

Abington Medical Centre Patient Experience Survey Report

1. Introduction

In October 2014 Healthwatch Northamptonshire visited Abington Medical Centre in Northampton as part of a county-wide survey of GP practices. The survey aimed to find out about access to services, the patient experience, good practice and what pressures there are within the practice. A summary report of the findings from the county-wide survey, including good practice and recommendations, is available on our website¹.

We spoke to ten patients at Abington Medical Centre about their views, experiences and satisfaction. By speaking to patients face to face we could add depth to the findings of the National GP Patient Survey². We also spoke to the practice manager to find out about services currently being provided, how they are accessed, what they felt worked well and what pressures there were. The questions used are in Appendices 1 and 2.

On a separate occasion a Deaf, British Sign Language (BSL)-using Healthwatch Northamptonshire volunteer made an unannounced visit to the practice to investigate how easily a Deaf person could access services (see section 3.5).

2. Practice information

2.1 Practice size and staffing

Abington Medical Centre is a large practice (approximately 14,000 patients) with seven doctors (five full-time male doctors and three female doctors - one full-time and two part-time), four nurses (one of whom is a prescriber), one healthcare assistant and two phlebotomists. It is a training practice with one of the GPs responsible for training registrars. One of the GPs was replaced in August 2013 and they are currently recruiting for another due to a retirement.

2.2 Services provided

The practice provides a range of services and clinics, including: ante natal, child health and immunisations, family planning, diabetes, heart disease, smoking cessation, physiotherapy, Flu vaccinations, dressing changes, Dementia reviews, and travel vaccinations. There is also a notice board for carers.

Specialists: One GP specialises in musculoskeletal work (conditions affecting muscles, bones, joints, tendons and ligaments and associated tissue), one in

¹ www.healthwatchnorthamptonshire.co.uk/about/docs

² <http://gp-patient.co.uk>

diabetes and one leads on COPD (Chronic Obstructive Pulmonary Disease) management. Two GPs are trained in family planning and one in cardiology. Two nurses have been trained in diabetes, two in COPD, one in family planning one in immunisations. Three externally-employed wellbeing workers run weekly sessions for people with alcohol and other wellbeing issues, signposting or counselling patients as necessary. A staff member expressed the view that they felt this service was uncoordinated.

Shared services: A community psychiatric nurse is shared with another practice.

Extended opening: The surgery is open from 8am to 6.30pm and remains open until 7pm for people still in the waiting room. Appointments can be booked between 6.30pm and 7pm.

Home visits: Daily home visits are made as required, including to housebound patients with Dementia. A weekly ward round is carried out at three nearby nursing homes - St Johns, The Avenue, and Abington Park.

2.3 Appointment booking system

Appointments can be booked on the day or in advance, by telephone, in person or online. The practice protects 100 face to face appointments on Monday and Tuesday and 70-80 during the rest of the week in order to offer same day availability. Some of the appointments on Tuesdays to Fridays are reserved for results and medicals. There is a duty GP on every day on a rota basis, carrying out telephone consultations, home visits and emergency calls, when patients will be seen if necessary. There are four phone lines for appointment booking, and these are expected to be answered within three rings. The phone number has been changed to a local number. Patients can see a GP of their choice if they are prepared to wait.

Missed appointments: There is a text message reminder service for appointments. There were approximately 30 DNAs (Do Not Attend - patients who did not turn up) for both GPs and nurses in the previous week. The weekly immunisation clinic has 15 DNAs per session. A standard letter is sent out to patients who abuse the system.

2.4 Patient Participation Group (PPG)

10 to 12 patients attend quarterly meetings with the practice manager. There is also a virtual group of 80 patients who complete the annual survey about the appointment system. GPs do not attend meetings but are kept informed. The PPG have fundraised for the new blood pressure machine in the waiting room for patients to take their own blood pressure. The practice also has a newsletter, which has subscribers and is printed bi-monthly, and keeps their notice boards, leaflets, posters and web site up to date.

2.5 Complaints system

Complaints leaflets are displayed in the waiting room, and the information is on the website. The practice manager handles all complaints either over the phone,

face to face, by email or by letter. All complaints are responded to within 10 days. Any complaints that come via NHS Choices are anonymous and therefore cannot be answered.

