

Community diagnostic hubs engagement

Report of findings

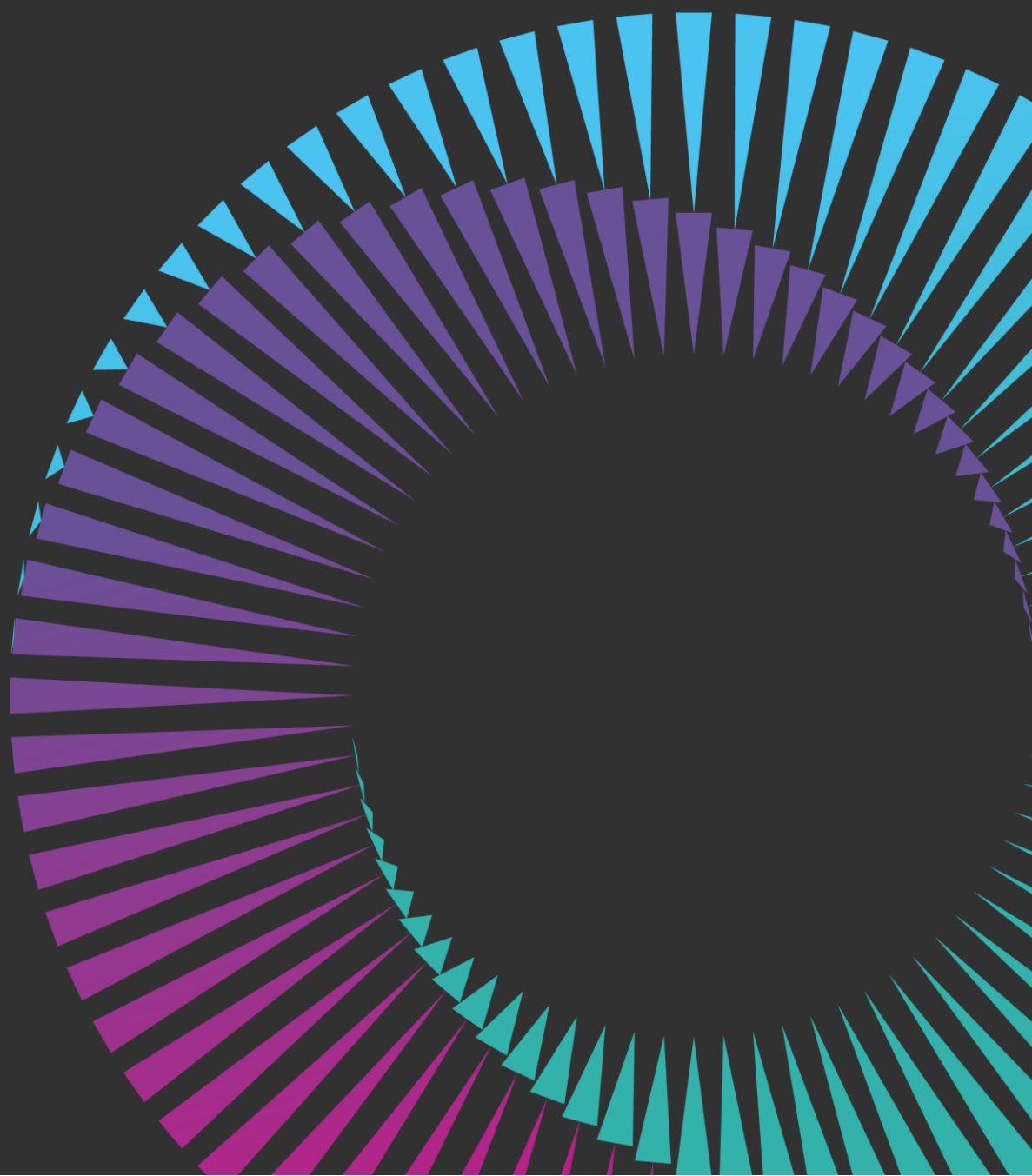


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1 Executive summary

1.1 Introduction

The Integrated Care System (ICS) for Staffordshire and Stoke-on-Trent, Together We're Better, is exploring ways to change the delivery of diagnostic services by creating Community Diagnostic Hubs (CDHs). At the moment, most of these tests are done in hospitals, but it is now recommended that NHS organisations across England move to providing these in Community Diagnostic Hubs. This will allow patients to get the tests they need nearer to home.

The plans are at a very early stage, so the feedback was gathered from stakeholders to help shape how these services could look. The engagement aimed to understand how people currently access these services, what they think about the plans, and what else stakeholders would like to see provided in Community Diagnostic Hubs.

1.2 Numbers of respondents

Feedback was gathered via an online survey that was live between 26 July 2021 and 23 August 2021 and received 148 responses.

1.3 Findings

1.3.1 Current use of services

13 (17%) respondents were currently accessing diagnostic services and 41 (31%) respondents had accessed the services in the past six months.

When asked where they were accessing the services, the top locations highlighted by respondents were:

- Royal Stoke University Hospital (22 / 28%)
- Local GP (21 / 27%)
- County Hospital, Stafford (12 / 15%)

Respondents currently accessing the services were asked what diagnostic services they were using. Blood testing was the most used service, with 21 (91%) respondents currently using this service.

1.3.2 Patient experiences of diagnostic services

Respondents were asked: *Please list any barriers you face which prevent you attending your appointments for health services?*

The key themes overall were:

- Access – Concern over access to services (e.g. distance to travel, public transport, location) (33 / 46%)
- Access – Parking was an issue (e.g. lack of parking, high cost) (17 / 24%)

- General – There were no barriers (12 / 17%)

Respondents were asked: *Thinking about the diagnostic services you have accessed, please outline what you feel has worked well?*

The key themes overall were:

- Quality of care – Provided services were good (e.g. well organised) (34 / 41%)
- Access – Access to services was easy (e.g. close to home, adequate parking) (25 / 30%)
- Staff – Staff were professional and supportive (10 / 12%)

Respondents were asked: *Thinking about the diagnostic services you have accessed, please outline what could be improved?*

The key themes overall were:

- Access – Ensure services are accessible (e.g. close to home, good public transport) (26 / 32%)
- Access – Consider improving waiting time for services (e.g. shorter waiting time) (17 / 21%)
- Communication – Ensure timely sharing of tests results (e.g. share through NHS App) (11 / 13%)

1.3.3 Travelling to diagnostic appointments

Respondents were asked how far they would be willing to travel to a Community Diagnostic Hub, with 99 (75%) willing to travel over 5 miles and 33 (25%) respondents willing to travel less than 5 miles. 112 (85%) respondents would be willing to travel for up to 40 minutes.

1.3.4 Future service provision

Respondents were asked: *Please tell us what other services you think could be provided at Community Diagnostic Hubs?*

The key themes overall were:

- Service provision – Consider provision of imaging services (e.g. CT, MRI, X-ray) (22 / 20%)
- Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (17 / 15%)
- Service provision – Consider provision of women's health service (e.g. smears, mammograms, coil fitting, maternity checks, menopause tests) (17 / 15%)

Respondents were asked: *Please tell us your views on where Community Diagnostic Hubs could be provided?* The key themes overall were:

- Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (31 / 25%)
- Location should be accessible (e.g. close to home, good public transport) (26 / 21%)
- Consider community hospitals for a community diagnostic hub (22 / 18%)

NHS employee and organisational respondents were asked: *Please tell us about any opportunities these hubs present for health services in Staffordshire and Stoke-on-Trent.*

The key themes overall were:

- Access – Proposal will improve access to services in the community (e.g. rapid access, timely diagnosis) (8 / 73%)
- Quality of care – Proposal will improve patient's pathway and experience (3 / 27%)
- Staff – Proposal will support multidisciplinary working (2 / 18%)

NHS employee and organisational respondents were asked: *Please tell us about any risks these hubs present for health services in Staffordshire and Stoke-on-Trent.*

The key themes overall were:

- Integration – Concern over lack of integration between different services (e.g. results could be lost) (2 / 18%)
- General – There are no risks (2 / 18%)

NHS employee and organisational respondents were asked: *We are preparing a business case to secure funding. Please tell us about anything else you think our business case should include.*

The key themes overall were:

- Integration – Ensure appropriate integration and collaboration between different services and organisations (e.g. third sector) (3 / 30%)
- Communication – Ensure appropriate communication between all stakeholders (3 / 30%)
- Cost and efficiency – Consider how to make the service efficient (e.g. shorter waiting time, saving in preventing future hospitalisation) (2 / 20%)

2 Introduction

The Integrated Care System (ICS) for Staffordshire and Stoke-on-Trent, Together We're Better, is exploring ways to change the delivery of diagnostic services by creating Community Diagnostic Hubs (CDHs). At the moment, most of these tests are done in hospitals, but it is now recommended that NHS organisations across England move to providing these in Community Diagnostic Hubs. This will allow patients to get the tests they need nearer to home.

The plans are at a very early stage, so the feedback was gathered from stakeholders to help shape how these services could look. The engagement aimed to understand how people currently access these services, what they think about the plans, and what else stakeholders would like to see provided in Community Diagnostic Hubs.

2.1 Background

The provision of Community Diagnostic Hubs (CDHs) is a national requirement, and all health systems are expected to include a network of CDHs as part of their health services offer.

The Hubs will allow patients to access planned diagnostic care nearer to their home without the need to attend acute hospital sites. These services would also be separate from urgent diagnostic scans. This means patients would benefit from shorter waiting times and a reduced risk of cancellation due to more urgent cases taking priority – this would lead to improved patient experience and outcomes.

