

Moatfield Surgery Informs

Patient Information on Appointments

General practice has seen huge increases in demand over the years. Surgeries in England alone now offer around 300 million appointments a year compared to 200 million in 1993 in times when funding in general practice has gone from 11% to around 8% of the NHS funding. East Grinstead is growing and practices are at the limit of their capacity. Access is not just an issue for patients – doctors and practice staff worry about it too. No one likes working in a system where people experience lengthy waits; it creates stress and frustration on both sides. At Moatfield, like most surgeries, we have tried a variety of different systems to improve access but no matter how we increase supply it is more than matched by demand.

Patients have asked why there are not more doctors and nurses at the practice. Reasons for this are:

- ↳ The practice receives approx. £80 per patient **per year** from the NHS to provide services; there is no more room for manoeuvre to increase its staff base
- ↳ The practice receives many requests for an appointment with a GP that
 - do not require a GP and can easily and conveniently be dealt with by a nurse, pharmacist, optician, health visitor or the Mid Sussex Wellbeing hub (Tel 01444 477191) or even family members as used to be the case, e.g. advice on baby care.
 - do not require an appointment but can be dealt with over the phone such as simple advice, certificates and treatment changes.

Demanding more from a system that is already stretched to breaking point will only make the situation worse. Only by patients and practices working together will it be possible to shape the future of sustainable services in the community. Useful considerations when using the system:

- **Think before you dial.** If your problem is a real emergency – such as chest pain, collapse, or a suspected stroke – dial 999. If it is not an emergency, call your surgery to discuss what you need, and if you are unsure who to call dial 111. The practice also makes available to its patients leaflets to take away on simple action to be taken for the most common minor ailments. Please see our ‘inspiration’ stand (from April ’16).

- **Avoid busy times,** particularly Monday mornings. If your problem is not pressing, try not to call before 10.30am on any day as staff and lines are likely to be busy. However, if you are requesting a home visit you are better off joining the morning rush as the earlier a practice knows about visits, the sooner it can allocate them. If you ring after midday the doctors may have already started their rounds.

- **Only request a visit** if you, or the person you are concerned about, is **truly housebound**. A doctor can see 4 or 5 patients in the surgery in the same time it takes to do a home visit and it is very frustrating to be called out only to find a note on the door saying “Back in 10 minutes, just taking the dog to the vet”. It happens.

- **Patients with social and mental issues,** needing someone to talk to? There are numerous services available which can be contacted directly. A leaflet for patients to take away is available from our ‘inspiration’ stand (from April ’16)

- **Insurance/passport/travel/employment documentation** do not form part of a GP’s remit under the NHS. GPs are still able to comply with some requests, when this will incur a private fee payable in advance. The most common charges are displayed in the patient waiting and are available on our website. Our Reception Team will be able to advise on any other cost. These requests do not require an appointment unless the GP asks to see the patient.

- **Be realistic** and think ahead. People expect to have to book an appointment with their dentist or hairdresser at least a couple of weeks in advance, and GP surgeries should be no different when it comes to routine appointments for things like smears, blood pressure checks, minor ailments experienced for weeks, immunisations and blood tests. Having realistic expectations and avoid attaching unnecessary immediacy to a matter will avoid frustration on both sides as it is impossible to align an appointment system to e.g. a patient's day off work on the day. There simply are not enough GPs in the country.
- **If your problem is urgent** and you feel you need to be seen quickly then that should always be possible. Systems vary but almost all practices will see urgent cases the same day, typically as "extras" added to the end of morning or afternoon surgery or by a duty doctor. It is highly recommended to phone the surgery first before presenting at the desk; clinics are almost always fully booked resulting in a long wait to be seen or an unfair longer wait for fellow patients.
- If you are **not sure** that your problem warrants an urgent slot, but you cannot wait for a routine appointment the following week, ask for a doctor or nurse to return your call.
- If your query is related to a **long-standing condition** such as diabetes or asthma, then why not ask to speak with the nurse who you normally see in clinic.
- Clinics such as **minor operations, coil fits** and immediate post-operative wound care are services a practice agrees to provide in addition to their contracted services but as and when time allows and competent clinicians are available. These are not services a practice has to routinely offer patients throughout the year. Patients are therefore advised to contact the surgery well in advance for availability or use alternative service providers, such as a Family Planning clinic or the secondary care service they are currently under.
- **Don't abuse the system.** If you have an appointment and cannot make it, please phone or email and cancel so we can give it to someone else as at least 30 million appointments are wasted annually (average 60 appointments every month at Moatfield) because patients simply do not attend. Please be honest about your need for an urgent appointment – every GP is used to seeing people with an "urgent" verruca, but this sort of abuse of the system makes receptionists wary, and spoils it for everyone.
- **Do you actually need to see a doctor?** If it is a simple problem like uncomplicated heartburn, hay fever or a cold, why not cut out the middle-man and go direct to your pharmacist? Over-the-counter medicines can be cheaper than prescription charges, and the pharmacist can always refer you if he / she is concerned. Ask about the most efficient way to collect repeat prescriptions. Systems vary but they are all designed to make it easier for both patient and doctor.
- **Be open but polite.** Working on reception and telephone is a tough job for which the staff rarely get any thanks, but often plenty of abuse. Our Receptionists are trained and here to help you so give them a chance. This will ensure access to those who need it and avoid a case of 'the squeaky wheel gets the grease'.
- And **when you do see the doctor**, be succinct as time is not on your side. Practices offer appointments that are 8 – 15 minutes long. At Moatfield we offer 10 minute appointments to enable us to see a large number of patients; it is impossible to cover a list of medical problems. Have your most pressing symptoms clear in your mind and share any concerns you may have. Please wear something sensible that will allow easy access if you need to be examined.

Although GP practices are often thought of as being on the periphery of an NHS that is mostly hospital based – 9 out of 10 of all NHS contacts take place in primary care.