

# **Patient Experience Survey**

Produced by the  
Patient Participation Group  
After Consultation with The Patient Reference Group

March 2012

## **EXECUTIVE SUMMARY**

Chineham Medical Practice (the Practice) provides services for 10,666 registered patients. The Practice was required to undertake and report on a patient experience survey as part of the Patient Participation enhanced service specified by Hampshire Primary care Trust. The Practice wished to gather insights and opinions to identify where improvement activities could be of most benefit. A descriptive survey approach was adopted for this purpose

This report summarises the outcome of the questionnaire survey amongst members of the general public registered at the Practice. The total survey sample population of 484 included two groups of people, 70 members of the virtual Patient Reference Group (PRG) and any member of the public who attended the Practice 17 – 23 March 2012, whilst members of the Patient Participation Group (PPG) were available to administer the questionnaire survey tool. 480 completed surveys equivalent to 4.5% of the registered population were obtained from this exercise.

The findings indicate there are opportunities to improve aspects of the service and the communication with the registered public which is likely to have a beneficial impact on patients experience of services. The outcome will be used to inform discussion between the Patient Participation Group and the Practice about service improvement priorities in the coming months.

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## ACKNOWLEDGEMENTS

Without the individual co-operation and support of members of the public who willingly completed survey responses Saturday 17 March 2012 and Friday 23 March 2012 this survey could not have been completed. Their input is much appreciated and has provided valuable insight to assist the Patient Participation Group in discussions with the Chineham Medical Practice about important areas of service improvement.

## **1. INTRODUCTION**

- 1.1 Chineham Medical Practice (the Practice) provides services for 10,666 registered patients. The Practice was required to undertake and report on a patient experience survey as part of the Patient Participation enhanced service specified by Hampshire Primary care Trust. This report summarises the outcome of the questionnaire survey amongst members of the general public registered at the Practice. The outcome will inform the service improvement plans assessment of need, the core function and advise the way forward

## **2 METHODOLOGY**

- 2.1 The Practice wished to gather insights and opinions to identify where improvement activities could be of most benefit. A descriptive survey approach was adopted for this purpose. It was recognised that although this fact finding emphasis would not establish causal relationships, it would reveal individual perceptions of experience.

## **3. SAMPLE**

- 3.1 The total survey sample population of 484 included two groups of people. The first group included an invitation to the 70 people who had made a prior arrangement to sign up to a virtual patient reference group (PRG). The second group included any member of the public who attended the Practice 17 – 23 March 2012, whilst members of the Patient Participation Group (PPG) were present to administer the questionnaire survey tool. The PPG representatives covered a total of twenty four hours spread across the week and covered each of the six days at different times.
- 3.2 The questionnaires were distributed electronically to the 70 members of the (PRG). The questionnaires were provided in hard copy to patients in the waiting area by the PPG representatives. 4 questionnaire forms were returned incomplete. The limited contents have been excluded from this report which is based on responses from 480 people.

## **4. ETHICAL CONSIDERATION**

- 4.1 Ethical considerations protecting individual identity were addressed in several ways. Since the questionnaire survey was completely anonymous no individual information identifiable information was recorded. The email to the PRG was managed by one person at the practice and anonymous responses were printed for analysis. Voluntary participation was noted in the Practice waiting area, although people were encouraged to “have their say” and contribute.

## **5. INSTRUMENTS**

- 5.1 Although template questionnaire tools were provided by the Primary Care Trust it was decided amongst the Practice and PPG group members that a more locally sensitive questionnaire survey would be beneficial. A small task group met to design the tool. Once the initial design was completed other members of the PPG were given the opportunity to comment. The questions identified facts and used a form of opinion scale for self assessment, noted as the simplest way to measure a persons’ strength of feeling. The questionnaire has been provided at Appendix 1.
- 5.2 It was noted that the self measurement could be influenced by personal characteristics, so that responses could reflect differences in individual characteristics as well as differences relating to their experiences. The responses were therefore considered subjective.

