

# GP TELEPHONE APPOINTMENTS



## INTELLIGENCE REPORT

**Date: July 2025**



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### **Disclaimer**

Please note: This report is based upon feedback provided to Healthwatch North Lincolnshire from members of the public and professionals. The findings are based upon individuals' perceptions, which are not verified for factual accuracy.

Quotes in the report are written as received, to ensure opinions are kept in context, as such there may be grammatical errors within quotes.

# 1 Introduction

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## 1.1 About Us

We are the independent champion for people who use health and social care services. We exist to make sure that people are at the heart of care. We listen to what people like about services and what could be improved. We share their views with those with the power to make change happen. We also help people find the information they need about services in their area.

We have the power to make sure that people's voices are heard by the government and those running services. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them. Our sole purpose is to help make care better for people.

In summary Healthwatch is here to:

- Help people find out about local care.
- Listen to what people think of services.
- Help improve the quality of services by letting those running services and the government know what people want from care.
- Encourage people running services to involve people in changes to care.

## 2 Background

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### 2.1 Why this subject?

Healthwatch North Lincolnshire received feedback that GP Telephone appointments were inaccessible for the people of North Lincolnshire. Many people were missing appointments due to poor timing of the appointments and often having to wait a long time for a new appointment or receiving warnings of dismissal from the GP surgery should appointments be missed in the future. This led to the GP Telephone appointments survey being produced and distributed to the local community. We wanted to find out whether these cases were isolated or if there were more people experiencing these issues.

### 2.2 Research

Healthwatch completed research based on the intelligence we had already received from the public.

### 2.3 Methodology

We produced a survey that was available online via the Healthwatch North Lincolnshire Website, via a scannable QR code and a printed paper version. Healthwatch Freepost envelopes were also provided to participants, receiving a paper copy, so that they could post back their completed surveys; this ensured people could remain anonymous if they wished to do so. Wherever possible, surveys were also handed out during regular engagement sessions at: Scunthorpe General Hospital, Central Library, The Arc and Ironstone Centre. We also made the survey available to the public at Barton Carnival, the Stroke Association Group, Kirton GP Surgery and Dementia Awareness Week engagements.

The survey ran from the middle of April until the end of June 2025, and we received a total of forty survey responses. We have examined the results, and the key findings are provided in this report. Responses from the public and professional surveys have been analysed and highlighted over the following pages.

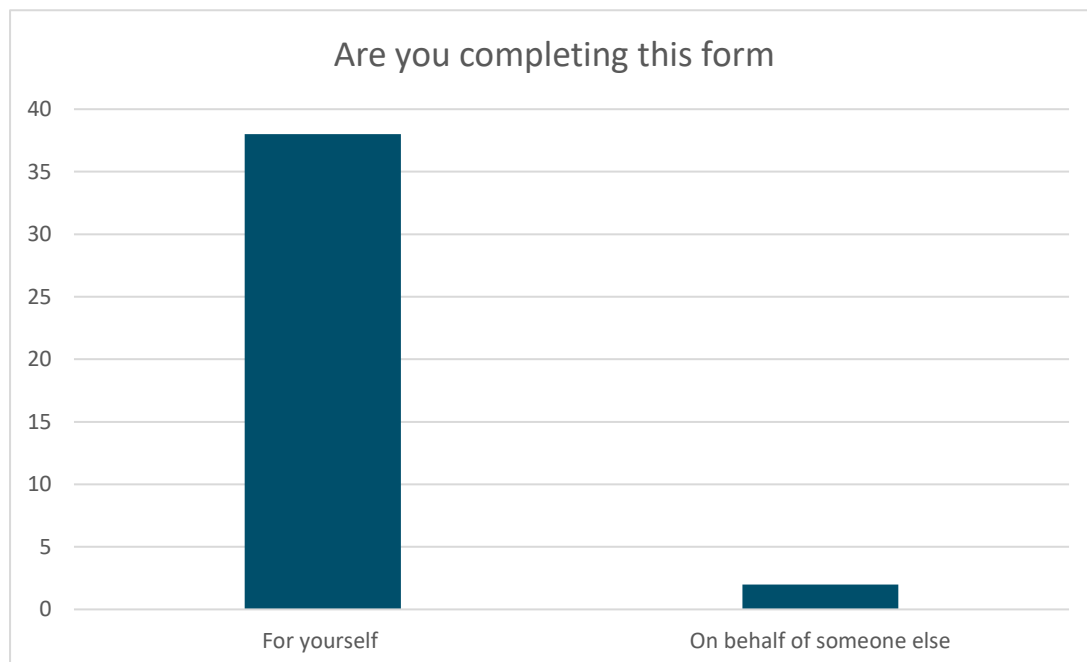
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### **3. Key Findings:**

