

Accessing GP Appointments

June 2020





The views, opinions and statements made in this report are those of the East Riding residents we spoke with. This perception may not fully reflect the work being carried out in the local area. Nevertheless it is the perception of the participants whose information Healthwatch East Riding of Yorkshire have collected.

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National Picture

Annually, Ipsos MORI send out an independent survey on behalf of NHS England to over 2 million people in the UK to gauge an idea of how people feel about their GP practice. The latest national GP survey published in 2019, has reported that although much of the population deem the service to be good, there has been an increase in respondents reporting access to appointments as being an issue. Nationally, people have been reporting issues with obtaining a GP appointment in a time frame that is deemed acceptable and at a suitable time and location.

In 2019, 32% of respondents to the national GP survey, stated that it was not easy to get through to someone at the GP surgery (37% in the East Riding of Yorkshire) and only 65% of respondents claimed that they were satisfied with the general practice appointments available to them (62% in the East Riding of Yorkshire).

In April 2016, the General Practice Forward View package by NHS England set out on a four year plan to ensure that by 2020, all patients would have improved access to routine GP appointments. Clinical Commissioning Groups (CCG) were required to commission Extended Hours appointments in surgeries across the country providing evening and weekend appointments to meet demand. This service was put in place by 1st October 2018.

Why this subject?

Over a period of time, HWERY has received a growing number of complaints, comments and feedback pertaining to GP appointments. The most pertinent issue being the waiting time between requesting an appointment and seeing a medical professional, which is reported to sometimes be upwards of 3 weeks. There is also deemed to be a lack of available appointments at times that are more convenient for a proportion of the East Riding residents i.e. appointments outside of working hours. This is supported by figures from the 2019 national GP survey results, in which only 62% of East Riding respondents reported to be satisfied with the GP appointments available to them.

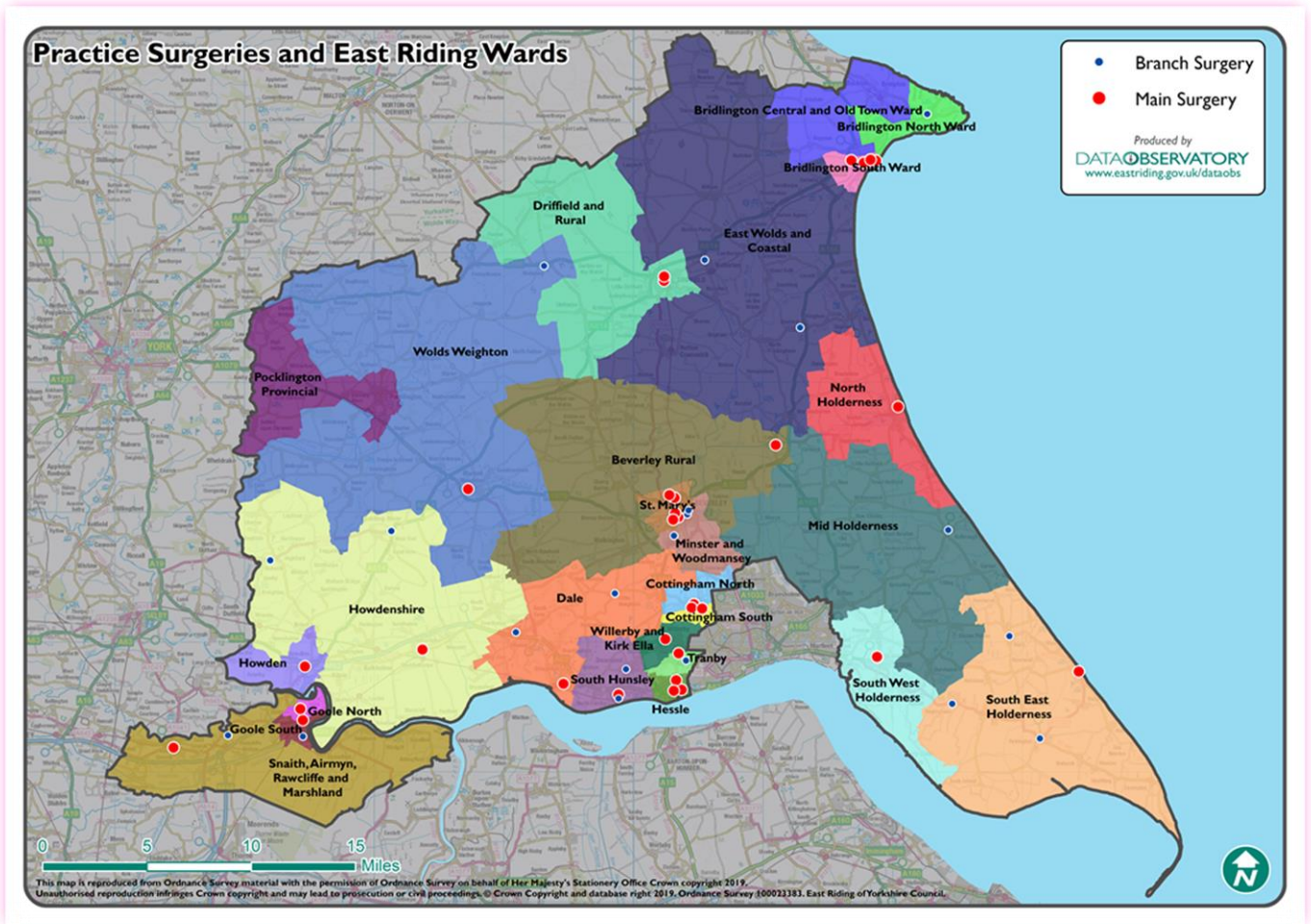
In discussion with the East Riding of Yorkshire Clinical Commissioning Group (CCG) it is apparent that despite public perception, there are appointments available outside of core surgery hours for all residents, regardless of which surgery they are registered at. These appointments are part of the Extended Hours programme; offering appointments in the evenings and at weekends at either the patients registered surgery or at another surgery. However, not all of the available appointments are taken up and many hours each month go unused while residents

report a struggle in obtaining an appointment. This report explores why the short uptake of these appointments and what is the public knowledge of the Extended Hours scheme.