The Staffordshire and Stoke-on-Trent ICS is exploring ways to invest in the services currently provided to improve the way diagnostic services are delivered, where they are provided and how they are accessed.

CDHs would be an enhancement to the diagnostic services currently available. Subject to further, more detailed, public engagement, it is proposed to invest in two sites – the Sir Robert Peel Community Hospital in Tamworth and the Royal Stoke University Hospital. A third site could be in Cannock Chase.

The investment in these sites would improve the way services are provided for people with a range of conditions, including those with long COVID, breathlessness and valve disease symptoms.

The CDHs would provide the following diagnostic services:

- Imaging: CT, MRI, ultrasound and plain X-ray / DEXA (an imaging test to measure bone density)
- Physiological measurement: electrocardiogram (ECG), including 24-hour and longer tape recordings of heart rhythm, monitoring, ambulatory blood pressure monitoring, echocardiography (ECHO)
- Pathology: phlebotomy (blood testing).

2.2 Numbers of respondents

Feedback was gathered via an online survey that was live between 26 July 2021 and 23 August 2021 and received 148 responses.

2.3 Report authors

The Staffordshire and Stoke-on-Trent Integrated Care System (ICS) commissioned NHS Midlands and Lancashire Commissioning Support Unit's (MLCSU's) Communications and Engagement Service to host the engagement survey and coordinate the independent analysis of the feedback from the engagement and to produce this report.

2.4 Report structure

This report is structured into the following sections:

- Introduction
- Reporting methodology
- Demographic profiling
- Findings
- Conclusion
- Appendix.

3 Reporting methodology

3.1 Survey structure

Table 1 shows the questions asked in the survey and which respondents were asked these questions. The survey was routed so that respondents only saw the questions relevant to them, which were determined by their answers to the preceding questions.

Table 1. Survey questions

Question	Respondents asked these questions
Tell us about you – initial profiling questions	All respondents
Are you currently accessing diagnostic services or have you accessed diagnostic services in the last 6–12 months?	Patients, carers and NHS employees
Where have you accessed these services?	Patients, carers and NHS employees who have accessed the services
Which of the following diagnostic services do you currently access?	Patients, carers and NHS employees who have accessed the services
Which of the following diagnostic services have you previously accessed?	Patients, carers and NHS employees who have accessed the services
How do you typically travel to your diagnostic appointments?	Patients, carers and NHS employees who have accessed the services
Please list any barriers you face which prevent you attending your appointments for health services?	Patients, carers and NHS employees
Thinking about the diagnostic services you have accessed, please outline what you feel has worked well?	Patients, carers and NHS employees who have accessed the services
Thinking about the diagnostic services you have accessed, please outline what could be improved?	Patients, carers and NHS employees who have accessed the services
How far would you be willing to travel to a Community Diagnostic Hub?	Patients, carers and NHS employees
How long would you be willing to travel to a Community Diagnostic Hub?	Patients, carers and NHS employees
Are you aware of any barriers for people accessing diagnostic services? If yes, please tell us what they are.	NHS employees and organisational respondents
Tell us what was good about the diagnostic services accessed by patients in the last 18 months?	NHS employees and organisational respondents
Tell us what could be improved about the diagnostic services accessed by patients in the last 18 months?	NHS employees and organisational respondents
Please tell us what other services you think could be provided at CDHs.	All respondents
Please tell us your views on where Community Diagnostic Hubs could be provided.	All respondents
Please tell us about any opportunities these hubs present for health services in Staffordshire and Stoke-on-Trent.	NHS employees and organisational respondents
Please tell us about any risks these hubs present for health services in Staffordshire and Stoke-on-Trent.	NHS employees and organisational respondents
We are preparing a business case to secure funding. Please tell us about anything else you think our business case should include.	NHS employees and organisational respondents
Demographic profiling questions	All respondents

The survey also asked NHS organisations: *Tell us about your clinical pathways for the three service areas we have identified as priority areas to be supported by the proposed Community Diagnostic Hubs (CDHs): long COVID, breathlessness and valve disease symptoms.* However, no responses were received for this question.

3.2 Approach to analysis

The survey used a combination of open free text questions for respondents to make written comments, and closed questions where respondents ticked their response from a set of pre-set responses.

Open free text question responses are read, and the key themes or codes identified. The themes are used to create a code frame. All open free text question responses are then read and coded against this code frame. If new themes are identified, the code frame is updated to reflect these. Responses may have multiple codes assigned to them depending on the number of themes raised. A code frame has been developed for every open free text question in the survey.

3.3 Presentation of findings

Closed question responses are shown as percentages. These may not add up to 100% due to rounding or respondents being able to select multiple options. The base figure refers to how many respondents answered the question.

The findings section breaks down the survey questions by the following variables:

- Service usage: this has been identified using the question: 'Are you currently accessing diagnostic services or have you accessed diagnostic services in the last 6–12 months?'
- CCG area: this has been profiled using respondent postcodes.

For some questions, the variables are not shown or only CCG area is shown. This is because:

- Some questions were only asked of specific groups within the survey
- There were limited responses to the questions.

4 Respondent profiling

This section presents a profile of those completing the survey.

4.1 Overview of respondents

Table 2 shows that 137 (96%) of survey respondents were responding as individuals.

Table 2. Are you responding as:

	No.	%
An individual	137	96%
A formal response from an organisation	5	4%
Base	142	

Table 3 shows that of those responding as an individual, 120 (88%) respondents were patients or members of the public.

Table 3. As an individual responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Patient or member of the public	120	88%
NHS employee	10	7%
Carer	2	1%
From another public sector organisation	2	1%
From a health-related group, charity or organisation	2	1%
From a non-health voluntary group, charity or organisation	1	1%
Base	137	

Table 4 shows that 3 (60%) formal organisational respondents were on behalf of a health-related group, charity or organisation.

Table 4. As an organisation responding to this questionnaire which of the following best applies to you? Please tick one only.

	No.	%
Formal response on behalf of a health-related group, charity or organisation	3	60%
Formal response on behalf of another public sector organisation	1	20%
Formal response on behalf of a non-health related voluntary group, charity or organisation	1	20%
Formal response on behalf of an NHS organisation	-	-
Other	-	-
Base	5	

The organisations that responded to the survey were:

- Starfish Services Ltd
- Burton Upon Trent and District YMCA
- Diabetes Hednesford and Diabetes Rugeley
- Borderland Voices
- Stone Town Council.

4.2 Demographic profiling

Table 5 presents a demographic profile of respondents.