## **6. RELIABILITY AND VALIDITY**

- 6.1 Qualitative surveys which explore experiences, where “truth” is necessarily subject-orientated are difficult to justify in terms of reliability and validity. By its nature the relatively small survey had low validity. Nevertheless the questionnaire tool had face validity in that the questions made sense and elicited the desired opinions and information.
- 6.2 It is possible that reactivity during data collection could have affected responses. The presence of the PPG representative could have influenced people to take part in something they would ordinarily choose to avoid. Any member of the public attending for a medical appointment has the potential to be feeling anxious. Furthermore, influences such as appointments running late due to emergencies of demand that affect waiting time could influence a person’s judgement. It is also impossible to gauge the affect that people who are naturally suspicious about motivation behind such surveys has on their responses or indeed whether any particular circumstance influenced whether people, such as those in the PRG participated.

## **7. PILOT STUDY**

- 7.1 For reasons of practical expediency the survey tool was only piloted amongst individuals within the PPPG who would be directly participating in the survey data collection. This resulted in clarification and minor amendments to the layout and language in tool before wider circulation.

## **8. DATA COLLECTION**

- 8.1 Once the rota for attendance of PPG attendance was confirmed, the target population for the face to face questionnaire distribution was agreed, the questionnaire tool was distributed electronically giving a timescale for return. The email was sent by the practice to PRG members requesting return by Friday 23 March 2012.

## **9 DATA ANALYSIS**

- 9.1 The completed questionnaires were analysed in two ways. The questionnaire responses to questions were summarised in tables. Responses were also presented as a visual graphic form so that the strength of opinion was visual rather than numerical. The last section of the questionnaire contained narrative responses and these were analysed to identify themes and draw out relevant comments.

## 10 FINDINGS

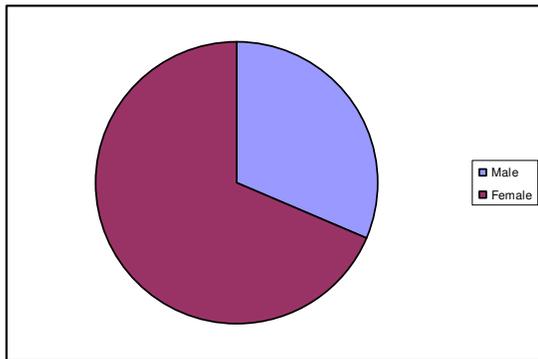
The major findings came from the six sections of the questionnaire. These provided a wealth of responses which illustrated the similarities as well as variations in opinions. The extent of this report has limited the presentation of findings and although it may not have been possible to do justice to the volume of comments, attempts have been made to give a reasonable flavour, including various quotations to illustrate points of apparent significance or general concern. Frequency tables have been included in the report and graphs have been recorded within the appendices. The discussion of findings is presented separately. A profile of all respondents has been presented initially, to provide a background against which findings may be viewed.

### 10.1 PROFILE OF RESPONDENTS

A total of 480 registered patients [n=480 representing 4.5% of the Practice population] completed the questionnaire survey. A profile of these people, in terms of their gender is shown in diagram and table 1 below, illustrating that more than twice the number of responses came from women than men.

Diagram 1: Gender of respondents? n = 480

Table 1: Gender distribution

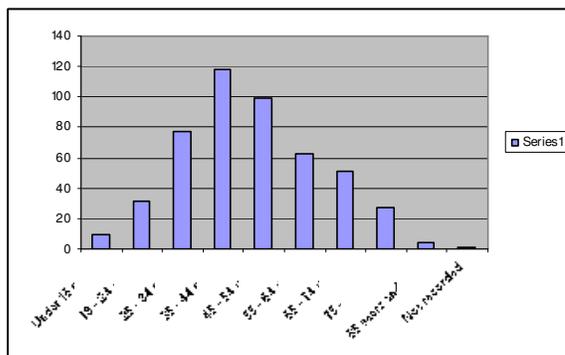


Are you male or female?	
Male	151
Female	329

The responses indicated the largest group of responses came from people aged 35-44 years, almost a quarter of the total and the smallest group 85 years and over (see diagram and table 2 below). This distribution is likely to reflect the profile of the surgery sessions at the time the PPG members were present. Even so the survey has managed to gain a spread of responses across different age groups to gain a wider view of public opinion.

