

Park Lodge Medical Centre

Survey 2012-13 Report

This report outlines the background of our 2012-13 survey, discussion and analysis of the results of the survey with the Patient Participation Group and subsequent agreed actions.

Actions since the last survey

- The practice agreed to look into acquiring a new website which would be easily updated thus allowing for consistent patient engagement. This would also allow the patients to easily provide feedback. This was looked into and the new website went live in February this year.
- **LCD screen.** This was also a priority for the PPG as it would permit easy dissemination of information and allow for a less cluttered waiting room. This had been obtained by the time the results of this survey were being discussed.
- Both the LCD screen and the website are to be used to disseminate information on opening hours, and the process for blood tests as previously discussed as well as all updates to systems in the practice and to encourage patients to give feedback. Reception also now provides the list of available phlebotomy services to anyone asking to make an appointment for a blood test.
- The **Complaints procedure** was also clearly outlined in more detail and has been made available by reception to anyone enquiring.
- **Waiting times.** Issues from the last survey and PPG discussion were taken back to all the GPs. Ways of making improvements, dealing with "sit and wait" appointments were discussed. Decision to fit patients in at the end of surgeries was made. It was also decided that we would hold off on any major changes to the system until after the practice had participated in an Access audit.

Discussion with PPG- priorities for this year's survey

- It was agreed that the questions for this year's survey should remain largely the same to understand what progress had been made in certain areas. However a couple changes were agreed and these focused on :
 - (1) waiting times (when attending for a pre-booked appointment) and
 - (2) booking in advance- waiting time to the next available appointment with a Dr of your choice. (<7 days, 7-14 days or >14 days).
- It was agreed that the question on booking more than 2 days in advance was irrelevant and should be removed (it being already established that anyone can book more than 2 days in advance and nothing has changed since the previous survey).

- It was also agreed that 2 questions in the survey were asking the same thing and so would be merged (one questions asked if patients are satisfied with their treatment and the other asked if they would recommend the practice to someone moving into the area).
- The survey was agreed and conducted between December 2012 and February 2013. A link to the survey was emailed to all patients for whom we have an e-mail address, a link was posted on the website and it was distributed in the surgery. The results were discussed in the PPG meeting on 4 March 2013.

Discussion of the survey results

(1) Number of respondents

- The PPG noted that there was an increased number of respondents (from 200 to 240) which was very positive, although still larger numbers of respondents should be sought.

(2) Getting through on the phone

- 82% said it was fairly easy to get through on the phone, 12.6% thought it was not very easy and 5.4% had not tried.
- Re: speaking to a Dr on the phone: 19.2% thought it was not very easy and, 6% thought it was not easy to obtain results by phone. This question was not discussed by the PPG, however it is an issue which the practice is working on improving. This will be discussed in the last section of the report.

(3) Access

- 70.5% (167) of respondents answered that they were able to see a GP on the same day or within 2 days when they needed to. 22.8% (54) said they could not.

The question that follows was designed to investigate the possible reasons for these patients being unable to see a GP in 2 days. Of those who could not, 14.7% (20) indicated it was because "times did not suit" and 16.9% (23) indicated that they could not because the appointment offered was not with their GP of choice. A further 56.6% (77) of respondents indicated that it was because there were no appointments available. This means that although only 54 patients said they could not see a Dr fairly quickly when they needed to, 136 patients answered this question on why they could not get an appointment in 2 days!

It is also significant that the question does not ask about the urgency of the problem and so does not help us with understanding if urgent care is being delivered consistently when it is needed. This question will need to be revised for future surveys.

- Soonest available appointment with GP of choice. This is still an unresolved issue with 80.5% saying they had to wait more than 7 days (note however, this was not to do with ANY available GP, just the GP of choice and does not reflect on any urgency of the issue to be addressed at the appointment).

(3) Quality of service

- 91% of the respondents thought that the receptionists are very or fairly helpful which the PPG group thought was quite positive. This is approximately the same as last year and the practice will aim to improve on this.

