



GP website desk-based study report **May 2022**



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About Healthwatch Nottingham & Nottinghamshire

Healthwatch Nottingham & Nottinghamshire is the local independent patient and public champion. We hold local health and care leaders to account for providing excellent care, by making sure they communicate and engage with local people, clearly and meaningfully, and that they are transparent in their decision-making.

We gather and represent the views of the people who use health and social care services, particularly those whose voice is not often listened to. We use this information to make recommendations to the people who have the power to make change happen.

We have 3 key roles:

Scrutiny of local health and care commissioners to ensure that they: listen to the public, provide excellent care, provide quality signposting and are totally transparent

Make a difference: We collect & provide insight from patients & communities and use these to make recommendations to improve services for the public. We will then scrutinise how this insight helps to influence improvements.

To work in partnership across local, regional, and national networks of Healthwatch and the CQC to ensure big issues/opportunities are acted upon & best practice is shared, whilst ensuring that our independence is maintained

Why is it important?


You are the expert on the services you use, so you know what is done well and what could be improved.

Your comments allow us to create an overall picture of the quality of local services. We then work with the people who design and deliver health and social care services to help improve them.

How do I get involved?

We want to hear your comments about services such as GPs, home care, hospitals, children and young people's services, pharmacies, and care homes.


You can have your say by:

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In December 2021 we conducted a desk-based GP website study, visiting 97.3% of all GP websites (n=144) across Nottingham and Nottinghamshire to see what information was provided for patients. We timed each website visit to 2 minutes and 30 seconds, to see if we could find vital information in a reasonably short period of time. We considered only information provided on the GP websites for people able to access it. Our findings were recorded in a spreadsheet and then analysed.

In May 2021 NHSE updated Standard Operating Procedure (SOP) to Support Restoration of General Practice Services¹. This now states:

- GP practices must all ensure they are offering face-to-face appointments.
- GP practices should respect preferences for face-to-face care unless there are good clinical reasons to the contrary.
- All practice receptions should be open to patients, i.e. patients should be able to walk into the surgery.
- Patients should be treated consistently, regardless of mode of access.

The aim of the study carried out was to understand whether, in line with these requirements, the GP practice websites provided information on the availability of face-to-face appointments and also stated that patients could walk into the surgery reception.

We visited the 144 GP websites to find out what proportion of GP practices in Nottingham and Nottinghamshire had clear information on their websites on:

- How to contact the GP and ask for help.
- How face-to-face or walk-in services can be accessed.

We also looked into whether GP surgery websites had Covid-19 guidance, including information on what to do when going into the surgery, as well as information on Coronavirus symptoms. At the time of the study, all GP surgeries were required to adhere to the Infection Prevention and Control (IPC) guidance, which includes mandatory face coverings for patients and social distancing guidelines².

Finally, we used the information provided by the Local Authority Health Profiles³ to gain an insight into deprivation levels and health outcomes for each area across Nottingham and Nottinghamshire. Previous research has found that patients in more deprived areas find it more difficult to obtain an appointment with their GP, and generally have more negative views of GP services^{4,5}. We therefore compared the information provided on the GP practice websites to see if there were significant differences between GP websites in the most and the least deprived areas.

Information on how to contact the GP practice

Telephone number availability

Is a telephone number available?	No.	%
Yes	144	100.0%
No	-	-
Total	144	100%

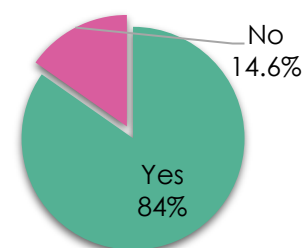
Table 1: source GP websites (n=144)

Of the 144 GP surgeries, 100% (n=144) had a telephone number on their website.