2.6 Equality and diversity

We asked the practice about their equality and diversity policy and how the practice met additional needs of patients. The following were mentioned:

- hearing loop system
- annual health checks are offered to patients with learning difficulties
- patients with learning difficulties are given extra time for appointments
- Pearl interpreter services are used and patients needing interpretation are given longer appointments and/or home visits if required
- dogs are allowed into the building for those with impaired sight
- Braille is written on the fire door exit
- receptionists will greet patients who need assistance and take them to the pharmacy
- the practice has a safeguarding lead
- staff keep their equality and diversity training up to date through e-learning, which there is protected time for.

3. Patient experience

3.1 Appointment system

Just over half of the people we spoke to (six of ten) found it easy (three) or very easy (three) to get an appointment when they needed one. Three patients thought it was 'OK' and one patient found it very difficult.

Most positive or satisfactory experiences of getting an appointment mentioned being able to get an appointment on the same day (four mentions) and being able to pre-book appointments (one mention). For example:

- “Recently the system has become easier - I’m nearly always seen on the day now”
- “Generally I can get an appointment on the same day”
- “If I am feeling ill I can always get an appointment on the day”
- “I pre-booked over the phone - works well”

The less satisfactory experiences of getting an appointment referred to the phone lines being engaged (five mentions of this), it being difficult to get a same day appointment (one mention of this) and having to wait a long time to see a doctor of choice (one mention of this). For example:

- “Phone lines are continually engaged”
- “I had to wait 15 minutes for the phone to be answered”

- “It is very difficult to get an appointment at 8am because the phone lines are always engaged. If you persist you always get an appointment”
- “It is difficult to get an appointment in advance”
- “If you want to see specific GP you can wait for months”

3.2 Choice of doctor

Two thirds of patients (six) did not get to see the doctor of their choice but two of these said that it did not matter to them who they saw. Three people said they were able to see the doctor of their choice.

- Two patients said they preferred to see the same doctor for continuity of care.
- Two patients said they could see their chosen doctor provided they were prepared to wait for an appointment.

3.3 Treatment and quality of care and service

All of the patients we spoke to were always (eight) or usually (two) satisfied with the care provided.

We asked people what they thought could improve the quality of care - nine people commented:

- Three patients thought the appointment system could be improved, particularly when trying to get through on the phone.
- Two patients would like it to be easier to see their GP for routine appointments (and see the same GP for continuity of care).
- One patient felt that they had to wait too long at reception.
- One person found the electronic sign-in board unreliable.
- One person was surprised that they were sent to Northampton General Hospital for a blood test when the practice has a phlebotomist.
- Four patients thought that nothing needed improving.

We also asked people what works well. Four patients thought that “everything” works well. Two patients gave more specific answers:

- “Generally the system works well - doctors, staff, receptionist and the patients work well together”
- “The practice is always very supportive. I have a small baby so am often worried but I am always reassured and informed”

3.4 Communication and additional needs

Nine out of ten patients had no problem communicating with doctors or staff. One patient said they did but did not explain why.

We also asked patients if they had any additional needs that required support (such as hearing or visual impairment, learning or physical disabilities, English as a second language) and whether their needs were met. Two patients said they did, one of whom felt that their additional needs were not met as they did not use the loop system.

3.5 Deaf access audit

One of our deaf volunteers visited the practice in December 2014 and looked at five areas from the point of view of a deaf patient: arrival, how to register, how to book appointments, interpretation services, and waiting room access. The volunteer's first language is British Sign Language (BSL).

Arrival:

The receptionist communicated with the volunteer by writing on a piece of paper. They did not know any basic BSL signing.

Registering:

Registration was via a form. The volunteer thinks the form should include a questions that asks if the patient needs anything to access services, such as an interpreter.

Booking an appointment:

This would be difficult for a deaf person as they will have to phone or visit to arrange an appointment. There were no apparent online booking, email or text message facilities.

Interpreters:

The practice would provide a BSL interpreter but there would be a longer wait for an appointment.

Waiting room access:

The volunteer thought that the access was poor as there was no television screen for calling patients in. This means that a deaf person would have to keep watching a light until it flashed.

