Wiltshire Council

Health and Wellbeing Board

30 January 2020

Subject: What you told us about the GP Improved Access Service

Executive Summary

- I. Access to GP services has been as issue that has been reported to Healthwatch Wiltshire frequently as a concern from members of the general public. Because of this, primary care was made one of our priority areas in 2019.
- II. This report looks at access to GP services across Wiltshire with a focus on evaluating the Improved GP Access Service. This is a service that involves GP practices across Wiltshire working together to provide routine appointments for patients in the evenings and weekends.
- III. This project gathered information in three different ways: We visited GP surgeries across Wiltshire and interviewed 173 patients; we carried out a mystery shopping exercise calling 14 GP surgeries and; we distributed a survey for staff to gather their views which was completed by 85 staff members.

IV. What were the key findings

- Access to evening and weekend appointments are valued by patients.
- Overall there was a greater preference from patients for early morning or evening appointments as opposed to weekend ones.
- Most patients said that they would be happy to see a nurse, paramedic or pharmacist where appropriate. There seemed to be increased awareness and confidence in the triaging process.
- 60% of the people we spoke to said that they would be consider travelling to be seen at another surgery in some circumstances. However, there was concern that those who are unable to travel should not be disadvantaged.
- Improved access appointments were used and managed in a range of different ways by different surgeries.
- Surgery staff were not clear about what Improved Access appointments were available at other surgeries and some reported difficulties booking these.
- Staff thought that the Improved Access service had improved access for patients, but their views whether it was a good use of their time was more mixed.
- The people we spoke to reported high levels of satisfaction with the treatment they received at appointments.

V. Conclusions and recommendations

The report concludes that access to out of hours appointments is something that is valued by patients and should continue.

We make recommendations which mostly concern the implementation of the Improved Access Service and are based on the views of patients and staff.

Proposal(s)

It is recommended that the Board:

- i) Notes the key messages from the report.
- ii) Confirms its commitment to listening to the voice of local people to influence commissioning and service provision.

Reason for Proposal

Healthwatch Wiltshire has a statutory duty to listen to the voice of local people with regard to health and social care services and then feed this back to commissioners and providers to influence change. Healthwatch Wiltshire therefore ask the board to receive our latest report, make comment and reaffirm its commitment to listening to the voice of local people.

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Wiltshire Council

Health and Wellbeing Board

28 November 2019

Subject: What you told us about the GP Improved Access Service

Purpose of Report

 This report presents local people's views about access to GP appointments with a focus on access to evening and weekend routine appointments. We worked with the GP Alliance to evaluate the Improved GP Access Service, to hear how patients, GP's and other staff feel this is working, and to hear any suggestions they may have for further improvements.

Relevance to the Health and Wellbeing Strategy

2. The findings from this project fall into a number of the themes within the Health and Wellbeing Strategy.

Improved access to appointments within GP surgeries during the evening and weekend could enable people to maintain their own health for longer. Surgeries working together more closely also allows people to receive the care they need at a time and place that is suitable to them.

The views of local people shared in this report can influence improvements to the current service which could in turn lead to people being able to take more responsibility for their own health, maintaining their own health and improving their health outcomes in the future.

Background

- 3. Healthwatch Wiltshire regularly hears from many local people about primary care services. Whilst we heard many positive comments about the quality of treatment people received, getting an appointment has been reported to be an issue across Wiltshire. Because of this, primary care was made one of our priority areas in 2019.
- 4. In October 2018 a new "Improved Access Service" was commissioned by Wiltshire Clinical Commissioning Group and provided by the Wiltshire GP Alliance with the support of Wiltshire Health and Care. Under this scheme GP practices across Wiltshire are collaborating to provide routine appointments for patients in the evenings and weekends.
- 5. We were pleased to be invited to work with the GP Alliance to evaluate this service. We also used this opportunity to find out some other aspects of people opinions about accessing GP services.

- 6. This project had several elements which aimed to gather information in different ways:
 - Interviews with patients at GP surgeries

We designed a survey for patients attending GP appointments. We asked questions about their experience of making their appointment, and of their preferences about the time, location and the health professional they would like to see. We also designed a short follow up interview which aimed to gather information about how their appointment had gone.

