## NORTON MEDICAL CENTRE

## PATIENT SURVEY OF NEW APPOINTMENT SYSTEM

## <u>SUMMARY</u>

Responses were from both male and female patients from across the age spectrum. NB: Not all patients responded to the demographic questions.

- 1. 81% of respondents were satisfied with the outcome of the consultation and the way in which it was conducted.
- 2. 81% of respondents were aware that the appointment system had changed before contacting the practice.
- 3. 85% of respondents like the idea of being able to speak to a doctor without needing to attend the surgery
- 4. 76% of respondents reported finding it easy to get through to the practice by telephone.
- 5. 4% of respondents didn't understand why they were being asked questions about their problem
- 6. 88% of respondents were satisfied with the type of consultation offered.
- 7. A minority of patients advised that they were unable to receive phone calls during the working day, or that it was inconvenient for them to do so.
- 8. 99% of respondents felt that their problem had been taken seriously
- 9. 10% of respondents felt that the doctor or nurse was unable to offer reassurance over the phone.
- 10. 70% of respondents said that the telephone consultation was more convenient than a traditional appointment.
- 11. The majority of patients reported they were given a face to face appointment on the day of their choice.
- 12. The majority of patients reported that they usually saw the doctor or nurse that they spoke to on the phone and found the earlier telephone conversation useful.

The full survey results are available on the Practice website; www.nortonmedicalcentre.nhs.uk or by request from Reception.

## WHAT COULD BE IMPROVED

Please note where comments are similar they have been listed in one column.

YOU SAID	WE SAY
only worry is that some physical signs may be	Any mental health issues should be recorded in
missed by the doctor by patients who are	the patient's notes and will be taken into
reticent to talk over the phone or have mental problems	consideration by the doctor taking the call.
	Any patient who does not wish to talk over the
	telephone should let the doctor know this and a
	face to face appointment will be made.
1. I am very satisfied with the new system and	Good to hear. Thank you all for taking the time
hope it continues	to make positive comments.
2. Everything worked extremely well for me	

<ul> <li>most impressed</li> <li>3. My experience using the new system has been quicker and easier</li> <li>4. I am impressed with how well this is working. Well done all the staff for being so efficient through the changes</li> <li>5. A great idea especially for those who work full timeReception staff have always been helpful and sensitive.</li> <li>6. Very impressed so far.</li> <li>7. Satisfied – glad we moved on from old system</li> <li>9. I think it was fine</li> <li>10. Would need more time to assess First impression is encouraging</li> <li>11. All of my comments are in yes so quite happy</li> <li>12. In my case nothing can be improved. Thank you.</li> <li>13. The new system has been more convenient for my needs and has worked for me.</li> <li>14. Pleased with the new system thank you.</li> <li>15. Much better system for me.</li> <li>16. I've used the system twice with excellent results. Very impressive and very effective.</li> <li>17. Nothing can be improved</li> <li>18. A less wasteful system than beforeadvice is all that is required.</li> <li>Older patients are not confident of the system or able to communicate over the telephone as they would wish to ensure the true picture is portrayed.</li> <li>Anyone who feels they are not able to communicate over the telephone as they would wish to ensure the true picture is portrayed.</li> </ul>
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1. The problem with the ring back service is The Practice completely understands that some
it takes no account of patient privacy patients may encounter difficulty in receiving a
2. Not always able to speak to doctor in confidential call. If you have any such problems
private when call back due to work please let the receptionist know and they can
commitments offer a range of solutions such as:
3. Make appointment system sympathetic • a call back at a specific time;
towards those who work and who • an immediate transfer to the doctor (if
cannot wait idly for a telephone the doctor is available) or;
consultation and who cannot attend the <ul> <li>hold the line until the doctor finishes the</li> </ul>
surgery for a face to face at the drop of a call they are on.
hat. Specific appointments should be
available very early in mornings and late When you speak to your doctor he/she will be
available very early in mornings and late night. Also it would help to call for an happy to book an appointment for you if you are

