

Hospital appointment booking system

June 2026



Background & Introduction

Healthwatch County Durham is an independent organisation whose aim is to help people get the best out of their local health and social care services, whether it's improving them today or helping to shape them for tomorrow. Everything we say and do is informed by our connections to local people and our expertise is grounded in their experience.

As a statutory watchdog, our role is to ensure that local decision-makers put the experiences of people at the heart of their care so that those who buy (commissioners) and provide our services (NHS Trusts, local authorities, GPs, the voluntary sector, and independent providers) can benefit from what people tell us.

Healthwatch County Durham heard from a number of clients who had been experiencing issues with the hospital booking system.

Healthwatch County Durham wanted to find out more about people's experiences and how the system worked from an internal process point of view. We asked for people to come forward with their experiences and also talked to a number of County Durham and Darlington Foundation Trust (CDDFT) employees who work in the appointment booking area.

Other NHS Trusts

Due to the geography of County Durham, appointments may be from across NHS trust borders which adds extra complexities to the process. Including;

- Newcastle Upon Tyne Hospitals NHS Foundation Trust
- Gateshead Health NHS Foundation Trust
- South Tyneside and Sunderland NHS Foundation Trust
- North Tees and Hartlepool NHS Foundation Trust
- South Tees Hospitals NHS Foundation Trust

Please note: appointments for children and adolescent mental health services (CAMHS) are made through Tees, Esk and Wear Valleys NHS Trust, and are not covered in this report.

In addition, Children's vaccine services are run by Harrogate and District NHS Foundation Trust and not covered in this report.

Right to Choose

Under the NHS Choice Framework, "Right to Choose" is a legal right in England that allows patients to select their preferred healthcare provider (including some private providers that hold NHS contracts) for their first outpatient appointment, provided the referral is clinically appropriate. You cannot self-refer.

To use your Right to Choose, take the following steps:

- 1 Do your research:** Identify an NHS-approved or qualified provider that accepts Right to Choose referrals and offers the specialty you need.
- 2 Contact your Healthcare Professional*:** Schedule an appointment and bring information about the specific provider you have chosen.
- 3 Get the referral:** Discuss your clinical needs with your GP. If the GP agrees the referral is appropriate, they will submit your referral to your chosen provider.

*Please note only GP's, Dentist and Optometrists are able to refer under Right to Choose.

Key Things To Know



Availability: This right is only applicable in England and does not apply in Wales, Scotland, or Northern Ireland.

No Extra Cost: Treatment through Right to Choose is free on the NHS.



Exceptions: You cannot use this right if you need urgent/emergency care, are already receiving treatment for the condition, or are in certain detained or secure environments (e.g., prison).



Shared Care/Medication: For conditions like ADHD, getting a diagnosis through a Right to Choose provider is usually straightforward, but medication prescribing and monitoring or titration may require your local GP to agree to a "shared care" agreement.



Discovery and Patient Stories

Patients contacted Healthwatch County Durham to express a number of concerns they had about the way hospital appointments are booked and the issues this has caused them.

Many older patients told us they find early-morning appointments challenging particularly for people who do not sleep well, or where health or mobility issues mean longer preparation time is needed.

Patient Barriers

These are some of the key themes we found when gathering patient feedback.

TRANSPORT

Those in rural areas such as the Wear Valley, reported issues travelling to appointments. Public transport is scarce and patient transport only starts at 9am. These patients often have no choice but to rely on family, friends or neighbours and leave home very early due to the distance from the hospital.

PARKING

Parking was a significant concern particularly at University Hospital North Durham and Darlington Memorial Hospital. Some reported missing multiple appointments due to lack of parking spaces. Many turning up over an hour before their appointments and still not being able to attend which marked them as 'do not attends' DNA.

LETTER DELAYS

Some patients receiving letters after the appointment has passed, this is further impacted by delays within the Royal Mail postal system. However it appears to patients that no adjustments seem to have been made to allow for postal disruption.

TEXT MESSAGES & NHS APP

Some patients told us about receiving a text message with a link to the NHS App to see the appointment letter. They report this email did not have any branding on and was confusing, leaving people hesitant to click on an unknown link.

CLINIC AND DOCTOR NAME

Patients reported receiving letters with no clinic or doctor/consultant's name on them. This was confusing for patients especially patients who have multiple and complex conditions who may see a number of healthcare professionals and attend a number of outpatients clinics.

The trust has confirmed that the issue has now been resolved. All future letters will include the clinic name.

