



Have your say 

On health and care  
services in Bridlington



# Bridlington Health and Wellbeing Strategy Survey.

September 2024



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## Introduction

NHS Humber and North Yorkshire Integrated Care Board (ICB) is a statutory organisation accountable for NHS spend and performance for 1.7million people.

The ICB is a core member of the [Humber and North Yorkshire Health and Care Partnership](#), alongside NHS providers, local councils, health and care providers and voluntary, community and social enterprise (VCSE) organisations.

## Background

Bridlington has a registered GP population of over 41,000 patients. Although the East Riding of Yorkshire overall has relatively good health outcomes, there remain pockets of deprivation, and these are most densely concentrated in the Bridlington area (see Appendix 1). The town demonstrates a number of the challenges described in the recent report from the Chief Medical Officer on coastal communities. These challenges include: an ageing population with a positive net inward migration of people of retirement age; difficulties in recruitment in health and care jobs; pockets of significantly low-income levels; higher levels of substance misuse; limitations on transport access to surrounding areas.

The resulting health outcomes from this wider socio-economic context are some of the most challenging in the ICB. This suggests there is a need for a strategic response focussed on improving overall health and reducing health inequalities.

The overarching aims of the strategy are:

- Upstream intervention to prevent disease progression and the support improvements in the wider determinants of health.
- Improving management of chronic disease and secondary disease prevention.
- Supporting independence through re-ablement, rehabilitation and access to community support.
- Early diagnosis and identification of disease to allow earlier access to curable medical intervention.
- Embrace parity of esteem and recognise there is no health without good Mental Health.
- Supportive Palliative Care enabling patients to experience a 'good death' including, where possible, enabling choice of place of end-of-life care.

## Why is this engagement necessary?

Engaging with the population of Bridlington on a future health and wellbeing strategy is important and necessary for several reasons.

Understanding the specific health and wellbeing needs and priorities of Bridlington's residents ensures that the strategy addresses the most pressing issues. Tailoring initiatives to the local context makes them more effective and meaningful for the community. Residents have valuable insights and firsthand knowledge about the challenges and opportunities in their community. They can suggest practical solutions that are more likely to work in the local context.

Engagement helps identify barriers to accessing health services or adopting healthy behaviours, allowing for targeted interventions. It can highlight disparities and ensure that strategies are inclusive and equitable, addressing the needs of all population groups. Strategies developed with community engagement are often more effective because they are grounded in the actual experiences and needs of the population. Community input can lead to innovative ideas and solutions that might not emerge from a top-down approach.

## Executive Summary

The *Bridlington Health and Wellbeing Strategy Survey* was conducted by NHS Humber and North Yorkshire Integrated Care Board (ICB) to address critical health challenges facing the local population.

Bridlington, East Riding of Yorkshires largest settlement with over 41,000 registered GP patients, experiences a combination of factors impacting health, including an aging population, a concentration of deprivation, recruitment challenges in the health and care sectors, substance misuse issues, and limited transport options. These factors combine to contribute to significant health inequalities and some of the most difficult health outcomes within the region, prompting the need for a strategic response aimed at improving overall health and reducing unacceptable disparities.

The survey, which ran from July 8 to August 30, 2024, gathered 745 responses through online platforms and paper surveys available at community locations. This engagement effort was supported by face-to-face outreach and focus groups, particularly at local schools, to ensure broad community input. The survey aimed to understand local residents' perspectives on health services, access to care, and areas where improvements should be made.

Overall, the findings highlight several areas where access to healthcare is limited, including dental services and general practice appointments. Participants expressed frustration with long waiting times, challenges with booking systems, and what they deemed to be a lack of certain services locally, such as Accident & Emergency (A&E) care. Mental health services were also flagged as needing significant improvement, with concerns around long waiting times and insufficient support, particularly for young people. In addition to healthcare access issues, transport barriers in this remote coastal community further challenge the ability of some residents to seek timely and accessible medical care.

While there were some positive reflections on specific GP practices and community health services, the overwhelming sentiment indicates a need for improvement in healthcare accessibility and delivery. The survey findings will inform future strategic actions, ensuring that Bridlington's health and wellbeing needs are addressed in a comprehensive and equitable manner. The results underline the importance of community engagement and highlight the necessity of ongoing collaboration between healthcare providers, local authorities, and residents to improve health outcomes for all.

## Methodology

It was agreed at the Bridlington Multi Agency meetings that the insight, thoughts and experiences of the people who live in Bridlington and district should be listened to and taken into consideration as part of the future health and wellbeing strategy.

A working group was established to co-design a survey that would explore people's thoughts and experiences around the use of local services, healthy lifestyles and awareness.

The views of people who live or work in Bridlington are important, and engagement with the public via an online survey commenced on 8<sup>th</sup> July 2024 and concluded on 30<sup>th</sup> August 2024. The survey was hosted on our Smartsurvey platform and was available on the ICB engagement webpage (<https://humberandnorthyorkshire.org.uk/our-work/get-involved/>) and our social media channels.

The survey was available to complete on paper at various locations around the town and at our planned drop-in sessions.

Our partners in the co-design of the survey also shared the survey via their own networks by encouraging people to complete the survey either online or by hard copy.

### Public survey:

The launch of the survey was boosted by media coverage and social media as well as through our community networks.

An example of the social media post is below:

Do you live in Bridlington? Have your say on health and care services by completing the short survey below or scanning the QR code.

This is your chance to tell us what you think about local services and to help shape the area's future health and care strategy.

Complete the survey → [www.bit.ly/bridlingtonhealth](http://www.bit.ly/bridlingtonhealth)

To find out more, visit [www.humberandnorthyorkshire.org.uk/our-work/get-involved/](http://www.humberandnorthyorkshire.org.uk/our-work/get-involved/).



The Humber and North Yorkshire ICB engagement team visited several places to conduct face to face engagement and invite people to complete the survey. These included:

The Hinge Centre

Bridlington Health centre

Bridlington Mind Homeless Hub

Headlands School

Bay Primary School

The public survey was sent to our partners and stakeholders, asking them to share the survey with their staff, volunteers, service users and via their social media and newsletters. These partners included teams who work with people from marginalised groups such as the gypsy/traveller community, the LGBTQ+ community, the BAME community and with those who are homeless. We wanted to hear from these groups to allow us to understand any key barriers or difficulties they may experience and to allow us to mitigate for these barriers.

## Survey Results

### Sample size

The percentage of people who respond to a survey is called the response rate. High survey response rates help to ensure that survey results are representative of the target population. A survey must have a good response rate in order to produce accurate, useful results and, clearly, the aim is to have the largest number of people possible to respond. Larger response rates generally tend to lead to increased precision when comparing with the overall target population.

According to Cohen et al (2005, p.93): "A question that often plagues novice researchers is just how large their samples for the research should be." But they suggest that a minimum of thirty is regarded as statistically viable by many researchers.

Other research shows that there are many statistical calculations available to help determine what a good response rate might look like. Generally, the ideal response rates vary based on a number of factors:

- What margin of error can you accept?
- What confidence level do you need?
- What is the overall population size?
- What is the response distribution?

The following website provides more information regarding explanations for the above factors and also provides a calculator to show the ideal response rate.

<http://www.raosoft.com/samplesize.html>

Based on Bridlington's population, a recommended sample size would be approx. 400.

In total there were 745 responses collected, and we would like to thank everyone for supporting the survey and taking part.

Please note that respondents did not have to answer every question and the analysis on each chart reflects this.

In the public survey we asked,

## 1. What areas of health and care do you think are working well in Bridlington?

### Positive Feedback Themes and Counts

#### GP Services:

- **Drs Reddy & Nunn Practice: 55**
  - High satisfaction with effective care, easy access to appointments, and overall improvement in patient experience.
- **Other GP Practices: 17**
  - General positive remarks about other GP practices.
  - Dr. Reddy & Nunn (4)
  - Station Avenue (3)
  - General positive mention of GP services (10)
- **Access to Appointments: 17**
  - Positive feedback on ease of booking, including same-day slots.
- **Online Services: 8**
  - Positive feedback on digital tools for managing prescriptions and appointments.

#### Pharmacies:

- **General Pharmacy Services: 23**
  - Positive aspects of ease of access, helpful advice, and efficient prescription handling.
- **Specific Pharmacies: 7**
  - Praise for specific pharmacy locations or services.

#### Bridlington Hospital Services:

- **Urgent Treatment Centre (UTC): 13**
  - Well-regarded for urgent care services, despite some concerns about wait times.
- **Orthopaedic Services: 8**
  - Effective care for orthopaedic issues.
- **Physiotherapy: 5**
  - Positive feedback about availability and quality of physiotherapy services.
- **Other Hospital Services: 11**
  - Praise for efficiency and staff quality in various hospital departments. Maternity Services: 2

#### Community and Minor Services:

- **Community Nursing Services: 3**
  - Positive feedback about community nursing services.
- **Hospital Outpatients: 2**
  - Positive feedback on outpatient services.

#### Mental Health Services: 15

- Positive feedback on mental health services, including support from local teams and community organisations.

#### Urgent and Emergency Care: 17

- Positive experiences with urgent treatment centres and emergency services, especially at Bridlington Hospital's UTC.

#### Opticians:

- **General Services: 12**
  - General praise for optician services and appointments.

**Walk-In Centre: 8**

- Positive experiences, though some comments about wait times.

**Other Specific Services: 8**

- Mention of specific services like diabetic care and podiatry.

**General Satisfaction: 7**

- **Comments Highlight:** General positive feedback without specific details.

**Online and Technological Services: 6**

- **Comments Highlight:** Positive feedback on online services for prescriptions and appointment scheduling.

**Day Surgery and Specialised Clinics: 5**

- **Comments Highlight:** Positive comments about day surgery procedures and specialised clinics.

**Private Dental Services: 2**

- Positive mentions due to lack of NHS provision.

**NHS App for Prescription Ordering: 1**

- Positive mention for convenience.

**Walk-in Centre: 1**

- Useful service amidst overall dissatisfaction.

**Negative Feedback Themes and Counts**

- **Access to NHS Dentists: 22**
  - Frustration over absence of NHS dental services.
- **Getting GP Appointments: 24**
  - Complaints about long wait times, phone issues, and appointment system challenges.
- **General Service Quality Issues: 25**
  - General dissatisfaction with service quality, staff behaviour, and efficiency.
- **Hospital Services (General): 15**
  - Criticisms of service levels, calls for better utilisation and expansion.
- **: General comments on primary care<sup>13</sup>**
  - Criticisms of specific practices and services.
- **No Positive Aspects: 21**
  - Explicit statements of dissatisfaction.
- **General Comments/None: 216**
  - Comments indicating no positive feedback or overall dissatisfaction.



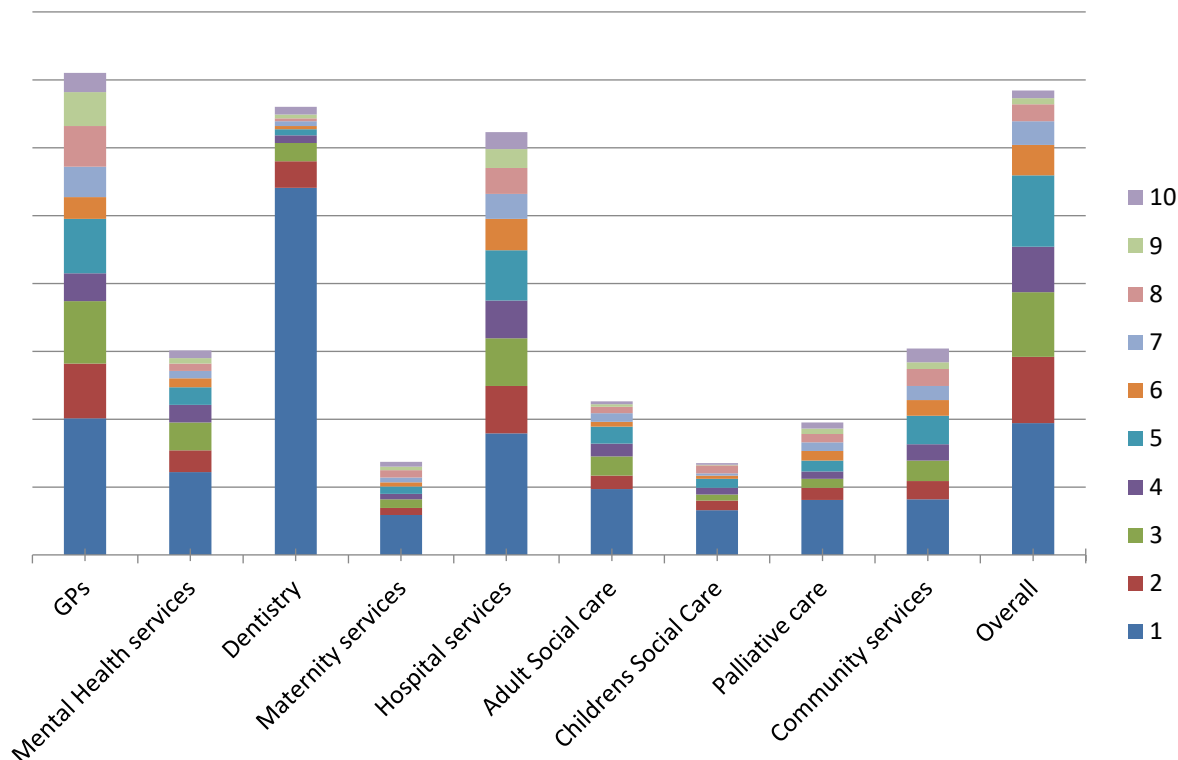
## 2. What areas of health and care are not working so well in Bridlington?

### Themes and Comment Counts:

- **Access to NHS Dentists:** 224 comments
  - A significant number of concerns citing lack of NHS dental provision, long waiting times, with the implication that many residents are traveling outside Bridlington to seek dental care. Some report not seeing a dentist for years or having to go private.
- **GP Services:** 174 comments
  - Issues include difficulty in getting GP appointments, long wait times, and reliance on an online system that many find challenging. Several comments also mention the lack of face-to-face consultations and inconsistency due to the use of locum doctors.
- **Hospital Services and Underutilisation:** 135 comments
  - Bridlington Hospital is perceived as underused, with residents reporting that this results in needing to travel to Scarborough, York, or Hull for services. Many express frustration that routine treatments and scans are not available locally.
- **Mental Health Services:** 74 comments
  - Long waiting times, insufficient therapy sessions, and inadequate support for those with mental health conditions, including children, were mentioned. Some comments highlighted the difficulty of getting specialist referrals.
- **Urgent and Emergency Care (A&E):** 64 comments
  - People perceive that the absence of a local A&E facility means residents must travel long distances, often causing delays in treatment. The need for better urgent care services in Bridlington was mentioned frequently.
- **Specialist Appointments and Referrals:** 54 comments
  - Comments cited long delays in getting specialist care, are causing patients being referred far outside Bridlington, leading to accessibility challenges for the elderly and those without transport.
- **Transportation and Accessibility:** 40 comments
  - Transportation to healthcare facilities outside Bridlington, including to hospitals in Scarborough or Hull, was seen as a significant barrier to accessing care. The discontinuation of services like the Medi-Bus was also a concern.
- **Social Care and Support for Elderly:** 25 comments
  - The elderly population faces challenges in accessing necessary support services, including home visits, and difficulty navigating the healthcare system, exacerbated by a lack of local services.

