

## **Warmdene Surgery**

### **Patient Participation – Final Action Plan 2015**

The requirements of the Patient Participation Enhanced Service changed slightly in 2014-15 in that a patient survey is no longer a requirement. The new 'Friends and Family Test' has become mandatory with effect from 1<sup>st</sup> December 2014. This test has one basic question "How likely are you to recommend this GP practice to friends and family if they needed similar care or treatment" and needs to be followed by a further question of our choice. There are several companies nationally who offer a service to help with collecting and collating the responses to this and, following information provided by the Local Medical Committee, we have chosen a company called iWantGreatCare. There are several ways that patients can leave feedback:- log in online via iWantGreatCare website, click the link on the Warmdene Surgery website or complete the paper forms that are being handed out by clinicians and are also available in the waiting room or at the reception desk.

We chose to not only ask the mandatory one additional question but to also ask for other data as follows in order to obtain wider views from our patients:-

How likely are you to recommend this GP practice to friends and family if they needed similar care or treatment?

Were you involved enough in decisions made about your care and treatment?

Was the surgery clean?

Were the receptionists helpful?

Is it easy to get an appointment (either by telephone and/or at the surgery)?

My age is...

I am Male/Female

Do you have any long standing conditions?

What is your ethnic group?

We have had 62 responses since 'going live' with this at the beginning of December 2014. We are very happy to report that the majority have been extremely complimentary and our average score for the period is 5 out of 5. The issues raised were a tiny percentage of the actual responses however these are still valid and we have looked at the issues raised and put together a draft action plan.

Areas identified for improvement	Actions Planned/explanation of why no action being taken/details if already being done	Timescale	What evidence will indicate improvement
<p>Appointments – time spent with the clinician. 5% of respondents raised this as an issue with comments such as  “...sometimes more time is needed”  “...extend time to look at other aspects”  “...sometimes appointments are rushed”</p>	<p>The practice has recently started working collaboratively with 3 other local practices (Stanford Medical Centre, Beaconsfield Medical Centre and Preston Park Surgery) as part of a new initiative called Proactive Care. This involves looking at ways of innovatively changing the way general practice services are offered to patients ensuring that the best care is given by the best person to deal with the issue. It is hoped that by working more collaboratively and more effectively, for example employing additional staff such as a prescribing pharmacist for medication reviews, and directing patients to the most appropriate person will free up doctor time to allow longer consultations for patients most in need. If the actions described above do result in freeing up doctor time then the GP can make a longer appointment to see patients they think would benefit from this.</p>	<p>6-12 months</p>	<p>Longer appointments being available for patients with more complex needs</p>
<p>Getting an appointment/phone access – this has been an ongoing issue for the practice despite major investment in additional phone lines. We are glad to see that the percentage of people who still find this an issue has dropped dramatically (“getting through on the phone is improving”), however 5% of patients have</p>	<p>The practice is part of EPiC (extended primary integrated care) which is a pilot being run as part of the Prime Minister’s Challenge Fund. This means that we are able to access appointments at evenings and weekends with GPs and nurses which increases our capacity and gives patients more choice of appointment times. This helps with being able to offer more appointments and also helps patients who are unable to attend the surgery during normal working hours. These appointments are currently based at St Peter’s GP practice in Brighton but are due to move in the next few weeks to 175 Preston Road which is</p>	<p>3-4 months</p>	<p>Increased use of EPiC extended slots, community pharmacy and community navigator appointments</p>

<p>identified it as still being an issue with comments such as</p> <p>“Later appointments or Saturdays I work full time”</p> <p>“..unable to get through on phone”</p> <p>“impossible to get an appointment unless you are dying”</p>	<p>nearer for our patients and has parking. EPiC also gives patients access to appointments with Community Pharmacists who can help with any medication queries thereby freeing up doctor appointments for patients with other issues. Patients also have access to Community Navigators who can help with signposting patients to services that can help with social care needs. This all increases the services available to patients whilst freeing up doctor time to spend with patients in need of a consultation with them. We are just starting to use these appointments so hope to see an improvement in the next few months.</p> <p>Information about EPiC appointments to be added to the practice website (which is currently under review) and leaflets to be available in the waiting room informing patients of the service. This is in addition to ad-hoc informing of patients when they contact the surgery for an appointment.</p> <p>We have also recently enhanced our telephone system by introducing number options – press 1 for secretaries, 2 for results, 3 for appointments etc. This enables the system to divert patients who don’t need to speak to reception to the best person to deal with their call whilst freeing up reception lines for patients needing to make an appointment or with an urgent issue</p>		
<p>Reception staff – 3% of comments raised issues with the reception staff</p> <p>“receptionists can be a bit sharp</p>	<p>97% of respondents did not mention problems with reception staff and the good comments about the reception team far outweigh the negatives. We regularly speak to our reception team and remind them about the need to be polite and helpful to patients. They are our first point of contact and it’s</p>	<p>N/A but review future comments on a monthly basis in case of more issues</p>	<p>Retain high approval rating for reception team</p>

<p>and jobsworths”</p> <p>“receptionists don’t always notice people are waiting”</p>	<p>important that patients are helped as much as possible. Whilst we appreciate there is always room for improvement no action necessary at this time as it is felt that negative feedback to a team who have a 97% approval rating would be unfair and demoralising. Reception staff are given regular feedback of patient comments and training is undertaken when appropriate.</p> <p>There are normally 4 members of the reception team manning the front desk and answering phones in the back office. The Reception Manager has been made aware of the comments regarding help at the front desk and will make herself available to organise additional help as and when required, other workloads depending ie if other reception staff are all speaking to patients on the telephones there may be a delay in getting additional staff to the front desk. There is not enough demand throughout the day to warrant 2 permanent members of staff on the front desk however at busier times the Reception Manager will arrange for appropriate cover.</p>		<p>Fewer comments from patients about having to wait at the desk.</p>
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