



**Getting an appointment
with your GP:
Experiences of the
People of Surrey**

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1. Acknowledgements

In late Autumn 2013, Healthwatch Surrey ran a survey asking people in the county about their experiences of booking an appointment with their GP practice. The short questionnaire was available to complete online via the Healthwatch Surrey website or via questionnaires distributed through the 12 Citizens Advice Bureaux in Surrey and the user led Hubs. The Surrey Hubs is a network of drop-in shops on local high streets for information, advice, advocacy and other services about care and support. There are currently eight hubs in Surrey.

The large number of responses that Healthwatch Surrey received to the questionnaire would not have been possible without the support and commitment of the many staff and volunteers in the Citizens Advice Bureaux (CABx) and Hubs who distributed the hard copies of the questionnaires and coordinated the responses.

Healthwatch Surrey would like to thank all the staff and volunteers, in particular the Healthwatch Champions in each CAB shown on the right.

In addition the survey was advertised during engagement and promotion events at many of the GP surgeries in Surrey. Healthwatch Surrey is grateful to all the GP surgeries who welcomed us to meet their patients, a list of surgeries is included in appendix 3, and also to Nicola Borrow and Lucy Finney for carrying out the engagement activities and gathering responses from people on site.

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2. Chairman's Foreword

For most people in Surrey visiting their GP is the first point of access to the health system and the part of the health service that they most often use. This area - Primary Care - has an enormous influence on outcomes for patients, as well as on their perceptions of the health system as a whole. For these reasons, I am very pleased to introduce Healthwatch Surrey's report into GP appointment bookings and access to GP services.

Healthwatch Surrey is delighted to have the opportunity to present 'The Voice of the Consumer' in this area of clear public interest and I would like to thank all those who have contributed to the report. The report gives an evidence based indication of the differing appointment booking systems offered by GP practices, as well as a snapshot of experiences, highlighting the main areas of satisfaction and concern.

We hope this report will form an important addition to debates about this subject at both national and local level - the ultimate desire being to see primary care providers and their commissioners reflecting on the services being offered and acting to effect positive improvements.

Peter Gordon,
Chairman

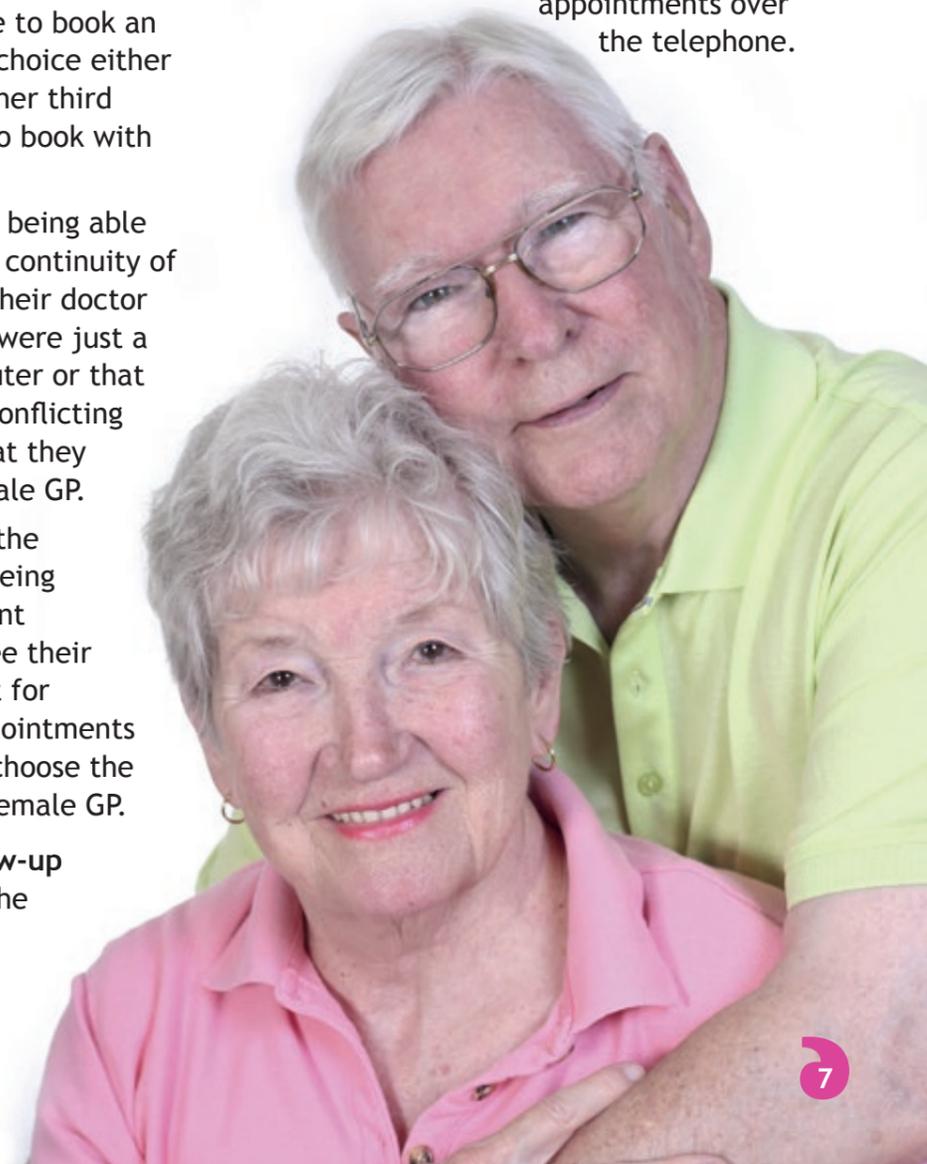


3. Executive summary

- **Prioritising Access:** People generally understand the importance of prioritising access to GP appointments according to need, but are frustrated at what they perceive to be inefficiencies and barriers within many GP appointment booking systems.
- **Availability of appointments:** 34% of people have always or often been able to get an appointment on the day of their choosing, and 28% have always or often got an appointment at their chosen time. 37% of people have either rarely or never been able to get an appointment on either the day or at the time they would like. The remaining respondents said that they can 'sometimes' get an appointment on a day or at a time that suits.
- **Available booking methods:** The most common appointment booking methods offered by the GP surgeries surveyed were 'in person' appointment booking (100% of surgeries), 'person to person' telephone booking (98%), and online booking (78%). When asked the same question, patients report the same choice of appointment booking methods, ranked in the same order. However, whilst 78% of surgeries say they offer online booking, only 36% of patients report that online booking is an option.
- **Online booking:** This suggests that GP practices need to promote awareness of online booking as an option, and also that there are still a number of practices that need to set up an online booking system in order to meet the Patient Online deadline set by NHS England of April 2015.
- **How people currently book appointments:** Most people book their appointments by means of 'person to person' telephone booking or by visiting the surgery in person.

- **How people would prefer to book appointments:** In contrast, asked how they would prefer to book appointments, after 'person to person' telephone booking, the second most popular preferred option was online appointment booking. The online booking system, where it was available, was felt to offer potential, but often did not allow people to book emergency appointments, only appointments for a few days ahead. For online booking to offer a viable alternative to telephone booking and ease the call queuing process, it needs to offer both emergency and longer term appointments.
- **Appointments with a GP of choice:** A third of respondents were able to book an appointment with their GP of choice either 'always' or 'often', and a further third were 'rarely' or 'never' able to book with their preferred GP. The main concerns around not being able to see a named GP centred on continuity of care. Many patients felt that their doctor did not know them, that they were just a list of symptoms on the computer or that it resulted in them receiving conflicting advice. Others were upset that they could not choose to see a female GP. Many respondents recognized the compromise faced between seeing any GP in order to get an urgent appointment and waiting to see their preferred choice, but felt that for follow-up and longer term appointments they would like to be able to choose the doctor or be able to select a female GP.
- **Urgent, non-urgent and follow-up appointments:** People made the distinction between urgent emergency appointments, non-urgent appointments and

- follow-up appointments, and there was considerable frustration that the same distinction was not always recognised by GP surgeries. People reported that it is often not possible to book a GP appointment very far ahead yet, as one respondent noted, this can be done for the dentist up to six months in advance
- **Accessibility:** Although less utilised, and in percentage terms, a less popular booking option, it is important not to discount appointment booking via SMS text messaging or email as these can offer a vital service to specific groups of people, notably those who are deaf and hard of hearing and have problems booking appointments over the telephone.



3. Executive summary (cont)

- **Appointment booking frustrations:** Complaints centre on having to phone at a set time, having to repeatedly hit redial, not be able to get through, getting cut off, costly calls, and what one respondent described as ‘telephone roulette’ to get an appointment. Alternatives such as queuing early in the morning were not widely appreciated by patients, particularly when they were elderly or felt unwell.
- **Working people:** For people who work, the timing of both the telephone booking process and the appointments themselves can prove problematic, particularly for shift workers or those who have a fairly long journey to work. They are often not in a position to be able to phone or queue at the required times, and cannot get back to the surgery at short notice or before it closes. Parents who are tied to the school run made similar comments.
- **Other barriers:** Respondents also wished to draw attention to other barriers to booking an appointment, such as wheelchair access, unhelpful receptionists, discrimination, the need to accommodate a Carer or coordinate transport requirements.
- **Satisfied patients and good practice:** Just over a fifth of replies to the open comments section of the questionnaire were from satisfied patients, and patients keen to acknowledge good practice (12% and 9%, respectively). These good practice ideas have been used in consideration with issues which frustrate patients, to draw up a template - a ‘Preference List’ - of what people would like to see in their GP surgery:

3.1 ‘Preference List’ for GP appointment booking and services:

Drawing together respondents’ comments it was clear that people would like:

To be able to book in a variety of ways, ranked according to preference:

1. ‘Person to person’ on the phone
2. Online
3. Email
4. In person
5. SMS text
6. Automated telephone

A three level booking system:

1. Emergency same day appointments
 2. Non-emergency appointments for the next seven days
 3. Follow-up appointments for return visits between one week and six months
- For all three types of appointment to be available via each booking method.
 - Suggestions included a separate time to phone or booking process for follow-up and non-emergency appointments, rather than having to phone at the same time as the emergency appointment callers thus blocking phone lines. Many of these appointments could be made available online. To prevent ‘no shows’ suggestions for consideration included the use of reminder emails or texts closer to the appointment date such as used by other healthcare providers.

Online and SMS booking facilities

Both options, along with hearing loop facilities, were requested by people who are hard of hearing. The former would also benefit other people who have difficulty using the phone or going to the surgery in person. An online booking facility is also a requirement of all GP practices by April 2015 under the NHS England Patient Online scheme. Online booking options can also be used to pave the way to other online initiatives such as video conferencing between patients and medical staff, ordering of repeat prescriptions and online access to test results.

1. ‘Person to person’ on the phone
2. Online
3. Email
4. In person
5. SMS text
6. Automated telephone



Triage, telephone consultations and walk in clinics

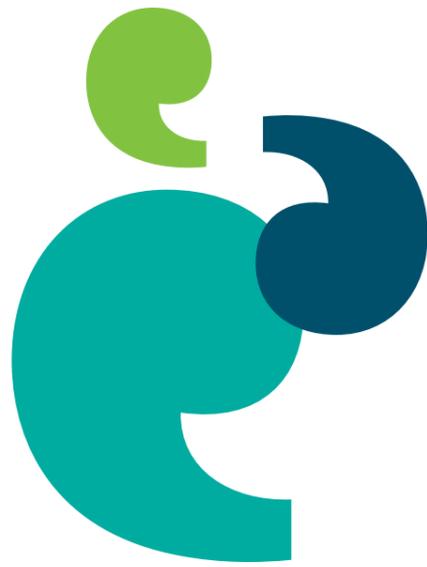
Positive comments were received about triage systems and the use of nurse practitioners to prioritise patient appointments, as well as telephone call back systems and telephone consultations, so that face to face appointments can be allocated to those most in need.

