



What people have told us about GP practices in Suffolk

A review of our evidence – April 2022 to September 2022

This report

Our insights on GP access in Suffolk

Healthwatch Suffolk (HWS) has the role to record people's experiences of using local health and social care services. Experiences are gathered using a range of methods, including bespoke research projects, face-to-face engagement in communities and using digital tools (such as the Healthwatch Suffolk Feedback Centre, accessible from its website).

This report brings together the feedback HWS has captured relevant to local GP provision since April 2022. Data from three key sources are included:

- **The Feedback Centre** – More than 900 comments have been recorded to the Healthwatch Suffolk Feedback Centre within the reporting period (1st April to 22nd September 2022). Explore some of the themes identified within the feedback.

Read more from page three.

- **The HWS Community Development Team** – The team visits the majority of GP practices in Suffolk to engage with patients, and to provide regular feedback to local practices. In this report, our team shares a summary of what they see as the biggest challenges people have faced with accessing primary care in Suffolk. They also explore people's perceptions of access to services in local communities.

Read more from page thirteen.

- **Your Care, Your Way** – An ongoing engagement campaign that aims to explore people's experiences of accessible information and support from local services. In this report, you can explore some of the findings of the YCYW survey, and examples of feedback we have logged about people's experiences.

Read more from page fifteen.

- **My Health, Our Future** – A programme of work exploring the mental health and emotional wellbeing of young people in Suffolk. In this report, you can learn more about what young people over the age of 16 told us about their experiences of mental health support from GP practices in the 2022 survey.

Read more from page seventeen.

The information within this report is intended to offer a general overview of some of the issues (both positive and negative) local people have raised about GP practices in Suffolk. A more detailed analysis can be generated upon request, and for specific purposes.

This report does not seek to compare or contrast the performance of individual GP practices. Feedback about individual services can be found by searching for the relevant survey listings on www.healthwatchsuffolk.co.uk/services. All providers of services have the opportunity to reply to feedback left by patients, service users and carers, and to have those replies published alongside the feedback.

More information about us, and how we work with GP practices across Suffolk can be found from page nineteen.

Feedback Centre

Overview

What follows is a high-level summary of the feedback recorded on the HWS Feedback Centre (www.healthwatchsuffolk.co.uk/services) about GP practices in Suffolk.

The following information is intended to offer a general overview of some of the issues (both positive and negative) local people have raised about GP practices in Suffolk. This report does not seek to compare or contrast the performance of specific GP practices. Comments were considered if they were received within the period 1st April 2022 to 22nd September 2022.

- **Nine hundred and twenty-seven** comments were recorded within the period about **66** local practices. **Fifty per cent** of the comments are positive, **4%** are neutral and **26%** are negative in sentiment.
- The overall average star rating for GP practices in Suffolk is 3.8 stars out of a possible five stars. This represents an increase in ratings from 2.9 stars in a previous report to the Suffolk Health Scrutiny Committee (based on the period September 2020 to August 2021).

