Our Health Partnership

Greenridge Surgery

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13th June 2023.

Dear Patient,

Re: Changes to GP consultation / appointment booking system.

We are writing to tell you about some changes to our processes for requesting consultations with a GP, and for how requests are prioritized and appointments booked. These changes will take place from 19th June.

(There are no changes to our systems for booking appointments with the practice nurses)

We are going to stop using E-consult, and start using a much simpler request form instead:

https://florey.accurx.com/p/M85006

In this letter we have provided some information about why we are changing the system, and what the new approach will be. There is a summary on the last page, which you may wish to keep.

Background

Our appointment system changed dramatically soon after the start of the Covid pandemic. Patients currently make requests either using our E-consult system, or by phone, and are then contacted by a Doctor on the same or next working day. If a face to face appointment is necessary the doctor arranges it, but some calls are dealt with by message, email or phone call.

There are some advantages and problems with this system:

Advantages	Problems
Econsults can be submitted without having to wait on the phone	Some patients report that the form is long and cumbersome
The doctor knows what a consultation is about in advance, and so can look for relevant letters / reports / results in advance	Patients do not know what time they will be contacted at, and so frequently miss our calls.
We can prioritise the most urgent calls.	The GPs are spending a lot of time every day making repeated phone calls, patients report being frustrated by missed calls
85% of patients are contacted on the same working day, and 15% the following working day.	There is no limit to the number of patients who can contact us in a day. This makes it difficult to manage workload.
Waiting times have remained extremely short throughout.	We have had doctors leave Greenridge to go and work at 'easier' surgeries.

We offer a large number of consultation slots; we have substantially more GPs than would be normal for our list size, and each GP does more consultations per day than average. Despite this we have been using large amounts of additional locum cover, which is not financially sustainable. (especially as we have also had very large increases in running and utility costs, which have not been funded)

We cannot simply revert to a 'traditional' appointment system, where appointments are made available on a 'first come – first served' basis. These traditional appointment systems were effectively a lottery, where appointments were allocated based on who managed to get through on the phone at the right time, rather than based on clinical need.

Even if we thought going back to a traditional appointment system was the best way forwards, recent changes to our contract made by the Government make this impossible.

The government have recently imposed changes to the national contract GP practices have to abide by				
	"Make an assessment of need, or signpost to an appropriate service, at first contact with the practice"			
These changes require us to:	Ensure that: "Assessment will be equitable for all modes of access"			
	(this means we cannot have different systems for patients contacting us by phone, in person, or electronically)			

We have to assess the urgency of every request, at the point it is made. Once this assessment is completed we must use this information to offer appointments / consultations based on clinical urgency, OR signpost patients to another service where we believe this is appropriate.

We cannot work within the requirements of these contract changes, and allow direct booking of GP appointments without an initial 'triage' or assessment process.

We also cannot continue with our current system, with unlimited demand on each day. We plan for each doctor to deal with around 40 patients per day, on some days demand has outstripped this by so much that doctors have dealt with over 80 patients in a day. Once numbers are this high, it is hard for the doctor to give any individual patient enough time, and the risk of mistakes obviously goes up.

We must have a way to make sure that the most urgent requests are dealt with soonest, and that the clinician dealing with the request has enough time to deal with it properly and safely. Making sure that the most urgent needs are dealt with very quickly, necessarily means that some less urgent problems will wait a little longer.

We have looked at a wide range of different systems used elsewhere in the country, before deciding which to adopt.

From 19th June 2023

We will be switching to a triage tool called Accurx – this is a bolt on to the messaging software we already use.

https://florey.accurx.com/p/M85006

It allows patients to make a request for a consultation, by filling in a (much shorter than Econsult) questionnaire. The questionnaire can be completed on a smart phone, or on a web browser, and should usually take less than 2 minutes to complete.

For clinical requests, there are 5 short questions, and the option to upload pictures. For admin requests there are a range of options, including fit (sick) notes requests, following up referrals and reports, or following up test results.

If a patient cannot complete the questionnaire themselves, then the reception staff will be able to complete it on their behalf. We would be very grateful if everyone who is able to fill in the request themselves does so; this will allow our receptionists to help those who need it. It should only take a minute or two to complete the form, and this will save you having to hold in our telephone queue.

The completed requests are put into a single queue, based on time of submission - a request submitted by the receptionist will not 'jump the queue' of requests submitted by patients.

Once we have the request, it will be assessed as quickly as possible by our triage team, and we will contact you. Some requests will be able to be dealt with quickly and efficiently by messaging, whereas others will need an appointment booking, based on the clinical urgency. We aim to respond to the vast majority of requests on the same day, though request received at the very end of the day may not be dealt with until the following morning.

We realise that any change to our systems will be popular with some patients, and not with others. We know that everybody would have their own favourite approach.

We have worked really hard to maintain excellent access to our services, with extremely short waiting lists. We know though that repeated missed calls are frustrating (for you and us) and we have been told that the E-consult form is too complicated. We are making changes to ensure that we comply with our new contractual requirements, that we treat people as fast as we can, and that we deal with the most urgent cases first.

We know that there may be some teething problems, but will do our best to iron them out as quickly as possible.

Yours sincerely

The partners of Greenridge Surgery.

Submit Request –	https://florey.accurx.com/p/M85006					
using smart phone	Clinical requests can be submitted 0730-1930 Monday to					
or web browser	Thursday, and 0730 – 1800 on friday					
If you cannot	Contact reception, who will complete it on your behalf.					
complete the request						
	receive will be in a single queue, and assessed / triaged by a					
	as possible. You will be contacted as quickly as we are able					
	after your submission, and certainly by the end of the next working day.					
The triage team will a	ssess and prioritise every request:					
Emergency / Same	You will be sent an appointment by text or phone for the same					
Day	day.					
Urgent – same or	You will be sent a link allowing you to book an urgent					
next day	appointment.					
Not Urgent	You will be sent a link allowing you to book a routine					
	appointment					
Face to Face or	Our appointments are face to face by default. If you					
telephone	specifically prefer a telephone appointment, and you are					
	confident the doctor will not need to examine you then you					
	will have this option					
	All appointments – face to face or telephone – will be for a					
specific time. For telephone appointments we will call you as						
	close to the time you have booked as possible.					
Appointment with	If there is a particular doctor who is likely to be the best					
'best person'	person to deal with your request then you will be sent an					
-	appointment with that person. You will be able to change this					
	if it isn't convenient.					
	We also have a number of other specialist staff attached to the					
	surgery, including musculoskeletal and mental health					
	specialists.					
No appointment	Some requests will be able to be dealt with by message / email					
needed	– for example renewals of some sick notes, or following up					
	about hospital referrals.					
Signposting to other	It may be most appropriate to refer or signpost you to another					
service	service, either because we cannot treat your problem (eg dental					
	problems) or because another service is more appropriate					
Repeat Prescriptions	Can be ordered using the NHS app (You can ask reception to					
	give you a link to access this)					
	Or by filling in the slip / in writing.					
	We do not take repeat prescription requests by phone, or by					
	email.					
Home Visits	Home visit request for the same day – please phone reception					
	as early in the day as you can.					
	If not urgent – then you can phone, or send a request using the					
	triage tool					

You can have access to your records so you can see all of your

test results, and the doctors comments about them. Ask at

triage tool.

reception for access.

Access to records /

results.