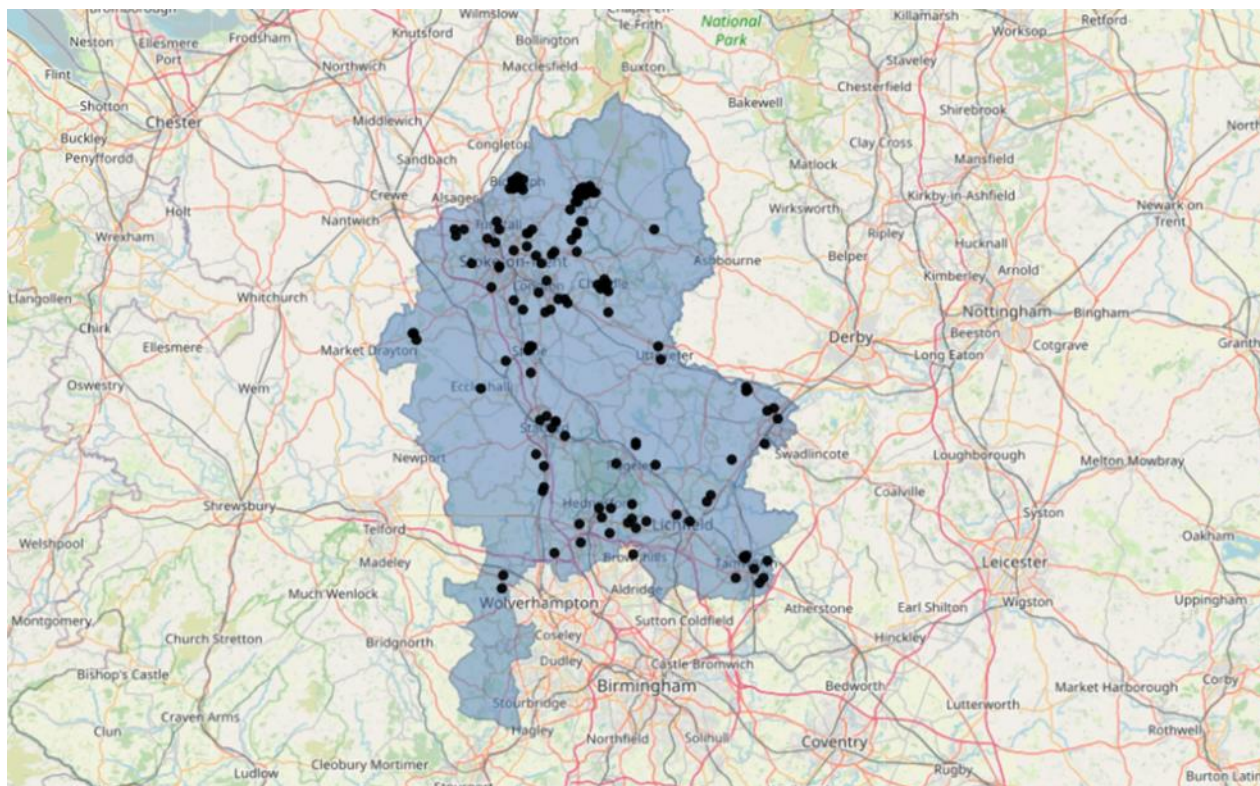
Table 5. Demographic profile

Ethnicity			Sexual orientation		
White: British	141	97%	Heterosexual	124	87%
White: Irish	1	1%	Gay	5	4%
Asian/Asian British: Indian	1	1%	Bisexual	2	1%
White: Gypsy or traveller	-	-	Lesbian	-	-
White: Other	-	-	Other	-	-
Mixed: White and Black Caribbean	-	-	Prefer not to say	11	8%
Mixed: White and Black African	-	-	Base	142	
Mixed: White and Asian	-	-	Relationship status		
Mixed: Other	-	-	Married	91	63%
Asian/Asian British: Pakistani	-	-	Single	14	10%
Asian/Asian British: Bangladeshi	-	-	Divorced	11	8%
Asian/Asian British: Chinese	-	-	Widowed	11	8%
Asian/Asian British: Other	-	-	Lives with partner	10	7%
Black/Black British: African	-	-	Civil Partnership	1	1%
Black/Black British: Caribbean	-	-	Separated	-	-
Black/Black British: Other	-	-	Other	-	-
Other ethnic group: Arab	-	-	Prefer not to say	6	4%
Any other ethnic group	-	-	Base	144	
Prefer not to say	3	2%			
Base	146		Pregnant currently		
Age category			Yes	1	1%
16–19	-	-	No	133	97%
20–24	1	1%	Prefer not to say	3	2%
25–29	4	3%	Base	137	
30–34	2	1%	Recently given birth		
35–39	3	2%	Yes	-	-
40–44	9	6%	No	134	98%
45–49	8	6%	Prefer not to say	3	2%
50–54	13	9%	Base	137	
55–59	8	6%	Health problem or disability		
60–64	27	19%	Yes, limited a lot	18	13%
65–69	18	12%	Yes, limited a little	43	31%
70–74	18	12%	No	78	56%
75–79	27	19%	Base	139	
80 and over	5	3%	Disability		
Prefer not to say	2	1%	No disability	90	64%
Base	145		Physical disability	22	16%
Religion			Long term illness	20	14%
Christian	89	62%	Mental health need	10	7%
No religion	43	30%	Sensory disability	9	6%
Buddhist	-	-	Learning disability	1	1%
Hindu	-	-	Other	3	2%
Jewish	-	-	Prefer not to say	5	4%
Muslim	-	-	Base	141	
Sikh	-	-	Carer		
Any other religion	3	2%	Yes – young person(s) aged under 24	11	8%
Prefer not to say	8	6%	Yes – adult(s) aged 25–49	4	3%
Base	143		Yes – person(s) aged over 50 years	17	12%
Sex			No	109	76%
Female	93	65%	Prefer not to say	4	3%
Male	48	33%	Base	143	
Intersex	-	-	Gender reassignment		
Prefer not to say	1	1%	Yes*	3	2%
Other	2	1%	No	120	93%
Base	144		Prefer not to say	6	5%
Armed services			Base	142	
Yes	3	2%	*Have you gone through any part of a process or do you intend to (including thoughts and actions) to bring your physical sex appearance and/or your gender role more in line with your gender identity? (This could include changing your name, your appearance and the way you dress, taking hormones or having gender confirming surgery)		
No	136	96%			
Prefer not to say	3	2%			
Base	142				

4.3 Mapping respondents and participants

Figure 1 shows a map respondent postcodes within Staffordshire and Stoke-on-Trent.

Figure 1. Map of respondent postcodes



4.4 Index of Multiple Deprivation (IMD)

Table 6 shows the IMD breakdown of respondent postcodes. The IMD is the official measure of relative deprivation for small areas in England, with the most deprived 10% of small areas categorised as ‘1’ while the least deprived 10% of small areas are described as ‘10’.

Table 6. IMD breakdown

IMD decile	No.	%
1	4	3%
2	3	2%
3	12	8%
4	15	10%
5	12	8%
6	20	14%
7	24	16%
8	20	14%
9	20	14%
10	13	9%
No postcode provided	4	3%
Postcode unable to be profiled	1	1%
Base	148	

5 Findings

This section presents the findings from the survey.

5.1 Current use of diagnostic services

This section presents the feedback from the following questions:

- Are you currently accessing diagnostic services or have you accessed diagnostic services in the last 6–12 months?
- Where have you accessed these services?
- Which of the following diagnostic services do you currently access?
- Which of the following diagnostic services have you previously accessed?
- How do you typically travel to your diagnostic appointments?

5.1.1 Service usage

Respondents were asked: *Are you currently accessing diagnostic services or have you accessed diagnostic services in the last 6–12 months?*

Table 7 shows that 13 (17%) respondents were currently accessing diagnostic services and 41 (31%) respondents had accessed the service in the past six months.

Table 7. Are you currently accessing diagnostic services or have you accessed diagnostic services in the last 6-12 months?

	Total		CCG area					
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent
Yes, currently accessing diagnostic services	23	17%	-	33%	21%	13%	16%	7%
Yes, in the past 6 months	41	31%	50%	13%	30%	25%	37%	53%
Yes, between 6 and 12 months ago	13	10%	17%	-	11%	6%	11%	7%
Yes, over 12 months ago	21	16%	-	20%	19%	19%	11%	13%
No, not accessed these services	34	26%	33%	33%	19%	38%	26%	20%
Base	132		6	15	57	16	19	15

When comparing by CCG area: A greater proportion of respondents from East Staffordshire (5 / 33%) were currently using the services, compared to those from Stoke-on-Trent (1 / 7%).

5.1.2 Service location

Respondents were asked: *Where have you accessed these services?* Overall, the top locations highlighted by respondents were:

- Royal Stoke University Hospital (22 / 28%)
- Local GP (21 / 27%)
- County Hospital, Stafford (12 / 15%)

Locations by CCG area

The top responses by CCG area were:

- **Cannock Chase CCG:** County Hospital, Stafford (2 / 50%)
- **East Staffordshire CCG:** Queen's Hospital, Burton (6 / 86%)
- **North Staffordshire CCG:** Royal Stoke University Hospital (16 / 43%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Local GP (5 / 63%)
- **Stafford and Surrounds CCG:** County Hospital, Stafford (7 / 58%)
- **Stoke-on-Trent CCG:** Royal Stoke University Hospital (4 / 36%)

Locations by service usage

The top responses by service usage were:

- **Current service user:** Local GP (5 / 28%)
- **Service user in last six months:** Royal Stoke University Hospital (10 / 31%)
- **Service user over six months ago:** Royal Stoke University Hospital (9 / 31%)

For a full list of themes, see Table 13 in the Appendix.

5.1.3 Services used

Respondents currently accessing the services were asked: *Which of the following diagnostic services do you currently access?*

Table 8 shows that blood testing was the most used service, with 21 (91%) respondents using this service.

Table 8. Which of the following diagnostic services do you currently access?

	Total		CCG area					
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent
Blood tests	21	91%	-	80%	92%	100%	100%	100%
CT, MRI, Ultrasound or X-rays	11	48%	-	40%	50%	100%	33%	-
Echocardiography, lung function and blood pressure*	9	39%	-	20%	50%	50%	33%	-
Endoscopy	5	22%	-	40%	17%	-	33%	-
Other	3	13%	-	-	8%	100%	-	-
Base	23		-	5	12	2	3	1

*Full answer code: Echocardiography (ECG) and rhythm monitoring, spirometry and some lung function tests, support for sleep studies, blood pressure monitoring, oximetry, blood gas analysis

Other services used by respondents were:

- Angiogram
- Mammogram
- DEXA.

When comparing by CCG area: No reportable differences

Respondents who had previously accessed the services were asked: *Which of the following diagnostic services have you previously accessed?*

Table 9 shows that blood testing was the most used service, with 81 (84%) respondents using this service.

Table 9. Which of the following diagnostic services do you currently access?

	Total		CCG area						Service usage	
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent	Last 6 months	Over 6 months ago
Blood tests	81	84%	75%	78%	91%	80%	79%	73%	83%	76%
CT, MRI, Ultrasound or X-rays	62	65%	25%	67%	67%	60%	71%	73%	63%	65%
Echocardiography, lung function and blood pressure*	29	30%	50%	22%	30%	40%	36%	18%	28%	18%
Endoscopy	19	20%	25%	33%	13%	40%	21%	18%	18%	15%
Other	9	9%	-	-	13%	20%	7%	-	8%	15%
Base	96		4	9	46	10	14	11	40	34

*Full answer code: Echocardiography (ECG) and rhythm monitoring, spirometry and some lung function tests, support for sleep studies, blood pressure monitoring, oximetry, blood gas analysis

Other services used by respondents were:

- Physiotherapy
- Hearing
- Podiatry
- Abdominal scan
- Renogram
- Orthopaedic assessment
- Fibre optic examination of bladder
- DEXA
- Colonoscopy.

When comparing by CCG area: No reportable differences

When comparing by service usage: No reportable differences

5.1.4 Travelling to appointments

Respondents were asked: *How do you typically travel to your diagnostic appointments?*

Table 10 shows that the most popular method was own transport with 76 (78%) respondents using this method.

Table 10. How do you typically travel to your diagnostic appointments?