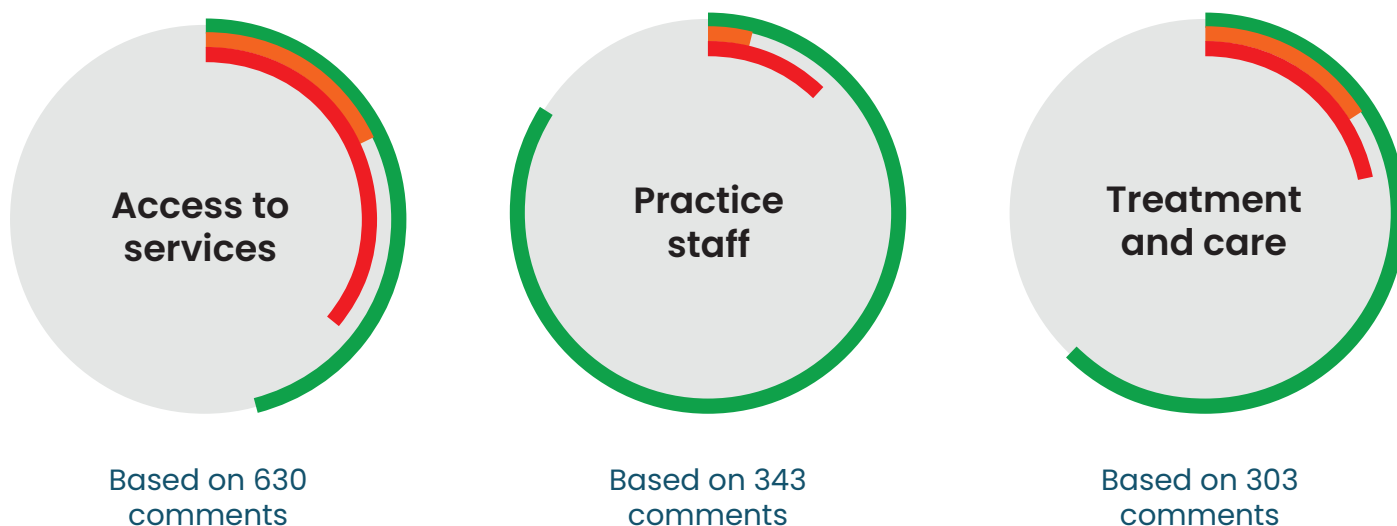
Some theme headlines

- Many people have been entirely positive about the service provided by their local practice, but the highest levels of positivity tend to be localised to specific practices and communities.
- Interactions with clinical staff are mostly positive, but people continue to highlight concerns about their interaction with reception staff. This includes people feeling that staff can be abrupt, rude or dismissive of their enquiries.
- Access to services remains a concern within many communities, but this is not true of the services provided by all local practices. Sentiment about access in general can vary from as low as below 10% positivity to more than 90% positivity from practice to practice.
- Some perceive that problems with access have had consequences for their health, or the health of people they love or care for.
- Digital access to services is viewed as both an enabler of, or barrier to, accessing help and support. Some people have been excluded from accessing services through lack of digital skill or confidence. In general, people are much more likely to be negative about digital access where they feel practices are too reliant on digital systems (defined as forced digital access).
- Despite the availability of online systems, a number of comments highlight that some people prefer to contact practices by other means, or to use a blended approach.
- People are most positive about care navigation where triage is conducted by a clinician (e.g., GP call backs). A number of comments express that people have been navigated to the right clinician for their needs, but people are also sceptical about the motivation for triage processes (e.g., that it is used as a means to prevent people from accessing care).

Theme analysis

The graphics below show the top themes identified in feedback about GP practices in Suffolk, and how positive, neutral or negative those comments were overall. The largest overall theme of 'Access to services', which is inclusive of more than 600 comments, is explored in more depth across the following pages.

Top three main themes – sentiment indicators



Theme table: Top main themes and sub-themes

Theme / Sub-theme	Description	Positive (%)	Neutral (%)	Negative (%)
Access to services	Comments referencing various aspects of service access.	46%	18%	36%
<i>Digital access</i>	Comments that make a reference to digital contact, or access, to GP practices.	61%	14%	25%
<i>Waiting / responsiveness</i>	Broad sub-theme inclusive of feedback about services accessibility (E.g. appointment availability, waiting times and other similar access issues).	57%	9%	34%
<i>Health impact</i>	A negative sub-theme inclusive of comments expressing that problems with service access have had consequences for people's condition.	0%	0%	100%
<i>Care navigation</i>	Comments that reference care navigation/triage processes in practices.	57%	4%	39%
<i>Clinician triage</i>	Comments referring to triage, or call backs, by practice clinicians.	87%	10%	3%
<i>Telephone contact</i>	Comments that reference telephone contact with GP practices.	19%	12%	69%

<i>Access times / convenience</i>	Generally negative feedback about access times to services and advice, and also travel to practice sites.	3%	0%	97%
Staff	Comments that make a reference to interactions with practice staff and clinicians.	84%	4%	12%
<i>Attitudes</i>	Comments that make a reference to the attitude of staff as perceived by people accessing services.	79%	3%	18%
<i>Clinical staff</i>	Comments that make a reference to clinical staff (e.g., nurses, paramedics and GPs).	89%	2%	9%
<i>Reception</i>	Comments about practice reception staff.	55%	6%	39%
<i>All staff</i>	Non-specific references to staff working in GP practices.	98%	1%	1%
<i>General</i>	General, non-specific, comments about practice staff.	96%	2%	2%
<i>Clinical care</i>	References to the approach of staff to the delivery of clinical care.	84%	3%	13%
Treatment and care	Comments that make a reference to the treatment and care people have received from their GP practice.	63%	16%	22%
<i>Expectation</i>	A broad sub-theme indicative of whether or not treatment and care from practices aligned with people's expectations of services.	72%	9%	20%
<i>Involvement in treatment</i>	Comments that express something about the extent to which people have felt involved in their own treatment and care.	65%	0%	35%
<i>Time to care</i>	References to whether or not people felt clinicians allowed sufficient time for their treatment or care.	75%	9%	19%
<i>Carer involvement</i>	Comments that express something about the extent to which carers have felt involved in the treatment and care of their loved ones.	33%	0%	67%
Information and advice	Feedback that makes a reference to information or advice from local practices.	29%	16%	55%
Pharmaceutical	Broad theme inclusive of comments about pharmaceutical services and medication management by practices.	34%	33%	33%
Facilities and surroundings	Comments about practice facilities and buildings, including car parking, clinical environments and similar references.	31%	40%	29%

Access to services – Seeing the appropriate practice team member

The HWS Feedback Centre asks people about whether they felt their appointment had been with a clinician appropriate for their needs. There were 396 responses to these additional fields. Two hundred and ninety-eight (75%) commentators felt their appointment had been with an appropriate member of the practice team. Forty-two (10%) were not sure, and 56 (14%) felt they had not seen the right professional for their needs.

Some people offered an opinion as to why they felt they had not seen the right member of the practice team. The table below includes the top themes identified in their feedback.

