

# Access to GP Services for Children and Young People in West Essex



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## 1.0 Introduction

### 1.1 Healthwatch Essex

Healthwatch Essex is an independent charity which gathers and represents views about health and social care services in Essex. Our aim is to influence decision makers so that services are fit for purpose, effective and accessible, ultimately improving service user experience.

One of the functions of a local Healthwatch under the Health and Social Care Act 2012, is the provision of an advice and information service to the public about accessing, understanding, and navigating health and social care services and their choices in relation to aspects of those services.

The Healthwatch Essex Information and Guidance team are dedicated to capturing the health and social care experiences people in Essex are encountering daily. The team respond to enquiries relating to health and social care and are equipped through training, to offer specific information to the public or other professionals. The team are well placed to listen, reflect on and support people to share difficult experiences such as the one's shared in this report.

### 1.2 Topic Background

Accessing GP Services is a widely publicised and crucial issue throughout the country. The IPSOS GP Patient Survey 2022 looked at the overall experience of making an appointment (for all age groups).

Nationally, 56% rated the experience as good vs 26% rating it bad.

For HWE ICS, the figures were 54% good vs 27% bad.

Looking specifically at ease of getting access to GPs via phone (85% of people trying to make an appointment try by phone), 53% of people nationally said it was easy (down from 68% in 2021).

For HWE ICS the figure is 48% for 2022 - 5% below the national average.

However, children and young people are a core demographic not specifically picked out and reported on in this data.

What data there is, is statistically sound, but doesn't include service users experience, their feelings or the impact.

Improving the health of Children and young people is one of the core principles of the HWE ICB's constitution.

### **1.3 Acknowledgements**

Healthwatch Essex would like to thank the members of the public who participated in this project through completing the survey. Our thanks are also made to those individuals who took the time to speak with us and share their personal stories. We would also like to thank our partners, contacts, and networks who helped publicise the survey.

### **1.4 Disclaimer**

Please note that this report relates to findings and observations carried out on specific dates and times, representing the views of those who contributed anonymously during the engagement period. This report summarises themes from the responses collected and puts forward recommendations based on the experiences shared with Healthwatch Essex during this time.

## 2.0 Purpose

Part of the HWE ICB Constitution states that the members of the Board will work to ensure that the Board's resources and powers tackle complex challenges, including:

- improving the health of children and young people
- acting sooner to help those with preventable health conditions

'Children and young people' has been identified as an important demographic within our community - one that needs special consideration and policies.

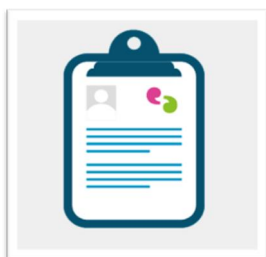
As such, this report aims to capture the thoughts, emotions and lived experience of those people trying to access GP services within West Essex for themselves or on behalf of a friend or loved one. From this, we aim to provide key learnings and recommendations in order to help develop policies and processes to match the needs of the local population.

The health of children and young people can be an emotive topic for parents, their wider family, teachers, carers, friends, and many more. It is important that we assess the impact that any problems or delays have physically and emotionally, not just for the patient, but for family and friendship groups as well.

Listening to the lived experiences of those directly affected can help us shape how we manage the processes and platforms available to this specific group. Dovetailing this in with the practical and logistical steps being implemented to make full use of GP Services, including nursing, physiotherapy, practitioners and more, combined with phone and online systems, reception and admin staff and efficient triage, can all improve this vitally important dimension of NHS healthcare.

### 2.1 Engagement methods

Participants were contacted through the Healthwatch Essex website and newsletters, partners, other organisations in West Essex, relevant online communities and through word of mouth. They were engaged in two ways:



### **Survey**

A survey was created to gain perspective and insight from residents who have had experience of accessing GP services for children and young people.



### **Interviews**

Individual interviews were conducted to collect personal stories from members of the public. Interviews took place by telephone during September and October 2022 and all participants gave their consent to have their interviews recorded. Participants were willing for their experiences to be shared within this report, however, to ensure their anonymity and confidentiality of information they provided, all names used are pseudonyms to protect identities.

## **2.2 The Survey**

The survey consisted of 11 core questions combined with 5 additional ‘free text’ information boxes enabling the participants to expand on their answers to preceding questions.