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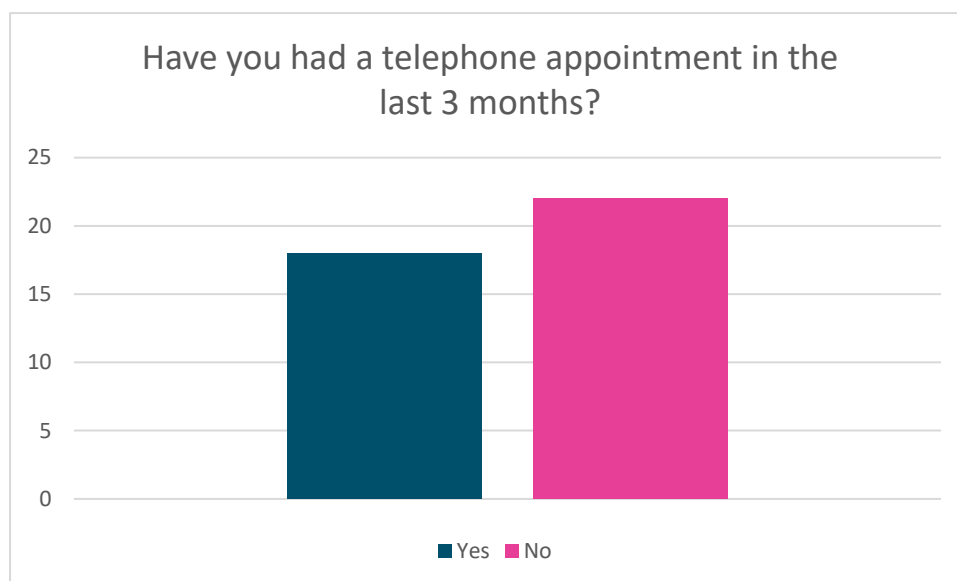
#### **Responses from the Public Survey:**

We asked people to state whether they were completing the survey: for themselves or on behalf of someone else.



#### **Frequency of appointments:**

We asked this question to find out if people were accessing GP telephone appointments.



### Please tell us your experience:

We asked individuals to tell us their experience of having a telephone appointment if it has been in the last 3 months, overall there were mixed experiences:

#### Neutral Feedback

- "It was fine."
- "This time the call was on time and the person actually listened."
- "The call was late, and I was driving so had to stop however, the call answered all the questions, so it was relevant."
- "The call was straightforward given that the GP knows my issues and I was requesting a prescription I have had before. GP prescribed me the medication and advised a face-to-face appointment should my symptoms not be resolved."
- "I think it is ok to receive test results over the phone however it can be difficult to hear due to some doctors' accents."

