Sherbourne Road Medical Clinic

5.4. Policy on Receiving and Returning Telephone Calls

An incoming telephone call is the principle method for initial and subsequent communication by a patient and most other persons to this Practice. As such the telephone is recognised as a vital vehicle for creating a positive first impression, displaying a caring, confident attitude and acting as a reassuring resource for our patients and all others.

Our aim is to facilitate optimal communication opportunities with our patients. General Practitioners and staff members are aware of alternative modes of communication used by patients with a disability or a language barrier, or increased electronic methods.

Some patients may be anxious, in pain or distracted by their own or a family member's or friends medical condition and our staff act to provide a professional and empathetic service whilst attempting to obtain adequate information from the patient or caller.

Staff should not argue with, interrupt or patronise callers. Courtesy should be shown to all callers and allow them to be heard. Every call should be considered important.

Staff members are mindful of confidentiality and respect the patient's right to privacy. Patient names are not openly stated over the telephone within earshot of other patients or visitors. This Practice prides itself on the high calibre of customer service we provide, especially in the area of patient security, confidentiality, and right to privacy, dignity and respect.

It is important for patients telephoning our practice to have the urgency of their needs determined promptly. Staff should try to obtain adequate information from the patient to assess whether the call is an emergency before placing the call on hold. Staff members have been trained initially, and on an ongoing basis, to recognise urgent medical matters and the procedures for obtaining urgent medical attention. Reception staff members have been informed of when to put telephone calls through to the nursing and medical staff for clarification.

Patients of our practice are able to access a doctor by telephone to discuss their clinical care. When telephone and / or electronic communication is received, it is important to determine the urgency and nature of the information. Staff members are aware of each doctor's policy on accepting or returning calls. In non-urgent situations patient calls need not interrupt consultations with other patients but it is necessary to ensure the information is given to the person in a timely manner.

Patient messages taken for subsequent follow-up by a doctor or other staff member are documented for their attention and action, or in their absence to the designated person who is responsible for that absent team member's workload. Staff insert the details of all calls and telephone conversations assessed to be significant in a telephone call log.

The doctor needs to determine if advice can be given on the phone or if a face to face consultation is necessary, being mindful of clinical safety and patient confidentiality. Patients are advised if a fee will be incurred for phone advice. Non-medical staff do not give treatment or advice over the telephone. Results of tests are not given out by non-medical staff, unless cleared with the doctor or nurse.