Theme / Sub-theme	Description	Comments
No Access	Comments expressing that people had not been able to access their local practice, and had not seen any clinician.	28 (41%)
Not clear	Comments that were unclear about why the person felt they had not seen the right clinician for their needs.	13 (9%)
GP access	Comments from people who felt they needed to see a GP, but had not been able to.	8 (12%)
Disagreement	Comments that express the individual has had some form of disagreement with a member of the practice team.	5 (7%)
Continuity	Comments about continuity of care with practice staff (having a named GP).	3 (4%)

One person expressed that they had wanted a face-to-face appointment, but had not been able to obtain one. Another person felt they needed to access a site closer to their home.

Deep dive – access to services (main theme)

Access to services remains a concern for many. However, there has been some improvement to the overall sentiment of feedback since a previous report by HWS to the Suffolk Health Scrutiny Committee in December 2021 (from 65% negativity about 'access' issues in December 2021 to 36% negativity in the present reporting period).

Many people have made highly positive comments about their local practice. In many cases, people felt they could access services easily, and some expressed that they usually had access to a clinician of their choice (or a clinician appropriate for their needs). Feedback included:

"I've only just joined the practice but I've found this appointment easy to get after speaking to the GP on the phone. I've had a face-to-face appointment and I'm very pleased with everything so far."

"The whole surgery have been superb for my own health and care and that of another member of the family who has been given amazing mental health support, for which we are so grateful. I called this morning and I've been given an appointment with in hours of speaking to them."

Despite the overall shift in sentiment, there remains a significant amount of variation in people's experiences, and it is clear many people were concerned about their access to local practices. Negative sentiment about 'access' can vary as much as between more than 90% of comments and less than 10% of comments from practice to practice. This means that residents

in some parts of Suffolk appear much less likely to feel confident that they can access the care and support they need than residents in other parts of the county. It is important to note here that the quantity of feedback recorded about practices is not consistent, and can vary as much as between one comment and 99 comments.

In some cases (24 comments), people perceived that problems with access to services had a detrimental impact on the health of the commentator, or those they were supporting (e.g., a family member). Several people had sought a diagnosis from elsewhere (e.g., A&E because they had been unable to obtain a timely response from their local practice.

"I had a fall recently at home and tried to get an appointment to see a GP but was given a phone call instead and was told it wasn't necessary to be seen. When a neighbour saw me they suggested to call again due to the severity of the bruising and swelling I had on my wrist. Again I spoke to the GP but was only given a face-to-face appointment in another four days. The neighbour was so concerned they took me in to A&E and following an x-ray I was told I had a fractured wrist. It's very concerning that even though I tried to get seen by a GP they wouldn't see me."

"I asked for a face-to-face appointment with a doctor a number of times over a couple of months but was told it wasn't necessary, finally I did get to see someone and was sent straight to A&E with a potentially life-threatening issue."

"I contacted the surgery multiple times but was told I didn't need to be seen. Eventually I was sent for blood tests at West Suffolk Hospital. I was called by the surgery the same morning to go straight back to hospital as I was very unwell and needed further treatment. If I'd been able to get to see someone earlier I would've been treated and properly diagnosed."

Chart one below shows how negative sentiment varied across 64 local practices (each bar is representative of a GP practice in Suffolk). It is important to note that the volume of comments about 'access' can vary a great deal between the practices (between one comment and more than 90 comments). As such, this graphic should be interpreted with some degree of caution.

