

Exploring access to GP services in Dudley borough

March 2026



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“It is marginally easier to see a doctor now, compared to a couple of years back, but it's still not nearly as easy as it should be.”

Following up

In 2023 over 1000 people across Dudley borough shared their experiences of accessing GP services with us. Their stories highlighted areas of inequality of access.

We found people who are digitally excluded and those with additional communication needs disproportionately experienced barriers to accessing primary care services.

We also identified a lack of information sharing with patients about key services.

We worked with partners to address the concerns raised by the community, namely by co-producing the Dudley GP Practice Charter.

There have been a number of changes to primary care, all aimed at improving access.

The Dudley GP Practice Charter

All GP practices across Dudley borough have now signed up to the Dudley GP Practice Charter (The Charter). The Charter sets out what patients can expect from their GP practice. All GP practices in Dudley borough have uploaded The Charter to their websites.

Pharmacy First

Launched in January 2024, patients can now get treatment for seven common conditions directly from their local pharmacy. This prevents the need for patients to attend their GP practice, freeing up appointments for those with the most need ([see more page 10](#)).

Modern General Practice

A new model for general practice that moves away from a 'first come, first served' approach. All patient requests are triaged, regardless of how the patient contacts the practice. Once triaged by a doctor, patients are offered an appointment with the appropriate health professional, advice or signposting to other services.

This model aims to ensure that patients are treated according to clinical need. As of January 2026, all GP practices in Dudley borough are Modern General Practice accredited.

Listening to Dudley

We recognise the need to listen to the community as a whole.

We collected over 840 pieces of feedback, including survey responses, written and verbal feedback provided through our engagement.

We explored further by visiting a total of seven GP practices and a pharmacy to speak to patients and assess the information provided in waiting areas.

Healthwatch Dudley volunteers also conducted desk research to support our findings.



595

people completed our survey either online, in person or in GP practices.



55

people shared feedback via a ballot box in one GP practice.



Our volunteers searched for each GP practice in Dudley borough on Facebook, to discover their social media presence.



6

follow up visits to GP practices previously visited, to see whether patient information and The Charter were visible and up to date.



193

people told us their experiences through direct community engagement.



Enter and View visit to a Modern General Practice GP surgery and a community pharmacy with Pharmacy First service (randomised).

Whilst every effort was made to identify and obtain feedback from our diverse community, it was not possible to talk to everyone.

We also did not collect demographic data of the people who provided feedback so assurances cannot be made on the representation of this data on the entire population. The decision was made to produce a shorter questionnaire to focus on the impact of recent changes to primary care, and increase response rate.

We heard from less people during this research than we did in 2023. This could be due to patient fatigue with research into access to primary care. We recommend a focus on actioning existing feedback from the community to improve services.

The survey

- Designed in conjunction with:
 - Local GPs
 - Dudley Group NHS Foundation Trust
 - Black Country Integrated Care Board
 - Healthwatch Dudley volunteers
- Details of the survey were sent to every GP practice in Dudley to display for patients.
- Whilst the responses have not been independently verified, common themes emerged from the data.

GP practice feedback

- We offered feedback boxes to every GP practice. These boxes had feedback cards that allowed for comments that people could return anonymously while in the practice.
- Responses varied between practices, one practice declined to display the box and 15 did not receive any feedback.
- Cards also contained information on Healthwatch Dudley and the survey, if people wanted to provide feedback in a different format.

Information provision

- We attended six GP practices using our powers of Enter & View.
- We did not speak to patients during these visits, we explored the information provided to patients in waiting rooms. We wanted to see if recent changes to GP services was being clearly communicated with patients.

Community groups

We engaged with people in the community through community events and by engaging directly with local services.

**When we began this piece of research there were 42 GP practices in Dudley borough. Bath Street Medical Centre has since closed. Comments from survey respondents may include patients from Bath Street Medical Centre.*



41

GP practices across
Dudley borough*

Community engagement

Group	Demographic group	Feedback provided
Dudley Deaf Focus Group	People with hearing loss	9
HIV Support Group	People living with HIV	4
Dudley Stroke Association	People who have suffered a stroke and their families	35
Men's Health Event	People assigned male at birth	6
Health on a shelf	General public	6
Dudley Adult Community Learning	Adults	1
Local Libraries	General public	5
Carers Coffee Morning/Tea and Chat	Unpaid carers	7
Beacon	People with sight loss	36
Craft Group	Older people	2
Voices for Choice	People with learning disabilities and autism	8
The What? Centre	People who identify as LGBTQIA+	3
Stay and Play Wordsley	Parents	1
Living With and Beyond Cancer event	People living with cancer and cancer survivors	1
The Information Hub at Russells Hall Hospital	Patients and visitors to Russells Hall Hospital	1
Total feedback provided (in addition to surveys)		125

