

# ***Theale Medical Centre***

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## **FREQUENTLY ASKED QUESTIONS**

### **INDEX**

#### **Appointment System**

**A1.** What is Advance Access Appointment System?

**A2.** Why have you changed your appointment system so many times in the last 18 months?

**A3.** Sometimes when I make an appointment for the future, (i.e. more than 2 days away) the first free date is too far away and then I have to ring back nearer the time only to find that all the appointments have gone?

#### **Confidentiality**

**B1.** Why does the receptionist sometimes ask me what is wrong when that's between the doctor and myself?

**B2.** I understand that I can have my records placed on restricted access?

#### **Doctors Duties**

**C1.** Why am I telephone assessed?

**C2.** Why can't I get an appointment time on the same day that I 'phone that suits me?

**C3.** What's the difference between a duty doctor and any other doctor?

**C4.** Why do I have to wait so long to see the duty doctor?

**C5.** Why am I always seeing different doctors?

#### **Opening hours**

**D1.** Now that the Centre is closed on Saturdays, I can no longer use the dispensary.

**D2.** Why did you decide to close on Saturdays?

**D3.** Why are Calcot and/or Bradfield sometimes closed when previously it was open on the same day of the week?

#### **Seeing your doctor**

**E1.** Why do the receptionists offer me any doctor rather than my own?

**E2.** When I make an appointment, I want to see a doctor not a nurse.

**E3.** I don't want to be telephoned assessed I want to see a doctor.

#### **Services**

**F1.** You run so many specialised clinics. Just what do they all do?

#### **Telephone System**

**G1.** Why am I placed in a queue when I phone for an appointment?

**G2.** How can I avoid phone queuing first thing in the morning?

**G3.** Why does it take so long to answer the dispensary 'phone?

**G4.** Why do I have to stay in the telephone queue for so long?

#### **Facts & Figures**

## Appointment System

**Q A1.** What is Advance Access Appointment System?

**A.** This is a government introduced initiative that laid down that a patient should have access to a nurse within 24 hours, a doctor within 48 hours and also be able to make an appointment some time in the future.

**Q A2.** Why have you changed your appointment system so many times in the last 18 months?

**A.** There has been several reasons for this. The original Advance Access Scheme stated that a patient should be able to see a doctor on the day. This did not take into consideration that most practices run dedicated clinics for some complaints and common problems and that some problems do not have to be attended to immediately. The original scheme led to an increase in the number of patients seeing a doctor and a decrease in patients attending the specialised clinics. This clearly wasn't in the interest in the patient or practice long term. Further more, phoning up on the day didn't give an appointment time that was necessarily convenient which meant phoning back the next day.

The Advance Access scheme was changed to the one as described in [Q A1](#). We constantly review and "tweak" the system as patient demand and illnesses change.

**Q A3.** Sometimes when I make an appointment for the future, (i.e. more than 2 days away) the first free date is too far away.

**A.** This is due to a number of factors such as holidays, unexpected peaks in appointments, clinical staff being trained, patients not willing to see a nurse, even doctors going sick (yes, they go sick just like anyone else) etc. Wherever possible we try and predict these events and endeavour to get locum cover or put on extra sessions. Regrettably, this is not a precise science and locums need to be booked well in advance. This is when you may see Bradfield or Calcot close. This all has a knock on affect when trying to make an appointment in the future. These, "Next Available Appointments", as we call them, are constantly monitored and we are striving to improve the situation. If you explain the situation to the receptionist, she will ask the doctor if you can be fitted in nearer to the time you requested. She will need to call you back if the doctors are in the middle of their surgery.

## Confidentiality

**Q. B1.** Why does the receptionist sometimes ask what is wrong when that's between the doctor and myself?

**A.** The receptionist is the first line of support and is endeavouring to give you an appointment with the right doctor or nurse that can best help you with your ailment within the correct time frame. We run a variety of specialised clinics where a specialist may be the best person to see to treat the problem. It is true, that you are not at liberty to give any information to the receptionist but they are only requiring the basics to be able to help you. Because of this, all our staff has signed a confidentiality agreement, which is taken very seriously.

