

2018 PPG Patient Survey Action Plan

Comment	Potential Action	Who By / When
How about holding a Health & Wellbeing day	Organise an event	Dawn / Keith – 15 th September 2018 Completed
My normal Dr is at Newton but not always open – waste of time and petrol to get to Long Stratton	Review opening hours in line with expansion of Long Stratton and population / housing developments	Keith & Partners – 5 Year Plan Included on 5 yr plan for review
More toys in the waiting room for children	Review to take place for easy clean toys that can be kept tidy. Perhaps use PPG Book Fund to purchase?	Keith & Nurse Lead from IC point of view – End October 2018 Agreed funding £200 from PPG at meeting in Sept. Awaiting purchase
Front desk staff on reception chewing gum	Talk with any potential staff who may have done this. Ensure it doesn't happen in future	Keith & Alison – Immediate & Ongoing Completed – raised with MOS who has now left
Difficult getting appointments to see registered GP	Full time salaried GP starting 6 th September	Keith & Partners to monitor & review as part of 5 year plan Immediate decision made not to alter Triage service which works well for On The day Appts. Will continue to monitor as part of 5 year plan
Online prescription ordering is a problem	Continue working with EMIS on patient access especially related to selecting Newton which at present we cannot do	Keith, Helen, Dawn End of October 2018 Still outstanding issue for Newton pts Jan 2019 but we have introduced a messaging system for notifying prescription ready to collect
Concerns raised over expansion plans for Long Stratton & surrounding areas	We too are very conscious about the pressures that will be brought to bear with circa 2,500 homes being built in the area	Keith & Partners. Ongoing review and communication with NHS England, the CCG and South Norfolk Council – 5 Year Plan Meetings for neighbourhood plan with parish council now attended by either Dawn or Keith
Air conditioning required in the Waiting Room	Will contact Air Con suppliers for quotation, however this is a complex issue as there is no external wall to vent the aircon through. Cost will be a major factor but we are not dismissing the idea	Keith to follow up End October 2018 Cost is prohibitive therefore need to look at stand-alone units for short term hire over peak summer. KB to contact HSS Hire in May 2019 to place hire order for June, July & August
Music in the waiting room is sometimes too loud and shouldn't be tuned to a commercial radio station	The reason we tune to Radio Norwich is for local news and traffic updates for Pt awareness along with a mix of easy listening songs which aren't too	Volume reviewed by Keith daily on walkround – no intention to change station as yet No further action - completed

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	“niche” Comment has been reviewed seriously but apart from volume control – no further action being taken at present	
Contacting over 75’s outreach team – answerphone for messages would be helpful	Need to look at in line with the whole of the Over 75’s provision of services due to Heidi moving on and Stuart wishing to reduce his hours	Resolution required by Keith & Mini by end of October 2018 No dedicated line available. Whole team approach to be reviewed on return of Lead Nurse November 2019
Car park gets very full sometimes	We need to look at parking provision for staff and pats as a whole study. Difficult to create more space for parking but illegitimate parking needs to be challenged more clearly i.e. School pick up times etc	Keith to revisit possibility of parking monitoring & controls before end December 2018. Look at ways to create additional spaces / stop abuse of the car park area Car park re lined and “Staff Only” area highlighted clearly. We have put article in January Practice Newsletter. No further action
An online booking service for appointments would be helpful	Need to promote “Patient Access” as a facility more widely	Helen, Alison, Keith, Dawn - Ongoing
Well woman clinic for simple things like blood pressure testing etc	Possible to look at as a service in future once Nurse recruitment has settled down	Nicola, Keith – Review in October ready for Spring 2019 to be reviewed on return of Lead Nurse November 2019
Access to surgery for early & late appointments	Surgery is part of the locality project for Improved Access on Mondays from 07:30 – 20:00. This will include a rotational Friday evening, Saturday and Sunday morning access to GP	September 2018 for 1 year trial period Completed through until Sept 2019 when IA contract goes out to tender.
Access to phlebotomy service more frequently	We are looking into upskilling staff into an HCA role in order to improve access to phlebotomy services	Keith, Nicola, Partners October 2018 & ongoing Admin MOS trained as basic phlebo, ongoing action as she needs to gain confidence and have exposure to clinics alongside existing HCA’s
Concern raised that Thyroxine is only prescribed in monthly amounts when, with little change to dosage 3 months supply would be more efficient	Need to deal with specific medication issue directly with registered GP as there may be other mitigating factors	Keith to discuss Thyroxine with Paula & Dustyn to obtain clinical guidance on this specific query Each pt needs review on individual basis. As this was an anonymous comment we cannot take this forward as an action. We need to balance with medication wastage