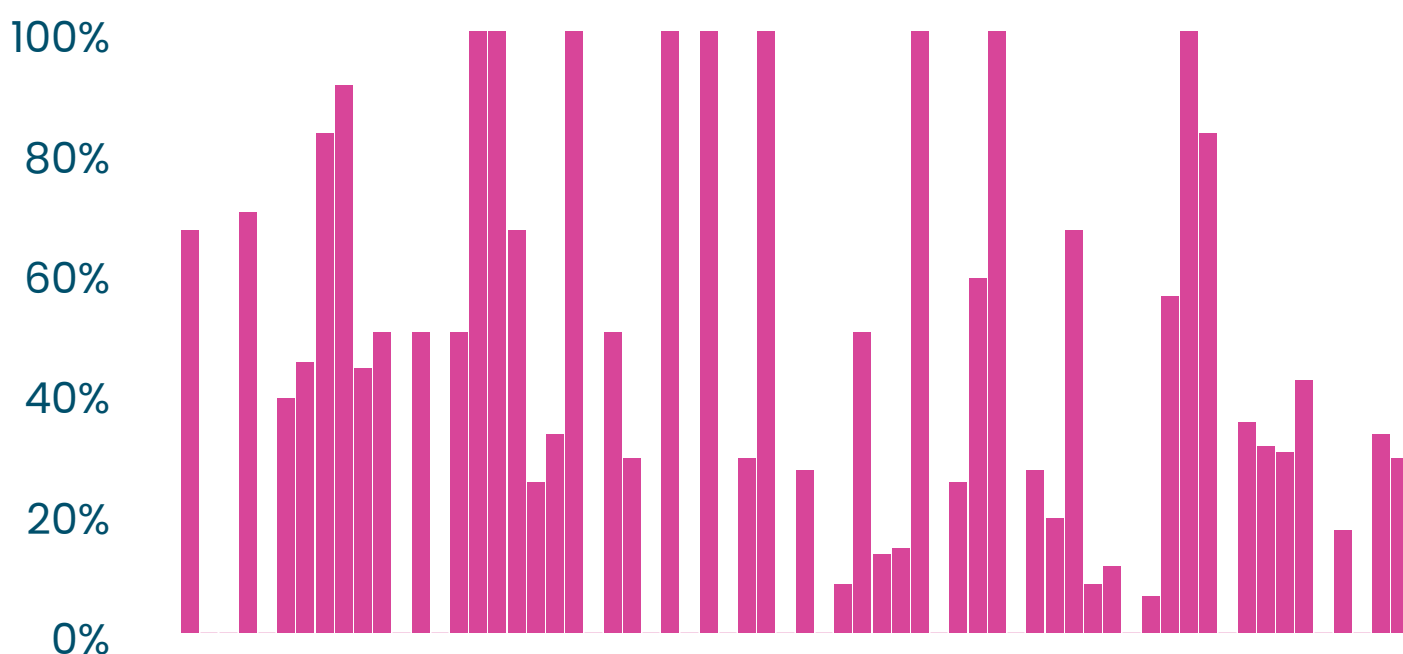


Chart one: Indicated negativity about 'Access to services) across all practices.

Further evidence of variation can be found when only the comments from 27 practices that received more than 10 comments about their services are considered. Combined, the reviews

about these practices made up 80% of the total feedback. Sentiment analysis of comments about 'access' across these practices revealed that 16 received feedback that was at least 50% positive overall. The feedback about the remaining 11 practices fell below this threshold, with levels of positive sentiment about 'access' varying from just 5% to 42% of comments overall.

Deep dive - access to services (sub-themes)

Several sub-themes were evident within comments about service access. Some of the top sub-themes are outlined in the text below, including examples of the feedback attributed to them.

Digital access to services

One hundred and sixty-four comments (26%) made a reference to digital means of accessing services. Of these, 100 (61%) were negative, 23 (14%) were neutral and 41 (25%) were positive.

In general, digital service offers were perceived as both an enabler of, and a barrier to, service access. Negative comments tended to highlight how forced digital access (e.g., because of rigidity in appointment systems) has prevented people from being able to access the help they need. They are also inclusive of feedback about difficulty with the function of specific systems (e.g., dislike of the questions asked by triage systems, availability of systems etc.), a perceived over-reliance on telephone contact with patients, and other similar issues. Some people expressed concerns that the reliance on digital means of accessing services causes them to worry in the event that they may need to obtain an urgent response from their practice.

Several comments highlighted concerns about digital exclusion through lack of skill or confidence to use online services. These comments (relatively few in number) expressed frustration that people have needed to rely upon family members to communicate with services on their behalf, or that people abandoned their attempts to contact practices because they had found digital systems too challenging to navigate.

Negative comments about digital access include:

"While standing in Pinewood reception this morning was told to go home and make a phone call to the surgery or use Ask My GP to make an appointment for annual review. Went home and phoned, answer message says taking urgent calls only. Tried Ask My GP website, which says UNAVAILABLE FOR ONLINE REQUESTS! Ridiculous!"

"Even when I've said I don't have online access and can't use eConsult there is pressure applied to get a family member or friend to do it as that is the way to get appointments. I find this very upsetting when I need an appointment, I shouldn't have to ask people and tell them what is wrong with me if I need an appointment. There's little flexibility, you're just expected to do what they want you to do. Although I don't like the system I have so far been able to get appointments when I've needed them by having to rely on family. I've tried calling the surgery and they just say go online."

"I find access difficult due to the emphasis on using the online system. I don't go online so the only way I can access an appointment is to get a family member to do the form for me which I don't think is right. I shouldn't have to rely on my sister to do it there should be an alternative for people who don't go online. It's also a dis-empowering system and it's not always appropriate for me to ask my sister to do it, there are some issues I do not want to discuss with her. Even though I do not like the system in place the care provided by the staff is very good."

"I went onto the GP's website, to be told there that I needed to go to the eConsult website. I duly went to that website, only to be told it was closed and to go to my GP's website! We

are told not to phone, so how are we supposed to contact them? I gave up in the end after going backwards and forwards between the two, thinking it was something I was doing wrong. I've since found out quite a few others have had the same experience. In the past I've always been perfectly happy with their service."

"It is now impossible to book an appointment. The practice expects the patient to take a day off work, apply online and cross their fingers that they get a response the same day. If they don't respond, which is normal the patient has lost a day's wages and has to play the pay/health lottery another day, after saving up a bit more."

Whilst digital access to services has proven to be a barrier for some, others appreciated the flexibility they offered, and have praised the responsiveness of practices to enquiries. Positive comments about digital access to services include:

"eConsult has made access a lot easier as you get seen quickly and don't have to spend time on the phone. I did one first thing this morning, spoke to a GP and have been given an appointment before lunch. I find it a much better way of getting an appointment, works so well and I'm happy that you get the call and are offered an appointment when it's needed."

"Ask My GP works really well to get appointments, really effective as you get to see the most suitable person. The staff are polite and helpful and it all seems to run very smoothly and its easy to access appointments when I need them."

"The system works really well for us. You get seen on the same day and I've found eConsult works very well and avoids calling the surgery. The staff are all great, really friendly and helpful."

