

PRACTICE IMPROVEMENT QUESTIONNAIRE ACTION PLAN

March 2014

Report for Ratcliffe Rd Atherstone Surgery

Overall Summary

This report has been produced as a result of the 'improving the practice questionnaire' recently completed by the patients of the Surgery. It is apparent from the survey that the overall satisfaction with the practice is high, however, there are opportunities to raise the satisfaction level still further and improve the overall patient experience, I am please to say that satisfaction overall with the practice still remains high and indeed has shown some improvements since last year.

Primarily, the report pays attention to the opportunities for improvement since this was the focus of the questionnaire and there would be no point in calling the survey an improvement survey if all it was intended to achieve was confirmation of the good service area's.

Therefore the weaknesses identified should be read with this in mind.

This report should be read in conjunction with the report containing the results.

Approach of this report

Consider the questionnaire objectives and using the data derived from the respondents, identify where most gains can potentially be made for the benefit of the patients.

To understand why the weaknesses identified matter, for each weakness identified, the potential impact on the patient or the practice is considered.

To suggest solutions for improvements that will require little or no capital investment and to highlight those area's that may require a budget and therefore need business priotitisation.

Conclusion, the customer service area's that require improvement:

- Communication of results
- Access to appointments
- Promotion of self check in system to reduce queues at the desk.

The survey indicated that once booked in to see a doctor and through the door most respondents are highly satisfied with the surgery. However, the patient experience leading up to that point does require some review.

Weakness

What this means for the patient

The perception is that it takes too long for the phone to be answered by a human.

They are getting frustrated and initial contact with surgery has been a bad experience.

Appointment availability

Patients at this practice have a high expectation of seeing their own doctor. Unfortunately due to the change of the way in which we have to work and the skill mix needed to run a very busy practice the whole health economy will need to adjust to a new world of general practice.

The attitude of some staff, some of the time was commented upon

Again its down to perception and not the staff. If their day has started badly and presumably it has because they are at the surgery any 'slight' will be exaggerated. Good customer service will recognise this issue and recognise that the patients intention is not to be difficult but to be seen.

The relaying and management of test results has fallen again this year. We are unsure where the weakness lies, however, effort will be made by all concerned to improve this experience.

Anxiety in the first place because people hope for the best and expect the worst! The fact that this score has declined means that there is a weakness somewhere in the system which needs to be investigated.

Appointment issues

The survey indicated that the overall consultation experiences were excellent and was the highest scoring category.

However, securing the appointment in the first place, with a practitioner of the patients choice appeared to cause some frustration.

Weakness	What this means for the customer
<p>The length of time between seeking and getting an appointment with a doctor of choice is perceived to be long.</p>	<p>Worry. Not cared about. These are natural responses when an issue superficially appears to be more important to one person than another. Appointment delays can't be helped. For patients as a whole, up to 6 patients can be seen at the surgery for every one patient who receives a home visit, therefore appointment availability will decrease with every home visit requested.</p>
<p>Home visits are not as easy to obtain as some people would like.</p>	<p>Responsibility for their health has been passed over to someone else who knows less about them, however they are grateful that someone is there.</p>
<p>The out of hours service had a broad cross section of satisfaction.</p>	<p>Explanation about the service and the knowledge of what the out of hours service has access to about them may alleviate most of the worries. The introduction of the 111 service should provide another layer of health care which the patient can access easily.</p>

The survey indicated that once booked in to see a doctor and through the door most respondents are highly satisfied with the surgery. However, the patient experience leading up to that point does require some review.

Weakness	What this means for the customer
<p>The waiting area was commented upon although this wasn't a specific survey question.</p>	<p>I'm already ill, I feel worse. Patients state that their surroundings do make a difference. The reason private sectors spend such a large amount of money on décor is obvious and we all know that new, modern and clean looking environments make a big difference to perception of service.</p>
<p>Car parking was commented upon although again not a specific question</p>	<p>Car parking is unfortunately out of the control of the surgery. Improvements have been made this year, in year, however we still have significant negative feedback.</p>

High Level Proposed Plan	Time	Impact	Start
<p>People see more of what they expect to find or focus on; so if the initial experience or expectation from a previous visit is low, typically patients will seek to support this view and find evidence to support it.</p> <p>From the survey it is evident that the last impression of the surgery is usually good <i>if</i> that last interaction resulted in seeing a medical person.</p> <p>The people we most need to influence and manage the perceptions of are those who last interaction was to either seek information, use the phone system or try to make a booking. These are the people who will be starting from a negative view point and it is important to stress here that the survey shows this is not because the initial front line staff scored badly, they didn't they scored highly. Unfortunately though, the processes between the non human and human interactions are getting in the way of an excellent overall score.</p> <p>The relative responses by age category was also considered and even though predominantly more of the age group 25-55 answered the survey, the normalised results indicate consistent perception of the infrastructure/technology aspects of the practice.</p>			
Agree format and develop feedback to the surgery patients	1 week	High	immediate
Review best practice customer service guidelines. Ensure phones are answered in a timely manner.	Ongoing	Medium	immediate
Further encourage patients to use automated check in to cut down queues at receptions	Ongoing	Medium	immediate
Review automated telephone system – data cleansing exercise	Ongoing	High	Next staff meet
Review what 'cosmetic' improvements can be done to improve first impressions and waiting experience	1 week	medium	Quick win & later cost potential
Be willing to listen to patients feedback regularly and take on board comments and suggestions and make alterations where possible and where easily able to do.	Ongoing	High	Quick win