

the doctor would be comforted by the reassuring sight of an open door.

The marked seasonal variation, with 81% of patients opting for an open consultation during the summer months (compared with 60% in the winter) is as likely to reflect the need for air-conditioning in the consulting rooms as it is the desire for confidentiality.

While this was an interesting study, it appears to have posed more questions than it has answered. It would have been more useful had an attempt been made to determine what factors had led to the decision to leave the door open or closed.

G.A. NORFOLK

Medical Services Division
Rezayat Company Ltd.
P.O. Box 90
Al-Khobar 31952
Saudi Arabia

Accessibility of GPs: a patients' liaison group survey

Sir,
The North-West England Faculty of the Royal College of General Practitioners has formed a patients' liaison group mirroring locally the national patients' liaison group, composed of members of the College and representatives from local community health councils and one patient participation group in the region. We considered how we could best contribute to the evaluation and subsequent improvement of general practitioner care in the north-west of England. One of the topics the group has chosen to study is patients' perceptions of the accessibility of general practitioners.

In November 1985 the group commissioned a pilot study with random samples of 200 adults, 100 in each of two constituent districts. Structured interviews were carried out in respondents' homes by trained professional interviewers using questionnaires. The samples contained more women and older people than expected. The questionnaire invited comment about a range of topics, including travel to the surgery, contact arrangements with the practice and perceived attitudes of receptionists and general practitioners.

Important general findings from this pilot study were: first, many respondents wished to be able to talk directly to their general practitioner by telephone; second, the number of patients preferring an appointment system was not much greater than the number preferring an 'open system'; third, there was a large minority

of patients expressing dissatisfaction with various aspects of the service.

Almost two-thirds of the respondents said they always made an appointment to see the doctor. Nearly three-quarters of those using practices with appointment systems said they could consult any of the doctors. Some patients preferred a particular practitioner and of these a third said they had to wait until the next day and one in five had to wait two days. However, nearly a quarter waited three days or more. Twenty per cent of patients found this wait unsatisfactory.

Over a third of patients who had made appointments said they waited less than 15 minutes in the waiting room. A similar number had to wait 15 to 30 minutes, but a quarter had to wait longer. One in five patients were dissatisfied with this.

Nearly a third of the respondents who needed to make an appointment had tried to see the doctor urgently. Of these, the majority were seen quickly, although a handful had to wait until the second day. Eighty-five per cent were satisfied with the response to requests for urgent consultations. Just over a third of patients (36%) could go to their doctor without having to make an appointment. A quarter of them were dissatisfied with the general level of accessibility.

General preferences for contact arrangements were almost equally split between being able 'to go along and wait' and booking to make an appointment to see the doctor. Only a few preferred a mixed system. Most people found existing surgery hours convenient. Almost 20% wanted additional hours, the most popular being on Saturday morning.

Four out of five respondents had a telephone in their house but only 25% had ever tried to telephone the general practitioner to discuss a problem. Of these, most found they could talk directly to the doctor without difficulty. The majority (67%) said they would like to be able to telephone and talk directly to the doctor.

Almost half the respondents had asked for a home visit in the last year and nearly all had had no difficulty in getting one. About one-fifth had tried to contact their doctor out-of-hours in the last year and most of them said the doctor arrived within an hour. Eight respondents waited longer than two hours. Forty-five per cent said the service was quick but 15% thought the delay seemed too long and 40% that it seemed very long.

When respondents were asked in an open question if anything would make it easier for them to see the doctor 72% could think of nothing. Asked about particular items 47% of respondents re-

quested shorter waits in the surgery, 45% wanted the facility to talk to the doctor on the telephone, 35% shorter waits for appointment slots, 27% quicker response to emergency calls, 22% longer surgery hours, 16% a better telephone system and 12% 'better receptionists'.

In many respects the results from this pilot study are similar to the larger national studies carried out by Cartwright and Anderson¹ and Ritchie and colleagues.² There are, however, differences in some aspects which justify further study of inter-district variations and strengthen the case for more locally focussed studies. The patients' liaison group proposes to extend the survey to most districts in the North-West Region and is currently seeking support for this. The group would welcome comments from others who may have carried out similar work.

DAVID ALLEN

RALPH LEAVEY

BERNARD MARKS

RCGP North-West England Faculty
Rusholme Health Centre
Walmer Street
Rusholme M14 5NP

References

1. Cartwright A, Anderson R. *General practice revisited: a second study of patients and their doctors*. London: Tavistock, 1981.
2. Ritchie J, Jacoby A, Bone M. *Access to primary care*. London: HMSO, 1981.

Exercise and sport

Sir,
Over recent years there has been a general increase in public interest in exercise and sport. At the end of 1985 I attempted a survey of how many patients presented to their general practitioners in the Dumfries and Galloway Health Board area with problems related to exercise and sport (during the month of November). As only 26 of the 120 practitioners in the area replied, firm conclusions are not possible.

I write to mention points which seem of particular interest:

1. Six of the 52 cases presented were considered by the reporting practitioner to be preventable.
2. Eleven of the 52 cases were injuries to the head and face, with three concussions.
3. Five of 10 cases in females were injuries to the hand and wrist.