

Accessing care through GP Practices in Gloucestershire



February 2021

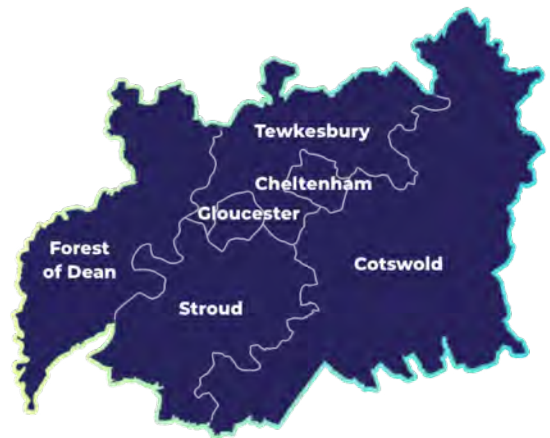


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Introduction

Healthwatch Gloucestershire is the county's independent health and social care champion. We exist to ensure that people are at the heart of care. Our dedicated team of staff and volunteers listen to what people like about local health and care services, and what could be improved. These views are then shared with decision-making organisations, so that together a real difference can be made to improve local health and social care services.

Healthwatch Gloucestershire covers the geographical area of Gloucestershire County Council, which includes the districts and boroughs of Cheltenham, Cotswold, Forest of Dean, Gloucester, Stroud, and Tewkesbury.



Background

Since the start of the Covid-19 pandemic we have received a significant number of comments around access to GP Practices and the way they have been interacting with their patients. During the first phase of the pandemic health services were limited, with consultations taking place remotely and at arms' length. In the summer, as restrictions eased, health providers opened their full range of services. As we entered autumn and winter, we thought it would be timely to ask the public for their experiences of accessing GP services over the previous six months. We identified four areas to investigate.



Information

We wanted to find out whether the information provided on GP websites was clear, easy to navigate and in plain English. A group of volunteers undertook this task and reviewed all 72 GP Practice websites.

Access

We wanted to understand how people make appointments, how easy this is and whether it has changed because of the pandemic.

Technology

We wanted to know what technology people are using and how well this works for them.

Staff attitude

We wanted to understand how staff treatment of individuals impacts their experience with the GP Practice.

This report highlights what people told us about accessing GP services, what has worked well, the challenges they have encountered and what could be improved.

What we did

We ran a focused public engagement campaign, *GP Feedback Fortnight*, which we promoted widely to maximise participation. We publicised the campaign through our website, newsletter and social media channels, and with the support of our local health, care and community networks.

A promotional banner for 'GP Feedback Fortnight' from Healthwatch Gloucestershire. The banner has a dark blue top section with the event title and dates (23 Nov to 6 Dec 2020) and the Healthwatch Gloucestershire logo. Below this is a lighter blue section with the text 'Tell us your experiences of GP care in Gloucestershire' and 'What works well? What could be improved?'. It lists participation methods: 'It's easy to take part: Online survey | Focus groups | 1:1 conversations | Social media polls'. On the right is a photo of a smiling male GP with a stethoscope. The bottom section is green and contains the text 'Find out more' and contact information: a globe icon for 'healthwatchgloucestershire.co.uk' and a phone icon for '0800 652 5193'.

We conducted a short online survey from 23 November to 6 December 2020 (the questions we asked can be seen in Appendix A). Alongside the survey, we ran nine Facebook polls linked to each of our key survey questions; the feedback has been included within the survey results.

We held three focus groups on 27 November, 1 and 3 December 2020, including one with a representative group from the Gloucestershire Deaf Association (GDA).

We invited people to contact us to speak one-to-one about their experiences of accessing care through GP practices.

The 'Information' part of the project was led by our volunteers. Nineteen volunteers spent over 50 hours collecting, collating, and reviewing data for us. We asked them to review the websites of every GP Practice in Gloucestershire by answering specific questions and completing a checklist which we provided. They also gathered online feedback about GP Practices from Facebook, Google reviews, NHS website reviews and [iWantGreatCare](#), going back over two years.

Who we spoke to

Over two weeks the online survey was completed by 414 people. The daily Facebook polls were taken by a further 186 people.

In the focus groups we spoke to 11 people. We ran a focus group for the deaf community which was facilitated by two British Sign Language (BSL) interpreters.

We spoke to a further seven people via one-to-one interviews.

Survey demographics

Survey respondents were mostly female (69%, 286 people), and White British (87%, 360 people). The main age range of respondents was between 56 – 75 years.

Through the survey and Facebook poll we collected information about where in Gloucestershire respondents were from. People responded from all districts and primary care networks.

A full breakdown of survey demographics, including location, can be found in Appendix B.

Key messages

- People appreciate having a variety of ways to contact and book appointments with their GP and other Practice staff.
- People like having different ways to have a consultation with their GP, such as telephone or videocalls, as well as face-to-face.
- The different ways of engaging with their GP are not always obvious to the public.
- People are missing the option to book appointments online.
- eConsult is too complicated, too long and does not flow. People find it frustrating and off-putting. The option to send a message to the GP Practice is much better received.
- People like a telephone holding system to tell them where they are in the queue.
- People value being listened to and treated as an individual, and they do not always feel they are.
- People do not like having to repeat their story to different GPs.
- Not knowing when to expect a call back causes inconvenience and frustration.
- Prescription ordering systems have improved since the start of the pandemic and are now more streamlined.
- People feel that GP Practice staff do not give them enough time nor their full attention.
- A significant minority of people felt that staff do not communicate effectively with someone living with dementia.
- GP Practice websites mostly hold all relevant information, but they are not always user-friendly, easy to navigate, nor completely accessible.



