healthwatch North Tyneside

Livi

Service user experiences and views shared with Healthwatch

Contents

About Healthwatch North Tyneside

We are the independent champion for people who use health and social care services in North Tyneside. We're here to find out what matters to residents and help make sure their views shape the support they need.

We listen to what people like about services, and what could be improved. We share these views with those who have the power to make change happen. We influence how services are designed and delivered. We also help people find the information they need about services in the area.

Healthwatch North Tyneside is an independent local charity. We are also part of a national network which is supported by Healthwatch England. Nationally and locally we have the power to make sure that those in charge of services hear people's voices. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them.

About this report

The Livi service is the focus of this report. We are publishing a report to feed into the North Tyne Clinical Commission Group's (CCG) evaluation of the Livi services that is being piloted. The content of this report has been shared with the CCG and the Livi evaluation steering group prior to publication.

We are presenting the views we have heard in this report, we are not making recommendations.

Part 1 details the research and findings of our engagement with users of Livi. There are a small number of suggested actions for future service delivery in this section of the report.

Part 2 includes the feedback and comments we received about Livi in our wider evidence gathering about GP access.

We will be publishing further reports into other areas of our GP access research once our analysis has been completed.

Background

Access to primary care and GP services has the been the most commonly raised issue with Healthwatch North Tyneside since 2015. As an organisation we have conducted several evidence gathering and research projects to better understand local people's experiences and help providers to improve their services.

The covid-19 pandemic led to significant shifts in the ways GP practices operated, particularly the shift towards greater use of virtual appointments. The pandemic also created greater pressures and demand for these services, particularly as lockdowns eased. Covid case numbers remained high while self-isolation caused shortages among practice staff.

The aim of this research was to understand people's experiences of accessing GP services and their expectations of services in the future. We gathered people's views and experiences between April and July 2021. During this time, lockdown restrictions were easing.

Alongside this work, North Tyneside CCG asked Healthwatch North Tyneside to develop and deliver a survey to hear the views and experiences of people who have used the Livi online GP service to see a GP. Livi is a digital app that lets patients book and see a GP by video, using a tablet or mobile phone. Appointments are available Monday to Friday 7am-10pm, Saturday and Sunday 8-4pm. North Tyneside CCG commissioned Livi for a 12-month pilot to deliver additional appointments for people registered with GP practices in North Tyneside. The Livi service is the focus of this report.

We have heard from 1,224 people and have gathered a large amount of information. We want to find the most helpful ways to share our findings and develop actions that will improve services. We have begun sharing these highlights with the CCG, TyneHealth and North Tyneside's Primary Care Networks. We intend to make the feedback we have received about individual practices available to those practices in due course.

Part 1

Livi Users' Experiences

Background to Livi users' experiences

In spring 2021 North Tyneside CCG asked Healthwatch North Tyneside to develop and deliver a survey to hear the views and experiences of people who have used the Livi online GP service to see a GP.

The CCG are now evaluating the pilot and have asked Healthwatch North Tyneside to gather residents' views and feedback. This report will form part of the CCG's evaluation of the Livi pilot.

The survey findings will also feed into a broader piece of work currently being undertaken by Healthwatch North Tyneside to better understand residents' views of accessing GP and primary care services during covid, and their views about how they would like services to be delivered in the future.

This report provides a summary of our approach, key finding and some suggested options for future service development emerging from the research with these respondents. A more detailed summary of responses to the survey questions and interviews is included in Annex 1. We have also presented some basic scenario analysis in Annex 2.

Our approach

Healthwatch North Tyneside worked closely with North Tyneside CCG to develop the survey. Our aim was to better understand North Tyneside residents' views about their experiences of, and motivations for using Livi, and the impact the service has had on resident's wellbeing.

We agreed that the survey would be online using SurveyMonkey, as Livi users are already comfortable using digital services. On 29 March 2021 Livi sent an email on behalf of Healthwatch North Tyneside and North Tyneside CCG to all North Tyneside residents who had a consultation with a Livi doctor from the start of the pilot in July 2020 to the date of the email. This equated to 1,999 residents who had opted to receive communications from Livi. The email informed people about the evaluation and invited them to complete the survey via an embedded link. The survey remained open throughout the month of April and a follow up email was sent on 20 April as a reminder.

To encourage survey completions, people were invited to share their contact details to be entered into a prize draw for £50 of shopping vouchers. For those who completed the survey, we explained that we also wanted to telephone a small number of people to get a deeper understanding of their views and experiences of using Livi, and if contacted by us, they would be offered a £10 gift voucher as a thank you for their additional time. People were asked to indicate that we could contact them and were assured their details would only be used in accordance with their wishes and would not be passed to any other organisation.

There were 210 respondents to the survey. This represents 10.5% of the total number of people who were invited to take the survey and is an acceptable response rate for this type of survey, particularly given the short turn around period. However, 210 is still a relatively small sample size, and as such we cannot say that the findings are a true reflection of the experiences of all

Livi users across North Tyneside. What we can say is that they are the views, experiences and motivations of the 210 people who completed the survey.

Of the 75% of respondents who chose to answer the demographic questions at the end of the survey, 65.5% identified as female and 34.5% as male, meaning male views are under-represented in the results. The age spread is better:

Age	% of respondents
18—24	2.53%
25—34	17.72%
35—44	24.05%
45—54	18.99%
55—64	25.95%
65—74	8.86%
75+	1.9%

Just under 18% of respondents describe themselves as having a disability and just over 12% stated that they are a carer. The ethnic spread of respondents is in line with spread for the North Tyneside population, just over 94% of respondents described themselves as White British, whilst in the 2011 census the figure for North Tyneside was just over 95%. Other groups represented in the survey include people who identified as Asian, Indian, Arab, Black British, Celtic, Iranian, and Canadian.

The survey contained both open and closed questions and the results are detailed below after the summary of key findings. The closed question responses are presented in graph form with some explanatory text. Responses to the open questions have been themed upon points or issues that were raised by more than one respondent. We have also identified the number of times each point/issue was mentioned — you will notice that these numbers do not add up to 210. This is because some people identified several issues in a single response, while others chose not to answer all the questions. Finally, we have included some direct quotes which we hope will add meaning and depth to our findings.

Of the 210 respondents, 101 indicated that we could contact them to further discuss their responses if needed. The quality of the survey responses was generally very high and people provided quite a lot of detail in response to the questions. We selected a small number of people for a follow up telephone call by looking through their responses and identifying those of particular interest, those which looked as though the person may have more to say and those whose responses were unusual or contradictory. This provided 12 people to attempt to contact of which we were able to speak to 6. Interviews were carried out by Healthwatch North Tyneside volunteers specifically trained for the task.

Key findings

The following emerged as the main findings from our engagement with 210 users of Livi:

Overall

- The Livi users who told us about their experiences were generally very happy with the service and their experience of using it. Over 70% of respondents rated their experience of using Livi as excellent in every category and over 88% of respondents were completely happy with the outcome of their consultation. Only 6.5% of respondents stated that the experience of contacting Livi was worse than their usual experience at their GP practice.

- People's views and experiences of Livi have been influenced by the Covid 19 pandemic. The way GP services were delivered changed significantly during the pandemic with greater use of remote (phone and video) appointments. The Livi service was launched during the pandemic and many people saw its introduction as a response to the pandemic, although in reality, it had been planned for months in advance.

Customer experience, waiting times and choice

- The feedback indicates that people appreciated the Livi service for its convenience and their ability to choose when appointments take place.

- A significant driver for people to use Livi is the availability of appointments at their practice. People recognised that practices were under a lot of pressure due to covid but were frustrated by waiting times – particularly for non-urgent appointments. We have heard significant concerns about timeliness in our wider GP access work.

- When we asked people about why they chose Livi, the highest scoring motivation was wanting to be seen quickly, but having an appointment at a convenient time scored almost as highly and generally the themes of speed and convenience predominated in these results.

- Not having to speak to a receptionist – the free text responses to various questions showed that for a small number of people, not having to explain their issue to a receptionist prior to an appointment with a GP was attractive to them.

- Once booked, appointments on time was also rated very highly, with only a small number of people having delays. Where there were delays, there was little support for people to request updates.

- Experience during the appointment was very positively rated by users and they have highlighted 'having enough time to raise their concerns' and 'feeling listened to' higher than our equivalent work in North Tyneside's GP practices prior to covid.

- People were also very positive about follow up e-mail correspondence from Livi about progressing treatment. Some people also positively commented on having several follow up conversations with the same Livi GP.

How people are using Livi

- Almost 70% of respondents contacted Livi during the day on a weekday and most appointments took place during normal working hours. 33% of the responses we had said their appointments were outside traditional operating hours, during evenings and weekends.

- When we looked at how people are using Livi, 77% of respondents told us their issue was 'non-urgent'. It is clear that Livi is not primarily being used as an alternative to emergency/urgent care services as only 16% of respondents deemed their problem to be urgent or an emergency.

- For most respondents Livi was their first-choice option, over 75% of respondents stated that they did not try to use any other healthcare services before they booked their Livi appointment and when asked if they would have preferred to use an alternative healthcare service, the most common response was 'no'.

- In the free text there is some indication that people were more prepared to use Livi when they 'didn't want to bother their busy GP'. For some users, Livi enabled them to seek medical advice about an issue that was worrying them, but they did not think it was important enough to try to see their own GP.

- For a small number of people, they have told us that they benefited from a 'fresh pair of eyes' on a recurring issue– this indicates they believed getting another doctors opinion has progressed their care or treatment.

- Going to the right place first time is something we hear about in our wider work. In this survey, people mainly self-selected to use the Livi service, some people highlighted that they were not sure if Livi was the best place to get the care they needed for their issues. There was some frustration from some people who had to have a follow up face to face appointment saying 'Livi was another hoop to jump through'.

- People highlighted that video calls were only suitable for certain issues. This reflects the feedback we hear in our general Healthwatch work.

- Livi is seen as a good service by most of those who responded to this survey. When asked if users would have preferred to use a different service, 47% of people responded 'no'. 50% expressed a preference for having a phone, video or face to face appointment with their own practice, indicating the relationship with an individual's practice is strong.

