ST LUKE'S PRIMARY CARE CENTRE, DUSTON, NORTHAMPTON

Patient Participation Group Consultation on proposed budget cuts

1. Rationale

At a quarterly PPG meeting, we were advised by Alison Pound, Practice Manager, that proposed budget cuts imposed on the Practice resulted in a complete review of costs in an attempt to make the required savings. She advised the group that the Practice had no alternative but to reduce the number of services provided for which there was no direct funding.

The services under threat are:

- Blood taking
- Doppler testing/Leg Ulcers
- PSA Monitoring
- 24 hour BP monitoring/Heart monitors
- Ear syringing
- Insulin initiation and conversion
- Diagnostic Spirometry

The PPG discussed this issue at length in order to find ways of supporting the Practice to maintain these services. It was decided to carry out a survey to determine the strength of feeling amongst patients regarding the proposed cuts.

2. Methodology

- 2.1 It was decided to produce a Powerpoint Presentation that could be included on the electronic information board in the waiting areas of the Practice. The purpose of the presentation was to bring the issue of proposed cuts to the attention of as many patients as possible. The presentation would direct them to the PPG section of the Practice website, where patients could access an on-line survey for completion.
- 2.2 The on-line survey included a range of questions which required tick box answers but also a comments section for patients to include personal opinions.
- 2.3 A further questionnaire was available in the surgery for patients to include more comprehensive comments.
- 2.4 Members of the PPG visited the Practice at various times to raise awareness of the survey and encourage completion of forms.

3. Restrictions and Factors for consideration

- 3.1 The Powerpoint presentation was part of the overall information broadcast from the Practice. If any of the message was missed during screening, it would be a further 20 minutes before the presentation was shown again. Similarly, as patients were called to their appointments, some of the message could be missed.
- 3.2 Due to Data Protection legislation, the PPG were only able to target Patients who came into the Practice: it would be very easy for Patients to miss the Powerpoint presentation and PPG members were not available every day to bring this to Patients' attention.
- 3.3 The on-line survey could only be completed by Patients with computer access.

Consequently, the number of people completing the survey and the profile of the sample group may possibly not give a true representation of feeling towards the proposed cuts.

3.4 117 Patients completed the separate form which enabled them to give more detailed comments.

4. Results

4.1 Results from on-line survey

173 people took part in the online survey. (73 completed on-line and a further 100 forms completed in the Practice with the help of PPG members. These further 100 responses were input manually to complete the sample).

The results and graphs are shown in **Appendix 1**, but the overall results show that from the sample obtained:

- 88% used the blood taking facility, Ear syringing was second with 30%.
- 94% stated that it would be either extremely difficult or inconvenient to travel to NGH
- 58% stated that Time was the biggest issue with travel to NGH
- 52% stated that Cost was a big issue with either car parking charges or taxi fares
- (typically a taxi fare seemed to be £20).
- 35% stated that having to travel at all, was a problem
- 27% stated they had mobility problems with travelling to NGH and the distance between car parks and clinics at the hospital.
- 64% stated they were car owners/drivers, travel being less of a problem than parking but still incurring car parking charges for a minimum of 3 hours.
- 33% stated they were not car owners/drivers and 24% of that group stated they had to rely on family and friends for support.
- 10% of non car owners had to rely on public transport and pointed out that there is no direct bus route to the hospital and therefore a long walk (if mobile) to the hospital. More immobile patients were forced to pay taxi fares of around £20 per visit.
- 85% of respondents had been registered with the Practice for more than 5 years.
- 47% of respondents were over 65, this percentage will obviously increase over the coming years. This 47% represented the on-line survey only.
- 4.2 As mentioned above, 117 completed the additional survey giving more detailed comments but no other information. Their comments have been included, verbatim, in Appendix 2 and need to be read carefully to understand just how distressed some Patients are with the impending cuts to services. Detailed comments from the on-line survey have also been included in Appendix 2.

5. Conclusion

The majority of Patients feel badly let down. They have stated that they believed that the new St Luke's Practice was to be as advertised – a "Primary Care Centre" providing much needed services at a local level.