appointment for attendance on another day. This would help with the work life balance.	unable to discuss your problem over the telephone.
<ul> <li>4. I think this will be hard when working – need to be near a phone.</li> </ul>	Because you are speaking to the doctor any appointment can be made on a day and at a time
<ul> <li>5. Surgery does not offer appointments appropriate to full time working hours (8:30 – 5). Also unable to make future appointments. Encourages time off work to be taken. Would be convenient if</li> </ul>	convenient to you (within opening hours) The doctor is also in a position to offer more flexibility on the time of the appointment than a receptionist would.
<ul> <li>surgery offered one "late night" and if appointments could be made online – again only in working hours.</li> <li>6. Only problem I have is if I needed to make an appointment for my husband</li> </ul>	The current NHS contract to provide extended opening hours is not felt to be viable for our Practice so there are no current plans for late nights or weekend opening. Should a new contract be offered we will give it due
who works he has not notice to tell work	consideration.
for e.g. He needs to leave early to see the doctor etc.	Future appointments can be booked in discussion with the GP to enable planned time away from work where necessary. However, we hope that if the problem can be resolved over the telephone this may reduce the need for time away from work rather than increase it.
I prefer the old appointment system never had a	Unfortunately, the old system was
problem with it	unsustainable. We were struggling to meet the
	demand for appointments and our 5pm sit and
	wait surgeries were ever expanding.
advise how long it would take for the GP to call	Patients should be given an estimated time for
me back as I thought it was going to be immediately.	their call back. This can change depending on the length of other calls and any urgent home visits but apologies that you weren't given a rough timescale.
There is a significant time delay before being	Sorry to hear the wait was excessive. This can
spoken to.	sometimes happen depending on the length of other calls. However, it is important that the
	doctors do not rush through calls and give each patient the time that they need.
I think if you are passing the surgery you should	One of the reasons that the system was
still be able to call in to make an appointment,	introduced was because the doctors were seeing
not told you are supposed to do it by phone.	an increasing number of patients in consultation for things that could have been dealt with
	equally, effectively and more efficiently over the
	telephone. Rather than the receptionist booking
	the appointment following a protocol, the GP is now in charge of booking appointments on the
	basis of clinical need. Any patient who calls at
	the surgery to book an appointment should be
	offered the choice of leaving their contact details
	for a call back or sitting and waiting. The wait
	may be lengthy as that patient will be seen at the time of their call-back slot.

<ol> <li>It takes 15 minutes to answer to call initially then I received 2 can doctors and eventually a doctor the appointment which seems of a waste of doctors time.</li> <li>It was a little difficult to get the difficult to get th</li></ol>	alls from 2understandably frustrating. However, under the new system the receptionists do not take as long answering a call as all they do is log brief details of the problem. Under the old system it took much longer to locate the next available
the telephone to speak to the receptionist	If you take one call in isolation the new system
<ol> <li>Took nearly an hour to get three automated telephone service to a receptionist (it kept cutting not because of high volume of call</li> </ol>	ough the to speak tomay not seem to save the doctor's time, but statistics suggest only one in every three calls result in a face to face appointment, so overall
<ol> <li>Although the system is OK I do face to face appointment system</li> </ol>	
5. More telephone lines. Separat	e more staff to answer them and like any other
extension number of telephon	
<ol> <li>Just dissatisfied with the phone otherwise good.</li> </ol>	e process, within our budget. With this system there is no need to ring first thing on a morning; calls can be
	made later in the day when lines are less busy.
Talking about an ailment at a time is us sometimes different ailments are linke over the same thing to the receptionis phone when all you want is a follow up appointment I don't want to be kept o listening to music for 8-10 minutes	ed, going t on the a follow up call about the main issue and keep the detail for a conversation with the doctor. Unfortunately, if you are on hold for 8-10 minutes it is because the receptionists are speaking to other patients. An advantage of this new system is that you do not need to ring first thing on a morning to receive help and if your problem is not urgent you may like to ring later when the lines are less busy.
I feel the questions in this survey have	
made in favour of the surgery. I don't receptionist should be asking what is w	
making a decision as to a nurse should what medication a patient should have think we should be able to see a docto	decideopportunity to voice their opinion and manye. I dopatients used that to give positive feedback.
	The receptionists do not make any decision
	about who should be seen by the GP. The
	receptionist's role in this system is to record a brief description of the nature of the call so
	enable the doctor to call patients back according
	to the urgency of their condition.
	Any patient who does not wish to share even the briefest of details about their complaint with the receptionist should just say so. It is entirely understandable and your wishes will be respected.

