

# North Central London Community Voices Panel

## Survey 5 results January 2026



# Report structure

## 1. Introduction

Page 2

## 2. Overview summary

Page 5

## 3. Survey 5 results:

3.1 Managing your health (*Blood pressure, Self-Care Medicines Scheme*)

Page 11

3.2 Cancer screening appointments

Page 16

3.3 Improving local services (*Audiology services*)

Page 23

3.4 Vaccinations

Page 28

## 4. Appendices – Survey 5 sample profile

Page 37

# Section 1: Introduction



# Mission of the North Central London Community Voices Panel

The Community Voices Panel provides the Integrated Care Board (ICB) in north central London with an additional systematic approach to gathering insight and feedback on a range of health and care issues from a representative sample of the resident population.

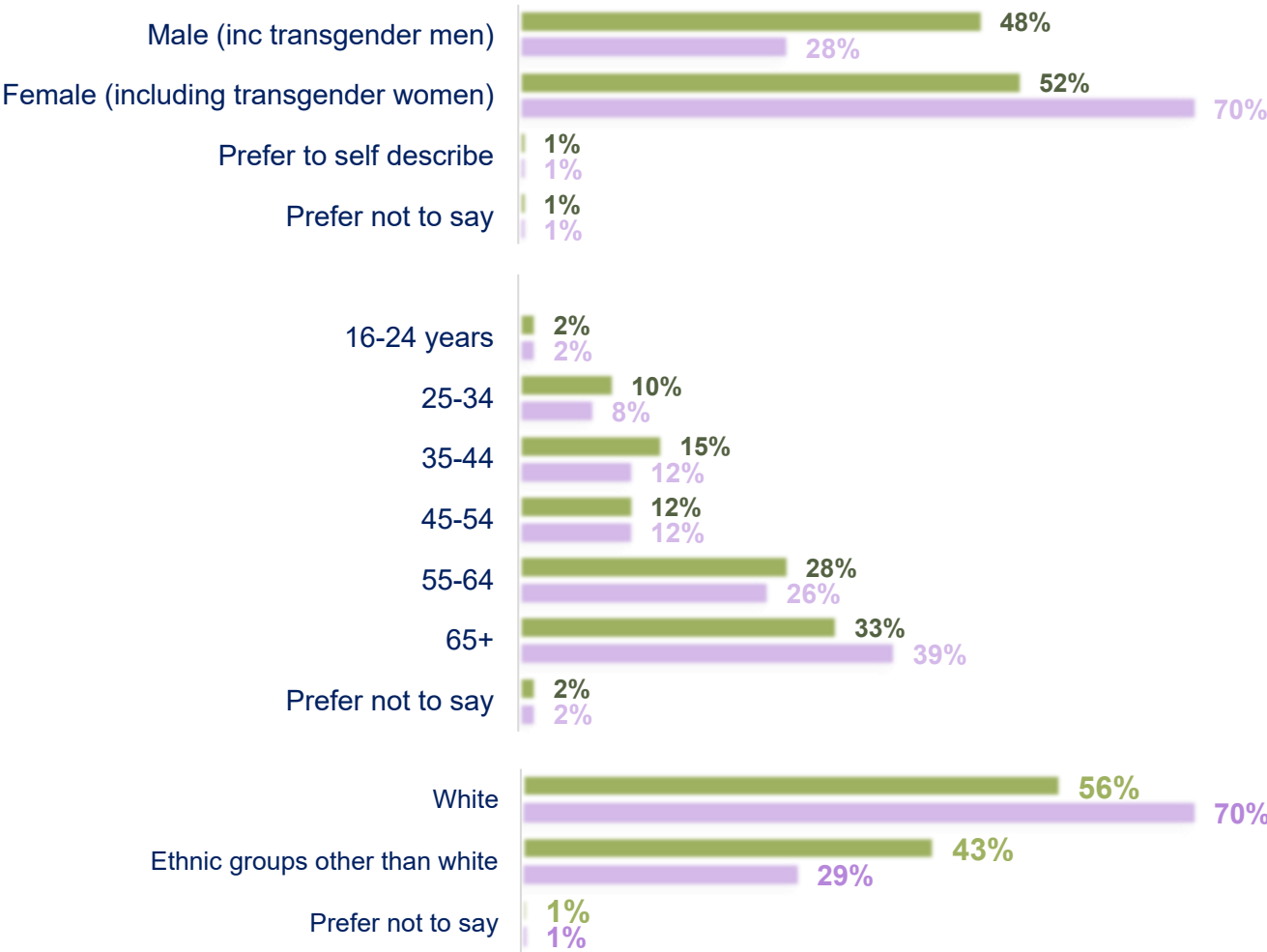
The panel is used to complement and expand the ICB's existing methods of engagement and involvement to support their continued efforts to hear from a representative mix of the local population in Barnet, Camden, Enfield, Haringey, and Islington.

Survey 5 was completed online by Community Voices panellists from **21<sup>st</sup> November 2025** to **9<sup>th</sup> January 2026** and included questions on the following: Managing your health; Cancer screening appointments; Improving local services and Vaccinations



# A total of 172 responses to survey 5 were received, with the sample weighted to reflect the NCL population (18% response rate)

% survey 5 participant rim weighted profile (172)    % of survey 5 participants unweighted (172)



We can see that females, older age groups and white panellists are more likely to respond to surveys (*looking at the pink bars*) than their counterparts.

(Fuller profile in the appendices)

N.B. Survey 5 participants' responses have been rim weighted to reflect the profile of the NCL population (according to 2021 census data).

Rim weighting means that a combination of reweights are applied to the sample, in this case: gender and ethnicity.

# Section 2: Overview summary





# Managing your health



- **56%** of respondents, in total, currently check their own blood pressure on a regular basis
  - **44% do not** check their own blood pressure
  - *Propensity to regularly check blood pressure **increases with age**, 47% of those aged 34 and under compared to 60% of those aged 55+ check their blood pressure regularly*
- **Three quarters of respondents (75%)**, in total, are aware that you can get your blood pressure checked for free at a GP practice or local pharmacy,
  - **29%** would still prefer to check it themselves
- In total, **25% are not aware of free blood pressure checks** at these locations
  - Just **5%** say they wouldn't use this service
- Panellists were asked how the NHS could best help them understand and manage their blood pressure (*from a prompted list of options*). The main ways selected were **leaflets, guidance, advice, information and a home blood pressure monitor**



- Panellists were asked how the NHS could best promote the Self-Care Medicines Scheme available from pharmacists (*from a prompted list of options*)
  - The main ways selected were GP and NHS websites, posters and leaflets, along with voluntary/ community organisations

# Cancer screening appointments



- Around **two thirds** of all respondents had been for at least one type of cancer screening appointment (69% in total).
  - Around **one in six** had been invited for a cancer screening appointment but not taken it up (**17% in total**)
  - Attendance generally slightly higher than average in Barnet and slightly lower than average in Islington
- A vast majority (**84% or more in each case**) of cancer screening attendees had found it fairly or very easy to book their appointment, especially for lung cancer screening (**99% saying easy**)
- Panellists were asked what their preferred method to book or rearrange a cancer screening appointment would be (from a prompted list of options). **Online** heads the list, followed by **phone/SMS**

- Panellists were asked what, if anything, makes it harder for them to book or rearrange a cancer screening appointment (from a prompted list of options). **60% said there were no such difficulties for them**
  - The main difficulties cited were **limited appointment availability, difficulty using online booking systems/lack of tech confidence, time commitments** and a **preference for face-to-face contact**
- **One third of applicable female respondents (35%)** would prefer to carry out a cervical smear test at home (convenience and privacy reasons largely)
  - **53% would prefer for this test be done at a GP practice** (accuracy and lack of self-confidence/trust reasons)



# Improving local audiology services

- **Two thirds** of respondents would like to access hearing care at the **GP practice, one half** at a **pharmacy** and slightly smaller proportions choose a local high street (**43%**) or a community hospital (**38%**). *(There were very few differences in choices across the sub-groups)*
- **70%** of respondents consider **quality of care** to be most important when considering audiology services (especially older age groups), followed by **58%** who mention **aftercare/follow up**. Time is of the essence for our middle age groups, **one appointment** covering everything (**49%**) and **speed of being seen** (**37%**). **Clear communication and information** about the service is considered to be one of the most important aspects by **46%** of the sample
- In a follow up very similar question, the profile of importance follows almost an identical pattern to the above, with the inclusion this time of choice of provider, considered important by **46%** of the sample



# Childhood vaccinations



- **Two thirds (66%)** of parents of children aged 12 and under are **extremely confident** that routine childhood vaccinations (e.g. MMR) protect children against serious diseases. A further **8% are reasonably** confident.
- **The remaining one quarter (27%) of these parents are not confident of this**
  - *Lack of confidence is higher among **parents aged 35-44**. More than one half of this age group (**58%**) **have little confidence** in routine childhood vaccinations*

- **Just over two thirds (70%)** of parents of children aged 12 and under usually have their child/ children vaccinated against flu
- **Just under one third do not (30%)**
  - *A higher proportion (**39%**) of **parents aged 25-44** do not have their children vaccinated against flu, compared to **0%** of parents aged 45+*
- **Reasons given for not having child vaccinated against flu:**
  - *It's difficult to find the time or get to an appointment **62%** (all aged 25-34)*
  - *I'm concerned about side effects or safety **25%** (all aged 35-44)*
  - *I don't think the flu vaccine is necessary **13%** (aged 35-44)*

# Vaccinations

- **Two thirds** of respondents usually get vaccinated against flu when this is offered to them (**52%** every or most years and **9%** some years)
  - **Just over a quarter do not (28%)**
  - *One in ten are not eligible*
- **Reasons given for not having their flu jab:**
  - **It's not a priority/ don't think flu is serious 37%**
  - **I'm worried about side effects or vaccine safety 32%**
  - **Bad reaction/ experience with previous jabs** (*unprompted response*) **18%**
  - **We are over-medicated, diminishing our natural defences** (*unprompted response*) **7%**
  - **Religious or cultural reasons 7%**
  - **Fear of needles 6%**
  - **Need to check ingredients due to existing health condition 4%**
  - **Don't know where to access it 3%**
- **Just under one half (46%)** of those who never or rarely take up their flu vaccination offer, **say that nothing at all would increase their confidence** in getting vaccinated
  - The other half say that **more information on the safety, effectiveness and/or suitability of the vaccine would increase their confidence.**  
Along with **timely reminders** from the GP



- One third of respondents are **unsure about what the HPV vaccine is** and how effective it might be in preventing later life cancers
  - A **similar proportion strongly agree (34%)** that **HPV is important** for preventing later life cancers
  - **Information about safety and benefits, trust in the NHS and recommendations from one's GP/nurse would be most influential** in deciding whether to have the HPV vaccination
- **84%** of respondents are **likely** to attend an NHS screening appointment for conditions such as blood pressure, cholesterol, or abdominal aortic aneurysm (AAA) if invited. (With **56%** saying **extremely likely**)
  - **The remaining 15% are not likely to do this** (*notably those aged 35-44*)
- **Three quarters** of respondents **have not missed or postponed** a screening or vaccination appointment in the past
  - **One in five respondents (20%) have done so**, notably those aged 25-34, those with long term health conditions and carers



