

Spotlight on health at home

How easy is it for housebound people to use their GP practice, dentist, optician or pharmacy?

About Healthwatch Newcastle

Healthwatch Newcastle is one of 152 local Healthwatch organisations established throughout England on 1 April 2013 under the provisions of the Health and Social Care Act 2012. We have a dual role to champion the rights of users of publicly funded health and social care services for both adults and children, and to hold the system to account for how well it engages with the public.

We collect feedback on services from people of all ages and from all communities. We do this through our network of voluntary and community sector organisations; during events, drop-in sessions and listening events at a range of venues across the city; online through the feedback centre on our website; via social media and from callers to our 'Just ask' helpline. As part of the remit to gather views, we also have the power to 'enter and view' services and conduct announced and unannounced visits.

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1. Executive summary

This report presents the views gathered from housebound people in Newcastle upon Tyne about how easy it is for them to use GP practices, dental practices, opticians and pharmacies.

Before starting this project we had not received much feedback from service users who are housebound. Also, there did not appear to be a systematic review of access to these services either locally or nationally. This meant that we could not say with certainty whether local primary care services (GP practices, dental practices, opticians and pharmacies) were meeting the needs of housebound people.

We thought it was important for us to look at access to services in Newcastle and we did so by contacting housebound people directly via a survey. The aim was to:

- Find out how easy it was for them to use these services
- Hear their experiences

We also assessed how easy it was to obtain information about home visits and the repeat prescription delivery service by making enquiries with GP practices, dental practices, opticians and pharmacies (56 mystery shopping phone calls in total).

Findings

GP practices

- We heard from 75 people in total, but three said they did not use their GP practice.
- The majority of respondents (64) had experienced ‘very good’ or ‘good’ home visits, highlighting the good quality of care and staff manner.
- The most common solution suggested by respondents to improve access was to make it easier to get a home visit.
- All the practices we called (11 in total) provided a description of how to book a home visit and this information was ‘very easy’ or ‘easy’ to obtain from nine of the practices.

Dental practices

- We heard from 72 people in total, but 35 said they did not use their dental practice.
- Only six respondents had received a home visit and all had had a ‘very good’ or ‘good’ experience, highlighting pleasant and thorough staff.
- The most common solution suggested by respondents to improve access was to be visited at home.
- Two of the three dental practices we called, who said they provided home visits, gave a description of how to book a home visit and this information was ‘very easy’ or ‘easy’ to obtain.
- Seven of the eight dental practices we called who said they did not provide home visits, were not able to give details of a dental practice which did.

Opticians

- We heard from 72 people in total, but 11 said they did not use an optician.
- Of the 35 respondents who had received a home visit, all but two had had a ‘very good’ or ‘good’ experience, highlighting good service quality and staff manner.
- The most common solution suggested by respondents to improve access was to be visited at home.
- All opticians we called, who said they provided home visits (five), gave a description of how to book a home visit and this information was ‘very easy’ or ‘easy’ to obtain.
- Three of the six opticians we called who said they did not provide home visits, were able to give details of an optician who did.

Pharmacies

- We heard from 73 people in total, but eight said they did not use a pharmacy
- The majority of respondents (56) had their medication delivered and most (54) had ‘very good’ or ‘good’ experiences of this, highlighting good customer service and caring staff.
- Nineteen of the 21 pharmacies we called provided the repeat prescription delivery service and 18 of these pharmacies described the service and how to set it up. This information was generally ‘very easy’ or ‘easy’ to get.

Recommendations

Based on the data gathered through the survey and mystery shopping, we make the following recommendations:

1. The Local Dental Committee and Local Optical Committee explore how to communicate information about home visiting services to housebound patients.
2. NHS England ensures that all dentists and opticians in Newcastle can provide details of dentists/opticians that undertake home visits.
3. GP practices flag patients who are always going to require home visits so that these patients do not need to explain their entitlement each time.

As the data we gathered will not reflect all primary care services in Newcastle, we suggest that further consultation is needed and recommend the following:

4. GP practices share this report with their Patient Participation Groups and discuss how it could be used to improve services in their own practices, or perhaps consult further with housebound people.
5. The Local Dental Committee and the Local Optical Committee consider how this work could be used to consult further with housebound people through a selection of practices in Newcastle.

2. Introduction

This report presents the views gathered from housebound people in Newcastle upon Tyne about how easy it is for them to use primary care services (GP practices, dental practices, opticians and pharmacies).

A housebound person is often defined as someone who is unable to leave their home environment due to a physical or psychological illness.¹

We could not find an estimate of how many people are housebound in either the UK or Newcastle. However, six GP practices in Newcastle did share the number of housebound people on their records. By looking at those figures, and the total registered GP patient population in Newcastle, we estimated that approximately 2,604 people in Newcastle are housebound.

We do know that primary care services have been designed to try and ensure that housebound people can access them, as follows:

- GP practices are contractually obliged (by NHS England) to provide home visits to their housebound patients.
- NHS England commissions domiciliary dental services (home visiting service) from dental providers. At the time of writing, 18 dental practices are commissioned to provide this service to housebound people in Newcastle. There are 20 dentists in Newcastle that are not.
- NHS England commissions domiciliary optometry services (home visiting service) from opticians. At the time of writing, 12 opticians are commissioned to provide this service to housebound people in Newcastle. There are 22 opticians in Newcastle that do not.
- Some pharmacies deliver medicine to people's homes (repeat prescription delivery service), but they are not contractually obliged by NHS England to do so. At the time of writing, 62 out of 65 pharmacies provide this service in Newcastle². A pharmacy can also make a business decision to carry out Medicine Use Reviews or Appliance Use Reviews in people's homes, but are not obliged to do so.

Before starting this project we did not have much information on the care experiences of housebound people. This is concerning because we could not say with certainty whether primary care services were meeting the needs of housebound people. It is also a challenge as it is hard for us to contact people who are confined to their homes, because we do not have their contact details and they are less likely to be members of local community groups (which is often the way we find respondents for our projects).

¹ <http://marlboroughsurgery.co.uk/housebound-patients/>

² <https://tinyurl.com/yamv7gnk>

Because we had limited information, and there did not appear to be a systematic review of access to services by housebound people either locally or nationally, we did not know how easy it was for housebound people to make use of these services.

We believed that it was important for us gather people's views and address this information gap in Newcastle by directly contacting housebound people. The information gathered aimed to:

- Gain an understanding of how well these services were working for housebound people
- Identify areas where improvements could be made to create more effective and accessible services

This idea was shortlisted as a potential project by the Healthwatch Newcastle Committee and was put forward as a priority as part of our annual prioritisation exercise.

The prioritisation exercise took place throughout spring 2018 and consisted of a public survey and a prioritisation activity at our annual conference.

Members of the public and our stakeholders considered this project a priority for Newcastle. With this mandate, we designed the project with the aim to:

- a) Find out how easy or difficult it is for housebound people to use primary care services
- b) Find out what could be done to help housebound people use primary care services
- c) Gather qualitative feedback from people who have had home visits

3. Methodology

We used two techniques to gather the information we required: survey and mystery shopping.

Survey

We developed a survey to gather the views of housebound people on each of the primary care services with particular reference to home visits from GPs, dentists and opticians, and pharmacy repeat prescription delivery service.

The survey also asked people how likely they would be to recommend the service they used and gathered demographic information (age, ethnicity, gender, etc.) where people were willing to provide it. A copy of the survey can be found in appendix one (page 35).

All primary care services in Newcastle that provide home visits (GP practices, dental practices and opticians) were asked if they would send the survey to patients on their list who were coded as housebound on our behalf.

We also worked with a Public Health Pharmacist to see if some of the surveys could be delivered by pharmacies via their repeat prescription delivery service to patients they knew were housebound. Unfortunately, none of the dental practices and opticians were able to post the surveys out.

After making the initial approaches, we got in touch with GP practices in areas where involvement in our work was low, to encourage greater participation across Newcastle.

Six Newcastle GP practices supported our work by arranging for the survey to be delivered to all patients on their list coded as housebound. These practices labelled and sent the envelopes on our behalf, so no personal data was shared. Nine pharmacies also supported our work by delivering 25 surveys each via their repeat prescription delivery service to patients they knew were housebound. A list of participating services is given in the acknowledgments (page 35).

Respondents could complete the paper survey and return it in the FREEPOST envelope provided. An online version was also available if respondents wished to complete the survey electronically.

The online version was not promoted externally to avoid people completing the survey when they were not housebound. As an incentive to complete the survey, respondents were given the option to be entered into a prize draw to win a £25 shopping voucher.

Each batch of surveys had a reference code so we were able to identify which mailing service the responses came from.

In total, 714 surveys were sent out: 489 via GP practices and 225 via pharmacies.

Mystery shopping

We wanted to find out how easy it was to get information about the services housebound people are entitled to.

We made 56 phone calls to a variety of services (11 GP practices, seven dental practices we believed provided home visits and six that did not, six opticians we believed provided home visits and five who did not, and 21 pharmacies). This covered 33% of each service in Newcastle and ensured an even distribution for services which provided/did not provide home visits (dental practices and opticians only).

Each phone call was based on one of four scenarios designed for the mystery shopping exercise. Each scenario was based around a son or daughter calling a service on behalf of their elderly and housebound mother or father to find out the following information.

For GP practices, dental practices and opticians only:

- a) If the practice could provide home visits
- b) If not, which practice/providers patients could use instead
- c) What the process was for arranging home visits

For pharmacies only:

- a) If they offered a repeat prescription delivery service
- b) What the process was for setting up the repeat prescription delivery service

The mystery shoppers making the calls were also asked to assess how easy it was to get the information and understand it (using the scale 'very easy', 'easy', 'difficult', 'very difficult') and how friendly and helpful the staff were (using the scale 'very friendly/helpful', 'friendly/helpful', 'unfriendly/unhelpful', 'very unfriendly/unhelpful'). The crib sheets used by the mystery shoppers can be found in appendix two (page 43).

The mystery shopping was carried out by two Healthwatch staff members and two of our Champions (Healthwatch Newcastle and Healthwatch Gateshead volunteers).