Handover between services

- Some respondents said their GP practice had suggested Livi when the users had contacted the practice or as part of a triage conversation. Being signposted to Livi by their practice

gave them additional confidence that Livi was appropriate and safe to use and that they 'wouldn't be wasting their time' and 'meant I didn't need to wait to talk to someone at my practice'. Following this evidence gathering, we heard from other users of Livi who also gave positive accounts of the Livi service being offered as part of a triage process at a practice.

- When the Livi GP needed to handover to a different service, there was broadly very positive feedback but a small number of individuals described difficulty in getting a follow up face to face appointment at their practice if the Livi GP identified it as needed. There were instances highlighted where the individual practice would not follow a recommended course of action and two instances where referrals to other services were missed. **Suggested action – there is a need to review the handover/referral routes into individual practices and other services.**

How Livi could be improved

- When we asked people how their experience could be improved, the most popular response was 'nothing'. However, when people did suggest improvements, most related to a shorter wait time for their Livi appointment. In particular, people stated that the 'predicted waiting time' function on the Livi App needed to be more accurate and a better predictor of actual wait time.

- Some technical issues were experienced with reception/connectivity, sound quality etc during the consultation. People commented how helpful the Livi GP was in trying to address these.

- People told us there is a gap in help and support for the app if things are not working.

Future service opportunities

- Respondents to this survey were generally very positive about the Livi service. The comments suggest a strong relationship to an individual's GP practice remains important to the majority of Livi users.

- The Livi service appears to be taking some pressure off GP practices, either by people self-selecting to use Livi, or by practices themselves encouraging people to use Livi. We heard from a small number of people who were offered Livi once they had been through a triage process at their practice. This seemed to work well for the users we spoke to and some people gained confidence that they would get the support they needed. There is potential for practices to embed signposting to a future Livi type service into their triage process.

- Potentially, the additional capacity a Livi type service could offer, could to be used to support people with non-urgent issues that could be dealt with via a video call. Our wider research shows many local people are frustrated at the length of time they have to wait for a non-urgent appointment at their practice.

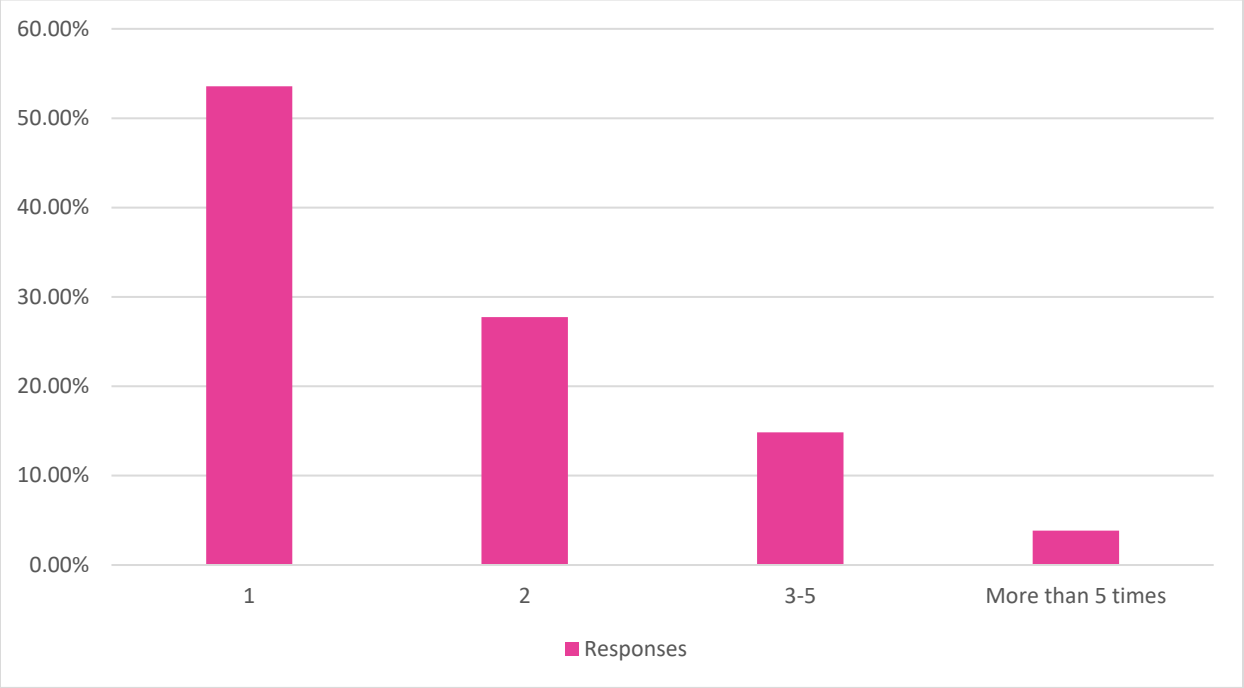
- There is also potential for the additional capacity a Livi type service could help support users at A&E and the Urgent Treatment Centres.

Acknowledgements

Healthwatch North Tyneside would like to thank all those who took the time to complete our survey and those who put themselves forward for a telephone interview. We would also like to thank the Healthwatch Volunteers who helped to deliver this research project. We would also like to thank Livi for the support in sharing this survey with their users.

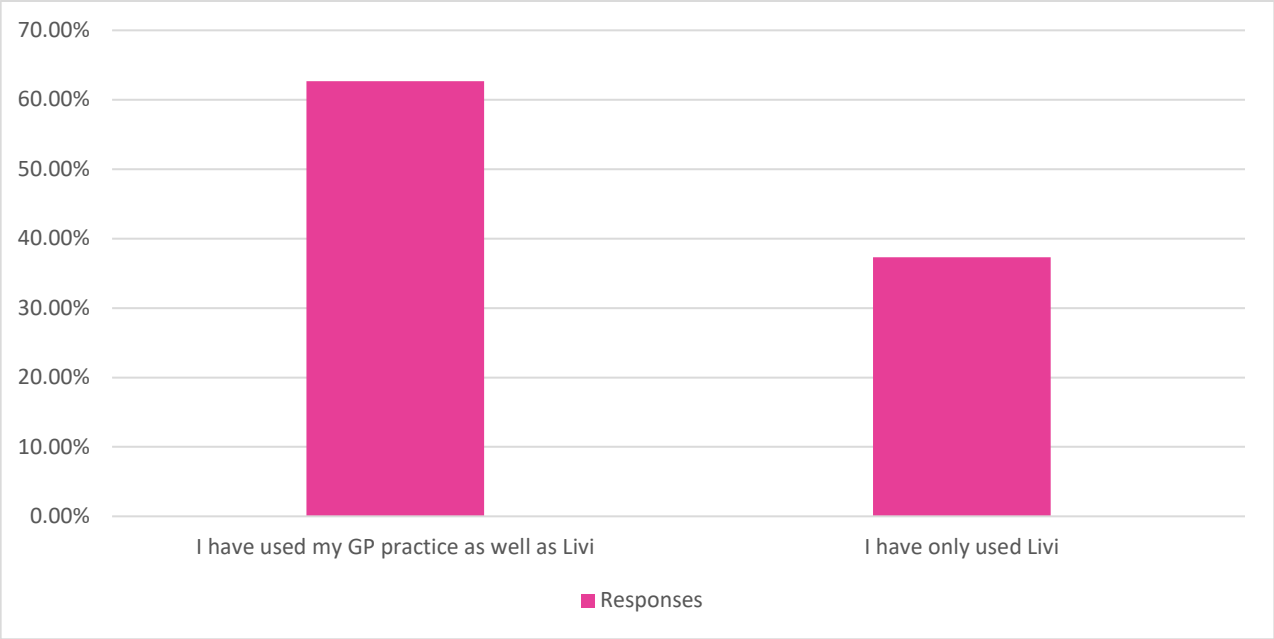
Annex 1 - Responses to the survey questions

1. How many appointments have you had using Livi?



These results show that over 50% of respondents used Livi only once, 28% used Livi twice and under 4% used Livi five times or more, during the first nine months of the pilot.

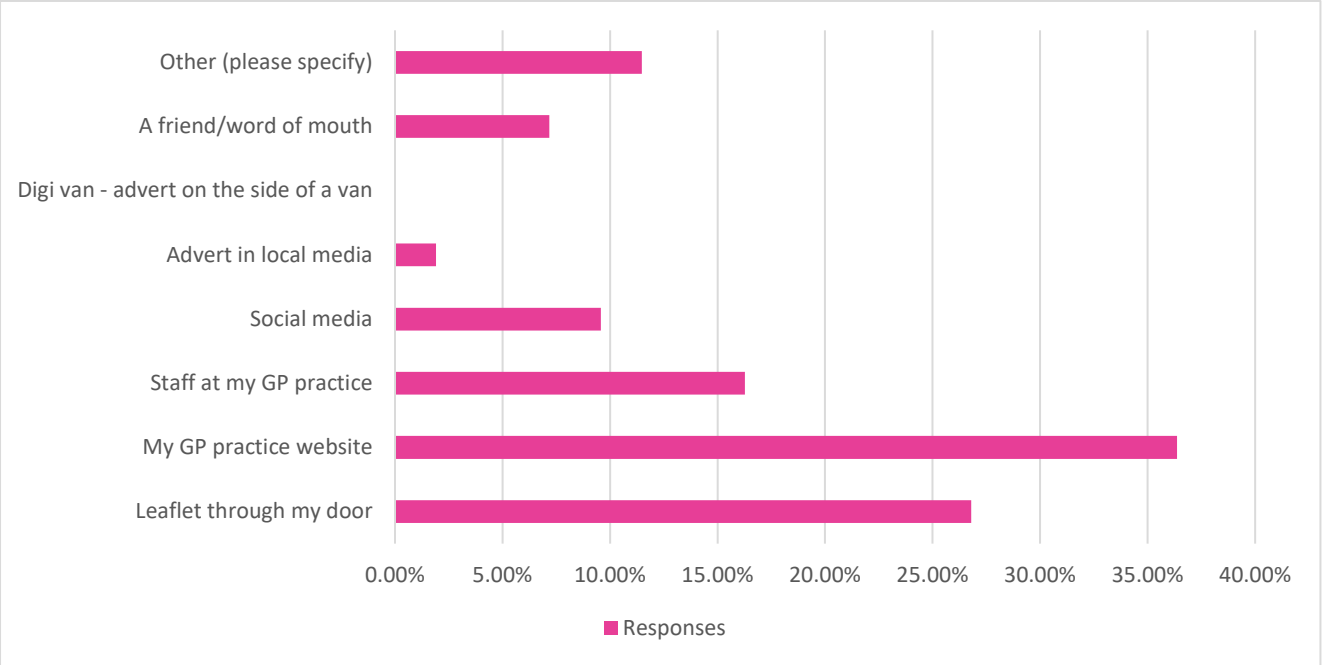
2. Thinking about your use of primary care since July 2020, which of the following best describes you?



