

ABCD of Access Solutions Support Programme

SCIMP/SNUG Conference 20-21 September 2016

Dillon Sykes Managing Director



Agenda

Section	Section Name
1.	The struggle to meet patient demand
2.	ABCD of Access Solutions Programme for assisting GF practices with Demand Management
3.	Doctor First Demand Management System



Meet Dillon...and PPC Ltd

- Co Founder of PPC Ltd
- 26 years NHS experience
- Worked for and with FPC, FHSA, PCG, PCT, NPDT, GPs, Patient Groups, secondary care, social services
- Change management experience
- Large and small scale organizational development

- Established 2009 with Dr Stephen Clay
- Work with GP practices and CCGs/Health Boards across UK
- PPC Staff work in General Practice
- Address demand management and redesign of systems in over 250 GP Practices
- Implemented Doctor First in over 70 practices



What's currently happening in General Practice?

- We need to do more for less money and in same time
- General Practice facing shortage of clinicians
- Drs declining Partnerships in favour of locum and salaried jobs



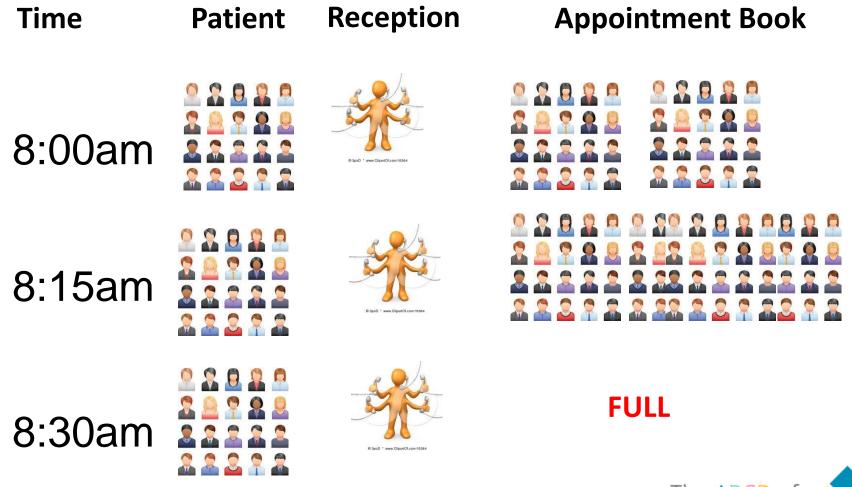
Access Tips Tried in GP Practices

- Variations of duty doctor systems
- Increasing access- Walk in clinics, increased same day appointments or pre bookables, extended hours
- Nurse led triage
- GP led triage- reactive vs proactive models
- Increasing sessional commitments
- Covering sessions with fulltime locums.

Bradfore dectors reception to try an look at the problems of accessing GR appaintenents from the orraine Goody, who manages a GPs' as a "lot of pressure" ones star Anging straight at eight o'clock," she said. "They're constantly there, the girls, acceptingidae Chairesaidraighbaed the Ve dragging would iniprovelopatients access to tpeindayywearare there to do a job."



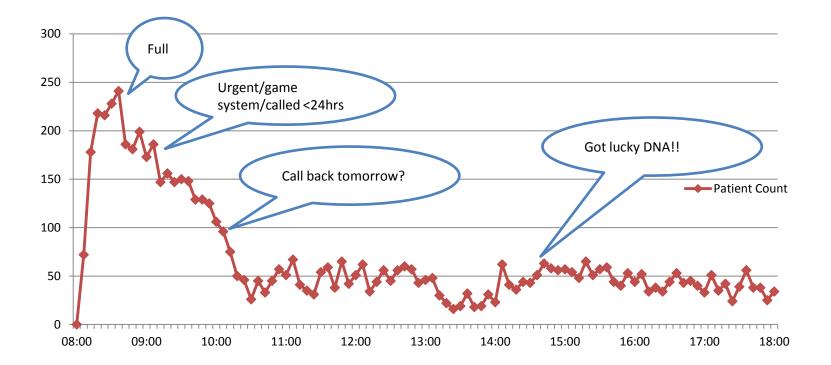
Booking an appointment in standard system



The ABCD of Access Solutions



Typical Patient Flow of Call Times





How do the majority of practice manage demand?



