



Getting to see your Doctor

Patient experience of General Practices, a patient survey.

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Contents

Executive Summary	pages 2-3
Summary	pages 4-5
1. Introduction	pages 6-10
2. Objective	page 10
3. Methodology	page 11
4. Results	pages 12-14
5. Discussion	pages 15-17
6. Conclusions	page 18
7. Recommendations	page 19
Acknowledgements	page 20
References	page 21
Appendices	
Appendix A How to Complain	page 22
Appendix B The Survey	page 23-26



Executive Summary

There is a growing focus on the performance of the NHS. There are also increasing pressures on NHS personnel and their ability to continue to deliver services that we expect and respect.

Following recent press reports on the deficiencies of General Practice, Healthwatch Hampshire initiated a survey to assess the situation in south west Hampshire. The survey sought the views of around 250 adults who attended General Practices in five towns, Hythe, Lymington, New Milton, Ringwood and Totton. These towns' population have more than twice the national average of people over the age of 65 years. It is vital that the General Practice service is able to cope with their needs.

Like the population of England as a whole, a large majority (95%) of the participants in this survey were very supportive of the care provided by their GP. This is despite evidence discussed in this report that the pressures of budgetary limitations and the increasing challenges of an ageing population outlined by the Royal College of General Practitioners are resulting in a less than adequate or ideal service.

Around one third of the participants in this survey had experienced difficulties accessing a doctor of their choice. There was a large variation in the time it took to see a GP with the extreme being 6 weeks. A large proportion, many elderly, are having to wait up to 3 weeks. The out-of-hours service was viewed favourably by the majority, but there was a sizable minority (just over 20%) who preferred to use A&E for non-emergency treatment because of their poor experiences of the out-of-hours service.

Alternative methods of accessing GP





services were viewed positively. Over a third of the participants supported the idea of on-line / video (Skype) consultations for both normal surgery consultations and out-of-hours consultation, provided that it was available to everyone and no one was disadvantaged. Even those less able to cope with modern technology felt it would be good for those who could manage it. Using this method of interface for care homes could be a huge benefit for both doctors and elderly residents.

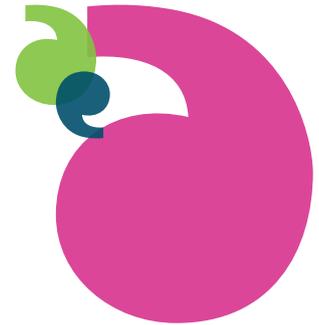
It is vital that General Practices publicise prominently a clear and understandable guide for their patients to follow if they wish to make a complaint. A majority of the survey participants did not know who they should complain to about a GP Practice, saying that they would complain to the Practice of concern.

Not surprisingly, this survey reinforced findings of other studies, clearly highlighting the key issues for south west Hampshire. Healthwatch Hampshire will be using its findings to help GPs improve the services they offer.



Christine Holloway
Chair, Healthwatch Hampshire

Summary



The service provided by General Practices is a topical subject in the media. It is reported widely that people across England are facing increasing difficulty in getting prompt appointments with a GP. A recent survey suggested that people in west Hampshire are not satisfied with their experience of making an appointment with a GP compared to people in other areas in south England^[1]. This is important, because waiting for a GP appointment can lead to stress or pain which can exacerbate the ill health of patients. People in south west Hampshire are most at risk from the increasing length of waiting times, being the most likely in Hampshire to need GP services because of the increasing age of this population^[2]. So the growing challenges related to GP services are of significant concern in south west Hampshire. According to a recent study, unsuccessful attempts to get an appointment at a suitable time resulted in a quarter of all visits to Accident and Emergency (A&E) Departments^[3]. Practitioners have now been advised by the General Practitioners Committee to consider alternative ways of improving access to their services, such as on-line video calling^[4].

Based on increasing evidence of difficulties related to GP services, a Healthwatch Hampshire pilot study was initiated. The aim of this pilot study was

to investigate access to GP services by people in South West Hampshire. We conducted a survey focused on access issues such as waiting times, out-of-hours service, alternative access options, and patients' understanding of how to make a complaint at local General Practices.

250 people responded to our survey about access to GP services. The majority (58%) of these participants were over 65 years old, and nearly one fifth reported having one or more disability. Just over one third of people reported that they were not able to see a doctor of their own choice when they needed to, and over one in four people could not get a same day appointment.