Booking an appointment online

Is it possible to book an appointment online?	No.	%
Yes	121	84.0%
No	21	14.6%
Information inconsistent	2	1.4%
Total	144	100%

Table 2: source GP websites (n=144)

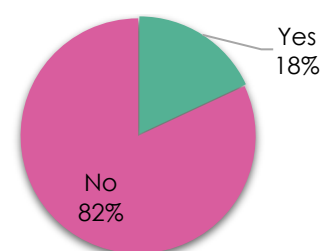


In total, 84.0% (n=121) of GP surgeries provided an option of booking appointments online, while 14.6% (n=23) did not provide this option. Fifteen practices stated that they had suspended the online booking system due to Covid-19 guidelines, moving instead to the telephone triage system. One practice stated that the online system was for routine appointments only, and that all other appointments must first be triaged over the phone. Two GP practice websites (1.4%) provided inconsistent information about online booking. In both cases, an online appointment booking option had been suspended, although elsewhere on the website it stated that appointments could be booked online.

Booking an appointment at reception

Does it state that patients can book appointments at reception?	No.	%
Yes	26	18.1%
No	118	81.9%
Total	144	100%

Table 3: source GP websites (n=144)



Only 18.1% (n=26) of practices stated on their website that patients could book an appointment at reception, while 81.9% (n=118) did not mention this as an option. However, this does not automatically imply that surgeries which did not provide information about booking an appointment at reception (81.9%), would prevent patients from doing so. It can therefore be interpreted either as surgeries not accepting patients at reception, or as their having omitted from the website information about in-person access. Thirteen practices explicitly advised patients not to go into the surgery unless they had an appointment or had been asked to do so, while one practice advised that patients would be turned away if they went into the surgery without first speaking to a clinician.

Due to the limitations of the present desk-top study, it is not possible to know whether patients would be turned away when trying to access services at reception; such messages could potentially have contradicted NHSE guidance¹. The guidance clearly states that all practice receptions should be open to patients, while adhering to infection prevention and control (IPC) guidance, and that patients should be treated in a consistent manner, regardless of mode of access.

Accessing face-to-face appointments

Clear offer of face-to-face appointments on GP website

Is there a clear offer of face-to-face appointments?	No.	%
Yes	131	91.0%
No	13	9.0%
Total	144	100%

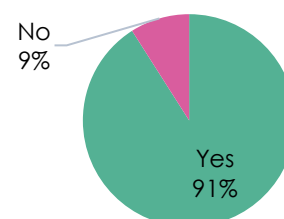


Table 4: source GP websites (n=144)

The majority of GP surgeries, 91% (n=131), included a clear offer of face-to-face appointments on their website, while 9% did not. Although the lack of a clear offer of face-to-face appointments on GP websites does not imply that they were not being provided, insufficient or unclear information could potentially have contradicted NHSE guidance.

One surgery clearly stated that face-to-face 10-minute appointments were currently suspended, offering video appointments instead. This directly contradicted NHSE guidance, which states that all GP practices must ensure that they are offering face to face appointments and that preferences for face-to-face care should be respected, unless there are good clinical reasons to the contrary. Whilst it is possible that the information provided on a website is out of date, the NHSE guidance underlines the importance of keeping information on websites current.

Guidance on how face-to-face appointments or walk-in services can be accessed

Does it state how face-to-face appointments or walk-in services can be accessed, including the triage process?	No.	%
Yes	124	86.1%
No	20	13.9%
Total	144	100%

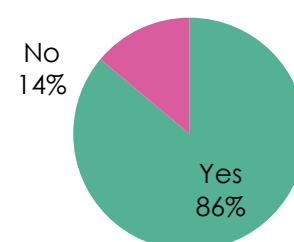


Table 5: source GP websites (n=144)

Most GP surgeries, 86.1% (n=124), provided clear information about how face-to-face appointments or walk-in services could be accessed, including information about the triage process, whilst 13.9% (n=20) did not do so.

Information and guidance related to Covid-19

Is information and guidance related to Covid-19 provided?	No.	%
Yes	142	98.6%
No	2	1.4%
Total	144	100%

Table 6: source GP websites (n=144)

Almost all GP surgeries, 98.6% (n=142), provided information on their website about Covid-19, including information on what patients should do if they had Covid symptoms, information about how surgeries had changed the way they operated, as well as precautionary measures such as asking people to wear a mask when visiting the surgery. Only two surgeries, (1.4%), did not provide this information.