We used this approach with the aim of gathering views from a typical sample of local people in Wiltshire who are using GP services. We aimed to complete most surveys as a one to one interview with patients as this provided opportunities to explore people's opinions further and to gain insights about the reasons behind people's views. Most patients completed the survey this way, but a small number completed the survey by themselves.

• Mystery shopping exercise

We carried out a mystery shopping exercise where we telephoned a further selection of rural and town GP surgeries across Wiltshire and asked about evening and weekend appointments. Our volunteers carried out this activity using a script that was the same for all surgeries. We called 14 different surgeries, making two phone calls to each surgery on different dates.

• Staff survey

We distributed a survey for staff which aimed to gather their views about the service. This survey was circulated electronically to staff in any role that was involved with Improved Access appointments. The questions covered their views about the impacts of the Improved Access Service both for themselves and for patients.

- 7. We found that patients attending appointments were very happy to speak to us and we completed a total of 173 interviews. 99 of these were with patients attending evening or weekend appointments and 74 were with patients attending appointments during the day.
- 8. We asked people to share some information about themselves with us. The demographics of those we spoke to was broadly typical of what we would expect to see for people attending GP services in Wiltshire. However, we were surprised that there was not more difference in the age ranges of people attending daytime appointments as compared to those attending evening and weekend appointments.

9. Volunteer Involvement

Healthwatch Wiltshire has a team of committed, trained volunteers. Our volunteers supported this project by attending surgeries and interviewing patients, calling surgeries to carry out mystery shopping, entering data and proof-reading the draft report. 11 volunteers contributed a total of 51 hours of their time.

Main Considerations

What did patients tell us in the interviews?

10. Ease of attending their appointment

Of those that we spoke to who were attending appointments in the day, 87% said it was easy to attend their appointment, and 13% (9 people) said it wasn't. Of the nine who said they had difficulty, seven said that this was associated with transport and travel, two said that it was due to their work.

Of those attending evening and weekend appointments slightly more (94%) said that it was easy for them to attend the appointment and 6% (5 people) said it wasn't easy. Of the five who reported difficulties attending their appointment, three gave the reasons as distance, one said it was due to a busy lifestyle and one said it was due to their medical condition.

11. Views about attending appointments at a different surgery We asked people when they thought it would be better to travel to see someone at another practice sooner, rather than waiting for an appointment at their own practice.

Of those attending daytime appointments 40% said they wouldn't want to and would rather wait. The remaining 60% said they would consider this in a variety of different circumstances. Of those attending evening appointments 38% said they wouldn't want to and would rather wait and the remaining 62% said they would consider this in a variety of different circumstances.

The results indicate that people would consider attending a different surgery and suggests that there are more patients who may be willing to attend another surgery than are currently doing so in Wiltshire. The most common circumstance where people said they might do this would be if the issue was urgent. Being able to be seen more quickly and the other surgery being relatively close by were also important to people.

12. How did people find out about out evening and weekend appointments?

For those attending evening and weekend appointments, 80% said that they were offered an appointment at that time and 20% said that they had requested one.

We asked patients attending daytime appointments if they had ever been offered an evening or weekend appointment. 67% of them said that they had never been offered one, and 33% said they had been offered one.

13. What time did people say they would prefer to come to appointments?

We asked people what time they would ideally prefer appointments. Some people identified more than one time that would be preferable, for example afternoons or evenings.

Amongst the patients attending appointments during the day over a third of them expressed a preference for early morning, evening and weekend appointments as opposed to the daytime appointment that they were currently attending.

For out of hours appointments, a much greater preference was expressed for early morning and evening appointments, as compared to weekend appointments. Patients who we interviewed who were attending on a Saturday did not express a clear preference for a weekend appointment.

A significant number of patients attending both daytime and evening and weekend appointments said that they could be flexible with the time they attended.

14. How did peoples work affect attending appointments?

Of those people we interviewed attending evening and weekend appointments, 64% were in employment. We asked those people how easy it would be to attend an appointment during the day. 50% said that it would difficult, 28% said it would be easy and 22% made neutral comments. The most common reason for not being able to attend during the day was difficulties leaving work for a protracted period where peoples work was not near to their GP surgery.

Those who said it was easy said that this was because they worked near the GP surgery and had a flexible employer, or they worked part time.

Of those attending daytime appointments 50% were in employment. Of these, 38% said that it was difficult to attend during the day, 17 % said it was easy and 44% made neutral comments.