On-line video calling should never replace face-to-face consultation; however, when asked about whether it should be offered as an option, just over one quarter of the people reported that they would consider using on-line video calling during Practice opening hours, and just over one third of people would consider using this to contact an out-of-hours doctor. A level of high support (86%) was demonstrated for General Practices adopting on-line video calling to increase practice efficiency, even if the people who supported alternative access didn't intend to use it for themselves.



Participants reported a wide range of waiting times to access a GP ranging from 1 to 6 weeks.

Just under two-thirds of people in our survey did not know who to complain to if there was an issue at their GP Practice (63%).

- Just over half of these participants (56%) said that they would contact the Practice if there was an issue.
- Just under half (44%) said that they would use the internet to find out how to complain.

One third of participants in this study in south west Hampshire are experiencing difficulties accessing a doctor of their choice. Because of the higher proportion of elderly people in south west Hampshire, ease of access to GP services is crucial. The variability and length of waiting time to see a GP of choice (up to 6 weeks) is unacceptable.

There was a high level of satisfaction with the out-of-hours service, but a sizeable minority (just over one fifth) preferred to use A&E for a non-emergency.

Just over one third of participants supported alternative access to a GP for the out-of-hours service. There was clearly acceptance that alternative access options should be provided by

General Practices, but these options should give benefits to all patients and ensure that no-one is disadvantaged in any way.

Information related to the process for making a complaint about GP services should be easily accessible and prominent, both at the GP Practice and on the internet.

The participant sample in this survey reported a higher than the average for England representation of disabled and elderly adults. Which reflects a vulnerable and seldom heard group.

“Two-week wait to see a GP will become the norm by next year, doctors warn”

Mail Online,
21st May 2014

1. Introduction

Access to GP services is an issue of growing concern both locally and nationally. Consultation rates within General Practice have been increasing year on year since 1995^[6]. Healthwatch England have said that people should be able to access the treatment and services they need. They also highlight that people feel that prompt access to GPs is particularly important as GPs are often the gatekeeper for access to other medical services^[7].

There are growing challenges in patient experience of access in Hampshire^[7]. The increasing number of patients with a long-standing health condition in Hampshire places increasing demands on GP services.

The highest users of GP services are older people, for whom access is vital. Critically, the New Forest population (south west Hampshire) has nearly double the average number of people who are over 65 years of age^[2]. This means that people in this area are most disadvantaged from increases in GP waiting times.

In view of this, Healthwatch Hampshire decided to undertake a survey on access to GP services, to explore waiting times, out-of-hours service, and alternative access options.

“If waiting times get longer, it will be more difficult for GPs to ensure that problems are caught early, and the pressure on A&E will intensify. This is bad news for patients and bad news for the whole of the NHS.”

Dr Maureen Baker,
Chair
Royal College of General Practitioners
24th December 2013





1.1 Waiting times

The NHS has recently published a Handbook on the NHS Constitution, which states that the NHS aspires to provide high quality care that is focused on the patient experience, and which reflects the needs of the patient and their families^[8]. The Chairman of the General Practitioners Committee says that public satisfaction with GP services remains very high^[4]. Despite this, there are growing pressures on General Practice services in relation to patient experience of access in Hampshire^[6].

Numerous surveys have highlighted that the number of people in England who are waiting for a week or more to see or speak to their GP has been increasing. In March 2014, Dr Maureen Baker, Chair of the Royal College of General Practitioners, warned that patients are waiting far too long for a GP appointment^[9]. From their recent survey, a third of adults were unable to get an appointment for themselves or

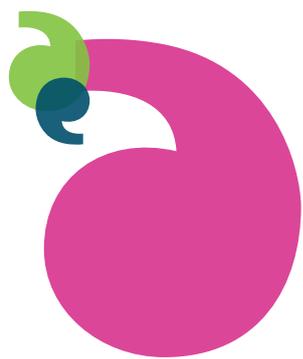
their family in the same week, and just under half the people surveyed thought that the increase in waiting times to see their GP could impact their health^[9]. This is not surprising, as excessive waiting times to see a doctor can itself lead to adverse health effects^[10].