Findings by area

We analysed data for each local area to determine whether there were significant differences in the information provided on GP websites. Only 'Yes' responses are listed in the tables below, with the percentage calculated based on the total number of GP surgeries in that area.

We also cross-referenced data with the Local Authority Health Profiles³, in order to provide an insight into deprivation levels and health outcomes for each area. The following health indicators were taken into account: life expectancy, under-75 mortality rate from all causes, percentage of adults classified as overweight, deprivation score, children in low-income families, and percentage of people in employment.

According to the Local authority Health Profiles, Rushcliffe, Broxtowe and Gedling districts have the most positive indicators of health, and the lowest deprivation scores. The remaining areas have higher deprivation scores: Mansfield and Ashfield, Bassetlaw, Newark and Sherwood, and Nottingham City³.

Total number of GP surgeries by area	No.
Nottingham City	47
Mansfield and Ashfield	26
Gedling	19
Bassetlaw	16
Newark and Sherwood	13
Rushcliffe	12
Broxtowe	11

Table 7: source GP websites (n=144)

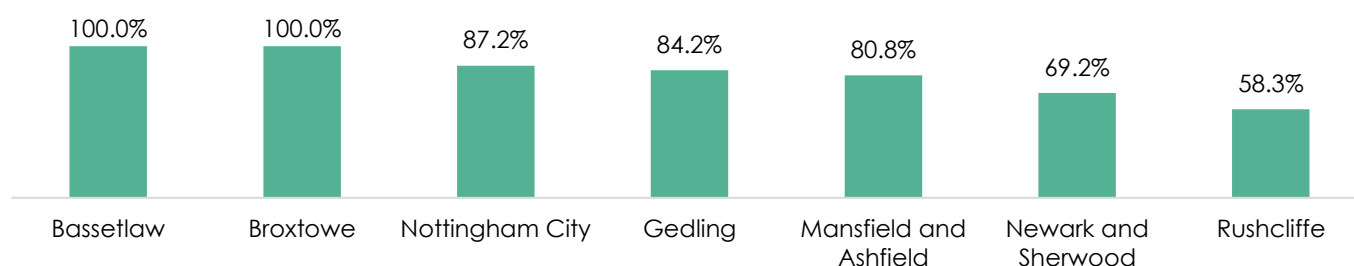
Nottingham City had the highest number of GP surgeries (n=47), followed by Mansfield and Ashfield (n=26), Gedling (n=19), Bassetlaw (n=16), Newark and Sherwood (n=13), Rushcliffe (n=12) and Broxtowe (n=11).

A total of 26 GP surgeries (18.1%) across Nottingham and Nottinghamshire were branch surgeries and shared a common website, with identical results. In areas where the number of such surgeries was higher, the data was consequently less varied. Bassetlaw had the highest percentage of surgeries sharing a common website, 68.8% (11 out of 16 practices). The remaining areas had fewer than 20%, with Newark and Sherwood having the lowest proportion, 7.7%.

Booking an appointment online

Is it possible to book an online appointment?	Yes Responses	%
Bassetlaw	16	100%
Broxtowe	11	100%
Nottingham City	41	87.2%
Gedling	16	84.2%
Mansfield and Ashfield	21	80.8%
Newark and Sherwood	9	69.2%
Rushcliffe	7	58.3%

Table 8: source 'Yes' responses from GP websites (n=121)

