

## **A day in the life of.....the Finance Officer at Church Street Practice**

**8.00** Turn on computer, check e-mails and deal with them. There are two doctors asking for patients' files, a nurse requesting that I raise an invoice for a patient who is having some travel vaccinations of Hep B, rabies & Japanese encephalitis. Reception are also asking for a complete set of a patient's notes to be copied as they are moving to Canada. The other e-mails are confirming an order for some otoscope probes (for examining ears) and some statements from suppliers.

**8.45** Go to archive room to get the requested patients' files for the doctors, and put them in the doctors' trays downstairs. Whilst there collect paperwork in my tray. Check reception petty cash tin for any payments received from patients, none today.

**9.00** Deal with paperwork which includes:-

- Three insurance claim forms from patients that are then logged on to their computer notes, stamped and passed to relevant doctors.
- Two insurance claim forms that have been completed by the doctor. These need to be scanned on to patient's notes and an invoice raised. I then contact the patient to say their form is ready for collection.
- Three supplier invoices, one for some vaccines, one for a locum doctor and another for the sterilisation of equipment. I put these on to the accounts on the computer.
- Two life assurance forms, which I check are completed and signed. These are scanned on to the patient's notes and I raise invoices to the insurance companies. One patient requested to see the report before it was sent off, so I contacted them to say it was ready. They have 21 days to view it before I send it off.
- Three incapacity for work reports. Two new ones that are logged on to patient's notes and passed to the relevant doctor. One that has been completed by the doctor which is scanned on to notes and sent off. We don't get paid for these or any other social services, benefits or housing forms so I don't need to raise an invoice.

**10.45** Take completed paperwork downstairs and put in relevant doctors/nurses' trays. Pick up the post and stuff that fills my tray again including:-

- Requests from insurance companies for reports. I check that the patient has signed a consent form and then log them on to notes, then I get the patient's hard file from the archive room and pass them to the practice manager for her to print out a report from the computer.
- Four cheques from insurance companies for reports they received which I put on the accounts programme against the relevant invoices.
- Two insurance claim forms left by patients.
- Three disabled badge forms.
- Two disability living allowance forms.
- Two DVLA fitness to drive forms.

All these forms are logged on to the patients notes and passed to relevant doctors

**11.45** Go to archive room and get the hard file of the patient who is emigrating. Remove all letters, results etc. from the file and photocopy everything, including the old Lloyd George notes (the old style notes on two-sided card that are kept in a little pocket envelope), then put it all back into the file. Print all letters and notes that are on the computer. Raise an invoice and contact the patient to say the notes are ready to collect.

**12.30** One of the doctors has asked me to print all the letters on a patient's notes to accompany an insurance report that they are doing.

**12.45** Check store cupboard stock which includes toilet rolls, couch rolls fluorescent tubes etc.

**1.00** A delivery of stationery and office equipment which I ordered yesterday has arrived and needs taking upstairs in the lift and putting away in the stationery room. One item is an under desk drawer which needs its wheels and door handles put on, (which I will do tomorrow!)

**1.15** Discussed some literature and a piece of equipment for ordering with one of the doctors. I will search the internet tomorrow for the best prices.

**1.30** Backed up all my work, shut down the computer and took all necessary paperwork downstairs to put into trays. Time to go home!

The need for patient confidentiality creates a lot of work for us and causes misunderstandings, as we can only discuss matters with the actual patient concerned. We cannot leave messages or say where we are calling from, as this could be a breach of confidentiality.

### **General description of the finance officer job**

I pick up the post from downstairs then deal with it. Any invoices from suppliers (anything from envelopes to vaccines) are put on to the computer.

I sort out the reports; these are usually received via a patient or the post. They are recorded on to patient's notes then passed on to the right doctor. When they are returned to me I check that it is all signed etc. and scan it into the patient's notes. Then, if it is needed, I raise an invoice and post it off with the report.

I need to invoice companies for things like insurance reports, examinations, solicitor's reports and employment reports. Invoices for patients are usually for travel vaccinations, insurance claims, fitness forms and any other private letters or forms that do not come under NHS Services. There are quite a few forms and reports that we don't charge for e.g. Social Security and Housing reports. For any invoices and bills that are due I allocate cash and cheques then fill out paying-in book and bank them.

I keep an eye on stock, this includes all stationery, printer cartridges, toilet rolls, hand towels, cover rolls, tissues, fluorescent light tubes, etc. As well as ordering the stock that I am in charge of I also order everything else that is needed in the practice from new doctor's couches to cotton wool balls! I make sure that we always have enough stamps, usually buying 1000 at a time.

I also look after the petty cash. There are two tins in reception to take patient's payments for private consultations, medicals, etc. This money is transferred to the main petty cash tin which is used to pay for things like stamps, etc. and the rest is banked.

Once a month I get a print-out from the practice manager regarding payments we have received from the Oxfordshire PCT which need to be put on to the computer.

I also deal with the bank accounts and have to balance and reconcile all the statements.

Throughout most days I receive phone calls from companies and patients, mostly regarding reports and payments. This can sometimes be difficult as I can only discuss matters with people/companies where I have been given permission by the patient via a signed consent form.

And of course at the end of the day everything needs to be filed so there is always a big pile of that to do!