4. Findings

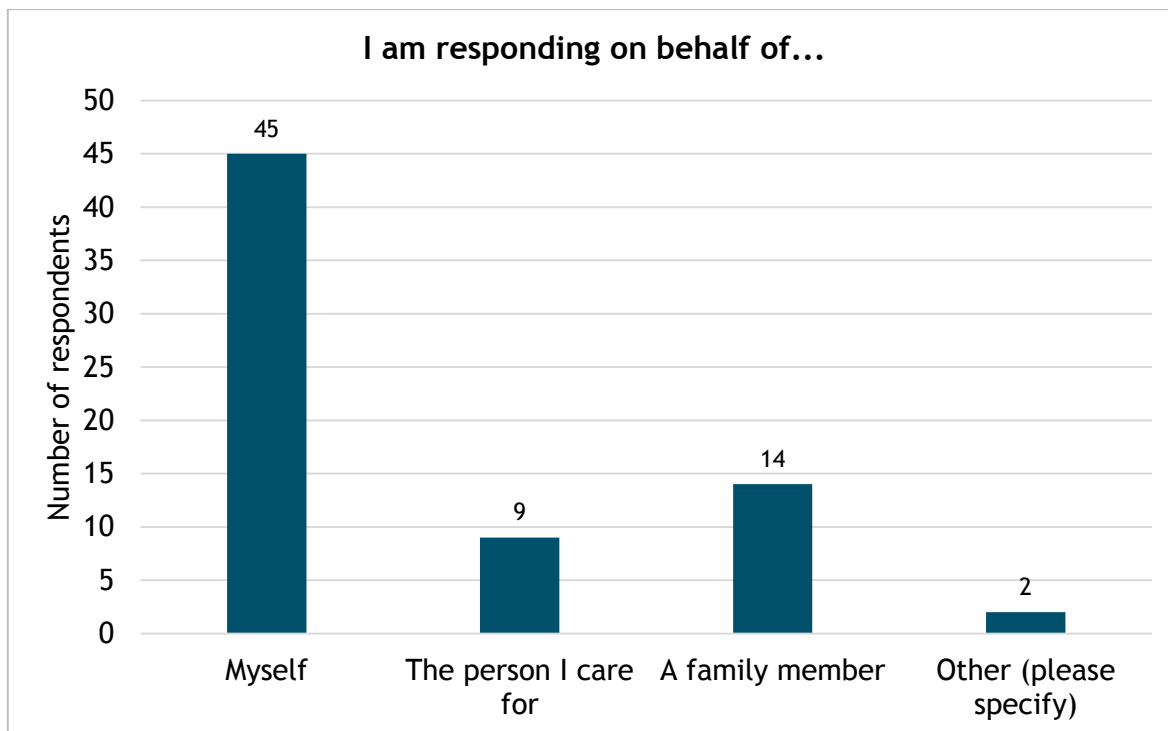
4.1 About the respondents

We heard from 77 people in total. This is a relatively small sample size considering that we estimate that 2,604 people in Newcastle are housebound. However, we achieved an 11% response rate (77 responses out of 714 surveys, which equates to 3% of the estimated housebound patients) which is satisfactory considering the average response rate for external surveys is often 10–15%³. Considering the limited amount of work completed in this field, we consider this to be a good starting point to hearing the views and opinions of housebound people on this issue.

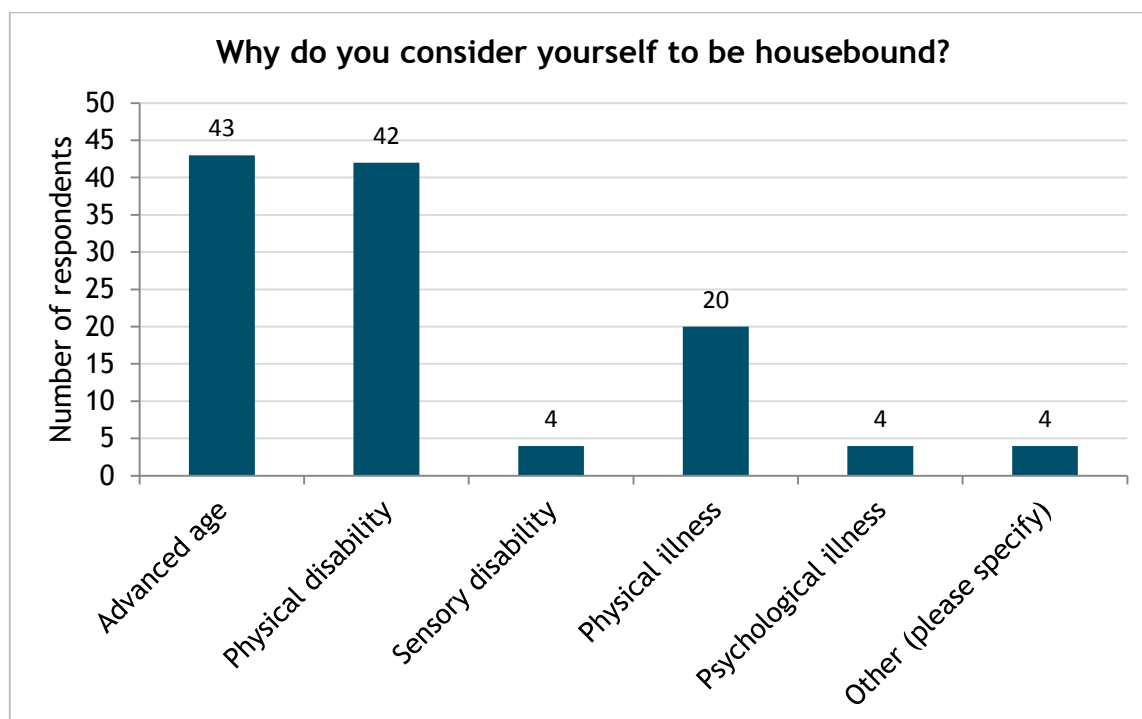
As the following graph shows, responses came mostly from the housebound people the survey was addressed to (45 respondents), with a smaller number responding on behalf of a family member (14 respondents) or for the person they care for (nine respondents).

One of the two respondents who ticked 'other' specified that she was responding on behalf of her husband. The other was responding on behalf of their friend. Seven respondents did not answer this question.

³ www.surveygizmo.com/resources/blog/survey-response-rates



Sixty-four respondents told us why they considered themselves to be housebound. Some respondents selected more than one reason why they considered themselves to be housebound, which is why the total adds up to 117, as shown in the graph below. The four respondents who ticked 'other' specified that they were housebound due to stroke, brain damage and dementia, mobility and dementia.



The demographic data for the respondents is detailed in appendix three (page 46). Not all 77 respondents provided demographic information as this was an optional part of the research. Due to an administrative error, the two questions about ethnicity and marital

status were not included in 427 of the printed surveys (60% of the sample) so data gathered in this area was limited.

The majority of the housebound respondents to our survey were female, aged over 80, retired, had a disability and were not carers. This is to be expected as most housebound people will be older, not of working age and have some form of disability.

The same was true of those respondents who were responding on behalf of someone else. However, the majority of these respondents also considered themselves housebound, which could suggest that the demographics they had provided were actually the demographics of the person they were responding on behalf of.

We would have liked to have heard from more men. However, due to the way the survey was distributed, there was not much we could have done to encourage more men to complete the survey because we did not hold their data. If further work was to be carried out, it would be beneficial to collaborate with GP practices in Newcastle to see if their staff could help us encourage more housebound people (particularly men) to complete the survey.

4.2 Survey results

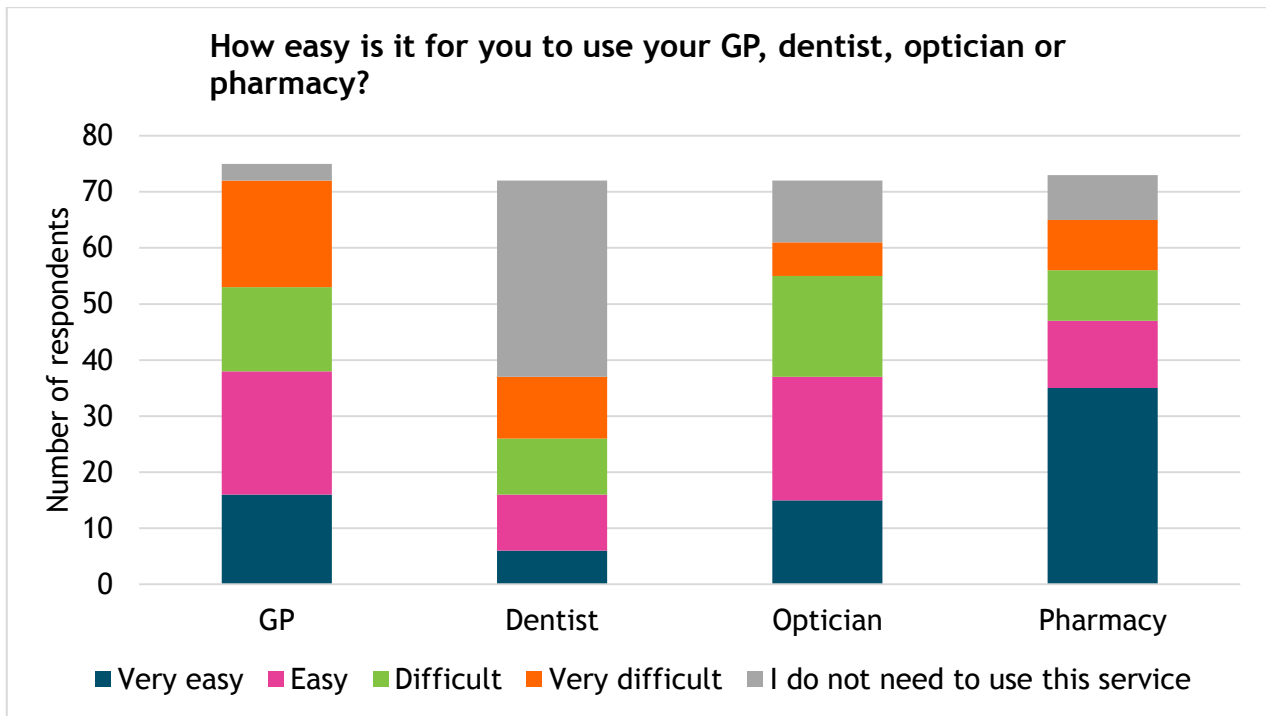
4.2.1 How easy is the service to use?

The first survey question for each service asked respondents how easy it was for them to use the service.

The response rate for each service was as follows:

- GP services – 75 respondents (three of whom stated that they do not need to use the service)
- Dentists – 72 respondents (35 of whom stated that they do not need to use the service)
- Opticians – 72 respondents (11 of whom stated that they do not need to use the service)
- Pharmacies – 73 respondents (eight of whom stated that they do not need to use the service)

The results are shown in the graph below.



Pharmacies performed the best when comparing the number of respondents who found the service ‘very easy’ or ‘easy’ to use (47 respondents) to the number of respondents who found the service ‘difficult’ or ‘very difficult’ to use (18 respondents). This could be because interaction with a pharmacy is generally very simple, with no need to book appointments or wait to be seen.

This was followed by opticians, of which 37 respondents found the service ‘very easy’ or ‘easy’ to use compared 24 respondents whom found the service ‘difficult’ or ‘very difficult’ to use.

GP services came next, with 38 respondents finding the service ‘very easy’ or ‘easy’ to use compared to 34 respondents who found the service ‘difficult’ or ‘very difficult’ to use.

