

Sunbury Health Centre
Group Practice
Patient Survey 2017

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1. Introduction

The Annual Patient Survey for Sunbury Health Centre Group Practice (SHCGP) for 2017 was carried out between 24 April and 4 May.

2. Aims and Objectives

The aim of the questionnaire was to establish how patients feel about the services the Practice provides and highlight areas where improvements could be made.

The results provide a valuable blend of quantitative and qualitative data and, as in previous years, the outcomes of the 2017 survey will be reviewed by the Partners and the Practice Management Team and will also be discussed with the PPG (Patient Participation Group). This will determine priorities that the Practice and PPG will work on in the coming year.

3. Methodology

A small group of the PPG (including SHCGP colleagues) reviewed the patient questionnaire undertaken by the Practice in the previous year to ensure that the questions were fit for purpose.

The survey was accessible in three ways:

- on line, via SHCGP's web-site
- a paper copy was available at Reception
- questionnaires were also handed out by Reception staff as patients attended their appointments.

Patients either completed the questionnaire in the Waiting Room, before or after their appointment, and returned the completed questionnaire to Reception or completed the questionnaire online.

A total of 687 questionnaires were received, this is very encouraging and builds upon the number of responses received in 2016 (555) and in 2015 (417). In addition to the set questions, the opportunity to enter free text was available enabling both qualitative and quantitative data to be gathered. Overall 784 comments were received, providing very helpful feedback for the development of services and improvements.

The paper based results were inputted into the Survey Monkey web portal by members of the PPG adding to those surveys completed online. The Survey Monkey software was then used to help analyse the data.

The assistance of the PPG members to enter the data again was much appreciated by the Practice.

4. Results *

Quantitative Data

A summary of the findings is outlined in the following sections:

- a. Patient access
- b. Clinical performance
- c. Overall satisfaction with the Practice
- d. Premises
- e. Demographics

a. Patient Access

Improving patient access is an important focus for the Practice and in November 2016 a new appointment system was introduced to help improve access. It is therefore very pleasing to note that the most common way of making an appointment is now by telephone, the figures for 2016 are in brackets:

- Automated telephone system 28% (18%)
- Telephoning the Reception 30% (29%)

25.5% of patients are now using the online booking system compared to only 5% last year. Only 17% of patients now book an appointment in person at the Practice, compared to 48% in 2016. Therefore booking an appointment by person is now the least common way of making an appointment, whereas last year it was the most popular. *This is excellent confirmation of the positive impact the changes to the appointments system are having on patient access.*

Over half (51%) of patients who have ever used the automated telephone service rated it *good* or better; 55% managed to make a 'satisfactory appointment'.

The respondents were very positive about their experience of speaking to a Receptionist to make an appointment; 78% rated it to be at least *good*, 53% *very good* or *excellent*. For those patients who were not able to make a satisfactory appointment (45%) the main reason was overwhelmingly a lack of appointments (82.5% of respondents).

Slightly more than half of the respondents have registered to use the online appointment system and this is encouraging. Of those who have used the online system to book an appointment 82% rated the experience as at least *good*, 37.5% judged it to be *excellent*.

Respondents who had ever visited the Practice to make an appointment were also very positive, 71% judged the experience to be at least *good*, 44% *very good* or *excellent*. The majority of whom (77%) were able to make a satisfactory appointment. The main reason again for not being able to make a satisfactory appointment was the unavailability of a suitable appointment. Those who were not able to make a satisfactory appointment mainly decided to use a Walk-in Centre (76%). The Walk-in facility in Ashford was used most by respondents (42%), Teddington (17%) and Weybridge (18%) having similar usage.

When asked how patients rated the new Appointment Booking System (introduced in November 2016) 56.5% of respondents thought it was at least *better* than the previous system, which is very encouraging, 22.5% thought there was *no change* and 15% had *yet to use it*.

Performance on telephone call answering times has not improved since 2016, (responses for 2016 are shown in brackets). 2017 responses indicated that 38% (38%) of calls are being answered within 0-5 minutes, 28.5% (26%) in 6-10 minutes and 15% (13%) in over 10 minutes.

