Appointments

Policy

Our patient scheduling system is flexible enough to accommodate patients with urgent, non-urgent, complex and planned chronic care, and preventative needs.

The individual preference of our general practitioners or other healthcare providers, such as our nurses, is accommodated and members of the clinical team are consulted about the length and scheduling of appointments.

Patients can request to see their preferred general practitioner or member of the health team.

The length of clinical consultations will vary according to individual patient needs. Our aim is to provide enough time for adequate communication between patients and their practitioners to facilitate preventative care, effective record keeping and patient satisfaction. Patients are encouraged to ask for a longer appointment if they think it is necessary.

Our practice endeavours to accommodate patients with urgent medical matters even when fully booked.

All practice team members are trained to have the skills and knowledge to assist patients in determining the most appropriate length and timing of consultations and to recognise and act accordingly for patients with urgent medical matters.

Information is provided in advance about the cost of healthcare and the potential for out-of-pocket expenses.

We endeavour to respect patients’ cultural backgrounds and, where possible, meet their needs including providing privacy for patients and others in distress.

Procedure

Each general practitioner and other healthcare provider have specific times allocated to their consulting sessions to accommodate the need for interval times, short and long consultations, diagnostic tests, procedures etc.

Generally, no more than six (6) appointments are made for anyone (1) hour period and we aim to ensure no appointment is scheduled for less than fifteen (15) minutes. Patients are advised that one appointment is required for each family member requesting to be seen where more than one family member needs to consult with a general practitioner.

Patients are able to request their preferred general practitioner when making an appointment and our practice team will endeavour to ensure that patients generally see the same practitioner. If patients are unable to obtain an appointment with the general practitioner of their choice, they are advised of the availability of other practitioners they can consult with.

If a third party is to be present during a consultation/treatment, whether requested by the general practitioner or accompanying the patient, consent from the patient will be obtained prior to the consultation.

Our practice information sheet outlines the types of consultations that may require a longer consultation and the costs. Patients can readily request a longer time when making an appointment.

Our practice team members have the skills and knowledge to assist in determining the most appropriate length and timing of appointments. Should a longer consultation be requested or is determined by information received from the patient, our team will endeavour to allocate the appropriate time for a longer consultation.

Our practice aims to ensure patients do not wait past their appointment time; however, where patients will likely be waiting more than 30 minutes, we will communicate these delays. Wherever significant delays are expected, we aim to contact patients prior to them attending the practice to advise of the delay.
As a priority, practice team members are vigilant of the need to detect and place requests for urgent care for immediate or timely attention by a general practitioner; our practice accommodates urgent care even if we are fully booked.

Cancellations and ‘no-shows’ are monitored and marked accordingly in the appointments schedule and these patients are followed up as appropriate. Attempts to contact patients that fail to attend appointments are documented in the patient’s health record.

Appointments made for patients required to attend a recall or periodic medical review are flagged so that if a patient cancels the appointment the practice team are alerted to ensure another appointment time is schedule. If the patient fails to attend the practice for the appointment, the general practitioner is alerted to determine the appropriate action to be taken (i.e. contacting the patient to arrange a re-scheduled appointment time).

When booking an appointment, our practice team members obtain the patient’s name and correctly identify the patient using three (3) approved identifiers:

- Determine the urgency of the appointment and if the patient requests an urgent appointment
- Determine the length of the appointment required (i.e. does the patient have complex medical or communication needs or multiple health matters they want to discuss?)
- Annotate any appointments made for a periodic review (e.g. blood pressure check) or medical recall (e.g. abnormal pathology result) so follow up procedures can be instigated if the patient does not attend
- Advise of any potential for additional or out-of-pocket costs associated with longer, urgent or missed consultations
- If the general practitioner requested is not available at the preferred time, give the nearest available time/day before asking the patient if another general practitioner would be suitable
- Provide suggested appointment times if needed
- Record the patient surname and given name in the agreed timeslot for the chosen general practitioner, and
- Verbally re-confirms to the patient their name, scheduled appointment time and general practitioner being seen.

If the patient scheduling the appointment is new to the practice:

- Inform them of the practice location and parking arrangements
- Outline consultation costs and payment methods
- Obtain their contact telephone number, full name and
- Ask the patient to bring their current Medicare / insurance card.
- Advise that a did not attend fee will be charged for non attendance

**Cancellations and missed appointments**

Patients who do not attend for their scheduled appointment are telephoned to determine if an appointment is still required and if another appointment is to be scheduled. Patients are then marked via the appointment book as a DID NOT ATTEND and a cancellation fee will be charged.

**Patients that fail to attend a recall or periodic medical review appointment**

For appointments of significance, it is imperative every attempt is made to contact these patients and that such attempts are documented in the patient’s health.

In attempting to contact the patient, it is recommended that the telephone calls are made at different times of the day and should the patient not respond, a follow up letter is sent requesting the patient contact the practice.

