

Patient Participation Report 2012-2013

In April 2012, Patford House Surgery in Calne merged with the Sutton Benger Surgery, and became the Patford House Partnership. As a result, our practice now has a combined list size of around 8,500 patients, and both sites are now in an even stronger position to thrive during forthcoming NHS changes.

Although we are essentially one practice, both sites have slightly different requirements regarding the services offered and the patient demographics represented, so the commentary contained in this report will review the combined and separated results where required.

The Patient Participation DES released for the period 2011-2013 provided us with 6 components to focus our patient involvement activities around, and further to our 2011-2012 report, this 2012-2013 report will provide insight into the activities undertaken since the previous report, and how we intend to continue to improve our service provision.

The DES contract identifies the following 6 requirements:

- 1) Develop a structure that gains the views of patients and enables the practice to obtain feedback from the practice population, such as a Patient Reference Group (PRG).
- 2) Agree with the PRG which issues are a priority and include these in the local practice survey.
- 3) Collate Patient views through a local practice survey and inform the PRG of the findings.
- 4) Provide the PRG with the opportunity to comment on and discuss the findings of the local practice survey.
- 5) Agree with the PRG an action plan setting out the priorities and proposals arising out of the local practice survey.
- 6) Publicise the Local patient Participation Report on the practice website and update the report on subsequent achievement.

1. Develop a structure that gains the views of patients and enables the practice to obtain feedback from the practice population.

Patford House Surgery established its Patient Participation Group (PPG) in 2010, and Sutton Benger established its own group in 2011. Since then, both groups have undergone membership changes, with the Sutton Benger group being effectively “re-launched” in 2012, following the merger of the practices.

The current practice is to hold meetings at the Calne and Sutton Benger practices on a 6 weekly basis, with the PPG’s from each site attending their local practice respectively. The PCT preference is that we combine the 2 groups now that we are a single practice with a single list size, but given that both sites are still aligning the ways that the services are being offered, we have decided to delay this merge until a later date, when the needs of patients can be more consistently met.

As identified in our previous report, the majority of our patient population is classed as typically White British, so our PPG's have been historically representative of this demographic group, but the age and social demographics have not been as representative of the overall patient population as ideally desired.

Subsequently to our last report, in order to communicate with a wider group of patients that are unable to attend these face to face meetings, we have also set up a practice Facebook account, where we publish information and ask for comments on initiatives, changes and updates. This activity has especially appealed to the younger age groups and those with mobility / access issues, so we intend to use this medium to a greater extent now that the merger activities have been completed and we can dedicate more resource to supporting its regular use.

In addition to this, we also received anecdotal feedback from patients at both sites suggesting that knowledge of the PPG was not as widespread as it should be, so both sites now have a notice board dedicated for use by the PPG, containing a range of information including minutes of meetings, contact details for members, and topical updates amongst other things. We have also published several articles in local magazines, especially around the Sutton Benger area, explaining what the PPG is and inviting patients to join the group, including specific mention of underrepresented groups like carers. This has resulted in a healthy membership interest, with an average of between 6-12 people attending most meetings at each site, and a wider range of demographics represented than in previous years. These activities have been conducted in addition to those mentioned in last years survey, such as inviting attendance from other demographic groups, including the local school and care homes.

Further to this PPG focused activity, it is the intention of the practice to establish a more structured internal process to collect patient's *informal* comments, compliments and complaints. This will ensure that we are regularly gathering views on the day to day patient experiences, good and bad, so that we do not miss the anecdotal feedback that may provide us with opportunities to improve our services.

2. Agree areas of priority with the PRG

The PPG meetings held at both sites in November 2012 included discussion on the Patient Survey. At the meetings, the PPGs commented on the previous year's survey and made several recommendations for improvement, including changing the scoring system and including / excluding some questions for this year's survey.

The main priorities with this year's survey for both the practice and the PPG was to get a general feeling for patient opinions, given the challenging year both sites had experienced following the merger. In order to do this, we would needed to increase the number of responses gathered from last year, so we started the process earlier in order to release the survey for the whole of December and January.

