

# Patient Experience of GP Services in Powys

August 2022



# **Accessible formats**

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# About the Community Health Councils (CHCs)

CHCs are the independent watchdog of the National Health Service (NHS) within Wales. CHCs encourage and support people to have a voice in the design and delivery of NHS services.

CHCs work with the NHS, inspection and regulatory bodies. CHCs provide an important link between those who plan and deliver NHS services, those who inspect and regulate it and those who use it.

CHCs hear from the public in many different ways. Before the coronavirus pandemic, CHCs regularly visited NHS services to hear from people while they were receiving care and treatment. CHCs also heard from people at local community events, and through community representatives and groups.

Since the coronavirus pandemic, CHCs have focused on engaging with people in different ways.

This includes surveys, apps, videoconferencing and social media to hear from people directly about their views and experiences of NHS services as well as through community groups.

There are 7 CHCs in Wales. Each one represents the “patient and public” voice in a different part of Wales.

Powys CHC represents the views of people living in Powys whether the NHS services they use are within or outside of Powys.

# Background & Introduction

The coronavirus pandemic changed the way appointments are conducted in GP practices. In 2020, we ran a survey to find out people's experience of accessing GP services in Powys during the pandemic. At that time, we wanted to hear people's views about telephone and video appointments. The report which highlights the key things we heard from people is available on our website.<sup>1</sup>

For many months now, CHCs across Wales have been hearing comments about the difficulty people have with accessing services in their GP practice. We have been reporting these issues to Health Boards and to Welsh Government.

We wanted to find out more about people's current experience of accessing GP services in Powys. We put out a question through our social media channels to gather people's views.

Our report reflects the views and experiences we've heard from people. It does not reflect everyone's experience. We know that people's individual views and experiences are all different.

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<sup>1</sup> <https://powyschc.nhs.wales/what-we-have-to-say/news/gp-access-during-covid-19-pandemic-january-2021/>

# What We Did

We decided to set up a short, quick survey to gather Powys residents' experience of accessing services in their GP Practice in the last 12 months. We wanted to hear people's experience of getting through on the telephone, using the triage system, seeing a GP, nurse or other clinician face-to-face, having health reviews or having telephone or video appointments.

We ran the survey through our social media channels and our website. It was available online from 12 August until 31 August 2022.

We received **184** responses via the survey and we noted **15** comments made on our Facebook posts.

# Who We Heard From

Here is a snapshot of the people who shared their views and experiences of accessing GP services.

People do not always tell us everything about themselves when they come to share their experiences and views with us.

**184** people completed the survey online

**75%** were women and almost **15%** were men

**76%** identified as heterosexual

The average age of people sharing their views with us was **59**

The youngest person was **17** and the eldest was **86**

Just over **87%** were White (Welsh, English, Scottish, Northern Irish, British)

Almost **42%** of people stated Christianity as their religion and **34%** of people stated that they have No Religion

Almost **24%** of respondents were carers

**21%** of people said they had a disability or long-term health condition

You can find out in our Equality Plan what we are doing to hear from different groups of people so that we can better represent the diversity of the communities we serve. You can find our Equality Plan on our website:

<https://powyschc.nhs.wales/about-us/our-governance/>

We asked people to provide their postcode area for where they live. We received responses from the following postcode areas:

<b>Postcode Area</b>	<b>No. of Respondents</b>
LD8	38
LD3	30
LD1	18
LD7	18
SY21	15
HR3	10
SA9	9
LD6	8
LD2	7
NP8	7
SY16	5
LD5	4
SY18	3
SY19	3
SA10	2
SY15	2
LD4	1
NP7	1
SY20	1



# What We Heard From The Survey

**43** people made positive statements regarding GP services.

**126** people expressed dissatisfaction with GP services.

**27** people gave a mixed response, with both positive and negative statements about their experience.

From the positive comments we received, people used the words very good, great, excellent. People reported that they felt they were able to obtain appointments when they needed them, they were able to get face-to-face appointments when necessary, they received the advice and treatment that they needed, they were able to obtain an appointment on the day if urgent and they were satisfied with the triage system.

