

“Sometimes it doesn’t take that long to get through...but on most occasions it is a frustrating process.”



Patients’ experiences of contacting GP surgeries in Oxfordshire

A report to Oxfordshire Clinical Commissioning Group

March 2022

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Acknowledgements

Healthwatch Oxfordshire would like to thank everyone who took the time to complete our survey and for sharing their experiences with us.

Executive summary

Healthwatch Oxfordshire conducted a survey from September to November 2021 to find out about people's recent experiences of contacting their GP surgeries. Several hundred people across the county responded by sharing their views and experiences of using different methods to contact their GP practice for appointments, information and advice, and other services. We analysed the results of 695 completed and validated questionnaires.

The results presented in this report provide a snapshot of how survey respondents reported their experiences. However, most respondents lived outside Oxford City and were from English, Welsh, Scottish, Northern Irish, or British backgrounds. Therefore, the results should be taken in this context and not as representative of all communities across the county.

The responses we received reflect people's current experiences: 86% of respondents said they had contacted their GP surgery within one month prior to the survey.

The main learnings from the survey include:

- Patients use various methods to contact their GP surgery - each method has its benefits and limitations.
- Telephoning is the commonest method; most patients call between 8am and 11am (55%) and a further 14% between 11am and 1pm. 71% rang to book an appointment.
- Patients frequently struggle to get through because telephone lines are engaged or waiting times are excessive.
- People welcome the 'call back' function, but it is not suitable for more urgent issues, for people who are unable to pick up phone calls throughout the day, or if it results in the person being put back into a long queue.
- Online tools and apps provide additional access to certain services but can be time-consuming or difficult to complete, and sometimes give unhelpful or inappropriate advice.
- Demand for services at GP surgeries is high. Despite best efforts of staff, patients can find it difficult and frustrating to obtain appropriate consultations and advice.
- One in three people called their GP practice wishing to book a non-urgent appointment. Many were unsuccessful.
- People with without access or unable to use a telephone or digital communication (e.g. a computer or the internet) are likely to find it very difficult to contact a GP practice or use the online tools. The exclusion of vulnerable groups and people who rely on physical access to a health care provider worsens health and exacerbates health inequalities.

Recommendations

Given the findings of our study, we make the following recommendations to Oxfordshire Clinical Commissioning Group:

- To note the findings of the report
- To support GP surgeries to improve technical and human resource capacity to respond to changing demands and emerging NHS strategies towards greater 'remote' healthcare and improve patient experience. These include:
 - Communications infrastructure (e.g. telephone systems, comprehensive online tools, including the e-consult service which some practices have withdrawn, and some patients find unwieldy and unresponsive).
 - Sufficient and supported care navigators and reception staff
 - Additional resources where necessary to meet demand at peak hours (e.g. between 8am and 11am)
 - Flexible and extended hours for patients to contact surgery staff
 - Provide a means for patients to book ahead for non-urgent appointments

We will present our findings to Oxfordshire's Health Overview and Scrutiny Committee and the Health and Wellbeing Board. We will share the report with local representatives of the General Medical Council, all local GP practices, Oxfordshire Primary Care Commissioning Committee, and the Oxfordshire Quality Committee.

1 Background

The Covid-19 pandemic is contributing to pressure on the national health system. Current social restrictions have resulted in more remote health care monitoring and online consultations, presenting unique challenges for health providers and patients.

This report sets out the results of a survey conducted by Healthwatch Oxfordshire about local people's recent experiences of contacting their GP surgery.

We asked people to tell us about:

- The methods they used to contact their GP surgery
 - Their views and experiences of using different methods
 - What happened when they last telephoned their surgery
 - The reasons for contacting their GP surgery and whether they received the service they required
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2 Methods

We invited people to take part in our survey online or by completing a paper questionnaire. We promoted the survey through GP surgeries and Patient Participant Groups (PPGs), Oxfordshire's Clinical Commissioning Group (OCCG), and Healthwatch Oxfordshire's regular online news briefing.

