

Harbottle: Phase 2 Engagement

**Report on survey
and feedback from
engagement
sessions**

September 2016



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Background

Harbottle Surgery was a GP practice in Northumberland delivering services to approximately 836 patients under a Personal Medical Services Agreement. The practice contract was terminated on 28 August 2015 and patients were written to in order to inform them of the impending closure of the practice. NHS England subsequently entered into an arrangement with Rothbury Practice to deliver services from Harbottle. This arrangement is due to end on 30 November 2016.

In January 2016, NHS England commenced phase 1 of a two-phase engagement programme with patients and stakeholders to find out what was important to the patients registered with the former Harbottle surgery, with the aim to determine their views on the future of primary care services in the area. Since then, NHS Northumberland Clinical Commissioning Group (the CCG), has taken over the responsibility for the commissioning of primary medical care services.

The survey that was sent out from NHS England to former patients of the practice ran for six weeks in total and closed at the end of February 2016. There were 117 responses in total.

A summary of the responses to the survey was sent to patients on 1 August 2016 (see appendix 1).

The engagement showed that people were most concerned about GP access and getting appointments quickly. A smaller number of people commented about a continuation of local GP services in the village and there was also some frustration with the interim pharmacy arrangements.

Working with NHS England, local councillors and Healthwatch Northumberland, the CCG considered all of the responses and used these to develop three options to take forward to phase two of engagement.

1. An existing Northumberland practice providing a branch surgery at Harbottle;
2. Multiple existing GP practices providing outreach clinics on a sessional basis from Harbottle Surgery;
3. Cease current services.

The CCG sought the views of patients formerly registered with the practice and asked them to complete a second survey (appendix 2 shows the letter and survey questions), also made available on-line, as part of phase 2 of the engagement process. Local stakeholders were also sent briefings regarding this approach (appendix 3). An additional mailing from NHS England was made to patients previously registered in Harbottle, as a problem with the original mailing was identified. All patients received this letter, plus another copy of the survey. A copy of this letter is included in appendix 4.

The second phase of engagement closed on 8 September 2016.

Former patients of the practice were encouraged to have their say, including giving their views on the current GP service they receive. The CCG wished to understand whether or not the low response rate to the original survey was related to the level of contentment with existing practice services.

In addition to the survey, patients were also directly invited to give further information on the options or to raise issues in person at a series of events run by Healthwatch Northumberland in the Star Inn, Harbottle Village on the following dates:

- Monday 15 August, 2 – 4 pm;
- Wednesday 17 August, 6 – 8 pm;
- Wednesday 31 August, 2 – 7.3 pm;
- Thursday 8 September, 2 – 7.30 pm.

A report on these discussions is included as appendix 5.

Feedback from the survey

There were 153 responses received to the 735 surveys sent out to patients previously registered with Harbottle Surgery in 2015. This resulted in a 20.8% return rate. Most people responded using the freepost address. There were 12 responses made online via the survey weblink.

Question 1: Which of the following options describes best how you feel about the service you receive from your current GP practice?

There were 86 (56.2%) respondents who stated they were either satisfied, happy or very happy with their current GP practice. There were 60 (39.2%) who said that they were unhappy or very unhappy with their current GP practice. 7 (4.6%) people did not respond to this part of the question.

Question 1: Which of the following options describes best how you feel about the service you receive from your current GP practice?

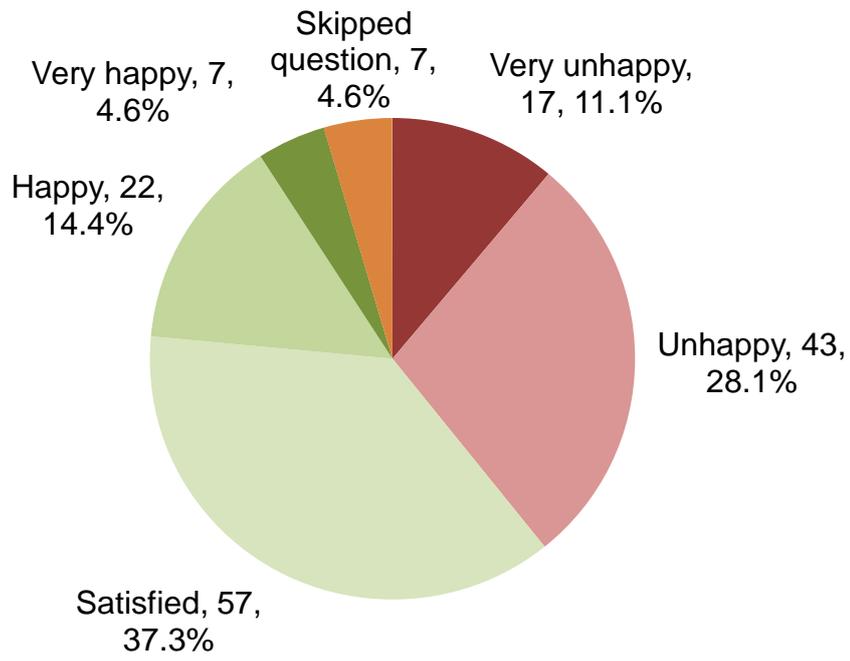
Answer Options	Response Count	Percentage
Very unhappy	17	11.1
Unhappy	43	28.1
Satisfied	57	37.3
Happy	22	14.4
Very happy	7	4.6

Skipped question	7	4.6
Responses to survey	153	100.0

There were 40 (26.1%) respondents who commented on why they are unhappy or very happy about their current GP practice. These are themed below. Note some people mentioned more than one theme.

- Difficulty getting or waiting for appointments (18 mentions)
- Negative comments about patient experience of the current GP service (13 mentions)
- The engagement process (the surveys that were sent out in phase 1 and phase 2), closure of Otterburn (4)
- Continuity of care (4)
- Need more sessions in Harbottle or sessions not long enough (1)
- Positive comments about patient experience of the current GP service (3)
- Lack of public or private transport or distance to the current service (8)
- Valuing previous service in Harbottle (2)
- Would like to see sole provider in Harbottle (1)
- Happily registered elsewhere (2)
- People from other areas filling appointments in Harbottle (1)
- Have not registered/ will not re-register until a health problem is encountered (3)
- Reluctance on behalf of the Rothbury practice to encourage use of Harbottle site (1)

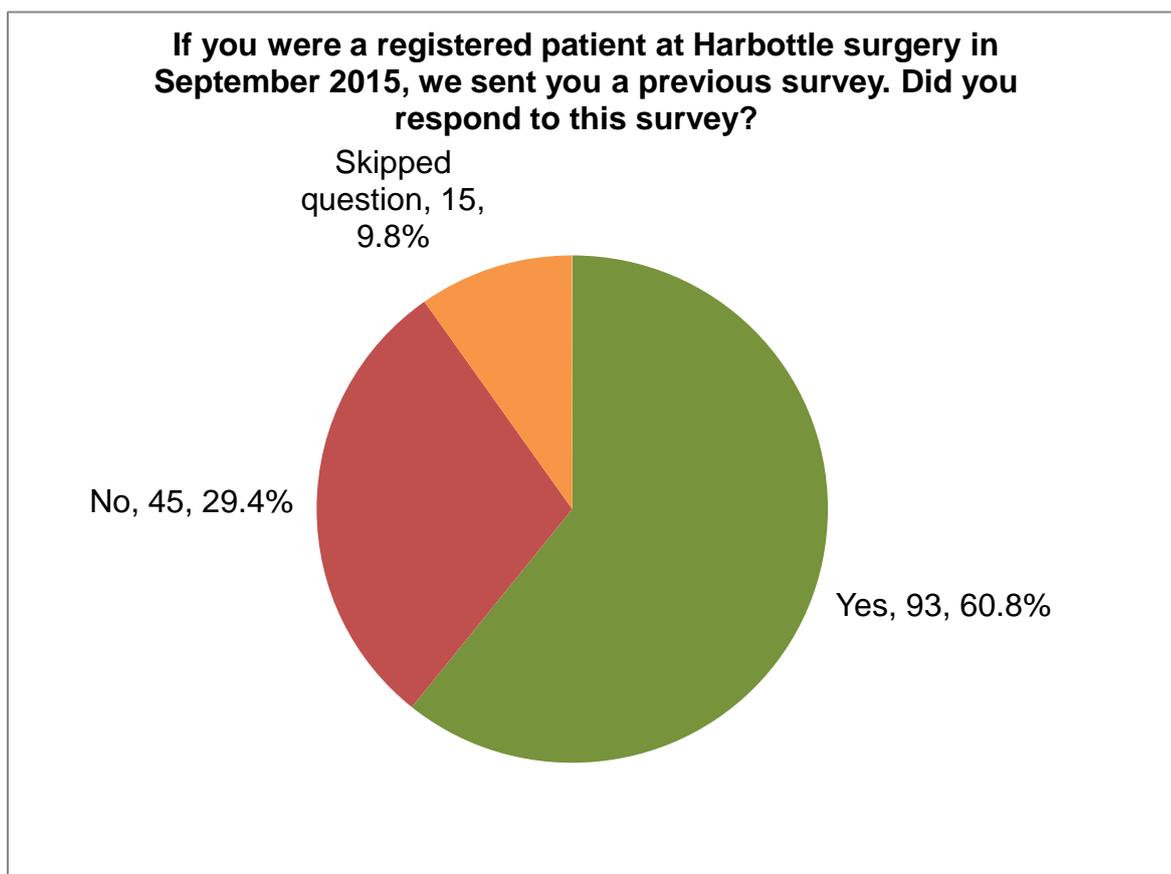
How people feel about the service they receive from their current GP practice



Question 2: If you were a registered patient at Harbottle surgery in September 2015, we sent you a previous survey. Did you respond to this survey?

Question 2: If you were a registered patient at Harbottle surgery in September 2015, we sent you a previous survey. Did you respond to this survey?

Answer Options	Response Count	Percentage
Yes	93	60.8
No	45	29.4
<i>Skipped question</i>	15	9.8
Total	153	100.0



Reasons why people did not respond to the first survey

Where people gave a reason for not responding, there were 20 (13.1%) people who made comments about the process; this was either generally about the attempts to find a provider in Harbottle or about the surveys in particular. This included not receiving a survey, the layout or the questions. There were 4 mentions of being away at the time, 2 people said they were responding on behalf of their family (one with 4 and the other with 5 people in the household). There were 2 people who said they did not remember, another 3 people who had registered elsewhere (and happy with the service) and someone said they forgot.

Question 3: Do you agree with the comments and feedback made by other patients in response to the previous survey?