## Section 3: Survey 5 results

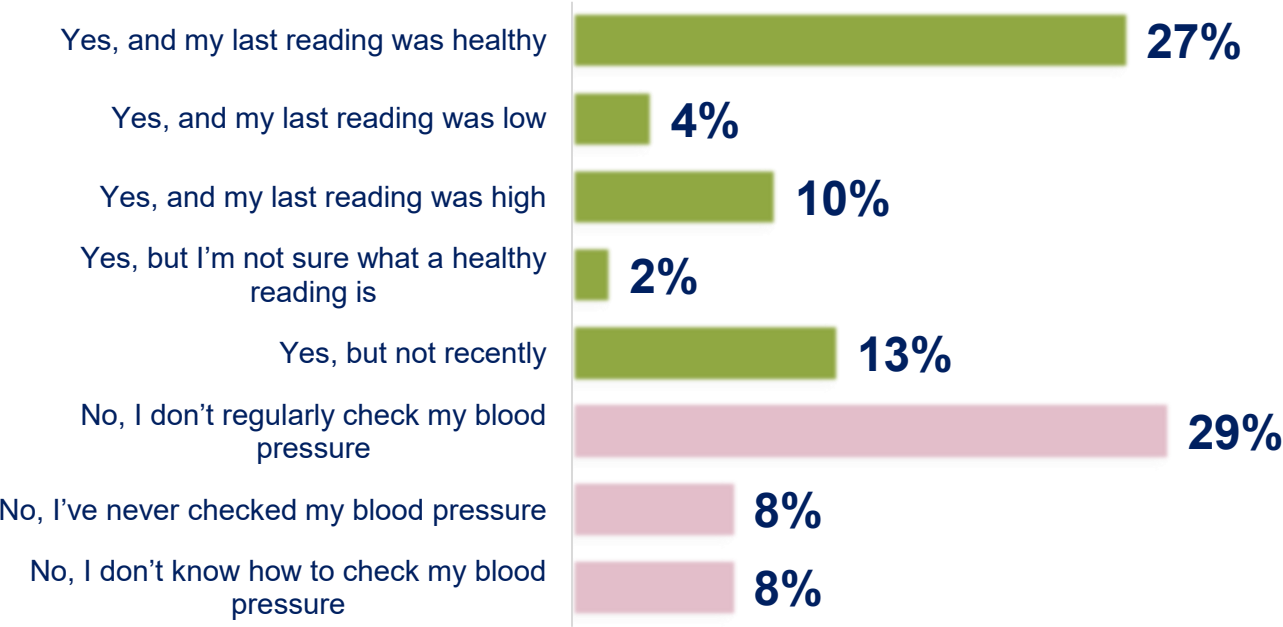
### 3.1 Managing your health (Blood pressure, Self-Care Medicines Scheme)





**56%** of respondents, in total, currently check their own blood pressure on a regular basis

**44%** *do not* check their own blood pressure



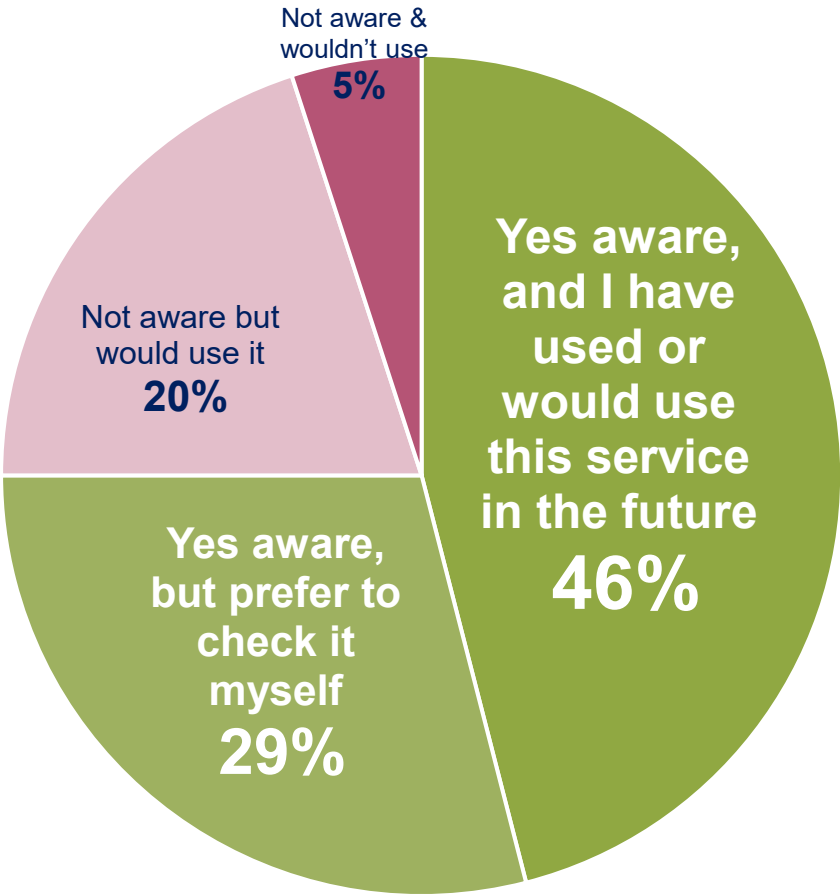
- One in ten respondents (10%) report **high blood pressure**.
  - This rises to one third (32%) of those in Haringey
  - And 17% of males, compared to 3% of females
- Propensity to regularly check blood pressure **increases with age**, **47%** of those aged 34 and under compared to **60%** of those aged 55+ check their blood pressure regularly

Q:Do you regularly measure your own blood pressure?  
Base: n=172, total sample



Three quarters of respondents (75%), in total, are aware that you can get your blood pressure checked for free at a GP practice or local pharmacy, however 29% would still prefer to check it themselves

In total, 25% are not aware of free blood pressure checks at these locations. Just 5% say they wouldn't use this service

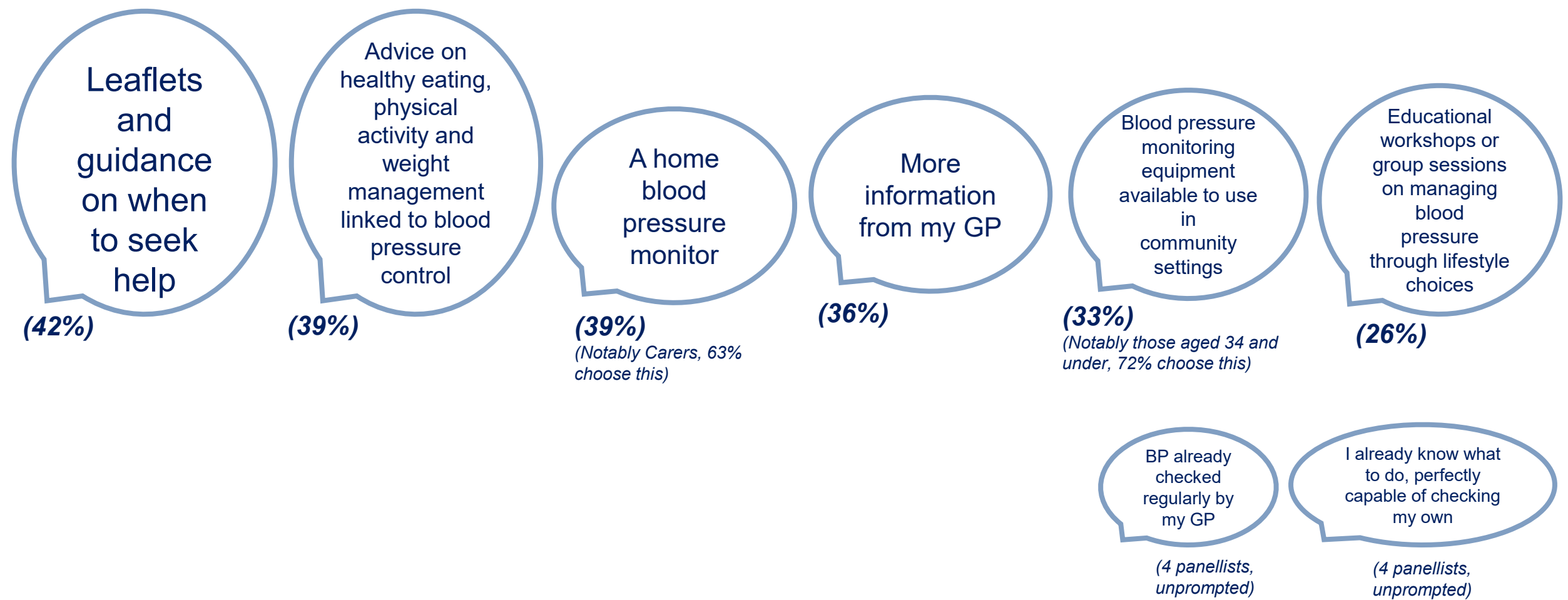


○ A slightly higher than average preference (44%) for checking one's own blood pressure among those aged 65+

Q: Did you know you can get your blood pressure checked for free at a GP practice or local pharmacy? Base = total sample



**Panellists were asked how the NHS could best help them understand and manage their blood pressure** *(from a prompted list of options)*. The main ways selected were leaflets, guidance, advice, information and a home blood pressure monitor...



Q: Please tell us how the NHS could best help you to understand and manage your blood pressure.  
Base = total sample