Extended opening hours for patients that work or parents with school commitments.

For people who work, especially if they work in London and have long journeys or work shifts, as well as parents tied to school drop off and collection times, fixed morning phone times can be difficult. Implementation of a variety of booking options would reduce the barrier they face in booking an appointment. In addition, this group of people called for extended opening hours on certain days or weekend opening, or for a group of surgeries to join together to offer this option on a rota basis along the lines of pharmacy late opening rotas, in order to make it easier to visit the GP without having to take time out of work or having to arrange childcare.

Special provision for the elderly

Older people are more likely to visit the GP than younger people, less likely to have internet access to make a booking, likely to struggle standing in a queue early in the morning, and may need to coordinate with Carers or arrange transport. Suggestions to make it easier for this group of people to visit the GP included a dedicated line for appointments or a named person within the surgery to coordinate their appointments and needs.



Receptionists

Many people are happy with their receptionists, and some provided comments to this effect. However, whilst understanding that there needs to be a system of priority and a gatekeeper of that system, there were a larger number of people who were distressed by the unhelpfulness or rudeness of their receptionist. They were also unhappy at being asked personal medical details by the receptionist, especially if this was done in the reception area within earshot of other patients. If medical information needs to be divulged at the point of booking an appointment, people would prefer to speak with a medical practitioner such as a nurse.

Consistency of care

Most people recognise that if they want to see their named GP there is a balance between being able to get an appointment urgently or waiting to see a specific doctor. Patients are less content when they see a variety of doctors at different appointments and feel they have no continuity of care. Patients are generally happier to see any GP in the case of an emergency, but for follow-up and non-emergency appointments, they would like to have greater continuity of care, and the option of following their health issue through with someone who is familiar with their case, rather than explaining details anew each time.

Accessibility

People do not want to be treated differently or ignored because they are perceived to be different or have extra needs which are hard to accommodate. Whether in a wheelchair, hard of hearing, lesbian or gay, people would like to be treated with respect and have equal access to appointments and treatment.

The volume of responses to this survey and the number of people providing additional comments and ideas for service development show that patients are keen to see services succeed and to support their improvement. Patient and public engagement forums provide GP practices with a real opportunity and mechanism to hear people's feedback and their ideas in order to improve the services they offer.

Implementing the respondent's suggestions:

- would give more equal access to all people
- reduce patient frustrations and stress when trying to access appointments by phone
- would reduce the need for elderly people and patients who are feeling unwell having to queue at the surgery early in the morning
- would reduce the number of people admittedly 'playing the system' and requesting emergency appointments when they are not required
- could reduce the number of people turning up to A&E when they are not able to get an appointment with their GP.





4. Healthwatch Surrey: Who are we?

Under the Health and Social Care Act 2012, which came into force in April 2013, each county council or borough was made responsible for the commissioning of a local Healthwatch organisation to act as the statutory community, patient and service user champion for their area. There are currently 152 local Healthwatch around the country.

Healthwatch Surrey came into effect in April 2013 as an independent organisation to give the people of Surrey a voice to improve and shape all publicly funded health and social care services for adults and children in the county.

We do this by being an independent consumer champion ensuring that the voices of people in Surrey reach the ears of the decision makers. We engage with and listen to what

people from all parts of the community say so that we can offer reliable evidence that can be trusted.

- We enable people to share views and concerns about local health and social care services
- We provide evidence-based feedback to commissioners and providers to influence, inform and, if necessary, challenge decisions and plans
- We provide, or signpost to, information about local services and how to access them

We serve a population of just over 1.13 million, 64% of whom are of working age, 19% children and 17% aged over 65. (ONS, 2011)

5. Why did we do this research?

5.1 The Surrey context:

Healthwatch Surrey has a duty to:

- provide, or signpost to, information about local services and how to access them
- enable people to share views and concerns about local health and social care services

Healthwatch Surrey provides advice, information and signposting via a dedicated helpline and through the 12 Citizens Advice Bureaux (CABx) in Surrey.

The details of the emails, phone calls and enquiries that we receive via the CABx and helpline are logged, collated and analysed to give us a picture of the main health concerns of people within Surrey. In the first six months of operation, one of the top three areas of patient concern was access to and care by GPs.

The dedicated helpline responds to calls and emails, the following is a call received by the helpline in Autumn 2013:

"I called the surgery for an appointment on October 1st 2013. After explaining to the receptionist that I wished for a regular appointment (i.e. non-emergency) I was offered the first available date of October 30th....."

Two weeks after securing the appointment, I received a letter in the post explaining that the doctor with whom I had an appointment was now not going to be in the surgery on October 30th. I was asked to call the surgery for an alternative appointment.

It happens that my condition was not serious, but if I had been suffering from depression or some other matter, I think the delay in securing an appointment is very poor."

Similar stories were also being fed back to us from the CABx:

"A Surrey Residents Association committee have reported about the difficulty of getting urgent appointments at the Health Centre. There is an automated appointment system, which they say is very inadequate. Typically, if you try and book in advance, you get an appointment two weeks later, and that may not be with your own GP. If you need to be seen urgently, the only way to do it is to turn up at the surgery at 7am and hope that a GP might be available at some point. Clearly, the aged & infirm find this very difficult and working people can't always take time off at the drop of a hat. The Residents Committee is asking residents for evidence of poor treatment and once this is available, it will try and tackle the Health Centre management with their concerns."

"The client received a letter dated 28th November 2013 from the Job Centre asking them to send a medical certificate by the 6th December. The client went to the GP on the 29th November to request an appointment and was given an appointment on the 10th December, they didn't tell the receptionist about the deadline of the 6th December. Client sent the certificate off on the 10th of December, it did not arrive in time so the client did not receive their ESA payment."

5.2 The National context

Alongside the helpline and signposting and advice service provided by the CABx, Healthwatch Surrey has also been going out into the community to engage and talk to people around the county and to promote its services. Included in these engagement activities have been a large number of visits to GP practices. During these engagement events, patients were asked about their experiences of booking appointments at their GP surgery. Whilst many patients were happy with their GP surgery and the appointment system, there were a number who reported problems:

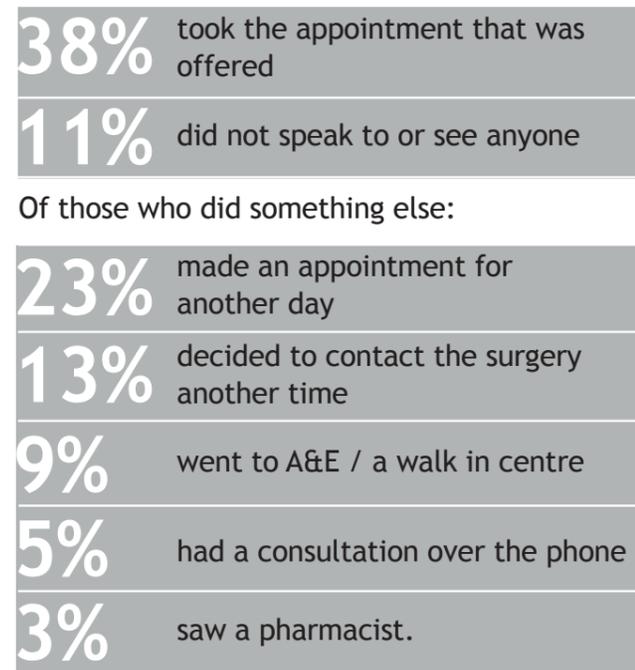
“Told to ring at 9 for an appointment, phone constantly rings, I can’t get to the surgery till later due to the school run and by time I get there, there is a large queue and I can’t get an appointment. Not happy.”

Collating all the information from the helpline, CABx enquiries and engagement visits, it was obvious that booking an appointment with their GP is a cause for concern for many people in Surrey.

In line with the Healthwatch Surrey remit to listen to the voice of the people of Surrey and provide evidence based feedback, it was decided to investigate the concerns further and give patients the opportunity to comment on how easy or difficult it is to make an appointment at their surgery, the different means available for making an appointment, and how they would like to be able to make an appointment.

The concerns raised are not unique to Surrey. National awareness of problems accessing GP services is well documented. NHS England commission IPSOS MORI to carry out yearly GP patient satisfaction survey (GPPS) which looks at patients’ experiences of access to and the quality of care they receive from their local GPs (IPSOS Mori, 2013)

The last GPPS in 2013 found that one in four patients were unable to get through on the phone relatively easily. 10% of patients were unable to get an appointment to see or speak to someone. Of the patients who were not able to get an appointment or make a convenient appointment with their GP,



(IPSOS Mori, 2013)

The Survey also reported that

“when patients are unable to get an appointment with their GP or have to wait for an unacceptable time, many will instead visit A&E at the hospital.”

(IPSOS Mori, 2013)

There have been a number of other surveys and headlines in the last year picking up on the issue of people turning to A&E services when they cannot get an appointment with their GP, and the consequent pressure this is putting on A&E departments (The Guardian, 2014, BBC News, 2014, NHS Choices, 2013.) As a result, Healthwatch England recently investigated this issue and found that:

“18 per cent of people admit to having knowingly used A&E for a non-emergency at some point in their lives....

...1 in 4 respondents said it is likely they would resort to using A&E in the future if they were unable to get a GP appointment in a reasonable timeframe, with 1 in 3 stating that they would do so if the non-emergency situation occurred outside of GP opening hours.”

(Healthwatch England, 2014)

In October 2013, responding to concerns about access to GP services, the Government released proposals for a pilot wave of GPs to offer:

“seven day a week access and evening opening hours...(and)... a variety of forward-thinking services to suit modern lifestyles, including greater use of Skype, email and phone consultations for those who would find it easier.”

(DoH, 2013)

In order to increase choice and convenience, the General Medical Services contract (2014/15) requires all GP practices in England to offer and promote to patients: online appointment booking, repeat prescriptions and access to summary information in their patient record. All GP practices have therefore been provided with funding so that by April 2015, all practices will offer these services, and all patients should be able to book appointments online (NHS England, 2014). The Surrey survey will provide an indication of how the county is faring in meeting this deadline.



6. How did we do the research?

To find out about peoples' experience of getting a GP appointment in Surrey, Healthwatch Surrey ran two surveys. The first survey was for people who visit GPs in Surrey and the second for practice managers of GP surgeries in the county. The surveys were live from the beginning of November to 18th December 2013.

The survey for patients was an online survey accessible through Healthwatch Surrey's website. Paper copies were also available from the 12 Surrey Citizen Advice Bureaux (CABx) and the seven Surrey User-led Hubs. The survey was actively advertised using twitter, the Healthwatch Surrey website, email contacts, press releases (and resultant articles/radio interview), engagement events and posters. The survey asked people to:

- say in what ways they were able to book an appointment with their GP surgery
- rank how they would prefer to be able to book an appointment with their GP surgery
- share how often they have been able to book appointments on the day or time they wanted or with the GP they wanted
- share their experiences of booking or accessing appointments with their GP and provide other comments.

The survey for practice managers was also an online survey, consisting of just one question. It asked managers to state the different methods available to their patients to book an appointment at their surgery. The survey was sent to each practice manager by email explaining the purpose of the survey and giving the website link for completion. A follow-up reminder was circulated a month after the original request. 65 practice managers completed the survey, which equates to 49% of GP practices in Surrey.

1111 responses were received to the patient survey, and 90% of respondents provided their postcode. Although due to the way the survey was distributed via website, CABx and Hubs, it cannot be said to be a statistically representative sample of all Surrey residents, the post codes show that there was a good spread of responses across the county. The heat map at Appendix 1 shows the distribution of respondents across the county, with all boroughs/districts being represented.



7. Results: What did we find out?

7.1 Booking: Methods available

Both GP practice managers and patients were asked in which ways it was possible to book appointments at their surgery.

