

Our GPs

The shape of services today, and in the future.



A report by Healthwatch Newham

November 2016

“GPs see over one million people every working day in England.

The average patient visits their doctor just over five times a year, and the demand for services across the system, including general practice and wider primary care, continues to rise.”

Deputy Medical Director, NHS England

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Executive Summary

Healthwatch is the official ‘patient voice’ across England. Established as part of the Health and Social Care Act 2012, we champion the views and experiences of health and social care service users. Healthwatch Newham, the local consumer champion, has conducted extensive research on the experience of GP services across the borough, analysing 708 stories over a one year period (1st September 2015 - 31st August 2016).

The Experience of Local People

We found that patients are broadly satisfied with the quality of treatment received, with **many accounts of ‘professional and knowledgeable’ doctors and nurses. Patients are also** positive about receptionists and practice management, on the whole.

There are however some noticeable negative trends and we may ask to what extent these are related to capacity. Patients voice concerns over telephone access, receptionists **making ‘clinical’ judgements**, and waits of weeks for routine appointments. Patients are less likely now to see a GP of choice, or a GP at all (the rise of the telephone triage) and a number of patients do not know who their GP is. Whether this matters to patients or not, care is becoming less personal over time. Findings in brief include (more on pages 21-26):

Service Accessibility

While most patients receive emergency appointments within a reasonable timeframe, it can be problematic booking the appointment, particularly by phone. Those who find that appointments are unavailable often have to repeat the process the following day(s). Online booking, although widely promoted, offers limited choice.

We said:

- Staffing and phone capacity should be able to accommodate as many callers as possible during peak times. Online alternatives need to be more effective.
- Could patients who are unable to get their appointment be supported in some way, **rather than simply finding themselves ‘out of luck’**.

While triage is clearly necessary, some patients express concern that receptionists may be making ‘clinical decisions’. Telephone triage by GP is considered a ‘poorer quality consultation’ by some patients.

We said:

- When triaging, even at a basic level, competency needs to be demonstrated.
- Recourse to a second opinion may reduce diagnostic errors.

Wait at Appointment

We have found that some practices can consistently run late. Waiting environments vary in physical condition and layout - some are well considered, others less so.

We said:

- Patients should be informed of delays, **not simply ‘left in their chairs’**.
- A pleasant environment will make patients more relaxed, and less anxious.

Clinical Treatment

*Patients tell us that consultations are generally of good quality, but when commenting on user involvement specifically, sentiment is more mixed. On medication, patients **comment that ‘GPs can be too quick to prescribe’ with a ‘lack of alternative options’.***

We said:

- It is important that patients feel listened to, are respected, and involved in any **decisions. Despite time constraints, GPs should do their best to ‘get to know’ their patients and listen, before making decisions.**

One patient was not given a choice of hospitals for antenatal care.

We said:

- On referral to services, options should be given, along with all available information.

Administration

Repeat prescription systems are convenient for both patient and practice, however the enhanced role of the receptionist may lead to potentially harmful errors - one patient found that the dose had been incorrectly doubled. Patients also raise concerns about receptionists conveying test results, with some receiving incorrect diagnosis.

We said:

- Safe working practices should be clearly demonstrated, with staff fully trained, and adequate safeguards in place to ensure that mistakes will be unlikely.

Managing Expectations

Through our research, we were surprised to find that many patients (the majority) are well aware of the pressures, particularly on demand, and understand the waiting times and limited options. There is however less acceptance of receptionists ‘stepping into the **clinical domain**’ so patients need reassurance.

The Future - ‘Transformation’ of Primary Care

Current plans, known as ‘**Transforming Primary Care**’, or ‘**Co-commissioning**’, could lead to a ‘range of benefits for the public and patients’. This includes improved access to primary care and wider out-of-hospital services, more services available closer to home, improved health outcomes, equity of access, reduced inequalities and a better patient experience through more joined up services.

It is essential that those who run our services today, and plan them for tomorrow, listen to, and respect the views and experiences of the many people who use them.

1. About Healthwatch

Healthwatch is the official ‘patient voice’ across England. Established as part of the Health and Social Care Act 2012, we champion the views and experiences of health and social care service users.

2. GPs in Newham

Newham has 57 GP practices, with 370,990 registered patients. Practice size varies considerably - the smallest with around 1,300 patients is Manor Park Medical Centre, while the largest, Tollgate Medical Centre, caters for almost 16,500 (Newham Clinical Commissioning Group). Organised into **‘clusters’**, the practices work together locally, on areas including extended opening hours, and providing tests and specialist treatment. **Often as the ‘first port of call’, GPs will inevitably** have the greatest exposure to patients, and will be working as hard as ever, to serve their many, and varied needs.

3. About this Report

Healthwatch Newham, the local consumer champion, has conducted extensive research on the experience of GP services across the borough during a one year period (1st September 2015 - 31st August 2016).

We acquired qualitative feedback, that is to say, people talking about, or writing down their experiences, from 708 patients across Newham, with all practices represented. We chose this approach, rather than a survey, as by listening to people we get a real sense of what matters to them (not to us), and therefore the trends are reflective of their views, experiences and expectations.

4. The Experience of Local People

We found that patients are broadly satisfied with the quality of treatment received, with **many accounts of ‘professional and knowledgeable’ doctors and nurses. Patients** are also positive about receptionists and practice management, on the whole.

