The impact of a new approach to registrations in south-east Edinburgh

Background

The Edinburgh City demonstrator site includes nine GP practices in south-east Edinburgh and provides care for a population of c73,000 people.

Improving access was identified as a key priority in Edinburgh City in response to population growth from new housing developments, and the increased demand on primary care services. They selected one case study site, Gracemount Medical Practice, (which subsequently became Gracemount Medical Group in November 2024, following transfer from 2C status to 17J Partnership status). The practice had been closed to new registrations since February 2023, due to increased demand which could not be met by the clinical and administrative teams.

Approach

A preliminary discussion with Gracemount Medical Practice found the need to prioritise a redesign of the registration process. Initially, the team developed a driver diagram to aid the identification and prioritisation of the challenges facing the practice, and to plan improvement activities. The primary drivers identified were standardised registration systems, access for patients and accuracy.

It was decided that one solution was for the practice to work with capital expansion team (CET) to streamline the system for new patients to register and improve patient access in south-east Edinburgh.

Their improvement aim was that by August 2024, 90% of all patients who were eligible and chose to join Gracemount Medical Practice were fully registered within two working days from handing in their completed forms, and all identified health questionnaire details were coded in line with the optimal summarising coding and accurate records (OSCAR) coding formulary. Change ideas are detailed below:

- **Standardising the registration process:** Change idea includes developing a new patient health questionnaire, designing a new registration template on the electronic medical information system (EMIS), and for all coding to be standardised.

- **Improving data input:** CET colleagues would be provided with, and required to follow, a registration quick guide. The guide would ensure standardised OSCAR codes were used and documents were compliant with general data protection regulation (GDPR).
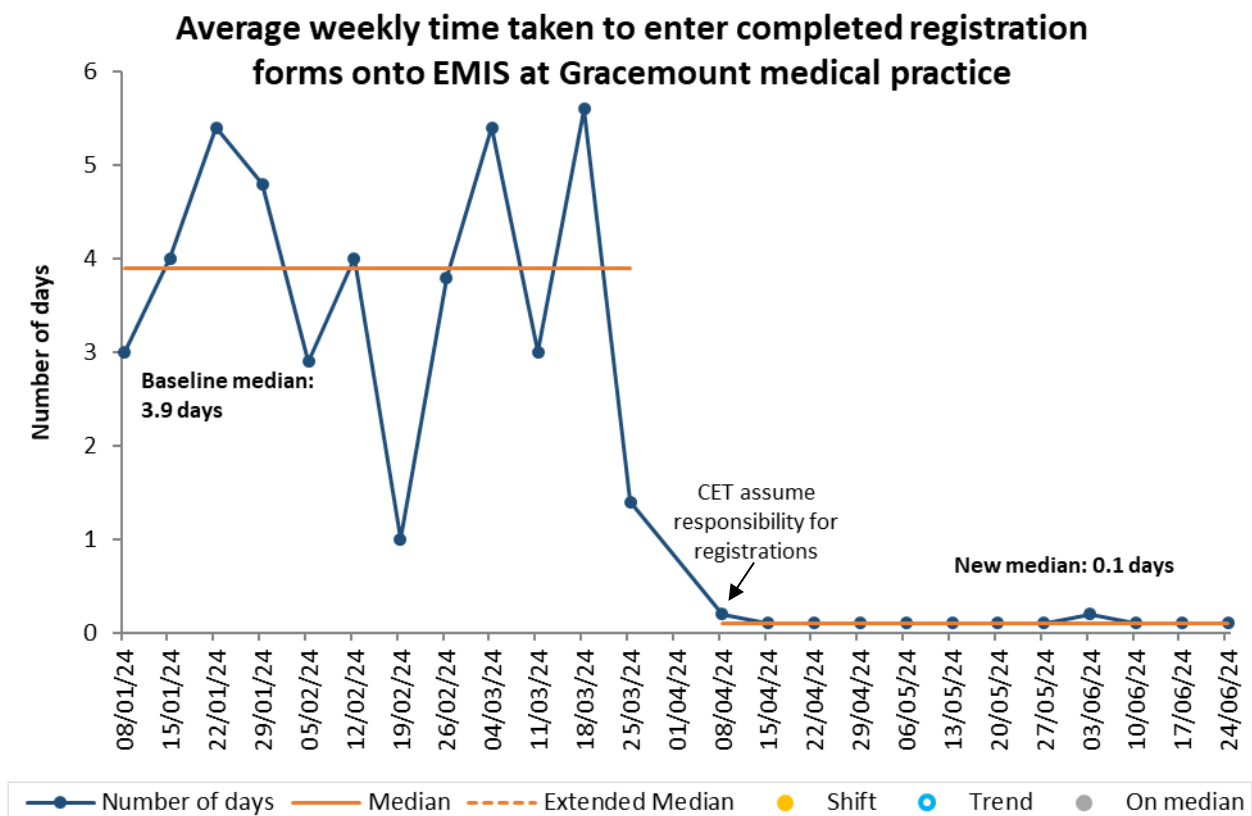
- **Streamlining administrative processes:** creating a target for all registration forms to be entered into EMIS on same day and scanned into Docman the following day and designing a welcome leaflet for all patients providing useful contact numbers.

- **Data Collection and interpretation:** Using data collected at each stage of the registration process, the team would streamline protocols and processes, understand patient demographics/patient movement to support with future business planning and service delivery needs.

