

Behind the Scenes at a GP Practice

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Reading Patient Voice Group



The consultation is the part you see

In the room

Listening to your story
Examining and explaining
Agreeing what happens next

Behind the scenes

Preparing and checking
Following up and coordinating
Keeping the service safe

One patient, many connected tasks

An illustrative example,

Before the visit

A recall flags that a diabetes review is due

During the review

The nurse and patient agree priorities

Afterwards

A clinician reviews tests and medicines

Between appointments

The team tracks follow-up and offers support

Access starts with understanding the need

Getting in touch

Telephone, in person
or an online request

Help with language or
disability

Assessing urgency

Questions help the
team identify risk and
the right professional

Clinical support when
needed

A clear next step

Advice, a consultation,
a test or another
service

Explain when and
what to expect

Continuity and care at home

Knowing your story

A familiar clinician or team helps with complex illness and ongoing decisions

Shared records support continuity

Reaching you at home

Clinical need determines the response when someone cannot attend

GPs and community teams coordinate care

The practice team

GPs and nurses

Diagnosis, ongoing care and clinical decisions

Other clinicians

Medicines, movement and other specialist skills

Reception and admin

Requests, referrals, records and follow-up

Practice management

Staffing, budgets, premises and daily operations



Where a primary care network fits

PCN = primary care network ICB = integrated care board

Your practice

Your registered team and ongoing record

Primary care network

Neighbouring practices share staff and services

Wider neighbourhood

Community teams, pharmacies, councils and charities

Integrated care board

Plans and funds services across a larger area

Reading in a changing local NHS

BOB to Thames Valley

NHS Thames Valley ICB began on 1 April 2026

Prevention, neighbourhood care and fairer access

Berkshire West

Reading, West Berkshire and Wokingham

Health inequalities, support for people at risk, early years and mental health

Targets: what they mean for patients

National 2026/27 requirements and ambitions, not Reading performance

Same day

Clinically urgent
GP requests

Non-urgent: a response by
the end of the next core-
hours period

28 days

Cancer diagnosis
or cancer ruled out

80% Faster Diagnosis
Standard

31 / 62 days

Decision to treatment /
referral to treatment

March 2027 ambitions:
94% / 80%

Long-term conditions: care between visits

Finding who needs care

Registers and recall lists flag reviews due

Reviewing the whole person

Symptoms, daily life and what matters to you

Checking treatment

Tests and medicines reviews where needed

Agreeing a plan

Clear goals, follow-up and help if things worsen

Prevention and the NHS Health Check

40–74

Eligible adults in England
Usually every 5 years

A conversation about future risk

Blood pressure and cholesterol
Lifestyle and family history
Support or treatment where needed

Prevention also includes eligible vaccinations and screening

Cancer: recognising risk and following through

Recognise

Listen, examine and investigate concerning symptoms

Refer

Use the right urgent pathway when indicated

Track

Check the referral and planned tests progress

Review

Reassess symptoms that persist or change

Cancer care continues after diagnosis

Living with cancer

Symptoms and medicine effects
Emotional wellbeing
Work, money and family pressures

Keeping care connected

Treatment summaries and follow-up plans
Other health conditions
Support for carers and end-of-life care when needed

A repeat prescription includes safety checks

Is it still right?

Benefits, side effects and interactions
Dose and monitoring
What you actually take

What has changed?

Hospital changes or supply problems
Agreement about the next review



Results need a complete follow-up process

“No news” should not be the follow-up plan

Request

Record the test and who will follow it up

Receive

Notice missing results as well as abnormal ones

Review

A clinician decides what action is needed

Explain and act

Tell the patient the result and next steps

When hospital information reaches the practice

Clinical letters

Read, record diagnoses and identify actions

Medication changes

Check changes against the existing prescription

Outstanding work

Clarify tests, referrals and follow-up ownership

Patient questions

Resolve missing information across services

CQC: five questions about care

Safe	Are people protected from avoidable harm?
Effective	Does care achieve good outcomes?
Caring	Do people experience kindness and respect?
Responsive	Does the service meet people's needs?
Well-led	Does leadership support good care and improvement?

The safety work that happens every day

A safe environment

Cleaning and infection precautions
Safe sharps and clinical waste
Equipment checks

Readiness for problems

Vaccine storage checks
Emergency equipment and training
Plans for IT or building disruption

Safeguarding and trust

Recognising risk

Concerns about children or adults at risk

Abuse, neglect or coercion

Patterns across separate contacts

Responding safely

Listen privately and document carefully

Seek safeguarding advice

Share relevant information appropriately

People, training and running the practice

A supported workforce

Recruitment and safe staffing
Supervision and protected learning
Leave cover and staff wellbeing

A service that can keep going

Budgets and contracts
Premises and equipment
Capacity for planned and urgent care

Digital care and protecting your information

Useful tools

Online requests and repeat prescriptions

Access to records and results

Information shared for coordinated care

Human safeguards

Identity and access checks

Secure systems and staff training

Telephone and in-person routes remain important

Medical-record requests: more than a printout

GDPR gives patients a right to access their personal information

Check the request

Confirm identity and authority to receive the records

Gather the information

Bring together relevant records and correspondence

Review carefully

Protect information about other people

Share securely

Provide the response through an appropriate route

Safeguarding: the work between appointments

Protecting children and adults at risk involves the whole team

Keep concerns visible

Maintain relevant register entries and alerts

Build the full picture

Review concerns across contacts and services

Work with others

Prepare reports and contribute to safeguarding meetings

Follow through

Record decisions, review risk and track agreed actions

Cervical screening: beyond the appointment

The “smear test” is one step in a longer screening pathway

Before the test

Check eligibility and help people who are overdue

At the appointment

Explain the test and address individual needs

After the sample

Check the result arrives and the next action is clear

Until follow-up is complete

Track repeat tests or specialist follow-up when needed

ACP records what matters to a person if their health changes

**A voluntary
conversation**

Time to reflect

A plan others can use

An ongoing review

Patient voice turns experience into improvement

Listen

Feedback, complaints and patient participation groups

Understand

Look for patterns and hear less-represented voices

Try a change

For example, clearer messages about test results

Check and report back

Did it help, and what still needs to change?

Useful questions to take into your care

What happens next, and when?

Who is responsible for following this up?

What should I do if I hear nothing?

What changes mean I should seek help sooner?

What patients rarely see

Before you arrive

Preparation
Recall lists
Staffing and training

Between contacts

Results and letters
Medicines checks
Coordination across teams

All the time

Safety and safeguarding
Learning from problems
Listening to patient voices

Discussion and questions

What surprised you?

Where does care feel hardest to navigate?

What should practices and patients work on together?