The responses of both patients and practices managers cannot be directly compared as they patients responding are not necessarily those attending the practices from which responses were received.

Nevertheless it is interesting to look at the responses alongside each other to compare and contrast the pattern of responses. The responses from practice managers are shown in figure 1 below, and from patients in figure 2 overleaf.

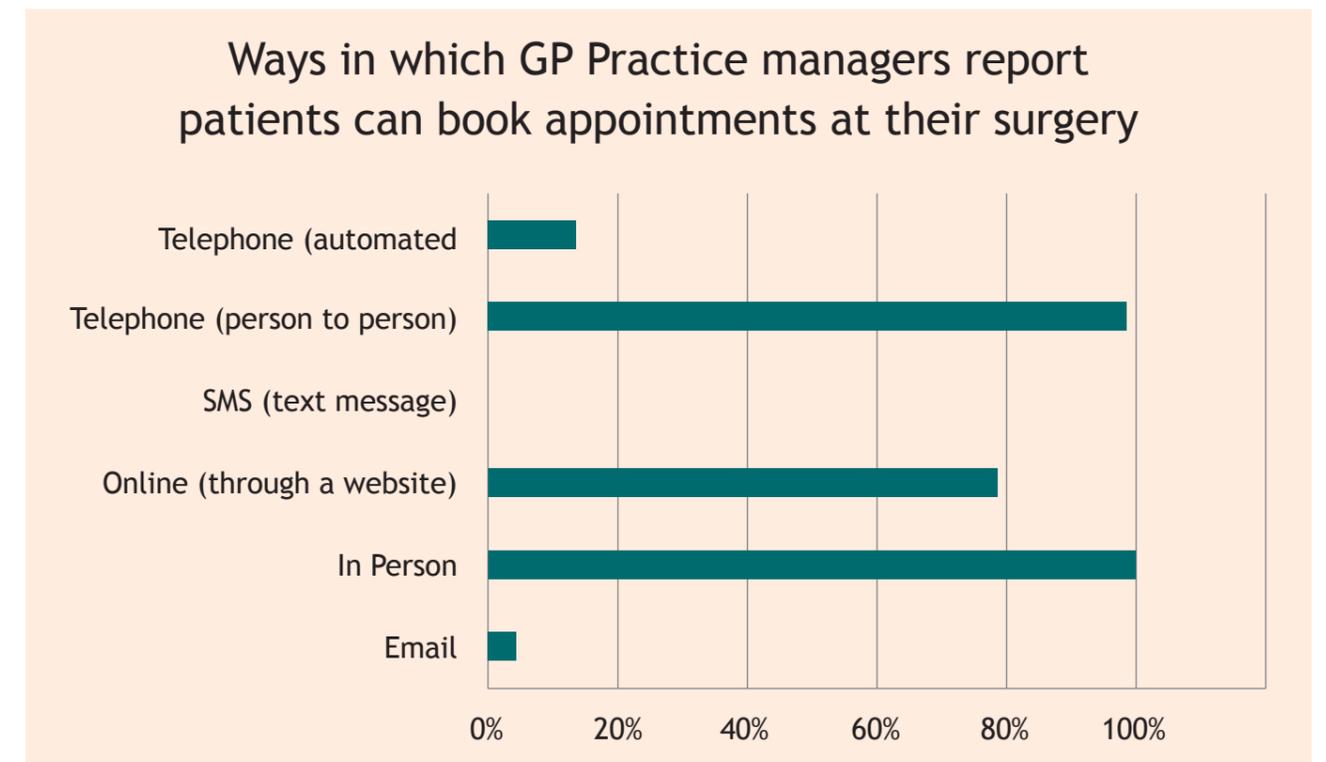


Figure 1: Means by which appointments can be booked with GP practices in Surrey according to GP Practice managers.

Ways in which patients report they can book appointments at their surgery

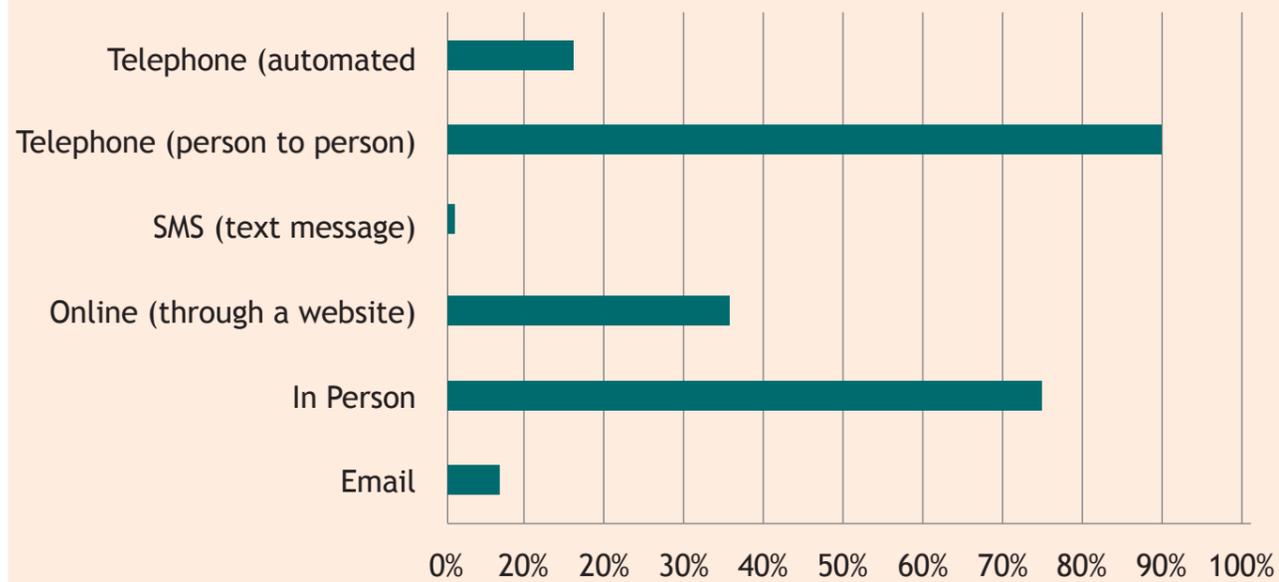


Figure 2: Means by which appointments can be booked with GP practices in Surrey according to patients.

Comparing the two sets of results, it is interesting to note areas of similarity and difference.

According to practice managers, 'in person' and 'person to person' telephone appointments are the two most universal appointment booking methods, and are offered by nearly all the surgeries that responded to the questionnaire.

Patients similarly say that 'person to person' telephone and 'in person' appointments are the most commonly available methods. However, whilst 100% of practice managers said that 'in person' bookings were an option, only 78% of patients said they could book this way. Unless the practices which did not respond were far less likely to offer 'in person' appointment bookings, it would seem that either patients are not aware that this is an option, or simply did not think to mention it.

Looking at the differences between what is actually possible according to practice managers, and what patients are aware is possible, the largest difference is in the responses to the online appointment booking option. Nearly 80% of GP practices that responded said that online booking is available, but only 36% of patients said that this was an option at their surgery. Whilst some of the difference may be attributable to the practices that did not respond to the survey, this does suggest that there is work to be done in increasing patient awareness of the option of online booking.

Given the NHS England patient online initiative that requires all GP surgeries in England to offer online appointment booking by March 2015, this result suggests that there is work to be done in Surrey to meet this target.

A number of respondents to the survey who have access to online booking and had tried to use the online system fed back comments to the effect that online booking was often not very useful as it offered very few dates, and no emergency appointments.

"Impossible to get an online appointment on the day or even the next three days".

"Online appointment system isn't easy to navigate and gives very limited appointment slots."

"I find the online booking system rarely shows any appointments available."

"The only way to get an appointment within a reasonable time is to ring up and go through the triage process for that day's emergency appointments. Otherwise, you've got at least a 2 week wait if you try to do it online. That's ridiculous. I'd prefer not to have to waste people's time to calling up, but I'm not going to wait two weeks. So, really, the online booking system is pointless."

"There have been several changes to both the phone numbers and systems for making appointment in recent years. I have just found out from a friend that we can book appointments online but this is not advertised at the surgery."



Thus a simple measure of whether online booking is an option does not mean that this necessarily relieves pressure on telephone booking or is always a viable alternative for patients. Whilst it may be possible for all surgeries to offer online booking by next April, unless online booking offers a full range of appointments, it may not relieve the pressure on other booking methods, or prove a useful alternative for patients unable to make appointments by phone.

One per cent of patients say that they can book via SMS text message, although no GP practice managers reported this as a possible method, suggesting that a minority of practices amongst those that did not respond may offer this option.

7.2 Booking: Patients' Preferences

When looking at respondent's preferred methods of booking an appointment (figure 3) telephone (person to person) is clearly the most popular option with nearly 100% of respondents ranking it as their first, second or third preference. The second preferred method that people would like to be able

to use to book appointments is online, favoured by over 60% of people. Booking an appointment in person was the third most popular option. This order of ranking is the same whether considering respondent's first choices only or the cumulative first, second and third choices.

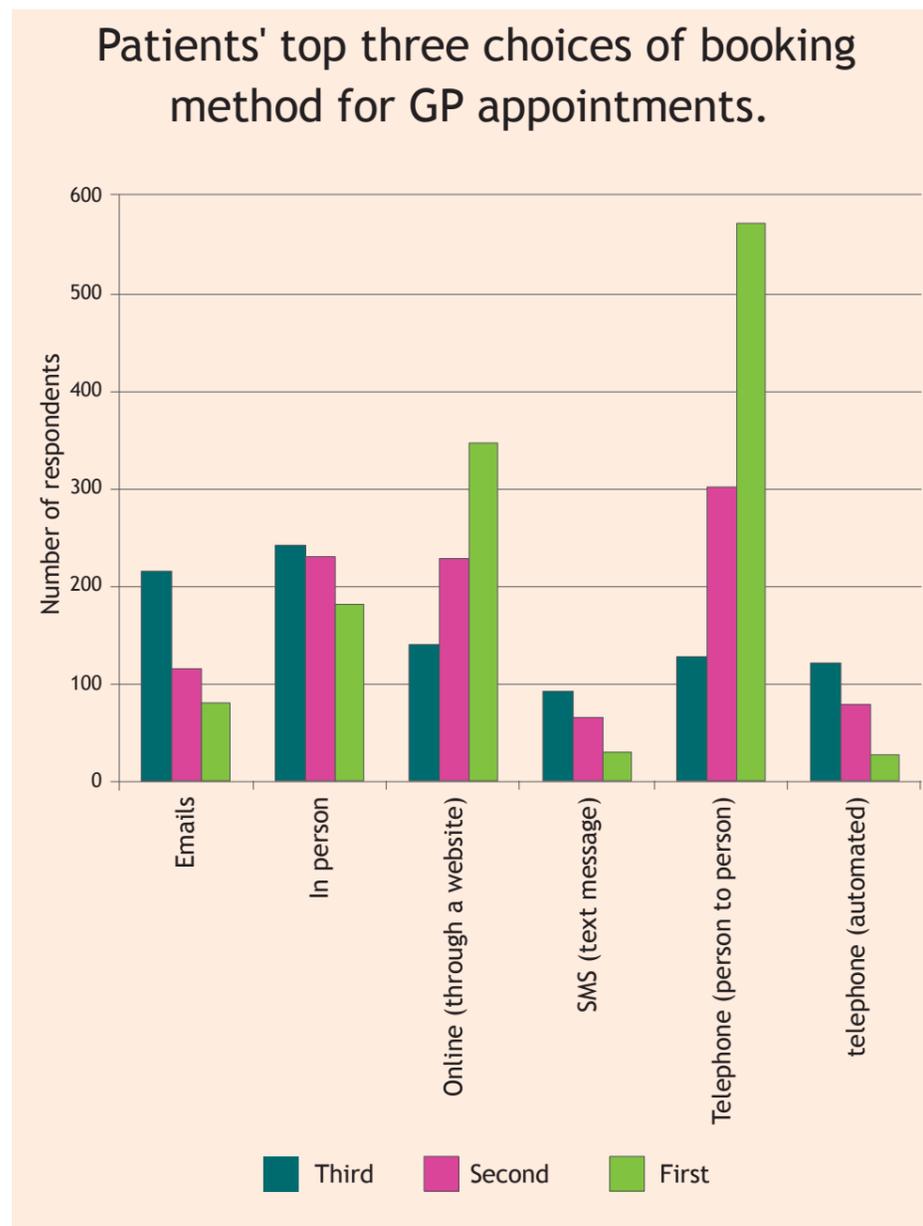


Figure 3: How would you prefer to be able to book an appointment with your GP surgery?

