

GP Patient Survey 2008/09

1. Purpose

The purpose of this report is to advise Board members of the results of the GP Patient Survey 2008/09, conducted during the period January to March 2009.

The full results of this Survey were made available to NHS Brent and the public on 1^{st} July 2009.

2. Background

The GP Patient Survey was first established in 2006/07 by the Department of Health (DH) to support PCT assessment of general practices' achievement against national standards set out in two Directed Enhanced Service Agreements (Access and Choice and Booking). These agreements linked results from the administered surveys with the rewards made to GP practices.

The Survey also provided information to PCTs and practices on whether or not patients were satisfied with their practices' existing opening hours.

The DH have given commitment to running the Survey for at least the next three years, with Surveys moving from an annual 'snapshot' of patient views to providing more frequent, quarterly feedback. 2008/09 was the last annual survey, with the first quarterly Survey issued in April 2009 (results due shortly).

The patient sample used for the Survey is drawn from the National Health Application and Infrastructure Services (NHAIS) database and is used by Ipsos MORI (independent survey specialists) on behalf of the DH, under the terms of the Data Processor Agreement (DPA) that the DH has put in place.

3. The GP Patient Survey 2008/09

In line with commitments made in the NHS Next Stage Review, the Survey was developed for 2008/09 to give patients a greater say, including whether practices are providing not just fast, convenient access but an all-round quality patient experience. The new Survey helps support delivery of NHS services that are more responsive to patients' needs and wishes, with approximately 5¹/₂ million registered patients invited to take part each year.

The new Survey covers a wider range of issues that are important to patients when visiting their GP practice. These include questions on:

- Aspects of the surgery environment and helpfulness of reception staff
- Getting through on the phone, including for consultations or test results
- Accessing GP appointments (for the first time including questions supporting assessment of QOF patient experience indicator achievement on 48 hour access and advanced booking)
- Waiting time in the surgery
- Seeing a preferred doctor
- Satisfaction with practice opening hours

- Aspects of the consultation with doctors and nurses at the practice
- Overall satisfaction with care received
- Planning of care for patients with long term conditions
- Patient experiences of accessing local out of hours care

The questionnaire continues to include a number of demographic questions to assist with analysis of patient's responses (eg age, ethnicity, employment status etc).

4. NHS Brent Results

The comparative table below offers a brief summary of the 2006/07, 2007/08 and 2008/09 results:

Averages	Response Rate	Telephone Access	48 hour GP Access	Advanced Appointment (2+ days ahead)	Specific GP	Average across all areas
2006 National Average	44%	86%	86%	75%	88%	84%
2007 National Average	41%	87%	87%	77%	88%	85%
2008 National Average	38%	70%	84%	76%	77%	77%
2006 NHS London Average	35%	83%	81%	74%	84%	81%
2007 NHS London Average	32%	84%	83%	76%	84%	82%
2008 NHS London Average	30%	67%	80%	74%	71%	73%
2006 NHS Brent Average	31%	81%	83%	71%	82%	79%
2007 NHS Brent Average	28%	82%	83%	73%	80%	80%
2008 NHS Brent Average	25%	65%	78%	69%	68%	75%

See Appendix 1 for graphical representations of the above.

a. Response Rate

There has been a significant decrease in NHS Brent's response rate for the 2008/09 Survey, with a fall in respondents of 6%, from 31% to 25%. This is in line with the national response rate decreasing from 44% to 38%. London has seen a decrease of 5%.

Overall NHS Brent has seen its average result drop to 75%; however this is again in line with both National and London averages decreasing.

b. Telephone Access

NHS Brent has seen a significant drop in its performance in the area of telephone access, from 82% in 2007 to 65% in 2008. Nationally and across London, performance has also decreased.

The lack of telephone lines available to patients in individual practices is of concern. A number of practices have adopted premium rate 0845 numbers to enable upgraded telephone systems, however these are not recommended by the PCT in line with DH guidance on the use of premium rate telephone numbers, which are to be banned.

Several practices have adopted alternative methods of contact for patients such as internet appointment booking. This has the added benefit of releasing pressure on telephone lines, thereby improving the ease of telephone access for patients who can only use this method. It should be noted, however, that the survey only asks about telephone access.

c. 48 Hour Access to a GP

Locally, performance is 5% down on 2007/08. Nationally and across London, performance is down 3% for this indicator compared to 2007/08.

The Access Improvement Transformation Programme (see Initiatives below) will enable individual practices to be supported in analysing more closely their demand and capacity, with a view to creating an even balance between both elements.