A higher number of respondents found dentistry services ‘difficult’ or ‘very difficult’ to use (21 respondents) in comparison to ‘very easy’ or ‘easy’ to use (16 respondents).

It is interesting to note that almost half of the respondents felt that they did not need to use a dentist. Five respondents explained why they felt this way:

“I am 99 year old and have three teeth.”

“I have false teeth”

“Have false teeth.”

“Private patient if I need to go but have dentures.”

“Never been to dentist 1959 – given gas and couldn't wake me up. Fell flat on face from three steps.”

These views suggest that some people believe they do not need to use the dentist because they have false teeth. It would be interesting to explore whether this is a common belief so that work could be done to communicate the need to see a dentist to this group. This would fit with NICE guidelines⁴ which say that everyone over 18 should see a dentist at least once every two years even if they have no natural teeth, to examine general oral health and for early signs of oral cancer.

4.2.2 Reasons and potential improvements

Respondents who answered ‘How easy is it for you to use your GP, dentist, optician or pharmacy?’ were asked to explain their answer and if they could suggest any improvements. This section shows that feedback for each service.

GP practices

Out of the 75 respondents to ‘How easy is it for you to use your GP, dentist, optician or pharmacy?’, 45 explained why they did or did not find their GP easy to use. Of those respondents who answered the question with ‘very easy’ or ‘easy’ and gave a reason (17 respondents), four highlighted how easy it is to arrange services:

“You can usually ring and get an appointment quite quickly.”

“I just ring up the receptionist and she sorts everything out.”

“I can phone, speak to a doctor, a doctor can visit if necessary.”

“Easy to phone and arrange services.”

Another three respondents mentioned that it was easy for them because they receive home visits, with one respondent highlighting that they get a home visit every three months.

Three negatives were highlighted by respondents who found the service ‘very easy’ or ‘easy’ to use and they were:

- More home visits were needed.
- The practice would be difficult to use without family support.
- The phone line was always busy and often you don’t get through until after 2pm.

Of those respondents who answered the question with ‘difficult’ or ‘very difficult’ and gave a reason (27), the most common reason they gave for their answer focussed on being unable to attend due to disabilities making them housebound (ten respondents).

The second most common reason highlighted the respondents’ reliance on others to use their GP. Five respondents mentioned their reliance on others (for example, care home staff, family members) to arrange and attend appointments. Four of these respondents specifically mentioned that they could not go unless someone could take them.

⁴ www.nice.org.uk/guidance/cg19

The third most common reason highlighted the difficulties respondents had with accessing appointments. Three respondents highlighted that it was not easy to get an appointment generally, or timely home visits.

“Have to wait sometimes a week for an appointment.”

“Difficult getting a timely home visit.”

“Not easy to get an appointment.”

Two respondents mentioned that they would require special transport as they are wheelchair users. One respondent expressed frustration at having to explain their entitlement to home visits each time.

“Phone up to make an appointment but don't always get a home visit. Have to have discussions about entitlement each time. Often I don't get what I really want (a home visit). Often just telephone appointments.”

Out of 75 respondents, 40 suggested some improvements. Of those who found the service ‘very easy’ or ‘easy’ to use and gave a reason (13), three mentioned getting more phone lines so you could get through to the practice easily in the morning.

Two respondents mentioned that it would be good to increase the number of home visits available to patients, and one suggested that practices should be open on the weekend and late on two evenings in the week.

Of those who found the service ‘difficult’ or ‘very difficult’ to use and gave a reason (27), six respondents said the solution for them would be to get a home visit. This suggests that these respondents either did not request a home visit, or had requested one and it had been declined. The responses we received do not indicate which of these is likely.

One respondent highlighted that there were problems with the systems and processes around accessing a home visit. This respondent said that she understood why the need for a visit had to be checked each time but that it was very frustrating (this respondent could not think of a solution). However, three other respondents made suggestions such as:

- Incorporating procedures to liaise with the patient when they get to a specific age, to identify if they are able to attend the surgery. When the answer is ‘no’ there should be an automatic process where the nurse visits the home to carry out urine and blood tests, then the GP visits to discuss the results amends medications as necessary.
- Carry out home visits every six months.
- There should be a permanent marker on patient records that identify them as housebound.

Three other respondents highlighted the need to improve telephone handling by reducing the length of the voicemail message before a call is answered, and answering the phone quicker.

Finally, two respondents highlighted that if transport could be arranged for them that would make access much easier.

Dental practices

Out of the 72 respondents to 'How easy is it for you to use your GP, dentist, optician or pharmacy?', 29 explained why they did or did not find their dental practice easy to use. Thirty-five respondents answering this question selected the option 'I do not need to use this service'.

For those respondents who answered the question with 'very easy' or 'easy' and gave a reason (11), the most common reason for their answer focussed on transport. Four respondents stated that they found this service easy to use if they had transportation via a taxi, the patient transport service (PTS) or a family member.

Three respondents stated that the service was easy for them to use because they got home visits.

Of those respondents who answered 'difficult' or 'very difficult' and gave a reason (18), the most common reason for their answer focussed on being housebound (seven) with respondents stating that they simply could not get to the dental practice.

Other reasons highlighted equally (three times) included issues around disability access (services often having steps and no lifts, so they are unable to get into the building), and transport issues (relying on a taxi or family member to take them).

“I have to ensure that the appointment is for the downstairs surgery as they don't have a lift, but even so there are two steps to negotiate which is difficult.”

“I am virtually housebound and need a family member to take me to appointments. Would like a house call from a dentist.”

“Not easy to find dentist in area, with provision for wheelchair users.”

Twelve out of 72 respondents made some suggestions for improvements. These came from three respondents who found the service 'very easy' or 'easy' to use and from nine respondents who found the service 'difficult' or 'very difficult' to use.

Those who found the service ‘very easy’ or ‘easy’ to use told us the following:

“Provide better access.”

“Home visits would make it easier.”

“They could come to see me as I can’t go out on my own.”

Of those who found the service ‘difficult’ or ‘very difficult’ to use, four respondents said the solution for them would be to have a home visit. Other solutions, each mentioned only once, included:

- More flexibility with appointments and more availability.
- Better disability access (accessible buildings and better pavements/roads).
- Appointments in school holidays for children.
- Local dentists to make more use of the dental hospital.

Opticians

Out of the 72 respondents to ‘How easy is it for you to use your GP, dentist, optician or pharmacy?’ 39 explained why they did or did not find their optician easy to use.

For the 19 respondents who answered the question with ‘very easy’ or ‘easy’ and gave reasons, the most common reasons they gave for their answer focussed on easy access to home visits (eight respondents).

Three respondents mentioned that their service was local and easy for them to get to, with good disability access. Good provision of services was mentioned equally (by two respondents).

“Parking is right outside with flat entry.”

“Accommodate my wheelchair.”

“They were very good and comprehensive. Impressed. Talked clearly to me.”

“We have both used the same family business for many years and they’re excellent.”

Of the 20 respondents who answered the question with ‘difficult’ or ‘very difficult’ and gave a reason, the most common reasons given focussed on their disabilities and being housebound (eight respondents), making appointments hard to attend and examinations difficult to endure.

“I find the examination difficult, I am unsteady and find sitting on stools on wheels scary.”

“Consulting room very small, again transferring from wheelchair to optician’s chair.”

Five respondents explained that it was difficult because they needed to rely on others to get to an appointment. Two other respondents explained that they needed transport to be arranged. A further two respondents mentioned that they needed an optician to come to their home, with one struggling to get access because the optician did not call back as promised.

Out of 72 respondents, 16 suggested some improvements. However, two respondents who found the service 'very easy' or 'easy' to use, also said that home visits would improve this service.

Of those 14 respondents who found the service 'difficult' or 'very difficult' to use, ten said the solution for them would be to obtain a home visit. Other solutions, each only mentioned once, included:

- A bigger consulting room.
- Easier and quicker appointments.
- Follow up with appointment for home visit after initial consultation over phone.
- Quicker appointments for home visits and better information.

Pharmacies

Out of the 73 respondents to 'How easy is it for you to use your GP, dentist, optician or pharmacy?' 49 explained why they did or did not find their pharmacy easy to use.

For the 32 respondents who answered 'very easy' or 'easy', the most common reason given was the medication delivery service (19 respondents). Respondents really valued having their prescription medication delivered to their home.

“Excellent service and drivers are friendly and polite.”

The next most common reason focussed on the quality of the service and staff knowledge and manner. Six respondents mentioned this.

“They are very helpful. Also the staff have a lot of knowledge.”

Of the 17 respondents who answered 'difficult' or 'very difficult', the most common reasons were focussed on not being able to get to the pharmacy (11 respondents), two of whom mentioned that medication is delivered to help mitigate that problem.

Other issues each mentioned by one respondent included:

- Not having access to transport when needed.
- Poor disability access at pharmacy.
- Having to go to the pharmacy every week, despite that being hard for the person.
- Not knowing what medicine the pharmacist has given them.

Out of 73 respondents, six suggested improvements. The single respondent who found the service easy to use suggested:

“Become more efficient. They have lost my prescription and claimed they had not received it.”

Four of the respondents who found the service ‘difficult’ or ‘very difficult’ to use suggested a home delivery service (two), getting more staff (one) and offering home visits (one). The respondent who did not answer the question about how easy it is to use a service made this observation:

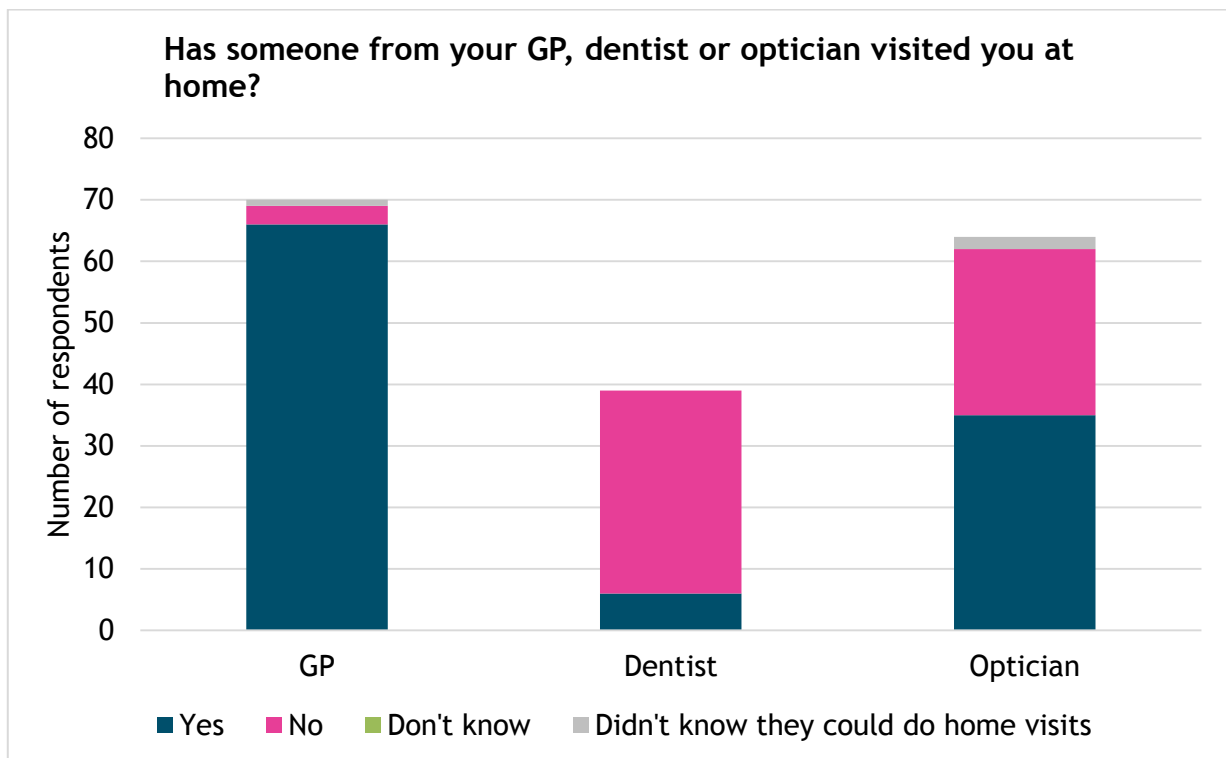
“Don't put paracetamol in childproof bottles - because you can't post them through the letterbox and push strips easier to use.”

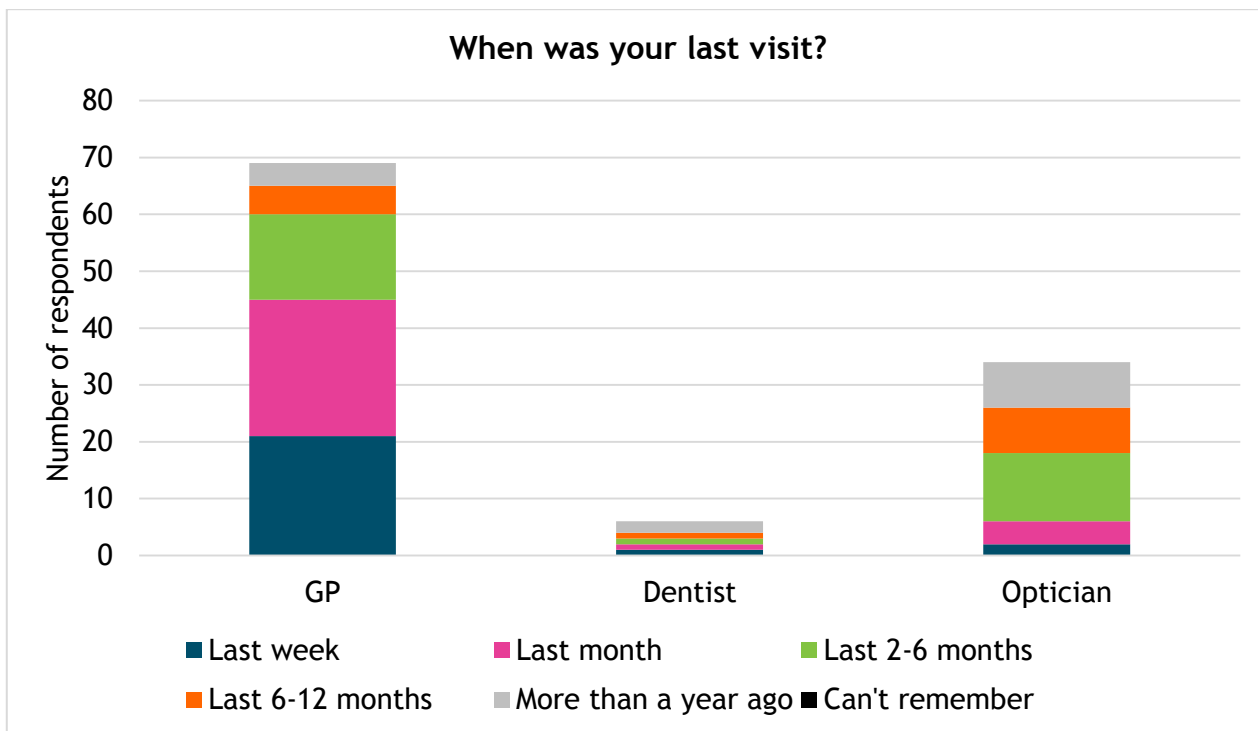
4.2.3 Respondents' experiences

This section reports the experiences of respondents who have had home visits or have had medication delivered to them at home. The first section focusses on GP practices, dental practices and opticians alone, and is followed by pharmacies. This is because the questions asked about the first three services were different to those about pharmacies.

GP practices, dental practices and opticians

The first two questions helped to assess how many people had had a home visit from a GP, dentist or optician and how recent that visit was. The graphs below show the results.





For GP practices, seventy respondents answered the question about whether they had had a home visit, the majority of whom had (66 respondents). Only three respondents had not. One respondent did not know GP services could do home visits.

The experiences shared with us via the survey were most recent with respect to GP practices. Sixty-nine respondents answered this question and 45 respondents had received visits within the last week or month. Only four respondents described experiences over a year old. This pattern fits with our expectation that housebound people probably see their GP quite regularly.

For dentists, 39 respondents answered the question about whether they had had a home visit and only six respondents had. The other 33 respondents had not. Of the six respondents who had, one visit had happened in the last week, one in the last month, one in the last six to 12 months and two were over a year earlier.

For opticians, 64 respondents answered the question about whether they had had a home visit and 35 respondents had. Twenty seven respondents had not. Two respondents did not know that opticians could do home visits. Most visits had happened in the last two to 12 months (20 respondents). Only eight respondents described experiences over a year old.

It is important to note that the results do not indicate that respondents had been refused home visits. The question simply asked if they had ever had one. Thus, the high number of respondents not getting home visits from dentists and, in some respects, opticians, was not necessarily because people had been refused this service.

However, it is interesting that so few respondents had received a home visit from a dentist. The optician result is also interesting even though it was not as low.

The next question asked respondents what their home visit experience had been like. The results are shown in the graph below.



Of those who stated that their GP experience was ‘very good’ or ‘good’ (64 of 67 respondents), 43 respondents gave a reason for their answer. The top theme was mentioned by 16 respondents and focussed on quality of care and staff manner. These respondents often talked about receiving excellent care from friendly, helpful and caring health professionals.

“Doctors and nurses give excellent care.”

“A very competent and friendly person who took blood easily.”

“A very nice doctor visited me and listened to all my troubles.”

The next theme (mentioned by eight respondents) suggested that respondents felt their needs were being met:

“Both were friendly, I didn’t feel rushed and my needs were met.”

“Responded to requirements.”

“Doctor did examination as required.”

Seven respondents also highlighted that they felt the health professionals explained things very comprehensively.

“Doctor explained why she was visiting me and what she was doing to me. She answered all the questions both my daughter and I had. My

medication list was fully reviewed and explained why I was taking each item. She said a nurse would come out and take a blood sample and this has just happened.”

“The doctor explained everything to me I was pleased with the service.”
“Doctor took time to explain.”

For those who stated that their GP experience was ‘bad’ or ‘very bad’ (three of 67 respondents), their issues included:

- Lack of continuity of care. Often see a different doctor each time who does not know the patient as well.
- Access problems, with the GP not being able to get into a patient’s home.

All six respondents stated that their experience with a dentist was ‘very good’ or ‘good’. Five respondents gave a reason for their answer. These respondents felt that staff were pleasant and thorough, with effective examinations and follow up treatment, and appropriate referrals where needed.

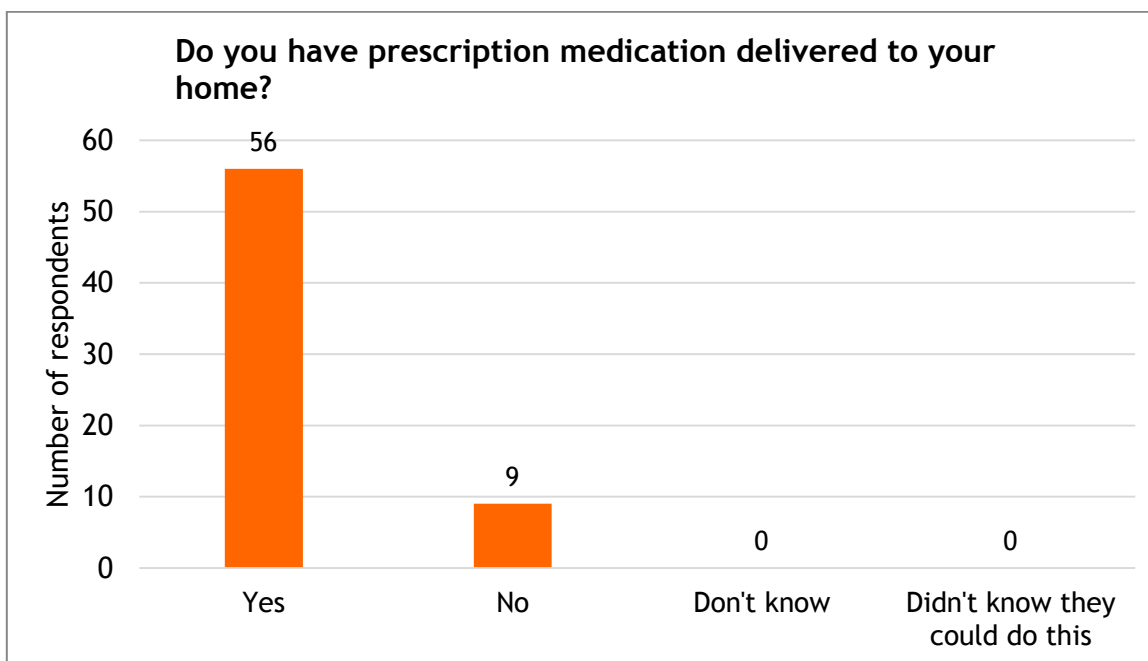
Of those who stated that their experience of opticians was ‘very good’ or ‘good’ (33 of 34 respondents), 14 respondents gave a reason for their answer. The top theme (mentioned by nine respondents) focussed on the good quality of service provided and staff manner. These respondents often talked about services being good, efficient and prompt, with staff being friendly, polite, helpful and professional.

Four respondents also highlighted that their needs were met by the service.

For the one respondent who stated that her experience was ‘bad’, this was because the glasses she was provided with were not satisfactory.

