

Registering frustration

Could a simpler, clearer GP registration process help manage demand in the health system - and improve the patient experience?



Citizens Advice policy briefings

Public service reform in a constrained spending environment

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Citizens Advice: Lessons for public service reform

At Citizens Advice we provide advice to millions of people a year on a perpetually tight budget. One key lesson from this work is that services are most efficient when they are designed around how people behave. We know from our work that complex and confusing processes can result in people ending up in the wrong part of the system. This wastes time and money for both services and their users and gives a poor user experience.

This note is a part of a series of briefings that apply these insights to the challenge of reforming public services in a constrained spending environment. Here we focus on the GP registration process in England, exploring how this process works on the ground. We want to understand whether a simpler, clearer process, could help in a small but practical and low cost way, to reduce demand on emergency health services while also improving the patient experience.

Acknowledgements

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We would like to take this opportunity to thank the following local Citizens Advice: Aldershot & Farnborough, Arun & Chichester, Aylesbury, Bedford, Bristol, Carlisle & Eden District, Cornwall, Coventry, Croydon, Derby, Dunstable & District, East End, Eastbourne, Hackney, Halton, Harlow, Harrow, Havant & District, Hertsmere, Ipswich, Lambeth, Leatherhead & Dorking (including Mole Valley), Leicester City, Leicestershire, Milton Keynes, Newcastle, Runnymede & Spelthorne, South East Staffordshire, South Liverpool, St Helens District, Thurrock, West Berkshire, Westminster and York.

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Summary

The local doctor is the gatekeeper to public healthcare and the most important contact many of us have with public services. Registering with a general practitioner (GP), however, is not always easy; three in ten respondents to our recent survey told us that their last registration with a GP was “quite difficult” or “very difficult”. From our 3,300 locations across England, we also pick up signs that GP registration processes vary in ways people do not always understand. With GPs under pressure, and the wider health system seeking substantial further efficiencies in this parliament, we thought this would be a timely moment to understand how GP registration works on the ground.

This briefing note explores registration processes with GPs in England, sharing the results of new a survey of 567 GP surgeries.¹ Our findings reveal that:

- Identification requirements vary widely between GP practices. Three in five surgeries (58 per cent) were unable to register people without both proof of address and photo identification (ID), but 13 per cent required only one form of ID and 12 per cent asked for no ID.
- Where registration is complex or overly demanding, it may hinder efficient demand management at the specific practice and in the health service locally. Where people had inadequate ID, a quarter of surgeries offered temporary registration, but one in seven people were signposted to an accident and emergency centre (A&E) or an acute care centre.
- Some GP surgeries have done impressive work to streamline registration processes. Some allow patients to register in full online, while 28 per cent offer same day registration. Over a third (36 per cent) of patients say their registration took 24 hours or less.
- Registration processes also vary for children; a quarter of surgeries (26 per cent) had no document requirements for children and 21 per cent had no requirements if the child’s parent was registered. Half required formal ID for the child.

¹ This represents seven per cent of the total. This calculation is based on 2013 Health and Social Care Information Centre data which states that there were 7,962 GP practices in England. It should be noted that a GP practice can operate more than one surgery. Our data represents 531 GP practices in total. Information provided by GP surgeries belonging to the same practice did not always match and therefore has not been discounted.

- People are often required to visit a GP surgery multiple times in order to register. Almost one in ten online survey respondents told us it took over two weeks to register with their GP, sometimes requiring two or three visits.
- There is fairly limited interest in using new powers to register patients outside practice boundaries (or these plans have not been shared with receptionists).² One in five GP receptionists did not know or had not heard of this policy, while only one in six said their surgery was registering out of area patients.

The GP registration process is an important checkpoint on the way into the health system. It must fulfil the role of fraud prevention while also giving patients an efficient and responsive service. Our research suggests that clearer, more consistent registration processes could make a contribution to the challenge of managing demand pressures, while also giving a more responsive patient experience. There are particular opportunities to spread good practice, move aspects of the registration process online, provide better online information, and support receptionists across both registration requirements and signposting patients in complex cases.

² GPs were given new flexibilities to register patients from outside traditional practice boundaries in January 2015.

Context

At Citizens Advice we see every day the importance of getting processes right. Last year, we provided face to face advice to two million people and, as a charity working in a persistently tough funding environment, we have to innovate constantly, finding new ways to meet unprecedented demand. We also play a central role in advising people on how to navigate public services, ensuring people understand the requirements and don't waste their own time or that of professionals. Across public services, from the welfare system to health, we see how confusion, inefficiencies and unnecessary variations in approach can waste time and resources.

In light of current concerns about demand on the health system, we thought it a timely to check how the process for registering with a GP is working. We wanted to see how the process plays out on the ground across the country - rather than just on paper. We also wanted to find examples of good practice and share these more broadly, and to make sure our own guidance on GP registration processes was up to date. To this end, our advice centres across the country have collected data on the registration processes of 567 local GP surgeries, a sample representing around seven per cent of the total. We have complemented this evidence with a direct survey of patients carried out through our website.

This note presents our findings. We start with a brief update on the current guidance on GP registration processes. We then present the findings of our survey of GP surgeries and of patients, and we finish with reflections on policy and practice.

Current guidance on GP registration processes

A range of bodies offer guidance to GP surgeries on registration processes. A review of this literature suggests that guidance differs widely. While there are no legislative criteria to define who is eligible for primary care in England, the General Medical Services Contract does define a broad process for registering with a GP:

“To register with an NHS General Practitioner, patients need to either provide their medical card, or complete an application (on form GMS1) signed by the patient or another person authorised to act on their behalf.”

