

# GP Access for Older People

A report by Age UK Redbridge, Barking & Havering



October 2022

“You can only phone for appointments at 8.00am.

It takes ages to get through and normally then told all appointments for the day are gone - try again tomorrow.”

Local GP Patient

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## 1. Introduction

Age UK Redbridge, Barking & Dagenham and Havering is a local charity, which has been working with older people for over 50 years. We have dedicated, trained staff who are making a positive difference to the lives of older people through a variety of services. This includes the Voices of Experience Project, giving older people in Redbridge the opportunity to give their feedback.

## 2. Background

According to local, regional and national research, the ability to obtain a timely appointment to see a GP or Practice Nurse is becoming ever more difficult. This is due largely to unprecedented demand, with fewer clinicians available to see a growing number of patients.

To help with this, many services have switched to a remote (telephone or online) setting, rather than in-person. While this does help to manage demand, research also shows that a large number of people, including older or disabled patients, and those from ethnic minority communities, are now at a disadvantage when accessing services through these new systems.

We designed this survey as we wanted to know if patients are being treated fairly and equally, and whether any support meets the wide variety of needs and circumstances.

## 3. Methodology

Participants who could access the internet were emailed a link to an online survey. Additionally we sent paper copies in the post. Some participants even gave their feedback over the phone. We also visited supported living establishments and community groups to collect their feedback.

## 4. Strengths & Limitations

The flexibility of our approach in gathering feedback from people, and the variety of methods used are among the project's strengths. A limitation is that the majority of respondents are of a white background and there were a smaller number of contributions from other ethnic groups. We shall aim to address this with future campaigns.

## 5. Executive Summary of Findings

During July - September 2022, 203 local older people completed our survey on access to GP services in Redbridge.

This section summarises key findings - see sections 6 - 7 for findings in full.

### Survey Response - In Summary

#### Appointment Booking

- A clear majority of respondents (87%) usually book their appointments by phone, with just 7% visiting the practice and a similar number (6%) using online services.
- When phoning, fewer than a fifth of respondents (18%) usually get through within 10 minutes. 7% have not been able to get through at all.
- A broad majority of those using online services (83%) have been able to book their appointments without difficulty.
- Around three quarters of respondents (73%) usually feel respected and supported when booking their appointments.
- When looking at responses by age, we find that older people (aged 75 or over) are noticeably more likely to give positive feedback about their booking experience.
- On ethnicity, there is little difference between respondents of varying communities.

#### Waiting Times

- Fewer than half of respondents (47%) are usually seen the same day for emergency appointments. A quarter (25%) say they have waited 3 days or longer.
- For routine appointments, two thirds (66%) are usually seen within a week. Less than a tenth (9%) generally wait more than two weeks.
- Three quarters of respondents (77%) say they are usually called back within the expected time. 16% say they are not.

#### Consultations

- Just a third of respondents (33%) are usually offered a choice of consultation method (in-person, telephone or online).
- Around a third (35%) usually get to see their preferred clinician, while a slightly smaller number (30%) suggest they do not.
- Almost two thirds of respondents (60%) have experienced a remote appointment.
- Fewer than half (44%) feel that remote consultations have fully met their needs, with a similar number (41%) suggesting they have not.

#### Other

- Two thirds of respondents (66%) have either a long term condition or disability, are not fully able to use computers/devices, or do not speak English as a first language.
- When asking for any other feedback, we detect themes on general practice, access and referrals, communication and involvement, and medication or prescriptions.

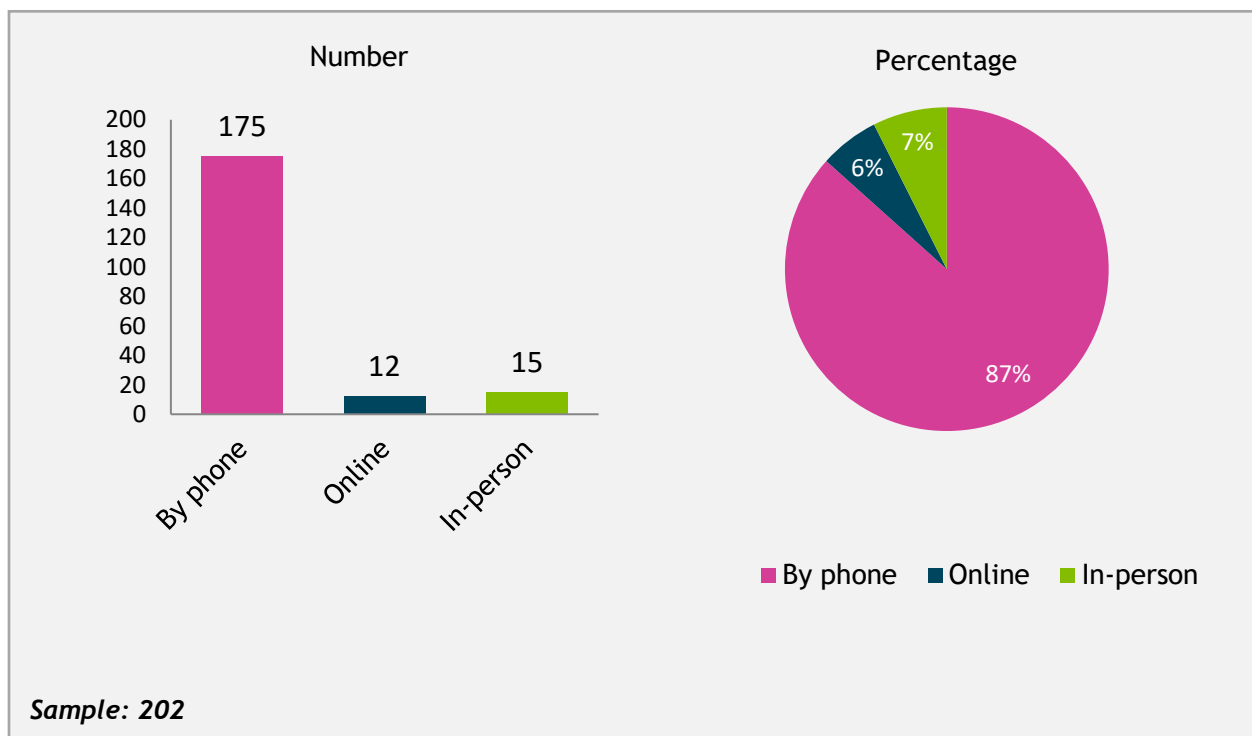
## 6. Our Survey - Analysis of Feedback

During July - September 2022, 203 local older people completed our survey on access to GP services in Redbridge.

We asked questions on ability to book appointments including telephone and online access, waiting times, experience of reception services, choice and quality of consultation, and whether issues related to disability, physical or mental health, the move towards online/remote services, or language have presented any barriers.

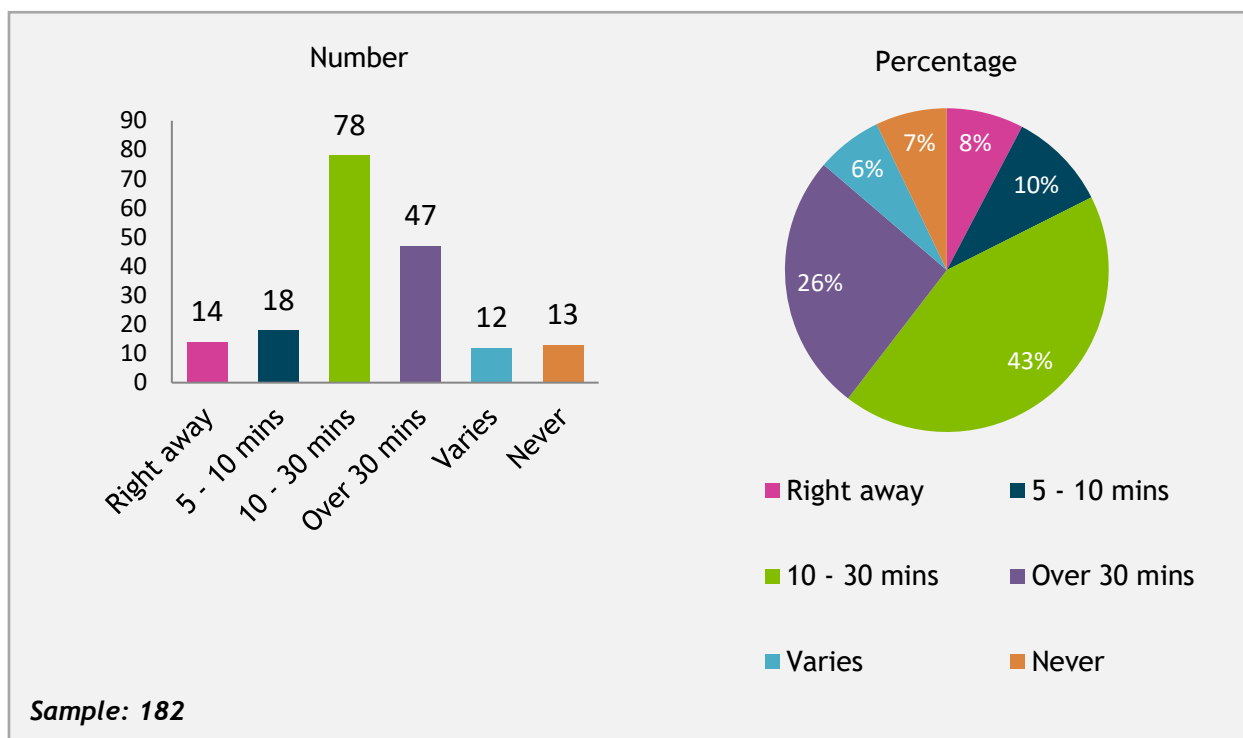
The majority of questions were free-text, enabling participants to detail their opinions and experiences.

