

Citizen Participation and Public Petitions Committee
Wednesday 26 November 2025
18th Meeting, 2025 (Session 6)

PE2070: Stop same-day-only GP appointment systems

Introduction

Petitioner Lorraine Russo

Petition summary Calling on the Scottish Parliament to urge the Scottish Government to stop GP surgeries from only allowing same-day appointment bookings, enabling patients also to make appointments for future dates.

Webpage <https://petitions.parliament.scot/petitions/PE2070>

1. [The Committee last considered this petition at its meeting on 22 January 2025](#). At that meeting, the Committee agreed to write to the Scottish Government.
2. The petition summary is included in **Annexe A** and the Official Report of the Committee's last consideration of this petition is at **Annexe B**.
3. The Committee has received a new written submission from the Cabinet Secretary for Health and Social Care which is set out in **Annexe C**.
4. [Written submissions received prior to the Committee's last consideration can be found on the petition's webpage](#).
5. [Further background information about this petition can be found in the SPICe briefing](#) for this petition.
6. [The Scottish Government gave its initial response to the petition on 12 February 2024](#).
7. Every petition collects signatures while it remains under consideration. At the time of writing, 521 signatures have been received on this petition.
8. [At its meeting on 24 September 2025, the Committee took evidence on thematic healthcare issues](#) that have been raised in multiple petitions, including this petition.

Action

9. The Committee is invited to consider what action it wishes to take.

Clerks to the Committee
November 2025

Annexe A: Summary of petition

PE2070: Stop same-day-only GP appointment systems

Petitioner

Lorraine Russo

Date Lodged

4 December 2023

Petition summary

Calling on the Scottish Parliament to urge the Scottish Government to stop GP surgeries from only allowing same-day appointment bookings, enabling patients also to make appointments for future dates.

Previous action

I emailed the First Minister, the Health Secretary and my NHS Board but have received no response.

Background information

I called my local GP to make an appointment with a doctor to be told there were none available for that day. I asked if there were any for the following days and was told I was unable to book an appointment in the future and I would need to try again at 8am the following morning but due to working full time and travelling at 8am each morning, I am unable to call each morning. I think this needs to change.

I once tried to call my GP at 8am and I rang over 100 times until I spoke to a receptionist, I was then told there were no appointments left for that day and to try again the following day.

The Scottish Government could consider an update to the General Medical Services contract as a possible route to address this issue.

Annexe B: Extract from Official Report of last consideration of PE2070 on 22 January 2025

The Convener: PE2070 calls on the Scottish Parliament to urge the Scottish Government to stop general practitioner surgeries allowing only same-day appointment bookings and to enable patients also to make appointments for future dates. We last considered the petition at our meeting on 20 March 2024, when we agreed to write to the Government and national health service regional health boards to understand how appointments are handled across Scotland.

Many of the health boards note the flexibility in their models for individual practices to provide services to patients in accordance with the specific needs of their practices. Most of the responses report a mix of on-the-day appointment offerings and advance bookings in general practices, with a small number of exceptions. The responses also highlight concerns about capacity and an increase in patient demand, which, according to NHS Ayrshire and Arran, can at times outweigh the clinical capacity that is available to some practices. The response from NHS Grampian states that the sustainability of services remains a concern, highlighting that, between 2022 and 2024, just over 10 per cent of Grampian practices elected to hand back the general medical services contract.

The health and care experience survey found that the proportion of people reporting that they find it easy or very easy to contact their general practice in the way that they want has declined. In 2017-18, 85 per cent of people were satisfied with their experience, but the figure has gone down to 78 per cent. In 2023-24, 50 per cent of respondents reported that they were able to book appointments at their general practice three or more working days in advance. That was similar to the 2021-22 survey, when the figure was 48 per cent, but significantly lower than the figure in 2019-20, when it was 64 per cent.

Do members have any comments or suggestions for action?

Maurice Golden: This is a massive issue. I am aware of surgeries in my region where patients are looking at 1,000 calls to see a doctor, which is unacceptable in relation to both treating health conditions and providing preventative care. The result is that many people present at accident and emergency departments because that is the only way that they can see someone.

The Scottish Government's response that the "information is not known" to it is inadequate. If you are in charge of delivering healthcare in Scotland and you do not know how it is delivered and whether that system is adequate, that is a big problem. Therefore, the first thing is to ascertain that information.

I will segue to the point that the petition refers to same-day-only appointment systems. In my experience, many practices largely deploy that approach but they might also have some other appointments available. Therefore, in essence, it is a same-day-only appointment system, but that might not be captured in the data, because the surgery offers a few alternatives. For example, there might be some advance appointments, or, if someone was able to speak to a receptionist on the

phone, they might be offered an appointment the following day, so that would not fit in with the definition of a same-day-only system. We need to ascertain that in order to understand the information.

The Scottish Government also said that it is not looking to take a similar approach to that of NHS England. That is okay, but, in that case, what is its approach going to be?

There are almost two parts to the issue and I cannot see that the Scottish Government has provided an answer, other than by referring to some general principles that do not really help people to get appointments.

The Convener: Mr Golden has made some suggestions. Do colleagues have any other suggestions? Are we content to proceed on the basis that Mr Golden has identified?

Members *indicated agreement.*

Annexe C: Written submission

Cabinet Secretary for Health and Social Care written submission, 3 March 2025

PE2070/H: Stop same-day-only GP appointment systems

Thank you for your letter of 31st January about concerning petition PE2070.

The Committee has asked how the Scottish Government can be confident that the General Medical Services contract is delivering an effective service for patients without data and how the Scottish Government will obtain data to support current and future access programmes.

We do have data on the experience of patients accessing care if not on particular practice arrangements. Our earlier letter referred to the Health and Care Experience Survey. The latest survey reports that 76% of people found contacting their General Practice in the way they wanted fairly or very easy. This is similar to 2021/22 (75%), but lower than in 2019/20 (85%). It also found that half of respondents (50%) reported they are able to book appointments at their General Practice three or more working days in advance. This is similar to the 2021/22 survey (48%), but lower than in 2019/20 (64%).

It should be noted that GP practices are contracted to take overall responsibility for the care of their registered patients during the “in hours” period. How that service needs to be provided is left to the judgement of the responsible clinicians: practices are not required to provide a particular type of service. Health Boards have various means at their disposal to pursue assurance about clinical governance in their practices if they have concerns.

GPs are independent contractors. Any data that the Scottish Government needs to support current and future access programmes, but does not currently have access to, must be obtained by negotiation with the profession’s representatives. Any further data we negotiate to collect from practices will reflect our overall requirements from practices which are also subject to negotiation.

The Committee has also asked what action will be taken to address the issues raised in the petition in light of the Scottish Government’s position that it will not consider a similar approach to patient appointments as NHS England.

Our earlier letter noted that every GP practice’s patients have different needs and the best mix of appointment types to the right member of the practice team is something that requires the judgement of professionals who have a long term responsibility for their patients. Our actions, such as forming the General Practice Access Group, reflect our approach of working with GP practices to improve access.

Yours sincerely

NEIL GRAY