



COVID-19 CLINICAL SOLUTIONS

What did you do?

As a direct response to COVID-19 and the subsequent increase in teleconsultations and online medication requests, we streamlined the task flow process for patient online registration, thereby reducing the online registration process to 4 minutes.

Who are you?

Dr Samiul Ahmed, GP, Barnetby Medical Centre, samiul.ahmed@nhs.net
Umer Gondal, assistant practice manager, Barnetby Medical Centre, umer.gondal@nhs.net
Malik Takreem Ahmad, NHS healthcare volunteer, Medical Student, King's College London, malik.ahmad@kcl.ac.uk

What was the problem?

Baseline: only 11% of patients at the practice were registered for patient online services.

- This meant that the majority of patients were reliant on physically travelling to the practice to order medication, which would not be a viable option for COVID-19 high-risk patients or those with symptoms.
- Alternatively, the patients could telephone in to the practice; however, this was unnecessary extra workload on top of the telephone and video consultation work already being carried out by practice staff members.
- Many patients were not aware of the Patient Online Services offered by the practice, and there was a lack of awareness regarding Patient Access, the platform used by the practice for online services.
- Many patients had mobile numbers and email addresses that were not correct; updating these was crucial for sending video consultation invitations.

What was the solution?

The main task was the streamlining of the online registration process; this meant coordinating various tasks into a concise and clear task-flow process.

- The first step in this process was to raise awareness of Patient Access as the platform for patient facing online services being used by the practice; posters

outside the practice, a banner on the practice website, and receptionists informing patients of this online service resulted in many people registering their interest.

- The main task then was data collection and obtaining consent from each patient. This was done through AccuRx Chain, a patient communication system via SMS, and direct telephone calls to each patient. This step also enabled the update of patient contact details (mobile numbers and email addresses).
- The key reduction in timing came from the online account creation and GP practice linking that was done in-house, to ensure that the patients were supplied with an account that was fully activated and ready to use. This process took around 4 minutes and was a much more patient-focussed approach.
- We also made sure to follow up with patients to ensure they were regularly accessing the services. Patients were also sent summarised guides to using the online services; for example, ordering online medication or booking an appointment.

The result of this 2-month long project was that currently 22% of registered patients at the practice are registered for online services.

This is a 100% increase from the starting figure of 11% and is one of the highest percentages among GP surgeries in North Lincolnshire.

Furthermore, weekly online medication requests also increased from an average of 15 to 35; an increase of 133%.

Where can we find out more?

A comprehensive report is available at:

<https://qiready.rcgp.org.uk/casestudies/barnetby-medical-centre-patient-online-services-registration-via-patient-access-gp-qi-project/>

For more detail about specific task-flow processes, feel free to contact the project lead, Malik Takreem Ahmad, at malik.ahmad@kcl.ac.uk

<https://bjgp.org>