### 6.1 How do you usually book your appointments, to see a GP, Nurse or other professional?



A clear majority of respondents (87%) usually book their appointments by phone, with just 7% visiting the practice and a similar number (6%) using online services.

**6.2 If by phone, do you usually get through right away? If not, how long does it take to speak with someone?**



When phoning, fewer than a fifth of respondents (18%) usually get through within 10 minutes. For a sizeable 43% waiting times while calling range from 10 to 30 minutes and a quarter of callers (26%) usually wait for half an hour or more. 7% have not been able to get through at all.

Feedback suggests that lines are more likely to become congested at around 8.00am when practices open, with lengthy queues and waits commonly experienced. Several people have had to hang-up and phone back, with some not able to make contact at all. Faults, such as being cut-off are reported in cases.

If getting through late, callers may be told that all appointments are gone, and to try again the next day.

**Selected Feedback**

*“I get through fairly quickly.”*

*“Depending on the time of day it can be immediate or probably up to 10 minutes. The afternoon calls are answered more quickly.”*

*“Mostly I get through right away but occasionally if I phone say after 8.15am, it takes time because the queue is longer then. I’ve been number 30.”*

*“It varies from 5 to 20 mins. From 8.00am - 9.00am at least 20 mins.”*

*“Never speak to anyone. You are in a queue and they never seem to get to you.”*



*"It takes few times to phone before they answer."*

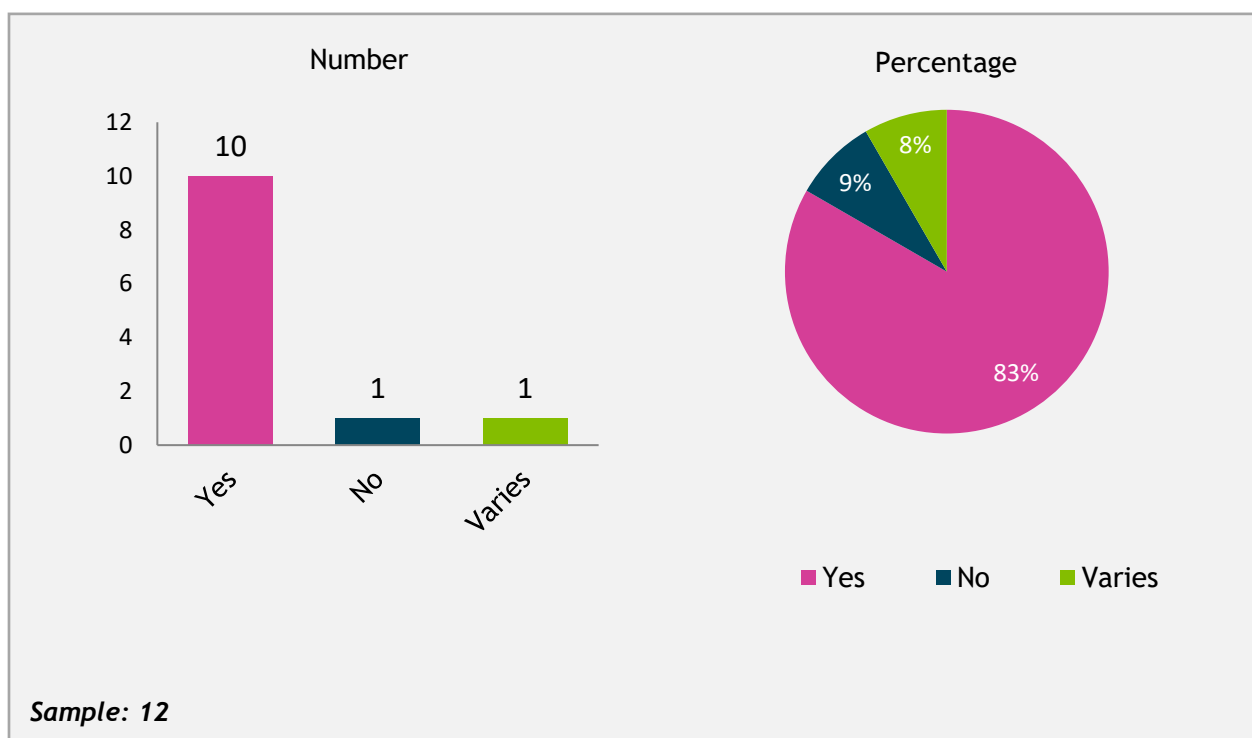
*"Depends - sometimes lucky though not often. 70% of time waiting on the phone for 30 minutes to an hour."*

*"You can only phone for appointments at 8.00am, it takes ages to get through and normally then told all appointments for the day are gone - try again tomorrow."*

*"Have waited almost an hour, 15<sup>th</sup> in the queue, only to get cut off when I got to number one. Tried 6 times in one day and did not speak to a human being!"*

*"Can take a couple of weeks."*

### 6.3 If online, can you find the online form easily? Is it easy to complete?



A clear majority of those using online services (83%) have been able to book their appointments without difficulty.

For some, the online forms are 'straightforward' to use while others feel they are complicated, contain too many - including 'irrelevant' questions, not always easy to find on the website, and sometimes give misleading or inaccurate information. Having to remember passwords can be a challenge.

It is commented that online systems, like their telephone counterparts, have a limited window for booking and a 'first come, first served' approach. It is also noted that not all practices have an online offer.

### Selected Feedback

*“Booking with Patient Access is straightforward.”*

*“It’s mostly easy.”*

*“I tried but couldn’t do it.”*

*“Yes but lots of questions to complete and a lot of them not relevant. It’s quite complex.”*

*“I don’t do online because I find it hard to navigate the website.”*

*“Couldn’t get in. Kept asking for my password- haven’t got one!”*

*“I am online and have been given information several times about how to make appointments but it is invariably inaccurate.”*

*“No - it says you can get the next day, but no appointments available.”*

*“The online facility has been withdrawn from my surgery since the pandemic began.”*

Some people say they are not online, have limited access to a computer, or rely on family members to assist.

It is also suggested that publicity needs to be widened.

### Selected Feedback

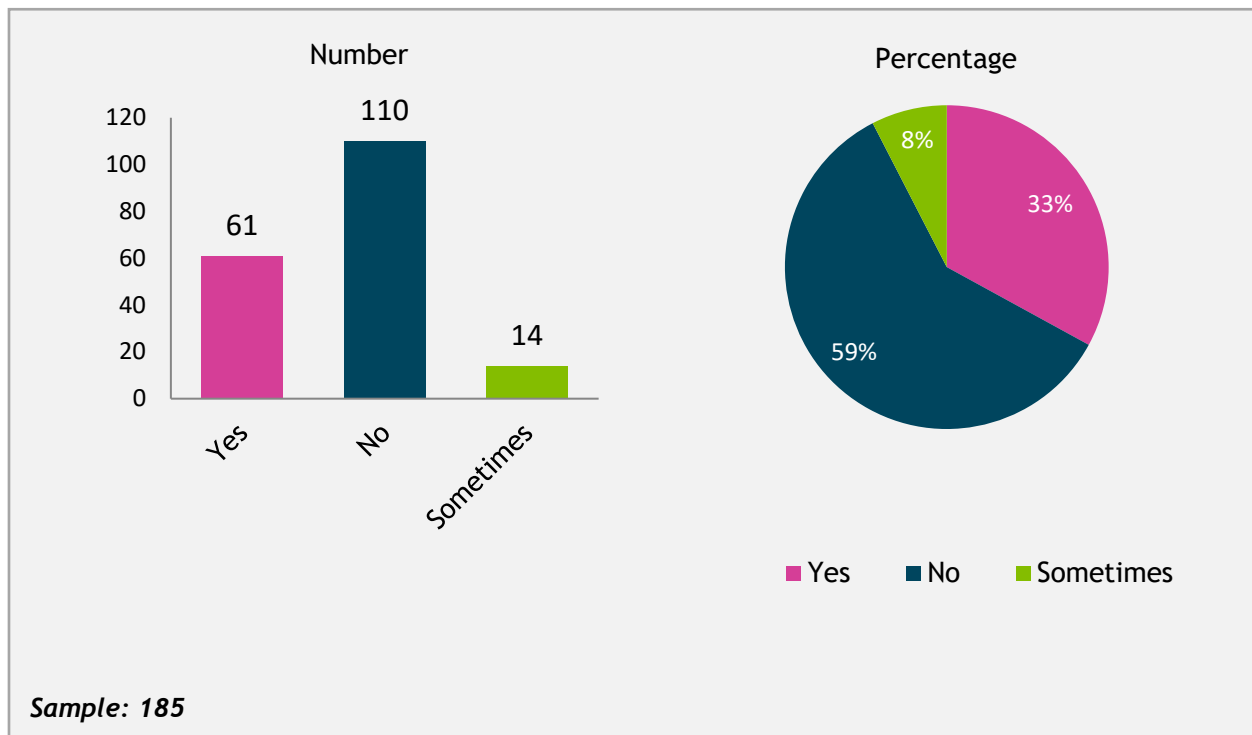
*“I am not online, I don’t understand it at all.”*

