# Patient Focus Group Report and Action Plan 2016/17

**Introduction**

Swan Lane Medical Centre lies in Great Lever and is part of the South East Cluster of GP Practices in Bolton, and has approximately 8000 patients. The practice has three GP Partners; Dr M Arya (F), Dr P Nixon (M), and Dr M Choksi (M) and one Nurse Practitioner who will commence employment with the Practice on the 1st June 2016. The Nursing Team consists of three Practice Nurses and two Health Care Assistants who run daily surgeries for chronic disease management, phlebotomy, learning disabilities, carers, and NHS health checks. The Practice list is open and accepts registrations to patients living within the practice boundary, and also accepts Out of Area Registrations. The surgery is open six days per week, and opening times are as follows:-

|  |  |  |
| --- | --- | --- |
| **Day** | **Opening Hours** | **Extended Opening Hours** |
| Monday | 8 am – 6.30pm |  |
| Tuesday | 8 am – 6.30pm |  |
| Wednesday | 8 am – 6.30pm |  |
| Thursday | 8 am – 6.30pm |  |
| Friday | 8 am – 6.30pm |  |
| Saturday |  | 8am – 12 noon |

We operate extended hours on Saturday mornings as part of the Direct Enhanced Scheme.

Available appointments include:

|  |  |
| --- | --- |
| Routine appointments | Pre-bookable up to 8 weeks in advance with both GPs and nursing staff |
| Emergency appointments | Available on the day with some appointments being triaged by the Duty Doctor |
| Phlebotomy | Appointments with the Health Care Assistants daily, bookable in advance |
| Child immunisation clinic | Tuesdays, open clinic 9am – 11.30am |
| Post Natal Clinic | Mondays 2pm – 3pm |
| Chronic disease clinics | Daily with the nurses |
| Minor Surgery | Daily with the nurses and a GP |
| Anticoagulant Monitoring | Wednesday or Thursday mornings |

Appointments may be booked by telephoning the surgery from 8.00am – 6.30pm Monday to Friday, or can be booked online for both the GPs and nurses. Patients may request to see a doctor of their choice.

When the surgery is closed, patients are advised to contact the Out of Hours Service. This information is communicated via the Practice answerphone message, Opening Hours notice by the front door, and on the Practice website.

**Specialist Services**

Our specialist services include:-

* Anticoagulation monitoring
* Diabetes and insulin monitoring
* Minor Ops and Joint injections
* COPD reviews
* Post natal clinic
* Weekly Nurse clinics with Gujurati/Hindi/Urdu translators present
* Chronic disease management

**Patient Focus Group and Virtual Patient Reference Group**

The Practice has worked alongside the Patient Focus Group members and the Virtual Patient Reference Group members during the last three years, and we would very much like to acknowledge their help and input into Practice improvements.

The Patient Reference Group was formed in 2005 ensuring that patients are involved in decisions regarding the quality and range of services provided by the Practice. The group currently has 9 members of a varied age range, gender, and ethnicity. This group meets quarterly throughout the year.

During 2012, the Practice recognised the need to have greater input from a wider group of patients and to reach patients who may not be able to attend the Patient Focus Group Meetings. This approach has proven popular with patients and a Virtual Patient Reference Group was established, which to date has 400 members.

# Patient Involvement In the Last Two Years

**Patient Involvement 2014/15**

The NHS Guidance for Patient Involvement for 2014/15 was altered, and for 2014/15 involved action planning around any themes identified in any patient feedback or also any Practice objectives set for the year.

A Patient Focus Group meeting was held on the 3rd June 2014 to review feedback received and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, practice complaints received, and suggestions received from patients were reviewed. Feedback identified the following potential areas for including with the 2014/15 Action Plan:-

* Two issues around emergency appointments for children, though one directly related to telephone problems, and one was felt to have been dealt with appropriately.
* One comment regarding delays in answering the telephones.
* One issue with a follow up appointment being booked in with the wrong GP.
* Four comments around GP appointment wait being too long.
* Four occurrence of not having been treated with dignity and respect by the receptionists.
* One comment relating to difficulty hearing the tannoy system well.
* One comment around Nurse appointment wait being too long.