Pharmacies

This section focussed on the questions asked about pharmacy services, starting with ‘Does your pharmacy manage your repeat prescription for you?’ and ‘Do you have prescription medication delivered to your home?’ The results are shown in the next two graphs.



The majority of respondents' repeat prescriptions from the GP were managed by the pharmacy and delivered to their homes.

The majority of respondents said they had ‘very good’ or ‘good’ experiences with their pharmacy services. The results are shown in the graph below.



Of the 57 respondents to this question, 37 gave a reason for their answer, 34 of these having had a ‘very good’ or ‘good’ experience and three having had a ‘bad’ or ‘very bad’ experience.

Of those who had had a ‘very good’ or ‘good’ experience, the top reason for this focussed on the effectiveness of the repeat prescription delivery service. Fourteen highlighted that the delivery service is quick, timely and on time.

The next reason (from eight respondents) focussed on the service the pharmacy provides, highlighting good customer service with caring staff.

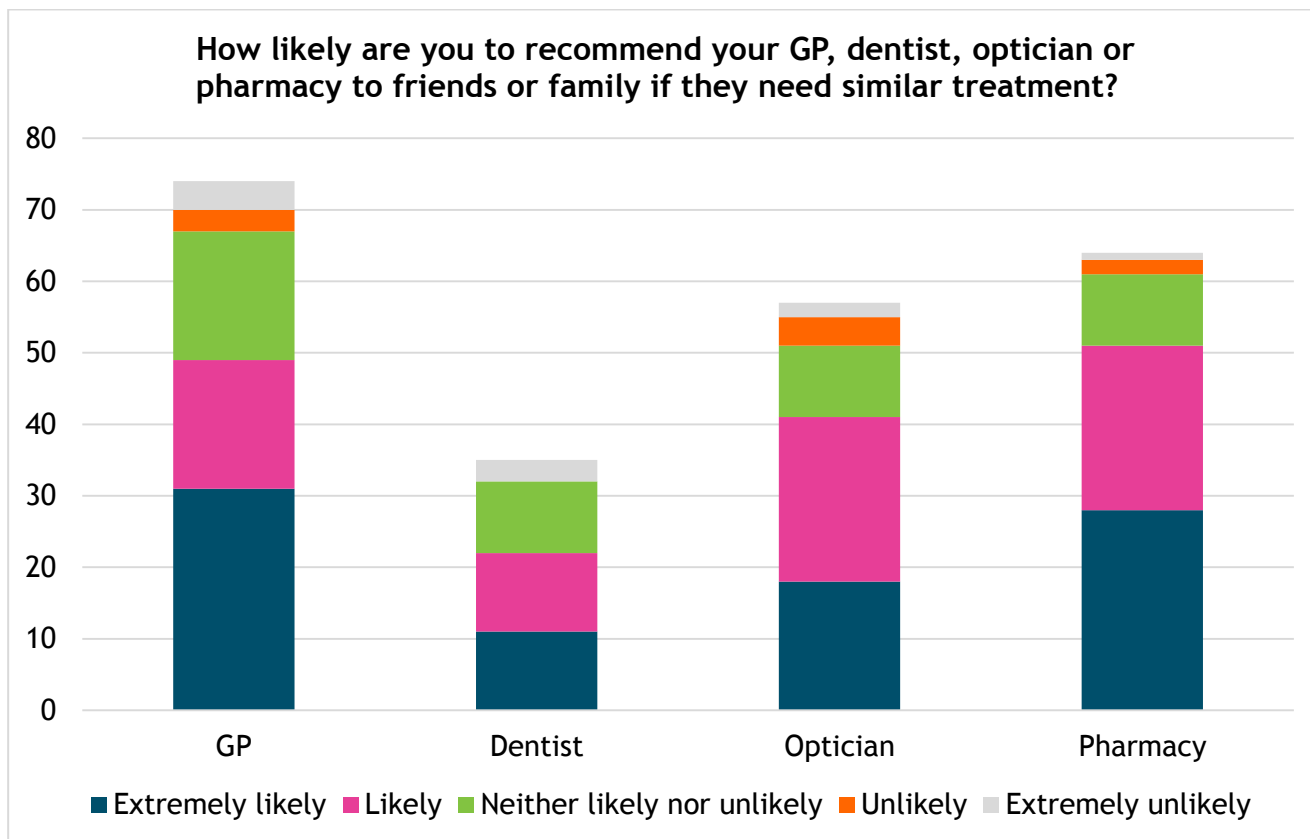
The next reason (four respondents) focussed on the delivery drivers, highlighting that the drivers were very pleasant, courteous and friendly.

The respondent who had had a ‘bad’ experience mentioned that there had been occasions when tablets had been missed off when requested and were not delivered until the next delivery date.

The two respondents who stated that they had had a ‘very bad’ experience, said pharmacies forgot to deliver or ran out of medications, or that difficulties arose if the delivery date needed to change due to a hospital admission.

4.3 Friends and family test

The final question for each service asked respondents how likely they are to recommend services to friends or family and the results are shown in the graph below.



For all services, the majority of respondents were ‘extremely likely’ or ‘likely’ to recommend the service, with a very small number of respondents selecting ‘unlikely’ or ‘extremely unlikely’.

The service most respondents (51) were ‘extremely likely’ or ‘likely’ to recommend to someone else was pharmacy services.

Forty-one respondents said they would be ‘extremely likely’ or ‘likely’ to recommend their optician and forty-nine respondents would be ‘extremely likely’ or ‘likely’ to recommend their GP practice.

Twenty-two respondents said they would be ‘extremely likely’ and ‘likely’ to recommend their dentist.

Respondents did not specifically state why they would or would not recommend a service. However, the results within this report give a good indication of why this might be.

4.4 Mystery shopping

This section describes the results from the calls we made to practices.

In most cases the mystery shopper spoke to reception staff and not a health professional.

GP practices

We called 11 GP practices in Newcastle and, as expected, all said they provide home visits to patients.

All practices described what patients needed to do for home visits, but the level of detail varied. The most detailed response described the following process:

- Patient to call in the morning before lunch and make a home visit request.
- Clinician would call back to discuss the medical problem.
- If a home visit was needed (based on a clinical assessment), the patient would be visited at lunchtime.
- If the patient calls in the afternoon, the same process would take place and a home visit would happen in the evening (between 6pm and 8pm).
- Sometimes evening visits can be challenging so it is best to call in the morning.
- It was mentioned that sometimes patients may not get a home visit for clinical reasons. For example, if a patient had what is believed to be a chest infection, the clinician may arrange for antibiotics to be delivered to their home in the first instance, to see if that helps.

The least detailed response was given by three practices, which simply stated that the patient needed to call in the morning. Descriptions from the other seven practices fell somewhere between the two responses described above.

Some of the issues highlighted in the survey by housebound persons (long voicemail messages and long waits for calls to be answered) were also occasionally experienced by the mystery shoppers.

Dental practices

We called 13 dental practices in Newcastle, two of which are contracted to provide home visits to their own patients and those outside of their practice, five of which are contracted to provide home visits to their patients and six which are not contracted to provide home visits.

The first question we asked was whether the dentist was able to visit people at home. Three dental practices said 'yes', eight said 'no' and two said that they weren't sure. We would have expected two to say 'yes', five to ask if the person was a registered patient and six to say 'no'.

Of the three dental practices that said they did offer home visits, two simply stated that the person would need to register with the practice and complete a questionnaire to assess their eligibility for a home visit. If that was successful, a home visit would be arranged.

The third dental practice which said it provided home visits explained that they can do it on occasion and it tends to be done out of loyalty to the patient (for example, regular attenders). This practice wanted to know if the patient was registered before discussing it further. This practice was not able to provide the name of a dentist that did provide home visits, but did suggest calling the dental hospital for advice.

Of the eight dental practices which said they are not contracted to provide home visits, only one practice was able to provide a name and telephone number of a dental practice which does. One practice suggested approaching another local practice within their chain. Three practices suggested areas where they thought there was a dental practice that provides home visits, for example:

“Think one in Westerhope offers home visits.”

“I think the dental practice at the top of Throckley provides home visits.”

One practice said they would do a search on the internet and call back with some suggested services, which they did. One practice advised that an online search of ‘domiciliary dental visits’ should help. One practice simply said that they did not know of any practices that provided home visits.

Of those two dental practices which said they were not sure if they provided home visits:

- One called back the next day and gave details of a service that could.
- One advised to call a week later to speak to the Practice Manager.

Opticians

We called 11 opticians in Newcastle, six of which we knew were contracted to provide home visits and five which we knew were not.

The first question we asked was if the optician was able to visit people at home. Five opticians which we expected to say ‘yes’ did, and the sixth said ‘no’. All the opticians we expected to say ‘no’ did so.

Of the five opticians who said they provided home visits, four said that the patient would need to call the optician and give their details. The optician would gather all the information they needed to check eligibility and then they would apply to the NHS for approval. Once confirmed, a visit would be arranged. One of the opticians subcontracted home visits out to another company called Healthcall. The telephone number for this company was given.

Of the six who said they did not provide home visits:

- Three were able to provide names and numbers of services that did provide home visits.
- Two were able to suggest services that might offer it, but just gave the name of the service.
- One said that they used to have a leaflet about a service that did home visits but could not locate it. They suggested an online search to find a service.

Pharmacies

We called 21 pharmacies in Newcastle and asked them if they provided a prescription delivery service. Nineteen said they did and two said they did not.

Of those who said that they provided the service, 18 gave information about how to set the service up, with nine services also choosing to provide further information about the actual delivery, such as delivery days, times, and what happens if a delivery is missed.

