

Local Patient Participation Report 2012-13

Village Green Surgery Patient Reference Group

Practice Profile

The surgery is situated in an attractive part of Wallsend, Tyne & Wear. It has 9,700 patients and serves a diverse population. Opening hours are as follows:

Monday 8.00am to 6.30pm

Tuesday 8.00am to 8.00pm

Wednesday 8.00am to 6.30pm

Thursday 8.00am to 8.00pm

Friday 8.00am to 6.30pm

Saturday, Sunday and Bank Holidays – Closed

The practice offers appointments with GPs, Practice Nurses, Healthcare Assistants, Physiotherapists, Counsellors, a Midwife, District Nurses, an Orthotist, Pharmacists, a Mental Health Team, and a Smoking Cessation Advisor.

Appointments can be booked either in person in the surgery, on the telephone, or online via our practice website.

The practice has an on call doctor available at all times listed above.

Patient Reference Group Membership Profile

There are currently 69 members of the Patient Reference Group, all are registered with the practice. Their ages range from 18 to 77, and currently there is a 58:42 split of women to men on the group. However, many individuals represent families with several patients within the household.

We have striven to achieve a broad range of patients, covering all of the various groups and long term illnesses. We continue to recruit members, and look to strengthen the group ongoing with repeated drives for members.

The group is run as an online forum. This has proved much more popular than the previous traditional group meeting which was held in the surgery. The ability to log on and share views via online surveys has encouraged many more people to sign up than was previously possible.

How do we Recruit Members?

Recruitment is a major challenge. Many patients have no interest in joining the group, as they are perfectly entitled to be. In order to counteract this and achieve a balanced group we have used the following methods to sign people up:

- Posters in the surgery.
- An ongoing message on our Jayex board.
- An invitation on our website.
- Leaflets in the reception area.
- Leaflets in consulting rooms.
- Personal requests by clinicians in consultations to sign up.

- Personal requests by clinicians in chronic disease clinics to sign up.
- Personal requests by volunteer staff circulating in the waiting room asking people if they would sign up.

When people agree to sign up we make it as easy as possible. We take their email address, make a note on their patient record, and send them an email from the Patient Forum email account. This tells them what to expect and makes promises about our conduct of the group.

How do we Agree Priorities to Discuss?

We sent an email to all group members asking them how they wanted to be involved. This email had a link to a survey we had set up. We asked how long they wanted to spend on subsequent surveys, and how often we could contact them for their views. The results of this initial survey informed our decisions on how to best create a system which would allow meaningful input from all participants. We have now been running this system for two years.

How have we followed up on the decisions taken in 2011-12

The following issues were discussed and actioned as a result of the 2011-12 patient feedback. The results for each issue are highlighted in blue:

1. **Waiting time in the surgery.** The practice had recently altered the timings of surgeries to try and reduce late running by GP's at busy times. The PRG was asked if they think the changes are working.

What have we done since then: It was pleasing to see recent changes seem to have been well received by the patients surveyed. However, we have continued to monitor this as an ongoing item.

We are aware that this is an issue which does cause great concern when it goes wrong.

2. **Satisfaction with Availability of Appointments.** The practice now offers numerous late night surgeries, so the PRG was asked when they find most convenient to attend the surgery. A range of options throughout the day was be considered.

What have we done since then: We were surprised at the outcome of the survey, particularly the preference for early mornings and a distinct lack of interest in evening surgeries.

We reviewed the layout of appointments we offer with a view to amending the number of late night surgeries and increasing the number of appointments available prior to 8.30am. The practice now has more early morning appointments available.

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3. **Late Night Surgeries.** The PRG was asked how successful we have been at communicating the availability of these surgeries, and if not how we can improve our communication.

What have we done since then: We organised more advertising of the appointment times available

- We created a leaflet which was delivered door to door to 28000 homes in the practice area
- We have improved our website with more information.
- We have more signs in the building highlighting opening hours
- We have a new sign on the street. Sadly this was not as large as we would have liked due to planning restrictions.

