

# Practice Newsletter

## CHANGES TO BOOKING SYSTEM

### What will change?

The biggest changes are that “triage calls” (when a doctor telephones you back and books you into an appointment) will be replaced by other types of appointments which can be booked directly by receptionists and we will also have routine telephone call appointments which can be booked in advance.

### What type of appointments will be available?

- Routine face-to-face appointments – as before, these will be appointments you can book in advance for routine clinical matters and reviews with your doctor.
- On-the-day appointments – these will be appointments available for people who are unwell and need to see a doctor that day.
- Routine telephone appointments – these are 5 minute appointments booked by receptionists. As for routine appointments these are for routine/non-urgent matters but you do not need to see a doctor, you just need to speak to them e.g. for a review of your condition.

Please note, because they are routine, as for face-to-face routine appointments they will be booked up in advance so you may book a telephone call in a few days’ time or the following week, it may not be that day, it will depend when the next appointment is available.

From 25<sup>th</sup> June we are changing our booking system



for the doctors’ appointments  
*(the nursing team appointments will remain the same)*

### What other changes are there?

- We are starting afternoon clinics earlier.
- There are no telephone calls in the afternoon that can be booked with your usual doctor.
- We are changing the duty doctor system to proactively manage the urgent afternoon appointments to ensure that they are used by patients who do need to be seen that day.
- Multiple problems discussed in one consultation – if you wish to discuss multiple clinical problems there may not be enough time in a single appointment and you may be asked to book another appointment by your doctor. This is to reduce waiting times for patients in the waiting room who may be acutely unwell.
- If you have insisted that reception book you into a certain type of appointment and it is then found another appointment type would have been better for you, you may be told so by your doctor.

**Changes to booking system – continued****Why have we done this?**

Triage is designed to find the patient the most appropriate appointment. It makes sense to ensure appointments are not wasted and those people who need to be seen are seen. The reason we have changed our booking system is because:

- Generally our patients assess their medical needs well and if you telephone because you are unwell and think you need to be seen that day, generally you do, therefore the triage call is unnecessary.
- We want to reduce the waiting times both for routine appointments and people sitting in the waiting room. Triage has meant clinics have become very, very unpredictable and we are unable to keep to appointment times booked.
- By using triage and focussing on on-the-day appointments we have created a beast that ate into the number of routine appointments. This meant if you felt you needed to be seen sooner than the next available routine appointment, the call went as a triage call, compounding the above problem.
- We want to finish clinics on time so patients who need a visit can be visited earlier in the day. Generally, if after the visit they need to be admitted to hospital, the earlier they are admitted, the less time they spend in hospital in total.
- We need to reduce late requests for on-the-day appointments. These are becoming more frequent and they are not always appropriate and this then limits time and availability for patients who are very unwell and do need to be seen that day.
- We want to provide a good service where the best appointment for your medical need is available for as many patients as possible.

**What can we as patients do to help?**

- If you think you need to be seen that day then please telephone early.
- If you think you, or someone you know thinks they, need a home visit, please telephone us as soon as you realise this.
- For all appointments please provide the receptionist with some information as to the reason for the appointment. Since our newsletter article about this, this has happened more and more and is very much appreciated by the clinical staff in the Practice.
- Please be patient with reception staff as they will be trying to help you.

**Will this mean receptionists are triaging?**

Absolutely not.

**Should they be triaging?**

Absolutely not

**Will this change again?**

Maybe, we will be monitoring the new appointment system for doctors very closely and intend to reduce the number of on-the-day appointments offered over time and increase the number of routine appointments.

**What if I want to feedback on the new system?**

Please contact Karen Button, our Practice Manager. Karen is based at the Hemyock site.

## General Data Protection Regulations (GDPR) and Requesting Information From Your Medical Record



No matter how many e-mails and paperwork it has generated, the GDPR is a useful review and update of data protection rules and processes. There is one area probably worth highlighting, this is in relation to requesting information from your medical records and/or requesting a report or letter from your doctor, either directly or through a third party e.g. an insurance company.

