

Local People's Views

On the location of the High Oak Surgery and GP services



A Healthwatch Dudley report for
Dudley Integrated Health and Care NHS Trust
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Contents

Summary	2
Introduction	3
Telephone calls	4
What people were saying	6
Conclusions	12
What next	13

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Summary

Dudley Integrated Health and Care NHS Trust has responsibility for managing the High Oak Surgery in the Dudley borough. During the Covid-19 pandemic period it was transferred from its Pensnett site to the Brierley Hill Health and Social Care Centre, Venture Way, Brierley Hill.

The Pensnett site was transformed into a Respiratory Assessment Centre for Covid-19 patients. At the same time, it was decided there would be time for reflection over a period of months to assess where the best place might be to permanently locate the High Oak Surgery.

Healthwatch Dudley was asked to help with telephone calls to get the views of individuals, who had been using the High Oak Surgery on the Pensnett site, on where it should be located and how it could meet the health and wellbeing needs of local people.

In total, we talked to 12 individuals, 8 Male and 4 Female. They were mostly older people and White British. It was possible to group the focus and tone of discussions under four headings: experience contacting the surgery; where to locate a surgery; community and familiarity; and views on future services. The main findings are:

- People are concerned about how they get access to the surgery and GP services. The emergence of a digital divide might further disadvantage those who are not able to get online or who lack the skills needed to get the most from the internet and digital services.
- There is a strong preference for a surgery in the Pensnett area and reference was made to the High Oak Surgery and plans for the development of improved healthcare facilities on the site that had not come to fruition. The desire is for convenient and easy access to local healthcare services on foot or using local bus services, especially for older people or those with mobility problems or chronic health conditions.
- People expressed strong feelings regarding the local location of a surgery and its connection with the community and individuals it serves. They elaborated on it being an integral and valued part of the community and mentioned well established and trusting relations that had existed with GPs and other staff at the High Oak Surgery on Pensnett.

Introduction

Dudley Integrated Health and Care NHS Trust

Dudley Integrated Health and Care NHS Trust is responsible for providing a range of community-based physical and mental health services across the Dudley borough area. Under an Alternative Provider Medical Services (APMS) contract - which allows

contracts with organisations other than general practitioners or GP partnerships to provide primary care services - it has responsibility for the management and operations of the High Oak Surgery.¹

The High Oak Surgery

The High Oak Surgery serves the communities of Kingswinford, Wall Heath, Pensnett, Brierley Hill, Wordsley, Gornal Wood and Dudley town itself. The Kingswinford, Wall Heath and Wordsley suburban areas are, in the main, significantly less deprived than the Brockmoor, Pensnett, Brierley Hill and Dudley town areas which have some of the highest levels of deprivation in country - by local super output area and national indices of deprivation.²

In July 2011, a local newspaper reported on plans for a new £3 million health centre in Pensnett offering a GP surgery and specialist treatments - it would replace existing Portakabin

like buildings.³ During the Covid-19 pandemic period the High Oak GP Surgery was transferred to the Brierley Hill Health and Social Care Centre, Venture Way, Brierley Hill, with its old Pensnett High Street site being transformed into a Respiratory Assessment Centre for Covid-19 patients.

In June 2020, a local newspaper reported that three months on from the transfer councillors were calling for GP provision to be restored in the area.⁴ After the standing down of the centre in June 2021 there were no imminent plans to reinstate the High Oak Surgery at the site. It was decided there would be time for

¹ Dudley Integrated Health and Care NHS Trust, <https://www.dihc.nhs.uk/>

² See Office for National Statistics, <https://www.ons.gov.uk/search?q=IMD>

³ Express and Star, July 26, 2011

⁴ Stourbridge News, 19 June 2020

reflection over a period of months to assess where the best place might be to permanently locate the High Oak Surgery. And a programme of public

engagement would be undertaken to get their views on the future of the High Oak surgery.

Healthwatch Dudley

Healthwatch Dudley is the local independent champion for people on both health and social care services matters. We listen to people's experiences and views on getting help with their health and care and share what we learn with managers and others who make decisions about how

health and care services are delivered.⁵ We were asked to help with telephone calls to get the views of a group of individuals using the High Oak Surgery on where it should be located and how it can meet the health and wellbeing needs of local people.

Telephone calls

Healthwatch Dudley undertook to have telephone conversations with small number of individuals - targeting those who, because of their personal circumstances might be

especially prone to being disadvantaged by any relocation of GP premises and services out of the Pensnett area.

