



Tennyson House Surgery

Patient Survey Results and Action Plan 2012

Patient Reference Group

Tennyson House Surgery Patient Reference Group have 15 members and a further 24 patients have expressed an interest to join the virtual group following the distribution of the survey.

The practice has advertised for "recruitment" to the Patient Reference Group by placing a notice on the counterfoil of all prescriptions, also on the practice website and on the Jayex board within the surgery waiting areas.

Patient Survey: Patient Consultation Version, EQUIP

The Survey was emailed out to the patient group in February by Marion Leister, Practice Manager for their comments, all comments were considered and changes, where appropriate, were made.

The practice survey was designed by EQUIP and agreed by the Practice and Patient Reference Group
(For comments regarding the questionnaire, see attached).

The survey was conducted between 27th February 2012 and the 19th March 2012.

Jill Warn, EQUIP representative attended the meeting held on 28/03/2012. The Agenda is set out below

Minutes of PPG Meeting 28 March 2012

Meeting to discuss results and content of action plan:

Meeting: Tennyson House surgery
Date: 28st March 2012
Present: Dr Ahmad, Partner
Marion Leister, Practice Manager
Jill Warn, Audit and IT Lead EQUIP
Nine representatives of the patient Group

The meeting was chaired by Marion Leister and there was discussion as follows

WELCOME / INTRODUCTIONS:

Marion Leister welcomed the group members and Jill Warn, EQUIP.

The members were asked if they would introduced themselves.

RESULTS OF PATIENT SURVEY:

Jill Warn from EQUIP presented the findings of the Patient Survey for Tennyson House. Overall Jill reported the survey results were excellent and the practice should be extremely proud.

- The staff scored extremely well and the receptionists were thanked for all they do to support the patients.
- The consultation satisfaction score was excellent and reflected the good care offered by the practice team.
- The survey results will be up-loaded up to the website by 31st March.
- A few recommendations will be made by Jill in her report (to follow).
- One recommendation would be having a dedicated notice board which provides information about the practice and new developments.
- Jill discussed how to explore the average consulting times for the clinician to assess if there is a solution to the waiting time issues mentioned in the comments
- Marion Leister discussed the text messaging facility and asked the group if they would have any objections to receiving a message. The group feedback was positive so will be explored further.
- Book on the day appointments were discussed. The group were not aware it was a requirement by the DOH that a percentage is offered on the day, within 48 and 4 weeks ahead.



Patient Survey Results and Action Plan - General Introduction

The patient survey used was agreed by both Partners and the Patient Participation Group (see attached).

The meeting was attended by the Patient Group representatives. All attendees were given a copy of the practice report and patient comments at the meeting. A presentation was given by Jill Warn, Audit and IT Lead from EQUIP discussing each of the questions individually with the group.

Patient Satisfaction Score

The satisfaction results are compared with the practice satisfaction results and national satisfaction results from the National GP Patient Survey 2010-11.

A random selection of 727 patients was selected from the practice population by the Department of Health for the distribution of the survey questionnaire during the financial year 2010-11. 300 questionnaires were completed and returned, a response rate of 42%.

For this year’s survey, the practice handed out the patient survey to patients attending appointments.303 were given out with 239 questionnaires completed, a response rate of 79%.

This year’s survey results are based on patient experience of those who use the service unlike the national survey where patients are randomly picked from the list regardless of the date of the last visit.

Summary of the results for Tennyson House Surgery

Patient Experience	National Survey Results for England 2010-11	Practice National Survey Results 2010-11	Practice Survey 2011/12
Overall care received	90%	92%	97.4%
Recommend the practice to someone who has just moved into the area	83%	87%	98.2%

Your Consultation – Satisfaction Score

	National Survey Results for England 2010-11	Practice National Survey Results 2010-11	Practice Survey 2011/12
Giving you enough time	88%	93%	99.6%
Make you feel at ease	-	-	99.6%
How well the doctor listens	88%	92%	99.6%
Explaining treatment and tests	78%	87%	99.6%
Involving you in decisions about your care	72%	80%	98.7%
Treating you with care and concern	84%	87%	99.6%
Confidence and trust in your doctor	94%	90%	100%
Happy to see GP again	-	-	100%

Building and Parking

The issues were raised in relation with the entrance to both practice buildings. It was suggested automatic doors would solve a lot of the issues. This had been explored by the practice in 2006 and due to the high cost was not affordable. The practice have a bell situated outside the surgery for patients who require help entering the practice which patients may not yet be aware of.

The cleanliness of the building was considered excellent.

Appointments

The practice is open times are as follows:

Monday 08:30 - 18:30

Tuesday 08:30 - 20:30

Wednesday 08:30 - 18:30

Thursday 08:30 - 18:30

Friday 08:30 - 18:30

Weekend closed

A lack of knowledge of the practice opening times is reflected in the patient comments. The practice offers extended hours on a Tuesday evening but this information is not reaching the patients. Suggestions on how to improve patient knowledge were discussed and actions agreed.

The receptionists scored a high satisfaction of 97.9% compared with the practice's national survey result of 90% and 5.9% above the national average of 93% across England. The receptionists should be congratulated for their excellent service offered to the patients.

Getting through to the practice by telephone – the patient survey has confirmed to the practice that due to demand getting through to the practice between 8.30am and 9.30 am has the lowest satisfaction score. This was discussed in depth at the patient participation meeting. Patients are not aware of the guidance set for practices on the number of appointments and type of appointments that are to be offered to their patient population. The 'book on the day' is a requirement and understandably has an effect on the phone lines early morning. It was agreed that all was being explored by the practice to reduce demand on the telephones during the busy time of the day.

The satisfaction scores were as follows

8.30am - 9.30am = 34%

9.30am - 1.00pm = 85%

2.00pm - 6.30pm = 98%

The results give an average satisfaction score of 72%, this is an excellent result compared with the practice's national survey result of 46% and 37% above the national average of 36% across England

The practice offers an on-line service for prescription requests and booking of appointments which has taken a little of the pressure away from the phones. If the demand for online booking increases the practice will review the number that is available.

Ability to speak to a GP, 74.9%, this is an excellent result compared with the practices national survey result of 28% and the national average of 25% across England.