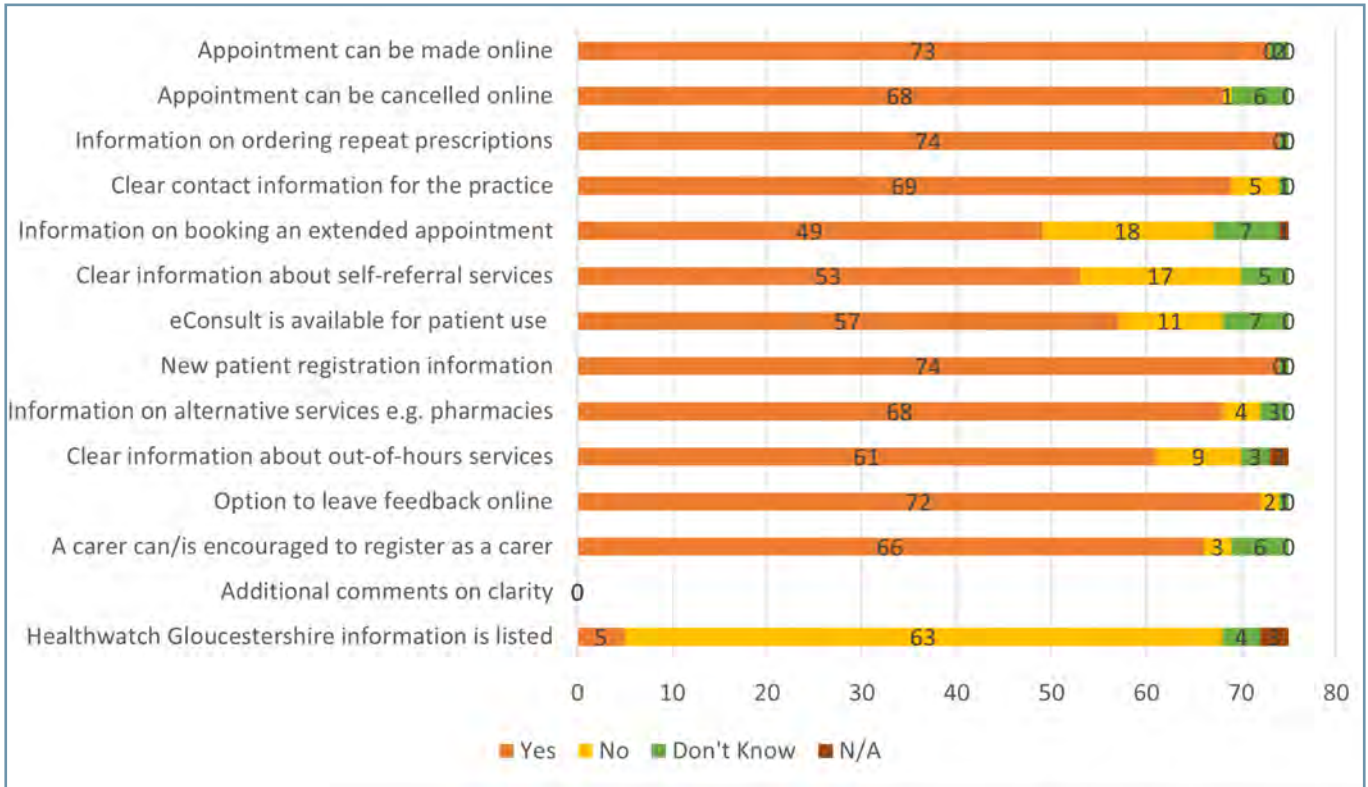
What people told us

Volunteer research and analysis

Information

We asked our volunteers to assess GP Practice websites by looking for specific types of information and considering how easy this was to find and use.

Figure 1: Information on GP Practice websites



Our volunteers noted that relevant information and options were largely available on all GP Practice websites to be viewed and used by the public. However, many commented that the websites were not particularly user friendly, which made it difficult to find the information they were looking for.

Only five GP Practice websites provided information about Healthwatch Gloucestershire.

“Information on who the staff at the Practice are, was at the bottom of a box under ‘PPG and Policies’ and I would have thought this should be on the main homepage.”

“The difficulty is, there are so many steps to get through to find what you are looking for. At times you need to contact someone else (i.e. to book an appointment). Frustrating and off putting.”

“The website is quite minimalist, which is good in some ways, but I needed to use the search facility to find some of the information.”

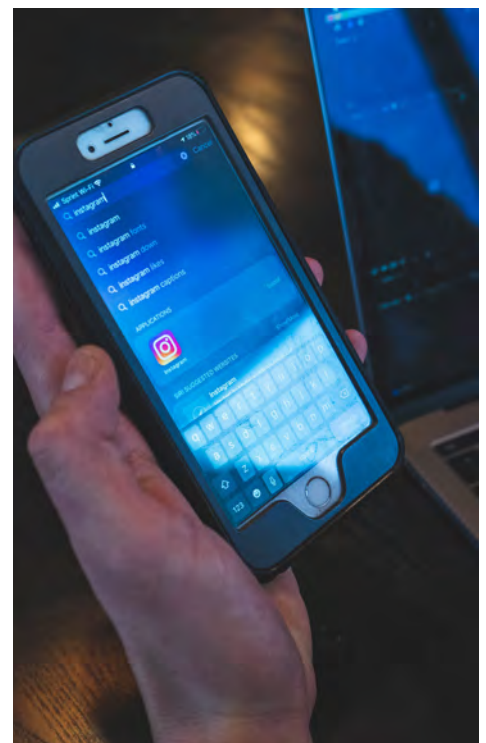
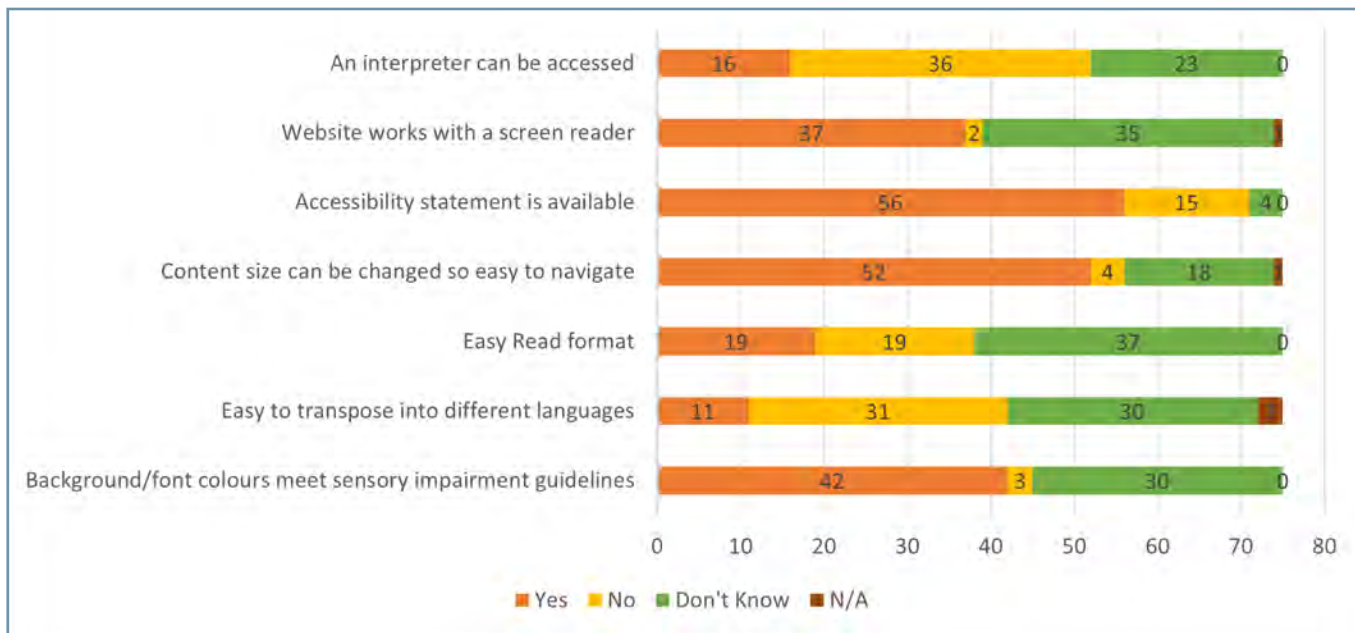


Figure 2: Accessibility of GP Practice websites



Accessibility options and functionality were not immediately obvious on many websites, although accessibility statements were available on most.