In the East Riding of Yorkshire, there are 30 GP practices, serving a population of approx 334,179. As with the national picture, East Riding residents also report difficulty in accessing this service in a timely manner. In line with national requirements, the ERCCG commissioned extended hours in all surgeries across the East Riding effective as of 1st October 2018. This meaning that patients could access routine appointments outside of the core hours of 8am - 6pm Monday to Friday. Appointments are obtained by calling the patients registered practice. Receptionists should offer these appointments which could be with a doctor or another clinically appropriate medical professional.

In addition, the ERCCG also commissioned Yorkshire Health Partners (YHP) to provide an 'Improving Access' service which offers further out of hours appointments, at the patients registered surgery or at another surgery during evening and at weekends. This offer is not compulsory for surgeries, however, most of the practices in the East Riding are taking part in the programme. Uptake of these out of hours appointments varies and as with the Extended Hours appointments, not all allocated hours are taken, raising the question why, when there are many patients reporting difficulty in obtaining an appointment. It is significant to note that for the patient, both programme are delivered in the same manner, and the patient may be offered an appointment that is provided by either service. Healthwatch requested the data from the CCG and YHP to give a clearer picture of how many appointments are available and how many go unused each month, below is the response we received

- In relation to the Improving Access (IA) service, Yorkshire Health Partners (YHP) are the provider of this service and submit information to the CCG on a monthly basis that enables us to monitor activity within that service. According to the information received, we can advise that there were 8400 IA appointment slots available in the last quarter of 2019/20 (Jan – Mar 2020) and 7066 of these were booked into (84%). Once the number of people who did not attend (DNAs) their appointment is taken into account, utilisation of the available appointment slots fell to 76%.
- As a CCG, we do not monitor the uptake of appointments for the separately commissioned and delivered GP Extended Hours service. This has never been a requirement from NHS England for GP Practices to collect or submit this data. During 2019/20, Primary Care Networks (PCNs) took on responsibility for the delivery of this service, which involved the provision of 151 additional hours of clinical time per week across the seven PCNs in the East Riding of Yorkshire



Methodology

In order to gauge the experiences of the public, HWERY have carried out engagement events and held information stands in various locations across the East Riding. A list of these can be found on page 7. Experiences were captured through a pre-designed survey, which was circulated through many channels such as the East Riding of Yorkshire Council, Primary Care Network groups and social media. Patient Participation Groups (PPG) were consulted regarding the project and supplied with surveys to distribute throughout their surgeries. PPG's and other organisations were keen to be part of the project in order to improve the service provided to patients. Unfortunately, due to the covid-19 pandemic, many of this planned engagement through the PPG's was cancelled.

Due to the nature of the project, it was vital to capture the views of the working age population and therefore, survey links were sent to organisations such as Humber NHS Foundation Trust, East Riding Council and large employers in the area to distribute among staff. In the production of this report, Healthwatch have also taken into consideration feedback obtained in the recent past through other projects such as the Healthwatch Appropriate Services Review.

The following chart displays where engagement was carried out. Further engagement across the East Riding was planned, however, due to the Covid - 19 pandemic and the subsequent government orders for lock down, all engagement was cancelled from mid March onwards. Residents were still encouraged to complete the survey online during this time, however, this impacted negatively on the number of surveys received. When the survey was released in February, we initially saw a big influx in the number of surveys completed with many residents wanting to tell us of their experiences. This response level continued throughout February and into March, with the expectation that responses would continue through until the end of the month. Unfortunately, coinciding with the lock down measures, the survey responses came to a halt mid-March. None the less, a total of 964 surveys were completed and the information that follows is a summary of those responses.

