

Patient Participation Group Report 2014/15

Station House Surgery, Kendal

1. BACKGROUND

The Patient Participation Group (PPG) has just completed a third successful year. Thank you to all those who continue to shape the services and facilities provided by Station House Surgery.

The surgery derives feedback from a variety of sources including:

- Patient Participation Group
- CQC Inspection feedback
- Surgery complaints process,
- Direct patient survey regarding changes to the surgery appointments system
- NHS Choices, GP Survey
- Friends and Family test.

This feedback has helped to identify where our patients feel changes or improvements should be made. Feedback from our Patient Questionnaire survey taken during a week in February 2014 highlighted concerns with capacity in our appointment system for Doctors, particularly when requesting an appointment with a Doctor of choice. Some patients were waiting up to 10 days to see a GP.

The surgery undertook changes to the traditional appointment system to provide patients with improved and more rapid access. The system introduced a combination of Telephone Consultation with GPs booking appointments directly with the patients who needed to be seen. Throughout 2014 the surgery has monitored patient responses to the changes and reviewed the new system accordingly. A summary of the responses form part of this report are seen in section 3.

2. PROFILE OF PATIENT PARTICIPATION GROUP MEMBERS

We have a thriving Patient Participation Group but we do need more members specifically those under 34 and those belonging to minority ethnic groups.

The gender of our patient group are mostly female (Chart 1). 50% of our Station house Surgery patients are male and 50% female so we require greater representation from male patients.

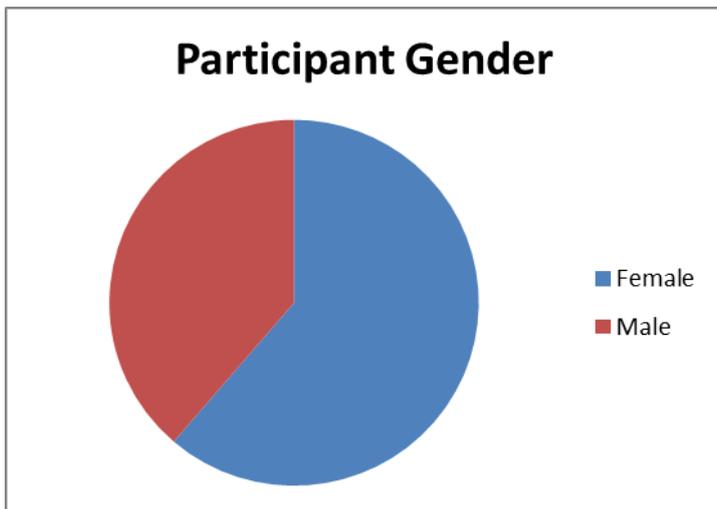


Chart 1

The majority of patients are in the 65 to 74 years age bracket as shown below:

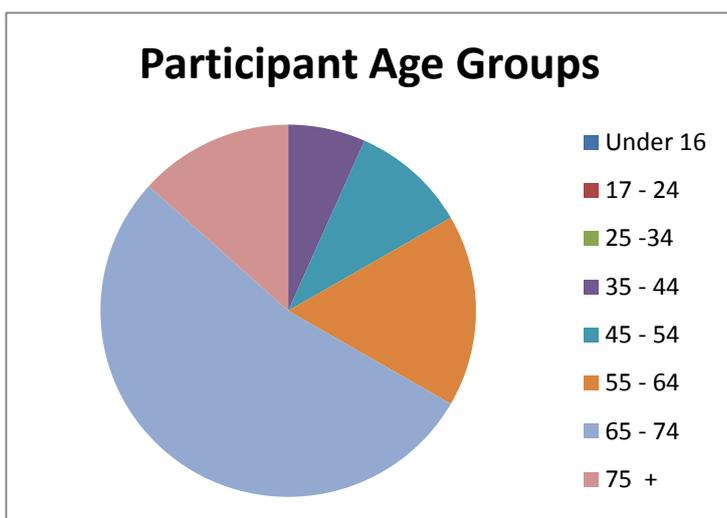


Chart 2

Our Group ethnicity is as follows:

Ethnicity

White British = 80%

White Other = 16%

Other = 3%

3. SUMMARY OF PATIENT QUESTIONNAIRE RESULTS

We undertook an in-surgery survey with our patients after the implementation of the Telephone Consultation system. The summary of responses received is as follows:

Male = 29%
Female = 42%
Anonymous = 29%

Question 1: I like / do not like the system.

- I like = 31%
- I do not like = 58%
- Not answered = 11%

Comments: - deals efficiently and quickly with my needs.
- Mobile phones don't work in our house
- You can speak to your Dr the same day
- It is very inconvenient waiting around for the doctor to phone.

Question 2: Do you feel the new appointment system meets your needs?

Yes = 24.5%
No = 44.5%
UK = 31%

Comments: - Prefer to see my GP face to face
- Speaking to your Dr on the same day means you don't have to go into the surgery
- I just don't like it at all
- Phone appointments / call back system is excellent
- It's so impersonal

Question 3: Did you speak to your Doctor at a convenient time for you?

Yes = 46%
No = 27%
UK = 27%

Comments: - Yes but I wanted to see a doctor

Other comments

- An excellent timesaving (for everyone) system
- I have not seen a doctor for 6 months. I prefer to see a doctor face to face. I have problems with my voice.
- We have been with this practice for 25 years and the help has been excellent. We feel very uncomfortable with your system of working.
- Can't see how this benefits the patient
- Feel I don't want to waste the doctors time when only a phone call is needed.
- Saw a doctor quicker than at any time in the last 30 years!

