

GP Access Issues - Evidence Pack

Prepared as a working list of **Who is complaining** about GP access problems linked to online systems and triage. Sources are grouped by their **primary concern**:

- **A. GP websites / online tools closed out-of-hours or when capacity is reached**
- **B. Mandatory phone-only triage or phone bottlenecks blocking access**
- **C. Other access issues: digital exclusion, complexity, unsafe / low-standard models, or general access dissatisfaction**

Who is affected (rough scale)

England. Rates per 1,000 residents/households (approx).

Group	Number	Rate	Why it matters
All registered patients (England)	~56m	1000/1000	Everyone hit by closures, form shut-offs, queues.
Long-term conditions	~26m	≈460/1000	Need repeat contact; friction compounds.
Disabled people	~14m (of ~16m UK)	≈250/1000	Need accessible, multi-channel routes.
Older people (65+)	~11m	≈200/1000	Higher need, lower digital confidence.
Most deprived 20% areas	~11m	≈200/1000	Less digital access, higher illness burden.
Low/no essential digital skills	~10–11m (UK)	≈160–180/1000	Web-only flows exclude many.
Offline households	~1.5m (UK)	≈50/1000 hh	No web access at all.
Limited English proficiency	~0.9m (E&W)	≈15/1000	Forms + phone triage much harder to use.

Regional estimates (GTD and New Bank, ~%patients)

Group	~National	~GTD (≈70k pts)	~New Bank (≈6500 pts)
Long-term conditions	46%	58% (~40k patients)	60% (~3,900 patients)
Disabled (Equality Act)	25%	22% (~15k patients)	23% (~1,500 patients)
Aged 65+	20%	12% (~8k patients)	7% (~500 patients)
In most deprived 20% areas	20%	65% (~45k patients)	80% (~5200 patients)
Low / no essential digital skills	17%	20% (~14k patients)	22% (~1400 patients)
Offline households	5%	8% (~5k households)	9% (~600 households)
Limited English (poor / none)	2%	8% (~5k patients)	8% (~500 patients)

A. GP websites / online systems closed out-of-hours or when capacity is reached

1. Healthwatch Hertfordshire – Online GP websites & forms shut / limited

Organisation: Healthwatch Hertfordshire (with Healthwatch Essex / Herts & West Essex ICS)

Primary issue: Online GP services frequently unavailable outside short time windows or closed when demand is high; people want **24/7 form submission** with responses in core hours.

- **Online GP services: patient views and experiences** (Feb 2025, 500 respondents)

Summary / library entry:

- <https://nds.healthwatch.co.uk/reports-library/online-gp-services-patient-views-and-experiences>
- Full report (PDF):
- <https://www.healthwatchhertfordshire.co.uk/sites/healthwatchhertfordshire.co.uk/files/HwH%20Online%20GP%20Services%20Report%20FINAL.pdf>
- ICS summary page:
- <https://www.hertsandwestessex.ics.nhs.uk/insights/online-gp-services-patient-views-and-experiences/>

2. Healthwatch Tower Hamlets – Online consultation systems closing when full

Organisation: Healthwatch Tower Hamlets

Primary issue: High proportion of **negative feedback about online consultations** – forms are complex, confusing and **become unavailable once capacity is reached**, leaving people blocked.

- **Patient Experience Report 2024–2025 Quarter 2** (feedback Jul–Sept 2024)
 - <https://www.healthwatchtowerhamlets.co.uk/report/2025-02-18/patient-experience-report-2024-2025-quarter-2>
- **Patient Experience Report 2024–2025 Quarter 4** (feedback Jan–Mar 2025)
 - <https://www.healthwatchtowerhamlets.co.uk/report/2025-07-16/patient-experience-report-2024-2025-quarter-4>
- **Patient Experience Report 2025–2026 Quarter 1** (feedback Apr–Jun 2025)
 - <https://www.healthwatchtowerhamlets.co.uk/report/2025-10-14/patient-experience-report-2025-2026-quarter-1>
- **Annual Report 2024–2025** – notes online consultations as an ongoing area of concern
Healthwatch Data library entry (PDF):
 - <https://nds.healthwatch.co.uk/reports-library/annual-report-2024-25-106>

3. Healthwatch Ealing – Limited online booking windows, poor online forms

Organisation: Healthwatch Ealing

Primary issue: **Online forms and booking windows are restricted**, add friction, and frequently fail to resolve issues; patients complain about both online and phone routes for appointments.