This graph shows that over 60% or respondents have also used their GP practice since July 2020, whilst just under 40% of respondents have only used Livi. This is quite a high proportion of respondents choosing to only access what is a brand-new service and may be in response to

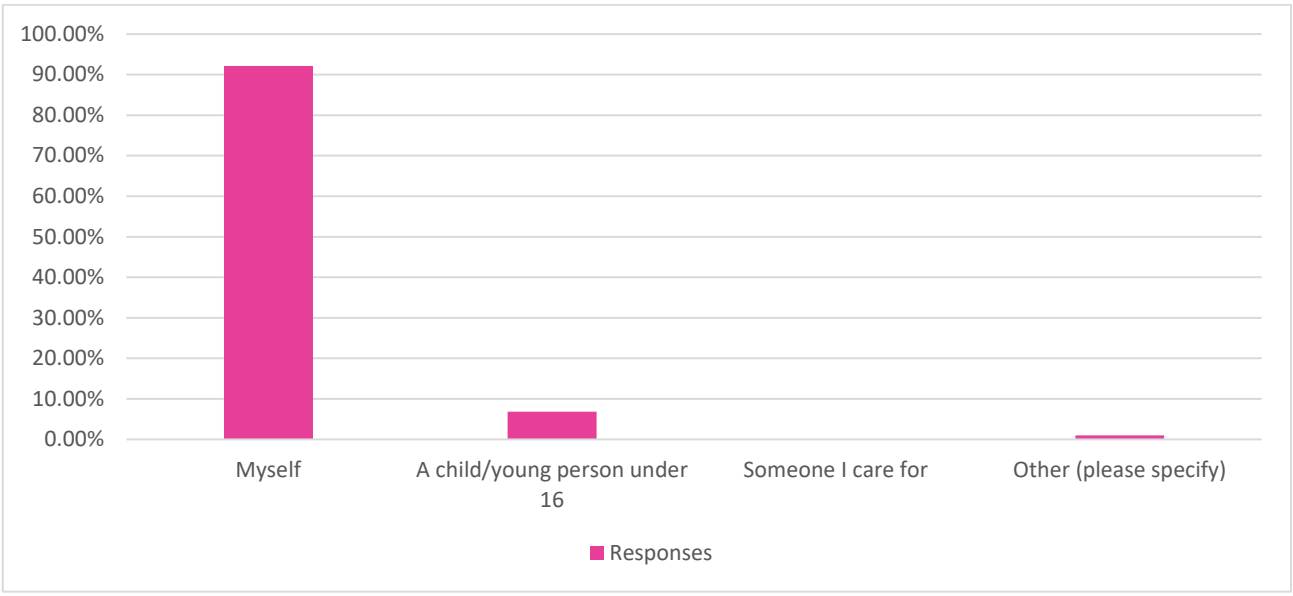
safety concerns about visiting their surgery, but may also show a need/desire for this type of service.

3. How did you hear about Livi?



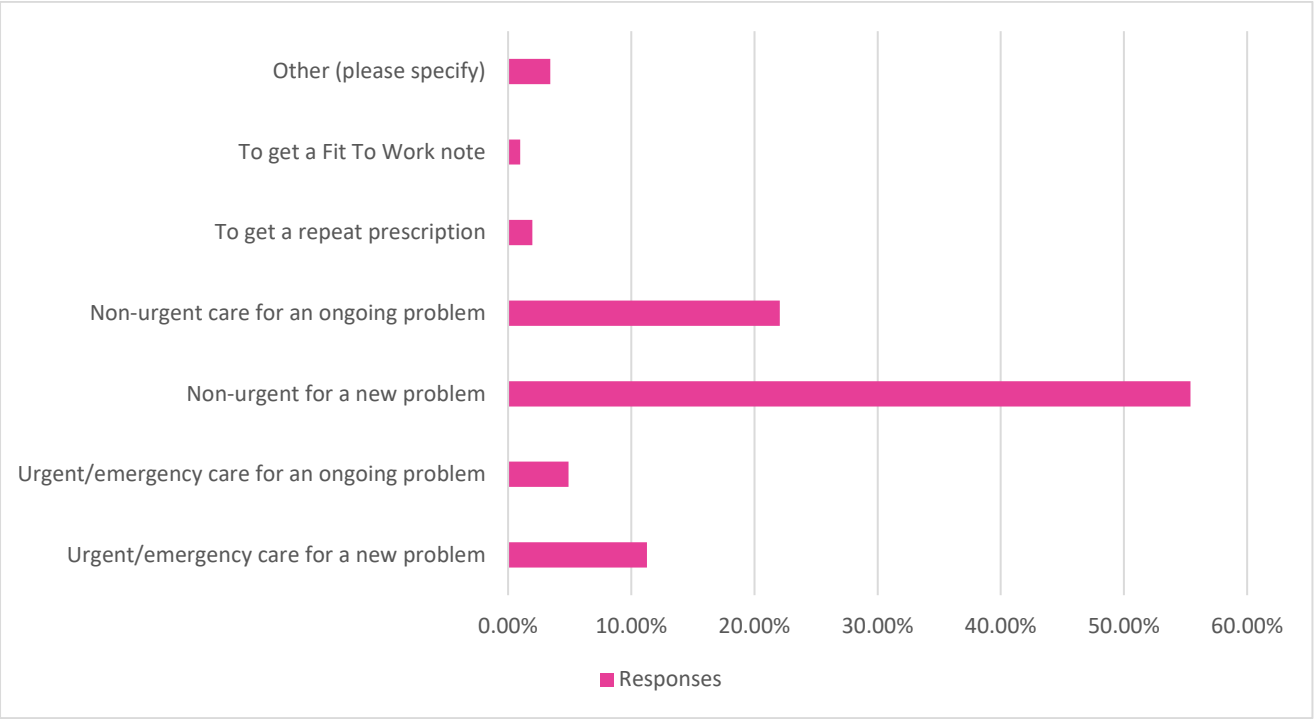
These results show that people heard about Livi from several different sources, the most common being their GP website, followed by the CCG's leaflet that was circulated to all North Tyneside residents. Over 10% of respondents chose the 'other' option and were asked to specify how. The most common responses to this question were, via a text from their GP or via a letter from their GP. Others stated that they had seen a poster in their GP surgery, that they worked in a GP surgery or had heard about Livi from the CCG.

4. Who needed help?



It is clear from this graph that the vast majority were seeking help for themselves, with 7% seeking help for a child.

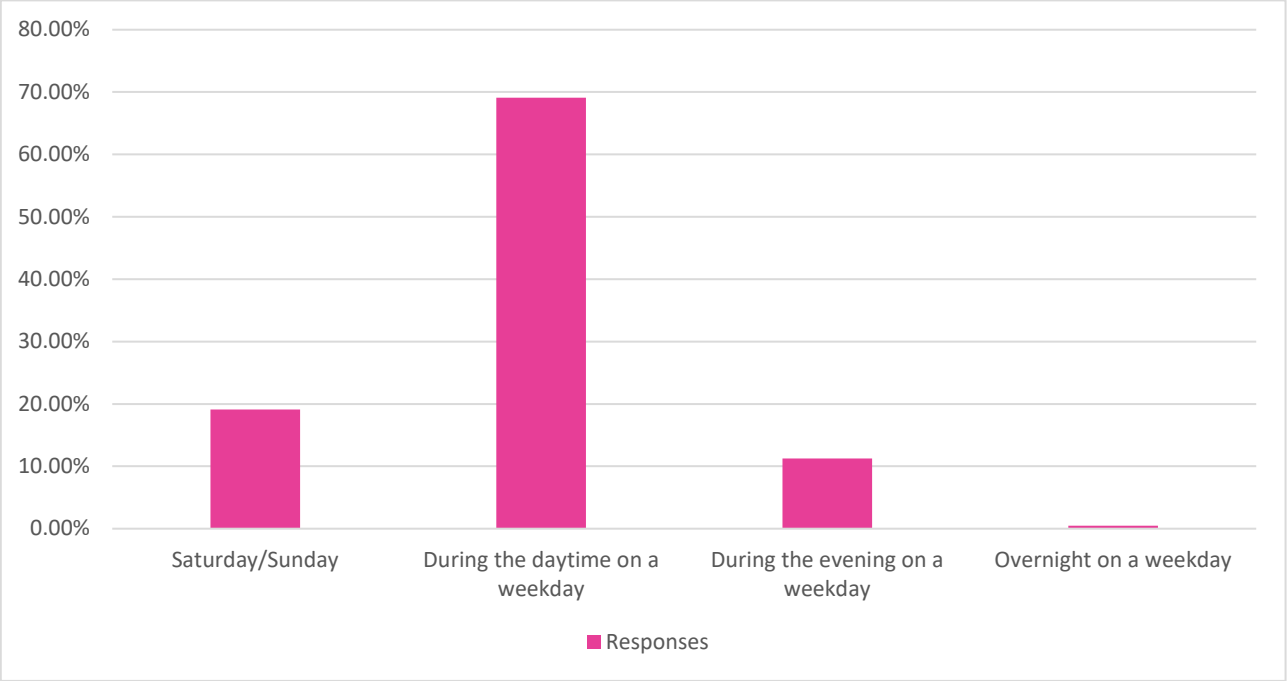
5. What help did you need?



