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Dr A C Dellow & Partners

Amersham Health Centre: Patient Participation Report 2013/14

Introduction

This report is an update on our Patient Group and the results of our survey for 2013/14.

The Surgery & its Patient Population

The surgery is situated in Amersham on the Hill near to shops, offices, the railway station, police station, council offices and residential streets. Amersham Health Centre has just over 12,500 patients details of which are as follows:

Practice population age profile

Age	0-4	5-15	15- 25	25-35	35-45	45-55	55-65	65-75	75-85	85+
range										
Female	370	827	575	720	969	931	697	612	436	289
Male	411	855	614	657	966	918	687	553	354	129
TOTAL	781	1682	1189	1377	1935	1849	1384	1165	790	418

The surgery has six GP partners and one salaried GP. There are four male and three female doctors. The practice is approved by the Oxford Deanery as a training practice and helps to train future general practitioners by working with 'GP Registrars'.

The surgery has a comprehensive booklet and website providing patients with lots of information about the surgery, its opening hours, staff and clinics. The booklet and website also provide some general medical advice for dealing with common ailments, a list of suggested items for a family medical chest and travel advice.

We are developing other services with increased use of patient automatic checkin screens. We hope to use these screens for future patient surveys. A 46" patient information screen has been installed in the patient waiting area and is used to show health information videos, practice specific information and as a patient call board. Many patients are currently signing up for on-line services including appointment booking, repeat prescriptions and access to their records (the latter by 2015).

Nurse Led Clinics

We run nurse led Express Clinics. All patients presenting with certain illnesses are signposted into the Express Clinics. All the Express Clinic nurses are independent nurse prescribers.

We also run nurse led chronic disease clinics for diabetes, asthma, COPD, coronary heart disease and hypertension as well as full treatment room services.

We offer daily phlebotomy clinics run by our two phlebotomists/healthcare assistants.

Practice Opening Times

Monday* – Friday 8.30am to 6.00pm

(*Monday Sunrise Surgery by pre-booked appointment only from 7.20am)

Saturday Surgery 8.30am to 12.15pm by pre-booked appointment only. The reception desk is open for patients to collect repeat prescriptions.

Our telephone number changed this month and patients can access services during opening hours by calling 01494 434344 – or in person at the reception desk.

Profile of the members of the Patient Group

The patient group has been led by Dr Simon Thompson. As he is retiring from General Practice in April 2014, his role has been taken over by Dr Andrea Wood. Joyce Hayes, Practice Manager and Fiona Bingham, Senior Receptionist also work with the patient group.

There are currently thirty-one patients in the group of whom ten usually attend meetings and twenty-one usually participate by email. There are eight male and twenty-three female group members. We have a mixture of employed and retired patients. These patients fall into a variety of age and ethnic groups.

The surgery is still striving to expand its patient group numbers by advertising for new members in our newsletters, via a poster in the waiting room and a notice on the practice website.

Terms of Reference

The aims and objectives of the patient group are to:

- Improve communication with our patients.
- Identify issues which are important to our patients.
- Involve patients in decision making with an aim to improve services provided.
- Help formulate action plans from the results of practice surveys.
- Involve the group members in sharing information with other patients.

Patient Satisfaction Survey

A patient satisfaction survey using the the GPAQ (General Practice Assessment Questionnaire) has been carried out for the past three years (© GPAQ is copyright of the National Primary Care Research and Development Centre, University of Manchester and Safran/NEMCH). This has enabled direct comparisons to be made with previous years.

Members of the patient group agreed to help hand out survey forms this year during surgeries and this has enabled us to obtain a higher number of completed survey forms. We are grateful to the patient group for their help with this year's survey. Over 350 forms have been returned compared with 228 completed surveys last year.

Patient Survey Analysis

The individual scores for the evaluation questions in GPAQ are expressed as an average (mean) for all patients who completed the individual questions. They are represented as a percentage of the maximum possible score, so the best possible score is 100%.

364 survey forms were completed – 123 from male patients and 241 from female patients.

1. Satisfaction with Receptionists.

- The mean score for satisfaction with the way patients are treated by the Receptionists was 74%.
- 89% of patients reported that they were good, very good or excellent.

2. Satisfaction with opening hours

- The mean score for satisfaction with opening hours was 64%.
- 77% rated our opening hours as good, very good or excellent. When asked what additional opening times they would prefer, there was a range of answers see below. Respondents were able to suggest more than one change to our opening hours. The highest number of responses was for weekend opening. The surgery is open on Saturday mornings for appointments that have been pre-booked.