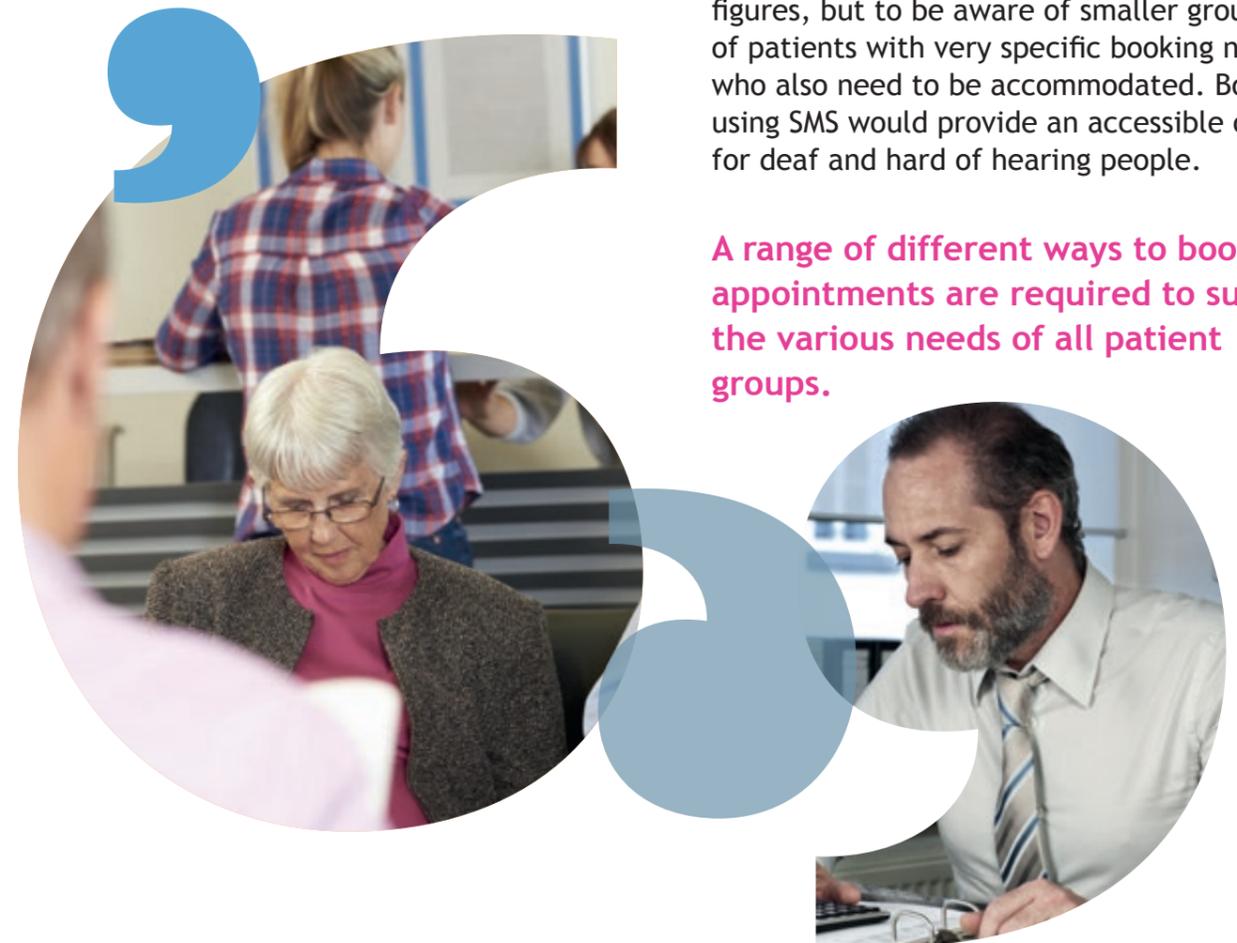
The national GP patient survey reported that 4% of people book online, but 33% would like to have the option of online booking. Although not directly comparable, as the Surrey survey asked respondents to rank their preferences, there appears to be a greater desire for online booking in Surrey, with 52% of people say this would be their first or second preferred method of booking, rising to 64% of people ranking it within their top three booking methods.

The least popular overall option, SMS text messaging, was still ranked in the top three by 17% of respondents. Although it is the least popular option, it is worth considering who is requesting it and why. SMS text messaging is an area that has been flagged up via the Healthwatch Surrey helpline as a desirable option for the deaf and hard of hearing.

“Clearly little understanding that: ‘The D/deaf people can’t phone to ask for a SMS Text-friendly number’ See the attached figures for over 65yrs Hearing Impaired in Surrey. Lots of us can’t use the phone and have yet to learn how to do the internet. Adding SMS expands accessibility, as anyone with grand/children has probably already discovered.”

Thus when considering the available options it is important not just to be led by the figures, but to be aware of smaller groups of patients with very specific booking needs who also need to be accommodated. Booking using SMS would provide an accessible option for deaf and hard of hearing people.

A range of different ways to book appointments are required to suit the various needs of all patient groups.



7.3 Availability of appointments - on the day patients want

Figure 4 below shows that 34% of patients have either 'always' or 'often' been able to book appointments on the day they want them, compared with 37% of patients who have only 'sometimes' or 'rarely' been able to book an appointment on the day they would like. 11% of respondents have never been able to book an appointment on the day they wanted.

Many respondents commented on the stress of trying to get an appointment, particularly when they are feeling ill. Frequent complaints were problems of telephone access and having to queue early in the morning, from 6.45am in some cases, to try to get an urgent appointment. Others referred to the lack of a facility for booking non-urgent appointments and the frustration of having to join the queue of people with urgent requirements.



Figure 4: Availability of appointments on the day patients would like.

"It's very stressful. They only release appointments first thing in the morning, at 8.30am, you can't get through on the phone. All appointments are gone within about 10 minutes and they just tell you to go to the walk in centre which is in Weybridge so not local. To get an appointment you have to actually queue up outside the GP surgery at 8.15am. Disgraceful really in this day and age"

"Too long waiting times for an appointment, can be up to 2 weeks. Pointless if you are ill, you need the appointment at time of illness."

*"The surgery operates a queue system - at 7am you can wait in a queue stretching out into the carpark and you may or may not get an appointment for that day, **HARDLY THE BEST SYSTEM FOR ILL AND ELDERLY PEOPLE !!!!! IT IS POSITIVELY ARCHAIC!!**"*

"Last 2 times I have tried to book an appointment, I was offered 20 days and 19 days in advance. That is an absolute joke. Only other way is to go along and queue up at 6.45am."

"Due (to) the lack of success of being able to book an appointment with my doctor on a day I need to I have left health issues until they become more serious or have not dealt with them at all."

"I have no trouble booking emergency appointments on the day but it is very difficult to book routine appointments, often having to book two weeks ahead and then getting up very early to be in with a chance."

"Usually so full that appointments are only available about 10 days away. Could be dead by then !!!"

"People like me are playing the system in order to get timely appointments. If you don't think a course of antibiotics will work you almost have to book another appointment before the course of treatment is finished. If you don't, it will be another week before you can get an appointment."

Patient frustrations are divided between the problems accessing urgent same day appointments, and the inability to book follow-up or non-emergency appointments in advance. As one respondent noted she can do this for her dentist up to six months in advance, why not for her GP?

From the comments it was clear that people would like the booking system broken down into three categories:

1. **Urgent appointments - on the same day**
2. **Non-urgent appointments - within the following week or fortnight**
3. **Follow-up appointments - for 2 weeks to 6 months ahead.**

People are frustrated when they have to access all appointment types via the same booking system, or in some cases, notably in the case of follow-up appointments, do not have this booking option.

“I am diabetic and my doctor tells me to make an appointment for 3 months time but our reception can only go as far as 1 month so I sometimes miss the diabetic clinic. I am over 80 and my memory is not good but if I try to make an appointment nearer the 3 month deadline I am usually told the clinic is fully booked, Why can't our reception make appointments for more than 1 month?”

7.4 Availability of appointments - at the time patients want

27% of respondents were 'always' or 'often' able to get an appointment at the time they wanted, with 37% responding 'rarely' or 'never'. 14% of respondents reported that they have never been able to book a GP appointment at the time they wanted. The most common response (32%) said that they could 'sometimes' get an appointment at a time that was convenient.

Looking at the responses to both the previous questions - availability on the day and time patients would prefer - suggests that the majority of people can at best only sometimes get the appointment day and time of their choice.

For people who work, the timing of appointments can prove problematic, particularly for shift workers or those who have a fairly long journey to work. They are often not in a position to be able to phone or queue at the required times, and cannot get back to the surgery at short notice or before it closes. Parents who are tied to the school run make similar comments.

Availability of GP Practice appointments ...at the time you wanted?

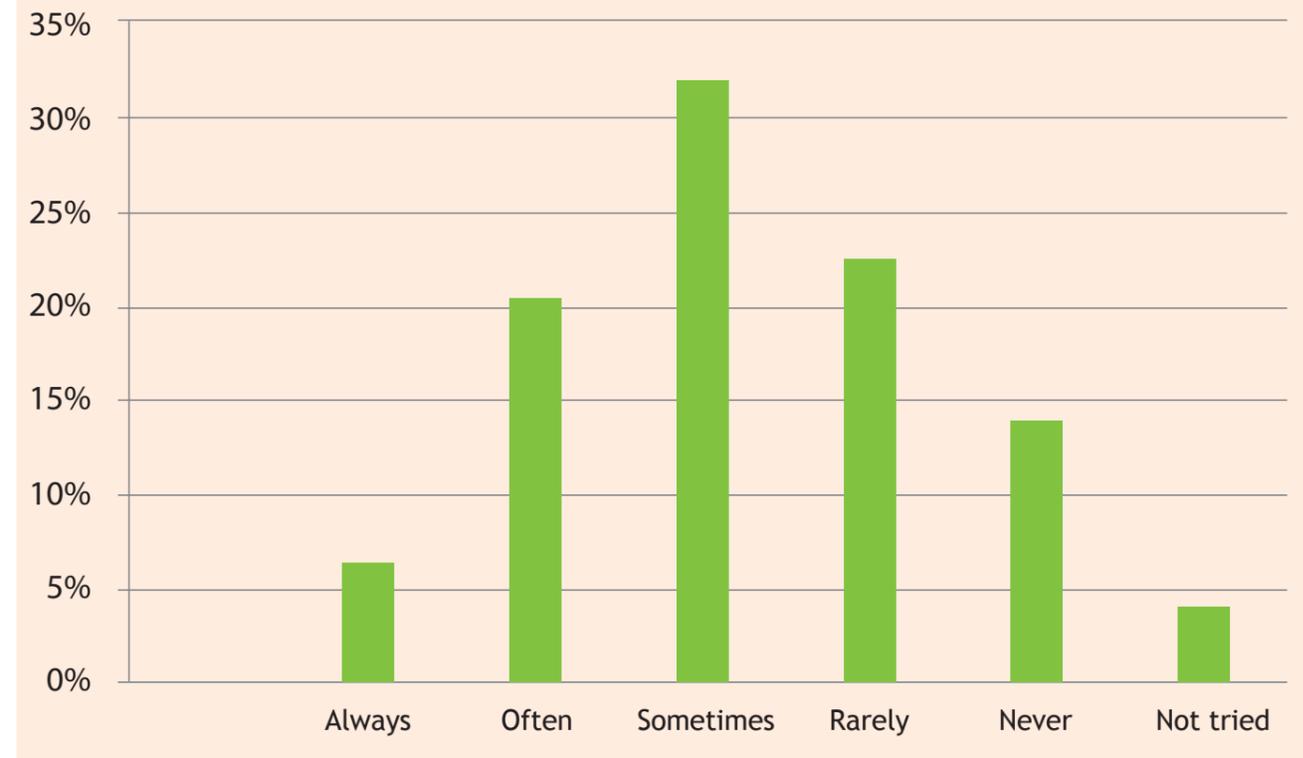


Figure 5: Availability of appointments at the time patients would like.