Whilst there is no contractual obligation for GP surgeries to request proof of address or ID, the NHS Counter Fraud guidance encourages GP surgeries to check both in order to minimise the risk of patient fraud.³ Other bodies offer somewhat different advice, with some Local Medical Committees (LMCs) advising against the NHS Counter Fraud Service's recommendations.⁴ Guidance produced by the General Practitioners Committee offers broad principles but does not describe a specific approach.⁵

The landscape of guidance around registration processes is likely to grow more complicated in coming years, with ten upcoming pilots planning to ask GP surgeries to see European nationals' European Health Insurance Card (EHIC) when registering them.⁶ This initiative aims to allow the NHS to claim back the costs of treating EU patients from their home countries.

Such complexities can make it challenging for GP surgeries to understand their obligations to new patients. So how do registration processes play out on the ground?

³ NHS Counter Fraud Service (2010) *Guidance to GP practices on GP Patient registration fraud*. The service is now known as NHS Protect.

⁴ Surrey and Sussex LMCs (2011) *LMC Guidance: Registering patients*

⁵ London LMC (2009) *Patient registration - frequently asked questions*

⁶ Lind, S. (2015) 'GPs to conduct nationality checks in all new patients under health tourism crack down,' *Pulse*

Findings

To better understand the variations in GP registration processes across England, we worked in partnership with 35 local Citizens Advice to survey 567 GP surgeries. Local Citizens Advice surveyed their local GP surgeries over the course of January and February 2015; aiming to speak to around 15-20 surgeries each.⁷ They also conducted online research in advance of contacting the surgery to assess what information was available. Our sample size represents seven per cent of GP practices across England and our analysis suggests the sample is broadly geographically representative. This means we can have a high degree of confidence in our findings.

To complement the results of our GP survey we also ran an online survey through our website in January and February 2015, receiving responses from 518 people. The survey was also promoted through social media. Whilst the client-base of Citizens Advice is broadly representative of the population as a whole (though skewed slightly toward lower income and older age) we should be cautious in extrapolating our online survey results to the population as a whole. These findings should be understood as reflective of the experiences and interests of Citizens Advice service users rather than the broader population of England.

Through our survey of GP surgeries, we examined four key components of the GP registration process:

- Document requirements when registering
- The online offer including information and ability to pre-register
- The length of the registration process
- The ability to register as an out of area patient

There is significant variation in document requirements when registering with a GP

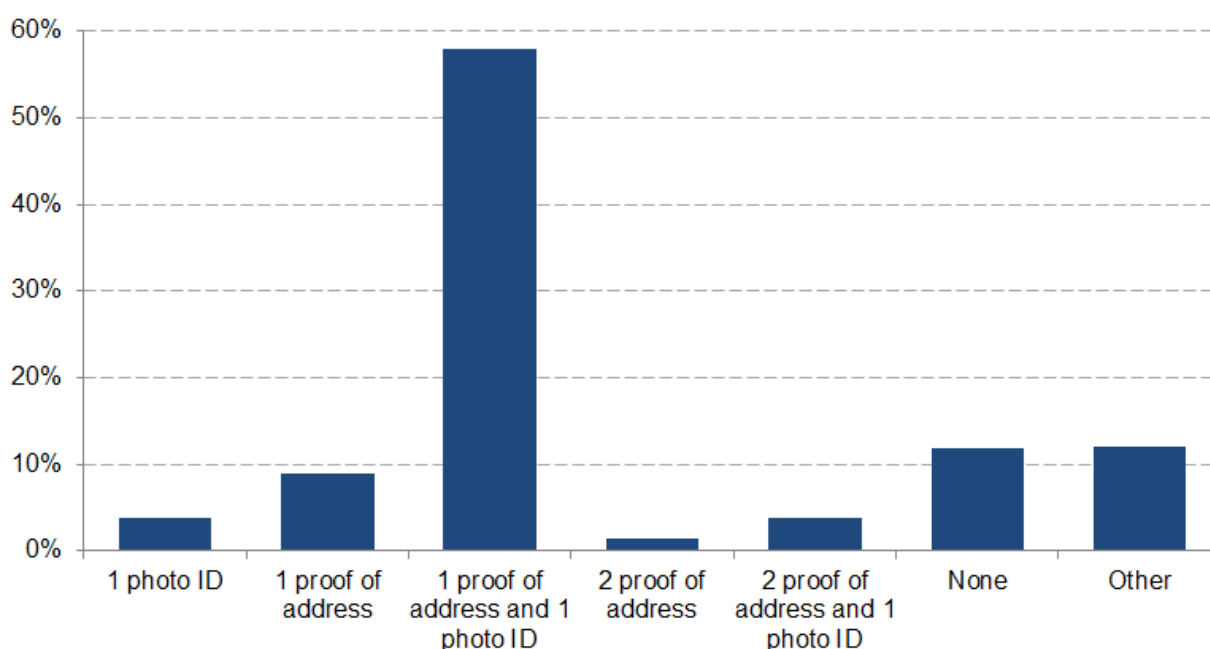
Our findings reveal significant variation in document requirements, not only from surgery to surgery, but also in terms of the information provided online by a GP surgery and the information provided over the phone. The overall story that

⁷Citizens Advice based in more rural areas were not always able to survey 15 - 20 GP surgeries due to the fact there were fewer surgeries based locally.

emerges from our survey is of pockets of excellent practice, and an opportunity to spread this practice more widely.

