Is A Lack of GP Appointments Affecting Patient Health in England?

On 14th May 2023 Amy Butcher from Lowestoft took her own life after being refused a request for repeat medication for her mental health. During the inquest at Suffolk Coroner's Court, the struggles Amy faced in making changes to her medication were highlighted. This involved her contacting her GP, NHS 111 and the out-of-hours GP service. Had Amy been able to contact her GP she might still be alive today.

An article by the Daily Mail exposed how GP online booking systems stopped patients from seeking medical help, leading to deaths. In response, Stephanie Prior, a lawyer at Osbournes, said "GP's are failing to diagnose serious conditions in a timely fashion".

One respondent to a survey conducted in February 2025 said, "My mother wasn't diagnosed with her heart condition due to not being able to get an appointment, and her condition went undiagnosed until she had a heart-attack and was admitted to hospital for tests". Another said, "There is no continuity of care, leading to a misdiagnosis for my partner."

Lesley Stuart-Brace said trying to get a GP appointment where she lives is "a right pain in the backside." Julian Pannel said it is "a nightmare," and Margaret Kerr says it is "difficult." They are not the only people who feel this way: a third of patients said that contacting their GP was difficult, according to a study by IPSOS in 2024. In July, newly appointed Health Secretary Wes Streeting was visiting a GP surgery in London when he committed to increasing NHS resources going to primary care to ensure patients access the care they need.

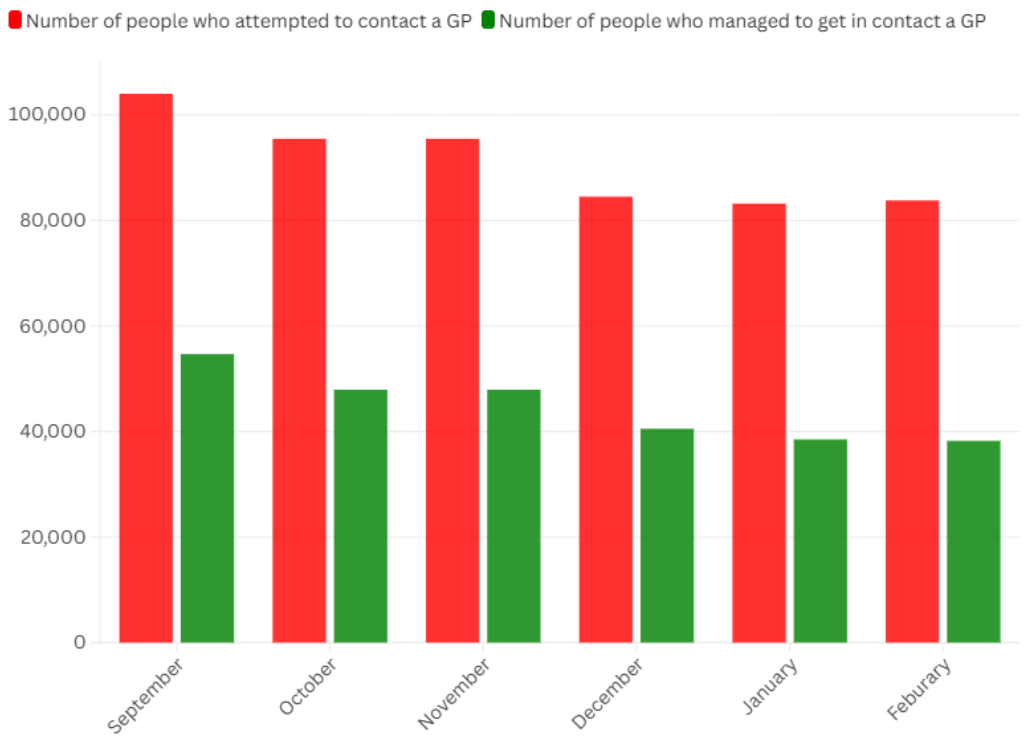

Table 1: Made by Amy Woodward/Data from ONS

In 2015 the average number of full time GPs per 1000 patients was 0.58. Nearly 10 years on, NHS general practices have decreased by 20%, while the average practice patient list

increased by 40%. This means there are now only 0.45 full time GPs per 1000 patients, and in some parts of the country one in 15 people wait more than a month to see their GP.

