

Old Harlow Health Centre - February 2008

Patient Survey Report

2007 Patient Survey Results + review of 2006 Patient Survey.

For the last 4 years Old Harlow Health Centre has run the NHS approved standard patient survey (GPAQ). This report compares the last two years results with each other, and also compares the 2007 results with the national average response for each question – i.e. the average result taken from hundreds of GP Surgeries across the UK.

The results of the OHHC GPAQ 2007 survey are summarised as follows.

Of the 167 individual patient surveys completed, 18 negative comments were noted, but over 42 positive comments were made. The most common positive comment was the level and degree of care and professionalism shown by clinical staff, followed closely by the excellent service provided by reception staff. Of the 21 negative comments, the most prevalent issue raised was the waiting time at the surgery to be seen by the doctor on the day of the appointment. The mean score relating to Q9b 'Satisfaction with continuity of care' may be associated with the three GP Registrars attached to the Practice for the last year

A summary of the OHHC GPAC survey (shown below) was analysed, and clearly the results of Q10a to Q10h inclusive; which specifically focuses on how much time, attention and involvement the Dr provides the patient, were excellent. In these areas our Doctors scored around the national GPAQ benchmark. This is very clear evidence that the focussed and diligent work of Doctors, Nurses and administrators at OHHC has significantly contributed to this excellent performance.

2007 Survey results – survey carried out during September 2007

Table 1. Mean scores of evaluation questions (as percentages) compared to the GPAQ benchmarks 2006

Mean score	GPAQ benchmark	
Q2. Satisfaction with receptionists	78	77
Q3a. Satisfaction with opening hours	63	67
Q4b. Satisfaction with availability of particular doctor	59	60
Q5b. Satisfaction with availability of any doctor	70	69
Q7b. Satisfaction with waiting times at practice	54	57
Q8a. Satisfaction with phoning through to practice	60	59
Q8b. Satisfaction with phoning through to doctor for advice	58	61
Q9b. Satisfaction with continuity of care	62	69
Q10a. Satisfaction with doctor's questioning	83	81
Q10b. Satisfaction with how well doctor listens	84	84
Q10c. Satisfaction with how well doctor puts patient at ease	82	84
Q10d. Satisfaction with how much doctor involves patient	81	81
Q10e. Satisfaction with doctor's explanations	83	83
Q10f. Satisfaction with time doctor spends	80	80
Q10g. Satisfaction with doctor's patience	83	84
Q10h. Satisfaction with doctor's caring and concern	83	84
Q11a. Ability to understand problem after visiting doctor	67	69
Q11b. Ability to cope with problem after visiting doctor	58	66
Q11c. Ability to keep healthy after visiting doctor	56	62

Old Harlow Health Centre - February 2008

Patient Survey Report

Summary of 2007 Survey and Initiatives

In early 2007, the results of the 2006 survey were analysed (see table below) and as a result, the key activity was to pursue the additional module for the replacement telephone system to ensure that an improved service to the patients was achieved.

The table below compares the 2007 OHHC GPAQ survey against the 2006 OHHC GPAQ survey. An unexpected drop in Q5b was experienced; this is slightly perplexing as the Practice strictly adheres to the 24/48 hour access. Question 9B, which relates to continuity of care has dropped significantly; one possible explanation is that the Practice had three GP Registrars during the survey period. An unexpected drop in Q3a was experienced, the satisfaction with opening hours. The Practice has not changed its hours in the past year, however some of the comments indicated that they would like to see evening surgeries and weekend surgeries. One of the possible reasons in this drop could be the change in expectations from the patients, which could be attributed to the political agenda and media coverage throughout the previous year.

2006 - 2007 Comparison	2007	2006
Table 1. Mean scores of evaluation questions (as percentages)	Mean score	Mean score
Q2. Satisfaction with receptionists	78	79
Q3a. Satisfaction with opening hours	63	66
Q4b. Satisfaction with availability of particular doctor	59	62
Q5b. Satisfaction with availability of any doctor	70	77
Q7b. Satisfaction with waiting times at practice	54	57
Q8a. Satisfaction with phoning through to practice	60	62
Q8b. Satisfaction with phoning through to doctor for advice	58	59
Q9b. Satisfaction with continuity of care	62	67
Q10a. Satisfaction with doctor's questioning	83	81
Q10b. Satisfaction with how well doctor listens	84	83
Q10c. Satisfaction with how well doctor puts patient at ease	82	82
Q10d. Satisfaction with how much doctor involves patient	81	79
Q10e. Satisfaction with doctor's explanations	83	82
Q10f. Satisfaction with time doctor spends	80	81
Q10g. Satisfaction with doctor's patience	83	82
Q10h. Satisfaction with doctor's caring and concern	83	82
Q11a. Ability to understand problem after visiting doctor	67	67
Q11b. Ability to cope with problem after visiting doctor	58	59
Q11c. Ability to keep healthy after visiting doctor	56	59

Our key priorities for continuing to maintain and improve patient satisfaction over the next two years.

Given the fact that the results of our 2007 survey showed that Q11b – Q11c were still below the GPAQ benchmarks, it may be that additional patient education is required. The three questions are also very subjective and can be interpreted in different ways.

