



# Spoilt for choice?

We find out whether you can get a doctor's appointment when you need it, and explain how to make the most of day-to-day healthcare

**W**hen we surveyed the general public about what day-to-day healthcare choices you want, the message was basic: your top choice was simply to get a GP appointment when you need it. And although most of you can get an appointment to suit your needs, a significant minority of 20 per cent finds it fairly or very difficult.

The patients of McKenzie House GP surgery in Hartlepool know all about this. Back in 2005, its appointment system was criticised by its local Patient Public Involvement (PPI) Forum – which finds out what people think about local health services and makes appropriate recommendations. To see if appointments had improved, we asked the PPI Forum to visit the surgery last October. It found more than 20 people queuing outside at 8.30am on a cold Monday. They included a disabled man on crutches and Kenneth Knappett, who was queuing on behalf of his 94-year-old grandma who was trying to keep warm in his car.

Local resident Linda Shields tells us: 'You can't get through on the phone and, when you do, there are no appointments for days. Some people can't queue and they end up calling the out-of-hours service, which they don't want to do. There aren't

any other surgeries in the area, so the choice is: take it or leave it.'

## Getting an appointment

A UK-wide GP contract sets standards for treating patients. Primary care trusts or health boards ensure patients can see a GP or health professional within 24 to 48 hours, depending on the country and the patient's needs. But we often want to book appointments in advance, leading to surgeries needing to fine-tune bookings to meet local needs.

For example, London GP Dr Clare Gerada tells us that her 7am clinics are thriving among City workers. However, GP Dr Helen Herbert – whose surgery is in rural Wales – speculates that problematic bus services would make it difficult for her patients to attend early weekday morning or evening surgeries, and that Saturday mornings were potentially more popular.

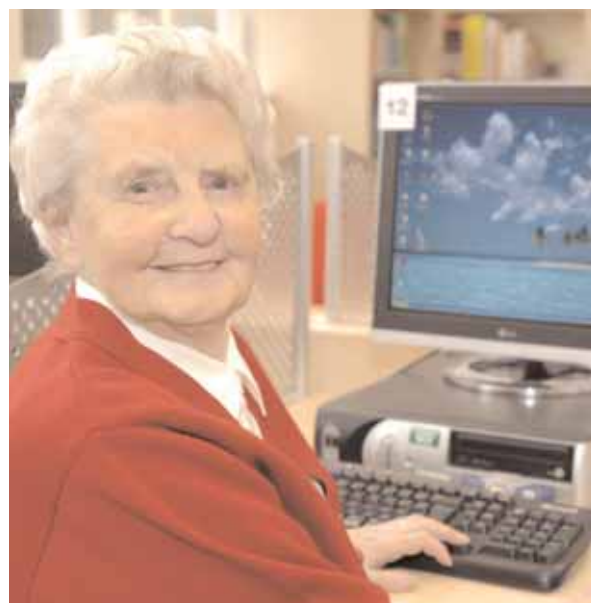
Each UK country has different targets around access, such as ease in getting through to the surgery. Some surgeries let you book appointments online and through digital TV. Others have automated telephone systems directing you to the next appointment – we want the Secretary of

State to end the use of expensive 0844 telephone numbers by English surgeries.

## Flexible appointments

Even if you can get a doctor's appointment, it can be difficult if you have caring responsibilities or have to get time off work. It's no wonder that more than a third of the people we surveyed wanted to be able to make weekend or evening appointments at their GP surgery – see 'The healthcare you want', p28.

All the UK governments are talking about this, with the Department of Health in England pledging that at least half of surgeries will open either in the evening or at



FORMER SHIPMAN PATIENT IN CONTROL

## Margaret Rickson 79, retired

When Margaret Rickson first heard she could order her prescription online rather than have to walk uphill to the surgery, she could not use a computer. After lessons at the local library, she now uses her new laptop to access her medical records online.

As a patient at Harold Shipman's former practice in Hyde, Cheshire, Margaret needed to build trust with her new GP. Being able to access her records online means she is able to see the same information as her GP, and this provides Margaret with the information she needs to discuss her healthcare.

Margaret's growing confidence even

encouraged her to challenge her hospital consultant using a print-out of her records.

## Take charge

Margaret says: 'It puts me in control rather than the doctors. You feel like a person, not a piece of paper or a number. The consultant was not angry but surprised, and began to answer my questions.'

