



Partners in improving local health



North of England
Commissioning Support

Join our Journey towards our #FutureNHS

Roadshow engagement findings

January 2020



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1 Executive summary

During the months of October and November 2019, a series of public engagement roadshows were held at various venues across the North East where there is high footfall such as NHS sites and marketplaces/supermarkets. Objectives included building NHS visibility, listening and understanding views to gauge opinion on areas of importance, talking positively about work happening in each area, and supporting key messages around areas such as use of services and flu, and delivery of health checks.

This was planned and designed to reflect the nature of individual 'places' in order to engage on local pieces of work, as well as the wider ambitions of the region's NHS to build a health and care system which is fit for the future (an Integrated Care System).

The Integrated Care System (ICS) comprises of four Integrated Care Partnership (ICP) areas; North Cumbria, Tees Valley, North of Tyne and Gateshead and Durham, South Tyneside and Sunderland and is a commitment by all NHS organisations along with Local Authorities and other voluntary and third sector organisations, to work together on ambitious plans to improve the health of the three million people who live in the region and to improve the quality of their health and care services.

The roadshow engagement provided a valuable opportunity for individuals to provide feedback as to what makes them proud of the NHS, what improvements they would like to see and what concerns them most about the future. A total of 1,327 responses to these questions were collected across the ICS region. The planned events in North Cumbria ICP were cancelled due to the implications for the ICP arising from Purdah restrictions.

In South Tyneside and Sunderland, as well as parts of East and North Durham, these events also gave individuals the opportunity to find out more about Phase Two of the Path to Excellence programme and the work taking place to create outstanding future hospital services in South Tyneside and Sunderland.

The following provides a summary of the key findings for the ICS region, however contained within this report is a summary of the findings for each ICP area as well as the Path to Excellence geographical area.

Attitude to change

There is a strong consensus among individuals that the NHS needs to continue to change to meet the needs of patients living within the region (77% strongly agree or agree with this statement). In contrast, between 9-12% strongly disagree or disagree that the NHS needs to continue to change.

What are individuals most proud of?

- Many are proud of the staff that work within the NHS, with individuals referring to their commitment and dedication, how they always put patients first and how they strive to deliver the best possible care despite increasingly challenging circumstances.
- Furthermore, a large proportion are proud of the work that the NHS achieves and/or everything about the NHS; individuals used words such as 'amazing', 'marvellous', 'great', 'fantastic' and 'brilliant' to describe it's achievements and/or services in general.
- Individuals are proud of the high standard of care that the NHS provides, with many positively describing their experience of accessing care. More general comments related to the efficiency of services and the NHS providing a more-than satisfactory service.
- A considerable proportion of individuals highlighted the exceptional care that is provided by specialist services and/or teams. A long list of these were provided with a few examples being maternity services, children's services, district nursing teams, older people's services, diabetes care and cancer services.
- Other aspects that individuals are proud of are the care and service provided by GP practices and the fact that the NHS provides a free service for all. However, these were cited to a lesser extent.
- From a staff perspective, individuals identified teamwork and the support they receive from their managers and/or the rest of the team as one of the best things about their job. Other key aspects included being able to help others - providing good patient care, having job satisfaction, engaging with patients and working in a great location with good facilities.

What improvements would they like to see?

- Improving access to GP services was one of the main improvements that individuals would like to see. Patients want to be able to easily book an appointment within a timeframe that is acceptable to them. Suggestions were made about the need for more GP practices as well as more GPs within practices, the greater availability of appointments through longer and weekend opening hours as well as making it easier for patients to contact their practice.
- Improved staffing was repeatedly identified by individuals, as well as staff themselves as an improvement that is much needed. Increasing the workforce was felt to reduce pressure on staff, improve capacity and standards of care.

- The need for better integration of services was also felt to be very important. Comments were made about the disconnect between the health and care sectors, the lack of joined-up thinking between different NHS services and the need for providers and commissioners to work more closely together when making decisions about service improvements.
- A large proportion of individuals want to see improved accessibility to services in terms of travel and transport. Comments typically related to reduced / abolishment of parking charges and improved parking facilities as well as easier and more affordable methods for patients to travel to and from services.
- Other suggestions for improvement included reducing waiting times for hospital appointments and procedures as well as greater access to mental health support services. However these were identified to a lesser extent.

What concerns them most about the future?

- In line with the improvements that individuals would like to see, staffing was identified as one of the greatest concerns regarding the future of NHS services. Comments related to staff being overworked and 'burnt out' with concerns about the impact that this has on patient care as well as the ongoing problems of recruiting and retaining staff.
- Another main concern was the closure and movement of services, this was a particular issue for those who attended roadshow events in the Durham, South Tyneside and Sunderland ICP area with a high proportion negatively commenting upon the closure/movement of services that have resulted from Phase One of Path to Excellence. The Path to Excellence programme has created a great deal of uncertainty about the future of services within South Tyneside, including the future of the hospital.
- Access to GP practices was identified as a concern for many – specifically the difficulty in being able to make an appointment when needed, the inefficiency of appointment booking systems and the general shortage of GPs.
- Individuals have concerns about the lack of funding and investment in NHS services which have led to cuts and are consequently felt to be impacting upon patient care.
- A high proportion acknowledged the overwhelming demands that are being placed on the system due to the ageing population and rising patient expectations. The ability to cope with these are felt to be diminished due to other factors such as staff shortages and lack of investment and funding.

- Concerns about privatisation and the future of the NHS were also identified by a substantial proportion.

The report provides a more in-depth exploration of these factors as well as segmentation by ICP area and the Path to Excellence geographical area.

2 Introduction

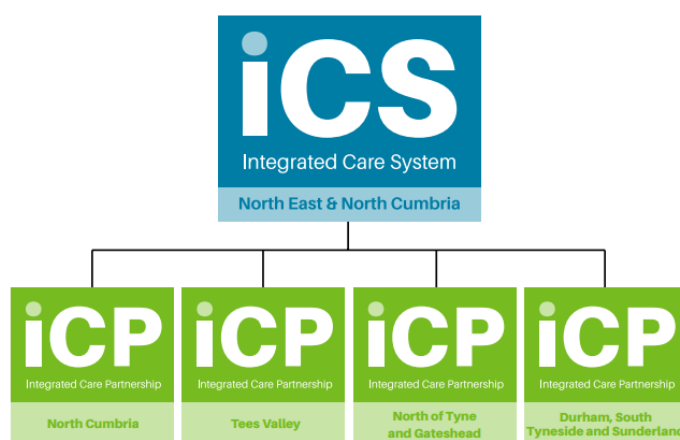
During the months of October and November 2019, a series of public engagement roadshows were held at various venues across the North East, where there is high footfall such as NHS sites and marketplaces/supermarkets. Objectives included building NHS visibility, listening and understanding views to gauge opinion on areas of importance, talking positively about work happening in each area, and supporting key messages around areas such as use of services and flu, and delivery of health checks.

This was planned and designed to reflect the nature of individual 'places' in order to engage on local pieces of work, as well as the wider ambitions of the region's NHS to build a health and care system which is fit for the future (an Integrated Care System).

The Integrated Care System (ICS) comprises of four Integrated Care Partnership (ICP) areas; North Cumbria, Tees Valley, North of Tyne and Gateshead and Durham, South Tyneside and Sunderland and is a commitment by all NHS organisations along with Local Authorities and other voluntary and third sector organisations, to work together on ambitious plans to improve the health of the three million people who live in the region and to improve the quality of their health and care services.

In South Tyneside and Sunderland, as well as parts of East and North Durham, these events also gave individuals the opportunity to find out more about Phase Two of the Path to Excellence programme and the work taking place to create outstanding future hospital services in South Tyneside and Sunderland.

The planned events in North Cumbria ICP were cancelled due to the implications for the ICP arising from Purdah restrictions.



The engagement gave individuals the chance to share:

- What makes them proud of the NHS
- Where they would like to see improvements
- What concerns them most about the future.

This report provides an overview of the feedback provided by individuals engaged with during the roadshows.

3 Event activity

3.1 Tools and resources

Each event team were supplied with a series of ICS tools and resources to help facilitate conversation. Additional resources on the Path to Excellence programme were provided to teams holding events in Durham, South Tyneside and Sunderland.

Four resources were designed specifically to capture feedback on the key engagement questions.

1. **Survey** (printed survey and also available online)

Individuals were asked to complete a short survey to help us to understand what matters most to people living in the North East and North Cumbria about our NHS and where they would like to see us focus our efforts on improving services for the future.

2. **Research card**

Individuals were asked to complete a short research card asking them 'to what extent they agree that the NHS needs to continue to change to meet the needs of patients in their area'. The card also allowed individuals to provide brief demographic information and captured any other comments that they had.

3. **Totem Pole**

Individuals were asked to write their answers to the three engagement questions on post-it notes (demographic information was not required to be captured).

4. **Staff comment card**

Staff who work within the NHS or within social care were asked to write their answers to two questions on post-it notes (demographic information was not required to be captured).

3.2 Response totals

The table below summarises the number of responses that were collected in the four methods detailed in Section 3.1.

Note: Due to the methods of data capture, the number of responses does not correlate with the number of individuals engaged with.

The table is structured to show the number of responses for the ICS region, each ICP area as well as the events conducted specifically in the Path to Excellence footprint. The planned events in North Cumbria ICP were cancelled due to the implications for the ICP arising from Purdah restrictions.

Activity	ICS region	ICP area			Path to Excellence
		Tees Valley	Durham, South Tyneside and Sunderland	North of Tyne and Gateshead	
Survey	169	30	78	47	51
Research card	37	5	19	13	19
Totem pole	1034	96	801	137	800
Staff comment card	87	2	85	0	85
Total	1327	132	983	197	955

3.3 Notes on analysis / report

- Responses to all open questions were analysed using thematic analysis enabling a quantitative representation of responses (a process whereby each individual response is assigned a code and codes grouped to provide themes or categories).
- The results of the engagement are by no means representative of the general population, but rather provide an insight into perspectives.
- The findings in this report are presented for the ICS region as well as for each ICP area. In addition, the results are presented for the Path to Excellence geographical area.

