

Using your GP practice during the pandemic



Engagement report

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Introduction

NHS Wakefield Clinical Commissioning Group (CCG) plans and buys healthcare for local people and, as such, wants to hear about patients' experiences of using GP services during the COVID-19 pandemic.

The COVID-19 pandemic has changed the way GP practices work, using different ways to support patients to keep them safe at home. This includes using digital methods such as video and phone calls instead of face to face appointments, offering a telephone triage service and the use of online consultation in order to seek medical advice. Some GP services like clinics and health checks have been suspended during the pandemic.

NHS Wakefield CCG engaged with patients that have used their GP practice during the pandemic to establish what worked well and what could be improved.

Questionnaire and methodology

The questionnaire was designed by NHS Wakefield CCG and was delivered via Survey Monkey. A copy of the questionnaire can be found in **Appendix 1**. In total, 3,972 questionnaires were completed. Surveys were available online and as printed copies at GP practices, including posters and cards with online link and QR code.

Enventure Research was commissioned to undertake all the coding of the open-ended responses and report on the findings.

Interpreting the research findings

This report contains results from a quantitative survey and contains several tables and charts that present survey findings. In some instances, responses may not add up to 100%. There are several reasons why this might happen:

- The question may have allowed each respondent to give more than one answer
- Only the most common responses may be shown in the table or chart
- Individual percentages are rounded to the nearest whole number so the total may come to 99% or 101%
- A response of between 0% and 0.5% will be shown as 0%. Where there were no respondents in a category, this is shown as -.

This report includes some subgroup analysis that has been undertaken to explore the results provided by different groups such as those who shielded, age, gender, disability and PCN area (as the number of responses per GP practice varies considerably from 1 to 401, making it difficult for comparisons to be made). This subgroup analysis, therefore, has only been carried out where the sample size is seen to be sufficient for comment.

Differences that are statistically significant according to the z-test at the 95% confidence level are highlighted in the subgroup analysis boxes. The z-test is a commonly used statistical test used to highlight whether differences in results are 'significant'. By this we mean that we can say with 95% confidence that we would see a difference if all people in the group took part in the consultation. It should be noted that the percentages shown in the subgroup analysis reflect the proportion of the subgroup that answered the question and gave a particular response.

For the analysis of open-end responses, comments were read through by a researcher and a coding frame was developed for each open-end question based on the themes emerging. This then allowed for categorisation of the themes.

Survey Findings

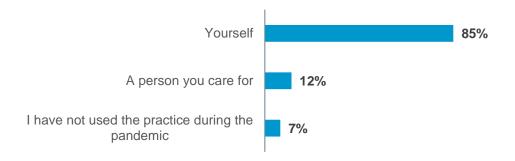
1. Using your GP practice during COVID-19

Contacting your GP practice

Respondents were asked who they had contacted the GP practice for. The majority (85%) had contacted it for themselves, with one in eight (12%) contacting the practice for a person they cared for. The remaining 7% of respondents said they had not used the practice during the pandemic. These findings are shown in **Figure 1**.

Figure 1 – (Q1) Did you contact the practice for?

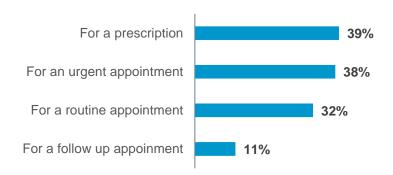
Base: 3.935



When subsequently asked why they had contacted the practice, 39% said it was for a prescription, 38% said it was for an urgent appointment, 32% for a routine appointment and 11% for a follow up appointment. These findings are shown in **Figure 2**.

Figure 2 – (Q2) Why did you contact your GP practice?

Base: 3,138

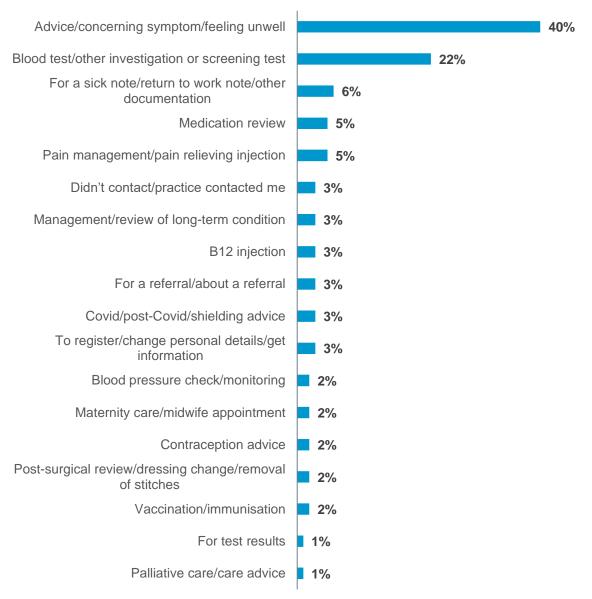


Sub-group analysis

- Respondents shielding were more likely to be contacting their GP practice for a prescription than those who were not shielding (46% compared with 37%)
- Female respondents were more likely to contact their GP practice for an urgent appointment (42%) and a routine appointment (35%) when compared with male respondents (36% and 29% respectively)
- Older respondents (55+) were less likely to contact their GP practice for an urgent appointment than respondents in younger age groups (35% respectively compared with 39% overall)

Some respondents provided a different reason for contacting their GP practice. As shown in **Figure 3**, 40% of respondents providing a different reason said they contacted their GP practice for advice, for a concerning a symptom or because they felt unwell. A further 22% said it was regarding a blood test or for another investigation or screening test. Several other responses were also provided and are shown in **Figure 3** below.

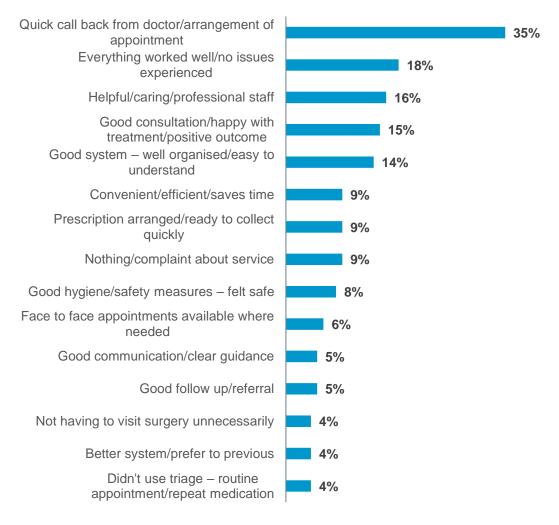
Figure 3 – (Q2a) Why did you contact your GP practice – for something else? Base: 831



Respondents were then asked to rate their experience of using the triage system at the GP practice. As shown in **Figure 4**, just over a third (35%) of respondents said they had received a quick call back from the doctor or were able to arrange an appointment quickly. A further 18% said everything worked well and 16% said the staff were helpful, caring and professional. A small proportion of respondents (4%) said they did not use the triage system. Other responses are listed in **Figure 4** below.

Figure 4 – (Q3a) Based on your experience of using the triage system, please tell us what worked well?

