

Moulton Surgery Patient Survey Report

1. Introduction

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

We spoke to 13 patients at Moulton Surgery about their views, experiences and satisfaction. By speaking to patients face to face we could add depth to the findings of the National GP Patient Survey². We also spoke to the practice manager to find out about services currently being provided, how they are accessed, what they felt worked well and what pressures there were. The questions used are in Appendix 1 and 2.

All information and figures quoted below were correct at the time of the site visit. This report does not reflect any changes or improvements to procedures since that date.

2. Practice information

2.1 Practice size and staffing

Moulton Surgery is a medium-sized practice (approximately 10,325 patients) with six doctors (two female - one on maternity leave and one male), one nurse practitioner, two nurses and one health care assistant.

There is also a Practice Manager and admin and reception teams within the practice.

One GP recently resigned following maternity leave and another GP was recently appointed.

2.2 Services provided

The practice provides a range of services, including a triage clinic for urgent problems; Blood; Antenatal and Postnatal; Breastfeeding; Child Health

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

² http://gp-patient.co.uk

Surveillance; Immunisation in children; Baby; Diabetes; Asthma; Smoking cessation; Emergency contraception; Minor surgery; and Chlamydia screenings.

Specialists: The practice employs community midwives and nurses, and health visitors. A self-employed counsellor visits once a week, more if required. A wellbeing team also visits weekly. A qualified healthcare assistant is employed for phlebotomy.

Shared services: The practice has a branch surgery situated at Northampton University, which has recently registered 600 new patients. The staff consists of 1 GP and 1 receptionist. This has proved to reduce attendance in A&E in the past.

Extended opening: The practice opens late one evening per week and Saturday mornings. Saturday morning services are well-used.

Home visits: All of the GPs in the practice do home visits. The surgery is also responsible for the local residential unit which is visited weekly and when necessary. 77% of patients never have home visits and 15% said they could get one if it was necessary to do so.

2.3 Appointment booking system

The practice offers an online or telephone system for appointment bookings. Everyone is offered a same-day appointment after triage. If a patient asks to see a specific GP it depends on the availability, which may result in a wait. The system is constantly reviewed and university students are unable to book online.

Missed appointments

There is a low rate of people not attending their appointments (Do Not Attends, DNAs) due to the services spread across both Moulton Surgery and the branch surgery at the University of Northampton.

2.4 Patient Participation Group (PPG)

The PPG is a very active group that meets during the day and holds health talks. Keeping up member numbers can be an issue. The PPG has contact with local schools and meets every two months. Events such as a coffee morning, running book stalls and a Christmas raffle are well underway. A newly-appointed GP is keen to be involved with the group. Building a Steering Group for new premises has a group member attending.

2.5 Complaints system

The complaints system is displayed on the surgery website and in the practice. Complain acknowledgments are done via letters, discussed at partners weekly meetings and dealt with by the GPs. More serious issues are referred to NHS England who will assist in managing difficult patients. There were only 19 complaints last year out of 10,000 patients.

2.6 Equality and Diversity

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

- All staff have annual mandatory training including equality and diversity.
- Always considered in staff recruitment.
- Full disabled access at all sites.
- All patients are seen on ground level.
- Interpreters always available on request.
- Learning disabilities letters sent to involve the carer or next of kin.

3. Patient experience

3.1 Appointment system

Most patients we spoke to (seven out of thirteen) found it 'OK' to get an appointment when they needed it. Three thought it was easy and two found it difficult.

Most positive or satisfactory experiences of getting an appointment mentioned the system being reliable and efficient. For example:

- Two patients said they did could get an emergency appointment on the same day.
- Five patients said that they could usually get a routine/non-emergency appointment within two to three days.
- One patient thought that the booking system was easy to use once you were familiar with it.

One of the patients who found it difficult said that they sometimes had to wait 30 minutes to be connected to a receptionist when ringing for an appointment.

Other negative points included:

- Two patients said they could wait two weeks to get a routine appointment.
- One patient said they could wait three to four weeks for an appointment.

3.2 Choice of doctor

Most patients commented that they usually got to be seen by a doctor of their choice (eight). Three patients did not get to but it did not matter to them and two patients did not get to but they would have preferred to see the GP of their choice.

- One patient explained they preferred their GP as they knew their health issues.
- One patient found it was easy to plan ahead with the doctor of their choice.
- Two patients found it was quite important to be able to see their GP.
- One patient was happy to see any doctor if they needed to see someone quickly.

- One patient was happy to see any of the GPs.
- One patient said they would have to wait to see a specific GP but didn't mind who they saw.