Diagram 2: Age group of respondents

Table 2: Age distribution



Please tell us which age group you are in		
Under 18 years	9	1.88%
19 - 24 years	31	6.46%
25 - 34 years	77	16.04%
35 - 44 years	118	24.58%
45 - 54 years	99	20.63%
55 - 64 years	63	13.13%
65 - 74 years	51	10.63%
75 - 84 years	27	5.63%
85 years and over	4	0.83%
Not recorded	1	0.21%
	480	100.00%

n = 480

Due to anonymity it is not possible to draw conclusions about factors that influenced the response rate. Anecdotally, the biggest known factor appeared to be the presence of the PPG members in the reception area.

## **10.2 QUESTIONNAIRE RESPONSES**

The summary below covers the overall responses to questions in section A - E in the questionnaires. The detail is provided at Appendix 2:

It should be noted that in view of the relatively small sample (n=480 4.5% of practice population) these figures have not been adjusted or standardised for direct comparison. Since this was an exploratory survey and response rates were not 100%, judgemental comparison about responses has been avoided. The following observations are noted:

- Responses to Section A questions 1 - 5 indicated that awareness of different booking methods varies. More than half the respondents were aware of the different facilities, the most well known being access to a telephone consultation. Awareness of booking telephone consultations with a nurse being least frequently recorded. .
- Responses to Question 6 indicated 90% people book appointments via the telephone. Only 11% use the on-line facility. One person referred to his wife being his usual route to booking an appointment.
- Responses to Section B Question 1 indicated that although the majority of people find it very easy of fairly easy to get through on the telephone, a proportion of people involved in the survey have not tried the telephone facilities available. A small minority between 19 (4%) and 43 (9%) across the different options indicated the telephone is not very easy or not at all easy.
- Responses to Section C indicated a significant number of people were unaware of out of hours arrangements for seeing a doctor.
- Responses to Section D question 1 indicated the majority of people find getting into the building very easy (337) or fairly easy (115). 28 people indicated it was not very or not at all easy.
- Responses to Section D question 1 indicated more than 50% people find the receptionists very helpful and more than 90% find them either very helpful or fairly helpful. 32 people (6.6% indicated receptionists were not very or not at all helpful.
- Responses to Section E question 1 indicated more than two thirds of people (339, 70%) prefer a particular doctor. 30% see their preferred choice of doctor always or most of the time and 8% never or almost never. 64% responses indicated finding it easy of fairly easy to get an appointment with the Doctor of their choice and 30% do not find it easy. The remaining respondents indicated they had not tried or did not have a preference.

Narrative responses in section G gave qualitative opinions and comment or suggestions for improvement.

## **10.3 ANALYSIS OF COMMENTS**

The questionnaire invited patients to make comments on their experiences including suggestions for improvement. Just over one third of the 480 survey respondents (177, 36.9%), added comment in Section G. A review of the comments highlighted some common themes and these have been adopted for the following analysis.

### **10.3.1 General Perception of Surgery Services**

A significant number of non-specific positive comments regarding the surgery, the doctors and nurses were received (47 out of 229) which ranged from rating the surgery very highly to showing a general level of satisfaction. Examples included:

*No complaints. Brilliant surgery one of the best I've ever used.*

*I don't think I could have received better care or support during a recent long illness*

*Been coming for 20 years surgery is fantastic*

*I have been a patient here for very many years and am very thankful for all the care received*

*Fantastic service always - have lived here for 16 years and have complete admiration for everyone here thank you.*

*I have no complaints about the surgery and think the service and availability is excellent*

*Overall a nice practice to visit with helpful staff*

In contrast, only a small number of non-specific negative comments were received (5 out of 229). Examples included :

*Some doctors / nurses could improve their "bedside manner" too*

*More duty of care from doctors less condescendence more respect for patients less administrative mind*

### **10.3.2 Performance of Receptionists**

A range of comments were received with respect to patient interaction with receptionists including face to face and telephone conversations. In total, 32 comments received were in relation to the conduct of receptionists and a significant proportion were negative, indicating room for improvement. Specific issues highlighted included :

- Dealing with patients in a courteous manner
- Perception that receptionists were at time stressed
- Staff should give priority to person waiting over other tasks
- Handling of telephone calls during peak periods

These comments should be considered against the survey results which indicate an overall satisfaction in patient experience.

### **10.3.3 Online and SMS Services**

Several patients commented that they found the SMS appointment reminder service beneficial.

A small number of comments made suggestions on ways to improve online services further (10 out of 229) :

- Extend online appointment booking capability to children's appointments.
- Extend online facility for booking appointments with nurse.
- Extend online facility for booking telephone appointments.