It was devised to encompass:

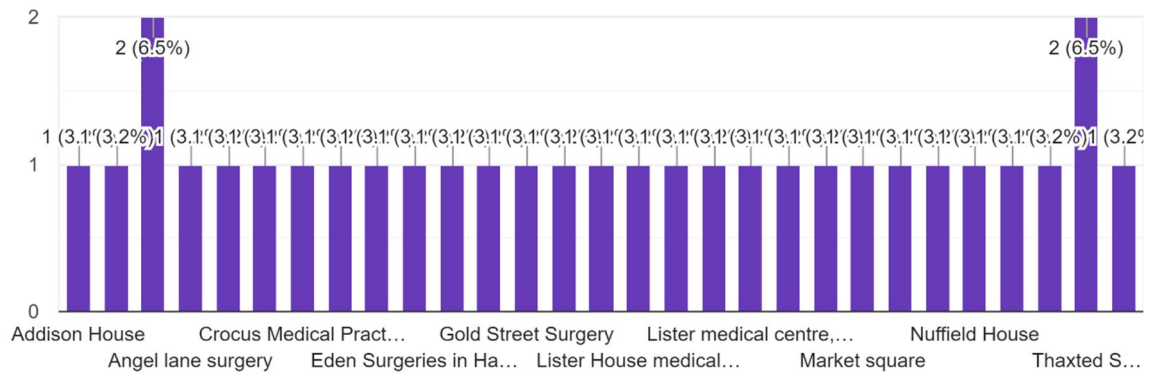
- Effectiveness of the appointment booking process
- Type of appointment
- Quality of appointment
- Speed and quality of follow-up

The survey was primarily in an online format but was also available to be printed off and filled out manually as required. The Information and Guidance Team at Healthwatch Essex were also available if the survey needed to be completed in any other format, such as over the telephone. The questions, and responses received, were as follows:

In our first question, we asked about the specific practice the respondents were trying to access:

1. Which GP practice have you accessed / attempted to access?

31 responses



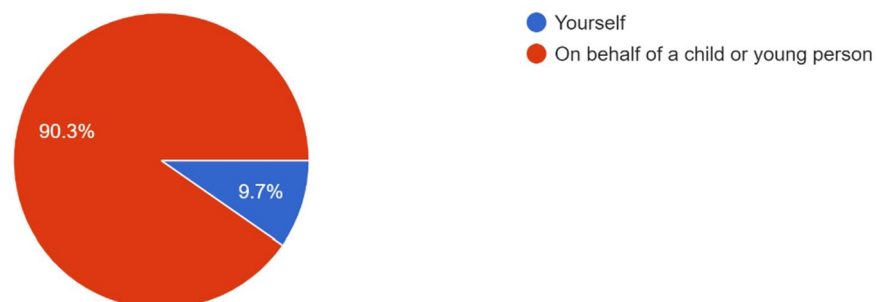
The surgeries listed were:

Addison House, Angel Lane, Beechwood, Castle Gardens, Crocus Medical Practice, Eden Surgeries, Fern House, Gold Street, Hamilton Practice, Lister House, Loughton Surgery, Market Square, Melbourne House, Noak Bridge, Nuffield House, PAH Clinic, Prince Avenue, Thaxted Surgery.

The second question asked whether they were making an appointment for themselves, or on behalf of someone else:

2. Was this contact made for;

31 responses

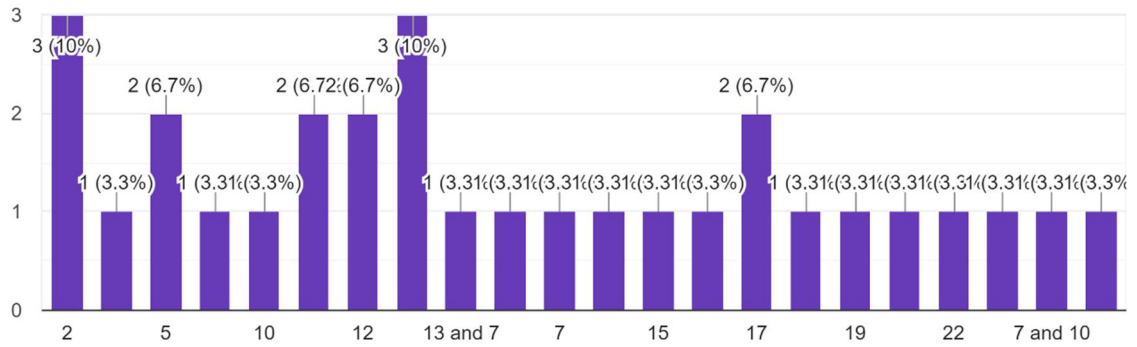


The vast majority of respondents were attempting to access the GP on behalf of a child.