4 Findings - The Integrated Care System

This section of the report provides an overview of the findings for the ICS region for each of the engagement methods.

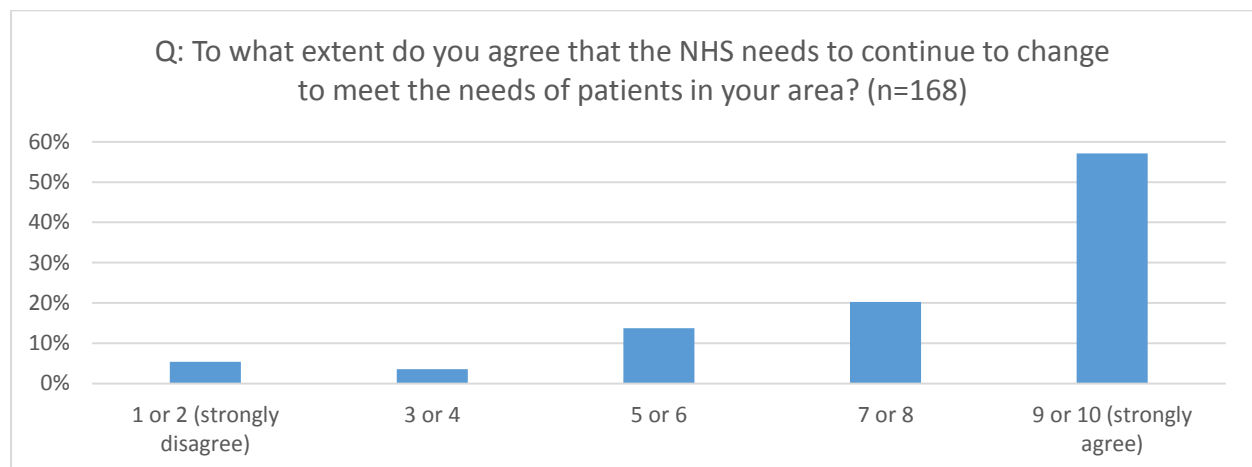
4.1 Survey

The survey was completed by 169 individuals; 75% female and 25% male. The full demographic breakdown of respondents can be found in the Appendix.

The greatest proportion were from Durham, South Tyneside and Sunderland (46%) with 28% from North of Tyne and Gateshead and 18% from Tees Valley. The remaining individuals were from North Cumbria (5%) or an 'other' area (4%).

Most individuals responded to the survey as a member of NHS staff (41%), whilst 30% were a member of the public and a further 13% a patient currently receiving NHS treatment.

Approximately three quarters strongly agree or agree that the NHS needs to continue to change to meet the needs of patients (57% strongly agree & 20% agree). In contrast, just 5% strongly disagree and 4% disagree that the NHS needs to continue to change.



What do you feel most proud of?

Survey respondents are most proud of the **staff that work within the NHS** (28%). Individuals referred to the commitment and dedication of staff, how they always put patients first and/or how they strive to deliver the best possible care despite increasingly challenging circumstances.

“How individual people strive to make a difference”

“The service the staff continue to deliver despite the lack of funding or support”

“Determination of staff to provide a good person-centred service in spite of centralised target driven agendas.”

Another aspect that individuals are particularly proud of is **the care delivered by specialist services and/or teams** (24%). Individuals cited a wide range of services which included maternity, district nursing teams, older people's services, cancer services, child immunisations, home physiotherapy and paramedic teams.

A slightly smaller proportion are proud of **the service that their GP provides** (13%) whilst 10% made general comments about **the high standard of care that the NHS provides or they have experienced**.

"Our capacity to deliver care, better than in other parts of the country"

"That we have some of the best services in the country on our doorsteps"

"An excellent local hospital with national and internationally recognised services"

Other aspects that individuals are proud of included the **NHS providing a free service for all** (8%), **the work that the NHS achieves and/or everything about the NHS** (5%), **the range of services and the support provided** (4%) and **how the NHS provides local access to healthcare** (4%).

What do you feel most proud of? (n=154)	% of responses
The staff	28%
Care from specialist services	24%
Care received from GP practice	13%
Standard of care provided or experienced (general comments)	10%
None	10%
Provides a free service for all	8%
Work that the NHS achieves / everything	5%
The range of services provided by the NHS / support available	4%
Local access to care	4%
NHS there when needed / couldn't do without it	3%
Other	5%

What improvements would you like to see?

In terms of improvements to NHS services, the most individuals commented upon the need to **improve access to GP services** (17%). Suggestions related to making it easier for patients to contact practices when they need an appointment, ensuring patients are able to book an appointment within a reasonable timeframe, having more GP practices as well as more GPs within practices and the greater availability of appointments through longer and weekend opening hours.

"Better access to GP service on a weekend and late night as I work fulltime"

“Better access to GP appointments and reform in how GPs allocate their appointment times”

Furthermore, 15% want to see **more joined-up, integrated services**. Comments were made about the disconnect between the health and care sectors, the lack of joined-up thinking between different NHS services and the need for providers and commissioners to work more closely together when making decisions about service improvements.

“Better links to community care and more partnership working across health and social care”

“Continue to build a better partnership with social services”

“Less organisation tribalism, more cohesion from all organisations in the system to work together to make the best decisions for the health of our population”

Comments falling within the **‘travel and transport’** category (12%) typically related to the need for a ‘rethink’ on parking charges, improving parking facilities at hospitals and/or creating easier and more affordable ways for patients to travel to and from services.

Other key suggestions included;

- **Reducing waiting times for hospital appointments and procedures** to provide a more efficient service (11%)
- **Greater access to mental health support services** (10%) i.e. reduced waiting times, greater service provision for all ages, improved funding and longer opening hours.
- **Improved staffing** (9%).

What improvements would you like to see? (n=161)	% of responses
Access to GP	17%
More joined-up, integrated services	15%
Travel and transport	12%
Waiting times for hospital appointments / procedures	11%
Mental health support services	10%
Staffing levels	9%
Keeping / more local services	7%
Investment / appropriate funding	7%
More efficient use of resources available within communities	6%
More preventative health care	6%

Use of informatics/IT e.g. central patient record	5%
Staff attitude and training	4%
Appointment systems (Inc. better administration, scheduling & less cancellations)	4%
NHS staff salary / working conditions (Inc. better staff recognition)	3%
Waiting times at A&E	3%
Staff restructuring (I.e. less managers, more effective leadership)	2%
Internal communication	2%
Continuity of care	1%
Care for the elderly (Inc. dementia services)	1%
Better diagnosis / standard of care provided	1%
A more holistic approach to health	1%
<i>Other</i>	15%

What concerns you the most?

Approximately a third (35%) identified **staffing** as their greatest concern with regard to the future of NHS services. Comments related to staff being overworked and 'burnt out', the impact that the pressure put on staff has on patient care as well as the ongoing problems of recruiting and retaining staff.

"Staffing shortages that constantly threaten patient safety"

"Being unable to recruit and retain staff"

Another great concern was the **lack of funding and investment in NHS services** (21%) with concerns about how cuts to services impact on the care delivered to patients. A small number highlighted that despite cuts / lack of funding, staff are still required to deliver the same level of care.

"Unnecessary cuts which impact on the workforce and subsequently patient care"

Furthermore, 16% raised concern about **the increasing demands placed on the system** due to the ageing population and rising patient expectations. The ability to be able to manage these was felt to be diminished due to other factors such as lack of investment and funding and staff shortages.

"Insufficient resources to meet increasingly complex demands"

Concerns about **privatisation and the future of the NHS** were also identified by 12% of the sample. This concern is likely to be heightened at the present time due to the impending general election.

What concerns you the most? (n=160)	% of
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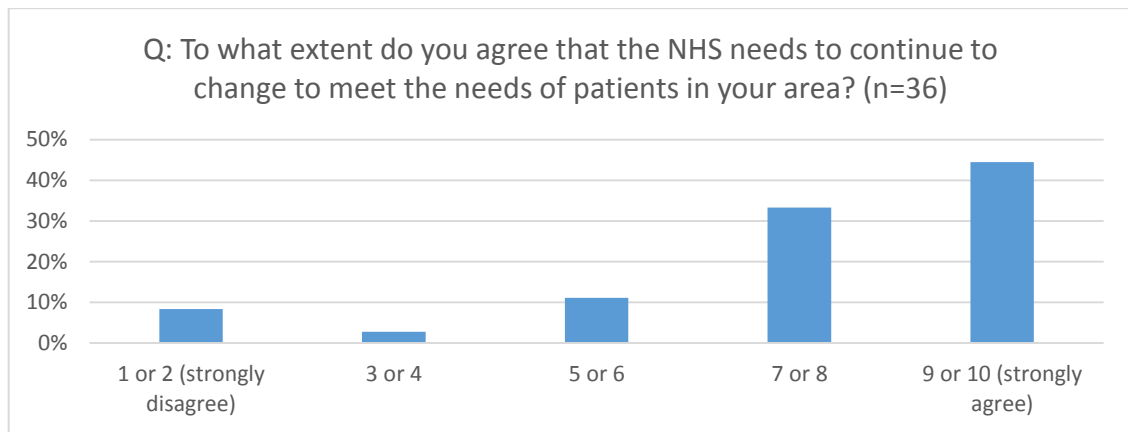
	responses
Staffing / overworked staff	35%
Lack of funding and investment	21%
Increasing demands on system	16%
Future / privatisation of the NHS	13%
Patient education / preventative health	6%
GP access	6%
Inadequate mental health services	4%
Lack of joined-up thinking / integration of services	4%
Poor management / effective leadership	4%
Closure / movement of services	3%
Waiting times for hospital appointments / procedures / A&E	3%
Inappropriate use of services / lack of knowledge	3%
Inefficient system	3%
NHS staff pay and working conditions	2%
Travel and transport	1%
<i>Other</i>	11%

4.2 Research card

The research card was completed by 37 individuals; 51% from Durham, South Tyneside and Sunderland, 35% from North of Tyne and Gateshead and 14% from Tees Valley.