When asked to rate the manner in which patients were spoken to when they were able to contact the Practice the response was *good* or better 86% of the time (84% in 2016), a constant 2% annual increase since 2015.

Patients' experience of waiting times when attending appointments has improved. Waiting times of 10 minutes or above, have fallen by 8% when compared to 2016 to 57%, 81% of patients rated waiting times as *reasonable* or *better* which is a 4% improvement when compared to 2016.

The system for requesting a repeat prescription has been improved to enable patients to do this on line and yet only 20% of respondents use the SHC website or Patient Access to do this. 46% of patients use the pharmacy and 34% continue to drop off a paper request at the Practice. 88% of respondents found their preferred system *easy* or *very easy* to use. This was a new question this year and therefore there is no comparative data with previous years.

Another new question introduced this year was to ascertain how patients find out about general information on services, developments and changes at the SHCGP. Half of the respondents said that they found this from the Practice's website, 40% the Practice newsletter, 7% from the PPG website and 2% from PPG Open Meetings. Other sources of information included 'Sunbury Matters', Lower Sunbury Residents' Association (LoSRA) newsletter, Sunbury on Thames Facebook page and from visiting SHC.

Planned solutions to the challenges in relation to patient access are outlined in the responses to the qualitative data later in the report.

**Please note - not all respondents answered all questions. The percentage quoted relates to those who answered the relevant question*

b. Clinical Performance

After visiting a Doctor 44% of patients felt *much more* able to understand their problem or illness, this is the same figure as in 2016. 39% felt that their understanding of their problem or illness had improved a *little more*, which is a 3% improvement on 2016.

The time a Doctor spends with patients was rated *good* to *excellent* by 67% of patients, which is a 5% decrease when compared to 2016. This figure rose to 94% of patients who rated this time to be *reasonable* to *excellent*, the same percentage as last year.

86% of patients rated as at least *good* 'the patience and listening to questions and worries by the Doctor', this increased to 98% when *reasonable* to *excellent* responses are considered, a slight increase on 2016 (97%).

'Caring and concern by Doctors' was rated as at least *good* by 84% of patients and *reasonable* to *excellent* by 97% of patients, this is very slightly down on 2016 (98%).

78% of patients would *definitely* or *probably* recommend their Doctor to family and friends very slightly down from 79% in 2016.

The role of the Nursing Team and the Health Care Assistants (HCA) has been enhanced significantly at SHCGP and therefore this year the questions about

these services have been extended to ensure appropriate feedback is received about the range of provision provided.

56% the respondents had seen either a Practice Nurse or HCA in the last 12 months. 91% of patients rated the quality of nursing care as *good* to *excellent* (the same as in 2016). 86% of patients saw the nurse or HCA within ten minutes and 78% of patients thought that this wait was at least *good*.

73% of patients responded that the manner in which Practice Nurse or HCA listened to them was *very good* or *excellent* and 74% thought that the quality of care they provide was *very good* or *excellent*.

The manner in which the Nurse or HCA explains health problems or any treatment that patients might need was rated at least *good* by 90% of patients and 67% rated it as *very good* or *excellent*.

87% would *definitely* or *probably* recommend the Practice Nurses or HCAs to family and friends very slightly down from 88% in 2016.

c. Overall Satisfaction with the Practice

It is very encouraging to note an increase of 8%, when compared to 2016, in the percentage of respondents (20%) who were *completely satisfied* with the Practice. In addition there was a significant improvement in those patients who were *satisfied* 46% compared to 33% in 2016. The percentage of patients *not satisfied* was 13% very similar to 14% in 2015 and 2016.

