# Patient Focus Group Report and Action Plan 2017/18

**Introduction**

Swan Lane Medical Centre lies in Great Lever and is part of the South East Cluster of GP Practices in Bolton, and has approximately 8000 patients. The practice has three GP Partners; Dr M Arya (F), Dr P Nixon (M), and Dr M Choksi (M) and one Nurse Practitioner. The Nursing Team consists of three Practice Nurses and two Health Care Assistants who run daily surgeries for chronic disease management, phlebotomy, learning disabilities, carers, and NHS health checks. The Practice list is open and accepts registrations to patients living within the practice boundary, and also accepts Out of Area Registrations. The surgery is open six days per week, and opening times are as follows:-

|  |  |  |
| --- | --- | --- |
| **Day** | **Opening Hours** | **Extended Opening Hours** |
| Monday | 8 am – 6.30pm |  |
| Tuesday | 8 am – 6.30pm |  |
| Wednesday | 8 am – 6.30pm |  |
| Thursday | 8 am – 6.30pm |  |
| Friday | 8 am – 6.30pm |  |
| Saturday |  | 8am – 12 noon |

We operate extended hours on Saturday mornings as part of the Direct Enhanced Scheme and further weekend appointments are offered through Bolton GP Federation Access Scheme.

Available appointments include:

|  |  |
| --- | --- |
| Routine appointments | Pre-bookable up to 8 weeks in advance with both GPs and nursing staff |
| Emergency appointments | Available on the day with some appointments being triaged by the Duty Doctor |
| Phlebotomy | Appointments with the Health Care Assistants daily, bookable in advance |
| Child immunisation clinic | Tuesdays, open clinic 9am – 11.30am |
| Post Natal Clinic | Mondays 2pm – 3pm |
| Chronic disease clinics | Daily with the nurses |
| Minor Surgery | Daily with the nurses and a GP |
| Anticoagulant Monitoring | Wednesday or Thursday mornings |

Appointments may be booked by telephoning the surgery from 8.00am – 6.30pm Monday to Friday, or can be booked online for both the GPs and nurses. Patients may request to see a doctor of their choice.

When the surgery is closed, patients are advised to contact the Out of Hours Service. This information is communicated via the Practice answerphone message, Opening Hours notice by the front door, and on the Practice website.

**Specialist Services**

Our specialist services include:-

* Anticoagulation monitoring
* Diabetes and insulin monitoring
* Minor Ops and Joint injections
* COPD reviews
* Post natal clinic
* Weekly Nurse clinics with Gujurati/Hindi/Urdu translators present
* Chronic disease management

**Patient Focus Group and Virtual Patient Reference Group**

The Practice has worked alongside the Patient Focus Group members and a Virtual Patient Reference Group, and we would very much like to acknowledge their help and input into Practice improvements.

The Patient Focus Group was formed in 2005 ensuring that patients are involved in decisions regarding the quality and range of services provided by the Practice. The group currently has 9 members of a varied age range, gender, and ethnicity. This group meets quarterly throughout the year.

# Patient Involvement In the Last Two Years

**Patient Involvement 2015/16**

A Patient Focus Group meeting was held on the 28th April 2015 to review feedback received and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, Friends & Family Test results, practice complaints received, and suggestions received from patients were reviewed. Feedback identified the following potential areas for including with the 2015/16 Action Plan:-

* One issue around an appointment being booked over the telephone which was found not to have been booked.
* One issue regarding a temporary resident registration and the duration of registration.
* One miscommunication issue resulting in the patient waiting in surgery for several hours.

During the Patient Focus Group meeting, the following Practice objectives were also considered for inclusion within the 2015/16 Action Plan:-

* Improved usage figures for the new Electronic transfer of Prescription facility
* Improved usage figures for those registered for online patient access facilities
* Implementation of the Named GP for all patients
* Improved size of Carer’s Registers
* Compliance with the new Bolton Quality Contract and targets within

Following much discussion around patient feedback themes and practice objectives, the Patient Focus Group decided to include the following within the 2015/16 Action Plan:-

1. To continue to promote the online access facilities and number of patient registrations
2. To continue to promote the email/SMS texting facilities
3. To continue to actively seek out Carers unknown to the Practice

## 2015/16 Action Plan

**Promotion of the Online facilities**

In January 2015 the Practice had 632 registered SystmOnline users. While the number of registered online users were growing, the Patient Focus Group felt that the growth was slow and there was an agreement that many more patients would be interested in using the facilities if they were more aware of them.