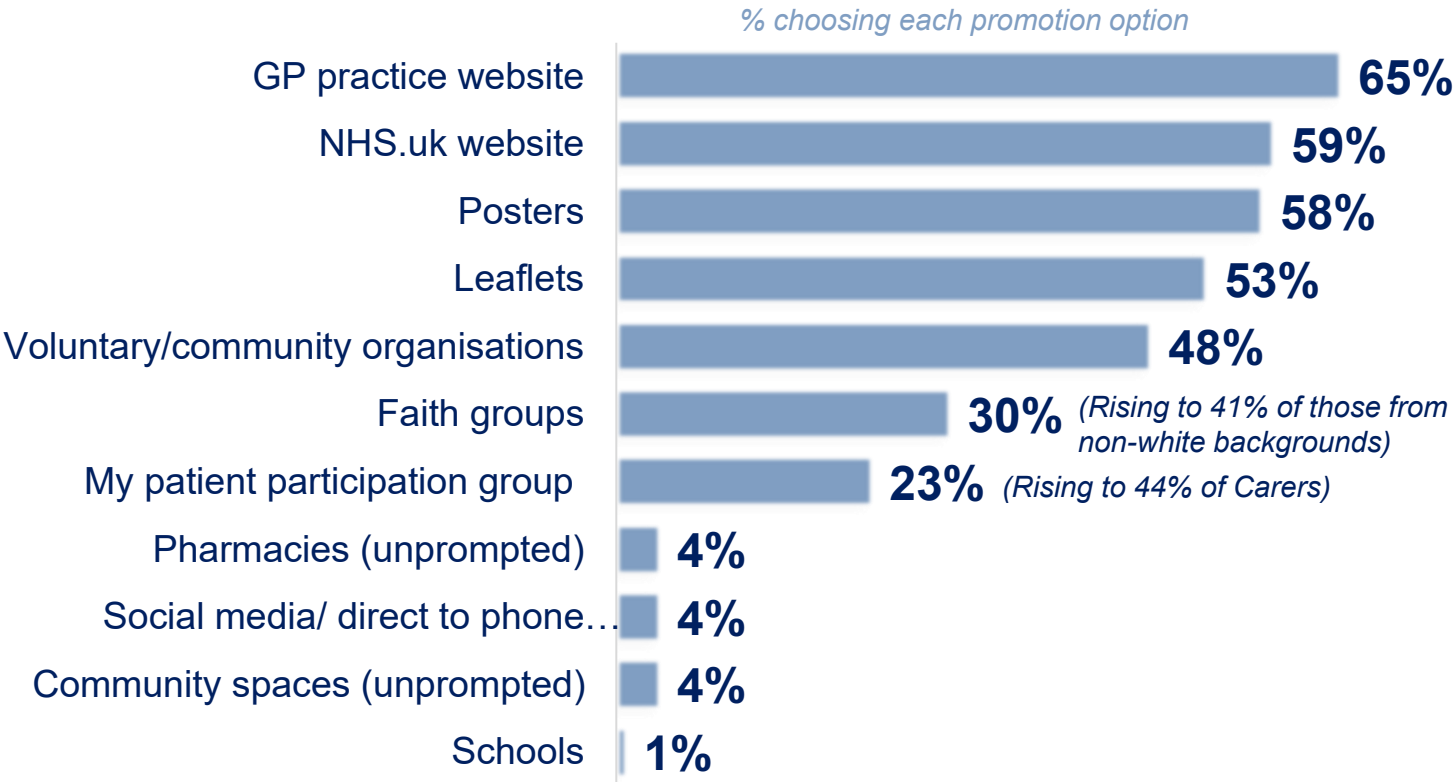


**Panellists were asked how the NHS could best promote the Self-Care Medicines Scheme available from pharmacists *(from a prompted list of options)*. The main ways selected were GP and NHS websites, posters and leaflets, along with voluntary/community organisations...**

**Self-Care Medicines Scheme**

Through something called the self-care medicines scheme, community pharmacies can provide patients on low income with free medicines for the management of minor health conditions that they might otherwise not be able to afford.

How could we best promote support schemes like this? Where would you look (or help someone else to look) for information about the self-care medicines scheme or other low-income support schemes?



Q: see above  
Base = total sample



## Section 3: Survey 5 results

### 3.2 Cancer screening appointments





Around **two thirds** of all respondents had been for at least one type of cancer screening appointment *(69% in total)*.

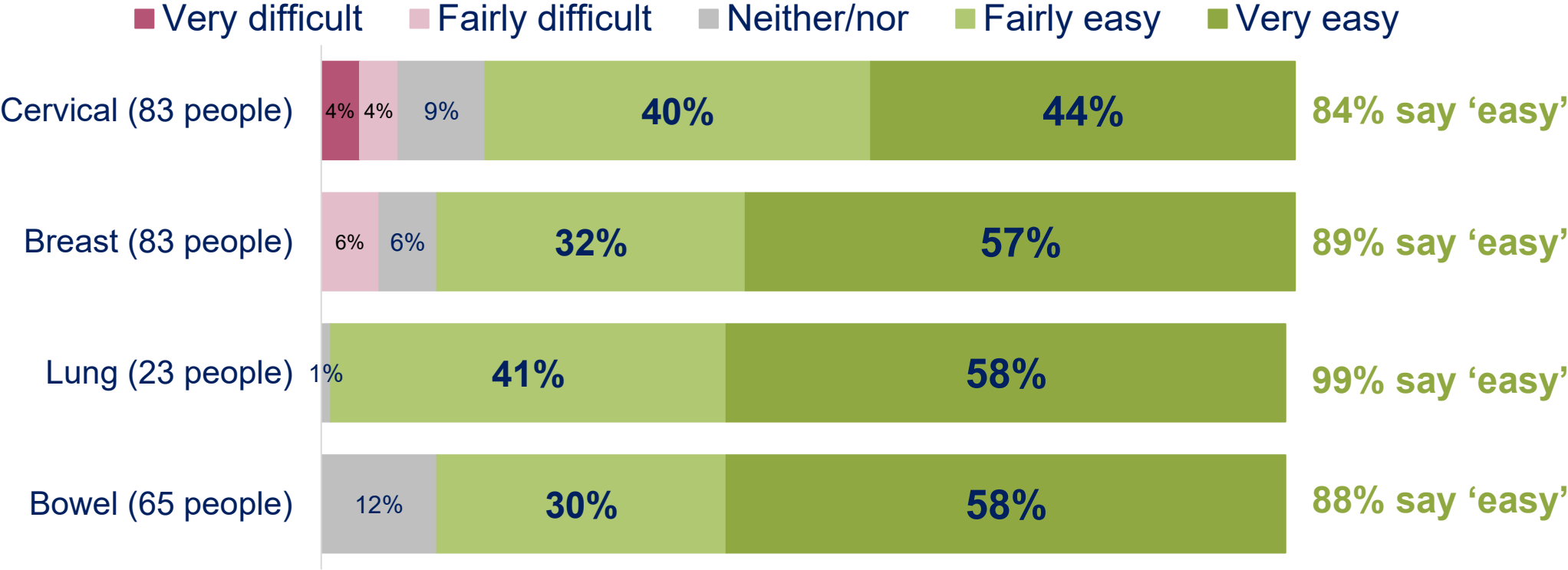
Around **one in six** had been invited for a cancer screening appointment but not taken it up *(17% in total)*

	Cervical <small>(% of total sample)</small>	Breast <small>(% of total sample)</small>	Lung <small>(% of total sample)</small>	Bowel <small>(% of total sample)</small>
Attended a screening appointment for this type of cancer	53%	55%	16%	42%
Been invited but did not take up the offer	9%	4%	7%	8%
Do qualify but not yet invited	5%	7%	14%	12%
Do not qualify	16%	21%	27%	14%
Don't know/ not sure	16%	13%	36%	24%

*(Attendance generally slightly higher than average in Barnet and slightly lower than average in Islington)*



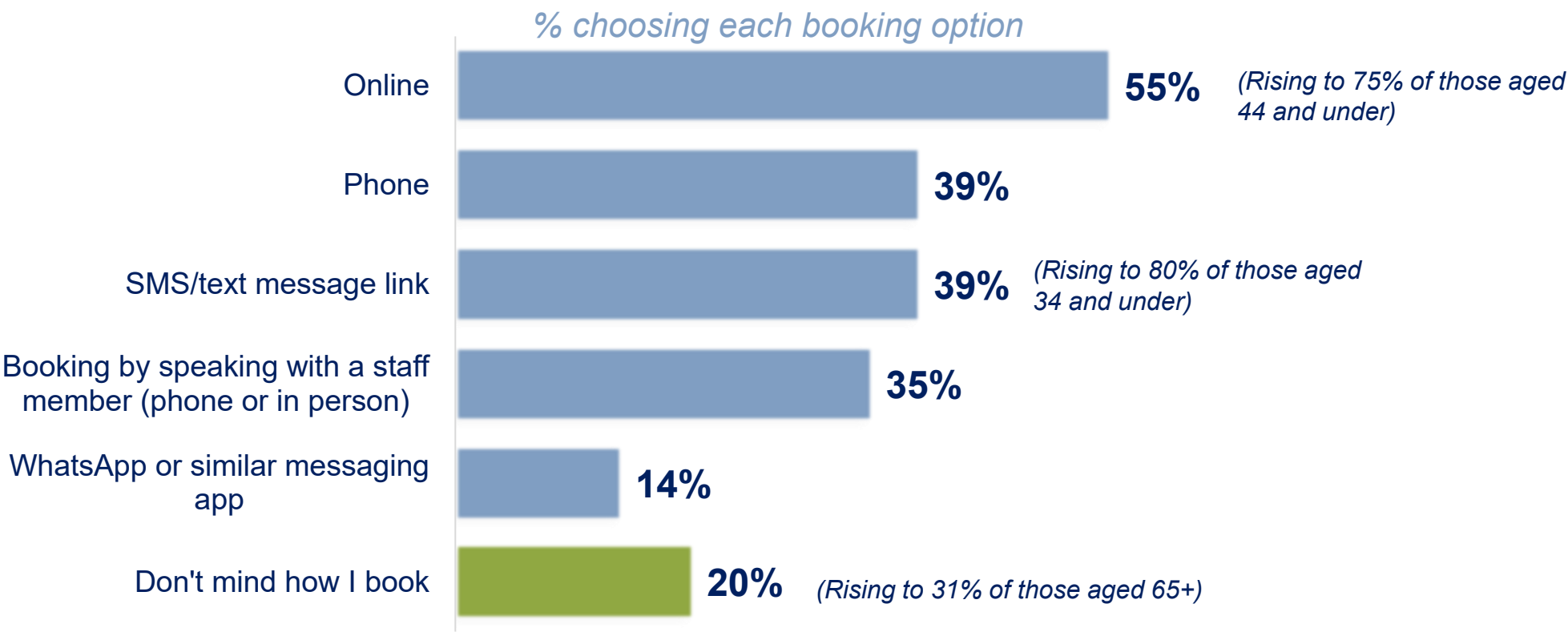
A vast majority (**84% or more in each case**) of cancer screening attendees found it fairly or very easy to book their appointment, especially for lung cancer screening (**99% saying easy**)



Q How easy did you or your loved one find it to book the cancer screening appointment(s)?  
Base = those attending each type of cancer screening



**Panellists were asked what their preferred method to book or rearrange a cancer screening appointment would be** *(from a prompted list of options).* **Online heads the list, followed by phone/SMS**

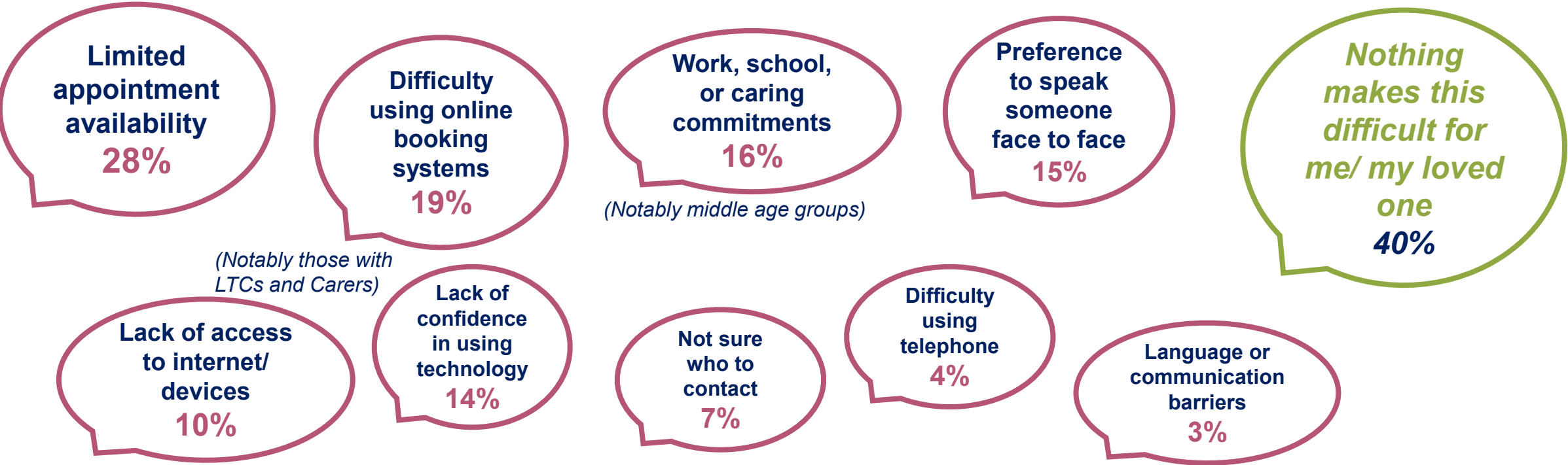






**Panellists were asked what, if anything, makes it harder for them to book or rearrange a cancer screening appointment** *(from a prompted list of options)*. **60% said there were no such difficulties for them.**

