306 MEDICAL CENTRE

ACCESS POLICY

Policy owner: Practice Manager / Information Governance Lead
Approved by: GP Principal / Practice Management
Effective date: August 2026
Review date: August 2029
Version: 2.0

1. Introduction and Background

A. Contractual framework

The service specification set out in **Schedule 3 Part B of the Personal Medical Services (PMS) Contract**[1] details the practice's contractual obligations in relation to opening hours, appointments and patient access.

B. Practice commitment

In accordance with these requirements, 306 Medical Centre works to ensure that patients are afforded the **best possible access to an appropriately qualified healthcare professional**, taking account of clinical need, patient demand and available capacity.

The practice operates a **flexible and dynamic appointment system** designed to ensure that patients are directed to the most appropriate clinician and type of consultation.

This may include access to:

- General Practitioners (GPs);
- Salaried GPs;
- Locum GPs;
- Trainee GPs
- Advanced Nurse Practitioners (ANPs);
- Practice Nurses;
- Clinical Pharmacists;
- other appropriate members of the wider healthcare team and locally commissioned services.

C. Purpose of the policy

This policy sets out the arrangements in place for patient access at:

306 Medical Centre
306 Lordship Lane
London
SE22 8LY

It describes the practice's arrangements for opening hours, routine appointments, same-day and urgent care, online access, telephone and face-to-face consultations, home visits and extended access.

2. Practice Opening Hours

The practice is contracted to open the practice premises between **08:00 and 18:30, Monday to Friday, excluding public holidays**, to allow access to reception services.

These are known as the practice's **Core Opening Hours**.

The practice premises are deemed to be open when the front door is unlocked/open and patients can physically access the premises and have face-to-face contact with someone who can:

- respond to a query;
- make appointments;
- receive pathology samples;
- provide prescriptions;
- answer the telephone; and
- provide or facilitate other appropriate reception services.

The practice is required to advertise its Core Opening Hours on the practice website and in the practice information provided to patients.

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3. Extended Hours Access

The practice participates in the **Extended Hours Access Enhanced Service**.

Under this arrangement, the practice provides additional appointments with a GP or Nurse outside its Core Opening Hours. The number of appointments is determined in accordance with the relevant contractual arrangements and practice list size.

The practice's advertised opening arrangements are:

Day	Main Opening Times / Premises	Telephone
Monday	08:00–19:00	08:00–18:30
Tuesday	08:00–19:00	08:00–18:30
Wednesday	08:00–18:30	08:00–18:30
Thursday	08:00–18:30	08:00–18:30
Friday	08:00–18:30	08:00–18:30
Weekends & Public Holidays	Closed	Closed

Appointments provided outside Core Opening Hours are subject to availability and the arrangements applicable to the Extended Hours Access service.

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4. Practice Closures – Protected Learning Time

The practice participates in **Protected Learning Time (PLT)**.

PLT sessions usually take place on the **third Thursday of each month**. On these occasions, the practice may close between **13:00 and 16:30** for staff training and development.

Patients will be provided with information regarding alternative arrangements for accessing medical advice and treatment during these periods.

The arrangements for urgent and emergency care remain available through the appropriate NHS services.

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5. Appointments

5.1 General appointment arrangements

The practice is contracted to provide a reasonable number of appointments, calculated at **3.5 appointments per weighted population per annum**[2] [3].

Appointments may be provided by a GP, Nurse or other appropriately qualified member of the practice's multidisciplinary team, according to the nature of the service and the patient's clinical need.

The number and type of GP and nursing appointments are reviewed regularly in response to:

- patient demand;
- practice list size;
- workforce availability;
- seasonal pressures;
- clinical requirements; and
- other operational considerations.

Appointments for services such as CBT therapy, Osteopathy and Health Visiting are additional to the contractual GP/Nurse appointment calculation where applicable.

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6. Dynamic Appointment System

The practice operates a **dynamic appointment system** which is reviewed and adjusted according to patient demand, clinical need and available workforce.