	Total		CCG area						Service usage		
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent	Current service user	Last 6 months	Over 6 months ago
On foot/bicycle	12	12%	25%	30%	7%	-	15%	25%	9%	12%	15%
Own transport	76	78%	75%	90%	76%	100%	69%	67%	82%	80%	74%
Lift from friend or family	17	18%	-	10%	22%	10%	23%	17%	18%	15%	21%
Patient transport	-	-	-	-	-	-	-	-	-	-	-
Public transport	6	6%	-	-	9%	-	8%	8%	9%	7%	3%
Taxi or other private hire	3	3%	-	-	-	10%	-	17%	5%	5%	-
Other	1	1%	-	-	2%	-	-	-	-	2%	-
Base	97		4	10	46	10	13	12	22	41	34

When comparing by CCG area: No reportable differences

When comparing by service usage: No reportable differences

5.2 Patient experiences of diagnostic appointments

This section presents the feedback from the following questions:

- Please list any barriers you face which prevent you attending your appointments for health services?
- Thinking about the diagnostic services you have accessed, please outline what you feel has worked well?
- Thinking about the diagnostic services you have accessed, please outline what could be improved?

5.2.1 Barriers to attending appointments

Respondents were asked: *Please list any barriers you face which prevent you attending your appointments for health services?*

The key themes overall were:

- Access – Concern over access to services (e.g. distance to travel, public transport, location) (33 / 46%)
- Access – Parking was an issue (e.g. lack of parking, high cost) (17 / 24%)
- General – There were no barriers (12 / 17%)

Themes by CCG area

Top themes by CCG area were:

- **Cannock Chase CCG:** Limited feedback received
- **East Staffordshire CCG:** Access – Parking was an issue (e.g. lack of parking, high cost) (2 / 33%); Access – Concern over booking process of appointments (e.g. no choice over appointment time) (2 / 33%); Access – Concern over lack of availability of appointments (e.g. blood test) (2 / 33%)
- **North Staffordshire CCG:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (21 / 57%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (3 / 43%); Access – Parking was an issue (e.g. lack of parking, high cost) (3 / 43%)
- **Stafford and Surrounds CCG:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (2 / 25%); Access – Not being able to be accompanied by a carer/family member was challenging (2 / 25%)
- **Stoke-on-Trent CCG:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (4 / 40%)

Themes by service usage

Top themes by service usage were:

- **Current service user:** Access – Parking was an issue (e.g. lack of parking, high cost) (5 / 36%)
- **Service user in last six months:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (10 / 42%)
- **Service user over six months ago:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (14 / 56%)

- **Non-service user:** Access – Concern over access to services (e.g. distance to travel, public transport, location) (5 / 56%)

For a full list of themes, see Table 14 in the Appendix.

5.2.2 What went well

Respondents were asked: *Thinking about the diagnostic services you have accessed, please outline what you feel has worked well?*

The key themes overall were:

- Quality of care – Provided services were good (e.g. well organised) (34 / 41%)
- Access – Access to services was easy (e.g. close to home, adequate parking) (25 / 30%)
- Staff – Staff were professional and supportive (10 / 12%)

Themes by CCG area

Top themes by CCG area were:

- **Cannock Chase CCG:** Quality of care – Provided services were good (e.g. well organised) (2 / 100%)
- **East Staffordshire CCG:** Access – Access to services was easy (e.g. close to home, adequate parking) (4 / 50%)
- **North Staffordshire CCG:** Quality of care – Provided services were good (e.g. well organised) (20 / 50%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Quality of care – Provided services were good (e.g. well organised) (6 / 60%)
- **Stafford and Surrounds CCG:** Quality of care – Provided services were good (e.g. well organised) (3 / 33%); Access – Waiting time for services was short (3 / 33%)
- **Stoke-on-Trent CCG:** Access – Access to services was easy (e.g. close to home, adequate parking) (4 / 33%)

Themes by service usage

Top themes by service usage were:

- **Current service user:** Quality of care – Provided services were good (e.g. well organised) (12 / 67%)
- **Service user in last six months:** Quality of care – Provided services were good (e.g. well organised) (12 / 34%)
- **Service user over six months ago:** Access – Access to services was easy (e.g. close to home, adequate parking) (11 / 38%)

For a full list of themes, see Table 15 in the Appendix.

5.2.3 What could be improved

Respondents were asked: *Thinking about the diagnostic services you have accessed, please outline what could be improved?*

The key themes overall were:

- Access – Ensure services are accessible (e.g. close to home, good public transport) (26 / 32%)
- Access – Consider improving waiting time for services (e.g. shorter waiting time) (17 / 21%)
- Communication – Ensure timely sharing of test results (e.g. share through NHS App) (11 / 13%)

Themes by CCG area

Top themes by CCG area were:

- **Cannock Chase CCG:** Limited feedback received
- **East Staffordshire CCG:** Access – Consider improving waiting time for services (e.g. shorter waiting time) (4 / 44%)
- **North Staffordshire CCG:** Access – Ensure services are accessible (e.g. close to home, good public transport) (16 / 41%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Access – Ensure services are accessible (e.g. close to home, good public transport) (4 / 44%)
- **Stafford and Surrounds CCG:** Communication – Ensure timely sharing of test results (e.g. share through NHS App) (3 / 27%)
- **Stoke-on-Trent CCG:** Access - Consider improving waiting time for services (e.g. shorter waiting time) (2 / 20%); Communication - Ensure timely sharing of tests results (e.g. share through NHS App) (2 / 20%); Quality of care - Treat patients with dignity and respect (2 / 20%); Cost and efficiency - Ensure appointments run without delays (2 / 20%)

Themes by service usage

Top themes by service usage were:

- **Current service user:** Access – Ensure services are accessible (e.g. close to home, good public transport) (9 / 47%)
- **Service user in last six months:** Access – Ensure services are accessible (e.g. close to home, good public transport) (8 / 25%)
- **Service user over six months ago:** Access – Ensure services are accessible (e.g. close to home, good public transport) (9 / 29%)

For a full list of themes, see Table 16 in the Appendix.

5.3 Travelling to diagnostic appointments

This section presents the feedback from the following questions:

- How far would you be willing to travel to a Community Diagnostic Hub?
- How long would you be willing to travel to a Community Diagnostic Hub?

5.3.1 Travel distance

Respondents were asked: *How far would you be willing to travel to a Community Diagnostic Hub?*

Table 11 shows and 99 (75%) would be willing to travel over 5 miles and 33 (25%) respondents would be willing to travel less than 5 miles.

Table 11. How far would you be willing to travel to a Community Diagnostic Hub?

	Total		CCG area						Service usage			
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent	Current service user	Last 6 months	Over 6 months ago	Non-service user
Less than 1 mile	-	-	-	-	-	-	-	-	-	-	-	-
1–2 miles	17	13%	17%	-	14%	13%	16%	13%	9%	7%	18%	18%
3–4 miles	16	12%	17%	13%	12%	6%	11%	13%	13%	12%	15%	9%
5–6 miles	49	37%	33%	33%	44%	19%	26%	53%	39%	41%	41%	26%
7–8 miles	7	5%	-	13%	4%	6%	5%	-	4%	-	9%	9%
9–10 miles	32	24%	17%	27%	19%	50%	26%	20%	22%	27%	12%	35%
Over 10 miles	11	8%	17%	13%	7%	6%	16%	-	13%	12%	6%	3%
Base	132		6	15	57	16	19	16	23	41	34	34

When comparing by CCG area: No reportable differences

When comparing by service usage: No reportable differences.

5.3.2 Travel time

Respondents were asked: *How long would you be willing to travel to a Community Diagnostic Hub?*

Table 12 shows 112 (85%) respondents would be willing to travel up to 40 minutes.

Table 12. How do you typically travel to your diagnostic appointments?

	Total		CCG area						Service usage			
	No.	%	Cannock Chase	East Staffs	North Staffs	SES and Seisdon Peninsula	Stafford and Surrounds	Stoke-on-Trent	Current service user	Last 6 months	Over 6 months ago	Non-service user
0–20 mins	56	43%	33%	40%	51%	38%	32%	40%	43%	44%	45%	38%
21–40 mins	56	43%	33%	47%	33%	50%	47%	60%	35%	41%	45%	47%
41–60 mins	16	12%	33%	7%	16%	13%	11%	-	17%	15%	6%	12%
61–80 mins	3	2%	-	7%	-	-	11%	-	4%	-	3%	3%
81–100 mins	-	-	-	-	-	-	-	-	-	-	-	-
101–120 mins	-	-	-	-	-	-	-	-	-	-	-	-
120 mins +	-	-	-	-	-	-	-	-	-	-	-	-
Base	131		6	15	57	16	19	15	23	41	33	34

When comparing by CCG area: No reportable differences

When comparing by service usage: No reportable differences

5.4 Clinical experiences of diagnostic appointments

This section presents the feedback from the following questions:

- Are you aware of any barriers for people accessing diagnostic services?
- If yes, please tell us what they are.
- Tell us what was good about the diagnostic services accessed by patients in the last 18 months?
- Tell us what could be improved about the diagnostic services accessed by patients in the last 18 months?

5.4.1 Barriers

Respondents were asked: *Are you aware of any barriers for people accessing diagnostic services?* All 16 respondents indicated that they were aware of barriers.

The barriers highlighted by respondents were:

- Access – Concern over poor public transport (8 / 50%)
- Access – Concern over waiting time for diagnostic services and results (e.g. availability of slots, accessing GP for referrals) (6 / 38%)
- Parking – Concern over poor parking at venues (5 / 31%)

For a full list of themes, see Table 17 in the Appendix.

