

LINKWAY MEDICAL PRACTICE

PATIENT PARTICIPATION DIRECT ENHANCED SERVICE

YEAR 2 REPORT

BACKGROUND

The Patient Participation Direct Enhanced Service is a two year DES which is effective from 1st April 2011 until 31st March 2013 and applies to England only.

Its full details can be found at the following link:

<http://www.nhsemployers.org/Aboutus/Publications/Documents/Patients-participation-directed-enhanced-service.pdf>

The key objectives of the Patient Participation DES is to ensure that patients are involved in decisions about the range and quality of services provided and, over time, commissioned by the Practice.

The includes patients being involved in decisions that lead to changes to the services that their Practice provides or commissions, either directly or in its capacity as gatekeeper to other services.

The DES aims to promote the proactive engagement of patients through the use of effective Patient Reference Groups (PRG) and seek views from practice patients through the use of a local patient survey.

One aspect that the practice should focus on is access into the Practice, and also from the Practice to other services in its role as co-ordinator of care, facilitating access to other health and social care providers.

1) Establishing the Patient Participation Group (PRG)

The Linkway Patient Participation Group was formed in August 2011 and it held their first meeting on 12th October 2011. Our Year 1 report gives details on recruitment.

2) PRG Targets 2011-12 Progress to date

At the PRG meeting on 15th February 2012 the results of the 2011-12 survey were discussed and the following areas were agreed as priorities by the PRG and the Practice for Year1:-

- Opening times – The practice should improve communication in a number of ways so that patients are aware of the extended hours.

Outcome required: to improve patient knowledge of opening times.

- Pre-bookable appointments – The practice should monitor the situation and change appointments as and when required.

Outcome required: Improve access to enable patients to forward book appointments more than 2 days in advance.

- Telephone Access – To audit the impact of additional receptionist being employed to work busy times

Outcome required: Improve telephone access

- Telephone Access: To ensure adequate advertisement of web booking service by including in new patient registration documents, on web site and in the surgery.

Outcome required: To increase the number of patients using the web booking service to reduce telephone calls to the practice.

- Complete nurse survey

Outcome required: review nursing services.

- Home visit survey: contact patients who have received a home visit

Outcome required: review home visit service

Work has continued throughout the year and the outcomes are as follows:

- Opening times – The Practice should improve communication in a number of ways so that patients are aware of the extended hours. The practice has added this to the external building doors and is included on the Jayex, New patient packs, Websites, Poster in reception, offered as appointment choices when receptionists search for free slot search on computer, and on Systmonline web booking. **All agreed this target has now been achieved.**
- Pre-bookable appointments –The Practice should continue to monitor the situation and change appointments as and when require. Outcome is required to improve access to enable patients to forward book appointments more than 2 days in advance. Patients are now able to book up to 6 weeks in advance. The practice has employed an additional Doctor for 12 months to help increase the number of appointments. Other services have been introduced such as Health Trainer,

CVD nurses. Discussions are ongoing to bring Slimwell back into the practice, Dementia screening with a consultant on site and the practice is participating in an Elderly care Project and are reviewing all registered patients in nursing and residential homes. **All agreed this target has been achieved.**

- Telephone access –to audit impact of new receptionist being employed to work busy times. The audit was presented at the meeting on 30th May 2012 (page 8, 14) and the group agreed that the practice should continue to monitor this periodically. The 2012-13 patient survey states that 78% of patients said it was easy to phone the practice. The 2011-12 patient survey Q 8a was only 53% so this was a marked improvement. **All agreed that the target has been achieved.**
- Telephone access – to ensure adequate advertisement of web booking service by including in the new patient registration documents on web site and in the surgery. Outcome is to increase the number of patients using on-line self service software to reduce telephone calls to the practice. A patient member of the group confirmed that this has been done. The number of patients now registered on the web site has increased to 800+ patients registered on line and over a 1000 patients using the self-check in each month which also frees up the receptionist time to answer phone calls and deal with other patient queries. **All agreed that the target has been achieved.**
- Complete nurses survey – This has been done and was discussed at the meeting on 30th May 2012 (Page 8) This was also included in the Patient Survey for 2012-13. **All agreed that the target has been achieved.**
- **Home visit survey** – This has been done and was discussed at the meeting on 30th May 2012 (Page 8, 12) This is down for re-audit 2013.**All agreed that the target has been achieved.**

3) Patient Survey for 2012-13

At the meeting on 19th September 2012 (Page 15) the 2011-12 the members were reminded that the Patient Survey for 2012-13 was due to be done at the end of the year. It was agreed that a copy of the format for the 2011-12 Patient Survey would be circulated to the PRG members via email and comments/approval/suggested changes should be forwarded to the practice, ready to be included in the 2012-13 patient survey.

The practice found that the GPAQ Patient Survey had been updated to V3 which included survey questions for the nurses and the format seemed to be styled on the format for the National Patient Survey. It was circulated to the PRG members and it was decided that this would be used instead.

4) Summary of the results of the 2012-13 patient survey

At the PRG meeting on the 30th January 2013 (page 38) the results of the 2012-13 survey (page 20) were discussed and the following areas were highlighted.

The group felt that the results were good and that standards had stayed the same as previous year.

Discussion around opening times Q15 – 8% who said that the opening times were not convenient – of those, 22% said that they would prefer the practice to open before 8am. The practice opened at Christmas time at 7am and 4 out of 12 patients did not attend. The group felt that the current opening hours and extended hours were good and correct at this time for the patients and that there was no need to change them.

The group was surprised that some patients are not aware that the practice offers extended opening times. These are now advertised on

the building external doors as well as on the practice website, included in the Practice Leaflet/New Patient pack, on the Jayex and is also on the SystemOnline Appointment Booking site.

