



LOCAL PATIENT PARTICIPATION REPORT MARCH 2014

Membership of the Watling Medical Centre PRG

Our members include a group of volunteers who include working and retired people, have family members with learning or physical disability, suffer from chronic illness, have young children and from different ethnic backgrounds including White British, Asian, Afro-Caribbean, and Jewish.

Steps taken to ensure the PRG is representative of the Practice's registered population

The Practice identified groups of people whom they would like to participate in the group. The groups included patients with a variety of health conditions/needs, ages, ethnicities and socio-economic backgrounds.

Invitations to join were made in writing and by personal invitation.

Many people were unable to commit their time to joining the group, or offered to join but were unable to engage.

Groups of patients who are not represented include Eastern European patients, Middle Eastern or Far eastern patients and those with Mental Health problems.

The Practice will continue to try to include people from these groups.

Steps taken to reach agreement on the issues which had priority to include in the patient survey

The patient survey was discussed at the first meeting of the PRG in 2013. The Chair invited submission of ideas to consider.

The PRG asked the Practice to provide details of the topics which generated complaints for the Practice.

The main complaints related to problems in making an appointment.

Members made the following suggestions:

Survey the level of knowledge that Diabetic patients have regarding their treatment and accessing services.

Look at why patients attend A&E

Survey patients regarding their problems making appointments, their experience of the services provided and their understanding of other providers of health care other than doctors.

The latter topic was chosen as it related to the problems identified from the Practice complaints review and it was an area the Practice could take direct action on without external confounding factors.

The Chair of the PRG designed the Survey questions and circulated this to the PRG for comment.

Obtaining the Views of the Registered patients

The Practice gave the survey to patients attending the Burnt Oak and Stanmore surgeries over a 3 week period, posted copies to all patients known to be housebound at both sites, enclosing an SAE, emailed the survey to all patients who had previously given their email address for the purpose of participating in patient surveys and to all those who were part of the distribution list for the PRG itself and put the survey on the Practice website.

Discussion of the Survey by the PRG

The survey results were analysed by the Chair and circulated to the PRG by e-mail and post.

The survey results were emailed to Partners and staff of the Practice.

Comments were invited from all parties, inviting them to suggest proposed action plans for the forthcoming year.

The new Chair of the PRG and the Practice Manager met to collate and discuss the feedback from the PRG and to draw up an action plan based on the patient views.

The Action plan was e-mailed and posted to the PRG to confirm agreement.

Agreed Action plan

The following was agreed as the Action Plan:

Improvements to Reception and Telephony

- Dedicated staff to answer telephones
- Separate reception from telephony
- More staff answering calls at peak times
- Answer phones from 8am (stagger working patterns)
- Open at lunchtime (phones and desk)
- Redesign of Stanmore reception area
- Give results from 11am for rest of day (not stop at 5pm)
- Training and development of reception staff to direct patients to most appropriate service
- Investigate possibility of increased flexibility in clinic times eg early opening (commuter clinic), or changing extended hours day at either site
- Investigate possibility of setting up Minor Ailments Scheme for Stanmore patients

Improvements in disseminating information to patients regarding services& updates, promoting health, wellbeing and self-management

- Open Days/Education Days for patients (LBO in Burnt Oak – find a Stanmore venue)
- Collect email addresses to send updates
- Set up secure messaging for patients (Patient Access)
- Clarify information re pre-bookable appointments
- Create an information leaflet (appointments available, how to book, OOH, emergency services) – review annually
- Create a patient newsletter (PRG led) – every 4 months

Improving disabled access& access for pushchairs

- Investigate possibility of installing an automatic door at Stanmore.

The following was not agreed:

- Try to change parking facilities at Stanmore: eg patient parking permits, because this has been tried with no success recently. Changes to staffing may allow for use of some staff bays for disabled patients in future.

Recruiting extra Drs because this not financially viable for the surgery and the aims of the surgery are to increase the skill mix of the clinicians including nurses and healthcare assistants, and to direct patients to the most appropriate person/service, including community pharmacists, third sector organisations (Health & Social Care Navigator), and promoting wellness.

- Weekend opening – it is not economically viable at the present time.

Actions from Patient Survey 2013

The conclusions of the 2013 survey were as follows:

CONCLUSION

Responses given by patients who participated in this survey give some insight into what patients value and where they would like changes to be made. On the whole they appreciated the service provided by the receptionists and the receptionists should be commended for this. In reviewing the responses, it should be noted that some of the matters mentioned are not under the control of the receptionists e.g. indicating how long patients will have to wait before seeing the doctor; the availability of parking; getting through to the surgery by telephone during peak times.

The issues raised by the patients, would be a valuable resource for re-examining policies and procedures to see whether they should be continued, reinforced or changed. However, in carrying out this review, one must not lose sight of the fact that only a few of the patients registered at the Practice participated in the survey. Whilst their views are useful for indicating how some patients feel about services provided, they may not be adequately representative of patients registered at the Practice

You said...

This Survey (2013) showed that you said that on the whole the Receptionist provided a good service, but there were areas for improvement such as the manner of greeting and that it was difficult to get appointments when calling by phone, with some of you being unsure why the Receptionists asked you questions about your call.

We did...

As a result of this survey, the Practice has enrolled all its Reception Staff, including the Team Leaders, on a Customer Care Training programme designed to meet the local needs, in collaboration with other Barnet practices. So far half of the receptionists have received the training, with the remainder attending training by 3rd April 2014.

This has given the Receptionists the opportunity to meet other local Receptionists and discuss common issues as well as to receive customer care training.

The Practice Manager conducts pre and post training meetings with each receptionist in order to maximize learning, identify further training and development needs and to work with the senior staff in improving our own in-house training delivery and reinforcement of learning.

Individual Receptionists receive feedback regarding their performance if patients or managers raise any concerns.

The Practice has changed its telephone system to allow increased flexibility in answering the calls between sites and by staff members other than receptionists. The system will enable calls to be queued and includes messages of how patients may find other sources of help and information e.g. the website, and allows patients simply to leave a message if they wish to cancel an appointment.

The Practice has introduced online booking of appointments to relieve pressure on the phone lines. This was piloted with the PRG from October 2013 and rolled out from January 2014.

The Practice are engaging with the PRG to help patients understand the role of the receptionist in navigating the patient towards the most appropriate person for their care e.g. the minor ailments service or nurse clinics.

Our Practice Manager has written a bulletin for patients, which was published on the website and available for collection at the surgery, advising patients of important changes in the practice or service delivery. She will be working on making this a more regular publication, in conjunction with the PRG.

We have a new Nurse Manager who has developed an online Travel advice service, relieving pressure on appointments and the phones, with very positive feedback.

Outcomes

As a result of this, our Receptionists have a greater understanding of Customer Care, and our patient group is working on how we can disseminate more information to our patients about the services available and how best to use them.

We have achieved the highest use of the Minor Ailments service in the pilot project in Barnet.

Opening Hours of the Practice and methods of obtaining access

Monday - Friday 8.30am - 6.30pm (closed at lunchtime 12.30-1.30pm)
Except Stanmore - Thursday 8.30am – 5pm

Patients obtain appointments by telephoning, attending the surgery or booking online.

Extended Hours

Monday 6.30pm – 7.30pm at both sites

One Saturday per month at each site 8.30am – 10.30am

COPY OF THIS REPORT TO:

NHSE

PRG

PRACTICE (WEBSITE)

CCG

HEALTHWATCH

POSTER WAITING ROOM

NHS CHOICES WEBSITE