Our survey began by asking GP surgeries what type of ID was required when registering as a new patient. As Figure 1 shows, document requirements vary substantially. Whilst 58 per cent of GP surgeries request both proof of address and photo ID, a substantial minority asked for fewer documents. Nine per cent of GP surgeries request one proof of address only and four per cent request one photo ID only. Twelve per cent of GP surgeries had no document requirements.⁸

Figure 1 Breakdown of GP surgeries according to document requirements



Source: Citizens Advice research, 2015

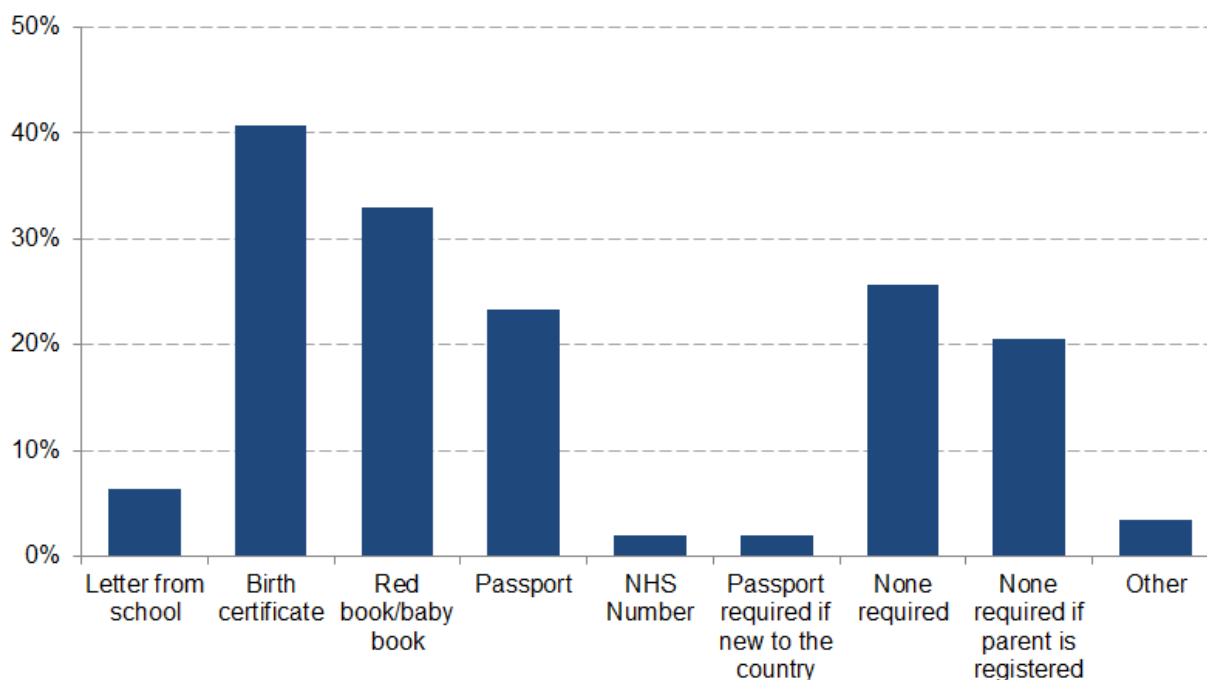
Of those surgeries that requested some form of ID or proof of address, the most common requirements were a passport, driving licence or utility bill. Some GP surgeries were more flexible, suggesting that they would accept a bus pass or a student union card as a form of ID. This flexibility is interesting in light of the high cost of official forms of photo ID and the number of our clients who do not have access to a utility bill (for example, those who are living with parents or friends).

As well as asking about adult registration processes, we enquired about the registration requirements for children. Here we saw even more variation as highlighted by Figure 2. A quarter of GP surgeries have no document requirements for children and a fifth of GP surgeries have no document requirements for

⁸ A couple of GP receptionists explained that they could use NHS Spine to confirm patients' details and therefore did not need ID. More information about NHS Spine is available here: <http://systems.hscic.gov.uk/spine>

children if their parent is registered. Where GP surgeries requested documents, the most common requirements were a birth certificate, a 'red book' and/or a passport.

Figure 2 Documents accepted by GP surgeries when registering children



Source: Citizens Advice research, 2015

We asked local Citizens Advice to report back on the receptionist's level of knowledge about registration processes. Findings in this area were mixed. Some receptionists were well informed, but others were unsure about registration processes and had to refer to colleagues or said to call back when the practice manager was available. The following comments, taken from our survey results, were typical:

"Practice partner not available, receptionist not able to answer."

"Advised wasn't sure what they would do in this situation as woman who usually registers was not at the surgery today"

"Said we would have to speak to practice manager who is unavailable."

How flexible are GP surgeries when someone doesn't have the right ID?

We know well from our day-to-day advice work that ID requirements are difficult for many people to meet. It is common for our clients, particularly those living on low incomes, not to have photo ID in the form of a passport or driving licence. Likewise, many - particularly those living in the private rental sector or staying with parents or friends - find it hard to obtain a utility bill as proof of address. Our

survey of patients confirms that document requirements are a common source of confusion and frustration. Not all respondents have access to the documents required to register:

“I am a single mum with two young boys and I have recently moved. I have been told I cannot register with a doctor because I don't have a driving licence nor a passport. I have no GP at all and cannot get an appointment with a GP. I am English and was born in South East of England and have lived here all my life.”

“I can't register with my GP practice because I don't have photo ID. I do not wish to drive or travel by plane but I'm being forced to buy a driving licence.”

