

New research sheds light on the real experience of calling the GP surgery

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A new study by Loughborough University has examined – for the first time – how receptionists interact with patients over the telephone.

Pioneering research into GP receptionist interaction with the public over the telephone has revealed how patients have to 'push' for effective service.

The study, led by Elizabeth Stokoe, Professor of Social Interaction in the Department of Social Sciences at Loughborough University, examined – for the first time – how receptionists interact with patients over the telephone.

Professor Stokoe uses conversation analysis to understand the organisation of communication in different interactional settings and to highlight what constitutes [in]effective communication.

Conversation analysis of 447 recorded calls from three GP surgeries in England showed that 'patient burden' occurred near the start and at the end of the conversation. In both instances, the onus was increasingly placed upon the patient to drive calls forward in order to achieve good service. For example, patients are left hanging.

This pattern occurred when receptionists failed to offer alternatives to patients whose initial requests for information could not be met (for example, requesting an appointment but being told the GP surgery is 'fully booked'), or who failed to offer an alternative course of action (for



example, the option of a call-back to let a patient know when their X-ray results were available).

Independent patient satisfaction scores for the three surgeries involved in the study, which were collected from the GP Patient Survey, were compared with the relative frequency of 'patient burden'. A strong association was found between increased 'patient burden' and decreased satisfaction survey scores.

Professor Stokoe said the findings of the study can be used to boost frontline GP receptionist training, by offering a better communication strategy to help improve patient experience and satisfaction.

"The strengths of this study are in its analysis of actual, real-time encounters between the patient and the GP receptionist – effectively the 'shop window' of the practice," she said.

"This research, using conversation analysis, represents an important step forward in evidence gathering of what needs to change in order to improve the patient experience in GP surgeries. The findings can help inform future training, rather than having to rely on post-hoc reports of, or surveys about, communicative encounters.

"The study has also flagged, what I would term a phenomenon of interest, whereby rather than the receptionist offering an alternative course of action during the call, the burden is placed on the patient to keep the call going and push for the service they require. This kind of scenario was common across the dataset. In one instance, the receptionist initiates a closing of the call without any alternative proposal being made. In comparison, more effective receptionists made immediate alternative offers when the patient's first request could not be met."

The study entitled Calling the GP surgery: patient burden, patient



satisfaction, and implications for training has been published in the *British Journal of General Practice*.

More information: E. Stokoe et al. Calling the GP surgery: patient burden, patient satisfaction, and implications for training, *British Journal of General Practice* (2016). DOI: 10.3399/bjgp16X686653

Provided by Loughborough University

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