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## **RESULTS OF THE KNOWLE HOUSE SURGERY PATIENT SATISFACTION SURVEY 2014 AND PATIENT GROUP DISCUSSIONS AND ACTIONS.**

### **PROGRESS MADE AGAINST LAST YEARS ACTION PLAN**

- 1. Build a car port like shelter outside of the surgery to protect mobility scooter from the elements.**

**This has been partially achieved, the project is ongoing, it has been held up by the planning application process. We are pleased to announce that planning permission was received in late February 2014 and building is hoping to be started in April/May 2014.**

- 2. Reduce the amount of surgeries cancelled at the Branch Surgery Tamerton Foliot.**

**This has been achieved the number of clinics cancelled at our branch surgery has been cut from 31 sessions last year 21 sessions this year. It is recognised that this is a branch surgery and sometimes during a shortage of doctor cover. i.e. sickness it does become necessary to cancel clinics and concentrate the doctor time at Knowle House. The surgery is fully aware of the effect this has on Tamerton patients and we will only cancel clinics as a last resort.**

- 3. Advertise the BT Line 01752 428347 more widely to the patient population.**

**This has been achieved. The number is more widely used by patients and has been publicised in the patient leaflet and website.**

**4. Dr Brooks will analyse the waiting time by Doctor and if any GP is considered to be consistently running late he will work with them to improve the situation.**

**This has been achieved. We have worked hard on waiting times and brought the number of those surveyed waiting for over 20 minutes down from 9.86% to 4.5%**

**5. Publish DNA results at the end of each month represented as whole or part surgeries.**

**This has been achieved. Each months DNA's are presented in both waiting rooms as the ratio of clinics that would be empty as a result of patients missing their appointments. i.e. 16.75 3 hour clinics worth of DNA's for Feb 14.**

**6. Posters identifying which Doctors have a trainee each day will be sited at reception and the self check-in desk. Reception staff will be encouraged to inform patients.**

**This has been achieved. Posters / white board now go up informing patients if the Doctor has a GP trainee or medical student with them.**

## **249 Responses Received**

**Once again this years responses were divided into Doctor and Nurse Consultations.**

**There were 113 responses for Doctors and 135 for Nurses. Where questions spanned both surveys the results were aggregated.**

**The Patient group chose to keep the same questions this year as last so results could be compared.**

**1. How do you rate the way you are treated by the receptionists?**

98% Response Rate. Of those who responded 94.2% Rated Good, Very Good or Excellent. 3.7% Fair 2.1% Poor

The reception staff have scored well again this year. Unfortunately the Poor rating went up by 1.7%. The patient group discussed the fact that Reception staff were often in a situation where they can't always provide exactly what a patient wants due to either policy or resource restrictions. This can sometimes be interpreted by patients as being unhelpful when this is really not the case.

**2. How do you rate the ability to get through to the practice on the telephone?**

98.4% Response Rate. Of those who responded 73.4 % Rated Good, Very Good or Excellent. 18.3 % Fair 8.3 % Poor

This is an area flagged with some concern. The good, very good, excellent category by 2.4%. The patient group discussed if this was also an 0844 number concern. (The numbers of comments mentioning 0844 were relatively high) The group also said that there was an issue that when you first rang in you chose the number for the service you wanted i.e. Choosing 1 to book an appointment and this then tended to put you in another queue which was frustrating. It was agreed that the Practice Manager will start to publish telephone answering stats at reception. This will use a 30 second answering target (NHS 111 has a 1 minute target). He will also chase up the telephone company about changing the 0844 number to a local number and he will also talk to the provider company about reducing the queue to only one queue. This will all form part of this years action plan.

A couple of the members of the group talked about ways of reducing outgoing costs of calls by using various schemes that use the internet. Dr Brooks asked the Practice Manager to look into these options.

### 3. If you need to see a GP on the same day can you get an appointment or be offered a telephone call?

94.7% Response Rate. 92.5% Yes 6.5% No 1% Sometimes

This is a standard that we would ideally like to see at 100%. There is good progress being made against last years result with the yes percentage increasing by 3.2%. There was some question as to the patient who replied sometimes. The Practice Manager explained that during very busy periods it is important for safety reasons to sometimes stipulate emergencies only and this may explain the reply sometimes.

### 4. Can you book to see any practice GP in advance? (Not necessarily your own GP).

97.3% Response Rate. 95.5% Yes 3.6% No 0.9% Possibly

The percentage of patients replying yes should once again be 100% as this is the service we provide. The number of patients answering yes increased by 3.4% on last year. There was a discussion over whether some of the respondents read the question as being able to see their own Doctor but as ever with an anonymous survey it is difficult to verify.

