

Teldoc Patient Engagement Meeting24/07/2019

Improving Patient Access Proposal

Summary of the Discussions held

Q I had not received a letter about the closures. Why?

A The letters were sent to all patients who had registered their preference as one of the three sites that are proposed for closure.

By preferred it means not that you had appointments there but what had been registered on notes as your preferred site. We had written personally to over 1,800 patients.

Q Where had the patient engagement meeting been advertised?

A We communicated this in several ways:

- Large A3 posters have been displayed at every surgery
- We have worked very closely with our Patient Participation Group, if you would like to join please contact christinechoudhary@hotmail.co.uk
- Details regarding our plans and patient engagement meeting on the Teldoc website www.teldoc.org
- We have worked in conjunction with Healthwatch and they have placed details on their website <https://www.healthwatchtelfordandwrekin.co.uk/>
- Telford and Wrekin CCG website <https://www.telfordccg.nhs.uk/news/665-teldoc-seeking-views-on-plans-for-more-staff-more-appointments-more-clinical-rooms-and-improved-call-handling>
- Telford and Wrekin CCG website Get Involved section under current involvement activity: <https://www.telfordccg.nhs.uk/get-involved/current-involvement-activity/teldoc-feedback-on-plans-to-improve-services>
- Front page of the Shropshire star <https://www.shropshirestar.com/news/health/2017/01/10/nine-telford-gp-surgeries-set-to-join-forces-as-new-super-practice/>
- Several social media platforms

Q Will the new call centre be local or outsourced to people who don't know the geography of Telford?

A The proposed new care navigation centre will remain local. No location has been agreed because we are still in the engagement phase of our proposal.

We would like to assure you that the staff that will be answering the calls and helping direct patients to the most appropriate type of appointment will be the existing Teldoc staff. We are continuing to recruit more staff and all staff are being supported with new training programmes to ensure our patients receive the best service in a timely manner.

Q Will there be redundancies as a consequence of the changes?

A No, there are no planned redundancies. We are actively recruiting a range of professionals such as Doctors, Advanced Nurse practitioners and Therapists and Clinical Pharmacists to increase the number of appointments we offer.

We have appointed 7 new call handlers in the last 6 months, and are continuing to appoint for some shifts where estate capacity allows. However due to the estate limitations we are unable to appoint the number of staff required to meet the needs of our patients. Therefore we do need the proposed plans to go ahead so that we can improve patient access and reduce patient call wait times because in the new care navigation centre we will have additional capacity to support the needs of our patients and service.

Q The population at Lightmoor Extra care village are older and have difficulties getting out to see the doctor. What have you considered for this patient group?

A Lightmoor is only open for a short period of time, Tuesday and Wednesday mornings only and does not offer the full range of services such as blood tests or ECGs that patients with more complex medical problems need. This is due to the premises being unable to accommodate the level of service required and so it is not currently used for appointments for that patient group.

Therefore any patient who using the Lightmoor surgery has no choice but to go to another surgery for nursing, HCA, ANP or blood test appointments anyway. Patients who are housebound due to medical conditions will continue to be able to use the home visiting service. Teldoc is different to other surgeries in that it has a home visiting team who work across the whole day 8.30am to 6pm rather than just doing home visits traditionally between morning and afternoon clinics.

Q Lawley's population is expanding, it is difficult to get an appointment now, will that be made worse by other patients from closing sites, having to access Lawley as well?

A Originally, Lawley site was a practice that was to provide services to 6,000 patients, the population in the local area grew and an extension to the site allowed for a further 1,000 patients however by the time the extension was complete the population was already 9,500. Lawley is in excess of this at 11,000 and will continue to grow for the foreseeable future. Estimates are in the region of 20,000 patients, Lawley surgery is clearly not adequate facility for the expanding population.

Patients have feedback that they feel the Practice provided a better service before it merged with Teldoc. Now patients have to go to other surgeries. However the service could not have coped with the increased demand due to the growing population and therefore merging with Teldoc has enabled it to have a sustainable future but in order to now make improvements, we need our patients to understand the challenges we are facing in delivering the services we wish to deliver to you and support us with our proposal.

We know that patients have issues accessing appointments; our limiting factor is call answering volumes and clinical rooms to deliver care from.

The proposal we are suggesting will allow us to centralise the call handling function. Currently we are unable to migrate patient calls from Lawley to our main Teldoc phone number and call centre. This is due to the telephony infrastructure at Aqueduct which is unable to manage more calls. If a new call centre facility was approved, we could remove call handling from Lawley site and this will improve patient access and those that have to personally visit the site because they are unable to get through on the phones.

