BrisDoc Patient care by people who care

Proudly employee owned.

Charlotte Keel MEDICAL PRACTICE

Call Handling Process

Version:	Owner:	Created:
1.2	Andrew Townsend and Sonny Gazzard	01.12.2025
Published:	**Approving Director:**	**Next Review**
24/09/2026	Diane Douglas	24/09/2027

Contents

Introduction

This document outlines the call-handling process for managing patient enquiries relating to GP appointments, Long-Term Condition (LTC) appointments, Treatment Room appointments, and entries to the Clinical Assessment Screen (CAS).

It ensures consistent, safe, and clinically appropriate triage across Charlotte Keel Medical Practice.

Scope

This procedure applies to all CKMP reception and administrative staff handling patient calls regarding:

- GP clinical enquiries
- LTC-related symptoms or follow-up bookings
- Treatment Room procedures
- Travel vaccination enquiries
- Blood test bookings

Responsibilities

All reception and call-handling staff are responsible for:

- Following this standardised call process
- Recording accurate clinical information and red flags
- Ensuring appropriate appointment allocation
- Communicating clearly and professionally with patients
- Correctly escalating urgent cases following the After-4pm protocol

GP APPOINTMENT CALL HANDLING PROCESS

4.1 Greeting and Patient Verification

1. Answer call:

“Charlotte Keel Medical Practice, how can I help?”

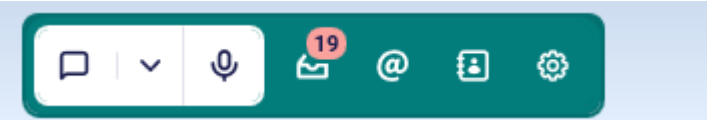
2. Verify patient details:

- Full name
- Date of birth
- First line of address
- Confirm contact number (start or end of call)

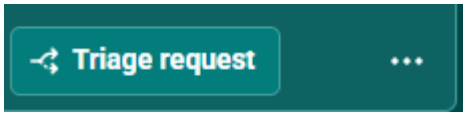
4.2 Documenting the Enquiry

3. Patient contacts us – put the details into EMIS.

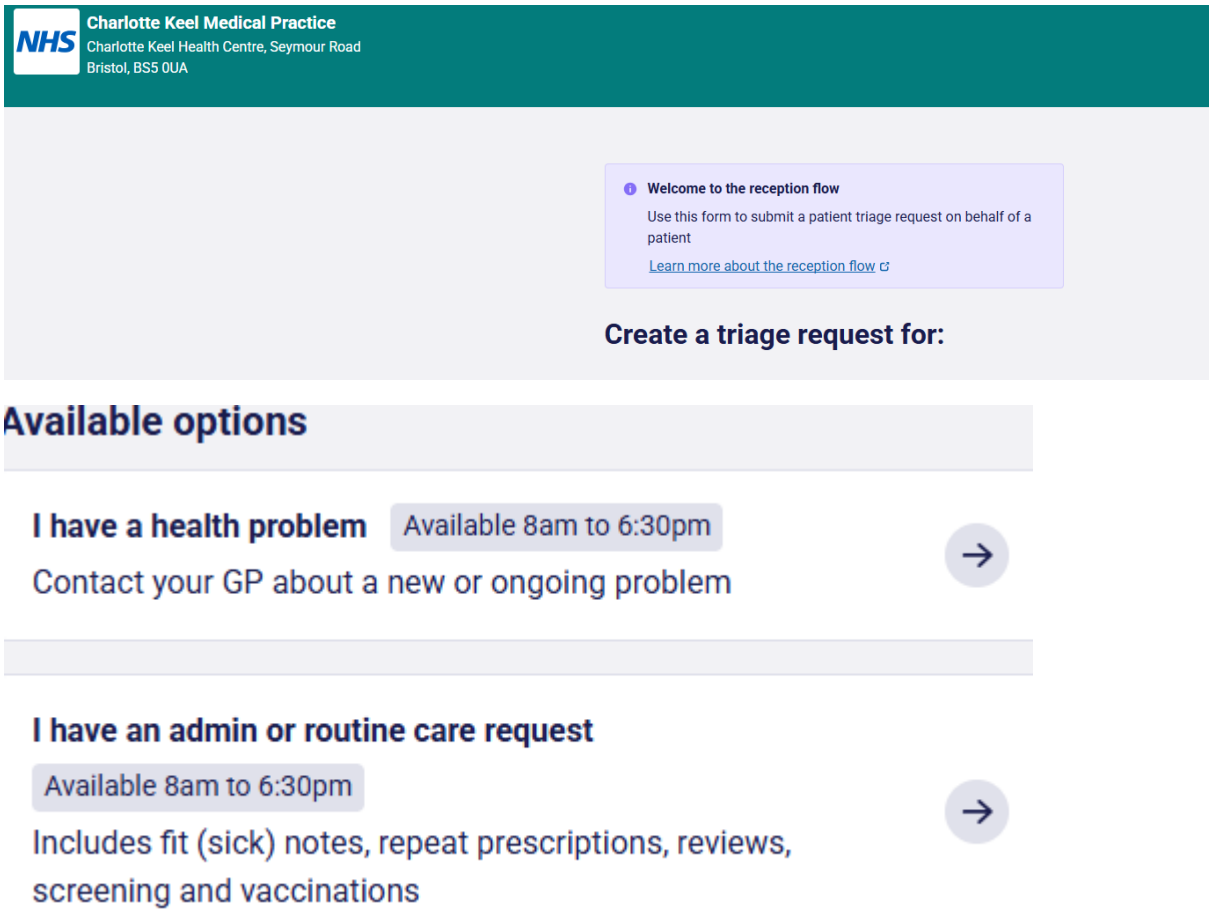
Go to AccurX and into the envelope as if you were looking at an E Consultation



In the bottom left corner of the page it will show EMIS patient – patients name and Triage request – click on triage request



This brings up



You then complete the form on behalf of the patient exactly the same as they would do if they were completing an E Consultation.

Box 1 – Symptoms & Red Flags

- Document symptoms in detail
- Record all red flag checks using the Health Navigation spreadsheet
- Include red flag positive or negative findings for each symptom

Box 2 – Duration of Symptoms

- Enter duration for each symptom separately and if they have changed, improved or worsened

Box 3 – Patient Concerns

- Document what the patient thinks or worries it might be

Box 4 – Patient Request

- Document what the patient wants
- Avoid generic entries such as “wants an appointment”

Box 5 – Availability

- Record any times the patient cannot be contacted
- Do not ask when they prefer to receive calls
- Default call attempts: 08:00–18:30

4.3 CAS Entry and Communication

6. Enter summary into CAS (Clinical Assessment Screen)
7. Change slot to appropriate appointment colour/type
8. Inform patient:

o On-call GP will review today

o SMS outcome will be sent before 18:30

9. Check for further enquiries
10. End call politely

AFTER 4PM RULES

- Routine enquiries received after 16:00 → Next Day CAS
- Send the “Next Day” SMS
- Only medically urgent enquiries go on same-day CAS after 16:00
- Must contain a symptom listed in the After-4pm spreadsheet column
- These symptoms represent serious red flags

Medication Requests

- Only items on the Emergency Drug List may be added to CAS
- No other medication requests go to CAS
- Exception: patient travelling within the next few days

RE-TRIAGE / RE-ADDING TO CAS

Patients are not added back to CAS simply because they dislike the appointment offered.

A patient may only be re-added if:

- They report new symptoms
- Or changed, measurable symptoms
    - Must include what changed
    - When it changed
    - How it affects them now

The GP will reconsider the RAG rating only when new clinical information is provided.

NURSE APPOINTMENTS – LONG TERM CONDITIONS (LTC)

LTC Symptom Calls

1. Follow Steps 1–3 from GP process
2. Check “Nurse LTC APPTS” spreadsheet tab
3. Book into LTC Urgent List if appropriate
4. If capacity unavailable, and appropriate, book into CAS

LTC Follow-Up Appointments

5. Open F12 → LTC Recall letter sent display
6. Book according to the “Nurse LTC APPTS” guidance

Patients Wanting to Discuss LTC (not urgent)

7. If no active recall and symptoms do not meet urgent criteria:

   Book LTC TELCON PLANNED

NURSE APPOINTMENTS – TREATMENT ROOM

1. Follow Steps 1–3 from GP section
2. Book according to the Treatment Room Slots spreadsheet

o Accuracy is essential to ensure the patient can be seen

3. Confirm appointment + check for other enquiries
4. End call

ADDITIONAL REQUIREMENTS

Travel Vaccines

- Book *only* into Travel slot
- If unavailable, advise patient to attend a **private travel clinic**

Blood Tests

- Only book if test request appears in:
  - Diary
  - GP consultation notes
  - ICE
- Symptoms requiring investigation must go to **CAS** first

Slot Types Are Not Interchangeable

- LTC and Treatment Room slots cannot be swapped
- Book each condition into the correct slot type

Date	Version	Author	Change Details
1.12.2025	1.2	ATownsend/ S Gazzard	Need original created date and log of changes?