WAITING LISTS AND CANCELLATIONS

Patients also report long wait times for appointments, some in excess of a year's waiting list. Patients also reported multiple cancellations and rescheduling of appointments which added to the delay of treatment and overall wait time. Patient concerns about short notice cancellations was raised, leading to significant inconvenience and confusion

Extenuating Circumstances

Public transport is another extenuating factor that impacts people's ability to attend appointments due to time constraints, restrictive costs and the unreliability of public transport services.

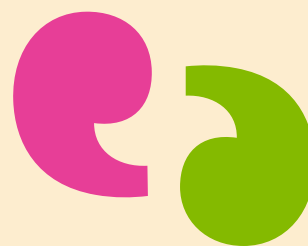
Non-emergency patient transport also faces a number of issues with long wait times leaving much sooner than the appointment and leaving much later meaning a 30 min appointment may take all day. Cost of parking and travel via private transport can be restrictive for some patients and they would prefer to be seen closer to home.



"I had a hospital appointment. I arrived on time and was told the appointment had been changed and that I should have received a letter confirming this, which I didn't, so a five-hour round bus journey was wasted. The letter arrived after twelve days. I know it is only five hours, but at 72 it is a measurable percentage of the time I have left, when a simple email telling me of the changes would have done. So in future I will have to ring up beforehand to check on the appointment, thus adding more admin to the department. Multiply this by millions of other people doing the same and see the extra work for the NHS."

-Patient Story 1

"My father was sent an appointment for the Podiatry Clinic at Bishop Auckland Hospital. In the appointment letter, there are two types of appointments described: one which requires the patient to bring along the shoes/slippers they usually wear indoors and outdoors (Musculoskeletal (Biomechanical) Assessment). As the letter did not specify which type of appointment this was, he took along his footwear. This caused some inconvenience as he has limited mobility and walks with a stick. He was told at the appointment that it was unnecessary, as his was the other type of appointment (Skin and Nail Care - Routine Podiatry). The podiatry nurse stated that the clinic has repeatedly asked for the appointment letters to clarify this issue for patients, but this has not been actioned."

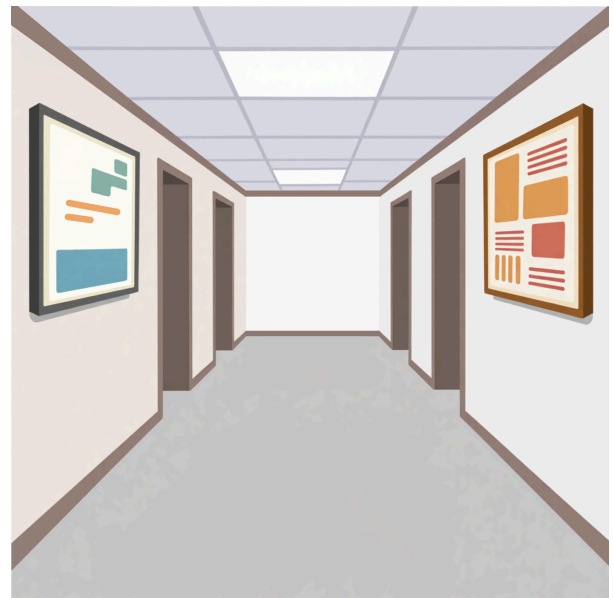


-Patient Story 2

Patients Experiences



After being referred to ENT by their GP, the client was advised they would probably be triaged first. The letter they received listed eight locations, mixing triage and non-triage services, with some options shown only as acronyms they did not understand. There was no guidance and explanation on how to choose or support decision-making, and the client doesn't know whether picking a triage option would limit their treatment choices later. Despite seeking clarification from multiple sources, they have been unable to obtain clear information.