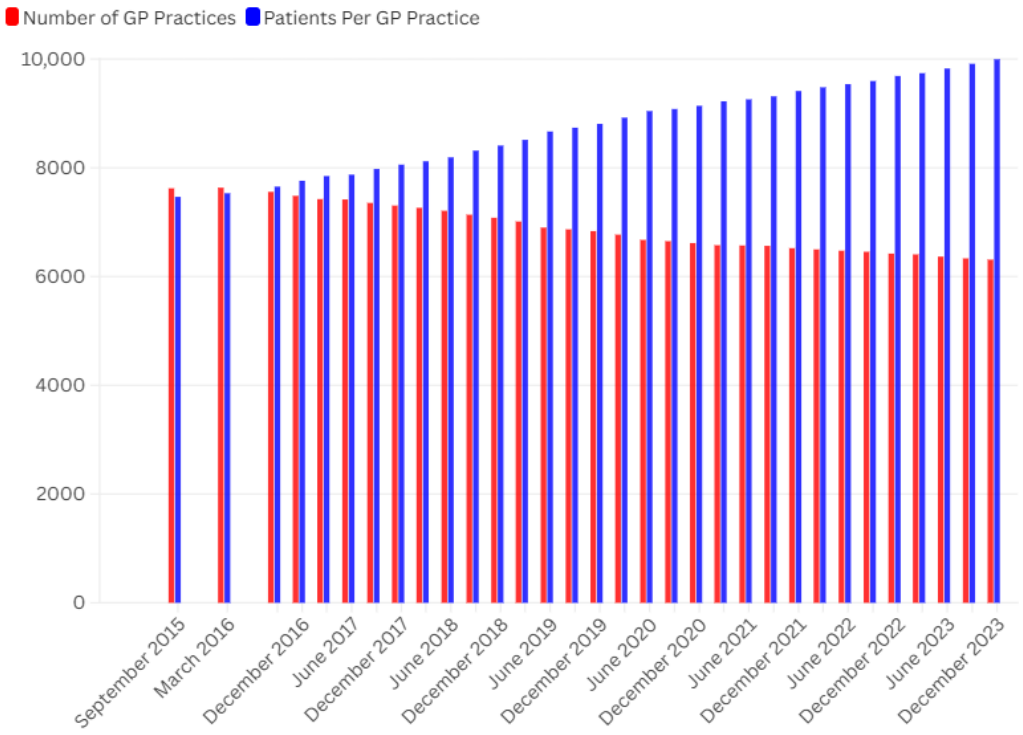

Table 2: Made by Amy Woodward/Data from ONS

In September 2022, qualified GPs and other multidisciplinary 'direct primary care' roles each represented 19% of the work force, with administrative roles representing 51%, according to research conducted by University College London. This study was led by Dr Luisa Pettigrew from London School of Hygiene & Tropical Medicine, who told the NHS, "General practice in England appears to be in a period of transition, from the smaller partnership-based model of general practice to that of larger organisations with more administrative and multidisciplinary staff but fewer GPs".

When the NHS was first set up patients would go and wait to be seen by a GP with no appointment system in place. In the 1960s, appointment systems were put in place, with targets set for patients to be seen by a GP within 48 hours. Now, patients can book appointments, order repeat prescriptions, and get advice online, taking pressure off GPs and practice staff.

ii: Picture by Amy Woodward

Lesley Stuart-Brace from Suffolk said to book an appointment at her GP surgery “you have to go on to a site called Amina, but we all call it Enema because it is a right pain in the backside trying to get on it and when you do get on it, you very rarely get a reply”.

Lesley used to work at a GP surgery as a receptionist and said when she worked there, she knew “when you phoned in for an appointment at eight o'clock, you were given a morning appointment. But there was always afternoon and evening appointments that were there for emergencies. So, it didn't matter whether you phoned in the morning or afternoon, you would still have an appointment.”

Margaret Kerr from Great Baddow says she has to “just hang on and keep ringing” to get a GP appointment. She continued, “If it’s not an emergency or urgent, it can take a couple of weeks. Even if you go online, like they say, to book, you can't get an appointment. The appointment system, especially a telephone appointment, is horrendous because they'll say we will ring between nine and midday, and this means you've got to hang about for all that time”

iii: Picture by Amy Woodward

In England, areas are divided up into Integrated Health Care Boards (ICB) which plan and fund local healthcare. The effect of a decrease in GPs can be seen across the country by looking at the number of patients per GP in a specific area. Wirral in Cheshire and Merseyside ICB has 1818 patients per GP - the lowest amount in England. On the other hand Thurrock in Mid and South Essex has the highest with 3431 patients per GP. In fact, Mid and South Essex has one of the highest levels of patient to GP ratios.