Clinician triage and care navigation

One hundred and one comments made a reference to care navigation and clinician triage. Sixty-six (65%) were positive, six (6%) were neutral and 24 (24%) were negative. Differences in sentiment might be explained, in part, by the extent to which clinicians have been a part of the care navigation process. In general, comments that made a reference to care navigation involving a clinician (e.g., a call back from a doctor to triage for appointments) were positive in sentiment. In total, 30 comments specifically referred to clinician triage and 26 of them were positive about that contact. Examples of this feedback include:

"The triage process whereby you talk to a doctor first has worked really well today. I needed an emergency appointment so spoke with the GP and they gave me an appointment, so its worked really well. The doctors take the time to explain issues well when you're talking to them to which is great."

Negative comments about care navigation tended to express a dislike of needing to describe symptoms to administration staff, a perception that reception staff were 'gate-keepers' for practices, and views that practices were implementing triage to prevent access to appointments. Examples of negative comments about care navigation include:

"Attitude of receptionists make me feel that I am asking for a favour to access a clinician. It's clearly a gate keeping service."

"As already said, bring back booked appointments so you can plan your day ahead or get urgent appointments without having to wait for a doctor or nurse or go into massive details with an untrained medically receptionist."

"I've not had a face-to-face appointment with a GP for sometime and have been put off calling due to the procedures in place and the need to go through a triage process. In the past the staff have been great, I just need to get used to the new system."

"The phone lines in the morning are busy and by the time you get through there can be no appointments available. The process in place makes you feel that they don't particularly want to see you either and in the past I've been told to go straight to A&E rather than them seeing me. It would be good to have more parking spaces available, may be the area at the back could be cleared."

Responsiveness / Waiting for services

This sub-theme, inclusive of 256 items of feedback, is fairly broad. It is comprised of comments that made general references to the ease of access to appointments or services from practices, whether or not people were able to promptly obtain access to advice they had sought, how quickly practices responded to enquiries and references to waiting times more generally. Overall, 57% of comments attributed to this sub-theme were positive (147 comments), 34% were negative (87 comments) and 9% were neutral (22 comments).

Examples of negative comments include:

"Needed a doctor for my mum asap. Told they would come out after lunch but nothing, not even a call. In end I had to call 111 and get her to hospital as got worse."

"I tried to speak to a GP yesterday but was told nothing was available for a week which is worrying."

"Ring at 8am, wait in queue for 35 minutes only to be told all routine appointments have gone. Only day off work and have to call on the day. Now got to do it all again next week. I am a menopausal woman with fibromyalgia that manages to work but can't get an appointment, very unhelpful."

"Was asked to contact surgery re: medication review. I used Ask My GP. Email eventually sent back saying reception would be in contact to make an appointment. This was 10 days ago. Nobody has phoned or made contact."

Positive feedback within this sub-theme included references to prompt responses from services or clinicians, general references to being able to access appointments easily when people needed them, and efficient responses to online enquiries or triage. Examples of positive comments about responsiveness and waiting include:

"It's a very good surgery, everything is quick and easy and appointments are available with in a few hours of calling the surgery, so it's all great. I do my prescriptions online but tend to call the surgery to arrange appointments as I prefer to talk to someone about the options."

"The surgery have been brilliant with aftercare since I have had bilateral knee replacement surgery. They have made sure that they have responded quickly when I have sent a message asking for pain relief and seem genuinely interested in my progress."

"The new booking system was so quick and easy to use. I was contacted very quickly after submitting my request and seen just a couple of hours later."

Telephone lines

Telephone access remains a significant barrier for many, but not for all, patients contacting local practices. One hundred and thirty-five comments made a reference to practice telephone systems, of which 69% were negative, 12% were neutral and 19% were positive.

In total, 93 comments were negative about practice telephone systems. These comments expressed frustration at lengthy waits for calls to be answered, a lack of update as to the

position of the caller in the call queue, and how many people find appointments are no longer available by the time their call has been answered.

Examples of this type of feedback included:

"Rang surgery after ASK MY GP not available and was 21 in a queue – took over an hour to talk to reception, wife gave symptoms and was told no one could reply to her problem for a day and has tried to get a face-to-face appointment and they will let us know if it is possible . The service from this surgery leaves a lot to be desired at the moment."

"There are long waits on the phone to get through to reception in the morning and when you do get through I have been told there are no appointments available that day and call back tomorrow. I have seen the nurse and she has been very good, supportive and caring."

"As a busy parent I would like to know where you are in the queue. I can put the phone on speaker and do a few things if I know I have a good number of places to go. I don't mind that, but since they stopped that, I cannot get on as I am worried that someone is suddenly going to speak to me and I won't be quite ready."

Two people have expressed concern about the personal financial cost of extensive telephone contact with their practice (regardless of whether their call had been answered by the practice). Their comments include:

"My landline is that I get the first hour free then get charged. I ring into the surgery, wait and wait then you get down to 10 in the queue, but my hour of waiting is now up, what do I do? Hang up a restart or pay? Last time I stayed on it cost me £9. I cannot afford to do that every time I need medical assistance. I do not use the computer so telephone is my only option."