**Patients in distress**

We respectfully manage patients and others in distress by providing privacy through providing privacy and escorting straight to the treatment room. They will be seen by a nurse.
Medical emergencies and urgent queries

Policy

This practice classifies patients seeking medical consultations according to priority of need. Our triage system ensures that clinical care is provided to patients with urgent medical problems as a priority.

Patients telephoning the practice have the urgency of their needs determined promptly. All members of our practice team know and use the triage process, a copy of which is accessible at reception.

Administrative staff and members of the medical and clinical team have the skills and knowledge to assess the urgency of the need for care and can describe our procedures for dealing with urgent medical matters, including when the practice is fully booked.

Our induction process includes an orientation to our triage system and all team members are given training to its effective use and are encouraged to regularly update their first aid skills, including undertaking training in cardiopulmonary resuscitation.

Our practice has a pandemic plan which outlines our response to and management of patients with possible communicable diseases such as influenza.

When telephoning the practice, our practice team ask the caller if their call relates to an emergency before placing them on hold. Our recorded telephone answering machine messages, outside of normal opening hours, include a recommendation to call ‘000’ if the matter is an emergency.

Our general practitioners and other members of the practice team provide appropriate care and privacy for patients and others in distress.

We have provisions for general practitioners to be contacted after-hours for life threatening or urgent matters or results.

Procedure

All members of our practice team, including general practitioners and other healthcare professionals (i.e. nurses and allied health) receive regular training and updates in cardiopulmonary resuscitation at least every three (3) years.

All team members receive information at induction and on an ongoing basis about our triage guidelines and protocols for medical emergencies and possible communicable diseases, e.g. pandemic influenza.

Documentation of all triage and medical urgency and emergency training is retained in each practice team member’s employment or contract file.

In accordance with triage guidelines, our front desk team members aim to obtain adequate information from the patient to assess the nature and urgency of their problem. This occurs when making an appointment (for telephone calls or walk-ins), before placing a caller on hold, and while observing patients in the waiting room.

Patients are informed that they will be asked about the nature of urgent problems to assist with prioritising the scheduling of their appointment. Should the matter be urgent, patients are advised of any potential for out-of-pocket costs where the use of specific practice materials/equipment is required or a longer consultation is necessary.

A message in the patients file is used to record all significant telephone conversations or actions including medical emergencies and urgent queries incorporating:

- Name and contact telephone number of the patient/caller
- Date and time of the call
- Urgent or non-urgent nature of the call
- Important facts concerning the patient’s condition
- Advice or information received from the general practitioner (or clinical team member), and
- Details of any follow up appointments.
Patient rights

Policy

Our practice respects the rights and needs of all patients.

Procedure

No patient is refused access to clinical assessment or medical treatment on the basis of gender, race, disability, Aboriginality, age, religion, ethnicity, beliefs, sexual preference or medical condition. Provisions are implemented to ensure patients with a disability can access our services.

The practice identifies important/significant cultural groups within our practice including non-English speaking background patients, religious groups and those of Aboriginal and/or Torres Strait Islander background. We endeavour to continue to develop any strategies required to meet their needs.

Our practice provides respectful care at all times and is mindful of our patients’ personal dignity. We have a plan in place to respectfully manage patients in distress.

Visual and auditory privacy for patients is provided in the waiting room and during the consultation. The waiting room provides soft music to assist patient auditory privacy. Each consulting and treatment room has a curtain around the examination bed for patient privacy, and the doors to the consulting rooms are closed for each consultation.

Patient privacy and confidentiality is assured for consultations and in medical and accounts records, appointments, telephone calls and electronic media including computer information. Our practice does not leave patient information in any format in areas of the practice or surrounds that would allow unauthorised access. All members of our practice team sign a privacy agreement upon acceptance of work, and risk immediate dismissal should a breach of this agreement occur. Information no longer required that contains any reference to patients, including diagnosis reports, specialist letters, accounts etc. is securely disposed of via shredding or in the confidential waste bin

Patients have a right to access their personal health information and may request to view their record or obtain a copy.

Our privacy policy for the management of health information is displayed in the waiting room and also on the practice information sheet and practice website, and is readily presented to anyone who asks. This policy includes information about the type of information and data this practice collects, how we collect it, use it and protect it, and to whom we may disclose it to

Patients have the right to refuse any treatment, advice or procedure. Our general practitioners discuss all aspects of treatment and will offer alternatives should a patient seek another medical opinion

For ongoing management of patients should they leave the area, our general practitioners will ask for the forwarding practitioner/practice address and facilitate a transfer of health information. A copy of the patient’s health record or health summary will be sent directly to the new location via post or CD

This practice acknowledges a patient’s right to complain. We provide mechanisms to ensure that this feedback, as well as positive comments and suggestions, are freely received and implemented where possible.

Patients are provided with sufficient information about the purpose, importance, benefits, risks and possible costs associated with proposed investigations, referrals or treatments to enable patients to make informed decisions about their health.