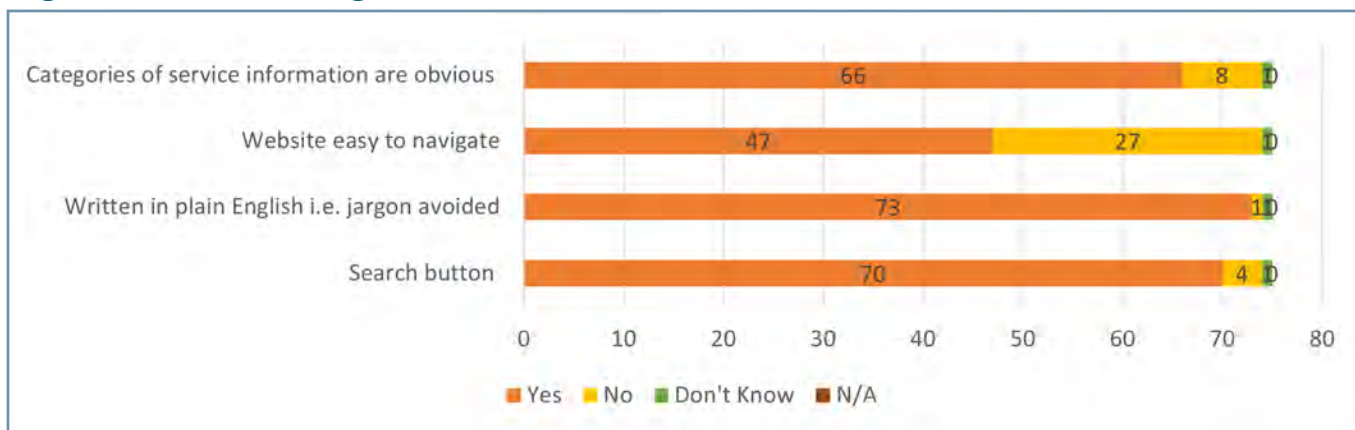
“I liked the fact that many languages are clearly listed. However, when I clicked on the links, the pages have been archived which is very disappointing.”

“Too often the user would have to slightly second guess where things are to find them or, if you click on an obvious link such as prescriptions, you are then taken to a second e-joining link to get the information.”

“They do not seem to have considered other languages or easy read formats.”

“The site is difficult to navigate by a sighted person and would be tricky with a screen reader.”

Figure 3: Website navigation and ease of use



Our volunteers found that most websites were written in plain English.

Although category headings were clear, it was not always easy to find a specific piece of information by following the headings. As the volunteers looked at more than one site, they became used to the system and navigation scores improved. First use of websites was much less straightforward.

GP Practice websites were found to be quite ‘busy’ with a lot of information to try and process on the home pages. A website design template which uses boxes on the home page was found harder to navigate than designs which use menu headings and drop-down lists; these seem to be clearer and easier to use.

“The website is really easy to use, but occasionally what you want to find isn’t where you think it might be.”

“I found this a hard site to easily access information. There seems to be so much that you have to go through and several stages to do basic things. I see this as a problem for many people.”

Survey, focus groups, Facebook polls and interviews

We asked people to talk about their experiences of GP care during the previous six months. The following is a summary of the public feedback we received through our online survey, Facebook polls, focus groups, and one-to-one interviews.

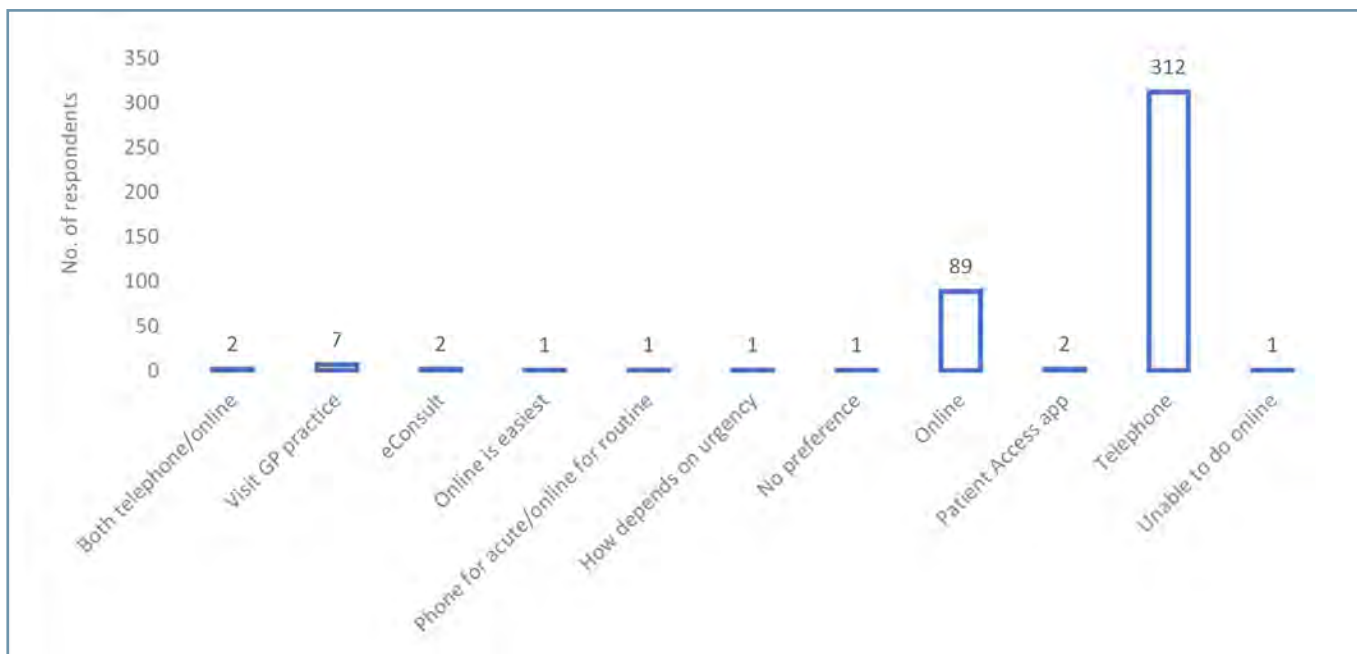
Access to GP appointments

In the survey we asked how people like to make appointments at their GP Practice. 74% (312) said they prefer to telephone the Practice, and 21% (89) said they prefer to book appointments online. A further five people responded to the Facebook poll and all of them said they prefer to telephone the Practice.

Many of the people we spoke to said that the online systems had been withdrawn due to the ongoing Covid-19 pandemic and had not yet been reinstated as an option.

“Prior to the pandemic there was the option of booking an appointment online, which meant you no longer had to wait to get through on the phone, but this option seems to have been withdrawn from all Practices and not reinstated which is disappointing.”

Figure 4: Preferred way to book an appointment



We asked people how easy or difficult it was to make an appointment at their GP Practice. 57% of respondents said it was 'easy' (170) or 'very easy' (71), leaving 43% who said that it was either 'difficult' (132) or 'very difficult' (67).