During the Patient Focus Group meeting, the following Practice objectives were also considered for inclusion within the 2014/15 Action Plan:-

* Implementation of the new Electronic transfer of Prescription facility for patients
* Introduction of the new online patient access to medical records
* Implementation of the Admission Avoidance Scheme
* Implementation of the Named GP for patients over 75 years of age
* Introduction of annual Carer’s Reviews

Following much discussion around patient feedback themes and practice objectives, the Patient Focus Group decided to include the following within the 2014/15 Action Plan:-

1. Consideration of a new telephone system
2. Promotion of online facilities and ETP using a different approach
3. Promotion of Carer’s Review and identification of carers

## 2014/15 Action Plan

**Promotion of the Electronic Transfer of Prescription Facility, Online Prescription Ordering and other Online facilities**

At the time of the Patient Focus Group meeting in June 2014, the Practice had 559 registered SystmOnline users. During June 2014 the Practice implemented online patient access to their medical records, and the Electronic Transfer of Prescription Facility (ETP) will become live in July 2014. ETP had previously been identified by the Patient Focus Group members as an area to include in the Action Plan once the facility became available, and it was therefore felt appropriate to now include it in the 2014/15 Action Plan. Given that repeat prescriptions can be ordered online, and in addition the new functionality for online patient medical record access, the Patient Focus Group asked that promotion of ETP and the Online facilities were considered as one area within the Action Plan.

It was felt that the Practice had exhausted the usual methods of promotion for Online Facilities, and that a new approach would be required. The following approach was agreed by members:-

* Greater use of clinicians during appointments, to ask patients if they have registered for the online facilities, and to ask a receptionist for a user name and password when exiting the waiting room.
* To organise a Practice event specifically to promote to patients, ETP and online facilities. It was felt that this should be when the Practice is not running clinics, and that material/presentations should be made ready for the event with Patient Focus Group members available to attend also.
* Greater promotion of the online facilities targeted specifically at patients with chronic diseases

**Improved Telephone System**

The Practice had received in the last 12 months, two complaints regarding incoming phone calls made during opening hours, and the patient’s were provided with the Out of Hours Message.

Additionally feedback has been received regarding the delay in answering the telephones.

Over the previous 24 months, it was also noted that the telephone system has not always been robust during power cuts, and that there have been occasions when power has not resumed quickly leaving the Practice with no Out of Hours telephone message over the weekend. This has been due to a combination of problems such as having a majority of powered telephone lines, no facility to transfer incoming calls quickly to the one analogue line within the practice, and no facility to engage a telephone message announcement onto the analogue line should the power cut.

Currently the Practice’s telephone system has no management audit facilities to look into dates/times of incoming phone calls from specific telephone numbers which can be problematic when dealing with a complaint involving telephones, nor can the system provide information on peak demand times to enable increased staffing levels to match the demand. Additionally there is no information provided to identify the average response times, or how many patients hang up due to calls being unanswered. There are no facilities to enable unanswered calls to be forwarded to other staff member telephones to answer after an agreed amount of time waiting.

It was agreed to look into alternative telephone systems with the following functionalities:-

* Full management audit package enabling audit of incoming telephone numbers with dates/times received, average response times, number of unanswered phone calls.
* Mixture of analogue and web based lines, and facilities to manage in-house auto diverts between the two systems, and to manage the telephone messages played onto which system, should the power cut.
* Call queuing facilities/announcements.
* Auto divert to other staff telephones should response times be higher than expected.
* Full recording facility for all incoming/outgoing calls.
* Preferably hands free system to help avoid current problems with the tannoy announcement not quite ending if the hand set is not replaced fully (due to tangled wires) or alternatively a different design of telephone that would lessen the chance of tangled wires.

**Introduction of Carer’s Review Recall, and introduction of systems to identify carers**

It was noted that the Practice had not routinely been offering Carer’s Reviews through formal recall systems and that this was now to change. In addition, it was acknowledged that the Practice had not been as active as it could have been at identifying carers. At the time of the Patient Focus Group meeting in June 2014, the Practice had 100 registered Carers.

