**Patient Information- Answers to the Questions Raised by our Patients**

**in our 2018-19 Survey and Friends and Family Questionnaire**

1. **Continuity of Care - Your Named GP – Why This is Important for YOU**

We believe that for most issues it is important to have continuity of care and to see your named GP. This is because they build up a picture of you and your medical needs. We are changing the Patient Access and telephone systems to support this. Routine follow up appointments with your usual GP can be booked up to 4 weeks in advance.

If you need to be seen for an acute illness that doesn’t need continuity of care we will offer you advice as to the best person to deal with this. This could be a 5 minute emergency Duty GP appointment, a telephone call or advice to see another service.

1. **Why Do We Ask You for a Reason for Your Appointment When You Book?**

The GP Partners have asked our Receptionists to ask you for a reason for your appointment. Getting this information enables the Receptionists to make sure that you have the **right type of appointment, with the right Clinician, at the right time**. This avoids unnecessary delays and wasted appointments for all. The Receptionists give all the information you provide to the GP and any information they receive in advance helps you both to make best use of the consultation. For example, say a patient arrived for a GP appointment requiring a wound dressing but had not given any reason to Reception at the time of booking. Wound dressing is not part of a GP’s work. The Patient’s appointment would be completely wasted as they would not receive treatment from the GP and would need to rebook another appointment for another day with a Nurse or HCA.

1. **Home Visits – How These are Defined?**

Home Visits are intended for patients who **cannot** get to the Surgery even with assistance from friends and family. This could be due to an acute illness which makes them temporarily housebound, or because they are permanently housebound (meaning that they are unable to leave their place of residence without special equipment, transport, and assistance **for any reason).** A GP Home Visit can take between twenty minutes to an hour with the travel involved, which equates to the GP potentially seeing between 2 to 6 patients at the surgery in this time. Unless you are completely housebound, please make an appointment to come into the surgery to see a GP. This includes residents in Nursing and Rest Homes.

**4. Nurse and Health Care Assistant (HCA) Appointments**

All Nurse and HCA appointments need to be booked in advance. The Practice initiates many of these appointments, to deal with on-going issues for things like chronic diseases. The Nursing team also deal with minor injuries and do a lot of disease prevention work, including childhood immunisations, smears, flu, and travel vaccinations.

The Nurses and HCAs therefore run lots of different types of Clinics, and as a result we set up a variety of appointment lengths to accommodate the different times needed for each type of Clinic appointment. For example, Smear appointments require a twenty-minute appointment, but a blood test (only carried out on the request of a GP or Nurse), will only require 5 minutes. Our Nurse and HCA Clinics are set up to match our nursing skills, as not all our Nurses and HCAs can carry out every procedure. Diabetic checks for example, require a specially trained Nurse. You can book some types of Nurse and HCA appointments online via Patient Access or the NHS app but only if you have had a direct request to do so in a letter or from a Nurse or GP.

**5. Why a GP, Nurse or HCA Appointment Will Sometimes Be Late Starting**

This usually happens where an earlier appointment has taken longer.

This can be because the reason for the appointment was not made known at the time of booking (see Q&A 2 above) and therefore the 5 or 10 minute appointment booked was not long enough for the needs of the patient.

However, it could be because an emergency situation has occurred at the Practice which needs to take precedence. It is not uncommon for a routine appointment to develop into an emergency or for a GP to have to attend an emergency, Home Visit or have an urgent telephone discussion with Paramedics. In these situations, Reception will endeavour to keep you informed and either ask you if you can wait, transfer your appointment to another GP, or rebook an appointment for you.

**6. When You Are Late - Why it is Not Always Possible to See You**

If you arrive over 5 minutes late for your appointment with a GP, Nurse or HCA you will not be able to book-in via the self-check touchscreen service. You will need to speak to a Receptionist to see if it is possible for you to still be fitted in for your appointment.

The decision as to whether you can be fitted in is made by the Clinician and depends on several factors such as whether the next patient has arrived early and could be seen in your place, or if the Clinician’s room has already been set up for a new Clinic or patient.

We appreciate you telephoning the surgery to advise us if you are going to be late, although if you are over 5 minutes late it is unlikely that we can rearrange appointments to fit you in.

 **7. When You Ask to Speak to a GP - Why a Member of the Administration Team May Telephone You Instead?**

All requests to speak to a GP are communicated from the Reception team to the GP but it is not always necessary for the GP to call you back in person. The GP is the only person who can make this decision. For example, say you call to request a discussion of a change of medication that is not working for you; the GP may alter your medication and ask our Prescribing Clerk to call you with the information thus ensuring that your query gets dealt with quickly and efficiently.

**8. Music and Radio – Why We Play Music and the Choice of Music**

When new GP Practices are built today they must reach a lot of building standards. These include soundproofing rooms for reasons of confidentiality. Any GP Practice that is in an older building (both our sites), will not be adequately sound-proofed, and the only way to cover this is to have a radio/music playing. We get constant complaints from patients wanting classical music, hating classical music, requesting a radio station, not wanting a radio station. **We do** **listen,** **we do** change stations, but we are never going to please everyone. Sorry!

**9. Parking – What Can We do?**

At the College Road site the Council will only let us pay for limited GP parking and we must keep a space free directly outside the door for an ambulance or taxi patient drop-off. We have tried to ask for more space, but being in a residential area, the Council will not budge. At the Ian Gow site we have limited GP and NHS patient parking. One of our Patient Participation Group (PPG) has worked hard to try to prevent parents at the local school parking in our car park. The PPG are continually working on this problem and would appreciate your feedback.

**10. Upstairs Waiting Room**

The biggest problem in both our buildings is the lack of space and even though we have tried hard to communicate with our patients, we still get a lot of complaints about the upstairs Waiting Room at College Road. We needed more GPs plus more clinical rooms and a lift at College Road and the only way to do this was to create a small upstairs Waiting Room. The PPG Forum have listened to your feedback and have worked hard to make this space as comfortable as possible with pictures, Noticeboards and a fan. They have also been instrumental in installing an information board in the more spacious Waiting Room downstairs enabling patients to sit here until they are alerted to their appointment (whether upstairs or downstairs). We all respectfully request that the upstairs Waiting Room is a priority for use by the less able-bodied patients, and that patients DO NOT move chairs onto the landing or sit on the stairs as these are fire exits and must be kept clear at all times.

*Other Useful Leaflets available include:* Appointments, Information and Complaints.