

Healthwatch Doncaster

Accessing local GP services during the Covid-19 pandemic

September 2020

Background

During the Covid-19 pandemic, health services have had to change the way that they work to continue to meet the needs of patients.

GP surgeries have had to change the way in which people access appointments including a change from face-to-face consultations to video and telephone consultations.

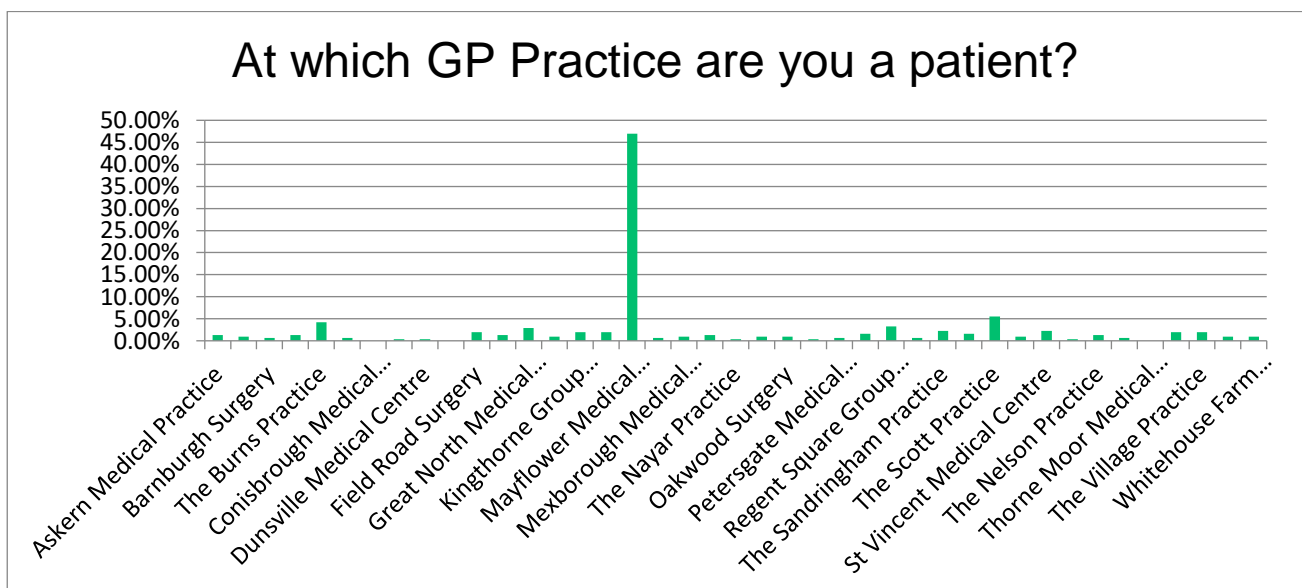
Healthwatch Doncaster worked closely with Primary Care Doncaster - the GP Federation - and NHS Doncaster Clinical Commissioning Group (CCG) to find out more about the experience patients who accessed appointments to see healthcare assistants, nurses and GPs in their local surgery via video or telephone call.

Did people see the survey and complete it?

