Agreed action plan discussed at PPG meeting – 12 March 2014 following comments from patient annual questionnaire 2013/14

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| **Issue(s)****6 areas marked poor – sadly were same in 2012/13 and 2013/14** | **Suggestions for 2012/13** **which we implemented last year – please see “2012/13 you said – we did” for the details** | **Suggested action plan for 2013/14 –** **As agreed with Patients attending the PPG meeting** |
| Q2. Ease of contacting the practice by telephone | * Introduced a local number to run alongside the 084 number, giving patient choice
 | We will look at changing telephone system this year, moving away from 084 number but retaining some of positive features  |
| Q4. Chances of seeing a doctor / nurse within 48 hours | This is currently available, so disappointed at comments, but* Only 17 patients out of 265 completing the questionnaire marked this as poor
* 44 patients said fair leaving 204 saying good, very good or excellent
* More in house training for reception staff on usage of different appointment types
 | Despite implementing the training identified last year and also re-jigging / adding appointments, 11 patients (4%) still said this was an issue.We plan to review our appointment slots again to see if any were unused and if so, why – e.g could it be the time of them or any other reason identified? |
| Q5. Chances of seeing a GP / Nurse of your choice | * Make details available in reception of which GPs are where on each “normal” day, although we would need to put a caveat in there as can change when someone is on holiday
* Make this info available on the website / practice leaflet perhaps?
 | Despite implementing actions from last year, 21 patients (8%) still said this was an issue seeing the GP of choice.The main reason for this is having 2 sites both open at the same time which use the same GP resources.The PPG group felt that it is not always possible to see the person of your choice and if a person is ill and unable to pre-book, then as long as you see a GP this is acceptable. |
| **Issue** | **Suggestions for 2012/13** | **Action plan for 2013/14** |
| Q6. Able to speak to a GP/ Nurse on the telephone | * This service is available. But need to promote it better.
* More in house training for reception staff on usage of these appointment slots
 | Not as many patients said this was a problem. But 19 patients (7%) still unaware that we offer this service.Continue to promote this and receptionists to offer more where appropriate. |
| Q8. Length of time waiting in the practice | * Reception staff to keep patients informed?
* Can EMIS run a ticker tape based on envisage re who (if anybody) is running late
* Each GP to ask themselves if they could work differently?
 | 12 patients (4.5%) felt the time waiting to see someone was too long. Difficult to address as some patients do take longer than the allocated 10 minutes.All clinicians aware this was mentioned again – where possible try to keep to time. |
| Q27. Reminder systems of ongoing health checks | * We do this, so disappointed in comments. We will again review this
 | 10 patients (4%) again raised this. Comments made seem to refer to more proactive checks be offered rather than treating after the event.There are national initiatives such as bowel cancer checks, cytology, breast screening etc which can be accessed via the practice but not organised by the practice. We will continue to advertise these for our patients. |
| **GENERAL other negative comments 2013/14** | **Suggestions to consider** |
| Appointments | More book able appointments please (pre book)Want more outside work appt timesOpen SaturdaysThe local number is always engaged | The lead GP for access (CH) and practice manager will shortly review appts, along with the number of pre-books available.The practice does currently offer out of core time appointments both early morning and late eveningThe comments about engaged tone when booking appts etc will be addressed when looking at changing telephone systems |
| General | Get rid of the touch screen – bad for germsDon’t ask why we want an appt – just give them!Explain procedures better regarding timescales, test results and collecting certificates – all say the same thingPatient registration didn’t work and caused problems | Majority of patients do like the self arrival screen and choose to use it. Leave for now but monitor commentsDiscuss admin issues with staff at next staff meeting to try and improve |
| Sharlston Surgery | Be open during work time to allow prescriptions being collectedBe open every day and all day Replace the dying plants! | The branch surgery is open most of the day Monday to Wednesday from 8am until 6pm (closing only over the lunchtime period), open all day Thursday and open from Friday 8am until 12 noon.Prescriptions are collected from the main site which is open 8am until 6.30pm Monday to Friday. For those unable to collect from Crofton, we are happy to send the prescription to the pharmacy of the patients choice, if requestedDying plants removed |
| Clinicians | The GP was a bit abrupt today!Doctor spoke down their nose at me and has put me offNeed to listen a bit more to what people sayThe nurse refused to tell me my BP readingI feel the practice is run for doctors first patient second | Without knowing the precise details, this is difficult to deal with. Comments to be shared with all clinicians, asking for reflection on what has been said. |