The purpose of the system is to:

- provide timely access;
- ensure patients are directed to the most appropriate clinician;
- make effective use of available clinical capacity;
- provide appropriate choice where possible;
- minimise inappropriate bookings; and
- ensure urgent and same-day needs can be safely accommodated.

The practice recognises that different clinicians provide different services and consultation types.

For this reason, **online appointment types are deliberately configured according to the clinician and service**. This helps prevent patients inadvertently booking an appointment that is unsuitable for the service they require.

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7. Routine Appointments

The practice makes the majority of its routine appointments available for advance booking.

Patients are generally able to book routine appointments **at least one month in advance**, subject to clinician availability and service requirements.

The practice strives to provide routine planned appointments **usually within 10 working days**, although this is not an absolute guarantee and may not always be possible, particularly during periods of:

- exceptionally high demand;
- annual leave;
- sickness absence;
- unforeseen service pressures; or
- other circumstances affecting clinical capacity.

Routine appointments may be booked:

- online;
- by telephone; or
- in person.

The practice makes **approximately 85% or more of weekly appointments available for online booking**, subject to the type of appointment and service.

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8. GP Appointments

GP consultations are generally **10 minutes**, although some appointments may be longer where clinically appropriate.

A routine GP appointment may be provided by:

- a GP partner;
- salaried GP;
- locum GP; or
- another appropriately qualified clinician where clinically appropriate.

GP appointments may be provided by **telephone or face-to-face consultation**.

To reduce confusion and inappropriate bookings, **online GP appointments are currently configured as telephone consultations**.

Where a face-to-face GP assessment is required, this may be arranged following the telephone consultation or facilitated directly by the practice where appropriate.

This approach allows the practice to assess clinical need while avoiding unnecessary travel for patients where a physical examination is not required.

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9. Practice Nurse Appointments

Practice Nurse appointments are generally **face-to-face appointments**.

Online Practice Nurse appointments are therefore configured as **face-to-face appointments**.

Routine Nurse appointments are usually **15 minutes** and are generally available for booking in advance.

Patients may be asked to provide a brief reason for the appointment so that the practice can ensure that they are booked into the appropriate nursing service.

10. Advanced Nurse Practitioners

Advanced Nurse Practitioners (ANPs) form an important part of the practice's multidisciplinary clinical team.

ANPs are appropriately trained and experienced clinicians who can assess, diagnose and manage a range of acute and long-term conditions and prescribe where appropriately qualified and authorised.

Patients may be offered an appointment with an ANP where the ANP is appropriately qualified and experienced to manage the patient's particular clinical need.

This is intended to provide timely access to an appropriately skilled clinician and does not prevent access to a GP where GP input is clinically required.

11. Clinical Pharmacists

Clinical Pharmacists form part of the practice's multidisciplinary healthcare team.

They provide specialist support in relation to medicines and may undertake:

- medication reviews;
- medication optimisation;
- support for long-term conditions;
- prescribing-related consultations;
- medication queries; and
- other clinically appropriate activities within their professional competence.

Patients may therefore be offered an appointment with a Clinical Pharmacist where this is considered the most appropriate service for their needs.

12. Telephone and Face-to-Face Consultations

The practice provides both **telephone and face-to-face consultations**.

The consultation type offered or arranged depends on:

- the clinical problem;
- whether physical examination is required;
- the clinician providing the service;

- the nature of the appointment; and
- available capacity.

The practice does not require every patient to attend the premises where this is not clinically necessary.

Equally, telephone consultation does not replace face-to-face care where an examination or in-person assessment is clinically required.

Where a telephone consultation identifies the need for face-to-face assessment, the practice will facilitate this where appropriate.

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13. Same-Day Appointments

A small number of routine GP appointments are made available each day for patients whose needs **cannot reasonably wait until their next available routine appointment but are not necessarily urgent or an emergency**.

