Report on the Impact of Patient 'Did Not Attend' Appointments at GP Surgeries in Lincolnshire
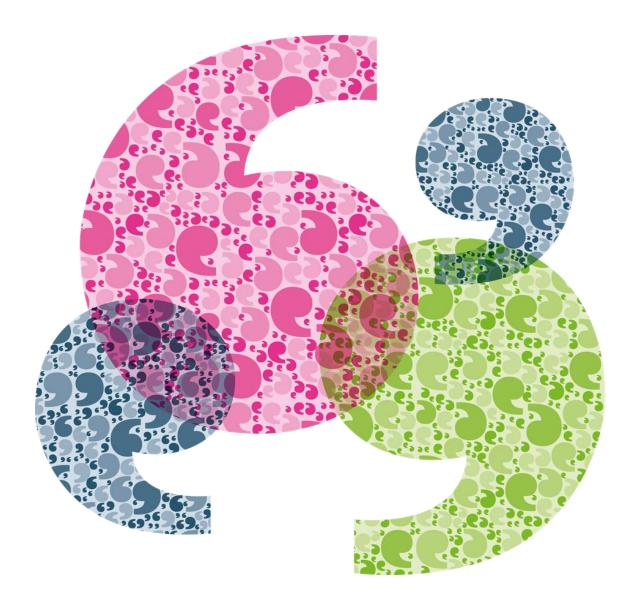
November 2014

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Key

DNA – Did not attend
CCG – Clinical Commissioning Group
GP – General Practitioner

Acknowledgements

From June to August 2014 Healthwatch Lincolnshire worked closely with GP Surgeries to research the impact to their organisations from patients who fail to attend their booked appointments. From the 101 surgeries operating across Lincolnshire, 38 supported our work. A list of those involved can be found Appendix 2. We would like to thank all of these surgeries for the time taken to complete our survey and to those who provided additional feedback to us.

Part 2 of our research work asked patients to share with us their experiences when accessing GP appointments. We would like to thank the 427 people from Lincolnshire who responded by completing the patient survey as part of our data gathering. In addition, thank you to the Patient Participation Groups who helped distribute the patient surveys. A list of which surgeries these patients are registered with (and numbers of responses from each) is at Appendix 4.

The Daily

October 2014

RUNNING OUT OF GPs

Up to 543 GP practices in England — potentially rising to nearly 600 across the UK — could be forced to close within the next year because of a deepening crisis in GP recruitment and retention, which is leaving many practices unable to replace family doctors who are retiring from the profession. New figures released by the Royal College of General

Practitioners show that over 90% of the GPs working in these practices are now aged over 60. Unless drastic action is taken to make sure that there are enough doctors to take their place, thousands of patients could be forced to travel miles to their nearest GP practice or be left stranded with no family doctor at all.
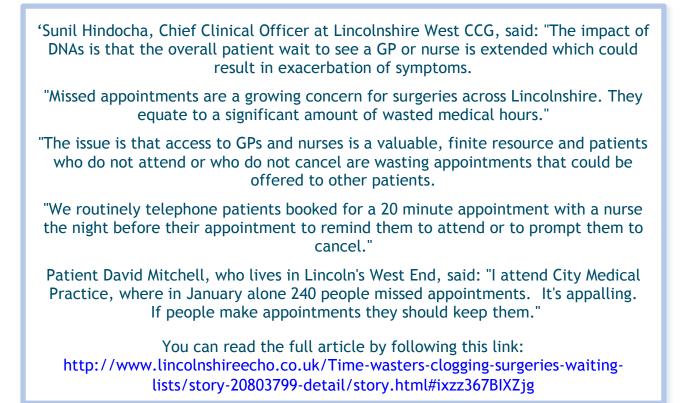
Executive Summary

From the commencement of Healthwatch Lincolnshire in April 2013, we have continually received a significant number of patient and carers feedback about access issues and services from their GP surgery. In particular "I cannot get an appointment with my GP" has been a very common view shared with us. The following is a snapshot of some of the many individual comments we have received:

"Trying to get an appointment recently is hard to get, the system has changed and makes it harder for patients to get to see the same doctor twice"

"Waiting times on-line to get into GP surgery is minimum of 2 weeks to get an appointment. If you want to see your designated GP then you have to wait a month. If you call there are no appointments."

"Phoned early to book an appointment only to be told all appointments have been taken for that day and could not book for the following day"

Whilst we accept there are many factors as to why patients are experiencing difficulties getting an appointment with their GP eg national problem with GP and nurse recruitment, number of people living longer with long-term conditions. For this research work our attention was drawn (by the GP Surgeries) to one factor, which is the large number of patients failing to attend their booked appointment. This is becoming an increasing concern to many surgeries as it is seriously impacting their services. The following comment from one surgery summarises well the concerns of many:

"Although our DNA rate is low in comparison to some organisations it is still a colossal waste of clinical time, money and effort. In some cases patients book and DNA on the same day. There is also a cost to the remainder of our patients who have to wait for appointments"

Below is an extract from an article in the Lincolnshire Echo (March 2014), which clearly highlights from a professional's point of view DNA is a growing concern:

'Sunil Hindocha, Chief Clinical Officer at Lincolnshire West CCG, said: "The impact of DNAs is that the overall patient wait to see a GP or nurse is extended which could result in exacerbation of symptoms.

"Missed appointments are a growing concern for surgeries across Lincolnshire. They equate to a significant amount of wasted medical hours."

"The issue is that access to GPs and nurses is a valuable, finite resource and patients who do not attend or who do not cancel are wasting appointments that could be offered to other patients.

"We routinely telephone patients booked for a 20 minute appointment with a nurse the night before their appointment to remind them to attend or to prompt them to cancel."