In a recent survey this year, people in west Hampshire rated their overall experience of satisfaction of 'making an appointment with a GP' especially low when compared to the experiences of other people across the south of England, suggesting that there are particular challenges in west Hampshire^[1]. Interestingly, it has recently been suggested that difficulties with access to GP appointments are implicated in rising A&E admissions for non-emergency care^[11].

“GPs who have been the bedrock of the NHS are struggling, seriously struggling. As we get older, as we live longer, we are putting more strain on general practice. It would not be unusual for GPs to see 40 to 50 patients in any one day.”

Professor Clare Gerada, Chair
Royal College of General Practitioners
cited in The Daily Mail, 28th February 2014





1.2 Out-of-hours service

The recent increase of avoidable emergency admissions for acute conditions in Hampshire has resulted in increased pressure on Hampshire emergency services, even though out-of-hours doctors are available^[6]. West Hampshire has a higher than average rate of non-emergency A&E attendances for children and young people. Crucially, it has been proposed that the lack of GP appointments may be affecting the recent increase in avoidable emergency admissions in A&E departments, and research has shown that patients are less likely to use A&E departments if they have good patient experience at their GP^[11]. According to a recent study, unsuccessful attempts to get an appointment at a suitable time result in one quarter of all visits to Accident and Emergency (A&E)

Departments^[3]. As a lack of prompt GP appointments have been implicated in this rise, our survey also explores people's preferences for visiting A&E or using the out-of-hours service. Recent General Practitioners Committee guidelines suggest that practices should improve out-of-hours services and consider using alternative access^[4].



NHS England - NHS Choices

“The out-of-hours period is from 6.30pm to 8.00am on weekdays and all day at weekends and on bank holidays. If it is not an immediate emergency then call NHS 111. NHS 111 is available 24 hours a day, seven days a week.” [12]



1.3 Alternative access

Despite the fact that the UK family doctor service is admired around the world, access times are increasing, and GPs have now been advised to consider alternative ways of providing access such as on-line video calling to improve accessibility^[4]. The on-line video calling service (also commonly known as ‘Skype’) was first used with patients in prisons, and more recently used with elderly people in care homes^[13]. In one care home this demonstrated that on-line video calling can cut A&E admissions by 69% and admissions to hospital for the elderly by 45%^[13]. This suggests that on-line video calling could have a real impact on people who are waiting too long for a face-to-face consultation with their GP.

Recent General Practitioners Committee guidelines suggest that practices should consider using the latest technologies as an alternative to face-to-face consultations where this is appropriate^[4,14]. These guidelines are supported by several recent studies, including one by NHS Local in 2010 which shows that over half of patients would choose to consult their GP using an on-line video calling service if they could^[14]. This NHS study revealed that people were positive about the benefits that on-line consultation could bring for disabled people, live-in carers, patients who feel

too unwell to travel, patients with small children, patients with an infection, and those in full time work.

According to Professor Clare Gerada, on-line consultation could be invaluable for those who are housebound^[14]. The proportion of people with a disability in the west New Forest area (8.9%) is the highest in Hampshire and higher than the average for England^[2]. Further, one in five visits to see a GP are “unnecessary” appointments for minor problems which could be resolved at a pharmacy^[15]. Access to a GP through on-line consultation could potentially reduce the number of unnecessary appointments. While technology can never replace the benefits of a face-to-face surgery consultation, it could reduce a GP’s workload and thereby improve efficiency and reduce waiting times for all patients^[14].

The next few years will be crucial for finding out whether patients would benefit from GPs adopting an on-line system to consult patients. Whether this will be a realistic option which could be potentially useful for people in south west Hampshire, given its older population, will be explored in a future survey.



Why south west Hampshire?

South west Hampshire is a rural area with higher than average numbers of older people, disabled and people who are vulnerable to poorer levels of health because of social isolation, mental ill health and caring responsibilities^[2]. People in this area have reported poor levels of overall experience for making an appointment to access GP services^[1]. For elderly people living in a rural area, a GP Practice is their first point of contact for health concerns, and older people are the highest users of health services^[2]. This part of Hampshire has the greatest future challenges related to accessing a GP, and it is vital that GPs are available in a timely manner, and that elderly people are not kept waiting too long to see a doctor.

In view of this, Healthwatch Hampshire decided to survey access to GP services, out-of-hours service and alternative access options in south west Hampshire. The Healthwatch Hampshire survey was conducted independently of any General Practice patient group or any previous study.

