

In July 2011, the Practice began the procedure of attracting patients to form a patient participation group (PPG) that was representative of the patient list in terms of age, ethnicity, long term medical conditions, and caring.

The GPs at Harvey Group suggested patients they thought would be willing, and invitation letters were sent. Additionally, a cross section of patients, were contacted by letter or email, and invitation slips were left at the reception desks at both Harvey House & Jersey Farm surgeries. To date 94 patients have expressed a willingness to become involved, some preferring to communicate by email alone.

Our Practice ethnicity data compiled from information provided by patients shows that we have 78% white British, 10% other white, & 2% 'other Asian'; the remaining 10% include seven individual ethnic groups of approximately 1% each. From the details I have gathered the 94 patients are representative of our patients list, and include a minimum of 7 ethnic groups and have a history of the most common long term health conditions such as a heart disease, diabetes, raised blood pressure, respiratory disease, and cancer. We have male and female representatives in all seven 'Korner' age bands covering an age range from 17-84.

In October 2011 the PPG members were asked for their comments on those areas of the Practice that offered scope for improvement. Based on the responses, reference to past patient surveys, and the views of our Practice team questions were compiled for a patient survey form. Forms were initially sent to the PPG, who confirmed their satisfaction, and then over the following 3 months made available at both Surgeries. Approximately 200 survey forms have been completed and the responses and additional comments have been collated. The survey form was designed in a way to gather opinions on a broad range of subjects relating to the Practice and included some questions that gave the opportunity to give opinions on both the last doctor and nurse seen. This is extremely useful but challenging to display statistically in a report such as this. A summary of the survey results is shown at the end of this report.

I am extremely pleased to note the high level of satisfaction both

overall and for the majority of the specific questions. A three page report was emailed or posted to the PPG members at the beginning of March 2012 with a proposed action plan. Comments were invited and the responses were broadly in agreement with the proposal. Two comments were made suggesting some customer service training be provided for reception staff; this has now been added to the plan below but as the satisfaction scores for both surgery receptions were high I will be seeking some clarification of what is required.

Some of the information gathered from the survey is better expressed in words rather than figures. These are:

Most patients used their preferred method of booking appointments though some were unaware how to use the online option. Posters are on display to promote this.

The ratio of GP appointments between those made available up to 48 hours ahead and all others is set with the aim of meeting patient demand. In recent years we have increased the proportion of appointments available for booking no earlier than 48 hours in advance, to meet increased demand. The appointment system is continually kept under review.

We have a policy of training our nurses to treat minor illness and this is ongoing with one of our newer appointed staff. Many nurse clinics have this service available as an alternative to seeing a GP for minor illness.

A significant number of patient's would have liked some written information from their GP during their consultation. Many patient leaflets are available so please ask your GP or nurse along with details of any appropriate health websites.

Several patients expressed a wish to have their bloods taken at the surgery. At present NHS Hertfordshire has commissioned and funded this service at St Albans City Hospital for St Albans residents. We will however look into the contract details to see what options will be available in the future.

The action plan agreed with the PPG is as follows:

1. Improved publicity of opening times and services, including online booking of appointments. This information will be clearly displayed on the Practice website, in leaflet form, and on notice boards.
2. Continuing the ongoing program of premises improvements, including the purchase of some additional comfortable chairs.
3. Analysis of phone calls by time and reason with the aim of improving service. Reception staff will over a two week period log the time and type of incoming calls to identify whether staffing levels or methods of communication with patients can be improved.
4. A longer term commitment to replace the phone system to increase flexibility of answering calls for both surgeries, and as far as practicable to be set up in a manner to meet the views of patients,
5. Patients to be made aware that they can request health leaflets relating to their medical conditions. This will be displayed similarly to '1.' above.
6. Customer service training for reception staff.

Survey Results

All figures are percentages of appointments booked ☐ Phone – 62 ☐ In person – 31 ☐ Online – 7

Success in booking an appointment less than 48 hours ahead ☐ Able to – 50 ☐ Booked later – 28 ☐ Spoke to advice GP – 17 ☐ Saw nurse – 5

Success in booking an appointment of choice more than 48 hours ahead ☐ Able to – 87 ☐ Unable to – 13 – where GP of choice unavailable

Time in waiting room to see GP ☐ On time – 14 ☐ Less than 5 minutes – 14 ☐ 5-15 minutes – 50 ☐ More than 15 minutes – 22

Acceptability of this Acceptable – 75 A bit too long – 25

Ease of making appointment with nurse Very easy – 62 Fairly easy – 38

How prescriptions are ordered In person – 70 By pharmacy – 22 Online – 8

Do patients try to see a doctor of choice & if so do they succeed? No – 32 Yes – 68

If yes are they successful? Always – 20 Most of the time – 80

Satisfaction with hours of access to surgery *Harvey House* Very satisfied – 50 Fairly satisfied – 40 No opinion 10

Jersey Farm Very satisfied – 27 Fairly satisfied – 55 No opinion – 18

Satisfaction with last consultation for planning care for a long term condition Satisfied – 99 Dissatisfied – 1

Willingness to join focus group Yes – 60 No – 40

The following figures are averages based on a rating score from 1-5

Satisfaction with GP consultation: overall rating on 9 separate questions scored from 1-5 Rating – 4.7

Satisfaction with nurse consultation: overall rating on 9 separate questions scored from 1-5 Rating 4.5

Telephone access – based on score of 1-5 *Harvey House* – 3.4 *Jersey Farm* – 3.7

Reception – overall rating on 5 separate questions scored from 1-5 *Harvey House* – 4.6 average rating *Jersey Farm* – 4.4

average rating

Premises – overall rating on cleanliness, décor, & seating scored from 1-5 □ Harvey House – 3.9 average rating □ Jersey Farm – 3.9 average rating

Services satisfaction based on score of 1-5 □ Harvey House – 4.6 average rating □ Jersey Farm – 4.2 average rating

Overall satisfaction based on score of 1-5 □ Harvey House – 4.5 □ Jersey Farm – 4.5

Survey forms were completed by patients in 9 age groups from under 17 to over 85, by 10 carers, and from 5 ethnic groups including the 3 covering the highest percentage of patients. 60% of the forms were completed by females.

Report written by Philip Eaton, Practice Manager, March 2012