The majority responded as a member of public (53%) with smaller proportions responding as a key stakeholder (16%) or a patient currently receiving NHS treatment (13%).

Most strongly agree or agree that the NHS needs to continue to change to meet the needs of patients (44% strongly agree & 33% agree). In contrast, just 8% strongly disagree and 3% disagree that the NHS needs to continue to change.



Individuals were given the opportunity to provide any other comments, these are summarised in the table below. Whilst some were positive about change others were not convinced whether change was the solution.

Note: Due to the relatively small number of comments and the diverse nature of responses, comments are displayed as numbers rather than percentages.

Any other comments (n=19)	No. of comments
Positive <ul style="list-style-type: none"> - NHS is a service to proud of - Doing well considering current underfunding - Change is comforting - Services need to change with improvement to technology and treatments 	6
Negative <ul style="list-style-type: none"> - Long way to go - Not convinced change is the answer - Query over funding - Investment is required 	4
Neutral <ul style="list-style-type: none"> - Change must be well communicated - Community and voluntary sector must be adequately funded given heavy reliance on services - Hope for commitment to retain acute services at 3 sites (Tees Valley) - Query regarding judgement of patient's needs - Lack of progress across patch (Tees Valley) since 2013 	5

Other	4
<ul style="list-style-type: none"> - Charging and storage points for scooters/electric wheelchairs - X-ray facilities should be available until 10pm to accommodate recreational sports injuries - Poor discharge planning for elderly 	

4.3 Totem pole

A total of 1,034 responses were collected in the totem pole activity across the ICS region; 77% of which were from Durham, South Tyneside and Sunderland, 13% from North of Tyne and Gateshead and 9% Tees Valley.

Note: Due to the geographical breakdown of responses, caution must be applied to the interpretation of the results, given the bias towards responses in the Durham, South Tyneside and Sunderland area.

What do you feel most proud of?

The most individuals are proud of the **high standard of care that is provided by NHS services** (32%), with many positively describing their experience of accessing care. More general comments related to the efficiency of services, the NHS providing a more-than satisfactory service and/or individuals not encountering any problems / having any complaints.

“Quality and standard of care is excellent”

“Following shoulder injury follow up care was excellent 2nd to none. 100% behind the NHS”

“Never had any problems, had bad leg ulcers and I had a good service”

Furthermore, 21% made a general comment about **the work that the NHS achieves and/or everything about the NHS**, with many using the words ‘amazing’, ‘marvellous’, ‘great’, ‘fantastic’ and ‘brilliant’ to describe its achievements / the services in general (21%).

“On the whole the NHS does a great job”

“Proud of NHS – the work they do”

“NHS is spot on”

A slightly smaller proportion are proud of the **staff** (17%), again with many using words such as ‘brilliant’, ‘dedicated’, ‘amazing’ and ‘fantastic’ to describe them.

“Staff dedicated and helpful. No complaints about them”

“Attitude of staff friendly, positive, healthy”

Others aspects that individuals are proud of include **the care and service provided by GP practices** (11%), **the care provided by specialist services and/or teams** (7%) (i.e. the falls prevention service, paediatrics, community nurses, maternity, neurology and diabetes department) as well as the **NHS providing a free service for all** (6%).

What do you feel most proud of? (n=323)	% of responses
Standard of care provided or experienced (general comments)	32%
Work that the NHS achieves / everything	21%
The staff	17%
Care received from GP practice	11%
Care from specialist services	7%
Provides a free service for all	6%
NHS there when needed / couldn't do without it	4%
The range of services provided by the NHS / support available	2%
Other	7%

What improvements would you like to see?

As can be seen in the table below, individuals provided a diverse set of responses to this question.

The most individuals commented upon the need to **improve access to GP practices** making it easier for individuals to see a GP (17%). Many discussed the problems that they encounter in contacting their GP practice and/or making an appointment within a timeframe that is acceptable to them.

“Had bloods, need to come and see GP once results in. Can't get appointment to see GP so need to ring again so have to remember to call, try and try until get through surely it can be easier”

“Better access to GP appointments - I still wait 3 weeks”

Furthermore, smaller proportions felt it is important that **staffing levels** are addressed (8%) – reducing pressure on staff and improving patient care, and that **waiting times for hospital appointments and procedures are reduced** (8%).

“More nurses and they deserve a pay rise”

“Waiting times for chiropody in North Tyneside”

“Waiting times in hospitals too long plus for GPs”

Other suggested improvements include:

- **Better attitude of staff and staff training (6%)**
- **Greater access to mental health support services (6%)** with shorter waiting times for services and greater service provision
- **Increased investment/funding in NHS services (5%).**

Suggestions in relation to **travel and transport (5%)** included eradication/cheaper parking charges, increased parking facilities (including disabled bays), improved public transport links with services available during the night and/or shuttle services transferring individuals between hospitals/localities.

“Direct public transport links Jarrow/ Hebburn to Sunderland Hospital”

“What about people who have night emergency but no buses after 22:00 - nights and have to wait in hospital until morning for buses”

A small proportion (4%) commented on the need to **provide (and keep) local services**. The majority of these individuals had attended an event within Durham, South Tyneside and Sunderland raising concerns about the movement of services from South Tyneside to Sunderland.

“More services returned to South Tyneside e.g. manning children's 24hour A&E”

“Keep the NHS services in South Shields and not Sunderland so travel a concern”

What improvements would you like to see? (n=369)	% of responses
Access to GP	17%
Staffing levels	8%
Waiting times for hospital appointments/procedures	8%
Staff attitude and training	6%
Mental health support services	6%
Travel and transport	5%
Investment / appropriate funding	5%
Keeping / more local services	4%
NHS staff salary / working conditions (Inc. better staff recognition)	3%
More efficient use of resources available within communities	3%
Staff restructuring (I.e. less managers, more effective leadership)	3%
Medicines waste	2%
Repeat prescription service - scheduling / ordering / delivery	2%
Waiting times at A&E	2%
Continuity of care	2%

External communication (e.g. text reminders, appointment letters)	2%
Longer GP appointments / appointment flexibility	2%
More preventative health care	2%
Care for the elderly (Inc. dementia services)	2%
Appointment systems (Inc. better administration, scheduling & less cancellations)	1%
More joined-up, integrated services	1%
Comment about bad experience	1%
Food (Inc. more dietary options)	1%
Internal communication	1%
Ambulance waiting times	1%
More up-to-date services	1%
Other	16%

What concerns you the most?

Note: no responses to this question were recorded for individuals attending events in North of Tyne and Gateshead. It is not known whether this question was either not asked during the events or the post-it notes with anonymous responses have been misplaced. Consequently, the results for this question are biased to the Durham, South Tyneside and Sunderland ICP area as 89% of responses to this question were from this area and just 11% from Tees Valley.

The most individuals identified their greatest concern for the future of NHS services as the **closure and movement of services** (23%). All of these individuals had attended an event in the Durham, South Tyneside and Sunderland ICP area with most raising concern about the closure/movement of services that have resulted from Phase One of Path to Excellence.

“Unhappy about nor consultant maternity unit at South Tyneside District Hospital”

“Big concerns about potential changes at STDH - moving services from STDH to SRH - particularly A&E - would be difficult to get there if you live in Jarrow”

Furthermore, for 16% their biggest concern was **GP access** – particularly the difficulties faced in making an appointment within an acceptable timeframe, the inefficiency of appointment booking systems (telephone and/or online) and the general shortage of GPs.

“Phoning to make GP appointment, if don't call before 8:30, you can be 25th in the queue. If you are not online it is difficult to get an appointment”

“Access to GP's in Cleadon is poor as no answer – telephone 28 times”

A slightly smaller proportion raised concern about the **future of the NHS and the privatisation of services** (10%). This concern is likely to be heightened at the present time due to the impending general election.

“Not being free in the future”

“Changes in government – Brexit - will it still be free?”

“Concerned about NHS being privatised”

Other concerns raised, but to a slightly lesser extent, included:

- **Lack of funding and investment** (7%)
- **Waiting times for hospital appointments and procedures** (including A&E) (6%)
- **Staffing and overworked staff** (5%).

What concerns you the most? (n=342)	% of responses
Closure / movement of services	23%
GP access	16%
Future / privatisation of the NHS	10%
Lack of funding and investment	7%
Waiting times for hospital appointments / procedures / A&E	6%
Staffing / overworked staff	5%
Comment about bad experience	3%
Staff and patients not being listened to	3%
Lack of integration of services	2%
Infection control / cleanliness	2%
Staff attitude and training	2%
NHS staff pay and working conditions	1%
Travel and transport	1%
Prescriptions (rising costs and re-ordering difficulties)	1%
Continuity of care	1%
NHS111	1%
Use of A&E (behaviour of drunks, prioritisation of certain groups)	1%
Inadequate mental health services	1%
Patient-practitioner communication	1%
Inappropriate use of services / lack of knowledge	1%

Access to care close to home	1%
Other	7%

4.4 Staff comment card

A total of 87 responses were collected as part of the staff engagement activity. Staff who worked in either the NHS or the social care sector were encouraged to take part in this activity.