All respondents, on both surveys, have stated their concerns that the General Hospital will not be able to cope with increasing demand. Car Parking is difficult and car parking costs are expensive. A blood test, for example, can take a few minutes but charges are based on a minimum of 3 hours. Patients have expressed their concern and anxiety of having to travel the distance to NGH both in terms of cost, time, and the anguish of possibly having to do so unaided when they are in a poor state of mobility.

It should be remembered that this strength of feeling has been shown by a relatively small sample of Patients at one Practice only. Multiply this feeling by the total number of Patients in one Practice and then again by the total number of GP Practices across the Town and this will demonstrate how reverting to a centralised facility which is already currently overstretched, will lead to the general public feeling very distressed and angry.

6. Moving forward

- 6.1 This initial consultation has shown that the proposed budget cuts will have a significant effect on Patient well being, causing stress and anxiety to the more vulnerable Patients within the Practice.
- 6.2 This report and findings will be published on the PPG website to enable Patients to understand that they have been listened to. The PPG would like to record on the website, their thanks to all those who took part in the survey and their commitment to continue to be a link to the Practice.
- 6.3 This report and findings should be brought to the attention of NHS England and Nene Commissioning to allow them to appreciate the impact of budget cuts.
- 6.4 Our local MP, David Mackintosh, has offered his support and is welcomed by the PPG. He had been previously advised that a Consultation was in process and we are now in the position of giving him evidence of Patient feelings and opinions. This full report and analysis will now be forwarded to both David Mackintosh (MP for Northampton South) and Andrea Leadsom (MP for South Northants) as her constituency covers St Crispin and Upton. We will ask for their continued support and for advice on how the campaign can be moved forward.

Moira Chapman

Moira Chapman Chairman – St Luke's PPG

Appendix:

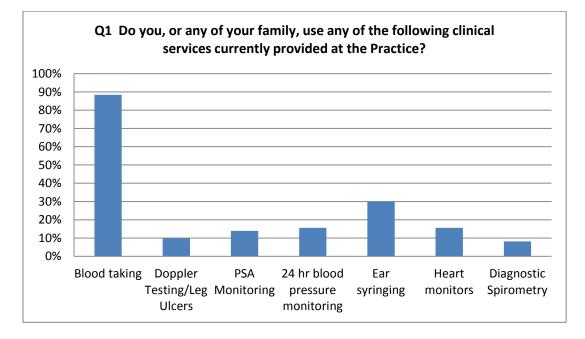
- 1. Results and analysis of the on-line survey.
- 2. Detailed comments from Patients regarding the proposed cuts

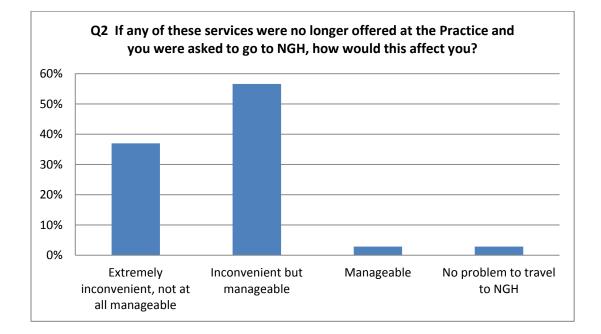
Appendix 1 - St Luke's Primary Care Centre – Patient Participation Group Consultation

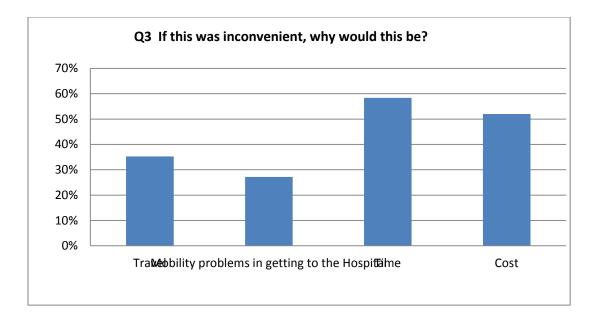
Results of survey carried out in December 2015