The Practice agreed to:-

* Identify patients coded as carer’s and contact them to establish whether this was still the case.
* Put in place an annual recall for a Carer’s Review for those that are carers.
* Involve Bolton Carer’s Support in a Practice Nursing meeting to go through what should be included within the review
* Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion at the Practice’s Information Day; dedicated noticeboard within the Practice; website newsletters and articles; corresponding by email to the Virtual Patient Reference Group; articles in the Practice Newsletter.

**Outcomes 2014/15**

1. **Promotion of the Electronic Transfer of Prescription Facility, Online Prescription Ordering and other Online facilities**

The Practice held an Open Day on Saturday 13th September 2014 from 12 noon – 4pm. This was widely publicised through practice newsletters, the practice website, in the waiting room, on prescription counterfoils, and through emails. The event was attended by low numbers, but those that did attend provided very positive feedback. There was a prize raffle of a £25 shopping voucher drawn for those that attended. The Open Day had 7 topics held in individual consulting rooms and patients were provided with one-to-one information and demonstrations of the following:-

* ETP and online ordering of prescriptions – local pharmacists also attended these sessions to enable sign up of patients to their services and to provide a pharmacist perspective.
* Email & Text facilities and the benefits of these services – patients were provided with consent forms for completion and clinical records updated to enable functionality.
* Access and promotion of online facilities such as booking appointments, viewing patient summary record – patients were provided with user name and passwords and registrations were done with the patient to enable functionality. Demonstrations were provided on how to use these services.
* An overview of information provided through the Practice website was also provided through one-to-one demonstrations.
* Bolton Carers Support Group were present and available for carers to discuss issues and register with them.
* Practice Nurses were available to promote flu & shingles vaccinations and general lifestyle advice.
* The practice clinical research nurse was also available to promote the Practice’s current clinical trials and provide information for those interested in recruitment.

During the year, nursing staff have promoted online facilities to patients attending for chronic disease reviews and receptionists have promoted facilities opportunistically where it became apparent that some of the services would have benefitted the patient.

*Results:*

ETP was introduced in July 2014. The latest utilisation figures for Dec 2014 show the Practice is producing 28% of its prescriptions through the ETP method. This is a higher than average percentage compared to other Practices in the Bolton area. Promotion of this service continues as it has huge benefits to both patients and to the Practice.

In June 2013 the Practice had 184 patients consented to be contacted by email. This has increased and continues to increase slowly. In January 2015 we have 315 patients consented to be contacted by email which represents 3.9% of the practice population.

In September 2013 the Practice had 428 patients consented for contact via SMS Text messaging. In March 2014 this had grown to 550 patients, and in January 2015 this now stands at 700 patients (8.6% of the practice population).

The Practice had in July 2014, 572 registered online services users. In January 2015 we have 632 patients registered and using the online services, which represents 7.8% of the practice population. The annual patient satisfaction survey carried out in November 2014 asked how many patients normally book their appointments online – the survey confirmed that 4% of respondents preferred to book them online. While only a small number, we are pleased to see that this is growing inasmuch as 2013 survey results showed that 2% of respondents booked them online.

1. **Improved Telephone System**

We have been reviewing the telephone system and costings in more depth. However given various financial uncertainties for 2014/15, and the fact that the recent annual practice survey does not highlight issues with “ease of getting through to the Practice by phone”, the Partners do not feel that it is currently viable to invest in a new telephone system.

1. **Introduction of Carer’s Review Recall, and introduction of systems to identify carers**

Throughout the year the Practice has increased it’s promotion of the Bolton Carers Support Service and identification of carers by the following methods:-

* Bolton Carers Support Service attending the Practice Open Day
* Regular updates of the Bolton Carers Support Newsletters on the Practice’s web site
* Practice nurse education provided by Bolton Carers Support
* Dedicated Carers Noticeboard in the Practice
* Carers identification forms are forwarded to patients whenever a recall letter is being posted
* Articles have been provided in the Practice Newsletters
* Verification of the Practice’s carers register was performed in August 2014 to ensure that it was up-to-date
* Patients consented to email contact, were emailed asking any carers to identify themselves

In June 2014 the Practice had a carers’ register of 100 patients. This was out of date, with many identified carers no longer being a carer. Verification was provided which reduced the size of the register marginally. Improved promotion and identification processes throughout the year have ensured we have increased the register size, and in January 2015 the register has 148 carers (1.8% of the practice population).