Discussion around Q8 and Q7. Only 3% have said they book on line but 20% of patients say they would prefer to book on line. Again leaflets are available in the waiting areas and this is included in the New Patient pack and on our websites. The more people that book on line the less pressure on the phone lines. A member said that she uses the internet booking site and encourages others to do so. It was decided that this should be included this in a Newsletter.

Discussion around Q 13 waiting for consultation to start. A member of the group asked what had happened to the message on the Jayex that informed the patients how long the Doctor was running behind. This function had disappeared when the practice changed the computer software in August.

The group felt that the patient survey reflected the quality of care that the practice gave to the patients and there was very positive feedback for the practice from the patient members of the group.

The survey will be published on the website and a summary will be available on a poster in the waiting areas.

6) Actions for the PRG 2012-13

Following the results from the Patients Survey 2012-13 and from Year 1 there still seemed to be patients who are not aware that the practice offered extended hours, also to encourage more patients to use the on-line facilities, the following areas were agreed on 30th January 2013 (page 38) as priorities for the group:

- Access - Re-audit the impact of the additional receptionists to ease telephone access
- Patient information - General information leaflets in other languages to inform and encourage patients to use the Practice services correctly.
- Patient information – To encourage more PRG members and to keep other patients informed on the groups work – introduction of a Newsletter and Notice board in waiting area
- Patient information – look at TV screen that links to Intranet
- Patient services – Home visit Audit - Although the first audit showed that patients were satisfied with the level of service offered by the practice, the group agreed that a re-audit would be done in May 2013.

Actions agreed as per attached minutes copies of which are posted on the practice website and NHS Choice website.

Linda Lloyd

Practice Manager PRG Member March 2013

Date.....30/05/2012.....

Linkway PPG Minutes

Time 1-2 pm

Location Linkway MP

Meeting called by:	Linkway Medical Practice	Type of meeting:	PPG 3 rd Meeting
Facilitator:	Linda Lloyd LL	Note taker:	Rachael Faulkner RF
Attendees:	LL, Dr Hughes HH, Ann Harrison AH, Kenneth Harrison KH, Martyn Treadgold MT, Robert Collins RC		

Please read: Previous minutes, Nurse survey results, Commissioning handouts, Quick list of essential standards.

Please bring:

Minutes

Agenda item: Minutes of Previous Meeting **Presenter:** LL

Discussion:

LL welcomed everyone to the meeting. LL went through the minutes of the previous meeting.

Actions from the previous meeting:

The nurses surveys are now completed. LL was still working on the Home Visit Audit and thanked AH for her contribution.

LL has updated the main poster for the 2 public entrances to display up to date opening times for the practice and is on order.

LL will arrange a suitable time/date to meet at MT's workplace to view their TV screen and link to intranet.

Poster has been put on the noticeboards to inform patients they can book appointments and order repeat prescriptions online and on the Jayex display boards.

The new receptionist is now in place. The practice will review whether this has made the phone lines less busy first thing on a morning. To be discussed at next meeting.

The noticeboards have been tidied up.

The poster advertising GP Registrars working within the practice has been worded differently.

AH and KH had looked at the practice leaflets. They wondered whether these were available in other languages. HH had looked into this and general information leaflets were available in other languages. We just need to find out which languages would be most appropriate for our patients. It would be harder to put the leaflets the practice had produced into other languages. LL had produced a list of patients' ethnic backgrounds who are registered with this

practice, this was handed out. 70% White British.

Conclusions:

Action items	Person responsible	Deadline
LL to meet with MT regarding TV screen connected to practice webpage	LL/MT	July 12
To review whether the new receptionist has had an impact on making the phones less busy on a morning.	LL	August 12
To look at getting general information leaflets in other languages.	LL/HH	August 12
Home visit audit	LL	June 12

Agenda item: Patient Survey Results – Nurses 2012

Presenter: LL

Discussion:

LL handed out the results of the patient survey for the nurses for 2012. Overall everyone was happy with the results. The only issue MT had was with question 8a – still concerns about patients being able to get through to the practice in a reasonable amount of time. LL hoped this would be sorted out now the new receptionist was in place.

Conclusions:

Action items	Person responsible	Deadline
✓		

Agenda item: Healthworks and Sandwell & West Birmingham Commissioning Group and role of patient participation

Presenter: HH/LL

Discussion:

HH explained “commissioning” to the group. LL gave out handouts.

Our practice will be part of the “Healthworks Local Commissioning Group”. We have now grouped together with other groups to form one big “umbrella group” the Sandwell and West Birmingham Clinical Commissioning Group Or SWBCCG.

From April 2013 local practices within the group will commission the services from the hospital. This means a lot more emphasis on financial control.

The commissioning groups need a representation of the PPGs. All practices groups will feed into a patient group at board level. LL handed out the latest framework detailing what the patients are going to be involved in. RC will attend a meeting with LL on the 14 June to get more information about what will be happening.

Conclusions:

Action items	Person responsible	Deadline
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- ✓ LL and RC to attend meeting on the 14 June and to feedback to other members of PPG via email LL/RC
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Agenda item: NHS Patient Experience Framework and Care Quality Commission CQC **Presenter:** LL

Discussion:

From the 1 July every GP has to register on the site to open. There are 28 standards in total with 16 essential standards which the practice needs to prove we are up to date with. LL gave a hand out of the 16 standards.

The practice will have an inspection next year to see if we do meet the standards. The PPG is one of the standards. LL pointed out that the emphasis is on patient safety including premises, prescribing and staff training. Fit for Purpose. LL said that there will probably be some areas that will need to be discussed back at this PPG group and will be either emailed out or discussed at the meetings.

Conclusions:

Action items	Person responsible	Deadline
✓		

Agenda item: Targets QP (referrals and A & E) **Presenter:** LL

Discussion:

We have to meet certain criteria as a practice. 2 things the practice is currently reviewing are A& E attendances and referrals. We will be looking at patients with complicated problems who attend A & E to see if the practice could have intervened earlier, which would have prevented attendances at A & E. We are also looking at patients who regularly attend A & E.