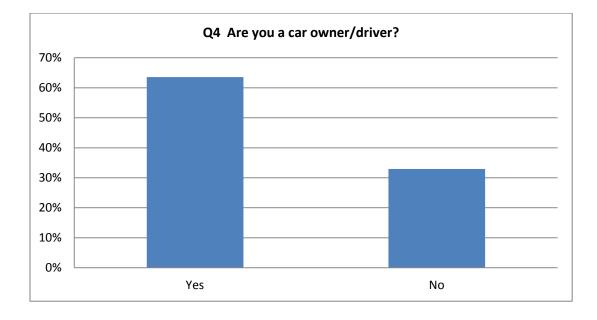
The following charts show the results from the on-line/tick box survey. 173 responses were recorded:

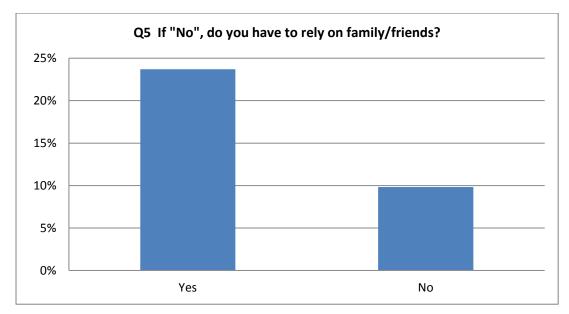
- 73 from on-line completion
- a further 100 from survey forms completed at the Practice with the help of PPG members talking to Patients face to face.

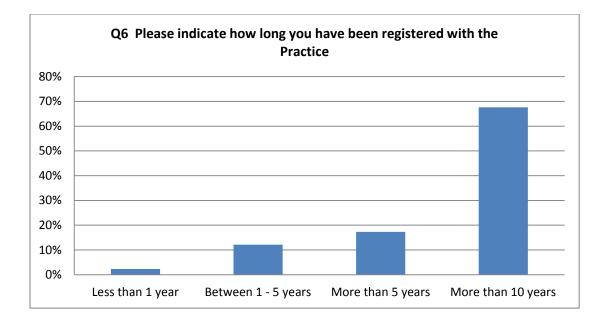


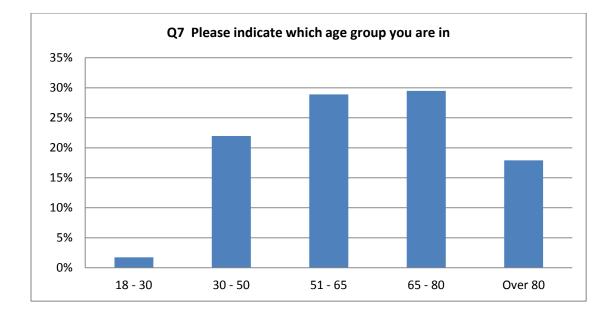












ST LUKE'S PPG Survey Results - January 2016			
Number of respondents: 173			
	Totals	Totals as %	
Q1 Do you or any of your family, use any of the following clinical services			
currently provided at the Practice?			
Blood taking	153	88%	
Doppler Testing/Leg Ulcers	17	10%	
PSA Monitoring	24	14%	
24 hr blood pressure monitoring	27	16%	
Ear syringing	52	30%	
Heart monitors	27	16%	
Diagnostic Spirometry	14	8%	
Q2 If any of these services were no longer offered at the Practice			
and you			
were asked to go to NGH, how would this affect you?			
Extremely inconvenient, not at all manageable	64	37%	
Inconvenient but manageable	98	57%	
Manageable	5	3%	
No problem to travel to NGH	5	3%	
Q3 If this was inconvenient, why would this be?			
Travel	61	35%	
Mobility problems in getting to the Hospital	47	27%	
Time	101	58%	
Cost	90	52%	
Q4 Are you a car owner/driver?			
Yes	110	64%	
No	57	33%	
Q5 If "No", do you have to rely on family/friends for transport?			
Yes	41	24%	
No	17	10%	
Q6 Please indic ate how long you have been registered with the			
Practice			
Less than 1 year	4	2%	
Between 1 - 5 years	21	12%	
More than 5 years	30	17%	
More than 10 years	117	68%	
Q7 Please indicate which age group you are in			
18 - 30	3	2%	
30 - 50	38	22%	
51 - 65	50	29%	
65 - 80	51	29%	
Over 80	31	18%	

