



Perth and Kinross Health & Social Care Partnership

General Practice Premises

Public Survey Analysis

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Introduction

The Perth & Kinross Primary Care Premises Strategy was approved by the P&K Integrated Joint Board (IJB) in June 2023. Perth & Kinross Primary Care Team set out a Communication, Participation and Engagement Plan to support delivery of the Premises Strategy. This includes collaboration and involvement with our community stakeholders in the planning, design and delivery of how and where we deliver services through a co-production & co-design approach.

Service users can provide valuable perspectives on the state of practice premises and their ability to meet the needs of the service.

The consultation has been completed and the findings are shared here. The document includes the methodology so that the learning here can support public consultations in the future.

Primary Care Premises Strategy

The 2018 General Medical Services (GMS) contract has had a significant impact on the way general practice works and has changed with a wider multidisciplinary team (MDT) taking a greater role in delivering front-line primary care services. This has resulted in more staff working in and around GP premises in P&K. With many of these employees working part-time, there are significantly more staff members requiring accommodation within GP Practices, many of which are already at capacity and have limited space for expansion.

Whilst it is the responsibility of NHS Tayside (NHST) to ensure suitable premises are in place for Primary Care services, in order to ensure P&K GP practices continue to deliver sustainable and high quality services, it is beholden on P&K HSCP to ensure it has a clear picture of the current situation and a strategic plan for premises going forward to inform NHST on the HSCP priorities. Across P&K there are currently 23 individual GP practices with a standard GMS contract to deliver services for NHST.

The Primary Care Premises Strategy identified nine priority areas to guide the premises work programme which are:

- 1. Perth City / Bridge or Earn / Abernethy / Almond Valley GP Practices
- 2. Perth City Community Care & Treatment Service
- 3. The Carse, Errol
- 4. Lease Assignations/Liabilities/Property Ownership
- 5. Branch Surgeries
- 6. Opportunities for better value
- 7. Map PCIP Opportunities & Barriers
- 8. Assess potential improvements to premises
- 9. Premises Efficiency Review



Our Engagement Approach

To help us determine our methods of communication and engagement we considered:-

- The scope and context;
- The local context and who we need to engage with;
- Budget, timescales & resources;
- Skills of the team & availability to undertake the work required, including attendance at events and community groups.

This was a coordinated approach to gather views in an appropriate and efficient way, providing as many citizens as possible an opportunity to voice their views. Citizens should be assured of ongoing and meaningful engagement and continued dialogue as part of the Primary Care Premises Strategy.

Methodology

Plan

An engagement plan was developed around 4 key tasks:

- 1. Identify stakeholders
- 2. Create awareness about the GP Premises Strategy
- 3. Co-production of an engagement plan with HSCP community engagement workers
- 4. Analyse and feedback on findings.

Identifying Stakeholders

P&K HSCP community engagement workers attended a wide selection of groups across Perth & Kinross to raise the profile of the Primary Care Premises Survey. Community engagement workers were able to utilise technology to assist members in completing the survey and also provided paper copies and Freepost envelopes to mitigate the potential of digital exclusion. Leaflets & posters with QR codes linking to the online survey were distributed in prominent areas around Perth & Kinross. A wide selection of groups were targeted to reach hard to reach groups such as; unpaid carers, young people, adults with a disability, rural and remote residents, third sector organisations, older people, those on a recovery journey, isolated community members, care home residents and people affected by poverty.



Community Group Engagement

Figure 1

Group Names				
Street Community Nationals	Community Forman and Database			
Stronger Community Networks	Community Engagement Database			
Community Councils	Carers Voice			
Third Sector Forum	PKC Consultation Hub			
Social Prescribers	Sheltered Housing Complex'			
The Hub, Scone	Renew, Perth Methodist Church			
TullochNet	Martha's Kitchen			
Knit & Natter	Pain Association			
Butty & Blether Group	The Grub Hub			
Letham Friendship Network Stall at Tesco	Chartered House Buildings Sheltered Housing Perth Dementia Cafe			
Health & Wellbeing Cafe				
Carpenter Court Coffee Morning	'Gie it Laldy' Carers Choir Perthshire Welfare Society Social Hub			
Buttons & Bows	Linda's Ladies			
Crafty Cafe Nest	Cuppa & Cake Group			
Elder Voice	Curling Group			
Cluny & Harriet Court Sheltered Housing	Poverty Workshop			
Wisecraft PKAVS	Stanley Development Trust (Lunch Club)			
Moulin Coffee Morning	Kinloch Rannoch Thursday Club			
James Court Sheltered Housing	Dunkeld & Birnam Community Development Trust			
Amulree & Trochry Community Association	Tea & Blether Orwell Church			
Loch Leven Advice Hub				
Kinross Day Centre	Causeway Court, Kinross SPARK's Group			
Kinross & District Men's Shed	Kinross Conversations Cafe			
Stall at Sainsbury's, Kinross	Refresh Community Cafe			
Richmond House Carers Cafe	Richmond House Friendship Group			
Crieff Connexions	Conversation Cafe, Crieff Community Hospital			
Archway Cafe, Auchterarder	Blue Door Food Bank			
Auchterarder Sports Hub	'Lets Hae a Wee Git Thegither Fir a Brew & Blether'			
Building Bridges	Crieff Community Hospital & King Centre			



Creating Awareness

General Practice Buildings and Websites

Practices were provided with information which included suggested wording for their web page, a QR code and a link to the patient survey.

Practices were also provided with hard copies of posters, leaflets and survey and completed surveys to be collected by the Primary Care Team.

Perth & Kinross Council Consultation Website

The GP Premises Survey was posted on the consult.pkc.gov.uk website between 11 September 2023 and 15 October 2023.