The satisfaction score for seeing the GP of choice was 68%. This score is above the National Survey Results for England of 52%.

The number of days before patients seeing a GP/Nurse for a routine appointment is the lowest of the patient experience satisfaction score. The practice has explored the number of appointments offered and it is above the average of 5.7 appointments per patient per total population. The practice has implemented triage during the morning surgery to help reduce the demand for book on the day appointments

Consultations

The consultation scores are excellent and there are significant differences between the National Survey and the Practice Survey. This we suspect is due to patients who use the service being asked the questions directly. Based on the questionnaire results the practice has proved that they are a very friendly, caring practice that offers an excellent service. This is not only reflected in the patient satisfaction score but also in the comments.

Main issues raised by patients

Access

Patients would like later opening times. The service is already available to patients on a Tuesday evening.

Entrance and Automatic Doors

Thirty patients would like the entrance doors improved. This had been explored by the practice in the past and due to the age of the building this was not feasible. The practice have a bell situated outside the surgery for patients who require help entering the practice which patients may not yet be aware of.

Phoning through to the Practice

Phone access was discussed by the group. It was agreed that there was no easy solution to this problem. The online booking and online requests for repeat prescriptions, which is a fairly new service will hopefully help reduce the demand as patients become aware of its availability

Actions agreed

Practice Noticeboard

A practice noticeboard specifically for practice information may help to inform the patients regarding all services offered by the practice. It is really important to make patients aware of the services offered.

The practice will include the following

- Opening times
- Online booking of appointments
- Online Repeat prescription requests
- Services available on the Website
- Staff skills for Nurse Practitioners, Practice Nurses and Healthcare Assistance

Waiting times between arrival and being seen

The practice has agreed to review average consulting times for the clinicians, this hopefully will help the practice to review waiting times.

Website

The Practice Manager will explore the possibility for a secure login for patients to be made available on the practice website for messaging.

Telephones

It was agreed the practice would review the lunchtime availability of the phone lines. The practice at present has an emergency line during 1.00pm – 2.00pm. This makes it difficult for working patient to contact the practice during the lunchtime period thus making more demand on the early morning service. The suggested change to be considered is an emergency line during 1.30pm – 2.30 pm.

DNA Appointments

The Clinical system has the facility to send text messages to remind patients of their appointments. The practice will explore the possibility of using this facility to try and reduce the DNA rate. It was felt displaying the monthly numbers were not have the desired effect.

Access

The practice has agreed to display new signs, Push and Pull signs for the entrance doors. The practice have a bell situated outside the surgery for patients who require help entering the practice that patients may not yet be aware of. The practice will display a notice regarding the bell situated outside for those who require assistance entering the practice.

Tennyson House Surgery

Dr Charlotte Stead
Dr Jo Roberts
Dr Shahzad Ahmad
Dr Mike Radford



20 Merlin Place
Chelmsford
Essex
CM1 4HW

Mrs Marion Leister Business Partner

The actions below are 'suggested actions' and there may be reasons as to why actions are not viable. The suggested actions have been agreed by the Practice and Patient Group.

Practice Noticeboard

A practice noticeboard specifically for practice information may help to inform the patients regarding all services offered by the practice. It is very important to make patients aware of the on-line services offered via the practice website.

Waiting times between arrival and being seen

The practice has agreed to review average consulting times for the clinicians, this hopefully will help the practice to review waiting times .

Website.

The Practice Manager will explore the possibility for a secure login for patients to be made available on the practice website for messaging.

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Access

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Patient Questionnaire Results 2011/12

Tennyson House Surgery

Thank you to all the patients that took the time to fill in our patient questionnaire.

This is what you had to say:



Access

✚ Ease of getting in to the building	Satisfaction score	99.5%
✚ How clean is the waiting room	Satisfaction score	99.1%
✚ How helpful are the receptionists	Satisfaction score	97.9%
✚ To see a particular Doctor	Satisfaction Score	68%
✚ Speak to practice on the phone	Satisfaction Score	72%
✚ Speak to a Doctor on phone	Satisfaction Score	74.9%
✚ Number of days to get an appointment	Satisfaction score	48.5%
✚ Seen same day	Satisfaction Score	90.1%

Consultation

✚ Listening	Satisfaction Score	99.6%
✚ Put at ease in examination	Satisfaction Score	99.6%
✚ Involved in decisions	Satisfaction Score	98.7%
✚ Explanations	Satisfaction Score	99.6%
✚ Time spent	Satisfaction Score	99.6%
✚ Caring and concern	Satisfaction Score	99.6%
✚ Confidence in your GP	Satisfaction Score	100%
✚ See the GP again	Satisfaction Score	100%

Overall experience of your GP Surgery	Satisfaction Score	99%
Would you recommend the Surgery	Satisfaction Score	99%



Re: General Practice Questionnaire

Please find enclosed the report of your individual practice survey results for the current year.

The calculations on the report and charts are made as follows:

No Answer: The number of patients who did not complete the question.

Patients responding NA, Unknown or No are excluded from the percentage satisfaction score.

Satisfaction: The percentage of patients who responded Good, Very Good or Excellent.
Very easy and Fairly easy

We hope you find the layout easy to read and the calculations helpful. We would appreciate any comments that you would like to make.

Yours sincerely

Jill

Jill Warn, Audit and IT Lead



General Practice Questionnaire

Practice Code: Tennyson House

Number returns: 239

About you

Q1. Are you

Male	Female	No Answer
93	146	0

Q2. How old are you?

<20yrs	20-30 yrs	31yrs-40yrs	41yrs – 50yrs	51yrs – 60yrs	61yrs – 70yrs	71yrs - 80yrs	80+yrs	No answer
9	19	23	31	39	50	39	24	5

Q3. Which Ethnic group do you belong to?

A: White		B: Mixed		C: Asian or Asian British	
British	229	White and Black Caribbean	1	Indian	2
Irish	0	White and Black African	0	Pakistani	0
		White and Asian	0	Bangladeshi	0
Other White background	2	Other Mixed background	1	Other Asian background	1
D: Black or Black British		E: Chinese/Other Ethnic Group	0	F: Not Stated	1
Caribbean	1	Chinese	0		
African	1	Any other Ethnic Group	0		
Any other					
Black background	0				

Q4. Which of the following best describes you?