4. **Telephone Access.** The greater use of email may help with telephone access, as hiring extra staff is not an economic solution. The PRG was asked whether they would consider using email to order repeat prescriptions, and whether they use the internet to book appointments.

What have we done since then: We have set up a patient email inbox to accept prescription requests. Patients are able to email in requests for repeat prescriptions and are sent a response informing them when it will be ready for collection. We are also moving to a new computer system, "EmisWeb" which will have even greater functionality including the viewing of medical records. This is being publicised as widely as possible.

5. **Speaking to a GP on the Phone.** The low satisfaction on this issue was a surprise, as we have numerous spare telephone consultations every day. The PRG was asked whether they are aware of them, and if they would use them.

What have we done since then: We took a long hard look at this.

We reviewed the length of the phone consultations, doubling them to ten minutes long, to see if they could be made more useful and effective.

We are working hard to publicise these consultations and improve access for patients to them.

6. **Would people recommend us to their family and friends?** The PRG was to be asked this question and given the opportunity to comment on both GPs and Admin staff.

Responses:

Of Course as I have always has excellent service from this practice and have complete faith in the G.P.s

Yes. Good doctors.

Yes I would, generally receive a good service.

Yes. My wife changed to the Village Green from Portugal Place.

Yes I would recommend to friends and family.

Yes

Yes

I most definitely would. I have consistently found that the service offered is excellent and the vast majority of the doctors I have seen have dealt with my conditions and concerns with understanding and professionalism.

Yes. I have found the staff very friendly and helpful

Yes I would recommend your surgery as I find all of the staff professional, caring and helpful.

What have we done since then: In a world where complaining has become a national hobby, it was lovely to discover that a lot of people are happy with our services. However, we are aware that sometimes problems occur. When they do we will always do our best to rectify them and respond appropriately.

7. Practice Leaflet. Are the PRG members aware of it, and what would they like to see on it?

What have we done since then: We created a brand new practice leaflet which highlighted the services we offer and things which we do differently which people may not currently be aware of. This was delivered to 28,000 homes in our practice area.

8. Test Results. In relation to general satisfaction with our services, the PRG was asked whether it is happy with the way they get results from us.

What have we done since then: We are pleased that 90% of patients were happy with the way we handle their test results. However, we will keep an eye on this to ensure everything we do is safe and in the best interests of our patients.

What did we do in 2012-13

Following the success of the first twelve months, for the year 2012-13 we again commissioned CFEP, a major national patient survey company, to provide, process and analyse a Practice Improvement Questionnaire. This questionnaire was circulated in the practice to 285 patients during October and November 2012, and analysed by CFEP on 4 December 2012.

A report was generated by CFEP, and this was discussed at a practice meeting involving all sectors of the practice team on 11 December 2012. This meeting isolated out the key issues and created a list of related questions which were to be passed to the Patient Reference Group for their views.

How do we Seek Members Views?

Whenever we want to ask the group for their views, a questionnaire is created on Survey Monkey, a website which we have signed up to. To protect patient's privacy

no personal details are requested via Survey Monkey. All questions are phrased in a way that allows freedom of answer. There are no leading questions. Where it is appropriate, there is either multiple answer choices available, or a box in which to record personal comments.

The following questions were asked of the Patient Reference Group in 2012, based on responses from the CFEP questionnaire:

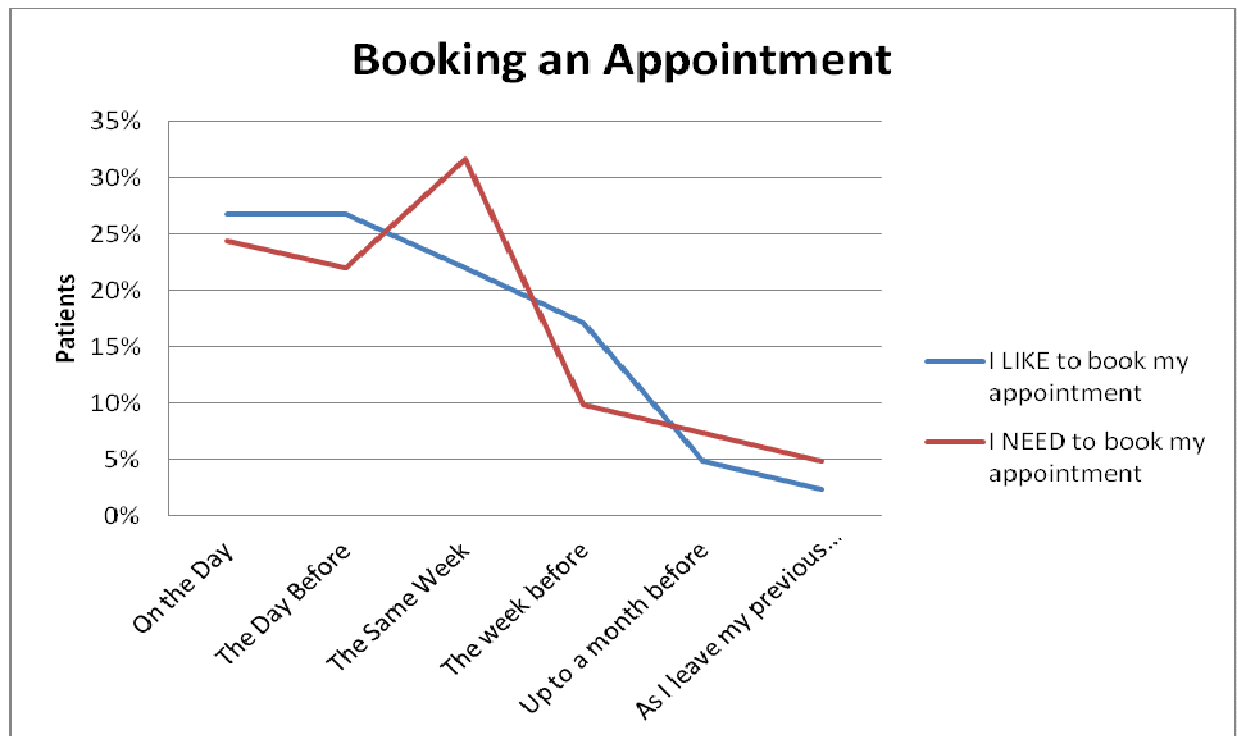
1. How far in advance to you like to book your appointment?
2. How do you book your appointment? Phone, in person, or internet?
3. The phone system greeting has a list of phone numbers at the start of it. Is this helpful or should the message be shorter?
4. Does the warmth of the doctor or nurses' greeting concern you, and do you consider this a good use of time or do you just want to get on and discuss your concerns.
5. We do a number of questionnaires each year to help us understand patient views. Do we do too many, just right, or not enough?
6. What do you think of the idea of rating your experience today as you leave the surgery with a single question "how do you feel your consultation went today?"
7. Are you interested in more information on "self care"? If so, do you want leaflets, website links or telephone advice?
8. The practice has a computer screen in reception which displays health advice. Do you watch it and do you find the advice relevant and useful?

Statistical Analysis of Responses

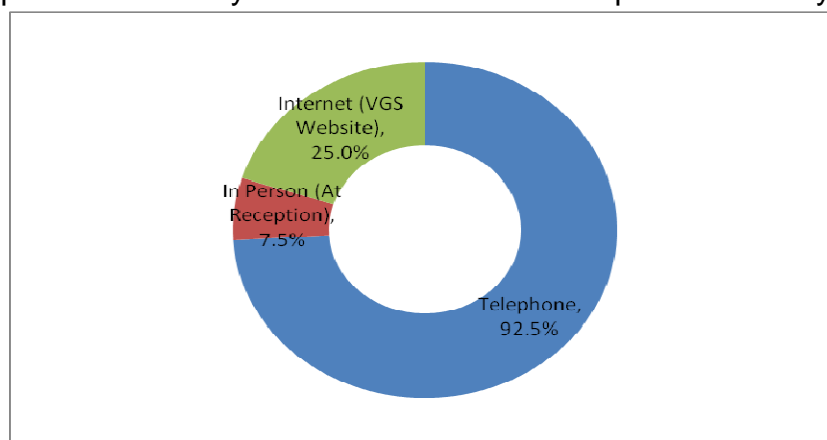
Survey Monkey was used to ask the Patient Reference group questions arising from the Improving Practice Questionnaire produced by CFEP in December 2012.