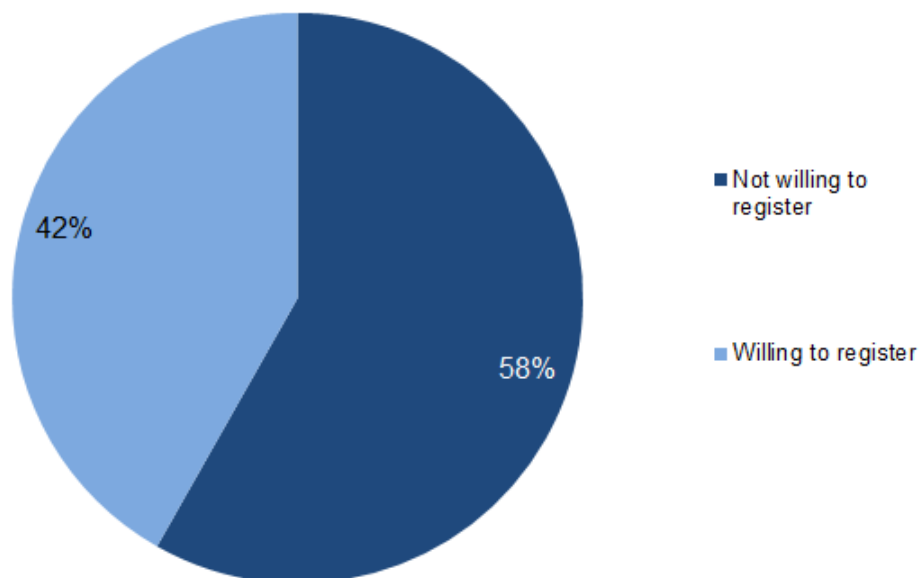
“I am 23 and living at home with parents, the only address ID I had was a driving licence and a CRB check letter for my job. GP wouldn't accept either - I am not the bill payer at home, my parents are, so didn't have bills. I had just moved from the US after a year so had yet to set up a UK bank account. Why wouldn't they accept a driving licence, passport and CRB letter as ID?”

In light of these frustrations, we sought to understand how flexible GPs are when people do not have access to their recommended forms of ID. Again, the story was of variation, with some processes proving accommodating and responsive while others were less so. As Figure 3 shows, whilst four in ten GP surgeries were willing to register people without proof of address or photo ID, the majority of GP surgeries said they could not register people if they did not have these documents. Furthermore, a number of GP receptionists were unaware of the difficulties people encounter with ID requirements and denied that requesting proof of address or photo ID could prove problematic for people, revealing a lack of awareness of people's differing circumstances, saying, for example:

“Everybody would have some form of ID”

“Advised they did not think a patient would have no ID”

Figure 3 GP surgeries willing to register people without proof of address/ photo ID



Source: Citizens Advice research, 2015

Some GP surgeries, however, proved more flexible. For instance, one GP receptionist suggested that the person could produce their ID at a later stage when having a health check, while another explained they would accept a signed letter from a Citizens Advice adviser. Some GP receptionists were sensitive to the fact that not everyone finds it easy to produce proof of address:

“The receptionist seemed well informed of people's different circumstances. She named an example of a man who is currently living in a hotel and explained how he got a letter from his landlady confirming he was staying in the area.”

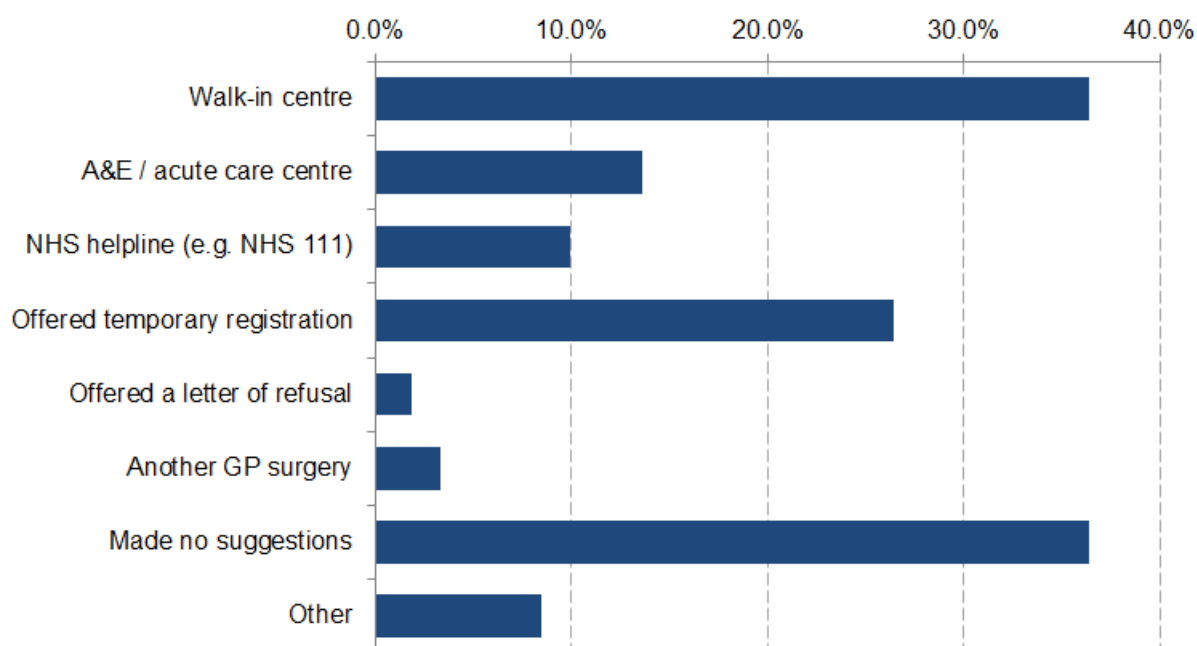
“The receptionist told me that the practice partners had recently called a meeting to discuss waiving document requirements for people in extenuating circumstances. She mentioned in particular elderly people living with their children - their situation is unlikely to change and it would be short sighted to prevent them from accessing healthcare in this case.”

Other suggestions included asking the prospective patient for a supporting letter from the owner of the property in which they were living.

What advice did receptionists give when patients can't register?