There are however some noticeable negative trends and we may ask to what extent these are related to capacity. Patients voice concerns over telephone access, receptionists making **‘clinical’ judgements**, and waits of weeks for routine appointments. Patients are less likely now to see a GP of choice, or a GP at all (the rise of the telephone triage) and a number of patients do not know who their GP is. Whether this matters to patients or not, care is becoming less personal over time.

In this section, we examine each aspect of the service.

4.1 Service Accessibility

4.1.1 Booking Processes

Appointment booking policies and processes may vary at individual practices, but we hear common themes - having to phone at a certain time (often to find all appointments gone), **not being able to book 'too far in advance'**, and finding online systems '**hit and miss**' - some not working, or with limited options.

"I called at 8.00am and after repeatedly trying to get through (I called more than 30 times according to the call history), I was told instead of being able to see a doctor today, the doctor will give me a call the next day? As all the appointments for the day were taken and that was their 'new system' it's 'truly horrendous'."

*"Booking an appointment here is very difficult, they have one number and 99% of the time it's busy and you can only book up to a week in advance, that's if they have a free slot for you. Also you can't book an appointment online, the service is listed but **it's not available.**"*

"Tried booking an appointment online, didn't work. Then called the reception exactly 124 times for two hours, no one responds!"

*"**I book appointments online** - it's easy. I have no issues getting an appointment. There's no need to keep trying to call on the phone. Everybody has internet access **nowadays.**"*

*"**The online system is not allowing me to book appointments and I have no way of contacting the surgery. I have been ringing for two days now and still no one has picked up the phone.**"*

"I gave up on internet booking as there were never appointments available."

"Appointments are not given and their link in 'Patient Access' has only two doctors. So I cannot book an appointment online."

Working people comment on feeling restricted and inconvenienced.

"Making an appointment at the surgery is almost impossible. I have to call at 8.00am. At this time I am on the underground and there is no phone reception, or I have to make the phone call while I stand on a public platform with all the world to hear my conversation (I am usually asked the nature of my problem). Do I want to discuss this with a receptionist in a public place?"

"Advanced evening and weekend appointments used to be available. Today I was told they are no longer available and to call in at 8.00am or 9.00am. I need to leave for work before then and have a job where I cannot make phone calls at 9.00am, so therefore getting an appointment is impossible for those that work."

Given the demand on services, it is necessary to prioritise patients who most require the appointment. Patients are generally negative about being assessed by receptionists, while reviews on telephone triage are mixed.

*“Involvement and decision making - when at the counter you say you want to see a doctor and the receptionist asks ‘what for’? I mean really, why do receptionists need **this level of information?**”*

*“Reception staff need to be careful when asking personal questions on booking appointments - patients feel ‘intimidated’ **by the questions.**”*

“When you do get through to the receptionist (after waiting for a very long time for the phone to be answered), you are given the ‘3rd degree’ about why you need to speak to a doctor. Excuse me, but when did they complete their medical training?”

“They decide they won't take appointments and will just take a phone booking for a doctor to call back.”

*“Everyone gets a phone appointment first. Only after you've spoken to a doctor on the phone are you able to maybe be seen in person. This is limiting, very frustrating and wastes time, especially if you know you definitely need to be seen in person. The surgery should instead perhaps only encourage phone appointments through promotional material and asking the patient if they think a phone appointment may be better. That way patients **still have the freedom/options.**”*

“If you are lucky enough to get through, you then have to tell the receptionist your problem, then wait for a doctor to phone you back to assess you before they then book you in for an appointment. The whole process can take up hours of your time, and unless you can sit staring at your phone for hours on end, you'll probably miss their call.”

“We love the phone consultation system as this saves wasted trips to the practice.”

4.1.2 Opening Times

Experiences on opening times are mixed, however patients are generally appreciative of extended (early, late, weekend) options.

*“While appointments, like most GPs are hard to get, the practice offers excellent **early and late appointments.**”*

“As someone who works 5 to 6 days a week, I find this surgery to be accommodating in terms of offering flexible appointments. The workers' clinic is particularly useful as they have early morning and late evening slots.”

“I have always been treated with respect and dignity. Extended hours and same day appointments are, I would say, the surgery's strong points.”

“I'm very happy to learn this practice is open on Saturdays!”

“Weekend surgery needs to be opened for working people.”

“Really limited availability. I find it extremely difficult to get appointments here, whether they are routine or more urgent. Hardly any out of hours appointments for people who work full time.”

“I have been with this surgery for over a year. They're opening hours are awful for anyone that works office hours. I stopped being on the contraceptive injection because I couldn't get it done on my lunch hour, weekend or after work. If you were open until 7.00pm for the family planning side that would make a massive difference for me. Or even a short weekend clinic. I'm frustrated because my problems are building up and I don't have much time to take off work. Leaving early from work is ‘pushing it’ and I have to do that for my smear.”

4.1.3 Telephone Access

Our research reveals that the ability to make contact by phone is the single most negative topic.

*“After 20 minutes appointments are all gone today. That's not the worst part, I had been calling for three days now for an appointment. Yesterday I was number one for 25 minutes - when someone finally answered and I asked them ‘why it took so long’ they said they'd been answering, even though I was **number one!**”*

“This surgery is the worst I have ever come across. Staff are not helpful at all, they didn't tell me about online appointments and I tried calling them 47 times exactly with no luck, so gave up. I was so sick then but going to the surgery in the morning was impossible.”

