PARK SURGERY PATIENTS GROUP REPORT ON THE SURVEY HELD MONDAY 9TH TO FRIDAY 20TH JANUARY 2012

Part A

1. Introduction

The survey was organised and conducted by Members during a two week period in January 2012.

It had been decided to devise a Survey Form which focused on the areas raised for possible improvement in the most recent national survey commissioned. A Survey Form was designed and developed by Members as shown in **Part B** of this report.

2. Conducting the Survey

Following discussions at Patient Group Meetings it was decided to adopt a variety of different approaches to collect completed forms. A total of four approaches were agreed as follows:-

- i) Members to attend during surgery hours and either complete the Survey Forms in conjunction with Patients or hand out forms for self completion by Patients.
- ii) Doctors would be asked to deliver Survey Questionnaires to Patients receiving Home Visits. These could be completed by the Patients and returned in a stamped addressed envelope provided,
- iii) Nurses would be asked to deliver Survey Questionnaires to Patients receiving Home Visits. These could be completed by the Patients and returned in a stamped addressed envelope provided.
- iv) Members would distribute Survey Questionnaires to friends and family (Network) who were patients at the Practice for completion and return during the survey period.

The advantages of the various methods of collection included completed Questionnaires by actual patients using the services of the Practice during the sample period, increased numbers of forms completed by filling them in with Patients in the waiting room and a variety of different types of patients who had the opportunity to be involved, whether actually attending or receiving a service from the Practice. It was also cost effective as there would be little postage incurred other than that outlined in 3 below.

3. Time Taken to Undertake the Survey

Members kindly agreed to attend the Surgery on a rota basis to distribute and complete the Questionnaires over the survey period.

The actual time spent at the Surgery by Members engaged on Questionnaire completion was **33 hours***

The actual time spent by Members on collating and analysing the data and producing this Report was 24 hours.

^{*}Estimated figure for one member of 4 hours included who could not be contacted.

Forms Collected

Week 1		
Monday 9 th	AM	= 54
Monday 9 th	PM	= 19
Tuesday 10 th	AM	= 49
Tuesday 10 th	PM	= 29
Wednesday 11 th	AM	= 23
Wednesday 11 th	PM	= 16
Thursday 12 th	AM	= 33
Thursday 12 th	PM	= 0
Friday 13 th	AM	= 27
Friday 13th	PM	= 5
=		

Total = **255**

Week 2

Monday 16 th	AM	:	=12
Monday 16 th	PM	=	= 0
Tuesday 17 th	AM	:	= 47
Tuesday 17 th	PM		=0
Wednesday 18 th	AM	=	= 0
Wednesday 18 th	PM	=	= 20
Thursday 19 th	AM	Ξ	= 28
Thursday 19 th	PM		=0
Friday 20 th	AM		=0
Friday 20 th	PM		=0