Base: 2,431

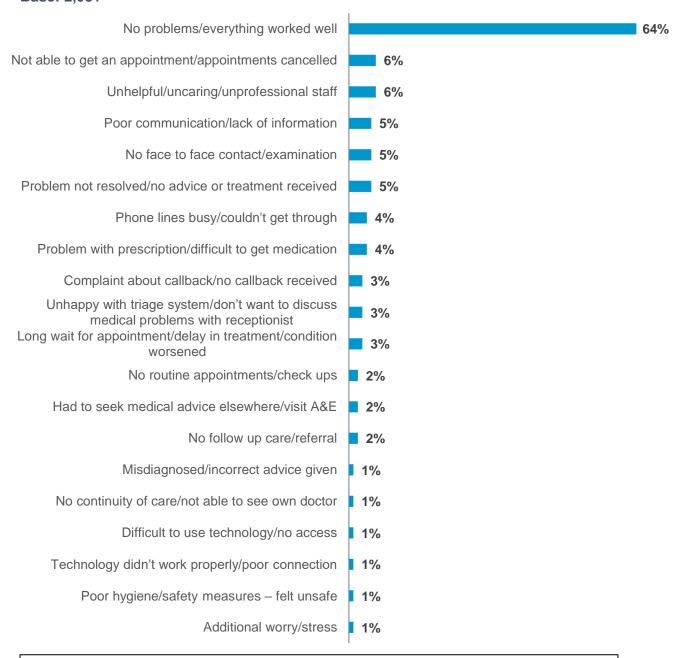


Sub-group analysis

- Respondents in the Brigantes PCN area were more likely to say they had a quick call back from the doctor/arrangement of an appointment than respondents in other PCN areas (47% compared with 35% overall)
- Respondents aged 65 + were more likely to say that everything worked well/no issues experienced (21%) than respondents aged 45 to 54 (15%), 35 to 44 (14%) and 25 to 34 (9%)

Respondents were also invited to identify if they had any problems whilst using the triage system. Almost two-thirds (64%) of respondents that answered this question said they did not have any problems and everything worked well. However, 6% said they were unable to get an appointment or had experienced cancelled appointments, and a further 6% said staff were unhelpful, uncaring or unprofessional. Other responses included poor communication or local of information, no face to face contact or examination, problem not resolved, and that the telephone lines were busy and they could not get through to the practice. These findings are shown in **Figure 5**.

Figure 5 – (Q3ab) Please tell us if you had any problems? Base: 2.081



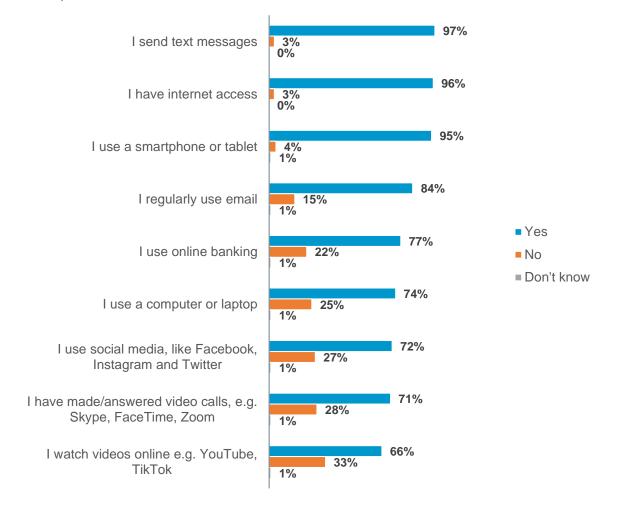
Sub-group analysis

 Respondents in the Wakefield Health Alliance Central PCN area were more likely to say phone lines busy/could not get through (9% when compared with respondents in other PCN areas (4% overall)

2. Digital technology

Respondents were asked what digital technology they used at home. Sending text messages was done by the largest proportion of respondents, with 97% saying they did this. Nearly all (96%) respondents said they had internet access and 95% said they used a smartphone or tablet. Two thirds (66%) of respondents said they watched videos online (e.g. YouTube and TikTok). These findings are shown in **Figure 6**.

Figure 6 – (Q5) What digital technology do you use at home? Base: 2,304

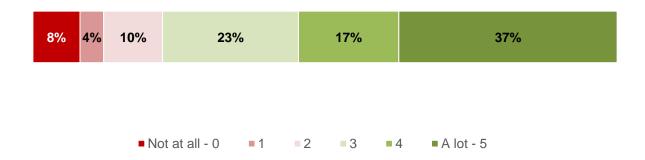


Sub-group analysis

- Disabled responds are less likely to have *internet access* compared with respondents that are not disabled (94% compared with 98%)
- Respondents aged 65+ were the least likely to use a smartphone or tablet (91% compared with 95% overall)
- Respondents in the Brigantes PCN were most likely to use a computer or laptop (82% compared with 74% overall)
- Respondents in the Wakefield Health Alliance South PCN area had the lowest level of sending text messages (94% compared with 97% overall)
- Respondents aged 65+ were the least likely to *watch videos online*, *e.g. YouTube and TikTok* (51% compared with 66% overall)
- Respondents aged 65+ were the least likely to use online banking (69% compared with 77% overall)
- Respondents shielding were less likely to regularly use email compared with those not shielding (78% compared with 87%)
- Older respondents aged 65+ were the least likely to regularly use email (79% compared with 84% overall)
- Respondents shielding were the least likely to have made or answered video calls when compared with those not shielding (64% compare with 74%) and females were more likely to have made or answered video calls than males (78% compared with 68%)
- Older respondents (55-64 and 65+) were the least likely to have made or answered video calls (70% and 66% respectively), compared with younger age groups, particularly those aged 16-24 (90%) and 25-34 (91%)

Respondents were then asked to rate how much easier digital technology could make accessing healthcare to them on a scale of 0 to 5, where 0 is 'not at all' and 5 is 'a lot'. Almost two in five (37%) rated this as a 5 and a further 17% provided a rating of 4. One in twelve (8%) respondents gave a rating of 0. These findings are shown in **Figure 7**.

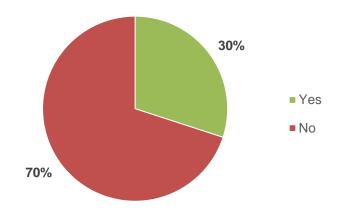
Figure 7 – (Q6) How much could digital technology make access to health care easier for you? With 0 being 'not at all' to 5 being 'a lot')
Base: 2,304



3. Video consultations

Three in ten (30%) respondents said they knew their GP Practice used video consultations and 9% of respondents said they had carried out a video consultation appointment with a GP or nurse. These findings are shown in **Figures 8 and 9.**

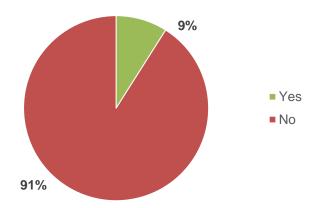
Figure 8 – (Q7) Did you know your GP Practice uses video consultations? Base: 2,874



Sub-group analysis

- Respondents in the Brigantes PCN area were the least likely to know that their GP practice uses video consultations (22% compared with 30% overall)
- The highest level of awareness of GP practices using video consultations was in Five Towns PCN area (37%) and Wakefield Health Alliance South PCN area (36%)

Figure 9 – (Q8) Have you had a video consultation GP/nurse appointment? Base: 2,886

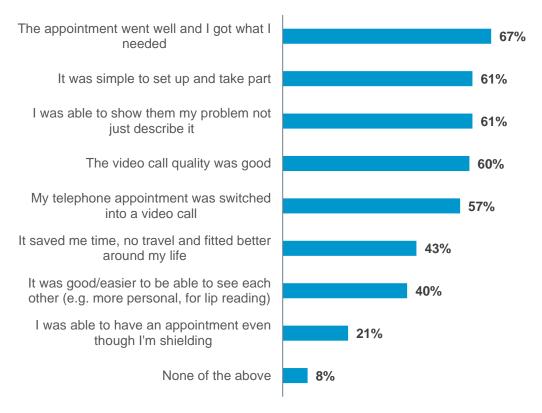


Sub-group analysis

 The highest proportion of video consultations was for those in the 25-34 age group (16%) compared with 9% overall

Of the respondents that had used a video consultation, two-thirds (67%) said the appointment went well and they got what they needed. A further 61% said the process was simple to set up and take part in, and the same proportion (61%) were able to show the GP or nurse their problem rather than just having to describe it. Three in five (60%) respondents said the video call quality was good. One in five (21%) respondents said they were able to have their appointment despite having to shield. These findings are shown in **Figure 10**.