Employed	Unemployed	Full time education	Unable to work	Looking after home/family	Retired	Other	No Answer
92	8	10	14	12	97	5	1

Q5. Do you have a long-standing health condition?

Yes	No	Don't know /can't say	No answer
118	102	10	9

Your Practice

Q6. How easy do you find getting into the building at the Surgery?

Very easy	Fairly easy	Not very easy	Not at all easy	No answer
205	30	1	0	3

Q7. How do you think getting in to the building can be made easier?

Please see comments attached.

Q8. How clean is the practice waiting room?

Very clean	Fairly clean	Not very clean	Don't know	No answer
199	37	1	0	2

Q9. How can we improve your waiting experiance?

Please see comments

Reception

Q10. How helpful do you find the receptionists at your surgery?

Very helpful	Fairly helpful	Not very helpful	Don't know	Did not speak to receptionist	No Answer
168	63	3	0	2	3

Q11. In the reception area, can other patients overhear what you say to the Receptionist?

Yes
147

No
34

Did not speak to receptionist
13

Don't know
41

No answer
4

Appointments

Q12. In the last 12 months how many times have you seen a GP/Nurse at your practice?

None
4

1-3times
81

4-6 times
70

6 or more times
79

No answer
5

Q13. How do you normally book your appointment to see a GP/Nurse?

In person
41

By Phone
147

Online
15

No answer
36

Q14. Are you aware you can book a routine appointment up to four weeks in advance?

Yes
207

No
27

No answer
5

Q15. Have you used our online appointment booking or repeat prescribing service ?

Yes
51

No
183

No answer
5

Q16. How easy is it to get through to Reception on the phone at your GP practice?

Between 8.30am and 9.30am

Very easy
16

Fairly easy
64

Not very easy
105

Not at all easy
48

No answer
6

Between 9.30am and 1pm

Very easy
42

Fairly easy
144

Not very easy
27

Not at all easy
6

No answer
20

Between 2pm and 6.30pm

Very easy 68	Fairly easy 129	Not very easy 4	Not at all easy 0	No answer 38
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Q17. Please comment?

Please see comments attached.

Q18. How easy is it to speak to a doctor or nurse on the phone at your surgery?

Very easy 26	Fairly easy 108	Not very easy 39	Not at all easy 6	No answer 60
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Q19. How many days do you usually wait to get an appointment with a GP/Nurse of your choice for a routine problem or review?

Same or next day 37	2 -4 days 63	5 days or more 106	Don't know, never tried 22	No answer 11
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Q20. How often do you get to see your GP / Nurse you have requested?

Always 75	A lot of the time 82	Some of the time 46	Never 5	N/A 23	No answer 8
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Q21. How long did you have to wait for your consultation to start today after the appointment time?

Less than 5 Minutes 58	5-10 minutes 70	11-20 minutes 58	21-30 minutes 27	More than 30 minutes 12	No answer 14
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Q22. If you need to see a GP/Nurse urgently, can you normally be seen on the same day?

Yes 174	No 19	Don't know, never tried 37	No answer 9
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Q23. If you have ever missed an appointment, was it because?

I recovered 11	I forgot 23	I was delayed 20	Too difficult to cancel 3	Could not get through on the phone 5	No answer 177
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Q24. Is the surgery currently open at times that are convenient to you?

Yes 220	No 14	No answer 5
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Q25. If no, when would be more convenient?

Please see comments attached.

Your Consultation

Q26. Referring to your face to face / telephone consultation with the Doctor/ Nurse today, how highly would you score the Doctor/ Nurse at each of the following?

A: Giving you enough time?

Excellent 164	Very good 62	Good 8	Fair 1	Poor 0	Very poor 0	No answer 4
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B: Make you feel at ease?

Excellent 161	Very good 64	Good 8	Fair 1	Poor 0	Very poor 0	No answer 5
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C: Listening to you?

Excellent 165	Very good 58	Good 8	Fair 1	Poor 0	Very poor 0	No answer 7
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D: Explaining treatment and tests?

Excellent 156	Very good 59	Good 16	Fair 1	Poor 0	Very poor 0	No answer 17
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E: Involving you in decisions about your care?

Excellent 146	Very good 63	Good 18	Fair 3	Poor 0	Very poor 0	No answer 9
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F: Treating you with care and concern?

Excellent 158	Very good 59	Good 15	Fair 1	Poor 0	Very poor 0	No answer 60
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G: How much confidence and trust did you have in the GP/Nurse you last saw or spoke to?

Excellent 216	Very good 16	Good 0	Fair 0	Poor 0	Very poor 0	No answer 7
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H: Would you be completely happy to see this GP/ Nurse again?

Excellent 231	Very good 1	Good 2	Fair 0	Poor 0	Very poor 0	No answer 5
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Please see further comments attached.

Patient Experience

27: Overall, how would you describe your experience of your GP practice?

