

**SOUTHGATES MEDICAL AND SURGICAL CENTRE AND
SUPPORTERS OF SOUTHGATES
FINAL REVIEW OF THE PATIENT'S SURVEY 2014/15.**

MEETING THURSDAY 26 FEBRUARY 2015 AT THE SURGERY

In attendance

Noel McGivern (General Manager), Emma Batchelor (Assistant General Manager), Alan Hayes (Chairman of SOS), Mike Carter-Rowlands (Vice Chairman), Don Mentch (committee member), Pat Gill (committee member). Apologies were received from Colin Ramsay

Introduction

The group reviewed the draft report that went to our main committee on the 7 January 2015. In essence, we now believe that this report remains structurally correct and substantially still applicable. Clearly, the numbers of national questionnaires have now gone up to over 500 but the key messages remained much the same. The full SOS committee had given delegated power to this group to agree the final action plan to be placed upon the Southgates website by 31 March 2015 and to be incorporated into the final plan to be made available in the next patient newsletter and to other interested parties.

The Results

Maximum number of returns was 521, but not all patients answered all questions.

The Answers

How easy do you find getting into the GP surgery building?

487 people answered the question, 380 which is 78% said it was very easy to enter the building, another 98 said it was fairly easy and 3 patients said not easy at all. A very positive response.

Which mode of transport do you use?

The majority of patients used their own car, or a family or friend's car (353 – 68%). A large number walked or brought bicycles or motorcycles, but a very small number used public transport. Surprisingly, a very small number (only 10) used a voluntary service or a taxi. Our experience was that quite a few patients appeared to use the voluntary car services and or taxis.

How clean is the surgery?

An overwhelming vote of confidence re this question. 495 responses. 385 said very clean, which is 78% and a further 22% said fairly clean. No-one said not at all clean and only 3 patients said not very clean.

How helpful do you find the Reception Team?

Phenomenal overwhelming vote of support for the reception team. Of the 477 responses, 401 said very helpful, which is 84% and a further 15% said fairly helpful. Only 3 patients said not very helpful and only 2 patients said not helpful at all.

We have an open and welcoming Reception area are you aware you can ask for confidential discussion?

476 patients responded. 275 said yes, this is 58%, which means that 42% were not aware. This will form part of our Action Plan.

How satisfied are you with the above opening hours?

Very topical question at the moment. Of the 492 respondents, 377 said very satisfied, which is 77%, only 2 patients said very dissatisfied. We were very pleased with this result as we offer extended hours and open continuously from 8 in the morning until 6.30 at night on weekdays.

How easy was it to get through on the phone?

468 patients responded, 33% said very easy (156 patients), 47% said fairly easy (218 patients). 53 patients did say not very easy and we are very aware, along with most of the General Practices that our phone lines are clogged up in the mornings between 8-11am and at other key busy times. Again this will form part of our Action Plan.

How easy is it to speak to a GP?

Only 401 patients responded to this question and 27.5% said very easy, 40% said fairly easy, however 64 patients said not very easy, which is 16% which is too high. Again, this will form part of our overall Action Plan agreed with SOS.

How easy is it to speak to a nurse?

Similar response to that for doctors and again, this will form part of our Action Plan.

How easy is it to get test results

Of the 405 respondents, 141 said very easy, which was 35%, 164 said fairly easy, which was another 36%, 31 patients said not very easy. The majority of this work is done via the telephone and therefore, this forms part of our Communications Action Plan with patients. Discussions with clinicians indicate we need a clearer message to patients on whether they need to ring us or not.

How easy is it to get queries answered?

The responses were very similar to getting test results and again, the majority of queries come through on the telephone.

Have you tried to access your GP quickly?

Of the 435 respondents, 277 said yes, which is 64%, which is very good.

Have you been able to book an appointment more than 2 days ahead?

Of the 451 respondents, an overwhelming 325 (72%) said yes. This was very encouraging.

Waiting in the surgery for your appointment?

This question we believe may have been mis-interpreted by some patients, because we were really asking how long were patients waiting in the waiting room. The vast majority of the 495 respondents,

over 63%, 306 patients said 5 -15 minutes. Encouragingly, 87%, 421 patients said they were happy to wait for a short time, which was deemed 5-15 minutes.

If they had to wait, were the patients kept informed?

Sadly, only 43% confirmed they had, which meant that nearly 57% felt they were not kept informed. We have already taken action to deal with this.

Patients were asked if they were able to choose their GP for a routine appointment?

53.5% said they were most of the time and a further 25% said a lot of the time. Only 22 patients said almost never. We discussed this with the patient group and along with many other practices, we have some GPs, particularly some part-time GPs who are exceptionally popular and are difficult to book routine appointments with, unless you book well ahead. We need to keep patients well informed about this and need to include on an information page for patients on the website, which is to be introduced in the near future and include in the regular newsletters to patients.

The patients were asked were they given enough time with the clinician?

We received a very positive response to this question. 61.5% said very good and around 30% said good. The rest were acceptable and no patient felt that the time they were given with the clinician was not acceptable.

Patients were asked if they were asked about their symptoms?