“I called 52 times one morning to get an appointment. Finally got through at 9.15am (started calling at 8.30am) and ‘no appointments available’.”

“Incredibly difficult to get a hold of someone, once called over 60 times with no luck.”

4.1.4 Waiting List

Patients comment they are generally able to get emergency appointments the same, or next day. For routine appointments, patients cite waits of a week, or more.

“Excellent experience. I woke up with a serious pain in my knee. I called my GP surgery at 8.30am and secured an appointment for 11.20am the same day.”

“I called up in the morning and was registered with an appointment to see a GP the same day. The staff were amazing, I'm so happy with how they handled it.”

*“**Very poor service**, I always have to wait minimum of 15 days to 1 month to get an appointment. I never get an appointment with the GP I want to meet either.”*

“I've only tried to book an appointment on a few occasions. But each time, the first one available is weeks in the future. Today, I have to wait three weeks (21 days) for my appointment!”

*“Appointments are **given two or three weeks later.**”*

“I called the surgery at 8.00am (last Monday) to be given an appointment 3 days later. I call again this week for a check up as they requested and now I have to wait 7 days to be seen. I cannot go back to work without approval from a doctor, meaning I have to take another week off work because I have to wait a week to get the all clear.”

4.2 Getting There

4.2.1 Catchment/Distance

Most patients live near their practice, and location is a main consideration when choosing to register. Although catchment areas are defined, there is sometimes confusion on whether patients may register, or remain, with practices outside of their catchment.

“Very good location next to local transport connections.”

“I came to the surgery to see a doctor and change my address as well. I was shocked when I was told I need to find a different doctor closer to me. That's not true because I spoke with a doctor and they told me it's 'old rules' and that I can stay here if I want to. But the way receptionist reacted was shocking.”

4.3 Wait at Appointment

4.3.1 Waiting Time

Sentiment on waiting times is mixed, according to comments. We have found that practices can consistently run late, or on time. It is not clear whether late running is due to understaffing, or good quality (lengthy) consultations.

“Got there 10 minutes before my appointment, and waited for 40 minutes after the appointment time.”

*“I arrived for my 4.40pm appointment and wasn't seen until 5.50pm, 1 hour and 10 minutes late! **And it wasn't just me that had to wait this long**, someone else waiting for a different doctor had to wait 50 minutes! I see they are taking on new patients but they can't even cope with the patients they already have, it's 'disgusting'”!*

“For some reason the doctor keeps you waiting up to 1 hour even if you are at the head of the queue. If they tell you to come at a certain time, it doesn't mean that you will see the doctor at the time they told you. At some point someone will decide when, and if you will see the doctor.”

“The GP I've been seeing the past year is fantastic. The doctor always sees me on time, listens to me and I feel I am managed well. I wouldn't change my GP.”

“Couldn't be happier with the service at this GP, always get appointments and always get seen on time.”

4.3.2 Environment/Layout

Reviews on the waiting environment is mixed - many practices are not purpose-built, and some offer small waiting areas that may become crowded **and 'stuffy'**, with lack of seating. Patients with mobility needs are generally complimentary.

“The surgery is modern, it is easy to access for disabled people, the doctors and other staff are nice.”

“The waiting areas and rooms are comfortable enough and are kept clean.”

“There is a ‘bad lack’ of space for patients, with no children-friendly areas to keep kids calm.”

“Not enough seats and it becomes crowded very easily. It’s an unpleasant wait.”

“In summer while patients are sweating in the waiting room, doctors and staff have air coolers.”

Patients also comment on hygiene, with positive reviews.

“The surgery and waiting area are always clean. The toilet has been updated and is modern - it must be regularly checked as it’s always clean with toiletry supplies kept up.”

“The practice itself is modern, very clean and well ventilated.”

4.3.3 Privacy

It is notable that almost as many people comment negatively about privacy, as complain about waiting times. This suggests privacy should not be underestimated as an issue.

“The receptionist asked me what my appointment was for with the entire waiting room in earshot! Not exactly patient confidentiality?”

“There is no personal space in the reception area, it feels like our confidential information is spoken out loud and that other members or visitors can hear our conversations and personal information.”

“The receptionist basically ‘shouted out’ that I was pregnant - I wouldn't have minded if it was quietly done, but it was so loud everyone in the surgery could hear. I wanted it to be kept confidential.”

“There is no privacy in this surgery as the receptionist walks in at any time whilst the patient is with the doctor. I myself have witnessed this - the receptionist discussing another patient’s problems with the doctor! Definitely breaching data protection!

4.4 Clinical Treatment

4.4.1 Carer Involvement

Carers and family members are broadly positive about their experiences.

“My mother is the main carer for my grandmother, she is pleased with the level of support the surgery has given her in regards to helping her care, and the fact that the surgery staff have been very understanding when my mother has expressed any needs or concerns.”

4.4.2 Continuity of Care

With increased use of locums, patients will be less likely to see a GP of choice. Women are generally appreciative of being able to access gender specific clinicians.

“Every time I see the doctor I see a different locum, all of which lack any local knowledge (for example where to give blood or where the local emergency department is).”

“The services provided at the centre have deteriorated since the retirement and exit of the erstwhile GP few months ago. I made 4 consecutive visits, and was attended to by 4 different GPs. I consider this a bit ‘unhealthy’ as a patient.”