The above themes reflect the major issues identified by the residents of Bridlington regarding health and care services. The most frequent comments were related to access to NHS dentists and GP services, highlighting the urgent need for improvement in these areas.

3. Please rate how well you think Bridlington’s health and care services are performing if you’ve used them. (1 being the least and 10 being the best)



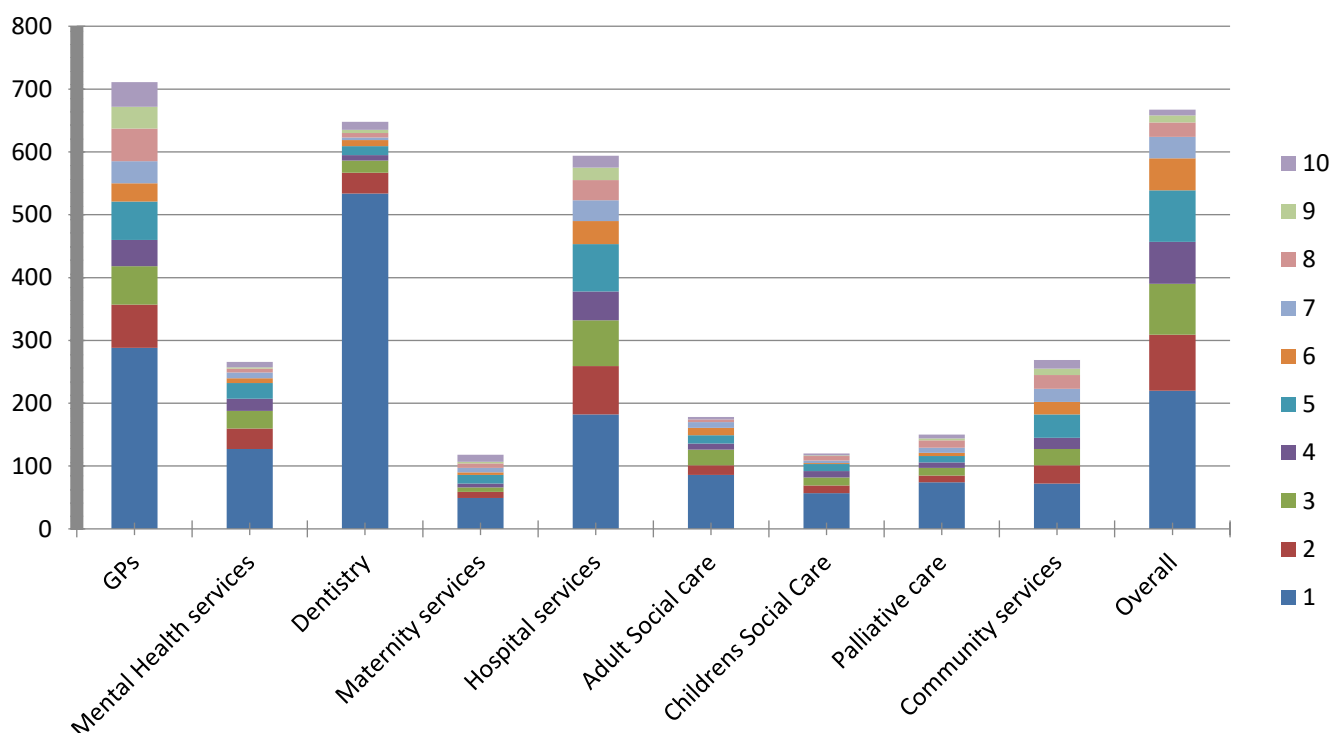
Answer Choice	1	2	3	4	5	6	7	8	9	10	N/A	Response Total
GPs	201	81	92	41	80	32	45	60	50	28	10	720
Mental Health services	122	32	41	26	26	13	11	11	8	11	388	689
Dentistry	541	39	27	11	9	5	7	4	6	11	59	719
Maternity services	59	10	13	8	11	6	7	11	5	7	533	670
Hospital services	179	70	70	56	74	46	37	38	28	25	96	719
Adult Social care	97	20	28	19	25	7	13	9	4	4	462	688
Childrens Social Care	66	14	9	10	13	5	3	12	1	2	535	670
Palliative care	81	18	13	11	16	14	13	12	8	9	485	680
Community services	82	27	30	24	42	23	21	25	10	20	383	687
Overall	194	98	95	67	105	45	35	25	9	11	21	705

- **GPs (General Practitioners)** – Most respondents gave ratings of 1 (201) and 2 (81), suggesting dissatisfaction.
- **Mental Health Services** – Majority rated 1 (122), with a large number skipping this service.
- **Dentistry** – Overwhelmingly rated 1 (541), indicating major dissatisfaction.
- **Maternity Services** – Ratings are spread, with a considerable number of non-applicable responses (533).
- **Hospital Services** – There is a mix of ratings, with many rating it poorly (1 and 2).

- **Adult Social Care** – Also rated poorly, with most respondents opting for 1 (97).
- **Children's Social Care** – Like Maternity services, had many non-applicable responses, but those who rated leaned toward 1 (66).
- **Palliative Care** – Mixed ratings, mostly low but with some mid-range and non-applicable responses.
- **Community Services** – Spread of ratings, with many low ratings (82 rated 1).
- **Overall** – General dissatisfaction with a high number of respondents rating 1 (194).

The skipped responses show that many respondents had no experience with specific services like maternity and children's social care.

**4. Please rate how easy it is to get to (i.e. access) health and care services for people living in Bridlington, if you've used them. (1 being the least and 10 being the best)**

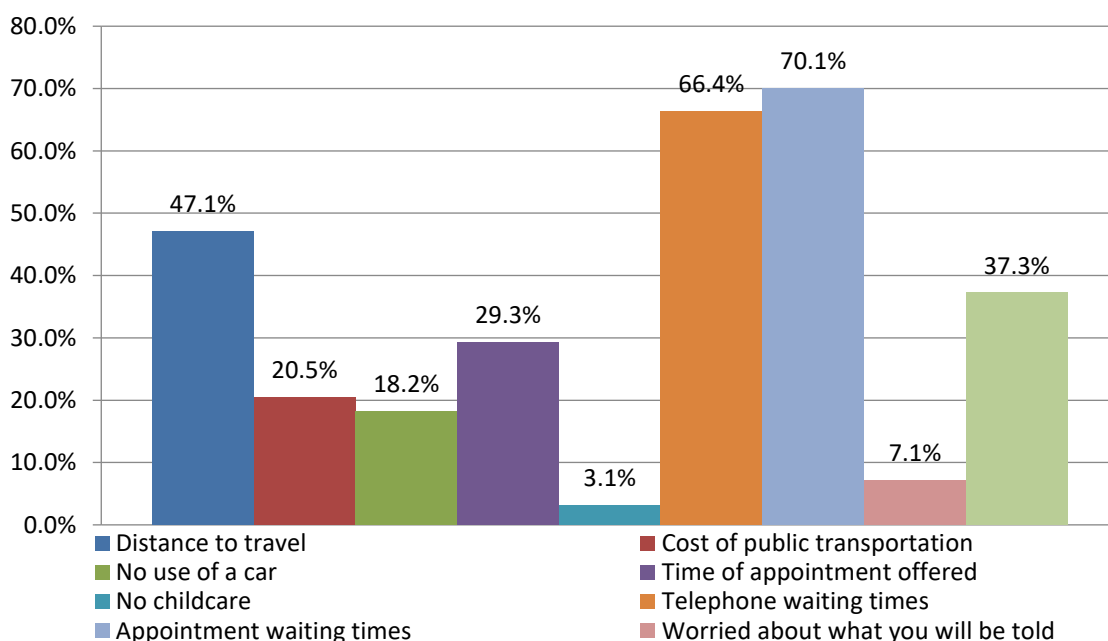


Answer Choice	1	2	3	4	5	6	7	8	9	10	N/A	Response Total
GPs	288	69	61	42	61	29	35	52	35	39	16	727
Mental Health services	127	33	28	19	25	8	9	6	2	9	416	682
Dentistry	534	33	19	9	14	10	4	7	5	13	66	714
Maternity services	49	10	7	6	14	4	7	7	3	11	550	668
Hospital services	182	77	73	46	75	37	33	32	20	19	118	712
Adult Social care	86	15	25	10	13	12	9	4	0	4	500	678
Childrens Social Care	57	12	13	10	11	2	4	7	1	3	547	667
Palliative care	74	11	12	9	10	5	8	12	3	6	522	672
Community services	72	29	26	18	37	20	21	22	10	14	410	679
Overall	220	89	81	67	82	51	34	23	11	9	28	695

- **GPs (General Practitioners)** - Most respondents rated accessibility as 1 (288), indicating difficulty in accessing GP services. The next most common rating is 2 (69), suggesting continued dissatisfaction with access.
- **Mental Health Services** - The majority of respondents also rated this service poorly for access, with 1 (127) being the most common rating. A smaller number gave more favourable ratings, but low numbers in higher scores indicate general difficulties.
- **Dentistry** - Like in the previous table, dentistry is overwhelmingly rated 1 (534), showing significant dissatisfaction in accessing these services. Very few respondents rated it above a 5, signalling widespread difficulty in access.
- **Maternity Services** - A majority skipped this category (550), but of those who responded, many rated it a 1 (49), indicating some difficulty in access. There are a few responses across the spectrum, but the most frequent scores remain low.
- **Hospital Services** - Access to hospitals also saw a large number of respondents rating it poorly, with 1 (182) and 2 (77) being the most frequent. There is a more significant spread of responses, with some mid-range ratings as well (5, 6, 7).
- **Adult Social Care** - Majority skipped (500), but of those who did respond, most rated it as difficult to access (1 and 2 ratings dominate).
- **Children's Social Care** - Another service with a large non-applicable count (547), but those who did rate it mostly gave low scores for access (1 being the most frequent).
- **Palliative Care** - Responses are similar to other services, with the majority rating access poorly (1), though some gave middle-range ratings.
- **Community Services** - Access to community services also leaned towards negative ratings, with most respondents giving a 1 (72), though there is a slight spread of responses towards higher ratings as well.
- **Overall** - In terms of overall access, the majority rated it as poor (220 rated it a 1), followed by other lower scores. Only a small number gave higher ratings (9 or 10).

This data shows that many respondents find it hard to access most health and care services in Bridlington, with the largest complaints directed at GPs and dental services.

## 5. What things stop you using healthcare services? (tick all that apply)



From the multi choice options given for this question, Appointment waiting times (70.1%), Telephone waiting times (66.4%) and distance to travel (47.1%) received the highest response rates. Other was selected 262 times. The reasons given under other are summarised below. Many of the reasons could've been included in the options given in the pre-determined answers such as cost or distance to travel and appointment waiting times.

### **Identified Themes and Counts: Could these have more neutral headings?**

#### **Ability to get Appointments (GPs, Hospitals) - 90**

Comments describe the struggle to get GP or hospital appointments, including long wait times, lack of same-day appointments, and difficulties booking appointments online or by phone.

#### **Travel/Distance to Healthcare Services - 42**

Many respondents mention the inconvenience and cost of traveling to distant hospitals, clinics, or dental services, especially when services were once available locally.

#### **Access to NHS Dentists - 39**

A significant number of comments point to the absence of NHS dental services, forcing individuals to pay for private care or go without.

#### **Impact of Digital/Online Systems - 30**

Difficulties with online booking systems, consultation platforms, and over-reliance on digital communication methods were highlighted as barriers to access, especially for those without internet proficiency.

#### **Disability, Age, Mental Health, Anxiety, and Neurodiversity Barriers - 25**

People with a disability, mental health conditions, particularly anxiety, ADHD, and autism, expressed difficulty in accessing care due to these conditions not being considered or exacerbated by the system.

#### **Practice staff roles - 20**

A theme emerged around receptionists determining who gets access to care, with many seeing this as inappropriate or inefficient.

#### **Cost of Healthcare (Private, Dental, Travel) - 16**

Some respondents discussed the high cost of private healthcare, dental care, or travel costs to access medical services.

#### **Inconsistent Care and Lack of Continuity and follow up - 15**

Respondents expressed frustration at not seeing the same healthcare professional, which led to a lack of continuity in their treatment and anxiety about having to repeat their medical history.

#### **Communication and Follow-Up - 14**

Respondents feel that healthcare services provide poor communication, including lack of follow-up after appointments, long waits for responses to online consultations, and difficulties getting results or updates.

#### **Perceived Poor Quality of Care - 13 comments**

Feelings of not being listened to, dismissed, or misdiagnosed by healthcare providers.

**Staff Attitude - 9**

Several comments mention unhelpful or rude staff members, including receptionists and healthcare workers, which discourages patients from seeking care.

**Long Wait Times for Services (A&E, Consultations) - 7**

Comments noted frustration with long wait times, both at A&E and for consultations after referral to specialists.

**Delays in Receiving Treatment - 7**

Several comments discuss significant delays in receiving urgent treatments or follow-ups, making patients feel neglected.

**No Issues Reported - 6**

A few respondents stated that nothing stops them from using healthcare services, though some noted inconvenience.

**Provision of Local Services (Bridlington Specific) - 6**

Several respondents highlighted the lack of healthcare services in Bridlington, including closures and relocations of previously available services.

**Managing Appointments and Health Systems - 6**

Comments focus on the anxiety and stress caused by navigating the healthcare system, including fear of being dismissed, belittled, or misunderstood by healthcare providers.

**Feelings of Hopelessness and Frustration - 5 comments**

Feelings of being ignored, not heard, or no longer seeing the point in seeking help.

**Parking and Location Issues - 5 comments**

Issues with parking availability, fees, or outdated facilities.