It was felt that the Practice had tried to promote these facilities for a while, but that promotion was targeted more to the patients that regularly use the services and was not reaching patients that never use the services.

The following approach was agreed by members:-

* Greater use of clinicians during appointments, to ask patients if they have registered for the online facilities, and to ask a receptionist for a user name and password when exiting the waiting room.
* Greater promotion of the online facilities targeted specifically from receptionists when speaking with patients
* Introduce a Facebook account to promote these services (and other national/local campaigns) aimed at targeting patients who do not regularly attend or contact the Practice
* Continued promotion of the online facilities through existing channels of communication such as newsletters/practice website/waiting room tv messages/waiting room displays.
* To continue to promote the email/SMS texting facilities

**Continue to promote Email/SMS Texting facilities**

In June 2013 the Practice had 184 patients consented to be contacted by email. In January 2015 this had grown to 315 patients consented to be contacted by email which represented 3.9% of the practice population. Email contact is currently being used for chronic disease recall appointments, and patient involvement with services or promotion of services. The Patient Focus Group felt that growth was slow and that again promotion was targeted at those that regularly contact the Practice, rather than those that do not.

In September 2013 the Practice had 428 patients consented for contact via SMS Text messaging. In March 2014 this had grown to 550 patients, and in January 2015 this was 700 patients (8.6% of the practice population). Text messaging is being used for appointment confirmations and promotion of services.

The following approach was agreed by members:-

* Increase the number registered for these facilities through continued promotion in letters being posted from the Practice; promotion through Facebook; website newsletters and articles.
* Promotion through receptionists offering appointment confirmations to be forwarded by text.

**Systems to identify unknown carers to the Practice**

At the time of the Patient Focus Group meeting in June 2014, the Practice had 100 registered Carers. In January 2015 the Practice had 148 registered Carers. The Patient Focus Group members felt that there were still many more unknown carers to identify, and that language difficulties could be a barrier to existing promotional material, etc.

The Practice agreed to:-

* Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.
* Update the Carers Notice Board with some information translated into Gujurati.
* Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

**Outcomes 2015/16**

**Promotion of the Online facilities**

In January 2015 the Practice had 632 registered SystmOnline users. While the number of registered online users had been growing, the Patient Focus Group felt that the growth was slow and there was an agreement that many more patients would be interested in using the facilities if they were more aware of them.

It was felt that the Practice had tried to promote these facilities for a while, but that promotion was targeted more to the patients that regularly use the services and was not reaching patients that never use the services.

The following approach was agreed by members:-

• Greater use of clinicians during appointments, to ask patients if they have registered for the online facilities, and to ask a receptionist for a user name and password when exiting the waiting room.

• Greater promotion of the online facilities targeted specifically from receptionists when speaking with patients

• Introduce a Facebook account to promote these services (and other national/local campaigns) aimed at targeting patients who do not regularly attend or contact the Practice

• Continued promotion of the online facilities through existing channels of communication such as newsletters/practice website/waiting room tv messages/waiting room displays.

• To continue to promote the email/SMS texting facilities

As of the 1st April 2016, the Practice now has 669 registered SystmOnline users which is 8.3% of the patient population. In January 2015, figures represented 7.8% of the patient population. As can be seen, only a small growth over the year has been achieved despite promotion of services through a multitude of methods.

**Continue to promote Email/SMS Texting facilities**

In January 2015 the Practice had 315 patients consented to be contacted by email which represented 3.9% of the practice population. Email contact is currently being used for chronic disease recall appointments, and patient involvement with services or promotion of services. The Patient Focus Group felt that growth was slow and that again promotion was targeted at those that regularly contact the Practice, rather than those that do not.

In January 2015 the Practice had 700 patients (8.6% of the practice population) registered for contact via SMS Text messaging. Text messaging is being used for appointment confirmations and promotion of services.

The following approach was agreed by members:-

• Increase the number registered for these facilities through continued promotion in letters being posted from the Practice; promotion through Facebook; website newsletters and articles.

• Promotion through receptionists offering appointment confirmations to be forwarded by text.

As of the 1st April 2016, the Practice now has 352 patients registered for contact via email which is 4.3% of the patient population. A small growth of 0.4%.