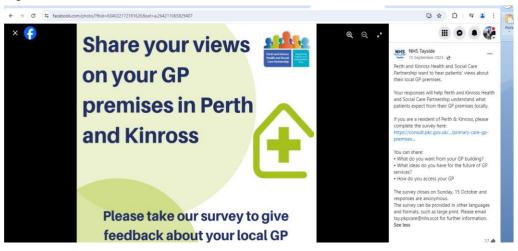
Figure 2



NHS Tayside Facebook

NHS Tayside promoted the survey by providing a link to the PKC Consult website. The post below was scheduled on the social medial platforms and also shared to individual social media pages and Community group pages.

Figure 3





Poster & Leaflet

Posters & Leaflets were widely distributed and displayed in GP Practices, Community Pharmacies', Community Hospitals, shops and community notice boards. The poster & leaflet included the QR code. Many areas were identified for holding hard copies of the survey and freepost envelopes.

Figure 4



Figure 5



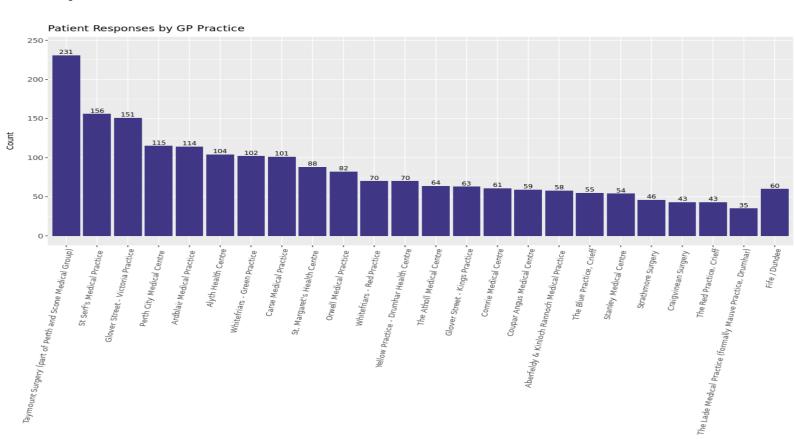
Findings

A total of 2034 GP Premises patient survey questionnaires were returned.

Nine (0.4%) of the returns did not have a GP Practice recorded. It was agreed to exclude these incomplete records from the analysis as we are unable to assign them to a GP practice.

Practice Responses

Figure 6



Boundary Information

It should be noted that not all the GP Practices recorded in the patient survey questionnaire are located within Perth and Kinross HSCP. After receiving feedback from the Integrated Joint Board, the decision was made to accept responses from all patients who live in Perth & Kinross whether or not they are registered with a Perth & Kinross GP Practice. This was particularly relevant for residents who live close to the boundary of Dundee & Fife. Sixty responses received were from out with Perth & Kinross. Perth & Kinross HSCP have no influence over premises outwith P&K however, the survey responses for areas outwith P&K will be made available to the colleagues in Dundee & Fife.

Proportions

Of the 2025 completed survey questionnaires included in the analysis almost half of the patients were registered to one of the following eight Perth and Kinross GP Practices;

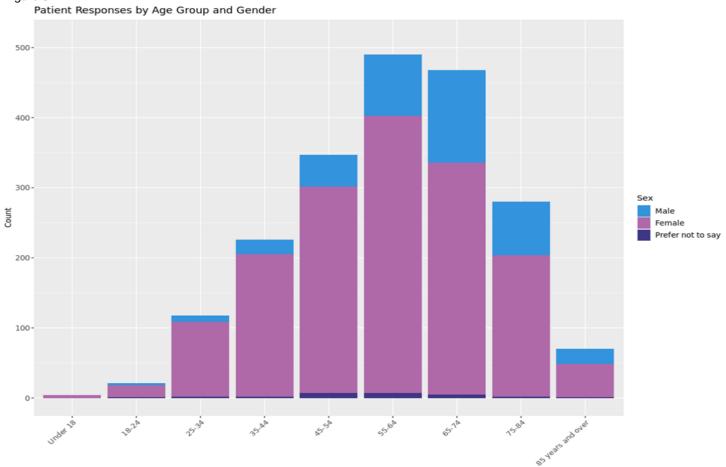
Figure 7 *GP List size PHS Publication January 2024

Perth & Kinross GP Practice	Number of Survey Responses		Return rate (per 1000 *GP List Size)
Taymount Surgery (part of Perth and Scone Medical Group)	231	16241	14.2
St Serf's Medical Practice	156	9676	16.1
Glover Street - Victoria Practice	151	10981	13.8
Perth City Medical Centre	115	9442	12.2
Ardblair Medical Practice	114	7895	14.4
Alyth Health Centre	104	4560	22.8
Whitefriars - Green Practice	102	9649	10.6
Carse Medical Practice	101	3589	28.1

Response by Age Group & Gender

Most of the patient questionnaires were completed by females for all age groups (n = 1603) 958 returns were from patients aged between 55 to 74.

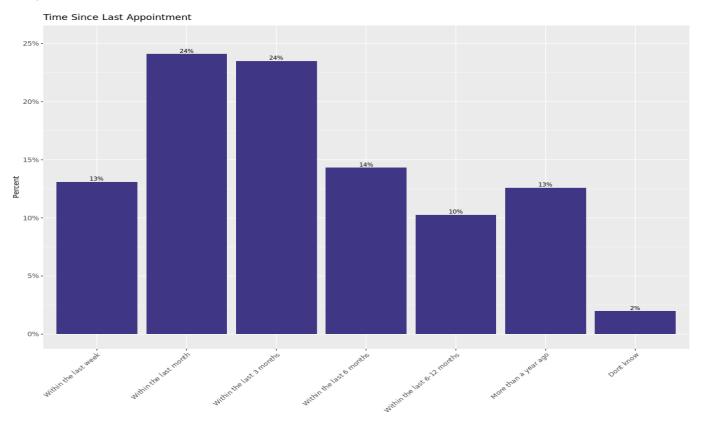
Figure 8



When was your last appointment (face to face, phone, video) with a healthcare professional based in your registered GP Practice?