Impact

Staff

Figure 1 presents data showing the weekly average time between a patient returning their completed registration form and the information being added to EMIS. This shows that the new registration process has reduced the average time taken to process a completed registration form from a median of 3.9 days to a median of 0.1 days.

Figure 1: Average weekly time from registration form submission to EMIS entry (January 2024 to June 2024)
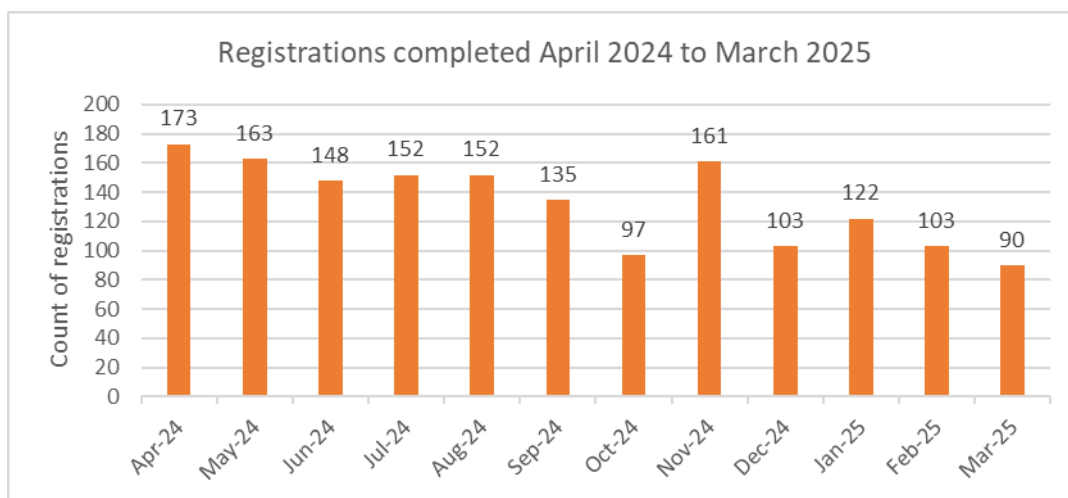
Moving all patient registrations to CET enabled administrative staff to allocate their time to other priorities. In addition, implementation of the new patient questionnaire, standardising coding, and the registration quick guide enabled the CET staff to reduce the average time taken to input each new patient registration to EMIS by 49.2% (from 13 minutes to seven minutes).
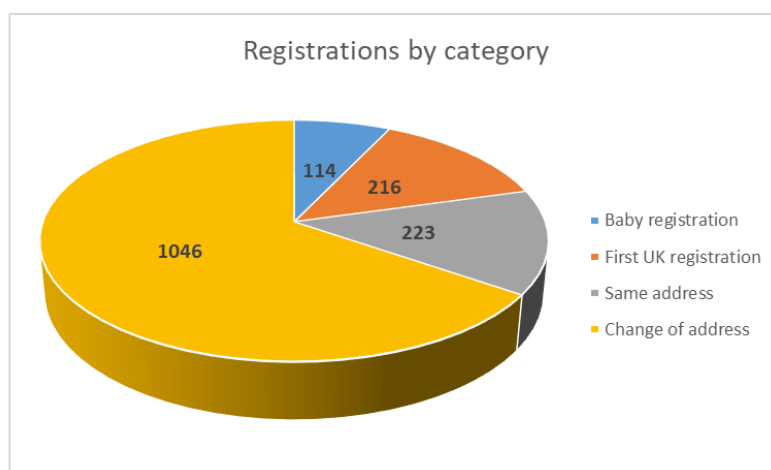
Practice

In the period April 2024-March 2025, 1599 patients were registered following the implementation of new protocols at the practice (*Figure 2*).

Figure 2: Registrations completed each month (April 2024-March 2025)

The new registration process provides real time data, including the type of registration (*Figure 3*). This supports the Gracemount team to better understand their patient population, plan care, and manage resources more effectively.

Figure 3: Registration by registration category (April 2024-March 2025)

Patients

A fully open list with dedicated team processing registrations has given patients improved access to local primary care services. In a June 2025 patient feedback survey on the registrations process, one patient commented *'we had special circumstances with my wife's medical condition, and we felt [the new registration process] was a smooth service'.*

The new registration process also identified if new patients had a sufficient supply of repeat medication and if not, a GP 'new patient medication review' administrative slot was booked. This allowed for a reduction in delays and smooth transition for patients ordering repeat medications.

Key learning

- Ensure baseline data is collected or available before making any changes.
- In early discussions, use data to engage in discussions with the wider team and promote buy-in for any new activity.
- Set targets but be willing to adapt to change.
- Be prepared to change protocols (eg the CET Registration Quick Guide was changed as the team progressed and is now on version 9).
- Ask for and listen to feedback from all those impacted by the project.

Next steps

CET has identified several key actions to support ongoing development, wider adoption and long-term sustainability of the service. These next steps focus on enhancing operational processes, improving system integration, and exploring opportunities for broader rollout:

- planning the transfer of registrations to the new practice admin team,
- sharing project findings with other practices,
- exploring online registration options,
- adapting the process for new general practice IT Systems, and
- building an IT compatible automated registration system which reduces the need for manual entry of details from practice reception/administration teams.

Acknowledgements