Again, respondents had a variety of reasons for contacting Livi, however the graph shows that 77% of respondents deemed their problem to be non-urgent, with only 16% of respondents contacted Livi for urgent/emergency care. Of the 3.5% of respondents who chose the 'other' option, reasons given included for covid advice, general advice and because of an accident.

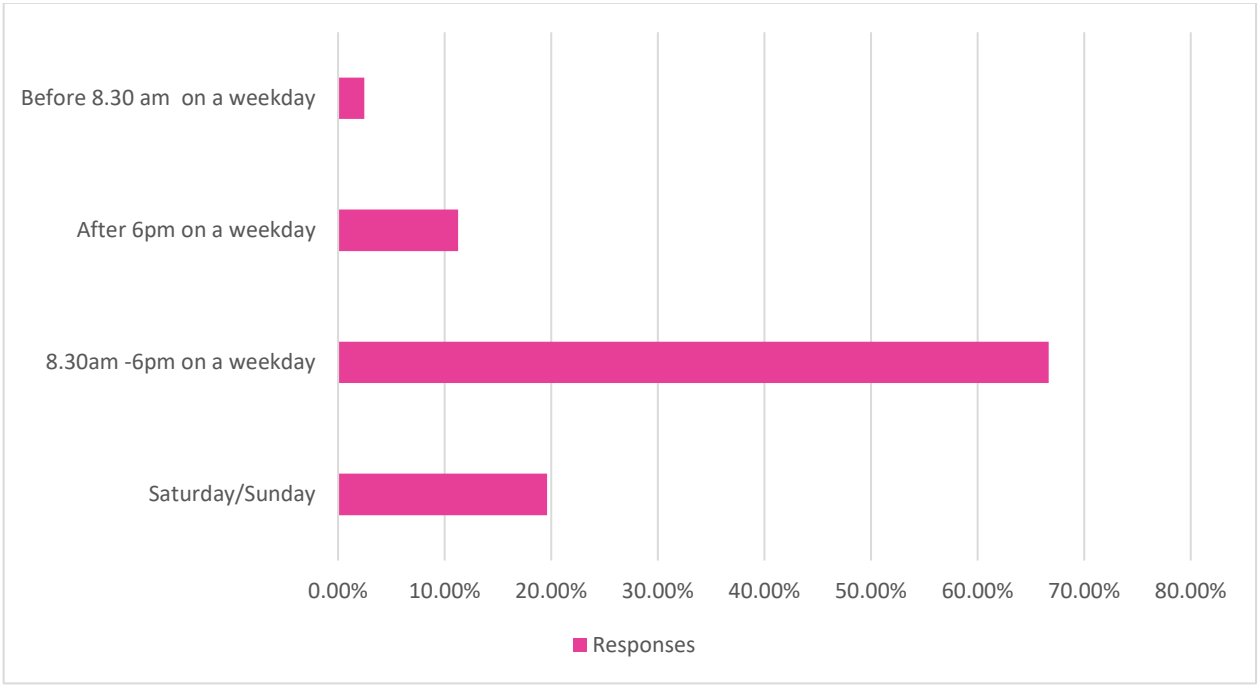
In the text responses to other questions, there is an emerging pattern of people seeking advice about an issue they were uncertain about and not knowing if it was important or not – for some people they indicated that this service provides important reassurance and support without 'bothering' their busy GP unnecessarily'.

6. When did you need help?



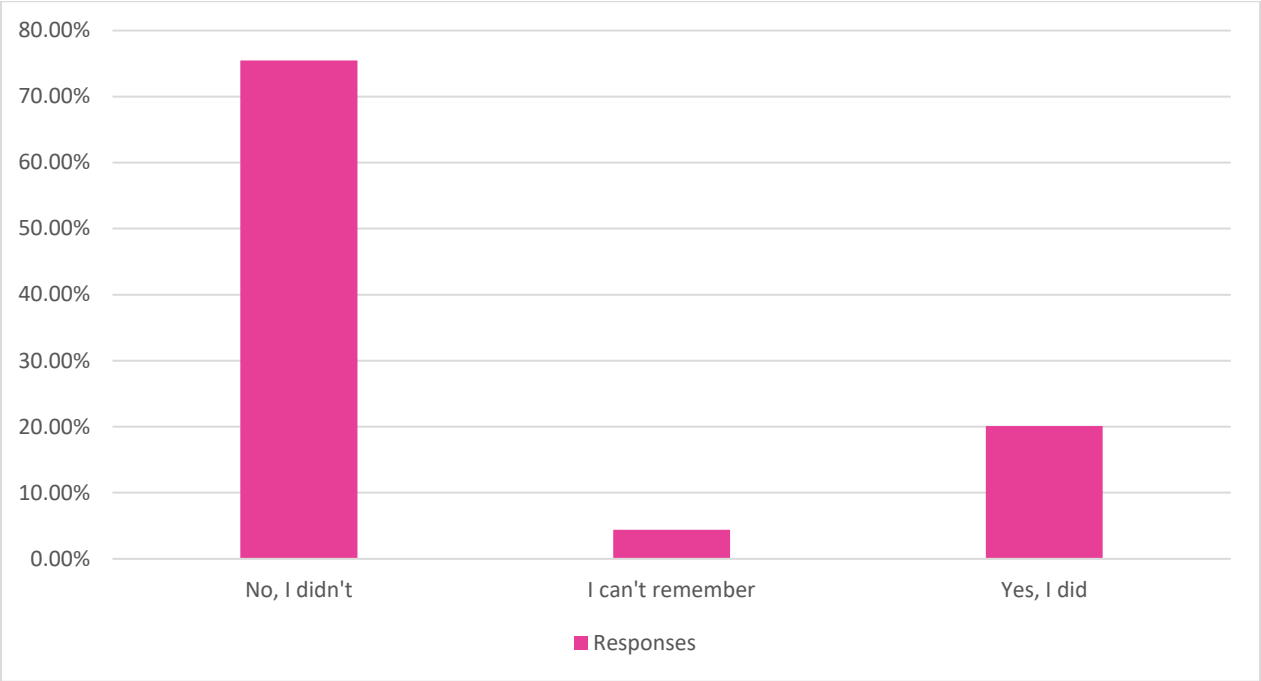
These results show that Livi is not being used primarily as an out of hours service, almost 70% of respondents contacted Livi during the day on a weekday, with 30% of respondents making contact on either a weekend or a week-day evening and only one respondent contacted Livi during a week-day night.

7. When did you have your appointment with a Livi GP?



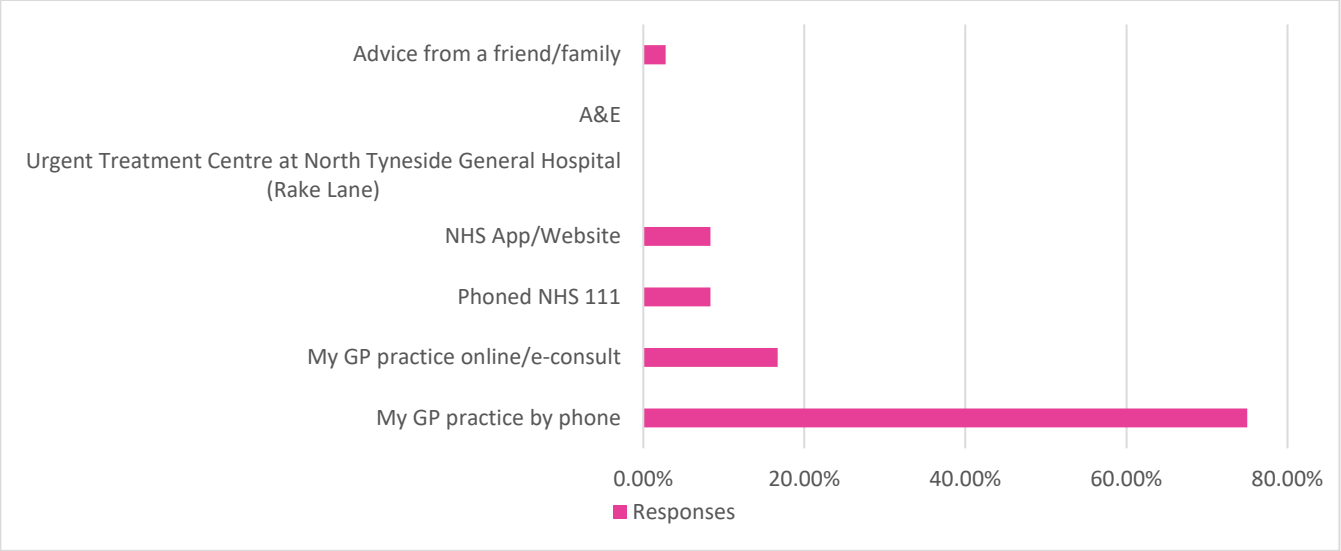
Most appointments took place during normal working hours, with just under 20% taking place at the weekend, 11% on an evening and2.5% early in the morning. This suggests again, that Livi is not being used as an out of hours service. This was surprising as previous research indicated a gap in out of normal hours support.

