

Patient Survey Report

2017/18

Each year, in conjunction with the input and agreement of our Patient Participation Group, we run a themed survey of patient opinion regarding a particular aspect of the surgery and the care that we provide to our registered patients.

In February this year we ran a survey to audit the delivery of the type of appointments that are attended by patients with a **same-day, urgent problem**.

These appointments are provided at the end of morning surgery and at the beginning of afternoon surgery as *extra* appointment slots so that patients have important access to a clinician when they feel that the need is sufficiently urgent to be unable to wait for the next available routine appointment. As these appointments squeeze the amount of available time that a GP has in the middle of the day to attend to other important tasks such as authorising prescriptions, undertaking home visits or dealing with referrals, paperwork and telephone messages, it is important that these types of appointment are used appropriately.

The purpose of the survey was therefore to validate patient perception of a same-day urgent appointment and understanding of its purpose and arrangements, and then to check in the GP's opinion whether it was accessed appropriately, or if another form of treatment could have been equally or more effective and if so what that might have been.

In this report we have shown the number of patient responses to the 7 questions we asked them, broken down by individual GP and also including some comment about what we feel these responses indicate to us. Following on from that we have taken a similar approach to the questions we asked our GPs with regards to the consultation from their perspective as a clinician.

At the end of the report we have summarised our findings and set out any actions we intend to take as a result of the survey findings this year.

Thank you to all those patient who participated in the survey this year. We hope all our patients will find the survey interesting and informative.

Practice Manager

The questions we asked our patients about their consultation

- Abbreviation key: NM – Dr BN Macdonald, RH – Dr RI Heaney, SL – Dr S Ladha, NH – Dr N Hankins, EB – Dr E Barnes
- Number of responses to the question are noted below the clinician's initials - all questions were not always answered so the total number of responses will not correspond throughout the survey

Question 1

Are you aware that your appointment today is a same-day, urgent appointment i.e. not a routine appointment ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	14	13	8	16	18	69 (100%)						
<i>Practice comment</i>	It is good that all our patients understood that they were attending a same-day urgent appointment rather than a routine appointment.											

Question 2

Did you ask for a same-day, urgent appointment when you contacted our reception team ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	12	12	6	14	14	58 (85%)	2	1	1	2	4	10 (15%)
<i>Practice comment</i>	The vast majority of our patients specifically asked for a same day urgent appointment – this means that they felt the problem was sufficiently important to request urgent GP attention – how does that match the GP's perspective? see Q10 below Our reception team are not medically trained to make a clinical judgement but will guide a patient to an urgent appointment based on the reason a patient states for needing an appointment during the call.											

Question 3

Do you feel that your problem needs to be discussed today, earlier than the next available routine appointment ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	14	13	7	16	18	68 (98.5%)			1			1 (1.5%)
<i>Practice comment</i>	Overwhelmingly, patients felt that their problem was sufficiently important to need a same day urgent appointment – how does that match the GP's perspective? see Q10 below											

Question 4												
Do you feel that your problem could be managed at this point through other means; the advice of a pharmacist, a period of rest and / or fluids ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
							14	13	7	16	18	68 (100%)
<i>Practice comment</i>	Everyone felt that their problem could only be resolved by access to a GP. What was the GP's perspective on that? see Q10 / 11 below											
Question 5												
As an urgent appointment are you aware that you are booked with the next available clinician at the next available time i.e. that it is not possible to specify a particular time or GP ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	13	12	7	14	18	64 (94%)	1	1		2		4 (6%)
<i>Practice comment</i>	An urgent appointment is accommodated as an extra appointment at the end of already full surgeries – as such a patient requiring this type of appointment will not have a choice of time or GP. The majority of our patients have confirmed that they are aware of that.											
Question 6												
Are you aware the this appointment is typically 5 minutes in length to deal with an urgent complaint only ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	13	12	8	16	18	67 (97%)	1	1				2 (3%)
<i>Practice comment</i>	It is good that the majority of patients understand the nature of the appointment they have accessed											
Question 7												
Are you aware that same day, urgent appointments are at the end of morning surgery and therefore may be subject to a delay if the clinician is overrunning ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	13	10	7	14	15	59 (89%)	1	3	1	2		7 (11%)
<i>Practice comment</i>	It is good that the majority of patients understand the nature of the appointment they have accessed											

