

Low Moor Medical Practice - Action Plan 2014

| Area Discussed | Action points | Timescales | Progress to date |
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| Booking Appointments | <p>The practice will seek to acquire additional clinical sessions to improve upon the number of acute appointments available.</p> <p>An audit of telephone bookings was carried out over a 1 week period. From this it was found that 75% of appointment requests were for same day appointments. The mix of appointments will be changed so that there are less appointments available for booking in advance and more available for book on the day. There are 2 appointments per GP in each afternoon available for urgent medical needs. These are frequently not always used. We will trial reducing these to 1 per GP and making the other available for book on the day.</p> <p>The practice will increase the % of appointments available to book on line. Each GP has 4 telephone slots available for a return call back. One of these slots per GP will now be available to be booked on line from the previous working day.</p> <p>Practice to implement NHS initiative of a named GP to co-ordinate the care of over 75 year old patients.</p> | <p>September 2014</p> <p>April 2014</p> <p>April 2014</p> <p>April 2014</p> <p>End June 2014</p> | |
| Opening Hours | <p>The Practice will trial running a lunchtime surgery between 12 – 2 on Tuesdays for 3 months starting April.</p> <p>The Practice will confirm the provision of additional late night appointments by continuing to offer Advanced Nurse Practitioner appointments to workers. This availability of a female clinician after 6pm is felt to be of particular benefit to our female working population. This service to be more widely publicised within the Practice and on the website.</p> <p>Monday evening late night surgeries to be given more publicity within the practice and on the website</p> | <p>Review June 2014</p> <p>May 2014</p> <p>May 2014</p> | |
| Patient Experience | <p>Practice to investigate the possibility of installing a queue control system to provide greater privacy to patients.</p> <p>Appointments bookable 2 weeks in advance by patients tend to contain multiple presentations. Practice to</p> | <p>April 2014</p> | |

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| | <p>ensure that these appointments are moved to the last appointments of the session to minimise inconvenience to other patients. Additional breaks to be built into the clinical session to allow doctors to catch up.</p> <p>Patients to be made aware of the fact that they should bring one complaint per 10 minute appointment or should book double appointments. This to be publicised on website and on booking in at the surgery.</p> <p>Clinicians to request patients to prioritise their complaints if presented with multiple complaints and to direct patients to rebook for the remainder of their complaints</p> <p>Practice to implement afternoon blood collections to provide patients with a choice of morning and afternoon appointments when the appointment requires blood to be taken.</p> | <p>April 2014</p> <p>May 2014</p> <p>May 2014</p> <p>June 2014</p> | |
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