So there will be more flexibility at peak times such as a Monday morning. Equally by freeing up rooms in the remaining practice by moving the admin staff to the central care navigation centre will allow us to create more appointments. For example as part of the restructuring we would be able to create a minimum of 4 more clinical rooms in Lawley. As we said previously we are recruiting more professionals to assist us delivering this care and the staff who previously lone worked at the smaller sites will have more support and access to a wider range of colleagues to help deliver care to the patients.

We know access is a real issue and we have considered our patient feedback and complaints received to actively consider how we can best manage this for our patient, which is why we have been working with the CCG and our Patient Participation Group (PPG) to develop a solution.

Q PPGs are held in the evening, this means people like me who work can't access them

A The chair of the PPG was present at the meeting and offered for the individual to feed in via email and also that the PPG was willing to look at alternating meetings and she would take that back to the group. The Doctors present who also support the group said they would be willing to have some flexibility and stay behind after work to attend the groups on a rotational basis because they value the input of patients into their plans.

Q Does the creation of a care navigation centre mean that there will no longer be anyone on reception and everything will become automated at the front of house?

A No, we plan to keep all receptionists, across all our sites. There will always be patients who need to come in person and will be attending appointments, which will be increasing with the proposed plans and therefore we don't want to lose that personalised service and will continue to have reception staff at all sites.

Q Is making things available electronically, bookable appointments and such part of the plan?

A Yes that is part of Teldoc's overall plan. We are also launching the online consult later this year, please lookout for this on our website www.teldoc.org and for further details across all our sites (noticeboards and information screens).

Q What are the timescales for these plans?

A It will be dependent on the outcome of the engagement period; this period ends the 16th August 2019. We will hold dialogue with CCG, NHS England, Healthwatch, local stakeholders and Councillors. We have a meeting arranged with Council members of the Health and Overview Scrutiny Committee on the 7th August 2019 and a CCG meeting being arranged in September 2019.

Q What do you plan to do about the post change evaluation?

A We would want to work with our patient to see if there was a change in feeling about how easy access is and whether people are satisfied with the service they are getting. We would welcome your offer to communicate with patients in our communities, Teldoc really values patient feedback, we want to improve the service for our patients.

Q Will Teldoc make savings as a result of closing sites, is that a motivational factor to do it?

A No, it is in-fact the opposite. The plans are cost neutral to the local NHS. Teldoc partners will invest their own monies into some of the changes because without this investment we will be unable to improve and service and meet our patients needs. We have to change not only to improve access but also because the sites we are closing are not fit for the future. Two of the sites have no parking, Aqueduct's clinical space is unsuitable, rooms have small windows and not well ventilated, this is not acceptable working conditions for our staff, nor our patients to visit.

Q So if these changes go ahead will you guarantee that there will be an end to having a 3 week wait to see a doctor?

A We will most certainly improve patient access with the changes, but there will be a period of transition when introducing the changes and converting admin rooms to clinical rooms.

Once these changes have been made we will further continue to plan and look at ensuring we are directing patients to the most appropriate health care professional, so that those who do need to see a doctor are not waiting excessive times. We are currently appointing a Clinical Rota Assistant to support our Rota Lead to manage the extra workload we currently have in preparation for the improvements we endeavour to make. We want to actively do this in our current state and this is regardless of whether the plans are approved. We want to improve appointment availability and room utilisation and clinician availability across our 9 sites is crucial to our patients to ensure they receive the most appropriate care in an efficient and timely manner.

Clinical pharmacists can be much more appropriate if someone has a complex medication query. We are working with existing staff to provide extra training so people can be navigated to the correct clinician.

Q Can I ask a question why you have chosen care navigation centre as the name for your new call centre. There are care navigator roles out there already and it might confuse patients?

A For patients, we shall not be advertising the phone number as care navigation, just the number to call when they want to speak about getting an appointment or advice. This will remain to be the same phone number they currently call to ring Teldoc. The only

number that will change is for patients that call the Lawley site and they will be required to call the main Teldoc phone number.

In terms of the name for the centre, we did think of others like care co-ordination centre but we know that this has already in use by another health provider. We will discuss again whether there are any alternative names that would be more appropriate.

Q Will the changes see an end to the long queues that form here at Malinslee on Monday morning at 8.30am?

A We know many people are turning up in person to try to book appointments because they are having problems getting through on our phonelines. It will take some time for the message to spread if our plans are approved. If these plans are approved, when changes have been introduced we would welcome our patients support in getting that message out and we would anticipate this will result in reduced queues at sites.