Appendix 2

St Luke's Primary Care Centre

PPG Consultation Exercise – No 2 Survey – Qualitative Responses

Respondent	Stay local?	Comments
1	Yes	Mobility problems and no transport would cause great stress and inconvenience.
2	Yes	Work purposes. Traffic congestion around the hospital. Costs.
3	Yes	Because it is convenient and I do not want to travel far and pay parking charges.
4	Yes	Many people are old and it's needed loc ally.
5	Yes	Parking at hospital is impossible.
6	Yes	It's easy for elderly people to do – close to where they live.
7	Yes	Because we get the best care locally and not all patients are ambulant enough to travel 3.5 miles to NGH!!!
8	Yes	Cost and time.
9	Yes	Cost and time.
10	Yes	Services should stay local – it costs to use hospital car park etc. The NHS should be properly funded NOT cut.
11	Yes	Links with local GPs enable them to see the whole picture and enable them to see patients quickly and efficiently. Diluting the service will lead to inefficiency.
12	Yes	Travelling elsewhere would be difficult with patients who have poor mobility or transport difficulty.
13	Yes	Easy access to St Luke's PCC. Parking at NGH is a nightmare.
14	Yes	No further comments made.
15	Yes	Hospital's already under pressure – why add to their misery.
16	Yes	More convenient
17	Yes	Because I live very local and parking at NGH is practically impossible.
18	Yes	Inconvenience and problems parking at the hospital.
19	Yes	What happened to care closer to home. Isn't this about trying to avoid hospital admissions?
20	Yes	The hospital is a long way from the Bus Station.
21	Yes	Services like these should continue to be available locally and the necessary funding should be provided. It is the best and cheapest all round arrangement – saving time and expense travelling to a hospital.
22	Yes	It's convenient. Also parking at NGH is impossible. Only takes a few mins locally – would take hours going to NGH. The new surgery was purpose built. More of a strain put on NGH which isn't coping now with number of patients.
23	Yes	Parking very difficult at hospital and expensive – that's if you drive. Lots of people don't drive and would be bus journey.
24	Yes	If NGH does all Northants blood tests, it will be awful. If you abandon these services will "PPG" become a misnomer?
25	Yes	No further comment made.
26	Yes	Takes too much time and money to get to NGH.
27	Yes	Close, no car.
28	Yes	I only live 10 mins away from St Luke's. Keep it local. NGH is under pressure now !!
29	Yes	Transport would be a big problem.
30	Yes	I have no transport and would have to go by public transport which would be very difficult.
31	Yes	As I mature in age accessibility would be much easier.
32	Yes	Parking at NGH is a pain. Would rather walk 3 miles than use car. Surgery is local.
33	Yes	Because it is impossible to park, and as pensioners the roads are too busy around the hospital and there is no direct bus route.