### 5. How long did you have to wait past your booked time for appointment?

97.3% Response Rate 46.4% seen on time. 30% waited up to 10 minutes 19.1% 10-20 minutes. 4.5% Waited longer than 20 minutes.

In discussions with the patient group all agreed that a wait of over 20 minutes is often when patients started to become a bit agitated by their waiting time. Dr Brooks explained that often waits over 20 minutes are usually because an emergency has occurred or a patient has become very significantly unwell. All members of the group recognised this as a very valid reason for keeping patients waiting. One member of the group explained that there was a poster in the waiting area asking patients to approach the reception staff should they be waiting 20 minutes over their waiting time. One member asked if the system could talk to the LED screen and display doctor waiting times. The Practice Manager said that he would contact the software company and see if this could be introduced within the terms of his current contract.

It was pleasing to the group to see the percentage of those left waiting over 20 minutes had reduced by 5.4% this year.

## 6. How do you rate this?

96.5% Response Rate. Of those who responded 79.8 % Rated Good, Very Good or Excellent.19.3 % Fair 0.9 % Poor

The rating for Good, Very Good, Excellent rose by 6.4% and the patient group seemed happy with this progress. In general the group felt waiting times were acceptable at the practice and have a good understanding of issues that increase waiting times.

## 7. If you have a mobility problem is the practice easily accessible to you?

97.6% Response Rate. 43.4% of respondents had a mobility problem and found the surgery easily accessible

It was interesting that 4 in 10 patients had mobility problems but most found the surgery access was easy.

## 8. If not how could we make improvements

Although access is good I sometimes struggle to get a seat when the waiting room is full due to lack of/limited space between chairs where people are sitting.. This is because I'm disabled.

It's accessible but doors can take a while to open and gets very busy by reception as patients have to walk by to get to rooms.

Difficult to improve access due to layout of the building.

We talked as a group if there was a way in which we could improve access based on the above comments received. All members thought that with the lay out of the building this would be very hard indeed. 2 Members of the group had mobility difficulties and both considered that access was good and agreed that it would be hard to improve due to the layout of the building

Please rate the doctor at:

1. Making you feel at ease (being friendly and warm towards you, treating you with respect; not cold or abrupt).

98.2% Response Rate. Of those who responded 98.2 % Rated Good, Very Good or Excellent.0.9 % Fair 0.9 % Poor

Comments to these questions are summarised at the end of question 10

2. Letting you tell 'your' story. (Giving you time to fully describe your illness).

98.2% Response Rate. Of those who responded 95.5% Rated Good, Very Good or Excellent.4.5% Fair 0 % Poor

Comments to these questions are summarised at the end of question 10

3. Listening. (Paying attention to what you were saying; not looking at the notes or computer as you were talking).

98.2% Response Rate. Of those who responded 96.4% Rated Good, Very Good or Excellent.1.8% Fair 1.8 % Poor

[Comments to these questions are summarised at the end of question 10](#)

4. Being interested in you as a whole person.

98.2% Response Rate. Of those who responded 97.3% Rated Good, Very Good or Excellent.1.8% Fair 0.9 % Poor

[Comments to these questions are summarised at the end of question 10](#)

5. Understanding your concerns. (Communicating that he/she had accurately understood your concerns).

98.2% Response Rate. Of those who responded 96.4% Rated Good, Very Good or Excellent.3.6% Fair 0 % Poor

[Comments to these questions are summarised at the end of question 10](#)

6 Showing care and compassion

99.12% Response Rate. Of those who responded 95.5% Rated Good, Very Good or Excellent.3.6% Fair 0.9 % Poor

[Comments to these questions are summarised at the end of question 10](#)

7 Being positive. (Having a positive approach and a positive attitude; being honest but not negative about your problems).

99.12% Response Rate. Of those who responded 95.5% Rated Good, Very Good or Excellent.4.5% Fair 0 % Poor

[Comments to these questions are summarised at the end of question 10](#)

8. Explaining things clearly.

99.12% Response Rate. Of those who responded 96.4% Rated Good, Very Good or Excellent.3.6% Fair 0 % Poor

Comments to these questions are summarised at the end of question 10

9 Helping you take control. (Exploring with you what you can do to improve your health yourself).

99.12% Response Rate. Of those who responded 95.5% Rated Good, Very Good or Excellent.4.5% Fair 0 % Poor

Comments to these questions are summarised at the end of question 10

10. Sharing a plan of action with you. (Discussing the options, involving you in decisions as much as you want to be involved, not ignoring your views).

97.3% Response Rate. Of those who responded 94.5% Rated Good, Very Good or Excellent.4.5% Fair 1 % Poor

The patient group were very pleased with the results of the Doctor Consultation section of the survey. This shows that the Doctors in the practice are carrying out high standards of care and compassion. The group asked what interactions may result in those who have scored Fair or Poor. Dr Brooks explained that sometimes medical consultations are undertaken on medical need not want. Often those reporting lower standards of satisfaction are often those patients who have an expectation, that may be a certain drug is prescribed for them, they then report a lower satisfaction when this is denied to them often by our medical staff on safety grounds.