**Q B2.** I understand that I can have my records placed on restricted access?

**A.** This is true, you can request that only certain people can view you records. We are currently living in a society that is both promoting "Freedom of Access" and "Data Protection". In reality, these are two opposites that have to be balanced. If you restrict access to tightly then in an emergency certain members of staff may not be able to help you because they cannot get access to your records. This may put your life at risk. We recommend that you do not restrict access unless recommended by your Doctor. Remember ALL our staff are covered by a confidentiality agreement. This can lead to a disciplinary, dismissible or even a legal offence should this be breached.

## Doctors' Duties

**Q C1.** Why am I telephone assessed?

**A.** This will only happen if you have phoned in for an appointment for the same day and there are no more appointments. Basically, 50% of appointments requested for the same day are not urgent and can be treated by other means. Whether there are appointments or not, if the doctors feels you should be seen you will be seen.

**Q C2.** Why can't I get an appointment time on the day I 'phone that suits me?

**A.** Appointments on the same day usually mean seeing the duty doctor as regular appointments are filled days before. The duty doctor is there for patients that have to be seen and/or assessed that day because their condition won't wait. If the time you are given to attend or be 'telephone assessed is not suitable then perhaps your condition is not serious enough to be seen the same day?

**Q C3.** What's the difference between a duty doctor and any other doctor?

**A.** The duty doctor will see those patients who are too ill to wait for a regular appointment. The duty doctor is also "On Call" and may have to visit patients at short notice.

**Q C4.** Why do I have to wait so long to see the duty doctor?

**A.** The duty doctor will see those patients who are too ill to wait for a regular appointment. The duty doctor is also "On Call" and may have to visit patients at short notice. Although patients are given a time to see the duty doctor, patients must be prepared to wait for up to an hour before being seen. The nature of the patients the duty doctor sees means that average appointment times cannot be applied. Especially if the duty doctor is called out.

**Q C5.** Why am I always seeing different doctors?

**A.** There are several reasons for this:-

1. Perhaps your normal doctor was not available.
2. The doctor you are seeing specialises in your problem.
3. If you saw a different doctor and you are returning for a review of the same condition then it is better to see the same doctor for that condition.

## Opening Hours

**Q D1.** Now that the Centre is closed on Saturdays, I can no longer use the dispensary.

**A.** The dispensary had to open on Saturdays because there is requirement that states that patients living too far away from a chemist must be able to get their drugs from a surgery's dispensary (providing the surgery has a dispensary). The fact that it was open meant that others could use it was actually an unintentional bonus.

**Q D2.** Why did you decide to close on Saturdays?

**A.** We opened on Saturdays for emergencies only and because there wasn't an out of hours service at that time. Now that Saturdays are covered by Westcall Out of Hours Doctors service, there is no need for a duplication of service.

**Q D3.** Why are Calcot and/or Bradfield sometimes closed when previously it was open on the same day of the week?

**A.** Both these surgeries are branches of Theale Medical Centre. All patients are registered at Theale and not the branches. Calcot and Bradfield were opened for the benefit of patients living away from Theale but there is no obligation to maintain regular opening hours. Theale however, has to be open at the stated times and therefore has to have a minimum number of staff for it to

operate. Although we endeavour to maintain staff levels at all our locations, from time to time this is unavoidable. When this happens we have to withdraw services from the branches so that Theale can function.

## Seeing Your Doctor

**Q E1.** Why do the receptionists offer me any doctor rather than my own?

**A.** This is partially answered in Q [C5](#) but technically, you are assigned to the practice rather than a specific doctor. However, we at Theale Medical Centre do assign you to a specific doctor and will always try to make an appointment with that doctor or the doctor you last saw in the case of a review of the same condition. Some of our doctors are part time and are therefore not always available at the times that suit you.

**Q E2.** When I make an appointment, I want to see a doctor not a nurse.

**A.** There are several reasons why you are asked to see a nurse. Here are a few examples:-

1. Some of our nurses are specialists in certain fields and treat patients more regularly with the problem than the doctor.
2. We hold regular clinics on certain complaints.
3. The problem may be more effectively dealt with by one of the specialist clinics, which frees up a doctors appointment slot, which could be used by a patient with a more serious condition.

