Analyzing GP Appointment Capacity and Utilization in NHS England



Key Questions

 Was GP appointment capacity adequate in 2020-2022?

 What factors contributed to missed GP appointments?

The financial and human costs of missed appointments

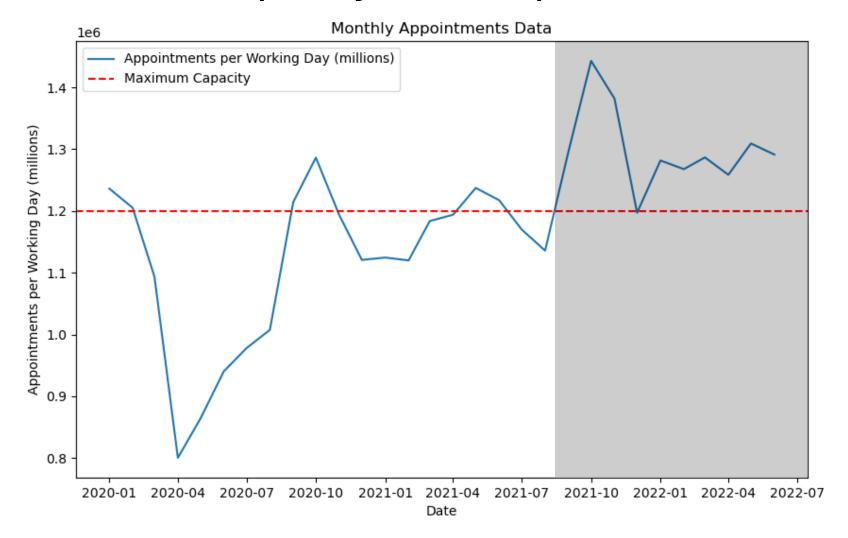
- **Financial**: 7.2 million missed GP appointments in a year cost the NHS £216 million. (NHS England 2019)
- **Human**: "Missed appointments represent a significant risk marker for all-cause mortality, particularly in patients with mental health conditions." (McQueenie et al 2019)

Key Metrics

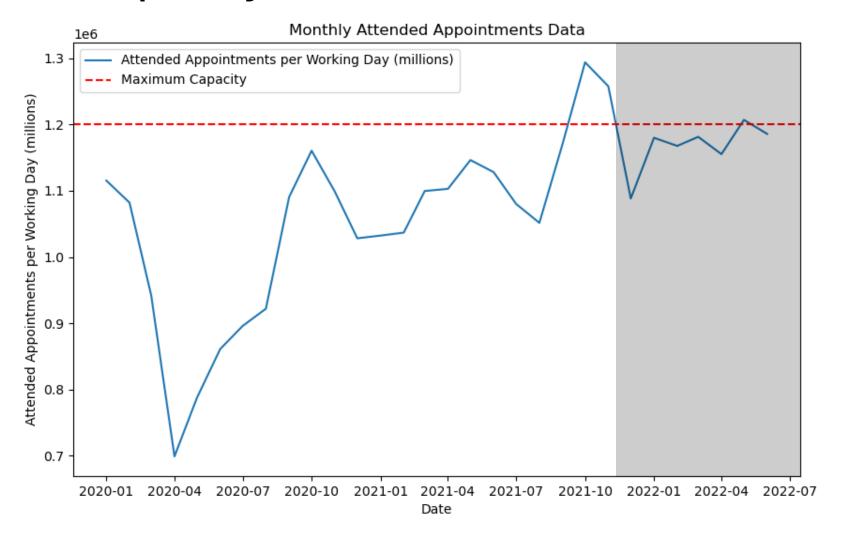
 Capacity is measured by number of appointments per working day.

• **Utilization** is measured by the percentage of *attended* appointments.

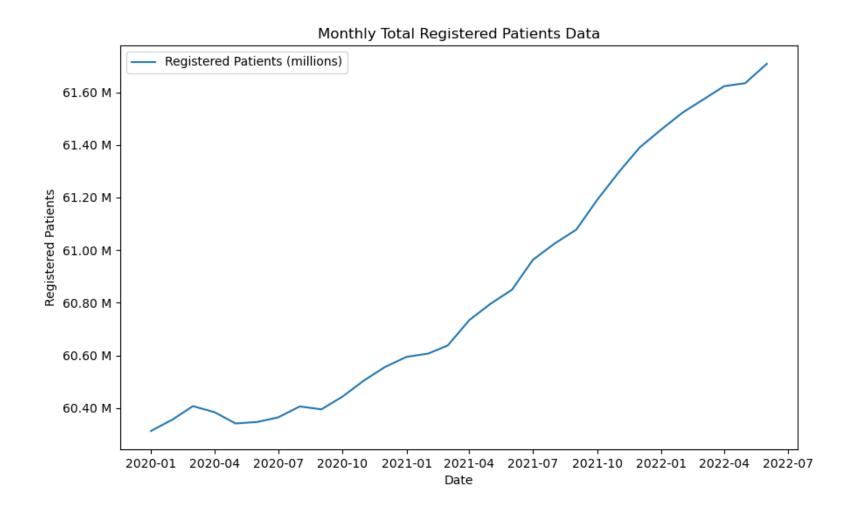
Appointments per working day were near or above max capacity from September 2021.



