

AN ANALYSIS OF PATIENT ACCESS TO GP APPOINTMENTS IN BARNET 2019

Introduction

The Healthwatch Barnet Primary Care Group (HWB PCG) assesses patient services across the borough with the aim of making low or no-cost recommendations to improve both access to, and use of, Primary Care NHS facilities.

In 2012 the PCG looked at access to GP appointments after a local patient survey showed this to be a major concern, and found that access to GPs was more dependent on the skill set of the Practice Manager than on practice size, number of patients, social deprivation or incidence of chronic illness.

Since then, there has been a considerable increase in the population of the London Borough of Barnet; residents are living longer and patients have raised expectations. Alongside this the CCG have introduced 48,000 extended access appointments¹ per year in Barnet with evening, weekend and Bank Holiday availability from 8am to 8pm. However, the question remains: how has this affected the experience for patients in making appointments?

We also note from work done by NHS England on 'Improving Access to General Practice'² that public satisfaction with general practice remains high, but in recent years patients have increasingly reported, through the GP Patient Survey, more difficulty in accessing services including a decline in good overall experience of making an appointment.

This prompted the team to revisit this issue in 2019, especially after it was reported anecdotally that patients still experienced considerable frustration when trying to make an appointment with their GP. As can be seen from the Table 1 below, despite the additional resources being introduced in 2018, satisfaction with the experience of making appointments had fallen from 2018 to 2019.

Methodology

The National GP Patient Survey is an annual survey published by NHS England, providing 'information on patients' overall experiences of primary care services and their overall experiences of accessing these services'³. The PCG team used the National GP Patient Survey data published on 11 July 2019 to:

1. Identify any correlation between the size of the practice and the degree of satisfaction the patient experiences when making appointments.

¹ <https://barnetfederatedgps.org.uk/extended-access-service/>

² <https://www.england.nhs.uk/gp/gp/v/redesign/improving-access/>

³ <https://www.england.nhs.uk/statistics/2019/07/11/gp-patient-survey-2019/>

2. Compare the satisfaction scores with the experience of making these appointments from 2018 to 2019. (GP Surveys 2018 and 2019).
3. Identify factors which might affect the ease with which patients make an appointment. This was done through data analysis and a series of structured interviews with a number of Practice Managers.

From the 2019 National GP Patient Survey, the team correlated responses from the 52 practices within the Borough of Barnet, across the following two questions:

- Question 2, ‘The percentage of patients who rated the receptionists at the GP practice “helpful”’
- Question 22, ‘The percentage of respondents who rated their experience of making an appointment as “good”’

In order to review the causation associated with this correlation the PCG team conducted seven structured interviews with four GP practices that had high scores for Question 22, and three that had low scores. These interviews were carried out between November 2019 and January 2020. To preserve anonymity, we have not named any practices, but are extremely grateful to the Practice Managers who gave up their time to see us for this project.

Findings

Size of Practice and Patient Satisfaction

Table 1 (below) shows the practices grouped into four patient list size bands.

The patient experience steadily decreased as the size of practice increased. Smaller practices have higher satisfaction rates than larger practices and all groups have lower scores in 2019 than in 2018.

Practice size determined by number of patients	2018	2019
	% Average score for patient satisfaction for Q22	
UPTO 4,999	69	67
5,000 to 7,999	66	63
8,000 to 11,999	63	61
12,000 to 19,000	59	53



Benchmark for 2019:	Barnet CCG 60%	National 67%
		<i>TABLE 1</i>

Conversely, there would appear to be anecdotal evidence that there is generally a better experience to be had of making an appointment with larger practices. However, this report’s findings support research published by UK GP publication *Pulse* that patients prefer smaller practices.⁴

This preference may be because patients/carers:

- Do not know about/want/appreciate the facilities offered by a larger practice
- Smaller practices appear to be more user-friendly
- There is more continuity of care
- Personal relationships with the staff and doctors create a caring environment

We suggest that a better understanding of the reasons why a smaller practice is preferred, could usefully help Primary Care Networks (PCNs).

