

# **Marsh Medical Practice**

## **Patient Participation Group Report 2014**

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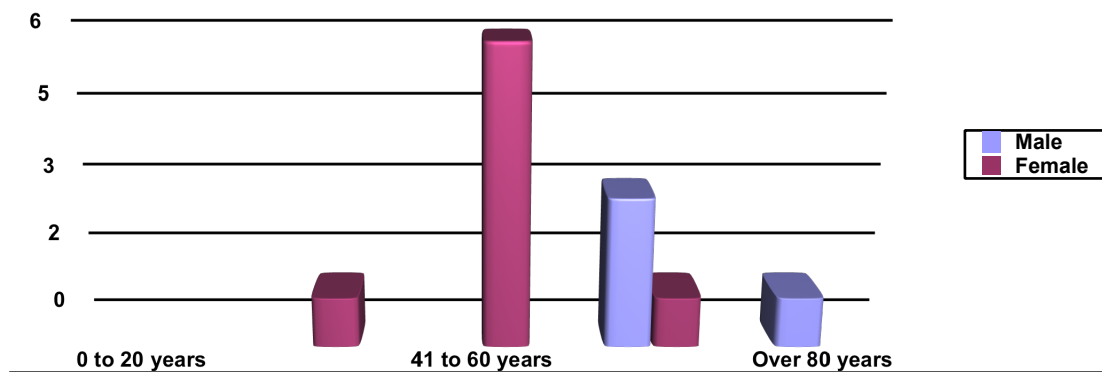
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### **1 About the Patient Participation Group**

The Marsh Medical Practice, Patient Participation Group is now in its second year and has gone from strength to strength now having 12 patient members and 5 practice members. The members are fully representative of the practice covering both geographical areas, North Somercotes and Manby. The profile of the members covers in age from late thirties to the eldest member being 85, both male and females are represented and are representative of the practice population, full profiles of some of the members are available on the practice website.

#### **Graph showing male/female/age - breakdown of PPG members**



We are always keen to recruit new members to the group and advertise the group via our practice website and poster displays at both sites. We have also used the opportunity to advertise for new members at the practice drop in flu clinics which are held in the local village halls. Last year the PPG members raised the PPG profile by helping out at the flu clinics, baking cakes and serving tea and coffee, proceeds raised were donated to the local Mindfulness Group. We have also tried to encourage younger members to join the group by advertising on Facebook.

## 2 Local Practice Survey

### a) Priorities to be covered in the survey

At the PPG meeting of July 2013 Lorraine Green the Practice Manager discussed with the PPG members, the requirements and priorities of the practice survey and explained that the survey would take place later in the year. The members identified priorities that need to be covered in the survey and Lorraine explained that the draft survey would be emailed out to all members for their amendments and approval. The survey priorities were also discussed at the October meeting and it was agreed that the final draft be merged with the doctor's appraisal feedback questionnaires and emailed to group members for their final approval.

The group agreed that the wording of some of the questions needed amending, that some description was needed as patients might not know what a dosette box was and the scoring of questions needed simplifying.

### b) Methodology used in running the survey

The practice receptionists encouraged the patients to complete the paper format of the survey explaining that it would not take long to complete and the reasons why the survey was being conducted. The receptionist made sure the patient was comfortable in completing the survey with a clip board and pen. 120 surveys were completed although some questions were missed or misread by the person completing the survey. We asked for opinion on the services provided by the team at the practice, asking them to make additional comments if they felt strongly about any point. The surveys were handed out to patients over a six week period in November and December 2013.

The compiled results are available in graph format in the waiting rooms at both surgeries and on the practice website.

## 3. Over view of the results and agreed actions of the survey

a) Presentation of the survey results

At the January PPG meeting Lorraine Green, Practice Manager presented the findings of the survey to the group members. It was presented via a power point presentation during which the practice asked for feedback from all PPG members with respect to the results and comments. Lorraine also sent the survey results to all members via email, the results had been converted into graph format.

Lorraine also presented the surveys results to staff at a full practice meeting in February 2014.

b) Consultation on the findings and agreed actions.

Overall the group thought that the results were very good and highlighted the fact that generally patients are satisfied with the quality of the service provided by the practice.

The first questions were around the helpfulness of the receptionists and how easy is it to get though to the surgery on the telephone. It was agreed that the results were very good and the comments reflected a small minority of the patients surveyed.

Lorraine explained to the group that a new telephone system is due to be installed in the coming weeks. This system will be tailored to the needs of the patients and keep them updated as to how their call is being handled. It will also take away the system of telephone options and the person calling will be directed straight to a receptionist.

