

Padarn Surgery Patient Satisfaction Report 2017/18

Introduction

Padarn Surgery undertook a patient satisfaction survey as part of the Cluster Network requirements to obtain feedback about practice services/opening times. This was carried out between May and September 2017 and 250 patients were surveyed. The questionnaires were distributed each day to patients visiting the surgery. The questionnaire is attached at Appendix 1.

The questionnaire was designed to obtain patients' views on the way Padarn Surgery offers appointments and services.

Results – attached at Appendix 2

Patient Demographics

The majority of questionnaires were completed by female patients, which is expected as women tend to visit their GP more frequently than men. Of note this year the majority of questionnaires were completed in the age group 66 and over years (83). In previous years the student population had predominantly completed the questionnaires. As expected the majority of patients were either in full time or part time employment (115). 89 were retired, 18 were students.

The best person for you to see

The vast majority of patients (206) were aware that the GP is not always the most relevant healthcare professional to deal with their medical problems. Of note 235 of those surveyed indicated that they would be happy to see another healthcare professional depending on the problem. 9 patients indicated that they would only see a GP for their medical condition. There were 10 comments received from patients relating to this area. Three comments stated that they would prefer to see a GP if they felt they needed antibiotics, as the nurse cannot prescribe. Another commented that as long as the nurses were experienced enough to deal with particular problems or could transfer their care to a doctor if required they were happy. There were no comments received this year, as in previous years, stating that they would not be comfortable divulging their medical problem to a receptionist.

Conclusion

The practice has recognised that service provision has to change. Other health care professionals' roles have been evaluated to achieve the best outcomes. Workforce planning has been factored in to the long term practice development plan, hence the appointment of 2 new practice nurses with increased hours to facilitate the workload distribution. Health care assistant roles have changed taking on some of the traditional nurse roles e.g. ear syringing, spirometry, some vaccinations.

One practice nurse is in the process of being trained in independent nurse prescribing to provide a seamless and more efficient one stop minor illness service for patients.

On comparison with the results of last year's questionnaire the majority of patients now understand that there are other health care professionals to deal with their particular problem. Further plans to raise patient awareness of the most appropriate options for their health condition will be displayed on the Patient information screen and on our website.

We endeavour to meet patients' expectations on continuity of care. However due to service constraints this is not always possible e.g. availability of GP, annual leave, sickness of GP.

The appointments system

The vast majority of patients (207) were aware that the practice offers 10 minute on the day emergency appointments.

More patients (173) were aware that nurse led appointments were available for minor illness i.e. sore throat, contraception and UTI than last year. This service is now embedded in the practice and patients are aware that this option is available to them..

120 patients said that they were aware of the contraceptive implants, minor surgery and depo provera being offered at the practice.

210 compared with a 35 patients respectively stated that they were aware of the availability of GP telephone consultations.

In all areas covered above more patients are aware of the different appointments that are available to them than last year's questionnaire results.

Conclusion

The practice has taken on board the patients' survey results and is working towards other health care professionals providing part of the service in order for more efficient use of doctor time e.g. more doctor time for the more complex patient conditions. The practice is exploring, with other GP surgeries, differing ways of delivering health care through the use of other healthcare professionals.

The practice has therefore diversified its service provision in light of fewer doctor sessions. 1 new practice nurse was appointed this year. Our senior practice nurse has undertaken a nurse practitioner course and independent prescribing and will be qualified next year. This will enable minor illnesses to be seen in a one stop express clinic with prescriptions issued as appropriate. The practice telephone message that includes a message that patients will be asked for a brief description of their medical problem so that they can be allocated to the most appropriate healthcare

professional has obviously been effective as more patients indicated on the questionnaire that they were aware that nurse led appointments were available. Some receptionists have undergone formal training in basic triage and refer to a list of appropriate minor illnesses that can be seen by a nurse. The results and comments received from patients this year are encouraging, as it seems patients are now more willing to seeing a nurse if appropriate and are becoming used to the receptionist triage and appointments with the most appropriate healthcare professional for their problem.

The practice will look at promoting services offered at the practice to make patients more aware of their options and our provisions e.g. minor illness, contraceptive services, minor surgery and telephone consultations etc.

In order to alleviate the appointments system the practice now offer My Health Online for ordering of routine repeat prescriptions and are exploring the release of certain appointments e.g. flu, smear, diabetes.