5.4.2 What was good

Respondents were asked: *Tell us what was good about the diagnostic services accessed by patients in the last 18 months?*

The key themes overall were:

- Access – Waiting time for diagnostic services was short (e.g. rapid access) (3 / 27%)
- Quality of care – Provided services were good (2 / 18%)
- COVID – Concern over limited provision of service due to COVID restrictions (2 / 18%)

For a full list of themes, see Table 18 in the Appendix.

5.4.3 What could be improved

Respondents were asked: *Tell us what could be improved about the diagnostic services accessed by patients in the last 18 months?*

The key themes overall were:

- Access – Consider improving waiting time for services (7 / 58%)
- Access – Consider improving access to services (e.g. close to home, accessible parking) (5 / 42%)
- Access – Consider extending operating hours of services (e.g. weekends) (2 / 17%)

For a full list of themes, see Table 19 in the Appendix.

5.5 Future service provision

This section presents the feedback from the following questions:

- Community Diagnostic Hubs (CDHs) can provide a range of health services. Please tell us what other services you think could be provided at CDHs?
- Please tell us your views on where Community Diagnostic Hubs could be provided? (These could be at hospital sites or at locations within the community.)
- Please tell us about any opportunities these hubs present for health services in Staffordshire and Stoke-on-Trent.
- Please tell us about any risks these hubs present for health services in Staffordshire and Stoke-on-Trent.
- We are preparing a business case to secure funding. Please tell us about anything else you think our business case should include.

5.5.1 Services at community diagnostic hubs

Respondents were asked: *Please tell us what other services you think could be provided at CDHs?*

The key themes overall were:

- Service provision – Consider provision of imaging services (e.g. CT, MRI, X-ray) (22 / 20%)
- Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (17 / 15%)
- Service provision – Consider provision of women's health service (e.g. smears, mammograms, coil fitting, maternity checks, menopause tests) (17 / 15%)

Themes by CCG area

Top themes by CCG area were:

- **Cannock Chase CCG:** Limited feedback received
- **East Staffordshire CCG:** Service provision – Consider provision of mental health support and assessment (e.g. healthy minds services, counselling services) (2 / 14%); Service provision – Consider provision of advice and guidance (e.g. signposting) (2 / 14%); Service provision – Consider provision of vaccinations (2 / 14%); Service provision – Consider provision of specialist nurse clinics (e.g. asthma, diabetes); Service provision – Consider provision of ear, nose and throat services (2 / 14%)
- **North Staffordshire CCG:** Service provision – Consider provision of imaging services (e.g. CT, MRI, X-ray) (13 / 29%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (5 / 28%); Service provision – Consider provision of mental health support and assessment (e.g. healthy minds services, counselling services) (5 / 28%)
- **Stafford and Surrounds CCG:** Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (3 / 23%); Service provision – Consider provision of women's health service (e.g. smears, mammograms, coil fitting, maternity checks, menopause tests) (3 / 23%); Service provision – Consider provision of advice and guidance (e.g. signposting) (3 / 23%)

- **Stoke-on-Trent CCG:** Service provision – Consider provision of different types of blood testing (5 / 36%)

Themes by service usage

Top themes by service usage were:

- **Current service user:** Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (3 / 15%)
- **Service user in last six months:** Service provision – Consider provision of imaging services (e.g. CT, MRI, X-ray) (6 / 21%); Service provision – Consider provision of women's health service (e.g. smears, mammograms, coil fitting, maternity checks, menopause tests) (6 / 21%)
- **Service user over six months ago:** Service provision – Consider provision of imaging services (e.g. CT, MRI, X-ray) (8 / 31%)
- **Non-service user:** Service provision – Consider provision of screening services (e.g. cancer screening, breast screening) (5 / 22%); Service provision – Consider provision of mental health support and assessment (e.g. healthy minds services, counselling services) (5 / 22%)

For a full list of themes, see Table 20 in the Appendix.

5.5.2 Location of community diagnostic hubs

Respondents were asked: *Please tell us your views on where Community Diagnostic Hubs could be provided?* The key themes overall were:

- Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (31 / 25%)
- Location should be accessible (e.g. close to home, good public transport) (26 / 21%)
- Consider community hospitals for a community diagnostic hub (22 / 18%)

Themes by CCG area

Top themes by CCG area were:

- **Cannock Chase CCG:** Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (4 / 67%)
- **East Staffordshire CCG:** Consider utilisation of community buildings (e.g. libraries, churches, village halls, community centres) (4 / 25%)
- **North Staffordshire CCG:** Consider Leek for a community diagnostic hub (e.g. Leek Moorlands Hospital) (18 / 35%)
- **South East Staffordshire and Seisdon Peninsula CCG:** Location - Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (5 / 26%); Location - Consider Sir Robert Peel Community Hospital for a community diagnostic hub (5 / 26%)
- **Stafford and Surrounds CCG:** Location should be accessible (e.g. close to home, good public transport) (8 / 47%)
- **Stoke-on-Trent CCG:** Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (5 / 26%); Consider Sir Robert Peel Community Hospital for a community diagnostic hub (5 / 26%)

Themes by service usage

Top themes by service usage were:

- **Current service user:** Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (67 / 37%)
- **Service user in last six months:** Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (9 / 26%)
- **Service user over six months ago:** Consider Leek for a community diagnostic hub (e.g. Leek Moorlands Hospital) (7 / 24%)
- **Non-service user:** Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics) (9 / 33%)

For a full list of themes, see Table 21 in the Appendix.

5.5.3 Opportunities for health services

NHS employee and organisational respondents were asked: *Please tell us about any opportunities these hubs present for health services in Staffordshire and Stoke-on-Trent.*

The key themes overall were:

- Access – Proposal will improve access to services in community (e.g. rapid access, timely diagnosis) (8 / 73%)
- Quality of care – Proposal will improve patient's pathway and experience (3 / 27%)
- Staff – Proposal will support multidisciplinary working (2 / 18%)

For a full list of themes, see Table 22 in the Appendix.

5.5.4 Risks for health services

NHS employee and organisational respondents were asked: *Please tell us about any risks these hubs present for health services in Staffordshire and Stoke-on-Trent.*

The key themes overall were:

- Integration – Concern over lack of integration between different services (e.g. results could be lost) (2 / 18%)
- General – There are no risks (2 / 18%)

For a full list of themes, see Table 23 in the Appendix.

5.5.5 Business case

NHS employee and organisational respondents were asked: *We are preparing a business case to secure funding. Please tell us about anything else you think our business case should include.*

The key themes overall were:

- Integration – Ensure appropriate integration and collaboration between different services and organisations (e.g. third sector) (3 / 30%)
- Communication – Ensure appropriate communication between all stakeholders (3 / 30%)

- Cost and efficiency – Consider how to make the service efficient (e.g. shorter waiting time, saving in preventing future hospitalisation) (2 / 20%)

For a full list of themes, see Table 24 in the Appendix.

5.6 Feedback from other channels

Email correspondence was received from one member of the public who has Parkinson's disease. They highlighted that their condition was worsening and felt that regular follow-ups could be helpful to find out the effectiveness of their medication and whether it should be changed.

6 Conclusion

Overall, 13 (17%) respondents were currently accessing diagnostic services and 41 (31%) respondents had accessed the service in the past six months. The main locations for accessing the services were Royal Stoke University Hospital, local GP practices and County Hospital, Stafford. Blood testing was the most frequently used diagnostic service.

Key concerns around attending appointments focused on access, such as location, distance to travel, and parking. However, when asked what went well when they had accessed diagnostic services, access being easy was a key theme. Other themes were that the services were good, and staff were professional and supportive.

When asked what could be improved, access was a key area of improvement, with respondents highlighting that services need to be in accessible locations and waiting times need to improve. Respondents also highlighted the need for timely sharing of test results.

Key services highlighted for community diagnostic hubs were imaging services, screening services and women's health services. The need for accessible locations was further highlighted, with community hospitals and primary care settings the most frequently mentioned locations. NHS employees and organisational respondents highlighted that the proposal would improve access to services in the community.

7 Appendix

Table 13. Where have you accessed these services?

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Location	Royal Stoke University Hospital	22	28%	16	2	-	-	4	-	-	-	3	10	9	-
	Local GP (e.g. Biddulph GP, Moss Green, Bentilee)	21	27%	7	2	5	3	3	1	-	-	5	9	7	-
	County Hospital, Stafford	12	15%	3	7	-	-	2	1	-	-	2	7	3	-
	Leek Moorlands Hospital	10	13%	10	-	-	-	-	-	-	-	-	4	6	-
	Queen's Hospital, Burton	7	9%	-	-	1	6	-	-	-	-	3	1	3	-
	Cobridge Community Health Centre	7	9%	3	1	-	-	3	-	-	-	-	2	5	-
	Meir Primary Care Centre	5	6%	3	2	-	-	-	-	-	-	-	4	1	-
	Cannock Chase Hospital	3	4%	-	1	1	-	-	1	-	-	1	1	1	-
	Royal Derby Hospital	3	4%	-	-	1	2	-	-	-	-	1	-	2	-
	Haywood Community Hospital	3	4%	3	-	-	-	-	-	-	-	-	2	1	-
	Bradwell Hospital	3	4%	3	-	-	-	-	-	-	-	1	-	2	-
	Sir Robert Peel Community Hospital	2	3%	-	-	1	1	-	-	-	-	-	1	1	-
	Macclesfield District General Hospital	2	3%	2	-	-	-	-	-	-	-	1	-	1	-
	Both hospital and health centre	2	3%	-	-	-	-	1	1	-	-	-	2	-	-
	Stafford Health and Wellbeing Centre	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
	Hanley	1	1%	1	-	-	-	-	-	-	-	-	-	1	-
	Walsall	1	1%	-	-	-	1	-	-	-	-	1	-	-	-
	Queen Elizabeth Hospital Birmingham	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
	Samuel Johnson Community Hospital, Lichfield	1	1%	-	-	-	-	-	1	-	-	-	1	-	-
	Good Hope Hospital	1	1%	-	-	1	-	-	-	-	-	-	1	-	-
Nuffield, Newcastle	1	1%	1	-	-	-	-	-	-	-	-	1	-	-	
Home	1	1%	-	-	-	1	-	-	-	-	1	-	-	-	
Other	3	4%	1	1	-	-	1	-	-	-	3	-	-	-	
Base		79		37	12	8	7	11	4	-	-	18	32	29	-

Table 14. Please list any barriers you face which prevent you attending your appointments for health services?