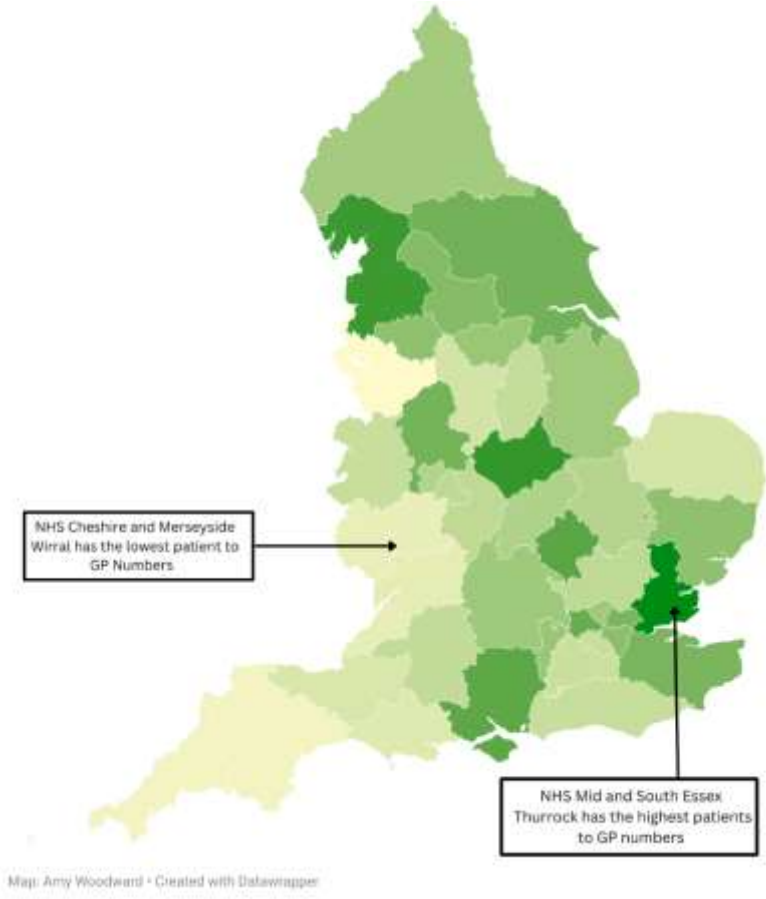

Table 3:: Made by Amy Woodward/Data from ONS

Richard Holden, MP for Basildon and Billericay, says, “primary health care is what constituents write to me most about.” Basildon and Billericay have 2835 patients per GP, and dissatisfaction with GP surgeries in the area has only grown, particularly in the last few months since it was announced that South Green Surgery would be closed, and patients would be merged into a different surgery a mile and a half away.

iv: Video by Amy Woodward

v: Video by Amy Woodward

vi: Picture(s) By Amy Woodward

In response to this closure, Holden took the concerns of his constituents to Parliament where he asked Health Secretary Wes Streeting to meet with him to “see what we can do to ensure that other facilities can be provided if available, or to do the best for those local patients?”

Holden received a short response from Streeting saying it was a matter for local NHS bosses.

As soon as constituents started contacting Holden with concerns about the closure, he contacted the local NHS bosses and was told “don’t worry, we will make sure there is provision at the health centre.”

Holden agrees fully with his constituents and has the same concerns: “One of the reasons I'm pushing back so hard on this is because we've already got those pressures. People already mentioned those pressures. The last thing we want to be doing is seeing those pressures getting worse.”