**The main difficulties cited were limited appointment availability, difficulty using online booking systems/lack of tech confidence, time commitments and a preference for face-to-face contact**

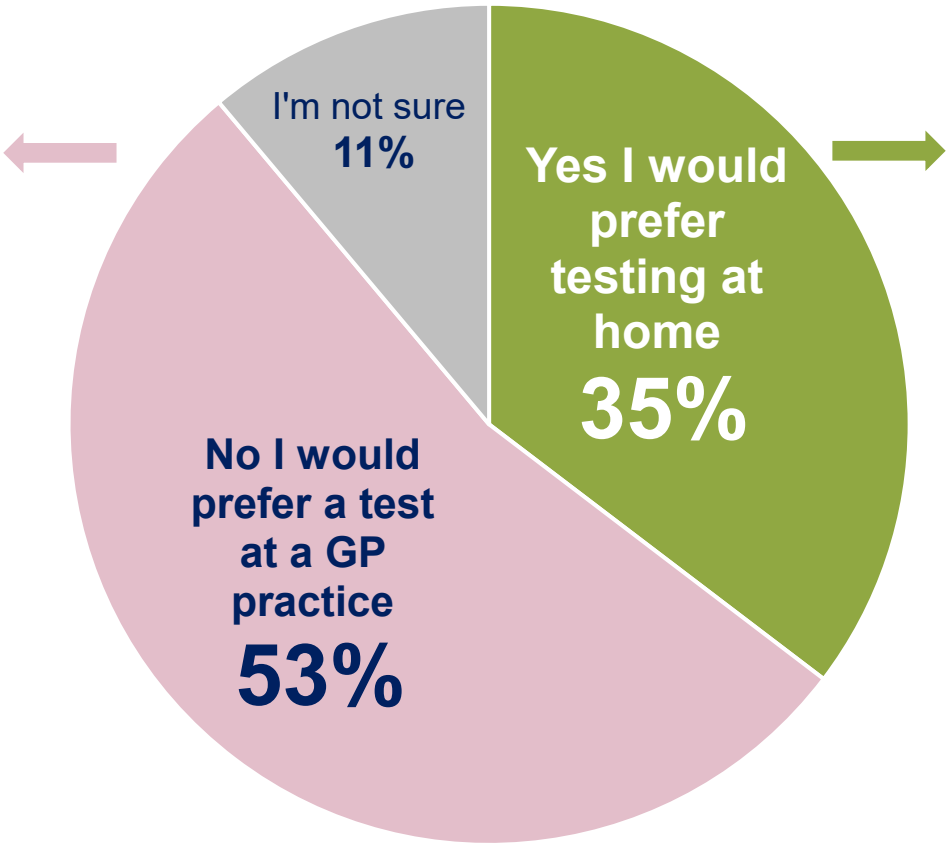




**One third of applicable female respondents (35%) would prefer to carry out a cervical smear test at home**

**53% would prefer for this test be done at a GP practice**

- There is a higher preference (81%) for having a cervical smear test at a GP practice among applicable females from non white ethnic backgrounds, compared to applicable females from white ethnic backgrounds (41%)
- **Reasons given for GP practice preference: (all unprompted)**
  - Professionalism/ expertise 40%
  - Lack of confidence in self admin 27%
  - Accuracy/reliability reasons 24%
  - Need reassurance/accountability 14%
  - Seriousness/importance of test 10%
  - Prefer face to face care/ support 10%



- **Reasons given for 'at home' preference: (all unprompted)**
  - Convenience and time saving 53%
  - Privacy and dignity, reduces embarrassment 23%
  - Physical comfort and pain avoidance 19%
  - Appointment access/ system barriers 16%
  - Negative past experiences 15%
  - Emotional comfort, reduces anxiety 9%



**One third of applicable female respondents (35%) would prefer to carry out a cervical smear test at home. 53% would prefer for this test be done at a GP practice.**

**Their verbatim reasons are given below** *(unprompted and open ended)...*

### Prefer GP practice

**Safer done by a professional**

Someone **qualified** to do it and **able to escalate**

**I don't trust that a self-administered smear test would be of any value** - roughly 1 in 3 of the ones I've had done by a GP have come back 'inadequate'

A clinician needs to do this test to **ensure that it is done properly** and gets enough cells to ensure that the screening result is accurate. **It will not be cheaper to get patients to do their own tests as the possibilities of errors in doing it are too high.** This idea lacks common sense as only a small group of women will be able and happy doing this

Something as **important** as cancer screening is critical to **perform correctly**. An **expert** will surely give the best screening results

The thought of doing my own makes me **feel sick**

**I would not be confident to do a smear correctly**

### Prefer cervical smear test at home

**It's more convenient**, you can be **relaxed** and don't have to **worry about booking an appointment**. **Video is very clear** and self-explanatory

**It is more convenient time wise**, I do not have to waste time looking for an available appointment and it is **more private** and **without too much pain** -some people can be a little rough

**Saves me taking up time at my GP practice** that someone else might need - lighten the load

**Less time and less embarrassing**

**Bad/ mixed previous experiences** (several respondents saying this)

I am autistic and **I don't want to be touched by anybody** and find the whole booking and getting and going to places and having to deal with people I do not really know or who are not my family **too stressful**

Q: If you could take a cervical smear test at home yourself (visit YouScreen instructions video) [https://www.youtube.com/watch?v=VTbc8cEI\\_dU](https://www.youtube.com/watch?v=VTbc8cEI_dU)  
Would you prefer to do that rather than visiting your GP practice for a cervical smear test?  
(N.B. Research has shown that 99 out of 100 women are able to carry out their own cervical smear test at home properly)  
Base = 112 applicable females



## Section 3: Survey 5 results

### 3.3 Improving local services

*(Audiology services)*





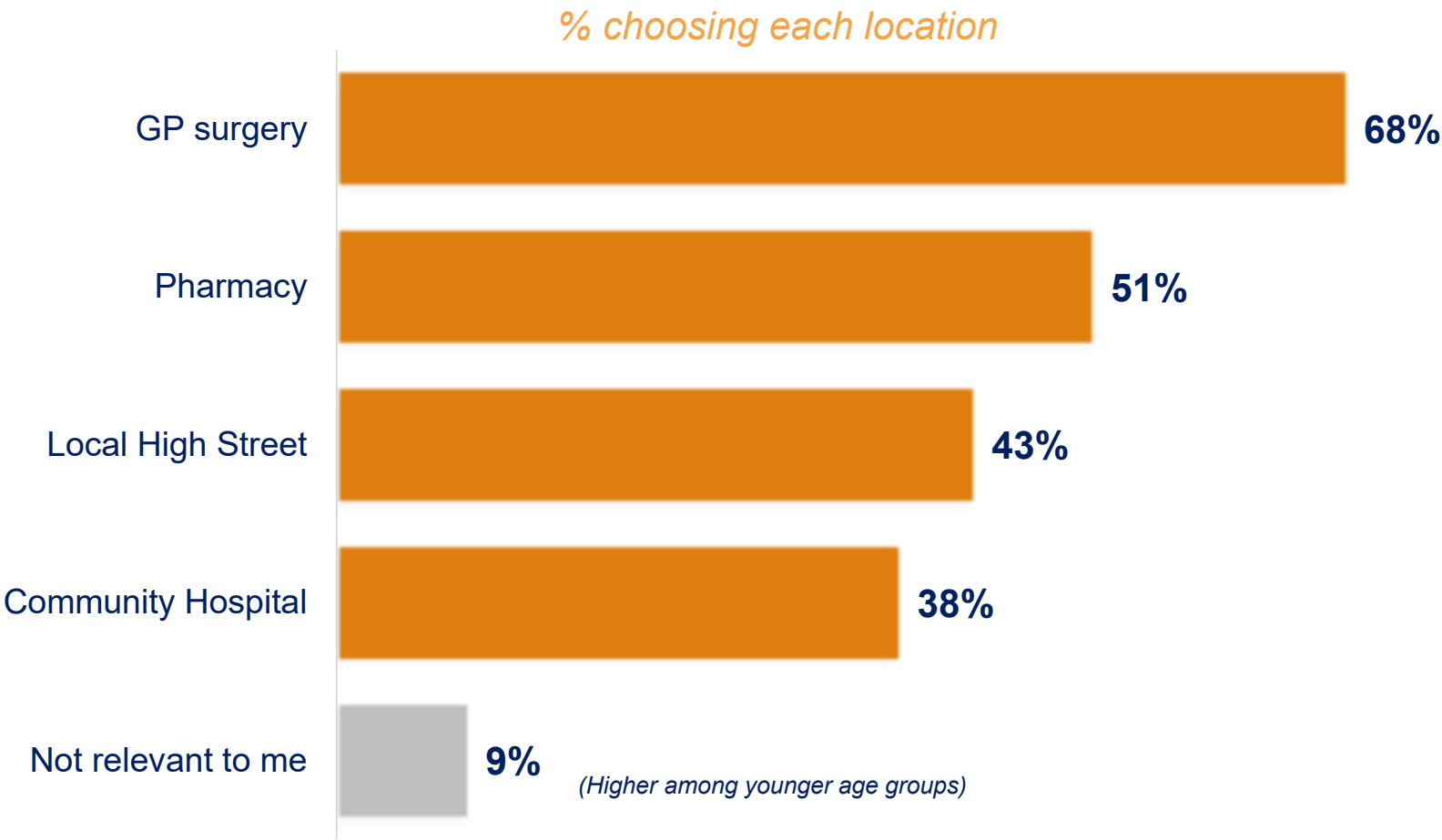
# Audiology services locally

We mentioned in the last survey that NCL ICB is looking to develop new community audiology hubs in each of our five boroughs (Barnet, Camden, Enfield, Haringey and Islington). These Audiology hubs will focus on diagnosing and treating hearing loss within the community, while maintaining strong links with local GP practices and hospitals. In the previous survey, many of you highlighted that many of the services planned for these hubs — such as hearing assessments, hearing aids, and referrals where needed — are those you would expect as potential patients. We would like to find out more about how you might access audiology services and how we can measure patient experience.