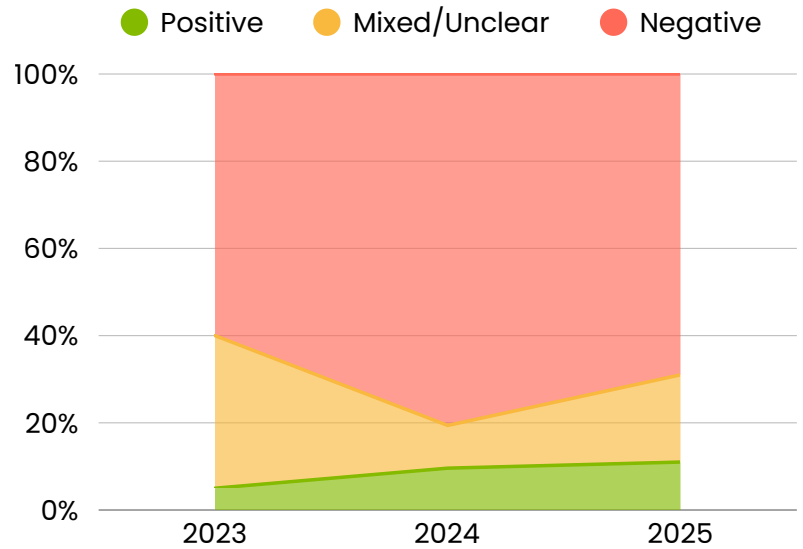
Note

Additional feedback was given via the survey. These numbers are not included here and have counted towards the total number of survey responses.

Have things changed?

The sentiment of feedback we have received on GP services.

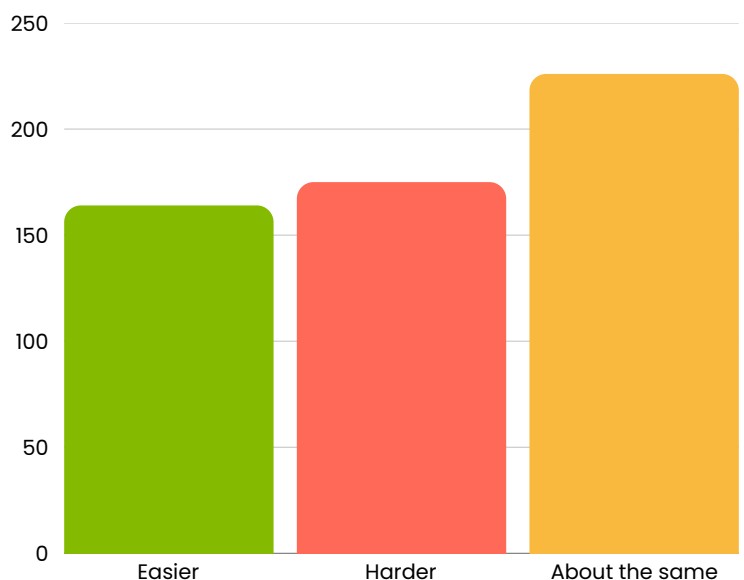
In 2023 60% of the feedback we received on GP services was negative. In 2025 this had increased to 69%. Whilst we do not have enough years of data to demonstrate a clear trend, the information suggests consistent frustrations with GP services.



We asked people if they thought it has been easier to contact their GP practice in the past 12 months. The majority of people said it was “about the same”. With similar proportions of survey respondents finding it either easier or harder.

Overall this data suggests that there is little difference in people’s experiences of GP services in Dudley borough.

In the last 12 months, has it been easier or harder to contact or access your GP practice?



Triage

Patients can access GP services by telephone, in person, online via a GP practice website or via an app. Not all GP services offer all of these options, but all should offer more than one way to contact the practice.

“Who reviews the online forms?
Medical professionals or the receptionist?
Just not good enough.”

-Survey respondent

Triage is the process whereby all patient requests, regardless of the method by which they were made, are assessed by the clinical team and then provided the appropriate appointment, information or signposting.

The triage system aims to ensure patient requests are prioritised based on clinical need and availability.

In line with NHS guidance, GP practices have moved to this triage model, intending to remove the “first come, first served” model that used to be used by some practices.

After being triaged patients may be offered an appointment with a healthcare professional other than their GP. This aims to allocate clinical resources where they are needed and ensure patients see the right person at the right time.

“The triage service works very well and I have never not had a response on the day of submitting my request.”

-Survey respondent



Awareness of booking methods

"They are contactable via all options."
-Survey respondent

Awareness of booking methods varies significantly. While 82% of survey respondents know they can book by telephone, only 59% were aware of website options and 41% were aware that they can book appointments on the NHS App.



phone

82%



in person

56%



website

59%



NHS App

41%

Percentage of people aware of booking method.

Note: not all methods of booking an appointment are available at each GP practice.

"I've only used phone but I am aware of other ways."

-Survey respondent

"You can book an appointment by all of these, online is easier so you can see all available dates and times."

-Survey respondent

We found inconsistencies across GP practices in the ways patients are able to book appointments. Some people reported "always booking in person" whilst others said they were actively discouraged, or turned away, when trying to book an appointment in their practice.

"My 82 year old mother was refused an appointment to her face and sent away to use the online form."

-Survey respondent

"I have checked online & it says online booking is not obligatory & practices must provide ways of contact that all patients find accessible."

-Survey respondent

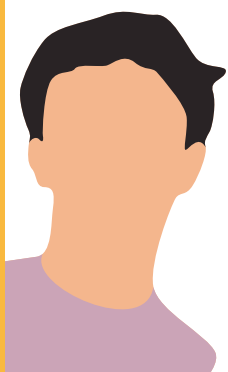
Digging deeper

Digital system books ECG as telephone consultation.

“My practice refuses to make appointments over the phone or in person, directing patients to online services.

I refuse to do online.

I have experience where I did try to book online for an ECG.



I turned up to be told it was the wrong day and it had been booked as a telephone consultation.”