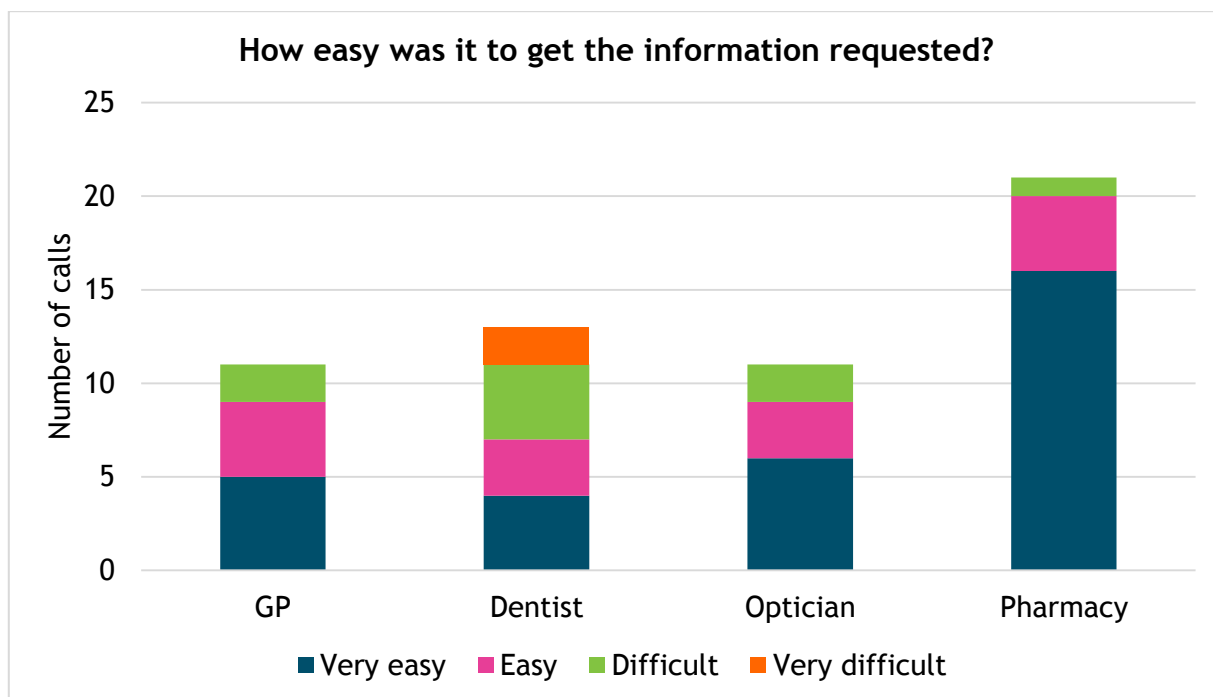
The final pharmacy did not give any information on the topic, but wanted to know if the person used the pharmacy regularly before discussing things further.

Of the two pharmacies that did not provide the service, one stated that they did not offer it because the cost of providing it outweighed the benefits of providing the service. There were also plenty of pharmacies nearby that provided it.

The second pharmacy said they did not provide the service but suggested we contact their other pharmacy which did.

How easy was it to get the information requested?

For each call we assessed how easy it was to get information about home visits or the repeat prescription delivery service. The graph below shows the results.



For GP practices, opticians and pharmacies it was ‘very easy’ or ‘easy’ to get the information in most cases. The only service where we found it ‘very difficult’ to get information from was dental practices.

Pharmacies were the easiest service to get the information from (20 calls - ‘very easy’ or ‘easy’) and they generally provided all the information we needed about repeat prescription delivery services. One pharmacy would not do so unless we could confirm that the patient was a regular user of the pharmacy.

We found that nine of both the opticians and GP practices were ‘very easy’ or ‘easy’ to get information from. Generally, opticians provided us with all the details we needed, but in some cases where they do not provide home services themselves, we were advised to do an internet search ourselves.

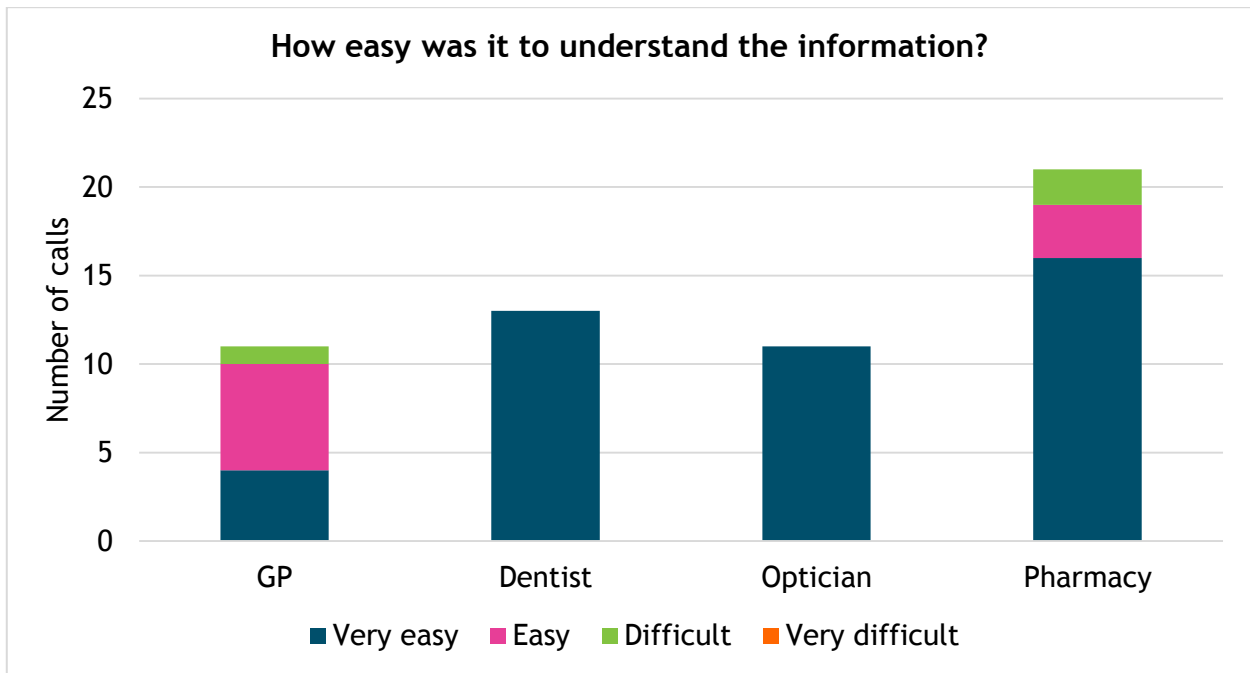
As for GP practices, the practices generally provided us with the details we needed, but in some cases we had to wait on the phone for limited information such as “call in the morning”.

In seven of 13 calls to dental practices we found the information ‘very easy’ or ‘easy’ to obtain.

Sometimes, dental practices provided us with the details we needed, but in some cases we were not given details of dental practices that could do dental home visits and were once advised to do an internet search ourselves.

How easy was it to understand the information?

For each call we assessed how easy it was to understand information about home visits or the repeat prescription delivery service. The graph below shows the results.



For dental practices and opticians, in all instances, it was ‘very easy’ to understand the information given. Those who offered home visits generally gave us easily understandable information about how to organise one or gave us easily understandable advice on how to find a service that does, even if the advice was vague or lacking in some instances.

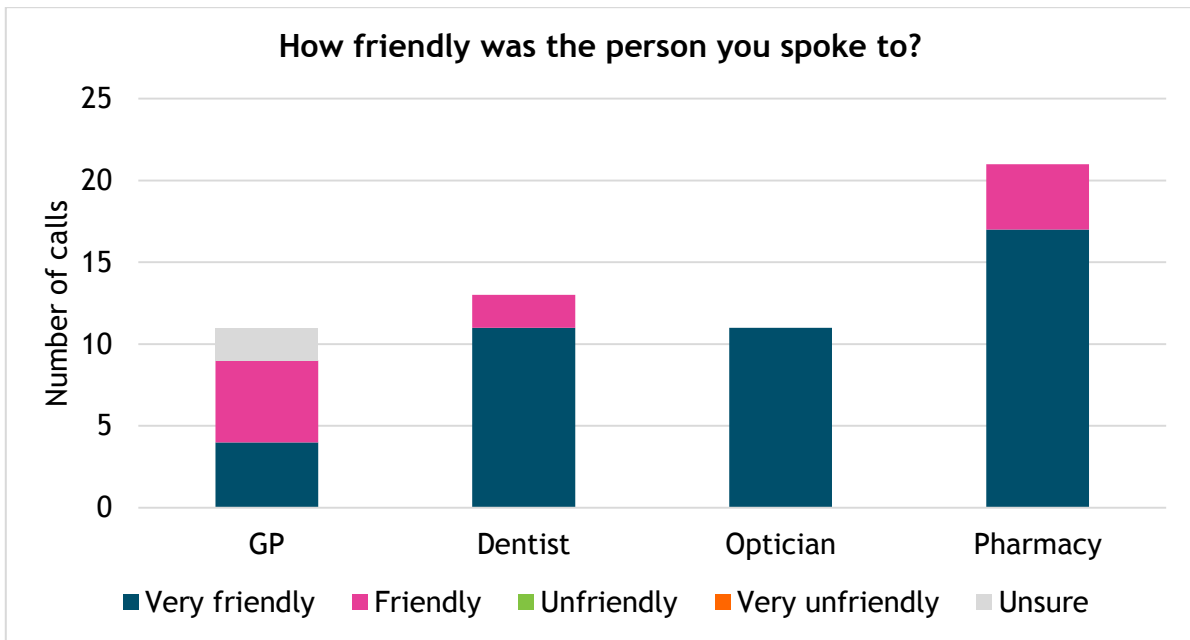
Pharmacies also performed well in this respect, with information being ‘very easy’ to understand in the majority of cases. Pharmacies often gave good descriptions of the repeat prescription delivery service and how to set it up. In only two instances was it difficult to understand because the mystery shopper felt that too much information was given.

For GP practices, the information was ‘easy’ to understand in most instances, followed by ‘very easy’. In one case it was considered difficult to understand the information due to confusion between health visits and home visits.

In no instances was the information ‘very difficult’ to understand.

How friendly was the person you spoke to?

For each call we assessed how friendly we felt the person we had spoken to had been. The graph below shows the results.



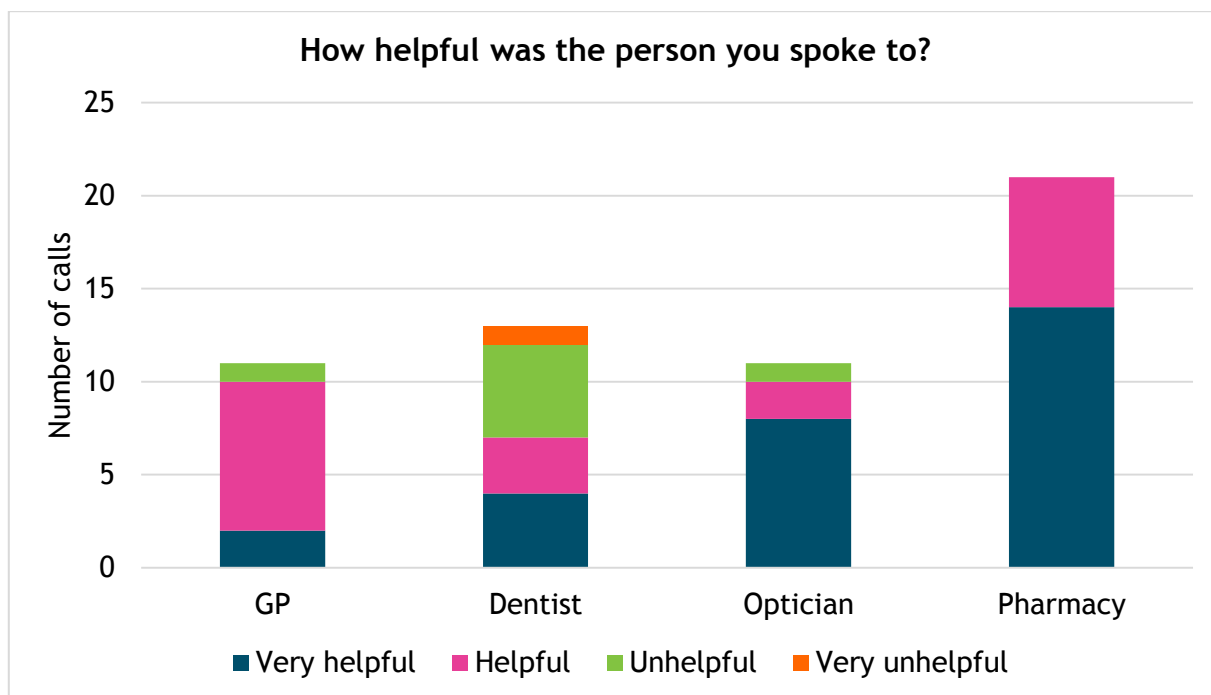
In most instances the person was considered either ‘very friendly’ or ‘friendly’. In only two cases was the mystery shopper unsure and these both related to calls to GP practices. Both these calls were handled quickly so the mystery shopper was not speaking to the staff member long enough to assess how friendly they were.

