



PRESS RELEASE

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PCC Appointment Availability is Top of Agenda for Creative Healthcare Solutions

The Government is constantly reviewing the appointment systems at the Primary Care Centre and strives to ensure that nobody needs to wait for long periods of time to make appointments when they are feeling unwell. Patient feedback is always welcome; community and patient input is vital to achieving the high standards of care to which the GHA aspires.

There have been a number of different systems in place in recent years to improve appointment availability, from advance bookings on the first working day of every month to open access to appointments at all times. The current system of booking an appointment 48 hours in advance is the most successful system to date. The Government, however, is committed to continuous improvement and reforms are currently being implemented in order to provide better access to appointments and to improve the administrative process to reduce the proportion of patients who need to queue in any way to make an appointment. The two biggest successes in this regard have been the repeat prescription system and the sick certificate telephone service introduced this year. Since March, these two reforms have saved over 700 GP appointments a month; almost the equivalent impact of employing an additional GP.

Appointment availability is a key challenge that the PCC faces daily. Over 55,000 telephone calls are received every month from patients, mainly seeking appointments. More than 12,000 appointments are provided each month and each General Practitioner at the PCC sees up to 40 patients every day. To cope with this demand, between 0815 hrs and 0900 hrs as many as 8 clerks answer telephone calls and up to 5 clerks work at the counter to help patients who attend the PCC in person. For patients who are unwell on the day, over 300 emergency and book on-the-day appointments are available.

This level of demand requires a great deal of thought to manage, as availability of appointments must be balanced with patient safety. Our GPs dedicate much energy and enthusiasm to their consultations and are required to make accurate diagnoses and prescribe correct medications 40 times a day. It would not be appropriate, right or safe, to try to provide more appointments simply by asking the GPs to see more patients.



Additionally, there is a lot of work that is done behind the scenes that places extra demands on GHA resources. GPs are community doctors and also provide services outside the PCC, such as home visits, baby clinics, elderly care and care for prisoners. These are some of the most vulnerable members of our community and their care is a vital part of the overall service provided through the PCC. Not surprisingly, there may be days when appointment availability is reduced slightly as a result.

Primary care nursing and allied health professional teams also carry out enormously important clinical work, including dressing clinics, diabetes and blood pressure clinics, urgent treatments, district nurse visits, rehabilitation therapies, speech and language and occupational therapy, to name but a few. All of these services are in place to run in synergy with the GP clinics and are also part of the daily demand that primary care teams manage with great success.

Minister for Health, Care and Justice, the Hon Neil F. Costa MP, said: “The commitment of my Ministry is to always improve services by listening to our patients and our clinical staff and implementing further modern and creative solutions to healthcare. Improving appointment availability and accessibility at the PCC is at the top of the agenda for these solutions. For the past several months we have examined ways to improve the telephone system to manage missed appointments, so that there is an equitable balance for those who attend the PCC in person. We are also carrying out efficiency drives in the administration side of the PCC, in order to free up the clerks to spend more time dealing with patients face to face.

“All of the reforms introduced over the last few months, including the repeat prescription system and the sick certificate telephone service, were suggested and implemented by lead clinicians, as I am wholeheartedly of the view that clinicians are best placed to improve services to patients. I am immensely proud of all members of the PCC team, who arguably carry out some of the most complex and integrated elements of medical care and deliver this daily to every member of our community from the youngest to the most senior. No system will be ideal when it is this complex and extensive. I can assure our whole community, however, that we strive, continuously, to provide the highest quality of primary care every day and we will continue to reform, to improve and to listen”.