Some patients told us that they had been informed by their GP practice that telephone booking is no longer an option.

“When I telephone the surgery, I am told to book online. Even though I explained my disability, they will not allow me to book an appointment!!”

-Survey respondent

Directing patients to use online services was a recurring issue for people we heard from.

We did not explicitly ask survey respondents which barriers they faced when booking appointments. However, 250 people commented to explain their experience further.

Here we look at what people said when asked about the different booking methods available at their GP practice.



19% of comments reported issues with telephone booking. Including people discouraged from booking via phone.

“My practice won't take appointments over the phone.”

-Survey respondent



35% of comments described being pushed towards using online booking appointments.

“They've now changed making appointments online rather than phone calls which is harder for the elderly.”

-Survey respondent



10% of comments mentioned being told that booking in person was “not available”.

“We can't book in person.”

-Survey respondent

Patient dignity & reception

“Reception team help the best they can to book appointments and answer any questions asked.”
-Survey respondent

Modern General Practice aims to triage requests to ensure care is provided based on need rather than “first come, first served”.

Receptionists are often the first point of contact, but many patients view them as “gatekeepers”.

“You can never get an appointment when you call due to the receptionist thinking they are in charge.”
-Survey respondent

Privacy

People mentioned their frustration around sharing medical information with receptionists.

“I don’t like to give out personal information to people who are not medically trained.”
-Survey respondent

While people described staff as “pleasant and efficient”, others described the reception team as “unhelpful and unempathetic”.

Recognising and meeting the different needs of patients could improve perceptions of hard-working reception teams.

“The whole surgery is able to hear conversation with the receptionist which is embarrassing.”
-Survey respondent

Concerns about sharing information when other people in a waiting room can hear also caused distress for some patients. This should be considered in terms of patient confidentiality and protecting people’s dignity.

“There is a lack of privacy in waiting areas. On one occasion an elderly gentleman just couldn’t hear properly through the glass but everyone else in the waiting room could.”
-Survey respondent



“I work in healthcare and have a good understanding of systems yet I still can't navigate them.”

Sarah told us that she works in healthcare and has a good understanding of triage. She used the NHS App to request an appointment for a reoccurring condition. She told us that she was left frustrated and without an appointment,

“I had experienced ear pain for a few days, it's a reoccurring issue where I get pain in the bone behind my ear.

As I've had this previously and I have some other symptoms plus a family history of neurological cancers I thought I better get it checked out.

I completed the form via the NHS app as I have done before. Although I was experiencing pain I didn't think it was an acute issue so I expected a call or text to say I'd be seen in a few days.

Later I received a text from the GP saying that because my issue was considered acute I would need to call at 8am. It was Friday mid morning...

'Unfortunately' I'd made my request via the wrong route so I would need to call the surgery or contact out of hours.

So they knew what the issue was, the GP decided it was acute but wouldn't book me an appointment because I completed the wrong form.

I thought we were moving towards a digital service. This helps free up the phonelines for people who are unable to use the internet. I thought that if I called up a form would be submitted to the GP for review anyway, so was I cutting out the middle man.

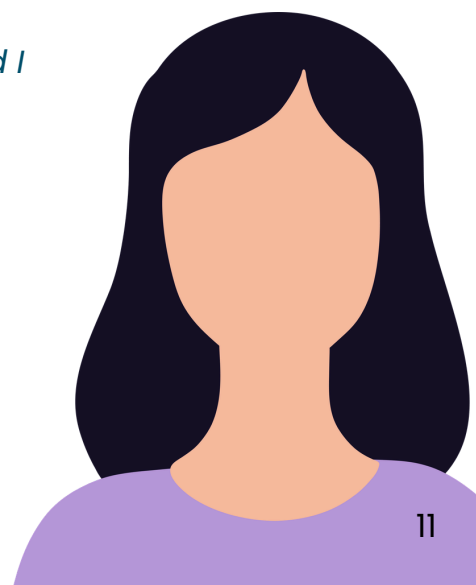
I called the surgery to be told that there were no appointments, no further advice or signposting provide by receptionist, again I was told I'd used the form inappropriately and that it clearly stated it was not for emergencies, even though I never said it was.

I said I'd used the form before with no issues only to be told I must have got lucky that time.

I don't have an appointment booked for next week now because I completed the incorrect form.

It's likely I'll end up in urgent care instead.”

-Sarah, Dudley resident



Pharmacy First

“I’ll always ask pharmacy first unless it’s an emergency.”

-Survey respondent



“I got treatment for a UTI quickly without the hassle of trying to get a GP appointment.”

-Survey respondent

The Pharmacy First service means that patients across England can now get prescription-only treatment for seven common conditions at their local high street pharmacy, without needing to see a GP.

Pharmacies can now provide prescription-only treatments for the following conditions:

- Sinusitis (for patients aged 12 years and over only)
- Sore throat (aged 5+)
- Earache (aged 1 year-17)
- Infected insect bite (aged 1 year+)
- Impetigo (aged 18 years+)
- Shingles (aged 18 years+)
- Uncomplicated urinary tract infections (women aged 16 to 64)

Patients can access the Pharmacy First service by going to their local participating pharmacy and asking for a consultation with a pharmacist.

Patients may also be referred to their pharmacy by their GP practice if they don't have any appointments and believe the pharmacy can help.

