

# NEWSLETTER

**BEDFORD HILL FAMILY PRACTICE**

**Issue 4**

**April 2012**

## Patient Survey Report

### 1. Introduction

In August 2011 a notice was placed in the practice newsletter inviting patients to join the "Patient Reference Group". Patients were also given flyers when they attended their doctor or nurse appointment, notifying them of the "Patient Reference Group". An extract from the newsletter notice is listed in the next paragraph.

*"We aim to gather around 100 patients from as broad a spectrum as possible to get a truly representative sample. We need young people, workers, retirees, people with long term conditions and people from minority ethnic groups".*

### 2. Patient Group Profile

About 17 patients responded to the notice and together with the 10 existing patient group members, they were invited to a meeting on 22 September 2012. Only 7 patients were able to attend but the meeting went ahead. Also in attendance were practice staff made up of doctors, nurses, phlebotomist, practice manager, deputy practice manager and reception manager.

### 3. Key Areas of Priority

Amongst other issues, the "Patient Participation Enhanced Service" was explained to patients. We discussed the need to promote and engage patients through the use of a Patient Reference Group and to seek the views of the surgery population through the use of local patient surveys.

We had a discussion about what the patients thought the key areas of priority at the practice were. Patients gave their thoughts and the following key areas were highlighted and agreed upon for the patient survey:

***Introduction of GP Telephone Consultations / Triage, Satisfaction with Provision of Services, New Service Provision, Harmoni Saturday and Sunday Urgent Care Service, Online Services Awareness, Home Phlebotomy Service for housebound patients***

### 4. Patient Survey

The patient survey questionnaire was compiled by the practice and agreed by the patient group before being distributed to patients. The questionnaires were handed out to patients as they arrived for their appointments and also appeared as a "pop up" on the practice website. Two hundred and forty seven patients participated in the survey over a 2 month period in November and December 2011.

The results were collated and analysed using the "Survey Monkey" website. A copy of the results were distributed to the patient group members and the practice team before the next patient group meeting was held. This enabled everyone to come prepared to discuss the findings and help develop an action plan.

### 5. Action Plans

At the patient group meeting on 26 January 2012, the patient survey results were discussed and summarised. Most of the comments were positive, however, there were a few concerns highlighted in survey. It was agreed at the meeting that the following key issues, highlighted in the survey, would be focussed on.

#### A. Telephone Consultations

One of the questions in the survey was whether patients were in favour of a GP Telephone Triage Service. 86.2% of respondents were in favour but they were keen for the triage service not to replace face-to-face consultations with the GP. Very often GPs are able to deal with certain requests over the telephone, e.g. doctor's certificate, ...cont on page 2

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## Phlebotomy (Blood Taking) Service

Many of you may be that aware the surgery runs a walk-in "blood taking" clinic during the week. Over the years there have been requests to employ a second Phlebotomist to reduce the long waiting times, particularly in the mornings. You will be pleased to know that we have now appointed a second Phlebotomist at the practice since the beginning of April 2012. The Phlebotomist will be working two hours a day (8.30am-10.30am) to assist with the long waiting times in the mornings. Please remember that you will need to bring a blood test request form from your doctor in order to have your blood taken. The Phlebotomist is not permitted to take bloods from children under the age of 16 years. Children are advised to go to St George's Hospital, Blackshaw Road, Tooting, Tel: 020 8672 1255.

## Patient Survey Report ...continued

repeat medication requests, medical reports, etc. Should a patient need to be seen, a GP appointment will be arranged for that day. It is hoped that by introducing telephone consultations, more appointments would be freed up giving better patient access. The patient group members were eager for the telephone consultation service to be tried and if successful, offered to patients on an ongoing basis.

### Action Plan

- The practice will meet during the month of February to look at the operational issues and how best to proceed with telephone consultations.
- It is hoped that the telephone consultation service trial be introduced before the end of March 2012.
- Telephone consultations last an average of 3 minutes compared to face-to-face consultations, currently averaging 16 minutes. As a result of the change, the number of advanced appointment slots would increase.
- Before implementing the telephone consultation service, the practice will publicise the impending changes on the website and in the waiting room.

### B. Appointment System

The surgery recently increased appointment capacity by an extra 4 sessions per week to help deal with patient demand. The current appointment system favours emergency (on-the-day) access as opposed to advanced access (within 1 week). This setup is to help reduce the burden on an overstretched Accident & Emergency Department at St George's Hospital.