Conversations

The semi-structured conversation was used to get people's views on the siting of the High Oak Surgery and getting access to GP services. The person telephoning an individual making use of predetermined and prompting or probing questions to

facilitate those conversations - for example, 'Please give an example?', 'Can you say something more?', 'What was it like for you?', 'How did you feel?' The predetermined questions are set out in Table 1 on page 5.

⁵ Healthwatch Dudley,
<https://healthwatchdudley.co.uk/>

Conversation questions	
1	How do you access GP services?
2	What has your experience been of accessing GP services?
3	How important is the location of the GP surgery to you?
4	What works well for you when you need healthcare help or advice?
5	What could be improved when it comes to getting healthcare help or advice?

Table 1: Conversation questions

A selected list of names with contact details, taken from a list of persons

registered with the High Oak Surgery, was passed to Healthwatch Dudley.

Identifying themes and issues

All of the information collected was systematically analysed with labelling and categorisation procedures used to identify patterns and relationships

that help to explain what is happening in terms of people's experiences and feelings (see Diagram 1, below).

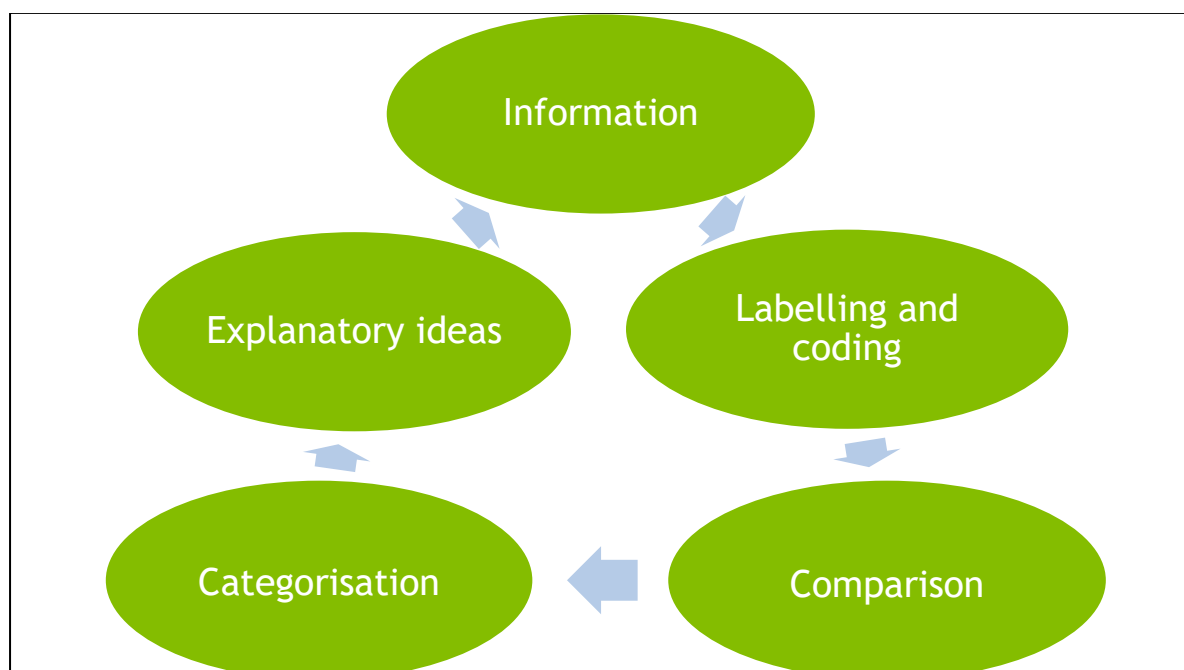


Diagram 1: Making sense of information⁶

⁶ Taken from Corbin, J. and Strauss, A. (1990) Grounded Theory Research: Procedures, Canons, and Evaluative Criteria, Qualitative Sociology, Vol.13, No.1, <http://link.springer.com/article/10.1007/BF00988593#page-1>

Who we talked to

In total, we talked to 12 individuals, 8 Male and 4 Female. They were mostly older people and White British. They had been provided with information on the project and had agreed that

their names and contact details could be passed to Healthwatch Dudley. In the report names have been changed to preserve individuals' anonymity.

Name	Gender	Age	Ethnicity
James	M	67	White British
Alan	M	33	White British
Sheila	F	86	White British
Ranajit	M	71	Indian
Leonard	M	80	White British
Bill	M	75	White English
Norma	F	70	White British
John	M	34	White British
Simon	M	67	White British
Sandra	F	85	White British
Peter	M	66	White English
Helen	F	78	White British

Table 2: The participants in conversations

What people were saying

The focus and tone of discussions were grouped under four headings reflective of people's responses to questions on the future of the High Oak Surgery. The headings are: experience contacting the surgery;

where to locate a surgery; community and familiarity; and views on future services. Much discussion focused on communities and neighbourhoods and where to locate a surgery for local people.