Question 3 asked about the age of the service user:

3. Please tell us the age of the child or young person the contact was being made for.

30 responses



Ages ranged from 2 to 22, with a number of people trying to make appointments for more than one person.

Question 4 was in relation to how the appointment making process went overall:

4. How you would describe the appointment making process? Please select the most appropriate answer.

31 responses



39% of respondents said the process was good or excellent, while 61% reported it poor or extremely poor.

Question 5. Following on from Q4, they were asked to expand on why they answered as they did. These were the comments:



*We had an in-person consultation on the day that I called and was given a prescription for the issue'*

*'Always difficult to get through on phone but manage eventually. Not enough appointments'*

*'Took a while to get through, but I know they are very busy.'*

*'Although I got an appointment, I had to call around 50 times to get through!'*

*'The phone system in the morning was not working on 2 consecutive days. In the end I had to make a private GP appointment'*

*'Every time I try to call Lister Medical Centre, I cannot ever get an appointment I am always told to take an out of hours with a different service.'*

*'There are very low chances of getting an appointment, it's extremely difficult to get through to the reception and by the time you are connected there are no appointments left.'*

*'Thaxted is an exemplary surgery. We are always able to get same day appointments for both children and adults. They continued with face-to-face appointments throughout the pandemic also.'*

*'Unable to get face to face appointments. Can wait for up to an hour on the phone to get through, sometimes the queue is full so you can't wait for a receptionist, and it automatically hangs up'*

*'The system is now an online system, and you can't speak to anyone.'*

*'Took ages to get through on the phone and when I did, I wasn't able to make an appointment'*

*'I couldn't get through over the phone. Had to visit in person to make an appointment'*

*'Do ANY GP's work here anymore?'*

*'I have seen my GP around 4 times since I joined 9 years ago. I don't believe my children have seen their family GP at all. I am always given an alternative doctor and usually that is at a push.'*

*'They are crap.'*

*'I can never get through to doctors and when I do you are asked to see a nurse before seeing a doctor and it's just a battle.'*

*'I was on hold for an hour before I spoke to a human.'*

*'Always hard to get phone answered and find a Dr who knows our situation.'*

*'They have open access surgery every weekday from 8-10am you just turn up and can be seen by a doctor or advanced nurse.'*

*'I got an appointment.'*

*'Wait times are long but I generally always manage to get an appointment.'*

*'I got a telephone call.'*

*'It takes a long time to get through, then once you do all appointments are gone. Sometimes they fit you in with a zoom call with paramedic not GP.'*

*'I was advised by a GP from a different area my child needed to be seen in person. My GP practiced refused.'*

*'I was able to get through on my second attempt calling at 8:00am but then was on hold for nearly 40 minutes. I got offered an appointment that morning.'*

*'I got through but not offered face to face but did call back quickly.'*

*'It's a nurse you get to see not a doctor.'*

*'Impossible to get an appointment that is urgent but not life or death!'*

*'It is sometimes difficult to get through on the phone at 8am if an emergency appointment is required the same day. However, with persistence I have managed to get through and get an appointment on all but 1 occasion. In this case an out of hours GP appointment was arranged for the following day. The reception staff are always very helpful, and we have been very happy with the care we have received from Thaxted Surgery.'*

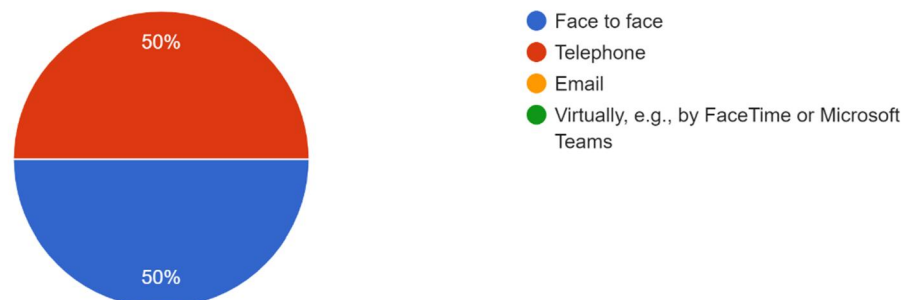
*'Phone three days at the specified time 8 and 2 couldn't get a "call back" appointment.'*

While there are examples here of both good and bad practice, the predominant negative issue is the double whammy of struggling to get through on the phone, and even when you do, appointments still being very difficult to come by.