The advent of the GP led health centre which opened on 1st July 2009 in Wembley Centre for Health and Care, means that in reality 100% of patients are able to see a GP within 48 hours as they can attend as walk in patients. However, this is not operated as a referral mechanism from practices in the way that the previous Walk-in Centre did. Further work needs to be undertaken with those practices that have a large number of patients attending the health centre as walk in patients to understand why this is, in order to introduce measures to improve access in a patient's own practice.

d. Advanced Booking

NHS Brent has seen a 4% drop in performance against this indicator, from 73% in 2007 to 69% in 2008. There is a 1% drop nationally from 77% in 2007 to 76% in 2008, with a 2% drop across London, from 76% in 2007 to 74% in 2008

The PCT adopted a Local Enhanced Service (LES) for Extended Opening Hours in 2008, in advance of the release of the national Directed Enhanced Service (DES). The national target for the introduction and roll-out of extended opening hours was 50% of practices signed up by December 2008. NHS Brent achieved 71% of practices offering this service by December 2008, significantly achieving the target.

This will have a positive impact on improving access and responsiveness across Brent, for patients wishing to book an appointment in advance and at a time convenient for them. It is anticipated that achievement against this indicator will raise performance in the Survey results for 2009, by which time the majority of Brent practices will be offering extended hours.

e. Booking an Appointment with a Specific GP

NHS Brent has seen a significant drop in performance against this indicator, from 80% in 2007 to 68% in 2008. This reflects both the national and London averages, which have also decreased significantly.

The late introduction of a specification for extended opening hours may have contributed in some way to the lower than expected results of the Survey overall, as it was conducted from January 2009 and asked patients to consider their experience over the last six months, ie August 2008 to January 2009.

5. Future Initiatives

The Patient Survey is increasingly used as a measure of performance for the PCT for commissioned services from GP practices. NHS Brent therefore needs to consider how best to utilise the results from the survey to encourage individual practices to improve services where patients indicate that there are lower levels of satisfaction or access.

As a result of NHS Brent's overall performance in the surveys, an Access Improvement Transformation Programme will be undertaken, which will support a number practices in demand and capacity mapping, reduction in DNAs, increased efficiency and an increase in the number of appointments available weekly. The Programme will also encourage a best practice/shared learning methodology which will enable all Brent practices to gain from the Programme's aims. Particular emphasis will be placed on those practices that have consistently under-achieved in the Patient Surveys.

This Programme will also enable practices to be benchmarked against each other, London-wide and nationally to enable the PCT to gain a broader understanding of the impact of improved Access both from a patient and practice perspective.

It is imperative that the methodology used is embedded both in practices but also within key teams in the PCT. This will ensure continuous improvement of Access results, greater patient satisfaction and an ethos of improved Access that is central to performance management of commissioned services.

Continued awareness of the Minor Ailments Scheme will also assist in reducing cultural dependency on GP practices.

The PCT may also wish to consider other initiatives that have proved successful around the country in continuously driving up patient satisfaction with Access:

- Recognising that over 85% of the UK population has access to a mobile phone, a text messaging reminder system could be implemented to reduce DNAs and support specific Health Campaigns such as flu vaccinations, medication reviews, screening
- Audit incoming telephone lines per patient head, with additional lines being installed if required. Improve management of incoming telephone lines, for instance a dedicated appointments or test results line.
- Wider use of IT, for instance patients accessing practice services via the Internet to make/amend appointments and order repeat prescriptions

online. Patients are then able to access services at a time and place convenient to them, freeing up both telephone lines and reception staff.

- Increased use of telephone triage and consultations, for which training could be provided.
- Establishment of a formal access forum, with action learning sets for practice managers, designed to share best practice and promote learning on access issues.

6. The GP Patient Survey 2009/10

NHS Brent is required to seek year on year improvements in patient satisfaction with GP services, as measured by the GP Patient Survey. The new quarterly GP Patient Survey will provide data not only on patient satisfaction but also on their wider experience of the quality of GP services.

The following table illustrates the Survey timetable for 2009/10:

	Survey Issued	First Reminder	Final Reminder	Quarterly Results	Annual Results (aggregated survey results from all quarters)
Quarter 1	April 2009	May	June	Mid-August	May 2010
Quarter 2	July 2009	August	September	Mid- November	(QOF results data to PCTs)
Quarter 3	October 2009	November	December	Mid-February 2010	July 2010 (full
Quarter 4	January 2010	February	March	Mid-May	results publication)

7. Conclusion

The Survey results for 2008/09 have shown a decrease in performance generally for NHS Brent. The proposed Access Improvement Transformation Programme will seek to address this, with a programme that is sustainable and maintains activity both in practices and the PCT, so that the full benefits can be realised long-term.

It will be important to ensure all improvements seen as an outcome of this Programme are replicated across the PCT.

It is anticipated that the positive impact of Extended Opening Hours and the GP led health centre will be seen in the Survey results for 2009/10.

8. Next Steps

Expressions of interest for programme manager to lead the transformation programme from existing PCT staff will be sought and Brent GP to provide clinical leadership. A steering group will be stabled by early October including PBC representation.