Some examples of comments received follow:

[*Named Practice*] has been brilliant. All the staff from receptions, to triage to GP's to pharmacy are fab!! I have been extremely happy with the services provided by [*Practice*]. The phone triage system available in the mornings has been great and has meant on occasions I have not needed a trip to the practice and good advice has been provided over the phone. There have been occasions I have needed to attend the practice to see a nurse or the GP and each time has been of excellent quality. I believe that these systems in place have benefitted me greatly. I am aware that some changes to this have been made which is a little disappointing. I have also now signed up for the online services available such as requesting repeat prescriptions and this is easier too than trying to get through on the phone or making a trip to the practice instead.

I've had excellent service from my GP in [*Named Practice*]. Yes you have to be patient when ringing but I've always been able to get through and receive the advice/treatment I need. The pharmacist has also been excellent there and supported me to understand/change my medication. I moved to [*the area*] 3 years ago from RCT and this is the best service I've ever received.

Good. Sometimes you have to call a few times first thing to get through but always get an appointment on the day if it's urgent.

I need weekly blood tests and have no problems accessing the surgery.

our medical practice is second to none. okay things are different these days but I've never had a problem contacting a doctor, seeing one when necessary. all staff from reception nurses, care staff and pharmacy are excellent.

Very helpful and gained an appointment when needed

In the last 12 months, I have never failed to get through to my surgery by telephone. There is sometimes a short queue but it is very quick. I have used the telephone triage service (probably twice) which has resulted in an appointment with the practice nurse for tests. I have also had three telephone appointments with the GP. The service I have received has been brilliant. The COVID precautions have been clear and well organised. I can't praise my practice highly enough. All the staff are friendly and efficient and I'm very grateful for the medical services I've received from them.

When looking at the comments from people who were not happy with their access to GP services, many of them referred to problems with the telephone system. In some instances, people had to make many attempts to get through on the telephone, with people quoting 100+ times before managing to get through. People also said that, if they were on hold for a long time, then the call would cut off before being answered.

When they did manage to get through, some people found it frustrating having to listen to the introductory message, with some commenting that it was too long. They just wanted to be able to speak to someone.

Some people reported that appointments were not available when they did eventually get through on the telephone and they were asked to call again another day.

People reported difficulty in booking routine or non-urgent appointments. Some people said that they would prefer the option to be able to book such appointments online rather than to keep telephoning.

There were many comments about the triage system. People said they did not like having to provide the reason for their call to a receptionist. Some people worried about confidentiality and others found it to be intrusive. Some people were concerned that it was a non-clinical person making a decision about whether or not they could be given an appointment.

People commented on the long waits they had for a call back from a nurse or GP if they were being passed through for triage. They were not given an exact time to expect the call. Some people said they did not receive a call back.

Taking telephone calls was often difficult for people who were in work. Some people had missed a call which led them to have to re-arrange the appointment.

A few people reported that they were not getting the regular monitoring for chronic conditions which they had received before the pandemic. Some people said that they were not getting repeat prescription reviews when they were due.

Some people felt that they did not receive the correct diagnosis when they had a telephone appointment. They felt that the treatment they needed would have been provided if they had been seen in person.

There were some comments about the need for more GPs.

Below are some comments received from people who completed the survey:

Very different, phoning ringing several times before getting through then finding you can't see a Doctor due to be fully booked for that day.

Difficult! Can phone 100+ times before getting through, or phone will ring off if you can get through.

It seems impossible! As a woman & a full time carer I have to be dieing before I go to the GP. Over several months I had been feeling unwell & had several falls & dizzy spells. My husband & my adult children had been encouraging me to go to the Dr's for some time. I finally rang the surgery & they booked me in for a GP phone appointment. I was told it would be between 4-5pm. I waited patiently, the call finally came at 5.45pm. My GP who is usually a lovely patient [*person*] sounded bothered & annoyed. I related my symptoms etc. [*Their*] response was 'what do you expect me to do!' in a very off hand & abrupt manner! [*They*] then said [*they*] would do some blood tests & told me to sort it out with the nurse. When the conversation was finished I felt upset & [*the GP*] reinforced my initial thought that I was wasting [*their*] time. To cut a long story short I am now on the waiting list for an operation.