The Francis Report (recommendation 109) recommends that methods of registering a comment or complaint must be easy to understand and accessible^[5]. As there are growing challenges related to GP services in this area, the survey also enquires whether patients in this part of Hampshire know how to make a complaint about GP services.

2. Objective

The aim of this brief survey was to investigate the experience of access to GP services by people in south west Hampshire. Our brief survey specifically investigated:

- Waiting times
- Out-of-hours service
- Alternative access options at local GP surgeries

“Three-week wait to see your doctor: Millions of patients are denied a prompt appointment to see their GP”

Mail Online, February 28th 2014



3. Methodology

Participants:

Participants were 250 randomly selected adults at five towns: Hythe, Totton, Lymington, New Milton and Ringwood. Participants were excluded if they were under 18 years old, were unable to give verbal consent, or were not registered at a General Practice within south west Hampshire. This survey used a random sample of adults. Although this sample method avoids most sample bias, it can be biased towards people who are particularly helpful, as participants volunteered themselves or declined to take part^[16]. While the sample size is small (n=250), it is adequate for a pilot study.

Survey:

Participants were presented with a questionnaire which classified their age range, ethnicity and gender of the respondents (Appendix B). The questionnaire consisted of 16 structured statements and three open-ended questions. Participants considered statements relating to their recent experience of services (within two years) and rated their level of agreement or disagreement for each statement on a 'Likert Scale', a scale commonly used in survey research. The response options were: strongly agree, agree, disagree, strongly disagree, or don't know. Participants' comments to open-ended questions were recorded verbatim.

Scoring:

Frequencies and percentages are reported for each response (as this was a limited sample size, agree/strongly agree and disagree/strongly disagree responses were combined).

Procedure:

The survey was undertaken with the help of volunteer psychology students from the University of Portsmouth. The sample of participants was selected randomly by researchers positioned outside surgeries in close proximity to local pharmacies in each of the towns.



4. Results



Analysis of the responses showed the 250 participants to be predominantly white, female, and aged between 65-79 years old.

See Table 1.

Table 1

Demographics number per cent

Sex	<i>n</i>	%
Female	173	69%
Male	77	31%
Disability	<i>n</i>	%
Yes	45	18%
No	188	75%
Unknown	17	7%
Ethnicity	<i>n</i>	%
Asian British / Chinese	1	0.4%
Mixed Background	1	0.4%
Other	1	0.4%
White	247	98.8%
Age	<i>n</i>	%
18-24	8	3%
25-49	34	14%
50-64	61	24%
65-79	119	48%
80+	26	10%
Unknown	2	1%

Overall the demographics are representative for age, ethnicity and disability, but not gender: Hampshire's population is 48.6% males, 51.4% females^[2].

In this sample, 58% of participants were over 65 years old. This reflects the older population found in west Hampshire compared with Hampshire as a whole. Elderly adults are more likely to have one or more long-term condition^[2]. These demographics are shown in this survey, in which nearly one fifth [18%] of participants in this study reported having one or more disability. A large proportion (98.8%) of people in this survey identified themselves as White British, which can be compared with 93% who identify themselves as White British in west Hampshire, and 91.8% in Hampshire as a whole. This sample reflects an older group of adults with an increased level of disability, who are vulnerable to poorer levels of health because of social isolation, mental ill health and caring responsibilities^[2].

The responses to our survey statements are reported in Table 2.