With regards to referrals, we are looking at whether we have over referred in any areas to keep costs down.

Conclusions:

Action items	Person responsible	Deadline
✓ Review A & E attendances and Referrals.	LL and GP Partners	

Agenda item: Practice Boundaries **Presenter:** LL

Discussion:

There has been lots of discussion recently about practice boundaries. The practice has had to clarify where the practice boundaries are. LL had produced a new map of the boundaries and presented this to the meeting. The GPs have reviewed where they feel is appropriate for them to travel to visit patients at home.

Conclusions:

Action items	Person responsible	Deadline
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✓ New map to be displayed in reception and produced to PCT

LL

July 12

Agenda item: Reception – chair arrangements/traffic

Presenter: LL

Discussion:

As there is a lot of traffic going in and out of reception LL asked members of the PPG for ideas of how we could improve the reception area i.e. making it more accessible for patients and improvements from the receptionists' point of view.

Changes had already been started, in that the prescription box was now outside of the main doors to the practice. LL asked the group whether they had any ideas on rearranging the chairs in the waiting room. RC and MT both felt that the chairs should not be facing the receptionists, as this allowed patients to listen in on other patients' conversations and allowed no privacy for the receptionists to carry out other work related duties.

It was suggested that the chairs would be turned 90 degrees to be facing the wall for a trial period. The jayex board would need to be moved. One tier of chairs could be removed as only 70% of the chairs were used the majority of the time. One PPG member was not happy with this suggestion but the group decided to give this a trial.

All members suggested the receptionists having a screen in the reception area to work behind to carry out other duties. Having one receptionist on front desk to deal with patients at the desk and others behind a screen to answer calls etc. It was also suggested that a screen could be put in the waiting area to section the chairs off from the reception desk if necessary.

Conclusions:

Action items

- ✓ Move the chairs and the jayex board
- ✓ To look at having screens in reception area.

Person responsible

LL

LL

Deadline

ASAP

Agenda item: Any other business

Presenter: LL

Discussion:

LL thanked everyone for coming along and reminded the group to be on the lookout for new members for the PPG as were the GPs. LL will email out any feedback from the meeting on the 14th June and any other relevant papers as needed.

Conclusions:

Action items

- ✓ Date of next meeting 19 September 2012

Person responsible

LL

Deadline

LINKWAY MEDICAL PRACTICE

RESULTS OF HOME VISIT AUDIT AUGUST 2012

As part of quality review and, as agreed with our Patient Participation Group, the practice decided to look at the effectiveness of our home visiting service.

A total of 23 patients were sent a questionnaire to ask for their feedback after **requesting** a home visit from a practice doctor or nurse during the month of August 2012.

Patients were informed that all information would remain anonymous, no names or identifying details would be used.

Exclusions: Patients resident in nursing/residential home or those receiving palliative care.

A total of 15 completed questionnaires were returned = 66%

The responses were as follows:

1. Who visited?

a) A Doctor = 14 (94%)

b) A Nurse = 1 (6%)

2. When was the visit for?

a) someone to visit on the same day (urgent request) 13 (87%)

b) a routine home visit for a review and not urgent for that day 2 (13%)

3. Who was the visit for?

a) Was the home visit request for a child? 1 (6%)

b) Was the Home visit requested by you? YES = 10 (67%) NO= 5 (33%)

CARER = 3 PARENT =0 RELATIVE = 2 FRIEND = 0

4. Why was the visit needed?

a) You/or the patient were too ill to attend surgery? 6 (40%)

b) lack of transport and live a distance from the surgery? 1 (6%)

c) you/or the patient were unable to attend surgery because of a disability? 4 (27%)

d) you / or the patient are house-bound and unable to get to surgery even with help? 4 (27%)

5. Was the home visit cancelled by us/not accepted 0 (100%)

6. Were you satisfied with how long it took for the Doctor/Nurse to arrive?

Excellent	7	(47%)
Good	7	(47%)
Fair	0	
Poor	1	(6%)

7. How thoroughly did the Doctor/Nurse ask about your symptoms?

Excellent	8	(54%)
Good	6	(40%)
Fair	1	(6%)
Poor	0	

8. How well did the doctor/nurse explain your problems/treatment?

Excellent	7	(47%)
Good	7	(47%)
Fair	1	(6%)
Poor	0	

9. Were you admitted to hospital as a result of the home visit? 2 (14%)

10. And finally, how satisfied were you overall with your request for a home visit?

Excellent	8	(54%)
Good	6	(40%)
Fair	0	
Poor	1	(6%)

A big thank you to all the patients who participated in this survey.

August 2012 Linda Lloyd – Practice Manager.

TELEPHONE AUDIT

FEBRUARY 2012	CALL ATTEMPTS	7075	
	NOT ANSWERED	1825	26%
MARCH 2012	CALL ATTEMPTS	6460	
	NOT ANSWERED	1335	21%
MAY 2012	CALL ATTEMPTS	6310	
	NOT ANSWERED	837	14%
JUNE 2012	CALL ATTEMPTS	5540	
	NOT ANSWERED	784	15%

2 MONTHS PREVIOUS = 23.5% AVERAGE

2 MONTHS POST NEW RECEPTION =14.5 AVERAGE

Linkway PPG Minutes

Time 1-2 pm

Location Linkway MP

Meeting called by: Linkway Medical Practice **Type of meeting:** PPG 4th Meeting
Facilitator: Linda Lloyd LL **Note taker:** Linda LLoyd
Attendees: LL, Dr Randhawa, HH, Ann Harrison AH, KH, Martyn Treadgold MT,
 Apologies: KH and RC

Please read: Previous minutes

Please bring:

Minutes

1. Agenda item: Minutes of Previous Meeting 30/5/12 **Presenter:** LL

Discussion:

LL welcomed everyone to the meeting. LL went through the minutes of the previous meeting.