Note: 97% of responses collected to these questions were from events conducted in the Durham, South Tyneside and Sunderland ICP area (just one comment was made a staff member from Tees Valley), therefore a degree of caution must be applied to the reliability of these results for the whole ICS region. However, due to the non-specific nature of responses it is likely that these results would provide a fair representation for the whole ICS footprint.

What is good about your job and where you work?

Over half of staff felt that **teamwork and the support they receive from their managers and/or rest of the team** is one of the best things about their job - 55% of those responding the question gave a response in relation to this.

“I work with a well-motivated team (nurses/support staff), who adapt and learn new skills”

“The trust is very supportive and I work as part of a great, friendly, supportive team”

Other key themes identified in relation to what staff like about their job were:

- **Being able to help others and provide good patient care** (18%)
- **Having job satisfaction** (14%)
- **Engaging with patients** (14%)
- **Working in a great location with good facilities** (14%).

What is good about your job and where you work? (n=44)	% of responses
Teamwork / support from management and/or team	55%
Being able to help others / provide good patient care	18%
Job satisfaction	14%
Engaging with patients	14%
Great location with good facilities	14%
None/other comment	14%
Local	11%
Rewarding / feeling valued	9%

Close integration of departments and services with good communication	9%
Career / development opportunities	7%
Day-to-day variation in job role	7%
Good shift pattern / flexibility	7%
Employee benefits	5%
Structure	5%
Run by NHS Trust (not a private provider)	2%

What can we do to make it better?

The most commented on the need for **improved staffing** (40%), with comments highlighting the importance of improving retention and reducing the time it takes to replace staff.

“Employ more nurses if possible”

“To hire more staff, as staffing levels are poor”

“Encourage government spend more on recruitment, without staff there is poor service.”

Other suggested areas for improvement, included:

- **Improved communication** i.e. better communication from management and between different services (21%)
- **Eradication of staff parking charges / free staff parking** (16%)
- **Flexi-working to improve work/life balance** (14%)
- **Increased pay** (14%)
- **Improved patient / staff safety** (12%) (Including steps to address staff locking up buildings late at night & prevention of harassment from staff and members of the public)
- **Better management / more effective leadership** (12%) (Including better training for managers / those in a position of authority).

What can we do to make it better? (n=43)	% of responses
Improved staffing	40%
Improved communication	21%
Eradication of staff parking charges	16%
Flexi-working	14%
Increased pay	14%
Improved patient/staff safety	12%

Better management	12%
None / other	9%
Greater recognition of staff /treat staff like individuals not numbers	9%
Greater integration and collaboration (e.g. community wellbeing service & hospital / primary & secondary care)	9%
Improved funding and investment in resources and workforce	9%
Better use of IT/informatics	7%
Keep staff more up-to-date with changes / listen to staff	7%
More clinics	5%
Reopen/longer opening hours of Urgent Care Centre/Walk-in centres	5%
Improved access to mental health services	5%
Stop closing / moving services from South Tyneside	5%
Stop privatisation of NHS services	5%
Education (e.g. greater promotion of non-clinical services & most appropriate service to use for different conditions)	5%
More efficient transfer of patients by ambulance staff	2%
Improved GP access	2%
Local teams adopting their own interpretation of national local standards	2%
More care provision in the community	2%
Free university places for medical, nursing & social care students	2%
Clearer pathways for patient treatment	2%

5 Findings – Tees Valley ICP

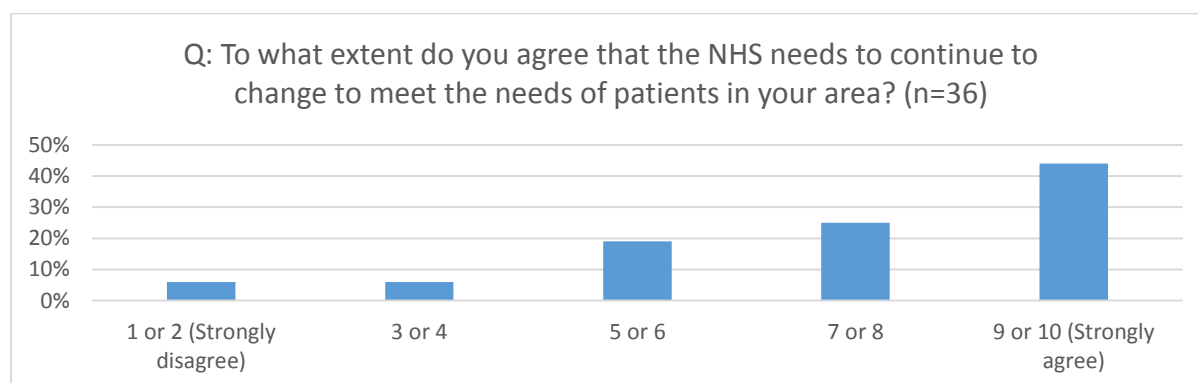
In total, 132 responses to the key engagement questions were collected from individuals who attended events in the Tees Valley ICP area or responded to the survey. Demographic information was only collected for those who completed the survey, a breakdown of this is included within the Appendix.

Note: It is more than likely that a small number of the individuals who attended the roadshow events in this ICP area might have actually lived outside of the area. However, due to the thematic nature of responses it is unlikely that this would significantly affect the findings.

Note: Within this section, responses from the different engagement methods were amalgamated to provide most robust answers to the engagement questions.

5.1 Attitude to change

The majority of individuals agree that the NHS needs to continue to change to meet the needs of people in their area (44% strongly agree & 25% agree). In contrast, 6% strongly disagree and 6% disagree. Most individuals responded to this question on behalf of a NHS staff member (37%), a member of the public (31%) or a key stakeholder (17%).



5.2 What are individuals most proud of?

Individuals within Tees Valley ICP area are most proud of:

- **The work that the NHS achieves / everything about the NHS** (24%) - words such as 'marvelous', 'fantastic' and 'smashing' were used to describe the work that the NHS achieves and/or the organisation in general.
- **The care received by specialist services and/or teams** (21%) – individuals specifically cited the care they had received from maternity services, diabetic services, cardiovascular services, neurology, cancer care, student services and the preceptorship programme as well as older people's services.

- **The high standard of care provided and/or experienced** (17%) – those who made specific comments did so about the care they received at Darlington Memorial Hospital, James Cook University Hospital and the University Hospital of North Tees.
- **The care received from GP practices** (17%) – particular mention was given to the Alma Centre, Saltscar Surgery, Brolton Surgery and the One Life Centre.
- **The staff who work within the NHS** (14%) – individuals highly praised the staff that work within the NHS describing them as ‘caring’, ‘compassionate’, ‘marvellous’, ‘friendly’ and ‘welcoming’.

“Think all local NHS services are brilliant!”

“The care for elderly residents, in some cases, my mother's GP is brilliant, my own practice is not so good”

“The service the staff continue to deliver despite the lack of funding or support”

“The people who work in the NHS are marvellous – at hospitals, in GP practices, nurses”

What are you most proud of? (n=63)	% of responses
Work that the NHS achieves / everything	24%
Care from specialist services	21%
Standard of care provided or experienced (general comments)	17%
Care received from GP practice	17%
The staff	14%
Provides a free service for all	6%
None	3%
Local access to care	3%
Other	6%

5.3 What improvements would they like to see?

The key improvements that individuals in this area would like to see are:

- **Improved access to GP services** (20%)
- **Better mental health support services** (14%) – comments related to the need for a greater understanding of mental health by GPs, more support for those who have lost children / experiencing PTSD, greater funding for

services and support for individuals of all ages, as well as the transformation of services to better meet the needs of patients.

- **Improved staffing** (13%)
- **More joined-up, integrated services** (11%) – the majority of comments related to the need for a closer partnership between health and social care as well as more joined-up thinking between NHS services, including communication which is consistent amongst all services.

“More GPs in local practices to reduce waiting lists”

“Joining things together so that people rather than money are in the centre - really in the centre”

“Day to day a problem - getting an appointment with a GP really difficult - also, always see someone different and don’t get reminders (e.g. blood test due) which you used to get”

What improvements would you like to see? (n=56)	% of responses
Access to GP	20%
Mental health support services	14%
Staffing levels	13%
More joined-up, integrated services	11%
Use of informatics/IT e.g. central patient record	5%
Waiting times for hospital appointments/procedures	5%
Staff attitude and training	4%
Repeat prescription services	4%
Waiting times at A&E	4%
Keeping / more local services	4%
Appointment systems (Inc. better administration, scheduling & less cancellations)	4%
More efficient use of resources available within communities / more services within the community	4%
None	4%
Travel and transport	4%
Investment / appropriate funding	4%
Other	21%

5.4 What concerns them most about the future?

The greatest concerns regarding the future of NHS services for the people in this area are:

- **GP access** (21%) - individuals highlighted the difficulty they face in contacting their GP practice, booking an appointment within a timeframe which is acceptable to them and the shortage of GPs in the area / within their practice.
- **Staffing levels** (16%) – it was recognised that an immense amount of pressure is put on staff due to shortages, impacting on patient safety and quality of care.

“Staff shortages in hospital and community services”

“Staff are over-worked”

“Can’t get through to a GP on the phone. When you do, the appointment is 3-4 weeks’ time. It is too late”

“GP services terrible cannot get an appointment. It’s disgusting”

The following were also identified, but to a lesser extent:

- **Waiting times for hospital appointments / procedures / A&E** (9%)
- **Privatisation and future of the NHS** (9%)
- **Lack of funding and investment** (7%)
- **Poor management / effective leadership** (6%).