Figure 5: Ease of making an appointment



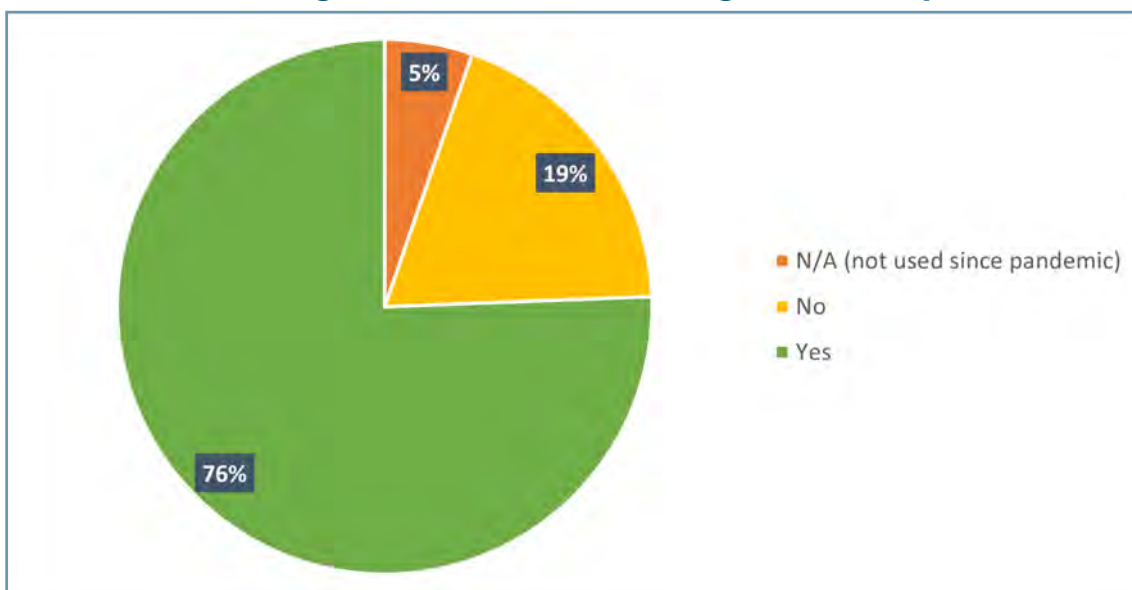
“The time holding on the telephone has increased, as has the personal information they require before they will even ask you why you are ringing, and then it is no longer possible to see a GP face-to-face!”

“The focus now seems to be on phone calls, apps and emails.”

“We are told the NHS is open, but that does not appear to be the case for GPs who will only speak to you on the phone.”

We asked if the way that people had accessed their GP Practice had changed since the start of the Covid-19 pandemic, with 76% of people saying that it had.

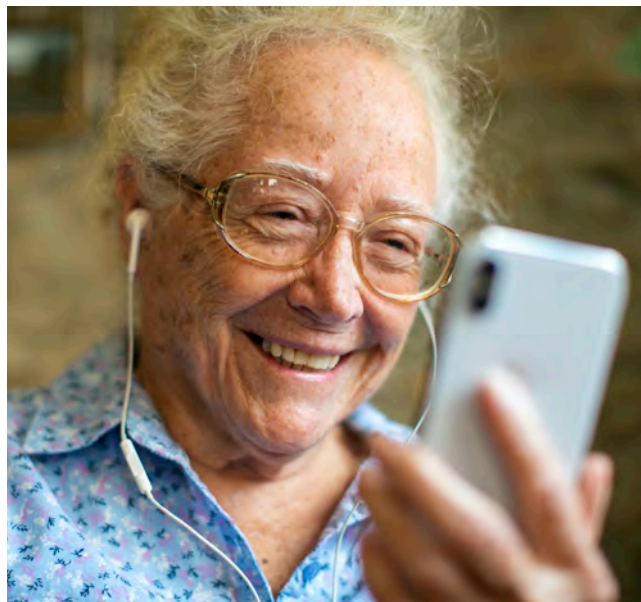
Figure 6: Whether accessing the GP Practice had changed since the pandemic



We asked survey, focus group and interview respondents to go into more detail about the way they access their GP Practice. We found there were mixed reactions to the way in which Practices were offering appointments.

Telephone and online appointments

For some, offering appointments via telephone and online methods was a positive change: ***“I have found the GPs very accessible via the phone and have been happy to talk this way and on a couple of occasions have had appointments via Zoom.”*** One person hoped that it would be continued: ***“I have had several GP telephone appointments over the past few months and have found it easier to access the GP than before the pandemic, so I hope they retain this option where appropriate.”***



However, for many others, the lack of face-to-face appointments was seen as a negative. Some people found that telephone and online methods lacked a personal approach, with one respondent describing that explaining their physical symptoms over the phone as ‘stressful’.

“I had to send an email with an explanation of my condition and attach some photos. At no point was there the facility to speak to anyone and their reply came via text message, which was very impersonal.”

For others, new online methods were particularly difficult to access, with one person living with dementia feeling ***“totally cut off and forgotten”*** by their GP.

“My elderly mother received a letter advising a new system of access was being implemented which was largely IT based, and she has no IT knowledge at all. The Practice will deal with individuals on the phone who are in this situation, but it is clear they are very reluctant to do so.”

Longer waiting times

We also found that many had experienced long waiting times for call backs, or appointments: ***“I waited six weeks to get a telephone consultation.”***

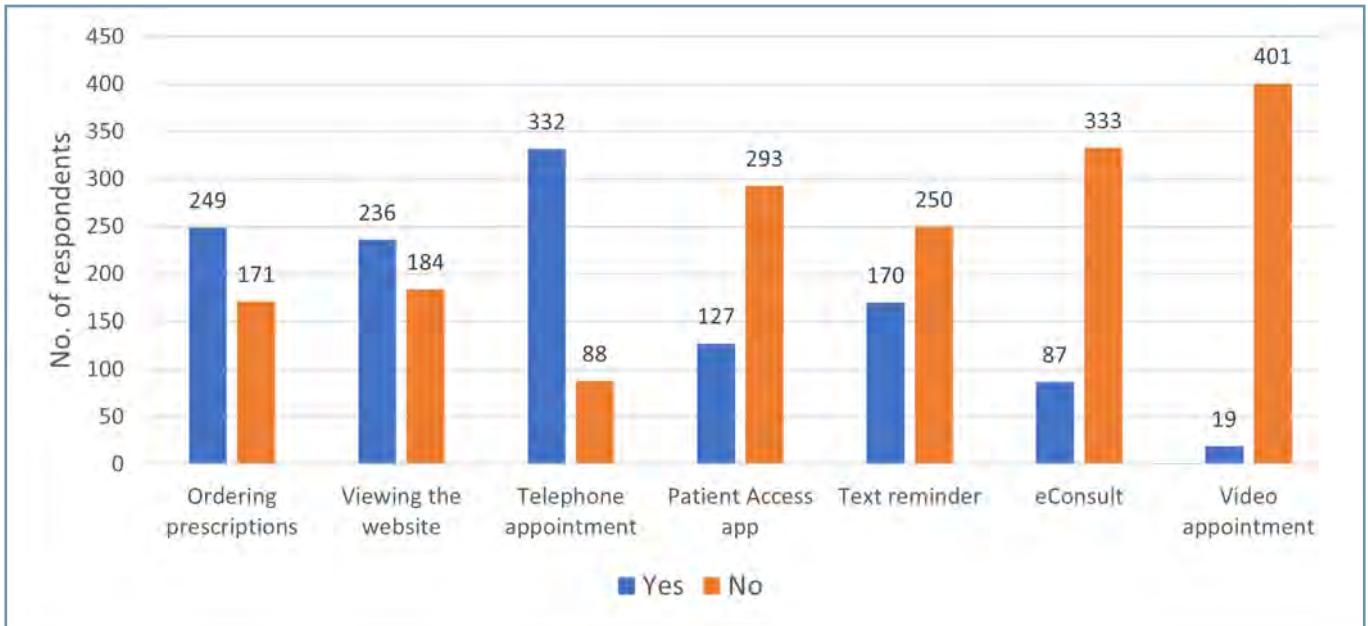
“My husband was concerned about potential skin cancer on his face and contacted the GP Practice. He had to wait days for the GP to call back and then he was offered a face-to-face appointment. The GP was very matter of fact and completely lacking in compassion.”



Technology

We asked which technology/digital services people had used to access care through their GP Practice.

Figure 7: Digital services used to access the GP Practice



Some people also told us they had used technology to send photos to their GP.

We asked if people had changed the way they used technology since the Covid-19 pandemic, and 55% said they had.

