option 1b
- Feedback on the preferred option
- Feedback on other ideas and suggestions.

## 6.1 Feedback on the services provided at High Oak Surgery

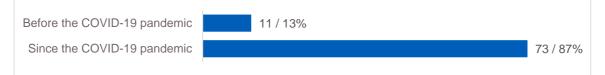
This section presents the feedback from the following survey questions:

- Which of the following best describes when you last contacted / used High Oak Surgery?
- To what extent are you satisfied with the services you receive from the staff at High Oak Surgery?
- Please explain the reason for your rating. In your response, please outline what you like and what could be improved.

## 6.1.1 Usage of High Oak Surgery

Figure 6 shows that 73 (87%) respondents last contacted or used High Oak Surgery since the COVID-19 pandemic began.

Figure 6. Which of the following best describes when you last contacted / used High Oak Surgery?

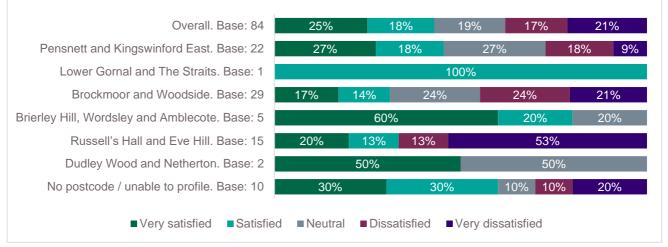


## 6.1.2 Satisfaction with services

Respondents were asked: To what extent are you satisfied with the services you receive from the staff at High Oak Surgery?

Overall, 36 (43%) respondents were very satisfied or satisfied and 32 (38%) were dissatisfied or very dissatisfied. Figure 7 shows satisfaction levels, broken down by area.

Figure 7. To what extent are you satisfied with the services you receive from the staff at High Oak Surgery?



### 6.1.2.1 Significant differences across respondent groups

#### Area:

A significant proportion of participants from the Russells Hall and Eve Hill area (10 / 67%) stated they were very dissatisfied or dissatisfied compared to participants from the Pensnett and Kingswinford East area (6 / 27%).

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### Disability:

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.1.3 Reasons for rating

When asked for the reasons for their satisfaction rating, the key themes were:

- Positive Staff Practice staff are professional and friendly (18 / 27%)
- Negative Access Concern over difficulties getting an appointment (17 / 25%)
- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (17 / 25%).

Table 11 presents the full list of themes.

Table 10 Please	evolain the rea	ason for your rating	
Table TU. Flease		ison for your raing	

Sentiment	Main theme	Sub-theme	No.	%
Positive	Staff	Practice staff are professional and friendly	18	27%
Negative	Access	Concern over difficulties getting an appointment	17	25%
Negative	Access	Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport)	17	25%
Negative	Staff	Staff in Brierley Hill are unprofessional and unhelpful (e.g. do not care)	13	19%
Positive	Quality of care	Quality of care provided is good	9	13%
Negative	Cost and efficiency	Telephone appointment booking system is ineffective (e.g. hard to get through)	8	12%
Negative	Quality of care	Concern over lack of face-to-face appointments	6	9%
Negative	Quality of care	Quality of care has deteriorated since the relocation of High Oak Surgery	4	6%
Negative	Quality of care	Concern over being seen by different doctors	4	6%
Positive	Access	Access to appointments is easy	3	4%
Negative	Specific groups	Concern over access to surgery for vulnerable patients (e.g. elderly)	2	3%
Negative	Access	Waiting time for appointments is too long	3	4%
Negative	Access	Concern over lack of out of hours appointments	2	3%
Negative	Communication	Concern over lack of consultation with public before moving High Oak Surgery	1	2%
Negative	Quality of care	Concern over restricted duration of appointments	1	2%
Negative	Communication	Communication between patients and doctors is poor	2	3%
Observation	Estate and facilities	Consider the need to build a new purpose-built practice in Pensnett	1	2%
Observation	Service provision	Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back)	1	2%
Observation	Technology	Consider that not everyone has IT access	1	2%
Negative	Quality of care	Concern over long wait for test results	1	2%
Observation	Access	Consider the need to improve public transport to the surgery	1	2%
Positive	Technology	Technology makes it easier to access the practice (e.g. make appointments)	1	2%
Observation	Communication	Consider the need to notify patients about the progress of their online requests (e.g. repeat prescription)	1	2%
Observation	Access	Consider the need to run appointments on time	1	2%
Negative	Access	Parking in Brierley Hill is inadequate	1	2%
Negative	Access	Concern over unknown time for telephone appointments	1	2%
Base				68

### 6.1.3.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

#### Area:

- Brockmoor and Woodside: Negative Access Concern over difficulties getting an appointment (8 / 40%)
- **Pensnett and Kingswinford East:** Negative Access Concern over difficulties getting an appointment (7 / 37%)
- **Russell's Hall and Eve Hill:** Negative Staff Staff in Brierley Hill are unprofessional and unhelpful (e.g. do not care) (8 / 53%)
- Brierley Hill, Wordsley and Amblecote: Positive Staff Practice staff are professional and friendly (2 / 67%)
- Dudley Wood and Netherton: Limited feedback received

- Lower Gornal and The Straits: Limited feedback received
- **No postcode / unable to profile:** Negative Staff Staff in Brierley Hill are unprofessional and unhelpful (e.g. do not care) (3 / 38%)

#### Age:

- Under 40: Negative Access Concern over difficulties getting an appointment (5 / 56%)
- **40-59:** Positive Staff Practice staff are professional and friendly (4 / 29%); Negative Access Concern over difficulties getting an appointment (4 / 29%)
- 60 and over: Positive Staff Practice staff are professional and friendly (10 / 27%)

#### Ethnicity:

- Asian: Limited feedback received
- Black: No feedback provided
- Mixed or multiple ethnic groups: No feedback provided
- White: Positive Staff Practice staff are professional and friendly (16 / 31%)

#### Day-to-day activity:

- Day-to-day activities limited: Positive Staff Practice staff are professional and friendly (8 / 27%); Negative - Access - Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (8 / 27%)
- Day-to-day activities not limited: Negative Access Concern over difficulties getting an appointment (10 / 30%)

#### **Disability:**

- Physical disability: Positive Quality of care Quality of care provided is good (4 / 36%)
- Sensory disability: Positive Quality of care Quality of care provided is good (2 / 50%)
- Mental health need: Positive Staff Practice staff are professional and friendly (2 / 40%); Negative Staff Staff in Brierley Hill are unprofessional and unhelpful (e.g. do not care) (2 / 40%)
- Learning disability or difficulty: No feedback provided
- Long-term illness: Positive Staff Practice staff are professional and friendly (2 / 40%)

