

Fernville Surgery  
**Telephone Access Survey Report 2018**

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**Summary:**

By focusing on telephone access as an area for improvement, and working on this over a period of 5 years, we have delivered and sustained measurable improvements in service quality. We have tried to adopt innovative solutions to the problem, including the development of a call handling room and improvements in the arrangements for supervision in the reception team, which have been very successful. Overall, we regard our current performance as satisfactory. 50% of calls are answered within 1½ minutes and 90% of calls within 5½ minutes. We feel this is reasonable in a busy GP surgery where there are many conflicting demands, including demands on the reception team. However, there are still opportunities for further improvement, and actions have been identified for implementation during 2018.

**Reporting:**

This report will be reviewed with the Patient Reference Group; and the findings will be included in our annual review of service quality.

**Background:**

Improving telephone access has been a priority for the practice for several years. This cannot be done simply by increasing the size of the reception team. The cost of a single whole time equivalent receptionist is equivalent to between 1,300 and 1,400 GP appointments per year. To improve telephone access by reducing the availability of GP appointments is not acceptable. Instead, we need to become more efficient in our use of resources, to deliver improved telephone access without taking resources from direct patient care.

In 2014, we developed a call handling facility on the first floor of the surgery building. This allows us to deploy receptionists as dedicated call handlers whilst others handle the flow of patients at the front desk. We then recruited two apprentice receptionists, who could work in the call handling room supervised by an experienced member of the team. We also adjusted the pattern of reception shifts to give more flexible cover through the working day.

In 2016, we appointed a Reception Manager and two Senior Receptionists to improve accountability within the reception team and ensure more continuous supervision.

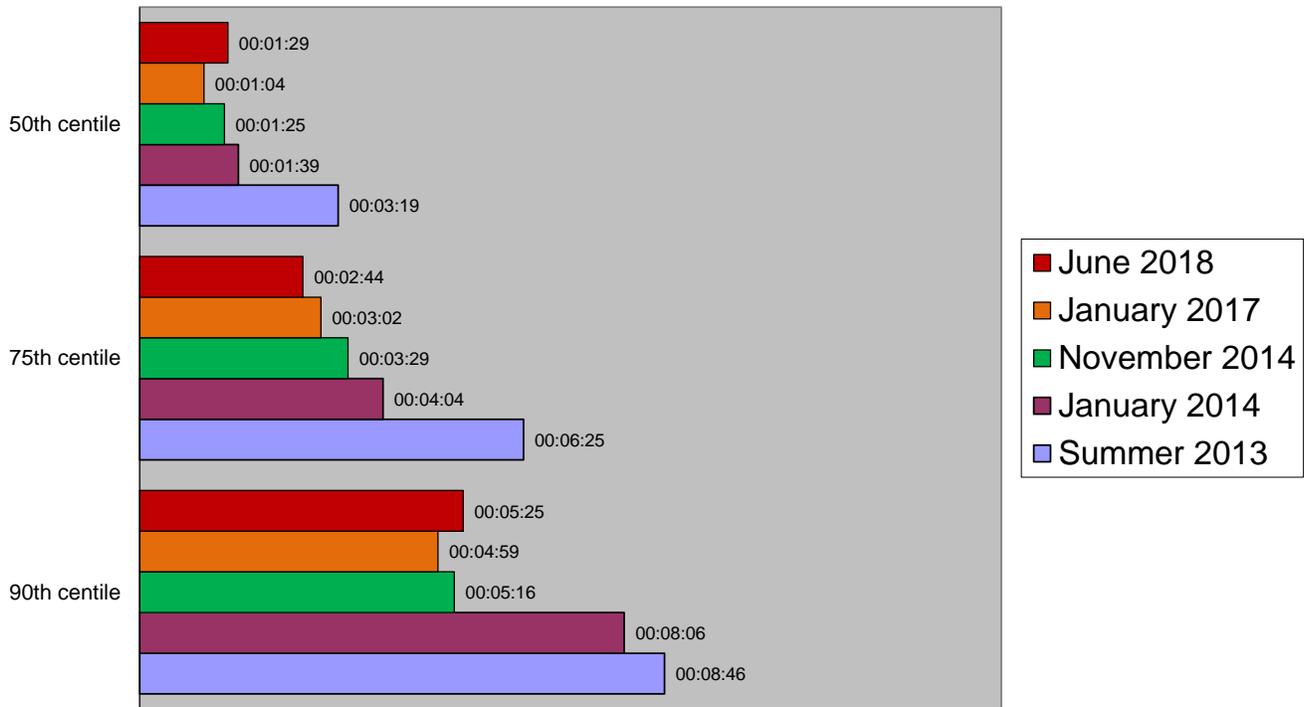
In 2017/18, we reconfigured our telephone messaging system to improve the routing of calls and to provide patients with information about alternative modes of communication with the surgery. This included the promotion of online access, which allows patients to book or cancel appointments without the need to call the surgery. This was an action identified in the 2017 survey.

