

Adding Value at Every Point of Contact

Shortening the Customers Journey

Achieving Definitive Resolution

PCN Access Survey

Dr Jefferies & Partners and GP At Hand

Date of Meeting: 27th November 2024

Held at: Dr Jefferies & Partners 292 Munster Road

Attendees:

S.P – GPAH Patient
A.B – DJAP Patient
M.E – DJAP Patient
Alaa Mohamed – NWL ICB
Dr Frank Schneider – PCN Lead
Rita Bright – Business Partner
Marie Baker – Contracts Manager
Sally Collins – HR & Patient Services Manager

Minutes:

FS opened the meeting and welcomed everyone, explaining that he will be facilitating the meeting.

FS explained that 10 patients had been invited to the meeting but have not arrived.

The meeting started with all attendees introducing themselves.

FS then went through some housekeeping rules and the rules of engagement.

FS explained the reason for the meeting explaining that NWL ICB undertook a patient survey regarding accessing GP surgeries in H&F.

FS explained that the first part was an online survey which was sent out to around 104,000 patients over the age of 14 who are registered with GPAH and DJAP.

FS informed the group that a total of 2332 responses were received.

All three patients said that they had not received a survey.

FS explained that this meeting was the second part of the survey to share the results with our patients.

FS shared a printout of our Focus Group Powerpoint.



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FS begun to go through the powerpoint explaining that Slide one shows that majority of responses are from GPAH.

MB explained to the group that DJAP have around 14,000 patients whereas GPAH have around 100,000 patients.

FS went onto the next slide "I am satisfied with how easy it is to contact my surgery during opening hours"

FS looking at the results to this question it seems there are more patients that agree than disagree.

FS continued onto the next slide "I can book a same day/ next day appointment for urgent matters/care"

FS it is showing that around 60% of patients say they cannot book.

A.M asked if the patients agreed with this.

AB & ME said they don't normally have any problems booking an appointment.

SP asked if we have the split of GPAH pt and DJAP patients.

FS replied no we do not have this information.

FS continued to go through the slides and informed the group to raise any questions if they had any.

FS asked the group if they had any experience using the online consultation service.

ME said that they had used it many times and found it very helpful after submitting a patches they received a telephone call within a few minutes.

SP said there is something similar at GPAH.

FS replied that GPAH do not use triage but it is something they are looking into.

FS continued going through the slides.

FS asked if anyone here uses the NHS app.

ME said they do and they find it very useful.

SP said they downloaded it last week and it was fine but the information that she wanted was not on there.



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FS explained that it might be that once it was downloaded and the request was approved they would be able to see more information.

AM said that ordering prescriptions on the app is very easy.

ME asked how secure is the app.

FS responded that it has the highest security that you can get in this country and it is your right to share or not share the information is your choice.

FS recommended that patients try the app.

FS continued to go through the slides and a discussion was had on the Qualitative Insights.

AB mentioned when she contacts the surgery and it is busy she uses the call back option and has found this very helpful.

ME said that she also uses the call back system and has not had to wait long to receive the call back from the practice.

SP said that she had used the call back system in the afternoon and received a call at 9:30 at night.

FS asked SP if she had received a message to inform her that she would receive a call back by a certain time.

SP replied no.

FS said that he would feed this back to GPAH.

FS then discussed slide referring to "Contacting the surgery"

SP said that this needs to be reviewed as it was hard to work out what option to select on the phone menu.

FS asked SP if she had used the Chat facility.

SP said that she had tried it previously but it had not worked.

FS explained that there are changes currently taking place at GPAH with new systems coming into place which will be more seamless.

FS then asked had the patients encountered queues at reception?

AB said that whenever she has been into reception at DJP and if the receptionist is on the telephone they always put the person on hold and deal with her at reception first.



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ME said that she uses the check in screen at DJP

AB said that she had used the check in screens but on a couple of occasions this has not worked.

ME commented that all the reception staff are always very helpful and do their best

FS explained that all the reception team always try their hardest.

SP said that the staff that she encounters on the telephone at GPAH are always very helpful.

FS explained that GPAH have introduced self check ins.

A discussion was had on getting urgent appointments

AB said that sometimes she needs an urgent appointment but cannot get one and is told to call back the next day, but she understands that you only have a certain number of appointments. But I am always offered a call back.

SP asked if it flagged up on the system that you are a carer.

MB said at DJP we have pop ups that flag up on the record.

SP said that during COVID it was an amazing service as she is a carer and was getting constant support.

FS also said that GPAH have pop ups on the patients records and explained that there is a form for the patient to complete to inform them that they are a carer. FS went through the process of this.

FS then discussed advanced booking appointments.

SP said that GPAH used to have complex care GPS but that has now changed.

FS said GPAH had changed their model as they only had a few GPs dealing with complex care and they were getting overloaded and they decided that complex care is everyone's responsibility.

SP asked how many GPs were at GPAH.

FS said around 100, but we also have a multidisciplinary team and we try to fit the problem to the correct clinician.

A discussion was had on online consultation services.

FS explained the GPAH system



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MB explained DJP system.

RB explained the Patches system used at DJP and explained that if the issue is urgent then this is not the appropriate platform.

RB continued and said that around 90% of patches were dealt with by patches without needing a follow up call.

A discussion was had around the suggested improvements.

RB discussed that DJP have a weekly capacity meeting that looks at the overall number of appointments offered each week and also the number of calls received are reviewed.

RB went on to say that DJP sent a survey out early in 2024 to their patients to access the capacity and 54% said they can get an appointment the same day.

RB said that another survey is being sent out shortly.

A discussion was had with regards of patients that had not received the NWL survey as only the digital patients would have received it.

MB explained that DJP for the last year or so done a piece of work to capture who were our digital and non digital patients and how it would be helpful to consider both sets of patients when sending out surveys.

AM said there were meetings that had been arranged which non digital patients could attend. There is one on the 11th December 2024.

FS said that it would be good if these group meetings could be advertised a bit more.

AM said that he would email the details to us.

FS closed the meeting and thanked everyone for attending.