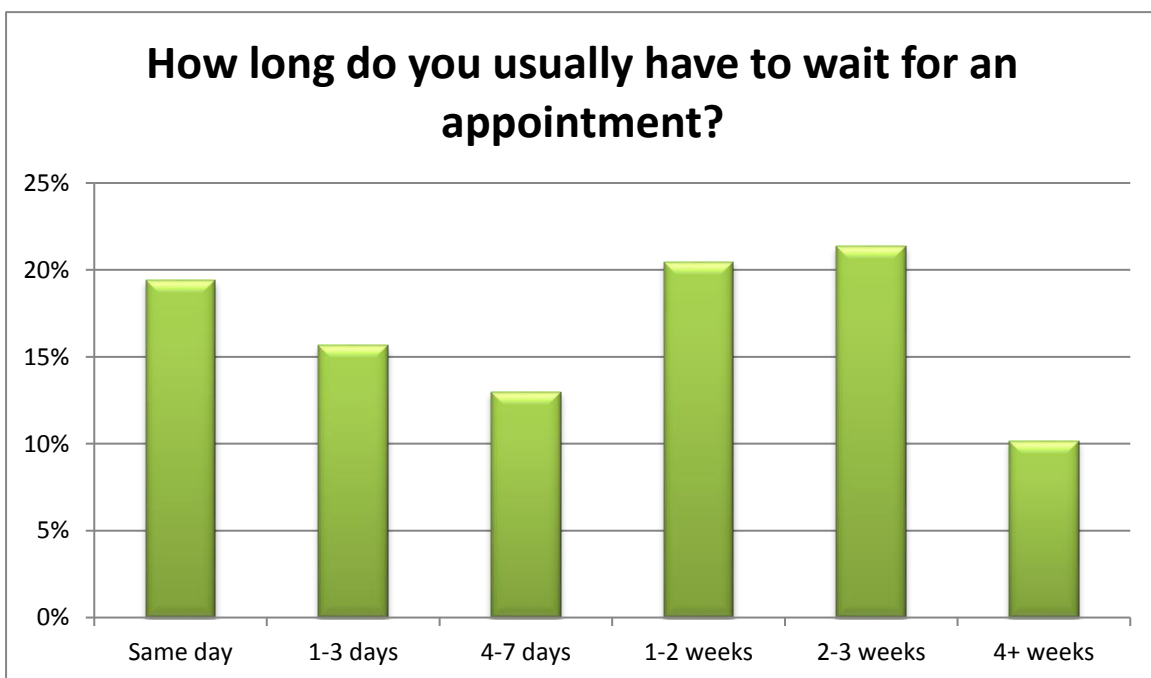
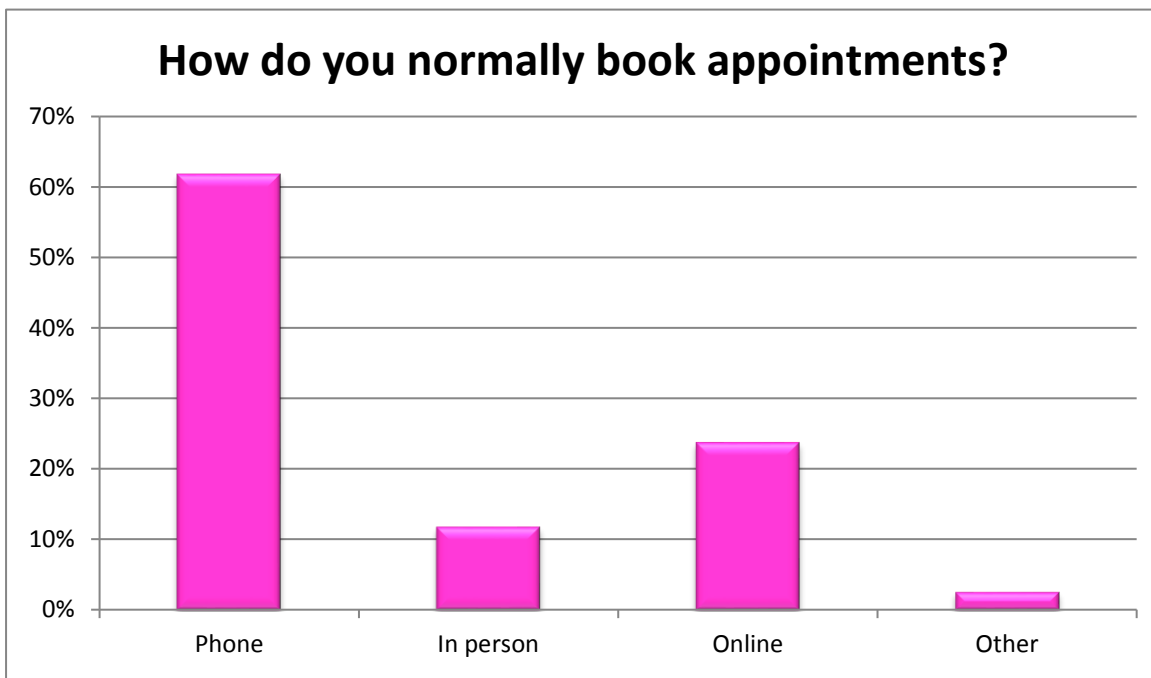
Engagement Location	Occasions
Bridlington	4
Beverley	3
Hull (HRI)	1
Withernsea	2
Hessle	1
Goole	3
Market Weighton	1
Driffield	1
Willerby	2

Booking

Appointments



In order to gauge a high-quality of understanding of people's journey when accessing GP appointments, our survey questions were formulated to give a view of the experience from start to finish, taking into account which methods people choose to book appointments and how the service delivered throughout. What follows is the response to the questions we asked and an analysis of the data obtained through the survey.



The data shows that 62% of respondents obtain appointments by telephone and on further inspection of the data a higher proportion (23%) of these, reported being

offered a same day appointment via this method when in comparison with other methods such as online or in person.

Online appointments was the second highest response with 24% of people using this method. Some patients state that they had previously tried to book online but due to technical errors such as being unable to log in and other factors such as lack of suitable appointments, they had chosen alternative methods. Of the respondents selecting to book online, the highest proportion waited 2-3 weeks for an appointment.

Patients attending the surgery in person to book an appointment typically reported waiting 1-2 weeks for an appointment, however a significant proportion (21%) also claim to obtain a same day appointment using this method.