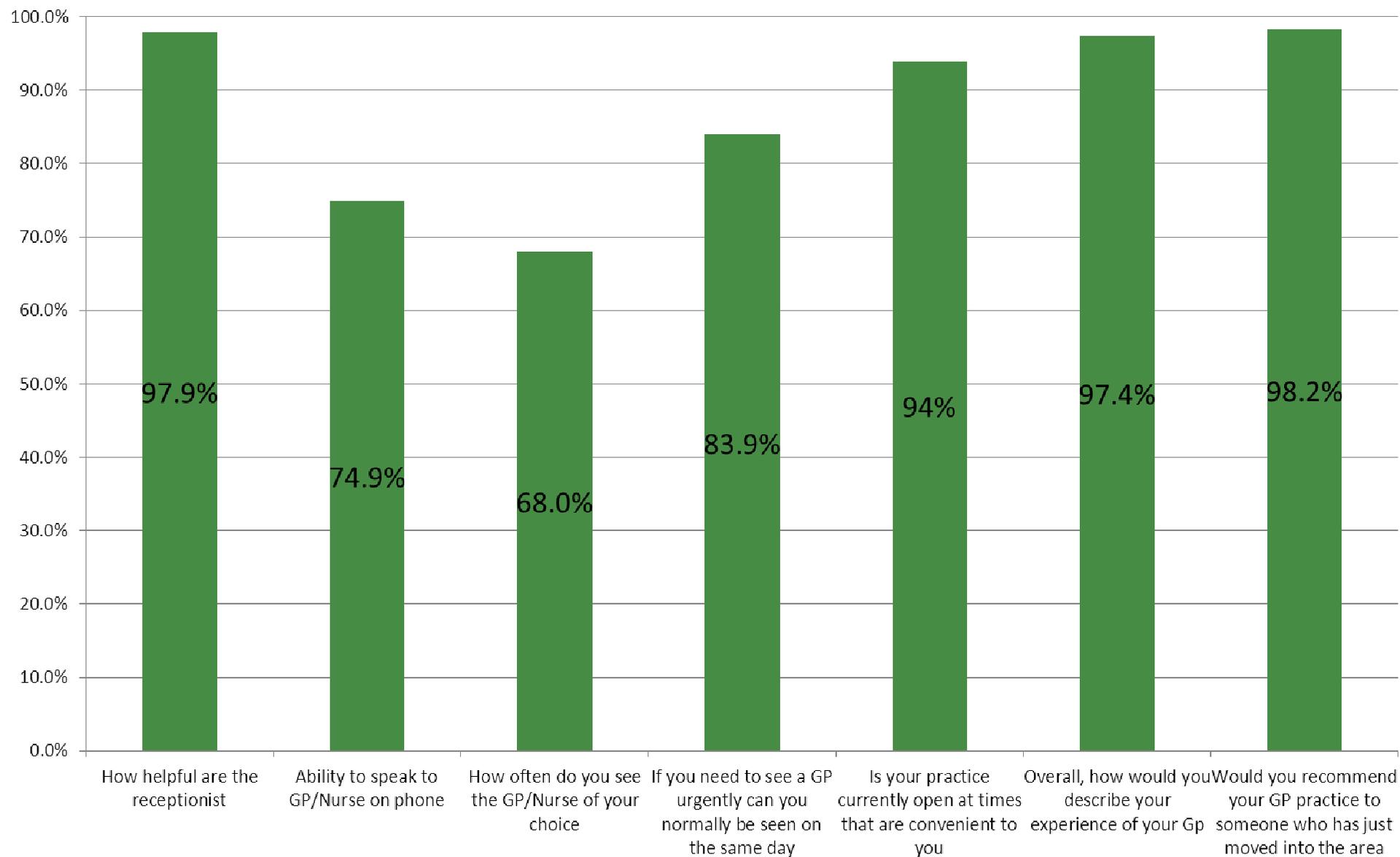
Excellent 132	Good 96	Fair 6	Poor 0	N/A 0	No answer 5
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28: Would you recommend you GP Practice to someone who has just moved to your local area?