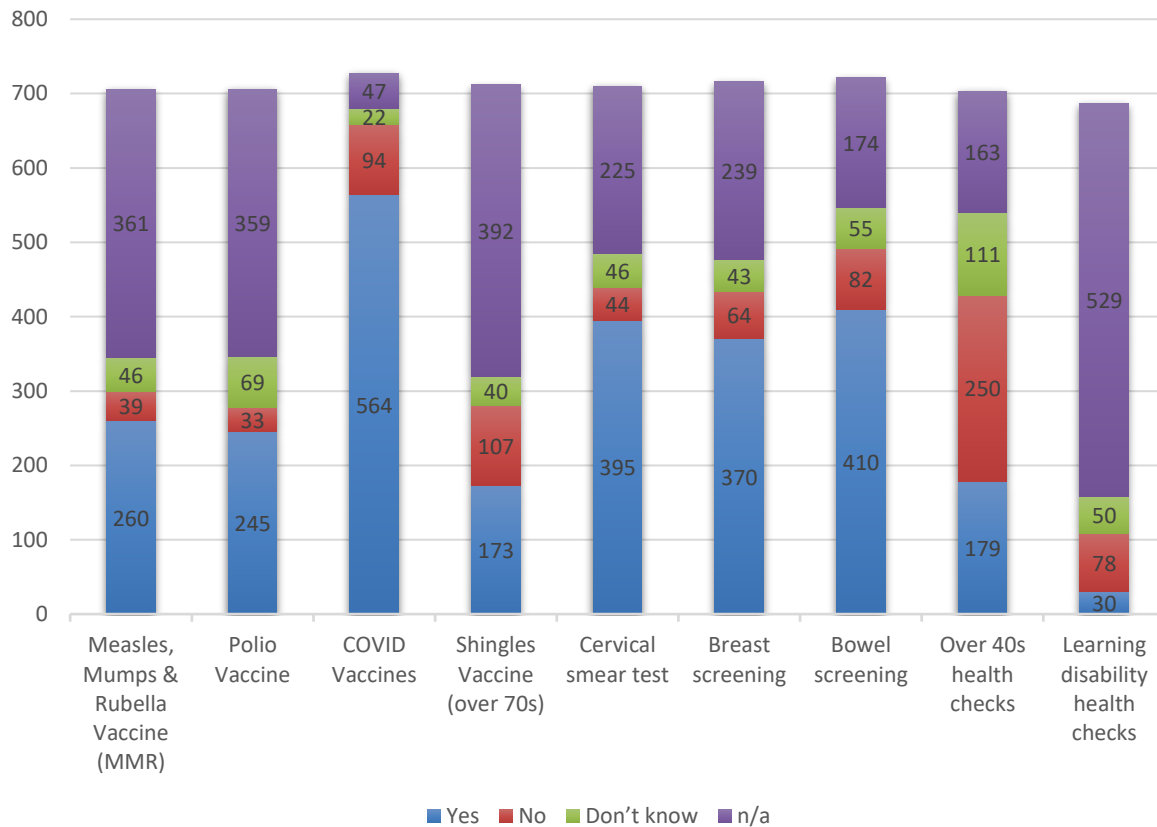
**Healthcare Resources - 4 comments**

General lack of healthcare facilities and professionals, especially in rural areas.

**Trust in the System - 2 comments**

Lack of faith or trust in the healthcare system.

**6. Has everyone in your household taken up the opportunity for the following, if invited?**



**Key Findings & Health Inequality Considerations**

**COVID Vaccines**

- Yes (564 responses): This is the highest "Yes" response rate (77.6%), reflecting the widespread acceptance of COVID vaccines.
- No (94 responses): A notable minority (12.9%) still did not take up the COVID vaccine.

**MMR & Polio Vaccines**

- MMR Yes (260, 36.8%) and Polio Yes (245, 34.7%): Relatively lower uptake, with over 50% of respondents indicating "N/A," Both polio and MMR vaccines are normally given to people at school age, so it is a concern that there are so many who haven't had the vaccines or don't know if they're vaccinated.

**Shingles Vaccine (Over 70s)**

- Yes (173, 24.3%): A significant portion of the population (15%) declined, did not get vaccinated or isn't eligible yet due to age.

**Cervical Smear Test**

- Yes (395, 55.6%): The relatively high uptake suggests a reasonable level of awareness and access to cervical screening.
- No (44, 6.2%): A small but notable percentage have not accessed this screening.

### Bowel and Breast Screening

- Bowel Screening Yes (410, 56.9%) and Breast Screening Yes (370, 51.7%): Over half of the respondents indicated that someone in their household took part in these screenings, but notable proportions of "No" (82 and 64, respectively).
- As these screenings are crucial for early cancer detection, improving participation through targeted outreach, particularly in lower-income or minority communities, can reduce health inequalities and improve outcomes.

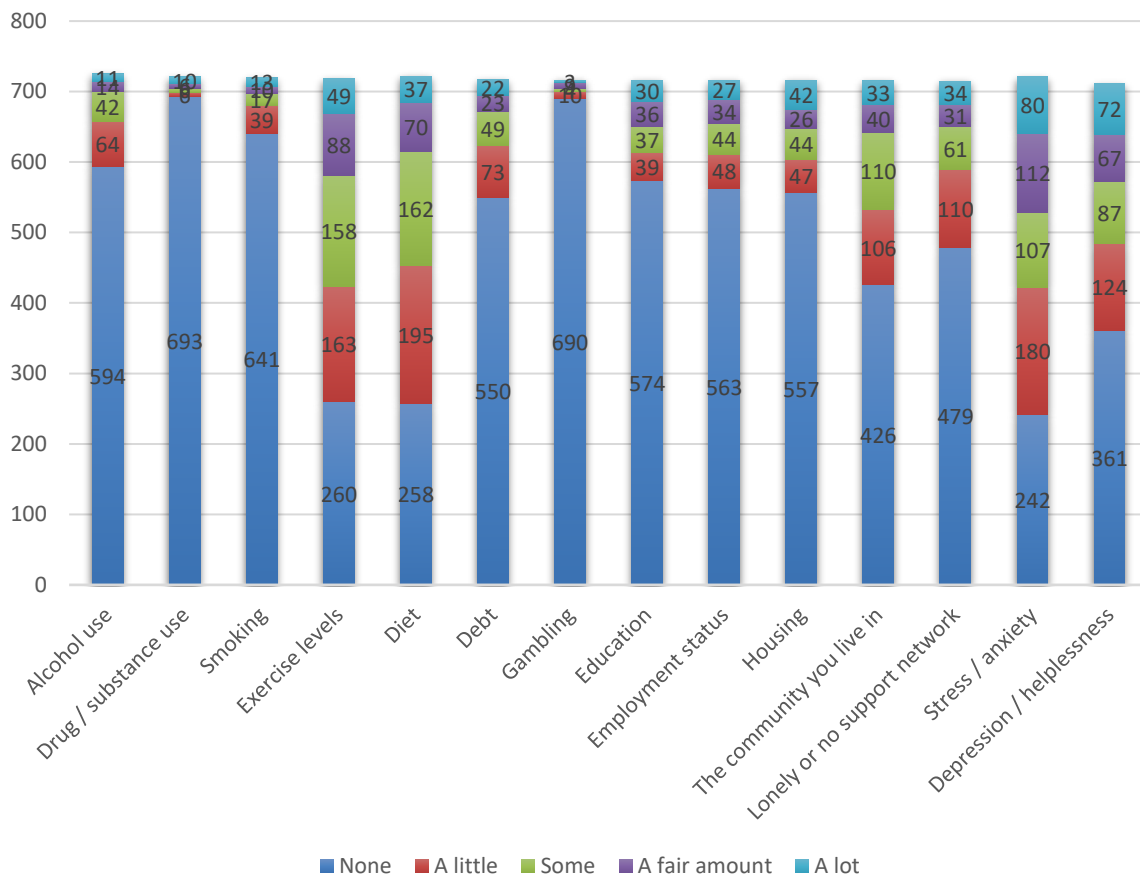
### Over 40s Health Checks

- Yes (179, 25.5%): A high proportion (35.6%) answered "No," indicating that a substantial portion of the eligible population is missing this opportunity.
- Health checks for over 40s can prevent conditions like heart disease and diabetes. The low uptake suggests a missed opportunity for prevention and a likely area where health inequalities exist, especially if access to health checks is affected by socio-economic factors.

### Learning Disability Health Checks

- Yes (30, 4.3%): The lowest uptake of all categories.
- No (78, 11.4%): The "N/A" category (529) dominates here, but this still reflects the importance of targeting vulnerable populations with tailored health services.
- Individuals with learning disabilities are often at a higher risk of poor health outcomes. Ensuring this group receives regular health checks is critical for addressing health inequalities.

## 7. We want to understand the impact of various factors on your health. Please indicate how much NEGATIVE impact each of the following have on your health.

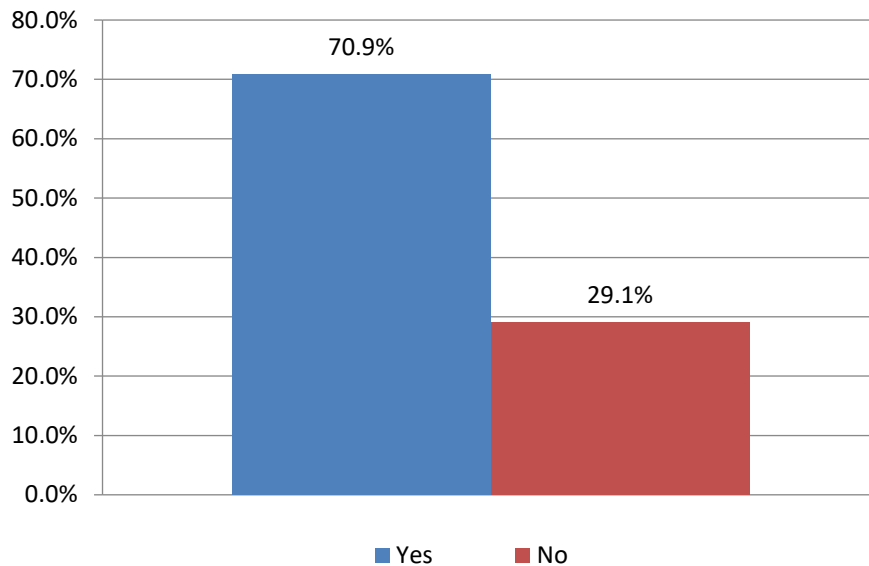




The graph shows the perceived negative impact of various factors on health, based on respondents' feedback.

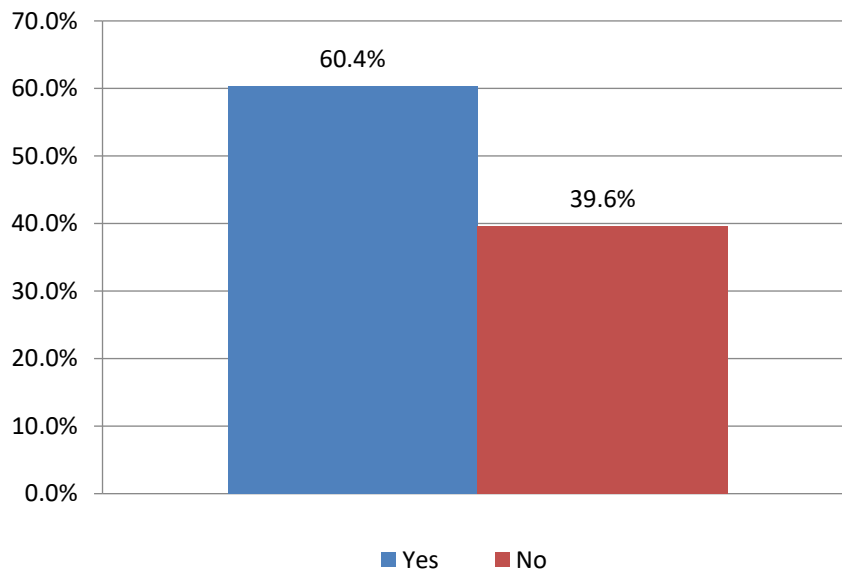
The data highlights that while some factors like alcohol use, drug use, and gambling are perceived to have minimal negative impact by most respondents, issues like exercise levels, diet, stress, and depression have a more significant perceived negative impact on health.

### 8. Are you currently living with a health condition?



516 people or 70.9% of respondents said they are living with a health condition currently.

### 9. If yes, are you getting support for your health condition?



From the 516 respondents who said they are living with a health condition, 314 of them or 60.4% are receiving support.

### 10. If not, why?

Analysis of Comments and Themes of the reasons given for not getting support for their long-term condition. Total Comments: 202

## **Identified Themes:**

### **Long Waiting Times or Unavailable Appointments (56)**

Many people expressed frustration with long waiting times for appointments, procedures, or referrals, with some mentioning waiting over a year or more. This included both physical health issues and mental health services.

### **No Follow-up or Support After Diagnosis (44)**

Numerous comments mention that there is no follow-up after diagnosis. People report being diagnosed but not given any further care or monitoring, especially for chronic conditions like diabetes, arthritis, or hypothyroidism.

### **Difficulty Accessing GPs or Specialist Care (38)**

Many individuals report difficulties in getting GP appointments or access to specialist care. Some also mention receiving inconsistent or inadequate care from healthcare professionals, with multiple references to being "palmed off" or not being listened to.

### **Lack of Local Services (29)**

A significant number of people noted the absence of specialised health services in their local area, requiring travel to other cities or hospitals far away. Bridlington was highlighted for lacking support services.

### **Mental Health Issues and Lack of Support (24)**

Comments highlighted challenges with mental health services, including long waiting times for therapy or counselling, lack of support for conditions like anxiety, depression, and ADHD, and in some cases, suicidal ideations due to feeling unsupported.

### **Self-Managing Health Conditions (23)**

Some respondents indicated that they are managing their health conditions on their own, either because support is not offered, or they feel confident enough to handle it independently.

### **Feeling Dismissed or Not Taken Seriously (18)**

Many respondents reported feeling dismissed or not taken seriously by healthcare providers. Some mention being told their issues are age-related or due to depression or weight, while others feel that doctors are uninterested or rushing through appointments.

### **Medication Issues (16)**

Several comments point to issues with medications, such as difficulties obtaining prescriptions, lack of medication reviews, or inappropriate treatments being prescribed without proper monitoring.

### **Lack of Specialist or Consultant Access (15)**

A subset of comments highlighted difficulties accessing specialists or consultants for ongoing care. Some mentioned that such appointments are only available privately, which they cannot afford.

### **No Need for Support (9)**

A few respondents stated they do not require any support for their health conditions at the moment, either because they feel their condition is manageable or it is not serious enough to require intervention.

**Summary:** The dominant themes include frustration with long waiting times, lack of follow-up care, and difficulties accessing healthcare services, particularly in local areas like Bridlington. Many respondents also express dissatisfaction with the availability and quality of mental health services, feeling dismissed by healthcare professionals, and struggling with medication management. While some are self-managing their conditions, the overarching sentiment is one of inadequate or insufficient support from the healthcare system.

**11. Have you participated in any community activities or groups in Bridlington that have a positive impact on your health? Such as at a community centre, local sports teams, Churches, or support groups etc. If so, please tell us which ones.**

**Total Comments:** 436 comments

**Themes and Counts:**

1. **No Participation** (e.g., no, none, N/A): 219 comments
2. **Church/Religious Groups** (e.g., church groups, volunteer at church): 73 comments
3. **Exercise/Gym/Sports** (e.g., leisure centre, gym, football, tennis, Zumba): 67 comments
4. **Using or volunteering for Support Groups and VCSE organisations** (e.g., mental health, Slimming World, The Hinge support groups): 53 comments
5. **U3A (University of the Third Age)**: 31 comments
6. **Walking Groups**: 6 comments
7. **Creative/Arts Groups** (e.g., creative writing, knitting, choir, dance): 18 comments
8. **Community Centres/Groups** (e.g., Bridlington Friends, social hubs): 19 comments
9. **Health/Medical-Related Groups** (e.g., pain management, rehab classes): 11 comments

**Summary:** The majority of respondents (219) indicated that they do not participate in any community activities. Among those who do participate, church and religious groups, exercise or sports-related activities, and U3A membership are the most common themes, reflecting a wide variety of community engagement in Bridlington. Volunteering, creative/arts activities, and walking groups are also common but to a lesser extent.

