

PPG Survey – Practice Response

1. Awareness of Online Booking

Patient Comment	Practice Response
<i>Patients commented that they would like to be able to book online for blood tests</i>	<p>We are currently looking at whether we can open up this facility for our patients. We have been hesitant to do this previously because our concern patients will self-refer for blood tests, which create difficulties when they attend if we have no blood forms or the test has not been referred via a clinician.</p> <p>We are currently looking at better access for blood tests, possibly open access and we are auditing numbers requiring urgent bloods over the current week.</p>
<i>Patients would like to access their medical records/results online</i>	<p>We are supporting the use of online booking and we can do this by a number of communication methods, which include:</p> <ul style="list-style-type: none">• Ensivage boards• Leaflets• Community news• Website <p>We are mindful that some patients will become concerned when they review their results. In these circumstances patients can be offered telephone advice from their GP.</p>

2. What Can We Do Better

Patient Comment	Practice Response
<i>Difficulty getting through on the telephone at 8am</i>	<p>Important to increase the use of on-line booking</p> <p>Increase the range of appointments that can be booked</p> <p>We have improved patient queue system so patients are no longer getting engaged tone</p> <p>We can improve patient education by advertising patients call back later for routine matters</p>

<p><i>Convenience of appointment if working</i></p>	<p>We offer advanced booking of the first three morning slots, afternoon appointments and 7am appointments these can be booked six weeks in advance.</p> <p>Patients can also request a telephone consultation with a guide time.</p> <p>Our patients can telephone from 8am in the morning and be seen that morning by a GP or Nurse Practitioner. Patients, who telephone in the afternoon for an urgent appointment and cannot wait for the following day, will be triaged and then if necessary be offered an appointment on that day.</p> <p>We also offer our patients the option of an evening appointment with the GP + service. Patients can be seen in Ipswich or Stowmarket.</p> <p>We believe our system is flexible and we try to accommodate most situations. We appreciate that sometimes it may be difficult to book an appointment for only a few days in advance to fit around patients' work and we have discussed ways that we can improve on this by managing some of the demand differently/active signposting</p>
<p><i>Not enough parking spaces for disabled people</i></p>	<p>The practice provides two spaces plus there are a further three provided by the council at the front</p> <p>We are aware that car parking can be an issue. We currently have an arrangement with the local football club for our staff to use their facilities as an overspill rather than park in the patient area</p> <p>We have contacted the council to see if we can negotiate further parking bays at the front of the building but unfortunately this was declined.</p> <p>We do have limitations to expand our car park further, due to our land lord and the river</p> <p>We believe our Hadleigh practice is fortunate to be able to offer our patients parking when many practices do not have this facility.</p>

<p><i>Improved play area for children in the waiting room</i></p>	<p>Unfortunately many of our toys and books had to be discarded due to either Health & Safety or Infection Control; this was in line with our CQC inspection.</p> <p>We will look at whether there are further improvements that can be made to our children's area, maybe an interactive picture on the wall</p>
<p><i>Long waits to see hospital consultant</i></p>	<p>Unfortunately this is beyond our control. We can assure our patients that our referral letters are sent within two days of the patient seeing their GP. We also actively try to refer our patients to community services if they are available and patients can choose a different hospital if they wish and the waiting list is shorter</p>
<p><i>Would like to have minor operations at the surgery</i></p>	<p>We are unsure what minor operations patient's wish for. We do offer some procedures plus cauterising of warts. We do have to follow guidelines on what procedures we can offer on the NHS rather than patients paying privately</p>
<p><i>The height of the reception desk excludes wheel chair users</i></p>	<p>We have recently improved the side section of the front desk so patients can speak to a receptionist face to face and patients can have an area where they can write</p>
<p><i>Patients can't always see the Doctor they want</i></p>	<p>Many of our Doctors are part-time and do not work every day. They do all offer a mixture of sessions including early morning and evenings. Patients are able to book in advance if they know that they are do a review</p>
<p><i>Online nurse appointments</i></p>	<p>Our nurse clinics vary and appointments lengths alter depending on the type of appointment and our receptionists are familiar with these.</p> <p>Our nurses specialise in certain areas which make online booking more difficult.</p> <p>We are currently investing in nurse training which will allow more of our Nurses to be able to</p>