"I had my phone bill and the call to this place, that I received nothing from as I got cut off, was £13! Not everyone has free calls during the day as they cannot afford it, but now I cannot afford to access a service that I am supposed to have for free. It is worrying when my health is not great now."

Contacting practices by telephone has not been an entirely negative experience within some communities. Indeed, it is important to note that the criteria for what constitutes an unacceptably long call wait will vary from person to person, and may be influenced by other factors (e.g., work and family demands during the day).

In total, 23 comments were either entirely positive or neutral about telephone contact with local practices. Examples of this feedback include:

"I have found that this surgery has been adaptable through COVID, but still very accessible. You get through on the telephone reasonably quickly and if I think I need to come in, they are very amenable. I do not use online and have never been asked to use it instead of calling in."

"I've been very pleased with the care I've received from the surgery. Phone answered promptly, appointments available when I've need one including the option to speak to the doctor on the phone rather than visit the surgery. Each member of staff have been professional and friendly. I would highly recommend this surgery."

"We are happy here. The staff are friendly and approachable. When you ring in you get through quickly."

Access times and convenience

A number of comments (36) make negative references to this sub-theme.

For the most part, these comments were comprised of those who may struggle to travel to a practice site that is not local to them, or who have experienced challenges with access to services because other life commitments had prevented them from being able to connect with their practice. In some cases, people's care was delayed because they missed contact with their practice. Due to the rigidity of practice systems, this meant they needed to restart the process of requesting contact from a clinician.

Examples of feedback about access times and convenience include:

"Cannot ring at 8am when emergency on the day appointments are released as I am at work by then, after that it is too late. Cannot sit in a phone queue also due to job role, so when I can ring a bit later all available appointments have gone. Working full time it is difficult to get appointments at a convenient time as they are always booked up. Cannot book too far ahead either, but I suppose that stops over booking by people on a 'just in case' basis."

"It is very difficult to get convenient appointments for myself (as I work) and for my children (who attend school). This is particularly true for face-to-face appointments which can only be booked in the morning at a time when we are heading out to work/school. Waiting in the phone queue would make us late for school/work. It would then be difficult to arrange to get to a face-to-face appointment during work/school hours."

"It's very busy when you call the surgery first thing, and I often try to call a bit later on. The surgery have offered to get a translator in should I need it, and for more serious issues I would do this. I do find the call backs a bit difficult, I missed one call back as I was driving and when I called straight back I was told I would need to call again the next day, this seems a little unfair."

"I would advise patients not to rely on this practice's use of telephone consultations, that is unless you have nothing better to do than wait by the phone all day. Some of us have to work and fit appointments around it but as far as this practice is concerned, that's not an option. In my case the GP never did call in the morning as promised and by the time he/she did I was at work and couldn't take call - as they knew ahead of time. It means not being able to renew my prescription and having to wait until another appointment's available at least a few weeks away. Of course they're busy and need to prioritise urgent cases but if they can't call in the booked time slot then at least have the courtesy to send a text message or email or a quick call from the admin team to say they're running late and give us options to either rebook or wait instead of being kept in suspense all day. We are human beings, not numbers!"

In the community

Our Community Development Team

Our team visit local practices across Suffolk to engage with people about their experiences of using services.

Whilst attending a local practice, the team will support the service to communicate with patients about important issues and help people to understand more about how their local practice is working to deliver its services.

Following their visits, the team provides a summary of patient feedback to practice managers for service improvement and records the feedback onto our Feedback Centre. This, combined with direct digital feedback, helps to ensure HWS service listings offer a balanced perspective as to people's current experiences of the services.

The team has highlighted the following observations from their engagement work with local practices.

Access to services

- Despite the offer of digital access to services, many older residents express a preference to interact with their local practice by telephone.
- The queues on practice phone lines are both frustrating and off-putting for patients. A number of people express that their loved ones avoid contact with practices because they do not believe that they will be able to be seen face-to-face, and the processes in place to access appointments are seen as a rigmarole. Some people have told us that the financial cost of calling their practice is prohibitive, especially for those who do not have free minutes, and who may be using 'pay as you go'.
- The lack of a callback time for contact with practices can be particularly difficult for those who are working, and who cannot receive calls at all times of the day.
- Engagement with practices has highlighted how the majority of surgeries are highlighting capacity issues for various reasons (e.g., sickness, staff retention and patient demand). Some practices continue to voice concerns about abuse from patients, with one practice sharing that reception staff recruitment had been like a 'revolving door' for this reason.
- Most people who seek continuity with the same GP for their condition report waits of four weeks or longer for appointments.
- Some people report particularly poor experiences that have had consequences for their health, or other aspects of their lives. For example, recently we spoke with the family of a young person who was about to leave for university. They have disabilities, and require the input of their GP practice to complete specific paperwork affecting important ongoing support for the young person at university. Despite starting the process a period of months before they needed to leave, and receiving confirmation that the forms would be completed, the practice failed to complete the necessary documentation. Eventually, the family was told the GP would not be completing the forms, and no explanation was provided. This has delayed supported for the young person by a number of months.