The survey ran from 20th September to 1st November 2021. We sent out paper questionnaires to anyone who requested one along with a FREEPOST envelope for them to be returned free of cost.

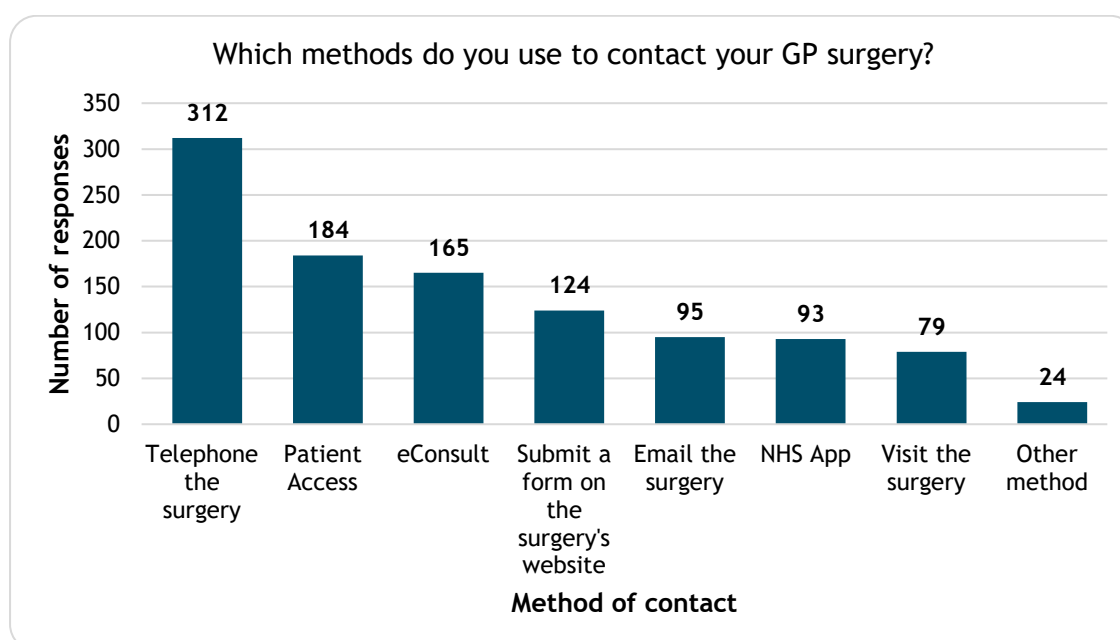
3 Results

We analysed the results of 695 completed and validated questionnaires. Below is a summary of some of the key characteristics of the people who participated in the survey (see Appendix for more information):

- Out of 596 people who told us their age group:
 - Six (1%) were aged between 18 and 24 years
 - 200 (34%) were aged 25-49
 - 165 (28%) were aged 50-64
 - 201 (34%) were 65 or over
- 476 out of 595 people (80%) identified as women and 99 (17%) as men.
- 530 of 584 people (91%) who told us their ethnic background identified as English, Welsh, Scottish, Northern Irish, or British. Only 23 (4%) people identified as “any other white background” and 14 (2%) people said they were from an Asian, African, or Caribbean community.
- Most people submitted questionnaires online rather than on paper or by telephone. Therefore, people with limited or no access to a telephone or digital technology (e.g. a computer, internet) are not represented.

3.1 Which methods do you use to contact your GP surgery?

We asked people to tell us about the different methods they used to contact their GP surgery. A total of 654 people responded. The results are summarised in the figure below.



The questionnaire allowed participants to identify multiple methods, therefore the total number of responses exceeds the number of people who responded.

As the figure above shows, people used various methods to contact their GP surgery. Telephoning was the most popular method although people also used online tools, including Patient Access, eConsult, and NHS apps, a form on the GP surgery website, and email.

Of all the methods reported:

- 312 people telephoned their GP surgery.
- Patient Access accounted for 184 and eConsult for 165 responses.
- Filling in a form on the GP website accounted for 124 responses, emailing the surgery 95, and using the NHS smartphone app 93.