“To get a same day appointment with a doctor. You need to be in the queue about 6.45. The phones don't get answered until after 8am. If you work in London you are pretty much stuffed unless you take a day off.

If I want to consult a doctor and I don't need to see them the same day it is virtually impossible to book an appointment first thing so I can go into work (in London) on the 8:05/8:15 train.”

“They really do not cater for patients who work long hours and have trouble attending or telephoning during office hours.”

“For non-urgent, routine appts I don't want to have to take a half days annual leave...This no longer fits with today's working style - more flexible booking over a longer period is needed.”

“I work nightshift and am asleep at 08.30”

7.5 Availability of appointments - with the GP patients want

Figure 6, below, shows that a third of respondents (33%) said they were able to book appointments with the GP they wanted either 'always' or 'often' and an equal amount (33%) responded 'rarely' or 'never'. Nearly one on ten were not able to see their named GP at all.

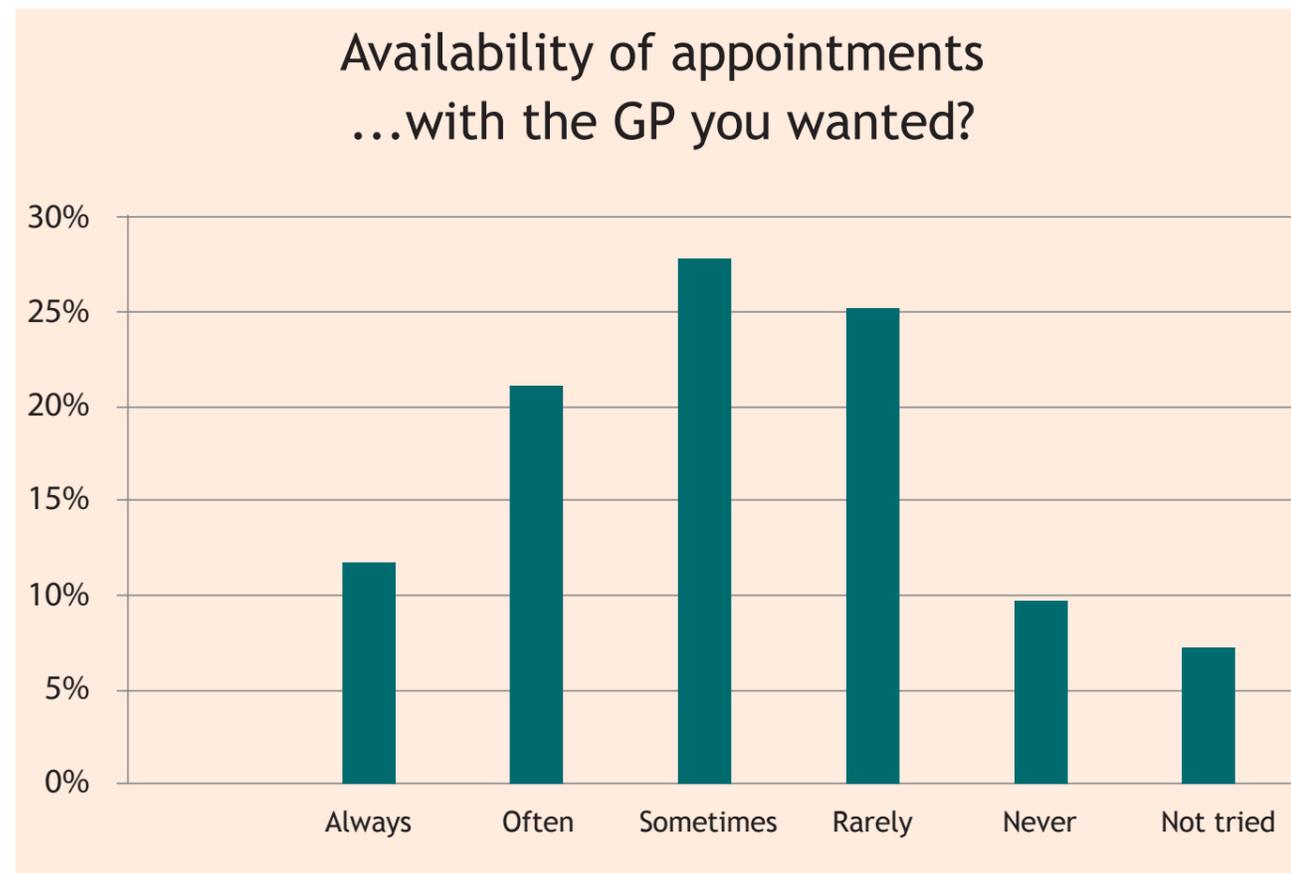


Figure 6: Availability of appointments with the GP of choice.

The main concerns around not being able to see a named GP centred on continuity of care. Many patients felt that their doctor did not know them, that they were just a list of symptoms on the computer or that it resulted in them receiving conflicting advice. Others were upset that they could not choose to see a female GP. Many respondents recognised the compromise faced between seeing any GP in order to get an urgent appointment and waiting to see their preferred choice, but felt that for follow-up and longer term appointments they would like to be able to choose the doctor or be able to select a female GP.

"It's often a compromise between seeing the GP you would like to see, and taking the earliest appointment. I have still to meet my designated GP after 19 years at the practice!"

"Never seem to see the same doctor, each doctor has different opinion"

"Very frustrating. I never see the same GP twice and there is never any continuity."

"Requested a female GP and was told that I would have to try on the day I wanted it - in three weeks time! They are not able to give appointments with specific doctors - it is the luck of the draw on who you get, absolutely no consistency at all."

7.6 Additional comments from patients about their GP surgery and the appointment booking process

To end the survey respondents were asked if there was anything they would like to say. 632 comments were received, most of the comments, around 50%, focused on the difficulties of getting appointments at the time and with the GP of choice. 20% of comments were from people who wanted to say they were happy with their GP practice/ booking system, or who wanted to pass on examples of good practice that impressed them in their surgery. These comments have been put together at the end to create a 'Preference List' from ideas that patients felt worked well at their GP practice.

Figure 7 shows the breakdown of comment types. There were a number of other issues that patients were keen to bring up. Each comment was categorised by theme (comments could have more than one category so the total number of categorised comments exceeds 632) and the number of comments in each category was then totalled to give an idea of the key issues. The result of the analysis is shown in figure 7 overleaf.

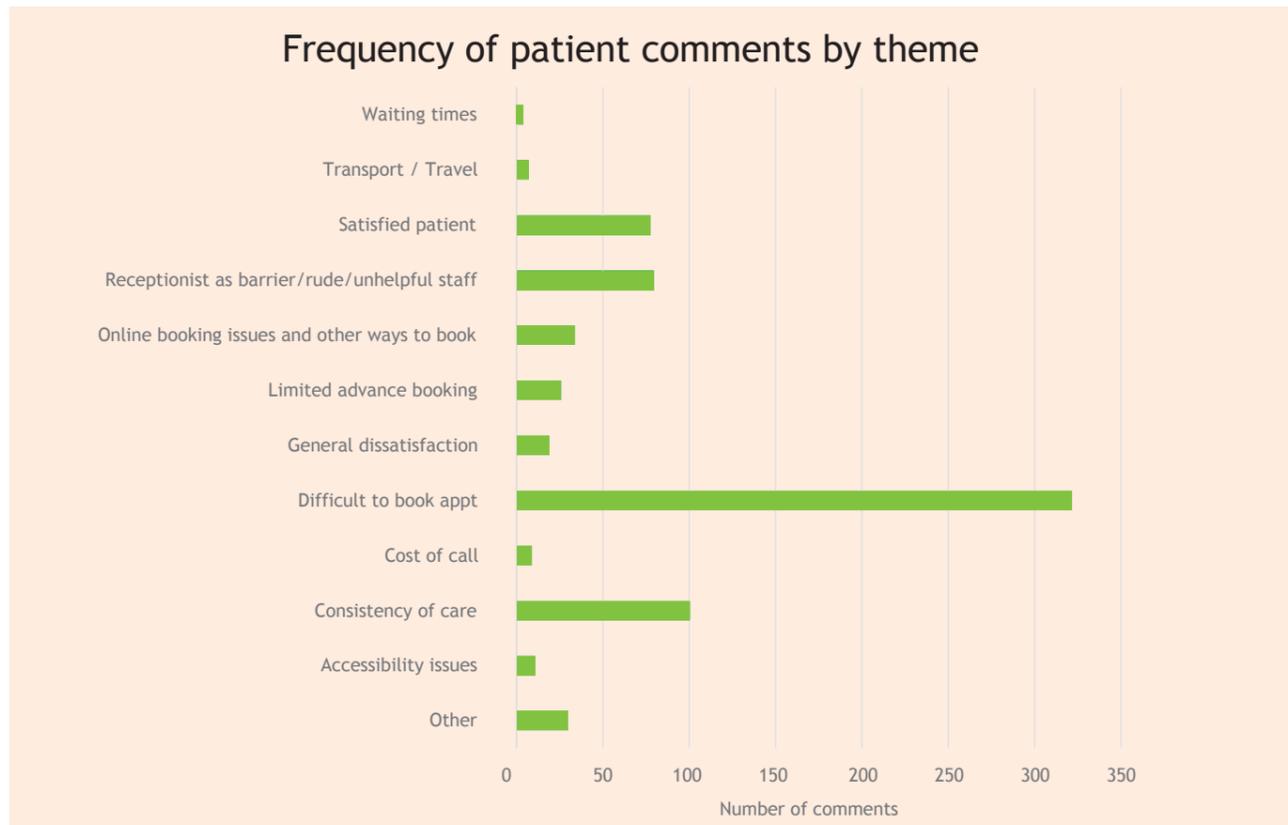


Figure 7: Is there anything else you would like to share with us about your experiences of booking, or accessing appointments with your GP?

1. Difficulties booking an appointment

As expected the majority (around 50%) of comments, were about the difficulty people had in booking GP appointments.

Within this category were a number of issues, ranging from not being able to get through on the phone or hitting redial repeatedly, to queuing outside the GP surgery early in the morning, or not having appointment times that fitted in with working life. There was also a distinction drawn between frustrations accessing urgent appointments and frustrations at not being permitted to book non-emergency or follow-up appointments in advance.

● Telephone access

A common complaint was problems getting through on the telephone booking system. Many surgeries open lines for appointments at a certain time and patients have to, in the words of one respondent, endure the 'lucky dip' system of getting through to the receptionist. Many respondents mention the stress and inconvenience entailed in trying to get through, or the time taken repeatedly hitting the redial button:

"Generally, I can see the GP I want, within a 2 day period, not necessarily at a convenient time, provided I participate in a chance game of roulette with the redial function by phone."