One of our initial motivations for this research was a concern that inflexible or confusing registration processes could be guiding people to the wrong parts of the healthcare system. As Figure 4 shows, we found that GP receptionists who were unable to register a patient varied in the advice they gave. A quarter of receptionists offered to register people as temporary patients and just over a third signposted those without the right documents to walk-in centres. Meanwhile one in ten GP surgeries signposted people to an NHS helpline, such as NHS 111, while others suggested the person try another GP surgery or a minor injury unit. However, over a third of receptionists in these cases made no suggestions and one in seven surgeries signposted the person to A&E or an acute care centre.

Figure 4 Healthcare services signposted when a GP surgery is unable to register a patient



Source: Citizens Advice research, 2015

Online guidance about the registration process is frequently inaccurate

In the last decade there has been a rapid shift towards online services. We see this in our own work; our website now gets 21.7 million hits a year, up 51 per cent on last year alone. As part of our research we therefore also considered the online GP registration offer and online information provision.⁹ We assessed the difference

⁹ GP services are already improving their digital offer in several ways. From March 2015, the Patient Online programme placed contractual obligations on GP services to offer online booking of

between online information and information provided over the phone and we also asked surgeries whether it was possible to pre-register online. We found that information provided online often conflicts with information provided by the GP receptionist over the phone. More positively, four in ten GP surgeries (42 per cent) now offer the ability to pre-register online, while a small vanguard of one per cent of surgeries offered full online registration.

When it came to information about registration processes, we began with the NHS Choices website. The NHS Choices website acts as a portal for GP services, enabling patients to identify their nearest practices, check details such as whether a surgery has an online appointment booking facility, and read performance ratings from other patients. Around one in ten of the surgeries we surveyed provided information about their registration process through this website.

GP surgery websites themselves were typically more comprehensive. In cases where our research volunteers were unable to locate the information on NHS Choices, the information could be found on 61 per cent of the GP surgeries' websites. Local Citizens Advice could not find information about registration requirements for 35 per cent of GP surgeries that were surveyed.

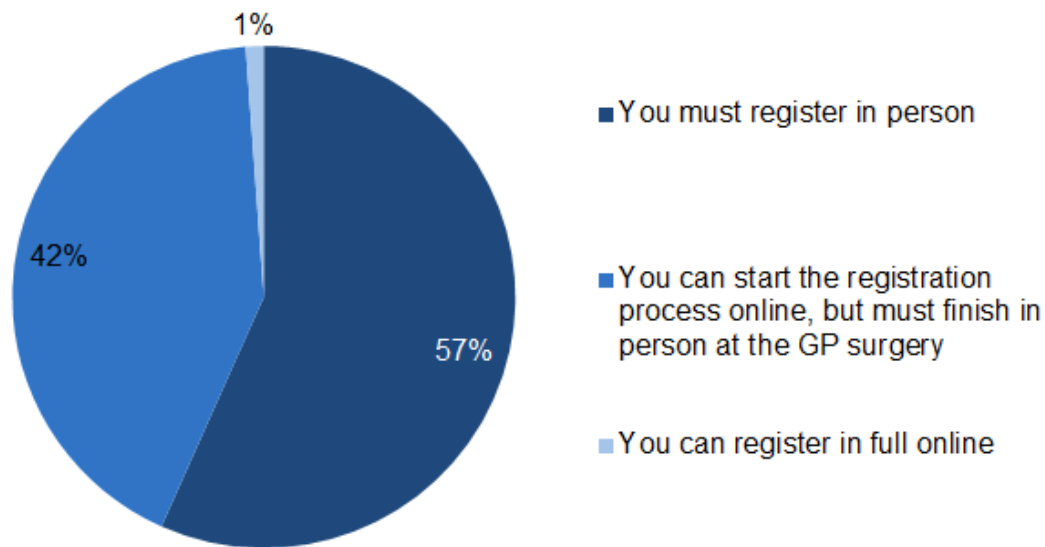
We also found significant variation between data provided online and over the phone. The guidance provided online about a GP surgery's ID requirements matched information provided over the telephone in only 67 per cent of cases. As one Citizens Advice Social Policy Researcher explained:

“We felt that there were such discrepancies between the published information and what the receptionists told us, and such a wide variation between the responses, that we probably could not conclude much about any specific clinic - it would depend so much on which receptionist was on duty when someone presents.”

Finally in this section, we asked whether it was possible to pre-register online. Four in ten GP surgeries offer this service, allowing patients to download and complete registration forms in advance. This enables people to minimise the time spent in the surgery and check they have all the correct information to hand. Impressively, a small number of surgeries now offer registration in full online.

appointments, ordering of repeat prescriptions and access to summary information held in patients' records. Patient Online, however, does not look at GP registration processes and not all GP services met the deadline.