We asked people to tell us about their recent experiences of using the above methods of contacting their GP surgery. Responses described how they used them and their views on the benefits and limitations of each one.

We analysed and categorised several hundred comments for each method according to the main theme or sentiment in it. Table 1 below summarises the themes for each method and some example quotes or comments that help illustrate each theme.

Table 1. Patient’s experiences of different methods of contacting their GP surgery

Method	Theme	Example comments
Telephone	Difficulty getting through	<p><i>“Telephoning used to be good but increasingly you do not get anyone answering.”</i></p> <p><i>“The phone is nearly always engaged and it can take several attempts to get through.”</i></p>
	Difficulty booking an appointment	<p><i>“At present, if you need a non-urgent appointment then you still need to phone on the day to gain an appointment that day. There is no facility to pre-book an appointment which is difficult.”</i></p> <p><i>“...it is a frustrating process particularly if you have been asked by text to book a non-urgent appointment with one of the non-medical clinical team. You can ring and be told there are no emergency appointment slots left that day but then there is no option to book a non-urgent appointment for future day as the recorded message cuts you off.”</i></p>
	Interaction with reception staff/care navigators	<p><i>“The receptionists are very helpful and thoughtful.”</i></p> <p><i>“It is usually good. Some receptionists are less cooperative!”</i></p>
Patient Access	Useful for specific purposes	<i>“Patient Access is excellent for repeat prescriptions and test results.”</i>
	Easy to use	<i>“This is easy to use and saves a call to the surgery.”</i>
	Limited usefulness	<p><i>“Patient Access is very limited, not allowing more than the most basic view of records.”</i></p> <p><i>“...seems to work but you cannot ask questions. Patient Access needs to be interactive.”</i></p>
	Limited availability	<p><i>“...the surgery no longer offers the service!”</i></p> <p><i>“Patient access was good until it stopped, due to covid? Not sure no one told me!”</i></p>
eConsult	Good for non-urgent issues	<p><i>“Econsult is great if you don’t need an appointment straight away.”</i></p> <p><i>“EConsult was a useful route to pass on a detailed but non-urgent issue I needed to discuss and I got a scheduled call from my GP and follow-up a face-to-face appointment and told to book for a test.”</i></p>
	Time-consuming/ inefficient	<p><i>“E-consult is so long winded. I think there should be a box to tick if you’re filling it out for the same condition that hasn’t gone away. So it’s easier to do and when you feel so poorly it’s really hard to do.”</i></p> <p><i>“A Dr will get back to you in 36 hours or so [and] send a message that you can’t reply to, so you have to start the process all over again.”</i></p>

	Questions are not always relevant	<i>"Completing the eConsult is very repetitive and doesn't necessarily ask the right questions." "E-consult takes too long and you have to lie sometimes to get to the end."</i>
	Advice is not always appropriate	<i>"It asks you questions which are not related to my problem and a lot of the time tells me to call 111 instead as it is apparently urgent!" "I then tried the e-consult that advised me to make a doctors appointment by telephone which defeated the purpose and eventually I gave up."</i>
	Limited availability	<i>"My surgery has turned ECONSULT off!" "Very useful but difficult to locate and only available when surgery is open??"</i>
Form on surgery website	Useful for specific purposes/simple requests	<i>"I submit a form for repeat prescriptions and it seems to work each time."</i>
	Slow/no response	<i>"Submitting a form is easier personally for me but sometimes it doesn't get passed onto my GP and gets held up." "It's hit and miss if the GP responds quickly."</i>
	Useful for non-urgent issues	<i>"Phone can take a long time (5-15 minutes) and with a young baby I don't always have that much time to wait. So I use the online form if it's not urgent."</i>
Email	Useful for specific purposes	<i>"I email to request repeat prescriptions, as the reception cannot process these requests. I have found the system works very well."</i>
	Slow/no responses	<i>"I have never gotten reply from my GP on any email I've sent, regardless of importance." "Emails are rarely answered, and the queries or problems never addressed."</i>
NHS app	Useful for limited purposes	<i>"The NHS App is great for repeat prescriptions and can work well for appointments (that is if there are appointments listed)." "The nhs app is great. Shame you cannot do a lot more through it?"</i>
Go to the surgery	Appointments	<i>"I have requested two appointments in the last three months. In both cases they were not urgent and I was able to go in person to the Medical Centre...to request the appointment."</i>
	Turned away	<i>"Went in today to make an appointment and was very rudely told to go home and phone. I explained I had tried and couldn't get through and was told that they would not make an exception, I am not special."</i>