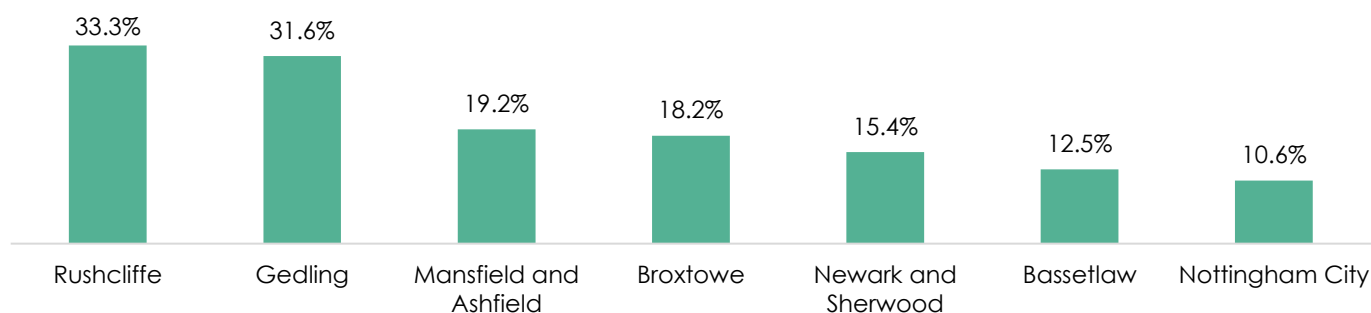


All GP surgeries in Bassetlaw (n=16) and all in Broxtowe (n=11) provided an online appointment booking option. This was followed by Nottingham City, where 89.4% (n=42) provided the same option, Gedling, 84.2% (n=16), Mansfield and Ashfield, 80.2% (n=21), Newark and Sherwood, 69.2% (n=9), and Rushcliffe, where only 58.3% (n=7) of surgeries provided it. In Rushcliffe, four of the seven surgeries that did not have an online booking option had suspended it due to Covid, while one GP surgery did not have consistent information on its website.

Booking an appointment at reception

Does it state that patients can book appointments at reception?	Yes Responses	%
Rushcliffe	4	33.3%
Gedling	6	31.6%
Mansfield and Ashfield	5	19.2%
Broxtowe	2	18.2%
Newark and Sherwood	2	15.4%
Bassetlaw	2	12.5%
Nottingham City	5	10.6%

Table 9: source 'Yes' responses from GP websites (n=26)



Rushcliffe had the highest percentage, 33.3% (n=4), of GP surgeries stating on their website that patients could book an appointment at reception, followed by Gedling, 31.6% (n=6). Mansfield and Ashfield had a lower number of surgeries making a clear offer for booking appointments in person, 19.2%(n=5), followed by Broxtowe, 18.2% (n=2), Newark and Sherwood, 15.4% (n=2), Bassetlaw, 12.5% (n=2), and Nottingham City, 10.6% (n=5).

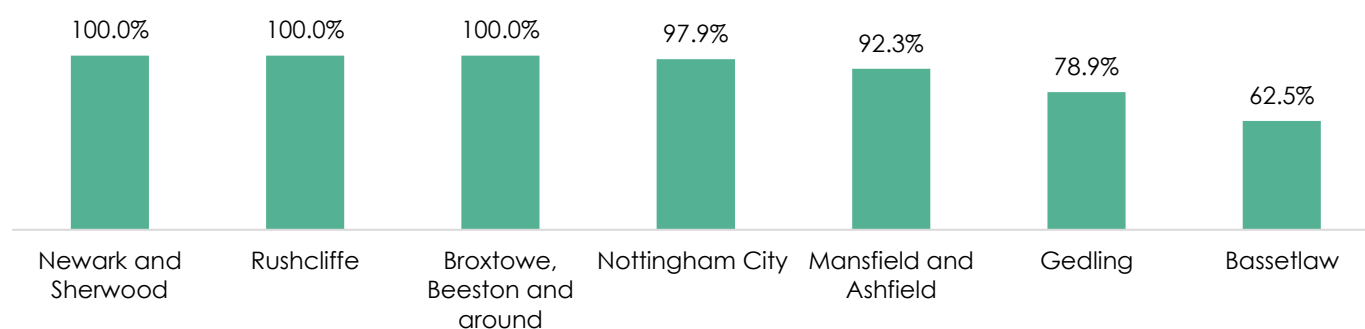
Rushcliffe had the lowest percentage of GP surgeries offering online appointments and the highest percentage stating that patients could book an appointment in person. This may be partially explained by the need to offer patients other contact options where online booking was not available. However, there was less evidence of this in Newark and Sherwood, or in Mansfield and Ashfield, where offers of online appointment bookings were lower, but the option of booking appointments in person was not significantly higher than in other areas.