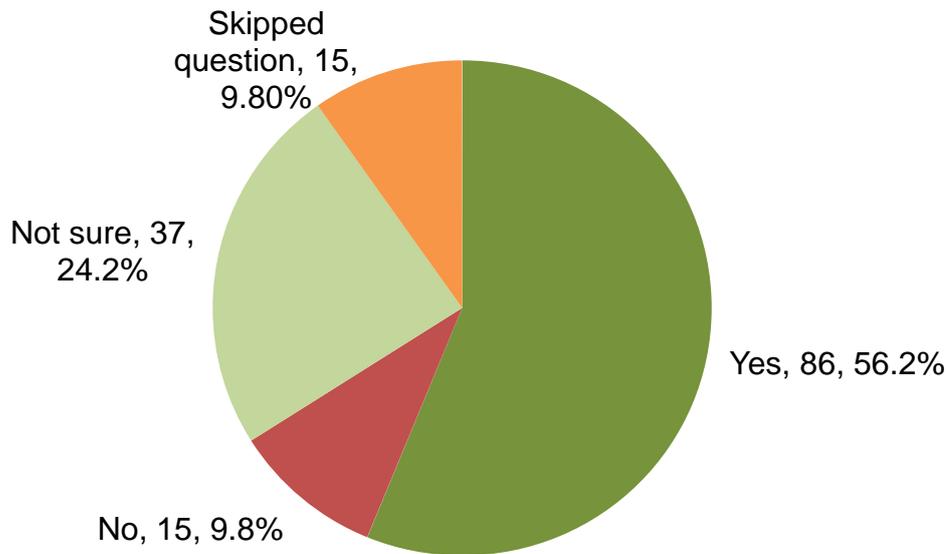
Over half of people responding to the survey (86 – 56.2%) agreed with the comments and feedback from phase 1 of the engagement. Over a quarter (52 – 34.0%) were not sure or did not agree.

A full breakdown of the responses is set out in the table and chart below.

Question 3: Do you agree with the comments and feedback made by other patients in response to the previous survey?

Answer Options	Response Count	Percentage
Yes	86	56.2
No	15	9.8
Not sure	37	24.2
Skipped question	15	9.8
Total	153	100.0

Do you agree with the comments and feedback made by other patients in response to the previous survey?



The following are the themes from those people who commented, where they either did not agree with the summary information, or were unsure whether they did or not (number of mentions in brackets).

- Unhappy with process, didn't get survey, survey design, "people not numbers" (10)
- Need more information (3)
- Expectations too high /Not viable (2)
- Not needed doctors (2)
- Outcomes not as good as old practice, people have different experiences (2)
- Travel; to Rothbury generally and picking up prescriptions (3)
- Mixed – can't please everyone, personal views (2)
- People's expectations are too high/ not viable (2)
- Can't remember (1)
- Happy with pharmacy (1)
- Happy with waiting times (1)
- Improve pharmacy hours(1)
- Not happy with Rothbury (1)
- Keep pharmacy with surgery (1)
- Rothbury resident (1)

Question 4: Do you have any further comments or feedback around what is important to you when accessing GP services, location and opening hours? We are also interested to hear what you think is important about pharmacy services, particularly around how medicines are dispensed and collected.

This was an opportunity for people to discuss any issues they had not already mentioned or comment more specifically about pharmacy services.

There were many comments made about the need for access to a local service, either a standalone GP service or a service with more sessions or varied opening times to, and provision of a pharmacy. People want to see waiting for appointments reduced, and the process for accessing medicines improved. There were various comments about individual experiences in this respect. Inconvenience, transport issues and negative experiences of existing service in Rothbury were themes. There were some comments about positive experiences of the service. A full list of comments is available in appendix 6.

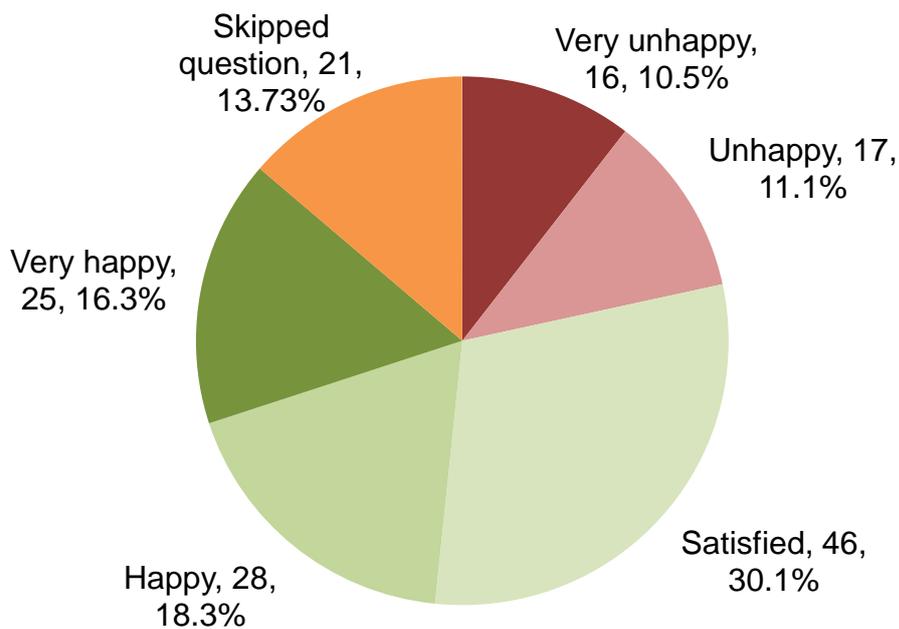
Question 5: How would you feel if an existing Northumberland practice provided a branch surgery at Harbottle?

There were 99 people (64.7%) who stated they would be either satisfied, happy or very happy if a Northumberland practice provided a branch surgery in Harbottle. There were 33 (21.6%) people who stated they would be unhappy or very unhappy with that outcome. A full breakdown of the responses is set out in the table and chart below.

Question 5: How would you feel if an existing Northumberland practice provided a branch surgery at Harbottle? (please tick one box below)

Answer Options	Response Count	Percentage
Very unhappy	16	10.5
Unhappy	17	11.11
Satisfied	46	30.7
Happy	28	18.3
Very happy	25	16.3
Skipped question	21	13.7
Total	153	100.0

How would you feel if an existing Northumberland practice provided a branch surgery at Harbottle?



Those people who stated that they were very unhappy or unhappy about a branch surgery gave the following reasons (some people mentioned more than one theme):

- They wanted it as it was, before the closure
- Harbottle Surgery was so handy to get to pharmacy medicines etc
- Anything approaching previous service (prior to September 2015) would be excellent
- There were comments about bad weather "In bad weather even Rothbury is out of bounds"
- One person said it's "Better than nothing".

There were a couple of comments about patient choice:

- Only practice if like the local vets monopoly means there is no [choice]
- This option removes patient choice.

People commented on wanting more sessions at different times:

- Later surgery needed for nurse appointment
- Must be five days a week, morning and afternoon, not just two morning a week.

Other comments included:

- Extra provision for the satellite clinics essential because of housing expansion
- Comment about not helping someone who lives in the Rede Valley
- Management of the practice irrelevant
- Unacceptable, find new options
- "I'd have to put up with it - but don't believe it's what the NHS is about."

There were also mentions of wanting the services of a standalone practice including comments about travelling and coping with numbers of patients in the area (9)

Question 6: How would you feel if a variety of other existing practices provided outreach clinics on a sessional basis from Harbottle surgery?

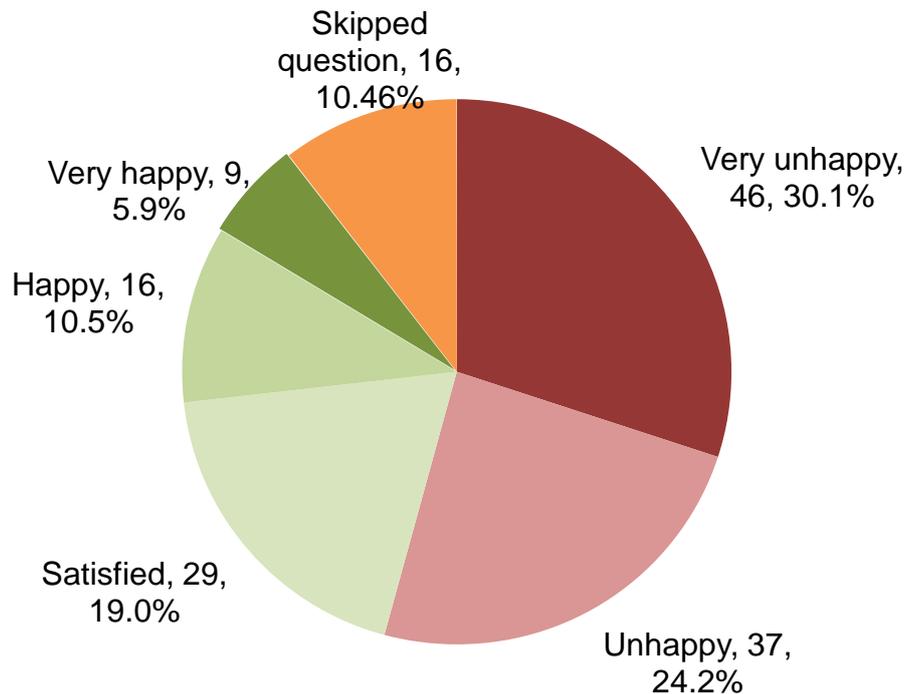
Over half (83 – 54.3%) of the people stated they would either be unhappy or very unhappy about a potential solution where more than one practice provides outreach services.

There were 54 (36.0%) people who stated they would be satisfied, happy or very happy with this approach. A full breakdown of the responses is set out in the table and chart below.

Question 6: How would you feel if a variety of other existing practices provided outreach clinics on a sessional basis from Harbottle surgery? (Please tick one option below).

Answer Options	Response Count	Percentage
Very unhappy	46	30.1
Unhappy	37	24.2
Satisfied	29	19.0
Happy	16	10.5
Very happy	9	5.9
<i>skipped question</i>	16	10.5
<i>Total</i>	153	100.0

How would you feel if a variety of other existing practices provided outreach clinics on a sessional basis from Harbottle surgery?