## Telephone Access Survey Report 2018

### Evaluation:

To evaluate the effectiveness of our call handling service, we made a series of test calls to the surgery over a 4-week period during June 2018, at times selected randomly throughout the working week, and noted the time taken before the call was answered by a receptionist. We compared the data with results from similar studies initiated in summer 2013, January 2014, November 2014 and January 2017. Each set of data comprises a minimum of 50 test calls, so we can be reasonably sure the data is representative. Results are summarised in the chart below.

### Telephone Access



We have reduced the average time (50<sup>th</sup> centile) for a call to be answered from 3 minutes 19 seconds in 2013 to 1 minute 29 seconds in the most recent survey. Current performance is similar to that achieved since November 2014.

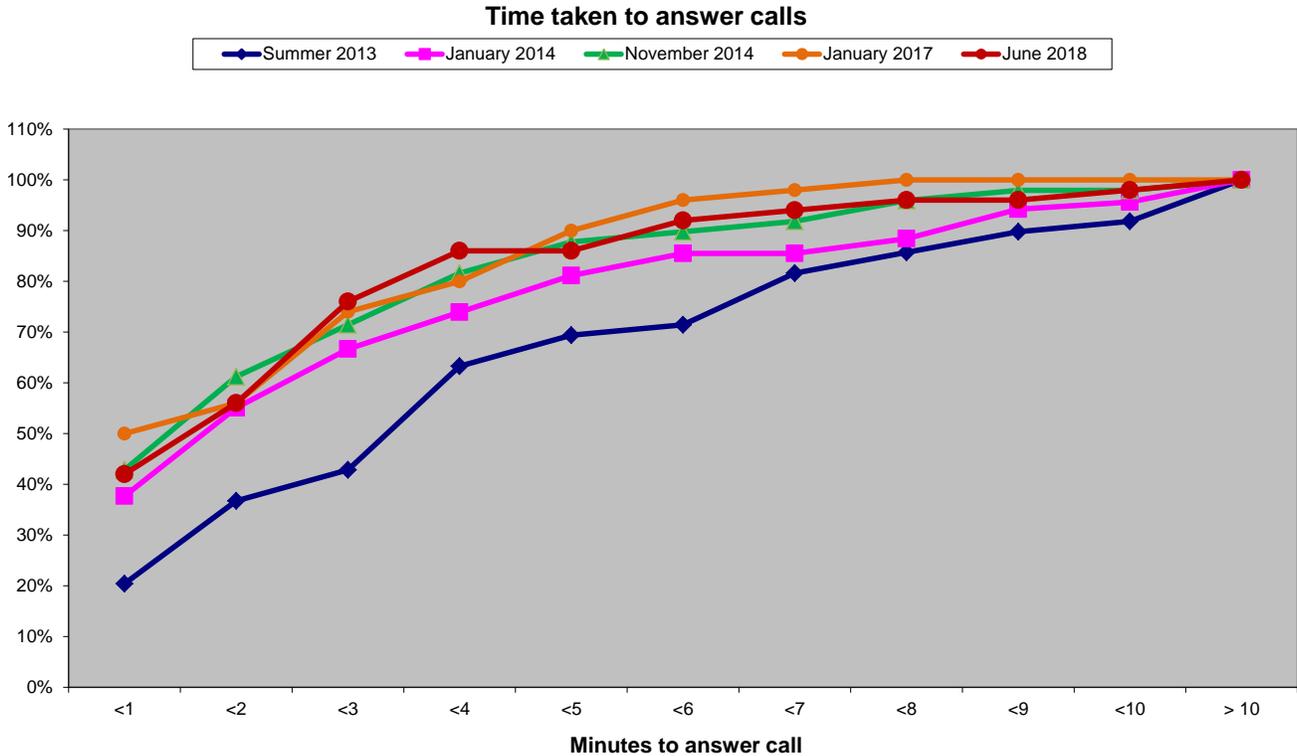
The time taken to answer 75% of calls (75<sup>th</sup> centile) has also been reduced from 6 minutes 25 seconds in 2013 to 2 minutes 44 seconds in the most recent survey. Again, current performance is similar to that achieved since November 2014.

