GENERAL PRACTICE OBSERVED

An Appointment System Service for General Practitioners:
Its Growth and Present Usage

BRUCE CARDEW, L.M.S.S.A.

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"An appointment system has completely altered our lives; it has brought order out of chaos and we can never cease to wonder how we endured our old ways so long."

This paper provides an analysis of the use to which a particular appointment system service given to N.H.S. general practitioners has been put during the past seven years. The launching of the service was undertaken not with the idea that it would provide subsequent material for research but solely to help general practitioners. Nevertheless, this retrospective approach does provide information which will, I believe, be of interest to those concerned with the changing pattern of general practice in this country.

History

In 1959, when I was editor of the *Medical World*, it was thought desirable by my colleagues that guidance should be offered to general practitioners who wished to introduce an appointment system into their practices. Since little information had been published on the subject, we had to look to the experience gained by individual practitioners who had themselves run appointment systems over a period of years. Seven doctors were approached to form a committee to pool their experience and draft a handbook of advice. It was later agreed to make a short discussion film, "Appointment Systems in General Practice," based on the recommendations in the handbook.* The cost of making the film and printing the handbook was generously borne by Messrs. Lloyd-Hamoll Ltd., who decided also to provide any interested general practitioners with an appointment diary and a continuing supply of sheets. This service is referred to in the article as the A.S. Service.

At first the demand for the A.S. Service was small. It grew gradually until a fresh impetus was given by the introduction of the new method of payment for general practitioners under which a substantial part of the cost of employing receptionists

TABLE I.—Approximate Number of G.P.s Using the A.S. Service at End of Each Year

1961	1962	1963	1964	1965	1966	1967 Oct.
250	700	1,500	2,300	3,200	4,500	7,840

was met by direct repayment. Since the presence of a receptionist is a virtual sine qua non in the introduction of an appointment system the recent increased demand is readily explained. The rate of growth of the A.S. Service is shown in Table I.

Evaluation of the A.S. Service

Late in 1966, when it became clear that a large number of practices were already using the service and that the demand

* A *Medical World* film distributed by the B.M.A. film library and by Sound Services Ltd.

was likely to increase, I felt that the time had come to reappraise the advice offered in the handbook in the light of the practical experience gained by thousands of doctors who had used the recommended system. A questionnaire was sent to all continuing users asking for suggestions for modification, however minor.

The response rate was 85%, and the forms were sent to the Gallup Poll for analysis. The publication here of the results would not be of general interest, but I can say that 87% expressed positive or tacit approval of the existing system. The suggestions for modification mostly related to the time allowed on the appointment sheets for seeing a patient. Some wanted a longer period, others a shorter one. No group represented more than 1% of the total number questioned. The conclusion which emerged was that the A.S. Service met to a very large extent the requirements of the various types of practice in which it was used. I have no doubt, however, that some doctors, having used the service and having for some reason found that it was unsatisfactory, abandoned it and introduced some variation more to their liking. These doctors would not have received our questionnaire, and their views would not be revealed in our records.

How Many Practices Run An Appointment System?

In Table II are set out the number of doctors in each English county and in Scotland, Wales, and Northern Ireland using the A.S. Service. In the left-hand column is included for comparison the number of N.H.S. general practitioners practising mainly in the area concerned. These numbers are not identical with those shown on local executive council lists, because doctors often practise in several adjacent areas and their names appear on two or more lists. The users of the A.S. Service are divided into those providing a full appointment system to their patients and those providing a partial system. This is clearly an arbitrary distinction and needs explanation. It was decided to call any system "full" where over 80% of surgery consultation periods were available for seeing patients by appointment. Where the percentage was less than 80% doctors were asked to estimate the percentage of patients seen by appointment. An analysis of their replies is set out in Table III. Many expressed their intention of extending the use of the system as soon as circumstances permitted.

Table II also gives the relevant percentage figures of use of the A.S. Service in each county and region.

Discussion

Table I shows that there has been a large increase in the number of appointment systems introduced by N.H.S. general practitioners in recent years. The figures given here relate solely to one particular service and should not be equated with the total use of appointment systems in the country. Unfortunately there are no official sources of information available to complete the picture. Evidently there must be many

practices running appointment systems of their own design which are not taken into account in this article.

Using the figures given in Table II as minimum ones and allowing for some hundred additional practices using other systems, one can say with certainty that *a third of all N.H.S. practices are offering a complete appointment system to their patients.* This means, in effect, that at least 17 million patients can now see their family doctors by appointment.