Table 2

Waiting times	
Q1	<i>I am satisfied with the quality of care from my GP Practice:</i> 95% Agree : 4% Disagree : 1% Don't know
Q2	<i>I am satisfied with the waiting times for a suitable appointment at my GP Practice:</i> 68% Agree: 30% Disagree: 2% Don't know
Q3	<i>I am able to book an appointment to see a doctor of my own choice when I need to:</i> 64% Agree: 34% Disagree: 2% Don't know
Q4	<i>I can get a same-day appointment when I need one:</i> 59% Agree : 26% Disagree : 15% Don't know
Q5	<i>I am treated quickly at my GP Practice when I need to be:</i> 83% Agree : 8% Disagree : 9% Don't know
Q6	<i>I know who to complain to if there is an issue at my GP Practice:</i> 63% DON'T KNOW : 34% Agree : 3% Disagree
GP Practice Out-of-Hours Service	
Q7*	<i>I was satisfied with the ease of using the GP Practice Out-of-Hours Service, the last time I used it:</i> 85% Agree : 15% Disagree
Q8*	<i>I am satisfied with the quality of care I have previously received from the Out-of-Hours Doctors:</i> 85% Agree : 15% Disagree
Q9	<i>I would prefer to go to A&E than be visited by the Out-of-Hours Doctor:</i> 59% Disagree : 22% Agree : 19% Don't know
Q10	<i>I know who to complain to about the Out-of-Hours Doctor service:</i> 84% Don't know : 10% Agree : 5% Disagree
Alternative Access	
Q11	<i>I am familiar with 'Skype' video calling:</i> 63% Yes : 37% No or Don't know
Q12	<i>I would consider using Skype to 'contact' an Out-of-Hours Doctor than to have a home visit:</i> 54% Disagree : 34% Agree : 9% Don't know
Q13	<i>I would consider using Skype to 'contact' a Practice nurse or Doctor during normal opening hours:</i> 60% Disagree : 27% Agree : 13% Don't know
Q14	<i>I would consider using an 'on-line' confidential support helpline to contact a Practice nurse or Doctor during normal opening hours:</i> 49% Disagree : 36% Agree : 15% Don't know
Q15**	<i>I would consider using an 'on-line' confidential support helpline to contact a Practice nurse or Doctor during normal opening hours if someone else set it up for me (at home):</i> 61% Disagree : 37% Agree : 2% Don't know
Q16	<i>I would be happy if my Practice operated an on-line system for other patients, if it led to an overall more efficient service for myself:</i> 86% Agree : 6% Disagree : 8% Don't know

* excluding those who have not used the service recently (last 18 months)

** optional statement limited to participants who did not have on-line access set up at home.



Comments

Comments made by our participants about length of waiting times indicated that they were between 1 and 6 weeks, with a 3 week wait being the most frequently reported waiting time. The maximum waiting time of 6 weeks was reported by one participant to see a doctor of choice. The following was a specific comment: *“Rang 31st March and offered an appointment on 3rd May or 22nd April”*. While some adults are satisfied to have access to any GP *“I don’t mind which doctor I see”*, others have specific reasons for seeing the same doctor, and were not satisfied: *“I have difficulties getting appointments with the same doctor for my disabled son, there are too many locums”*.

Although the majority of patients (85%) do not know who to complain to about poor out-of-hours service, 58% of participants who provided comments on this said that they would contact the Practice if there was an issue.

Participants disclosed twice as many negative comments than positive comments for on-line access at General

Practices. The most frequent reason given was lack of trust for an on-line system (7 of 31 comments). As one person commented: *“You have to trust the GP system works, it’s only as good as its operators.”* Other comments include cost and impracticality. Several positive comments were reported about the benefits of an on-line consultation for reducing the need for face-to-face appointments. As one person commented, *“It would be good for some consultations because I don’t always have to be there”* [at the Practice]. Other comments highlight practical reasons for face-to-face consultations.



5. Discussion



Access to services

Healthwatch England states that people have the right to access services when they need them. Just over one third of people reported that they were not able to book an appointment to see a doctor of their choice when they needed to (34%). Nearly one third of people were not satisfied with the waiting times for a suitable appointment at their practice (30%). Over one in four people stated that they cannot get a same day appointment when they need to (26%). Despite these negative reports, 95% of adults in this survey were satisfied with the quality of care from their GP Practice. This demonstrates that while satisfaction with care from their GP Practice is high, people are experiencing specific difficulties with access to doctors. Access is vital for the more vulnerable members of the public, for whom the GP Practice is the first point of contact.

Just under two-thirds of people in our survey did not know who to complain to if there was an issue at their GP Practice (63%). Of the participants who did not know who to complain to, 56% said that they would contact the Practice if there was an issue, and 44% said that they would use the internet to find out how to complain. This

demonstrates that it is important that GP Practices have accurate and up-to-date information on their websites as well as in their practice about their complaints procedure.

Healthwatch Hampshire plans to follow this survey with an enquiry covering Practice Managers' responses about length of waiting times for appointments, and access to information on how to make a complaint.

Q1.

95% of respondents felt that the quality of care from their GP Practice was good or very good. Comments included:

"GP Practices are friendly, good atmosphere, they look after you."