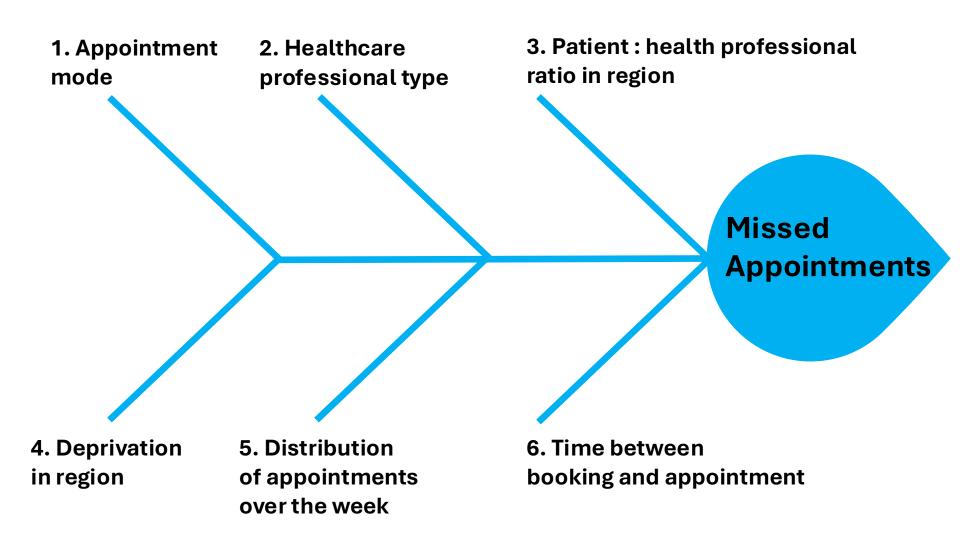
Attended appointments are below or near max capacity from December 2021.



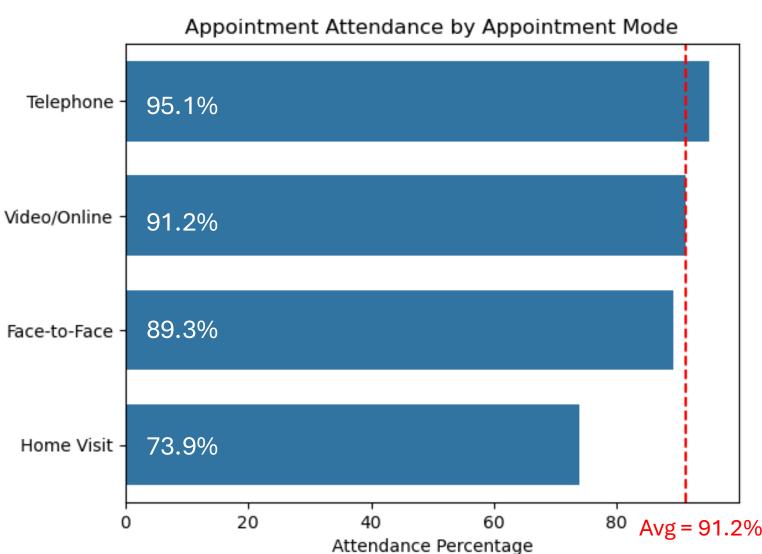
The number of registered patients is increasing over time.



