

BAGARYS MEDICAL PRACTICE PATIENT QUESTIONNAIRE ACTION PLAN MARCH 2014

Patient experience survey (GPAQ), eighth completed March 2014, merged practices Bradley and Low Hill 1.10.2012.

150 questionnaires sent randomly, 125 questionnaires returned, response rate 83%.

(previous completed questionnaires March 2010-2011-2012-2-2013/
October 2008/September 2007/October 2006/November 2005)

FINDINGS:

- Satisfaction with reception staff 96% (excellent 60/125; very good 30/125; good 30/125; fair 5/125)
- Satisfaction with opening hours 96% (excellent 55/125; very good 25/125; good 30/125; fair 5/125; 10/125 no changes weekends; 3/125; 7/125 early morning; 9/125 evenings-will review early morning opening and evening, we already have evenings one at each site)
- Continuity of seeing same doctor very good 84% (always saw same doctor 75/125; almost always 30/125; a lot of the time 5/125)
- Satisfaction with availability see particular doctor 93% (excellent 40/125; very good 46/125; good 30/125; fair 10/125)
- Availability of any doctor 95% (same day 68/125; next day 31/125; within 2 working days 20/125; within 3 working days 4/125; 5 or more working days 2/125 (there are doctors available, preference to wait to see particular doctor)
- Waiting times 98% (excellent 72/125; very good 45/125; good 5/125; fair 3/125)
- Satisfaction with phoning 78% (excellent 20/125; very good 23/125; good 55/125; fair 21/125; poor 6/125- new phone system. message handling via telephone out of hours service 8am-9am at each site)
- Satisfaction with doctors caring and concern 96% (excellent 75/125; very good 40/125; good 5/125)
- Quality of care provided by nurse 93% (excellent 45/125; very good 35/125; good 36/125; fair 9/125)
- Staff very helpful and listen to needs

ACTION PLAN NEXT 2 YEARS:

- We have continued to work very hard since 1st April 2012-March 2013 to now March 2014, updating the practices in line with Care Quality Commission standards and will continue to do and implement. CQC visit November 2013-good positive feedback. (There has been internal building work and new computer system merges, updated telephone systems, changes in clinical and organisation, in line with practice needs)
- Changes in healthcare and new commissioning groups, services provided at the practices will be depending on what is contracted and decided by new commissioning groups and NHS England – need more members for our patient group
- Reviewed telephone system to improve efficiency, more staff training and awareness of customer service.
Computer system has all data access from each site so appointments can be booked from any site, internal staff emails to be encouraged so frees up phone lines in between calling each practice.
introduced text services call reminder for patients appointments;
have started online booking appointments and repeat prescription ordering, very important the practice has correct contact details for the patient
- Need to make patients aware of services and cancellations as some patients answered would like late evening opening-when we already do every 2 a week across the 2 sites, will review early morning
- Patients need to further understand that appointments can be booked in advance and we have daily message handling system and encourage administrative staff on- going training to ask the patients the urgency of their appointment so that it can be booked appropriately, each day morning and afternoon there are appointment slots blocked for emergency appointments and appointment slots blocked for telephone triage so clinician can return messages that need actioning from patients -use of practice internal emails for staff so any clinical query can be sent to clinical staff, message/task sent regarding any query and advice for the administrative staff, this is a move away from writing messages in a message book to further improve efficiency

- Encourage patients to ask for their results and investigations after morning surgery and after at least seven days from when test performed. Prescription requests to give at least 48 hours notice, we have had a pharmacist in house reviewing all the medicines management since October 2013
- Waiting times to continue to improve, if patients are late for appointment must give acceptable explanation and if patient has booked appointment must assess in consultation whether needs another appointment for other investigations-reduces waiting time for patients who have attended on time
- Patients have choice doctor- prefer additional female doctor-from previous surveys to review –have male doctors. New male doctor partner recruited full time December 2013, and patients have choice to wait to see their doctor of choice
- New healthcare assistant started January 2014 able to see more patients that need especially chronic disease management and trained to do phlebotomy- this will free up more appointments for Doctor thus the practice will be able to offer more clinical services, this will be reviewed monthly
- Review skill mix and services within practice budget to further improve patient care
- Continue to implement clinical and organisational audits. Dr Bagary and Dr Mander responsible for clinical audits and Jas Bagary responsible for organisational audits, all staff involved with audits to collect additional information on patient experience to further improve services and patient care
- All staff will be informed of findings in practice meetings and the action plan will be displayed for patients on the patients notice board in the waiting room
- Comments and suggestion box is in reception for patients to suggest areas of improvement and bagarysmmedicalpractice@nhs.uk