



**healthwatch**  
Surrey C.I.C

**PCN engagement project**  
**Enhanced Access – July 2022**

## About Healthwatch Surrey

Healthwatch Surrey CIC is an independent community interest company that gives the people of Surrey a voice to improve, shape and get the best from health and social care services.

## Background

We were asked by East Elmbridge PCN to conduct a series of engagement events in the East Elmbridge PCN footprint to engage with patients regarding enhanced access.

The insight gathered will add in-depth experiences to the body of evidence already collated by the GP practices' surveys. The aim was to have immersive discussions with patients about their experiences, with a direction to uncover more feedback about enhanced access and what works/doesn't work as well from a patient perspective.

## Methodology

We held 3 x engagement events in total. (1 at GP provider and 2 at community-based settings). We gathered 32 in-depth experiences, and these experiences and a summary of key themes can be found in this report.

The findings were captured in first person. Experiences, demographic data and key themes are provided in this report which sits alongside the raw data. Clearly, the demographics of those we talked to will have a bearing on the nature of the themes in this report.

This was a one-off engagement project and the experiences in this report are reflective of what we heard on the day. We recommend a continuous programme of engagement with patients as the new model of improved access is implemented.



## Activity

The engagement took place during July 2022 at the following places;

Month	Date	Time	Provider name	Provider Type	Town	No. of experiences
July	Friday 15th July	10-12pm	The Vine	GP	East Molesey	11
July	Monday 18th July	9.30-11.30am	Lower Green Community Café	Community café and fridge	Esher	8
July	Monday 25th July	10.00-12.00pm	The Molesey Centre	Community Centre	Molesey	13
						32

## Who we spoke to

Age	25-49	50-64	65-79	80-89
No. of respondents	2	6	12	12

Gender	Female	Male
No. of respondents	22	10

Long Term Condition or Disability	Carer	No conditions
16	2	14

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## Respondents by practices mentioned

Practices mentioned during engagement	Esher Green	Giggs Hill	Emberbrook	The Groves	The Vine	Glenlyn
No.	5	3	13	1	16	10

## Extended Access/Location

- The majority of people wanted to be seen at their own surgery. Those that could drive were happy in principle to be seen locally elsewhere but put limits on journey time or distance.

“This is my local GP but I would drive if very local, to be seen at another surgery.” **The Vine**

“I would only travel locally to another surgery [10mins].” **Glenlyn**

- Others felt if they could walk to their surgery, then they should be seen there. Respondents on the whole, were happy to attend evenings or weekends at their own surgeries.

“If I was offered an appointment elsewhere then I would drive but a limit to how far [5 miles]. I can walk to my surgery so this is preferable obviously.” – **Esher Green**

“Happy with out of hours but would like it to be with a doctor from this practice. I've got a very long term condition which is obviously ongoing and Dr here knows my history. I would not go to a different practice.” **The Vine engagement**

- Some people expressed concern about accessing their surgery out of hours in the evening or travelling elsewhere due to mobility issues or being older and not confident with driving.

“If I was dying, I'd travel for an appointment, but I don't drive and can walk to my surgery. There is an issue here with bus travel. We are really cut off in Lower Green.” **Esher Green**

“Happy to have appointments at different times but here. I do drive but literally only to people houses or doctor. I couldn't do motorways or big roads. I'd be worried about travelling too far for another surgery and not knowing the way.” **The Vine engagement**

- For some, lack of access to car or the cost of a taxi or bus to travel elsewhere would be a problem. One person could only get to a GP surgery by her mobility scooter.

“I can get to my surgery on my mobility scooter and to the Vine but elsewhere, I will struggle.” **Glenlyn**

“Not interested in going at the weekend or evenings. Got no transport.” – **The Vine**

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## Access/Digital

- Getting access to their surgery by telephone wasn't easy for all surgeries. Some people discussed having to go down in person to make an appointment as could not get through on the phone. This isn't providing access for all.

"If I need to contact the doctor, it's hopeless to get through on the phone so I have to go down in person. Have to rely on someone to take me there." **Glenlyn**

- For the patients we spoke to from Glenlyn there was a general negativity towards the surgery about access via the phone. Patients found their phone system impossible. Calls were taking to and over an hour and sometimes the phone cut off before they had even got through to the surgery.