Figure 10 – (Q9) If yes [have used a video consultation], please tell us what worked well. Base: 243



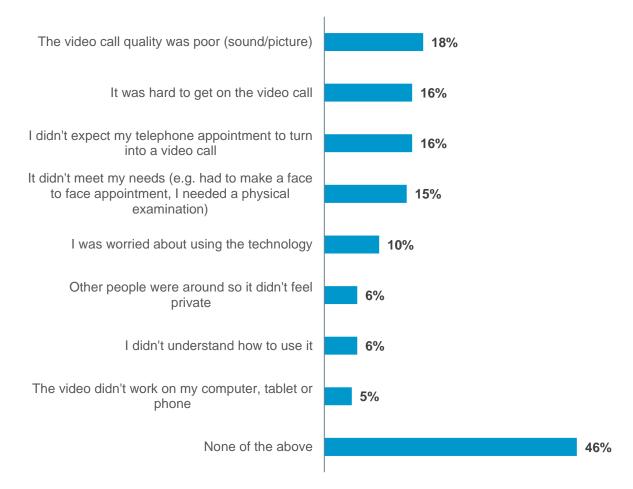
Sub-group analysis

- Respondents aged 65+ were less likely to say it was simple to set up and take part (42%) than respondents aged 25-34 (72%), 45-54 (69%) and 55-64 (70%)
- Respondents in the Wakefield Health Alliance North PCN area were the most likely to say the video call quality was good (90% compared with 61% overall), the appointment went well and I got what I needed (90% compared with 68% overall) and it was simple to set up and take part (90% compared with 62% overall)

Respondents were also asked if there was anything that didn't work well during the video consultation. Almost one in five (18%) of those responding to this question said the video call quality was poor. A further 16% said it was hard to get on the video call and another 16% said they didn't expect their telephone appointment to turn into a video call. Other points made included worrying about the technology, the feeling of lack of privacy and not being able to understand the technology. These findings are shown in **Figure 11**.

Figure 11 – (Q9) If yes [have used a video consultation], please tell us what didn't work well.

Base: 170



Respondents that said they did not have a video consultation were asked to explain why. Two-thirds (68%) of respondents said they were simply not offered a video consultation and 14% said they were told they needed to be seen instead. A total of 4% of respondents were offered a video consultation but either didn't want one (2%), didn't have the equipment (1%) or were worried about using the technology (1%). These findings are shown in **Figure 12**. Other reasons are listed in **Figure 13** below.

Figure 12 – (Q9) If you did not have a video consultation, please tell us why. Base: 2,347

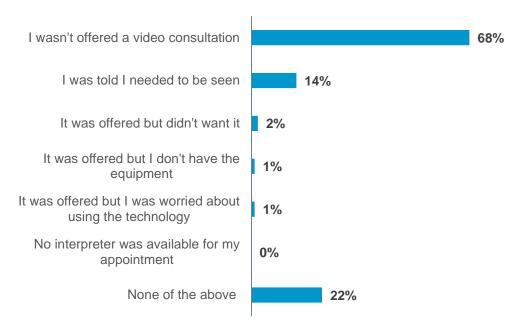


Figure 13: Other reasons for not having a video consultation Base 287

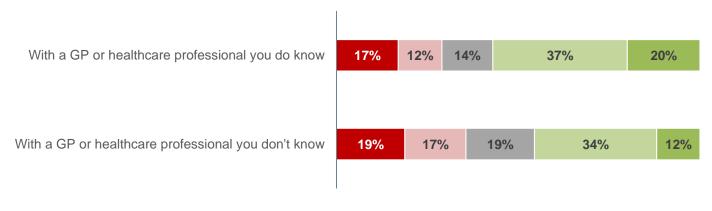
| Comment | Number of responses |
|---|---------------------|
| Didn't need one/phone call was sufficient | 190 |
| Needed blood test/injection/investigate | 79 |
| Not able to use such technology | 21 |
| Deaf/hard of hearing | 4 |

Sub-group analysis

 Respondents in the Brigantes PCN area were more likely to say they were not offered a video consultation (74%) compared with respondents in Wakefield Health Alliance South (66%) and Wakefield Health Alliance North (67%) PCN areas

Respondents were asked how comfortable they would be using video consultations with a GP or healthcare professional they do know or a GP or healthcare professional they don't know for some appointments instead of going to the practice. As shown in **Figure 14**, almost three in five (57%) said they would be either comfortable (37%) or very comfortable (20%) to have a video consultation with a GP or healthcare professional they know. However, with a GP or healthcare professional they don't know, 34% said they would be comfortable and 12% said very comfortable, giving a combined response of 46%. Essentially, respondents were slightly less comfortable using a video consultation with a GP or healthcare professional that they didn't know.

Figure 14 – (Q10) How comfortable would you be using video consultations for some appointments instead of going to the practice, with a GP or healthcare professional you already know and have met and with a GP or healthcare professional you don't know? Base: 2,508



■ Very uncomfortable ■ Uncomfortable ■ Neither comfortable or uncomfortable ■ Comfortable ■ Very comfortable

Sub-group analysis

With a professional they do know

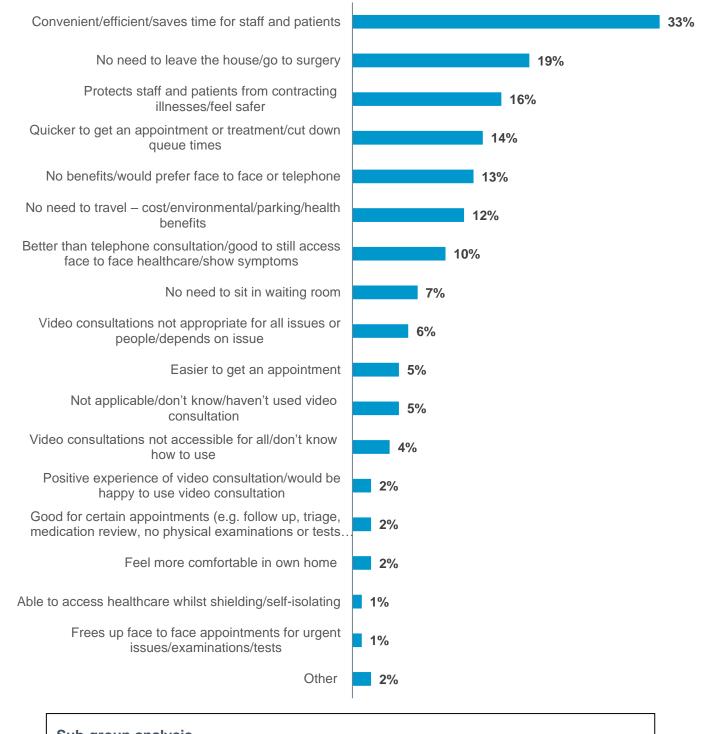
- Respondents aged 65+ were the least likely to be *very comfortable* (18%) compared with respondents aged 35-44 (27%) and 45-54 (25%)
- Respondents who have been shielding were more likely to feel somewhat uncomfortable (very uncomfortable or uncomfortable) than those not shielding (33% compared with 27%)
- Respondents who have a disability were more likely to feel somewhat uncomfortable (very uncomfortable or uncomfortable) than those who have not got a disability (34% compared with 25%)

With a professional they do not know

 Respondents aged 65+ were more likely to be somewhat uncomfortable (very uncomfortable or uncomfortable) (37%) compared with respondents aged 25-34 (24%) and 35-44 (29%)

Wakefield CCG wanted to explore what impact a video consultation has on a respondents and their family. As shown in **Figure 15**, a third (33%) of respondents said it was convenient, efficient and saved time for staff and patients. A further one in five (19%) said there was no need to leave the house or go to the surgery and 16% said it protected staff and patients from contracting illnesses, so they felt safer.