“I saw the new doctor today for the first time and I must say I’m impressed with their advice. So happy that we finally have a lady doctor!”

“Brilliant service - if me or my husband have personal issues we can always book with same gender doctors, which I find very useful and I am very grateful they have various options.”

“When I have to deal with female issues, I am given the choice to see a female doctor which I greatly appreciate and value.”

4.4.3 Quality

Patients are broadly complimentary about the quality of their GP consultation, with many citing ‘professionalism’ and a good level of support.

“The doctor is fantastic and an asset to the community - professional and highly personable.”

“I have visited this practice twice recently and was seen by two of the doctors. Both were extremely professional and caring, and treated me with dignity and respect.”

“I took my twin daughters for a routine check and I am pleased to say that from the point of booking the appointment to seeing the doctor, the service and respect that was shown was very professional and caring. The doctor was very humble and compassionate and I am truly grateful for all that they did for my children.”

“I would especially like to thank doctors who diagnosed my medical condition at an early stage and encouraged me to go to the hospital. Without this professional and encouraging advice my condition would have caused long lasting damage. Therefore I would like to say a big thank you.”

“We are extremely happy with the treatment which we receive from the doctors and the nurse. Our concerns are dealt with thoroughly, and with great sensitivity and understanding.”

4.4.4 Medication

Although medication may be required for clinical reasons, the majority of comments are negative, with some patients feeling that alternatives can **be overlooked, and ‘cheaper’** medication may not be effective.

*“After suffering from a problem for years I have asked for a referral and each time I am met with a dismissal of what it could be and prescribed the same medicine over and over again even after **telling them it does not work.**”*

“I saw a doctor whom I felt was very direct and would barely let me explain my symptoms to the depth that I wanted. I was very disappointed with their people skills, and listening skills. This doctor gave me the same medication that didn't work in the past. I am very disappointed in their treatment and felt like they didn't listen to me as to the forms of treatment that I wanted.”

*“**The doctor** was very disrespectful - they would not listen to my symptoms, and gave me a medicine to which I was allergic, and on top of that insisted that I should keep taking it! They kept ‘rambling on’ about topics which had nothing to do with my health, I was very frustrated. When I also complained about having a regular headache, they prescribed a medicine which the employees at the local pharmacy advised me not to take because the dose prescribed would be too strong for me.”*

“The doctors tend to persist to change your medication because it is ‘cheaper’ rather than looking at the adverse effects it may have on you.”

“This doctor is an excellent GP and deserves to be recognised as one of the best - their advice and prescriptions have always been very good.”

4.4.5 User Involvement

We have all heard accounts of GPs **‘tapping away at their computer’ or ‘not making eye contact’ or ‘not listening’**. Comments suggest sentiment is mixed, with some patients feeling involved in their care, while a similar amount, not.

*“The staff members are caring. I have never been disappointed in any way, and **although I haven’t** needed to visit often, I never have problems getting an appointment. They always involve me appropriately in decisions about my health and they are friendly. Very realistic when it comes to needs and expectations. It is very clear that they are **a caring and committed practice.**”*

“Staff are very friendly, helpful and caring. You actually get the sense that you are being well looked after, something I haven't felt for years, moving from one bad clinic to the next. It's refreshing to experience the 'human touch'.”

“A really friendly surgery. My doctor always takes the time to listen to my problem, the staff working there are fantastic - always make you feel welcome.”

“I visited the GP last Monday morning. The doctor was so rude and disrespectful, they weren't listening to my concern.”

“During my first appointment the doctor had their phone beside them as they were talking to me and kept looking at it every time a notification popped up. I found this extremely unprofessional. Their attitude towards me in the second appointment was just as uncaring and their bedside manner made the doctor seem like they were ‘fed up’ seeing patients.”

4.4.6 Referral

Patients have mixed experiences on referrals - some are appreciative of receiving specialist treatment and tests, others cite lack of options, and administrative issues.

*“**The doctor is** very conscious of encouraging patients to lead healthy lifestyles and referring to various health related initiatives such as exercise referral, weight loss programmes and walking programmes. I feel very safe and my health and wellbeing is ‘very secure in their capable hands’.”*

“Last week I sadly suffered a miscarriage and the lovely member of staff couldn't have been better, they dealt with my panic stricken phone calls to the doctors, who treated me with kindness and sympathy and made sure I was referred to the hospital immediately.”

*“When referred for antenatal care, I was not advised I can choose my hospital, but told **I'd be referred to Homerton, ‘our best one’**. It turns out Homerton maternal care has been the subject of serious concerns over recent years and rated recently by the CQC as needing improvement. How can this be the best? Either way, I should be told I have a choice.”*

*“Twice been referred to specialist consultation/treatment at the hospital where the doctors there started **the consultation by saying** ‘I can't work out from your GPs letter what the problem is - they only ticked a box and provided no details’.”*

“My mum asked her GP to refer her to a specialist, she was informed this would be done. Three weeks later no appointment letter has arrived, meanwhile my mum is in excruciating pain. I finally called the hospital, who inform me that no referral letter has been received.”

4.5 Staff Attitude

4.5.1 Receptionists

There is a common perception of the 'rude receptionist', however we found sentiment to be marginally positive at most practices, with some exceptions.

