

Recorded Messages and Automated Telephony in GP Surgeries

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Overview

Service users often depend on contacting GP practices by telephone. The quality of a practice's telephone system will impact overall patient experience and how they feel about the quality and access to care offered. While telephone contact with GP practices was challenging for some service users pre-COVID, with the volume of calls outstripping even the most efficient call-handling systems during peak hours, the requirement of COVID restrictions placed an even heavier burden on limited resources.

Access to healthcare saw a host of changes with the COVID pandemic. Instead of 'popping in', the first point of contact between service users and GP surgeries became the telephone and/or digital forms. Whilst pre-pandemic, service users could make requests for appointments or prescriptions by visiting GP surgeries in person, or by booking appointments on websites, these routes were halted, or extremely restricted.

Many find the new system and use of digital forms a fast and effective way of getting the care and support they need. However, our monthly feedback reports¹ highlight how changes to access are not positive for all and have a disproportionately poor impact on some groups.

 *“My brother, who has a speech impairment, relies on others to book his appointments. He does not know how to use the internet and does not have a laptop. But doctors’ appointments are possible only this way! Only emergency appointments by telephone! Only then you will get to speak to the doctor – only over the telephone. How does this service work for many who are the same as my brother?”* 

¹ <https://healthwatchgreenwich.co.uk/search/site/feedback>

While COVID guidelines have been largely removed, changes to access have broadly remained. Telephone communication with patients remains a key component of GP services. For many, telephone contact is a primary access point, and an interaction that shapes current and future service user experience – positively or negatively.

Aims

Review the information provided on recorded telephone messages and automated telephony systems at GP surgeries in Greenwich, including:

- Notification on wait times for response or place in the call line
- telephone menu options for test results and prescriptions
- what information is given on how to book an appointment
- access for those who are digitally disadvantaged.

Methodology

Healthwatch Greenwich volunteers called GP surgeries in Greenwich and recorded the answer-phone message and telephony menu options in December 2021. This exercise was repeated in March 2022.

We found several GP surgeries had amended information in their recorded messages and related menu options during this three-month period. The findings of this report primarily relate to information gathered in March 2022.

We have also used service user experience as contained in our monthly feedback reports.

A big thank you to Healthwatch Greenwich volunteers

Volunteers play a vital role at Healthwatch Greenwich in helping people share their views and experiences and taking part in our research projects.

Thank you to all the Public Health students at the University of Greenwich who were responsible for supporting us with this mystery shopping report, in particular:

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Limitations

The information we collected does not include all information provided in recorded messages. For the purposes of this report, we **excluded information on COVID-19, mask wearing, opening times, and abuse/violence towards staff.**

Any changes, or **further improvements**, made to recorded messages or automated telephony systems **since our data collection in March 2022 will not be captured in this report.**

Findings

Our audit found the quality of information provided to service users in recorded messages and telephony menu options varied between GP surgeries with little standardisation. As such, service user experience will vary - with some receiving succinct and useful information when calling, while others will not

We found examples of good practice, with welcoming and informative recorded messages and good descriptions of services offered and how to access them:

"This is Dr_____, GP partner at the surgery. Your call is important to us.

Thank you for your patience with us during this time of increased demand and staff shortages.

Please listen to this message so your call can be answered by an appropriate member of staff.

To make, change or cancel an appointment, please be prepared to answer a series of questions that the receptionist will ask so your query or concern is dealt with correctly.

If you are visiting the surgery please wear a face covering.

If you are calling regarding test results or for general queries, please call after 11 am.

Information about COVID-19 vaccination can be obtained at_____.

We do not take prescription requests over the phone. Please contact your pharmacy or register for online patient access.

There is a delay of 8-10 weeks for non-NHS work like private tests results. Please listen to the following options..."

Some automated messages spent a significant amount of time giving information that is less useful to service users while neglecting to provide information that would make the calling process more efficient for both the service user and the GP surgery. For example, one GP surgery gave callers very basic information and directed them to the website (assuming all callers are digitally literate and can access websites), without sharing the website address or what kind of information would be found there.