The next question asked about the format of the appointment:

6. How was the consultation carried out?

30 responses

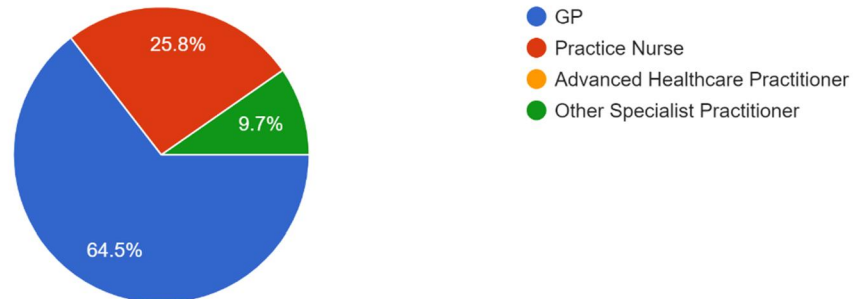


There was an even split between phone and face-to-face and no incidences of virtual appointments.

Question 7 asked who carried out the consultation:

7. Which professional carried out the consultation?

31 responses

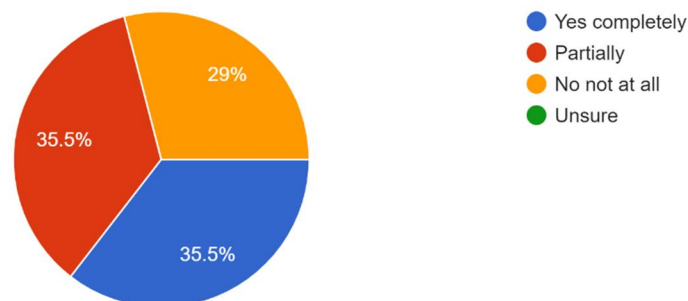


The majority of appointments were held with the GP, but a quarter of them were with a practice nurse.

Question 8 was about being listened to:

8. Do you feel that you were listened to by the healthcare practitioner?

31 responses



There was a relatively even split here, 35.5% said they were completely listened to, against 29% who said they felt they weren't listened to at all.

Question 9 asked them to elaborate:

*'It was fine although a locum not my regular GP.'*

*'GP was led by my research & listened to me, asked questions to confirm understanding & plan implemented.'*

*'Took time to listen to me and my son.'*

*'I couldn't get an appointment for my daughter.'*

*'I have a chronic condition, I know when my condition is flaring, I asked for certain blood tests and stool samples to be completed and was totally ignored and was given incorrect blood tests and stool sample.'*

*'GPs are rushing, and I feel like they don't take a real interest in patients' problems.'*

*'I wasn't able to speak to anyone it was all done by text. I was only allowed to reply to one message and that was all.'*

*'I wasn't given the pill I asked for.'*

*'Had to make another appointment to speak to a DOCTOR.'*

*'I usually only phone if desperate but I am often felt like I should have just handled my issues with self-care.'*

*'Fobbed off unsure how they can diagnosis over phone.'*

*'It's always different doctors you have to tell the story all over again my daughter is very unwell and has been for 5 months.'*

*'I felt that my concerns were dismissed as me being a panicky paren.t'*

*'We had mental health crisis. GP who ran said nothing to do with them. It's up to child mental health team. Ring them.'*

*'Listened, examined and offered my options.'*

*'Felt a little rushed.'*

*'Took the time to listen and carried out a full assessment.'*

*'My son ended up in A&E with tonsillitis after being told it's just a stomach bug.'*

*'Originally seen by GP in another area who explained complex issue. My Essex GP brushed off as nothing.'*

*'GP dealt with current issue - sore throat/ears/headache but was not responsive to questions about the ear pain being ongoing.'*

*'Just told to go to A&E when it could have been looked at by doctor & better to have been seen face to face to look at extent of injury . Didn't ask for photo and didn't necessarily need A&E.'*

*'Referral made but 5 months on no hospital appt.'*

*'I need to speak face to face really as I have more confidence concerns.'*

*'We have needed to see the GP a couple of times over the last few months urgently when my children have been unwell with very high fevers. We have also needed a non-urgent appointment with follow up blood tests for my 5-year-old. On all occasions they have been thoroughly examined and the GP's have been extremely helpful.'*

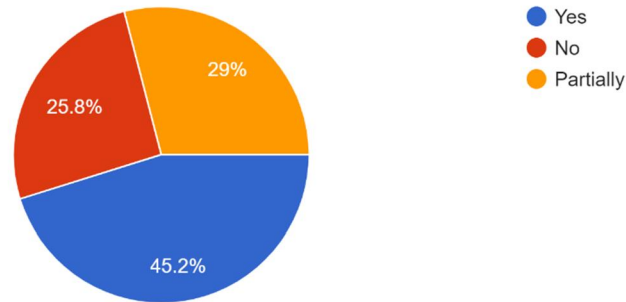
*'Brushed off told it was hormones.'*

The mixture of experiences reflects the pie chart split, but there are some themes of wanting face to face and wanting to be given a little more time and attention.