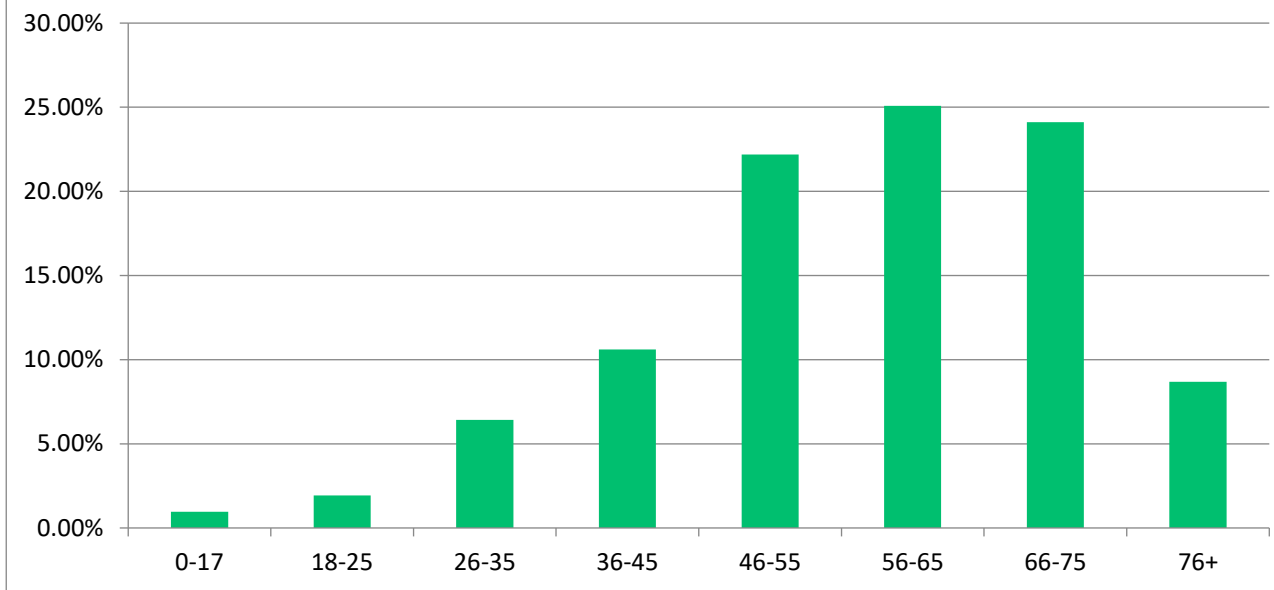
The survey was shared by all partners across social media, email distribution lists and through the Primary Care newsletter. 320 people shared their views and completed the survey. The survey was only available online via Survey Monkey and hard copies were not provided. There was no face to face engagement from Healthwatch Doncaster to encourage people to complete this survey but it was advertised and promoted through social media and Healthwatch Doncaster’s Daily Dose programme of engagement on Zoom and Facebook Live.

Who responded to the survey?

There were responses from patients from most GP practices in Doncaster. One GP practice, Mayflower Medical Practice, had the greatest number of responses and it would be interesting to discuss with them how they shared the survey with their patients. Whatever they did to share the survey had a huge impact on their practice population and supporting a large number of patients to share their experience.