*"Exemplary standard of care. The reception staff are really polite compared to **various other practices I've been to**. There is a genuine care from front desk to the healthcare professionals."*

*"**I have** not had a problem with the staff at the surgery, especially one receptionist who has always been helpful and 'on their feet'. I would to thank the receptionist for their support."*

*"Staff are really good and friendly - they are very helping in nature and the **receptionists always greet with a smile!**"*

"The reception staff without exception have been courteous and have assisted with every request without fail and very promptly."

*"Staff are rude, **disrespectful and totally apathetic.**"*

"The receptionists are beyond rude and I think the last 5 times I've called they have not answered once, but when you go into the surgery you see them chatting away and the phones are ringing but they do not care one bit."

4.5.2 Practitioners and Nurses

Comments suggest sentiment on doctors and nurses to be clearly positive, with many more accounts of pleasant experiences, than bad.

"Excellent. If it was possible to give this surgery a 10 star rating I would. The GP allocated to me has gone above and beyond my expectations and is the most sympathetic and caring doctor I have ever met and is a credit to their profession."

*"**Most doctors** are really helpful and thorough, they care and keep me informed about my care. They go 'above and beyond' to care for me as a patient. The reception staff are efficient, caring and professional and the nurse is warm, caring and kind, as is the health care assistant. I highly value the team and think that this surgery is the best!"*

*"The doctor I have met is very friendly, professional, relatively on time and easy to talk **to and the nurse was excellent.**"*

"I have generally had very good experiences at this surgery. The nurse, whom I have met twice, and the GP whom I met once were very courteous and more importantly showed a lot of empathy."

"Excellent and caring doctors and nurses at this surgery, I would recommend!"

"The doctor in this practice is very unfriendly and difficult to understand due to their accent and fast speaking."

4.6 Administration

4.6.1 Organisation

Patients are largely complimentary about practice management, with some giving examples of efficient, person-centred service.

“I highly recommend this exceptional medical practice to everyone. The reception staff and doctors are very helpful and compassionate and the practice is very organised and competent.”

“It is obvious the practice manager is doing a ‘great job’ running this outstanding establishment.”

“Whilst it is very busy - I will say that it is extremely well organised and the reception staff are very polite, professional and respectful.”

*“The doctors, nurses and staff at this surgery listen and work efficiently to help resolve medical issues. It is **a very well organised surgery.**”*

“I must acknowledge the improvements that the new manager is bringing to the surgery, they actually listen to their patients but also ‘seem to act’. I am getting my prescriptions to go to the pharmacy, they are now offering online appointments. I hope the improvements continue.”

“Very well run practice. I have personally found each different area of the practice courteous, helpful and ready to facilitate requests wherever possible. Good treatment and a professional attitude are the norm here and also a patient attitude, even with a talkative patient such as yours truly. Keep up the good work!”

4.6.2 Registration

Experiences of registration processes are mixed, according to comments.

“I called to find out how to register and found the receptionist I spoke to very friendly. The registration process was quick as I was told what documents I would need, and was offered a registration appointment and an appointment to see a doctor right after.”

“I signed up for this surgery recently and they could not have been more helpful. I was able to speak to someone on the phone before going down. The sign-up process was very simple and they went ‘out of their way’ to help me.”

“How can anyone with a full time job register?! It's such a ‘faff’ to register here! Two forms of ID, plus the form, plus your NHS card, you can only go between 2pm and 5pm and you can't be registered by someone else like a family member. How do they expect people with full time jobs to access this service?”

“The most ‘pathetic’ surgery I have ever been to. I bought a house a two minute walk from this surgery last year and went there a few months back to register myself with my British passport, driving license and NHS card from my last address. I was asked to wait for about an hour and to my amazement, they asked for a utility bill less than 3 months old. I was given a form to fill in and come back with the required bill.”

4.6.3 Repeat Prescription

If systems are set-up and operated correctly, obtaining a repeat prescription should be a **'smooth process'**. However, some patients experience delays, wasted journeys, and do not have **complete trust in the receptionist's role**. **Other patients express convenience**.

*"Four years as a patient but the surgery has gone downhill in the past two. My epilepsy tablet prescription was messed up every month, no one apologises, even when using the EPS system my prescriptions were never sent over to the chemist, even though it was ordered **two weeks in hand!**"*

"Went back on Wednesday for the appointment (had to take the afternoon off), the nurse sent the prescription to be printed at reception, the receptionist in charge had just gone for lunch, I waited 1 hour for them to come back from lunch, only to be told that the way they issue that same prescription that I have had for 5 years has now changed and I should book an appointment with the doctor!"

*"I had medication changed and needed the medicine quite quickly for my epilepsy. I gave in my letter for the prescription to be made, they just said that's fine, I had to ask how long will it be till it is ready and they said **'a week or so'**. **Not sounding too sure?!**"*

*"It is **'completely irresponsible'** to have reception staff that think they have completed GP training, and not put-through prescriptions for life-threatening conditions (such as asthma pumps)."*

*"I was supposed to have had my prescription almost two weeks ago yet they keep **'losing'** it. I then went back after they realised they didn't have it, only to find out the prescription has not been signed so I have to go back again. I wonder what they'll mess up on this time? This is medication that I require yet completely unskilled people clearly do not care in the slightest."*

"When I need a repeat prescription the receptionist processes within 5 minutes only. This is extremely helpful for my mother."

"Appointments are always given when needed and medicines prescribed on time."

4.6.4 Test Results

At some practices the reception staff may convey test results, this raises questions over safeguards and training. Some patients experience administrative problems and delays.