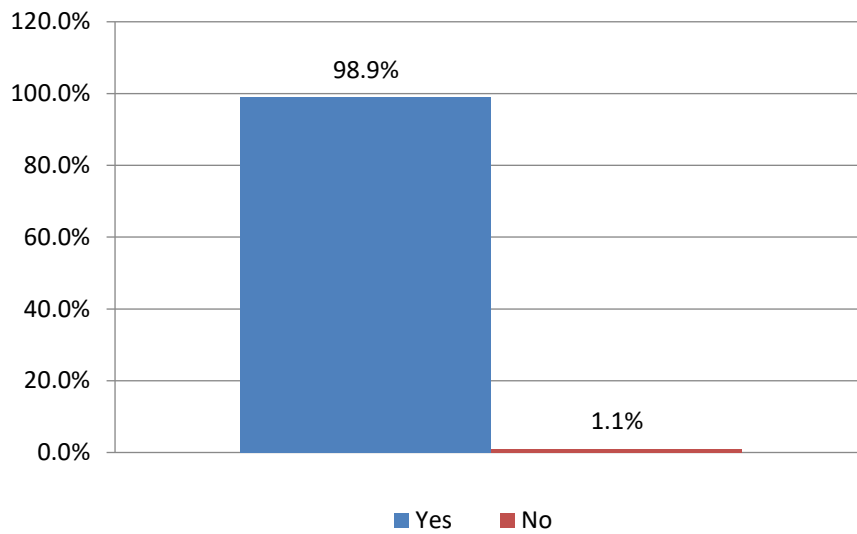
**12. What are the main health concerns or issues you notice among people in Bridlington?**

1. **Difficulty Accessing GP Services** – 164 mentions
  - Issues with booking appointments, long waiting times, online booking difficulties, and general frustration with GP services.
2. **Lack of Access to NHS Dentists** – 138 mentions
  - Lack of available NHS dentists, difficulties in getting appointments, and reliance on private dental care.
3. **Mental Health Issues** – 101 mentions
  - Concerns about mental health services, rising mental health problems like anxiety and depression, and substance abuse related to mental health.
4. **Obesity and Poor Lifestyle Choices** – 101 mentions
  - High rates of obesity, poor diet, lack of exercise, and related health issues like poor physical fitness and unhealthy lifestyle choices.

5. **Need to Travel for Healthcare Services** – 70 mentions
  - Long distances required for hospital appointments and treatments, stress associated with travel, and difficulties for those without transportation.
6. **Lack of Local Hospital Services** – 61 mentions
  - Underutilisation of local hospitals, lack of diagnostic and emergency services, and the need for better hospital resources.
7. **Substance Abuse (Drugs and Alcohol)** – 56 mentions
  - Drug and alcohol abuse, visible substance use issues, and concerns about its impact on health.
8. **Mobility and Aging Population Issues** – 54 mentions
  - Mobility problems, age-related health issues, and challenges faced by the elderly, including isolation and reliance on mobility aids.
9. **Poverty and Economic-Related Health Issues** – 46 mentions
  - Poverty, economic deprivation, inadequate housing, unemployment, and their impact on health and well-being.
10. **Inadequate Local Health Services** – 28 mentions
  - Insufficient local healthcare resources and the need for comprehensive services at Bridlington Hospital.
11. **Loneliness and Social Isolation** – 27 mentions
  - Social isolation, especially among the elderly, and lack of community support.
12. **Smoking and Vaping** – 20 mentions
  - Issues related to smoking and vaping, affecting respiratory health and contributing to other health problems.
13. **Waiting Times for Treatment** – 13 mentions
  - Excessive waiting times for ambulances, hospital treatment, and surgeries impacting health outcomes.
14. **Housing and Infrastructure** – 11 mentions
  - Poor living conditions, overcrowded housing, and infrastructure issues affecting health.
15. **Inactivity and Lack of Exercise** – 9 mentions
  - Concerns about physical inactivity contributing to health issues like obesity and poor fitness.
16. **Overreliance on Online Services** – 6 mentions
  - Problems with accessing healthcare due to dependence on online services, particularly affecting the elderly and disadvantaged.

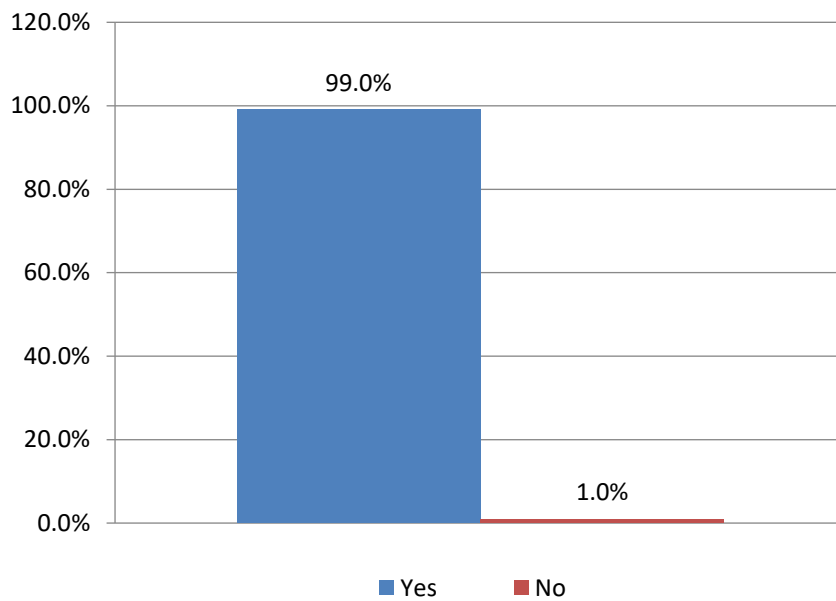
**Thinking about how technology can support healthcare and make access more convenient, please answer the following questions.**

### 13. Do you have access to a laptop/computer/tablet/smartphone?



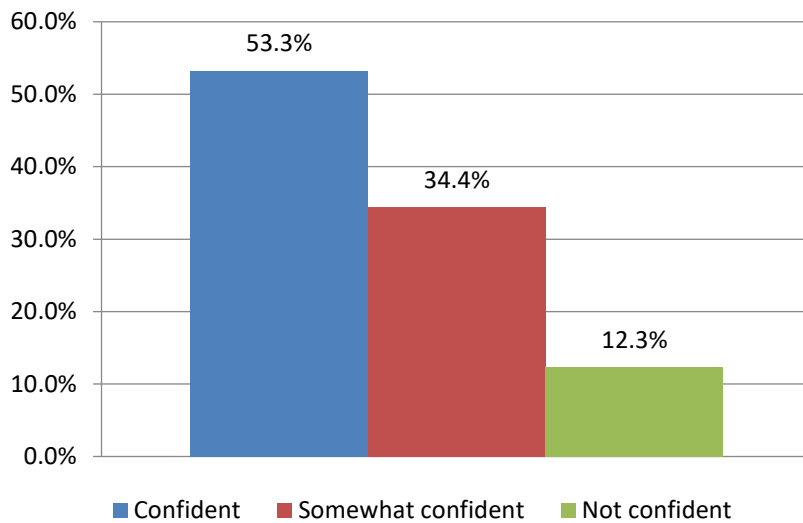
98.9% of respondents said they have access to a laptop, computer, or smartphone etc with 1.1% saying they didn't.

### 14. Do you have access to the internet?



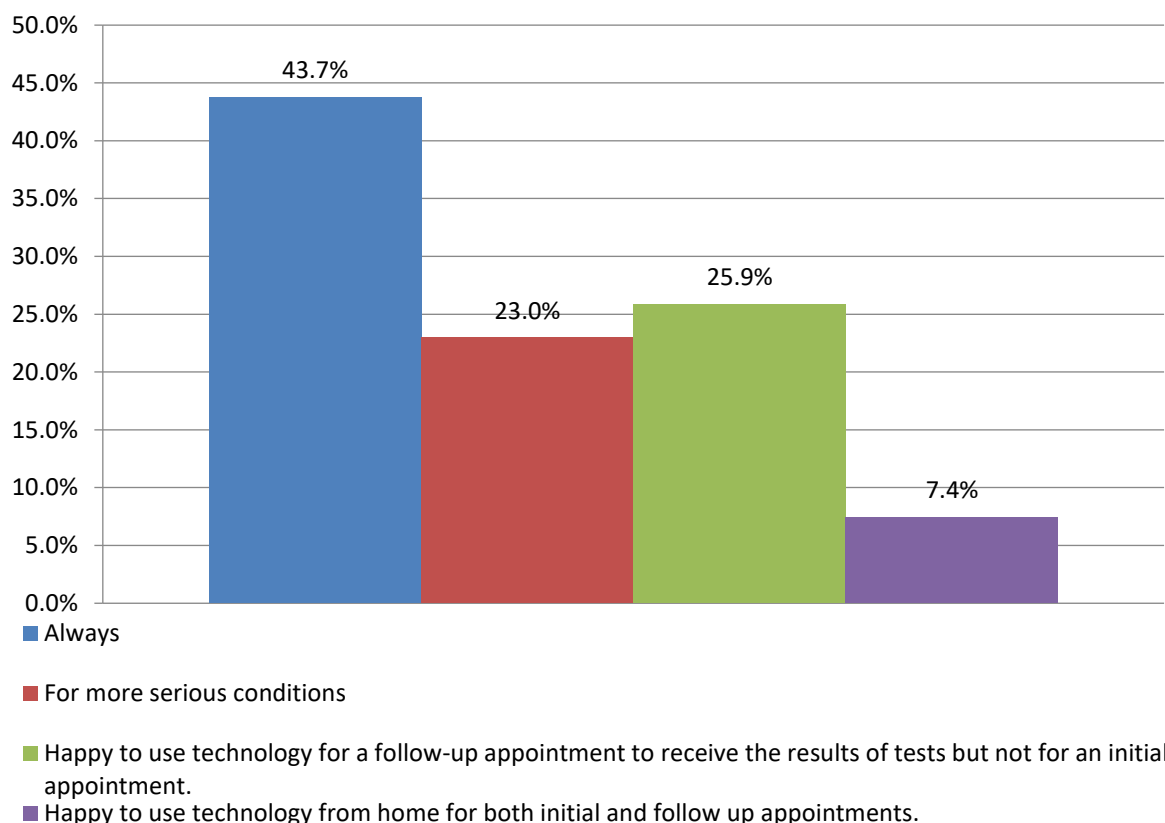
99% of people said they have access to the internet with 1% saying they didn't.

### 15. Do you feel confident using technology?



53.3% of respondents said they are confident using technology, 34.4% somewhat confident and 12.3% not confident.

### 16. Would you prefer to see someone face to face, even if it meant travelling for your appointment?



Despite the high amount of people who have access to technology and the internet, and being confident or somewhat confident using technology, 43.7% would always prefer to see someone face to face for a medical appointment even if it meant travelling. 23% felt they would be happy to use technology for more serious condition and 25.9% would be happy to

use technology for follow up appointments for test results etc but not for the initial appointment.

**17. Please rank what is most important to least important to you about where you receive care? (Read all the options carefully. Mark each option with different numbers between 1 and 10, so what is most important to you is (1) and least important to you (10).**

Answer Choice	Total Score	Overall Rank
Highest medical standards of care for my health condition/needs	5091	1
Confidence in the skills of the staff	5035	2
Waiting times for appointments	4970	3
Convenient appointment times	4326	4
Being treated like an individual	4244	5
Easy to get to	4122	6
Being involved in your care	3733	7
Ease of parking	3230	8
Feeling safe	2845	9
Accessible building / pleasant environment	2279	10

*\*Score is a weighted calculation. Items ranked first are valued higher than the following ranks, the score is a sum of all weighted rank counts.*

This ranking reflects overall preferences, with the most important factor being the quality of medical care and the least important being the environment or accessibility of the building. The results suggest that when it comes to receiving healthcare, quality and trust in care are the top priorities for people:

- Highest medical standards of care for health conditions/needs and confidence in the skills of the staff are the most important factors, indicating that patients prioritise receiving effective, professional, and competent medical treatment above all else. Quality care and the ability to trust healthcare providers are paramount.
- Waiting times for appointments and convenient appointment times rank next, showing that while quality is key, ease of accessing care also matters. People value timely access to healthcare services and flexible scheduling.
- Being treated like an individual and easy access to the facility follow, suggesting that personalisation and logistical convenience are still important, but secondary to the quality and efficiency of care.
- Lower-ranked factors like being involved in care, ease of parking, and feeling safe indicate that while these aspects are considered, they are not as critical as others. Patients might assume a base level of safety and involvement in their care, making these less decisive factors.
- Finally, the accessible building/pleasant environment is ranked last, suggesting that while a welcoming or accessible facility is appreciated, it is much less of a priority compared to the quality and accessibility of the healthcare itself.

Overall, the results emphasise that patients prioritise receiving competent care and timely access over the comfort or aesthetics of the environment in which they are treated.

## 18. What is most important to you and your family for your health and wellbeing?

### Combined Themes and Counts

1. **Access to Healthcare Services** (Total: 155 comments)
  - Timely Appointments: 42 comments
  - Access to GP and Specialist Services: 72 comments
  - Access to NHS Dentists and Local Services: 50 comments (combines local GP, dentist, and general local services)
  - Ease of Access (Including Scheduling and Communication): 43 comments
2. **Quality of Care and Treatment** (Total: 80 comments)
  - Competent and Respectful Staff: 29 comments
  - Consistency and Continuity of Care: 27 comments
  - High Standards of Treatment: 24 comments (includes mentions of being treated with respect and high standards)
3. **Mental and Emotional Wellbeing** (Total: 32 comments)
  - Feeling Heard and Supported: 18 comments
  - Mental Health Support: 13 comments
  - Emotional Wellbeing: 6 comments
4. **Local Availability and Infrastructure** (Total: 43 comments)
  - Local Facilities and Services: 32 comments
  - Reduction in Travel: 11 comments
5. **Affordability and Accessibility** (Total: 19 comments)
  - Cost-effective Care: 12 comments
  - Accessibility Without Financial Strain: 7 comments
6. **Personalisation and Continuity** (Total: 20 comments)
  - Seeing the Same Doctor: 8 comments
  - Personalised Care: 12 comments
7. **Support for Specific Needs** (Total: 6 comments)
  - Care for Elderly, Alzheimer's, Neurodiversity: 6 comments
8. **Confidence and Trust in Healthcare System** (Total: 5 comments)
  - Trust in Staff Skills and System: 5 comments
9. **General Health and Wellbeing** (Total: 5 comments)
  - General Health Maintenance and Stress Management: 5 comments



## Demographic questions

Demographic questions are routinely asked to help Humber and North Yorkshire ICB address health inequalities and improve outcomes for patients and ensure the views being gathered are representative of the population, or users of a particular service.