*“Yes. But depends on availability of a computer.”*

*“My daughter does it for me.”*

*“It needs to be publicised more widely.”*

#### 6.4 Are you usually offered a choice of appointment method (in-person, telephone or video consultation)?



Just a third of respondents (33%) are usually offered a choice of consultation method.

Typically, patients are assessed first over the phone, then called into the practice for further investigation or follow-on - if necessary. We frequently hear there is little choice, and decisions are often made by practice staff.

In one case, we are told there is no in-person provision at all.

#### Selected Feedback

*“Telephoned then in person a few hours later.”*

*“Phone appointments and sometimes face to face.”*

*“Initially all the appointments are on the phone, then an in-person appointment is made afterwards - no problems at all.”*

*“Normally by phone unless I insist for an in-person appointment. But not always given.”*

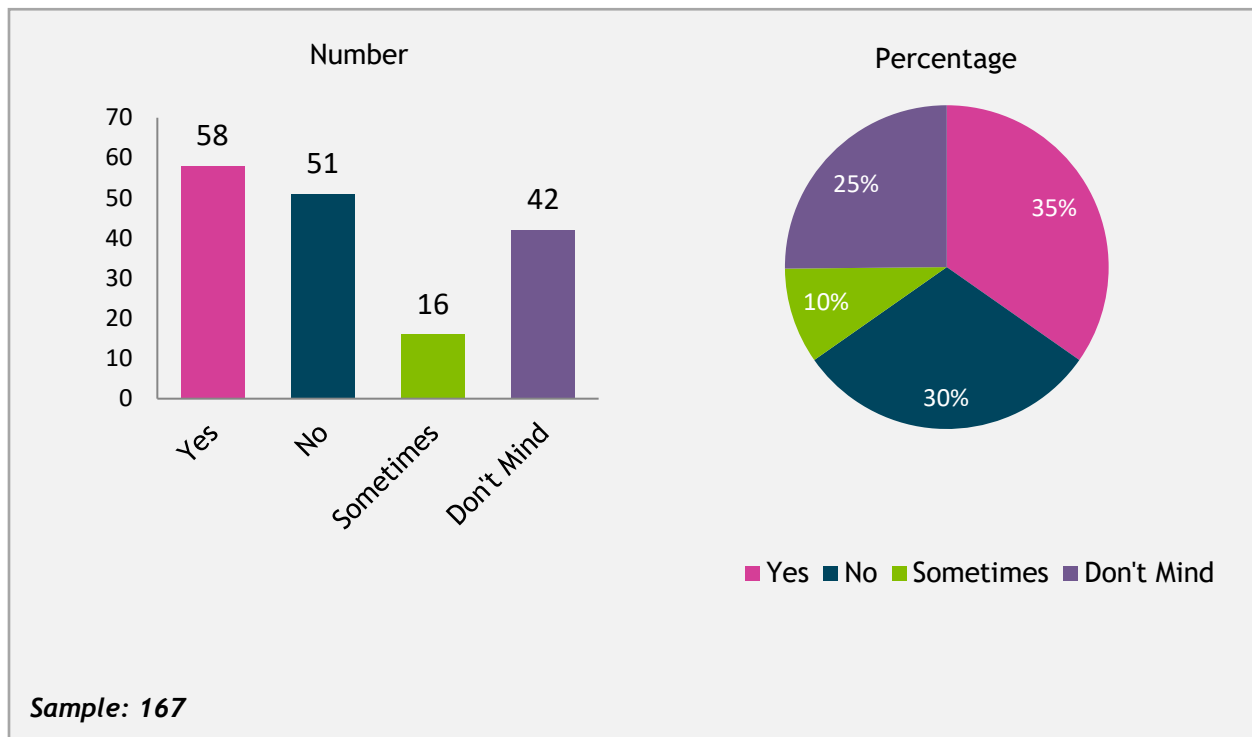
*“No choice offered.”*

*“No, the receptionist tells me what it will be.”*

*“Depends on the problem- the surgery decides.”*

*“At present only telephone appointments available.”*

**6.5 Is your appointment usually to see your own GP or preferred Nurse? If not, how do you feel about this?**



Just over a third of respondents (35%) usually get to see their preferred clinician, while a slightly smaller number (30%) suggest they do not. A quarter (25%) say they have no particular preference.

The importance of continuity is often expressed, and while this means waiting times will be typically longer, it also avoids having to repeat information - a common cause of frustration, and may be beneficial if taking medication or receiving a diagnosis. Being able to see a female clinician is important for some.

While preferences are important, it is acknowledged by many there is often 'little choice' - especially in emergencies.

Many people say they do not have a named clinician, due to frequent staff turnover, or being at a group (or larger) practice.

**Selected Feedback**

*"I am asked which doctor I would like to see."*

*"I don't mind as they are all good. As long as they have our notes - it's alright. If I request a particular doctor I'll have to wait longer."*

*"There are times when I prefer to see my own GP. I don't have time to go through my medical history again and again, and it can be frustrating."*

*"Not usually. I don't mind. But if I was on regular medication I think I would mind. It's easier to relate to your own GP."*

*“I very seldom see my own GP. Not satisfactory as my own GP has known me for years.”*

*“Prefer to see a female GP as seem more sympathetic.”*

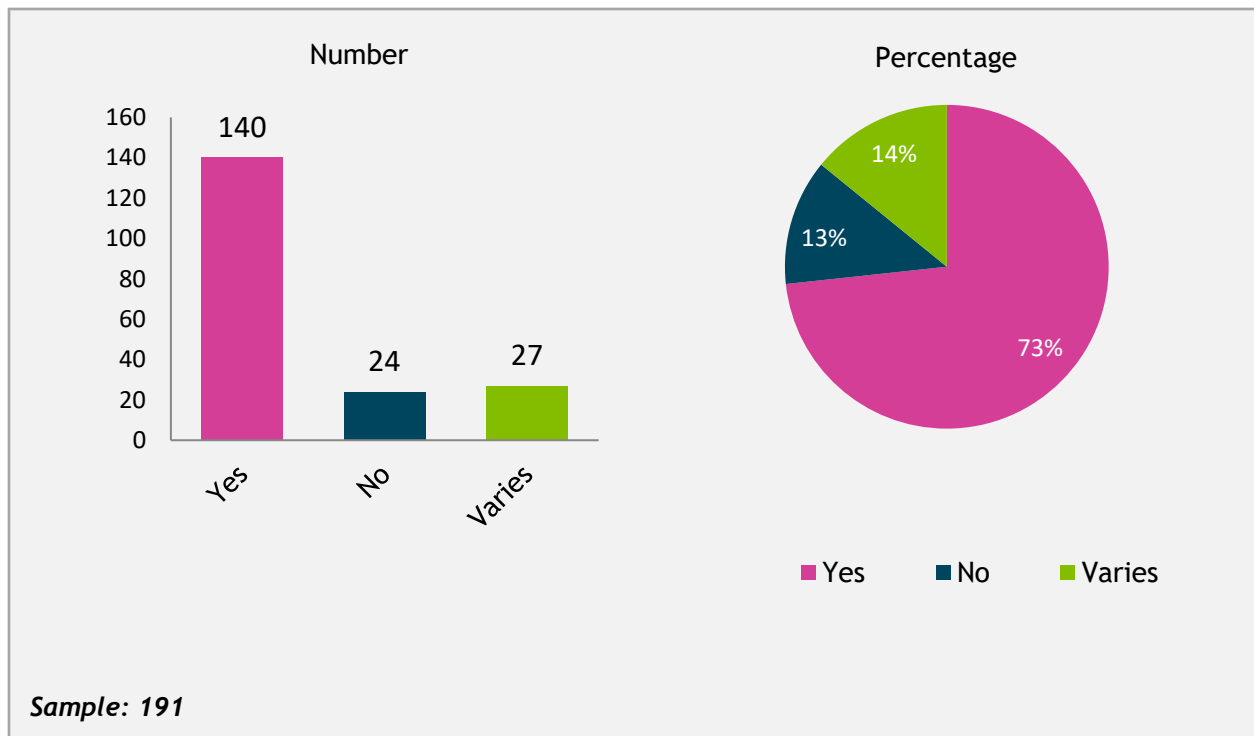
*“You have to take what they offer you. I would prefer to see my own GP but there is very little choice.”*

*“I’ll see anyone in an emergency.”*

*“Always a different GP - they do not know you or your condition. It’s a shame there is no continuity in the relationship.”*

*“I don’t know who my doctor is, as they change so often.”*

### **6.6 When booking, how are you generally treated by staff members? Do you feel respected and supported?**



Around three quarters of respondents (73%) usually feel respected and supported when booking their appointments.