Figure 15 – (Q11) We want to understand what impact using a video consultation could have on your family. Please tell us what the benefits might be. Base: 1,855

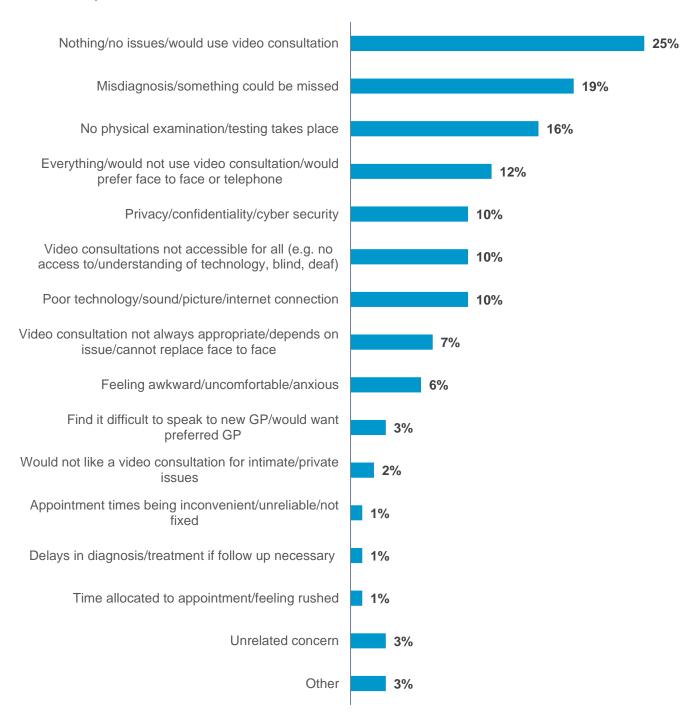


Sub-group analysis

• Respondents not shielding were more likely to say it was *convenient/efficient/saves time* for staff and patients than respondents shielding (36% compared with 24%)

Wakefield CCG also wanted to explore what might worry respondents about using a video consultation. As shown in **Figure 16**, a quarter (25%) of respondents to this question said they did not have any concerns about using a video consultation. However, one in five (19%) respondents said they were concerned that they could have a misdiagnosis or that something could be missed. A further 16% said they were concerned that they would be unable to have a physical examination and that testing could not take place. Other responses are shown in **Figure 16**.

Figure 16 – (Q11) We want to understand what impact using a video consultation could have on your family. Please tell us what might worry you. Base: 1,690



Sub-group analysis

- Male respondents were more likely to say nothing/no issues/would use video consultation than female respondents (31% compared with 21%)
- Female respondents were more likely to be concerned about *misdiagnosis/something* could be missed than male respondents (22% compared with 16%) and that no physical examination/testing takes place (19% compared with 14%)

Respondents were asked what they would feel comfortable about discussing via video consultation. As shown in **Figure 17**, just over seven in ten (72%) respondents that answered this question said they would feel comfortable if they had a minor physical illness or injury, 70% said they would feel comfortable about receiving advice on an ongoing problem such as diabetes, asthma or high blood pressure, and the same proportion (70%) were happy to discuss a possible infection such as chest or urine infection. Smaller proportions of respondents said they would be happy to discuss about their emotional health (56%) or an ongoing mental health problem (51%). Other responses provided are shown in **Figure 18** below.

Figure 17 – (Q12) We understand people might be less happy to use video consultations for some heath issues. We would like to know what you might feel comfortable about. We have made a list of common health issues. Please tell us if you would be comfortable about any of these on a video consultation.

Base: 2,543

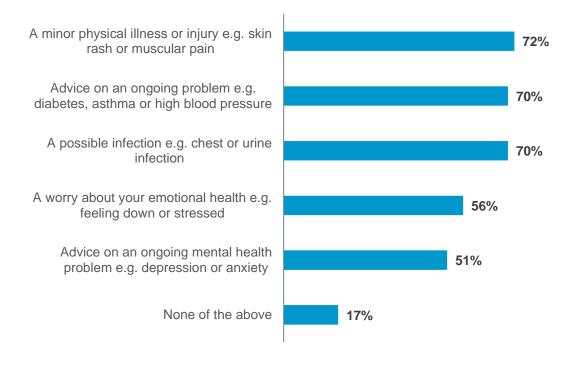


Figure 18 – (Q12) Other responses Base: 95

| Comment | Number of responses |
|--|---------------------|
| Nothing/face to face preferred | 38 |
| Anything/any medical issues | 24 |
| Anything that doesn't require a physical examination/testing | 11 |
| Would need safeguards to feel comfortable (e.g. speaking with a known doctor, ability to speak to a female doctor) | 8 |
| Anything which would not be embarrassing (e.g. intimate problems, bowel problems) | 7 |
| Medication advice/repeat prescriptions | 4 |
| Test results/hospital follow ups | 4 |
| Women's health/pregnancy/contraception | 3 |
| Advice for/regarding others (e.g. children) | 2 |

Wakefield CCG wanted to explore what would make patients feel more comfortable about using video consultation. The most common response, provided by almost three in five (57%) respondents, was knowing that if needed, they could be seen or have tests arranged. A further 51% said they would feel more confident being able to book a video consultation at a time that suits them, and 47% said they would like to be able to see their usual GP or nurse or be seen sooner (also 47%). Just under a quarter (23%) of respondents said they would like support to set up video consultations. These results are shown in **Figure 19**, with other responses in **Figure 20**.

Figure 19 – (Q13) What would help you feel more comfortable or confident about using video consultations?

Base: 2,477

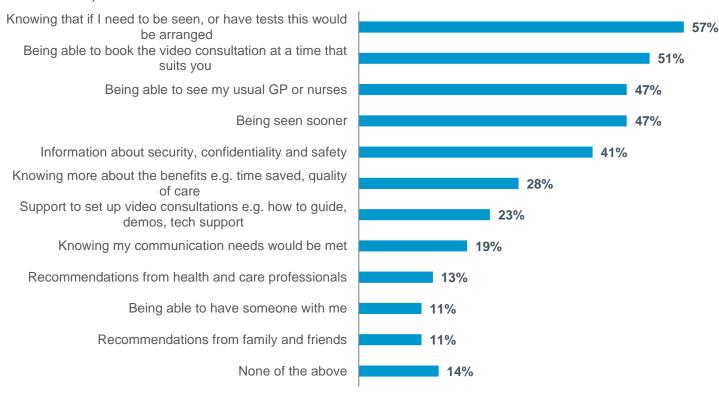


Figure 20 – Q13 Other Base: 68

| Comment | Number of responses |
|--|---------------------|
| Nothing/would not feel comfortable/prefer face to face | 31 |
| Already feel comfortable/no further assurances needed | 23 |
| Consistent quality of care/reassurance that the system works | 7 |
| Clear guidance/information on practice website | 4 |
| Familiar surroundings/being in own home/having privacy | 2 |
| Having the right equipment/internet access | 2 |

Sub-group analysis

Being able to book appointments online

Disabled respondents were more likely to say they would be more comfortable if they
could book the video consultation at a time that suit them (55% compared with 43%)
and being able to have someone with them (18% compared with 10%)

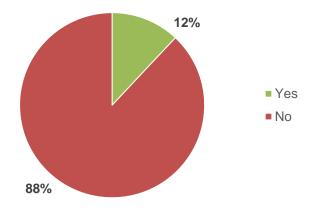
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4. Online consultation

Online consultation is a new way for patients to contact their GP practice and ask for nonurgent health advice. To access this service, patients need to click a link on the practice website, ask their question, and they will receive an answer via text, email or phone call.