Reasons people gave for being **unhappy or very unhappy** if this was the future for GP services in the area were:

- It would be detrimental to patient continuity of care (16)
- Not supporting the idea at all (6)
- A few thought it an acceptable compromise if a service remained in Harbottle (3)
- Keep standalone service (5)

Other comments were:

- Better to have choice ... "the best would triumph" (1)
- Monday to Friday service required (1)
- Bellingham has already withdrawn provision for Otterburn and Byrness patients;
- General comments about how complicated and confusing it might be (7)
- Wants to see [previous staff] who were excellent (1)
- Concern about needing a doctor on the days there are no surgeries and being unable to travel there (1)
- It would give some choice back and bit of competition but who's responsible for building; worry about long term commitment (1)
- Levels of uncertainty, not being known or understood (1)
- Possibly support the idea but needs more information about it (3).
- That to me would not be an option (1)

- Transport is a problem in winter with winter weather (1)
- Lack confidence in whether this can be done given problems with process for sending out surveys (1)

Question 7: How would you feel if GP services in Harbottle were to stop?

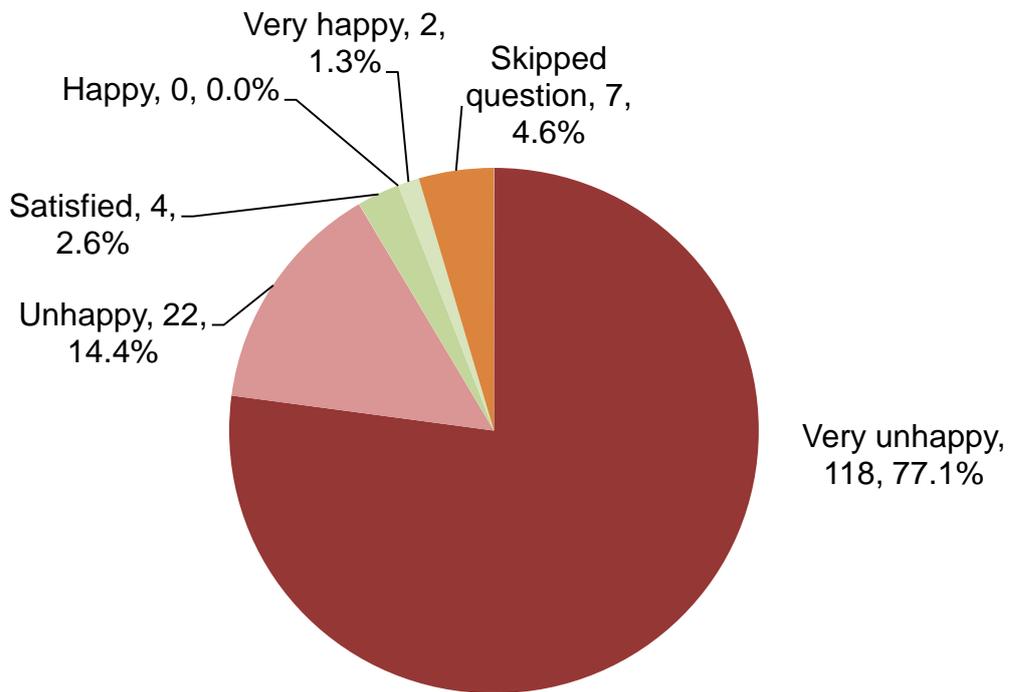
Most patients who responded to the survey were either unhappy or very unhappy about services in Harbottle being stopped (140 – 91.5%).

There were 6 people who stated they would be satisfied (6 – 3.9%) with this situation or very happy.

A full breakdown of the responses is set out in the table and chart below.

Question 7: How would you feel if GP services in Harbottle were to stop?		
Answer Options	Response Count	Percentage
Very unhappy	118	77.1
Unhappy	22	14.4
Satisfied	4	2.6
Happy	0	0.0
Very happy	2	1.3
<i>skipped question</i>	7	4.6
<i>Total responses to survey</i>	153	100.0

How would you feel if GP services in Harbottle were to stop?



The comments and reasons people gave in their surveys were many and varied and continue the themes picked up in the other free text sections of the survey. People reflected their feelings about the loss of the previous service, the need for a local service in the village, particularly for older people. They refer to the lack of transport and the rural nature of the location. People stated how much they valued the previous service in Harbottle. There were also comments which reflect how people feel with regard to not being listened to, how long it has taken and some comments about the process of engagement. These comments are set out in appendix 7.

Demographics of the people who responded to the phase 2 survey

- More female patients (77 – 50.3%) responded than male patients (69 – 45.1%); Two people preferred not say and five respondents skipped the question.
- There were 141 (92.2%) people who stated their age on the survey. The largest proportion of people responding being between the ages of 55 and 84.
- There was 1 person who said he/she had undergone gender reassignment.

A table showing the age of respondents by age group is set out below.

Age Group	Number	Percentage
Under 18	2	1.3
18-24	1	0.7
25-34	3	2.0
35-44	10	6.5
45-54	15	9.8
55-64	39	26.0
65-74	36	23.5
75-84	29	19.0
85 and over	6	3.9
Skipped	12	7.8
Total	153	100.0

- Over half of the people responding to the phase 2 survey were married, living with a partner or in a civil partnership (88 – 57.7%). There were 56 (36.6%) who stated they were either single, divorced, widowed or separated at the time of the survey.
- Ethnicity: 115 (75.7%) people responded saying they were White British or similar.
- Sexual orientation: 110 (71.9%) respondents stated they were heterosexual or straight, 3 (1.9%) said they were gay or lesbian.
- There was one person who said they were pregnant or had a child under 2.
- Most people responding to the survey live in the village (based on their responses to the first 4 or 5 digits of their post code (adapted where appropriate to protect patient anonymity)).

Post code	Response Count	Percentage
NE65 7	88	57.5
NE19 1	7	4.6
NE62	5	3.3
NE65	1	0.7
NE66	1	0.7
NE66 4	1	0.7
NE19	1	0.7
NE48 1	1	0.7
NE48 2	1	0.7
NE65 4	1	0.7
Harbottle	1	0.7
Skipped	7	4.6
Total	153	100.0

- 23 (15.0%) respondents said they are a parent or guardian who generally has to accompany a child or young person to their GP appointment.
- 15 (9.8%) respondents said they care for someone with a long-standing illness or disability.

About people on patient list considered to need extra support

There were too few surveys returned (17) to analyse as a separate group. Individual responses have been reviewed and judged to reflect the general themes and opinions of the main body of people. Most notable is that they all said they would be very unhappy should the service discontinue completely (question 7). Their comments were included – “absolute disaster”, “I can’t live this way without transport”, “I would feel totally devastated”, “there is no public transport”, “I already rely on other people to get me to Harbottle”.

Healthwatch Report

There were 43 people who attended the sessions run by Healthwatch. The themes were collated from what people said and their responses to a separate survey as part of this process were: access, transport and travel time, the desire for a local service, continuity of care, how much patients miss the dispensing service, comments about confusion over the main surveys, and the support required for rural communities. Healthwatch also made other comments about process, the closure of Otterburn and local patients' understanding of process and decision-making. The full report is included in appendix 8.

Conclusions

Although more patients responded to the surveys than the last time patients were contacted, the response rate is still short of what would have been hoped for. At least 60% had taken part in the previous phase. Working age people were not represented well as the majority of responses came from the over 55 age group, reflecting views coming from those who are potentially higher users of health services.

Those who did participate, either through the survey or by attending the Healthwatch sessions held strong views.

The themes and feedback through Healthwatch supports those views expressed in the survey.

Many of the patients previously registered with Harbottle surgery want to keep a service in the village, some want to keep a full standalone service in Harbottle. However, there is clear support for a branch surgery with over 60% of people saying they would be satisfied, happy or very happy if this was the future option.

The idea of outreach services is only supported by about half of the respondents. People feel that this approach will lead to confusion and do not have confidence in how the service might run if many providers are involved.

There are mixed views on the quality and accessibility of the pharmacy service reflected in comments made. Much of the feedback is about being able to access the service (either by attending Rothbury or delivery options in the village) and waiting for prescriptions.

Patients are concerned about continuity of care from their GP service.

There was the odd comment about 'getting on with it', however it can be seen that over 90% of the people responding to this second phase survey stated they would be very unhappy if the service stopped altogether. The people who took part in the phase 2 engagement, as with phase 1, feel very strongly that they want to keep a local service.

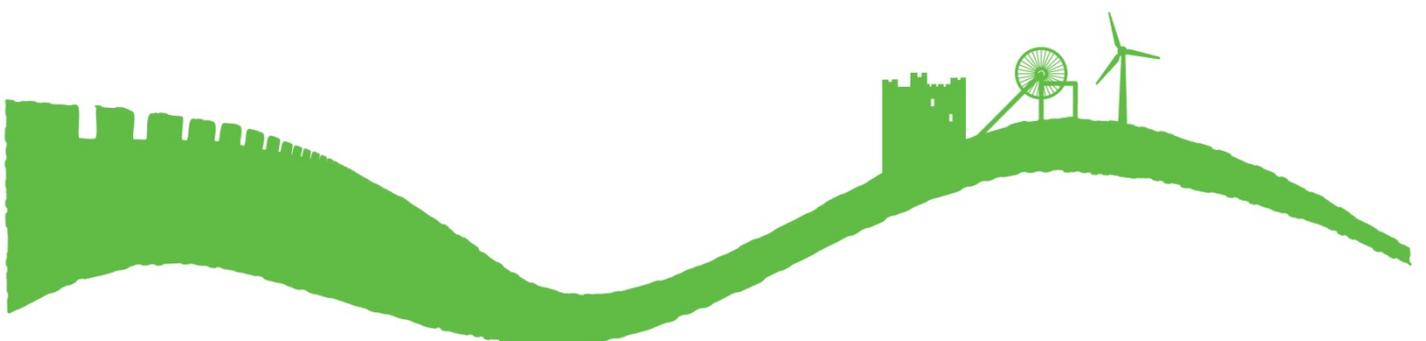
Harbottle

Survey of former patients registered with the practice

Summary of responses



August 2016



Who received the survey?

All patients over 16 (533) previously registered with Harbottle Surgery on 01 September 2015 were sent a survey to complete. The survey ran for six weeks from 18 January to 29 February 2016.

Who responded?

A total of 117 people responded to the survey out of a possible 533 patients previously registered with Harbottle Surgery on 01 September 2015, a response rate of 22%.

- 54 (46% of respondents) said they had long-term physical or mental ill health/disability, or problems related to old age
- 23 (20% of respondents) described themselves as carers
- 15 (13% of respondents) were a parent, guardian or grandparent accompanying someone to appointment
- 107 (91% of respondents) responded saying that they were ethnic group – white

There were 62 (53% of respondents) female respondents, 45 (38% of respondents) male respondents and the most responses were received from the 65-74 age group, although there were responses from all age groups over 16. Ten people (8% of respondents) did not state their gender.