Staff members are widely found to be ‘compassionate, polite and helpful’, and in a minority of experiences ‘rushed, impersonal and rude’.

Some patients are not comfortable with triage by reception staff, who may not be qualified, or trusted to uphold confidentiality.

## Selected Feedback

*“Yes indeed, staff members show compassion.”*

*“The receptionists at the practice are excellent, polite and helpful.”*

*“Yes they are lovely.”*

*“Depends on the receptionist - some good but not all. Occasionally they could be rude.”*

*“Sometimes it feels very rushed and impersonal. Very little interaction.”*

*“No, they are rude and dismissive.”*

*“They are very nice although they have recently been asking why you want to see the doctor which I don’t like. They can ask if it’s urgent or not. What difference does it make why you want the appointment the receptionists are not qualified. Poor confidentiality.”*

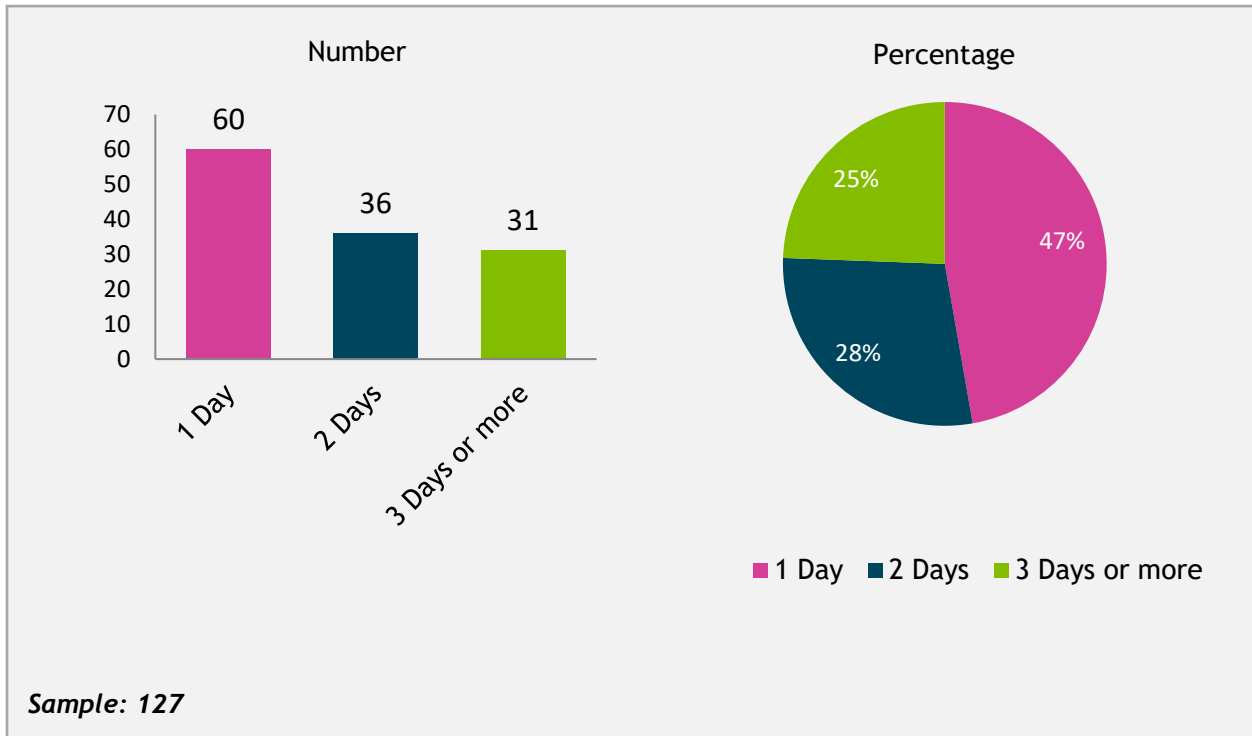
When looking at responses by age, we find that older people (aged 75 or over) are noticeably more likely to give positive feedback.

On ethnicity, there is little difference between respondents of varying communities.

### 6.6.1 Feel respected and supported when booking

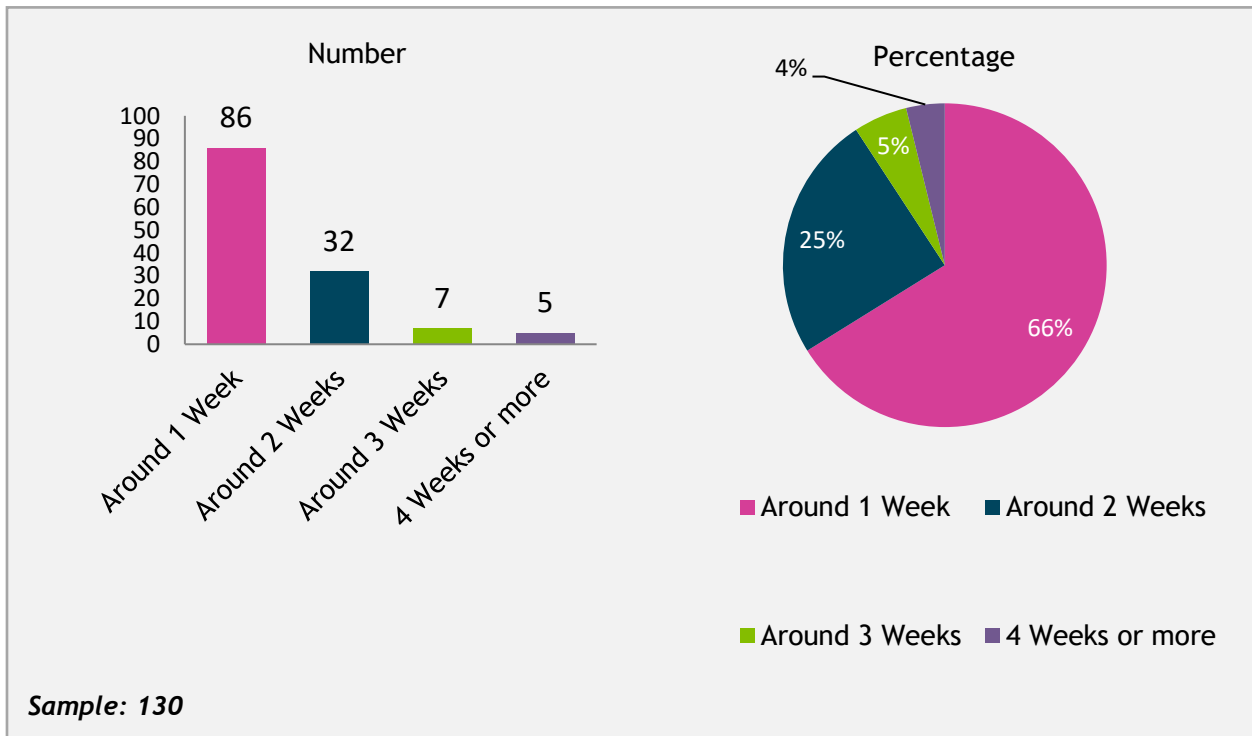
	% Consider Important
Aged 75 - 89	80%
Aged 90 or Over	78%
All Respondents (Baseline)	73%
White Respondents	72%
BAME Respondents	71%
Aged 65 - 74	67%
Aged 50 - 64	65%