3.2 When did you last call your GP surgery?

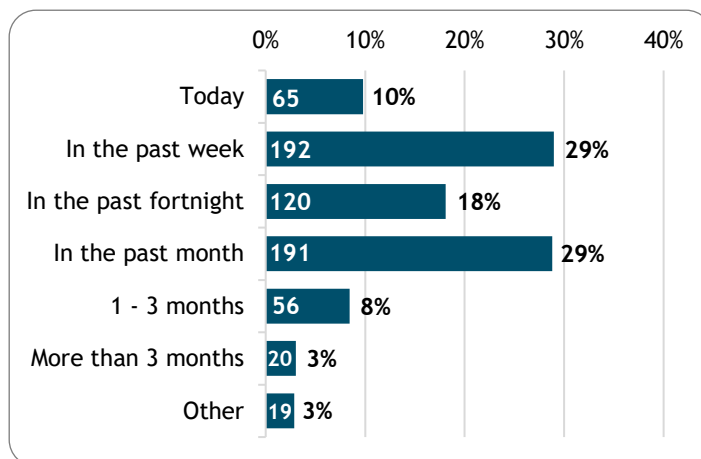
Given that most patients contact their GP surgery by telephone, we asked people to tell us more about the last time they telephoned their surgery. A total of 663 people responded.

The two figures below summarise the survey responses. The first figure shows when they last called their surgery and the second figure shows what time of day they had called.

When did you last call your surgery?

Of 663 responses:

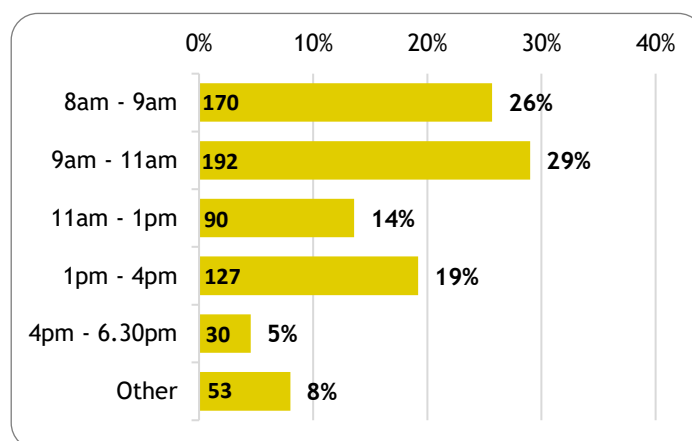
- 65 people (10%) had telephoned their GP surgery on the day they completed the survey.
- 192 people (29%) had called during the previous week, 120 (18%) had called in the past 2 weeks and 191 (29%) in the past month.
- The remaining people had called more than one month ago.