Practice priorities for the survey included patient opinions that would enable service and resourcing decisions to be made following the merger, such as provision of doctors, when to offer extended hours and urgent appointments, and improvements desired in key operational areas like appointment booking and the phones system. Priorities for the PPG included how best to communicate with patients, awareness of services, and overall patient satisfaction.

3. Collate patient views through the use of the survey

As with last year's survey, we distributed hard copies of the survey to patients in the waiting rooms, as well as emailing it out to all patients that we had an email address on record for, with particular requests going out to patients that were recorded as belonging to targeted involvement groups such as the under 25's and carers. This ensured that patients that were not due to attend the practice during the 8 weeks the survey was being distributed were not excluded from the opportunity of responding.

To our delight, we received 349 responses to our 2012-2013 survey, which is a marked improvement on the 161 responses we received in 2011-2021, so we would like to thank all patients that took the time to complete the survey.

As identified above, the consolidated PPG feedback on the survey was integrated, and the following changes were made:

- The language was simplified (eg replacement of medical jargon like "chronic disease" etc).
- The scoring mechanism was simplified, as 1-10 was thought to be excessively varied.
- The inclusion of a question on how patients would prefer to be communicated with.
- The inclusion of a question asking whether patients would be willing to travel to either site to attend urgent appointments.
- The inclusion of the question asking which surgery the patient attended regularly, so that the responses could be analysed by site as well as together.

The responses to the survey were collected up until the end of January 2013, then collated for statistical analysis in February. These statistics were then shared with the PPG's at both sites during their meetings in February 2013 for discussion.

4. Provide PRG with opportunity to discuss survey findings and reach agreement on changes to service

5. Agree action plan with PRG and seek agreement to implement changes

The priority areas for action were identified in collaboration with the PPG's following the February meeting (as identified below), and will continue to be discussed over the 2013 year, especially given the rate of change that has been occurring following the merger.

2013 Key Observation	Commentary	What we have done / what we will do
80% of patients don't mind if they see a male or female GP	This feedback is particularly helpful, as our instinctive judgement would have been that the preference was for female doctors. This will help inform our resourcing decisions in the future when we are looking to recruit new salaried and locum GP's.	The recruitment of Doctor Martin Searle at Patford House in January was informed by this information, and the proportionate split of appointments will also be considered when the doctor arrangements at Sutton Benger are altered later this year following Doctor Wilkinson's retirement.

<p>45% of patients would like communication via email, and 30% via newsletter</p>	<p>We are very conscious that communication from the practice has not been perfect over the last year due to many rapidly occurring changes regarding the merger, so we will endeavour to favour these communication methods in the future.</p>	<p>We will continue to produce the Patford Post newsletter each quarter, and extend its publication to the Sutton Benger Site, as well as emailing a copy out to the patients we have an email address for. In order to communicate with more virtual groups and our younger patients, we will also maximise our use of Facebook, but look to make this a complementary medium rather than a replacement of more traditional mediums.</p>
<p>68% of the patients at Sutton Benger are happy with the time they have to wait for their appointments when in the waiting room</p>	<p>We are conscious that the waiting time experienced by patients while in the Sutton Benger waiting room can sometimes be lengthy. This has historically been due to the time the doctor spends with each patient, which can often significantly exceed the scheduled time of 10 minutes per appointment. This is probably also caused by the fact that only 52% of Sutton Benger patients were aware of this time allocation. While we recognise the need for spending quality time with all our patients during consultations, this must also be balanced with the courtesy of not keeping people waiting excessively.</p>	<p>We will put up posters in the Sutton Benger waiting room to educate patients that the standard appointment time is 10 minutes, and educate staff to identify the circumstances when a double appointment or longer may be required. We will also endeavour to monitor the amount of time patients spend waiting for their appointments so that we can track our progress in this area.</p>
<p>57% of Patford House patients are happy with the telephone system</p>	<p>The telephone system has been a challenging area for Patford house for many years, with areas of dissatisfaction ranging from the cost the 0844 number incurs, through to the ineffective number options and time taken to answer calls.</p>	<p>As identified in our previous survey, the telephone system we had a 7 year contract for comes to an end in 2013, so we have already met with a number of potential new providers, and hope to have a new system in place around the summer of 2013. Although the exact functions of the new system will be decided in consultation with the PPGs, it can be confirmed that it will include the use of an 01249 number and the ability to have more staff picking up the calls during busy periods. However, in the mean time we have recently introduced a new call management script which is much shorter and offers more user friendly and streamlined number options to direct patient calls appropriately.</p>