Actions from the previous meeting:

- LL will arrange a suitable time/date to meet at MT's workplace to view their TV screen and link to intranet.
- Poster has been put on the notice boards to inform patients they can book appointments and order repeat prescriptions online and on the Jayex display boards.
- Discussion re: new receptionist's impact on telephone access – LL handed out audit on telephone usage which shows the call attempts and those not answered during the period before and after the receptionist stated.
- The 2 months previous shows an average calls not answered of 23.5%. The 2 months post new receptionist shows an average of 14.5%. LL said that this was encouraging and that she would continue to monitor the situation and feed back to the group later in the year.
- General information leaflets – we are still waiting for help with translation of the leaflets produced by the practice.
- Review A&E Attendances and referrals – this has been done internally and BR and LL are due to meet with the commissioning team to discuss our findings externally.
- New Boundary map is in reception and is shown on our web site
- The chairs have been repositioned in reception and the staff and patients have seen this as a positive move. The prescription box has also been moved and this is working well. It does seem that traffic has been reduced in the main waiting area.
- AH also commented that we discussed putting a screen in reception area. LL said that this had been discussed with the reception staff and although they thought it was a good idea we have decided to put this on hold as this depends on the new reception rota, and this had only just been implemented.
- AH said that we had discussed installing a screened to wall off the waiting area – perhaps running alongside the chairs or where the rope system is, to obscure the vision of the patients waiting. LL said she thought that this suggestion did not sit comfortably with the PPG members at the last meeting. All agreed.

Conclusions:

Action items	Person responsible	Deadline
LL to meet with MT regarding TV screen connected to practice webpage	LL/MT	Jan 13
To continue to monitor the impact of the receptionist on the telephone access	LL	Jan 13
To look at getting general information leaflets in other languages.	LL/HH	Jan 13

2. Agenda item:

Review the PPG action Plan for 2012

Presenter: LL

Discussion:

LL handed out copies of the plan.

Item One – Opening times – to improve patient knowledge of opening times.

Action taken: Added times to notice board which is situated on the external doors.

Item Two – Pre bookable appointments – Improve access to enable patients to forward book appointments more than 2 days in advance.

Action taken: Added additional GP from August 12 .

Item three – Telephone access – Audit impact of additional receptionist.

Action taken: Increased receptionist hours and audit shows improvement of 62%

Item four – Advertisement of web booking service.

Action taken: Added to new patient documents, web sites, patient leaflets.

Item five – Nurse survey.

Action taken: Survey done and findings discussed with group

Item six – Home visit survey.

Action taken: Survey done and findings discussed with group.

Conclusions: We have done a lot of work to address the areas agreed in our action plan. We need to look at our Patient survey for 2012 .

Action: LL will forward a copy of last years patient survey via email to members of the group and ask for approval/suggested changes.

✓

3. Agenda item: Home visit audit **Presenter:** BR/LL

Discussion: One of our targets was to audit the Home Visits. The aim was to see if we provided a quality service for our patients; whether patients faced any difficulties in requesting a home visit; how many home visits were requested inappropriately. LL presented the results of the questionnaire. A total of 23 patients were sent a questionnaire. LL had run a report to see how many patients had requested a visit during the month of August. Patients in nursing homes and palliative care patients had been excluded from the audit. A total of 15 completed questionnaires were returned 66%.

Conclusions: The group agreed that the results were very good and of high standard.

Action items	Person responsible	Deadline
✓ Re-audit in January 2012 during winter months.	LL	Feb 13

4. Agenda item: Practice Complaints **Presenter:** LL

Discussion: The practice has to audit the complaints received at the end of each financial year. LL presented the results from year ended March 2012.

Conclusions: The group felt that the majority of the complaints were regarding communication issues and that it was noticeable that none of the complaints were major or regarding clinical incidents/negligence.

Action items	Person responsible	Deadline
✓ None		

5. Agenda item: Commissioning/other Meetings **Presenter:** BR/LL

Discussion: LL reminded everyone about the patient meeting at the Yemeni centre on Wednesday 10th October at 12 – 2. RC had agreed to attend. AH will attend. LL said that RC and LL had attended the initial meeting but it was not well attended – the discussion had been around ways of linking in patients to the wider commissioning patient groups. LL said that RC suggested that the PPG set up a Facebook page to communicate back to patients and invite comment. The Patient reps on the group would be responsible for maintaining the page. The group felt that this was not a good idea as it would be open to abuse. MT said that we should utilise the facilities already in place in particular the practice websites and NHS choice pages. LL asked if we should have a PPG noticeboard in the main waiting area in the practice, we could put a PPG newsletter on it – LL suggested that the members should have their photos on it.

BR informed the group that things were becoming clearer with regard to the commissioning groups and that we would be meeting with the Healthworks commissioning group on the 20th September.

LL asked if anyone had attended the wider group meeting in July at the WBAFC. Unfortunately no-one had managed to attend. LL said that this was being held again and that she had sent them the dates via email.

Conclusions: The newsletter and photo was thought to be a good idea, however, it should be a group photograph. Group decided that the photo would be taken at the next meeting. Need to decide who will be responsible for producing the newsletter.

Action items	Person responsible	Deadline
✓ Notice board in reception with group photo	LL	Jan 13

6. Agenda item: Cardiac and stroke Network **Presenter:** LL

Discussion:

The practice has had an invite from the above group to work with the PPG and practice to raise awareness of stroke and prevention. They have asked if they can hold an information stall within the practice, also would like to speak with our PPG.

Conclusions: Need to speak to them.

Action items	Person responsible	Deadline
✓ LL to contact them and ask them to attend the next meeting.	LL	Sept 12

7. Agenda item: Any other business **Presenter:** LL

Discussion: LL asked if we could have help with the flu clinics. Helping patients with getting their coats on and off etc. The flu clinic dates were given out.