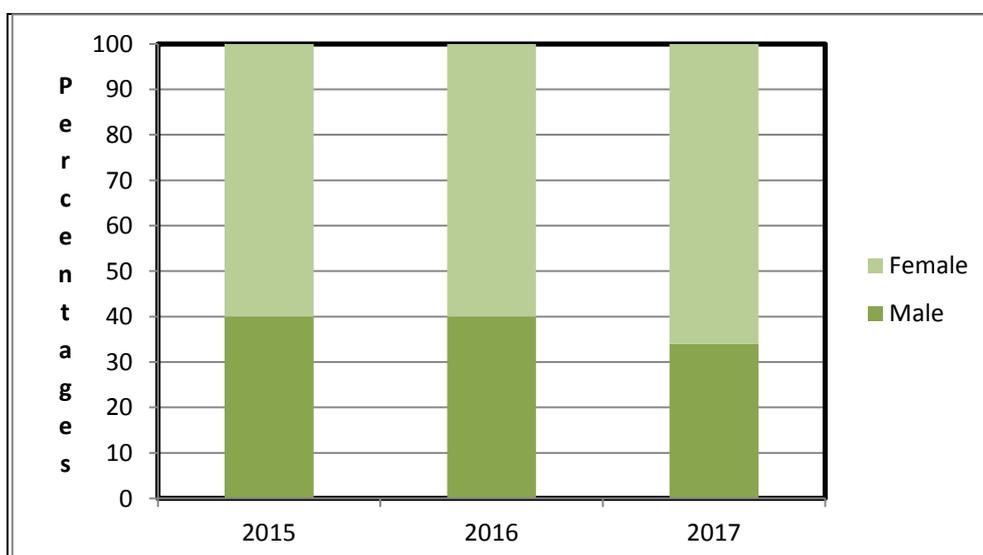
It is also very pleasing to see an increase of 20% in the number of respondents (77%) would *definitely* or *probably* recommend the Practice to family and friends, 8% of patients who would *definitely not* recommend the Practice is 1% lower than the figures for 2015 and 2016.

d. Premises

Premises were not specifically measured this year although challenges remain. This is discussed further in the next section.

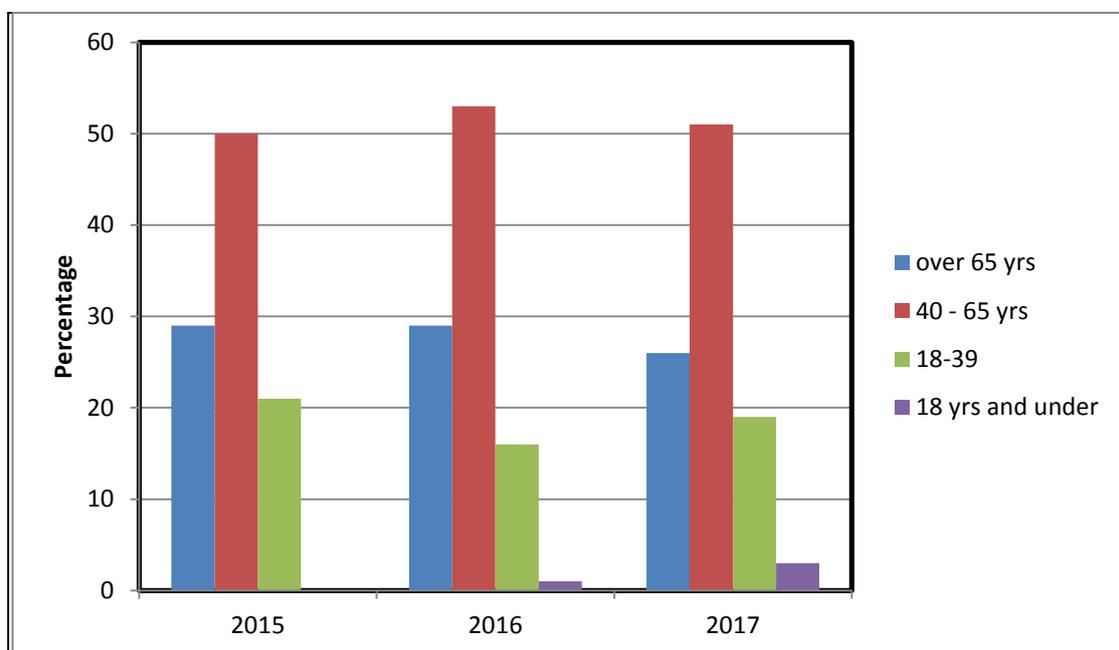
e. Demographics

In the last three years the demographics of those who responded to the questionnaire have changed very little as shown in the bar chart below. In 2015 and 2016 the gender split was 60% were female and 40% were male. In 2017 this had altered slightly to 66% and 34%.