The following areas were felt to be most appropriate for action, and the survey results are recorded below each question:

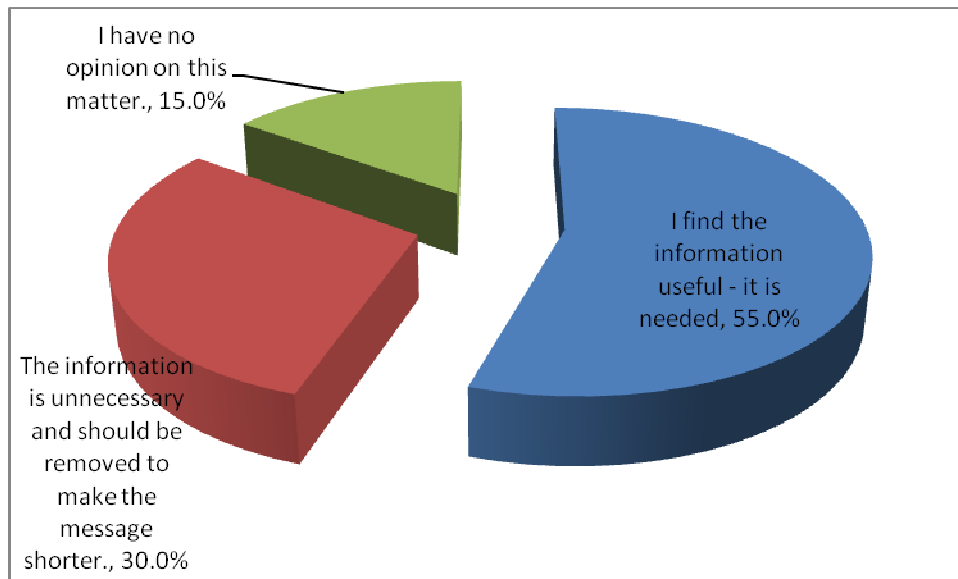
1. **When do patients feel they need to book appointments?** The practice was interested to know how far in advance the PRG patients LIKE to book appointments, and how far in advance they NEED to book them.



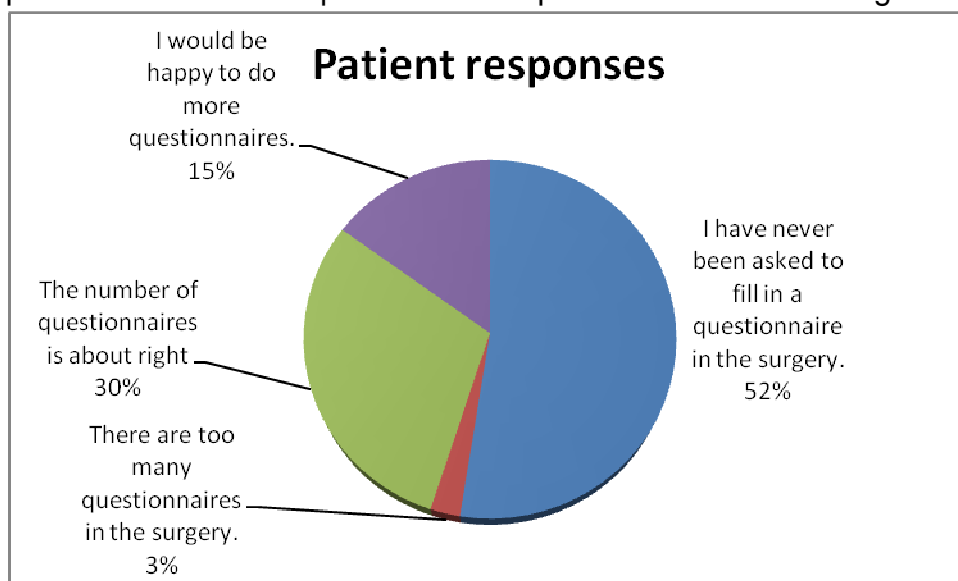
2. **Appointment Booking Preferences.** The PRG was asked how they book their appointments. They were asked to select all options that they use.



