

# Telephone Call Monitoring

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## Introduction

As part of the continuing monitoring of practice and validation of time utilisation of the Innovex / MerckSerono MS Support team, an in-depth analysis of time spent on telephone contacts was carried out.

### Aims of the analysis:

- Quantification of the actual time spent on the phone
- Analysis of type of telephone contact
- Validation of time spent on telephone contacts.
- Development of a telephone monitoring tool for use by all MS specialist nurses

The initial activity analysis took place over a working week (Mon-Fri), included all team members and involved the counting of all incoming and outgoing telephone calls to both mobile and hospital line.

The analysis identified 80 hrs of the team's working week was spent on phone calls.

This equates to half a day per week per person, on the telephone (See graph 1).

To attempt to clarify the phone calls a grading system was then developed that would highlight the "quality" aspect of the call rather than just time spent, in order to try and establish:

- Value for money
- Useful economic resource of time by highlighting the number of patients that can be dealt with via phone intervention
- Demonstrating that "administration" time is as valid as clinic time by breaking down the components of administration into individual activities
- Showing that phone calls are more than "chit chat"

Graph 2 shows a breakdown of one team members phone calls.

Graph 3 shows the total number of team phone calls.

(Both graphs are for the same time period).

## The grading system

Calls were categorised according to the complexity

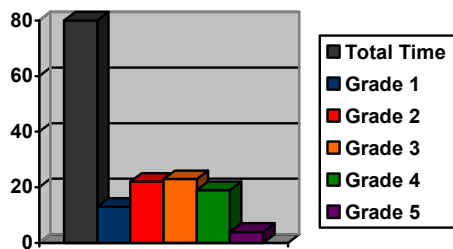
- Grade 1 = Administrative.
- Grade 2 = Simple chase calls with some actions.
- Grade 3 = Consultation dealt with over the phone.
- Grade 4 = Moderately complex consultation which generates actions and referrals.
- Grade 5 = Complex consultation generating many actions and referrals.

(Colours relate to graphs).

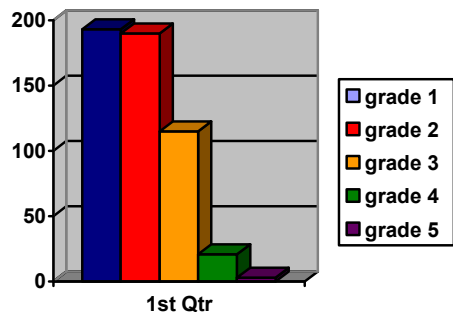
### Requirements of grading system

- User friendly
- Quick & simple to use
- Able to be used as a snapshot for activity analysis as it used on a daily basis.

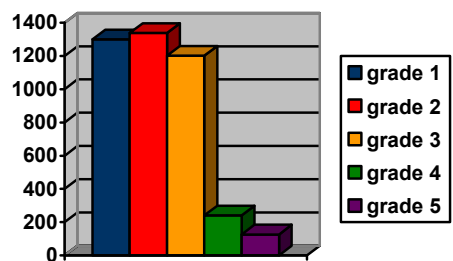
Graph 1. Total Time in Hours Spent on Calls



Graph 2. Breakdown of one team members calls



Graph 3. Total number of team phone calls



## Conclusions /Recommendations

- Further clarity of grading definitions to ensure consistency within the team.
- However, the grading system can be utilised, implemented and adapted to reflect local needs in individual sites.
- Provides accurate data
- Can be used to support a business case for an extra MS nurse
- Provides data to demonstrate the need for secretarial support for the MS Nurse as by triaging the calls better utilization can be made of nurses time.
- Telephone intervention can help in achieving the 18 week wait – clock stopper (grades 2-5). Would need to develop this within local setting to capture this.
- Influencing current practice – indications for telephone clinics? Justification of "office time"
- Upholding aspects of NICE & NSF guidelines.
- This is a work in progress which is continuing to evolve and to be molded into a functional model that accurately reflects our current practice.

## Resulting Changes in Practice

- Grading phone calls now part of daily practice
- Numbers collated each month end
- Forms part of the overall activity analysis of the team

## Further reading:

Department of Health (2005). The National Service Framework for Long Term Conditions. London. DOH.

Nursing and Midwifery Council (2005) Guidelines for records and record keeping. London: NMC.

National Institute for Clinical Excellence. (2003) Multiple Sclerosis-Management of Multiple Sclerosis in Primary and Secondary Care. NICE clinical Guideline 8. London. NICE

Royal College of Nursing. (2006).Telephone advice Lines for people with long term conditions.