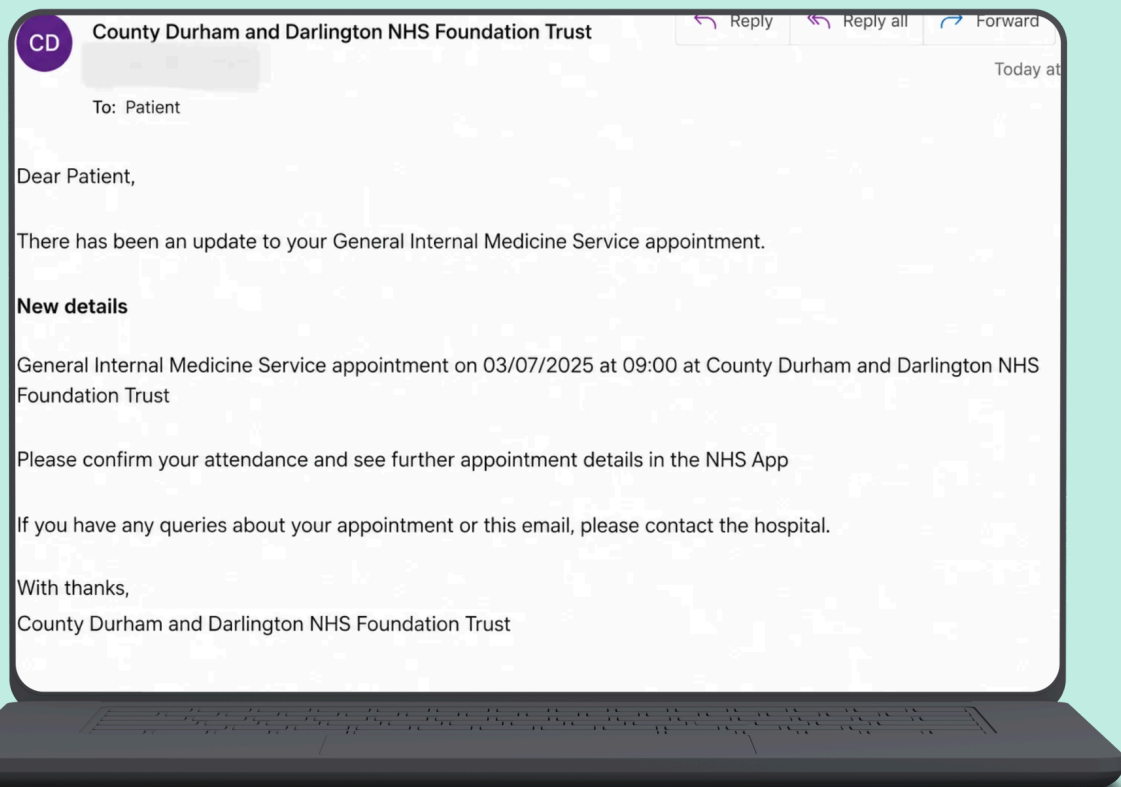
The client was very upset about the wording of the message on NHS appointment phonenumber. The message states that it is for "people who can't use the internet only". He became distressed because he wasn't sure whether he was allowed to use the line, as his previous attempts to use the internet have gone badly. He feels the NHS is being irresponsible by effectively forcing people to use online systems. The wording discouraged him from calling, as it made him feel he might be doing something wrong.



Patients Experiences



The patient received a confusing email about an appointment from an unfamiliar provider acting on behalf of CDDFT. The message appeared suspicious, as it resembled spam, was not personally addressed to the patient, did not include a named department, and was sent from “NHS Healthcall”, a service the patient had never heard of.



I was referred to an endocrinologist for an appointment in March, but this was cancelled. I was then given a new appointment for April, which was also cancelled. When I contacted the hospital, I was informed that the cancellations were due to the entire clinic being cancelled on those dates, not just my individual appointment. I was subsequently offered an appointment for 12th May, which was also cancelled. I now have an appointment scheduled for 26th May with a different consultant.



This is just one of numerous cases reported to Healthwatch County Durham involving repeated cancellations and rescheduling of outpatient appointments.

Patients Experiences



The patient went away on Thursday morning and returned on Sunday afternoon to find a letter from the hospital informing them of a pre-operative appointment scheduled for 08:30 that same morning.



It took approximately ten minutes to read the letter, even with a magnifying glass, due to the extremely small font.



It is impossible to reach the hospital by 08:30 from their location on a Sunday, as the first bus does not run until 09:00. The earliest possible arrival time would have been 10:15, requiring two buses with a gap between services.

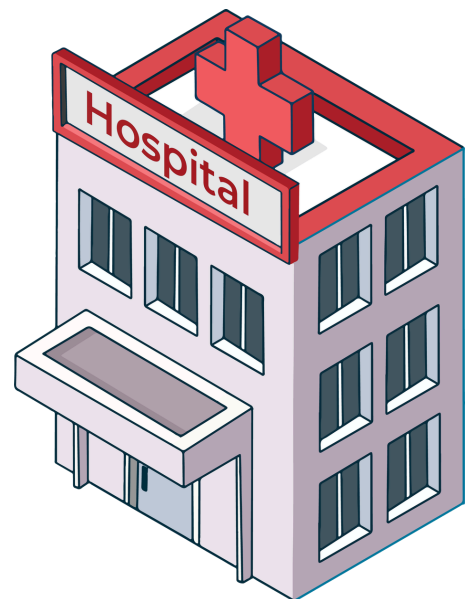


Even if the patient had been home when the letter arrived, there was not enough time for someone without access to a phone to notify the hospital that the appointment time was unworkable.