We wanted to discover if patients were aware of the Pharmacy First service, if they had used it and what their experiences of Pharmacy First care was like.

“I know I can ask a pharmacist about things but not exact details of Pharmacy First.”

-Survey respondent

Patient experiences of Pharmacy First

“The triage service works very well and I have never not had a response on the day of submitting my request.”

-Survey respondent

Many people who had used the Pharmacy First service told us that it was convenient and saved them from booking a GP appointment.

“I was able to use this service when the surgery was closed in a situation where I needed antibiotics. I was very pleased with the ease of using this service.”

-Survey respondent

“I would rather see a doctor, that way they know all about your problems.”

-Survey respondent

We heard how a “lack of communication between practice and pharmacy” can lead to inappropriate signposting and complications.

“A phone consultation resulted in wrong medication being prescribed.”

-Survey respondent

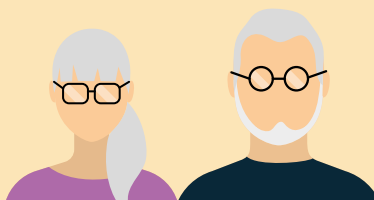
Passed “back and forth”

People told us they had been referred to a pharmacist, or other service, which was inappropriate. The most common issue appeared to concern medication.

“My partner requested a GP appointment regarding his medication - only to be told the pharmacy would deal with it.

The pharmacist rang while my partner was at work, they told him they couldn't deal with his medication and he'd have to book a GP appointment.

He has spent two weeks going between the GP and pharmacy trying to sort his medication out - frustrating!”

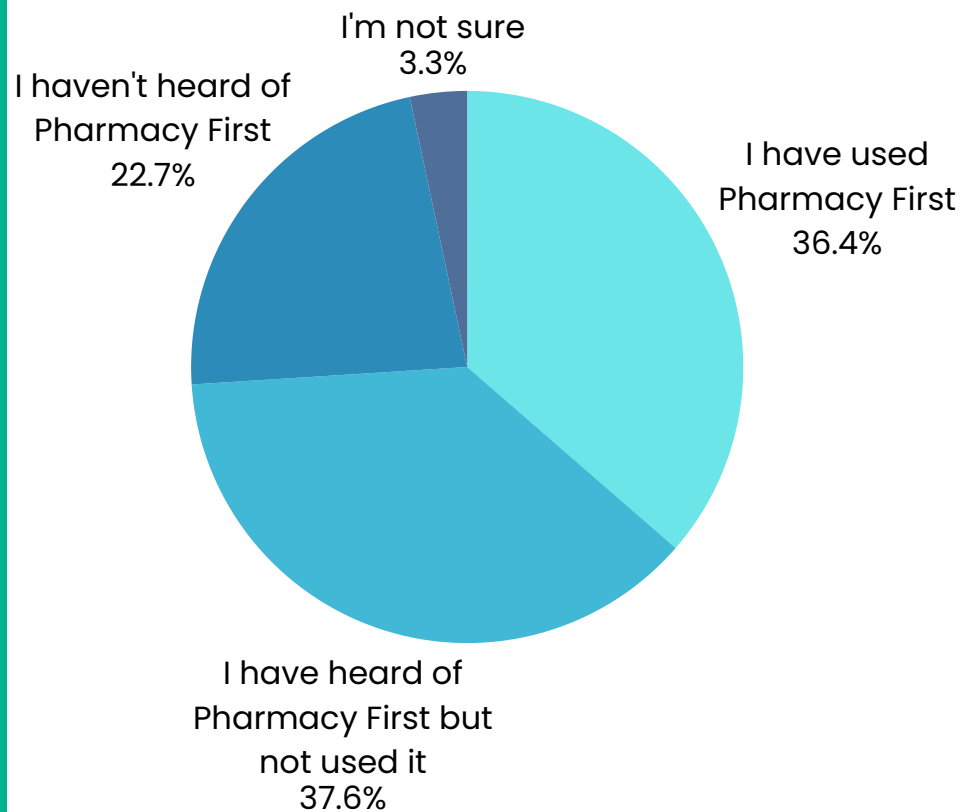


-Dudley resident

Pharmacy First Awareness

We wanted to find out how many people in Dudley borough were aware of the Pharmacy First service.

We found that the majority (74%) of people had heard of the Pharmacy First service. This indicates a high level of awareness of the scheme.



All six GP practices we visited displayed information on the Pharmacy First service on television screens in their waiting room.

Only two out of six GP practices we visited displayed information on the Pharmacy First service on notice boards.

Whilst it appears that majority of GP practices are taking steps to promote the Pharmacy First service, more could be done to promote via different methods to increase patient knowledge.



Communication support

“I am profoundly deaf, I use sign language and need a BSL interpreter “

–Survey respondent

People who may require communication assistance include people with:

- Speech impediments
- English as a second language
- Mental health issues
- Hearing loss

6% of people who completed our survey said they have used an interpreter, advocate or someone else to communicate the last time they attended an appointment at their GP practice.

The majority of people who had used an interpreter or advocate said it was helpful.

“We have used an adult chaperone for my child. [The chaperone] and doctor were fantastic together. “

–Survey respondent

A further 6% of people said they did not use someone to help communicate, but they feel they needed one. This suggests interpretation and advocacy services may not be sufficiently promoted.

“I didn't know this was possible, who qualifies, or how to arrange.”