What concerns you the most? (n=68)	% of responses
GP access	21%
Staffing / overworked staff	16%
Waiting times for hospital appointments / procedures / A&E	9%
Future / privatisation of the NHS	9%
Lack of funding and investment	7%
Poor management / effective leadership	6%
Closure / movement of services	3%
Patient - practitioner communication	3%
NHS111	3%
Inappropriate use of services / lack of knowledge	3%

Inappropriate diagnosis / patient has to push to be treated	3%
Inadequate mental health services	3%
NHS staff pay and working conditions	3%
Disjointed care	3%
Access to care close to home	3%
Travel and transport	3%
Prescriptions (rising costs and re-ordering difficulties)	3%
Increasing demands on system	3%
Inefficient system	3%
Other	12%

6 Findings – Durham, South Tyneside and Sunderland ICP

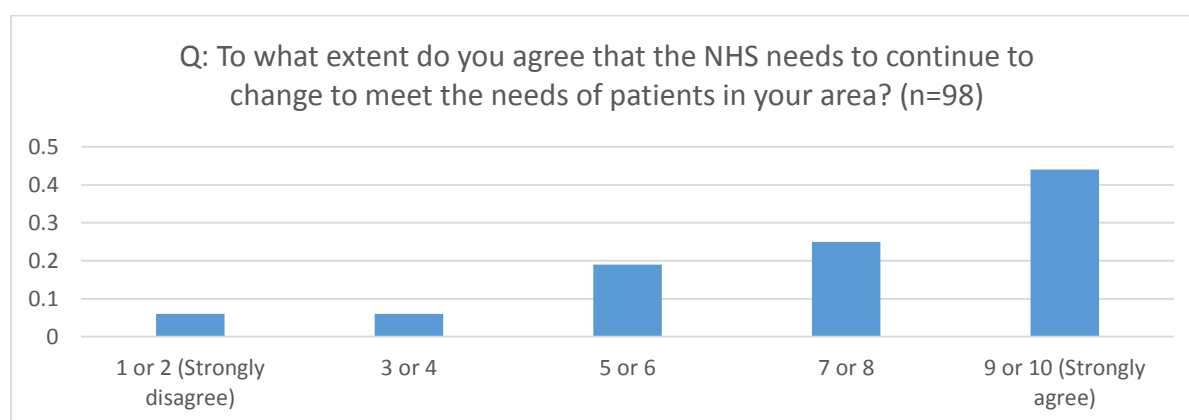
In total, 983 responses to the key engagement questions were collected from individuals who attended events in the Durham, South Tyneside and Sunderland ICP area or responded to the survey. Demographic information was only collected for those who completed the survey, a breakdown of this is included within the Appendix.

Note: It is more than likely that a small number of the individuals who attended the roadshow events in this ICP area might have actually lived outside of the area. However, due to the thematic nature of responses it is unlikely that this would significantly affect the findings.

Note: Within this section, responses from the different engagement methods were amalgamated to provide most robust answers to the engagement questions.

6.1 Attitude to change

Approximately three quarters agree that the NHS needs to continue to change to meet the needs of patients in their area (57% strongly agree & 19% agree). In contrast, 9% strongly disagree and 5% disagree. Most individuals responded to this question on behalf of a member of the public (42%), whilst 31% responded as a NHS staff member and a further 17% as a patient currently receiving NHS treatment.



6.2 What are individuals most proud of?

Individuals within this ICP area are most proud of:

- **The high standard of care provided and/or experienced (27%)** – many individuals positively commented upon the care that is provided by NHS services and/or the care they have received in the past. General comments related to the efficiency of services, receiving the treatment that was required and/or individuals not having any concerns or complaints about their care.

“Proud we have an NHS. Any dealing I've had with has been fantastic”

“Used lots of services, not had any negative experiences - always good care and efficient. Only negative would be cancelled eye appointments but tiny issue”

- **The staff who work within the NHS (20%)** – a large proportion of individuals highly praised the staff who work within the NHS with words such as ‘dedicated’, ‘brilliant’ and ‘amazing’ being used to describe them. Additional comments were made about staff going ‘above and beyond’ and continuing to deliver excellent patient care despite the challenging circumstances.

“The people do one hell of a job- I can't fault them”

“Our workers in the NHS as they are not recognised”

In addition, individuals felt proud of **the work that the NHS achieves / everything about the NHS (16%)**, **the care received from specialist services and/or teams (10%)** as well as the **care received from GP practices (10%)**. However, these were identified to a slightly lesser extent.

What are you most proud of? (n=335)	% of responses
Standard of care provided or experienced (general comments)	27%
The staff	20%
Work that the NHS achieves / everything	16%
Care from specialist services	10%
Care received from GP practice	10%
Provides a free service for all	6%
NHS there when needed / couldn't do without it	4%
None	3%
Range of services provided / support available	3%
Other	7%

From the perspective of staff, 55% felt that **teamwork and the support they receive from their managers and/or rest of the team** was the best thing about their job.

“I work with a well-motivated team (nurses/support staff), who adapt and learn new skills”

Other key themes identified in relation to what staff like about their job and where they work were:

- **Being able to help others and provide good patient care (18%)**
- **Having job satisfaction (14%)**

- **Engaging with patients (14%)**
- **Working in a great location with good facilities (14%).**

6.3 What improvements would they like to see?

Individuals suggested a wide variety of improvements which are listed in the table below, however the key ones were:

- **Improved access to GP services (18%)** – individuals felt that having more GPs within practices as well as more GP practices, more efficient appointment booking systems and longer opening hours of practices (including weekend opening) would help individuals to book an appointment when they need one.

“Being able to make a speedy appointment with GP”

“GP practices - more of or else open over the weekend”

- **Staffing levels (10%)** – many noted how it is imperative that the workforce is increased particularly the numbers of clinical staff. Comments reinforced the need to employ more front-line staff instead of management/senior staff, the importance of reinstating nursing bursaries and the need to address staff retention.

“Less management and more staff providing the service first-hand”

“The impossible!! More clinical staff at every level”

- **Reduced waiting times for hospital appointments and procedures (9%).**

“Waiting times in hospitals too long plus for GP's”

What improvements would you like to see? (n=308)	% of responses
Access to GP	18%
Staffing levels	10%
Waiting times for hospital appointments/procedures	9%
Staff attitude and training	6%
Keeping / more local services	6%
Travel and transport	6%
Mental health support services	6%
Investment / appropriate funding	6%
NHS staff salary / working conditions (Inc. better staff recognition)	4%

More joined-up, integrated services	4%
More efficient use of resources available within communities / more services within the community	4%
Staff restructuring (i.e. less managers, more effective leadership_	3%
More preventative health care	3%
Waiting times at A&E	2%
Continuity of care	2%
Use of informatics/IT e.g. central patient record	2%
Repeat prescription service - scheduling / ordering / delivery	2%
Internal communication	2%
Care for the elderly (Inc. dementia services)	2%
Comment about bad experience	2%
Food (Inc. more dietary options)	2%
Other	20%

Improved staffing was also identified most frequently by staff themselves (40%). Respondents emphasised the need to improve workforce numbers whilst addressing retention problems.

“Employ more nurses if possible”

“To hire more staff, as staffing levels are poor”

“Encourage government spend more on recruitment, without staff there is poor service.”

Other key areas for improvement identified by staff, included:

- **Improved communication** (21%) I.e. better communication from management and between different services
- **Eradication of staff parking charges / free staff parking** (16%)
- **Flexi-working to improve work/life balance** (14%)
- **Increased pay** (14%)
- **Improved patient / staff safety** (12%) (Including steps to address staff locking up buildings late at night & prevention of harassment from staff and members of the public)
- **Better management / more effective leadership** (12%) (Including better training for managers / those in a position of authority).

6.4 What concerns them most about the future?

The greatest concern for individuals in this area is the **closure / movement of services** (21%), with many commenting negatively on the changes that have resulted from Phase One of Path to Excellence.

“Child services being moved a big concern”

“Unhappy about nor consultant maternity unit at South Tyneside District Hospital”

“Stroke unit access - ambulance too long to Sunderland”

The Path to Excellence programme has created uncertainty about the future of services within South Tyneside as well as concern as to whether South Tyneside District Hospital will close.

“Any future movements of services”

“Concerns about South Tyneside hospital closing”

“Merging services at Bishop Auckland may mean that patients will not get the rehab that they need. No room on wards”

Other negative comments were made about the closure of walk-in / urgent care centres, St Clare's Hospice, mental health services and the future for the emergency surgery department at Sunderland Royal Hospital.

“Unhappy with the closure of the walk in centre”

Other concerns identified to a slightly lesser extent included:

- **GP access** (13%)
- **Staffing levels and overworked staff** (11%)
- **Travel and transport** (11%)
- **Future / privatisation of the NHS** (11%)
- **Lack of funding and investment** (10%).