What people said

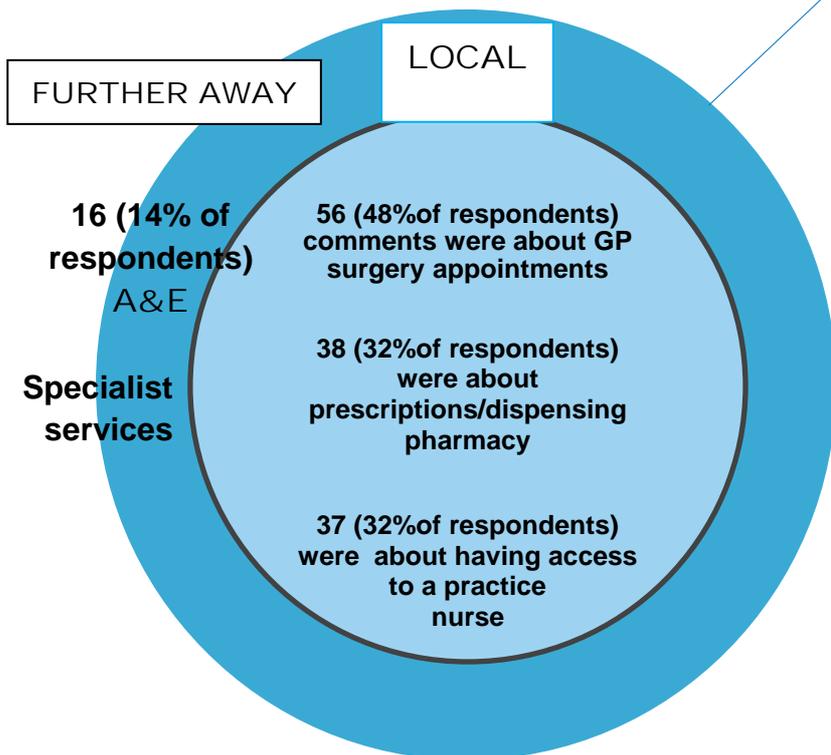
All the numbers and percentages relate to the numbers of comments in each theme mentioned by each patient who responded to the survey. 'Other comments' relate to those raised by only one to three people responding to the survey. The total numbers of comments from the various themes in each question may be more than the number of people responding to the survey. Percentages are rounded to the nearest whole number.

What is important to you when accessing GP services?

- 83 (71% of respondents) said availability and a short lead time for appointments
- 41 (35% of respondents) said a locally based service
- 29 (25% of respondents) said continuity of GP contact – (seeing the same GP)

Although 13 (11% of respondents) said "Everything!", another 12 (10% of respondents) of comments were about not minding which doctor or nurse they see and 9 (8% of respondents) people responding commented about not being concerned about the accommodation/place they see the doctor.

What needs to be ...?



Wide-ranging comments about what could be done further away:

- Admin
- Check-ups for medication / long-term conditions
- Dietician
- Eye care
- General health
- Home visits by doctor
- Mother and toddlers
- No further than 10/12 miles away
- Non-emergency
- Nursing services
- Occupational Therapy
- Oncology
- Pharmacy / repeat prescriptions
- Physio
- Provided people have transport
- Some clinics and minor procedures
- Specialist tests / routine screening
- Telephone / internet consultations
- X-rays

A few said “*They all can*”, [patients referring to local provision of services provide services locally] some said “*I don’t have enough knowledge*”.

When does the service need to be there?

The responses people made can be grouped into the following themes:

- 24 (21% of respondents) “Every day”
- 23 (20% of respondents) said “As soon as possible/when needed”
- 17 (15% of respondents) “After school/work/evenings”
- 12 (10% of respondents) “At least five days a week”

Other comments, suggestions, questions or concerns raised were:

- 21 (18% of respondents) said “We should have the service we used to have; now we get two half days and no dispensary”
- 14 (12% of respondents) “The service should be patient-led/consider our needs”
- 10 (9% of respondents) “It’s too reliant on rural bus service”

What people want from local pharmacy services

How people feel about the pharmacy service:



Questions, suggestions or concerns generally in relation to Pharmacy services were about:

- The need to travel for diagnosis or dispensing and the inconvenience of collecting prescriptions from Rothbury (the strongest theme)
- The long wait for prescriptions
- Opening times not being suitable for working people
- How they missed the surgery/dispensary in Harbottle
- The lack of disabled parking at the pharmacy providing the service in Rothbury

There were 45 (57% of respondents) people who said they wanted a pharmacy pick up service back in Harbottle. The same number of comments were made about how the service could be improved generally: “by being back in Harbottle” (45 comments - 57% of respondents).

There were 79 people (68% of respondents) who said they wanted local pick up points.

From these 79 people, suggestions for location for this services were:

- 42 (53% of the 79 people who wanted local pick up points) people suggested the surgery/village hall
- 21 (27% of the 79 people who wanted local pick up points) people suggested the pub/post office

Comments overall about pick up times for medicines were spread across the day:

Response	Number	Percentage of the 79 people who wanted local pick up points
Mornings	18	23%
Afternoons	12	15%
Evenings	8	10%
As was/ is	13	16%
Every day (all day/comparative with working week/ hours)	40	51%

**Appendix 2: Letter and survey
questions**

1 August 2016

County Hall
Morpeth
Northumberland
NE61 2EF

Tel: (01670) 335178
Fax: (01670) 335189

Dear patient

Harbottle GP Services

As a former patient of Harbottle Surgery, I write today to update you on future primary care (GP services) in your area following the closure of Harbottle surgery in August 2015.

In January this year, NHS England contacted patients who were registered with Harbottle surgery in September 2015. Since then, NHS Northumberland Clinical Commissioning Group (the CCG) has taken on additional responsibilities for GP services, which is why we are providing this update.

We entered a period of engagement in January that was designed to give former patients the opportunity to have their say. If you were registered as a patient with Harbottle surgery on 1 September 2015, we asked you to participate in a short survey on future GP services. The survey ran for six weeks, closing at the end of February and was completed by 117 former patients.

May I apologise for the time it has taken to provide you with the results of the survey. I can assure you a lot of work has taken place in the background to explore future opportunities during this period. This took slightly longer than expected but, to ensure the continuation of services in Harbottle, the current temporary arrangement has been extended from 18 October to 30 November 2016, until the way ahead is decided.

A summary of the responses we received is enclosed and I hope you will find this useful. In brief, the feedback indicated that people are most concerned about GP access and getting appointments quickly. A smaller number of people commented about a continuation of local GP services in the village and there is also some frustration with the interim pharmacy arrangements.

Working with NHS England, local councillors and Healthwatch Northumberland, we have carefully considered all of the responses and used these to develop the following options to take forward:

1. An existing general practice surgery in Northumberland providing a branch surgery in Harbottle.
2. A variety of existing general practice surgeries providing outreach clinics on a sessional basis in Harbottle.
3. Cease current services.

We now seek your views on the options listed above and are asking all former patients to complete a second survey, (available at <https://www.surveymonkey.co.uk/r/FPHQJKC>) as we enter the next phase of our engagement process. Further information on the options is included on the survey, please take the time to read this. The survey is now open and you have until 8 September to complete it.

We also want to ensure that as many former patients as possible have had the opportunity to have their say, so have included a question in this second survey that relates to the responses to the survey in January. If you were not registered with Harbottle surgery in September 2015, you would not have received the previous survey, and this will give you the opportunity to add your comments and feedback to what other former patients have already said. However, if you were registered at the surgery in September 2015, this will give you another opportunity to add any further comments or feedback.

Even if you have little to say about the options for the future of Harbottle surgery, we would be grateful if you could complete the survey which includes a question asking for your views on the current GP service you receive. One reason which may explain the low response rate to the original survey is that patients are content with the service they are receiving elsewhere. We have included this additional question as we would like to establish if this is the case or not.

If you wish to gain further information on the options or to raise any issues in person, a number of drop-in meetings have been arranged. These sessions will be attended by the CCG and NHS England alongside representatives from Healthwatch Northumberland and are taking place at the following times:

Date	Time	Venue
Monday 15 August	2.00 – 4.00pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Wednesday 17 August	6.00 – 8.00pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Wednesday 31 August	2.00 – 7.30pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Thursday 8 September	2.00 - 7.30pm	The Star Inn, Harbottle, Morpeth, NE65 7DG

If you will have difficulty attending one of the meetings or would like help completing the survey please telephone Healthwatch Northumberland on 03332 408 468 or email info@healthwatchnorthumberland.co.uk.

We will let you know the results of this second phase of engagement in the autumn. Your views continue to be important to us as we seek to ensure the delivery of sustainable primary care services in the area. Please take this further opportunity to have your say.

Yours sincerely

Siobhan Brown
Transformation Director

Enclosure:
 Summary of responses
 Phase 2 Patient Survey

Survey questions

1. Which of the following options best describes how you feel about the service you receive from your current GP practice? (Please tick one box below).

Very unhappy / Unhappy / Satisfied / Happy / Very happy

Please provide any additional comments you have about the service you receive from your GP below:

2. If you were a registered patient at Harbottle surgery on 01 September 2015, we sent you a previous survey. Did you respond to this survey?

Yes / No - please tell us why

3. Former patients who did respond to the last survey said they had some concerns about GP access and short lead times for appointments. A smaller number of people commented about a continuation of local GP services in the village and there was also some frustration with the interim pharmacy arrangements. A more detailed summary of the feedback is included with this survey and the accompanying letter.

Do you agree with the comments and feedback made by other patients in response to the previous survey?

Yes / No / Not sure Why do you say that?

4. Do you have any further comments of feedback around what is important to you when accessing GP services, location and opening hours? We are also interested to hear what you think is important about pharmacy services, particularly around how medicines are dispensed and collected.

Options Going Forward

5. How would you feel if an existing Northumberland practice provided a branch surgery at Harbottle? (Please tick one box below).

Very unhappy / Unhappy / Satisfied / Happy / Very happy

Additional comments:

6. How would you feel if a variety of other existing practices provided outreach clinics on a sessional basis from Harbottle surgery? (Please tick one box below).

Very unhappy / Unhappy / Satisfied / Happy / Very happy

7. Additional comments:

8. How would you feel if GP services in Harbottle were to stop? (Please tick one box below).

Very unhappy / Unhappy / Satisfied / Happy / Very happy

About you

You do not have to answer if you do not want to.

9. Please state your gender

10. Please state your age

11. What is your marital status?

12. Please state which ethnic group you consider yourself to be:

13. Please tell us your religion or belief:

14. Do you care for someone with a long-standing illness or disability?

15. How would you describe your sexuality?

16. Are you pregnant or do you have a child under two years old?

17. Are you a parent or guardian (or grandparent) who generally has to accompany a child or young person to their GP appointment?

