

## **Local Patient Participation Report 2013-14**

### **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 110 members of the Patient Reference Group, all are registered with the practice. Their ages range from 18 to 82, and currently there is a 57:43 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 2012-13**

The following issues were discussed and actioned as a result of the 2012-13 patient feedback. The results for each issue are highlighted in blue:

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.

**What have we done since then? We have taken a more in depth look at this issue to understand whether our appointment system is fully meeting the needs of our patient population. We have now moved to a new Clinical Computer System – Emis Web, and have taken the opportunity to improve the appointment system. There is no perfect answer to this issue, as different people want different things. We continue to 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.

**What have we done since then? The overwhelming preference was (and remains) for phone booking. We have therefore ensured that this service is maintained and developed using technology and ongoing training. With the advent of the Department of Health Online Booking initiative we have encouraged patients to sign up to book appointments via our website and now have over 500 users signed up.**

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.

**What have we done since then? 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 therefore left it as it was.**

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.

**What have we done since then? 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 helps us greatly, as changes in legislation mean that we need to ask people to fill in more questionnaires. We 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?”

**What have we done since then? The doctors are keen to deliver the best possible service to our patients, and are aware that communication skills are very important. We have organised ongoing training 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.

**What have we done since then? 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.

**What have we done since then? 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. We have now altered the layout of many of our surgeries, giving the GP's more time per patient in order to reduce late running.**

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.

**What have we done since then? 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.

**What have we done since then? As lots of people clearly watch it, we explored with the "Life Channel" whether we could add content which will be locally relevant. Unfortunately this was not possible. Also, with the changes in local NHS management brought about by the Health and Social Care Act 2014, funding for this popular medium has been significantly reduced.**

### **What did we do in 2013-14**

Following the success of the previous twelve months, for the year 2013-14 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 300 patients during October and November 2013, and analysed by CFEP on 11 November 2013.

A report was generated by CFEP, and this was discussed at a practice meeting involving all sectors of the practice team on 10 December 2013. 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 2013, based on responses from the CFEP questionnaire:

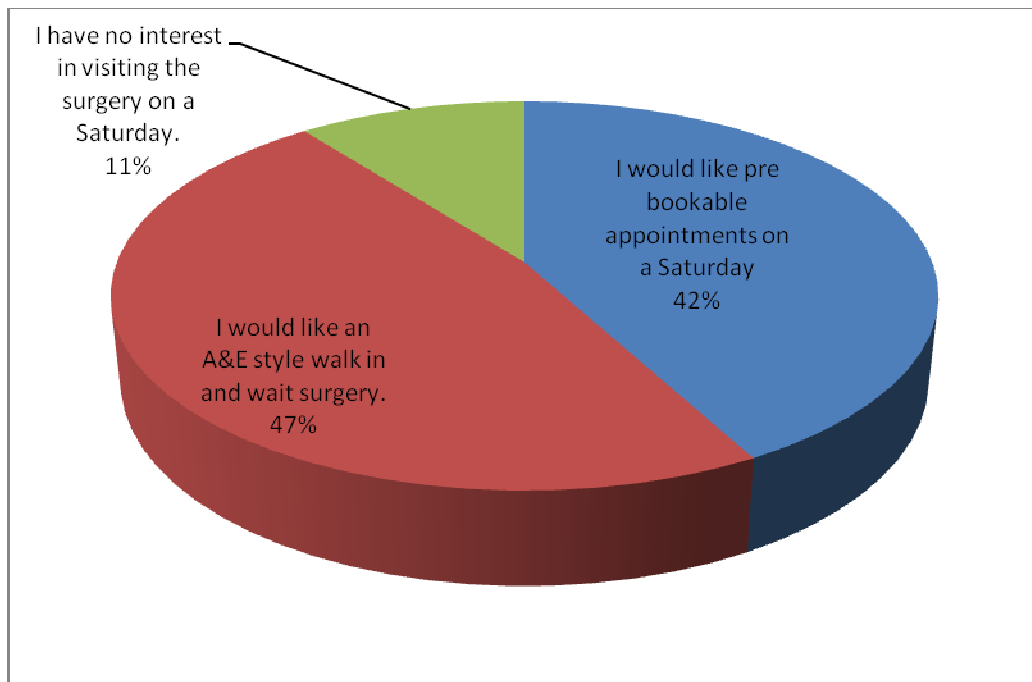
1. If funding can be found to set up Saturday surgeries, would patients want pre bookable appointments or walk in ones (like A&E)?
2. We have recently upgraded our website.
  - a. Do the patients like the changes?
  - b. Do they use it?
    - i. To book appointments
    - ii. To request repeat medication
  - c. How confident are they in using it?
3. When doctors are running late would you like to know when you check in?
4. If a GP is running late when you arrive, would you prefer the option of a telephone consultation instead, or do you prefer to wait to see the doctor face to face?
5. How do you prefer to consult your GP? Do you come each time you have an issue, or do you prefer to address everything with a “one stop shop”?
6. We offer telephone consultations every day, but they are often unused. What time would you prefer a telephone consultation if you were pre-booking one?
7. The surgery deals with complaints in line with mandatory NHS procedures. However, we are keen to recognise team members who have provided excellent service as well. How should we do this, and would patients want to participate?

