

**2024 QUARTER 3**

**You said :**

1. You don’t like not being able to book an appointment at the front desk.
2. You want to be seen face to face.
3. You want to be able to discuss more than one issue at a single appointment.
4. You would like some PATCHS availability outside of opening hours.

**We did :**

1. You are able to book an appointment at the front desk at any time after 8.30 am. We know that the biggest demand for telephone answering is first thing in the morning so we use all available receptionist resource to work through that demand as quickly as we can. At 8.30 we start to see patients begin to come into the buildings and we move one of the reception team to prioritise the front desk, patient and clinician support and also to start to work through that mornings PATCHS requests. If we were to encourage people to attend practice first thing then we would have less resource to answer the phones at their busiest time – we are also regularly asked to provide more resource to answer the phones! We have a finite number of front of house people and they can only see so many people at the same time, this feels like the fairest approach for everyone. However, if you have query, or want to book any available appointment then we are happy to see you in person after 8.30 am.
2. There are certain issues which we know from the out set will require a face to face appointment, and, if we can, we will book those (very few) things in initially as a face to face. However, we do need to consider the clinical urgency of all appointment requests, so only those requests which are consistently of top priority, and need to be seen face to face will be booked in directly with a doctor at the first call (for example breast and testicle lumps).

All other requests are placed on a triage list and depending on the nature and urgency of the request this may be directly booked as a face to face or may require a telephone call with a practice clinician. If you would much prefer to be seen face to face then please let us know, however, just as there are occasions when it is much better for everyone if the patient is seen in person, there are other times, such as an infection, where appropriate care can be provided by phone and that protects both staff and other patients who we need to see in person, from the risk of infection. However, we will always try our best to incorporate all patient preferences, including being seen face to face.

1. We do understand how hard it is when you have perhaps had to wait to see someone and there may be a number of issues that you would like to address. Again, I can only say please let us know at the time of booking what it is you would like to see someone about, so that we have a clear understanding of what you need help or support with. I would ask people to be aware that sometimes the same clinician is not the best person to talk about the different issues you might have and that some things may be more urgent than others. For example, we have different doctors with expertise in skin, cardiology, diabetes, menopause, neurodiversity, mental health, musculoskeletal issues, our Nurse Practitioners have interests in acute care and also frailty. We also have various shared teams with different specialisms. You will get more specialised care if you see different people for different issues.

If we do not know about the different issues that you have we will not be able to allocate the appropriate time for your appointment, and we do need to be practical, even if you do have 15 separate issues to discuss it isn’t reasonable for all of those issues to be prioritised above 14 other people who may only have one, very important, or time critical issue to discuss. Please let us know what is going on for you and then work with us to get you to the right person in a clinically appropriate timing.

1. We have discussed this request with the full team to see what seems best for all of our patients based on the feedback we get. We are only able to offer 4 separate time slots for PATCHS over the course of a day – so in order to facilitate some being saved until we are closed we will have to reduce the spread of the other allocation to only 3 times during the working day. When we had unrestricted access nearly 95% of requests came through in working hours, which was a surprise for me.

We have decided to trial for 3 months, and we will review to see if that has worked, through auditing the out of hours PATCHS to see if these have been from patients that have not been able to contact us easily before, and what the clinical request was. We will start the trial on the first working day of the new year.

Just a quick reminder that we have a combined network patient group and we are always looking for people to be involved so if you have read this far and would like to try the group and see if its for you then please let us know via [Parklands.Patients@nhs.net](mailto:Parklands.Patients@nhs.net)

Thank you for your ongoing feedback, it is all read and discussed by the wider multi-disciplinary team, and it has resulted in changes made to how we organise ourselves,

Very kind regards,

Fiona Purdie

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Business Manager