**6.7 For urgent appointments, how long do you usually wait?**



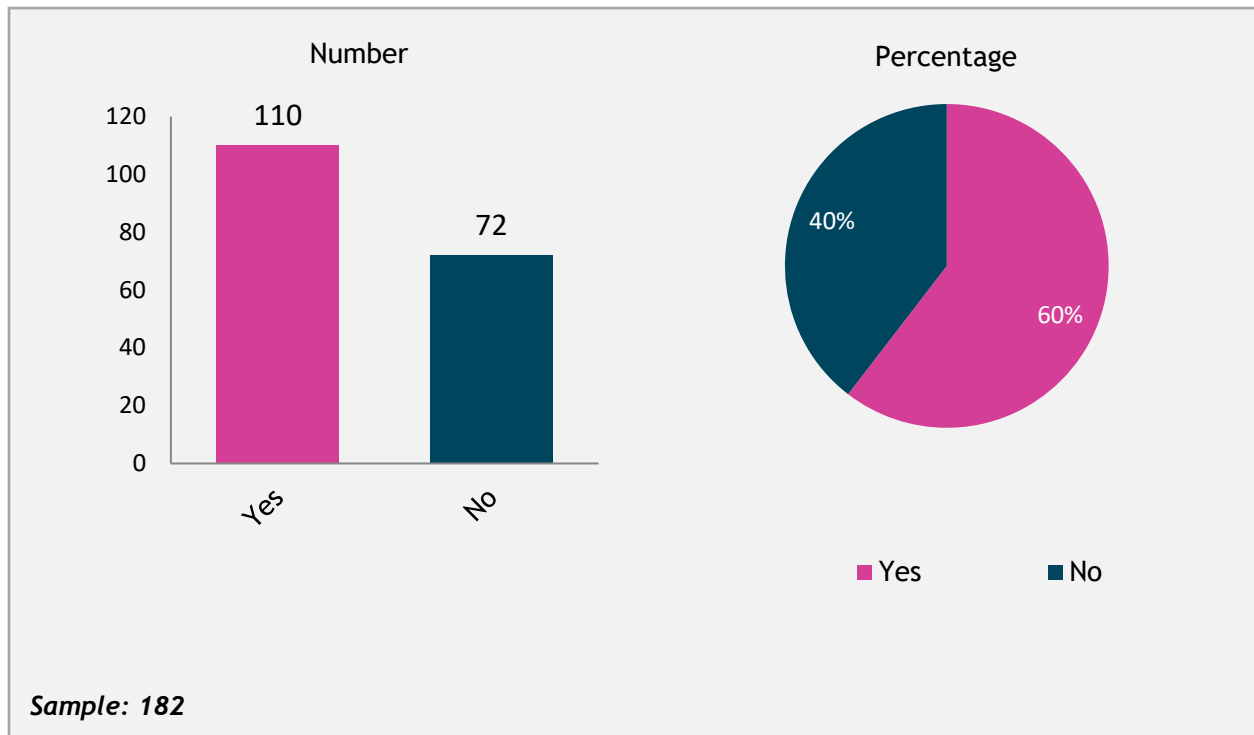
Fewer than half of respondents (47%) are usually seen the same day for emergency appointments. A quarter (25%) say they have waited 3 days or longer.

**6.8 And for routine appointments, how long do you usually wait?**



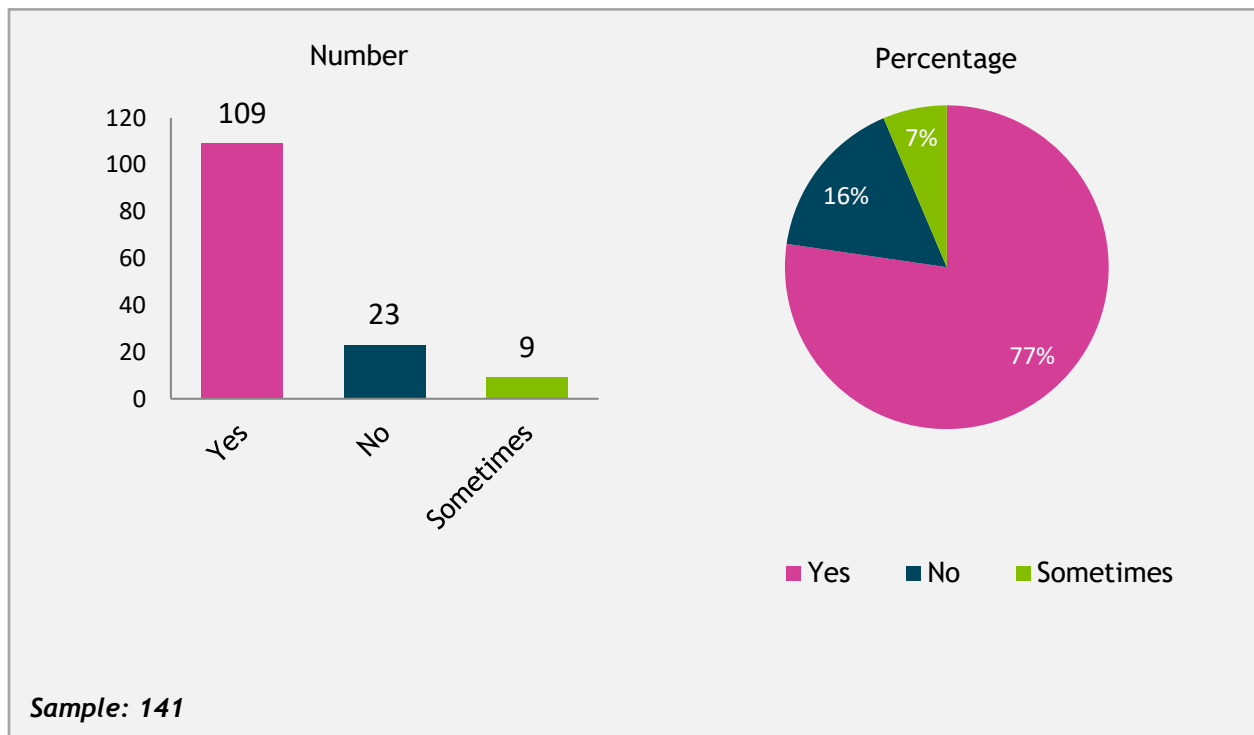
For routine appointments, two thirds of respondents (66%) are usually seen within a week. Less than a tenth (9%) generally wait more than two weeks.

**6.9 Have you had a 'telephone triage' or online appointment in the past?**



Almost two thirds of respondents (60%) have experienced a remote appointment.

**6.10 If so, does the doctor (or other staff member) usually call you back, when you expected them to?**



Three quarters of respondents (77%) say they are usually called back within the expected time. 16% say they are not.

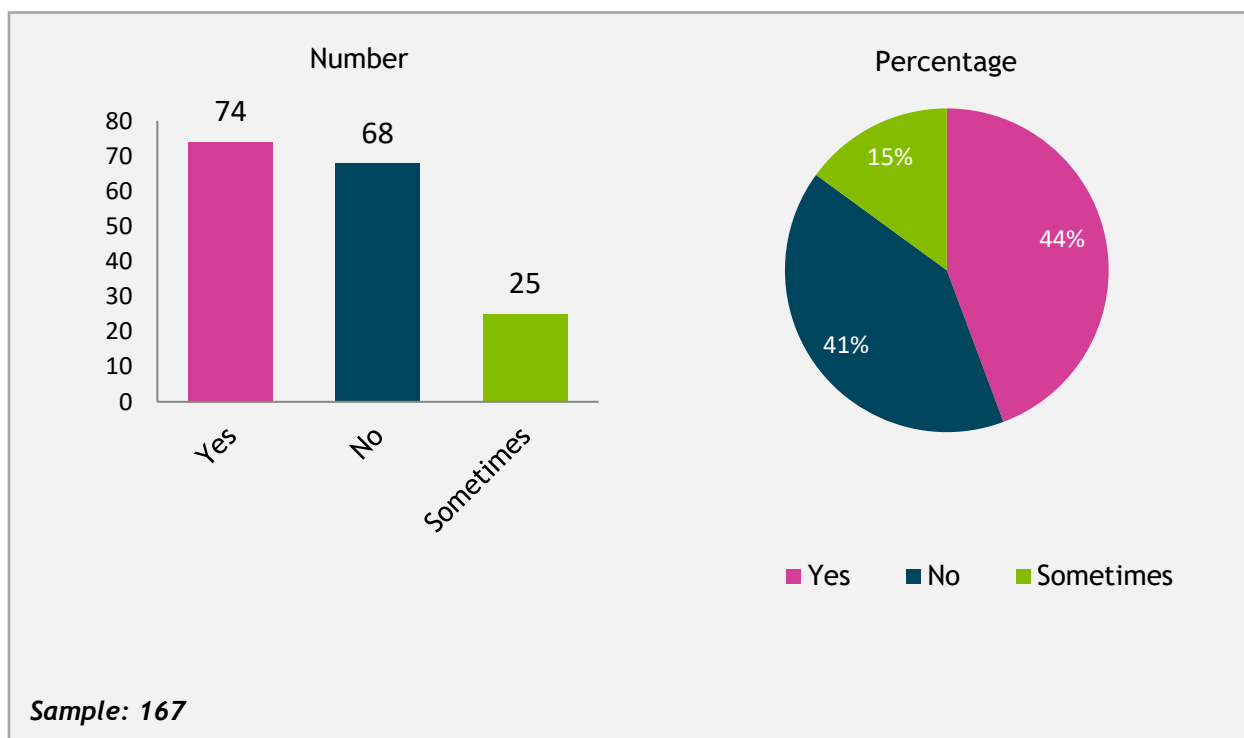


While most people are satisfied with punctuality, we hear that some have been called earlier or later, and not all have been given a specified time.