Terrible, hours and hours trying to get through then when you do there are no appointments- told to call back 8am the next day but the lines are always busy. Can't book a routine or non-urgent appointment out of hours so spend all your time trying to get through.

Very hard gaining access to a doctor.

Not as easy as it was before covid. It can be very difficult to get an appointment these days.

Terrible, first a long message before you can get to speak to anyone

Try not to ring as the process feels overwhelming/confusing

If it is for me a challenge as I rarely need a doctor. My husband slightly easier as he has multiple health issues, however the triage nurse is rude, unclear, and abrupt making you feel bad for ringing

Extremely stressful at least 45 mins on phone to get through- fine once you are through but would like to be able to book an advance appointment ie non emergency. There must be a better way

They are extremely busy. You have to go through a phone selection and finally phone starts ringing. Problem is that the (very busy and very kind people) must have a huge amount of work because it just rings and rings and they are not able to answer. I feel really sorry for them. It is not their fault and I am sure some people are unkind when they do answer, but there clearly is a problem.

Phone, email, website- need improvement

It is well known to be very difficult to access the GP services because they are so short-staffed and busy. It makes people very reluctant to even try, and I think many people like me will avoid trying even when we have medical issues that need to be investigated. It's also very difficult to get any information from the surgery or replies to general, non-medical enquiries - it often feels like the surgery is not really a part of the community, and it should be.

The telephone system is a shambles. The phone needs to be answered directly not following minutes of spiel about all the things one can do rather than speaking to someone. I just wanted to make an appointment for a blood test. It does not appear possible to do this online so if I ring up to do it I want someone to just answer the phone.

Very frustrating. Unable to arrange face to face with GP. Recently had to go via receptionist, nurse, practice nurse, triage nurse, then finally GP.

To access the service by telephone is absolutely terrible. Monday morning started ringing at 7\*55 engaged continually. Eventually got the phone to ring at 9\*15. I was lucky I had the time to sit and keep trying the number. Once the phone rang it takes nearly 5 mins for the automated messages. It then took 10 mins for someone to answer, to be fair a dr rang me back within 15 mins. I think the problem is the automated messages take too long. And possibly only one line going in to surgery.

Disjointed. Am receiving hospital treatment, GP is sent copies of all communication but became very clear the GP didn't have a clue what was going on. Makes me wonder what's in my notes!

Very poor service, can never seem to get an appointment with a GP within a reasonable time. Sometimes phone in, spend 20+mins waiting for the phone to be answered to be told to ring back in a couple of weeks as there are no GP appointments available!....totally unacceptable re no appointments available

Telephone appointment with GP, had to wait 2 weeks which seems to be standard practice but unfortunately could not give me an exact time for the call. Not always able to answer at work as treating patients, would be good to be given a time so can take the time to take the call at that particular time. Twice my son missed his calls as works in a busy office and was on business calls, had to wait another 2 weeks for another telephone call.

I find the questioning when ringing up intrusive and trying to persuade the person answering that I would like to see a doctor in person is demeaning. I realise that triage is necessary to send the patient to the right person but it seems that all efforts are made to prevent them seeing a doctor in person even when necessary. Phone appointments for physical symptoms don't work. Recently I had some concerns and rang the practice to make an appointment to see a doctor and, like all the other occasions I had to be questioned by the Receptionist. Eventually I managed to persuade her that I needed to speak to a doctor and a phone appointment was made for 10 days later. When I spoke to the doctor I was immediately given an appointment for the following week. The doctor examined me and referred me immediately to a specialist. All in all it took a month. Luckily the problem was treatable.

Phone only, no face to face consultation with a Dr, no medication reviews, no diabetic clinics, no retinopathy appointments in over 2yrs but obtaining medication no problems and we appreciate the hard working pharmacy staff

When MyGP APP works its a very good service. But app is rarely available to use unless you get lucky. Also very difficult to get anyone to answer phone when app not working. Response good when app or phones working as I work full time its easier to consult GP distantly, had face to face when required no problem. Getting bloods done - very efficient, again only when you can get through to make an appointment. Annoying that long term medications have to be ordered monthly, and then you have to wait up to 4-5 days for them, so cant forget when you have busy lives- would be better if 2 months supply for long term essential medications was issued



It varies, I find phoning is not a good way to communicate with the practice. If I use the contact form on the website it is easier. This is because I don't have to go through all the info before finding out that I have rang at the wrong time to talk about prescriptions/appointments. My mum would not get in with the online way though so I think the telephone system needs improving.