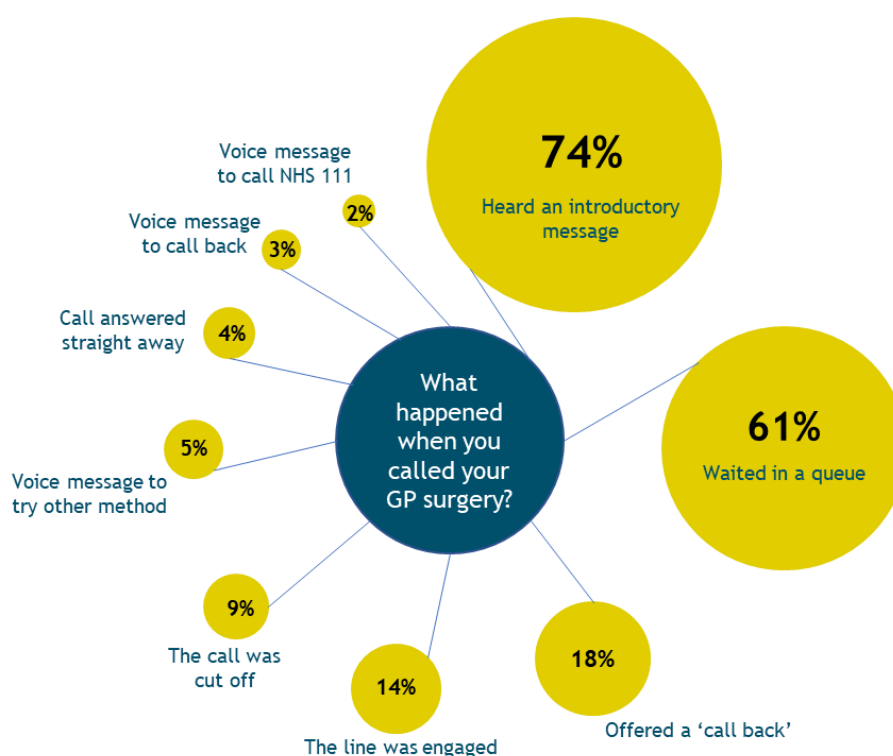
What time of day did you call the surgery?

Of 662 responses:

- People usually telephoned their GP surgery in the morning, between eight and eleven o'clock.
- Calling between 1pm and 4pm was also quite common. Fewer people called after 4pm.
- 'Other' responses tended to be people who had called more than once at different times during the day.



3.3 What happened when you last called your GP surgery?



Of 661 people who told us about when they last telephoned their GP surgery:

- 405 people (61%) waited on hold or in a queue before their call was answered. Waiting times varied (see section 3.4 below).
- 94 (14%) people said they had to call more than once because the line was engaged and 58 (9%) said their call was cut off.
- Fewer people heard a voice message instructing them to contact the surgery using another method (5%), to call again later (3%), or to call NHS 111 (2%).
- 27 people (4%) said their call was answered by a receptionist/care navigator straight away and 117 (18%) were offered a call back from someone at the GP surgery.

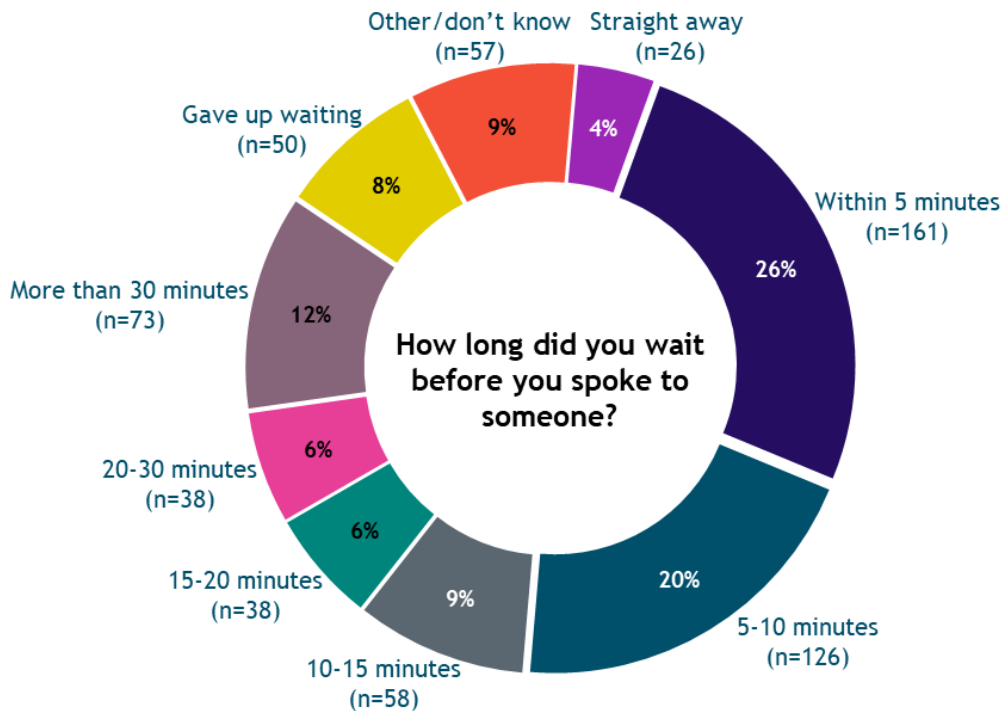
What people said about 'call back'