#### Carers:

- **Carers:** Positive Staff Practice staff are professional and friendly (4 / 67%)
- Non-carers: Positive Staff Practice staff are professional and friendly (11 / 28%)

## 6.2 Feedback on the range of services at Brierley Hill Health and Social Care Centre

This section presents the feedback from the following survey questions:

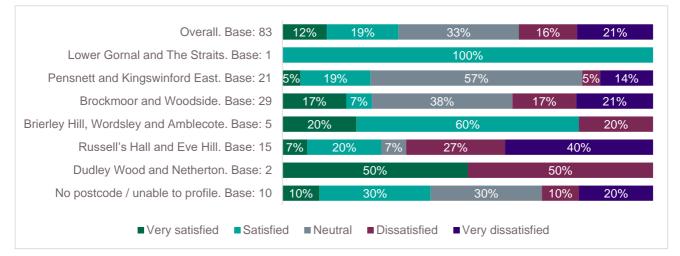
- To what extent are you satisfied with the range of services available at Brierley Hill Health and Social Care Centre (BHHSCC)?
- Please explain the reason for your rating. In your response, please outline what you like and what could be improved.

## 6.2.1 Satisfaction with the range of services

Respondents were asked: To what extent are you satisfied with the range of services available at Brierley Hill Health and Social Care Centre (BHHSCC)?

Overall, 26 (31%) respondents stated they were very satisfied or satisfied and 30 (36%) were dissatisfied or very dissatisfied. Figure 8 shows satisfaction broken down by area.

Figure 8. To what extent are you satisfied with the range of services available at Brierley Hill Health and Social Care Centre (BHHSCC)?



### 6.2.1.1 Significant differences across respondent groups

#### Area:

A significant proportion of participants from the Russells Hall and Eve Hill area (10 / 67%) stated they were dissatisfied or very dissatisfied compared to participants from Pensnett and Kingswinford East area (4 / 19%).

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### **Disability:**

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.2.2 Reasons for rating

When asked for the reasons for their satisfaction rating, the key themes were:

- Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (17 / 32%)
- Neutral General Do not use services other than GPs (9 / 17%)
- Negative Access Concern over difficulties getting an appointment (8 / 15%); Negative - Access - Parking is inadequate (8 / 15%).

Table 12 presents the full list of themes.

Sentiment	Main theme	Sub-theme	No.	%
Negative	Access	Concern over inaccessible location of the centre (e.g. too far from Pensnett)	17	32%
Neutral	General	Do not use services other than GPs	9	17%
Negative	Access	Concern over difficulties getting an appointment	8	15%
Negative	Access	Parking is inadequate	8	15%
Negative	Quality of care	Concern over lack of face-to-face appointments	5	9%
Positive	General	Quality of services is good	5	9%
Observation	Service provision	Consider the need for a local practice	5	9%
Positive	Access	Appointments are available to access	3	6%
Negative	Quality of care	Quality of services has deteriorated since the relocation of High Oak Surgery	3	6%
Positive	Access	Positive to have practice co-located with pharmacy (e.g. family planning services)	2	4%
Positive	Access	Brierley Hill Health and Social Care Centre is accessible	2	4%
Negative	Communication	Concern over poor communication with service users	2	4%
Neutral	Communication	Not aware about the range of services provided by the centre	1	2%
Observation	Staff	Ensure appropriate staffing in the centre	1	2%
Negative	Service provision	Concern over removal of some services (e.g. audiology)	1	2%
Negative	Quality of care	Quality of care is poor	1	2%
Positive	Estate and facilities	Brierley Hill Health and Social Care Centre is a modern and fit-for-purpose building	1	2%
Negative	Quality of care	Concern over long wait for test results	1	2%
Positive	Staff	Staff are professional and friendly	1	2%
Negative	Access	Concern over high travel costs to Brierley Hill Health and Social Care Centre	1	2%
Negative	Specific groups	Concern over access to practice for vulnerable patients (e.g. elderly, disabled)	1	2%
Negative	Service provision	Flu vaccination was not available at Brierley Hill Health and Social Care Centre	1	2%
Negative	Staff	Staff at Brierley Hill Health and Social Care Centre are unprofessional and unhelpful	1	2%
Negative	Estate and facilities	Brierley Hill Health and Social Care Centre is not a patient-friendly building (e.g. poor layout)	1	2%
Base	·		Ę	54

Table 11. Please explain the reason for your rating

## 6.2.2.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

#### Area:

- **Brockmoor and Woodside:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (5 / 28%)
- **Pensnett and Kingswinford East:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (6 / 46%)
- Russell's Hall and Eve Hill: Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (2 / 15%); Neutral General Do not use services other than GPs (2 / 15%); Positive General Quality of services is good (2 / 15%); Negative Quality of care Quality of services has deteriorated since the relocation of High Oak Surgery (2 / 15%); Negative Communication Concern over poor communication with service users (2 / 15%)
- Brierley Hill, Wordsley and Amblecote: Limited feedback received
- Dudley Wood and Netherton: Limited feedback received
- Lower Gornal and The Straits: No feedback received
- No postcode / unable to profile: Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (3 / 50%)

#### Age:

- Under 40: Neutral General Do not use services other than GPs (3 / 43%)
- **40-59:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (4 / 29%)
- **60 and over:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (9 / 35%)

#### Ethnicity:

- Asian: Limited feedback received
- Black: No feedback received
- Mixed or multiple ethnic groups: No feedback received
- White: Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (13 / 33%)

#### Day-to-day activity:

- **Day-to-day activities limited:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (9 / 39%)
- **Day-to-day activities not limited:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (7 / 25%)

#### Disability:

- **Physical disability:** Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (4 / 44%)
- Sensory disability: Limited feedback received
- Mental health need: Negative Access Concern over difficulties getting an appointment (2 / 40%); Negative - Quality of care - Concern over lack of face-to-face appointments (2 / 40%)
- Learning disability or difficulty: No feedback provided

• Long-term illness: Positive - General - Quality of services is good (2 / 67%)

#### Carers:

- Carers: Limited feedback received
- Non-carers: Negative Access Concern over inaccessible location of the centre (e.g. too far from Pensnett) (12 / 39%)

## 6.3 Feedback on Option 1a

Option 1a is that High Oak Surgery is retained at Brierley Hill Health and Social Care Centre as it is at the moment (a single-site solution).

This section presents the feedback from the following survey questions about Option 1a:

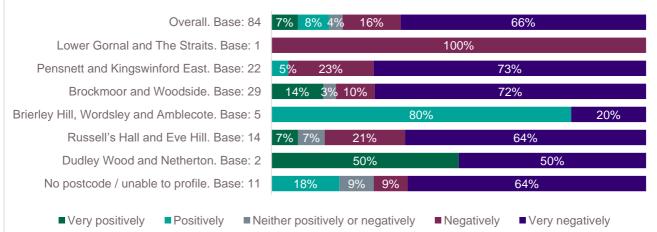
- To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery?
- Tell us why you think this option will negatively or positively impact those using services at High Oak Surgery?

