# THE SANDRINGHAM PRACTICE

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# **NEWSLETTER - JANUARY 2014**

Hello everyone,

I thought it sensible to update you on some of the changes which have taken place over the last few months that have been causing some issues with a number of our patients.

### PERSONNEL CHANGES

Our clinical team continues to be unchanged since August though Dr Mazai returned briefly to the UK and he commented that the service our patients receive is far higher than his patients expect in Australia but then again the healthcare system is not free unlike the UK so expectations differ. Our excellent new receptionist recruits, Alison and Jordan are progressing well with their training.

#### 2013 FLU CAMPAIGN

We started our seasonal flu campaign quite early this year starting with those patients with qualifying Chronic Diseases in September. We continue to invite qualifying patients so if you haven't been invited yet and normally have a seasonal flu vaccination please contact reception to ensure you are properly protected and whilst stocks last.

# NEW TEXTING REMINDER SYSTEM

The texting system does appear to be reducing the number of non-attendees which means appointments are not wasted. Please try to help us by letting us have up to date mobile numbers.

### EXTENDED OPENING HOURS

We introduced changes to our extended hours opening 3 months ago as advised in our September Newsletter this means we now offer pre-booked early morning appointments from 7.30 on Tuesday, Wednesday & Thursday mornings in addition to a late evening surgery from 6.30pm until 7.15pm, all by appointment only though we will not be open for appointment booking or enquiries during these times.

### TELEPHONE ACCESS

Since we started taking back our phones at 8.00 am each morning and increased the numbers of staff in our reception office last month we would hope that you should be finding it a little easier getting through to the Practice. We will continue to monitor.

### PRESCRIPTION REQUESTS

Since we have started answering our prescription line phone in a morning this has meant that the Practice can turn requests around more effectively. We continue to encourage the use of local pharmacies & internet ordering though would apologise for any patients who had a fond spot for the telephone message system! Please can you try and ensure that your medication is requested in advance of being needed.

#### NON-UK PATIENTS

There has been a lot in the press over recent months relating to 'healthcare tourists'. Over the last few months I have received a few patient comments concerning 'immigrants' being given preferential treatment at the expense of established patients and these comments have suggested that it is a quite widely held view from our patients apparently. I can categorically say that this does not happen. All of our patients are subject to the same appointment system and none of the comments have any substance with me, the staff, nurses or the doctors. I can only assume that incorrect conclusions are being drawn from observations and these beliefs are circulating incorrectly as fact. Should anyone believe they have seen such an example please raise this with me so I can allay your concerns.

#### TRIAGE

Our Telephone Triage system has now been working for 6 months. The use of the Triage system does provide us with far more capacity for dealing with variable demand for attending to all of our patients urgent/acute needs. On a quieter day we have attended to a little over 30 patients and peaking at over 80. Whilst many of you appear to quite like this service I would like to respond to some general points:

> 'I want to talk to a doctor not a nurse' - The nurses generally screen triage requests and usually call a patient in order to properly assess them prior to offering advice, booking an appointment or

passing on to the duty doctor. Please provide the nurses with the information they need to help you. This will minimise the time they spend on the phone with you which will enable you to be attended to more quickly and allow them to see other patients more quickly also. This largely mirrors the 'A & E' approach of assessing the clinical needs of the patient in order to prioritise and provide the most appropriate treatment.

- > 'I don't want to tell the receptionist what is wrong with me' All patients are at liberty to refrain from advising matters of a personal nature. Without some basic information, our clinicians will be unable to prioritise your needs.
- > 'I want to see someone now!' We are not a walk in centre, all of our care services are provided by appointment; this has not changed with the introduction of the triage system.
- 'Why can't you tell me when I will be called back' All triage requests are logged in chronological order & will be assessed by the nurses and prioritised, forwarding on to the duty doctor if clinically needed. Whilst for example you may have a sore throat and may only have three patients booked before you on the list if the next three involve a terminally ill patient, a sick baby or suspected meningitis case these are likely to be actioned before a more straight forward minor illness.

'What happens if I am not available or miss a call' - In the first instance we normally do not leave any message and we will call you back later; at that stage a message is likely to be left.

'Do I need to call you back if I have not received a call' - this should only be necessary if your condition has worsened significantly or you made your call before 10.00 and you have not received a call-back by 4.30.

By way of footnote, the use of the triage system has enabled us to free up some doctor time for routine consultations and as all of our nurses become conversant in working the triage system this will also free up our Advanced Practitioner Nurses to be available for routine consultations.

### **APPOINTMENTS**

We received some negative feedback over the summer months over our doctors appointment system. We do suffer from changes in seasonal demand & believe it or not we do allow the doctors to take holidays so there are times (e.g. over the school summer holidays) when routine appointments are more limited than we would like though we have supported with locum cover over peak periods. Whilst our overall demand for appointments continues to increase the reasons are not always fully clear though it appears that patient expectation & need is increasing for managing long term conditions in an aging population but isn't due to increasing patient numbers as has been commented as we have the same number of registered patients we had in the summer of 2010. We do see pressure of patients requesting specific part time doctors in particular, which is a difficult one to address. We believe that continuity of care is extremely important, though if booking a specific (part time) GP is causing an issue, it may be worth considering developing a relationship with another doctor here. We accept that there are times when appointment booking has presented issues and whilst our capacity can never be unlimited would like to outline the current routine GP booking options with all appointments are released in three stages:

Monday - release appointments for Tuesday, Wednesday and the following Monday. Tuesday - release appointments for Wednesday, Thursday and the following Tuesday. Wednesday - release appointments for Thursday, Friday and the following Wednesday. Thursday - release appointments for Friday, Monday and the following Thursday. Friday - release appointments for Monday, Tuesday and the following Friday.

We no longer release same day appointments for the doctors as acute problems are dealt with through our triage system but we now release all of our appointments within 7 days.

### Finally . . . RESPECT FOR OUR STAFF

We did see increasing numbers of patients in 2013 who caused issues with rudeness & obtrusiveness when asked straight forward questions by either receptionists, nurses & in some cases the doctors. Whilst you may all have frustrations from time to time please can I ask that you treat all team members with respect, please remember they are trying to help you. I have had comments from patients that come in & 'they know a receptionist will be difficult'. In these circumstances if patients are coming in with a negative & possibly confrontational attitude so it is unlikely they will receive a positive outcome.

Now we are in to the New Year and many will be returning to work or school after the festive break I would like to I wish you a prosperous New Year.

Richard Langtherp
Richard Langthorp, Practice Manager