- Yes- They employ receptionists to 'man' the front-line.
- Reception staff seen as barrier between patient and access to clinician
- Causes all out war fare at times along with confusion







Reception team takes the responsibility of making the most important decision- that of when a patient can get help



Understanding patient behaviour...

- Patients are like electricity; they will choose the path of least resistance.
- When they meet resistance they will get hot (*under the collar*) and so will the resistor.
- They will then find an alternative, less resistive route such as:



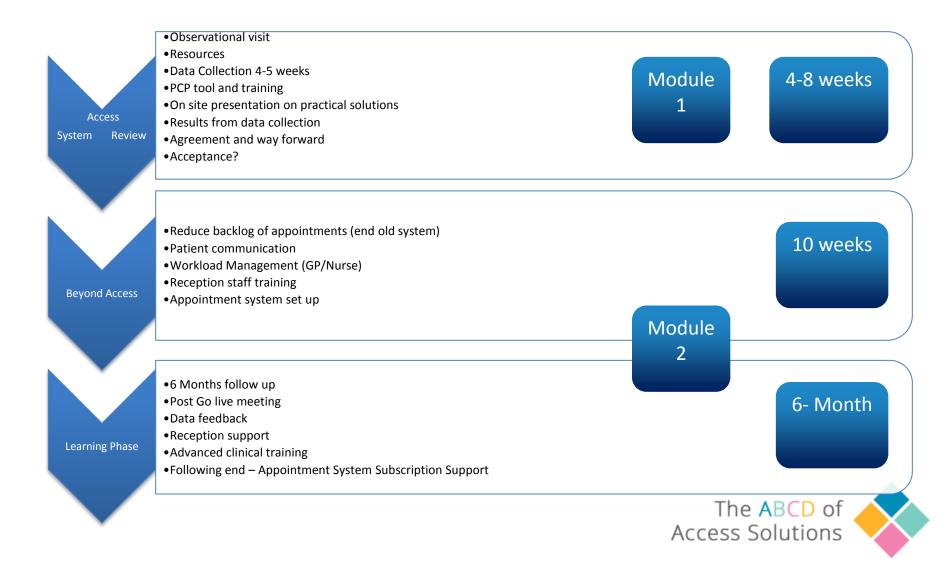




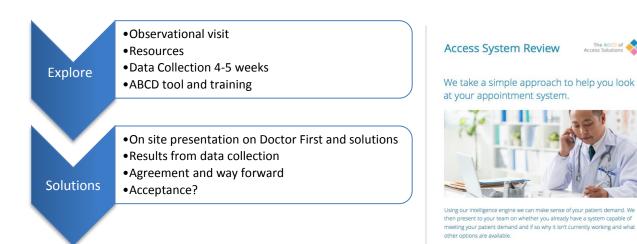




ABCD of Access Solutions – 2 Modules



Module 1 - Access System Review



Key stages of an Access System Review (4-8 weeks in total)



An invaluable process for practices to become 'future proof' and be in a position to provide improved services for patients and staff.





The analysis will result in a detailed comprehensive written report that will show the current situation of your access system providing estimated demands for your patient population. Acongoiste this analysis will be a range of solutions for meeting demand based on practice capacity. The access systems will include, but not exclusive, our innovative and recommended approaches such as Doctor First.

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	\simeq	admin@productiveprimarycare.co.uk