3. **Telephone Switchboard Message.** The PRG was asked whether the surgery switchboard greeting which lists phone numbers was helpful, or whether it should be shorter.



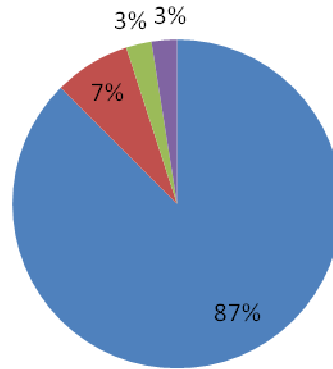
4. **Number of Questionnaires.** The PRG was asked to comment on the number of questionnaires we ask patients to complete whilst in the waiting room.



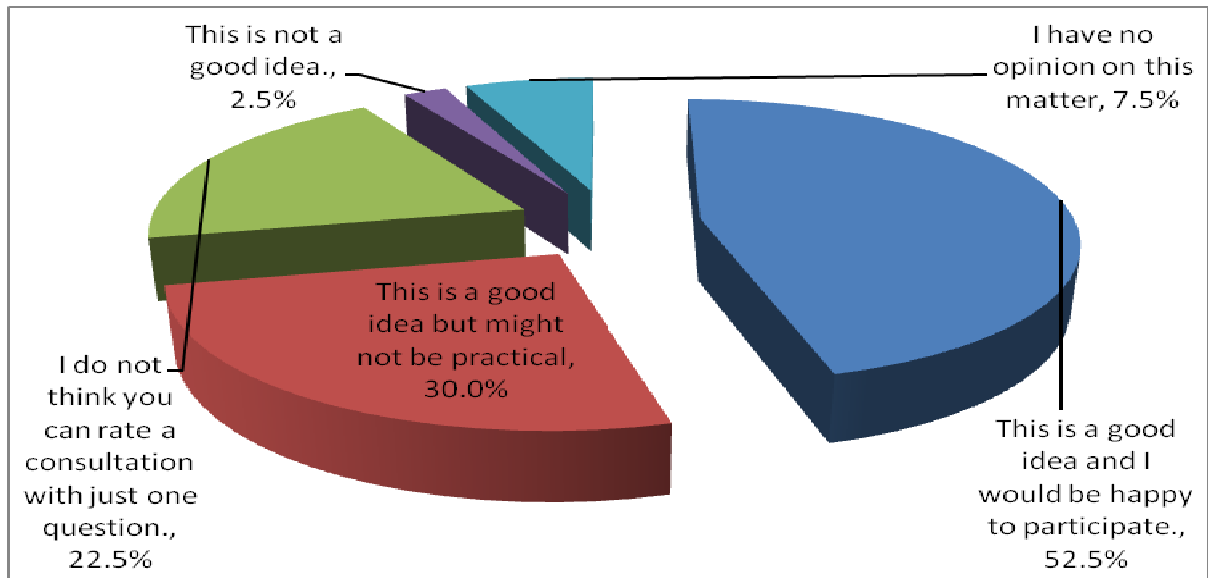
5. **Warmth of Greeting** The PRG was asked “Does the warmth of the doctors or nurses’ greeting concern you, and do you consider this a good use of time or do you just want to get on and discuss your concerns?”