During this time the age of respondents has also only fluctuated slightly as shown in the graph below. In 2017:

- 26% of the respondents were over 65 years of age (in 2016 and 2015 this was 29%)
- 51% were aged 40-65 years (in 2016/15 this was 53% and 50%)
- 19% were aged 18-40 years (in 2016/15 this was 16% and 21%)
- 3% were 18 years and under (in 2016 this was 29% and in 2015 this data wasn't collected).



Qualitative Data - (Free text suggestions for services and improvements)

The large number of responses received were of varying length and detail, providing valuable insight into the services and improvements that patients would like the Practice to provide. The categories for comments were very similar to last year.

Patient Access

The responses to the questions highlighted the difficulties some patients continue to experience in relation to accessing appointments.

Issue	Progress
<p>Online booking:</p> <ul style="list-style-type: none"> • Ability to register online. • Being able to book appointments for the same day. 	<p>Staff at SHCGP are actively promoting the online services available for patients to use. 'Healthwatch Surrey' is visiting the Practice on Friday 6th October 2017 from 10 am -12 noon as part of 'Get Online' week. A national target of 20% of patients having an active online account per Practice by March 2018 has been set.</p> <ul style="list-style-type: none"> - SHCGP is currently at 18% and efforts to promote online services will continue. <p>50% of appointments are available for 'on the day booking' online or via the automated phone system from 6 a.m.</p>

<p>More appointments available on the day.</p>	<p>Since the 2017 patient survey was undertaken two Nurse Practitioners have joined the team together with a GP Registrar which have added to capacity. SHCGP will continue to monitor and develop the number of appointment available, in line with patient numbers.</p>
<p>Increase the number of Doctors at the Practice.</p>	<p>The Practice has been developing a multi-disciplinary team comprising GPs, Nurse Practitioners, Practice Nurses, HCAs and Phlebotomists. The overall capacity of the clinical team has increased and two new clinical rooms have been made available within the last few months. Patients are directed to the member of the team best placed to deal with their medical issue, which is not always a GP.</p>
<p>Decrease the length of time it takes for the telephones to be answered.</p>	<p>SHCGP has invested in a new telephone system with a call monitoring facility that will enable the Management and Reception Teams to have a visual display of call waiting and answering times and average ring times. This will become fully operational when the new Reception is finished. Improving call answering times is a key objective for the Practice in the coming year.</p>
<p>Later opening/Saturday opening</p>	<p>The Practice currently operates extended hours, opening for appointments from 7.20 am onwards. There are no current plans or resources available to extend opening into the evening or weekends.</p>
<p>Ensure that time spent understanding patients' illnesses/issues is consistent between doctors.</p>	<p>As a practice we undertake around 46,000 face to face GP appointments each year for our patient population of 18,700. Some of these consultations are for new illnesses whilst others are for continuing problems. Each appointment is 10 minutes long although the GP will take the necessary time to deal with each individual patient's issue. As you can appreciate some problems take much longer to deal with than others.</p>
<p>Being able to see your own doctor or another of choice to build a relationship and continuity of care.</p>	<p>All patients have a named GP although patients are able to see any Doctor of their choice. Many of the GPs work part-time and the days they usually work will be included on the website in future and also displayed on notice boards.</p>

<p>Catering for those patients with additional needs, in particular those</p> <ul style="list-style-type: none"> • with learning difficulties • who are infirm • who are elderly • who have mobility issues • who are visually impaired (could letters be written in a larger font?) 	<p>SHCGP recently participated in a survey following the publication of a report from HealthWatch Surrey called ‘<i>My GP journey-learning from the experience of seldom heard groups</i>’. SHCGP will be reviewing the report with the PPG to identify any further steps that the Practice can take in light of the report’s recommendations. It is also hoped that the new Reception, due to opened shortly, will provide better access and that the increased use of online and texting services will have a positive impact on accessibility.</p>
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Premises/Physical Environment

The limitations of the building and physical environment were again widely commented upon.

