Bridging the digital divide: online access to GP services

During the Summer of 2025 we spoke to people about how easy or difficult they found it to access GP services online and how they felt about the growing use of AI in general practice. Our findings were published in our 'Digital Divide' report.

This report revisits these issues, noting any changes in people's experiences or views following the publication of Government guidance in October 2025 requiring GP practices to keep their online forms open during operating hours.

Who did we speak to?

90 Surrey residents spoke to us at our community engagement events or via our survey. We were particularly interested in hearing from people from black and Asian minoritised communities, those living in areas of deprivation, those experiencing homelessness and people from multiple generations in Guildford, Surrey Heath, East Surrey and North Surrey.

What did people tell us?

How do people interact with their GP practice?

We found an almost even split between those accessing GP services **online** and those who did so **over the phone,** with only a small number of people approaching their GP practice **in person**.

"I can't use a computer so online is out and I don't do it in person as I have to make an appointment and then come back again, and it takes an hour by bus."
Guildford resident, White British, 50 – 64 year old, female

"It's comforting to get a quick answer by using the phone."
Ash resident, White British, 65 – 79 year old, male

Of those accessing their GP practice digitally, around **a quarter** did so using the GP practice website only. Less used the NHS App only but there was a small rise in people using both channels compared to our previous research.

The most common healthcare service accessed online is still 'requesting repeat prescriptions'. People also received messages from the GP practice, got test results and managed upcoming appointments online. Overall, people were accessing more GP services online than previously.

The value of online

Previously, people cited **not wanting to wait in a telephone queue** and the **ability to choose appointment slots** to suit them as reasons for preferring online access, and they felt that their GP practice were generally responsive to online requests. We also heard that people with hearing impairments find the online form more helpful than the phone or in person. This time some people told us that **online access is efficient**.

> "I like making appointments online as it is quick and easy. It has always worked very well for me."
> **Guildford resident, White British, 25 – 49 year old, female**

> "Doing the appointment online is a lot more efficient."
> **Reigate & Banstead resident, Black Caribbean, 25 – 49 year old, female**

Online limitations

Others, however, expressed the opposite view.

> "It is very time consuming and frustrating to fill in all the online information without even knowing if or when you'll get an appointment."
> **Woking resident, White other, 50 – 64 year old, female**

Similar barriers to online access were identified as in our previous report, including that it would be difficult for people with basic literacy skills (**1 in 10** people said **"I don't have the skills or knowledge"** to use online access). This includes those whose first language isn't English, as previously, and, on this occasion, those with dyslexia.

> "I'm dyslexic so really struggle, hence my son does it for me."
> **Surrey Heath resident, White British, female**

However, the most common reason for people not accessing their GP practice online was **that they preferred other methods**, specifically the telephone (**slightly more than 1 in 3**).

GP practices have been required to keep their online forms open during normal operating hours (8 am – 6.30 pm) since October 2025. Whilst there was a slight improvement versus our previous research in terms of numbers of people saying that the online form is available when it should be, just under **1 in 4** people said that it isn't. Further investigation suggested that people's expectations actually exceed beyond this, with many wanting 24 hour availability without understanding the safeguarding risks involved.

> "The online form is only open during practice hours, which is when I'm busiest. It would make it even easier to be able to request an appointment out of hours with the understanding it won't be processed until opening hours, if it's not an emergency appointment (e.g. requesting a blood test)."
> **Guildford resident, White British, 25 – 49 year old, female**

In the summer of 2025 we asked, **"What would make it easier for you to access GP services online?".** We repeated this question in our latest research and people said the same, suggesting **no major progress over the past 9** months to improve online accessibility:

- ✓ Make **more appointment options available online**
- ✓ Provide **skills tutorials/explanation** of how to use the online tools
- ✓ **Simplify** the online form and provide a free text box
- ✓ **Streamline** the number of Apps in use or, at least, ensure that they "talk" to each other
- ✓ Provide the **ability to speak** to someone in person if necessary.