Patient David Mitchell, who lives in Lincoln's West End, said: "I attend City Medical Practice, where in January alone 240 people missed appointments. It's appalling. If people make appointments they should keep them."

You can read the full article by following this link:
http://www.lincolnshireecho.co.uk/Time-wasters-clogging-surgeries-waiting-lists/story-20803799-detail/story.html#ixzz367BIXZjg

Two areas of intelligence (patient concerns and GP surgery feedback) led Healthwatch Lincolnshire to focus our research on what the impact DNAs are having on GP surgeries in Lincolnshire.

Our key findings include:

- The average annual number of patient DNAs across GP surgeries in Lincolnshire is 184,224.

- The average annual cost of patient DNAs in Lincolnshire to the NHS is £6,632,000 (this figure is based on the King's Fund average cost for each GP appointment).

- The impact of DNAs is that the overall patient wait to see a GP or nurse is extended, which could result in exacerbation of symptoms.

- The highest number of recorded DNAs in one surgery was 454 in November and the lowest was 28 in March/April.

- 33% of patients admitted to forgetting to attend their appointment, even though:

  - 80% of GP surgeries in Lincolnshire have online booking appointment systems in place.

  - 60% of respondents have text message appointment reminders.

There is also concern as to what impact on the wider health community DNAs have. For instance, if a patient is unable to visit their doctor for treatment, are they then presenting themselves at a walk-in centre or A&E, creating more demand on already overstretched services? If the culture of not attending appointments is growing, we must also consider how this affects hospital and other health services in Lincolnshire.

How many patients are failing to attend their outpatient appointment and what is the cost to that service? Feedback from United Lincolnshire Hospital Trust is indicating patient DNA is a serious issue for their organisation.

Our findings have provided real evidence of the impact of patient DNA to our GP Services across Lincolnshire. The next steps must surely be for statutory organisations to provide better awareness and understanding of 'Did Not Attends' to their patients, particularly in relation to firstly, the cost to the NHS and secondly, the implications to other patients.

Alongside the impact of this problem, we recognise there are many other factors to DNA:

- Some people have personal barriers causing them to DNA such as caring responsibilities or health problems. We were told by one person that their mum in her eighties was caring for her husband and as a result was not able to attend 2 GP appointments. The practice wrote to this lady suggesting she would be struck off due to not attending the appointments. Another example was a patient with mental health problems, some days getting out of bed and getting to the doctors is just "too difficult to cope with".

- One patient told us he walked into a packed GP waiting room to be informed there was at least a 30 minute waiting time and as a result he walked out as he had limited time available. (This does not excuse him failing to inform the reception staff of his intention to leave.)

The remainder of our report provides in-depth information of the research undertaken by Healthwatch Lincolnshire to support the production of this report and includes conclusions and next steps.

Introduction

Healthwatch Lincolnshire

Healthwatch Lincolnshire came into effect on 1st April 2013, as an independent organisation and formed as a registered charity and Company Limited by Guarantee.

Part of the Health and Social Care Act 2012 recognised the need for a local independent consumer champion for health and social care services to cover each of the 152 county councils or boroughs, with one overarching body Healthwatch England. The Health and Social Care Act 2012 provided each Healthwatch with the following statutory powers:

- A duty on service providers and commissioners to respond to requests for information within 20 working days.

- A duty on service providers and commissioners to respond to recommendations within 20 working days.

- Make reports and recommendations about services known to commissioners, providers and regulators of health and social care services.

- A duty to allow entry to authorised statutory health and care facilities known as 'Enter & View' visits.

- A seat on the Health and Wellbeing Board to promote health improvements and tackle health inequalities.

- A process where recommendations to Healthwatch England about which special reviews or investigations may be required and where relevant, to the Care Quality Commission.

Healthwatch Lincolnshire activities can be broken down into 3 core functions:

Influencing - We are here to listen to people's views and personal experiences of their health and care services and share the key messages we hear in order to help influence improvements in services.

Signposting - Signposting people to help them access advice, choice and information about their local health and care services.

Watchdog - To ensure change is happening.

You can find out more about the work of Healthwatch Lincolnshire by visiting our website www.healthwatchlincolnshire.co.uk or by contacting us and a member of our team will be happy to discuss further.

A Brief Overview of Lincolnshire

Lincolnshire is England's fourth largest county. As a predominately rural county with only one city, Lincolnshire is particularly challenged by its road networks having some of the largest number of B and C roads in the country. Transportation of patients to and from health and care services is a continual problem.

The 2011 census recorded a population of 713,653 (updated figures from Lincolnshire Research Observatory show an increase in our population to 724,500 by mid-2013), of which 17% are under 15 and 21% are over 65. However, the proportion of people over 60 is 28%, meaning we have a growing older population of people in the county.

The number of residents who were born outside of the UK has more than doubled in the past 10 years with Lincoln, Boston and South Holland having the greatest proportion of foreign born residents.

Lincolnshire is still well below the national statistics of non-white population (14%) having 2.4% of its residents as non-white, with the majority of them being younger and economically active.

The 2014 Health Profiles for Lincolnshire show that in comparison to England as a whole, the health of people in Lincolnshire is varied. For example, deprivation in the county is generally lower than the England average, but about 17.2% (21,300) of children live in poverty. They also show that health priorities include obesity (Lincolnshire is showing worse than England average statistics), smoking and alcohol.

Lincolnshire health and care key organisations (Lincolnshire County Council, NHS England, 4 Lincolnshire CCG's, EMAS, ULHT, LCHS and LPFT) are currently working on reorganising and integrating health and care services across Lincolnshire. This work will provide services much closer to home, helping to ensure more people are treated locally and away from hospital and may well result in future significant changes, as well as financial savings.