Patient Views

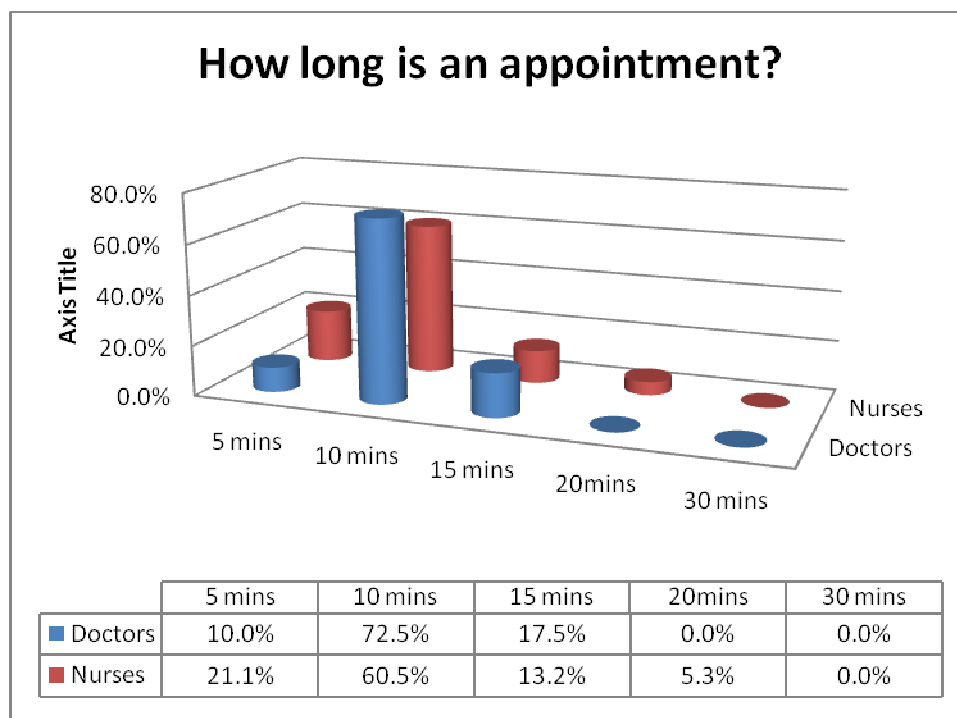
- I think the way the doctor/nurse greets me is important. It is a good use of time.
- I am unconcerned how the doctor greets me.
- I think the way the doctor/nurse greets me is unimportant. This is not a good use of time.
- I have no opinion on this matter



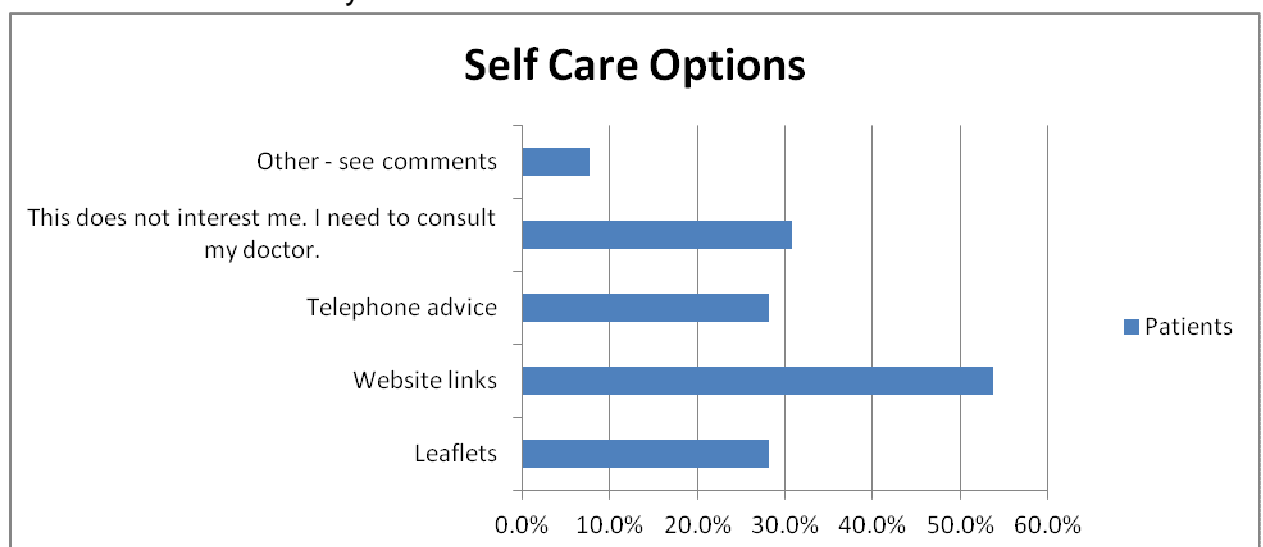
6. **Instant Rating of Consultations.** The PRG was asked “what do you think of the idea of rating your experience today as you leave the surgery with a single question *how do you feel your consultation went today*”. Multiple responses to the question were allowed.