Question 10 asked if participants felt able to ask the questions they needed to:

10. Do you feel that you were able to ask the questions you needed to?

31 responses

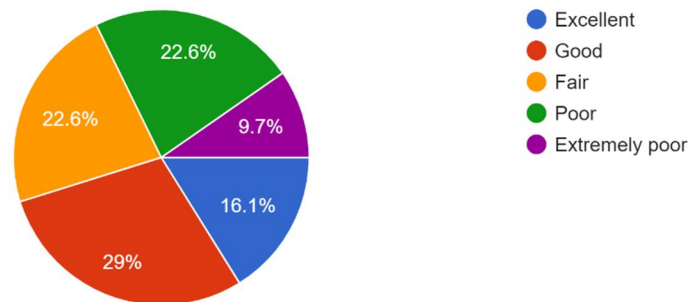


Nearly 75% of respondents felt fully or partially able to ask all the questions they needed to.

For question 11 we asked about the effectiveness of the appointment:

11. How would you describe the effectiveness of the consultation?

31 responses



45% said it was excellent or good, against 32% saying it was poor or extremely poor.

Question 12 asked them to explain their answer to Q11:

*'The GP only spoke to me and my husband - my daughter tried to speak, and she was not really addressed.'*

*'Got seen and got prescription.'*

*'Testing me for the complete wrong problems, have since had to contact my IBD specialist.'*

*'Very often I'm send away without help and then I have to try again to get another appointment. It's frustrating especially that kids are getting really poorly really fast.'*

*'This feels very dismissive, should be able to see someone face to face so nothing is missed.'*

*'I wasn't able to speak to anyone it was a text from a GP. I wasn't able to ask questions and I wasn't able to get the reassurance I needed.'*

*'It was quick and easy.'*

*'No good medication provided, even to alleviate symptoms.'*

*'We needed a doctor not a nurse.'*

*'If I get my own GP he listens. Any others and it is felt like it is swept under the carpet.'*

*'They cannot see my child.'*

*'They were reluctant to take my concerns seriously but asked me to upload a picture of the ailment for monitoring.'*

*'We have had a challenging time. Every team or organisation say it's someone else's responsibility. We have been let down over the years. GPS say they can't do anything, and mental health services can't do anything either. We are often told by GPs they can't help us because our case is complicated.'*

*'Got medication.'*

*'He also went and checked with a colleague that there was nothing else he could for her.'*

*'Ignored.'*



*'We left with a good understanding of current issue and how to treat but not the ongoing issue.'*

*'Telephone so couldn't see the injury and assess properly.'*

*'The nurse is lovely but still within family of 5 not seen a doctor.'*

*'I want to see the doc face to face!'*

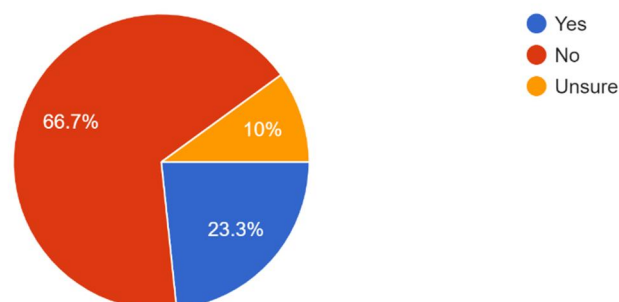
*'I can't fault any of the GPs or Nurses at Thaxted surgery. They are all extremely helpful and reassuring and when we have needed help, they have seen my children quickly and prescribed appropriate medication which has helped them to feel better.'*

*'Wasn't concerned at all.'*

Question 13 looked at follow up care:

13. Did the healthcare practitioner refer you for a further appointment or follow up care with another part of the healthcare service?

30 responses



The majority of respondents were not referred onwards.