Old Harlow Health Centre - February 2008

Patient Survey Report

Shown below are the 'Could be improved' comments from the 2007 survey. Only these comments are shown as these are more relevant in terms of focusing on possible areas of improvement.

See summary below.

Summary of patient comments from the 2007 GPAC Survey

167 surveys carried out - 42 patients gave positive comments.

18 patients gave comments on 'if anything could be improved', whilst 23 patients gave other comments (most of which were complimentary)

111 patients did not comment at all.

All comments entered in 'if anything can be improved' area

(These are transcribed as written, and have not been altered for grammar or punctuation)

Having a local gp available outside of normal working hours

Blood tests used to be easier than they are now - why cant you wait for a slot like PA

stop music in waiting room, people who are ill want peace & quiet. Also majority of patients are older and dont like the music

Time restrictions for book on day appointments, not always convenient to ring at 08.30 / 1.30

perhaps the nurse could deal with small queries

Do not like phone system not got personal touch.

Manner in which the receptionists ask personal questions, i.e. why do you want to see a doctor? (This is personal and private)

Phone access at 8.30 difficult to get through

Maybe Sat morning appointments

Being able to get through by phone to make an appointment in advance

More blood test slots

Urgent, Same day appts – difficulty in getting through on telephone at times specified

Longer hours,

Possibly extended opening times if this would be possible

Attitude of some of the male doctors!

Easier to book an appointment & be seen quickly to app. Time as it can make you late for work

sticking to scheduled appointment times

Opening times

The vast majority of comments made in the 2007 survey were extremely positive, and these very positive comments far outweighed the 'if anything can be improved' area shown above. However, in reviewing the above 18 comments, the top issue raised by our patients was the extended access followed by the waiting time at the Practice for their allotted appointment time, the telephone system and the music broadcast is still not to everybody's liking or is too loud.

Some comments are beyond the Practice's ability to influence without additional NHS funding - e.g. weekend and evening clinics, however the government of the day is currently imposing changes to the GP's contract which will probably result in the Practice opening for additional time periods, yet to be determined. As per the previous year, two comments related to the time management issues with regard consultation length and the cumulative effect when consultations take more than 10 minutes. It should be reiterated that being a Training Practice does sometimes impact upon consultation length as well as the normal issue of the more complicated consultation.

Old Harlow Health Centre - February 2008

Patient Survey Report

In summary, following analysis of both the GPAQ 2007 survey statistics, and the total review of patient comments, the priorities over the next 2 years to improve patient satisfaction are;

- 1) Extended access or Opening Hours – currently being imposed by the NHS employers, actual hours yet to be determined and will be negotiated with Primary Care Trust.
- 2) The time management with regard to GP consultation length.

The detailed action plan for achieving these priorities is as follows;

1) The Practice is currently considering the options regarding the NHS employers' imposition of extended access and how the Practice will implement them, taking into consideration the patients comments and holding discussions with the Primary Care Trust to negotiate a successful outcome.

2) The delivery of improved GP 'appointment time duration' adherence will only be achieved if the Practice were to rigidly stick to 'one problem – one consultation', which is not the Practice philosophy. The consensus is that the doctors would rather address the needs of the patient during the consultation, it is regarded that this is a better use of both patient and clinician time and may reduce the necessity of a further appointment. Some of the comments reflect this, in as much that they 'comment on the waiting time', but understand the reasons behind it. It should also be noted that being a forward thinking 'Training Practice' the doctors are reflective, discussions on this type of issue are held with the GP Registrars and the rest of the Practice team on a regular basis. The Practice will continue to monitor and review this issue over the next two years to see if any changes to the appointment system need to be implemented.

In terms of communicating the findings of the 2007 GPAQ survey, the Practice team GP's and staff have met (30th January 2008) and discussed the findings in detail to address the issues raised, and in terms of communicating our above stated action plans and initiatives to our patients, the practice has chosen to use the OHHC Practice website as the primary source / method for communication. (This document will be available for download or viewing from the practice website at www.oldharlowhealth.co.uk as well as being available as a physical document directly from the Practice) We have also put up clear - large format print posters in our waiting areas, not only promoting the Practice website, but also promoting the fact that the findings of our recent 2007 patient survey are also viewable on-line via this website. These waiting room posters will also point out that this information is also available in hard copy format for those patients without web access, thus ensuring that all patients can review our survey findings - not just patients who have access to the internet.

The results of the survey were discussed with the '**Friends of Jenner House**' patient group on the 28th February 2008. The feedback received was positive and it was remarked that the implementation of new telephone system had improved the access to the Practice. However it was also acknowledged that not all people enjoy the experience of dealing with an auto attendant, even though the system has been kept as basic as possible.

The practice manager is the lead person within the practice for patient satisfaction surveys. As part of the process of analysis of this year's survey, we have considered the option of running further surveys on the needs of specific groups – however we believe that the measures we will be putting in place over the next two years will make a significant difference to all our patients; and therefore at this time there is no immediate justification for running further focus studies or patient surveys aimed at any one particular group of patients.

Old Harlow Health Centre - February 2008

Patient Survey Report

In summary. The action plan detailed above, will directly and positively impact on our ability to deliver improved patient services in the key priority areas over the next 2 years. This information is being fully shared with our patients, via web access, and via report copy if requested at the time of a practice visit.