



Patient Participation Report

2013/2014

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Summary

The results of the Patient Survey conducted in 2013/2014 and subsequent achievements are summarised below.

You said...	We	The result is...
<p>It was less easy to speak to or get through to the practice than it had been previously</p>	<p>Agreed to investigate ways to improve telephone access to the surgery, eg:-</p> <p>a) Revisit appointment protocol to avoid asking patients to call back to access appointments which are embargoed in the system.</p> <p>b) To approach Cheshire ICT Service to ascertain whether it is possible to play a message advising the line is engaged rather than hear an engaged signal.</p> <p>c) To consider having an extra incoming line to the surgery.</p>	<p>a) A change to the appointment protocol. There are no longer any embargoed appointments in the system and patients are not asked to call back therefore reducing the number of calls to the surgery.</p> <p>b) That whilst it may be possible to adapt the telephone system, the cost of doing so would be prohibitive as there are no measurable benefits to patients.</p> <p>c) That this option will be revisited if we find telephone access has not improved by changes to the appointment protocol above.</p>
<p>That whilst you were satisfied with our appointment system, it was confusing and frustrating having to ring back at certain times to make an appt</p>	<p>Agreed and acknowledged that our demand and capacity were mismatched which exacerbated the problem.</p>	<p>We increased the number of appointments to match capacity with demand,</p> <p>And</p> <p>Changed the appointment protocol so there are no longer any embargoed appointments. Patients are offered the next available appointment at the time of calling the surgery.</p>
<p>We should reinstate chairs of varying heights to the waiting room.</p>	<p>Agreed to purchase new chairs to replace the broken ones which had been taken out of use.</p>	<p>Four chairs of varying heights have been ordered for the waiting room.</p>

Background

Broken Cross Surgery is located in Waters Green Medical Centre, a large healthcare facility which houses all of the six GP practices in Macclesfield.

The centre opened in July 2006 and the GPs' vision was to enable them to provide care to their registered patients in high quality, purpose built premises. By coming together within one building, it would also create the opportunity for the practices to work together to make a greater range of services available to their patients within the community.

Each of the six GP practices has their own doctors and staff, and provides care to their own registered list of patients.

Each of the six GP practices is participating in the Patient Participation Directed Enhanced Service (DES). This was originally issued as a two-year DES from April 2011 – March 2013 and was extended for the year 2013-14.

Patient Demographics

Broken Cross Surgery currently has a patient list size of 5700 patients and is the smallest practice in Macclesfield. However, the practice population has grown quite significantly over the years, for example, the patient list size when moving into Waters Green in July 2006 was just 4299. This represents a 32.5% increase on today's population and the list size continues to grow.

Whilst this continual increase has presented new development opportunities and operational challenges in equal measure, it is satisfying to see that Broken Cross Surgery continues to provide high quality clinical care (see Quality & Outcome Framework - www.qof.hscic.gov.uk) and continues to achieve high ratings in national patient surveys (see the GP Patient Survey, www.gp-patient.co.uk).

Although Macclesfield town has a high percentage of elderly patients, you will see that Broken Cross Surgery has a relatively young population:-

Age →	0-4	5-16	17-24	25-34	35-44	45-54	55-64	65-74	75-84	85-89	90+
Male	204	361	278	478	449	513	314	181	106	22	9
Female	195	392	257	474	399	467	266	194	99	30	24
TOTAL	399	753	535	952	848	980	580	375	205	52	33
	7%	13%	9%	17%	15%	17%	10%	7%	4%	0.5%	0.5%

Opening Hours at Broken Cross Surgery

Monday: 8.00am – 8.00pm
Tuesday: 7.00am – 6.30pm
Wednesday: 7.00am – 6.30pm
Thursday: 8.00am – 6.30pm
Friday: 8.00am – 6.30 pm
Saturday: Closed
Sunday: Closed

Step 1: Process to Develop a Patient Reference Group (PRG)

The Virtual PRG was established in 2012 and has 7 PRG members. There are currently 1 x male and 6 x female representatives.

Age profile:

2 x members: 45 - 54 years
2 x members: 55 - 64 years
2 x members: 65 - 74 years
1 x member: 75 – 84 years

Two members of the virtual PRG group also represent the practice at the wider Waters Green Medical Centre PPG which meets bi-monthly.

Whilst it is recognised that no PRG will ever be truly representative, we feel that our current membership is further complemented by the wider Waters Green Medical Centre PPG which has representatives from each of the six practices, Age UK and the Disability Information Bureau.

Step 2: Establishing and Agreeing Areas of Priority with the PRG

The practice has again surveyed patients to establish key priorities which patients would like to see included in a wider patient survey. The priorities remain unchanged from the previous two years, eg:-

- Getting a routine appointment / being able to book appointments in advance
- Being able to see your dr of choice / continuity of care
- Clinical care (non-specific)
- Waiting times (length of time waiting in reception to see GP)

It was clear that patients from across the six practices shared similar priorities and it was therefore agreed that all six practices would again use the GPAQ questionnaire (General Practice Assessment Questionnaire) to conduct a wider patient survey. The survey was updated in 2013-2014 to GPAQ-R and although slightly different, it was felt the results would present a relatively accurate year-on-year comparison.