Respondents were asked if they had used the online consultation facility to ask their GP practice for advice. Of the respondents that answered this question, one in eight (12%) said they had used it. This is shown in **Figure 21**.

Figure 21 – (Q14) Have you used online consultation to ask your GP practice for advice? Base: 2,575



Sub-group analysis

 Respondents in the Brigantes PCN area had the lowest proportion of respondents that had used online consultation to ask their GP practice for advice (8% compared with 12% overall)

Those respondents that said they had used online consultation were subsequently asked what their experience was like. As shown in **Figure 22**, two-thirds (66%) said it worked well and was easy to use, and two in five (42%) said it saved time and was convenient. A further 41% said they had received a quick reply. Other responses are shown in **Figure 23**.

Figure 22 – (Q15) If yes, how was it for you? Base: 350

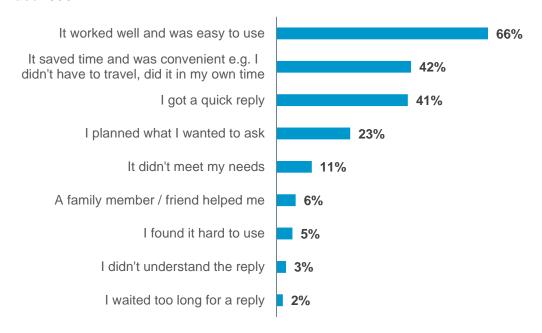


Figure 23 - Other responses

Base: 39

| Comment | Number of responses |
|--|---------------------|
| Have not used online consultation/not applicable | 20 |
| Experience technical difficulties | 3 |
| Complaint about service | 3 |
| Still awaiting responses | 2 |
| Concern about triage receptionist | 2 |
| Other | 10 |

Respondents that had not used the online consultation were asked why not. As shown in **Figure 24**, almost four in five (78%) respondents said they simply did not know that their practice had online consultation and 14% said they preferred to get health advice another way. All other responses are shown in **Figure 25**.

Figure 24 – (Q15b) If no, why did you not use online consultation? Base: 1,879



Figure 25 - Other responses Base 244

| Comments | Number of responses |
|---|---------------------|
| Have not needed to use online consultation | 149 |
| Sought advice via alternative method (telephone call, face to | |
| face) | 26 |
| Online consultation not appropriate for particular | |
| issues/needed physical examination or test | 19 |
| Online consultation was not offered | 18 |
| Find it difficult to use technology/would need assistance | 12 |
| Have not wanted to use online consultation | 6 |
| No access to internet/technology | 6 |
| Concern about misinterpretation/misunderstanding | 2 |
| Other | 12 |

Sub-group analysis

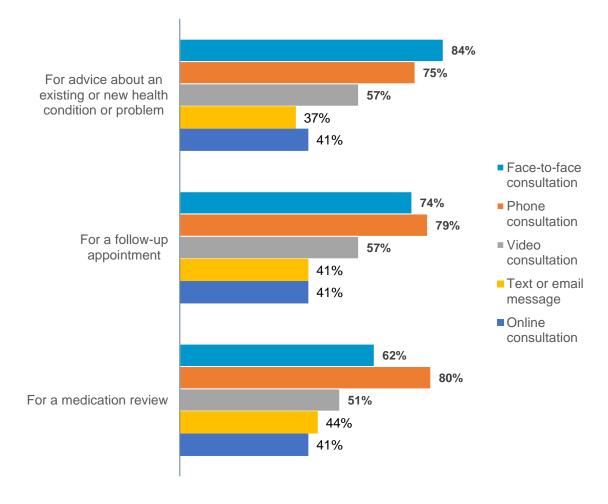
- Respondents who did not have a disability were more likely to say they did not know their practice offered online consultations than those who did have a disability (81% compared with 72%)
- Respondents aged 65+ were most likely to say they prefer to get health advice another way (18% compared with 14% overall) and that they find it complicated (9% compared with 5% overall)

5. Making an appointment

During the pandemic, some health and care services have run appointments differently, including using digital technology. Wakefield CCG wanted to establish what types of appointments patients would be comfortable to use. As shown in **Figure 26**, overall, traditional consultation methods were preferred by respondents. Face-to-face consultation was the most common response, with 84% saying they would be happy to do this for advice about an existing or new health condition or problem. Four in five (79%) of respondents said they would be happy for a follow up appointment via phone consultation. Two in five (41%) respondents were happy for all types of support to be received via online consultation.

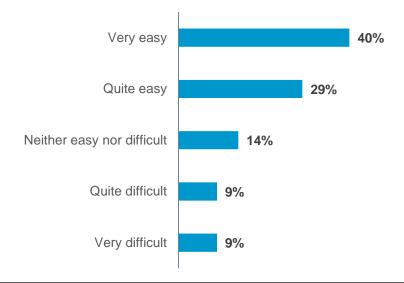
Figure 26 – (Q16) During the pandemic, some health and care services have run appointments differently, including using digital technology. We want to know if you would be comfortable to use any to get support from your health care professional for:

- Advice about an existing or new health condition (Base 2,497)
- A follow-up appointment (Base 2,466)
- A medical review (Base 2,488)



With the changes to services offered, Wakefield CCG wanted to understand what impact this has had on patients and their families. Initially, respondents were asked how easy it was to get an appointment. Seven in ten (69%) said it was easy (29% *quite easy* and 40% *very easy*). Almost one in five (18%) respondents said it was difficult to get an appointment (9% *quite difficult* and 9% *very difficult*). These findings are shown in **Figure 27**.

Figure 27 – (Q17a) How easy was it to get an appointment? Base: 2,418



Sub-group analysis

- Respondents who have a disability found it more difficult (*very difficult* and *quite difficult*) to get an appointment than respondents who did not have a disability (25% compared with 16%)
- Respondents in Brigantes PCN area found it the easiest to get an appointment (78% very easy or quite easy compared with 69% overall)

Respondents were subsequently asked if there was anything that could have made the process of getting an appointment easier. As shown in **Figure 28**, just over two in five (42%) said knowing about different ways of getting help from their practice would have helped and 37% said knowing about the changes would have helped. A further 37% also said they didn't want to bother the practice as they thought it was so busy. Other responses are shown in **Figure 29**.