18. Have you undergone gender reassignment?

1 August 2016

County Hall
Morpeth
Northumberland
NE61 2EF

Tel: (01670) 335178
Fax: (01670) 335189

Dear colleague

Harbottle GP Services

We are writing today to update you on future primary care (GP services) in Harbottle following the closure of the village surgery in August 2015.

You may recall, in January this year we entered a period of engagement designed to give former patients the opportunity to have their say by participating in a short survey on future GP services. The survey ran for six weeks, closing at the end of February and was completed by 117 former patients.

Since the survey closed a lot of work has taken place in the background to explore future opportunities. This took slightly longer than expected, but to ensure the continuation of services in Harbottle the current temporary arrangement has been extended from 18 October to 30 November 2016, until the way ahead is decided.

A summary of the responses we received is enclosed and I hope you will find this useful. In brief, the feedback indicated that people are most concerned about GP access and short lead times for appointments. A smaller number of people commented about a continuation of local GP services in the village and there is also some frustration with the interim pharmacy arrangements.

On 15 June, Northumberland Primary Care Commissioning Committee met to consider the feedback from the survey and the options for potential future delivery. The four options considered were:

1. Open procurement to secure a GP practice provider in Harbottle.
2. An existing Northumberland practice providing a branch surgery at Harbottle.
3. Cease current services.
4. Multiple existing GP practices providing outreach clinics on a sessional basis from Harbottle surgery.

It was agreed that of the four options considered, options 2, 3 and 4 could be explored. It would not be possible to consider option 1 as:

- The original list size of the practice was 834 and there is no guarantee that all patients would return to the practice should it be procured, which would leave a very small practice list.
- Experience of recent previous procurements has shown that smaller lists are less likely to attract bidders and as patients are now registered at other practices, the procurement would be for a practice with a zero list size.
- National policy on GP primary care services is moving away from smaller practices.
- The service to be delivered needs to be sustainable in the longer term – with such a small patient list size and the need for business continuity it is unlikely to be sustainable.

We are now entering the next phase of our engagement process and are writing to all patients over 16 formerly registered with Harbottle Practice to explain the three options available; a copy of this letter is enclosed for your information. We are asking all former patients to complete a second survey to seek their views on the options. Should patients wish to obtain further information or express their views we have also arranged four drop-in sessions which will be attended by the Clinical Commissioning Group and NHS England, alongside representatives from Healthwatch Northumberland. You are welcome to attend any of these sessions which are taking place at the following times:

Date	Time	Venue
Monday 15 August	2.00 – 4.00pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Wednesday 17 August	6.00 – 8.00pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Wednesday 31 August	2.00 – 7.30pm	The Star Inn, Harbottle, Morpeth, NE65 7DG
Thursday 8 September	2.00 - 7.30pm	The Star Inn, Harbottle, Morpeth, NE65 7DG

Your views continue to be really important to us as we seek to ensure the delivery of sustainable primary care services in Harbottle. Should you wish to discuss our plans please do not hesitate to contact me. We will let you know the results of this second phase of engagement and update you on the way forward this autumn.

Yours sincerely

Siobhan Brown
Transformation Director

Enclosures:

Summary of responses
Phase 2 Patient Letter
Phase 2 Patient Survey

Appendix 4: Additional letter

Cumbria and the North East

Waterfront 4
Newburn Riverside
Newcastle upon Tyne
NE15 8NY

Telephone: 0113 825 3052

Email address: Christine.keen@nhs.net

Dear Patient

9 August 2016

Re: Harbottle

You may have recently received a survey and a letter regarding the future of primary care (GP services) in your area following the closure of Harbottle surgery in August 2015. However, the letter may have been addressed to the incorrect recipient. This was due to an error made in the administration of the patient list by NHS England.

NHS England would like to sincerely apologise for this error and for any confusion this may have caused.

Please find attached a correctly-addressed letter and survey.

Yours sincerely

Christine Keen
Director of Commissioning Strategy
NHS England – North
(Cumbria and North East)



Harbottle Surgery - Phase 2 Engagement

This report summarises the feedback recorded by Healthwatch Northumberland at the 4 drop-in events held as part of the second phase of patient engagement for those previously registered at Harbottle Surgery.

Disclaimer: Please note that this report relates to views collected over August and September 2016. The drop-in sessions were hosted by NHS England and the Northumberland Clinical Commissioning Group, with representatives from Healthwatch Northumberland present. Furthermore, our report is not a representative portrayal of the views of all the current patients at the Rothbury/Harbottle surgery, only the 42 people who attended the drop-in sessions, and the 39 who completed our questionnaire. Due to the nature of the drop-in sessions, some residents had support from Healthwatch representatives in completing their questionnaire, so the results cannot give a valid picture of everyone who completed our questionnaire.

Introduction

Healthwatch Northumberland is the independent consumer champion for health and social care in Northumberland. Our aim is to represent the voices and experiences of people using services, and take these to commissioners and service providers to improve the way they operate. We believe the best way to improve services are to listen to those using them.

Our aim: To understand patients' views and experiences of their current services, after the closure of the Harbottle standalone surgery. We collected this feedback through patients' completing questionnaires at the drop-in sessions with NHS England and the Northumberland Commissioning Group (CCG) over August and September 2016. We will provide this feedback from the questionnaires in this report. This report will not make recommendations for the future of the Harbottle surgery, but will give a voice to everything residents shared with us. We will present this report to NHS England and the Northumberland Clinical Commissioning Group (CCG) to inform the ongoing consultation for Harbottle surgery.

Our approach: Two staff members attended four drop-in sessions hosted by NHS England and the CCG. The focus of the sessions was for local residents to have the opportunity to talk to NHS England and the CCG and ask any questions about the former and current survey which was produced and the future of the Harbottle surgery. NHS England and the CCG were interested in how residents are finding their current service. Healthwatch Northumberland was there to collect patient's views on their new service through completion of our own questionnaire. The questionnaire covers what surgery the resident currently attends, how they are finding the surgery and the standard of care, what NHS England option they would choose in regards to the future of the Harbottle surgery, the advantages and disadvantages to this option, and any additional comments.

These drop-in events were held on:

- Monday 15 August (2.00 - 4.00pm)
- Wednesday 17 August (6.00 - 8.00pm)
- Wednesday 31 August (2.00 - 7.30pm)
- Thursday 8 September (2.00 - 7.30pm)

43 attended in total.

Background:

Rural community:

Harbottle Surgery covers a 1,600 square mile patch of rural Northumberland and previously had a patient list of around 800. The area the surgery covered is sparsely inhabited and has little or no public transport. Harbottle Surgery has served the people of the Upper Rede and Coquet Valley for over 100 years.

In August 2015 NHS England took the decision to close Harbottle Surgery in the interest of patient safety as Dr Miah had been unable to provide GP cover for the surgery. Healthwatch Northumberland was informed by NHS England there were sessions the surgery did not have a GP to cover. On 21st August 2015, the 824 patients registered at this practice were advised by letter that the practice would close the following week (28th August 2015). The dispensing service delivered by the Harbottle Surgery also ceased on this date. Patients were informed and were given a seven day notice period ahead of the surgery closing on 28th August 2015.

Initial response:

At first, patients were advised to register with a new practice, much to their dismay as other local surgeries were at least 8 miles from Harbottle with little public transport available. Therefore, in response to the feedback received about patient's concerns, Healthwatch Northumberland hosted a drop-in event on August 25th 2015 in the Star Inn Pub in Harbottle, with the support of Harbottle Parish Council and Northumberland County Councillor Steven Bridgett. We spoke to over 60 people who attended to highlight the impact the closure would have on themselves and their families.

This feedback (along with feedback shared by email, telephone and post) is reflected in our report titled "*Report on the Closure of Harbottle Surgery*", along with a full timeline of events. This was first shared at a Public Meeting on 1st September 2015.

NHS England solution:

On the 19th October 2015, NHS England announced a practice in neighbouring Rothbury would provide a GP and nurse at Harbottle surgery for two half days a week, on Tuesday, 9am-11am, and Thursday, 9.30am-11.00am. The branch at Harbottle was a solution to the initial cease of services, and reduced the need to make the 16 mile round trip to the Rothbury practice. The new service was commissioned for an initial 12 months, while an assessment of local primary care needs was carried out. Current arrangements are due to cease on the 30th November 2016.

NHS England Research:

In January 2016 patients who were still registered with Harbottle Surgery on 1st September 2015 were sent a questionnaire from NHS England inviting them to share their views on the closure plans, to which only approximately 20% of patients responded (117).

In August 2016, patients previously registered at Harbottle, received a letter from Northumberland Clinical Commissioning Group advising that they had taken over some commissioning responsibility. The letter advised that the current temporary arrangement has been extended until 30th November 2016 until a decision is made. Patients received a summary of the responses from Phase 1 and were invited to comment on these in a survey designed for Phase 2; this could be completed online (or using paper version). Patients were also asked to share their experiences of their current GP practice and to consider the following 3 commissioning options:

1. An existing general practice surgery in Northumberland providing a branch surgery in Harbottle.
2. A variety of existing general practice surgeries providing outreach clinics on a sessional basis in Harbottle.
3. Cease current services.

A fourth option of commissioning a standalone/sole provider GP practice had been fully considered by the Northumberland Primary Care Commissioning Committee but was deemed undeliverable due to local and national experience and evidence and the ambition to deliver a sustainable solution to the current situation. Patients were strongly encouraged to share their views through whichever method was most appropriate for them.

In addition to the questionnaire, patients were also invited to share their views and to gain more information in person at four drop-ins events held by NHS England and Northumberland Clinical Commissioning Group, with representatives from Healthwatch Northumberland present. Healthwatch Northumberland also provided an independent questionnaire for residents to complete. The results of which can be seen below.

Drop-in sessions

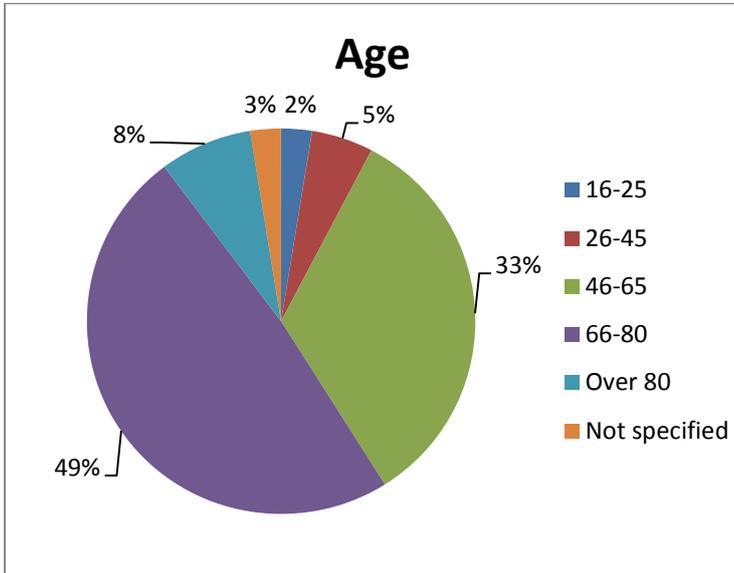
Summary of Responses

Over the course of the 4 drop-in sessions, Healthwatch Northumberland gathered the views of 43 patients, of which 39 completed our questionnaire (13 males, 26 females).