## 6.3.1 Impact of Option 1a

Respondents were asked: To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery?

Overall, 13 (16%) respondents indicated that it would have a positive impact and 68 (81%) indicated it would have a negative impact. Figure 9 shows the responses broken down by area.





## 6.3.1.1 Significant differences across respondent groups

#### Area:

• A significant proportion of participants from the Brierley Hill, Wordsley and Amblecote area (4 / 80%) stated that it would have a positive impact compared to participants

from Brockmoor and Woodside area (4 / 14%), Pensnett and Kingswinford East area (1 / 5%), and Russells Hall and Eve Hill area (1 / 7%)

- A significant proportion of participants from the Brockmoor and Woodside area (24 / 83%), Pensnett and Kingswinford East (21 / 96%), and Russells Hall and Eve Hill area (12 / 86%) stated that it would have a negative impact compared to participants from Brierley Hill, Wordsley and Amblecote (1 / 20%).
- There were no significant differences between sub-groups.

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### Disability:

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.3.2 Reasons for impact

Respondents were asked: Tell us why you think this option will negatively or positively impact those using services at High Oak Surgery. Overall, the key themes were:

- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (40 / 58%)
- Observation Service provision Consider the need for a GP surgery locally (e.g. move High Oak Surgery back) (20 / 29%)
- Negative Specific groups Concern over access to practice for vulnerable patients (e.g. elderly, disabled) (17 / 25%).

Table 13 presents the full list of themes.

Table 12. Tell us v		n will negatively or positively impact those using services at H		
	Main theme	Sub-theme	No.	%
Negative	Access	Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport)	40	58%
Observation	Service provision	Consider the need for a GP surgery locally (e.g. move High Oak Surgery back)	20	29%
Negative	Specific groups	Concern over access to practice for vulnerable patients (e.g. elderly, disabled)	17	25%
Negative	Access	Concern over high traveling costs to Brierley Hill Health and Social Care Centre	7	10%
Observation	Proposal	Concern over lack of effective engagement and involvement in the process (e.g. other options are not considered)	6	9%
Observation	Demographics	Consider demographics in Pensnett	5	7%
Negative	Cost and efficiency	Relocation of High Oak Surgery has increased pressure on other services (e.g. walk-in, hospital)	4	6%
Negative	Access	Concern over difficulties getting an appointment	3	4%
Positive	Access	Option 1a improves access to the practice	3	4%
Negative	Access	Parking is inadequate in Brierley Hill Health and Social Care Centre site	2	3%
Observation	Cost and efficiency	Consider the need to build a new purpose-built practice in Pensnett	2	3%
Negative	Staff	Concern over lack of permanent doctors after moving High Oak Surgery	2	3%
Negative	Quality of care	Quality of care has deteriorated since the relocation of High Oak Surgery	2	3%
Positive	Estate and facilities	Brierley Hill Health and Social Care Centre is a modern and fit-for-purpose building	2	3%
Negative	Communication	Concern over poor engagement with the public	2	3%
Negative	Environment	Concern over environmental impact of the relocation of High Oak Surgery	1	1%
Negative	Access	Concern over difficulties accessing the practice by phone since the relocation	1	1%
Positive	Service provision	Positive to have different services co-located	1	1%
Observation	Access	Consider the need to improve public transport to Brierley Hill Health and Social Care Centre	1	1%
Negative	Health inequalities	Removal of the GP surgery from Pensnett will worsen health inequalities	1	1%
Base			(	69

### 6.3.2.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

Area:

- **Brockmoor and Woodside:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (17 / 65%)
- **Pensnett and Kingswinford East:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (13 / 65%)
- **Russell's Hall and Eve Hill:** Observation Service provision Consider the need for a GP surgery locally (e.g. move High Oak Surgery back) (6 / 55%)

- Brierley Hill, Wordsley and Amblecote: Limited feedback provided
- Dudley Wood and Netherton: Limited feedback provided
- Lower Gornal and The Straits: Limited feedback provided
- No postcode / unable to profile: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (5 / 71%)

#### Age:

- Under 40: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (9 / 82%)
- **40-59:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (9 / 56%)
- **60 and over:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (18 / 51%)

#### Ethnicity:

- Asian: Limited feedback received
- Black: No feedback received
- Mixed or multiple ethnic groups: No feedback received
- White: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (34 / 61%)

#### Day-to-day activity:

- **Day-to-day activities limited:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (15 / 54%)
- **Day-to-day activities not limited:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (22 / 60%)

#### **Disability:**

- **Physical disability:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (6 / 60%)
- Sensory disability: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (2 / 67%)
- **Mental health need:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (5 / 71%)
- Learning disability or difficulty: No feedback provided
- Long-term illness: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (5 / 83%)

#### Carers:

- **Carers:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (3 / 33%); Observation Service provision Consider the need for a GP surgery locally (e.g. move High Oak Surgery back) (3 / 33%)
- Non-carers: Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (26 / 70%)

## 6.4 Feedback on Option 1b

Option 1b is a 'hub and spoke' arrangement with Brierley Hill the 'hub' and some care in community sites in Pensnett. These sites could be current health facilities or community spaces.

This section presents the feedback from the following survey questions about Option 1b:

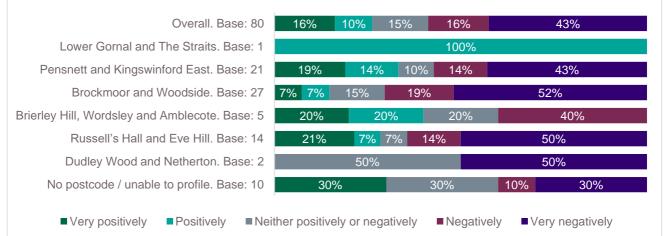
- To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery?
- Tell us why you think this option will negatively or positively impact those using services at High Oak Surgery?

## 6.4.1 Impact of Option 1b

Respondents were asked: To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery?

Overall, 21 (26%) respondents indicated that it would have a positive impact and 47 (59%) indicated it would have a negative impact. Figure 10 shows the overall breakdown of responses broken down by area.

Figure 10. To what extent do you think this option will positively or negatively impact those using services at High Oak Surgery?



## 6.4.1.1 Significant differences across respondent groups

#### Area:

• There were no significant differences between sub-groups.

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### **Disability:**

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.4.2 Reasons for impact

Respondents were asked: Tell us why you think this option will negatively or positively impact those using services at High Oak Surgery. Overall, the key themes were:

- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (19 / 33%)
- Positive General Option 1b is a good idea (e.g. better than Option 1a) (9 / 16%)
- Neutral General More details about Option 1b are required (e.g. location of community sites) (7/ 12%).

