

Iveagh Surgery Patient Reference Group Report and Action Plan

31st March 2014



Written by
Naomi McCulloch, Practice Manager

With support from
The Iveagh Surgery Patient Reference Group

Thank you

to every patient who has supported the surgery by engaging with the patient reference group, by completing a survey or by feeding back your concerns or ideas.

The Iveagh Surgery is grateful for the time and efforts you have taken to share your views and help us make this surgery better for all our patients.

Contents

Introduction	4
Background	4
Patient Participation Direct Enhanced Service	4
Step 1 – Maintaining the Patient Reference Group	4
Recruitment to the Patient Reference Group	4
Step 2 – Agree areas of priority with the PRG	5
Background	5
Virtual PRG	5
Direct consultation	5
Identification of areas of priority	5
Step 3 – Collate the views through the use of a survey	6
Survey content	6
Survey methodology and distribution	6
Limitations to the survey	6
Findings of the survey	7
Step 4 & 5 – Provide PRG with opportunity to discuss survey findings and agree action plan and implementation	8
Patient Reference Group Event to discuss survey findings	8
Practice Action Plan	8
Step 6 – Publicise actions taken and subsequent achievement	9
How we will let you know how we are doing	9
Action taken in response to patient feedback in 2011-13	10
Appendix 1 – Extract from PRG Report 2012	11
Appendix 2 - PRG registration form in 3 languages	13
Appendix 3 – Advert promoting the PRG	19
Appendix 4 – Breakdown of PRG membership	20
Appendix 5 – Letter / Email sent to PRG consulting on priority areas	22
Appendix 6 – Results of direct consultation	23
Appendix 7 – Patient survey 2014	24
Appendix 8 – Survey results	32
Appendix 9 – Patient event flyer and poster	52
Appendix 10 – Notes from patient event held 27 March 2014	53
Appendix 11 – Practice opening times	57

Introduction

Background

The Iveagh Surgery is committed to ensuring that we deliver the best possible service we can for our patients. To make sure we are getting it right, we rely on the views of our patients so we can be confident that we are always working in their best interests.

In 2011 the practice established a Patient Reference Group (PRG) as a formal mechanism for the practice to consult with and listen to what its patients have to say about the surgery, and for patients to have an opportunity to be more involved and get their voice heard.

Patients recruited to the PRG decided that they would like an informal network with a range of opportunities for communication with the practice including an email network, events at the practice and an annual practice survey for all patients to participate in. An explanation of how the PRG was established in 2011 is detailed in Appendix 1. Full details of the activity undertaken in 2011 and 2012 are provided in the report 'Patient Reference Group Report and Action Plan 2012' (available from the practice on request).

In 2012 and 2013 the practice built on this by delivering an action plan based on the findings of the survey conducted in 2011, holding further events for patients, and conducting an annual survey in 2012. Full details of the activity undertaken in 2012 and 2013 is detailed in the report 'Patient Reference Group Report and Action Plan 2013' (available from the practice on request).

In 2013 and 2014 the practice continued to develop the PRG by developing the PRG membership, testing a 'virtual' network, conducting an annual survey and holding patient involvement events. Full details are included within this report.

Patient Participation Direct Enhanced Service (DES).

The Iveagh Surgery has participated in a national programme for GPs called the Patient Participation Direct Enhanced Service (DES). This report fulfils the requirements of the DES.

Step 1 –Maintaining the Patient Reference Group

Recruitment to the Patient Reference Group (PRG)

The practice established the PRG in 2011 and recruited 286 members. The membership was broadly representative of the practice population by gender, age and ethnicity. A number of measures were taken to ensure that all patients had an opportunity to join (for example providing registration forms in a variety of common languages (appendix 2), guidance and advice from staff about the purpose and nature of the group). Full details of the activity undertaken by the practice to establish the patient reference group are provided in appendix 1.

As recruitment to the PRG had been successful in the first year, the practice kept up the momentum by advertising the group on the practice information screens (appendix 3), and making registration forms and PRG information available to new patients when they register with the practice.

In March 2014 the Patient Reference Group (PRG) had 237 members. This was a decline on numbers from 2012. However it is important to note that since the relocation of the practice to new premises in 2012, the registered practice population reduced by more than 800 patients. The PRG lost a significant proportion of members. However during the same period the PRG also recruited 33 new members. The membership remains broadly representative by age, sex, ethnicity and frequency of attendance. See a full breakdown in appendix 4.

Step 2 - Agree areas of priority with the PRG

Background

During 2011 and 2012 the PRG held events where patients could discuss and identify areas of priority for the practice to be included within the practice survey. The experience of the practice was that although the events were generally quite useful for discussing ideas and exploring issues, the events themselves were generally poorly attended and those in attendance were not representative of the wider patient population.

In 2013, the practice experimented with alternative methods of agreeing issues to prioritise in the patient survey with patients.

Virtual PRG

In order to generate a response from a wider range of patients, the practice attempted to set up a virtual group to consult on the priority areas. An email was sent to all PRG members in October 2013 (see appendix 5) asking for feedback on suggested areas to include in the patient survey and also asking for any alternative suggestions. A letter was sent in the post to those patients who do not have access to email.

The response to the email and letter was very low (2 responses were received both supportive of the topics suggested by the practice).

Direct consultation

As response to the virtual group had been low, the practice undertook a piece of work directly approaching patients in the waiting room to ask their views on the suggested topics for the survey and ask for any other priority areas.

The findings are summarised in appendix 6.

Identification of areas of priority for the Patient Survey

In addition to suggestions and ideas put forward by patients via the virtual PRG and through direct discussion in the practice, the surgery used the following methods to identify areas of priority:

- Review of patient complaints from the past 12 months
- Priority areas for Lambeth Clinical Commissioning Group
- Practice development plans
- Revisit key areas of priority from the annual surveys in 2012 and 2013 to see whether there had been any changes or improvements

The following areas of priority were agreed based on the feedback from patients.

- Satisfaction with reception staff
- Types of appointments
- Communications – interpersonal and practice information
- Practice Website
- Satisfaction with clinical staff
- Overall experience and satisfaction with the service

• **Step 3 - Collate patient views through the use of a survey**

Survey Content

The content of the survey was drawn from discussions with patients via the virtual PRG, in the waiting room, the practice complaints review for 2013, key priorities for the Lambeth Clinical Commissioning Group and key areas of development for the practice. A copy of the survey is given as appendix 7.

Topics included in the survey were:

- Satisfaction with reception staff
- Types of appointments
- Communications – interpersonal and practice information
- Practice Website
- Satisfaction with clinical staff
- Overall experience and satisfaction with the service
- Demographic information to ensure responses are representative

Survey methodology and distribution

A mix of quantitative data collection for analysis of trends and qualitative questions to help identify fresh ideas for development and innovation were included in the survey. The data collection tool was created on Survey Monkey (online survey tool) in order to support data entry and analysis.

Patients identified that they would like a variety of methods to complete the survey to engage as many patients as possible. The survey was sent out by email to all PRG members with a link to the Survey Monkey tool so patients could complete the survey online. PRG members without email were sent a hardcopy by post with freepost return envelope. In addition registered patients were handed hardcopies in the waiting room when they attended the practice which when completed were then placed in a sealed container behind reception.

All responses to the survey were anonymous. Patients were asked for some demographic information to help analyse the findings, but they were not required to complete this if they chose not to. In order to ensure only registered patients completed the survey, the practice distributed the survey directly to PRG members and patients who were attending appointments at the surgery.

The Practice Manager reviewed the results of the demographic information during the data collection period to identify gaps in representation. This information was then passed onto the reception staff in order that they could target patients from underrepresented groups to complete the survey in the waiting room.

Hardcopy data was entered into the online survey tool by administrative staff. Spot checks for data quality were conducted by the Practice Manager.

Limitations to the survey

Although every reasonable effort was made to ensure that the survey respondents were representative of the wider practice population, as with all surveys, there are some limitations to the findings to take into consideration.

- Possibility for bias in patients agreeing to take part in the survey or being invited to take part in the survey by reception staff.
- Possibility of duplicate responses (patients completing the survey more than once)

- In order to keep the length and detail of the survey reasonable we were unable to assess how representative the survey respondents in some key details including:
 - Long term conditions
 - Caring responsibilities
 - Large patient population whose ethnicity is described as 'other'
 - Employment status

Findings of the survey

A full breakdown of survey analysis is provided as appendix 8.

Key findings of the survey include:

- In total we received 344 responses from registered patients. Survey respondents were broadly representative of the practice population by age, gender and ethnicity.
- There was an overrepresentation of women compared to men. This could partly be explained by the fact that although women make up half the total practice population they account for a larger proportion of visits to the practice (approximately 62% of appointments are attended by females according to practice data).
- Under ethnicity, respondents who identified as Black Caribbean are overrepresented, whilst patients identified as Black African are underrepresented compared to the practice population.
- Patients continue to experience high levels of satisfaction with reception staff who are most likely to be described as 'friendly', 'helpful' and 'professional'. However in the free text box there were a number of comments suggesting reception staff were mixed, and some individual staff members were more friendly and helpful than others.
- The majority of patients rated all appointment types as important or very important, suggesting that patients require choice and flexibility in how they access the surgery. The urgent care walk-in appointments were rated most highly with only 1 patient stating these appointments were not very important.
- Patients were very positive about the current appointment system and said they could usually get the type of appointment they need. There were 6 suggestions from patients that the practice could have more late evening appointments.
- Patients reported that they felt able to communicate well with reception staff and clinical staff. There was no pattern between the small number of patients who reported that they had difficulty understanding or being understood by staff and whether those patients required assistance with communicating in English.
- Patients seem to prefer communicating with the practice either in person or speaking on the telephone, particularly for booking or changing appointments, requesting repeat medications and updating their personal details. However there was a wide range of responses, and some patients stating preference for using phone texting, email and the website. Letters remain an important method of communication, with 20 patients commenting that they would prefer to communicate with the practice via post.
- Respondents who have used the website were very positive about it, particularly in terms of ease to find and quality of content. There were a number of comments from patients suggesting that the practice have appointments that can be booked online

through the website. This facility is already available but may need to be more widely promoted.

- There were high levels of satisfaction with clinical staff with over 80% of respondents fully agreeing that their clinicians had listened to them, understood them and given them appropriate treatment and advice. This was an improvement on the results from previous years.
- There were generally very high levels of satisfaction with the practice 94% of respondents either 'quite satisfied' or 'very satisfied'. 98% of patients responding to the survey said they would recommend the Iveagh Surgery to friends and family.
- There were 9 comments from patient who stated that they often had to wait to be seen (after their booked appointment time) and 3 comments from patients who stated they felt rushed during their consultation.

Steps 4 & 5 - Provide PRG with opportunity to discuss survey findings and agree action plan and implementation

Patient Reference Group Event to discuss survey findings – 27 March 2014

Once the survey responses had been collated and analysed, PRG Members were invited to an event on 27 March 2014 to discuss the findings and agree an action plan for the practice. An email/letter invite was sent out to all PRG members and the event was also advertised in the practice waiting room (appendix 9). Patients attending the event, but not already members of the PRG, were given the opportunity to join the PRG by completing a registration form.

The main outcomes of the meeting were as follows:

- Naomi McCulloch presented details of the work of the PRG to date and summarised key developments at the practice that have taken place as a result of patient feedback.
- Naomi then presented the survey findings and discussed these with the PRG
- Some suggested actions falling out of findings were discussed with PRG members, modified and agreed as a practice action plan (see below).
- Patients in attendance confirmed the findings of the survey and provided examples from their own experience.
- Patients gave suggestions around actions the practice could take in order to achieve improvements in areas where feedback had been negative.
- Patients provided additional suggestions for improvements that were unrelated to the survey findings.

Full notes of discussions held at that meeting and suggestions that have been into the action plan are given in appendix 10.

Practice Action Plan

Following discussion with patients from the PRG and with practice staff at the internal business meeting, the following actions and timescales for implementation have been agreed for 2013-2014.

Reception	Timescale
Work with all reception staff to ensure we offer a consistent experience for our patients including a friendly welcome and helpful manner, making	Throughout 2014-15

use of specific feedback and suggestions from patients.	
Appointment types	
Continue to offer a range of appointment types to meet varying patient needs including urgent care walk-in, routine bookable appointments, Saturday appointments and telephone consultations	Throughout 2014-15
Ensure there is clear information available to patients about the different types of appointments we offer and promote this	April 2014
Pilot early evening bookable appointments with a GP or Practice Nurse	From June 2014
Communications	
Review communication skills of all reception and clinical staff at annual appraisals, offering training and support where required.	June 2014
Continue to offer a range of methods for patients to communicate with the practice including face to face, telephone and online	Throughout 2014-15
Introduce opportunities for patients to communicate with the practice via email, for example to update personal details.	Sept 2014
Pilot the facility for patients to amend and update their personal detail on the website.	October 2014
Practice website	
Review and refresh practice website taking into account feedback from patients including more details about clinicians and their areas of interest and more information about how to find the building and where the practice is located within the building.	June 2014
Promote the website and facility to book appointments and requests prescriptions online through the website.	April 2014
Clinical staff	
Use patient feedback in annual appraisal to identify areas for improvement.	Throughout 2014-15
Clinicians to inform patients in the waiting room when their clinic is running late.	Throughout 2014-15
Overall patient satisfaction	
Use the views collated in this survey together with the other patient feedback to inform service developments	Throughout 2014-15
Make further improvements to the children's play area in the waiting room.	September 2014
Review how we manage our appointments to see if there is any way to avoid clinics running late	June 2014

Step 6 - Publicise actions taken and subsequent achievement

How we will let you know how we are doing

We are publicising the findings of the survey and resulting actions to the wider patient population via the following methods:

- Publish report on practice website
- Hardcopies of report available in reception and waiting area
- Share results of the survey and the action plan with all practice staff at internal meetings
- Share results with key contacts within NHS England
- Provide updates on our achievement on the waiting room screen, on our website and in the practice newsletter

Action taken in response to patient feedback between 2011 and 2014

Following the annual patient survey in 2011-13, the practice has undertaken the following actions in response to patient feedback and suggestions:

You said...	We did...
You would like it to be easier to request repeat prescriptions	Piloted and implemented online repeat prescription requests
You did not want us to lose what was good about the service when we relocated to new premises	Keeping the services patients said they really like – urgent care, diabetes and sexual health
Sometimes you could overhear receptionists discussing patients	Investigated breaches of confidentiality and all staff undertook confidentiality training refresh
You would like to be kept informed about changes in the surgery and what training the GPs have been doing	Introduced a practice newsletter
You would like to access more community services at the practice (including osteopathy)	Passed on feedback to commissioners about the services patients would like to see in primary care
How you felt our clinical and reception staff were doing	We used your feedback in staff appraisals and offered support where needed.
You would like more things to do in the waiting room	We introduced a children's play area, a selection of magazines and a health information board
It sometimes took a long time to get copies of your medical records after you requested them	Reviewed the process for handling requests and speeded up response times.