Approximately **8% of weekly appointments** are allocated in this way, subject to regular review and demand.

These appointments become available from **08:00**.

They are limited and patients may be asked questions about their condition to establish whether a same-day appointment is appropriate.

Practice staff will use the information provided to direct patients to the most appropriate appointment or service.

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14. Urgent Care and Same-Day Access

The practice maintains an access system to manage the urgent needs of its registered population.

The practice's urgent care arrangements include dedicated capacity of approximately **4% of total weekly appointments**, subject to regular review and demand.

Patients contacting the practice with an urgent clinical need will be appropriately assessed and may be offered:

- a telephone consultation;
- a face-to-face appointment;
- an appropriate appointment with another suitably qualified clinician;
- a home visit where clinically appropriate; or

- another appropriate service.

Where an urgent appointment is offered, the patient may need to wait according to clinical prioritisation.

Choice of clinician or appointment time may not be available for urgent requests.

Children under 10 are generally prioritised for same-day clinical assessment or telephone management where appropriate.

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15. Clinical Assessment of Urgent Requests

Reception staff may ask patients for information about their symptoms when they request an urgent appointment.

Reception staff do not make a clinical diagnosis. The purpose of obtaining information is to ensure that the request is directed appropriately and that clinical staff can prioritise patients safely.

The practice's urgent care system enables the duty clinician to:

- clinically assess urgent requests;
- assess requests for home visits;
- provide same-day telephone advice;
- provide or arrange appropriate urgent appointments;
- provide clinical support to the practice nursing team; and
- liaise with external organisations where clinically necessary.

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16. Walk-In Requests

The practice does **not routinely operate a walk-in appointment service**.

Patients who attend the practice without an appointment will nevertheless have their request considered and will be directed to the appropriate service or clinician.

Where a patient presents with a potentially urgent clinical concern, the request will be managed in accordance with the practice's urgent access arrangements.

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17. Online Triage and Online Consultation Requests

The practice provides an online consultation and triage facility through **e-Consult** and other approved online services.

Patients may submit information about their symptoms or healthcare request online.

Depending on the nature of the request, information may include:

- symptoms;
- duration of symptoms;
- severity;
- relevant medical conditions;
- current medication;
- relevant photographs; and
- contact information.

Online requests are reviewed by the appropriate member of the practice team.

The purpose of online triage is to help determine:

- what type of care is required;
- which clinician or service is most appropriate;
- how urgently the patient needs to be assessed; and
- whether an appointment is required.

The practice does not regard online submission as a guarantee of a particular appointment type or clinician.

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18. Extended Primary Care Service (EPCS)

The practice works with local practices through the local GP Federation to provide additional appointments through the **Extended Primary Care Service (EPCS)**.

The service operates **08:00–20:00, seven days a week**, subject to service availability.

Patients require an appointment in advance.

Where appropriate, the practice may arrange an EPCS appointment where:

- a face-to-face consultation is required following telephone assessment;
- practice capacity is limited;
- the available practice appointment is unsuitable; or
- the EPCS provides an appropriate alternative for the patient's clinical need.

EPCS appointments form part of the wider local access arrangements and are not a walk-in service.

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19. Home Visits

Home visits are intended primarily for patients who are **clinically unable to attend the practice**.

Patients do not have an automatic entitlement to a home visit.

All requests for home visits are clinically assessed.

The duty GP will determine:

- whether a home visit is clinically necessary;
- how urgently the patient needs to be assessed; and
- whether another form of consultation would be safer or more appropriate.

Where appropriate, the GP may telephone the patient before deciding whether a home visit is required.

The practice recognises that attending the surgery can provide access to clinical equipment, investigations and other healthcare professionals that may not be available during a home visit.

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20. Continuity of Care

The practice recognises the importance of continuity of care, particularly for patients with:

- long-term conditions;
- complex healthcare needs;
- multiple medical conditions; or
- other circumstances where continuity is clinically beneficial.

Where possible, patients may request a particular GP or clinician.

