



## **SPRING HILL MEDICAL CENTRE**

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### **Local Patient Participation Report 2014/15**

Spring Hill Medical Centre is a semi-rural teaching practice, covering Fillongley, Arley, Galley Common and all of the Nuneaton area, with a 10,000 patient list. Our practice includes 3 partners, 1 salaried GP, 1 registrar, 3 practice nurses and 1 locum health care assistant, who are all supported by our receptionist and administration staff. The practice prides itself on delivering excellent patient care, with continuous focus on quality whilst offering a wide range of enhanced services.

Established in 2002, our patient participation group (PPG) has been successful in improving patient experience. The group decided that the minimum requirement of members were 5 (to be quorum). There is no maximum requirement of members as the PPG welcome any resident wishing to attend the meetings on a co-opted basis.

At present, there are 17 members; representation includes learning disability and ethnic minority groups, age range between 17-85 years and 9 “virtual” PPG members, age range between 17-78 years. The group have invested in good communication tools to ensure that it is representative of its registered patients by means of posters and leaflets.

At the meeting held on Monday 27 October 2014, the “Improving the Practice Questionnaire” was presented in draft format with the intension to be adopted by the PPG. At the meeting held, the PPG reviewed the questionnaire with the Practice Manager seeking approval for the questionnaire to commence from November 2014 to February 2015 and run for 3 months due to the launch of “Friends and Family” test December 2014. The PPG agreed the content of the survey with two priorities; Appointment system and patient choice and for the questionnaire to start November 2014 for 3 months.

The reception staff handed out the practice questionnaire to patients attending both Spring Hill and Galley Common Medical Centres during the months of November 2014 to February 2015.

Following the survey, the results were distributed to the PPG at March’s meeting. Overall the results were positive with staff performing well, but as previously highlighted at October’s meeting, it was clear that the appointment system and patient choice were priorities and required an action plan in order to address the concerns from patients who had completed the questionnaire. In light of this, the Practice Manager discussed the action plan to address both priorities which was agreed by the PPG at the meeting held in March 2015.

# **Patient Questionnaire Results for 2014/2015**

## **1. Access to a doctor or nurse**

Questions:

Speed to which the telephone was answered, transferred, appointment convenience, length of time waiting at the front desk to check-in, length of time waiting for a doctor or nurse, home visit, out of hours service was good/very good. This is lower than 2014 results of very good/excellent.

**Comments:** The general consensus from the results was that patients feel that there has been an improvement in the service and staff but they cannot see a specific doctor or a nurse of choice and they feel waiting longer than 6 days for a routine appointment is unacceptable and patients. Emergency appointments are utilised by patients as routine appointments as they do not want to wait for a routine. From April 2014 to March 23 2015 the practice have had **1949 DID NOT ATTEND** appointments, with May 2014 and February 2015 having the highest DNA rate.

**ACTION PLAN:** Practice did not achieve very good/excellent for 2014/15 as hoped, the doctors and Nursing team have a rota to ensure all doctors and nurses are equally split between Springhill and Galley Common to ensure both sites has GP/Nurse patient choice. Galley Common is only a branch surgery therefore the main site at Arley has more capacity for doctors on a daily basis. The Partners undertook 3 projects in January 2015, the first project was to review the current appointment system and during January 2015, 3 similar sized practices were visited to ascertain how they managed their clinics and appointment system. Once reviewed:

- Campaign on appointment definition and how to be used to be launched during April 2015
- Did not attends "DNA" reinstated from January 2015 and highlighted through PPG and newsletter
- Springhill Medical Centre did offer emergency appointments daily with no limit.
- Telephone triage of appointments was not approved by the partners
- Review of current clinical resource to be undertaken by the practice manager/partners for approval.

The second project, new telephone system has been successfully installed February 2015. The system is more user friendly, able to monitor calls for quality and training purposes, easy access to provide practice information to patients about services, e.g. Flu clinic dates; do not attend figures for month, joining the PPG. This was one of the priority areas for the PPG 2013/14.

The third project, clinical resource; is still ongoing with a view to conclude May 2015.

## **2. Obtaining a written repeat prescription – from surgery only not from the pharmacy**

Questions:

Prescriptions ready on time, correctly issues and handling any queries was very good/excellent.

**Comments:** General consensus from patients is that they are happy with the current service although further work regarding patient education is required. Software issues regarding electronic prescriptions have been resolved. On line ordering has gone from strength to strength with 8.5 % of the patient practice list now "on-line".

**ACTION:** Practice maintained very good/excellent for 2014/15. Communication campaign on "named pharmacy" and "lead time for prescriptions" to be launched in April 2015. Performance will be monitored.

### **3. Obtaining test results**

Questions:

Were you told when to contact us for test results, results available when you contacted us, level of satisfaction with the amount of information provided and level of satisfaction with the manner in which the result was given was good/very good.

**Comments:** The general consensus from patients was that the test results mailbox was ineffective as patients felt that messages were not responded too in a timely and effective manner. In February 2015, the practice installed a new telephone system and the test results mailbox was withdrawn. Test results are available over the telephone, with additional patient administration resource in place April 2015 however, during busy periods, results would be provided within 24 hours. This function will be reviewed by the practice manager June 2015 after the new function has been in place for 3 months. Performance will be monitored.

**ACTION PLAN:** Practice maintained good/very good for 2014/15, however, the test results mailbox trial was reviewed and agreed ineffective and as per patient comments and questionnaire has been withdrawn. Additional resource for patient administration has been secured with the view to provide an effective service for test results. Performance will be monitored.

### **4. About the Staff**

Questions:

Information provided by staff, helpfulness of reception staff, helpfulness of other staff was very good/excellent.