What concerns you the most? (n=380)	% of responses
Closure / movement of services	21%
GP access	13%
Staffing / overworked staff	11%

Travel and transport	11%
Future / privatisation of the NHS	11%
Lack of funding and investment	10%
Waiting times for hospital appointments / procedures / A&E	5%
Increasing demands on system	4%
Comment about bad experience	3%
Staff and patients not being listened to	3%
Inappropriate diagnosis / patient has to push to be treated	2%
Infection control / cleanliness	2%
Staff attitude and training	2%
Patient education / more preventative work required	2%
NHS staff pay and working conditions	2%
Lack of integrated services	1%
Inappropriate use of services / lack of knowledge	1%
Inadequate mental health services	1%
Use of A&E (behaviour of drunks, prioritisation of certain groups)	1%
Continuity of care	1%
Prescriptions (rising costs and re-ordering difficulties)	1%
Other	7%

7 Findings – North of Tyne and Gateshead ICP

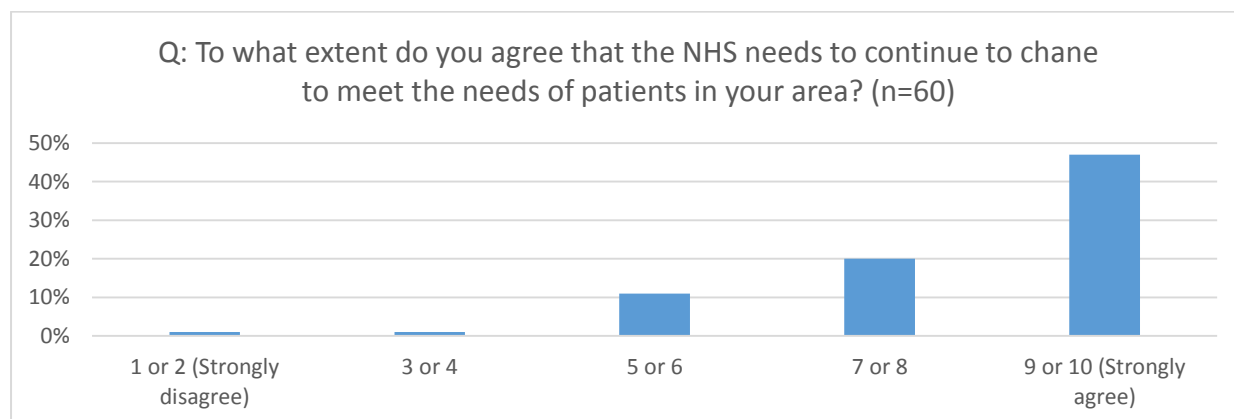
In total, 197 responses to the key engagement questions were collected from individuals who attended events in the North of Tyne and Gateshead ICP area or responded to the survey. Demographic information was only collected for those who completed the survey, a breakdown of this is included within the Appendix.

Note: It is more than likely that a small number of the individuals who attended the roadshow events in this ICP area might have actually lived outside of the area. However, due to the thematic nature of responses it is unlikely that this would significantly affect the findings.

Note: Within this section, responses from the different engagement methods were amalgamated to provide most robust answers to the engagement questions.

7.1 Attitude to change

Approximately two thirds agree that the NHS needs to continue to change to meet the needs of people in their area (47% strongly agree & 20% agree). In contrast, just 1% strongly disagree and 1% disagree. Most individuals responded to this question as a NHS staff member (46%), whilst 27% responded as a member of the public and a further 14% as a patient currently receiving NHS treatment.



7.2 What are individuals most proud of?

Individuals within this area are most proud of:

- **The care received from specialist services and/or teams (28%)** – individuals specifically praised the care they received or was provided by the child immunisations team, the oncology department at Hexham, the palliative care team, transplantation and genetics, the falls prevention clinic as well as the urology and dermatology departments.
- **The high standard of care provided and/or experienced (25%)** – comments were made with regard to NHS services delivering quality medical care, with some noting that their area has some of the 'best services' in the country.

- **The staff who work within the NHS** (23%) – individuals noted how staff always strive to deliver the best patient care despite the challenges that they face. Words such as ‘excellent’, ‘caring’, empathetic’ and ‘supportive’ were used to describe them.

“That we have some of the best services in the country on our doorsteps”

“An excellent local hospital with national and internationally recognised services. A huge number of dedicated staff who are committed to the local NHS”

“The right level of care is given to the right patient in need”

“Staff going the extra mile despite the NHS, and the North East, being among the most neglected areas in the UK”

What are you most proud of? (n=69)	% of responses
Care from specialist services	28%
Standard of care provided or experienced (general comments)	25%
The staff	23%
Care received from GP practice	16%
Provides a free service for all	7%
Other	7%
Work that the NHS achieves / everything	4%
Range of services provided / support available	4%
NHS there when needed / couldn't do without it	3%

7.3 What improvements would they like to see?

Individuals suggested a wide variety of improvements which are categorised in the table below, however those that were suggested most frequently were:

- **Improved access to GP services** (14%)
- **Shorter waiting times for hospital appointments and procedures** (8%)
- **Improved access and availability of mental health support services** (8%)
- **More joined-up / integrated services** (8%) – comments related to the need for less silo working of NHS services, GPs getting more involved and becoming part of the wider NHS, providers and commissioners making decisions regarding service improvement together as well as establishing seamless links with the care sector.

“GP appointments being easier to get at a time/day required without having to ring on the day, hard when working full time”

“Significant extra spend on mental health support services”

“Less organisation tribalism, more cohesion from all organisations in the system to work together to make the best decisions for the health of our population”

“Better links to community care and more partnership working across health and social care”

What improvements would you like to see? (n=154)	% of responses
Access to GP	14%
Waiting times for hospital appointments/procedures	8%
Mental health support services	8%
More joined-up, integrated services	8%
Investment / appropriate funding	6%
Staff attitude and training	5%
Keeping / more local services	5%
More efficient use of resources available within communities	5%
Staffing levels	4%
Travel and transport	4%
More preventative health care	3%
Waiting times at A&E	3%
Appointment systems (Inc. better administration, scheduling & less cancellations)	3%
Reduced medicines waste	3%
External communication (e.g. text reminders, appointment letters)	3%
Longer GP appointments / appointment flexibility	3%
NHS staff salary / working conditions (Inc. better staff recognition)	2%
Staff restructuring (i.e. less managers, more effective leadership)	2%
Care for the elderly (Inc. dementia services)	2%
Ambulance waiting times	2%
Use of informatics/IT e.g. central patient record	2%
Other	21%

7.4 What concerns them most about the future?

Despite a smaller number of responses being collected for this question, individual's main concerns regarding the future of NHS services were:

- **Staffing and overworked staff** (31%)
- **The lack of funding and investment in services** (31%)
- **The increasing demands placed on the system** due to the ageing population and rising patient expectations (22%).

“Staffing levels and ability to deliver prompt treatment”

“Chronic health conditions of an aging population”

“Unrealistic expectations of patients and families, as well as staff at times”

What concerns you the most? (n=45)	% of responses
Staffing / overworked staff	31%
Lack of funding and investment	31%
Increasing demands on system	22%
Future / privatisation of the NHS	11%
Lack of integrated services	11%
Inadequate mental health services	7%
Closure / movement of services	4%
GP access	4%
Travel and transport	4%
Patient education / more preventative work required	4%
Other	18%

8 Findings – Path to Excellence

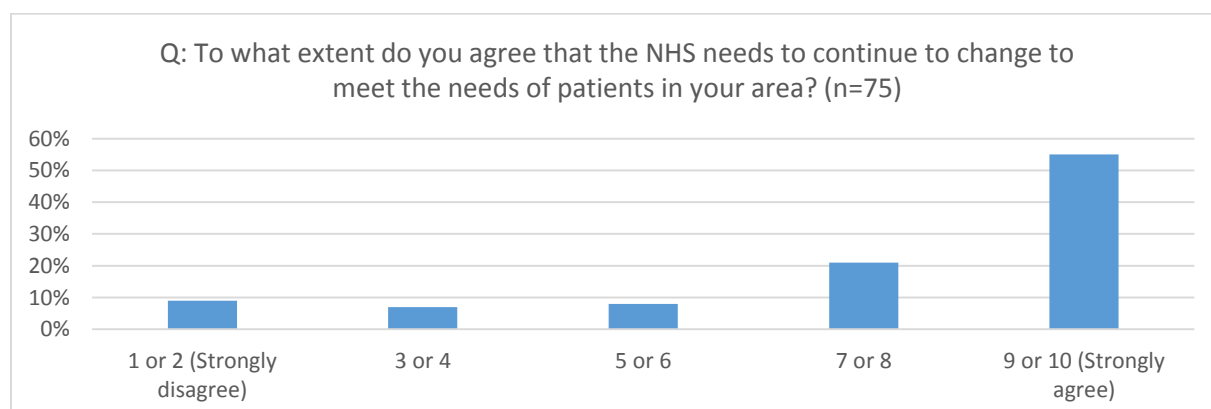
In total, 955 responses to the key engagement questions were collected from individuals who either attended events in the Path to Excellence geographical area or responded to the survey. Demographic information was only collected for those who completed the survey, a breakdown of this is included within the Appendix.

Note: It is more than likely that a small number of the individuals who attended the roadshow events in this ICP area might have actually lived outside of the area. However, due to the thematic nature of responses it is unlikely that this would significantly affect the findings.

Note: Within this section, responses from the different engagement methods were amalgamated to provide most robust answers to the engagement questions.

8.1 Attitude to change

Approximately three quarters agree that the NHS needs to continue to change to meet the needs of patients in their area (55% strongly agree & 21% agree). In contrast, 9% strongly disagree and 7% disagree. Most individuals responded to this question on behalf of a member of the public (37%), a NHS staff member (32%) or a patient currently receiving NHS treatment (14%).



8.2 What are individuals most proud of?

Individuals within the Path to Excellence geographical area are most proud of:

- **The high standard of care provided and/or experienced** (27%) – many individuals positively commented upon the care that is provided by NHS services and/or the care and treatment they have received in terms of the efficiency in which they were dealt with, receiving an excellent / good service and/or not having any concerns or complaints.
- **The staff who work within the NHS** (19%) – many made positive comments about staff describing them as ‘fantastic’, ‘amazing’, ‘dedicated’ and ‘friendly’. Additional comments referred to staff going ‘above and beyond’ and ‘doing the best they can’ despite the challenging circumstances.

- **The work that the NHS achieves / everything about the NHS** (17%) – a large proportion of individuals made positive comments about what the NHS achieves and/or everything about the NHS.

“Lots of hospital stays over the years - all good! Can't fault it!”

“The people do one hell of a job- I can't fault them”

“Overall, I think it's good - Champion! No complaints”

“Proud to have it and to have worked in it”

What are you most proud of? (n=313)	% of responses
Standard of care provided or experienced (general comments)	27%
The staff	19%
Work that the NHS achieves / everything	17%
Care from specialist services	10%
Care received from GP practice	9%
Provides a free service for all	6%
Other	6%
NHS there when needed / couldn't do without it	4%
Range of services provided / support available	3%
None	2%

From the perspective of staff, 55% felt that **teamwork and the support they receive from their managers and/or rest of the team** was the best thing about their job.

