Improving Practice Questionnaire

As a practice, we value patient feedback to help us review and improve our services to patients within the constraints of the NHS budget. Did you know the share of the NHS budget going to general practice has fallen from 10.7% to 8.4% between 2005 and 2012? At the same time, demand for GPs' services has increased and GPs now manage 90% of all patient contacts in the NHS. Patient consultations have increased by 60,000 per year compared to five years ago. With a growing and ageing population, patients with multiple and complex illnesses growing in number it is little wonder that our patient survey results have seen a decline from an overall score of 77 in 2010 to 66 in 2014. Coupled with a chronic shortage of GPs it is making it increasingly difficult for us to provide the level of service to our patients that we would truly like to.

However, our doctors and staff work extremely hard to provide safe and efficient care to our patients and the results of this year's survey and patients' comments do reflect that we are doing a lot of good work, although there are of course some areas you would like us to improve; some we can change, and others we cannot.

After last year's survey, we agreed an Action Plan with our PPG:

• We agreed to lobby the government to move towards equitable funding for primary care.

NHS England has started the process of reviewing all medical contracts in primary care to ensure fairer distribution of the budget and access to services.

• We agreed to engage with the Locality Commissioning Group to develop community services.

We have met with our Locality Commissioning Group bi-monthly and the Locality Community Services Plan was published in June 2014 as an on-going piece of work to develop integrated care locally.

• We agreed to review our appointment booking.

We have introduced doctor triage for patients whose clinical condition will not wait until the next available routine appointment.

• We agreed to increase clinical sessions by 3 per week and recruit additional nursing, admin and reception staff to improve access.

We have increased capacity since April 2014, but demand continues to outstrip capacity and we are in the process of further increasing our clinical sessions, our practice nurse sessions and our reception team to cope with this demand.

• We agreed to review our procedures for staff absence, performance management and training needs.

We have introduced a Managing Absence Policy and developed a trainer role within the practice to promote continuous staff development.

• We agreed to review our telephone system

We have committed £20,000 of our budget to fund a new telephone system to be installed in February 2015.

• We agreed to review our IT system.

We had plans to install a new system in May 2014 but this was deferred by the CCG for contractual reasons. We have instead installed additional software to our existing system to improve efficiency and functionality.

So, what about this year's survey?

79% of patients are satisfied with their visit to the doctor and 79% of patients would recommend the doctor to their friends. Patients said "The service in all departments has been excellent. Thank you". "I rate this doctor as the best doctor I have ever had". Patients also scored the doctors highly on their warmth of greeting, ability to listen, explanations, confidence in ability and respect shown.

It was however disappointing that only 35% of patients felt they could see a practitioner within 48 hours, and only 37% felt they could see a practitioner of choice. We introduced doctor triage for patients whose clinical condition will not wait until the next available routine appointment. As a result, all patients who need to be seen most urgently now get same day access to a doctor. Patients said "Quicker appointments with doctor, Receptionists can be a bit obstructive when trying to arrange appointments." "The reception staff, if they are not medically trained, they shouldn't ask so many questions," "don't like talking to the reception staff about what's wrong with me." We have had some very positive feedback from patients, but others are less keen. This may be because they do not understand why the receptionist is asking these questions so we need to improve our communication with patients.

Our telephone access has improved from 41% to 45% ("In the past I've found it very difficult to get through on the phone, but it was okay this time"). We would expect to see further improvements in Spring 2015 with the installation of our new telephone system and additional staffing.

Whilst 63% of our patients were happy with how they were treated by our Receptionists, we were disheartened with this score. Our Receptionists have an extremely tough job to do and we are proud of our team who work so hard, and we have developed a receptionist trainer role to continuously review and improve our services. Despite this, you said "Get rid of certain receptionists who are rude and not obliging", "I think your reception staff could do with a better understanding of how to treat people, many times I've had an argument which shouldn't happen". Other patients found "The receptionists are kind and helpful," "Very helpful one on duty today." It is rewarding that many patients do recognise the hard work of our staff and the team have received many Christmas goodies from very grateful patients which is very much appreciated.

The poor scores do reflect the pressure primary care is experiencing nationally with rising demand from advances in medical care, coping with the needs of an elderly population with complex needs, the transfer of work from the hospital setting into the community and rising patient expectation. Problems with recruitment and retention of doctors elsewhere in the country, has now started to impact on us more locally and has been an issue for us here in the practice this year. But we must not be complacent and want to try and improve our patient services further.

We have recently appointed Dr Tristan Oxenham at Tower House and Dr Deborah Hughes at Riverside as Partners from April 2015; and Dr Danny Thomas as a Salaried GP at Tower House from August 2015. Dr Ian Morrell and Dr Linda Hastings are providing some temporary cover in the interim. This will bring our medical team back to full strength. We have also recently appointed Yasmine Horner and Anna Bell to our reception team as apprentices. Installation of the new telephone system took place in late January/early February 2015 and although we have had one or two teething problems, the general feedback from staff and patients has been positive.

From your comments we clearly need to improve the information we give to patients to help them understand the level of service we are able to offer. For example, many patients do not understand how our appointment system works, and see the same day doctors' triage as a barrier rather than a gateway to access; patients are not aware that we do open some evenings and week-ends; patients are unaware that we whilst the door is closed at lunchtime we continue to provide a telephone service; patients are unaware of the services accessible from our website; patients are unaware we have a Newsletter.

Many comments refer to 8am – 8pm access 7 days a week, but this is not achievable without considerable investment and would impact on patient continuity. Issues with car parking is also a regular feature in patient feedback, but we are lucky compared to many surgeries to have any parking attached to the surgery, and to have public car parking opposite both our surgeries. I am not sure what else we can realistically do!

A full copy of the Improving Patient Questionnaire is now available on our website, together with the Action Plan we have agreed with our Patient Participation Group.

We value your feedback to help us review and improve our services and are always happy to hear your comments either by email or directly to Amanda our Practice Manager.

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