We asked how effective they had found using technology; 69% said it had been either 'effective' or 'very effective', although those with a negative experience (31%) were keen to share their reasons why.

We asked survey, focus group and interview respondents to go into more detail about their experiences with using technology/digital services. While there were positive experiences, those with negative experiences of technology felt very strongly about this.

Those with positive experiences said: ***"I have had video consultations which were brilliant."***

"A telephone appointment, also offering a patient/GP live appointment and a follow-up email was all I could ask for."

"My phone call appointments have been very good, although waiting around for hours, not knowing when they are going to ring, can be frustrating."



However, many felt that technology was not always an adequate replacement for face-to-face appointments.

"Technology has its place but is never a proper replacement for face-to-face human contact."

"Online appointments do not replace seeing the GP and even for online, the wait is two or three weeks."

"Technology can drive itself into our lives without necessarily improving it."

Some people found they could not hear on the telephone, and others felt that there was a risk of things being missed.

“I find it difficult to hear on the telephone and having a video appointment would have helped.”

“I had a telephone appointment, but I found it very difficult to explain my physical symptoms and the conversation became quite stressful.”

“The risk of missing things and undermining the patient/GP trust is quite high with a telephone appointment.”



Most of the negative comments, however, were regarding the eConsult service. This was highlighted by many as being long-winded and clunky, with many feeling that it asked for information the Practice already held. This duplication caused immense frustration for many.

“The eConsult system is just too onerous to complete and should be linked to your records as many questions asked are already known.”

“The online system is inconsistent and ineffective and there is no acknowledgement that any request has been received and actioned.”

“I want to see a GP and not fill out a form.”

“My GP Practice insists on everyone using eConsult, even for existing problems and it is impossible to provide the GP with an update without going through the whole rigmarole and answering unnecessary questions, which is a joke. They will not even accept an email and eConsult is simply not designed for follow-ups and additional information.”

For those who had positive experiences, technology was seen as a quick and effective way of contacting their GP, and those who had the opportunity to access a video consultation appreciated it.

“On the one time I have had a video appointment it was very effective, and I really liked being able to see the GP’s face.”

Many GP Practices now use eConsult. Those who had adapted the system to simplify it, or enabled the user to ask a simple question, were praised for being more user-friendly.

Many had found that ordering prescriptions using technology was a quick, easy and thorough process.

“Prescription ordering is quick and easy.”

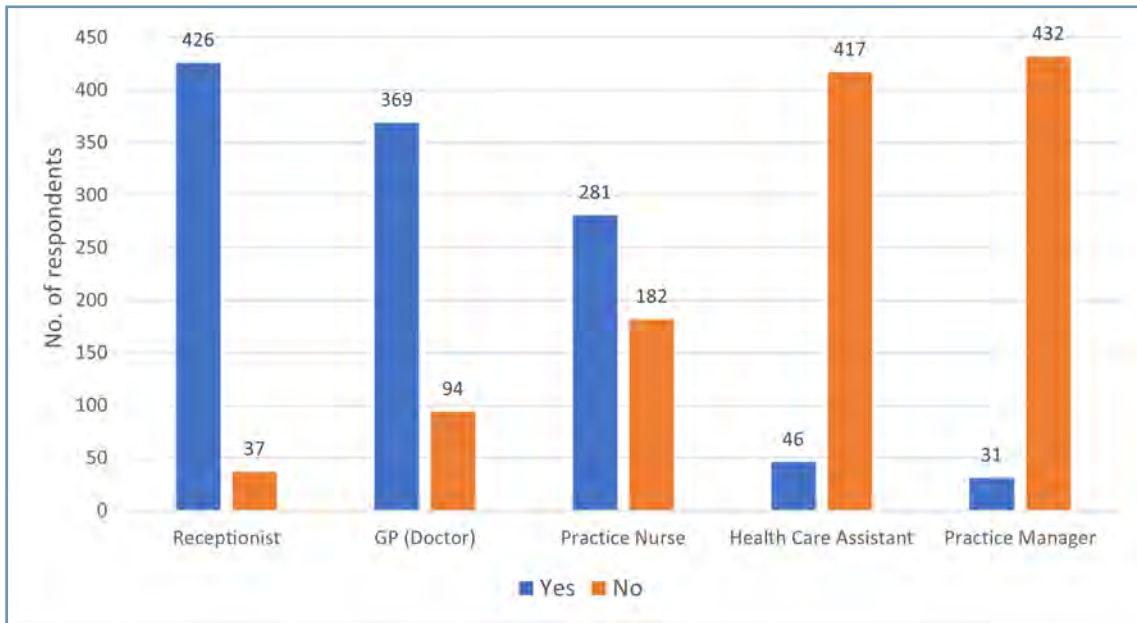
“Prescription ordering online at my GP Practice is a dream and I have used it often without any issues.”

GP Practice staff

In the survey we asked which staff people had been in contact with. The results are shown in Figure 8. Unsurprisingly, the most contacted staff members were Receptionists and GPs. When asked if there were any other staff members we had not mentioned, respondents noted they had also seen Pharmacists and Phlebotomists the most.



Figure 8: GP Practice staff in contact during previous six months



In the survey, we also asked if staff were polite; 69% said they were ‘always’ polite, 27% said ‘sometimes’, and 3% said ‘rarely’ or ‘never’.

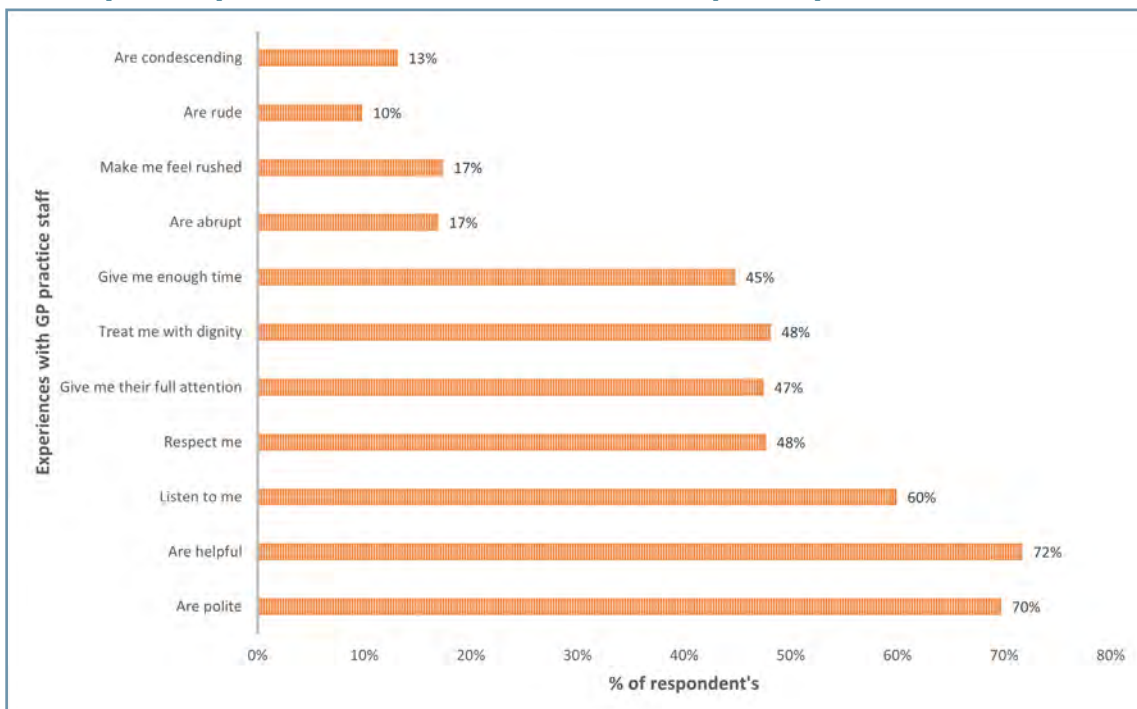
“A good Receptionist will pick up how you are feeling through your voice.”