It is acknowledged that this figure remains on the low side, but it is hoped with continued promotion and identification that this will be built upon further.

An annual review for Carers was introduced from April 2014, and a formal recall system is in operation for this review, though uptake of the annual review is low with only 24% of carers having received a review as at January 2015.

**Patient Involvement 2015/16**

A Patient Focus Group meeting was held on the 28th April 2015 to review feedback received and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, Friends & Family Test results, practice complaints received, and suggestions received from patients were reviewed. Feedback identified the following potential areas for including with the 2015/16 Action Plan:-

* One issue around an appointment being booked over the telephone which was found not to have been booked.
* One issue regarding a temporary resident registration and the duration of registration.
* One miscommunication issue resulting in the patient waiting in surgery for several hours.

During the Patient Focus Group meeting, the following Practice objectives were also considered for inclusion within the 2015/16 Action Plan:-

* Improved usage figures for the new Electronic transfer of Prescription facility
* Improved usage figures for those registered for online patient access facilities
* Implementation of the Named GP for all patients
* Improved size of Carer’s Registers
* Compliance with the new Bolton Quality Contract and targets within

Following much discussion around patient feedback themes and practice objectives, the Patient Focus Group decided to include the following within the 2015/16 Action Plan:-

1. To continue to promote the online access facilities and number of patient registrations
2. To continue to promote the email/SMS texting facilities
3. To continue to actively seek out Carers unknown to the Practice

## 2015/16 Action Plan

**Promotion of the Online facilities**

In January 2015 the Practice had 632 registered SystmOnline users. While the number of registered online users were growing, the Patient Focus Group felt that the growth was slow and there was an agreement that many more patients would be interested in using the facilities if they were more aware of them.

It was felt that the Practice had tried to promote these facilities for a while, but that promotion was targeted more to the patients that regularly use the services and was not reaching patients that never use the services.

The following approach was agreed by members:-

* Greater use of clinicians during appointments, to ask patients if they have registered for the online facilities, and to ask a receptionist for a user name and password when exiting the waiting room.
* Greater promotion of the online facilities targeted specifically from receptionists when speaking with patients
* Introduce a Facebook account to promote these services (and other national/local campaigns) aimed at targeting patients who do not regularly attend or contact the Practice
* Continued promotion of the online facilities through existing channels of communication such as newsletters/practice website/waiting room tv messages/waiting room displays.
* To continue to promote the email/SMS texting facilities

**Continue to promote Email/SMS Texting facilities**

In June 2013 the Practice had 184 patients consented to be contacted by email. In January 2015 this had grown to 315 patients consented to be contacted by email which represented 3.9% of the practice population. Email contact is currently being used for chronic disease recall appointments, and patient involvement with services or promotion of services. The Patient Focus Group felt that growth was slow and that again promotion was targeted at those that regularly contact the Practice, rather than those that do not.

In September 2013 the Practice had 428 patients consented for contact via SMS Text messaging. In March 2014 this had grown to 550 patients, and in January 2015 this was 700 patients (8.6% of the practice population). Text messaging is being used for appointment confirmations and promotion of services.

The following approach was agreed by members:-

* Increase the number registered for these facilities through continued promotion in letters being posted from the Practice; promotion through Facebook; website newsletters and articles.
* Promotion through receptionists offering appointment confirmations to be forwarded by text.

**Systems to identify unknown carers to the Practice**

At the time of the Patient Focus Group meeting in June 2014, the Practice had 100 registered Carers. In January 2015 the Practice had 148 registered Carers. The Patient Focus Group members felt that there were still many more unknown carers to identify, and that language difficulties could be a barrier to existing promotional material, etc.