People also told us then and now that they would like to be able to do the following online more easily:

- Better access to their medical records (without having data masked)
- Easier access to linked accounts as a parent or carer
- The ability to book routine tests online, such as blood and smear tests.

In addition, people also asked for the ability to book baby vaccinations, to attach letters and other documentation to the online form and for individual care pathways to be made clearly available online.

How would people like to make an appointment?

Compared to our previous research, we saw an increase in **telephone use** and a decrease in **online access** and **in person. Generally, people were making appointments in their preferred way.**

> "I'm not computer savvy so I need to use the phone."
> **Surrey Heath resident, White British, 80 -89 year old, male**

Previously, people talked about the use of **"buzzwords"** which enabled them to trigger specific responses if they used them in their online form. This time, we found people struggling to get the response they wanted because they didn't know which words to use to accurately describe their specific needs.

> "I'm happy to do it (online) if I could get through it easily! Is it the language you have to use. For example, if I just say I have a cough, I just get directed to a fact sheet. We're in our 70s and struggle. It must be impossible in your 80s."
> **Guildford resident, White British, 65 – 79 year old, female**

Previously, people reported that they felt **pressurised by their GP practice** to make an appointment online; we found this still to be the case.

> "It is difficult to make an appointment over the phone and often referred back to the website."
> **Surrey Heath resident, White British, 50 – 64 year old, female**

Use of Artificial Intelligence (AI)

We asked people, **"How happy or unhappy would you be for AI to be used to carry out healthcare services within your GP practice?"**

Most people were happy for AI to be used to answer non health related questions and assist patients writing online requests for appointments. Responses were divided with regard to writing up medical records following GP consultation. However, most people **weren't** happy for AI to carry out routine screening/testing for low risk conditions, to assess health needs on booking an appointment or to answer health related FAQs.

The main concerns remained a lack of trust in a relatively new technology, the quality of the data informing AI and the lack of/preference for human interaction.

> "With AI there's a concern there will be inaccuracies which could potentially harm a person or prevent them from getting the help they deserve. Although I agree AI can be great for assisting humans, I believe testing risks and so forth requires human supervision."
> **Reigate & Banstead resident, White (other), 18 – 24 year old, female**

Spotlight on: the homeless population

We wanted to understand the specific barriers to online access to GP services for homeless people. We spoke to clients of the Probation Service and people supported by Guildford Action who 'support people who in Surrey who are struggling, traumatised, living on the edge, and in real danger'. They told us that many people on probation or those that are homeless do not have access to a mobile phone or a phone that can support the NHS App, nor do they have access to the internet. Making an appointment online can also be difficult due to a lack of appropriate skills and knowledge.

But for many, the main barrier is actually the fact that registering with a GP without a permanent address is difficult. Other barriers and issues include: tolerating a low level of health and not prioritising their health needs over other concerns; feeling stigmatised by health care professionals and others in authority because of their particular situation and, for those on probation specifically, managing a complex landscape of appointments which also de-prioritise making appointments to see their GP.

"My phone doesn't support the App. I tried to download it but it wouldn't let me do it. I hate anything online. I sometimes call but I don't like to wait on the phone so I'll walk to the surgery. I don't get up until later. I do need to get down there again because I need to renew my meds for my mental health and I need a new inhaler but when I went last time they said there were no appointments for a month and to download the App. Now I don't know what to do."
White British, 25 – 49 year old, female, living in temporary accommodation.

In conclusion

Those that are accessing their GP online generally find it easy to use and receive a response from their GP practice which they are happy with. However, the same frustrations do remain, with people feeling restricted by the lack of free text boxes on online fomes, what they see as unnecessary questions and lack of knowledge about the words and terminology which will trigger an appropriate response. We found people with certain conditions, such as dyslexia, struggled with online access and often felt pressurised to use this method.

Having the online form open during operating hours has been positively received but there is now a desire for even greater online access, out of hours. People remain concerned that AI cannot be trusted for most clinical tasks .

We call for the continued use of multi channel access – specifically non digital routes for those that aren't digitally able - and training and support to help people effectively use online services.