LL also asked if we could have help with the patient questionnaires. Some patients need help to fill out the questionnaires and ensure they are collected in the box. It would also be useful to help promote the self check in at the same time. AH asked if we knew how many patients were using the repeat prescription ordering service on line. LL said that she had not yet found the report on the new computer system to do this – but that she would try to find out as it was useful information. The same problem occurred with knowing how many patients are using the self check in.

Conclusions: AH offered to help with flu clinics on the 18th October. MT said that unfortunately he was unable to help at this time.

Action items	Person responsible	Deadline
✓ Audit prescribing on line/self check in/appointments on line	LL	Jan 13
✓ Inform the nursing staff that AH will help/needs t shirt etc	LL	

7. Agenda item: Date of next meeting **Presenter:** LL

Discussion:

LL thanked everyone for coming along and reminded the group to be on the lookout for new members for the PPG. LL will email out any feedback from the meeting on the 10th October and any other relevant papers as needed.

Conclusions:

Action items	Person responsible	Deadline
✓ Date of next meeting Wednesday 30 th January 2013	LL	

Patient survey from *LINKWAY MEDICAL PRACTICE*
using the General Practice Assessment Questionnaire (GPAQ)

Individual GP report and analysis for GPAQ Consultation Version 3.

Date: 5th January 2013

Report by: Linda Lloyd Practice Manager.

Report for: PRACTICE

How the survey was carried out:

The survey was carried out during November December All patients arriving for their consultation were given a questionnaire. Patients were handed a questionnaire by the receptionists and then the completed questionnaires were returned to a sealed box prior to the patient leaving the surgery. A total of 500 questionnaires were handed out with a total of 357 being returned 72%

Summary of results:

GPAQ evaluation questions

The following table gives a summary of the individual scores for the evaluation questions in GPAQ, i.e. the ones where patients made a judgment about how good that aspect of care was. They are represented as a percentage of the maximum possible score, so the best possible score in each case is 100.

GPAQ V3 GENERAL PRACTICE ASSESSMENT QUESTIONNAIRE

We would be grateful if you would complete this survey about your general practice. Your doctors 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 allowed. There are no right or wrong answers and your doctor will NOT be able to identify your individual answers.

QUESTIONS AND RESULTS

ABOUT RECEPTIONISTS AND APPOINTMENTS	2012-13 SCORE
<p>Q1 How helpful do you find the receptionists at your GP Practice?</p> <p>a) Very Helpful</p> <p>b) Fairly helpful</p> <p>c) Not very helpful</p> <p>d) Not at all helpful</p> <p>e) Don't know</p>	<p>73%</p> <p>26%</p> <p>1%</p> <p>0%</p> <p>0%</p>
<p>Q2. . How easy is it to get through to someone at your GP practice on the phone?</p> <p>a) Very easy</p> <p>b) Fairly easy</p> <p>c) Not very easy</p> <p>d) Not at all easy</p> <p>e) Don't know</p> <p>f) Haven't tried</p>	<p>28%</p> <p>50%</p> <p>16%</p> <p>4%</p> <p>0%</p> <p>2%</p>

<p>Q3. How easy is it to speak to a doctor or nurse on the phone at your GP practice?</p> <p>a) Very easy b) Fairly easy c) Not very easy d) Not at all easy e) Don't know f) Haven't tried</p>	<p>16% 29% 13% 1% 10% 31%</p>
<p>Q4. If you need to see a GP urgently, can you normally get seen on the same day?</p> <p>a) Yes b) No c) Don't know/ never needed to</p>	<p>59% 26% 15%</p>
<p>Q5. How important is it to you to be able to book appointments ahead of time in your practice?</p> <p>a) Important b) Not important</p>	<p>89% 11%</p>
<p>Q6. How easy is it to book ahead in your practice?</p> <p>a) Very easy</p>	<p>62%</p>

<ul style="list-style-type: none"> b) Fairly easy c) Not very easy d) Not at all easy e) Don't know f) Haven't tried 	<ul style="list-style-type: none"> 18% 13% 1% 2% 4%
Q7. How do you normally book your appointments at the practice?	
<ul style="list-style-type: none"> a) In person b) By phone c) Online d) Doesn't apply 	<ul style="list-style-type: none"> 29% 68% 3% 0%
Q8. Which of the following methods would you prefer to use to book appointments at the practice?	
<ul style="list-style-type: none"> a) In person b) By phone c) Online d) Doesn't apply 	<ul style="list-style-type: none"> 6% 74% 20% 0%
Q9. Thinking of the times when you want to see a <u>particular doctor</u> how quickly do you usually get seen?	
<ul style="list-style-type: none"> a) Same day or next day b) 2 - 5 days 	<ul style="list-style-type: none"> 30% 31%

<p>c) 5 days or more</p> <p>d) I don't usually need to be seen quickly</p> <p>e) Don't know, never tried</p>	<p>30%</p> <p>2%</p> <p>7%</p>
<p>Q10. Thinking of the times when you want to see a particular doctor how do you rate this?</p> <p>a) Excellent</p> <p>b) very good</p> <p>c) Good</p> <p>d) Fair</p> <p>e) Poor</p> <p>f) Very poor</p> <p>g) Does not apply</p>	<p>12%</p> <p>19%</p> <p>33%</p> <p>19%</p> <p>12%</p> <p>0%</p> <p>5%</p>
<p>Q11. Thinking of times when you are willing to <u>see any doctor</u></p> <p>a) Same day or next day</p> <p>b) 2 - 5 days</p> <p>c) 5 days or more</p> <p>d) I don't usually need to be seen quickly</p> <p>e) Don't know, never tried</p>	<p>61%</p> <p>26%</p> <p>9%</p> <p>4%</p> <p>0%</p>
<p>Q12. Thinking of times when you are willing to <u>see any doctor</u> how do you rate this?</p>	