Of 92 people who told us about the call back function, 78 (85%) said they were contacted by the surgery and 14 (15%) were not. Forty people commented on their call back experience. The main things we heard were:

- Waiting times ranged from 15 minutes to several hours
- Call back worked well for people with non-urgent issues or able to receive phone calls at any time but not for people who cannot easily take phone calls at work
- It was less helpful for people seeking a medical appointment after the cut-off time or when no more appointments are available
- Some people who received a call back were put in another queue or on hold:

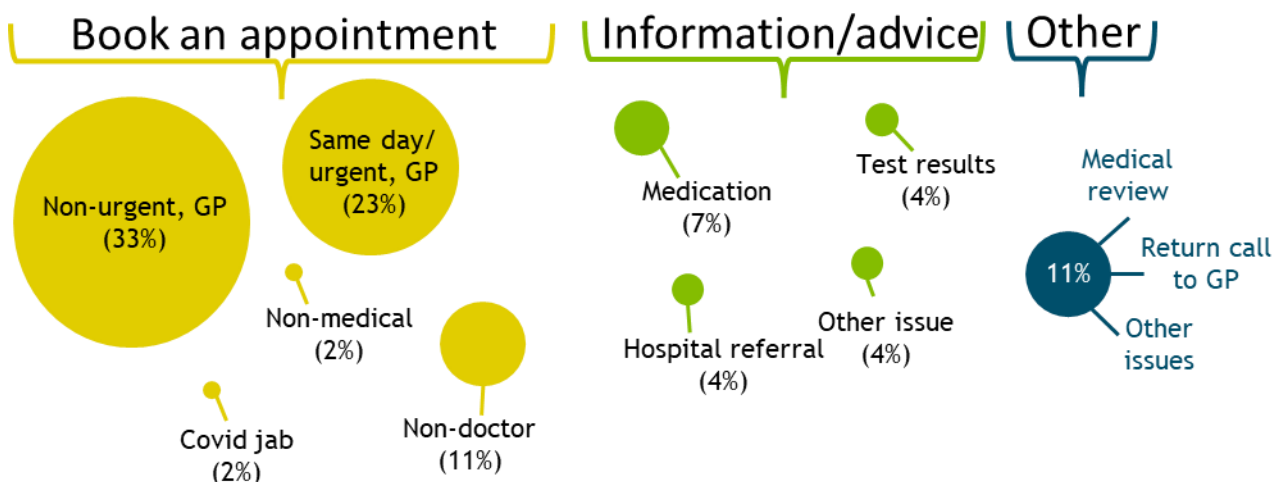
"I was late to a meeting whilst waiting in the initial queue and listening to the recorded message. I then had to leave a meeting halfway through to receive the call, only to be held in another queue."

3.4 How long were you waiting before you spoke to someone at the GP surgery?



The figure above shows that just over one-quarter of people (26%) spoke to someone within five minutes of calling and 126 people (20%) waited between five and 10 minutes. A further 73 (12%) said they waited more than half an hour and 50 people (8%) gave up waiting. Responses in the 'other' category (9%) included waiting more than an hour and calls not being answered or cut off.

3.5 What was your main reason for calling your GP surgery?



The main reasons people gave for calling their GP surgery included:

- Book a routine or non-urgent appointment with their GP (33%)
- Request a same-day appointment for an urgent problem (23%)
- Book an appointment with another health practitioner such as a nurse (11%).
- People also called for information or advice, such as medication (7%), test results (4%), a hospital referral (4%), or another issue (4%).
- Other reasons (11%) included inquiries about a medical review or to return a missed call from the GP surgery.