	offer Long Term Condition appointments, we may be able to offer these online once we are ready to offer these clinics
<i>Open-endedness of waiting hard for patients with learning difficulties</i>	<p>We would encourage patients to speak to our receptionists in these situations. We have a side room available if necessary and carers need to sit away from other patients.</p> <p>We could inform patients of our side rooms in the waiting room</p>
<i>A visiting podiatrist may be helpful</i>	<p>Unfortunately we have no control over the type of appointments offered by the podiatrists who share our building.</p> <p>We do have a current list of private podiatrists and foot practitioners who will visit patients in their home</p>
<i>Would prefer to ring Boxford direct</i>	<p>Unfortunately we have had to make efficiencies and this required us to join up our telecoms.</p> <p>This gives patients better access to speak to someone during the day from 8am – 6pm and patients can request to be diverted back to Boxford for a dispensing query.</p>
<i>Open in evening and at weekends – I believe 7/7 GP Surgeries would support secondary and tertiary care</i>	<p>Our core hours are from 0830 to 1830 Monday to Friday. We provide some extended hours Monday to Thursday with one GP and one Practice Nurse from 0700. We have chosen to purchase out of hours care with Care UK who provide evening, weekend and Bank Holiday cover.</p>
<i>Coffee available</i>	<p>Occasionally we lay on a coffee morning in the waiting room to support a local or national charity. Recently we held a 'Children In Need' coffee and cake morning which raised money. This was run by a group of volunteers, which we are most thankful for.</p> <p>We always have to strike a balance between making our Estate as comfortable as possible, efficient, safe, clean and cost effective.</p>

	<p>Providing coffee on a regular basis would cost money both in materials and staff costs and we cannot justify this spend to be important.</p> <p>We could consider, setting up a coffee shop on the premises where we sell drinks and snacks, but again we have to consider start-up costs, foot fall, profitability, infection control and Health & Safety. Also, this would take trade away from our much loved high street.</p>
<p><i>Boxford is not as friendly as Hadleigh</i></p>	<p>We are genuinely surprised and upset to hear this as we normally get very positive praise from our Boxford patients saying how friendly and local the Boxford Surgery is.</p> <p>As part of this survey, the replies and comments will be passed on to our wider staff group.</p> <p>We are sorry if any patients have experienced an unfriendly service and would always encourage patients to inform Management about their experiences both positive and negative. In turn, Management can investigate any complaint and comprehensively reply to the complainant. This feedback is important to us as we are always looking at ways to improve our service and your experience in receiving excellent healthcare.</p>
<p><i>Doesn't like children having their own log ins</i></p>	<p>As a Practice we have decided to allow children from 14 years onwards to have their own log ins for their electronic notes. This decision is based on their Gillick competency and Fraser Guidelines (which Healthcare, Social Care, Police and the NSPCC) use to inform their Practice.</p> <p>Gillick competency and Fraser guidelines refer to a legal case which looked specifically at whether doctors should be able to give contraceptive advice or treatment to under 16-year-olds without parental consent. But since then, they have been more widely used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions.</p> <p>In 1982 Mrs Victoria Gillick took her local health authority (West Norfolk and Wisbech Area Health Authority) and the Department of Health</p>