She has also signed up for the NHS's online personal organiser HealthSpace ([www.healthspace.nhs.uk](http://www.healthspace.nhs.uk)) – this can record health information for any NHS patient in England. Rather helpfully, it also provides Margaret with email alerts so she doesn't forget about any future appointments.

## EXTRA HELP

### Which? Hospital Companion

Vital hospital help is just a click away. The *Which? Hospital Companion* contains practical information and advice to help you or a loved one feel more confident about a stay in hospital.

Go to [www.which.co.uk/online](http://www.which.co.uk/online) guides to download your free *Hospital Companion* today.



# Your choices for local healthcare

Confused about how to make the most of health services in your local area?  
Use our straightforward guide to make the right choices for you and your family's needs

## I wake up unwell in the night

### SCOTLAND

#### NHS24 FOR ALL SERVICES

Although you can still ring 999, in Scotland all out-of-hours services, including urgent care, are accessed through NHS24 (0845 424 2424, [www.nhs24.com](http://www.nhs24.com)).



### ENGLAND AND WALES

#### I NEED HEALTH ADVICE

##### NHS DIRECT

A 24-hour telephone helpline for England and Wales that's staffed by nurses. Provides information about health and services (0845 4647).



#### COMMUNITY PHARMACIES

England has some 24-hour pharmacies.

### NORTHERN IRELAND

#### I NEED URGENT OUT-OF-HOURS CARE

##### CALL GP SURGERY

Call the answerphone at your own GP surgery for information, or look at your primary care trust or health board website. The GP who contacts you may not be from your surgery.

##### GO TO ACCIDENT AND EMERGENCY

Open all hours to assess and treat serious injuries and emergencies.

Admissions  
Outpatients  
**EMERGENCY**

##### CALL 999/112

UK-wide and free of charge – even from a mobile phone.

##### KNOW YOUR AREA

Some local services, such as polyclinics, may operate outside normal surgery hours.

## I need to see someone in the day but can't get a GP appointment

#### MINOR INJURIES UNITS

Not available in Northern Ireland. They are led by nurses or doctors, no appointment is needed, and many are open daily from 8am to 8pm to assess and treat less serious injuries, such as sprains.



#### WALK-IN CENTRES

England only (Wales is proposing one-stop services without appointments, and Scotland and Wales pharmacy-based drop-in centres). Usually open from morning to evening. Often nurse-led with doctors available, they deal with minor illnesses and injuries. Some do not treat children.

#### POLYCLINICS

These clinics, called polyclinics in England, community health centres in Scotland, primary care resource centres in Wales, and health and care centres in Northern Ireland, are open for up to 24 hours. They can offer hospital outpatient visits, such as antenatal care, as well as services like dentistry.

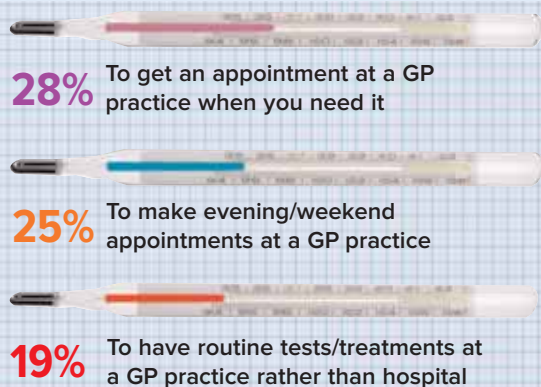


#### COMMUNITY PHARMACIES

As well as dispensing prescriptions, some may offer services like consultations on minor ailments, repeat medicines, and clinics to, say, help stop smoking.

## THE HEALTHCARE YOU WANT

**We asked the UK general public to choose their top three health priorities**



Sample size: 2,044. All respondents aged 16-plus

weekends. Alternatively, the primary care trust will be able to buy this service from other GPs or independent providers. And, unlike the other UK countries, ministers are proposing that English NHS GP surgeries open in places that people attend regularly, such as supermarkets, to make it easier for them to fit a visit in to their busy schedules.

**‘Everything takes so long to change’**

However, Leicestershire GP Dr Orest Mulka warns of problems where patients are seen in different places by different staff: ‘Patients won’t have an ongoing relationship with doctors. There will be less trust, and doctors will refer patients to hospital unnecessarily because of a fear of missing something or not having enough information to make a sound decision.’