Background

Why has Healthwatch Lincolnshire completed this activity?

Since visiting a GP is the place where patients first access the health system in their area, it is not surprising that over the past 15 months the greatest number of reported items to Healthwatch Lincolnshire concerns GP services. However, we quickly realised that there was a clear theme, which was individual's ability to book an appointment with their GP, when they needed or wanted to.

More recently (April - May 2014), Healthwatch Lincolnshire has been in discussion with GP surgeries who have highlighted concerns relating to the number of patients failing to attend their appointments (these are referred to in this report as DNA).

Further evidence was also gathered when we talked to a number of Patient Participation Groups who confirmed that large number of weekly missed appointments at their surgery was having an impact on patient's ability to get an appointment to see their GP.

Finally, we had one GP surgery ask us "is there anything Healthwatch can do to help raise the problem of patients failing to attend their appointment as it is seriously causing us concern". It was at this point (May 2014) that we decided to gather some research into the impact of DNA appointments by patients at GP surgeries in Lincolnshire.

National Picture

Non-attendance is a major issue and cost to the National Health Service (NHS). DNA rates have an enormous impact on the health care system in terms of cost and waiting times, significantly adding to delays along the patient pathway. 11.7% of all appointments across the NHS are unattended. [1, 2]

The financial cost of missed appointments in the NHS has been estimated at £600m per year,[3] most of this accounted for by non-attendance in primary care and hospital out-patient clinics. This figure is so large that even a small reduction in DNA rates could save significant sums. For example, cutting non-attendance by a tenth (from 12% to 10.8%) would cut the annual cost by a tenth (from £600m to £540m). Improving attendance would also reduce health risks to patients.[4-6] Despite long standing interest in the causes of missed appointments, practical recommendations for reducing their prevalence are scarce.

Non-attendance in general practice has received increasing attention over the past few years. Its relationship with access to healthcare has been recognised. A survey carried out jointly by the Doctor Patient Partnership and the Institute of Healthcare Management in the UK revealed that 17 million GP appointments and 5.5 million practice nurse appointments were missed in 2000 [7] at an estimated cost of £150m. The 2 studies estimated the non-attendance rate in the UK to be 6.5% [8] and 7.7% [9]. The average NHS-wide figure for non-attendance in outpatient clinics nationally is often quoted at 12 %.[10] There is considerable variation in the rates of non-attendance and studies have reported this as ranging from 5% [11] to 34 %.[12]

There are several reasons why non-attendance to appointments is a drain in the National Health Service resources. The first is economic, the cost of a single GP appointment was estimated by the kings fund at £36 per visit (see diagram below). The second issue is workforce. Patients' failure to attend increases the time others must wait and non-attendance means under-utilization of equipment and workforce. The third issue is patient health. A delay in presentation and therefore diagnosis or haphazard monitoring of chronic conditions will predispose to avoidable ill health. [5, 6]

The costs of NHS services are not well known. Approximate costs for some services include:

£344 Ambulance journey from an accident scene

£250 Hospital admission overnight stay

£111 Accident and emergency visit

£44 Visit to a family planning clinic

£36 Visit to a GP

The King's Fund

The Kings Fund diagram above provides an overview of estimated costs per NHS service

Methodology

Part 1 – GP Surgery Response

Healthwatch Lincolnshire conducted an independent study into DNA in general practices. All 101 GP surgeries in Lincolnshire were invited to participate by email in June 2014.

Practice managers were asked for their participation to create a Lincolnshire-wide picture of DNA and to be part of a possible task and finish group (to include NHS England Area Team and 4 Lincolnshire CCG) on what actions are required to improve the situation for all.

Participation involved completing a short survey which included stating the number of available and booked patient appointments each month and the number of subsequent DNAs each month. This was over a 7 month period from November 2013 - May 2014.   We were also interested in the practice perceptions of not only the effect DNAs had on their own surgeries, but the reasons why they believe patients fail to attend and how they believe this can be improved, along with the surgeries current appointment systems and any plans to change these systems. This survey closed on 11th July 2014.

You can find a list of participating surgeries at Appendix 2 and a copy of the GP survey at Appendix 3.

Part 2 – Patient Response

The patient participation involved completing a short survey including demographics, availability to book a GP appointment and if they had failed to attend an appointment, the reasons why. We were also interested in how long patients had to wait for an appointment.

This survey closed on 26th August 2014 and was distributed via online links from our website, social media and through our distribution networks. A printed version was also distributed via the engagement team for those who may not have access to the website. Using different routes to access the survey provided an opportunity for people unable to complete electronically to be involved.

A copy of the patient survey and list of which practices patients are registered with can be found at Appendices 4 and 5.
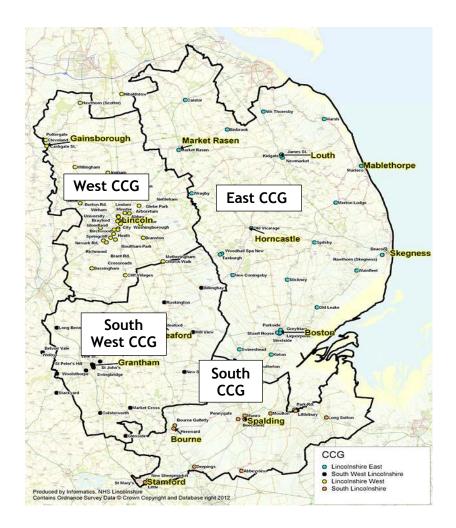
Results