**Patients accessing their medical records** - Patients can apply to access their medical records on-line and we would encourage patients to do so to request repeat prescriptions, book appointments and review their vaccinations and test results. Sometimes, for a specific reason, a patient may request further details of their medical record. Whilst a new form is being finished for this purpose, any requests currently should be made in writing to the Practice Manager detailing exactly what is required.

**Medical reports to be provided to third parties or clinical letters** – We are often asked to provide reports for a number of reasons. It should be noted that these reports are often not covered as part of the NHS service. Therefore

- (1) we will need to check that the Doctor is able to complete the report, and
- (2) a charge is likely that will need to be paid by the patient or the company requesting the report.

**Solicitors Reports** – These are generally a request for notes for a specific time period. Again, a form is being sorted for this purpose so that it is clear what is being requested. There is not a charge for this type of report.

The other important point to note is that, if medical records are requested, the Practice has up to 30 days to provide this information, for insurance reports we would aim for 21 days but this may not be possible. Shorter forms/letters may not take as long but it will depend on how many doctors we have available at the time and how busy the clinics are. We are sorry that we cannot be more exact regarding timing but it really does depend on how much urgent clinical work there is at the time and also whether your doctor is on leave.

For requests from patients and for solicitors reports, unless we are able to send the information across a secure route (the software we have purchased for this purpose is unfortunately not quite ready), this information will be provided to the patient and, for solicitors reports, it will be up to the patient to send it to their solicitor.

We would ask, if you have a medical report that has a shorter deadline than 30 days, you must flag this up to a receptionist when you bring in the request, otherwise please plan to wait up to 30 days for this information. In order that we can fit all this administrative work in without compromising the clinical care of patients we would appreciate your help in this matter.

If forms can be completed by another professional who is not your GP we may suggest you contact that other professional.

Any queries about access to your clinical records, please ask Karen Button, our Practice Manager.



## Patient Participation Group (PPG)

### We Welcome Your Input and Feedback

GDPR has also meant we needed to check whether patients wanted to remain on our patient group and whether they would prefer to be contacted by e-mail or by post. So we thought it may be timely to remind people about the group.

#### PPG – The aims of the group are to:

- ✓ Involve patients in reviewing the range and quality of services provided in order to improve such services and, at a later stage, the services commissioned by the Practice or local Commissioning Consortia;
- ✓ Help educate patients in obtaining satisfaction from the many services provided by the surgery;
- ✓ Help provide and publish information on the full range of services provided by the surgery and associated services;
- ✓ Proactively engage patients and seek views on priorities through the review of results of national and local surveys and/or the development and use of a local Practice survey;
- ✓ Publish the outcomes of engagement and views of patients on the Practice website;
- ✓ Review the outcomes of the Practice complaints procedure with the aim of reducing incidence of complaints and negative attitudes towards the surgery by establishing the patient concept of “our surgery” not “the doctors’ surgery”;
- ✓ Feedback to any consortia patient groups (the Mid Devon Patient Forum).

**A New Chair for the PPG** - At the PPG meeting held on the 12 June 2018, we agreed and welcomed Ken Pearson as a new Chair of the Group. Ken represents The Blackdown Practice on, and is also, Chair of the Mid Devon Patient Panel.

Karen will continue to be very involved in the group but looks forward to working with Ken to developing the patient group.

Patients do not need to attend meetings (although there is always some good debate... and very good cake), you can be a virtual member of group, receiving information by e-mail and providing feedback.

**If you would like to be a member of the group, there is a sign up form**

**that will be available from reception and posted on the website from the beginning of July 2018.**



At the June PPG meeting we also said goodbye and a big thank you to Roger Lambert who has been on the Patient Group in its various iterations since it started.

Roger has been, and will remain, a true and fair critical friend to the Practice.



**Devon pinpoint** is a relatively new website showing support services that are available in the local area e.g. care at home, the Blackdown Support Group and the Blackdown Healthy Living and Activity Centre.

Don't be fooled by 'Devon' in the title, it does cover The Blackdown Hills too and contains a lot of useful information. We will be increasingly directing patients to look at these help and support services.

It can be found at <http://www.pinpointdevon.co.uk/>