60% (n = 1229) patients who had completed the survey reported that they had been seen within the last three months.

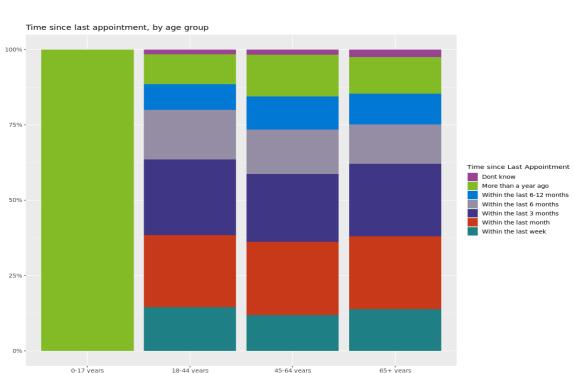
Figure 9



By Age Group

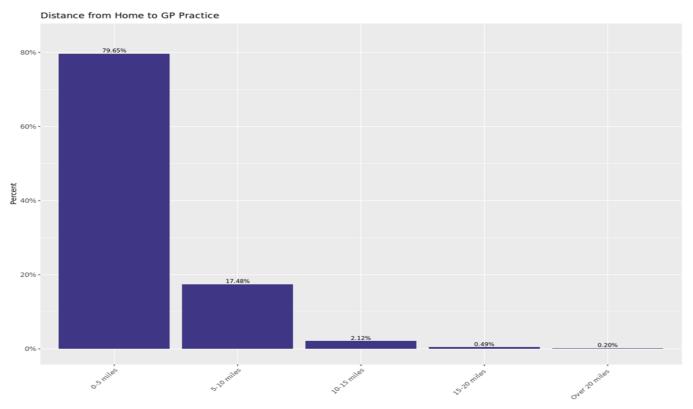
The patients who reported that they had been seen within the last three months were all over eighteen years of age (n = 476). A total of 255 of all respondents reported that they had not been seen in the last 12 months.

Figure 10



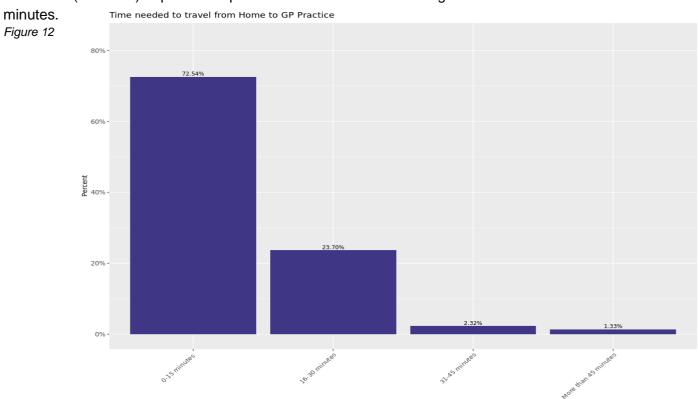
Distance from Home to GP Practice

Almost 80% (n = 1613) patients live less than 5 miles from their registered GP practice. *Figure 11*



How long does it take to get to your registered GP practice (single journey)?

Over 70% (n = 1469) of patients reported that travel time to their registered GP was no more than 15

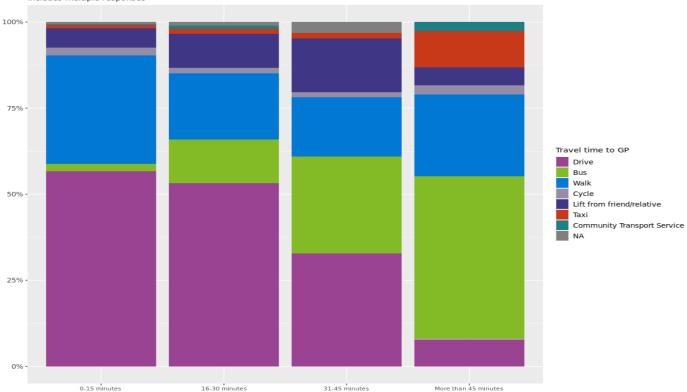


How long does it take to get to your registered GP practice by travel method?

It should be noted that the survey allowed the recording of multiple responses against method of travel.

Figure 13

Travel time to GP by method of travel Includes multiple responses

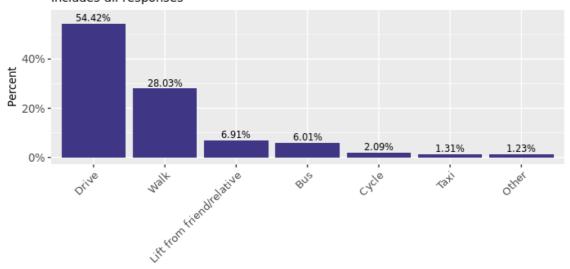


Methods of travel to the GP Practice

Of all the methods reported the most frequent method was driving followed by walking. It should be noted that the survey allowed the recording of multiple responses.

Figure 14

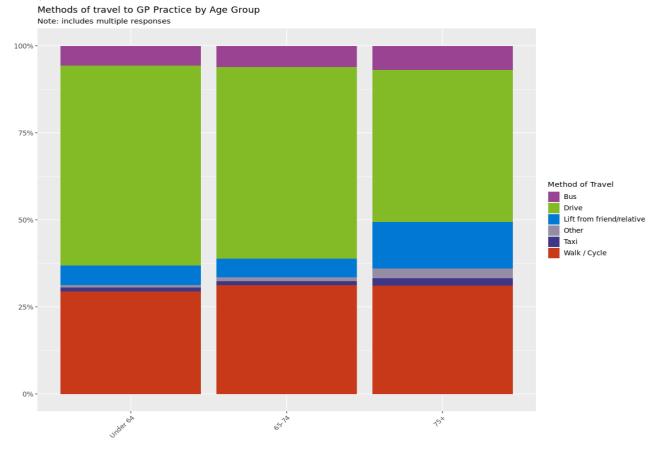
Methods of Travel to GP Practice
Includes all responses



Methods of travel to the GP Practice by Age Group

Driving has been recorded as the most frequent method of travel followed by walking/cycling. It should be noted that the survey allowed the recording of multiple responses.