"The only way to get an appointment is to sit by the phone at 8:30 and keep calling. Today I had to make 65 re-dials before getting through. The surgery (Sunbury Health Centre) is way way way over its capacity."

"It's taken me three days to actually get through on the telephone to book an appointment at Bourne Hall surgery."

"It can take more than 10 minutes to get through to the operator to then find you are 10th in the queue. There were 2 occasions when having waited until I was 2nd in the queue I was then cut off and had to start again."

"I find the online booking system rarely shows any appointments available. Telephoning is the only way but that means a good 30 mins or so on redial and you have to beg to get an appointment. I hate it."

"If you are able you can wait for the surgery to open at 8am and be given an appt before they take phone calls. There is often a queue of 7-8 people! Phoning can take 2 hours to get through and they are then fully booked. If you don't count yourself as an emergency, you are asked to try again another day. If a doctor asks to see a patient again, they will be given an appt in advance. There seems to be no other way. There is no use asking for your own doctor, you have to take whoever is available."

● Cost of call

Linked with the frustrations surrounding accessing the appointment system by telephone are the associated costs of calls.

"The telephone answering is so slow I ran up a bill from my home phone of £30.00 without actually speaking to anyone."

"Long wait for the phone to be answered. Phone costs are great for older people."

"Not happy with phoning as always have to wait for a long time, meaning it becomes a very expensive phone call."

● Queuing in person

The alternative for many people is to book an appointment in person by going down to the surgery, but for an emergency appointment this entails queuing early in the morning, in some cases before 7am, and at a time when the person is often feeling unwell.

"The only way to get an appointment seems to be to go to the surgery at 0700 when it opens, then get an appointment, then go home, then go back for the appointment. Telephoning is hopeless, you can never get an appointment when you want it."

- **Limited advanced booking and booking follow-up appointments**

The lack of facility for booking longer term appointments is a source of frustration for a large number of people, particularly when they have been advised to book a follow-up appointment by their GP.

“It is not possible to book very far in advance even if the doctor has asked you to come back in say, 2 weeks.”

“Can’t book beyond a month in advance...I can book 6 months ahead at the Dentist but not the Doctor”

“ dragon receptionists at Capelfield Claygate can be very rude and unsympathetic - unless you ring at 8am you will not get one and you cannot get one in advance - it has to be booked on the day come hell or high water!

“Doesn’t book appointments with any other GP than own. I have been trying to book an appointment since March (its November now) but the surgery won’t allow you to book appointments in advance, which makes it almost impossible when you work full time.”

2. Appointment times

For people with full time jobs or with children at school (and many others for whom attending appointments during office hours is difficult) booking a GP appointment can be difficult as many practices are only open during office hours. For those affected this creates a barrier to presenting early with health concerns. Accessing care at the right time can affect prognosis and recovery times as well as preventing needs escalating - thus improving patient outcomes and the efficiency of the system.

“They don’t make provision for people working in London. I would love a Saturday am appt for my regular blood pressure check. I have hypertension am 64 years old and work in the city. I have to leave work early to get to Mill practice on a weekday which is a problem and probably the stress of trying to finish work early raises my blood pressure.”

“Because I have difficulty walking and I have carers I need appointments when I want”

“I can only get my GP if I give plenty of notice. I can usually get an appointment with any GP the same day. I have to rely on someone taking me to the surgery so times are quite critical”

“Too many GP’s at my surgery work part time, so the continuity isn’t there. There should also be access at the weekend and evenings, especially for children and old people. This would take the pressure off A&E too”.

3. Accessibility Issues

A number of people wanted to raise their concerns over discrimination or lack of appreciation and concern for their specific circumstances. They felt that their GP surgery did not give sufficient thought to their specific needs. Patients who need to coordinate their appointments with carers, communicators, or arrange transport find the appointment booking system presents a barrier to accessing primary care.

“Really hard to get an appointment for carers with limited time available or for the person they care for.”

“The loop system in Reception did not work and the attitude was that it didn’t matter they could make me hear or my husband would tell me.”

“As a person with a combined sight and hearing loss, my needs are quite specific i.e. that I am able to make an appointment at a chosen time in order that I can be accompanied by my communicator guide.”

“There have also been occasions where an appointment has been booked for me for a doctor who is upstairs (the surgery has no lift, and I am a wheelchair user)”

“I am seriously visually impaired so accessing my GP is very difficult and the booking system is chaotic and you can hold the phone for ages. I receive a poor service from my GP.”

“As a gay man I have sometimes received discrimination from staff and practitioners due to their lack of awareness of LGB&T issues.”

4. Age

The elderly stand out as a group of people who have particular issues accessing their GP. They are the group of people who are the greatest users of GP services but often encounter the greatest problems (DoH, 2001, JSNA, 2013). They are less likely to be online, be computer literate or have a mobile phone (Berry, 2011). Within the group there will be more people who cannot drive and need to rely on others, they will have more difficulty in standing and queuing for appointments:

“When I have wanted to book an appointment on the same day (or under two weeks ahead). I have tried visiting the clinic when it opens at 7am. I have found by that time there is a queue waiting outside. At my age (85yrs) I cannot readily do so in the dark & cold mornings of winter. In view of the difficulties of getting such an appointment by phoning could there possibly be some arrangement for people over a certain age wishing to make such an appointment?”

“For elderly people without transport it is very difficult to get an appointment to suit my requirements. Can take up to 4 weeks to get an appointment with a particular doctor. Hope you can make things better.”

“(Written on behalf of someone who is blind) Whilst I am usually able to get an appointment on the day that I want by automated telephone, I am concerned that several elderly friends have to walk some distance to the clinic to try to make an appointment in person but this is not always successful.”



5. Continuity of Care

Many patients say they feel that their GP does not know them, and they have little continuity of care as it is not possible to get an appointment with their GP of choice.

“There is an obvious shortage of Doctors and it is very difficult to see your own GP. Little purpose of trying to build up an understanding relationship. The computer appears to rule and is so impersonal.”

“The GPs seen are always helpful but it is not possible to build up a relationship with your own GP, especially if they are part time. I don't feel my GP knows much about me other than the medication I receive.”

“It would be better for continuity of care if I could see one GP and be able to build a rapport so they could fully understand me, my disability and my care preferences. Having to explain every time because it's a different doctor is a bore and very irritating. In sharp contrast, the GP I saw 20 years ago still understands my care needs better than my current GP”

6. Receptionist as a Barrier

There were both positive and negative comments about the role of receptionists. Some respondents wanted to specifically praise the helpfulness of their receptionists, however these were outweighed by patients who found receptionists rude or a barrier to getting an appointment. There were also concerns at having to divulge medical information to a non-medical member of staff, and that this was often requested within earshot of other members of the public.

“Extremely helpful reception staff”

“Some receptionists are unhelpful - they protect the GPs rather than help patients”

“Receptionists seem to take pride in being difficult and unhelpful.”

“The receptionists act like the keeper of appointments and that you must really deserve one before they give one out. Communication is awful and it always feels like a battle to get an appointment.”

7. A&E

In line with recent survey findings, respondents also talked about either playing the system and saying they needed an emergency appointment or going to A&E in order to be seen.

“I consider myself very fortunate that my wife knows how to work the system. I dread to think how I'd ever book appointments. I'd go to A&E or ignore my symptoms.”

“Average non urgent wait for an appt at Oxted Health centre seems to be 10-14 days. VERY hard to get an urgent appt. No wonder A&E so busy.”

“The silly red tape. You have to say it is an emergency to get an appointment, otherwise all the appointments are full for weeks. I rang on a Friday to try and get an appointment for the following week but was told there were none available for the next few days, and I could not book further in advance than that so would have to ring back Monday. On the Monday I was told there were no appointments available all week unless it was an emergency. What classes as an emergency? Surely she would be in A&E if it was an emergency? But neither is it something I wanted to leave her suffering with for two or three weeks....”

“It's a joke trying to get an appointment with a doctor unless you know you're ill and will need it for 3 weeks time! Emergency appointments are for emergencies but people just take these to get an appointment which isn't the point. People end up going to A&E in the end and wonder why it's such a long wait there but 5 hour waits compared to 3 weeks is pretty good in comparison! The NHS is overstretched, perhaps if people had to pay £20 per appointment it would make them think twice about going for unnecessary reasons?”

“Not always able to see a GP when I want if in an emergency. Sometimes had to go to A&E to be seen.”

“Spent two days phoning for appointment. I was tempted to go to a and e, which I know is wrong. In the end had to go to surgery and got a locum appointment. I have lived in the area many years and have never known it so difficult to get an appointment.”



8. Ideas and Good Practice

The comments made by respondents to the survey were not all negative. Many respondents (12%) expressed satisfaction and support for their GP Practices, understanding that they are operating in increasingly challenging environments.

“The GP I see is very understanding, listens, and respects the intelligence of his patients.”

“I can make an appointment at any time - don't have to ring at 8.30am. I can make advance appointments. I always see my own GP.”

“I have no complaints about my surgery, they are very patient and considerate.”

“Very helpful and polite reception staff. GPs all go the extra mile to try to understand and resolve my issues.”

“Brilliant! I even got an appointment at 7.10am as I work quite a way away.”

“Excellent system for same day appointments. To see a particular GP, the appt may be a 2-3 day wait. Works well.”

A further 9% of respondents also suggested ways in which services could be improved. Suggestions were collated and presented as the ‘Preference List’ in section 3.1.

“Telephone triage works well”

“Recently nurses are available who can then decide whether a GP is necessary.”

“Repeat prescriptions are ordered via practice website.”

“It is a walk in service and it is fabulous”

“SMS or easy online appointment booking would be useful.”

“The introduction of telephone consultations has been a great benefit.”

“The Emergency clinic works well.”

“It would be useful to have the doctors open on a Saturday or to offer a home doctors visit, as I do not drive, and find it difficult to get to the surgery as transport can be a problem.”

“Constant queuing on automated service. A call back service would be good”

“We can also book telephone appointments that save us going to the surgery. The GP rings us back after surgery.”

“Home visits needed for husband, normally a late visit. Normally GP will call back before visit, this is appreciated.”

“Tuesdays and Thursdays don't need an appointment in the mornings just walk in and wait.”

“Telephone consultations offered by the surgery are excellent.”

“My GP Surgery is excellent, it has two ‘surgeries’ per day with a drop in service. If there by a certain time, you can be seen.”

8. Next Steps

Healthwatch Surrey's recommendation to GP Practices is to implement the Preference List so that:

- All people regardless of disability, gender, working situation are treated equally and able to access appointments without fear of discrimination or of being overlooked or disregarded.
- Alternative, viable booking methods are available to meet the needs of all, for example, people who are hard of hearing, who have to travel far to work or work shifts, parents on the school run or older students, they should all have a means by which they can realistically book an appointment with their GP.
- Elderly people and people, who are unwell, do not have to stand outside surgeries in the early morning in order to get an appointment to see a GP.
- People do not run up high phone bills in order to book an appointment with their GP.
- People are able to get through to the receptionist on the phone within a reasonable amount of time, i.e. not 65 redials or 3 days of trying.
- Patients do not have to divulge medical information to non-medical staff in order to secure an appointment with their GP
- People respect reception staff but in turn are respected and not subject to rude or disrespectful treatment.

Practices in Surrey are encouraged to be open to hearing about how services could be improved for their patients. We encourage GP Practices to find out how others (in the county and nationally) are resolving these issues and to be open to learning from them.

We recognise that resolving issues surrounding patient satisfaction with their GP appointment booking system is a balance between what works for people and what is possible within available resources (money, people, space, facilities).

GP Practices are welcome to contact us should they wish to discuss the report content and how they will discuss the findings with their PPG.