<ul style="list-style-type: none"> a) Excellent b) very good c) Good d) Fair e) Poor f) Very poor g) Does not apply 	<ul style="list-style-type: none"> 31% 29% 23% 13% 4% 0% 0%
<p>Q13. Thinking of your most recent consultation with a doctor or nurse how long did you wait for your consultation to start?</p>	
<ul style="list-style-type: none"> a) Less than 5 minutes b) 6 - 10 minutes c) 11 - 20 minutes d) 21 - 30 minutes e) More than 30 minutes f) There was no set time for my consultation 	<ul style="list-style-type: none"> 13% 48% 27% 9% 3% 0%
<p>Q14 Thinking of your most recent consultation with a doctor or nurse how do you rate this?</p>	
<ul style="list-style-type: none"> a) Excellent b) very good c) Good d) Fair 	<ul style="list-style-type: none"> 14% 21% 37% 19%

e) Poor	7%
f) Very poor	0%
g) Does not apply	2%
ABOUT OPENING TIMES	
Q15 is your GP Practice currently open at times that are convenient to you?	
a) Yes (go to Q 17)	92%
b) No (go to Q 16)	8%
c) Don't know	0%
Q16 Which of the following additional opening hours would make it easier for you to see or speak to someone?	
a) Before 8am	22%
b) At lunchtime	17%
c) After 6.30pm	20%
d) On a Saturday	29%
e) On a Sunday	12%
f) None of these	0%
ABOUT SEEING THE DOCTOR OF YOUR CHOICE	
Q17 Is there a particular GP you usually prefer to see or speak to?	

a) Yes b) No c) There is usually only one doctor in my surgery	64% 36% 0%
Q18 How often do you see or speak to the GP you prefer?	
a) Always or almost always b) A lot of the time c) Some of the time d) Never or almost never e) Not tried at this GP Practice	27% 31% 20% 19% 3%
HOW GOOD WAS THE LAST GP YOU SAW AT EACH OF THE FOLLOWING?	
(If you haven't seen a GP in your practice in the last 6 months, please go to Q25)	
Q19 Giving you enough time	
a) very good b) Good c) Fair d) Poor e) Very poor f) Does not apply	61% 31% 6% 2% 0% 0%
Q20 Listening to you	

<p>a) very good</p> <p>b) Good</p> <p>c) Fair</p> <p>d) Poor</p> <p>e) Very poor</p> <p>f) Does not apply</p>	<p>68%</p> <p>24%</p> <p>7%</p> <p>1%</p> <p>0%</p>
Q21 Explaining tests and treatments	
<p>a) very good</p> <p>b) Good</p> <p>c) Fair</p> <p>d) Poor</p> <p>e) Very poor</p> <p>f) Does not apply</p>	<p>65%</p> <p>27%</p> <p>8%</p> <p>0%</p> <p>0%</p> <p>0%</p>
Q22 Involving you in decisions about your care	
<p>a) very good</p> <p>b) Good</p> <p>c) Fair</p> <p>d) Poor</p> <p>e) Very poor</p> <p>f) Does not apply</p>	<p>58%</p> <p>33%</p> <p>8%</p> <p>1%</p> <p>0%</p> <p>0%</p>
Q23 Treating you with care and concern	

<ul style="list-style-type: none"> a) very good b) Good c) Fair d) Poor e) Very poor f) Does not apply 	<ul style="list-style-type: none"> 62% 32% 5% 1% 0% 0%
<p>Q24 Did you have confidence and trust in the <u>GP</u> you saw or spoke to?</p> <ul style="list-style-type: none"> a) Yes, definitely b) Yes, to some extent c) no, not at all d) Don't know/can't say 	<ul style="list-style-type: none"> 78% 21% 1% 0%
<p>HOW GOOD WAS THE LAST NURSE YOU SAW AT EACH OF THE FOLLOWING?</p> <p>If you haven't seen a nurse in your practice in the last 6 months, please go to Q31</p>	
<p>Q25 Giving you enough time</p> <ul style="list-style-type: none"> a) very good b) Good c) Fair d) Poor e) Very poor f) Does not apply 	<ul style="list-style-type: none"> 72% 24% 4% 0% 0% 0%

Q26 Listening to you	
a) very good	72%
b) Good	24%
c) Fair	4%
d) Poor	0%
e) Very poor	0%
f) Does not apply	0%
Q27 explaining tests and treatments	
a) very good	71%
b) Good	25%
c) Fair	4%
d) Poor	0%
e) Very poor	0%
f) Does not apply	0%
Q28 Involving you in decisions about your care	
a) very good	70%
b) Good	26%
c) Fair	4%
d) Poor	0%
e) Very poor	0%
f) Does not apply	0%
Q29 treating you with care and concern	

<ul style="list-style-type: none"> a) very good b) Good c) Fair d) Poor e) Very poor f) Does not apply 	<ul style="list-style-type: none"> 72% 24% 4% 0% 0% 0%
<p>Q30 Did you have confidence and trust in the <u>Nurse</u> you saw or spoke to?</p>	
<ul style="list-style-type: none"> a) Yes, definitely b) Yes, to some extent c) no, not at all d) Don't know/can't say 	<ul style="list-style-type: none"> 80% 20% 0% 0%
<p>ABOUT CARE FROM YOUR DOCTORS AND NURSES</p> <p>Thinking about the care you get from your doctors and nurses overall, how well does the practice help you to:</p>	
<p>Q31 Understand your health problems?</p>	
<ul style="list-style-type: none"> a) very well b) Unsure c) Not very well d) Does not apply 	<ul style="list-style-type: none"> 85% 13% 2% 0%
<p>Q32 Cope with your health problems</p>	
<ul style="list-style-type: none"> a) very well 	<ul style="list-style-type: none"> 80%

