## MARPLE COTTAGE SURGERY

## Local Patient Participation Report 2013-2014\*

\* To be read in conjunction with Marple Cottage Surgery Patient Questionnaire Results 2013-2014, and with previous 2012-2013 survey results

#### **Component 1 - Establishing a Patient Reference Group**

(a) Background - developing a "virtual" Patient Reference Group (PRG) With the support from our existing Marple Cottage Patient Forum (established August 2008), we developed a "virtual" Patient Reference Group (PRG) in 2011 to share their ideas / feedback regarding the practice via email. The virtual PRG runs in parallel with the existing Patient Forum group, with the practice seeking views / agreement of the Patient Forum before forwarding to the virtual PRG members.

#### (b) Commitment to increase Patient Forum and PRG membership and ensure representative of practice population

Attracting patients to join the Patient Forum has always proved difficult, with many patient concerned that they cannot commit to regular face-to-face meetings.

Nevertheless, we have continue to simultaneously promote, and increase membership, of both the Patient Forum (which continues to meet face-to-face monthly), and the Virtual PRG, with a focus on attracting interest from of a broad range of patients age / gender, through various holistic strategies, including:

- (a) "Your Views Count Join our Virtual Patient Group" sign-up forms, (available at practice reception desk, practice waiting rooms) – see Appendix A
- (b) Consent forms given to new patients within their new patient registration packs
- (c) maintaining a dedicated Patient Forum promotional noticeboard
- (d) displaying professionally designed and **printed leaflets/flyers/business cards** promoting the Forum and how to get involved with
- (e) managing a dedicated and independent Patient Forum email address
- (f) Messages on our patient waiting room screen
- (g) Clinical team opportunistically asking patients during consultations if they would be interested in joining the group.
- (h) Practice Newsletters
- (i) 'What's New' section on the practice website
- (j) Sign up section at end of 2012-13, and 2013-14, patient survey

#### (c) Engaging with 'hard to reach' groups

Every year we have acknowledged, and discussed with the practice team and the Patient Forum, the difficulties of achieving a balanced representation of patient groups.

It is understandable that the demographic groups that use the GP services the most (45-74 years) have a higher membership of the virtual PRG than those that use the services less (younger patients ie <45yrs).

However, we have continued to attempt to **increase the membership of our younger patients (<45 years of age)** by strategies detailed above (1a), but also via proactive and direct targeting as detailed below: means of targeting patients.

- (a) Targeting younger patients on arrival to reception desk by adding reminders to appointment screen for reception team to give forms to join PRG / complete questionnaire
- (b) Targeted marketing via GPs / nurses opportunistically asking younger patients during consultation if they would be interested in joining the group.
- (c) Sending "Your Views Count Join our Virtual Patient Group" letter (see Appendix A) sent out to:
  - To 35-45 year old patients with NHS Healthchecks letters
  - $\circ$   $\,$  To asthma patients with their asthma annual review letters
  - $\circ$   $\,$  To new parents with their child's immunisation and vaccination letters
  - To female patients with their smear recall letters

Table 4 (below) shows significant improvements in increase of membership of the PRG for patients between the age 17 - 35 years, in line with the practice population demographics, and we proportional representation of 35- 44 years has exceeded our practice demographics.

#### (c) Changes to PRG profile / representation of practice population

As a result of this ongoing promotion / marketing we have seen the virtual PRG profile holistically increase in size, and improvements of the demographic representation of the practice population.

#### As of March 2014 the PRG membership has increased to 417.

This is an **increase of 49%** from March 2013 (137 new patients) – see year on year increase **Table 1** This is a significant increase considering that patients leave the practice through the year and are removed from the PRG list.

#### Table 1.

Month / year	Number of patients part of PRG	Male	% of PRG	Female	% of PRG
Mar 2012	169*	71	49%	83	51%
Mar 2013	280	122	46%	141	54%
Mar 2014	417*	163	44%	205	56%

\* some patients have signed up to the PRG anonymously so we cannot qualify their sex

Marple Cottage Patient Forum membership has stabilised at 8 members.