A summary of their responses is provided below. Please note the responses below are only representative of patients who chose to share their views in person through discussion with NHS England and the CCG, and/or via our independent questionnaire. This data therefore cannot be generalised to represent *all* patients' views and experiences. The number of patients who attended 1 of the 4 sessions represents approximately 5% of the original patient list (August 2015).

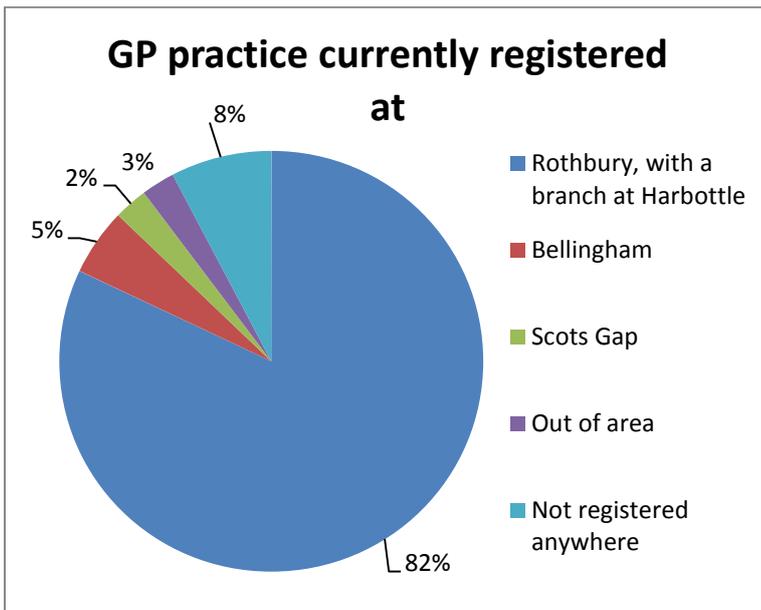
[Strength of opinion/concern not decreased overtime - approx. 60 at 2015 drop-in, 43 at 2016 session]

Of the patients we spoke to, 1 patient was aged 16-25, 2 were aged 26-45, 13 were aged 46-65, 19 were aged 66-80 and 3 were over 80 years old, and one patient chose not to disclose their age.

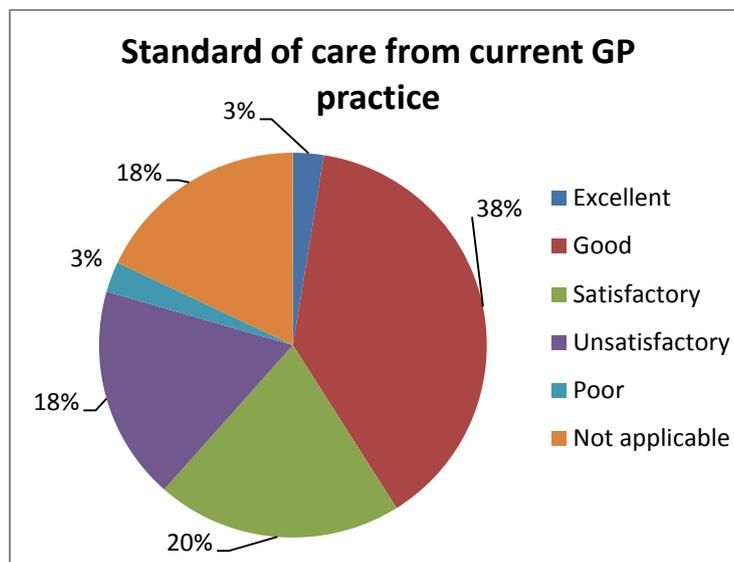


The patients we spoke to were registered at the following GP practices:

- Rothbury, with a branch at Harbottle (32)
- Bellingham (2)
- Scots Gap (1)
- Out of area (1)
- Not registered at any GP practice (3)



When patients were asked to rate the standard of care they are receiving from their *current* GP practice, 3% described it as Excellent, 38% as Good, 20% as Satisfactory, 18% as Unsatisfactory and 3% as Poor. For 18% of patients, this question was not applicable as they had not required access to a GP within the last year or so.



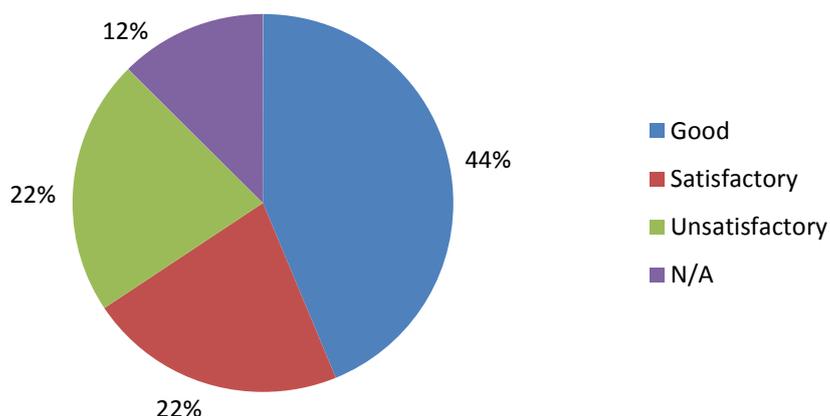
There were 32 people registered at Rothbury GP practice using the Harbottle surgery. They rated the standard of care received as Good 44%, Satisfactory 22% with 22% indicating unsatisfactory and 12% citing not applicable as they had not used the service.

The reasons given in relation to the unsatisfactory rating were not related to clinical care but were in the main regarding access to services.

Unsatisfactory Patient Feedback

- Can't drive to Rothbury and no bus service to get there
- We would like to have our own doctor and nurses. A GP with a contract here
- Wants to return to previous service
- Under no circumstances, take away the ability to see a doctor
- If you can't drive it's a problem
- Previous service was Convenient provided a community hub.
- Frustrating and dragging on. Need a service now. Receptionists in Rothbury very good and helpful.

Standard of Care at Harbottle/Rothbury



When asked which of the 3 proposed options they were most likely to choose:

- 67% chose for an existing general practice surgery in Northumberland providing a branch surgery in Harbottle (x26)
- 3% chose for a variety of existing general practice surgeries providing outreach clinics on a sessional basis in Harbottle (x1)
- No patients chose for current services to cease (x0)

However, 30% of patients did not choose one of the 3 proposed options:

- 23% of patients commented that a standalone option should be investigated further and that this would be their preferred option (x9)
- 7% of patients said the options were not applicable to them (x3).

We also asked people to summarise advantages and disadvantages of the options they chose -

Patients identified the advantages for an existing general practice surgery in Northumberland to provide a branch surgery in Harbottle as

- Maintains consistent health care.
- Enables the most vulnerable people to access the healthcare they need.
- Local doctor.
- Not as effective as it was , but better than nothing.
- Convenience, community hub.
- Local. Good access for older people
- Access for older people
- Local access
- Security. Access.
- Continuity of care.

- Accessibility of some kind of service. Having something is better than nowt.

Disadvantages identified -

- Transport to access main surgery if no appointments available
- Limited appointments and timing of appointments no evening slots

3% (1) chose a variety of GP's based on the fact this would provide choice.

Themes

We also collated themes from the drop-in session discussions with the public and NHS England, and the CCG. The main themes which became apparent after gathering feedback are below.

Access

Access is the overarching theme present throughout the 39 patient responses. The way patients are able to access their GP services was described as being fundamentally important. For example:

Transport and travel time

Harbottle was described as being an 'isolated' and 'rural' community, with no regular public transport available - only one bus service per week on a Tuesday and Thursday, with a four hour wait in Rothbury until the next bus. This was described as being difficult for patients who cannot drive, especially if there are no appointments available at the Harbottle surgery. Patients described if they could not drive, it would be near impossible to get to Rothbury surgery without relying on a neighbour or local friend for support. There was the worry that due to the ageing population in Harbottle, less people are going to be able to drive to the practice in Rothbury. Harbottle surgery was described as being convenient and easily accessible. Many described needing a provision in place to ensure people can get to a surgery if Harbottle was to permanently close.

Local service

Access to a surgery in the village was also noted as being extremely important to patients. Preferably, the branch from Rothbury would be the best for the patients, so they do not have to travel too far if there are no appointments at Harbottle. However, currently many patients spoke of the unavailability of appointments at Harbottle, and difficulties in getting a home visit. Late night sessions were also important, as many school children and working people cannot get an appointment as there are no evening sessions at Harbottle currently. People also expressed concerns about access at the Rothbury practice.

Continuity of care

Continuity of care is something patients of Harbottle described as being lost if Rothbury were to lose the contract for Harbottle. It is very important to many patients to have the same GP as it means the patient feels comfortable and at ease. Patients were very worried about option 2 of the survey provided by the NHS and the CCG, as this would possibly limit their continuity of care. People using the Harbottle surgery as an outreach from Rothbury in the main were happy with the clinical care and in particular GP'S. Patients also highlighted the professionalism of the receptionists at Rothbury.

Dispensing services

A dispensary in Harbottle surgery is a real miss to patients, as the pharmacy in Rothbury only delivers on Tuesdays and Thursdays. Patients also described the distance to Rothbury being inconvenient to retrieve their prescriptions, and the staff at Boots could be, at times, unhelpful and rude. Rothbury was described as needing to organise a better prescription delivery service. In turn, because of winter weather, patients described at times being unable to get in and out of the village which would cause a huge problem if they needed to get to a surgery outside of Harbottle. Delivery of prescriptions would also become a problem.

Surveys 1 and 2

There was a lot of discussion from patients about the questionnaires they received from NHS England and the CCG about the future of the service at Harbottle. Patients stated many people complete the first survey because they didn't think it would make a difference. The questions also did not provide enough space for patients to expand or fully express their opinion. Question style was also criticised, as it was difficult for many patients to understand what they were being asked. Forms are also difficult for many people to complete in the village, which patients discussed could account for the first questionnaire's low response rate. Furthermore, many patients described not receiving a questionnaire at all, or getting one with the wrong name on. Although the surveys did explain the process and reasons why the option of a standalone surgery was not viable, there was a strong feeling from many people that there should have been an option to choose a standalone surgery on the questionnaire, and it had not been explored.