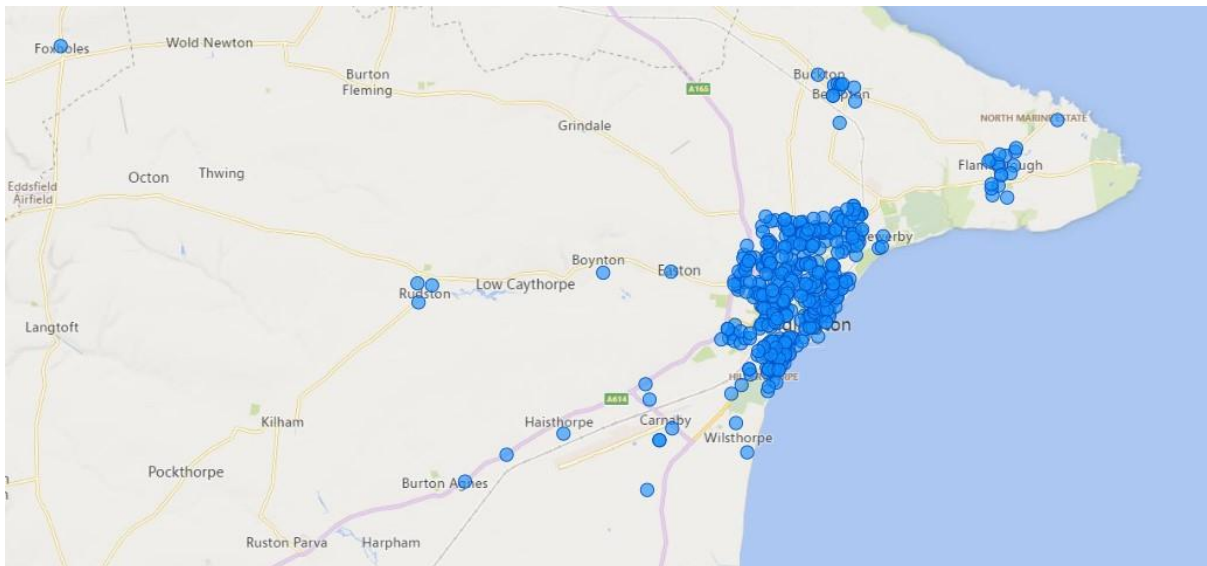
The following set of questions were asked to better understand the context of the answers given to this survey.

Respondents did not need to answer any or all these questions, and assurance was given that any information provided will be securely stored and is completely anonymous.

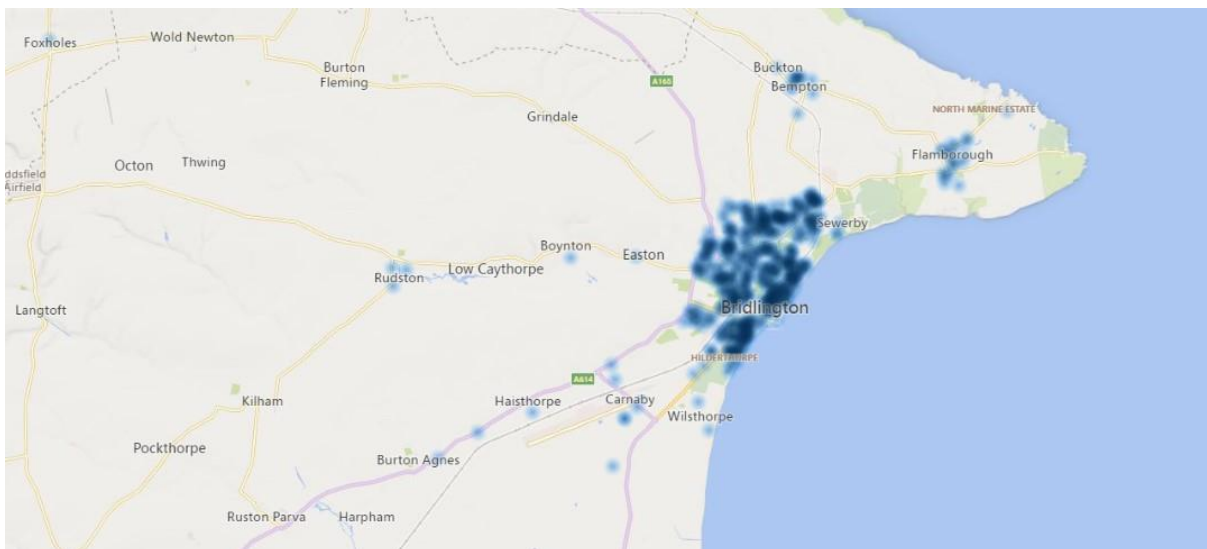
### What is your postcode?

13 people said they had no fixed abode, it means they do not have a stable, permanent home or address. This could indicate homelessness or living in temporary or transient situations, such as staying in shelters, on the streets, or moving between locations frequently without a consistent, long-term residence.

The 667 respondents who gave a postcode are reflected in the below images.

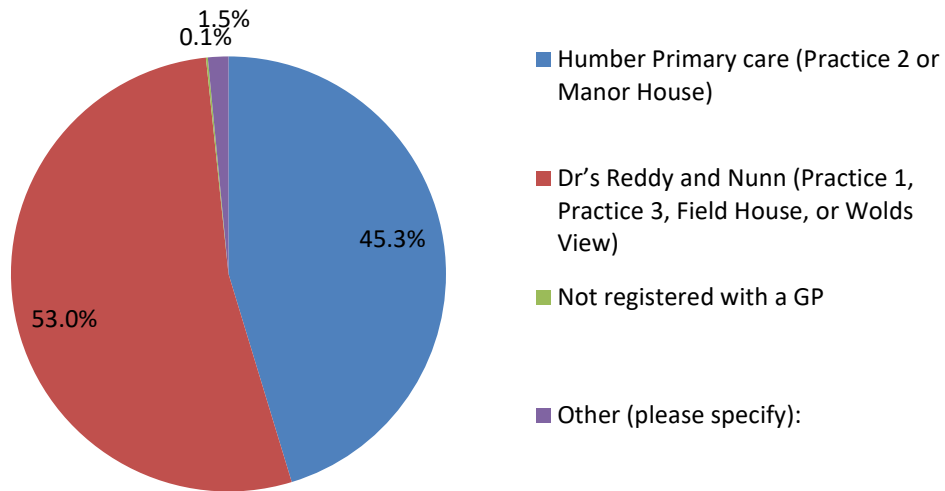


The above image plots the postcodes of respondents.



The above image shows a heatmap of where responses came from.

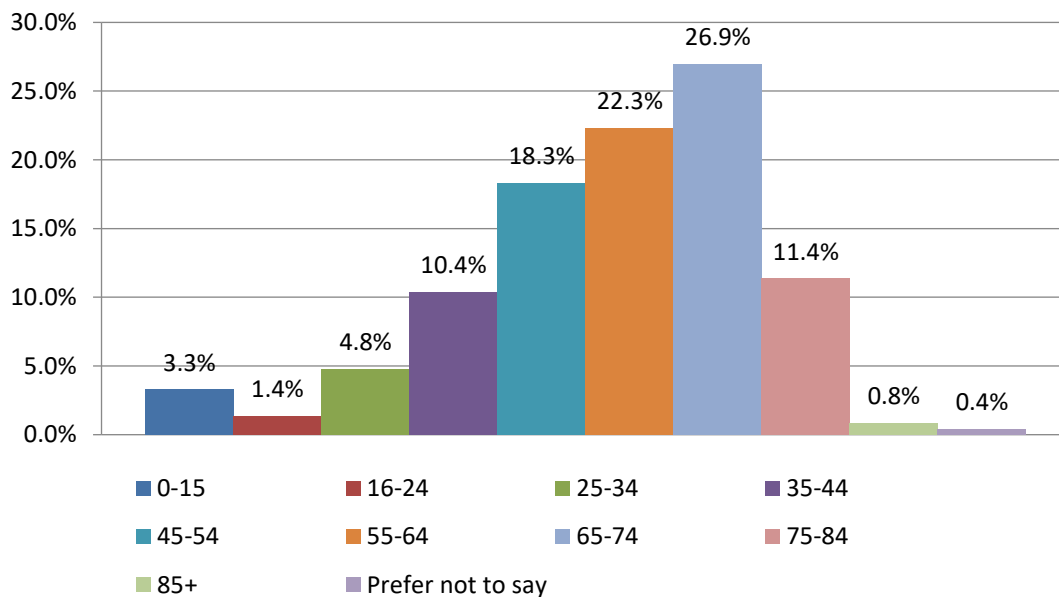
### Which GP are you registered with?



We can see that 53% of respondents are registered with Dr's Reddy and Nunn, 45.3% with Humber Primary Care, 1.5% selected other and 0.1% (1 person) is not registered with a GP. The list of GPs for those who selected other is below.

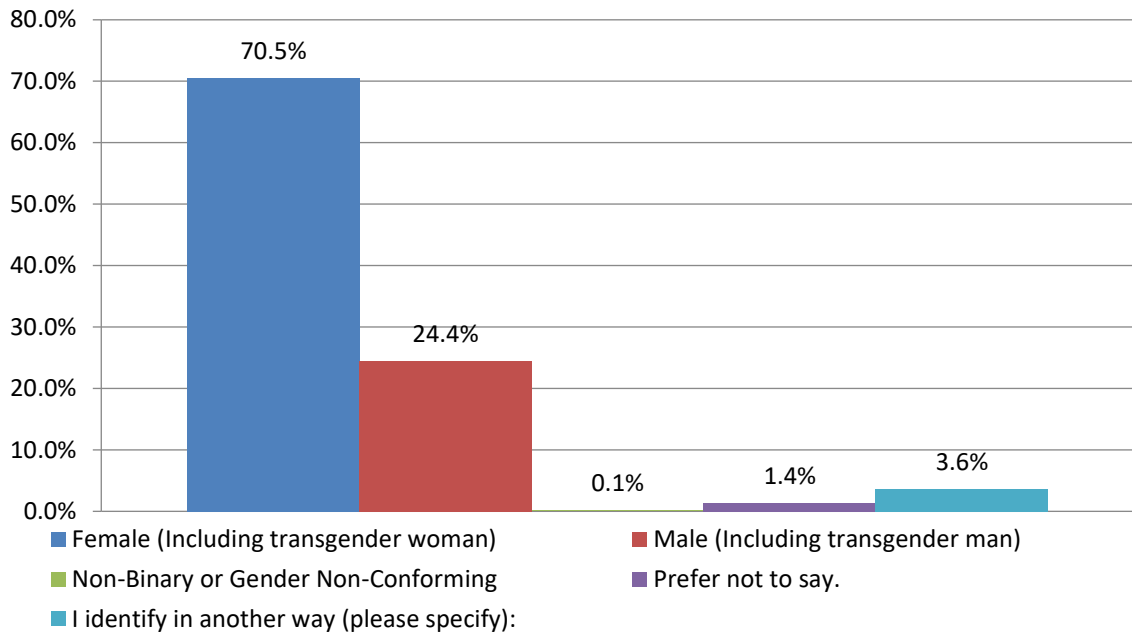
Hunmanby Surgery x2
Beeford surgery x2
HPC Until recently - now moved out of Bridlington area
Park surgery Driffield
South Axholme Practice
Leeds GP
So out of date there one surgery in Bridlington
Unsure
No reason to tell you

### How old are you?



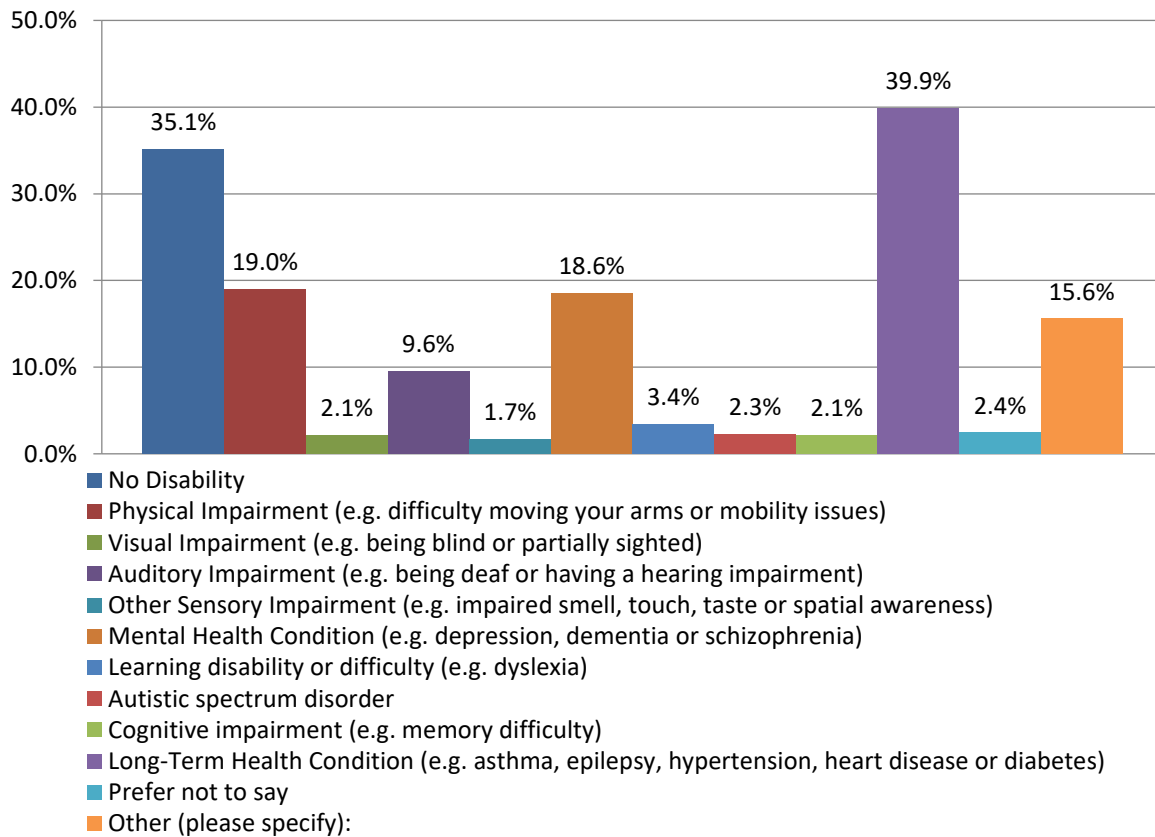
The three areas with the most responses were 65-74 (26.9%), 55-64 (22.3%) and 45.54 (18.3%). 0.4% preferred not to disclose their age.

### What is your gender?



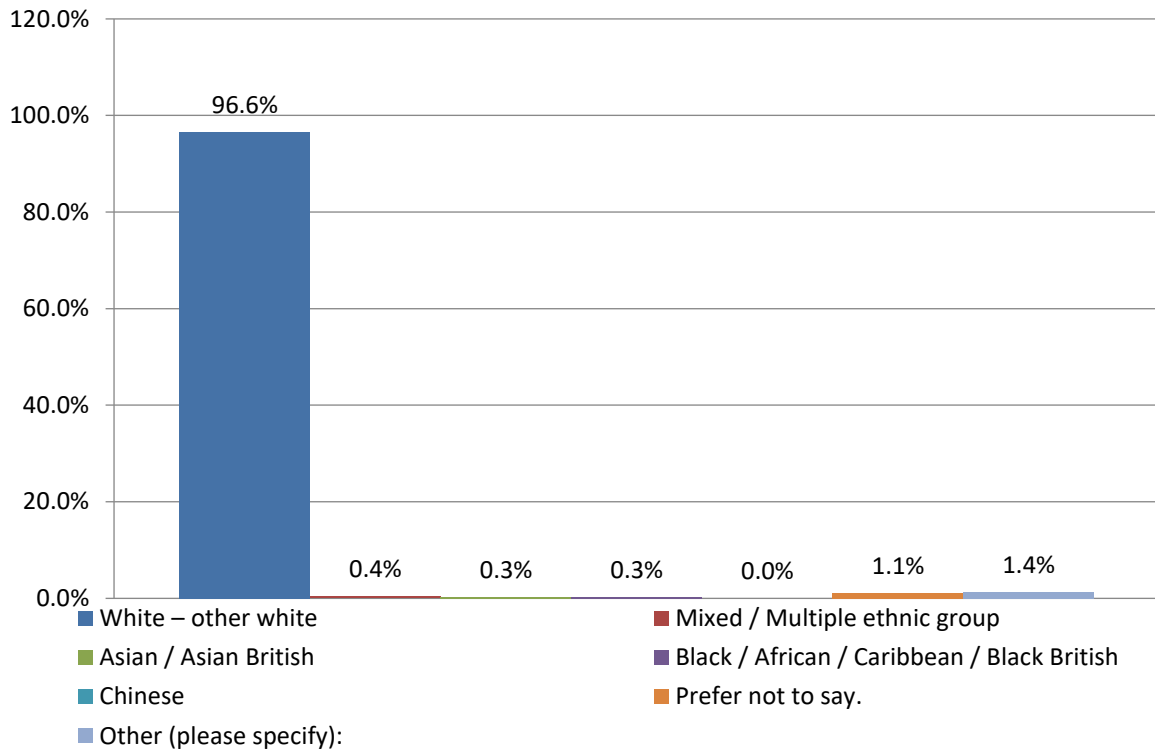
70.5% of respondents were female, 24.4% were male, 3.6% preferred not to say with the remaining 1.5% being non-binary or identifying another way.