When asked for their views, our online survey of Which? members (see ‘Our research’, opposite) raised concerns about the commercialisation of the health service. Sally Cooke told us: ‘Healthcare should be, and should be seen to be, completely independent.’

### Confusion over patient choice

In England, ‘patient choice’ has become shorthand for a choice of hospitals (see *Which?*, October 2007, p12). But it also refers to the choices you can make at a more basic level of healthcare. Ninety per cent of our health contact is in community services such as the GP’s surgery, and these types of community service are called ‘primary care’ – to find out more, see p27.

The Department of Health in England brought together patients and NHS staff in September 2007 and found ‘patchy know-

ledge and understanding of the range of services available at primary care level’. People said that if they knew more about local services, they would be less likely to use accident and emergency departments.

Our survey shows that 76 per cent of us who want to make healthcare choices would get information from our GP to help us decide. We can get advice from other sources, but only 16 per cent of people we asked said they would get information from a local pharmacy (less than the 21 per cent who would ask family or friends). Yet as Gill Dorer (opposite) found, pharmacists’ roles have expanded to cover some duties traditionally associated with GPs.

Only 1 per cent of us would go to a patient organisation for information. However, asthma sufferer Nicola Kingston, who had to give up dance classes after her asthma worsened, was able to develop a plan with her doctor after ringing the charity Asthma UK for advice. Nicola says: ‘I was able to go back to a dance class as a result of having an action plan designed for me.’

### The future

The four UK governments are working towards making more services available locally, with new types of service being tried

## BEING PATIENT

**Are you getting the information you need to make the most of your local health services? We investigate**

We wanted to find out how easy it is to use the internet and phone to find out about local health services. So we posed as five different patients – or patients’ relatives – with a range of conditions, and

tested our scenarios out in each UK country. While there was good information out there, we were surprised at how difficult it could be to find. (Any contact details not given below are in ‘Contacts’, opposite.)

### We liked:

■ Being able to get professional advice easily. In England, get in touch with the Patient Advice and Liaison Services (Pals); and in Northern Ireland, contact its Health and Social Services Boards. For advice in Wales, contact NHS Wales; and in Scotland, NHS Scotland.

■ National NHS websites with clear links to local health boards and organisations. This can be particularly useful when you’ve just moved to a new area. We found that the four UK countries’ NHS websites were strong on everything except

links to individual surgery websites, which only the Welsh NHS website fully provided.

■ Easily accessible general information about health rights. See [www.citizensadvice.co.uk](http://www.citizensadvice.co.uk) for Northern Ireland, [www.citizensadvice.org.uk](http://www.citizensadvice.org.uk) for England and Wales, and [www.cas.org.uk](http://www.cas.org.uk) for Scotland.



### We didn’t like:

■ The fact that we weren’t always directed straight to useful information. For example, a Pals officer advised us to phone several hospitals for infection rates. But we could have gone to the Healthcare Commission in England or UK-wide healthcare information and research organisation Dr Foster.

■ The websites that didn’t allow you to compare local services and facilities. NHS Choices lets English patients do this, but NHS24 in Scotland didn’t – so Scottish patients would have to ring round services such as GPs.



■ The lack of information on the performance of all healthcare professionals, including GPs. Go to <http://heartsurgery.healthcarecommission.org.uk> to find out about heart surgeons’ performance.

■ In all but one case, being directed to GP surgeries when other services were available.



## MANAGE YOUR MEDICINES

### Gill Dorer 64, patient advocate

Gill Dorer takes ten medicines for her long-term health conditions, which include osteoarthritis and the eye condition glaucoma. She is

keen to manage her own health, and a free appointment with her pharmacist – called a medicines-use review – helped her with this.

Gill's pharmacist advised her on better managing her pain, encouraging her to vary her medication. She also advised Gill on a dropper to target her eye drops and avoid dark circles around one eye. The only concern that Gill had was that the consultation was in a tiny area with interruptions from staff.

Gill tells us: 'I feel in control when I'm getting enough information. I think people don't recognise pharmacists as experts in medicines, but they can be available Monday to Sunday and are less daunting than the doctor. We need to make better use of pharmacists as the real resource that they are.'



– such as polyclinics (see p27 for more information). But to make best use of them, we need to understand what they offer.

As for the patients of McKenzie House, the government has named the surgery's home of Hartlepool as one of 38 under-resourced areas in England that will get a total of 100 new GP practices over the next three years, and the local primary care trust said that a large new practice is on the way.