Part 1 – GP Surgery Response
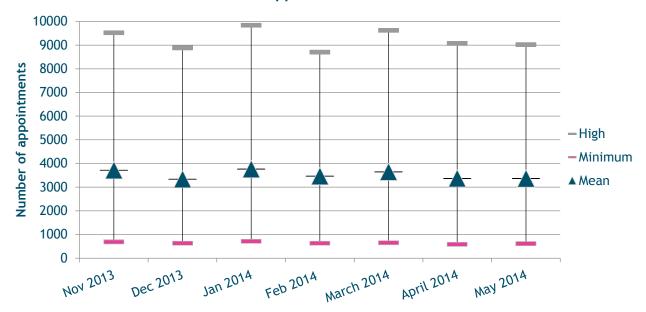
The survey was completed between 11th June and 11th July 2014.   Thirty eight GP surgeries (37.6% of total GP surgeries in Lincolnshire) took part in the study (see Appendix 2 for a list of participating surgeries).

Of the 38 replies, 12 surgeries were situated in Lincolnshire East CCG of the county, 7 in Lincolnshire South CCG, 8 in Lincolnshire South West CCG and 11 in Lincolnshire West CCG of the county.

From the above we consider the data in this report has been gathered from reasonable geographical spread (including urban and rural).   In addition, from the responses we received we have included data from very small to very large GP practices ensuring we are reflecting a good range of practices.

The average registered patient numbers of the responding GP surgeries was 7,792, the largest of which was 19,869 and the smallest 1,735. The graph below provides an average monthly breakdown of monthly appointments.
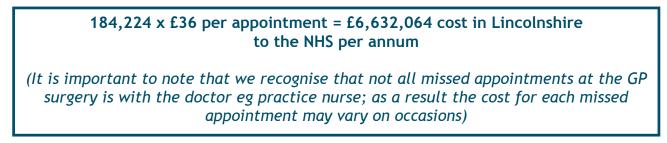
Number of Appointments Per Month

Figure 1: *Graph depicting the mean (average) number of appointments, including the highest and lowest values out of the 38 GP surgeries.*

The mean (average) number of appointments across the 7 months was 3,527 appointments per month. The standard deviation = 2,198.98. The standard deviation measures the amount of variation from the average, therefore, this large standard deviation indicates that there is a large variation in the number of appointments due to the differences in sizes of GP practices. The highest number of appointments in a month was 9,838 and the lowest was 577.

Recorded Number of DNAs

Number of DNAs per Month

Figure 2: *Graph depicting the mean (average) number of DNAs, including the highest and lowest values out of the 38 GP surgeries.*

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The mean (average) number of people who did not attend across the 7 months was 152 per month. The standard deviation = 84.09, therefore, a large variation of DNAs due to the differences in sizes of GP practices. The highest average number of DNAs across all the responded surgeries was found in November (174) and the lowest in May (144). The highest number of DNAs in a single month at a single GP surgery was 454 (Nov) and the lowest was 28 (March and April).

From this data we can calculate a countywide picture of how many DNAs are occurring annually in Lincolnshire:

Average per surgery per month = 152 x 101 surgeries x 12 months
= 184,224 missed appointments

And from the above information we were able to calculate the cost of DNAs at GP Surgeries in Lincolnshire:

184,224 x £36 per appointment = £6,632,064 cost in Lincolnshire to the NHS per annum

(It is important to note that we recognise that not all missed appointments at the GP surgery is with the doctor eg practice nurse; as a result the cost for each missed appointment may vary on occasions)

Due to the variation in surgery size as highlighted, it was deemed fit to create a DNA rate (%) directly relating to the number of appointments and the size of the surgery.
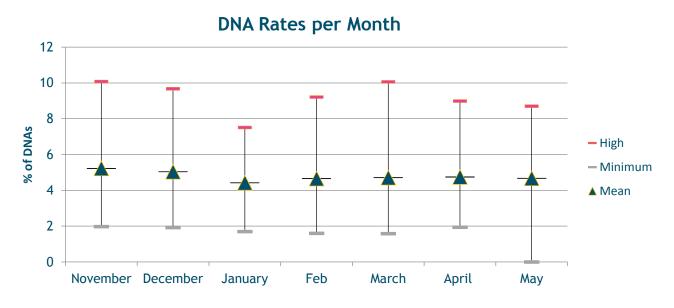

Figure 3: Graph depicting the mean (average) Did Not Attend rates, including the highest and lowest values out of the 38 GP surgeries.

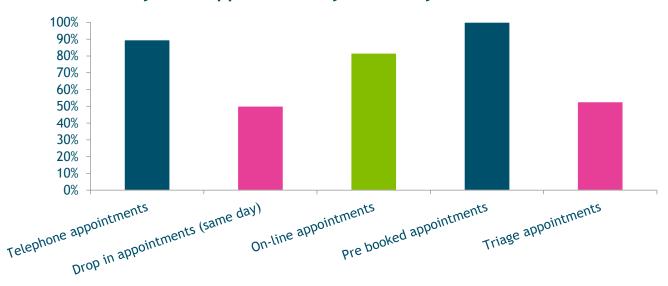The mean (average) rate of DNAs across the 7 months was 4.79%. The standard deviation = 2.07.

Below is a breakdown of DNA appointments, relating to GP surgeries based in each of the 4 Lincolnshire Clinical Commissioning Groups:

CCG Area	Average number of Appointments per month	Average DNAs	Average DNA Rate
East	3315	159.94	5.23%
South	5386	198.51	4.34%
South West	3180	115.13	3.72%
West	2965	140.53	5.12%

Other Data Gathered

Appointment Systems Available to Patients

GP practice managers were asked what appointment system they have at their surgery. We can look at the responses alongside each other to compare and contrast patterns. The responses are shown below:

Currently what appointment systems do you have available?