The survey questions then asked for feedback on ordering tablets and methods of ordering tablets. It did include a question about the patient's knowledge of the weekly blister pack system.

All patients giving their name requesting dosette boxes have been contacted by the surgery.

One or two comments did mention the fact that the telephone ansaphone system for ordering medication was being discontinued from 1.1.14; this had previously been discussed at the PPG meetings. It was agreed that patients concerned should be put at ease by further advertising of alternate ways of ordering medication.

We then asked patients for feedback on the surgery opening times and asked if the surgery was open at a convenient time. The overall response was very positive but some comments indicated that they

would like to see a doctor over the weekend or later in the evening. At present the surgery does not offer extended opening times.

One of the PPG members did highlight his concerns over the fact that Manby surgery is closed on Tuesday and Thursday afternoon. Lorraine did stress that the doctor's sessions are based around giving a complete service to both sites adding that it would be discussed with the doctors. It was also noted by another group member that some equalities can also be said in respect of the North Somercotes surgery. Lorraine added that apart from Cryotherapy all services provided by the practice are currently provided at both sites to all patients equally.

The survey questions then went on to ask patients how easy it was to get an appointment or speak with the Nurse Practitioner or the doctor. The overall response indicated that there was not a problem but one comment did imply that one patient surveyed had had a problem getting to see the doctor in the past. We then asked about the consultation with the Nurse Practitioner or doctor and how good the Nurse Practitioner or doctor was at involving the patient in their care. Overall the response to questions was very good; one response indicated how good they thought Heather Beer the Nurse Practitioner was.

In respect of waiting times to see either the Nurse Practitioner or the doctor, the feedback did indicate that there are issues with waiting times especially with the doctor. Discussion with the PPG members raised issues around keeping the waiting room patients informed of waiting times and installation of a clock. The survey comments were around the fact that there are no longer any magazines or toys in the waiting room, there is no bin for disposal of tissues in the waiting room and at times the patients can hear the receptionists answering the telephone.

It was agreed with the PPG members that a clock would be put up in both waiting rooms and laminated posters placed in the waiting rooms explaining why, due to infection control, there are no longer any toys or magazines in the waiting rooms. These are now in place along with the bin for disposing of used tissues.

With regards to waiting times it was asked by the PPG members that white boards are installed in the waiting rooms so that waiting times can be updated by the reception staff. These are now purchased and ready to go into place. The surgery has also made enquires into a notice board TV which could also indicate the length of waiting time to see the doctor or nurse.

The issue of the waiting room being so close to the receptionist taking telephone calls has been made a priority for the practice. There will be additional training for all staff working on reception.

The practice has also highlighted to patients, by way of laminated posters, the fact that for one ten minute appointment, only one patient problem should be discussed. A longer appointment should be booked for patients with more than one issue. This should help towards reducing waiting times for the doctor.

Finally the survey asked for overall satisfaction with the surgery and would the patient answering the survey question recommend the surgery to someone who has just moved into the area. The response indicated that overall patients are either very satisfied or satisfied with the surgery; the overwhelming response was that they would recommend the surgery to someone who has just moved into the area.

#### **4 Summary of priorities and agreed actions**

New telephone system – ordered and being installed April 2014

Advertising in place – Indicating to patients how they can re-order repeat item medication.

Advertising in place – Dosette boxes to patients within practice protocol.

Advertise in place – Infection control measures, giving clear understanding why the surgery no longer has toys or magazines in the waiting room.

Discussion with doctors in respect of practice extended hours.

Waiting room clocks – in place

Waiting room waste bins – in place

White boards for indicating waiting times – ready for installation

Notice board TV – consultation with company providing in progress

Priority discussion with doctors in respect of waiting room being so close to reception.

Additional training (confidentiality) for staff working on reception.

Laminated posters indicating, one ten minute appointment, one patient problem- in place.

#### **5 Current access details**

Core services are provided between the hours of 8.00 am to 6.30 pm Monday to Friday excepting bank holidays. Appointments are available throughout the day and be made either by telephone call to the surgery or in person. The telephone lines are closed for lunch between the hours of 1.00 pm and 2.00 pm, patients can still access the surgery in an emergency by pressing option 1.

Patients can access on line ordering for repeat item medication 24 hours per day.

The surgery is normally closed one afternoon each month for training, patients can still access the doctor in an emergency during this closed afternoon.

The surgery at present does not offer extended opening times.

## **6 Access to survey findings**

PPG members, those who answered the survey and the wider population of patients can access this report and the actual survey findings by visiting the practice website or visiting the surgery. Laminated copies are available at both Manby & North Somercotes.

All other interested parties (CCG, HealthWatch) can view the report and actual survey findings by visiting the practice website.