Main theme	Theme	Total		CCG area							Service usage				
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Access	Concern over access to services (e.g. distance to travel, public transport, location)	33	46%	21	2	3	1	4	1	-	1	4	10	14	5
	Parking was an issue (e.g. lack of parking, high cost)	17	24%	8	1	3	2	3	-	-	-	5	3	7	2
	Concern over booking process of appointments (e.g. no choice over appointment time)	8	11%	3	-	2	2	1	-	-	-	2	3	2	1
	Appointments not running on time was an issue	6	8%	2	1	1	1	1	-	-	-	-	1	3	2
	Concern over lack of availability of appointments (e.g. blood test)	4	6%	1	-	1	2	-	-	-	-	-	1	1	2
	Not being able to be accompanied by a carer/family member was challenging	4	6%	-	2	1	-	1	-	-	-	1	2	1	-
	Going to different hospitals for assessment and consultation was inconvenient	2	3%	1	-	1	-	-	-	-	-	-	1	1	-
COVID	Concern over closure of service due to COVID	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
	Concern over restrictions due to COVID	1	1%	-	-	-	-	-	1	-	-	-	1	-	-
Quality of care	Concern over lack of face-to-face appointments	1	1%	-	-	1	-	-	-	-	-	-	-	-	1
	Concern over poor feedback from doctors	1	1%	-	-	1	-	-	-	-	-	-	1	-	-
General	There were no barriers	12	17%	7	1	1	1	2	-	-	-	4	3	5	-
Service provision	Concern over inflexible operating hours of services (e.g. lack of out-of-hours services)	10	14%	6	-	1	1	1	1	-	-	2	3	2	3
Specific groups	Health conditions are main barriers (e.g. mobility problems, anxiety)	7	10%	4	1	1	1	-	-	-	-	-	6	-	1
Estate and facilities	Concern over available facilities for patients (e.g. lift)	2	3%	1	-	-	-	1	-	-	-	-	1	1	-
	No comment (e.g. N/A)	1	1%	-	-	-	-	1	-	-	-	-	-	-	1
	Other	1	1%	-	-	-	-	-	1	-	-	-	-	1	-
Base		72		37	8	7	6	10	3	-	1	4	24	25	9

Table 15. Thinking about the diagnostic services you have accessed, please outline what you feel has worked well?

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Access	Access to services was easy (e.g. close to home, adequate parking)	25	30%	11	2	3	4	4	-	-	1	5	9	11	-
	Waiting time for services was short	8	10%	4	3	1	-	-	-	-	-	1	3	4	-
	Booking process was easy (e.g. online booking)	6	7%	3	2	-	-	1	-	-	-	1	4	1	-
	Concern about difficulties booking a blood test	1	1%	1	-	-	-	-	-	-	-	1	-	-	-
	Access to services out-of-hours was important	1	1%	1	-	-	-	-	-	-	-	-	1	-	-
Quality of care	Provided services were good (e.g. well organised)	34	41%	20	3	6	3	-	2	-	-	12	12	10	-
	Feedback after diagnostic service was quick	5	6%	2	-	1	-	2	-	-	-	1	1	3	-
	Triage was good	1	1%	1	-	-	-	-	-	-	-	-	1	-	-
	Having continuity of care was important	1	1%	-	-	-	1	-	-	-	-	1	-	-	-
Technology	Telephone consultation worked well	1	1%	-	1	-	-	-	-	-	-	-	1	-	-
	NHS app is convenient and easy to use	1	1%	-	-	-	-	1	-	-	-	1	-	-	-
Service provision	Provision of diagnostic services close to home will improve access to them	7	9%	4	-	1	1	1	-	-	-	1	6	-	-
	More diagnostic hubs are needed	1	1%	-	-	-	-	1	-	-	-	-	-	1	-
Staff	Staff were professional and supportive	10	12%	4	1	3	1	1	-	-	-	2	3	5	-
Cost and efficiency	Appointments run on time	4	5%	2	-	-	-	2	-	-	-	-	2	2	-
Communication	Communication was good	3	4%	-	-	-	-	3	-	-	-	-	3	-	-
Estate and facilities	Facilities for patients were good (e.g. visible notification of being called for appointment)	1	1%	1	-	-	-	-	-	-	-	-	-	1	-
	Other	2	2%	1	-	1	-	-	-	-	-	1	1	-	-
Base		82		40	9	10	8	12	2	-	1	18	35	29	-

Table 16. Thinking about the diagnostic services you have accessed, please outline what could be improved?

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Quality of care	Quality of care requires improvement	4	5%	1	1	1	-	-	1	-	-	-	3	1	-
	Treat patients with dignity and respect	4	5%	1	-	1	-	2	-	-	-	-	3	1	-
	Ensure sufficient duration of appointments (e.g. time to ask questions)	1	1%	-	1	-	-	-	-	-	-	-	1	-	-
	Triage of patients requires improvement	1	1%	-	1	-	-	-	-	-	-	-	1	-	-
Service provision	Consider extending operating hours of diagnostic services (e.g. weekend, out-of-hours)	8	10%	7	-	-	-	-	-	-	1	1	2	5	-
	Consider provision of all diagnostic services in one location	5	6%	2	2	1	-	-	-	-	2	1	2	-	
	Consider provision of diagnostic services out of hospital settings	1	1%	-	-	-	-	1	-	-	-	-	-	1	-
	More mobile clinics are needed	1	1%	1	-	-	-	-	-	-	-	-	-	1	-
Access	Ensure services are accessible (e.g. close to home, good public transport)	26	32%	16	2	4	2	1	-	-	1	9	8	9	-
	Consider improving waiting time for services (e.g. shorter waiting time)	17	21%	7	2	2	4	2	-	-	-	5	5	7	-
	Consider increasing availability of appointments (e.g. choice of appointment times and places)	6	7%	4	-	1	-	-	-	-	1	1	-	5	-
	Consider improving booking process	2	2%	-	1	-	1	-	-	-	-	1	1	-	-
Cost and efficiency	Ensure appointments run without delays	4	5%	1	-	-	1	2	-	-	-	-	3	1	-
	Consider the need to improve patient's pathway (e.g. cut out 'middleman')	3	4%	1	1	1	-	-	-	-	-	1	1	1	-
	Consider greater investment in diagnostic services at hospitals (e.g. County Hospital, Stafford)	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
Communication	Ensure timely sharing of tests results (e.g. share through NHS App)	11	13%	1	3	2	3	2	-	-	-	2	5	4	-
	Ensure appropriate communication with service users (e.g. inform about waiting time)	2	2%	1	-	-	-	1	-	-	-	-	1	1	-
Specific groups	Ensure services reflect the needs of vulnerable groups (e.g. disabled, autistic patients)	3	4%	1	-	1	-	1	-	-	-	1	2	-	-
	Consider patients without access to or knowledge of technology	1	1%	-	1	-	-	-	-	-	-	-	1	-	-
Parking	Consider the need for adequate parking (e.g. parking fees)	3	4%	1	1	1	-	-	-	-	-	1	2	-	
General	No improvement is required	3	4%	-	-	1	1	-	1	-	-	1	2	-	
	Other	3	4%	1	-	-	-	2	-	-	-	1	2	-	
Base			82	39	11	9	9	10	2	-	2	19	32	31	-

Table 17. Are you aware of any barriers for people accessing diagnostic services? If yes, please tell us what they are?

Main theme	Theme	Total		CCG area							Service usage				
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Access	Concern over poor public transport	8	50%	2	4	1	-	1	-	-	-	1	-	1	2
	Concern over waiting time for diagnostic services and results (e.g. availability of slots, accessing GP for referrals)	6	38%	2	-	2	-	1	-	-	1	1	-	1	1
	Concern over distance to travel (e.g. location of diagnostic services)	3	19%	1	1	-	-	-	-	-	1	-	-	1	1
	Concern over operating hours of diagnostic services (e.g. fitting around work)	2	13%	-	1	1	-	-	-	-	-	-	-	-	2
Specific groups	Concern over access to diagnostic services for vulnerable patients (e.g. those with learning disabilities)	2	13%	1	1	-	-	-	-	-	-	1	-	-	1
	Concern over lack of means to travel (e.g. low-income patients)	1	6%	-	-	-	1	-	-	-	-	-	-	-	-
Parking	Concern over poor parking at venues	5	31%	2	2	-	-	1	-	-	-	1	-	-	2
Communication	Concern over poor communication with service users	2	13%	-	-	1	-	-	1	-	-	-	-	-	-
COVID	Concern over impact of COVID restrictions on service provision (e.g. no face-to-face services)	1	6%	-	-	1	-	-	-	-	-	-	-	-	1
Equality	Concern over possible discrimination against certain groups of patients (e.g. ethnic minorities, LGBT)	1	6%	1	-	-	-	-	-	-	-	1	-	-	-
Service provision	Concern over limited capacity for blood tests	1	6%	-	-	1	-	-	-	-	-	-	-	-	1
Base			16	4	4	4	1	1	1	-	1	3	-	2	4

Table 18. Tell us what was good about the diagnostic services accessed by patients in the last 18 months?