“The staff at our Practice are always very polite and helpful.”

“The Practice staff have behaved impeccably and the flu vaccination session I attended was extremely well run.”

We asked a series of questions about people’s general experiences of staff at the GP Practice. The results are shown in Figure 9. The majority of people had more positive experiences of staff than negative.

Figure 9: People’s experiences with GP Practice staff (yes responses)



We asked survey, focus group and interview participants to tell us more details about their experiences with staff at GP Practices. Again, there were mixed experiences reported.

Patients had a positive experience with staff when they were friendly, polite, and attentive to people's needs and concerns.

“I was able to have an appointment in person with the Practice Nurse and she was extremely kind and helpful.”

“A kind word can make a huge difference.”

“The one good thing about our Practice is the Reception staff who always give you their attention and listen to you.”



However, many people reported negative experiences with staff members. Some people voiced their concerns about the role of Receptionists, often perceiving them to be gatekeepers to their care: ***“It often feels the Reception staff are guarding the GPs and it is so difficult to speak to one, let alone see one.”***

Some people were concerned with the questions being asked of them, mostly by the Receptionist or individual answering the phone and deeming them to be too personal or not necessary: ***“The Receptionists take on responsibilities for which they are neither skilled nor trained to undertake.”***

“I seem to have to justify my reason for wanting to speak to someone at the Practice.”

“I have found the Reception staff somewhat obstructive and uncharming.”

“I live in a small village where everyone knows everyone else, and I do not think it is appropriate for a Receptionist to be asking me personal questions, which I think a GP should be asking me.”

Some people also reported a negative experience, of staff focusing on individual symptoms rather than taking a more person-centred approach. They felt that linking wider experiences and symptoms would lead to a better understanding and approach to treatment. They also reported feeling rushed and not listened to.

“Sometimes GPs need to talk to patients about their needs and listen to them.”

“Some GPs are sometimes polite whilst others are condescending, and I do not feel they listen.”

“GPs are ok, but I always feel rushed and never given enough time and they only ever want to discuss one health issue, when they may all be connected.”

There was also some concern that GP Practice staff may not be trained, or have the knowledge, to give care to those living with dementia. One person felt that GPs need to involve carers more in decisions regarding dementia care: ***“GPs do not seem to grasp that when someone has dementia, they must involve the carer.”***

Another noted the lack of awareness surrounding dementia: ***“Not all staff understand how to handle a person with dementia. Due to his condition, my husband was late for an appointment and the Receptionist was condescending and sent him home, which was disgraceful.”***

“All Practice staff need to receive dementia awareness training.”

A focus on the deaf community

On 3 December 2020, we held a focus group with the Gloucestershire Deaf Association (GDA). The following is a summary of their experiences with accessing GP services.

Booking appointments

Those in attendance told us they like to book appointments by using online services (when available), sending an email, using TypeTalk, or occasionally they will ask someone from the GDA to ring on their behalf.

However, the whole group told us that it was difficult to make an appointment. One member explained that as their first language is British Sign Language (BSL), they found TypeTalk difficult. Another person noted that it takes a long time getting a reply to emails. In addition, everyone at some point had received a text message, asking them to ring to make an appointment. One person explained ***“this drives me mad every single time!”***, which was echoed by all.

“I do not feel we have equality and an equal system to access.”



Being called through to appointments

We were told that many GP Practices use an intercom system to call patients through to their appointments, which has caused issues for the group as they cannot hear their names being called. The group felt it would be very useful to have a visual representation as well as the intercom, to ensure inclusivity.

One group member explained she recently had to go to the GP Practice for a blood test. On arrival, she used the automatic check-in screen and was directed to sit in the waiting room by the Receptionist who was wearing a mask. She then received a text message confirming they were aware that she had arrived, and the nurse physically came to get her when she was ready, which she thought was brilliant. However, the nurse was in full PPE, including a mask, and as she showed her the way, she kept talking, but the individual could not hear. When the nurse was asked if she could remove the mask, she said no, so they had to resort to communicating via a pen and paper.

Challenges during Covid-19

We asked the group if the ways they accessed the GP Practice had changed since the Covid-19 pandemic. The group agreed unanimously that it had become much harder. For example, they found it challenging when an intercom system was used to communicate before admitting people into the Practice; one person had to wait for someone to come out of the building by chance, so that they could enter.

The group also repeatedly told us of the difficulty experienced when GP staff wore face masks that did not have a transparent window or the clear face shields. This caused a lot of frustration and anxiety, as it created another barrier and excluded them (and people who are hard of hearing) from communicating with anyone in the Practice.

“When the staff are wearing masks it immediately makes me feel disempowered.”

“Masks are a barrier to communication.”

The increase in surgeries offering online or telephone appointments had created difficulties for everyone. All of the group had received telephone calls or answerphone messages from their GP Practice, despite their records showing they are not able to access these calls and messages. Reasons for calls and messages included test results and requests to attend appointments. We noted a sense of despair and frustration from the group about this.

Using technology

We asked the group how they used technology to access care from their GP Practice. There was a mixed response, with some using the Practice website and emails to communicate, while others found that the language used on these technologies was a barrier to their use. One of the group said the online booking function on their GPs website had been removed, and they would like it reinstated as it was the easiest option for them. Many of the group used the online prescription services offered by their GP Practice, however one person did struggle to use it.

“If the GP Practice wish to use technology to communicate with the deaf and those who are hearing deficient, they need to ensure their technology is good enough to create a good experience for the patient and interpreter.”

GP Practice staff

We asked questions about the staff at GP Practices. It was acknowledged by those in the group that communication with staff had always been a barrier, but as previously noted, the use of PPE face masks had increased difficulties significantly.

The group also felt there was an unwillingness to engage with the deaf community among all staff. Three quarters of the group did not feel respected by the staff, with one saying: ***“Sometimes the staff make you feel small and they are condescending and impatient.”*** Reception staff asking confidential questions was also universally disliked.

“There is a complete lack of awareness and understanding and this needs to be addressed through training.”

One group member noted that when reception staff wore headsets, it made it difficult to know if they were talking on the phone or to them.

The whole group praised the GDA, who had worked tirelessly with them all and helped to set them up on Zoom which had been a lifeline for many.

Improving access for the deaf community recommendations

We asked the group to recommend how GP Practices could develop and improve access for people who are deaf and hard of hearing; this is what they told us:

- Staff should wear clear masks and visors as PPE.
- Make sure that deaf awareness training is mandatory for all staff.
- Allow more time for the deaf community.
- Change the process of the waiting room to be more accommodating to the deaf community, for example by using a ticketing system or a visual aid.
- Ensure that any computerised systems are inclusive for the deaf community.

“Wouldn’t it be lovely if all the staff received training and we were all on the same page. What a difference that would make.”