Figure 5 GP surgeries according to method available when registering

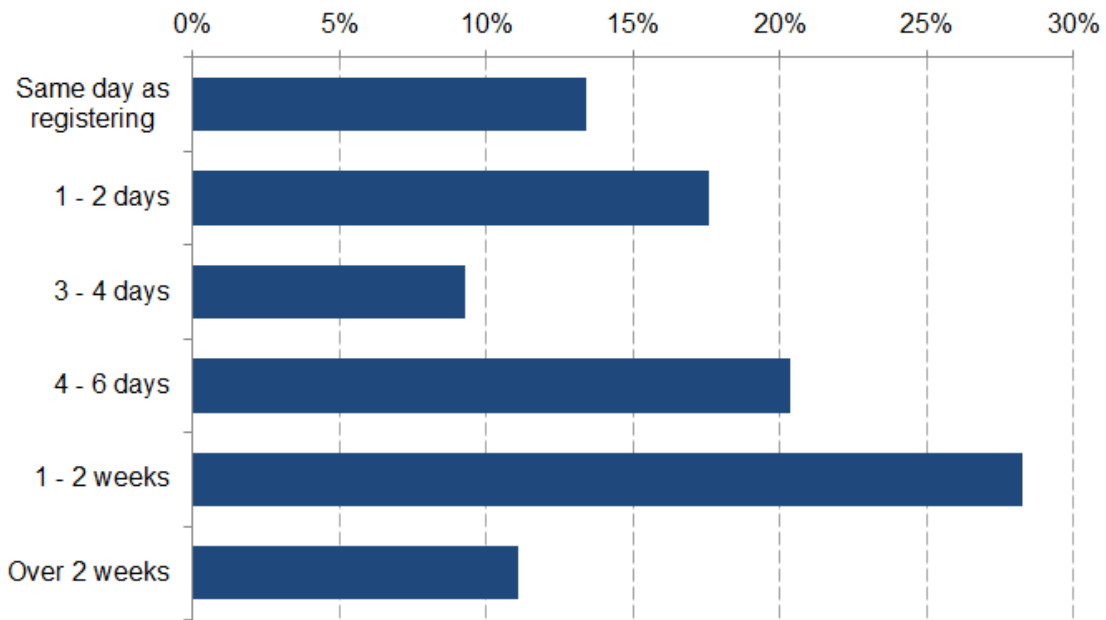


Source: Citizens Advice research, 2015

Registering with a GP can involve multiple trips to the surgery

In the last main area of this research, we wanted to explore the convenience of registering with a GP, both in terms of time and location. Our findings reveal that it is common for new patients to have to visit a GP surgery on multiple occasions to complete the registration process. Half of all GP surgeries reported requiring health checks for newly registered patients. In some cases this meant new patients had to visit a surgery two or three times before seeing their GP for an appointment. Some of our patient respondents reported finding this difficult, for example due to the pressures of caring responsibilities or work.

Figure 6 GP surgeries according to length of wait for a compulsory health check



Source: Citizens Advice research, 2015

As Figure 6 shows, where surgeries required health checks, 13 per cent allowed the health check to take place on the same day as the registration. However, in 41 per cent of cases, a health check required a repeat visit, with a wait of at least a week. In 11 per cent of cases the patient would have had to wait over two weeks to go through this process. Some patients reported to us that they appreciated the opportunity to have a health check. As one respondent to our online survey explained:

“The only reason the process took so long was because they invited me for health checks/screening as part of the process. I viewed this as good/helpful.”

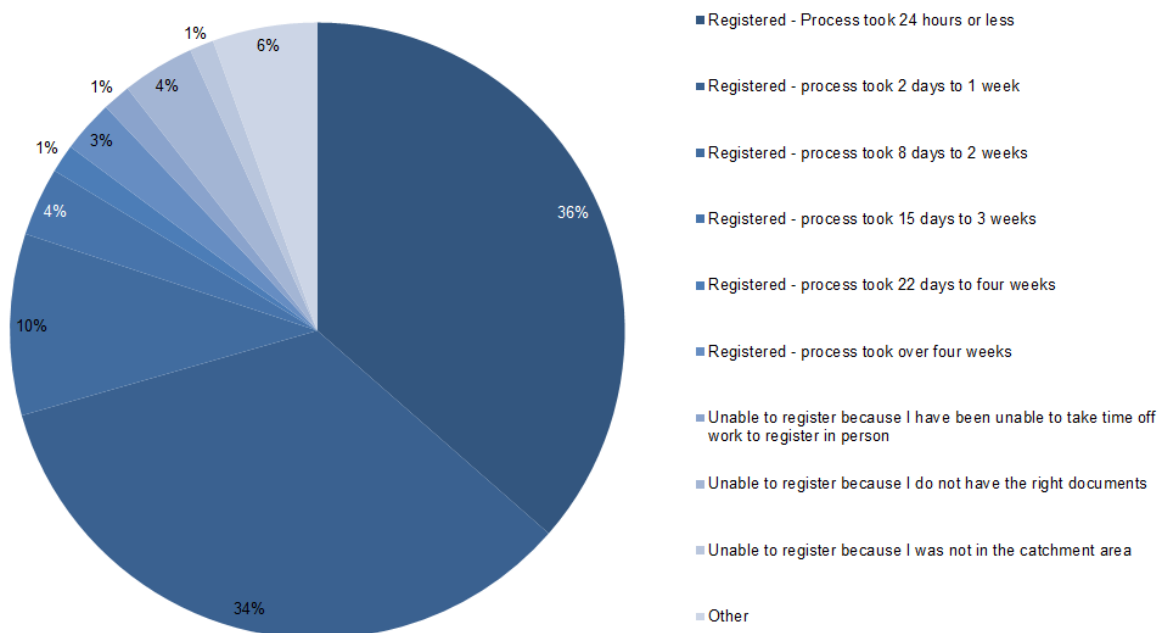
Others found the delays associated with a health check frustrating:

“I was told to go away and come back on first attempt as the receptionist was too busy. Then I had to complete a check up with the nurse before I was allowed to book an appointment with a doctor. Essentially I had to visit the surgery four times in order to get the doctor's appointment I wanted.”

“Had to take time off to go into the practice, then again to come back for an initial checkup. This was inconvenient but the actual registration itself was easy.”

In all, however, the findings from our research tell a positive story about the time it takes to register with a GP. Twenty-eight per cent of GP surgeries surveyed told us they offer same-day registration and over a third (36 per cent) of the patients we surveyed said their registration process took 24 hours or less. A further third of patients told us the process took between two days and a week. A significant minority, however, took longer, with ten per cent of respondents saying the process took eight days to two weeks, and eight per cent saying it took 15 days or more.