Patient expectation matters

- People still frequently express that face-to-face contact with clinicians is best, and many would prefer that their consultations are not completed over the phone (in case things are missed). Some people have raised concerns that over-reliance on remote consultation has meant people have faced consequences for their health (e.g., through misdiagnosis or missed symptoms etc.).
- Sometimes, people will express the view that they cannot get an appointment, even if telephone consultations with practice staff have addressed their concerns.
- Perceptions of care navigation vary, but it is common for people to dislike the involvement of administration staff in the process. Sometimes, people perceive this as reception staff, or navigators, making clinical judgements that they are not qualified to make.
- Practices perceived by the public to have closed their doors during the pandemic appear to receive more negative feedback about their face-to-face appointments now.
- There is a general perception amongst patients that doctors are less willing to see people now in person. It is quite common for people to express frustration at being kept at 'arms-length' by practices, or that nursing staff will see people but the GPs will not. This is most likely a reflection of frustration at triage processes, because we know that comments about clinical staff are generally very positive once people have been able to access an appointment.
- People are often frustrated that timescales for contact in response to online enquiries are not fulfilled. It is common for people to express that they were promised a response within a day, but then have been unsure of what to do when that time has elapsed. Inadequate information about when to expect a call back, or further contact, can cause people to feel anxious about their wait because missed calls can mean needing to start the process of contact all over again, or delay the receipt of services.
- Waits for face-to-face contact with doctors, which can be weeks, are a concern in some communities. In one case, a patient shared how her uncle felt suddenly acutely unwell, and had chest pain. The response from the practice advised they would need to wait for at least five weeks for an appointment but that the person should visit their local pharmacy for a blood pressure check. The pharmacy directed them to the hospital immediately and, within a week, their uncle was having heart surgery.
- There is a noticeable drop in practice footfall. Most of the people we engage are attending for blood tests, or to the practice nurse. Practices that offer face-to-face appointments post care navigation have busier waiting rooms, whilst those who focus on the use of online triage systems such as eConsult or Ask My GP tend to have much quieter waiting rooms. Patients can perceive this as being contrary to messaging from practices about increased patient demand and low capacity.

Research



Your Care, Your Way

Your Care, Your Way (YCYW) is an ongoing Healthwatch campaign related to accessible information and support from local services.

Published in September 2022, the survey findings reveal that too often, local services are failing in their legal duty to consistently provide accessible information for people with physical and learning disabilities. This includes within primary care services, where awareness of service responsibilities under the Accessible Information Standard (AIS) can be mixed.

The AIS is a legal requirement that aims to ensure all publicly funded health and social care providers meet the information and communication needs of people who are d/Deaf, blind, or who have a learning disability. Despite the requirements, respondents with a condition influencing their ability to understand information from services highlighted some of the poorest experiences of accessing support:

- Thirty-two per cent said they 'rarely' or 'never' get the support they need from services
- Forty-three per cent had been refused support to understand healthcare information about them, even though they had asked for it
- Not being given information in the right format affected their mental health and wellbeing (39%), meant they missed out on important information about their health (29%) or that they could not contact a service they needed (36%)
- More than half said health and care staff attitudes affected their ability to ask for support
- Fifty per cent feel 'a bit' or 'very' uncomfortable about asking for accessible information from services

The survey also found that people commonly struggled to access GP, dental, mental health and hospital services as a result of communication problems. Fifty-nine per cent said they had struggled to access services from GP practices because of problems with communication. The following comment highlights the difficulties people can face when services do not adjust communication according to people's individual needs and preferences.

"Waiting half an hour on the phone to speak to someone is common and because I don't use online there is no other choice other than to phone. There is no choice other than to have a call back from a GP even if I can't hear what is being said well. I had a face to face appointment today with a GP where I explained how difficult I find speaking on the phone but my next appointment will be a phone call, no choice."

"I have asked the surgery to contact me by calling me, not texting me, as I find them confusing and I need to ask questions sometimes to that I fully understand what is being asked. But they still won't change it."

"Staff are good and explain everything to me but I do find speaking on the phone difficult at times as I struggle to hear."

"The surgery over the years has been excellent, with great staff. For me, the system in place works very well and I like that you can just have a phone call with a GP as it resolves the issues without the need to go in to the surgery. For my husband who is hard of hearing the phone triage really doesn't work and is preventing him contacting the surgery. Overall, the care provided by staff is very good."

"I have asked the surgery to contact me by calling me, not texting me, as I find them confusing and I need to ask questions sometimes to that I fully understand what is being asked. But they still won't change it."

However, it is clear some services have changed their approach, and this has been noted by people accessing their services.

"Healthwatch Suffolk's project 'Your Care, Your Way' had improved service for the Deaf patients like myself. Communication needs were requested and highlighted on the system whenever a requests for appointments were made, and British Sign Language interpreters were arranged for appointments without patients having to request for one. Communication & appointments can now be made by mobile phone text messaging."



My Health, Our Future

My Health, Our Future is an extensive programme of research exploring the mental health and emotional wellbeing of children and young people in Suffolk. To date, more than 43,000 responses have been gathered from young people across MHoF surveys.

In 2022, the survey asked young people to rate their experience of mental health support from various statutory and voluntary, community and social enterprise (VCSE) services.