Figure 15

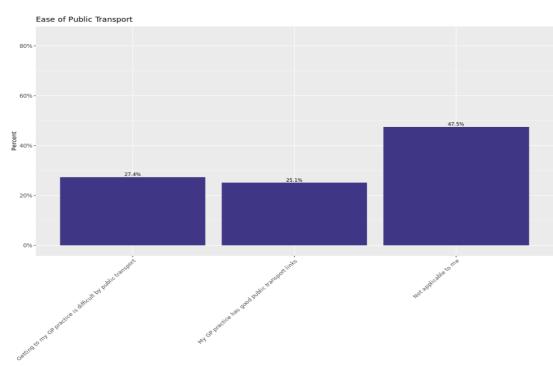


Ease of Public Transport

Just under 30% (n = 554) respondents said it was difficult to get to their registered GP practice by public transport

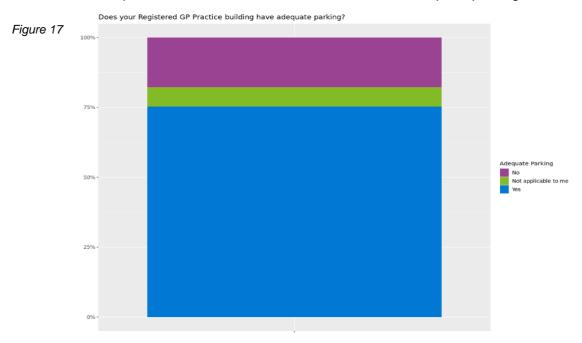
Just under 50% (n = 960) responded with "Not applicable to me".

Figure 16



Does your registered GP Practice building have adequate parking?

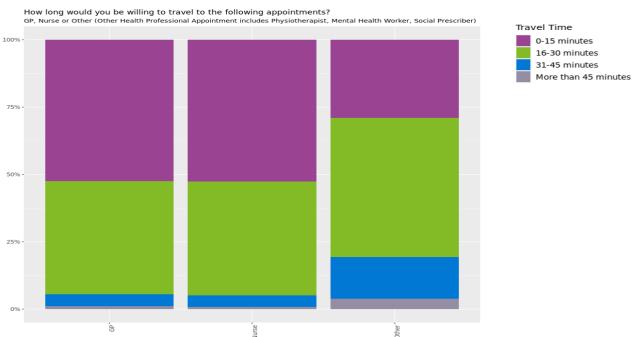
Of those who responded most said that the GP Practice has adequate parking.



How long are you willing to travel to the following appointments (single journey)? GP, Nurse or Other Healthcare Professional Appointment

Over 52% (n = 1062) would be willing to travel up to 15 minutes to see a GP. A further 41% (n= 848) would travel up to 30 minutes to see a GP. Over 52% (n = 1060) would be willing to travel up to 15 minutes to see a Nurse. A further 42% (n= 849) would travel up to 30 minutes to see a Nurse. Over 81% (n = 1624) would be willing to travel up to 30 minutes to see an Other Healthcare Professional.

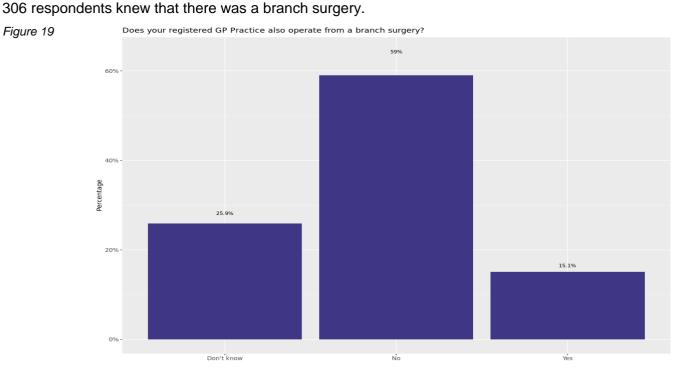




Does your registered GP Practice also operate from a branch surgery? (a smaller surgery usually located in a nearby community to the main GP Practice premises)

Over 25% (n = 524) respondents did not know if their surgery operated a branch surgery.

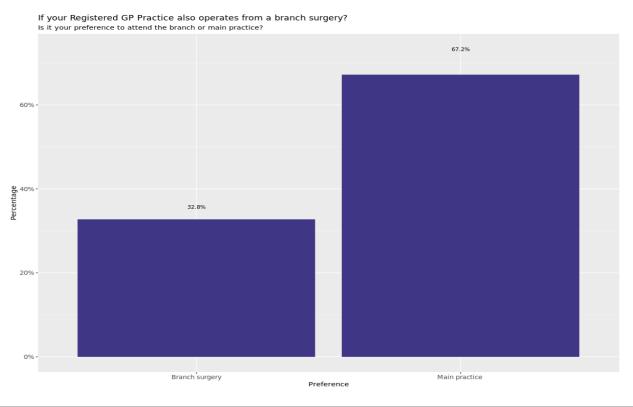
Figure 19



If yes, is it your preference to attend the branch surgery or the main practice?