But as local resident Linda Shields says: 'In the meantime, people here are still queuing. Everything takes so long to change.'

### Which? says

We continue to campaign on your behalf for the right health choices to be offered. We recently presented evidence on access to primary care to the All-Party Parliamentary Group, and you can go to [www.which.co.uk/campaigns](http://www.which.co.uk/campaigns) to find out more about our campaign for better hospital care.

We will also keep abreast of primary care to make sure the changes are working for you. As Which? member Norman Bone tells us: '[I] mainly want excellent local services, requiring no choice to be made.'

## Contacts

**Citizens Advice Bureau (Scotland)** [www.cas.org.uk](http://www.cas.org.uk)  
**Dr Foster** 020 7332 8800  
[www.drfooster.co.uk](http://www.drfooster.co.uk)

**Healthcare Commission (England)** 0845 601 3012  
[www.healthcare-commission.org.uk](http://www.healthcare-commission.org.uk)

**Independent Complaints and Advocacy Service (England)**  
020 7210 4850

**Local Community Health Council (Wales)** 0845 644 7184  
[www.wales.nhs.uk](http://www.wales.nhs.uk)

**NHS Choices England**  
[www.nhs.uk](http://www.nhs.uk)

**NHS Northern Ireland**  
[www.n-i.nhs.uk](http://www.n-i.nhs.uk)

**NHS Scotland**  
[www.show.scot.nhs.uk](http://www.show.scot.nhs.uk)

**NHS Wales** [www.wales.nhs.uk](http://www.wales.nhs.uk)

**Northern Ireland Health and Social Services Council (NHSSC)**  
0800 917 0222; [www.nhssc.org](http://www.nhssc.org)

**Patient Advice and Liaison Services (England)**  
[www.palis.nhs.uk](http://www.palis.nhs.uk) or contact your local hospital or primary care trust

### PATIENT EXPERIENCES

**DipEx** 01865 289328  
[www.dipex.org](http://www.dipex.org)

**Patient Opinion (England)**  
[www.patientopinion.org.uk](http://www.patientopinion.org.uk)

**Patient UK** [www.patient.co.uk](http://www.patient.co.uk)

### MANAGING YOUR HEALTH

**Ask About Medicines**  
[www.askaboutmedicines.org](http://www.askaboutmedicines.org)

**Expert Patients Programme England**  
020 7922 7860  
[www.expertpatients.co.uk](http://www.expertpatients.co.uk)

**Expert Patients Programme Wales**  
029 2082 6526  
[www.eppwales.org](http://www.eppwales.org)

**NHS Equip (Electronic Quality Information for Patients)**  
0121 414 7754; [www.equip.nhs.uk](http://www.equip.nhs.uk)

## Checklist

### Tips on making the best healthcare choices

■ **Get clued up** Check out which services are local before you need them, and have out-of-hours information to hand. Use libraries, service directories – such as Thomson – and websites to find the primary care trust or health board organising NHS services in your area.

■ **Help yourself** Challenge yourself as you make health choices: for example, could you see someone other than the GP or avoid accident and emergency? Use the *Which? Hospital Companion* (see p26) and patient organisations – see 'Contacts', left – to help you prepare for appointments.

■ **Know your rights** Each UK country has signed up to different priorities and targets under the GP contract, although all should offer an appointment within 48 hours.

■ **Discuss concerns** Talk – or write – to a member of staff, such as the practice manager at your GP's surgery. You may feel more at ease taking someone with you.

■ **Take it further** If you can't resolve the problem, consider making a complaint to the NHS organisation. You normally have six months to register your complaint orally or in writing – this can be waived if there are good reasons. In England, NHS foundation trusts have their own procedures and will advise you on how to complain. For complaints advice in England contact the Patient Advice and Liaison Services or Independent Complaints and Advocacy Service; in Northern Ireland speak to the Northern Ireland Health and Social Services Council; in Scotland contact Citizens Advice; and in Wales, go to your local community health council. Also use the *Which? Hospital Companion* (see p26) for advice.

### OUR RESEARCH

In September and October 2007, we interviewed 2,044 members of the UK general public (aged 16-plus) about their choices in primary (community) healthcare. In October and November 2007, 2,637 Which? online panel members completed a survey telling us more about choices that are important to them, and their views on what's on offer.