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Pharmacy closing over lunchtime period	This is due to allowing protected time for staff to cope with workload, it isn't to allow staff to have their lunch breaks. Staff take lunches before and after the protected time	Keith to review with Paula about ongoing dispensary strategy Still outstanding
Long Stratton Surgery for Long Stratton residents – not always convenient to travel to Newton	Newton is only ever offered as an option for Long Stratton residents to help speed up the time for pts to gain access to their GP. If pts do not wish to travel there is no pressure to do so	Continue offering Newton as an option on an ongoing basis
Ear syringing at Long Stratton not Chet Valley / Wymondham	In order to offer this service consistently we would need to invest in suitable equipment and training. It has been discussed with the Partners recently and it will be raised again as part of the Unfunded Work Offer from the CCG	Keith / Partners to review options prior to committing to offer the service. Pre Christmas 2018 Decided that we are not going to be doing this service due to staffing and skill mix within the current team
The time taken to get through to reception for an appointment can be excessive	This depends on call volume. We have invested in a call monitoring screen which clearly updates the number of callers in the queue and logs call volume / time taken to answer	No further action. Keith & Alison to monitor reception team to ensure we are as efficient as we can be
Specific issue of a misdiagnosis of bladder cancer	Cannot discuss specific issues in a survey summary such as this – it would breach confidentiality, and be inappropriate	
A couple of the Doctors have been rude and made me feel silly	We are certain that this would not have been intentional by the GP's concerned. Without specific and timely details we cannot follow up. In future if anyone has an issue like this it is recommended that they speak to the Practice Mgr at the time that the issue occurs	Keith to reiterate process for pts raising concerns with treatment / behaviour of GP's
I feel the older generation get a raw deal	We deal with all pts equally no matter age, gender, race, or religion	No action to be taken
A Doctor should call you back after a hospital appointment to discuss any findings	All correspondence from the hospital is reviewed by GP's and if there is anything requiring follow up then they will do so. They cannot afford	No action to be taken

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	the time to call pts if there is nothing to be discussed	
Doctors should listen to their pts we know our bodies and know when not right	Totally agree however again we are not able to put an action in place about a specific concern like this. If unhappy with GP consultation please contact The Practice Manager in a timely manner to allow effective follow up	Action on individual basis by Keith
Get notes up to date	We do strive to maintain contemporaneous notes that are up to date. Again – specific detail required for PM to follow up	Action on individual basis by Keith
Pharmacy doesn't always have the drugs in stock prescribed by Dr so have to do a return trip	We try hard to maintain stocks of as many drugs as we possibly can. Sometimes for specific drugs we need to place orders and get them in as a one off. Keith & Paula to keep note of regularly ordered "one off drugs" and see if we can compile a stock holding	Keith & Paula to review in more detail There have been specific issues with suppliers that are out of our control.
Certain Drs need to be careful what they say in front of Children when in an appt	Totally agree however again we are not able to put an action in place about a specific concern like this. If unhappy with GP consultation please contact The Practice Manager in a timely manner to allow effective follow up	Action on individual basis by Keith
Doctors don't check hospital letters / emails – still awaiting results after 6 months	All correspondence from the hospital is reviewed by GP's and if there is anything requiring follow up then they will do so. A specific issue like this needs to be followed up. Please contact the PM or registered GP to discuss	No further Action
More mental health – tired of being forced to fight for my anti depressants. Mental health care is shocking.	We understand the frustration around prescribing anti-depressants however every GP has the individual's best interest at heart on every medication review. The	Event held 15 th September open for all residents of Long Stratton whether patients or not.