*"I had a blood test done in April 2016 and didn't hear back for 4 months. Went there to ask for the result and the receptionist tried to convince me that everything was normal, that's why I **'didn't hear back from them'**. When I told the receptionist I've had high cholesterol and blood pressure for a few years and about family history they consulted a doctor that came in the room. At that point they finally admitted my results showed my cholesterol was high. No apologies whatsoever so far. The doctor came in and joked about me eating **'too many sweets!'**"*

“I’m a little perplexed as to why the doctors and reception staff are not singing from the same hymn sheet. I was diagnosed with an underactive thyroid in March this year and went to get a blood test in July to see if my levels had changed much since starting medication. I had to wait over two weeks for my results and nobody called me to relay the results, it was only through my own follow-ups. I was told by the receptionist everything was in the normal range. I then requested to speak to a doctor because I didn’t understand how it could so suddenly be normal again when I was still having symptoms. I couldn’t even get a call back from the doctor for another 4 days! When I finally did speak to the doctor, I was told I was still in the abnormal range and to continue with the medication. Now, if I had listened to the receptionist and left it at that, then I would also have stopped my medicine. I find this pretty frightening and I would like to know how this can be addressed.”

*“After 2 months **I’m** still waiting for the diagnosis of my problem. 2 test results got lost. I visited the clinic in June with a stomach problem. Still chasing my test results since, been calling every week and no-one is willing to help me. I keep receiving the same answer - call back next week. I do understand that it is a busy clinic but how can 2 test results disappear?”*

*“If it was one time where I had to chase to get my test results then I wouldn’t be writing this but it has happened on numerous occasions. The receptionists would give you different information where one would say it takes up to ‘five working days’ and the other would say it takes ‘two weeks’. In one situation the receptionist found my results after two weeks of me chasing under a pile of their work and being in denial that it was there they said I will receive my results from the doctors the next day. The longest I’ve waited for my test results was 3 weeks and that’s because I kept chasing them up by calling at least 6 times a day or who knows if I ever would have **received my results.**”*

*“I called the surgery, for 3 days without getting through. Once I got through I ask if my results I was waiting for had been received, only for the receptionist to tell me that the results were abnormal and they’d get a doctor to call me the following day. Bearing in mind I was previously told about a week before that I would get a call from the doctor as **soon as my results had come back.**”*

*“Why are receptionists telling me about my results, they are not qualified, absolutely appalling! When I ask why a doctor hadn’t called me about the results, the receptionist **said** ‘mistakes happen, probably slipped through the net, these things happen’.”*

4.6.5 Complaints

It is the right of all patients to complain, however some find it difficult to contact management, or do not always find receptionists accommodating. Others cite more positive experiences.

“They made my husband who has a severe chronic condition wait hours on end for a prescription, only to give him the wrong one. Then spoke to us on the phone very rudely and I asked the person to pass me onto their manager. I was refused and they hung up on me and I have never been contacted since. I will actively be looking to move surgeries.”

“Staff do not seem to be aware of the complaints process or the friends and family test. Nor have I ever seen these leaflets at the surgery.”

“Absolutely ‘disgusted’ with this surgery!! There is no point in making a complaint whilst at the surgery as you will be referred to the practice management and the complaint will go nowhere!”

“GPs can be a bit hit and miss as it is hard to see the same doctor every time. But they have helped me through tough time including dealing really quickly with investigations for potential cancer. I once made a written complaint about a GP (now no longer at the practice) and the person who runs the practice invited me for a face to face chat and corrected the decision the other GP had made not to refer me to a consultant and apologised.”

4.7 Communication

4.7.1 Advice/Information

Comments suggest sentiment on advice and information is mixed.

“I’ve just got registered with this GP. The receptionist was really helpful when I went to ask for the information and gave me all the facilities for an appointment. The nurse attended me today, they were also really nice and explained everything clearly and professionally and gave me a good support and suggestions.”

“Spoke to a receptionist who was fantastic. They gave me the phone numbers I needed, answered all my questions and were generally ‘just great’.”

“The reception staff are fantastic, especially the lovely receptionist who gave me an appointment and all the information I needed, even booking me a flu jab!”

“The telephone booking service does not work, the online booking service does not work, information given is either wrong, or incomplete - no one seems to have a clue about standard procedures.”

“I have had the worst experience with this GP surgery, the receptionists are rude, and have very poor knowledge of care, they give false information, they don't help at all.”

5. Learning from Experience

Based on what we’ve heard, we have summarised ‘key’ recommendations that may be considered to improve the service in certain areas.

It is the role of Healthwatch to influence the commissioning and delivery of services, therefore our recommendations are not prescriptive, but intended to inspire solutions to the issues that clearly exist.

5.1 Service Accessibility

*While most patients receive emergency appointments within a reasonable timeframe, it can be problematic booking the appointment, particularly by phone. Patients at one practice **are commonly 'on hold' for an hour** - this not only illustrates inconvenience, but the acute demands on the system. Those who find that appointments are unavailable often have to repeat the process the following day(s).*

Recommendation

5.1.1 Staffing and phone capacity should be able to accommodate as many callers as possible during peak times. Could patients who are unable to get their appointment be supported in some way, rather than simply finding themselves **'out of luck'**.

Action: By this time next year, we hope that more patients will make contact within a reasonable timeframe, and if not, supported in getting their appointment.

