**Clarence Medical centre**

**1 Centenary Drive**

**MACLEAN NSW 2463**

**Ph: (02) 6645 3299 Fax: (02) 6645 4181**

**5.2 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 health care 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 doctor or member of the health team.

The length of clinical consultations will vary according to individual patients needs. Our aim is to provide enough time for adequate communication between patients and their doctors 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.

Staff 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.

Where possible information is provided in advance about the cost of healthcare and the potential for out of pocket expenses.

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

**Procedure**

Each doctor or other health care providers such as nurses and allied health has specific times allocated to his/her consulting sessions with documented needs for interval times, short & long consultations, diagnostic tests, procedures etc.

Generally not more than 4 appointments are made for any 1 hour period and normally there will not be any appointments scheduled for less than 15 minutes.

Each doctor has a designated time allocated for home visits to see patients that are unable to attend the Practice.

One appointment is required for each family member requesting to be seen.

If a third party is to be present during an examination, whether requested by the doctor or accompanying the patient, consent from the patient will be obtained prior to the consultation.

Patients are able to request their preferred doctor when making an appointment, and staff will endeavour to ensure that patients generally see the same doctor. If patients are unable to obtain an appointment with the doctor of their choice they are advised of the availability of other doctors at this time. A patient can expect to see their doctor, or an alternative as approved, within 2 working days.

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

Patients generally wait less than 30 minutes and patients are advised of any delays when a doctor is running late. Wherever possible scheduled patients are called at home to advise delay.

As a priority staff members are vigilant of the need to detect and place urgent callers or walk in patients for immediate or earlier attention by a doctor. Patients are routinely asked if the matter is urgent before being put on hold. Our practice accommodates urgent patients even if we are fully booked.

Cancellations and ‘no-shows’ are monitored and marked accordingly in the Appointments Book/Diary and these patients are followed up as appropriate. Attempts to contact patients that fail to attend appointments are documented in the patient file.

Appointments made for patients required to attend a recall or periodic medical review appointments are flagged and it is imperative the no shows are contacted and another appointment re-scheduled.

**Procedure (making an appointment)**

Obtain patient’s name and correctly identify the patient using 3 approved identifiers

* determine the urgency of the appointment and if the patient requests an urgent appointment refer.
* determine the length of the appointment required. Does the patient have complex medical or communication needs or multiple health matters they want to discuss?
* advise of any potential for additional or out of pocket costs associated with longer, urgent or missed consultations.
* patient new? Inform of Practice location, parking, costs & payment methods. Obtain contact phone number, address and other demographics. Ask to bring list of current medications and child health record (blue book) if applicable.
* is doctor requested available at time requested? Give nearest available time; is this to be a long consult?
* if doctor not available, ask if another doctor would be suitable or another time slot or date?
* give suggested time and alternatives if needed.
* write patient surname, given name in agreed timeslot for chosen doctor.
* reconfirm patient name, time and doctor.

Note: appointments made for a periodic review (e.g. blood pressure check) or medical recall (e.g. abnormal pathology result) are denoted as such so follow up procedures can be instigated if the patient does not attend.

**Cancellations & Missed appointments**

Patients that miss appointments are phoned to remind them. If the patient cannot attend the same day use computer program instructions to delete appointments to track cancellations for medico legal purposes.

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

For significant appointments a follow up letter is sent if the patient could not be contacted by the phone call. If the appointment is flagged as ‘recall’ it is imperative every attempt is made to contact these patients and such attempts are documented in the medical record and also in the recall book if applicable.

* persist in telephoning the patient over a few days at different times and, should the patient not respond then send a letter asking that the patient ring the Practice. If no response from the patient to the first letter, then send it again using registered mail.

**Patients in distress**

We respectfully manage patients and others in distress by providing privacyin a vacant room or taking them directly to the doctors room rather than wait in the waiting room.

***RACGP 4th edition Standards 1.1.1, 1.2.4, 3.1.4, 1.4.2, 2.1.***