Out of Hours The GP waiting room under examination



Photographs by Kinga Kocimska; kingakocimska.com.

WAITING TO SEE THE DOCTOR

Waiting comes with the territory when visiting the doctor, with the GP surgery waiting room being the most common area to wait for medical attention. Yet GP waiting rooms and the public's experience of and in them is a neglected topic.

The little we do know indicates that, although patients may arrive anxious, time in a waiting room can calm nerves and ready them for a productive exchange — or it can increase anxiety. This brief article reports on a unique inquiry that took place in 2015 into GP surgery waiting rooms in the UK.

PHOTOGRAPHING IMAGES OF 'UNLOVED' **WAITING ROOMS**

The impetus for our study came via informal conversations between a senior health promotion specialist and a social worker lecturer in Edinburgh. A mutual interest was found in the 'look' of waiting rooms and foyers where people waited for services, and the impressions that were formed by and in these spaces.

Engaging the help of a professional photographer, and the support of surgery managers, we studied 20 surgery waiting rooms. We found much good practice but here we concentrate on opportunities for guick wins and food for thought. We found that some waiting rooms inspired an air of calm, with access to light and nature by the provision of large windows and potted plants, and had a personal touch lent by, for example, local artwork or up-to-date community news. However, what we have termed the 'unloved' waiting rooms were characterised by:

- · receptions (and receptionists) obscured by PC monitors (image at top);
- the unattractive sight of banks of files at

"... the waiting room is much more than a transit zone between home, the outside world, and the

the back of the reception area;

- rolling TV news without sound, or muzak of the 'all-hits' radio type, which the existing literature tells us are unsettling or intrusive to many;
- leaflet clutter; we counted 224 leaflets, posters, and cards in one surgery (image below);
- piles of tatty, out-of-date celebrity and scandal magazines (also possibly constituting a health and safety risk);
- lists of 'dos and don'ts' on the walls lending an unwelcome and authoritative tone (do we still need 'no smoking' signs?);
- an abundance of leaflets and posters that, research tells us, can heighten anxiety by using gruesome imagery (blackened lungs) or may propagate stress ('worried' was a frequently occurring word, as in the 'are you worried about ...?' type of publicity).

The key belief we formed was that the waiting room is much more than a transit zone between home, the outside world, and the GP. The waiting room environment deserves to be considered from a variety of psychological, philosophical, spiritual, and architectural angles to reduce the possibility of feelings of loss of control, fear, and anxiety and to promote calm and readiness to engage in health matters.

Our study contains a number of practical



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suggestions including paying attention to the 'unloved' characteristics previously referred to. In recognition of the waiting room's vital role in the process of seeking and receiving help, having someone, for example, a practice manager, with an understanding and responsibility for said area would be invaluable. This individual could provide greeting and assurance to patients, and curate and deploy the mass of illness and health-related information. Instead of having piles of leaflets covering a great variety of health information, one surgery we studied chose to highlight a specific theme every month, focusing on, for example, mental health one month and flu the next. Another option could be to follow a theme related to a seasonally appropriate or national campaign. Yet another surgery studied had dispensed entirely with hard copy and instead was using a monitor to display various health-related news and information.

A common sight in today's waiting room is that of many people engaged with their various social media platforms. Some of this is an inevitable feature of contemporary life, boredom, or lack of alternatives. But rather than just places we pass through on the way to or away from sickness or ill-health, where time is wasted, GP waiting rooms are spaces that can be good for more than just waiting about for the doctor.

More careful attention paid to the effects of surroundings on the waiting experience and smarter use of this 'dead' time could result in individuals' better attunement to their health needs and their solutions, greater clarity about what to ask of their GP, and a reduction in stress. Together with a greeting and show of hospitality this could make for a more therapeutic, less passive healthcare conversation.

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