Q2.

30% of respondents were not satisfied with the waiting times for a suitable appointment at their GP Practice. Comments included:

"The waiting times at my GP surgery are appalling."

Q8.

15% of respondents were not satisfied with the quality of care received from an out-of-hours Doctor. Comments included:

"...when I had a heart attack, it took two and a half hours for the out-of-hours doctor to call back."

Out-of-Hours Service

High levels of satisfaction with quality of care (85%) and ease of using the out-of-hours service (85%) were reported by those with recent experience. When asked about their preferences for A&E or out-of-hours service for a non-emergency, just under two-thirds of the people in our brief survey stated that they would not prefer to go to A&E when the out-of-hours service was available (59%), while just over one fifth of people said that they would prefer to go to A&E (22%). The most frequently reported reason for preferring an out-of-hours doctor's visit rather than attending A&E was transport (12 of 51 comments). One in four people in south west Hampshire is affected by very poor geographical access to services^[2]. Despite this, there has been a recent increase in Hampshire of avoidable A&E admissions. As proximity to the nearest A&E may be an influencing factor, no comparison of towns was conducted. All of the 25 participants who commented on a poor recent experience of the

Q7.

85% of respondents were satisfied with the ease of using the out-of-hours service. Comments included:

"The out-of-hours service is convenient."

out-of-hours service said that they would prefer admission to A&E for a non-emergency concern. For these participants, a previous negative experience of their GP practice was the reason given for choosing to use A&E.

The majority of patients commented that they would contact the practice if they needed to complain about out-of-hours service, reinforcing the previous finding that General Practices should be the key point for information on GP complaints. It is essential that Practices should have up-to-date and easily accessible information about how to make a complaint.

These findings show that most people prefer a home visit from an out-of-hours doctor for a non-emergency health problem but that poor experience of an out-of-hours service may influence their decision to go to an A&E department. A good out-of-hours service should therefore be of primary concern in south west Hampshire.

Alternative Access

The General Practitioners Committee says that if General Practices consider an on-line video calling



Q13.

60% of respondents would NOT consider using Skype to contact their Practice nurse or doctor. Comments included:

“I use Skype regularly, but it could lead to misunderstandings, I don’t trust computers”

27% of respondents WOULD consider using Skype to contact their Practice nurse or doctor. Comments included:

“Skype would be better for a triage, rather than getting a voice over the phone, they can see how you are looking”

Q13

service as an alternative to face-to-face consultations as this may lead to an overall more efficient service. A more efficient service would be invaluable for this older population for whom access to GP services is vital. One recent NHS study found that over half of patients would use an on-line video calling service if they could^[14].

Our survey found that, of the people who were familiar with on-line video calling, just over one third would consider using this as an alternative to contact an out-of-hours doctor rather than have a home visit (34%). Notably, 27% would consider using on-line video calling to contact a Practice nurse or doctor while the surgery was open, and 36% would consider using an on-line confidential support helpline. These results showed that there was a positive response towards using alternative access options for the out-of-hours service.

The optional statement for participants who were not familiar with ‘Skype’ video calling (Q.15) found that 40% of people who do not have on-line facilities set up at home would consider using an on-line confidential support helpline, if someone else set it up for them. Given the demographics of this survey, this potential is worth exploring especially between General Practices and care homes in Hampshire. Previous evidence has demonstrated that on-line video calling has cut A&E and hospital

admissions for the elderly^[13]. Question 16 asked whether people would be happy for their Practice to operate an on-line system for other patients. A high proportion of people agreed with this (86%), with only 6% disagreeing, suggesting a high level of support for alternative access options in General Practices.

The comments from our participants suggest that on-line access is perceived as better than a telephone, but less practical than a face-to-face consultation with a GP. The findings also support the possibility that on-line consultation reduces unnecessary appointments. This should be investigated further. People make more than 51 million “unnecessary” visits to their GPs in England and Wales each year; one in five visits to GPs are for minor problems^[15]. For those who can afford access and can use it, on-line consultations could reduce face-to-face appointments. The benefits of any alternative access options must be experienced by all patients, regardless of the digital divide between users and non-users of digital technology.

Healthwatch England states that people should be able to access the treatment and services when they need them, and understand their rights as health care consumers. The people in this survey are experiencing difficulties accessing GP services when they need them.