“I work with a well-motivated team (nurses/support staff), who adapt and learn new skills”

“The trust is very supportive and I work as part of a great, friendly, supportive team”

Other key themes identified in relation to what staff like about their job and where they work were:

- **Being able to help others and provide good patient care** (18%)
- **Having job satisfaction** (14%)
- **Engaging with patients** (14%)
- **Working in a great location with good facilities** (14%).

What is good about your job and where you work? (n=44)	% of responses
Teamwork / support from management and/or team	55%
Being able to help others / provide good patient care	18%
Job satisfaction	14%
Engaging with patients	14%
Great location with good facilities / environment	14%
None/other comment	14%
Local	11%
Rewarding / feeling valued	9%
Close integration of departments and services with good communication	9%
Career / development opportunities	7%
Day-to-day variation in job role	7%
Good shift pattern / flexibility	7%
Employee benefits	5%
Structure	5%
Run by NHS Trust (not a private provider)	2%

8.3 What improvements would they like to see?

Individuals suggested a wide variety of improvements which are categorised in the table below, however three key factors emerged:

- **Improved access to GP services** (18%) – suggestions included greater availability of appointments through longer and weekend opening hours, more GPs within practices and/or making it easier for patients to contact their GP practice to ultimately help individuals book an appointment when they require one.

“Improve access to GP appointments to help reduce waiting times. I was told I would have to wait to see a GP to get my results. I'm concerned about getting an appointment”

“Better access to GP appointments I still wait 3 weeks”

- **Staffing levels** (10%) – many comments were made in relation to the need to improve staffing, specifically the numbers of nurses, surgeons, consultants and auxiliaries. Additional comments referred to the need to employ more front-line staff instead of management/senior staff, the importance of reinstating nursing bursaries and the need to improve staff retention.

“More staff in the NHS please. Why did they get rid of nursing bursaries?”

- **Waiting times for hospital appointments and procedures (9%).**

“I would like to see waiting time going down and when you been refer to hospital from my GP Service”

What improvements would you like to see? (n=286)	% of responses
Access to GP	18%
Staffing levels	10%
Waiting times for hospital appointments/procedures	9%
Investment / appropriate funding	6%
Staff attitude and training	6%
Travel and transport	6%
Mental health support services	6%
Keeping / more local services	5%
NHS staff salary / working conditions (Inc. better staff recognition)	4%
More joined-up, integrated services	4%
More efficient use of resources available within communities	3%
Staff restructuring (i.e. less managers, more effective leadership)	3%
More preventative health care	3%
Continuity of care	2%
Waiting times at A&E	2%
Repeat prescription service - scheduling / ordering / delivery	2%
Care for the elderly (Inc. dementia services)	2%
Comment about bad experience	2%
Food (Inc. more dietary options)	2%
Internal communication	1%
More up-to-date services	1%
Appointment systems (Inc. better administration, scheduling & less cancellations)	1%
Cleanliness	1%
Reduced medicines waste	1%
External communication (e.g. text reminders, appointment letters)	1%
More transparent communication regarding consultation	1%
Other	11%

Improved staffing was also identified most frequently by staff themselves (40%). Respondents emphasised the need to improve workforce numbers whilst addressing retention problems.

“Employ more nurses if possible”

“To hire more staff, as staffing levels are poor”

“Encourage government spend more on recruitment, without staff there is poor service.”

Other key areas for improvement identified by staff, included:

- **Improved communication** (21%) I.e. better communication from management and between different services
- **Eradication of staff parking charges / free staff parking** (16%)
- **Flexi-working to improve work/life balance** (14%)
- **Increased pay** (14%)
- **Improved patient / staff safety** (12%) (Including steps to address staff locking up buildings late at night & prevention of harassment from staff and members of the public)
- **Better management / more effective leadership** (12%) (Including better training for managers / those in a position of authority).

What can we do to make it better? (n=43)	% of responses
Improved staffing	40%
Improved communication	21%
Eradication of staff parking charges	16%
Flexi-working	14%
Increased pay	14%
Improved patient/staff safety	12%
Better management	12%
None / other	9%
Greater recognition of staff /treat staff like individuals not numbers	9%
Greater integration and collaboration (e.g. community wellbeing service & hospital / primary & secondary care)	9%

Improved funding and investment in resources and workforce	9%
Better use of IT/informatics	7%
Keep staff more up-to-date with changes / listen to staff	7%
More clinics	5%
Reopen/longer opening hours of Urgent Care Centre/Walk-in centres	5%
Improved access to mental health services	5%
Stop closing / moving services from South Tyneside	5%
Stop privatisation of NHS services	5%
Education (e.g. greater promotion of non-clinical services & most appropriate service to use for different conditions)	5%
More efficient transfer of patients by ambulance staff	2%
Improved GP access	2%
Local teams adopting their own interpretation of national local standards	2%
More care provision in the community	2%
Free university places for medical, nursing & social care students	2%
Clearer pathways for patient treatment	2%

8.4 What concerns them most about the future?

The greatest concern for individuals in this area is the **closure / movement of services** (22%), a large proportion of which commented negatively upon the movement of services that have resulted from Phase One of Path to Excellence. A perception existed among many that the merger of Trusts will result in the closure of South Tyneside District Hospital.

Others commented negatively on the closure of local walk-in centres / drop-in services and St Clare's Hospice in South Tyneside. In addition, a small number raised concern about the future of Ward 6 at Bishop Auckland and the emergency surgery department at Sunderland Royal Hospital.

“Concerned about children's A&E closing at night at South Tyneside District Hospital”

“Drip away from South Shields - no hospital left eventually”

“Everything seems to be going to Sunderland”

“Big concerns about potential changes at STDH - moving services from STDH to SRH - particularly A&E”

Other concerns identified, but to a slightly lesser extent, were:

- **GP access** (13%)
- **Future / privatisation of the NHS** (12%) – individuals raised concern about the impact that Brexit and changes in government will have on the NHS and whether the NHS will still provide a free service.
- **Travel and transport** (11%) – concerns related to parking difficulties at hospitals, public transport services to and from hospitals, the implications of travelling a further distance to receive care as well as the impact of the closure / movement of services on ambulance services.
- **Staffing levels** (10%).

“Climate emergency and how the NHS is mitigating/adapting to its implications”

“Leaving EU - what will happen to the NHS? Privatisation”

“Private companies making lots of money from parking - they must look in to it”

“When drop-in centre was here (Bunny Hill) people didn't have to travel to hospital - difficult / barrier for people with children and the elderly”

What concerns you the most? (n=357)	% of responses
Closure / movement of services	22%
GP access	13%
Future / privatisation of the NHS	12%
Travel and transport	11%
Staffing / overworked staff	10%
Waiting times for hospital appointments / procedures / A&E	5%
Increasing demands on system	3%
Comment about bad experience	3%
Staff and patients not being listened to	3%
Inappropriate diagnosis / patient has to push to be treated	2%
Infection control / cleanliness	2%
Staff attitude and training	2%
Patient education / more preventative work required	1%
NHS staff pay and working conditions	1%
Lack of integrated services	1%

Use of A&E (behaviour of drunks, prioritisation of certain groups)	1%
Continuity of care	1%
Prescriptions (rising costs and re-ordering difficulties)	1%
Lack of funding and investment	1%
Inappropriate use of services / lack of knowledge	1%
Inadequate mental health services	1%
Other	7%

9 Appendix

9.1 Demographics - ICS region

Age (n=157)					
18-24					1%
25-34					4%
35-44					16%
45-54					31%
55-64					27%
65-74					13%
75+					9%
Gender (n=157)					
Male					25%
Female					75%
Gender matches that registered at birth (n=157)					
Yes					100%
Postcode (n=168)					
CA1	1%	NE1	2%	SR1	1%
CA2	1%	NE3	5%	SR2	3%
CA5	1%	NE4	1%	SR3	1%
CA10	1%	NE5	1%	SR4	1%
CA14	1%	NE6	1%	SR5	1%
CA28	1%	NE7	1%	SR6	1%
DH1	4%	NE10	1%	SR7	1%
DH2	1%	NE11	1%	SR8	3%
DH3	2%	NE12	1%	TS1	1%
DH4	1%	NE13	2%	TS4	1%
DH6	2%	NE16	2%	TS7	1%
DH7	3%	NE22	1%	TS9	1%
DH8	1%	NE23	1%	TS10	2%
DH9	2%	NE24	1%	TS12	1%
DL1	4%	NE25	1%	TS15	1%
DL2	1%	NE26	1%	TS17	1%
DL3	2%	NE29	1%	TS18	1%
DL4	1%	NE31	1%	TS19	1%
DL5	2%	NE33	2%	TS20	1%
DL12	1%	NE34	2%	TS21	1%
DL13	2%	NE36	1%	Other	2%
DL14	3%	NE37	1%		
DL15	2%	NE38	1%		
DL16	1%	NE39	1%		
DL17	1%	NE40	1%		
		NE42	1%		
		NE43	1%		
		NE45	1%		
		NE61	2%		
		NE63	1%		
		NE64	1%		