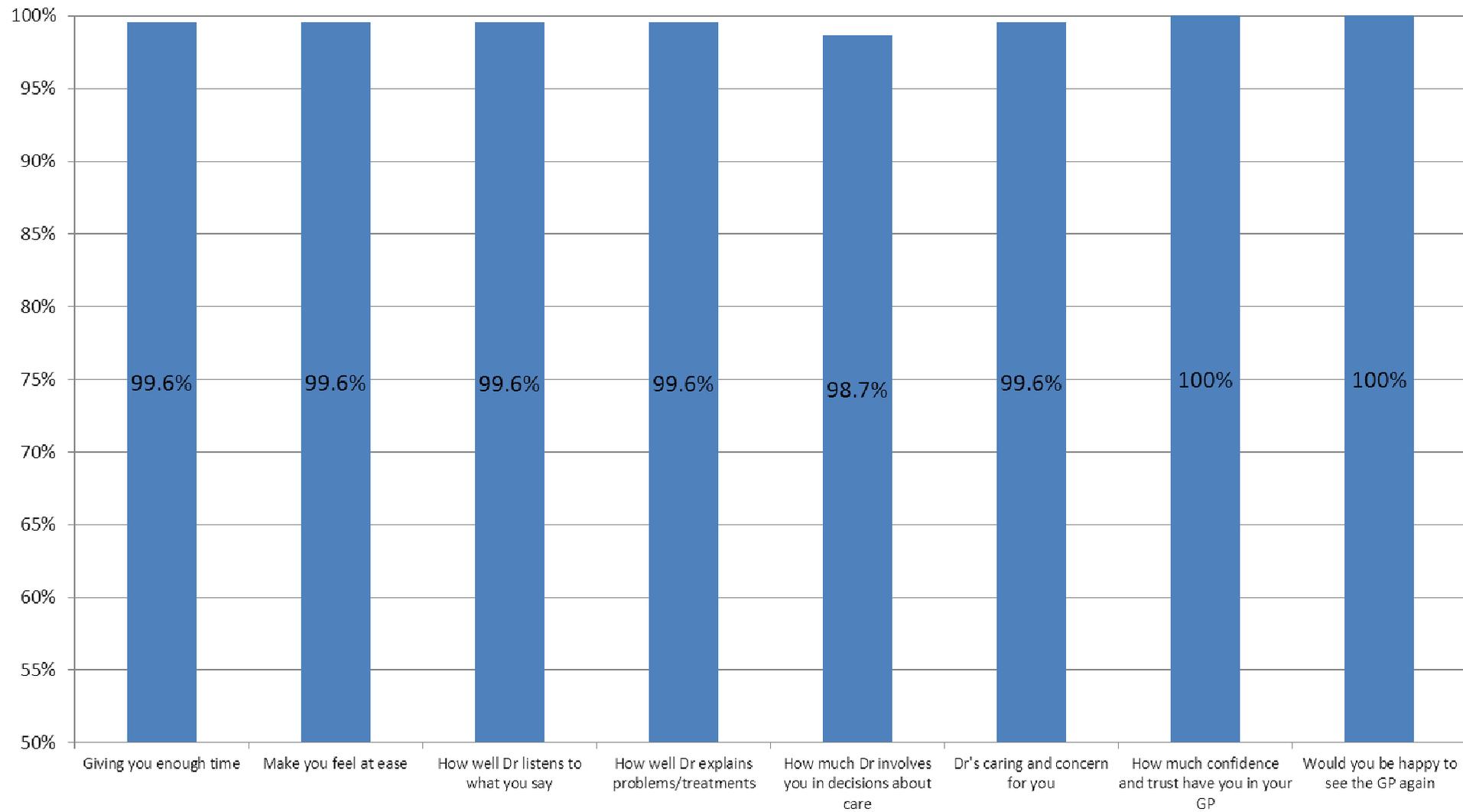
Yes 224	No 4	No answer 11
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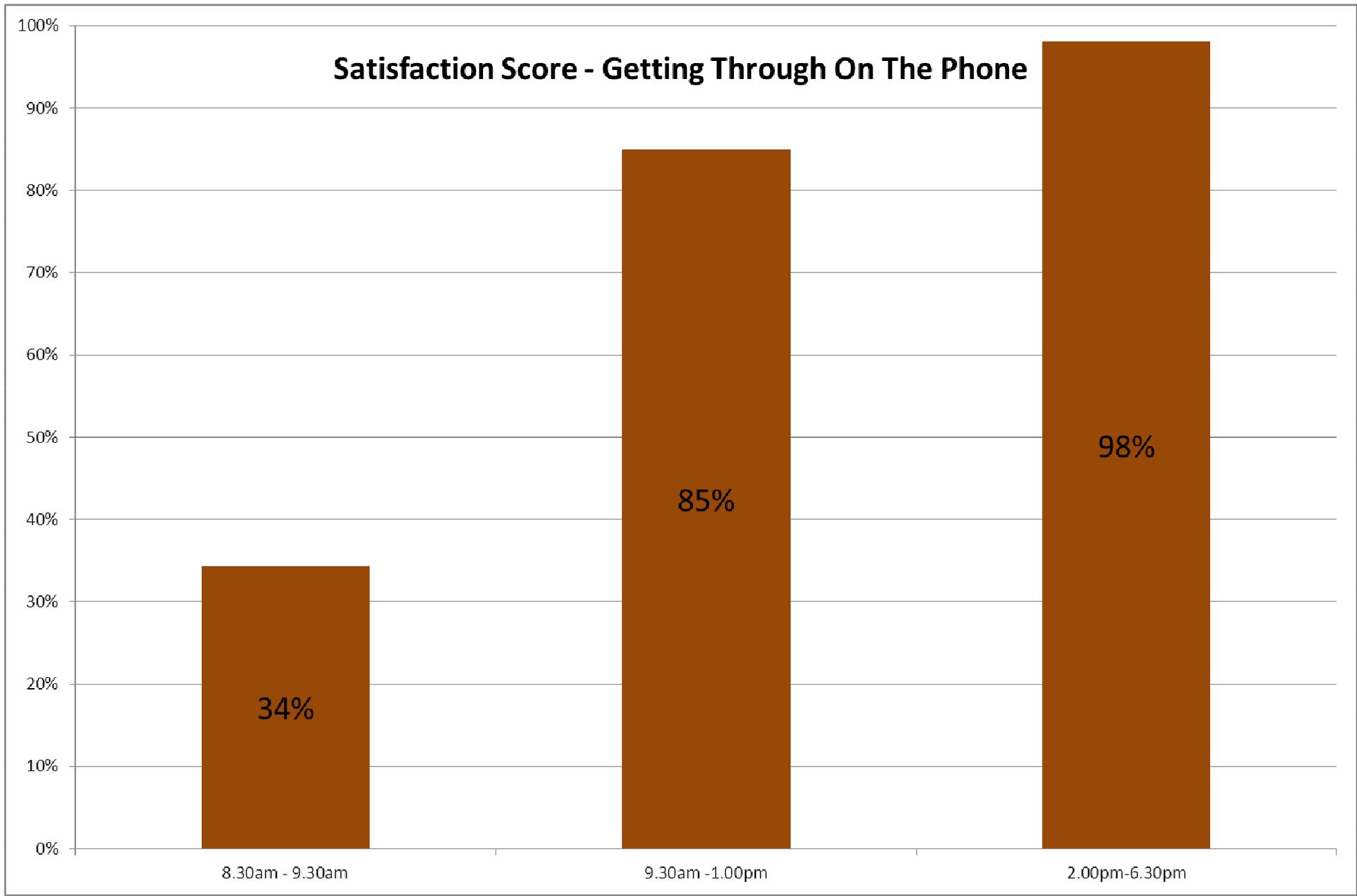
Please see comments attached regarding the patient experience.

Satisfaction Score for Patient Experience



Consultation Satisfaction Score





Tennyson House Surgery

Dr Charlotte Stead
Dr Jo Roberts
Dr Shahzad Ahmad
Dr Mike Radford



20 Merlin Place
Chelmsford
Essex
CM1 4HW

Dear Patient

We would be grateful if you would take some time to complete this patient survey. Your Doctors and Nurses want to provide the highest standard of care. Feedback from this survey will help them to identify areas that may need improvement. Your opinions are very valuable.

Please answer ALL the questions that apply to you by putting an X in one box unless more than one answer is required. There are no right or wrong answers and your doctor will NOT be able to identify your individual answers.

Thank you.

About You:

1: Are you? Male Female

2: How old are you? _____

3: What is your ethnic group?

A: White

- British
 Irish

Any other White background
background
(Please detail) _____

B: Mixed

- White and Black Caribbean
 White and Black African
 White and Asian

Any other Mixed background
(Please detail) _____

C: Asian or Asian British

- Indian
 Pakistani
 Bangladeshi

Any other Asian
(Please detail) _____

D: Black or Black British

- Caribbean
 African
 Any other Black background

E: Chinese/Other Ethnic Group

- Chinese
Any other Ethnic Group
(Please detail) _____

F: Not Stated

4: Which of the following best describes you?

Employed
(full, part time, including
self-employed)

Unemployed
(includes looking for work)

Full time education

Unable to work
due to long term sickness

Looking after
family and home.

Retired from paid work

Other _____

5: Do you have a long-standing health condition?

- Yes No Don't know/can't say

Your practice

6: How easy do you find getting into the building at your surgery?

- Very easy Fairly easy Not very easy Not at all easy

7: How do you think getting in to the building can be made easier?

8: How clean is the practice waiting room?

- Very Clean Fairly clean Not very clean Don't know

9: How can we improve your waiting experience?