19% of patients would be willing to attend either surgery for an urgent appointment	As we have now merged, we are investigating the different ways we can provide services, including the option of offering urgent appointments and extended hours at each site if it would reduce the wait time.	As this is not something that appears to be a favourable option for most patients, we will not be changing the number of urgent appointments at either in the short term, but will continue to review the situation as more routine services become available between both sites.
6% and 52% of the Sutton Benger and Patford House patients respectively are aware of the website functions	The Sutton Benger website was only launched in 2012, and had fewer functionalities than the Patford House website. However, both sites have now been merged to the new consolidated website www.patfordhousepartnership.co.uk where the greater range of functionality is now available to patients from both sites.	We will be putting up posters in Sutton Benger to educate patients that they can book appointments and request repeat prescriptions online. However, given that only just over 50% of the Patford House patients were also aware of these facilities, given that the website has been running for much longer, we will also do this in the Patford House site to inform a greater range of patients.
28% of Sutton Benger patients are aware of the text reminder facility	This is a relatively new facility for Sutton Benger patients since the introduction of our new computer system in early 2012.	As with the above, we will be putting posters up in the Sutton Benger site to educate patients of this facility, and reception will be asking patients for their mobile numbers when checking and informing them that this is a new system
58% are aware of our stop smoking service, and 28% are aware of our weight management service	The number of services that we offer has been expanding over the years, but our stop smoking and weight management services are now core services that all patients should be aware of and offered where appropriate.	We will be sending out letters to appropriate patients to inform them of these services and invite them to take part. We are planning to run at least one weight management programme towards the middle of 2013, and are running the stop smoking clinics on a weekly basis.
25% of patients at Sutton Benger are aware of routine health checks for people over 40	The system in place for inviting appropriate patients for regular health checks has been in place at Patford House and has been working very successfully. However, such a system has not been utilised at Sutton Benger.	The Patford House systems for inviting patients for health checks and medication reviews have started to be implemented at Sutton Benger, and further patient information will be released on the website, in the newsletters, and in individual patient letters.
27% of patients are aware of the patient participation group	General patient awareness of the PPG has been somewhat limited in the past due to a lack of visibility in the surgery and wider community.	Since the previous survey, we have installed a PPG notice board at each site, and placed articles in local village magazines asking for new PPG members. However, over the forthcoming year we will be making better use of the PPG notice boards in the waiting rooms, and including a PPG update / news section in the Patford Post newsletter, as well as including information on the PPG in the new patient information pack.

<p>Overall, patient satisfaction scores are generally slightly lower than the previous year</p>	<p>Given the difficult year the practice has experienced during the merger, we fully expected operational services to be impacted, thus decreasing patient satisfaction. Although this is not something that we excuse, we are glad to see that the overall reduction in satisfaction has been only slight in most areas.</p>	<p>We will be spending the next year stabilising our operational processes now that the merger activities have settled down. In order to monitor the impact these activities have on improving patient satisfaction, we intend to repeat the patient survey at the end of 2013.</p>
<p>Appointment access</p>	<p>At Patford House, our access to appointments has always been a challenge, with typical waiting times for a routine appointment averaging 2 weeks.</p>	<p>We have recruited a new salaried doctor at Patford House for 6 sessions a week, and will look to increase this number of sessions during the year. We have also trialled a number of different ways of offering appointments, including book on the day and telephone triage by the doctor. The general outcome of the trials is that a mixture of the two would be the ideal solution, so we have now appointed a Nurse Practitioner who will be available every morning for urgent patient requests and triage advice via telephone and appointments, thus releasing more doctor time for routine appointments and referrals from the triage nurse. We will be monitoring the average wait time for an appointments over the next 6 months to evaluate the extent to which this is affecting appointment availability.</p>
<p>Doctors at Sutton Benger</p>	<p>There have been many patient concerns over the alteration to the doctors used at Sutton Benger in the run up to Doctor Wilkins retirement. Doctor Ingham has been a longstanding and valued member of the team, but is utilised in a locum capacity, and the taxation rules have changed, thus restricting our regular use of locums. In addition to this, the main objective of the merger was to introduce the doctors from Patford House so that patients would maintain continuity of care when Doctor Wilkinson does retire in 2013.</p>	<p>Doctor Wilkins will be retiring as of 1st April 2013, and Doctor Ingham will be used for ad hoc locum sessions in the future. The regular sessions will be provided by Doctor Harris, Doctor Bowen, Doctor Else, and Doctor Searle, with another salaried doctor planned for later in 2013 to help backfill appointments between both surgeries. All doctors will be delivering appointments across both sites, and all the doctors mentioned above will be continuing their presence at Patford House Surgery as well.</p>