Total =**107**

Doctors' visits 8 Nurses 0 Networks 9

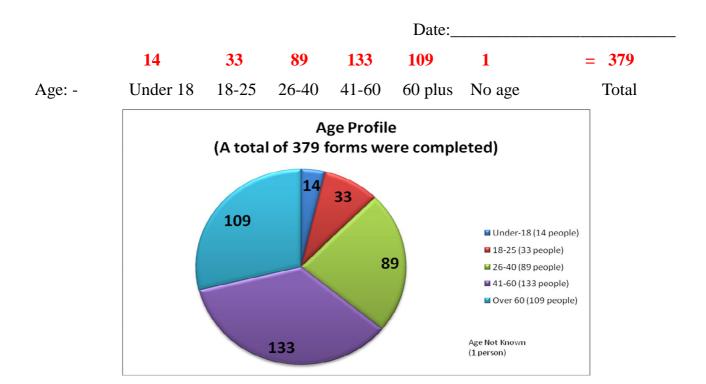
Total = 17

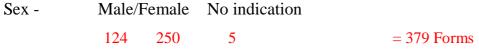
TOTAL NUMBER OF SURVEY FORMS = 379

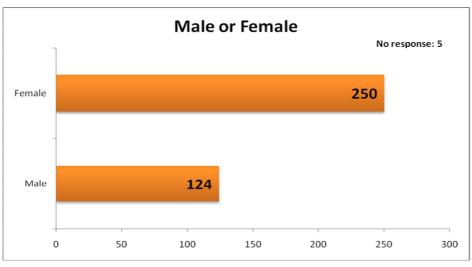
PARK SURGERY

PATIENT QUESTIONNAIRE

In order to improve Doctor/patient communication, it would be very much appreciated if you would take part in the following questionnaire.

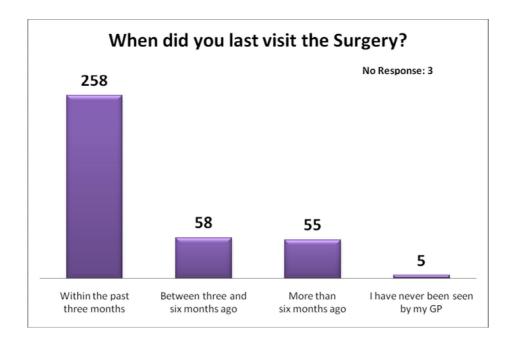






1. When did you last visit the G.P. Surgery:-

a)	In the past three months?	258	
b)	Between three and six months ago?	58	
c)	More than six months ago?	55	
d)	I have never been seen by my present G.P.?	5	
	No answer	3	= 379 Forms

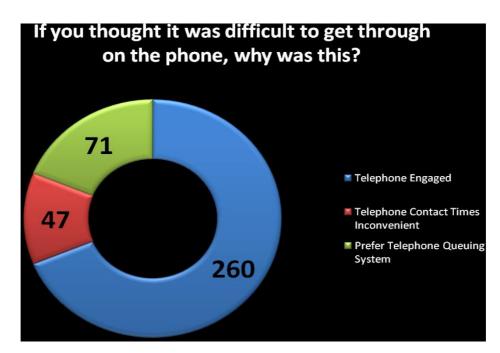


2. In the past six months how easy have you found the following:-

	Haven't tried	Very Easily	Fairly easily	Not very easy	Not at all easy	Don't know
Getting through on the phone	15	90	165	70	34	2
Speaking to a Dr on the phone	120	124	99	13	1	20
Speaking to a nurse on the phone	270	39	27	8	0	33
Obtaining test results by phone	170	110	69	4	4	21

3. If you thought it was difficult to get through on the phone, why was this?

- a) telephone engaged 260
- b) 8.00 a.m/2.00 p.m. Telephone contact times inconvenient for patient 47
- c) prefer telephone queuing system 71



d) other difficulties experienced:-

If am surgery is full make an afternoon appointment rather than having to call back

Getting through at 8.00am is a problem

Free phone number is needed

I would prefer practice to call me back 2

Asked to hold when phoning from work

Frustration at not getting through/ I tried 15 times today before getting through

I know not to ring at 8.00am or 2.00pm as it is always engaged

More than one telephone line required 3

I never get an appointment at 8.00am when I ring 6

If a queuing system it should indicate how many calls are ahead of you 2

Answerphone and asked to hold for long time

Put on hold for 20 minutes at 8.00am on my mobile which was very expensive

Get an appointment at anytime of the day rather than just 8.00am and 2.00pm **3** I am deaf and the telephone causes me difficulties

Doctor's advice not acceptable

Sometimes engaged others not/sometimes easier than others 2

No problems 6

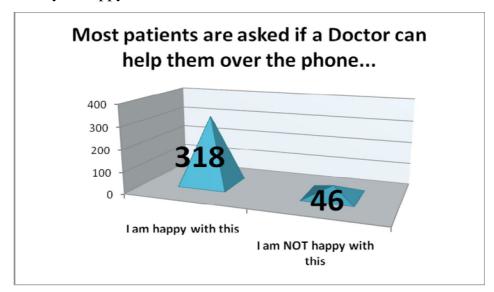
Telephone used to be a problem but it seems better now.