vii: Video by Amy Woodward

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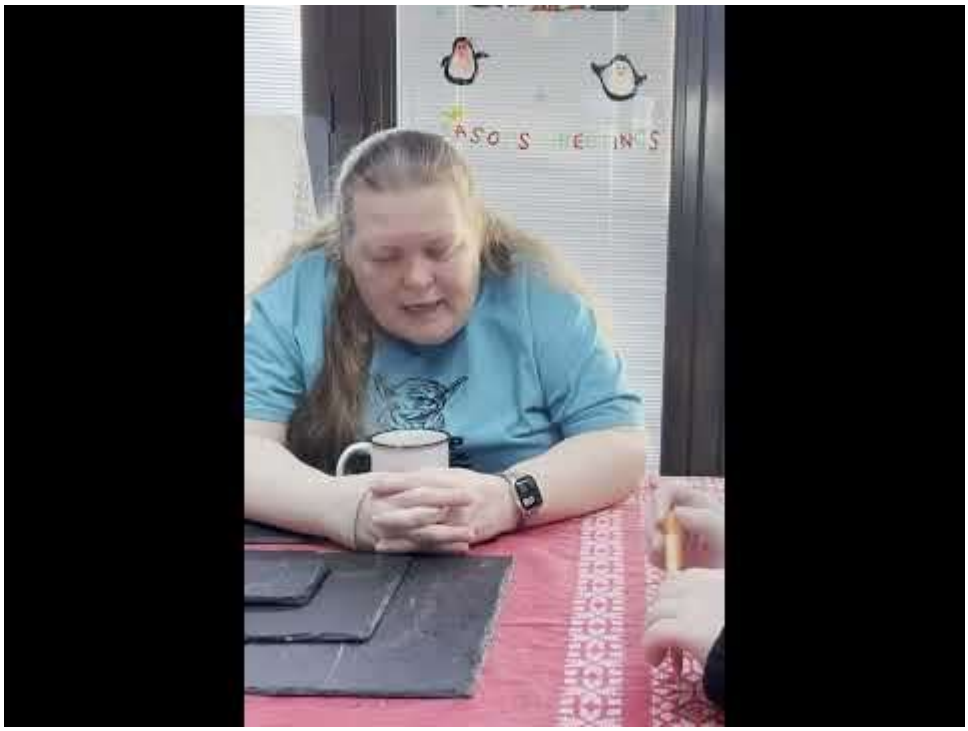
ix: Picture by Amy Woodward



x: Video by Amy Woodward

Clare Larcombe, a resident in Billericay, said that although she didn’t attend either of the surgeries this closure was still cause for concern.

Lesley said, “When they put up new developments, they can always make room for a clinic or a doctor surgery, but they don't because that is going to cost money.”

xi: Picture Provided by John Cormack

John Cormack, a retired GP, said “there are all these new housing developments being thrown up here, there and everywhere but there's very little thought for infrastructure and in particular there's very little thought for is their suitable GP provision, and the answer is no.”

John worked in a surgery in South Wooden Ferris for over 40 years and in that time, he saw multiple generations pass through his care. He said, “I knew their families every time I saw them, I picked up from where we left off, so it was a very efficient way of seeing people.” Seeing the same GP each time has been proven to be beneficial to patients. A review of 1.4 million patients found evidence that seeing the same doctor reduces the risk of being admitted to hospital, going to an emergency department and even death.

Using a deed pool John changed his name to 'Dr John Cormack - the Family Doctor who works for the NHS for free' in protest at GP practice underfunding. He said “nowadays, GPs are so pissed off they are leaving, retiring early, moving abroad or whatever. Surgeries are now moving to having more additional help in practices like physicians, associates and all these types of people.”

At his surgery they implemented a mixed system for appointments, which John said worked very well for the patients as it gave them the option of showing up and being seen or booking an appointment. He explained, “For one hour every morning we did an old-fashioned sit and wait surgery. If you had a problem, you came into the surgery between nine and ten we would guarantee we would see you. The reason we did that was because there was a survey in Which magazine which spilled over to a medical journal called The Drug and Therapeutics Bulletin which showed that patients preferred a mixed system.”

He continued, “The terrible thing in general practices is everyone having to phone at 8am and you don't get through until quarter to nine, and then all the appointments have gone”.

When contacted, The Department of Health and Social Care gave no comment.

There is no doubt that the NHS is suffering. On 8th July 2024 Wes Streeting, the newly appointed Health Secretary, visited a GP surgery in London. He said, “We are committed to bringing back the family doctor, so patients can see the same doctor each appointment, fixing the front door to the NHS.”

On 28th February, Wes Streeting announced a deal with GPs to end the ‘8am scramble’ for same-day appointments. An extra £889 million, an average of £141,628 per GP surgery, will

go to surgeries across England and will be used for staff wages, building maintenance and patients. The deal also means more appointments can be booked online and patients can request to see the same GP. However, there are concerns from some patients about being able to access the online booking system. One person commented “not everyone is computer literate.”