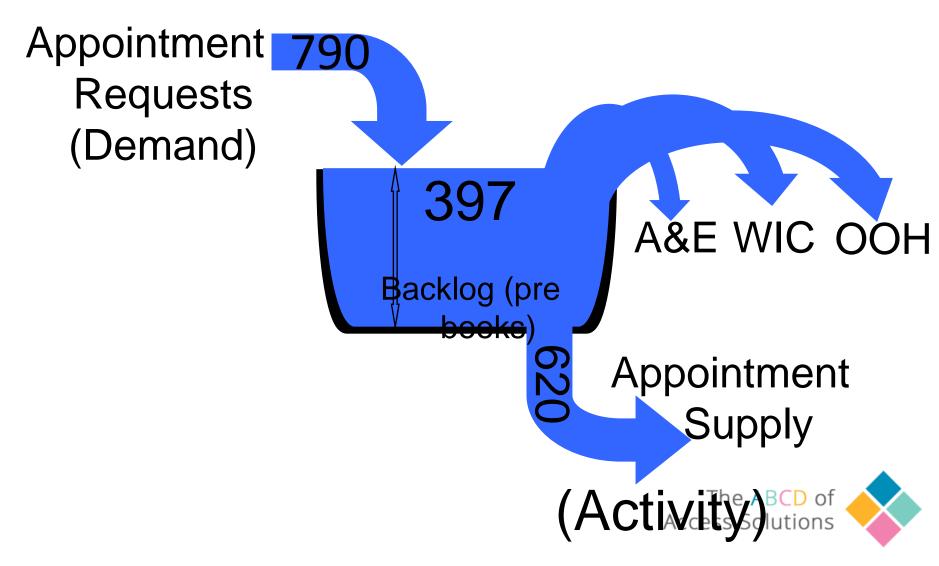
Demand

Weekly Demand					
	м	т	W	т	F
On the day Request	30	15	21	22	13
No specific day	16	15	5	26	23

Advanced Appointments

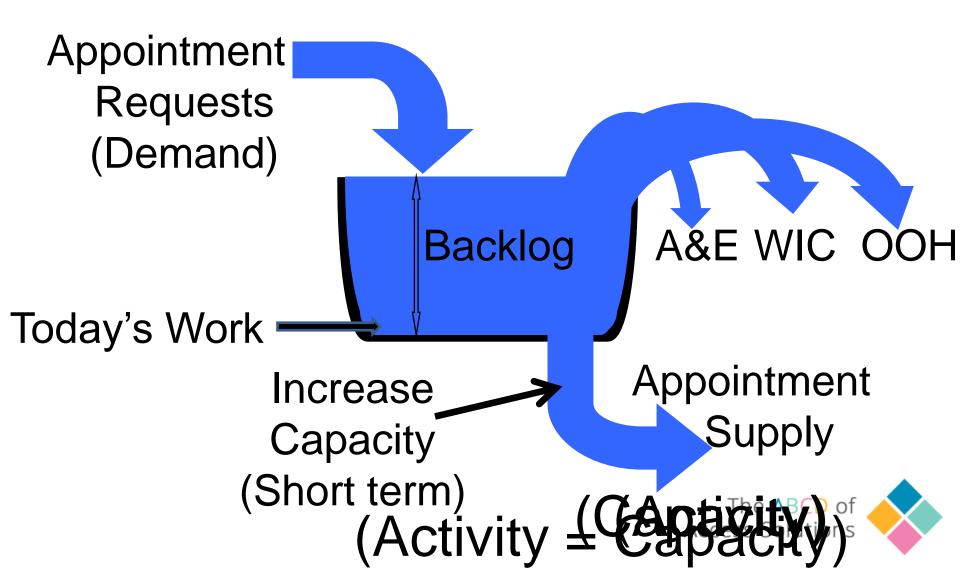
III Requested Appointments					
	for Monday	for Tuesday	for Wednesday	for Thursday	for Friday
on Monday	18	18	5	10	10
on Tuesday	10	8	9	7	7
on Wednesday	5	3	3	8	2
on Thursday	10	7	3	7	10
on Friday	4	3	1	4	4
50 50	50 55	43	43 50	55 36	30 4/0
GP	3	1	2	1	0
Nurse Practitioner	0	0	0	0	0

Imagine patient demand as a bathtub!

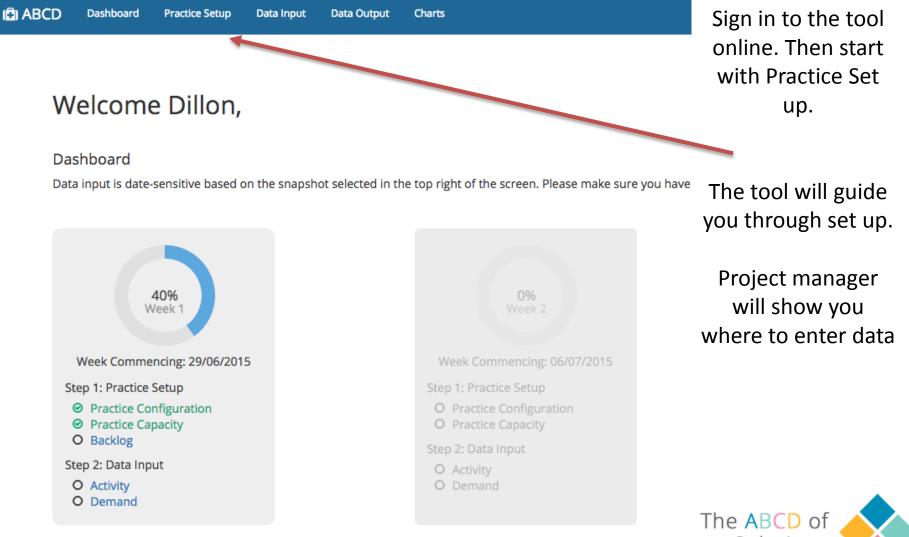


The Solution:

Remove the backlog,



Example of ABCD of Access Solutions Tool



ess Solutions

Example of Charts

Im Practice 4: Capacity and Demand

Select the Week you would like to view from the list below:

Week 1	Week 2	Week 3	Week 4
02/03/2015	09/03/2015	16/03/2015	23/03/2015



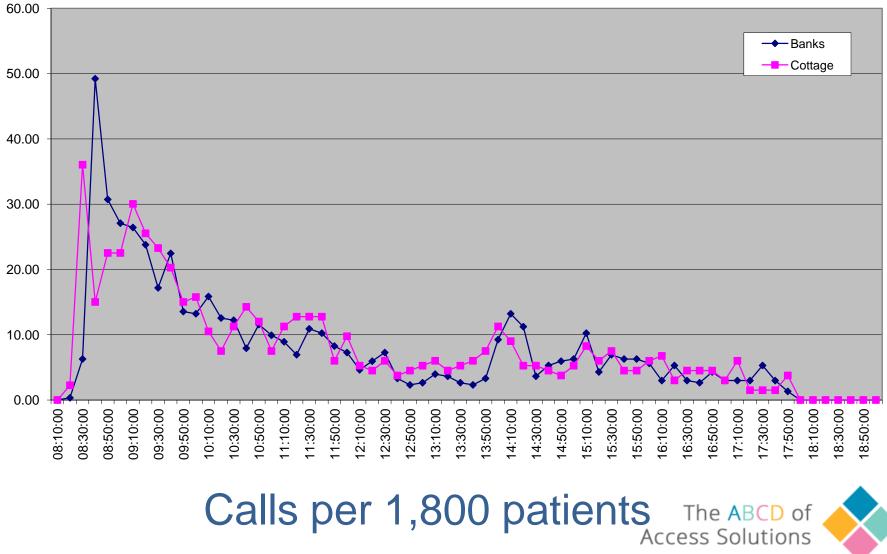


The trick is to know when PATIENTS want your help

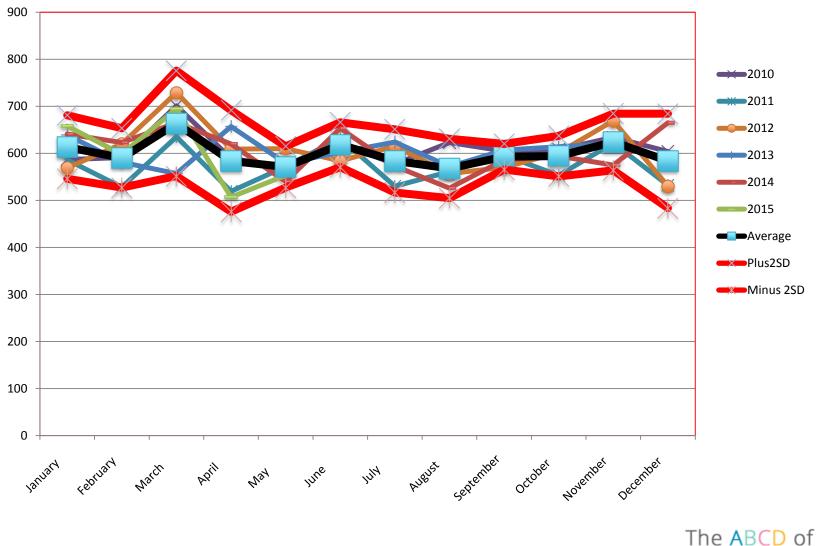
• And we do....







Every month, every year



The ABCD of Access Solutions

Outcomes from Module 1

- Understand access by ABCD numbers
- Impartial and expert view of current system, including hotspots for capacity planning.
- Range of solutions provided.
- Comprehensive written report with recommendations for improving access tailored on individual practice circumstances.