34	Yes	Because local old people need this service and the government is moving the problem to the
		hospital instead of curing it.
35	Yes	Convenience to fit in apps during working hours and to have the service locally.
36	Yes	No further comments made.
37	Yes	My wife and I have travelling difficulties in travelling to hospital.
38	Yes	Better to have local services.
39	Yes	Ask the Government to stop foreign aid and give it to NHS England.
40	Yes	It is important for the Community. Many people don't access services even at a local level.
		If they have to go to NGH more people will be unable to access them. NGH can't/won't
		cope now.
41	Yes	No further comment made.
42	Yes	He likes it.
43	Yes	Finds it difficult to get to NGH as it's costly with parking and have mobility issues for walking.
44	Yes	I think the services should stay as the old and vulnerable would struggle if they had to make
		repeated trips to the hospital and it would put people off going.
45	Yes	Because I'm elderly and find it difficult to get about some times.
46	Yes	This affects me! I live and work locally so I can be in and out within 30 mins. If you move
		this service to NGH it will probably take 2 hrs plus. Also I think of the old and invalid who do
		not have family to take them for appointments and cannot afford taxis.
47	Yes	Younger working people haven't time to wait at hospital and they are struggling at the
		General as it is. For retired and elderly people, travelling by bus is problematic and if by car
		the parking at the hospital is extremely difficult even for the doctors!
48	Yes	It is convenient to use local surgery.
49	Yes	I want the services to stay the same.
50	Yes	It is essential that these services are kept locally.
51	Yes	Because local services are essential.
52	Yes	Being 83 years of age, travelling to NGH would be difficult and a chore. I would probably not
		bother and so not receive treatment.
53	Yes	Funds need to be provided for this.
54	Yes	Easy parking at surgery.
55	Yes	I have ASD and don't want to go to a hospital.
56	Yes	Because it makes sense to keep it local.
57	Yes	Convenience and cheaper for me.
58	Yes	No further comment made.
59	Yes	Huge inconvenience to go to NGH – surgery does not provide good enough GP availability as
~~~		is.
60	Yes	St Lukes was built with providing these services in mind. Duston has a mix of old people and
		young families for whom it would be difficult to go to hospital. Parking is near impossible
		and it is stupid to expect all services to cope at NGH. Like sending all traffic down a one-way
61	Yes	street. Because I don't travel well. It's easier to get to doctors than hospital. Increased waiting
01	165	times at hospital if everyone has to go there.
62	Yes	Not always able to travel.
63	Yes	Not always able to travel.
64	Yes	Not being very mobile, the travel would be difficult. Also NGH has expensive car parking a
04	163	long way from the actual clinics.
65	Yes	The hospital is already over stretched and would they be able to cope with many more
00	103	minor services? We think these services should be dealt with locally for the local
		community. If our local surgery had not done by PSA test, my prostate cancer might not
		have been found as I might not have bothered to go to NGH as I had no symptoms.
66	Yes	It is more convenient for everyone especially the elderly.
67	Yes	Parking at the hospital very difficult.
68	Yes	Convenience – better service.
69	Yes	People need loc al services. Not have to go on long waiting list and travel.

70	Yes	I need blood tests regularly. It's 10 min walk to my surgery and back home. To hospital it
74		needs 2 buses and takes 1.75 – 2 hrs round trip + waiting time in hospital.
71	Yes	No further comment made.
72	No	No further comment made.
73	Yes	Because the local General Hospital is already overcrowded because of increase in population and the elderly. St Luke's has large capacity which should be properly used and funded avoiding pressure on NGH.
74	Yes	It is much more convenient for parking and the time taken.
75	Yes	Pensioner and ageing people need to be seen locally.
76	Yes	Convenience of locality and the hospital parking fees.
77	Yes	Local hospital nightmare. Pay and parking facilities. Not suitable for aged people or carers.
78	Yes	No further comment made.
79	Yes	Makes use of the extensive facility (St Luke's). Convenience. Hospital cannot provide
75	105	enough parking.
80	Yes	I have to have a blood test each month. It takes me 5 mins. If I go to hospital it will take
		much more time, unable to find parking space in car parks.
81	Yes	No further comment made.
82	Yes	Not only I am disabled with diabetes and other problems but have to rely on my daughter
		which isn't always convenient, or other services for transportation. It is hard for me at 89 to
		get to the surgery but just doing that makes me very very tired and painful. Please let things
		stay as they are.
83	Yes	Getting to and expensive parking is a downside and you have to wait so long for an appointment at the hospital.
84	Yes	Elderly patients are not always able to travel to hospital to have blood tests and could
		suffer.
85	Yes	The St Lukes offer a very good and personal service. A visit to the Hospital Eye dept took
		ages and taxi cost me £20 one visit and £10 for another. Please keep services local.