6. Conclusions

6.1 One third of participants in this pilot study in south west Hampshire reported experiencing difficulties accessing a doctor of their own choice.

6.2 Because of the higher proportion of elderly people in south west Hampshire, prompt access to GP services is of vital concern.

6.3 The variability and length of waiting time to see a GP of choice (up to 6 weeks) is unacceptable.

6.4 Whilst there was a high level of satisfaction with the out-of-hours service, a sizeable minority (just over one fifth) preferred to use A&E for a non-emergency.

6.5 On-line video calling should never replace face-to-face consultation; however, when asked about its use as an alternative option, just over one third of participants gave positive support for this alternative access to a GP for the out-of-hours service.

6.6 Participants clearly agree that alternative access options should be provided by General Practices and it is important that these options give benefits to all patients and not just one section of the community.

6.7 A large proportion of the patients were unaware of the process for making a complaint about General Practice services.





7. Recommendations

7.1 Whilst access to General Practice services is good for some, others have unacceptable waiting times. Best practice must be shared between those Practices with good access to services and those that are not as good.

7.2 There needs to be improvement to waiting times during Practice opening hours, and to the out-of-hours service to reduce the over-use of A&E for non-emergency treatment. Alternative approaches were seen to be acceptable options in addition to face-to-face consultation by patients.

7.3 The process for making a complaint must be publicised prominently at General Practices and on their websites. It must give necessary confidentiality and the process must be flexible, be simple and easily understood.

Healthwatch Hampshire will follow up these recommendations to ensure that they are acted upon locally.

The findings from this survey cannot necessarily be generalised to other areas in Hampshire.

We would like to hear from anyone in Hampshire who is experiencing any of the difficulties highlighted in this report.

Dissemination

Healthwatch Hampshire will disseminate the findings from this Patient Survey to NHS West Hampshire Clinical Commissioning Group, General Practices in south west Hampshire, and to Hampshire residents and other service users.

Acknowledgements

Healthwatch Hampshire would like to thank the Practice Managers at General Practices in the South West Hampshire area, and also thank the psychology students from the University of Portsmouth who volunteered their time to conduct this study.

This report is available in large print upon request.

“I used Skype for personal use, I disabled it as it’s awful!”

“Skype would suit me with my severe condition, when I have an attack sometimes I cannot move my body at all, but speaking directly to the screen would be all I could manage”

“An on-line helpline is no good for people like me with dyslexia...”

“How can Skype help my doctor bring me a prescription in an emergency?”

“Got a computer - can’t afford to be on-line”



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Appendices

Appendix A - How to Complain

A patient can complain about GP services either by contacting the Practice Manager at the surgery, or by contacting NHS England by telephone or in writing. The NHS England website (below) provides full details of how a patient can complain about GP Services. Here are NHS England contact details:

Telephone:

NHS England: 0300 311 22 33 (Monday to Friday 8am to 6pm, excluding English Bank Holidays).

Address:

NHS England
PO Box 16738
Redditch
B97 9PT

Email:

england.contactus@nhs.net. Please state: 'For the attention of the complaints team' in the subject line.

Website:

<http://www.england.nhs.uk/contact-us/complaint/>

NHS Hospitals:

If the complaint is about an NHS Hospital, patients can contact the NHS Hospital Customer Care Team directly, or contact the Clinical Commissioning Group (CCG) who commission NHS Hospital services. Different hospitals in Hampshire have

different CCGs, so please ask your hospital for their CCG contact details. If the reply or response from NHS England is not satisfactory, the NHS England website provides details of how to contact the Parliamentary and Health Service Ombudsman to review a complaint.

Free support in making a complaint:

People who would like support in making a complaint about the NHS can access an NHS complaints advocacy service which is free, confidential, and totally independent of the NHS. In Hampshire excluding Portsmouth city, Southampton city and the Isle of Wight, this NHS advocacy service is provided by Healthwatch Hampshire (Healthwatch Hampshire: 01962 440 262). Please contact Healthwatch Hampshire for details of this service.

If you are unsure who provides NHS advocacy in your area, eg. the Isle of Wight, please contact NHS England (NHS England: 0300 311 22 33) for details of your local advocacy provider.