- A significant number of GP surgeries do not give callers information about telephone waiting times or their place in the call line.
- Most GP surgeries do not provide a telephone menu option to book appointments
- Most GP surgeries do not provide a telephone menu option for test results.
- Most GP surgeries do not provide a telephone menu option for prescription queries/repeat prescriptions.
- Most GP surgeries do not provide a telephone menu option for those who are digitally disadvantaged (can't use eConsult) or need interpreting services.

Waiting Time

Service users contact GP surgeries for a variety of services, booking appointments, screening, requesting referrals, finding out about test results, getting prescriptions, sick notes, vaccinations, and a large range of other related health and care needs. Many service users call during the first couple of hours after the surgery opens. Partly due to health and care needs that may have arisen after the practice closed the day before and partly because GP surgeries often encourage service users to call at this time.

As a result, wait times for calls to be answered during peak hours² can be long, creating dissatisfaction with the service offered, stress, anxiety, and for some, a financial cost.



"I have been hold on many times for 30 mins or more. I'm a pensioner and my bill goes sky high."

² Usually between 8 – 10am.

Notifying callers, as part of the automated telephone system, the approximate wait time or their place in the line can help to manage expectations and allow callers to make informed choices, minimising potential angst. Those that only have 10 minutes before, for example, having to take children to school, or starting work, might decide to call back later if told they are 5th in the line, or the wait time is likely to be longer than 10 minutes.



“I didn’t have the time to call every day, like 8 o’clock, every day, on the telephone, and wait for half an hour because of my work. I start work early in the morning and can’t be on a [telephone] call while I am driving.”

Waiting, not knowing when their call might be answered can be immensely frustrating for service users, potentially tarnishing their overall experience.

- Only half of surgeries offer callers information on their position in the queue or the approximate waiting time.

Automated systems informing callers of place in the line to be answered or likely wait time.

Primary Care Network (PCN) ³	Number of surgeries	Informed of call waiting time	Informed of place in the call line
Blackheath and Charlton	4	1	4
Eltham	7	0	3
Greenwich West	6	0	2
Heritage	5	0	3
Riverview	9	0	3
Unity	6	0	3
TOTAL	37	1	18

³ PCNs are led by clinical directors who may be a GP, general practice nurse, clinical pharmacist, or other clinical profession working in general practice. Over 99% of general practices nationally are part of a PCN.

Booking Appointments

One of the major changes to accessing services at GP surgeries is the expansion of eConsult^{4 5}. While some practices offered this facility pre-pandemic, uptake was low. Increased use of digital platforms is part of long-term NHS strategy. The General Medical Services (GMS) contract⁶ outlines specific digital requirements for GP surgeries⁷, including:

- all practices offering online consultations by April 2020
- all practices offering video consultations by April 2021

The use of digital platforms was mandated and further escalated by national COVID restrictions. While most COVID restrictions have lifted, the use of eConsult as the main entry portal to access primary care services has remained.

eConsult offers both an opportunity and a challenge to service users. Those fluent in English and comfortable with digital platforms often find eConsult offers a fast and easy way to access services. Rather than having to tolerate telephone waits tortured by incessant 'hold' music, many can now make an easy request via eConsult, and receive a rapid response. Indeed, there is some suggestion that easier access for some groups has driven an overall increase in demand for primary care services^{8 9}.

Not all have found eConsult an advantage. Some tell us the eConsult interface is tedious and repetitive, the form too long.

“eConsult process is a joke. It’s a long and laborious form you must fill in for each request.”



Those with limited English find it difficult to answer questions and describe their symptoms.