Reception	The main theme of formal and informal complaints that we have received besides the telephone wait and cost, is the manner of reception staff. During this difficult year, we have experienced many difficulties which have caused frustrations in our patients and staff. This has been further affected by the introduction of a new IT system, recruitment of additional staff members, and limited access to appointments, all of which have challenged the skills and morale of the reception team.	In addition to the appointment changes identified above, we are introducing a new and improved staff induction and training programme in 2013 so that we can equip our staff, reception and administration, to better serve our patients, and restore our reputation in the local community to the high quality service provider we have always aspired to be. However, our receptionists will inevitably need some details from you so that your query can be forwarded to the most appropriate person and assist the doctor in preparing for your appointment.
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6. Publicise actions taken and subsequent achievement

This report will be published on our new website, made available to the PPG, and available in hard copy from reception upon request.

Last Years Actions	What we have done
Demographic representation of the PPG	We have personally invited individuals from targeted groups and placed posters / adverts in patient areas. This has improved the PPG membership numbers to a steady 6-12 per meeting. We will continue to work on utilising virtual mediums like Facebook to access groups less able to attend the meetings like under 25's and those with mobility issues.
Patient communication	We have regularly collected patient email addresses over the past year, and now have details for the majority of patients at both sites. We have also published the Patford Post newsletter across both sites.
Telephone system	The current contract ends in 2013, and several providers have already been met with. The new system may include the phone lines at Sutton Bengier, but further details will be agreed in consultation with the PPG's.
Online appointment system	The websites have been merged and the ability to book appointments online is now available for both Patford House and Sutton Bengier patients.
Awareness of additional services	Additional services like stop smoking, COPD clinics, and the weight management programme have been organically introduced at both sites, but have not been widely advertised due to the stabilisation of resources following the merger. They will be more widely communicated now that more permanent staffing arrangements have been made.
Access to non-urgent appointments	Additional doctor and nurse resource has been recruited, with an extra 8 doctor sessions available across both surgeries, and more to be introduced over time. Alternative appointment options like telephone appointments and a triage nurse have also been made available, which should over time reduce the demand to non-urgent doctor appointments, thus reducing the wait.

Opening Hours / extended hours	We have trialled offering weekend and late night surgeries, with varying success. This is an area we will look to consult further with the PPG over the following year so that we can provide accessible opening hours across both sites.
Reception privacy	Privacy on reception is a challenge for many surgeries. As an interim measure, posters have been put up behind both receptions informing patients that they can inform reception if they would like to discuss something in private and we will take them to a private area. However, in the longer term, the issue of privacy at Patford House should be resolved by re-forming the reception desk layout so that the second hatch is removed and replaced with a longer worktop round the corner (further details discussed with the PPG). However, as the building is listed, we have had to place a planning application in with the Council and are awaiting approval to implement the changes.

Our Patford House opening hours are:

	Morning	Afternoon
Monday	08:30 - 13:15	13:45 - 18:00 18:30 - 19:30*
Tuesday	08:30 - 13:15	13:45 - 18:00
Wednesday	08:30 - 13:15	13:45 - 18:00
Thursday	08:30 - 13:15	13:45 - 18:00
Friday	08:30 - 13:15	13:45 - 18:00
Weekend	<i>closed</i>	<i>closed</i>

* Late Monday evening surgery is for pre-booked appointments only.

Our Sutton Benger opening hours are:

Our reception is open Monday to Friday between 08:45 - 12:45 and 14:00 - 18:30 (closed Tuesday afternoons) for appointment booking, prescriptions and enquiries.