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	provision of mental health services in the community is of concern to the Practice which is partly why we have put so much time and energy into our Mental Health and Wellbeing event held 15 th September	
Reception staff can be difficult to deal with sometimes	We have looked at each individual situation whereby a pt and receptionists view differs. Ongoing “service training” is being provided where necessary	Continuing training for staff around service levels We are planning all practice training sessions over the coming year – one of which will be dedicated to “service”
Doctors seem to change frequently	We have been through a period of change, and unfortunately are about to go through another with 2 full time Partners stepping down to Part time, and a Full time salaried GP joining the Practice. We try hard to provide personal lists and continuity of care but this is against a backdrop of change and pressure from a number of sources. continual review of list size and profile by GP to ensure consistency is maintained.	No action to be taken – Keith & Helen ongoing
Toilet doors outside require signage asking users to switch off light and close doors	Very good point that we can action quickly and easily	Keith to follow up by end of October
Patients feel that they want to be communicated to about why they have to wait so long to see their own GP	Look at designing a slide for the TV explaining the time that GP’s have got, dividing into “on the days” and pre booked appts to illustrate why it takes up to 3 weeks to get in. Also focus again on wasted DNA appointments. Keith to add a piece in the newsletter.	Keith & Dawn to design suitable slide for TV and put short section in the newsletter Next newsletter in April will feature this section
Newton surgery needs to be open for longer	We do not have the clinical capacity at present to open Newton longer than it already is. As the Patient population grows in this area, and if we were able to attract another GP to help cover the growth then it is possible that opening may	KB & Partners – mid term strategy planning

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	get extended. Not a short term fix – probably part of 5 year plan	
I always struggle when asked personal questions via telephone or at the front desk. Triage system is frustrating	If you wish to speak in private when at the desk, then please feel free to ask to do so. We have a separate room if required. Over the telephone is a little more difficult, and yes the Triage system can sometimes be frustrating, but it helps us direct you to the correct service first time, rather than potentially being something a nurse can happily deal with, being dealt with by a Dr	Triage system will be remaining in place
Check In machine out of order 50% of the time	Agree, we had an issue which lasted some time to get resolved. Since the system fix went in there have been no further issues. Maintain focus on the check in screen and resolve in a more timely manner in future.	Ongoing monitoring by Reception Team
Receptionists sometimes not approachable, stern and abrupt	Training to take place for all reception team on “customer service”	Keith by End November We are planning all practice training sessions over the coming year – one of which will be dedicated to “service”
111 service needs to be updated with the fact that you close at 6pm and not 6:30	We have a Dr on call facility in place between 6 and 6:30	Keith to review and if required take necessary action
Several staff in the dispensary but they ignore you like you are invisible	Any specific issues of this need to be dealt with at the time. Pts should ask to speak to PM if there is a specific situation. We have CCTV in place which can be reviewed. To be fair, dispensing is a job which requires concentration and focus when medication is being picked and dispensed. Accuracy is of paramount importance. If a dispenser is in the middle of a process it is sometimes hard to stop half way through	Keith & Paula to review as part of the Dispensary Strategy We are planning all practice training sessions over the coming year – one of which will be dedicated to “service”
The old Patient Access APP worked well – why did it have to be updated?	This was an EMIS upgrade outside of our control. We actually agree	No action

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Pharmacy is the weak link – slow and can be a long queue, not always ready in time and prescriptions have been lost	Each individual issue that is identified is dealt with and followed up	Keith & Paula to monitor and react to each query positively We are planning all practice training sessions over the coming year – one of which will be dedicated to “service”

	Completed
	Outstanding