⁴ <https://eConsult.net/nhs-patients>

⁵ <https://econsult.net/blog/econsult-online-triage-now-offered-by-over-3000-gp-practices#:~:text=Over%203%20million%20eConsults%20have%20been%20submitted%20in%20the%20UK&text=During%20the%20COVID%2D19%20crisis,remain%20protected%20from%20potential%20infection.>

⁶ <https://www.kingsfund.org.uk/publications/gp-funding-and-contracts-explained>

⁷ <https://www.pulsetoday.co.uk/news/technology/gps-contractually-required-to-offer-and-promote-remote-consultations/>

⁸ <https://digital.nhs.uk/data-and-information/publications/statistical/appointments-in-general-practice/february-2022>

⁹ <https://commonslibrary.parliament.uk/research-briefings/cdp-2021-0167/>

“...told to go and use eConsult...it is only in English...there are so many different questions to answer, and my English is not good. After waiting for 30 minutes on the telephone if the reception tells me to go fill a form it is not helpful.”



Those with limited manual dexterity, often a result of a disability or long-term condition, find it difficult to type into the eConsult form. Service users also say the algorithm does not always offer helpful suggestions – such as directing them to A&E for (what they believe to be) non-serious symptoms.

While it may be difficult and complex to make changes to eConsult algorithms and format, greater consideration should be given to providing an easy option for patients to book appointments on the telephone using an automated menu choice rather than a specific time to call back.

- While there has been a significant shift to using eConsult, not all GP surgeries direct callers to this option, with **just over half doing so**.
- **Less than a third** provided telephone menu options to book appointments.

Recorded message informing callers how to book an appointment

Primary Care Network (PCN)	No: surgeries	Directed to eConsult or website	Given dedicated time to call for appointments	Telephone menu option for appointments
Blackheath and Charlton	4	2	1	3
Eltham	7	4	1	2
Greenwich West	6	5	1	1
Heritage	5	2	1	2
Riverview	9	5	3	2
Unity	6	3	0	0
TOTAL	37	21	7	10

Digital Exclusion and Interpreting Services

Most digitally proficient service users welcome the shift to on-line forms and portals to access primary care services. Few hark back to the days of miserable waits in overcrowded waiting rooms being coughed over by other patients. For those that can use the tools and platforms, available services can be accessed in a much more flexible manner than before. However, those who are not digitally comfortable find this change in approach challenging and an additional barrier to receiving the health care and support they need.

Including a telephony menu option for those unable to use digital forms and platforms to access services would reduce service user frustration and facilitate ease of access for the digitally disadvantaged.

While access to interpreting services via 'Language Line'¹⁰ is available, some service users tell us (a) they do not know about this service and therefore do not ask for it, (b) it is not offered to them, and (c) if they do ask for language support, their request is sometimes refused. Service users tell us they are routinely asked to bring relatives or friends to translate on their behalf, breaching confidentiality, creating service user embarrassment and reticence with full disclosure, and potentially exacerbating dangerous situations – in cases of domestic violence where the perpetrator is translating on behalf of the victim. In addition, service users tell us that younger generations of family members, while fluent English speakers, do not always have a high-level of proficiency in the family language and are often unable to translate complex medical information.

Including information on access to interpreting services as part of an automated menu choice would both raise awareness of this facility and encourage wider use.

- **Only 1 in 6 GP surgeries** provided information for callers who were digitally disadvantaged or for those who required interpreting services.

¹⁰ https://www.royalgreenwich.gov.uk/info/200160/contact_us/789/royal_greenwich_interpreting_service

Recorded message informing callers how to access interpreting services or how to access services if unable to use digital tools		
Primary Care Network (PCN)	No: surgeries	Menu option for digitally disadvantaged/those who are not fluent in English
Blackheath and Charlton	4	0
Eltham	7	3
Greenwich West	6	1
Heritage	5	2
Riverview	9	0
Unity	6	0
TOTAL	37	6

Test Results

Calls to enquire about test results are not always urgent but callers remain in the same queue as others therefore increasing waiting times for those with more pressing needs. A more efficient use of telephone menu options could reduce overall telephone wait times for all. Offering an automated menu choice rather than a specific time to call back provides greater flexibility and convenience for service users.