### **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 November 2013.

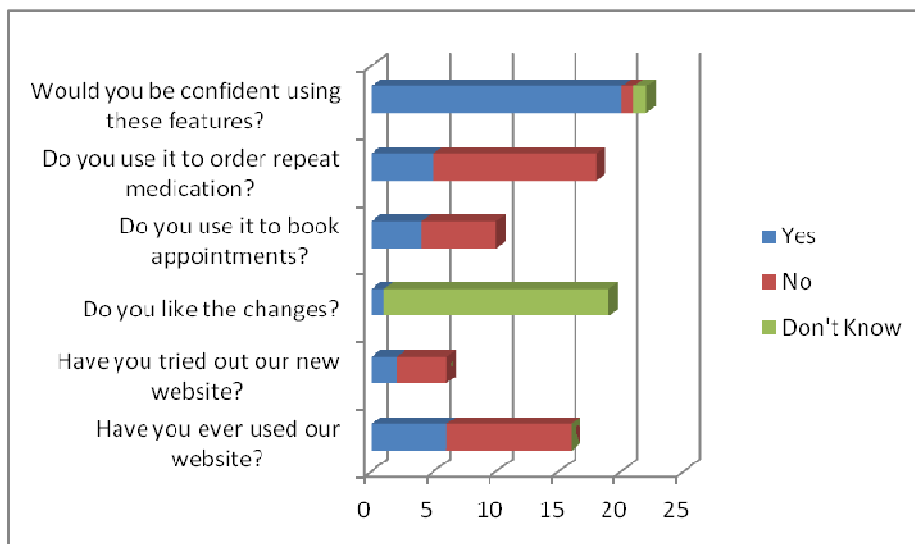
The following areas were felt to be most appropriate for action, and the survey results are recorded below each question:

1. If funding can be found to set up Saturday surgeries, would patients want pre bookable appointments or walk in ones (like A&E)?