	<p>and Social Security to court in an attempt to stop doctors from giving contraceptive advice or treatment to under 16-year-olds without parental consent.</p> <p>The case went to the High Court in 1984 where Mr Justice Woolf dismissed Mrs Gillick's claims. The Court of Appeal reversed this decision, but in 1985 it went to the House of Lords and the Law Lords (Lord Scarman, Lord Fraser and Lord Bridge) ruled in favour of the original judgment delivered by Mr Justice Woolf:</p> <p>"...whether or not a child is capable of giving the necessary consent will depend on the child's maturity and understanding and the nature of the consent required. The child must be capable of making a reasonable assessment of the advantages and disadvantages of the treatment proposed, so the consent, if given, can be properly and fairly described as true consent." (Gillick v West Norfolk, 1984)</p> <p>Many children are happy to be advised by their parents and are open with them regarding their healthcare. However, as a Practice we need to be mindful and law abiding that some children, do not want their parents to know certain and personal things and we as a Practice do not want to prevent them seeking the health interventions they need to live happy, healthy lives for fear of parental consent.</p> <p>We would always advocate and encourage children to speak to their parents/carers if appropriate, but equally respect their decisions if this is not their wishes and they are deemed competent to make this decision.</p>
<p><i>Getting results is slow</i></p>	<p>Blood results are sent to us electronically from the Hospital and these are therefore available on our SystmOne Health Database immediately to the Doctors for their perusal and analysis. We advise patients to ring for their results after 1400 to avoid peak telephone use and this gives our GPs time to go through these results and action what needs to happen.</p> <p>We have a buddy system in place, so if the GP that requested your tests is off on leave, then</p>

	<p>they will have a covering GP to cover for them.</p> <p>We think we and the Hospital Trusts could get better at educating patients on how long some tests will take to get results back, as many tests require different incubation periods. We are also reliant on Hospital Trusts communicating efficiently and timely with us, this is often out of our control.</p> <p>More recently, our Commissioners have drawn up a contract to help with the interface between Secondary Care and Primary Care. The areas for improved collaboration are coming in from 1st April 2017 – 2019. New changes to reduce inappropriate workload on GPs and improve interface between Primary and Secondary Care, will mean:</p> <ol style="list-style-type: none"> 1. Fit notes (need to be signed and administered by the Hospital for the expected length of the patient's convalescing). 2. Hospital provider to respond to patient queries for matters relating to their care. 3. Shared care agreement prior to specialist medications starting. 4. Hospital letters 10 days, then 7 days (April 18). 5. Sufficiently prescribed medication for the time required for a GP to receive the discharge letter (? 2 weeks).
<p><i>Need emergency information sheets available on asthma</i></p>	<p>We are and should be directing patients to use digital formats for accessing up to date and accurate health information which is standardised and updated by the NHS in conjunction with NICE. In addition, our Nurse Specialist for Respiratory Diseases will provide excellent advice/information to Patients at their yearly reviews. We also provide some up to date Health Prevention information on our Envisage boards in the waiting rooms.</p> <p>If any patient were to present in our reception in acute distress from an asthma attack, we would prioritise that patient by putting an alarm out for all clinical staff and management to respond. If acutely unwell and cannot breathe we would advise for an ambulance to be called on 999 for immediate assistance and transfer to Hospital.</p>

<p><i>Diabetic appointments used to be flexible and run by expert</i></p>	<p>Difficult to interpret the precise point raised. However, we now have two Practice Nurses who we have invested in, for them to be trained in the 'Warwick' Diabetes course, which is a well-respected and highly accredited course. We continue to have our Lead GP specialising in diabetes and our newest Partner also specialising in this area to increase our capacity for Diabetic patients. One of our Practice Nurses runs an evening group for newly diagnosed diabetics which are being received very well. Training Nurses in this important area gives our Specialist GP in diabetes more capacity to see patients who are perhaps more seriously unwell or struggling to maintain a healthy and functioning blood sugar.</p>
<p><i>Space for motor bikes in car park</i></p>	<p>Motorcyclists can park in the car park like any other motorist and we suggest they use a parking bay, in the same way as a car does. We are fortunate to have car parking for both staff and patients, many practices do not have car parking.</p> <p>As a practice we need to advertise that patients, who arrive by car/motorbike for their appointment, must vacate the car park once their appointment is completed. We have a number of patients who park for their appointment and then walk into town for shopping/business occupying a space for some hours.</p>
<p><i>Long waits sometimes</i></p>	<p>We have over 15,000 patients and have 10 GPs and a large Nursing Team. Per 1000 patients, the ratio for each GP is relatively smaller than many surrounding Practices. We also do our best to accommodate on the day appointments, so if all our appointments are full in the morning, patients are invited to come to the surgery at midday and wait to be seen by the next available GP. Patients appreciate this flexibility.</p> <p>At times we will often have to respond to emergencies that our either pre-scheduled or 'walk in' without an appointment or forewarning. Consequently, the clinical team needs to respond immediately and as a result other patients may need to wait; our patients</p>