....Finally, we continue in our commitment to involve our patients in helping to improve and develop our services by conducting further patient events, using our suggestions and complaints mechanisms, and repeating the annual survey....

Appendix 1 –Extract from PRG report 2012

Step 1 – Establishing the Patient Reference Group

Recruitment to the Patient Reference Group (PRG)

The practice was keen that patients should be able to decide how the PRG would be structured and how the patients and the practice would communicate with each other. In order to establish the group in the first instance we decided to invite patients to provide us with their contact details and become a member of the PRG. Patients were advised that they could withdraw from the PRG at any time if they no longer wished to participate and that this would not affect their patient care.

In the summer of 2011, the practice set about recruiting patients to the group by distributing registration forms (“blue forms”) (appendix 1).

Recruitment to the PRG was undertaken in the following ways:

- Signs and posters in the waiting room (appendix 2)
- Reception staff handing out forms to patients when they attend the practice
- Clinicians handing out forms to patients during consultations

The registration form asked patients for their email address as this is the most efficient and environmentally friendly method of communication for the practice. However in order to be inclusive of all patients, those patients who did not have access to email, or who did not wish to provide their email address, were able to give their postal address for communications instead.

Once patients had registered they were sent an initial communication by email or post (appendix 3), explaining what the PRG is, how often they can expect to receive a communication from the practice and reminding them of their right to withdraw from the group at any time. The patients were also invited to an initial launch event.

Ensuring the Patient Reference Group is representative

The Iveagh House Surgery has an incredibly diverse patient population. We wanted to make sure that the PRG was representative of patients of different ages and from different backgrounds.

In order to achieve this we decided to monitor information about patients who were registering with the group and compare this to our practice population. Appendix 4 gives a breakdown of our PRG membership compared to our general practice population.

When we noticed that some groups of patients were underrepresented, we took the following action:

- Made the registration form available to patients translated into French and Portuguese (the two most commonly read languages outside English amongst our practice population)
- Reception staff offered assistance to patients in completing the form where appropriate (for example patients who had difficulties reading or writing)
- Patients without an email were given the option to provide a postal address instead
- The Practice Manager regularly reviewed the information and informed staff about areas that were underrepresented (for example young men) so that staff could target those patients with information about the PRG when they attended the surgery.
- Staff discussed recruitment to the group at internal meetings and shared ideas about how to reassure patients about the nature of the group and what was involved.

The Patient Reference Group Membership

In total we recruited 286 patients to join our patient reference group.

Just under half of the practice population (49.5%) are female; however the Patient Reference Group was made up by three quarters female patients (74.9%). Some of this can be explained by the fact that female patients visit the practice more frequently (60% of consultations are with female patients according to practice data). Reception staff and clinicians made efforts to address the imbalance by approaching male patients and inviting them to join the group.

The age distribution of PRG members broadly matched the age distribution of the practice list. We were unable to recruit any patients over the age of 85 to join the PRG.

The ethnic group distribution of PRG members matched the ethnic group distribution of the practice list very broadly. However there was an over representation of people from Black Caribbean communities. There was also an under representation of people from 'any other' ethnic background.

We know from our practice data that this group contains a large number of patients who are not able to read or write in English/French/Portuguese including Spanish speaking Latin American patients and patients from Eastern Europe and the Middle East.

For a full breakdown of the patient reference group membership compared to the practice population please see appendix 4.

Appendix 2: Patient Reference Group Registration in 3 languages (English, Portuguese & French)

I would like to tell you what I think...

If you are happy for us to contact you very occasionally by email please leave your details below and hand this form back to reception.

Name:

Email address:

Postcode:

This information will help to make sure we try to speak to a representative sample of patients that are registered at this practice.

Are you? Male Female

Age group?	Under 16	<input type="checkbox"/>	17-24	<input type="checkbox"/>
	25-34	<input type="checkbox"/>	35-44	<input type="checkbox"/>
	45-54	<input type="checkbox"/>	55-64	<input type="checkbox"/>
	65-74	<input type="checkbox"/>	75-84	<input type="checkbox"/>
	Over 84	<input type="checkbox"/>		<input type="checkbox"/>

To help us ensure our contact list is representative of our community, please indicate which of the following ethnic background you would most closely identify with?

White					
British Group	<input type="checkbox"/>	Irish	<input type="checkbox"/>		
Mixed					
White & Black Caribbean	<input type="checkbox"/>	White & Black African	<input type="checkbox"/>	White & Asian	<input type="checkbox"/>
Asian or Asian British					
Indian	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Black or Black British					
Caribbean	<input type="checkbox"/>	African	<input type="checkbox"/>		
Chinese or other ethnic group					
Chinese	<input type="checkbox"/>	Any other (please state)	<input type="checkbox"/>		

How would you describe how often you come to the practice?

Regularly
Occasionally
Very rarely

Please detail here any additional requirements you may have to support you taking part (for example you might require translation of a questionnaire into a different language or an opportunity to feedback verbally).

Thank you – we will be in touch again soon!

Frequently Asked Questions...

Q Why are you asking people for their contact details?

A We would like to be able to contact people occasionally to ask them questions about the surgery and how well we are doing to identify areas for improvement.

Q But you already have my contact details, why are you asking for them again?

A Details of your participation and feedback will be kept completely separate from your medical records. This is so that you feel able to provide us with open and honest feedback without any fear that it could impact on your medical care.

Q Will my doctor see this information?

A This information is purely to contact patients to ask them questions about the surgery, how well we are doing and ensure changes that are being made are patient focused. If your doctor is responsible for making some of the changes in the surgery they might see general feedback from patients.

Q Why have you asked me about my age, ethnicity and how often I visit the surgery?

A We would like to ensure that we are contacting a representative sample of the community, so we have asked you about this so we can monitor how we are doing. You can still take part if you choose to leave these questions blank.

Q Will the questions you ask me be medical or personal?

A We will only ask general questions about the practice, such as short questionnaires.

Q Who else will be able to access my contact details?

A Your contact details will be kept safely and securely and will only be used for this purpose and will not be shared with anyone else.

Q How often will you contact me?

A Not very often (around 6 times a year).

Q What is a patient reference group?

A This is a group of volunteer patients who are involved in making sure the surgery provides the services its patients need.

Q Do I have to leave my contact details?

A No, but if you change your mind, please let us know.

Q What if I no longer wish to be on the contact list or I leave the surgery?

A We will ask you to let us know by email if you do not wish to receive further messages.

Please note that no medical information or questions will be responded to.

The information you supply us will be used lawfully, in accordance with the Data Protection Act 1998. The Data Protection Act 1998 gives you the right to know what information is held about you, and sets out rules to make sure that this information is handled properly.

Gostaria de lhe dizer o que penso...

Português

Por favor preencha o formulário abaixo se pudermos contacta-lo ocasionalmente via e-mail. Após o preenchimento por favor entregar o formulário a recepção.

Nome:

Email:

Postcode:

Essa informação nos ajudara a assegurar que nos comuniquemos com uma amostra representativa dos pacientes registrados em nossa clinica.

Sexo? Masculino Feminino

Idade? Menor de 16 17-24
25-34 35-44
45-54 55-64
65-74 75-84
Acima de 84

Para assegurar que nossa lista de contatos seja representativa em relação a nossa comunidade ,por favor indique abaixo o grupo étnico com o qual voce mais se indentifica.

Branco				
Britânico	<input type="checkbox"/>	Irlandês	<input type="checkbox"/>	outro(especifique por favor)
Mestiço				
Branco e negro Caribenho	<input type="checkbox"/>	Branco e Negro Africano	<input type="checkbox"/>	Branco e Asiático <input type="checkbox"/>
Asiático ou Asiático Britânico				
Indiano	<input type="checkbox"/>	Paquistanês	<input type="checkbox"/>	bangladechiano <input type="checkbox"/>
Negro or Negro Britânico				
Caribenho	<input type="checkbox"/>	Africano	<input type="checkbox"/>	
Chinês ou outro grupo étnico				
Chinês	<input type="checkbox"/>	Qualquer outro (especifique por favor)	<input type="checkbox"/>	

Com que frequência voce vem a Clínica?

Regularmente
Ocasionalmente
Muito raramente

Por favor especifique qualquer requerimento adicional necessário para sua participação (exemplo: necessidade de tradução do questionário em uma outra língua ou a oportunidade de feedback verbal).

Obrigado – Contactaremos em breve

Perguntas Frequentes...

P Por que estamos perguntando dados de contato?

R Gostaríamos de ser capaz de contactar pacientes ocasionalmente para perguntar sobre a clínica, e quão bem estamos identificando as áreas que necessitam de melhorias.

P Mas vocês já tem meus dados de contato, por que estão perguntando novamente então?

R Dados da sua participação serão arquivados separadamente do seu registro médico. Dessa maneira você pode se sentir livre para nos fornecer comentários claros e honestos sabendo que esses não terão nenhum impacto sobre seu cuidado médico.

P O meu médico verá essa informação?

R Essa informação será usada somente para contactar nossos pacientes em relação ao serviço prestado pela clínica, como por exemplo: quão bom é o serviço que prestamos e como assegurar que as mudanças feitas sejam para o benefício dos nossos pacientes. Se seu médico for o responsável por mudanças na clínica, ele poderá ter acesso a resposta geral desses questionários.

P Por que estão me perguntando minha idade, etnicidade e frequência com a qual venho a clínica?

R Gostaríamos de assegurar que estamos contactando uma amostra representativa da nossa comunidade, de maneira que possamos monitorar o serviço que prestamos. Você pode participar do nosso monitoramento mesmo que deixe esses campos em branco.

P Como serão as perguntas feitas no monitoramento, elas serão perguntas médicas ou pessoais?

R Usaremos pequenos questionários que cobrirão apenas perguntas gerais sobre a clínica.

P Quem mais terá acesso aos meus dados de contato?

R Seus dados de contato serão arquivados de maneira segura, apenas sendo utilizados para o objetivo explicado acima. Os dados não serão compartilhados com nenhuma outra instituição.

P Com que frequência serei contactado?

R Não com muita frequência(mais ou menos 6 vezes por ano).

P O que e grupo de referência de pacientes?

R E um grupo voluntário de pacientes que estão envolvidos em assegurar que a clínica preste serviços que seus pacientes necessitam.

P Eu tenho que deixar meus dados de contacto?

R Não, mas se você mudar de idéia por favor nos comunique.

P E se eu não quiser mais ser contactado ou se mudar de clínica?

R Por favor nos comunique via e-mail caso não queira mais ser contactado no futuro.

Por favor lembresse de que nenhuma informação medica ou pergunta sera respondida via e-mail

Toda informação fornecida sera usada de maneira legal, de acordo com o Ato de Proteção à Dados de 1998. O Ato de Proteção à Dados de 1998 concede ao paciente o direito de saber qual e a informação que retemos a seu respeito e regula o manejo adequado da mesma.

J'aimerais vous dire ce que je pense...

FRENCH

Si vous aimeriez être contactés occasionnellement par email, nous vous prions de bien vouloir remplir cette fiche et la remettre à la réception.

Nom et Prénoms :

Adresse email :

Code postal :

Ces informations nous aideront à nous assurer que nous nous adressons à un échantillon représentatif des patients enregistrés sur notre liste.

Êtes-vous? Homme Femme

Votre tranche d'âge

16 ou moins	<input type="checkbox"/>	17-24	<input type="checkbox"/>
25-34	<input type="checkbox"/>	35-44	<input type="checkbox"/>
45-54	<input type="checkbox"/>	55-64	<input type="checkbox"/>
65-74	<input type="checkbox"/>	75-84	<input type="checkbox"/>
Plus de 84	<input type="checkbox"/>		<input type="checkbox"/>

Pour nous aider à obtenir un groupe qui reflète la diversité de notre localité, nous vous prions d'indiquer l'origine qui correspond le mieux à la votre.

Blanc			
Britannique	<input type="checkbox"/>	Irlande du Nord	<input type="checkbox"/>
Métissé			
Blanc & Noir des Caraïbes	<input type="checkbox"/>	Blanc & Noir Africain	<input type="checkbox"/>
		Blanc & Asiatique	<input type="checkbox"/>
Asiatique ou Asiatique Britannique			
Inde	<input type="checkbox"/>	Pakistan	<input type="checkbox"/>
		Bangladesh	<input type="checkbox"/>
Noir et Noir Britannique			
Caribéen	<input type="checkbox"/>	Africain	<input type="checkbox"/>
Chinois ou autre groupe			
Chinois	<input type="checkbox"/>	Autre groupe (veuillez in préciser SVP)	<input type="checkbox"/>

Comment décrivez-vous la fréquence de vos visites dans notre centre de santé ?