According to the responses pre-booked appointments are offered by all of the surgeries, whereas only 50% of responded surgeries offer same day/drop in appointments.

The GP surgeries were asked if they had any plans to change their appointment booking systems 76.3% said no, 21.1% said yes.

On-line appointments – these can be open to abuse. We received examples of how this is occurring eg multiple appointments booked and only one attended.

Given the NHS England patient online initiative requires all GP surgeries in England to offer online appointment booking by March 2015, this result suggests that as 80% of responding GP surgeries have online appointments, Lincolnshire is close to meeting this target.

GP practice managers were asked what if they had additional services available (see graph below)?   Many patients suggested to us that more practices should offer text or email reminders similar to the hospitals. However, we can see below that a number of practices are already doing this.

Do you have any of these services in place?

We have trialled SMS & email reminders but these had no impact on the number of missed appointment

Question - How does DNA affect your surgery?

This section of the survey was particularly significant as it is the GP practices that demonstrated what impact DNAs are having on their surgery. From the responses we can state that 71% directly affect appointment availability for patients and 29% related to them impacting on effective use of clinical time. Below is a summary of comments we received:

- *'They waste surgery time and prevent patients obtaining appointments'.*

- *'Detrimental on the nursing staff, but not so much on the doctors due to our appointment system, the GPs experience absolutely minimal DNAs'.*

- *'Although our DNA rate is low in comparison to some organisations it is still a colossal waste of clinical time, money and effort. In some cases patients book and DNA on the same day. There is also a cost to the remainder of our patients who have to wait for appointments'.*

- *'They put pressure on appointment availability, for each DNA we could have booked someone else in. Often people that DNA also book a further appointment meaning they take up twice the amount of appointments. This also impacts on patient care/health as routine monitoring of patients is missed'.*

- *'They are disruptive and waste precious appointment time which could have been used to offer appointments to other patients'.*

- *'Hits the nursing slots quite hard as often more difficult to get in for those appointments. We have had on occasion where a nurse had several slots where all DNA in one morning clinic. Despite posters, patients seem unconcerned about the amount of DNAs'.*

Question - Do you have any information as to the reasons your surgery is experiencing this number of DNAs?

Summary of comments:

- *'Lots of substance misuse patients who DNA more frequently. Deprived area'.*

- *'No it appears to be random. Patients even DNA in the afternoon when they booked in the morning'.*

- *'I think patients who pre-book their appointments 2 weeks in advance just tend to forget'.*

- *'The weather is often a contributing factor and change of mood'.*
- *'We try to contact patients where possible to discuss/remind them to cancel. The main reason given is that they forgot, despite the use of reminders.*

- *'Our patient group is predominantly elderly people, many of whom suffer dementia/many of the missed appointments are those by patients suffering early stages of dementia'.*

- *'Can be difficult at 'peak times' to speak to a member of staff to cancel'.*

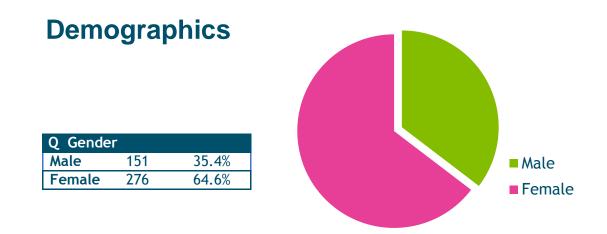*'We have seen that some of the foreign patients DNA frequently and wonder if they understand enough'.*

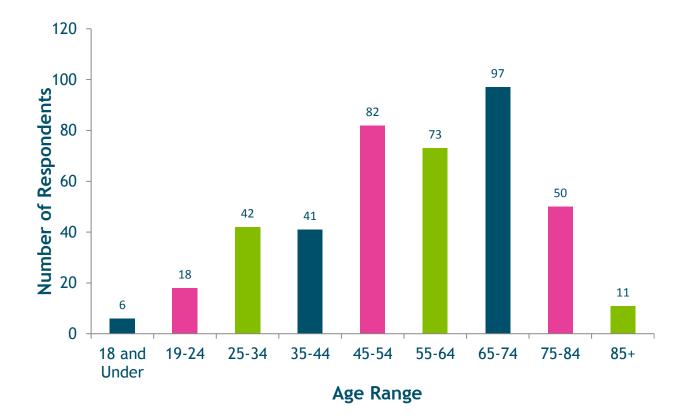## Question – Do you have ideas on how DNAs can be reduced?

Summary of Comments:

- *'Telephone reminders to patients who have pre-booked the day before'.*

- *'Adding a footnote to every letter. Script messages. A small charge'.*

- *'Either charge or remove persistent offenders'.*

- *'We do send DNA letters out; final letter is warning could be struck off patient list. (Warning of a DNA fee like dentists would make people turn up or cancel)'.*

- *'Let patients book on day instead of too many pre-booked appointments - patients forget or get better'.*

- *'Put in place text message reminders'.*

- **'If patients could understand the true cost of a DNA I believe they would not be so wasteful. Repeat offenders would be targeted to specifically reduce their DNA rates. Some DNAs are unavoidable perhaps due to a severe deterioration etc. but in most cases people 'just forget''.**

- *'Will be looking at a dedicated appointment cancellation service and also improved use of online booking and cancellation'.*

- *'We introduced open surgery so we have reduced our DNAs and for appointments over 30 minutes the patient is rung on the morning to remind them'.*