As a result of this poor organisation, the operation the patient has been waiting for since 2018 has now been cancelled. The date shown is accurate and not a typographical error.

The client states that the NHS' shift toward digital services is ostracising older people, who make up a significant proportion of the patient population. They feel that this move leaves many older individuals feeling pushed out, as they often do not have the skills, confidence, or equipment needed to use digital technology. The client themselves does not use technology and finds it confusing.



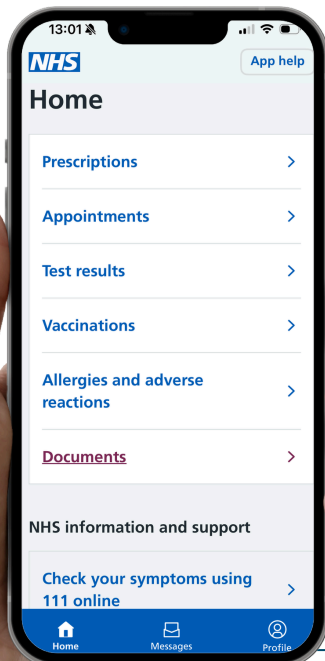
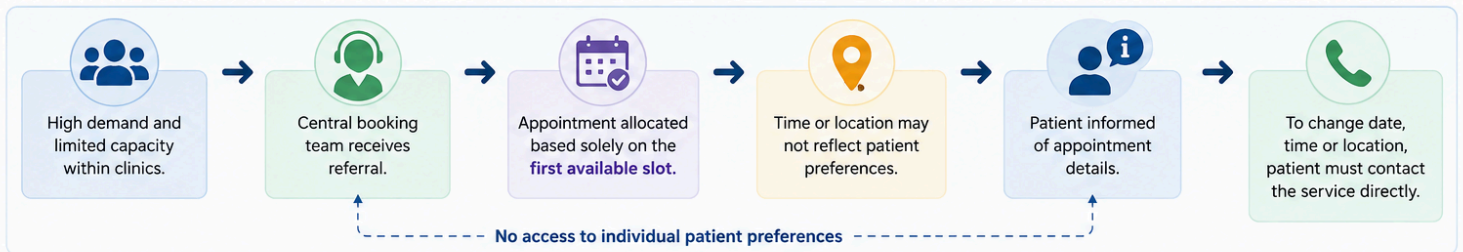
Current Booking System

Appointments are currently arranged manually by staff, with a directive to book the first available slot due to capacity pressures within clinics.

If a patient wishes to change the date, time, or location of their appointment, they must contact the service directly. Not all patient preferences can be accommodated because of high demand.



HOW THE PROCESS WORKS



Patients are informed that changing an appointment may result in a longer wait time. Initial appointments are booked through the central booking team, who do not have access to individual patient preferences, so appointments are allocated based solely on the first available slot, regardless of time or location.

Policy and Follow Ups

Blanket policies cannot be applied unless there is a clear clinical requirement.

For example;

A diabetic patient attending an endoscopy must be booked into a morning appointment, and the system prevents staff from allocating an afternoon slot.

Applying blanket rules without clinical justification would be discriminatory and would not support patient-centred care.

Follow-up appointments can be arranged directly with clinical staff, who will offer the first available appointment but can discuss patient preferences and adjust where possible.

Staff ensure patients are aware of any additional waiting time that may result from choosing a preferred time or location.










Patient Process

Hospital appointments are typically booked after a GP referral, using the [NHS e-Referral Service \(e-RS\)](#) online, via the NHS App, or by phone using details in your referral letter.

You can select your preferred hospital, date, and time, ensuring you confirm any special needs or requirements beforehand.

Booking Procedure

-  Your GP will begin the referral process for specialist care. While GPs can still refer, they are no longer able to book appointment times, as this created inequity by placing some patients ahead of those already waiting. All appointments are now centrally managed by the operation team.
-  Patients may manage their referral through the NHS website or NHS App, including selecting an appointment slot. In County Durham, this feature has been limited because it allowed some patients to bypass others already on the waiting list.
-  Patients can call the number provided on their referral letter or the NHS Appointments Line at 0345 608 8888.
-  Patients have the legal right to choose the hospital or clinic they wish to be seen at.
-  Patients should ensure they have received confirmation of the date, time, and location of their appointment.
-  Inform the hospital in advance if you require a translator or have specific accessibility needs.
-  Use the same methods (online, NHS App or phone) to change or cancel appointments.