However, requesting a particular clinician may result in a longer wait for an appointment.

For urgent and same-day appointments, it may not be possible to offer a choice of clinician.

Clinical need and safe access will take priority over clinician preference where necessary.

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21. Double Appointments

Routine GP appointments are generally 10 minutes.

Where a patient believes they require additional time, they should discuss this with the practice when booking.

A double appointment may be provided where clinically appropriate and available.

Double appointments are unlikely to be available for urgent or same-day appointments and may not be possible during periods of particularly high demand.

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22. Appointment Cancellations and Non-Attendance

Patients are asked to cancel appointments they are unable to attend as soon as possible.

This enables the practice to offer the appointment to another patient.

Patients can usually cancel an appointment by replying **“CANCEL”** to the appointment reminder SMS.

The practice monitors appointment utilisation and missed appointments as part of its ongoing review of access.

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23. Chaperones

Patients may request a formal chaperone for an intimate examination or procedure.

A trained member of the healthcare team will normally act as the formal chaperone.

Patients may also request that a friend or family member is present for support, subject to the circumstances and the clinician's assessment.

Where a formal chaperone is clinically required but is not immediately available, an examination or procedure may need to be rearranged.

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24. Students and Trainees

The practice is involved in the education and training of healthcare professionals.

Medical students, nursing students and doctors in training may occasionally participate in consultations.

Patients will be asked for their consent before a student or trainee is present.

Patients are entitled to decline without this affecting their care.

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25. Out-of-Hours Access

The practice's normal telephone opening hours are:

Monday–Friday: 08:00–18:30, excluding public holidays.

Outside normal practice hours, patients can access urgent medical advice through **NHS 111**.

The practice's local out-of-hours arrangements are provided through the relevant local service.

Patients should use NHS 111 for urgent medical advice when the practice is closed.

For a **life-threatening emergency, patients should call 999**.

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26. Protected Learning Time and Temporary Closures

Where the practice closes temporarily for Protected Learning Time or another planned closure, patients will be informed of the arrangements for accessing appropriate medical advice and treatment.

The practice will ensure that appropriate arrangements are communicated for urgent and emergency healthcare during such periods.

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27. Access Monitoring and Review

The practice regularly reviews its appointment system to ensure that it continues to meet patient demand and contractual requirements.

This includes monitoring:

- appointment availability;

- same-day capacity;
- urgent appointment capacity;
- online booking;
- telephone access;
- face-to-face access;
- use of EPCS;
- demand for different clinician types;
- appointment utilisation; and
- patient access issues.

The practice is required to submit relevant information regarding Extended Hours Access and, where requested, demonstrate that sufficient same-day appointments are available.

The appointment system may therefore be adjusted in response to changes in demand, workforce, population needs and service requirements.

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28. Policy Principles

The practice's access arrangements are based on the following principles:

1. **Clinical need determines priority.**
2. Patients should be directed to the **most appropriate clinician or service**.
3. Patients should have access to **face-to-face care when clinically required**.
4. Telephone consultation should be used where it provides an appropriate and convenient alternative.
5. Online booking options should be configured to **minimise inappropriate bookings and ensure patients access the correct service**.
6. Urgent clinical needs should be assessed appropriately and safely.
7. Routine appointments should be available for advance booking wherever possible.
8. The practice will seek to maintain appropriate continuity of care where clinically beneficial.
9. Appointment capacity will be reviewed regularly against patient demand.
10. The practice will continue to review and improve its access arrangements.

29. Policy Review

Policy: Patient Access and Appointment Policy
Practice: 306 Medical Centre
Original date: April 2021
Reviewed: August 2026

Footnotes

[1] Contract of Variation relating to the Personal Medical Services Agreement between Southwark Primary Care Trust and 306 Medical Centre 2012.

[2] Weighted population is calculated on the registered list and factors include rurality, market forces and nursing homes.

[3] Based on weighted population as of 1 April 2016.