Whilst the telephone is the most popular option, we received a number of unfavourable comments in regards to this method. Issues raised included having to call numerous times to get through to the surgery and being on hold for a long period. Comments were also received in regards to the online system not working correctly. Some respondents stated that they would sometimes have to try all methods in order to obtain a suitable appointment. The comments and the chart below highlight these issues and figures.

"All of the above, whichever I can get the appointment with"

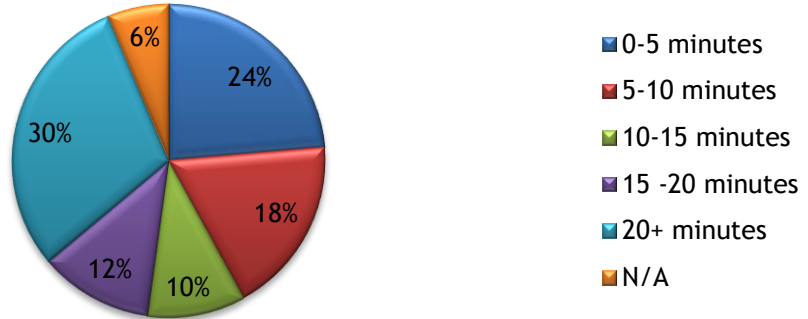
"I try on the phone but it is now all but impossible to get an appointment this way"

"Can never get through on phone so do it online"

"Have to go in, nobody answers the telephone and I've had experience of trying to book online which never ends well"

"I tried by attending after work and was told to phone the following day or turn up at 8.30. I couldn't have time off work so rang the following day and spent 45 minutes on hold as the second person in the queue"

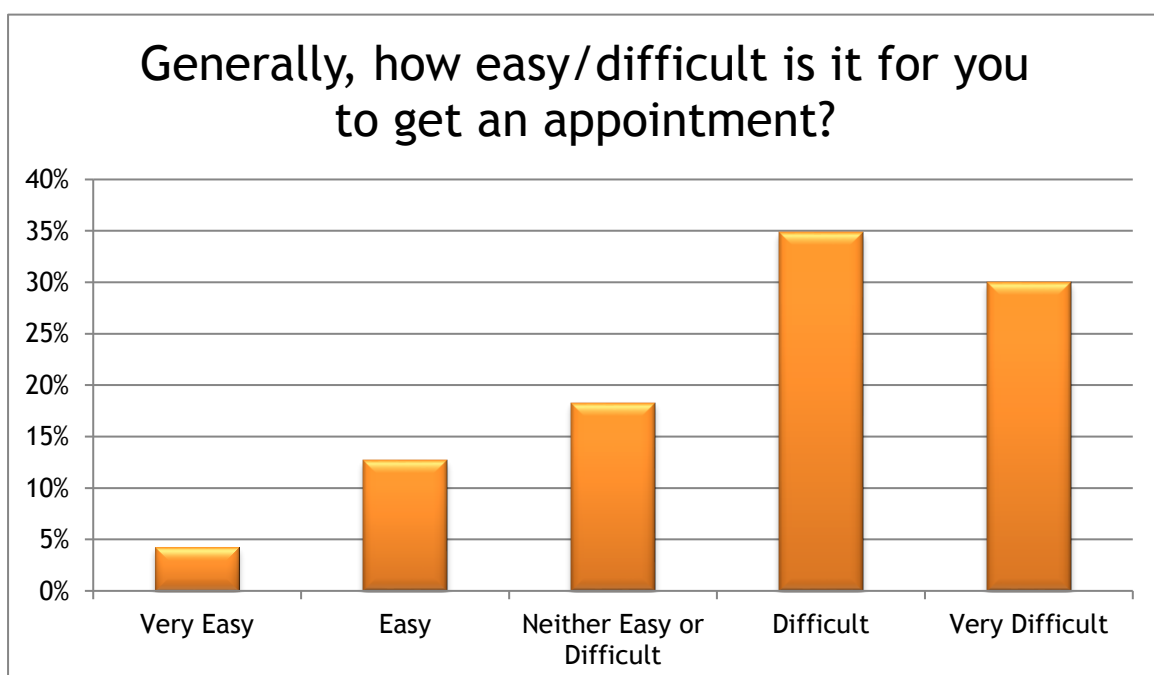
When you book over the phone, how quickly is your call answered?



55% of respondents felt that the time they had to wait for their appointment was acceptable for the concern that they had.



Although more respondents felt that the time they had to wait for an appointment was acceptable, there is a significant proportion who feel that they were not seen in a timely manner for the concern that they had. The data shows that the predominant reason for having to wait for an appointment is the difficulty in getting through to the surgery to book an appointment. We explored these issues further in order to capture a wider picture of the issues faced when obtaining an appointment.