Those who said it was difficult said that this was due to a range of different aspects about their employment which included having fixed work commitments, losing pay, and being self-employed.

Additionally, 3 people said that their commitments to voluntary work made it difficult for them to attend daytime GP appointments and being at college was also mentioned by one person.

15. How did being a carer affect attending appointments?

We asked people if they cared for someone who required extra support during the day. Of the people we spoke to attending appointments during daytime hours 20% identified themselves as carers and this was 14% for people attending evening and weekend appointments.

We asked how being a carer affected people's ability to attend appointments. Of those who answered this question 40% told us that being a carer made it more difficult to attend appointments with the main reason for this being given as being unable to leave the cared for person at certain times of day.

When we asked for general comments several carers said that they found telephone appointments useful.

16. Choice of practitioner

We asked how patients felt about seeing a nurse, paramedic or pharmacist instead of a doctor. The vast majority of those we spoke to said were happy to see another practitioner if they were able to deal with the issue. Of the practitioners we asked about there were slightly more people said they were happy to see a nurse, and they were most unsure about seeing a pharmacist. There were several positive comments about the triaging process in some surgeries and patients said that they understood this and said it worked well.

This view was consistent across people attending during daytime and evening and weekend appointments. Overall:

- 88% said they were happy to see nurse, pharmacist or paramedic if appropriate
- 8% said they'd prefer to always see a GP
- 4% would see a nurse but were unsure about a pharmacist or paramedic

There were some instances where patients said that they would prefer to see a GP, these were if they were having ongoing treatment for a longterm condition or if they thought their issue was serious or if it was something very personal. Most people with long term complex, conditions also said that they would prefer to see the same GP to see continuity.

17. Comments about the process of getting an appointment

We asked what was good about the process of getting their appointment and a wide range of different things were identified. These included straight-forward booking process, booking at reception desk, appointment being booked for them by a doctor or nurse, being able to get an appointment with the right professional and being able to get an appointment quickly. Several people mentioned that they thought it was good that it had been recognised that their need for an appointment was urgent and that they had been given one quickly.

Overall, we received a greater number of comments about things thought to be good about the process of getting their appointment, than those which identified things that could be improved.

When we asked what could be improved about the process of getting an appointment, the things that most commonly identified were the booking system for making appointments and access to an appointment sooner.

18. General comments about accessing appointments

We asked people if there was anything else, they wanted to tell us about their experiences of using GP services generally. Most of the comments we received concerned access to appointments. We analysed these comments using a thematic analysis tool. We found that there were slightly more negative than positive comments about access to GP services. In total there was 138 comments, 55% of which were negative and 45% positive.

These comments appeared to reflect views and experiences of accessing appointments in general, as opposed to their experience of accessing a specific appointment.

Whilst they appear to contradict what people said about their experience accessing specific appointments, there are several possible reasons for this. It might be that people are more likely to remember instances where they had difficulty getting an appointment. It should also be noted that in asking people about accessing specific appointments at doctors' surgeries, we were speaking to people who had been able to get an appointment. Peoples general comments may have included several instances where they had tried to make an appointment but not been able to. This would not be captured in our interviews with patients who did have an appointment. It could have also been that these comments were reflective of a general high level of concern about being able to access appointments.

19. What did people say about how their appointment went?

In most cases, we interviewed patients about the process of making their appointment before they were seen. We then asked people to come back and tell us how their appointment went if they were willing and had time. We were surprised and pleased by the number of patients who wanted to come back and talk to us.

We carried out short follow up interviews with total of 117 patients. 61% of those who we had interviewed in daytime hours and 73% of those who we had interviewed at evening or weekend appointments, came back to give us feedback about how their appointment had gone.

Of those we spoke to during the daytime, 58% said that they were seen on time. 42% said they weren't with waiting times ranging from 5 to 50 minutes. Of those attending evening and weekend appointments 80% said that they were seen on time and 20% said they weren't with delays ranging from 5 to 60 minutes. Most people we spoke to were not concerned about a short wait for an appointment.

We asked patients if they thought that they had got the service or treatment they needed during their appointments. The response to this question was very positive. 44 of the 45 patients who had attended during the day and all 72 who were attending weekend and evening appointments said that they thought they got the treatment or service that they needed.