GPAQ_R_WatersGre
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Step 3: Collating Patient Views Through the Use of a Survey

The GPAQ survey for Broken Cross Surgery was carried out in November and December 2013. The practice received a total of 223 completed questionnaires and the results were analysed by CMI Publishing, an external company licensed to offer an analysis service.

A summary of the survey results for Broken Cross Surgery is shown below. We have also included results from the 2011-12 and 2012-13 surveys as a comparison.

Copies of the full analysed GPAQ-R report are available on request.

**Broken Cross Surgery
GPAQ-R Survey Results – 2013/14**

	Broken Cross¹ 2013 - 2014	National Survey²	Broken Cross 2012 - 2013	Broken Cross 2011 - 2012
% of patients found Receptionists helpful or fairly helpful	99.5%	92%	99%	99%
% of patients found it easy or fairly easy to get through to the practice	78.6%	67%	91%	90%
% of patients found it easy or fairly easy to speak to a doctor or nurse on the phone	69%	45%	61%	63%
% patients, if they need to see a GP urgently, say they can normally be seen on the same day	56.9	N/A	N/A	N/A
% of patients say it is important to be able to book appointments ahead of time and % of patients find it easy or fairly easy to do so	89.3% 72.7%	N/A	N/A	N/A
% patients are normally seen by their preferred GP same day or next day % of patients consider this good, very good or excellent	17.4% 76.7%	N/A	N/A	N/A
% patients are normally seen by any GP same day or next day % of patients consider this good, very good or excellent	54.5% 80.1%	N/A	N/A	N/A
% of patients said doctor gave them enough time	95.5%	88%	90%	91%
% of patients said doctor listened to them	95.5%	88%	91%	94%
% of patients said doctor explained tests and treatment	93.2%	76%	89%	89%

¹ 223 patients surveyed at Broken Cross Surgery November & December 2013

² 190,038 Patients surveyed from 1,031 GP Practices nationally

	Broken Cross¹ 2013 - 2014	National Survey²	Broken Cross 2012 - 2013	Broken Cross 2011 - 2012
% of patients said doctor involved them in decisions about their care	90%	71%	85%	89%
% of patients said doctor was polite and considerate	98.2%			
NB: question in previous years asks % of patients said doctor treated them with care & concern		81%	89%	91%
% of patients said nurse gave them enough time	84.8%	77%	82%	84%
% of patients said nurse listened to them	82.8%	62%	82%	84%
% of patients said nurse explained tests and treatment	78.3%	68%	81%	82%
% of patients said nurse involved them in decisions about their care	76.1%	59%	74%	80%
% of patients had confidence the GP is honest and trustworthy	99.5%			
NB: question in previous years asks % of patients had confidence in their doctor		93%	97%	98%
% of patients had confidence the GP keeps information confidential	99.1%	N/A	N/A	N/A
% of patients say their experience of this GP surgery good, very, good or excellent	96.2%	89%	95%	96%
% of patients who would recommend this surgery	96.7%	84%	96%	95%

Steps 4 & 5: Agree action plan with the PRG and seek PRG agreement to implementing changes

A meeting was convened to discuss the results of the GPAQ-R Patient Survey and to agree an Action Plan. The meeting was held on Thursday 30th January 2014 – see minutes below.



20140130 Meeting
30th January 2014..c

Broken Cross PRG Action Plan – 2013/2014

Action	Tasks	Who responsible	Timescale	Review
To investigate ways to improve telephone access to the surgery.	<ul style="list-style-type: none"> • Revisit appointment protocol to avoid asking patients to call back to access appointments which are embargoed in the system. • To approach Cheshire ICT Service to ascertain whether it is possible to play a message advising the line is engaged rather than hear an engaged signal. • To consider having an extra incoming line to the surgery. 	<p>Practice Manager & Reception Manager</p> <p>Practice Manager</p> <p>Practice Manager & GPs</p>	January – March 2014	6 months after implementation
To monitor appointment access rates on a weekly basis between February 2014 – April 2014	<ul style="list-style-type: none"> • Measure next available routine appointment available for booking • Measure next available third routine appointment available for booking 	Practice Manager	End April 2014	Weekly February – April 2014
To reduce the number of wasted DNA appointments	<ul style="list-style-type: none"> • To calculate the number of DNA appointments on a monthly basis • Display information on a poster around reception • To continue to use the practice DNA policy 	Reception (PB)	From February 2014	Ongoing
Reinstate one or two chairs of various heights in waiting room	<ul style="list-style-type: none"> • Reinstate one or two chairs of various heights in waiting room 	Practice Manager	ASAP	N/A

Step 6: Actions Taken: You Said – We Did

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