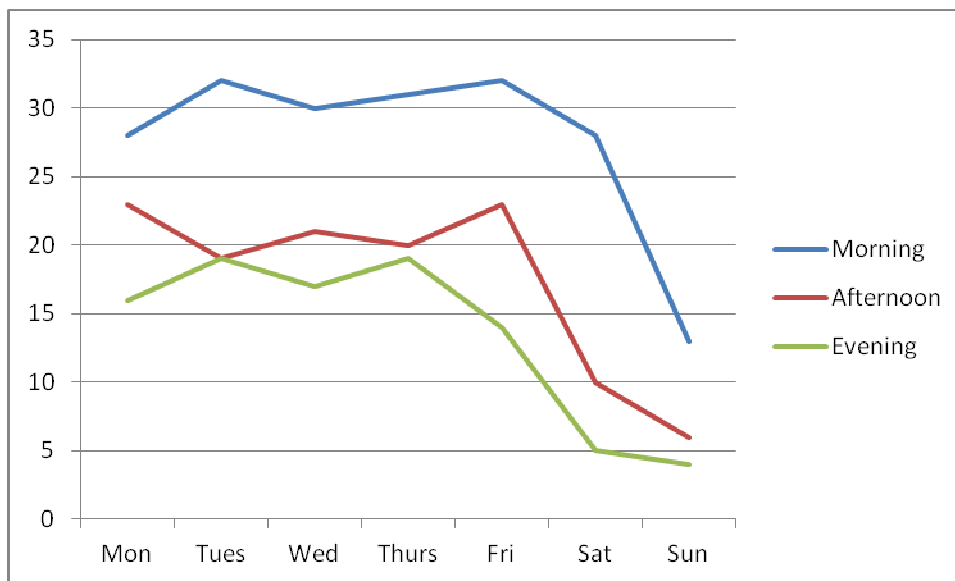


2. We have recently upgraded our website. Questions asked as follows:

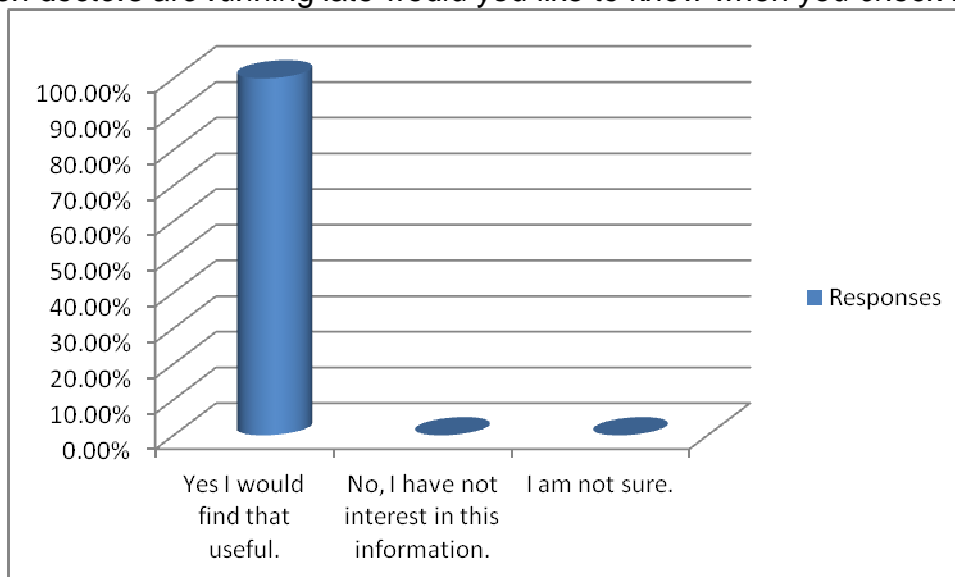
- Have you ever used our website?
- Have you tried out our new website?
- Do you like the changes?
- Do you use it to book appointments?
- Do you use it to order repeat medication?
- Would you be confident using these features?



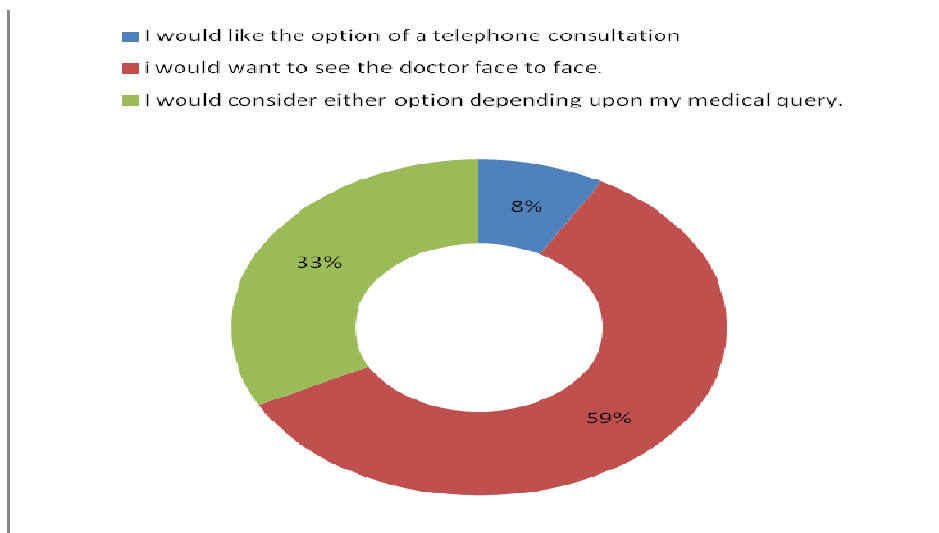
3. Please tell us your preferred times of the week to visit the surgery for a pre-booked appointment. Please tick as many options as you wish. Weekends have been included for research purposes only.