Reception

10: How helpful do you find the receptionists at your surgery?

- Very Helpful Fairly helpful Not very helpful Don't know Did not speak to receptionist

11: In the Reception Area, can other patients overhear what you say to the Receptionist?

- Yes No Did not speak to receptionist Don't know

Appointments

12: In the last 12 months how many times have you seen a GP/Nurse at the surgery?

- None 1-3times 4-6 times 6 or more times

13: How do you normally book your appointments to see a GP?

- In person By Phone online

14: Are you aware you can book a routine appointment up to four weeks in advance?

- Yes No

15: Have you used our online appointment booking or repeat prescribing services?

Yes No

16: How easy is it to get through to Reception at your surgery on the phone?

Between 8.30 and 9.30 am

Very easy Fairly easy Not very easy Not at all easy

Between 9.30am and 1pm

Very easy Fairly easy Not very easy Not at all easy

Between 2pm and 6.30pm

Very easy Fairly easy Not very easy Not at all easy

17: Please comment

18: How easy is it to speak to a doctor or nurse on the phone at your surgery?

Very easy Fairly easy Not very easy Not at all easy

19: How many days do you usually have to wait to get an appointment with a GP/Nurse of your choice for a routine problem or review?

Same or next day 2-4 days 5 days or more Don't know, never tried

20: How often do you get to see your GP/ Nurse you have requested?

Always A lot of the time some of the time Never N/A

21: How long did you have to wait for your consultation to start today after the appointed time?

Less than 5minutes 5-10 minutes 11-20 minutes 21-30 minutes more than 30 minutes

22: If you need to see a GP/Nurse urgently, can you normally be seen on the same day?

Yes No Don't know, never tried

23: If you have ever missed an appointment, was it because?

I recovered I forgot I was delayed Too difficult to cancel Could not get through on the phone

24: Is the surgery currently open at times that are convenient to you?

Yes No

25: If no, when would be more convenient?

Your Consultation

26: Referring to your face to face / telephone consultation with the Doctor/ Nurse today, how highly would you score the Doctor/ Nurse at each of the following?

A: Giving you enough time?

Excellent Very good Good Fair Poor Very poor

B: Make you feel at ease?

Excellent Very good Good Fair Poor Very poor

C: Listening to you?

Excellent Very good Good Fair Poor Very poor

D: Explaining treatment and tests?

Excellent Very good Good Fair Poor Very poor

E: Involving you in decisions about your care?

Excellent Very good Good Fair Poor Very poor

F: Treating you with care and concern?

Excellent Very good Good Fair Poor Very poor

G: How much confidence and trust did you have in the GP/Nurse?

Full confidence moderate little confidence no confidence

H: Would you be completely happy to see this GP/ Nurse again?

yes no Maybe do not know

Please add any other comment you want to make about this Doctor/ Nurse.

Patient Experience

27: Overall, how would you describe your experience of the surgery?

Excellent Good Fair Poor N/A

28: Would you recommend your surgery to someone who has just moved to your local area?

Yes No

We are interested in any other comments you may have about your experience?

We are always interested in improving the services we provide and the practice. Have you any suggestions which might help us?

We would like to contact our patients from time to time to ask their opinion on any new service, or changes to the existing service, that we are considering in the future. Would you be prepared in principle to participate?

- Yes, if yes please give your name and email address to Reception, thank you
- No thank you

Thank you for taking time to complete this questionnaire.

Patient comments - patient survey design

Letter sent to patient group acknowledging receipt of changes and the next step.

Letter sent on the 23rd February 2012

Dear Patient

Firstly I would like to say a huge thank you for taking the time to respond to our request for comments on our proposed patient survey, I was truly overwhelmed at receiving so many comments.

I think I should give a brief explanation as to the background surrounding the survey. Every year the government conducts a patient survey to assess the level of patient satisfaction, to which some of our remuneration is attached. The new Health Care Bill is placing much more emphasis on patient participation and surgeries are being encouraged to form Patient Participation Group where the views and ideas from patients can be expressed and where feasible and appropriate acted upon.

This is the first patient survey whereby we, together with you have been able to have input with regards to the content of the survey. Yes we still have a certain set of criteria that the government wish us to include within the survey, but we are now able to build it to include areas relevant to our patient population.

Due to the amount of work involved the surgery has commissioned Jill Warn, our colleague who works for EQUIP who is a non-profit making NHS body to help with the construction and compliance with the government guidance. For the past five years Jill has been involved in excess of 500 surveys and has written 164 action plans for surgeries, so she has plenty of experience for our group to benefit from.

All of your comments were discussed with the practice partners and forwarded to Jill, with your patient identification kept anonymous. Attached is Jill's response to the comments made by all of you. (We had 12 responses from 15 patients, a fantastic take up)

As some of you have already stated the survey is 4 pages and although there is much more we could ask, we feel this is a good starting point, and the building blocks for future surveys, and again

we sincerely thank you for taking the time to help us.

Next Stage

The plan now is for patients attending the surgery between 27th February and March 9th to complete the survey in the hope we can achieve 25 surveys per 1000 patients, some 212 in total. As all surveys will be anonymous they will be forwarded to Jill for her to collate the results. We would then like to invite you to meet with us on Wednesday 28th March to discuss the results with the view to forming an action plan for the following year.

If you would like to be part of the next stage, could you please indicate your preferred time from either 1pm to 3pm or 6pm till 8pm. I am aware that these times may not suit everybody so we will have to go with the majority.

Once we have met and agreed our action plan the results of our patient survey and action plan will be published to our website and displayed in reception.

I have attached the survey as both a pdf file if you would like to print it and hand it in at reception and as a word document so you can complete it online.

Finally, we really do value all your comments and suggestions. It may always be possible to act on them but we hope with closer working relationships we might have better understanding better patients and your surgery.

Yours faithfully

Mrs. Marion Leister
Business Partner & Practice Manager

Email Comments

Patient A

Thank you for inviting me to comment on your proposed patient survey.
My comments are as follows:-

* At beginning, perhaps better to say "We would be grateful if you would spend a few minutes completing this patient survey."

I have no objections - we can change if agreed – time or minutes are one of the same

* In Q3, maybe change to read "What is your ethnic group? (mark more than one box)."