**Selected Feedback**

- “They usually call back within the timescale quoted. Most helpful often.”*
- “Yes - within 4 hours. Usually given a time like 10am to 12pm.”*
- “Never given a call back time. Can be anytime during the day which is stressful.”*
- “On the day but not the time stated - phoned early and missed them.”*
- “Not always.”*
- “No they don't call back, I would expect them to.”*

**6.11 If you had a doctor's consultation, does it usually meet your needs? Do you feel the doctor is able to diagnose accurately on the phone or online?**



Fewer than half of respondents (44%) feel that remote consultations have fully met their needs, with a similar number (41%) suggesting they have not.

Some people are confident in the accuracy of remote diagnosis, and in being called in for potential follow-up, however a significantly larger proportion feel that diagnosis and good communication largely depends on in-person interaction. In cases, those sending pictures, instead of being examined personally suspect they have been mis-diagnosed.

It is felt that remote appointments are most appropriate for routine (not complex) consultations, and it may also depend on the clinician and patient. Remote appointments have been problematic for those lacking equipment or with certain disabilities or conditions - such as a speech impairment. It is also commented that the time given is often not sufficient.

### Selected Feedback

*"Yes diagnosed accurately."*

*"My phone consultation was followed by a face to face appointment the next day."*

*"Generally yes but not always, don't get the same reassurance as in person."*

*"No I should see the GP in person face to face - can't diagnose over the phone as they can't examine you."*

*"Most definitely not - how can certain things be accurately diagnosed without being looked at?"*

*"Definitely not. Sent in picture and it was wrongly diagnosed."*

*"Fine for routine problems but not otherwise."*

*"Well it all depends on which doctor is available."*

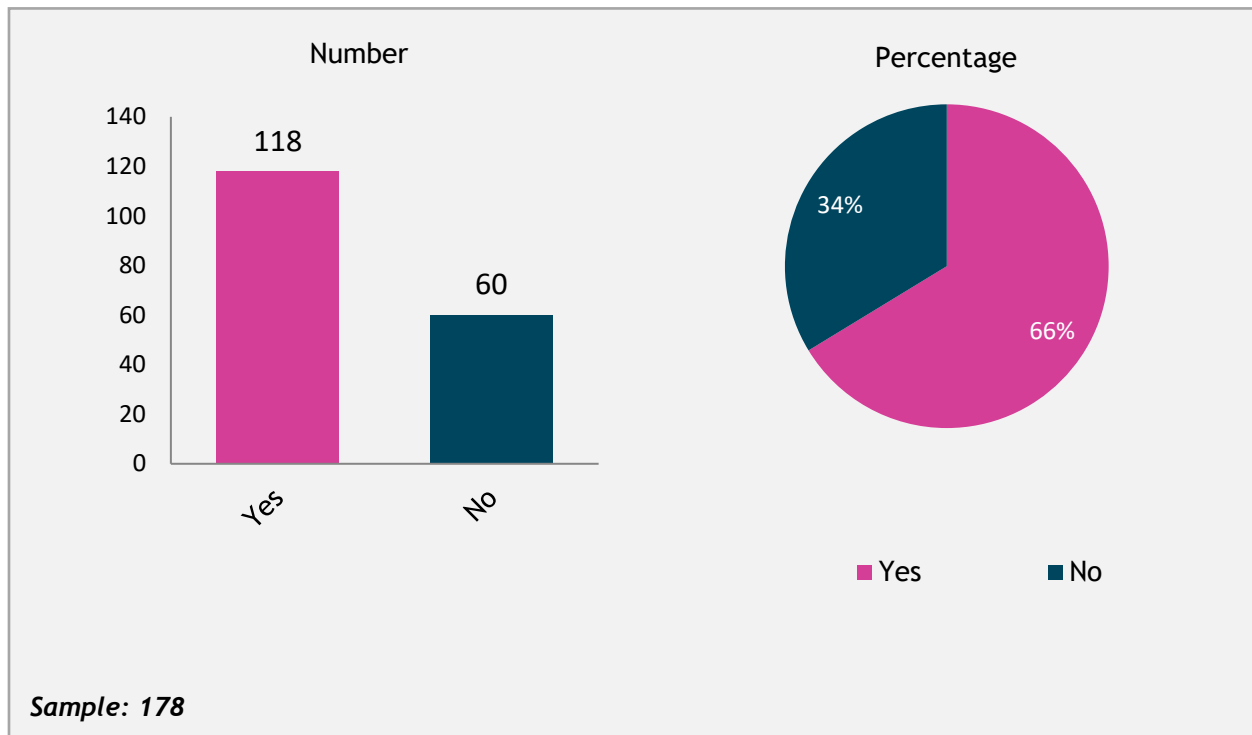
*"Can't photograph or do online discussions. So we manage just about."*

*"As I was a nurse - so is easy for me to ask the right questions."*

*"No as have a communication problem so dad speaks on phone."*

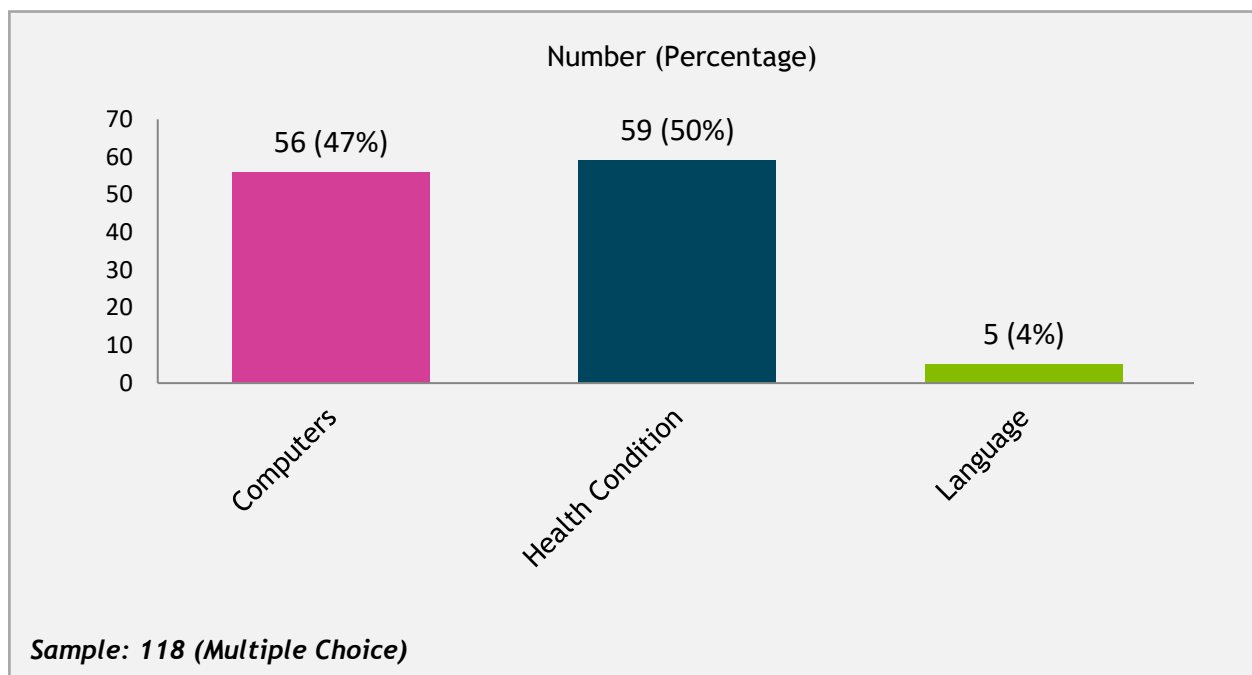
*"The time that's given was hardly enough. I would like a little more room to discuss options."*

**6.12 Potential Barriers: Do you have difficulties using computers, smart-phones or the internet? Do you have a disability or long term (health or mental health) condition? Is English not your first language?**



Two thirds of respondents (66%) have either a long term condition or disability, are not fully able to use computers/devices, or do not speak English as a first language.

**6.12b Breakdown of Potential Barriers**



When looking closer, we find that half (50%) specify a condition or disability, and a similar number (47%) have difficulty with computers/devices or online access.

### **6.13 Have any of these (potential barriers) affected the way you book, or attend appointments? Positively or negatively?**

We asked participants to outline any potential barriers.

#### **6.13a Computers, Smart Phones and the Internet**

While some people prefer face-to-face booking or contact, others suspect that online options are more efficient, negating the need to spend time on the phone, or in queues at the practice.

It is commented that not everyone has the inclination, ability or equipment to get online, we also hear that family members are often required to assist - such as in booking appointments or tests.