Table 14 presents the full list of themes.

Sentiment	why you think this option Main theme	n will negatively or positively impact those using services at Hi Sub-theme	gh Oak S No.	urgery. %
Observation	Service provision	Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back)	19	33%
Positive	General	Option 1b is a good idea (e.g. better than Option 1a)	9	16%
Neutral	General	More details about Option 1b are required (e.g. location of community sites)	7	12%
Observation	Service provision	GP services should be provided locally	6	10%
Negative	Access	Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport)	6	10%
Positive	Access	Option 1b will help to improve access to GP services	5	9%
Negative	Specific groups	Concern over access to practice for vulnerable patients (e.g. elderly, disabled)	3	5%
Negative	Communication	Concern over poor engagement with public (e.g. not inclusive)	3	5%
Observation	General	There is no difference between Option 1a and Option 1b	2	3%
Negative	Access	Concern over difficulties getting an appointment	2	3%
Observation	Estate and facilities	Consider the need to build a new purpose-built surgery in Pensnett	2	3%
Observation	Demographic	Consider growing population of Pensnett	2	3%
Observation	Service provision	Consider the need to have services in one location	2	3%
Observation	Estate and facilities	Consider using available local facilities in Pensnett to provide services (e.g. church, community centres)	2	3%
Negative	Quality of care	Concern over negative impact of Option 1b on quality of care	1	2%
Observation	Cost and efficiency	Consider co-location of the practice with The Pharmacy Galleria	1	2%
Positive	Cost and efficiency	Option 1b will help reduce pressure on other services	1	2%
Positive	Quality of care	Option 1b will help to improve continuity of care	1	2%
Negative	Quality of care	Quality of care has deteriorated since relocation of High Oak Surgery	1	2%
Negative	Access	Concern over high travel costs to Brierley Hill Health and Social Care Centre	1	2%
Observation	Access	Consider improving public transport to health services	1	2%
Observation	Service provision	Consider provision of a wide range of services in the community (e.g. non-invasive treatments, vaccination)	1	2%
Negative	Estate and facilities	Brierley Hill Health and Social Care Centre is not a patient-friendly building (e.g. poor layout)	1	2%
Negative	Staff	Staff at Brierley Hill Health and Social Care Centre are unprofessional and unhelpful	1	2%
Observation	Patient choice	Ensure that High Oak Surgery patients can choose GP practice that is most convenient for them	1	2%
General	General	No comment (e.g. as above)	3	5%
Base		. = ,		58

## 6.4.2.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

#### Area:

- **Brockmoor and Woodside:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (10 / 48%)
- Pensnett and Kingswinford East: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (4 / 24%); Positive - Access - Option 1b will help to improve access to GP services (4 / 24%)
- **Russell's Hall and Eve Hill:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (4 / 31%)
- Brierley Hill, Wordsley and Amblecote: No feedback provided
- Dudley Wood and Netherton: Limited feedback received
- Lower Gornal and The Straits: Limited feedback received
- **No postcode / unable to profile:** Neutral General More details about Option 1b are required (e.g. location of community sites) (2 / 40)

#### Age:

- Under 40: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (2 / 22%); Observation - Service provision - GP services should be provided locally (2 / 22%); Observation - General -There is no difference between Option 1a and Option 1b (2 / 22%)
- **40-59:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (4 / 33%)
- **60 and over:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (10 / 32%)

#### Ethnicity:

- Asian: No feedback provided
- Black: No feedback provided
- Mixed or multiple ethnic groups: No feedback provided
- White: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (14 / 30%)

#### Day-to-day activity:

- **Day-to-day activities limited:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (12 / 57%)
- **Day-to-day activities not limited:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (7 / 21%); Positive General Option 1b is a good idea (e.g. better than Option 1a) (7 / 21%)

#### **Disability:**

- Physical disability: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (5 / 56%)
- Sensory disability: Limited feedback received
- Mental health need: Limited feedback received
- Learning disability or difficulty: No feedback provided

• Long-term illness: Positive - General - Option 1b is a good idea (e.g. better than Option 1a) (2 / 50%)

#### Carers:

- Carers: Limited feedback received
- **Non-carers:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (9 / 29%)

## 6.5 Feedback on the preferred option

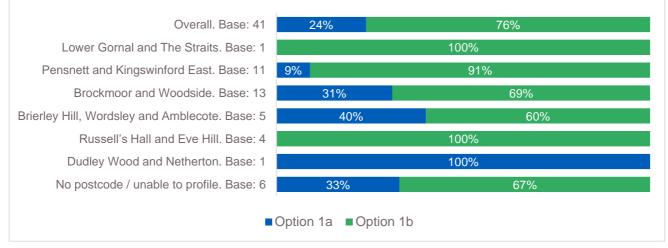
This section presents the feedback from the following survey questions:

- Which is your preferred option for High Oak Surgery?
- Please tell us why this is your preferred option.
- To what extent do you agree or disagree with the following statements:
  - A continued presence in the Pensnett area is required, especially for those with mobility or travel issues
  - Outreach clinics where you can see health and care professionals in community settings would be of value.

## 6.5.1 Preferred option

Respondents were asked: Which is your preferred option for High Oak Surgery? Overall, a greater proportion of respondents preferred Option 1b (31 / 76%), compared to Option1a (10 / 24%). Figure 11 shows the responses broken down by area.





### 6.5.1.1 Significant differences across respondent groups

#### Area:

 A significant proportion of participants from the Pensnett and Kingswinford East area (10 / 91%) stated that they prefer Option 1b compared to participants from Brierley Hill, Wordsley and Amblecote (3 / 60%). Age:

• There were no significant differences between sub-groups.

Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### Disability:

• There were no significant differences between sub-groups.

Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.5.2 Reasons for preferred option

Respondents were asked: Please tell us why this is your preferred option. Overall, the key themes were:

- Observation General Neither option is viable (30 / 43%)
- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (23 / 33%)
- Observation Access Option 1b provides better access to services (9 / 13%).

Table 15 presents the full list of themes.