Overall, comments received indicated a high level of approval for the online services that are currently available.

### **10.3.4 Appointments**

A range of comments were received regarding the availability of appointments (27 out of 229) which covered the following topics :

- Need to improve availability of Evening and Saturday appointments.
- Need to improve availability of same day appointments
- Priority should be given to young children for same day appointments
- Need to Improve availability of appointments for doctor of choice

Several patients highlighted concerns about getting urgent appointments for their children.

More than one person commented on need to improve availability of appointments for midwife.

### 10.3.5 Waiting Times

A number of patients expressed concerns about waiting times (18 out of 229). Comments suggest that waiting times beyond scheduled appointments are invariably 20-45 minutes and little information is provided on :

- Length of waiting time
- Reason for doctors running late

Comments indicated that doctors running late is a common occurrence.

### 10.3.6 Patient Experience of Visiting Surgery

A number of comments were received concerning the experience of visiting the surgery. An overwhelming number (54 out of 229) concerned parking. Specific issues highlighted :

- Number of parking spaces available
- Number of disabled parking spaces available
- Inappropriate parking impeding pedestrian access
- Difficulty with parking and getting in and out
- Issues with mud and leaves in car park

The total number of comments received about matters other than parking was small amounting to 10 out of 229. However, these comments highlighted the following issues :

- Doors too heavy
- Privacy around reception area
- Mixed comments about waiting room – decor, chairs, comfort
- Improvements required to accommodate buggies and young children
- Access to drinking water
- Need more high back chairs in waiting area

These were isolated comments with an equal number providing negative and positive comments regarding the waiting area. For example :

*The surgery is always very clean, the screen and posters are good and staff and doctors are very friendly and helpful*

*Reception rooms (waiting area) is just not very nice. Need to b more clean, user friendly it feels like you are at the cinema, very poor impression in general*

### 10.3.7 General Suggestions

A number of ad hoc suggestions where received which the surgery may wish to consider :

- Test results should be given out by doctor or nurse, not receptionist
- Extend services to include dietician and podiatry

- Confirmation of result online or perhaps even make results available online
- Separate appointment for blood test should be unnecessary
- Call back service outside of fixed telephone appt session
- Designation of family doctor

## 11 DISCUSSION

This questionnaire survey intended to gather insights and opinions to identify where improvement activities could be of most benefit. In attempting to achieve this there are a number of issues raised by the methodology used and the subject area.

### 11.1 ISSUES RELATED TO METHODOLOGY

Traditionally surveys involve taking a representative sample that can be used to understand and / or predict directly or indirectly the behaviour of members of a group. Findings in this survey have limitations in relation to the sample used. Although 480 completed questionnaires were returned and the overall response rate was 4.5% of the registered population, the responses came from people in contact with the surgery in a particular timescale and the response amongst the age groups was not equal proportions. This in part was a likely consequence of the selective availability of the PPG membership administering the survey during the week and the self selection amongst on the virtual PRG membership. However within the limitations of time and resources available and the nature of the exercise this was considered a reasonable attempt to elicit feedback from the registered population.

Within the questionnaire design, an anomaly emerged in the way people responded which was not picked up in review before wider roll out. In section E *Seeing the Doctor you prefer*, where people did not have a preference (question 1), question 3 was open to interpretation. A number of people referred to this question as “Not Applicable” or “had not tried”. To include these comments in the analysis, an additional group was added to the summary. For other respondents it was likely that they interpreted this question as how easy it was to get an appointment from their choice of those available. These comments were included alongside all others.

In spite of attempts to eliminate bias, the affect of circumstances in the Practice during the week of the survey activities and the circumstances of the individuals concerned are likely to have had an impact. It is impossible to gauge the extent to which this distracted the focus away from the potential wider opportunities to make improvements. Furthermore the overall maturity of respondents may also have influenced the general impressions conveyed in response. The acceptance of the status quo may well have been a preference of the older age group, whilst younger individuals may have been more challenging. In addition the Practice itself operates in a changing environment where quality assurance and risk management are important influences as well as the commercial nature of current NHS policy. It is therefore important that we grasp this opportunity to develop and improve the service to keep pace with the environment in which it operates.

