

Mountfield Surgery Local Patient Participation Report 2013/14

Structure

The surgery started to develop a Patient Participation Reference Group (PPRG) in the autumn of 2011 so that we can work closer with our patients and improve our service where applicable. The group is only open to registered patients.

There are currently 5 members of the group. There were 3 males and 2 females. The age range was between 55 and 85. The ethnic categories were White British and White Other.

Invitations to join the PPRG were sent to patients with a current email address and by posters within the surgery's waiting room and reception area.

Areas of Priority

The group felt that the main priority is to maintain the very good access to see a doctor and the care and attention that patients currently receive.

Patient Views

The proposed surgery patient survey was based on the GPAQ version 4 developed by the Universities of Manchester and Cambridge. This was circulated to all members for comments. Additional questions regarding the walk-in clinics, length of registration and carer status have been included as a result of the PPRG views .

During the months of December 2013 and January 2014, patients who attend the surgery were asked to complete the 4-page survey.

It was acknowledged that this excluded housebound patients and patients who use the practice infrequently. However Dr Robinson said that all patients on the vulnerable list are reviewed monthly and contact is made if no communication/correspondence is received at the practice for at least 6 months. This channel allows patient comments to be made directly to the GP/nurse

Survey Discussion and Results

The survey results were collated, summarized and discussed with the PPRG members on 21st March 2014. See Appendix 1.

Recommendations

The patient survey was well –received.

Progress on last year's Action Plan

Area	Agreed Action	Outcome
Patient Confidentiality	Poster to be put up at reception desk to advise that patients can request to speak on confidentiality matters in a private area away from the reception	This has been carried out
Communication	Poster to be put in the waiting room reminding patients to be considerate if coming to the surgery with cough and cold symptoms	This has been carried out
Communication	Email addresses to be asked on new patient registrations and existing patients presenting at the surgery	The database is increasing
Communication	More information to be put on the practice website to improve communication. Poster to be put up in waiting room	Ongoing
Communication	Update patient leaflet	Ongoing
PRG	Arrange the next PPG meeting for a weekday evening slot	This was not possible due to members commitments

Issues

1. Premises

The practice is housed in a converted semi-detached corner house, with extensions at the side, the back and in the loft area. There are 3 consultation rooms and 1 treatment room on the ground floor, with disabled access via a side entrance. It was recognized that while the building is fit for purpose, it is not purpose built and as such there are limitations on the number of doctors and nurses who can practice, with the upper limit on patient numbers about 4,500.

The practice is registered with the Care Quality Commission (CQC) with effect from 1st April 2013. It is expected that the surgery will have an inspectorate visit in 2014 or 2015 as part of the standard 3 years cycle. The visit will involve an assessment against 28 Standards of Quality and Safety (of which 16 are classed as “Essential”). The safety and suitability of premises is one of the essential standards.

PPG members were asked if they would like to present at such a visit and all agreed that this was a good idea, personal commitments

2. Waiting room area and times

There is poster in the waiting room to explain the patient benefits in the walk-in surgeries in the mornings and the booked appointments during the day. Patients are advised to consider the most suitable type of appointments for their issues i.e. simple, straight forward, non urgent problems are more appropriate in the walk-in clinics while more complex ones should be booked appointments.

Group members felt morning access was very good and not limited to discussing only one problem to see the doctor or nurse. This prevented patient anxiety and possibly unnecessary visits to the walk-in centres and local A&E departments.

During open access in the weekday mornings, the waiting room area can become overcrowded. While every effort continues to be made to keep waiting times down to a minimum, it is recognized that on occasions this is unavoidable such as a doctor being called out on an emergency.

Nevertheless waiting patients are always informed by receptionists if surgeries are running late.

The waiting room is relatively small and last year concern was raised about some patients who sit down with cough and cold symptoms with apparent non consideration for others. This is very unpleasant for other patients sitting nearby. There was only one comment this year, possibly due to the receptionists being more pro-active in alerting those patients and advising them accordingly

The availability of the small screen TV and magazines in the waiting room is welcomed by the majority of the patients.

3. Patient Confidentiality

This can be an issue, especially at the reception desk when patients are queuing to speak, as a result of the building configuration. Patients are always reminded to ask the reception if they wish to discuss any matter in a private area away from reception.