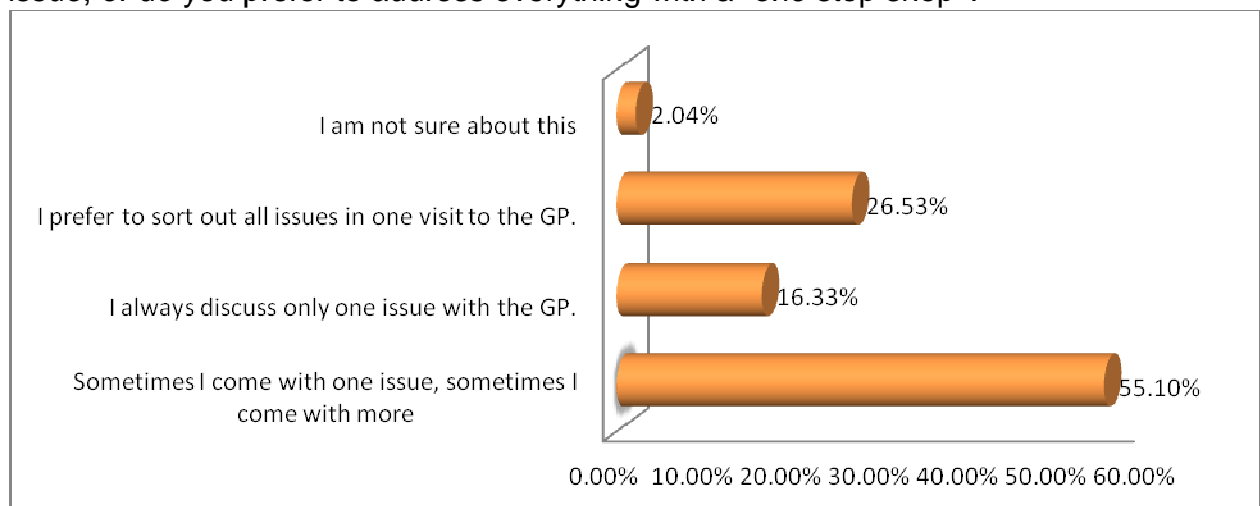
4. When doctors are running late would you like to know when you check in?



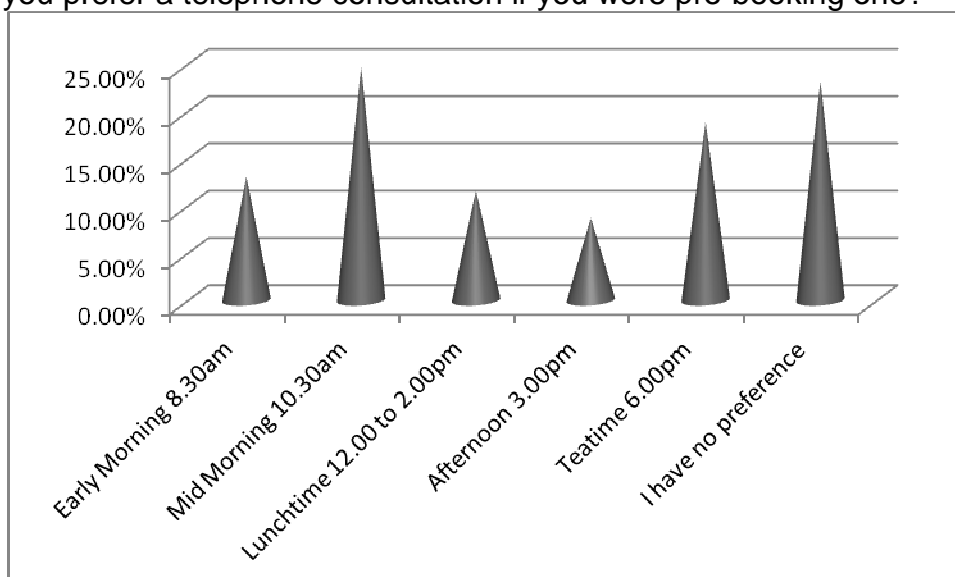
5. If a GP is running late when you arrive, would you prefer the option of a telephone consultation instead, or do you prefer to wait to see the doctor face to face?



6. How do you prefer to consult your GP? Do you come each time you have an issue, or do you prefer to address everything with a “one stop shop”?