Another possible influence to responses was that the comments box potentially provided a cathartic opportunity for many respondents, allowing them to express concerns without being able to ascertain any apparent responsibility that respondents had for the circumstances.

The questionnaire tool had the potential to introduce bias of respondents because of the subjectivity as well as the unknown individual differences in experience of people who responded. This places limitations on interpretation. With high insight a wider pilot and longer timescale may have generated a wider impression of the experiences of services.

## **11.2 ISSUES RELATING TO THE REPORTED EXPERIENCE.**

The Practice was required to complete the questionnaire survey exercise by the Hampshire Primary Care Trust. The questionnaire was one strand underpinning their wider approach to engage and involve the public in improving services.

The responses indicated experience varies in a number of ways. The outcomes indicate there is an opportunity to improve services and the communication between the patients and the practice so that experience can in turn be improved.

## **12 CONCLUSIONS AND RECOMMENDATIONS**

The current services the Practice provides are a valuable component of healthcare infrastructure in primary care. The purpose of this report was to describe the outcome of a questionnaire survey undertaken between 17 – 23 March 2012. The report has provided a largely descriptive account of the responses from a questionnaire survey distributed to registered patients and completed by a total of 480 people (4.5%).

The responses indicate there are opportunities to improve the communication between the patients and the practice so that experience can in turn be improved. It is recommended that the Patient Participation Group work with the practice to use this feedback to inform action plans for improvement in the coming months.

**APPENDIX 1 QUESTIONNAIRE SURVEY TOOL**

**CHINEHAM PATIENTS PARTICIPATION GROUP SURVEY MARCH 2012**

Please take a few minutes to fill out this anonymous and confidential survey. We welcome your feedback. Thank you for your participation.

**A. Appointments at the Surgery** *Please answer to all the questions Yes or No*

Were you aware;	Yes	No
1. That you can book a telephone consultation with your GP		
2. That you can book an appointment online		
3. That you can book a telephone consultation with your nurse		
4. That the surgery has extended opening hours		
5. That you can get your test results by phone		
6. How do you normally book your appointments to see a doctor or nurse? <i>Please tick all the boxes that apply</i>		
In person		
By phone		
On line		

**B. Getting through on the telephone**

<b>1. In the past 6 months how easy have you found the following?</b> <i>Please put a tick in one box for each row</i>	Haven't tried	Very Easy	Fairly easy	Not very easy	Not at all easy
Getting through on the phone					
Speaking to a Doctor on the phone					
Speaking to a Nurse on the phone					
Obtaining test results by phone					

**C. Opening Hours** *Please answer Yes or No*

Are you aware of the Out of Hour's arrangements for seeing a doctor?	Yes	No

**D. Arriving for your appointment**

**1. How easy do you find getting into the building at the surgery?** *Please put a tick in one box*

Very easy	
Fairly easy	
Not very easy	
Not at all easy	

**2. How helpful do you find the Receptionists at the Surgery? Please put a tick in one box**

Very	
Fairly	
Not very	
Not at all	

**E. Seeing the Doctor you prefer**

**1. Is there a particular Doctor you prefer to see at the Surgery?**

*Please answer Yes or No*

<b>Yes</b>	<b>No</b>

**2. How often do you see the Doctor you prefer? Please put a tick in one box**

Always or most of the time	
A lot of the time	
Some of the time	
Never or almost never	
Not tried at this Surgery	

**3. How easy is it to get an appointment with the Doctor of your choice? Please put a tick in one box**

Very easy	
Fairly easy	
Not very easy	
Not at all easy	
Not tried at this Surgery / Not applicable *	

\* NB. this response was added by people who completed the questionnaire survey when other options did not apply

## F. Some questions about you

The following questions will help us to see how experiences vary between different groups of the population. We will keep your answers completely confidential

### 1. Are you male or female?

Male	
Female	

### 2. Please tell us what age group you are in?

Under 18 years		55 – 64 years	
19 – 24 years		65 – 74 years	
25 – 34 years		75 – 84 years	
35 – 44 years		85 years and over	
45 – 54 years			

## G. Additional comments or suggestions for improvement

*This patient survey has been designed and conducted by the Chineham Patients Participation Group on behalf of the Partners of this surgery. We meet regularly at the Surgery with Partner's representatives to pass on compliments, raise concerns and put forward ideas for improving the services for patients. Involvement provides an interesting insight into how the Practice operates. If you feel you would like to help us to make a difference, please enquire at Reception, visit the Chineham Medical Practice website*

<http://www.chinehamsurgery.co.uk> or email us at [chinehamppg@hotmail.co.uk](mailto:chinehamppg@hotmail.co.uk)

Thank you.