# Learning From What We Heard

Many people believe that access to GP services is not as good as it was before the pandemic. However, the way people access general medical services started to change prior to the pandemic, with the introduction of triage and more multi-disciplinary staff within GP practices. The pandemic accelerated the changes, particularly the increase in telephone appointments. There is a need for people to understand what changes have taken place in GP services and why things have changed.

Some people are happy with the triage system and the ability to have telephone appointments that mean they don't have to travel to the surgery. However, other people find the triage system to be frustrating and they do not like to give information about their health to reception staff.

Many people feel that they should be given a face-to-face appointment with a GP when they request it.

It is a concern that some people commented that they were put off contacting their GP practice because of the appointment system.

A big issue for many people is the difficulty in getting through to their GP practice on the telephone. People have reported having to attempt to call many times before getting through. At times, they are holding on the line for a long time and then the call just cuts off and they have to start the process again.

Another issue with the telephone system is the automated message at the beginning of calls. People feel that this is too long or not needed at all. This is compounded by the fact that many people report that they have to redial several times when trying to contact the practice.

During this survey, only one person made reference to difficulty hearing on the telephone. However, CHC members have been told about difficulties people with hearing loss experience when they are trying to access appointments.

# Recommendations

Better communication is needed with public and patients about the reasons for triage, how it works and an explanation of the different roles within general practice. Clear information about this needs to be available on health board and practice websites. However, thought must be given to how to provide information to people who do not have access to or use digital communication.

One way to improve the communication with patients and develop two-way communication is to set up or re-start Patient Participation Groups (PPGs) or other patient forums. Not all GP practices in Powys have PPGs and, understandably, the ones which were in operation had to be put on hold during the height of the Covid pandemic. The CHC is aware of one Practice in Powys which has re-started its PPG. The health and patient forums which were facilitated by the Health Board also had to be put on hold during the pandemic. The CHC has been discussing with the Health Board the need for such patient groups to be reinstated in some form.

Consideration should be given to an evaluation of the telephone systems to understand why people are having such difficulty in getting through to their practice.

GP practices need to ensure the automated telephone message is as clear and concise as possible.

The CHC would like to understand what procedures are in place for people who have hearing loss and how they are able to contact GP practices or arrange appointments.

The Welsh Government Help Us to Help You campaign provides information to people about ways to get the right care, in the right place, first time. This information should continue to be made widely available to people in different formats, particularly now as we are moving into what is likely to be a difficult winter period for NHS services.

# Response from Powys Teaching Health Board

The Health Board made the following response to the CHC recommendations:

Many thanks for sharing the findings from the recent GP survey undertaken by the CHC and for giving PTHB the opportunity to respond.

As you will know from being a member of the PTHB Access Forum, the General Medical Services contract agreement for 2021-22 introduced an Access Commitment where a number of measures/standards were introduced (Phase 1). These standards continue and have been further added to in 2022/23 (Phase 2). The Phase 2 standards were published in June 2022, therefore during the summer months practices have been working towards implementing and meeting the requirements. The additional and new standards focus on reflection and require practices to reflect on their access arrangements, listen to patient experience (utilising the national patient experience survey) and make improvements to access. All Powys practices are in the process of completing their patient experience survey and are required to have 25 completed surveys per 1000 registered patients. Across Powys this will capture the views of a minimum of 3,500 patients.

I am assuming that as part of the practices survey responses it will pull out similar issues as captured by the CHC survey and individual practices will reflect on their access arrangements. Following completion of the patient survey, practices are required to create an action plan and act on it to evidence improvements. The reflection process is fairly prescriptive and

requires practices to share their findings at collaborative level and share their reports with the Health Board.

Access to GMS continues to be challenging and as a health board we need to have assurance that patients are receiving adequate access to GMS at all times and that practices are taking action to improve access and communicating with their patients on existing access arrangements and any changes. There is no doubt that the forthcoming winter pressures will add to an existing fatigue workforce and collectively we need to ensure we support practices to deliver the best service they can for their patients.