Rushcliffe and Gedling districts had the largest proportion of GP practices providing information about booking an appointment at reception, in comparison to surgeries in more deprived areas. As patients in more deprived areas find it more difficult to contact their GP practice on the telephone⁴, the lack of opportunity to visit reception might unfairly exclude and disadvantage some people, potentially preventing them from accessing appointments at all.

Clear offer of face-to-face appointments on the GP website

Is there a clear offer of face-to-face appointments?	Yes Responses	%
Newark and Sherwood	13	100%
Rushcliffe	12	100%
Broxtowe	11	100%
Nottingham City	46	97.9%
Mansfield and Ashfield	24	92.3%
Gedling	15	78.9%
Bassetlaw	10	62.5%

Table 10: source 'Yes' responses from GP websites (n=131)

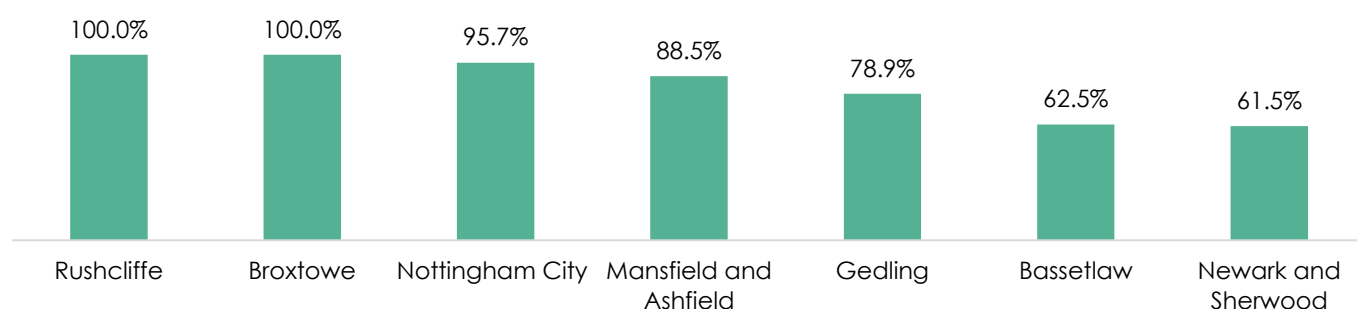


GP practices in three areas of Nottinghamshire had a clear offer of face-to-face appointments in 100% of cases: Newark and Sherwood (n=13), Rushcliffe (n=12), and Broxtowe (n=11). Nottingham City had a slightly lower rate, 97.9% (n=46), followed by Mansfield and Ashfield, 92.3% (n=24), Gedling, 78.9% (n=15), and Bassetlaw, 62.5% (n=10).

Guidance on how face-to-face appointments or walk-in services can be accessed

Does it state how face-to-face appointments or walk-in services can be accessed, including the triage process?	Yes Responses	%
Rushcliffe	12	100%
Broxtowe	11	100%
Nottingham City	45	95.7%
Mansfield and Ashfield	23	88.5%
Gedling	15	78.9%
Bassetlaw	10	62.5%
Newark and Sherwood	8	61.5%

Table 8: source 'Yes' responses from GP websites (n=124)



GP practices in Rushcliffe (n=12) and Broxtowe (n=11) advised in 100% of cases on their website how face-to-face appointments or walk-in services could be accessed, including an explanation of the triage process. The percentage was slightly lower in Nottingham City, 95.7% (n=45), followed by Mansfield and Ashfield, 88.5% (n=23), and Gedling, 78.9% (n=15). The lowest percentages of practices stating how face-to-face appointments or walk-in services could be accessed were in Bassetlaw, 62.5% (n=10), and Newark and Sherwood, 61.5% (n=8).

GP surgeries in Rushcliffe and Broxtowe had a clear offer of face-to-face appointments, explaining in 100% of cases how services could be accessed. However, in Gedling, also a less deprived area, the proportion of surgeries providing this information dropped to 78.9%. In more deprived areas, a lower proportion of surgeries provided the information on their websites, apart from Nottingham City, where it was provided in over 95% of practices. These findings show that, in most cases, GP surgery websites in more deprived areas did not have the same levels of information as those in less deprived areas. Given that people living in more deprived areas are less likely to report positive experiences of accessing a GP practice^{4,5}, it is particularly important that GP surgeries in these areas provide information that is clear and accessible to everyone.