In total, 303 young people over the age of 16 rated their experience (out of five stars) of mental health support from their GP. In total, 22% rated their support from practices as being one star (very poor), 24% gave a two star rating, 29% rated their practice as three stars, 14% rated their practice as four stars and 12% rated their practice as providing five star support (very good).

In addition, a free text box was included in the survey. It asked young people to explain what was good or bad about their experience of using services. Some young people chose to comment about their experience at GP practices, highlighting an impression that young people feel services can be dismissive of their concerns, or that clinicians do not always approach their care with understanding.

Feedback

"GP was okay with their approach but the appointment just ended up being the GP preaching about how life is worth it, and how I shouldn't be ruining such a young and healthy body. This didn't really help."

"GP has been fantastic, and empathetic, and I haven't had to wait for an appointment. However they are limited on what they can do, and have to rely on other services that are less accommodating."

"The doctor was able to help me realise I was suffering from anxiety and I was able to tell the high school who helped."

"I phoned my local GP he asked uncomfortable questions with a blank bored tone. Made me feel alone and like nobody cares. Just sent me through a self referral and left it there after two mins on the phone."

"GP upped my anti-depressants and the college listened to me and referred me to the counsellor. Emotional Wellbeing Hub and Suffolk Wellbeing were awful. Didn't really listen, waiting times were too long and was not for my needs."

"GP just prescribed me with antidepressants without really talking or offering any other support."

"The doctor would barely listen and dismissed me with general exam anxiety even though the exams were not what I went to talk to them about."

"The GP was supportive in referring to diagnostic services and ongoing therapy with a child psychologist, which greatly helped with my development, self esteem and communication skill, also helping me understand my Asperger's."

"GP herself wasn't directly helpful and if anything tried to just deter me from my problems in a 'man up' sorta way but still gave me resources and places to seek help so overall 3 *."

About us

We are your health and social care champion.

If you use health services, or need social care, we want to learn about your experiences. We make sure NHS and social care leaders consider your feedback, and improve standards of care. We can also help you to find information and advice about local services and support.

For more information about us, or to feedback about your local services, please visit our website (www.healthwatchsuffolk.co.uk).

We want everyone to be a part of our work

This is our inclusivity statement:



Our differences are not always visible, and we embrace them all with respect and kindness. Healthwatch Suffolk wants everybody to feel equally valued, listened to, seen and heard.



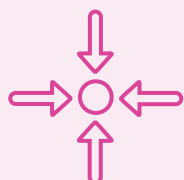
Developed in co-production, it is our promise to include everybody in our work. They're not just words – we take them seriously, in all aspects of what we do. From talking to people in communities, to planning our research, we strive to make sure no one is excluded from being a part of our work.

Our vision, mission and values



Our purpose is to...

Champion the views of local people to achieve excellent health and social care services in Suffolk.



We live and breathe...

Co-production in everything possible. We consistently aim to be inclusive, actively listening to our communities in transparent, accessible, accountable, responsive, and proactive ways. We are continually learning.

You can read more about our vision, mission, values and priorities in our strategy. Find it at www.healthwatchsuffolk.co.uk/about-us/ourstrategy.

Our support

How we can help local GP practices

Healthwatch Suffolk has a Community Development Team dedicated to engagement with local people about their local NHS and social care services. As a part of their role, the team visits local practices to talk to people about their experiences within all services. This is how their role supports local practices to hear from their community.

Since August 2021, after the easing of lockdown restrictions, the HWS team has returned to face-to-face engagement activities. The opportunity to visit local GP practices has varied according to facilities (e.g., the size of the waiting room) and surgery policy.

The HWS team has an ongoing offer of visits to all GP practices roughly every quarter. In advance of visits to local practices, the team contacts the Practice Manager to understand more about the challenges they may be facing, and to ask whether the practice needs support to communicate with patients about issues or key messages. The aim of each practice visit is:

- Provide information and signposting to patients about other sources of health, social care and wellbeing support (e.g., other services, community groups and websites etc.).
- To support practices to manage patient expectation by talking to patients about the challenges facing local services and helping people to understand more about how modern GP practices operate.
- To gather feedback from patients about their local practice and all other NHS and social care services. By engaging patients face-to-face, HWS staff can encourage people to make sure their feedback is constructive and that it can help their practice to make improvements and/or share with practice staff what's working well.
- To offset the apparent polarisation of people's shared experiences by gathering balanced feedback from those who have managed to obtain access to practice services as well as from those who may have struggled.

Following the visit, Practice Managers receive a summary of the experiences gathered so that they can address issues raised by patients wherever possible. Many practices report being able to make improvements to their services by responding to people's feedback collected in this way. The feedback, which is often positive, can also be used by practices to raise staff morale.

Other support available to local practices includes:

- Support for practices to engage, re-energise or focus Patient Participation Groups.
- Help and support to develop communications for patients regarding service change (e.g. practice mergers or closures), and to be a source of independent feedback to inform plans and strategies.
- HWS can support practices considering significant service change with communications activity, and by ensuring practices have an independent body to which patients can direct their feedback.

We will be making this report publicly available by publishing it on our website.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

If you require this report in an alternative format, or language, please contact us on 01449 703949 or by email to info@healthwatchsuffolk.co.uk

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