

## **2012/13 Local Patient Participation Report**

### **Main Members:**

**Practice Representatives:** Dr Catherine Cargill and Lesley Beale Practice Manager

**Committee:** This has been in a state of change over the last year with some members remaining and others going for various reasons

### **Primary Care Foundation Survey**

Last year we participated in the Primary Care Foundation Survey which was run over a week in November. The survey suggested we should have more receptionists answering the telephone in the morning as this is when the bulk of our calls take place. We cannot do this as we only have three computers available for booking appointments. It also asked why the automated system did not include the nurses – this is because they have a different clinical caseload and patients would probably book inappropriately.

This survey highlighted that our consultation rate appears close to the national average of 6.32 – the national consultation rate weighted for age and sex of our population is 5.9. However, we are aware of the problems patients experience and so we have from the end of March increased the number of appointments with the nurse from four an hour to five an hour. This may not sound like much but over the course of a year is a substantial increase.

This survey can be found on the website.

### **In-house Survey**

The practice survey was run between November and the middle of February. All partners received their 50 questionnaires.

A copy of the survey is published on the website and sent out to all the PPG members and fifty five patients who expressed an interest in receiving it.

Survey and report uploaded onto website March 2013

## Results and Comparison with the Mori Survey (2012)

View of practice survey analyst: "it was very good and the areas that you have dropped slightly all the practices I have had an input with have also dropped and I really believe it is due to time pressure."

Number of returns for practice survey: 379  
Number of returns for Mori survey: Unknown

### 1) Helpfulness of receptionists?

	Mori	Surgery
Very helpful	29%	61%
Fairly helpful	55%	29%
Not very helpful	11%	2.6%
Don't know	4%	0.36%

### 2) Overhead in reception?

	Mori	Surgery
Yes	50%	54%
No	10%	14.5%
Don't know	15%	26%
No answer		4%

### 3) Preferred GP/Nurse?

	Mori	Surgery
Always or almost always	37%	21%
A lot of the time	22%	36%
Some of the time	29%	28.5%
Never or almost never	12%	1.3%
No answer		3.1%

### 4) Days waiting for appointment with GP/Nurse of choice?

	Mori	Surgery
Same or next day	35%	37%
2 to 4 days	8%	24%
5 days or more	32%	28%
Don't know		5.2%
No answer	4%	5%

### 5) Waiting time at surgery?

	Mori	Surgery
Less than 5 minutes	10%	27%
5-10 minutes	28%	34.5%
More than 15 minutes	33%	29.8%
No answer	3%	7.9%

### Conclusions:

The wording of question can make a big difference to the answer as can the number of completed questionnaires. As you can see there are discrepancies in the results. As you can see we scored higher sometimes on the Mori Survey than on the practice. Despite the results the practice should continue to try to improve the experience of the patient, however, patients to have a responsibility to use the service wisely, perhaps considering whether their condition is something that needs to be treated as in the case of viral illnesses and not coming back two or three times. The other problem is patients not cancelling appointments so wasting them when they could have been used by other patients, also the use of appointments for re-referral to hospital, which affects access.

### Car Parking:

There is a lot of dissatisfaction with our car park. Unfortunately, there is nothing we can do about this. We have asked the majority of the staff to park elsewhere and are paying for parking spaces for them. We approached Maldon Council with an offer to rent several spaces from them but their workforce did not agree to this. We are sorry that patients have difficulty finding parking spaces but would ask wherever possible that they use the town car parks and walk to the surgery.

### **Did not attend**

The ability to gain an appointment would be greatly helped if patients could let the practice know when they could not attend an appointment. In the year January 2012 to December 2012 there were 2597 missed appointments. This is a total of 433 hours of clinical time. If one was to put a monetary value onto this it would in the region of £9,742.50 of wasted NHS money.

### **Automated System**

We still use the automated system. I know that some patients have had problems with this and find it very frustrating.

Please be aware that before and after any Bank Holidays there are no appointments available for this system – this is due to the demand that the practice experiences on these days and we keep all appointments for book on the day.

If you experience a problem please let us know so that we can check your data or if it is a software problem get it resolved with the company.

### **Opening Hours:**

The open hours of the practice are clearly displayed in the surgery, website and practice leaflet. Also the session times and where the doctors are available. This includes our extended hours which include three early mornings and one Saturday in three – these are all advanced booking appointments.

### **Appointments:**

Appointments are always an issue. We try to divide each surgery session up to include the relevant appointment slots they we under the Government Directive have to offer.

Four – for advanced booking up to six weeks in advance

Four – for patient partner – the automated system for patients to book or cancel their own appointments

Four – for two day in advance

Four – for book on the day.

In any given practice there will always be doctors that get booked up quicker than others. Unfortunately we cannot do anything about this.

There are times when we will be short of doctors for reasons of annual leave, sickness or study leave. Wherever possible we try to get locum cover.

### **The Future:**

General Practice is under threat from new Government Contract Changes and with imposed savings on referrals, drugs, A&E attendances and hospital admissions. We should not be under the impression that it is all to do with this current Government – changes were started under Labour and even if there is a new Government in 2015 – savings will still be needed in the NHS. The NHS is not a free service there is a cost attached to every aspect of it and the public in general need to be aware of this.

Whether or not one believes there is a drive to privatise General Practice and bring in providers such as Tesco and Virgin patients ought to be aware that things are changing. We cannot maintain a culture of “what we want – when we want it”. We should all be aware of this and use all services ambulance, secondary care and primary care wisely.

NB: Fifty five patients requested the survey results and these were sent out on the 12<sup>th</sup> March. Copies of the report were distributed to the PPG committee members for comment.

Copies of the survey and report were sent to five members of the PPG group but none have replied with any comments.

Survey results are displayed in the surgery.