TABLE II.—General Practitioners Using the Appointment System Service as at 31 August 1967

Standard Region	No. of N.H.S. G.P.s	Doctors Using Full Appt. Syst.		Doctors Using Partial Appt. Syst.	Total Users	% of Total Users to N.H.S. G.P.s
		No.	%			
1 and 2. Northern:						
Cumberland ..	129	70	54	5	75	58
Durham ..	525	248	47	14	262	50
Northumberland ..	327	155	47	20	175	54
Westmorland ..	31	12	39	2	14	45
Yorkshire (whole) ..	1,828	411	22	59	470	26
	2,840	896	32	100	996	35
3. North-Western:						
Cheshire ..	587	174	30	25	199	34
Derbyshire (whole) ..	250	73	29	7	80	32
Lancashire ..	1,967	458	23	63	521	27
	2,804	705	25	95	800	28
4. North Midland*:						
Leicestershire ..	242	80	33	7	87	36
Lincolnshire (whole) ..	304	65	21	7	72	24
Northamptonshire ..	150	59	39	1	60	40
Notts ..	339	187	55	18	205	60
Rutland ..	10	—	—	—	—	0
	1,045	391	37	33	424	38
5. Midland:						
Hereford ..	49	27	55	4	31	63
Shropshire ..	115	43	37	1	44	38
Staffordshire ..	566	196	35	20	216	38
Warwick ..	786	258	33	32	290	37
Worcestershire ..	196	100	51	—	100	51
	1,712	624	36	57	681	39
6. Eastern:						
Beds ..	144	75	52	1	76	53
Cambs† ..	112	38	34	3	41	37
Essex (whole) ..	660	259	39	24	283	43
Herts (whole) ..	364	133	38	26	159	44
Huntingdon ..	25	8	32	5	13	52
Norfolk ..	238	61	26	18	79	33
Suffolk ..	195	82	42	15	97	50
	1,738	656	38	92	748	43
7. London and S.E.‡:						
Kent ..	704	260	38	31	291	41
London (whole) ..	2,198	384	17	52	436	20
Middlesex ..	458	54	12	12	66	14
Surrey ..	653	242	38	19	261	40
Sussex (whole) ..	510	148	29	17	165	32
	4,523	1,088	24	131	1,219	27
8. Southern§:						
Berks ..	234	105	45	1	106	45
Bucks ..	197	83	42	4	87	44
Hants ..	623	285	46	23	308	49
Oxon ..	149	73	49	6	79	53
	1,203	546	45	34	580	48
9. South-western:						
Cornwall ..	169	25	15	4	29	17
Devon ..	391	100	26	6	106	27
Dorset (whole) ..	163	38	23	—	38	23
Gloucestershire ..	452	158	35	17	175	39
Somerset ..	239	96	40	17	113	47
Wiltshire ..	159	58	38	5	63	40
	1,573	475	30	49	524	34
England Total ..	17,438	5,381	31	591	5,972	34
Wales (whole) ..	1,129	253	22	38	291	26
Scotland (whole) ..	2,502	730	29	88	818	33
N. Ireland ..	714	158	22	22	180	25
Channel Islands ..	139	12	9	—	12	9
Grand total (U.K.) ..	21,922	6,534	30	739	7,273	33

* Excluding part of Derbyshire included in Region 3. Peterborough is included in Northants.

† Including Isle of Ely.

‡ Excluding parts of Essex and Herts already in Region 6.

§ Excluding part of Dorset and the Isle of Wight included in Region 9.

The recent striking increase in the introduction of appointment systems (2,000 additional doctors have adopted the A.S. Service during the last nine months) suggests that within a few years the great majority of general practitioners will see all patients by appointment.

The geographical distribution of the use of appointment systems is shown in Table II, and raises questions of interest. Why should Cumberland and Westmorland show a high rate of usage, whereas Cornwall, Devon, and Dorset show a low rate? Why are the figures for London and Middlesex disproportionately low, whereas those for the adjacent counties of Surrey, Essex, and Herts are above the average? At first sight one might assume that factors associated with urban and rural practices could explain the differences, but an analysis of the figures by county does not bear out such an assumption. Fortuitous circumstances may explain some of the differences. If one or more go-ahead practitioners in an area introduce an

TABLE III.—Percentage of Patients Seen by Appointment in Practices Running a Partial Appointment System

	5-10%	11-25%	26-45%	46-65%	65-79%	Total
No. of doctors ..	69	165	193	114	57	598*
% of total ..	12	28	32	19	9	100

* This figure is not the same as that shown in Table II because some doctors did not reply to the question.

appointment system the tendency may well be for others to follow suit. In other areas no such stimulus may be present. One thing is quite certain—appointment systems can be successfully run in the slums of the great towns, in rich residential areas, and in remote country regions.

This article makes no attempt to describe the system recommended by the Appointment System Committee. Neither does it seek to evaluate the benefits of an appointment system to doctors or patients. This task has been undertaken by the Unit of Biometry of Oxford University in their report, *Appointment Systems in General Practice*, recently published by the Nuffield Provincial Hospitals Trust. I commend this report to anyone interested in the organization of general practice. Nevertheless, I must also mention the many hundreds of letters of appreciation sent by users of the A.S. Service. One of the recurring phrases which appear in these letters is reproduced at the head of this article.

My personal view is that an appointment system, after a few months, almost invariably improves the doctor-patient relationship, helps partners to work more closely together, and establishes a framework of orderly practice in which other new developments may take place.

Summary

The problems of appointment systems in general practice were considered by a committee of the *Medical World*, and a system was devised which formed the subject of a handbook.

A service based on the recommendations in the handbook was offered to N.H.S. general practitioners free of charge by Messrs. Lloyd-Hamol Ltd. The growth of the service and the extent of its present usage are described. Some of the associated problems are discussed.

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