As of the 1st April 2016, there is now 1027 patients registered for contact via SMS text messaging. This represents 12.7% of the patient population and provides a growth of 4.1% which the Practice is really pleased with.

In addition to communicating to patients via text and email, we are now able to communicate via the clinical system directly into the SystmOnline patient accounts. This is a more secure method of communication as messages are user name and password protected. Communication via this method also allows attachments to be included, and are integrated into the clinical record allowing patients to respond which is also integrated into the patient record.

**Systems to identify unknown carers to the Practice**

At the time of the Patient Focus Group meeting in June 2014, the Practice had 100 registered Carers. In January 2015 the Practice had 148 registered Carers representing 1.8% of the patient population. The Patient Focus Group members felt that there were still many more unknown carers to identify, and that language difficulties could be a barrier to existing promotional material, etc.

The Practice agreed to:-

• Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.

• Update the Carers Notice Board with some information translated into Gujurati.

• Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

We are particularly delighted with the results. As of 1st April 2016 the Practice now has 190 registered Carers which represents 2.3% of the practice population. The CCG’s Bolton Quality Contract had set all Bolton Practices a target of achieving 2% of registered patients, which was exceeded.

In addition, annual health checks for carers were introduced from April 2014 but the Practice was disappointed to see uptake figures in January 2015 of only 24%. We are pleased to note that this year we provided health checks for 78% of carers, by offering home visits where carers were unable to leave the cared for people alone.

**Patient Involvement 2016/17**

A Patient Focus Group meeting was held on the 26th April 2016 to review feedback received, new NHS England requirements, the Bolton Quality Contract standards and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, Friends & Family Test results, practice complaints received, and suggestions received from patients were reviewed. Feedback did not identify any particular trends or themes.

During the Patient Focus Group meeting, the following NHS England aims or requirements were also considered for inclusion within the 2016/17 Action Plan:-

* To aim for 10% of the registered population to have access to one or more online services (the practice currently has 8.3%).
* To aim for at least 80% of repeat prescriptions to be transmitted electronically (currently achieving 68%).
* Introduction of the online access to medical records service
* Introduction of the new accessible communication standards

The following Bolton Quality Contract standards were also considered for inclusion within the 2016/17 Action Plan:-

* To continue identifying Carer’s aiming for identification of at least 3% of the patient population.
* To ensure military veterans are recorded on the clinical system and improve systems for recognition of this.
* To improve on the number of Chlamydia screening provided to those age 15-24 year old.
* Improving patient satisfaction regarding ease of getting through to someone at the surgery on the telephone.

There was also much discussion around the use of new technology available from May with the introduction of Iplato software replacing the current SMS text messaging software. Iplato provides a two way messaging system that would automatically read code into patient’s clinical records and enable appointments to be cancelled directly into the clinical system when forwarding an SMS text message reminder of appointments booked.

Following discussion it was agreed that the new access to online records service, should be focussed upon as anyone signing up for this service could potentially also increase the number of registered patients having access to one or more online services.

The Patient Focus Group decided to include the following within the 2016/17 Action Plan:-

1. To continue to promote the online access facilities and number of patient registrations via marketing the new access to online medical records facility
2. To continue to actively seek out Carers unknown to the Practice and achieve the 3% of patient population target
3. To ensure military veterans are recorded on the clinical system and improve systems for recognition of this
4. To maximise the use of Iplato software for greater patient convenience and better practice administration

## 2016/17 Action Plan

**Promotion of the Online facilities through marketing of the online medical records facility**

* Display posters throughout the Practice – on clinical doors, and in the waiting room.
* Put a link to the Youtube video on both the Practice website and Facebook account providing patient perspectives as to the benefits of access to their medical records.
* Place leaflets in all new patient registration packs.
* Put information on the website about how to register for the online services.
* Include details on the counterfoil of prescriptions
* Use systmonline messaging facility to inform patients already registered for online services, of the new functionality.
* Put information into all chronic disease recall letters being posted to patients.
* Try to target patients with specific diseases or young mums, via newsletter articles encouraging them to use the online access to their medical record as a tool to better control their illnesses.
* Ongoing media opportunities – photo opportunity with 1st patient to have signed up to use the service, and the 100th etc. for newsletter, facebook, etc.
* Use the Iplato software to inform patients of the new services.

**Systems to identify unknown carers to the Practice**

* Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.

• Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

**To ensure military veterans are recorded on the clinical system and improve systems for recognition of this**

* Update influenza consent forms to ask patients if they are military veterans
* Update new patient questionnaire to enable identification of military veterans registering with the Practice
* Increase the number of identified military veterans through promotion via Facebook; newsletters and articles.

**To maximise the use of Iplato software for greater patient convenience and practice administration**

* To text message appointment reminders that enable patients to cancel the appointment by touch button technology – this should be more convenient to patients as a method of cancelling an appointment, and should hopefully reduce the number of patients who do not attend appointments by as much as 25%.
* To text message vaccination invitations to appropriate patient population groups that enable the patient to decline, which will then automatically inform the electronic patient record – this should be more convenient to patients rather than forwarded a written decline and will reduce the amount of administration time required to follow up patients that the practice does not receive a response from.
* To text message chronic disease recalls to appropriate patient population groups that enable the patient to decline, which is then automatically coded in the electronic patient record – this should provide an easier method for patients to decline a review, and will reduce the amount of administration time needed to follow up patients that the practice does not receive a response from. In other areas, use of Iplato for this has proven to increase uptake rates for patients attending reviews.
* To text message patients with the Friends and Family test, once a patient has consulted with a GP or nurse – this will provide an alternative method for patients to quickly submit their responses rather than the current methods of online submission through the practice website, or by manually completing a form while in the Practice.
* To help keep patient medical records updated with their latest health data such as smoking status.

**Outcomes 2016/17**

*Promotion of the Online Facilities*

In April 2016, the Practice had 669 registered SystmOnline users which was representative of 8.3% of the patient population. While online services have been promoted for several years, growth has been slow.

It was felt with the introduction of online access to medical records that this additional functionality could raise greater interest from patients, and it was therefore agreed to continue promoting the online services with the overall aim of achieving 10% of the registered population having access to one or more online services.

The following approach was agreed by members:-

* Display posters throughout the Practice – on clinical doors, and in the waiting room.
* Put a link to the Youtube video on both the Practice website and Facebook account providing patient perspectives as to the benefits of access to their medical records.
* Place leaflets in all new patient registration packs.
* Put information on the website about how to register for the online services.
* Include details on the counterfoil of prescriptions
* Use systmonline messaging facility to inform patients already registered for online services, of the new functionality.
* Put information into all chronic disease recall letters being posted to patients.
* Try to target patients with specific diseases or young mums, via newsletter articles encouraging them to use the online access to their medical record as a tool to better control their illnesses.
* Ongoing media opportunities – photo opportunity with 1st patient to have signed up to use the service, and the 100th etc. for newsletter, facebook, etc.
* Use the Iplato software to inform patients of the new services and liaise with NHS England on how best to do this.

Outcomes:- As of the 1st April 2017, we now have 1511 registered SystmOnline users which represents 18.2% of the patient population. As can be seen we have achieved a great success with this. While 1511 are registered for one or more online services, 74 patients registered to have access to their detailed medical record.

Given the increase in numbers, we have improved the number of appointments available to book online to include nurses and some health care assistant appointments.

*Identifying Unknown Carers to the Practice*

In April 2016 the Practice had identified 190 Carers registered with the Practice representing 2% of the patient population. While this average was in line with Bolton as a whole, the Patient Focus Group members felt that there were potentially many more unknown carers to identify. It was therefore agreed to continue promoting Bolton Carer’s Support Group and trying to identify carers, with the aim of increasing the number of registered carers to 3%.

The following approach was agreed by members:-

* Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.

• Increase the number of identified carers through; including a carer’s identification form within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles; iplato promotion of Carer’s events and attendance of Bolton Carer’s Support Group in Practice.

Outcomes:-

We now have identified 2.2% of patients as carers (180 carers) which previously was 2%. Despite much publicity throughout the year of events/attendance in Practice etc, the growth for this remains slow.

On a positive note, we have provided carers reviews for 93.8% of these patients during the year, and been ranked as number 2 in Bolton for provision of flu vaccinations to them..

*Improve systems for Identification of Military Veterans, and systems to ensure correct recording of this onto clinical system*

In April 2016 the practice had no known military veterans registered with them.

The Patient Focus Group felt it was important to begin to identify Military Veterans to be able to offer them a priority referral service should this be required, in line with the Practice’s Military Veterans Treatment Priority Protocol.