	<p>recognise this and understand that an urgent response is both required and appropriate.</p> <p>The Practice also looks after 3 Care Homes and 1 Nursing Home (currently waiting for re-opening); at times the GPs will be called out to these homes as a matter of urgency. Being a rural Practice, the GPs also need to cover a wide geographical area and as a result may need to cover large distances for domiciliary visits.</p>
<p><i>Have found it challenging to let receptionist know I will not be attending an appointment</i></p>	<p>We agree we need to make it easier for patients to cancel or postpone their appointment, and we recognise that many patients have to hang on the telephone for a receptionist to speak to them. We plan for patients to be able to email or text in cancellations.</p>
<p><i>Six months wait for referral</i></p>	<p>Difficult to understand the precise nature of this issue and therefore can only speak generally. When our GPs refer their patients, they send task/digital dictation letter to our Medical Secretaries. They then are very efficient to get that referral out to the Consultant/Specialists within 2 days of referral being agreed. This is often much faster as we now use electronic referrals to the Hospital.</p>
<p><i>Improve out of hours service so not have to go to A&E at weekends for minor injuries</i></p>	<p>Suffolk GP+ is for people who urgently need a doctor's appointment, or can't see their GP on a weekday. This was initially a nine month NHS pilot as part of the Prime Minister's Challenge Fund, which aims to find innovative ways of improving convenience and access to GP services for patients. In April 2016, the scheme was extended for a further 12 months.</p>  <p>Suffolk GP+ is being run by Suffolk GP Federation and is staffed by a rota of Suffolk GPs and Nurse Practitioners. The service runs at Riverside Clinic in Ipswich and at Swan Surgery in Bury St Edmunds.</p>

The service is primarily for residents in Ipswich and Bury St Edmunds but appointments are made available for residents living further afield if they wish to travel. There are no self-referrals and appointments can only be made via a patient's own local GP practice.

Over fifty local Suffolk GPs have signed up to the Suffolk GP+ bank of doctors. They are continuing to work for their own GP practices in the county while also working two or three additional shifts per month for Suffolk GP+. There are four or five doctors and a nurse practitioner on each Suffolk GP+ shift.

Approximately 20,000 additional GP appointments are being offered over the course of the NHS pilot, with 24 appointments on week-day evenings and 150 on weekends and Bank Holidays.

Suffolk GP+ has electronic access to patients' notes with patient consent so the GP or Nurse Practitioner can quickly understand the patient's medical background, which helps with assessment and treatment. The notes are updated by Suffolk GP+ so the patient's own GP knows about the appointment.

In addition to the appointments being offered via local GP practices, Suffolk GP+ is collaborating with local hospitals and the ambulance service, to help ease pressure on Emergency Departments. Some patients at Ipswich Hospital and West Suffolk Hospital who are waiting at A&E and who are assessed as having minor ailments are being offered an appointment with Suffolk GP+.

Paramedics attending 999 calls also have the option to contact Suffolk GP+ where the patient is assessed as needing to see a GP rather than go to A&E. The paramedic will call Suffolk GP+ first, before bringing them directly for an appointment.

The NHS 111 medical helpline and GP Out-of-Hours services are also collaborating with Suffolk GP+ to enable booking of some patients for appointments within the Suffolk GP+ opening times if appropriate.

Telephone system for ordering repeat prescriptions is difficult

We recognise that we need to advertise and encourage more patients to use our on-line service for ordering prescriptions. We also have a dedicated telephone line to both Mill Pharmacy dispensary and Boxford dispensary to increase access.

We would like to take this opportunity to pass on our thanks and gratitude to our Patient Participation Group who tirelessly undertook this survey and spent considerable time looking at the thematic analysis of it and reporting their findings.

Additionally, we like to thank our wider patient group who took part in this survey and gave their time, thoughts, compliments and suggestions.

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