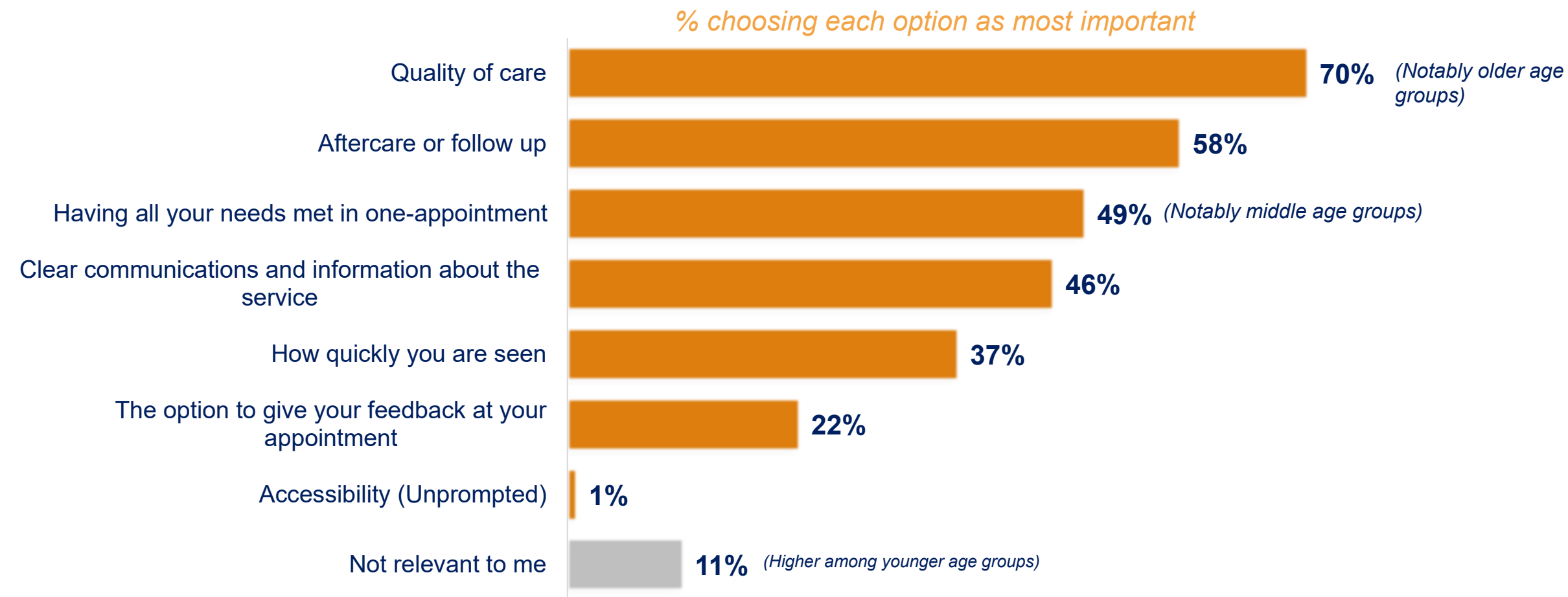
**Two thirds** of respondents would like to access hearing care at the **GP practice**, **one half** at a **pharmacy** and slightly smaller proportions chose a local high street (**43%**) or a community hospital (**38%**)

(Very few differences in choices across the sub-groups)



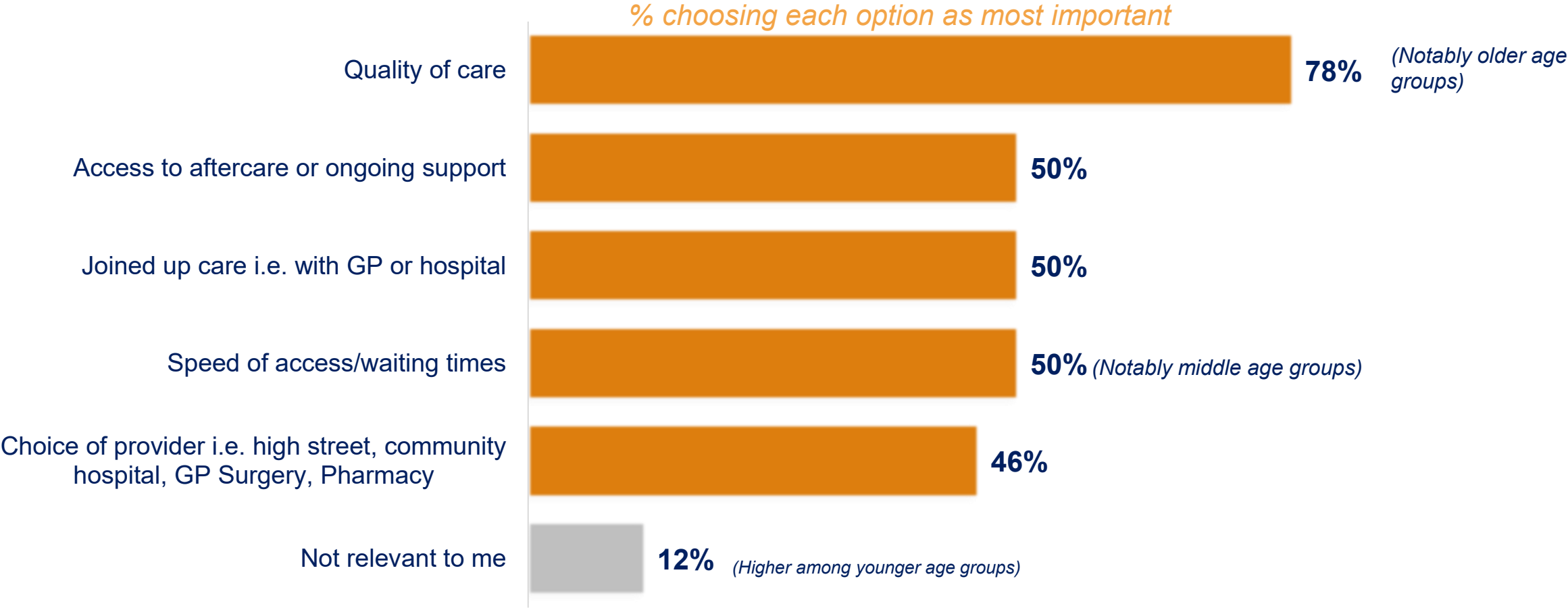


**70%** of respondents consider **quality of care** to be most important when considering audiology services, followed by **58%** who mention **aftercare/follow up**. Time is of the essence for our middle age groups, **one appointment** covering everything (**49%**) and **speed of being seen** (**37%**). **Clear communication and information** about the service is considered most important by **46%**



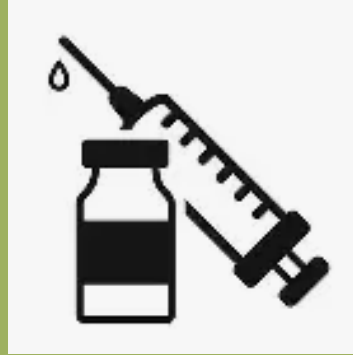
Q: What would you consider to be most important when using audiology services?  
Base = total sample

A very similar profile of results as in the previous question, with quality of care heading the list, followed by after care, joined up care and speed of access. Choice of provider is considered almost equally as important as the latter three



# Section 3: Survey 5 results

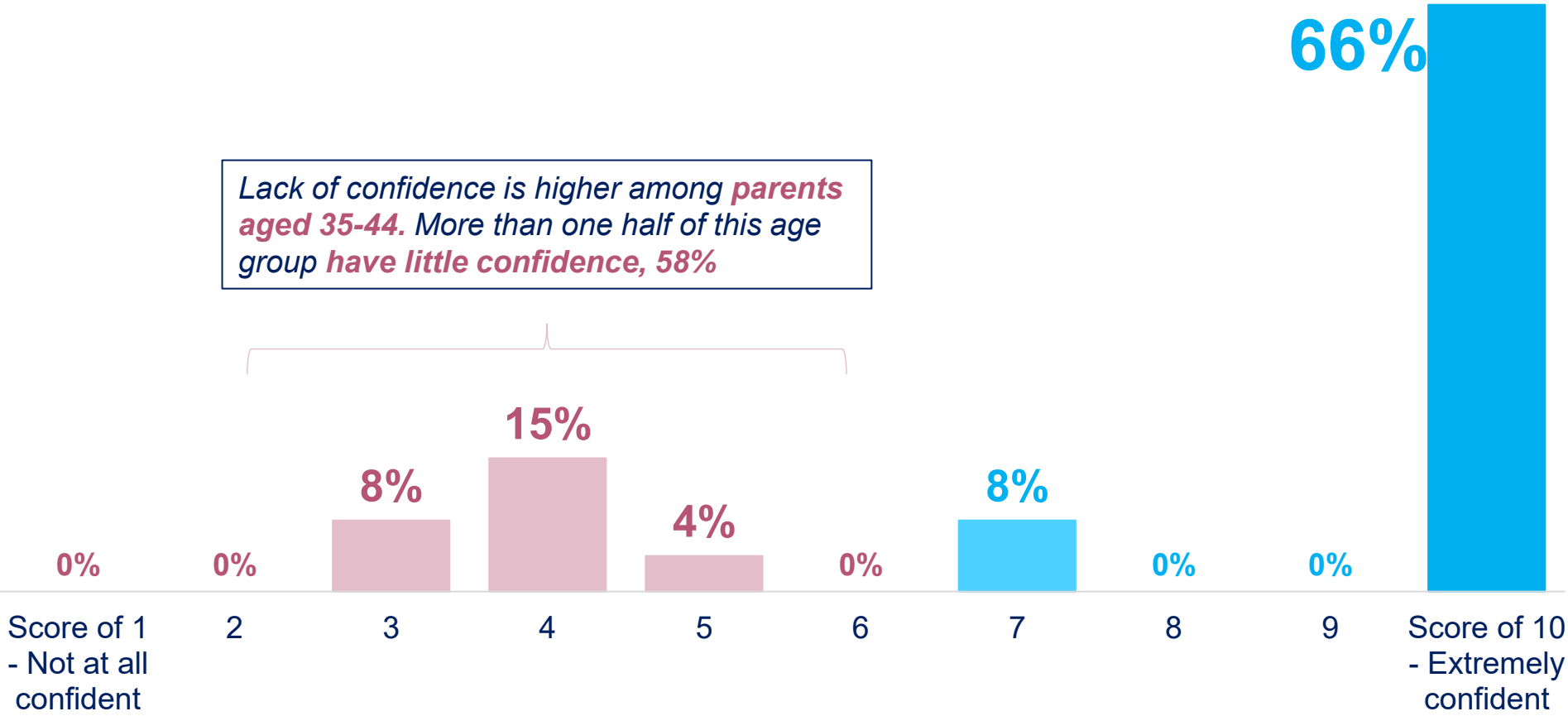
## 3.4 Vaccinations





Two thirds (66%) of parents of children aged 12 and under are extremely confident that routine childhood vaccinations (e.g. MMR) protect children against serious diseases. A further 8% are reasonably confident.