Suggested extra opening:	Total
Early morning	50
Lunchtimes	21
Evenings	106
Weekend	163
None I am satisfied	114
Total	454

3. Satisfaction with the availability of a particular doctor

- The mean score for satisfaction with the availability of a particular doctor was 65% which was the same score as last year.
- 79% of those who rated satisfaction said that they could see a particular doctor within 2 working days
- 69% rated the availability of a particular doctor as good, very good or excellent.

4. Satisfaction with the availability of any doctor

- The mean score for satisfaction with the availability of any doctor was 76%.
- 98% of those who replied were able to see any doctor within two working days
- 87% rated the availability of seeing any doctor as good, very good or excellent.
- 75% of patients were able to see any doctor on the same day for a routine appointment.
- 91% of patients who needed to see a doctor urgently on the same day said that they were able to be seen.

5. Satisfaction with waiting times at the practice

- The mean score for satisfaction with waiting times was 58%.
- 61% rated the waiting time as good, very good or excellent.
- 52% of patients said that they are seen within 10 minutes of their appointment time.
- 94% are seen within 20 minutes.

6. Satisfaction with phoning through to the practice

- The mean score for satisfaction with phoning through to the practice was 49%.
- 47% rated their ability to get through to the practice as good, very good or excellent.
- 25% of patients rated their ability to get through to the practice as poor or very poor.
- Telephone access is discussed regularly at Patient Group Meetings. A
 decision was taken to change our telephone system and introduce a
 local telephone number. The new system was installed at the end of
 February 2014 and so any improvements will not be reflected in this
 year's survey. A limited number of appointments can now also be
 booked on line.

7. Satisfaction with phoning through to a doctor for advice

- The mean score for satisfaction with phoning through to a doctor for advice was 64%.
- 39% of patients who completed the questionnaire have never tried to telephone a doctor for advice.
- 76% of the patients surveyed who have telephoned the doctor for advice rated this service as good, very good or excellent.

8. Satisfaction with continuity of care and seeing usual doctor

- The mean score for satisfaction with continuity of care was 64%.
- 72% of patients rated the continuity of care as good, very good or excellent.
- 58% of patients surveyed said that they see their 'usual doctor' a lot of the time or always.

9. Satisfaction with consultations with usual doctor

 The mean scores for satisfaction with consultations with their usual doctor were as follows:

Satisfaction with doctor's questioning about how you are feeling	79%
Satisfaction with how well the doctor listens to what you have to say	81%
Satisfaction with how well the doctor puts you at ease during your physical examination	83%
Satisfaction with how much the doctor involves you in decisions about your care	79%
Satisfaction in how well the doctor explains your problems or any treatment that you need	81%
Satisfaction with the amount of time your doctor spends with you	76%
Satisfaction with the doctor's patience with your questions or worries	80%
Satisfaction with the doctor's caring and concern for you.	81%

10. Satisfaction with consultations with a nurse

 The means scores for satisfaction with consultations with a nurse were as follows:

Satisfaction with how well the nurse listens to what you have to say	77%
Satisfaction with the quality of care the nurse provides	78%
Satisfaction in how well the nurse explains your problems or any treatment that you need	76%

- 293 of the patients surveyed said that they had seen a nurse.
- 94% of these patients rated the quality of care as good, very good or excellent.

11. Demographics of the patients surveyed

- 66% of those surveyed were female and 34% were male.
- 61% of those surveyed were over 45 years old and 39% were under 45 years old
- The mean age for those surveyed was 53.
- 46% of those surveyed had a long standing illness, disability or infirmity.
- 75% of those surveyed live in owner occupied or mortgaged property.
- The ethnicity of those surveyed was as follows:

White	90.0%
Black or Black British	0.5%
Asian or Asian British	7.2%
Mixed	1.0%
Chinese	0.8%
Other ethnic group	0.5%

The patients surveyed described themselves as follows:

Employed (full/part time, self employed)	50.56%
Unemployed	1.39%
School or full time education	2.78%
Long term sickness	1.94%
Looking after home/family	10.28%
Retired	31.94%
Other	1.11%

12. Comments made by Patients

The following is a sample of comments made by patients about what we do well:

- ▼ I feel privilege to have access when I need it to good healthcare
- ▼ I love my doctor ②
- The service is first rate
- Nothing at all can be improved
- ♥ Splendid surgery all round
- Reading the many (negative) stories in the press regarding other surgeries, I am very grateful for where I live – and for the quality of care exhibited by all the staff who work here
- ♥ Much better than most. I believe
- Mobility is a problem so the more services available at the health centre the better
- ▼ Excellent in all respects, keep up the good work
- ♥ Best I have known in this area
- ♥ Best surgery I have ever used
- ✔ Clean
- ▼ Keep it up
- ▼ A lovely surgery with great staff.
- ▼ I am very satisfied with the care at the surgery. I have a lot of confidence in the doctors and nurses.
- Caring attitude I am never made to feel a nuisance.
- The surgery has a good atmosphere, everyone seems happy to work here.
- Well run practice, well done to the team.
- ▼ The receptionists are always so friendly and helpful.
- Diabetes clinics and advice have been excellent, greatly appreciated.
- I am new to the practice and have been really impressed with the care
- ▼ It is good that you are able to be registered at more than one doctor's surgery so that you can see a doctor at the time required.
- Asking to see a doctor very quickly when a very young grandchild was staying with us, our request was met immediately. This was excellent service and the doctor could not have been kinder to our young grandson
- ♥ Excellent when real trouble arises
- ▼ An example to other practices
- ▼ I couldn't have been looked after better if I were the Queen.
- My hypertension is regularly monitored and my husband appreciates the fact that he can also see the same doctor with regards to his chronic condition
- ▼ I appreciate being called for regular healthy heart check
- ▼ I am impressed by the 20 minute interviews with a nurse concerning my high blood pressure and the tests (blood & urine) are reassuring. Overall I am more than pleased with the practice.

The following comments were made about what could be improved:

- The receptionists always want to know what, why, when and if we can wait for an appointment – always a chore to talk to and always feel rushed off the phone
- Always referred to Room 7 (non-urgent) and she has to go and ask the doctor for advice
- ♦ Receptionists not very helpful if you have not followed the correct procedure when doing self-check in. Patients can sit waiting not knowing if they have done the check in properly, therefore leading them to miss their appointment
- I put off coming to the doctors unpleasant experience from start to finish – dismissed with a prescription rather than discussing the problem properly. I wish I could see one doctor and book an appointment to see them. I don't even know who my doctor is. They shouldn't work longer hours however, they work hard enough.
- Squashed waiting area for nurses clinics
- ♦ It is embarrassing checking your blood pressure in public
- ♦ Apprehension over how things will work once both our longstanding GPs retire.
- ♦ Staff at in-house pharmacy rather cold and abrupt will not use them again
- ♦ I understand that some practices have a dedicated person that looks at the way drugs interact. Perhaps that would be an improvement. Maybe such a person could be shared with another practice.
- ♦ Still do not understand how to access hearing support services
- ♦ Older people who do not work should be encouraged to visit during working hours, not first thing, so those who do work can be seen in the morning
- Undiagnosed skin condition, by time recognised had worsened.
 Very frustrating and upsetting. Prefer doctor to have sought 2nd opinion earlier
- Reluctant to offer medical treatment outside the area. Slow to respond with referral and test results
- Sexual health screening would be beneficial
- ♦ Would be good if an appointment could be made upon registration, rather than having to call back
- ♦ All doctors except one are patronising and rude
- ♦ I don't like my name being put up for public view
- ♦ Chronic problems are not dealt with anything like as well as acute problems. Physiotherapy is not freely available.
- ♦ 01494 415922 number is not properly publicised.
- Lack of funding for some treatments e.g. varicose veins
- ♦ Noise from the children's play area can be very annoying
- One doctor was very unsympathetic to a problem, whilst another is excellent
- Name flashed up on screen when I checked in invasion of privacy

- More doctors who specialise continuing training to keep ahead of the science
- ◆ Getting an appointment for the same day could be arranged in person or at least later in the day, not only after 8.30
- ◆ The only thing I would like to see is the ability to consult a doctor/nurse in a weekend emergency. As there are now so many doctors in the practice, surely one could be on call evenings and weekends. Going to A&E is really not an option unless one has a real emergency i.e. stroke/ heart attack etc.
- ♦ <u>Some</u> receptionists need to realise that patients should be afforded the courtesy of being listened to (in a sympathetic manner) then being dealt with according to need not according to the receptionist's opinion.
- ♦ Being the other side of 40, I am conscious that I should have things like blood pressure, sugar etc checked. But how? I have no idea and surgery does not advise.

13. Ongoing Issues

We have recently cancelled our 0844 telephone number and introduced a local 01494 telephone number for all lines into the surgery. Patients will still be able to queue on the new telephone system as patient group members have said that it is more re-assuring to wait in a queue than to have to keep re-dialling.

