**Glastonbury Surgery - Document workflow**

We made a start on this September 2016 when the GPs determined a list of documents that they did not need to see. This resulted in 70% of documents scanned and sent to GPs and 30% scanned and sent to other members of the team or filed to patient record.

In July 2017 Dr Alastair Corfield and Andrea Ball, Practice Manager attended GPFV funded “Improving the flow of documents” a seminar presented by Effective Professional Interactions. The aim was to improve the flow of documents through the practice; to reduce GP workload; to enhance patient safety through systematic processes and to develop staff skills to enable this to happen. The objective of the workshop was to enable us to reflect on our current system; demonstrate a new model of working; provide resources to facilitate change safely and an opportunity to share experiences of a practice that had successfully implemented an improved system. The workshop was delivered by a GP to a GP and PM audience with the credibility of having made these changes in house where the benefits had already been measured.

Dr Corfield presented these ideas to the Partners and it was agreed that we would introduce this system of document workflow at the surgery. We decided that we needed dedicated scanning hours that were protected and that our aim was to clear scanning workload each day, we decided to move the team out of the main reception office to protect this time with the view that if work was completed each day it would reduce workload in other areas where we had found work to be duplicated and queries raised as a consequence of delayed document filing. We asked for staff to put themselves forward if interested in working on this project and created a workflow/scanning team of four staff, a total of 55 hours a week reduced now to 51 hours. We estimated the hours required based on previous scanning hours and anindication from the training team of time requirements for enhanced document workflow. Dr Corfield was appointed as clinical lead for the project.

Dr Corfield delivered cascade training to the newly formed workflow team on 17 August 2017. Two scanners were set up in a quiet office space away from the reception office. A scanning rota was established to ensure cover every day morning and afternoon. One member of the team was tasked with creating a protocol for optimising document workflow as a guide for the team that was agreed and signed off by the clinical lead to include: read codes, processing and naming of documents, file or forward to clinician decisions and useful abbreviations. We set up review meetings on a weekly basis to start with which became as and when needed to help the scanners further their knowledge and develop the protocol working document. File directly documents were agreed with the caveat of any uncertainty refer to GP. GP actions identified within documents are highlighted by the team before sending to GP.

We set up daily audits in January 2018, when the team had been working together for about three months, to see how many documents were being sent to GPs and how many filed to record without going to the GP. We recorded the number of paper and electronic documents being processed each day and the % of documents that were coded or “ action taken” by the workflow team, and the time taken to complete workload on a daily basis to ensure we had the right number of hours for this work.

Dr Hughes took over the project as clinical lead, following a routine rotation of Chairman role within the partnership, and had conducted two random sample audits of documents processed for clinical governance purposes. This has enabled him to be satisfied that the workflow team currently have the knowledge, skills and experience to direct workflow appropriately and safely according to agreed guidelines. All clinicians have been encouraged to offer open and constructive feedback to the team to help develop learning within the team.

Progress/Results at end of Year 1

The Document workflow processes has reduced GP workload.

We have reduced the number of documents scanned and sent to GP to review from 70% to 30% (a complete reversal of former trend).

We have been able to determine that we process an average 720 documents each week ( Paper and Electronic). This takes the workflow team approximately 41 hours per week.

Document workflow is now real time with all work processed by the end of each day by the workflow team with protected time. This has knock on beneficial effect throughout the practice reducing unnecessary work caused previously by scanning backlogs.

Appropriate governance measures have been established to assure patient safety, a continuous quality improvement process, an open and constructive culture, agreed standard protocols; overseen by a clinical GP champion.

Challenges

It has been difficult to coordinate feedback meetings with all the relevant staff due to work pressure and differing working patterns.

There is potential to take this work further by increasing actions taken by the workflow team on behalf of the GP ie arranging requests for further investigation/ follow-up GP reviews requested by secondary care/ or requests for medication changes. This is dependent upon staff confidence and the practice approach to risk.

GP’s feedback

“ I have noticed a huge reduction in the administrative workload relating to documents with the new filing system. This has had a noticeable impact on my daytime working allowing me to process and action the important documents I need to see during normal working hours and means I don’t have to stay late or come in on my days off to catch up with paperwork and administrative tasks. It’s the best change for years that has happened to improve our workload and means less stressed and tired doctors providing better clinical service to our patients.”

“ The noticeable reduction in numbers of documents to read every time I’m in the surgery has made a big difference; occasionally I feel I haven’t seen one that would have been useful, but I am able to feedback to the scanning team to further refine the system”

“ I have noticed a reduction in time spent in the day looking at electronic post – and after a recent annual 2 week vacation – instead of the usual 200 letters and an inevitable 5-6 hours ( rather dry) reading had only 80 this year which was a very tangible benefit”

“I've definitely noticed a reduction in the number of documents that contribute to our workflow. After coming back from a weekend, I used to need to process through well over a hundred documents; now it is often nearer to 30. Of the 30 or so that I might see now, I suspect with time 10-15 of those will be manageable by an increasingly talented scanning team - as an example, I suspect it is only a matter of time before scanners are able to initiate booking for blood tests requests made by hospitals.

I'm really pleased with the way things have turned out, and am looking forward to ongoing evolution of the workflow changes.”

September 2018.