Experience contacting the surgery

Most discussions began with people talking about their experiences and views on contacting the GP surgery during the Covid-19 pandemic period and often a reliance on the telephone to do so. Norma, remarked that *'I telephone [the surgery] but can't get through to get my prescription. I'm on pay-as-you-go ... It can cost a lot of money'*. And Leonard said *'I rely on the telephone, it is a job to get*

through to the surgery, it's always been difficult, but worse now ... there is no chance of an appointment if you are not calling early'. Then there are the additional difficulties and disadvantage that older people might experience when they need to contact the GP surgery because they are not online or lack the skills needed to get the most from digital services.

'I get [GP] appointments using the telephone ... I can't use the internet, I don't know how to use it' (Ranjit, a woman aged 71, who has mobility problems).

I'm not online, I've never been online. I use the telephone when I need to book a GP appointment ... You can't [easily] get GP appointments now and beforehand [prior to the start of the Covid-19 pandemic] it was not so easy either' (Helen, aged 78).

'I am able to get online ... [but] I can't order things online, it keeps going so far then that's it. I was not brought up with computers, if things are straightforward it's okay. But, the online [virtual] surgery is not straightforward for me to use' (Norma, aged 70, who has neuralgia, arthritis and heart disease).

For most individuals we talked to the biggest problem is getting to see a doctor. In John's view *'It has got progressively worse, since the days when you could walk into a surgery and see someone'*. Meanwhile, Simon commented that *'The people who*

plan these things [new services] they don't understand what patients go through ... Get someone here [to Pensnett] to go with a patient to see what they have to go through to get to the surgery ...'

Where to locate a surgery

There was much detailed discussion on where to permanently locate a surgery to serve the people living in the Pensnett area. John, in his early thirties, remarked that *'For the older generation it is better to have something that is local ... if that made it more accessible'*. Ranajit, for example, who is aged 71 and has

mobility problems remarked that the High Oak Surgery on Pensnett was not far from her home and *'To have something local would be good'*. It might be different for others who are younger, fitter, less likely to need to visit the surgery and have their own transport.

'I prefer it [the surgery] where it is in Venture Way ... It's a modern building ... It's nice to be in ... it's cleaner, not so tired as the buildings in Pensnett, which were meant to be temporary ...' (Alan, aged 33).

Leonard, aged 80, who is housebound, has cancer and mental health problems felt that *'The surgery in Venture Way is beautiful but way out of the local area for people with no car, and there is no bus stop nearby to it, it is a half mile walk to the surgery ...'*. Similarly, Sheila, aged 86,

pointed out that *'Access to Venture Way can mean having to get on a bus to Brierley Hill town centre ... Buses run every half hour, if we miss one we are stumped'*. The overwhelming view was that it would be preferable to have a surgery on the Pensnett estate.

'I have cancer and suffer with my nerves ... severe anxiety and depression ... I was a patient with the original GP at Pensnett [High Oak Surgery] ... We have the surgery in Brierley Hill, I want something in Pensnett ... It [the surgery] needs to be central in Pensnett ... The [High Oak] buildings were nice enough inside ... there were 4 or 5 consultation rooms, and a nice reception area ... the staff and services were okay', (Leonard, aged 80, who is housebound, has cancer and mental health problems).

'High Oak [when it was on the Pensnett estate] was right on the doorstep for me. Brierley Hill is a £10 return fare [in a taxi] ... It is ... a very nice venue at Brierley Hill ... [But] it is inconvenient getting to Brierley Hill. I have heart failure, and I'm being treated for a left foot problem and poor circulation ... I live on my own, if it wasn't for my granddaughter helping I would be lost. But, she has two jobs, two kids, and is tired. My grandson is good too but he is autistic. My daughter is off sick with long Covid ... My preference would be to have a surgery that is local ... The majority of people I talk to want it [the surgery] back on Pensnett ...', (Bill, aged 75, who has heart failure, poor circulation and a left foot problem).

'I would prefer something [a surgery] in the Pensnett area ... There was the High Oak Surgery that had always been on Pensnett. Then it changed to being in Brierley Hill ... Something [a surgery] on Pensnett would be easier to get to ...' (Helen, aged 78).

In turn, there was mention of the promise to have, something, a new surgery and other community premises constructed at the High Oak Surgery site on the Pensnett estate.