We have also introduced a registration process for on-line repeat prescription requests and for booking some appointments on line using a personal user name and password. At present it is possible to book a limited number of GP appointments on line, telephone calls from a doctor, Express Clinic appointments and blood test appointments. The on line appointment system will be expanded as more patients sign up to the service. This should reduce the number of phone calls and thus improve this service.

Repeat medication can also be requested via our web site, but all the details of the medicines required have to be typed in to the request form. The online repeat prescription service will show you a list of your repeat medication and you just select what is needed.

We are constantly looking at ways to improve communication with our patients. We noted from the survey results that some patients are unaware that we already have a Saturday morning surgery. We advertise this Saturday surgery regularly in our newsletter and on our patient information screen in the patient waiting room.

Patients can also call the surgery, pick option 1, speak to a receptionist and leave a message for a doctor to call them back. Again this information is on the website and in the practice booklet.

14. Conclusions from the 2013/14 Survey and Action Plan

The results of the patient survey were discussed at the Patient Group meeting on 12th March 2014. The Patient Group agreed that the results were very good and the practice is performing well. Patient comments on survey forms were discussed as follows:

• It is embarrassing checking your blood pressure in public – the Patient Group asked if the BP machine can be moved.

Action Plan: We agreed to try and move the machine to a more private location if a power supply can be set up.

 I don't like my name being put up for public view – it was agreed that there is no real alternative to displaying names on the patient call board. Members of the Group acknowledged that they don't remember names of other patients and are only looking for their own name to be displayed.

Other points raised by the survey were discussed as follows:

 Saturday surgeries – a large number of patients asked for weekend opening but the practice is open on Saturday mornings and one doctor has a Saturday surgery each week. The Patient Group agreed that communication with patients needs to be improved and we make more people aware of Saturday surgeries. We advised the group that there are posters on display and information is included periodically in newsletters.

Action Plan: It was agreed to put the Saturday surgery information on the patient display screen and in every newsletter.

 The Patient Group also thought that more information needs to be given about the out of hours' service so that people only go to A&E for medical emergencies.

Action Plan: To provide more information for patients about the out-of-hours' service and NHS111.

 The Patient Group also asked if the practice could have some evening surgeries. We explained that funding is limited and we have safety/security concerns if just one doctor and one receptionist work alone in the evening but we would see if something could be arranged.

Action Plan: To look at the feasibility of arranging evening surgeries.

 The Patient Group asked why it was difficult to be referred to a London hospital when the Government states that patients have free choice. We advised the Group that referrals to London hospitals cost much more than local referrals and so we are encouraged to refer patients to local hospitals. The Group asked if the Clinical Commissioning Group could produce a leaflet to explain their commissioning decisions.

Action Plan: To ask Chiltern CCG to provide a leaflet to explain commissioning decisions – particularly about referrals to London hospitals.

- The new local 01494 telephone number was discussed. The Group were pleased that this had been done as call charges to local numbers are included in inclusive phone packages.
- On line services for repeat medication and booking appointments were discussed. It was agreed that will lead to improvements to the service we provide but more patients need to be told about it.

Action Plan: to give application forms for on line services to local pharmacies to hand out to patients collecting prescriptions.

There was discussion about identification of carers.

Action Plan: to develop new ways to identify carers – possibly develop a carer's passport that would help carers to access services more easily.

 Hospital transport services were discussed and who is entitled and who patients should call for help if they are not entitled to NHS transport services.

Action Plan: to provide patients with information about who is entitled to hospital transport and details about the Transport Hub if they are not entitled to use hospital transport.

Improving communication between the surgery and patients was discussed.

Action Plan: The Patient Group will set up a sub group to discuss ways to improve communication. The Group agreed to help compile practice newsletters.

If you are interested in joining our patient group and having your say in how we develop patient services, please let us know. You are welcome to join us in person or via email.

Appendix A: Minutes of the Patient Group meeting on 12th March 2014

Dr A C Dellow & Partners

Patient Participation Group Meeting 12th March 2014

Attended by:

Dr Andrea Wood (AW)
Joyce Hayes – Practice Manager (JH)
Fiona Bingham – Senior Receptionist (FB)
(MC)
(LH)
(DL)
(BA)
(BH)
(NF)
(HB)
(AD)
(GF)
(KS)
(SC)

Apologies: EV, TM, CT, DF, RS, TR, JL, DL, LM, JL, SR

Fiona Bingham/Dr Wood (FB/AW) introduced the meeting and thanked members of the group for attending. All members introduced themselves as there were several new members to the group.