Overall deaf awareness:

The volunteer thought that the practice's overall deaf awareness was poor due to the difficulties he faced in the waiting room and with the appointment booking system.

3.6 Additional comments

We asked people if they had any other comments to make about the practice. There were nine additional positive comments and one additional negative comments.

Positive:

- Four people said that Abington Medical Centre was much better than their previous surgery.
- One person found all the staff very helpful.
- One person thought the surgery was very good.
- One person said they were always satisfied.

Negative:

- One person thought they did not always get the help from the administration staff that they needed.

We also asked the Practice Manager if they were any more issues, pressures or examples of good practice that they wanted to tell us about:

Issues/pressures

- It was thought that GP surgeries are facing huge challenges with increasing patient numbers and expectations, funding shortfalls, reporting requirements, and pressure on other services.
- The practice needs another GP but there is a lack of funding and facilities.
- District nurses are short staffed and overstretched, and practice nurses spend time every day dressing leg ulcers, which should perhaps be done at hospital.
- Mental health referrals are unnecessarily difficult and time consuming and the wellbeing counsellors seems to constantly change.
- Patients can be reluctant to use the pharmacist for advice, especially when they can get medicines through free prescriptions.
- A lot of people do not attend immunisation appointments, approximately 15 per session. Health Visitors follow up on these.

Works well

The practice carries out an annual patient survey to look at patient satisfaction with their appointment booking system.

4. Highlights

According to the results of both our patient survey and the National GP Patient Survey, the practice appears to be well liked and most patients think that the staff are helpful and involve them in decision making. Most patients were able to get an 'on the day' appointment when they needed one but many found it hard to get through on the phone and make appointments in advance.

5. Recommendations

1. While the practice has four phone lines and a policy to answer them within three rings, they could consider further ways to decrease the length of time it takes for people to get through on the phone.
2. The use and promotion of additional means of booking appointments (such as text messaging or online booking) could help reduce the pressure on the phone lines in the morning and would make it easier for deaf patients to make appointments.
3. The use of a screen in the waiting room displaying when a patient is called in and the introduction of an ‘additional needs’ section to the patient registration form would improve the experience for deaf patients.
4. The practice could consider further ways of offering patients the chance to see the same doctor for continuity.
5. The practice should contact Deafconnect for advice and assistance in improving access for Deaf BSL users.
6. GPs should aim to attend a PPG meeting on an occasional basis to hear directly from the group.

6. Thanks and acknowledgements

Healthwatch Northamptonshire would like to thank the Practice Manager of Abington Medical Centre for taking the time to talk to us and facilitate our visit, all the patients who were willing to take part in our survey and the Healthwatch Northamptonshire volunteers who visited the practice.

7. Response from the Practice

“I would like to thank you for this report, we have found it useful and have learnt from the feedback and implemented the following:

Recommendations and action taken:

- We have recruited an additional member of staff to help answer the phones. At peak times we have five people answering in the morning now.
- We have protected some same day availability with various GPs for telephone consultations and face to face appointments to try and help with continuity. We do accept to book future appointments there is a wait and we are constantly reviewing how we work to improve our systems.
- Our practice is not set up with a display screen calling system as we think it is more personal to meet and greet the patient ourselves but our records do show the clinician if a patient is deaf/blind or has a disability and the doctor or nurse

would be aware when going out to greet and call in the patient. If reception are also made aware by the patient we can help ensure the patient is near to the room they are going to and we can help support them.

- Regarding deaf patients - we will look at our register and see if we can offer a text or email service to those that are profoundly deaf.
- We have added a section to our registration form regarding additional needs and support required to help the patient.
- The reception manager and a member of staff that wear hearing aids attended a deaf awareness course and fed back how good it was. Since then Deafconnect spent an afternoon with the practice team in November 2015 giving training and guidance. Our staff found this to be very informative and useful.
- Regarding GPs attending a PPG meetings - I understand how this would be good. This is something we will look at in the future.”