DHSC Tweet

According to a YouGov Survey, 46% of all adults in Britain expect the NHS to get worse in the coming years. Margaret expressed concerns about the lack of GPs in the area working part-time. She continued, “There’re nearly seventy million people in this country. We need surgeries open longer.” She said this leads to more people going to A&E, which affects the quality of care a person can get for an emergency. She explained, “We're not just sick between nine and five. They moan about us all over-using the A&E. But what choice have we got? Nine times out of ten, its reassurance, and anxiety can cause more problems.”

Margaret believes that having minor injury clinics or even closer out of hours GP surgeries would massively help the problems faced, particularly in Mid and South Essex. She said, “What we find in this area, if you ring, the nearest out-of-hours doctor is likely to be in Southend or Colchester. We haven't got anyone available in Chelmsford. So, a walk-in centre would be brilliant. What would be even better in this area? If we had a minor injuries surgery. Otherwise, you can't see a doctor. It's up to A&E.”

Twelve percent of respondents to a survey conducted for this investigation said they wanted to see longer working hours for GPs. Twenty-five percent said they wanted to see more GPs and improved appointment booking. Thirteen percent said they wanted better funding and staff pay, and twenty-five percent mentioned other improvements they wanted to see.

Underfunding of services is one of the biggest reasons the NHS is suffering. In the Autumn Budget, the chancellor announced an increase of 1.2% to employer national insurance contributions, as well as lowering the secondary threshold to £5,000. Despite the recent deal struck between GPs and the Department of Health, these changes will have a significant impact on GP practices. There are a high number of staff employed who earn more than what is needed to get national insurance contributions, leaving surgeries having to potentially pay out thousands without having the money to do so.

John used his own money to pay staff at his surgery in 2015 due to the lack of funding the surgery was getting. He believes that a system of having to pay for missed appointments would help alleviate the burden GP surgeries are facing. He commented, “Whilst I think there's a lot to be said for treatment being available at the point of use, I don't think it should be free at the point of abuse. I definitely think they should introduce a system of charging for the patients who don't show up. If we did introduce a system of people paying for missed appointments that would sort of ease the burdens of the financial struggles the NHS seems to be having, especially with GPs.”

He added, “Nobody suffers if they have to pay for a missed appointment, but people do suffer as a result of people just making appointments and not keeping them, as it prevents others from accessing the care.”

With a reduction in the number of GPs, surgeries, appointments, and funding over the last ten years, is patient health being affected?

In a survey conducted for this investigation in February 2025, not a single respondent said patients health wasn’t being affected.

Clare said, “it's possibly causing delays.” Margaret said, “It is definitely delaying things,” and Lesley said, “it is Absolutely affecting people’s health.”

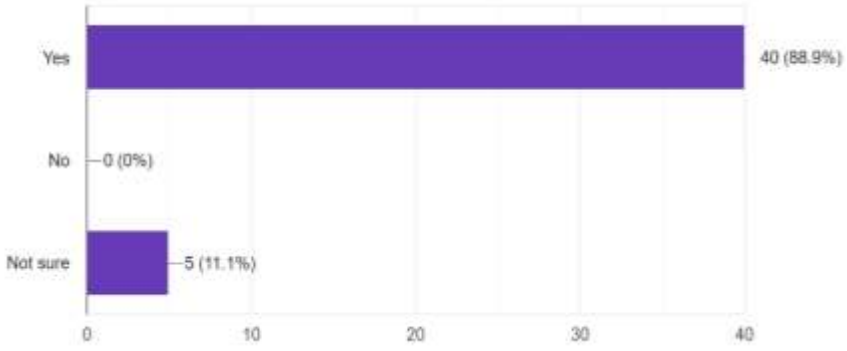


Table 4:: Made by Amy Woodward/Data from Google Survey

Since July 2024, the Government has been promising to 'bring back the family doctor' and improve GP waiting times. On June 6, 2025, a plan to end waiting lists was announced by the Prime Minister which set out to have half a million more appointments available each year with Community Diagnostic Centres and surgical hubs. Only time will be able to tell how much of a success this new plan will be, but for some it is already too late, their health and lives have already been affected.