The following approach was agreed by members:-

* Update influenza consent forms to ask patients if they are military veterans
* Update new patient questionnaire to enable identification of military veterans registering with the Practice
* Increase the number of identified military veterans through promotion via Facebook; newsletters and articles.

Outcomes:- As of the 1st April 2017, we now have 24 identified Military Veterans, representing (0.3% of the practice population).

*Maximise the use of Iplato software for greater patient convenience and practice administration*

Given the withdrawal of previous SMS Text Messaging Software for patient reminders, Bolton CCG purchased a year’s subscription for all Bolton Practices to Iplato Software. The benefits with Iplato over and above previous text messaging software would provide a two way messaging system that could automatically read code responses into patient’s clinical records and enable appointments to be cancelled directly into the clinical system when forwarding the SMS text message reminder of the appointment booked.

Iplato has been used for many purposes this year and has seen great responses as a result. Some examples are:-

1. Text message reminders of appointments with touch button technology to cancel appointments – a recent Bolton CCG Audit across the borough has proven iplato has reduced wasted appointments from patient non attendance from 7.68% to 6.58% which equates to 20,000 appointments. While not audited, it clearly has reduced the number of phone calls we receive confirming/cancelling appointments.
2. We receive very high Friends and Family test responses each month via iplato. In March 2017 alone we received 144 responses from patients that had attended appointments.
3. Iplato was instrumental with the huge success when promoting the online services, receiving over 600 responses.
4. We use it regularly to promote carers events, nhs health checks, breast screening events etc.
5. We use it to collect data such as smoking data, and to ask for urine samples for testing.
6. We promoted an ECG research trial through it and received a massive interest in participating.
7. We have text messaged vaccination invitatons to appropriate patient population groups whereby the patient could decline which then automatically entered into the electronic patient record. We had a huge success using this for the Meningitis C programme for those leaving sixth form and about to go to University.
8. We have begun to use it to recall certain reviews such as smears, blood pressure monitoring etc.

# Patient Involvement 2017/18

A Patient Focus Group meeting was held on the 25th April 2017 to review feedback received, NHS England requirements, the Bolton Quality Contract standards and year end results, Quality & Outcome Framework year end results, and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, Friends & Family Test results, practice complaints received, and suggestions received from patients were reviewed. Feedback did not identify any particular trends or themes. It was however noted that the latest GP Patient Survey results related to July 2016 and a survey had not been performed since this date.

During the Patient Focus Group meeting, the following NHS England aims or requirements were also considered for inclusion within the 2017/18 Action Plan:-

* To aim for 20% of the registered population to have access to one or more online services (the practice currently has 18.2%).

The following Bolton Quality Contract standards were also considered for inclusion within the 2017/18 Action Plan:-

* To continue focussing on patient uptake of cancer screening for bowel, cervical screening and breast screening
* To consider providing a Practice Patient Satisfaction Survey should the GP Patient Survey not have been undertaken by October
* To review survey data from either survey and further develop the action plan to reflect the findings

Practice objectives were reviewed; specifically Neighbourhood Working, along with promotion of additional support services for patients, and increasing the numbers attending the Patient Focus Group Meetings preferably reflecting the practice’s demographics and ethnicity.

The Patient Focus Group decided to include the following within the 2017/18 Action Plan:-

1. To continue to promote online access services aiming for 20% uptake

As promotion for this service had been very effective during 2016/17, it was agreed to continue using the same marketing strategy.

1. To continue focussing on patient uptake of cancer screening to patients

* Promotion material to be posted to patients who are turning 60 years of age and who will qualify for bowel screening
* To contact patients we are made aware have not completed bowel screening kits to reinforce the importance of testing
* To arrange if possible, for the cancer screeners to promote screening to patients through an awareness day
* Use of iplato to text message patients who qualify for cancer screening and have not had it performed, a reminder and contact details
* Ongoing promotion through Facebook; Practice Newsletters

1. To arrange a programme of patient support organisations holding awareness days in the waiting room and to promote these events to patients. Organisations such as:-
2. Bolton Integrated Drugs and Alcohol Service
3. Bolton Carers Support
4. Cancer screening services
5. Homestead
6. Staying Well Service
7. Bolton Patient Carer Consortium
8. Healthwatch
9. To review results of GP Patient Survey once available or to provide an in house patient satisfaction survey.