- **Patient Experience Report Q4 2024–25** (GPs and other services)
Overview page:
 - <https://www.healthwatchealing.org.uk/report/2025-08-26/patient-experience-report-q4-24-25>
- Q4 2024–25 PER (PDF, includes GP booking/online form issues):

- <https://www.healthwatchealing.org.uk/sites/healthwatchealing.org.uk/files/Q4%202024-25%20PER.pdf>
- **Healthwatch Ealing Patient Experience Report Q4 2023–24** (pre-change baseline but similar themes)
Overview:
 - <https://www.healthwatchealing.org.uk/report/2024-07-30/healthwatch-ealing-patient-experience-report-q4-2023-24>
Q4 Patient Experience Report PDF:
 - <https://www.healthwatchealing.org.uk/sites/healthwatchealing.org.uk/files/Q4%20Patient%20Experience%20Report%20%281%29.pdf>
- **Annual Report 2024–25** (summarises complaints about access, booking and online systems)
Healthwatch Data entry:
 - <https://nds.healthwatch.co.uk/reports-library/annual-report-2024-25-47>
Full PDF (via Ealing Council):
 - <https://ealing.moderngov.co.uk/documents/s20340/Appendix%201%20Healthwatch%20Ealing%20Annual%20Report%202024.25.pdf>

4. Healthwatch Wandsworth – Websites and NHS App as barriers

Organisation: Healthwatch Wandsworth

Primary issue: Digital access routes (practice websites, online forms, NHS App) are hard to use for many; recommends auditing websites against NHS England’s benchmarking tool and simplifying online access.

- **Experiences of Accessing GP Practices 2024/25** (Aug 2025)
Main report page:
 - <https://www.healthwatchwandsworth.co.uk/report/2025-08-26/experiences-accessing-gp-practices-202425>
Full report PDF:
 - https://www.healthwatchwandsworth.co.uk/sites/healthwatchwandsworth.co.uk/files/HWW%20Experiences%20of%20Accessing%20GP%20Practices_4.pdf
- **Experiences of accessing GP practices 2024/25** – Healthwatch Data library entry:
 - <https://nds.healthwatch.co.uk/reports-library/experiences-accessing-gp-practices-202425>
- **Experiences of Accessing GP Practices in Wandsworth** – GP federation summary (same project, emphasises access barriers)
 - <https://www.wandsgpfed.co.uk/impact/experiences-of-accessing-gp-practices-in-wandsworth/>
- **SW London ICS Insight Bank summary** (same study, system-level framing)
 - <https://www.southwestlondonics.org.uk/insights/experiences-of-accessing-gp-practices-2024-25/>

5. Healthwatch national – online consultations and websites blocking access

Organisation: Healthwatch England (national)

Primary issue: Across England, **online consultations often don’t resolve problems** and people struggle to get through on the phone or book appointments; digital routes plus weak websites are repeatedly highlighted as barriers.

- **Q4 Patient Experience Report (national)** – includes GP online consultations as a key theme
 - <https://nds.healthwatch.co.uk/reports-library/q4-patient-experience-report-1>

6. Individual practices – online access limited to core hours or capacity

Primary issue: Practice websites explicitly describe online tools as only available **in core hours** and/or **until capacity is reached**, illustrating how the new contract has locked in a low floor.