The questions we asked our GPs about their consultations

Question 8

Did you make the patient aware that they were being seen in an urgent, same day appointment ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	14	1	1	16	18	50 (74%)		12	6			18 (26%)
<i>Practice comment</i>	Although the earlier responses demonstrate that our patients understand the appointment type that they had accessed, it is good that our clinicians generally reiterate that so that there is focus on using the time appropriately for an urgent issue.											

Question 9

Did the patient understand the purpose of the appointment i.e. for an urgent problem needing immediate attention ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	14	10	8	16	18	66 (100%)						
<i>Practice comment</i>												

Question 10

Was the appointment accessed appropriately ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
	13	10	7	12	12	54 (82%)	1		1	4	6	12 (18%)
<i>Practice Comment</i>	The majority of patients accessed the appropriately but the GP considered that a small percentage could have taken different action. Although the sample numbers are small these results are in line with our GP team's general experience.											

Question 11												
If the appointment was inappropriately accessed what should the patient have done ?:	NM	RH	SL	NH	EB	TOTAL						
				1								
				3	4							
			1	1	4							
	Other	1*										
							*complex problem appropriate only for routine apt with usual GP					
<i>Practice Comment</i>												
Question 12												
If the appointment was accessed inappropriately did you educate the patient for future purposes ?	YES						NO					
	NM	RH	SL	NH	EB	TOTAL	NM	RH	SL	NH	EB	TOTAL
		1	1								4	
<i>Practice Comment</i>												

General patient comments included in the responses :

- ***If pharmacists could prescribe to treat infection it would reduce pressure on GP surgeries.*** Pharmacists are an excellent source of advice and can suggest a wide range of over the counter medication that may be appropriate, or alternatively give you advice about contacting your GP if a prescription is required.
- ***I don't appreciate being made to feel guilty for requesting a same day apt for my 6 month old when the next routine apt is in 5 days. I would have been happy to see someone later or even the next day.*** The purpose of the survey was not to make people attending a same-day appointment feel guilty, simply to gauge understanding of the nature of those appointments and whether they were being used appropriately. A same-day appointment is not to enable quicker access to a GP because the next routine apt involves a wait and is protected access for those that genuinely need to be seen quickly. In this case the GP assessed the appointment as appropriately accessed as same-day.

Results

The results of the survey overwhelmingly demonstrated that our patients understand that a same-day, urgent appointment is:

- to enable them to seek attention for something they consider urgent and cannot wait until the next available routine appointment
- will be with the next available GP on the day they need to be seen rather than with a choice of GP
- will be at the end of morning surgery or at the start of afternoon surgery (i.e. not at a choice of time) and may be subject to delay
- around 5 minutes in length to discuss an urgent problem

Actions we will take :

1. All of our patients surveyed felt that their problem could only be resolved through access to a GP, whereas from the GPs perspective almost 20% of those patients they saw could have had their problem resolved through other means; a pharmacist, rest, fluids or self-medication. Admittedly the survey sample was small in number but this perception is generally in line with the general experience of our GP team. We will update our appointments leaflet to include reference to alternative routes to care that may be appropriate for our patients to consider.
2. The resources that we have at our disposal are finite, particularly in terms of appointment time and the number of people that we have to deliver our services. It is important that we educate our patients to use these resources responsibly as well as providing high standards of care. Our GP team will continue to encourage patients to consider alternative means for accessing care when they have been seen in an urgent appointment that was not necessary from the perspective of the clinician.