- Just over a **third** of GP surgeries offer a menu option for test results, with nearly **half** giving a specific time to call back.

Recorded message informing callers how to access test results			
Primary Care Network (PCN)	No: surgeries	Dedicated time to call for test results	Telephone menu option for test results
Blackheath and Charlton	4	2	3
Eltham	7	2	3
Greenwich West	6	5	1
Heritage	5	3	2
Riverview	9	5	4
Unity	6	0	0
TOTAL	37	17	13

Prescriptions

Other than appointments, enquiries relating to prescriptions is one of the most frequent services used by patients. While some of these calls may not be urgent, service users remain in the queue, potentially increasing waiting times for those with more urgent needs.

- While many recorded messages told callers that repeat prescriptions could not be requested over the telephone, **very few informed callers how to request repeat prescriptions.**

Recorded message informing callers how to access repeat/prescription queries

Primary Care Network (PCN)	No: surgeries	Dedicated time to call for repeat/prescription queries	Telephone menu option for repeat/prescription queries
Blackheath and Charlton	4	1	2
Eltham	7	0	2
Greenwich West	6	4	1
Heritage	5	1	1
Riverview	9	2	3
Unity	6	0	0
TOTAL	37	8	9

Conclusion

GPs and all staff at surgeries are motivated by a desire to help as many people as possible. Creating a more efficient recorded message and automated telephony system is only **one component in overall patient satisfaction** and any system is only as good as the resources supporting it. If telephony menu options are not responded to in a timely manner service users will simply find themselves waiting in even more call lines to seek the support and care they need – waiting in line to get through to the surgery and then waiting for their menu option to be responded to.

All telephony systems rely on practice staff, to answer calls and respond to service user needs. For a truly effective system enabling service users calls to be answered and responded to in a timely manner, **either demand must reduce -**

and the volume of calls goes down, or the time taken for each call must be shorter – so more calls can be answered in the same length of time, or more staff are needed to answer and respond to calls.

Given the huge pressure on primary care¹¹ and the national workforce crisis¹² using the recorded message and appropriate menu options may contribute to reducing overall wait times and call length, but it is unlikely to impact call volume and nor can it **magically produce more doctors, health care professionals, or practice staff**. Improved recorded messages and telephony will only improve service user satisfaction if resources are available to meet overall demand.

Recommendations

1. Consideration should be given to reviewing and updating GP surgery telephony systems, and use of a standardised set of information, for example:

“Thank you for calling _____ surgery, your call is important to us. Please listen to this message to make sure you get the help you need.

Our opening times are between ____ and _____. If you require medical help outside of this time, please call_____

If you call is not urgent, please consider calling after _____ when the waiting time may be shorter.

If you require urgent medical help – please ring 111

If you are calling to book an appointment and can use the internet, please use eConsult. You can also use eConsult to request _____ and _____ and _____. You will be asked to complete a form to tell us how we can help you.

You can find eConsult on our website at _____.

If you do not have access to the internet or if you require interpreting or additional support or if you need to book a double appointment, please press _____

To book or cancel an appointment, please press _____

To request test results, please press _____

To request a prescription, please press _____

For any other query, please press _____. You will be asked questions on the reason for your call so we can make sure you get the help you need

You are call number_____ in the line to be answered.”

¹¹ <https://blogs.bmj.com/bmj/2021/05/14/if-general-practice-fails-the-nhs-fails/>

¹² <https://www.bma.org.uk/bma-media-centre/latest-data-shows-nhs-workforce-crisis-is-blighting-general-practice-says-bma>

2. Giving callers information about telephone waiting times or their place in the call line.
3. Giving callers a telephone menu option to book appointments
4. Giving callers a telephone menu option for test results.
5. Giving callers a telephone menu option for prescription queries/repeat prescriptions and information on how to order repeat prescriptions.
6. Giving callers a telephone menu option for those who are digitally disadvantaged (can't use eConsult) or need interpreting services.



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