Minutes from the previous meeting

(BH) asked how many doctors work full-time and how many part-time. Joyce Hayes (JH) explained the session system and how many each doctor works. She also explained forthcoming changes as Dr Thompson is retiring at the beginning of April and the practice is taking on two new doctors. JH and AW explained the differences between partners and salaried GPs and AW told the group that whether the doctor is salaried or a partner doesn't make any difference for the patient. BH said that you never get appointments to see the same doctor. BA felt that was an unfair comment as you can ask to pre-book an appointment with the same doctor. Several members of the group were unaware that it is possible to pre-book and also that the practice has an early surgery on Mondays and a surgery with one GP on Saturday mornings. JH/FB reported that this information is on posters, on the Practice's website and is frequently posted in the newsletter. JH/FB explained the difficulties in communicating such information to all patients.

GF asked if patients should always see the same doctor. AW explained that, ideally, you should see the same doctor for an on-going problem but any of the doctors can help because patient records are all on computer.

JH updated the group on the new telephone system, electronic prescribing and on-line booking of appointments (Vision on-line). FB stressed that for

confidentiality reasons patients need to register for Vision on-line using individual email addresses and not shared accounts.

Patient Questionnaire & Action Plan

The group discussed the results of the patient questionnaires and comments made by patients. JH explained the framework for the scores. One comment was that there should be privacy when using the blood pressure machine in the waiting room and the group discussed placing this machine behind a screen. Another comment was about patients' names being displayed on the information screen when the doctors call patients for consultations. The group asked if patients could be given a number but JH explained that this would be difficult to implement as some people use the auto check in screen and others check in at the reception desk.

AW asked the group for feedback on the new information screen. JH said that the practice wanted to keep the screen looking professional with the information displayed. (MC) said that the surgery's own presentations would keep it more real. (KS) suggested using pictures drawn by local children and the group were very keen on this idea. It was suggested that the screen should be used to display information regarding the surgery's extended hours.

KS asked if in the future the GP's would be part of a 7 day week service. AW said that the surgery already has extended hours and there is an out of hours' service when we are closed. AD asked if the surgery had considered an evening surgery. JH explained that evening surgeries were tried some time ago but there had been concerns about security as funding had been given to the practice for only for one doctor and one receptionist to work. MC asked if GP's could be recruited to works evenings.

The group asked how the practice is funded – AW explained capitation payments and the Quality and Outcomes Framework (QOF) payments.

JH asked the group for comments about the results of the survey and what aspects of our service need to be improved. AD felt that the scores were around the benchmarks on most questions except for the telephone system. The group discussed ways to improve survey results. AW said that it should be easier to contact the surgery by telephone if more patients book appointments on-line. (LH) suggested that forms for signing up to Vision-on-line and flyers about Sunrise and Saturday surgeries are handed out to patients coming into the surgery. She said this system was successful with patient questionnaires.

The group discussed the use of emails to confirm appointments. Text message reminders are currently sent out to patients whose mobile phone numbers are known. The group also asked if emails could be used by patients to contact the surgery with queries. JH felt that the workload that this would create would be unmanageable. MC asked if emails could be directed through a central service but it was pointed out that there is no funding for this. JH said that emails might be used at some point in the future, but we don't have the resources to provide a service at present. JH updated the group on the new tele-health service called Flo which monitors patients' blood pressure readings using text messages.

There was a discussion about referrals and patient choice. (NF) said that the Government has stated that patients can choose which hospital they attend but doctors don't want to refer to London teaching hospitals. AW explained that the London hospitals charge higher fees than local hospitals for the same service. Chiltern Clinical Commissioning Group (Chiltern CCG) guidelines ask doctors to refer to local hospitals whenever possible. The group would like Chiltern CCG to produce a leaflet to explain commissioning decisions.

FB asked the patient group to suggest questions for the next patient questionnaire.

The following actions were decided by the group:

- To form a sub-group to come up with communication ideas
- To put the information regarding early morning and Saturday surgeries on the display screen
- To issue flyers about early morning and Saturday surgeries with prescriptions.
- To give patients more information about the out of hours service so that they only go to A&E for medical emergencies.
- To use a shorter survey in future and to word questions differently such as "Did you know that you can pre-book appointments?"
- To develop services on line and, hopefully, improve patient satisfaction with phoning the surgery.
- To move the waiting room BP monitor to a more private location.
- To hand out flyers regarding the opening hours in the surgery
- To use volunteers to ask patients to update phone numbers
- To look at the feasibility of an evening surgery.

Next Meeting: to be arranged