
REPORT

Practice activity analysis: punctuality of appointments

FROM THE BIRMINGHAM RESEARCH UNIT OF THE ROYAL COLLEGE OF GENERAL PRACTITIONERS

THIS report is based on the first 118 returned proformas received and analysed, which concerned 31,100 consultations. The majority of returns were based on a single doctor's consultation pattern, although a significant minority were based on the consultations of two or more doctors working in partnership. Recording took place during two consecutive weeks, the majority of doctors choosing the period 13 to 26 June 1977.

We note that some proformas were returned intact, with doctors omitting to retain Grid B which was a summary for comparing results after the publication of this report. We hope those concerned have kept a copy.

Results

The total consolidated results are presented in Grid B as in the retained slip of the original analysis sheet. They provide a basis for comparison between participating doctors. They cannot be used as though they were representative of all general practitioners or their appointment systems.

Noncompliance of patients

9·2 per cent of patients were seen without prior appointments. (X)

3·1 per cent of patients arrived ten or more minutes late. (L)

3·9 per 100 patients seen was the rate of failure to keep appointment. (F)

These rates represent the degree of noncompliance of patients to the appointment systems. The sum of these

three values provides an arbitrary Noncompliance Score which is therefore 16·2 for the consolidated results.

Promptness of doctor

59·9 per cent of all patients consulting were seen within nine minutes of the appointed time ('0').

27·5 per cent of all patients consulting were seen ten or more minutes late ('1' + '2' + '3').

87·4 per cent of all patients consulting were seen by appointment for which they had arrived on time ('0' + '1' + '2' + '3').

Care must be taken in interpreting those consolidated results because the grid contains information about all patients seen, whether by appointment or not. Caution is particularly necessary in those instances where a large number of patients were seen without appointment (high 'X' value).

Lateness index

A Lateness Index can be calculated using the observed values in each grid in boxes '0', '1', '2' and '3'. The formula for this calculation is:

$$\frac{'1' + (2 \times '2') + (3 \times '3')}{'0' + '1' + '2' + '3'} \times 100$$

Using figures from the consolidated results, the total value of the Lateness Index =

$$\frac{5,145 + (2 \times 2,236) + (3 \times 1,234)}{18,650 + 5,145 + 2,236 + 1,234} \times 100 = 49\cdot0$$

GRID B. Distribution of patients by appointment characteristic.

	X	L	0	1	2	3	Failed	Total consultations (TC) X + L + 0 + 1 + 2 + 3
Number	2,866	969	18,650	5,145	2,236	1,234	1,215	(31,100)
Percentage	9.2	3.1	59.9	16.5	7.1	3.9		

Table 1. Grids showing range of values for Noncompliance Score, '0' percentage values, and Lateness Index.

Group (number of recorders)	A (23)	B (24)	C (24)	D (24)	E (23)	
Noncompliance Score	0	8.9	12.4	16.0	24.6	45
'0' % values	14.5	38.4	57	68.8	80.5	96
Lateness Index	0	8.8	21.8	49.5	90	197
	Minimum recorded value	Dividing points in the range				Maximum recorded value

Range of results

Further analysis of these results involves a consideration of the range of values for the various characteristics. In this paragraph we are considering the range of results for the Noncompliance Score, the proportion of patients seen on time ('0' value), and the Lateness Index (Table 1).

To aid comparison the 118 returns are divided into five groups (A, B, C, D, E) of approximately equal size. Group A (23 recorders) reported the lowest values; Group E (23 recorders) the highest values; and Group B, C, and D (24 recorders each) reported values in the middle of the ranges. The grouping is specific for each analysis presented and a recorder may therefore be in Group A for one value, Group B for another, and Group E for a third.

In each of the three grids presented in the table, minimum and maximum recorded values are entered, together with those intermediate values which divide the total set of returns into five groups. Individual sets of

results are conveniently compared with those of colleagues by identifying the alphabetical group to which each belongs. From the information presented it can be seen that about one fifth of all recorders saw 80 per cent or more of their patients within nine minutes of an appointed time; by contrast one fifth saw 38 per cent or less within nine minutes ('0' values for Groups E and A respectively).

The relationships between noncompliance on the part of the patient (high X, L, and F values) and the lack of punctuality of the doctors (high Late Index values) were explored. Although high X, L, and F values showed significant correlations among themselves, they were not related to lack of promptness on the part of the doctor.

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