You can book, cancel or change a hospital appointment by contacting the hospital directly by phone or through their website.

Manage hospital appointments using NHS e-Referral. You can use the NHS e-Referral Service if you have received a letter saying you can use this system.

Key Appointment Contacts



Switchboard

Bishop Auckland Community Hospital & Darlington Memorial Hospital
01325 380 100



Switchboard

University Hospital of North Durham
0191 333 2333



General Enquires

Weardale Community Hospital, Stanhope
01388 528 233



General Enquires

Richardson Community Hospital, Barnard Castle
01833 696 500



Outpatient Appointments

Shotley Bridge Community Hospital, Chester-Le-Street Community Hospital, Sedgefield Community Hospital.
01207 594 666



Outpatient Appointments

Bishop Auckland Community Hospital and Darlington Memorial Hospital
01325 743 333



Outpatient Appointments

University Hospital of North Durham
0191 333 2802

Please note: Outpatient Appointments at Peterlee Community Hospital are managed by North Tees and Hartlepool NHS Foundation Trust; therefore are not covered by this report. For clarity, the Urgent Care Centre at Peterlee is however managed by County Durham and Darlington NHS Foundation Trust (CCDFT).

Current System Limitations

Patient Preferences

Preferences are recorded at the time of booking and can be carried forward if the appointment needs to be re-arranged. However, due to current system limitations these preferences cannot be automatically applied to future appointments beyond that.

Character Limits

At present, the system is unable to apply CDDFT branding to email communications, resulting in patients feeling uncertain about the authenticity of the messages they receive.

Suspicious Links

People are generally reluctant to click on unidentified links in emails, as the lack of clear identification raises concerns about security, authenticity, and the potential risk of phishing or fraudulent activity.

Unclear Acronyms

People have indicated that they do not know what CDDFT stands for, however, the text-messaging platform is constrained by a limited character count, preventing the inclusion of the full organisational name (County Durham and Darlington Foundation Trust) which can lead to confusion and patient uncertainty.

Digital Literacy

The NHS' increasing reliance on digital systems makes it harder for some people, as not all patients have the necessary access to technology including regular internet access or appropriate devices and lack the confidence, or digital literacy to engage effectively with online processes, potentially creating barriers to accessing care.



Community Clinic Appointments

County Durham and Darlington NHS Foundation Trust (CDDFT) operates a range of community hospitals and specialised outpatient clinics across the region, providing essential services to patients.

Each clinic is managed independently and may use different processes for arranging appointments, depending on the service and the needs of the individual.

The Trust's community services focus on outpatient care, rehabilitation, and wider community health support. Dedicated clinics are available for physiotherapy, podiatry, and respiratory nursing, Adult Bladder and Bowl Service and Lymphoedema Service.



Appointments for these clinics are often arranged directly between the patient and the nurse or therapist. Patients may book appointments at the clinic reception following a visit or over the telephone.

Some clinics also offer home-based care when appropriate, particularly for patients who are housebound or unable to attend appointments in person. In these cases, the clinic will coordinate directly with the patient to arrange suitable support.

Recommendations

1

Invite NHS senior leadership to engage in reflective evaluation to identify any areas where beneficial change may be warranted, promoting open discussion, learning from patient and staff feedback, and recognising where systems or processes could be strengthened.

2

Identify which departments are essential to making changes happen, then work more closely with them to ensure smoother, more effective implementation through improved collaboration, clearer accountability, and consistent communication across all teams.

3

Ensure processes and documents are reviewed on a consistent basis to keep them accurate, up to date, and fit for purpose, reducing the risk of errors, inconsistencies, or outdated guidance impacting patient care.

4

Improve scheduling processes to better accommodate less frequent postal deliveries and delays, so that appointment letters reach patients with sufficient notice to prepare.

5


Record patient preferences in the system, such as preferred appointment times (AM/PM) and preferred hospital location.


6

·Ensure all communications—including letters, emails, and text reminders—use consistent NHS CDDFT branding.

Recent Improvements







It has been noted that recent improvements have been made to the appointment letters.

 All letters should now state the clinic the appointment refers to, so patients can easily identify which service they are attending and avoid confusion or unnecessary enquiries.

 Messages and appointment letters will now include guidance on parking and a range of alternative transportation options - such as public transport links and park-and-ride facilities - which are often considerably cheaper than using on-site hospital parking, helping patients make informed and cost-effective travel choices.

Contributors

Many thanks to all our contributors for their participation and support and for sharing their expertise and knowledge with Healthwatch County Durham.

-  Julie Crampton - Patient Access Operational Manager.
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