<u>Table 14. Tell us v</u>	why you think this opti	on will negatively or positively impact those using service	es at High	Oak Surg
Sentiment	Main theme	Sub-theme	No.	%
Observation	General	Neither option is viable	30	43%
Observation	Service provision	Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back)	23	33%
Observation	Access	Option 1b provides better access to services	9	13%
Negative	Access	Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport)	5	7%
Observation	Demographics	Consider demographics in Pensnett (e.g. deprivation, growing population)	4	6%
Observation	Service provision	GP services should be provided locally	2	3%
Positive	Access	Brierley Hill Health and Social Care Centre is accessible	2	3%
Observation	Cost and efficiency	Option 1a is cost-effective	2	3%
Observation	Estate and facilities	Consider the need to build a new purpose- built practice in Pensnett	2	3%
Observation	Access	Ensure that community sites are in an accessible location	1	1%
Neutral	General	More details about Option 1b are required (e.g. location of community sites)	1	1%
Positive	Estate and facilities	Brierley Hill Health and Social Care Centre is a modern and fit-for-purpose building	1	1%
Positive	Quality of care	Option 1b will help to improve continuity of care	1	1%
General	General	No comments (e.g. as above)	2	3%
General	General	Other	4	6%
Base				70

## 6.5.2.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

Area:

- Brockmoor and Woodside: Observation General Neither option is viable (14 / 56%)
- Pensnett and Kingswinford East: Observation General Neither option is viable (10 / 53%)
- **Russell's Hall and Eve Hill:** Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (4 / 31%)
- Brierley Hill, Wordsley and Amblecote: Limited feedback received
- Dudley Wood and Netherton: Limited feedback received
- Lower Gornal and The Straits: Limited feedback received
- No postcode / unable to profile: Observation General Neither option is viable (2 / 22%); Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (2 / 22%); Observation Access Option 1b provides better access to services (2 / 22%)

#### Age:

- Under 40: Observation General Neither option is viable (8 / 73%)
- **40-59:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (6 / 40%)
- 60 and over: Observation General Neither option is viable (14 / 38%)

#### Ethnicity:

- Asian: Limited feedback received
- Black: No feedback provided
- Mixed or multiple ethnic groups: No feedback provided
- White: Observation General Neither option is viable (26 / 46%)

#### Day-to-day activity:

- **Day-to-day activities limited:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (16 / 52%)
- Day-to-day activities not limited: Observation General Neither option is viable (14 / 39%)

#### Disability:

- Physical disability: Observation General Neither option is viable (6 / 50%)
- Sensory disability: Observation General Neither option is viable (2 / 67%)
- Mental health need: Observation General Neither option is viable (5 / 63%)
- Learning disability or difficulty: No feedback provided
- Long-term illness: Observation General Neither option is viable (3 / 43%); Observation - Access - Option 1b provides better access to services (3 / 43%)

#### Carers:

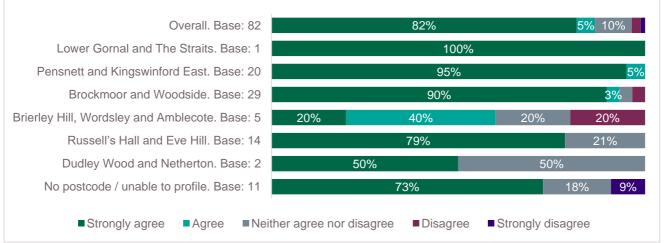
- **Carers:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (3 / 30%)
- Non-carers: Observation General Neither option is viable (18 / 50%)

## 6.5.3 Retaining a presence in Pensnett

Respondents were asked: To what extent do you agree or disagree with the following statement: A continued presence in the Pensnett area is required, especially for those with mobility or travel issues.

Overall, 71 (87%) respondents strongly agreed or agreed with this statement, while 3 (4%) disagreed or strongly disagreed. Figure 12 shows the overall response broken down by area.

Figure 12. To what extent do you agree or disagree with the following statement: A continued presence in the Pensnett area is required, especially for those with mobility or travel issues.



### 6.5.3.1 Significant differences across respondent groups

#### Area:

 A significant proportion of participants from the Pensnett and Kingswinford East area (20 / 100%) stated that they strongly agreed or agreed compared to participants from Brierley Hill, Wordsley and Amblecote (3/ 60%).

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

• There were no significant differences between sub-groups.

#### **Disability:**

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

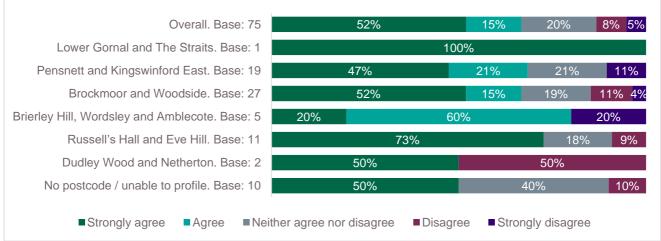
For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.5.4 Outreach clinics in community settings

Respondents were asked: To what extent do you agree or disagree with the following statement: Outreach clinics where you can see health and care professionals in community settings would be of value.

Overall, 50 (67%) respondents strongly agreed or agreed with this statement, while 10 (13%) disagreed or strongly disagreed. Figure 13 shows the responses broken down by area.

Figure 13. To what extent do you agree or disagree with the following statement: Outreach clinics where you can see health and care professionals in community settings would be of value.



### 6.5.4.1 Significant differences across respondent groups

#### Area:

• There were no significant differences between sub-groups.

#### Age:

• There were no significant differences between sub-groups.

#### Ethnicity:

• There were no significant differences between sub-groups.

#### Day-to-day activity:

 A significant proportion of participants with not limited day-to-day activities (32 / 82%) stated that they strongly agreed or agreed compared to participants with limited dayto-day activities (16 / 50%).

#### Disability:

• There were no significant differences between sub-groups.

#### Carers:

• There were no significant differences between sub-groups.

For a full breakdown of the responses to this question by these groups and other groups please see the Excel Appendix tables.

## 6.6 Feedback on other ideas and suggestions

This section presents the feedback from the following survey questions:

- What other ideas or suggestions do you have about how we deliver these services?
- Finally, is there any other information you wish us to consider which you have not yet mentioned?

### 6.6.1 Ideas or suggestions

Respondents were asked: What other ideas or suggestions do you have about how we deliver these services? Overall, the key themes were:

- Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (22 / 49%)
- Negative Specific groups Concern over access to High Oak Surgery for vulnerable patients (e.g. elderly) (4 / 9%)
- Observation Demographics Consider demographics in Pensnett (e.g. deprivation, growing population) (4 / 9%).

Table 16 presents the full list of themes.