Question 14 asks what the referral was for:

*‘CAMHS.’*

*‘To Cambridge hospitals trust - Addenbrookes.’*

*‘To check the pill works.’*

*‘Only when I asked, and I felt like persuading them too. Paediatrician consultant.’*

*‘Urine sample/cultures.’*

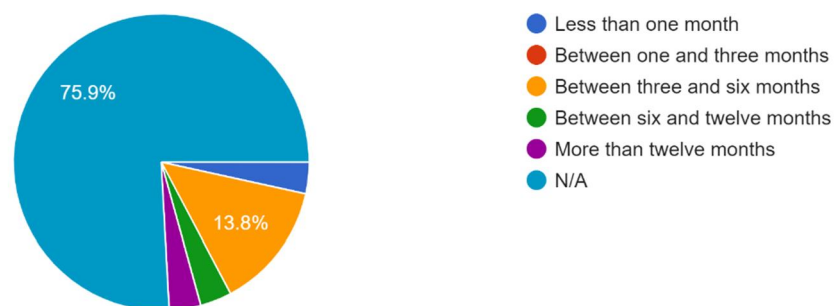
*‘We were offered an ENT referral if there was hearing loss but were also told it would be a long wait and with doubtful outcome.’*

*‘Paediatric Allergy Clinic and Dietician.’*

We then asked about the waiting time for their referral:

15. How long have you now been waiting since that referral was made for a follow up appointment?

29 responses



Although it's not statistically sound, anecdotally 6 of the 7 have waited 3 months or more.

Finally, we enquired about what they would do to improve the service:

*'More GPs, nurses, appointments needed urgently.'*

*'Phone booking system, ability to get through to someone quickly.'*

*'Being able to book appointments far easier. The telephone triage doesn't work in all cases as when you know that you need to see a doctor face to face, waiting for a call back and then having to wait for an appointment just takes too long!'*

*'Crocus Medical practice need to sort out their phonedines.'*

*'Allow easier access to see the GP practice you're actually registered too instead of making appointments with OOHs services all the time.'*

*'Bring back face to face appointments. It's ridiculous to even try to diagnose a child over the phone. Make more appointments available for patients.'*

*'When a refer all is made, it would be good to know the length of wait and have information online regarding this process.'*

*'Open access to GPs.'*

*'Be human and speak to people. Don't use text messages, take the time to speak to the person and listen to what they have to say.'*

*'Just make it easier to book appointments.'*

*'Access to doctor appointments and medication is a huge problem. needs to be resolved asap, even if this means the health service can no longer be kept free.'*

*'Access to a doctor in the first instance!'*

*'More receptionists!!'*

*'Face to face appointment.'*

*'Ease of getting an appointment. Meeting doctor face to face. Seeing same doctor.'*

*'Having a service that is accessible and caring.'*

*'Got an appointment for an out of hours' time. We waited nearly 3 hrs. Not ideal with an ill 5-year-old.'*

*'We need an ENT referral but have been told its a 2 year wait!'*

*'Need more staff to deal with volume if patients. 1 surgery for nearly 20000 people.'*

*'Everything.'*

*'Being told at check in if Dr is running roughly to time or how many appointments behind. Waiting 40 minutes with small children is not easy especially when you don't know how long the wait is likely to be. Easier phone access.'*

*'Yes, an appointment at the hospital or at least acknowledgment it's being made.'*

*'More available appointments for young girls such as menstrual problems that cannot wait but have to wait as not deemed important enough.'*

*'No, we feel extremely lucky to have such excellent care from Thaxted Surgery. I have not had any difficulty getting an appointment for my children.'*

*'Take calls re young adults seriously.'*

## 2.3 Interviews

Many people offered to talk to us directly and tell us about their stories in depth. We would like to thank everyone who took the time to talk to us and share their experiences. Names have been changed to protect identities.

### Case Study 1

'Sam' and her family have been with the same GP surgery for 15 years. She has 2 daughters aged 16 and 18. Her 16-year-old is struggling with severe period pains, and she has also had some low-level mental ill-health, as does her 18-year-old.

"It's very hard for anyone to talk over the phone. But if you've got a teenager that's got something wrong, they really don't want to be talking to a phone to express what the problem is."

"The only way I seem to be able to get an appointment now is if I do it the online. That's not really understanding the urgency of it, or how my daughter's feeling about waiting for an appointment and stuff like that."

"Then my appointment was for three weeks. I thought, well, she's in the middle of having a period now. She's run out of her pills that help, and she's got to wait three weeks. I know things are more urgent, but it's amazing, that was quite urgent."

"It would have taken two seconds just to write repeat prescription out, and I don't know why she had to wait three weeks, because these are quite common issues that the girls have."