#### **Selected Feedback**

*“I still prefer face-to-face contact.”*

*“It seems to me people online get appointments first whilst we wait to speak to someone and we have to listen to the same instructions every time.”*

*“As I said I don't usually book using my smartphone or internet. Can only book appointments by queuing up at 7.30am at the surgery.”*

*“Yes, sometimes have to wait long to get an appointment.”*

*“Do not have online or smartphone.”*

*“Online is very hard.”*

*“My son helps me make appointments like blood tests which have to be on computer.”*

*“Have to use text relay or dad rings up. I have to write down notes for the doctor.”*

#### **6.13b Disabilities or long term (health or mental health) conditions**

We hear that while clinicians are generally helpful, they do not always listen, and some people may be withdrawn or anxious. Lack of mobility or online options means some are using expensive transport (taxis), having to visit in person to book, or need to be accompanied by others.

One person says that machines at the practice, such as those issuing tickets for queuing, are not easy to use.

## Selected Feedback

*“All positive, no problems at all. Brilliant.”*

*“My GP is generally very helpful but sometimes doesn't listen as so busy.”*

*“Yes - not conversant. I get tense and uptight.”*

*“I get to an appointment by cab or some other means.”*

*“I have to queue in all weathers for a same day appointment.”*

*“Sometimes I need to take my husband with me.”*

*“I find it difficult to use a machine at the blood testing to say you have come for an appointment.”*

### 6.13c Language

Those who do not speak English as a first language give no examples of specific difficulties.

### 6.14 Any other comments about your GP Practice (prescriptions, referrals etc)?

Finally, we asked participants to share any other comments about their practice.

We detect themes on general practice, access and referrals, communication and involvement, and medication or prescriptions.

## Selected Feedback

### General Practice

- Our practice is brilliant, the doctors, nurses and admin staff are all excellent.
- Very good on the referrals, appointments and prescriptions.
- On the whole, I think the surgery is quite good. But I don't think they can cope with the number of patients.
- Doctors keep leaving practices for some reason.
- Since COVID the quality of service has decreased a lot.

### Access and Referrals

- Time it takes to get through.
- You phone and if you get through, all appointments gone and then told to ring following day at the same time - wait for another 48 mins and go through whole process again.
- It has become increasingly difficult to see a doctor.

- It's difficult to get hold of the practice by phone and I feel the receptionist is trying to stop you seeing the doctor. I don't think they have enough doctors in the practice.
- They withdraw online booking, keep changing procedure but don't inform patients. You get cut off and have to phone again. Text came through ok but wrong number phoned, took 3 weeks.
- GPs insist on working from home and hardly come into the surgery - not called in for blood pressure checks or medicine reviews at all.
- Hard to get referrals - it takes a long time, long waiting lists.
- Had to chase the GP about a referral for a hospital appointment, and also chase for scan results.
- Did get a referral but they have cancelled it twice.

### **Communication and Involvement**

- Always feel respected, never rushed.
- I would like to see him/her face to face.
- Certain doctors only give me 5-7 mins on the phone before I finish my statement. The GP will only allow one topic at an appointment. This to me is degrading.
- Get different doctors each time - no consistency and I have to repeat myself.
- I feel like I diagnose myself on the phone to the doctor.
- Reliance on receptionists and having to give personnel details to them is not something most people want or wish to do.
- I cannot always understand her.
- Conditions not taken seriously, always in a rush to get to the next patient. Having a telephone appointment where they can call anytime is stressful as they only call once - so have to sit by the phone all day.
- I don't like online consultations or phone calls. I would much prefer to go into the surgery to see the doctor. There is no privacy at home and its not easy taking calls at home or talking on the phone or online about your problems from home.
- All pretty good. Some GPs are difficult to understand (especially over the phone) as English isn't their first language.

### **Medication/Prescriptions**

- Prescriptions go to chemist, excellent service.
- I order my prescriptions online.
- Referrals are a long wait at 4 weeks or more. I think doctors should ensure that patients on medication should be booked in for follow up assessments.
- Have to remind them when I don't get the prescription on time.
- Regularly get the wrong medication.
- Twice I have been put on prescriptions but taken off and not told why, until I make a phone call to surgery.
- Very hard to gain certain medications.

## 7. Recommendations

Based on the analysis of all feedback, Age UK Redbridge, Barking & Havering would like to make the following recommendations:

We make 2 recommendations on telephones.

### 7.1 Telephones

A clear majority of respondents (87%) usually book their appointments by phone, with just 7% visiting the practice and a similar number (6%) using online services.

*7.1.1 With almost 9 out of 10 older people preferring, or using the phone, we urge practices to maintain a good level of telephone access now and into the future. Regardless of the move towards online/remote booking, there will always be a significant percentage of telephone users.*

Just a fifth of callers usually get through within 10 minutes, with a clear majority experiencing long waits or issues - such as being cut-off.

*7.1.2 We feel that this level of access is inadequate, causing widespread discomfort and frustration, while delaying potentially important treatment or care. While acknowledging that this is a difficult systemic problem nationwide, we know there are solutions, such as working more effectively at PCN (Primary Care Network) level to facilitate access, enabling more people who prefer online booking to do so (easing congestion), or providing an automated call-back service to avoid long waits. We know there is much good practice to observe.*

We make 2 recommendations on online systems.

### 7.2 Online Systems

It is a common experience that once getting through on the phone, callers are advised to complete the online booking form.

*7.2.1 We hope that callers are not directed to use online booking, without first having a discussion to see if this is appropriate. It is a well-known fact, backed up locally by this survey, that a large proportion of older people do not have the ability, inclination or indeed opportunity to use computers, devices or the internet.*

For some, the online forms are 'straightforward' to use while others feel they are complicated, contain too many - including 'irrelevant' questions, not always easy to find on the website, and sometimes give misleading or inaccurate information. Having to remember passwords can be a challenge.

*7.2.2 If online systems are not easy to use, convenient or effective, people will continue to use the phone. We also know that those who have found the systems to be difficult, are less likely to revisit them. To better understand the variety of issues, as highlighted, we recommend that older patients are encouraged to give their feedback - perhaps through topical sessions at Patient Participation Groups (PPGs) or by completing practice wide surveys.*

We make 4 recommendations on patient preferences and support.

### 7.3 Patient Preferences and Support

NHS England and the Royal College of GPs have urged practices to discover and respect patients' preferences, and to see a greater proportion in-person. However, findings suggest that just a third of respondents are usually offered a choice of consultation method.

*7.3.1 While not commenting on clinical or safety protocols, we would echo this advice and hope that those clearly preferring face-to-face appointments will be accommodated. It remains the case that for diagnosis, many patients prefer to be seen in-person, and would choose this if available.*

It is also the case that many patients prefer to see a clinician of their choosing.

*7.3.2 As choice is important for some patients, we hope that preferences are discussed when booking - perhaps flagged in the patient record, so that continuity is addressed and facilitated, wherever possible.*

Reception staff members are widely found to be compassionate, polite and helpful, however some patients are not comfortable with triage by receptionists, who 'may not be qualified, or trusted to uphold confidentiality'.

*7.3.3 Clearly there has to be some level of triage at the point of booking, and we know that staff are trained and/or qualified to undertake assessments. It might be the case that staff need to explain the procedure, in clear and basic terms, to give reassurance that the process is planned, methodical and safe.*

On reviewing feedback we note that patients have a wide variety of basic needs, such as in ability to book or get to their appointments, support at the practice itself while waiting or booking in (long queues and touch screens have been problematic for some) and many have had potentially avoidable issues with medication, test results and referrals.

*7.3.4 Whatever the service or setting, treatment and care should be 'wrapped around the person' and as holistic as possible. We hope that all patients have an opportunity to discuss their needs and circumstances, and that staff are trained to identify barriers and issues. We urge practices to also make full use of their social prescribing services, and specialists.*



## 8. Glossary of Terms

BAME	Black, Asian and Minority Ethnic
PCN	Primary Care Network
PPG	Patient Participation Group

## 9. Distribution and Comment

This report is available to the general public, and is shared with our statutory and community partners. Accessible formats are available.