Change from 2018 to 2019

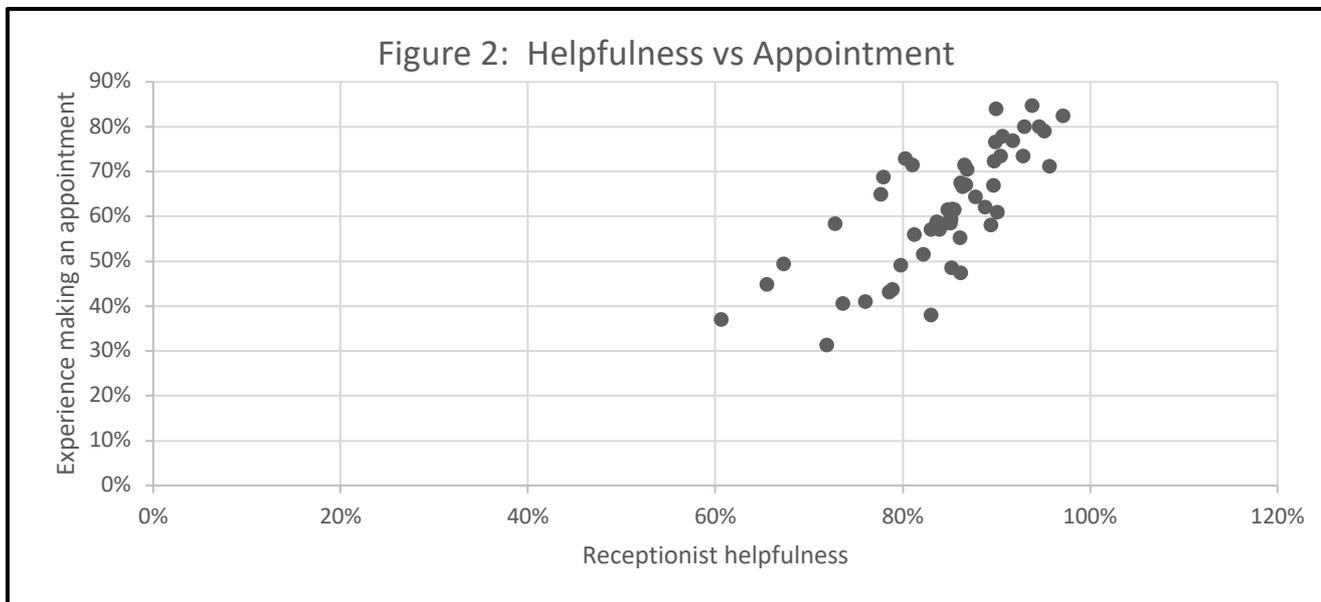
Table 1 shows that for each patient list size grouping, the average Barnet score in 2019 is at or below the national average.

We suggest that this requires further analysis and investigation.

The relationship between the helpfulness of receptionists and the experience of making an appointment

⁴ <http://www.pulsetoday.co.uk/home/finance-and-practice-life-news/little-evidence-to-support-move-to-large-scale-general-practice-say-researchers/20038064.article>

Our analysis, on the scatter chart below, shows that the more helpful the receptionist appears, the better the patients' experience of making an appointment.



Our Practice Manager interviews revealed that although there might be a significant statistical relationship between Question 2 and Question 22, there were various factors influencing patient response to the survey questions, like patient expectations and communications.

From the interviews we found many examples of good practice which are shown in Appendix 1 under five headings:

- Making an appointment
- Patient Understanding & Managing Expectations
- Training, Feedback & Learning
- Alternatives to seeing your GP
- Teamwork

Conclusions

The outcome in our report in 2012 showed that the major influence on accessibility was how the practice was managed.

We found greater pressures on the appointment systems in 2019. Therefore, the aim is to determine which factors are now the main influence on patient access, and whether actions like triage helps an overloaded system, and also whether Social Prescribing Link Workers and Community Pharmacists will have an impact.