- *'Several people have suggested that if patients were charged for missed appointments this may help reduce the figures. Better awareness of how difficult GP practice life currently is and the strain on resources/clinical times when patients DNA and then they subsequently demand an urgent appointment would be good. Patients have become much more demanding in this way over the past 18 months.*
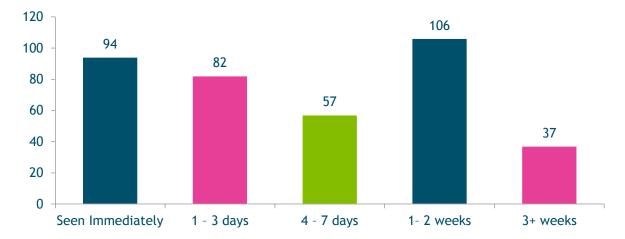
Part 2 – Patient Response

The surveys were completed between the 7th July and the 26th of August 2014, with 428 patient's responses received. Responses were through means of an opportunistic sample and recruited via the use of an online questionnaire (Via Survey Monkey) as well as Healthwatch Lincolnshire engagement staff distributing paper based questionnaires at engagement events and leaving questionnaires in several GP practices. Demographics of the respondents can be found below.
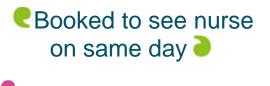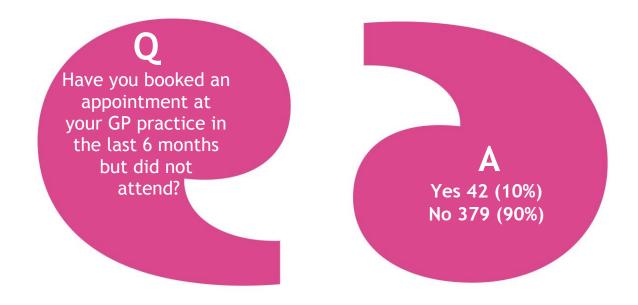
Demographics

Q Gender		
Male	151	35.4%
Female	276	64.6%

Male
Female

Q

Have you booked an appointment at your GP practice in the last 6 months?

A

Yes 381 (90.1%)
No 42 (9.9%)

How far in advance did you have to wait for an appointment?

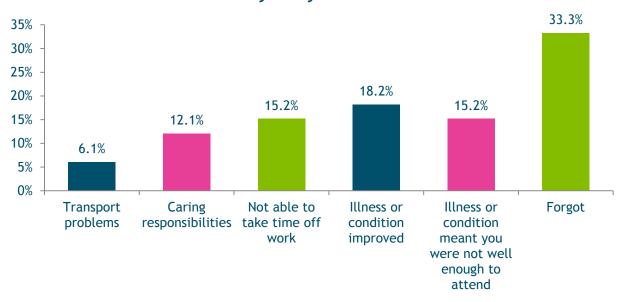| Category	Value
Seen Immediately	94
1 – 3 days	82
4 – 7 days	57
1– 2 weeks	106
3+ weeks	37

Often 'on the day' appointments not available and they don't allow booking in advance. Have often rang within 5 minutes of them opening to be told that they are fully booked and I'll have to try back tomorrow. Often this happens several days in a row

Booked to see nurse on same day

Problems booking advance appointments - need to phone on the day and then you can't get through as the line is busy

Rang practice on consecutive working days between 8 - 9 am only to be told on each occasion that fully booked and to ring back tomorrow.

Q

Have you booked an appointment at your GP practice in the last 6 months but did not attend?

A

Yes 42 (10%)
No 379 (90%)

Why did you not attend?

Reason	Percentage
Transport problems	6.1%
Caring responsibilities	12.1%
Not able to take time off work	15.2%
Illness or condition improved	18.2%
Illness or condition meant you were not well enough to attend	15.2%
Forgot	33.3%

The question to patients 'why did you not attend' is significant to our findings. We recognise there are many factors many of which are outside of a person's control. However, if the issue of DNA is to be reviewed and dealt with, to have information as to the reasons 'why' is important. Of the patients who said they had not attend their appointment, the biggest reason was they forgot followed by health reasons. Other factors not stated above but included by patients was receptionist error, cancelled by practice, and other commitments

Why individuals did not attend their appointments

Comments Summary

- *'Phoned surgery to say couldn't make it'.*

- *'Got called into work'.*

- *'Turned up on wrong day'.*

- *'I was late but still got seen'.*

- *'Attended RTA outside my house'.*

- *'Have memory problems'.*

- *'Changed date and then attended'.*

> **I use the online booking system [at my surgery] and am able to self-select and book and subsequently cancel appointments easily. A great help.**

- *Because receptionist twice now has different date in her book to one she gave me on card. When asked why. All I got was we left a message on your answerphone....I explained they couldn't have as I don't have one'.*

- *'Booked it online for 10 days time as it was only thing available. Called in the following day and got one earlier. Cancelled the initial one with the Receptionist but she did not action that as 10 days later a got a text to tell me I had missed an appointment'.*

- *'Put the wrong day in my diary. One day late'*

> **I couldn't get through on the phone. My phone recorded 65 calls and by the time I got through it was past my appointment time.**

- *'Cancelled by practice as a storm rendered them unable to see patients'.*

- *'Did not check my diary in advance, very unusual, a reminder through email or text would help!'*

- *'Two DNAs; one because my phone reminder was accidentally deleted and a second when, although I actually attended, I had forgotten to bring the phlebotomist prescription so had to re-arrange another bloods appointment.'*

- *'Due to my little girl being poorly it slipped my mind but I rang straight way and they booked me in the next day'.*

Conclusions and Recommendations

Conclusion

From this research work we can clearly identify a real problem in Lincolnshire with patients not attending booked appointments at their GP Surgery. Why patients are failing to attend is very important. Are we experiencing a growing culture that 'it's free so it doesn't matter'? Do people's lifestyles mean they are just too busy to commit? In some cases there are clear barriers that lead to non-attendance such as transportation or caring responsibilities. Whatever the reason, the concern is not just the cost to our health service or the fact that patients are experiencing problems getting an appointment with their GP. The most important factor must be that patient safety is at risk if they cannot get an appointment when things are going wrong with their health.