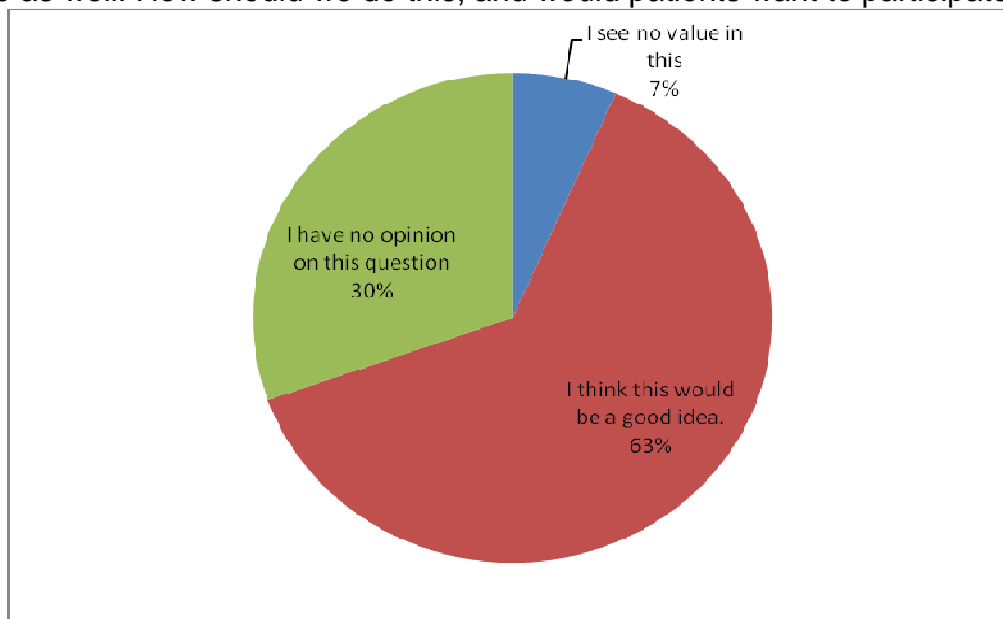


7. We offer telephone consultations every day, but they are often unused. What time would you prefer a telephone consultation if you were pre-booking one?





8. The surgery deals with complaints in line with mandatory NHS procedures. However, we are keen to recognise team members who have provided excellent service as well. How should we do this, and would patients want to participate?



### **Action Planning Process**

The practice held a meeting on 14 January 2014 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 Jane Riddle  
Dr Mark Westwood  
Dr Aliya Soomro  
Dr Natalie Metcalfe  
Mrs Paula Davis  
Ms Beverley Suddick

Dr Alasdair Wallace  
Dr Peter Olley  
Dr Simone Nagiah  
Dr Lisa Warren  
Mr Philip Horsfield  
Mrs Christine Bunton

### **Patient Reference Group Survey Action Plan**

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

1. If funding can be found to set up Saturday surgeries, would patients want pre bookable appointments or walk in ones (like A&E)?

**Response of meeting: We will take these views into account when the opportunity arises for funding to run GP surgeries at the weekend. Clearly there needs to be a 50/50 mix of “walk-in” appointments and pre-bookable appointments.**

2. We have recently upgraded our website. Questions asked as follows:

- Have you ever used our website?

- Have you tried out our new website?
- Do you like the changes?
- Do you use it to book appointments?
- Do you use it to order repeat medication?
- Would you be confident using these features?

**Response of meeting: We will work harder to advertise the website and its functions, and encourage more patients to access our services via this portal. A link to the website is to be sent out to the Patient Reference Group for them to try it out and hopefully champion it to other patients. Wallsend Library to be contacted to see if they will allow patients who do not have internet access at home to use their computers.**

3. Please tell us your preferred times of the week to visit the surgery for a pre-booked appointment. Please tick as many options as you wish. Weekends have been included for research purposes only.

**Response of meeting: We will make more appointments available at the most popular times. Early mornings are popular with working patients, as are evening surgeries. If and when we open on a Saturday clearly the morning is by far the most popular option. Nobody seems to want appointments on a Sunday – noted.**

4. When doctors are running late would you like to know when you check in?

**Response of meeting: The Automated Patient Check In System will be updated with a message which automatically lets everyone know how late the GP is running.**

5. If a GP is running late when you arrive, would you prefer the option of a telephone consultation instead, or do you prefer to wait to see the doctor face to face?

**Response of meeting: There is no single option which suits everyone. Therefore, we will offer choices to all patients when the GP is running late. We will advertise that if the patient wishes, and it suits their medical needs, they may opt to convert their appointment to a telephone consultation, and the GP will ring them back at a mutually suitable time.**

6. How do you prefer to consult your GP? Do you come each time you have an issue, or do you prefer to address everything with a “one stop shop”?

**Response of meeting: GP appointments are ten minutes long. Only 16% of the Patient Reference Group discuss a single issue in their consultations, so for everyone else fitting everything in is an issue. Catch-up slots will be added to more surgeries, to try and minimise over-runs.**

7. We offer telephone consultations every day, but they are often unused. What time would you prefer a telephone consultation if you were pre-booking one?

**Response of meeting: The two most preferred times for telephone consultations are mid morning and late afternoon (teatime). The reception team will be instructed to book late afternoon telephone consultations into GP surgeries.**

8. The surgery deals with complaints in line with mandatory NHS procedures. However, we are keen to recognise team members who have provided excellent service as well. How should we do this, and would patients want to participate?

**Response of meeting: We will look at creating a simple system for patients to let us know if someone has offered exceptional service.**

### **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

March 2014