The remaining one quarter (27%) of these parents are not confident of this

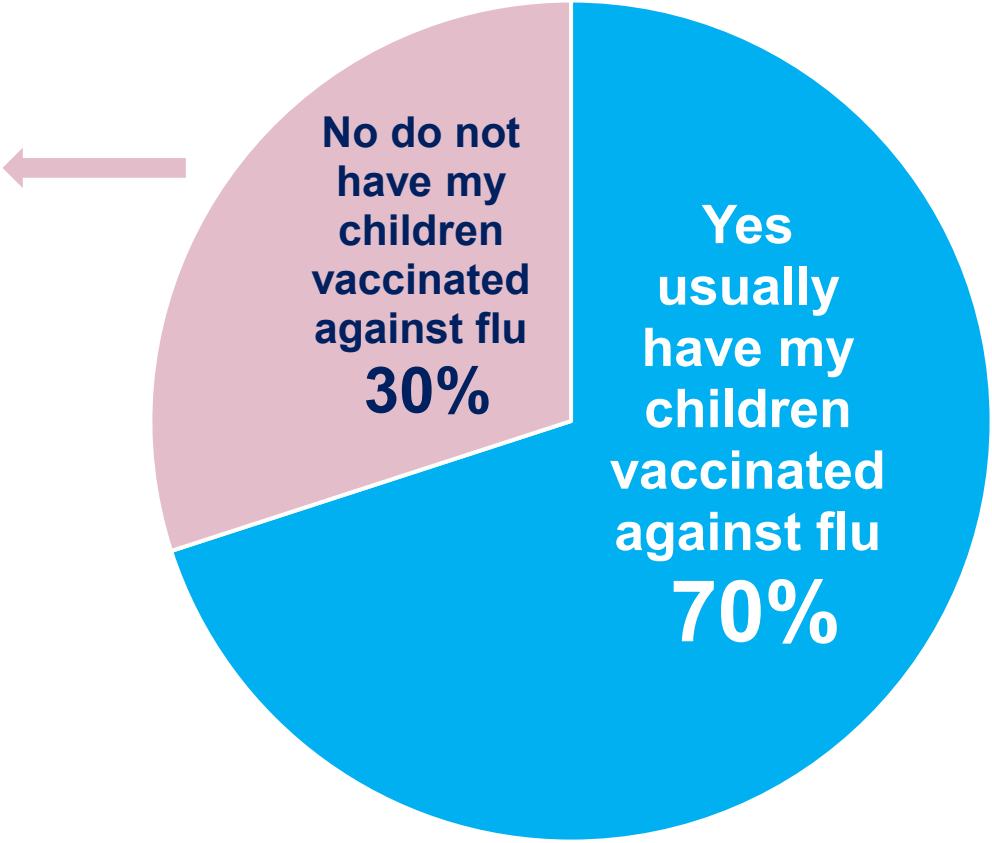




**Just over two thirds (70%) of parents of children aged 12 and under usually have their child/ children vaccinated against flu**

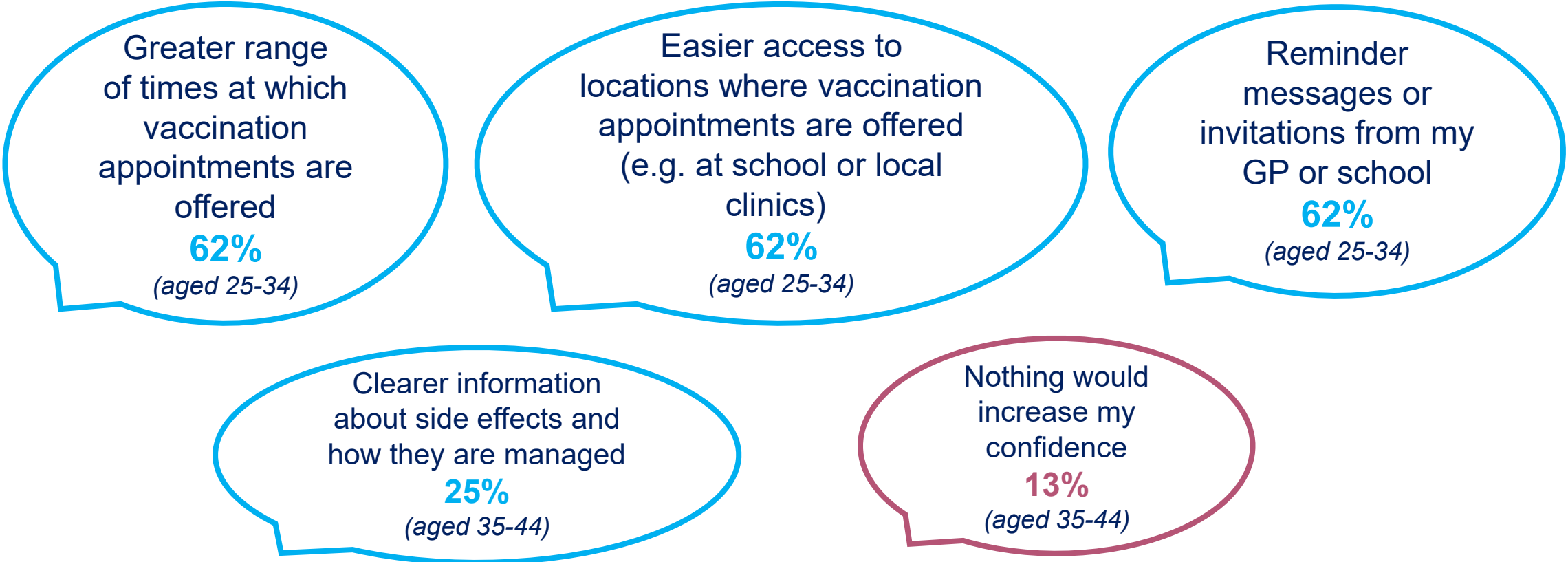
**Just under one third do not (30%)**

- A higher proportion (39%) of parents aged 25-44 do not have their children vaccinated against flu, compared to 0% of parents aged 45+
- **Reasons given for not having child vaccinated against flu:** *(from a prompted list)*
  - It's difficult to find the time or get to an appointment 62% (all aged 25-34)
  - I'm concerned about side effects or safety 25% (all aged 35-44)
  - I don't think the flu vaccine is necessary 13% (aged 35-44)



Those parents of children aged under 12, who do not have their children vaccinated against flu because of time pressures and lack of appointment availability (aged 25-34): are looking for options that solve those particular issues.

The relevant parents aged 35-44, expressed concerns about safety and side effects and one does not feel the flu vaccine is necessary at all







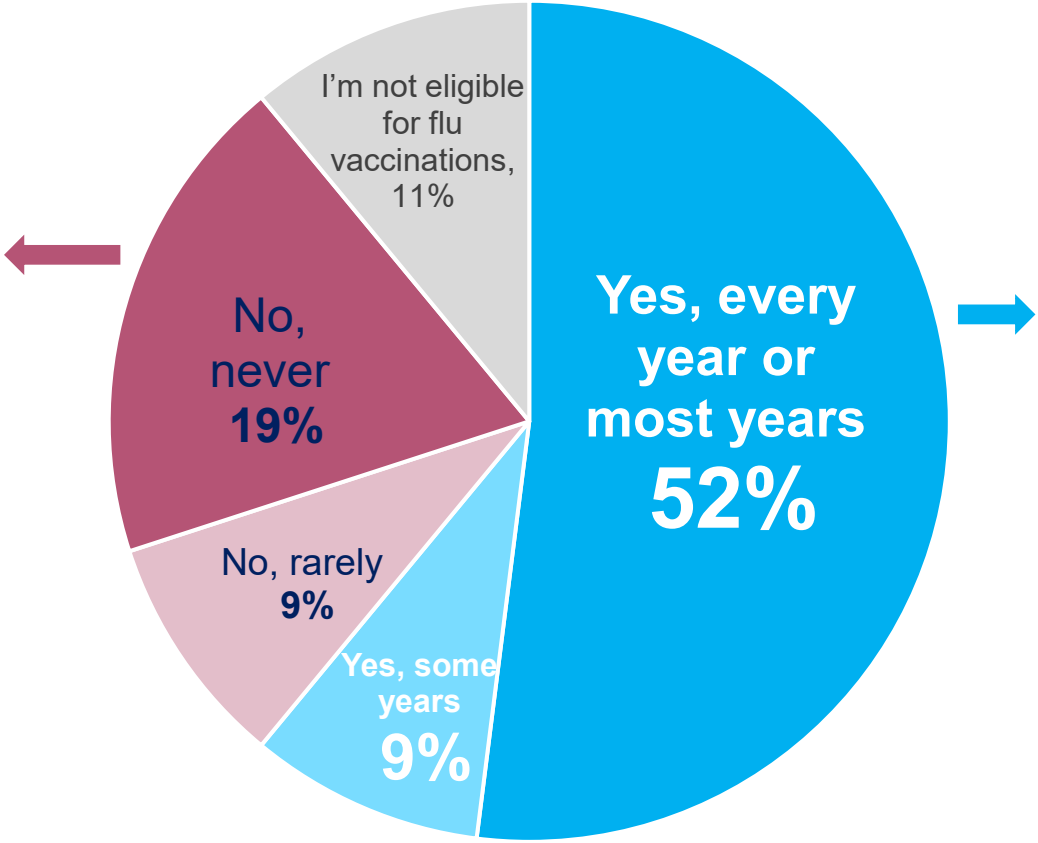
**Two thirds** of respondents usually get **vaccinated against flu** when this is offered to them (**52%** every or most years and **9%** some years)

**Just over a quarter do not (28%)**

*One in ten are not eligible*

- Never or rarely rises to **48%** among those from non white ethnic backgrounds, compared to **21%** of those from white ethnic backgrounds
- Never or rarely also rises to **53%** of carers

- **Reasons given for not having their flu jab:**  
(From a prompted list)  
(Base = 40 people who never or rarely have their flu jab)
  - **It's not a priority/ don't think flu is serious** **37%**
  - **I'm worried about side effects or vaccine safety** **32%**
  - **Bad reaction/ experience with previous jabs**  
(unprompted response) **18%**
  - **We are over-medicated, diminishing our natural defences** (unprompted response) **7%**
  - **Religious or cultural reasons** **7%**
  - **Fear of needles** **6%**
  - **Need to check ingredients due to existing health condition** **4%**
  - **Don't know where to access it** **3%**