As we have stated in the executive summary, we recognise that DNA only forms one part of patient access issues. The number of GPs retiring and current lack of replacement trained medical staff available is a national issue. Better lifestyles and access to services has resulted in more people living longer, many with long term health conditions leading to increase demand on services. There seems to be a growing culture of 'worried well' presenting more often to GPs using up weekly appointments. Technology has also opened up opportunities to book online appointments which is open to abuse (some examples were highlighted to us that patients were booking multiple appointments and would select only the most convenient to them).

How can attendance be improved? Electronic message appointment reminders in health care settings substantially increase the likelihood of attending clinic appointments. SMS reminders appear to be a simple and efficient option for health services to use to improve service delivery, as well as resulting in health benefits for the patients who receive the reminders [14]. However research suggests that the effectiveness of a reminder system is dependent on the patient population, the nature of the reminder and the service type [15]. Although specific targeting of patients who have failed to attend in the past may prove cost effective, the long term effectiveness of such reminders is doubtful. However, since most of these measures require a degree of patient motivation they are unlikely to have much impact where much of non-attendance seems to reflect apathy. Furthermore, these interventions require additional secretarial and clerical support with resource implications.

It has been suggested that "better education of patients about their medical condition, the nature and purpose of specific options available to them and the costs and benefits associated with such options", is clearly indicated. To be maximally effective, such education should come from a variety of sources including the mass media, pamphlets distributed to pharmacies and medical clinics of all types and, most importantly, open and detailed communication between patients and physicians. These approaches in combination with more traditional methods such as telephone and mailed appointment reminders, may help to replace lengthy waiting lists and wasted physician time with more efficient and far reaching health care services" [13].

Recommendations

- On 1st December 2014 Healthwatch Lincolnshire will present the findings of this research to the NHS England Area Team; Lincolnshire East, South, South West and West Clinical Commissioning Groups; GP Surgeries (GPs and Practice Managers); Public Health; Lincolnshire Health and Wellbeing Board, Lincolnshire Health Scrutiny Committee to enable them to consider the overall impact of DNAs in Lincolnshire. Following this report we would look to the relevant organisations from the above group to consider a range of possible actions required to help improve the situation.

- We would recommend that one such action should be a campaign to provide better education to patients of the impact of missing appointments. Offending patients need to understand that they should be held accountable when they DNA.

- Patient use of electronic appointment systems may need to be considered, both from a perspective of access, but also where on-line appointment systems are being abused.

- Patients with a genuine reason for DNA eg carers should be supported if they are experiencing difficulties attending their GP appointment. Reassurances by GP practices that support mechanisms are available and in place for patients with personal barriers must be given.

- Further work is required to consider the barriers patients face when wishing to cancel their GP appointment. What is working well for some practices with limited DNAs could be mirrored by others.

- Healthwatch Lincolnshire will work with a range of local media sources to present the key findings of this report, but it must be the wider health economy who support the overall media messages.

- Following this research work, Healthwatch Lincolnshire would welcome commission opportunities to undertake further research looking more in-depth at why patients are failing to attend appointments.

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Part 1 - List of Participating GP Surgeries

GP Practice	CCG Area
Hawthorn Medical Practice	East
Holbeach Medical Centre	East
James Street Family Practice	East
Kirton medical centre	East
Marisco Medical Practice	East
Merton Lodge Surgery, Alford	East
Stickney Surgery	East
Swineshead Medical Group	East
The New Coningsby Surgery	East
The Wolds Practice	East
Wainfleet Surgery	East
Westside Surgery Boston	East
Galletly Medical Practice	South
Littlebury Medical Centre	South
Munro Medical Centre	South
Pennygate Health Centre	South
St Mary's Medical Centre	South
Sutton Medical Group	South
The Sheepmarket Surgery	South
Belvoir Vale Surgery	South West
Billinghay medical practice	South West
Harrowby Lane Surgery	South West
Long Bennington Medical Centre	South West
Sleaford Medical Group	South West
Swingbridge Surgery	South West
The New Springwells Practice	South West
The Stackyard Surgery	South West
Abbey Medical Practice	West
Arboretum Surgery	West
Bassingham surgery	West
Birchwood Medical Practice	West
Boultham Park Medical Practice	West
Ingham Practice	West
Newark Road Surgery	West
Richmond Medical Centre	West
The Brant Road Surgery	West
Washingborough Surgery	West
Woodland Medical Practice	West

Copy of GP Survey

Healthwatch Lincolnshire is conducting an independent survey about the impact of Do Not Attends (DNA) on individual GP surgeries across Lincolnshire. The information we receive will be collated into a report and used to highlight the impact on patients access to GP and clinic appointments across Lincolnshire. The survey will close on 11th July 2014 and your input will be invaluable in helping to address what actions might need to be taken (globally) to reduce DNA and increase patient appointments.