We found that satisfaction with the experience of making appointments has fallen from 2018 to 2019. We suggest some reasons for this and propose further work to get a better understanding of the factors affecting Barnet's relative under-performance.

From our Practice Manager interviews we can see that the relationship between patients' rating the "helpfulness" of receptionists and ease of making an appointment, are dependent on many factors both within and external to the surgery. For example, internal communication between clinical and non-clinical staff and consistent communication from staff to patients.

Recommendations

- The categorized points shown in Appendix 1 can be used, where appropriate, as benchmarks to assess current good practice and suggest changes. This exercise could be carried out with the Patient Participation Group (PPG).
- To use the GP Survey to identify where the practice results are below the Barnet or national average, and what the cause might be. To involve the practice team and PPG in this exercise. Triangulate with Family & Friends survey results.
- Consideration of disabled patients' needs: work with your practice team and PPG to view making an appointment and gaining physical access to the surgery through the eyes of a patient with a mental or physical disability.
- Consider alternatives to seeing the GP, perhaps with your PCN, and develop a patient information programme supported by GPs. Show patients how you are working with local pharmacies. There is a need to develop a clear, consistent message from both clinical and non-clinical staff.
- Customer care training for all staff. (We acknowledge that if properly carried out this will cost money but will benefit staff and patients alike).
- Simple and clear information for patients so they understand the practice protocols for making appointments, repeat prescriptions, getting test results, etc. Test wording with different patients (PPG project) and put on the practice web site.
- Continually remind patients of the practice website by putting large notices in waiting areas and on all practice literature.



- Recommend to the GP Federation and the CCG a further promotion of the extended hours 8-8 facility through various communication channels with an Integrated Communication Plan. Test the plan with focus groups and include audit and feedback procedures.
- Support the implementation of Social Prescribing in all practices with the assistance of PPGs, trained volunteers and Health Champions. Encourage voluntary groups at each GP Practice to come together in their respective PCN.

Appendix 1 - Outcomes from Practice Manager Interviews

Our structured interviews with the Practice Managers at a selection of the top and lower scoring practices, had interesting results. We found that there were some very proactive practices despite having low scores, with both groupings also offering insightful ideas about what did and did not work. We have divided the responses into headings for ease of reference and to share good practice. We interviewed seven different Practice Managers for between 35 and 90 minutes depending on the amount of time they had available.

Interview questions asked of Practice Managers:

- *Why do you think that you scored the way did?*
- *What's special about your Receptionists?*
- *What training do they have?*
- *Phone receptionist/desk receptionists, different or staff rotated*
- *Which do they find the most stressful? Why?*
- *How long have they been with you?*
- *How do you deal with positive and negative feedback?*
- *What support in busy times?*
- *Are your GPs interested in "Reception"?*
- *How do your GPs support Reception staff?*
- *How do Reception staff assess requests for urgent appointments?*
- *Do you have a PPG?*
- *If so, what impact have they had on the Reception system*
- *Do you have a triage system?*
- *How are appointments allocated?*
- *Whatever system, how long have you had it? - Why did you change?*

Making an Appointment

- Patients encouraged to book online
 - Use of the internet saves a lot of patient and receptionist time. Promotion of the online facility needed at registration
- Not left on hold when calling in
 - Hanging on the phone is very irritating for patients
- Traffic light system
 - It is good practice to give priority to children, the elderly and very sick patients
- Booking longer than three weeks ahead
 - If the GP wants to see patient again it saves time to be able to book well in advance - three months ahead was very popular with patients
- Daily Walk-in Surgery every morning
 - This non-appointment free-access system was very popular in one practice
- Electronic reminders sent for appointments
 - This is a valued facility especially as it has a "cancel appointment" option

Patient Understanding & Managing Expectations

- New patients given practice leaflet and have protocols explained
 - This enables the practice to run smoothly, assists receptionists and helps the patients understand how to get the best from their practice
- Good communication with patients
 - One practice was encouraging staff to acknowledge patients who are waiting. Others felt all staff and doctors should give out the same information to patients
- Manage patient expectations