Also patients who call on the telephone for results, other patients at the reception desk can overhear the receptionist on the phone. This was discussed at a staff meeting during the year and receptionists are reminded to be aware of this. Group members were again assured that any abnormal test results are provided to the patient directly by the doctor and never by the receptionist

4. Communication

The practice leaflet provides information to new patients on registering with the practice. The practice website www.mountfield.gpsurgery.net provides information about the practice i.e. doctors, opening hours, location, services, etc.

The practice website is maintained by the Practice Administrator and sometimes perhaps updates are not as regular as we would like to continual workload pressures. Additionally information on all GP surgeries as well as hospitals and dentists can be found on the NHS Choices website www.nhs.uk

The IPLATO text messaging system is used by the practice for patients supplying their mobile numbers to remind them of appointments/ recalling in a similar way to the SMS service currently offered by other healthcare providers.

5. Repeat Prescriptions

Email addresses are used for the repeat prescription service only at present. The overriding concern for the GPs is that convenience can never take precedence over clinical governance i.e. if patients email questions and/or issues and the respondent clinician is not available to answer and if the patient is not pro-active, then the medical issue could become acute or worse.

The planned introduction of Electronic Prescription Software Part 2 (EPS2) in May to the surgery, will allow the option to electronically send future repeat prescriptions to chemists of the patients' choice. Patients will be offered the opportunity to register for this scheme once it is up and running. This will eventually replace the need for all printed FP10 green coloured prescriptions to be picked up/sent by post to the patient. The group felt that was a good idea

6. Summary Care Records

The surgery's patient medical records system has now been upgraded to a web based service. Members expressed concern about the upload of their GP summary care records onto a wider network, accessible outside the practice. There was also concern that patients had not received information about the project and only knew of this national project. The group was assured that the care data encompassing patient care, community care, primary and secondary care together with hospital care, was secure and non patient identifiable

7. Car Parking

It is recognized that parking on Mountfield Road and surrounding roads can be difficult at times due to the nearby schools on East End Road. The area is not a Controlled Parking Zone and there are currently no plans to change this. The presence of a disabled parking bay in Holmwood Gardens at the side of the premises during surgery hours is very helpful Patients are

reminded not to park over people's drives. There is some short time difficulty in parking when children are leaving the local schools in East End Road in the middle of the afternoon

8. Standards of care

The practice has a reputation for providing a high level of clinical care. Issues such as accessing test results and obtaining repeat prescriptions do appear as being less than satisfactory on occasions. Sometimes however private/hospital instigated prescribed drugs and medication are not always on the Barnet CCG formulary list and as such cannot be prescribed without reference first to Pharmaceutical Advisors employed by Barnet CCG, which may result in a substitute being prescribed for the same purpose. This policy has been in place for some time

9. Out of Hours providers

The group was reminded that the current GP contract means that the out of hours services run from 6.30pm to 8.00 am on Weekdays and over the weekends and bank holidays. The first point of communication is NHS 111 and not Barndoc the local provider, although 111 may refer the patient to Barndoc OOH service, if appropriate. This has been updated on the website.

10. Hospital referrals and secondary care appointments

When discussing options for secondary care with patients, the doctors will explain the current position with regard to any changes instigated by Barnet CCG who are responsible for the majority of the commissioning on the local area.

Currently routine referrals are made through the Referral Management Service, except urgent and suspected cancer ones. Some referrals are rejected because they are classed as low priority treatments. There is an appeal process but even then it can still be rejected. These decisions are in part made due to budgetary constraints across the NHS nationally. In those circumstances, referral letters for private consultants are available to those patients who wish to proceed down this route. The website for Barnet CCG is www.barnetccg.nhs.uk for further information.

11. Pharmacists

Barnet CCG are piloting a minor ailments scheme in pharmacies. Plans to roll out across Barnet have been put on hold. Members felt that a pharmacist could only replace a GP/nurse for limited number conditions but were happy to ask for informal advice