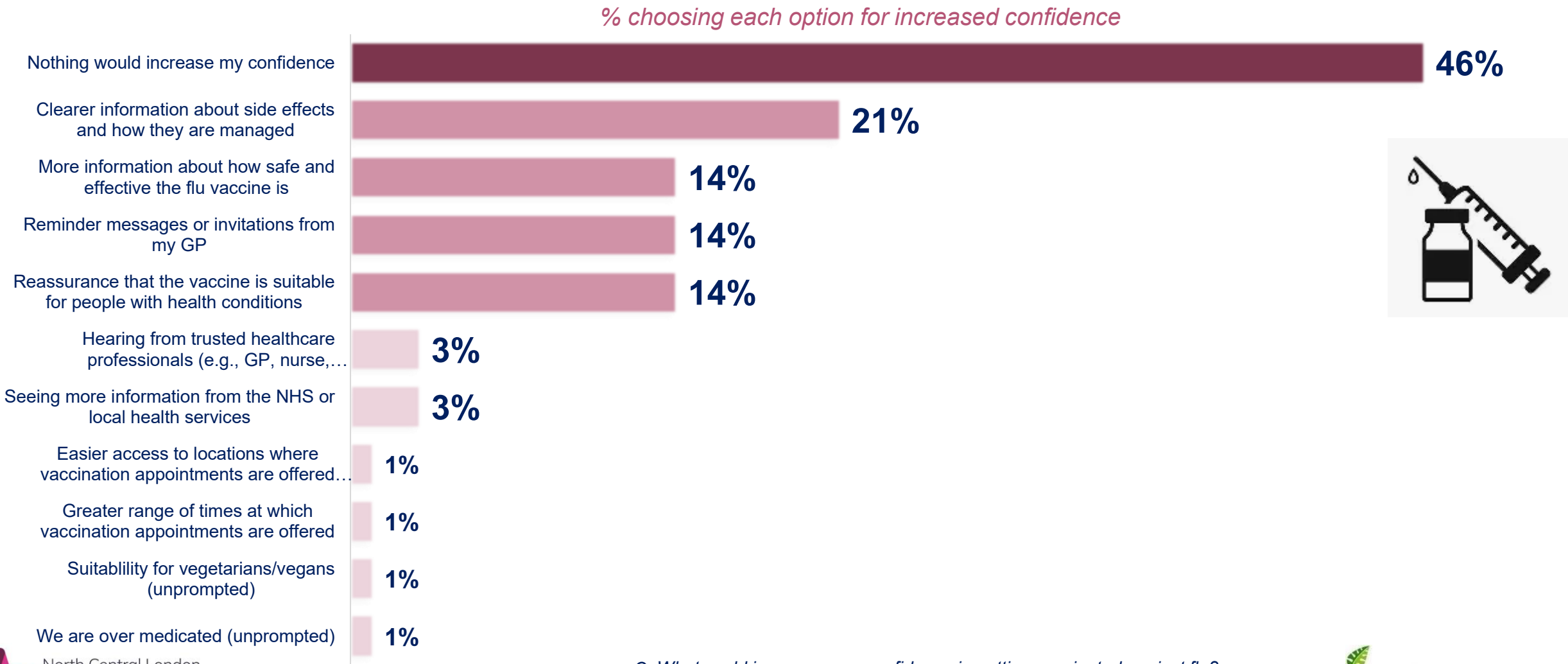


○ Every or most years rises to **80%** of those aged 65+

Q: Do you usually get the flu vaccine if/when it is offered to you? Base = total sample

**Just under one half (46%)** of those who never or rarely take up their flu vaccination offer, say that nothing at all would increase their confidence in getting vaccinated

**The other half** say that **more information on the safety, effectiveness and/or suitability of the vaccine** would increase their confidence. **Along with timely reminders**

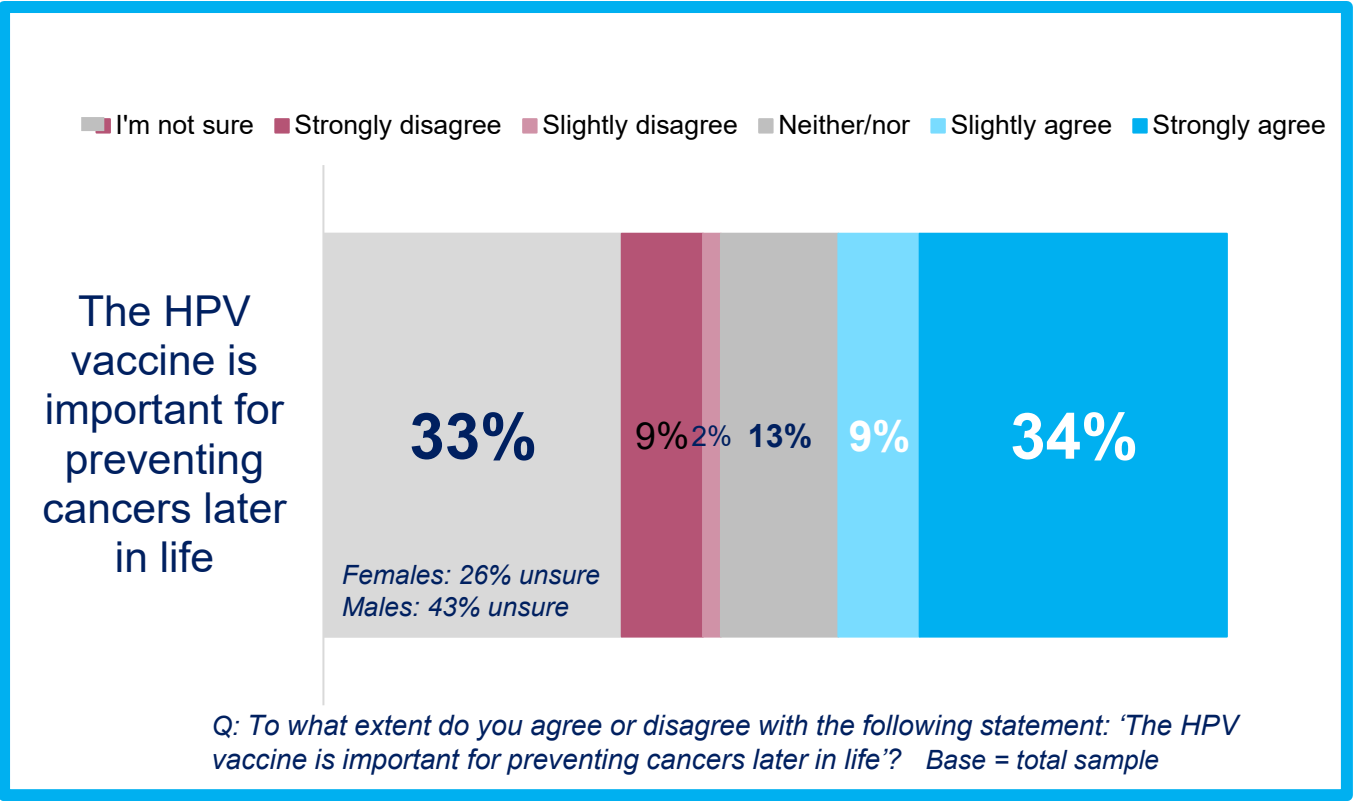


Q: What could increase your confidence in getting vaccinated against flu?  
Base: n=40 people who rarely or never take up their flu vaccination offer

One third of respondents are unsure about what the HPV vaccine is and how effective it might be in preventing later life cancers

A similar proportion strongly agree (34%) that HPV is important for preventing later life cancers

Information about safety and benefits, trust in the NHS and recommendations from one’s GP/nurse would be most influential in deciding whether to have the HPV vaccination



Influencing factors:

(From a prompted list)

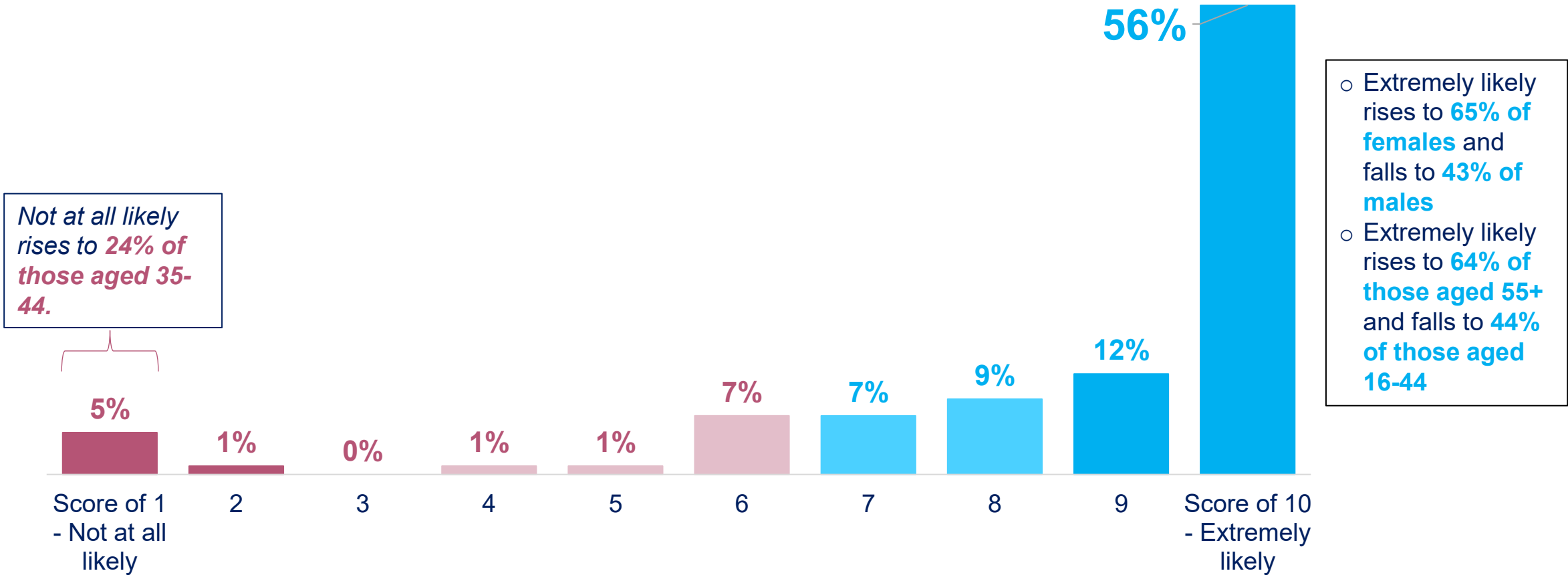
- Information provided about safety and benefits 54%
- Trust in the NHS 42%
- Recommendations from my GP/nurse 35%
- Convenience of appointment 27%  
(Rising to 62% of those aged 16-34)
- Family or cultural views 7%
- What is HPV? (unprompted response) 2%
- I’m too old/never had children (unprompted response) 2%

Q: If you (or your child) were invited for the HPV vaccine, what would be the biggest factor influencing your decision? Base = total sample



84% of respondents are **likely** to attend an NHS screening appointment for conditions such as blood pressure, cholesterol, or abdominal aortic aneurysm (AAA) if invited. (With 56% saying **extremely likely**)