Access to Services at GP Practices in South West Hampshire

Healthwatch Hampshire would like to know about the experiences of patients accessing their local GP Practice. The aim of this questionnaire is to find out where changes can be made to support service improvements. *The information that you provide will be used anonymously by Healthwatch Hampshire to help to improve local health care services in Hampshire.*

Questionnaire

- i. What is the name of your GP Practice? _____
- ii. Are you over 18 years old Yes No
- iii. Do you work for the NHS? _____

Please mark your answer for the following statements.

A. Waiting Times

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't know
Q1. I am satisfied with the quality of care from my GP Practice	<input type="checkbox"/>				
Q2. I am satisfied with the waiting times for a suitable appointment at my GP Practice	<input type="checkbox"/>				
Q3. I am able to book an appointment to see a Doctor of my own choice when I need to	<input type="checkbox"/>				
Q4. I can get a same-day appointment when I need one	<input type="checkbox"/>				
Q5. I am treated quickly at my GP Practice when I need to be	<input type="checkbox"/>				
Q6. I know who to complain to if there is an issue at my GP Practice	<input type="checkbox"/>				
I would complain to: <i>(please provide details)</i>					

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't know
Q7. I was satisfied with the ease of using the GP Practice Out-of-Hours Service, the last time I used it	<input type="checkbox"/>				
Q8. I am satisfied with the quality of care I have previously received from the Out-of-Hours Doctors	<input type="checkbox"/>				
Q9. I would prefer to go to A&E than be visited by the Out-of-Hours Doctor	<input type="checkbox"/>				
Q10. I know who to complain to about the Out-of-Hours Doctor service	<input type="checkbox"/>				
I would complain to: <i>(please provide details)</i>					

C. Alternative Access

Skype is a free service online video calling service that can be used from different devices (Mobile, Tablet and PC).

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't know
Q11. I am familiar with 'Skype' video calling	<input type="checkbox"/>				
Q12. I would consider using Skype to 'contact' an Out-of-Hours Doctor than to have a home visit	<input type="checkbox"/>				



	<i>Strongly Agree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Strongly Disagree</i>	<i>Don't know</i>
Q13. I would consider using Skype to 'contact' a Practice nurse or Doctor during normal opening hours	<input type="checkbox"/>				
Q14. I would consider using an 'on-line' confidential support helpline to contact a Practice nurse or Doctor during normal opening hours	<input type="checkbox"/>				
Q15. I would consider using an 'on-line' confidential support helpline to contact a Practice nurse or Doctor during normal opening hours <i>if someone else set it up for me (at home)</i>	<input type="checkbox"/>				
Q16. I would be happy if my Practice operated an on-line system for other patients, if it led to an overall more efficient service for myself	<input type="checkbox"/>				

Do you have any other comments about making contact with your GP Practice?

Demographics

Your answers to the following questions will help us to ensure that we are including the experiences of all individuals.

What is your gender?

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

Do you consider yourself to have a disability?

Yes	<input type="checkbox"/>
No	<input type="checkbox"/>

Which age group applies to you?

18-24	<input type="checkbox"/>
25-49	<input type="checkbox"/>
50-64	<input type="checkbox"/>
65-79	<input type="checkbox"/>
80+	<input type="checkbox"/>

Which of these groups do you consider you belong?

White	<input type="checkbox"/>
Black	<input type="checkbox"/>
Asian / Asian British	<input type="checkbox"/>
Mixed Background	<input type="checkbox"/>
Chinese	<input type="checkbox"/>
Arab	<input type="checkbox"/>
Other	<input type="checkbox"/>

Did you complete this survey yourself or did anyone else help you with it?

I completed it myself	<input type="checkbox"/>
It was translated for me	<input type="checkbox"/>
Someone helped me complete it	<input type="checkbox"/>



Thank you very much for taking part in this survey.

Please return this questionnaire in the box provided or mail to our FREEPOST address:

Freepost Plus RTHH-KGST-ZRBC
 Westgate Chambers
 Staple Gardens, Winchester
 Hampshire. SO23 8SR

To contact us, pop in to any Citizens Advice Bureau in Hampshire.

Telephone us on: **01962 440 262**



Healthwatch Hampshire

Westgate Chambers,
Staple Gardens, Winchester,
Hampshire, SO23 8SR

Tel 01962 440 262

enquiries@healthwatchhampshire.co.uk

www.healthwatchhampshire.co.uk

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