8. Did you try to use any other healthcare services before you booked your Livi appointment?



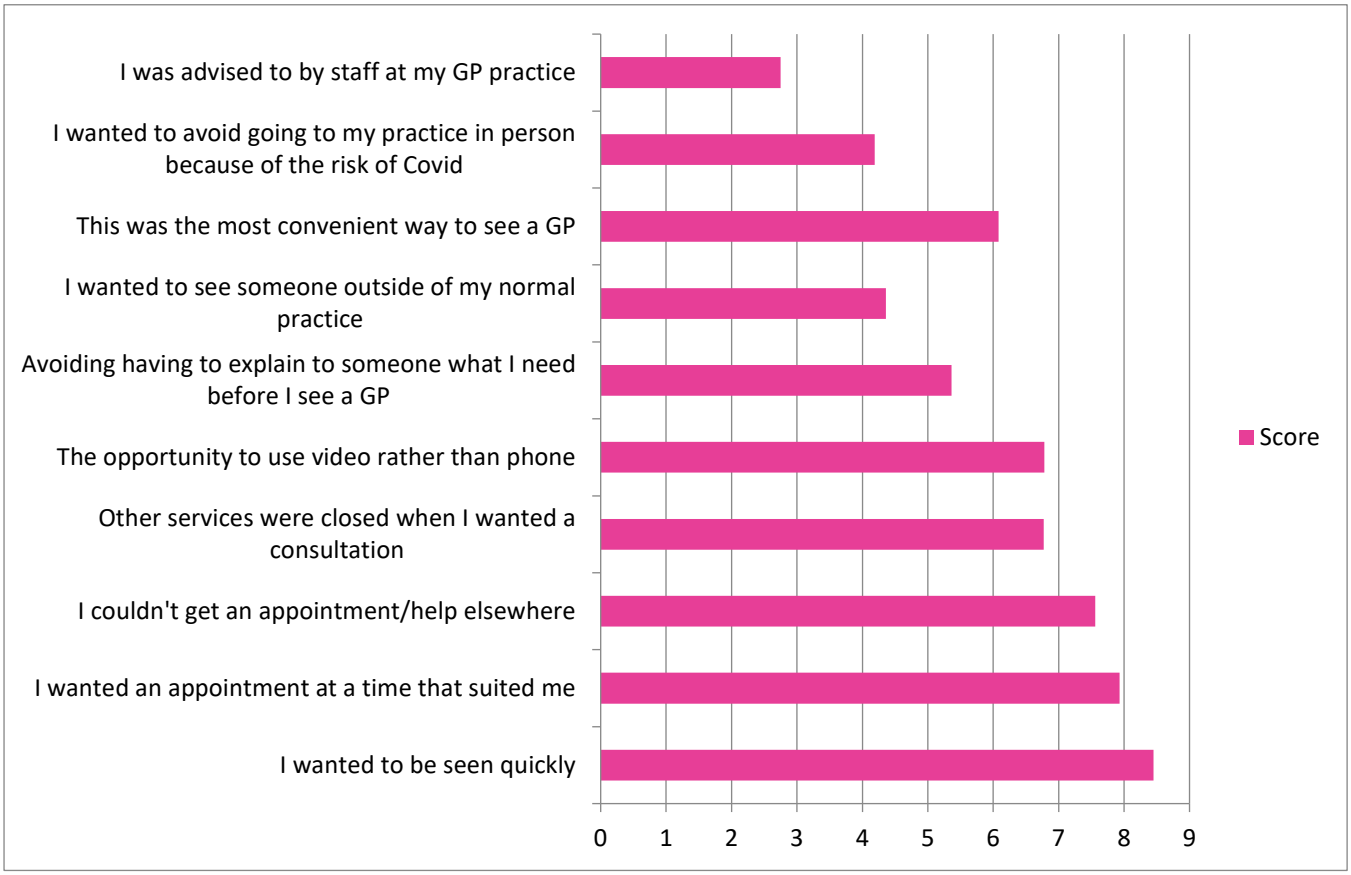
These results show that for 75% of respondents Livi was their first port of call and demonstrates that, amongst respondents to the survey, there is a definite demand for this type of service.

9. Which health care services did you try to use? (select as many as you need)



Of the 20% of respondents who initially tried to use an alternative to Livi, most tried to contact their GP either by phone or online, with a small number phoning 111 or accessing advice online. No respondents visited A & E or the Urgent Care Treatment Centre prior to contacting Livi.

10. Why did you choose Livi?



It should be noted that a glitch in the survey monkey autofilled answers with lower scores for some users of mobile devices and so we need particular caution when using the responses to this question.

These results show that people had a whole range of motivations for choosing Livi. The most often selected motivation is **wanting to be seen quickly** but **having an appointment at a convenient time scores** almost as highly and generally the themes of speed and conveniences predominate in the results. Coming in third is the inability to get help elsewhere, a score that may have been exaggerated by the pandemic or get an appointment with their GP.

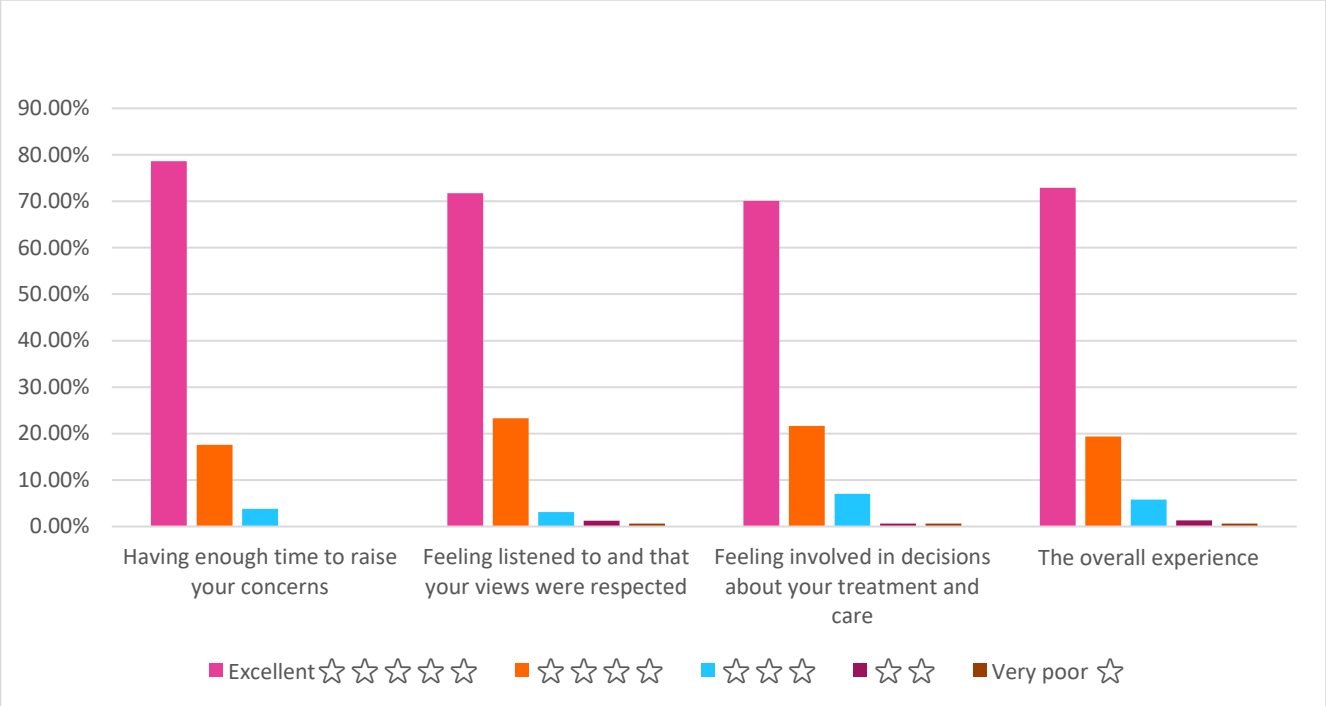
When you combine the top 3 scores for each of motivations available, this shows the following:

I wanted to be seen quickly 117
I wanted an appointment that suited me – 101
I couldn't get an appointment elsewhere -76
This was the most convenient way to see a GP – 51
Other services were closed when I wanted a consultation - 51
The opportunity to use a video rather than phone - 50

During one of our interviews, the respondent commented:

'I was struggling to get an appointment with GP and receptionist told me to try again the following day or try the app. I was surprised and a bit dubious about using it.'

11. How would you rate your experience?



These are very positive results, with over 70% of respondents rating their experience of using Livi as excellent in every category and a rating of 4 or 5 starts over 90% is achieved in all areas.

12. Were you happy with the outcome of your consultation?

Again, this is a very positive result, 89% of respondents were happy with the outcome of their consultation, whilst less than 2% were not.

We asked people to tell us more:

Points raised twice or more	Times mentioned
Generally, very happy or happy with the outcome	18
Friendly GP who engaged fully with me	15
Very quick response, compared to waiting to see my GP	10
App is quick, easy, and convenient to use	10
The GP gave me good advice	10
The quality of care was very good	9
My prescription was processed quickly	7

My Livi consultation enabled me to see my GP more quickly	5
I still needed to see my GP, my Livi consultation just delayed things	5
The care I received was better than if I'd seen my GP	3
My referral on worked well	3
My problem wasn't dealt with appropriately	2
Would have preferred to see my own GP	2
Had several Livi appointments of varying quality	2

90 people completed this part of the survey, and as in question 10 the themes of speed and convenience, if combined, are mentioned most frequently. However, reasons related to the quality of care are also highlighted by many respondents. At the bottom of the table are the reasons given when people were not fully happy with the outcome of their consultation.

In the free text answers for this section we see a small number of people (5) tell us about the Livi GP making a different judgement on an issue to their usual GP –

> 'The GP I spoke with progressed my problem for in investigation which is ongoing unlike my a GP at my practice' and 'I got a referral I thought I was due' .