### Do you have a disability, long-term illness, or health condition?



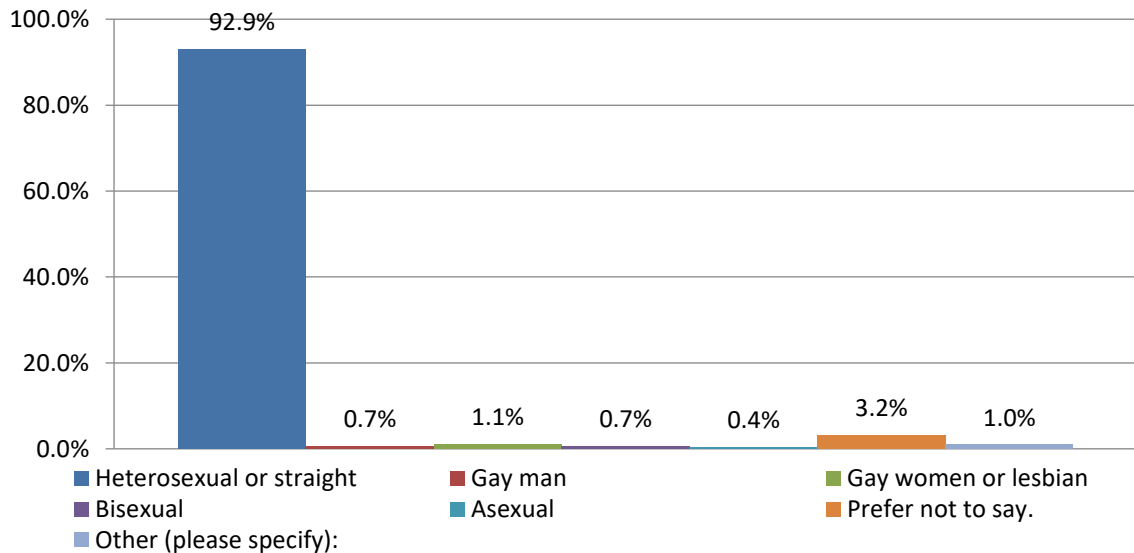
The two areas with the highest response rate were long term health condition (39.5%) and no disability (35.1%) with physical impairment, mental health condition and other also being selected consistently.

**Which of the following best describes your ethnic background?**



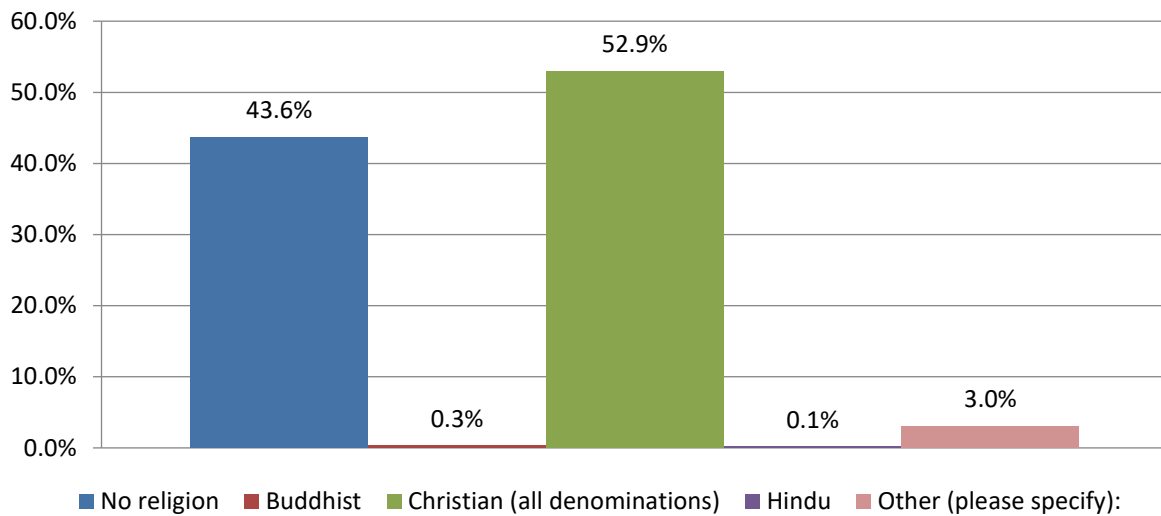
96.6% of all respondents were white with very small numbers for all other categories.

**Which of the following best describes your sexual orientation?**



92.9% of respondents identified as being heterosexual with prefer not to say having 3.2% and all other choices having very small numbers.

### What is your religion or belief?

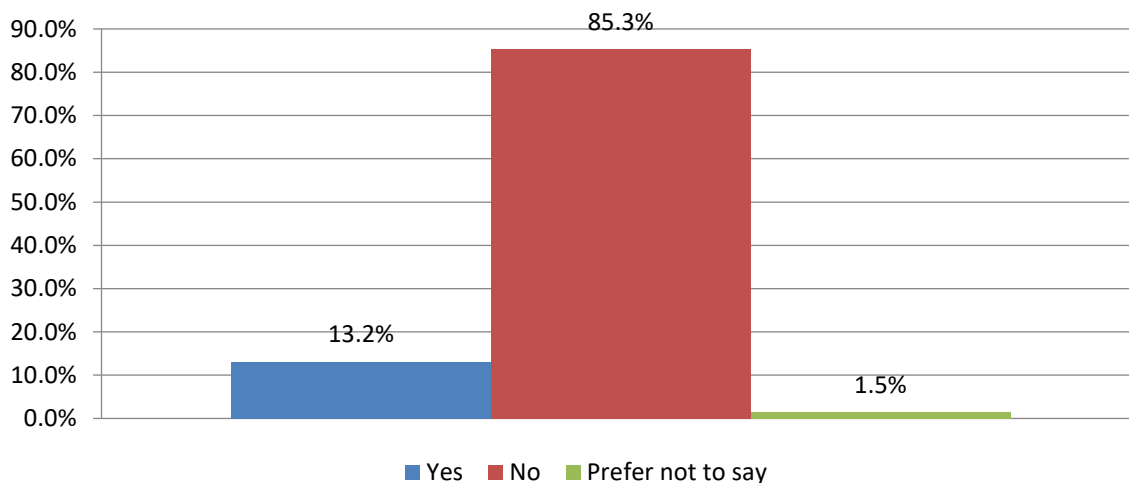


Many responses were for Christian or no religion. 3% selected other with their religious beliefs being listed below.

Pagan x5
Church of England x4
Spiritual x3
Unsure
Being kind to one another
Methodist
N/A

non definable
Catholic
R.C
Wicker (Witch)
Jedi
Jehovah's witness

### Is there anyone in your household who is currently serving, or who has previously served, in any of the UK Armed Forces?



The majority of responses show 85.3% of people have or live with someone who hasn't served in the UK armed forces with 13.2% that have.

The demographic of the respondents reflects the general population of Bridlington as defined by the recent census results.

Please see appendix two for the key demographics for the Bridlington population based on Census data from 2011 and 2021.

## Engagement Reach

### Face to face

The engagement team visited several places to conduct face to face engagement and invite people to complete the survey. We visited:

The Hinge Centre

Bridlington Medical Centre

HEY Mind Homeless Hub

Headlands Secondary School

Bay Primary School

### Social Media

The results of the paid for social media on Facebook are as follows.

15,024 people saw the FB advert, seeing it on average 6.5 times. There were 553 unique clicks through to the survey. The max number is 652, so some people must have clicked more than once. 944 is the total number of interactions people have had with the post i.e. link click, shares, likes, comments

Start	End	Reach	Impressions	Amount Spent	Clicks (All)	Cost per click (All)	Link Clicks	Cost Per Link Click
9 August 2024	29 August 2024	15024	97959	315	944	£0.33	652	£0.48

### Terms:

**Impressions** are the number of times users saw the post.

**Engagements** are the number of times users interacted with the Facebook post (all 'clicks' anywhere on the post including hashtag, username, links, shares, follows, likes etc.).

**Reach** is the number of unique people who saw the content on Facebook.



## Focus Groups

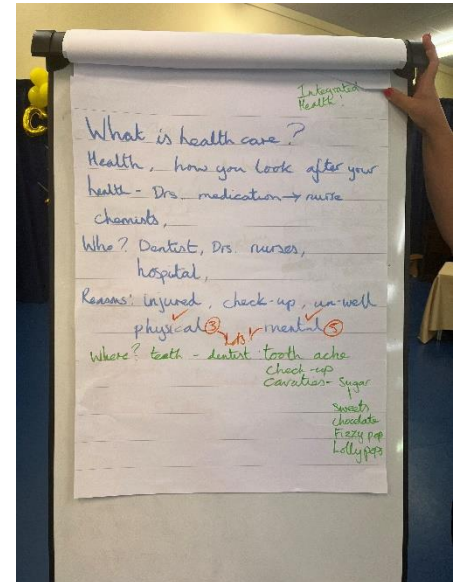
Focus groups were held at both Bay Primary School and Headlands Secondary School. Between the three sessions we engaged with approximately 80 children and young people. Some of the older students at Headlands school also completed the survey after the focus group had finished. Their responses are included in the results above.

### Focus Group Summary - Bay Primary School:

#### General Health and Wellbeing:

**What things can you do to help stay fit and healthy?** The children identified several key practices to maintain fitness and health:

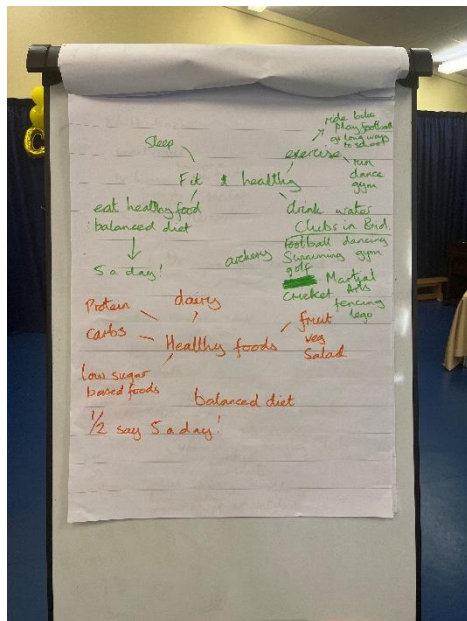
- **Exercise:** Mentioned activities include running, dancing, gym exercises, football, and riding bikes. Some also mentioned playing with friends and doing outdoor activities such as walking.
- **Diet:** The importance of eating healthy food, specifically a "balanced diet," was noted. They mentioned eating fruit and vegetables, with an emphasis on getting "5 a day."
- **Sleep and Hydration:** Getting enough sleep and drinking water were also highlighted as crucial for staying healthy.



#### Diet and Nutrition:

**Do you think the food you eat is healthy?** While the children didn't specify their typical meals, they did mention the kinds of foods they know are healthy:

- **Healthy Foods:** They emphasised foods like protein, dairy, and carbohydrates, though they also discussed the need for "low sugar" foods.
- **Unhealthy Foods:** The children highlighted sugary foods and snacks like sweets, chocolate, fizzy drinks, and lollipops as less healthy, specifically in relation to dental health.



#### Physical Activity:

**What sports or games do you play? How often do you play them?**

- **Sports and Activities Mentioned:** Football, dancing, swimming, gym workouts, martial arts, archery, and cricket were all mentioned as activities that contribute to their fitness.

**Are there any clubs or groups in Bridlington that you are part of or would like to join?**

- **Clubs in Bridlington:** Children noted several options for engaging in physical activity locally, including football, swimming, martial arts, and dancing clubs.

## Mental Health and Wellbeing:

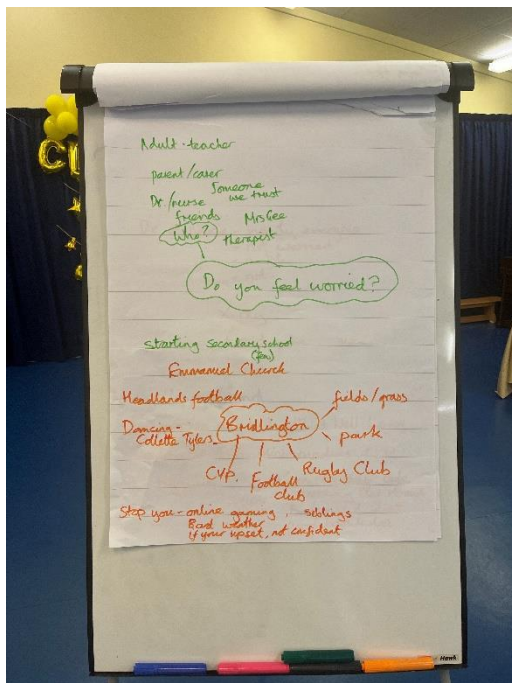
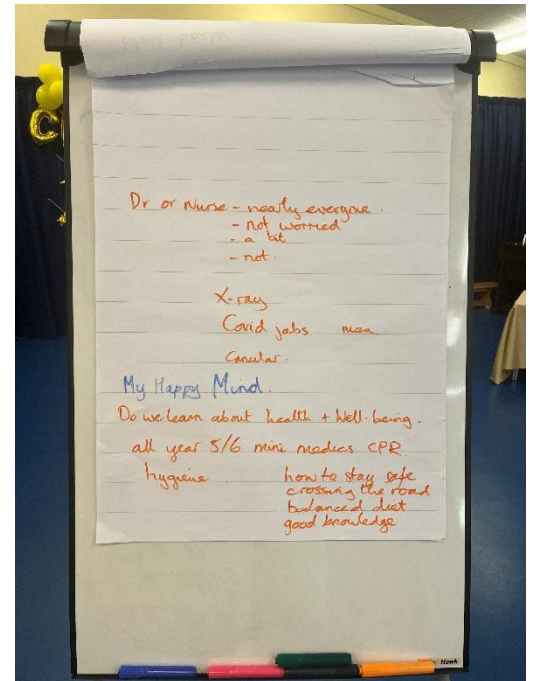
### Who do you talk to if you feel sad or worried?