"It [phone system] gives people such stress." **Glenlyn**

"It takes  $\frac{3}{4}$  of an hour to get through, sometimes it even cuts out." **Glenlyn**

- Recorded phone information was a source of frustration at Esher Green. This was down to a longwinded (and outdated) message re: Covid and being kind to staff.

"The recorded message when you call up is ridiculous. It is so long, goes on about Covid and being kind to staff, by the end of it you want to abuse the staff. **Esher Green**

- Many reported that they wish appointments could be made in the future – for long term issues. Appointments were mostly offered on the day.

"I'd like to book in advance but the surgery doesn't let you." **The Groves**

"I would like to make appointments in advance, they only offer on the day here." **The Vine engagement**

"It is frustrating as I don't always want an appointment on the day. I'd like to schedule / add to my calendar blood tests with nurse or mole check for example. Not everything is needed on the day or urgently." **Esher Green Surgery**

- Some people without urgent need but not wishing to wait 4 weeks for routine appointments, were exaggerating symptoms to be seen earlier.

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"I find myself having to lie as I don't want to wait 4 weeks for an appointment." **Esher Green**

"I phone up first thing for the day. I often don't need one urgently but only way is to call up for an appointment on the day. I'd like to book them in advance." **The Vine engagement**

- Not everyone is digitally connected or wants to be.

"I'm not computer literate, I don't have a phone or a computer so can't access their website." **The Vine**

"Wouldn't use the computer to book online." – **The Vine**

## **Face-to-face/remote consultations**

- Overall, the preference was to have face-to-face appointments over remote consultations, but patients reasoned that if remote was deemed suitable for them, they would have them.

"Telephone appointments are easy to get hold of, but not face to face."

**The Vine**

- Some had sensory impairments such as being deaf, making remote consultations not suitable or found it stressful.

"I'm hard of hearing in both ears. Having a telephone consultation is very hard, yet this is usually the first point of contact." **The Vine**

"Am computer savvy but video calls add a layer of stress." **The Vine engagement**

- People generally accepted that remote consultations are ok for some things but not everything. Some even found them better.

“It all depends on what it is that is wrong.” **Esher Green**

“Telephone consultation seems a lot more proactive and quicker.”

**The Groves**

“But you can't diagnose stuff on the phone.” - **Glenlyn**

- Almost half the people we spoke to, mentioned LIVI. Some found it positive and were ok seeing a doctor they didn't know. These patients reasoned that they often don't see their own doctor in any case – they could get an appointment scheduled when they couldn't see their own GP and someone got prescribed antibiotics.

“LIVI worked ok and was convenient at the time and it's easy if face to face isn't possible.” **The Vine**

“Used LIVI before to get a prescription for antibiotics. Would use if couldn't get through to surgery.” **Glenlyn**

“Don't have a SMART phone, wouldn't use LIVI.” **The Vine engagement**

Others cited LIVI saying, they couldn't trust it and wouldn't use it as it is a video based app.

## **Communication Preferences**

- About a third of the respondents we spoke to had recalled receiving a message with survey link or seeing a poster from their practice regarding enhanced access.

“My friend text me a picture of a poster up in the surgery about enhanced access.” **Glenlyn**

“I got a text about enhanced access and did the survey but wanted to say more.” **Esher Green**

- Not everyone opens their text or knows how to.

“Have just got a text on Thursday about changes but to be honest I tend to ignore most text messages.” - **Esher Green**

## Other services

- Lots of people either aware or had used **Emberbrook** for nurse appointments. Overall, the service worked well and was conveniently located and with parking.

“Used Emberbrook for podiatry. Get seen quick there and we drive. I go every 3 months.” **The Vine**

“Been to Giggs Hill, husband drove me. The system there works so much better, why can't this be at Glenlyn?” **Glenlyn**

## Raw data

The quotes in this summary report have been extracted to illustrate the key discussion points for this project. As we had in-depth conversations with the people, we engaged with they told us about other aspects such as staff attitude, appointment booking etc. The full experiences can be found in the raw data spreadsheet.

## Thanks

Healthwatch Surrey would like to thank everyone who shared their experiences with us and the community providers that welcomed us for our events.



# healthwatch

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