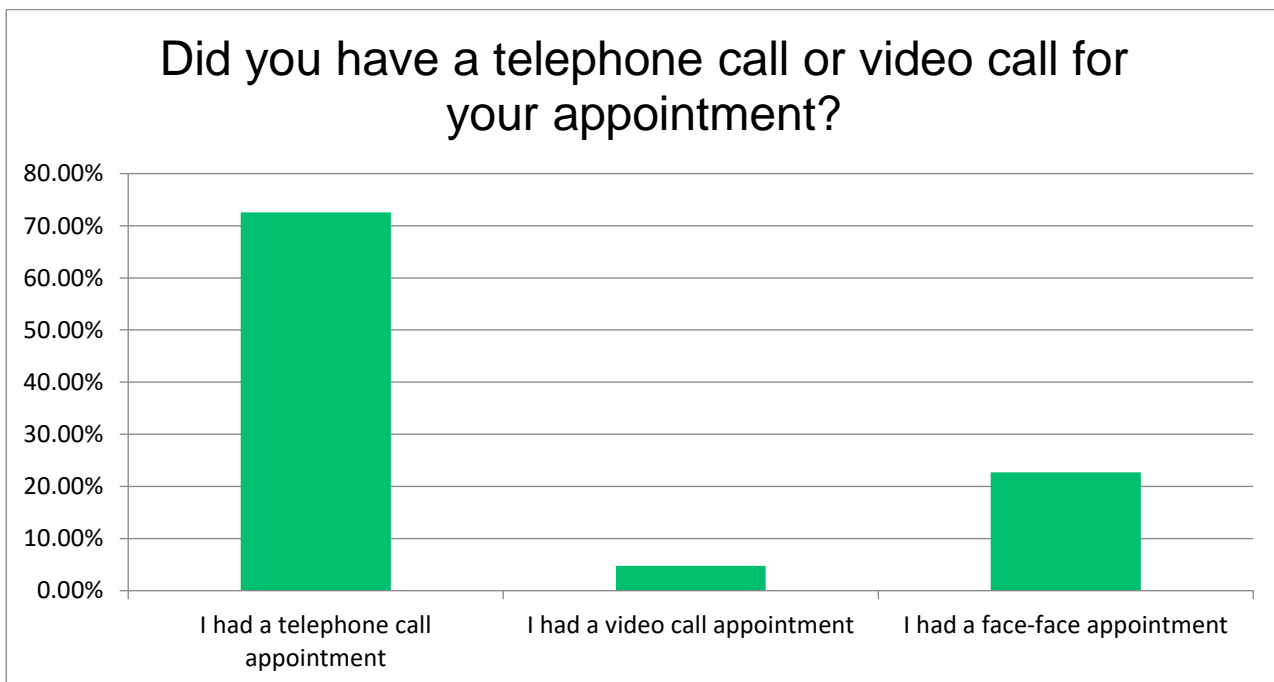
Age range of respondents n=320



There was a reasonable spread of ages of people who completed the survey and this profile is probably representative of the demographic profile of people who use their GP practice regularly.

72% of respondents were female, 60% of people identified that they had a Long Term Condition that required care and treatment and support from their GP practice and 20% of respondents indicated that they had a disability. 95% of people who completed the survey identified themselves as White British or White Irish.

What type of appointment did people have in their GP practice?



72% of people told us that they had had a telephone appointment, 22% had a face-to-face appointment and 5% of people had a video appointment.

People who had had a face-to-face appointment were asked to share their experiences of the changes made in their practice as a result of the Covid-19 pandemic. On the whole there were generally positive comments that were supportive of the changes and adaptations.

What did we hear about the changes and adaptations in relation to the Covid-19 pandemic?

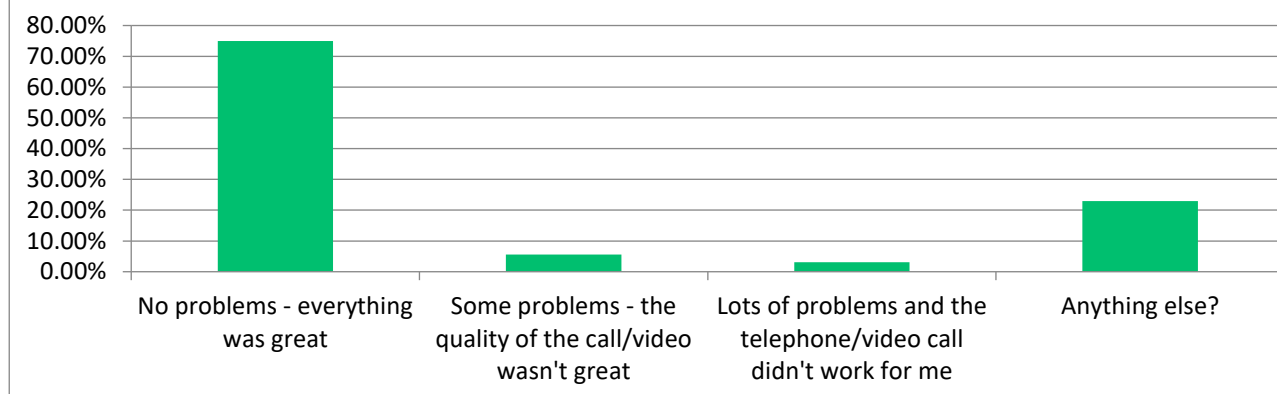
It felt very safe in the surgery. The Receptionist asked if you had any Covid symptoms before you were allowed into the waiting room. The Receptionist was behind glass. Hand gel was available to use. All the chairs were socially distanced. You had to wear a mask including the GP.