References:

Next Steps

Healthwatch Surrey will share this report with:

- The Surrey and Sussex NHS Local Area Team (LAT) who are the NHS body that commission GP Practices, followed by a discussion with them of the findings to influence future commissioning of GP services in Surrey.
- The six Clinical Commissioning Groups (CCGs) who commission other NHS services across Surrey and who work very closely with GP Practices. We will discuss with representatives from each CCG how Practices could be supported by CCGs to implement the patients' Preference List and how Healthwatch could offer support to that process.
- Every GP Practice in Surrey. Practices will then be able to consider the findings of the report and we will work with GP Practices to discuss how they can implement the 'Preference List'.
- The Chair of the Patient Participation Group (PPG) of each practice with an offer to meet with them to explain more about the report findings and how the patients' Preference List was created. We will encourage PPGs to talk with their GP Practice about the elements of the patients' Preference List that would improve the patient experience. Healthwatch will be informed by their feedback on how these discussions are progressing.
- The general public using local media, social media and by making the report available on our website so that people who contributed to our research will know what we heard about making GP appointments in Surrey and what we have recommended as a result.

Once all who have received the report have had the opportunity to consider the findings we will engage with them to establish what actions for implementation are planned as a result of the report by the end of November 2014.

We encourage the general public to continue to talk to their GP practice about their views on getting appointments, this report and any future issues which concern them.

Healthwatch Week in September 2014 will enable us to further reach the people of Surrey with the report and will provide an opportunity to gather early evidence of any improvement in their experience.

Healthwatch Surrey receives feedback evidence from people all the time and we will use this evidence to detect if the experience of getting a GP appointment is improving.

We also encourage people to contact Healthwatch Surrey about any concern, experience, issue or feedback they wish to share about a health or social care service in Surrey. People can contact us on...

Telephone: **0303 303 0023 (local rate number)**

Text (SMS): **07592 787533**

Text Relay: **18001 0303 303 0023**

Email: **enquiries@healthwatchsurrey.co.uk**

Website: **www.healthwatchsurrey.co.uk**

Or pop into any of the Citizens Advice Bureaux in Surrey

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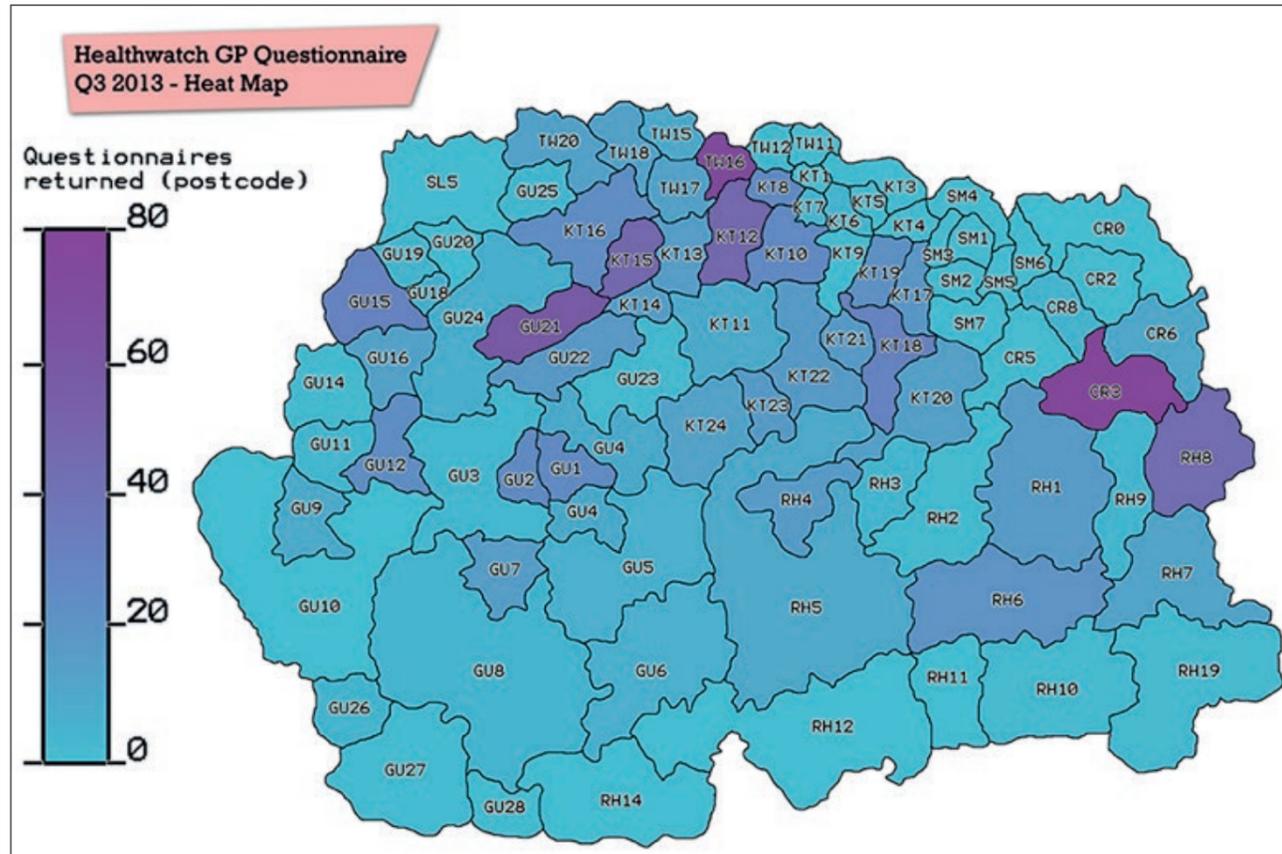
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Appendix 1

Heat map showing distribution of survey responses across Surrey according to post code.



Appendix 2

Analysis at District and Borough Level

This section of the report looks at the responses at a district and borough level to see whether there are any areas that particularly stand out as having satisfied or dissatisfied patients.

This section has been put into an appendix as the results need to be read with caution. They make sense for policy at the borough level only if the responses are evenly distributed across the borough. Due to the fact we only know postcodes and not surgeries that respondents attend we cannot be sure that responses are representative of all surgeries across a borough and not just one or two. As the survey was not randomly distributed, but went out via selected

outlets, it is possible that the results are not representative of the borough as a whole. What they may indicate is that within a borough there is a surgery or surgeries where patients are particularly happy or unhappy with their appointment booking system and that further investigation at borough level may be warranted.

Out of 1,111 respondents, 112 respondents (10.1%) either left the postcode question blank, did not fully complete their postcode, entered an invalid postcode or entered a postcode that was not in any of Surrey's districts or boroughs. For the purpose of this analysis those responses have been excluded.

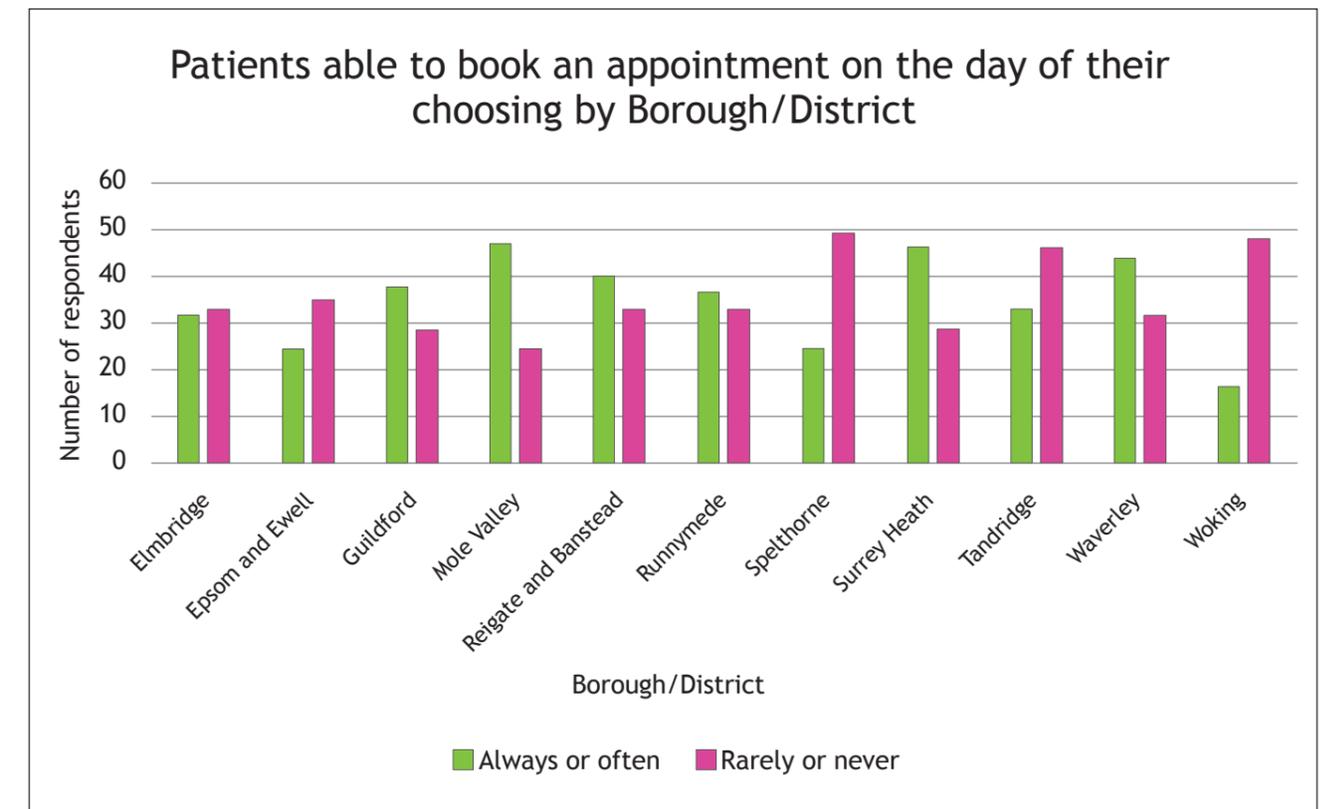


Figure 8: Have you been able to book appointments on the day you wanted?

From the results, respondents from Spelthorne, Tandridge and Woking are less likely to be able to book an appointment on the day they wanted than those from other districts and boroughs. The equivalent result for all respondents¹ was 36%.

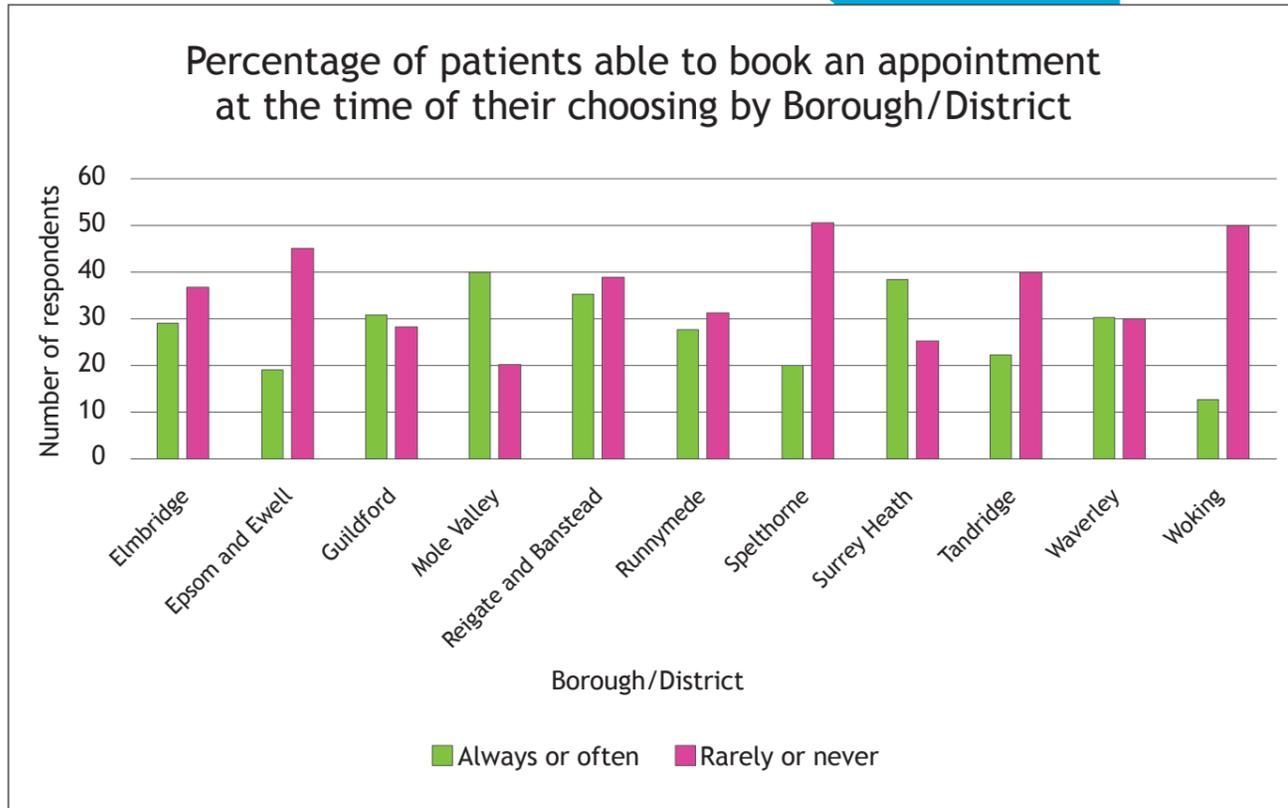


Figure 9: Have you been able to book appointments at the time you wanted?