Issue	Progress
<p>Better premises to cope with the large number of patients.</p>	<p>The building is owned by NHS Property Services with the Practice renting 45.85% of the premises. The remainder is leased to Central Surrey Health (CSH) who provide community services including District Nursing, Health Visiting, Podiatry and Speech & Language Therapy. The Practice is currently using two additional clinical rooms and hopes to formalise the lease of these rooms thereby providing approximately 250 extra GP, Nurse or HCA appointments per week. Extensive efforts have been made to improve the building and develop capacity. Funding was secured for a new Reception and to improve the Waiting Room. To enable improvements to the Reception, patients’ notes needed to be moved and this was completed earlier this year. The Reception works are due to be completed shortly. Proposals to further increase the number of consulting and nursing rooms have also been submitted. As the property is leased from NHS Properties the Practice is awaiting decisions from them and NHS England on whether they can go ahead, although it is agreed that the current premises issues need to be addressed.</p>

<p>A redesigned Reception area that provides privacy when speaking with Receptionists.</p>	<p>The new Reception area is due to open shortly and it is hoped that this will greatly improve patients' experiences when visiting the Practice.</p>
<p>Although it was acknowledged that the previous drab Waiting Room had been improved there were further suggestions/comments about how it could be further enhanced:</p> <ul style="list-style-type: none"> • a water fountain • an area for children to play whilst waiting for their/their parents' appointment • free Wi-Fi • encourage schools to exhibit their students' artwork • where has the information gone that used to be displayed in the Waiting Room? • BBC news being streamed alongside important messages on the screen. 	<ul style="list-style-type: none"> • The costs of introducing a water fountain will be reviewed although as a shared building CSH will be approached to share the costs. • Free Wi-Fi is due to be introduced this autumn following funding from the CCG (Clinical Commissioning Group). • The Practice and the PPG will review the potential to display students' art work. • The information previously displayed in the Waiting Room is now in the foyer and on the TV screen in the Waiting Room. • BBC News can be reviewed on patients own devices when free Wi-Fi is introduced - the screen in the Waiting Room is intended for important Practice or medical information in addition to being the patient call-in screen.
<p>Cleaning should be improved, particularly the Waiting Room floor and the toilet (which is also in need of redecoration/modernisation).</p>	<p>The Practice has raised this with the landlord and CSH who manage the cleaning contract. The Practice has followed this up with both of these parties and has asked for the contract to be re-tendered with an updated specification. Regrettably, as a tenant, the Practice is not in control of the cleaning but continues to express its dissatisfaction with the current very poor standards.</p>
<p>Implement an 'in' and 'out' system for the car park and increase capacity.</p>	<p>The car park has been resurfaced following feedback from a PPG Open Meeting. Unfortunately capacity cannot be increased and there are no resources to implement car park 'wardens'. There are significant problems with parents parking in the car park and then taking children to school. This coincides with SHCGP's busiest times - consequently the Practice has contacted the school, who have offered to publish in their newsletter the number plates of cars parked inappropriately.</p>

Communications / Technology

Improved communications closely relates to patient access, areas that were suggested to focus upon were:-

