### Appendix 2: Examples for patient motives for attending the UCCs, as perceived by staff

<table>
<thead>
<tr>
<th>Motive</th>
<th>Example</th>
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<td>Anxiety (&quot;worried well&quot;)</td>
<td>“We have a lot of people, and there are a few what we call worried well, so actually they are well and they’re worried about whatever, several different things. So we do see a fair few portions of them; and, actually, they’ve already seen their GP, who’s reassured them... but they still come here because, I guess, they want a second opinion, they want further re-assurance. It’s quite evident from the consultation afterwards, they’re like...okay, you’ve re-assured me, doctor, thank you. But, as a GP, that’s part of the job, you do that a lot anyway, to be honest, a lot of the work is re-assurance”. (GP7)</td>
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<td>Convenient access</td>
<td>“…They come because it’s convenient, i.e. it’s local, it’s convenient because it’s open all hours, it’s convenient because you only have to get past the receptionist to get an appointment.” (GP1)</td>
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<td>&quot;I think it’s just more for convenience, with the exception of the minor injuries…patients that come to see a GP for GP problems or minor ailments, they come here because of just sheer convenience”. (Receptionist12)</td>
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<td></td>
<td>“If you are younger you don’t really care too much about continuity of care and you tend to present with an acute problems so why would you care whether you walk in here and wait two hours or phone your GP and get an appointment for later on that day. To a lot of people it doesn’t matter anymore the continuity of care aspect of it.” (GP1)</td>
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<td>“The one main reason is they can’t get an appointment with a GP on the day they want because very often people wake up in the morning and don’t feel...”</td>
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well, they call their GP, no, I can’t get you an appointment before Friday – so they turn up here because they can’t get an appointment with their GP”.

(GP2)

“I know one of the biggest reasons is that they can’t get an appointment when they want, with their GP. That’s one of the biggest reasons they come here. …and their excuse most of the time is, they can’t get an appointment when they want it, with their GP”. (ENP3)

Belief in superiority of hospital expertise; Seeking fasten access to hospital facilities

“The other thing is, I think some of them think that a hospital doctor is cleverer than a GP, which is, again, misguided because you’ve just got good doctors and bad doctors. And, of course, a lot of the A&E doctors are very junior…So, yes, they think they’re getting a better doctor, they think they’re getting more fancy tests more quickly, and that they’ll be referred straight into the system”. (GP15)

“And they come here because they think that if they’re going to the hospital it’d get them into the outpatients and into the scan department more quickly. I certainly disagree with that. I say, no. You get the referrals through your GP….”(GP15)

Dissatisfaction with GP

“The other thing we see is people with GPs, but in their words they say, we can’t get an appointment with GPs; or, sometimes, they’re not happy with the GPs. This is what they say, but, anyway, I don’t know what the exact relationship is…”. (GP7)

“The other aspect of communication would be the same but I spend more time, that’s way most patients are happy, and we see more people. They come back
because literally they want to speak, they want somebody to listen to them, and
we give them this opportunity”. (GP10)

“The other things we would always consider is if it was something, perhaps,
that they didn’t want their own GP to be involved with...”. (GP14)

Those not registered with a GP

“Now, there’s a fair chunk of people who are just, like students ...or young
men that never get around to signing on with a GP. So there are those who are
just a bit chaotic and a bit haphazard and just travelling light and therefore
they are not in the system properly”. (GP15)

Lack of self-care skills

“Yes, there are a lot of patients... I mean, most of the patients actually come
because they don’t have much knowledge about what they have. I mean, they
come for simple things that can be sorted by the patient themselves at home,
like very minor abrasions or burns, very minor that doesn’t need even hospital
treatment, but they come because they don’t have the knowledge”. (ENP8)