- The children mentioned people such as their parent/carer, friends, their teachers, and adult or someone they trust as people they talk to if they felt sad or worried.
- All children in years 5 and 6 complete a mini medics course which covers subjects such as how to stay safe, hygiene, crossing the road, a balanced diet and good knowledge.

## Environment and Community:

### Is there anything in your neighbourhood that helps you stay healthy? Is there anything that makes it hard?

- The children mentioned many places that they use for sports and recreation activities such as the local fields, the park, football or rugby clubs, CYP, dance class and going to church groups.
- The children mentioned things that might stop you from staying healthy were; not having the internet so cant keep in contact with friends for gaming or video calls, bad weather, not being confident and when parents have to prioritise which sibling they can take to a club or activity and the other misses out.



## Healthcare Access:

### Have you ever needed to see a doctor or nurse? How was it?

- Healthcare Visits: The children mentioned healthcare roles like doctors, dentists, nurses, and hospitals. They highlighted that they would visit a dentist for teeth problems (like toothaches or cavities) and would see doctors or nurses for checkups or injuries. The general tone suggests that they understand the importance of healthcare access.

## Education and Awareness:

### Do you learn about health and being healthy at school?

- School Education: The children noted learning about health, with an emphasis on dental care, food, and overall wellbeing.

### What's something important you've learned?

- Learning Highlights: The children seem aware

of the importance of a balanced diet, exercise, dental health, and mental well-being.

### Is there anything about health that you want to know more about?

## Conclusion:

The children showed a strong awareness of both physical and mental health, with significant emphasis on exercise, diet, and the role of healthcare professionals.

Their responses suggest they are becoming increasingly aware of the different factors contributing to a healthy lifestyle, from exercise and nutrition to mental well-being and the environment around them.

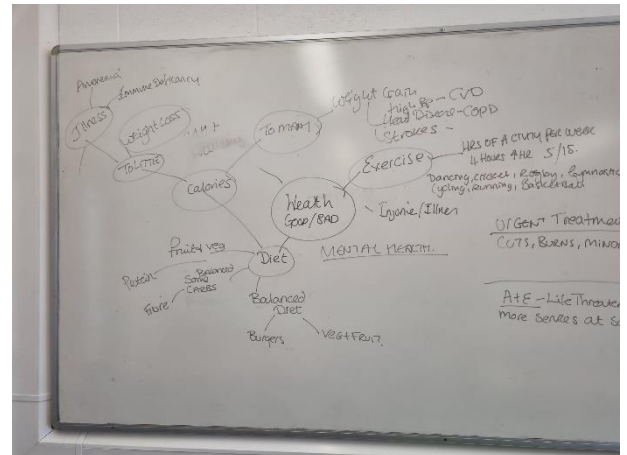


## Focus Groups Summary – Headlands Secondary School

### General Health and Wellbeing:

**How do you feel about your overall health? Is there anything that worries you about your health?**

- Students discussed essential aspects of maintaining good health, including sleep, hygiene, physical activity, and staying hydrated. They also recognised that lifestyle choices like alcohol consumption, smoking, poor diets, and being overweight can lead to long-term health issues, such as heart disease, strokes, and liver problems.
- Positives: Students appreciated the availability of NHS services, noting that doctors, dentists, and hospitals are accessible.
- Negatives: Concerns were raised about long waiting times, the need to travel up to an hour for care, the shift of many dentists to private practice, the absence of A&E in Bridlington (relying only on an Urgent Treatment Centre), and being referred to Scarborough for emergency care.

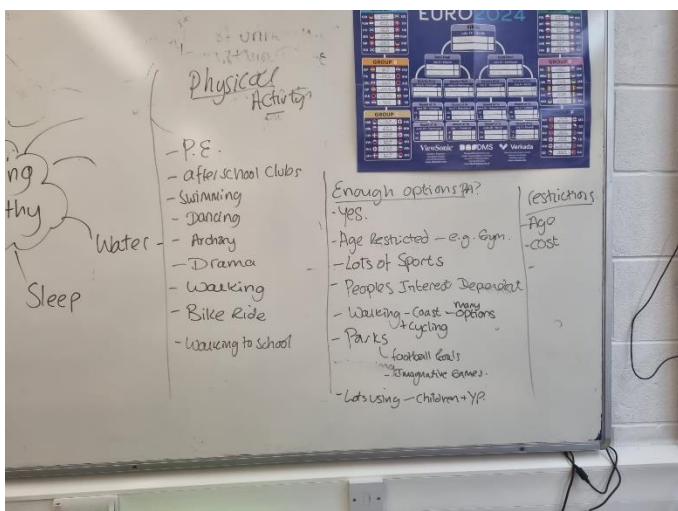


### Diet and Nutrition:

**Do you think your meals are healthy? Are there any places in Bridlington where you like to get food? Do you think they offer healthy options?**

- 12 out of 30 students felt they had a healthy diet, while others admitted they could make healthier choices. The group acknowledged that eating well is easier for some than others, often influenced by individual preferences (like picky eating) and parental habits. Some students mentioned that after long work hours, parents often opt for takeaways instead of cooking. The group expressed a desire to eat more fruits and vegetables and felt encouragement in this area would help.

### Physical Activity:



**What kind of exercise or sports do you do, and how often? Are there enough places in Bridlington where you can play or be active?**

- Students believed they should be getting about 4 hours of physical activity weekly. However, only 5 out of 15 felt they were meeting this target. Common activities included P.E. at school, after-school clubs, swimming, dancing, archery, drama, walking, biking, and walking to and from school.
- They generally felt there were enough opportunities for physical activity, though they noted some options, like weight gyms, were age-restricted or expensive, making them less accessible.

### Mental Health and Wellbeing:

**Who do you talk to if you're feeling upset or worried about something?**

- Mental health topics were covered in PSHE lessons, but students felt these subjects weren't addressed enough in school. They appreciated the support available when needed but highlighted several factors impacting their mental health, including peer pressure, social media, online bullying, exclusion from social circles, and negative

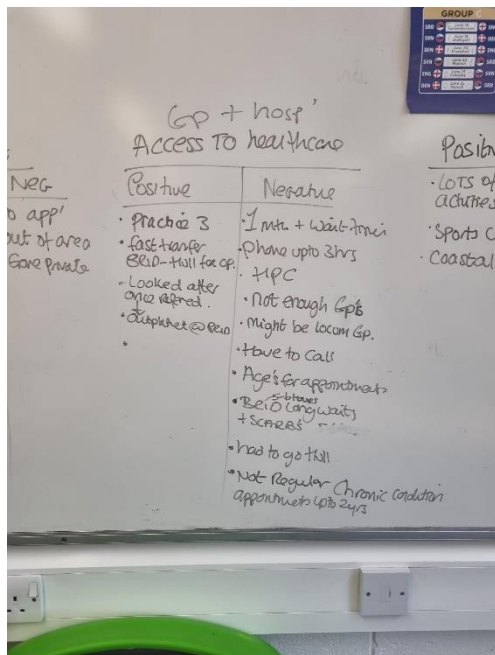
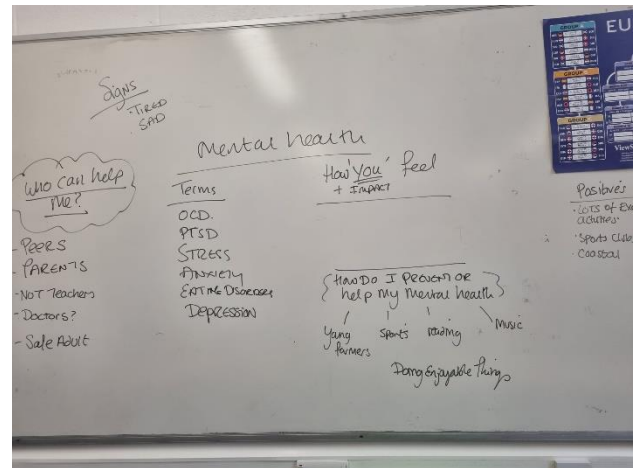
comments about appearance. These issues left some feeling insecure, excluded, or anxious.

- When feeling down, students mentioned they would turn to parents, friends, a head of year, or another trusted adult, depending on the situation.

### Healthcare Access:

**Have you ever needed to see a doctor or nurse in Bridlington? Was it easy to get help? Do you know where to go if you need medical help or advice?**

- Students shared mixed experiences with healthcare services. While they appreciated the friendliness of staff and feeling safe, they were frustrated with long waiting times for specialist treatments. They also mentioned the difficulty of having to travel outside Bridlington for treatment, which sometimes meant overnight stays away from their parents.
- They demonstrated knowledge of healthcare options, stating that they would visit the Urgent Treatment Centre for minor injuries (e.g., cuts, burns) and go to A&E in Hull or Scarborough for more serious emergencies. Although many knew about the 999 and 111 helplines, they were unaware that 111 could also be accessed online.



### Social Support and Activities:

**Are there any clubs or groups in Bridlington that you're a part of or would like to join? Are there things in your neighbourhood that make it easy or hard to stay healthy?**

- A wide range of clubs and activities were mentioned, including paddle boarding, cricket, basketball, gymnastics, cycling, running, and both football and rugby clubs. Students felt it was relatively easy to stay involved in activities that promote physical health, although affordability or age restrictions could sometimes be barriers.

### Education and Awareness:

**Are there any health topics you wish you knew more about?**

- Students expressed interest in learning more about healthy eating, mental health awareness, and common physical health conditions. They felt that increased knowledge in these areas would help them support both themselves and their families.

### Conclusion:

The focus groups at Headlands School explored key aspects of health and wellbeing, with students discussing a range of topics including general health, diet, physical activity, mental health, and healthcare access. While students were generally aware of healthy habits like sleep, hygiene, and exercise, they acknowledged challenges related to poor diet and sedentary lifestyles. They highlighted the availability of NHS services but expressed frustration with long waiting times and limited local healthcare facilities. Physical activity was accessible for most, though cost and age restrictions posed barriers. Mental health was discussed, with students emphasising the impact of peer pressure, social media, and bullying. They sought more education on healthy eating, mental health awareness, and common physical conditions to better support themselves and their families.

## Conclusion

The findings of the Bridlington Health and Wellbeing Strategy Engagement Survey reveal significant gaps in healthcare service accessibility and delivery within the community. Despite some areas of satisfaction, the overall sentiment from residents reflects a need for considerable improvements across key health services, particularly in GP access, dentistry, mental health support, and the local hospital's utilisation.

The lack of access to NHS dental services stood out as the most pressing issue, with a substantial number of respondents reporting frustration over long waiting times and the unavailability of local NHS dentists, often requiring residents to travel long distances or pay for private services. This gap in dental care has significant implications, not only for oral health but also for overall well-being, as it disproportionately affects lower-income and vulnerable groups.

Similarly, GP services were widely criticised, with residents frequently mentioning difficulties in securing timely appointments, dissatisfaction with telephone booking systems, and a reliance on online services, which many find inaccessible. Respondents highlighted long wait times and a lack of face-to-face consultations, raising concerns about continuity of care, especially for chronic or urgent health needs. There was also a call for more personalised care, with concerns about locum doctors and inconsistent healthcare provision.

The community's dissatisfaction extends to the underutilisation of Bridlington Hospital, with many feeling it could be used more effectively to reduce the need for patients to travel to Scarborough, Hull, or York for routine treatments and diagnostic services. The absence of an Accident & Emergency (A&E) department in Bridlington forces residents to rely on the Urgent Treatment Centre, which they feel is insufficient for the town's needs, particularly in emergencies.

Mental health support services were also identified as needing urgent improvement. Respondents expressed frustration with long waiting times for mental health services and insufficient access to therapy or counselling, particularly for children and young people. The feedback also emphasised the impact of social determinants of health, including stress, anxiety, substance abuse, poverty, and isolation, on mental well-being. This reinforces the need for an integrated approach to mental health that addresses not only medical needs but also the broader socio-economic factors affecting residents' health.

Additionally, residents pointed out transportation barriers to accessing healthcare outside Bridlington. For those without a car or the means to afford private transport, reaching health services in Scarborough or Hull can be particularly challenging, further compounding health inequalities for disadvantaged and elderly populations.

Positive feedback, while limited in comparison, was seen in areas like the service provided by specific GP practices and community-based health services. Initiatives such as physiotherapy, orthopaedics, and the Urgent Treatment Centre received praise for their efficiency, though this was counterbalanced by the larger concerns about accessibility and the under-resourcing of services overall.

The focus group discussions with younger residents at Headlands Secondary School and Bay Primary School highlighted the importance of engaging the next generation in healthy lifestyle choices, with many students demonstrating a strong awareness of diet, exercise, and mental health. However, some of these students also echoed the concerns of the broader community, particularly in relation to the availability of local health services and the challenges of accessing care.

The engagement has provided a clear understanding of the priorities and challenges faced by Bridlington's residents. With the right strategic investments and collaborative action, there is significant potential to improve healthcare access, outcomes, and overall wellbeing for the local community.

## Recommendations and Next Steps

### Recommendations to consider.

#### 1. Improve Access to NHS Dental Services:

- Immediate Priority: Address the urgent gap in NHS dental provision in Bridlington by working with dental service commissioners to increase local availability. This could involve incentives for new NHS dental practices or expanding the capacity of existing ones.
- Outreach Programs: Implement outreach initiatives to provide mobile or temporary dental services in underserved areas while permanent solutions are developed.

#### 2. Expand GP Access and Reduce Waiting Times:

- Increase GP Capacity: Explore options for increasing the number of GP appointments available, such as by hiring more permanent staff, improving booking systems, or expanding operating hours to accommodate high demand.
- Patient-Centered Booking Systems: Enhance telephone and online appointment systems to improve accessibility, particularly for older or less tech-savvy patients. Consider implementing dedicated support for those struggling with digital systems.

#### 3. Utilise Bridlington Hospital:

- Service Expansion: Expand the services offered at Bridlington Hospital where possible, focusing on routine diagnostics, outpatient services, and minor procedures to reduce the need for residents to travel to Scarborough, Hull, or York.
- A&E Feasibility: Manage the expectations of the people of Bridlington and let them know that establishing an A&E unit is not possible, explaining the reasons why.

#### 4. Enhance Mental Health Services:

- Increase Support Capacity: Expand access to mental health services, focusing on reducing waiting times for therapy, counselling, and specialist referrals. Consider integrating mental health services within GP practices to provide holistic care.
- Youth-Specific Services: Develop targeted mental health programs for children and adolescents, addressing the specific concerns raised in the focus groups, including anxiety, peer pressure, and online bullying.

#### 5. Address Transportation Barriers:

- Reintroduce Transport Schemes: Work with local councils and transport providers to reintroduce or subsidised transport services, such as the Medi-Bus, to assist residents in traveling to healthcare facilities outside of Bridlington.
- Mobile Health Clinics: Consider mobile health clinics that provide routine services like vaccinations, health checks, and basic medical consultations directly to underserved neighbourhoods.

#### 6. Engage and Support Vulnerable Populations:

- Tailored Interventions: Work closely with marginalised groups, including those with disabilities, mental health conditions, and the elderly, to understand their specific needs and ensure they can access healthcare services without unnecessary barriers.

- Community Partnerships: Collaborate with local voluntary, community, and social enterprise (VCSE) organisations to enhance support networks for disadvantaged groups.