Figure 7 Length of time taken by online survey respondents when they last registered with their GP



Source: Citizens Advice online survey, 2015

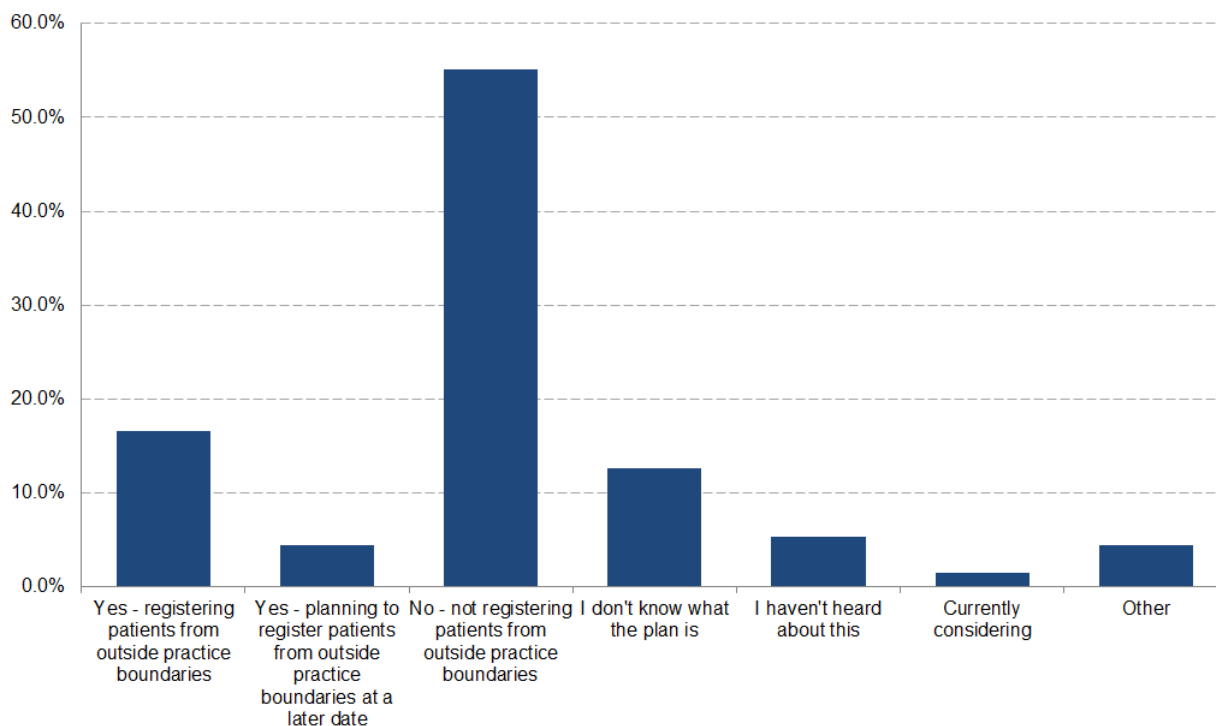
Finally, we wanted to explore whether GPs were planning to use new powers to register patients further away from their practice. Since January 2015, GP surgeries have had the option of registering new patients from outside their traditional practice boundaries. This power was extended to GP surgeries with a view to enhancing flexibility for patients, for example, by allowing patients to register with a GP near their work rather than near their home, or by allowing patients to re-register with a GP after moving away to a new area.

In our research only around a fifth (21 per cent) of GP receptionists knew of plans to use these new powers. One in six respondents (17 per cent) said their surgery was already registering out of area patients and a further four per cent said there were planning to use the new powers at a later date. These findings differ somewhat to recent statistics published by NHS England, which suggested that nearly 40 per cent of GP practices intend to register patients from outside their boundaries.¹⁰ Our results are likely to reflect a mix of limited appetite from GP surgeries themselves and limited awareness of these plans among GP

¹⁰ Matthews-King, A, (2015) 'Almost 40 per cent of GP practices accept out of area patients', *Pulse*

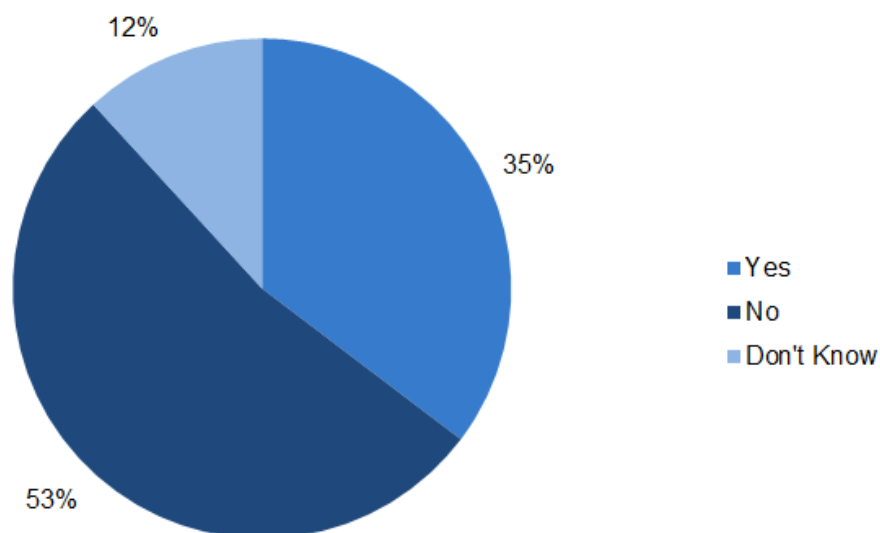
receptionists, who in some cases might not be informed of plans that are underway. One in five GP receptionists had not heard of the policy or did not know about the surgery's plans. Just over half (55 per cent) of the GP surgeries we spoke to told us they were not registering patients from outside practice boundaries. The flexibilities are, of course, very recent and it will be interesting to see whether awareness and interest increases over time.