#### Current Appointment System

40% of slots released 6 weeks in advance / 40% of slots released on-the-day (8.00am) / 20% of slots reserved at the end of surgery / Extras are seen at the end of morning and evening clinics. It is also important to note that patients are not turned away if they want to be seen, although waiting times may be longer as doctors will see these patients after their routine clinics.

#### Action Plan

- Patient Education – Draw up a flow chart of the current appointment system, to be publicised in the waiting room, newsletter and practice website.
- Reception Training – Ensure all receptionists are re-trained regarding how the appointment system works and to ensure that they are all relaying the same message to patients.
- The practice will introduce a telephone consultation system, where patients will be given the choice between a face-to-face consultation or a telephone consultation.
- Publicise the Harmoni out-of-hours walk-in service at Balham Health Centre on week-ends and bank holidays. (Website, newsletter, posters in waiting room).
- Release the 20% of slots (normally reserved at the end of surgery) 6 weeks in advance. This would increase advanced appointment access by an average of 30 slots daily.

### C. Telephone Access

The survey also highlighted difficulties in getting through to the receptionist on the telephone and receptionist manner, although patient group members had not experienced the latter.

#### Action Plan

- Ensure adequate staff cover during the peak periods.
- Explore changing the telephone routing system so that admin queries are diverted to the Administration Team, e.g. choose & book queries, insurance reports, etc.
- To arrange customer care refresher training for all receptionists.

### D. Phlebotomist (Blood Tests) – Long Waiting Times

The following were highlighted as reasons for the long wait to see the Phlebotomist:

- The service is a walk-in clinic; therefore most patients tend to come in the mornings between 8.30am and 10.30am. (Most patients did not want to change to an appointment system – survey 2010).
- The practice also provides Phlebotomy to other surgeries in Wandsworth, therefore the high demand.
- On Tuesdays, the midwives based at Balham Health Centre refer patients to the Phlebotomy clinic for antenatal bloods.

#### Action Plan

- Display waiting times in the waiting room so patients are aware of delays and could decide to return at a less busy time.
- Design a patient information leaflet about the Phlebotomy Service, include what to expect and potential waiting times.
- Train up a 2nd member of staff to assist the current Phlebotomist with taking bloods, especially during busy periods.

## Wandsworth Clinical Commissioning Group

Many of you may have heard about the changes to the NHS. From now onwards General Practitioners (GPs) will be responsible for a large amount of NHS money. GPs in Wandsworth have formed themselves into a "Wandsworth Clinical Commissioning Group". The group will be responsible for buying services from hospitals and other healthcare providers. Wandsworth Primary Care Trust whose task this is now, along with all other PCTs, will be abolished in 2013. From then on GPs will be in control of over 60% of the total NHS budget of £100 billion.

With the money allocated to Wandsworth Clinical Commissioning Group, GPs in the Borough will have the task of purchasing all the services that patients need. For example, if your GP thinks you need an x-ray you will be referred to a hospital. This costs money. The hospital will charge the GP an agreed NHS tariff for conducting the x-ray. So it is with all other services. Every time a patient is referred to an outpatient's clinic at a hospital the hospital will charge the GP the agreed NHS tariff.

This system has been in force in the NHS since 1990. It is known as the purchaser / provider split. Primary Care Trusts, at the moment, are the purchasers of services, and hospitals are the providers. After 2013 in our area, Wandsworth Clinical Commissioning Group will replace Wandsworth PCT as the purchaser of services for patients.

This Group will itself be divided into three, what are called clusters. These clusters have been in existence for some time. They are, the Wandle Cluster, the largest of the three and the one to which Bedford Hill Family Practice belongs; the other two are West Wandsworth and Battersea.

Doctors from the Wandle Cluster of 23 surgeries have been meeting for some time. There is in addition a Wandle Cluster Patients Group, which meets on a regular basis and has patient representation on the Wandle Cluster Board.

Each surgery in the Cluster has patient representation. The two patient representatives from Bedford Hill Family Practice who attend the Wandle Cluster Patients Group are Barbara Bohanna and Mike Squires.

The Wandle Cluster Patient Board meets every six weeks and if there is anything you would like raised at the Board, don't hesitate to contact Barbara or Mike, via the surgery.