<ul style="list-style-type: none"> b) Unsure c) Not very well d) Does not apply 	<ul style="list-style-type: none"> 18% 2% 0%
Q33 Keep yourself healthy	
<ul style="list-style-type: none"> a) very well b) Unsure c) Not very well d) Does not apply 	<ul style="list-style-type: none"> 65% 16% 19% 0%
Q34 Overall, how would you describe your experience of your GP Surgery	
<ul style="list-style-type: none"> a) excellent b) Very good c) Good d) Fair e) Poor f) Very poor 	<ul style="list-style-type: none"> 73% 25% 2% 0% 0% 0%
Q35 Would you recommend your Gp surgery to someone who has just moved to your local area?	
<ul style="list-style-type: none"> a) Yes, definitely b) Yes, probably 	<ul style="list-style-type: none"> 74% 24%

<p>c) No, Probably not</p> <p>d) No, definitely not</p> <p>e) Don't know</p>	<p>2%</p> <p>0%</p> <p>0%</p>
<p>IT WILL HELP US TO UNDERSTAND YOUR ANSWERS IF YOU COULD TELL US A LITTLE ABOUT YOURSELF</p>	
<p>Q36 Are you?</p> <p>a) Male</p> <p>b) Female</p>	<p>29%</p> <p>71%</p>
<p>Q37 How old are you?</p> <p>a) Under 15</p> <p>b) 16 to 44</p> <p>c) 45 - 64</p> <p>d) 65 to 74</p> <p>e) 75 or over</p>	<p>0%</p> <p>31%</p> <p>33%</p> <p>28%</p> <p>8%</p>
<p>Q38 Do you have a long standing health condition?</p> <p>a) Yes</p> <p>b) No</p> <p>c) Don't know/can't say</p>	<p>58%</p> <p>35%</p> <p>7%</p>

Q39 What is your ethnic group?	
a) White	76%
b) Black or Black British	7%
c) Asian or Asian British	15%
e) Mixed	0%
f) Chinese	0%
g) Other ethnic group	2%
Q40 Which of the following best describes you?	
a) Employed (full or part time, including self-employed)	40%
b) Unemployed /looking for work	5%
c) At school or in full time education	1%
d) Unable to work due to long term sickness	9%
e) Looking after your home/family	9%
f) retired from paid work	36%
g) other	0%

Summary

- **98% of patients thought the practice was excellent/very good and would recommend the surgery to someone else**
 - 99% of patients found the practice receptionists helpful
 - 78% of patients found it was easy to phone the practice
 - 59% of patients say they can normally get seen on the same day with 15% saying they have never needed to (74%)
 - 80% of patients said it was easy to book ahead

- 74% of patients still prefer to book appointments by phone and 20% say they prefer to book online
- 61% of patients say they usually get seen by a doctor of **their choice** within 1 to 5 days
- 83% of patients think that it is acceptable to be seen by a doctor of their choice within 1 – 5 days
- 87% of patients say they usually get seen by **any** doctor within 1 – 5 days
- 96% of patients think that it is acceptable to be seen by any doctor within 1 – 5 days
- 88% of patients waited between 0 – 20 minutes for their consultation to start
- 91% of patients think that this is acceptable
- 92% of patients think the current surgery opening times are acceptable
- 92% of patients thought the doctor gave them adequate time the last time they were seen
- 92% of patients thought the doctor listened to them
- 92% of patients thought the doctor explained tests and treatments well
- 99% of patients thought the doctor involved them in decisions about their care
- 99% of patients thought the doctor treated them with care and concern
- 99% of patients said they had trust and confidence in the doctor they saw or spoke to

Other comments received:

- Thanks to all the GPs and Nurses
- Excellent surgery both reception, staff and doctors. Outstanding
- Good I feel comfortable with receptionists and my doctors especially Dr Winteler – he helped me when I was down and depressed
- Would like to be consulted when tablet brands are changed on prescription as sometimes have more side effects when cheaper brands
- Yes, should be open 24 hours like Scotland
- Fair service
- Excellent – Jill and Veronica on the desk

- I find all the people who work here treat me with respect
- Some of the receptionists are a bit offish when you phone for an appointment
- I would like to mention that to see my doctor there are never any slots available, overall the surgery is good.
- Very happy with the practice – no problems
- Excellent care over many years
- I think it all seems good
- Very good
- Possibilities of late appointments for working people so they can come after working hours or the weekend
- A brilliant practice – keep it up
- Very good practice and the staff are helpful and friendly
- Don't have to wait long for hospital referrals.
- Phone answering could be improved
- Staff always helpful
- The staff are always friendly polite and pleasant
- I changed to this surgery, it was recommended to me and the best move I ever made
- Needs to be better system for phone appointments
- Nice and friendly staff

- Practice needs to be practical for people that work full time. It is not always easy to get time off work if you work outside the area, so early appointment or after 7pm would be helpful
- A very friendly and helpful service. All staff are polite and always willing to help. Excellent GP surgery.
- Could do with more female doctors in the practice to consult about personal problems
- It is the best. Second to none.
- Overall very good. Ringing GPs and getting through can take several minutes. I think when booking children s appointments there should be a preference and possibly a triage system. Also children should see GPs and not the registrars or trainees.
- It would be helpful for exercise and diet clinics
- I much prefer to see the same doctor each time when possible
- I find the phone call early morning for appointments that day difficult. Would like to be able to get through easier and for there still to be a space when I get through

L Lloyd January 2013.

LINKWAY PPG MINUTES

DATE: 30TH January 2013

TIME: 1 – 2PM

LOCATION: Linkway Medical Practice

Meeting Number: 5

Note Taker: Linda Lloyd

Attendees: Linda Lloyd (LL) Dr Randhawa (BR) Ann Harrison (AH) Ken Harrison (KH) Robert Collins (RC) Vicky Walters (VW)

Apologies: MT

LL welcomed everyone to the meeting and introduced our new member Vicky. Reminded everyone to try to recruit more members, especially from the younger groups.