86	Yes	I have no transport so it would be costly and inconvenient to travel to NGH.
87	Yes	The elderly and disabled would be required to travel to other provisions. Local service
		would lessen the load on the hospital. We have a new, comprehensive, 3-storey health
		facility, why not use it to the full.
88	Yes	Too far for pensioners to travel to the hospital without transport.
89	Yes	No further comment made.
90	Yes	Elderly and others would find it difficult to get to the hospital and it would cause problems at the hospital in terms of parking there.
91	Yes	Difficult to park car at the hospital – already overfull without extra visitors.
92	Yes	Because it is a lot closer to home – so won't have to travel so far. May have to wait longer
		for an appointment at the hospital.
93	Yes	My wife – diabetic and bed bound due to MS. Myself – aged 89, limited mobility.
94	Yes	More convenient and time saving for all patients especially elderly when having blood tests
		and minor procedures. General Hospital parking is atrocious.
95	Yes	This would put more pressure on the hospital.
96	Yes	St Lukes is easy to get to. No parking problems and waiting time is less.
97	Yes	As I am an elderly patient, I may find it difficult to keep travelling to NGH.
98	Yes	It isn't easy for everyone to travel to NGH. It would also put more pressure on our hospital.
99	Yes	Blood tests – I need one every 4 weeks.
100	Yes	Definitely. Many medical problems. Not convenient to go to hospital. Blood testing and BP,
		heart monitoring. Diabetic and had a massive heart attack. Need bloods done all the time.
101	Yes	Why change what works for everyone?
102	Yes	I have an autistic son so this would make it much harder for me to get there. Also I cannot drive there so would need transport.
103	Yes	This is very inconveniencing especially for families don't drive and means children missing
	103	This is very meetivementing especially for families don't drive and means children missing
105		time in school for longer as being local it is easily done and return to local school.

104	Yes	I am told ear syringing will take place at Grange Park which is even more inconvenient that NGH.
105	Yes	Myself and many others at the Retirement Village would find it costly and difficult to get to hospital, where friends find it difficult to park and the taxi fare is £20.
106	Yes	I have quite a few things wrong that need regular checks and it would be so expensive having to get to and from hospital. I have a lot wrong and I find regular checks with local doctor reassuring and easier to visit than hospital would be. Many people are unable to do what we used to including walking and hospitals are a long walk.
107	Yes	Although I still drive, parking at the hospital is nearly impossible, unless you park in the spaces a long way off. I am disabled and cannot walk, so it is not possible to walk any distance and the trolley transport provided by the hospital only takes place from the front entrance where parking is not usually available.
108	Yes	I already have to pay for a taxi to the surgery and back. If I should need an appointment when my family are at work and I have to go to NGH. This involves me getting a taxi and proves expensive for pensioners. I do hope you will be able to re-think these proposals.
109	Yes	My wife needs monthly blood tests and this will be extremely inconvenient due to parking problems at the hospital.
110	Yes	I was in tears when I saw the possibility of these services being moved to the hospital. Because of my age, I have a named doctor. Was this just to tick a box for the NHS? I can never see my doctor.
111	Yes	Why the backward step? The government were supposed to be taking pressure from the hospitals by directing some services to doctors, health centres and I am sure all patients have appreciated the convenience of these moves. Can the hospitals cope with the increased levels of outpatients requiring these services and how will these affect waiting lists?
112	Yes	<ul> <li>Having a car does not mean we are mobile. Parking is not only difficult at NGH but the problems are: <ol> <li>Walking to department from car park.</li> <li>Never enough disabled spaces at NGH</li> <li>Cannot park the car at entrance of NGH in order to offload disabled passenger, find a wheelchair-trolley as park the person whilst one takes .5 hour + finding a parking space.</li> <li>The volunteer trolley staff finish at noon.</li> <li>By the time got disabled person to the car, the parking ticket has expired.</li> <li>In particular, the arthritis and blood depts. Are long walks from NGH entrance.</li> </ol> </li> </ul>
		What about all the promises of additional medical services when the St Lukes was being built?
113	Yes	I would wish that clerical services remain at the Practice and would recommend that a small fee be charged to each individual towards the cost of keeping them in-house. This would be far better than having to make your way to the hospital and joining an ever growing queue and also major car parking problems. I have travelled the world and when I have had to call upon medical services I have always been handed an invoice for this.
114	Yes	You can't park when you get to hospital. Have to walk up from Morrisons. Came for a flu jab and noticed 80 patients had missed appointments that week. CHARGE THEM!!