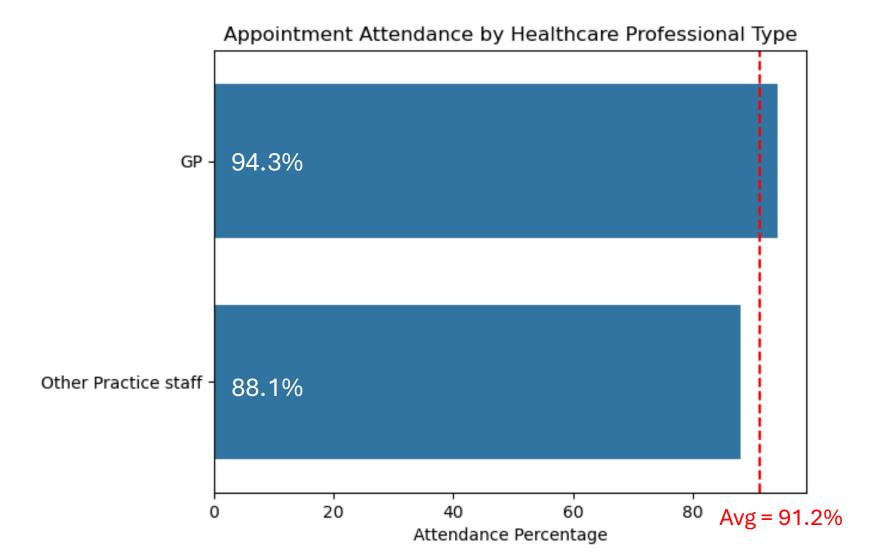
Structured Thinking Approach



1. Remote appointments are better attended than face-to-face ones.

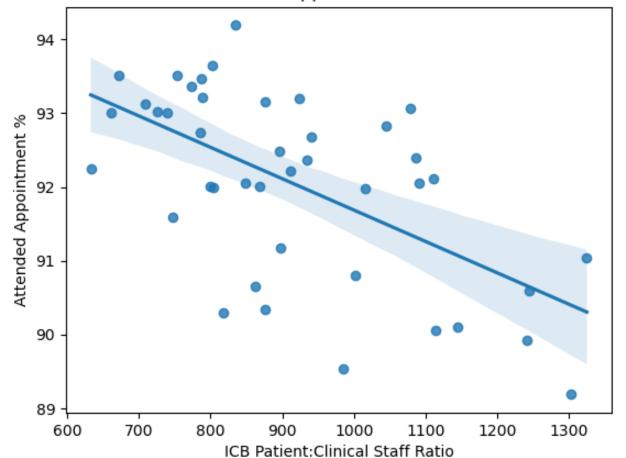


2. Attendance is higher at appointments with GPs than with other staff.

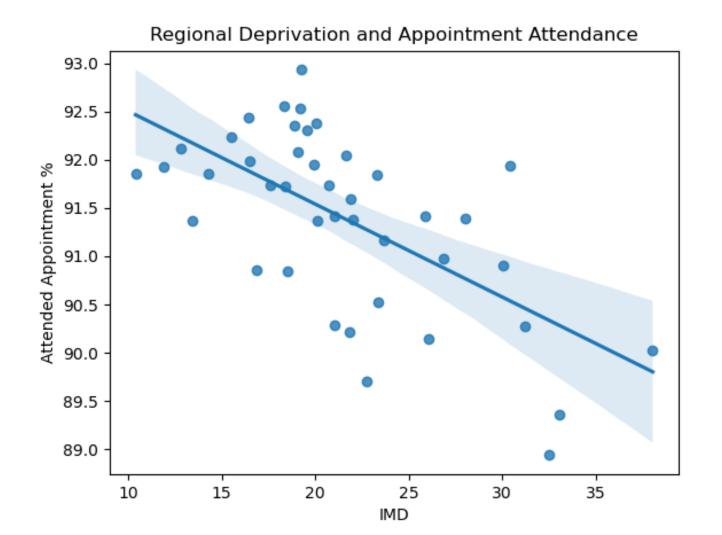


3. There is a negative relationship between patient: clinical staff ratio and appointment attendance.

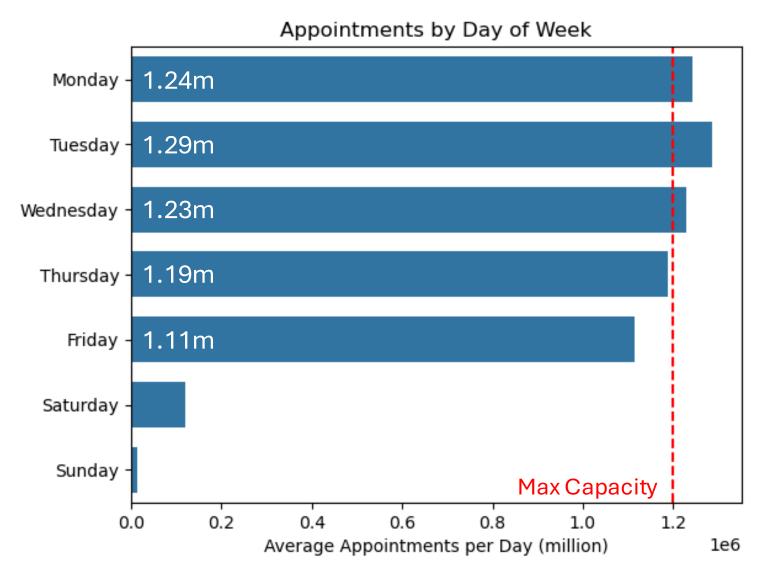
ICB Patient: Clinical Staff Ratio and Appointment Attendance Data for June 2022