Very short wait outdoors so appointment was 10mins after the set time. Temperature check was fine then hand sanitiser and into the room for blood test. Very pleasant friendly and efficient professional service.

Slightly confusing at the door due to two surgery's, staff came a few times to check name, sometimes buzzer wasn't answered, staff doing all they can but as a few people arrived at similar times it probably got a bit confusing

No other patients in the practice. GP wore PPE

Were there any problems with the telephone call or the video call?



75% of people who had a telephone or video appointment told us that there were no problem and that everything was great. A small percentage of people – 3% - said that there were lots of problems and that the telephone/video call didn't work for them. People were also asked to share any other issues or feedback about telephone and video appointments.

What did we hear about other issues linked to telephone and video appointments?

I'm deaf so none of the above were appropriate. I need to lip read as well as hear voice. Email is my primary lifeline

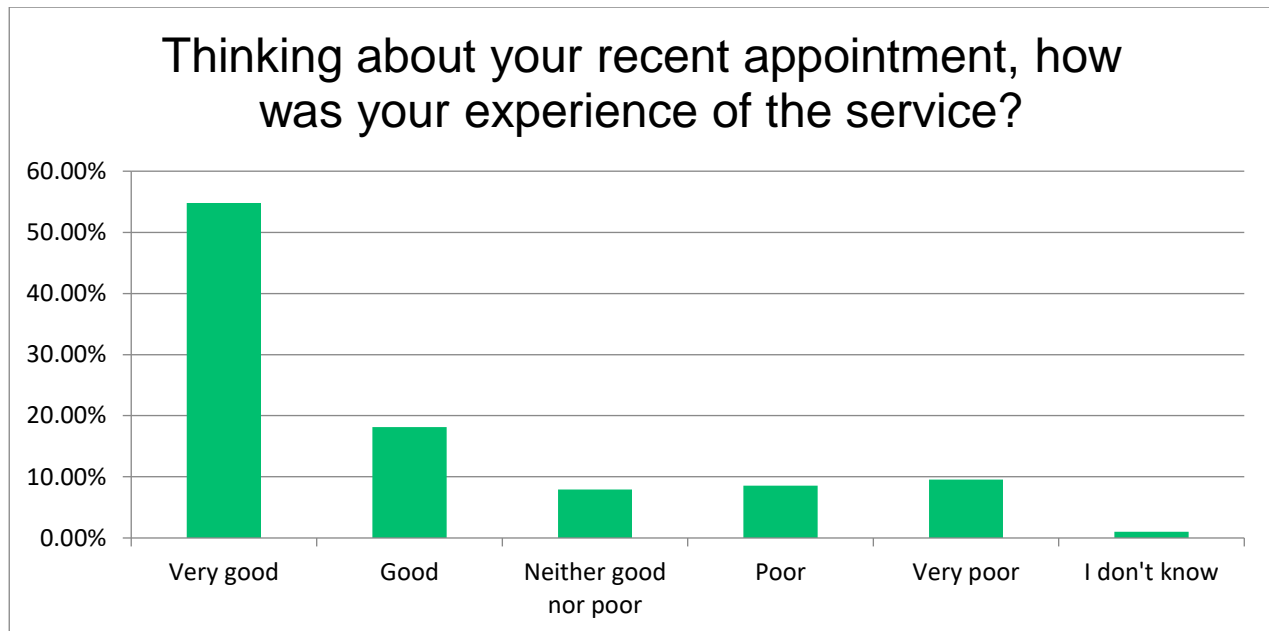
I booked an over the phone appointment with the receptionist but no one bothered to call me so the appointment didn't happen

I needed to book the appointment for this family because they have limited English. They also needed to send photos of the skin rash - again, they couldn't do this independently as, although they have WhatsApp, they could not send images via email.

No video but lots of good follow up calls

Nowhere near the same as a face-to-face consultation

73% of respondents told us that their most recent experience at the GP practice was good or very good



People were asked to share what was good about the service that they received. There are a number of detailed responses and a common theme was that people were really pleased to have seen a clinician and get help and support about their condition.

