

## **Aelfgar Surgery PPG Report & Action Plan**

### **PPG Profile and Representation**

#### **Patient Survey and Steps taken to obtain views of registered patients**

The virtual group are representatives across a broad age/sex range of our practice population. Inviting patients who attended the surgery to join by leaving their e-mail addresses gathered membership; although it is noted that the membership has not increased despite a poster campaign, website, prescription advertising, and clinician reminders. We continue as we did last year to select a cross-section of population with respect to age and sex.

The members of the PPG include representatives from most of the categories that we targeted. They are :

18-28 year olds (14% Eligible Practice Population) - 0 members

28-38 year olds (12% Eligible Practice Population) - 3 members

38-48 year olds (19% Eligible Practice Population) - 2 members

48-65 year olds (28% Eligible Practice Population) - 4 members

65 years + (27% Eligible Practice Population) - 6 members

Male (47% Eligible Practice Population) - 5 members

Female (53% Eligible Practice Population) - 10 members

We were unable to recruit any members between the ages of 18-28. However as 55% of our practice population are over the age of 48 the group is still representative.

A practice survey was developed on areas that we thought patients may wish to improve following historical data from previous years surveys. PPG members were canvassed for their comments/agreement to this by e-mailing them a copy and then by posting it on our online forum. However we had a disappointing response and the PPG members failed to make any comments on the content of the survey. We therefore acknowledged the survey response from patients who had completed this whilst attending the practice and duly noted any comments

In order to try and achieve a representative proportion of our practice population we have the survey available on the website, the online forum and hard copy at the practice front desk. We made a consistent and positive attempt at every opportunity to ensure patients views were gained from all who attended the practice, for example using antenatal and baby clinics were an opportunity to try and obtain views from females and young families. The practice has 18 patients with learning difficulties who may not have a voice. Consequently we liaised with staff/carers to invite comments and opinions. We have also displayed posters in the practice and continue to advertise it on the patient call system within the waiting room, together with reference being made re the virtual online group within our seasonal newsletter.

Our target was 5% of our population to complete the survey, however despite a consertive effort the practice only received 110 responses which equates to 2.25 %.

#### **Discussion of survey results with PPG and agreement on the action plan**

The results were uploaded to the PPG online group on 01.03.13 requesting feedback for an action plan to be drawn up. Unfortunately we had no response from PPG members and had to devise an action plan ourselves. The action plan was uploaded to the PPG online group on 08.03.13 however again we had no response from PPG members .

1. Majority of people (76%) thought it was either fairly or very easy to obtain an appointment at a time they wanted; with the remaining 23% stating it was not very easy; 1% with no response. It was thought relevant to ask a question along these lines to ascertain a preference so if in the future additional funding was to be made available we would know where demand lies.

2. More than half of those who completed the survey were able to see a specific GP they wished, 16% indicated there was no need to see a specific GP; with only 2% indicating a negative response but no further comments received in connection to this.
3. Half of those who completed the survey (50%) felt it fairly important to see a specific GP and 37% felt it very important, as point 2 highlights patients generally were able to do this.
4. Unfortunately only 11% felt they knew very well which days of the week that their GP was available and 29% quite well, this left the remaining 60% not knowing either very well or not at all well as to availability. This is something that the practice can address quite easily by advertising on the website, practice leaflet and in-house digital patient display; although concern from practice staff was raised that patients would take this quite literally and not take heed that it would not be set in stone and may change.
5. An overwhelming 79% felt satisfied with the practice opening hours, only 18% expressed their discontent at this and 3% either weren't aware or gave no response. As the majority of patients were satisfied with this the practice felt this was not a major concern.
6. Once again majority of the patients 96% felt that the entrance and exit to the surgery building to be very easy; this was felt due to the work carried out at the practice with the installation of automatic doors and alternations to the porch etc.
7. Generally 77% felt the surgery was very clean, with a further 20% fairly clean, the remainder 3% was not felt to be a major concern to the practice.
8. An overwhelming 95% felt the staff at the surgery helpful, 1% not very helpful and the remaining 4% gave no response and the practice felt this again was no major concern.
9. Waiting times after the appointment to see the GP offered a range of answers but the majority of 77% considered a wait of between 5-30 mins, with only 10% waiting longer than this. On a positive note 13% felt they were either seen on time or had a wait of less than five minutes. Again this feedback is acceptable and the practice felt although there was room for improvement it is often difficult to run to time if a patient presents with numerous concerns or the clinician faces a difficult consultation.
10. As above the waiting times are of no real concern although improvement can be made and is noted from the clinical team. 60% felt they didn't have to wait too long although 25% felt it was a bit too long.

Patients were asked if they felt the need to improve any of the services at the surgery, which offered an array of comments as per the patient survey.

Generally the comments are extremely positive with only a few negative concerns ie website poor, this is continually monitored and updated, now the practice has upgraded the clinical system patients have more functions available to them ie ordering of repeat medication on line, and text messaging to remind patients of their appointments. The practice will continue to monitor the uptake of booking appointments on line and as patient demand increases we will endeavour to meet this requirement.

A concern from last year has been raised again with regards to the waiting room being very cold and drafty. The partners have, within the year upgraded; once again the heating system and installed additional heaters; along with loft insulation to try and address this issue. The Council have put in secondary glazing and it has been acknowledged that although the new automatic doors make life easier to enter/exit the surgery they do cause some of the problems with regards to the heating as they are constantly opening and closing. On further investigation with the installation company the doors were reprogrammed to address this issue. However, this has not worked due to the complexities of the automatic programme mechanism and the practice is now in discussion with the installation company to address it as soon as possible. The practice has now received a report from the installation company advising of various solutions to rectify the issues as stated. It has been agreed that the inner door will be re-installed to open the other way, thus reducing the wind tunnel effect through the porch. Push

Button mechanisms will also be installed to ensure the door only opens when needed which will again reduce the unnecessary open and closing thus pushing the cold air into the practice.

Patients are voicing their disappointment at having to phone in on the day for an appointment but from discussion with the reception team this is due to patients requesting to see a specific GP and not wanting to wait for the next pre-bookable appointment. The practice feel that although this is obviously a concern if the patient chooses to see a particular GP and they are booked then it is unfortunate that they will be asked to call for a same day appointment rather than wait.

### **Details of the Action Plan**

The specific action points the practice can learn from and take forward are :

1. Ensure sufficient lighting for patients/staff on car park
2. General comments re appointments availability and telephones being engaged – practice to offer more appointments online and advertise, thus hopefully enabling patients to book at a suitable/convenient time and reduce the amount of telephone calls to the practice
3. To publicise when the GP is available
4. To address the waiting times ie GPs running to time
5. To address the heating in the waiting area

The results of the survey and action plan were uploaded to the website for all patients to have access to.

### **Opening Times**

Monday- Friday 08.00am-18.30pm  
Saturday-Sunday Closed