Although widely advertised, we generally find that online booking can offer very limited choice - this discourages use, and reduces effectiveness.

Recommendation

5.1.2 Choice of more slots, with greater flexibility on advance booking, would divert more patients away from the phone.

Action: By this time next year, we hope that more patients are using online booking facilities, and do so more regularly.

Most (if not all) practices assess patients when booking, to establish priority. While triage is clearly necessary, some patients express concern that receptionists may be making clinical decisions.

Recommendation

5.1.3 When triaging, even at a basic level, competency needs to be demonstrated. If training is provided, it may reassure patients to see certificates on display, and/or to be advised that assessments are established practice policy.

Action: By this time next year, we hope that more patients have confidence in their **triage, and view the practice as a 'service', rather than 'receptionists' and 'doctors'**.

Some patients regard telephone triage by GPs as a 'poorer quality consultation' and if denied physical access with a legitimate condition, may have some justification.

Recommendation

5.1.4 Patients would benefit from reassurance that telephone triage will not impact on their health and wellbeing. Recourse to a second opinion may reduce diagnostic errors.

Action: By this time next year, we hope that patients will have more confidence in the ability of GPs to triage over the phone, and have recourse to challenge decisions (if not able to do so at present).

5.1 Service Accessibility (Continued)

With provision of early, late and weekend appointments, patients are benefitting from ever increasing choice.

Recommendation

5.1.5 To ensure that as many patients as possible benefit, extended opening should be widely advertised. Information in nearby social venues (such as supermarkets) may increase awareness, and encourage patients who have not sought treatment, due to work of other commitments, to get seen.

Action: By this time next year, we hope that patients are aware of all options available to them, with more people previously restricted by hours, able to get seen.

For routine appointments, some patients comment on waiting times of 2 (or more) weeks. While this may be safe and reasonable within service constraints, expectations need to be managed.

Recommendation

5.1.6 To give patients insight of challenges, many practices display the did-not-attend rates. **Publicising ‘pressures on the system’ is not necessarily a bad thing, and in doing so, patients may become more understanding over time.**

Action: By this time next year, given that capacity will not have significantly improved, we hope that more patients are tolerant of waits that do not overly inconvenience them.

5.2 Catchment

*Some practices offer contradictory information - one person outside of catchment was **told ‘registration was fine’, then later refused.***

Recommendation

5.2.1 Practice staff should be clear on their registration policy, and give consistent information and advice.

Action: By this time next year, we hope that registration policies will be implemented consistently within practices.

5.3 Wait at Appointment

We have found that practices can consistently run late, or on time. It is not clear whether late running is due to understaffing, or good quality (lengthy) consultations.

Recommendation

5.3.1 Whatever the reason for delays, patients should be informed, not simply 'left in their chairs'. Many practices notify patients through their electronic display, while at one practice a notice in reception states '**if you have** been waiting for more than 30 minutes, please notify a member of staff'. We found this to be reassuring for those waiting, demonstrating a good level of support.

Action: By this time next year, we hope that those experiencing delays are aware, and have some estimation of timing.

*Practices vary considerably in their physical condition and layout - some are well considered, while others **are 'crowded and stuffy'**.*

Recommendation

5.3.2 A pleasant environment will make patients more comfortable, and generally less anxious. Something as simple as a vibrant colour, or picture, may go a long way.

Action: By this time next year, we hope that more patients are complimentary about the waiting environment.

*Many patients complain about '**lack of privacy**' in the waiting area, with some able to overhear confidential information, such as addresses.*

Recommendation

5.3.3 As most waiting areas are confined and quiet, and the nature of visits highly personal, it will be inevitable that patients sometimes overhear '**private matters**'. However, staff should do their best, perhaps calling patients to one side, when having personal, often confidential discussions.

Action: By this time next year, we hope that staff will be more conscious of **confidentiality and data protection, and uphold patients' privacy wherever possible.**

5.4 Clinical Treatment

*Patients tell us that consultations are generally of good quality, while carers comment on feeling involved and valued. **Choice is an ‘ever increasing’ issue, with some patients who prefer a certain GP having to wait several weeks.***

Recommendation

5.4.1 It might be the case that care is becoming less personalised over time, as more GPs retire, and locums move around. Many patients understand this, but a significant number feel disadvantaged. **For those patients particularly, staff should ‘do their utmost’ to match patients with their GP, within a reasonable timeframe.**

Action: By this time next year, we hope that practices are able to uphold continuity of care, for those who rely on their preferred GP.

Some patients say they do not have, or are aware, of a named GP. At one practice, a clear majority of those waiting did not know who they were booked to see.

Recommendation

5.4.2 If it is not possible to assign a named GP, patients should be advised on arrival, or beforehand through letter or text message, who they will be seeing. This is a basic level of information, and sometimes important.

Action: By this time next year, we hope that most patients will be aware of who their appointment is with (good care should be personal).

On medication, patients comment that ‘GPs can be too quick to prescribe’ with a ‘lack of alternative options’.

Recommendation

5.4.3 Although medication may be required for clinical reasons, patients should be listened to when voicing concerns. Alternatives should be considered when appropriate.

Action: By this time next year, we hope that more patients will be offered alternatives to medication.

Patients may also consider ‘cheaper’ medication to be inferior to premium brands, with some doubting effectiveness.