- Good communication and information: a “Flash card” written by patients for patients was found to be useful in explaining the practice systems within one practice
- Recognise that practices with a high immigrant patient cohort have additional problems
 - These can range from language difficulties to unfamiliarity with the NHS which means having different protocols in place to deal with this
- Patients feel listened to, concerns acknowledged
 - Empathy is much valued by patients and Customer Care training helps receptionists manage their patients successfully
- Long-serving reception staff who know the patients
 - Patients are more relaxed speaking to a familiar member of staff and this enhances the perception of caring
- Social communications, e.g. condolence cards
 - One practice sends cards to patients and communicates well with their local pharmacy, which enhances local relationships enabling better services to patients

Training, Feedback and Learning

- Up-to-date written protocols for staff
 - This is a very useful training tool and promotes “good practice” when incorporated into a training programme
- Practice processes
 - Written protocols for repeat prescriptions, lab results, complaints, etc ensure processes are performed consistently by all staff
- In-house training on “urgent” patients
 - To enhance patient safety, receptionists need to be confident when handling “urgent” requests for an appointment
- Local surveys
 - These have been used to gain more accurate feedback from patients currently using a service, as an alternative to responses from a random selection of patients within the National GP Survey
- Dementia and disability awareness
 - All front-of-house staff should undergo training to ensure an appropriate response and welcome to these patients.
- Use patient feedback, positive & negative, to learn
 - Negative feedback used as a training tool and turned into a positive outcome is a good learning experience
 - Positive feedback to be shared with whole team and celebrated
- GP Survey
 - A useful tool for gauging where the practice excels and areas that may need improvement, and for helping to implement process improvements
- Analysis of phone calls
 - One practice records all telephone calls and uses them as a training tool
- Feedback from the PPG
 - A good supportive PPG gives a practice the patient perspective and the relationship can be used to improve services and help the practice run more smoothly

- Training in customer care, patient focused
 - o This essential skill gets any interaction with patients off to a good start, reducing tension and promoting good outcomes
- Problems sorted before they turn into complaints
 - o It is very supportive to front-line staff if, at the first sign of a problem, a senior member of the team offers to help. This takes much less time than dealing with a complaint later. Patient issues can arise for many reasons and are best sorted there and then.
- Learn from complaints
 - o Complaints are useful learning tools and an opportunity to include any issues raised as part of staff training
- Practice training events
 - o Most practices held training events to which all staff were invited. Some included the PPG who were able to give the patient perspective.

Alternatives to Seeing a GP

- Guide patients to other suitable appointments, e.g. pharmacy
 - o Signposting by trained staff can assist patients to consider alternative options when appropriate, helping to alleviate pressure on GP appointments
- Work with local pharmacies and be seen to do so
 - o Pharmacists can be used for medication reviews and patient medicines queries, saving GP appointments. The practice PPG could invite the local pharmacists to their meetings to promote team involvement

Teamwork

- Manager seen in Reception and easily accessible
 - o Feedback from all the interviews showed how important this is to the staff
- Rotate Staff from Reception to Back Office/Telephone
 - o Most of the practices rotated staff as it takes the pressure off the front-line receptionists and it creates a greater skill mix for all the staff
- Positive recognition that much receptionist stress is due to lack of timely appointments
 - o This was acknowledged by most of the practices but staff still tried to accommodate patients as best as they could. The extended hours appointments had certainly helped.
- Feedback from GPs about inappropriate request for “urgent” appointments
 - o With a limited number of appointments, reception staff do their best to get the patients seen, but feel undermined when the doctors do not say to patients when “urgent” requests are not urgent
- All-staff meetings and opportunities for reception staff to give feedback to GPs
 - o This was felt to be a really important aspect of communication within the practice team
- Involve the practice PPG
 - o An active and supportive PPG is a valuable asset to a practice as they can assist and liaise with patients over changes, have input into information for patients and give feedback from the patient perspective
- Support front-line staff during busy times



- This was greatly appreciated by receptionists and lowered stress levels
- Working with other practices, sharing staff and management - saving money
 - This also covers co-operation between PPGs

Acknowledgements

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