#### Negative Feedback

- “Poor experience.”
- I had to wait a week for a telephone appointment then another week for a face-to-face appointment – it is not good.”
- “Not great – the GP was not able to give me any medication so had to wait another week or 2 for a face-to-face appointment.”
- “I felt worse when I finished the telephone appointment than when I started. The way I was spoken to made me feel like a child.”
- “I could hear all the information, but GP failed to update my notes. I feel I did not get the outcome I wanted.”
- “It was terrible – I had to wait nearly 2 weeks for a call.”
- “I requested the nurse call our landline as our mobile signal is unreliable, we had no phone call at the time it was due, so I called back and was told we had missed the call, and they had rung the mobile. Had to wait another 5 hours for the nurse to call us back just to tell us there were no more appointments until the following week.”
- “Had to wait too long for an appointment, even just a telephone one – not good to be left waiting especially when feeling very ill.”
- “Never ring when they say – How can GPs determine a physical problem over the phone? I had an appointment for neck pain and was fobbed off with pain killers despite having an ongoing, severe condition.”
- “Call was on time, but the GP made me feel rushed and like he was not listening to my symptoms properly. It felt like he very quickly diagnosed me and then wanted rid of me.”

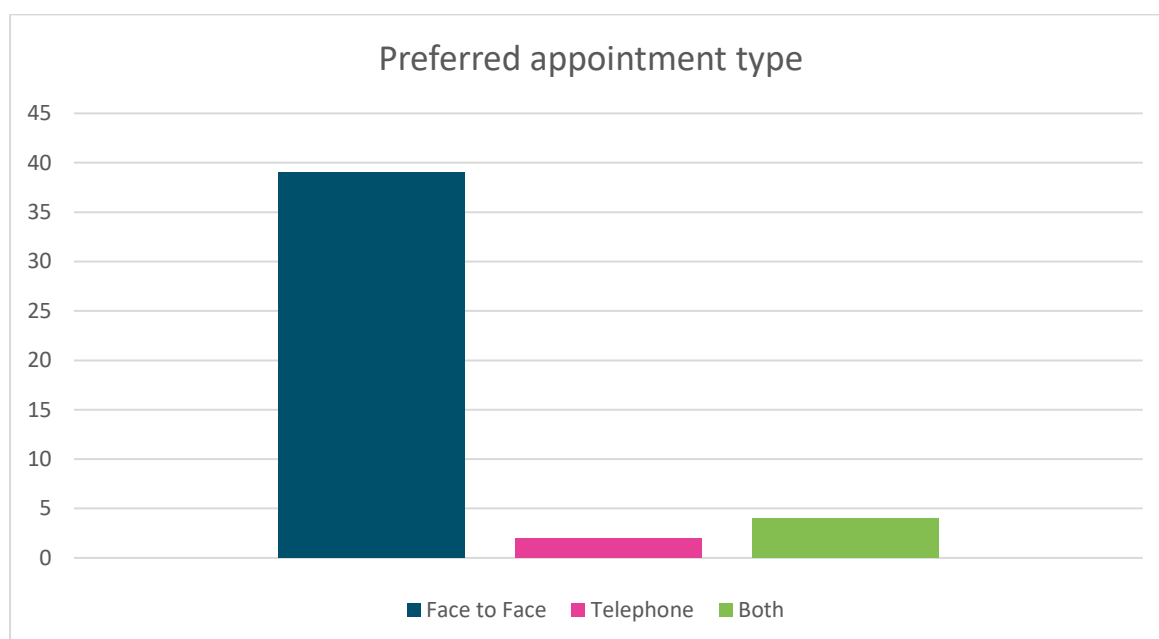
## How long were you waiting?

We asked individuals to state how long they had to wait for a new appointment if they missed their original telephone appointment.

- “I got a call back the same day as the call was too early, so I complained as it was not my fault I missed it.”
- “Had to wait 5 hours for a call back just to be told there were no appointments available until the following week.”
- “I had to wait 3-7 weeks for another appointment.”
- “Haven’t missed one but I have taken the call hours after the time they said they would call.”
- “My GP calls back the same day.”

## Which is your preferred appointment type?

We asked the public to state which type of appointment they preferred and why:



Most people preferred face to face appointments, their reasons for this can be split into two themes: communication and diagnosis.