7. **Length of Appointments.** PRG members were asked whether they knew how long the doctor or nurse had for the consultation.



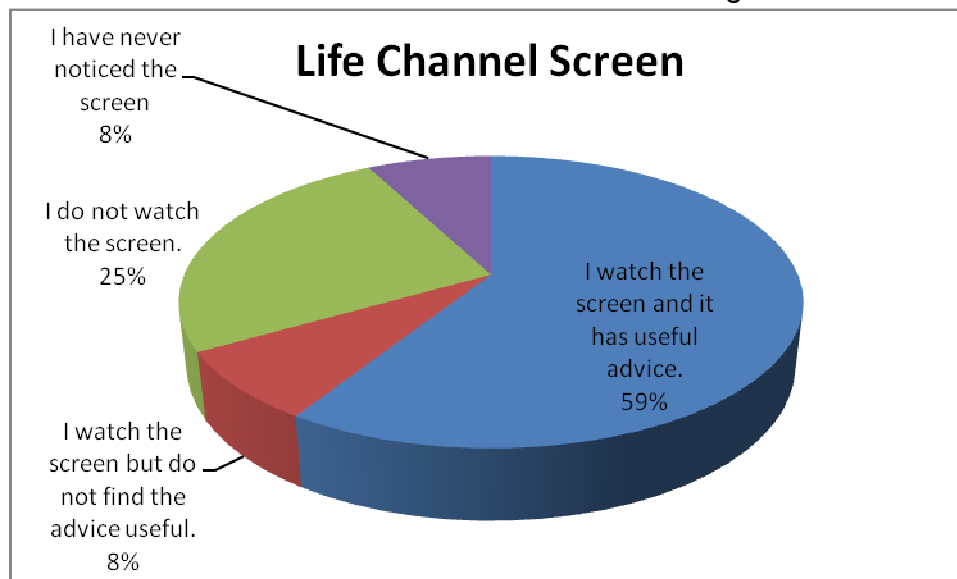
8. **Self Care Resources.** The PRG was asked whether it was interested in more information on “self care” (managing their own health without consulting a doctor or nurse. They were asked what format this should take.



Comments:

1. *There are enough leaflets in the waiting room, any more would be messy. The NHS website has lots of medical information on as does patient.co.uk maybe you could direct to those sites (saves you reinventing the wheel).*
2. *I use my local pharmacy before I visit the doctor.*

9. **Waiting Room Computer Screen.** The PRG was asked for views on the usefulness of the “life channel” screen in the waiting room.