	Our nurse practitioner is fully skilled to treat a
	range of minor ailments and able to prescribe
	anything that your doctor can, but if you wish to
	see a particular GP just ask and if he/she is
	available you will be added to their call-back list.
I feel that concerns/problems that I want to see	Any patient who does not feel reassured or
the doctor about may be a bit rushed over the	satisfied with the outcome of their telephone
phone and not go as in depth if I was to see the	consultation is encouraged to let the doctor
doctor in person	know and they will be offered a face to face
	consultation. Even if you end the call and wish
	you had asked another question or decide you
	would still like to see a doctor in person please
	ring back. This is not a problem and your doctor
	will make an appointment with you.
Sometimes need more time for face to face	One of the benefits of this system is that the
consultations	doctor books the appointment with the
	individual and their problem in mind. They have
	absolute flexibility to book appointments at the
	best time of day and for the duration required,
	all tailored to the needs of a particular patient.
The phoning back process only works for people	In normal circumstances no one should have to
with mobile phones; my elderly mother does not	wait all day for a call back. We understand that
own a mobile and has to wait in all day to avoid	patients may need to go out so if they let the
missing the doctor's call.	receptionist know, a note can be added to
It woods to go book to how it wool don't like	request a call around a particular time.
It needs to go back to how it was I don't like talking to other people about my problems that's	All of our staff, including Receptionists, are contractually bound to respect patient
why you see a doctor confidential	confidentiality. Receptionists only ask for details
	of the call in order to help the doctor to call
	patients in order of clinical priority.
	You do not have to talk to anyone else about
	your problems if you choose not to. Please just
	tell the receptionist that you do now wish to give
	brief details of your medical problem and your
	wishes will be respected.
Could not fault the attention by nurses but feel a	Any patient who would like a visit is welcome to
visit by the doctor after leaving hospital would	ring and request one. Unfortunately, with a list
have put my mind at rest a little more.	size of 17,135 patients the doctors are not able
	to visit all patients who are discharged from
• • •	hospital as a matter of course.
Cost of ringing the practice? 01642?? Is fine local	A little puzzled by this comment. The Practice
charge. 0845?? Very expensive if on hold for a	transferred telephone provider in November
while (but do appreciate it is an easy way of	2012 and returned to a local 01642 number. This
bringing in funds for the centre, if it does this the	was well ahead of introducing the new
call costs per minute need to be realistic (15p	appointment system in April 2013.
min max)	Calls to recontion should be brief and call be the
	Calls to reception should be brief and call backs
	are at the cost of the Dreatice and not the
	are at the cost of the Practice and not the nationt
Different doctors who don't know you issuing a	are at the cost of the Practice and not the patient. This is very disappointing to hear. Patients can

call back to make an appointment makes me feel passed from pillar to post. Have had 1 x appointment with my own doctor in about the last 4 months which never run to time so I can't see how the service has improved. I think it has got worse!!! It stresses me out when I already feel unwell	<ul> <li>ask to speak to their preferred GP and unless they are absent they should be the one to call the patient back. Not all GPs work full-time and all have annual leave and study leave entitlement but under this new system it should be easier to speak to your doctor of choice not harder.</li> <li>Similarly, appointments should run more to time now because the doctor is actually booking them having spoken to the patient or a time and duration suitable for that individual.</li> <li>If this patient would like to contact the Practice Manager she will be happy to review their notes and try to understand why the system has not worked.</li> </ul>
I suggest that all staff in the medical practice speak clearly to help the hard of hearing. No reply from No. 4 (general enquiries) and No 1 (house calls) is confusing.	Absolutely. Staff are well aware that some of our patients have hearing difficulties and anyone experiencing particular problems is asked to let the Reception Manager know. At busy periods when all of the lines into the Practice are in use patients may receive a message asking them to call back later as all 30 of the incoming lines are busy. Our busiest times are on a Monday and Tuesday morning from 8:30am when the general enquiry line opens. Patients who are ringing for an urgent call or to request a home visit (option 1) are able to ring from 8am and any calls on this line will be given a priority. Patients who ring on this line for routine enquiries or appointments are asked to ring back and select option 4 to prevent queue jumping.
	With this new appointment system there is no longer a pressure on patients to ring as soon as the general line opens at 8:30 to try and secure an appointment on the day. Calls can now be staggered throughout the day and anyone who rings will be spoken to that day (or early the next day if too late to be seen within opening hours). It is hoped that as this new system beds in, patients will feel more confident to avoid the 8:30 rush and this will become less of an issue.