

HIGHLIGHTS

RAUMATI ROAD SURGERY & GP TRIAGE

Interview by Susan Fullerton-Smith | Communications Advisor Compass Health | 12 October 2016



We spoke to Dr Kirsty Lennon (pictured) about the implementation of GP Phone Triage at Raumati Road Surgery.

After just three months of GP phone triage, around 1/3rd of patient needs are now dealt with in other ways. **Kirsty's**

job satisfaction has 'increased hugely' as a part of Raumati Road Surgery's transition to become a Health Care Home.

'GP phone triage means I'm so much more in control of my day and allows me to better manage acute on-the-day demand as many patient needs can be met without the need for a GP consultation, i.e. repeat prescriptions, nurse consults, pre testing or referral to other health services,' she says. Kirsty devotes 8.30-9.00am daily to prioritise and manage. The below examples shows how GP Phone triage can improve the patient care journey.

- 'An elderly patient phoned in with acute pain and it became apparent I needed to visit. By speaking to them I was able to prioritise the visit and see them earlier in the day and deal with the problem quickly.'
- 'I had a patient with ongoing chest symptoms and I was able to get an X-ray before I saw them that afternoon. Having the result allowed me to manage the patient successfully in the community.'
- 'A patient with a UTI who would have booked to see me was dealt with by the practice nurse and given a prescription.'
- 'A patient that had booked an on the day slot as she had run out of medication was able to consult with me and get the prescription without a face to face consultation.' says Dr Lennon.'

'Patient satisfaction has also increased as **people value the more personal experience of being called and spoken to by**

their GP,' says Dr Lennon. 'It's also a better use of patient's time if the issue can be managed over the phone.'

Kirsty's success has encouraged the other all-female part time practitioners at Raumati Road Surgery to start using GP phone triage as part of their general practice management tool kit.

Tips for practices looking to implement GP phone triage (from Rob Stewart, Practice Manager, Johnsonville):

- Start small
- Prior to starting GP phone triage – audit your peak demand periods so that you know:
 - * how many appointments are needed per week
 - * what acute demand on the day will look like
 - * peak days/times
- Use a queue system and call patients back in a prioritised way
- Record the phone number of where patients want to be contacted
- Have a script for the front desk so that patients get consistent information
- Use an advanced form to standardise the output and support the process
- Have a pricing structure upfront so that you're not struggling to introduce this later
- Have plenty of phone lines into the practice to avoid dropped calls

The patient portal is also helping **21% of enrolled patients at Raumati Road Surgery** better manage their health through the patient portal. Portal activation has grown in three months from almost nothing to one of the highest activated portal user practices within the Greater Wellington area. **Patients are loving the convenience of the patient portal app,'** says Dr Lennon 'and the user demographic covers all ages.'

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From a Practice perspective, 'there can be a fear of getting overloaded with emails and online,' says Dr Lennon, 'but the reality has been quite the opposite. **Although we are having more patient consultation, we are saving far more time,**' she says. 'Sometimes people forget to ask a question in a consultation and can send a quick email as a follow up. The ease of access to online health care information has also contributed to increased patient satisfaction and gives people more control of health management if it means checking blood results,

asking a question, requesting a repeat prescription or having a same day response from their GP.'

SMARTER PRACTICE DATA



Rob Stewart— Business Manager

Interview by Susan Fullerton-Smith | Communications Advisor Compass Health | 14 October 2016

Using telephony to drive innovation

Rob Stewart, Business Manager at Johnsonville Medical Centre, has spent the last 6 months working to replace the telephony system as part of the Health Care Home approach.

'Understanding our current un-met call demand, shown via abandoned calls, is an essential starting place when looking at the Health Care Home clinical outcomes.' says Mr Stewart.

'Our previous telephony system was a business risk due to its age. It was expensive to upgrade and maintain and didn't offer what we needed in terms of reporting. As a large practice we also wanted to work smarter, and be able to easily reconfigure our setup as the business changed.'

'We identified in-house, what was possible and what could help us work in more innovative ways. We then looked at various vendor solutions to find the right system and provider that could best deliver the flexibility, technical solution and service support we needed,' he says.

The new system at Johnsonville Medical Centre has now been in place for a month, and progress has been positive despite the odd hiccup. 'We could have gone with an updated version of our existing phone system, which would have been technically easier but not added a lot of new value for investment,' said Mr Stewart. 'Instead we've gone with a new approach, which means the team have had to get comfortable with a new set up, on top of simply picking up the basics. We've had a couple of technical issues which have been a bit of a distraction, but we're coming out the other side of these and we're now in a position to make meaningful improvements to the way we work.'

Johnsonville Medical Centre's new system offers:

- A remote hosted voice over internet protocol (VOIP) system, for flexibility and disaster recovery.
- Comprehensive, flexible and customisable reporting e.g. measuring; dropped calls, wait times and number of transferred calls.
- Staff availability (presence) and internal messaging.

Tips for practices wanting to investigate a more efficient telephony system:

- Start slowly as the change takes time and resource – give yourself 2 -3 months from the time a vendor is selected to introduce the change and at least 6 months for the whole change.
- Spend the time to understand what you want your system to do rather than accept whatever functionality vendors offer.
- Expect technical issues and work on patient awareness prior to the change.
- Provide training for all staff ahead of time.
- Investigate the implications of existing contracts, but don't cancel these until the new system is in place.

If you are interested in more information please contact Rob.Stewart@compasshealth.org.nz