#### (i) Age breakdown of Virtual PRG

417 members of PRG (368 age/sex identifiable).

Table 2 below demonstrates good representation of patient demographics (although ongoing difficulty recruiting <16 year old patients still evident)

Table 2		
Male & Female	Number	%
<16yrs	0	0%
16-24yrs	24	7%
25-34yrs	27	7%
35-44yrs	60	16%
45-54yrs	84	23%
55-64yrs	79	21%
65-74yrs	60	16%
74-85yrs	26	7%
85yr & over	3	1%

\* Numbers above reflect 368 patients out of the 417 members, as this were age / sex identifiable

#### (ii) Age / Sex breakdown of PRG

Table 3 shows we have maintained a good representation of male / female members of the PRG, with an increase in men < 55 years, and women < 35 years, joining the group.

	Male (163)*	Female (205)*	
<16yrs	0	0	
16-24yrs	6	18	
25-34yrs	5	22	
35-44yrs	21	39	
45-54yrs	26	58	
55-64yrs	40	39	
65-74yrs	41	19	
74-85yrs	16	10	
85yr & over	3	0	

Table 3

\* 49 anonymous members (email address only disclosed) - patients age/sex unknown

#### (d) Difference between members of PRG and practice population

 Table 4 - Comparison of Virtual PRG v. Practice, Stockport and National

 Population profile, and Gender / Ethnicity comparison

Age	PRG profile	Practic Popula profile	tion	Stockport Population profile	National Population profile
Under 16	0%	17.39%	<b>)</b>	17.63%	19.41%
17 – 24	7%	7.87%		11.33%	13.06%
25 – 34	7%	10.59%	)	11.61%	13.44%
35 – 44	16%	13.02%		14.00%	13.88%
45 – 54	23%	14.66%	<b>b</b>	14.78%	13.76%
55 – 64	21%	12.78%		12.50%	11.67%
65 – 74	16%	13.13%		9.42%	8.71%
Over 75	8%	10.56%	)	8.72%	7.83%
			Dreatio	o Donulation n	uofilo.
PRG profile		<b>Practice Population profile</b> ( <i>Practice Population 6,676</i> )			
Gen					
44% Male		49.16%			
56% Female				Female	
Ethn					
99.19% White			98.95%		
0.27% Mixed			0.119%		
0% Black			0.119% Black		
0% Asian			0.119% Asian		
0% Chinese			0.045% Chinese		
0.54% Other ethnic group *Not all patients ethnicity is recorded		0.64% (	Other ethnic gro	up	
	Employm			atus**	
Employed		263			
Unemployed		9			
Retired			89		

\*\* not all patients are identifiable or employment status recorded

Table 4 shows the largest % membership of the PRG is from patients 45-64 years of age, which is reasonably comparable to the practice population demographics, and consistent with the age group of patients who attend / utilise the practice services.

However, the statistics do show a better balance of memberships spanning across the 17 - 74 years of age (in comparison to last years survey), and we have achieved our goal of improving membership of younger patients (17-45 year olds). We are particularly pleased that we have encouraged more 17 - 24 year old patients to join.

Although there is little interest from <16 year of patients (which may be a result of the fact they utilise the practice less, have little interest in practice services, or have no independent email address), we have continued to opportunistically encourage younger patients to join the group.

Core initiatives in 2013-14 to increase younger patients (<45years) focussed on sending invitations to join the PRG via questionnaires to

- Young asthma patients with their asthma annual review letters
- o 35-45 year old patients with NHS Healthchecks letters
- o new parents with their child's immunisation and vaccination letters
- o female patients with their smear recall letters

We also continued to opportunistically ask patients to join the PRG by the clinical team during consultations

# Component 2: Determining issues which are a priority to be included in patient survey

In August 2013, as part of the pre-planning stage of designing the new patient questionnaire, the Patient Forum reviewed the list of possible priorities that were selected from the previous year. The consensus was to send the virtual PRG the unedited list (Fig A) and, as per previous year. This way patients had the choice to include questions on the same issues as the previous year if they still felt this would be a priority which needed reviewing.