Régulière
Occasionnelle
Très rare

Si vous avez des besoins particuliers nécessitant d'être satisfaits pour que vous fassiez partie de ce group, vous êtes priés de les exprimer plus bas. (Par exemple: besoin de traduction d'un questionnaire dans une autre langue ou besoin d'une opportunité de nous faire part de contacter verbalement)

Merci. Nous contacterons très bientôt!

(FAQs) Foire Aux Questions ...

Q Pourquoi demandez vous mes coordonnées?

R Nous voudrions vous contactez de façon occasionnelle afin de recueillir vos points de vue sur notre centre de sante, la qualité de notre service et ce que nous aimeriez voir amélioré.

Q Pourquoi me demander mes coordonnées si vous les avez déjà?

R Les informations que vous fournissez pour la participation à ce groupe ne sont pas sauvegardés dans votre dossier médical. Nous précédons ainsi, afin que vous vous sentiez pleinement libre de nous donner honnêtement votre avis sans craindre que cela affecte les soins médicaux dont vous bénéficiez.

Q Est-ce que mon Docteur verra ces informations?

R ces information sont recueillies afin de contacter nos patients et obtenir leurs points de vue sur la qualité de nos services. Nous voulons aussi nous rassurer que les différents changements sont orientés vers le bien-être de nos patients. Ainsi si votre docteur est responsabilisé pour effectuer certains changements ils pourraient voir les points de vue généraux des patients.

Q Pourquoi me demander mon âge, mon origine et la fréquence de mes visites ?

R Nous désirons nous rassurer que nous contactons un échantillon représentatif de notre localité. C'est donc la raison pour laquelle nous vous demandons ses informations. Cela nous servira de moyen de vérification de notre travail. Vous pourrez toujours être membre du groupe, même si vous choisissez de ne pas répondre à ces questions.

Q Les questions que vous me poserez seront-elles médicales ou personnelles ?

R Nous ne poserons que des questions d'ordre général sur le centre de santé à travers de brefs questionnaires.

Q Qui d'autre aura accès a mes coordonnées ?

R Vos coordonnées seront gardées en sécurité et ne seront utilisées que dans le cadre de notre sondage interne. Nous ne partagerons pas vos coordonnées avec aucune organisation extérieure.

Q A quelle fréquence me contacterez vous?

R Pas très souvent (pas plus de 6 fois dans l'année).

Q Qu'est ce qu'un groupe de référence de patients?

R C'est un groupe de patients bénévoles qui se disposent pour s'assurer que le dispensaire délivre les services dont ses patients ont besoin.

Q Suis-je obliger de donner mes coordonnées?

R Non, mais si vous changer d'avis, veuillez nous en informer.

Q Et si je ne voudrais plus être contacté ou si je quittais ce dispensaire ?

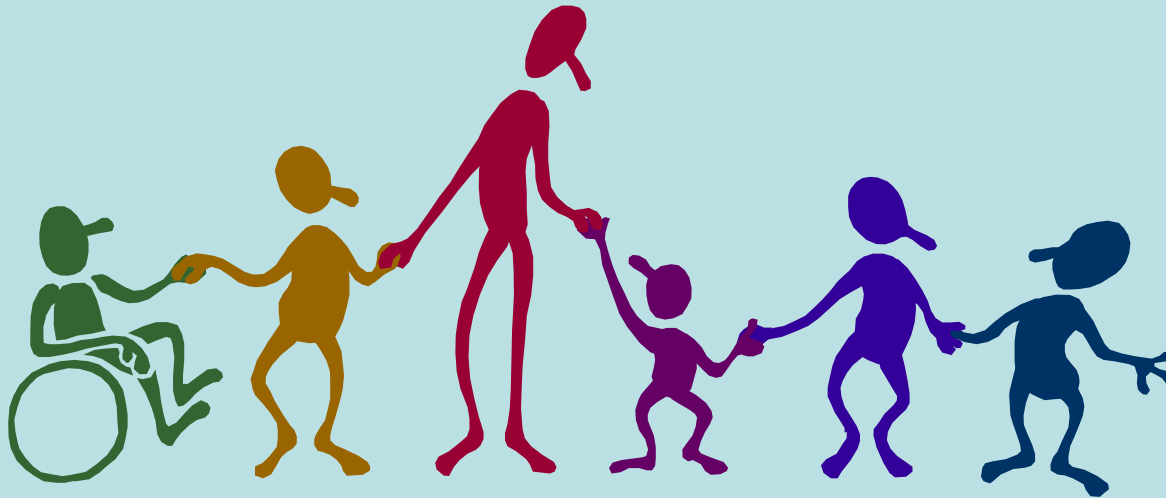
R Is vous ne désirez plus recevoir de correspondance de notre part, nous vous demanderons de nous le faire savoir par email.

NB: Nous ne discuterons pas des informations et questions d'ordre médical.

Les informations que vous donnerez seront traitées en accord avec la loi, selon des dispositions de l'Acte sur la Protection des Données (Data Protection Act 1998). Cette loi vous donne le droit de savoir les informations qui sont retenues à votre sujet et règle le bon usage des ses informations.

Appendix 3: Advert promoting the Patient Reference Group

**We are looking for people to
join our patient reference group**

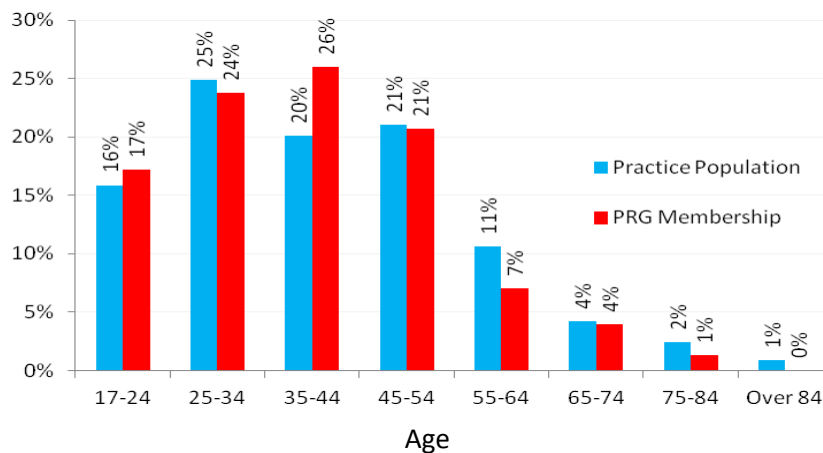


Please add your email to the form at reception
to join our contact list and find out more.

Appendix 4: Breakdown of PRG membership compared to the practice population – 2014

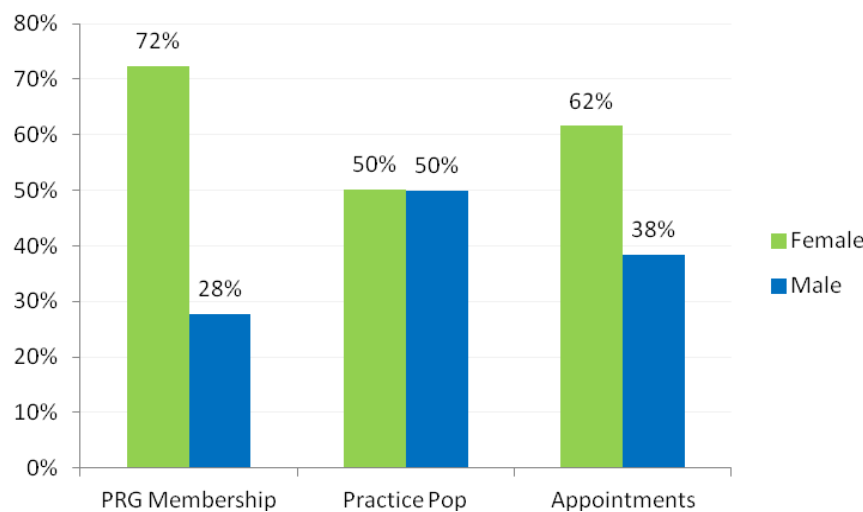
In March 2014 the Patient Reference Group (PRG) had 237 members. This was a decline on numbers from 2012. However it is important to note that since the relocation of the practice to new premises in 2012, the registered practice population reduced by more than 800 patients. The PRG lost a significant proportion of members. However during the same period the PRG also recruited 33 new members.

Age



The PRG membership is remarkably representative of the practice population in age distribution. There is a slight over representation in the 35-44 group and unfortunately we were unable to recruit any patients over the age of 84 to join the group. This is a very small group of patients, many of whom are housebound or frail and were not keen to receive communication from the practice unrelated to their care.

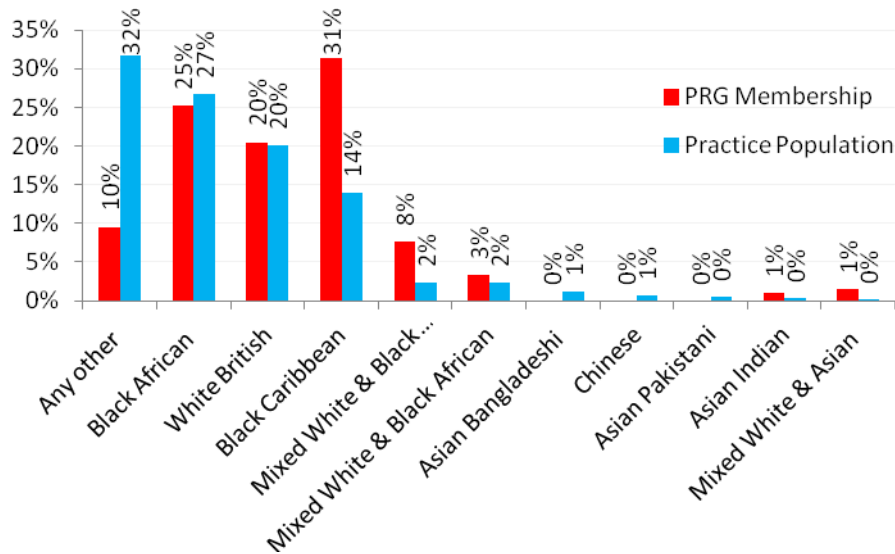
Sex



The PRG membership had an over representation of females compared to males in relation to the practice population. This is partly explained by the fact that females are more likely to access services at the practice which is illustrated by the distribution of appointments by sex. In addition we found male patients, particularly in the younger age groups which make up the largest proportion of the practice more likely to decline joining the PRG. Reception and

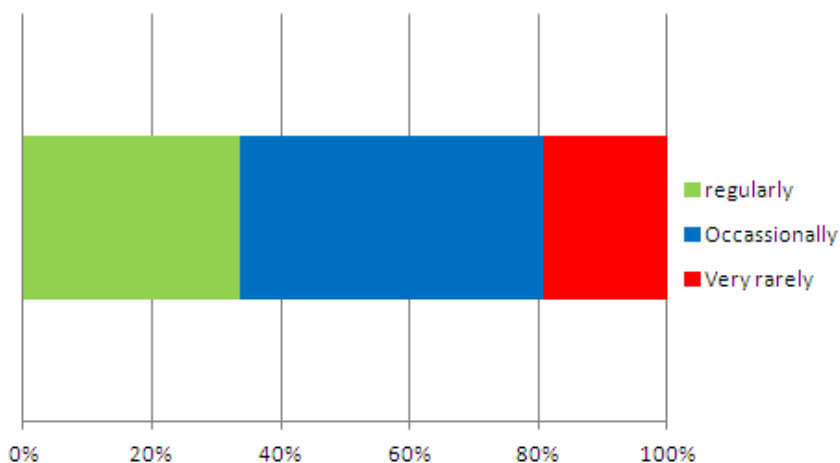
clinical staff particularly targeted young men to invite to join which did result in some increase in numbers.

Ethnicity



The PRG membership is remarkably representative of the practice population in ethnicity distribution. However there is an under representation of 'any other' ethnic category. This could partly be explained by slight differences in how ethnicity is recorded in the patient record which is more sensitive to variations in ethnicity due to historical methods of recording ethnicity. In addition this group includes large numbers of patients from South America and Eastern Europe who may not have english, french or portugese as a first language (the three languages which the PRG registration form was made available in).

Frequency of attendance



The PRG has good representation of a variety of patients in terms of frequency of attendance including those who attend regularly, those who attend occasionally and those who attend very regularly. This data has been collected in order to ensure that the PRG is representative of those who have long term conditions, those with well managed care and those who are fit and well.

Appendix 5: Letter / Email sent to PRG consulting on priority areas for the survey

The Iveagh Surgery

•Akerman Health Centre, 60 Patmos Road, London SW9 6AF Tel 020 3049 6690 Fax 020 3049 6710

Dr James Eastaway
Dr Judith Ibison
Dr Nigel Konzon
Dr Herman Lai
Dr Louise Medforth

9 October 2013

Dear Patient Reference Group Member

Each year, the Iveagh Surgery conducts a survey of our patients. We use the information to review and improve our services to you.

We are planning our next annual survey now. To ensure that we ask the right questions, we would like to know what you think our key priorities should be when it comes to looking at the services we provide to you and others in the practice.

What do you think are the most important issues on which we should consult our patients?

We would like to focus on:

- Telephone consultations
- Usefulness of our website
- Appointment types
- Doctors, nurses and receptionists ability to communicate with patients

Which of these areas would you agree with?

Do you have any other issues you think we should include in our survey?

Please let me know of any ideas you have by Friday 1st November 2013. You can email me at iveaghhouse@nhs.net or write to me at the surgery.

The survey will take place in December and we will send you a copy.