–Survey respondent

Providing communications in a way that works for patients is essential for ensuring everyone receives the best care.

It can also empower people with the information they need to make informed decisions.

Consistency in communication support should be provided across the board. We heard from one person that communication support differed between staff members at the same practice.

“My GP practice has some very good receptionists that understand my access needs and try to help me.

However, some of the others don't understand my needs.

I have been asked to send an email to the practice despite me telling them that I can't because I have sight loss.”

–Survey respondent

Finding information

We found that the ease of finding information on GP services (including how to book appointments, opening times, staff and staff roles) varied.

People mentioned a number of different methods they used to find information:



Call reception to ask questions



Use Patient Access app



Patient Participation Group newsletter



Notice boards



Practice website



Text messages from GP practice



TV in waiting room



Other websites

There is plenty of health information available online. However, misinformation is becoming increasingly prevalent. People find information using different methods.

For specific information, one person praised their GP practice for answering questions over the phone.

"If I call they will give me information."

-Survey respondent

"I thought the guidelines were to ring at 8 for a same day emergency appointment, when I last did this the reception team said it had changed, however there is nothing on there website or I have had no information to state this."

-Survey respondent



3.48

average rating of how easy is it to find information about GP services

Digital exclusion

The shift to digital-first models is a major barrier for many, particularly for the elderly and those with sensory loss.

Patients reported being turned away in person and told to “go home and use the online form”.

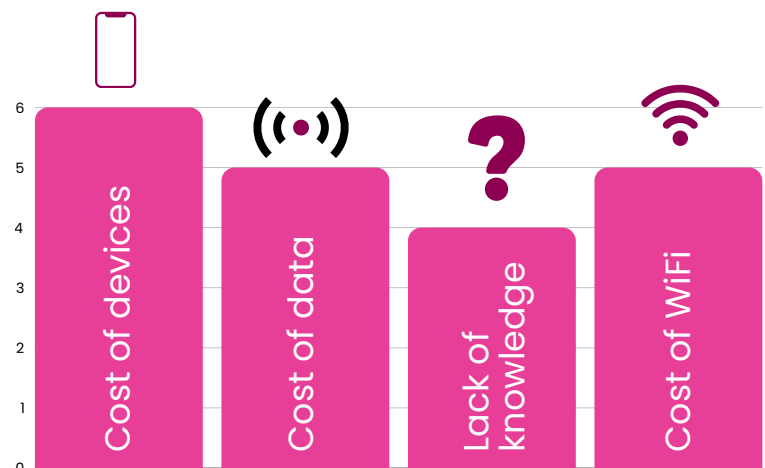
“If you have internet access then you are able get the information, it seems it all hinges on that.”

-Survey respondent

Booking appointments is not the only benefit to people who have access to digital methods.

We discovered that it is easier for people who use digital devices to find information about GP services and other health and care information.

In our other research looking at access to services for people who are experiencing food poverty, people who do not have access to digital devices said this was due to both costs and lack of knowledge.



Number of Black Country Foodbank survey respondents experiencing barriers to technology.

Social media



62%

of GP practices
have a
Facebook page.

“My GP now has a Facebook page.”

While certain demographic groups represent the greater proportion of social media users, the fastest-growing demographic on Facebook are those aged over 55.

“My GP practice has an excellent Facebook page which is regularly updated.”

We found a disparity on the information available on Facebook. 62% of Dudley borough GP practices had a Facebook page. Facebook pages offer a way for more patients to engage with information from their GP practice. However, social media requires consistent management to provide up-to-date information. We found that 23% of GP practice with a Facebook page had not posted within the previous 30 days. This suggests that while some practices have social media, not all of these are sufficiently utilised to provide information.

“Very little activity on the practice Facebook page. But there is an easy link to their website.”

The information shared also varied widely. Our volunteers found some posted “lots of useful information” while others had a “poor posting history”.

Knowledge of services

"I also don't mind seeing other members of the team and feel the system works well."

-Survey respondent

In 2023

86%

of people told us they would like more information on the services their GP practice provides.

In 2024 86% of people told us they would like to know more about different health professionals working at their GP practice.

Since then, Modern General Practice has been implemented, which allocates appointments with the right professional, reducing the need for patients to know the roles of all health professionals when booking an appointment. We have also promoted the different roles on our channels and have encouraged GP practices to do the same.

"I know of some of the different staff, but not certain who is available unless I am occasionally given an option on who to see for treatment."

-Survey respondent

In 2025, 62% of survey respondents told us they know about other professionals at their GP practice. This demonstrates an improvement in patient awareness.

However, when we dig deeper, 22% of people had heard of different professionals but were not sure what the different professionals do. A further 17% of people didn't know of different professionals at their GP practice.

"The person calling doesn't make clear what their role is. I know from talking to others that they do not always get to see a doctor when they would like to, but are allocated to a paramedic or other team member."

-Survey respondent

"I assume role descriptions might be visible in the waiting area to inform patients, but I don't know if this is the case."

-Survey respondent

All six GP practices we conducted a visit in displayed information on staff roles in their waiting area. For one GP practice we explicitly recommended this in 2023 after patients raised concerns.

Information screens

We conducted Enter & View visits to six GP practices to discover what information was available to patients and their carers.