11. How would you rate your consultation with this doctor today?

94.7% Response Rate. Of those who responded 97.2% Rated Good, Very Good or Excellent.2.8% Fair 0 % Poor

The group were very pleased with this result and felt it was a true reflection on the excellent medical care provided by our doctors.

12.Overall how satisfied are you with your trip to the surgery today?

94.7% Response Rate. Of those who responded 97.2% Rated Good, Very Good or Excellent.2.8% Fair 0 % Poor

Once again the group were very pleased with this result and agreed it was a true reflection of the high standards held by the surgery

## NURSES RESPONSES

How long did you have to wait past your booked time for appointment (Nurses Only)

100% Response Rate 40.7% seen on time. 40% waited up to 10 minutes 13.3% 10-20 minutes. 6% Waited longer than 20 minutes.

Although the waiting time for those waiting over 20 minutes was slightly up by 0.4% the satisfaction rate for waiting times displayed in the question below actually increased.

How do you rate this?

100% Response Rate. Of those who responded 84.4% Rated Good, Very Good or Excellent. 14.1 % Fair 1.5 % Poor

Satisfaction seemed to increase over waiting times displayed by a Good, Very Good, Excellent rating rise of 3.7%

Please rate the nurse at:

Making you feel at ease (being friendly and warm towards you, treating you with respect; not cold or abrupt).

99.3% Response Rate. Of those who responded 100% Rated Good, Very Good or Excellent. 0 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)

Letting you tell 'your' story. (Giving you time to fully describe your illness).

98.5% Response Rate. Of those who responded 100% Rated Good, Very Good or Excellent. 0 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)

Listening. (Paying attention to what you were saying; not looking at the notes or computer as you were talking).

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0.7 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)

Being interested in you as a whole person.

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0.7 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)

Understanding your concerns. (Communicating that he/she had accurately understood your concerns)

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0.7 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)

Showing care and compassion.

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0.7 % Fair 0% Poor

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Explaining things clearly.

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Helping you take control. (Exploring with you what you can do to improve your health yourself).

93.3% Response Rate. Of those who responded 99.2% Rated Good, Very Good or Excellent. 0.8 % Fair 0% Poor

[Comments to these questions are summarised at the end of question 10](#)



Sharing a plan of action with you. (Discussing the options, involving you in decisions as much as you want to be involved, not ignoring your views).

91.9% Response Rate. Of those who responded 99.2% Rated Good, Very Good or Excellent. 0.8 % Fair 0% Poor

This years survey once again showed very high satisfaction levels in the nurses consultation skills. No poor ratings were received. The fair ratings showed no obvious patient comment on the questionnaire. It was discussed with the group that one of the draw backs with an anonymous questionnaire is that if a particular patient had a particularly poor consultation with a member of nursing staff the Practice manager was unable to talk to the patient to try and get an idea as to why the consultation broke down.

How would you rate your consultation with this nurse today?

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0.7 % Fair 0% Poor

These results, once again, show extremely high levels of satisfaction with the nursing staff. The group were very happy that this was a true reflection of the excellent work undertaken by our nursing staff.

Overall how satisfied are you with your trip to the surgery today?

99.3% Response Rate. Of those who responded 99.3% Rated Good, Very Good or Excellent. 0 % Fair 0.7% Poor

This was again another very high satisfaction result which reflects the levels of quality that the surgery strives to deliver to its patient population.

## COMMENTS

### TELEPHONE

OBJECT TO PRE-FIX 0844

HAVING TOO PHONE A PREMIUM RATE NUMBER IS AGAINST NHS GUIDANCE

TOO EXPENSIVE AT 4P A MINUTE. 10 MIN WAIT FOR ANSWER

0800 NUMBER TOO EXPENSIVE TO CALL

PHONE LINES KEEP PRESSING DIFFERENT NUMBERS THEN BEING TOLD LINE BUSY

CHARGES FOR PHONING 0844 NUMBER ARE EXTREMELY HIGH

**This area, as with last year, was the area of most dissatisfaction. The Surgery was held in a contract with our supplier for 5 years. However we have been very luck that our colleagues in NHS England have managed to negotiate on our behalf to be released from this contract. It is**

**planned to revert the surgery back to a local number as soon as we can. We were hoping that this would be by the 31.3.14. Unfortunately there has been a short delay and we hope this will happen April/May14.**