I always come to the surgery and never phone

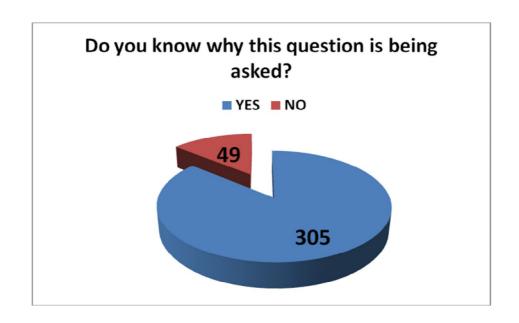
4. Most patients are asked if a Doctor can help them over the phone

Are you happy with this?

Yes **318** No **46** No answer **15**



Do you know why this question is being asked? 305 Yes/No 49 No answer 25



Please tell us more/comment:-

Reduce Appointments and speed up service 4

It saves time and resources 3

Sometimes an appointment is unnecessary when quick advice is required 6

This option is pushed at you too much 2

Don't mind being asked by (receptionist?) don't always want to give reasons

I prefer to explain face to face **3** Not interested

On various occasions I have not been phoned back

It is good or very convenient 3

It depends on the case/condition 5

If you need an appointment you will be seen

Staff know me well enough that I will need to see a doctor

Sometimes I would prefer a female doctor, but often it is a male who calls A system which makes doctors run to time

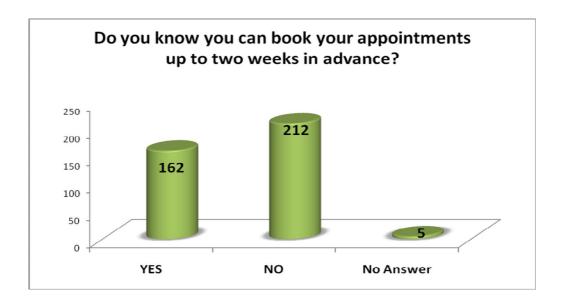
This service is not helpful for people with special needs

Some people may be misled by a phone consultation when they are not ok

Accurate diagnosis cannot be given by phone

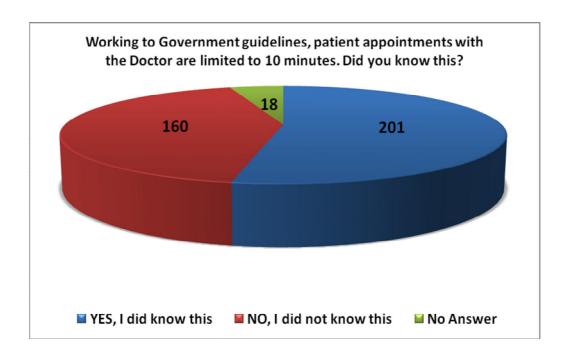
5. Did you know you can book your appointments up to two weeks in advance?

162 Yes/No 212 No answer 5



6. Working to Government guidelines, patient appointments with the Doctor are limited to ten minutes per patient. Did you know this?





Are there any ideas/initiatives that you have heard of elsewhere which you consider might work well in this Practice?

Often have to wait for up to one hour for my appointment time to be reached 4

Waited for 1 Hour 45 minutes for my appointment

Surgery always running late with appointments – keep people informed 2

Have a ticket system for each doctor which you collect when you arrive

Time keeping of appointments not acceptable, kept waiting for a substantial time with two new babies

Online appointment booking service for those in full time employment 3

More flexible appointments, including outside working day and Saturday mornings 7

Once a week hold an earlier appointments session

No lunchtime closure and weekend opening

Better tannoy audibility with lower background radio noise 5

Ability to E-Mail surgery

Improved website

More publicity about extended opening hours

More telephone lines at 8.00am 3

Improve telephone call system 4

Phone anytime for an appointment instead of 8.00am and 2.00pm

Provide an appointment by telephone when full even if 2 or 3 days ahead

I see GP for blood pressure and repeat prescriptions – why can't the Practice Nurse do this (like other Practices)