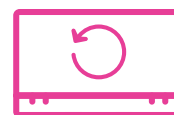
We wanted to know:

1. Does the practice display information on The Charter?
2. Does the practice display information on Pharmacy First?
3. Does the practice display information on staff roles/services at the practice?
4. Does the practice display information on how to book appointments?
5. What other information is shown?
6. Is information up-to-date or relevant?

We found some information was out of date, suggesting that the information provided may not be consistently reviewed and updated.

Some of the information provided, including information on summer colds and holiday vaccinations, may not have been relevant to the majority of patients during the time we visited.

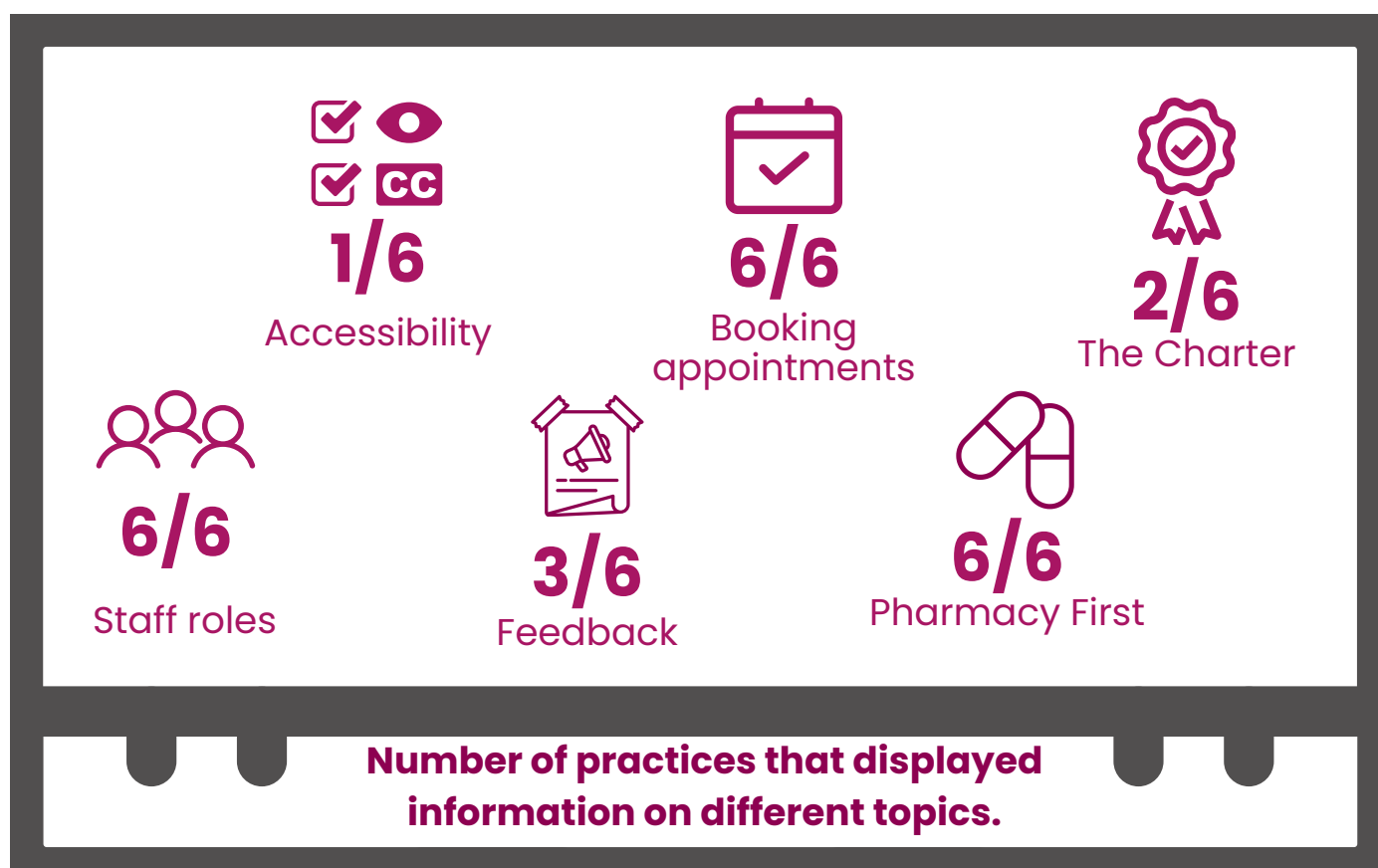
The time it took for all the information to be displayed (loop time) on the screens ranged from 20 minutes to 85 minutes.



37 minutes

The average time for the display to showcase all information (loop time) before restarting the loop.

Overly long loop times risk patients and carers missing key information.



Dudley GP Patient Charter

The Charter in practice

Bembe was unable to register with a GP without ID. This had prevented him from getting a GP or seeking healthcare for over seven years.

We were contacted by another charity as Bembe had been unable to register with a GP practice despite being given a card stating he does not need an address to register with a practice. He had visited a couple of practices but was told he was out of the area.

We identified a local GP practice and contacted them to check he was within their catchment area. Bembe does not have any ID, so we agreed with the practice the person would take a letter as proof of address.

After helping him to register with a GP he is now seeing his doctor and receiving treatment for multiple conditions.

“You don’t know how much what you have done has helped me.”

-Bembe



The Charter

The Charter explains what you can expect when using GP services in Dudley borough. It is based on a principle of mutual respect.

Everyone who uses and provides GP services has a right to be treated as an individual and should be treated with dignity and respect.

