The Patients Participation Group (PPG)

Chairs Report on Patients Survey 2013/2014 – Otterfield Medical Centre

The Patients Participation Group (PPG) discussed the General Practice Assessment Questionnaire (GPAQ) - Patient's Survey and the results for 2013/14, and more specifically, some observations and issues raised by Dr Paramanathan and the Chair of the PPG on the survey. This took place at the PPG meeting on 4th March 2014. The main points discussed were:-

- <u>The format and wording of some of the questions in the survey</u>. The PPG had felt that there could be some misinterpretation of the wording/format used for the survey *question responses* (due to cultural, social, age and educational profile of respondents to the survey) which in turn could lead to distortion of statistical data/results. The Chair had written to the originators of the GPAQ survey (as agreed at the previous PPG meeting) who have responded positively in agreeing to fully consider our suggestions on wording and contents when the survey is next reviewed and revised.
- Managing user expectations of the surgery (including unrealistic expectations). This was a common issue raised/discussed and included several aspects of the report vis-à-vis:
 a) Waiting time in the practice (excluding 'open' surgery mornings as first come-first served),
 b) Phone access to the doctors/nurses (although the practice is way above the national average in these two areas)
 a) Answertimes when 'phoning the surgery early morning
 - c) Answer times when 'phoning the surgery early morning.
- <u>The urgency of seeing a GP</u> was also discussed and, as in item 2 above, highlighted that there is a natural differential in individual perspectives of what is considered to be urgent or available as opposed to 'convenient'. (This is a common self-interest factor within today's social/cultural environment throughout all elements of daily life to meet individual's priorities rather than the/their actual 'need').
- 4. <u>The overall expectations being met</u> were very favourable towards the survey indicating a high satisfaction factor of 90% plus across the range of surgery activities. (This is achieved by scaling up the survey sample to reflect the total patient numbers assuming that as the survey is an across the board random sampling it would be reflective of the patient base). However, it was agreed that we must not be complacent about the 10% who do not hold the same view/level of satisfaction about surgery areas i.e. average or below (as this could be a significant number of patients). Further agreement was reached that there is a need to ensure we address these perspectives to provide a holistic 'Centre of Excellence' *professional* approach and profile from the first point of contact when walking in the surgery door/surgery contact to walking out the door for <u>all</u> practice users.

Actions to address the matters raised were tendered to the group and these will be considered for incorporation into the Practice action plan for 2014/15 e.g. 'phone line management/systems, information dissemination to patients, qualitative specialist 'role specific' training/awareness for specific areas. This will enhance the practice to provide our desired totally professional 'patient focused approach' being perceived by all our patients/users.

Further details on the report discussions and other items raised at the PPG on 4th March 2014 meeting can be found in the PPG minutes of the same date.

Malcolm J Houghton-le-Chapple Chair Patients Participation Group