Support and sustainability of rural communities

Many patients expressed concern over the sustainability of Harbottle as the lack of support for the surgery seemed an incentive for people to move to more central areas. People described needing services in place to make an isolated community thrive, and make it an attractive area for young families to move.

An important theme was a lack of understanding about the process of the Harbottle closure, and the steps being implemented by NHS England and the CCG currently. Firstly, patients expressed confusion over the legalities of the situation, as many people did not understand why the current situation with Rothbury could not continue. People described it was difficult to make a decision, when there was no further information about which GP practices were being considered when the surgery goes out for tender. People felt disregarded, as though all of the steps in place were going to eventually lead to the closure of Harbottle.

Other comments

Patients of the previous Otterburn outreach of the Harbottle surgery expressed concern over the closure of the Otterburn practice. Patients were worried about permanent closure, although the CCG claimed that Bellingham practice are going through an engagement process, and the Otterburn surgery is only a temporary closure. The temporary closure is because the surgery is not 'fit for purpose', something which lies responsibility at the hands of the practice, not the CCG. Patients were frustrated at the sudden closure of the outreach, and felt they had no answers for the future of the surgery. Patients also expressed their frustration at the closure of the surgery, as making the long journey to Bellingham can be difficult, especially in bad weather. There is also a lack of public transport for those who cannot drive.

Healthwatch Observations

Healthwatch Northumberland noted some other observations from the drop-in sessions. Firstly, there appeared to be language barriers, and a stark contrast in the language used by the commissioners and the community. NHS England and the CCG used medical and legal jargon which was difficult for patients to understand e.g. what commissioning responsibilities were involved in the Harbottle surgery, the legalities involved with re-tendering the surgery, and the breakdown of GP surgeries role as a business.

People attending the drop-in sessions wanted to know the future of the surgery, and could be easily confused by the language used by NHS England and the CCG. There was a lack of patient friendly language being used, and it was easy for patients to be bombarded with jargon they did not understand, and miss the answers they wanted from the commissioners. Patients were constantly told that the future of Harbottle was uncertain and there was not much to be done at this point, only for them to complete the questionnaire. There was also confusion over the future of the funding of the surgery.

Rothbury GP practice role in Harbottle is working thus far, so patients struggled to understand why the surgery had to go back out for tender, and why Rothbury could not continue to provide a service. There was also patient dissatisfaction with the questionnaire which had been distributed, as the NHS options for the future of Harbottle did not include continuing current services, and did not have a standalone option. Although the reasons and practicalities of procuring a standalone option were detailed in the NHS Surveys and explained fully by NHS England and Northumberland CCG staff at the drop in sessions patients returned to questioning the lack of a standalone option. Patients felt the questions could not fully capture their opinions. Furthermore, many patients did not receive a questionnaire at all, or received one with the wrong name.

People in the main after discussions with NHS England and the CCG recognised the challenges rural surgeries were facing. However they were very worried and upset that

there may not be a surgery provision in Harbottle. They were passionate in their views that a service needed to remain in Harbottle.

Appendix 1

Some quotes captured from the community

- 'Present situation is ok, as I can drive to Rothbury'
- 'Phone call was satisfactory at Harbottle'
- '1 morning a week would be better than nothing'
- 'Let's keep what we have'
- 'GPs have all the levers to pull and you don't have any (NHS England)'
- 'Doctors is a hub for the rural community'
- 'Standalone surgery service was superb'
- 'Find the service fine if it's there'
- 'More convenient to go over the border than here'
- 'Disappointed in the ways things have gone. I'm very vulnerable and frightened at times'
- 'Contract was viable when a doctor was there. I pushed a door and people were in the surgery - it worked' (original standalone)
- 'Feel like an inconvenience to Rothbury'
- 'Can the rural community survive when there's a health provision elsewhere and people can't drive'
- 'Why did Dr Brunt have to leave- fantastic GP!'
- 'Should have had 90 minute interviews with patients to get a full picture'
- 'In favour of telephone consultations - doctor triage system which is working well at Rothbury'
- 'Palliative care at Rothbury was fantastic'
- 'Bought a house here on the basis of there being a GP surgery as stated on the estate agent's particular'

Appendix 2

Healthwatch Questionnaire

1. Which GP surgery are you currently using?
2. How has your experience of the surgery been so far? Please give as detailed a response as possible.
3. Which of these options best describes the standard of care you have received at this surgery? Please tick. Excellent Good Satisfactory Unsatisfactory Poor
4. Which of the three options are you most likely to choose? Please tick.

 An existing general practice surgery in Northumberland providing a branch surgery in Harbottle

 A variety of existing general practice surgeries providing outreach clinics on a sessional basis in Harbottle

 Cease current services
5. What advantages and disadvantages do you envisage if this option was to go ahead?
6. Do you have any other comments?

Appendix 6: Full comments made in response to Question 4

Do you have any further comments or feedback around what is important to you when accessing GP services, location and opening hours? We are also interested to hear what you think is important about pharmacy services, particularly around how medicines are dispensed and collected.

Comments about pharmacy

- A prescription delivery service to Harbottle or Alwinton weekly - if need emergency app, able to get on same day plus home visit if needed
- Appreciate the difficulties with providing a pharmacy service; however, medicines should be delivered to the surgery when open. More nurse clinics could be scheduled or even a pharmacist session at the surgery.
- Continued medical service where [you are able to] able to collect medicines
- Convenience of local collection missed. When ill, don't want to travel far so please keep it local in Harbottle. Need to feel as though we are patients with a need and welfare rather than and inconvenience wanting Harbottle appointment instead of Rothbury.
- Delivery of prescriptions very important to the community.
- Different arrangements for Harbottle, Longhorsely. Longframlington, Rothbury. 2 day wait for dispensing too long.
- Get my medication delivered to my home so very happy with that.
- GPs should be available after working hours, so should pharmacy pick ups
- Harbottle Surgery used to send prescriptions to Thropton Garage/Post Office for collection. This was easier and
- Have always collected from Rothbury pharmacy - good service.
- Have had problems getting meds delivered - not always what we asked for.
- Have recently switched to postal pharmacy services which appear to work very well indeed.
- I am content with picking up medication from Rothbury. I order online and time the 'pick up' with when I expect to go through Rothbury.
- I have no comment about pharmacy - I cannot stop taking some of the medication and they are very helpful about delivering medication to my home.
- I now use "pharmacy 2 u" home delivery service.
- I personally have had only one problem when the prescription was not on the when it came to Harbottle.
- If I couldn't drive a Pharmacy located in either Rothbury or Harbottle would be unreachable - a delivery service would be the best option
- If I lived at the heart of Coquet Valley as now I go to Rothbury to collect my prescriptions I would find it expensive and frustrating.
- In Harbottle for vulnerable residents - both GP & pharmacy services.
- It is important to have GP services provided at Harbottle. Ideally we would like our practice back as it was every day and a dispensing surgery but we realise this isn't

going to happen so having another practice using it as a branch surgery is better than losing it all together.

- It is surely more sensible and safer to dispense all medicines from Boots in Rothbury , most people would be happy to help people who don't or can't drive.
- Location at Harbottle is very good, I live in Elsdon and most of the time I managed to get appointments at Otterburn Hall, especially blood tests for diabetes. This was good for anyone in this surrounding area to travel a few miles and work this within working hours. The pharmacy at surgery is a big plus. Delivering of prescription drugs had worked for years at the pinfold, when it was moved this had restricted times for collection and that was sometimes a problem especially if closed when I finished work and needed Insulin prescription. At pinfold everyone knew where to collect prescription and it worked perfectly well. Never had any problem within the 8 years I used it.
- Not allowed to go to Boots in Rothbury for three days for prescription after eventually seeing doctor.
- Pick up points would help ie in Netherton Village Hall is open Mon to wed 11-12 for post office.
- Quick access to doctor and location. 2. Convenient opening hours (as part of modern 24/7 society). 3. Medicines need to be in stock and quickly dispenses for collection to current 3 day lead time not good enough.
- Rothbury Boots pharmacy are very good.
- Rothbury practice (as typical of rural practices) underfunded and oversubscribed. Boots chemist in Rothbury understaffed and underwhelmed.
- Rothbury practice had got very good GP services and opening hours. Boots the chemist give a very good service.
- Surely: nearby, short lead time for appointments, some evening and weekend appointments, preferably same doctor. Hold regular pharmacy stocks for patients. Quick turnaround time. Possible delivery service.
- The dispensary service in Boots is appalling. They refuse to stock my brand of Metformin and I have to go to Morpeth.
- There is a need for a GP service to be provided in Harbottle alongside a pharmacy. That you failed to identify this in your survey must be indicative of your ability.
- There is not a pharmacy service here. I believe a van comes twice a week for a ltd amount of time.

General comments

- As I am 74 years. Do not drive. Not having family local. Harbottle is the only place for me.
- As I am in the surrounding area of Harbottle, it is easy for me to pop out for an appointment without it taking up the whole morning or day. Travelling the large distances is completely impractical.
- Bring back surgery at Otterburn.
- Cheaper than driving to Rothbury.

- Continued medical service where the doctor knows you, [also not being able to get appointments not being able to collect medicines], older people not able to access transport to Rothbury.
- Continuity of care is key. Nurse practitioners able to fulfil much of needs but has to be local.
- Could do with more time.
- Did not use Harbottle service as I live in Rothbury.
- Doctor known to you and who knows you. Evening opening hours important for people in work
- Each appointment (ie not in 14 days) if this cannot be provided I do not understand what would be the point.
- Easy access, such as location, less waiting for appt's and hours to suit working people.
- For older and infirm residents with limited travelling options, a Harbottle surgery is a lifeline.
- Great service, no issues.
- Harbottle offered the crucial thing an excellent doctor in Dr Brunt.
- Harbottle surgery was 100% with their pharmacy services.
- Having a GP who was close and easy to get to get an appointment with was my main reason for registering with Harbottle and not Rothbury when we moved here. Harbottle provided an excellent service with continuity of care and easy access.
- I am able to drive but there is many older / disabled people who can't travel further.
- I do not visit the doctor on a regular basis, but if I do need an appt, it needs to be quick and easy to access.
- I feel that at Harbottle I received my care from a team that was familiar with what was required I do not feel the same about Rothbury.
- I feel that the pharmacy service has improved although there is still a need for a collection point in Harbottle that has longer opening hours.
- I live 12 miles from Harbottle up a single track road and 20 miles from Rothbury. it is important for me to have access to a doctor or nurse for most of up here who are in our late 60's.
- I live in Thropton but was willing to travel to Harbottle for what was an excellent all round service.
- I work full time, so evening surgeries are important to me to access the GP.
- Important local, friendly and trustworthy service. Not needing to make separate trips for medical personal service, ability to see a doctor or nurse quickly and it takes me enough to ask, if can't follow up quickly, I don't bother. I'm aware this probably damaging to my health – it's a spin off from depression.
- Investigate preferred option of stand -alone
- It is important for me to access local GP services as I become older - Harbottle is the ideal location for a surgery to provide a service to people living there and in surrounding area.