The things that patients most commonly identified as being good about their appointment was knowledgeable and informative staff, competence, friendly manner and listening. In terms of what people thought could be improved, 9 people identified something. 7 of these felt the waiting time could have been improved, one person felt they should have been given a specific medication, and one had seen someone not able to give the treatment needed and felt the triaging process should have been better.

We also asked patients to tell us overall how satisfied they were with how their appointment had gone. Overall very good levels of satisfaction were reported, and these were slightly higher for patients attending weekend and evening appointments compared to those attending during usual surgery hours.

20. Other things that people told us

We asked if there was anything else people wanted to tell us. A few things were mentioned that are not covered elsewhere in this report:

- Several people mentioned that they found telephone appointments useful
- People reported that they did not like using Doctor Link as a way of accessing appointments, several people found it difficult to use and some said they didn't think it worked properly
- Text reminders for appointments were mentioned as being a good thing
- Some people didn't think that their surgery could cope with the demand in their local area

Mystery Shopping – What did surgeries tell us?

21. Our volunteers carried out a mystery shopping exercise. We selected 14 surgeries across Wiltshire that served both rural and town areas and that we had not visited as part of this project. Our volunteers called each surgery twice on different days. They asked the surgeries for information about what appointments were available at evenings or weekends. If they were asked for their name or why they needed an appointment they explained that they were a volunteer from Healthwatch Wiltshire and had been asked to call.

Overall, volunteers reported that people were happy to speak to them and that their calls were dealt with courteously and politely.

We found that knowledge about what was available differed considerably amongst receptionists. On some occasions we were transferred to more experienced staff who were able to give us more information.

It was also evident from our calls that surgeries differed in how they booked evening and weekend appointments. For example, some surgeries told us that these appointments could only be booked with the persons own GP, whilst others said that they could be with a variety of practitioners. Some receptionists told us that appointments could only be booked by a GP and were unsure of what was available.

In 27 of the 28 calls, we were told that evening appointments were available. In most cases we were given times of evening surgeries and these covered both the extended hours and Improved Access appointment times. Overall surgeries were clear about when they were opening in the evenings, although there were some cases where we had to be transferred to someone with more knowledge. Several surgeries told us that these appointments get booked up quickly.

We found that knowledge about what was available at weekends was much more variable:

- In 50% of calls we were told that these were not available.
- In 32% were told that they might be available, but the information about where and when was not clear.
- In 18% of calls we were told that these were available to patients and given clear information about when and where they were available.

We also found that information was variable about what might be available at different practices.

- No information was given about what might be available at other practices in 46% of calls
- 21% of calls some information was given
- 32% of calls clear information was given about what was available and where.

Where we were told about appointments at other surgeries we asked if the staff there would be able to access to information they needed about the patients. In most cases we were told that they would if the patient had given prior consent for this to be shared.

Our volunteers making the calls also noted on the wide range of different answerphone messages across surgeries and felt that some were more useful that others. They thought that this was something that might be worth looking into in more detail in the future.

What did staff tell us?

22. We designed an online survey that was circulated electronically to all staff involved in the Improved GP Access Service. The survey asked staff their views about the service and how they thought it affected them and their patients. 85 staff with a range of job roles from 35 different practices completed our survey.

23. What did staff think about the service?

We asked staff what they thought was good about the service for them as a staff member or practitioner. Staff mentioned more availability and flexibility of appointments for patients. They said that being able to have more appointments was good for them, and it was mentioned that it enabled them to see patients that they thought needed to be seen. Some staff said that the quieter, less pressurised environment benefitted them. Being able to have longer appointment times was mentioned as being useful for seeing patients with chronic or complex conditions. Some staff mentioned that the additional funding and paid overtime benefitted them.

We asked staff what difficulties they had experienced working in the service. 52 of the 85 staff members who answered this question identified a range of difficulties.

Difficulties with IT systems was mentioned, particularly in seeing and booking appointments at a different surgery. It was mentioned that the system was complex to use and cumbersome.

Staffing the extra hours was also mentioned as a difficulty for several surgeries including rota issues and cover. The impact on staff was mentioned including working long hours, tiredness, and impact on family life.

Poor take up of appointments and patients not turning up for appointments was also raised. There was a feeling that practitioners time and skill were not used to their full benefit.

We asked staff if they agreed that working in the Improved Access service was a good use of their time. 33 staff thought that it was a good use of their time, 28 staff felt that it wasn't and 24 were neutral or not sure.