Sentiment	Main theme	ns do you have about how we deliver these services? Sub-theme	No.	%
Observation	Service	Consider the need for a GP practice in	22	49%
provision		Pensnett (e.g. move High Oak Surgery back)	22	4970
Negative	Specific groups	Concern over access to High Oak Surgery for	4	9%
Negative	Specific groups	vulnerable patients (e.g. elderly)	4	970
Observation	Demographics	Consider demographics in Pensnett (e.g.	4	9%
Observation	Demographics	deprivation, growing population)	4	9%
		Concern over poor communication and		
Negative	Communication	engagement with service users about the	3	7%
		changes		
Observation	Service	GP services need to be local	2	4%
Observation	provision		2	4 /0
	Cost and	Relocation of High Oak Surgery has increased		
Negative	efficiency	pressure on other services (e.g. walk-in,	2	4%
	eniciency	hospital)		
Observation	Estate and	Consider the need to build a new purpose-built	2	4%
Observation	facilities	surgery in Pensnett	2	4 /0
Negative	Cost and	Brierley Hill Health and Social Care is busy	2	4%
Negative	efficiency	(e.g. infection risk)	2	4 /0
Observation	Cost and	Consider co-location of the services with The	2	4%
Observation	efficiency	Pharmacy Galleria	2	4 /0
Observation	Access	Consider the need to change appointment	1	2%
Observation	ACCESS	booking process	I	2 /0
Negative	Access	Concern over high travel costs to Brierley Hill	1	2%
Negative		Health and Social Care Centre		2 /0
Observation	Staff	Ensure appropriate staffing (e.g. caring)	2	4%
Observation	Service	Consider provision of more services in	1	2%
Observation	provision	pharmacies	I	Ζ70
		Consider improving transport links to the		
Observation	Access	Brierley Hill Health and Social Care Centre	1	2%
		(e.g. cycling and bus routes)		
Observation	Service	Consider the need to access tests on-site (e.g.	1	2%
	provision	blood tests)	1	270
Observation	Service	Consider transferring the services to Standhills	1	2%
	provision	or Moss Grove	1	∠70
Neutral	General	Further consultation is required	1	2%
General	General	Other	2	4%
General	General	No comment	2	4%
Base				45

Table 15. What other ideas or suggestions do you have about how we deliver these services?

### 6.6.1.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

Area:

- **Brockmoor and Woodside:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (8 / 53%)
- **Pensnett and Kingswinford East:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (6 / 46%)
- **Russell's Hall and Eve Hill:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (6 / 50%)
- Brierley Hill, Wordsley and Amblecote: No feedback provided
- Dudley Wood and Netherton: Limited feedback received
- Lower Gornal and The Straits: No feedback received
- No postcode / unable to profile: Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (2 / 50%)

### Age:

- Under 40: Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (6 / 86%)
- **40-59:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (2 / 22%)
- **60 and over:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (12 / 50%)

### Ethnicity:

- Asian: No feedback provided
- Black: No feedback provided
- Mixed or multiple ethnic groups: No feedback provided
- White: Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (15 / 44%)

### Day-to-day activity:

- **Day-to-day activities limited:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (11 / 52%)
- **Day-to-day activities not limited:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (10 / 46%)

### Disability:

- **Physical disability:** Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (4 / 50%)
- Sensory disability: Limited feedback provided
- Mental health need: Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (3 / 60%)
- Learning disability or difficulty: No feedback provided
- Long-term illness: Observation Service provision Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (4 / 100%)

### Carers:

• Carers: Limited feedback provided

• Non-carers: Observation - Service provision - Consider the need for a GP practice in Pensnett (e.g. move High Oak Surgery back) (15 / 60%)

### 6.6.2 Other information

Respondents were asked: Finally, is there any other information you wish us to consider which you have not yet mentioned? Overall, the key themes were:

- Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (11 / 30%)
- Negative Communication Concern over poor communication and engagement with service users about the changes (7 / 19%)
- Negative Access Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport) (4 / 11%); Negative Specific groups Concern over access to surgery for vulnerable patients (e.g. elderly) (4 / 11%).

Table 17 presents the full list of themes.

Table 16. Finally,		mation you wish us to consider which you have not yet n		
	Main theme	Sub-theme	No.	%
Observation	Service provision	Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back)	11	30%
Negative	Communication	Concern over poor communication and engagement with service users about the changes	7	19%
Negative	Access	Concern over location of the practice in Brierley Hill (e.g. too far, poor public transport)	4	11%
Negative	Specific groups	Concern over access to surgery for vulnerable patients (e.g. elderly)	4	11%
Negative	Access	Concern over high traveling costs to Brierley Hill Health and Social Care Centre	3	8%
Observation	Demographic	Consider growing population of Pensnett	3	8%
Observation	Service provision	GP services should be provided locally	3	8%
Observation	Cost and efficiency	Consider co-location of the practice with The Pharmacy Galleria	2	5%
Observation	Quality of care	Ensure access to face-to-face consultations	2	5%
Negative	General	Proposals will have negatively impacted residents of Pensnett	2	5%
Negative	Cost and efficiency	Relocation of High Oak Surgery has increased pressure on other services (e.g. walk-in, hospital)	1	3%
Negative	Quality of care	Quality of care has deteriorated since relocation of High Oak Surgery	1	3%
Observation	General	Patient needs should be priority	1	3%
Observation	Estate and facilities	Consider using available local facilities in Pensnett to provide services (e.g. church, community centres)	1	3%
Neutral	General	Further consultation is required	1	3%
General	General	No comment	1	3%

Table 16. Finally, is there any other information you wish us to consider which you have not yet mentioned?

General	General	Other	3	8%
Base			3	87

### 6.6.2.1 Top themes by respondent groups

This section shows the top theme for each respondent group.

### Area:

- Brockmoor and Woodside: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (3 / 27%); Negative -Access - Concern over high traveling costs to Brierley Hill Health and Social Care Centre (3 / 27%); Observation - Service provision - GP services should be provided locally (3 / 27%)
- **Pensnett and Kingswinford East:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (5 / 42%)
- **Russell's Hall and Eve Hill:** Negative Communication Concern over poor communication and engagement with service users about the changes (4 / 36%)
- Brierley Hill, Wordsley and Amblecote: No feedback provided
- Dudley Wood and Netherton: Limited feedback received
- Lower Gornal and The Straits: No feedback provided
- No postcode / unable to profile: Limited feedback received

### Age:

- Under 40: Limited feedback received
- **40-59:** Communication Concern over poor communication and engagement with service users about the changes (2 / 29%)
- **60 and over:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (7 / 33%)

### Ethnicity:

- Asian: No feedback provided
- Black: No feedback provided
- Mixed or multiple ethnic groups: No feedback provided
- White: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (10 / 37%)

### Day-to-day activity:

- **Day-to-day activities limited:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (9 / 47%)
- **Day-to-day activities not limited:** Negative Communication Concern over poor communication and engagement with service users about the changes (6 / 35%)

### **Disability:**

- Physical disability: Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (4 / 40%)
- Sensory disability: Limited feedback received
- Mental health need: Limited feedback received
- Learning disability or difficulty: No feedback provided
- Long-term illness: Limited feedback received

### Carers:

- Carers: Limited feedback received
- **Non-carers:** Observation Service provision Consider the need for a GP surgery in Pensnett (e.g. move High Oak Surgery back) (6 / 32%)

### 6.7 Feedback from the events

This section summarises the themes raised at the events.