Of the 306 who responded with yes there is a branch surgery 32% (n =99) would prefer to attend the branch over the main practice

Figure 20

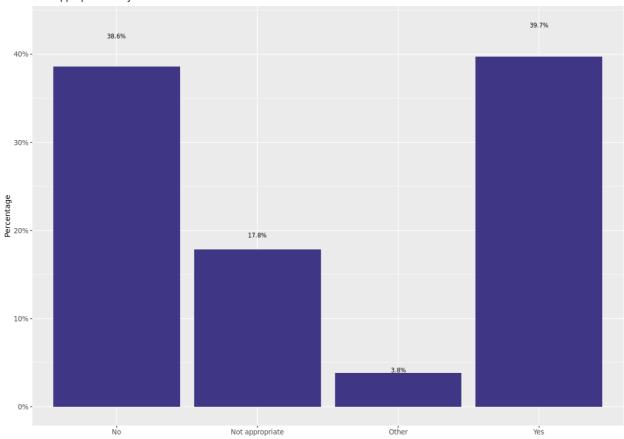


At your registered GP practice there are a range of health professionals and support available. When making an appointment, did the Receptionist discuss with you which health professional would be the most appropriate for your needs?

39% (n = 804) responded with yes the receptionist did discuss which health professional would be most appropriate.

Figure 21

When making an appointment, did the Receptionist discuss with you which health professional would be the most appropriate for your needs?

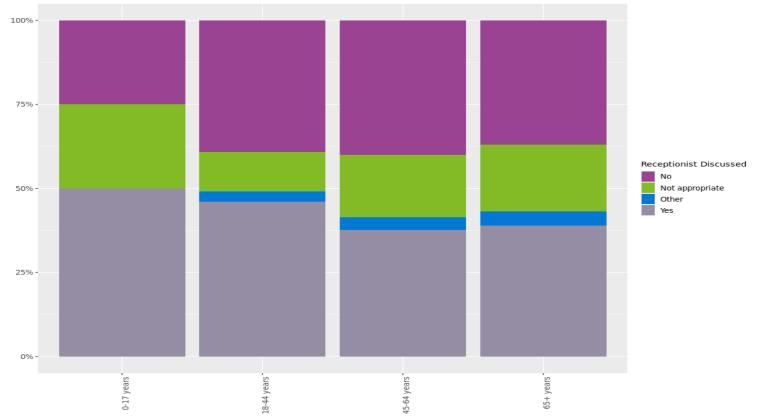


At your registered GP practice there are a range of health professionals and support available. When making an appointment, did the Receptionist discuss with you which health professional would be the most appropriate for your needs? By age group.

39% (n = 804) responded with yes the receptionist did discuss which health professional would be most appropriate.

Figure 22



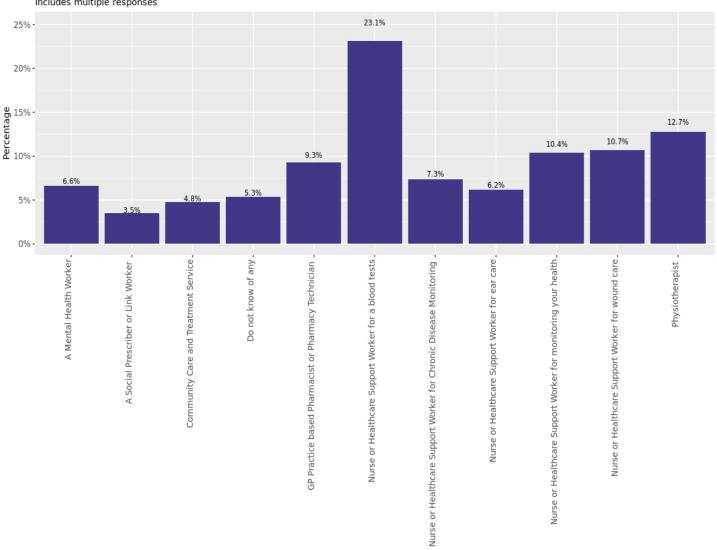


Do you know which health professionals and support are available to you? (Please tick all that you know about).

Figure 23

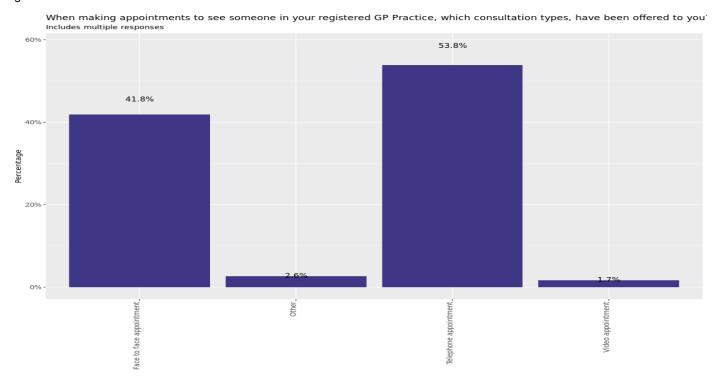
Do you know which health professionals and support are available to you?

Includes multiple responses

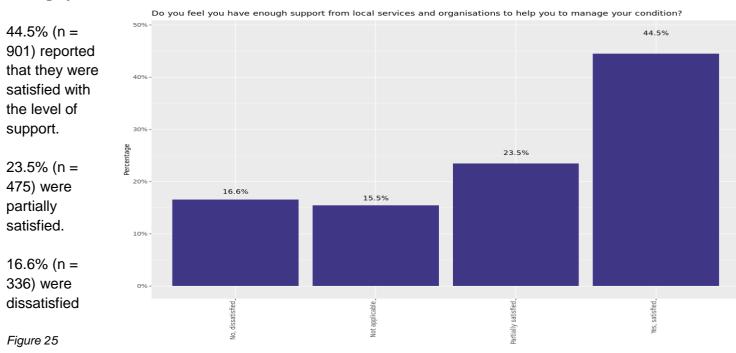


When making appointments to see someone in your registered GP Practice, which consultation types, have been offered to you? (Please tick all that apply)

The most frequently reported consultation type was Telephone appointment. Please note that multiple responses could be recorded against this question. *Figure 24*