Recommendation

5.4.4 It is acknowledged that GPs will not generally prescribe ineffective medication, **while ‘cheaper’ brands do save the NHS a considerable amount of money.** Therefore, patients need to be reassured.

Action: By this time next year, we hope that more patients will have trust in brands **they do not recognise, or consider ‘cheaper’.**

5.4 Clinical Treatment (Continued)

When commenting on user involvement, sentiment is mixed. While some patients feel involved, others do not.

Recommendation

5.4.5 It is important that patients feel listened to, are respected, and involved in any decisions. Despite time constraints, GPs should **do their best to ‘get to know’ their** patients and listen, before making decisions.

Action: By this time next year, we hope that more patients feel respected and involved.

One patient was not given a choice of hospitals for antenatal care.

Recommendation

5.4.6 On referral to services, options should be given, along with all available information.

Action: By this time next year, we hope that fewer patients will regret choices made, given that reconsideration is not always possible.

5.5 Administration

At some practices, patients who have not been able to register, or are in the registration process, have not been supported or advised on alternative options, even in situations of need.

Recommendation

5.5.1 Practices have a **‘duty of care’ towards their** own patients, but we ask if it is appropriate, or safe, to leave people (some in need, or vulnerable) unsupported. If at all possible, staff should provide information and signposting advice.

Action: By this time next year, we hope that unregistered patients are not simply **‘turned away’ without** assistance.

Repeat prescription systems are convenient for both patient and practice, however the enhanced role of the receptionist may lead to potentially harmful errors - one patient found that the dose had been incorrectly doubled. Patients also raise concerns about receptionists conveying test results, with some receiving incorrect diagnosis.

Recommendation

5.5.2 Safe working practices should be demonstrated, with staff fully trained, and adequate safeguards in place to ensure that mistakes will be unlikely.

Action: By this time next year, we hope that fewer patients will receive incorrect prescriptions or diagnosis.

5.5 Administration (Continued)

*At all practices we visited, the complaints policy was clearly displayed. Most practices also provided suggestions boxes, or Friends and Family feedback cards. It is the right of **all patients to complain or feedback, however some fear 'reprisals', find it difficult to contact management, or do not always find receptionists accommodating.***

Recommendation

5.5.3 It is essential that patients are supported to feedback or complain, as this documents any issues. The Parliamentary and Health Service Ombudsman portrays **complaints as a 'positive thing to do', through its 'Complain for Change' campaign.** All practices should welcome feedback and complaints, and make it as convenient as possible, to do so.

Action: By this time next year, we hope that more patients will feel encouraged, and supported, to leave feedback or complain.

6. Managing Expectations

Without a **'sea change' in capacity, certain things are 'here to stay'** - the longer waits, receptionists taking a greater role, care that is more impersonal. There are opportunities to limit demand on services, such as enhancement of online options and raising awareness of self-care alternatives, but **this will only go 'so far'.**

Through our research, we were surprised to find that many patients (the majority) are well aware of the pressures, particularly on demand, and understand the waiting times and limited options. **There is less acceptance of receptionists stepping into the 'clinical domain' to triage for appointments and process prescriptions and test results.** If it can be demonstrated that staff are competent and professional, and that safeguards exist, it will be possible to build confidence and trust in more patients, thereby increasing satisfaction.

7. Transformation of Primary Care

In 2014, NHS England invited Clinical Commissioning Groups (CCGs) to come forward with expressions of interest to take a greater role in the commissioning of primary care services, initially GP practices. **'Primary care' includes GPs, dentists, pharmacists and some other out-of-hospital health services.**

This is one of a series **of changes set out in the NHS 'Five Year Forward View' which aims to develop 'seamless, integrated out-of-hospital services based around the needs of local populations.'**

7.1 Benefits for the Residents of Newham

The plan, known as 'Transforming Primary Care', or 'Co-commissioning', could lead to a range of benefits for the public and patients, including:

- Improved access to primary care and wider out-of-hospital services, with more services available closer to home.

- Improved health outcomes, equity of access, reduced inequalities.
- A better patient experience through more joined up services.

Co-commissioning could also lead to greater consistency between primary care services and wider out-of-hospital services. It will enable development of a more collaborative approach on staffing, premises, information management and technology challenges.

7.2 Getting Organised

Healthwatch Newham, the Health and Wellbeing Board, Newham CCG and other partners constitute the Newham Primary Care Commissioning Committee, the forum that will oversee implementation and delivery.

The role of the committee, under section 83 of the NHS Act includes:

- Awarding and monitoring of contracts, taking contractual action such as issuing branch/remedial notices, and removing a contract.
- **Designing new ‘enhanced services’ (services which are not essential) and local incentive schemes.**
- Decision making on whether to establish new GP practices in an area.
- Approving practice mergers.
- **Making decisions on ‘discretionary’ payments.**

Although in its infancy, co-commissioning is set to radically ‘transform’ local GP services.

8. Glossary of Terms

CCG	Clinical Commissioning Group
GP	General Practitioner
NHS	National Health Service

9. References

GP Patient Survey 2015-16

www.england.nhs.uk/statistics/2016/07/07/gp-patient-survey-2015-16/

National Health Service Act 2006

www.legislation.gov.uk/ukpga/2006/41/contents

“I have been a patient here since it opened its doors, many years ago.

I have seen premises change, people come and go, but they have always delivered a first class service, even in these increasingly challenging times.

Nobody works harder.”

Newham Resident, 2016