Contract performance management in 2009/10 will focus particularly on reputed poor access.

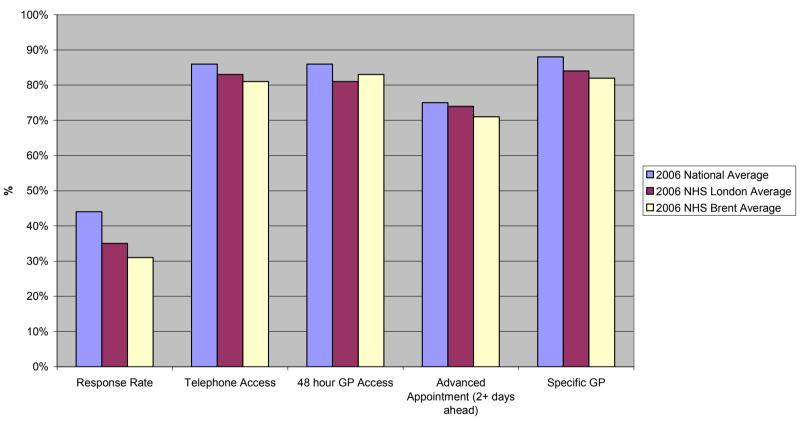
9. Recommendations

The Board is asked to note the results of the National GP Patient Survey 2008/09 and the proposed actions to be taken:

- to improve achievement scores for subsequent Patient Surveys and;
- to improve patient reported satisfaction with access to primary care.

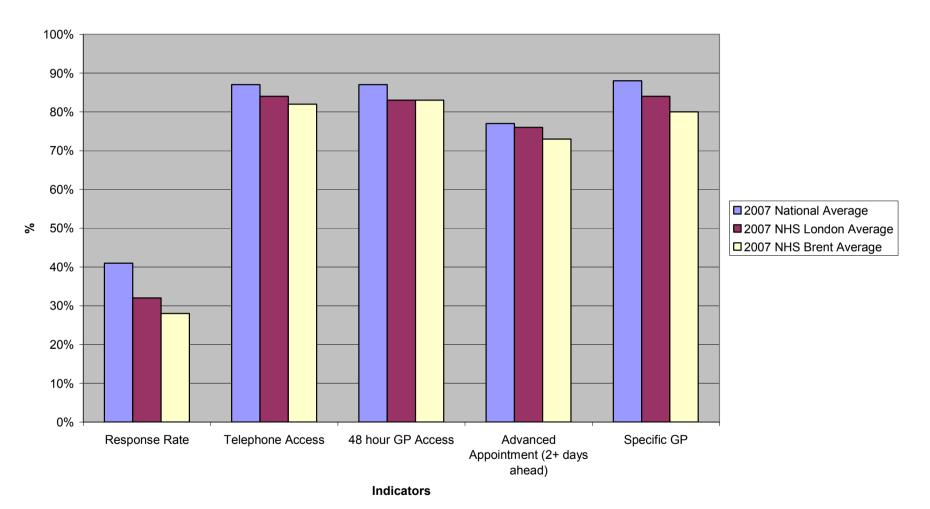
Paula Beare GP Commissioning Manager (Interim) September 2009

Appendix 1

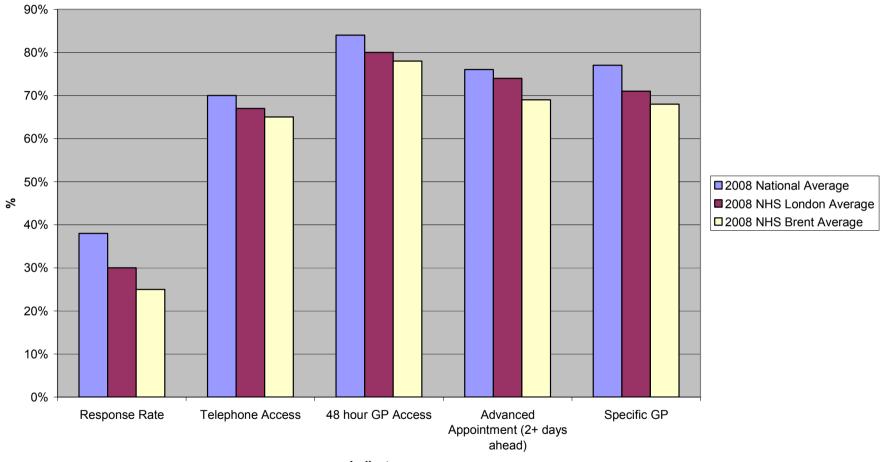


GP Patient Survey - National, London and Local Averages - 2006/07

Indicators



GP Patient Survey - National, London and Local Averages - 2007/08



GP Patient Survey - National, London and Local Averages - 2008/09

Indicators