#### a) Suggested topics/priorities for questions of Patient Survey

In September 2013 the priority survey was approved by the Patient Forum and emailed to the virtual PRG to review and complete

A paper version of the Priority survey was made available on the reception desk for patients to complete when visiting the practice (see Appendix B)

#### b) Results and feedback on Priorities survey

The results of the surveys were shared with the Patient Forum, and virtual PRG, and as with the previous year we selected the 5 highest ranked topics – See Table 5

Patient Priority Topics	%	Ranking
	respondents	
Ease/speed of getting an appointment*	<b>66%</b>	1
Ability to see preferred GP*	58%	2
Quality of consultation*	52%	3 (joint)
Out of hours care*	<b>52%</b>	3 (joint)
Communication with patients*	44%	4
Your understanding of your consultation	40%	5 (joint)
Ease of getting through on the telephone	40%	5 (joint)
Satisfaction with opening times	34%	6
Waiting times	32%	7
Health promotion	28%	8 (joint)
Quality of customer service	28%	8 (joint)

Table 5

Community services	24%	9
Online services	16%	10
Premises	14%	11 (joint)
Practice involvement with GP and medical student training	14%	11 (joint)
Other	0.06%	12

# Component Three: Collating patient views and designing a Patient Questionnaire

#### (a) Deciding upon the questions for the new survey

\_ . . . \_ \_ \_ . . .

In October 2013 the draft format of questions for the Patient Questionnaire was sent to the Patient Forum and the Practice Team to review based on the priorities selected

Table 6 – Top 5 Priorities
Ease/speed of getting an appointment
Ability to see preferred GP
Quality of consultation
Out of hours care
Communication with patients

Where priorities were the same as the previous year the Patient Forum were happy to keep the same questions so there was a year-on-year comparison. Where the priorities were new (eg Out of Hours, A&E) the Patient Forum were happy to use questions which had been designed in 2011-12 but which had not been used as the topics had not be selected in that year.

A draft copy of the questions was sent in the first instance to the Practice Forum to review. There were a few changes were suggested to Q10, which related to a question put forward by the practice to understand if media coverage of A&E demand was impacting on demand on general practice.

It was also agreed that the questionnaire should always include an Overall Satisfaction question to enable comparison against 2012-13 questionnaire results, and MORI surveys. A final copy was sent to the virtual PRG for comment advising that paper and online versions would be available in November and December, respectively.

#### (b) Running our Patient Questionnaire campaign

From November 2013 – February 2014 we ran our Patient Questionnaire campaign. Questionnaires were available to complete online, at the practice, or were delivered by post:

The Patient Forum and virtual PRG (423 patients at this time) were emailed and asked to complete an online questionnaire (<u>https://www.citizenspace.com/stockport-haveyoursay/primarycare/marple\_cottage\_patient\_survey\_2013</u>)

- 1427 patients with recorded email addresses were sent the online questionnaire (<u>https://www.citizenspace.com/stockport-haveyoursay/primarycare/marple\_cottage\_patient\_survey\_2013</u>)
- 500 questionnaires were printed and made available for patients to complete on arrival to the practice at reception and in the waiting rooms
- 200 questionnaires were printed and given to clinicians to give out to patients opportunistically
- Questionnaires were given to patients opportunistically at specific health clinics:
  - Young asthma patients
  - Parents at nurse-led I&V clinics
  - o pregnant ladies at midwife clinics
- > Questionnaires were posted to the following target groups
  - o parents with their child's I&V recall letters
  - o women with their smear recall letters
  - o asthma patients with their asthma review letters
  - $\circ~$  men and women between 35 45 years with their NHS Healthcheck recall letters
  - o carers
- > Questionnaires were posted to all patients coded as Carers (85)
- > Questionnaires were taken by doctors on home visits to
  - o our housebound CDM housebound patients
    - o patients at residential homes

The survey results and comments were collated.