### 6.7.1 Feedback from the 9 November public event

22 participants attended the event. The following feedback was provided:

- Participants felt that Option 1a and Option 1b were the same
- Concern over traveling cost from Pensnett to Brierley Hill Health and Social Care Centre was shared
- Difficulties getting appointments was highlighted
- Participants highlighted poor communication and engagement with local community regarding the change (e.g. poor advertising of events, location of events)
- It was commented that telephone consultations are not suitable for everyone
- Concern over the inconvenient location of Brierley Hill Health and Social Care Centre and inadequate parking around it, was shared
- Participants commented that the telephone queuing system is inadequate (e.g. unknown number in a queue)
- The need for a GP practice locally was highlighted (e.g. Kingswinford, Pensnett)
- Participants suggested that a purpose-built practice should be built in Pensnett, querying what happened to former plans to build a new facility in the area
- Concern over poor communication with patients when waiting for results was shared
- Lack of access to interpreters was highlighted
- Participants commented that there was lack of consideration of post-COVID arrangements.

### 6.7.2 Feedback from the 23 November public event

Six participants attended the event. The following feedback was provided:

- Participants shared concern over the lack of GP services in Pensnett
- Participants stated they were concerned over difficulties to get appointments
- Concern over putting expanded services into a temporary site at Brierley Hill Health and Social Care Centre when nothing is finalised
- Participant highlighted the inconvenient location of Brierley Hill Health and Social Care Centre (e.g. poor public transport)
- Consider the needs of vulnerable patients (e.g. patients with learning difficulties, autism)
- Providing different tests and immunisations locally was suggested (e.g. blood pressure checks, phlebotomy).

### 6.7.1 Feedback from the 30 November public event

24 participants attended the event. The following feedback was provided:

- Concern over the lack of openness and transparency of NHS organisations was raised
- Participants were concerned over poor communication and engagement with public regarding the change (e.g. location of events)
- Concerns over the location of the practice in Brierley Hill was shared (e.g. too far, poor public transport)
- Participants were concerned over access to the practice for vulnerable patients (e.g. elderly, disabled)
- It was commented that the quality of care has deteriorated since the relocation of High Oak Surgery (e.g. better signposting is needed)
- Participants suggested using available local facilities in Pensnett to provide GP services (e.g. church, community centres, nursing home, local pharmacy)
- It was commented that the reason for the move was to utilise empty space at Brierley Hill Health and Social Care Centre, with the building described as a 'white elephant'
- Participants felt that a modern facility should be built in Pensnett and did not understand why this option was not considered
- It was commented that Brierley Hill Health and Social Care Centre is not a patientfriendly building (e.g. poor layout)
- Residents of Pensnett felt disadvantaged, because surrounding areas (Brierley Hill and Kingswinford) have multiple GP surgeries which are unavailable to Pensnett residents due to practice boundaries, but Pensnett has none
- Participants stated that location was more important than the quality of the building
- Participants requested greater engagement and conversation around this change
- It was queried whether the lease could be extended or whether 'levelling up' could be looked at as a source of funding to develop GP facilities in Pensnett
- The need to consider the demographics of the Pensnett area was highlighted. It was commented that 33% of children and 23% of old people live in poverty and life expectancy in the area is nine years lower than in neighbouring areas and that unemployment rate is much higher than the average across England
- The need to improve access to primary care was highlighted.

### 6.8 Feedback from correspondence

This section summarises themes raised in the five pieces of correspondence received. Four of the pieces of correspondence were sent by High Oak Surgery patients, and one was from a Councillor. The following themes were raised:

- Access to Brierley Hill Health and Social Care Centre was a key issue, particularly for elderly and vulnerable people. Concern over the cost of transport was also raised
- There was concern that neither option includes the return of the practice to the Pensnett and Brockmoor ward. It was raised that there is a need for the GP practice in Pensnett
- Concern over the terminology 'conversation' rather than 'consultation', with a feeling that this means that decisions have already been made
- Good quality of care at Brierley Hill Health and Social Care Centre was highlighted

- There is a need to consider that Pensnett has a growing population for example, with new housing developments
- Concern over the lack of accessible engagement meetings in Pensnett.

# 7 Conclusion

Overall, 36 (43%) respondents were very satisfied or satisfied with the range of services at High Oak Surgery, while 26 (31%) respondents were very satisfied or satisfied with the range of services available at Brierley Hill Health and Social Care Centre. Respondents shared positive feedback on the practice staff; however, they also highlighted difficulties accessing appointments.

A key theme across the survey and events was the need for GP services in Pensnett, with respondents and participants commenting that Brierley Hill is difficult to access, particularly for vulnerable or elderly people. It was also commented that the demographics of Pensnett, such as high levels of deprivation and a growing population, mean that a GP practice is necessary.

When considering the different options for the practice, a greater proportion of respondents preferred Option 1b (31 / 76%), the hub and spoke mode with some care in Pensnett, compared to Option1a (10 / 24%), the single site solution at Brierley Hill Health and Social Care Centre. However, respondents shared negative feedback on both options, commenting that neither option is viable and that the practice should return to Pensnett.

# 8 Appendix A

### 8.1 Survey respondent overview

#### Table 17. Are you responding as:

	No.	%
An individual	86	100%
A formal response from an organisation	-	-
Base	86	

Table 18. As an individual responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Patient or member of the public	86	100%
Carer	-	-
NHS employee	-	-
From another public sector organisation	-	-
From a health-related group, charity or organisation	-	-
From a non-health voluntary group, charity or organisation	-	-
Base	86	

Table 19. As an individual responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Formal response on behalf of an NHS organisation	-	-
Formal response on behalf of another public sector organisation	-	-
Formal response on behalf of a health-related group, charity or organisation	-	-
Formal response on behalf of a non-health related voluntary group, charity or organisation	-	-
Other	-	-
Base	-	

Table 20. Are you a registered patient at High Oak Surgery?