Same Doctor to carry out all House Calls

Things have to change as too much pressure on Doctors and Patients

Have a Doctor running a "drop in" clinic with no appointments 5

More Doctors in Surgery doing evenings

Double appointments for children as I bring 2 children who need 20 minutes

Offer "double" appointments for extra difficulties

More advanced appointments as never any available

Blood Tests at the Surgery 3

Health Visitor back in Surgery

Well man checks – more preventive medicine health checks

Diabetic Clinic

INR testing available at home like in America

Given wrong test results by Receptionist

It would be nice to keep your own GP/Doctor 3

Better records to help Doctors know your history

Doctors Duty Rota on display

Diet sheet for patients on warfarin – it is available from other surgeries

Order repeat prescriptions by phone

Difficulties caused now that repeat prescriptions are not taken over the phone

Doctors do not prescribe enough tablets – Kelvingrove give 3 months worth

Induction Loop in surgery for deaf and hearing impaired 2

Special Needs facility

Information regarding death of father did not filter down to professionals within Practice

TV needs to be on for the children/more toys 2

Introduce magazines/newspapers 3

Penalty system for people who fail to attend for appointments

Is the surgery closed on Wednesdays?

Bigger Car Park

Positive Feedback

Absolutely brilliant, staff always helpful

Excellent service from all staff

Very pleased with Practice over many years 2

Good Practice good Doctors

I think they are all quite good/ I am satisfied, all the girls and doctors are nice 3

Girls behind the desk do a brilliant job

Very helpful and friendly Practice 2

Happy generally/fairly satisfied 5

I think this is the best Practice I have been to 2

Happy since I transferred from another Practice

10 out of 10 for the Practice – Dr Lynas best GP I have ever known

Staff have always provided an appointment for me and my son on the day we telephoned

I think systems in place work well

Thank you for completing this questionnaire. Your comments and cooperation are much appreciated.

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Part C

Uses for Data Collected and Analysed

The data collected and analysed during the survey period is a primary source of information and material which captures the views, opinions, concerns and suggestions of the patients of the Practice in January 2012. It highlights not only negative comments but also contains positive feedback of the Practice, Doctors and Staff.

Whilst the primary aim was to conduct a survey the material produced provides hard data which may prove useful to the Practice in such areas as analysis of:-

Patient Flows

Patient Age Profiles

Frequency of Visits

Knowledge of some of the Practices services.

There has been daily and weekly analysis of all the Questionnaires completed which are now available to Practice staff to assist for a variety of possible uses when considering future planning and possible changes.

Part D

Next Stages

a) The Practice

- To receive the review and consider the findings from the survey contained in this report.
- Consider the creation of an Action Plan for presentation to the Patient Group within a specified period of proposed changes.
- The Patient Group accepts that such an Action Plan would have due regard to the findings and the establishment of priorities identified in accordance with the budget.

b) Patients.

It will be necessary to agree the most appropriate way to provide the findings of the Questionnaire to patients. There are a variety of different methods which may include notices in the Waiting Room, inclusion on the Practice Website, a Newsletter produced by the Practice, an Open Evening (meet the Practice) event when the results could feature etc.

Part E

Lessons Learned

- Format of Questionnaire number and type of questions (Question 3 alone produced 1,508 responses which had to be recorded and analysed)
- Length of survey period- consider reduction to one week and maximise coverage on those five days by Members
- Type of survey was very successful and in Week 1 produced **255 forms**.
- The data analysis/input is a major piece of work which will need to be planned and undertaken in a different way.

Conclusions

There was an excellent and co-operative response from patients to the Survey when approached. The staff and Practice Manager were very helpful.

The survey would not have been possible without the enthusiasm and time commitment of the Members of the Patient Practice Group.

Nigel E Hallam, Chair of the Patients Group

January/February 2012