## **CAR PARKING**

CAR PARKING PROBLEM RARELY A SPACE

NO DISABLED SPACES FOR OPENING SIDE DOORS WIDE ENOUGH TO GET OUT

MORE PARKING

CAR PARK IMPROVEMENTS

MORE CAR PARKING

PARKING CAN BE AN ISSUE SOMETIMES

NOT EASY TO PARK IN YOUR CAR PARK

**As the practice grows car parking is inevitably going to be a problem. As reported in the previous years survey we had explored buying the bottom car park from Plymouth City Council. However after reaching an agreement they then came back to us saying they would lease some spaces to us yearly. Unfortunately the lease prices they quoted us were so high it made the project unrealistic with the sums quoted as being better re-invested in patient care.**

**Dr Brooks also explained that he used to carry out inspections on other surgeries in Plymouth and that this surgery still has one of the biggest car parks in Plymouth. A local surgery of similar size in the area has no car park at all.**

## **WAITING TIMES**

WAIT TIME RATED FAIR ALTHOUGH THEY HAD AN EMERGENCY SO PERFECTLY UNDERSTANDABLE

ADVANCE BOOKING FOR GP USUALLY WEEKS AWAY

CAN USUALLY GET AN APPT OR PHONE CALL ON THE DAY

CAN BOOK IN ADVANCE CANNOT BOOK OVER 4 WEEKS

WAITED 20 MINS DUE TO AN EMERGENCY NURSE NORMALLY ON TIME

BUT VERY LONG WAIT TO SEE MY OWN DOCTOR WAIT 3 WEEKS

NOT SEEN MY OWN GP FOR OVER A YEAR

Mr Smith-Avery explained that we try to keep disruption to patients as minimal as possible. Often medical staff need to book training to keep current. By only booking four weeks in advance this allows us to book out clinical time without cancelling clinics. Dr Brooks also pointed out that the longer we book ahead the bigger the DNA rate we receive. This was agreed by the group and it was thought that the DNA rate was running high enough at present. (Equivalent to 16.75 3 hour clinics worth last month)

Dr Brooks explained that in order to run the duty doctor system, each Doctor loses at least two sessions per week. For a part time doctor this can represent one third of their surgery availability. The group understood that with the resources available the appointment system that is run at present is most likely to give the most assistance to the greater number of patients.

It is also important for patients to see a variety of doctors as this can sometimes allow for a second opinion of their medical problems.

## **GENERAL COMMENTS**

GIVE AN INTERNET BOOKING SERVICE

MORE RECEPTIONISTS

DIFFICULT TO BE CRITICAL AS YOU DO SO WELL IN EVERY AREA OF WORK. IT WOULD BE DIFFICULT TO FIND A SIMILAR HEALTH CENTRE ANY WHERE IN PLYMOUTH OR BEYOND YOU RENDER A MOST EFFECTIVE HIGH STANDARD OF CARE & CONCERN. THANKS FOR ALL YOU DO - YOU ARE APPRECIATED

MAKE IT FOR EASIER FOR PEOPLE THAT WORK

NURSE P LIBBY IS REALLY OUTSTANDING AND LOVELY

DOC WAS LOOKING AT THE COMPUTER BUT ALSO ABLE TO LISTEN AND RECALL/RESPOND TO MY QUERIES

CAROL BALL IS A FANTASTIC NURSE, REALLY KIND, CARING, UNDERSTANDING AND REALLY MAKES YOU FEEL AT EASE

Mr Smith-Avery explained that an internet booking system has been introduced recently. It currently has an 8% take up amongst the patient population. It was agreed with the group that it should be more widely advertised.

The staffing levels of Reception was discussed with the group. It was explained that the practice works to a staff budget, the only way to increase reception time would be to the detriment of another area. The Group agreed that the staff budget was best spent on medical personnel.

Dr Brooks and Mr Smith-Avery recognised that sometimes it was difficult for patients who are working to attend at convenient times. There are two late surgeries which run on Tuesdays and Thursdays, booking after 5.30pm, running until 7.30 on a Tuesday and 8 pm on Thursday. Dr Garstang has also agreed to start two morning clinics at 07.30, one at Tamerton Surgery and one at Knowle House Surgery.

We are grateful for the kind comments about our medical staff.

## **ACTION PLAN FOR YEAR 2014/15**

- 1 Complete the construction of the canopy.**
- 2 Liaise with the telephone company to revert the 0844 number to a local number.**
- 3 To publish at reception telephone answering times.**
- 4 Consider flexibility to booking only 4 weeks in advance.**
- 5 To explore if the clinical system can interact with the LED board if Doctors are funning late.**
- 6 To further advertise the internet booking and prescribing service.**
- 7 To contact Derriford General Hospital to explore the use of land line voice messages as a reminder for patient appointments.**
- 8 To explore the possibility of a voluntary Concierge service to aid patients when attending the surgery.**