In no instances was the person answering the call considered to be ‘unfriendly’ or ‘very unfriendly’.

How helpful was the person you spoke to?

For each call we assessed how helpful the person we spoke to was. The graph below shows the results.

In all instances the people we spoke to at the pharmacies were assessed as being ‘very helpful’ or ‘helpful’, with most being considered ‘very helpful’. This was because pharmacies often gave all of the information we needed in good detail, with some providing very good customer service.



At all but one GP practice and one optician, the people we spoke to were considered to be ‘very helpful’ or ‘helpful’. Both services tended to provide all the information we needed, but on two occasions (one each) information was limited (GP practice) or not given (optician).

For dentists, the people we spoke to were considered ‘very helpful’ or ‘helpful’, in seven of the 13 practices. The other six practices were considered to have been ‘unhelpful’ or ‘very unhelpful’ because they could only provide limited information on home visits or none at all.

5. Discussion

When we first started this work it was a challenge to find an estimate of how many people are housebound in the UK and in Newcastle upon Tyne. We were not able to find the data and so had to make a very rough estimate based on data we gathered from six GP practices in Newcastle.

Having access to more accurate data would have been beneficial when planning and reporting on this work. It would have given us more accurate sampling targets and made it easier to report on the significance of our data.

For the benefit of future research into services for housebound people, it would be useful to have more data to work with. We will explore how this could be done with our local authority and/or Clinical Commissioning Group.

The most positive finding to highlight is that the patient experience for home visits and the repeat prescription delivery service was very good. Patients highlighted good staff manner, good quality and care, and good customer service.

For GP practices, dental practices and opticians, there were some common themes:

Patients are still trying to get to these practices

Respondents often highlighted that they can travel to the practices if they can get transport or someone to help them. This could suggest that patients are motivated to get there where they can, perhaps recognising that home visits are a privilege and a limited resource so only using them when they have to. However, it could also suggest that people are perhaps reluctant to make the request, don't know where to make the request (for dental practices and opticians), have been refused in the past, that home visits are too hard to get or there aren't enough available. More research would be needed to understand this.

Patients want easier access to home visits

Despite the majority of respondents knowing that GPs, dentists and opticians can do home visits, this was an improvement suggested for each of these services. This could suggest that the respondents are not requesting home visits, don't know where to make the request (for dental practices and opticians), find it too difficult to get them or are being refused home visits. More research would be needed to understand this.

Information supplied from practices that provide home visits is good

Most of the practices we called that provide home visits, gave good information about their home visiting service.

For dental practices and opticians, there were some common themes:

Uptake of home visits

Only six respondents had received a home visit from a dentist and 35 respondents from an optician. This is low in comparison to the number of people who had received a home visit from a GP.

We expect that housebound people need to consult their GP more regularly than dentists or opticians. The range of health conditions people see their GP for is much broader than the range of conditions people would see a dentist or optician for. People also often see their optician or dentist at specified times (for example, a dentist every six months and opticians every two years). We expect that GP practices also know their patients quite well and, in some cases, would know to proactively offer a home visit. This could explain why the number of home visits by GPs was so high compared to those by dentists and opticians.

For both opticians and dentists, most respondents knew that they could provide home visits so perhaps the low figures suggest that people don't know how to get a home visit, or perhaps it was lower because people were not prioritising their dental or optical health, either because their teeth or vision is in a satisfactory enough condition to get by, or they were unwilling to pay for a dental or optical check-up if this is applicable. It could also be down to having a dental hospital and the Newcastle Eye Centre in Newcastle. More research would be needed to understand this.

Difficulty in obtaining information about home visits from dental practices or opticians who do not provide them

When we called dental practices or opticians that do not provide home visits they often were not able to signpost to practices that do provide this service (slightly worse for dentists than opticians). This could be one of the reasons why people are not accessing home visits for these services, and needs to improve.

Further highlights: GP practices

Respondents highlighted two problems that are common problems when using a GP practice – difficulty getting through on the phone and difficulty booking timely appointments.

Respondents also highlighted frustration at having to prove their entitlement to a home visit each time, with some people suggesting how this could be improved.

The table below summarises the results.

	GPs	Dentists	Opticians	Pharmacy
How easy is it to use	38 of 75 respondents found GP practices 'very easy' or 'easy' to use	16 of 72 respondents found dental practices 'very easy' or 'easy' to use	37 of 72 respondents found opticians 'very easy' or 'easy' to use	47 of 73 respondents found the pharmacy 'very easy' or 'easy' to use
What makes it easy to use	Services are easy to arrange and easy to get home visits	Easy to access if can get transport and family support Home visits	Easy to access home visits	Medication delivery Staff knowledge and manner
What makes it difficult to use	Being housebound Difficulties getting appointments Difficulties getting transport to attend	Being housebound Poor disability access at premises Transport issues	Being housebound Need family support to attend	Not being able to get to the pharmacy
What would help you use these services?	Make it easier to get home visits and change the systems around this	Being visited at home	Being visited at home	Not enough responses to suggest solutions

	GPs	Dentists	Opticians	Pharmacy
Experiences	<p>66 of 70 respondents had had a home visit</p> <p>64 of 67 respondents had 'very good' or 'good' experiences</p> <p>Good quality of care and good staff manner; needs were met</p>	<p>Only six respondents had had a home visit so it is hard to draw conclusions from the data</p> <p>All six had 'very good' or 'good' experiences</p> <p>Pleasant and thorough staff</p>	<p>35 of 64 respondents had had a home visit</p> <p>33 of 34 respondents had 'very good' or 'good' experiences</p> <p>Good quality of service and good staff manner.</p> <p>Needs were met</p>	<p>56 of 65 respondents had their medication delivered</p> <p>54 of 57 respondents had 'very good' or 'good' experiences</p> <p>Quick, timely and on time delivery</p> <p>Good customer service with caring staff</p>
Friends and family	49 of 74 respondents said they were 'extremely likely' or 'likely' to recommend the service	22 of 35 respondents said they were 'extremely likely' or 'likely' to recommend the service	41 of 57 respondents said they were 'extremely likely' or 'likely' to recommend the service	51 of 64 respondents said they were 'extremely likely' or 'likely' to recommend the service

	GPs	Dentists	Opticians	Pharmacy
Mystery shopping	<p>All practices gave a description of how to book a home visit</p> <p>The information was 'very easy' or 'easy' to get in nine out of 11 calls.</p> <p>The information was 'very easy' or 'easy' to understand in 10 out of 11 calls.</p>	<p>All practices contracted to provide home visits (except one) gave a description of how to book a home visit</p> <p>Only one practice (out of eight) not contracted to provide a home visit gave details of a practice that could.</p> <p>The information was 'very easy' or 'easy' to get in seven out of 13 calls.</p> <p>The information was 'very easy' to understand in all cases.</p>	<p>All practices contracted to provide home visits gave a description of how to book a home visit</p> <p>Three (out of six) practices not contracted to provide a home visit gave details of a practice that could.</p> <p>The information was 'very easy' or 'easy' to get in nine out of 11 calls.</p> <p>The information was 'very easy' to understand in all cases.</p>	<p>All pharmacies that provide the repeat prescription delivery service (except one) gave a description of the service and how to set it up</p> <p>The information was 'very easy' or 'easy' to get in 20 out of 21 calls.</p> <p>The information was 'very easy' or 'easy' to understand in 19 out of 21 calls.</p>

6. Recommendations

Based on the information gathered through the survey and mystery shopping, we make the following recommendations.

1. The Local Dental Committee and Local Optical Committee explore how to communicate information about home visiting services to housebound patients.
2. NHS England ensures that all dentists and opticians in Newcastle can provide details of dentists/opticians that undertake home visits.
3. GP practices flag patients who are always going to require home visits so that these patients do not need to explain their entitlement each time.

As the data we gathered will not reflect all primary care services in Newcastle, we suggest that further consultation is needed and recommend the following:

4. GP practices share this report with their Patient Participation Groups and discuss how it could be used to improve services in their own practices, or perhaps consult further with housebound people.
5. Both the Local Dental Committee and the Local Optical Committee consider how this work could be used to consult further with housebound people through a selection of practices in Newcastle.

7. Acknowledgements

We would like to thank all the people who gave their views to inform this report.

Our Champions, who are all volunteers, helped complete the mystery shopping work: thanks go to Alan Guest and Violet Rook.

We would like to thank Tracey Stuchlik (Practice Manager Lead – North and East) and Donna Aydon (Practice Manager Lead – West) for helping us communicate with GP practices in Newcastle. We would also like to thank Andre Yeung (Public Health Pharmacist at Newcastle City Council) for helping us communicate with pharmacies in Newcastle.

We are grateful to the following for helping us contact housebound people: Denton Turrett Medical Centre; Grainger Medical Group; Holmside Medical Group; Lloyds Pharmacy, Station Road; Medicentre, Jesmond; Newline Pharmacy, Coast Road; Parkway Medical Group; Ponteland Road Pharmacy; Quayside Pharmacy, Crawhall Road; Shieldfield Pharmacy; The Surgery, Jesmond; Thornfield Medical Group; Well Pharmacy, Arlington Avenue; Well Pharmacy, High Street; Whitworth Chemists, Elswick Road.

Appendices

Appendix one

Survey: using your GP, dentist, optician or pharmacy

Healthwatch Newcastle is an independent organisation, here to listen to people's experiences of health and social care services. The feedback we gather is used to help improve services for everyone.

We are currently seeking feedback from people who are housebound (who are unable to leave their home due to physical or psychological illness). We would like their views on using GP practices, pharmacists, dentists and opticians.