**Comments:** The general consensus from patients was that the service had improved and the staff were very informative and friendly. During 2014/15, the practice manager concentrated on staff training and development, in 2014, Receptionists, Administration staff and Secretaries undertook a course in Customer Care to ensure they deal with patients, effectively, appropriately and politely. Chaperone training was undertaken by practice manager and receptionists. In 2015, Safeguarding level 2 for non-clinical staff and level 3 for clinical staff was achieved. Additional resource has been secured for 2015 with further training and development of staff proposed as part of the practice managers aims and objectives in conjunction with 3 year plan for the organisation.

The practice must acknowledge the increase in patient aggressiveness towards staff. A zero tolerance policy is in place and will be closely monitored and adhered to going forward.

**ACTION PLAN:** Practice achieved excellent for 2014/15, which is better than very good/excellent (from 2013/14 results).

### **5. Overall satisfaction with the Practice**

For 2014/15, the overall patient satisfaction was very good which the practice has maintained from 2013/14. For 2015/16, the practice hopes to achieve excellent for 2015/16.

**Comments:** The practice tries to be a pro-active organisation and has an excellent PPG and virtual PPG. Additional resource has been secured starting from April 2015. In January 2015 we have introduced a practice newsletter which will be quarterly; the next newsletter will be available from April. We have installed a new telephone system with the hope that this delivers a better, quality service to patients. We have a patient notice board at both sites and the jayex system at Springhill is able to communicate any practice information to patients within the waiting room. The flu "walk in" clinics proved successful at both sites and the practice (although awaiting the official report) received positive feedback from February's CQC inspection. The practice would

like to extend its thanks to Mr Mike Williams, PPG Deputy Chair for his valid contribution and all staff for their effort and support during the process.

Overall performance of the practice will be monitored.

**ACTION:**

- The practice have reviewed its patient list and have updated its practice population as at 31/12/2014 in order to concentrate on providing more services and access (appendix 1)
- The practice has undertaken projects during 2014/15 including over 75 and unplanned admissions
- The practice has reviewed its complaint protocol October 2014 with a new procedure in place in order to strive towards excellent quality of care for its patients
- Investment within staff training and development during 2014/2015
- The practice now offers early morning surgeries as well as 2 late night surgeries per week
- The practice is currently working on resource projects for clinical and non-clinical areas of the organisation.
- The practice website incorporates the practice leaflet and can be viewed online and “share your experience” email address for any comments
- In February 2015, the practice was inspected by Care Quality Commission. The inspection was positive and the practice is currently awaiting the final report for review

**OTHER:**

- The practice did receive comments about providing a children’s play area, however due to infection control this cannot be actioned
- The practice cannot address any concerns regarding patient experience of out of hours service during the Christmas and New Year period when the practice was closed however did remain open on Christmas Eve and New Year’s Eve until 6.30pm.

The Practice Manager proposed the following action plan to the PPG, which was approved at March's meeting:

**ACTION PLAN – to be approved and agreed by PPG 23 March 2015**

<b>Survey finding</b>	<b>Agreed action</b>	<b>Action by who</b>	<b>Action by when</b>	<b>Date completed</b>
Results from 2014/15	PM to produce action plan with agreement from PPG	Practice	1.Focus on areas where results were lower than previous year to achieve higher for 2015/16	<b>April 2015 (identify areas)</b> quarterly review on performance
See a specific doctor or a nurse of choice. Access to a doctor or nurse. Appointment system.	PM to produce action plan with agreement from PPG	Practice	1. PM to speak to Partners about review of current rotas between main and branch sites. 2. Review appointment system 3. DNA's to be reinstated 4. Launch of communication campaigns - opening times, appointment definition, lead times for prescriptions, named pharmacy availability 5. Project on clinical and resourcing to be concluded by May 2015	<b>April 2015</b> May 2015 Review: June 2015
Test results line	PM to produce action plan with agreement from PPG	Practice	1.Additional resource secured April 2015 2.Performance will be monitored by PM with a review of new system June 2015	<b>April 2015</b> Review: June 2015
Pictures, biographies including services of clinical staff published on website	PM to produce action plan with agreement from PPG	Practice	PM to seek permission from staff with a view to publish clinical staff on website	<b>April 2015</b>
Lack of on-line appointments	PM to produce action plan with agreement from PPG	Practice	PM to speak to review current online appointments for GP and Nursing with a view to increase appointments	<b>April 2015</b>
Friends and family results (Practice commenced December 2014)	PM to produce action plan with agreement from PPG	Practice	PM to liaise with Deputy PM on ascertaining results from NHS England	<b>April 2015</b>

### **Spring Hill Medical Centre Opening Hours (Main)**

Monday	Tuesday	Wednesday	Thursday	Friday
8:30 -12:30pm 1.30/2.00 - 6:30pm	8:30 -12:30pm 1:30 - 6:30pm	8:30 -12:30pm 1:30 - 6:30pm	8:30 -12:30pm 1:30 - 6:30pm	8:30 -12:30pm 1:30 - 6:30pm
<b>Working appointments from 6.30pm two evenings per week and from 7.00am once a week</b>				

### **Galley Common Medical Centre Opening Hours (Branch)**

Monday	Tuesday	Wednesday	Thursday	Friday
8:30 -11:30am 1:30 – 4.30pm	8:30 -11:30am 1:30 – 4:30pm	8:30 -11:30am 1:30 – 4:30pm	8:30 -11:30am 1:30 – 4:30pm	8:30 -11:30am 1:30 – 4:30pm

Patients can contact the practice via telephone or visit to the surgery. The practice website can be used to order repeat prescription requests or to inform the practice of a change of address, telephone or mobile numbers.

Monday 23 March 2015.