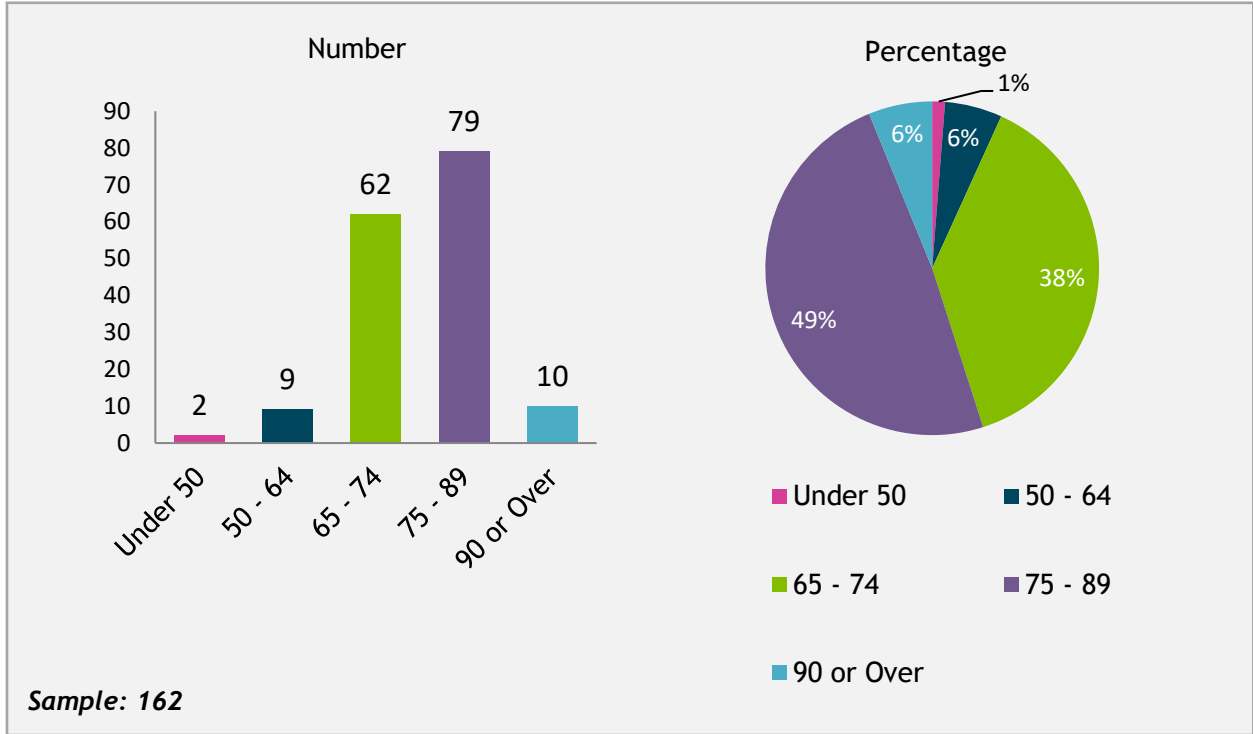
If you have any comments on this report or wish to share your views and experiences, please contact us.

Age UK Redbridge, Barking and Havering, 103 Cranbrook Road, Ilford, IG1 4PU.  
Phone: 020 8220 6000  
Email: [admin@ageukrbh.org.uk](mailto:admin@ageukrbh.org.uk)  
Registered Charity Number: 1088435

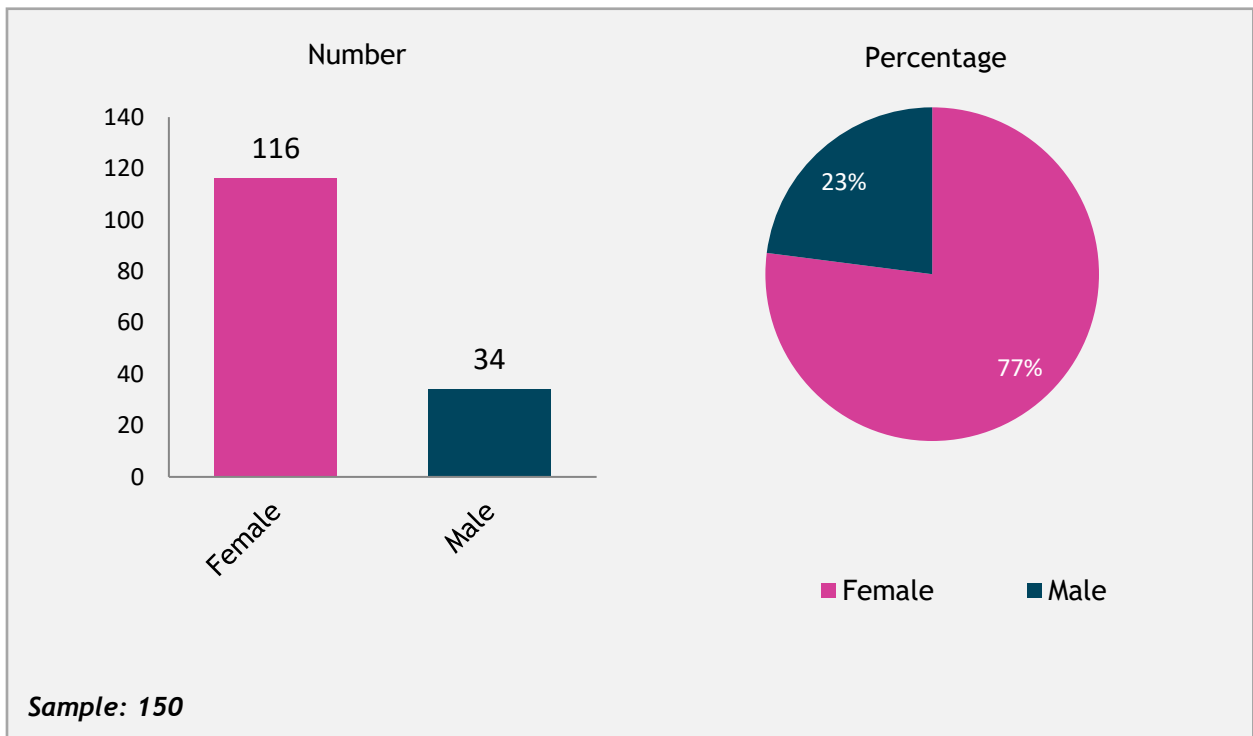
## Appendix - Demographics

The demographics of participants are stated as follows:

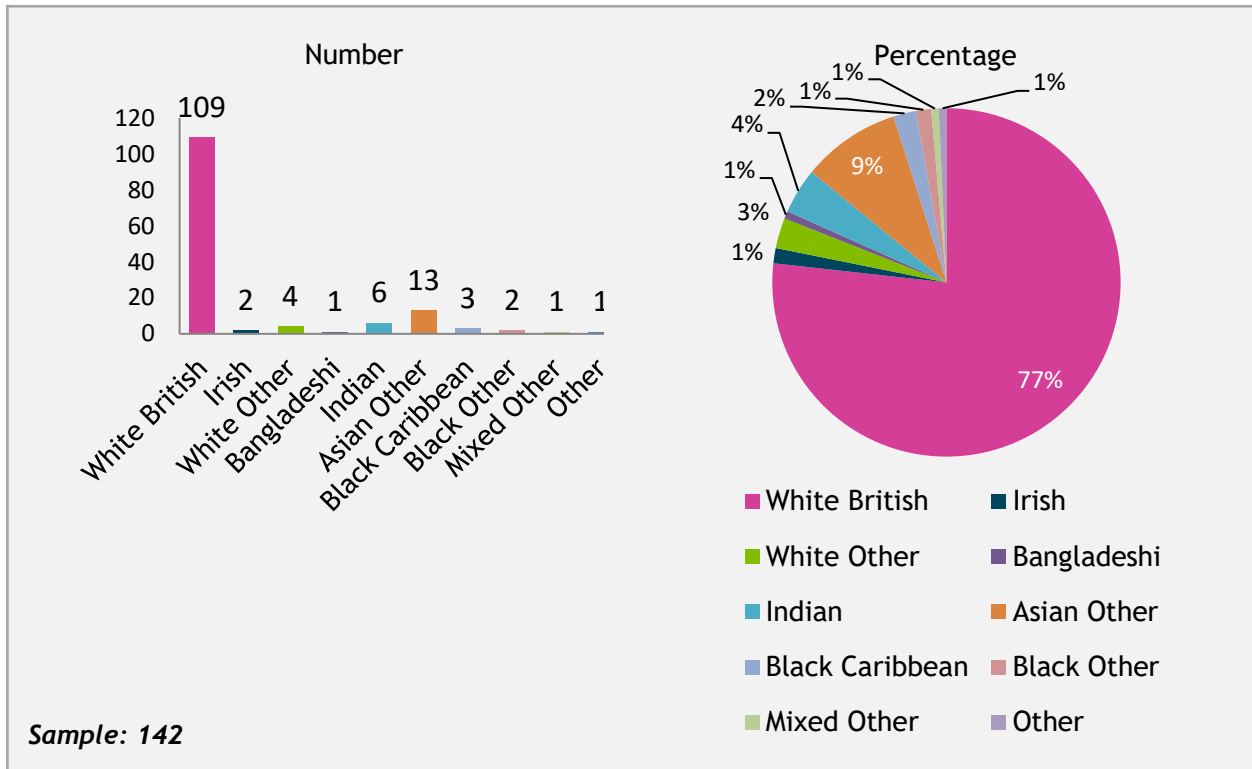
### Age



### Gender



## Ethnicity



“Reception staff are very nice although they have recently been asking why you want to see the doctor which I don’t like.

They can simply ask if it’s urgent or not.

What difference does it make why you want the appointment, the receptionists are not qualified.”

Local GP Patient