Figure 28 – (Q17a) Would anything have made it easier? Base: 1,475



Figure 29 – (Q17a) Other

Base: 299

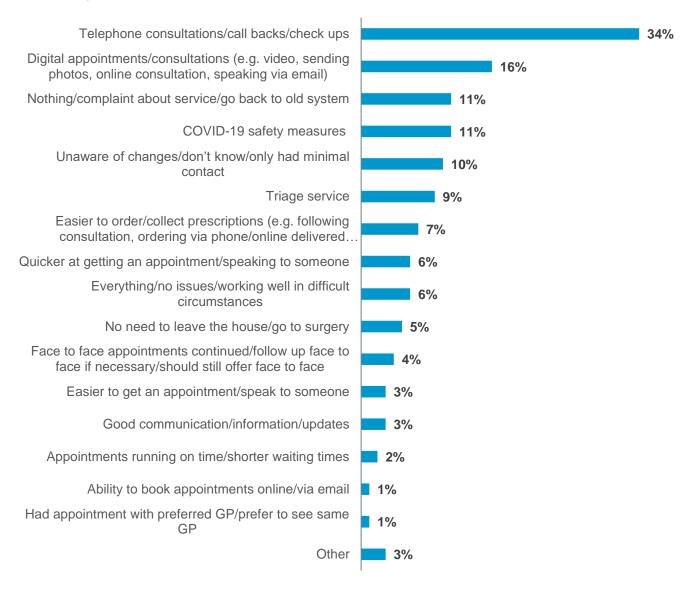
| Comment | Number of responses |
|--|---------------------|
| Nothing/everything worked well/good service | 97 |
| Not applicable/have not needed an appointment | 41 |
| Staff to listen to patient needs and be more helpful/caring/professional | 32 |
| Answer calls quicker/phone queue too long | 27 |
| Could not get an appointment | 20 |
| Complaint about service/go back to old system | 19 |
| Quicker appointments needed/waited too long | 18 |
| More appointments/better appointment times | 16 |
| More GPs available/want choice of GP | 10 |
| Time given for telephone consultations/call back should be improved (e.g. call on time, provide shorter time window) | 9 |
| Alternative type of appointment/consultation preferred (e.g. with GP instead of nurse, face to face) | 9 |
| Other | 25 |

Sub-group analysis

 Respondents in West Wakefield PCN area were more likely than respondents in most other PCN areas to say it would be easier if they knew about the changes to their practice (e.g. opening hours, arranging prescriptions, what services were still happening (46% compared with 37% overall)

Figure 30 shows was respondents liked. A third (34%) of respondents thought the telephone consultations, call backs and check ups were good, and 16% thought the digital appointments and consultations were good. One in ten (11%) were happy with the COVID-19 safety measures.

Figure 30 – (Q18) What has your GP practice introduced during COVID-19 that you would you like to keep using/happening? Tell us about this and why you like it Base: 1,273



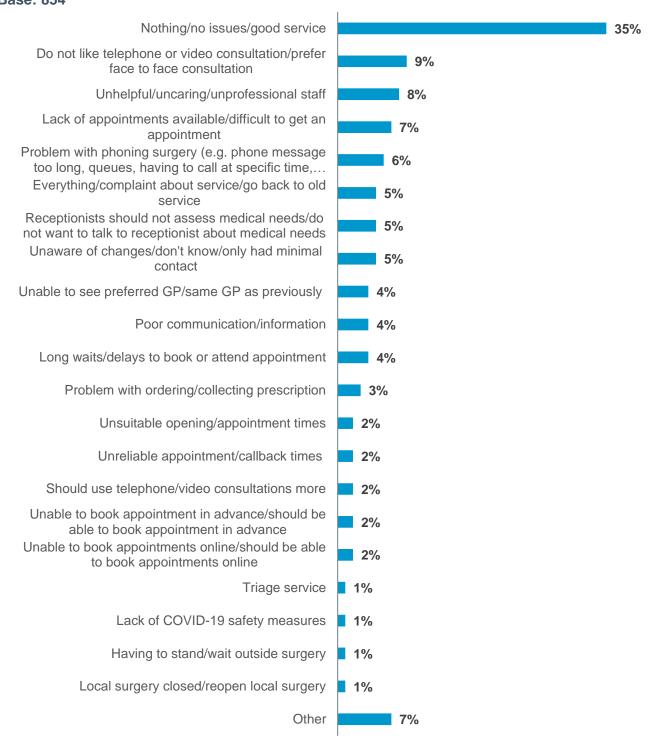
Sub-group analysis

Respondents in the Wakefield Health Alliance North and Brigantes PCN areas were the
most likely to say they liked telephone consultations/call backs/check ups (45% and 42%
respectively, compared with 34% overall)

Wakefield CCG also wanted to know if there was anything that patients would like to stop using or being undertaken at their GP practice. Just over a third (35%) of respondents said nothing and that they had received a good service. However, 9% said they did not like the telephone or video consultation as they preferred having face to face consultations and a further 8% said the staff were unhelpful, uncaring, or unprofessional. A slightly smaller proportion of respondents (7%) said there was a lack of appointments available as it was difficult to get an appointment. Several other comments were made, which can be found in **Figure 31**.

Figure 31 – (Q18) Is there anything that you would like to stop using / happening at your practice?

Base: 854

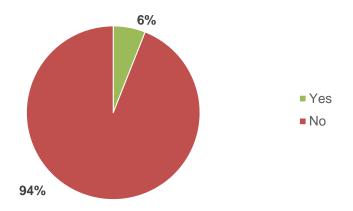


Using other GP practices

When asked if they had used another GP practice during the pandemic, 6% said they had. Of those that had, over two in five (45%) said their appointment ran smoothly, and a third (32%) said it worked well for them. Just over a quarter (27%) said they felt anxious about going somewhere different and one in five (21%) said they were worried about COVID-19. These findings are shown in **Figures 32 and 33**. Other responses are listed in **Figure 34**.

Figure 32 – (Q19) During the pandemic, some services were provided at other GP practices, like the COVID-10 Assessment Units. Did you use a practice that wasn't your own?

Base: 2,425



Sub-group analysis

 Respondents in Five Towns PCN area were the least likely to say that they had used a practice that was not their own (86% compared with 94% overall)

Figure 33 – (Q20) How did you find using a different practice? Base: 225

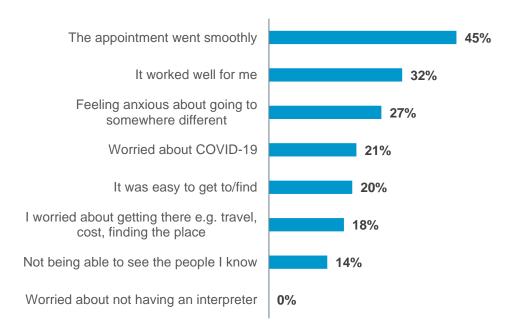


Figure 34 – (Q20) Other

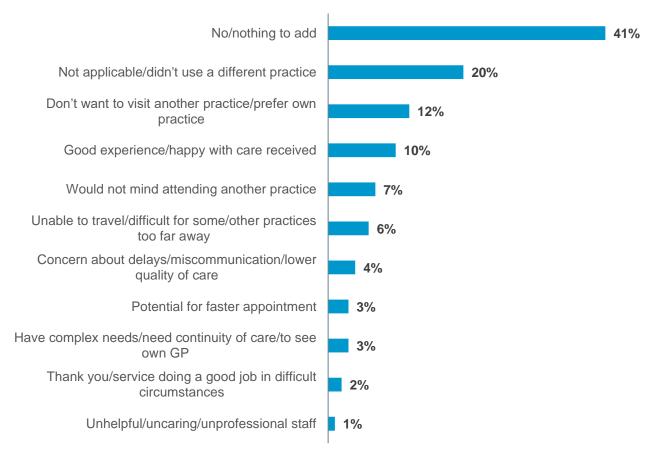
Base: 120

| Comment | Number of responses |
|---|---------------------|
| Didn't go to/use a different practice 111 | 111 |
| Poor experience (poor communication, staff, hygiene | |
| measures etc.) 5 | 5 |
| Difficult to get to/find 3 | 3 |
| Would have preferred to visit my own practice 1 | 1 |

Respondents were finally asked if they had anything else to add about going to a different practice. One in eight (12%) said they did not want to visit another practice and preferred their own, but 10% said they had a good experience and were happy with the care they received. These findings are shown in **Figure 35.**

Figure 35 – (Q21) Is there anything else you want to tell us about going to a different practice?