"Adults we can handle waiting, but teenagers, it makes things worse for them. Their minds can't control their anxieties and stuff like that."

"Because my girls have got a bit of mental health issues as well (just general every day teenage mental health issues), they don't want the doctor over the phone, they definitely don't."

"I don't think it conveys how vulnerable they are over the phone, but doctor can't see patient expressions or all they can hear is their answers. They can't see the pain in their eyes or whatever, I'm being very dramatic now, but you know what I mean."

“You just get a text saying, ‘We’ll give you a call.’ But then sometimes they’re at school as well and that’s... I don’t know. Or it doesn’t even give you a morning or afternoon, it just says on that day, so I can’t have a specific time anymore.”

## Case Study 2

‘Natalie’ has a 17-year-old daughter who cut her hand.

“Sometimes it’s brilliant. You get a call back and they ring you and you really don’t need to go into the surgery or one of the clinical nurses. My youngest daughter had an ear infection, and she literally just rang me asked me to take a picture that she could see how swollen it was. And she was like, that’s fine. I’ll just give her antibiotics and it was sorted. You don’t have to go to the surgery.”

“However, other times it’s completely different. My 17-year-old shut her hand in a car, it was spitting blood she rang me, I got home and all we wanted was for someone to have a look at it.”

“I spoke to reception, and I said, “Well, can someone ring me back to discuss it?” And the GP rang back within a few minutes. What annoyed me is my daughter’s 17, so I spoke to the GP, and she was, “Oh, can you put her on the phone?” And then she just fobbed my daughter off and said ‘Just go to A&E.’ She’s a 17-year-old, she’s not going to push back. And she’d gone by then.”

“If your doctors are open, it should be that you can actually see them. The doctors didn’t even say, ‘can you send a picture or something, and I’ll look at it and see?’ Anything to try and avoid A&E if it wasn’t necessary.”

“I just think it’s unless. If it’s something that isn’t urgent, you shouldn’t be going to A&E.”

“Can’t she have just said ‘Can you pop down for five minutes?’ Or ‘Can you pop down and see the nurse for five minutes, she’ll have a look?’  
And if you do still have to go to A&E, sometimes they can triage you quicker ... once you go in you don’t have to sit in the waiting room or wherever. They’ve already triaged you so they know where they need to send you.”

“Because you’re just passing the pressure from one place to another. It puts more pressure on other facilities, which don’t really need that pressure.”

## Case Study 3

‘Elaine’ has a young daughter with ongoing tonsillitis. It flares up regularly and she is waiting for an operation to have them removed.

“Phoning for an appointment is a disaster. I've registered for the online services. I book online because booking over the telephone is like finding a unicorn. You just can't get through.”

“Online booking is quite good, I'm quite pleased with it. I wasn't sure, but it does work quite well. But no one told me. There was a one time when I was ringing the GP every day, three days in a row because there wasn't any appointment available and finally someone talked to me. One of the receptionists said, ‘Oh, why don't you just register for online and book online, and leave us alone?’ I'm like, ‘Well, no one actually told me that there is an online system available.’”

“However, it's got to the point that the GP is not even interested in having a look at her physically, they're happily prescribing prescriptions over the phone which from one side I don't mind in a way because she suffered with the condition ever since she was one so by now, I do have knowledge and experience.”

“Being sent off to A&E with a poorly, child only because people can be bothered. I might be wrong, but this is literally how it feels like. That they just don't care anymore, and they use an excuse of COVID just not to see patients anymore and they're talking about small children. They can get very poorly, very, very quickly.”

“I was sent over to A&E with ‘Sally’ three times, and all he needed to do (because this is what the doctors at the A&E said) is literally just see you in practice and prescribe correct medications and it would have been done. It would have been over, but they don't really seem to care.”

“Sometimes it would be nice for them to actually listen to her chest once in a while, to check maybe there's a chest infection on top of... But no, they don't really seem interested.”

“They asked me to send a picture. There was another shocking thing that the GP told me. They said, ‘Oh, can you please send a picture’ of my almost five-year-old. I mean, it's your job to see her in the practice and examine her yourself.”

“Just have a look at her throat, check her ears because when tonsils go wrong, she can have ear infection. This is how much I know about this stuff because GPs simply don't care. Just take this kid in for literally five minutes, this is how much of your time she's going to consume. Check her ears, check her throat, listen to the chest. It's literally five minutes. Then prescribe me antibiotics. Give me liquid, not the tablets.”