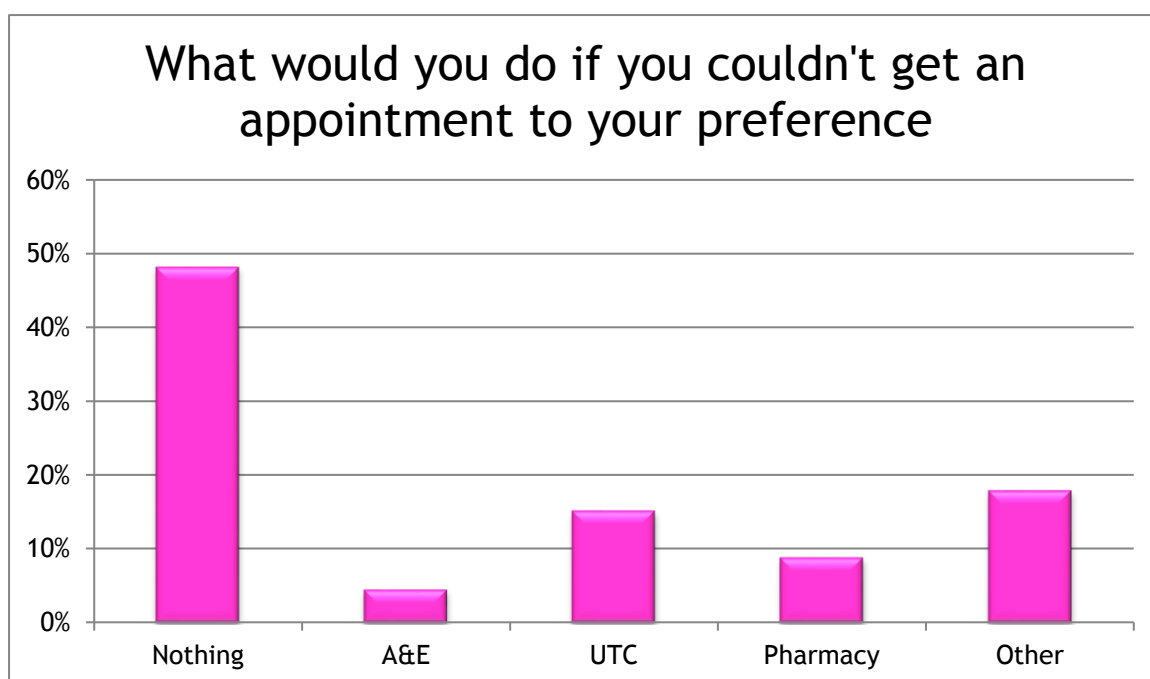


The above chart shows that 65% of respondents find it difficult or very difficult to obtain an appointment, with less than 20% finding it easy or very easy. We asked them to comment on what in particular makes this process easy or difficult. Respondents told us that getting through to the surgery on the phone is one of the most difficult parts of getting a GP appointment. We heard from patients who report being on the telephone waiting for upwards of 30 minutes. They stated that by the time they speak to the receptionist, appointments for that day have usually been taken and they are advised to repeat the process the following day. This was also reported as an issue by those booking in person, who told us that sometimes the queue at the surgery is so long at 8am that by the time they reach the front, there are no available appointments remaining.

"You ring at 8am and wait 40 minutes on the phone and when you do get through they say there are no more appointments left today, ring back tomorrow. And you get the same the next day"

"Having the receptionist who is not medically trained make the decision as to whether I can have an appointment or not. It's almost a battle"

This difficulty leads to patients attempting to access alternative services, which are not clinically appropriate, therefore increasing pressure elsewhere such as in the urgent care system. This issue was looked into and reported on in the Appropriate Service Review by Healthwatch East Riding of Yorkshire in 2020. The full report can be found here; [INSERT LINK](#). Another reported problem arising from the inability to obtain an appointment is the worsening of symptoms and increased anxiety about health.



Although nearly 20% of respondents selected other, many of these responses state that they would attend an Urgent Treatment Centre, Accident and Emergency or a Pharmacy. Other options people reported to take was to call NHS111, be persistent in calling or attending the surgery and going private. Alarming, some respondents claimed that they sometimes resort to using google to self diagnose and self medicate.

"I would go untreated or google how to self medicate"

"It would depend how urgently I felt I needed to see someone"

"Go to a treatment centre if I could get there"

"We are normally told to go to the UTC in Beverley if there are no appointments"

From these results and accompanying comments, it is apparent that the process of booking appointments is not suitable or meeting the needs of many East Riding residents and in some cases, having a detrimental effect not only on the patients' health but also on alternative services which are being accessed inappropriately.



What's most
important?

In order to gauge an understanding of what is really matters to patients accessing the GP service, we asked respondents to rank, from 1 to 5 (1 being most important) what is most important to them when booking a GP appointment. The final rank was as follows;

1. Being seen at the earliest possibility
2. Appointments taking place in my own surgery/practice
3. Appointment with a preferred clinician
4. Having an appointment that fits outside of office hours
5. Having a choice in gender of clinician

Respondents were asked to state why they chose their top ranking option. The section below demonstrates the figures from the survey response as well as an overview of the reasons behind the choices made.

49% of people selected an appointment at the earliest possibility as the most important, making this the most popular option. Reasons given for this were that patients believe that early intervention saves considerable anxiety and the possibility of symptoms worsening. Many stated that they only seek a doctors appointment if they feel it is necessary and other alternatives will not suffice, therefore obtaining an appointment at the earliest possibility is thought to be paramount.

	Being seen at the earliest possibility
Rank	Percentage
1	48.96%
2	28.42%
3	15.15%
4	4.56%
5	2.90%

"In my opinion, when I am ill I just want to be able to see a doctor/nurse not in 5 weeks time. I don't mind who it is with, just as long as there is someone available ASAP"

"I will only ring a GP when I need to go so the earliest an appointment can be made for me, the better"

"I generally only make appts when acutely unwell or have worsening symptoms so being seen sooner rather than later is important"

"Being seen early can prevent complications, suffering and helps you to get back to work"

Secondly, respondents would like their appointments to take place at their own surgery. The reasons for this varied; however, the general theme consisted of continuity of care and travel. Many patients prefer to be seen by the same doctor or medical professional as they feel that they have a greater knowledge of their medical history. Similarly, others claim that attending a surgery that they are familiar with eases anxiety and stress at what can already be a difficult time. Travel is an issue that affects many small towns and villages throughout the East Riding, this was highlighted a number of times and used as a reason for wanting to be seen at their registered practice. Some respondents claim to have little no transport options available to them.