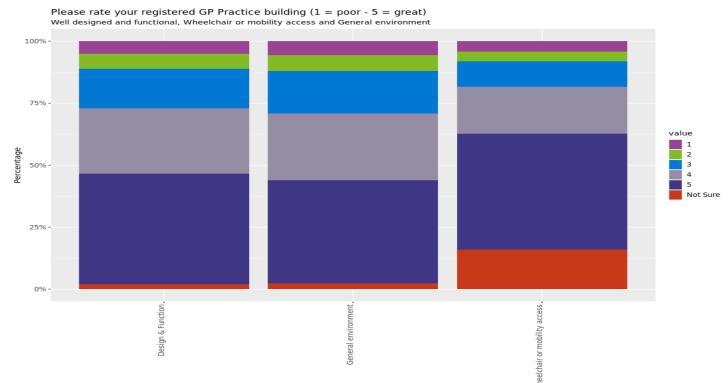
Do you feel you have enough support from local services and organisations to help you to manage your condition?



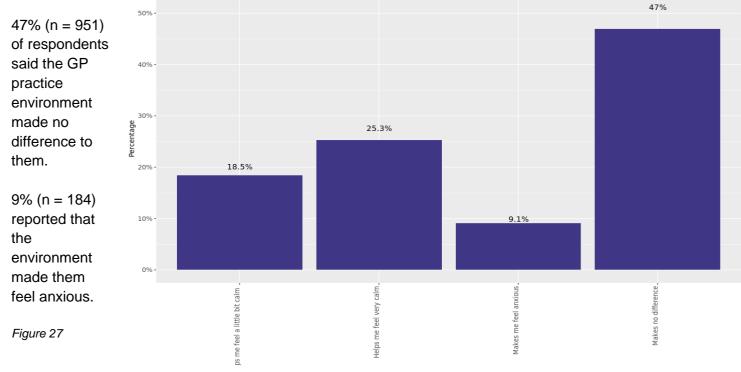
Using a rating of 1-5 please rate your registered GP practice building (1=poor - 5=great)

- Well designed and functional
- Wheelchair or mobility access
- General environment

Over 70% (n = 1436) of respondents gave the design and function a rating of 4 to 5 Over 65% (n = 1325) of respondents gave the wheelchair or mobility access a rating of 4 to 5 Over 68% (n = 1385) of respondents gave the general environment a rating of 4 to 5 $_{Figure\ 26}$





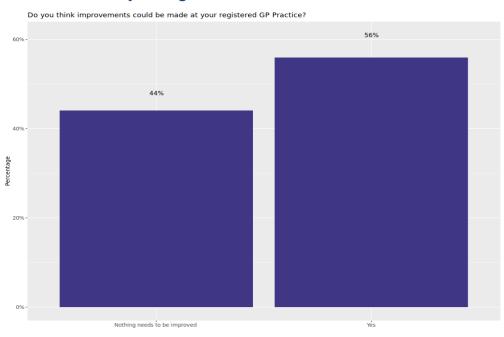


Do you think improvements could be made at your registered GP Practice?

56% (n = 1133) of respondents reported that "Yes" they thought improvements could be made to the GP practice.

44% reported that nothing needs to be improved

Figure 28

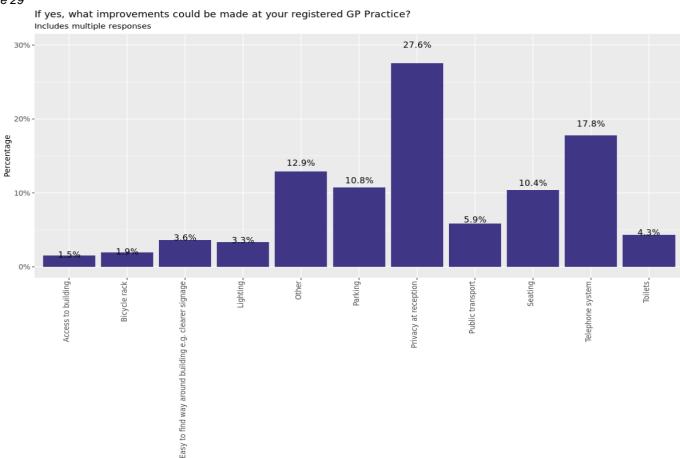


If yes, what improvements could be made at your registered GP Practice?

Where the response to "do you thinks improvement could be made" was "Yes", the most frequent area selected to improve was "Privacy at reception".

Please note that multiple responses could be recorded against this question.

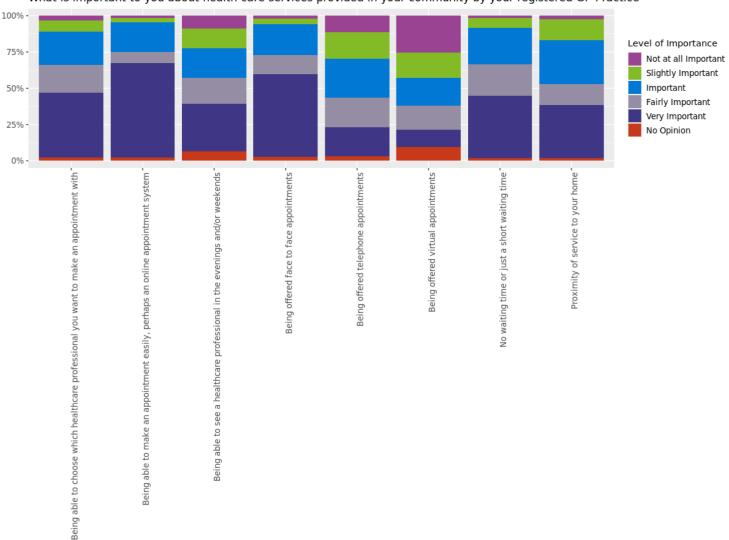
Figure 29



What is important to you about health care services provided in your community by your registered GP Practice

Figure 30

What is important to you about health care services provided in your community by your registered GP Practice



"If you would like to, please use this space to give more information about your registered GP practice environment."