Recommendation response:

1. Better communication is needed with public and patients about the reasons for triage, how it works and an explanation of the different roles within general practice. Clear information about this needs to be available on health board and practice websites. However, thought must be given to how to provide information to people who do not have access to or use digital communication.

A Health Board Task and Finish Group is being set up with Practice Manager representation to support patient communications including addressing patient abuse which has significantly increased. As part of the access commitment, Practices are required to take a more open and transparent approach in communicating with their patients, through an automated and standardised public facing dashboard, to the sharing of information and reporting on GMS activity. Some practices have started to share this data with their patients and we will encourage practices to strengthen data sharing.

2. One way to improve the communication with patients and develop two-way communication is to set up or re-start Patient Participation Groups (PPGs) or other patient forums. Not all GP practices in Powys have PPGs and, understandably, the ones which were in operation had to be put on hold during the height of the Covid pandemic. The

CHC is aware of one Practice in Powys which has re-started its PPG. The health and patient forums which were facilitated by the Health Board also had to be put on hold during the pandemic. The CHC has been discussing with the Health Board the need for such patient groups to be reinstated in some form.

There is no contractual requirement for general practice to have Patient Participation Groups. Should practices wish to set up a PPG, Health Board support would be offered to progress implementation. Options for the future of the health board patient forums are currently under development as part of this year's Integrated Medium Term Plan (IMTP) process.

3. Consideration should be given to an evaluation of the telephone systems to understand why people are having such difficulty in getting through to their practice.

All Powys practice telephone systems have a recording function for incoming and outgoing lines, have the ability to stack calls and are able to interrogate their telephony system to analyse data on calls. As part of a practices reflection on their access arrangements practices are required to review their telephone system intelligence including evidencing call demand comparisons. As part of this process practices will need to have a more planned and forward looking approach to the scheduling of appointments throughout the day, or for future dates, meaning it is no longer acceptable for all appointments to be released at 8am for that day. This should address some of the difficulties patients are experiencing in getting through to the practice.

4. GP practices need to ensure the automated telephone message is as clear and concise as possible.

The automated telephone message forms part of the Access Standards. Practices are required to have a bilingual telephone message which last no longer than 2 minutes. A national message has been prepared and circulated for



practices to use which does not exceed this time. If practices choose not to use the national message, it must include signposting to relevant services and not exceed 2 minutes. The duration of practice messages are routinely monitored via the Access Standards.

5. The CHC would like to understand what procedures are in place for people who have hearing loss and how they are able to contact GP practices or arrange appointments.

General practice available appointments must be a mix of remote, face to face, urgent, on the day and pre-bookable to reflect the blended model of access, as determined by the practice in discussion with the patient. This supports and takes into account patients' needs. Practices have various processes in place to support patients with hearing loss, for example, 'flagging' on the patient record to enable a face to face to appointment at point of contact with the practice, using a language line interpreter service to support the consultation/conversation. All Powys practices have hearing loops installed at the reception desk to support patient conversations.

6. The Welsh Government Help Us to Help You campaign provides information to people about ways to get the right care, in the right place, first time. This information should continue to be made widely available to people in different formats, particularly now as we are moving into what is likely to be a difficult winter period for NHS services.

Both local and national communication will continue. As detailed in 1) a Health Board Task and Finish Group is being set up with Practice Manager representation to support patient communications.

The Phase 2 Access Standards takes an important step in pulling together patient experience, utilising telephone system intelligence and practices reflecting on their access arrangements to improve access arrangements for patients. I

will ensure the PTHB Access Forum continues to monitor our progress in implementing the above recommendations and look forward to discussing progress with the CHC on a regular basis.

# Thanks

We thank everyone who took the time to share their views and experiences with us about GP services in Powys.

We hope the feedback people have taken time to share influences healthcare services to recognise and value what they do well – and take action where they need to as quickly as they can to make things better.

# Feedback

We'd love to hear what you think about this publication, and any suggestions about how we could have improved it, so we can use this to make our future work better.



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# **Powys Community Health Council**