- It makes a big difference to me being able to go to Harbottle, it means much less time off work.
- It would be great to have Harbottle services back as they were.
- It's alright
- Knowing there is a local surgery (service) is enormously reassuring, it is there it helped in my recovery from surgery in one centre and from a condition that can flare up from time to time.
- Link to Rothbury makes services reasonably accessible. Especially provides access to more diverse specialist services, such as minor surgery, warfarin clinics, counselling, etc
- Local access essential for community demographic / transport difficulties.
- Locally provided GP and dispensing services
- Location is the most important - my age and disability and lack of transport mean I'm unable to travel far without paying for a taxi. Need to be available on more days.
- Medicines should be collected or delivered where and when convenient.
- Morning and evening sessions would be best
- Must be able to get appointments within a couple of days and outside working hours.
- Need local service
- No experience with pharmacy services now but did like convenience of local collection.
- Not restricted to 9-5 Mon-Fri.
- One half day morning and another afternoon/ evening would enable working people better access.
- Opening hours is important, as I work
- Opening hours not important as retired. The pharmacy is a huge loss/again. Distance to travel,
- Please let us have back what we had
- Quick appointments and time to discuss problems, more pharmacy access times.
- The Harbottle staff believed in caring for all their patients - it was a rural practice.
- The people who work these services - are not members of "mensa" they are normal human beings doing jobs to the best they can - applaud them!
- There are quite a lot of people in the community who like myself can't drive and are quite elderly who need this surgery here
- They need to be local and readily available
- To work in such a location. Making alternative arrangement for us was not difficult and Rothbury is only 15 minutes away
- Too long before medication is ready.
- Too long to wait at Rothbury - need to be able to access more often at Harbottle.
- Very important we have access to a GP in Harbottle village and the main surgery within a reasonable distance, i.e. not more than 10 miles travel (no buses most days)
- We need a local GP on call 24/7
- We would never have chosen to live in Harbottle if it had not been for the presence of the Surgery. What happens when I can no longer drive?
- Would prefer dedicated Dr to Harbottle practice even if part of a larger practice.

Appendix 7: Full comments from Question 7

How would you feel if GP services in Harbottle were to stop?

- It's just another example of second class treatment for rural communities.
- "Not acceptable as this is a very isolated part of the country. People retire here attracted by GP service being available. Farming community and school very useful to have a GP amongst us, rather than miles away when accidents happen.
- [unhappy] For people in Harbottle area.
- A surgery is very much needed at Harbottle.
- Absolute disaster for hundreds of rural people - we deserve the same services as 'urban' people!!!
- As above
- Boots in Rothbury operate terrible service for prescriptions - too many staff and not enough action.
- Cannot live this way without transport. Nearest Dr 10 miles away. Not on.
- Consultation?
- Current service provision is a basic cover. The proposed move of Rothbury GP practices to the Cottage hospital creates even more problems to access than presently exist.
- Difficult to access services people would be isolated.
- Disappointing for those who live in Harbottle.
- Disaster.
- Dr Farndale made the practice pay, why did it? Dr Miah - this small surgery only needed 4 people - Dr/nurse/pharmacist/receptionist - surely not too much to ask.
- Elderly population disadvantaged again in rural areas, discouraging the young families to live rurally.
- Everything was ran smoothly. Prescriptions, appointments and repeat prescriptions. Nurse was valuable along with receptionists.
- Extremely very unhappy
- For patients who live a distance away from other surgeries - they need one at Harbottle.
- For those can't access Rothbury or Longfram easily.
- Fortunately I can drive and I am able to attend the surgery in Rothbury. This is not the case for many elderly people. Unless they can get a lift they cannot get down to Rothbury - no regular bus service.
- Harbottle has had a GP surgery for a lot of years why can't we still have our surgery as it was?
- Have parents who live in the village who rely on the services.
- Have two student offspring in the house - been excluded from surveys etc. but are home 5 + months of year and access GP surgery then"
- How would I get to Rothbury as they will not do house calls when needed. What do i do and others the same as me. I do not drive.
- I am 40 mins from Rothbury 1hr from Alnwick 1hr from Wooler/at least. 1hr from Morpeth. 50 mins from Hexham (in summer)

- I am of an age when mobility could become problematic in the near future - I rely on local access to care.
- I am unlikely to be ill and get an appointment when the doctor is there so I would have to drive to a surgery.
- I fail to see the relevance of requesting the 'about you' [demographic information] to the question in hand. The info requested is intrusive and time wasting. Why do you need to know? Who needs to know?
- I imagine the lack of response is caused by frustration. It was made overwhelmingly obvious at the huge meeting in the barn at Clennel in August 2015, that the whole valley wished to retain services for the reasons given at the time - so why yet another questionnaire unless you want a different reply?
- I thought they had!
- I would accept the final decision and would have no real problem accessing the facilities at Rothbury.
- I would feel devastated. I am 82, registered blind, have COPD, osteoarthritis and already rely on people to take me to Harbottle. If they surgery closed I'd feel totally devastated and feel this option is unacceptable.
- I would feel very sad if it was to closed I was a patient all my life and I got very good service from both Doctors and nurses.
- It cannot be compared/judged on the same criteria as urban/suburban areas."
- It is a further erosion of rural life: Busy young working people at farm find the travelling and time away from their farm expensive and frustrating.
- It is taking away a vital part of community. Families will not want to live and work in rural locations.
- It would leave the people of Harbottle very exposed and at risk.
- It would not affect me as I do not use GP services at Harbottle
- It would not affect me however I do understand that there are people for which a move would be very inconvenient - people with diverse problem and limited access to transport.
- It's useless as a base for statistical evidence."
- Just a step too far. We have no mobile phone / poor internet - then no doctor. Tribes in Africa have more!!!
- Lack of choice
- Local services needed
- Medication concerns, time to be seen.
- Might be put off seeing a doctor due to time/ distance when quick consultation might nip something in the bud. Local GP service is essential to agricultural rural communities particularly families on remote houses or farms, they form part of the community hub - school, pub, surgery etc.
- My current practice clearly has far more demand than capacity."

- NHS cannot provide/ afford everything. If people don't respond to survey, they don't care enough - although many local residents are elderly and may not be able easily to respond.
- NHS not meeting their responsibility for the area!
- No, No, No
- Not impressed with sudden closure of ward at Rothbury - another vital service lost. Elderly needed this.
- Not registered in Rothbury, but I was always happy to travel to Harbottle, the staff and service received there was very personal.
- Old people without cars - can't get to other surgeries (than Harbottle) as there is no way to get. No buses - no transport.
- On more than two occasions I have received treatment, when other services were unavailable due to bad weather.
- One of the reasons for moving to Harbottle was the excellent service that was being provided here and has done for decades.
- Only a sole provider will suffice,
- Please may we continue also the practice pharmacy
- Sad for those who are left.
- Sadly I am in no position to objectively answer these questions as I have no experience of needing or receiving NHS treatment and support.
- See above: I have transferred to Rothbury and for me and my wife - all is well.
- See comments above. And what happens to the building, converted at NHS expense?
- Services of all types to rural communities are being eroded; however, access to medical services is essential - lack of funding in the NHS generally is not an excuse. Cutting management levels/ positions would help the funding side!
- Sorry to see it close after all this time, but things change and transport is much better now.
- That a conclusion had been reached at last!
- There has been a surgery in Harbottle for many years, I have lived in Harbottle with my family for nearly 40 years, my husband was born here. Not having a surgery would be the worst thing that could happen. All the recent drs have been a friend to you and would make house call if you needed them.
- This is a very rural community, many people retired here on basis of GP availability. Rural communities service by attracting people due to vital services such as schools, GPs, even pubs/village halls. You affect more than just patient health if you remove this vital service. Distances are great to alternatives and public transport extremely limited.
- This is a vital service particularly to elderly and disabled as I am!!
- This is not an option
- This was a very good run practice patients knew they were listened to by Doctors and not classed as just another patient.
- This would be a retrograde step for some of the most vulnerable members of our society.

- This would be very worrying
- This would cause great hardship to many of the residents of Harbottle, Alwinton and the Coquet Valley beyond Alwinton, as well as farms and hamlets throughout the catchment area.
- Too far and difficult for many to travel to Rothbury. Lead time too long in Rothbury, particularly compared to 'old' Harbottle surgery.
- Too much pressure then on the Rothbury practice. Waiting times for appointments would only increase.
- Unacceptable find new options.
- Very distressed - the erosion of yet another public service!
- We cannot lose the service we need some kind of GP provision from the Harbottle site. I feel this is not an option especially for the elderly and people who can't drive the public transport isn't frequent enough for getting to other practices.
- We do need a doctor or nurse.
- We had a gold plated service at Harbottle till a certain person spoiled it. Rothbury is 17 miles from us - in winter this is not convenient.
- We had planned our lives here, including into retirement and old age, and now seriously considering moving in the next few years. We chose Harbottle because of the easy access to medical services. We're not the only people in this position.
- We need a GP who knows his patients.
- We need as many NHS services in rural areas it's so important. People pay the NU and taxes it should be marginally compulsory to have these services. Supporting the NHS is vital.
- We shouldn't be expected to travel 20 miles and round trips to see the doctor 73 years I have been registered at Harbottle it shouldn't need to change. Surely it's much easier to communicate these days as way back then.
- We've paid our National Insurance just like everyone else. Not everyone has a choice about where they live so why should a rural community be penalised. What really takes preference in the eyes of those who believe they can dispense health services. This is a matter of life and death, yes that sound dramatic but it's the truth and in an equal society provision should be made.
- What a stupid question no wonder we have no faith in you.
- What about the option of a range of local practices all part-funding one or two part-time or job share GPs? That gets continuity as well as facility.
- Would feel utterly let down by NHS. Decided to retire to Harbottle in belief that excellent surgery facilities would continue for foreseeable future. Despite dire funding difficulties, as wide spread rural practice covering and area such as the previous Harbottle area has to be the only means of providing effective primary care in this region.