Figure 8 Breakdown of GP surgeries according policy for registering patients from outside practice boundaries



Our patient survey findings, shown in Figure 9, suggest there is an appetite for more flexible GP registration boundaries among patients, although it is important to remember that our sample is made up of users of our website and may not be representative of the patient population as a whole. Nonetheless, over a third of our survey respondents told us they would like to be able to register with a GP practice further from home.

Figure 9 Online survey respondents according to whether they would like to be able to register with a GP surgery further from home



Source: Citizens Advice online survey, 2015

Respondents also explained why such flexibility would be helpful:

"I have only moved three miles and now need to leave the surgery I have been registered with since 1986! Shame."

"I tried to register at GP surgery in [location 1] but was advised that I did not reside in the catchment area, so I had to register at [location 2] instead. As I use public transport this causes difficulty - I can catch a regular bus to [location 1] and arrive in approx 20 minutes, but to get to my surgery I have to catch two buses which can take approx two hours. If I/my children need a GP appointment it is an all-day trip."

"I searched on NHS Choices to check the patient ratings for GPs in my new area. I was horrified to note how many surgeries in the area were rated "Among the Worst". Only one was rated "Among the Best" but this was too far away. All the rest were rated "OK". This did not inspire me with confidence in changing from an excellent GP surgery."

Appetite for this flexibility varied significantly by age group. Half of the respondents aged 18 to 34 told us that they would like to be able to register with a GP further from home compared with only one fifth of those aged 65 and over. This finding is consistent with our earlier research into young people's shifting preferences and

the need for GP services to adapt to evolving expectations.¹¹ In this earlier work we found that people's preferences for accessing GP surgeries are dramatically different among younger adults, who had satisfaction levels roughly half that of older people and found it roughly twice as hard to secure an appointment. These changes preferences may partly reflect changing patterns of housing tenure and work:

"I'd like it to be possible to register with a GP near where I work as people in rented accommodation move around quite often."

"Being able to register near work would... be very helpful."

¹¹Caper, K. and Plunkett, J. (2014) 'Evolving expectations of GP services', *Citizens Advice* December 2014 <https://www.citizensadvice.org.uk/about-us/policy/policy-research-topics/health-and-care-policy-research/evolving-expectations-of-gp-services/>

Conclusions and opportunities

We first conceived of this research after local Citizens Advice told us their clients were struggling to register with a GP. Our clients were finding the process complex and confusing, and anecdotes suggested big variations across the country. With the health system seeking substantial efficiencies in the new parliament, this felt like the right moment to reflect on whether the GP registration process was as streamlined as possible. Our hypothesis was that a simpler, clearer registration process could help, in a small but practical and low cost way, to improve the patient experience while also reducing demand on GP receptionists and emergency healthcare services.

Our findings support this hypothesis, suggesting that there are several opportunities to improve the registration process.

First, there is an opportunity to share good practice between GP surgeries. There are particular opportunities to:

- **Improve the online offer:** many GP surgeries now offer online pre-registration, reducing the time spent in the surgery registering. Some even offer full registration online. Some are better than others at keeping their NHS Choices profile information, and their own website, updated with the latest accurate information. These may seem like details, but they are important to the patient experience.
- **Reduce the amount of time it takes to register:** Some GPs allow patients to take their initial health check at the same time as registering, or immediately before a first GP appointment. This again reduces the number of times a new patient has to visit a surgery before seeing a GP.
- **Increase the flexibility of document requirements:** The GP registration process is an important checkpoint for the prevention of fraud. But some GP surgeries have found ways to maintain security while being flexible for patients who do not have documents such as utility bills. These flexibilities extend to children, particularly where a parent has already met strict ID requirements.
- **Support receptionists to respond to people's differing circumstances and needs:** GP receptionists are vital to the patient experience. There are

opportunities to improve understanding of registration requirements, flexibilities and maintain up to date local information to signpost new patients when they cannot register permanently, for example signposting non-emergency cases to a walk-in centre rather than A&E.

Second, there is an opportunity to respond to patient demand by opening up GP registration beyond traditional catchment areas.

As we have shown in previous research, people's expectations of GP services are changing.¹² There is clear demand for more flexible GP registration boundaries, particularly among younger patients. Our survey suggests that a minority of GP surgeries are currently using or planning to use new powers to register patients outside of their traditional catchment area. Wider social trends, from the growth of short-term private rental sector accommodation to an increasingly fluid labour market, suggest that demand for flexible boundaries will only grow. We would encourage GPs to use these new powers.

In addition, there is a good case for updating the NHS Choices website to include information about which GP surgeries are accepting patients from outside traditional practice boundaries. GP surgeries should ensure this information is kept up to date and the NHS Choices site should allow patients to search for GPs offering this facility.

Finally, there is a wider question about how performance monitoring could encourage a more streamlined GP registration process.

The Care Quality Commission (CQC) assesses GP practices according to how responsive and well-led they are, amongst a range of other indicators. A flexible and streamlined registration process should be a part of this. Any attempts to drive improvements in this way would need to be balanced with the need for local variations and flexibilities. But we would be happy to work with the CQC to identify ways in which good practices could be shared.

¹² *ibid.*

Our aims

To provide the advice people need for the problems they face.
To improve the policies and practices that affect people's lives

Our principles

The Citizens Advice service provides free, independent, confidential and impartial advice to everyone on their rights and responsibilities. We value diversity, promote equality and challenge discrimination.

Lizzie Greenhalgh, Sarah Mercer & James Plunkett
June 2015

www.citizensadvice.org.uk

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