Common themes emerged in this open text question include; enhanced privacy measures, more welcoming and comfortable waiting areas, better trained and more personable reception staff, improved appointment systems, and local resources availability. This summary captures the main themes and sentiments expressed by the patients about their GP practice environments.

Here is a summary of the key points within each theme:

Privacy and Confidentiality

- Patients are worried about the lack of privacy, both in consultation rooms and at the reception.
- "When at the reception desk speaking to the receptionist there is no privacy as everyone can hear all your information."

Waiting Room Environment

- •Some patients find the waiting rooms unwelcoming, cold, and clinical. The environment is often described as dull, sparse, and lacking in ambiance.
- •Some practices are noted for being clean and spacious, and a few comments mention a calm and quiet environment.
- •"The waiting room is cold and clinical. No redeeming features whatsoever."
- "Clean, quiet environment."

Staff Interactions

- •There is a mixed response describing interactions with reception. Reception staff are sometimes described as unwelcoming. There are instances where staff are praised for being friendly, helpful, and supportive.
- •"I have on many occasions found the reception staff to be extremely rude, unpleasant, and unprofessional."
- "Receptionists welcoming and cheerful and always notice my leaving and give a friendly farewell."

Appointment Accessibility

- Many patients expressed dissatisfaction with the current telephone system, indicating issues with accessibility and the stress of trying to book appointments, especially during peak times
- •"I find it difficult to make an appointment, often having to call multiple times before getting through."

Facility Conditions

- •Issues with the physical state of the facilities, such as leaking ceilings, inadequate soundproofing, and poor design, are highlighted. Some facilities are appreciated for being modern, purpose-built, and well-maintained.
- •"It could be more welcoming; there is a huge waiting area with no ambiance at all. Plants are dead, chairs are a mismatch; feels like waiting in a gym hall"
- •"It is a modern purpose-built building that is well designed and has plenty of light."

Location and Accessibility

- Parking difficulties, inconvenient locations, and lack of public transport options are common concerns. The transition to temporary buildings has also been problematic for some.
- •"Location of practice in the centre of Perth makes parking nearby difficult."

"If you could design a GP practice for the future, what sort of things do you think should be part of it. (e.g. services or facilities)? "

The healthcare landscape is rapidly evolving, driven by advances in technology, changing patient expectations, and the need for more efficient and effective care delivery models. As we look towards the future, the design of GP practices must adapt to these changes to better meet the needs of patients and healthcare providers alike. This analysis explores key themes and considerations for designing a future-oriented GP practice, drawn from insights on accessibility, integrated services, patient-centred facilities, technological advancements, staff quality, privacy, preventive care, operational efficiency, community inclusivity, and continuous improvement.

Accessibility and Convenience

- Easier access to appointments (online booking, phone options)
- Extended opening hours (evenings and weekends)
- More parking and better public transport links
- Walk-in clinics
- Self-check-in systems

Integration of Services

- Combined services health centre (GP, dental, mental health, physio, pharmacy, etc.)
- On-site ancillary services (phlebotomy, immunisations, screening, wound care)
- Multidisciplinary approach including social care and community service providers

Patient-Centred Facilities

- Comfortable and private waiting areas (soft music, privacy screens, better seating)
- Children's play area and activity zones
- Well-equipped and clean facilities (modern buildings, good signage, temperature control)
- Drinking water, vending machines, and toilets

Technological Integration

- •Online appointment booking and repeat prescription services
- Video appointments
- Automated systems (electronic check-in, appointment reminders)
- Digital communication tools (email, apps for booking and consultation)

Staff and Service Quality

- •Adequate staffing levels (more GPs, nurses, mental health workers)
- Ongoing staff training and development
- Friendly and empathetic reception staff
- •Improved customer service and communication skills for staff

Privacy and Comfort

- Private reception areas to discuss sensitive matters
- •Soundproof rooms and acoustic control in waiting areas
- •Comfortable and attractive waiting room decor

Preventive and Holistic Care

- Preventative health checks and well-being clinics
- •Mental health support and substance use information
- Holistic and alternative medicine options (herbal, lifestyle changes)
- Group exercise classes and community health events

Efficiency and Streamlining

- •Improved triage systems for appointments
- •Better use of IT resources and apps
- •Streamlined processes to reduce unnecessary GP visits
- •Integration with other healthcare professionals for direct referrals

Community and Inclusivity

- Health hubs with easy access and clear flow between services
- •Inclusive services for all ages and demographics
- •Outreach programs and health education events
- •In-house space for visiting specialists and community programs

Feedback and Continuous Improvement

- Regular surveys and feedback mechanisms for patients
- •Transparency in services and navigation of the healthcare system
- Continuous assessment and improvement of facilities and services

If you have any other comments you would like to make about your registered GP practice building, please provide them here.

The following sections will explore each theme in detail, arising from the above question, presenting the key findings and specific suggestions from patients.

Theme 1: Accessibility and Availability of Appointments

- Face-to-Face Appointments: A significant number of respondents expressed the need for more face-to-face appointments, reminiscent of pre-COVID times. They highlighted the importance of personal interaction for accurate diagnosis and effective treatment.
- Appointment System: Many comments indicated dissatisfaction with the current appointment booking system, particularly the requirement to call at 8 am and the long wait times for appointments.
- Access to Services: Patients expressed the need for more streamlined and efficient access to various services, such as blood tests and prescription collection.