The Practice agreed to:-

* Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.
* Update the Carers Notice Board with some information translated into Gujurati.
* Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

**Outcomes 2015/16**

**Promotion of the Online facilities**

In January 2015 the Practice had 632 registered SystmOnline users. While the number of registered online users had been growing, the Patient Focus Group felt that the growth was slow and there was an agreement that many more patients would be interested in using the facilities if they were more aware of them.

It was felt that the Practice had tried to promote these facilities for a while, but that promotion was targeted more to the patients that regularly use the services and was not reaching patients that never use the services.

The following approach was agreed by members:-

• Greater use of clinicians during appointments, to ask patients if they have registered for the online facilities, and to ask a receptionist for a user name and password when exiting the waiting room.

• Greater promotion of the online facilities targeted specifically from receptionists when speaking with patients

• Introduce a Facebook account to promote these services (and other national/local campaigns) aimed at targeting patients who do not regularly attend or contact the Practice

• Continued promotion of the online facilities through existing channels of communication such as newsletters/practice website/waiting room tv messages/waiting room displays.

• To continue to promote the email/SMS texting facilities

As of the 1st April 2016, the Practice now has 669 registered SystmOnline users which is 8.3% of the patient population. In January 2015, figures represented 7.8% of the patient population. As can be seen, only a small growth over the year has been achieved despite promotion of services through a multitude of methods.

**Continue to promote Email/SMS Texting facilities**

In January 2015 the Practice had 315 patients consented to be contacted by email which represented 3.9% of the practice population. Email contact is currently being used for chronic disease recall appointments, and patient involvement with services or promotion of services. The Patient Focus Group felt that growth was slow and that again promotion was targeted at those that regularly contact the Practice, rather than those that do not.

In January 2015 the Practice had 700 patients (8.6% of the practice population) registered for contact via SMS Text messaging. Text messaging is being used for appointment confirmations and promotion of services.

The following approach was agreed by members:-

• Increase the number registered for these facilities through continued promotion in letters being posted from the Practice; promotion through Facebook; website newsletters and articles.

• Promotion through receptionists offering appointment confirmations to be forwarded by text.

As of the 1st April 2016, the Practice now has 352 patients registered for contact via email which is 4.3% of the patient population. A small growth of 0.4%.

As of the 1st April 2016, there is now 1027 patients registered for contact via SMS text messaging. This represents 12.7% of the patient population and provides a growth of 4.1% which the Practice is really pleased with.

In addition to communicating to patients via text and email, we are now able to communicate via the clinical system directly into the SystmOnline patient accounts. This is a more secure method of communication as messages are user name and password protected. Communication via this method also allows attachments to be included, and are integrated into the clinical record allowing patients to respond which is also integrated into the patient record.

**Systems to identify unknown carers to the Practice**

At the time of the Patient Focus Group meeting in June 2014, the Practice had 100 registered Carers. In January 2015 the Practice had 148 registered Carers representing 1.8% of the patient population. The Patient Focus Group members felt that there were still many more unknown carers to identify, and that language difficulties could be a barrier to existing promotional material, etc.

The Practice agreed to:-

• Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.

• Update the Carers Notice Board with some information translated into Gujurati.

• Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

We are particularly delighted with the results. As of 1st April 2016 the Practice now has 190 registered Carers which represents 2.3% of the practice population. The CCG’s Bolton Quality Contract had set all Bolton Practices a target of achieving 2% of registered patients, which was exceeded.

In addition, annual health checks for carers were introduced from April 2014 but the Practice was disappointed to see uptake figures in January 2015 of only 24%. We are pleased to note that this year we provided health checks for 78% of carers, by offering home visits where carers were unable to leave the cared for people alone.

**Patient Involvement 2016/17**

A Patient Focus Group meeting was held on the 26th April 2016 to review feedback received, new NHS England requirements, the Bolton Quality Contract standards and Practice objectives set for the year.

Feedback received from NHS Choices website, the Practice Website, Friends & Family Test results, practice complaints received, and suggestions received from patients were reviewed. Feedback did not identify any particular trends or themes.