115	Yes	The NHS since its commencement progressed to provide the greatest service in terms of healthcare this country has ever had and indeed worldwide. The financial cuts have already begun to erode the high standards of care and its recipients are the ones who will suffer and is already suffering the impact. That is me and all the other patients. It is becoming more difficult to obtain appointments with doctors and their staff. Consultation time of 10 min slots is restrictive and insufficient in some cases to obtain a full and complete history of the patient's illness. It can feel like a conveyor belt care. Hospitals were over run, over pressurised, long waits in queues. Inadequate and costly parking fees. The joy of many services being transferred to the local GP surgery was a welcome change. It brought with it easy access, speed and efficiency. A friendly and personal service allaying fears and anxiety.

		No parking issues. A godsend for the immobile. Now all that has been achieved is going to
		return to "square one". This is a retrograde step and one that may impact the health of the
		nation. More money should be invested in GP centres and not less, to provide better and
		more localised services to promote the health of the nation.
116	Yes	Personally, I could not travel, I use the surgery a lot and they are a great service.
117	Yes	I was under the impression that the idea of primary care centres was to take pressure off
		the incredibly busy hospital. The removal of local services would put the hospital under
		more pressure.
The follow	ving comn	nents were extracted from the on-line survey
1		The surgery offers a fantastic services to he local community without the services currently
		offered not only would this impact patients but on the already extremely over subscribed
		hospital.
2		I would like services to remain local not just for me but for all our older patients and young
		families where travel could be more difficult.
3		Parking at the hospital is a big problem if we have to go there when services are cut. For
		fellow patients who do not have a car, the journey to NGH involves using two buses, cost
		and time will affect people greatly.
4		Services are becoming poorer all the time, particularly support for diabetics. Very concerned
		for my long term health. Surely any further cuts will render our surgery ineffectual. very very
		worried
5		Services need to stay local so that everyone can access them. This also means we can get
		quicker access.
6		Travelling to the hospital is currently manageable as my husband will drive me but should
		that change whilst I am waiting for surgery to my hip and knee would be extremely difficult.
7		This will cause major problems for many patients, particularly the elderly, disabled people
		and those with families. Service take up by patients could possibly suffer because of the cost
		and inconvenience and the Hospital could be overwhelmed with extra demands if this is
		rolled out through the town. We have an advanced economy and health cuts are not
		acceptable especially while banks get bailed out to the tune of hundreds of £billions.
8		Assume if I had to go to NGH for any of the above clinics, this would be without an
		appointment and so the waiting time could hours. The whole purpose of the expanded new
		building in Timken Way, was to be able to provide first line care & minor procedures in order
		to relief the stress on the NGH, which can barely cope now.
9		Northampton General is so overstretched it seems ridiculous that there is even a thought of
		taking these services away from St Luke's and the level of care will certainly diminish if
		moved. Surely moving them to Northampton General is not saving money its moving the
		issue somewhere else and adding more pressure to what is already an overstretched
		Northampton General Hospital. So many people in the community rely on these services,
		the vicinity of St Luke's to where they live and the ease of access is priceless. Don't take it
10		away. The new premises/facilities and high levels of staffing have obviously been very costly to the
10		detriment of service to patients,
11		I am also carer to my 89 year old mother who is unable to walk unaided very far. Her
11		mobility is very poor and for the most part has to be in a wheelchair for hospital visits. Due
		to the vastness of the site at NGH and the dire parking problems, I have to try to enlist the
		help of a third person to accompany us on any visits there. NGH is already under
		considerable pressure and appointment waiting times do seem excessive. By making these
		cutbacks to local practices will only exacerbate the problems for NGH.
12		Why put pressure on the hospital when a local centre can easily continue to deal with these
16		services? Cut the PCC or scandalous council spending but not essential services!
13		Registered disabled M.O.D (War Veterans Agency) Wheel chair user big problems car
10		parking navigating the sprawl of N.G.H
14		Parking at ngh is horrible and waiting time is unbelievable up to a couple of hours
17		sometimes.
		NOTIFITIES.

16	I live within minutes of the practice and therefore it is very inconvenient to have to go to
	NGH for blood tests and ear syringing, such quick in and out services after all. I sincerely