Similarly, the time taken to answer 90% of calls (90<sup>th</sup> centile) has been reduced from 8 minutes 46 seconds in 2013 to 5 minutes 25 seconds in the most recent survey. Again, current performance is similar to that achieved since November 2014.

# Fernville Surgery

## Telephone Access Survey Report 2018

An alternative analysis is shown in the chart below:



The number of calls answered within 1 minute has increased from 20% in 2013 to 42% in the most recent survey.

The number of calls answered within 5 minutes has increased from 69% to 86% in the most recent survey.

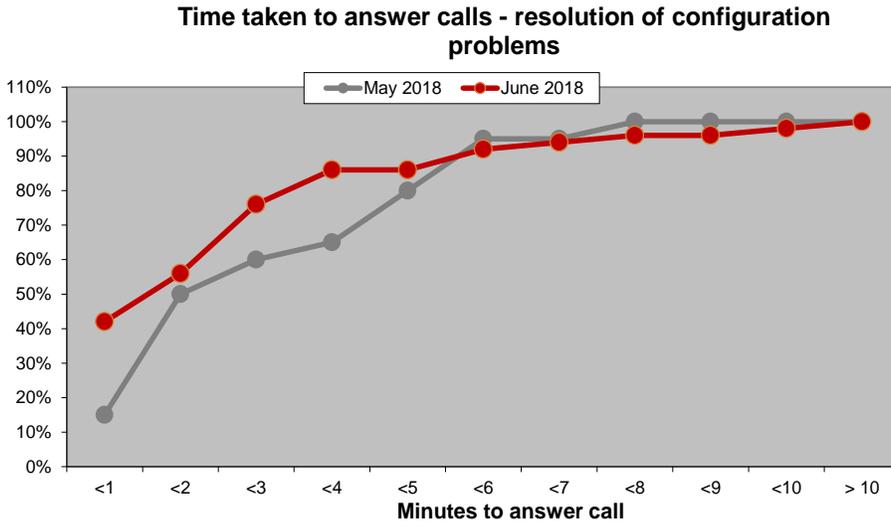
Each of these statistics represents an improvement in service for patients.

Overall the substantial improvements seen between the surveys in summer 2013 and November 2014 have been sustained, but no significant further progress has been made.

### Additional data from May 2018:

Work on the 2018 survey commenced in May 2018. A series of 20 calls was made during May. Interim analysis of the data suggested that the call handling performance achieved since November 2014 had not been sustained. A detailed investigation revealed that changes to the messaging system made earlier in the year had reduced the time available for receptionists to answer a call. Corrective action was taken and the survey was restarted in June 2018. The chart below shows that the corrective action was effective in improving call handling performance.

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**Telephone Access Survey Report 2018**



**Actions for 2018:**

- Reoptimise automated messages to ensure calls are more available to the receptionists, especially in the first 1 to 2 minutes.
- Ensure any further changes to call routing or automated messages are validated by testing to ensure there is no adverse effect on patient access.
- Promote the continued uptake of online services, allowing appointments to be booked through this medium.
- Promote the “ownership” of the telephone system by the reception team, including the prompt investigation of any suspected problems.

*Note: Receptionists are best placed to detect problems early and investigate. The process for telephone access to the practice should be seen as an integrated whole, involving the telephone system and the staff using it, and not as separate components with different people responsible.*