Online GP reviews

Our volunteers collected online reviews of 72 Gloucestershire GP Practices going back over the past two years. We began this work in May 2020 and looked at reviews on Facebook, Google reviews, NHS website reviews and [iWantGreatCare](#). This enabled us to analyse the content to see what issues and sentiments were raised. There were more positive comments (224) than negative (158), and these can be seen in Figures 10 and 11 respectively.

Figure 10: Positive comments within GP Practice reviews

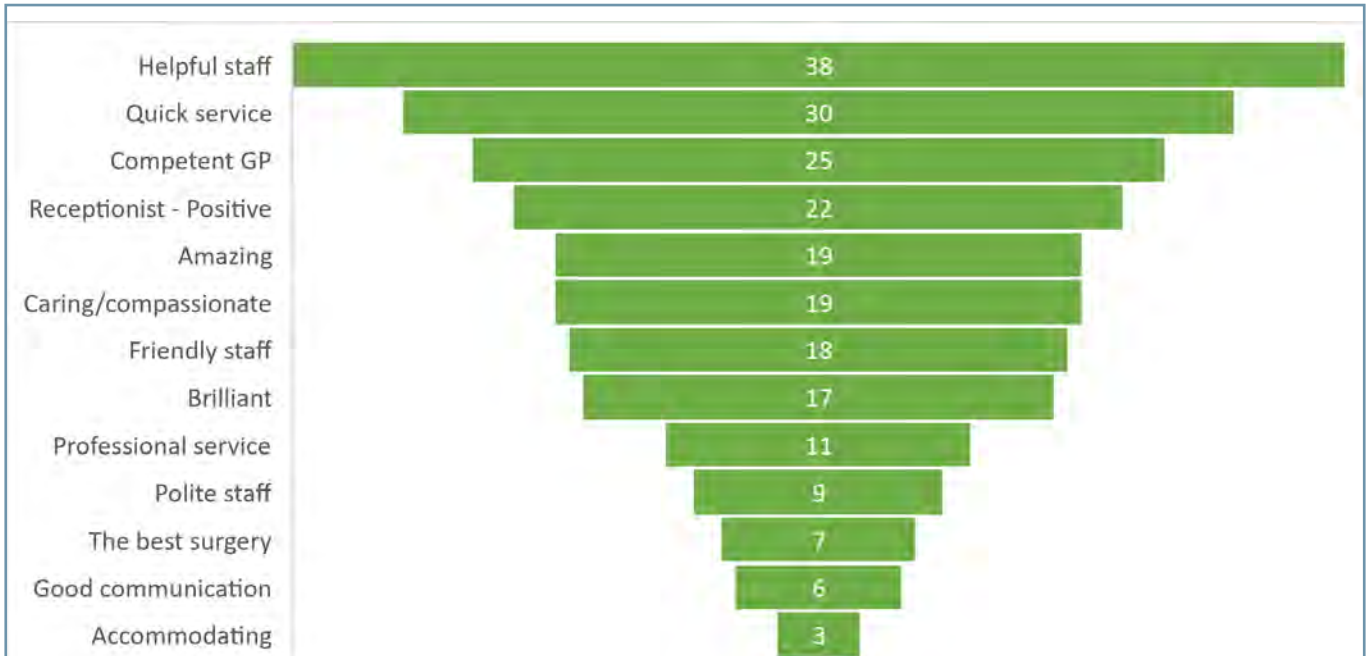
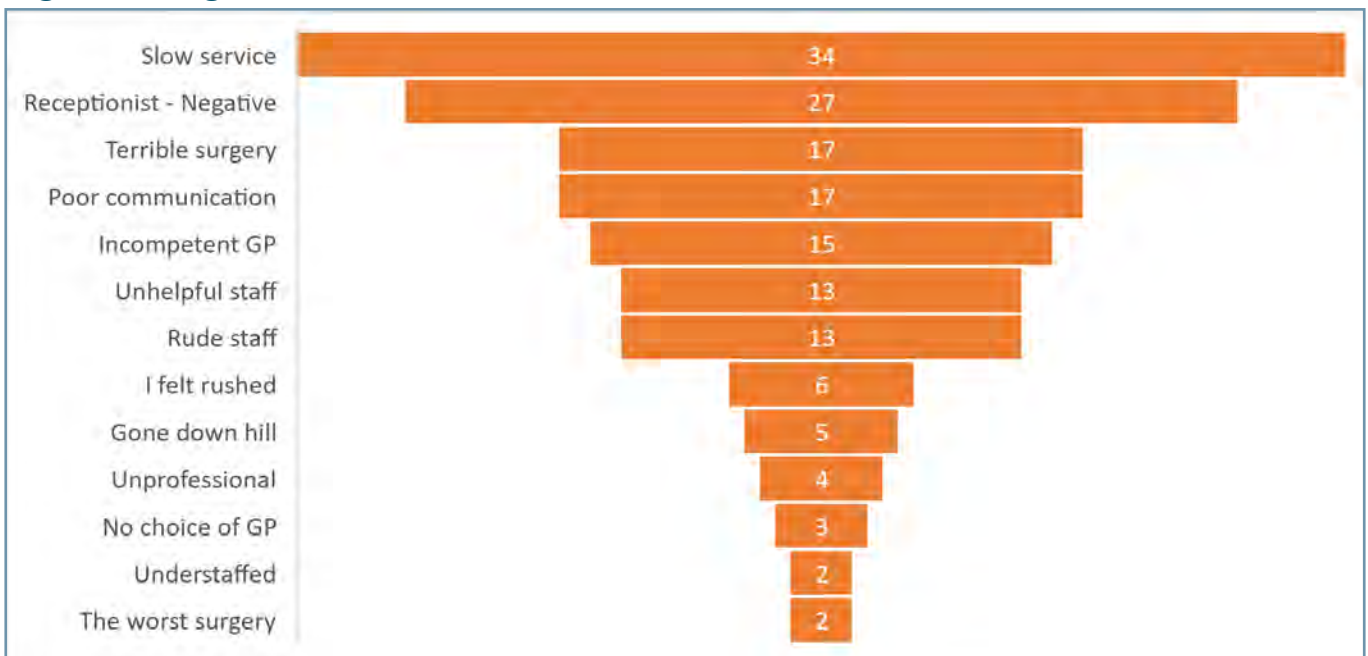


Figure 11: Negative comments within GP Practice reviews



Recommendations

- eConsult needs to be simplified and made more user friendly. GP Practices should consider what questions can be eliminated from the eConsult process and provide a direct messaging service for those who struggle with eConsult.
- Provide continuity of GP where possible.
- Ensure clinical staff are aware of the patient's situation and history before consultation.
- Provide patients with a smaller window of time to expect a call back from the GP.
- Offer a choice of appointment methods, for example, face-to-face, video or telephone, and make sure the patient is satisfied with the option used.
- The option to book online appointments should be re-instated when it is safe to do so.
- New, simplified prescription practices brought in during the pandemic should remain.
- Allow enough time for people to feel they have had a full consultation where they are listened to.
- Train staff in person-centred care.
- Staff training in listening skills.
- Provide dementia training for all staff.
- Review websites for accessibility and make adjustments where necessary.
- Consider how information is presented and categorised on Practice websites to make them more user friendly.
- GP Practices should provide information on their website about Healthwatch Gloucestershire's service to their patients.

Next steps

We are sharing our report and anonymised data with NHS Gloucestershire Clinical Commissioning Group (CCG) and we will continue to monitor peoples experiences of accessing GP Practices.