1. **Name of Surgery**

2. **Please state the number of patients registered at your surgery**

3. **Please state the number of appointments for each month**

   November 2013

   December 2013

   January 2014

   February 2014

   March 2014

   April 2014

   May 2014

4. **Please state the number of DNA's (Did Not Attend) for each month**

   November 2013

   December 2013

   January 2014

   February 2014

   March 2014

   April 2014

   May 2014

5. **How do DNA's affect your surgery?**

6. **Currently what appointment systems do you have available?**

   ☐ **Telephone appointments**

   ☐ **Drop in appointments (same day)**

   ☐ **On-line appointments**

   ☐ **Automated appointments**

   ☐ **Pre booked appointments**

   ☐ **Triage appointments**

   Other (please specify)

7. **Do you have any of these in place?**

	Yes	No	Future Intention
Text Message Appointment Reminders	❑	❑	❑
Email Appointment Reminders	❑	❑	❑
Pharmacy	❑	❑	❑
Appointment Cancellation Line	❑	❑	❑

Other (Please specify)

8. **Do you have any plans to change your booking system?**

9. **Do you have any information as to the reasons your surgery is experiencing this number of DNAs?**

10. **Do you have ideas on how DNA's can be reduced?**

Thank you for completing this questionnaire for more information contact dean.odell@healthwatchlincolnshire.co.uk

Healthwatch Lincolnshire is an independent local organisation giving everyone a chance to "speak up" about their local health and social care services. Tell us about your health and social care service:

<div align="center">

You SPEAK

We LISTEN

We ACT

Together change happens

</div>

Please visit our website http://www.healthwatchlincolnshire.co.uk/
Follow us on Twitter@healthwatchlincs
Facebook: https://www.facebook.com/healthwatchlincolnshire

Part 2 - Number of Patients Responding by Surgery

GP Surgery	No of respondents	GP Surgery	No of respondents
Beechfield	60	James Street, Louth	2
Wragby Surgery	55	Long Sutton Medical	2
Hawthorn, Skegness	15	Marisco Medical Practice	2
Market Cross	14	Mill View Medical Centre	2
Harrowby, Grantham	11	Moulton Medical Centre	2
Billinghay	10	Portland Street	2
Beacon Medical Practice	9	Stickney Surgery	2
Munro Medical Centre	8	Sutterton Surgery	2
Alford Group Practice	7	Swineshead Medical	2
Branston and Heighington	7	Swingbridge Surgery	2
Sleaford Medical	7	Trent Valley Surgery	2
St Mary's Medical Centre	7	Woods and Goldstein	2
Merton Lodge	6	Burton Road, Lincoln	1
Minister Medical Practice	6	Ancaster Group Practice	1
Corby Glen	5	Bardney Surgery	1
Greyfrairs	5	Beechfield	1
St John Medical Centre	5	Holton le Clay	1
Brayford Medical	4	Bracebridge Heath	1
Long Bennington	6	Brant Road	1
Liqourpond Surgery	4	Bull Yard, Spilsby	1
Old Leake	4	Cambridge Avenue Medical	1
Ruskington Medical	4	Cliff House, Lincoln	1
Birchwood	3	Cliff Village, Navenby	1
Boultham	3	Coningsby New Surgery	1
Cleveland Surgery	3	Crowland Medical Practice	1
Glebe Park	3	Glenside	1
Hereward Practice	3	Gosberton	1
Market Rasen	3	Hawthorne	1
Newark Road Surgery	3	Ingham Practice	1
Newmarket, Louth	3	Kirton Medical Centre	1
Parkside Medical	3	Lindum Medical Practice	1
Pennygate Health Centre	3	Little Surgery St Mary's	1
Richmond Medical	3	Marsh Medical	1
Stuart House	3	Richmond, Lincoln	1
The Little Surgery	3	New Coningsby Surgery	1
Welton Health Centre	3	New Springwell Surgery	1
Willingham by Stow	3	Sheepmarket, Stamford	1
Woodhall Spa New Surgery	3	Spilsby	1
Woodland Medical	3	St Peters Hill, Grantham	1
Caistor Health Centre	2	Stackyard	1
City Medical Practice	2	Vine Street Surgery	1
Holbeach Medical	2	Westside Surgery, Boston	1
Horncastle Medical Group	2	Witham Practice	1
Nettleham Medical	2		
New Surgery Woodhall Spa	2		

Part 2 - Patient Survey

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Part 2 - GP Appointments DNAs (Did Not Attends)
Patient Survey - End Date 8th August 2014
Healthwatch Lincolnshire is currently looking at the significant impact to patients on availability to book an appointment with your GP (or any services offered by your GP Practice such as with the Practice Nurse). We are also aware that for many GP surgeries the number of people not attending pre-booked appointments is impacting on this problem. To support this work we also need to hear the experiences from patients and would be grateful if you could complete the following short survey. Your answers will be kept anonymous.

Q1 Are you…   Male ☐ Female ☐   **Q2** How old are you? _____

Q3 Name of your GP Practice _____

Q4 In the last 6 months have you tried to book an appointment at your GP Practice?

Yes ☐ No ☐

Q5 How far in advance did you have to wait for an appointment?

Seen immediately ☐   1– 2 weeks ☐
1 – 3 days ☐   3+ weeks ☐
4 – 7 days ☐   Other please state _____

Q6 In the last 6 months have you booked an appointment at your GP Practice but did not attend the appointment?

Yes ☐   No ☐

If yes, please tick why you did not attend:

Transport problems ☐
Caring responsibilities ☐
Not able to take time off work ☐
Illness or condition improved ☐
Illness or condition meant you were not well enough to attend ☐
Forgot ☐
Other (please state) _____

Q7 If you tried to cancel the appointment but couldn't, why was this eg appointment line was busy? (please state)

Thank you for completing this information, the information you have provided has been very important in helping to influence improvements to GP services in the future.

Distribution of this Report:

Healthwatch Lincolnshire will be presenting this report on the 1st December 2014 to a number of health and care organisations in Lincolnshire. Following this date the report will be available to download from the Healthwatch Lincolnshire website, copies can also be available by request.

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