

Seven-day access to GP surgeries is not the answer to improving patient care

January 24 2017, by Charlotte Anscombe



Credit: University of Nottingham

A better understanding of patients' needs is key to improving care within the NHS; patients do not actually want seven-day access to GP surgeries as previously suggested, according to a study from The University of Nottingham.

As the call to open GP surgeries at weekends once again hits the headlines, a report from the Centre for Health Innovation, Leadership and Learning (CHILL) at Nottingham University Business School, looks at whether extending the opening hours of surgeries was the key to improving [patient care](#).

'A need to improve services'

The demand for [primary care](#) services in the UK is changing due to

several factors, such as the rise in the number of patients with long-term conditions, and an increase in life expectancy.

Patients' expectations are also changing. At the same time, there is a perceived reduction in access to primary care, and a lack of investment in primary care compared to acute care.

In recognition of the rising demand for services and the need to improve [service](#), the Prime Minister's GP Access Fund was launched in 2013. GPs and their practices were invited to apply for funding by proposing pilot schemes to improve access, which could be tested and evaluated within a two-year window.

The report from CHILL evaluates the pilot schemes in Nottinghamshire and Southern Derbyshire. These focused on improving access to services, as well as a number of other goals such as reducing Emergency Department attendances.

Access to primary care

CHILL conducted a conjoint survey of the preferences of patients attending GP clinics in Nottinghamshire. The findings indicate that patients wish to be seen quickly, with a strong preference for same day [appointments](#). They do not, however, have a strong preference for seven day opening. These findings are supported by the take-up of weekend services in local pilot schemes.

The CHILL evaluation focused on two core aspects of access to primary care. The first was extending hours of access by offering additional appointments. The second was reconfiguring services to better meet patient demands for same day appointments.

Key findings from the report showed that the most efficient weekend

hub model offers a mix of routine and urgent care appointments. Patient take-up of planned additional weekend appointments was 82 per cent.

Another model, offering urgent care appointments only, was trialed by two Clinical Commissioning Groups (CCGs). Here there was very low take-up of these urgent appointments by patients. Take-up of available weekend and bank holiday urgent appointments was just 22 per cent. Take-up was lowest on Sundays (18 per cent), and highest on bank holidays (34 per cent).

Under-fives were the largest users of this urgent care model, accounting for 23 per cent of appointments at one CCG and 17 per cent of appointments at the other.

The evaluation from CHILL also looked at innovations that seek to improve patient access by reconfiguring same day appointment services. For example, an Urgent Care Clinic was developed offering a 'sit and wait' urgent care service. Patients could attend drop-in to the clinic but did not know how long they would wait to be seen.

When offered this urgent care service, most patients chose to take a conventional (pre-booked) GP appointment instead.

Meeting patient needs

Paul Windrum, Principle Investigator of the evaluation, from CHILL, said: "There is a need to better understand the needs and preferences of different types of patient for GP services. The biggest users of primary care GP services are the elderly and the very young. These groups do not have problems accessing services during the working week. The expectation seems to be that people in full-time employment have a strong demand for weekend services, but the evidence indicates this is not the case.

"A distinction also needs to be made between urgent care and non-urgent care. There is a lack of appreciation of the demand for same day appointments for non-urgent care services during the working week."

Penelope Siebert, a Research Fellow in CHILL, and one of the authors of the evaluation, said: "The evaluation of the different hubs clearly shows that there is not a 'one-size fits all' solution to the issue of patient care. The variety of the pilots reflects the different local health needs and the capabilities and resources of different practices.

"The misconception that the solution to improving patient care is to open GP practices seven-days a week – is simply not true and this can be seen by looking at the take-up of weekend appointments during the pilot schemes."

Provided by University of Nottingham

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