## APPENDIX 2 SUMMARY OF FINDINGS

### 1. Summary of Findings Sections A - E.

Comparing actual responses the following summary information is noted.

Section A Appointments at the Surgery (n=480)

Figure 1: Questions 1 – 5 Were you aware:

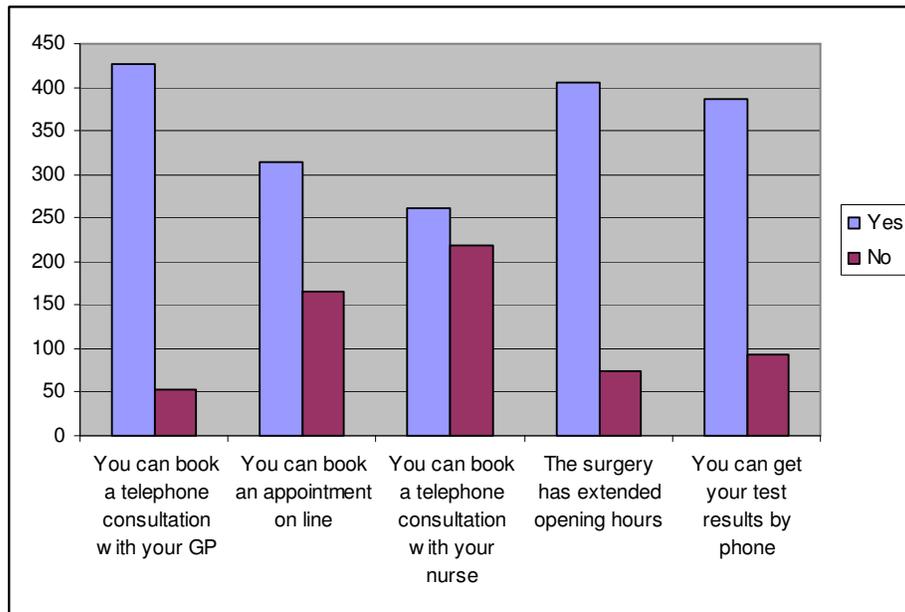


Table 1: Questions 1 – 5 Were you aware (n=480)

Appointments at the surgery were you aware that	Yes	%	No	%
1.You can book a telephone consultation with your GP	426	88.8%	54	11.2%
2. You can book an appointment on line	315	65.6%	165	34.4%
3. You can book a telephone consultation with your nurse	261	54.4%	219	45.6%
4. The surgery has extended opening hours	405	84.4%	75	15.6%
5. You can get your test results by phone	387	80.6%	93	19.4%

Figure 2: Question 6: How do you normally book appointments:

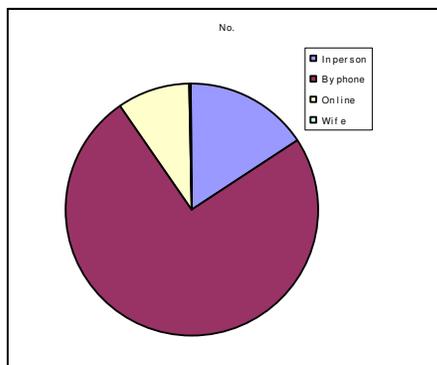


Table 2: Question 6

How do you normally book appointments to see the doctor of nurse?	No.	%
In person	93	19.4%
By phone	435	90.6%
On line	55	11.5%
Wife	1	0.2%

Section B Getting through on the telephone (n=480)