“This is all I'm asking about. It is as I said, small kids get very poorly very, very quickly and my GP doesn't care.”

### **3.0 Key Findings and Recommendations**

## The are certain aspects of ‘accessing’ GP Services that need to be addressed

- Appointment Making

Nationally, 85% of people try phoning their surgery direct when trying to make an appointment.

Phone booking systems are now broken, with people stuck in long queues or not getting through at all.

Telephone systems must be robust enough to cope with demand, and to ensure calls are not dropped. There should be clear messaging for those waiting, keeping them informed.

Consideration should be given to implementing an options menu to choose an appointment for a child or young person. For example - ‘Choose 3 if you want to make an appointment for a child under the age of 16’

*‘Phone booking system, ability to get through to someone quickly.’*

*‘The phone system in the morning was not working on 2 consecutive days. In the end I had to make a private GP appointment.’*

Alternative options for how to book an appointment should be investigated, developed, and invested in.

Those options should then be promoted as widely as possible, allowing people to book in a way that suits them. This in turn will take pressure of the telephone systems.

Online booking is already established, but it appears to not be well known about. Alternatives such as through Apps, texting including WhatsApp and others, and social media should also be explored. The online and social media world has almost universal coverage within children and young people and as such it must be invested in.

There should also be an option to walk into a surgery to make an appointment. This seems to have become overlooked by many surgeries.

*‘No one actually told me that there is an online system available.’*

- Appointment availability and options

Having battled to get through, many children and young people are still finding it very difficult to get appointments.



While face to face appointments are still strongly preferred, the reality is that GPs and other surgery staff are very stretched.

Confidence in alternative appointments needs to be developed and improved. There needs to be a consistency of approach and a best practice guide for all surgeries.

Appointments need to be offered with relevant healthcare staff in whatever format is appropriate. If it can't be physically face to face then Zoom or other options should be considered, as well as telephone appointments, with the use of photos and even video investigated properly.

Investing in more non-GP healthcare professionals will mean that appropriate care can still be delivered effectively, but the burden on GPs can be eased.

*'Had to make another appointment to speak to a DOCTOR.'*

*'GPs are rushing, and I feel like they don't take a real interest in patients problems.'*

- **GP Surgery Resources**

Children and young people, and especially their parents, often need reassurance that illness and injury isn't too serious.

GP Surgeries should ensure they are well staffed with nurses, nurse practitioners and other qualified healthcare staff so they can take the burden away from GPs when appropriate.

Simple prescriptions for antibiotics, or other drugs can be expedited quickly and efficiently, and parents can have the reassurance they need from a qualified healthcare professional.

Being well staffed will also ensure that children and young people can pop into the surgery for assessment and treatment, rather than being directed to A&E.

*'It would have taken two seconds just to write repeat prescription out.'*

## **4.0 Conclusion**

By listening to the lived experience of children and young people, their family, carers, and friends, it is hoped that the findings in the report will help the HWE ICB to identify areas of improvement to support their community and meet its future needs.

## Adapting and moving forwards

Children and young people often have more pressing needs for immediate assessment and treatment, whether it's period pains, broken limbs or colds and flu. Parents and loved ones have high levels of concern, and the children themselves can find it more difficult to deal with and process illness and injury.

GP surgeries need to find a way to prioritise this demographic and make use of technologies to ensure they can get through, get seen and get treatment.

Surgeries should be flexible and adapt to the requirements of children and young people, offering a 'healthcare centre' style approach, where there is a mix of professionals and specialists who are not necessarily GPs, but can offer GP services where appropriate.

Birth rates and growing population in south and east England are putting more pressure on all aspects of NHS healthcare.

*'Need more staff to deal with volume of patients. 1 surgery for nearly 20000 people.'*

GP Surgeries need to offer a holistic primary healthcare system and educate children and young people away from thinking they have to see a GP face to face at all costs, moving them towards an understanding that there are many ways to get the right treatment at the right time and from the right person.

## 5.0 Terminology and Acronyms

**HWE** - Hertfordshire and West Essex

**ICB** - Integrated Care Board

**ICB Constitution** - is a document that sets out the objectives of the ICB, the rights and responsibilities of the various parties involved in health care, (patients, staff, trust boards) and the guiding principles which govern the service.

**GP** - General Practice or General Practitioner

**IPSOS** - A global market research company headquartered in Paris

**Face to face** - a meeting where people are in the same room talking directly to one another

**Virtual** - talking to someone directly but seeing them only on-screen

**Holistic** - Treatment of the whole person, taking into account all factors