

## **Our Action Plan – Queens Park Group Surgery**

It was agreed that the most dissatisfaction from patients was obtaining appointments and therefore this was given priority in our Action Plan. We were already operating an Access Action Plan and one of the actions is that patients are allowed to book ahead as far as they require. However, this has resulted in them forgetting their appointments and not attending.

We have changed our opening hours. We now open over lunch time at Queens Park and we also open two Saturday mornings per month for booked appointments. These Saturdays are not necessarily every other Saturday. We tend to work around the Medical Institute GP lectures on a Saturday morning so that the GPs still have the opportunity to attend these.

The main actions were:

Tackle our non attenders rate to enable to free up appointments.

Although we have been writing to non-attenders once they DNA three times, we now use SMS texting so that patients can be reminded of their appointment. They are also texted when they DNA an appointment.

Non-attenders are telephoned after each session to ask them why they did not attend and this is recorded on their record.

We have obtained OAK monitoring software to enable us to establish what our peak incoming telephone call times are. Extra capacity has been put on reception when the phones go through in the morning so that there is a member of staff concentrating on patients at the desk and the other receptionists can deal with phone calls.

To aid patients to book appointments more easily we have purchased the Patient Partner software. This enables patients to book, check or cancel an appointment directly onto to SystmOne on their telephone key pad. This will be implemented in March 2013. This will give patients another route to book an appointment and is available 24 hours a day 7 days a week so patient do not have to wait until 8.00 a.m. in the morning to book an appointment. Patients can specify which GP they require, which site and the system finds the next available appointment for them.

We did have some negative comments in the survey regarding our reception staff. All reception staff have customer service training as part of their mandatory training programme. However, the majority of our feedback regarding our reception staff was positive.

The areas where we could not achieve what the PRG wanted were:

Having gaps between appointments. It was suggested that we have gaps between appointments so that patients do not have to wait but this is impractical as we would provide less appointments.

It was also suggested that we use the EasyJet booking system and overbook but this was rejected as if all patients did attend the surgery would be running even later and patients having to wait even longer. We do indeed use this if we are sending out appointments for annual checks, smears etc because we know by experience that not all of these will attend.

Provide more emergency appointments. At present, all emergencies are seen on the same day. We have put up some posters in the surgery with an explanation of minor illnesses endeavouring to educate patients what is an emergency. Also, what to keep in their medicine cabinet at home.

### **The progress made with the action plan**

The summary of the progress as of 28<sup>th</sup> February is:

You said	We did
Appointment availability	Plan how to tackle our non attender rate Plan to implement new telephone software for booking appointments. We have increased the sessions of our Minor Illness Practitioner from 4 to 7 Offered telephone appointments with the doctors Offering two Saturday surgeries per month

The result is

We are continuing to inform patients of our non attender rate weekly and, wherever possible, the impact on the practice and patients is explained to them, for instance if patients do not attend or book more than one appointment and do not cancel the latter one. Some patients also book several appointments for other members of their family or community and it has been noted that often these patients do not attend. It was agreed at our PPG meeting that leaders of the community will speak in the Mosque and Gurdwara to explain the impact on the availability of our appointments.

Patients that DNA are telephoned on the day and asked why they failed to attend.

We are offering more appointments from our Minor Illness Practitioner (45 appointments per week).

We are offering telephone appointments with our GPs on a daily basis.

We no longer close at lunchtime. This has not provided any more appointment slots but gives the patient more access to other services.