	Appointments taking place in my own surgery/practice
Rank	Percentage
1	24.38%
2	29.67%
3	26.66%
4	13.59%
5	5.71%

"I want some continuity of care. Travelling to an unknown surgery in a different village or town just isn't something I want to do when I'm ill"

"I live in a rural area, depending on time of day, it can take 45 minutes+ to get to my surgery. There are no surgeries close so would have same issues travelling elsewhere"

"Because of my long term chronic health conditions, I find it difficult to travel"

Thirdly, patients want to be seen by a preferred clinician. Reasons for this are similar to why patients prefer to be seen at their registered practice, with many respondents stating that seeing the same clinician, offered better continuity of care. It is stated by some respondents that they feel they receive a better outcome and issues are resolved quicker when they are seen by a GP who knows their medical history and has built a trusting relationship with the patient. Other comments we received in relation to preferable clinicians, centred around appointments with a doctor rather than another medical professional such as a nurse. Some reported

feeling that they were 'fobbed off' with unqualified staff and were untrusting in the advice given by other staff.

Appointment with a preferred clinician	
Rank	Percentage
1	14.63%
2	19.09%
3	28.63%
4	29.15%
5	8.51%

"More likely to receive the most appropriate treatment or course of action when seeing a preferred clinician that knows your history"

"You ring the doctor to see a doctor! Not a practitioner."

"I like to see my usual doctor who is familiar with me"

"The nurse practitioners do a great job, but ultimately, I don't think they should be a buffer for doctors. How many illnesses are going unspotted or undiagnosed due to being fobbed off with unqualified staff"

The next most important aspect voted by the respondents is having an appointment that fits outside of office hours. Many told us how they struggle to obtain an appointment outside of working hours and how taking time off for appointments sometimes means a loss in earnings. Less than 20% of these respondents state that they have seen or heard any information about evening and weekend appointments. Furthermore less than 16% of these respondents claim to have been offered an extended hours appointments.

Having an appointment that fits outside of office hours	
Rank	Percentage
1	9.23%
2	18.05%
3	20.95%
4	35.98%
5	16.08%

"Appointments to fit around work and family life are most important so as to not cause even more unnecessary stress"

"I cannot always leave work at short notice due to staffing. Appointments out of working hours or bookable appointments would make life so much easier"

"It is totally unacceptable that I have to take time off work, which is unpaid, may I add, to attend an appointment"

"Not everyone is able to see a doctor during normal hours due to work commitments or if they work away. Children get a bad mark for attendance if taken out of school for appointments. Childcare for a parent needing a personal appointment on their own without the children"

Having a choice in gender of clinician was the least important option of the options provided with less than 3% stating that this is the most important factor to them. The comments suggest that is due to feeling more comfortable while discussing issues that are of a personal nature.

	Having a choice in gender of clinician
Rank	Percentage
1	2.80%
2	4.77%
3	8.61%
4	17.01%
5	66.80%

"As a female, I'm often more comfortable talking about female things with another female"

"For menopause and other women's issues, some male doctors are very dismissive"

"I like to see a female for personal reasons. I feel more at ease"



Extended Hours

Appointments

Following government guidance, the East Riding of Yorkshire Clinical Commissioning Group rolled out the extended hours service in October 2018 with all surgeries in the area in agreement to provide the service which offers appointments outside of the usual surgery hours of 8am - 6pm Mon- Fri. During January and February 2018, the CCG ran a short survey to give the public an opportunity to share their views to help inform the discussions with GP practices and to ensure the proposals fit with the needs of the East Riding residents. 57% of Respondents to this survey, stated that they were unhappy with the availability of non routine appointments. The results of this survey also highlighted the need for additional appointments, accessible outside of core hours, with 69% of respondents requesting this. Overall, the responses received in 2018 mirror the feedback HWERY have obtained during this project. The full results for the 2018 CCG survey can be found here; <https://www.eastridingofyorkshireccg.nhs.uk/data/uploads/get-involved/gp-extended-access-feedback-report-final.pdf>

Appointments can be obtained during the evening and at weekends and take place at the patients registered surgery or at another practice offering improved access

appointments. Uptake of these appointments has not reached maximum capacity with many hours going unused each month. We asked the general public what they knew of this service and whether they had been offered an appointment during these extended hours.



The results of our survey and our public engagement show that despite extended hours appointments being available since October 2018, public knowledge of this service is limited. The CCG and YHP have both produced information leaflets to raise awareness, however, as the chart below demonstrates, this does not seem to have achieved its purpose. Individuals that were aware of the service, spoke to Healthwatch to say that although they knew of extended hours appointments, their GP surgery was not forthcoming in offering the appointments and they could only be obtained through the patient specifically requesting them. This evidences that further work needs to be done to ensure that public knowledge is increased and that surgery staff should be provided with further training in regards to offering extended hours appointments.