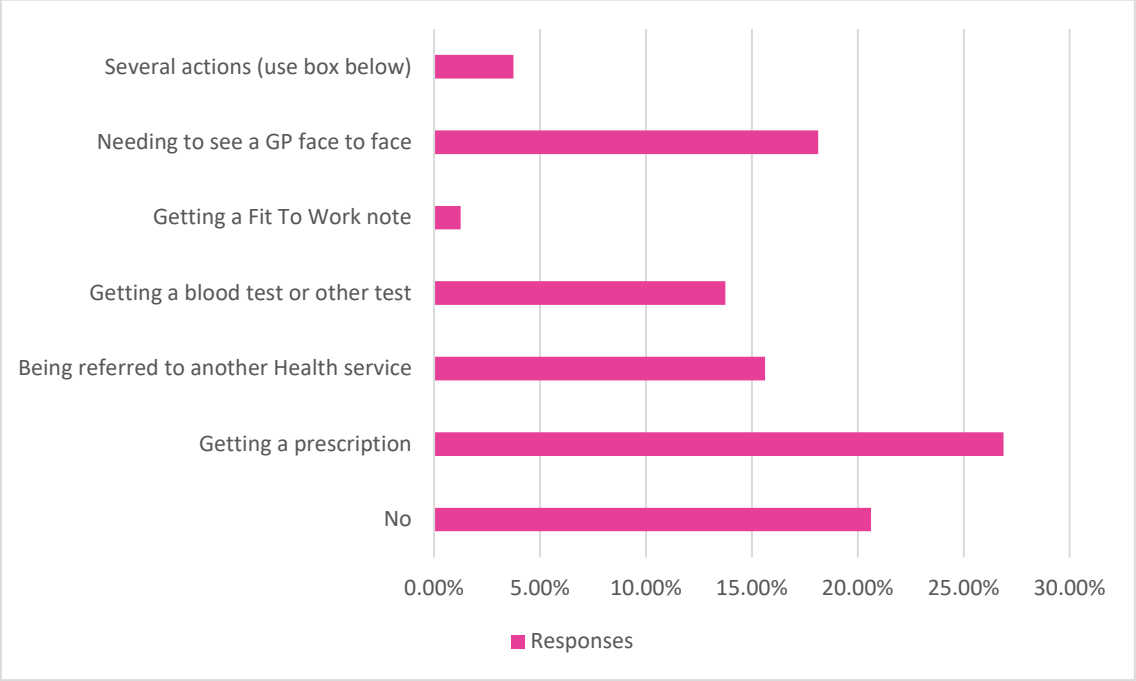
Below are some examples of what people told us:

> 'Was unable to see a GP at my own practice so used LIVI. GP I spoke to through LIVI stated I needed to be seen by a GP in person and urgently. I called my GP surgery … who managed to fit me in for an emergency appointment the next day. If I hadn't used LIVI I would have had to wait due to Covid restrictions'

> 'An appointment was available within 15 minutes (for my first booking). The GP was able to observe my movement and give advice (shoulder pain), provide options for self-care and discuss what would happen should it continue'

> 'In the end I had to see a GP, so it felt like I had a delay in getting seen, by the person I needed to …. The main reason I used Livi was because it was presented as something the practice were trying to [promote]…. but in the end it just delayed my consultation'

13. Were follow up actions needed?



These results show that the most common follow up action was getting a prescription, followed by no follow up. The next most common, accounting for 18%, was having to see a GP face to face. Other results will show that this was a problem for some respondents, who felt their Livi consultation just delayed things, whilst others felt that the Livi referral enabled them to see their GP more quickly and actually speeded up the process.

We also asked people to tell us what worked well and what could have been improved:

What worked well - points raised twice or more	Times mentioned
Generally everything worked well/very well	29
Convenience & speed of response	12
The referral process	9
Felt more listened too/had more time/the GP was more responsive	8
Provision of follow up appointments	3
The advice I was given worked	2
What could be improved - points raised twice or more	**Times mentioned**
Communication between Livi and my GP	7
Difficulties with using the technology	5
I needed a face-to-face appointment	4
Processes for getting medication	4
GP attitude	2
Diagnosis	2

78 people completed this part of the question and most of those felt that the follow up procedures had worked well. Interestingly the most common area for improvement was

communication between Livi and their GP, where several problems had occurred – mainly relating to the booking of a face to face appointment or follow up tests.

Below are some examples of what people told us:

> 'Very impressed with the service which I do hope is here to stay. Having a health problem where I didn't need a Dr's examination will save time for the people who need to visit the Dr in person. Love it!'

> 'Bit more precise. One time I told the Livi GP I have been having headaches and had been feeling a bit anxious as I've been having to wait so long for therapy. She prescribed me with anti-depressants which I have never taken…..I felt a bit uncomfortable…..I haven't taken the meds because I was scared'

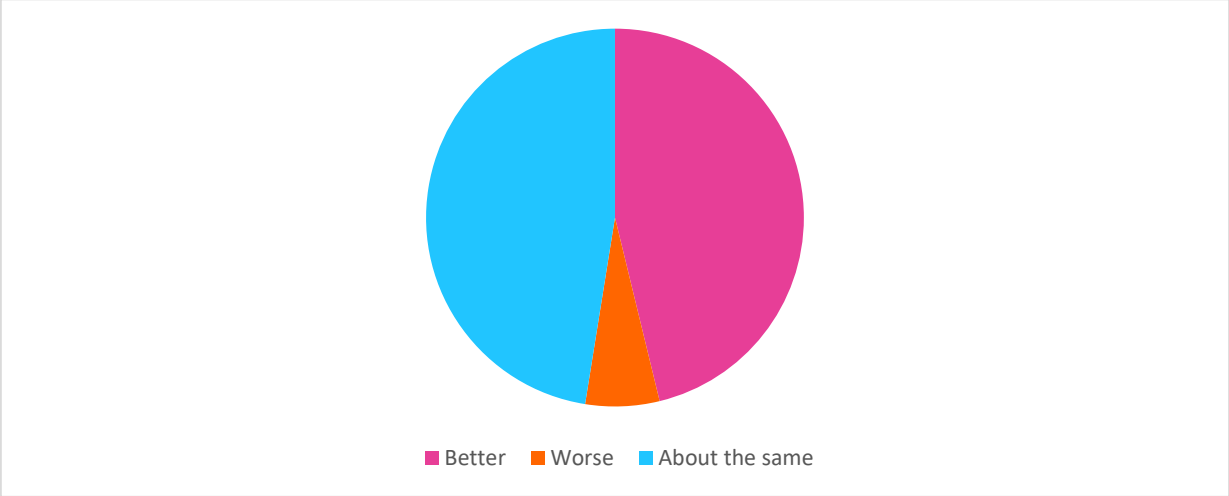
> 'Consultation was excellent, felt that I was listened to and that doctor knew of my medical history'

> 'Livi made an appointment for me to see a practitioner for a face-to-face assessment. My GP practice 'phoned me to tell me that they had cancelled this due to the appointment being with a user, who isn't qualified to refer me for an x-ray. So, I had to make an appointment with my practice anyway, somewhat negating the Livi consultation'

In one of the interviews we were told 'The handover between Livi and this participant's GP practice was noted as a "much better system" as they got an appointment within half an hour which was surprising due to waiting times with COVID.

In a different interview: "LIVI really worked for me as the Livi doctor arranged a prescription and a follow up face to face – but then my face to face GP called me to say he didn't need to see me after communicating with LIVI doctor and arranged for a hospital appointment straight away. More than I had expected. Get email updates and the app show me who I spoke to and when and when /if they will be free. Feels less of a burden on the GP".

14. Overall, how did your experience of Livi compare to your usual experience at you GP practice?



Another very positive result with only 6.5% of respondents stating that the experience of contacting Livi was worse than their usual experience at their GP practice.

We asked people to tell us why:

Points raised twice or more	Times mentioned
Availability/speed of appointment	31
Convenience	19
They had more time for me and listened to my problems	15
I didn't have to travel to, or wait in, the surgery	15
Quality of care and professionalism of the GP	9
Ease of booking an appointment (no long wait on the phone)	5
Good follow up	4
I prefer to see my GP face to face	4
I didn't get what I needed	4
The care I received was better than if I'd seen my GP	3
My referral on worked well	3
I wasn't made to feel like I was time-wasting	2
It felt like seeing my own GP	2
Technical problems using the app	2

93 people completed this part of the question and the results show again that speed and convenience are the most common reasons behind their original response. However, another emerging theme is the perception that the Livi GPs have more time for patients and really listen to their problems.

Below are some examples of what people told us:

'I felt like I had more quality time with the Livi GP'

'It's fab for small things but I wouldn't say it's better than meeting face to face because video calls sometimes aren't as accurate as a GP in person'

'I've used Livi twice. On one occasion the GP I spoke to was very thorough, helpful, and reassuring. On the other occasion, the GP seemed to be pushed for time and was less helpful……. Livi works well if you are looking for advice…….but it cannot fully replace the relationship that ideally builds up between a patient and their GP'

'I was on holiday in a caravan so did not have access to my usual GP service'

15. Could anything have been improved about your experience of using Livi?

Points raised twice or more	Times mentioned
No/nothing/NA	68
Shorter wait times/the predicated wait time function more accurate	13
Better procedures for issuing prescriptions	4
Initial advice to contact my GP, if a face-to-face appointment is needed	3
Better links between Livi and my GP	2
Being able to see my GP on Livi	2

102 people completed this question and almost 70% stated that there wasn't anything that could be improved. Where improvements were mentioned, the most common involved the 'predicted wait time' function on the Livi app, which some people found inaccurate, leading to delays and frustration. There were also some issues around prescriptions going astray.

One person we interviewed had a very difficult time using the app, they said: "If you're going to launch an app then it has to have all the right features and [has to] be right for the ageing population". This participant stated that there wasn't a 'forgot your password' button and it also didn't have the eyeball button that is often found on websites/apps that allows you to see your password as you type. With this in mind, if they were inputting their password incorrectly as the app suggested, there was no way for them to check/fix mistakes without this feature. After trying numerous times to log on, they "gave up with Livi".

Below are some further examples of what people told us:

'If they are asking for information before the appointment, they should check this and if they know it cannot be solved online then advise the patient'

'Perhaps there could be an option in the app to select if you want to see a male or female GP prior to the appointment'

'Local GP (from same region) who knows the local system. Direct link from Livi to GP, rather than needing me to separately phone GP'

'I love the app its quick and easy and it's good if like me you don't have any serious conditions but you're worried about something but not certain it's urgent enough to go into the doctors and don't want to seem like you're wasting anyone's time.'

16. What would you have done if Livi was not available?

Alternatives to Livi	Times mentioned
Waited to see my GP	93
Visited A&E/ hospital	11
Nothing	10
Visited a walk-in centre/urgent care centre	9
Don't know	7
Rang 111	5
Visited the pharmacy	3
Rang 999	1

131 people completed this question and the vast majority stated that if Livi was not available they would have waited to see their GP. However,11 would have gone to A&E and 10 would have done nothing, both concerning options.