Indeed, some people had seen plans and outlines for new healthcare facilities and had, at least initially, been keen to see work begin on the new buildings.

'Who wants to go back to a prefab as opposed to a modern surgery? But, we need a surgery on Pensnett with doctors we can see easily ... The High Oak Surgery, I could walk there, the buildings were not fit for purpose but we were promised a new surgery. Later we were told the council could not afford it [building a new surgery] ...' (Norma, aged 70, who has neuralgia, arthritis and heart disease).

'I'd rather have it [the surgery] at Pensnett, it is ridiculous to have it in Brierley Hill. I'm disabled. I would have to traipse all the way to Venture Way to see a doctor ... It's very inconvenient [a surgery at Brierley Hill] ... It's difficult on public transport, the bus to Brierley Hill, the walk past ASDA then to the Health Centre ... At one time they had plans to have a surgery permanently at High Oak, we saw the plans, but, nothing came of it' (Simon, aged 67, who has one kidney, arthritis and chronic obstructive pulmonary disease).

Other comments were *'I want the surgery back in Pensnett ... Venture Way, I can't get up there, I'm disabled ... There are lots of old folk round here they want something local ...'* (James). *'[A surgery] back at the High Oak [on Pensnett] would be perfect. There are many older people on Pensnett ... it would be good to*

have something within walking distance ... to keep something in the area somewhere (Sheila) and *'I would like something [a surgery] on Pensnett, definitely. I live on Pensnett ... I have difficulty with mobility, it would be more accessible [a surgery on Pensnett]* (Peter).

Community and familiarity

The connection of a surgery with the community, it being an integral part of the community, and serving all of the people who live there was often

mentioned as being important. And also having well established and trusting relations with the doctors at the surgery.

'When I was a lad the doctors knew you, the family, personally. There was that familiarity which is a good thing and maybe more achievable in a local surgery ... I think the community would support a local surgery and relationships with doctors that they get to know, the family doctor ... If something is felt to belong to people they will support it more. But it is no good having it local if it can't meet [people's] needs ... The old [High Oak Surgery] premises were outdated and would need to be brought up to a [modern] standard ...', (John)

Others commented that *'I had used it [the High Oak Surgery] for 50 years. It worked well for me' ... (Bill), 'It, High Oak, was ... cosy, everyone chatted a lot', (Sandra), 'It was fine, lovely. I was able to get*

appointments when needed ... I found the old Porta buildings okay, inside it was warm and comfortable', (Peter), 'They [the doctors] were incredible, they would have a chat with you ... It was more community-based', (Alan).

Views on future services

During conversations on the future for the High Oak Surgery and its location some people mentioned GP practice improvements or new services that

would help them to get access to healthcare information and help when they need it. They suggested it would be good to have:

- More telephone lines and more receptionists answering calls to the surgery.
- Bereavement counselling available at the surgery.

- Better access to doctors and good quality services that mean you do not end up going to hospital when you don't need to.
- Improved systems to ensure that all of your medical notes are available in one place and kept up to date.
- More opportunity to see the same doctor when you want to.
- More help available for people with conditions such as asthma or diabetes.
- More help available for people who require physiotherapy.

Conclusions

People are concerned about how they get access to the surgery and GP services. The emergence of a digital divide might further disadvantage those who are not able to get online or who lack the skills needed to get the most from the internet and digital services.

There is a strong preference for a surgery in the Pensnett area and reference was made to the High Oak Surgery and previous plans for the development of improved healthcare facilities on the site. The desire is for convenient and easy access to local healthcare services on foot or using local bus services, especially for older people or those with mobility problems or chronic conditions.

People expressed strong feelings regarding the local location of a surgery and its connection with the community and individuals it serves. They elaborate on it being an integral and valued part of the community and their well established and trusting relations with GPs and other staff at the surgery.

What next

- Continue to have conversations with older people and other groups of people of different ages and ethnicities who are fit and well or have disabilities or chronic health conditions to get a more representative set of views and opinions on the location and function of the High Oak Surgery.
- Further consider the specific healthcare requirements of older and other groups of people when thinking about the location of a surgery to serve those living in the Pensnett area - with a particular focus on ease of access, convenience and public transport options.
- Devote time to thinking about the range of facilities and services that exist in an area, local people's fears over the loss of facilities and services and how they are part of a community.
- Wherever possible seek out and develop opportunities for the continued involvement of local people in discussions and the coproduction of healthcare options and plans for the provision of GP services.

Healthwatch Dudley
would like to thank all of
the individuals who
participated in
telephone conversations
and gave their time to
talk about the future of
the High Oak Surgery.

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