Yours sincerely

Annamarie Critchard
Locum Practice Manager

Appendix 6 – Results of direct consultation with patients in the waiting room (4-8 November 2014)

Patients spoken to	Telephone consultations	Usefulness of our website	Appointment types	Doctors Nurses and Receptionist Communications	Other suggestions
1	✓	✓	✓	✓	Especially receptionists
2			✓		Text messaging
3	✓	✓	✓	✓	
4				✓	
5				✓	
6			✓		Waiting times
7		✓		✓	
8	✓				
9				✓	
10			✓		
11		✓		✓	Directions on the website
12				✓	
13	✓				
14			✓		
15				✓	
16			✓		Emailing doctors and nurses
17				✓	
18	✓				
19	✓		✓	✓	Bus services in the area
20			✓		
21	✓	✓	✓	✓	
22			✓	✓	
23	✓	✓	✓	✓	
24			✓		
25	✓		✓	✓	
26		✓		✓	
27				✓	
28			✓		
29	✓		✓		
30			✓		
31				✓	
32				✓	

Appendix 7: Annual Patient Survey 2014

THE IVEAGH SURGERY PATIENT SURVEY 2014

Thank you for participating in our survey. Your views will be really helpful to us as we develop our services in the coming 12 months.

Your responses will be completely confidential and will not affect your clinical care in any way.

The survey should only take a few minutes to complete. Please speak to a member of reception staff if you need support completing it.

PLEASE NOTE: Your responses will be kept anonymous. This means we will not be able to respond to you personally about any concerns or queries you raise. Therefore if you would like a response to an issue please contact the Practice Manager directly on 0203 049 6690 or by writing to the surgery address.

The findings of this survey will be available in the surgery and on the surgery website in March.

RECEPTION STAFF

Which of the following words do you feel best describe our reception staff?

(Please choose the **3 words** that are most appropriate)

Friendly	Dismissive	Helpful	Mixed	Unprofessional	Empathetic
Rude	Courteous	Adequate	Caring	Unhelpful	Professional
Patronising	Efficient	Hassled	Unfriendly	Inefficient	Calm

Please tell us what you like about our reception service or how we could improve:

TYPES OF APPOINTMENTS

Iveagh Surgery offers a variety of appointment types to meet the needs of its patients. Please tick to show how important you rate each the following services :

	Very important	Quite important	Not very important
Routine weekday appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Daily urgent care walk-in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday appointments with GP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday appointments with Nurse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telephone consultations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual health walk-in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment about the appointment system at Iveagh Surgery or suggest alternative appointment types you would like to see....

COMMUNICATION

The practice would like to know if there are any ways we can improve the way we communicate with our patients.

About you...

In order to help us understand the different needs of our patients, it would be useful to have a bit of information about you.

	Yes	No
English is my first language	<input type="checkbox"/>	<input type="checkbox"/>
I can communicate in English, but not as my first language	<input type="checkbox"/>	<input type="checkbox"/>
I cannot easily communicate in English	<input type="checkbox"/>	<input type="checkbox"/>
I require other assistance with communication (please specify)	<input type="checkbox"/>	<input type="checkbox"/>

Please give details of any additional assistance you require with communication

Reception staff...

How well do you feel the reception staff communicate with you?

	Yes	No
In general, I understand the reception staff	<input type="checkbox"/>	<input type="checkbox"/>
In general, I feel reception staff understand me	<input type="checkbox"/>	<input type="checkbox"/>

Please give suggestions if you think that there are ways reception staff could communicate better with patients....

Clinical staff...

How well do you feel the GPs, Practice Nurses and Healthcare Assistant communicate with you?

	Yes	No
In general, I understand the clinical staff	<input type="checkbox"/>	<input type="checkbox"/>
In general, I feel clinical staff understand me	<input type="checkbox"/>	<input type="checkbox"/>

Please give suggestions if you think that there are ways clinical staff could communicate better with patients....

Practice communication

How do you prefer to receive communication from the practice:

	In person	Phone (speaking)	Phone (texting)	Email	Practice website	Other
Updating your personal details (e.g. change of phone number)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Booking or changing appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receiving test results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information about the practice (e.g. opening times)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have ticked 'other', please specify how you would prefer to communicate with the practice....

PRACTICE WEBSITE

We are planning to update our practice website and would like your views on how it could be improved.

If you have never visited our website, please leave this blank.

Please rate the practice website in each of the following areas:

	Good	Satisfactory	Poor
Ease of finding the website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The quality of information on the website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ease of finding information on the website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The look and feel of the website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The overall website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tell us what you like about the current website or give suggestions about how you think we could improve it...

THE DOCTORS & NURSES

Thinking about your last consultation at the surgery, please tell us about the doctor or nurse you saw. Please tick the box to show how much you agree with the following statements...

	Fully agree	Slightly agree	Slightly disagree	Fully disagree	I have no opinion
I feel that the doctor / nurse took time to listen to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that the doctor / nurse understood my concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that I was given appropriate treatment / advice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was happy with the outcome of the consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you can remember, please tell us if you can remember the name of the person you saw...

Dr Catriona Davies (female)	<input type="checkbox"/>	Nurse Bola Adeokun (female)	<input type="checkbox"/>
Dr James Eastaway (male)	<input type="checkbox"/>	Nurse Sue Chard (female)	<input type="checkbox"/>
Dr Alex Gilkes (male)	<input type="checkbox"/>	HCA Maria Albuquerque (female)	<input type="checkbox"/>
Dr Judith Ibison (female)	<input type="checkbox"/>	Other doctor or nurse	<input type="checkbox"/>
Dr Herman Lai (male)	<input type="checkbox"/>	please name _____	
Dr Louise Medforth (female)	<input type="checkbox"/>		
Dr Meera Rajah (female)	<input type="checkbox"/>	I can't remember	<input type="checkbox"/>

Thinking more generally about your overall experience of the doctors and nurses you have seen at Iveagh Surgery, please tell us how often you agree with the following statements...

	All of the time	Some of the time	Occasionally	Never	I have no opinion
I feel that the doctors / nurses take time to listen to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that the doctors / nurses understand my concerns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that the doctors / nurses give me appropriate treatment / advice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel happy with the outcome of the consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

And finally...

How satisfied are you with The Iveagh Surgery?

I am very satisfied

I am quite satisfied

I have no opinion

I am a little dissatisfied

I am very dissatisfied

Tell us why... which bits do you particularly like? What could be improved?

Would you recommend Iveagh Surgery to friends and family....

Yes

No

ABOUT YOU....

It will help us to understand your answers if you could tell us a little about yourself

Are you? Male Female

Postcode:

Age group? Under 16 55-64
 17-24 65-74
 25-34 75-84
 35-44 Over 84
 45-54

How would you describe how often you come to the practice?

Regularly (more than once a month)
Occasionally (more than once a year)
Very rarely (less than once a year)

Please indicate which of the following ethnic background you would most closely identify with?

White

British Group Irish

Mixed

White & Black Caribbean White & Black African White & Asian

Asian or Asian British

Indian Pakistani Bangladeshi

Black or Black British

Caribbean African

Chinese or other ethnic group

Chinese Any other (please state)

Appendix 8: Survey findings

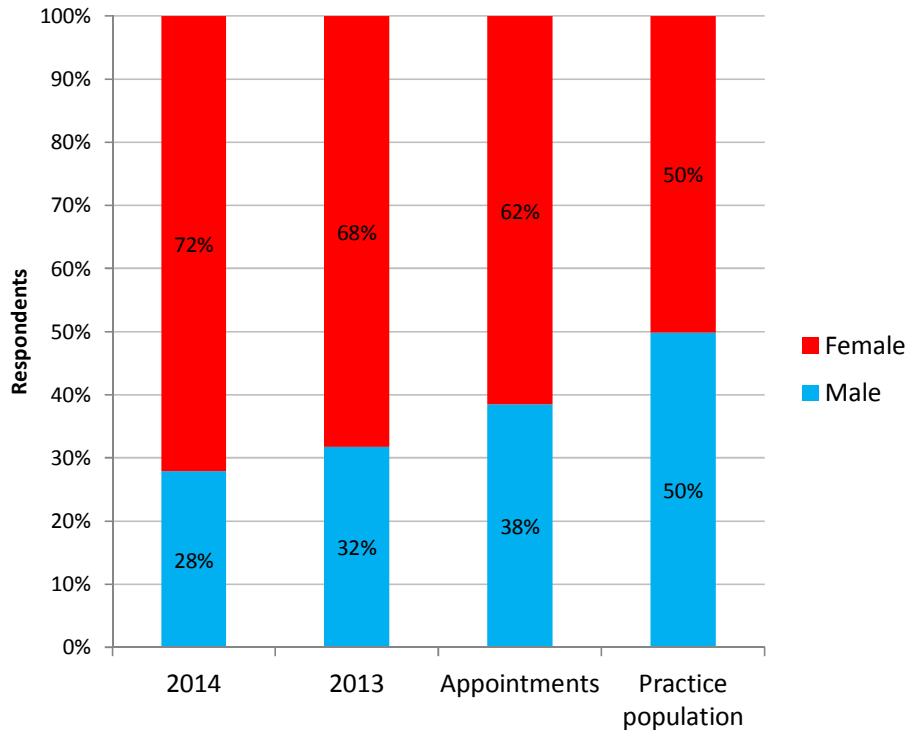
Iveagh Surgery Survey Analysis 2014

Iveagh Surgery

Demographic Profile: Gender

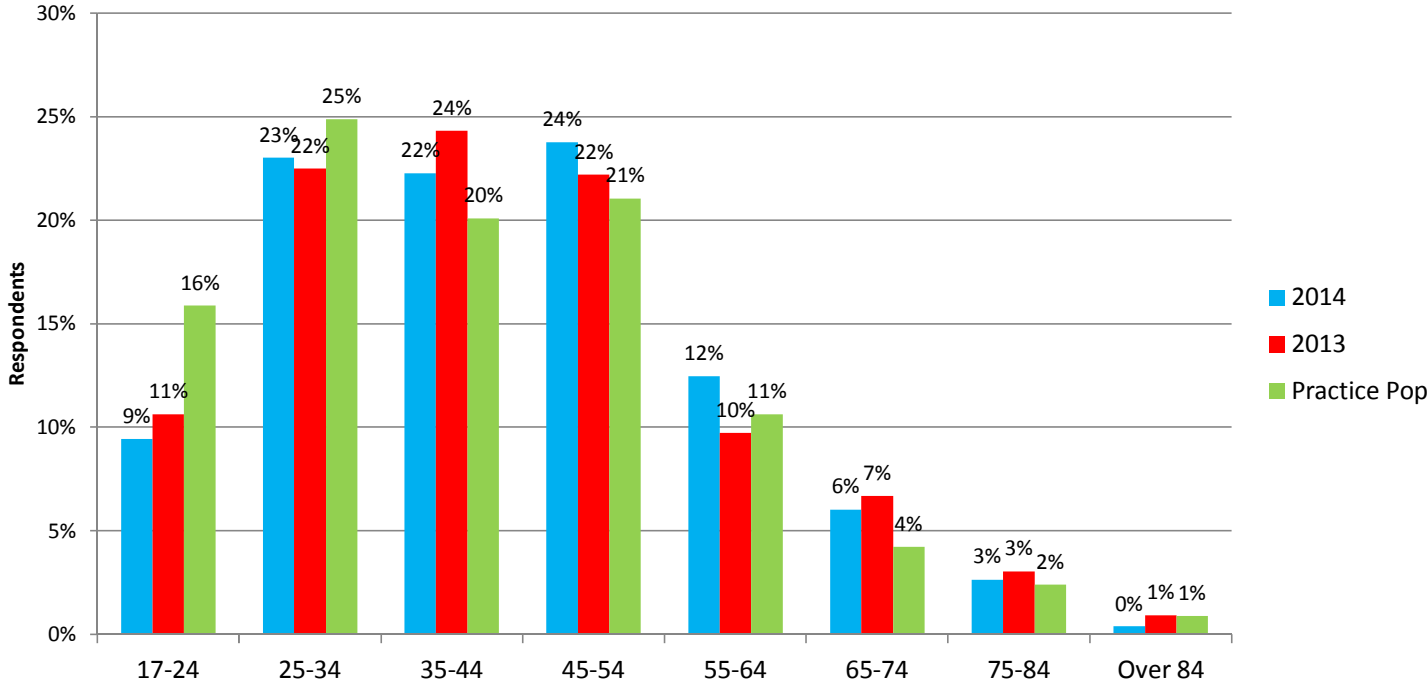
The gender profile of the 2014 respondents is reflective of the 2013 survey and also the appointments made – reflecting the main users of the practice

The 2014 survey is based on a sample of 341 respondents collected in February 2014. Unless stated otherwise charts are based on all respondents, however not all questions were answered by all respondents