The response was similar to the above, with only 2 patients saying it is not acceptable.

They were then asked if they were listened to by the clinician?

The responses were very positive indeed with over 69%, nearly 70% of patients saying that the listening skills of the clinicians were very good and only 2 patients felt they were not listened to.

Patients were then asked if options were explained?

Again the response was virtually similar.

Were patients involved in care decisions?

Again the answers were very similar, only 6 patients out of 400 respondents saying that they did not feel it was an acceptable level of involvement in their care decisions.

Were patients treated with care and respect?

A phenomenal response to this. Only 1 patient found involvement in the care not acceptable.

Patients were asked were their problems taken seriously?

Only 3 patients said no and the response was very positive.

Patients were asked to assess whether clinicians took their patient seriously?

Only 3 patients felt they were not. 75% rated the clinicians as very good in taking their problems seriously.

Patients were asked to assess their confidence and trust in the GP?

75% rated their confidence and trust in the GP as very good. Only 3 patients felt it was not acceptable.

Patients were asked about the ease of ordering repeat prescriptions?

96% said yes it was easy to order repeat prescriptions.

Patients were asked if they were receiving medication they no longer needed?

Only 12 said yes of 463 respondents.

Patients were asked if they were aware they could order medication on-line?

Of the 445 respondents, 270 said yes, (61%), which means that 39% were not. This again forms part of our Action Plan.

Patients were asked if they were aware of 48 hr turn around time for repeat prescriptions?

A phenomenal number said yes to this question.

Were patients aware of our patient support and advisory group SOS?

Of the respondents, 53% said yes. We were disappointed with this, given our regular newsletters and advertising by the group.

SUMMARY OF RESPONSES

We received over 500 questionnaires returned, which shows a phenomenal involvement with the practice at a patient level. The patient group and the practice are hugely encouraged by the very positive response. It is clear that our reception team have formed a very positive and informative bond with the majority of our patient group. It is clear that our clinicians are relied upon, trusted and valued by the vast majority of our patients. It is clear that we need to do some work with our patients in terms of improving access to appointments, prescriptions and information by a significantly increased use of modern technology. Our new General Manager who joins in early March 15 and takes over fully on the 1 June 15 has been given this as a key personal objective. It is also clear that a challenge for the practice is for patients to access through telephone means and this needs to form a very important part of our overall Action Plan.

Finally, it is important that we are clearly aware the patients are not in sufficient numbers aware of our Supporter's of Southgates Patients Advisory Group and we need to work harder on this front.

KEY ACTION POINTS

1. Use of IT.

There is clearly an opportunity for the practice in terms of telephonic and internet action to improve the services to patients and to improve perceived access.

Our opening times are clearly very satisfactory for the vast majority of patients, we therefore need to look at how better to provide improved access whilst we are open. We therefore have undertaken 2 pieces of work initially.

- a. We are doing a full review of our on-call system, which is available for patients to have appointments of an urgent nature every day we are open and to look at whether or not we can do some telephone triage and whether or not we can provide some electronic access. We also need to look at the electronic booking-in service at the practice and our IT Manager is now looking at re-locating this and whether we need 2 screens rather than 1 and whether we can speed up the booking-in process for patients. All members of the practice team have been invited to contribute to the work of this group via a questionnaire. We will be looking jointly with SOS at the training of patients and the committee are prepared to provide some training for the general patient population by sitting alongside our booking machines and encouraging people to use them.
- b. We have a small sub-group already looking at our telephonic and communications systems. We are currently working through a merger with The Woottons Surgery, which should take place in early April 2015. This will be the time to upgrade our telephonic and communications systems and we need to increase the overall capability of the system and increase its capacity. We will be looking at this in terms of key times of the day that we need to provide additional telephone ports and other technological access options. This will be a joint piece of work with SOS.

2. Short term urgent appointments

We are doing a full review of our on-call system to see whether some telephone advice/ telephone triage and the potential in the long term for e-mail advice would be beneficial to our patient group.

3. Patients made aware that the GP is running late

This is a frequent problem in general practice. Our GPs are dealing with a vast range of presenting patients in a normal working day and some through their clinical complexity and urgency, do require a longer than a standard 10 or 15 minute appointment that we offer. This means that on occasion, some GPs will run late. However, it is unacceptable for patients not to be made fully aware of this. We have therefore introduced 2 new initiatives immediately.

a. Reception Team to Communicate with Patients

There are more signs in the waiting room saying if you have waited more than 20 minutes beyond your appointment time, please do come and ask at reception and you will be updated. It should be noted that some patients arrive sometimes ½ hour before their appointment time. This is clearly not an official waiting time and it is why we make it clear that it is 20 minutes after their allotted appointment time. Also, we now have a system where our receptionists pre-warn patients when they arrive, if their GP is running late. At the moment our booking in system does not offer this technological facility, but we have asked the manufacturers of the system to look at providing this. However, our reception team now will

be fully involved in trying to keep the patients aware of the delays when GPs are unfortunately necessarily running late.