Action Plan

Area	Agreed Action	Action by Who	Action By When
Premises	The waiting area and patient toilet on the ground floor will be redecorated	Dr Robinson and Practice Administrator	30/09/2014
Patient Confidentiality	This should also be reinforced when patient registered. Patient should always be made aware that confidential issues can always be discussed in a private area away from the reception	Receptionists	30/4/2014
Communication	Email addresses to be asked on new patient registrations and existing patients presenting at the surgery	This will be reinforced at the next staff receptionists' meeting	On-going
Communication	More information to be put on the practice website to improve communication. Poster to be put up in waiting room	Dr Robinson and Practice Administrator	On-going
Communication	Update patient leaflet	Dr Robinson and Practice Administrator	30/04/2014
Summary Care Record project	Poster to be put up in waiting room with a contact number (0300 4563531) for patients (and website)	Dr Robinson and Practice Administrator	30/04/2014
PRG	To encourage younger patients to join the group. Poster to be put up in waiting area	Dr Robinson and Practice Administrator	30/04/2014

Opening Hours and Access

	Opening Hours	Appointments Sessions	Appointments Sessions
Monday	8.00 am – 6.00 pm	8.00 – 10.30 am*	2.30 – 5.30 pm
Tuesday	8.00 am – 6.00 pm	8.00 – 10.30 am*	2.30 – 5.00 pm
Wednesday	8.00 am – 6.00 pm	8.00 – 10.30 am*	3.30 – 5.00 pm
Thursday	8.00 am – 6.00 pm	8.00 – 10.30 am*	2.30 – 5.00 pm
Friday	8.00 am – 1.00 pm	8.00 – 10.30 am*	

During these hours patients can make appointments by telephone or face to face visit or * walk-in to the open access clinics in the morning

Extended Hours Arrangements

This is an added service which the practice has agreed to provide in agreement with NHS England. The times are agreed at the beginning of April each year

	Extended Hours
Monday	7.30 – 8.00 am
Tuesday	7.30 – 8.00 am
Wednesday	7.30 – 8.00 am
Thursday	7.30 – 8.00 am
Friday	7.30 – 8.00 am

15 minute booked appointments are available in advance

Appendix 1

Mountfield Surgery Notes from the Patient Reference Group Meeting 21st March 2014

Introduction

The objective of the meeting was to discuss the results of the 2013/14 patient survey and the desire of changing services to better reflect the needs of patients where possible.

Patient Survey Results Summary

The survey used was the GPAQ version 4 developed and validated by the Universities of Cambridge and Manchester and in line with IPOS/MORI National Patient Survey. There were 100 respondents, representing approximately 2.2% of the practice population (2013: sample was 100)

Questions 1 – 11: About the visit to the GP today

	Responses	Comments
Q1: How good was the GP at putting you at ease	98% said very good or good (2013: n/a)	
Q2: How good was the GP at being polite and considerate	99% said very good or good (2013: n/a)	
Q3: How good was the GP at listening to you?	95% said very good or good (2013: 87%)	
Q4: How good was the GP at giving you enough time	90% said very good or good (2013: 83%)	5% said poor
Q5: How good was the GP at assessing your medical condition	88% said very good or good (2013: n/a)	5% said very poor
Q6: How good was the GP at explaining your condition and treatment	93% said very good, good or satisfactory (2013: 84%)	4% said poor or very poor; 3% said that this question did not apply
Q7: How good was the GP at involving you in decisions about your care	88% said very good, good or satisfactory (2013: 83%)	10% said that this question did not apply
Q8: How good was the GP at providing or arranging treatment for you	80% said very good, good or satisfactory (2013: n/a)	17% said that this question did not apply
Q9: Did you have confidence that the GP is honest and trustworthy	99% said Yes, definitely or to some extent (2013: 93%)	

Q10: Did you have confidence that the doctor will keep your information confidential	96% said Yes, definitely or to some extent (2013: 93%)	
Q11: Would you be completely happy to see this GP again	98% said Yes (2013: n/a)	2% said No

Questions 12 – 25: About Reception and Appointments

	Responses	Comments
Q12: How helpful do you find the receptionists	99% said very or fairly helpful (2013: 99%)	
Q13: How easy is it to get through to someone at the practice on the phone	96% said very or fairly easy (3% have not tried) (2012: 96 %)	
Q14: How accessible is a clinician by phone	70% said very or fairly easy (20% have not tried) (2013: 74%)	
Q15: Can you obtain an urgent appointment on the same day	78% said Yes (2013:75%)	
Q16: How important is it to book appointments	63% said Yes (2013: 61%)	
Q17: How accessible are booked appointments	60% said very or fairly easy (13% have not tried) (2013: 74%)	There has been a steady influx of new patients registering at the practice from a local practice which closed down in December 2013
Q18: Methods of booking appointments	98% said in person or by phone (2013: 96%)	
Q19: Preferred methods of booking appointments	95% said in person or by phone (2013: 99%) 20% would like an on-line option (2013: 33%)	The group continues to express a preference for face to face or using the phone by acknowledged the need to look at on line
Q20: Access to see a particular doctor	68% said within 24 hours and a further 13% said with 2 – 4 days (2013:59%:16%)	
Q21: Rating	90% said excellent, very good or good (2013: 82%)	
Q22: Access to see any doctor	88% said within 24 hours and a further 5% said with 2 – 4 days (2013: 86%: 7%)	