I got through to the surgery @ 8:45am and was called back by a GP @ 11:15am. After a discussion about the problem, and potential risks due to my medical history, a course of treatment was prescribed with instructions to call back if the condition got worse or didn't resolve after treatment. The GP also described other potential causes of the problem. I was given time to ask questions and didn't feel rushed.

Quick and without risk to me and the doctor

On time.

The doctor rang back quickly.

Exactly the same as a face to face appointment

I preferred not travelling to the practice, talking to the GP on the phone was just as informative

It was quick and convenient as well as feeling safer not having to go to the surgery for something that could be dealt with quickly on the phone.

Good: actually got an appointment on the day although it was telephone and then face to face. Bad point not speaking to doctor face to face to start with.

The GP and doctor I spoke to were friendly and supportive

Sorted the issue

The member of staff that allowed me access to the clinic was friendly and compassionate and tried to calm me down as I was extremely anxious with it being my first time to the clinic during my shielding period

Seen on time. All staff had a friendly manner. Excellent examination with everything explained. Priority appointment arranged by the GP with DRI.

Rang back within 2 hours and Doctor was very helpful

Excellent nurse practitioner service . Extremely helpful

Being heavily pregnant the nurse was lovely didn't make me feel anxious or rushed. Had a little giggle whilst getting my injection

I was really pleased to be able to see someone and I know everything about PPE and not talking too much etc was done for safety but it was a very frightening ordeal. I think this was because for me personally it was the first time I felt I was in a situation where Covid was a real threat. During lock down I hadn't been anywhere that made me feel so at risk.

I called the surgery regarding my husband's worsening symptoms of a previous stroke; he called me back quite soon and after a short discussion he then arranged a video appointment with us for the Stroke Consultant -amazing to get such an appointment so fast by video that time too. GP arranged a call back 6 weeks later also by video.

People were also asked what could have been better about their appointment – what did we hear?

Many people indicated that there was nothing that could be better about the service and they were happy with the service that they received. There were a number of responses that went into more detail about specific improvements.

Doctor was not helpful had an issue that needed to be seen and he said too risky. So sent me to the nurse the next day she was brilliant

A little more precision on the time. Given a 4 hour slot to be available. 2 hours would be more realistic.

Probably would have been quicker if it had been a video call then only one call would have been needed from the GP

Health visitors actually visiting first time mothers. Postnatal check ups being carried out. PPE being provided for patients or informing them that this is an essential requirement when attending appointments.

For an elderly patient who is confused at the best of times - technology which they don't understand is difficult

An appointment with a doctor would have been better

I would personally prefer a video call option to be added, because this doesn't cause me the huge amount of anxiety that telephone calls do.

I ended having a face to face appointment a few hours after. Aware one needs to triage but I felt the problem needed to be seen in the flesh

Not necessarily the service, but I've been ill since March 3rd, and because of wanting to leave the lines clear for the very sick, I've felt I will be wasting the doctors time, and that he wouldn't believe I've been ill that long. This has made me too scared to ring my GP.

My health centre previously allowed on line appointment making but has changed to a telephone service that I cannot access as I am deaf

Booking the appointment was problematic due to language issues - so needed to involve a third party.

Interestingly in the responses, face-to-face appointments were identified as something that would be an improvement but many people stated that they would consider a video appointment as face-to-face.

People were also asked about what other improvements could be made in the future for current and new patients. This was another opportunity to hear ideas from local patients that would make the experience better or even better in a lot of cases.

What did we hear about what improvements could be made in the future?

Nothing; everything was just fine

Quicker appointment, phone answered, read medical history

As long as the Doctor or nurse practitioner listens to your concerns there is nothing that can be done the hardest part is getting the receptionist to understand that you would not ring if you didn't have any concerns

If we have to use a video call it would be helpful to know how to use it.

Make more video / phone advice calls available to deal with those who do not necessarily need to visit the surgery / work full time and don't have time. This will release appointments for those that actually need them thus reducing wait times/ spend more time with patients who need it. Phone advice service gets over the elderly who may not be 'tech savvy' / have technology

Expand it for appropriate patients, saving face to face for those that need to be physically seen and examined. I'm sure it must also save time, for the doctor and for me, although I did not feel as if I was being rushed at any time.