3.3 Treatment and quality of care and service

Most of the patients we spoke to were either usually satisfied (two) or always satisfied (nine) with their treatment (two did not answer).

We asked people what they thought could improve the quality of care. Four people commented:

- One person who said they had been coming to the practice for three years thought there were too many notices.
- One person would like to be able to talk to the GP over the phone.
- One person suggested improvements to the car park.
- One person suggested supplying water (presumably for patients in the waiting room).

We also asked people what works well:

- One patient said that the "system works well".
- Two patients said they were "very satisfied".

3.4 Communication and additional needs

Two patients said they had problems communicating with the doctors or other staff but did not tell us more. The remaining ten patients had no issues.

We also asked if any of the patients had any additional needs that required support (such as hearing or visual impairment, learning or physical disabilities, English as a second language) and whether their needs were met. One of the patients we spoke to had additional needs and explained that their needs were met.

3.5 Additional comments

We asked patients if they had any other comments to make about the practice. There were two additional positive comments and no negative comments.

Positive:

- Two people said the surgery was "brilliant" or "very good".
- One person had been going to the practice all their life.

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

lssues/pressures

Patient numbers have increased since last year due to more homes being built in the area and more students with the prospect that the Moulton area is due to increase further in size. The biggest problem is the need for new premises. Planning meetings have been established however there is not enough space for expanding clinics and GP staff on the current site. Parking is also an issue with limited space.

What works well?

There are no issues about A&E attendance. There are good back-up services and clinics provided, but these could be expanded. The receptionists run groups for carers.

4. Highlights

According to the results of both the patient survey and the National GP Patient Survey, the practice's appointment system works well for the patients and getting a standard and non-emergency appointment was fairly straightforward and easy. Most patients were able to see a doctor of their choice and all were always or usually satisfied with their treatment. Some patients found that there was sometimes a wait to make certain appointments and a lack of facilities.

5. Recommendations

- 1. Whilst most people were able to get an appointment quickly some told us they had to wait longer. The practice could look at why this is and for ways to increase appointment availability.
- 2. The practice would benefit from more funding for additional space and facilities.
- 3. We carried out deaf access mystery shopping at 5 of the 25 practices we visited across the county and have found the access and provisions for deaf and hard of hearing patients could be improved. Whilst we did not specifically assess this practice for deaf awareness and access we recommend that the practice carries out a self-assessment of their deaf access and shares the findings with Healthwatch Northamptonshire and Deafconnect with a view to improving deaf access and awareness.

6. Response from the Practice

Since the report was written the following changes relating to the above recommendations have taken place:

Recommendation 1:

"In July 2014 we carried out an "appointment mapping exercise" for a 4 week period seeking feedback from patients on the type of appointment they were looking for and waiting times. Following analysis of the results, we have amended our appointment system to offer more 48 hour appointments as requested by patients. We continually look at ways in which we can improve patient access to services - as with the large majority of practices, unfortunately the demand for services often outweighs the clinical capacity we have." Recommendation 2:

"The Practice has been identified by NHS England as one of the top priority surgeries for new premises in the area. There are issues nationally with the future funding of potential new premises which are beyond our control however we remain in discussion with NHS England."

Recommendation 3:

"We do have a hearing loop available for patients to use and all staff have been trained how to use this. We have 'deaf awareness' training booked for May 2016 for all staff."

7. Thanks and acknowledgements

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

Appendix 1 - Patient survey questions

Q1: How easy is it to get an appointment when you need it? (Please tick one)					
Very easy	Easy	OK	Difficult	Very difficult	
Q2: Please tell us more about your experiences of getting an appointment, <i>including</i>					
how it is easy or difficult, how long you have to wait to get an appointment, and					
whether the system works well for you:					
Q3: Do you usually get to see the doctor/nurse/health professional of your choice?					
Yes	No,	but I'd like to	No, but it d	oesn't matter to me	
Please tell us more about how this is important to you or not:					
Q4: Are there any problems when communicating with staff or doctors?					
Yes			No		
]	
Please tell us more:					
Q5: Are you satisfied with the treatment and service you receive here?					
Yes, always	5	Yes, usually		No	
Please tell us more	e:				
Q6: What do you think could improve the patient experience at your GP practice and					
what do you think works particularly well?					
Improvements: Works well:					
Q7: Do you have any additional needs that require support? Such as hearing or visual					
impairment, learning or physical disabilities, English as a second language, etc.					
Y	Yes		Ν	0	
			Ľ]	
If so, are they met	?				
Yes		No	[Don't Know	
Please tell us more	e:				
Q8: Is there anything else you would like to tell us?					

Appendix 2 - Practice Manager survey questions

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