The Charter covers areas of patient care including:

- Making an appointment
- Signposting
- Digital services
- Health inequalities
- Registration rights
- Working with other organisations
- Patient expectations



bit.ly/GPCHARTER

Dudley GP Patient Charter

"I'm not aware of where this is being promoted. I can't see it on the practice website. I've not seen any leaflets about it or had any communication about it."

-Survey respondent

The Charter was developed in response to our research into access to GP services in 2023. Every practice in the Dudley borough has agreed to The Charter.

"[The Charter] is a good asset for the NHS."

-Survey respondent

Only 14% of people who answered our survey had both heard of and read The Charter.

"I didn't know about [The Charter] until this questionnaire."

-Survey respondent

People who had not heard of The Charter expressed a desire to know more.

"Not sure what this is but would love to learn about it!"

-Survey respondent

People told us they thought The Charter was good in principle but were sceptical of the real world impact and whether it would be upheld.

"I like the principles within it and that it is displayed on practice websites.

I think it can be reassuring for patients. But hopefully it is followed in practice as well as in theory."

-Survey respondent

"[The Charter] is rather vague but optimistic."

-Survey respondent

This highlights the importance of empowering patients with information so they can better advocate for themselves and their loved ones.

Dudley GP Practice Charter

Despite all 42 practices in Dudley borough agreeing to The Charter, four of the 42 practices do not have The Charter available on their website.

Patients told us they wanted the Charter to be easier to find.

“I’m not sure were to look for it.

They should have it on the screen and on notice boards or have a hard copy in GP practices and local pharmacies.”

–Survey respondent

We visited six GP practices to discover the visibility of The Charter.

Only one of the practices we visited had the Dudley GP Practice Charter, or information about it displayed on notice boards.

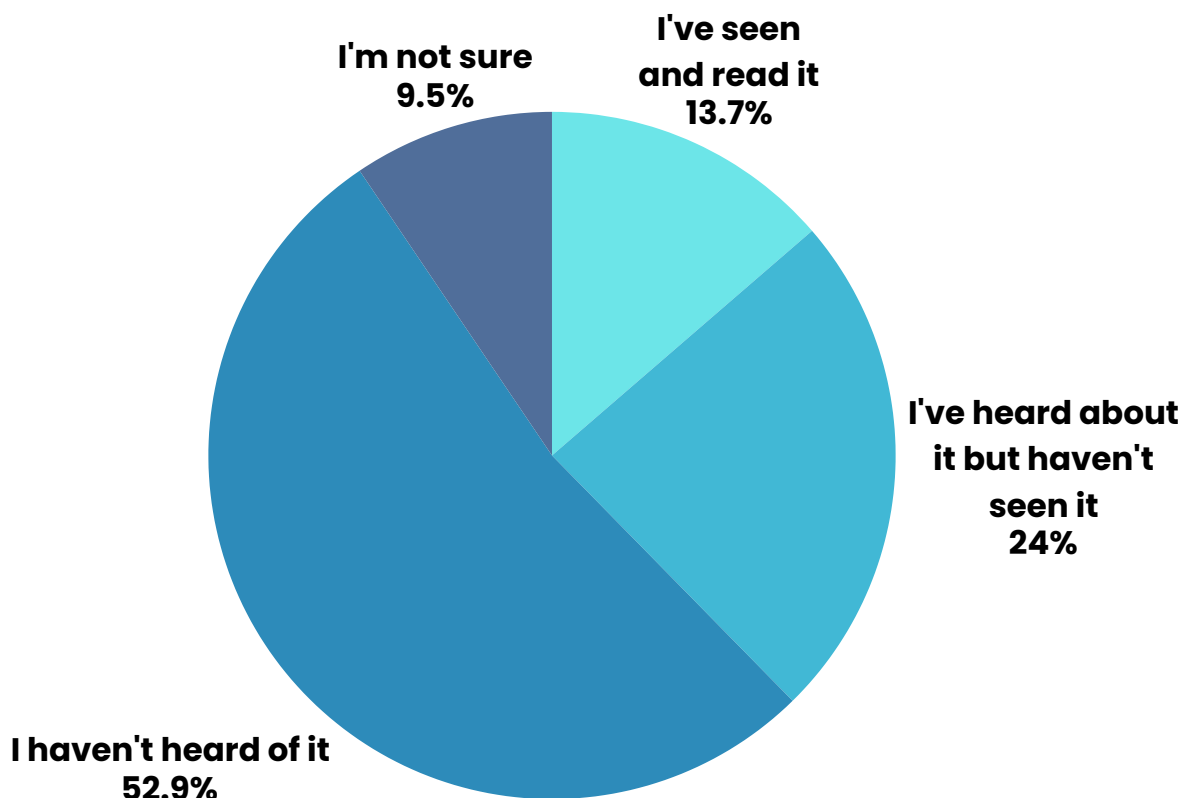
Patients suggested providing physical copies of the Charter within practices.

“You shouldn’t have to go looking for it. How do you look for something you know nothing about?”

–Survey respondent

People’s awareness of The Charter

“Have you seen or heard of the Dudley Practice and Patient GP Charter?”