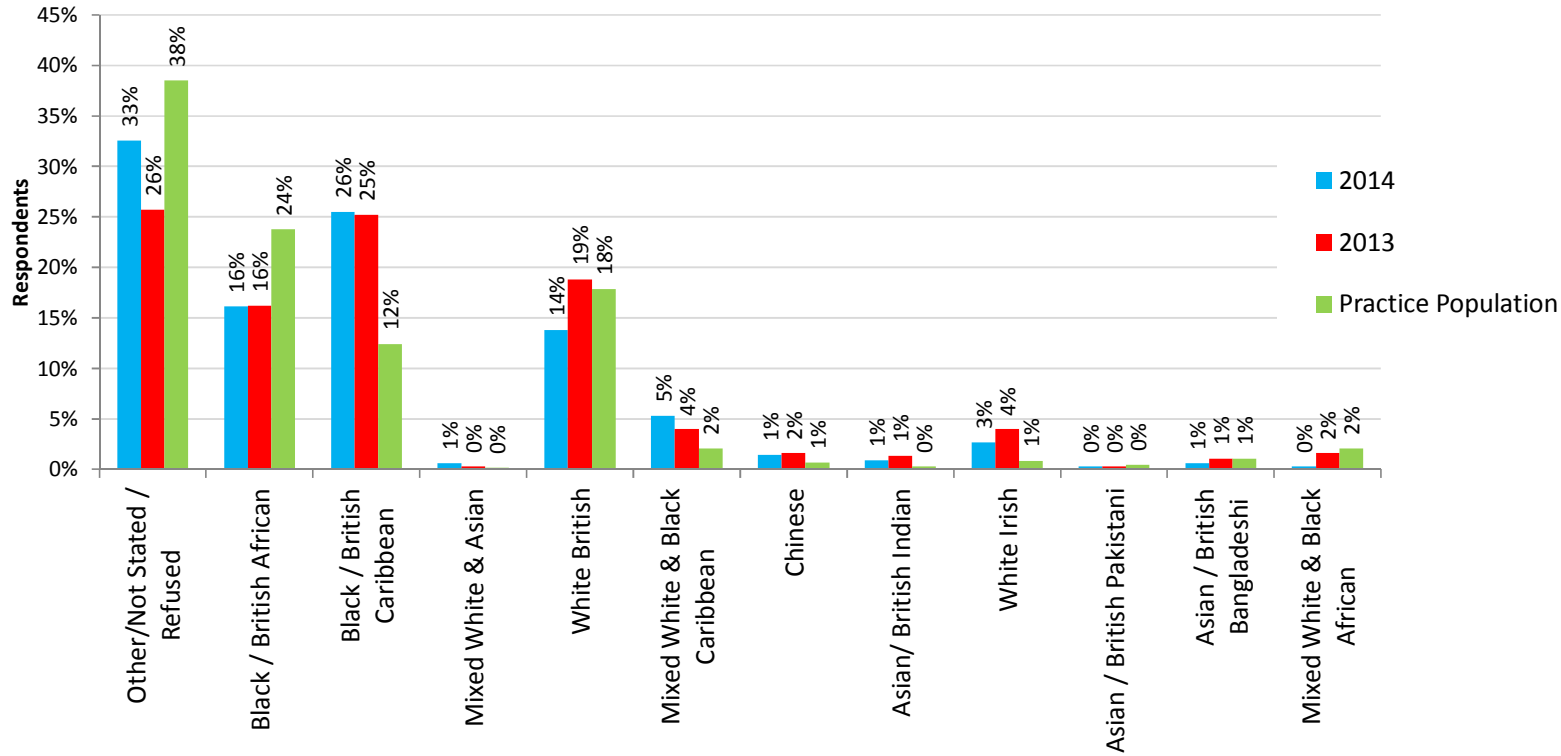
Demographic Profile: Age

The age profile of survey respondents in 2014 is remarkably similar to both the 2013 survey respondents and the overall Practice population



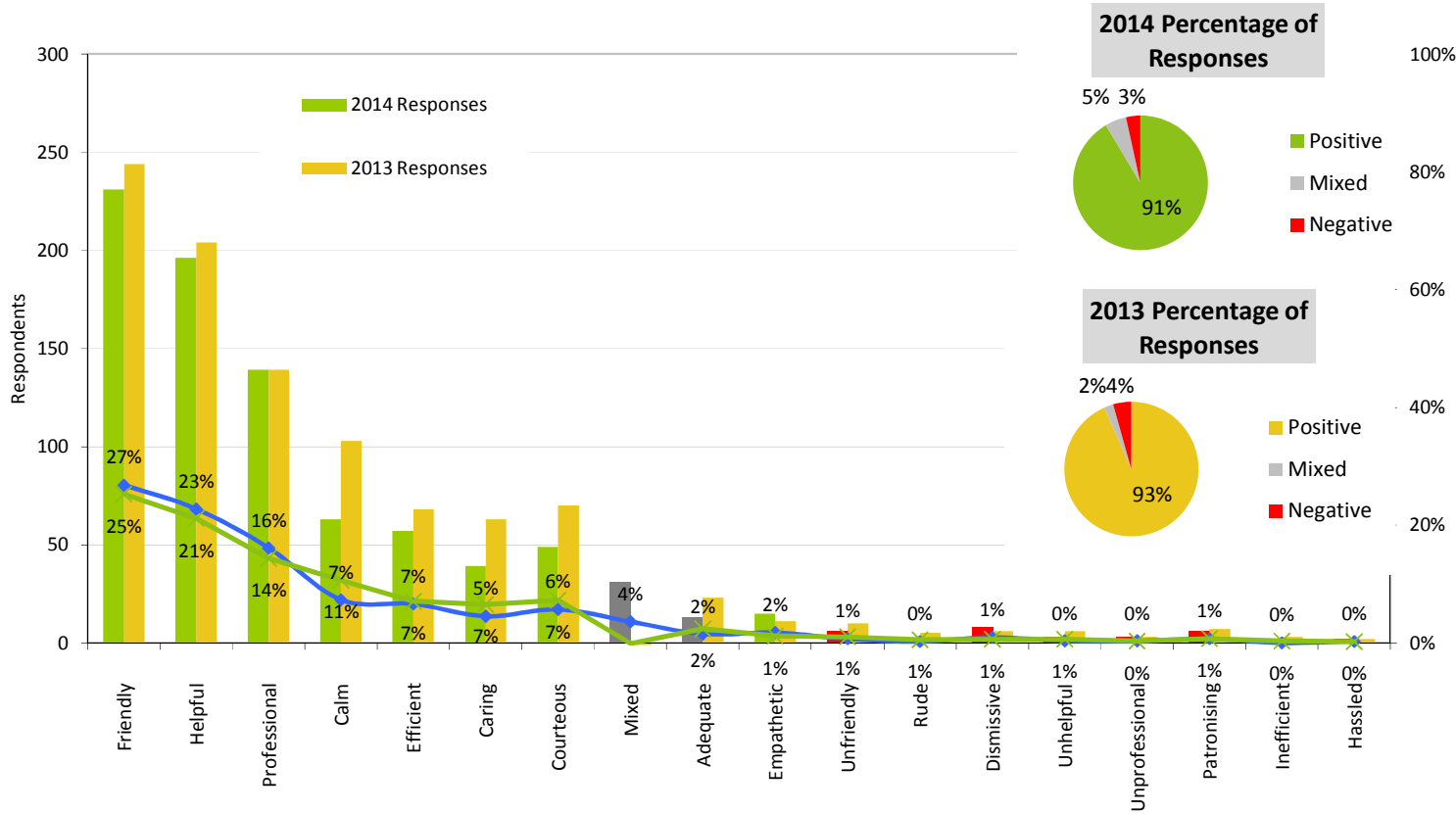
Demographic Profile: Ethnicity

The 2014 survey ethnicity profile is broadly similar to the 2013 survey and the practice population, with a slight under representation of Black African and over representation of Black Caribbean



Reception Staff: Which words best describe them?

Over 90% of responses were positive, and there is a decrease in negative responses, however there has also been a rise in mixed responses



Which of the following words do you feel best describe our reception staff? (Please choose the 3 words that are most appropriate)

Reception Staff: Which words best describe them?

The size of the word corresponds with how frequently a word was selected by respondents . 'Friendly', 'Helpful' and 'Professional' were the main responses, negative responses are barely visible.



Iveagh Surgery

Which of the following words do you feel best describe our reception staff? (Please choose the 3 words that are most appropriate)



Reception staff: Suggestions

The majority of comments about reception staff were very positive, but there were some comments that indicated the customer service was inconsistent.

In total there were 130 free text comments, 16 were either mixed or negative. The remaining 114 responses were positive. These comments have been selected as examples of the different types of responses.

The service that we receive so far has been courteous and professional and both my husband and I have nothing but admiration and gratitude for all staff

Always seem very efficient and unlike some other practices I have been to, they actually help if you want to see a doctor rather than just say "there's nothing until next week"

It varies some are extremely smiley and helpful, others can be dismissive

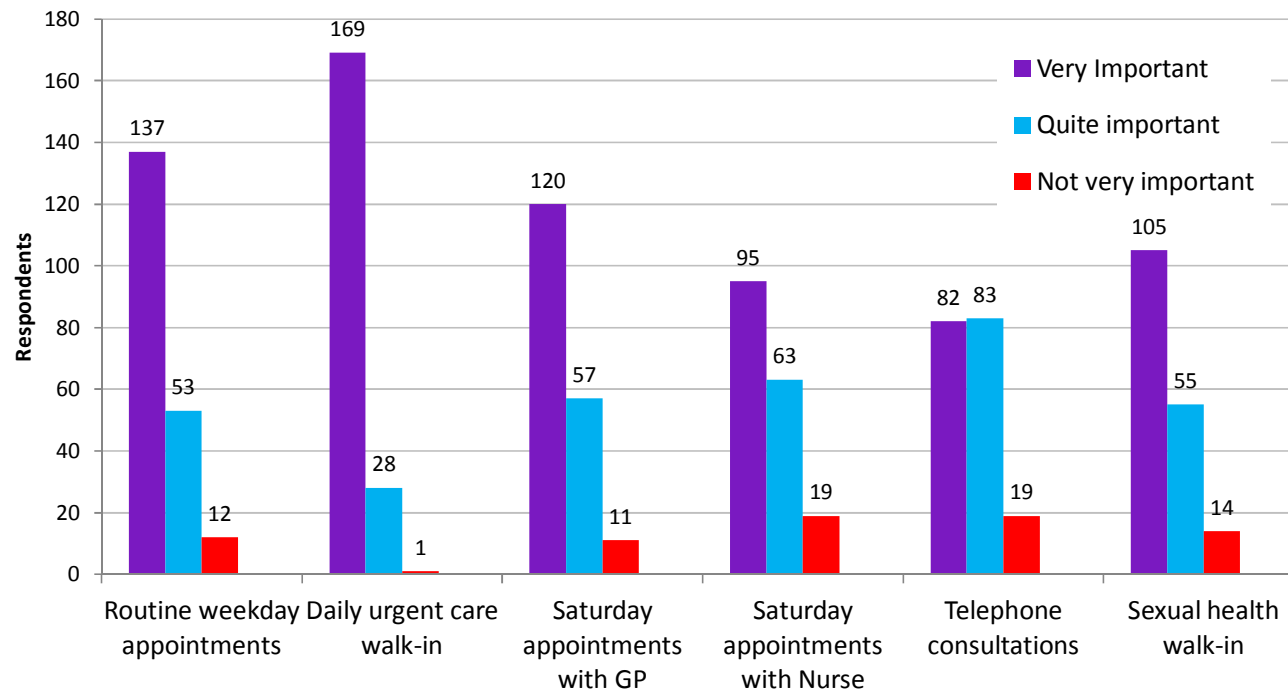
There are a few old staff that are very good at what they do. This needs to be passed on to some of the newer staff

The staff always remember you, they are not dismissive and always give you 30sec-1min of their time. There's nothing you can change as the reception staff are warm, welcoming and an excellent representation of the surgery

Most are polite, friendly, professional but sometimes you get someone that's not bothered

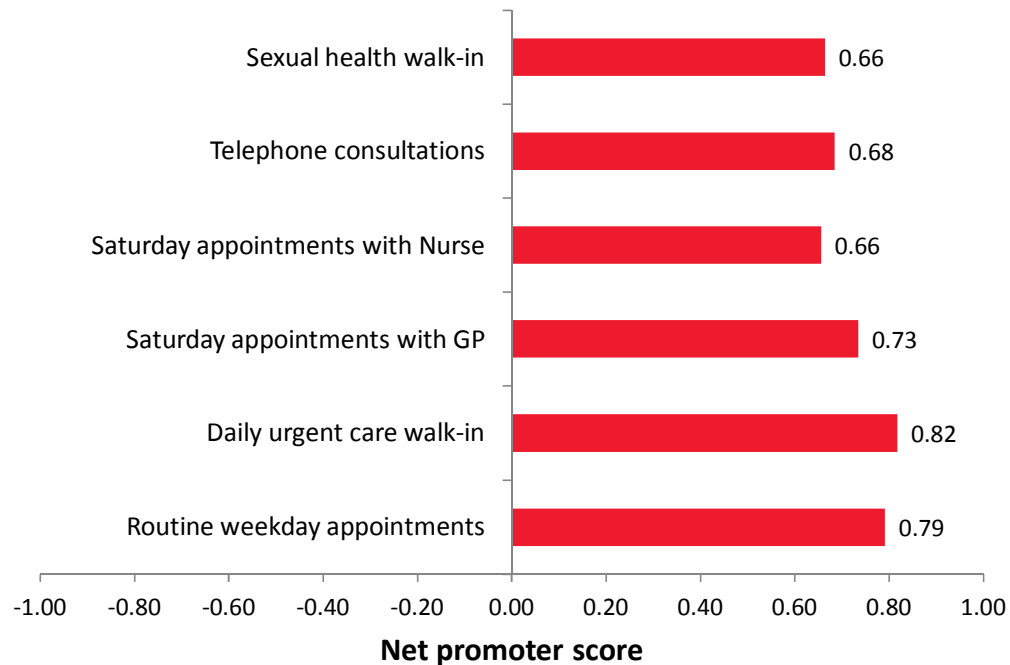
Appointments: Importance of type

Over 160 respondents consider 'daily urgent care walk-in' a very important service



Appointments: Importance of type

Daily urgent care is the most important appointment followed closely by routine weekday and Saturday appointments



Respondents class the importance of each appointment type into 'very important, quite important, not very important'. Positive sentiments are scored as 1, negative sentiments are scored as -1. The net promoter score measures the positive vs. the negative. A positive score indicates that the appointment is more important than not.

Appointments: Comments

There were a number of positive comments about the current appointment system but some dissatisfaction with waiting times for appointments with a preferred GP.