More availability of appointments to save waiting and more people on the telephones in morning. More online self-booking would suit me personally but this must not be done if it disadvantages others (my parents would really struggle to book on line).

I have no concerns or complaints regarding the GP practice have provided their service. I have had to use them twice during lockdown for myself and my daughter and they were brilliant. The only thing is if it is going to continue that patients can't wait inside the practice for appointments then a shelter needs to be built outside for when autumn and winter come.

Video call may have helped improve the service, face to face contact is always better.

Go back to how it was before all this covid scene - everything is aimed to stop you seeing a doctor or practitioner even asking for appointment told "we are NOT doing appointments" - need to get back to providing a full service and not hiding away

Continue with the triage via video or phone call.

They could just do with more phone lines. It's a real struggle to get through when calling them

Keep up what you are doing!

Book online

Inform patients to expect a phone call where these are set up in response to e.g. online requests for fit notes, prescription requests or test results.

I think there should be a combination of the 2 services i.e. face to face and telephone consultation and perhaps more patients could access the service in a timely manner

Conclusion

This survey was developed to listen to local people's experience of accessing telephone and video appointments in their local Practice in the 2020 Covid-19 pandemic. It was shared across social media and across GP practices and people were encouraged to have their say and share their experiences.

There was a reasonable response to this survey (n=320). There may have been slightly more people completing the survey if the engagement approach had been face-to-face and used paper copies of the survey but it would have taken a longer period of time to get the information and to collate all the data.

Overall the evidence suggests that people were generally happy with their telephone or video appointment. More people had telephone appointments than video appointments and some feedback suggests that patients would prefer a video appointment because they feel that seeing someone gives them a better experiential outcome and provides a virtual face-to-face appointment that is broadly similar to physical appointments.

There was a lot of praise about the telephone consultations and appointments that included the speed of callbacks and the quality of the service.

Some of the issues related to telephone and video appointments are linked to communication barriers. This was evidenced by members of the deaf community and people whose first language is not English.

There were also improvements highlighted around making sure that older people could use and were confident around the use of technology and telephone/video appointments. People also wanted video instead of telephone appointments and timeslots for appointments could be more specific and take into consideration those who are at work or working from home.

What else would Healthwatch Doncaster like to find out more about in relation to telephone, video and digital appointments?

It would be interesting and helpful to know how many GP practices are offering video appointments for patients and what the criteria are for getting one.

Are video/telephone appointments just for GPs or could a patient get one for an ANP, Nurse, HCA, Physio, Pharmacist who may be part of the GP Practice team?

What is the impact on the availability of telephone, video and digital appointment as a result of NHS England and NHS Improvement's letter sent to GPs on 14 September 2020 in which they wrote to *"reiterate the importance of providing face to face appointments for those who need them and to share materials designed to support your clear communication with patients about how they can access the right type of appointment for them."*?

How can the emergent needs of different people from different communities who may want digital appointments first rather than face-to-face, be met?

Recommendations

People who responded to this survey found telephone and video appointments useful and of high quality. The availability of telephone and video appointments should be continued with a focus on more video appointments where clinically appropriate.

Communication and information around telephone and video appointments needs to be clear, concise and easy to follow so that they are as accessible as possible. The additional communication needs of the deaf community and for people for whom English is not their first language should be taken into account so that equitable access can be ensured.

Digital isolation and exclusion poses a real risk to widening gaps in inequalities. This area of work should be a key project that is supported, planned and implemented by all partners across the Health and Social Care arena – Covid-19 has provided an opportunity for transformation through a paradigm shift and the same paradigm shift should be created for those people who cannot or will not, for a range of reasons, use digital options for accessing primary, secondary or social care services and support.

Appendices



Summary Data -
Accessing local GP s

Survey summary data:



All responses -
Accessing local GP s

Survey – full responses data: