

From Receptionist to Active Signposter

Receptionists in GP practices are now expected to do more than just book appointments with doctors. With appropriate materials, protocols and support, they will often 'signpost' to the most appropriate professional or service within the practice or locally. Our core training **Receptionists as Active Signposters** is an evolution of EPI's seminar "Enhance Your Telephone Conversations with Patients" which we've run approx. 100 times, for CCG audiences and individual practices.

NB Our training is aimed at the "Essential" (i.e. Bronze) level of training suggested in "Care Navigation Competency Framework" from Health Education England (2016).

Outline of EPI's enhanced core training seminar "From Receptionist to Active Signposter" (1/2 day for Reception Team + Manager + Lead GP)

Includes:

- Introduction and aims
- Evidence from published research e.g. the work of Professor E Stokoe
- Exercises; individually and in small groups, reflections on their own experience - what is going well, and where the challenges arise being on the receiving end
- A skill framework for improving communication skills
- Managing patient expectations
- Identifying the needs of the patient – gathering information
- Identifying red flags. Discussion of the issues. Sharing some good examples from other practices. Recommending that practices develop in-house protocols and training under the supervision of a GP.
- Facilitating you to build a directory of services - "who does what" (typically working with the practice's own directory, with suggestions from EPI).
- Selecting the appropriate clinician/service and signposting the patient without clinically triaging
- Maintaining confidentiality
- Rehearsal of the specific skill areas that we have found to most repay development i.e. "Golden-time—The Opening 60 seconds"
- Practising signposting skills in groups of 3. Participants take turns to be receptionist/patient/observer. The task is performed 3 times, with participants swapping roles. There is observer-led feedback after each performance.
- A 5' audio interview with 3 receptionists who have already made the change Active Signposting; sharing their views of key benefits as they see them; of some challenges they experienced & their tips on getting the most from this way of working
- Sharing some best practice examples of patient educational materials to support this new way of working e.g. signposting documents for practice website, waiting room, leaflet etc. (examples used by EPI practice customers, with permission)
- Discussion of suggested "scripts", protocols and procedures for receptionists to work to [brainstormed during the training, for further development in-house]

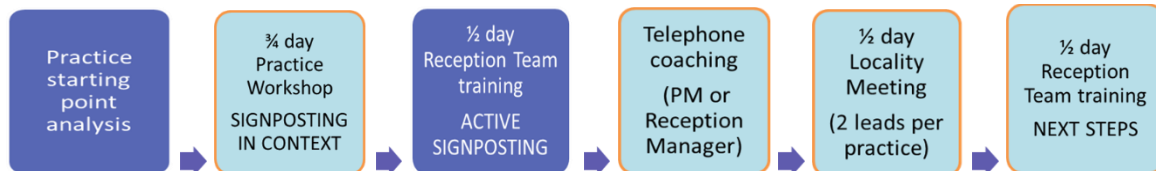
A course pack for all participants includes

- A course book for all; acting as a workbook on the day and a reference for later
- Examples of excellent sign-posting materials that we have come across
- A template for developing an in-house directory

Embedding the training

Our stand-alone training sessions leave the practice with a SMART action plan, which should enhance the chances of making changes in the practice. We always speak with you first, learn about your needs, and then tailor the training for you (Darker blue boxes).

Embedding change in practice usually benefits from support. Based on our experience, EPI can offer any (and perhaps ideally, all) of the options in the lighter blue boxes below:-



Options for embedding:

- 3/4 day whole-practice-team workshop. Examining the introduction of Active Signposting in the whole context of the practice's response to demand & wider access challenges – to maximise the chances that signposting will succeed. It is particularly critical that the GPs have “ownership” and understand what Active Signposting is trying to achieve.
- Telephone coaching for the practice manager/change leader. Typically 2 x 30 minutes sessions, with written action point follow up
- Follow-up training for the reception team. This could be used EITHER to embed the “signposting” skills OR, for selected practices, to move to developing higher level navigators.
- The practice identifies a core team to drive implementation. Usually the PM or APM (Reception) and a GP. Or all three. We offer locality meetings of these core teams. Typically 10 or so practices (20-30 attendees) for a half-day (3 hrs) to review successes and challenges - with input designed by EPI in discussion with the practices. Leading to SMART actions points for each practice. Ideally 2 such meetings over a 9- 12 month period.

[NB. A parallel training session FOR CLINICIANS focuses on telephone triage/consultation skills and explores how to support the Signposter role. Whilst this is outside the NHS England funding in our experience it helps if the doctors, nurses and other clinicians align their own practice in ways that fully support the Signposting role.

SO we can offer you the core “signposting” training as a stand-alone activity; or the full package; or any combination of elements that matches your needs and circumstances.

Some customers also commission the following, for CCG wide events:

- Sourcing commercial venues to run training events or meetings
- Handling individual course bookings

Why EPI?

- EPI has been designing and delivering skills-based professional training for clinical and non-clinical staff since 2003. We are the largest UK organisation specialising in this way.
- Our core non-clinical training faculty currently includes 2 nurses, a Practice Manager and a Professional Skills Trainer. 2 experienced GP's advise on the course development.
- We are in the process of recruiting another 2 Practice Managers and 2 Nurse Practitioners to our team and have advertised for further suitably experienced receptionists, managers and nurses to add to our faculty.
- We know how to recruit suitable people, then train and maintain them.

EPI assistance with promotion and preparation

- EPI has an office team of (currently) 4 people, working Mon-Fri 0900-1700
- >95% of our training is run for/on behalf of our customers (as envisaged here)
- Working with individual practices, we will liaise with you in advance, and tailor all subsequent training to address your specific needs and organisational realities; we may set homework!

EPI's most relevant experience

We have delivered approx. 100 training half days in the last 4 years for receptionists - for individual practices, CCGs or Federations.

We have completed commissions of this or closely related training ("Responding to Patient Demand for Access") for multiple practices (up to 20 individual half days per CCG) – for 7 CCGs in London and 2 in the West Midlands, and 1 Health Board in Scotland.

Our training is designed by primary care practitioners, for GP surgeries and primary care audiences. And tailored appropriately for each individual customer, and for each individual training episode.