Appendix 1 - Patient survey questions

Q1: How easy is it to get an appointment when you need it? (Please tick one) Very easy <input type="checkbox"/> Easy <input type="checkbox"/> OK <input type="checkbox"/> Difficult <input type="checkbox"/> Very difficult <input type="checkbox"/>
Q2: Please tell us more about your experiences of getting an appointment, <i>including how it is easy or difficult, how long you have to wait to get an appointment, and whether the system works well for you:</i>
Q3: Do you usually get to see the doctor/nurse/health professional of your choice? Yes <input type="checkbox"/> No, but I'd like to <input type="checkbox"/> No, but it doesn't matter to me <input type="checkbox"/> Please tell us more about how this is important to you or not:
Q4: Are there any problems when communicating with staff or doctors? Yes <input type="checkbox"/> No <input type="checkbox"/> Please tell us more:
Q5: Are you satisfied with the treatment and service you receive here? Yes, always <input type="checkbox"/> Yes, usually <input type="checkbox"/> No <input type="checkbox"/> Please tell us more:
Q6: What do you think could improve the patient experience at your GP practice and what do you think works particularly well? Improvements: _____ Works well: _____
Q7: Do you have any additional needs that require support? Such as hearing or visual impairment, learning or physical disabilities, English as a second language, etc. Yes <input type="checkbox"/> No <input type="checkbox"/> If so, are they met? Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know <input type="checkbox"/> Please tell us more:
Q8: Is there anything else you would like to tell us?

Appendix 2 - Practice Manager survey questions

<p>Q1: What is the staff makeup of the surgery (+ see briefing)? Do you have any nurse practitioners / prescribers and do you provide a mental health service? <i>E.g. Have there been any changes to the surgery staff since the briefing? What are they? E.g. Which staff provide mental health care and advice?</i></p>
<p>Q2: Have you any GP or staff vacancies? How long have these posts been vacant?</p>
<p>Q3: How does your appointment booking system work? (only need to ask about what is different to the briefing) <i>E.g. the role of the receptionist, whether there is online booking, how far in advance patients can book appointments, how much choice patients have over time and GP, whether they use an 0845 number, how many phone lines they have, telephone triage? What do you do with temporary or unregistered patients?</i> Have any significant patient criticisms of the appointment system been reported by the PPG and how have these been addressed?</p>
<p>Q4: Does the practice conduct home visits?</p> <p style="text-align: center;">Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>How are these organised?</p>
<p>Q5: What additional facilities does the practice have? (only need to ask about what is different to the briefing) (E.g. specialist clinics, counsellors, blood tests, specialist doctors, dressing changing facilities, drop in sessions) Do you share facilities with any other GP practices in your locality? Or does your practice or GP cluster have any specialisms/clinics or specialist doctors? If so, what and is this working? Would you like to see any more? Is there anything else working well in your locality? Are there any plans for further sharing of resources?</p>
<p>Q6: Does your practice have any extended opening hours or do you plan to (if not mentioned in briefing)? Has this been requested by your PPG?</p>
<p>Q7: Is the 111 Service prominently advertised by the Practice and does the service provide adequately for your patients and for their out of hours requirements? (Also see PPG and Patient Surveys and Reports)</p>
<p>Q8: Do you have an active patient engagement group? How is advertised and how can people join? Is it funded by the practice and how often do they meet? (Other than what is mentioned in the briefing)</p>
<p>Q9: Where is your complaints system publically displayed? <i>E.g. Is it in the patient information leaflet, noticeboard, reception desk?</i> How are complaints dealt with?</p>
<p>Q10. How else do you communicate with patients? <i>E.g. noticeboards, leaflets, website, guidelines about best times to call</i></p>
<p>Q11: What is your equality and diversity policy? How is it implemented? E.g. How provide access for those with physical, visual, hearing, and/or learning disabilities and autism and non-English speakers. BSL/interpreters? Is there staff training or understanding of obligations?</p>
<p>Q12: What other staff training does your practice have? <i>What decision aids/training are receptionists given?</i></p>
<p>Q13. Are there more patients attending your practice than there used to be? Have you any thoughts on why that is or why there is pressure on GP practices?</p>
<p>Q14: Is there anything else you would like to tell us about? E.g. things that are working well, challenges the practice faces, additional support needs they have, thoughts about A&E attendance, etc.</p>