Q23: Rating	93% said excellent, very good or good (2013: 96%)	
Q24: Waiting times to start appointments	68% said within 20 minutes (2013: 68%)	The surgery offers two options – walk-in and appointments
Q24a: Waiting times to start appointments for walk-in clinics	55% said within 30 minutes (2013: 52%)	
Q25: Rating	88% said excellent, very good or good (2013: 74%)	
Questions 26 – 29: About Opening Hours and Choice		
Q26: Convenience of current opening times	85% said Yes (2013: 87%)	The surgery has extended opening hours appointments between 7.30 and 8.00 am Monday to Fridays, with 15 minute slots
Q27: Additional opening hours	37% (2013: 29%) said weekend openings, 5% (2013: 20%) said after 6.30pm and 1% (2013: 18%) said before 8am	Q27 was only applicable to those who answered No to Q26 but many who had answered Yes to Q26 put down their preferences as well
Q28: Preferred GP of choice	50% said Yes (2013: 50%)	
Q29: Seeing/speaking preferred GP of choice	90% said always or most of the time. (3% have not tried) (2013: 61%)	Q29 was only applicable to those who answered No to Q28 but some who had answered Yes, put down an answer to Q28

Questions 30 – 36: About Communication and Clinical Care of Nurse

	Responses	Comments
Q30: How good was the nurse you last saw at putting you at ease	96% said very good or good (2013: 83%)	
Q31: How good was the nurse at giving you enough time	97% said very good or good (2013: 88%)	
Q32: How good was the nurse at listening to you	96% said very good or good (2013: 85%)	
Q33: How good was the nurse at explaining your condition and treatment	83% said very good or good (2013: 84%)	

Q34: How good was the nurse at involving you in decisions about your care	73% said very good or good (2013: 78%)	
Q35: How good was the nurse at providing or arranging treatment for you	75% said very good, good or satisfactory (2013: n/a)	25% said that this question did not apply
Q36: Confidence and trust	97% said Yes (2013: 87%)	
Q37: Help to understand health problems	95% said very well (2013: 87%)	3% said not very well
Q38: Help to cope with health problems	98% said very well (2013: 85%)	3% said not very well
Q39: Help to keep healthy	85% said very well (2013: 77%)	3% said not very well
Q40: Overall experience of surgery	95% said excellent, very good or good (2013: 96%)	The aim is to maintain this high level
Q41: Surgery recommendation	98% said Yes (2013: 95%)	The aim is to maintain this high level

Questions 42 – 48: About Responders

	Responses	Comments
Q42: Male/Female ratio	40/60 (2013: 40/56)	
Q43: Age Range	Under 16: 2 (2013: 0) 16 – 44: 20 (2013: 31) 45 – 64: 40 (2013: 39) 65 – 74: 25 (2013: 17) Over 75: 12 (2013: 11)	
Q44: Long standing condition	40% said Yes (2013: 46%)	
Q45: Ethnicity	White: 80% (2013: 82%) Black/Black British: 5% (2013: 1%) Asian/Asian British: 7% (2013: 7%) Mixed: 3% (2013: 0%) Chinese: 0% (2013:0%) Other: 5% (2013: 6%)	This closely reflects the make up of the current practice list
Q46: Employment status	Employed: 68% (2013: 59%) Unemployed: 2% (2013:1%) In Education: 2% (2013: 1%) Long Term Sickness: 3% (2013: 4%) Carer/Not Working: 2% (2013:7%) Retired: 18% (2013: 24%) Other: 5% (2013: 2%)	
Q47: Length of Registration at the Practice	Under 6 months: 12% Under 1 year: 13% Between 3 and 5 years: 10% Over 5 years: 65%	Reflects current churn rate of patients registered at the practice
Q48: Carer Status	5% said Yes (2013: 5%)	