(4) Waiting times

- The PPG noted that 44.4% of patients are still waiting more than 15 minutes for their appointment which is not acceptable. Only 34% were given an explanation for the delay and 82% of those found the explanation satisfactory. It was noted that it would be helpful if reception would inform patients when the GPs are running late and provide and explanation where possible on a consistent basis.

(5) General satisfaction with care

- It was noted that general satisfaction was good at 96%
- One of the respondents was unsatisfied with the care provided by the nurses. 81% were satisfied with care at the surgery in general with 14.7% being neither satisfied nor dissatisfied and 4.3% being dissatisfied.
- The PPG agreed that the Nurses are a great asset.

(6) Opening Hours

- It was noted that most people are happy with the opening hours or were neither satisfied nor dissatisfied although 5.5% were not and 3.4% did not know what they are.

(7) Complaints

- 20% of respondents said that they felt like making a complaint at one point in the last 12 months but did not. The PPG discussed the complaints process and whether this was publicised or not. Also discussed was the distinction between formal complaints and feedback. The practice representatives pointed out that the complaints procedure is available and the leaflet does provide information, however it is not necessarily encouraged as it should be. Feedback is always welcome and this needs to be made clear. Patients need to understand that if dissatisfied, they can complain without fearing that there will be any negative repercussions.

(8) Demographic breakdown of respondents.

- This was discussed with the PPG. In terms of age, the survey was quite representative and in terms of ethnicity, it was fairly representative in that almost all groups were represented although it is to be noted that the practice has less than 70% ethnicity data for its population and this survey covered just 2.7% of the population.
- 77.1% of the respondents were White British, White Irish or White other with the other 32.9% being comprised of White and Black Caribbean, White and Asian, any other mixed background, Indian, Pakistani, other Asian, Black Caribbean, Black African and other background.
- The practice population is comprised of 51.2% White British, White Irish or White Other, we have no data for 32.12% and the rest is comprised of all the above plus Chinese, Bangladeshi and other Black background.
- The survey respondents were 65.5% female and 34.4% male. The practice sex breakdown is 54% female and 46% male.

Actions agreed as a result of discussions on the results

- (1) The practice will encourage patients to book appointments online through the LCD screen and via the website. This will ease the burden on the phone lines and on the receptionists.
- (2) The practice will continue to collect email addresses and let patients know that use of their emails is protected under the data protection act. This will be for the purpose of further surveys.
- (3) All news and system updates will be posted on the website and on the LCD screen in the waiting room. This will include reminding patients about opening hours and processes for blood tests and repeat prescriptions as well as changes to the appointment system.

- (4) Complaints procedure to be added to the new website and briefly described on the LCD screen. Feedback to be encouraged.
- (5) Proposed changes to the appointment system were discussed and agreed with the PPG and will be implemented from April 2013 or before. These are as follows:
- (a) The practice is adopting a duty Dr triage system for all urgent same day requests for appointments in the morning. One GP will be on duty each morning and will triage all such requests on the phone. Should the patient need to be seen that day, they will be booked in that day for an appointment later on. This will reduce the waiting times for patients who have pre-booked appointments since all other GPs will be able to concentrate on their pre-booked patients without fitting in “emergencies”.
 - (b) Patients will no longer be asked to phone back at 1pm to be fitted in the evening surgery. They will be triaged or given an afternoon appointment or given a future appointment depending on need and capacity. This will also ease congestion on the phone lines leaving the afternoon receptionists more time to deal with patients calling in for blood results and so forth.
 - (c) Appointments to be embargoed to open up 2-3 days in advance. This will create access for patients needing to be seen soon but who do not need same-day urgent care.
 - (d) Dr Gill’s appointments will be treated like all the others and patients will be able to book up to 4 weeks in advance for her
 - (e) All patients calling in the afternoon to request an urgent, same-day appointment will be asked if their issue can wait till the next day. If it cannot, they will be fitted in on the same day, towards the end of the surgery; otherwise, they will be given a future appointment or asked to call back the next morning (when there is more capacity) for a consultation with a GP. The PPG endorsed this proposal.
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