Recommendations

✓ Digital exclusion

- Ensure all practice staff are aware that online booking is not mandatory.
- Digital exclusion training for staff to understand barriers to digital services.
- Provide support for patients who wish to use online services but experience barriers.
- Consider “digital opt-out” for vulnerable patients to ensure they are not disadvantaged by a lack of smartphones or IT skills.
- For patients that are unable to make enquiries online, strive to maintain patient dignity and privacy when taking patient information.

✓ Health inequalities and communication support

- Provide all medical information in multiple formats including Easy Read, BSL and screen reader friendly.
- Ensure patient facing staff receive appropriate accessibility training.
- Ensure that patients who have additional communication needs have their privacy and dignity considered in all communications.

✓ The Dudley GP Practice Charter

- Display The Charter in waiting rooms.
- Ensure The Charter is available on every GP practice website.
- Provide accessible versions of The Charter.
- Amend The Charter for individual practices to explicitly state available booking options.

✓ Sharing information

- If social media pages are used for communication, these should be updated regularly with relevant information.
- Provide information on booking processes, staff roles and Pharmacy First in a number of different formats.
- Ensure the information provided on digital displays in GP practices is updated and contains relevant, timely information.

Response to findings

Thank you to Healthwatch Dudley for producing this important follow-up report on access to GP services in the borough, and for your continued commitment to hearing directly from our communities. We recognise the scale of work involved in gathering this insight, particularly the extensive engagement with patients, practices, and community organisations.

The findings reflect both the progress that has been made and the challenges that still need to be addressed. Primary care is changing, practices are increasingly delivering care through multidisciplinary teams, embedding triage as standard practice, and making greater use of digital tools to support patient access. These developments bring real benefits in terms of capacity, patient safety, and responsiveness. However, as this report highlights, more work is required to ensure that these changes are clearly communicated, well understood, and experienced positively by all patients.

We fully support the recommendations set out in the report. We acknowledge the need to:

- Strengthen awareness and visibility of the Dudley GP Practice Charter, ensuring all patients know their rights and what to expect from their practice.
- Improve communication with patients about new ways of working, including the triage model, the range of professionals within practice teams, and services such as Pharmacy First.
- Address digital exclusion so that patients are never disadvantaged by increasing use of online and app-based systems.
- Ensure that patients can continue to access GP services in ways that work for them, including telephone and in-person routes—not solely digital options.

We are committed to ensuring that this report informs the ongoing development of primary care locally. We will work closely to support practices in addressing the recommendations, to strengthen practice engagement, and to ensure that teams across the system are equipped to respond to the areas of concern identified by patients.

Finally, we would like to personally thank Healthwatch Dudley for the depth of insight presented in this report and for the patient-centred approach taken. Your work continues to play an essential role in shaping services and supporting patients across our borough. The contribution you make, both through this report and the previous year's work, has been invaluable, and we would like to express our sincere thanks and ongoing support for everything you do.

Jag Tomlinson

**Primary Care Commissioning Manager – Dudley
NHS Black Country Integrated Care Board**

Daniel King

**Head of Primary Care
Place Division
The Dudley Group NHS Foundation Trust**

Notes

Hearing from the community

- The need to reach out to people and communicate in a variety of methods is highlighted by how we received feedback in this research.
- We shared the survey widely through email, local community groups, interactive posters and leaflets plus volunteer support, receiving 156 responses through these channels. Additionally, 156 responses came via promoted social media posts and our website.

Quotes

- Quotes have been anonymised to protect the privacy of people responding to our research.
- Comments may have been edited for clarity and conciseness.

Notes

- **Patient Access:** Patient Access connects you to local health services when you need them most. Book GP appointments, order repeat prescriptions and discover local health services for you or your family via your mobile or home computer.
- When we began this piece of research there were 42 GP practices in Dudley borough. By the end of this research, Bath Street Medical Centre has since closed. Comments from survey respondents may include patients from Bath Street Medical Centre.
- We have included Bath Street Medical Centre in the data.

Update on funding for GP services

- On 24 February, the government announced details of the new GP contract.
- Our hope that these changes to the new GP contract and accompanying plans will make it easier for people to access GP care.
- We encourage members of the public to continue to share their experiences of accessing primary care so we can monitor the impact of future changes to services.

Notes

References

1. Healthwatch Dudley (2024) Exploring access to GP services in Dudley borough. Available from: <https://www.healthwatchdudley.co.uk/report/2024-06-05/exploring-access-gp-services-dudley-borough> [Accessed 26 February 2026]
2. Healthwatch Dudley (2025) Dudley GP Practice Charter highlights patient rights. Available from: <https://www.healthwatchdudley.co.uk/news/gp-practice-charter> [Accessed 26 February 2026]
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4. NHS England (n.d.) Modern General Practice Model. Available from: <https://www.england.nhs.uk/gp/national-general-practice-improvement-programme/modern-general-practice-model/> [Accessed 26 February 2026]
5. Njeru J et al. (2017) Telephone triage utilization among patients with limited English proficiency. *BMC Health Services Research* 17:706

Have your say

If you have had an experience with health or social care, good or bad, we want to hear from you.

By sharing your story you can help to bring about positive change to local services.

Share your story with our team:

 **03000 111 001** local rate number

 **07983728913** WhatsApp message

 www.healthwatchdudley.co.uk/have-your-say

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**Committed
to quality**

Healthwatch Dudley is committed to providing a quality service, from how we collect data, to the information we provide. Every three years we perform an in-depth audit, in conjunction with Healthwatch England, to ensure we meet this high standard.

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