Building

Condition

Comfort &

Ambiance

Parking &

Accessibility

Theme 2: Physical Environment and Facilities

- **Building Condition**: Feedback on the condition of GP practice buildings varied. Some respondents were satisfied with the modern and clean facilities, while others noted issues such as the need for updates, better lighting, and improved maintenance.
- Parking and Accessibility: Many respondents pointed out the lack of adequate parking spaces, especially for disabled individuals, and the challenges posed by the location of some GP practices, making them hard to reach for patients without personal transport.
- Comfort and Ambiance: Suggestions were made for improving the waiting areas with better seating, the addition of plants and music, and more overall comfort to create a welcoming environment.

Theme 3: Staffing and Interpersonal Relations

- Receptionists Customer Care: Several comments highlighted issues with the customer
 care of receptionists, suggesting a need for more empathy and professionalism. There
 were specific mentions of feeling dismissed or not listened to by non-health professional
 staff.
- **GP and Nurse Availability**: Respondents expressed a desire for more doctors and a stronger presence of mental health professionals within the practice. There was also a call for better communication from nursing staff regarding procedures like fasting before tests.



Theme 4: Location and Infrastructure

- Rural Challenges: For practices in rural areas, there were concerns about the influx of new residents and seasonal workers, which strains the existing resources. Respondents also mentioned the difficulties faced due to the distance of GP practices from their homes and the lack of local facilities.
- Temporary and Inadequate Buildings: Some practices were reported to be operating out of temporary structures or buildings that were not designed to accommodate the current patient load.



Theme 5: Communication and Technology

- Online Booking and Information: There were requests for the implementation of online appointment booking systems and better online information about available services and practitioners.
- Telephone Consultations: While some appreciated the convenience of telephone consultations, many felt that they were inadequate for certain conditions and lacked the personal touch of face-to-face interactions.



Theme 6: Miscellaneous Comments

- General Satisfaction: Despite the various issues raised, there were numerous comments expressing overall satisfaction with their GP practices, noting the helpfulness and professionalism of the staff.
- **Miscellaneous Improvements**: Suggestions included better maintenance of the exterior of buildings, more robust communication systems, and consideration of environmental aesthetics.



This analysis highlights the diverse needs and concerns of patients regarding their GP practices, encompassing aspects of accessibility, physical environment, staffing, location, and communication.

Conclusion

In conclusion, the public survey on General Practice Premises in Perth and Kinross has provided invaluable insights into the state of primary care facilities and their alignment with patient needs. The findings underscore the pressing need for strategic investment in premises to ensure they meet the evolving demands of modern healthcare delivery.

Accessibility, functionality, and comfort emerge as central themes, emphasising the importance of creating premises that are easily accessible, well-equipped, and conducive to positive patient experiences. Integration of services within these premises is paramount, facilitating seamless collaboration among healthcare providers and offering comprehensive care locally.

Technological integration is identified as a key driver for enhancing efficiency and patient convenience, with online booking systems, tele-health services, and automated processes being integral components of future-proof premises.

The consultation highlights the significance of continuous improvement and community engagement in shaping the design and functionality of primary care premises. By soliciting and incorporating feedback from stakeholders, including patients, staff, and community members, we can ensure that premises are responsive to the diverse needs and preferences of the population they serve.

The public survey has illuminated the critical intersection of patient needs, premises functionality, and broader healthcare challenges most notably around GP Practice sustainability amidst the backdrop of Scottish Government funding constraints, escalating workload pressures, and persistent challenges in recruitment and retention of GP practice staff. Navigating these challenges requires a multifaceted approach that addresses both immediate needs and long-term sustainability. While the consultation has provided valuable insights into enhancing premises accessibility, functionality, and technological integration, it also demonstrates the fragility of primary care and highlights the need for primary care priorities to be addressed at a strategic level.

The sustainability of primary care premises hinges not only on their physical infrastructure but also on the resilience of the healthcare workforce and the ability to attract and retain skilled professionals. Efforts to improve premises must be complemented by initiatives aimed at improving

workforce morale, supporting professional development, and fostering a conducive working environment that promotes staff and GP retention.

Next Steps

1. Reflection and Feedback from Practices and Clusters

Encourage GP Practices and clusters to reflect on the findings from the consultation. Use the results to help target available premises funding priorities, with a focus on practices that wish to make changes using improvement initiatives.

2. Actionable Implementation Plan

Utilise the insights gathered from the consultation to develop a comprehensive and actionable implementation plan for improving primary care premises across Perth and Kinross, subject to current financial constraints.

3. Engagement with Stakeholders

Maintain ongoing engagement with stakeholders, including patients, healthcare professionals, community organisations, and policymakers, to ensure their continued involvement in the premises improvement process. Foster open communication channels to gather feedback, address concerns, and collaborate on solutions that prioritise the needs of the community.

Continue to highlight the critical role that well-equipped and accessible premises play in delivering high-quality healthcare services and improving patient outcomes, emphasising the need for sustained investment in this area and linkage to the wider risk around GP Practice sustainability.

4. Workforce Support Initiatives

Implement targeted workforce support initiatives aimed at addressing recruitment and retention challenges within GP practices. Explore strategies such as enhanced training opportunities to attract and retain skilled healthcare professionals, ensuring the sustainability of primary care services in the region.

5. Technological Integration

Continue to prioritise technological integration within primary care, leveraging digital solutions to enhance service delivery, streamline administrative processes, and improve patient access to care. Invest in tele-health platforms, online appointment booking systems, and electronic health systems to facilitate consultations and empower patients to take an active role in managing their health.

6. Monitoring and Evaluation

Establish robust monitoring and evaluation mechanisms to track progress against key performance indicators and assess the impact of premises improvement initiatives on patient outcomes and satisfaction levels. Regularly review and refine strategies based on feedback and data insights to ensure continuous improvement and alignment with evolving healthcare needs.

By taking these next steps, stakeholders can build upon the findings of the consultation and drive tangible improvements in primary care premises that enhance the delivery of healthcare services, promote patient-centred care, and contribute to the overall health and well-being of the community in Perth and Kinross.