

ACCESS TO PRIMARY CARE

HOW TO MEASURE DEMAND

1. Introduction

The first step in improving access is understanding the practice's daily demand for appointments. On each day we need to know the number of people who wish to be seen that day, or a future day, for any appointment type (excluding special clinics). By including future demand we can understand the totality of demand including people who wish to book ahead.

Daily demand = same day demand + demand for future appointments

Instead of measuring activity (the number of appointments we offer) we need to understand what patients are actually asking for in any one day.

2. How do I measure demand?

Demand should be measured during a 'typical' week in each month, for at least 4 months; if time is of the essence, then practices can measure demand for four consecutive weeks. It is important that data is collected across a whole week so that any variances can be seen. You may also wish to consider measuring daily demand at different times of the year as there is sometimes a variation between summer and winter.

It is important to work with Reception staff to explain the importance of this work and so secure their commitment. Trial any collection method used to ensure it is understood prior to the practice wide measurement being taken. There are a number of ways that demand can be measured, but it should always be kept as simple as possible.

Create a tick box such as the one attached. For one week record each day the total appointment requests in the practice (regardless of the date when the appointment is booked in). This should include telephone requests, those made in person and follow-ups. Do this for a week. This sheet can be left with reception staff who can then mark down every time an appointment request comes in and should also be given to anyone else in the team who may make an appointment for a patient.

3. What else should I include?

Record the number of follow up appointments in the week. Follow ups are the element of demand which is entirely in the clinician's control. Clinicians can determine how often and when patients are called back. For example, it may not be a good idea to have a lot of follow up appointments on a Monday, which is usually the busiest day for requests.

4. What next?

Compare the daily demand with appointments offered. Your capacity is the number of appointments you offer on any one day including those currently blocked off as urgents. Does your capacity meet your daily demand?

5. Further understanding demand

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Extended hours (<8am/>6.30pm)								
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