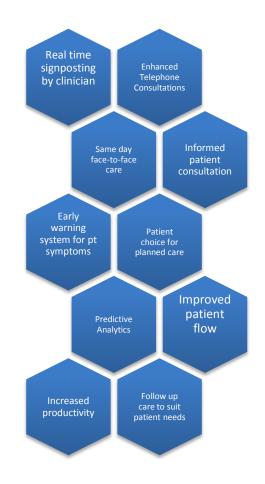
The Doctor First[®] Model

Doctor First [®] is a demand led system that allows Practices to effectively manage patient demand by clinicians talking to all patients on the telephone. Patients will be assessed on a clinical priority basis.

If either the doctor or patient needs or wants to see the other then an appointment is booked without question.

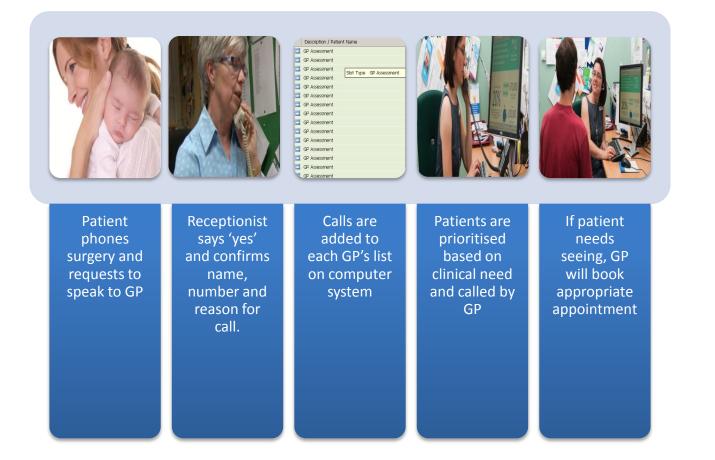


Doctor First[®] System Provides...





How Doctor First works for Patients



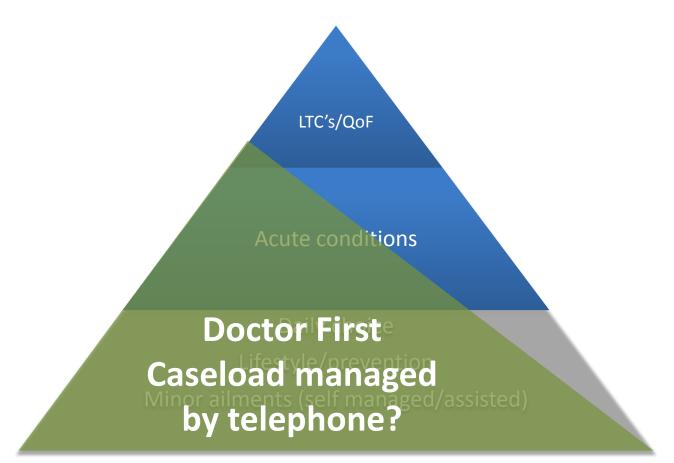


How Doctor First works for Practices

- Backlog removed- end your old system
- Receptionists evenly distribute days calls between doctors / nurse practitioners
- All clinicians telephone consult virtually exclusively in first half of morning, later in day telephone consult between faceto-face patient bookings
- Clinicians responsible for how they manage their own daily workload
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Doctor First Impact on Face-to-Face Consultation Types





Doctor First The Essentials

Doctor First:

•Matches daily appointment supply to daily demand.

•Increases practice capacity to help patients in a given period of time whilst reducing stress on doctors, staff and patients.

•Removes barriers between doctors and their patients giving them direct access to doctors' knowledge without doctors being swamped by demand.

•Is **safe.** It is <u>**not**</u> telephone triage. The default position is that the patient will be seen by a doctor unless both the doctor <u>**and**</u> the patient are happy that the problem has been resolved by the telephone consultation.

•Allows accurate recording of <u>all</u> GP workload.



Increasing Appointment Capacity

Standard system

• 18 patients x 10 min = 3 hours

Doctor First system

- 3 people can be consulted by p
- 18/3 x 10 min = 1 hour
- 1/3 will want to see Dr = 6
- 6 patients x 10 min = 1 hour

The time saving bit...

The increased efficiency bit...