Communication:

- “Easier to talk face to face.”
- “I am elderly and prefer to speak to someone in person.”
- “Can discuss more about symptoms when face to face.”
- “It is easier to express emotions as to what pains and troubles are when it’s in person.”
- “Face to face is more personal and explanations can be more detailed – less chance of wrong diagnosis.”
- “I prefer face to face as I need to see the person I am speaking to in order to process better what they are saying.”
- “Face to face feels more engaging and better to express concerns and given more time to ask questions.”
- “I feel less rushed with a face-to-face appointment.”
- “I believe when you are face to face you can understand better, sometimes the doctors have to say things again and again.”
- “Face to face is easier to explain or show symptoms rather than trying to explain over the phone.”
- “Face to face appointments is better because if you have symptoms which are difficult to describe, or you need support in your appointment it is near impossible to do over the phone.”
- “I feel more understood in person.”
- “I like face to face if I can get an appointment with my preferred GP.”
- “Easier to communicate needs and show symptoms in person.”
- “Face to face is more reassuring and personal, plus the doctor must be able to assess the patients’ symptoms more fully.”
- “I think it is easier to talk and explain when you are face to face”
- “I try to make an appointment only when I need one – with face-to-face appointments I feel like I am treated as a person and not as a decision tree.”
- “Phone appointment often feels rushed and unable to get across what you need to say. Made to feel fobbed off and uncared for.”

Diagnosis:

- “It is important for the health professionals to see you face to face as telephone appointments means they cannot see your physical symptoms.”
- “Face to face is better because a doctor can actually examine you.”
- “I can’t see how a phone call can see your problems – as for sending photos, absolute rubbish.”
- “Face to face enables you to check nothing is missed and/or not recorded.”
- “Face to face is better due to doctors being able to do a physical examination.”
- “Visual examination, better outcomes, proper opportunity to discuss the issue when appointment is face to face.”
- “Had problems with medication following a procedure and could not get in to see my GP which resulted in a hospital stay – the problems I needed sorting out, in my view, needed to be dealt with face to face.”
- “Face to face is better because a doctor can also be in the position to diagnose other issues.”
- “If an examination is required you are already there”
- “How can a diagnosis be made over the phone.”
- “I can explain to a doctor in person what the problem is and how to help me. I would find it better in person to get a more detailed diagnosis with my medical condition.”

Other:

- “Some appointments require a personal approach.”
- “I cannot think of any situation why a telephone appointment would be more beneficial than a face to face one.”

Some people were indifferent about having a face-to-face appointment.

Neutral:

- “I prefer face to face but happy with either.”

- “I like both an if I cannot get in to see the GP I will send pictures through the online link.”
- “I like either appointment as sometimes I have not required a face-to-face appointment.”
- “I don’t mind either way.”

Although they were generally indifferent about which type of appointment they had, three people still mentioned that it would depend upon what the appointment was for:

- “It really depends on what the appointment is for. I will opt for face to face if I feel it is necessary.”
- “Depending on what the medical issue I am happy to have either – I do think there are better outcomes from face-to-face appointments.”
- “It depends on what the problem is but both appointments are really good.”

One comment received showed a preference for telephone appointments:

- “I prefer telephone appointments as I only get offered face to face ones before 4pm and I don’t finish work until 4pm.”

### **Demographics:**

We gathered demographic data, and we found that the most common age range for responses was 50–64. We also found that more woman completed our survey with fewer responses from men and most participants had a long-term condition with fewer respondents having no disability or long-term condition.

## 4. Conclusion

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The results of the survey showed that overall people prefer face to face GP appointments rather than those carried out over the telephone. Generally, it was felt that face to face assessments would lead to a more accurate diagnosis. Some patients also felt that they had a greater understanding of their condition when speaking to their GP in person.

Interestingly some patients felt that the time waiting for their telephone appointment was too long. Two people also mentioned that having waited for their telephone appointment they then had to wait for a second time to be seen face to face as their issues could not be dealt with over the phone.

Whilst nobody within this survey commented on GP's threatening to dismiss them if they missed their appointment some people did say that they missed their appointment because the GP did not stick to the arranged time.

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## 5. Next Steps

This report will be published on our website and will inform future work on GP appointments.

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## 6. Acknowledgements

We would like to thank all organisations involved for distributing the survey and everyone who took part in the survey and provided us with information for the project.

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