In total there were 75 free text comments, 34 comments were positive about the current appointment system, 9 comments were negative about the wait to get an appointment with a GP of your choice, 6 suggestions for more late evening appointments, 5 comments related to booking appointments online, 2 suggestions for consultations via Skype. The remaining comments reiterated responses to the preferred appointment type. These comments have been selected as examples of the different types of responses.

Evening appointment. up until 8pm- would be a useful consideration

it is excellent as it cover so many elements that are not in all surgeries, this put the patients needs first.

I personally have nothing but praise the appointment system at the surgery

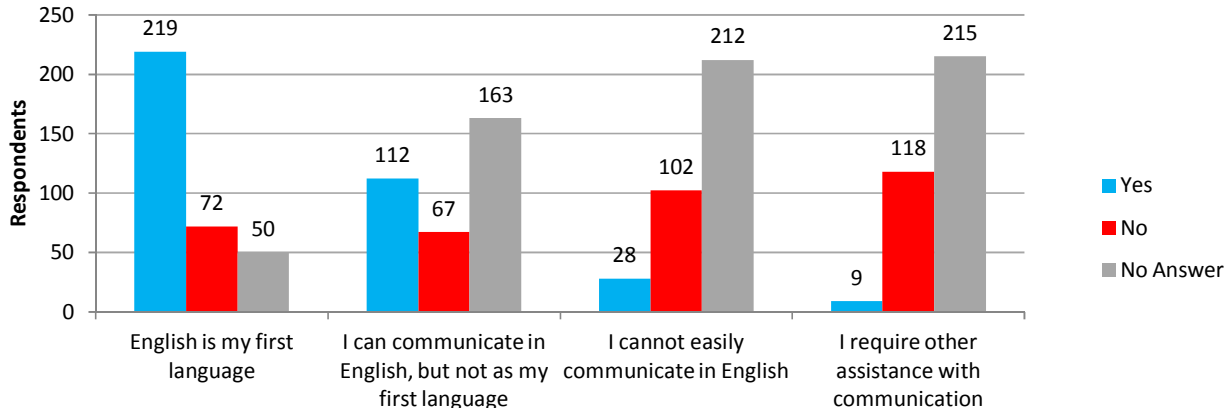
Sometimes it is very bad to get an appointment for a week, this is very frustrating

good that you can book appointments on line. Saturday appointment are important for those working long hours in week.

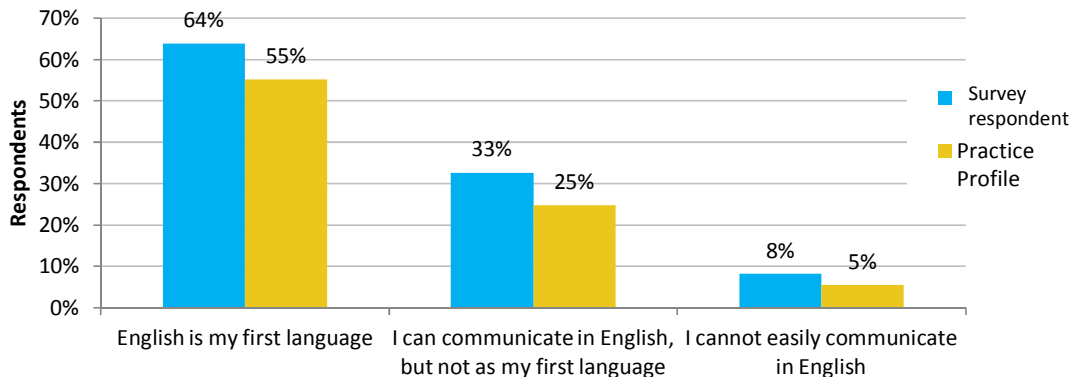
I would like more hours to be able to book an appointment to see my doctor. Sometime I call in and I'm not able to see my doctor in 2 or 3 weeks, because of booking spaces

Communication: Language

The survey reflects the practice population with over 50% having English as a first language



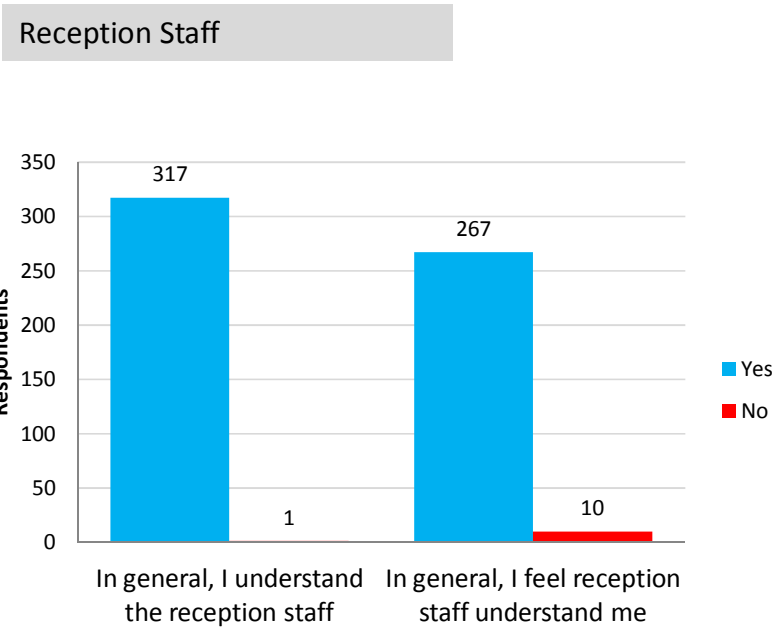
Where possible comparisons have been drawn with the practice population to ensure that the survey is representative



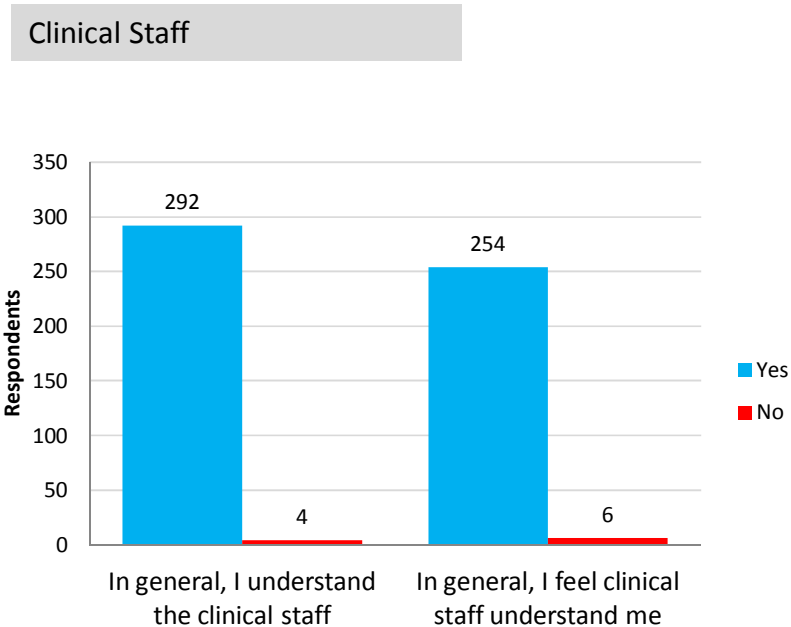
In order to help us understand the different needs of our patients, it would be useful to have a bit of information about you...

Communication: Staff communication skills

The majority of respondents felt they both could understand and could make themselves understood by both reception and clinical staff.



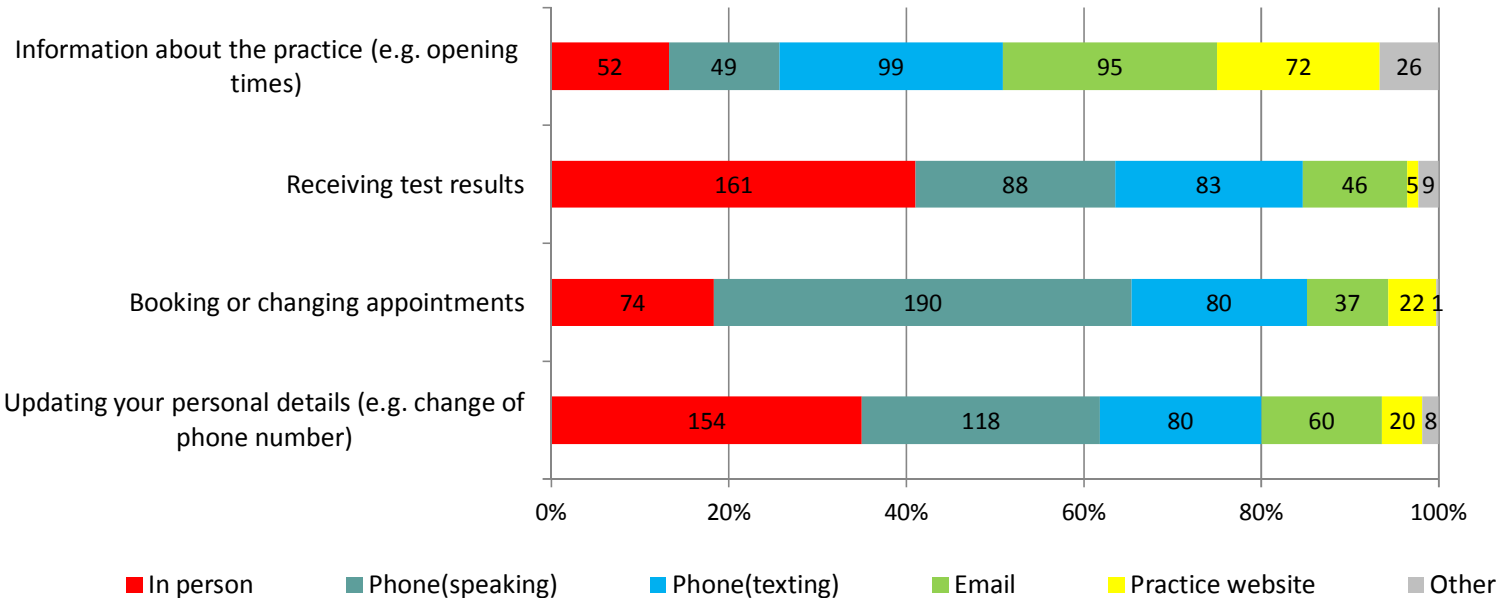
How well do you feel the reception staff communicate with you?



How well do you feel the GPs, Practice Nurses and Healthcare Assistant communicate with you?

Communication: preferred method

Preferred communication varies; test results and personal details are best done personally, more routine information tasks are preferred electronically



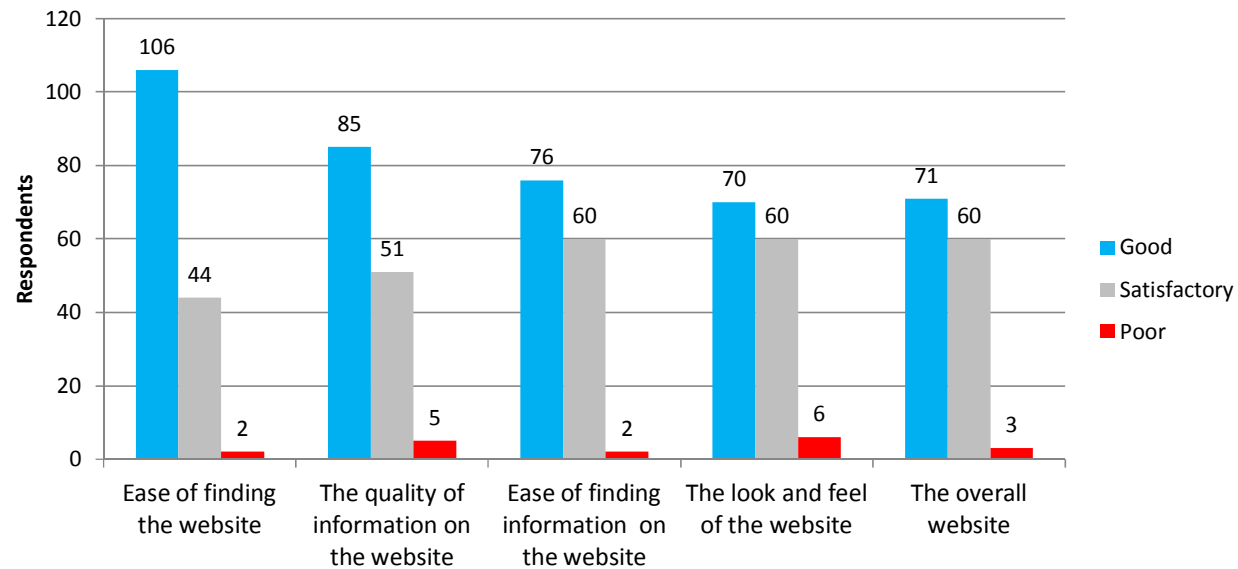
Where 'other' was selected, 20 patients said they would prefer communication via letter through the post, 5 said they would like posters or fliers.