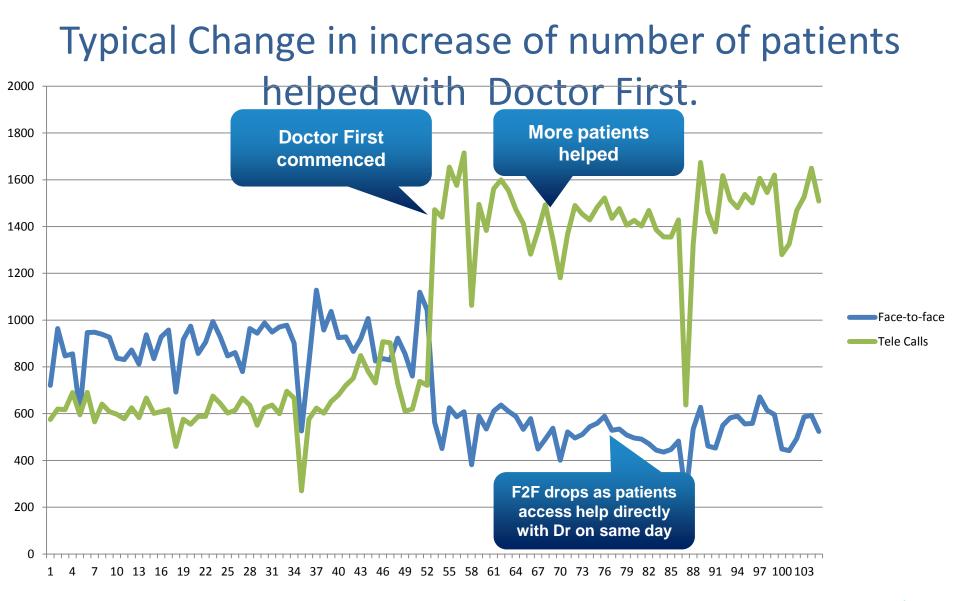
Outcome

- What took 3 hours now takes 2, or;
- In 3 hours 27 people can be helped rather than 18 (a_{BCD of} 50% increase in productivity)
 Access Solutions

Improving Safety

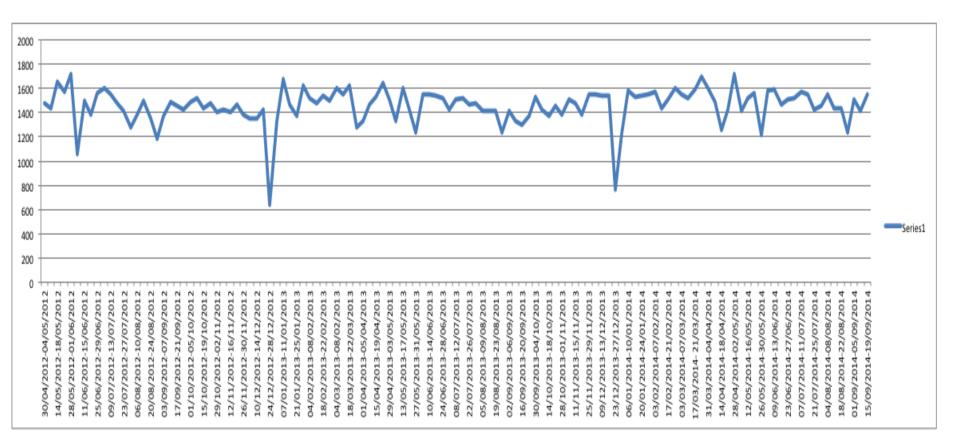
- The most qualified people make the most important decision
- The default position is that the patient is seen unless both they and the doctor agree that they do not want or need to be
- Reduced complaints
 - Saves stress
 - Saves time