Representative examples we've already looked at:

- **Oakwood Lane Medical Practice (Leeds) – Availability of Online consultations from 1 October 2025**
Describes online consultation access as available during core hours (8:00–18:30) for non-urgent requests, in line with contract – no 24/7 route.
 - <https://www.oakwoodlanemedical.nhs.uk/2025/10/07/availability-of-online-consultations-from-1-october-2025/>
 - **Church Lane Surgery – Changes to our online access from October 2025**
States that **online bookings open from 7:30am until capacity is reached each day**, so the digital front door is literally closed once slots run out.
 - <https://churchlanesurgery.co.uk/news/changes-to-our-online-access-from-october-2025-increasing-access-to-routine-care/>
 - **The Practice Old Hill – Changes to our online access from October 2025**
Explains that online consultation tools are open between 8am and 6:30pm for routine requests only, aligned exactly with the contract floor.
 - <https://thepracticeoldhill.co.uk/news/changes-to-our-online-access-from-october-2025-increasing-access-to-routine-care/>
 - **St Luke's Health Centre – Changes to our online access from October 2025** (very similar wording to The Practice Old Hill)
 - <https://stlukeshealthcentre.nhs.uk/news/changes-to-our-online-access-from-october-2025-increasing-access-to-routine-care/>
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B. Mandatory phone-only triage or phone bottlenecks blocking access

7. Healthwatch Ealing – “Call at 8am, everything gone”

Organisation: Healthwatch Ealing

Primary issue: **Mandatory early-morning phone triage / booking**, with patients told to call at set times, then finding all slots gone once they finally get through.

- **Patient Experience Report Q4 2024–25**
Overview page (summarises issues with telephone access and booking):
 - <https://www.healthwatchealing.org.uk/report/2025-08-26/patient-experience-report-q4-24-25>
 - Q4 2024–25 PER PDF (details on the 8am phone rush, queues and no slots left):
<https://www.healthwatchealing.org.uk/sites/healthwatchealing.org.uk/files/Q4%2024-25%20PER.pdf>

8. Healthwatch national – phone access and booking still failing

Organisation: Healthwatch England

Primary issue: In national synthesis, **people still struggle to get through on the phone** and face difficulties booking appointments, even as online tools expand.

- **Q4 Patient Experience Report (national)**
 - <https://nds.healthwatch.co.uk/reports-library/q4-patient-experience-report-1>

9. Donnington Medical Practice – 8:30am phone scramble as explicit problem

Organisation: Donnington Medical Practice (Telford)

Primary issue: Describes how total triage and limited capacity have produced an **8:30am phone scramble** with **300–400 calls before 9am**, leaving staff unable to help everyone and patients told there's nothing left.

- **Online Consultations from 1st October 2025**
 - <https://www.donningtonmedicalpractice.co.uk/2025/09/30/online-consultations-from-1st-october-2025/>

10. GP contract & government messaging – “ending the 8am scramble” (but only in core hours)

Organisations: NHS England, DHSC, BMA, LMCs

Primary issue: Policy and commentary around the new GP contract acknowledge that current models create **telephone bottlenecks and 8am rushes**. Their solution is unlimited online requests during core hours, not 24/7 access, which still leaves people blocked outside those hours.

Key docs we've used:

- **NHS England – Changes to the GP Contract in 2025/26**
Official long-read; requires practices from 1 Oct 2025 to keep online consultation tools on **throughout core hours (8am–6:30pm)** for non-urgent requests.
 - <https://www.england.nhs.uk/long-read/changes-to-the-gp-contract-in-2025-26/>
- **King's Fund – GP Contract 2025/26 explained**
Independent explainer, summarising the **core-hours-only online access** requirement.
 - <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/gp-contract-explained>
- **NHS Confederation – GP Contract 2025/26: what you need to know**
 - <https://www.nhsconfed.org/publications/gp-contract-202526-what-you-need-know>
- **DHSC – GP Contract: What you need to know** (government comms)
States that from 1 Oct 2025 practices must keep online booking open all day during working hours (8am–6:30pm) **“no more closing these systems and forcing everyone onto jammed phone lines”** – but only during core hours.
 - <https://healthmedia.blog.gov.uk/2025/09/29/gp-contract-what-you-need-to-know/>
- **BMA – GP contract changes England 2025/26**
Notes requirement for online consultation tools to be available throughout core hours for non-urgent requests; raises concerns about workload and safety.
 - <https://www.bma.org.uk/pay-and-contracts/contracts/gp-contract/gp-contract-changes-england-202526>
- **BMA – Campaigning around GP contracts in England (GP online access resources)**
Includes guidance on “managing patient care safely from 1 October”, demand and capacity, and FAQs on the online consultation requirement.

- <https://www.bma.org.uk/our-campaigns/gp-campaigns/england/campaigning-around-gp-contracts-in-england>
- **Local Medical Committees (examples)** – guidance and warnings about phone and online workload:
 - Somerset LMC – GP Contract 2025/26: <https://somersestlmc.co.uk/guidance/gp-contract-2025-26/>
 - Wessex LMC – GP Contract 2025/26: <https://www.wessexlmcs.com/guidance/gp-contract-25-26/>
 - Surrey & Sussex LMCs – Update: GP Contract changes from 01 October 2025 (workload / safety concerns): <https://www.sslmcs.co.uk/resources/gp-contract-2025-26/update-gp-contract-changes-01-october-2025/>
 - Essex LMC – *Contract Changes from 1 October 2025* (PDF, legal and workload analysis): <https://www.essexlmc.org.uk/wp-content/uploads/2025/09/LMC-document-Contract-Changes-from-1-October-2025-v2.pdf>

11. BMA dispute & safety concerns about unlimited online requests

Organisation: British Medical Association (GPC England)

Primary issue: Argues that unlimited online requests during core hours, without agreed safeguards, will **overwhelm practices**, worsen safety, and risk shifting more triage work onto already stretched staff.

- **BMA FAQs for 1 October 2025 online consultations** (PDF)
 - <https://www.bma.org.uk/media/xhoihr5f/bma-faqs-for-1-october-2025-online-consultations-v2.pdf>
- **BMA GP contract campaign page** (includes safe working guidance, template letters to ICBs, posters etc.):
 - <https://www.bma.org.uk/our-campaigns/gp-campaigns/england/campaigning-around-gp-contracts-in-england>
- **BMA letter to Secretary of State (1 October 2025)** – online consultations and data (raises concerns about “unlimited patient need” and refusal to allow temporary divers):
 - <https://www.bma.org.uk/media/m0jc2yf3/bma-gpce-letter-to-sos-and-mos-011025.pdf>

C. Other specific access issues (digital exclusion, complexity, unsafe / low standard models, general dissatisfaction)

12. Healthwatch Kent – ANIMA “digital front door” project

Organisation: Healthwatch Kent

Primary issue: Evaluation of a **full digital front door (ANIMA)** across 4 practices: online becomes the main access route, but many patients find it complex, confusing or exclusionary; older and less digital patients are especially affected.

- **ANIMA – The Digital Front Door Project** (Jan 2025) – full report (PDF):
 - https://nds.healthwatch.co.uk/sites/default/files/reports_library/20241217_Kent_ANIMA%20-%20THE%20DIGITAL%20FRONT%20DOOR%20PROJECT%20V7.0%20FINAL.pdf

13. Healthwatch Westminster / NW London – access to local primary care services

Organisation: Healthwatch Westminster (working across Brent, Westminster, Kensington & Chelsea)

Primary issue: Residents report **complex, confusing access routes**, difficulties with digital tools and online triage systems, and desire for a **mix of online, phone and face-to-face** access.