**Mike Squires (Patient Rep)**

## Local Involvement Networks (LINKs)

Local Involvement Networks (LINKs) were established by law in 2007 to ensure that service users, carers and the local community are involved in changes and developments in health and social care services and that their views are heard by service providers. Wandsworth LINK, which is run by local volunteers including patients, service users and carers, has been working on various projects to try and improve services and bring users' and carers' views to the attention of local providers. Any Wandsworth resident or worker may join LINK. Membership is free and members may either just be kept informed or can get involved with LINK activities.

We are currently involved in a range of projects including evaluating care in hospital and homes for older people, trying to improve in-patient care for people with mental health issues, campaigning against reductions in midwife post-natal home visits and helping the new Clinical Commissioning Group to establish an inclusive patient and public involvement process.

Although LINK has only been operating fully for three years, the government's new Health Bill will replace LINK with a different organisation called "HealthWatch". HealthWatch will have a similar role to LINK but is likely to be run in a different way and to take on additional responsibilities such as providing information and signposting services.

If you would like to join LINK, (soon to become HealthWatch) or if you would like to make any comments about local services in complete confidence, please contact us in one of the following ways:

Phone 020 8516 7767 / Email: [sarah@wandsworthcareall.org.uk](mailto:sarah@wandsworthcareall.org.uk) / Website [www.wandsworthlink.org.uk](http://www.wandsworthlink.org.uk)

**Jenny Weinstein (Chair, Wandsworth LINK)**

## Staff Update

### Joiners

Dr Levitt - Salaried GP (January 2012)  
 Dr Kamineni - Salaried GP (January 2012)  
 Pamela Fleming - Practice Nurse (November 2011)  
 Helen Brierley - Receptionist (March 2012)  
 Amanda Scandrett - Phlebotomist (April 2012)

### Leavers

Dr Rizvi - Salaried GP (January 2012)  
 Louise Johnson - Practice Nurse (October 2011)

### Reduced Sessions

Dr Ribeiro (Senior Partner) has reduced his sessions since January 2012 and now works on Tuesdays and Thursdays. He will continue to run the Diabetic clinic on Thursday mornings.

## Telephone Consultations

The patient survey carried out in November and December 2011 and subsequent action plan, highlighted the need for the practice to offer telephone consultations. A two-week trial of telephone consultations was carried out during the middle of March 2012. When patients called the surgery to book an appointment, they were given the choice of a telephone or face-to-face consultation. Patients who opted for a telephone consultation were contacted by a doctor and the problem dealt with over the telephone. However, if the patient still needed to be seen, an appointment would be booked for the patient on-the-day. The trial proved a success and many patients commented on what a good idea it was. In week one, 91 telephone consultations were made and 26 patients were subsequently seen at the surgery. In week two, 65 telephone calls were made and 20 patients seen at the surgery. In total 110 appointments were made available to patients that needed to be seen at the surgery. It is important to note that telephone consultations are regarded as a means of improving access and personal care, rather than acting as a barrier.

After the successful two-week trial, the practice will be implementing telephone consultations on a more permanent basis from the week commencing 16 April 2012. Like the trial, patients will be given the choice of a telephone or a face-to-face consultation. All doctors on duty will be participating and calling patients back at various times of the day. The doctor will assess the problem and recommend appropriate action such as a surgery appointment, home visit, hospital visit, advice or self care. The doctor could also give medical certificates or results of investigations.

We trust that the introduction of telephone consultations will help reduce appointment waiting times and increase the opportunity for patients to consult with their preferred doctor, leading to greater patient satisfaction.

### Patient Group Meeting

Our next patient group meeting will be held at the surgery on Thursday, 31 May 2012 from 7.00pm to 8.00pm. If you are interested in attending please contact Tracy Tester, Deputy Practice Manager on 020 8772 1748 to confirm your attendance.

### Practice Website

The practice is in the process of redesigning it's website to make it easier to navigate, with useful information about the surgery and the healthcare services we provide. We welcome any ideas and suggestions you may have about what to include and ways to improve our current website.

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## Easter Bunny - Colouring Competition



**Winner - Emma Barbulescu**

We would like congratulate 6-year old Emma Barbulescu for winning our Easter bunny colouring competition and the runner-up, 4-year old Dylan Forte. We hope you enjoy your Easter egg. The competition received a very good response and we would like to thank everyone for taking the time to enter. It was a difficult task to pick a winner because all the entries were SO GOOD! It put a huge smile on our faces to see such lovely works of art.



**Runner-Up - Dylan Forte**