Survey respondent profile

Figures 36 to 58 show the respondent profile, including whether they were.

Figure 36 – (Q4) During COVID-19 have you been advised by the government of NHS that you need to stay home and not have contact with people, such as getting a shielding letter or text?

Base: 2,304

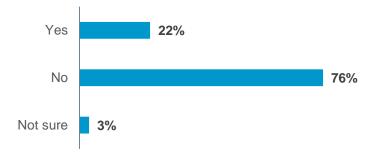


Figure 39 – Who is this form about?

Base: 2,175

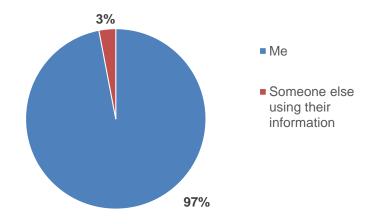


Figure 37 – Responses by PCN area

Base: 2,336

| PCN Area | Responses |
|-----------------------------------|-----------|
| Brigantes | 450 (19%) |
| Five Towns | 402 (17%) |
| Trinity Health Group | 145 (6%) |
| Wakefield Health Alliance North | 342 (15%) |
| Wakefield Health Alliance Central | 327 (14%) |
| Wakefield Health Alliance South | 374 (16%) |
| West Wakefield | 290 (12%) |
| Other | 6 (0%) |

Figure 37 – GP Practices Base: 2,336

| GP Practice | Responses | PCN Area |
|-------------------------------|-----------|----------------------------------|
| Alverthorpe Surgery | 3 | Brigantes |
| Ashgrove Medical Centre | 173 | Wakefield Heath Alliance Central |
| Castleford Medical Centre | 40 | Five Towns |
| Chapelthorpe Medical Centre | 4 | West Wakefield |
| Church Street Surgery | 3 | West Wakefield |
| Church View Health Centre | 6 | N/A |
| College Lane Medical Centre | 2 | Wakefield Health Alliance South |
| Crofton & Sharlston Surgery | 119 | Trinity Health Group |
| Dr Diggle & Phillips | 7 | Wakefield Health Alliance South |
| Dr Singh & Partners | 156 | Wakefield Health Alliance South |
| Friarwood Medical Centre | 20 | Wakefield Heath Alliance Central |
| Health Care First Partnership | 283 | Five Towns |
| Henry Moore Clinic | 311 | Wakefield Heath Alliance North |
| Homestead Clinic | 8 | Brigantes |
| Kings Medical Practice | 2 | Five Towns |
| Lupset Medical Centre | 275 | West Wakefield |
| Maybush Medical Centre | 2 | Trinity Health Group |
| Middlestown Medical Centre | 1 | West Wakefield |
| New Southgate Surgery | 36 | Brigantes |
| Northgate Medical Centre | 132 | Wakefield Heath Alliance Central |
| Orchard Croft Medical Centre | 4 | West Wakefield |
| Outwood Park | 401 | Brigantes |
| Park View Surgery | 13 | Five Towns |
| Patience Lane Surgery | 30 | Five Towns |
| Prospect Surgery | 3 | West Wakefield |
| Queen Street Surgery | 34 | Five Towns |
| Riverside Medical Centre | 10 | Wakefield Heath Alliance North |
| St Thomas Road | 8 | Wakefield Heath Alliance North |
| Stanley Health Centre | 2 | Brigantes |
| Station Lane Medical Centre | 4 | Wakefield Heath Alliance North |
| Stuart Road Medical Centre | 2 | Wakefield Heath Alliance Central |
| The Grange Medical Centre | 5 | Wakefield Health Alliance South |
| Tieve Tara Medical Centre | 9 | Wakefield Heath Alliance North |
| Trinity Health Group | 24 | Trinity Health Group |
| White Rose Medical Centre | 204 | Wakefield Health Alliance South |

Figure 40 – What is your gender?

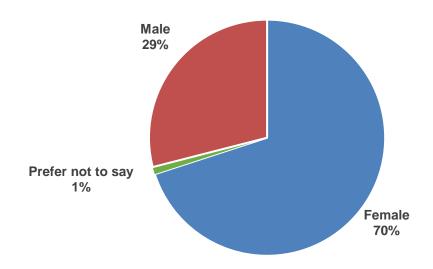


Figure 41 – Which age bracket are you in?

Base: 2,101

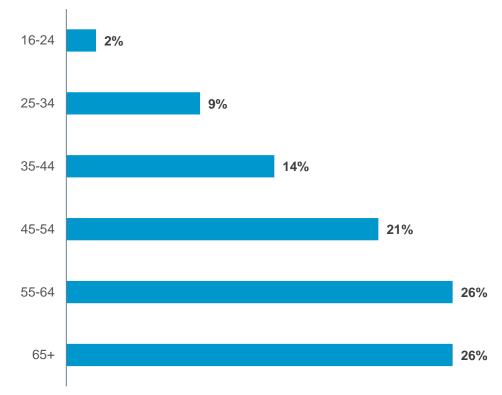


Figure 42 – What country were you born in?

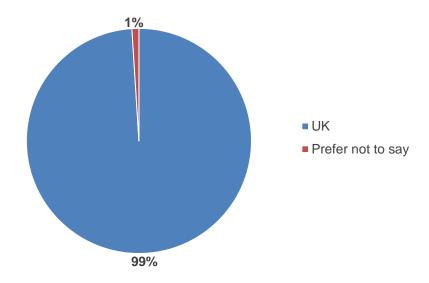


Figure 43 – Other country born in Base: 67

| PCN Area | Responses |
|---------------------|-----------|
| Poland | 9 |
| Zimbabwe | 8 |
| Germany | 6 |
| India | 5 |
| Ghana | 2 |
| Hungary | 2 |
| Ireland | 2 |
| Netherlands/Holland | 2 |
| Romania | 2 |
| USA | 2 |
| Canada | 1 |
| Cyprus | 1 |

Figure 44 – Do you belong to any religion?

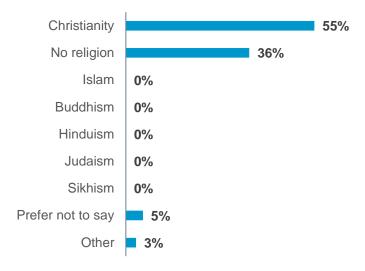


Figure 45 – Other religion

Base: 63

| Religion | Responses |
|----------------------|-----------|
| Paganism/Wiccan | 7 |
| Spiritualism | 4 |
| Non-practising | 2 |
| Animism | 1 |
| Jedi | 1 |
| Agnostic/open minded | 1 |

Ethnicity

A total of 114 respondents answered, 'prefer not to say'.

Two respondents answered, 'Other ethnic group'. Both respondents answered Arab.

