

Rowe Avenue Surgery Patient Participation Group

May 2013 we began setting up a patient participation group.

Initially we decided to form a 'virtual' group.

We advertised on our patient noticeboard in the waiting room, on our website and actively encouraged both the reception and Clinical staff to ask patients opportunistically to agree to sign up for this and our patient survey.

On our sign up form we added additional information to ensure the group was a representation of our Practice Population – i.e. Age and ethnicity.

We also emailed and sent text messages to all our patients registered with these contact details and consented to us contacting them periodically, together with an annual survey.

At the time we had 5519 patients registered at the practice.

Distribution of Survey

1. Approximately 700 Text messages were sent to patients to ask if they would be happy to receive our survey.
2. Approximately 950 patients were also contacted by email to ask if they would complete our survey.
3. 100 surveys were sent to patients requesting by post.
4. 400 surveys were taken by patients to complete from a visit to the Surgery.

Therefore Approximately 2150 patients were asked to complete the survey, representing 38.9% of our Practice Population.

We then contacted CFEP – A recognised survey provider used previously by the Practice and agreed by the Partners and manager to use again.

Results

128 patients responded to the survey, 69 filled out a paper questionnaire and 59 completed a questionnaire online.

Overall the results from the survey were positive with some very positive comments about the practice, the staff and the services provided

The survey identified the top 5 of satisfaction as:

1. Respect shown
2. Confidence in Ability
3. Ability to listen
4. Warmth of greeting
5. Recommendation

The 5 weakest areas were identified as:

1. Seeing Practitioner of choice
2. Telephone access
3. Waiting time
4. See practitioner within 48hrs
5. Appointment satisfaction

Further analysis

The partners, together with the Practice manager met to discuss the report to further analyse the 5 weakest areas.

Other comments:

The survey highlighted:

1. 31% satisfaction with ability to see practitioner of choice compared to the national average of 58%
2. 41% of patient satisfaction with our telephone access compared to the national average of 62%
3. 45% satisfaction with our waiting times compared to the national average of 56%
4. 46% satisfaction of seeing a practitioner within 48hrs compared to the national average of 62%
5. 50% appointment satisfaction compared to the national average of 68%

IMPROVEMENTS AND ACTIONS TO ADDRESS 5 WEAKEST AREAS

Seeing Practitioner of Choice	To be discussed with the Patient Participation Group at next meeting
Telephone Access	Discussed at Partners meeting and to be discussed at Patient Group meeting To utilise the TV screen in waiting room to clarify the telephone access system To review telephone system – add answerphone message etc.

Waiting times	<p>To encourage the reception staff to update the waiting times on the board already in place behind the desk</p> <p>Self-check in informs patients of the wait – to display a notice to make it clearer for patients</p> <p>To discuss at Patient group meeting</p>
See practitioner within 48hrs	<p>To be discussed at Patient group meeting</p> <p>Practitioner rotas to be looked at – meeting already set up beginning of April to discuss</p>
Appointment satisfaction	<p>To carry out an appointment demand survey</p> <p>To review at surgery future planning meeting</p>

We then set about forming a Patient group to meet regularly at the Practice.

From the patients responding to the survey, 7 patients agreed to meet with the Practice on 19th February 2014.

The group met for the first time to discuss the patient survey and findings.

After some discussion regarding the way in which the survey was distributed to our Practice population it was decided in future to try and capture more of the population and we discussed the possibility of mailing the survey to all our registered patients.

A future meeting has now been arranged on 21st May to agree on the group constitution and discuss an action plan as above.