**PETROC GROUP PRACTICE / POLICIES**

**Late Arrival Policy**

**Introduction**

It is important that we are clear to staff and patients alike regarding what our policy is on arriving late for an appointment.

**Objectives**

* To set out clearly defined reasons and rules which everyone can follow.
* Where there are exceptions, and what those exceptions can be.
* Safeguards should be in place to protect staff and patients with regards to safe clinical treatment. The reasons that mistakes can occur are known to arise from rushing appointments and trying to perform clinical procedures in less time than appropriate.
* A policy should allow clinicians enough time to wipe down surfaces and follow infection control guidance between appointments.

**Scope**

Clinical appointments can vary in length. Appointment times are the lengths that they are for the patient and clinician’s safety.

Since Covid-19, there are now extra precautions that must be taken to keep within infection control guidelines and to keep patients safe.

Patients have a duty to attend pre-booked appointments promptly, and to consider logistical difficulties, traffic jams, delays on public transport and time involved when travelling to the surgery.

Patients are to understand the importance of timely attendance for appointments and giving themselves enough time to park and check in.

Patients may not know the length of their appointment, so staff may need to explain to patients the reasons that they are marked late for their appointment.

It is at the clinician’s discretion if they see patients are late, but this document should give them the guidelines under which the practice usually operates.

**Procedure**

 The general rule should be that if a patient is late by half the length of the appointment, up to a maximum of 10 minutes late, they would be marked as *did not attend* and encouraged to rebook.

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| ***Appointment Length*** | ***Late Arrival Cut Off*** |
| 5 minutes | 3 minutes |
| 10 minutes | 5 minutes |
| 15 minutes | 7 minutes |
| 20 minutes | 10 minutes |
| 30 minutes | 10 minutes |

Patients that are late for their appointment should then be offered;

* Another appointment on the same day, at the same surgery, if one is available.
* If not, an appointment on the same day, at a different Petroc surgery, if one is available.
* If none are available for that day, then the next available appointment at the same surgery should be offered, and then at a different Petroc surgery failing that.

**Concerns for Patient Welfare**

The surgery is very busy, so it may not be possible to accommodate the patient on the same day. If there are concerns for the patient’s welfare and the patient looks unwell but cannot be rebooked with the clinician on the same day, then this should be discussed with the clinician whilst the patient is still in the building. In these circumstances, ask the patient to take a seat in the wating room whilst reception check with the clinician.

**Clinical Discretion**

GPs do work in a different way to the nursing team and may have more flexibility in how their appointment book is structured. If a patient is late for an appointment, you can *arrive* a patient on screen, let the patient know that they are late for their appointment, but that you will check if the GP is able to see them. Clinician’s may already have called in their next patient, and so patients and staff may be required to wait until the clinician is free to discuss.

If a GP is running a clinic for an enhanced service or minor injuries (i.e coil clinic, joint injections…) then this would revert to the standard appointment cut off half the length up to 10 minutes late.

**Clinics Running Behind Schedule**

Occasionally, clinicians themselves run behind schedule, where treatment or consultations have clinically needed to be longer than given. Reasons for delay may be, but are not limited to; medical emergencies, complex routine appointments overrunning or administrative error by a patient or staff member.

An example of this could be a blood test appointment where the HCA/phlebotomist has been unable to draw blood from a patient, or a patient has fainted. This can impact whether patients that are late can be seen or not. The general rules should apply, unless the clinician lets the reception staff know otherwise.

Should any patient have waited more than 20 minutes then this should be investigated. This may be because the clinic is running behind, but sometimes it may be the case that the patient has forgotten to check-in, or that the reception team has failed to book the patient on the screen as having arrived. Reception should check with the clinician if they can be accommodated or rebooked as per the general rules.

**Persistent Late Attendance**

The practice will monitor and record the incidence of patients who are late for appointments within the clinical system. Persistent late attendees will be issued with a series of warning letters.

**Summary**

Appointment punctuality ensures that the organisation remains on schedule and that patients are seen on time. Whilst it is accepted that emergencies and complex cases may cause unavoidable delays, this is not however the norm.

Staff should encourage patients to attend their appointments on time, facilitating the smooth running of the organisation and avoiding unnecessary wasted appointments.

Reviewed by Emma King

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