#### 7. **Promote Health Education and Awareness:**

- School-Based Initiatives: Continue working with local schools to educate young people about healthy lifestyle choices, mental health, and the importance of accessing healthcare services.
- Public Health Campaigns: Launch targeted public health campaigns to increase awareness of local health services, dental care options, and the importance of preventive health measures like lifestyle choices, vaccinations and screenings.

#### 8. **Ongoing Community Engagement:**

- Feedback Loops: Establish engagement sessions to ensure that the community remains involved in shaping healthcare strategies. Use these opportunities to update the public on progress and gather additional feedback.
- Co-Design Solutions: Continue working with residents to co-design solutions for healthcare delivery improvements, ensuring that interventions remain relevant and responsive to local needs.

### **Possible Next Steps:**

#### 1. **Share Findings with Key Stakeholders:**

- Present the survey findings and engagement feedback to relevant stakeholders, including NHS Humber and North Yorkshire Integrated Care Board (ICB), local healthcare providers, local councils, and community organisations.
- Present findings to the East Riding Place Senior Leadership Team (SLT).
- Arrange briefing sessions with Health Overview and Scrutiny Committees (HOSCs) to discuss the results and proposed actions.

#### 2. **Collaborate on Service Improvements:**

- Establish working groups to address the specific challenges highlighted in the engagement process, such as dental access, GP services, and mental health support.
- Engage with local healthcare providers, including GPs, dentists, and hospital management, to develop a collaborative action plan focused on expanding service provision and improving accessibility.

#### 3. **Develop an Implementation Plan:**

- Draft a comprehensive implementation plan outlining the specific steps and timelines for addressing the key issues identified in the survey that can be addressed.
- Assign responsibilities to different stakeholders, ensuring clear accountability and measurable outcomes for each intervention.

#### 4. **Monitor and Report on Progress:**

- Establish a monitoring framework to track progress against the recommendations. Include key performance indicators (KPIs) such as reductions in waiting times, improvements in patient satisfaction, and enhanced service availability.
- Schedule regular progress reports to ensure transparency and keep the community informed of the changes being made.

**5. Secure Funding and Resources:**

- Work with local authorities, NHS trusts, and national funding bodies to secure the necessary financial resources to implement the strategy. This may involve bidding for grants, NHS funding streams, or local council contributions.
- Explore innovative funding models, such as partnerships with private sector providers or VCSE organisations, to support community-led health initiatives.

**6. Launch Pilot Programs:**

- Piloting initiatives such as mobile health clinics, expanded GP access, or mental health support programs in high-demand areas. Use the pilot outcomes to refine and scale up interventions across Bridlington.

**7. Engage the Community and Follow-Ups:**

- Plan follow-up or feedback sessions to evaluate the effectiveness of implemented changes and ensure that the community's evolving healthcare needs are continuously addressed.

By implementing these recommendations and following the outlined steps, the ICB and local stakeholders can create a more responsive, equitable, and accessible healthcare system for Bridlington's residents. This strategy will not only address current challenges but also lay the foundation for sustainable health and wellbeing improvements across the community.

## Appendix 1

Below is a copy of the survey.



**Humber and North Yorkshire**  
Health and Care Partnership



### Get involved and share your views!

Bridlington has a registered GP population of over 41,000 patients. Although the East Riding of Yorkshire overall has relatively good health outcomes, there remain pockets of deprivation, and these are most densely concentrated in the Bridlington area. The town demonstrates several challenges. These challenges include: an ageing population with lots of people of retirement age; difficulties in recruitment in health and care jobs; pockets of significantly low-income levels; higher levels of substance misuse; limitations on transport to access surrounding areas.

To help inform the Integrated Care Boards (ICBs) strategy we are hosting a short survey to understand the community's thoughts and feelings around current services and what they feel is important for people's health and wellbeing.

### The closing date for this survey is Sunday 1<sup>st</sup> September 2024.

If you require this questionnaire in an alternative format (including large print or alternative languages), or if you require additional support to complete this questionnaire, please contact:

Telephone: 01482 672156 or email: [hnyicb.communications@nhs.net](mailto:hnyicb.communications@nhs.net)

Please return any completed surveys back to us using the FREEPOST address below, no stamp necessary, just pop it in an envelope and post it!

**FREEPOST RTTL-HSBE-BLHL**  
**Health House**  
**Grange Park Lane**  
**Willerby**  
**HULL HU10 6DT**

This survey is also available to complete online, scan the QR code below to complete:

### Scan Me!



**What areas of health and care do you think are working well in Bridlington?**

**What areas of health and care are not working so well in Bridlington?**

**Please rate how well you think Bridlington’s health and care services are performing if you’ve used them. (1 being the least and 10 being the best)**

- GPs 1  2  3  4  5  6  7  8  9  10  n/a
- Mental Health services 1  2  3  4  5  6  7  8  9  10  n/a
- Dentistry 1  2  3  4  5  6  7  8  9  10  n/a
- Maternity services 1  2  3  4  5  6  7  8  9  10  n/a
- Hospital services 1  2  3  4  5  6  7  8  9  10  n/a
- Adult Social care 1  2  3  4  5  6  7  8  9  10  n/a
- Childrens Social Care 1  2  3  4  5  6  7  8  9  10  n/a
- Palliative care 1  2  3  4  5  6  7  8  9  10  n/a
- Community services 1  2  3  4  5  6  7  8  9  10  n/a   
(e.g. District nurses, health visitors or sexual health services)
- Overall, 1  2  3  4  5  6  7  8  9  10

**Please rate how easy it is to get to (i.e. access) health and care services for people living in Bridlington, if you’ve used them. (1 being the least and 10 being the best)**

- GPs 1  2  3  4  5  6  7  8  9  10  n/a
- Mental Health services 1  2  3  4  5  6  7  8  9  10  n/a
- Dentistry 1  2  3  4  5  6  7  8  9  10  n/a
- Maternity services 1  2  3  4  5  6  7  8  9  10  n/a
- Hospital services 1  2  3  4  5  6  7  8  9  10  n/a
- Adult Social care 1  2  3  4  5  6  7  8  9  10  n/a
- Childrens Social Care 1  2  3  4  5  6  7  8  9  10  n/a
- Palliative care 1  2  3  4  5  6  7  8  9  10  n/a
- Community services 1  2  3  4  5  6  7  8  9  10  n/a   
(e.g. District nurses, health visitors or sexual health services)
- Overall, 1  2  3  4  5  6  7  8  9  10



**What things stop you using healthcare services? (tick all that apply)**

- Distance to travel.
- Cost of public transportation.
- No use of a car.
- Time of appointment offered.
- No childcare.
- Telephone waiting times.
- Appointment waiting times.
- Worried about what you will be told.
- Other (Please specify)

**Has everyone in your household taken up the opportunity for the following, if invited?**

Measles, Mumps & Rubella Vaccine (MMR)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Polio Vaccine	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
COVID Vaccines	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Shingles Vaccine (over 70s)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Cervical smear test	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Breast screening	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Bowel screening	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Over 40s health checks	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>
Learning disability health checks	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't know <input type="checkbox"/>	n/a <input type="checkbox"/>

If you answered no to any of the above, please tell us why.

**We want to understand the impact of various factors on your health. Please indicate how much NEGATIVE\_impact each of the following have on your health by selecting the appropriate option:**

- |                              |                               |                                   |                               |  |                                |
|------------------------------|-------------------------------|-----------------------------------|-------------------------------|--|--------------------------------|
| Alcohol use                  | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Drug / substance use         | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Smoking                      | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Exercise levels              | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Diet                         | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Debt                         | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Gambling                     | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Education                    | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Employment status            | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Housing                      | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| The community you live in    | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Lonely or no support network | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Stress / anxiety             | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Depression / helplessness    | None <input type="checkbox"/> | A little <input type="checkbox"/> | Some <input type="checkbox"/> | A fair amount <input type="checkbox"/> | A lot <input type="checkbox"/> |
| Any others (Please specify)  |                               |                                   |                               |  |                                |

**Are you currently living with a health condition?**

- Yes (go to question 9)  
 No (go to question 11)

**If yes, are you getting support for your health condition?**

- Yes (go to question 11)  
 No (go to question 10)

**If not, why?**

**Have you participated in any community activities or groups in Bridlington that have a positive impact on your health? Such as at a community centre, local sports teams, Churches, or support groups etc. If so, please tell us which ones.**

**What are the main health concerns or issues you notice among people in Bridlington?**

Thinking about how technology can support healthcare and make access more convenient, please answer the following questions.

**Do you have access to a laptop/computer/tablet/smartphone?**

- Yes
- No

**Do you have access to the internet?**

- Yes
- No

**Do you feel confident using technology?**

- Confident
- Somewhat confident
- Not confident

**Would you prefer to see someone face to face, even if it meant travelling for your appointment?**

- Always
- For more serious conditions
- Happy to use technology for a follow-up appointment to receive the results of tests but not for an initial appointment.
- Happy to use technology from home for both initial and follow up appointments.

**Please rank what is most important to least important to you about where you receive care? (Read all the options carefully. Mark each option with different numbers between 1 and 10, so what is most important to you is (1) and least important to you (10). Please don't use any of the numbers more than once.)**

	Your answer	Example
Easy to get to		1
Ease of parking		7
Convenient appointment times		2
Waiting times for appointments		6
Confidence in the skills of the staff		3
Being treated like an individual		8
Being involved in your care		9
Accessible building / pleasant environment		4
Feeling safe		10
Highest medical standards of care for my health condition/needs		5

**What is most important to you and your family for your health and wellbeing?**

**About You**

We would like to know a bit more about you to help us to better understand the answers you have given during this survey, and the health and care needs of our local communities. We know that people of different ages, ethnicities, sexualities, and other Protected Characteristics, have different health needs, access healthcare services in different ways, and sometimes have different experiences of care.

By answering some short questions, you can support our work aiming to reduce health inequalities in Humber and North Yorkshire, giving everyone the opportunity to receive care in a way which is most appropriate to them, and improving outcomes for patients. In line with data protection law, your information will remain anonymous and will only be used to support this survey etc. To find out how we use your information, please visit <https://humberandnorthyorkshire.icb.nhs.uk/privacy-policy/>

You do not need to answer these questions if you do not want to.

**What is your postcode?**

No fixed abode / I don't have a postcode.

**Which GP are you registered with?**

- Humber Primary care (Practice 2 or Manor House)
- Dr's Reddy and Nunn (Practice 1, Practice 3, Field House, or Wolds View)
- Not registered with a GP
- Other practice (Please specify)

**How old are you?**

- 0-15
- 16-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75-84
- 85+
- Prefer not to say

**What is your gender?**

- Female (Including transgender woman)
  - Male (Including transgender man)
  - Non-Binary or Gender Non-Conforming
  - Prefer not to say.
  - I identify in another way (Please specify)
- 

**Do you have a disability, long-term illness, or health condition?**

- No Disability
  - Physical Impairment (e.g. difficulty moving your arms or mobility issues)
  - Visual Impairment (e.g. being blind or partially sighted)
  - Auditory Impairment (e.g. being deaf or having a hearing impairment)
  - Other Sensory Impairment (e.g. impaired smell, touch, taste or spatial awareness)
  - Mental Health Condition (e.g. depression, dementia or schizophrenia)
  - Learning disability or difficulty (e.g. dyslexia)
  - Autistic spectrum disorder
  - Cognitive impairment (e.g. memory difficulty)
  - Long-Term Health Condition (e.g. asthma, epilepsy, hypertension, heart disease or diabetes)
  - Prefer not to say
  - Other (Please specify)
- 

**Which of the following best describes your ethnic background?**

- White – other white
  - Mixed / Multiple ethnic group
  - Asian / Asian British
  - Black / African / Caribbean / Black British
  - Chinese
  - Prefer not to say.
  - Not on the list (Please specify)
-

**Which of the following best describes your sexual orientation?**

- Heterosexual or straight
- Gay man
- Gay women or lesbian
- Bisexual
- Asexual
- Prefer not to say.
- Other (Please specify)

**What is your religion or belief?**

- No religion
- Buddhist
- Christian (all denominations)
- Hindu
- Jewish
- Muslim
- Sikh
- Other (Please specify)

**Is there anyone in your household who is currently serving, or who has previously served, in any of the UK Armed Forces?**

- Yes
- No
- Prefer not to say

Almost done...

Thank you for taking the time to complete our survey. If you would like to receive further opportunities to have your say on health services, please share your email.

This survey has been co-produced with partners of the Bridlington Multi Agency meeting. Thank you for your support in designing the survey questions where the information captured will feed into the decision making for future strategies for health and care in Bridlington.

Bridlington Health Forum  
HEY Smile Foundation  
The Hinge centre  
Fuse Youth services



## Appendix 2

Bridlington's demographic profile from the **UK Censuses** (2011 and 2021) give the population as **35,369**:

### 1. Age

- Bridlington has an older age profile compared to the national average.
  - **Over 65 years**: A large proportion of the population, reflecting the town's popularity as a retirement destination. In some estimates, around **28-30%** of the population is aged 65 or over.
  - **Working-age adults (16-64 years)**: About **55-60%**.
  - **Children and young people (under 16)**: Around **16%**.

### 2. Religion

- The population of Bridlington, like much of East Yorkshire, is predominantly Christian, reflecting the broader demographic trends of the region.
  - **Christian**: Approximately **70-75%**.
  - **No religion**: Around **20-25%**, which mirrors the growing trend of secularism in the UK.
  - **Other religions**: A very small percentage (less than 1%) of the population, including Islam, Hinduism, Buddhism, and others.

### 3. Sexuality

- Whilst there is limited specific local data on sexuality in Bridlington, national statistics from the **ONS (Office for National Statistics)** give an indication that approximately **2-3%** of the UK population identifies as **LGBT+**, which would likely be a rough approximation for Bridlington, although in rural and older populations, the percentage may be slightly lower due to underreporting or cultural factors.

### 4. Disability

- Bridlington has a higher percentage of individuals with disabilities or long-term health conditions compared to national averages. This is partly due to the older population.
  - According to the 2011 Census, **around 20-25%** of Bridlington's population reports some form of disability or long-term health problem.
  - A significant proportion of those aged 65 and over report having mobility issues or other age-related conditions.

### 5. Ethnicity

- **Predominantly White British**: Bridlington is largely homogenous in terms of ethnicity.
  - Approximately **98-99%** of the population identifies as **White British**.
  - Other ethnic groups make up a very small proportion of the population, such as Eastern European migrants or Asian communities, but these groups are minimal compared to national averages.

### 6. Gender Distribution

- **Female population**: Around **52%** (about 18,400).
- **Male population**: Around **48%** (about 16,900).
- The female population is slightly higher than the male population, which is common in many areas of the UK, particularly in towns with older populations, as women tend to live longer than men.
- This difference is more noticeable in the **65 and older** age group, where women outnumber men due to greater female life expectancy.

## Contact Us

For any further information about Humber and North Yorkshire Integrated Care Board please contact us in any of the following ways:

Mail:

Humber and North Yorkshire Integrated Care Board (ICB),  
Health House,  
Grange Park Lane,  
Willerby,  
HU10 6DT.

Website:

<https://humberandnorthyorkshire.icb.nhs.uk/>

Email:

[hnyicb.communications@nhs.net](mailto:hnyicb.communications@nhs.net)