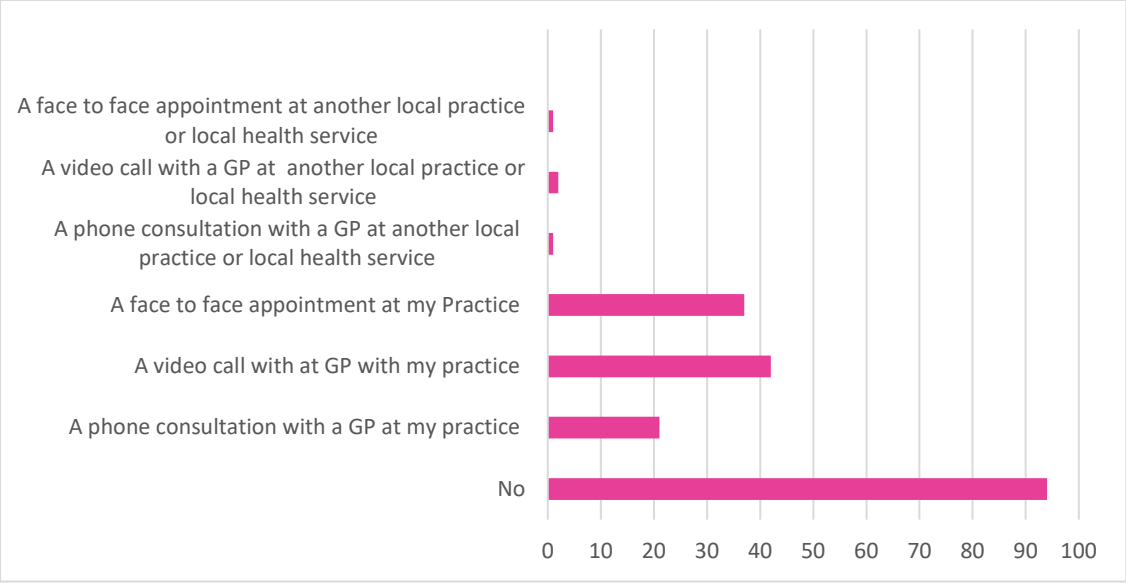
Below are some examples of what people told us:

'I think it would be a challenging situation without Livi, as making appointments with a GP is so difficult, especially during the pandemic'

'Spent hours on the phone with my blood boiling, waited ages for an appointment, then wasted half a working day……driving back to North Shields for an inconvenient appointment'

'Panicked until I got a GP appointment in person, which could have exacerbated my problem'

17. Would you have preferred to use a different healthcare service?



Respondents were allowed to choose more than one option. It is clear that the most common response is that Livi is a popular choice for people, accounting for just under half of all responses.

Of the other responses, it is interesting the more people chose a virtual appointment with a GP at their practice rather than a face-to-face appointment. This may be in response to the Covid pandemic or may just reflect that this group of patients prefer the convenience of a video and telephone consultation.

The small number of people saying a telephone appointment was an alternative indicates that few felt their condition could have been handled over the phone. There continues to be a strong preference for visual contact in this cohort.

The respondents to this survey indicated very little enthusiasm for an alternative locally based pooled service - showing a preference for a practice based service. In our other GP access work, people have mentioned this as an alternative approach.

We asked people to tell us more about their answer:

Points raised twice or more	Times mentioned
Generally happy with the Livi experience	21
My GP knows me better	11
My condition requires a face-to-face consultation	7
I would like the Livi experience, but with my GP practice	2
Concerns around Covid put me off contacting my GP	2

52 people completed this part of the question and the most common response was that people were happy with their Livi experience. However, for a total of 20 respondents, they would have preferred to speak to a local GP or GP at their practice .

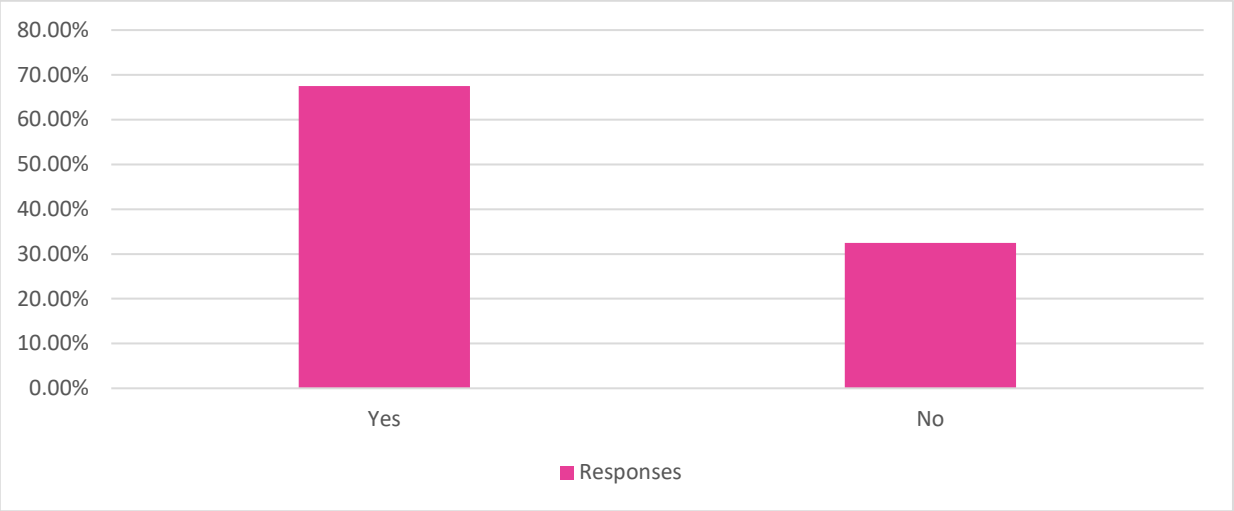
Below are some examples of what people told us:

‘The waiting time for general appointments is just too long. It makes you feel, unless your issue is urgent, you just won’t bother, and this can then impact on your day to day life just putting up with things when we shouldn’t be’

‘Livi is a bit of a lottery. It is good for urgent matters, not so good for complicated medical issues where there is a long history to explain’

‘It was an out of hours situation, no need to visit A & E, therefore seeing via video in own home was excellent’

18. Are there circumstances when you think a consultation by video call would not be the best way to receive health care?



68% of respondents stated that there were circumstances where a video appointment would not be the best way to receive health care. This means a third thought there were no circumstances where a video call wouldn't work, this is quite a high proportion, but maybe reflects the fact that this group of respondents have proactively chosen to use a service that only offers video appointments.

We asked people to tell us more about their answer:

Examples of when a video call is not appropriate - raised twice or more	Times mentioned
When a physical examination is required	50
For personal/intimate/sensitive issues	10
For long-term/complex conditions	5
If you are unsure about what is wrong with you	5
When you need something measuring	4
When you need to see some-one you trust & who knows you well	3
When the GP needs to give you, life-changing news	3
For mental health issues	2
For urgent care – strokes/heart attacks	2
Other points raised twice or more	**Times mentioned**
Video calls are a good first point of contact, with follow up as required	4
Not all conditions need a face-to-face appointment	3
Video calls are more convenient for straight forward issues	3
Video call are safer during the covid pandemic	2

92 people completed this part of the question and not unsurprisingly, the most common reason given was when a physical examination was required. Most of the other reasons relate to the complexity and/or sensitivity of the issues involved.

Below are some examples of what people told us:

‘Where you need a physical assessment, or where the GP or the patient need to be face-to-face to pick up on opportunity to have a fuller discussion…..I think there is a place for video, but I am a believer that the relationship, and skills of GP’s in picking up non-verbal signs are very important to health care’

‘Non urgent calls where able to describe problem without having to see f2f. Or where perhaps a reassuring answer is better than none or worrying overly about a problem whilst being unable to see GP for 7 days’

‘Livi is a bit of a lottery. It is good for urgent matters, not so good for complicated medical issues where there is a long history to explain.

Annex 2 - Scenarios

We have reviewed the responses of different cohorts of people responding to this survey to understand different views, experiences or expectations.

People who tried their GP first

31 of the 210 people who responded told us they had tried to use their GP practice first either by phone or e-consult.

All of these respondents were happy with the outcome of the Livi consultation. 52% said it was better than their usual experience, 41% said it was about the same and 7% said it was worse. The people who said it was worse commented generally positively.

> 'but I've ticked 'worse' because it cannot fully replace the relationship that ideally builds up between a patient and their GP'

The main factor for this group was waiting times at practices – 'I was seen on the day I needed help not put off for 2 weeks' and convenience - 'Didn't need to spend time constantly trying to get through to practice and eventually be told to ring back as they had no appointments. It gives a choice of available times, saves time travelling and waiting. This is a fantastic service that works well with the GP practice I am registered at.'

That said 33% went on to say they would have preferred a video call with a GP at their practice, 28% would have preferred a face to face appointment and 17% a phone appointment with a GP at their practice.

Urgent care needs

33 of the 210 respondents said their care needs were urgent - 23 of these for a new problem, 10 for an ongoing problem.

22 of these people had their appointment 8.30-6 on a weekday and 45% had tried to use another healthcare service (their GP, except for 2 individuals.

'Wanting to be seen quicky', and 'I couldn't get an appointment help elsewhere' were the most popular motivations for using livi selected.

9 of these people needed to go on a get a face to face appointment with a GP.

46% of this group thought the service was better, 43% about the same and 11% worse – the free text indicates that speed of appointment and convenience was a real positive, but people who scored it 'worse' said that the Livi service 'was great, but could not replace my relationship with my gp'.

If Livi wasn't there – 6 people said they would have attended A&E, 2 said they would have attended a walk in service at hospital, 1 would have phoned 111 and the others would have waited to see a GP at their practice.

Non-urgent care

160 people told us they used Livi for there non urgent care needs. 7 of these had had more than 65 appointments with Livi, 22 3-5 Livi appointments and 46 people said they had had 2 Livi appointments.

58% of these said they had also used their GP practice since July 2020.

114 (71%) said they were looking non-urgent support for a new problem. 34 (215) said they accessed the service on Saturday/Sunday and 14% outside normal hours during the week.

129 people (80%) did not try to use any other service before Livi, 16 people contacted their GP practice and 4 contacted NHS111 or the NHS website.