#### (c) Results of the patient questionnaire

#### **Total respondents: 555**

294 completed online questionnaire261 completed paper copies completed at the practice or returned by post49% increase on previous year

#### Table 7. – Breakdown of responses by gender

	No. of responses*	% total of responses	% practice population
Male	187	35%	50%
Female	355	65%	50%
1.1.0.11.1			

\*13 did not answer

	No. of responses	% total of responses	Increase / decrease compared to previous year
<18yrs	4	0.72	400%
18-24yrs	17	3.07	1%
25-34yrs	64	11.57	5.5%
35-44yrs	74	13.38	3%
45-54yrs	84	15.19	3%
55-64yrs	114	20.61	1.5%
65-74yrs	130	23.51	-0.5%
74-85yrs	56	10.13	-6%
85yr & over	3	0.54	1%

#### Table 8. – Breakdown of responses by age

\*7 patients did not answer

#### Summary of results

The results of the survey were reviewed and compared against previous years achievement by the Management Team.

#### Summary:

- Feedback on clinical practice of GP and nurses (Q11-13) showed consistent satisfaction rating year-on-year, with variability of 1-2%.
- There was marked improvement on Q11c (how the doctors listens to you) and Q11e (how good the doctor is at involving you in decisions about your care) where patients selecting either Very good or Good rose 6% from the previous year.
- > The overall satisfaction rating remained consistent
  - 95% of respondents were very or fairly satisfied with the overall service
  - **92%** of respondents said they would recommend Marple Cottage surgery to someone who has just moved to the local area
- Access to appointments within 2 working days (excluding 50 patients who stated they never needed to) showed 75% of patients stated they could get an appointment within 2 working days. This is lower than previous year, but was expected in light of appointment shortages during the questionnaire campaign (Nov 13-Feb 14) due to clinical staff long-term sickness. These have been addressed in part and as of March our usual access standards has being maintained.

#### Patient comments included:

I have always found the service at Marple Cottage Surgery to be first class

#### Nothing - an excellent surgery

*My impression is that the service is very good already, certainly much better than others I have heard about both locally and further a field.* 

We cannot think of anything that needs improving. Have always been treated with the utmost respect and concern

In my experience, you give an excellent service already Nothing, keep doing what you are doing

Our Dr is Dr Johnson and have no suggestions of improvement - excellent service being received thank you.

Nothing really we have had excellent service over 30 yrs

I am treated so well I cannot think of anything to improve. Excellent patient care, can't fault

The results of the patient questionnaire are available on the practice website <a href="http://www.marplecottage.co.uk/surveyreport.aspx?p=P88006">http://www.marplecottage.co.uk/surveyreport.aspx?p=P88006</a>

#### **Component Four and Five**

#### **PRG Feedback**

After reviewing the results, and the patient comments, the management team noted that key areas to review were appointment access and telephone access. A suggested action plan was drafted addressing these areas, and some other points raised in the patient comments/improvement ideas. This was sent to the Patient Forum and Virtual PRG in March 2014 for comment / amendment.

The feedback received from the virtual PRG was very supportive of the suggested plan action plan. There were no suggestions to change the plan.

Any issues raised in the Patient comments / improvements section which were not included in the Action Plan were addressed by including a "Practice Comment" on the results report.