Issue	Progress
Providing an email address for general enquires and prevent the need to queue at Reception.	There are currently no plans to introduce email for patient enquiries. The Practice will however continue to review new technology as it becomes available and develop accordingly.
Making greater use of the texting service to send individual messages e.g. to alert to a problem with a repeat prescription.	The Practice will review extending the use of Mjog as part of future plans.
Sound returned to the screen in the Waiting Room	This has been switched back on.
Have a notice board that provides patients with information about current developments/events.	The information on the website and the screen in the Waiting Room have been reviewed and developed. In addition the newsletter has been improved. The Practice will review messages via Mjog and continue to encourage all patients to register for the Mjog texting service. Noticeboards will be developed further when the Reception improvements have been completed. A review of SHCGP communications will be discussed with the PPG.
It would be helpful to be able to book appointments with the Nursing Team online.	This is not currently possible as the nursing appointments are of varying length. This will however be investigated further to ascertain if a similar system operates effectively in other practices.
A number of Reception staff are rude and have an abrupt manner.	This is not reflected in the survey results. Significant progress has been made with the development of a more customer service ethos. With the recruitment of new members of the team the Practice is confident that future surveys will continue to reflect a high level of satisfaction with Reception staff.
Having the names of all the Doctors on the web-site and keeping this updated.	This has been done. The Practice continues to develop the web-site with the valued assistance of the PPG. Doctors' specific medical interests are also included.

The signage needs updating with correct information.	Old signage has been removed as part of the building works. Some signage belongs to the community providers and not the Practice. The signage on the front of the building is owned by NHS Property Services and the practice will liaise with them about removing it.
Being informed when your allocated Doctor leaves the Practice and being told who your new Doctor is.	This has been addressed and communication will be sent increasingly using the texting service.
A SHCGP App - to book/cancel appointments and access to Newsletters.	SHCGP will be introducing a Mjog App that enables the booking and cancelling of appointments and many other features. The SHCGP newsletter is available on the website which can be accessed via a Smartphone.

Additional services

The following additional services were suggested:-

- Well men/women clinics
- Annual check up for the over 60/65 age group
- Health awareness sessions for the different age groups.

Additional services are being considered however there is currently a limitation on space. The Practice will review what may be possible as part of on-going plans and update via the website and the newsletter when additional services are introduced.

6. Conclusion

The Practice has focussed on access issues to a great extent in the past year. It is positive to see the increased use of the automated and online services to book appointments. A major issue in previous years has been the morning queue - with the changes to the appointment system, the increased use of online patient access and the automated phone system the queue has been eliminated.

The increase in the positive experience when speaking to a member of staff at Reception is a particularly welcome development, reflecting the drive to become more patient/customer focussed. Together with the changes to recruitment processes and the positive impact from the new members of staff the Reception Team is beginning to see positive changes.

Clinically the results remain largely consistent and are rated good or excellent by patients. SHCGP has been awarded teaching practice status by Health Education England and is now a centre of excellence for teaching the GPs of the future.

Overall satisfaction with the Practice has increased, as has the percentage of patients who would recommend the Practice to their family and friends. This is consistent with the feedback from the Mjog texting service which at the time of writing suggests that 88% of patients would recommend the Practice.

It is also worth noting that in addition to the patient survey valuable feedback is obtained from the Mjog texting service and this feedback will be incorporated in the action planning for the year ahead.

Premises remain an issue although progress has been made with the relocation of patient notes, enabling the redevelopment of the Reception area which is due to be completed in October 2017. This is against a backdrop of a continuing dispute with SHCGP's landlords, NHS Property Services, who have raised service charges by over 700% in the last year. The Practice continues to explore options to redevelop the premises further and in the longer term to look at rebuilding/relocating.

Despite space limitations additional services have been successfully introduced and these include the Hearology microsuction service, Quit 51 smoking clinic and Minor Surgery clinics. All of these new services are proving to be popular with patients. The Practice is also exploring the provision of a fortnightly non-obstetric clinic.

Telephone access and call answering times continue to be an issue. The new Reception back office will have a call display enabling the Reception Management Team to view real-time call volumes and waiting times and respond accordingly. Added focus will be given to using members of the Reception Team to cover peak call times more effectively. With the additional Reception staff recently recruited the intention is to improve performance in this area in the coming year.

The Practice will continue to work with the PPG to improve and develop its services. The Practice would like to extend its thanks to all of those patients who participated in the survey this year and to the PPG for their assistance in analysing the results. The valuable feedback will help enable SHCGP to implement positive change for the patients in the future.

The Partners

Sunbury Health Centre Group Practice

27.9.17