Main theme	Theme	Total		CCG area							Service usage				
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Access	Waiting time for diagnostic services was short (e.g. rapid access)	3	27%	2	1	-	-	-	-	-	-	1	-	-	1
	Booking process was easy (e.g. online phlebotomy booking service)	1	9%	1	-	-	-	-	-	-	-	1	-	-	-
	Services were provided locally	1	9%	-	-	1	-	-	-	-	-	-	-	-	-
COVID	Concern over limited provision of service due to COVID restrictions	2	18%	-	-	-	1	-	1	-	-	-	-	-	-
	Safety measures were in place	1	9%	1	-	-	-	-	-	-	-	1	-	-	-
Quality of care	Provided services were good	2	18%	1	1	-	-	-	-	-	-	1	-	-	1
General	Comment about the survey (e.g. not a sensible question)	1	9%	-	-	-	-	1	-	-	-	-	-	-	-
Service provision	Good range of services available to GPs	1	9%	-	1	-	-	-	-	-	-	-	-	-	1
Staff	Staff were professional and supportive	1	9%	1	-	-	-	-	-	-	-	1	-	-	-
Technology	Online consultations worked well	1	9%	-	-	1	-	-	-	-	-	-	-	-	1
Base		11		4	2	2	1	1	1	-	-	3	-	-	3

Table 19. Tell us what could be improved about the diagnostic services accessed by patients in the last 18 months?

Main theme	Theme	Total		CCG area							Service usage				
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Access	Consider improving waiting time for services	7	58%	2	-	2	1	1	-	-	1	2	-	1	1
	Consider improving access to services (e.g. close to home, accessible parking)	5	42%	1	-	1	1	1	-	-	1	1	-	1	1
	Consider extending operating hours of services (e.g. weekends)	2	17%	2	-	-	-	-	-	-	-	2	-	-	-
	Consider improving patient transport	1	8%	-	1	-	-	-	-	-	-	-	-	-	1
General	Provided services were good and no improvement is required	1	8%	-	1	-	-	-	-	-	-	-	-	-	1
	Comment about the survey (e.g. not a sensible question)	1	8%	-	-	-	-	1	-	-	-	-	-	-	-
Specific groups	Consider the needs of diabetic patients	1	8%	-	-	-	-	-	1	-	-	-	-	-	-
Communication	Communication with service users should be improved (e.g. inform about waiting time)	1	8%	1	-	-	-	-	-	-	-	1	-	-	-
	No comment (e.g. as above)	1	8%	1	-	-	-	-	-	-	-	-	-	-	-
Base			12	4	2	2	1	1	1	-	1	3	-	1	3

Table 20. Please tell us what other services you think could be provided at CDHs?

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Service provision	Consider provision of imaging services (e.g. CT, MRI, X-ray)	22	20%	13	1	4	1	1	1	-	1	1	6	8	3
	Consider provision of screening services (e.g. cancer screening, breast screening)	17	15%	6	3	5	1	1	1	-	-	3	3	3	5
	Consider provision of women's health service (e.g. smears, mammograms, coil fitting, maternity checks, menopause tests)	17	15%	9	3	3	1	1	-	-	-	2	6	4	3
	Consider provision of mental health support and assessment (e.g. healthy minds services, counselling services)	14	13%	4	1	5	2	2	-	-	-	-	3	4	5
	Consider provision of different types of blood testing	13	12%	4	1	2	1	5	-	-	-	2	3	3	2
	Consider provision of advice and guidance (e.g. signposting)	9	8%	1	3	2	2	1	-	-	-	1	2	2	2
	Any service that can easily be taken into the community should be provided (e.g. as many as possible, meet patient needs)	8	7%	6	-	1	1	-	-	-	-	2	3	1	-
	Consider provision of eye tests (e.g. optometry services, ophthalmic services)	8	7%	3	1	1	1	2	-	-	-	-	5	1	1
	Consider provision of physiotherapy	8	7%	4	1	1	-	2	-	-	-	-	1	2	3
	Consider provision of vaccinations	8	7%	6	-	-	2	-	-	-	-	2	2	3	-
	Consider provision of minor injuries services	7	6%	4	-	-	-	2	1	-	-	-	2	3	1
	Consider provision of ultrasound and endoscopy	7	6%	4	-	2	1	-	-	-	-	-	4	3	-
	Consider provision of dietary services (e.g. obesity guidance, weight loss advice)	6	5%	1	1	2	1	1	-	-	-	-	1	2	2
	Consider provision of minor day surgery	6	5%	3	-	2	-	-	1	-	-	1	-	3	1
	Consider provision of specialist nurse clinics (e.g. asthma, diabetes)	6	5%	1	1	2	2	-	-	-	-	1	2	-	3
	Consider the need for preventive services (e.g. health classes, NHS health checks)	6	5%	2	-	2	1	1	-	-	-	1	-	-	4
	Consider provision of cardiac investigations (e.g. echocardiogram, pacemaker checks)	5	5%	3	-	2	-	-	-	-	-	2	-	3	-
	Consider provision of hearing tests (e.g. audiology services)	5	5%	3	1	1	-	-	-	-	-	-	2	3	-
	Consider provision of dentistry services	4	4%	3	-	-	-	1	-	-	-	1	2	-	1
	Consider provision of rheumatology services (e.g. arthritic joint injections)	4	4%	2	-	-	1	1	-	-	-	-	3	-	1
Consider provision of ear, nose and throat services	3	3%	-	-	-	2	1	-	-	-	1	2	-	-	
Consider provision of one-stop services (e.g. clinical input on site)	3	3%	-	-	-	1	-	2	-	-	-	-	1	-	
	Consider provision of skin cancer checks	3	3%	-	-	2	1	-	-	-	-	2	-	-	
	Consider provision of autism diagnosis service	2	2%	1	-	-	1	-	-	-	-	-	1	1	
	Consider provision of memory clinics	2	2%	1	-	1	-	-	-	-	-	-	2	-	
	Consider provision of sexual health services (e.g. family planning)	2	2%	-	1	-	-	-	1	-	-	-	1	-	1
	Consider provision of biopsy procedures	1	1%	-	-	-	-	1	-	-	-	-	-	1	-
	Consider provision of endocrinology services	1	1%	1	-	-	-	-	-	-	-	1	-	-	-
	Consider provision of immunoglobulin therapy	1	1%	1	-	-	-	-	-	-	-	-	1	-	-

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	Consider provision of lymphoedema services	1	1%	-	-	-	-	1	-	-	-	-	1	-	-
	Consider provision of out-of-hours GP services	1	1%	1	-	-	-	-	-	-	-	-	-	1	-
	Consider provision of outreach services	1	1%	-	-	-	1	-	-	-	-	1	-	-	-
	Consider provision of pulmonary function tests	1	1%	-	-	-	-	1	-	-	-	-	-	1	-
	Healthcare should be provided locally	1	1%	1	-	-	-	-	-	-	-	-	-	-	1
Access	Ensure that community diagnostic hubs are accessible for patients and staff	1	1%	-	1	-	-	-	-	-	-	-	-	-	1
	Ensure timely access to diagnostic services	1	1%	1	-	-	-	-	-	-	-	1	-	-	-
Staff	Consider the need for allied health professionals at these hub (e.g. outpatient consultation)	16	15%	9	1	4	1	1	-	-	-	2	3	6	3
	More staff are needed	1	1%	1	-	-	-	-	-	-	-	1	-	-	-
Technology	Consider greater use of technology	3	3%	-	-	1	1	1	-	-	-	-	-	1	1
General	Professional bodies should decide which services to provide	2	2%	1	-	-	-	-	1	-	-	1	1	-	-
Cost and efficiency	Consider greater investment in current hospitals (e.g. County Hospital, Stafford)	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
Estate and facilities	Consider facilities for patients and visitors (e.g. refreshments)	1	1%	-	-	-	1	-	-	-	-	1	-	-	-
Integration	Consider the need for greater integration between GP and specialists	1	1%	-	-	-	-	1	-	-	-	-	-	-	-
Specific groups	Consider provision of services for children	1	1%	-	1	-	-	-	-	-	-	-	1	-	-
	Unsure (e.g. don't know)	6	5%	-	2	-	-	3	1	-	-	1	5	-	-
	Other	6	5%	1	1	2	2	-	-	-	-	2	2	1	1
Base			110	45	13	18	14	14	5	-	1	20	29	26	23

Table 21. Please tell us your views on where Community Diagnostic Hubs could be provided?