Please note that a nurse always has immediate access to a doctor should the need arise.

**Q E3.** I don't want to be telephoned assessed I want to see a doctor.

**A.** If you think you cannot wait to see your doctor on a regular appointment and our duty doctor appointments are full then your condition will be telephone assessed. Here are some advantages of being telephoned assessed.

1. It may be quicker than attending the surgery.
2. If you are feeling really unwell then you may not want to go out.
3. The doctor may decide to visit you.
4. The doctor may be able to give you some immediate advice and reassurance.

If necessary, the duty doctor will ask you to come to the surgery.

## Services

**Q F1.** You run so many specialised clinics. Just what do they all do?

**A.** Ask the receptionist for the "TMC Services" Leaflet.

## Telephone System

**Q G1.** Why am I placed in a queue when I phone for an appointment?

**A.** We are busiest between 8:30am and 9:30am because patients want the earliest time they can get to see the Duty Doctor. Our call rate is 2 to 2<sup>1</sup>/<sub>2</sub> times higher in the first hour than any other time. It is not practical or economic to increase the number of lines or employ extra staff for just this one-hour. Basically, if you want to make an appointment for another day or have any other enquiries then the first hour should be avoided. This would in turn reduce the queuing time for more urgent appointments. For the rest of the day we run on average at about 86% capacity which means you will only queue for a short while if we have a sudden peak in calls or have several lengthy calls at the same time.

**Q G2.** How can I avoid phone queuing first this in the morning?

**A.** Actually, this isn't as simple as 'phone later. Patients mainly phone this early, typically 8:30 to 9:30, to see a doctor as early as they can probably because they think they won't get in on the day. The chances are that you will be telephone assessed anyway so 'phoning between these hours won't make a lot of difference.

**Q G3.** Why does it take so long to answer the dispensary 'phone?

**A.** We accept that there are delays but unfortunately dispensing carries a qualification that only certain members of staff have. A lot of the queries we get require a qualified person to answer them. If our staff are busy serving then the phone regrettably takes a back seat.

**Q G4.** Why do I have to stay in the telephone queue for so long?

**A.** Most people tend to 'phone within the first hour of opening in the morning. This produces a huge peak in the first hour where we could easily do with 4 lines and two extra people instead of our normal 2. After that, we have periods of calm where the phone lines can quiet easily be dealt with by 2 members of staff without anyone queuing for any length of time. Clearly, it is not economical to employ staff or pay for lines that would only be used for short periods.

## **Facts and Figures**

For those who really want to know.....

During February 2005 we:-

- Saw 2689 Patients.
- Dealt with 742 phone assessments.
- Did 357 home visits (includes residential care).
- Wrote 214 referral letters.
- Processed 882 incoming Hospital/consultant letters and reports.
- Issued 2738 prescriptions.
- Handled 16,402 phone calls. Of which:-
  - 99% were to or from patients.
  - 11,809 (72%) were incoming calls.

### Phone System

Our phone system works 24 hours a day 7 days a week. When the Centre is closed, it gives callers essential information and redirects calls to Westcall Out of Hours Doctors service.

Phone calls...

On 5<sup>th</sup> April 2005, we dealt with 660 incoming calls and 184 outgoing calls of which 99% were with patients.

Taking a real example, we had 139 calls in the first hour of Tuesday the 5<sup>th</sup> April 2005. 73 calls in the second hour, 73 calls in the third hour and 74 calls in the 4<sup>th</sup> hour. With the average call duration being 1 minute 24 seconds means that the last 3 hours we were running at 86% of capacity but the first hour we were running at 162% of capacity.

### Staff

The Practice has 61 people working the three Surgeries but not necessarily working for the Practice as some of the clinical staff is employed by other NHS agencies that supply a specialist service to us on a regular basis. In addition, because of the length of time we are open the staff hours are staggered so most of our staff work part time. About half are on the premises at any one time.