	No.	%
Yes, I am a registered patient	82	94%
I was a registered patient of High Oak Surgery but am not		
any more	2	2%
No, I have never been a registered patient of High Oak		
Surgery	3	3%
I am completing the survey on behalf of a registered patient	-	-
Base	87	

## 8.1 Event participant overview

#### Table 21. Are you responding as:

	No.	%
An individual	16	100%
A formal response from an organisation	-	-
Base	16	

#### Table 22. As an individual responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Patient or member of the public	16	100%
Carer	-	-
NHS employee	-	-
From another public sector organisation	-	-
From a health-related group, charity or organisation	-	-
From a non-health voluntary group, charity or organisation	-	-
Base	16	

#### Table 23. As an individual responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Formal response on behalf of an NHS organisation	-	-
Formal response on behalf of another public sector organisation	1	100%
Formal response on behalf of a health-related group, charity or organisation	-	-
Formal response on behalf of a non-health related voluntary group, charity or organisation	-	-
Other	-	-
Base	1	

#### Table 24. Are you a registered patient at High Oak Surgery?

	No.	%
Yes, I am a registered patient	14	88%
I was a registered patient of High Oak Surgery but am not any more	-	-
No, I have never been a registered patient of High Oak Surgery	2	12%
I am completing the survey on behalf of a registered patient	-	-
Base	16	

# 9 Appendix B

# 9.1 Survey respondent demographic profile

#### Table 25. Survey respondents

Table 25. Survey respondents			Sexual orientation		
Ethnicity White: British	71	87%	Sexual orientation Heterosexual	62	79%
	-	01 %	Lesbian		-
White: Irish				-	
White: Gypsy or traveller	-	-	Gay	-	-
White: Other	-	-	Bisexual	-	-
Mixed: White and Black Caribbean	-	-	Other	1	1%
Mixed: White and Black African	-	-	Prefer not to say	15	19%
Mixed: White and Asian	-	-	Base	78	
Mixed: Other	-	-	Relationship status		4-04
Asian/Asian British: Indian	1	1%	Married	39	47%
Asian/Asian British: Pakistani	-	-	Civil partnership	-	-
Asian/Asian British: Bangladeshi	1	1%	Single	7	8%
Asian/Asian British: Chinese	-	-	Divorced	5	6%
Asian/Asian British: Other	-	-	Lives with partner	9	11%
Black/Black British: African	-	-	Separated	1	1%
Black/Black British: Caribbean	-	-	Widowed	10	12%
Black/Black British: Other	-	-	Other	-	-
Other ethnic group: Arab	-	-	Prefer not to say	12	15%
Prefer not to say	9	11%	Base	83	
Base	82		Pregnant currently		
Age category			Yes	-	-
16 - 19	-	-	No	70	85%
20 - 24	2	2%	Prefer not to say	12	15%
25 - 29	1	1%	Base	82	
30 - 34	3	4%	Recently given birth		1
35 - 39	9	11%	Yes	-	-
40 - 44	5	6%	No	70	85%
45 - 49	2	2%	Prefer not to say	12	15%
50 - 54	5	6%	Base	82	1070
55 - 59	7	9%	Health problem or disabil		
60 - 64	13	16%	Yes, limited a lot	21	26%
65 - 69	11	13%	Yes, limited a little	17	20%
70 - 74	7	9%	No	44	54%
75 - 79	3	9% 4%	-	44	D4%
	11	13%	Prefer not to say Base	- 82	-
80 and over				62	
Prefer not to say	3	4%	Disability	40	040/
Base	82		Physical disability	12	21%
Religion	45	100/	Sensory disability	-	4.00/
No religion	15	19%	Mental health need	9	16%
Christian	49	62%	Learning disability or difficulty	-	-
Buddhist	-	-	Long-term illness	9	16%
Hindu	-	-	Other	2	3%
Jewish	-	-	Prefer not to say	25	43%
Muslim	1	1%	Base	58	
Sikh	1	1%	Carer		T
Any other religion	1	1%	Yes - young person(s) aged under 24	2	3%
Prefer not to say	12	15%	Yes - adult(s) aged 25 to 49	-	-
Base	79		Yes - person(s) aged over 50 years	8	10%
Sex / gender			No	51	66%
		2001/	Prefer not to say	16	21%
Male	24	29%			1
	24 48	29% 58%	Base	77	
Male				77	
Male Female	48		Base	77	-
Male Female Transgender Non-binary	48 -	58% -	Base Armed services		
Male Female Transgender	48 - -	58% - -	Base Armed services Yes	-	- 87% 13%

## 9.2 Event participant demographic profile

#### Table 26. Event participants

Table 26. Event participants Ethnicity			Sexual orientation		
White: British	14	88%	Heterosexual	10	77%
White: Irish	-	-	Lesbian	-	-
White: Gypsy or traveller	-	-	Gay	-	-
White: Other	_		Bisexual	_	-
Mixed: White and Black Caribbean	-		Other		_
Mixed: White and Black Calibbean		_	Prefer not to say	3	23%
Mixed: White and Asian	-	-	Base	13	2370
Mixed: Other	-	-	Relationship status	13	
Asian/Asian British: Indian	_	_	Married	7	44%
Asian/Asian British: Pakistani	_	_	Civil partnership	-	-
Asian/Asian British: Bangladeshi	-	-	Single	- 1	- 6%
Asian/Asian British: Chinese	-	-	Divorced	-	0 /0
Asian/Asian British: Other				2	- 13%
	-	-	Lives with partner	2	13%
Black/Black British: African	-	-	Separated	-	-
Black/Black British: Caribbean	-	-	Widowed	5	31%
Black/Black British: Other	-	-	Other	-	-
Other ethnic group: Arab	-	-	Prefer not to say	1	6%
Prefer not to say	2	13%	Base	16	
Base	16		Pregnant currently		I
Age category		1	Yes	-	-
16 - 19	-	-	No	11	92%
20 - 24	1	7%	Prefer not to say	1	8%
25 - 29	-	-	Base	12	
30 - 34	-	-	Recently given birth		
35 - 39	1	7%	Yes	-	-
40 - 44	1	7%	No	12	92%
45 - 49	-	-	Prefer not to say	1	8%
50 - 54	-	-	Base	13	
55 - 59	-	-	Health problem or disabili	ty	·
60 - 64	1	7%	Yes, limited a lot	4	29%
65 - 69	1	7%	Yes, limited a little	4	29%
70 - 74	1	7%	No	6	43%
75 - 79	1	7%	Prefer not to say	-	-
80 and over	1	7%	Base	14	
Prefer not to say	1	7%	Disability		1
Base	15		Physical disability	4	44%
Religion			Sensory disability	4	44%
No religion	4	25%	Mental health need	1	11%
Christian	9	56%	Learning disability or difficulty	-	-
Buddhist	-	-	Long-term illness	1	11%
Hindu	-	-	Other	-	-
Jewish	-	_	Prefer not to say	2	22%
Muslim	-	-	Base	9	2270
Sikh	_	-	Carer		I
Any other religion	-	-	Yes - young person(s) aged under 24	-	-
Prefer not to say	3	19%	Yes - adult(s) aged 25 to 49	-	-
Base	16	13/0	Yes - person(s) aged over 50 years	- 2	- 15%
	10		No	10	77%
Sex / gender Male	3	19%	Prefer not to say	10	8%
	<u> </u>			-	070
Female		75%	Base	13	
Transgender	-		Armed services	1	70/
Non-binary	-	-	Yes		7%
Prefer not to say	1	6%	No	12	80%
Other	-	-	Prefer not to say	2	13%
Base	16		Base	15	

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