Q. Did you get the information or service you wanted from your GP surgery?



3.6 How would you describe your recent experience of contacting your GP surgery?

We asked people to rate their recent experience on a 'satisfaction' scale, choosing one of five options from 'very unsatisfied' to 'very satisfied'. A total of 635 people gave a rating and 309 commented on their experience. The results were evenly spread across the five ratings, although slightly more people were unsatisfied than satisfied.

The figure below shows the percentage of responses across each level of satisfaction, with example comments people left according to each level.

Example comments

Very satisfied
(19%)

“It was a Monday morning and I didn’t expect to get through easily. The receptionist was very helpful and booked an appointment with my GP on the proviso that I could cancel after I had spoken to the optometrist.”

Satisfied
(20%)

“I understand the difficulties faced by surgeries and am prepared to wait as when I do speak to the doctor she is efficient and helpful.”

Neutral
(18%)

“[I] called about blood pressure medication but was only offered a telephone call and they relied on my being able to give blood pressure readings. Little chance to discuss my worries.”

Unsatisfied
(20%)

“Took ages to get through, the receptionist tried to answer my questions seemingly in an attempt to prove I didn’t need an appointment. There were no appts left that day so I had to go through the same process again the next day.”

Very unsatisfied
(24%)

“Someone really needs to do something about this, my wife urgently needed her medication which if she doesn’t take can be life threatening. I cannot get through to the surgery and despite my disability I will have to go down to the surgery.”

3.7 What we have learned

We received several hundred responses to our survey. People shared their views and experiences of using different methods to contact their GP practice for appointments, information and advice, and other services.

The main learnings from the survey include:

- Patients use various methods to contact their GP surgery - each method has its benefits and limitations.
- Telephoning is the commonest method. Patients often struggle to get through because of frequently busy lines and excessive waiting times.
- People welcome the 'call back' function, but it is not suitable for more urgent issues, for people who are unable to pick up phone calls throughout the day, or if it results in the person being put back in a long queue.
- Online tools and apps provide additional access to certain services but can be time-consuming or difficult to complete, and sometimes give unhelpful or inappropriate advice.
- Although most people said they received the information or service for which they had contacted their GP practice, 39% were unsatisfied with the response.
- One in three people called their GP practice wishing to book a non-urgent appointment. Many were unsuccessful.
- People with without access or unable to use a telephone or digital communication (e.g. a computer or the internet) are likely to find it very difficult to contact a GP practice or use the online tools. The exclusion of vulnerable groups and people who rely on physical access to a health care provider worsens health and exacerbates health inequalities.

4 Appendix

4.1 Survey respondent characteristics

Table 1. Age group (596 responses)

	Number	%
18-24	6	1%
25-49	200	33%
50-64	165	28%
65-79	174	29%
80 or over	29	5%
Prefer not to say	22	4%

Table 2. Ethnic background (584 responses)

	Number	%
Indian	2	0%
Pakistani	1	0%
Chinese	2	0%
Any other Asian background	1	0%
African	1	0%
Caribbean	1	0%
Any other black/African/Caribbean background	2	0%
Arab	1	0%
White and Black Asian	2	0%
English/Welsh/Scottish/Northern Irish/British	530	91%
Irish	7	1%
Any other White background	23	4%
Other	11	2%

Table 3. Gender

	Number	%
Woman	476	80%
Man	99	17%
Prefer not to say/self-define	20	3%

Table 4. Which district in Oxfordshire do you live in (595 responses)?

	Number	%
Cherwell	120	20%
Oxford City	47	8%
South Oxfordshire	134	23%
Vale of White Horse	147	25%
West Oxfordshire	142	24%
Outside Oxfordshire	5	<1%

Table 5. Which district is your GP surgery located in (637 responses)?

	Number	%
Cherwell	126	20%
Oxford City	69	11%
South Oxfordshire	147	23%
Vale of White Horse	146	23%
West Oxfordshire	146	23%
Not sure	3	<1%