Of the 28 who said they didn't think this was a good of use of their time, 18 were GP's.

The reasons given why people didn't think they were a good use of their time was that improved access required more administration and reporting, non-attendance and low take up meaning that appointments were not fully utilised particularly at weekends. Some GP's felt that the service shouldn't be provided by GP's who were already overstretched.

We asked staff if they agreed the service has improved access to GP services.

The majority agreed that the service had improved access for patients and said that it provided flexibility and access to working people and was useful for people who had difficulty attending during the day. Appointments for cervical screening, smoking cessation and child asthma reviews were areas that were identified as being useful. It was commented that feedback from patients had been positive. The people who disagreed said that they thought this was because they didn't have issues with access at their surgery. Some said that their surgery was in an area with less people of working age.

Some practice staff said that they thought patients didn't like to go elsewhere. There were several comments from staff who said that they thought that evening appointments were more useful than weekend ones.

24. Benefits and drawbacks to patients

Staff said that they thought the benefits for patients were greater access to appointments, reduced frustration at not being able to get an appointment, flexibility of appointment times, not needing to take time off work, timelier appointments, and longer consultation times.

They also thought that access to a range of things out of hours was of benefit, for example flu clinics and blood tests.

We asked if they thought there are any drawbacks for patients. The main one mentioned was travel time for patients and lack continuity of care if they were going to have an appointment at another surgery.

25. Conclusions

We found that access to GP services remains a concern amongst local people in Wiltshire. However, it is interesting that patients were more positive when we asked about their experience of arranging specific appointments. People expressed frustration with some systems for making appointments particularly where patients were asked to phone at a specific time. This was inconsistent across practices.

Appointments in the evenings and weekends are clearly valued. Feedback from patients attending both Improved Access and other out of hours appointments was very positive regarding being able to access these appointments and their treatment during them. There appears to be a greater preference for appointments in the early mornings or evenings as opposed to weekends. Patients awareness of, and ability to access these appointments, was inconsistent.

It was evident that different practices and surgeries manage their Improved Access appointments in a range of different ways. Information about what was available was not always clear from surgeries when we telephoned them. This might prevent patients being able to book these appointments. This was particularly the case for weekend appointments and for booking appointments at other practices.

Staff processes for booking Improved Access appointments were not consistent or clear, some staff reported difficulties with IT which meant that they couldn't see or book appointments at other surgeries. Most staff thought that the Improved Access Service has improved access to appointments for patients and highlighted several benefits of it to patients. Feedback about whether staff thought it was a good use of their time was more mixed. Some staff highlighted low take up of appointments as the reason for this. Staff commented about the impact of providing this service on their work-life balance.

We found a significant number of people who said that they would be willing to travel to another GP surgery for appointments in certain circumstances. However, some patients told us that this would not be possible for them. Concern was expressed that people who are unable to travel, should not have less favourable treatment because of this.

Overall there is confidence in the triaging process and most patients said they would be happy to have appointments with a variety of different health professionals, according to what is needed at that time. This appears to be a shift from views shared with Healthwatch Wiltshire in the past where this was much more mixed. People still felt that long standing complex conditions required continuity of care from a GP.

Feedback about the quality or treatment people received and patient's satisfaction levels with how their appointment has gone was overall very positive.

26. Recommendations

We would like to make the following recommendations:

- Access to evening and weekend appointments is valued and should continue.
- IT processes for booking appointments in other surgeries should be reviewed and improved.
- Consideration should be given to offering more patients who are able to travel, an appointment in a different surgery.
- Patients who are unable to travel should be prioritised to be seen at their own surgery.
- The availability and take up of weekend appointments should be reviewed with a view to assessing whether there is potential to simplify and streamline access at weekends. If there is excess capacity this could potentially be used for appointments at other times where there is local demand, for example early mornings.
- Clear information about what is available at weekends should be provided to surgery staff and to the public.
- All reception staff at surgeries should be provided with clear information and training about booking of evening and weekend appointments both at their own and other surgeries.
- Further consideration should be given on how to reduce the impact of staff whilst retaining an evening and weekend service.
- Recognition should be given regarding the very positive comments from patients regarding the overall quality of treatment.

The full report is available on our website: https://www.healthwatchwiltshire.co.uk/news-and-reports Report Authors: Stacey Sims, Manager, Healthwatch Wiltshire