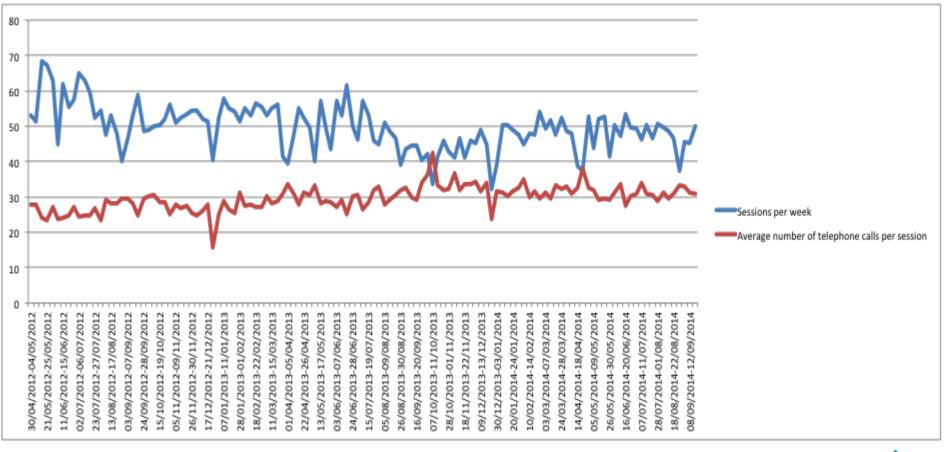


Number of Patient Contacts per Week





Sessions provided v Average Contacts per Session





Denburn Medical Centre - Benefits Achieved

- Increased clinical contacts for each GP from 110 per week → 220 per week
- DNA rate practically eliminated resulting in saving of £20,00 per year
- Reduced OOH contacts by ~20%
- Eliminated appointment backlog no waiting for appointments



Benefits Achieved (cont...)

- Increased access of GPs to all team members leading to real time decision support
- Increased patient satisfaction
- Increased receptionist satisfaction
- Improved clinical staff recruitment

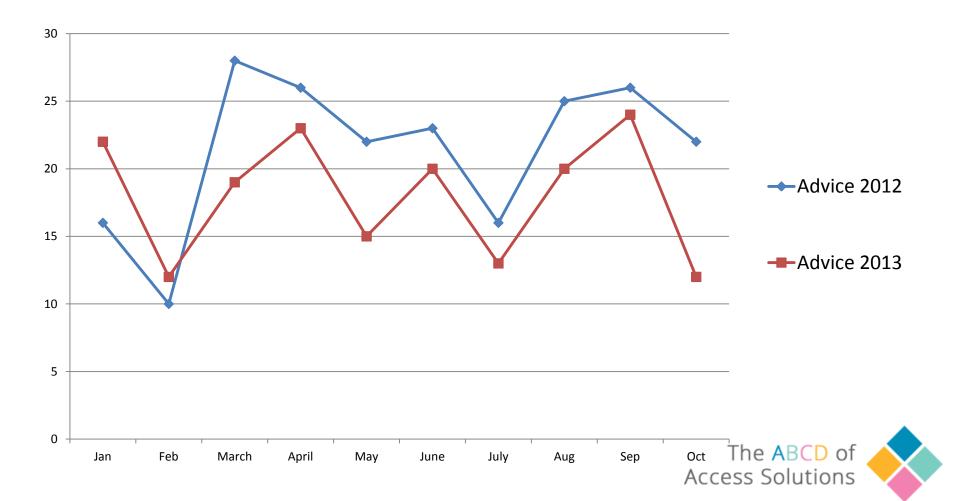


Benefits Achieved (cont)

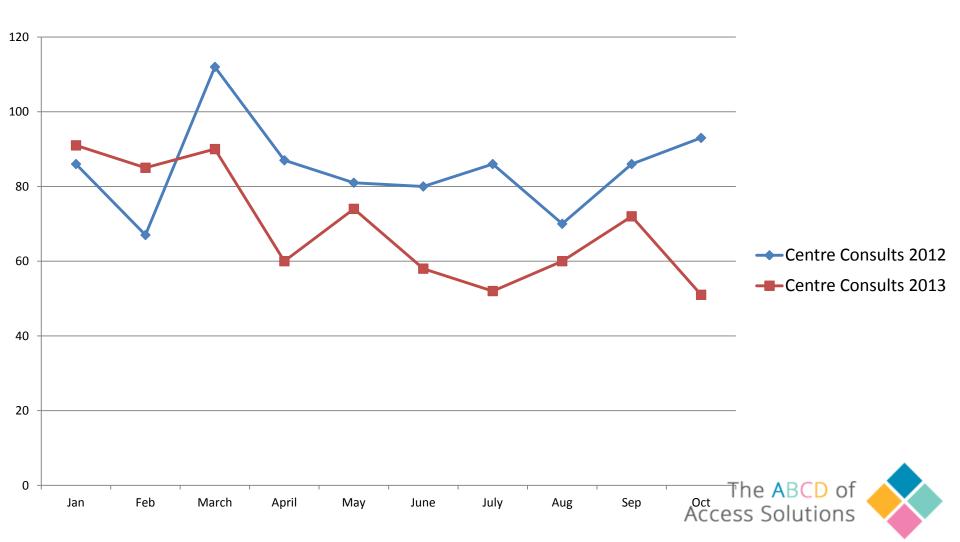
- Partners feel we have increased job satisfaction
- Better continuity of care
- Staff morale at all time high