- **What do patients think about access to local primary care services?** (27 Sept 2024)
 - <https://www.healthwatchwestminster.org.uk/blog/2024-09-27/what-do-patients-think-about-access-local-primary-care-services>

14. Healthwatch Tower Hamlets, Ealing, Wandsworth – digital exclusion & complexity

Organisations: Healthwatch Tower Hamlets, Healthwatch Ealing, Healthwatch Wandsworth

Primary issue: Across multiple boroughs, patients describe **online forms as long, repetitive and confusing**, not accessible to some disabled / older / non-English-speaking patients, and often not offering the options they need.

Representative reports (in addition to those listed above):

- **Healthwatch Tower Hamlets – Annual Report 2024–25**
 - <https://nds.healthwatch.co.uk/reports-library/annual-report-2024-25-106>
- **Healthwatch Ealing – Annual Report 2024–25**
 - <https://nds.healthwatch.co.uk/reports-library/annual-report-2024-25-47>
 - <https://ealing.moderngov.co.uk/documents/s20340/Appendix%201%20Healthwatch%20Ealing%20Annual%20Report%202024.25.pdf>
- **Healthwatch Wandsworth – Annual Report 2024–25** (includes access / digital work as a key theme)
 - <https://nds.healthwatch.co.uk/reports-library/annual-report-2024-25-71>
 - <https://www.healthwatchwandsworth.co.uk/report/2025-06-25/how-we-have-worked-together-ensure-care-people-driven-read-our-latest-annual>

15. HSSIB – digital tools for online consultation (safety risks)

Organisation: Health Services Safety Investigations Body (HSSIB)

Primary issue: **Digital tools for online GP consultation carry patient safety risks**, including mis-triage, missed serious illness and delays, and can put people off seeking help when online access is confusing or hard.

- **Patient safety investigation – Workforce and patient safety: digital tools for online consultation in general practice** (2024)
Full report:
 - <https://www.hssib.org.uk/patient-safety-investigations/workforce-and-patient-safety/second-investigation-report/>
- **HSSIB blog – Patient and staff concerns over GP online consultation tools** (25 July 2024)
 - <https://www.hssib.org.uk/news-events-blog/patient-and-staff-concerns-over-gp-online-consultation-tools/>
- **Guardian coverage – Online GP consultations have led to harm and death, investigation finds** (July 2024)

- <https://www.theguardian.com/society/article/2024/jul/25/online-gp-consultations-have-led-to-harm-and-death-investigation-finds>

16. Scrutiny committees – local councils examining GP access

Organisations: Various local authority overview & scrutiny committees

Primary issue: Formal democratic bodies **investigating GP access problems** (including digital and triage models), often drawing on Healthwatch evidence and ICB data.

Key examples already in play:

- **Stockton-on-Tees Adult Social Care and Health Select Committee** – *Scrutiny Review of Access to GPs and Primary Medical Care*
Cabinet item and covering report (2024):
 - <https://moderngov.stockton.gov.uk/mgAi.aspx?ID=3304>
 - <https://moderngov.stockton.gov.uk/documents/s8186/Executive%20Summary.pdf>
Evidence-gathering / data pack docs:
 - <https://moderngov.stockton.gov.uk/documents/s5644/Covering%20Report.pdf>
 - <https://moderngov.stockton.gov.uk/documents/s3385/CoveringReportAccessToGPsandPrimaryMedicalCare.pdf>
- **Barnet Adults & Health Overview and Scrutiny Sub-Committee** – *Primary Care (GP) Access Task and Finish Group*
Task & Finish Group report and updates:
 - <https://barnet.moderngov.co.uk/documents/s86423/Primary%2BCare%2BGP%2BAccess%2BTask%2Band%2BFinish%2BGroup.pdf>
 - <https://barnet.moderngov.co.uk/documents/s84990/GP%20Access%20cover%20report.pdf>
 - <https://barnet.moderngov.co.uk/documents/s91472/Primary%20Care%20GP%20Access%20TFG%20update.pdf>
Summary in cabinet / annual scrutiny pages:
 - <https://opencouncil.network/meetings/69424>
 - <https://opencouncil.network/meetings/79412>
 - [https://www.barnet.gov.uk/search?search=Primary%20Care%20\(GP\)%20Access%20Task%20and%20Finish%20Group%20Report](https://www.barnet.gov.uk/search?search=Primary%20Care%20(GP)%20Access%20Task%20and%20Finish%20Group%20Report)
- **Manchester City Council – Health Scrutiny Committee** – *Access to General Practice in Manchester*
Original GP access report and minutes:
 - <https://democracy.manchester.gov.uk/documents/s25985/GP%20Access.pdf>
 - <https://democracy.manchester.gov.uk/ieListDocuments.aspx?CId=142&MId=3737>
 - <https://democracy.manchester.gov.uk/documents/s26531/HSC%20Mins%2008%20Sept.pdf>