Dispensary

	Morning	Afternoon
Monday	08:45 - 12:45	16:00 - 18:30
Tuesday	08:45 - 12:45	<i>closed</i>
Wednesday	08:45 - 12:45	16:00 - 18:30
Thursday	08:45 - 12:45	16:00 - 18:30
Friday	08:45 - 12:45	16:00 - 18:30
Weekend	<i>closed</i>	<i>closed</i>

Survey Results

Q. No	Question	2012-2013		
		SB	PH	Total
1	I am male	44%	37%	40%
	I am female	56%	63%	60%
2	I am 16-18	3%	3%	3%
	I am 18-30	7%	5%	6%
	I am 30-50	26%	29%	28%
	I am 50-70	43%	41%	42%
	I am 70+	21%	21%	21%
	I work in Calne	1%	17%	10%
3	I work outside Calne	51%	27%	37%
	I am retired	34%	43%	39%
	I am a student	5%	3%	4%
	I am unemployed	1%	2%	2%
	I work from home	8%	8%	8%
	4	Which surgery do you attend?	42%	58%
5	I attend the surgery 0-1 times a year	12%	10%	11%
	I attend the surgery 2-4 times a year	49%	47%	48%
	I attend the surgery 5+ times a year	39%	42%	41%
6	I have a chronic disease	48%	60%	55%
7	I am disabled	8%	7%	8%
8	I am a carer	7%	10%	9%
9	I am White British	97%	93%	95%
	I am Asian	1%	0%	1%
	I am Irish	0%	0%	0%
	I am other white	1%	3%	2%
	I am Chinese	0%	0%	0%
	I am another ethnicity	0%	1%	1%
10	I prefer a male GP	14%	9%	11%
	I prefer a female GP	3%	11%	7%
	I don't mind if male or female	81%	79%	80%
11	I prefer to see my own GP	15%	10%	12%
	This matters a little	35%	28%	31%
	This isn't very important	46%	62%	55%
12	I would like contact via email	45%	49%	45%
	I would like contact via the website	15%	19%	17%
	I would like contact via facebook	4%	7%	6%
	I would like contact via twitter	2%	3%	2%
	I would like contact via newsletter	35%	26%	30%
13	I am happy with non-urgent appointments	84%	70%	76%
14	I am happy with urgent appointments	85%	79%	82%
15	I am happy with the waiting time	68%	79%	74%
16	I am happy with the opening hours	76%	84%	81%
17	I am happy with the phone system	84%	57%	68%
18	I am happy with the repeat prescriptions	83%	78%	80%
19	I am happy with the reception service	92%	83%	87%
20	I am happy with the building facilities	83%	84%	84%
21	I am happy with the information provided	79%	82%	81%
22	I am satisfied with the surgery overall	88%	85%	86%
23	Additional comments on the above	N/A	N/A	N/A
24	I would be interested in general healthcare information on the website	0%	0%	0%
25	I would be willing to attend either surgery site for an urgent appointment	15%	22%	19%
26	I would be interested in helping with fundraising activities for the surgery	16%	20%	18%
27	I am interested in running / attending support groups through the surgery	6%	13%	10%
28	I am aware that you can use the website to book appointments, order repeat prescriptions, and access key contact information online	6%	52%	33%
29	I am aware that you can remind me of my appointment by text	28%	65%	49%

30	I am aware that a routine appointment is 10 minutes long	52%	71%	63%
31	I am aware that the surgery offers a stop smoking service	48%	65%	58%
32	I am aware that the surgery offers a weight management programme	16%	37%	28%
33	I am aware that the surgery offers a counselling service	29%	46%	39%
34	I am aware that the surgery offers a travel vaccination service	54%	63%	60%
35	I am aware that the surgery offers a health-check service for patients over 40	25%	43%	36%
36	I am aware that the surgery has a Patient Participation Group	15%	35%	27%

Total number of responses = 349 / Patford House responses = 204 / Sutton Benger responses = 145

(Responses recorded as a positively expressed % from average score - eg 3.72 out of 5 = 74% satisfaction)

(The specific statistics that have been commented on in the report have been highlighted in yellow)

(Please see last year's Patient Survey Report for comparative statistics)