4. New Appointments/telephone System

The main focus for the work this year was around:

- a) **Implementing a new appointment system** to provide patients with improved and more rapid access. The system introduced a system of Telephone Consultation with GPs booking appointments directly with the patients who needed to be seen. Throughout 2014 the surgery has monitored patient responses to the changes and reviewed the new system accordingly.
- b) **Introduction of a new digital telephone system** supplied via the University Hospitals of Morecambe Bay NHS Foundation Trust. This provides the surgery with valuable data to inform the use of resources to improve telephone answering.

As a result of mixed patient feedback following initial implementation of both elements we have continually reviewed and adjusted our system taking into account patient feedback. The changes have included:

- a) Adding some early morning and late afternoon patient bookable face to face appointments particularly to meet the needs of working people who cannot take calls during work time.
- b) Adding some patient bookable face to face appointments for chronic disease management.
- c) Reducing the number of telephone calls in a typical telephone clinic to improve the promptness of doctor call back.
- d) Scheduling in a second duty doctor to help deal with urgent same day patient contacts.
- e) Review of telephone queuing messages to ensure these are relevant, informative but succinct.
- f) Review of staff resources.

The Action Plan & Outcomes document can be found at the end of this report.

5. Conclusions

There has been a mixed response from patients to the telephone based appointment system. Some patients have found that it has saved them time and enabled them to gain access to a doctor's advice more quickly. Others have found that they miss the personal contact with their doctor. Whilst there is a need to increase capacity in GP surgeries in the most cost effective and acceptable way, clearly there is no one system that will suit all.

The introduction of the mixed face to face pre-bookable appointments in February together with telephone consultations has resulted in greater patient satisfaction to date. The current system will continue to be monitored.

The surgery needs to increase Patient Participation Group membership to include seldom heard groups particularly including those under the age of 35 years old, male patients and minority ethnic groups.

The surgery will continue to monitor the views of all patients and consult on any future changes through the Patient Participation Group.

Jude Rowley
Administration & Patient Services Manager

31/03/2015

STATION HOUSE SURGERY IMPROVEMENT ACTION PLAN 2014/15

PRIORITY AREAS	ACTION TAKEN	TARGET DATE	OUTCOMES
1. Appointments System			
a) Divulging sensitive information to receptionists.	a) Receptionist training in use of language when asking for sensitive information b) Receptionists to explain to patients why the information is important	March 2015 Completed	Receptionists use positive language and request brief outline of problem/need to enable them to place the patient with the correct health worker; The telephone queuing message includes explanation of what the receptionists need to ask and why.
b) Dislike of lack of choice of appointments types	a) Review and change appointments model to include a combination and choice of patient bookable face to face appointments and telephone consultations.	Mid February 2015 Completed	The appointments model was changed in February 2015 to include some patient bookable face to face appointments. Patients can now pre book appointments as opposed to relying solely on telephone consultation with GPs;
c) General dissatisfaction with the appointment system.	a) Positive promotion of the revised appointment system within our patient population and Kendal.	April 2015	This has been publicised in the surgery, in the patient leaflet and in feedback to comments left on NHS Choices and Friends and Family Test. Early feedback since the changes show that patients are more satisfied being able to access pre bookable appointments with the GPs if they wish. The surgery is considering a press release in the local paper.
d) Waiting time for GP to return call	a) Reduce the number of patient telephone calls made by the GP per hour to improve call back times.	Mid February 2015	GPs now make less calls within a designated clinic which has improved call back times for patients.
2. Telephone System			
a) Dislike of queuing time before call answered	a) Monitor patient call queuing times via telephone system software. b) Review possible solutions: <ol style="list-style-type: none"> i. Current queuing messages with a view to simplifying and shortening message. ii. Staffing levels at peak times 	February 2015	Monitoring of patient call queuing times via the telephone system software identified which were the peaks times / days for callers and where patient abandoned calls because they were waiting in a call queue; We undertook a review of the telephone queuing messages and changed them so they were more brief and informative. Staffing was reviewed in relation to the call data to ensure appropriate staffing levels at the our busiest

			times and days. Call answering still requires improvement at an average of 90% of calls being answered and 63% of calls being answered within one minute.
3. Reception Issues			
a) Queuing at the Reception desk	<ul style="list-style-type: none"> a) Increase front desk staffing levels at busy times b) Purchase Tensa barrier to define and separate Dispensary and Reception queues. 	March 2015	<p>Staff have been trained to ask if they could help patients who were queuing at the front desk while the receptionist was busy or engaged on the telephone;</p> <p>The staff rota was changed to extend additional administration support to 5.30 minimum every day and 6pm on the busiest days. This supports the receptionist who is working until 6.30pm.</p> <p>The surgery considered a Tensa barrier to define Dispensary and Reception queues but following implementation of the above strategies there are rarely significant queues in the reception area.</p>
b) Excellence in customer service	<ul style="list-style-type: none"> a) Receptionist training in use of language when asking for sensitive information b) Promote excellent customer service within Reception Team 	March 2015	<p>Staff have received training on what / how to best ask for sensitive information from patients to ensure correct placement with a health practitioner.</p> <p>Staff have attended or carried out online Customer Service Training.</p> <p>Since these improvement the surgery has not received any complaints or negative feedback form patients regarding Reception staff/manner.</p>