Reasons for choosing livi:
When you combine the top 3 scores for each of motivations available for this group, you see:

I wanted to be seen quickly - 91
I wanted an appointment at a time that suited me - 85
I couldn't get an appointment/help elsewhere - 57
This was the most convenient way to see a GP - 43
Other services were closed when I wanted a consultation -40

89% of this group where happy with the outcome, 9% partially and 2% not happy. Those not happy felt they would have rather seen their own doctor. One person had expected the video call was going to be with their Dr.

47% of respondents in this group felt the service was better when compared to their usual experience at the GP, 48% about the same, 5% worse.

Responses to – what would you have done if Livi wasn't there:

GP – phone - 74
A&E/Urgent Treatment Centre – 10
Don't know -4
111 – 3
Pharmacy – 2
Nothing -2

The free text in this and other questions highlighted the following issues:

1) Significant waits for non-urgent appointments at GP practices
2) Issues with the triage process and roles of receptionists
3) For some, they indicated that they had had the condition for some time prior to contacting Livi but knew it was difficult to see a GP at their practice.

When asked 'would you have preferred to use a different healthcare service?', 75 people said no, 30 said a video call with their practice, 25 a face to face appointment at their practice and 14 said a phone appointment.

Part 2

Views about Livi within our general GP access work

Our approach – GP access reseach

We launched an online survey using survey monkey that was promoted through social media, our networks, North Tyneside CCG's Patients forum and other voluntary sector organisations. We had 539 responses to this from across the borough.

We also worked closely with the Primary Care Networks who were running the Covid Vaccinations sites at the Parks, Langdale and Oxford centres. After a small scale pilot we began handing out a printed (and necessarily shortened) version of the survey to people once they had their covid vaccine. We also interviewed over 100 people who were waiting after their jabs, using the printed survey as the basis for our discussion. We heard from 410 people this way. We held online and face to face focus group discussions with people who are deaf or hard of hearing, young people, and refugee and asylum seekers, to ensure that their voices were heard in this project. 65 people shared their views this way.

As we used different research methods, we were unable to ask exactly the same questions to all participants, however the themes above were the focus of our work.

As with any survey, respondents may not complete every question. We asked people to tell us which GP practice they were referring to when answering the questions and 654 people gave us this detail.

All of the feedback we share is anonymous unless an individual asked us to share their feedback directly with a service.

Key themes in feedback about Livi within the general GP surveys

Keep Our NHS Public North East (KONPNE) - We spoke with KONPNE during the preparation and delivery of this research project. KONPNE promoted our research as an opportunity for residents to share their views. We also agreed to include a statement from KONPNE into our presentation to the CCG and Livi Steering Group – see annex 1.

Livi experiences in our general survey

10 people who completed the general access surveys told us they had used Livi and had positive experiences. A further 3 people told us they had less good experiences - because they had to use photo ID to register or that appointments were not available.

Privatisation

40 people mentioned privatisation in their responses to our surveys. Within these comments, the following themes emerged and we have provided quotes to illustrate these.

- Private contracts taking money away from NHS services – 'It is important to me that the NHS is not privatised. The introduction of the Livi service is the thin end of the wedge. NHS England will put more pressure on Primary Care to have more on-line appointments, more GP practices will close and it will be even more difficult to get a face to face appointment. Also, when we become dependent on private

companies they will then increase their charges and tax-payers will either have to pay more or find NHS services rationed.'

- Private providers undermining the NHS - 'For years and especially since 2012, the NHS public service ethos is being undermined by the privatisation of services that used to be provided directly by the NHS. A profit driven company has no place in providing health care, free at the point of need. There will be compromises in clinical care - quality and quantity. Clinical staff are being taken away from face to face appointments to fulfil private contracts, and investment in primary care NHS services reduced. There is scope for providing care in different ways - but that should mean more choice, not a patient being funneled into accessing a service because of cost cutting and private contracts. I am therefore very alarmed at the use of such companies as Livi when investment in public service primary care should be the priority.'

- Private companies having access to personal health data - 'I cannot stress enough, how opposed to private services getting work from the NHS and do not agree with Livi, or other providers getting involved and getting hold of my personal health data.'

- Livi as a Swedish company 'It's appalling using a Swedish private firm without public consultation'

- Private contractors providing services - 'I don't think GP services should be contracted to private providers'

4 people who mentioned privatisation said they 'did not mind' who provided the service, but were aware that others were concerned about privatisation.

Healthwatch North Tyneside's role – 2 respondents directly questioned Healthwatch North Tyneside's work: 'The questions in your survey are 'leading' and not specific enough. I believe you are trying to gain positive responses to allow you to bring in more private companies. I am happy for my practice to offer more online services, but I need to be able to decide which is the most appropriate access point for my needs. I will not use services such as Livi as I believe this is part of an ideological mission to privatise the NHS.'
And: 'Yes, I am very concerned about the underfunding of the NHS, the continued trend towards privatisation including the use of private companies to give G.P. consultations (Livi), and the closing and centralisation of local hospital departments into "centres of excellence". I could go on, but I'd like to know what you as a group are doing to defend our NHS?'

Annex 3

Statement from Keep Our NHS Public North East

We have agreed to include this statement in full to represent the views of this group – the emphasis is their's:

Keep Our NHS Public North East (KONPNE) Statement about the North Tyneside CCG Contract with Livi

This statement reflects the views of KONPNE members. It also reflects the views of hundreds of members of the public who have signed our petition opposing the Livi contract; Covid 19 has severely limited our opportunities to engage with the public but, in just a few hours in Tynemouth and North Shields, we collected hundreds of signatures from concerned residents. The first and most important objection we have to the Livi contract is that it is part of the ongoing and insidious privatisation of the NHS. In relation to this, it is important to highlight a number of important issues.

Healthcare as a Public Service not a Business

Private companies should not be given NHS funding: healthcare should be a public service and not for profit. Money which should be spent on patient care is going into the pockets of Livi shareholders.
This is all part of the same slippery slope that has seen Centene Corporation, an American health insurance company**,** become the largest provider of Primary Care in the country. Read more on our website – https://konpnortheast.com/privatisation-primary-care/
We understand that the CCG is trying to find a solution to the problem of patients being unable to get timely appointments with their own GP and is trying to take some of the pressure off GPs by providing an additional service. However, bringing in a private company is not the solution; the fundamental problem that must be addressed is the underfunding of Primary Care Services**,** and additional monies need to be invested in our existing localised practices in North Tyneside.

GPs are Medical Practitioners Not Businesses

It is often argued that GPs are private anyway, so what's the problem with large companies taking over GP services? The article on this link describes how, traditionally, GPs are not accountable to shareholders. https://weownit.org.uk/blog/arent-all-gps-private-anyway

Livi Promoting Themselves at Our Expense

We find it unacceptable that tax-payers' money, which has been allocated for healthcare, is being spent on advertising a private company. Livi has commissioned billboard vans to drive around the region, publicising their services. If the public were keen to access Livi services, then surely advertising would be unnecessary?

Is Livi Really a Bargain?

It must always be borne in mind that large private companies exist to make money for their shareholders. They are not charities and they are not benign philanthropists. Loss leading strategies are a recognised practice for companies trying to penetrate new markets. It may be that Livi is currently offering a very competitive rate for their services (KONPNE has been denied information about costs) however, if they are offered further contracts and a dependency upon them is created, they may have no qualms about increasing their charges (and profits) in future years. Livi may well be playing the long game.

Taking GPs away from NHS

GPs are trained by the NHS and are a limited resource. The more GPs employed by private companies, the fewer who are available to carry out NHS work.

Privatisation Not Supported by North Tyneside Council

Councillor Margaret Hall (Chair of the North Tyneside Health & Well-Being Board) stated in a North Tyneside Council Meeting on 26th November 2020 that, *"North Tyneside Council is 100% opposed to any privatisation of the NHS and as long as Labour remain in control of North Tyneside Council it shall remain opposed to any privatisation of our precious NHS".* https://democracy.northtyneside.gov.uk/mgAi.aspx?ID=2144 {part 9)
In addition to our objections about privatisation, we also have objections to the on-line Livi service for practical reasons such as lower standards of care and limited access for certain people.

No Continuity of Care

The patient preference is for continuity of care; Livi GPs are not based locally and it would be unusual for a given patient to encounter the same practitioner for repeat appointments.

No Local Knowledge

Livi GPs located across the country do not have the local knowledge of systems or historical links with collaborative organisations (e.g. mental health support) in contrast to our established North Tyneside GPs.

A Service Which is Not Accessible to All

As tax-payers we are all contributing to this service, but many people are being excluded from it, because they do not possess the necessary equipment to access it. With a digital service, patients require access to and proficiency with the use of smart phones/laptops and also require adequate data and broadband. These factors are likely to increase inequalities in health provision, with many of the people who are excluded being elderly, disabled or on a low

income Another group who will not be using the service are those who object in principle to using a private healthcare company.

A Limited Service

The scope of virtual appointments is limited; for example, many patients require a physical examination of some kind, and contact / assessment of some people may be hindered by technology (eg: those patients with sensory difficulties, or those experiencing mental health issues).

Additionally, Livi does not provide a full prescribing service or provide appointments to children under 2 years of age.

Finally, we believe that the service provided by Livi is no longer required because Covid-19 has led North Tyneside GPs to adapt the way their own in-house services are delivered; most practices now provide locally-based, integrated**,** comprehensive, face to face and digital appointment services to patients, as appropriate to their needs.

In summary, members of KONPNE and many local North Tyneside residents strongly object to the presence of Livi in North Tyneside and the part it plays in the insidious privatisation of the NHS. Alongside our central belief that taxpayer's money, identified for healthcare, should not be going to private, profit making companies with shareholders, a number of key operational issues are apparent and are identified above. It is our view that the contract with Livi must not be renewed in 2021 and investment should, instead, be made in developing our own existing localised Primary Care services and employing additional practitioners for those services.

27th May 2021
Keep Our NHS Public North East
No cuts or cash-driven closures | Fair pay for all NHS staff | A fully-funded, universal, publicly owned and publicly provided National Health Service
www.konpnortheast.com
facebook.com/NHSPublicNorthEast
twitter.com/KONPNorthEast
konpnortheast@gmail.com