#### Agreed Post-Patient Questionnaire Action plan 2013-14

(a) Managing appointment access (identified from results of Q1 and patient comments)

We will continue to ensure patients receive clinical advice and appointments when they need them, continuing to aim, where possible, to provide appointments within 2-3 working days

- (b) Improving telephone answering (identified from patient comments) We will continue to improve telephone answering service for patients throughout the day
- (c) Repeat prescription requests (identified from patient comments) We will reply to emailed prescription requests so that patients know the request has been received and is being actioned
- (d) Opening hours poster (identified from patient comments) We will ensure that the practice opening hours are displayed where they can be easily seen from outside the practice.

(e) Seek more patient involvement and increase membership of Patient Forum and virtual PRG

We will continue to promote and develop membership of the patient forum and virtual PRG to ensure we have good representation of our patient population

# Changes made as a result of the questionnaire / action plan – as of March 2014

#### (a) Appointment access

To help improve patient access within 2 working days we have

- extended the morning surgery times to increase the number of appointments available per week
- continued to offer 4 6 same day appointments for acutely ill children each day
- agreed to continue to provide evening surgeries 18:30 20:00 surgeries Tuesday & Wednesday April 2014 – March 2015.
- In addition we will continue to offer ad hoc monthly Saturday clinic for working patients
- drafted an April newsletter promoting the benefits of our 'email your doctor' service for quick / easy patient queries that don't need a faceto-face appointment

#### (b) Improve telephone answering

To improve telephone access we have

- (i) increased the number of hours staff are available to answer the telephone by
  - a. Increasing some existing staff core hours
  - b. employing a new member of staff who is now trained to answer the telephone
- (ii) implemented a new telephone answering rota (Feb 2014) to ensure that we have a good balance through the day ie sufficient numbers of staff to answer calls during lunch periods. *(this is always subject to difficulties managing staff illness and holidays)*
- (iii) drafted an April newsletter where we aim to promote alternative methods of communicating with the practice (eg via email and online services) which will help reduce the demand on the telephones and enable quicker access to those patients that do need to speak to someone

#### (c) Repeat prescription requests

We have responded to patient requests for acknowledgement of emailed repeat prescription requests so that

- (a) Requests emailed to STOCCG.MarpleCottageReception.nhs.net will receive a reply confirm receipt and estimated collection date.
- (b) Requests emailed direct to GPs will be acknowledged via email prior to processing.

Please note: by requesting prescriptions via email you are consenting to the practice communicating with you via email.

#### (d) Opening hours poster

In response to patient requests for clearer information regarding opening hours when the practice is closed we have

- (i) updated our website to reflect the premises opening hours, telephone opening hours and surgery opening hours.
- (ii) updated our practice opening hours poster and ensured it is displayed where patients can be easily seen from outside the practice.

## (e) Seek more patient involvement and increase membership of Patient Forum and virtual PRG

With the support and involvement of the Patient Forum we are continuing to seek patient feedback by

- (a) Asking or patient feedback by a
  - i. Patient Suggestions Box displayed in reception
  - ii. Via new website feedback forms
- (b) Promoting Patient Forum via
  - i. Forum leaflets/flyers/business cards promoting the Forum
  - ii. Maintaining dedicated Forum email address
  - iii. Maintaining dedicated Patient Forum promotional noticeboard
- (c) Promoting Virtual PRG via
  - i. "Join our Virtual Patient Group" sign-up form
  - ii. Practice Newsletters
  - iii. GPs / nurses opportunistically asking patients during
    - consultations if they would be interested in joining the group.

#### **Component 6 – Publicise the results**

The local patient participation report and the Patient Questionnaire results have been published on the practice website in March 2014, emailed to the Patient Forum, emailed to the virtual PRG, and publicised via the Practice Newsletter.