How do you prefer to receive communication from the practice:

Communication: website

The website is considered in a positive light by all respondents, the ease of finding the website in particular is strong. Areas for improvement are the look and feel of the website

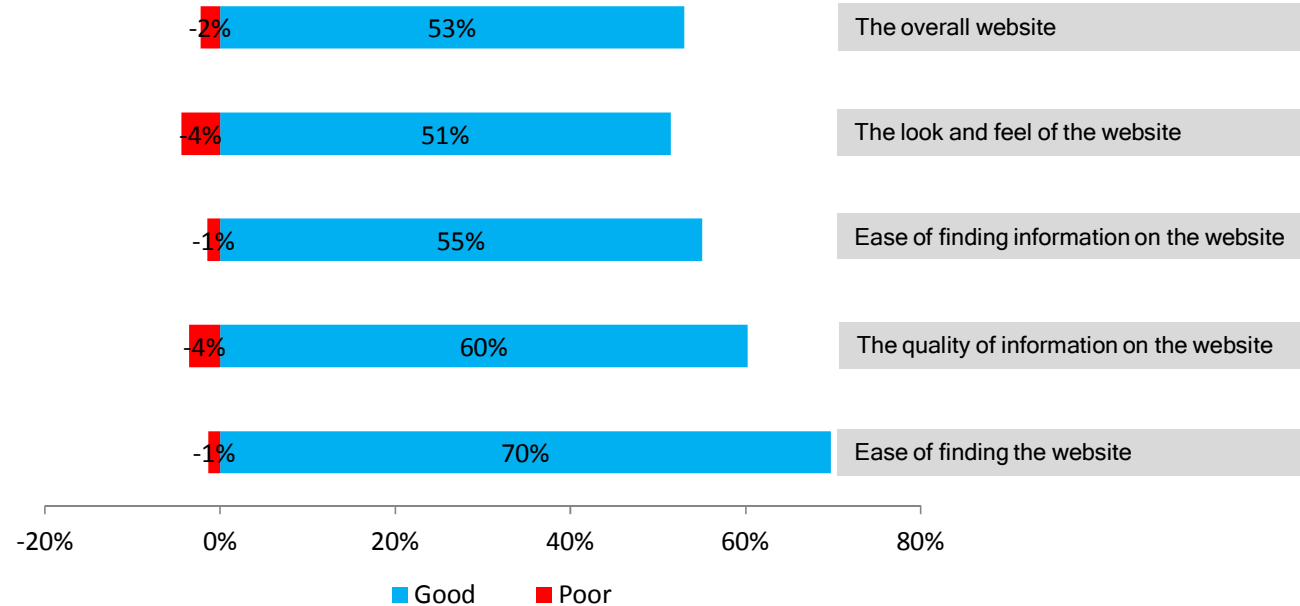


In the free text option, there were 3 suggestions to make appointments bookable online. This is already available but may need promoting more widely.

Communication: website

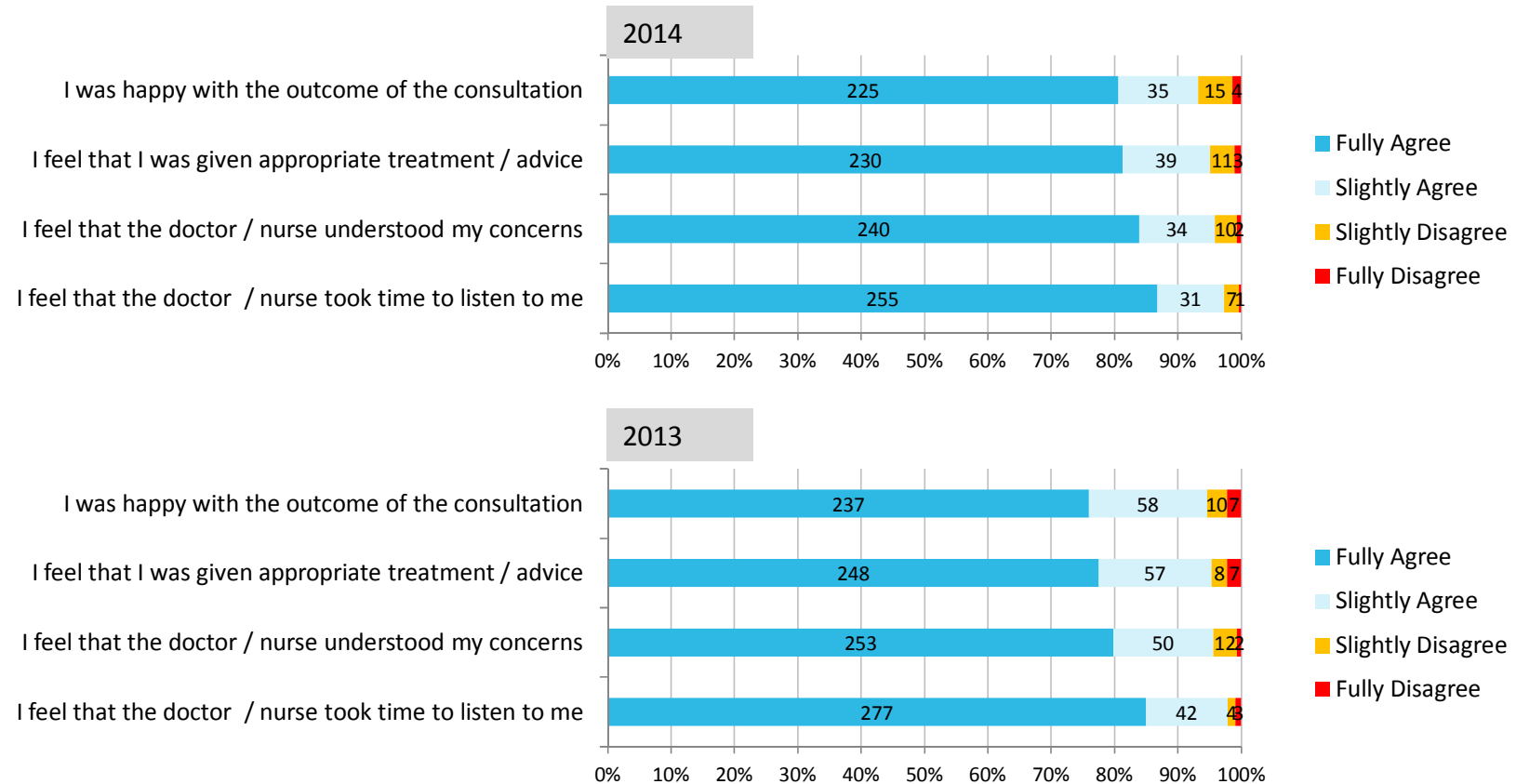
The website is considered in a positive light by all respondents, the ease of finding the website in particular is strong. Areas for improvement are the look and feel of the website

The proportions of respondents who rated each area positively vs negatively are shown.



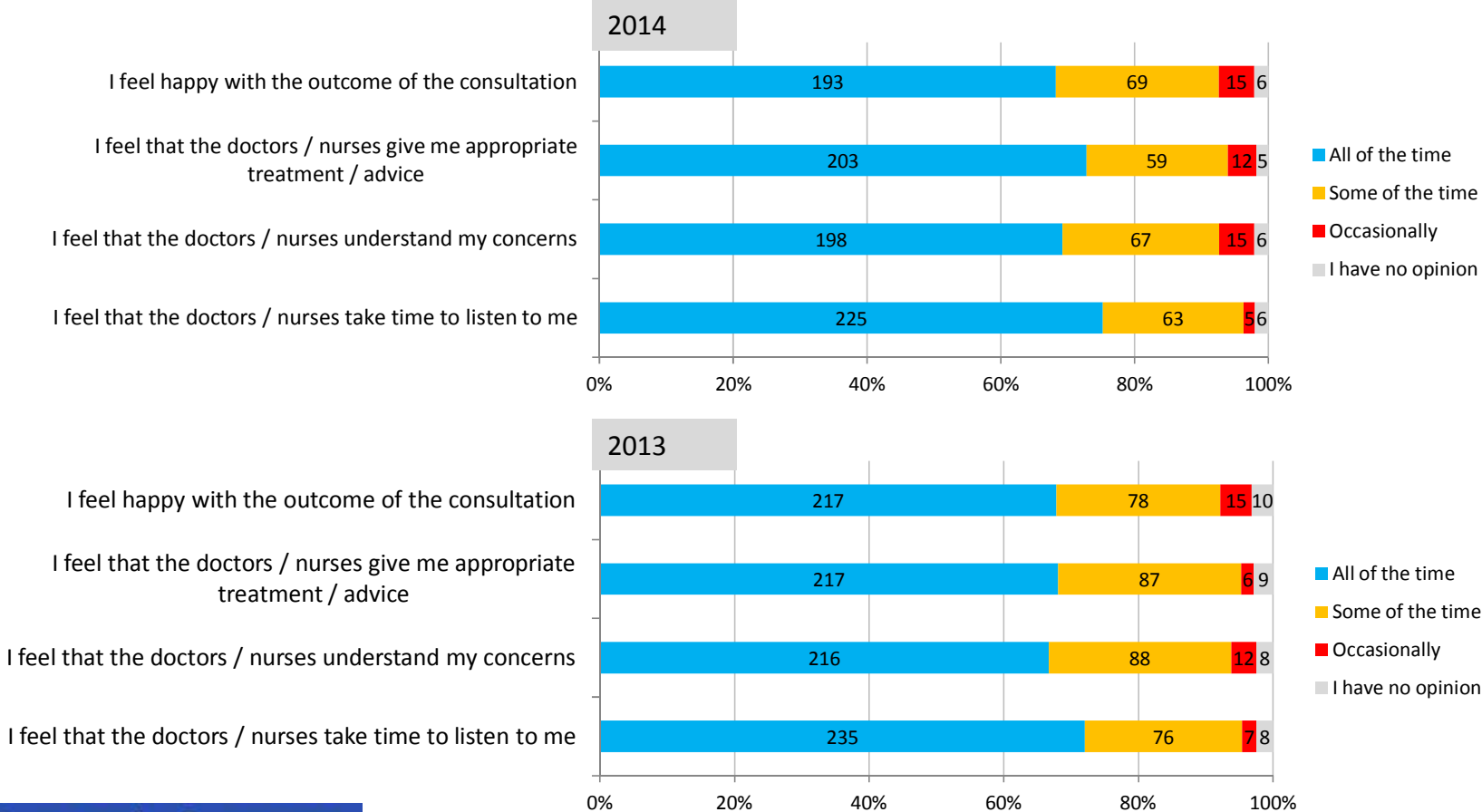
Satisfaction: Last consultation

In 2014 respondents were more positive across all statements than in 2013



Satisfaction: overall experience of consultations

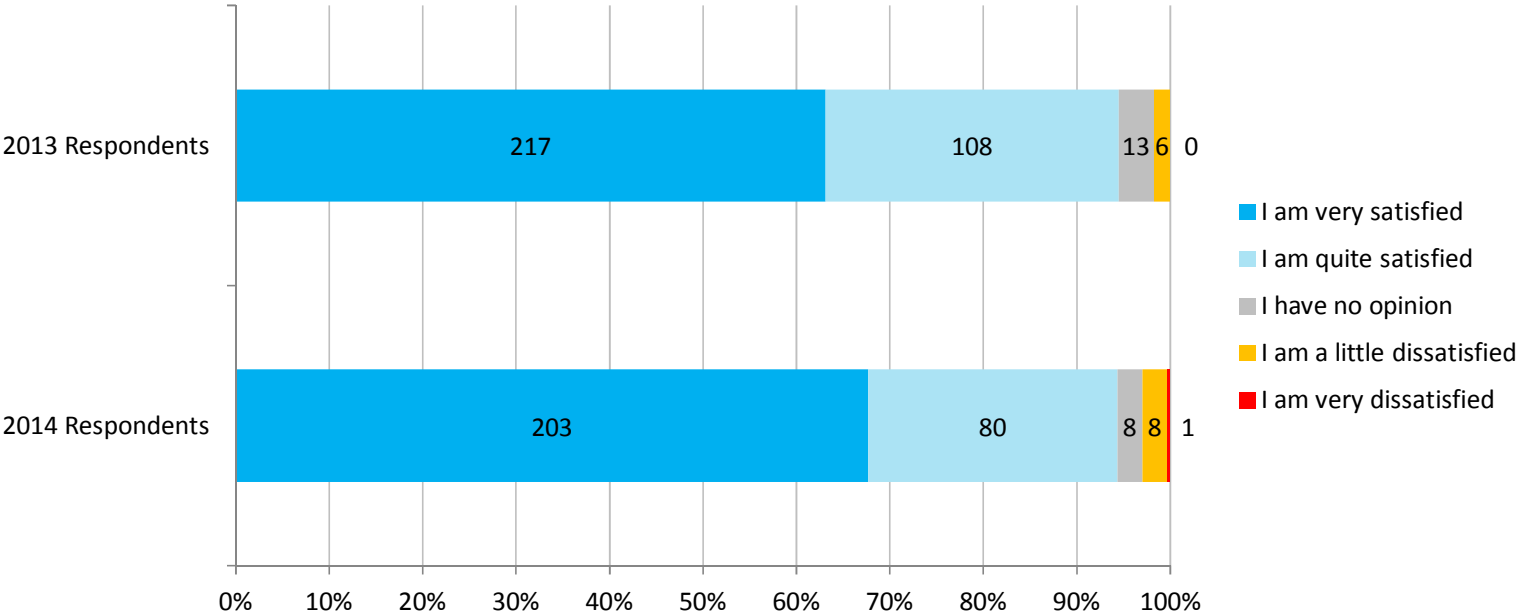
In 2014 respondents were more positive across all statements than in 2013



Thinking more generally about your overall experience of the doctors and nurses you have seen at Iveagh Surgery, please tell us how often you agree with the following statements:

Satisfaction: Overall

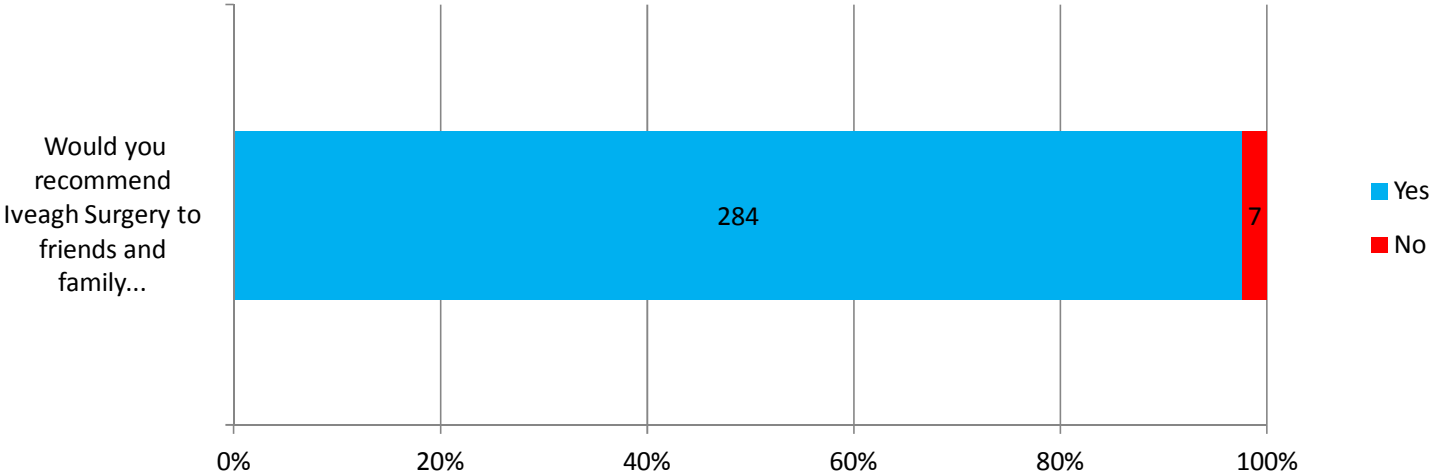
In 2014 a greater proportion of respondents were very satisfied with Iveagh Surgery overall and the proportion who were dissatisfied remained below 3%



Overall, how satisfied are you with The Iveagh Surgery?