The remaining 15% are not likely to do this



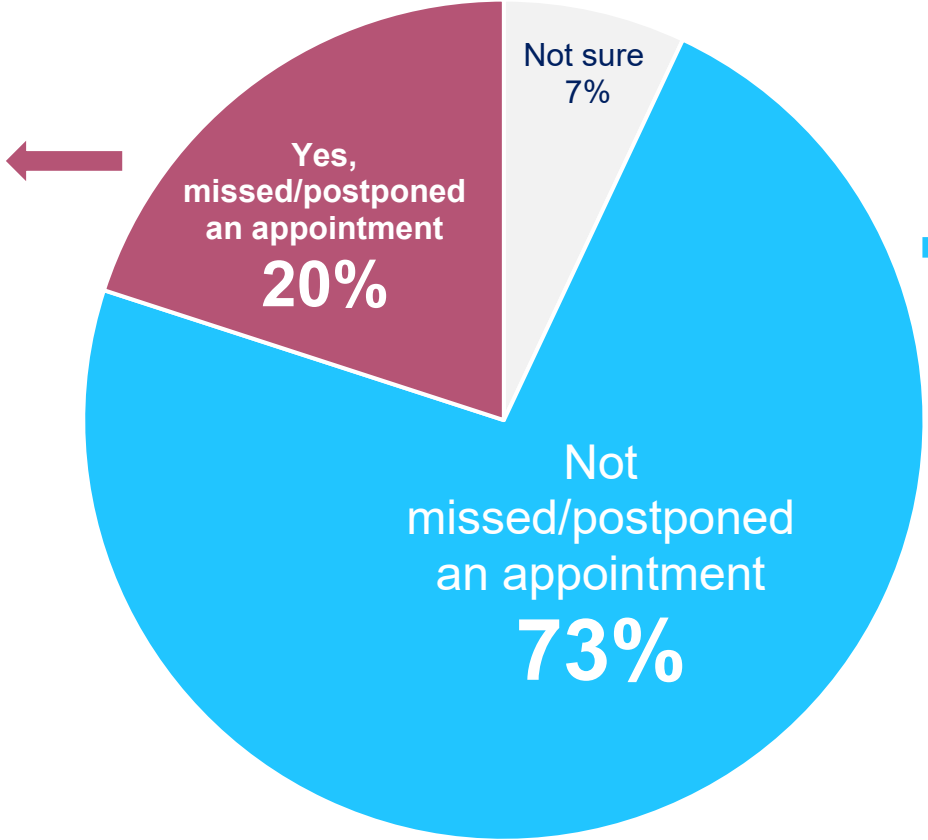
Three quarters of respondents have not missed or postponed a screening or vaccination appointment in the past

One in five respondents (20%) has missed or postponed a screening or vaccination appointment in the past



- Missed/postponed appointments rise to **34% of those with long term conditions**, **38% of carers** and **45% of those aged 25-34 years**

- **Reasons given for missing/ postponing a screening or vaccination appointment:**  
*(From a prompted list)*  
*(Base = 28 people who have missed/ postponed)*
  - **Too busy 24%**
  - **Forgot 23%**
  - **Worried about results or side effects 20%**
  - **Illness on day of appointment** *(unprompted response)* **18%**
  - **Didn't think it was necessary 15%**
  - **Difficult to book 13%**
  - **Existing health conditions: prevented me engaging/ didn't know safety aspects/ felt embarrassed** *(unprompted response)* **11%**
  - **Lack of airborne precautions at clinic** *(unprompted response)* **4%**



- Not missed/ postponed an appointment rises to **80% of those aged 55+** and falls to **40% of those aged 25-34**

Q: Have you ever missed or postponed a screening or vaccination appointment in the past? Base = total sample

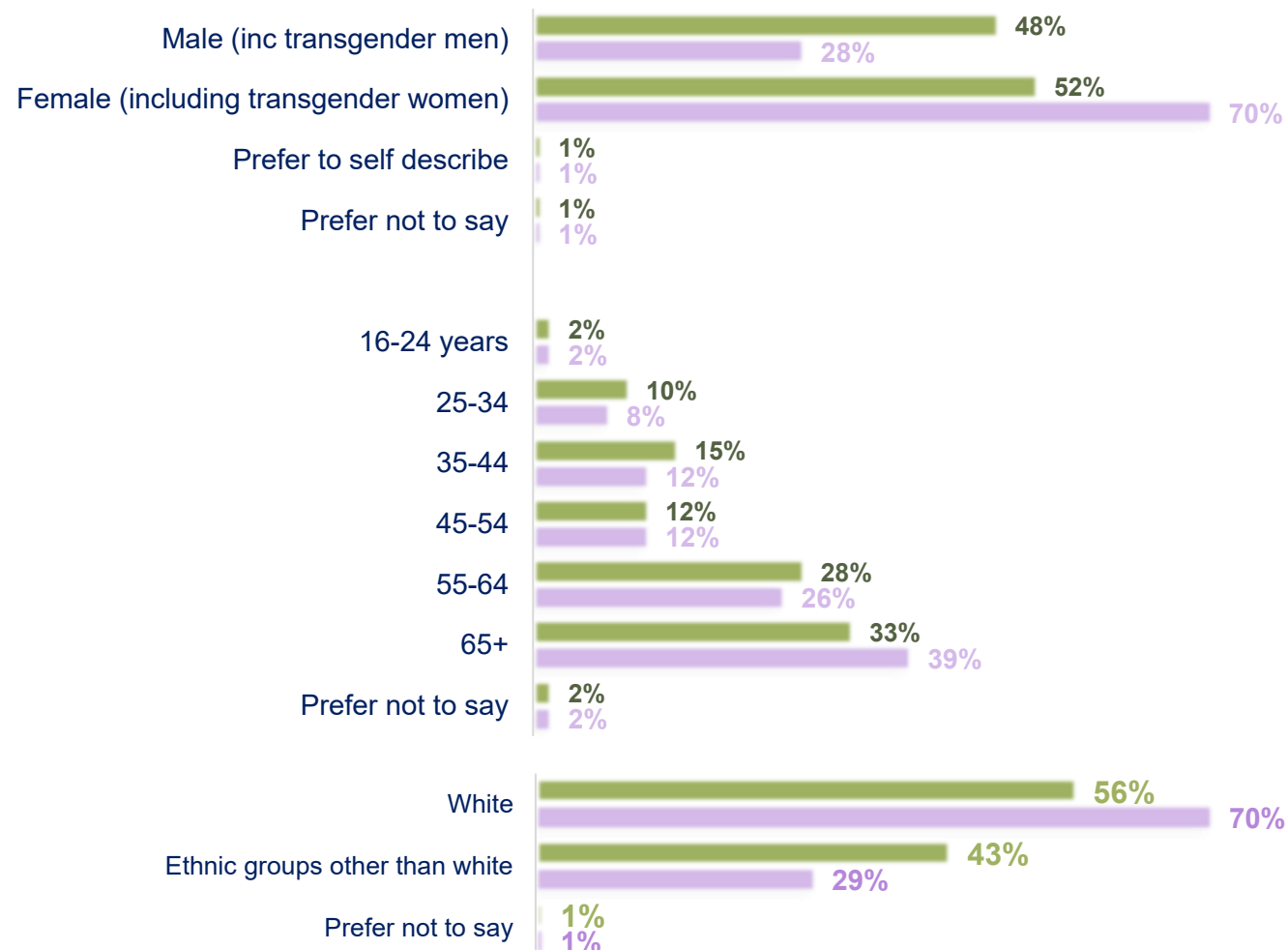
# Section 4: Survey 5 sample profile





# Comparison of the age, gender and ethnicity profiles of the **rim weighted survey 5 sample** with the **actual profile of survey 5 respondents** (*unweighted*)

% survey 5 participant rim weighted profile (172)    % of survey 5 participants unweighted (172)



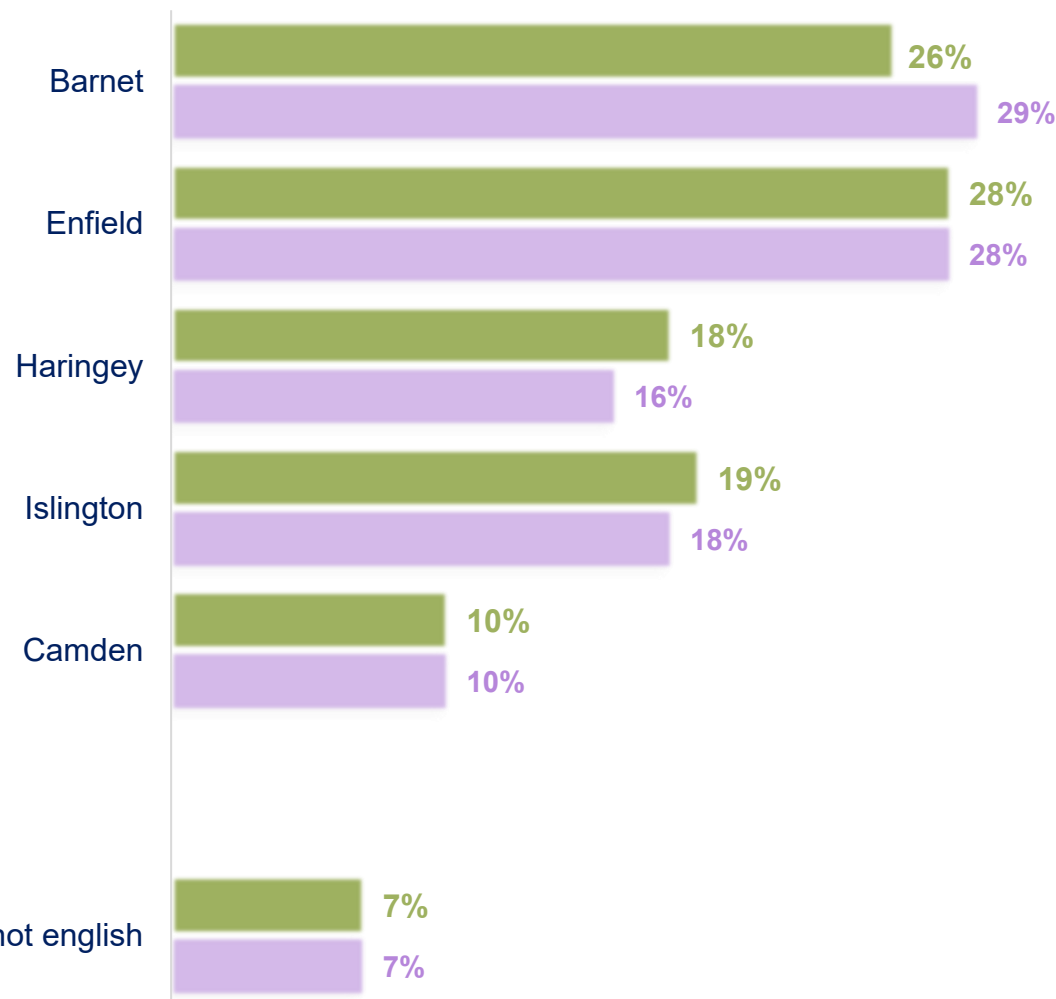
We can see that females, older age groups and white panellists are more likely to respond to surveys (*looking at the pink bars*) than their counterparts.

N.B.  
Survey 5 participants' responses have been rim weighted to reflect the profile of the NCL population (according to 2021 census data).

Rim weighting means that a combination of reweights are applied to the sample, in this case: gender and ethnicity.

# Comparison of the borough and main language profiles of the **rim weighted survey 5 sample** with the **actual profile of survey 5 respondents** *(unweighted)*

% of survey 5 participant rim weighted profile (172)    % of survey 5 participants unweighted (172)



We can see that panellists in Barnet and Enfield are slightly more likely to respond to surveys than those in Camden.

However, panellists are responding in numbers roughly proportionate to the size of the respective boroughs.



### **Any questions please contact us:**

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- Julie Ford, Recruitment and Data Manager, Jungle Green mrc Ltd - [julie@junglegreenmrc.co.uk](mailto:julie@junglegreenmrc.co.uk) , 01275 818343
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