Thank you



Thank you to everyone who took the time to give us their feedback, and to the Gloucestershire Deaf Association for their participation and profound insight. Thanks also to our volunteers who gave their time to assist with the collation of feedback, and to all the VCS organisations and communities who shared the survey and helped raise awareness of the project, which was invaluable in increasing the number of participants.

Stakeholder's response

NHS Gloucestershire Clinical Commissioning Group
Becky Parish
Associate Director of Engagement and Experience

“Thank you to the Healthwatch Gloucestershire team and volunteers for undertaking this research into local people’s experience of accessing care through GP Practices in Gloucestershire during the pandemic; and for sharing the results with us. This report, together with other feedback we have collected over the last year, will help us to develop the local primary care offer to our patients into the future.”



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Appendices

Appendix A. Survey questions

N.B. The questions highlighted in **PINK** were also asked on the Facebook polls.

Access	
1.	How do you like to make an appointment with your GP Practice?
2.	How easy or difficult is it to make an appointment?
3.	Has the way you access your GP Practice changed since the start of the pandemic?
4.	Please tell us more about your experiences accessing the GP.
Technology	
5.	Which technology/digital services have you used?
6.	Has your use of technology/digital services with your GP Practice changed since the pandemic?
7.	How effective do you find the technology?
8.	Please tell us more about your experiences with technology.
Staff attitude	
9.	Which GP Practice staff have you had contact with in the last six months?
10.	Are staff polite?
11.	What is your experience of the staff?
12.	Please tell us more about your experiences with staff.

Appendix B. Age and location of respondents

Figure 12: Age (survey and Facebook poll respondents)

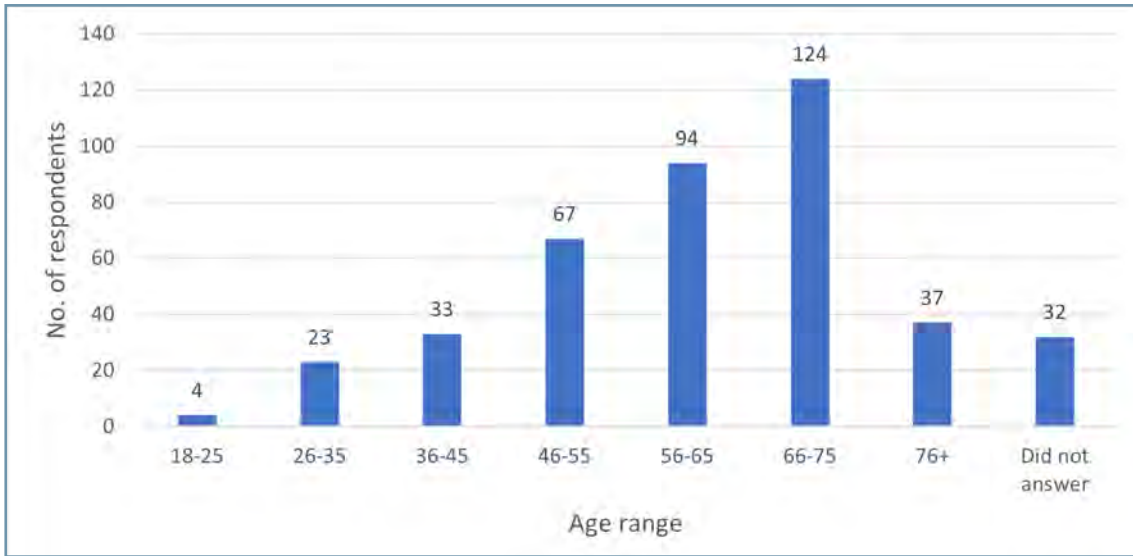
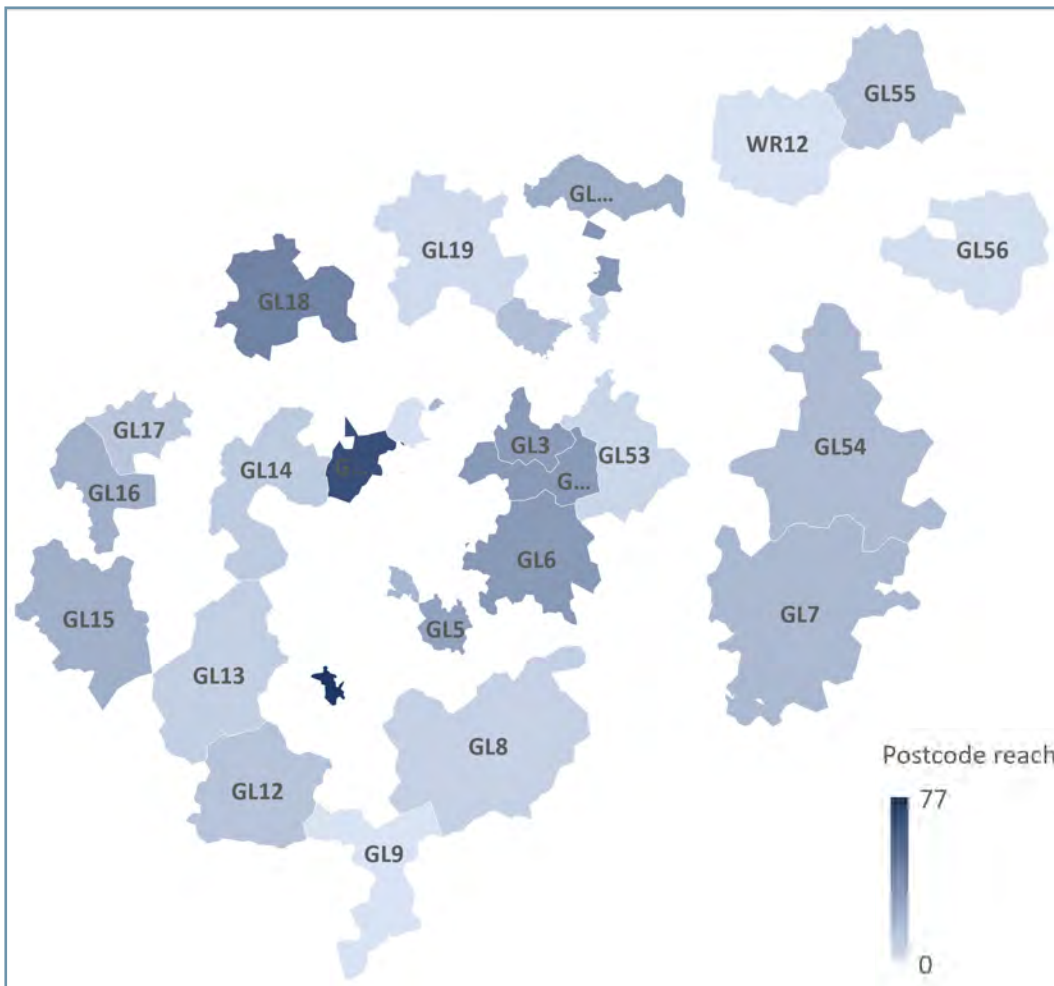


Figure 13: Location (survey and Facebook poll respondents)



Postcode	Count
GL1	20
GL2	66
GL3	32
GL4	33
GL5	29
GL6	33
GL7	19
GL8	4
GL9	0
GL10	20
GL11	77
GL12	14
GL13	9
GL14	11
GL15	23
GL16	23
GL17	13
GL18	43
GL19	4
GL20	24
GL25	1
GL50	6
GL51	16
GL52	34
GL53	6
GL54	18
GL55	12
GL56	2
WR12	1

Why not get involved?



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