We have interpreted the findings in line with NHSE guidance and have looked into whether GP practices provided information on their website about:

- How to contact the GP and ask for help.
- How face-to-face or walk-in services could be accessed.

We also looked at whether the practices provided information and guidance on Covid-19, and compared the information provided on GP websites in the most and the least deprived areas.

All GP practices provided a telephone number as a minimum. Online appointments could not always be booked, particularly at the surgeries that implemented a strict telephone triage system. It is a cause for concern that only 18.1% of GP websites stated that appointments could be booked at reception, since this is vital for ensuring that patients who lack access to telephones or other devices are not disadvantaged in their ability to access care. Whilst this does not automatically imply that the other GP practices would prevent patients from booking appointments at reception, websites should make the information clear.

It is especially concerning that some practices advised patients not to go into the surgery unless they had an appointment or had been asked to do so. This could potentially contradict NHSE guidance, unfairly disadvantaging some people and affecting equality of access, particularly for those who are at a high risk of health inequalities. Further research would be needed in order to draw conclusions as to whether GP practices that did not state on their website that they were open for patients wishing to book appointments in person would actually turn such patients away.

Most surgeries (91.0%) had a clear offer of face-to-face appointments, 86.1% of these providing clear guidance on how face-to-face appointments or walk-in services could be accessed. The limitations of the present desk-top study make it difficult to draw conclusions as to whether or not GP surgeries provided face-to-face appointments in those cases where the offer was not clear on the website. The lack of such information on surgery websites may potentially contradict NHSE guidance, as well as not helping patients who may be confused over what they need to do to access an appointment.

It is important to acknowledge the possibility that some GP practice websites may have been out of date and may therefore not have included information that was in line with the guidance at the time. Our findings underline the importance of keeping the websites current and of ensuring that clear and accessible information is provided for patients.

In some cases, differences in the information provided by GP websites in the most and the least deprived areas were evident. For instance, most GP websites in the least deprived areas provided clearer information on the offer of and access to face-to-face appointments than those practices in the more deprived areas. GP surgery websites in the least deprived areas were also more likely to state that individuals could book appointments at reception. These findings are particularly important, since people in more deprived areas have most difficulty in accessing appointments⁴. The lack of information provided by GP websites might therefore present an additional barrier.



Recommendations

Healthwatch recommends that GP Practices include on their website the following information:

- The ability to book an appointment at the practice reception in person
- The ability to have face-to-face appointments
- Detailed information explaining the triage system and the appointment booking process, indicating clearly whether the patient would need to be triaged by a receptionist or clinician before obtaining a face-to-face appointment if required
- Guidance on Infection Prevention and Control (IPC)
- Up to date information in line with current NHSE operating procedures

The Clinical Commissioning Group (CCG) should promote these recommendations to all GP surgeries.



Endnotes

1. 1 UPDATED STANDARD OPERATING PROCEDURE (SOP) TO SUPPORT RESTORATION OF GENERAL PRACTICE SERVICES. Published on 13 May 2021 by NHS England. Available at: <https://www.england.nhs.uk/wp-content/uploads/2021/05/B0497-GP-access-letter-May-2021-FINAL.pdf>
2. UK Health Security Agency, 2022. *Infection prevention and control for seasonal respiratory infections in health and care settings (including SARS-CoV-2) for winter 2021 to 2022.*
3. Office for Health Improvements and Disparities. Local Authority Health Profiles: Districts & UAs in East Midlands region (2019/20).
4. The Health Foundation, 2020. *Who gets in? What does the 2020 GP patient survey tell us about access to general practice?* Available at: <https://www.health.org.uk/news-and-comment/charts-and-infographics/who-gets-in>
5. The National Centre for Social Research, 2019. *Emergency care: What do attitudes tell us about demand for services and how it might be reduced?* British Social Attitudes: The 36th Report.

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