The layout is from the government censors office which is why we use.

* In Q3, I don't understand the headings in part A - why is "Black" listed in the "White background" section? Or why is there the question "Any other White background"?

There are other recommended layouts, we could use the one below if preferred

A : White

- British
- Irish
- Any other White background (please write in)

B : Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background (please write in)

C : Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background (please write in)

D : Black or Black British

- Caribbean
- African
- Any other Black background (please write in)

E : Chinese or other ethnic group

- Chinese
- Any other (please write in)

Not stated

* I'd prefer Q3 to be moved to the end of the "About you" section - I know you have to research ethnicity, but many people might prefer the question to be given less prominence.

Layout is in recommended order for such surveys

* In Q14, maybe say "Did you know you can book...."

* In Q15, maybe say "Have you used...."

* In Q16, maybe delete "Considering the volume of calls", the question will be easier to understand.
– If agreed by the partners, I have no problem. Patients have expectations of being answered immediately when phoning, this is just something to consider

* In Q20, should read "GP/Nurse"with capital P – agreed a typo in the draft -correct

* In Q23, this would read better with "If you have ever missed an appointment, was it because..."

* At end, you should include instructions on how to return the completed survey. Are you expecting people to bring it back? You'd probably get a better response if you include a prepaid envelope for people to post it back.

The survey is given out as in the past with the expectation that it will be filled in on the day

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient B

Thanks for your email containing the proposed Patient Questionnaire.

Having looked at it over the weekend the first thing to say is that it appears easy to understand with questions relevant to gaining a better insight into patients' needs and opinions of their GP Service.

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On the downside it does seem to be a little long and even though it is in the main tick box answers, some patients may be put off by 4 pages of questions. I wonder have any of your staff had a practice run at completing it and worked out how long it took. Also do you envisage patients taking the form away with them or filling in at the surgery? In which case do you have a 'quiet room' or area that could be put aside for the purpose? Or for patients with literacy/language issues they may need help from a member of staff in completing the survey.

For a questionnaire like this to have real value and relevance to the ongoing improvements of the surgery I would suggest the following – but of course you may already have this in mind already:

In order to get a true picture from all sections of the community using their GP service a random number of patients from each of the following groups should receive questionnaires by mail/email as well as those attending surgery during the period of the study.

Single parent families

Families where there are mental health issues

Families where there are disabilities

Families where English is not their first language

Patients living alone

Patients over 60 years of age

Families with children under 5years

Patients who are registered carers.

Patients who are registered with the surgery but have not attended in the last years

This list is not exhaustive and I've probably left some groups out but I think you probably get my drift.

I realise that some of the questions would have to be modified to reflect the fact that the questionnaire is also being mailed/emailed to patients who haven't attended surgery during the week of the study. However, if the questionnaire is only to be given out to patients attending surgery during the study then one could surmise that a number of these patients are already regular attenders and it would seem to be a missed opportunity not to attempt to contact those patients who may be a little harder to reach but nevertheless may have a worthwhile contribution to make.

Hope my comments may have been of assistance. Please get back in touch if you need any further clarification.

Although you have made valid suggestions, not all the information required is recorded or known to the practice to be able to separate into such complex groups and the time involved would be immense. It is important for the practice to ensure they have a complete picture of the patient experience from patients that use the service. One of the downsides of the national survey that has been in place over the last three years was having selected as you have suggested above randomly from the list size, the letters went out to those that have not used the service for many years which meant the answers were based on their last experience which has no real meaning due to the many

changes that have happened over recent years.

The reason for the many questions is to ensure the questionnaire fulfils the requirements for the Doctors Appraisal system otherwise you would be required to carry out more surveys per year and I am sure many people already feel surveyed out!

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient C

I have read through the 'Patient Survey' which seems fine. The only comment I would like to make is in connection with question 26 (Under - Your Consultations) If you had had a telephone consultation you would not have questionnaire to complete as you would be at home!
Other than that I see no problem with it.

The idea was for the survey to be handed out at the time of the appointment. This could be explored with the practice manager for future surveys as it will take time to gather email addresses –
constructive comment

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient D

I hope these comments are of use to you:

first line: "We should be grateful if you would..." – I feel that saying "we should be grateful" is not a good opening sentence the idea is to highlight gaps in the patient experience for the patient.

Q3 Should the categories not be A white (British?Irish/Other), B Black (African/afro-caribbean/other), C & d as is.

The layout is from the government censors office which is why we use.

There are other recommended layouts, we could use the one below if preferred

A : White

- British
- Irish
- Any other White background (please write in)

B : Mixed

- White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background (please write in)

C : Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background (please write in)

D : Black or Black British

- Caribbean
- African
- Any other Black background (please write in)

E : Chinese or other ethnic group

- Chinese
- Any other (please write in)

Not stated

Q5 If yes, ask what the condition is?

Although a valued comments what would we do with the data gathered as we already have very comprehensive disease registers within general practice.

Q6 replace "not at all easy" with "difficult".

We would have to add as both are completely different answers – Happy to add if agreed by partners

Q9 I would love to see the answers you get to this! Perhaps replace with some of your suggestions and ask which are preferred.

This is an opportunity for you to give your opinion. The list would be never ending

Q11 Since there is often a small queue, most answers may be "yes".

Q20 GP. _ Typo corrected

Q23 Ask how many times missed in the last year.

This can be added as an extra question

Q26 ask a question about prescribed medication and how confident patients are that they know how to use/take it?

This section was agreed by the GP appraisal manager who runs the appraisal network for the clinicians. As the results are viewed overall I am not sure what we would do with the data once gathered. This should be discussed during your medication review

It seems fairly comprehensive, depending on exactly what you want to achieve.

An overview of the service offered

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Thank you for the opportunity to contribute, I would be happy to be involved in future virtual contributions.

In terms of the survey, I thought it was a comprehensive survey and I have included my detailed thoughts below I hope you find them helpful:

- At the start it would be helpful to set out if the survey is confidential or not as it might help people to decide if they are happy to complete it or not. Following this on the age section, it might be helpful to have age ranges, just helps people to feel it isn't so identifiable.

I have no objection to adding age ranges although we do not ask for names and due to the fact the practice would have several hundred the same age it would be very difficult to identify the person who has completed the form.