In order to reduce DNA rates the practice has utilised the text reminder facility to inform patients of their forthcoming appointment. This incentive has improved availability of appointments as in certain age groups DNA rates are noticeably higher. On review of the DNA rates for this year they have reduced to 3.87% from 4%.

Opening Hours

Patients in this section were asked for their views on Saturday morning openings, late night openings and 7 day a week openings.

Of note, only 28 patients agreed to fewer GP and nurse appointments from Monday to Friday and opening Saturday morning instead. Substantially more patients (143) would prefer the surgery open to 8pm with GP and nurse appointments. 32 of these patients wanted this access across the working week. 71 patients would prefer to leave the opening hours unaltered.

Conclusion

Practices generally are experiencing difficulties in GP recruitment. Conversely patients indicated that they would like an extended provision later in the evenings in an ideal world. Interestingly there was no significant indication that Saturday morning opening would appeal to most patients surveyed This practice has suffered recruitment difficulties over the last 3 years and has had to rely on recruitment from our local GP scheme to fill empty posts. Of concern is that the number of GP registrars on the local scheme is falling dramatically and this will only intensify the

problem. This recruitment crisis is a national problem and we understand the Health Board are aware and are exploring all possibilities regarding encouraging doctors in to the area. The practice is considering differing options of health service provision and is actively involved in networking with other GP practices in the locality to offer access to other healthcare professionals in a primary care setting in the future.

Blood Tests

The patients were asked if their preference would be to use a same day walk in phlebotomy service reinstated at Bronglais. The vast majority of patients (215) indicated that this would be a good service.

Conclusion

Patients obviously like the flexibility that a same day walk in clinic provision offers. This is an area perhaps the Health Board could finance as there appears to be sufficient demand for this service. This would also reduce demand on GP surgeries who are not financed properly for phlebotomy provision and free up Health Care Assistants time for other practice developments e.g. pre diabetic screening spirometry etc.

Appendix 1

PATIENT QUESTIONNAIRE

As the demand for appointments grows year-on-year and patients' needs and expectations increase and NHS resources are stretched to the limit, GP practices throughout the UK are fighting to keep their services targeted and within budget. As part of this we need help from our patients to identify YOUR preference on a range of options.

Please choose from each of the following sections: If you are asked for an explanation to help us understand your answer please provide a brief example which you personally experienced.

SECTION 1. THE BEST PERSON FOR YOU TO SEE

- A) When you come to the Surgery are you aware that the GP is not always the most relevant healthcare professional to deal with your particular problem?
YES NO
- B) Are you happy to see a Nurse Practitioner, a Practice Nurse, a Health Care Assistant or another healthcare professional depending upon the problem you have?
YES NO
- If your answer to B is "no", please give an example of when you have felt that you should have been seen by a GP rather than another healthcare professional?

Continue your answer on the reverse of this sheet if you need more space

SECTION 2. THE APPOINTMENTS SYSTEM

- A) Are you aware that 10 minute emergency appointments are available for on the day urgent matters? YES NO
- B) Are you aware that nurse led appointments are available for minor illnesses such as urinary infection, sore throat, contraception etc? YES NO
- C) Are you aware that we offer insertion of contraceptive implants, depo provera and minor surgery? YES NO
- D) Are you aware that you can consult with a GP on the telephone? YES NO

SECTION 3. OPENING HOURS

It has been suggested by the Welsh Government that GP practices should be open later at night and/or on Saturday mornings for general non-emergency appointments.

They are not proposing to pay for more doctors or nurses or reception staff so in reality this would mean fewer GP and Nurse appointments during the day on Mondays to Fridays.

Please consider the following alternatives and select the one that you feel would best meet your needs:

- A) Fewer GP and Nurse appointments on Monday to Friday and open on Saturday morning instead YES
- B) Fewer GP and Nurse appointments during the morning and open until 8.00pm at night. YES

If you choose B would you prefer to have this on:

- 1 day a week YES
- 2 days a week YES
- 3 days a week YES
- 4 days a week YES
- 5 days a week YES

- C) Leave the opening hours as they are now. YES

SECTION 4. BLOOD TESTS

The practice is trying to encourage the Health Board to reinstate “same day walk in phlebotomy services” at Bronglais Hospital. Would you consider using this service if available?

YES NO

Thank you for completing this questionnaire. We need to make sure that the answers we get reflect the broadest range of people who attend the practice.