Agenda Item

1. Minutes of the previous meeting.

LL went through the minutes of the previous meeting.

- LL to meet at MT's workplace to view TV screen and link to intranet. LL apologised and said she had still not been able to do this.
- To re-audit the impact of additional receptionist on telephone access – rescheduled
- General information leaflets in other languages – LL said that we had worked hard and had managed to get NHS information leaflets in other languages – we were still working on the leaflets produced by the practice.
- Email last years patient survey to members to see if any alterations/suggestions required – done and results to be discussed today
- Re-audit home visit audit
- Discuss newsletter and group photo
- Cardiac and stroke network. LL had contacted them to see if they could attend one of our meetings. Unfortunately, they are unable to attend. LL has offered them the opportunity to set up information stall in the main foyer.
- Audit has been done on prescribing and self check in and appointments on line – re-audit required.

Targets for 2013-14	person responsible	Deadline
LL to meet with MT to view Intranet set up	LL	May 2013

Re-audit the impact of additional receptionist/telephone	LL/BA	May 2013
Continue work on leaflet translation	LL/HH	May 2013
Newsletter and group photo	LL	May 2013
Re-audit home visits	LL/BA	May 2013
Re-audit use of patients on line/self check in	LL/BA	May 2013

2. Patient survey results 2012 – 13

LL presented patient survey results for discussion (attachment 1)

The group felt that the results were good and that standards had stayed the same as previous year.

Discussion around opening times Q15 – 8% who said that the opening times were not convenient – of those, 22% said that they would prefer the practice to open before 8am. The practice opened at Christmas time at 7am and 4 out of 12 patients did not attend. The group felt that the current opening hours and extended hours were good and correct at this time for the patients and that there was no need to change them.

The group was surprised that some patients still are not aware that the practice offers extended opening times. LL said that this is now advertised on the building external doors as well as on our website, included in the Practice Leaflet/New Patient pack, on the Jayex and is also on the SystemOnline Appointment Booking site.

Discussion around Q8 and Q7. Only 3% have said they book on line but 20% of patients say they would prefer to book on line. Again leaflets are available in the waiting areas and this is included in the New Patient pack and on our websites. LL said that the more people we can encourage to book on line the less pressure on the phone lines. AH said that she always uses the internet booking site and encourages others to do so. LL – we should include this in the Newsletter.

Discussion around Q 13 waiting for consultation to start. AH asked what had happened to the message on the Jayex that informed the patients how long the Doctor was running behind. LL said that she thought that this function had disappeared when we changed our computer software in August – but she will check.

The group felt that the patient survey reflected the quality of care that the practice gives to the patients and there was very positive feedback for the practice from the patient members of the group.

The survey will be published on the website and a summary will be available on a poster in the waiting areas.

3. PPG Targets 2011-12 Progress to date

LL ran through the targets as follows:

- Opening times – The Practice should improve communication in a number of ways so that patients are aware of the extended hours. LL as we have previously discussed we have added this to the external building doors and is included on the Jayex, New patient packs, Websites, Poster in reception, offered as appointment choices when receptionists search for free slot search on computer, and on Systmonline web booking. **All agreed this target has now been achieved.**
- Pre-bookable appointments –The Practice to monitor the situation and change appointments as and when require. Outcome is required to improve access to enable patients to forward book appointments more than 2 days in advance. LL said that patients are able to book up to 6 weeks in advance. BR – the practice has employed an additional Doctor for 12 months to help increase the number of appointments. We have also improved other services such as Health Trainer, CVD nurses. LI said that discussion are ongoing to bring Slimwell back into the practice and we setting up Dementia screening with a consultant on site. **All agreed this target has been achieved.**
- Telephone access –to audit impact of new receptionist being employed to work busy times. LL presented the audit at a previous meeting and the group agreed that the practice should continue to monitor this periodically. The 2012-13 patient survey states that 78% of patients said it was easy to phone the practice. LL said that 2011-12 patient survey Q 8a was only 53% so this was a marked improvement. **All agreed that the target has been achieved.**
- Telephone access – to ensure adequate advertisement of web booking service by including in the new patient registration documents on web site and in the surgery. Outcome is to increase the number of patients using on-line self service software to reduce telephone calls to the practice. AH said she could confirm that this has been done. LL said that the number of patients now registered on the web site has increased. LL said that we now have 800+ patients registered on line and we have over a 1000 patients using the self-check in each month which also frees up the receptionist time to answer phone calls and deal with other patient queries. **All agreed that the target has been achieved.**
- Complete nurses survey – This has been done and discussed at the meeting on 30th May 2012. LL informed everyone that this was also included in the Patient Survey for 2012-13. **All agreed that the target has been achieved.**
- **Home visit survey** – This has been done and discussed at the meeting on 30th May 2012. This is down for re-audit 2013. **All agreed that the target has been achieved.**

4. Changes in the Practice/Wider Picture

BR informed the group about the latest developments for the Local Commissioning Group Healthworks and the wider Sandwell and West Birmingham Commissioning Group. She said that not a lot had happened except that the PCT will be dissolved on 31st March 2013 and that these new commissioning groups will be fully functioning. The practice had attended meetings recently and we have been told that not much will be changing for the first 6 months but services were being reviewed and may change from then.

BR also informed the group of the sad news that Dr Dexter is retiring from the practice on the 5th April 2013 and that his last day in the practice is on Wednesday 3rd April. He would be holding an 'open afternoon' where colleagues and patients could see him before he left.

The group expressed their regret at this news. BR said that the practice was in the process of recruiting a new salaried GP and not a replacement partner because of the uncertainty in the present political climate.

5. Way forward and date of next meeting

There are a number of outstanding actions which LL will try to get done before our next meeting.

LL thanked everyone for attending.

Next meeting date 1st May 2013 at 1pm.

Meeting closed.