Figure 3: Question 1: Getting through on the telephone

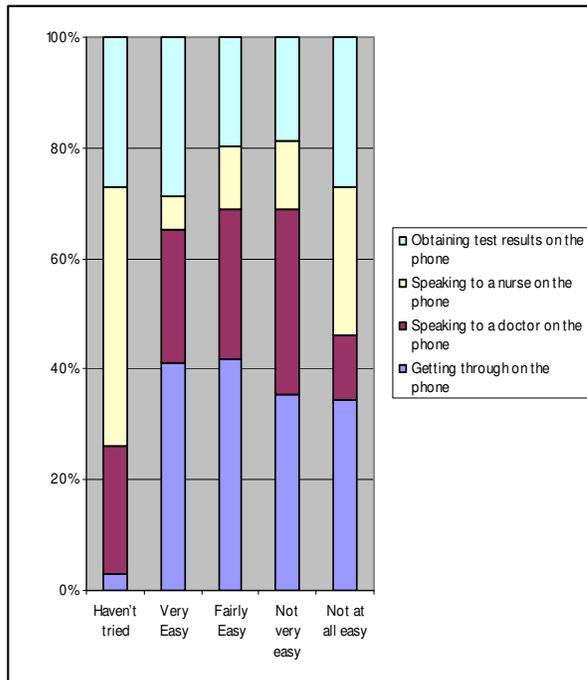


Table 3: Question 1

In the past 6 months how easy have you found the following?	Haven't tried	Very Easy	Fairly Easy	Not very easy	Not at all easy
Getting through on the phone	23	192	222	34	9
Speaking to a doctor on the phone	186	113	146	32	3
Speaking to a nurse on the phone	373	29	59	12	7
Obtaining test results on the phone	215	134	106	18	7

Section C Opening Hours (n=480)

Figure 4: Opening Hours

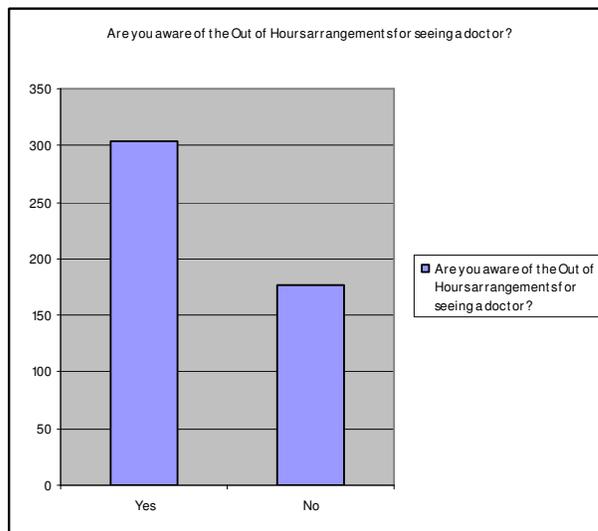


Table 4: Opening Hours

Opening hours	Yes	%	No	%
Are you aware of the Out of Hours arrangements for seeing a doctor?	304	63.3%	176	36.7%

Section D Arriving for your appointment (n=480)

Figure 5: Question 1. How easy do you find getting into The building at the surgery?

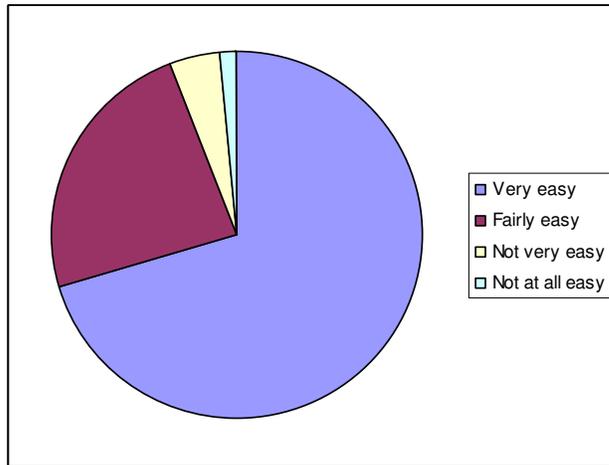


Table 5. How easy getting into the building

How easy do you find getting into the building at the surgery?	
Very easy	337
Fairly easy	115
Not very easy	21
Not at all easy	7

Figure 6: Question 2. How helpful do you find the receptionists at the surgery?