Please help us to ensure we have a fair cross-section of our patients by selecting YOUR PROFILE from the following:

AGE:

10 – 15 16 – 25 26 – 35 36 – 45 46 – 55 56 – 65 66 – 75 76 +

MALE FEMALE

PART-TIME WORKING FULL-TIME WORKING NOT CURRENTLY WORKING

RETIRED STUDENT

DATE: _____

Please hand this completed form either to the doctor or nurse you are here to see or the receptionist.

Thank you again.

The Partners, Padarn Surgery, Aberystwyth

Appendix 2

Padarn Surgery Patient Questionnaire

17/05/2017 – 07/09/2017

250 questionnaires completed

Patient Demographics

| Sex | | | | | | | | |
|------------|-----------|-------------|---------|---------|--------------|--------------|-----|-----|
| Male | | | Female | | | Not answered | | |
| 87 | | | 145 | | | 18 | | |
| Age group | | | | | | | | |
| 10-15 | 16-25 | 26-35 | 36-45 | 46-55 | 56-65 | 66-75 | 76+ | N/A |
| 0 | 37 | 26 | 29 | 33 | 33 | 57 | 26 | 9 |
| Employment | | | | | | | | |
| Part-time | Full-time | Not working | Retired | Student | Not answered | | | |
| 46 | 69 | 19 | 89 | 18 | 9 | | | |

Section 1. The best person for you to see

| | Yes | No | Not answered |
|---|-----|----|--------------|
| A) When you come to the Surgery are you aware that the GP is not always the most relevant healthcare professional to deal with your particular problem? | 206 | 38 | 6 |
| B) Are you happy to see a Nurse Practitioner, a Practice Nurse, a Health Care Assistant or another healthcare professional depending upon the problem you have? | 235 | 9 | 6 |
| If your answer to B is "no", please give an example of when you have felt that you should have been seen by a GP rather than another healthcare professional. | | | |

See report.

Section 2. The appointments system

| | Yes | No | Not answered |
|--|-----|-----|--------------|
| Are you aware that 10 minute emergency appointments are available for on the day urgent matters? | 207 | 40 | 3 |
| Are you aware that nurse led appointments are available for minor illnesses such as urinary infection, sore throat, contraception etc? | 173 | 75 | 2 |
| Are you aware that we offer insertion of contraceptive implants, depo provera and minor surgery? | 120 | 118 | 12 |
| Are you aware that you can consult with a GP on the telephone? | 210 | 35 | 5 |

Section 3. Opening hours

| | |
|---|-----|
| A) Fewer GP and Nurse appointments on Monday to Friday and open on Saturday morning instead | 28 |
| B) Fewer GP and Nurse appointments during the morning and open until 8pm at night | 143 |
| If you chose B would you prefer to have this on: | |
| 1 day a week | 4 |
| 2 days a week | 38 |
| 3 days a week | 46 |
| 4 days a week | 15 |
| 5 days a week | 32 |
| Not answered | 8 |
| C) Leave the opening hours as they are now | 71 |
| Not answered | 8 |

Section 4. Blood tests

| | Yes | No | Not answered |
|---|-----|----|--------------|
| The practice is trying to encourage the Health Board to reinstate "same day walk in phlebotomy services" at Bronglais Hospital. Would you consider using this service if available? | 215 | 30 | 5 |

Section 2. The appointments system

| | Yes | No | Not answered |
|--|-----|-----|--------------|
| Are you aware that 10 minute emergency appointments are available for on the day urgent matters? | 195 | 55 | |
| Are you aware that nurse led appointments are available for minor illnesses such as urinary infection, sore throat, contraception etc? | 108 | 142 | |
| Are you aware that we offer insertion of contraceptive implants, depo provera and minor surgery? | 125 | 115 | 10 |
| Are you aware that you can consult with a GP on the telephone? | 136 | 112 | 2 |

Section 3. Opening hours

| | |
|---|-----|
| D) Fewer GP and Nurse appointments on Monday to Friday and open on Saturday morning instead | 44 |
| E) Fewer GP and Nurse appointments during the morning and open until 8pm at night | 106 |
| If you chose B would you prefer to have this on: | |
| 1 day a week | 7 |
| 2 days a week | 33 |
| 3 days a week | 31 |
| 4 days a week | |
| 5 days a week | 35 |
| F) Leave the opening hours as they are now | 94 |
| Not answered | 6 |

Section 4. Blood tests

| | Yes | No | Not answered |
|---|-----|----|--------------|
| The practice is trying to encourage the Health Board to reinstate "same day walk in phlebotomy services" at Bronglais Hospital. Would you consider using this service if available? | 208 | 26 | 16 |