(Other councils – Leicestershire, Devon, Kent, Bury etc. – have similar access/scrutiny work, but the three above are the ones we've actually used so far.)

17. Primary care patient safety strategy (national context)

Organisation: NHS England

Primary issue: Sets out commitments to **patient safety in primary care**, explicitly relevant to how digital access models and triage are implemented.

- **Primary care patient safety strategy** (Sept 2024)
 - <https://www.england.nhs.uk/long-read/primary-care-patient-safety-strategy/>

18. General public anger and dissatisfaction about GP access

These sources aren't specifically about websites or triage tools, but they show that **access to GP appointments is the top pressure point in the NHS**, and that current standards are widely seen as inadequate.

(These are drawn from our existing evidence pack on GP access and far-right narratives.)

- **Ipsos polling (Sept 2025) – “Easier access to GP appointments remains public’s top priority for the NHS”**
 - <https://www.ipsos.com/en-uk/easier-access-gp-appointments-remains-publics-top-priority-nhs>
- **GP Patient Survey 2025 – official national stats on access and experience**
NHS England data and tools:
 - <https://digital.nhs.uk/data-and-information/publications/statistical/nhse-gp-patient-survey-results/2025>
 - <https://www.gov.uk/government/statistics/gp-patient-survey-results-2025>
 - <https://gp-patient.co.uk/latest-survey/results>
- **Institute for Government – Performance Tracker Local: General practice in England** (Apr 2025)
Shows collapsed patient satisfaction with GP services, links higher satisfaction to more GPs and more face-to-face appointments.
 - <https://www.instituteforgovernment.org.uk/publication/performance-tracker-local/general-practice-england>
 - https://www.instituteforgovernment.org.uk/sites/default/files/2025-04/performance-tracker-local-gp-england_2.pdf
- **Healthwatch England polling via media – patients want a right to see GPs quickly**
(E.g. Guardian reporting May 2024 that patients want a right to see a GP within 24 hours enshrined.)
 - <https://www.theguardian.com/society/article/2024/may/17/patients-england-want-right-to-see-gps-with-24-hours-enshrined-nhs-survey>
- **Ipsos & YouGov data on GP access and wider NHS performance** – used in the immigration / far-right evidence pack, showing:
 - High concern about NHS pressures and GP waits
 - Strong belief that access is getting worse

(Full links for these are already captured in the separate “GP Access, Immigration Blame & Far-Right Messaging — Evidence Pack”, which this document sits alongside.)

How this pack is structured for use

- **Section A** gives you examples where patients and reports explicitly complain about **online GP systems being unavailable out-of-hours or when capacity is reached**.
- **Section B** lists sources where **phone-only triage / 8am phone bottlenecks** are clearly described as a problem, plus the national contract rules that entrench this model.
- **Section C** adds the wider context: **digital exclusion, complex or unsafe online tools, councils scrutinising access, and national data on how angry people are about GP access overall**.