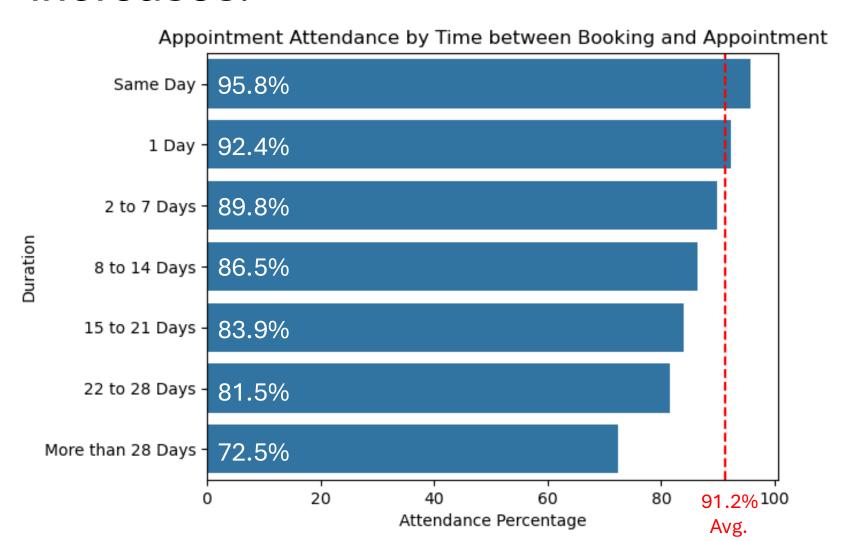
4. More deprived areas have lower appointment attendance rates.



5. Appointments aren't spread evenly across weekdays.



6. Attendance decreases when time between booking and appointment increases.



Recommendations

- Hire more healthcare professionals in deprived regions to increase appointments per working day, ideally scheduled later in the week.
- Doing so will likely decrease the time between booking and appointments, which in turn will improve appointment utilization through increased attendance.
- Implement cost effective means for increasing appointment attendance, such as training receptionists to encourage patients to write down their own appointment details and to notify the practice if they cannot attend. (Bull et al 2023)

Reference List

- Appel, C (2024) Understanding the Index of Multiple Deprivation (IMD) in public health research. Available at: https://www.heec.co.uk/resource/understanding-the-index-of-multiple-deprivation-imd-in-public-health-research/ (Accessed: 24 February 2025).
- Bull, S. et al (2022) Behaviourally informed, patient-led interventions to reduce missed appointments in general practice: a 12-month implementation study. Available at: https://academic.oup.com/fampra/article/40/1/16/6643534 (Accessed: 24 February 2025).
- London School of Economics and Political Science (2022) New research suggests patients
 don't like Mondays when it comes to appointments, with important implications for
 appointment scheduling. Available at: https://www.lse.ac.uk/News/Latest-news-from-LSE/2022/i-September-22/This-study-emerged-to-solve-a-problem-that-costs-millions-and-causes-lots-of-frustration-amongst-NHS-staff (Accessed: 24 February 2025).
- McQueenie, R. et al (2019) Morbidity, mortality and missed appointments in healthcare: a national retrospective data linkage study. Available at:
 https://bmcmedicine.biomedcentral.com/articles/10.1186/s12916-018-1234-0 (Accessed: 24 February 2025).
- Pandey, A et al (2023) Advanced Sentiment Analysis for Managing and Improving Patient Experience: Application for General Practitioner (GP) Classification in Northamptonshire. Available at: https://www.mdpi.com/1660-4601/20/12/6119 (Accessed: 24 February 2025).
- NHS (2019) Missed GP appointments costing NHS millions. Available at: https://www.england.nhs.uk/2019/01/missed-gp-appointments-costing-nhs-millions/ (Accessed: 24 February 2025).