	hope this decision is reversed as it is nothing short of ridiculous.
17	Cannot understand the logic of sending more patients to hospital for routine procedures when it is already under so much pressure. Surely this is the role of a GP surgery.
18	The hospital would struggle to cope with such a large influx of patients coming for simple tests.
19	I think this should continue with a patient who has regular blood test. I can understand if it's
15	a one off to go to the hospital but I would find me asking for a monthly check rather than
	every two weeks also would the doctors still monitor results?
20	Unfortunately I have two problems one of which is dealt with by Northampton General and the John Radcliffe and the other at Kettering General it would be extremely difficult for me to keep travelling to the different hospitals as I have monthly blood tests (sometimes fortnightly) and may require further heart monitoring depending on how I progress. Recently I could not drive for over a week and this could happen more in the future. Also the time and cost involved would be very difficult for me as I get very tired travelling and live on a very limited budget. Recently I have had to spend £130 getting to and from a hospital appointment when I could not drive.
21	It is now ridiculous where blood taking dept is situated And you can expect a long, long, long wait on uncomfortable seats My mobility is very poor and there are only 2/3 disabled bays close to blood dept. otherwise you're in for a long walk from car parks which I cannot do It's just not right
22	I am disgusted to have seen the proposed removal of numerous services from St Lukes. The funding for a number of services to my local practice are being withdrawn without any consultation of the patients, the local community, and or consumers of those services. I have no option to withdraw my contributions to the wider NHS, and so by whom and why have these decisions been made? Is the NHS or Nene commissioning seeking to add to their revenues through the excessive parking charges levied at or around the General or are they just seeking to inconvenience me and waste my time sitting around in one of their unmanaged queues?
23	Since the move to the new building the practice has gone down hill. There appears to be no continuity. I haven't got a clue who my doctor is and because of telephone appointments would probably never see him. At the moment fortunately I am in reasonable health but dread what would happen when this is not the case. Why the need and expense of the new building when it appears the practice is doing less not more to ease the pressure on the hospitals?
24	It appears to be be an extremely retrograde proposal which will cause many people significant inconvenience. It will result in many additional journeys putting pressure on transport systems and NGH.
25	I have to have blood tests in respect of my diabetes, I work in Duston so having to travel to use NGH would take me out of work a lot longer than being able to use the surgery.
26	Because of my medical condition, which is life long and there is no cure, it can be dangerous for me to be in amongst large groups of people.
27	This is a disgrace. Why does this government give away £12 billion per year in foreign aid at the expense of providing basic services for it's own people, most of whom have paid for it after a lifetime at work.
28	I work out of town, leaving at 7 and returning at 6, hospital departments are closed, therefore couldn't manage to attend them.
29	Humm where do I start. Bigger is def not better. Lots of things need to be looked at and improved
30	I as a tax payer expect a proper service from a Dr's surgery. At least the basics. Why on earth does the NHS think this is acceptable? Our town has been growing at an alarming rate for years now. It becomes all too apparent when you go into the hospital and see there are too many people for the facilities on offer. Wake up and smell the coffee. Keep things local to give patients choices and easy accessibility. It takes a great effort to go to the hospital. I was

	a carer for my father and later my mother. Getting them to appointments was always a stressful time as well as a lengthy process, and a financial cost and worry (especially when there appointments overran). Please do not allow these services to be taken away.
31	The surgery offers a fantastic services to he local community without the services currently offered not only would this impact patients but on the already extremely over subscribed hospital.
32	My elderly mother would find the cuts to services very difficult because she has mobility problems. What is the point of a nurse or doctor checking ears for hearing difficulty and identifying wax blocked ears and then being told they are not allowed to syringe them but do put eardrops in? I have been waiting for 4 weeks for further direction whilst experiencing very reduced hearing and some unbalance. This is unsafe and unacceptable practice.
33	Already moving from Berrywood Road has made things difficult. Moving to NGH would be a lot worse.
34	Since Dr. Astbury left I haven't a clue who my doctor is and find it extremely difficult getting an appointment. Cuts are the last thing this far too large surgery needs.