Main theme	Theme	Total		CCG area							Service usage				
		No	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Location	Consider primary care settings (e.g. medical or health centres, GP surgeries, local clinics)	31	25%	13	2	5	3	4	4	-	-	7	9	4	9
	Location should be accessible (e.g. close to home, good public transport)	26	21%	7	8	4	3	3	1	-	-	4	6	5	6
	Consider community hospitals for a community diagnostic hub	22	18%	9	4	2	3	3	-	-	1	3	6	6	7
	Consider Leek for a community diagnostic hub (e.g. Leek Moorlands Hospital)	19	15%	18	-	-	-	1	-	-	-	1	8	7	2
	Consider utilisation of community buildings (e.g. libraries, churches, village halls, community centres)	16	13%	6	-	3	4	2	1	-	-	2	6	1	3
	Consider Cheadle Hospital for a community diagnostic hub	15	12%	15	-	-	-	-	-	-	-	1	4	6	3
	Consider utilisation of vacant buildings in community (e.g. unused shops)	13	10%	4	2	4	2	1	-	-	-	3	2	3	3
	Community diagnostic hubs should be located outside of hospitals	6	5%	2	-	1	3	-	-	-	-	1	2	1	1
	Consider Sir Robert Peel Community Hospital for a community diagnostic hub	5	4%	-	-	5	-	-	-	-	-	-	2	1	2
	Consider Haywood Hospital for a community diagnostic hub	4	3%	1	-	-	-	3	-	-	-	-	3	1	-
	Consider Longton Cottage Hospital or Longton Health Centre for a community diagnostic hub	4	3%	1	1	-	-	2	-	-	-	-	1	-	2
	Consider both locations (e.g. hospital site and community)	3	2%	1	-	-	1	1	-	-	-	1	-	2	-
	Consider Cannock for a community diagnostic hub (e.g. MIU, Cannock Community Hospital)	3	2%	-	-	-	-	-	3	-	-	-	1	-	1
	Consider Cobridge Community Health Centre for a community diagnostic hub	3	2%	-	-	-	-	3	-	-	-	-	2	1	-
	Consider Lichfield for a community diagnostic hub (e.g. Samuel Johnson Community Hospital, outskirts of the city)	3	2%	-	-	2	1	-	-	-	-	-	-	1	2
	Cannock Hospital is not an accessible location for a community diagnostic hub (e.g. lack of parking, inconvenient location)	2	2%	-	-	1	-	-	1	-	-	-	-	-	1
	Community diagnostic hub is needed in Stone	2	2%	1	1	-	-	-	-	-	-	-	1	-	-
	Consider Bradwell Hospital for a community diagnostic hub	2	2%	-	-	-	-	2	-	-	-	-	1	1	-
	Consider local pharmacies for a community diagnostic hub	2	2%	-	-	-	1	1	-	-	-	-	-	1	-
	Consider Meir Primary Care Centre for a community diagnostic hub	2	2%	-	-	-	-	2	-	-	-	-	-	-	1
Consider Uttoxter for a community diagnostic hub	2	2%	1	-	-	1	-	-	-	-	-	1	-	1	
Community diagnostic hub is needed in Burntwood	1	1%	-	-	1	-	-	-	-	-	-	-	1	-	
Consider Bentilee Neighbourhood Centre for a community diagnostic hub	1	1%	-	1	-	-	-	-	-	-	-	-	-	1	
Consider current locations of phlebotomy services for community diagnostic hubs	1	1%	-	-	-	-	1	-	-	-	-	1	-	-	
Consider Newcastle-under-Lyme town centre for a community diagnostic hub	1	1%	1	-	-	-	-	-	-	-	1	-	-	-	

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	Consider Stafford Health and Wellbeing Centre for a community diagnostic hub	1	1%	-	1	-	-	-	-	-	-	-	-	-	1
	New Cross Hospital, Wolverhampton, is not an accessible location for a community diagnostic hub (e.g. poor parking)	1	1%	-	-	1	-	-	-	-	-	-	-	-	1
Service provision	Consider provision of mobile units (e.g. rural areas, supermarket car parks)	5	4%	3	1	-	1	-	-	-	-	2	-	1	2
	Consider co-location of community diagnostic hubs with intermediate care hubs	1	1%	1	-	-	-	-	-	-	-	-	1	-	-
	Consider provision of walk-in centre in community diagnostic hubs	1	1%	-	-	1	-	-	-	-	-	-	1	-	-
	Ensure that new community diagnostic hubs provide full list of tests and diagnostics (e.g. endoscopy)	1	1%	-	-	1	-	-	-	-	-	-	-	-	-
General	Consider the need to implement proposal effectively	2	2%	-	-	1	-	1	-	-	-	-	-	-	-
	Further consultation about the proposal is required (e.g. consultation with patients)	1	1%	-	-	-	1	-	-	-	-	1	-	-	-
Parking	Ensure adequate parking (e.g. free parking, enough parking spaces)	8	6%	2	1	1	2	1	1	-	-	2	-	1	3
Demographics	Consider demographics of different areas	4	3%	-	1	2	1	-	-	-	-	1	1	1	1
Quality of care	Quality of diagnostic services is more important than their location	2	2%	-	1	-	-	1	-	-	-	-	-	1	-
Staff	Ensure adequate staffing	2	2%	-	-	1	-	1	-	-	-	-	-	-	-
Communication	Ensure appropriate communication with service users (e.g. less medical terminology)	1	1%	-	-	1	-	-	-	-	-	-	-	-	-
Cost and efficiency	Consider greater investment in current hospitals (e.g. County Hospital, Stafford)	1	1%	-	1	-	-	-	-	-	-	1	-	-	-
	Other	1	1%	1	-	-	-	-	-	-	-	-	-	1	-
Base			125	51	17	19	16	15	6	-	1	19	35	29	27

Table 22. Please tell us about any opportunities these hubs present for health services in Staffordshire and Stoke-on-Trent.

Main theme	Theme	Total		CCG area							Service usage				
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Quality of care	Proposal will improve patient's pathway and experience	3	27%	-	1	1	-	1	-	-	-	-	-	-	1
	Proposal will support prevention rather than cure	1	9%	-	-	1	-	-	-	-	-	-	-	-	-
Access	Proposal will improve access to services in community (e.g. rapid access, timely diagnosis)	8	73%	2	2	2	1	-	1	-	-	1	-	-	3
Staff	Proposal will support multidisciplinary working	2	18%	-	1	-	-	1	-	-	-	-	-	-	1
Cost and efficiency	Proposal will help to reduce pressure on other services (e.g. A&E)	2	18%	-	-	1	-	-	1	-	-	-	-	-	1
Integration	Proposal will improve integration between different services	1	9%	-	-	-	-	1	-	-	-	-	-	-	-
	Other	1	9%	1	-	-	-	-	-	-	-	1	-	-	-
Base			11	3	2	3	1	1	1	-	-	2	-	-	3

Table 23. Please tell us about any risks these hubs present for health services in Staffordshire and Stoke-on-Trent.

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Quality of care	Concern that proposal will lead to dilution of diagnostic services	1	9%	-	-	-	-	1	-	-	-	-	-	-	-
	Concern that proposal will lead to over-investigation of symptoms	1	9%	1	-	-	-	-	-	-	-	1	-	-	-
	Concern that proposal will reduce patient contact time	1	9%	-	1	-	-	-	-	-	-	-	-	-	1
Access	Consider the need for an effective booking process (e.g. booking online)	1	9%	-	-	1	-	-	-	-	-	-	-	-	1
	Proposal will over-complicate patient's pathway	1	9%	-	1	-	-	-	-	-	-	-	-	1	-
General	There are no risks	2	18%	1	-	1	-	-	-	-	-	-	-	-	-
	Consider the needs to implement proposal effectively	1	9%	-	-	-	-	-	1	-	-	-	-	-	-
Integration	Concern over lack of integration between different services (e.g. results could be lost)	2	18%	-	1	1	-	-	-	-	-	-	-	-	2
Staff	Concern that proposal will put more pressure on staff (e.g. add in travel time)	1	9%	-	1	-	-	-	-	-	-	-	-	-	1
Technology	Concern over lack of appropriate NHS IT infrastructure to implement this proposal	1	9%	-	-	1	-	-	-	-	-	-	-	-	1
	Other	2	18%	1	-	1	-	-	-	-	-	1	-	-	-
Base			11	3	3	3	-	1	1	-	-	2	-	1	3

Table 24. We are preparing a business case to secure funding. Please tell us about anything else you think our business case should include.

Main theme	Theme	Total		CCG area								Service usage			
		No.	%	North Staffordshire	Stafford and Surrounds	SES and Seisdon Peninsula	East Staffordshire	Stoke-on-Trent	Cannock Chase	Out of area	No postcode provided	Current service user	Last 6 months	Over 6 months ago	Non- service user
Service provision	Consider provision of contraception and coil fitting	1	10%	1	-	-	-	-	-	-	-	1	-	-	-
	Consider utilisation of Leek Moorlands Hospital as a community diagnostic hub	1	10%	1	-	-	-	-	-	-	-	-	-	-	-
Cost and efficiency	Consider how to make the service efficient (e.g. shorter waiting time, saving in preventing future hospitalisation)	2	20%	-	-	2	-	-	-	-	-	-	-	-	1
	Consider funding for allied health professions	1	10%	-	1	-	-	-	-	-	-	-	-	-	1
Staff	Ensure appropriate staffing (e.g. patient-centric)	1	10%	-	-	-	-	1	-	-	-	-	-	-	-
	Ensure appropriate facilities for staff (e.g. parking, cycle storage)	1	10%	1	-	-	-	-	-	-	-	1	-	-	-
Integration	Ensure appropriate integration and collaboration between different services and organisations (e.g. third sector)	3	30%	-	-	1	1	1	-	-	-	-	-	-	1
Communication	Ensure appropriate communication between all stakeholders	3	30%	-	-	1	-	1	1	-	-	-	-	-	1
Access	Consider accessibility of hubs (e.g. public transport)	1	10%	-	1	-	-	-	-	-	-	-	-	-	1
Base			10	3	2	2	1	1	1	-	-	2	-	-	3