Figure 46 – What is your ethnicity? - Asian or Asian British Base: 39

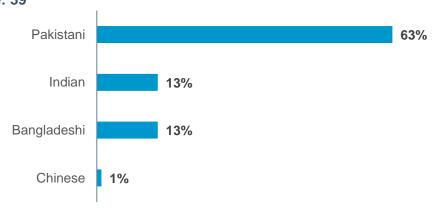


Figure 47 – What is your ethnicity? – Black or Black British Base: 23



Figure 48 – What is your ethnic background? – Mixed or Multiple ethnic groups Base: 11

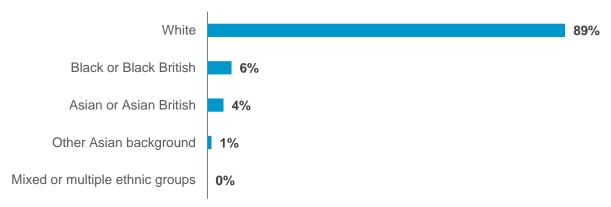
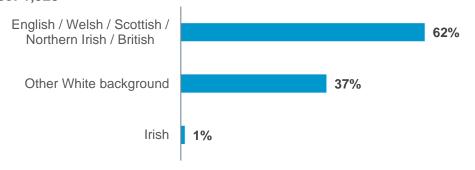


Figure 49 – What is your ethnicity? - White Base: 1,925



Disability

Figure 50 – Are you disabled?

Base: 2,152

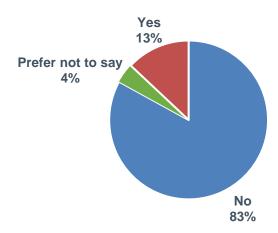


Figure 51 – Do you have any long-term conditions, impairments or illnesses? Base: 1,117

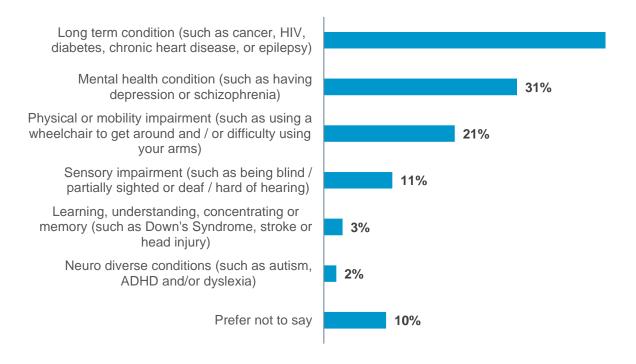


Figure 52 – Other long-term conditions, impairments or illnesses Base: 76

| Long-term condition, impairment or illness | Responses |
|--|-----------|
| Chronic pain/nerve damage | 31 |
| Blood/vein/artery condition | 16 |
| Awaiting/undergone surgery/problems from surgery | 12 |
| Irregular heartbeat/unspecified heart condition | 11 |
| Undiagnosed/undergoing tests | 5 |
| Other | 31 |

Figure 53 – Are you a carer? Base: 2,137

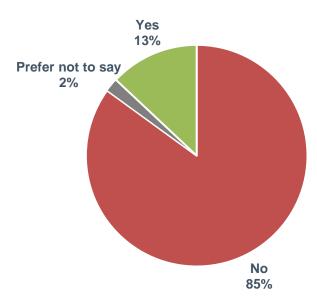


Figure 54 – Please select the option that best describes your sexual orientation Base: 2,107

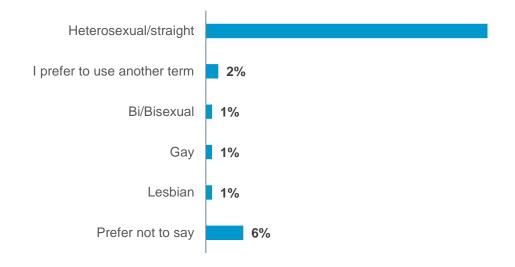


Figure 55 – Do you consider yourself to be a Trans person? Trans is an umbrella term used to describe people whose gender is not the same as the sex they were assigned at birth.

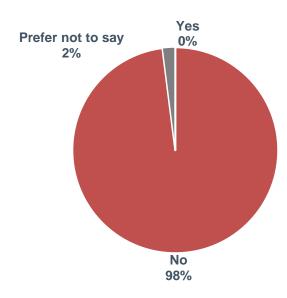


Figure 56 – Do you or anyone you live with get any of these types of benefit? Universal Credit, Housing Benefit, Income Support, Pension Credit, Guarantee Credit Element, Child Tax Credit, Incapacity Benefit/Employment Support Allowance, Free School Meals, Working Tax Credit, Council Tax Benefit

Base: 2,149

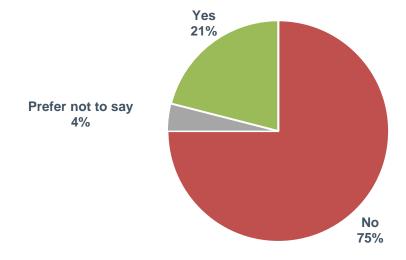


Figure 57 – Are you pregnant or have you given birth in the last 6 months? Base: 2,137

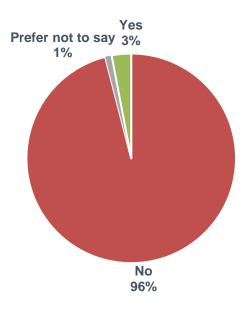
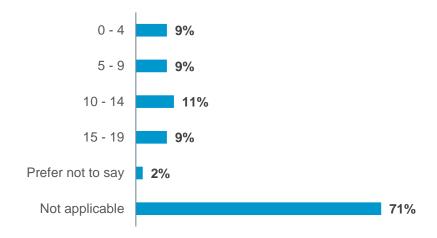


Figure 58 – Are you a parent/primary carer of a child or children? If yes, how old are they?

Base: 1,987



Key findings

Using your GP practice during COVID-19

- Respondents contacted their GP practice for a range of things, including prescriptions, (39%), urgent appointments (38%), routine appointments (32%) and follow up appointments (11%)
- Respondents said they had received a quick call back from their doctor/arrangement of appointments, with respondents in the Brigantes PCN area are the most likely to say this
- Most respondents said they did not have any problems contacting their GP practice

Digital technology

- Respondents use a range of digital technology at home, with the majority using text messages, having internet access and use a smartphone or tablet
- The majority of respondents believe digital technology could make access to health care easier

Video consultations

- Three in ten respondents knew that their GP practice used video consultation
- Highest levels of awareness about video consultations was in Five Towns and Wakefield Health Alliance South PCN areas
- 25-34 year olds are the most likely to use video consultation than other age groups
- The majority of respondents have not been offered a video consultation
- The majority of respondent would be comfortable using a video consultation with a GP or health professional they know
- Many respondents believe video consultations are convenient, efficient and save time for staff and patients
- Respondents are most concerned about misdiagnosis or that something could be missed if using video consultations
- Being able to see their usual GP or nurse, and knowing if they need to be seen or have tests they can, would help respondents feel more comfortable or confident about using video consultation

Online consultation

- Most respondents have not used online consultations to ask their GP practice for advice, with those in Brigantes PCN area the least likely to have used this method of contact
- Of those that have used online consultation, most said it worked well and was easy to use
- Of those that had not used online consultation, the main reason was that they did not know their practice offered this

Making an appointment

- Most respondents find face-to-face consultation the most comfortable for receiving advice about an existing or new heath condition or problem
- Online consultation and text messaging were the least preferred methods for communicating with GP practices
- The majority of respondents find it easy to make an appointment
- Respondents want GP practices to continue with telephone consultations the most
- Most respondents have not used other GP practices during the pandemic

Appendix A – Questionnaire