

# GP Surgery

# Mystery Shopping Report

December 2020 - January 2021



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# GP Surgery - Mystery Shopping Exercise

## December 2020 - January 2021

In December 2020 and January 2021, four Healthwatch Haringey volunteers were tasked with calling all 39 GP surgeries across Haringey to find out how long it may take a potential patient to get through to and speak with a staff member. They were also asked to feedback any issues or observations they had that might both deter and/or encourage a patient to call back in the future.

It is worth noting that the findings only demonstrate a snapshot of the particular time and day which the volunteer called the surgery. It is also widely understood and appreciated that there are higher volumes of calls to GP surgeries at certain times of day and on certain days of the week, for example, Monday mornings before 10am.

## Findings

### Speaking with a Staff Member

- Volunteers were able to speak to a member of staff at 34 out of 39 surgeries.

Of the five surgeries that volunteers were unable to reach:

- One was engaged with no pre-recorded message with information, or option to hold/be placed in a queue.
- At one surgery, the volunteer was placed on hold for three minutes and they gave up holding.
- One surgery's telephone number was incorrect on their website, but the volunteer found the correct one using a search engine. They stated that they, *"got a repeated message with the surgery opening times but no offer to stay online to speak to someone. Message says, 'you are being transferred to the operator' - then silence, then 'that extension is not valid, please try again'"*. This surgery was contacted on three separate occasions all with the same outcome.
- One surgery provided an automated message with options to go through to different departments and then cut off. This surgery was then called twice again with one volunteer getting through in two minutes, and another waiting 20 minutes.
- One was engaged on three occasions and just cut off.

## Call Waiting Times

- On average, it took less than five minutes for the volunteer to speak with a staff member in those cases when someone answered the phone.
- At 33 surgeries, the overall call time was less than 10 minutes.
- At three surgeries, the overall call time was between 10 and 20 minutes.
- At two surgeries, it took the volunteer 30 minutes before they were able to speak with a staff member. Both of these phone calls were made outside of peak call times with one taking place at 11.50am, and the other at 4pm.

## Pre-Recorded Messages

- Volunteers reported that there were several very long, and confusing, pre-recorded messages which were played even before the phone began to ring.
- Many pre-recorded messages directed the volunteer to use online booking systems with no clear option to speak with a staff member.
- One surgery offered a long recorded message to explain that the only way to book an appointment was via their website. It was only by holding a little longer that options to speak with someone were provided. This call took 3 minutes before speaking with a receptionist.
- One surgery had a message that started with rather a long narrative about being respectful to staff and that threats or inappropriate behaviour would not be tolerated.

## Holding and Queueing Systems

- Many pre-recorded messages directed the volunteer to use online booking systems with no clear option to speak with a staff member.
- One surgery had an engaged line when the volunteer called, and no option to hold and/or be placed in the 'queue'.
- Volunteers reported nine surgeries who had a queuing system which indicated at which position in the queue they were.

Generally, waiting times and call times were acceptable at most of those surgeries that actually answered the phone with volunteers being able to speak to a staff member in less than one minute. There was no specific trend or correlation between the time of day the calls took place and the call waiting time, and the twelve calls that were placed before 10am were all answered in less than four minutes.

Some volunteers also called surgeries out of hours. The out of hours messages varied from surgery to surgery and some provided complicated information about the myriad of services offered, along with opening times. All referenced calling 111 if there was an issue and 999 in an emergency. There were some out of hour's messages which were more succinct and clearer than the others.

## Conclusions

Waiting for 30 minutes is clearly unacceptable and in both cases the calls were not made at peak times.

Volunteers were more likely to hold on and wait to speak with a staff member if they knew where they were in the queue. It is therefore suggested that all surgeries adopt this method. To improve this further, patients could also be provided with an estimated waiting time and the offer of a free call back if they were not able to hold the line for that amount of time.

It is suggested that surgeries review the automated messages which a caller is taken to as many of these were long, confusing, and could be made clearer. These messages can be a deterrent for those who need to speak with a staff member if they do not understand their options, and/or for those whose first language is not English. They seem to be designed to be defensive and discourage the caller from continuing with the call.

It is suggested that surgeries review messages which appear to only give the option to book an appointment via the surgery's website. This is a barrier for those who are digitally excluded and wouldn't otherwise be able to book their appointment. Instead, it would be advised that this be an alternative option to booking over the phone, rather than the only option. This is a source of many complaints.

It would be interesting to analyse the numbers of calls to GP surgeries that are terminated before reaching a member of staff. In many cases the caller will assume that the appointment has to be made through the website or via E-Consult or similar.

Volunteers were asked to locate the surgeries opening times and contact telephone numbers from each surgeries' website. The majority of websites were easy to navigate to find this information but there were two websites that were not, and further investigation was needed to find this information. It would therefore be suggested that surgeries review the homepage of their websites to ensure both telephone number and opening times are clearly displayed and easily accessible. In one case the telephone number on the website was incorrect which is clearly not acceptable.

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