Respondents living in Spelthorne and Woking are also less likely to be able to book appointments at the time they wanted compared to respondents from other districts and boroughs. 52% of respondents from Spelthorne reported either rarely or never being able to book appointments at the time they wanted, with the result being 50% for respondents from Woking. This compares with 21% for Mole Valley, 26% for Surrey Heath and 28% for Guildford.

As discussed in previous sections of this report, being able to book an appointment with the GP you want is perceived as an important element for continuity of care and many patients like to see “their” doctor. 44% of respondents from Waverley reported either being able to always or often book an appointment with the GP they wanted. This compares with 26% of respondents from Runnymede. 44% of respondents from Spelthorne report rarely or never being able to book an appointment with the GP they wanted, with 38% from Runnymede and Woking. Figure 10 opposite shows the results by district and borough.

¹ Including those who live outside Surrey and who did not enter complete postcodes.

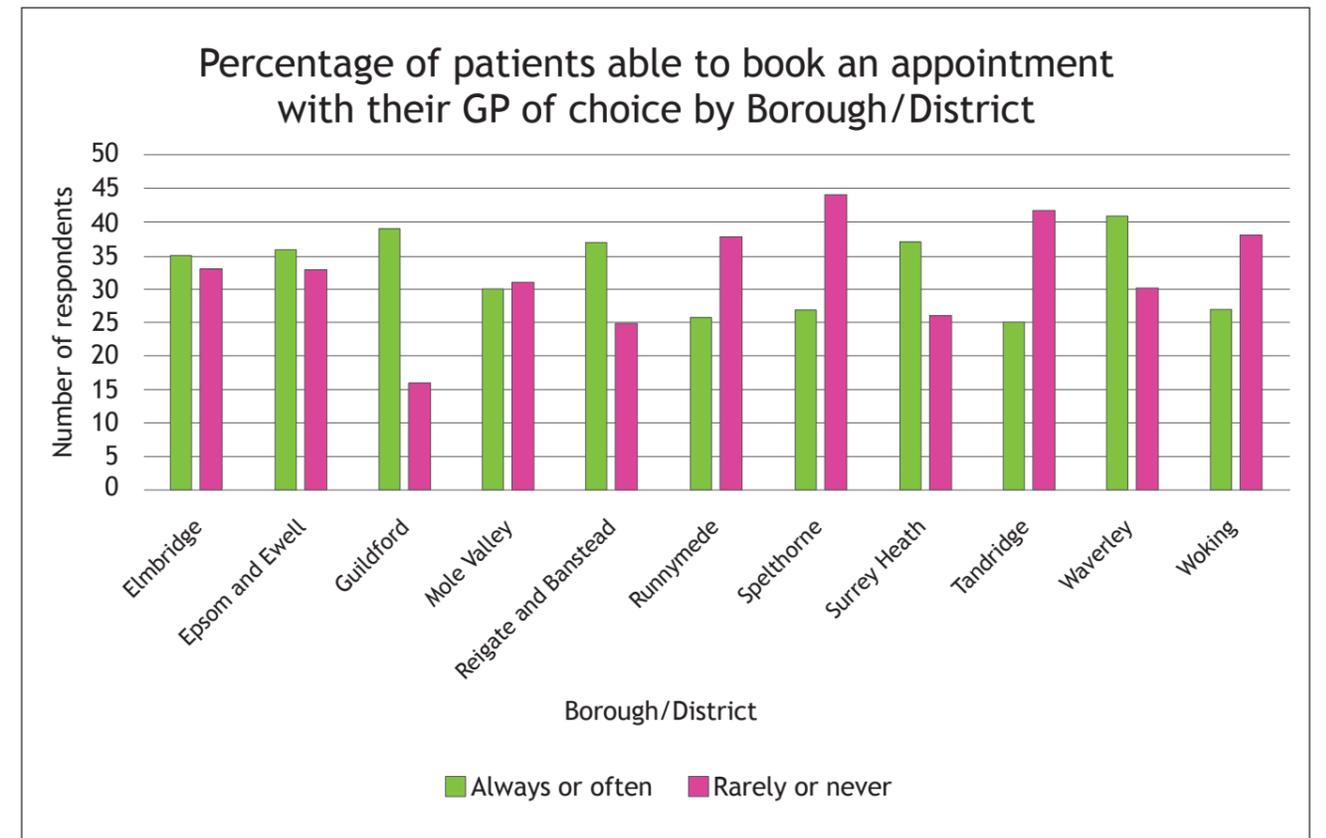
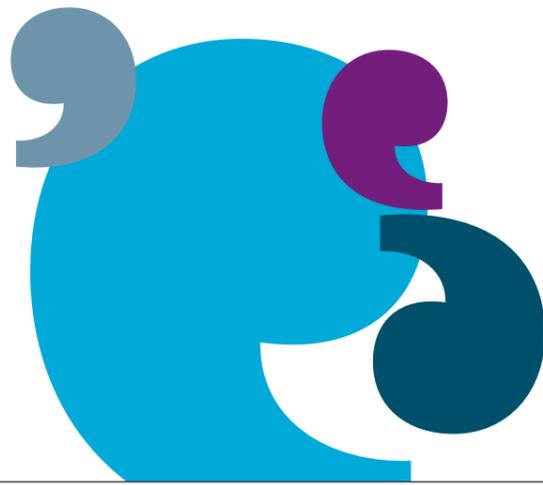


Figure 10: Have you been able to book appointments with the GP you wanted?

Spelthorne, Tandridge, Runnymede and Woking register the most responses for patients unable to get an appointment with their GP of choice.



Appendix 3

GP Surgeries visited during Healthwatch Surrey Engagement Programme:

Ash Vale Health Centre, The Health Centre, Wharf Road, Ash Vale, Surrey, GU12 5BA

Caterham Dene Community Hospital, Church Road, Caterham, Surrey, CR3 5RA

Church Street Surgery, 22 Church Street, Weybridge, KT13 8DY

Cox Lane Surgery, The Cox Lane Centre, Cox Lane, Epsom, Surrey, KT19 9PS

Cranleigh Medical Centre, Cranleigh Medical Practice 18 High Street Cranleigh Surrey, GU6 8AE

Cranleigh Village Hospital, 6 High Street, Cranleigh, Surrey, GU6 8AE

Dapdune House Surgery Dapdune House Surgery Wharf Road Guildford, GU1 4RP

Dorking Community Hospital, Horsham Road, Dorking, RH4 2AA

Dorking Medical Practice New House Surgery, 142a South Street, Dorking, RH4 2QR

Downing Street Surgery, 4 Downing Street, Farnham, Surrey, GU9 7PA

Dr D'Sousa & Partners Practice, 22 Church Street, Weybridge, KT13 8DY

Esher Green Surgery, Esher Green Drive, Esher, Surrey, KT10 8BX

Farnham Community Hospital, Hale Rd, Farnham, Surrey, GU9 9QL

Farnham Dene Medical Centre, Lower Bourne Surgery, Lodge Hill Road, Lower Bourne, Farnham, Surrey, GU10 3RB

Ferns Medical Practice, Farnham Centre for Health, Hale Road, Farnham, Surrey, GU9 9QS

Fitznells Surgery, 2 Chessington Rd, Epsom, Ewell, Surrey, KT17 1TF

Haslemere Community Hospital, Church Ln, Haslemere, Surrey, GU27 2BJ

Haslemere Health Centre, Church Lane, Haslemere, GU27 2BQ

Hawthorns Surgery, 1 Oxford Road, Redhill, Surrey, RH1 1DT

Hillview Medical Centre, 3 Heathside Rd, Woking, GU22 7QP

Leatherhead Community Hospital, Poplar Road, Surrey, Leatherhead, Surrey, KT22 8SD

Leith Hill Surgery, The Old Forge, 168 The St, Capel, Dorking, RH5 5EN

Lingfield Surgery, East Grinstead Road, Lingfield, RH7 6ER |

Medwyn Surgery, Reigate Rd, Dorking, Surrey, RH4 1SD

Merrow Park Surgery, Kingfisher Dr, Guildford, GU4 7EP

Milford Community Hospital, Tuesley Ln, Busbridge, Surrey, GU7 1UF

New Epsom and Ewell Cottage Hospital, Horton Lane, London, Epsom, Surrey KT19 8PB

Oxted Health Centre, 10 Gresham Road, Oxted, Surrey, RH8 0BQ

Poplars Physio, Horton Ln, London, Epsom, Surrey, KT19 8PB

Rivery Wey Medical Centre, Farnham Centre for Health, Hale Road, Farnham, Surrey, GU9 9QS

Stanwell Road Surgery, 95 Stanwell Rd, Ashford, Middlesex, TW15 3EA

Station Road Surgery, 4 Station Rd, Frimley, Camberley GU16 7HG

Stoneleigh Medical Centre, 24A The Broadway Stoneleigh, Epsom KT17 2HU

Tadworth Medical Centre, 1 Troy Close, Tadworth KT20 5JE

The Moat House Surgery, Worsted Green, Merstham, RH1 3PN

The Molebridge Practice, 3 Cannonside, Fetcham, Leatherhead, Surrey KT22 9LE

The Red Practice, Walton Health Centre, Rodney Road, Walton on Thames, KT12 3LB

University Health Centre, The Student Health Centre, Stag Hill, University of Surrey, Guildford GU2 7XH

Upper Gordon Road Surgery, 37 Upper Gordon Rd, Camberley GU15 2HJ

Wall House Surgery, Yorke Rd, Reigate, Surrey RH2 9HG

Walton Community Hospital, Rodney Rd, Walton-on-Thames KT12 3LD

Weybridge Community Hospital (outpatients, hospice, physio & x-ray) 22 Church Street, Weybridge KT13 8DY

Weybridge Walk-in Centre, 22 Church Street, Weybridge KT13 8DY

White Practice, Walton Health Centre, Rodney Road, Walton on Thames, KT12 3LB

Wodeland Avenue Surgery, 91/93 Wodeland Avenue, Guildford, GU2 4YP

Woking Community Hospital, Heathside Rd, Woking, Surrey GU22 7HS

Woodbridge GP Surgery, 1 Deerbarnd Rd, Guildford GU2 8YB

Yellow Practice, Walton Health Centre, Rodney Road, Walton on Thames, KT12 3LB



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