- Question 6, might be helpful to make it clear that this is about accessibility of the building and not availability of appointments.

For this reason we have appointments and practice under separate sections

- Question 13 on how you normally book, do you want to know the single most used approach or all the ways people use e.g. for routine appointments I would book on line but urgent appointments I have to ring, I tend to have more urgent appointments so hence telephone becomes the answer but my preference is for on-line booking.

This question has been asked in several practices and has given a quick snapshot overview, it could be a very complicated question if we started to ask about urgent/routine against online or telephone

- Question 21, How long you had to wait for your consultation to start - it's plain English, if the point you are getting at is how late was your appointment in starting, then say that.

This is the recommended wording for this question as there is a national acceptable waiting time which practices can compare the answer to this question

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient F

I have several observations to make which I hope will be useful.

I know that these surveys are only useful if the questions offer multiple choice answers but those listed are rarely all encompassing, so I appreciate the opportunity to expand with detail on some of the questions.

Question 5 is rather vague. What is a long-standing health condition? I have osteoporosis and high cholesterol, for example, but I consider myself to be very fit and healthy. Could the question be worded in terms of how many visits are made to the surgery annually, to make it clearer?

This is an agreed standard question for the NHS surveys

Some questions are not relevant to every patient. For example, question 18 could have a box for 'I have never tried'. Question 23 could have a box for 'no' if the patient has never missed an

appointment.

This is why when analysed the percentage is calculated by the number who answered rather than the number of returned questionnaires

Throughout the survey, it is obvious that this is a template that has not been fully adapted for Tennyson House Surgery. I would have more faith in its value if, throughout, it referred to 'the surgery', 'the practice' rather than 'your surgery' etc. Question 18, for example, might read, 'How easy is it to speak to a doctor or nurse on the phone?' It doesn't need 'at your GP practice' since the whole survey is all about the Tennyson House Practice.

This survey has been designed with Tennyson house in mind, as the designer I have the practice national survey results and have a good insight of your practice having worked with them over many years. 'Your surgery' is a term that we use but can easily be changed to 'your practice'

I hope these suggestions are helpful.

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient G

We thought that the draft survey was, in the main, a very clear and well laid out document using good clear English. I do have some small comments as follows:-

Q.3 My wife took the lines under the groupings to indicate the end of the question and not for additional information. This could be made clearer by adding (*please detail*)

Can be added

Q.11 This struck me as an unnecessary question as the answer must surely be a yes majority. However discreet the receptionists are and also allowing that most patients stand back when others are at the reception desk a yes answer must surely prevail and I could not see what benefits could arise from this question.

This will highlight how big the problem confidentiality is regardless of having excellent receptionist who do the upmost to be discreet

Q.13 Would it be helpful to know which of these three services is mostly used. This would require an additional question.

I agree we could add more questions and enlarge in certain areas but unfortunately this will make for a longer survey

Q.15 Please change the word '*utilized*' to '*used*' as the meaning is much clearer.

We can change the wording

Q.28 Would it be useful to add an example of the type of services the surgery could consider.

This again would put the survey onto a 5th page but will discuss with the partnership

Should there be a question regarding language. This could be '*Is English your first language?*'. As our society has become multi racial a question such as this could give an indication of any changes needed in the future to overcome any difficulties in communicating information.

A valid comment although this has not been highlighted as a problem for your practice and would

extend the survey greatly, will discuss further with the partnership

We hope these few thoughts will be of help one way or another and we are both very interested in helping in this way.

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient H

Thank you for sending through this letter and the Survey Form.

I have a couple of comments, regarding the survey

- i. Are the questions set by the Government or are they questions set by the Practice ?

The survey has been designed with the practice in mind fulfilling areas that are required by DOH.

Many of the questions also fulfil the criteria required for the GP's .

- ii. What is the Practice trying to achieve by carrying out the survey - -

It is all about the patient experience (all that you have listed), the questionnaire has been designed with the practice national survey results in mind

(improve services, improve patient experiences, lower patients expectations, reduce complaints)

- iii. The explanation of the survey should cover Service as well as Care.

Question 26 covers the chance for patients to express their views on the care given by their GP

- iii. Questions 1 - 4 should be on a separate sheet/page with the explanation.

We have tried to limit the pages – already 4 pages long and with the other suggestions it would be difficult to achieve this

- v. v. An explanation should be provided for each of the different sections - Practice / Reception etc

Again the length would increase dramatically

- vi. At the end why not have a section where people can put their names and addresses - you are asking them to complete the survey and then go to talk to reception.

Although I am a member of the Mid Essex PCT and a NHS employee who is bound by the same confidentiality policy it would be complicated for the practice if identifiable information was to leave the practice. I am not based in the practice as I am a PCT hosted service

- vii. How are you going to deal with people who's literacy and numeracy is limited,

The practice can offer support discreetly for patient who they are aware has difficulty but this is not always known

- viii. Is the survey to be printed in a larger font for people with limited vision ?

This can be discussed

- viii. How is the survey going to deal with patients fear of not wanting to tell the truth, in case there are repercussions

We do not ask for patient details for this reason.

- x. No reference to when, where or if the results will be published.

It will be publish on the practice website, notice board and discussed at one of your meetings. A

action plan will be the result of the survey results

I did not realise that I had to may queries, I hope so of them will prove useful, I have not completed the survey, were you expecting it to be completed and returned?

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PCT.

Patient I

With regards to your patient. The survey I think that the questions are easy to read and complete, however , some people might be confused by the practice being referred to as the surgery, and then the practice but it could be me being picky!

. 'Your surgery' is a term that we use but can easily be changed to 'your practice'

There is a typo on Q20 where you have a lower case p in GP.

Agree and has been corrected

Q26 refers to "todays consultation" but then asks about the last time you spoke to a GP/ Nurse.

We can remove the end of the question if it is felt would cause confusion

The only other things I might of included are asking if patients are aware of the full services that your nursing staff /healthcare staff are able to offer.

I can discuss with the partnership

Apart from that I would think that the survey should reveal some productive results

Thank you for your very valued and constructive comment. Hopefully I have managed to give clear answers

Jill Warn, Audit and IT Lead, EQUIP, Mid Essex PC