During the Patient Focus Group meeting, the following NHS England aims or requirements were also considered for inclusion within the 2016/17 Action Plan:-

* To aim for 10% of the registered population to have access to one or more online services (the practice currently has 8.3%).
* To aim for at least 80% of repeat prescriptions to be transmitted electronically (currently achieving 68%).
* Introduction of the online access to medical records service
* Introduction of the new accessible communication standards

The following Bolton Quality Contract standards were also considered for inclusion within the 2016/17 Action Plan:-

* To continue identifying Carer’s aiming for identification of at least 3% of the patient population.
* To ensure military veterans are recorded on the clinical system and improve systems for recognition of this.
* To improve on the number of Chlamydia screening provided to those age 15-24 year old.
* Improving patient satisfaction regarding ease of getting through to someone at the surgery on the telephone.

There was also much discussion around the use of new technology available from May with the introduction of Iplato software replacing the current SMS text messaging software. Iplato provides a two way messaging system that would automatically read code into patient’s clinical records and enable appointments to be cancelled directly into the clinical system when forwarding an SMS text message reminder of appointments booked.

Following discussion it was agreed that the new access to online records service, should be focussed upon as anyone signing up for this service could potentially also increase the number of registered patients having access to one or more online services.

The Patient Focus Group decided to include the following within the 2016/17 Action Plan:-

1. To continue to promote the online access facilities and number of patient registrations via marketing the new access to online medical records facility
2. To continue to actively seek out Carers unknown to the Practice and achieve the 3% of patient population target
3. To ensure military veterans are recorded on the clinical system and improve systems for recognition of this
4. To maximise the use of Iplato software for greater patient convenience and better practice administration

## 2016/17 Action Plan

**Promotion of the Online facilities through marketing of the online medical records facility**

* Display posters throughout the Practice – on clinical doors, and in the waiting room.
* Put a link to the Youtube video on both the Practice website and Facebook account providing patient perspectives as to the benefits of access to their medical records.
* Place leaflets in all new patient registration packs.
* Put information on the website about how to register for the online services.
* Include details on the counterfoil of prescriptions
* Use systmonline messaging facility to inform patients already registered for online services, of the new functionality.
* Put information into all chronic disease recall letters being posted to patients.
* Try to target patients with specific diseases or young mums, via newsletter articles encouraging them to use the online access to their medical record as a tool to better control their illnesses.
* Ongoing media opportunities – photo opportunity with 1st patient to have signed up to use the service, and the 100th etc. for newsletter, facebook, etc.
* Use the Iplato software to inform patients of the new services.

**Systems to identify unknown carers to the Practice**

* Invite Bolton Carer’s Support Group to promote their service and help with identification of carers from in the waiting room, with the Practice supplying multi-lingual staff to translate.

• Increase the number of identified carers through; including a carer’s identification letter within any letters being posted from the Practice; promotion through Facebook; dedicated noticeboard within the Practice; website newsletters and articles.

**To ensure military veterans are recorded on the clinical system and improve systems for recognition of this**

* Update influenza consent forms to ask patients if they are military veterans
* Update new patient questionnaire to enable identification of military veterans registering with the Practice
* Increase the number of identified military veterans through promotion via Facebook; newsletters and articles.

**To maximise the use of Iplato software for greater patient convenience and practice administration**

* To text message appointment reminders that enable patients to cancel the appointment by touch button technology – this should be more convenient to patients as a method of cancelling an appointment, and should hopefully reduce the number of patients who do not attend appointments by as much as 25%.
* To text message vaccination invitations to appropriate patient population groups that enable the patient to decline, which will then automatically inform the electronic patient record – this should be more convenient to patients rather than forwarded a written decline and will reduce the amount of administration time required to follow up patients that the practice does not receive a response from.
* To text message chronic disease recalls to appropriate patient population groups that enable the patient to decline, which is then automatically coded in the electronic patient record – this should provide an easier method for patients to decline a review, and will reduce the amount of administration time needed to follow up patients that the practice does not receive a response from. In other areas, use of Iplato for this has proven to increase uptake rates for patients attending reviews.
* To text message patients with the Friends and Family test, once a patient has consulted with a GP or nurse – this will provide an alternative method for patients to quickly submit their responses rather than the current methods of online submission through the practice website, or by manually completing a form while in the Practice.
* To help keep patient medical records updated with their latest health data such as smoking status.