

Frequently Asked Questions at Bewick Crescent Surgery

1. Why is it so difficult to get through to the surgery?

Our services are contracted to start at 8:00am which as you probably know is when our telephone lines open; this is always the busiest time of the day for us where between 4-600 attempts are made to access our telephone system in order to gain an appointment. This is mainly due to the appointment system we had to adopt throughout the pandemic and being the only way to initiate care. We have started offering more online resources to try and minimise the use of telephony. We also feel like most GP surgeries in the country that we are in significant demand.

2. My call keeps failing when I select '2' for appointments on a morning. Why is this?

Our contracted services start at 08:00hrs which many of you will know is when our telephone lines open. This is the busiest day for our surgery. The telephone queue can hold a maximum of 30 callers. In November 2019 we had received many calls from frustrated patients claiming they were in a queue for such a long time only to be told there were no same-day appointments left. We liaised with our telephone provider and agreed to put a message onto our telephone system informing patients that all same day appointments had gone to save them queueing needlessly; the restriction was that only new callers would receive this message and the patients already in the queue could not hear this. Therefore, the decision was taken to reduce the queue from 50 callers to 30 so more patients would receive this message mitigating some frustration. This change was agreed with our Patient Participation Group.

3. Why am I waiting so long in the queue?

Some patients take a lot longer than others to articulate what it is they want when calling during peak times. We aim to put a revised message on the telephone system informing patients only to contact us between 08:00 - 09:00am for appointment bookings only; should any patient try to call the surgery during these hours they will be politely asked to call back after 9:00am so we can deal with patients that want to book an appointment. We hope this strategy will reduce waiting times. We are continuously working with our telephone system provider to identify initiatives to our patients to limit the time they must wait. We also have been asked by our Clinical Commissioning Group (County Durham) to care navigate patients to make sure we ask a few questions about why patients are calling so we can navigate them to the most suitable clinician; this also adds to other patients waiting times.

4. Why is it so difficult to get an appointment?

Demand for GP Surgery services has always been extremely high nationally and Newton Aycliffe is no different. There have been national reports in May 2021 that this demand has risen further placing more strain on an already in-demand service. We understand that all you want to do is speak to a clinician about your medical issue but sadly, our resources are limited. We have empathy for this but it is the reality of primary care in the UK.

5. What appointment model do you adopt?

We telephone triage all same-day and pre-bookable appointments meaning a clinician will call you back to discuss your medical issue. We do this as most issues can be sorted out over the telephone but if you are required to be seen face-to-face this will be arranged during the telephone consultation. Our appointment model is monitored closely by our GP Partners and adapted where possible to optimise appointment availability. We cannot offer any more clinical time that we are currently delivering within our existing resources; our model meets the British Medical Association guidelines for GP Surgery clinical delivery.

6. Why don't you just recruit more staff?

NHS England pay us to deliver General Medical Services (GMS); the money received for this provision has already been committed to employing clinicians. Even if more money was made available we would not have the physical rooms to put these clinicians into. Primary Care Network staff (Social Prescribers, Care Co-ordinators, Physiotherapists, Pharmacists and Nursing Associates) have been brought in which has increased clinical capacity to patients but also taken clinical rooms too. In future and where possible, there will continue to be more roles added through this model when NHS England release the funding.

7. Why don't you get a bigger surgery?

To get a bigger surgery we must have an agreement made with NHS England and Improvement via our Clinical Commissioning Group in the first instance; this is a very lengthy application process which we have gone through in the past. The Bewick site has been developed many times over the last few decades and has reached capacity. We have expressed interest in developing our branch site at Heighington which if approved will allow us to increase our clinical capabilities. Without NHS Infrastructure Grant funding, which is offered once annually, the practice will not be able to finance this on its own.

8. You clearly have too many patients why don't you get rid of some?

In short, we can't. We are mandated by NHS England to continue to allow patients to register at our surgery. We can only remove someone from our patient list with a valid reason.

9. The appointment system discriminates against people that work; I am driving to work when you open!

As our appointment system is available to everyone all the time it is non-discriminatory. Although we understand that patients can be doing other tasks at the time we open it is the NHS Contract that directs us when services are to open.

10. The text messages that you send out for us to complete a questionnaire about our health...is this secure?

AccuRx are the service provider for this resource who are an NHS Digital approved supplier and specifically an NHS Digital approved online consultation supplier. AccuRx have Data Security and Protection Toolkit assurance (ODS code: 8JT17), have the Cyber Essentials Plus certification and are GDPR compliant.

Links to files or documents sent via SMS by healthcare staff directly to a patient's mobile phone are encrypted in transit via HTTPS and responses are encrypted at rest via TDE. Patients are also asked to input their date of birth as identity verification, before being able to access the document. The document is only accessible for 14 days. Where a link to sensitive data is shared (e.g. to a document), the patient must verify their identity by typing in the date of birth. The reason this level of authentication has been selected is because it promotes digital inclusion by allowing more technologically challenged patients to interact without having to download an application or create an account. Each link is unique to a patient and sent specifically by the practice, so only the patient receives a link tied to their date of birth".

AccuRx Security and Privacy credentials: NHS Digital approved supplier, NHS Digital Security and Protection Toolkit assured, UK Government's Cyber Essentials Plus certification, GDPR compliant

To conclude, we feel this secure. With end-to-end encryption which includes a verification process and is NHS Digital approved, we do consider this a safe platform to communicate with our patients.