If you take part in our survey all information will be treated confidentially and will remain anonymous. What you say will not be passed on to your care provider in a way that can be linked to you and it will not affect the care you receive today or in the future.

The information you provide will be used to produce a report on our findings. This will be a public report and will be shared with NHS England, Newcastle Gateshead Clinical Commissioning Group and other NHS services.

At the end of the survey there is an option to enter a prize draw to win a £25 shopping voucher.

If you have any queries or would like to find out more please phone Healthwatch Newcastle on our Freephone number, 0808 178 9282 or email info@healthwatchnewcastle.org.uk

Thank you for taking the time to complete this survey.

Please return the survey using the FREEPOST envelope provided by **31 December 2018**

Your individual response is not identifiable via this reference number

I am responding on behalf of...

- Myself
- The person I care for
- A family member
- Other (please specify below)

Reference number				
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Section one: ease of using your GP practice

1. How easy is it for you to use your GP practice?

- Very easy
- Easy
- Difficult
- Very difficult
- I do not need to use this service (go to question 8)

Please explain your answer:

2. Has someone from your **GP practice** visited you at home?

- Yes (go to question 3)
- No (go to question 6)
- Don't know (go to question 6)
- Didn't know they did home visits (go to question 6)

3. Who visited you at home (for example, a doctor or practice nurse)?

4. When was your last visit?

- Last week
- Last month
- Within the last 2-6 months
- Within the last 6-12 months
- More than a year ago
- Can't remember

5. What was your experience like?

- Very good
- Good
- Bad
- Very bad

Please explain your answer:

6. If you have difficulties using your **GP practice**, what could they do to make it easier for you?

7. How likely are you to recommend your **GP practice** to friends and family if they need similar treatment?

- Extremely likely
- Likely
- Neither likely nor unlikely

- Unlikely
- Extremely unlikely

GP practice name and street:

Section two: ease of using your dentist

8. How easy is it for you to use your dentist?

- Very easy
- Easy
- Difficult
- Very difficult
- I do not need to use this service (go to question 14)

Please explain your answer:

9. Has a **dentist** visited you at home?

- Yes (go to question 10)
- No (go to question 12)
- Don't know (go to question 12)
- Didn't know they did home visits (go to question 12)

10. When was your last visit?

- Last week
- Last month
- Within the last 2-6 months
- Within the last 6-12 months
- More than a year ago
- Can't remember

11. What was your experience like?

- Very good
- Good
- Bad
- Very bad

Please explain your answer:

12. If you have difficulties using your **dentist**, what could they do to make it easier for you?

13. How likely are you to recommend your **dentist** to friends and family if they need similar treatment?

- Extremely likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Extremely unlikely

Dental practice name and street:

Section three: ease of using your optician

14. How easy is it for you to use your optician:

- Very easy
- Easy
- Difficult
- Very difficult
- I do not need to use this service (go to question 20)

Please explain your answer:

15. Has your optician visited you at home?

- Yes (go to question 16)
- No (go to question 18)
- Don't know (go to question 18)
- Didn't know they did home visits (go to question 18)

16. When was your last visit?

- Last week
- Last month
- Within the last 2-6 months
- Within the last 6-12 months
- More than a year ago
- Can't remember

17. What was your experience like?

- Very good
- Good
- Bad
- Very bad

Please explain your answer:

18. If you have difficulties using your **optician**, what could they do to make it easier for you?

19. How likely are you to recommend your **optician** to friends and family if they need similar treatment?

- Extremely likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Extremely unlikely

Optician name and street:

Section four: ease of using your pharmacy

20. How easy is it for you to use your pharmacy:

- Very easy
- Easy
- Difficult
- Very difficult
- I do not need to use this service (go to question 26)

Please explain your answer:

21. Does your pharmacy manage your repeat prescriptions for you?

- Yes
- No
- Don't know
- Don't need repeat prescriptions
- Didn't know they could do this

22. Do you have prescription medication delivered to your home?

- Yes (go to question 23)
- No (go to question 24)
- Don't know (go to question 24)
- Didn't know they could do this (go to question 24)

23. What was your experience like?

- Very good
- Good
- Bad

Very bad

Please explain your answer:

24. If you have difficulties using your **pharmacy**, what could they do to make it easier for you?

25. How likely are you to recommend your **pharmacy** to friends and family if they need similar treatment?

- Extremely likely
- Likely
- Neither likely nor unlikely
- Unlikely
- Extremely unlikely

Pharmacy name and street:

26. Is there anything else you would like to share with us?

27. Would you like to be entered into a prize draw to win a £25 shopping voucher?

- Yes (please give your details below)
- No

Name:

Phone number:

Email:

28. Are you happy for us to contact you if we have any further questions?

- Yes (please give your details below)
- No

Name:

Phone number:

Email:

Healthwatch Newcastle/Gateshead monitoring form

We would appreciate it if you could spare a minute to share some information with us. All the information you provide is confidential and will be used to better target our activities.

You do not have to complete parts of this form if you do not wish to do so.

Do you consider yourself to be housebound? (if yes, please tick a reason below)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
--	------------------------------	-----------------------------

Advanced age	<input type="checkbox"/>	Physical illness	<input type="checkbox"/>
Physical disability	<input type="checkbox"/>	Psychological illness	<input type="checkbox"/>
Sensory disability	<input type="checkbox"/>	Other (please specify)	<input type="checkbox"/>

What is the first part of your postcode, for example, NE4	
--	--

Gender	<input checked="" type="checkbox"/>
Male	<input type="checkbox"/>
Female	<input type="checkbox"/>
Transgender	<input type="checkbox"/>
Other	<input type="checkbox"/>

Age	<input checked="" type="checkbox"/>
17 and under	<input type="checkbox"/>
18 - 24	<input type="checkbox"/>
25 - 49	<input type="checkbox"/>
50 - 64	<input type="checkbox"/>
65 - 79	<input type="checkbox"/>
80+	<input type="checkbox"/>

Do you consider yourself to have a disability?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Are you a carer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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A carer is anyone who cares, unpaid, for a friend or family member who due to illness, disability, a mental health problem or an addiction cannot cope without their support.

Are you?	<input checked="" type="checkbox"/>
A student or in full-time education	<input type="checkbox"/>
Employed or self-employed	<input type="checkbox"/>
Not in paid employment	<input type="checkbox"/>
Retired	<input type="checkbox"/>

Which of the following best describes how you think of yourself?		✓
Heterosexual (straight)	<input type="checkbox"/>	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>	<input type="checkbox"/>
Gay man	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>

What is your ethnicity?			
White		Asian or Asian British	
British	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Irish	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Gypsy or Irish Traveller	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Any other White background	<input type="checkbox"/>	Chinese	<input type="checkbox"/>
		Any other Asian background	<input type="checkbox"/>
Mixed			
White and Black Caribbean	<input type="checkbox"/>	Black or Black British	
White and Black African	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>	African	<input type="checkbox"/>
Any other mixed background	<input type="checkbox"/>	Any other Black background	<input type="checkbox"/>
Other ethnic groups			
Arab	<input type="checkbox"/>	Any other ethnic group (please say)	

What is your marital status?			✓
Single	<input type="checkbox"/>	Married	<input type="checkbox"/>
Divorced	<input type="checkbox"/>	Civil partnership	<input type="checkbox"/>
Widowed	<input type="checkbox"/>	Unknown	<input type="checkbox"/>

Thank you for completing our survey

Appendix two

GP services mystery shopping crib sheet

We are trying to find out:

- a) What the process is to organise a home visit
- b) How easy it was to get this information
- c) How clear the answer is
- d) How friendly the staff were
- e) How helpful the staff were

Name of service

Home visit process

1. How easy was it to get this information?

Very easy Easy Difficult Very difficult

2. How easy was it to understand the information?

Very easy Easy Difficult Very difficult

3. How friendly was the person you spoke to?

Very friendly Friendly Unfriendly Very unfriendly

4. How helpful was the person you spoke to?

Very helpful Helpful Unhelpful Very unhelpful

Anything else to share?

Dentist/optician services mystery shopping crib sheet

We are trying to find out:

- a) If the dentist/optician offers home visits
- b) If yes, what the process is
- c) If no, is there a dentist/optician in Newcastle who does? What are their contact details?
- d) How easy it was to get this information
- e) How clear the answer is
- f) How friendly the staff were
- g) How helpful the staff were

Name of service

Does the service offer home visits?

Yes No

If yes, note home visit process here

If no, note what the practice tells you with regard to dentists/opticians that do offer home visits here

1. How easy was it to get this information?

Very easy Easy Difficult Very difficult

2. How easy was it to understand the information?

Very easy Easy Difficult Very difficult

3. How friendly was the person you spoke to?

Very friendly Friendly Unfriendly Very unfriendly

4. How helpful was the person you spoke to?

Very helpful Helpful Unhelpful Very unhelpful

Anything else to share?

Pharmacy services mystery shopping crib sheet

We are trying to find out:

- a) Whether the pharmacy offers the prescription delivery service
- b) What a patient needs to do to set it up
- c) What services can be provided for patients who are having difficulties remembering to take their medication
- d) How easy it was to get this information
- e) How clear the answer is
- f) How friendly the staff were
- g) How helpful the staff were

Name of service

Does the service offer the prescription delivery service?

Yes

Notes on setting up prescription delivery service

1. How easy was it to get this information?

Very easy Easy Difficult Very difficult

2. How easy was it to understand the information?

Very easy Easy Difficult Very difficult

3. How friendly was the person you spoke to?

Very friendly Friendly Unfriendly Very unfriendly

5. How helpful was the person you spoke to?

Very helpful Helpful Unhelpful Very unhelpful

Anything else to share?

Appendix three

Demographic data

Gender		Sexuality	
Male	20	Heterosexual	63
Female	52	Bisexual	0
Transgender	0	Gay man	0
Unknown	5	Gay woman	0
Age		Other	2
17 and under	0	Unknown	12
18-24	0		
25-49	1	Ethnic groups	
50-64	4	British	7
65-79	12	Irish	0
80+	56	Gypsy or Irish Traveller	0
Unknown	4	Other white background	0
Disability		Indian	0
Yes	65	Pakistani	1
No	7	Bangladeshi	0
Unknown	5	Chinese	0
Carer		Other Asian background	0
Yes	11	White & Black Caribbean	0
No	61	White & Black African	0
Unknown	5	White & Asian	0
Employment status		Other mixed background	0
Student	0	Caribbean	0
Employed/self-employed	0	African	0
Not in paid employment	1	Other Black background	0
Retired	68	Arab	0
Unknown	8	Other ethnic background	0
Marital status		Unknown	69
Single	0		
Divorced	0		
Married	0		
Civil partnership	0		
Living with partner	0		
Widow	8		
Unknown	69		

Contact details



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