Satisfaction: Recommendation

98% of respondents would recommend Iveagh Surgery to friends and family



Satisfaction: Comments

The majority of comments were complimentary. There were a small number of complaints relating to delays to appointment start time and difficulty accessing the surgery in its new location.

In total, there were 100 free text comments covering a variety of topics. The main recurring themes were 75 positive comments about the practice, 9 comments related to delay to appointments start time, 4 comments related to difficulty getting to the surgery in its new location, 3 comments related to patients feeling rushed during their consultation. These comments have been selected as examples of the different types of responses.

The new surgery is very clean and up to date. The care received from phone call to make an appointment until end of consultation is hassle free, polite, discreet and very professional

I have had to wait upwards to 30 min after my appointment to be seen

This practice puts patient at the centre of the care

doctors should take more care in listening and understanding concerns which are addressed instead of thinking about the time limit

With my pains, the bus stop is too far

Friendly environment and the doctors are good at what they do also waiting times are normally not too long.

It's been my surgery for many years. The surgery has dealt with my family I cannot fault the surgery at all .

Appendix 9: Patient event flyer and poster

Iveagh Surgery Patient Event

4pm, Thursday 27 March

Akerman Health Centre

- Find out the results of our patient survey
- Help us develop an action plan for the practice
- Meet with staff and patients
- Refreshments provided



Please come along!

For more information call 0203 049 6690

Appendix 10: Notes from patient event - 27 March 2014

IVEAGH SURGERY

Akerman Health Centre, Patmos Road, London SW9 6AF

Patient Event, Thursday 27th March 2014

Facilitator Naomi McCulloch, Practice Manager

Claire Campbell, Senior Receptionist

Yvonne Powell, Practice Secretary

	<u>Action</u>
<p><u>Attendees:</u> (names removed to protect patient confidentiality)</p> <p>FD AD ES SR GB WE RC LC ZH</p>	
<p><u>Naomi introduced herself to patients and thanked them for attending.</u></p> <p>Patients introduced them self to Naomi.</p> <ol style="list-style-type: none"> 1. Patients not already members of the PRG were advised about how to become members 2. One patient talked about the difficulties for visually impaired people (VIP) in communicating with PRG. Naomi will talk to the patient about the best format for sharing communications with VIPs. 3. Naomi explained that 341 patients had completed the survey and mentioned that if they would like feedback this could be arranged. Naomi would print out report and findings. 4. In 3 years we have had 3 surveys done at the practice. Naomi talked through the changes the practice had made as a result of the patient feedback including online prescription requests, telephone consultations, improvements to the waiting room, practice newsletter, training for staff. 5. Patients said they thought prescriptions on line was working well. 6. Patient made enquiries about our diabetic and urgent care clinics. On the whole patients seem happy with the service we provide. 7. Naomi reassured patient's that feedback we get from patients on individual staff members, both good and bad, are used in staff appraisals. 8. Patients would like to see more magazines in the waiting room and toys for children. 	<p><u>Naomi</u></p> <p><u>For practice action plan</u></p>

<p><u>Iveagh Surgery survey results 2014</u></p> <p>Naomi explained there was a detailed analysis of the results available and if anyone would like a copy Naomi will send it to them and answer any questions.</p> <p>For the purpose of the meeting Naomi will just share some of the highlights in order to help come up with an action plan for the practice.</p> <p>In total 341 people responded to the survey and they were broadly representative of the practice population by age, sex and ethnicity.</p>	<p><u>Naomi</u></p>
<p><u>Patient's description of Reception Staff</u></p> <ol style="list-style-type: none"> 1. Friendly, professional and helpful 2. One of the patients stated that sometimes quietly spoken on the phone and patients find it difficult to hear them at times. Naomi explained due to confidentiality, that could be one of the reasons why reception speak quietly. We also share a reception with another practice and are in an open spaced area. However it is important to get the balance right so that patients can here. 3. Receptions often go above and beyond call of duty. 4. Few negative comments some good and some not so good. Staff sometimes continue a conversation when patients are at the desk and do not acknowledge the patient. 5. Receptions could wear a name badge or when answering telephone say their name so patient/caller can identify who they are talking to. Could be better at introducing themselves 6. Important for VIP patients that staff introduce themselves when they approach the desk. 7. There were a couple of comments that receptionists do not often smile and look very serious. A welcoming smile would make a big difference. 8. Patients agreed with the action that receptions to aim to achieve consistent, positive experience for patients every time taking into account patient suggestions. 	<p><u>Receptionists</u></p> <p><u>For practice action plan</u></p>
<p><u>Patients Improvements/ suggestions of the surgery</u></p> <ol style="list-style-type: none"> 1. Intercom downstairs connecting to Iveagh Surgery 2. Blind and/or disabled people, people with learning difficulties may need assistance 3. It would be helpful to have someone visible at main entrance (downstairs reception desk currently to the left at main entrance). Naomi will feed this back to the building manager. 4. Plants, flowers. Pictures to brighten up reception. Posters for kid's/children's corner. Perhaps a V Tech for kids attached to the wall. Patient feels it looks too clinical at the moment. 5. Patients to make appointments via email, text and Android phone for visually impaired patients. 6. Staff to ensure reception telephone patient to cancel appointments where necessary as when they arrive to find their appointment is cancelled it is an unnecessary journey. Yvonne explained patients have to ensure they give us an up to date contact number. 7. Naomi explained when we phone patient our telephone 	<p><u>Naomi</u></p> <p><u>For practice action plan</u></p> <p><u>For practice action plan</u></p>

<p>number does not show up on screen. It is a withheld number that may show up as No ID caller. We cannot leave a message only Name and surgery due to confidentiality.</p> <p>8. Patients suggested texting patients when appointments are cancelled. Naomi said this is possible with patient permission and will look into this.</p>	<p><u>Naomi</u></p>
<p><u>Appointments</u></p> <ol style="list-style-type: none"> 1. Choice of different types of appointments. 2. Telephone and Saturday consultations offered. Some patients were not aware we offered this service. 3. Patients would like better promotion including posters and or on TV screen about services appointments we offer. 4. Naomi mentioned that we are aiming to offer more evening appointments which would be helpful for people who work during the day and children at school etc. Patients agreed this was a good idea. 	<p><u>For practice action plan</u></p> <p><u>For practice action plan</u></p>
<p><u>Waiting time</u></p> <ol style="list-style-type: none"> 1. Patients feel they have to wait a long time to be seen by the doctor even when they attend on time for their appointment. Patient has previously missed her taxi due to Doctor running late in clinic. Naomi will feedback to patients. 2. Dr's should inform/update reception if they are running late so patients can decide whether they will stay or rebook the appointment. 3. Receptionists mentioned they are not always aware of patients waiting as sometime they book in their appointment on computer screen attached to the wall. It is usually brought to their attention when they attend reception asking "when will I be seen?". When they are aware they will warn patients that doctors are running late. 4. Some clinical rooms are hot and stuffy, perhaps due to temperature control. Naomi will look into this. 	<p><u>Naomi</u></p> <p><u>Doctors</u></p> <p><u>Receptionists</u></p> <p><u>Naomi</u></p>
<p><u>Video Consultation</u></p> <ol style="list-style-type: none"> 1. Patients think it is a good idea especially for people working or who are unable to get out. Patients would need broadband if they require this service in the future. 2. GP's would have to set aside time to do video consultation same as telephone consultation. 	<p><u>For practice action plan</u></p>
<p><u>Registration at a GP outside your catchment area</u></p> <ol style="list-style-type: none"> 1. Patients could register at any GP (temporary registration). This should go national from October 2014 Naomi to update staff and patients with regards to this when more information is available. 	<p><u>Naomi</u></p>
<p><u>Website</u></p> <ol style="list-style-type: none"> 1. Needs revamping/updating. 2. Patients positive but contents need updating. 3. Details about doctor and nurse specialities would be useful. 4. Details about how to find the surgery and where it is located in the building. 5. Suggestions from patients to promote in surgery re posters and information website etc. 	<p><u>For practice action plan</u></p>

<p><u>Prescriptions on Line</u></p> <ol style="list-style-type: none"> 1. Patients encountering problems with Boots pharmacy. Ok now. Patient may change to different pharmacy if continues. 2. Boots and Superdrug Brixton do not collect prescriptions. Reception fax scripts and post prescriptions to them. 3. Naomi suggested that if patents are experiencing any delays they should report this to the practice so we can look into it. Requests are always processed within 24 hours by the practice unless there is a problem. 	<p><u>Patients</u></p>
<p><u>Clinical Staff</u></p> <ol style="list-style-type: none"> 1. Patients would like clinical staff to give more training regarding breast feeding and benefits. 2. Patients reported in the survey feeling rushed at consultation. Is this because the Doctor is running late? None of the patients present had this experience. 3. Patient's pleased that doctors do minor surgery on site and acupuncture is available if required. 4. Clinical staff to be on website to show what they do and what their speciality is. 	<p><u>Doctors</u></p>
<p><u>Younger Persons</u></p> <ol style="list-style-type: none"> 1. Doctors need to be more aware of younger patient needs. 2. They need to be more aware and sensitive as they would like to feel safe, reassured .and confident to discuss problems 	<p><u>Doctors</u></p>
<p><u>Communication with VIPs</u></p> <ol style="list-style-type: none"> 1. One patient talked about how technology could be used to help VIPs. 2. Naomi will look into whether the check in screen can work with headphones. 	<p><u>Naomi</u></p>
<p><u>General Satisfaction</u></p> <ol style="list-style-type: none"> 1. Patient's satisfied but would like to see improvements in certain areas (see above). 	
<p><u>Bus Stand</u></p> <ol style="list-style-type: none"> 1. In consultation re P5 bus. Should be reinstated but when? Naomi to update staff and patients when she is informed of developments. 	<p><u>Naomi</u></p>
<p><u>Kerb</u></p> <ol style="list-style-type: none"> 2. Dropped kerb on Patmos Road but not dropped kerb on other side. Patient's having difficulties with mobility scooter and buggy/pram. Naomi feeding back to building manager 	<p><u>Naomi</u></p>
<p><u>Art work</u></p> <ol style="list-style-type: none"> 1. There is some funding available to commission artwork for the main entrance lobby. Naomi would like patients to be involved in the consultation process. Volunteers to get involved to speak with Naomi. 	<p><u>Naomi</u></p>
<p><u>Practice action plan</u></p> <ol style="list-style-type: none"> 1. The PRG members present agreed the action plan suggested by Naomi at the meeting with the additional suggestions discussed with the PRG (above). 	

Appendix 11: Practice opening times

Reception times

During reception opening times the surgery doors and phone lines will be open:

Monday: 8.00am – 6.30pm
Tuesday: 8.00am - 7.00pm
Wednesday: 8.00am – 6.30pm
Thursday: 8.00am – 6.30pm
Friday: 8.00am – 6.30pm
Saturday: 8.00am- 1.00 pm

General appointment times:

During general appointment times there are pre-bookable appointments with a GP.

Monday: 8.30-11.30am & 3.00-6.00pm
Tuesday: 8.00-11.30am & 3.00-6.00pm
Wednesday: 8.00-11.30am & 3.00-6.00pm
Thursday: 8.30-11.30am & 3.00-6.00pm
Friday: 8.30-11.30am & 3.00-6.00pm
Saturday: 8.30 – 11.30 am (extended opening hours)

Urgent care walk-in clinic:

During the urgent care walk-in clinic there will be a doctor available to attend to patients who require care on the same day. Urgent care patients are seen on a first come first served basis.

Monday: 8.30-10.30am
Tuesday: 8.30-10.30am
Wednesday: 8.30-10.30am
Thursday: 8.30-10.30am
Friday: 8.30-10.30am

Sexual Health Drop-in

The sexual health drop-in is a walk-in service available to both registered and non-registered patients for sexual health screening and family planning services.

Tuesday: 4-7pm
Saturday: 9:30am- 12:30pm

Other clinics:

There are a range of clinics available at varying times throughout the week including appointments with the Practice Nurse or Healthcare Assistant, Diabetes Clinic, Dietician, postnatal care, smoking cessation, weight management and travel appointments etc. Please ask at reception for details.