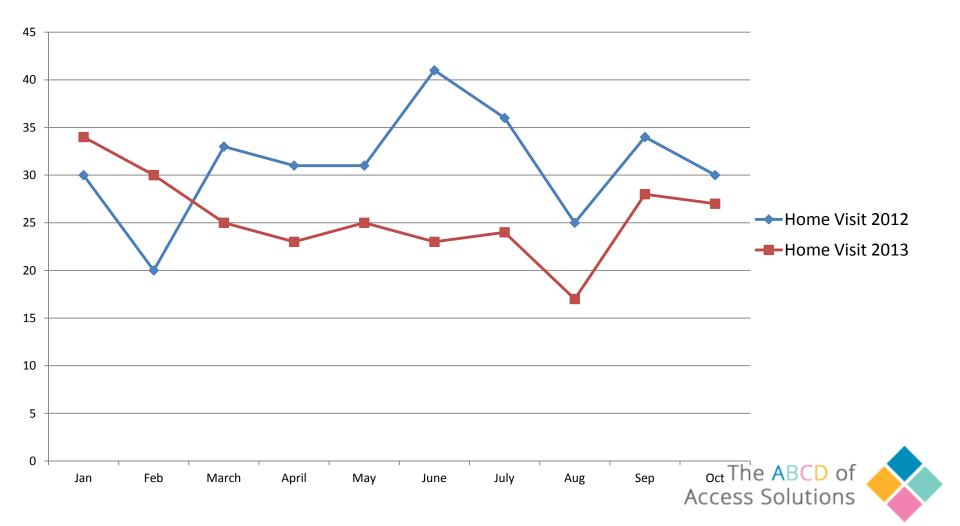
Out of Hours Data



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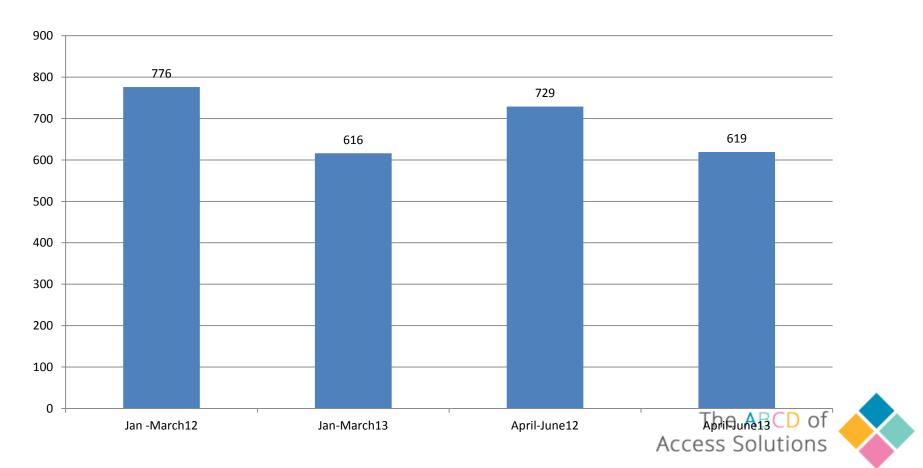


Out of Hours Data



Emergency Admissions

Emergency Admissions



Denburn - Are Our Patients Happy?

- 89% of patients were satisfied with the outcome of their telephone consultation
- 85% of patients felt there was enough time on the phone to discuss everything they needed to with the doctor
- 80% of patients were reassured by having earlier contact with their GP
- 94% of all patients who received a face to face appointment were given one either the same day or on an alternative suitable day of their choice



Are Our Patients Happy? (cont)

- 87% of patients were satisfied with the length of time it took for the practice to return their call
- 84% of patients said they were able to receive a call during surgery hours and that it was convenient for them to receive that call
- 90% of patients stated the doctor understood what they were saying on the phone
- 70% of patients were either satisfied or very satisfied
- only 45% of patients could say the same about the previous system
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