To be seen sooner are you prepared to:

Travel to another East Riding practice	44.40%
Attend on an evening or weekend?	90.98%
See another type of clinician	55.71%

Have an online/telephone consultation

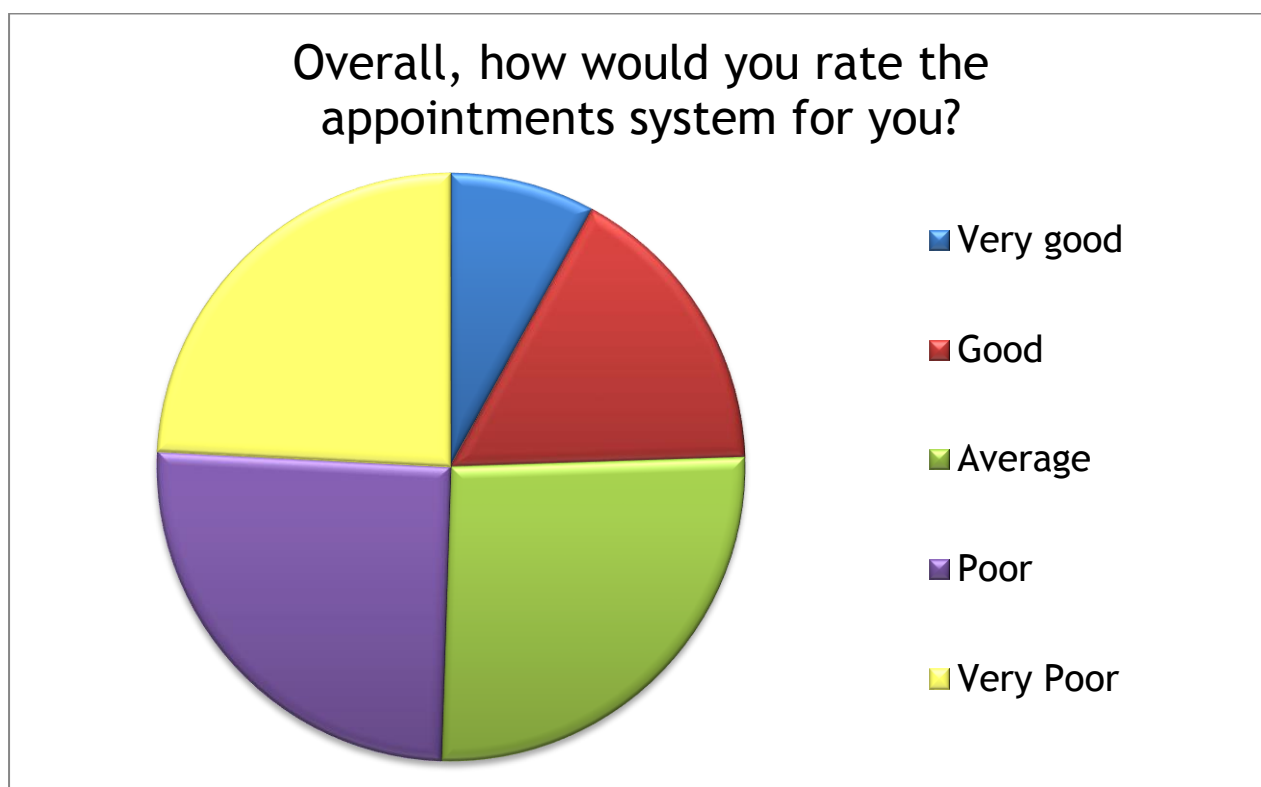
61.72%

As extended hours appointments can take place in the evening, at the weekend and/or at another surgery, we asked respondents whether they would be willing to travel to another venue or attend an appointment at a time outside of the core hours. In order to be seen sooner more than 90% of respondents state that they would be happy to attend the surgery during the evening or at the weekend, thus making use of the extended hours appointments. Only 44% are willing to travel to another East Riding practice. This was said to be due to the rural locations of the East Riding and continuity of care. With care navigation systems in place in surgeries, some patients are directed to other clinicians when clinically appropriate such as nurse practitioners. 56% of respondents are happy to see other clinicians and 62% willing to take an online or telephone consultation in place of a face to face appointment. Despite public interest in the available options, very few patients report being offered these as demonstrated in the chart below.



Improving the Service





Almost 50% of participants rated the appointments system as poor or very poor, with a further 26% giving a rating of average. With the majority of patients unsatisfied with the system, we asked what in their opinion, could be done to improve the process for all.

The overwhelming response was to have a better system for booking appointments, suggestions included additional telephone lines to reduce waiting times when calling the surgery. With some surgeries only offering an appointments lines on a couple of days each week, patients are reporting that they are sometimes unable to see a doctor when they need medical care, therefore, they would like to be able to book appointments any day of the week. Many feel that there are not enough appointment slots reserved for emergency ailments as they are pre-booked for routine appointments. There is a general consensus that the only options are an appointment in 2+ weeks or if the individual is lucky, they may get a same day emergency appointment. The feeling among many respondents is that there are no in-between pre-bookable appointments.

“It is very rare I use the doctors but it is a bit frustrating when there are no appointments to book. I don't like to book emergency appointments when I feel it is not necessary”

Furthermore, to combat the issues of the struggle in obtaining an appointment via the telephone, respondents said that they would like to access a wider variety of appointments online, including, where clinically appropriate, appointments during the weekend and evenings as well as online/telephone consultations.

As reported in the previous sections of this report, many patients try to call the surgery at 8am for an appointment but due to high call volumes, are unsuccessful. This issue was raised in the 2018 CCG survey, however, patients have seen no improvement to this process. We heard suggestions of appointments being released throughout the day rather than all at once to combat this issue as some patients reported being unable, due to work or family commitments to spend upwards of 30 minutes trying to get through at 8am. Despite the extended hours service being available, many respondents said that they would like to see improved access during evenings and weekends. Again, this highlights that public knowledge regarding this service is very low and that the working age public who would most benefit from this service are unaware of its existence.