b. Choice of GP

We are a practice that is growing very rapidly in terms of its list size and as such, we try to keep pace with the GP capacity. As a result of this questionnaire, we have taken on another GP who will be joining us in April 2015, doing a significant number of extra sessions per week to help with providing extra GP capacity and continuity of care. One of our GPs, Dr. Laurence Atkinson will undoubtedly be leaving our practice to lead the merger process with The Woottons Surgery and as such, we are advising his patients well in advance that he is leaving and offering them suitable alternative GP cover so that again, continuity can be transferred and then consistently provided.

c. Prescriptions

Whilst we were absolutely thrilled to see how many patients were aware of the system of repeat prescribing, we still encounter on a daily basis, large numbers of patients who have run out of medication, forgotten to order medication, forgotten to change medication and other such things. Very few of our patients actually use the online medication system in relation to our whole patient population. SOS and Southgates are going to provide a joint PR exercise to try and increase the number of patients that utilise this service. As part of this questionnaire, we have been able to gather a very large number of email addresses, which we will utilise to try and advertise the IT facilities of direct booking of appointments, and online prescriptions with this patient cohort. This is a large piece of work, but we believe will be a very fruitful one after it has been completed.

4. Awareness of SOS

We are of a view that a lot of patients are simply not interested in being made aware of what their surgery does, but simply want to turn up when they need care and receive it in a timely, efficient and effective manner. We obviously try to provide this. However, we want to work very hard with SOS on a continued basis to engage more with our patient group. We have a very active and informed patient group and the committee consists normally of around 12 or so patients, plus representatives from the local acute hospital and local charities, however, we want to look at developing the relationship with our patients in terms of overall communication and involvement and this will be a key process for SOS and the practice jointly in 2015/16. Two new initiatives agreed with the SOS committee are to:

- Incorporate awareness of SOS on the footer of the Practice Letter Template.
- To produce a large quantity of SOS “business cards” to include in communications to registered patients. These will also be available at reception and dispensary for our patients.

OVERALL SUMMARY

We believe that this patient survey undertaken wholly by SOS, analysed wholly by SOS and resulting in a very pro-active, but jointly agreed action Action Plan between SOS and the practice, is hugely positive for the practice as a whole. We wish to take the positivity of these results forward and

further improve the services that are made available to patients and further improve the openness and information flow with patients as we further develop the partnership. It is clear the patient voice is very important now, but will be increasingly so in the future and we believe our success as a practice is based heavily on the longevity of SOS, the involvement of SOS and the involvement of our overall patient population. This will be hard to maintain, but is our key objective in terms of SOS and the practice. Our Action plan is detailed below.

SOS Committee March 2015

Objective	Action	Outcome	Lead	Timescale	Progress	RAG Rating
USE OF IT						
Better Access for patients	Review of the On Call system	Better use of appointment systems and better access for patients	Dr Hotchin	30 th April 2015	All stakeholders sent a questionnaire	
Better telephone system	Review of potential systems to incorporate links between Wootons and Southgates	That telephone systems will be efficient and easy to navigate for callers and operate for staff.	E Batchelor & S F Temple	30 th April 2015	Presentations and quotes being sourced.	
SHORT TERM URGENT APPOINTMENTS						
Improved access for patients	Consideration of appointment structure and IT solutions – e.g. email, Skype etc.	Better use of appointment systems and better access for patients	Dr Hotchin	30 th April 2015 for completion of report.	Informed by better access group.	
PATIENT AWARENESS OF GP APPOINTMENTS RUNNING LATE						
To ensure that Patients are kept aware of any delays	More notices in waiting areas.	That Patients are fully informed.	Gill Simon	Review 31 st May 2015	Completed	
	Reception team to monitor appointment templates and advise patients when they arrive of the expected waiting times waiting times.	That Patients are fully informed.	Gill Simon	Review 31 st May 2015	Training completed – reception team aware.	
	Reception team to make patients aware as delays occur/change.	That Patients are fully informed.	Gill Simon	Review 31 st May 2015	Training completed – reception team aware.	
CHOICE OF GP						
Patients have better access to choice of individual GP for routine appointments	Additional GP Dr W Smerdon taking up appointment in 1 st May 2015. Dr T Ariffin increasing her sessions by 2 per week with effect from 1 st May 2015.	That better have increased choice for routine appointments	S F Temple	Review impact by 1 st October 2015.	Appointments made.	
PRESCRIPTION MANAGEMENT						
To make patients more aware of online prescription service.	To utilise the considerable number of emails addresses collected during the SOS/Practice questionnaire to advise patients of	Patients will be more aware of the service and take up will hopefully increase.	E Batchelor	Review impact by October 2015.		

	this service.					
AWARENESS OF SOS						
Patients will be more aware of the group and how to access it.	Increased newsletters sent to patients through better use of notice board.	Patients will be more aware of the presence of SOS and how to contact them.	S F Temple	30 th April 2015		
	Business cards will be produced to accompany patient correspondence to raise awareness of SOS	Patients will be more aware of the presence of SOS and how to contact them.	S F Temple	30 th April 2015		
	The footer of the letter heading used for Southgates will be amended to include information about SOS	Patients will be more aware of the presence of SOS and how to contact them.	S F Temple	30 th April 2015		