

PATIENT SUGGESTIONS – January, February, March 2023

1. Run over appointment with Dr Field; 30 minutes now maybe longer. 1st appointment of the day? Arrived 10 mins before?

Whilst this may have been the first joint injection of the day, it was not Dr Field's first appointment of the day. Her first patient was at 8:00am. When you say "Arrived 10 mins before?" it's not clear if you are referring to Dr Field, or yourself – we do appreciate that patients like to arrive early as this can help. There are many reasons why GPs run late, and it causes *them* a good degree of frustration to cause delay to others, as well as causing you frustration and inconvenience; however it is never done intentionally. We are seeing increasing numbers of patients bringing multiple problems to one appointment, which we understand the reasons for; however it takes a considerable amount of time to listen to, prioritise and deal with multiple problems. Many problems are far more complex in medical terms these days; other people just need longer to help to deal with their problem, or perhaps we have to deliver bad news - and this is obviously inappropriate to rush through. Patients consistently tell us that they do not feel listened to or properly dealt with when clinicians try to rush in a consultation. This leads to people coming back for further consultations, which leads to longer waiting times for appointments – so we try to avoid this situation.

There may be emergency admissions to be arranged, meaning that the doctor has to spend time on the telephone to arrange the admission. As well as running our own surgeries, GPs are also frequently called upon to answer questions for, and support, our junior colleagues and nursing team if they encounter problems.

2. Put 4+ receptionists on at 8:00am to clear the backlog of people phoning, this can then be reduced at 9:00am

Whilst we already have plans to increase the number of staff answering calls between 8am and mid-morning, we have to ensure all plans are viable and sustainable. The number of telephone calls do not significant decrease at 9:00am, therefore, to reduce staff at this time would not be beneficial. We also have to consider the costs and effects on other areas of the practice. However, from late spring there will be three receptionists answering calls from 8am to mid-morning.

3. Patient came to desk and said they'd put a card in the suggestion box about hand gel. They asked if we could take it out because she just hadn't noticed hand gel. Explained unable to take out but would leave a note

Everyone being asked to touch screen to register. Please put sanitizer by screen as this is how germs are spread if you touch what other people have touched.

No response was provided as patient asked for card to be removed from the suggestion box given hand sanitiser is already in place.

4. More staff available to talk to in person and better communication

We are sorry that you feel there are not enough staff members to talk to. For a long time we have had 6 reception team members who are available to assist you, albeit most are part-time.

To try to cope with current demands, we have employed an additional receptionist each morning to assist with the workload. We are also carrying out a review of our reception areas. We hope you will notice the difference in the coming weeks.

Regarding communication, if you have any concerns about a particular problem with communication within the practice, please raise it with us directly. We are always keen to learn lessons if there have been issues.

5. Have someone on the desk

The front office is manned all day. Where possible, we will also have members of staff on the “old” reception desk. We have heard patient feedback with respect to reception areas and are, therefore, consulting with staff and conducting a review of our reception facilities with a view to making improvements and a smoother patient journey.

6. Open up the “book online” facility for GPs and not just routine appointments

You can use the website forms to contact GPs – it is not just for routine appointments. We withdrew the “Ask a Clinician” form as the volume and nature of the queries became clinically unsafe, and risked a patient coming to harm. However, you can use the “Ask reception a question” form and, where appropriate, it will get passed on to the GP.

7. Quiet music or TV on in the waiting room. It’s so depressing

We share the waiting room with other services in the building. To play music requires a Public Performance License (PPL) which incurs a cost. Even if this cost is paid by the practice, we would then need to agree a specific type of music as not all music is agreeable to all people. As the systems could not be linked, it may also mean that patients would not hear their name being called by the call system. As such, this is not something we feel we can take forwards at this time.

8. Stick to appointment times

We are sorry that our clinical staff sometimes run late. There are many reasons why GPs and nurses run late, and it causes *them* a good degree of frustration to cause delay to others, as well as causing you frustration and inconvenience; however it is never done intentionally. We are seeing increasing numbers of patients bringing multiple problems to one appointment, which we understand the reasons for; however it takes a considerable amount of time to listen to, prioritise and deal with multiple problems. Many problems are far more complex in medical terms these days. Other people just need longer to help to deal with their problem, or perhaps we have to deliver bad news - and this is obviously inappropriate to rush through. Patients consistently tell us that they do not feel listened to or properly dealt with when clinicians try to rush in a consultation. This leads to people coming back for further consultations, which leads to longer waiting times for appointments – so we try to avoid this situation.

There may be emergency admissions to be arranged, meaning that a doctor has to spend time on the telephone to arrange the admission.

As well as GPs running their own surgeries, they are also frequently called upon to answer questions for, and support, our junior colleagues and our nursing team if they encounter problems; or a nurse or GP registrar may need to wait to speak to a senior colleague to clarify something or to improve your care.

9. Phone lines are constantly engaged

Unfortunately with in excess of 8,200 patients our phone lines are inevitably busy – just as with any other practice in the UK. In recent weeks we have taken on additional staff to help answer the phones from 8am to mid-morning. We hope that this will ease the pressure, but we will keep the situation under review.

PRAISE

1. Fantastic service as always. First time seeing James and he has put my mind at rest. Thank you.
2. Would like to say a huge thank you to all the staff at the Medical Centre for their help, kindness and professionalism. Whenever we have had to use your services, doctors, nurses, office personnel, we have always been treated with prompt, efficient and caring service. A special thank you to Dr Evans and Dr Imoudu.
3. Keep up the great work everyone.