“More appointments available by phone and online, released at different times of the day, so those travelling to work at 8am have some chance of getting an appointment”

The care navigation put in place to ease the pressure on GP's has not been welcomed by all, with some patients not happy to discuss medical conditions with reception staff. Whilst this system is for the benefit of all to ensure that patients are seen by the right person at the right time, public perception differs. Responses to our survey shows that patients feel that reception staff are being 'nosy' when asking for information in regards to the concern. With further knowledge about care navigation and the reasons behind this process being shared with patients, this issue could be resolved.

“Having trained medical personnel to answer the phone to see if you need to see a doctor or not, not a medically untrained receptionist”

Having taken all these considerations into account, there are conflicting opinions in regards to many of the suggestions made, such as online services; many patients reporting to be unable and/or unwilling to use this system. There are a number of reports that the system does not work with many saying they are unable to log into accounts to book appointments. There are also those who are unwilling to accept an online/telephone consultation as they prefer to see a doctor face to face. Other patients report that they would like to see a return to the sit and wait system where no appointment is necessary; however, this method would be greatly unsuitable for some, including those with work and family commitments. It is also important to recognise that for almost 24% of respondents, the service works well as it is and they are therefore happy with the service provided. Interestingly, a large proportion of

respondents who rated the service as good or very good, also suggested that there could be an improvement on telephone lines and availability of appointments.

Whilst the many conflicted views and differing opinions of patients are a testament to the difficulty in providing a service that all patients are satisfied with, it also highlights the need to be flexible and creative with the services on offer and how they are provided to meet the needs of all.

From the responses gauged through the survey and public engagement, Healthwatch East Riding of Yorkshire would recommend the following steps are taken in order to improve the services for patients;

Recommendations:

- Further training for GP reception staff to ensure that patients are being offered appointments that are suitable to their personal circumstances, making use of the extended hours appointments by offering these as routine.
- To increase public knowledge of extended hours, it is recommended that surgeries dedicate a section on their website to advertise this and explain the options available to patients; such as travelling to an alternative surgery to be seen sooner.
- The CCG to produce further information leaflets/posters pertaining to the extended hours service, to be displayed in surgeries and other public locations such as leisure centres and libraries. Literature should be informative, giving details on times and days that appointments may be offered and how to obtain these appointments.
- Expand the online booking system to include extended hours appointment where clinically appropriate

June 2020 - the Effect of the Covid 19 Pandemic

The research project was cut short in mid March due to the restrictions imposed by the Government lockdown in response to the Covid 19 pandemic. The following three months has seen unprecedented times, and GP practices have had to change and adapt the way they see patients. In the same way patients have had to change their expectations and adapt to a new way of accessing health professionals.

The effect of these changes will form a later piece of work, but in the interim we wanted to include comments from our partners

Partner comments - East Riding CCG

- What changes have been put in place due to Covid - 19 i.e. more telephone consultations and have these changes paved a way for changes in the system in the future?

Since the beginning of the Covid-19 pandemic, GP Practices have strictly followed Government guidance on how they operate and how patients access GP services.

On the 17 March 2020, GP Practices received the following national guidance:

Do we need to wait for agreement or confirmation to move to full triage, cancel routine appointments and cancel online booking? The National Guidance is that it is business as usual, however, it is acceptable for practices to implement a telephone triage system. Patients can be contacted and asked if they would like a telephone consultation, however if the patient does not have COVID-19 symptoms and requires an examination, a face-to-face appointment should be offered. A note should be on the online booking page advising patients if they have symptoms to self-isolate for 7 days, if they become unwell they should go to 111 online, or contact 111 telephone line if no internet access.

The situation was fast changing and in response to the ever-changing data and infection rates. On the 24 March 2020, East Riding of Yorkshire CCG circulated to GP Practices the following updated Government guidance, detailing that they must remotely triage **all** patients to assess whether a face-to-face appointment was clinically necessary, or whether follow-up care and advice can be given using remote consultation.

All patients should be remotely triaged to assess whether a face-to-face appointment is clinically necessary or whether follow up care and advice can be given using remote consultation. All currently pre-booked face-to-face appointments without prior triage need to be remotely triaged following this process.

Remote consultations should be used when possible to minimise risk of transmission.

GP Practices are still following this national guidance and many consultations are taking place over the telephone or via video link.

The same arrangements apply to the appointments offered via the IA and Extended Hours services.

Clearly, the Covid-19 pandemic has resulted in a number of changes being made to systems in order to protect both patients and staff and, naturally, their effectiveness will be evaluated to inform longer-term plans.

Next Steps

Throughout the lockdown period we have continued to collect comments and feedback on the extent to which the local response has met the needs of people with health and social care needs, this will form the basis for a new piece of work. Also working with Partners look at how people have responded to the new way of accessing health and social care. It is anticipated the report will be complete by Autumn 2020.

Acknowledgments

Healthwatch East Riding of Yorkshire would like to thank the following for information provided to assist in this project and assistance in the distribution and sharing of the survey.

East Riding Clinical Commissioning Group

Yorkshire Health Partners

Humber NHS Foundation Trust

Patient Participation Groups

All stakeholders who shared and re-tweeted the survey link