Action Planning Process

The practice held a meeting on 12 February 2013 to agree actions in response to the feedback from the Patient Reference Group. The following actions were published on the website, on posters in the surgery, and on the practice newsletter:

Attendance

Dr Stephen Blair
Dr Jane Riddle
Dr Mark Westwood
Dr Peter Olley
Dr Aliya Soomro
Dr Alasdair Wallace
Dr Nicola Fell
Dr Anne-Marie Cole
Dr Danielle Robinson
Mr Philip Horsfield
Ms Beverley Suddick
Mrs Anne Davies
Mrs Paula Davis

Patient Reference Group Survey Action Plan

The results of the last PRG online survey were discussed and actions agreed as follows:

1. **When do patients feel they need to book appointments?** The practice was interested to know how far in advance the PRG patients LIKE to book appointments, and how far in advance they NEED to book them.

Response of meeting: We will take a more in depth look at this issue to understand whether our appointment system is fully meeting the needs of our patient population. There is no perfect answer to this, as different people want different things. We will monitor the calls taken by our reception team to find out how often patients are asked to ring at another time to get an appointment.

2. **Appointment Booking Preferences.** The PRG was asked how they book their appointments. They were asked to select all options that they use.

Response of meeting: The overwhelming preference is for phone booking. We will therefore ensure that this service is maintained and developed using technology and ongoing training. Booking via our website is slowly growing, and we will reinforce the advertising of this service to people who are currently unaware of it.

3. **Telephone Switchboard Message.** The PRG was asked whether the surgery switchboard greeting which lists phone numbers was helpful, or whether it should be shorter.

Response of meeting: There was no huge majority for any of the options, but the one with the highest response “I find this information useful – it is needed” garnered 55% of the votes. We will therefore leave it as it is.

4. **Number of Questionnaires.** The PRG was asked to comment on the number of questionnaires we ask patients to complete whilst in the waiting room.

Response of meeting: The doctors are grateful that patients are willing to fill in the questionnaires in the waiting room, and were glad that 97% of respondents expressed no issues. This will help us greatly, as changes in legislation mean that we will need to ask people to fill in more questionnaires in future. We will use all the information to improve our services.

5. **Warmth of Greeting** The PRG was asked “Does the warmth of the doctors or nurses’ greeting concern you, and do you consider this a good use of time or do you just want to get on and discuss your concerns?”

Response of meeting: The doctors are keen to deliver the best possible service to our patients, but are aware that communication skills are very important. We will ensure that the ongoing training which we organise continues to emphasise the importance of consultation skills alongside clinical excellence.

6. **Instant Rating of Consultations.** The PRG was asked “what do you think of the idea of rating your experience today as you leave the surgery with a single question *how do you feel your consultation went today*”. Multiple responses to the question were allowed.

Response of meeting: The generally positive response to this question is interesting. Since asking this question of our Patient Reference Group, the government has indicated that it intends to introduce the “friends and family test” (for example “based on your consultation today would you recommend this practice to your friends and family”). As this might become a legal requirement, we will await guidance on the matter before pursuing it.

7. **Length of Appointments.** PRG members were asked whether they knew how long the doctor or nurse had for the consultation.

Response of meeting: This question was asked to aid us in planning appointments. Many appointments over-run, and we were curious as to whether patients were aware of how long the GP or nurse had been given to discuss their issues. The majority of patients seem aware of the length of their appointment. We will use this data to help our doctors plan their consultations with patients.

8. **Self Care Resources.** The PRG was asked whether it was interested in more information on “self care” (managing their own health without consulting a doctor or nurse. They were asked what format this should take.

Response of meeting: The meeting has agreed to use our website to meet the demand for more useful links. We have commissioned a new improved website with more capacity to include links and resources useful to patients and carers.

9. **Waiting Room Computer Screen.** The PRG was asked for views on the usefulness of the “life channel” screen in the waiting room.

Response of meeting: The meeting was pleased to note that the screen was popular with Patient Reference Group members. As lots of people clearly watch it, we will explore with the “Life Channel” whether we can add content which will be locally relevant.

Conclusion

The actions arising from the process have now been publicised and are in progress. The PRG members have been thanked for their involvement to date and been kept up to date on upcoming plans and action.

Philip Horsfield
February 2013