	NE66	1%	
	NE66	1%	
Sexual orientation (n=147)			
Heterosexual or straight			3%
Gay woman or lesbian			1%
Gay man			1%
Pregnant or have been in the last two years (n=156)			
Yes			1%
No			99%
Marital status (n=155)			
Married			11%
Single			10%
Divorced or civil partnership dissolved			7%
Cohabiting			5%
Widowed or surviving partner from civil partnership			1%
In a civil partnership			1%
Separated			1%
Race / ethnicity (n=156)			
White: British			3%
White: Irish			2%
White: European			1%
Other			1%
Asian/British Asian: Chinese			1%
Black/Black British: Indian			1%
Religious beliefs (n=135)			
Christianity			36%
No religion			3%
Other			1%
Buddhist			1%
Disability, long-term illness or health condition (n=157)			
None			20%
A long standing illness or health condition			13%
A mental health difficulty			12%
A physical impairment or mobility issue			1%
A social / communication impairment			2%
A specific learning difficulty			2%
Blind or have a visual impairment uncorrected by glasses			4%
Deaf or have a hearing impairment			4%
An impairment, health condition or learning difference not listed			4%
Caring responsibilities (n=157)			
None			3%
Primary carer of a child or children (under 2 years)			20%
Primary care of a child or children (between 2 and 18 years)			1%
Primary carer of a disabled child or children			6%
Primary carer or assistant for a disabled adult (18+ years)			10%
Primary carer or assistant for an older person or people			11%
Secondary carer			11%
UK Armed Forces (n=159)			
Currently serving			6%
Used to serve			6%

Member of a current or former serviceman or woman's immediate family / household	6%
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9.2 Demographics - Tees Valley ICP

Age (n=31)	
25-34	6%
35-44	13%
45-54	26%
55-64	29%
65-74	16%
75+	10%
Gender (n=30)	
Male	17%
Female	83%
Gender matches that registered at birth (n=31)	
Yes	100%
Postcode (n=36)	
DL1	31%
DL3	11%
DH9	6%
TS1	3%
TS4	3%
TS7	3%
TS9	3%
TS10	11%
TS12	3%
TS15	3%
TS17	6%
TS18	6%
TS19	6%
TS20	3%
TS21	6%
Sexual orientation (n=28)	
Heterosexual or straight	96%
Gay woman or lesbian	4%
Pregnant or have been in the last two years (n=31)	
Yes	3%
No	97%
Marital status (n=30)	
Married	53%
Divorced or civil partnership dissolved	30%
Cohabiting	7%
Widowed or surviving partner from civil partnership	7%
In a civil partnership	3%
Race / ethnicity (n=29)	
White: British	93%
White: Irish	7%
Religious beliefs (n=29)	
Christianity	52%
No religion	38%
Other	10%

Disability, long-term illness or health condition (n=31)	
None	61%
A long standing illness or health condition	16%
A mental health difficulty	13%
A physical impairment or mobility issue	13%
Deaf or have a hearing impairment	6%
An impairment, health condition or learning difference not listed	6%
Caring responsibilities (n=31)	
None	48%
Primary carer of a child or children (under 2 years)	6%
Primary care of a child or children (between 2 and 18 years)	16%
Primary carer of a disabled child or children	3%
Primary carer or assistant for a disabled adult (18+ years)	6%
Primary carer or assistant for an older person or people	10%
Secondary carer	10%
UK Armed Forces (n=31)	
Currently serving	0%
Used to serve	3%
Member of a current or former serviceman or woman's immediate family / household	10%

9.3 Demographics – Durham, South Tyneside and Sunderland ICP

Age (n=72)				
18-24			1%	
25-34			4%	
35-44			15%	
45-54			29%	
55-64			25%	
65-74			13%	
75+			13%	
Gender (n=73)				
Male			25%	
Female			75%	
Gender matches that registered at birth (n=71)				
Yes			100%	
Postcode (n=94)				
DH1	11%	NE31	5%	
DH2	1%	NE32	1%	
DH3	1%	NE33	5%	
DH4	2%	NE34	5%	
DH6	4%	NE36	1%	
DH7	5%	NE37	1%	
DH9	6%	NE38	1%	
DL2	1%	SR1	1%	
DL4	1%	SR2	5%	
DL5	4%	SR3	1%	
DL13	3%	SR4	2%	
DL15	4%	SR5	5%	
DL16	2%	SR6	4%	
DL17	2%	SR7	1%	
		SR8	5%	
Sexual orientation (n=70)				
Heterosexual or straight			97%	
Gay woman or lesbian			1%	
Other			1%	
Pregnant or have been in the last two years (n=73)				
Yes			1%	
Marital status (n=73)				
Married			70%	
Single			12%	
Divorced or civil partnership dissolved			3%	
Cohabiting			8%	
Widowed or surviving partner from civil partnership			5%	
Separated			1%	
Race / ethnicity (n=76)				
White: British			93%	
White: Irish			3%	
White: European			1%	
Other			1%	

Asian/British Asian: Chinese	1%
Religious beliefs (n=69)	
Christianity	74%
No religion	23%
Other	3%
Disability, long-term illness or health condition (n=70)	
None	61%
A long standing illness or health condition	26%
A mental health difficulty	16%
A physical impairment or mobility issue	11%
A social / communication impairment	1%
A specific learning difficulty	3%
Blind or have a visual impairment uncorrected by glasses	1%
Deaf or have a hearing impairment	4%
An impairment, health condition or learning difference not listed	3%
Caring responsibilities (n=70)	
None	70%
Primary carer of a child or children (under 2 years)	10%
Primary care of a child or children (between 2 and 18 years)	0
Primary carer of a disabled child or children	1%
Primary carer or assistant for a disabled adult (18+ years)	1%
Primary carer or assistant for an older person or people	11%
Secondary carer	10%
UK Armed Forces (n=76)	
Currently serving	1%
Used to serve	8%
Member of a current or former serviceman or woman's immediate family / household	4%

9.4 Demographics – North of Tyne and Gateshead ICP

Age (n=45)				
25-34			4%	
35-44			18%	
45-54			36%	
55-64			29%	
65-74			9%	
75+			4%	
Gender (n=45)				
Male			29%	
Female			71%	
Gender matches that registered at birth (n=44)				
Yes			100%	
Postcode (n=60)				
NE1	5%	NE29	2%	
NE3	15%	NE40	2%	
NE4	2%	NE42	2%	
NE5	2%	NE43	2%	
NE6	2%	NE45	2%	
NE7	2%	NE46	2%	
NE10	2%	NE47	2%	
NE11	2%	NE61	7%	
NE12	3%	NE63	3%	
NE13	5%	NE64	2%	
NE16	7%	NE65	7%	
NE22	3%	NE66	2%	
NE24	2%	TD14	2%	
NE25	3%	TD15	8%	
NE26	2%			
Sexual orientation (n=42)				
Heterosexual or straight			93%	
Gay woman or lesbian			5%	
Gay man			2%	
Pregnant or have been in the last two years (n=44)				
No			100%	
Marital status (n=43)				
Married			70%	
Single			14%	
Divorced or civil partnership dissolved			7%	
Cohabiting			9%	
Race / ethnicity (n=43)				
White: British			93%	
White: European			5%	
Asian/British Asian: Indian			2%	
Religious beliefs (n=43)				
Christianity			53%	
No religion			44%	
Buddhist			2%	
Disability, long-term illness or health condition (n=43)				

None	74%
A long standing illness or health condition	16%
A mental health difficulty	7%
A physical impairment or mobility issue	7%
Blind or have a visual impairment uncorrected by glasses	2%
Deaf or have a hearing impairment	2%
An impairment, health condition or learning difference not listed	5%
Caring responsibilities (n=43)	
None	47%
Primary carer of a child or children (under 2 years)	2%
Primary care of a child or children (between 2 and 18 years)	35%
Primary carer or assistant for a disabled adult (18+ years)	14%
Primary carer or assistant for an older person or people	9%
Secondary carer	12%
UK Armed Forces (n=44)	
Currently serving	0
Used to serve	5%
Member of a current or former serviceman or woman's immediate family / household	7%

9.5 Demographics – Path to Excellence

Age (n=51)			
25-34		4%	
35-44		22%	
45-54		29%	
55-64		25%	
65-74		12%	
75+		8%	
Gender (n=51)			
Male		18%	
Female		82%	
Gender matches that registered at birth (n=49)			
Yes		100%	
Postcode (n=75)			
DH1	13%	SR1	1%
DH2	1%	SR2	7%
DH3	4%	SR3	1%
DH4	3%	SR4	3%
DH6	5%	SR5	7%
DH7	7%	SR6	5%
DH8	1%	SR7	1%
DL17	3%	SR8	7%
NE12	3%	TS21	3%
NE31	7%		
NE32	1%		
NE33	7%		
NE34	7%		
NE36	1%		
NE37	1%		
NE38	1%		
Sexual orientation (n=48)			
Heterosexual or straight		94%	
Gay woman or lesbian		4%	
Other		2%	
Pregnant or have been in the last two years (n=51)			
No		100%	
Marital status (n=51)			
Married		65%	
Single		12%	
Divorced or civil partnership dissolved		8%	
Cohabiting		8%	
Widowed or surviving partner from civil partnership		6%	
Separated		2%	
Race / ethnicity (n=51)			
White: British		91%	
White: Irish		4%	
White: European		2%	
Other		2%	
Asian/British Asian: Chinese		2%	

Religious beliefs (n=47)	
Christianity	70%
No religion	28%
Other	2%
Disability, long-term illness or health condition (n=51)	
None	57%
A long standing illness or health condition	25%
A mental health difficulty	20%
A physical impairment or mobility issue	8%
A social / communication impairment	2%
A specific learning difficulty	4%
Blind or have a visual impairment uncorrected by glasses	2%
Deaf or have a hearing impairment	6%
An impairment, health condition or learning difference not listed	4%
Caring responsibilities (n=51)	
None	55%
Primary carer of a child or children (under 2 years)	0
Primary care of a child or children (between 2 and 18 years)	10%
Primary carer of a disabled child or children	0
Primary carer or assistant for a disabled adult (18+ years)	2%
Primary carer or assistant for an older person or people	7%
Secondary carer	10%
UK Armed Forces (n=53)	
Currently serving	2%
Used to serve	11%
Member of a current or former serviceman or woman's immediate family / household	6%