Patients are provided with adequate information about our practice to facilitate access to care including our arrangements for care outside our normal opening hours.
Our practice participates in the RACGP Australian General Practice Training (AGPT) program and regularly has Registrars on-site; patients are advised of this with a notice in the waiting room. If undergraduate students are on practice placement and observe patient consultations, the patient is asked for their prior consent to the presence of this third party and this consent is documented in their health record.

Patient consent is also sought for participation in our health reminder systems and any research projects we may participate in. Patients are advised that any prior consent given can be withdrawn at any time.

**Complaints**

**Policy**

Opportunities are available for patients and other visitors to tell us, “How we are doing” and we collect systematic patient experience feedback at least every three (3) years.

The practice information sheet provides patients with information on how to provide feedback, including how to make a complaint.

We have a complaints resolution process which all members of the practice team can describe, and we also make the contact details for the NSW health complaints agency readily available to patients if we are unable to resolve their concerns.

Patients have a ‘right to complain’ and where possible, patients and others are encouraged to raise any concerns directly with the practice team who are all trained to make sure patients of the practice feel confident that any feedback or complaints made will be handled appropriately. We believe most complaints can be responded to and resolved at the time the patients or other people such as carers, relatives, friends, or other consumers make them known to our team.

Under national and NSW privacy laws, our practice provides and adheres to a complaints process for privacy issues and those related to the *Australian Privacy Principles (APPs)*.

All members of our practice team are educated to be prepared to address complaints as they arise. Depending on the nature of the complaint and any advice received from our medical indemnity insurers where required, complaints are recorded and actioned with a copy placed in the patient’s health record if related to patient care.

All clinical and medical staff, as well as administration staff, are aware of the professional and legal obligations regarding the mandatory reporting of unprofessional conduct.

**Procedure**

Patients and others have opportunities to register their complaints either verbally or in writing (letter). Patients or others can complain anonymously if desired.

All members of our practice team are educated to be prepared to address complaints as they arise.

When receiving complaints, our practice keeps in mind the following in order to minimise further patient anxiety and hostility:

- Handle all complaints seriously, no matter how trivial they may seem.
- Verbal complaints made in person should be addressed in a private area of the practice where possible.
- Use tactful language when responding to complaints.
- Do not blame others; patients may not have all the facts or they may distort them.
- Address the patient’s expectations regarding how they want the matter resolved.
- Assure the patient that their complaint will be investigated and the matter not disregarded.
- Offer the person an opportunity to complete a formal complaint form (they may accept or decline).
• Document all complaints and other relevant information and place this in the complaint folder so the person designated to manage complaints is informed of the complaint (even if the matter appears to have been resolved).
• Alert the general practitioner about disgruntled or hostile patients so they can diffuse the situation immediately - often patients are reluctant to make a complaint directly to a general practitioner.
• Always inform the person designated to manage complaints if you become aware of any significant statements made by the patient or significant change in patient attitude.

The practice has the Medical Director or Practice manager (depending on the severity of the complaint) with designated responsibility for seeking, collecting, analysing, investigating, resolving and managing all feedback and complaints. Any investigation and resolution of complaints is undertaken using an open disclosure process, incorporating the following:
• Acknowledge the patient’s right to complain.
• Acknowledge receipt of the complaint as soon as possible, but within two (2) working days
• Respond to all complaints as soon as reasonably practicable, but within thirty (30) days in an open and constructive manner including an explanation and if appropriate an apology.
• If a resolution of the matter is to take longer than thirty (30) days, an update of the resolution activities will be provided to the patient, with an anticipated revised timeframe for resolution.
• Work with the patient to resolve the complaint and communicate the outcome with the patient, including any changes made as a result of the complaint.
• Where a complaint is made against a practice team member, provide the team member with an opportunity to discuss the details in a private setting.
• Ensure the complaint does not adversely affect the patient’s care.
• Record the complaint, investigation and actions in the dedicated complaints file and, if related to patient care, include a copy in the patient’s health record.
• Ensure, where appropriate, complaints are reviewed at practice team meetings; analyse trends and discuss the methods of resolution.
• Keep a record of improvement(s) made in response to feedback or complaints.
• Where appropriate, inform the patient about practice improvements made as a result of their input.

If the matter cannot be resolved, the patient is advised about how to contact the external Health complaints commissioner

New South Wales
Health Care Complaints Commission (HCCC)
Telephone: (02) 9219 7444 / 1800 043 159 (Toll Free in NSW)
Web: www.hccc.nsw.gov.au

Complaints that relate to privacy issues or concerns that cannot be resolved internally are to be directed to the Office of the Australian Information Commissioner (OAIC).

Office of the Australian Information Commissioner
Telephone: 1300 363 992
Postal Address: GPO Box 5218, Sydney NSW 2001
Web: www.oaic.gov.au

Members of the public may make a notification to the Australian Health Practitioner Regulation Agency (AHPRA) - www.ahpra.gov.au - about the conduct, health or performance of a practitioner or the health of a student. Practitioners, employers and education providers are all mandated by law to report notifiable conduct relating to a registered practitioner or student to AHPRA.