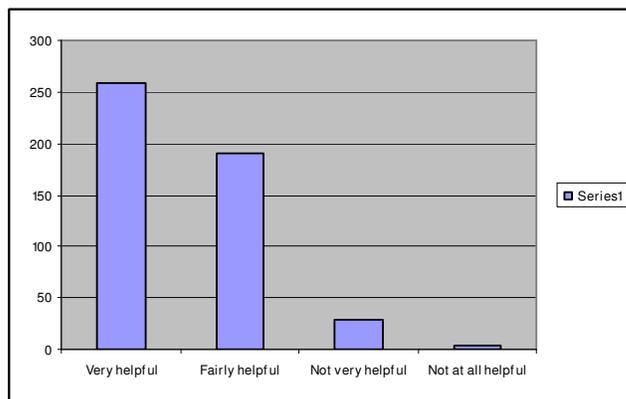


Table 6: How helpful are receptionists

How helpful do you find the receptionists at the Surgery		
Very helpful	258	53.8%
Fairly helpful	190	39.6%
Not very helpful	28	5.8%
Not at all helpful	4	0.8%

Section E Seeing the Doctor you prefer (n=480)

Figure 7: Question 1. Is there a particular Doctor you prefer?

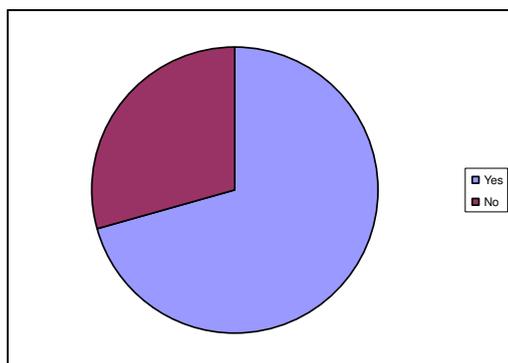


Table 7: Doctor you prefer

Is there a particular doctor you prefer to see at the surgery		
Yes	339	70.6%
No	141	29.4%

Figure 8: Question 2. How often do you see the Doctor you prefer?

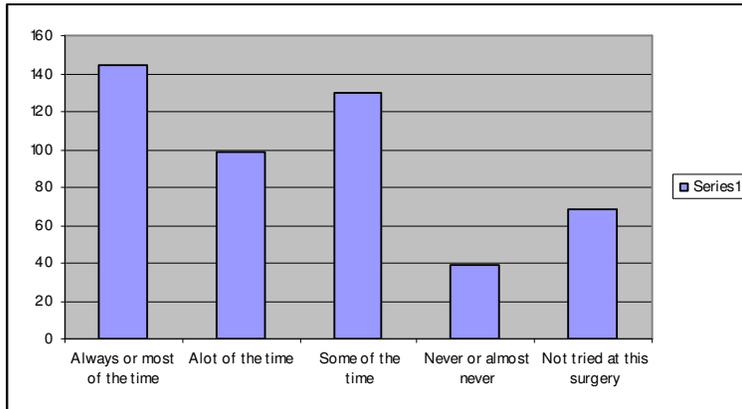


Table 8: How often

How often do you see the doctor you prefer		
Always or most of the time	144	30.0%
A lot of the time	99	20.6%
Some of the time	130	27.1%
Never or almost never	39	8.1%
Not tried at this surgery	68	14.2%

Figure 9: Question 3. How easy is it to get an appointment with the Doctor of your choice?

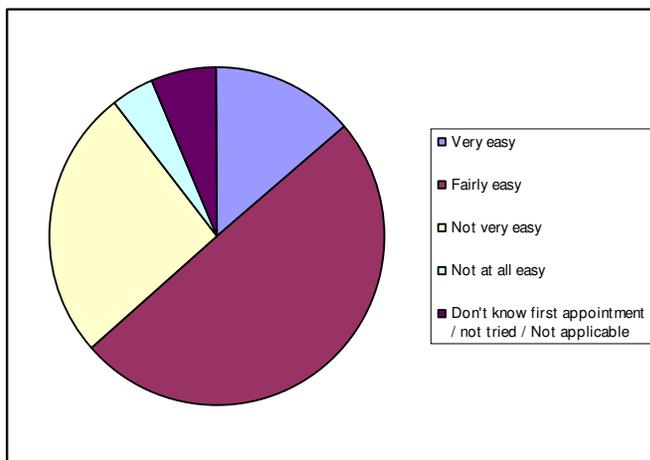


Table 9: Appointment with Doctor of choice

How easy is it to get an appointment with the doctor of your choice		
Very easy	67	14.0%
Fairly easy	237	49.4%
Not very easy	125	26.0%
Not at all easy	20	4.2%
Don't know first appointment / not tried / Not applicable	31	6.5%