To view the results click here: http://www.marplecottage.co.uk/surveyreport.aspx?p=P88006

#### 2012-13 Action plan – Progress Overview

#### (f) Increase membership of Patient Forum and virtual PRG

- a. designed Patient Forum leaflets/flyers/business cards promoting the Forum / how to get involved
- b. Provided dedicated Patient Forum promotional noticeboard
- c. Created "Join our Virtual Patient Group" patient sign-up form
- d. Promoted via Practice Newsletter

#### (g) Maintain/improve access

- e. providing evening surgeries 18:30 20:00
- f. promoted online services/Email your doctor service (reduce number of appointments used for simple queries / requests that can be dealt with electronically)

#### (h) Improving privacy in the waiting room

- g. Reintroduced poster on the reception desk advising that patients can request to speak to someone in a private room if necessary
- h. Training with staff to adhere to confidentiality policy that whilst on the telephone on reception desk we will avoid, where possible, identifying / repeating patient details.
- i. Installed a floor-standing notice near reception asking patients not to approach the desk whilst receptionist dealing with someone (as suggested by patients in the patient questionnaire)

#### (i) Customer service

- j. Increased number of staff available to deal with patient queries as of Mid April 2013
- k. Increased customer service focussed training within practice development plan

#### (j) Premises improvements

- I. redesigned our car park and creating additional car parkin spaces
- m. created new disabled car parking spaces with turning circle
- n. redesigned main entrance by replacing steps with a sloped walkway with grab-rails
- o. installed an electronic door opener

## **PRACTICE OPENING TIMES**

### The premises are open for appointment booking / prescription collection, etc

- Monday to Thursday 08:15 18:30
- Tuesday & Wednesday 08:15 20:00
- Friday 08:15 18:00 (closed for training 12:30-13:30 Monday & Wednesday)

## You many telephone the practice (0161 426 0011) between the following times:

- Monday to Thursday 08:00 18:30, Friday 08:00 18:00
- We are not able to take calls between 12:30-13:30 Monday & Wednesday when we are closed for training; any emergencies are managed by Mastercall Out of Hours service by ringing 0161 476 2299

### Our GP and nurse clinics run between

• Monday & Thursday 08:30 - 18:00, Friday 08:30 - 18:00

## Late night evening clinics and weekends

- We have late night GP surgeries on Tuesday & Wednesday 18:30 20:00
- We run an ad hoc monthly Saturday GP clinic (subject to availability)

You may email the practice for repeat prescriptions, general queries etc at <u>STOCCG.marplecottagereception@nhs.net</u>

For non-urgent advice you may **email a clinician directly**: <u>http://www.marplecottage.co.uk/info.aspx?p=13</u>

### While we are closed:

If you need a doctor in an emergency and our practice is closed, please call Mastercall Out of Hours service on 0161 476 2299111, or 111, who will be able to deal with your problem.

Appendix A





## Your Views Count Join our 'Virtual' Patient Group

Dear Patient,

We would like all our patients to be **join our** '**virtual**' **patient reference group** (a representative <u>online</u> patient group who offer their feedback about the practice <u>every now and then</u> e.g. a patient survey). We promise we will not email you every week!

All we need is your name, date of birth and email address and we will send you an email at some point in the future when we would like you feedback on a particular issue.

Please support your practice and sign up now:

Name:	
DOB:	
Email:	

Please return to reception. Many thanks for your support





## Help design <u>your</u> practice questionnaire 2013-14 <u>Your</u> views count!

Dear Patient,

We are already planning our next annual survey, and to ensure that we ask the right questions we would like to know what you think should be our key priorities. Please select below <u>your top 5 topics</u> below which you feel we should include in a patient survey

Suggested topics for questions on Patient Survey (2013-14)	Tick ☑ (if appropriate)
Satisfaction with practice opening hours	
Ease / speed of getting an appointment	
Ease of getting through on the telephone	
Quality of customer service	
Communication with patients	
Waiting times	
Ability to see your preferred GP	
Quality of your consultation	
Your understanding of your consultation	
Health promotion	
Online services	
Premises / facilities	
Practice involvement with Medical Student training	
Community services e.g. district nurses, etc	
Out of hours care	
None of the above / Other (please write here):	

Thank you for your help. We will now collate all responses and compile a new patient survey.

#### Marple Cottage Surgery